PAUL-MARTINI-STIFTUNG

60 Years of Promoting Excellence in Pharmaceutical Research

Paul Martini Award Laureates 1969 to 2026

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60 Years of Excellence in Pharmaceutical Research

Perspectives from past Paul Martini Award Laureates

For six decades, the Paul-Martini-Stiftung has been committed to advancing pharmacotherapy and strengthening the exchange between science, clinical practice, and industry. This anniversary is an opportunity to look back on remarkable scientific achievements, and to reflect on the people whose work continues to shape the field.

To mark this milestone, we reached out to past Paul Martini Award laureates to learn where their research has taken them, how their fields have evolved, and where they see the future of their respective fields. Their reflections highlight a common theme: recognition at a pivotal moment can open doors, create connections, and reinforce the courage to pursue transformative ideas.

This booklet brings together these perspectives. It offers a look at current scientific challenges, emerging opportunities, and the personal motivations that drive innovation across disciplines. Above all, it celebrates the enduring spirit of inquiry that has defined the Paul-Martini-Stiftung for 60 years.

Overview of Laureates

Paul Martini Award Winners 1969-2026

1969

K. H. Rahn, Peter G. Dayton
Münster, Germany and Atlanta, USA
Studies of the metabolism of guanethidine in hypersensitive patients.

Wilhelm Börner, Stefan Grehn, Erich Moll, Erich Rau
Würzburg, Germany
Measurement of finger bone absorption with a 125 I-scanner.

Jules Angst, Poul Christian Baastrup, Poul Grof, Mogens Schou, Peter Weis
Switzerland, Denmark and Canada
Methodological problems of prophylactic trials in recurrent affective disorders.

1970

Werner Kübler
Giessen, Germany
Pharmacokinetic methods for determining enteral absorption.

1971

David J. Finney
Edinburgh, UK
Statistical logic in the monitoring of reactions to therapeutic drugs.

Erich E. Gabbe, Hellmut C. Heinrich
Hamburg, Germany
Experimental basis of the diagnosis and oral therapy of prelatent, latent and manifest iron deficiency.

Heinz Held
Tübingen, Germany
Changes in drug degradation under various conditions (clinical and animal studies).

Emil H. Graul, Adolf Habermehl
Marburg, Germany
Tracer kinetics.

1972

Herbert Remmer, Hans-Felch Freiherr von Oldershausen Reinhard Fleischmann
Tübingen and Friedrichshafen, Germany
Determination of drug metabolizing enzymes in needle biopsies of human liver.

1973

John Raymond Hobbs, Hussein Salih, Herschel Flax
London, UK
Evaluation of hormone dependence of breast cancer for the individual patient.

1974

Alasdair Muir Breckenridge, Michael L'Estrange Orme
London, UK
Pharmacokinetics, pharmacodynamics and interaction of Warfarin.

1975

Alan Richens
London, UK
Pharmacokinetics of Phenytoin in epileptic patients and scheme for dose increments.

Lucius Dettli
Basel, Switzerland
Elimination kinetics and dosage adjustment of chemotherapeutic agents in patients with kidney diseases.

1976

Bodo-Eckehard Strauer
Düsseldorf, Germany
Dynamics, coronary blood flow and oxygen consumption of the normal and diseased heart.

Michel Eichelbaum
Stuttgart, Germany
A newly discovered defect in human drug metabolism: missing N-oxidation of sparteine.

1977

Melvyn F. Greaves
London, UK
Immunological detection and monitoring of leukaemic cells.

1979

Hans-Jörg Ruoff
Wuppertal, Germany
Adenylate cyclase in human gastric mucosa.

D. Loew, Klaus Breddin, Klaus Lechner, Karl Überla, E. Walter
Germany and Austria
Secondary prevention of myocardial infarction: Comparison of acetylsalicylic acid, placebo and phenprocoumon.

1980

Jeffrey Aronson, Alan Ford, David Grahame-Smith
Oxford, UK
Techniques for studying the pharmacodynamic effects of ‚Ductus Arteriosus'.

Winfried Gunselmann
Wuppertal, Germany
Multivariate prognosis models in medicine.

1982

W. Doering, Jürgen Scherberich, Gustav Georg Belz
München, Frankfurt a.M. & Wiesbaden, Germany
Quinidine-Digoxin: Pharmacokinetics and pharmacodynamics of an exemplary drug interaction.

1983

Adrian Küpfer, Hannsjörg Seyberth
Bern, Switzerland and Marburg, Germany
Pharmacogenetics of mephenytoin: A new drug hydroxylation polymorphism in man.

1984

H. G. Dammann, Peter Müller, B. Simon
Hamburg and Heidelberg, Germany
Human pharmacological investigation of the efficacy of ulcer therapeutics.

Otto-Erich Brodde
Essen, Germany
Quantitative determination of alpha and beta receptors in humans to assess clinical-pharmacological measures.

Gustav Georg Belz, Dieter Palm, Anton Wellstein
Wiesbaden and Frankfurt a.M., Germany
Kinetics-Dynamics.

1985

Lutz-Henning Block
Basel, Switzerland
Adrenaline-induced, calcium-dependent phosphorylation in platelets: increase in hypertension, inhibition by Verapamil.

1986

Joachim Chrubasik
Heidelberg, Germany
Spinal infusion of opiates and somatostatin.

Jochen Thormann
Bad Nauheim, Germany
Dynamic Analysis of Endsystolic Pressure/ Volume Relationships during therapeutic interventions.

1988

Kevin J. Scanlon
Duarte (CA), USA
Biochemical basis for cisplatin and 5-fluorouracil synergism in ovarian carcinoma.

Peter M. Lauven, J. Schüttler, Helmut Schwilden
Bonn and Erlangen, Germany
Hypnotic threshold concentrations of Methohexital and closed-loop feedback control of anaesthesia.

1989

Stefan C. Meuer
Heidelberg, Germany
Low-dose Interleukin-2 induces systemic responses against HbsAG in immunodeficient non-responders to hepatitis B vaccination.

1990

Hans-Joachim Gabius, Sigrun Gabius, Tibor Hajto, Katarina Hostanska, Andrea Trittin
Germany and Switzerland
Clinical proof of immunomodulation by lectins in mistletoe therapy.

Gunnar Alván
Huddinge, Sweden
Furosemide clearance and diuretic efficiency in cystic fibrosis.

1991

Dieter Voegele, Dierk Brockmeier
Frankfurt a.M., Germany
In vivo - in vitro correlation of drug release.

1992

K. Heyo Kroemer
Stuttgart, Germany
Prediction of in vivo drug metabolism variability from in vitro experiments (Propafenone/Verapamil).

Thomas Münzel
Germany
Endopeptidase Inhibition.

Marion Brach, Friedhelm Herrmann
Berlin and Freiburg, Germany
Ara-C synergism with cytokines and molecular mechanisms of action.

1993

Peter J. Meier-Abt
Zürich, Switzerland
Bile excretory pathways.

1994

Claus Kroegel, Christian Virchow, Christoph Walker
Freiburg, Germany
Role of Th2 lymphocytes and activation of eosinophils in endobronchial allergen provocation in asthmatics.

1995

Stefan Rosewicz
Berlin, Germany
Retinoids as a novel strategy for the treatment of human pancreatic adenocarcinoma.

Sabine Kurz, Thomas Münzel
Freiburg and Mainz, Germany
New insight into mechanisms underlying the phenomenon of nitrate tolerance.

1996

Thomas Gramatté
Dresden, Germany
Localization-dependent drug absorption in the human small intestine.

1997

Hans-Uwe Simon
Zürich, Switzerland
Novel therapeutic strategies via apoptosis pathways to resolve chronic eosinophilic inflammation.

1998

Thomas Ruzicka, Günter Michel, Bernhard Homey, Lajos Kemény
Düsseldorf, Germany and Szeged, Hungary
Tacrolimus ointment for atopic dermatitis; regulation of p53 and IL-8 in psoriasis; FK506 in inflammatory skin disease.

Andreas Greinacher
Greifswald, Germany
Clinical, diagnostic, pathophysiological, and therapeutic aspects of heparin-induced thrombocytopenia.

1999

Stefanie M. Bode-Böger, Rainer H. Böger
Hannover, Germany
L-Arginine induces nitric oxide-dependent vasodilation in critical limb ischemia.

2000

Gunther Hartmann
München, Germany
CpG Phosphorothioate Oligodeoxynucleotide for activating primate immune responses.

Robert Bals
München, Germany
Biology of antimicrobial peptides and their use as pharmaceuticals.

2001

Martin Fromm
Stuttgart, Germany
Inhibition of P-glycoprotein mediated drug transport (Digoxin/Quinidine interaction); intestinal metabolism.

