

**ERA-NET SCHEME
COORDINATION ACTION**



ALLIANCE-O

**European Group for Coordination of National Research Programmes on Organ
Donation and Transplantation**

Project/Contract Number: 0011853

**Work Package 6:
Fundamental research linked to organ donation**

State of the Art Review

Work Package Leader: DSO, Germany

Participant name	Abbreviation	Country
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Hungarotransplant	Hu-T	Hungary
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I. Tasks of Workpackage 6

Objectives:

The aim of this work is to **inventory existing national or regional programmes** dedicated to fundamental research in transplantation. This analysis of existing research programmes and activities on a national level should allow **identification of main focuses** and **needs** in basic research and **possible strategies to enhance the performance of research and avoid duplication.**

Description of work

1. State of the art of the existing programmes
2. Proposal of strategies to improve efficiency of fundamental research: position paper, forum of research programmes makers

Deliverables

1. State of the art of the existing programmes
2. Proposal of strategies to improve efficiency of fundamental research: position paper

II. Introduction:

During our engagement with research projects dedicated to organ transplantation and organ donation on a regional, national and European level the importance of an inventory of existing programs became apparent.

There exist a very large number of individual and collaborative research projects in this field. However there exist neither national nor international strategies designed to enhance or coordinate research in this domain. Of the Alliance-O member-states only Spain has a platform designated for research in organ transplantation that allows for national collaboration and cooperation amongst the individual projects and which enhances strategic research.

An increasing number of databases that provide information on a wide variety of current and completed research projects serve as a valuable source of information. However, they do not render an inventory of existing programs dedicated to fundamental research in transplantation obsolete. Generally these databases include only publicly funded projects. Usually the range of projects is additionally narrowed down to those that are funded by the institution that manages the database. Thus some of the ministries, or other public/governmental institutions in charge of funding research, operate scientific/research databases. Although the complete range of projects is included, projects funded by different means or third parties are omitted. Furthermore the data bases rarely provide all the information required for the development of strategies in order to promote research in a specific field. For example some databases do not contain information on the level of funding; others do not reveal the time frame of a project. This of course is very important information in many respects. The primary intention of the databases run by ministries and other governmental institutions is to report to the public about projects but not to analyse. They are not designed to serve as a basis for strategic stimulations in certain fields of research neither are they designed to enhance cooperation and collaboration. Very often public access – if granted- is limited to certain aspects of information.

We also note that the majority of the databases are not searchable/available in English language, which is an obstacle for international communication and

cooperation. A remarkable exception is the Hungarian database Huncris which can be operated in both Hungarian and English Language.

We have found that none of the databases is focused on projects related solely to transplantation and that there is no national data base that would cover all research projects conducted in one country. Therefore it was quite a task for the Alliance-O participants to identify the multitude of projects related to organ transplantation and donation that can be found listed below (Chapter VI.)

Furthermore it has to be acknowledged that we found it nearly impossible to collect any valuable information on projects with a privately financed background since they do not appear in the databases. In most of the participating countries the information obtained on privately funded projects was very fragmentary. We therefore decided to include only publicly funded projects. However, we are aware of the fact that many of the publicly funded projects are at least privately co-financed. In order to be able to draw conclusions from the data we collected we have only included projects that were started or terminated within a time frame of 5 years (2000-2005).

So as to draw a homogenous picture of the projects that have been identified, we decided to focus on fundamental research linked organ transplantation. We have also included research investigating different aspects of organ donation since this is the basis for transplantation.

The state of the art report of WP 6 thus aims to try and give an overview of existing programs. Nevertheless we are aware of the fact that although we made tremendous efforts to draw a holistic picture of the research projects conducted in each country we could not achieve to detect all existing programmes, due to the complex structures of research as described above and below. Thus the list of projects is by no means not exhaustive.

We believe however that this is not a failure of the participants of Alliance-O but on the contrary justifies the intention of this project and proves it the more necessary.

III. General remarks on research

1. How are research objectives chosen?

Although the research landscape in each of the participating countries differs immensely, there exist several common factors.

Generally two general approaches in order to stimulate/promote research are known. They can be described as 1) top down and 2) bottom up.

Research piloted from top down typically refers to large scale projects of ministries or other governmental institutions. This type of research is characterized by the fact that it is the funding institution that decides on the subject matters of research and chooses the research objectives.

If it is the scientists or scientific facilities themselves that consider research on a certain subject of importance and present it to potential public and/or private investors in order to obtain third party funding we talk of a bottom up approach.

Needless to say that there of course exist a large number of hybrid forms that combine the approaches stated above.

It is absolutely essential that the research infrastructure allows for a coexistence of those two approaches since this is the basis for a flourishing research landscape. Ideally a combination of these two systems would lead to a perfect balance in terms of “supply” and “demand” of research. Even if the research landscape regulates itself to a large extent there is still a considerable imbalance of powers. The imbalance is increasing due to the fact that public monetary resources are becoming scarcer. Consequently, in order to employ the funds effectively there is a need to organise research and to develop strategies.

This will result in more efficiency in the distribution of resources. At the same time it permits for funding of projects that would otherwise be neglected because they are not very attractive in terms of remuneration but nevertheless indispensable and beneficiary for the sake of organ transplantation and donation in the longer term.

The insights obtained due to fulfilling the first objective of WP 6 will benefit to two main target groups:

- ▶ “The bottom up promoters” e.g. scientist and research institutes
 - ❖ Possibility to coordinate and cooperate
 - ❖ Incentives in order to define needs and focuses
 - ❖ Good bases for argumentation when applying for funding

- ▶ “The top down promoters” e.g. EU, governmental institutions, private investors
 - ❖ Possibility to identify basic needs
 - ❖ Work on strategies in order to enhance research in the field of organ transplantation

2. Conducting of research:

The infrastructure, and particularly the sites where research is conducted, is generally comparable. Thus research in the domain of organ transplantation is mainly conducted in transplant units, universities, university hospitals and medical research institutes

3. Funding of research:

In each country research is funded out of public and private sources. There exist a large number of private institutions such as non-profit organisations/foundations and in particular the pharmaceutical industry (e.g. Novartis, Fujisawa, Wyeth, Roche etc.) that contribute to a noteworthy extent to research linked to organ transplantation. However there exist no means to make an inventory of privately funded projects, because private investors are predominantly funding singular projects for a variety of reasons and motivations that generally are not made public. Furthermore it has to be noted that some private investors are reluctant to reveal their current fields of research or the research funded. This is also true for some scientists irrelevant from the source of funding.

Through a large number of questionnaires and inquiries, we gathered information about publicly or semi-publicly funded projects. Nevertheless the information is very

incomplete and thus can not serve as a basis for evaluation or even strategic proposals.

Therefore the main focus of this inventory is publicly funded projects. Generally ministries of health and of research or national research foundations linked to those are the major contributors to research dedicated to organ transplantation.

But of course, these generalisations and simplifications do not reflect the rich research landscape of the participating countries. Taking advantage of the multinational character of this project we decided to give a brief overview of the research landscape in each country with particular reference to organ transplantation and donation.

IV. Research in the participating countries

On the following pages a description of the research landscape on transplantation in can be found as provided by the participants.

1. France

1.1. An overview of the organisation :

The landscape of programming and funding of research in France is quite complex, between patchwork and millefeuilles.

Public research organisms, such as CNRS (www.cnrs.fr) and INSERM (www.pasteur.fr) receive a yearly subvention both for salaries and research.

On the other hand the research ministry (www.recherche.gouv.fr) does open calls on specific subjects, sometimes jointly with one of the public organisms. We have also some caritative associations (ARC, AFM) or small public structures, like what we call GIS (for "rare diseases", or "research in genomics) which open their own calls. (Ministry of Research/INSERM "biotherapies" in 2003 :cell- based only)

Since January 2005, we have a new Agency for research funding, called ANR (www.gip-anr.fr). This Agency apparently plans to launch a call on the wide theme of "regenerative medicine" in 2006.

Since 1993, the Ministry of Health (www.sante.gouv.fr) has set up and gives subvention to **LE PROGRAMME HOSPITALIER DE RECHERCHE CLINIQUE 2004 (PHRC)** .

This « clinical research programme » takes place in hospitals which are also doing teaching and research. Very often the research teams involve CNRS or INSERM scientists and even research units. The priorities open through these calls contribute to define a sort of priority among public health themes. Such projects allow to test and validate basic research progresses and to translate them into new therapeutic approaches.

To the knowledge of ABM there is no public/national database on funded research projects. There are some partial reports on the web site of the Ministry of Health about the PHRC. There are also now 2 kinds of PHRC on at the national level, with a national selection and funding system, and one at a regional level with a different set of priorities.

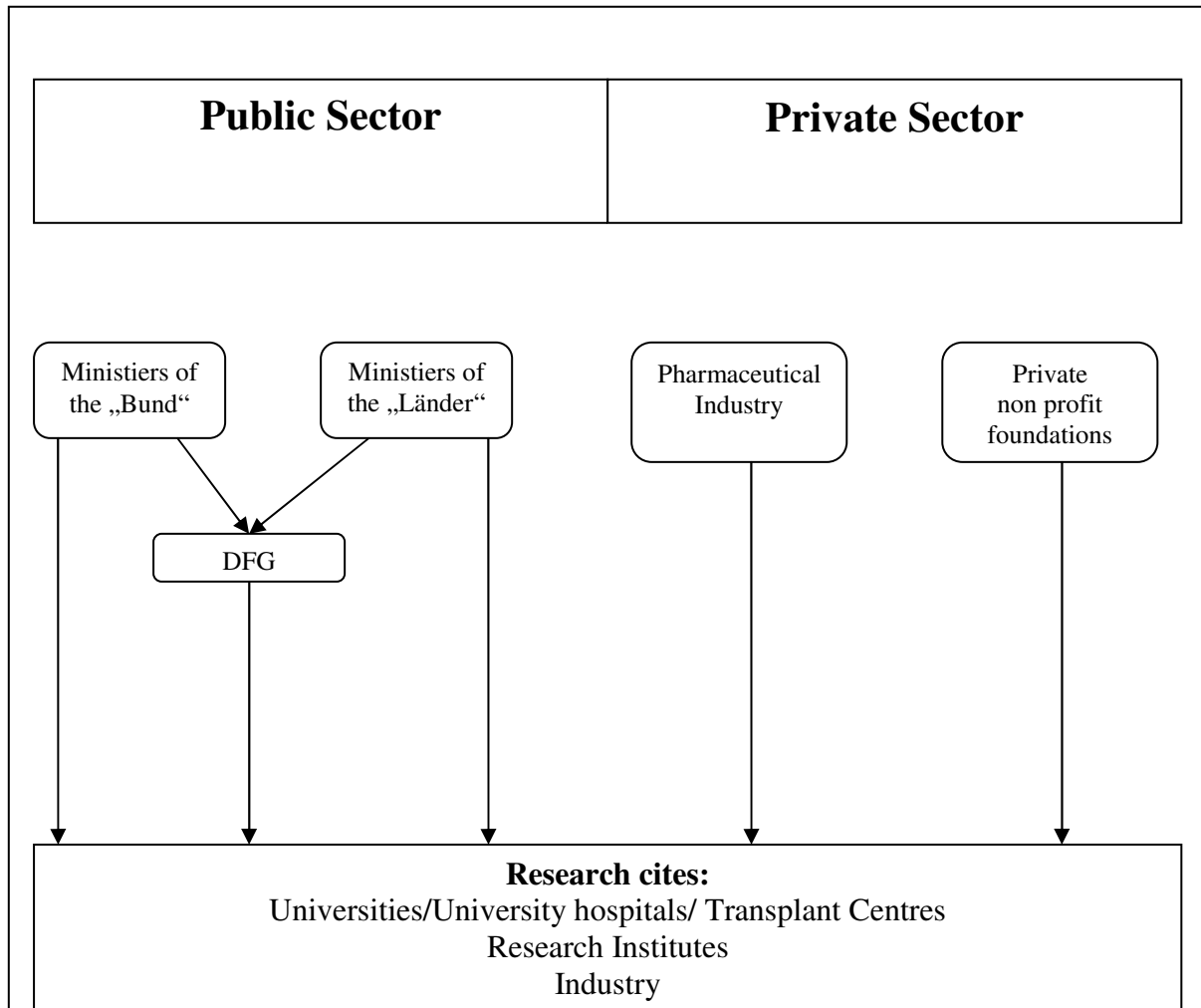
1.2. The EfG dedicated call "Recherche et Greffes" :

The EfG and now the agence de la biomedicine are under the control (tutelle) of the Health Ministry.

Since 1995 the EFG/ABM has a yearly call dedicated to basic research relevant to organ, cell tissue transplantation, under different axes, from socio-economical and ethical aspects/studies to pharmacogenomics, studies of immunotolerance, or of storage solutions.

The thematic areas are defined by its "Medical and scientific advisory board" then published. Projects are selected after evaluation by 2 different (external) experts according well defined criteria and their relevance to transplantation.

2. Germany



In Germany there exist three main sectors where research relevant in terms of organ transplantation is conducted, namely universities (including university hospitals and transplant centres), extra university research facilities and industry. Among those universities play a key role.

Due to Germany's federal structure research at universities falls primarily in the competence of the federal state where the university is located. That means universities obtain from the federal states a general budget that needs to be distributed amongst the faculties in order to conduct research and for the education of students. Thus the federal states provide for the basic equipment which enables the medical faculties to run their daily business employ the staff and maintain laboratories etc. With regard to the poor public financial state of public authorities third party funding plays an increasing role. Very often co-financing from different private and public sources is necessary in order to conduct competitive research.

In terms of public funding in particular with view to organ transplantation it is the DFG (Deutsche Forschungs Gemeinschaft -German Research Foundation) that plays the major role in publicly funded university research. The DFG itself is resourced by the federal state and the federal state states (Bund und Länder) and is the central public organisation for promoting research in Germany. The most common form of research

funded by the DFG is offered through individual grants. The DFG generally does not make any calls on specific subjects- it is the scientists themselves that apply to the DFG for funding of projects they consider to be of importance. It represents the classical bottom up approach.

The DFG supplies and maintains a database called Gepris.¹ This is comparable to the Hungarian Hungris and the Portuguese FCT, and it is an institutional member of euroCRIS (Current Research Information System).²

However the Gepris Database is in German only and not totally up to date. The information that can be obtained does not include the level of funding or time frame of the project. However it is to be continuously improved, and furthermore the annual report including all projects funded by the DFG is bilingual. Understandably only the DFG funded projects are included. A search for unknown projects is possible by entering key words thus however only the project titles are searched.

Different from this individual type of funding are the programs launched by the Ministries. They exemplify the above named top to bottom approach. Worth mentioning are several projects of the Federal Ministry of Health and Social Security and the Federal Ministry of Education and Research. A closer look at these projects reveals that they focus on alternatives to organ transplantation rather than on the fundamental research in this field. The German Federal Ministry of Research has a database called "Förderkatalog"³ But the search of this data base for the purpose of this deliverable was accompanied by the obstacles named above.

Our inquiry at the ministries revealed that the Federal Ministry of Health and Social Security funded a Project dealing with safety in Xenotransplantation from 1997-2003 with some 700.000 Euro at the Paul Ehrlich and Robert Koch institutes.

The Federal Ministry of Education and Research is funding Biotechnology Programmes with more than 20.000.000 Euro since 2000. Amongst them some Programs relevant for this project can be found and have been included in the inventory.

Last but not least the BzGA (Federal Centre for Health Education) has conducted a variety of surveys related to different aspects on organ donation over the last decade.

Due to the noteworthy level of funding we decided to stress the following continuous collaborative DFG-Programs that of course can be found in the inventory as well.

No.	Title	Funded since	Level of Funding since project initiation
KFO 123	Lung Transplantaton	2004	0, 75 Mio
SFB 265	Immunereactions and Pathomechanisms in Organ Transplantation	1992	14, 6 Mio
KFO 117	Optimisation of Living related liver transplantation	2004	0,87 Mio
FOR 440	Prevention of Ischemia Reperfusion Injury	2001	2,1 Mio
FOR 535	Xenotransplantation	2004	1,7 Mio

¹ http://www.dfg.de/dfg_im_profil/zahlen_und_fakten/projekte_und_programme/index.html

² <http://www.eurocris.org/en/>

³ <http://oas2.ip.kp.dlr.de/foekat/foekat/foekat>

On behalf of the DSO we made an inquiry at all transplant centres in Germany in order to obtain further insights on who is funding research apart from the well known large public sources and we learned that there exists a considerable number of private institutions such as non profit organisations/foundations (Else-Kröner – Fresenius Foundation; Roche organ transplantation research foundation) and also pharmaceutical companies that contribute to research in Germany. However the information we obtained is very incomplete therefore we refer to our decision explained above why we decided not to include these projects.

Last but not least as for the major research institutions like the Helmholtz Gemeinschaft, Leibniz Gemeinschaft, Fraunhofer Gesellschaft and the Max-Planck-Gesellschaft to our knowledge only the latter entertains a single research project in this domain which can be found in the list of German projects.

3. Hungary

The New National Innovation System of the Hungarian Government

In order to speed up economic growth in Hungary, the government is committed to the development and operation of a new, efficient innovation system. This goal can be realised if research and development is driven by the present and future needs of the economy.

