



# Science Report 2021



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Lead Scientist  
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## Preface: What Science Can Do

“What science can do” was the title of an address president Barack Obama gave at the annual meeting of the National Academy of Sciences on April 28, 2009 (published in *Issues in Science and Technology* 25, no. 4). His speech contained some remarkable thoughts that seem to be even more relevant today. One of Barack Obama’s most prominent statements was that “science is more essential for our prosperity, our security, our health, our environment, and our quality of life than it has ever been before”.

This seems to be obvious in the times of a global pandemic. The unprecedentedly fast discovery and development of efficacious vaccines literally saved millions of lives. But despite these impressive scientific achievements, there are still hundreds and thousands of people dying from COVID-infections all around the globe every day. In developed countries such as Germany, most deaths occur in people that refused to get vaccinated despite all the clear evidence for the vaccine’s efficacy to prevent serious complications. In fact, the public trust in science and research has been notoriously low in Germany with less than 50% of the general population expressing trust in science and research in 2019 (Bromme R, et al. *PLoS ONE* 2022; 17: e0262823). While this number rose to 73% during the pandemic, this still means that more than a quarter of the population does not have confidence in science – in times where the value of science is more obvious than ever.

This would imply that science can only do what most people accept. But there might also be a

different view on the value of science, and that is the viewpoint of patients, in particular patients suffering from chronic diseases like diabetes. They appreciate any scientific improvement that helps to ease their daily life as can be seen by the rapid pick-up of continuous glucose monitoring and closed loop devices whose performance has so much improved in the last years.

At Profil, we are proud of our contribution to the progress in diabetes therapy, as small as it might be. Vigorously testing new therapies and devices in clinical studies performed at highest quality standards and at ambitious timelines is our passion, and the positive feedback we get from our study participants with diabetes is a perseverative motivation to further improve our research and thereby eventually diabetes therapy. But even the best clinical study would be imperfect without being published. Barack Obama rightly pointed out that “so many of the challenges that science and technology will help us meet are global in character” – diabetes and obesity are a good example. So we “need to work with our friends around the world” – and this is only possible when sharing our findings through publications. The 29 publications with contributions of Profil scientists in 2021 covered a lot of different areas (e.g. incretins, glucagon, different insulins and combinations of insulin with other agents, continuous glucose monitoring, to only name a few). The interest of the scientific community in this research is best reflected at an impressive cumulative impact factor of > 245 – another motivation to carry on and improve! My sincere thanks go out to all the people that contributed to this success, from our scientists over the whole clinical staff to sponsors, collaborators and study participants who confide in our expertise and confidence.

I would like to conclude with another statement from President Obama’s address: “Science cannot supplant our ethics or our values, our principles or our faith. But science can inform those things and help put those values—these moral sentiments, that faith—can put those things to work—to feed a child or to heal the sick, to be good stewards of this Earth.” Indeed, this is what science can do – and at Profil, we will continue our small contribution to scientific improvements in 2022 and beyond.

# Content

|  |    |
|--|----|
| <b>Science Report 2021</b> .....                       | 1  |
| <b>Preface</b> .....                                   | 2  |
| <b>Content</b> .....                                   | 4  |
| <b>Metrics</b> .....                                   | 5  |
| <b>Scientific Publications</b> .....                   | 7  |
| Original Articles .....                                | 7  |
| Reviews .....  | 11 |
| Books/Letters/Comments .....                           | 12 |
| <b>Scientific Presentations</b> .....                  | 14 |
| Oral Presentations .....                               | 14 |
| Poster Presentations .....                             | 19 |
| <b>Advanced Training Courses</b> .....                 | 22 |
| Training for the Clinical Trial Recruitment Team ..... | 22 |
| Trainings Clinical Pharmacology .....                  | 22 |
| <b>Awards and Appointments</b> .....                   | 24 |
| <b>Granted Innovation Activities</b> .....             | 25 |
| <b>Scientific Communication</b> .....                  | 29 |
| Online Seminars .....                                  | 29 |
| Blogs .....  | 30 |
| Media Reports (Selection) .....                        | 32 |

## Metrics

| TABLE 1: TOTAL OUTPUT                    |            |                         |                    |
|--|------------|-------------------------|--------------------|
|  | Count      | $\Sigma$ Impact Factors | Mean Impact Factor |
| <b>Scientific Publications</b>           | <b>29</b>  | <b>249,56</b>           | <b>9,60</b>        |
| Original Articles                        | 16         | 140,46                  | 9,36               |
| Reviews                                  | 6          | 59,71                   | 9,95               |
| Books/Letters/Comment                    | 7          | 47,53                   | 11,88              |
| <b>Scientific Congress Presentations</b> | <b>36</b>  | n/a                     | n/a                |
| Orals                                    | 27         | n/a                     | n/a                |
| Poster                                   | 9          | n/a                     | n/a                |
| <b>Advanced Trainings</b>                | <b>9</b>   | n/a                     | n/a                |
| <b>Granted Research Consortia</b>        | <b>4</b>   | n/a                     | n/a                |
| <b>Scientific Communication</b>          | <b>26+</b> | n/a                     | n/a                |
| Online Seminars                          | 4          | n/a                     | n/a                |
| Blog Posts                               | 14         | n/a                     | n/a                |
| Media Appearance                         | 8+         | n/a                     | n/a                |

**TABLE 2: PROFIL SCIENTIST(S) FIRST/SENIOR AUTHOR**

|  | Count     | $\Sigma$ Impact Factors | Mean Impact Factor |
|--|-----------|-------------------------|--------------------|
| <b>Scientific Publications</b>           | <b>12</b> | <b>65,49</b>            | <b>7,28</b>        |
| Original Articles                        | 8         | 59,89                   | 7,49               |
| Reviews                                  | 1         | 5,60                    | 5,60               |
| Books/Letters/Comment                    | 3         | 0,00                    | 0,00               |
| <b>Scientific Congress Presentations</b> | <b>27</b> | n/a                     | n/a                |
| Orals                                    | 21        | n/a                     | n/a                |
| Poster                                   | 6         | n/a                     | n/a                |

**TABLE 3: PUBLISHED STUDIES (PARTLY) OPERATED BY PROFIL**

|  | Count     | $\Sigma$ Impact Factors | Mean Impact Factor |
|--|-----------|-------------------------|--------------------|
| <b>Scientific Publications</b>           | <b>13</b> | <b>111,88</b>           | <b>8,61</b>        |
| Original Articles                        | 13        | 111,88                  | <b>8,61</b>        |
| Reviews                                  | n/a       | n/a                     | n/a                |
| Letters/Comments                         | n/a       | n/a                     | n/a                |
| <b>Scientific Congress Presentations</b> | <b>29</b> | n/a                     | n/a                |
| Orals                                    | 20        | n/a                     | n/a                |
| Poster                                   | 9         | n/a                     | n/a                |

