European Medicines Agency
*Evaluation of Medicines for Human Use*

01 December 2005
General-EMEA/CHMP/364660/2005

**COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE**
**NOVEMBER 2005 PLENARY MEETING**
**MONTHLY REPORT**

The Committee for Medicinal Products for Human Use (CHMP) held its November plenary meeting from 14-17 November 2005.

The Chairman welcomed Dr. Harald Enzmann, who has been appointed as CHMP member in place of Dr. Gottfried Kreutz. The CHMP Chairman thanked on behalf of the Committee Dr. Gottfried Kreutz for his valuable contribution to the CHMP over the past years.

The Committee welcomed Dr Isabelle Moulon as Head of the Medical Information Sector.

## Centralised procedure

### Initial applications for marketing authorisation

The CHMP adopted positive opinions on two initial marketing authorisation applications at this meeting:

- **Cubicin** (daptomycin), Chiron Corporation Ltd. Cubicin is indicated for the treatment of complicated skin and soft-tissue infections in adults. EMEA review began on 20 December 2004 with an active review time of 211 days.
- **Kiovig** (human normal immunoglobulin (IVIg)), Baxter AG. Kiovig is intended as replacement therapy for immunodeficiency and for immunomodulation in immune-mediated diseases. EMEA review began on 18 October 2004 with an active review time of 204 days.

Summaries of opinion for these medicinal products are available on the EMEA website: http://www.emea.eu.int. Further information will be included in the European Public Assessment Report (EPAR) once the European Commission has granted final approval.

### Scientific opinion in the context of cooperation with the Word Health Organization (WHO)

The CHMP gave for the first time a scientific opinion in the context of cooperation with the WHO for medicinal products intended exclusively for markets outside of the European Union. **Lamivudine GSK 150 mg film-coated tablets** and **Lamivudine/Zidovudine GSK film-coated tablets**, both from Glaxo Group Limited, are intended as part of an antiretroviral combination therapy for the treatment of human immunodeficiency virus (HIV) infected children and adults.

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Extension of indication and other recommendations

The Committee adopted a positive opinion on the extension of indication for **Hycamtin** (topotecan), from SmithKline Beecham plc, to add treatment of relapsed small cell lung cancer in patients for whom re-treatment with the first-line regimen is not considered appropriate. Hycamtin, which was first authorised in the European Union (EU) on 12 November 1996, is currently indicated for the treatment of patients with metastatic carcinoma of the ovary after failure of first-line or subsequent therapy.

New contraindication

The Committee recommended adding a contraindication for **Regranex** (becaplermin), from Janssen-Cilag International NV, that it should not be used in patients with clinically infected ulcers. Regranex, which was first authorised in the EU on 29 March 1999, is currently indicated, in association with other good wound care measures, to promote granulation and thereby the healing of full-thickness, neuropathic, chronic, diabetic ulcers less than or equal to 5 $cm^2$.

Summaries of opinion for these medicinal products are available on the EMEA website: http://www.emea.eu.int. Further information will be included in the EPAR once the European Commission has granted final approval.

Update on safety issues

The CHMP requested the Marketing Authorisation Holder (Roche) of **Tamiflu** to provide a cumulative safety review of all available data on serious psychiatric disorders, including all case reports with a fatal outcome where Tamiflu was involved. The EMEA will make a statement on the outcome of this evaluation. A press release was published and can be found at the EMEA website: http://www.emea.eu.int/pdfs/general/direct/pr/38501305en.pdf

Lists of Questions

The Committee adopted List of Questions on one initial application (Part B).

Applications for marketing authorisation for orphan medicinal product

Details of those orphan medicinal products that have been subject of a centralised application for marketing authorisation since the October 2005 CHMP are provided in **Annex 4**.

Detailed information on the centralised procedure

An overview of centralised procedures since 1995 is given in **Annex 1**. The list of medicinal products for which marketing authorisations have been granted by the European Commission since the CHMP plenary meeting in October 2005 is provided in **Annex 2.** The post-authorisation centralised procedures finalised during this meeting are summarised in **Annex 3**.

## CHMP Working Parties

The CHMP was informed of the outcome of the discussions of the Scientific Advice Working Party (SAWP) meeting, which was held on 24-25 October 2005. For further details, please see **Annex 5**.

