



Addressing the challenge of rare disease netwoks in France

Nothing about us without us!

Paul GIMENÈS

Deputy manager Responsible of Public Affairs Alliance Maladies Rares



EURORDIS Membership Meeting 2015 Madrid Hotel Rafael Atocha May 30th 2015



Key data

key dates & figures

2005 - 2008

1st strategic plan for rare diseases in France

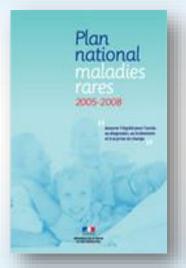
2011 - 2014 2011 - **2016** **2**nd **strategic plan** for rare diseases in France

Sept. 2014 - Nov. 2015

Evaluation of the NPRD 2

After 2016

To the **3rd strategic plan** for rare diseases in France







CEs & Rare Disease Networks

2 comlementary dynamics

CEs in France, a major achievement of the French rare disease Plans

Rare disease networks in France, or, of the necessity to go further

CEs dynamic

RDN dynamic





CENTRES OF EXPERTISE IN FRANCE



A MAJOR ACHIEVEMENT OF THE FRENCH RARE DISEASE PLANS



Centres of expertise

Missions

131

National centres of expertise

(Since 2005)

EXPERTISE LEADER

Expertise

On a disease or a group of diseases

Referral

Interregional, national or international attraction

Coordination

Policy definition, activity organisation, action plan development

Research

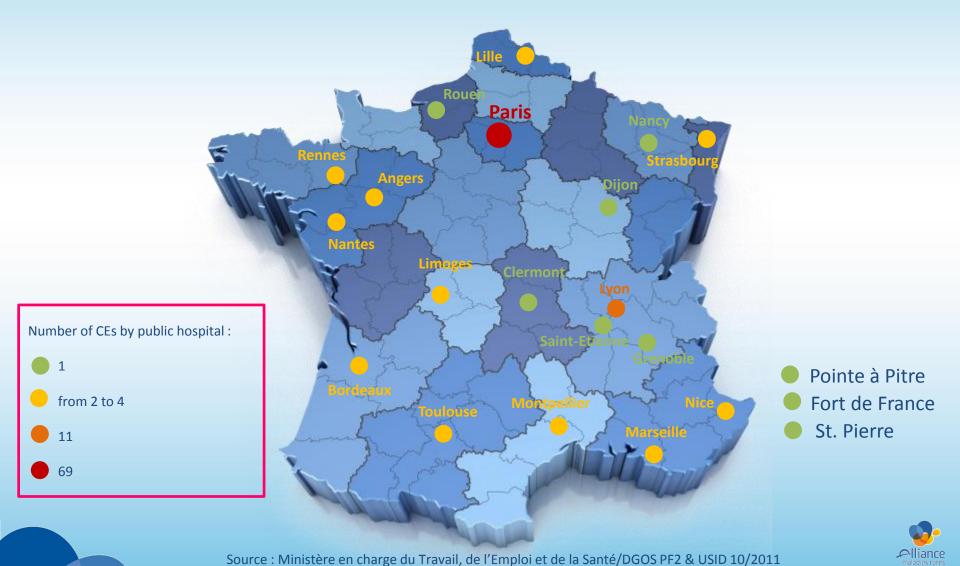
Promotion, facilitation and participation in fundamental, clinical, and translational research

Information and training of health

Promotion, facilitation, and lead of academic university teaching



Centres of expertise Map



Centres of expertise

Centres of competence

131

National Centres of Expertise

(since 2005)

EXPERTISE LEADER

502

Centres of Competences

(since 2007)

PROXIMITY

Patient Organisation advocacy

502 Centres of competence missions

Patient organisations argued for an organisation of care **at local level** that had not been foreseen in the drafting of the first Plan (2005-2008).

Ensure patient care at local level

Establish the diagnosis of RD

Implement therapeutic (when available)

Ensure connection with the CE and all medical/social actors.