Wolf-Karsten Hofmann
Frankfurt a.M., Germany
Resistance mechanisms of Ph+ acute lymphoblastic leukemia to tyrosine kinase inhibitor STI571 (Glivec)

2002

Ulrich Laufs, Christopher Heeschen, Matthias Endres
Bad Homburg, Frankfurt a.M. and Berlin, Germany
Neuroprotection via endothelial actin cytoskeleton; statin withdrawal effects; Atorvastatin upregulation of nitric oxide synthase.

2003

Hartmut Goldschmidt
Frankfurt a.M., Germany
Thalidomide therapy in multiple myeloma; TNF-alpha gene polymorphisms predicting outcome.

2004

H. Ardeschir Ghofrani
Giessen, Germany
Sildenafil and Iloprost therapy for severe pulmonary arterial hypertension and lung fibrosis.

2005

Johannes Oldenburg
Frankfurt a.M., Germany
Mutations in VKORC1 cause warfarin resistance and multiple coagulation factor deficiency type 2.

2006

Bodo Levkau
Essen, Germany
HDL and sphingosine-1-phosphate effects on vasorelaxation, myocardial perfusion, and protection against ischemia via S1P3.

2007

Christian Strassburg
Hannover, Germany
Functional TATA box polymorphism of UDP glucuronosyltransferase 1A7; Gilbert's disease and atazanavir.

Roland Schuele
Freiburg, Germany
LSD1 demethylation of histone marks promoting androgen receptor-dependent transcription; LSD1/FHL2 as prostate cancer risk predictors.

2008

Christian Weber, Jürgen Bernhagen
Aachen, Germany
MIF is a noncognate ligand for CXC chemokine receptors in inflammatory and atherogenic cell recruitment.

2009

Frank M. Brunkhorst, Christoph Engel
Jena and Leipzig, Germany
Intensive insulin therapy and pentastarch resuscitation in severe sepsis; epidemiology of sepsis in Germany.

Ralf Bargou
Würzburg, Germany
Tumor regression in cancer patients by very low doses of a T Cell-engaging antibody.

2010

Veit Hornung
München, Germany
Activation of NALP3 inflammasome by silica/aluminum; AIM2 recognition of cytosolic dsDNA; RIG-I sensing of viruses.

Jürgen Ruland
München, Germany
Innate immune activation (FcRy-Syk-Card9), MALT1 protease inhibition in lymphoma, and inflammasome signaling.

2011

Kaan Boztug, Christoph Klein
Wien, Austria and München, Germany
Stem-Cell Gene Therapy for Wiskott-Aldrich Syndrome.

2012

Stephan Stilgenbauer, Michael Hallek
Ulm and Köln, Germany
Addition of rituximab to fludarabine and cyclophosphamide in chronic lymphocytic leukaemia (CLL).

Jan Wehkamp
Stuttgart, Germany
Reduction of disulphide bonds unmasks antimicrobial activity of human beta-defensin 1.

2013

Andreas Engert
Köln, Germany
Hodgkin's lymphoma treatments: reduced intensity chemotherapy/radiotherapy and Brentuximab vedotin for CD30+ malignancies.

2014

Matthias Tschöp
München, Germany
Unimolecular dual incretins for metabolic benefits; GLP-1R agonism and targeted estrogen delivery for metabolic syndrome.

2015

Sonja Schrepfer
Hamburg, Germany
Prevention of restenosis (dichloroacetate); immunogenicity of mitochondrial mismatch in stem cells; models for myointimal hyperplasia.

2016

Jan Krönke
Ulm, Germany
Lenalidomide mechanism: selective degradation of IKZF1/IKZF3 in multiple myeloma and CK1α in MDS.

2017

Harald Renz, Holger Garn
Marburg, Germany
Modification of allergen-induced asthmatic responses by a GATA3-specific DNAzyme.

2018

Thorsten Zenz
Zürich, Switzerland
Genomic analysis and drug perturbation in hairy cell leukemia (CDKN1B mutations, BRAF inhibition).

2019
Robert Zeiser
Freiburg, Germany
Research on oncogenic JAK2V617F causing PD-L1 expression and immune escape in myeloproliferative neoplasms; neutrophils in graft-versus-host disease.

2020
Peter Kühnen
Berlin, Germany
Studies on normalizing body weight in hereditary obesity by using Setmelanotide to replace missing messenger substances in the signaling pathway.

2021
Thomas Thum
Hannover, Germany
Conception and first testing of a microRNA blocker (CDR132L/antisense-RNA) for the treatment of chronic heart failure.

2022
Stefan Fröhling, Hanno Glimm
Heidelberg and Dresden, Germany
Establishing the precision oncology program (MASTER) for rare cancers using molecular characterization (genome/RNA sequencing) to identify targeted therapies.

2023
Andrea Ablasser
Lausanne, Switzerland
Discovery of the cGAS-STING innate immune signaling pathway and its influence on infections (e.g., COVID-19), inflammation, and cancer.

2024
Michael Platten
Mannheim, Germany
Development of therapeutic vaccines against malignant brain tumors (gliomas), specifically targeting IDH1 and histone-H3 mutations.

2025
Marcus Conrad
München, Germany
Insights into ferroptosis (cellular self-destruction); development of FSP1 inhibitors for cancer therapy and strategies for organ protection during transplantation.

PAUL-MARTINI-STIFTUNG

CARDIOLOGY

Prof. Dr. med. Ulrich Laufs

Department of Cardiology,
Leipzig University Hospital

CARDIOVASCULAR PREVENTION

What gets you out of bed in the morning?

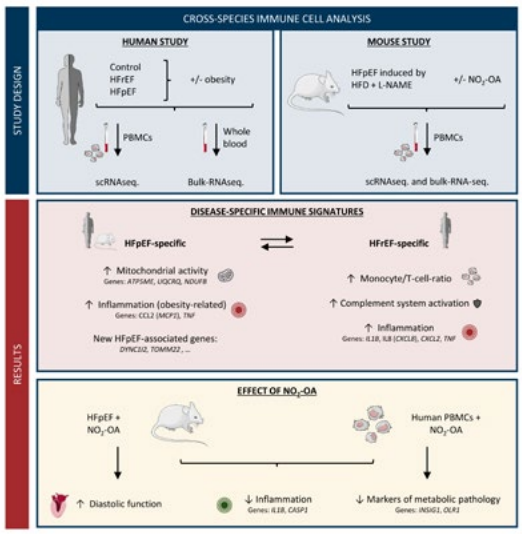
Coffee and riding my bicycle.

How has receiving the Paul Martini Award influenced your professional journey?

Receiving the Paul Martini Award provided recognition and motivation for my research group at a formative stage of my work. The award validated the translational relevance of our research in cardiovascular medicine, enhanced the visibility of my research and indirectly helped subsequent applications for independent research funding.

2002 Winner

CARDIOLOGY



MY GRAPHIC OF THE YEAR

Source: Circulating immune cell signature analysis in HFpEF across species. Kneuer JM, Müller M, Erbe S, ... Boeckel JN. Circ Res 2025;137:682

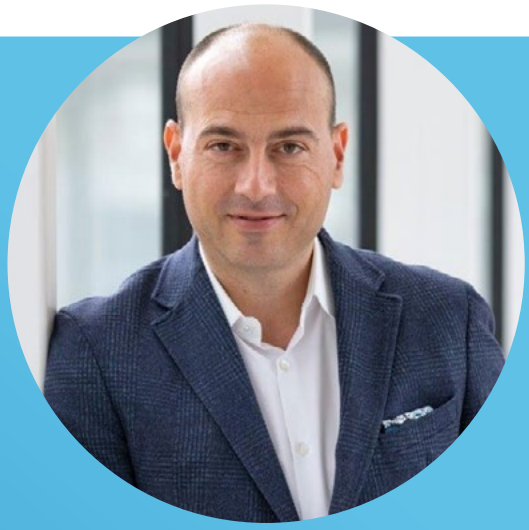
Why (highly biased): the most recent publication is always the most interesting....

What recent insight or development has significantly advanced your field of research?

Three recent developments offer promising new opportunities for both research and patient care in cardiovascular prevention:
1) The combination of large data resources and advanced computational methods is providing novel insights.
2) Recent advances in cardiovascular imaging are revolutionizing the early detection of disease, monitoring of disease progression, and personalized treatment.
3) RNA- and DNA-targeted therapies, especially in the area of lipid-lowering therapy, hold the potential to shift cardiovascular prevention paradigms from risk reduction toward true disease modification, or even cure.

Where do you currently see the greatest need for research in your field in order to improve patient care?

In the field of cardiovascular prevention, three recent developments offer promising new opportunities for both research and patient care: the analysis of large-scale data sets, advanced imaging technologies, and nucleic acid–targeted therapies.



Prof. Dr. Dr. med. Thomas Thum

Institute of Molecular and Translational Therapeutic Strategies (IMTTS), Hannover Medical School

TRANSLATION | RNA | FIBROSIS

What gets you out of bed in the morning?