Documents prepared by the CHMP Working Parties adopted during the November 2005 CHMP meeting are listed in **Annex 6**.

**Upcoming meetings following the November 2005 CHMP plenary meeting:**

- The 17th meeting of the CHMP will be held at the EMEA on 12-15 December 2005.
- The next Invented Name Review Group meeting will be held at the EMEA on 12 December 2005.
- The Workshop on Small Medium Enterprises (SMEs) took place at the EMEA on 17 November 2005.
- An EMEA joint workshop with European Human and Veterinary Industry Associations on the implementation of the new pharmaceutical legislation was held at EMEA on 29 November 2005. The objective was to present the implementation of the new provision related to Patients' Organisations and Health Care Professionals.
- The EMEA/CHMP Working Party with Patients' and Consumers Organisations will be held at the EMEA on 2 December 2005.
- The 2nd meeting of the CMD(h) (Co-ordination Group for Mutual Recognition and Decentralised Procedures -Human) replacing the Mutual Recognition Facilitation Group will be held at the EMEA on 12 and 13 December 2005.

**Organisational matters**

The main topics addressed during the November 2005 CHMP meeting related to:

- The Guideline on Similar Biological Medicinal Products.
  This Guideline is published at the EMEA website (http://www.emea.eu.int/pdfs/human/biosimilar/043704en.pdf).
- The adoption of the Work Programmes for the following CHMP Working Parties:
  Biologics Working Party Work Programme 2006, Gene Therapy Working Party Work Program for 2006 – 2007 and Efficacy Working Party Program for 2006/2007.
  These documents will be published at the EMEA website.
- The adoption of the Mandate, Objectives and rules of procedure for the CHMP Scientific Advisory Group on cardiovascular issues (SAG - CVS).
  This document will be published at the EMEA website.

**EMEA Implementation of the New EU Pharmaceutical Legislation**

The tenth CHMP/EMEA Implementation Task Force (CEITAF) meeting took place on Monday 14 November 2005.

The following Guideline was adopted by the CHMP and will be published on the EMEA website:

- Revised Guideline on procedural aspects regarding a CHMP scientific opinion in the context of cooperation with the World Health Organisation (WHO) for the evaluation of medicinal products intended exclusively for markets outside the Community

Initial discussions took place on the following topics:

- Criteria for the appointment of CHMP Rapporteur/Co-Rapporteur
- Publication of refusal of opinions

CEITAF meetings will continue to take place and consultation on the implementation of the new EU Pharmaceutical Legislation is expected to go beyond the end of 2005 and meetings are expected to continue during 2006.

**PROCEDURAL ANNOUNCEMENTS**

- **Translations of Product Information**

  Following the revision of the linguistic review process of product information in the centralised procedure, applicants/MAHs are reminded that translations are no longer to be sent to CHMP Members for linguistic checking.

  As of the November 2005 CHMP meeting, translations of the adopted product information are to be provided electronically (in one Eudralink package) to the QRD secretariat (for new applications and extensions) or to the Member States contact points listed in the attached table (for Type II variations, renewals, annual re-assessments)
  http://www.emea.eu.int/htms/human/qrd/qrdplt/102302en.pdf

  For further information, please consult the following document:
  http://www.emea.eu.int/pdfs/human/regaffair/554202en.pdf

- **Submission of Type IA and Type IB variations in December 2005**

  Please note that the EMEA will be closed between 24 December 2005 and 2 January 2006.

  Marketing Authorisation Holders are therefore requested not to submit Type IA variation applications to the EMEA between 9 and 23 December 2005 (incl.) because the 14-day timeframe for the Agency to acknowledge the validity of the submitted Type IA variation (see article 4 of Commission Regulation (EC) No 1085/2003) would coincide with the official closure of the EMEA.

  Type IA variation applications submitted not later than 8 December 2005 will be finalised before the EMEA Christmas break. Any Type IA variation applications submitted to the EMEA between 9 December 2005 and 2 January of 2006 will start on the 3 January 2006.

  Marketing Authorisation Holders intending to apply for Type IB variations in December 2005 are encouraged to liaise with the EMEA prior to their submission.

