



**UNIVERSITÉ
DE LORRAINE**



**FACULTÉ DE
MÉDECINE / MAÏEUTIQUE /
MÉTIER S DE LA SANTÉ à NANCY**

IPA2

SÉANCES 5 & 6 : OUTILS POUR LES ILLUSTRATIONS, ÉCRIRE LE TEXTE

lucy.georges@univ-lorraine.fr

TYPOLOGIE & PRINCIPES DE BASE

- Tableaux
- Graphiques
 - Histogrammes
 - Courbes
 - Camemberts
 - Etc.
- Cartes
- Diagrammes
- Photographies
- Dessins
- Logos

Pertinence

Texte d'accompagnement

Couleurs cohérentes et compatibles

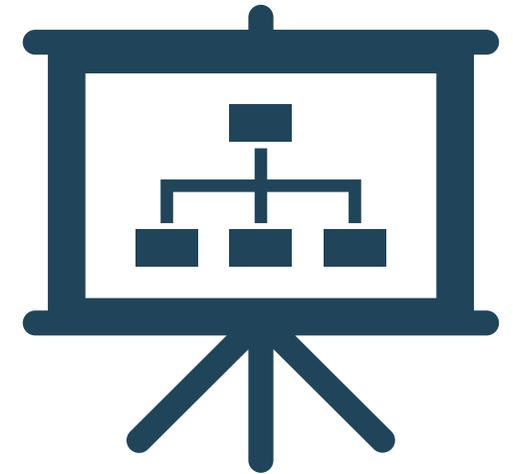
Respect de l'échelle

Pas de distractions

Droits d'auteur !

10 OUTILS EN LIGNE POUR LES GRAPHIQUES

1. <https://venngage.com/features/graph-maker>
2. <https://developers.google.com/chart/>
3. <https://rawgraphs.io/>
4. <https://livegap.com/charts/index.php?lan=en>
5. <https://www.onlinecharttool.com/>
6. <https://www.canva.com/graphs/>
7. <https://www.rapidtables.com/tools/chart-maker.html>
8. <https://www.visme.co/graph-maker/>
9. <https://www.chartgo.com/index.jsp>
10. <https://infogram.com>



