EU-forschungsförderung in den Lebenswissenschaften Informationsveranstaltung



Munich 15 May 2012







HelmholtzZentrum münchen Deutsches Forschungszentrum für Gesundheit und Umwelt



Report from the Grassroots

Osborne Almeida



Max Planck Institute of Psychiatry, Munich

Something for everyone



Max Planck Institute of Psychiatry, Munich

Current FP7-funded projects



erc Gene x environment interactions in affective disorders: elucidating molecular mechanisms - Elisabeth Binder

Marie Curie Actions

Initial Training Network: NINA: Neuroendocrine immune networks in ageing -



Osborne Almeida, Dietmar Spengler Intra-European Fellowship: ArcAbetaCognition: The functional significance of soluble amyloid ß oligomers for learning and memory deficits in Alzheimer's disease - Osborne Almeida, Carola Romberg Intra-European Fellowship: StressAbetaCascade: Stress cascades and

Alzheimer's disease - Osborne Almeida, Raul Delgado

Small or medium-scale focused research projects



DORIAN: Developmental origins of healthy and unhealthy ageing: the role of maternal obesity (€ 3 m, 10 partners, 6 countries) - Mathias Schmidt

SwitchBox: Maintaining health in old age through homeostasis – Osborne Almeida, Mayumi Kimura and Joseph Zihl (LMU) (€6 m, 7 partners, 6 countries)

Stay alert – opportunities to grab!

Let your NCP/institutional EU Office help you!



ORIENTATION PAPER

prepared in connection with the FP7 2013 Work Programme in the area of Health research

Important notice:

This paper is made public at an early stage in the adoption process of the work programme to provide potential applicants with the currently expected main lines of the 2013 work programme. It is a working document not yet endorsed by the Commission and its content does not in any way prejudge the subsequent modifications by the Commission, neither the subsequent formal opinion of the Programme Committee nor the final decision of the Commission and the publication of the later work programme by the Commission are expected in mid-July 2012 via

http://ec.europa.eu/research/participants/portal/page/cooperation. Only the adopted work programme will have legal value.

Information and topic descriptions indicated in this orientation paper may not appear in the final work programme; and likewise, new elements may be introduced at a later stage. No essential information, such as indicative budgets per call/area, will be provided by the Commission until the final work programme is adopted. Any such information disclosed by any other party shall not be construed as having been endorsed by or affiliated to the Commission.

The Commission expressly disclaims liability for any future changes of the content of this document.

Two health calls are proposed, following the two-stage procedure: FP7-HEALTH-2013-INNOVATION-1 with 35 topics and indicative deadline 02 October 2012 and

FP7-HEALTH-2012-INNOVATION-2 with 2 topics and indicative deadline 25 September 2012

DRAFT VERSION 19 April 2012

WARNING: Not legally binding! This is a draft working document, which can change at any time.

Innovative health research 2013 - working document, 19 April 2012, not legally binding	
I CONTEXT	
II PROPOSED CONTENT FOR CALLS 2013	Hooray!
0. HORIZONTAL TOPICS FOR COLLABOLATE OPROJECTS RELEVANT FOR THE WHOLE OF THEME HEALTH 12 1. BIOTECHNOLOGY, GENERIC TOOLS AND MEDICAL TECHNOLOGIES FOR HUMAN HEALTH 13 1.1 High-throughput research 13 closed 2013 13 1.2 Detection, diagnosis and monitoring 13 1.3 Suitability, safety, efficacy of therapies 15 1.4 Innovative therapeutic approaches and interventions 18 2.1 Integrating biological data and processes: large-scale data gathering, systems biology 20	Something for us!
2.1 Integrating biological data and processes: large-scale data gathering, systems biology 20 2.1.1 targe-scale data gathering 20 2.1.2 Systems biology 23 Closed 1013 23 2.2.2 Research on the brain and related diseases, human development and ageing 23 2.2.1 Brain and brain-related diseases, human development and ageing 23 2.2.2 Human development and ageing 27 Closed 2013 27 2.3 Translational research in major infectious diseases: to confront major threats to public health 28 2.3.1 Anti-microbial drug resistance. 29 2.3.2 HIV/AIDS, malaria and tuberculosis 31 Closed 2013 31 2.3.3 Notentially new and re-emerging epidemics 31 2.3.4 Neglected infectious diseases 32 2.4 Translational research in other major diseases 32 2.4 Translational research in other major diseases 32 2.4 Logiovascular diseases 36 2.4.3 Diabetes and obsity 39 Closeed 2013 39 2.4.4 Rare diseases 39 Closeed 2013 39	0
Closed 2013 39 3.1 Translating the results of clinical research outcome into clinical practice including better use of medicines, appropriate use of behavioural and organisational interventions and new health therapies and technologies. 39 3.2 Quality, efficiency and solidarity of healthcare systems including transitional health systems. 40 3.3 Health promotion and prevention. 40 3.4 International public health & health systems. 42 Closed 2013. 42	\bigcirc
4. OTHER ACTIONS ACROSS THE HEALTH THEME 42 4.1 Coordination and support actions across the theme 42 4.2 Responding to EU policy needs 47 47	Is this really for me2

