EP PerMed
European Partnership
for **Personalised Medicine**

# EP PerMed 1st Twinning Call for Personalised Medicine (PM) Approaches and Solutions, 2026

PM approaches submitted to EP PerMed in 2026

**Co-funded by the European Union**

EUROPEAN PARTNERSHIP

EP PerMed has received funding from the European Union's Horizon Europe research and innovation programme under grant agreement No 101137129.

# Table of Contents

Introduction ..... 4

Overview of the EP PerMed Twinning Call 2026 Portfolio ..... 5

Personalised Medicine Across Health Categories ..... 7

- Neurological Disorders: A Large and Diverse Personalised Medicine Domain ..... 7
- Cardiovascular Medicine: Accelerating Pharmacogenomic Implementation ..... 9
- Pharmacogenomics and Precision Therapeutics: From Innovation to Clinical Adoption ..... 9
- Healthy Ageing and Chronic Disease Prevention ..... 9
- Oncology and Personalised Prevention ..... 10
- Mental Health and Precision Psychiatry ..... 10
- Advanced Cell Therapies and the Future of Personalised Medicine ..... 11

Conclusion and Outlook ..... 12

Contact ..... 12

Acknowledgements ..... 12

Annex 1. EP PerMed Twinning Call 2026 Proposals Overview (in alphabetical order) ..... 13

Imprint ..... 17

# Introduction

Personalised medicine (PM) is one of the most transformative developments in modern healthcare, offering the opportunity of tailored prevention, diagnosis and treatment to the unique characteristics of patient groups or individuals. According to the definition adopted by the Council of the European Union, PM refers to a medical model that uses the characterisation of individuals' phenotypes and genotypes, including molecular profiling, medical imaging, and lifestyle information, to identify the most appropriate therapeutic strategy for the right person at the right time, to determine predisposition to disease, and to support timely and targeted prevention.

Since the adoption of this definition and the publication of two Strategic Research and Innovation Agendas (SRIAs) for Personalised Medicine in 2015 and 2023, the European Union and the members states have actively supported the research and development of PM approaches and innovations. In a next crucial step, their successful and sustainable implementation into the national and regional healthcare systems needs to be ensured for the benefit of people and society. To this end, the European Partnership for Personalised Medicine (EP PerMed) seeks to directly improve health outcomes by the benefits of PM for patients and citizens throughout Europe and beyond.

Recognising that many PM-solutions and approaches already reached high levels of technological and clinical maturity, the European Partnership launched the 1st so-called Twinning Call 2026 dedicated to support and accelerate PM-implementation. The measure supports collaborations of "Twinning Donors" with an implemented PM-solution or approach, willing to transfer knowledge, expertise, methodologies, workflows, and implementation know-how in this regard to one or more "Twinning Receivers" across borders . The ultimate objective is to enable the receiving organisation/s to adapt, adopt, and sustainably embed a validated PM-solution in their own specific healthcare setting. By facilitating peer-to-peer learning and practical implementation, the Twinning Call contributes directly to PM dissemination, impact and capacity building and thereby the acceleration of PM innovations and a wider adoption of PM practices across national healthcare systems.

This publication presents the majority of approaches submitted to the 1st EP PerMed Twinning Call. While six projects were ultimately funded by the European Partnership, the publication highlights 16 envisioned initiatives in total, reflecting our recognition of the many ambitious and high-quality twinning projects whose innovative approaches and expected impact on PM implementation merit recognition, regardless of funding outcome. By collectively presenting the 2026 portfolio, the document highlights that Europe is building the foundations for the next generation of personalised healthcare.

# Overview of the EP PerMed Twinning Call 2026 Portfolio

The 2026 portfolio highlights the increasingly collaborative nature of PM-implementation *(Table 1)*. Through partnerships spanning 16 countries, the projects facilitate the transfer not only of technologies but also of implementation strategies, clinical workflows as well as training methodologies. Collectively, they contribute to bridging implementation gaps and strengthening collaboration across Europe.

