## Pfizer Independent Grants for Learning & Change

## Request for Proposal

## Programs Toward Improving the Quality of Depression Treatment

Geographic Scope	Japan
Contact Information	If you have questions regarding this RFP, please direct them in writing to the Japan Grant Office, MEG-J, <u>meg.japan@pfizer.com</u> with the subject line, "Depression Treatment".
Applicant Eligibility Criteria	Applications are invited from organizations such as 1.Professional schools or universities 2.Organizations , associations , or government agencies Grants can only be awarded to organizations, not individuals.
RFP Released	September 1, 2017
Clinical Area of Interest	Depression
Detail of Clinical Area	Depression is one of mood disorders with depressed mood and significant decrease of interest and pleasure as prominent symptoms, categorized as a mental disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) <sup>1)</sup> . While a Japanese large-scale epidemiological study reported a 12-month depression prevalence of 1% to 2% and a lifetime depression prevalence of 3% to 7% almost 10 years ago, patients with mood disorders are recently increasing according to the patient surveillance conducted by the Ministry of Health, Labor and Welfare. Depression has been drawing attention in recent years because of its adverse effect on patient quality of life (QOL) and its significant adverse socioeconomic effect. <sup>2</sup> References: 1) American Psychiatric Association, 2013 2) Kawakami, N.: Journal of Clinical and Experimental Medicine. 219(13):925-929, 2006
Out of Scope for this RFP	Investigational research program such as interventional clinical trials, non- interventional studies including epidemiology studies or non-clinical studies.

Purpose of this RFP	<ul> <li>To support educational activities to improve the quality of depression treatment. Activities to fill the practice and quality gaps in the following matters are the specific targets of this RFP. Education may be provided to physicians as well as to other medical professionals such as pharmacists, nurses, and clinical psychologists.</li> <li>Interview skills to make appropriate diagnosis</li> <li>Skills to develop early physician-patient relationships and treatment strategies</li> <li>Psychosocial practice skills</li> <li>Proper use of medication (benzodiazepines, antidepressants, antipsychotics, etc.)</li> <li>Introduction of an assessment scale to the daily clinical practice and continuous assessment</li> </ul>
Background	Diagnoses of mental disorders are known for low inter-rater agreement. Diagnoses and treatment strategies greatly vary even among psychiatrists. The reasons for inconsistent diagnoses include unidentified causes of many mental disorders and absence of clear indicators such as diagnostic imaging and disease markers. Therefore, holistic factors that are hard to standardize play an important role in diagnosis and treatment of mental disorders. <sup>1-31</sup> In the psychiatric specialist training program started in 2004 to develop excellent psychiatrist, physicians are required to complete two-year postgraduate clinical training (initial training), receive hands-on training under the supervision of an attending psychiatrist at a designated training institution for at least 3 years, and pass the qualification test to become psychiatrist (1,080 physicians have passed the test; pass rate, 75.5%). However, physicians already practicing in the area of psychiatry before 2004 were required only to pass the test as long as they met certain qualifications (10,500 physicians have passed the test; pass rate, 96.5%). The test-based certification was considered too easy to receive by some. Whether the quality of psychiatry/mental health care is actually guaranteed by the certification method is not always clear. <sup>41</sup> Since psychiatry is an elective requirement in the initial training, physicians who do not intend to become psychiatrists may not be trained in the area of psychiatry. <sup>31</sup> While public concerns for depression and its treatment have been increasing in recent years, clinical psychiatrists find it hard to develop depression treatment strategies because of the diversified pathologies. Clinicians often do not have shared recognition of diagnostic and assessment process and what specifically needs to be considered for the development of treatment strategies. <sup>51</sup> The Japanese depression treatment guideline needs to be promoted, and educational opportunities to practice the guideline needs to be promoted, and educational opportunit