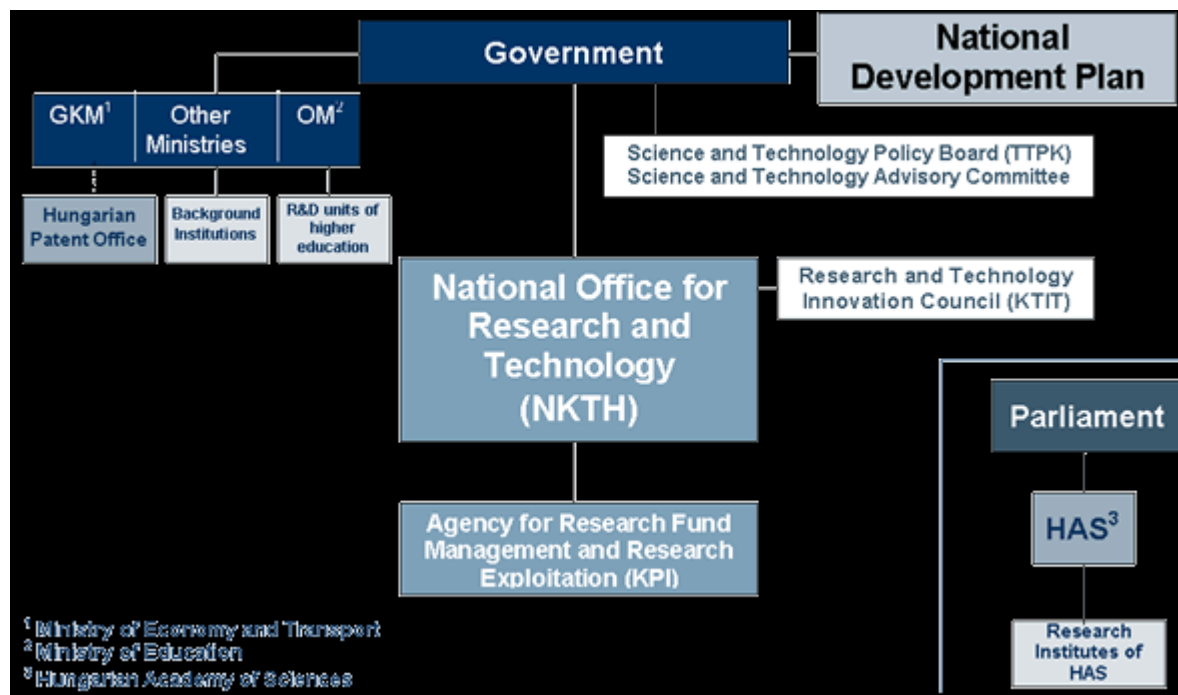
To reach this goal, the institutional and legal frameworks have been revised. Consequently, the **Science and Technology Policy Board (TTPK)** has been established chaired by the Prime Minister. The Vice Presidents of TTPK are the Minister of Education and the President of the Hungarian Academy of Sciences. The members are the ministers concerned and the invited member is the President of the National Office for Research and Technology. As the advisory body of TTPK, the **Science and Technology Advisory Committee (TTTT)** has been set up of distinguished scientists and R&D experts.

Further on, a new government office, the **National Office for Research and Technology (NKTH)** has been established supervised by the **Minister of Education**. NKTH is responsible for implementing the governments science and technology policy. Its duties are to provide a new framework for the national innovation system and to promote research and development that will boost Hungarian economy.

To create a predictable environment for the exploitation of R&D results, the **Research and Technology Innovation Fund** has been established. The Fund is managed by NKTH. Apart from the micro- and small enterprises, **every enterprise** is obliged to pay at least 0.25% of its turnover into the Fund. The **Hungarian government** contributes to the Fund with an equivalent amount. The goal of NKTH is to provide sufficient funding for innovation programmes that aim to create innovative services and products. These programmes will be simple, transparent and evaluated by independent experts. **Representatives of the academic and industrial spheres will submit proposals together.**

Under the supervision of NKTH, the **Agency for Research Fund Management and Research Exploitation (KPI)** is responsible for managing innovation programmes. The **Research and Technology Innovation Council (KTIT)** helps NKTH in developing its innovation strategy (incl. the strategy of using the Fund). Members of the KTIT delegated by ministries responsible for innovation form the minority, while the majority are representatives of the scientific community and industry.

The **Hungarian Academy of Sciences (HAS)** is an autonomous public body. Its task is to promote science. In order to achieve this goal, it maintains a special academic research network. The HAS and its institutes are financed by state budget.



1. Ministry of Economy and Transport 2. Ministry of Education 3. Hungarian Academy of Sciences

National Office for Research and Technology (NKTH) H-1052 Budapest, Szervita tér 8. Phone: (+36-1) 484-2500 Fax: (+36-1) 318-7998

According to the [160/2001 \(IX. 12\) Government Decision](#) every organization in the R&D sector using any form of budgetary funding must supply information to the HunCRISystem concerning the researches funded by these amounts. “According to the scope of duties laid down in 35§ (1) paragraph point (f) of the Constitution, the Government enacts the following: *General regulations* 1. § (1) The aim behind setting up the National Research and Development Directory is to register and preserve R+D topics and projects in order to improve transparency, to identify accumulated financial support, to promote scientific and professional cooperation, as well as to give assistance in the economic exploitation of the research achievements.

(2) The Directory includes projects that have titles, commencing and terminating dates, and are identifiable by appropriations. In the first phase, financing of research as core function and scholarships are not included in the Directory.

(3) It is obligatory to provide information on researches that involve state financing.

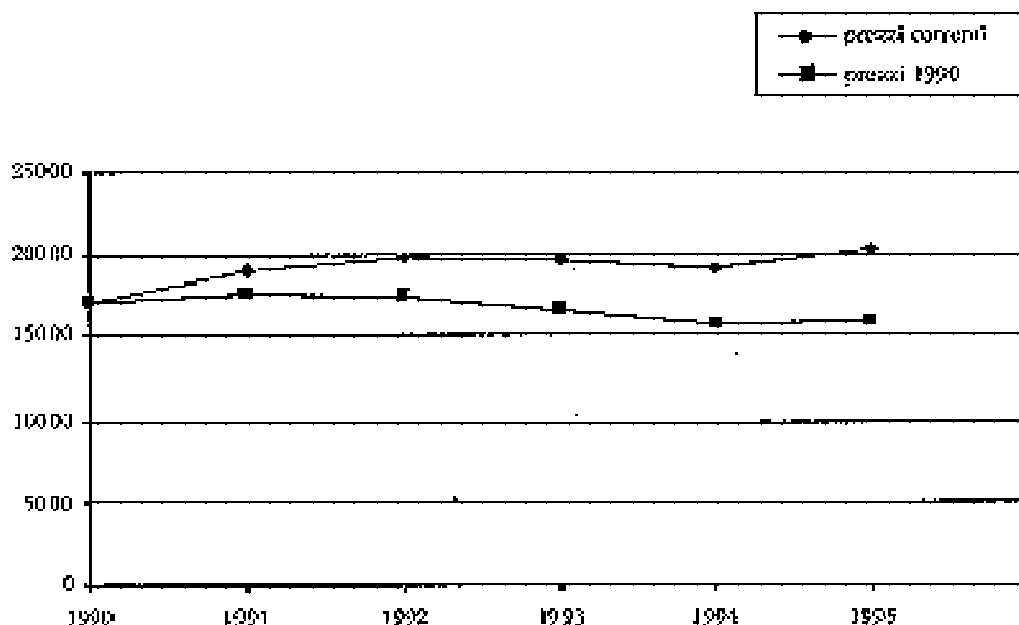
(4) Any organization outside of the budgetary financing can supply information for the Directory with the same content voluntarily, and may modify them any time.”

The HunCRIS, as the database of the Hungarian R&D projects, researchers and research institutes, is operated by the staff members of the National Technical Information Center & Library at the Technical and Economic University of Budapest, with the supervision of the National Office for Research and Technology (NKTH).

HunCRIS is part of the national innovation system as defined by the [CXXXIV. \(2004\) Act on Research, Development and Technological Innovation](#).

4. Italy

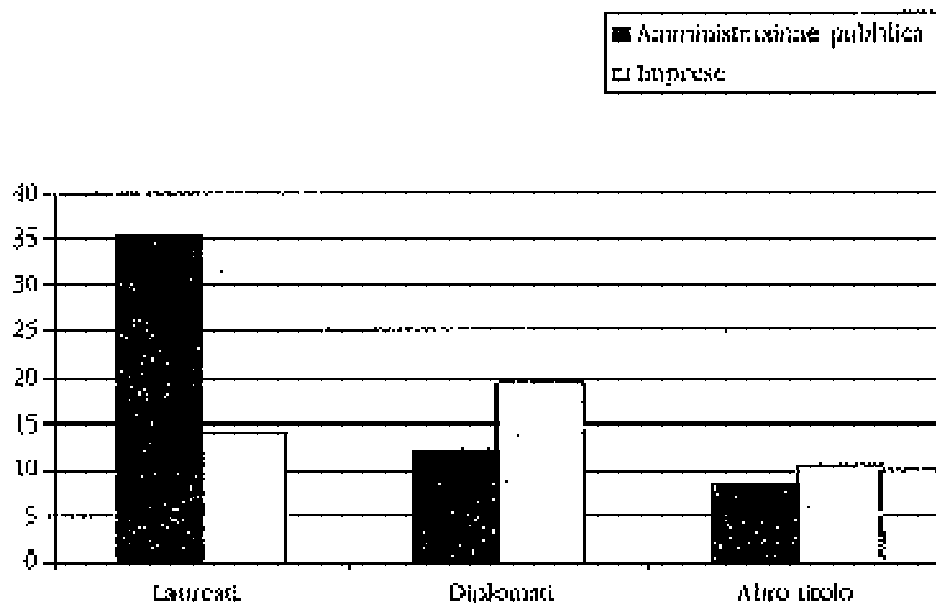
Fundamental research in Italy is carried out both by public bodies and private businesses. Just to have an idea of general investments, find here below data about the 1990-1995 period and research staff employed both by public and private sector.



Investments for research and development in Italy during the period 1990-1995 (current prices against 1990 prices)

Role	1984		1994		Average yearly increase %	
	Pub.Adm	Businesses	Pub.Adm	Businesses	Pub.Adm	Businesses
Researchers	39.053	22.926	47.494	28.228	2,0	2,1
Technical	11.645	18.835	23.022	22.679	7,0	1,9
Other staff	9.315	11.110	10.202	12.198	0,9	0,9
Total	60.013	52.871	80.718	63.105	3,0	1,8
Gen total	112.884		143.823		2,5	

Research staff by qualification, education and field in Italy (1984, 1994)



Research staff by education (graduated, highschool and other) and field (public/private) in Italy (1994)

Source: Processing of Istat data by ISRDS-CNR su dati Istat

Fundamental research on **organ transplantation** in Italy is either public, co-financed or private.

Public bodies

Main sources for funding are:

- a) the Ministry of Health which has two main programs: 1) funds allocated for general research programs to a list of research bodies (a total of 31 out of which 15 are public and 16 private – see list in annex 1 with funding amounts for 2004) that include large hospitals, institutes and foundations that work in the transplant field, (such as Ospedale Maggiore in Milan, Policlinico San Matteo in Pavia and Istituti Ortopedici Rizzoli in Bologna) 2) funding of special two-year projects that are submitted to a call issued once a year and devoted to Scientific Institutes of Care and Assistance (IRCCS) and Regional administrative districts (and therefore hospitals, since the National Health System is decentralized on a regional basis).
- b) the Ministry of University and Scientific Research allocates funds: 1) to Universities and a series of research bodies for general functioning - inside Universities, a little quota of such funds is allotted to so called “university” programs, a little money that is essential to have access to calls for projects that require co-funding from the university; 2) to FIRB (funds for investments of fundamental research) – these funds are allocated through calls issued every two years on special topics – no call on organ transplantation or related issues in the last five years; 3) to PRIN (research programs of national interest)

Private funding

Some private foundations, born out of joint partnerships between public and private bodies (such as Istituto Mario Negri in Bergamo, Istituto Mediterraneo per i trapianti e le terapie ad alta specializzazione in Palermo, Fondazione san Raffaele in Milan) perform research in the transplant field (for more information on these programs, visit the following websites: www.marionegri.it, www.ismett.edu, www.sanraffaele.org). Private businesses can either co-finance public programs (and therefore result in annexed lists) or finance experimental research on their own.

5. Portugal

5.1. There is a national foundation for R&D – the Science and Technology Foundation (Fundação para a Ciência e Tecnologia – FCT) through whom all public research programs are financially supported.

5.2. For the public sector, there is a centralized system, through the FCT as mentioned above.

5.3. The FCT is dependent of the Ministry for Higher Education and interacts with the Council of the Universities.

5.4. The president of the FCT is appointed by of the Ministry for Higher Education as is accountable to him.

5.5. Research is funded mainly by the FCT but also by private institutions like the Gulbenkian Foundation and similar institutions (e.g. Pharmaceutical industry, scientific societies).

6. Spain

6.1. The Ministry of Health and Ministry of Science and Technology both have direct implications on funding medical research. Besides private foundations and companies (mainly Pharmaceutics) are also concerned with medical research.

6.2. There is a centralized system for funding medical research that coordinates funds from the Ministry of Health and a small part of the funds invested by Pharmaceutical companies: FIS (Fondo de Investigaciones Sanitarias) [:www.isciii.es/publico/drvisapi.dll?Mlval=cw_usr_view_Folder&ID=21](http://www.isciii.es/publico/drvisapi.dll?Mlval=cw_usr_view_Folder&ID=21). But this Institution coordinates only a part of the overall investment.

There is also a mixed commission between the Ministry of Health and Science and Technology for those programmes affecting both Institutions. Again, it does not cover all the investment. In summary they are big and well known. General call for applications to the FIS and the Programmes of Science & Technology but besides there are a number of different entities public (Regions, Cities or City halls) and private (Foundations & Companies) that also publish calls for applications and fund research programmes.

Research in Transplantation medicine is basically undertaken in hospitals (clinical and basic research), university units (basic research) and national research bodies (i.e. CSIC – Consejo Superior de Investigaciones Cientificas) there is no single body where research takes place.

Three years ago a network for research in transplantation medicine was started. It includes 21 centres of research (basic & clinic) with more than 800 scientists and 120 research projects (30% of them multicenter). Proportion of basic/clinical research is more or less 10%/90%. Funds for the programmes included in the network are entirely public but is remains also open for private funding.

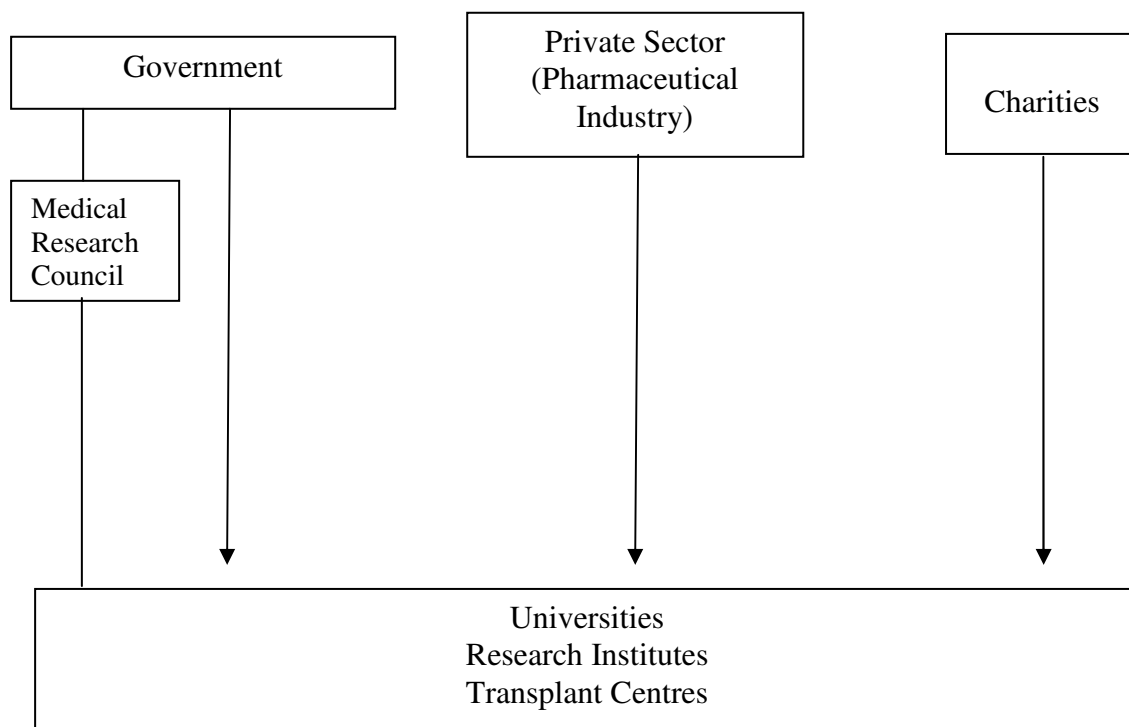
The relationship with the Ministry is thought the coordinating centre (which in this case is the ONT) for administrative purposes and to present periodic reports and directly from the centre to the funding body for economic reports and justifications.

Each research centre has a responsible coordinator. He/She is in charge of the relationship with the rest of the centres, the coordinating centre and the finding body.

6.3. In some cases there are specific bodies for research: National Cancer Institute, National Research Institute, AIDS Foundation, etc. They have associated centres distributed through all the country. Those bodies are directly funded by the Ministry and in some cases belong directly to the Ministry. Hence, the relation is a direct report to the Ministry.

6.4. Both, public and private sectors contribute to research in Spain

7. United Kingdom



Publicly funded research into the various aspects of organ transplantation is principally conducted in transplant units, universities, and medical research institutes. Medical research centres, such as the Medical Research Council (MRC) Clinical Sciences Centre, may be based within a University, but are funded directly by the MRC. Many of the larger Universities incorporate medical faculties, and many of the transplant units are associated with these.

Small scale projects that do not need much resource may be funded directly by the relevant University Department, using public funds that are provided directly to Universities for teaching and research. More usually, research in the area of transplantation will require a greater amount of resource than can be provided in this manner. Funding is then sought through research councils, particularly the MRC, which are resourced by Government, or charitable organisations supported by endowments and public contributions. Government departments may approve general areas for funding initiatives that utilise public funds, but are not involved in decisions on whether particular proposals should be supported.

Principal sources of funding

Individual Universities

Publicly funded research organisations

- mainly the Medical Research Council.

Pharmaceutical companies

Astellas, Novartis, Roche and Wyeth.

Although these companies are not based in the UK, they do fund a substantial amount of transplantation research in the UK.

Charitable organisations

There are many charities that are associated with organ transplantation, but some that provide research funds are as follows: The Wellcome Trust, Cancer Research UK, National Kidney Research Fund, Diabetes UK, British Lung Foundation, Children's Liver Disease Foundation, Diabetes Research & Wellness Foundation, The British Liver Trust. Some of these may fund a vast number of research projects across the medical sciences, such as the Wellcome Trust, while others may only provide support for a very small number of projects each year in highly specific areas.

Professional Bodies

Research may be commissioned and funded through UK and International professional societies, such as the British Transplantation Society (BTS), British Society for Histocompatibility & Immunogenetics (BSHI), International Society for Heart and Lung Transplantation (ISHLT), International Liver Transplantation Society (ILTS), European Society for Organ Transplantation (ESOT) and the American Society of Transplantation (AST). However, the origin of funds for this is invariably the pharmaceutical industry.

