

CIC - Centre d'Investigation Clinique Biothérapie et Vaccinologie Cochin-Pasteur

Rapport Hcéres

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Research evaluation

REPORT ON THE CIC:

Centre d'Investigation Clinique Cochin-Pasteur (CIC 1417)

UNDER THE SUPERVISION OF THE FOLLOWING INSTITUTIONS AND RESEARCH BODIES:

Institut National de la Santé et de la Recherche Médicale – INSERM Université Paris Descartes

EVALUATION CAMPAIGN 2017-2018GROUP D



In the name of Hcéres¹:

Michel Cosnard, President

In the name of the expert committee2:

Emmanuel Oger, 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 CIC'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.

CIC PRESENTATION

name: CIC Cochin-Pasteur

number: CIC 1417

Requested label:

Application type: Renewal

Head of the CIC

(2017-2018): Ms Odile Launay

Project leader

(2019-2023): Ms Odile Launay

Number of modules or

themes:

COMMITTEE MEMBERS

Chair: Mr Emmanuel Oger, Faculté de médecine Rennes

Experts: Mr Olivier Adotevi, Université de Besançon

Mr Harold Astre, CHU Poitiers

Ms Heidi Larson, London School of Hygiene & Tropical Medicine, UK

Mr Oriol Manuel, CHU de Lausanne, Suisse

HCERES scientific officer:

Mr François Gueyffier

Representatives of supervising institutions and bodies:

Ms Samia Deghmoun, Inserm

Ms Hélène Esperou, Inserm



INTRODUCTION

HISTORY AND GEOGRAPHICAL LOCATION OF THE CIC

CIC 1417 was created in 2005 and is still located in Cochin Hospital, Paris (AP-HP). In the late 90s, basic and translational research on HIV vaccine was structured (and eventually "Cochin Pasteur Center for Vaccine Trials" was created in 2002) strongly linked with the National Agency for Research on AIDS (ANRS).

This CIC is a partnership between AP-HP, Inserm, Institut Pasteur and Paris-Descartes University. Previous evaluation dates were 2009 and 2013.

MANAGEMENT MODULE

Head: Ms Odile LAUNAY;

Deputy head: Mr Pierre LOULERGUE.

HCERES NOMENCLATURE

SVE6_3 Recherche clinique

SCIENTIFIC DOMAIN

CIC scientific strategy is based on five axes:

- 1. vaccination among specific populations, such as immunocompromised subjects or pregnant women;
- 2. evaluation of new vaccines;
- 3. anti-tumor vaccination;
- 4. new test for immunology monitoring;
- 5. human and social science research (perceptions and behaviour with respect to vaccination).

CIC WORKFORCE

CIC workforce	Number 30/06/2017	Number 01/01/2019	
Permanent staff			
Full professors, assistant professors and similar positions	1	1	
Clinicians (PH)	4	3	
Full time research directors (Directeurs de recherche) or Research associates (chargés de recherché) EPST , EPIC and similar positions	0	0	
Full professors, associate professors and clinicians (PH) affiliated with CNRS, INSERM or EA research CIC	0	0	
Other permanent staff involved in research: health professionals, supporting personnel etc.	7	10	
TOTAL permanent staff	12	14	
Non-permanent staff			



Non-permanent professors and associate professors, including emeritus,)	0		
Non-permanent full time scientists, including emeritus, post-docs	0		
Non-permanent supporting personnel	10		
PhD Students	0		
TOTAL non-permanent staff	10		
TOTAL CIC	22*		

^{*19} full-time equivalent

GLOBAL ASSESSMENT OF THE CIC

CIC 1417 contributes to a large, high-level scientific output and is nationally and international renowned as the leader of a clinical research network in vaccinology (I-REIVAC), labelled in 2014 as part of F-CRIN project.

CIC 1417 is focused on vaccination and as such is a unique structure in France. Scientific field of investigation is however large, as expected for a supportive structure, from vaccination among specific population, such as immunocompromised patients or pregnant women, evaluation of new vaccines, to contribution the development of a new test for immunology monitoring. The level of contribution to - and the significance of - the axis on human and social sciences were already questioned in the last evaluation report.

The limited scientific staff does not allow sufficient involvement in training through research and specifically PhD supervision.

To maintain quantitative high-level scientific output, a relevant, more focused scientific strategy is recommended with a few, well-chosen, win-win collaborations with other Inserm / Institut Pasteur research units.

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