**TABLE 4: PUBLISHED STUDIES (PARTLY) OPERATED BY PROFIL  
+ PROFIL SCIENTIST(S) FIRST/SENIOR AUTHOR**

|  | Count     | $\Sigma$ Impact Factors | Mean Impact Factor |
|--|-----------|-------------------------|--------------------|
| <b>Scientific Publications</b>           | <b>8</b>  | <b>59,89</b>            | <b>7,49</b>        |
| Original Articles                        | 8         | 59,89                   | 7,49               |
| Reviews                                  | n/a       | n/a                     | n/a                |
| Letters/Comments                         | n/a       | n/a                     | n/a                |
| <b>Scientific Congress Presentations</b> | <b>21</b> | n/a                     | n/a                |
| Orals                                    | 15        | n/a                     | n/a                |
| Poster                                   | 6         | n/a                     | n/a                |

# Scientific Publications

## Original Articles

1. Bianzano, S., Heise, T., Jungnik, A., Schepers, C., Schölch, C., Gräfe-Mody, U. Safety, tolerability, pharmacokinetics and pharmacodynamics of single oral doses of BI 187004, an inhibitor of 11beta-hydroxysteroid dehydrogenase-1, in healthy male volunteers with overweight or obesity. Clin. Diabetes Endocrinol. 7(1):16  
**IF(2022): 1.858**
2. Flint, A., Andersen, G., Hockings, P., Johansson, L., Morsing, A., Sundby-Palle, M., Loomba, R., Vogl, T.J., Plum-Mörschel, L. Randomized clinical trial: Semaglutide versus placebo reduced liver steatosis but not liver stiffness in subjects with non-alcoholic fatty liver disease assessed by magnetic resonance imaging. **Aliment. Pharmacol. Ther.** 54(9):1150-1161, 2021  
**IF(2021): 8.171**
3. Leohr, J., Kazda, C., Liu, R., Reddy, S., Dellva, M.A., Matzopoulos, M., Loh, M.T., Hardy, T., Klein, O., Kapitza, C. Ultra rapid lispro (URLi) shows faster pharmacokinetics and reduces postprandial glucose excursions versus Humalog® in patients with type 2 diabetes mellitus in a randomized, controlled crossover meal test early-phase study. **Diabetes Obes. Metab.** 2021 Oct 04. doi:10.1111/dom.14561  
**IF(2021): 6.577**
4. Kazda, C., Leohr, J., Liu, R., Reddy, S., Dellva, M.A., Loh, M.T., Hardy, T., Plum-Mörschel, L. Ultra rapid lispro (URLi) shows accelerated pharmacokinetics and greater reduction in postprandial glucose versus Humalog® in patients with type 1 diabetes mellitus in a randomized, double-blind meal test early-phase study. **Diabetes Obes. Metab.** 2021 Sep 30. doi:10.1111/dom.14563. Online ahead of print.  
**IF(2021): 6.577**

5. Hövelmann, U., Raiter, Y., Chullikana, A., Liu, M., Donnelly, C., Lawrence, T., Sengupta, N., Cl, G., Ranganna, G., Barve, A.  
Pharmacokinetic and pharmacodynamic bioequivalence of biosimilar MYL-1601D with US and European insulin aspart in healthy volunteers: A randomized, double-blind, crossover, euglycaemic glucose clamp study.  
**Diabetes Obes. Metab.** 23(12):2670-2678, 2021  
**IF(2021): 6.577**
6. Quast, D.R., Nauck, M.A., Schenker, N., Menge, B.A., Kapitza, C., Meier, J.J.  
Macronutrient intake, appetite, food preferences and exocrine pancreas function after treatment with short- and long-acting GLP-1 receptor agonists in type 2 diabetes.  
**Diabetes Obes. Metab.** 23(10):2344-2353, 2021  
**IF(2021): 6.577**
7. Herbrand, T., Coester, H.V., Sansone, R., Fischer, A., Heiss, C., Heise, T., Kelm, M. DeVries, J.H.  
Improving the assessment of flow-mediated dilation through detection of peak time in healthy subjects and subjects with type 2 diabetes.  
**Angiology** 72(5):434-441, 2021  
**IF(2021): 3.619**
8. Bergougnan, L., Andersen, G., Plum-Mörschel, L., Evaristi, M.F., Poirier, B., Tardat, A., Ermer, M., Herbrand, T., Arrubla, J., Coester, H.V., Sansone, R., Heiss, C., Vitse, O., Hurbin, F., Boiron, R., Benain, X., Radzik, D., Janiak, P., Muslin, A.J., Hovsepian, L., Kirkesseli, S., Deutsch, P., Parkar, A.A.  
Endothelial-protective effects of a G-protein-biased sphingosine-1 phosphate receptor-1 agonist, SAR247799, in type-2 diabetes rats and a randomized placebo-controlled patient trial.  
**Br. J. Clin. Pharmacol.** 87(5):2303–2320, 2021  
**IF(2021): 4.335**
9. Pieber, T.R., Aronson, R., Hövelmann, U., Willard, J., Plum-Mörschel, L., Knudsen, K.M., Bandak, B., Tehranchi, R.  
Dasiglucagon: A next-generation glucagon analog for rapid and effective treatment of severe hypoglycemia results of phase 3 randomized double-blind clinical trial.  
**Diabetes Care** 44(6):1361-1367, 2021  
**IF(2021): 19.112**

10. Andersen, G., Meiffren, G., Famulla, S., Heise, T., Ranson, A., Seroussi, C., Eloy, R., Gaudier, M., Charvet, R., Chan, Y.P., Soula, O., DeVries, J.H.  
ADO09, a co-formulation of the amylin analogue pramlintide and the insulin analogue A21G, lowers postprandial blood glucose versus insulin lispro in type 1 diabetes.  
**Diabetes Obes. Metab.** 23(4):961–970, 2021  
**IF(2021): 6.577**
  
11. Kapitza, C., Nosek, L., Schmider, W., Teichert, L., Mukherjee, B., Nowotny, I.  
A single-dose euglycaemic clamp study in two cohorts to compare the exposure of SAR341402 (insulin aspart) Mix 70/30 with US- and European-approved versions of insulin aspart Mix 70/30 and SAR341402 rapid-acting solution in subjects with type 1 diabetes.  
**Diabetes Obes. Metab.** 23(3):674-681, 2021  
**IF(2021): 6.577**
  
12. Benesch, C., Kuhlenkötter, M., Nosek, L., Heise, T.  
New clamp-PID algorithm for automated glucose clamps improves clamp quality.  
**J. Diabetes Sci. Technol.** 16(2):408-414, 2021  
**IF(2021): 2.677**
  
13. Olafsdottir, A.F., Bolinder, J., Heise, T., Polonsky, W., Ekelund, M., Wijkman, M., Pivodic, A., Ahlén, E., Schwarcz, E., Nyström, T., Hellman, J., Hirsch, I.B., Lind, M.  
The majority of people with type 1 diabetes and multiple daily insulin injections benefit from using continuous glucose monitoring: An analysis based on the GOLD randomized trial (GOLD-5).  
**Diabetes Obes. Metab.** 23(2):619-630, 2021  
**IF(2021): 6.577**
  
