

# Resource Summary Report

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## Innovative Medicines Initiative

RRID:SCR\_003754

Type: Tool

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### Proper Citation

Innovative Medicines Initiative (RRID:SCR\_003754)

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### Resource Information

**URL:** <http://www.imi.europa.eu/>

**Proper Citation:** Innovative Medicines Initiative (RRID:SCR\_003754)

**Description:** Initiative to improve health by speeding up the development of, and patient access to, innovative medicines, particularly in areas where there is an unmet medical or social need. It does this by initiating and managing consortia composed of the key players involved in healthcare research, including universities, the pharmaceutical and other industries, small and medium-sized enterprises (SMEs), patient organizations, and medicines regulators. IMI is a public-private partnership between the European Union and the European pharmaceutical industry, represented by the European Federation of Pharmaceutical Industries and Associations (EFPIA), with a timeframe separated into two phases (2008-2013, 2014-2024) that are each defined by unique research agendas. The first phase (2008-2013) had four pillars that defined the focus of its research agenda: \* Predicting safety: evaluating the safety of a compound during the pre-clinical phase of the development process and the later phases in clinical development. \* Predicting efficacy: improving the ability to predict how a drug will interact in humans and how it may produce a change in function. \* Knowledge management: utilization of information and data for predicting safety and efficacy. \* Education and training: closing existing training gaps in the drug development process. Some of the consortia managed under IMI focused on specific health issues while others focused on broader challenges in drug development. Additionally, IMI launched a number of education and training projects during its first phases. The goal of the second phase (IMI2, 2014-2024) is to develop next generation vaccines and drugs. The focus is on delivering the right prevention and treatment for the right patient at the right time. There is a strong focus on the development of new medicines with an emphasis on tools and methods that accelerate patient access to new medicines. IMI2's agenda can be defined by four axes of research: \* target validation and biomarker research (efficacy and safety) \* adoption of innovative clinical trial paradigms \* innovative medicines \* patient-tailored adherence programs As part of its distinct goals, IMI2 aims to deliver: \* 30% better success rate in clinical trials of priority medicines identified by the WHO; clinical proof of concept in immunological, respiratory, neurological and neurodegenerative diseases in five years; \* new and approved diagnostic markers for

four of these diseases and at least two new medicines which could either be new antibiotics or new therapies for Alzheimer's disease.

**Abbreviations:** IMI

**Resource Type:** organization

**Keywords:** drug development, drug, tool development, biomarker, data sharing, target validation, safety, efficacy, clinical trial, medicine, adherence program, vaccine, consortium, diagnostic marker, oncology, drug discovery

**Funding:** European Union FP7 ;  
Horizon 2020 ;  
EFPIA ;  
Other life science industries or organizations

**Resource Name:** Innovative Medicines Initiative

**Resource ID:** SCR\_003754

**Alternate IDs:** Wikidata: Q1664196, nlx\_157984, grid.454814.8, ISNI: 0000 0004 0577 0821

**Alternate URLs:** <https://ror.org/019af4n30>

**Record Creation Time:** 20220129T080220+0000

**Record Last Update:** 20260801T190232+0000

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## Ratings and Alerts

No rating or validation information has been found for Innovative Medicines Initiative.

No alerts have been found for Innovative Medicines Initiative.

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## Data and Source Information

**Source:** [SciCrunch Registry](#)

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## Usage and Citation Metrics

We found 275 mentions in open access literature.

**Listed below are recent publications.** The full list is available at [dkNET](#) .

Rattu A, et al. (2026) Predictors of Response to Biologics for Severe Asthma: A Systematic Review and Meta-Analysis. Allergy, 81(1), 24.

Kopanz J, et al. (2026) Why and how do we perform physical examination(s) in clinical trials? A use case of drug intervention trials in type 2 diabetes mellitus. British journal of clinical pharmacology, 92(1), 280.

Jansen MP, et al. (2025) Cartilage thickness distribution and its dependence on demographic, radiographic, and MRI structural pathology in knee osteoarthritis-data from the IMI-APPROACH cohort. *Skeletal radiology*, 54(10), 2025.

Lentzen M, et al. (2025) RADAR-AD: assessment of multiple remote monitoring technologies for early detection of Alzheimer's disease. *Alzheimer's research & therapy*, 17(1), 29.

Nunez-Badinez P, et al. (2025) Dyspareunia is rarely assessed in rodent models of endometriosis and interstitial cystitis/bladder pain syndrome. *Reproduction & fertility*, 6(1).

van Rijssel TI, et al. (2025) The Ethics of Decentralized Clinical Trials and Informed Consent: Taking Technologies' Soft Impacts into Account. *Health care analysis : HCA : journal of health philosophy and policy*, 33(2), 139.

Bentvelzen MLM, et al. (2025) Genetic markers for knee osteoarthritis presence are not associated with disease progression - data from the IMI-APPROACH cohort. *PloS one*, 20(6), e0325819.

Kopanz J, et al. (2025) Do people prefer to take part in a clinical trial from home or come to site? A discrete choice experiment in type 2 diabetes mellitus. *BMJ open*, 15(11), e107737.

Gardarsdottir H, et al. (2025) Regulatory Interactions and Learnings-RADIAL the Trials@Home Proof-of-Concept Trial on Decentralization. *Clinical pharmacology and therapeutics*, 118(5), 1046.

Harlianto NI, et al. (2025) Aortic, musculoskeletal and organ characteristics on computed tomography in knee osteoarthritis - an explorative study in the IMI-APPROACH cohort. *Rheumatology international*, 45(3), 62.

Pag??s EG, et al. (2025) Contribution of physiological dynamics in predicting major depressive disorder severity. *Psychophysiology*, 62(2), e14729.

Kasonia K, et al. (2025) Regulator experiences of trials during Ebola epidemics in Sierra Leone, Guinea, and the Democratic Republic of the Congo. *Tropical medicine & international health : TM & IH*, 30(6), 539.

Lagerwaard B, et al. (2025) Recruiting and Consenting Decentralized Clinical Trial Participants-Learnings from the Trials@Home RADIAL Proof-of-Concept Trial. *Clinical pharmacology and therapeutics*, 118(5), 1067.

Zuidgeest MGP, et al. (2025) Bringing Trial Activities to Participants-The Trials@Home RADIAL Proof-of-Concept Trial Investigating Decentralization of Trials. *Clinical pharmacology and therapeutics*, 118(5), 1037.

Hanke S, et al. (2025) Operationalizing Decentralized Clinical Trials: Technology Insights from the Trials@Home RADIAL Proof-of-Concept Trial. *Clinical pharmacology and therapeutics*, 118(5), 1090.

Brinch ML, et al. (2025) The neglected model validation of antimicrobial resistance transmission models - a systematic review. *Antimicrobial resistance and infection control*,

14(1), 59.

Nochi Z, et al. (2025) Effects of Lacosamide, Pregabalin, and Tapentadol on Peripheral Nerve Excitability: A Randomized, Double-blind, Placebo-controlled, Crossover, Multicenter Trial in Healthy Subjects. *Anesthesiology*, 143(5), 1279.

Saier C, et al. (2025) TREAT: systematic and inclusive selection process of genes for genomic newborn screening as part of the Screen4Care project. *Orphanet journal of rare diseases*, 20(1), 231.

Perez-Toro PA, et al. (2025) Exploring biases related to the use of large language models in a multilingual depression corpus. *Scientific reports*, 15(1), 36197.

D'Amato M, et al. (2025) Weakly supervised regression enables interpretable tumor detection in whole-slide histopathology without negative cases. *Scientific reports*, 15(1), 43145.