

FINAL RESUME ON THE RESEARCH UNIT:
Centre for Epidemiology and Population Health
Research (CERPOP)

UNDER THE SUPERVISION OF THE
FOLLOWING INSTITUTIONS AND
RESEARCH BODIES:

Université Toulouse 3 - Paul Sabatier - UPS
Institut National de la Santé et de la Recherche
Médicale - Inserm

EVALUATION CAMPAIGN 2019-2020
GROUP A



In the name of Hcéres¹:

Nelly Dupin, Acting
President

In the name of the experts committee²:

Jean-Pierre Michel, Chairman of the
committee

Under the decree No.2014-1365 dated 14 November 2014,

¹ The president of Hcéres "countersigns the evaluation reports set up by the experts committees and signed by their chairman." (Article 8, paragraph 5);

² The evaluation reports "are signed by the chairman of the experts committee". (Article 11, paragraph 2).

Tables in this document were filled with data submitted by the supervising body on behalf the unit.

UNIT PRESENTATION

Unit name:	Centre for Epidemiology and Population Health Research
Unit acronym:	CERPOP
Current label and N°:	UMR 1027
ID RNSR:	201119369K
Application type:	Restructuration
Head of the unit (2019-2020):	Ms Sandrine ANDRIEU
Project leader (2021-2025):	Mr Cyrille DELPIERRE
Number of teams and/or themes:	4

EXPERTS COMMITTEE MEMBERS

Chair:	Mr Jean-Pierre MICHEL, Emeritus professor, Geneva Hospitals and Medical University, Switzerland
Experts:	Ms Claudine BURTON-JEANGROS, University of Geneva, Switzerland
	Mr Guy DE BACKER, Emeritus professor, Ghent University, Belgium
	Ms Catherine DENEUX-THARAUX, Inserm-Site Port-Royal, Paris
	Mr André GARCIA, IRD- pharmacological Faculty, Paris (representative of IRD CSS)
	Mr Damien JOLLY, Reims Champagne Ardennes University (representative of CNU)
	Mr Julien MAGNE, CHU Limoges (supporting personnel)
	Ms Anne THIEBAUT, Inserm-Pasteur Institute /Versailles Saint-Quentin-en-Yvelines University (representative Inserm CSS)

HCÉRES REPRESENTATIVE

Mr Serge BRIANÇON

REPRESENTATIVES OF SUPERVISING INSTITUTIONS AND BODIES

Ms Armelle BARRELLI, Inserm

Mr Didier CARRIE, Toulouse 3 University

Mr Christelle GUEGAN, Inserm

Mr Alexis VALENTIN, Toulouse 3 University

INTRODUCTION

HISTORY AND GEOGRAPHICAL LOCATION OF THE UNIT

In 1991, a Young DRED team (Direction de la Recherche et des Études Doctorales) named « Groupe de Recherche Interdisciplinaire: Vieillesse, Santé communautaire et Socialisations » was created and directed by Alain Grand. Then, this team evolved to a CJF (Contrat Jeune Formation) Inserm 94-06, under the name of « Epidémiologie et Analyses en Santé Publique: risques, maladies chroniques et handicap » directed by Jacques Pous. Two main topics were developed: Peri natality and Ageing. In 1999, this research entity became the Inserm unit 518. In 2001, after Jacques Pous's death, this research unit restarted under the lead of Hélène Grandjean and was named Inserm unit 558. At that time this unit included 5 research teams respectively named: Ageing, Peri natality and Children handicaps, Epidemiology of atherosclerosis and cardio-vascular diseases, Genomics, biotherapy and public health, and Social inequalities in health. In 2011, the research unit became a mixed Inserm research unit UMR 1027 – Paul-Sabatier University – under the leadership of Sandrine Andrieu. This UMR included the 5 previously mentioned teams, plus an emerging one devoted to pharmaco-epidemiology (EA 3696). Between 2016-2020 the UMR kept the same label and the same leader. The organisation was partly changed.

The UMR is historically located in the buildings of the Toulouse Medical School. Moreover, the team « Peri natality and Children handicaps » is located within the Pôle de Gynécologie-Obstétrique de l'Hôpital Mère-Enfants of the University Hospital.