14. Huang, J., Covic, M., Huth, C., Rommel, M., Adam, J., Zukunft, S., Prehn, C., Wang, L., Nano, J., Scheerer, M.F., Neschen, S., Kastenmüller, G., Gieger, C., Laxy, M., Schliess, F., Adamski, J., Suhre, K., de Angelis, M.H., Peters, A., Wang-Sattler, R.  
Validation of candidate phospholipid biomarkers of chronic kidney disease in hyperglycemic Individuals and their organ-specific exploration in leptin receptor-deficient db/db mouse.  
**Metabolites** 3;11(2):89, 2021  
**IF(2021): 4.754**

15. Eckstein, M.L., Farinha, J.B., McCarthy, O., West, D.J., Yardley, J.E., Bally, L., Zueger, T., Stettler, C., Boff, W., Reischak-Oliveira, A., Riddell, M.C., Zaharieva, D.P., Pieber, T.R., Müller, A., Birnbaumer, P., Aziz, F., Brugnara, L., Haahr, H., Zijlstra, E., Heise, T., Sourij, H., Roden, M., Hofmann, P., Bracken, R.M., Pesta, D., Moser, O.  
Differences in physiological responses to cardiopulmonary exercise testing in adults with and without type 1 diabetes: A pooled analysis.  
**Diabetes Care** 44:240-247, 2021  
**IF(2021): 19.112**
16. Lind, M., Ólafsdóttir, A.F., Hirsch, I.B., Bolinder, J., Dahlqvist, S., Pivodic, A., Hellman, J., Wijkman, M., Schwarcz, E., Albrektsson, H., Heise, T., Polonsky, W.  
Sustained intensive treatment and long-term effects on HbA1c reduction (SILVER Study) by CGM in people with type 1 diabetes treated with MDI.  
**Diabetes Care** 44:141-149, 2021  
**IF(2021): 19.112**

## Reviews

17. Heise, T.  
The future of insulin therapy.  
**Diabetes Res. Clin. Pract.** 175:108820, 2021  
**IF(2021): 5.602**
  
18. Shang, T., Zhang, J.Y., Bequette, B.W., Raymond, J.K., Coté, G., Sherr, J.L., Castle, J., Pickup, J., Pavlovic, Y., Espinoza, J., Messer, L.H., Heise, T., Mendez, C.E., Kim, S., Ginsberg, B.H., Masharani, U., Galindo, R.J., Klonoff, D.C.  
Diabetes Technology Meeting 2020  
**J. Diabetes Sci. Technol.** 15(4):916-960  
**IF(2021): 2.677**
  
19. Jones, A., Bardram, J.E., Bækgaard, P., Cramer-Petersen, C.L., Skinner, T., Vrangbæk, K., Starr, L., Nørgaard, K., Lind, N., Bechmann Christensen, M., Glümer, C., Wang-Sattler, R., Laxy, M., Brander, E., Heinemann L., Heise T., Schliess F., Ladewig, K., Kownatka, D.  
Integrated personalized diabetes management goes Europe: A multi-disciplinary approach to innovating type 2 diabetes care in Europe.  
**Prim. Care Diabetes** 15(2):360-364, 2021  
**IF(2021): 2.459**
  
20. Hulst, A.H., Polderman, J.A.W., Siegelaar, S.E., van Raalte, D.H., DeVries, J.H., Preckel, B., Hermanides, J.  
Preoperative considerations of new long-acting glucagon-like peptide-1 receptor agonists in diabetes mellitus.  
**Br. J. Anaesth.** 126(3):567-571, 2021  
**IF(2021): 9.166**
  
21. Steenblock, C., Schwarz, P.E.H., Ludwig, B., Linkermann, A., Zimmet, P., Kulebyakin, K., Tkachuk, V.A., Markov, A.G., Lehnert, H., de Angelis, M.H., Rietzsch, H., Rodionov, R.N., Khunti, K., Hopkins, D., Birkenfeld, A.L., Boehm, B., Holt, R.I.G., Skyler, J.S., DeVries, J.H., Renard, E., Eckel, R.H., Alberti, K.G.M.M., Geloneze, B., Chan, J.C., Mbanya, J.C., Onyegbutulem, H.C., Ramachandran, A., Basit, A., Hassanein, M., Bewick, G., Spinass, G.A., Beuschlein, F., Landgraf, R., Rubino, F., Mingrone, G., Bornstein, S.R.  
COVID-19 and metabolic disease: mechanisms and clinical management.  
**Lancet Diabetes Endocrinol.** 9(11):786-798, 2021  
**IF(2021): 32.069**

22. Bornstein S.R., Rubino F., Ludwig B., Rietzsch H., Schwarz P.E.H, Rodionov R.N., Khunti K., Hopkins D., Birkenfeld A.L., Boehm B., Amiel S., Holt R.I.G, Skyler J.S., DeVries J.H., Renard E., Eckel R.H., Zimmet P., Alberti K.G., Geloneze B., Chan J.C., Mbanya J.C., Onyegbutulem H.C., Ramachandran A., Basit A., Hassanein M., Spinass G.A., Beuschlein F., Mingrone G.  
Consequences of the COVID-19 pandemic for patients with metabolic diseases.  
**Nat. Metab.** 3(3):289-292, 2021  
**IF(2021): 7.740**

## Books/Letters/Comments

23. Holt, R.I.G., DeVries, J.H., Hess-Fischl, A., Hirsch, I.B., Kirkman, M.S., Klupa, T., Ludwig, B., Nørgaard, K., Pettus, J., Renard, E., Skyler, J.S., Snoek, F.J., Weinstock, R.S., Peters, A.L.  
The management of type 1 diabetes in adults. A consensus report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD).  
**Diabetologia** 64(12):2609-2652, 2021  
**IF(2021): 10.122**
24. Holt, R.I.G., DeVries, J.H., Hess-Fischl, A., Hirsch, I.B., Kirkman, M.S., Klupa, T., Ludwig, B., Nørgaard, K., Pettus, J., Renard, E., Skyler, J.S., Snoek, F.J., Weinstock, R.S., Peters, A.L.  
The management of type 1 diabetes in adults. A consensus report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD).  
**Diabetes Care** 44(11):2589-2625, 2021  
**IF(2021): 19.112**
25. Flint, A., Andersen, G., Hockings, P., Plum-Mörschel, L., Loomba, R.  
Editorial: Evolution of GLP-1 receptor agonists as pharmacotherapy for NASH beyond diabetes mellitus and obesity – authors' reply.  
**Aliment. Pharmacol. Ther.** 54(11-12):1498, 2021  
**IF(2021): 8.171**

