



CANADIAN RARE DISEASE **NETWORK**

~ Rare Lives, Shared Strength ~

François Bernier On behalf of the CRDN Steering Committee







About CRDN

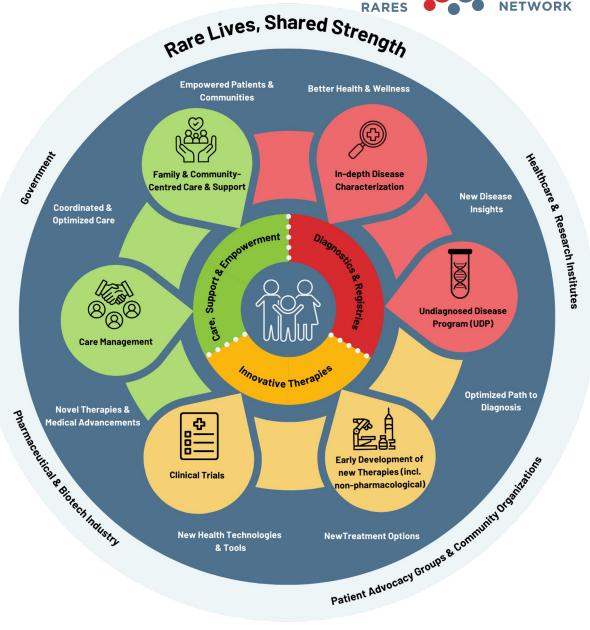
RÉSEAU
CANADIEN
DES MALADIES
RARES
CANADIAN
RARE
DISEASE
NETWORK

Our Vision: Innovative care and research in Canada so that all patients and families affected by a RD are empowered to live their full potential.

Our Mission: Establish a growing network that builds connections across geographies and disease boundaries to enable timely diagnosis, screening and access to treatment, and facilitate best care, support and empowerment for patients and their families in Canada, ultimately enhancing their quality of life.

Pillars of Our Work:

- Diagnostics & Registries
- Innovative Therapies
- Care, Support & Empowerment
- National & International Collaboration



Our Steering Committee Members



Francois Bernier
Alberta Children's
Hospital,
University of Calgary



Durhane Wong-Rieger, Canadian Organization for Rare Disorders (CORD)



Jim Dowling
Sick Kids Hospital,
University of Toronto



Kim M Boycott
Children's Hospital of
Eastern Ontario (CHEO)
Research Institute,
University of Ottawa



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Centre de recherche du
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Université de Montréal



Gail Ouellette iRARE Centre, RQMO



Lawrence Korngut

Hotchkiss Brain Institute,
University of Calgary



Angela Genge
Montreal Neurological
Institute – Hospital,
McGill University



Jonathan Pratt
Regroupement Québécois
des maladies orphelines
(RQMO)



Craig Campbell
Children's Hospital LHSC,
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Children's Hospital of
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University of Ottawa



Ian Stedman York University



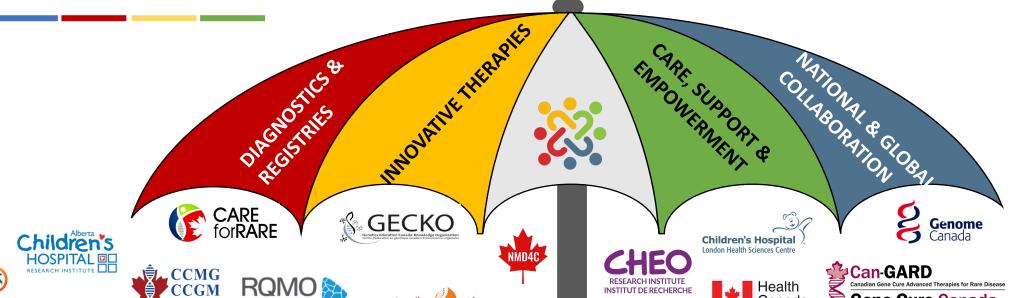
Thierry Lacaze-Masmonteil University of Calgary; Maternal, Infant, Child and Youth Research Network (MICYRN)



Deborah MarshallAlberta Children's Hospital
Research Institute (ACHRI),
University of Calgary

How We Work – "It takes a village"













