**PROCEDURAL ANNOUNCEMENTS (cont)**

- **Clarification on the Active Substance Master File (ASMF) and Plasma Master File (PMF) concepts in relation to medical devices incorporating biological medicinal products as ancillary substance**

  Notified Bodies, medical device manufacturers and manufacturers of ancillary biological substances are advised that the non-applicability of the Active Substance Master File (ASMF) concept to biological active substances and the non-applicability of the ASMF concept of open and closed parts to Plasma Master File (PMF) as per the CHMP Monthly report for October 2004 as stated below, are applicable to medical devices incorporating biological medicinal products, including blood derivatives, as ancillary substance.

  Therefore, ASMF are not allowed for these types of substances and the PMF should be made available to the medical device manufacturer, as for any other part of the dossier of ancillary blood derivative.

  ***EXTRACT FROM THE OCTOBER 2004 CHMP MONTHLY REPORT***

  ** Non-applicability of the Active Substance Master file (ASMF) concept to biological active substances*
  *Marketing Authorisation Holders (MAHs) and applicants are advised that the concept of Active Substance Master files, as laid down in Directive 2001/83/EC, as amended, cannot be applied in the context of biological medicinal products.*

  *The characterisation and determination of biological active substances' quality requires not only a combination of physico-chemical and biological testing, but also extensive knowledge of the production process and its control.*

  *The MAH/applicant for a biological medicinal product could therefore not comply with the requirement to 'take responsibility for the medicinal product' without having full and transparent access to these quality-related data. The use of an ASMF would prevent such access, and should therefore not be allowed for biological active substances.*

  *In addition, active substances, which are present in certain medicinal products such as vaccines or celltherapy medicinal products, do not fit with the concept of a 'well-defined' active substance.*

  ** Non-applicability of the ASMF concept of open and closed parts to Vaccine Antigen Master file (VAMF) and Plasma Master file (PMF)*
  *The legislation does not provide for the use of open/closed parts in the Vaccine Antigen Master file (VAMF) and Plasma Master file (PMF). The concept of open (non-confidential) and closed (confidential) parts is specific to the Active Substance Master File.*

  *Regarding the VAMF the legislation specifies that the VAMF holder cannot differ from the MAH/applicant for the concerned medicinal product: there is hence no rationale for an 'open/closed' parts system.*

  *For the PMF the legislation specifies that where the MAH/applicant differs from the holder of the PMF, the PMF shall be made available to the MAH/applicant for submission to the competent authority.*

**Mutual Recognition and Decentralised Procedures-Human**

The CHMP noted the report from the first CMD(h) (Co-ordination Group for Mutual Recognition and Decentralised Procedures-Human) meeting held on 12-13 November 2005. For further details, please see **Annex 7**.

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This CHMP Monthly Report and other documents are available on the Internet at the following address:
http://www.emea.eu.int

**ANNEX 1 to CHMP Monthly Report November 2005**

## EMEA CENTRALISED PROCEDURES

| | 1995 - 2004 | 2005 | Overall Total |
|---|---|---|---|
| Scientific Advice | 433 | 101 | 534 |
| Follow-up to Scientific Advice | 71 | 21 | 92 |
| Protocol Assistance | 59 | 38 | 97 |
| Follow-up to Protocol Assistance | 12 | 12 | 24 |

| | 1995-2004 | | | 2005 | | | Overall Total |
|---|---|---|---|---|---|---|---|
| | Part A | Part B | Total | Part A | Part B | Total | |
| Applications submitted | 153 | 303 | 456 | 4 | 30 | 34 | 490 |
| Consultation for Medical Device[1] | 0 | 1 | 1 | 0 | 3 | 3 | 4 |
| Withdrawals | 22 | 62 | 84 | 0 | 11 | 11 | 95 |
| Positive opinions[2] | 107 | 197 | 304 | 6 | 16 | 22 | 326[3] |
| Negative opinions[4] | 2 | 5 | 7 | 0 | 0 | 0 | 7[5] |
| Marketing authorisations granted by the Commission | 98 | 190 | 288 | 6 | 17 | 23 | 311[6] |

| | 1995-2004 | | | 2005 | | | Overall Total |
|---|---|---|---|---|---|---|---|
| | Part A | Part B | Total | Part A | Part B | Total | |
| Variations type I | 863 | 1937 | 2800 | 151 | 403 | 554 | 3354 |
| Positive opinions, variations type II | 758 | 886 | 1644 | 241 | 222 | 463 | 2107 |
| Negative opinions, variations type II | 1 | 6 | 7 | 0 | 2 | 2 | 9 |
| Extensions (Annex II applications) | 53 | 63 | 116 | 6 | 5 | 11 | 127 |