I'm driven by curiosity — each day is an exciting journey to uncover new RNA mysteries and translate them into real-world medical breakthroughs.

How has receiving the Paul Martini Award influenced your professional journey?

Receiving the Paul-Martini-Preis 2021 for my work on RNA-based therapeutics targeting heart failure was a pivotal milestone. It not only affirmed the scientific value of our translational approach from lab to patient but also significantly elevated my visibility in the clinical-pharma research community. This recognition led to stronger collaborations and increased funding opportunities.

2021 Winner

CARDIOLOGY

Made by AI: „RNA Breakthroughs: From Curiosity to Cure" – This graphic reflects my year: driven by curiosity, discovering new RNA classes and delivery tools, identifying fibrosis as a key unmet need, and translating these insights into therapies. Source: Self-designed based on my research focus in 2025.

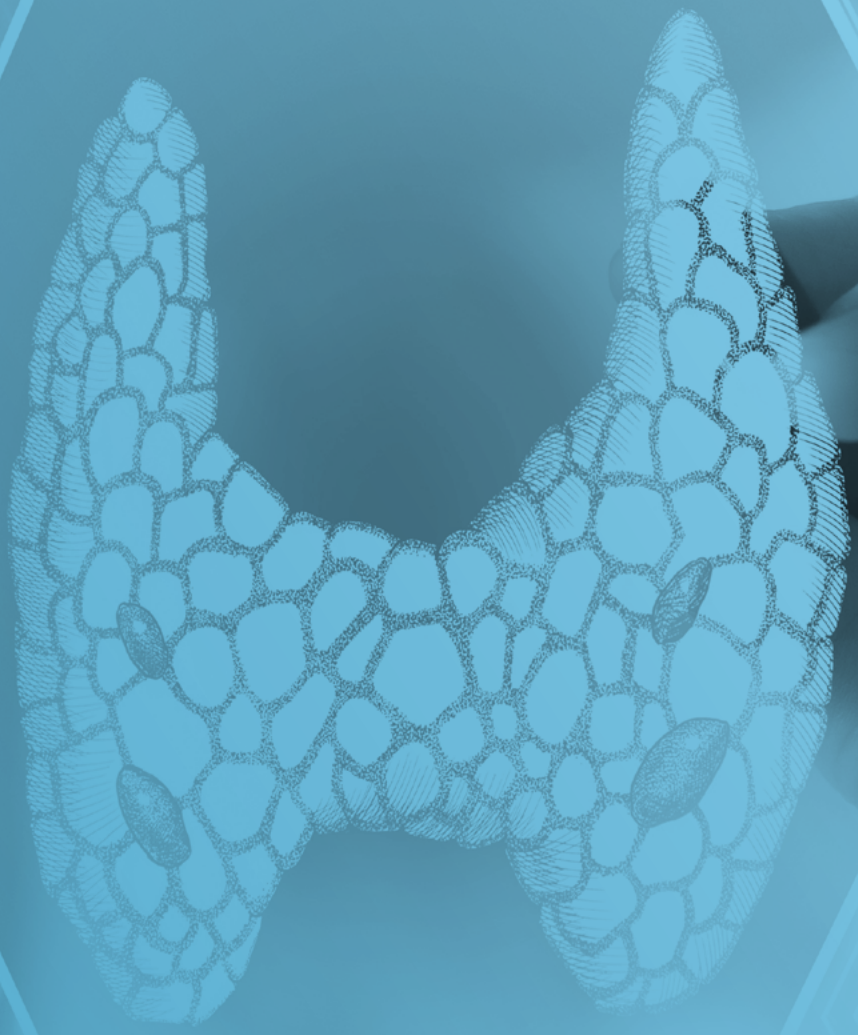
What recent insight or development has significantly advanced your field of research?

The discovery of new noncoding RNA subtypes like microRNAs, lncRNAs and circRNAs has significantly expanded our understanding of gene regulation and disease mechanisms. Equally transformative are recent advances in RNA-targeted delivery tools, including nanoparticles and AAV vectors, which now enable tissue-specific therapeutic applications—paving the way for RNA-based precision medicine.

Where do you currently see the greatest need for research in your field in order to improve patient care?

The greatest need for research lies in fibrosis-related cardiopulmonary diseases, which are leading causes of death and currently lack effective, targeted therapies. Despite major advances in other areas, treatment options for conditions like idiopathic pulmonary fibrosis or heart failure with preserved ejection fraction remain limited. There is an urgent need to understand fibrotic mechanisms in greater detail and to develop innovative RNA-based therapeutics that can halt or even reverse disease progression—ultimately improving long-term outcomes for patients.

PAUL-MARTINI-STIFTUNG



ENDOCRINOLOGY

Prof. Dr. med. Peter Kühnen

Department of Pediatric Endocrinology and Diabetology, Charité – Universitätsmedizin Berlin

TRANSLATION | RARE DISEASES | ENDOCRINOLOGY/ METABOLISM

What gets you out of bed in the morning?

Apart from several factors (like the children), the wish to contribute to an optimized research and clinical care environment in the future (especially for the young scientists), a better way of communication and valuation between colleagues and different professions and the development and performance of research projects which may help to establish new and innovative treatment and diagnostic strategies get me out of bed in the morning.

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award supported during my professional journey the possibility to connect with other scientists and clinical researchers from different fields and disciplines. This opens the opportunity for several scientific cooperation projects.

What recent insight or development has significantly advanced your field of research?

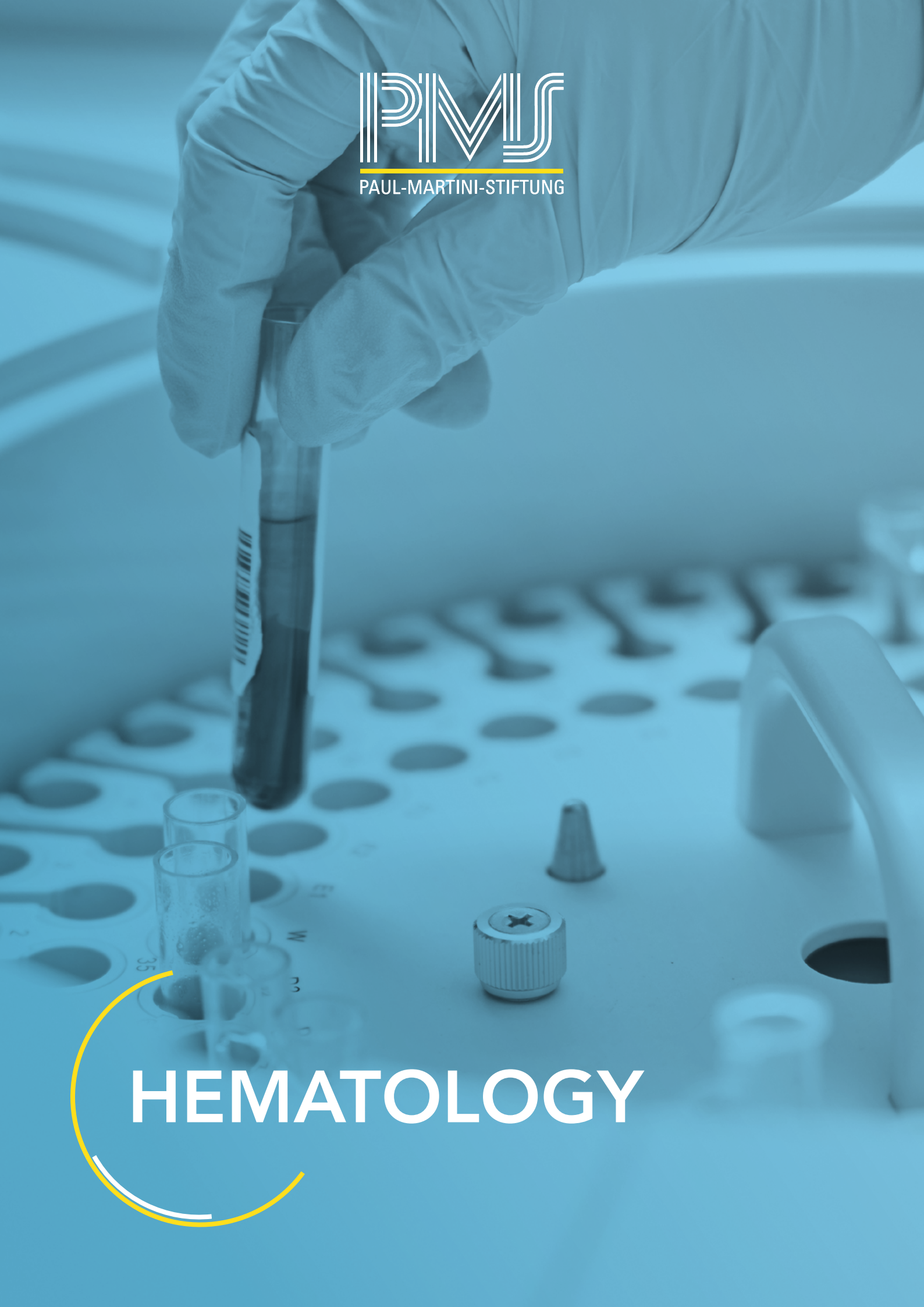
The new developments in the field of genomics, single-cell/ single nucleus analysis techniques (RNA expression, DNA methylation) and breakthroughs to establish stem-cell based models have open doors to understand critical disease related mechanisms, which have been hidden so far. These advances may lead to a better understanding of key physiological/ disease-related networks. This is of importance to develop new drugs and/or to implement optimized cell-/ gene therapeutic approaches.

