



HAL
open science

NET - Neuroépidémiologie tropicale

Rapport Hcéres

► **To cite this version:**

Rapport d'évaluation d'une entité de recherche. NET - Neuroépidémiologie tropicale. 2017, Université de Limoges, Institut national de la santé et de la recherche médicale - INSERM, Institut de recherche pour le développement - IRD. hceres-02030145

HAL Id: hceres-02030145

<https://hal-hceres.archives-ouvertes.fr/hceres-02030145>

Submitted on 20 Feb 2019

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.

HCERES

High Council for the Evaluation of Research
and Higher Education

Department of Research Evaluation

report on research unit:

Neuroépidémiologie Tropicale

NET

under the supervision of
the following institutions
and research bodies:

Université de Limoges

Institut National de la Santé Et de la Recherche Médicale
- INSERM

Institut de Recherche pour le Développement - IRD

Evaluation Campaign 2016-2017 (Group C)

HCERES

High Council for the Evaluation of Research
and Higher Education

Department of Research Evaluation

In the name of HCERES,¹

Michel Cosnard, president

In the name of the experts committee,²

Andrea Winkler, chairwoman of the
committee

Under the decree No.2014-1365 dated 14 november 2014,

¹ The president of HCERES "countersigns the evaluation reports set up by the experts committees and signed by their chairman." (Article 8, paragraph 5)

² The evaluation reports "are signed by the chairman of the expert committee". (Article 11, paragraph 2)

Evaluation report

This report is the sole result of evaluation by the expert committee, the composition of which is specified below.

The assessments contained herein are the expression of an independent and collegial reviewing by the committee.

unit name: Neuroépidémiologie Tropicale

unit acronym: NET

UMR UMR

Current number: 1094

**Name of Director
(2016-2017):** Mr Pierre-Marie PREUX

**Name of Project Leader
(2018-2022):** Mr Pierre-Marie PREUX

Expert committee members

Chair: Ms Andrea WINKLER, University of Munich, Germany, and University of Oslo, Norway

Experts:

Mr Éric BALESTRE, INSERM U1219, University of Bordeaux (representative of supporting personnel)

Mr Laurent BEZIN, CNRS, INSERM, University Claude Bernard Lyon 1 (representative of the CSS IRD)

Mr Roger SALAMON, Bordeaux School of Public Health, University of Bordeaux (representative of the CNU)

Ms Anne THIÉBAUT, INSERM, University of Versailles Saint-Quentin (representative of the CSS Inserm)

Scientific delegate representing the HCERES:

Mr Renaud BECQUET

Representatives of supervising institutions and bodies:

Mr François-Jérôme AUBERT, CHU Limoges

Mr Alain CELERIER, Université de Limoges

Ms Marie-Josèphe LEROY-ZAMIA, INSERM

Mr Yves MARTIN-PREVEL, IRD

Head of Doctoral School:

Ms Rachida ZERROUKI, directrice de l'École Doctorale n°523, « Sciences pour l'Environnement »

1 • Introduction

History and geographical location of the unit

The unit originated historically from the Institute of Neuroepidemiology and Tropical Neurology (IENT), Institute of the University of Limoges, created in 1982. The unit has been certified at Inserm since 2012 (U1094). The current supervision of the unit is under the University of Limoges, Inserm and the Centre Hospitalier Universitaire (CHU) of Limoges. The unit is affiliated to the Génomique Environnement Immunologie Santé Thérapeutique (GEIST) Research Institute (8 units or teams), which brings together the Health, Life Sciences and Environment teams of the University. The unit is located in the premises of the Faculties of Medicine and Pharmacy of Limoges. It has benefited in 2015, for a part of the unit, of space in a new building (Centre de Biologie et de Recherches en Santé).

Management team

The director of the unit is Mr Pierre-Marie PREUX.

HCERES nomenclature

SVE6 Santé Publique, Épidémiologie, Recherche Clinique

Secondaire: SVE3 Microbiologie, Immunité

Scientific domains

Public Health, Epidemiology, Clinical Research

Unit workforce

unit workforce	Number on 30/06/2016	Number on 01/01/2018
N1: Permanent professors and similar positions	30	30
N2: Permanent researchers from Institutions and similar positions	1	1
N3: Other permanent staff (technicians and administrative personnel)	7	7
N4: Other researchers (Postdoctoral students, visitors, etc.)	1	
N5: Emeritus	0	
N6: Other contractual staff (technicians and administrative personnel)	6	
N7: PhD students	16	
TOTAL N1 to N7	61	
Qualified research supervisors (HDR) or similar positions	18	

Unit record	From 01/01/2011 to 30/06/2016
PhD theses defended	21
Postdoctoral scientists having spent at least 12 months in the unit	6
Number of Research Supervisor Qualifications (HDR) obtained during the period	3

2 • Assessment of the unit

Global assessment of the unit

The unit dedicates itself to the epidemiology of neurological diseases in tropical areas, whether specific or not. It is structured around four axes, each dedicated to one or more neurological disorders of interest: epilepsy, neurodegenerative disorders, vascular disorders and neuroinfectious diseases with an emphasis on neuroparasitoses. A horizontal scientific exchange has been guaranteed by setting up “fields of application” that link the four axes of neurological disorders.

The weak points raised during the evaluation in 2011 have been taken into consideration and most of them have been corrected including the emergence of studies, supervision of doctoral students, and publications in the vascular field and the resumption of studies in the field of neurocysticercosis (NCC). While having many partner countries, the team has now been focusing its main research activities and capacity building in especially selected sites e.g. Benin. There have been efforts to include social sciences in a multidisciplinary approach in most of the axes, but there is still room for improvement. In addition, the unit managed to reduce the average duration of theses as well as to increase the numbers of post-docs hosted.

The strengths of the unit are its thematic specificity, as the only team in France and Europe to develop specifically research in tropical neuroepidemiology, and its unusually high level of scientific output. The unit has numerous invited lecturers attesting of its international influence and a strong activity in capacity building in Southern countries. Foreign PhD students trained in the unit have become teacher-researchers in their home universities and have been able to structure research teams in neuroepidemiology. Moreover, the unit is strong in terms of training by research as well as coordination of research networks, and has proposed new intervention strategies, in particular in epilepsy, in collaboration with pharmaceutical companies. Other strengths are the unit’s profiling of platforms in epidemiology, the “Centre de Ressources Biologiques” (CRB) *Toxoplasma* (with Reims), its numerous national and international collaborations with some of the best research groups in the world and its close partnership with socio-economic actors. As such, the partnership with Sanofi and the Access to Medicines Department deserves to be highlighted and was particularly strengthened in recent years. The unit has a very structured governance.

The unit has a solid local anchorage in Limoges and clinical expertise provided through a strong link with the hospital. Its director has very good research, teaching and managerial qualities in various fields and has enhanced the unit’s ability to obtain research grants (Agence Nationale de la Recherche (ANR), AXA, etc.) through an incentive to submit projects in the context of competitive calls.

From an already very high scientific level, the unit has managed to excel even higher, especially in terms of quality of the scientific output. Topics are varied, including communicable and non-communicable diseases in the field of mental health. Thereby, the unit is contributing in a unique way to the Sustainable Development Goal (SDG) 3 and beyond, lifting neuroepidemiology, epilepsy, and communicable as well as non-communicable mental health disorders up to a global level within Europe. While the epidemiological research approaches are very appropriate and innovative, implementation research including interventional approaches as well as policy advocacy needs to be more visible and the unit therefore is encouraged to include these aspects in the forthcoming projects.