[1] Consultation in accordance with Council Directive 93/42/EEC concerning medical devices as amended by Directive 2000/70/EC as regards medical devices incorporating stable derivatives of human blood or plasma and Directive 2001/104/EC.
[2] 23 positive opinion corresponding to 23 Orphan Medicinal Products
[3] 326 positive opinions corresponding to 255 substances
[4] In case of appeal, the opinion will not be counted twice
[5] 7 negative opinions corresponding to 6 substances (2 of these negative opinions correspond to 2 Orphan Medicinal Products)
[6] 311 marketing authorisations corresponding to 240 substances

## MEDICINAL PRODUCTS GRANTED A COMMUNITY MARKETING AUTHORISATION UNDER THE CENTRALISED PROCEDURE SINCE THE OCTOBER 2005 CHMP MONTHLY REPORT

| | |
|---|---|
| **Invented Name** | Xyrem |
| **INN** | sodium oxybate |
| **Marketing Authorisation Holder** | UCB Pharma Ltd |
| **Proposed ATC code** | N07XX04 |
| **Indication** | Treatment of cataplexy in adult patients with narcolepsy |
| **CPMP Opinion date** | 26.06.2005 |
| **Marketing Authorisation Date** | 13.10.2005 |

| | |
|---|---|
| **Invented Name** | Procoralan |
| **INN** | ivabradine |
| **Marketing Authorisation Holder** | Les Laboratoires Servier |
| **Proposed ATC code** | C01EB17 |
| **Indication** | Treatment of chronic stable angina pectoris |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 25.10.2005 |

| | |
|---|---|
| **Invented Name** | Corlentor |
| **INN** | ivabradine |
| **Marketing Authorisation Holder** | Les Laboratoires Servier |
| **Proposed ATC code** | C01EB17 |
| **Indication** | Treatment of chronic stable angina pectoris |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 25.10.2005 |

| | |
|---|---|
| **Invented Name** | Xolair |
| **INN** | omalizumab |
| **Marketing Authorisation Holder** | Novartis Europharm Ltd |
| **Proposed ATC code** | R03DX05 |
| **Indication** | Treatment of severe persistent allergic asthma |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 25.10.2005 |

| | |
|---|---|
| **Invented Name** | Kepivance |
| **INN** | palifermin |
| **Marketing Authorisation Holder** | Amgen Europe B.V. |
| **Proposed ATC code** | V03AF08 (temporary) |
| **Indication** | Treatment oral mucositis in patients with haematological malignancies receiving myeloablative therapy |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 25.10.2005 |

| | |
|---|---|
| **Invented Name** | Noxafil |
| **INN** | posaconazole |
| **Marketing Authorisation Holder** | SP Europe |
| **Proposed ATC code** | J02AC04 |
| **Indication** | Treatment of invasive fungal infections: Invasive aspergillosis; Fusariosis, Chromoblastomycosis and mycetoma; Coccidioidomycosis |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 25.10.2005 |

| | |
|---|---|
| **Invented Name** | Posaconazole SP |
| **INN** | Noxafil |
| **Marketing Authorisation Holder** | posaconazole |
| **Proposed ATC code** | SP Europe |
| **Indication** | J02AC04 |
| **CPMP Opinion date** | Treatment of invasive fungal infections: Invasive aspergillosis; Fusariosis, Chromoblastomycosis and mycetoma; Coccidioidomycosis |
| **Marketing Authorisation Date** | 28.07.2005 |

| | |
|---|---|
| **Invented Name** | Aptivus |
| **INN** | tipranavir |
| **Marketing Authorisation Holder** | Boehringer Ingelheim |
| **Proposed ATC code** | J05AE09 (temporary) |
| **Indication** | Treatment of HIV-1 infection |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 25.10.2005 |

| | |
|---|---|
| **Invented Name** | Revatio |
| **INN** | sildenafil citrate |
| **Marketing Authorisation Holder** | Pfizer Limited |
| **Proposed ATC code** | G04BE03 |
| **Indication** | Treatment of patients with pulmonary arterial hypertension |
| **CPMP Opinion date** | 28.07.2005 |
| **Marketing Authorisation Date** | 28.10.2005 |

