

Resource Summary Report

Generated by RRID on Aug 8, 2026

Predict-TB

RRID:SCR_003766

Type: Tool

Proper Citation

Predict-TB (RRID:SCR_003766)

Resource Information

URL: <http://www.predict-tb.eu/>

Proper Citation: Predict-TB (RRID:SCR_003766)

Description: Consortium to accelerate the search for new, more effective combinations of treatments to tackle Tuberculosis and address pre-clinical research barriers to the discovery and development of new TB drug combinations. To overcome the challenges in Tuberculosis drug development they will create tools to accelerate PK-PD (Pharmacokinetic / Pharmacodynamic) analysis that are connected to clinical outcomes. By addressing the gaps in preclinical information, the consortium aims to provide a framework and tools to facilitate the transition of the best combinations of drugs to late phase development. They aim to develop an integrated set of laboratory-based models that will provide much-needed data to indicate the most appropriate doses and combinations of drugs for patients. In addition, the project will generate a comprehensive database of patient data from previous and on-going clinical trials for use as a reference for evaluating the performance of combination anti-TB drug regimens in these newly developed laboratory models. Ultimately, they aim to enable researchers to be able to use the information generated by the novel models to design better clinical trials involving TB patients. The aims of the consortium: * To systematically evaluate two successive panels of representative anti-tuberculosis drugs (licensed and novel) using a suite of standard, novel and enhanced preclinical model systems, with respect to performance in clinical trials * To refine the set of preclinical systems on the basis of these results in order to identify and define the currently optimal critical path in discovery and pre-clinical development for tuberculosis. * To develop an integrated PK-PD / Disease modelling and simulation framework for tuberculosis which will facilitate prediction of optimal combinations and design of clinical studies.

Abbreviations: PreDiCT-TB

Synonyms: PreDiCT - TB

Resource Type: data or information resource, portal, organization portal, consortium

Keywords: pre-clinical, drug, bedaquiline, tool development, basic research, drug development, lung, model, simulation, database

Funding: Innovative Medicines Initiative 115337; EFPIA

Resource Name: Predict-TB

Resource ID: SCR_003766

Alternate IDs: nlx_158036

Record Creation Time: 20220129T080220+0000

Record Last Update: 20260808T185803+0000

Ratings and Alerts

No rating or validation information has been found for Predict-TB.

No alerts have been found for Predict-TB.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 10 mentions in open access literature.

Listed below are recent publications. The full list is available at [RRID](#) .

Muliaditan M, et al. (2022) Bacterial growth dynamics and pharmacokinetic-pharmacodynamic relationships of rifampicin and bedaquiline in BALB/c mice. British journal of pharmacology, 179(6), 1251.

Tanneau L, et al. (2020) Understanding the drug exposure-response relationship of bedaquiline to predict efficacy for novel dosing regimens in the treatment of multidrug-resistant tuberculosis. British journal of clinical pharmacology, 86(5), 913.

Maitra A, et al. (2020) Carprofen elicits pleiotropic mechanisms of bactericidal action with the potential to reverse antimicrobial drug resistance in tuberculosis. The Journal of antimicrobial chemotherapy, 75(11), 3194.

Donnellan S, et al. (2019) Intracellular Pharmacodynamic Modeling Is Predictive of the Clinical Activity of Fluoroquinolones against Tuberculosis. Antimicrobial agents and chemotherapy, 64(1).

Mourik BC, et al. (2018) Improving treatment outcome assessment in a mouse tuberculosis model. Scientific reports, 8(1), 5714.

Papadaki M, et al. (2017) Adaptation through Collaboration: Developing Novel Platforms to Advance the Delivery of Advanced Therapies to Patients. *Frontiers in medicine*, 4, 56.

Aljayyousi G, et al. (2017) Pharmacokinetic-Pharmacodynamic modelling of intracellular *Mycobacterium tuberculosis* growth and kill rates is predictive of clinical treatment duration. *Scientific reports*, 7(1), 502.

Evangelopoulos D, et al. (2017) Pediatric tuberculosis-human immunodeficiency virus co-infection in the United Kingdom highlights the need for better therapy monitoring tools: a case report. *Journal of medical case reports*, 11(1), 52.

Svensson EM, et al. (2017) Modelling of mycobacterial load reveals bedaquiline's exposure-response relationship in patients with drug-resistant TB. *The Journal of antimicrobial chemotherapy*, 72(12), 3398.

Honeyborne I, et al. (2016) Profiling persistent tubercule bacilli from patient sputa during therapy predicts early drug efficacy. *BMC medicine*, 14, 68.