Where do you currently see the greatest need for research in your field in order to improve patient care?

The community may underestimate the relevance of the (epi-)genome-environment interaction. We need to connect basic science and excellence state-of-the-art molecular techniques (such as single-cell/ stem cell based methods) with an interdisciplinary clinical setting. In parallel, there is a need to modify environmental circumstances. Here decision makers need to work together with (clinician) scientists and patient advocacy groups to change key aspects (such as available healthy food in day-care and schools, infrastructure for sportive activity etc.).

2020 Winner

ENDOCRINOLOGY



PAUL-MARTINI-STIFTUNG

HEMATOLOGY

Prof. Dr. med. Hartmut Goldschmidt

German-Speaking Myeloma Multicenter Group (GMMG); Clinic for Hematology, Oncology, Rheumatology (Medical Clinic V), Heidelberg University Hospital

MULTIPLE MYELOMA TRIALS

AUTOLOGOUS STEM CELL TRANSPLANTATION

IMMUNOTHERAPY

What gets you out of bed in the morning?

I look forward to a nice cup of coffee and breakfast with my wife. I walk along the Neckar River to my office, where I am greeted by friendly and cheerful people.

How has receiving the Paul Martini Award influenced your professional journey?

After receiving the Paul Martini Award 2003, my professional interest focused increasingly on conducting innovative trials. My goal was to improve diagnosis, treatment success, prognosis and quality of life of myeloma patients. The establishment of the GMMG study group back in 1996 gave oncologists in private practice and smaller clinics access to innovative study concepts and modern diagnostics.

2003 Winner

HEMATOLOGY

The GMMG study group focuses on designing and conducting academic phase II and III studies for patients in all stages of multiple myeloma (newly diagnosed, relapsed, and refractory multiple myeloma). Results from multicenter investigator-initiated trials (IITs) are implemented in treatment recommendations by the MDK and in national and international guidelines.

What recent insight or development has significantly advanced your field of research?

I expect progress to be made now that complete remission (CR) determined by MRD negativity in the bone marrow was recently recommended by the ODAC in the US as new endpoint for accelerated drug approval in multiple myeloma. A meta-analysis of data from 42 clinical trials involving 21,006 patients had previously shown that the data presented justify the use of MRD as an intermediate clinical endpoint. The GMMG study group participated in the evaluation with the GMMG-MM5-MRD study data and is currently conducting studies in which MRD determination in bone marrow is also used to assess remission.

Where do you currently see the greatest need for research in your field in order to improve patient care?

I expect a lot from new immunotherapies such as CAR-T cell therapy, antibody-drug conjugates, and bispecific antibodies, known as T-cell engagers (BiTEs). These new drugs must be investigated in clinical trials. It is important that sufficient financial resources continue to be available for this purpose in the future and that patients are willing to participate in these trials. To this end, it is also necessary to support trials that take patients' quality of life into account.

Prof. Dr. med. Robert Zeiser

Department of Hematology and Oncology,
Medical Center – University of Freiburg

ACUTE LEUKEMIA **IMMUNOTHERAPY**

STEM CELL TRANSPLANTATION

What gets you out of bed in the morning?

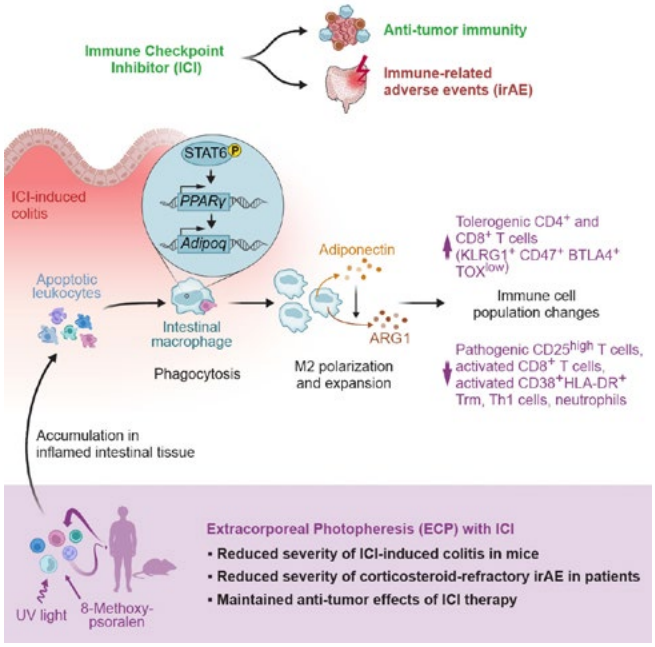
The prospect of having a stimulating work day with good interaction with my coworkers and later a nice evening with my family gets me out of bed in the morning.

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award was instrumental for my scientific career. It provided visibility and recognition for my work in the field of leukemia research and stem cell transplantation. After receiving the Paul Martini Award I was later awarded also the German Cancer Award 2021 and the Gottfried Wilhelm Leibniz 2025. In conclusion, the Paul Martini Award was highly important for me.

2019 Winner

HEMATOLOGY



MY GRAPHIC OF THE YEAR

Local adiponectin production elicits a tissue-specific effect by reducing pro-inflammatory T cell frequencies in the colon while sparing tumor-specific T cell development.

What recent insight or development has significantly advanced your field of research?

Our discovery that adiponectin reduces immune checkpoint inhibitor-induced inflammation without blocking anti-tumor immunity (Cancer Cell 2025) has impacted the way we treat immune mediated side effects. The preclinical and clinical work on irAEs has established ECP which induces adiponectin in the inflamed tissue as a standard second line therapy.

Where do you currently see the greatest need for research in your field in order to improve patient care?

Relapse of acute myeloid leukemia after first achieving a complete remission is a major unmet medical need. I hope my work can further contribute to reduce the risk of leukemia relapse and improve the outcome of AML patients.

PAUL-MARTINI-STIFTUNG

HEMOSTASEOLOGY

Prof. Dr. med. Andreas Greinacher

Department of Transfusion Medicine,
Universitätsmedizin Greifswald

PLATELETS HEMOSTASIS ANTIBODIES

What gets you out of bed in the morning?

My plans for the day

How has receiving the Paul Martini Award influenced your professional journey?

Recognition of my early work on heparin-induced thrombocytopenia (HIT) fueled a sustained focus on understanding mechanisms of immune-mediated thrombosis, extending beyond HIT to related conditions like vaccine-induced thrombocytopenia and thrombosis (VITT). It fostered collaborations with experts in immunology and vascular biology and solidified my commitment to translate basic scientific discoveries into improved clinical care.

1999 Winner

HEMOSTASEOLOGY

What recent insight or development has significantly advanced your field of research?

The expanding understanding of anti-PF4 antibodies transcends heparin-induced thrombocytopenia (HIT), reshaping our comprehension of immune-mediated thrombosis & how endogenous proteins become immunogenic. Recognizing VITT as a vaccine adverse effect revealed natural adenovirus infection can cause prothrombotic disorders & monoclonal gammopathy can be linked to anti-PF4 antibodies. Treating these disorders with protein tyrosine kinase inhibitors represents a novel approach to hemostasis.

Where do you currently see the greatest need for research in your field in order to improve patient care?

Understanding the mechanism by which adenovirus is inducing anti-PF4 antibodies to improve safety of adenovirus vector-based vaccines, which are a highly promising and affordable vaccine platform for neglected diseases.

Prof. Dr. med. Johannes Oldenburg

Institute of Experimental Haematology and Transfusion Medicine, University Hospital Bonn (UKB)

VITAMIN K | BLEEDING DISORDERS

What gets you out of bed in the morning?

The great joy to spend another day of clinical care and science in my institute.

How has receiving the Paul Martini Award influenced your professional journey?

The Paul-Martini Award received in 2005 for the discovery of the protein recycling Vitamin K has significantly supported my scientific and clinical career. In the same year I was appointed as a W3-Professor of Experimental Haematology and Transfusion Medicine at the Medical Faculty and University Clinic Bonn. I am still working in the same area together with just a few other groups in the world.

