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PRESS RELEASE

**IMI PROJECT IMIDIA SECURES ADDITIONAL FUNDING
FROM MAJOR US DIABETES RESEARCH CHARITY**

Brussels, New York, Frankfurt, Lausanne, Paris, 3rd May 2012 – The European Union's Innovative Medicines Initiative (IMI) is proud to announce that scientists in its successful **diabetes project, IMIDIA**, will receive additional support of up to \$1 million (approx. € 750 000) in milestone-based funding from JDRF. JDRF is the world's largest supporter of research to cure, treat, and prevent type 1 diabetes (T1D). The additional support allows IMIDIA participants to expand their research efforts that are focused on gaining further insight into the role and survival of beta cells in diabetes, and aims to speed up the search for a cure for diabetes.

Michel Goldman, IMI Executive Director commented: 'We are pleased to see that the US-based charity JDRF is supporting this innovative programme in Europe. The JDRF grants awarded to the IMIDIA researchers demonstrate that IMI is delivering on its promise of leveraging additional investment in medical research in Europe.'

Adrienne Wong, Senior Scientist for Cure Therapies at JDRF commented: 'IMI is an attractive partner for JDRF, because through their IMIDIA project, we share a common goal of accelerating the development of better treatments and cures for type 1 diabetes. Furthermore, we are pleased that our programme can leverage IMI's considerable strength in developing and managing collaborative partnerships between industry, small and medium-sized enterprises (SMEs) and academic investigators.'

IMIDIA is one of the unique Public Private Partnerships (PPPs) under the IMI umbrella and is focusing on the development of new tools to detect and treat diabetes. The IMIDIA consortium consists of around 100 researchers from 12 leading academic institutions, 1 biotechnology company and 8 pharmaceutical companies, focusing on novel approaches and disease models to monitor disease progression and treatment. IMIDIA is coordinated by Sanofi together with Servier and the University of Lausanne.

'The first two JDRF-funded projects to be launched by IMIDIA aim to broaden existing research activities to develop new tools for curing and treating diabetes,' stated Werner Kramer (Sanofi), Alain Ktorza (Servier) and Bernard Thorens (Université de Lausanne). 'The success of the IMIDIA partnership and JDRF's first grants to IMIDIA have prompted JDRF to make further and larger funds available to IMIDIA participants.' To this end, JDRF has invited IMIDIA scientists to submit new research proposals, to apply for the new grants.

In total, JDRF intends to provide up to \$1 000 000 (around €759 000) in **milestone-based funding to IMIDIA**. The JDRF-funded projects will be aligned with the research objectives of IMIDIA, addressing issues not covered by the original IMIDIA work plan, thereby ensuring that the funds will be used for novel research.

Overall, IMI, IMIDIA and JDRF are working together and sharing information to accelerate the search for new treatments for patients with diabetes. The collaboration has been sealed through agreements signed between IMI, JDRF and IMIDIA.

Attached: Fact Sheet



FACT SHEET

IMIDIA PARTICIPANTS RECEIVING JDRF FUNDING

The **IMIDIA public-private consortium** consists of:

- **12 leading European academic institutions** with expertise in pancreatic beta cells and bioinformatics, namely the Université de Lausanne (*Managing Entity of IMI Beneficiaries*); Centre National de la Recherche Scientifique (CNRS); Commissariat à l'Énergie Atomique; Imperial College London; SIB Institut Suisse de Bioinformatique; Institut National de la Santé et de la Recherche Médicale (INSERM); Medizinische Hochschule Hannover; Technische Universität Dresden; Università di Pisa; Université Paris Diderot - Paris 7; Université de Genève; and Vrije Universiteit Brussel;
- **1 biotech company**: Endocells SARL;
- **8 major pharmaceutical companies** namely Sanofi (*Project Coordinator*); Servier, (*Project Co-coordinator*); AstraZeneca; Boehringer Ingelheim; Eli Lilly; Novartis; Novo Nordisk; F. Hoffmann-La Roche.

IMIDIA is focused on developing better tools and biomarkers and improving our understanding to enable the development of beta-cell medicines – a key to an ultimate long-term vision: the cure for diabetes. The IMIDIA project has an overall budget of around €26 million, €7 million of which comes from IMI. For further details, please visit: www.imidia.org

Two IMIDIA principal investigators have been awarded JDRF grants to explore new paths in the context of IMIDIA:

- o **Christophe Magnan** of the **Université Paris Diderot** and IMIDIA collaborators are focusing on the 'Characterisation of metabolomic-based biomarkers of altered beta cell function.' With this study, they aim to look for clues in the body (biomarkers) that give more insight into the malfunctioning of the insulin-producing beta cells in the pancreas.
- o **Lorella Marselli and Piero Marchetti** of the **University of Pisa** and their IMIDIA collaborators will focus on 'Unravelling the mechanisms of beta cell regeneration to preserve beta cell mass in diabetes: a study in human obesity'. Through this study, they are trying to gain further insights into how beta cells behave in obese patients with type 2 diabetes, and in particular to understand how beta cells in these patients can be stimulated to survive. This study will build on the researchers' previous work on type 2 diabetes, and give them access to human tissues that could yield interesting new data that may be useful for type 1 diabetes.