WARNING: This is a working document, which can change until its publication. Applicant must refer only to the final published document. Please consult the following web page for updates http://ec.europa.eu/research/fp7/index_en.cfm?pg=health and for the final publication: http://ec.europa.eu/research/participants/portal/page/cooperation

What does the

HEALTH.2013.2.2.1-4: Patho-physiology and therapy of epilepsy and epileptiform disorders. FP7-HEALTH-2013-INNOVATION-1. Applicants are expected to use multidisciplinary strategies in support of basic, preclinical and/or clinical research on epilepsy and epileptiform disorders. The goal is to better understand the complex patho-physiology of epilepsy in order to develop novel preventative strategies in at-risk patients, improve diagnostic methods, achieve better patient stratification and put more effective therapeutics on the market. Research proposed may address key issues such as genomics of epilepsy and epileptiform disorders, mechanisms of ictiogenesis and epileptogenesis, prevention of the development of epilepsy after potentially epileptogenic brain insults, mechanisms and/or epidemiology of refractory epilepsy, identification of age- and aetiology-specific drug targets for input in drug discovery process.

Note: Limits on the EU financial contribution will apply and will be implemented strictly as eligibility criterion.

Funding scheme: Collaborative Project (large-scale integrating project).

One or more proposals may be selected.

Expected impact: This theme is expected to improve our understanding of the aetiology and mechanisms of epilepsy and epileptiform disorders. It will also help preventing the development of the disease after potentially epileptogenic brain insults. The presence of SMEs will help translating the molecular and cellular targets identified in basic and clinical research into a rational drug discovery process.

Additional eligibility criteria:

1. The requested EU contribution per project shall not exceed EUR 12 000 000.-

2. The estimated EU contribution going to SME(s) must be 15% or more of the total estimated EU contribution for the project as a whole. The SME status and the financial viability will be assessed at the end of the negotiation, before signature of the grant agreement.

Specified needs

but

sometimes vague

What to do?

- other's interpretations
- NCP/PO clarification

Check

Expected impact

Wow!

€€€€€

Observe

- Eligibility criteria[!]

Decision time, consider carefully...

Motivation

- Not just the CCCCE !*
- Science focused
 - interactive
 - more productive, access to unique knowledge and tools
 - networking, visibility (scientists are social animals, have egos!)

EC's expectations?

