Annual Report 2025

ecraid

“We are proud to see that four years after our start, Ecraid is seen as an established name.”

“I have seen Ecraid bloom.”

2025 marked Marc Bonten’s last year as Ecraid’s first CEO. Years ago, Marc and a group of highly engaged experts in clinical research on infectious diseases began dreaming about better collaboration to fight them. Together, they pioneered what is now known as Ecraid. In the past four years, Marc led the ‘start-up’ Ecraid to maturity and established it as an efficient, robust, high-quality, and trustworthy partner in infectious diseases research.

I have had the honour of serving as the new CEO, since 1 January 2026, building on the legacy of Marc and others. I have been part of Ecraid’s journey as a member of the Coordinating Committee for several years. During these years, I have seen Ecraid bloom. When you read this annual report, you will notice how involved Ecraid is in the clinical research on infectious diseases.

It is normal for any organisation to encounter hurdles along the way. For us 2025 was a challenging year with a few major projects that stopped unexpectedly. But we managed to address that and still closed the year with a positive financial result. I really see this as a stress test for the organisation. And we passed it, thanks to our very professional team.

Ecraid is built on the pillars of our extensive network of sites, the expertise of our Clinical Liaisons, the strategic advice of our Coordinating Committee, and our operational excellence. In addition, we create and deliver educational programs and opportunities for Young Investigators to connect and learn about infectious diseases research.

A major project in 2026 will be the development of our 5-year strategy. We are fortunate to have incredible partners, employees, and experts to help us in this process. It is important that we tailor our mission and vision to our changing environment, and these will then help us define our strategic objectives, which will serve as the basis for our daily activities. I’m really looking forward to it and hope you will value the current impression of Ecraid’s performance in 2025.

Lennie Derde
CEO Ecraid

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An introduction to Ecraid

Ecraid is a not-for-profit organisation focused on reducing the impact of infectious diseases on individual health and on society as a whole. Started in January 2022, Ecraid built on the legacies of major EU-funded projects that demonstrated the value of collaboration between academia and industry. Ecraid now offers services both for industry- and investigator-driven research on infectious diseases. Several academic centres across Europe collaborate through Ecraid, which is headquartered in the Netherlands.

Full breadth

Ecraid provides a full breadth of clinical studies on infectious diseases: observational studies and interventional studies in different phases. Ecraid does this from the study design to protocol development, site selection and, finally, clinical study report. Ecraid also helps improve the European scientific response to an infectious outbreak or a pandemic. With its specialised warm-base network, Ecraid can respond to an outbreak more quickly. Ecraid will use any resources to accelerate research in case of an emerging pandemic.

Fast, efficient, high quality

Because of its warm-base network, Ecraid can execute trials faster and more efficiently, with a high level of quality. In a warm-base network, sites are used to working with standardised processes and procedures and can start up quickly with well-trained staff. A continuous flow of studies is needed to maintain the warm-base network. Ecraid has multiple studies running with sites participating from the networks it gives access to. Including a hospital network with over 1,200 hospitals, and a GP network with over 250 GPs. Ecraid helps less-experienced sites develop their potential for clinical research, thus expanding the number of experienced sites and augmenting the capabilities of the network to conduct more studies in parallel.

Perpetual basis

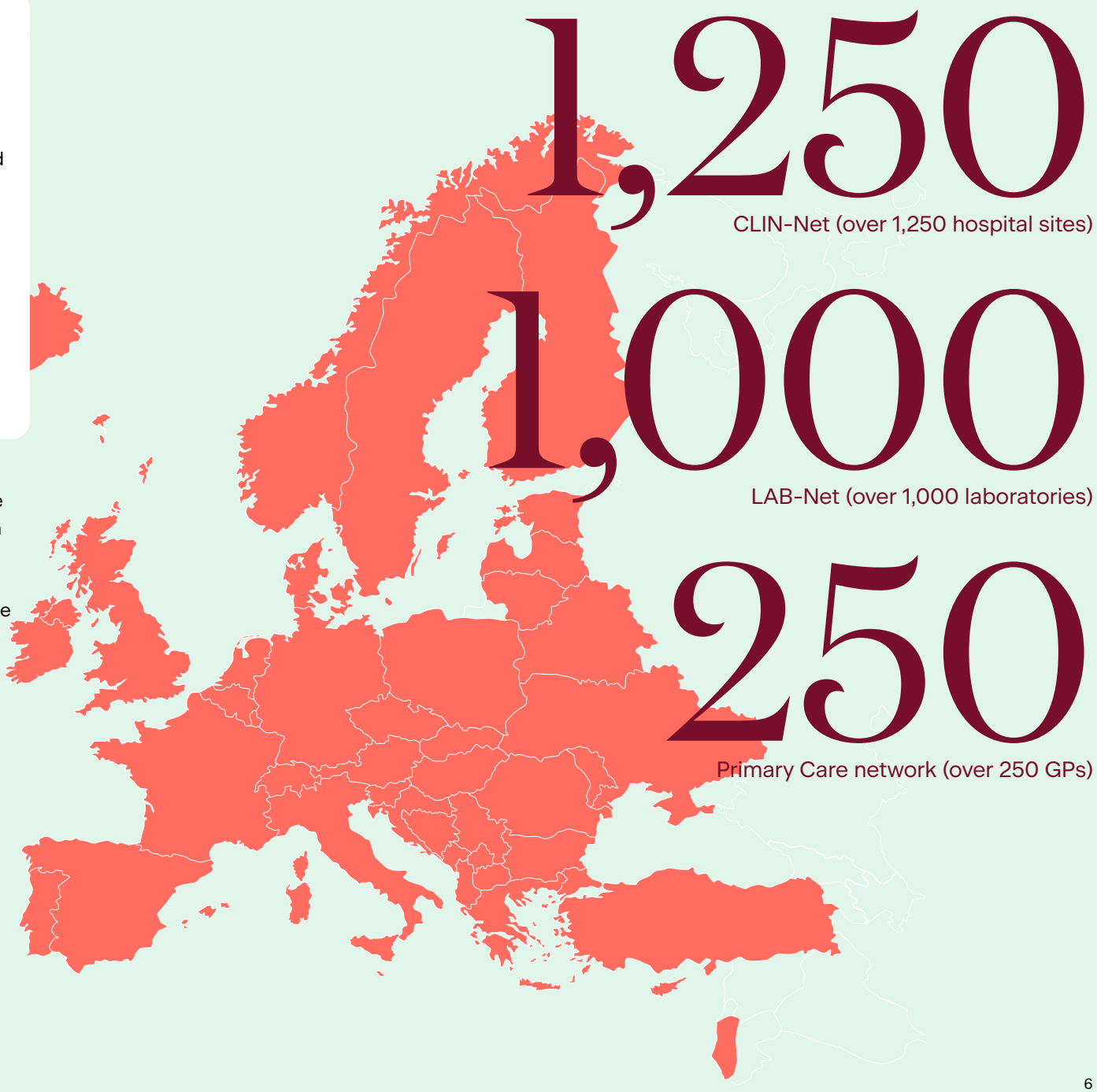
Among the ongoing studies are the Perpetual Observational Studies (POS), which are multicentre observational clinical studies that enrol patients on an ongoing basis. With the present set of POS, data and clinical samples are systematically collected. Partners can make use of this data or plug in their own questions. With their perpetual character, POS enable continuity in clinical research. This also applies to the highly innovative concept of Adaptive Platform Trials, with which Ecraid has gained experience through REMAP-CAP, ECRAID-Prime, and others.