2005 Winner

HEMOSTASEOLOGY

MY PICTURE OF THE YEAR

It is a private photo taken during my vacation in March, representing the work balance with family and friends. It may also reflect the challenges in science and a great nature in which we are still living.

What recent insight or development has significantly advanced your field of research?

In the field of Vitamin K it is the discovery of the crystal structure of the proteins involved in the Vitamin K cycle and the emerging role of the Vitamin K pathway in metabolic disease. In the field of Haemophilia it is the development of new biologicals for prevention of bleedings that together with the option of gene therapy is almost normalising the life of the patients with Haemophilia. It is a great privilege to host one of the largest haemophilia Centers in the world and to continuously contribute to the cutting-edge research and developments.

Where do you currently see the greatest need for research in your field in order to improve patient care?

In the area of diseases of the Vitamin K pathway we need to develop biomarkers for predicting and monitoring the clinical course of the disease in a lifetime perspective. Vitamin K2 is just emerging as a potential drug for treatment of such patients. In metabolic disease we are just at the very beginning of understanding significance to the vitamin K pathway. In Haemophilia the treatment options as in the next years for the first time will allow children to grow up with normal participation in life and without the development of comorbidities, such as severe joint damage.

PAUL-MARTINI-STIFTUNG

IMMUNOLOGY

Prof. Dr. med. Andrea Ablasser

Global Health Institute, School of Life Sciences,
École polytechnique fédérale de Lausanne (EPFL)

CGAS-STING SIGNAL-TRANSDUCTION

What gets you out of bed in the morning?

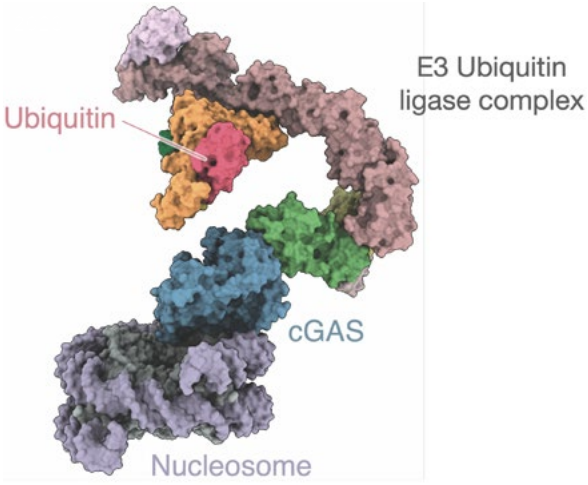
My kids (at 5:00 am every day) ;-)

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award 2023, awarded for my discovery of the cGAS-STING signaling pathway in innate immunity, has significantly underscored the clinical and therapeutic relevance of my basic research. It validates my team's focus on translating fundamental mechanisms of infection and inflammation into new drug targets for cancer, chronic inflammatory, and infectious diseases. The recognition strengthens the drive to turn our discoveries into pre-clinical drug candidates.

2023 Winner

IMMUNOLOGY



MY PICTURE OF THE YEAR

This image illustrates the sophisticated machinery that is critical to control innate DNA sensing inside living cells. These safeguards are at the foundation of innate immunity, as they have allowed the usage of DNA as a signal of infection, despite it being a most basic element of our own cells.

What recent insight or development has significantly advanced your field of research?

The most significant recent insight is our discovery that the cGAS-STING pathway drives chronic, age-related inflammation and functional decline, particularly in the brain, linking it to neurodegeneration. We found that mitochondrial DNA (mtDNA) release from senescent cells, such as microglia, inappropriately activates cGAS-STING. Critically, pharmacological inhibition of STING alleviates systemic inflammation, improves memory, and offers a novel therapeutic strategy to halt age-associated degenerative processes. This opens new avenues for treating diseases far beyond infection.

Where do you currently see the greatest need for research in your field in order to improve patient care?

The greatest current need for patient care lies in understanding the precise, context-specific regulation of the cGAS-STING pathway. Current modulators can activate STING for cancer or inhibit it for autoimmunity, but we lack the molecular precision to target activation only by foreign or aberrant DNA. Future research must focus on mechanisms that distinguish self from non-self DNA and pathological from healthy STING activation. This precision is essential for developing highly specific antagonists/agonists with minimal side effects for long-term use in diseases like neurodegeneration and chronic inflammation.

Prof. Dr. med. Sonja Schrepfer

Department of Surgery, Cedars-Sinai Medical Center, Los Angeles, CA, USA

HYPOIMMUNE TRANSPLANTATION IMMUNOSUPPRESSIONFREE

What gets you out of bed in the morning?

What gets me out of bed in the morning is the belief that immune-shielded cells can fundamentally change what's possible in medicine. Knowing that a child with diabetes or a patient awaiting a transplant could one day live without immunosuppression drives me. The promise of turning an idea into cures—real, lasting cures—is what fuels me every day.

How has receiving the Paul Martini Award influenced your professional journey?

Receiving the Paul Martini Award elevated my confidence and visibility as a researcher. It opened doors to valuable collaborations, expanded my network, and strengthened my commitment to translating scientific discoveries into real clinical impact. The recognition motivates me to aim higher and pursue bold, meaningful projects.

2015 Winner

IMMUNOLOGY

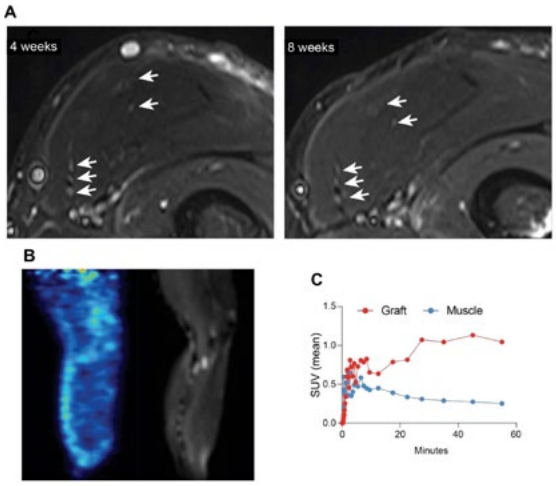


Figure S1: *Imaging of the islet graft.*
Panel A shows T2-STIR-weighted MRI images of the study subject's left forearm. White arrows point at several punctual signals at the site of graft injection in the brachioradialis muscle with no inflammation and no safety or pathological related observations. Panel B shows a PET/MRI after 12 weeks using the GLP-1R targeting tracer [^{68}Ga]Ga-NODAGA-exendin-4. GLP-1R signal co-localized with the UP421 injection sites. Panel C shows a standardized uptake value (SUV) graph for tracer uptake at graft sites vs. surrounding muscle. Tracer accumulation was only observed at graft sites, while tracer washout was observed in muscle.

MY GRAPHIC OF THE YEAR

The 3-month PET-MRI from the NEJM first-in-human study showing hypoimmune allogeneic islet cells engrafted in the patient's forearm without immunosuppression. The β-cell–specific signal proves survival, localization, and function—a milestone moment where immune-evasive cell therapy succeeds inside a human.

What recent insight or development has significantly advanced your field of research?

Recent progress in multiplex CRISPR engineering enables B2M $^{-/-}$ CIITA$^{-/-}$ stem-cell–derived grafts expressing SIRPα-engagers and CD64 to evade T cells, NK cells, and macrophages while maintaining full function. Durable engraftment in preclinical models and advancement into clinical development signal a turning point—moving from immunosuppression management to truly rejection-free cell therapies now entering patients.

Where do you currently see the greatest need for research in your field in order to improve patient care?

The biggest opportunity is to strengthen and extend immune evasion over time. We need to uncover what drives sustained protection, develop biomarkers that detect early immune recognition, and engineer next-generation edits that resist every arm of immunity. Advancing these areas will enable durable, off-the-shelf cell therapies—grafts that persist, function, and truly change the course of disease.

PAUL-MARTINI-STIFTUNG

ONCOLOGY

Prof. Dr. med. Ralf Christian Ernst Ferdinand Bargou

Comprehensive Cancer Center Mainfranken (CCC Mainfranken), University Hospital Würzburg

IMMUNO-ONCOLOGY

T CELL ENGAGING ANTIBODIES

TRANSLATIONAL ONCOLOGY

What gets you out of bed in the morning?

Driving oncology forward and further improving therapies for still incurable cancers.

How has receiving the Paul Martini Award influenced your professional journey?

Important for further career development in oncology, today I am full professor for translational oncology and director of the Comprehensive Cancer Center Mainfranken at University of Würzburg.

2009 Winner

ONCOLOGY

What recent insight or development has significantly advanced your field of research?

Proof-of-concept of T cell engaging bispecific antibodies in important solid tumor entities.

Where do you currently see the greatest need for research in your field in order to improve patient care?

Understanding escape and resistance in modern immuno-therapies and development of novel therapies in hard to treat cancers (e.g., pancreatic cancer, glioblastoma).