LE TEXTE



Quantité

400-600 mots

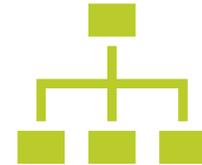


Taille

Titre

En-têtes

Corps



Structure

LE TITRE

- Concis
- Précis
- Sujet et méthode ou déclaratif
- Lisible à 2 mètres

Titre

Auteurs

En-tête

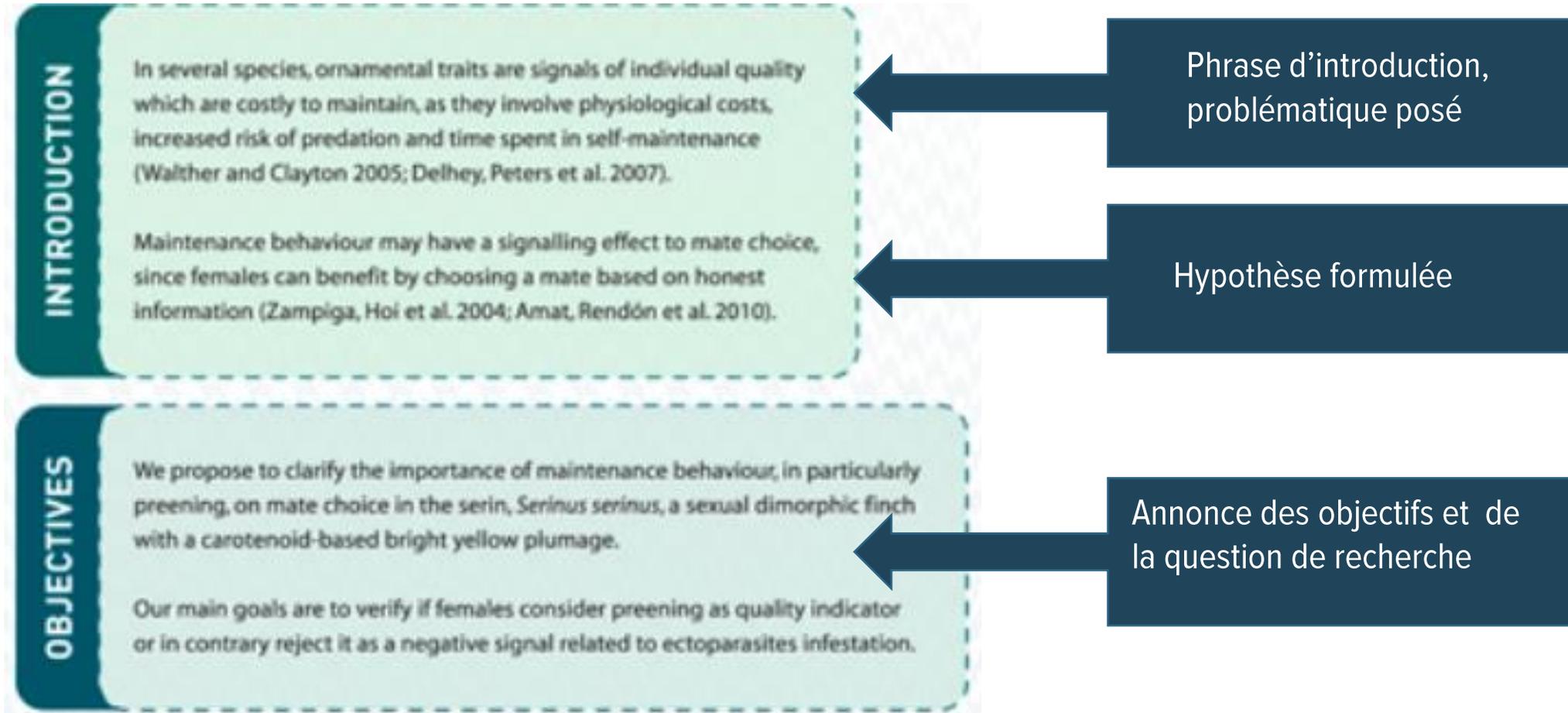
Corps du texte

En-tête

Corps du texte

INTRODUCTION

Intitulés alternatifs : context, background, study rationale



MÉTHODES

Reprise des éléments du protocole

- Sources
- Mots clés
- Dates
- Critères d'inclusion et exclusion
- Analyse de qualité
- Eventuel traitement de données