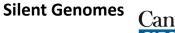








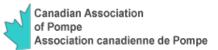


























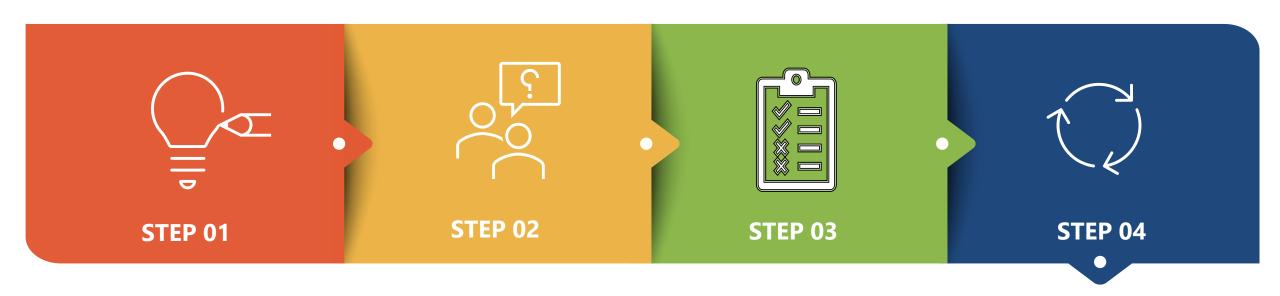












STRATEGIC ENGAGEMENT

May – August 2024

Targeted engagement sessions (n=12) with a select but diverse group **of 34 experts**, resulting in >**900 minutes** of meaningful dialogue

VIRTUAL TOWNHALL

31 October 2024

Overview of draft strategic plan presented to broader community (>160 attendees) and launch of community feedback survey

COMMUNITY FEEDBACK

October - November 2024

Widely distributed public survey gathered extensive feedback from 115 community members from 10 out of Canada's 13 provinces and territories

REVIEW & APPROVAL

December – March 2025

Review and approval by CRDN Steering Committee, broad dissemination, and moving into implementation

Pillar 1 – Diagnostics & Registries



Patient Journey through diagnosis

It's a waiting game, but you tell a mum to wait when she's waited 15 years. It's difficult. – Nuria People began to ask which side of the family it came from...It was a difficult time for us as parents. – Alexa

A diagnosis may be bad news, it may be very bad news or it may be no news. But all of that's OK and there's help and support for whatever spectrum you end up on. – Peter



Diagnostics & 01 Registries

Goal 1.1: All RD patients will receive the right diagnostic test at the right time regardless of where they live in Canada.

Goal 1.2: Genetic diagnostic laboratories across Canada will integrate resources and best practice guidelines to ensure high-quality GWS for patients.

Goal 1.3: All families with RD will have access to relevant registries for secondary research and re-contact.

Goal 1.4: RD diagnostics and research will be a political priority and sustainably funded.

Goal 1.5: Canada will be a world leader in RD mechanism discovery and translation of new technologies into the clinic.

Pillar Lead:



Kim M Boycott Children's Hospital of

Eastern Ontario (CHEO),

University of Ottawa



Pillar Members:

Gregory Costain Sick Kids Hospital, University of Toronto



Taila Hartley Care4Rare



Lawrence Korngut Hotchkiss Brain Institute, University of Calgary



Bhavi Modi BC Children's Hospital, University of British Columbia



Jillian Parboosingh, University of Calgary



Beth Potter University of OttawaMontreal Children's Hospital BC Children's Hospital,



Myriam Srour McGill University



Stuart Turvey University of British Columbia



Hilary Vallance BC Children's Hospital, University of British Columbia



Jodi Warman Chardon Ottawa Hospital, University of Ottawa

Reducing the time it takes to identify rare diseases

Pillar 2 – Innovative Therapies



Effective, Innovative Therapies





Pre-Clinical Pipeline



Clinical Trials



Drugs + Therapeutics **Access Pathway**



Drugs + Therapeutics Delivery

Innovative Therapies

Goal 2.1: Canada will lead in the discovery and validation of novel therapeutic targets and treatments for RD patients.

Goal 2.2: All RD patients, regardless of their age, location, or social context, will have equitable access to clinical trials and innovative therapies.

Goal 2.3: Innovative therapies will be readily integrated into clinical practice to improve patient care and outcomes.

Goal 2.4: Canada will be recognized globally for its RD clinical trials potential and as an attractive hub for investment and partnerships.