MANAGEMENT TEAM

Head of the unit (2019-2020) Ms Sandrine ANDRIEU

Project leader (2021-2025): Mr Cyrille DELPIERRE
MS CATHERINE ARNAUD (CO-LEADER)

HCÉRES NOMENCLATURE

SVE6 Santé Publique, Épidémiologie, Recherche Clinique

THEMATICS

The research project of the unit is structured around 4 teams, which perfectly summarize the unit's research topics:

- MAINTAIN includes two axes: MAintain functions and Intrinsic capacities with Aging: Preventive and personalized Interventional research and ARTERRE: Atherosclerosis Risk and Treatment Evaluation towards Risk Reduction Epidemiology;
- SPHERE: Study of Perinatal, pediatric and adolescent Health: Epidemiological Research and Evaluation;
- EQUITY: Embodiment, social ineQualities, life coUrse epidemiology, cancer and chronic diseases interventions methodology;
- BIOETHICS: BIOethics Exploring Trajectories of Health innovations Challenging Society.

The pharmaco-epidemiology team that existed in the past is now working within 2 of the teams: SPHERE and EQUITY.

A transversal program has been set up to gather expertise on the use and analysis of the French medico-administrative data bases SNDS (Système National des Données de Santé). Another transversal scientific animation on "biostatistics and methodology" (InterStats) has been existing since 2012.

UNIT WORKFORCE

Epidémiologie et analyses en santé publique. Risques, maladies chroniques et handicaps		
Active staff	Number 06/30/2019	Number 01/01/2021
Full professors and similar positions	33	30
Assistant professors and similar positions	19	18
Full time research directors (Directeurs de recherche) and similar positions	3	3
Full time research associates (Chargés de recherche) and similar positions	2	3
Other scientists ("Conservateurs, cadres scientifiques des EPIC, fondations, industries, etc.")	3	2
High school teachers	0	0
Supporting personnel (ITAs, BIATSSs and others, notably of EPICs)	47	43
Permanent staff	107	99
Non-permanent professors and associate professors, including emeritus	1	
Non-permanent full time scientists, including emeritus, post-docs (except PhD students)	12	
PhD Students	44	
Non-permanent supporting personnel	12	
Non-permanent staff	69	
Total	176	99

GLOBAL ASSESSMENT OF THE UNIT

At the end of the visit, the experts were sure of the high quality of Unit research themes, results and national/international reputations. The experts were convinced that the chosen projects for the coming years are promising. Globally, the Unit's research output must be considered as excellent if not outstanding with publications in high or very high ranked journals mostly in epidemiology and medical specialty, with a few of them with larger audience.

During the last 5 years, the Unit organized numerous International conferences, researchers were invited to contribute to a high number of international congresses, got several prizes and welcomed many visiting senior scientists and post-docs. While perfectly implanted in the Occitanic region, the Unit is part of international research networks and recognized by WHO as affiliated collaborative center on "Frailty". The Unit used to communicate its research results at the local/regional level as well as nationally and internationally. The important funding obtained during the last 5 years from diverse regional, national and international public and private bodies testified the faith of authorities in the quality of the research unit research topics and achievements. The research orientations on life course approach, biological/social/health determinants, health inequalities, prevention of chronic diseases and functional/cognitive declines and bioethics are impacting the society. Public prevention campaigns are mainly organized locally for the local/regional community. The involvement in training through research looks excellent, even if improvements are still

possible. Indeed, the diversity of projects, longitudinal studies, registers can also explain the difficulty of having a perfect team training involvement.

The Unit leaders took in great consideration the remarks of the previous evaluation campaign. A lot of efforts were accomplished to positively answer and modify the unit global management: numerous and regular meetings of the CoDir and CoLab, increased number of internal seminars. However, progress is possible and already planned by the new Unit director/co-directors.

A support plan for the unit's call for projects would be useful. As mentioned in the detailed report, a refurbishment of several places of work, with more convenient places to work, meet, discuss and have a break are absolutely needed at short term. The number of women researchers exceed the men one. Scientific integrity is apparently perfectly respected. Indeed, the creation/use/share of big data and new analysis methodologies will create future integrity challenges. The safety problem of one building of the unit raised the experts 'concern. The experts have no doubt regarding the sustainability of the ambitious research projects and the scientific research background of the leaders of the different unit teams, who carefully watch at the ecological impact of the daily life and transportations. Knowing the scientific previous achievements of the Unit team leaders and the stability of their involvement in the new five-year project, the experts feel confident. The number of teams and personals could generate management difficulties. The direction of the UMR (one DU and one DUA) may be insufficient to deal with the numerous challenges of such an organisation. In other words, It appears that the administrative help of the scientific team is currently not satisfactory. The proposed innovative and complementary approaches appear scientifically very valuable. The proposed creation of a doctoral school in Public Health is much welcomed. There exists a close collaboration with the Mathematics and Informatic Toulouse Institutes; the balance between internal and external working forces must be preserved.

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