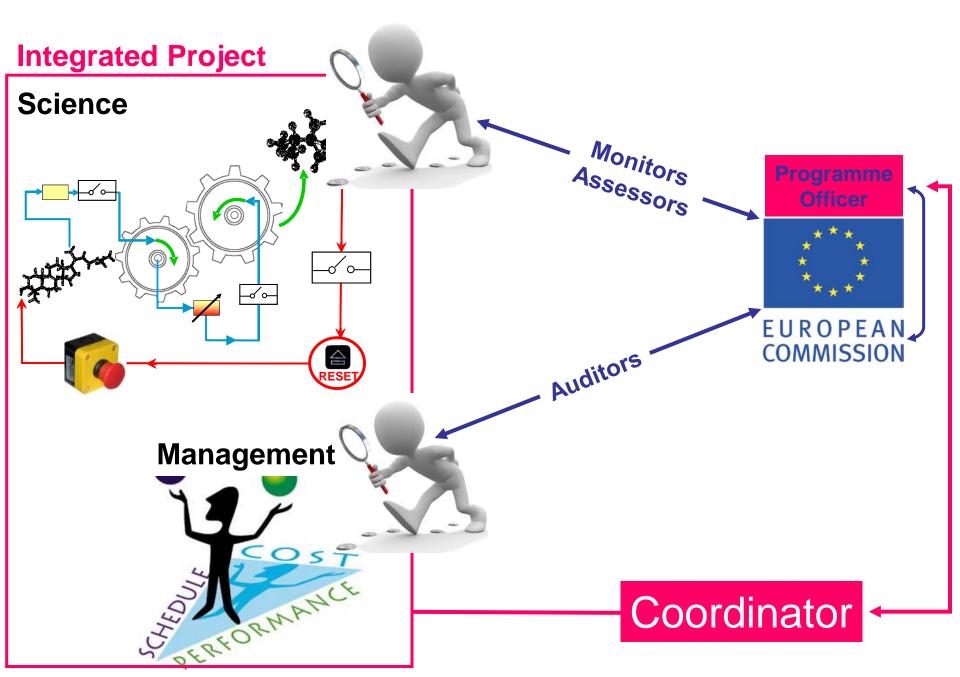
- Keep to Call specifications
- Interactive, coherent, competitive
- Community benefits (citizens, economy)
- Accountability (Deliverables)

How far will 6 million € go?*

- Keep focus

- Get fit for Europe
- Select partners based on expertise and complementarity
- Salaries include employer contributions (5 year postdoc costs ~€ 300.000)
- Cost models and institutional overheads (up to 60%)
- Equipment (cost degression)

Understanding the basic machinery



On your marks,

Science

- take initiative
- scout for potential partners (literature, other EU projects)
- organize core group proactive, innovative, committed
- schematize ideas/identify gaps (desirable partners)
- early "think tank" meeting (goals/partnership)
- Coordinator
 - committed communications skills time consensus builder organizational skills • infrastructure support • decisive and effective • responsive • understands research ethics, intellectual property rights, translational issues • knows EU procedures (applicant, partner, reviewer)
- WorkPackage (WP) definitions and Leaders
- solicit additional partners (evaluate: added value, expectations, also €)

Management

- institutional vs. private sector (count as SME; reference projects?) lucrative business (negotiate); no competing interests
- rapport with Coordinator, understand "scientists"
- familiarity with EU project rules, budgeting etc
- Stakeholders, advisors (can be done at later stages)



get set,

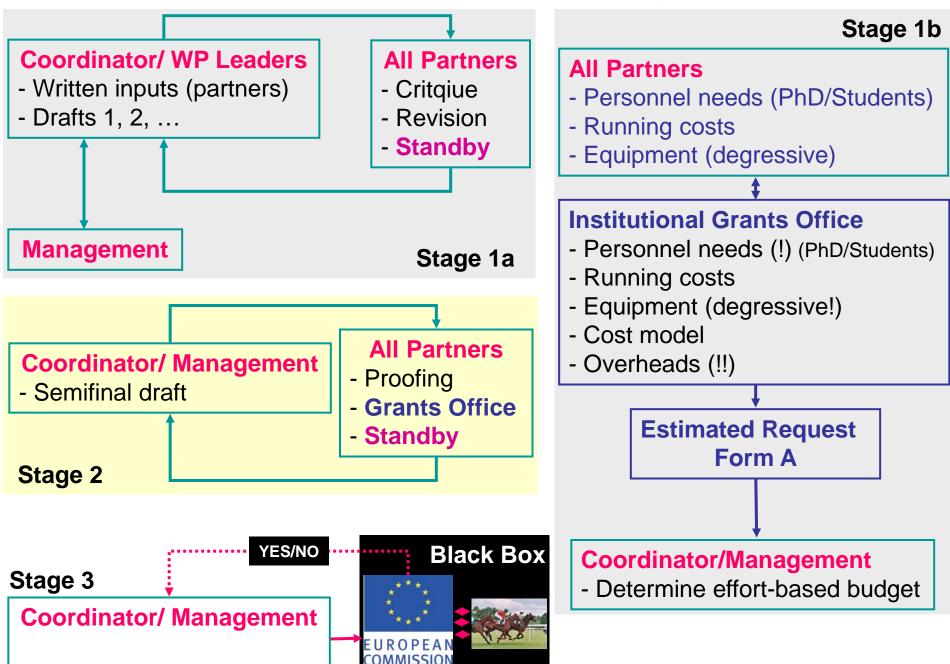
- Pre-planning meeting (core, potential partners)*
 - Coordinator's vision for project
 - Brief presentations of potential contributions
 - Focused discussion
 - Develop strategy