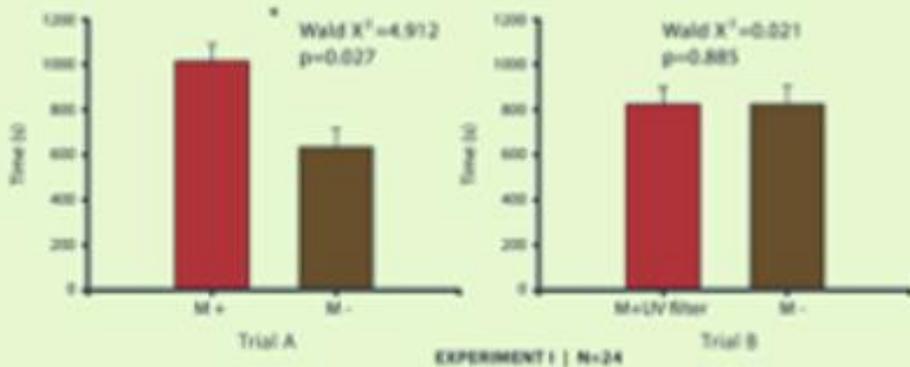


RÉSULTATS

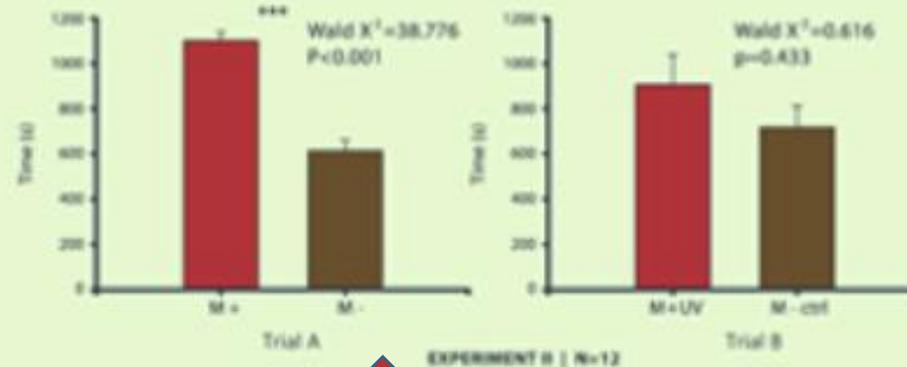
Phrase courte et claire pour accompagner le graphique

Place aux illustrations !

Females preferred more colourful males (A). When the UV-light of the preferred ones was blocked, females stop exhibiting preference (B).



Females preferred more colourfull males (A). When the UV was blocked directly in M+ plumage, females didn't show any preference (B).