26. Moser, O., Riddell, M.C., Eckstein, M.L., Adolfsson, P., Rabasa-Lhoret, R., van den Boom, L., Gillard, P., Nørgaard, K., Oliver, N.S., Zaharieva, D.P., Battelino, T., de Beaufort, C., Bergenstal, R.M., Buckingham, B., Cengiz, E., Deeb, A., Heise T., Heller, S., Kowalski, A.J., Leelarathna, L., Mathieu, C., Stettler, C., Tauschmann, M., Thabit, H., Wilmot, E.G., Sourij, H., Smart, C.E., Jacobs, P.G., Bracken, R.M., Mader, J.K.  
Glucose management for exercise using continuous glucose monitoring: should sex and prandial state be additional considerations? Reply to Yardley JE and Sigal RJ [letter].  
**Diabetologia** 64(4):935–938, 2021  
**IF(2021):10.122**
27. Schliess, F.  
Proving the effectiveness of digital health technologies,  
**Open Access Government** ISSN 2516-3817  
October 6, 2021  
**IF: -**
28. Schliess, F.  
What does the European Medical Devices Regulation 2017/745 (MDR) say about clinical trials?  
**Open Access Government** ISSN 2516-3817  
June 21, 2021  
**IF: -**
29. Schliess, F.  
On the fast-track to reimbursement: Germany unlocks business opportunities for digital health innovators.  
**Open Access Government**  
Special Health and Social Care Report  
January 10, 2021  
**IF: -**

## Scientific Presentations



### Oral Presentations

**RealWorld4Clinic EIT Health ELSI Board workshop (Part 2). Virtual, December 8, 2021**

30. RÜling, C.-C., Reineke, J.-P., Schliess, F.  
AI-powered health monitoring for clinical research

**3<sup>rd</sup> European Digital Week. Frankfurt/Main, Germany, November 1–5, 2021.**

31. Schliess, F.  
Moderation of the 2<sup>nd</sup> Frankfurt AI Forum Session “AI and healthcare”.

**Join Health (Health Cluster Portugal, EIT Health InnoStars). Virtual, November 2, 2021**

32. Schliess, F.  
Remote decentralized clinical trials: Towards more sustainability, resilience & external validity in pivotal clinical research?

**XXIII Congresso Nazionale Associazione Medici Diabetologi (AMD). Bologna, Italy, October 27–30, 2021**

33. Leohr, J., LaBell, E., Dellva, M.A., Tong, Z., Arrubla, J., Plum-Mörschel, L., Zijlstra, E., Fukuda, T., Hardy, T.  
Faster recovery from hyperglycemia with ultra rapid lispro (URLi) vs Humalog® in patients with type 1 diabetes (T1D) on continuous subcutaneous insulin infusion (CSII).

**Joint EIT Health Germany and EIT Health Scandinavia Symposium. Mannheim, Germany, October 19–20, 2021**

34. Schliess, F.  
Remote decentralized clinical trials: Towards more sustainability, resilience & external validity in pivotal clinical research?

**62<sup>nd</sup> National Congress of the Spanish Society of Endocrinology and Nutrition. Seville, Spain, October 13–15, 2021**

35. Leohr, J., LaBell, E., Dellva, M.A., Tong, Z., Arrubla, J., Plum-Mörschel, L., Zijlstra, E., Fukuda, T., Hardy, T.  
Faster recovery from hyperglycemia with ultra rapid lispro (URLi) vs Humalog® in patients with type 1 diabetes (T1D) on continuous subcutaneous insulin infusion (CSII).

**EIT Health Germany: Start-ups meet healthcare provider. Virtual, October 13, 2021**

36. Schliess, F.  
Clinical trialing digital health technologies.

**9<sup>th</sup> DZD Diabetes Research School “Healthcare research – integrated personalised diabetes management”. Virtual, October 7–14, 2021**

37. Schliess, F.  
Moderation of the satellite-event “iPDM-GO – a pan-European approach to science & innovation in diabetes care.
38. Heinemann, L.  
Structured feedback loops in diabetes care: from the conception to the proof-of-concept of an integrated personalised diabetes management (iPDM).
39. Schliess, F.  
iPDM Goes Europe (iPDM-GO): A pan-European collaboration initiative for implementation of iPDM in value-based healthcare.

**57<sup>th</sup> European Association for the Study of Diabetes (EASD) Annual Meeting. Virtual, September 29 – October 1, 2021**

40. Zijlstra, E., Heise, T., Ermer, M., Lu, J., Wilson, M., Plum-Mörschel, L.  
Proposed biosimilar insulin lispro (GL-LIS) shows pharmacokinetic (PK) and pharmacodynamic (PD) bioequivalence versus US-licensed and EU-authorized insulin lispro (LIS).  
**Diabetologia** 64(Suppl 1):SO35, 2021
41. Heise T., Plum-Mörschel L., Andersen G., Lu J, Wilson M., Zijlstra E.  
Proposed biosimilar insulin glargine (GL-GLA) shows pharmacokinetic (PK) and pharmacodynamic (PD) bioequivalence to US-licensed and EU-authorized insulin glargine.  
**Diabetologia** 64(Suppl 1):SO35, 2021
42. Plum-Mörschel, L., Uhrmacher, E., Zijlstra, E., Lu, J., Wilson, M., Barton, M., Heise T.  
Proposed biosimilar insulin aspart (GL-ASP) shows pharmacokinetic (PK) and pharmacodynamic (PD) bioequivalence to US-licensed and EU-authorized insulin aspart.  
**Diabetologia** 64(Suppl 1):SO35, 2021
43. Leohr, J., Dellva, M.A., LaBell, E., Arrubla, J., Plum-Mörschel, L., Zijlstra, E., Fukuda, T., Hardy, T.  
Faster recovery from hyperglycemia with ultra rapid lispro vs lispro in patients with type 1 diabetes (T1D) on continuous subcutaneous insulin infusion (CSII).  
**Diabetologia** 64(Suppl 1):SO34, 2021
44. Heller, S., Battelino, T., Bailey, T., Tehranchi, R., Klaff, L., Pieber, T., Hövelmann, U., Plum-Mörschel, L., Melgaard, A.E., Aronson, R., DiMeglio, L., Danne, T.  
Integrated safety analysis of dasiglucagon for the treatment of severe hypoglycaemia.  
**Diabetologia** 64(Suppl 1):SO42, 2021
45. Danne, T., Bailey, T., Tehranchi, R., Klaff, L.J., Pieber, T., Hövelmann, U., Plum-Mörschel, L., Melgaard, A.E., Aronson, R., DiMeglio, L.A., Battelino, T.  
The next-generation glucagon analogue dasiglucagon consistently achieves rapid recovery from hypoglycaemia across subgroups.  
**Diabetologia** 64(Suppl 1):SO42, 2021
46. Meiffren, G., Andersen, G., Eloy, R., Seroussi, C., Megrét, C., Famulla, S., Chan, Y.-P., Gaudier, M., Soula, O., DeVries, J.H., Heise, T.  
Ado09, a co-formulation of pramlintide and insulin A21G improves post-prandial

glucose and body weight versus insulin aspart in type 1 diabetes.  
**Diabetologia** 64(Suppl 1):OP23, 2021

**16<sup>th</sup> Health Insurance Summit. Berlin, Germany, September 16, 2021.**

47. Diehl, A., Geier, A.S., Janssen, B.I., Maier, P., Matthies, H., Müller, N., Zurth, M., Rosenstock, M., Schliess, F., Weigant, C., Neubacher, D., Ladewig, K., Lüttgen, M., Schanz, C., Weller, N.  
Roundtable discussion: DiGAs – a model for Europe?