Ecraid is much more than an organisation aimed at carrying out clinical trials. Ecraid is a research network where knowledge of infectious diseases can be shared and new methods of clinical research can be developed together. It is a movement where young talent and experienced experts – from both academia and industry – connect to collaborate and learn.

EPI-Net

Beyond the direct execution of clinical trials, Ecraid plays a crucial role in enhancing European epidemiological understanding and data utilisation for infectious disease research. EPI-Net is an essential component within Ecraid and aims to harmonise and connect various European disease surveillance systems by integrating clinical, microbiologic, and public health data. By leveraging its data repository and epidemiological expertise, EPI-Net directly supports Ecraid's clinical research activities, including guiding site selection for new trials and enabling innovative analyses of infectious disease burden.

Ecraid strives to create real Europe-wide coverage of its network, aggregating the potential European academia has to offer in research on infectious diseases. Broad European coverage also gives access to specific populations where the prevalence of a pathogen is high. We also have the detailed information where to find these populations. This targeting shortens the time needed to reach the required number of patients in a trial.



1,250

CLIN-Net (over 1,250 hospital sites)

1,000

LAB-Net (over 1,000 laboratories)

250

Primary Care network (over 250 GPs)

Report from the Management Board – Passed the stress test

2025 was the year to demonstrate that Ecraid was ready for a sustainable future without funding from ECRAID-Base. In previous years, we built a professional organisation with a warm-base network that could design and execute multiple impactful (platform) studies at the same time. We knew that some grants would conclude in 2025 and anticipated that. What we did not foresee was the abrupt halt of three major projects during 2025. This had a substantial impact, and we had to act quickly and decisively; it was a stress test for the organisation. Fortunately, we passed the test, which showed that we have also built a robust organisation. It underscored the importance of a flexible layer and a conservative financial policy. It also underscored the importance of a good mix of projects: both public and private, and both short-term and long-term projects.

2025 was also the year in which we introduced our first Ecraid Foundation Science Meeting and the Ecraid Young Investigator Ambassadors program. Both examples demonstrate our dedication to advancing the field of clinical research on infectious diseases.

An established name

With revenue up 13.4% and a small operating margin, we concluded 2025 satisfactorily. We are financially sustainable and see an increasing interest in Ecraid. We are proud to see that four years after our start, Ecraid is seen as an established name. This is a major accomplishment of our motivated, young, and international team, led by Marc Bonten, for whom 2025 was his last year as CEO.

Science first

Ecraid is rooted in academia and will always put science first. In addition, to combat the threat of infectious diseases, we always strive to make a concerted effort to connect people and share knowledge. In 2025, we organised the first Ecraid Foundation Science Meeting, a two-day symposium that was held in Portugal. The Science Meeting brings together leading experts, researchers, and regulatory bodies for insightful discussions and collaborative exchanges on infectious diseases. The Science Meeting also aimed to connect academia and industry.

As educational activities, we organised nine collaborative courses with ESCMID, ERS, GARDP, and others. We are dedicated to developing new research talent. The Better Methods PG Course in Athens was very successful, with 55 early-career investigators. Sharing knowledge and boosting collaboration are also reasons we actively seek out and participate in collaborative initiatives like CoMeCT and VAC4EU.

In 2025, we completed a needs assessment for early-career investigators and introduced the Ecraid Young Ambassadors

program. At the end of 2025, there were three Ecraid Young Ambassadors. They play an active role in supporting Ecraid's education, outreach and community-building initiatives.

Continuously improving business operations

> " ...we adapted our staff population to the new reality."

The unforeseen contract cancellations heavily impacted the organisation in 2025. We had to delay planned improvement activities or postpone them to 2026. With a reduction of the flexible layer combined with natural attrition, we adapted our staff population to the new reality. We recognise the impact of this on individuals and teams, still we are content that our organisation proved to be resilient and managed to respond to the unforeseen challenges and conclude the year in a positive way. We even managed to improve some important KPIs like a reduction in sick leave (-0.24%) and a job offer rejection rate of 0%.

In 2025, we validated the strength of our internal processes through a mock EC Audit, which yielded a positive outcome. With our ambitions, it is important to keep improving our business operations. We also introduced a monthly financial Business Intelligence (BI) report, which helps us to identify risks at an early stage and improves our ability to speed up decision-making. Other enhancements include, for example, the incorporation of SME Safety and Regulatory improvements (such as informed consent) and the execution of GCP-R3 training for operational teams.

A major step in 2025 for our organisation was the launch of the Site Management Organisation (SMO) as a distinct entity within Ecraid. Although we already have a network of more than 1,250 hospitals, the Utrecht SMO is the only site where Ecraid operates itself and receives participants for research. The site mainly participates in vaccination studies and offers us the opportunity to learn what our network sites experience through. We are now looking at possibilities to make our SMO a hub for vaccination studies in the Netherlands and to investigate whether it would be a good model for building a European network for (vaccine) studies with healthy volunteers.