**Table 1. Overview of Twinning Proposals, Participating Countries and Objectives (in alphabetical order)**

| Project Acronym | Donor Country | Receiver Country | Project Aim |
|---|---|---|---|
| **3D PRISMA** | Spain | Poland | To transfer 3D-enabled clinical planning, treatment and rehabilitation methodologies that support personalised medicine implementation. |
| **4i-GenMeds-TWIN** | United Kingdom | Greece | To integrate genomic decision-support tools into community pharmacy services for personalised medication management. |
| **ACT4AUTO** | Germany | Romania | To transfer CAR T-cell therapy expertise and build capacity for personalised cellular therapies in autoimmune diseases. |
| **BCPPA-Italia** | United Kingdom | Italy | To adapt the Better Conversations with Primary Progressive Aphasia intervention for personalised communication rehabilitation in Italy. |
| **BRIDGE-PDE*** | Italy | Spain, Portugal | To transfer and implement a validated newborn screening method for pyridoxine-dependent epilepsy (PDE) in new institutions in Spain and Portugal, enabling early and pre-symptomatic diagnosis of this rare genetic disorder. |
| **CardioPgX-TWIN*** | Spain | Lithuania | To implement cardiovascular pharmacogenomics-guided prescribing and decision support within routine clinical care. |
| **CONNECT-Epi*** | United Kingdom | Italy | To integrate advanced diffusion MRI tractography into personalised decision-making for paediatric epilepsy surgery. |

→

| Project Acronym | Donor Country | Receiver Country | Project Aim |
|---|---|---|---|
| **DINO-PGx** | Italy  | Canada  | To combine digital phenotyping and pharmacogenomics to support personalised care for children with neurodevelopmental disorders. |
| **I-MODE** | France  | Greece  | To deploy the WHO ICOPE digital ecosystem for personalised monitoring and prevention of functional decline in older adults. |
| **IMPACT 4 HEALTH** | Denmark  | Norway  | To implement the HOLBAEK personalised obesity management model across multiple levels of the Norwegian healthcare system. |
| **IMPL-EDIT*** | France  | Spain  | To implement a biomarker-based blood test for differential diagnosis of major depressive disorder and bi-polar disorder within routine mental health services. |
| **NGS/WGS-PGx*** | Switzerland  | Germany  | To transfer an established pharmacogenomics service based on next-generation and whole-genome sequencing into routine clinical practice. |
| **PATHWAY*** | Italy  | Poland  | To transfer a mature personalised neurorehabilitation pathway integrating patient stratification and technology-supported rehabilitation. |
| **PC³-TWIN** | Romania  | Ireland  | To adapt and implement a community-based personalised cancer prevention model for underserved populations. |
| **PGx-Bridge** | Spain  | Portugal  | To establish a sustainable national pharmacogenomics implementation framework supporting safer and more effective prescribing. |
| **TwinSurg** | Türkiye  | Spain  | To implement digital twin-based patient-specific surgical planning and personalised surgical guide development in orthopaedic surgery. |

***Projects selected for funding under the EP PerMed Twinning Call 2026**

All projects submitted to the EP PerMed Twinning Call 2026 collectively demonstrate the growing maturity and diversity of PM-implementation across Europe. These include

pharmacogenomics-guided prescribing, advanced cell therapies, personalised prevention models, digital health ecosystems, patient-specific surgical planning, neurorehabilitation programmes, healthy ageing pathways, and communication-based interventions *(Table 2)*. Importantly, the projects demonstrate that PM is increasingly multidisciplinary and is no longer limited to a small number of specialist fields.