**American Diabetes Association (ADA) 81<sup>th</sup> Scientific Sessions. Seattle, USA. June 25–29, 2021**

48. Leohr, J., LaBell, E., Dellva, M.A., Tong, Z., Arrubla, J., Plum-Mörschel, L., Zijlstra E., Fukuda, T., Hardy, T.  
Faster recovery from hyperglycemia with ultra rapid lispro (URLi) vs Humalog® in patients with type 1 Diabetes (T1D) on continuous subcutaneous insulin infusion (CSII).  
**Diabetes** 70(Suppl1):190-OR, 2021
49. Meiffren, G., Andersen, G., Eloy, R., Mégret, C., Famulla, S., Seroussi, C., Chan, Y.P., Gaudier, M., Soula, O., DeVries, J.H., Heise, T.  
ADO09, a coformulation of insulin A21G and pramlintide (Pram) improves blood glucose control and reduces body weight in subjects with T1D.  
**Diabetes** 70(Suppl 1):197-OR, 2021

**14<sup>th</sup> International Conference on Advanced Technologies and Treatments for Diabetes (ATTD). Virtual, June 2–5, 2021**

50. Zijlstra E.  
Oral Insulins  
**Diabetes Technol. Ther.** 23 Suppl. 2):O108, 2021
51. Heise T.  
Smart Insulins.  
**Diabetes Technol. & Ther.** 23 (Suppl. 2):O107, 2021
52. Meiffren, G., Andersen, G., Eloy, R., Seroussi, C., Mégret, C., Famulla, S., Chan, Y.P., Gaudier, M., Soula, O., DeVries, J.H., Heise, T.  
ADO09, a co-formulation of pramlintide and insulin A21G improves post-prandial glucose versus insulin aspart in type 1 diabetes.  
**Diabetes Technol. Ther.** 23(Suppl. 2):O090, 2021

**RealWorld4Clinic EIT Health ELSI Board workshop (Part 1). Virtual, May 20, 2021**

53. Rüling, C.-C., Reineke, J.-P., Schliess, F.

AI-powered health monitoring for outpatient cardiology

**EIT Health Germany Innovation and Entrepreneurship Training: Start-ups meet Pharma. Virtual, May 17 – 21, 2021**

54. Schliess, F., Heise, T.  
Workshop: How to effectively design and run clinical trials?



**INNOVATION AND ENTREPRENEURSHIP TRAINING**  
May 17-21, 2021

**Featured Speakers**  
FREIMUT SCHLIESS & TIM HEISE  
Profil Institut für Stoffwechselforschung GmbH

**Workshop**  
How to Effectively Design and Run Clinical Trials

**START-UPS MEET PHARMA**

  Funded by the European Union

**ENDO 2021 Annual Meeting of the Endocrine Society. Virtual. March 20–23, 2021**

55. Heise, T., Chien, J., Beals, J., Benson, C., Klein, O., Moyers, J.S., Haupt, A., Pratt, E.J.  
Basal insulin Fc (BIF), a novel insulin suited for once weekly dosing for the treatment of patients with diabetes mellitus.  
**JES** 5(Suppl 1), A329, 2021

**30<sup>th</sup> Annual Conference Asia Pacific for the Study of Liver (APASL). Virtual, February 4–6, 2021**

56. Andersen, G.  
New tools in diabetes therapy

## Poster Presentations

### American Association for the Study of Liver Disease (AASLD) The Liver Meeting. Virtual, November 15–12, 2021

57. Flint, A., Andersen, G., Hockings, P., Johansson, L., Ersbøll, A., Sundby Palle, M.S., Vogl, T.J., Plum-Mörschel, L.  
Semaglutide treatment in subjects with NAFLD: effects assessed by magnetic resonance elastography and magnetic resonance imaging proton density fat fraction.

### Obesity Week 2021. Dallas, USA, November, 1–5, 2021

58. Arrubla, J., Schoelch, C., Plum-Mörschel, L., Kapitza, C., Lamers, D., Thamer C., Hennige A.  
Phase I Study of glucagon-like peptide-1/glucagon receptor dual agonist BI456906 in obesity.

November 1–5, 2021

#231

### Phase I study of glucagon-like peptide-1 receptor / glucagon receptor dual agonist BI 456906 in obesity

Jorge Arrubla<sup>1</sup>, Corinna Schoelch<sup>2</sup>, Leona Plum-Moersche<sup>1</sup>, Christoph Kapitza<sup>1</sup>, Daniela Lamers<sup>1</sup>, Claus Thamer<sup>1</sup>, Anita M. Hennige<sup>1</sup>

<sup>1</sup>Wako, Neuss, Rhein-Neckar, Germany; <sup>2</sup>Rothkrugel, Ingelheim Pharma GmbH & Co. KG, Bismarck, Baden-Württemberg, Germany; <sup>3</sup>Profil, Mainz, Rheinland-Pfalz, Germany; <sup>4</sup>Rothkrugel, Ingelheim, International GmbH, Bismarck, Baden-Württemberg, Germany

#### Objective

- Dual GLP-1R and GCGR agonist may reduce food intake, delay gastric emptying, and increase energy expenditure<sup>1,2</sup>
- This Phase I trial (NCT03591718) assessed the safety and efficacy of the novel dual GLP-1R/GCGR agonist BI 456906 in patients with overweight and obesity

#### Methods

- This placebo-controlled, MRD study enrolled adults with a body mass index of 27–40 kg/m<sup>2</sup> and bodyweight of ≥70 kg (≥30 kg females/males)
- Patients received subcutaneous dose-escalation to 450006 or placebo for either 4 weeks (part A: BI 456906 once daily 0.1–0.45 mg, once weekly 0.3–1.8 mg) or 2–4 mg (part B: BI 456906 once weekly 0.3–2.4 mg) or 0–4 mg (part C: BI 456906 once weekly 0.3–2.4 mg)
- The primary endpoint was the cumulative number of patients withdrawn from dose-escalation
- Secondary endpoints included percentage change from baseline in bodyweight and plasma amino acid levels

#### Results

Intentional demographics were similar between dose groups in each part of the trial

| Characteristic                       | Part A |        |         |        | Part B |        |        |       |
|--------------------------------------|--------|--------|---------|--------|--------|--------|--------|-------|
|                                      | 0.1 mg | 0.3 mg | 0.45 mg | 1.8 mg | 0.3 mg | 1.8 mg | 2.4 mg | 4 mg  |
| Age (years)                          | 38.1   | 38.1   | 38.1    | 38.1   | 38.1   | 38.1   | 38.1   | 38.1  |
| Sex (male/female)                    | 18/12  | 18/12  | 18/12   | 18/12  | 18/12  | 18/12  | 18/12  | 18/12 |
| Body weight (kg)                     | 85.0   | 85.0   | 85.0    | 85.0   | 85.0   | 85.0   | 85.0   | 85.0  |
| Body mass index (kg/m <sup>2</sup> ) | 31.2   | 31.2   | 31.2    | 31.2   | 31.2   | 31.2   | 31.2   | 31.2  |
| Waist circumference (cm)             | 102.0  | 102.0  | 102.0   | 102.0  | 102.0  | 102.0  | 102.0  | 102.0 |
| Mean (SD) baseline                   | 27.0   | 27.0   | 27.0    | 27.0   | 27.0   | 27.0   | 27.0   | 27.0  |

MRD from time 0 to baseline (day 0) and time 0 to 16 weeks (day 16) are shown.

