# In-depth exploration of assessment criteria for funding organizations involved in drug repurposing

Dalma Hosszú<sup>1</sup>, Máté Pálfi<sup>1</sup>, Zsuzsanna Petykó<sup>1, 2</sup>, Heleen van der Meer<sup>3</sup>, Pan Pantziarka<sup>4</sup>, Patricia Vandamme<sup>4</sup>, Dunja Huijbers<sup>3</sup>, András Inotai<sup>1,2</sup>, Marcell Csanádi<sup>1</sup>

1. Syreon Research Institute, Budapest, Hungary

- 2. Center for Health Technology Assessment, Semmelweis University, Budapest, Hungary
- 3. ZonMw, Den Haag, The Netherlands
- 4. The Anticancer Fund, Meise, Belgium

## **BACKGROUND AND OBJECTIVES**

Conventional valuation strategies for new medical entities are often not appropriate as they do not capture all aspects of short and long-term value) to apply to drug repurposing (DR) [1], and there is a lack of broadly accepted methods for measuring patient and societal benefits [2].

REMEDI4ALL aims to create a range of incentives and funding opportunities to engage funders with DR projects. One activity to achieve this objective is to create a standardized tool for the assessment of DR projects.

#### METHODS

REPURPOSING

FMEDÍCINES

4ALL

We performed a systematic overview of two major information sources: 1) documents used by research funders (e.g., funding call application evaluation forms); 2) published literature.

Funders were identified from the Funders Network, established by ZonMw within REMEDi4ALL. Funders were specifically asked to share their potentially relevant publicly or internally available documents for the purpose of identifying assessment criteria.

Within this task, REMEDi4ALL partners join forces to develop a flexible tool that can encompass a wide range of assessment criteria relevant for DR. This tool is being designed to provide future REMEDi4ALL project partners (e.g., funders, venture philanthropies, biotech companies, pharmaceutical firms, HTA bodies and payers) the opportunity to make explicit and transparent selections of potential projects based on their perspectives and the specific attributes of individual DR projects. In addition, the tool will be also publicly available.

Scientific and grey literature were queried using PubMed and Google Scholar with additional publications made available from other **REMEDi4ALL** activities.

To create the initial list of criteria, the raw texts were copied from the source documents. An iterative process with an inductive approach was applied to formulate concise criteria, which were reformulated throughout the process until a complete list of criteria covering all collected data was established. Finally, based on the available data, a definition was attached to each criterion, however, the definitions are not included to this poster.

#### COMPREHENSIVE LIST OF FUNDING ASSESSMENT CRITERIA

Eventually, the complete dataset included 330 criteria, which were processed and finally 35 criteria were defined.

C		R			
Aligned mission	Clarity of objectives	Project leadership	Project team	Disease burden for the patients	Benefits to patients / Added therapeutic value
8			ত'ত	Disease burden for the close environment of	Benefits for beneficiaries beyond
Phase of R&D	Patent status of the	Approach, methodology and	Ethical principles	the patients	patients



# NEXT STEPS

In the process of creating a standardized tool for the assessment of DR projects, the following steps will be undertaken:

## **CONCLUDING REMARKS**

The lack of broadly accepted methods and approaches for assigning quantifiable values to patient and societal benefit can be a major barrier to establishing a partnership or collaboration to enhance drug repurposing projects [3].

- Specifying metrics and methodologies to each criterion (Q2 2024)
- Validation of defined criteria with REMEDi4ALL partners and members of the REMEDi4ALL Funders Network (Q2-Q3 2024)
- Platform development for the tool (Q4 2024)
- Testing of the platform with Funders Network members (Q1-Q2 2025)

Therefore, the tool developed in REMEDi4ALL could not only help to evaluate and justify R&D funding decisions at an earlier stage but could also contribute to bridging discrepancies in value assessment across different stakeholders.

1. Petykó, Z. I., Kaló, Z., Espin, J., Podrazilová, K., Tesař, T., Maniadakis, N., Fricke, F. U., & Inotai, A. (2021). Development of a core evaluation framework of value-added medicines: report 1 on methodology and findings. Cost effectiveness and resource allocation: C/E, 19(1), 57.

2. Verbaanderd, C., Rooman, I., & Huys, I. (2021). Exploring new uses for existing drugs: innovative mechanisms to fund independent clinical research. Trials, 22(1), 322.

3. Krishnamurthy, N., Grimshaw, A. A., Axson, S. A., Choe, S. H., & Miller, J. E. (2022). Drug repurposing: a systematic review on root causes, barriers and facilitators. BMC health services research, 22(1), 970.



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