## Personalised Medicine Across Health Categories

**Table 2. Overview of Twinning Projects by Theme**

| Theme | Projects |
|---|---|
| Pharmacogenomics & Precision Therapeutics | NGS/WGS-PGx, PGx-Bridge, CardioPgX-TWIN, 4i-GenMeds-TWIN, DINO-PGx |
| Neurology & Brain Health | BCPPA-Italia, BRIDGE-PDE, PATHWAY, CONNECT-Epi, DINO-PGx |
| Healthy Ageing & Prevention | I-MODE, IMPACT 4 HEALTH, PC³-TWIN |
| Precision Surgery & 3D Technologies | TwinSurg, 3D PRISMA |
| Mental Health & Precision Psychiatry | IMPL-EDIT |
| Advanced Therapies | ACT4AUTO |
| Community-Based Personalised Care | PC³-TWIN, IMPACT 4 HEALTH |
| Digital Health & AI-Enabled PM | DINO-PGx, TwinSurg, I-MODE, CONNECT-Epi, 4i-GenMeds-TWIN |

### Neurological Disorders: A Large and Diverse Personalised Medicine Domain

Neurology emerged as the most prominent health category within the Twinning Call portfolio, reflecting both the complexity of neurological diseases and the growing recognition that PM approaches are essential for improving outcomes in these conditions. The projects in this category collectively showcase how PM is transforming diagnosis, rehabilitation, communication support, neurosurgery, and neurodevelopmental care. One example is **BCPPA-Italia**, which focuses on Primary Progressive Aphasia (PPA), a progressive neurodegenerative condition that affects communication and language abilities. Rather than relying on a traditional treatment paradigm, the project plans to transfer the Better Conversations with Primary Progressive Aphasia intervention from the United Kingdom to Italy. The initiative highlights the growing importance of personalised rehabilitation and person-centred care, demonstrating that PM encompasses not only molecular and genetic interventions but also highly individualised communication strategies designed around the ev7ryday needs of patients and their families. The project also provides an example of how personalised communication rehabilitation can be embedded within routine neurorehabilitation services across different healthcare systems.

The **PATHWAY** project highlights another important dimension of PM through technology-enabled neurorehabilitation. By transferring a mature personalised neurorehabilitation model from Italy to Poland, PATHWAY explores how validated rehabilitation technologies can be integrated into structured governance frameworks and patient-stratified care pathways. The initiative represents an example of how implementation activities can support the adoption of personalised rehabilitation approaches within healthcare systems.

Similarly, **CONNECT-Epi** illustrates the application of advanced imaging technologies in supporting personalised clinical decision-making. The project plans to transfer cutting-edge diffusion MRI tractography expertise from King's College London to Meyer Children's Hospital in Italy, enabling the integration of patient-specific brain connectivity maps into epilepsy surgery planning. By allowing surgeons to visualise the unique neural architecture of each child, the project aims to demonstrate how imaging data can directly influence therapeutic decisions and contribute to personalised surgical approaches.

Another project **DINO-PGx**, plans to combine digital phenotyping with pharmacogenomics for children with neurodevelopmental disorders. The integration of cognitive and behavioural data captured through digital gaming environments with pharmacogenetic information would create a novel bio-digital approach to personalised paediatric care. The project currently focuses on ADHD, autism spectrum disorder, and dyslexia, and explores how multiple sources of patient information can be combined to support more individualised assessment and management.

Finally, the **BRIDGE-PDE** project focuses on the implementation of personalised medicine approaches within newborn screening programmes. The initiative aims to transfer a validated screening method for pyridoxine-dependent epilepsy (PDE), a rare genetic disorder in which early identification can prevent severe neurological consequences. Through knowledge transfer, workforce training, and the harmonisation of screening protocols, the project seeks to support the integration of biomarker-based diagnostics into routine newborn screening services. Beyond improving opportunities for early and pre-symptomatic diagnosis, BRIDGE-PDE demonstrates how personalised medicine principles can be applied at a population level through preventive public health programmes and the systematic identification of individuals who can benefit from targeted interventions from the earliest stages of life. Notably, BRIDGE-PDE is the only project within the Twinning Call portfolio involving two receiver countries, with expertise being transferred from Meyer Children's Hospital in Italy to partners in the National Institute of Health Dr. Ricardo Jorge in Portugal and the Hospital Clínic de Barcelona in Spain. This unique three-country collaboration highlights the project's potential to accelerate knowledge dissemination, facilitates harmonised implementation practices across healthcare systems, and maximises the impact of personalised medicine approaches beyond a single national setting.