Other Public Bodies

Relatively small amounts of resource may be provided for investigations into aspects of transplantation that would ultimately be expected to lead to a greater reduction in public money provided to the National Health Service. As an example, monies used to ascertain reasons why the relatives of a potential donor refuse consent for organ donation might be expected to lead to a future increase in the consent rate, a corresponding increase in the supply of organs for transplantation, and a consequential saving in treatment costs for patients awaiting transplantation, such as the cost of dialysis. Funding for studies such as this may be administered through organisations such as UK Transplant.

Comments on the inventory of projects

In the UK, it is difficult to obtain information on research projects that are not publically funded, or on the many small scale research projects that are carried out at Universities. Consequently, the list of UK projects presented in the report is very

much an underestimate of the research that is ongoing. Also, epidemiological studies based on the UK national transplant data base are carried out by UK Transplant. These studies cover a wide range of subjects, including factors affecting the waiting time to transplantation and outcomes following transplantation. Many of these projects occupy a relatively short time period, and there is a large number of different topics. Consequently, it is not practicable to list them individually.

V. Explanation of the inventory

1. The set of data collected

Our high end goal was to collect the following information on each research program that should be mentioned in the following inventory.

- Time frame of the Project
- Project title
- Abstract
- Contact data on project leader
- Source and level of funding

2. The chosen categories

For analytical purposes and in order to make general conclusions possible we chose the following categories which to our believe all together define fundamental research better than any singular definition. Basically we resort to the experience of the Spanish research network and have adopted the categories chosen within that network.

To make sure economic, social, legal, psychological, ethical aspects of organ transplantation and donation are included as well and to allow for all important/interesting programs to be listed we added the three highlighted categories.

The chosen categories are the following:

A1	Epidemiologic Studies
B2	Alloreactivity and Tolerance
C3	Preservation, Ischemia
D4	Alternative Therapies/Treatments
E5	Complications & Co morbidity
F6	Acute and chronic failure of the graft
G7	Immunosuppression/Immunology
H8	Quality and Safety of organ transplantation
I9	Quality of life and socio –economic impact
J10	Socio-cultural-legal – economic-ethical-religious etc. aspects of organ donation/transplantation
K11	Transplantation potpourri (for everything that does not fall within any category but still is of interest and importance

3. The Inventory

The following chapter VI. contains the inventory.

All projects collected in the participating countries can be found below. The projects are shown country by country. Within the countries the projects were further arranged by categories.

Only Hungary and Germany provided abstracts, and only on behalf of Hungary all abstracts are available for all the listed projects and in English language. Due to the extended content the abstracts could not be included in this deliverable but are available as excel-charts that are attached to the electronic version of this document.

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General Overview:⁴

Code	Category	France	Germany	Hungary	Italy	Portugal	Spain	UK
A1	Epidemiologic Studies	0	6	3	5	0	17	0
B2	Alloreactivity and Tolerance	4	14	0	3	2	23	0
C3	Preservation, Ischemia	8	33	1	4	4	14	4
D4	Alternative Therapies/Treatments	17	9	11	3	0	11	0
E5	Complications & Co morbidity	5	5	6	4	0	20	0
F6	Acute and chronic failure of the graft	6	19	1	4	3	24	0
G7	Immunosuppression/Immunology	51	25	2	2	9	12	0
H8	Quality and Safety of organ transplantation	15	5	0	2	0	0	2
I9	Quality of life and socio - economic impact	1	1	1	0	0	7	0
J10	Socio-cultural-legal - economic-ethical-religious etc. aspects of organ donation/transplantation	14	2	1	1	0	0	2
K11	Transplantation potpourri (for everything that does not fall within any category but still is of interest and importance)	9	49	2	8	3	0	3
	TOTAL	138	168	28	36	21	128	11

⁴ Figures on the projects that have been collected.

VI. The inventory:**FRENCH PROJECTS:**

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
1	2002	B2	Identification of new mediators of rejection and tolerance induction in a model of allogeneic transplantation in adult animals: study of a new molecule — 2HU	Cuturi Maria-Cristina	association Vaincre la mucoviscidose	20.000 €
2	2003	B2	Development of a cell therapy for inducing tolerance to allogeneic grafts	Van Meerwijk	EFG	15.596 €
3	2004	B2	Recognition of immune tolerance status in recipients of stably functioning renal allografts, based on microarray analysis of transcription	Brouard Sophie	EFG	13.688 €
4	2004	B2	Prospective, randomised comparison of non-myeloablative allogeneic transplantation with classic allogeneic transplantation in acute myeloid leukaemia in complete regression in adults	Cordonnier Catherine	PHRC	zero
5	2002	C3	Early cellular modifications induced by leukocyte-endothelial cell interactions: the isolated, ventilated and perfused mouse lung model	German-Fattal Michèle	association Vaincre la mucoviscidose	35.000 €
6	2002	C3	Validation of a medium devoid of foetal calf serum and animal proteins for the storage of cultured human corneas	Gain Philippe	EFG	27.150 €
7	2002	C3	Comparison of the expansion of limbic cell populations on amniotic membranes and in fibin gel	Jarraya Mohamed	EFG	12.000 €
8	2002	C3	Preparation of corneal grafts for lamellar transplantation, using a femtosecond laser	Legeais Jean-Marc	EFG	27.150 €
9	2002	C3	Implantation of cells adhering to pharmacologically active “microcarriers”: effects on graft survival, differentiation and integration	Montero-Menei Claudia	EFG	27.150 €

11	2003	C3	In vivo models for the validation of human endothelial stem cell transplantation for cell therapy of ischaemia	Uzan Georges	EFG	15.596 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
12	2004	C3 ?	Critical analysis of the angiographic scan criteria for brain death (BD)	Busy François	EFG	16.400 €
13	2000	D4	Cell therapy using progenitor cells and chondrocytes in chitosan/chitin biogel: application to cartilage diseases	Chevalier Xavier, Corvol Maïté	EFG	115.000 F
14	2000	D4	In vitro production of erythrocytes for use in transfusion, by the induction of differentiation in haematopoietic stem cells (HSCs) from cord blood	Douay Luc	EFG	115.000 F
15	2000	D4	Development of an bioartificial liver: development of a bioreactor using human hepatocytes in long-term culture	Maurel Patrick	EFG	115.000 F
16	2000	D4	Implantation of cells adhering to biodegradable microspheres releasing growth factors: effects on graft survival, differentiation and integration	Montero-Menei Claudia	EFG	115.000 F
17	2000	D4	The supply of human pancreatic cells for research into cell therapy for diabetes	Pattou François	EFG	50.000 F
18	2001	D4	Use of endothelial progenitors in the development of bioartificial vascular substitutes	Bordenave Laurence, Conrad Véronique	EFG	120.000 F
19	2001	D4	Health certification of pigs with respect to specific human pathogens	Cariolet Roland, Vannier Philippe	EFG	300.000 F

20	2001	D4	Transplantation of foetal hepatocytes: towards a cell therapy approach for liver diseases	Mahieu-Caputo Dominique	EFG	200.000 F
21	2001	D4	Angiogenic cell therapy for stage II-IV lower limb arteriopathy by autologous transplantation of medullary cells: a pilot study	Carpentier P. , Pernod G. Clinical research: DRRC	PHRC	
22	2001	D4	The safety of cell and gene therapy	TIBI Annick	PHRC	
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
24	2003	D4	Comparison of bilio-biliary anastomosis and Roux-en-Y for biliary reconstruction in liver transplantation in adults (right lobe) with a familial donor. Prospective randomised clinical trial	Azoulay Daniel	EFG	19.000 €
25	2004	D4	Prevention of islets of Langerhans grafts by genetic modification of the graft	Le Mauff Brigitte	EFG	13.688 €
26	2004	D4	Transplantation of autologous corneal epithelial cells generated by cell population expansion	Legeais Jean-Marc	EFG	16.000 €
27	2004	D4	Treatment of the dysphasia associated with ocular/pharyngeal muscular dystrophies by autologous myoblast transplantation	Lacau St Guily Jean	PHRC	
28	2004	D4	Protocol for optimising the engraftment of stem cells from umbilical cord blood, using two units, one of which is injected into the bone marrow in situ	Gluckman Eliane	PHRC	
29	2001 PHRC	D4 G7	Non-myeloablative conditioning of HLA-identical allogeneic peripheral blood stem cells by treatment with Fludarabine and low-dose total-body irradiation in patients with diseases for which immunosuppression is risky	Gluckman Eliane	EFG	
30	2003	E5	Evaluation of non-invasive markers of histological activity and fibrosis (Actitest, Fibrotest) during recurrent hepatitis C following liver transplantation: national prospective multicentre study	Di Martino Vincent	EFG	20.000 €

31	2003	E5	Study of the response observed following autologous bone marrow transplantation in cases of severe systemic sclerosis	Farge Dominique	EFG	15.596 €
32	2003	E5	Improvement of anaesthesia management during lung transplantation in cystic fibrosis patients: the value of a new tool for guiding the administration of anaesthetic agents	Liu Ngai	association Vaincre la mucoviscidose	17.326 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
34	2004	E5	Effect of liver transplantation on the progression of pulmonary vascular diseases associated with portal hypertension (hepatopulmonary syndrome and portopulmonary hypertension)	SITBON Olivier	PHRC	
35	2000	F6	Cell rejection following heart transplantation: the value of determining circulating membrane microparticles for early diagnosis	Freyssinet J-M, Mazzucotelli J-P	EFG	115.000 F
36	2001	F6	Identification of new mediators of rejection and tolerance induction in a model of allogeneic transplantation in adult animals	Cuturi Maria-Cristina	association Vaincre la mucoviscidose	31.861 €
37	2001	F6	Study of the transcription of candidate genes implicated in chronic rejection in a model of orthotopic aorta transplantation in the rat	Salim Roussoulieres Ana Lucia	EFG	300.000 F
38	2002	F6	Study of calcineurin activity, a known marker of the efficacy of prophylaxis against acute rejection in lung transplantation	Sanquer Sylvia	association Vaincre la mucoviscidose	26.000 €
39	2002	F6	Chronic rejection in kidney transplantation: role of the anti-HLA antibody-endothelial cell interaction in graft atherosclerosis	Charreau Béatrice	EFG	27.150 €
40	2003	F6	Evaluation of calcineurin activity as a marker of the efficacy of prophylaxis for acute GVH disease	Sanquer Sylvie	EFG	20.000 €
41	2000	G7	Prevention of acute graft rejection by HLA-G in SCID-NOD mice and the role of HLA-G and CD40L in kidney, liver and combined kidney-liver transplants	Charpentier Bernard	EFG	115.000 F

42	2000	G7	Modulation of the chronic allogeneic interactions mediated by CD4+ TH2 lymphocytes specific for graft alloantigens in vivo	Guery Jean-Charles	EFG	115.000 F
43	2000	G7	Mechanisms of action and function <i>in vivo</i> of a subpopulation of cytotoxic dendritic cells	Josien Régis	EFG	115.000 F
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
44	2000	G7	The soluble HLA-G1 isoform: analysis of the immunomodulatory role played by this molecule during gestation, via the induction of apoptosis in activated CD8⁺ T lymphocytes	Le Bouteiller Philippe	EFG	115.000 F
45	2000	G7	Expression and role of tissue factor in the transendothelial migration and differentiation of monocytes into dendritic cells	Reverdiau-Moalic Pascale	EFG	60.000 F
46	2000	G7	HLA-G and graft immunotolerance: implications of the definition of new therapeutic strategies limiting graft rejection	Rouas-Freiss Nathalie	EFG	115.000 F
47	2000	G7	Role of HLA-G in immunotolerance, involvement in lung transplantation	Rouas-Freiss Nathalie	association Vaincre la mucoviscidose	22.867 €
48	2000	G7	Quantitative and qualitative analysis of the T-cell receptor Vb transcriptome, a new method for the in vivo analysis of immune responses	Soullilou Jean-Paul	association Vaincre la mucoviscidose	6.479 €
49	2000	G7	Study of immune reconstitution after the transplantation of HSCs from umbilical cord blood	Toubert Antoine	EFG	60.000 F
50	2000	G7	Mechanisms of action of regulatory T lymphocytes in a mouse model of bone marrow transplantation	Van Meerwijk Joost	EFG	115.000 F
51	2001	G7	Role of NK cells in controlling the activation and differentiation of CD4+ T lymphocytes specific for graft alloantigens in vivo	Guery Jean-Charles	EFG	150.000 F
52	2001	G7	Physiopathology of obliterative bronchiolitis during lung transplantation: roles of lymphocyte apoptosis and the Th1/Th2 balance	Israël-Biet Dominique	association Vaincre la mucoviscidose	30.489 €

53	2001	G7	Study of the roles of dendritic and regulatory T cells in a model of kidney allograft tolerance in baboons	Blancho Gilles	EFG	150.000 F
54	2001	G7	Analysis of the CD4+ T-lymphocyte response to the IE1 protein of cytomegalovirus during bone marrow transplantation, with the aid of HLA-DR peptide multimers	Davignon Jean-Luc	EFG	130.000 F
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
55	2001	G7	Search for ligands recognised by T lymphocytes, which are involved in the immune response to cytomegalovirus in transplant recipients	Dechanet-Merville Julie	EFG	300.000 F
56	2001	G7	Detection, by molecular typing, of incompatibility due to minor histocompatibility antigens in HLA-identical pairs of volunteer donors, and confirmation of alloreactivity, using dendritic cells	Eljaafari Assia	EFG	250.000 F
57	2001	G7	Study of the role of T lymphocyte subpopulations in the graft-versus-host reaction in rats. Genetic approach based on the use of congenic lines	Fournié Gilbert	EFG	239.200 F
58	2001	G7	HLA-G: innate immunity and non-immunological functions	Le Bouteiller Philippe	EFG	238.680 F
59	2001	G7	Molecular targets of the blockade of lymphocyte activation by anti-CD3 antibodies	Morelon Emmanuel	EFG	300.000 F
60	2001	G7	Role of HLA-G in immunotolerance, involvement in lung transplantation	Rouas-Freiss Nathalie	association Vaincre la mucoviscidose	22.867 €
61	2001	G7	Injection of apoptotic cells simultaneously with allogeneic HSC grafts as a model of tolerance induction	Saas Philippe	EFG	300.000 F
62	2001	G7	Study of the mechanisms of action <i>in vivo</i> of immunosuppressants in a transgenic mouse model	Sarnacki Sabine	EFG	149.111 F
63	2001	G7	Study of tolerance to donor antigens in recipients of kidney transplants	Souillou Jean-Paul	EFG	300.000 F
64	2001	G7	Genetic immunosuppression of T lymphocytes by conditional suicide for the induction of specific tolerance	Thomas-Vaslin Véronique	EFG	275.000 F

65	2001	G7	Potential role of regulatory T lymphocytes in the induction of tolerance to allogeneic grafts	Van Meerwijk Joost	EFG	300.000 F
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
66	2001	G7	Study of immune reconstitution after the transplantation of allogeneic haematopoietic stem cells” (co-ordinating service).	Charron	PHRC	
67	2002	G7	Immunosuppression by selective CD28 inhibition	Vanhove Bernard	association Vaincre la mucoviscidose	15.000 €
68	2002	G7	Study of HLA-G expression in carcinomas of renal grafts	Aractingi Sélim	EFG	20.150 €
69	2002	G7	Polymorphism of NK-KIR genes and receptors in donors and recipients of allogeneic bone marrow grafts: impact of graft fate	Gagne Katia	EFG	20.150 €
70	2002	G7	Implementation of a matching score for HLA-DP molecules for bone marrow transplantation	Maillere Bernard	EFG	27.150 €
71	2002	G7	HLA-G in transplantation: demonstration of the tolerance-inducing role of this molecule and of its potential for therapeutic use	Rouas-Freiss Nathalie	EFG	27.150 €
72	2003	G7	Development of sc28-AT, a candidate immunosuppressive molecule for clinical trials in transplantation	Vanhove Bernard	association Vaincre la mucoviscidose	35.000 €
73	2003	G7	Are the unconventional class I molecules MICA and MICB minor antigens responsible for allogeneic reactions?	Caillat-Zucman Sophie	EFG	20.000 €
74	2003	G7	Phase I/II clinical trial for adrenoleukodystrophy: Gene therapy by autologous transplantation of CD34+ cells transduced with a lentiviral vector	Cartier Lacave Nathalie	EFG	20.000 €

75	2003	G7	Therapeutic use of CD4⁺CD25⁺ immunoregulatory T cells for controlling GVH disease following the transplantation of allogeneic HSCs	Cohen José	EFG	15.596 €
76	2003	G7	Identification of new mediators of rejection and tolerance induction in a model of allogeneic transplantation in adult animals: study of a new protein from the CD20 family	Cuturi Maria-Cristina	association Vaincre la mucoviscidose	20.000 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
77	2003	G7	Individually optimised treatments in lung and heart lung transplant CF patients by means of pharmacokinetically guided dose adjustment of all the immunosuppressive drugs	Marquet Pierre	association Vaincre la mucoviscidose	25.000 €
78	2003	G7	Characterisation of the immunomodulatory functions of immune effectors and dendritic cells from bone marrow grafts and peripheral HSCs	Mohty Mohamed	EFG	20.000 €
79	2003	G7	HLA-G in transplantation: demonstration of the role of this molecule in inducing tolerance and its potential for use as a treatment	Rouas-Freiss Nathalie	EFG	22.500 €
80	2003	G7	Study of the mechanisms of action in vivo of immunosuppressants in a transgenic mouse model	Sarnacki Sabine	EFG	15.596 €
81	2003	G7	Registry of primary focal and segmental hyalinosis (FSH) patients (dialysis and/or transplantation). Analysis of lymphocyte populations and of the TCR repertoire	Dantal Jacques	PHRC	
82	2004	G7	Functional characterisation of a new member of the CD20 family, TORID, identified in a model of allograft tolerance and strongly expressed by immature dendritic cells	Cuturi Maria-Cristina	association Vaincre la mucoviscidose	25.000 €
83	2004	G7	Control of the accumulation of dendritic cells from the graft by host CD8⁺ T lymphocytes and NK cells: involvement in the rejection of allogeneic grafts and the induction of tolerance	Guery Jean-Charles	EFG	13.688 €

