Call for nominations of experts

Animal testing alternatives in bioscience and public health—where replacement is ready and where animal research remains essential

Proposed by: EASAC Biosciences and Public Health Programme
Council endorsement: May 2026
Indicative project period: December 2026–March 2028
Deliverables: Full EASAC report with recommendations and an executive policy brief; report launch envisaged for March 2028.

Purpose and scope

EASAC is establishing a multidisciplinary Working Group (WG) to develop a full evidence-based science policy report based on its scoping paper on animal testing alternatives in bioscience and public health.

The report will address two linked questions:

1. where new approach methodologies (NAMs) can replace or substantially reduce animal use, and;
2. where animal research remains necessary, how Europe can maintain high-quality, ethically governed research while continuing to advance replacement, reduction and refinement.

The WG will review and synthesise existing evidence regarding regulatory safety assessment of industrial chemicals, pesticides and biocides, cosmetics ingredients and relevant consumer product chemicals; preclinical testing of medicines; and fundamental biology and biomedical research. It also includes the research infrastructure, evidence standards and governance needed to support both appropriate adoption of alternatives and improvements in animal studies that remain necessary.

The Working Group will assess approaches including human cell and tissue models, organoids, organ-on-chip systems and computational models. It will consider how evidence from these approaches and from animal studies can be assessed alongside clinical trials, epidemiology and real-world health data. The emphasis will be on fitness for the specific scientific or regulatory purpose, rather than assuming that any single approach is suitable across all applications.

Recommendations will address scientific quality, regulatory acceptance, infrastructure and investment, international alignment, and transparent communication. Particular attention will be given to avoiding fragmented requirements, unnecessary duplication of testing, gaps in health or environmental protection, and the transfer of testing and associated research outside Europe.

Key questions to be addressed in the report include:

- **Where is replacement or reduction feasible?** In which regulatory and research applications can NAMs provide sufficient evidence to replace animal studies or substantially reduce animal use, and which applications require further research and development?
- **Where does animal research remain necessary?** Which scientific questions still require whole-organism models, and how can study design, reporting, data sharing, reduction and refinement improve the quality and value of these studies?

- **What evidence is needed to establish confidence?** Which performance criteria, reference datasets, validation approaches and reproducibility standards should be used to evaluate NAMs and animal models, including benchmarking against human outcomes where available?
- **How can regulatory acceptance become more coherent?** How can European frameworks, agencies and Member States support consistent acceptance of suitable evidence, and how can international alignment reduce duplication and conflicting requirements?
- **What infrastructure and incentives are required?** What investments in human tissue resources, biobanks, experimental platforms, reference materials, data infrastructure and scientific capacity would support appropriate adoption of NAMs while maintaining essential research capabilities?
- **How should the transition be governed and communicated?** How can policymakers support progress without overpromising replacement, weakening protection, increasing testing burdens or displacing research to jurisdictions with weaker safeguards?

Expertise sought with nominations as invitees to working group

We invite nominations of experts with experience in one or more of the following areas:

- **Regulatory toxicology and safety assessment:** assessment of industrial chemicals, pesticides and biocides, cosmetics ingredients or medicines; integrated testing strategies and evaluation of evidence for regulatory decisions.
- **Human cell and tissue-based approaches:** stem-cell-derived models, organoids, microphysiological systems and organ-on-chip technologies, including their development, application and limitations.
- **Computational toxicology and modelling:** physiologically based pharmacokinetic modelling, artificial intelligence and machine learning, evidence integration and assessment of uncertainty.
- **Fundamental and translational biomedical research:** experience with animal models and their alternatives, including systemic physiology, development, behaviour, immune interactions, host–pathogen interactions, multi-organ disease or medicines development.
- **Clinical and population-health evidence:** clinical trials, epidemiology, pharmacovigilance, registries and other real-world data, particularly their use in assessing the relevance and predictive performance of preclinical models.
- **Validation, standardisation and research quality:** inter-laboratory reproducibility, reference materials and datasets, experimental design, biostatistics, systematic review and transparent reporting.
- **Laboratory animal science, welfare and research ethics:** implementation of the 3Rs, harm–benefit assessment, ethical governance, and improvement of studies where animal use remains necessary.
- **Regulatory and research policy, governance and implementation:** European and international acceptance pathways, research infrastructure and data governance, investment and incentives, transition risks, transparency and public trust.

- **Science communication:** experience regarding animal testing, appropriately and objectively communication essential messages on the topic of animal testing, interacting with policy makers and the public.

The Working Group should collectively bring together expertise in NAMs, animal-based research and the evaluation of their respective strengths and limitations. *Individual nominees are not expected to cover all areas.*

Working arrangements and expected contribution

The indicative timetable envisages WG establishment in December 2026, draft finalisation in September–October 2027, peer review in November 2027 and launch in March 2028. This launch coincides with an ERA openness and awareness programme[1] (*European Research Area action: guidance, openness and public engagement*), including guidance for ethics committees, reviewers and regulators, planned for April–June 2028; and, a major civil-society and patient-awareness conference planned for July–September 2028.

Four Working Group meetings are envisaged over the approximate 15-month period.

Members will be expected to participate actively in the majority of meetings (mainly online, with 1-2 in person if necessary), assess relevant evidence, contribute to drafting and revision, and help develop the report's conclusions and recommendations. Assistance will also be asked for help with (national) dissemination, stakeholder engagement, and a potential active role in report launch (in-person in Brussels). Travel costs are expected to be covered by nominating academies.

Nominations should be submitted to secretariat@easac.eu **by 8 December 2026,** accompanied by a Curriculum Vitae, a short statement of relevant expertise and a completed Declaration of Interests form. The selected experts will then be asked to confirm their willingness to contribute.

[1] The report is relevant to the ongoing implementation of ERA Action 17 on accelerating New Approach Methodologies (NAMs). This action includes a harmonised NAM openness and awareness programme, with guidance for ethics committees, reviewers and regulators planned for April–June 2028, as well as a major awareness-raising conference for civil society and patients planned for July–September 2028. These activities could provide opportunities for the dissemination and uptake of EASAC's independent scientific and policy recommendations.