- Management issues and Timeplan (respect Coordinator's commitments!) and assign/define individual responsibilities (WP Leaders, ethics, IPR, liaison with private sector, training, dissemination)
- **Post-Planning Meeting** (Coordination/Management Team)
 - adjust plans to ensure adherence to Call text, scrutinize/propose interactions, check for coherence (PERT chart!)
 - communicate with individual/ all partners
 - circulate pre-submission Gannt Chart (WP plans, complete with proposed *measurable* deliverables and milestones, decisions regarding
 - inform yourself EARLY about submission formalities (format, page limits, inclusion of Associated States, pre-registration etc)

* Funding planning meetings; partner expenses?

Go (avoid last minute)!



Writing the proposal – keep simple and clear

The maximum page limits of each section must be respected. The Commission will instruct the independent external experts to disregard any pages in excess of these limits. A minimum font size of 11 is required.

- Summary (limited characters)
- Concept and Project Objectives (page limits)

attention to call text, rationale, references also White Papers etc; *illustrate*

- **Description of Work** (S/T Methodology)
 - very important **also** if you are successful, revisions in Technical Annex
 - WorkPackages

Specific Tasks and expected outcomes (Milestones, Deliverables)

- INTEGRATION within/between Partners and WorkPackages (Pert diagram)
- technical details, innovation
- realistic Milestones, Measurable Deliverables (Gannt chart)
- do Person Months add up? → budget

Equally essential (neglect → lose easy scores)

Coordinator: designate roles to individual partners with specific expertise

• Implementation (page limits)

- Management structure
 - Consortium Agreement (CA)
 - decision-making (Steering Committee/Governing Board, SAB)
 - internal communication, internal reviews/meetings
 - risk assessment and contingency plans
 - conflict resolution (CA)
 - individual partner profiles appropriate fit: *expertise, infrastructure, patents, references*
 - consortium as a Whole ("sum of the parts....")

• Potential Impact (page limits)

- Knowledge
- Products/economic potential
- Government/Consumers
- Knowledge dissemination (meetings, publications, training, public, stakeholders)
- Management of Foreground (knowledge, tools) and Intellectual Property

• Ethical issues (text/forms)

- International, European and National Codes/Laws (humans and animals)
- Genetically-modified organisms, human embryos/stem cells
- Safety provisions

Gender balance





F – CNRS^{*} NL – LUMS DE – MPG PT – UMINHO HU – HAS DE – LMU



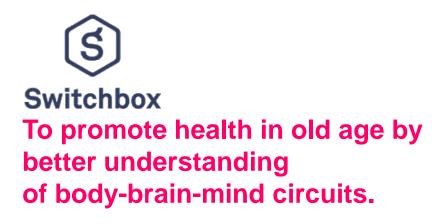


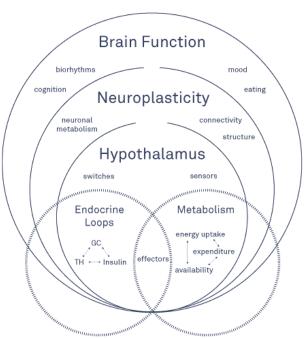
EUROPEAN COMMISSION Homeostasis in human development and its effects on lifespan

Longevity will be studied in terms of the capacity to ensure and maintain good homeostasis and networking between various body systems and functions, and of the entire organism. In addition, the project should consdier external influences, e.g. lifestyle, environmental exposures.