Informations pertinentes sur le graphique

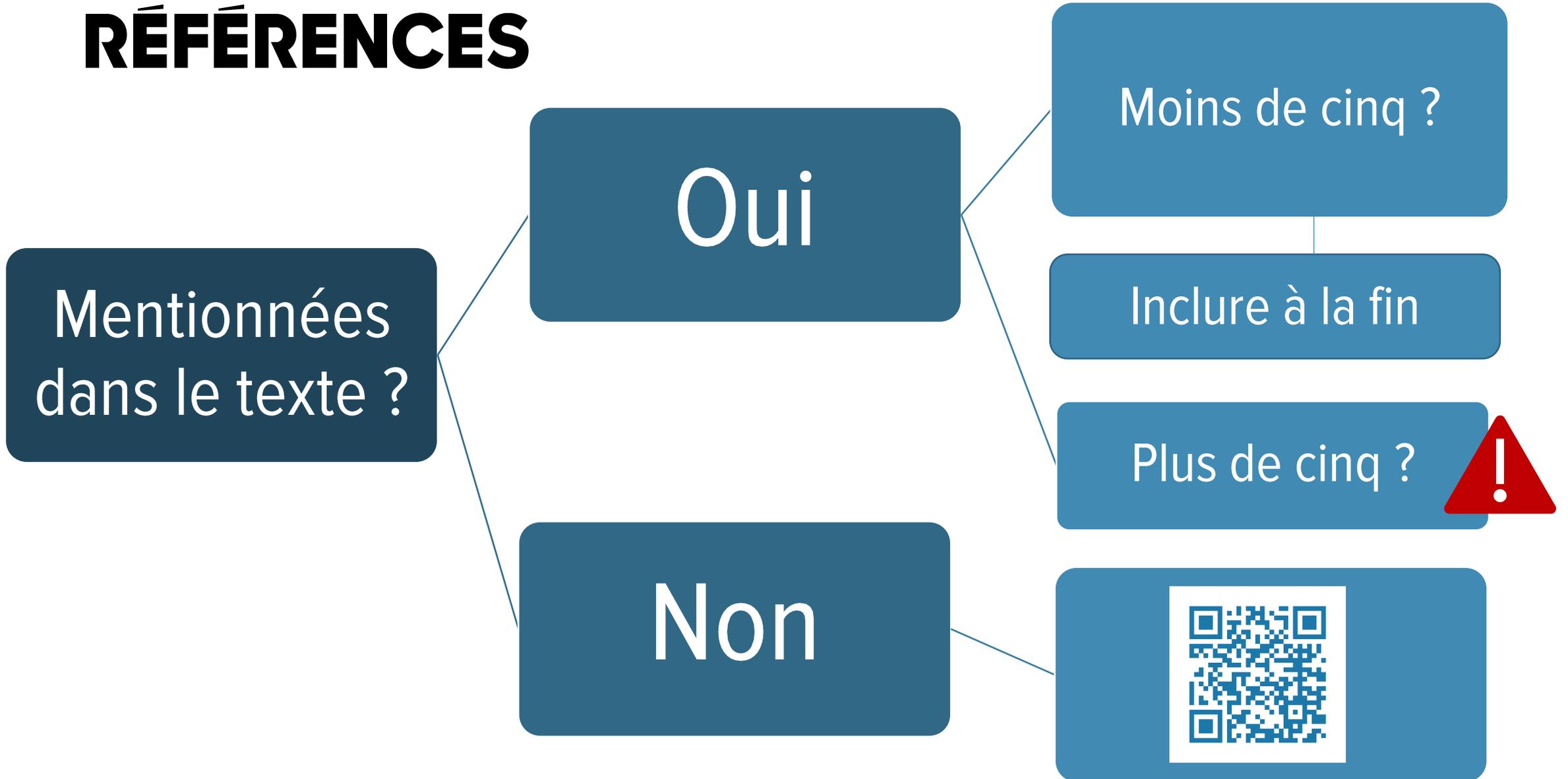
RESULTS

CONCLUSION(S?)

CONCLUSIONS

- Individuals showed repeatability in the four behavioural tests.
- Males and females differed in their consistency and behavioural responses across the different tests.
- Behavioural traits were correlated, indicative of a possible behavioural syndrome, but differed between females and males: More neophobic males were also more sociable, and females that were more sociable were less fearful and marginally less explorative.
- In mate choice tests, female personality was related with its own behavioural performance.
- Our results stress the importance of looking for sex differences in personality, and for considering the influence of personality in mate choice context.

RÉFÉRENCES



EXEMPLE DE POSTER CRÉÉ À PARTIR D'UNE REVUE DE LA LITTÉRATURE



A Pragmatic Literature Review to Identify Economic Outcomes for Repurposed Drugs in Rare Diseases

Emma Drane,¹ Kate Hanman,² Elizabeth Walker,² Rick Thompson³

¹Costello Medical, Cambridge, UK; ²Costello Medical, London, UK; ³Findacure, Cambridge, UK

PSY158

Objectives

- To conduct a two-stage pragmatic literature review (PLR):
 - Stage 1: Identify drugs that have been repurposed in rare diseases.
 - Stage 2: Identify economic evidence relating to these rare diseases and repurposed drugs.

Background

- Repurposing generic drugs offers a quick and accessible route to deliver new treatments for rare diseases, however, there is limited research into how widely repurposed drugs are used and the associated costs.¹

Methods

Overview

- A PLR for Stage 1 was conducted, followed by the implementation of a prioritisation criteria to identify rare disease and repurposed drug combinations to be searched for in Stage 2.

Stages 1 and 2

- Search strategies are presented in Table 1.
- All records identified at the abstract/full-text phases were assessed by a single reviewer against the eligibility criteria, with a second reviewer assessing all included articles and 10% of excluded articles.
- Data extraction was performed by a single extractor and reviewed by a second extractor.

Prioritisation Criteria

- Following completion of Stage 1, identified rare disease/repurposed drug combinations were selected to inform the search strategies for Stage 2, based on:
 - Publication study type – case reports were de-prioritised.
 - Combinations previously highlighted as relevant by Findacure.

Results

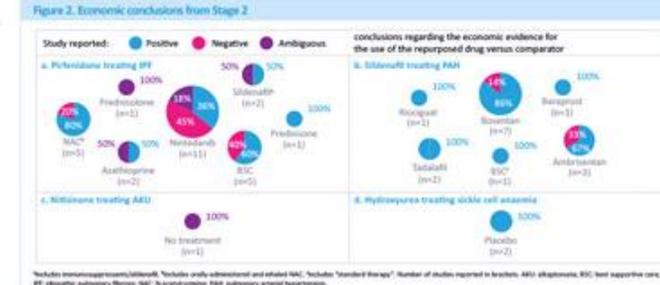
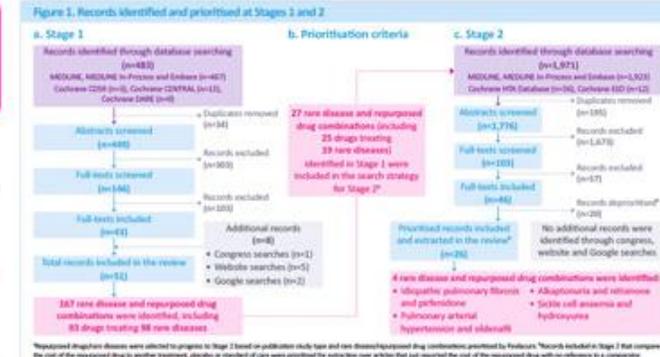
Overview

- Fifty-one articles were included, identifying 167 rare disease/repurposed drug combinations (Figure 1a).