The Ecraid Clinical Liaison (ECL) council, established in 2024, turned out to be very valuable, with highly engaged members who have valuable insights into the practice of clinical research on infectious diseases in their country or region. In 2025, we welcomed four new ECLs: Lithuania, Portugal, Czechia, and Georgia. Their addition further strengthened the council's geographic reach and expertise, enhancing Ecraid's ability to connect with and support the clinical research community across Europe.

Maintaining a pipeline of potential projects

The unforeseen halt of three major projects mentioned before highlighted the importance of organisational agility. Not only by downsizing the workforce, but also by quickly identifying new putative projects. Maintaining a strong pipeline of potential commercial projects is a requirement for this, and our business development and marketing managers play a key role in ensuring that such opportunities continue to be developed and pursued.

In 2025, we successfully implemented HubSpot to further professionalise these disciplines. HubSpot is a digital platform for customer relationship management and marketing that enables us to control the marketing and sales funnel. Using HubSpot, we rolled out our first marketing campaign: Partner for Impact in the second part of 2025. This campaign was successful and led to 57 new leads.

The experience of 2025 showed that it is important to not only attract new assignments but also to maintain a healthy mix of long- and short-term projects. This makes us less vulnerable to sudden project halts. Our grant management team plays an important role. The team delivered an outstanding performance in 2025 by submitting, achieving this goal. The overall rating of the projects was high, and we secured 3 new grants starting in 2026.

We also strengthened our presence in infectious diseases and actively participated in major infectious disease conferences and events. In January, we attended the AMR conference in Basel for the first time to engage with new partners in the field. We also welcomed academia and industry during our first Ecraid Foundation Science Meeting in Portugal. ESCMID global continues to be an important meeting for connecting to our Young Investigators, network of Key Opinion Leaders, our sites, and our commercial partners.

Monitoring strategic shifts

For a sustainable future, it's important to monitor strategic shifts in funding and research to decide on which areas of infectious diseases we would like to focus. This does not mean that we must follow the mainstream. Given our purpose, it could also mean prioritising areas that are important for public health, yet currently underserved. We expect that the One Health approach, rising public health costs, and global crises (such as conflict and climate change) will influence the direction of funding for ID research, and we are preparing to adapt to the anticipated changes.

> " We will maintain a conservative financial policy to be able to anticipate unforeseen events and to build financial reserves."

Vaccination can reduce healthcare costs and is also important for pandemic preparedness. With the start of the SMO and the new collaboration with VAC4EU, we demonstrated our ambition to grow in vaccine research. We are exploring the possibilities to expand our activities in this segment. With VAC4EU, we can increase the understanding of how vaccines perform in the real world. Epidemiological data from our Perpetual Observational Studies (POS) also play an important role in this, by increasing our understanding of where, how, and for whom vaccination could be beneficial.

Significant milestones in studies

During 2025 several studies reached significant milestones. The entirely remote RECLAIM study began patient enrolment, and for PIPELINE, the first Site Initiation Visit (SIV) was conducted. For STRIDE-CAP, we completed the TND Pilot Study in collaboration with Merck and IQVIA. In our ongoing adaptive platform trial in primary care – ECRAID-Prime – we welcomed a new investigational medicinal product for COVID-19 and COVID-like illnesses. For REMAP-CAP, the first platform conclusion in non-COVID-19 patients was added to 18 previous conclusions, since it's inception in 2018.

In our POSs, we reached 20,000 enrolled patients in 2025. The data we collect in these studies are now harmonised and have become increasingly valuable, as evidenced by market interest. Sanofi, for instance, used data from POS-ARI-PC to inform decisions on vaccine development targeting HMPV.

In 2025, Ecraid and its projects brought forth 13 publications. Our studies continued to provide critical insights into the epidemiology and burden of infectious diseases across Europe, helping to inform research priorities, clinical development programmes, and preparedness strategies.

Building the research infrastructure for future health emergencies

One of the most important achievements of 2025 was the successful grant of the Be Ready partnership, a flagship European initiative that aims to strengthen preparedness for future infectious disease threats. The partnership recognises that effective preparedness requires sustainable research infrastructure that can

be activated rapidly when new threats emerge. Ecraid is therefore uniquely positioned to contribute to this vision. Through its network, perpetual observational studies, platform trials, expertise on data-harmonisation, and long-standing collaborations across Europe, Ecraid will provide many of the core components required for rapid evidence generation during health emergencies. The partnership represents not only a major funding succes for Ecraid, but also recognition of Ecraid's role in helping shape the future European clinical research ecosystem.

Financially

Despite the unforeseen termination of three projects, we managed to increase our revenue by 13.4% compared to 2024. The share of revenue from commercial partners was similar to 2024: 60% in 2025 vs 56% in 2024. Due to the increased revenues and cost savings, we managed to realise a slight increase in the operational margin (EBITDA) compared with 2024. We will maintain a conservative financial policy to be able to anticipate unforeseen events and to build financial reserves. We are proud to have shown that Ecraid can grow organically, without debt capital or investor support.

2026 and beyond

2026 is the year in which ECRAID-Base will end and the Ecraid Foundation will proceed as an independent, sustainable organisation. We are going to develop a long-term strategic plan to guide us over the coming years. Years in which we expect the (geo) political environment will still be very volatile. This will continue to influence decisions about funding in both the private and public sectors. Ecraid enters 2026 as an independent European research infrastructure committed to provide direction for growth, focus and research areas where sufficient funding is likely available. We will continue to work in the field of AMR, pandemic preparedness and vaccination, while adapting to the changing scientific and funding landscape.