Funding scheme: Collaborative project (Small/ medium-scale focused) EC contribution: max. EUR 6 m; one project will be funded.

Expected impact: Maintaining a stable internal environment ...constant monitoring and adjustments as conditions change. Malfunctioning and failures of homeostatic balance \rightarrow cellular malfunctions and disease ... well-being ... depends on well-being of all interacting body systems. Knowledge acquired in this area will pave the way to therapeutic interventions.



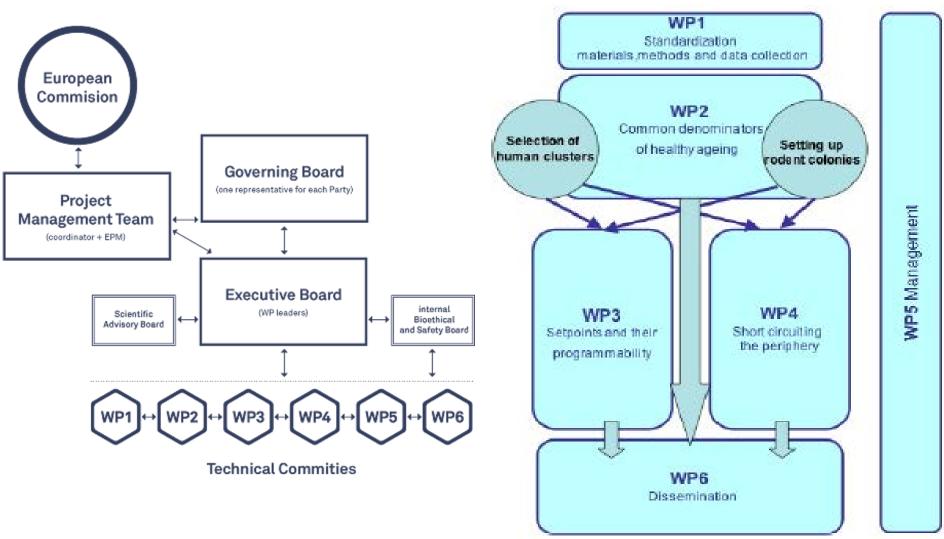




Abstract

Reaching goal \rightarrow Healthy aging requires maintenance of homeostatic control of the physiological systems and functions that are integrated by the hypothalamus. Foreground \rightarrow Driven by work in previous EU projects (Crescendo/Lifespan) highlighting insulin signalling and the hypothalamic/pituitary/adrenal and thyroid axes in the regulation of aging, General approach \rightarrow SWITCHBOX will examine the flexibility of these neuroendocrine systems in response to environmental challenges in three established human cohorts with variable aging potential. These human cohorts include offspring of exceptionally long-lived siblings and their partners (controls), people with good vs bad cognitive performance or with high vs low cognitive engagement. Focus and justification \rightarrow Maintaining brain function is emphasised as it reflects an individual's overall well-being, a major goal in aging Research, and because agre-related brain disorders represent a major socioeconomic burden. Unique tools to understand processes/ mechanisms \rightarrow To determine the genetic and cellular underpinnings of the findings in humans, hypothesis-based studies in rodents sharing phenotypes with the human cohorts will be carried out. To clarify the role of the brain in the differential regulation of endocrine axes critical for healthy aging, SWITCHBOX will examine the neuroendocrine and metabolic effects of intranasal (humans) and intracerebroventricular (rodents) administration of peptides involved in controlling metabolic homeostasis (e.g. insulin, a-MSH). State-of-the-art technology will be used to measure circadian endocrine and metabolic profiles, brain structure and function (fMRI) and cognitive performance, as well as cellular and molecular features. Data analysis and dissemination \rightarrow All data will be entered into an already operational 'open access' database. Translation and integration of diverse expertise \rightarrow The work is designed to be translational in nature and will benefit from combining expertise of gerontologists, endocrinologists, molecular and cellular neuroscientists and neuropsychologists. Community benefits > SWITCHBOX ultimately aims to develop conceptually new approaches for the prevention and treatment of age-related disorder.