#### Drug-related AEs were reported for most patients and almost twice as many patients from part A withdrew from dose-escalation compared with part B (more gradual dose-escalation)

| AE (n/N)                | Part A |        |         |        | Part B |        |        |       |
|-------------------------|--------|--------|---------|--------|--------|--------|--------|-------|
|                         | 0.1 mg | 0.3 mg | 0.45 mg | 1.8 mg | 0.3 mg | 1.8 mg | 2.4 mg | 4 mg  |
| Headache                | 10/18  | 10/18  | 10/18   | 10/18  | 10/18  | 10/18  | 10/18  | 10/18 |
| Diarrhea                | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Stomach ache            | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site pain     | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site redness  | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site swelling | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site bruising | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site itching  | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site pain     | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site redness  | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site swelling | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site bruising | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |
| Injection site itching  | 5/18   | 5/18   | 5/18    | 5/18   | 5/18   | 5/18   | 5/18   | 5/18  |

A serious event (SAE) was reported in 1 patient (0.1 mg) and 1 patient (0.3 mg) at baseline (day 0) and 1 patient (0.3 mg) at 16 weeks (day 16).

**BI 456906 is a novel, subcutaneous dual glucagon-like peptide-1 receptor (GLP-1R)/glucagon receptor (GCGR) agonist currently under investigation for the treatment of obesity. In this Phase I study, multiple rising doses (MRDs) of BI 456906 were generally well tolerated and resulted in clinically relevant bodyweight reductions of up to 6.6% after 6 weeks and 13.7% after 16 weeks. Decreased plasma amino acid levels indicate that BI 456906 is both a GLP-1R and GCGR agonist.**

**What was known**

- Prior to the development of GLP-1R agonists, there were no pharmacotherapies that promoted a mean placebo-corrected bodyweight reduction approaching 15%<sup>1,3</sup>
- Dual GLP-1R and GCGR agonism can be more efficacious than GLP-1R agonism alone<sup>4,6</sup>

**What's new**

- BI 456906 is a novel subcutaneous dual GLP-1R/GCGR agonist for once-weekly administration
- This Phase I trial (NCT03591718) was a randomized, blinded within dose groups, placebo controlled, MRD study of BI 456906 in patients with overweight and obesity
  - BI 456906 treatment resulted in bodyweight reductions of up to 13.7%
  - No unexpected safety signals were reported with MRDs of BI 456906
  - Decreased plasma amino acid levels indicate that BI 456906 is both a GLP-1R and GCGR agonist

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**BI 456906 resulted in bodyweight reductions of up to 6.6% at Week 6 in part A**

**BI 456906 resulted in bodyweight reductions of up to 13.7% at Week 16 in part B**

**BI 456906 decreased plasma alanine and tyrosine levels and glucagon levels compared with placebo, indicating target engagement of the GCGR and GLP-1R, respectively**

- A clear decrease in tyrosine was seen in the 0–4 mg QW and 0–2.4 mg BW groups, similar reductions were seen for glycine, threonine, leucine, valine, and arginine, and no treatment effect was observed for alanine

**Conclusions**

- No unexpected safety signals were reported with MRDs of BI 456906
- A dosing schedule of BI 456906 0.3–2.4 mg (weekly) resulted in the greatest bodyweight reduction (13.7%) and the lowest frequency of gastrointestinal-related adverse events
- Decreased plasma amino acid levels indicate that BI 456906 is both a GLP-1R and GCGR agonist

**Disclosures**

No potential conflicts of interest were disclosed by the authors.

Poster: The Obesity Society Annual Meeting, ObesityWeek® Subtheme 2021, November 1–5, 2021, Virtual  
 Presenter: Jorge Arrubla, Prof. Dr. Corinna Schoelch, Germany. Email: jorge.arrubla@wako.com

ObesityWeek®  
 THE OBESITY SOCIETY  
 1 Day, 36 hr at the Hyatt Regency Dallas, 11/1–11/5, 2021  
 2 Days, 48 hr at the Hyatt Regency Dallas, 11/1–11/2, 2021  
 3 Days, 72 hr at the Hyatt Regency Dallas, 11/1–11/3, 2021  
 4 Days, 96 hr at the Hyatt Regency Dallas, 11/1–11/4, 2021  
 5 Days, 120 hr at the Hyatt Regency Dallas, 11/1–11/5, 2021

Profil Science Report 2021

19



62. Battelino, T., Bailey, T., Tehranchi, R., Klaff, L.J., Pieber, T.R., Hövelmann, U., Plum-Mörschel, L., Melgaard, A.E., Aronson, R., DiMeglio, L.A., Danne, T., Peters, A.  
Predicting true time to recovery from insulin-induced hypoglycemia with dasiglucagon.  
**Diabetes** 70(Suppl 1):346-P, 2021.
63. Battelino, T., Bailey, T.S., Tehranchi, R., Klaff, L.J., Pieber, T., Hövelmann U., Plum-Mörschel, L., Melgaard, A., Aronson, R., Dimeglio, L., Danne, T.  
The next-generation glucagon analog dasiglucagon consistently achieves rapid recovery from hypoglycemia across subgroups.  
**Diabetes** 70(Suppl 1):345-P, 2021.
64. Heller, S.R., Battelino, T., Bailey, T.S., Tehranchi, R., Klaff, L.J., Pieber, T., Hövelmann, U., Plum-Mörschel, L., Melgaard, A., Aronson, R., Dimeglio, L., Danne, T.  
Integrated safety analysis of dasiglucagon for treatment of severe hypoglycemia.  
**Diabetes** 70(Suppl 1):344-P, 2021.

**30th Annual Conference Asian Pacific Association for the Study of the Liver (APASL). Virtual, June 4–6, 2021**

65. Flint, A., Andersen, G., Hockings, P., Johansson, L., Ersbøll, A., Sundby-Palle, M.S., Vogl, T.J., Plum-Mörschel, L.  
Semaglutide treatment in subjects with NAFLD: effects assessed by magnetic resonance elastography and magnetic resonance imaging proton density fat fraction.

