



PROMISE

Preparing for RSV Immunisation
and Surveillance in Europe



Innovative
medicines
initiative



Paving the way to RSV disease prevention, treatment and immunisation

What is PROMISE?

PROMISE (Preparing for RSV Immunisation and Surveillance in Europe) is an IMI project that aims to take a major leap forward in the fight against RSV in Europe and worldwide.

Our mission

PROMISE continues to advance scientific knowledge on RSV to:

- Better **inform public health strategies** and;
- Support the development and introduction of **novel immunisations tools and therapeutics**.

Furthermore, the project focuses on:

- Evaluating the **impact of COVID-19 on RSV** epidemiology with a special focus on infants, young children and older adults.
- Raising **awareness about this disease** and preventable measures by providing factual information and **developing a peer-support network for parents of RSV-affected children** that can also advise academics, the pharmaceutical/biotechnology industry, and public health agencies.

What is the Respiratory Syncytial Virus (RSV)



The RS virus is highly contagious.



Babies, small children and elderly people are most at risk.



RSV can cause upper respiratory infections (i.e. colds) and lower respiratory tract infections (i.e. bronchiolitis and pneumonia) and in most severe cases, become life-threatening.



Multiple RSV infections can affect a body during its lifetime. An RSV infection triggers the body to become more immune to the virus, although never at completion.

RSV disease burden

33M

Globally 33 million young children are diagnosed with RSV disease each year.

3-6%

Annually, 3-6% of all older adults are infected with RSV.

118K

Annually, RSV causes an estimated 118,000 child deaths worldwide.

5B

Childhood RSV costs governments around the world nearly 5 billion euros every year.

What are the benefits of PROMISE?



For RSV patients

- Decrease RSV-related outpatient visits, hospitalisations, and mortality.
- Improve RSV awareness in RSV and immunisation solutions.



For Researchers & Clinicians

- Improving knowledge about RSV disease.
- Provide a robust RSV surveillance network.
- Consolidate data on RSV epidemiology.
- Validate RSV biomarkers.
- Reduce the number of hospital admissions as preventive strategies start to be used and decrease RSV disease burden.



For the Pharmaceutical/Biotech Industry

- Pave the way for the preparation of a framework for immunisation against RSV.
- Support the development of new effective therapeutic products and their post-marketing evaluation, and facilitate regulatory and policy interactions.
- Identify and monitor seasonal RSV epidemics to effectively plan clinical trials.



For Health Authorities

- Evaluate the impact of COVID-19 on RSV epidemiology.
- Better define strategies and adopt new guidelines for RSV immunisation, as well as inform about their policies.
- Incorporate new biomarker-based endpoints for RSV.
- Inform the effective planning of clinical trials for immunisation tools and therapeutics.

Who participates in PROMISE?

Translational scientists, clinicians, public health agencies, the pharmaceutical/biotechnology industry, patient groups, and clinical societies work together within the PROMISE Consortium. The group represents 22 world-class organisations with an impressive track record on RSV research.



Facts & Figures

START DATE:	1 NOVEMBER 2021
END DATE:	30 APRIL 2024
CALL:	IMI2 – CALL 22
TYPE OF ACTION:	RESEARCH AND INNOVATION ACTION (RIA)
GRANT AGREEMENT NUMBER:	101034339
CONTRIBUTIONS	
TOTAL COST:	7.024.387 €
IMI FUNDING:	3.744.375 €
EFPIA IN KIND:	3.280.012 €
PROJECT COORDINATOR:	THE UNIVERSITY OF EDINBURGH AND UNIVERSITAIR MEDISCH CENTRUM UTRECHT
PROJECT LEADER:	SANOFI

This project has received funding from the Innovative Medicines Initiative 2 Joint Undertaking (JU) under grant agreement No 101034339. The JU receives support from the European Union's Horizon 2020 research and innovation programme and EFPIA. This document reflects the views of the authors and neither IMI nor the European Union, EFPIA are liable for any use that may be made of the information contained herein.