Prof. Dr. med. Jan Krönke

Clinic for internal Medicine C, University Medical Center Greifswald

www.linkedin.com/in/jan-krönke-3a49ba16a

TARGETED PROTEIN DEGRADATION

IMMUNOTHERAPY **CANCER**

What gets you out of bed in the morning?

Advancing cancer patient care in clinic and lab with colleagues motivates me each morning—and a good coffee helps, too.

How has receiving the Paul Martini Award influenced your professional journey?

Receiving the Paul Martini Award in 2016 was a great honor and inspired continued research in targeted protein degradation, collaborating with excellent colleagues. I led my Emmy Noether Group (DFG) at Ulm University, accepted a W2 professorship for hematology at Charité, Berlin, in 2020 and in 2025 became the director of Hematology/Oncology at Universitätsmedizin Greifswald.

2016 Winner

ONCOLOGY

What recent insight or development has significantly advanced your field of research?

- The finding that an extensive number of proteins, far more than initially anticipated, can be targeted through protein degraders by hijacking ubiquitin ligases.
- The advancement of mass spectrometry allowing to identify and quantify many thousand proteins in few or even single cells or a drop of blood.
- The first clinical trial of PROTACs shows they are active in cancer and well tolerated, paving the way for translation of new therapeutic approaches.

Where do you currently see the greatest need for research in your field in order to improve patient care?

- Expand the range of targetable proteins in cells with small molecules so any expressed protein can be selectively addressed
- Combine targeted protein degradation with immunotherapy approaches for cancer therapy
- Accelerate the clinical translation of innovative therapeutics and diagnostic tools into the clinic.

Prof. Dr. med. Thorsten Zenz

Department of Medical Oncology and Hematology, University Hospital Zurich (USZ); University of Zurich

PRECISION ONCOLOGY | LYMPHOMA | DRUG RESPONSE

What gets you out of bed in the morning?

My alarm clock :-) and work in stimulating environment (hospital and research).

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award has been a wonderful reward for work done at the DKFZ/NCT and University Hospital in Heidelberg. The Award continues to be a motivation to contribute to the translation of science and discovery.

2018 Winner

ONCOLOGY

What recent insight or development has significantly advanced your field of research?

The ability to profile and analyse thousands of tumor samples to understand the principles governing drug response helps us to take advantage of the explosion in drug development. We can now revisit why some of the drugs we have used for many years work (or do not work) and use this information to develop smarter ways to target tumor cells.

Where do you currently see the greatest need for research in your field in order to improve patient care?

The understanding how tumors and drugs work is still limited. While current drug development often aims to improve outcomes, there is a lot of potential to leverage drugs even if new standards have been established. This could be facilitated by a more precise understanding of the principles underlying drug response, e.g. to develop better combinations.

Prof. Dr. med. Stefan Fröhling

German Cancer Research Center (DKFZ);
National Center for Tumor Diseases (NCT)
Heidelberg

PERSONALIZED ONCOLOGY

What gets you out of bed in the morning?

Decoding tumors to make cancer care smarter, kinder, and truly personal – grounded in science.

How has receiving the Paul Martini Award influenced your professional journey?

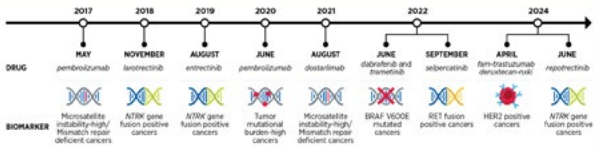
Receiving the Paul Martini Award with my long-time collaborator and friend, Hanno Glimm, was a profound encouragement. It validated our biology-driven approach to individualize cancer medicine, raised visibility and partnerships, enabled new studies and funding, and reaffirmed that our work is a team effort across disciplines focused on patient benefit.

2022 Winner

ONCOLOGY

FIGURE 15

Timeline of Tissue-agnostic FDA Approvals of Cancer Treatments



A watershed moment in cancer medicine was the May 2017 US Food and Drug Administration (FDA) approval of the immunotherapy medication pembrolizumab, for treating patients with solid tumors not of a specific organ or tissue type but rather characterized by the presence of either of two specific molecular characteristics, or biomarkers, called microsatellite instability-high and deficient mismatch repair. These biomarkers are found in a small proportion of cancers arising at numerous sites in the body, including the colon, endometrium, stomach, and rectum. This was the first-ever approval to treat cancer based solely on its molecular alterations and was the result of decades of research in cancer and the immune system along with innovations in clinical trial design and conduct. Subsequently, in November 2018, FDA approved the first molecularly targeted therapeutic, larotrectinib, to treat cancer based on the presence of a specific genetic biomarker known as *NTRK* gene fusions, which are identified in a diverse array of cancers in adults and children. Since then, there have been seven more site-agnostic approvals. In addition, the 2021 FDA approval of belzutifan for cancers of the kidney, brain, and pancreas associated with Von Hippel–Lindau, which is an inherited disorder, and the 2022 FDA approval of pemigatinib for myeloid/lymphoid neoplasms, a small group of blood cancers, can be viewed as site-agnostic.

Adapted from (467).

MY GRAPHIC OF THE YEAR

Timeline of tissue-agnostic FDA approvals of cancer treatments (adapted from the AACR Cancer Progress Report 2025). The figure shows the shift from organ-based to biomarker-based therapy, highlighting milestones that demonstrate precision oncology's promise across diverse tumor type.

What recent insight or development has significantly advanced your field of research?

A recent breakthrough is the integration of multidimensional molecular profiling – combining genome, transcriptome, methylome, and proteome data – to generate a truly comprehensive view of each tumor. This approach enables more precise diagnoses, reveals therapeutic vulnerabilities, and supports the design of adaptive, molecularly guided clinical trials that bring individualized cancer medicine closer to routine care.

Where do you currently see the greatest need for research in your field in order to improve patient care?

The greatest need is turning biological insight into patient benefit. We must deepen functional understanding of tumors, especially mechanisms of treatment resistance; apply precision oncology earlier in the disease course; and develop therapies that match each tumor's biology. Integrating longitudinal profiling, including non-invasive monitoring, into adaptive trials and learning health systems that link treatments, responses, and outcomes will drive smarter decisions and more durable benefit.

Prof. Dr. med. Michael Platten

Department of Neurology, Medical Faculty Mannheim; German Cancer Research Center (DKFZ) Heidelberg

BRAIN **TUMOR** **IMMUNOLOGY**

What gets you out of bed in the morning?

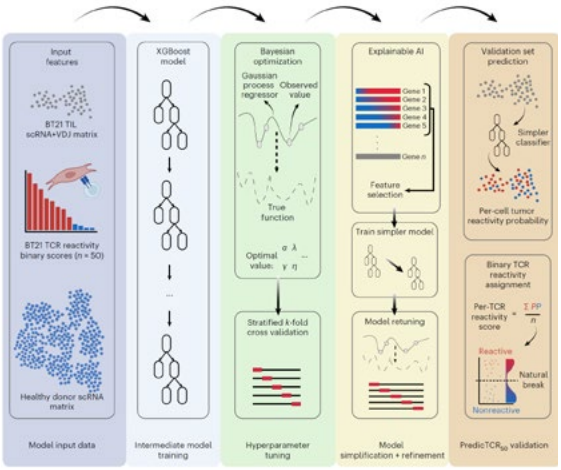
My alarm clock, sometimes our dog and then the prospect of a hot cup of tea with my family, some exercise and most of the time exciting work ahead.

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award has been an exceptional reward for a long journey in developing new immunotherapies for patients with brain tumors. The recognition opened new doors for scientific and clinical cooperations and raised public awareness for a research field that is still underrepresented.

2024 Winner

ONCOLOGY



MY GRAPHIC OF THE YEAR

This graphic from our recent publication i**llustrates an AI-guided classifier that predicts tumor-reactive T cells in tumor tissues based on their gene expression profile**. This classifier can serve as an important tool for predicting response to immunotherapy and the selection of tumor-targeting T cell receptors for T cell therapy.
Source: AI-guided classifier that predicts tumor-reactive T cells in tumor tissues based on their gene expression profile. Tan et al. Nat Biotechnol 2025. doi: 10.1038/s41587-024-02161-y

What recent insight or development has significantly advanced your field of research?

Certainly t**he first successes of CAR T cell therapy** for treating patients with brain tumors. We hope hat we can help push these developments further with our approaches and new technologies. to identify and use brain tumor targeting T cells for therapy.

Where do you currently see the greatest need for research in your field in order to improve patient care?

There are many great concepts to improve patient care - the greatest need for research in my view is in the area of **„reverse translation“**, i.e. the research on biomaterial and imaging/clinical data from early phase clinical trial **to identify predictive biomarkers and mechanisms of response and resistance.** This is why we focus on such reverse translation clinical trials to accelerate the development of innovative therapies. For this we need to work together to improve regulatory frameworks in Germany and Europe.