Semaglutide treatment in subjects with NAFLD: effects assessed by magnetic resonance elastography and magnetic resonance imaging proton density fat fraction



Anne Flint,<sup>1</sup> Grit Andersen,<sup>2</sup> Paul Hockings,<sup>3,4</sup> Lars Johansson,<sup>3</sup> Anne Ersbøll,<sup>1</sup> Mads Sundby-Palle,<sup>1</sup> Thomas J Vogl,<sup>5</sup> Leona Plum-Moerschel<sup>6</sup>



Semaglutide significantly reduced liver fat in subjects with NAFLD, suggesting a **positive impact** on disease activity and metabolic profile

# Advanced Training Courses

## Training for the Clinical Trial Recruitment Team

- 66. Dr. Sabine Arnolds  
Profil GmbH, Neuss, Germany  
**NAFLD study results.**  
December 6, 2021
- 67. Dr. Sabine Arnolds  
Profil GmbH, Neuss, Germany  
**COVID-19 vaccines clinical trials**  
February 1, 2021



## Trainings Clinical Pharmacology

- 68. Dr. Grit Andersen  
Profil GmbH, Neuss, Germany  
**Basics of clinical evaluation: Clinical documentation structure of a test plan.**  
December 16, 2021

69. Dr. Susanne Otten  
Profil Mainz GmbH & Co. KG, Mainz, Germany  
**Thrombosis and thromboembolism.**  
November 23, 2021
70. Prof Dr. Norbert Stefan  
University Hospital, Tübingen, Germany  
**EASD Summary T2DM.**  
November 4, 2021
71. Prof Dr. Thomas Forst  
CRS Clinical Research Services Management GmbH, Mannheim, Germany  
**EASD Summary T1DM.**  
October 28, 2021
72. Dr. Nadia Heramvand  
University Hospital of Düsseldorf, Düsseldorf, Germany  
**Predictive PK model of Tirofiban.**  
August 26, 2021
73. Hsieh Chin-Yuan  
Profil GmbH, Neuss, Germany  
**Diabetic Foot Syndrome.**  
March 4, 2021
74. Dr. Sabine Arnolds  
Profil GmbH, Neuss, Germany  
**News about SARS-CoV-2 vaccines.**  
January 28, 2021

## Awards and Appointments

75. **Among the most frequently downloaded articles (October 1– 1, 2021) published in Alimentary Pharmacology & Therapeutics**  
Flint, A., Andersen, G., Hockings, P., Johansson, L., Morsing, A., Sundby-Palle, M., Loomba, R., Vogl, T.J., Plum-Mörschel, L.  
Randomized clinical trial: Semaglutide versus placebo reduced liver steatosis but not liver stiffness in subjects with non-alcoholic fatty liver disease assessed by magnetic resonance imaging.  
**Aliment. Pharmacol. Ther.** 54(9):1150-1161, 2021  
**IF(2021): 8.171**



## Granted Innovation Activities

76. **EIT Health e.V. and EIT Health Germany GmbH**



A Knowledge and Innovation Community (KIC) on Healthy Living and Active Ageing, funded by the European Institute of Innovation and Technology (EIT).  
First funding period: 2015 – 2022  
<http://eithealth.eu/>

Profil is EIT Health core partner and a full voting member of the EIT Health e.V. Partner Assembly.

Profil is represented in the EIT Health Germany GmbH Supervisory Board.  
[https://eit-health.de/wp-content/uploads/2021/01/EIT\\_Health\\_Aufsichtsratsraete.pdf](https://eit-health.de/wp-content/uploads/2021/01/EIT_Health_Aufsichtsratsraete.pdf)  
<https://eit-health.de/team/>

77. **EIT Health Health innovation project  
CLOSE: Automated Glucose Control at Home for People with Chronic  
Disease.**



Members & guests of the CLOSE Consortium. Barcelona, September 2019.

*Project duration:* up to December 2023

*Funding period:* July 2016 – December 2019

*Involved EIT Health partners:* Air Liquide Healthcare, Sanofi, Profil GmbH, IESE Business School, Katholic University Leuven, Medical University of Lodz.

*Additional project partners:* Aqua Institute for Applied Quality Improvement and Research in Health Care GmbH, European Research and Project Office GmbH

*Coordinating organisation:* Profil GmbH

[https://www.eithealth.eu/en\\_US/close](https://www.eithealth.eu/en_US/close)

<http://eit-health.de/activities/innovation-projects/close-diabetes/>

J. Diabetes Sci. Technol. 13(2):261-267, 2019

<https://journals.sagepub.com/doi/pdf/10.1177/1932296818803588>

<https://diatec-fortbildung.de/aid-fuer-menschen-mit-typ-2-diabetes-die-pan-europaeische-close-initiative/>

78. **EIT Health innovation project:  
iPDM-GO: Integrated Personalized Diabetes Management (iPDM) Goes  
Europe.**

*Funding period:* January 2019 – December 2021

*Involved partners:* Roche Diabetes Care, Profil, German Center for Diabetes Research, University of Copenhagen, Danmarks Tekniske Universitet, Helmholtz Center Munich, City of Copenhagen, Capital Region of Denmark, LINQ management

*Coordinating organisation:* Roche Diabetes Care

<https://eithealth.eu/project/ipdm-go/>

<https://eit-health.de/en/ipdm-go/>

<https://eit-health.de/ipdm-go/>

Primary Care Diabetes 15(2):360-364, 2021

<https://www.primary-care-diabetes.com/action/showPdf?pii=S1751-9918%2820%2930293-X>



79. **EIT Health Innovation project**  
**RealWorld4Clinic: Real-World Cardio-Respiratory Health Monitoring for Clinical Contract Research & Telecardiology**

*Funding period:* January 2020 – December 2022

*Involved partners:* Profil, SentinHealth, Fraunhofer Institute for Toxicology and Experimental Medicine, University Grenoble Alpes, Inserm, RWTH Aachen, RWTH Aachen University Hospital, CHU Grenoble Alpes, CHU de Rennes, Grenoble École de Management, MADoPA, Zana Technologies, PrYv, Aqua Institute for Applied Quality Improvement and Research in Health Care (aQua), SurgiQual Institute, LINQ management

*Coordinating organisation:* Profil

<https://eithealth.eu/project/realworld4clinic/>

<https://eit-health.de/en/realworld4clinic/>

<https://eit-health.de/realworld4clinic/>



# Scientific Communication

## Online Seminars

<https://www.profil.com/knowledge-center/online-seminars>

80. **Advancements in oral insulin development: are we nearly there yet?**  
E. Zijlstra. November 2, 2021.
81. **Once-weekly insulins.**  
J. H. de Vries. August 3, 2021.
82. **IMP manufacturing services for multi and single-centre clinical trials in EU.**  
P. Mozaffari. May 05, 2021.
83. **Audit trail review in clinical studies using virtual data analytics.**  
S. Heckermann. March 23, 2021.