Centres of expertise Key challenges

- ➤ The imperative need to improve CEs after 10 years
- ➤ Implement the 2nd Plan dedicated measures on CEs:
 - ✓ A simplification of CEs assessment,
 - ✓ Implementation of business reports
 - ✓ Succession process of the CE coordinators

To a Ministerial Direction on CEs



New certification of CEs & CC

Publication expected in January 2016 Launching expected in 2016/2017







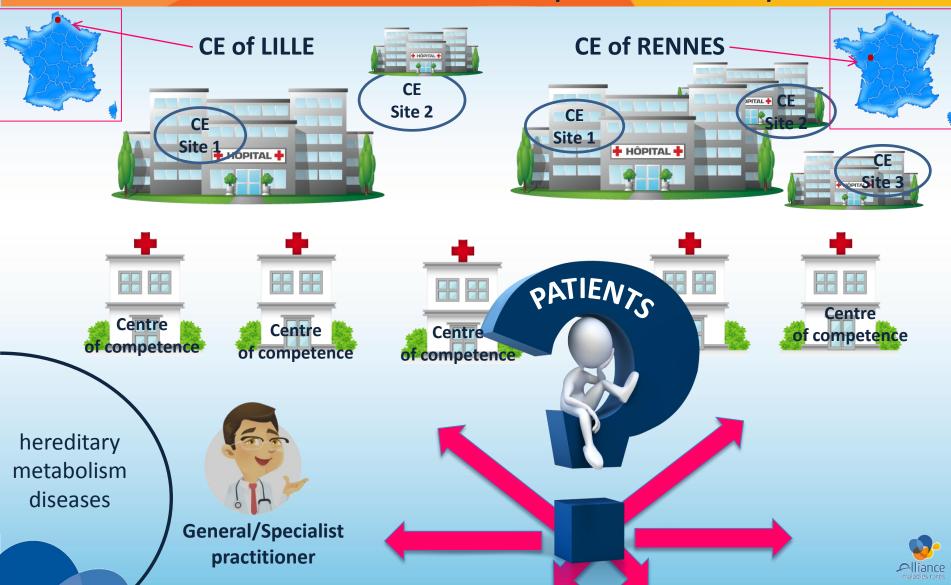
RARE DISEASE NETWORKS IN FRANCE

OF THE NECESSITY TO GO FURTHER!



Why building RDN in France?

1st Rare Disease Plan: A complex landscape



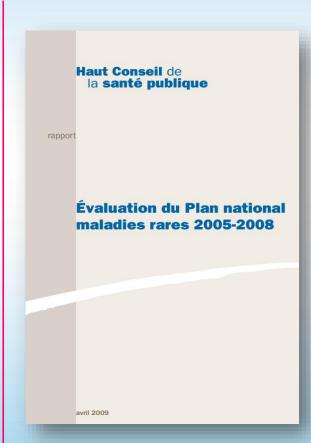
Why building RDN in France?

Evaluation of the 1st Rare Disease Plan

"Grouping of centres must be favored (developmental anomalies, metabolic diseases), as the federations of reference centres of several regions taking care of the same disorders. Some centres could be the object of extension of labelling in diseases other than those of the initial labelling ".

"Regional federations and national federation of the reference centres should be created to organize meetings of confrontation at least annual. The meetings of the reference centres during the conference of evaluation highlighted this necessity of dialogue and pooling of the scientific, ethical and administrative problems ".

"Competence centers and National Platforms of reference laboratories will be a part of healthcare pathways. The very rare diseases must be integrated into one of these pathways which, if of need, will help them to find an expert somewhere else in Europe





Why building RDN in France? RD ERN

Recommendation of the EUCERD to the European commission & the member states Article 12 of the Cross-Border Healthcare Directive (Directive 2011/24/EU).

> "...RD ERNs will provide the framework for healthcare pathways for RD patients through a high level of integrated expertise...

> "...Nationally designated centres of expertise (CE) are the core participants in RD ERNs... "

"...RD ERN needs to be flexible enough to accommodate working with different national CE structures. Depending on the national healthcare system, CEs can be very different structures organised by regions, treatments, or diagnostic procedures, offering services in one location or through an established network."



Rare disease Networks in France will facilitate the implementation of RD ERN



Scope definition

➤ Ministerial Direction/July 2013 relative to the structuring of the rare disease networks planned by the 2nd National Rare Disease Plan 2011-2014.

"The health network should cover a wide and coherent range of rare diseases, whether they are closely related by their symptoms, consequences or coverage, or affect a single organ or system. The network deals above all with known rare diseases, and also with not yet confirmed diseases or syndromes".







Actors





Governance

Ministerial Direction/July 2013 launches a call in direction of CEs & all stakeholders.