## OUTCOME OF THE NOVEMBER 2005 CHMP MEETING IN RELATION TO CENTRALISED APPLICATIONS IN THE POST-AUTHORISATION PHASE

| **Opinions for Type II Variation applications** | |
|---|---|
| **Number of Opinions** | **Outcome** |
| 1 Extension of indication | 1 Positive opinion |
| 16 SPC changes | 16 Positive opinions |
| 20 Quality changes | 20 Positive opinions |

| **Opinions for Annual Re-Assessment applications** | | |
|---|---|---|
| **Name of Medicinal Product (INN)** | **Outcome** | **Comments** |
| **Benefix** (nonacog alfa)<br>Wyeth Europe | Positive Opinion | The authorisation will remain under exceptional circumstances |
| **Ceprotin** (protein C)<br>Baxter AG | Positive Opinion | The authorisation will remain under exceptional circumstances |

| **Opinions for Renewal applications** | | |
|---|---|---|
| **Name of Medicinal Product (INN)** | **Outcome** | **Comments** |
| **Fareston** (toremifene)<br>Orion Corporation | Positive Opinion | --- |
| **Trizivir** (lamivudine zidovudine abacavir)<br>GlaxoSmithKline | Positive Opinion | --- |

**OVERVIEW OF DESIGNATED ORPHAN MEDICINAL PRODUCTS THAT HAVE BEEN THE SUBJECT OF A CENTRALISED APPLICATION FOR MARKETING AUTHORISATION:**
***UPDATE SINCE THE LAST COMP MEETING ON 19 OCTOBER 2005***

| ***Active substance*** | ***Sponsor/applicant*** | ***EU Designation Number & Date of Orphan Designation*** | ***Designated Orphan Indication*** |
|---|---|---|---|
| Adenovirus-mediated *Herpes simplex* virus – thymidine kinase (HSV-tk) gene (Cerepro) | Ark Therapeutics Ltd | EU/3/01/083 6/02/2002 | Treatment of high-grade glioma with subsequent use of ganciclovir sodium |
| Hydroxyurea (Siklos) | OTL Pharma | EU/3/03/154 9/07/2003 | Treatment of sickle cell syndrome |

## OUTCOME OF THE NOVEMBER 2005 CHMP MEETING IN RELATION TO SCIENTIFIC ADVICE PROCEDURES

| Substance | Intended indications(s) | Type of Request | | | | Topic | | | |
|---|---|---|---|---|---|---|---|---|---|
| | | New | | Follow-up | | Pharma ceutical | Pre-clinical | Clinical | Significant Benefit |
| | | SA | PA | SA | PA | | | | |
| Biological | Venous thromboembolism | X | | | | X | X | X | |
| Chemical | Mild to moderate pain | X | | | | X | | X | |
| Chemical | Shizophrenia | X | | | | | | X | |
| Chemical | Idiopathic Parkinson’s disease | X | | | | X | | | |
| Chemical | Parkinson's disease | X | | | | | | X | |
| Chemical | Chronic myeloid leukaemia | | | X | | | | X | |
| Chemical | Bone and soft tissue sarcoma | X | | | | | | X | |
| Chemical | Colorectal cancer | X | | | | | X | X | |
| Biological | Glioma | | | | X | | | X | X |
| Biological | Advanced melanoma | X | | | | | | X | |
| Chemical | Familial Adenomatous Polyposis | | | | X | | | X | X |
| Chemical | Hereditary or sporadic thyroid carcinomas | X | | | | | X | X | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Chemical | Follicular non-Hodgkin's lymphoma | X | | | | | | X | |
| Chemical | Type 2 Diabetes | X | | | | | X | X | |
| Biological | Diabetes mellitus | X | | | | | | X | |
| Biological | Management of diseases associated with overactive muscles | | | X | | | | X | |
| Biological | Renal Anaemia | | | X | | | | X | |
| Biological | Malabsorption due to exocrine pancreatic insufficiency | | X | | | | X | | |
| Chemical | Cystic fybrosis | | X | | | | X | X | X |
| Chemical | Reversal of neuromuscular block induced by rocuronium bromide or vecuronium bromide | | | X | | | X | | |
| Chemical | Autosomal dominant polycystic kidney disease | X | | | | | | X | |

SA: Scientific Advice

PA: Protocol Assistance

The above-mentioned 13 Scientific Advice letters, 2 Protocol Assistance letters, 4 Follow-up Scientific Advice letters and 2 Follow-up Protocol Assistance letters were adopted at the 14-17 November 2005 CHMP meeting.