	<ul> <li>References:</li> <li>1. Japan Committee of Prevention and Treatment for Depression <u>http://www.icptd.jp/medical/point_10.pdf</u></li> <li>2. Miyaoka, H: Japanese Journal of Psychiatric Treatment. 31(3):281-2,2016</li> <li>3. Takeda, M.: Psychiatria et Neurologia Japonica. 118(5):311-320, 2016</li> <li>4. Yamauchi, T.: Psychiatria et Neurologia Japonica. 118(5):287-303,2016</li> <li>5. Ogasawara, K; Ozaki, N.: Japanese Journal of Clinical Psychopharmacology. 20(5):495- 504,2017</li> <li>6. Watanabe, K.: Japanese Journal of Clinical Psychopharmacology. 20(5):491-494,2017</li> <li>7. Outline of the estimates of economic benefit of suicide/depression prevention (social loss caused by suicide/depression). Ministry of Health, Labour and Welfare <u>http://www.mhlw.go.jp/stf2/shingi2/2r9852000000sh9m-att/2r9852000000shcq.pdf</u></li> </ul>
Amount of funding	Total funding available for this RFP is 20,000,000 JPY. Individual grant requests should not be more than 10,000,000 JPY.
Due date	October 15, 2017
How to Submit	Please go to http://www.cybergrants.com/pfizer/loj and sign in. First-time users should click "REGISTER NOW". Select the following Area of Interest: Depression Treatment in Japan Requirements for submission: Complete all required sections of the online application and upload the completed proposal. Be advised the system is designed for a two-stage submission process: 1) Letter of Intent (LOI) and 2) Full Proposal. However, for this RFP, we are not using a LOI. Instead, the only stage will be submission of the Full Proposal. Complete all required sections of the online application. In the "Required Uploads" section, please follow the table below. For Field Name: Please Upload: Eletter of Intent LOI Additional Required Uploads Budget If you encounter any technical difficulties with the website, please click the "Need Support?" link at the bottom of the page. IMPORTANT: Be advised applications submitted through the wrong application type and/or submitted after the due date will not be reviewed by the committee.

## Proposal requirements

Include the following sections

- A. Cover page (do not exceed 1 page):
  - 1. Title: Please include the project title
  - 2. Abstract: Please include an abstract summary of your proposal including the overall goal, target population, and assessment. Please limit this to 250 words.
- B. Table of Contents (no page limit)
- C. Main Section of the proposal (not to exceed 10 pages)
  - 1. Project Background and Goal
  - 2. Target Audience
  - 3. Project Members
    - a. Identify the project leader for this project
    - b. Identify staff who will serve as guide/coach for the practices
  - 4. Currnet Assessment of need in target area:
  - a. Discuss the Burden of Depression. Provide information on Depression.
  - 5. Existing Projects:
    - a. If appropriate, show how this project builds upon existing work, pilot projects, or ongoing projects developed either by your institutions/organization or other institutions/organization related to this project.
  - 6. Evaluation Design & Dissemination of Results:
    - a. In terms of the metrics used to assess the need for this project, describe how you will determine if the practice gap was addressed for the target group.
      - Identify the sources of data that you anticipate using to make the determination.
      - Describe how you expect to collect and analyze the data.
      - Describe how you will determine if the results evaluated are directly related to the intervention described in this proposal
    - b. Quantify the amount of change expected from this project in terms of your target audience (e.g., a 10% increase over baseline or a decrease in utilization from baseline between 20-40%)
    - c. Describe how you plan for the project outcomes to be disseminated at the local/regional level.
- D. Anticipated Project Timeline
- E. References(no page limit)
- F.. Organization Detail(not to exceed 3 pages)
  - 1.Organization name
  - 2.Organization outline
  - 3. Organization Board Members
- G. Detailed Budget (complete Budget Template; no page limit for the Excel file of the narrative)
- H. References (no page limit)

Grant review and Notification	Applications will be reviewed by a panel of independent experts. All applicants will be notified of the outcome of their grant application by email in November. Applicants may also be contacted to provide further clarification in order to support the review of any applications.
Terms and Conditions	<ol> <li>This RFP does not commit Pfizer or its partners to award a grant or a grant of any particular size if one is awarded, nor to pay any costs incurred in the preparation of a response to this request.</li> <li>Pfizer reserves the right to accept or reject any or all applications received as a result of this request, or to cancel this RFP in part or in its entirety, if it determines it is in the best interest of Pfizer to do so.</li> <li>For compliance reasons and in fairness to all applicants, all communications about the RFP must come exclusively to Pfizer at the email address meg.japan@pfizer.com. Applicants should not contact other departments within Pfizer regarding this RFP. Failure to comply will disqualify applicants.</li> <li>Complete RFP Terms and Conditions are available for review at www.pfizer.com/files/PfizerIGLC_RFP_TermsandConditions_2017Apr.pdf</li> </ol>