Together, these projects highlight the range of PM applications represented within the Twinning Call portfolio in the field of neurological disorders. While not necessarily reflective of all development across the field, they offer a snapshot of how PM approaches can be applied across areas such as rehabilitation, communication support, advanced imaging, digital phenotyping, and highly tailored care pathways.

## Cardiovascular Medicine: Accelerating Pharmacogenomic Implementation

Cardiovascular medicine is also represented within the portfolio, particularly through projects focusing on the implementation of pharmacogenomics in routine care.

**CardioPgX-TWIN** supports the transfer of a cardiovascular pharmacogenomics implementation framework from Spain to Lithuania. The project will focus on the practical realities of implementation, including governance models, clinical workflows and decision-support systems. By addressing the organisational and operational requirements necessary for routine pharmacogenomic prescribing, this initiative provides an example on how PM approaches can be incorporated into cardiovascular care pathways.

The broader contribution of CardioPgX-TWIN lies in its role as an implementation blueprint. Rather than developing a new technology, it aims to support the adoption of existing pharmacogenomics evidence and practises within a new healthcare context.

## Pharmacogenomics and Precision Therapeutics: From Innovation to Clinical Adoption

Across the Twinning Call portfolio, pharmacogenomics is represented in several projects focused on the implementation and adoption of personalised prescribing approaches in clinical practice.

The **NGS/WGS-PGx** project explores pharmacogenomics services can exploit data acquired by next-generation sequencing and whole-genome sequencing to support safer and more effective prescribing. Through the transfer of implementation expertise from Switzerland to Germany, the project is planning to implement the use of genomic technologies within clinical pharmacogenomics workflows to support lifelong therapeutic optimisation.

Similarly, **PGx-Bridge** supports the transfer of pharmacogenomics implementation expertise from Spain to Portugal. Through laboratory validation, clinician training and real-world implementation pilots, the project focuses on building capacity for the adoption of pharmacogenomics-informed prescribing practices.

The **4i-GenMeds-TWIN** project aims to extend these activities into community pharmacy settings. By integrating pharmacogenomics, whole-genome sequencing, and medication adherence management, it explores how PM can move beyond specialist clinics and become accessible closer to patients' everyday lives. This project also highlights the potential role of pharmacists in supporting the delivery of personalised healthcare services, while improving pharmacogenomic and genetic literacy and expanding the workforce capable of delivering PM services.

## Healthy Ageing and Chronic Disease Prevention

The Twinning Call also includes projects focused on personalised prevention and healthy ageing, areas expected to become central priorities for European healthcare systems as demographic pressures intensify.

**I-MODE** represents an example of a project that focuses on personalised prevention in older adults. Through the transfer of the WHO ICOPE digital ecosystem from France to Greece, the

project aims to support proactive monitoring of intrinsic capacity, early identification of functional decline, and implementation of personalised prevention plans. Rather than focusing on disease treatment, the project seeks to preserve health, autonomy, and quality of life among older adults, demonstrating how PM can be applied in preventive care and healthy ageing contexts.

Similarly, **IMPACT 4 HEALTH** focuses on personalised approaches to obesity management. By transferring the HOLBAEK Model from Denmark to Norway, the project recognises obesity as a complex, multifactorial disease that requires individualised interventions based on biological, behavioural, psychosocial, and environmental factors. The project which plans to involve thousands of patients and healthcare professionals, serves as an example of how personalised lifestyle and behavioural interventions can be delivered on a large scale and generate impact beyond the individual patient level.