Building further on the partnership, **JDRF launched a 2nd Call for proposals** in January 2012, which will lead to **further and larger strategic grants for IMIDIA participants**.

IMIDIA'S EARLY SUCCESS

Since its launch in February 2010, the IMI project **IMIDIA** has reported a number of early successes. For instance, IMIDIA researchers have **generated human pancreatic beta cell lines** that continue to live in laboratory test tubes. The cells produce insulin in response to high glucose levels, just like the beta cells in the human body, and they behave similar to normal human beta cells in many other aspects as well. As beta cells in the pancreas play a key role in diabetes, the cell lines represent an **invaluable new tool that was so far missing in diabetes research**. Previously, studies requiring human beta cells could only be done on fresh cells extracted from the human body. The new cell lines will be used **to test potential new drugs against diabetes** and to further **unravel the mechanisms that cause this disease**. These findings were published in the [Journal of Clinical Investigation 121\(9\): 3395-3397 \(2011\)](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3191111/).

In addition, scientists from the **IMIDIA** project have identified a **gene that disrupts insulin secretion** in individuals with a **rare form of type 2 diabetes** called maturity onset diabetes of the young (MODY). The gene produces a protein called **PASK** (PAS kinase). The findings, published in the [Journal of Biological Chemistry 286\(51\): 44005-44014 \(2011\)](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3191111/), represent the **first demonstration in humans** that the PASK protein plays a **key role in insulin secretion**. The discovery may have implications for diabetes **treatment**.



IMI

IMI is the **world's largest public-private partnership in healthcare**. The **European Union** contributes €1 billion to the IMI research programme, which is matched by in-kind contributions worth at least another €1 billion from the member companies of the **European Federation of Pharmaceutical Industries and Associations (EFPIA)**. IMI is improving the environment for pharmaceutical innovation in Europe by engaging and supporting networks of industrial and academic experts in collaborative research projects.

The Innovative Medicines Initiative currently funds **30 projects**, many of which are already producing **impressive results**. The projects do not aim to develop new medicines as such, but focus on new methods and tools that will enable the entire sector to accelerate the development of safer and more effective treatments for patients. A comprehensive overview of **ongoing projects** is available at www.imi.europa.eu.

JDRF

JDRF is the **leading global organization focused on type 1 diabetes (T1D) research**. Driven by passionate, grassroots volunteers connected to children, adolescents, and adults with this disease, JDRF is now **the largest charitable supporter of T1D research**. The goal of JDRF research is to improve the lives of all people affected by T1D by accelerating progress on the most promising opportunities for curing, better treating, and preventing T1D. JDRF collaborates with a wide spectrum of partners who share this goal. Since its founding in 1970, JDRF has awarded more than \$1.6 billion to diabetes research. Past JDRF efforts have helped to significantly advance the care of people with this disease, and have expanded the critical scientific understanding of T1D. JDRF will not rest until T1D is fully conquered. More than 80 % of JDRF's expenditures directly support research and research-related education. For more information, please visit www.jdrf.org.

DIABETES

Diabetes is the name given to disorders in which the body has trouble regulating its blood sugar levels. **Type I diabetes** (insulin-dependent diabetes) is an autoimmune disease in which the body's immune system attacks and destroys the beta cells in the pancreas that normally produce insulin, the hormone that helps the body to regulate blood sugar levels. Type 1 diabetes strikes both children and adults at any age. It comes on suddenly, causes dependence on injected or pumped insulin for life, and carries the constant threat of devastating complications. **Type II diabetes** is a metabolic disorder in which a person's beta-cells produce less insulin than required to compensate for the relative inability of the body to use it effectively. It can lead to serious complications. Type 2 is usually diagnosed in adulthood and does not always require insulin injections. However, increased obesity has led to a recent rise in cases of type 2 diabetes in children and young adults.

Today, there are more than 285 million people around the world with diabetes, an almost 8-fold increase in just over 20 years. It is estimated that the costs of treating diabetes complications account for between 5 and 10 % of total healthcare spending in the world, placing a huge burden on welfare systems both in Europe and the US, and in other developed and developing countries.

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