



The Canadian Human Proteome Project

February 2011

Where do funders stand when it comes to large-scale initiatives ?



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relier la science à la vie

What's in the air right now ?

“We have been investing massively in **Genomics!Proteomics** for years and haven't seen benefits so far...”

Canada recently invested over 2B\$ to renovate Universities and Colleges (Knowledge Infrastructure Program)

⇒ Immediate return on investments.

Political leaders wants to fund applied projects oriented toward **translational research**

⇒ Bringing the fundamental research to the clinic and/or the market

•Genome BC initiative in Genomics and Health:

....will build on several initiatives of strategic importance to the Province that expand existing capabilities in **the translation of discovery science to everyday life.**

•Genome Quebec translational program:

Preference will be given to projects whose **potential deliverables are likely to be converted into products, policies or services in the near future.....** and its ability to produce **tools that can be made available to clinicians and other health care practitioners or “transferred” to the private sector pharma/biotech) for commercialization**

•Genome Canada LSGRP

All applications must describe, with supporting evidence, the potential benefits for Canada which will be realized or initiated before the end of the project : 3 YEARS



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What's popular (likely to be funded) these days?

- ✓ Large scale projects...Yes (ERA-Net, NCEs, European Commission, etc)
- ✓ But...Clear and realistic deliverables|outcomes
- ✓ Benefits \$ to the Canadian
- ✓ Leverage of previous public investments
- ✓ International component
- ✓ Leadership role for Canada

All this through...TRANSLATIONAL RESEARCH!!



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(date)

What's the actual Canadian S&T strategy ?

S&T priorities: 4 listed - Health and related life sciences and technologies

Sub-priorities: Regenerative medicine
Neuroscience
Health in an aging population
Biomedical engineering and medical technologies

http://www.ic.gc.ca/eic/site/ic1.nsf/eng/h_04709.html

Not exclusive !



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What the CHPP should look like from our standpoint ?

- ✓ Focused
- ✓ Clear beginning and end (3 years)
- ✓ Measurable outcomes and deliverables
- ✓ Chromosome-based but aiming to support a health problems|diseases of importance for Canada
- ✓ Involve many regions!provinces
- ✓ Integrated to an international initiative with a leadership role for Canada
- ✓ Supported by all stakeholders (industries, clinicians, population)

DO NOT OVER PROMISE AND UNDER DELIVER !




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(date)

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The CHPP: Where to start ?

- ✓ October, 28, 2010: First contact CNPN, GC, GQ, GBC, OGI, CIHR
All interested to know more about the initiative !
- ✓ January, 16-17, 2011, Barbados: First meeting of the Working Group and Consensus Position Paper
- ✓ February|April 2011: Improvement of the Position Paper through workshops and consultations
- ✓ May 8-11, 2011, Banff: Presentation of the CHPP White Paper
- ✓ If the community is interested  Design and launch of a national competition
 - Peer review mandatory
 - Many consortiums|projects should apply



Funding Large-Scale Initiative

Example of a Canadian partnership

GC. CIHR. GQ and GBC recently partnered to fund a major initiative (child health)
Total budget announced today App. 5.5M\$

The competition was launched in September 2010 and the money is about to flow to the consortiums.

To get the entire Canadian community on board:

- ✓ Focus on the opportunity|emergency
- ✓ Leverage of existing infrastructures|expertise
- ✓ Leadership role for Canada,
- ✓ Strong benefits at every level

WHY NOW ?
WHY HERE ? WHY US ?
WHAT IF WE DON'T DO IT ?
WHY WE MUST INVEST ?

If funds not available for a large scale initiative, consider a pilot|POP project !

Act now...Federal budget is soon to be announced !



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