The Management Board
Lennie Derde, CEO
Evelina Tacconelli, CSO
Nils Visser, COO



“My ambition is to help Ecraid grow in the field of vaccine studies”

Patricia Bruijning, professor of vaccination and infection control epidemiology, UMC Utrecht

“I first became involved with Ecraid in 2020 through the RECOVER study, and in 2025, I became member of Ecraid’s Coordinating Committee. We look at where the opportunities to further combat infectious diseases lie. Within the Coordinating Committee, my focus is on vaccine studies. My background is in paediatrics, and it is very valuable to meet other committee members from different fields and disciplines. We can learn a great deal from one another. I now really feel part of Ecraid. The Ecraid office is also just around the corner from my university, so I visit from time to time. I always enjoy the international atmosphere when I am there.

Ecraid has become a mature organisation when it comes to studies in clinical patients and therapeutic interventions. In the field of preventive interventions, Ecraid is now taking major steps forward. I think one of Ecraid’s key strengths is that it delivers. If we say we can include 300 patients in two months, we make it happen. The Ecraid team knows what it is able to do, and also what it is not able to do. That reliability is an important assurance, both for individual companies and for consortia.

I see a clear trend towards more preventive interventions. Concern is growing about rising healthcare costs, and it is no longer feasible to focus only on treatment. Funding is also shifting more towards prevention. I connected Ecraid with VAC4EU, an initiative that focuses on using healthcare data to study vaccine effectiveness. We are now exploring, for example, how we can collaborate on pragmatic trials, which I see as a very interesting new direction.

Vaccine studies are not only limited to testing new vaccines, but they are also about studying real-world effectiveness after a vaccine has been licensed. With its large warm-base networks and broad geographical coverage, Ecraid can be of great value. My ambition is to help Ecraid grow in the field of vaccine studies.”

Milestones 2025

January

January 1
Kick-off PIPELINE

February

February 25-26
First time attending AMR Conference Basel

March

Georgia joined ECRAID-Prime trial

First enrolment RECLAIM study

March 10-11
First Ecraid Foundation Science Meeting, Cascais

April

ECRAID-Prime expands with new antiviral treatment LTX-109 intranasal spray

April 16
ECRAID-Base POS studies reach 20,000 included patients

April 11-15
Booth at ESCMID Global 2025, Vienna

CC member Marion Koopmans receives ESCMID Award for Outstanding Contributions in the Field of Infection

May

Ecraid and VAC4EU join forces

May 8-9
Primary Care Network Meeting, Utrecht

June

June 17
Ecraid's white paper on Adaptive Platform Trials published

July

July 1
Start Eveline Verheijen as Site Management Organisation (SMO) manager

July 10
Conclusive webinar on training Adaptive Clinical Trial Designs, together with ERS

October

Start Ecraid's *Partner for Impact* marketing campaign

Start third treatment arm ECRAID-Prime, LTX-109

October 28-30
Postgraduate Course Athens

November

Start Ecraid's Young Investigator Ambassadors program

November 3
Start Course on Data and Sample Governance for Biomedical Research

November 12
Announcement appointment new Ecraid CEO Lennie Derde

December

Ecraid joins PrIMAVeRa consortium

Business Development strengthens Ecraid's position in the ecosystem

In 2025, Ecraid further strengthened its position as a trusted partner in infectious disease research by expanding its external engagement activities, strategic collaborations, and public-private research partnerships. Building on the momentum initiated in 2024, Business Development increasingly focused not only on organisational sustainability but also on strengthening Ecraid's long-term strategic positioning within the evolving infectious disease and antimicrobial resistance (AMR) research ecosystem.

New outreach and visibility initiatives

Throughout the year, Ecraid actively engaged with pharmaceutical companies, biotech organisations, clinical research organisations (CROs), academic networks, public health stakeholders, and funding bodies. These interactions took place through targeted stakeholder engagement activities, strategic meetings, and participation in major international scientific conferences and events, including ESCMID, the ERS Congress, and the AMR Conference. Together with the Communications and Marketing teams, several new outreach and visibility initiatives were launched, including lead-generation campaigns and strategic whitepapers aimed at increasing awareness of Ecraid's unique capabilities and infrastructure.

Connected European infectious disease ecosystem

A key focus area in 2025 was the continued expansion of Ecraid's collaborative network infrastructure. Ecraid established new strategic collaborations with organisations including ARLG, ADVANCE-ID, C4C, the Hellenic Society for Infectious Diseases, the Portuguese Society for Intensive Care Medicine, VAC4EU, PrIMAVeRA, READY NOW, and PIPELINE. These partnerships further strengthened Ecraid's ability to operate in a connected European infectious disease ecosystem, linking clinical networks, observational infrastructures, primary care, epidemiology, and operational trial expertise.

Tangible growth in externally funded activities

The increasing recognition of Ecraid within the infectious disease research landscape also translated into tangible growth in externally funded activities. In 2025, five new privately-funded research collaborations were initiated, and fifteen grant proposals were submitted, significantly exceeding the original targets. Ecraid also supported multiple international feasibility, site selection, and network activation initiatives across infectious disease and AMR research, contributing to increased collaboration and operational integration across the European research ecosystem.

External landscape evolves rapidly

At the same time, the external landscape around infectious disease research continued to evolve rapidly. Stakeholders increasingly seek integrated evidence-generation partners capable of combining clinical trial execution, observational data, epidemiology, microbiology, and real-world evidence. In response, Ecraid has started to further strengthen its positioning around its unique capabilities: embedded healthcare networks, warm-base infrastructures, pan-European collaboration, and integrated evidence generation through initiatives such as ECRAID-Base and ECRAID-Prime.

Strategic stakeholder management

Business Development activities in 2025, therefore, increasingly extended beyond partnership development alone. Greater emphasis was placed on strategic stakeholder engagement, ecosystem collaboration, scientific visibility, and identifying emerging opportunities in areas such as vaccines, antimicrobial resistance, diagnostics, respiratory infections, and preparedness-related research.

Trusted European infectious disease research partner

Looking ahead, Ecraid sees significant opportunities to further strengthen its role as a trusted European infectious disease research partner and infrastructure. By continuing to deepen collaborative research partnerships, strengthen network integration, and invest in high-quality evidence generation capabilities, Ecraid aims to contribute to accelerating innovation and improving preparedness and patient outcomes across Europe.