Prof. Dr. rer. nat. Marcus Conrad

Institute of Metabolism and Cell Death, Helmholtz Munich; Translational Redox Biology, Technical University of Munich (TUM)

CHARACTERIZATION AND TRANSLATION OF FERROPTOSIS

What gets you out of bed in the morning?

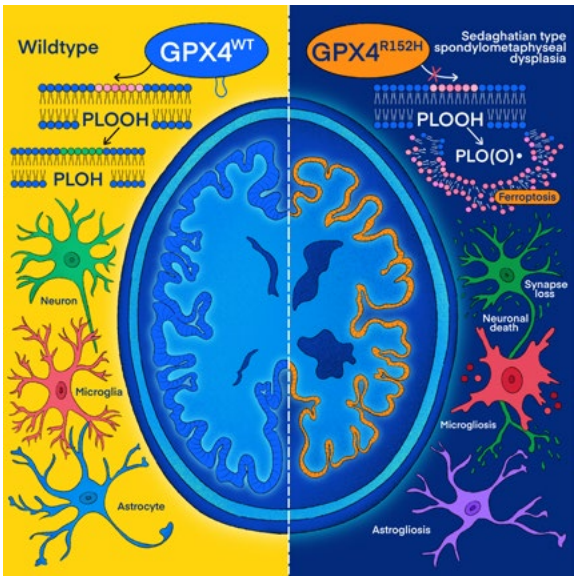
The opportunity to make breakthrough discoveries, challenging big dogmas in cancer and degenerative disease research, and work along with a highly dedicated, passionate team.

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award served as a deep affirmation of the urgent translational potential of ferroptosis research, unequivocally supporting the bridge between fundamental science and clinical innovation. This recognition has profoundly strengthened my commitment to advancing molecular understanding into novel therapeutic strategies for cancer and neurodegenerative diseases, honouring the Award's emphasis on rigorous clinical methodology.

2025 Winner

ONCOLOGY



MY GRAPHIC OF THE YEAR

Source: Lorenz SM, Wahida A, Bostock MJ, et al; Cell 2025; in press.
A fin-like structural loop in GPX4 allows the wildtype enzyme to attach membranes to prevent lipid peroxidation and ferroptosis. The patient-associated R152H mutation destabilizes this loop, triggering ferroptotic neurodegeneration in cells and mice and producing Alzheimer's-like molecular features.

What recent insight or development has significantly advanced your field of research?

A most recent breakthrough is the discovery that GPX4 (glutathione peroxidase 4) protects the human brain from neurodegeneration. Our research has provided clear molecular evidence that when GPX4 fails to detoxify harmful lipid peroxides in neurons, it triggers ferroptotic cell death, driving early-onset dementia. This insight elevates ferroptosis from a therapeutic vulnerability in cancer to a confirmed, disease-driving pathway in neurodegenerative disorders like Alzheimer's. It represents a decisive shift for the field, steering it toward the development of urgently needed anti-ferroptotic therapies capable of preserving neuronal integrity and preventing degeneration

Where do you currently see the greatest need for research in your field in order to improve patient care?

The greatest need in ferroptosis research is translating its precisely defined molecular mechanisms into effective therapies, requiring true selectivity. We must develop strategies that can efficiently induce ferroptosis in diseased cells, such as therapy-resistant or metastasing tumor cells, while protecting the healthy surrounding tissue. By contrast, preventing premature cell death could mitigate neurodegenerative diseases and beyond.
Moving from basic discovery to clinical reality will depend on identifying highly specific biomarkers for early diagnosis and designing targeted small molecules or delivery systems to ensure clinical feasibility with minimal systemic side effects.

PAUL-MARTINI-STIFTUNG

PHARMACOLOGY

Prof. Dr. med. Thomas Gramatté

Institute of Clinical Pharmacology, Faculty of Medicine, Dresden University of Technology

SITE-DEPENDENT INTESTINAL ABSORPTION

What gets you out of bed in the morning?

A delicious breakfast and the tidy desk of a retiree, which leaves enough space for my French textbooks, help me get out of bed.

How has receiving the Paul Martini Award influenced your professional journey?

The award helped me gain recognition among clinical pharmacologists and drug developers in reunified Germany. It was recognized that intestinal perfusion technology could play a decisive role in elucidating the absorption patterns of new drugs and new dosage forms. This opened the door for me to join research networks. Invitations to job interviews were certainly also initiated by the award.

1996 Winner

PHARMACOLOGY

MY GRAPHIC OF THE YEAR

This cartoon reflects the expectations of our society, which always seems to be slightly ahead of what is currently feasible. But when the stressed doctor seems to have found something suitable, the patient shows healthy skepticism. The Oldie Magazine, Cartoon Calendar 2024, Cartoon by Kaamran Hafeez

What recent insight or development has significantly advanced your field of research?

At the time, our findings on active intestinal secretion of drugs were difficult for us to interpret. Today, an incredible number of highly specialized intestinal transporters are known, and a shift from absorption to secretion along short sections of the intestine is no longer surprising.
Site-specific intestinal transporters as the cause of clinically relevant interactions are tested in the early stages of drug development, and the regulatory requirements for this seem to be keeping pace with the rapidly increasing knowledge of transporters.

Where do you currently see the greatest need for research in your field in order to improve patient care?

Transporter-related studies on patients who have undergone intestinal surgery or who suffer from inflammatory bowel disease remain absolutely essential. And when I consider the vast number of herbal preparations available „for our health", I think there must be a high number of unreported cases of interactions with drugs. This is especially true when you consider that nature has specifically designed secretory transporters to prevent certain plant components from entering the bloodstream. There is a need for research in this area.

Prof. Dr. med. Martin F. Fromm

Institute of Experimental and Clinical Pharmacology and Toxicology, Friedrich-Alexander University Erlangen-Nuremberg (FAU)

IMPROVING MEDICATION SAFETY

What gets you out of bed in the morning?

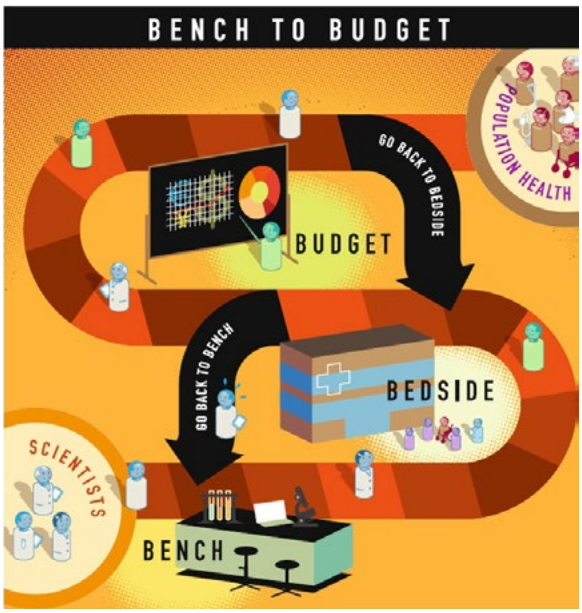
A cup of strong coffee

How has receiving the Paul Martini Award influenced your professional journey?

I received the Paul Martini Award shortly after my return from the DFG-funded postdoc time at Vanderbilt University (Nashville, TN, USA) and right before the time, where I started to apply for professorship positions at German universities. In my opinion the Award was one of the very important factors for the following steps in my career.

2001 Winner

PHARMACOLOGY



MY GRAPHIC OF THE YEAR

It is the Clinical Pharmacology & Therapeutics April 2025 cover image "Bench to Budget: Integrated Evidence Generation for Medications" , because it nicely highlights the need for researchers not only to think about the steps from bench to bedside, but also to take early into account the issues level healthcare delivery to the population and budget.
Source: Bench to Budget: Integrated Evidence Generation for Medications. Schneeweiss S, Miksad R. Clin Pharmacol Ther 2025;117:869-71.

What recent insight or development has significantly advanced your field of research?

In the field ‚transporter-mediated drug-drug interactions (DDI)' it has been recognized that current regulatory guidelines lead to multiple transporter DDI studies in healthy volunteers, which frequently turn out to be negative. The increasing use of endogenous biomarkers for prediction of transporter DDI is likely to reduce the number of these studies. Moreover, we showed that treatment with newer oral antitumor drugs is highly challenging. Medication safety and severe side effects can substantially be reduced by structured clinical pharmacological/ pharmaceutical care (AMBORA).

Where do you currently see the greatest need for research in your field in order to improve patient care?