## Oncology and Personalised Prevention

Cancer prevention is represented within the Twinning Call portfolio through **PC³-TWIN**, a project focused on personalised prevention approaches for underserved populations. Rather than focusing on personalised treatment, the project targets personalised prevention among underserved populations by combining behavioural risk stratification, social network analysis, community engagement, and prevention planning. Through the transfer of Romania's Community-Embedded Network-Informed Personalised Prevention Package to Ireland, the project aims to expand the boundaries of PM and demonstrate that population health and precision prevention can coexist within a common implementation framework. In doing so, it provides an example of how personalised prevention approaches may be applied within broader public health initiatives.

## Mental Health and Precision Psychiatry

Mental health is represented within the Twinning Call portfolio through initiatives that explore the application of PM approaches to psychiatric care.One example is the **IMPL-EDIT** project which supports the adoption of EDIT-B. EDIT-B is a first-in-class blood test designed to support clinicians in differentiating major depressive disorder from bipolar disorder, addressing the critical unmet need of patients who currently wait an average of eight years for an accurate diagnosis of bipolar disorder. Through the introduction of RNA editing-based biomarkers into psychiatric assessment pathways, this project explores how biological data contribute to clinical decision-making in mental health settings.

## Precision Surgery and Digital Twins

The Twinning Call portfolio also includes projects focused on the application of PM concepts within surgical disciplines.

**TwinSurg** aims to transfer a digital twin and patient-specific surgical planning platform from Türkiye to Spain. By integrating imaging, anatomical modelling, simulation, and additive manufacturing, the project enables the creation of customised surgical guides tailored to individual patients. This approach demonstrates how digital technologies can support personalised approaches to surgical planning and intervention.

Similarly, **3D PRISMA** focuses on the transfer of organisational expertise related to the implementation of 3D-supported healthcare solutions across patient journeys. The project thus provides an example of how 3D technologies can support treatment planning, rehabilitation, and care delivery within personalised healthcare settings.

## Advanced Cell Therapies and the Future of Personalised Medicine

Advanced therapy medicinal products, including cell-based therapies, are represented within the Twining Call portfolio through projects focused on knowledge transfer and capacity building.

**ACT4AUTO** contributes to this evolving field through the transfer of CAR T-cell therapy expertise for autoimmune diseases from Germany to Romania. By supporting knowledge exchange and capacity building, the project plan to facilitate the dissemination of innovative cellular therapy approaches that use a patient's own genetically modified cells to modulate the immune system. In addition to its scientific and clinical objectives, this initiative addresses several enabling factors that are essential for the successful implementation of personalised cellular therapies, including infrastructure, quality management, regulatory readiness, workforce skills, and sustainability. As such, ACT4AUTO can act as an example of how collaborative capacity-building initiatives can support the adoption of advanced therapies across different healthcare and research environments.

## Conclusion and Outlook

The presented Twinning Call 2026 portfolio reveals on a local level a diverse and rapidly evolving landscape of PM across Europe. Collectively, these initiatives demonstrate that PM successfully extends beyond genomics, encompassing areas such as prevention, medical imaging, surgery, healthy ageing and pharmacogenomics among others.

Most importantly, these proposals demonstrate a promising development from PM research achievements and innovation to their implementation in real-world healthcare across Europe by dedicated providers in the local setting, like hospitals. Through the transfer of mature solutions, capacity building, and healthcare system integration, they contribute to a more equitable, interconnected, patient-centred and sustainable Healthcare. Collectively, the projects reflect not only a glance at the current state of PM implementation, but also the future direction: healthcare in which prevention, diagnosis, treatment, and monitoring are increasingly tailored to the unique characteristics and needs of groups or even individuals.