84	2004	G7	Relationship between the activation of inflammation in the donor and graft quality (time to first rejection). Epidemiological and mechanistic approach	Longrois Dan	EFG	21.900 €
85	2004	G7	Stimmugrep: follow-up of immunosuppressive treatments in recipients of lung transplants with and without cystic fibrosis	Marquet Pierre	association Vaincre la mucoviscidose	56.000 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
86	2004	G7	Medium- and long-term study of the immunological effects of growth factor (G-CSF) treatment to mobilise haematopoietic cells in healthy donors	Robinet Eric	EFG	13.688 €
87	2004	G7	Development of a test for quantifying the immunosuppressive activity of calcineurin inhibitors by flow cytometry-based evaluation of the nuclear translocation of the transcription factor NF-AT	Taupin Jean-Luc	EFG	13.688 €
88	2004	G7	HLA-non-identical transplantation of purified CD34+ haematopoietic stem cells in children: prevention of graft versus host reaction and acceleration of immune reconstitution by transfusion	FISCHER Alain	PHRC	
89	2004	G7	Treatment of a recurrence of malignant haemopathy after allogeneic haematopoietic stem cell transplantation: optimisation of the anti-tumour effect by depletion of CD25⁺ regulatory T lymphocytes before the injection of donor lymphocytes	Maury Sébastien	PHRC	
90	2000	G7 ?	Study of the cellular and molecular dialogue between bcr/abl dendritic cells (CD_{bcr/abl}) and NK cells: towards a dissociation of graft-versus-host (GVH) and graft-versus-leukaemia (GVL) phenomena in dendritic cell therapy	Zitvogel Laurence	EFG	115.000 F
91	2003	G7 H8	Characterisation of tolerance in patients receiving kidney transplants after the cessation of immunosuppressive treatment	Souillou Jean-Paul	EFG	22.000 €

92	2000	H8	Optimisation of typing strategies for volunteer donors of haematopoietic cells: evaluation of the value of microsatellites for the HLA region	Cambon-Thomsen Anne	EFG	115.000 F
93	2000	H8	Study of the phagocytosis of <i>Aspergillus fumigatus</i> by alveolar macrophages in lung transplantation	LATGE Jean-Paul	association Vaincre la mucoviscidose	12.043 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
94	2000	H8	Improvement of renal preservation and evaluation of the quality of the graft, using a pulse-perfusion machine	Eschwege Pascal	EFG	60.000 F
95	2000	H8	Multicentre study evaluating and comparing routine cross-matching techniques for organ transplants	Gautreau Chantal	EFG	90.000 F
96	2000	H8	<i>In vitro</i> comparison of the cytotoxicity of various inactivating treatments applied to human spongy bone tissue with the aim of increasing graft safety	Vastel Laurent	EFG	115.000 F
97	2001	H8	Creation of a molecular barrier to increase the viability and freezing tolerance of skin allografts using polyethylene glycols	Eugene Michel	EFG	145.000 F
98	2001	H8	Hepatitis C in a liver graft: analysis of the virological parameters controlling recurrence	Lafon Marie-Edith	EFG	299.000 F
99	2001	H8	Study of the phagocytosis of <i>Aspergillus fumigatus</i> in lung transplantation	Philippe Bruno	association Vaincre la mucoviscidose	14.482 €
100	2002	H8	Evaluation of graft quality, using a pulse-perfusion machine	Eschwege Pascal	EFG	27.150 €
101	2004	H8	Lung valve replacement: comparison between classical surgical management and a mixture of drug treatment and surgery	Boudjemline Younes	PHRC	
102	2003	H8	Effector functions of the activating CD160 NK cell receptor	Le Bouteillier Philippe	EFG	15.596 €
103	2003	H8	HLA-G expression and heart and lung transplantation	Lila Nermin	EFG	15.596 €

104	2003	H8 F6	Evaluation of new immunosuppressants and the prevention of allogeneic graft rejection	Lang François	EFG	19.136 €
105	2004	H8 J10	Evaluation and improvement of graft quality	Gain Philippe	EFG	22.500 €
106	2004	H8 J10	Impact of the origin of the graft and of hepatocyte regeneration on the progression of recurrent hepatitis C in liver transplant patients	Paradis Valérie	EFG	13.688 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
107	2001	I9	European multicentre study aiming to evaluate the experience of organ harvesting in reanimation according to the type of management	Ferrand Edouard	EFG	180.000 F
108	2000	J10	Acceptability of xenotransplantation: psychosociological approach	Fellous Michel	EFG	115.000 F
109	2000	J10	Search for psychic risk factors predictive of survival during bone marrow transplantation	Topall-Rabanes Frédérique	EFG	50.000 F
110	2001	J10	Medical prognosis of liver and kidney grafts: impact of substance abuse, and of psychiatric and psychological factors	Corruble Emmanuelle	EFG	300.000 F
111	2001	J10	Optimisation of the indications for liver transplantation from a live donor: study based on the development of a statistical model	Durand François	EFG	207.400 F
112	2001	J10	Allotransplantation of HSCs for sickle-cell anaemia: anthropological and cross-cultural psychopathological study of the recovery process	Moro Marie-Rose	EFG	250.000 F
113	2001	J10	Psychological, sociological and anthropological analysis of the role of carers in the announcement of brain death and the request for organ donation	Riou Bruno	EFG	252.135 F
114	2001	J10	Comparative study of access to liver transplantation: is access similar for patients with alcohol-related and alcohol-unrelated diseases?	Calmus Yvon	PHRC	

115	2002	J10	Local and global cultures in the code of practice for organ donation. Analysis of the background and legal factors, at general or university hospitals, in the organisation of organ harvesting procedures and the co-ordination of transplantation facilities	Loncle Patricia	EFG	30.150 €
116	2003	J10	Analysis of the register of potential volunteer donors of HSCs with a view to optimisation by bioinformatic, statistical and economic methods: prototype of a theoretical model for performance optimisation (ARDOISE)	Cambon-Thomsen Anne	EFG	15.596 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
117	2003	J10	European multicentre study evaluating the experience of organ harvesting in reanimation according to the type of management: The DOREA Study – European section	Ferrand Edouard	EFG	20.000 €
118	2003	J10	Organ transplantation and donation: ethics, the media and society	Kapitz Christiane	EFG	20.000 €
119	2004	J10	Ethics of liver transplantation from live donors (LTLT): survey of preconceptions and practices concerning the donation and the graft in LTLT	Fargot-Largeault, Soubrane Olivier	EFG	24.000 €
120	2004	J10	Helping donors of haematopoietic stem cells. Sociological investigations of a work of organisation	Milanovic Fabien	EFG	24.480 €
121	2004	J10	Alcoholic cirrhosis, a “self-inflicted disease”, and access to liver transplantation	Vidal-Trecan Gwenaëlle	EFG	19.320 €
122	2000	K11	Role of the transcription factor GILZ in the anti-inflammatory action of glucocorticoids and Th2 cytokines	Emilie Dominique	EFG	25.916 €
123	2000	K11	Molecular characterisation and study of the differentiation of human bone marrow cells for therapeutic applications	Hardouin Pierre	EFG	115.000 F
124	2000	K11	Production of transgenic rabbits producing hypodermin A	Houdebine Louis Marie	EFG	115.000 F
125	2000	K11	Study of replicative senescence and renal transplantation	Paradis Valérie	EFG	60.000 F

126	2000	K11	Study of the mechanisms of action of extracorporeal photo-chemotherapy in humans	Plumas Joël	EFG	115.000 F
127	2002	K11	New approach to the study of chronic nephropathy in allografts involving the use of quantitative image analysis	Morelon Emmanuel	EFG	27.150 €
128	2004	K11	Study of the biological mechanisms of tissue transformation of an aortic allograft in the trachea	Seguin Agathe	EFG	15.580 €
NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	FUNDED BY	LEVEL OF FUNDING
129	2003	K11	Microarray analysis of the gene expression profile during chronic nephropathy in an allograft: a new approach to diagnosis, prognosis and treatment	Marti Hans-Peter, Rondeau Eric	EFG	17.000 €
130	2003	K11 F6	Study of graft-versus-host reaction in the rat. Genetic approach, using lines congenic for chromosomes 9 and 10	Fournie Gilbert	EFG	15.596 €
131	2001		Characterisation of genomic abnormalities responsible for post-transplantation lymphocyte proliferation: clinical significance and correlation with the presence of EBV	Poirel Hélène	EFG	150.000 F
132	2002		Definition of a new histocompatibility system in humans	Bahram Seiamak	EFG	27.150 €
133	2003		Early cellular modifications induced by leukocyte-endothelial cell interactions	German-Fattal Michèle	association Vaincre la mucoviscidose	35.000 €
134	2003		Longitudinal follow-up of bronchial inflammation by induced expectoration in lung transplant recipients	Reynaud-Gaubert Martine	association Vaincre la mucoviscidose	10.000 €
135	2003		Liver transplantation for hepatocellular carcinoma in a context of cirrhosis: evaluation of the presurgical administration of Lipiocis	BOULAHDOUR	PHRC	zero
136	2004		Study of the role of ST2 in idiopathic nephritic syndrome	Dantal Jacques	EFG	13.688 F

137	2004		Study of the involvement of regulatory T cells in chronic lung transplant rejection	Magnan Antoine	association Vaincre la mucoviscidose	45.000 €
138	2004		Evaluation of the risk of diseases linked to parental imprinting after medically assisted procreation	Le Bouc Yves	PHRC	zero

GERMAN PROJECTS:

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
1	zero	A1	Non-Compliance after heart- transplant	Kugler C, Bara C, Haverich A	Hannover	Wilkening.Mirela@m h-hannover.de	TGH Intern	zero
2	2005-2008	A1	Recipient stem cell derived endothelial cell therapy to improve transplant survival	Prof.Dr.D.Aabend roth	Ulm	dietmar.abendroth@ medizin.uni-ulm.de	DLR/BMBF beantragt	zero
3	zero	A1	Epidemiology of neoplasia in the long-term progression after heart-transplant	Bara C.	Hannover	Wilkening.Mirela@m h-hannover.de	Dt. Gesellschaft für Kardiologie	zero
4	zero	A1	Non-Compliance after lung-transplant	Kugler C, Haverich A	Hannover	Wilkening.Mirela@m h-hannover.de	Hoffmann La Roche AG	zero
5	zero	A1; I9	Influence of intensive training and psychosocial care after heart-transplant on quality of life and outcome	Kugler C; Bara c; Haverich, A	Hannover	Wilkening.Mirela@m h-hannover.de	Hoffmann La Roche AG	zero
6	22.07.02	A1;J10	Bioethical discourses, political and institutional finding of norms and societal formation of opinion in Japan	Prof. Dr. Josef Kreiner	Bonn	japanologie@uni-bonn.de	DFG	zero
7	09.04.01	B2	Adoptive transfer of gene-engineered regulatory T-cells: a novel approach for induction and maintenance of tolerance	Priv. Doz. Dr. Thomas Ritter	Berlin	thomas.ritter@charit e.de	DFG	zero
8	08.03.01	B2	Functional analysis of a tolerance-associated gene with homology to hsp90-Ko-Chaperon p23	Dr. Gerald Grütz	Berlin	gerald.gruetz@chari te.de	DFG	zero
9	30.09.99	B2	Induction of T-cell -specific tolerance through apoptosis-induced antigen-presenting cells via adenoviral gene transfer	Dr. Martin Fleck	Regensburg	martin.fleck@klinik.u ni-regensburg.de	DFG	zero
10	19.08.99	B2	Cellular mechanisms of rejection and tolerance induction: Visualisation of the CD8+ effector's T-cell response after heart- and lung transplant in the mice model	Dr. Klaus-Ulrich Steger	Oxford, OX3 9DU	ulrich.steger@nds.o x.ac.uk	DFG	zero

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
11	09.06.00	B2	Transplant tolerance through induction of chimerisms after transplantation of in vitro expanded haematopoietic stem cells and co-stimulation-blockade and busulfan	Dr. Nikos Emmanouilidis	Atlanta, GA 30329	Emmanouilidisnikos@hotmail.com	DFG	zero
12	14.02.00	B2	Allograft-induced tolerance	Priv. Doz. Dr. Stefan Günter Tullius	Berlin	stefan.tullius@charite.de	DFG	zero
13	24.10.02	B2	Investigation of the NIMA Effect on tolerance induction in organ transplantation	Andrassy	Madison, WI 53792-7375	andrassy@surgery.wisc.edu	DFG	zero
14		B2	Analysis of different potentials of regulatory t-cell functions and molecular tolerance mechanisms in relation to current immunosuppressive protocols in order to avoid chronic rejection after renal transplantation	Prof. Dr. Ana Maria Waaga-Gasser/ PD Dr. Detlef Meyer	Würzburg	waaga-gasser@chirurgie.uni-würzburg.de	Application for DFG Project	zero
15	zero	B2	Monitoring and therapeutic optimization of tolerance induction in clinic-related transplantation models	Pascher	Berlin	andreas.pascher@charite.de	zero	zero
16	1998-2002	B2	Research network: Induction of immunological tolerance in organ transplantation through manipulation of the donor organ	zero	Heidelberg	zero	BMBF	308335,6 €
17	1998-2001	B2	Research network: Induction of immunological tolerance in organ transplantation through manipulation of the donor organ	zero	Tübingen	zero	BMBF	133376,62 €

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18	04/2004- 04/2007	B2	Cytomegalovirus induced endothelitis after solid organ transplantation and the role of latent coagulation in decreases of functions of multiple organs	Prof. Dr. F.J. van der Woude	Heidelberg	Fokko.van-der-woude@med5.ma.uni-heidelberg.de	DFG Teil des Graduiertenkollegs "Vascular Medicine" GRK 880	800.000 €
19	2003	B2	Induction of donor-specific tolerance after lung transplantation	Strüber M	Hannover	Wilkening.Mirela@mh-hannover.de	DFG KFG 123	zero
20	04/2004- 04/2007	B2, F6	Endothelial damage and the phenotype of rejection after kidney transplantation	Prof. Dr. F.J. van der Woude	Heidelberg	Fokko.van-der-woude@med5.ma.uni-heidelberg.de	DFG Teil des Graduiertenkollegs "Vascular Medicine" GRK 880	800.000 €
21	19.08.99	C2	Experimental investigations for revitalisation of donor kidneys using oxygen persufflation after warm ischemic injury due to cardio circulatory arrest	Priv. Doz. Dr. Andreas Paul	Köln	zero	DFG	zero
22	10.07.01	C3	Prevention of ischemia-reperfusion injury in fatty livers: Impact of anti-oxidative strategies and ischemic preconditioning	Priv. Doz. Dr. Manfred Bilzer	München	manfred.bilzer@med2.med.uni-muenchen.de	DFG	zero
23	23.09.99	C3	Upstream modulation of neuronal apoptosis to improve outcome following cardio-circulatory arrest	Prof. Dr. Bernd Walter Böttiger	Heidelberg	bernd_boettiger@med.uni-heidelberg.de	DFG	zero
24	10.07.01	C3	Possibilities of therapeutic influence on endothelial related ischemic- reperfusion-damage of the heart	Priv. Doz. Christian Kupatt	München	christian.kupatt@med.uni-muenchen.de	DFG	zero
25	10.07.01	C3	Selective inhibition of the transcription-factor NF-kB in copper cells – relevance for the ischemic-reperfusion- damage	Prof. Dr. Angelika Vollmar	München	Angelika.Vollmar@cup.uni-muenchen.de	DFG	zero

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26	10.07.01	C3	Impact of ischemic temperature on the initial cellular and molecular mechanisms of hepatic ischemia-reperfusion injury	Prof. Dr. Fritz Krombach	München	krombach@med.uni-muenchen.de	DFG	zero
27	06.12.02	C3	Cell-specific gene-delegation in mice: Relevance of the vascular endothelium in blood pressure and blood volume regulation via the atrial natriuretic peptide (ANP)	Prof. Dr. Michaela Kuhn	Münster	mkuhn@uni-muenster.de	DFG	zero
28	09.02.00	C3	Protective effect of insulin to ischemia damaged heart: Investigations on the mechanism of action	Dr. Torsten Doenst	Freiburg	doenst@ch11.ukl.uni-freiburg.de	DFG	zero
29	10.06.02	C3	Regulation of the hemoxygenasis-1 induction using volatile anaesthetics and their relevance for the integrity of the liver after ischemia and reperfusion	Priv. Doz. Benedikt Pannen	Freiburg	pannen@nz.ukl.uni-freiburg.de	DFG	zero
30	18.03.99	C3	The sub acute endothelial activation in the myocardial reperfusion and its relevance for the reperfusion injury of the heart	Priv. Doz. Dr. Christian Kupatt	München	christian.kupatt@med.uni-muenchen.de	DFG	zero
31	23.06.00	C3	Preclinical evaluation of experimental approaches in order to improve organ protection in the context of pre-injured liver donations	Prof. Dr. Thomas Minor	Bonn	tminor@uni-bonn.de	DFG	zero
32	14.12.00	C3	Intracellular mechanisms and structural mutation of sinusoidal endothelial cells in the liver during preservation	Dr. Stefan Topp	Hamburg	topp@uke.uni-hamburg.de	DFG	zero
33	19.02.01	C3	Preclinical Investigations in order to prevent and treat ischemia/reperfusion injury in the transplanted lung using adenovirally controlled in vivo application of the human interleukin-10 gene in the donor lung prior to transplantation	Dr. Stefan Fischer	Hannover	SUTFischer@t-online.de	DFG	zero