- Improvement of in vitro-in vivo predictions of transporter-mediated drug-drug interactions
- Development of tools to stratify clinical pharmacological/pharmaceutical care for patients treated with newer oral antitumor drugs based on individual patient risks for medication errors and severe side effects
- Improvement of the integration of omics and other clinically relevant data in electronic health records

Prof. Dr. med. Roland Schuele

Department of Urology and Center for Clinical Research, University Medical Center Freiburg

EPIGENETIC DRUG DEVELOPMENT

What gets you out of bed in the morning?

My motivation that gets me out of bed every morning is scientific curiosity

How has receiving the Paul Martini Award influenced your professional journey?

The Paul Martini Award showed that my reearch topic is relevant and thus reconfirmed my professional journey

What recent insight or development has significantly advanced your field of research?

Our landmark publication in Nature 2005 showcased for the first time that the activity of epigenetic enzymes can be modulated by small molecules. This data fueled the field and resulted in epigenetic drug development.

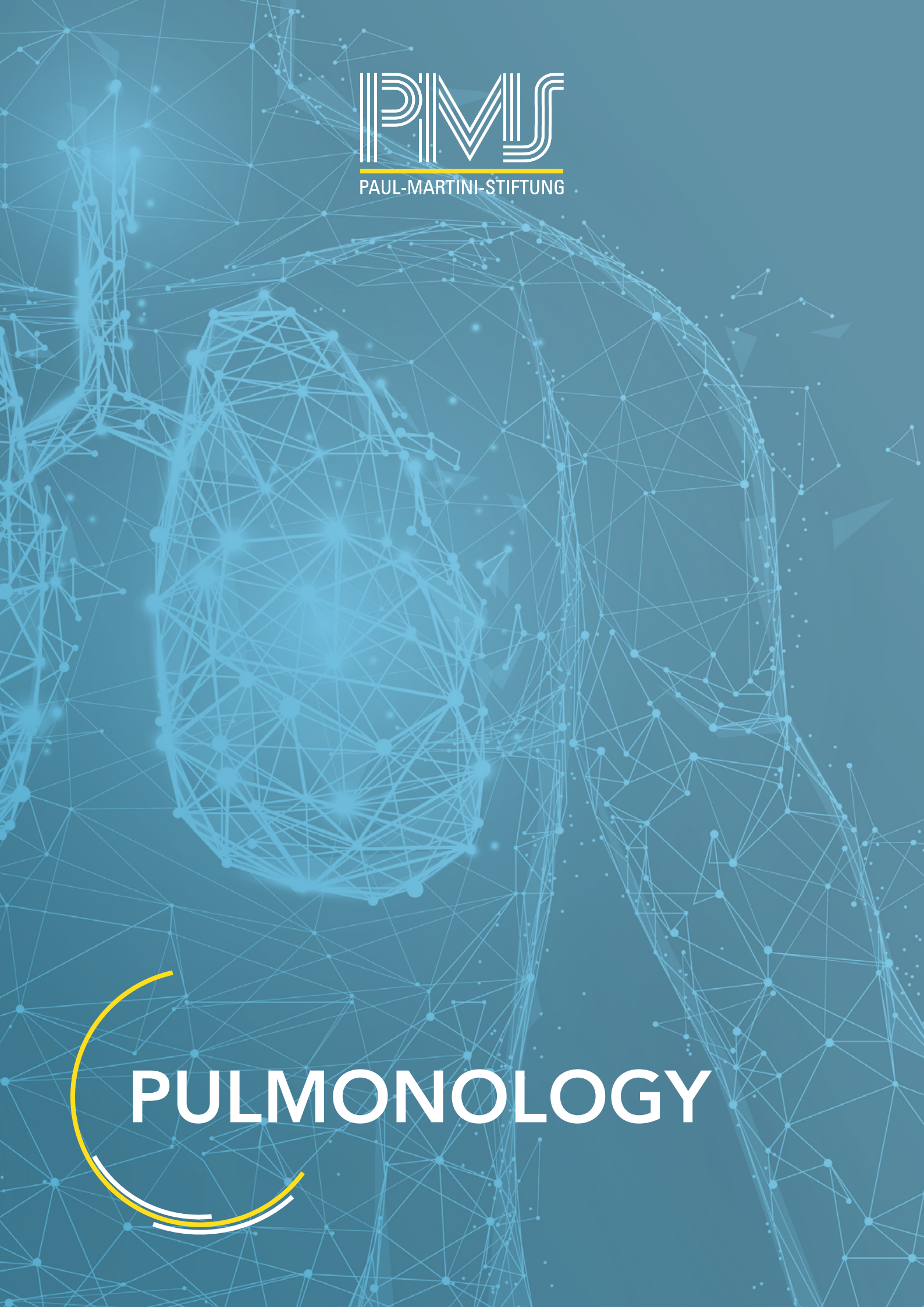
Where do you currently see the greatest need for research in your field in order to improve patient care?

The potential of epigenetic modulators to improve patient care is still not fully considered. In consequence, effort in epigenetic drug development need to be improved and much more supported.

2007 Winner

PHARMACOLOGY

PAUL-MARTINI-STIFTUNG



PULMONOLOGY

Prof. Dr. med. Dr. rer. nat. Robert Bals

Internal Medicine V: Pulmonology, Allergology, Respiratory Intensive Care and Environmental Medicine, Saarland University

PULMONARY TRANSLATIONAL RESEARCH

What gets you out of bed in the morning?

To manage my department with the aim to provide excellent patient care and to have a happy team. To treat patients, to do basic and clinical research.

How has receiving the Paul Martini Award influenced your professional journey?

I received the Award in my early years after my postdoc in the USA. The Award was an important motivation to precede with my work as clinician-scientist with the aim to change medicine by bringing basic research to the patient.

What recent insight or development has significantly advanced your field of research?

We have shown that the microbiome is important in lung research, that stem cells of the lung can be used for therapy and developed novel approaches to prevent or treat respiratory infections.

Where do you currently see the greatest need for research in your field in order to improve patient care?

Improve translation, developed cell based regenerative therapies, decrease administrative burden, stimulate physicians to do research.

2000 Winner

ONCOLOGY

Prof. Dr. med. H. Ardeschir Ghofrani

Department of Internal Medicine II, University Hospital Giessen (Universitätsklinikum Gießen); Justus Liebig University Giessen

TRANSLATIONAL RESEARCH

CARDIOPULMONARY INTERACTION

PULMONARY HYPERTENSION

What gets you out of bed in the morning?

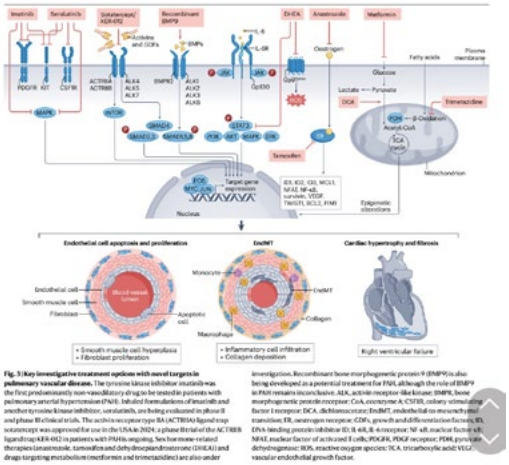
Being member of one of the most prolific lung research groups in the world is a constant motivation to move forward on this exciting journey.

How has receiving the Paul Martini Award influenced your professional journey?

As a young physician scientist the Award was a substantial recognition of our group's efforts developing new treatments for severe pulmonary hypertension, for which we had very limited options at that time. Translational research, in the true sense of bench-to-bedside developments, has since then impressively evolved in our Giessen Lung Research Center and resulted in numerous new therapies.

2004 Winner

PULMONOLOGY



Being biased of course, I find the main figure from our recent review article quite informative, as it nicely summarizes current and upcoming developments in the field of pulmonary vascular research.

Source: Ghofrani et al. Nat Rev Cardiol 2025;22(2):105-120.

What recent insight or development has significantly advanced your field of research?

Progressive pulmonary vascular disease results from chronic remodeling of the vascular wall with inward proliferation and apoptosis resistance, an analogy to oncological processes which was first promoted by our group. Hence, testing the therapeutic potential of tyrosine kinase inhibitors, based on biological rationale provided by our pre-clinical research, became an appealing novel concept. First in man reports from our group, successful phase III RCTs and novel compounds addressing excessive vascular proliferation have evolved over the past few years, bringing us closer to a potential cure.

Where do you currently see the greatest need for research in your field in order to improve patient care?

With increasing numbers of pharmaceutical agents for the treatment of pulmonary arterial hypertension, the notion of precision medicine is becoming increasingly important. Therefore our research has focused on the utilization of „omic" patterns and signatures to better predict treatment responses to specific agents, thereby reducing the burden of unnecessary side effects and increasing the treatment effectiveness. Furthermore, a whole new research field has been established, focusing on right ventricular adaptation to increased afterload and early detection of commencing right heart failure.

Download the digital
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www.paul-martini-stiftung.de/laureates

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