



Final stakeholder meeting WP11, 28th september

CHIMs to prioritize: how to define the right criteria?

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This project has received support from the IMI2/EU/EFPIA Joint Undertaking Inno4Vac grant n° 101007799 (Inno4Vac). This communication reflects the author's view and neither IMI nor the European Union, EFPIA, or any Associated Partners are responsible for any use that may be made of the information contained herein.

Goals of the session

- Start discussion on how to select CHI-models for future projects
- Discuss key criteria for model selection

Current CHIM models in use

Viral

- Influenza A (H3N2/H1N1) and B
- RSV
- Rhinovirus
- OC43
- Sars-CoV-2
- Norovirus
- Rotavirus
- Dengue
- Zika
- Chikungunya

Bacterial

- Pneumococcus
- Bordetella pertussis
- Group A streptococcus
- S. lugdunensis
- Neisseria lactamica
- Salmonella typhi/paratyphi
- Salmonella enterica
- Campylobacter
- ETEC
- Vibrio cholerae
- Shigella
- C. difficile
- BCG
- N. gonorrhoea
- H. ducreyi

Parasites

- P. falciparum
- P. vivax
- S. mansoni
- N. americanus
- L. major
- (Trichuris)

Possible CHIM models to be developed?

H5 influenza

Mpox

West Nile Virus

Rift Valley Fever

Bacterial model relevant for AMR

Y. Pestis

Hepatitis C

M. ulcerans

Ascaris or other STH

Other plasmodium species

S. haematobium

Question to the panel

In academia: what were criteria to select your current CHIM program? And for a new program, what criteria would you use?

In industry: how would industry select a CHIM model for development support?

Social and scientific
value: the need or
utility for a CHIM

Safety of the model

Feasibility: execution
and logistical questions

Regulatory

Question to the panel

How could we move forward when deciding on which CHIM to prioritize?

What is your take-away from the discussion?

Some final conclusions





- Thank you for your input in the discussion



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This project has received funding from the Innovative Medicines Initiative 2 Joint Undertaking under grant agreement No 101007799. This Joint Undertaking receives support from the European Union's Horizon 2020 research and innovation programme and EFPIA - <https://www.imi.europa.eu>. This communication reflects the author's view and neither IMI nor the European Union, EFPIA, or any Associated Partners are responsible for any use that may be made of the information contained herein.