Looking ahead, the Twinning Call proposals and projects aim to support cross-border knowledge exchange for the benefit of patients and contribute to the wider adoption of PM practices. The projects funded are expected to generate valuable insights into the transfer, adoption and implementation of PM approaches in different healthcare settings. EP PerMed and the European Commission follows the progress and the lessons learned with interest. This will be used for future activities, at least one more Twinning Call is planned. Results, news and the new call will be published on the EP PerMed website: EP PerMed website

## Contact

eppermed@dlr.de and ioanna.tsea@eithealth.eu

## Acknowledgements

We would like to thank all applicants of the Twinning Call 2026 for their interest, valuable proposals and the support of this document. We are also grateful to the project coordinators and partners who contributed information and materials that supported the preparation of this document. We wish all funded projects continued success in their implementation and look forward to following their progress and achievements over the coming years.

The information presented in this publication has been reproduced with the permission of the respective project coordinators, consortium members or organization concerned.

# Annex 1. EP PerMed Twinning Call 2026 Proposals Overview (in alphabetical order)

| Project | Coordinator Organisation (Country) | Partner Organisation (Country) | Project Description |
|---|---|---|---|
| **3D PRISMA** PeRsonalised medicine through Implementation and Scaling of 3D Methodologies Adoption | Consortium of Health and Social Care of Catalonia (Spain) | Klaster LifeScience Krakow Foundation (Poland) | Transfers organisational know-how and best practices for applying 3D methodologies to support patient-specific planning, treatment and rehabilitation across healthcare pathways. |
| **4i-GenMeds-TWIN** Twinning for the Implementation of Integrated, Individualised, Intelligent and Inter-professional Genomic and Clinical Data-Driven Medication Management | maMEDS (Greece) | StoreGene Ltd (United Kingdom) | Integrates pharmacogenomics and whole-genome sequencing into community pharmacy services to support personalised medication management and adherence. |
| **ACT4AUTO** Advanced Cell Therapy for AUTOimmune Diseases | Iuliu Hatieganu University of Medicine and Pharmacy Cluj-Napoca (Romania) | University Hospital Würzburg (Germany) | Builds capacity for CAR T-cell therapy in autoimmune diseases, enabling wider adoption of personalised cellular immunotherapies in Eastern Europe. |
| **BCPPA-Italia** Adapting Better Conversation with Primary Progressive Aphasia (BCPPA) to Italian | Istituti Clinici Scientifici Maugeri IRCCS (Italy) | University College London (United Kingdom) | Adapts and implements an evidence-based personalised communication rehabilitation programme for people living with Primary Progressive Aphasia and their communication partners. |

→

| Project | Coordinator Organisation (Country) | Partner Organisation (Country) | Project Description |
|---|---|---|---|
| **BRIDGE-PDE**<br>BRIdging knowleDGE for the implementation of Pyridoxine-Dependent Epilepsy in Newborn Screening Programs | Meyer Children's Hospital (Italy) | National Institute of Health Dr. Ricardo Jorge (Portugal); Hospital Clínic de Barcelona / Fundació de Recerca Clínic Barcelona-Institut d'Investigacions Biomèdiques August Pi i Sunyer (Spain) | Transfers and implements a validated newborn screening method for pyridoxine-dependent epilepsy, enabling early diagnosis of a rare genetic disorder through biomarker-based screening, capacity building, and harmonised implementation of personalised medicine approaches within public health systems. |
| **CardioPgX-TWIN**<br>Strengthening Cardiovascular Pharmacogenomics Implementation through Twinning | Lithuanian University of Health Sciences (Lithuania) | Universidad de Extremadura / INUBE (Spain) | Implements pharmacogenomics-guided prescribing in cardiovascular medicine through governance frameworks, clinician training and decision-support systems. |
| **CONNECT-Epi**<br>Personalised Connectivity-Guided Decision-Making in Pediatric Epilepsy Surgery | Meyer Children's Hospital IRCCS (Italy) | King's College London & King's College Hospital (United Kingdom) | Transfers advanced diffusion MRI tractography expertise to support personalised neurosurgical planning and safer epilepsy surgery in children. |
| **DINO-PGx**<br>Integrating Digital Phenotyping and Pharmacogenomics for Stratified Pediatric Neurodevelopmental Care | PillCheck (Canada) | Paperbox Health (Italy) | Combines digital cognitive profiling and pharmacogenomics to enable stratified and personalised care for children with neurodevelopmental disorders. |
| **I-MODE**<br>ICOPE Monitor Deployment Project | Toulouse University Hospital / IHU HealthAge (France) | University of West Attica (Greece) | Deploys the WHO ICOPE Monitor digital ecosystem to support personalised healthy ageing, early detection of functional decline and preventive geriatric care. |