“ECRAID-Prime has been a very good fit”

Christian Lütken, CEO Pharma Holdings AS

“When we first came into contact with Ecraid, we were looking for the right clinical development pathway for our intranasally administered antiviral spray. We had already developed the product and were exploring different European initiatives and organisations that could support the next step. ECRAID-Prime quickly stood out because it offered a structure that was highly relevant to what we wanted to achieve: testing an intervention for infectious diseases in primary care, in patients at an early stage of illness.

If you can intervene early, before patients become seriously ill or need hospital care, the potential benefit is much greater — for the individual patient, but also from a societal and health-economic perspective. In Norway, as in many countries, the vast majority of patients are first seen in primary care. So, it makes sense to build a strong European infrastructure that can study infectious disease interventions in that setting.

The collaboration with Ecraid has been professional and proactive. Ecraid is rooted in academia, and the team understands the scientific requirements, but also the need to make progress. We have also benefited from the wider expertise within the Ecraid-network, including statistical input from the University of Oxford, which was important when discussing endpoints, sample size and the complexities of assessing antiviral efficacy across several respiratory viruses.

An adaptive platform trial was attractive because it offers an efficient way to evaluate interventions within an existing trial infrastructure. We once considered applying for a US-based platform trial. So, we were familiar with the concept, but this was our first time participating in such a platform. It was different from running our own trial as sponsor; at times it required us to accept a different role, being consulted and kept informed rather than driving every operational decision ourselves. That was a learning experience. But overall, it has been a very positive one.

The recruitment was completed within the scheduled timeframe, which we are very pleased with. For an infectious disease company focused on early treatment, ECRAID-Prime has been an excellent fit.”

Overview studies

RECOVER/ECRAID-BASE/IMPRINT | PIPELINE | ECRAID-PRIME

REMAP-CAP

Adaptive platform trial evaluating multiple treatment options in patients hospitalised with acute respiratory tract infection

Type: APT
Domain: Respiratory tract infections, with current focus on influenza
Test subject: Multiple **Pts enrolled:** Global: 15,907 EU: 8,664

HORIZON-HEALTH, ZonMw, NIHR, UMCU | First patient: 2018 | Completion date: Perpetual

RECLAIM

Adaptive platform trial evaluating reatments for post-acute sequelae of SARS-CoV-2 infection (PASC)

Type: Phase III
Domain: Adults with Post-Acute Sequelae of SARS-CoV-2 infection
Test subject: Multiple **Pts enrolled:** 372 (domain 1)

ZonMW, St.Long Covid | First patient: Feb 2025 | Completion date: 2027

PIPELINE-RSV

Adaptive platform trial comparing RSV prevention options in infants

Type: APT
Domain: Infants (<1 year)
Test subject: Nirsevimab, Abrysvo **Pts enrolled:** 0

HORIZON EUROPE | First patient: - | Completion date: Dec 2028

ECRAID-Prime

Adaptive platform trial evaluating multiople treatment options for acute respiratory tract infections in primary care

Type: APT
Domain: Patients with acute respiratory infections in primary care
Test subject: Nitric oxide/Saline/LTX-109 nasal spray **Pts enrolled:** 609

HORIZON-HEALTH | First patient: Oct 2024 | Completion date: Perpetual

ECRAID-BASE

RECOVERY

Platform trial evaluating multiple treatment options in patients admitted to the hospital with pneumonia

Type: APT
Domain: Hospitalised patients with acute respiratory infections
Test subject: Baloxavir, dexamethasone, oseltamivir **Pts enrolled:** 454

University of Oxford | First patient: Mar 2024 | Completion date: Perpetual

POS-VAP

Perpetual observational study to determine incidence and outcome of patients at risk for ventilator-associated pneumonia in European ICUs

Type: Observational
Domain: ICU patients at risk for HAP/VAP
Test subject: None **Pts enrolled:** 7,041

HORIZON-HEALTH | First patient: Aug 2022 | Completion date: Perpetual

SNAP

Adaptive platform trial evaluating multiple treatment and diagnostic options in patients with *Staphylococcus aureus* bacteremia

Type: APT
Domain: *Staphylococcus aureus* bacteremia
Test subject: Multiple **Pts enrolled:** Global: 11,639 EU: 628

UMC Utrecht, ZonMW, local funding DE/SE/FR | First patient: Oct 2023 | Completion date: Perpetual

POS-ARI-ER

Perpetual observational study to determine etiology and outcome of patients with acute respiratory tract infections in emergency rooms European hospitals

Type: Observational
Domain: Patients with acute respiratory infections in emergency rooms
Test subject: None **Pts enrolled:** 4,128

HORIZON-HEALTH | First patient: Jun 2023 | Completion date: Perpetual

ECRAID-BASE

POS-ARI-PC-Audit

Perpetual observational study to determine etiology and outcome of patients with acute respiratory tract infections in primary care settings

Type: Registry
Domain: Patients with acute respiratory infections in primary care
Test subject: None **Pts enrolled:** 6,959

HORIZON-HEALTH | First patient: Nov 2023 | Completion date: Perpetual

POS-cUTI

Perpetual observational study to determine etiology and outcome of patients with complicated urinary tract infections in European hospitals

Type: Observational
Domain: Patients with complicated urinary tract infections
Test subject: None **Pts enrolled:** 6,012

HORIZON-HEALTH | First patient: Oct 2022 | Completion date: Perpetual

POS-ARI-PC-Core

Perpetual observational study to determine etiology and outcome of patients with acute respiratory tract infections in primary care settings

Type: Observational
Domain: Patients with acute respiratory infections in primary care
Test subject: None **Pts enrolled:** 1,477

HORIZON-HEALTH | First patient: Nov 2023 | Completion date: Perpetual

POS-disease X

Perpetual observational study to determine etiology and outcome of immunocompromised patients hospitalised with unexplained febrile illness

Type: Observational
Domain: Immunocompromised hospitalised patients with unexplained febrile illness
Test subject: None **Pts enrolled:** 50

HORIZON-HEALTH | First patient: Dec 2023 | Completion date: Perpetual

MPX-RESPONSE NEOIPC

EPOXI

A randomised, controlled, double-blinded, placebo-controlled trial evaluating safety and efficacy of tecovirimat, with adaptive design allowing future interventions