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34	2001-bis dato	C3	Influence of selective and non-selective endothelial receptor antagonists on the ischemia/reperfusion injury of the lung	Dr. med. Henning F. Lausberg	Saarland	henning.lausberg@uniklinikum-saarland.de	Internal Funding	zero
35	1998- bis dato	C3	Protection of renal tubular cells from cold ischemia/reperfusion injury	Priv. Doz. Dr. med. Martin K. Kuhlmann	Saarland	martin.kuhlmann@uniklinik-saarland.de	Institutional Funds	zero
36	04/2004-04/2007	C3	Prevention of brain-death and preservation related injury in kidney and liver transplantation	Prof. Dr. F.J. van der Woude	Heidelberg	Fokko.van-der-woude@med5.ma.uni-heidelberg.de	DFG Teil des Graduiertenkollegs" Vascular Medicine" GRK 880	800.000 €
37	04/2004-04/2007	C3	Mechanism of action regarding the pre-treatment with dopamine of the cadaveric donor with or without brain death	Prof. Dr. F.J. van der Woude	Heidelberg	Fokko.van-der-woude@med5.ma.uni-heidelberg.de	DFGW 686/5-4	58.300,00 € 1 Wiss. MitarbeiterIn BAT IIa für 3 Jahre
38	2003-2006	C3	Beneficial Effects of the protein heme oxygenase-I on the ischemia/ reperfusion injury after isogeneic orthotopic renal transplantation	Hans Ullrich Spiegel	Münster	spiegeh@uni-muenster.de	IZKF Münster	zero
39	2003-2006	C3	Impact of the endothelin/nitric oxide balance on small-for-size liver injury after reduced-size rat liver transplantation	Hans Ullrich Spiegel	Münster	spiegeh@uni-muenster.de	Else Kröner Fresenius Foundation	zero
40	2001 bis dato	C3	Investigation of the mechanisms of cold induced apoptosis	PD Dr. Ursula Rauen/Prof. Dr. Dr. H. de Groot	Essen	ursula.rauen@uni-essen.de; h.de.groot@uni-essen.de	DFG	zero
41	2004-2006	C3	Clinical research group on: Optimization of living related liver transplantation	PD Dr. Ursula Rauen/Prof. Dr. Dr. H. de Groot	Essen	ursula.rauen@uni-essen.de; h.de.groot@uni-essen.de	DFG Teil des Graduiertenkollegs" Vascular Medicine" GRK 880	zero

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42	2005-2007	C3	Cytoprotection of hypothermic long-term cultures of human liver cells in perfusion bioreactors	PD Dr. Ursula Rauen/Prof. Dr. Dr. H. de Groot	Essen	ursula.rauen@uni-essen.de; h.de.groot@uni-essen.de	BMBF	zero
43	2003-2006	C3	Controlled reperfusion with leukocyte-depleted blood after orthotopic heart transplantation in order to improve outcome	PD Dr. J. Martin	Freiburg	martin@ch11.ukl.uni-freiburg.de	z.Z. keine Förderung	zero
44	zero	C3	Celsior reperfusion dilution in clinical lung transplantation	Fischer S, Strüber M		Wilkening.Mirela@m h-hannover.de	TGH Intern (Celsior Konservierungslösung wird durch die Firma Genzyme zur Verfügung gestellt)	zero
45	2004-2006	C3	Formation of oxygen radicals after renal transplantation (clinical)	Dr. Oliver Drognitz	Freiburg	oliverdrognitz@web.de	Novartis	30.000 €
46	zero	C3	Ischemia/reperfusion injury related to immunosuppressives	Dr. Markus Giessing	Berlin	markus.giessing@c harite.de	University resources	zero
47	2004	C3	Impact of taurine and other amino acids on the ischemia/reperfusion injury after renal and hepatic transplantation	Priv. Doz. Dr. Peter Schemmer	Heidelberg	Peter_Schemmer@ med.uni- heidelberg.de	Non-public third party funding	zero
48	2004	C3	Influence of herbal substances/extracts on the ischemia/reperfusion injury after renal and hepatic transplantation	Priv. Doz. Dr. Peter Schemmer	Heidelberg	Peter_Schemmer@ med.uni- heidelberg.de	Non-public third party funding	zero
49	2004	C3	Influence of radical catchers on the ischemia/reperfusion injury after renal and hepatic transplantation	Priv. Doz. Dr. Peter Schemmer	Heidelberg	Peter_Schemmer@ med.uni- heidelberg.de	Non-public third party funding	zero
50	2005	C3	Split liver transplantation: liver perfusion and reperfusion injury after transplantation	Priv. Doz. Dr. Peter Schemmer	Heidelberg	Peter_Schemmer@ med.uni- heidelberg.de	Non-public third party funding	zero

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51	2003	C3	Lung preservation for transplantation from “heart beating” and “non-heart-beating” donors in a porcine model	Fischer S, Warnecke G		Wilkening.Mirela@m h-hannover.de	DFG KFG 123	zero
52		C3	Evaluation of various preconditioning methods in order to reduce reperfusion injury after pulmonary ischemia in the in vivo pig model	zero			Haushalt, Industrie	
53	2001	C3	Prevention of Ischemia Reperfusion Injury	Professor Dr. Alexander L. Gerbes	München	gerbes@med2.med. uni-muenchen.de	DFG	2,1 Mio EUR
54	25.07.02	D4	Regulation of liver repopulation with transplanted hepatocytes: Studies of cell interaction of hepatic astrocytes	Dr. Daniel Benten	Hamburg	zero	DFG	zero
55	18.05.00	D4	Experimental investigation in large animals regarding the employment of non-heart beating donors and inhalativ donor pre-treatment in the experimental lung transplantation	Priv. Doz. Dr. Thorsten Wittwer	Jena	Thorsten.Wittwer@ med.uni-jena.de	DFG	zero
56	20.11.00	D4	Endothelial progenitor cell in organ transplantation – autologous and allergenic T-cell activation, immunomodulation and therapeutic use for vascular protection	Dr. Thomas J. Dengler	Heidelberg		DFG	zero
57	zero	D4	Preoperative imaging in living liver related donation	Dr. Markus Giessing	Berlin	markus.giessing@c harite.de	University resourrces	zero
58	zero	D4	Influence of laparoscopy on living related kidney donations	Dr. Markus Giessing	Berlin	markus.giessing@c harite.de	University resourrces	zero
59	2005	D4	Hepatic cell transplantation	Priv. Doz. Dr. Peter Schemmer	Heidelberg	Peter_Schemmer@ med.uni- heidelberg.de	Non-public third party funding	zero
60	2004	D4	Optimisation of Living Related Liver Transplantation	Professor Dr. Christoph E. Broelsch	Essen	christoph.broelsch@ uni-essen.de	DFG	870000

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61	1997-2003	D4, K11	Safety aspects of xenotransplantation	zero		Denner@Jrki.de;toera@pei.de	Federal Miistry of Health and Social Security	700000 €
62	2004	D4, K11	Xenotransplantation	Professor Dr. Bruno Reichart	München	bruno.reichart@hch.med.uni-muenchen.de	DFG	1,7 Mio EUR
63		E5	1) BK Virus Infection in kidney transplantation 2) PH 13) Urinary tract infection during kidney transplantation	PD Dr. med. Markus J. Kemper	Hamburg	kemper@uke.uni-hamburg.de	zero	zero
64	08.06.00	E5	Neuropsychological assessment of hepatic encephalopathy in patients with liver cirrhosis before and after liver transplantation	Dr. Christian Wein	Hamburg	wein@uni-hamburg.de	DFG	zero
65	20.09.99	E5	Do cytokine- promoter polymorphisms affect the characteristics of the immunodeficiency in case of chronic renal failure and of the prognosis after renal transplantation?	Dr. Matthias Girndt	Homburg	zero	DFG	zero
66	27.10.00	E5	Relevance of the extra-hepatic virus persistency in mononuclear cells of the peripheral blood in case of a chronic hepatitis B for patients prior and post to orthotopic liver transplantation.	Prof. Dr. Guido G. H.Gerken	Essen	zero	DFG	zero
67	17.05.01	F6	Organ protection by protein cell transfer using anti-apoptotic fusion proteins	Prof. Dr. Ulrich Kunzendorf	Kiel	kunzendorf@nephro.uni-kiel.de	DFG	zero
68	25.03.03	F6	Risk stratification for graft vessel disease after heart transplantation	Prof. Dr. Roland Hetzer	Berlin	hetzer@dhzb.de	DFG	zero
69	11.07.02	F6	The chronic graft failure: molecular mechanisms of the effect of [Lp(a)] in the animal –experiment	Dr. Friederike Wahn	Berlin	friederike.wahn@charite.de	DFG	zero

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70	28.02.02	F6	Utilisation of heparin and glycosaminoglycans in order to improve the long term prognosis of kidney transplants	Dr. Claude Braun	Mannheim	cbraun@rumms.uni-mannheim.de	DFG	zero
71	03.11.00	F6	Investigations in order to prevent chronic rejection and the restructuring of the extra cellular matrix related to it using 1,25-Dihydroxyvitamin D3	Dr. Alexander Pietsch	Rostock	zero	DFG	zero
72	3/2004- 3/2006	F6	Relevance of the genetic polymorphisms of pro- and anti inflammatory cytokines as cofactors of the HLA-compatibility to the long term outcome of kidney transplants	PD Dr. Matthias Girndt	Saarland	inmgir@uniklinik-saarland.de	Industry (Fujisawa, Roche)	15.000 € p.a.
73	12/2003- 10/2005	F6	1)The role of BCA-1 and CXCR5 in the acute and chronic graft failure 2) Influence of chemokine- and chemokine-receptor polymorphisms on acute and chronic graft failure	Prof. Dr. med. Friedrich Thaiss	Hamburg	thaiss@uke.uni-hamburg.de	Local funding (Werner Otto Stiftung und Forschungsförderung UKE FFM)	55.000 €
74	März 2004 bis Februar 2007	F6	The importance of senescence marker p16INK4a for the survival of renal allografts	: Dr. Dr. Anette Melk	Heidelberg	anette.melk@med.uni-heidelberg.de	Roche Organ Transplantation Research Foundation	CHF 300.000
75	3/2003- 3/2006	F6	Prevention of graftvasculopathy through immune regulation with dendritic cells	Prof. Dr. med. Gregor Bein/PD Dr. med. H. Hackstein	Giessen	Holger.Hackstein@immunologie.med.uni-giessen.de	DFG (Teilprojekt A5, SFB 547)	382,410 €
76	2000 bis 2003	F6	Visualization of alloreactiv CD8+T-lymphocytes after heart, kidney and liver transplantation	Dr. med. Ulrich Steger	Würzburg	Steger_U@chirurgie.uni-wuerzburg.de	DFG (STE 974/1-1)	zero
77	2003-2006	F6	Influence of the intra-hepatic antigen presentation on the CD8+ immune reaction after liver transplantation	Dr. med. Ingo Klein	Würzburg	Klein_I@chirurgie.uni-wuerzburg.de	DFG (Forschungsstipendium KL 1403/2-1);	zero

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78	2003-2006	F6	Apoptosis/fibrosis after experimental pancreas transplantation in rats	Dr. Oliver Drognitz	Freiburg	oliverdrognitz@web.de	Novartis	30.000 €
79	2005-2007	F6	Molecular mechanism related to chronic graftvasculopathy	Prof. Dr. Uwe Querfeld	Berlin	uwe.querfeld@charite.de	Chariteforschungsförderung + diverse Drittmittel	zero
80	01.10.2004	F6	InnoRegio BioHyTec-research collaboration: Development of a multi parametric anti-body chip in order to detect autoimmune diseases: Development of an ELISA for the prediction of the risk of graft rejection		Luckenwalde	zero	BMBF	43.104€
81	2003	F6	Relevance of the leukocyte movement for the chronic rejection of the lung-experiment in subcutaneous trachea transplantation	Haverich A, Förster R	Hannover	Wilkening.Mirela@mh-hannover.de	DFG KFG 123	zero
82	29.01.01	F6	Chronic allograft nephropathy: interaction of the redox-system with nuclear retinoid (RAR/RXR) and liver (LXR)- receptors	Prof. Dr. Herman-Josef Gröne	Heidelberg	h.-j.groene@dkfz-heidelberg.de	DFG	zero
83	2000	F6	Chronic graft failure: Interaction of the redox-systems to nuclear retinoid (RAR/RXR)- and Liver x (LXR)-receptors.	Dr. Karina Schleiber	Köln		DFG	zero
84	2001	F6	Chronic Renal Failure Mechanisms of Progression	Professor Dr. Wilhelm Kriz	Heidelberg	wilhelm.kriz@urz.uni-heidelberg.de	DFG	2,5 Mio EUR
85	18.12.02	F6;K11	The regulation of neutral ceramidase and its relevance related to the stress reaction in mesangium cells in the kidney and the experimental models of glomerulonephrities	Prof. Dr. Josef M. Pfeilschifter	Frankfurt	pfeilschifter@em.uni-frankfurt.de	DFG	zero
86	04.11.02	G7	Virus-specific immunity in secondary immunodeficiency	Dr. Martina Sester	Homburg	martina.sester@uniklinik-saarland.de	DFG	zero

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87	17.09.01	G7	Donor related immunesuppression/tolerance induction through expression of soluble Allo-MHC class antigen via an adenoviral vector system	Priv. Doz. Dr. Graeb	München	christian.graeb@gch.med.uni-muenchen.de	DFG	zero
88	02.04.02	G7	T-cell response to hepatitis B and C	Dr. Robert Thimme	Freiburg	thimme@medl.ukl.uni-freiburg.de	DFG	zero
89	12.11.02	G7	Investigations for the hepatic and extra-hepatic antigen presentation and T-cell apoptosis after liver transplantation in the transgenic mice model	Dr. Ingo Klein	Würzburg	ingo_klein@web.de	DFG	zero
90	18.02.04	G7	Adoptive immunotherapies in dogs with established mixed haematopoietic chimerism following allogeneic haematopoietic stem cell transplantation	Dr. Christian Junghanß	Rostock	christian.junghanss@med.uni-rostock.de	DFG	zero
91	08.12.03	G7	Immune-regulatory function of human CD3 CD4-/CD8- double negative T cells	Prof. Dr. Andreas Mackensen	Regensburg	andreas.mackensen@klinik.uni-regensburg.de	DFG	zero
92	30.10.00	G7	Analysis of the applicability of T-cell receptor peptides for the T-cell oriented immunesuppression using dendritic cells	Prof. Dr. Alexander Enk	Heidelberg	alexander_enk@med.uni-heidelberg.de	DFG	zero
93	19.03.01	G7	Gene therapeutic intervention in order to reduce the early organ injury related to liver transplantation	Dr. Markus Rentsch	Regensburg	markus.rentsch@klinik.uni-regensburg.de	DFG	zero
94	10.01.00	G7	Pharmacodynamic monitoring of immunosuppressive therapy with the aid of lymphocyte functions-assays in the animal-model and clinic	Dr. Jan Gummert	Leipzig	Gumj@server3.medi.zin.uni-leipzig.de	DFG	zero
95	10.08.99	G7	Effects of over expression of hemoxygenase-1(HO-1) and carbon monoxide application on TNF-alpha induced apoptosis in pancreatic beta-cells and upon the functionality and survival of pancreatic islet after transplantation in two mice-models.	Dr. Lukas Günther	Boston, MA 02215	lukas_guenther@hotmail.com	DFG	zero

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96	10/2004- 10/2006	G7	Reduction of the reperfusion injury of pancreas after temporary ischemia using FTY 720	PD Dirk Uhlmann	Leipzig	uhld@medizin.uni-leipzig.de	Novartis	zero
97	2/2004- 2/2007	G7	Multi transgenic animals and in-vivo gene transfer in the experimental xenotransplantation model	PD Dr Michael Schmoeckel	München	michael.schmoeckel@med.uni-muenchen.de	DFG	130.000 € plus personell
98	2001-2006	G7	AN OPEN-LABEL, PROSPECTIVE, RANDOMIZED, MULTICENTER INVESTIGATOR DRIVEN STUDY COMPARING THE EFFICACY AND SAFETY OF TACROLIMUS WITH CYCLOSPORINE, IN COMBINATION WITH MYCOPHENOLATE MOFETIL AND CORTICOSTEROIDS, AFTER PRIMARY ORTHOTOPIC HEART TRANSPLANTATION	Dr. Bruno Meiser	München	bruno.meiser@med.uni-muenchen.de	Industry	450000
99	zero	G7	Evaluation of the safety and efficacy of mycophenolate in renal transplantation	Marcus Spangenberg	Augsburg	marcus.spangenberg@klinikum-augsburg.de	zero	zero
100	2005	G7	Evaluation of the outcome of kidney transplantation with particular view to chronic graft failure expressed through the calcineurin-inhibitor toxicity.	Carmen Hurrle	Augsburg	carmen.hurrle@tpz.augsburg-med.de	Wyeth	20€ per hour
101	1999-2002	G7	Chemotherapy and immunosuppressives in transplantation and organ substitutions	zero	Rostock	zero	BMBF	570782,23 €
102	1997-2000	G7	Collaborative research project: Complication of organ transplantation due to herpes viruses	zero	Tübingen	zero	BMBF	345128,61€
103	1997-2000	G7	Collaborative research project: Complication of organ transplantation due to herpes viruses	zero	Ulm	zero	BMBF	106133,7€
104	1997-2000	G7	Collaborative project: Complication of organ transplantation due to herpes viruses	zero	Freiburg	zero	BMBF	218847,07€

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105	1997-2000	G7	Collaborative project: Complication of organ transplantation due to herpes viruses	zero	Berlin	zero	BMBF	205473,13€
106	1997-2000	G7	Collaborative project: Complication of organ transplantation due to herpes viruses	zero	Mainz	zero	BMBF	337291,58 €
107	1998-2002	G7	Collaborative project: HBV-variations: The relevance of sequence heterogeneity of hepatitis- B viruses in the pathogenesis of hepatitis- B infections in kidney transplant recipients.	zero	Berlin	zero	BMBF	118971,78 €
108	2002 bis 2005	G7	Dendritic cells with immunoregulatory to prevent allograft rejection in an antigen-specific manner.	Priv.-Doz. Dr. rer. nat. Christoph Otto/Professor Dr. rer. nat. Karin Ulrichs	Würzburg	Otto_C@chirurgie.uni-wuerzburg.de/Ulrichs_k@chirurgie.uni-wuerzburg.de	DFG (Graduiertenkolleg 520)	zero
109	1992-2003	G7	Immune Reactions and Pathomechanisms in Organ Transplantation	Professor Dr. Michael P. Manns	Hannover	manns.michael@mh-hannover.de	DFG	14,6 Mio EUR
110	2002-2006	G7	Functional Mechanisms of Cyclosporine-mediated Immunosuppression in Transplantation Medicine	<i>Prof. Dr. Gunter Fischer</i>	Halle	Fabry@gv.mpg.de	zero	30.000 p.a.
111	30.09.99	H8	Strategies for the improvement of long term outcomes of marginal organs	Priv. Doz. Dr. Stefan Günter Tullius	Berlin	stefan.tullius@charite.de	DFG	zero
112	18.11.02	H8	Mechanisms and modulation of regeneration augmented allograft-rejection after living liver related donation. Investigation of the interaction of regeneration and allograft-rejection	Dr. Uta Dahmen	Essen	uta.dahmen@uni-essen.de	DFG	zero
113	05.07.00	H8	Primary graft failure in adipose liver donations: The role of TNF alpha and endotoxin in copper cell based injury	Dr. Lars Oliver Conzelmann	Heidelberg	lars.conzelmann@gmx.de	DFG	zero