→

| Project | Coordinator Organisation (Country) | Partner Organisation (Country) | Project Description |
|---|---|---|---|
| **IMPACT 4 HEALTH** Implementing a Personalised Medicine Care Pathway for Obesity Across Healthcare Systems | Region Sjælland (Denmark) | Southern Norway Hospital Trust (Norway) | Implements the HOLBAEK personalised obesity care pathway, combining biological, behavioural, psychosocial and environmental factors to improve obesity prevention and treatment. |
| **IMPL-EDIT** Accelerating the implementation and adoption of the first-in-class aid-to-diagnosis blood test in precision psychiatry, myEDIT-B, from France to Spain | ALCEDIAG (France) | ITA Clinics / ITA Salud Mental (Spain) | Implements the CE-marked EDIT-B blood test in routine mental health services to improve the differential diagnosis of major depressive disorder and bipolar disorder and strengthen precision psychiatry practices. |
| **NGS/WGS-PGx** Pharmacogenetics based on NGS/WGS | Universitäts-spital Zürich (Switzerland) | Heidelberg University Hospital (Germany) | Transfers a mature pharmacogenomics testing and consultation service based on next-generation and whole-genome sequencing to support safer and more effective medication prescribing. |
| **PATHWAY** Personalised Access Transfer for Healthcare Within Across-border sYstems – Implementation of a Personalised Neuro-rehabilitation Pathway | IRCCS San Camillo Hospital (Italy) | University of Rzeszów (Poland) | Transfers a mature personalised neuro-rehabilitation model integrating patient stratification, digital technologies and structured rehabilitation pathways. |
| **PC³-TWIN** Implementing Community-Embedded Personalised Cancer Prevention for Vulnerable Populations | Center for Innovation in Medicine (Romania) | University College Dublin (Ireland) | Transfers a community-based personalised cancer prevention model using socio-behavioural risk stratification and community engagement to improve prevention uptake among vulnerable populations. |

→

| Project | Coordinator Organisation (Country) | Partner Organisation (Country) | Project Description |
|---|---|---|---|
| **PGx-Bridge**<br>Bridging Excellence in Clinical Uptake of Pharmacogenomics | National Institute of Health Dr. Ricardo Jorge (Portugal) | Universidad de Extremadura / INUBE (Spain) | Adapts and implements a validated pharmacogenomics programme to improve medication safety, effectiveness and healthcare system readiness for genomic-guided prescribing. |
| **TwinSurg**<br>Technology Transfer and Clinical Implementation of Digital Twin-Based Patient-Specific Surgical Planning | Istanbul University-Cerrahpaşa / CAST (Türkiye) | Fundació Sant Joan de Déu / Parc Sanitari Sant Joan de Déu (Spain) | Implements digital twin-based surgical planning and patient-specific instrumentation to support personalised orthopaedic surgery. |

# Imprint

The European Partnership for Personalised Medicine (EP PerMed) is coordinated by:

**DLR Projektträger**
Deutsches Zentrum für Luft- und Raumfahrt e.V.
Division Health | Innovations for Disease Control
Heinrich-Konen-Str. 1
53227 Bonn, Germany

www.DLR-PT.de | www.eppermed.eu

**Printing**
Meinders & Elstermann GmbH & Co. KG, Belm

Bonn (Germany), October 2026