 **profil**  
ANSWERS FOR DIABETES

**Presented by:**  
**Sascha Heckermann**  
CEO at Profil

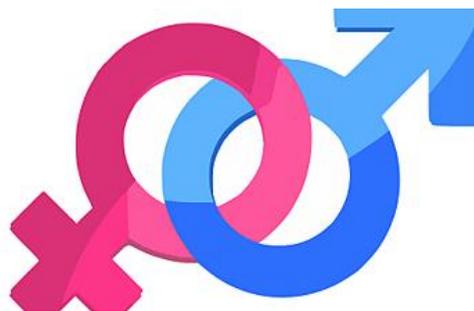


**Register for the free online seminar:**  
**"Audit trail review in clinical studies using visual data analytics"**

## Blogs

<http://blog.profil.com/blog>

84. **A pathophysiological update of the incretins.**  
U. Hövelmann. December 13, 2021
85. **GLP-1 agonists: An option for NAFLD?**  
G. Andersen. November 11, 2021
86. **“Profil World” – The clinical diabetes research newsletter October 2021.**  
M. Andresen. October 13, 2021
87. **Announcement Free Online Seminar: Advancements in oral insulin development.**  
M. Andresen. October 5, 2021
88. **Oral insulin: The future of insulin therapy?**  
S. Arnolds. September 23, 2021
89. **EU Clinical Trials Regulation (EU-CTR) enters application on 31 January 2022.**  
G. Andersen. August 9, 2021
90. **“Profil World” – The clinical diabetes research newsletter July 2021.**  
M. Andresen. July 12, 2021
91. **Can remote decentralised clinical trials enhance clinical research?**  
F. Schliess. June 2, 2021
92. **Gender ratio in clinical trials – are there less female trial participants?**  
S. Arnolds. May 7, 2021



- 93. **Announcement Free Online Seminar: IMP manufacturing services for clinical trials in EU.**  
M. Andresen. April 22, 2021
- 94. **Reporting of study results: a challenge?**  
G. Andersen. April 6, 2021  
  
**“Profil World” – The clinical diabetes research newsletter March 2021.**  
M. Andresen. March 16, 2021
- 95. **Profil leads the way in establishing audit trail review procedures in clinical studies using visual data analytics.**  
S. Heckermann. March 8, 2021
- 96. **Free online seminar: audit trail review in clinical studies using visual data analytics.**  
S. Heckermann. February 23, 2021
- 97. **Can serious games motivate teenagers with diabetes to adhere to their treatments?**  
T. Dicenzo. February 9, 2021
- 98. **Running clinical trials at Profil during pandemic times.**  
J. Villagra. January 7, 2021



## Media Reports (Selection)

99. **Type 2 diabetes: Massive Kosteneinsparungen und verbesserte Lebensqualität durch automatisierte Verabreichung von Insulin**  
November 2021  
<https://eit-health.de/typ-2-diabetes-massive-kosteneinsparungen-und-verbesserte-lebensqualitaet-durch-automatisierte-verabreichung-von-insulin/>
100. **Diabetesmanagement: zum Experten für sich selbst werden.**  
Profil Diabetes Ratgeber  
November 2021  
<https://www.profil.de/blog/projekt-ipdm-go>



101. **EIT Health Roundtable discussion: DiGAs – a model for Europe?**  
Possible options for achieving a European system.  
Statements from the EIT Health Germany Round-table held as part of the 16th Kassengipfel (health-insurer summit) on 16 September 2021 in Berlin  
<https://eit-health.de/wp-content/uploads/2022/01/EITHEA2.pdf>



**DiGAs – ein Modell für Europa?**

**Mathias Prütz**  
LOB Health, adesso SE  
adesso insurance solutions

**Dr. Anne Sophie Geier**  
Geschäftsführerin, Spitzenverband Digitale Gesundheitsversorgung e.V.  
Spitzenverband Digitale Gesundheitsversorgung

**Dr. Lina Behrens**  
Managing Director, Flying Health GmbH  
FLYING HEALTH

**Christian Weigand**  
Head of Mobile Health Lab and CTO dmac, Fraunhofer Mobile Health Lab  
Fraunhofer ISI

**Moderation:**  
**Dr. Anke Diehl**  
CTO, Universitätsmedizin Essen  
Universitätsmedizin Essen

**Prof. Dr. Freimut Schliess**  
Director Science & Innovation, Profil Institut für Stoffwechselforschung GmbH  
profil

**Michael Rosenstock**  
Leiter Sana Digital, SANA Kliniken  
sana

**Dr. Henrik Matthies**  
Managing Director, BGM, Health Innovation Hub  
hih health innovation hub

**Bjoern Janssen**  
Referatsleiter Ärzte/Beauftragter des vdek für Digitale Versorgung, Verband der Ersatzkassen  
vdek

**Pia Maier**  
Vorstand, Bundesverband Internetmedizin  
BiM BUNDESVERBAND INTERNETMEDIZIN

102. **STAT+ exclusive biopharma, health policy and life science analysis**  
Artificial pancreases were a breakthrough for type 1 diabetes. The research in type 2 is just beginning  
Katie Palmer  
August 2021  
[https://www.statnews.com/2021/08/04/artificial-pancreas-type-2-diabetes-outpatient/?utm\\_source=researcher\\_app&utm\\_medium=referral&utm\\_campaign=R\\_ESR\\_MRKT\\_Researcher\\_inbound](https://www.statnews.com/2021/08/04/artificial-pancreas-type-2-diabetes-outpatient/?utm_source=researcher_app&utm_medium=referral&utm_campaign=R_ESR_MRKT_Researcher_inbound)

103. **DiaTec Fortbildung**  
Warum dauert die Entwicklung von „smarten“ (Glucose-sensitiven) Insulinen so lange?  
Tim Heise  
June 2021  
<https://diatec-fortbildung.de/warum-dauert-die-entwicklung-von-smarten-glucose-sensitiven-insulinen-so-lange/>
104. **Start-ups Meet Pharma 2021 officially kicks off with Module One.**  
8 days, 13 workshops, 18 teams, 10 amazing speakers and Module 1 of Start-ups Meet Pharma 2021 is over!  
June 2021  
<https://eit-health.de/en/start-ups-meet-pharma-2021-officially-kicks-off-with-module-one/>
105. **The Mentoring & Coaching Network**  
A Triple Win for Counsellors, Start-ups and EIT Health  
Freimut Schliess  
June 2021  
<https://eit-health.de/en/the-mentoring-coaching-network-a-triple-win-for-counsellors-start-ups-and-eit-health-freimut-schliess/>
106. **Think Tank 2020 Round Table Series: German Think Tank Report**  
The EIT Health Think Tank 2020 drove analysis into the potential of AI to transform healthcare across multiple European regions, and provided recommendations for greater acceptance and utility of AI within the field.  
January 2021  
<https://eit-health.de/en/think-tank-2020-round-table-series-german-think-tank-report/>