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114	28.07.03	H8	Micro circulation and hemodynamics after liver transplantation	Prof. Dr. Utz Settmacher	Jena	utz.settmacher@med.uni-jena.de	DFG	zero
115	14.07.03	H8	The role of endothelial and inducible nitric oxide – synthesise (eNOS and iNOS) in hepatic injury after liver transplantation	Dr. Lars Oliver Conzelmann	Heidelberg	lars.conzelmann@gmx.de	DFG	zero
116	zero	I9	Quality of life	Thomas Breidenbach	Augsburg	thomas.breidenbach@klinikum-augsburg.de	zero	zero
117	16.11.00	J10	Ethical aspects related to kidney transplantation	Priv. Doz. Dr. Ralf Bickeböller	Frankfurt		DFG	zero
118	zero	J10	Influence of intensive training and psychosocial care after lung-transplantation on quality of life and outcome	Kugler C, Bara C, Haverich A		Wilkening.Mirela@mh-hannover.de	Hoffmann La Roche AG	zero
119	indefinite	K11	Quality of tissue and its relation to post mortem recumbence-time	Prof.Dr.H.Bratzke	Frankfurt	bratzke@em.uni-frankfurt.de	Industry	30 000 € p.a.
120	09.03.00	K11	Neo vascularization of Langerhans' islets.	Privatdozent Dr. Thomas Linn	Gießen	thomas.linn@innere.med.uni-giessen.de	DFG	zero
121	04.05.00	K11	Mechanisms of induction of donor-specific transplantation-tolerance with mixed haematopoietic chimeras in the mice-model	Dr. Beate Exner	Kiel	zero	DFG	zero
122	12.10.00	K11	TNF-induced stress-signal –transduction in development of endothelial dysfunction	Priv. Doz. Dr. Thomas Benzing	Freiburg	benzing@med1.ukl.uni-freiburg.de	DFG	zero
123	12.10.00	K11	Application of rapid prototyping techniques for tissue engineering of heart valves	Dr. Ralf Sodian	Berlin	sodian@dhzb.de	DFG	zero

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
124	31.10.02	K11	Influence of brain death on the (pro) inflammatory reaction, myocardial damage and gene expression of the heart	Dr. Christian A. Skrabal	Houston, Texas, 77006	cskrabal@bcm.tmc.edu	DFG	zero
125	22.05.00	K11	Effects on an therapeutic experiment of brain death in experimental and clinical models	Priv. Doz. Pratschke	Berlin	Johann.Pratschke@charite.de	DFG	zero
126	29.01.01	K11	Mechanisms of action after pre-treatment of the brain death/non-brain death organ donor with dopamine	Prof. Dr. Fokko Johannes van der Woude	Mannheim	Fokko.van-der-Woude@med5.ma.uni-heidelberg.de	DFG	zero
127	20.12.01	K11	Potential for differentiation of specific cell-types of the liver: new approaches to liver regeneration	Prof. Dr. Jan Georg Hengstler	Leipzig	hengstle@mail.uni-mainz.de	DFG	zero
128	26.08.02	K11	Constitutive signal transmission via proteins of the glomerular slit membrane – Relevance for diseases of the glomerular filter of the kidney	Priv. Doz. Dr. Thomas Benzing	Freiburg	benzing@med1.ukl.uni-freiburg.de	DFG	zero
129	29.07.99	K11	Cellular and molecular mechanisms of the control of the apical Na⁺/H⁺-interchanger NHE 3 with adenosine kidney- epithelioma	Priv. Doz. Dr. Corinna Helmle-Kolb	Göttingen	helmle@veg-physiol.med.uni-goettingen.de	DFG	zero
130	19.07.99	K11	A role for DNA methylation and DNA methyltransferase during cerebral ischemia	Priv. Doz. Dr. Matthias Endres	Berlin	matthias.endres@charite.de	DFG	zero
131	12.02.04	K11	Evaluation of the infectious risk posed by porcine endogenous retroviruses (PERVs) of genetically modified animals bred for use in xenotransplantation	Priv. Doz. Dr. Ralf R. Tönjes	Langen	toera@pei.de	DFG	zero
132	12.02.04	K11	Transgenic strategies to prevent complement activation and immune cell attack of pig organs in preclinical xenotransplantation models	Prof. Dr. Eckhard Wolf	München	ewolf@lmb.uni-muenchen.de	DFG	zero
133	12.02.04	K11	Multi-transgene Schweine für Xenotransplantation	Prof. Dr. Heiner Niemann	Neustadt	niemann@tzv.fal.de	DFG	zero

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
134	12.02.04	K11	Recombinant adeno-associated virus-mediated transgene delivery into porcine organs to allow immunological modifications of xenografts	Prof. Dr. Michael Hallek	Köln	michael.hallek@uni-koeln.de	DFG	zero
135	04.04.02	K11	Positional cloning of the gene for diabetic nephropathy	Prof. Dr. Fokko Johannes van der Woude	Mannheim	Fokko.van-der-Woude@med5.ma.uni-heidelberg.de	DFG	zero
136	27.09.02	K11	Medico-ethical and animal ethical aspects of xenotransplantation	Dr. Silke Schicktanz	Berlin	schicktanz@mdc-berlin.de	DFG	zero
137	04.12.00	K11	Investigations in order to achieve MHC – specific (SLA, CLA, HLA) sensitization of Javanese monkeys after xenotransplantation hCD55 of transgenic porcine kidneys	Prof. Dr. Rainer Blasczyk	Hannover	blasczyk.rainer@mh-hannover.de	DFG	zero
138	12.02.04	K11	Multitransgenic animals and in-vivo gene transfer in experimental xenotransplantation models	Priv. Doz. Michael Schmoeckel	München	michael.schmoeckel@hch.med.uni-muenchen.de	DFG	zero
139	10.02.00	K11	Tolerance induction through lymphohaematopoietic chimeras and thymogenic-heart transplantation in a pre-clinical study of xenogene transplantation of porcine hearts into non-human primates using co stimulation-blockade	Dr. Christoph Knosalla	Berlin		DFG	zero
140	1998 to date	K11	Tissue Engineering of liver substituting tissue	PD Dr. Dr. med. Jörg-Matthias Pollok	Hamburg	pollok@uke.uni-hamburg.de	DFG	zero
141	1996	K11	Immune isolation and Transplantation of Langerhans' islets	PD Dr. Dr. med. Jörg-Matthias Pollok	Hamburg	pollok@uke.uni-hamburg.de	expired industrial cooperation	zero
142	2005-2006	K11	Interaction of cytotoxic lymphocytes with transplanted Langerhans' islets	Prof. Dr. Jan Schmidt	Heidelberg	jan_schmidt@med.uni-heidelberg.de;eduard_ryschich@exchi.uni-heidelberg.de	Lautenschläger Diabetes Stiftung	Personnel costs

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
143	zero	K11	Micro-surgical transplantation models in mice and rat, realisation of micro-surgical operation classes	Privat-Dozent Dr. med. Detlef Meyer	Würzburg	Meyer_D@chirurgie.uni-wuerzburg.de	Participation fees	zero
144	zero	K11	In vitro experiments in order to produce autologous human conduits of valves of veins with the help of tissue engineering	Tudorache I, Puschmann C	Hannover	Wilkening.Mirela@m h-hannover.de	Gemeinnützige CORTISS Gesellschaft	zero
145	zero	K11	The role of eprosartan in the primary prevention of coronary vasculopathy following heart transplantation (EPROCOR-Studie)	Pethig K, Bara C	Hannover	Wilkening.Mirela@m h-hannover.de	Solvay Arzneimittel GmbH	zero
146	2005-2010	K11	Organ-model registration in liver surgery	Dr. Bruno Schmied	Heidelberg	Bruno_Schmied@med.uni-heidelberg.de	DFG (Teil des GRAKO Projekts, honoriert mit einem Medizinstipendium über 5 Jahre	zero
147	indefinite	K11	Differential gene expression in peripheral organs after brain death induction	Dr. Robert Obermaier	Freiburg	ROBERT.OBERMAIER@UNIKLINIK-FREIBURG.de	Budgetary funds	zero
148	2005 indefinite	K11	Transplantation of hepatocytes	Dr. Matthias Glanemann	Berlin	matthias-glanemann@charite.de	Currently none	zero
149	zero	K11	Experimental small intestine transplantation	Dr. Andreas Pascher	Berlin	andreas.pascher@charite.de	zero	zero
150	2005-2008	K11	Methods of hypothermic long term culture of human liver cells in the perfusion-bioreactor	Dr. Ingo Sauer	Berlin	ingo.sauer@charite.de	BMBF	zero
151	2005-2008	K11	Transplantation and molecular imaging of cells labelled with nanoparticles	Dr. Ingo Sauer	Berlin	ingo.sauer@charite.de	Chariteforschungsförderung	zero

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
152	2005	K11	Significance of the sealants in the living liver transplantation	Priv. Doz. Dr. Schemmer	Heidelberg	Peter_Schemmer@med.uni-heidelberg.de	Non-public third party funding	zero
153	2004-2005	K11	Monitoring of the patho- biochemical changes of the kidney parenchyma prior, during and post kidney transplantation	Priv. Doz. Dr. Schemmer	Heidelberg	Peter_Schemmer@med.uni-heidelberg.de	Non-public third party funding	zero
154	2005-2006	K11	Significance o brain death related to the quality of organ quality of visceral transplantation	Priv. Doz. Dr. Schemmer	Heidelberg	Peter_Schemmer@med.uni-heidelberg.de	Non-public third party funding	zero
155	2001-2003	K11	Employment and characterization of blood cells as well as embryonic/fetal stem cells in liver cell transplantation	zero	Hannover	zero	BMBF	192620,49 €
156	2001-2004	K11	Collaborative research project: Modulation of the immunogenicity of allogenic and xenogenic cell for transplantation through gene therapeutic procedures	zero	Greifswald	zero	BMBF	119102,38 €
157	2001-2004	K11	Therapy of degenerative, retinal diseases through transplantation of retinal stem cells	zero	Hamburg	zero	BMBF	367305,44 €
158	1997-2000	K11	Collaborative project: Complication of organ transplantation due to herpes viruses	zero	Erlangen	zero	BMBF	215714,04€
159	1998-2001	K11	Collaborative research project: Transgenic pigs as organ donors of engrafts for transplantation into humans	zero	Braunschweig	zero	BMBF	307252,16 €
160	1999-2002	K11	Collaborative research project: Transgenic pigs as organ donors of engrafts for transplantation into humans	zero	Braunschweig	zero	BMBF	305547,83 €
161	1998-2002	K11	Collaborative research project: Transgenic pigs as organ donors of engrafts for transplantation into humans	zero	München	zero	BMBF	387565,89 €

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_TOWN	P_EMAIL	FUNDED BY	LEVEL OF FUNDING
162	2005-2008	K11	zero	zero	Berlin	zero	BMBF	460788 €
163	1999-2001	K11	Organ allocation via Eurotransplant	Prof. Dr. Marlies Ahlert	Halle	ahlert@wiwi.uni-halle.de	Third Party funding	zero
164	2001-2002	K11	Factors that influence the willingness to organ donation	Prof. Dr. Marlies Ahlert	Halle	ahlert@wiwi.uni-halle.de	Third Party funding	zero
165	1999-2001	K11	Criteria for organ allocation	Prof. Dr. Marlies Ahlert	Halle	ahlert@wiwi.uni-halle.de	Third Party funding	zero
166	2002-2003	K11	Modelling of incentive systems for organ donation	Prof. Dr. Marlies Ahlert	Halle	ahlert@wiwi.uni-halle.de	Third Party funding	zero
167	Ende 2001?	K11	Criteria for equitable organ allocation	zero		zero	DFG	
168	2004	K11 (DFG Großpr ojekt	Lung Transplantation	Professor Dr. Axel Haverich	Hannover	haverich@thg.mh-hannover.de	DFG	750000

HUNGARIAN PROJECTS:

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_TOWN	FUNDED BY	LEVEL OF FUNDING
1	2003-2005	A1	A prospective trial of mutation scanning of the p53 tumor suppressor gene in patients with chronic renal failure, in renal and liver transplants in Hungary	Jenő Járay PhD	Semmelweis University Transplantation and Surgical Clinic	Budapest	NKTH	zero
2	1997-2005	A1	Role of human herpesvirus 8 (HHV-8) in the etiopathogenesis of Kaposi' sarcoma in organ transplanted persons	<i>Karoly Nagy M.D., PhD.</i>	Semmelweis University	Budapest	OTKA (National Scientific Research Fund);ETT (Medical Research Council)	25.900
3	2003-2005	A1	Population genetic characterization of the Hungarian Bone Marrow Donor Registry, investigation of its ethnic composition in order to optimise the chance of allogeneic stem cell transplantation with unrelated donors	Katalin Rajczy	National Medical Center	Budapest	zero	zero
4	2004-2007	C3	Investigation of the pathomechanism of ischemic preconditioning prior to small bowel autotransplantation in experimental model	László Benkő	Pecs University of Sciences Department of Surgical Research and Techniques	Pecs	zero	zero
5	2002-2003	D4	Implantation and examination of vascular graft developed from internal rectus sheath in dogs	Tibor Németh PhD	University of Veterinary Medicine	Budapest	zero	zero
6	2005-2008	D4	The introduction of musculoskeletal biotechnology into Hungary, treatment of cartilage injuries using autologous chondrocyte transplantation	Berki Tímea PhD	Institute of Immunology and Biotechnology	Pécs	zero	zero

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_TOWN	FUNDED BY	LEVEL OF FUNDING
7	2005-2007	D4	Development and application of cell and gene therapeutic technologies methods for the treatment of disease	Balázs Sarkadi	National Medical Center	Budapest	publicly	162.900.000 Ft
8	2002-2005	D4	Investigations on the pathogenesis of skin diseases with tissue defects and the identification of the involved genetic factors. The establishment of new treatment modalities and their industrial production	Zsuzsanna Bata-Csörgő	Department of Dermatology and Allergology	Szeged	zero	zero
9	2003-2005	D4	Neural stem cell transplantation in brain trauma	Zsombor Lacza	Semmelweis University Department of R&D	Budapest	zero	zero
10	2003-2005	D4	The role of endogenous stem cell production in the regeneration of damaged myocardial tissue	Tamás Masszi	National Medical Center	Budapest	zero	zero
11	2004-2006	D4	Regenerative medicine and stem cell therapy - development of preclinical models	Béla Gömör	Eotvos Lorand University	Budapest	zero	zero
12	2001-2007	D4	CD34+ stem cell and dendritic cell-based therapy	Éva Rajnavolgyi	Institute of Immunology Medical and Health Science Center	Debrecen	publicly and co-financed by private SME	235.550.000 FT
13	2005-2007	D4	Characterization of the set of cell adhesion molecules on stem cell surfaces	Emilia Madarasz	Institute of Experimental Medicine of HAS	Budapest	publicly	120.000 €
14	2004-2006	D4	In vitro and in vivo fate of neural stem cells: harmonization of neural host tissue with stem cells	Emilia Madarasz	Institute of Experimental Medicine of HAS	Budapest	publicly	84.000.€
15	2005-2007	D4	Intracerebral fate of neural stem cells implanted into adult mouse brains at various pathophysiological conditions	Emilia Madarasz	Institute of Experimental Medicine of HAS	Budapest	publicly	60.000.€

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_TOWN	FUNDED BY	LEVEL OF FUNDING
16	1999-2000	E5	Detection of citrate synthase specific autoantibodies in heart transplant patients	Berki Tímea PhD	Institute of Immunology and Biotechnology	Pécs	FKFP	2.500.000 FT
17	zero	E5	Detection of virus infection of transplanted individuals	Tibor Füle (contact person)	Semmelweis University 1st Department of Pathology	Budapest	The costs of the virus detection is covered by the health insurance (OEP) for 5 years. No other funding is available.	zero
18	2003	E5	Exhaled breath condensate investigations before and after lung transplantation	Ildiko Horvath MD, Krisztina Czebe MD	National Koranyi Institute of Pulmonology	Budapest	zero	zero
19	2004-2007	E5	Pathomechanism of bronchiolitis obliterans syndrome	Krisztina Czebe	National Institute of Pulmonology Department of Pathophysiology	Budapest	NKTH	zero
20	2004-2007	E5	Risk factors concerning the cardiovascular system and the bones in children with chronic renal failure and following kidney transplantation. Clinical, molecular genetic and experimental studies	Ilona Bányász , Gyorgy Reusz Dr.Sc.	Semmelweis University 1st Department of Pediatrics	Budapest	zero	zero
21	2003-2005	E5	Development of a rapid quantification method for monitoring the outcome of allogeneic blood stem cell transplantation in leukemic patients	Bela Csokay	Genodia Molecular Biology Ltd.	zero	publicly	3.750.000 Ft
22	2003-2006	F6	The role of nitric oxide in acute renal failure and in chronic allograft nephropathy: Genetic and gender differences	Veronika Müller PhD, Attila Szabó PhD	Semmelweis University 1st Department of Pediatrics	Budapest	NKTH	zero
23	1997-1999	G7	Detection of the glucocorticoid receptor in renal transplant patients	Berki Tímea PhD	Institute of Immunology and Biotechnology	Pécs	ETT	1.200.000 FT