Type: RCT
Domain: Patients with monkeypox infections
Test subject: Tecovirimat **Pts enrolled:** 13

HORIZON-HEALTH | First patient: Aug 2024 | Completion date: Aug 2026

PNEUMO

Observational study to determine incidence, seroprevalence and disease burden of pneumococcal CAP and invasive pneumococcal diseases

Type: Observational
Domain: Patients with acute respiratory infections in emergency rooms
Test subject: None **Pts enrolled:** 8,357

Merck | First patient: Feb 2020 | Completion date: Sep 2026

NeoIPC

Cluster randomised controlled trial in neonatal intensive care units (NICU) to evalaute effectiveness of kangarooing in preventing infections and improving patient outcome

Type: cRCT
Domain: Very premature neonates in NICU (neonatal intensive care)
Test subject: Kangaroo care **Pts enrolled:** 1,229

HORIZON-HEALTH | First patient: Apr 2024 | Completion date: Mar 2026

E.Mbrace

A phase III, randomised, double-blind, placebo-controlled study evaluating safety and efficacy of a 12-valent *E. coli* vaccin to prevent invasive *E. coli* disease in high-risk elderly

Type: RCT/Phase III
Domain: Patients at risk for urinary tract infections
Test subject: *E. coli* vaccin **Pts enrolled:** 382

Janssen R&D | First patient: May 2022 | Completion date: Nov 2025

STRIDE-CAP Pilot

Pilot for a test-negative case-control study to evaluate effectiveness of a new adult pneumococcal vaccine against pneumococcal pneumonia in older adults

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Type: Observational
Domain: Patients with CAP (+65 years)
Test subject: None **Pts enrolled:** 86

Merck through IQVIA | First patient: Jul 2025 | Completion date: Oct 2025

V118_24_25

A Phase III, randomised, observer-blind, multicenter clinical study to evaluate the efficacy, safety and immunogenicity of an adjuvanted influenza vaccine

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Type: RCT/Phase III
Domain: Adults (+65 years)
Test subject: Adjuvanted quadrivalent influenza vaccine **Pts enrolled:** 272

CSL Seqirus | First patient: Nov 2025 | Completion date: Dec 2025

“The power of a group is greater”

Fabian Patauner, PhD student, University of Campania L. Vanvitelli (IT)

“My first contact with Ecraid was through the POS-cUTI study as my university was one of the Italian centres involved. Later I attended Ecraid’s Postgraduate Course in 2023. It gave me a taste of what having a European network can mean. By discussing ideas with people from other countries, you expand your vision, your research questions and you are able to expand your opportunities. It opens your mind. Through Ecraid, I also learned the importance of collaboration. The power of a group is greater than the power of a single researcher, centre or country. Thus, in clinical research a collaborative network will lead to better results, better science and greater innovations.

My experience at the Postgraduate Course made me fall in love with Ecraid; there was a real desire to share knowledge. The calibre of the people in the network is very high, and they are extremely open to discussion and to questions from young researchers. That is important, because young researchers do not always have enough opportunities to build skills such as methodological ones. Indeed, during my medical training, I received only limited teaching in that area. Receiving feedback and suggestions from such experienced Ecraid researchers really boosted my curiosity and showed me how much there still was to learn beyond my own environment.

When I was asked to be an Ecraid Young Investigator Ambassador, I said yes. I want to help others find their way. Sometimes that is very practical: someone may ask how to organise an experience abroad, or whom they should approach. Sometimes it is about making courses and opportunities more visible. I want to help young researchers answer the questions I had myself when I was starting out. Let’s all help young investigators.”

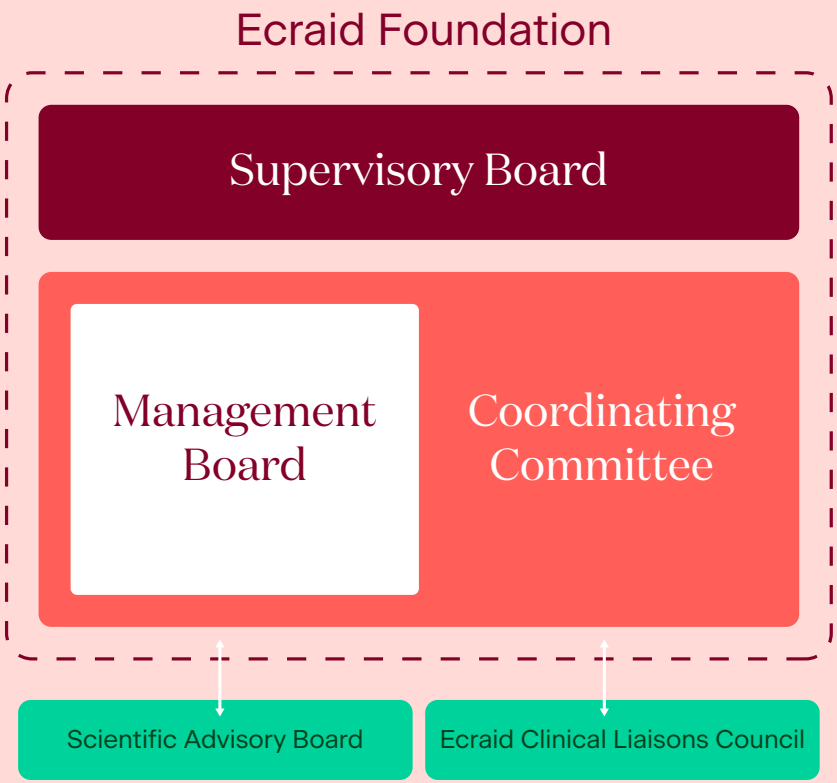
Ecraid governance

Ecraid has been established as a not-for-profit organisation under the Dutch Civil Law. The foundation employs the Management Board and central support staff of Ecraid. The Ecraid Management Board is responsible for the overall coordination and management of Ecraid. That board is supervised by the Supervisory Board.

