

# **PANTHER - Physiopathologie et approches thérapeutiques innovantes des maladies autoréactives**

## **Rapport Hcéres**

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# HCERES

High Council for the Evaluation of Research  
and Higher Education

Research units

HCERES report on research unit:

Pathophysiology ANd Innovative THERapeutic  
approaches in autoreactive diseases

PANTHER

Under the supervision of the following  
institutions and research bodies:

Université de Rouen

Institut National de la Sante et de la Recherche

Medicale - INSERM

# HCERES

High Council for the Evaluation of Research  
and Higher Education

Research units

*In the name of HCERES,<sup>1</sup>*

Michel Cosnard, president

In the name of the experts committee,<sup>2</sup>

Jose Boucraut, chairman of the committee

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Under the decree N<sup>o</sup>.2014-1365 dated 14 november 2014,

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

<sup>2</sup> 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:	Pathophysiology AND Innovative THERapeutic approaches in autoreactive diseases
Unit acronym:	PANTHER
Label requested:	UMR INSERM - University of Rouen
Current number:	U905
Name of Director (2015-2016):	Mr Olivier BOYER
Name of Project Leader (2017-2021):	Mr Olivier BOYER

## Expert committee members

Chair: Mr Jose BOUCRAUT, UMR CNRS 7286, Aix-Marseille Université, Marseille (representative of the CNU)

Experts: Ms Yolande RICHARD, Inserm U1016, Paris (representative of the Inserm)  
Mr Cassian SITARU, University of Freiburg, Germany

Scientific delegate representing the HCERES:  
Ms Sophie EZINE

### Representative(s) of supervising institutions and bodies:

Ms Christine GUILLARD, Chargée de mission, Inserm  
Mr Samir OULDALI, Délégué Regional, Inserm  
Mr Cafer ÖZKUL, Université de Rouen  
Mr Laurent YON, Université de Rouen

### Head of Doctoral School:

Mr Patrice LEROUGE, Doctoral school ED NBISE n° 497, "Normandy's Integrative Biology, Health, Environment".

## 1 • Introduction

### History and geographical location of the unit

The unit started in 2008 under the direction of Mr Olivier BOYER. The research unit, evaluated in 2010 and renewed in 2012, is composed of 2 teams. For the next contract, some members of team 1 will join team 2, whereas members from the unit “Micro-Environnement et Renouvellement Cellulaire Intégré” (UPRES EA 3829) from Rouen will join team 1 at the end of 2016. Both teams carry out their research within the Faculty of Medicine and Pharmacy. The research unit is in charge of IRIB, the Institute of Research and Innovation in Biomedecine headed by Mr Olivier BOYER, which includes several platforms and is used by 21 Inserm, CNRS, University and hospital structures. Six engineers from the research unit are affiliated to IRIB.

### Management team

For the 2017-2021 period, the research unit will be headed by Mr Olivier BOYER.

### HCERES nomenclature

SVE1\_LS3, SVE1\_LS4, SVE1\_LS6

### Scientific domains

The main areas of research are related to the regulation of immune response in neuromuscular diseases, autoimmune dermatological disorders and drug-induced toxidermia. In parallel, several translational projects concern the identification and characterization of diagnostic biomarkers in rheumatoid arthritis, analysis of therapy efficacy and future projects will deal with regenerative cell/tissue therapy.

## Unit workforce

Unit workforce	Number on 30/06/2015	Number on 01/01/2017
N1: Permanent professors and similar positions	9	15
N2: Permanent researchers from Institutions and similar positions		
N3: Other permanent staff (technicians and administrative personnel)	14	17
N4: Other professors (Emeritus Professor, on-contract Professor, etc.)		
N5: Other researchers from Institutions (Emeritus Research Director, Postdoctoral students, visitors, etc.)	6	
N6: Other contractual staff (technicians and administrative personnel)	2	
N7: PhD students	9	
<b>TOTAL N1 to N7</b>	<b>40</b>	
Qualified research supervisors (HDR) or similar positions	12	

Unit record	From 01/01/2010 to 30/06/2015
PhD theses defended	13
Postdoctoral scientists having spent at least 12 months in the unit	6
Number of Research Supervisor Qualifications (HDR) obtained during the period	2

## 2 • Overall assessment of the unit

### Introduction

The unit is composed of two teams and each team develops three main domains of research. These research topics are under the responsibility of 6 principal investigators (3 PU-PH, 1 MCU, 1 research engineer (IR) and 1 post-doc.).

Both fundamental and clinical researches are developed. The main axes are i) studies on the physiological and pathophysiological mechanisms regulating autoimmunity in myopathies and the development of clinical trials in acquired muscle disease; ii) studies on the pathophysiological mechanisms of rheumatoid arthritis, autoimmune skin diseases and drug allergy. Both teams develop murine models.

### Global assessment of the unit

The unit has a high expertise in its field of research and maintains an excellent research in association with the patient cohorts available. The two teams are well recognized in their specific domains. Team 1 addresses questions in three domains: immunoregulatory approaches using experimental mouse models, role of neuropeptides VIP and PACAP in both anti-inflammation and neuroprotection and pathophysiology of myositis. Team 2 carries out a superb translational research in the field of autoimmune diseases, with a focus on dermatoses. Unit members participate in events for public and patient information. Most scientists of the unit are heavily involved in teaching in medical, pharmaceutical and scientific masters or doctoral schools.

### Strengths and opportunities in the context

The main strengths include the translational research, the available cohorts of patients and the contribution to numerous clinical boards.

The strong involvement in teaching favours the recruitment of young scientific and medical investigators and improves the visibility of the unit.

The director is extremely active in unifying and energizing research in Rouen and in the Normandy region. The IRIB platform is one example of his efficiency in this domain.

Team leaders show a very good mentoring record together with engineers highly involved in training of PhD and Master students.

A major strength of team 2 is its composition including both highly recognized clinicians and experienced engineers. The access to well-characterized patient cohorts and to various cutting-edge experimental methods and animal models is an asset. A further competitive advantage of team 2 and its project is their extensive, project-relevant and internationally leading expertise in molecular immunology and their cooperation with national (Pasteur Institute) and international (Singapore Network) laboratories.

### Weaknesses and threats in the context

There are too many objectives with regard to the number of researchers and their availability.

While at this stage no obvious major shortcomings are apparent, a possible aspect to consider is the limited time that PIs and other team members with heavy clinical duties can devote to each project.

A first long-standing shortcoming is the absence of permanent academic researchers.

The unit should attract full-time permanent researchers (through institutional mobility) or de novo recruitment.

The position of a group leader, who arrived in 2014 in team 1, is not secured (post-doctoral position) and further hampers long-term projects.

Finally, while the teams successfully secured financial support in the past, the situation will be more difficult in the future, except for some translational projects.

### Recommendations

The unit should refocus the projects.

An effort to promote “emergent” or independent teams with clearly identified leaders and work forces should be considered.

There is a need to strengthen the complementarities and synergies between teams and their members.