Governance/organization to be defined by each RDN

Key role of PO, associated with the RDN governance/working group

All CE intended to be part of only one RDN

Key points of specifications

Financial support for coordination evaluated in proportion of the **RDN** cohort

The RDN CEO is one of the CE CEO (Receives funds, and leads for 4 years the RDN)

23 RDN are now definitely identified in France.

All RDNs CEO must deliver their Action plan before June 15th 20

List & map

AnDDI-Rare

CARDIOGEN

BRAIN-TEAM

DEFI SCIENCE

FAI2R

Fava-multi

FILFOIE

FILNEMUS

FIMARAD

FIMATHO

FIRENDO

G₂M

MARIH

MCGRE

MHémo

MUCO/CFTR

Neurosphinx

OSCAR

ORKID

RESPIFIL

SENSGENE

SLA

TETECOU

developmental anomalies and malformations

transmitted heart diseases

CNS rare motor disorders

brain development diseases and intellectual disabilities

rare auto-immunes and auto-inflammatory diseases

rare vascular disease & multisystemic lesions

rare liver diseases

neuromuscular diseases

rare dermatological diseases

oesophageal & intestinal RD + diaphragmatic hernia

rare endocrine diseases

rare hereditary diseases of metabolic origin

immuno-hematologic rare diseases

rare diseases of red cells and of erythropoïesis

constitutional haemorrhagic rare diseases

cystic fibrosis and CFTR anomalies

rare pelvic and medullary diseases

Os-Calcium/Cartilage-Rein

rare kidney diseases

rare respiratory diseases

rare sensory diseases

amyotrophic lateral sclerosis

Head and Neck rare diseases

CARDIOGEN
FAVA-Multi
FILFOIE
FIMARAD
FIRENDO
MARIH
MCGRE
NeuroSphinx-GBS
OSCAR
RESPIFIL
TETECOU

BRAIN-TEAM
AnDDI-Rares
Défiscience
Mhémo

FILNEMUS ORKID G2M SLA

Muco/CFTR

Scheme

131 **National** Centres of Expertise (since 2005) **EXPERTISE LEADER** 502 Centres of Competences **PROXIMITY**

23

Rare disease networks

(Since 2014)

TRANSVERSAL



Logic of the horizontal/transversal organisation

Identify and Mutualize complementarities/ resources/means

Improve the coordination/animation/ lead of actions



2 Cardinal points

Facilitate for all RD patients and healthcare professionals, the possibility of finding a way into the healthcare system

Improve the continuum between

Diagnosis/Care/Research/
Therapeutic development
/Medical and social
management/Articulation
with the territories of health





Key points of specifications

Improve the quality of the care of RD patients

List and coordinate the existing recommendations of best practice among which the PNDS

Spread knowledge and information to the various public, including patients

Draw up the list of the pathologies, the projects and the ongoing works to make them know

Impulse the elaboration of common or transverse recommendations and, when the pathologies justify it, specific recommendations with the aim of the insertion of the patient in his social, educational and professional life



Key points of specifications

Develop the clinical and translational research

Inventory the programs centered on diagnosis and therapeutic innovation in rare diseases and define annual priorities (essays, cohort)

List and identify the network of the units of research with which the CEs and centres of competence work

Review the projects and the work in progress at least once a year

Bring to the foreground common axis of research with a European or international dimension



Key points of specifications

Develop the education and the formation

List and arouse programs of teachings and creation of interuniversity diplomas

List the actors of the network once a year

Organize one day of exchanges with the various professional categories of the CEs and competence centres



Key points of specifications

Make patient organisations key player

Develop TPE

Establish training teleconferences/Realize video conferences over the Internet for patients

Develop e-Health, i.e.

multidisciplinary consultations by

telemedicine

Develop PO involvement in the development and recruitment for clinical and therapeutic trials

Mutualize Patient reception in hospitals

Develop PO involvement on communication media



Key challenges

Strength/weakness

Giving a true partner/role for Patient Organisations

Developing common tools and a common language

Making the best use of new healh technologies

Strengthen partnerships and existing work & Valorising RD actions from the hospital

strength



RD ERN Link

inter-RDN

Funding

weakness



To go further

www.alliance-maladies-rares.org











Nothing about us without us!

We must go on, coordinate all initiatives across Europe to improve our CEs, RDN and the future RD ERN!





Thank you for your attention!