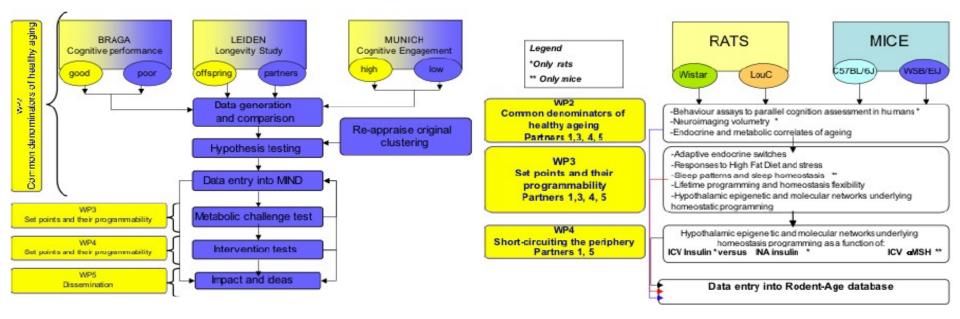
Switchbox

Ease reviewers' lives – keep things simple, use schemes

Flow chart for human studies

Flow chart for rodent studies

NB Only major experimental categories are shown and no time points





Example of a WorkPackage

WP3: Setpoints and their programmability (6/7 Partners, 6 Tasks, 11 Deliverables)

Starting premise: Maintenance of health depends on the continuous appropriate resetting of homeostatic setpoints in response to changing internal and external environments

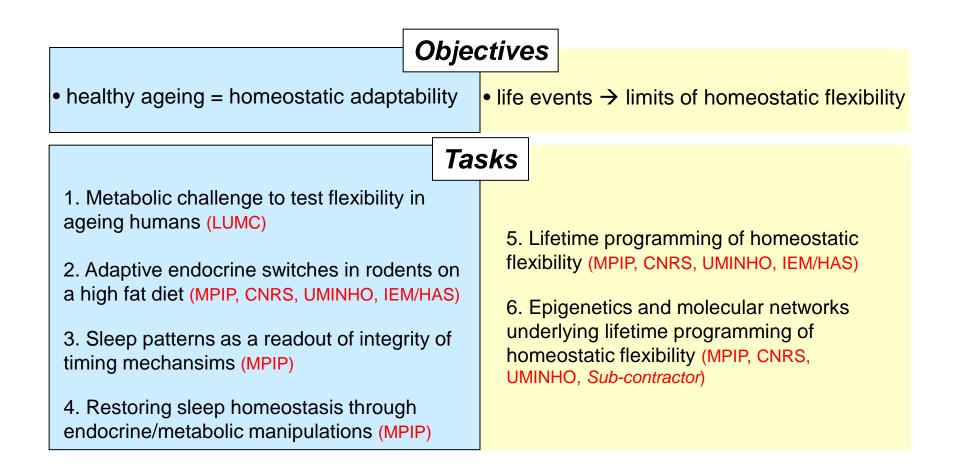
Hypothesis-driven objectives:

- healthy ageing reflects greater homeostatic adaptability
- limits of homeostatic tolerance during ageing are determined by life events

Expected Results and Impact

- **describe** capacity to adapt to challenges (obesity, stress) to maintain endocrine and behavioural health
- identify vulnerable and resettable switches; focus on when (life stage), where (nodes, networks) and how (mechanisms)
- explore preventative and therapeutic lines

Switchbox WP3: Setpoints and their programmability



WP3: Setpoints and their programmability

Strains: WSB (CNRS, IEM/HAS); C57BI6 (MPG, UMINHO)

Switchbox

Sex: Male-female differences (MPG, UMINHO)

Normal	Obese	Stragged		
		Stressed	Obese/Stressed	
CNRS, IEM/HAS	CNRS, IEM/HAS			
MPG, UMINHO	MPG, UMINHO	MPG, UMINHO	MPG, UMINHO	All
MPG, UMINHO	MPG, UMINHO	MPG, UMINHO	MPG, UMINHO	
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Image: Sector Sector

Buy a ticket, but it's not just luck ...

be informed, take initiative, network, work hard, persevere

