

OBJECTIVES: To advance innovative therapeutic interventions for non-rare neurodegenerative diseases through rigorous early-stage multinational clinical trials, combining active substances with multidisciplinary approaches, in order to improve treatment effectiveness, patient quality of life and reduce societal burden.

Deadline 1st stage: **13 April 2027**
Deadline 2nd stage: **22 September 2027**
Total budget : 39.3 M€
Budget/project : ~ 10 M€
Type of action : RIA

Expected Outcomes (ALL):

- Scientific and clinical communities effectively use state-of-the-art knowledge, data, technologies, tools, methods, best practices and training to support the development of innovative interventions for neurodegenerative diseases.
- Strengthened exchange of data, knowledge and best practices across the EU, Associated Countries and beyond.
- Wide use of relevant databases and/or integration with existing infrastructures for storage and sharing of collected data.

Scope (MOST):

- Neurodegenerative diseases pose a major burden on patients, caregivers, healthcare systems and society. Current treatments are limited, mainly symptomatic and may have significant side effects. There is a need for safer, more effective and innovative therapeutic solutions.
- Interventions should combine an active substance with complementary multidisciplinary approaches (e.g. lifestyle, cognitive or rehabilitation components).
- Proposals must conduct rigorous early-stage clinical trials to assess safety and efficacy.
- Trials should include adequately powered and representative patient cohorts (age, sex, ethnicity).
- Projects should also generate insights into mechanisms of action (e.g. imaging, molecular or omics analyses).

Which aspects of this topic are related to Social Sciences and Humanities (SSH)?

- Inclusion of patient, caregivers and other stakeholders in the design and conduct solutions and clinical trials.
- Access, acceptance, adherence and behavioural dimensions linked to multidisciplinary interventions (e.g. lifestyle change, cognitive training, rehabilitation therapies).
- Trust in innovative therapeutic approaches
- Ethical, legal and societal aspects of testing and implementing innovative interventions (non-autonomy, vulnerability, impossibility to consent, health inequalities, access to trials etc.)
- Representation of diverse populations (age, sex, ethnicity).
- Quality of life assessment and patient-reported outcomes.
- Data governance, sharing practices and societal attitudes towards data use in clinical research.
- Organisation of care pathways and integration of new interventions into health systems (political commitment)

Why applying an SSH perspective is essential?

- Neurodegenerative diseases affect cognition, autonomy and societal structures, including families. Issues such as consent, caregiver burden, stigma, and loss of identity are central.
- Recruitment and retention in clinical trials depend on trust, cultural perceptions, communication strategies.
- Adherence to multidisciplinary interventions depends on motivation, social support and socio-economic context.
- Representation of diverse populations requires understanding structural inequalities and barriers..
- Without SSH integration, interventions risk being scientifically valid but socially unworkable, inequitable or poorly adopted.

What it aims to achieve in the context of this topic?

- Improve trial design by integrating patient perspectives and social realities.
- Enhance recruitment, retention and adherence through behavioural and communication strategies.
- Ensure ethical robustness (consent, vulnerability, data governance)
- Address health inequalities and promote inclusive participation.
- Support the translation of clinical innovation into routine care through policy, economic and organisational analysis.
- Transforming innovative clinical interventions into interventions that are acceptable, equitable, implementable and impactful in real-world settings.