Table 1. Search strategies for Stages 1 and 2

Search Strategy	Stage 1 ^a	Stage 2 ^b
Databases	MEDLINE, Embase, CDSR, CAME, CENTRAL, NICE, EMBASE, HIND	MEDLINE, Embase, CDSR, CAME, CENTRAL, NICE, EMBASE, HIND
Congresses	ICORD, ECRD, ISPOR Annual European and International Meetings, World Congress on Rare Diseases and Orphan Drugs, World Orphan Drug Congress	International Rare Diseases Research Consortium National Organization for Rare Diseases
Websites	Google	Google
Online Search Engines	Google	Google
Search Terms	General terms for rare diseases and repurposed-drugs	The specific names for rare diseases and drugs identified at Stage 1 and economic terms
Eligibility Criteria	Patients receiving a repurposed drug for a non-oncological rare disease	The specific names of the repurposed drug for a rare disease
Intervention	A drug that has been repurposed for a rare disease	Any or none
Comparator	Any or none	Economic outcomes including: • CUG • Leds • Incremental costs • QALYs • ICERs
Outcomes	Any	Articles in the English language of any study type

^aDatabase searches performed on 30 June 2017. ^bDatabase searches performed on 6 November 2017. CDSR: Cochrane Database of Systematic Reviews; CENTRAL: Cochrane Central Register of Controlled Trials; EMBASE: Embase; HIND: Health Technology Assessment Database; NICE: National Institute for Health Research; ISPOR: International Society for Pharmacoeconomics and Outcomes Research; WHO: World Health Organization; WHOCC: World Health Organization Clinical Trials Registry; WHOCC: World Health Organization Clinical Trials Registry; WHOCC: World Health Organization Clinical Trials Registry.



- Prioritisation: Following implementation of the criteria, 27 rare disease/repurposed drug combinations were prioritised, consisting of 25 repurposed drugs treating 19 rare diseases (Figure 1b).
- Forty-six articles fulfilled the Stage 2 eligibility criteria, of which 26 were prioritised for extraction as they compared the cost of the repurposed drug to another treatment, placebo or standard of care (Figure 1c).
- The 26 extracted articles identified four rare disease/repurposed drug combinations: pifedronerol/idiopathic pulmonary fibrosis (IPF); sildenafil/pulmonary arterial hypertension (PAH); nifedipine/atrioventricular (AV) nodal re-entrant tachycardia (AVNRT); hydroxyurea/sickle cell anaemia (Figure 1d).

Economic Conclusions from Stage 2

- Economic outcomes reported in the 26 articles identified in Stage 2 were variable and included incremental cost-effectiveness ratios and drug/resource use costs.
- Thirteen studies reported economic outcomes for pifedronerol in IPF (Figure 2a),²⁻¹⁰ most commonly in comparison with nifedipine, with variable economic conclusions reported.
- Eight studies reported economic outcomes for sildenafil in PAH,¹¹⁻¹⁸ the majority reporting more positive economic conclusions for sildenafil compared to bosentan, which was the most common comparator (Figure 2b).
- One study reported ambiguous economic conclusions for nifedipine in AVNRT in comparison to no treatment (Figure 2c).¹⁹
- Two studies compared hydroxyurea treatment to placebo in sickle cell anaemia, with both authors reporting hydroxyurea to be cost-saving or cost-effective (Figure 2d).^{20,21}

Conclusions

- Given the substantial number of generic drugs repurposed for rare diseases and the potential cost-effectiveness benefits, only a small number of publications examined associated economic outcomes.
- Generic drugs show promising economic outcomes when repurposed in rare diseases. However, there is significant variation in results and limited published data, with a very wide variance in the included comparators and cost metrics used, indicating that further research is required.