The Committee accepted 12 Initial Scientific Advice Requests, 2 Follow-up Scientific Advice Requests, 3 Initial Protocol Assistance Requests and 1 Follow-up Protocol Assistance started at the meeting that took place on 24-25 October 2005.

# DOCUMENTS PREPARED BY THE CHMP WORKING PARTIES ADOPTED DURING THE NOVEMBER 2005 CHMP MEETING

## BIOLOGICS WORKING PARTY

| Reference number | Document | Status |
|---|---|---|
| EMEA/CHMP/BWP/ 373464/2005 | Procedure for 2nd step of the PMF certification procedure for the centrally authorised products | Adopted |
| EMEA/CHMP/BWP/ 340050/2005 | CHMP Biologics Working Party Work Programme 2006 | Adopted |

## BLOOD PRODUCTS WORKING PARTY

| Reference number | Document | Status |
|---|---|---|
| CPMP/PhVWP/BPWG /2231/99 Rev 2 | Core SPC for Human Albumin Solution | Adopted |
| CPMP/BPWG/220/02 | Guideline on the Clinical Investigation of Human Plasma Derived von Willebrand Factor Products | Adopted |
| CPMP/BPWG/278/02 | Core SPC for Human Plasma Derived von Willebrand Factor Products | Adopted |

## EFFICACY WORKING PARTY

| Reference number | Document | Status |
|---|---|---|
| CHMP/EWP/633/02 | Guideline on the Clinical Development of Medicinal Products for the treatment of HIV Infection | Adopted |
| CHMP/EWP/369963/ 2005 | Concept Paper on the Development of a Guideline on the Development of New Products for the Treatment of Tobacco and Alcohol Dependence | Released for 3 months consultation |
| CPMP/EWP/563/95 (CHMP/EWP/369959/ 2005) | Recommendation on the Need for Revision of the Guideline on Clinical Investigation of Medicinal Products in the Treatment of Parkinson's Disease | Released for 3 months consultation |
| CPMP/EWP/553/95 (CHMP/EWP/369929/ 2005) | Recommendation on the Need for Revision of the Guideline on Medicinal Products in the Treatment of Alzheimer's Disease | Released for 3 months consultation |
| CPMP/EWP/707/98 (CHMP/EWP/340660/ 2005) | Recommendation on the Need for Revision of the Guideline on Clinical Investigation of Medicinal Products for Prophylaxis of Intra- and Postoperative Venous Thromboembolic Risk | Released for 3 months consultation |
| CHMP/EWP/268513/ 2005 | Efficacy Working Party Program for 2006/2007 | Adopted |

**GENE THERAPY WORKING PARTY (GTWP)**

| Reference number | Document | Status |
|---|---|---|
| EMEA/274409/2005 | Concept paper on the development of a Guideline on the Non-clinical studies prior to clinical use of gene-therapy medicinal products | Released for 3 months consultation |
| CHMP/203831/2005 | Concept paper on scientific requirements for the environmental risk assessment of gene therapy medicinal products | Released for 3 months consultation |
| CHMP/273974/2005 | Note for Guidance on the Quality, Pre-clinical and Clinical aspects of Gene Transfer medicinal products: Annex on Non-clinical testing for inadvertent germline transmission of gene transfer vectors | Released for 6 months consultation |
| CHMP/GTWP/276656/ 2005 | Gene Therapy Working Party Work Program for 2006 – 2007 | Adopted |

**PAEDIATRIC WORKING PARTY**

| Reference number | Document | Status |
|---|---|---|
| CHMP/366844/2005 | Assessment of the paediatric needs – chemotherapy products (Part I) | Released for 6 months consultation |

