



**iPLESP - Institut Pierre Louis d'épidémiologie et de
santé publique**
Rapport Hcéres

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Research evaluation

REPORT ON THE RESEARCH UNIT:
Institut Pierre Louis d'Épidémiologie et de Santé
Publique (IPLESP)

UNDER THE SUPERVISION OF THE
FOLLOWING INSTITUTIONS AND
RESEARCH BODIES:
Université Pierre et Marie Curie
Institut National de la Santé et de la Recherche
Médicale - INSERM

ÉVALUATION CAMPAIGN 2017-2018
GROUP D



In the name of Hcéres¹:

Michel Cosnard, President

In the name of the expert committee²:

Pierre-Marie Preux, Chairman of the
committee

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

¹ The president of Hcéres "countersigns the evaluation reports set up by the expert 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).

This report is the sole result of the unit's 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 PRESENTATION

unit name:	Institut Pierre Louis d'Épidémiologie et de Santé Publique
unit acronym:	IPLESP
Requested label:	UMR-S
Application type:	Restructuration
Current number:	1136
Head of the unit (2014-2018):	Ms Dominique COSTAGLIOLA
Project leader (2019-2023):	Mr Fabrice CARRAT
Number of teams:	7

COMMITTEE MEMBERS

Chair:	Mr Pierre-Marie PREUX, Université de Limoges (representative of CNU)
Experts:	Mr Marc BAGUELIN, Public Health England, UNITED Kingdom
	Mr Antoine DUCLOS, Université Lyon 1
	Ms Valérie JOOSTE, Université de Bourgogne (supporting personnel)
	Mr Emmanuel LAGARDE, Université de Bordeaux 2 (representative of CSS INSERM)
	Mr Christophe LEROYER, Université de Brest
	Mr Nicolas NAGOT, Université de Montpellier
	Mr Jean-Pierre ROUTY, Mc GILL University, Canada
	Mr Jean-François VIEL, Université de Rennes
HCERES scientific officer:	Mr Serge BRIANÇON
Representatives of supervising institutions and bodies:	
	Ms Corinne ALBERTI, INSERM
	Ms Camille CHAUDONNERET, INSERM
	Mr Stéphane REGNIER, UPMC

INTRODUCTION

HISTORY AND GEOGRAPHICAL LOCATION OF THE UNIT

The Pierre Louis Institute of Epidemiology and Public Health was created in January 2014 after merging and restructuration of existing teams as a unique laboratory gathering all the research forces in Epidemiology and Public Health within University Pierre et Marie Curie.

The unit is situated in several locations:

- Saint-Antoine School of Medicine (~ 950 m2);
- Caroli building (Saint-Antoine hospital) (~150 m2);
- Adicare building (Pitié hospital) (~ 260 m2)
- Cervi building (Pitié hospital and research) (~ 800m2);
- Laveran building (Pitié hospital) (~ 200m2).

MANAGEMENT TEAM

Mr Fabrice CARRAT, director; Ms Dominique COSTAGLIOLA, deputy director

HCERES Nomenclature

SVE6 Santé Publique, Épidémiologie, Recherche Clinique.

SCIENTIFIC DOMAIN

The unit is covering clinical, population and social epidemiology, with expertise in pharmaco-epidemiology, biostatistics, statistical and mathematical modelling. In addition, clinical trials, links between environment and health status and health care organization are part of the research focus. Research on communicable diseases includes: influenza, HIV, HCV, HBV, nosocomial and emerging infections. Chronic diseases (inflammatory, respiratory, allergic and cardiovascular diseases), with psychiatric disorders and critical care are also part of the research topics.

UNIT WORKFORCE

unit workforce	Number 30/06/2017	Number 01/01/2019
Permanent staff		
Full professors and similar positions	18	26
Assistant professors and similar positions	26	14
Full time research directors (Directeurs de recherche) and similar positions	5	5
Full time research associates (Chargés de recherche) and similar positions	8	7
Other scientists ("Conservateurs, cadres scientifiques des EPIC, fondations, industries, etc.")	0	0
High school teachers	0	0

Supporting personnel (ITAs, BIATSSs and others, notably of EPICs)	23	37
TOTAL permanent staff	80	89
Non-permanent staff		
Non-permanent professors and associate professors, including emeritus	3	
Non-permanent full time scientists, including emeritus, post-docs	4	
Non-permanent supporting personnel	112	
PhD Students	35	
TOTAL non-permanent staff	119	
TOTAL unit	199	

GLOBAL ASSESSMENT OF THE UNIT

The creation of the unit in 2014 has made possible to foster synergy between the teams, in several strategic domains of research, through the interactions between specialists in biostatistics, epidemiology, pharmacology and clinical care. The modified structuration from 8 teams to 7 along with an important reorganization is excellent to reach the goals defined in the strategy. The scientific outputs are outstanding. The unit has made major contribution to guidelines, especially in HIV or allergy research. The unit runs large original surveys and cohort studies with ownership of unique databases and related biobanks and has a strong expertise in modelling, biostatistics and analysis of large datasets including wide association studies or sensor-based data. It has a strong involvement in national and international clinical research in HIV programs (clinical trials, cohort studies) and population cohort studies, with large networks of collaboration. The unit is nationally and internationally recognized. Large grants were obtained from competitive sources. The unit has also an excellent involvement in epidemiology, biostatistics or clinics teaching activities. The unit is situated in different locations in Paris, which does not facilitate interactions between teams, even if efforts are made to support geographical unification. Collaborations, interactions and common projects between teams have increased but could still be reinforced. Transversal working groups will be a key element to improve this issue. In most teams, many staff have fixed term contracts with a high turnover. There is a burden of administrative load on researchers and supporting staff, since the number of administrative staff is clearly not sufficient.

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