Management Board

The Management Board is charged with the Foundation's management including, but not limited to the general operations of the Foundation and representing the Foundation with regard to third parties. The Management Board consists of three persons Chief Executive Officer (CEO), Chief Scientific Officer (CSO), and Chief Operational Officer (COO). That board is supervised by the Supervisory Board. The Management Board meets on a weekly basis.

Marc Bonten	Chief Executive Officer (until 31 December 2025)
Nils Visser	Chief Operational Officer
Evelina Tacconelli	Chief Scientific Officer



Central support staff

Ecraid's central support staff was designed as a matrix structure. This is a work structure in which team members report to multiple leaders. Team members report to a clinical trial project manager and to their department head. In addition, Ecraid also has central departments, such as Finance, People & Culture, Quality, Office Management, Business Development, Grant Management, and Communications & Marketing. Ecraid's Works Council represents employees' interests, and actively consults with the Management Board on organisational developments, working conditions, and personnel policy.

Supervisory Board

The Supervisory Board ensures that the Management Board manages the foundation in accordance with the mission, identity, and objectives of Ecraid, and that it acts and performs adequately. The Supervisory Board consists of global scientific experts and leading representatives of European and international scientific projects, networks, and organisations with activities complementary to Ecraid. Four Supervisory Board meetings were held in 2025.

Arno Hoes	Chair, Executive Board member & dean University Medical Center Utrecht, the Netherlands (until 31 December 2025)
Annie van Broekhoven	Managing Director, CreaBioSupport BVBA, Belgium
Deborah Cook	Academic Chair of Critical Care, McMaster University, Canada
Juan Emilio Echevarría	Laboratory Head, Instituto de Salud Carlos III, Spain
Bernard Pécoul	Former Executive Director Drugs for Neglected Diseases initiative, Switzerland
Momir Radulović	Observer, Board member EMA, Executive Director Slovenian Medicines Agency, Slovenia

Coordinating Committee

Ecraid's Coordination Committee functions as the central body in Ecraid responsible for the European wide coordination of clinical studies on infectious diseases, strategy development, stakeholder management, and service and network development. Three Coordinating Committee meetings and one strategy 'Day@theOffice' meeting were held in 2025.

Marc Bonten	Chair, CEO Ecraid (until 31 December 2025)
Sybil Anthierens	Public Engagement – University of Antwerp, Belgium
Roger Brüggemann	P3 - Radboudumc, the Netherlands
Patricia Bruijning-Verhagen	Vaccination studies – UMC Utrecht, the Netherlands
Christopher Butler	POS on ARI in Primary Care, SOS-COVID, PRUDENCE, ECRAID-Prime – University of Oxford, United Kingdom
Oliver Cornely	VACCELERATE – University of Cologne, Germany
Jacques Demotes	ECRIN – Data Management, France
Lennie Derde	REMAP-CAP – University Medical Center Utrecht, the Netherlands
Bruno François	POS on VAP in ICUs – University Hospital of Limoges, France
Carlo Giaquinto	PENTA-ID, VERDI – University of Padova, Italy
Stephan Harbarth	STAT-Net – Geneva University Hospitals, Switserland
Peter Horby	POS on ARI in ER, MERMAIDS 2.0 – University of Oxford, United Kingdom
Thomas Jaenisch	RECoDid, Datasharing – Universität Heidelberg, Germany
Marion Koopmans	Outbreak Preparedness and Response Disease-X POS, VEO – Erasmus University Medical Center, the Netherlands

Surbhi Malhotra	LAB-Net - University of Antwerp, Belgium
Pontus Naucler	ECLC vice chair - Karolinska University Hospital Stockholm, Sweden
Jesús Rodriguez-Baño	POS on cUTI in ERs – Hospital Universitario Virgen Macarena, Spain
Oana Săndulescu	ECLC chair- Carol Davila University of Medicine and Pharmacy, Bucharest, Romania
Evelina Tacconelli	CSO Ecraid, EPI-Net, LOTTA-Net, ORCHESTRA – University of Verona, Italy
Arjana Tambić Andrašević	Capacity building Eastern Europe – University Hospital for Infectious Diseases Zagreb, Croatia
Nils Visser	COO Ecraid
Yazdan Yazdanpanah	EU-RESPONSE – INSERM and Bichat Hospital, France

Scientific Advisory Board

Ecraid's Scientific Advisory Board provides the Coordinating Committee with expert advice and feedback on its services, network composition, innovative trial designs, technologies, ethics, etc.

Evelina Tacconelli	Chair, CSO Ecraid
Seamus O'Brien	Global Antibiotic Research and Development Partnership (GARDP)
Antonio di Caro	Unicamillus International University of Medicine Rome
Marco Cavaleri	Observer, European Medicines Agency
Vance Fowler	Duke University Durham
Nina Gobat	University of Oxford
Xavier de Lamballerie	Aix Marseille University
Nicole Lurie	Coalition for Epidemic Preparedness Innovations (CEPI)
Marc Mendelson	University of Cape Town
Frank Møller Aarestrup	Technical University of Denmark
David Paterson	University of Queensland
Hervé Raoul	Institut national de la santé et de la recherche médicale (INSERM)
Guy Thwaites	Oxford University Clinical Research Unit
Robert Weinstein	Rush University Chicago

Financial report

Policy pursued

In 2025, our financial policy remained anchored in long-term value creation, stability, and strategic alignment with our corporate mission. Our approach continued to be structured around the OGSM method (Objectives, Goals, Strategies, and Measures), which serves as the framework for both planning and execution across our financial operations.

Financial position and risks

The financial statements comprehensively depict Ecraid's activities. In 2025, approximately 40% of the revenue was from public – national and international – grants. Privately funded activities encompass providing site selection services to pharmaceutical companies and CROs, trial project management as a coordination unit or on behalf of partners or acting as a trial site for vaccination studies.