**PHARMACOVIGILANCE WORKING PARTY**

| Reference number | Document | Status |
|---|---|---|
| CHMP/313666/2005 | Guideline on the exposure to medicinal products during pregnancy: need for post-authorisation data | Adopted |
| CHMP/PhVWP/ 372004/2005 | Concept paper for a CHMP guideline on the conduct of pharmacovigilance for vaccines | Released for 3 months publication |

**VACCINE WORKING PARTY**

| Reference number | Document | Status |
|---|---|---|
| EMEA/198532/2005 | EMEA Pandemic Influenza Crisis Management Plan for the evaluation and maintenance of pandemic influenza vaccines and antivirals | Released for consultation until end January 2006 |

**WORKING PARTY ON SIMILAR BIOLOGICAL (BIOSIMILAR) MEDICINAL PRODUCTS**

| Reference number | Document | Status |
|---|---|---|
| CHMP/437/04 | Guideline on Similar Biological Medicinal Products | Published on the EMEA website: (http://www.emea.eu.int/pdfs/human/biosimilar/043704en.pdf) |

**ICH**

| Reference number | Document | Status |
|---|---|---|
| EMEA/CHMP/167068/2004 | ICH Q8 Step 4 Note for guidance on pharmaceutical development | Adopted |

Co-ordination Group for Mutual Recognition and Decentralised Procedures - Human

# Report from the inaugural CMD(h) meeting held on 14th and 15th November 2005

## General Issues

Inaugural meeting of the Coordination group for mutual recognition and decentralised procedures – CMD(h)

The CMD(h) held its inaugural meeting on 14 and 15 November 2005. The activities on the first day of the meeting included an informative session to Interested Parties on the new decentralised procedure, the referral procedure to the CMD(h), in case of disagreement between MS in a mutual recognition or decentralised procedure and a session of questions and answers.

The informative session to Interested Parties was followed by speeches from major contributors to the EU Pharmaceutical Regulatory System and a reception.

The second day of the meeting was focused on arrangements for conducting future CMD(h) business and preparation of the work plan for the CMD(h), including the timelines for the update of existing MRFG Guidance documents in the Mutual Recognition Procedure.

Chairperson of the CMD(h)

The election of the Chairperson of the CMD(h) figured as the first agenda item on the first day of the inaugural CMD(h) meeting. Mrs. Truus Janse-de Hoog, from the Medicines Evaluation Board, Netherlands was elected Chairperson of the CMD(h) by an absolute majority of the CMD(h) members, for a term of three years.

The Vice-Chairperson of the CMD(h) is Ms. Shirley Norton, for the duration of the term of the United Kingdom presidency of the Council of the European Union.

CMD(h) Rules of Procedure

The Rules of Procedure for the Coordination group for Mutual recognition and Decentralised procedures – Human were adopted by an absolute majority of the members of the CMD(h) and will be sent to the EC for a favourable opinion, as provided for in Article 27(3) of Directive 2001/83/EC, as amended.

List of CMD(h) Members

The list of CMD(h) Members appointed by each National Competent Authority will be published on the website.

Logotype for the CMD(h)

The CMD(h) and CMD(v) in collaboration with the Heads of Medicines Agencies have agreed on the logotype for the Coordination groups.

CMD(h) Sub-group on harmonisation of SPCs

The CMD(h) has endorsed the mandate for the CMD(h) Sub-group on harmonisation of SPCs. The Sub-group includes representatives from the CMD(h), CHMP, EMEA and EC and has been established in view

of the role of the Coordination group to lay down a list of medicinal products for which a harmonised SPC should be drawn up, in accordance with Article 30 (2) of Directive 2001/83/EC, as amended.

The mandate of the Sub-group on harmonisation of SPCs will be published on the website.

Work plan for the CMD(h) and timelines for the update of MRFG Guidance documents in the Mutual Recognition Procedure

The CMD(h) has agreed on the work plan for the CMD(h) and to work on a three-months timeframe for the development of new guidance to support the functioning of CMD(h) and an update of existing MRFG Guidance documents, in accordance with the new legislation and to consider, where appropriate, the new decentralised procedure. A table of guidance documents in preparation or under review will be published on the website for transparency.

Meanwhile, MRFG guidance should be considered as CMD(h) guidance and the mutual recognition procedure should be considered alongside the new decentralised procedure, unless specific guidance exists for the decentralised procedure or MRP guidance cannot be applied, by analogy, to the decentralised procedure.

