The DRUP-like clinical trials family: a distributed European trial network for equitable access to precision medicine

Background

While the promise of personalised cancer medicine (PCM) is clear, implementation remains challenging. In the European Union (EU), healthcare systems fall under national responsibility and differ greatly in structure, financing and capacity. Furthermore, EU countries are predominantly small, limiting generated evidence from national trials. The family of DRUP-like clinical trials (DLCTs) addresses this challenge: as a bottom–up, clinician-initiated initiative, DLCTs share the pragmatic core clinical trial design of the original Drug Rediscovery Protocol (DRUP)\(^1\)-\(^3\), anchored into national context and financed independently. The result is a distributed DLCT network that addresses local priorities while collaborating internationally for scale and impact.

Methods

In 2022, the DLCT community successfully applied for two projects funded by the EU that will expand the network by supporting investigators to establish national DLCTs in additional countries. At the same time, the projects will build shared cross-DLCT capacity in molecular diagnostics and education (PCM4EU) as well as cross-trial data analytics, initiate shared cohorts and provide Health Technology Assessments (HTA) (based on the EUnetHTA core model) and Health Economic Evaluations (PRIME-ROSE). To ensure successful implementation, the projects involve various national and European decision-makers as well as the cancer patient community.

Conclusions

This Europe-wide PCM deployment will address key scientific and methodological questions to accelerate broad and equitable access to new and effective cancer treatments. The ongoing effort is leading to standardization and pragmatic consensus, thereby anticipating the benefits of the upcoming European Health Data Space.

References


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