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_TOWN	FUNDED BY	LEVEL OF FUNDING
24	2003-2005	G7	The role of cytotoxic T-lymphocytes and FAS mediated apoptosis in kidney graft rejection and lupus nephritis	Péter Hamar PhD	Semmelweis University Department of Pathophysiology	Budapest	NKTH	zero
25	2003-2005	I9	Comparison of Health Related Quality of Life and Prevalence of Sleep Disorders in Patients on Maintenance Hemodialysis and after Kidney Transplantation	Istvan Mucsi PhD	Semmelweis University 1st Department of Medicine	Budapest	zero	zero
26	-2005	J10	Optimisation of typing policies for European MArrow DOnor Registries: socio-economic evaluation of molecular techniques and recruitment strategies	Zsuzsa Szántó, Imre Szebik	Semmelweis University Department of Behaviour Sciences	Budapest	EU FP4	zero
27	2001-2003	K11	Transplant Information Portal; further development of the WEB based transplant patient dossier and nationwide implementation of the system	Ottó Árkossy	Fresenius Dialysis Center	Budapest	NKTH	zero
28	2004-2006	K11	Mouse cloning from somatic and embryonic stem cells: The effect of the origin and treatment of donor cells on the genetic reprogramming	Edit Deák	St. Istvan University of Veterinary Medicine		publicly	zero

ITALIAN PROJECTS:

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_WWW	FUNDED BY	LEVEL OF FUNDING
1	2002-2004	A1	Donation and transplantation of organs in elderly people: epidemiology and clinical outcomes	Alessandro Nanni Costa	Italian National Institute of Health – Italian National Transplant Centre	www.ministerosalute.it/trapianti	Ministry of Health	441.000 €
2	2002-2004	A1	Innovating strategies for liver transplantation: expansion of cadaveric adult and paediatric donor pool	Umberto Valente	Liguria Regional Administrative District S.Martino, Genova	http://www2.hsanmartino.it/	Ministry of Health	294.000 €
3	2003-2005	A1	Study on long-term survival factors in pancreatic islet transplantation	Fabrizio Barbetti	Ospedale Pediatrico Bambino Gesù, Rome	http://www.ospedalebambinogesu.it	Ministry of Health	239.100 €
4	2002-2004	A1	Assessment of impact and control strategies of infections in patients undergoing organ transplantation	Diego Serraino	Institute for Infectious Disease "L.Spallanzani", Rome	http://www.inmi.it/	Ministry of Health	421.400 €
5	2005-2007	A1	Evaluation, selection and use of marginal donors for kidney transplantation	Paolo Rigotti	Veneto Regional Administrative District	http://www.sanita.padova.it/	Ministry of Health	175.500 €
6	2005-2007	B2	New approaches for inducing tolerance to transplantation of haematopoietic stem cells	Maria Grazia Roncarolo	Fondazione Centro san Raffaele, Milan	http://www.fondazioneosanraffaele.it/	Ministry of Health	292.600 €
7	2002-2004	B2	Use of bone marrow stem cells in inducing tolerance to organ and tissue transplantation	Giulio Masotti	Toscana Regional Administrative District, florence Policlinico	www.ao-careggi.toscana.it	Ministry of Health	294.000 €

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_WWW	FUNDED BY	LEVEL OF FUNDING
8	2002-2004	B2	Experimental models of cell and drug therapy for induction of tolerance to alloantigens	Andrea Salvanese	Policlinico San Matteo, Pavia	http://www.sanmatteo.org/	Ministry of Health	196.000 €
9	2001-2003	C3	Damage from ischemia/reperfusion in transplantation: typing, relation with rejection and preclinical therapy	Anna Catania	Ospedale Maggiore, Milan	http://www.policlinico.mi.it/	Ministry of Health	175.595 €
10	2004-2006	C3	Haepatic preconditioning: biomolecular mechanisms for inducing tolerance to ischemia/reperfusion damage and clinical use in interventions of liver resection and transplantation	Rita Carini	"Amedeo Avogadro" University of West Piedmont, Vercelli	http://www.unipmn.it/	Ministry of University and Research	134.000 €
11	2002-2004	C3	Radiological interventions in treatment of ischemia damage of biliary duct in liver orthotopic transplantation	Aldo Severini	Istituto Nazionale Tumori, Milan	www.istitutotumori.mi.it	Ministry of Health	98.000 €
12	2001-2003	C3	Molecular mechanisms of protection of steatotic liver undergoing ischemia-reperfusion	Giuseppe Poli	Turin University, Turin	http://www.molinette.piemonte.it/	Ministry of University and Research	234.471 €
13	2002-2004	D4	Alternatives to heart transplantation in paediatric age: cell, myocyte and endothelium transplantation, ventricular reshaping	Roberto di Donato	Ospedale Pediatrico Bambino Gesù, Roma	http://www.ospedalebambinog.esu.it	Ministry of Health	294.000 €
14	2002-2004	D4	Bioartificial liver with human heapatocytes and MARS in fulminant acute haepatitis: comparison between methodologies vs standard therapy	Alessandro Nanni Costa	Emilia Romagna Regional Administrative District	www.ministerosalute.it/trapianti	Ministry of Health	294.000 €

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_WWW	FUNDED BY	LEVEL OF FUNDING
15	2002-2004	D4	Selective expansion of human in-vivo haepatocytes in immunocompetent host: towards a more efficient bioartificial live	Paolo Pani	Sardinia Regional Administrative District, Policlinico di Cagliari	http://pacs.unica.it/	Ministry of University and Research	107.000 €
16	2002-2004	E5	Innovating and experimental models for anti-tumour cell therapy after transplantation	Rita Maccario	Policlinico San Matteo, Pavia	http://www.sanmatteo.org/	Ministry of Health	196.000 €
17	2000-2002	E5	New strategies for prevention and treatment of complications in recipients of organ transplantation	Maurizio Cotrufo	Campania Regional Administrative District	www.ospedalemonaldi.it	Ministry of Health	160.101 €
18	2000-2002	E5	Multiway treatment of haepatocarcinoma on cirrhosis in candidates to liver transplantation	Raniero Fassati	Ospedale Maggiore, Milan	http://www.policlinico.mi.it/	Ministry of Health	137.278 €
19	2004-2006	E5	Post transplant tumours: new biological parameters and their therapeutical implications	Giuseppe Torelli	"Modena and Reggio Emilia" University, Modena	http://www.unimo.it/	Ministry of University and Research	276.000 €
20	2005-2007	F6	Predictive risk factors in loss of transplanted kidney for relapse of IgA deposit nephritis	Rosanna Coppo	Piedmont Regional Administrative District	http://www.oirmsantanna.piemonte.it/web/sanna/index.asp	Ministry of Health	146.300 €
21	2000-2002	F6	New protocols for prevention and treatment of acute and cronic rejection in chest organ transplantation	Mario Viganò	Policlinico San Matteo, Pavia	http://www.sanmatteo.org/	Ministry of Health	222.076 €
22	2005-2007	F6	Research of precocious prognostic indicators of chronic nephropathy in kidney allotransplantation	Licinio Contu	Sardinia Regional Administrative District, Policlinico di Cagliari	http://pacs.unica.it/	Ministry of Health	165.600 €

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_WWW	FUNDED BY	LEVEL OF FUNDING
23	2002-2004	F6	Role of anti-inflammatory and anti-thrombotic agents on prevention of acute vascular rejection in xenotransplantation	Paolo Rigotti	Veneto Regional Administrative District, Padova University	http://www.trapiantirenepancreas.com	Ministry of Health	392.000 €
24	2005-2007	G7	Post-allotransplantation adaptive immunotherapy with allodepleted cytotoxic T-lymphocytes	Massimo Martelli	Umbria Regional Administrative District, Università di Perugia	http://www.ospedale.perugia.it/	Ministry of Health	184.000 €
25	2003-2005	G7	Phenotype and function assessment of regulatory T cells in recipients of heart or lung transplantation. Possible correlation between the pattern of such cell subpopulation and the kind of adopted immunosuppressive treatment	Mario Viganò	Mario Viganò, Pavia University, Pavia	http://www.sanmatteo.org/	Ministry of University and Research	135.000 €
26	2002-2004	H8	New evaluation methodologies of donors and recipients for improving quality of transplants	Giuseppe Paolo Segoloni	Piedmont Regional Administrative District	http://www.molinette.piemonte.it/	Ministry of Health	343.000 €
27	2003-2005	H8	Safety in organ and tissue	Alessandro Nanni Costa	Italian National Institute of Health – Italian National Transplant Centre	www.ministerosalute.it/trapianti	COFUNDING – Ministry of Health – Italian National Institute of Health – Novartis Farma SpA	344.400 €

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_WWW	FUNDED BY	LEVEL OF FUNDING
28	2002-2004	J10	Dialysis, transplant and donation. Clinical and ethical problems: un programme of information and training, from higher school to medicine and surgery department	Alessandro Tizzani	Turin University	http://www.molinette.piemonte.it/	Ministry of University and Research	32.000 €
29	2001-2003	K11	Effects of islet transplantation on recurrence of diabetic nephropathy. Study of etiopatogenetic mechanisms	Antonio Secchi	Fondazione Centro S.Raffaele, Milan	http://www.fondazioneanraffa.ele.it/	Ministry of Health	201.418 €
30	2002-2004	K11	Identification of pre-diabetic pancreas: consequences for pancreas transplantation and etiopathogenesis of type 1 diabetes	Gianfranco Bottazzo	Ospedale Pediatrico Bambino Gesù, Roma	http://www.ospedalebambinogesu.it	Ministry of Health	294.000 €
31	2002-2004	K11	Influence of surgical techniques and immunological, metabolic and genetic factors on functioning of pancreas transplantation	Franco Mosca	Pisa University, Pisa	http://www.unipi.it	Ministry of University and Research	113.000 €
32	2000-2002	K11	Implementation of an online database for management of waiting lists and for setting up a transplant registry	Paolo Schena	Puglia Regional Administrative District ISBEM Istituto scientifico biomedico euromediterraneo	http://isbem.it/	Ministry of Health	222.076 €
33	2004-2006	K11	Replacement of betacellular function through islet transplantation: clinical impact and mechanistic studies	Antonio Secchi	"Vita Salute S.Raffaele" University, Milan	http://www.unihsr.it/	Ministry of University and Research	408.000 €
34	2002-2004	K11	Strategies for improving take and long-term survival of islet transplantation	Emanuele Bosi	Fondazione Centro San Raffaele, Milan	http://www.fondazioneanraffa.ele.it/	Ministry of Health	294.000 €
35	2005-2007	K11	Haematopoietic and mesenchymal stem cells for substitutive, reparative and regenerative cell therapy	Franco Locatelli	Poclinico San Matteo, Pavia	http://www.sanmatteo.org/	Ministry of Health	285.200 €

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_INST_NAME	P_WWW	FUNDED BY	LEVEL OF FUNDING
36	2002-2004	K11	Transplantation of pancreatic islets in diabetic patients affected by type 1 diabetes	Antonio Secchi	"Vita Salute S.Raffaele" University, Milan	zero	Ministry of University and Research	482.000 €

PORTUGUESE PROJECTS:

NO	CAT.	PROJECT TITLE / ENGLISH	P_INST_NAME	REMARKS	FUNDED BY
1	B2	Effect of tolerogenic antibodies on the generation of regulatory T cells and immunological tolerance	Instituto Gulbenkian de Ciência	zero	Foundation for Science and Technology
2	B2	Heme Oxygenase-1 is Essential for and Promotes Tolerance to Transplanted Organs	Instituto Gulbenkian de Ciência	zero	Foundation for Science and Technology
3	C3	An open, prospective, randomized study on the effect of a tracolimus containing perfusion solution on the perfusion-ischemia lesions on transplanted livers	Hospital Geral de Santo António	zero	Industry
4	C3	Assessing the renal dopaminergic activity in patients undergoing kidney transplantation	Hospital de S. João	zero	Industry
5	C3	Evaluation of ischemic/reperfusion damage in liver transplantation by genetic analysis of potentially involved genes	Histocompatibility Center of South	zero	Industry
6	C3	Induction of protective responses in the vascular endothelium of transplanted organs	Instituto Gulbenkian de Ciência	zero	Foundation for Science and Technology
7	F6	Evaluation of early rejection markers in kidney transplantation	Histocompatibility Center of South	zero	Ministry of Health
8	F6	P21 protein as a monitoring tool in monitoring liver rejection	Hospital Geral de Santo António	zero	Self funded
9	F6	Study of infiltrating cells obtained by FNAB after renal transplantation.	Hospital de S. João	zero	Industry
10	G7	A double-blind, randomized study on the renal protection effects of LOSARTAN	Hospital Geral de Santo António	Closed	Industry
11	G7	A multicentric, open prospective randomized study comparing progressive withdrawal of steroids with Myfortic TM(ERL080) versus Neoral R plus standard steroid regime on the prevention of acute rejection episodes in first time renal transplant patients	Hospital Geral de Santo António	Closed	Industry

NO	CAT.	PROJECT TITLE / ENGLISH	P_INST_NAME	REMARKS	FUNDED BY
12	G7	A retrospective follow up Study to evaluate the status of subjects that discontinued participation in a qualifying Amgen sponsored AMG073 study duo to Kidney transplantation	Hospital Geral de Santo António	zero	Self funded
13	G7	An open randomized study comparing mycophenolate mofetil versus sequential BASILIXIMAD MFF and low dose tacrolimus in elderly kidney transplant patients	Hospital Geral de Santo António	Closed	Industry
14	G7	An open-randomized study on the switching from calcineurin inhibitors to SIROLIMUS in kidney transplant recipients	Hospital Geral de Santo António	Closed	Industry
15	G7	Multinational Observation Study Transplantation on the use of Neoral®	Hospital Geral de Santo António	Closed	Industry
16	G7	Production of anti-HLA and cytotoxic antibodies post renal-transplant	Hospital de S. João	zero	Industry
17	G7	Safety of SIROLIMUS on long-term use in solid organ transplant recipients	Hospital Geral de Santo António	Closed	Industry
18	G7	The Immune Response to Allografts: Role of Anti-inflammatory Cytokines.	University of Minho – Medicine	Closed	Foundation for Science and Technology
19	K11	HLA typing and cornea transplantation	Histocompatibility Center of South	zero	Self funded
20	K11	Prevalence of Fabry's disease among patients transplanted at HGSA	Hospital Geral de Santo António	zero	Industry
21	K11	RT PCR CMV viral load monitoring in bone marrow transplantation	Histocompatibility Center of South	zero	Ministry of Health

SPANISH PROJECTS:

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
1	A1	Factors associated to the viability of the solid organs, survival and quality of life	Juan Canalejo	Ministry of Health	Partial
2	A1	Design, development and maintenance of a database and registries	Marqués de Valdecilla	Ministry of Health	Partial
3	A1	Prospective study of the Quality of Life in kidney, liver, lung and heart transplanted patients	Marqués de Valdecilla	Ministry of Health	Partial
4	A1	Quantification of the esteatosis of the liver graft and its paper in the primary function after the transplant	Marqués de Valdecilla	Ministry of Health	Partial
5	A1	Parameters of the donor - survival of the graft - patient renal	de Cruces	Ministry of Health	Partial
6	A1	Utility of the determination of PCR for HIV in real time like method of sifting of potential donors of organs	Valle de Hebrón	Ministry of Health	Partial
7	A1	Utility of the procalcitonin like diagnosis marker differential between inflammatory sepsis and other processes in the patients with encephalic death or receivers of organs	Valle de Hebrón	Ministry of Health	Partial
8	A1	Analysis of factors related to the donor that can influence in the viability short and long term of the transplanted organs	La Fé	Ministry of Health	Partial
9	A1	Multivariate analysis of factors related to the viability of the graft	Virgen de la Arrixaca	Ministry of Health	Partial
10	A1	MANAGEMENT OF THE WAITING LIST OF MULTICENTRE LIVER TRANSPLANT PROJECT	Reina Sofía	Ministry of Health	Partial
11	A1	Study of the quality of the organs and tissues destined to transplant: evaluation of indicators of function of the graft in the phase "pre-extraction" and its correlation with the primary dysfunction of the graft	Hospital Virgen del Rocío	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
12	A1	Study epidemiologist of demographic factors, indices of risk and precocious indicators of cerebral the circulatory and metabolic phenomena that accompany the encephalic death	Hospital Virgen del Rocío	Ministry of Health	Partial
13	A1	New model of evaluation of the multiorganic donors, from the optics of the liver graft	Hospital Virgen del Rocío	Ministry of Health	Partial
14	A1	Morbimortality by tumors after the renal transplant: Necessity of a Spanish Registry and preventive guides of performance or precocious diagnosis	Clínica Universitaria de Navarra	Ministry of Health	Partial
15	A1	Non Heart beating donor	Clínico San Carlos	Ministry of Health	Partial
16	A1	Study of the rates of donation and the factors associate	Organización Nacional de Trasplantes	Ministry of Health	Partial
17	A1	Factors associated to the viability of the organs and the survival of the graft and the transplanted patient	Organización Nacional de Trasplantes	Ministry of Health	Partial
18	B2	Study of the effect of compatibility HLA and the polymorphism of the citoquines in the appearance of reject and the survival of the pulmonary graft. Utility prognosis of the microquimerism in the lungTransplant	Juan Canalejo	Ministry of Health	Partial
19	B2	Alorreactivity in kidney transplant: Antibodies anti-HLA post-transplant	Marqués de Valdecilla	Ministry of Health	Partial
20	B2	Murino experimental model of alotrasplant and tolerance: regulating cells and apoptosis	Marqués de Valdecilla	Ministry of Health	Partial
21	B2	Genomic Polymorphisms: relation between polymorphisms in the genotype of citoquines with receivers' liver and renal transplant and influences in the evolution of the transplant	de Cruces	Ministry of Health	Partial
22	B2	Relation between polymorphisms in the genotype of citoquines in renal and liver transplant	de Cruces	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
23	B2	Polymorphisms of citocine, quimiocines and their receivers	Valle de Hebrón	Ministry of Health	Partial
24	B2	Tolerance to liver alograft	Valle de Hebrón	Ministry of Health	Partial
25	B2	Immature dendritic cells in combination with negative signaling of lymphocyte T and blockade of the coestimulation and migration to prevent the chronic rejection	Virgen de la Arrixaca	Ministry of Health	Partial
26	B2	Study of the polymorphism of citoquinas, the coestimulators molecul evolution and the content in perforines like factors conditioners for the rupture of tolerance of long term	Virgen de la Arrixaca	Ministry of Health	Partial
27	B2	Blockade of the signal of the coestimulator CD40/CD40L with human monoclonal antibodies of isotype IgG1 and IgG2 for the development of strategies that allow the prevention of the rejection, reversion of the immunological rejection and/or the induction o	Virgen de la Arrixaca	Ministry of Health	Partial
28	B2	Study of cellular and molecular determinants in rejection postrasplant chronic/tolerance	Reina Sofía	Ministry of Health	Partial
29	B2	Levels of molecules hla-g and their receivers in the transplant of solid organs	Reina Sofía	Ministry of Health	Partial
30	B2	Study of the specificity of the antibodies anti HLA in the kidney transplant	Reina Sofía	Ministry of Health	Partial
31	B2	Alogenic Clinical consequences of the alogenic recognition of the protein glutation S-Transferasa T1 (GSTT1) in the liver graft	Hospital Virgen del Rocío	Ministry of Health	Partial
32	B2	Definition of smaller systems of histocompatibility by means of the characterization of subcell antigens. Its implication in the clinical evolution of the transplants	Hospital Virgen del Rocío	Ministry of Health	Partial
33	B2	Aloreognition	Puerta de Hierro	Ministry of Health	Partial
34	B2	Valuation of the contribution of the adult cells mother to regeneration cardiac	Clínica Universitaria de Navarra	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
35	B2	"Genotipification by means of PCR in real time"	Hospital German Trias i Pujol	Ministry of Health	Partial
36	B2	"Polymorphisms of citocine, quimiocines and their receivers"	Hospital German Trias i Pujol	Ministry of Health	Partial
37	B2	Presentation of antigen by epithelial aloreactives cell cells T	Hospital German Trias i Pujol	Ministry of Health	Partial
38	B2	Hematopoyétic reconstruction, quimerismo and tolerance	Hospital German Trias i Pujol	Ministry of Health	Partial
39	B2	Influences of genetics polymorphisms in the system of the haemostasis on the rejection of kidney transplant	Clínico Tenerife	Ministry of Health	Partial
40	B2	STUDY OF CONTRIBUTION MIC To And MIC B	Central de Asturias	Ministry of Health	Partial
41	C3	Recirculation normothermic in an experimental model	Marqués de Valdecilla	Ministry of Health	Partial
42	C3	Use of the machine of renal perfusion to evaluate the kidneys with elevated risk of low viability, to predict its functionalism pre-transplants	Clinic Barcelona	Ministry of Health	Partial
43	C3	Mechanisms of prevention of the liver injury by ischemia-reperfusion	Clinic Barcelona	Ministry of Health	Partial
44	C3	Genic therapy with human DNA of the factor of growth of the hepatocytes (hHGF) in the injury of ischemia reperfusion and the chronic kidney disease of the transplant (NCT) in experimental renal alotransplant	Hospital de Bellvitge	Ministry of Health	Partial
45	C3	Study of the injury of ischemia reperfusion in the human and pig liver transplant. Valuation of the administration of E1 Prostaglandin by via vestibule during the phase of revascularization of the liver graft	Valle de Hebrón	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
46	C3	Pulmonary preservation and cellular death: necrosis and apoptosis	La Fé	Ministry of Health	Partial
47	C3	Study of oxidative stress in the liver patient transplanted in relation to the solution of preservation of organs used: Wisconsin vs Celsior. Its influence in the initial function of the posttransplant graft	Regional Carlos Haya	Ministry of Health	Partial
48	C3	Paper of the regulation of inos IN the apoptosis induction and necrosis by D-Galactosamin and their protection by pge1 in a primary culture of hepatocytes	Reina Sofía	Ministry of Health	Partial
49	C3	Paper of the regulation of stress oxidative in the protection by pge1 of the apoptosis and necrosis induced by d-galactosamine in a primary culture of hepatocytes	Reina Sofía	Ministry of Health	Partial
50	C3	Prevention of the early dysfunction of the suboptimal graft with antithrombin III in a model of experimental liver transplant	Reina Sofía	Ministry of Health	Partial
51	C3	Study of the sistolic and diastolic function of the heart submissive criopreservation to temperature subcero	Hospital Virgen del Rocío	Ministry of Health	Partial
52	C3	Antirust multiorganic failure and modulation with nonenzymatic in liver transplant	Virgen de las Nieves	Ministry of Health	Partial
53	C3	Apoptosis, slowed down function of the graft and modulation with anti-calcineurinic in kidney transplant	Virgen de las Nieves	Ministry of Health	Partial
54	C3	Molecular Biology of the kidney during ischemia fries and warms up	Clínico San Carlos	Ministry of Health	Partial
55	D4	Paper of the antibodies anti-daf-human in the acute vascular reject of xenografts transgenic grafts from pigs for hDAF	Juan Canalejo	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
56	D4	Development of an experimental model of xenotrasplant pig-human in the mouse	Marqués de Valdecilla	Ministry of Health	Partial
57	D4	Study of the Capacity of the cells Mesenquimal of bone marrow to induce tolerance, by themselves or after differentiation, in a alogenic and xenogenic model	Clinic Barcelona	Ministry of Health	Partial
58	D4	Experimental orthotropic substitution of the artificial heart by another electrical one	Hospital de Bellvitge	Ministry of Health	Partial
59	D4	Use of the oxigenator of membrane in patients with primary 1-Fallo of the graft. Refractory pulmonary 2-Hipertensio'n to pulmonary vasodilators	La Fé	Ministry of Health	Partial
60	D4	Optimization of the metabolic and functional state of the grafts	La Fé	Ministry of Health	Partial
61	D4	XENOTRASPLANT	Virgen de la Arrixaca	Ministry of Health	Partial
62	D4	Pancreas islet transplants	Regional Carlos Haya	Ministry of Health	Partial
63	D4	Bioartificial Liver	Puerta de Hierro	Ministry of Health	Partial
64	D4	Living liver transplants	12 de Octubre	Ministry of Health	Partial
65	D4	Islotes criopreservation	Central de Asturias	Ministry of Health	Partial
66	E5	Monitories of the acute rejection based on combined strategy ecocardiography-biopsy	Marqués de Valdecilla	Ministry of Health	Partial
67	E5	Cardiovascular complications of kidneyl transplant	de Cruces	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
68	E5	Evaluation of the quantitative of the cardio-respiratory arrest and in real time of CMV in the precocious diagnosis and answer to the treatment of the CMVH disease in transplanted population of solid organ	Clinic Barcelona	Ministry of Health	Partial
69	E5	Prevalence of antibodies in front of the antigen of Core of the virus of hepatitis B (HBcAC) in the donors antigen of surface (HBsAg) negative and risk of transmission of the virus of the B hepatitis (VHB) to receivers of liver, kidney, pancreas	Clinic Barcelona	Ministry of Health	Partial
70	E5	Genetic evolution of the virus of the C hepatitis (VHC) in patient's submissive ortotopic transplant of liver: relation with the gravity of the relapse of the infection and with the mechanisms of resistance to the antiviral treatment.	Clinic Barcelona	Ministry of Health	Partial
71	E5	Glomerulonefritis by VHC. Paper of the quasispecies of the VHC in its development	Clinic Barcelona	Ministry of Health	Partial
72	E5	Study and analysis of the viral complications and their relation with the tumors in patients with cardiac transplant	La Fé	Ministry of Health	Partial
73	E5	Coreplication de Herpes virus linfotrophics in transplantation of solid organs. Effect on cells NK	Reina Sofia	Ministry of Health	Partial
74	E5	Osseo metabolism in transplanted patients of lung	Reina Sofia	Ministry of Health	Partial
75	E5	Predictive model of the risk of pulmonary bacterial infection in lung transplant	Reina Sofia	Ministry of Health	Partial
76	E5	Study of the glucidic metabolism in kidney transplanted patients: relation with hepatitis C	Hospital Virgen del Rocío	Ministry of Health	Partial
77	E5	Neoplasias of novo	Puerta de Hierro	Ministry of Health	Partial
78	E5	Factors of cardiovascular risk in liver, lung and heart transplants	Puerta de Hierro	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
79	E5	The pulmonary hypertension in the insufficiency cardiac outpost and its implications in the transplant cardiac	12 de Octubre	Ministry of Health	Partial
80	E5	Cardiovascular complications and evolution of the cardiovascular risk post-transplant	Clínica Universitaria de Navarra	Ministry of Health	Partial
81	E5	Cardiovascular complications of the Renal transplant	Hospital German Trias i Pujol	Ministry of Health	Partial
82	E5	Benchmark of antigenemic of citomegalovirus with the PCR in Renal transplant	de la Santa Creu y Sant Pau-Fundación Puigvert	Ministry of Health	Partial
83	E5	Cardiovascular investigation in Renal transplant: cardiovascular factors of risk and events in the kidney transplanted patients	de la Santa Creu y Sant Pau-Fundación Puigvert	Ministry of Health	Partial
84	E5	Acute and chronic rejection of kidney transplant	Clínico Tenerife	Ministry of Health	Partial
85	E5	Infection by herpes human virus	Central de Asturias	Ministry of Health	Partial
86	F6	Evolution and progression of the chronic kidney disease	Juan Canalejo	Ministry of Health	Partial
87	F6	Inmunological mechanisms and cell chronic kidney disease	Marqués de Valdecilla	Ministry of Health	Partial
88	F6	Incidence, etiology and evolution of the ventricular malfunction after the cardiac transplant	Marqués de Valdecilla	Ministry of Health	Partial
89	F6	Utility of the ultrasonography in the chronic kidney disease	Marqués de Valdecilla	Ministry of Health	Partial
90	F6	Effect of the modulation of the angiogenesis in the chronic vasculopathy of an alograft	Clinic Barcelona	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
91	F6	Utility of the study of the endotelial function by means of echo-Doppler of the humeral artery to detect the coronary atherosclerotic disease in the transplanted patient	Clinic Barcelona	Ministry of Health	Partial
92	F6	Progression of the fibrosis in the relapse of hepatitis C post-transplants: effect of the antagonists of angiotensin-II	Clinic Barcelona	Ministry of Health	Partial
93	F6	Genomic study of and the proteomic one in the chronic kidney disease of the transplant	Clinic Barcelona	Ministry of Health	Partial
94	F6	Clinical and experimental study of the mechanisms of fibrogenesis in etiopatogenic of the chronic kidney disease of the renal graft	Clinic Barcelona	Ministry of Health	Partial
95	F6	Initial endotelial dysfunction like predicting of the appearance of the coronary vasculopathy during the pursuit in patients submissive Cardiac transplant	Hospital de Bellvitge	Ministry of Health	Partial
96	F6	Genic expression in biopsies of protocol to characterize the chronic kidney diseases of alograft	Hospital de Bellvitge	Ministry of Health	Partial
97	F6	Study of infectious, biochemical and clinical factors that can be related to the delayed failure of the graft	La Fé	Ministry of Health	Partial
98	F6	Clinical-pathological study of the tubulointerstitial nephropathy by polioma virus type BK in transplanted kidney patients	La Fé	Ministry of Health	Partial
99	F6	Study of the viral recidive of hepatitis C in liver transplanted by means of genotype analysis and viral load	Virgen de la Arrixaca	Ministry of Health	Partial
100	F6	Paper of the humoral immunity in the chronic nephropathy of the graft	Regional Carlos Haya	Ministry of Health	Partial
101	F6	Effect of inhibitors of the serin-proteases (c1 inhibitor and antitrombin-III) in the development of obliterant bronchiolitis in a model of heterotópico transplant of aereus via in a mouse	Reina Sofia	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
102	F6	Recidive VHC in liver transplant	Puerta de Hierro	Ministry of Health	Partial
103	F6	The miocardic fibrosis in the transplanted heart. Utility of the biochemical determination of peptides derived from the synthesis and degradation of the collagen to fibrilar in the quantification of the fibrosis. Implications clinical-hemodinamic	12 de Octubre	Ministry of Health	Partial
104	F6	Evolution of the quasispecies of the virus of hepatitis C in the positive receivers HCV of a renal transplant that receive a kidney of a positive VHC.donor Relation with the clinical-pathological evolution and the development of glomerunonephitys	12 de Octubre	Ministry of Health	Partial
105	F6	Pathology of the chronic rejection	Clínica Universitaria de Navarra	Ministry of Health	Partial
106	F6	Recidive of hepatitis C Post-Transplant: influence of metabolic factors in the severity of the recidive	Clínica Universitaria de Navarra	Ministry of Health	Partial
107	F6	Chronic Nephropathy of the transplant	Hospital German Trias i Pujol	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
108	F6	Chronic Nephropathy of the transplant	de la Santa Creu y Sant Pau-Fundación Puigvert	Ministry of Health	Partial
109	F6	Paper of the epithelial cells of human tubulo proximal in the acute rejection of renal graft	Clínico San Carlos	Ministry of Health	Partial
110	G7	Suppression of treatment corticoid after cardiac transplant	Marqués de Valdecilla	Ministry of Health	Partial
111	G7	Use of sirolimus as inmunosupresor treatment in patients' submissive cardiac transplant and secondary renal disfunction to toxicity by cyclosporine	Marqués de Valdecilla	Ministry of Health	Partial
112	G7	Generation of metabolites oxygen reactive in patients with renal transplant	de Cruces	Ministry of Health	Partial
113	G7	Effectiveness and security of the inmunosupresion with kidney transplanted patients deal with inhibitors of the calcineurine and Sirolimus: analyses of intralymphocytes and of membrane of receptors by flow citométric.	Clinic Barcelona	Ministry of Health	Partial
114	G7	Analysis of the mechanisms of nefrotoxicity induced by the association of anticalcineurinics and sirolimus: paper of the Glicoprotein P	Clinic Barcelona	Ministry of Health	Partial
115	G7	Endotelial Disfunction in the renal transplanted one. Paper of the inmunosupresor treatment and the oxidation of lipoproteins	Clinic Barcelona	Ministry of Health	Partial
116	G7	Transplanted Inmunosupresion and cardiovascular risk in liver transplants	Hospital de Bellvitge	Ministry of Health	Partial
117	G7	Monitories of the specific answer forehead to donor induced by means of a guideline of inmunosupresion based on thymoglobuline, sirolimus and mofetil micofenolato in receivers of a renal transplant	Hospital de Bellvitge	Ministry of Health	Partial
118	G7	Molecular mechanisms implied in the nefrotoxicity produced by the anticalcineurinics Cyclosporine A (CsA) and FK506 in proximal kidney tubule	Valle de Hebrón	Ministry of Health	Partial

NO	CAT.	PROJECT TITLE /ENGLISH	P_INST_NAME	FUNDED BY	LEVEL OF FUNDING
119	G7	Farmacocinético de micofenólico acid: relation between used dose, plasmatic levels and degree of renal function in kidney transplanted patients	Hospital Virgen del Rocío	Ministry of Health	Partial
120	G7	Identification of new morning calls metabolic of inmunosupresor fk506: implication of the toxicity associated to the posttrasplant therapy	Clínico Tenerife	Ministry of Health	Partial
121	G7	Treatment of induction with ac monoclonal and cyclosporin versus antibodies monoclonal micofenolat and low doses of anticalcineurínics	Clínico Tenerife	Ministry of Health	Partial
122	I9	Quality with the familiar relation, as predicting of morbidity and mortality in patients with cardiac insufficiency and cardiac transplants	Juan Canalejo	Ministry of Health	Partial
123	I9	Quality of life of the transplanted patients	de Cruces	Ministry of Health	Partial
124	I9	Costs of the donation of organs	Valle de Hebrón	Ministry of Health	Partial
125	I9	Study on the quality of life and hospitable dependency of the transplanted patient cardiac	La Fé	Ministry of Health	Partial
126	I9	Psychological intervention in transplanted patients	Hospital Virgen del Rocío	Ministry of Health	Partial
127	I9	EXERCICES AND QUALITY OF LIFE	Central de Asturias	Ministry of Health	Partial
128	I9	Study of quality of life in transplanted patients. Impact in the familiar structure and labor reintegration of the transplanted patient	Organización Nacional de Trasplantes	Ministry of Health	Partial

UNITED KINGDOM PROJECTS:

NO	ENT_DAT/ Beginn	CAT.	PROJECT TITLE /ENGLISH	NAME	P_EMAIL	FUNDED BY
1	December, 2002	C3	Remote ischaemic preconditioning (IPC) in patients undergoing liver surgery	Prof Brian R Davidson	b.davidson@rfc.ucl.ac.uk	The Royal Free Hampstead NHS Trust
2	August, 2006	C3	A single centre, randomised, controlled study of pre-transplant machine perfusion of heart-beating donor kidneys prior to renal transplantation	Mr Christopher Watson	cjew2@cam.ac.uk	Addenbrooke's Hospital - transplant research fund
3	January, 2006	C3	A multicentre randomised controlled study of cold Pulsatile Perfusion in Asystolic donor Renal Transplantation	Mr Christopher Watson	cjew2@cam.ac.uk	Novartis
4	2004	C3	Role of death receptor-3 in renal ischaemia-reperfusion injury.	Dr J Bradley	jab52@cam.ac	National Kidney Research Fund
5	January, 2002	G7	A Prospective Randomised Trial of the use of Cellcept to allow early Tacrolimus Withdrawal in Live Donor Kidney Transplantation	Prof M Nicholson	nicola.bodycote@uhl-tr.nhs.uk	University Hospitals of Leicester NHS Trust
6	August, 2005	G7	A single centre, randomised controlled, open label study of rituximab as induction therapy in kidney transplantation	Mr Christopher Watson	cjew2@cam.ac.uk	Addenbrooke's Hospital - transplant research fund
7	April, 2005	J10	STEPP: Study in Transplantation Empowering Patients and Practitioners	Dr James Medcalf	james.medcalf@uhl-tr.nhs.uk	National Kidney Research Fund/Astellas/ Roche/ Wyeth
8	October, 2004	J10, I9	Exploring the end of life decision making and hospital experiences of families who decided not to donate organs or tissues for transplant operations	Dr M Sque	m.r.sque@soton.ac.uk	UK Transplant
9	September, 2001	K11	A randomised controlled study of N-Acetylcysteine in liver transplantation	Dr Bimbi Fernando	bsfernando@totalise.co.uk	NHS
10	July, 2002	K11	Prospective randomised controlled study to evaluate the role of synbiotic cocktail 2000 before, during and after liver transplantation to increase resistance to infection	Prof Brian R Davidson	b.davidson@rfc.ucl.ac.uk	The Royal Free Hampstead NHS Trust

11	2003	K11	Renin-angiotensin blockers in transplantation (RABIT) - a randomised pilot study of an angiotensin II antagonist in patients with a functioning renal transplant.	Dr M Landray	martin.landray@ctsu.ox.ac.uk	National Kidney Research Fund
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