References

1. Lee S, et al. Drug Repurposing. *The New England Journal of Medicine* 2017; 376: 100-108.
2. Hanman K, et al. *Value Health* 2013;16(4):A104.
3. Hanman K, et al. *Value Health* 2013;16(4):A105.
4. Hanman K, et al. *Value Health* 2013;16(4):A106.
5. Hanman K, et al. *Value Health* 2013;16(4):A107.
6. Hanman K, et al. *Value Health* 2013;16(4):A108.
7. Hanman K, et al. *Value Health* 2013;16(4):A109.
8. Hanman K, et al. *Value Health* 2013;16(4):A110.
9. Hanman K, et al. *Value Health* 2013;16(4):A111.
10. Hanman K, et al. *Value Health* 2013;16(4):A112.
11. Hanman K, et al. *Value Health* 2013;16(4):A113.
12. Hanman K, et al. *Value Health* 2013;16(4):A114.
13. Hanman K, et al. *Value Health* 2013;16(4):A115.
14. Hanman K, et al. *Value Health* 2013;16(4):A116.
15. Hanman K, et al. *Value Health* 2013;16(4):A117.
16. Hanman K, et al. *Value Health* 2013;16(4):A118.
17. Hanman K, et al. *Value Health* 2013;16(4):A119.
18. Hanman K, et al. *Value Health* 2013;16(4):A120.
19. Hanman K, et al. *Value Health* 2013;16(4):A121.
20. Hanman K, et al. *Value Health* 2013;16(4):A122.
21. Hanman K, et al. *Value Health* 2013;16(4):A123.

Acknowledgements
Sponsored contributions to study design/analysis or preparation/analysis/interpretation of data. ED, KH, EW and RTH are both employees of Costello Medical. Their approval of the publication is not required. The authors would like to thank all those who contributed to this study, including colleagues at Findacure and Costello Medical.



EN PRATIQUE...

INTRODUCTION

Enoncer le problème au sens large
(1 à 2 phrases)

S'appuyer sur l'existant pour faire ressortir
ce qui reste à savoir

Exprimer votre question de recherche ou
hypothèse et l'objectif de l'étude

EXEMPLE

Women have had to campaign to be able to take part in endurance running events such as the marathon which was not allowed until 1972 for reasons usually related to largely false claims about the physical risks specific to women. Over forty years later some of these claims are still commonly heard, such as the risk of pelvic organ prolapse. No studies in the literature seem to support this claim, and most focus on running after a prolapse. We therefore sought to identify the risk factors which have been shown to be statistically significant in order to establish the real causes.

METHODS

A search was conducted in **DATABASE NAMES** for resources published between **YEAR1** and **YEAR2** in **LANGUAGES** and **OTHER CRITERIA**. The keywords '**KEYWORD1-N (list)**' were used in all relevant combinations, and inclusion criteria were **CRIT1...** This yielded a total of **X** records, from which we excluded **Y** because **REASON1** or **REASON2...** after evaluation.

Results

Texte minimal. Place aux éléments visuels : Illustrations accompagnées d'explications

Conclusion

Décrire les observations principales de vos lectures et mettre le doigt sur des problèmes qui demeurent le cas échéant. Evoquer d'éventuelles pistes de recherche.

CALENDRIER



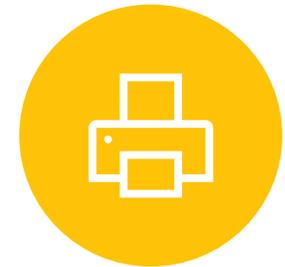
DÉBUT OCTOBRE : RÉDACTION DE LA
SECTION MÉTHODES
FIN OCTOBRE – TERMINER REDACTION :
ENVOYER TEXTE PAR MAIL



JUSQU'AU 15 NOVEMBRE :
ENVOYER PREMIER JET DE LA
MISE EN PAGE



22 NOVEMBRE : SÉANCE CE
CRITIQUE COLLECTIVE



24 ET 29 NOVEMBRE :
SÉMINAIRES D'ÉVALUATION