Pillar Lead:



Leanne Ward, Children's Hospital of Eastern Ontario (CHEO), **University of Ottawa**



Pillar Members:



Craig Campbell Children's Hospital LHSC, Western University



Pranesh Chakraborty Children's Hospital of Eastern Ontario (CHEO), University of Ottawa



Jim Dowling Sick Kids Hospital, University of Toronto



Heather Howley Children's Hospital of Eastern Ontario (CHEO) Research Institute



Thierry Lacaze-Masmonteil University of Calgary; Maternal, Infant, Child, Youth Eastern Ontario (CHEO), Research Network (MICYRN)



Hanns Lochmüller Children's Hospital of Ottawa Hospital, University of Ottawa



Larry Lynd University of British Columbia (UBC)



Kim McBride Alberta Children's Hospital, University of Calgary



Maryam Oskoui Montreal Children's Hospital, McGill University



Breanne Stewart RareKids-CAN



Risini Weeratna National Research Council (NRC)



Durhane Wong-Rieger Canadian Organization for Rare Disorders (CORD)



Pillar 3 – Care, Support, & Empowerment



O3 Care, Support & Empowerment

Goal 3.1: All RD patients, along with their families and caregivers, will be aware of and have equitable access to the resources and supports they need.

Goal 3.2: All individuals affected by RDs will have the opportunity to be empowered and engaged in meaningful opportunities in research and beyond.

Goal 3.3: All RD patients and their families will receive the mental health and wellbeing support they need regardless of their location or social context.

Goal 3.4: Canada will have a unified RD community that strengthens comprehensive care and support systems for RD patients and their families.

Pillar Lead:



Ian Stedman York University



Pillar Members:



John Adams
Canadian PKU and Allied
Disorders (CanPKU+)



Jillian Banfield
Canadian Institutes for
Health Research – Institute of
Genetics (CIHR IG)



Brad Crittenden
Canadian Association
of Pompe



Deborah Marshall University of Calgary



Homira Osman Muscular Dystrophy Canada



Gail Ouellette iRARE Centre, RQMO



Stephen ParrottKidney Cancer Canada Board



Jonathan Pratt Regroupement Québécois des maladies orphelines (RQMO)



Nicola Worsfold World Duchenne Organization

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O2 Innovative Therapies

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Care, Support & Empowerment

Goal 3.1: All RD patients, along with their families and caregivers, will be aware of and have equitable access to the resources and supports they need

Goal 3.2: All individuals affected by RDs will have the opportunity to be empowered and engaged in meaningful opportunities in research and beyond

Goal 3.3: All RD patients and their families will receive the mental health and wellbeing support they need regardless of their location or social determinants of health

Goal 3.4: Canada will have a unified RD community that strengthens comprehensive care and support systems for RD patients and their families

National & Global Collaboration

Goal 4.1: Canada will have a unified national approach to RD that drives innovation and improves care for all affected by RDs.

Goal 4.2: Canada will be recognized as a key global player in RD research, innovation, and knowledge exchange, benefiting patients worldwide

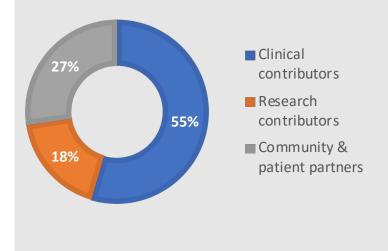






Network Growth

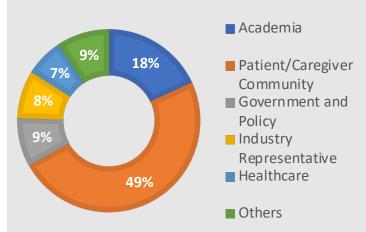
- 1 Steering Committee and 3 Pillar
 Committees set up
- 22 committee meetings held
- 49 contributors from 5 provinces and across sectors





Communication Reach

- >2,350 Social media followers
- >25K website views
- >370 newsletter subscribers



 Global reach (e.g., US, Europe, UK, Australia, India) and featured in OrphaNews, IRDiRD, HTAi, RDI Mapping Rare

Strategy, Events, & Influence

- 1 strategic plan co-developed with the community
- 5 Hosted/Co-hosted events, including 2 in-person workshops, 1 virtual townhall, and 1 hybrid event
- Total of >640 attendees
- 13 external event presentations, including 2 international (UK, Doha)
- Participated in 2 policy consultations/roundtables

Partnerships & Progress Highlights

#2





Joining Global Momentum in Rare Disease Research

Co-developing and leading the **Canadian National Mirror Group** (NMG) of the European Rare Diseases Research Alliance (ERDERA) with RareKids-CAN/MICYRN to:

- Foster national coordination among RD bodies/groups
- Align national efforts with European research priorities
- Serve as gateway to global opportunities



Informing on Canada's Genomic **Diagnostics Ecosystem**

Collaborative process to identify gaps and opportunities to strengthen Canada's genomic and health data ecosystem.