The foundation has no objective to gain reserves, hence, the margin reached will be used to professionalise the organisation, to strengthen the infrastructure – including its financial cash flow robustness, and to initiate investigator-initiated studies. Financial risks are limited as Ecraid holds cash in a dedicated bank account. Ecraid does not work with 'embedded derivatives' or 'hedge accounting', and all larger programs are prefunded.
Given the nature of the organisation, risk assessment is addressed. The monitoring and managing of risks take place on the level of the foundation. Risks have been categorised and prioritised on their possibility and impact. The most significant risks and their mitigating measures identified are:

- Financial risks - continuity of sufficient cashflow; mitigated by effectuating a loan to cover late transfer of shifting funds.
- Financial risks - the abrupt halt of 3 major projects impacting profitability; successfully mitigated by reducing our flexible workforce and improvement investments.

Financial Development

The year 2025 is the third full year of operation and was closed with a positive result of 415,668 euro. This exceeded our budget expectations due to slightly higher revenues and lower direct- and indirect expenses. Revenue composition remained consistent with forecasts: approximately 40% from public grants and 60% from privately funded projects. The total surplus was added to the foundation's reserve which will guarantee sufficient cash flow in the coming years. The number of personnel decreased from 89 to 80 employees, excluding freelance staff.

Income statement

Review by accountant

Income	
Private-funded Studies and Projects	€8,070,810
Publicly-funded Studies and Projects	€5,463,534
TOTAL INCOME FOR 2025	**€13,534,344**
Expenditures	
Direct costs of Publicly-funded Studies and Projects	€3,438,113
Personnel and personnel related expenses	€8,235,740
Other staff expenses	€254,692
Office rent	€138,325
Sales expenses	€189,202
Office expenses	€6,710
Other expenses	€746,840
Income tax	€109,054
TOTAL EXPENDITURES FOR 2025	**€13,118,676**
TOTAL OF RESULTS FOR 2025	**€415,668**

The aforementioned figures have been extracted from the 2025 financial statements with a review report provided by BDO accountants on 19 June 2025.

Abbreviations

ADVANCE-ID	Advancing Clinical Evidence in Infectious Diseases
AMR	Antimicrobial Resistance
APT	Adaptive platform trials
ARI	Acute respiratory infections
BE READY NOW	The Strategic Research and Innovation Agenda of the European partnership on Pandemic Preparedness
BI	Business Intelligence
C4C	conect4children
CAP	Community-Acquired Pneumonia
CC	Coordinating Committee
CEO	Chief Executive Officer
CEPI	Coalition for Epidemic Preparedness Innovations
CLIN-Net	Clinical research network
CoMeCT	Coordination Mechanism for Cohorts and Trials
COO	Chief Operational Officer
COVID-19	Coronavirus disease 2019
CRO	Contract research organisation
CSO	Chief Scientific Officer
cUTI	Complicated urinary tract infections
disX	Disease X
EBITDA	Earnings Before Interest, Tax, Depreciation and Amortisation
EC	European Commission
ECL	Ecraid Clinical Liaison
Ecraid	European Clinical Research Alliance on Infectious Diseases
ECRAID-Base	European Clinical Research Alliance on Infectious Diseases: The initial set of activities for Ecraid
ECRAID-Prime	European Clinical Research Alliance on Infectious Diseases: Primary care adaptive platform trial for pandemics and epidemics
ECRIN	European Clinical Research Infrastructure Network
EMA	European Medicines Agency
EPI-Net	Epidemiological network
EPOXI	European monkeypox randomised placebo-controlled, doubleblinded platform trial
ER	Emergency room
ERS	European Respiratory Society
ESCMID	European Society of Clinical Microbiology and Infectious Diseases
EU	European Union
GARDP	Global Antibiotic Research and Development Partnership
GCP	Good Clinical Practice
GP	General practitioner
HAP	Hospital-acquired pneumonia
HMPV	Human metapneumovirus
HORIZON-HEALTH	Horizon Europe - Cluster 1 Health
ICU	Intensive care unit
ID	Infectious diseases
IHI	Innovative Health Initiative
INSERM	Institut national de la santé et de la recherche médicale

IPC	Infection prevention and control
KPIs	Key Performance Indicators
LAB-Net	Laboratory network
LOTTA-Net	Long-term care facilities network
MERMAIDS	Multi-centre EuRopean study of MAjor Infectious Disease Syndromes
ND4BB	New Drugs for Bad Bugs
NICU	Neonatal intensive care unit
OGSM	Objectives, goals, strategies and measures
ORCHESTRA	Connecting European Cohort to Increase Common and Effective Response to SARS-CoV-2 Pandemic Design: Population based, prospective and retrospective cohort study
P3	Pharmaceutical, pharmacology and pharmacometrics services
PC	Primary Care
PENTA-ID	Paediatric European Network for Treatment of AIDS – Infectious Diseases
PG	Postgraduate
PhD	Doctor of Philosophy
PIPELINE	Pregnancy and Infant Preparedness Platform in Europe
PNEUMO	Pneumococcal pNeumonia Epidemiology, Urine serotyping, Mental Outcomes
POS	Perpetual observational studies
PrIMAVeRa	Predicting the Impact of Monoclonal Antibodies & Vaccines on Antimicrobial Resistance
Pts	Patients/participants
R&D	Research and development
RECLAIM	Recovering from COVID-19 Lingering Symptoms Adaptive Integrative Medicine
RCT	Randomised controlled trial
ReCoDID	Reconciliation of Cohort data in Infectious Diseases
REMAP-CAP	Randomised, Embedded, Multifactorial, Adaptive Platform trial for Community-Acquired Pneumonia
RSV	Respiratory syncytial virus
SARS-CoV-2	Severe acute respiratory syndrome-coronavirus-2
SIV	Site initiation visit
SME	Small & medium enterprises
SMO	Site management organisation
SNAP	Staphylococcus aureus Network Adaptive Platform
SOS COVID	SARS-CoV-2 Observational Study on Coronavirus Disease 2019
STAT-Net	Statistical network
TND	Test-Negative Design
UMC Utrecht	University Medical Hospital Utrecht
VAP	Ventilator-associated pneumonia
VEO	Versatile Emerging infectious disease Observatory
VERDI	SARS-CoV-2 variants Evaluation in pRegnancy and paeDIatrics cohorts
ZonMW	Netherlands Organisation for Health Research and Development

ecraid

More information?
Mail us at jointhemovement@ecraid.eu or visit us at www.ecraid.eu

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