The outcome is a **report to Health** Canada with 14 recommendations to enhance national coordination and support equitable access to genomicsinformed diagnostic care. The report will be shared with P/Ts.





#3

Exploring Pre-Clinical Therapy Development

Co-hosted a short workshop to initiate conversations on how to strengthen national "home-grown" pre-clinical therapy development and lay the groundwork for identifying gaps, opportunities, strategic collaborations and paths forward.

Working towards a "What We Heard" report and actionable next steps.

#1

Highlight- #1



Joining Global Rare Disease Research

CRDN is co-leading Canada's National Mirror Group (NMG) with RareKids-CAN and MICYRN, supporting Canada's engagement in the European Rare Diseases Research Alliance (ERDERA).



Bringing together key interest holders, including representatives of the National Strategy for Drugs for Rare Diseases, federal/provincial funding bodies, research networks, academic and healthcare institutions, and patient organizations.

Organizing Canadian NMG meetings to foster knowledge exchange, shape the structure and priorities of the Canadian NMG, and attending ERDERA meetings, workshops, and events to bring best practices and opportunities to Canada.

Why It Matters



Aligns Canada's rare disease strategies with global efforts



Fosters coordination across Canadian rare disease bodies/groups



Opens doors to international research, funding, and training opportunities



Promotes Canadian participation in global initiatives

Highlight – #2



Informing on Canada's Genomic Diagnostic Ecosystem



Health To support the implementation of Canada's first *National Strategy for Drugs for Rare*Canada *Diseases*, Health Canada sought expert advice to help improve early, equitable diagnosis.

What We Did

Asset Mapping of existing genomic initiatives, data assets, and infrastructure across Canada

2-Day Genomic Interest Holder Workshop to share insights and codevelop priorities

Targeted Consultations to gather input from additional interest holders and provincial/territorial partners

Total of 41 interest holders consulted



Outcome/Impact

Report to Health Canada with 3 identified priority areas and 14 actionable recommendations that will be shared with PTs and can guide federal-provincial-territorial collaboration aimed at improving access to rare disease diagnostics.

Priority Areas Identified

- 1. Timely Access to screening and diagnostic care
- 2. High-Quality Genetic Testing across jurisdictions
- 3. Learning Healthcare System powered by genomic data

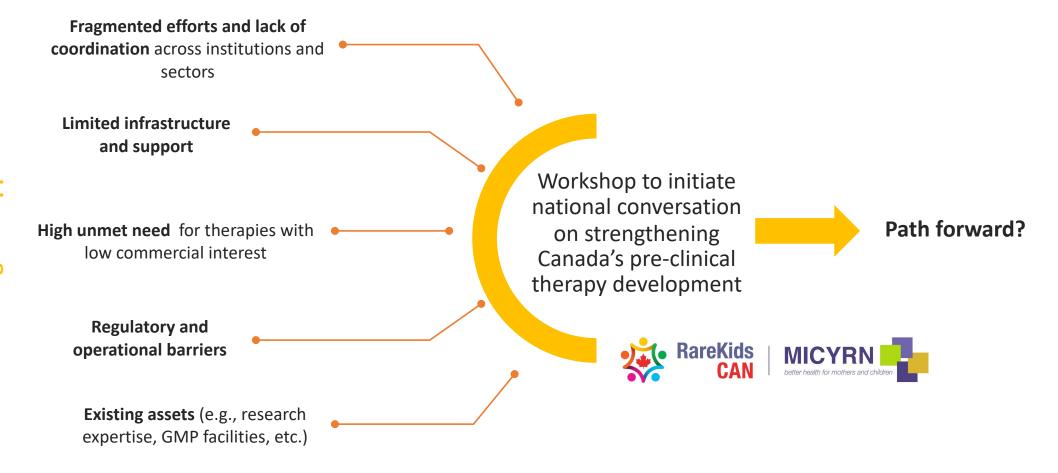
Recommendations (14 total) grouped under:

- Infrastructure & IT (e.g., national health data ecosystem, AI tools)
- **Human Resources** (e.g., training, awareness, capacity building)
- System Improvements (e.g., standards, life-course screening, interprovincial care)

Highlight – #3



Exploring Pre-Clinical Therapy Development





Join us!





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