Annotated QRD template for MR/DC procedures

The CMD(h), in collaboration with the QRD, has agreed on the annotated QRD product information template for medicinal products for human use with guidance suitable for use in the Mutual Recognition and Decentralised procedures. The MRP/DCP annotated template will be published on the website. The 'clean' version of the template for SPC, PL and labelling for completion by applicants will be found on the EMEA website in the national languages.

Information on MR procedures for new active substances

A mutual recognition procedure for a medicinal product containing human normal immunoglobulin for intravenous use has been finalised on 26 September 2005. Please find below information on the Invented name, INN, MAH, Indication, Procedure number and Day 90.

| | |
|---|---|
| **Invented Name (RMS)** | Intratect 50 g/l, solution for infusion |
| **INN** | Human normal immunoglobulin for intravenous use |
| **Marketing Authorisation Holder** | Biotest Pharma GmbH |
| **Indication** | Replacement therapy in:<br>Primary immunodeficiency syndromes such as:<br>– congenital agammaglobulinemia and hypogammaglobulinemia<br>– common variable immunodeficiency<br>– severe combined immunodeficiency<br>– Wiskott Aldrich syndrome<br><br>Myeloma or chronic lymphocytic leukaemia with severe secondary hypogammaglobulinemia and recurrent infections<br><br>Children with congenital AIDS and recurrent infections<br><br>Immunomodulation<br><br>Idiopathic thrombocytopenic purpura (ITP), in children or adults at high risk of bleeding or prior to surgery to correct the platelet count<br><br>Guillain Barré syndrome |

| | |
|---|---|
| | Kawasaki disease<br><br>Allogeneic bone marrow transplantation |
| Procedure number | DE/H/0470/001 |
| Day 90 | 26.09.2005 |

**Meeting schedule**
The next CMD(h) meeting will be held on 12th and 13th of December 2005.

**Mutual Recognition Monitoring**

The CMD(h) noted that **113** new mutual recognition procedures were finalised during the month of October 2005, as well as **294** type IA variations, **168** type IB variations and **123** type II variations.

The status as of 31st of October of procedures under mutual recognition is as follows:

| Year | Procedures from New applications finalised | Procedures from New applications in process | Procedures from Type IA variations finalised | Procedures from Type IB variations finalised | Procedures from Type II variations finalised | Arbitrations referred to CHMP |
|---|---|---|---|---|---|---|
| 2005 | 895 | 148 | 3300 | 1608 | 1188 | 2 N.A.<br>6 Var. |

**44** new procedures (regarding **88** products) started in October 2005. The categories of these procedures are as follows:

**13** known active substance (already authorised in at least one member state) including **1** multiple application and **7** repeat use.

**31** abridged applications including **2** multiple applications and **11** repeat use.

The new procedures started related to **5** full dossiers, **27** generics, **7** bibliographic applications, **1** fixed combination and **4** informed consent.

The procedures consisted of **43** chemical substances and **1** biological-other[1].

**36** of these procedures were prescription-only medicinal products in the reference Member State and **8** procedures were classified as a Non-prescription (including OTC) medicinal products[2].

1. As considered by RMS.
2. In this category products are classified as prescription-only or Non-prescription (OTC) products when the RMS has approved them accordingly, although the legal status is not part of the Mutual Recognition Procedure.
3.

Number of countries involved in the new applications procedures started in October 2005

| Reference Member State (number of products involved in the procedure) | Number of CMSs involved in the procedure |
|---|---|
| BE (2) | 5 |
| CZ (1) | 3 |
| CZ (1) | 2 |
| CZ (1) | 5 |
| CZ (1) | 6 |
| DE (3) | 1 |
| DE (3) | 1 |
| DE (1) | 4 |

| Reference Member State (number of products involved in the procedure) | Number of CMSs involved in the procedure |
|---|---|
| DE (1) | 20 |
| DE (1) | 14 |
| DE (1) | 14 |
| DE (1) | 3 |
| DE (1) | 2 |
| DK (3) | 10 |
| DK (3) | 10 |
| DK (1) | 3 |
| DK (1) | 8 |
| DK (4) | 1 |
| ES (3) | 10 |
| ES (3) | 12 |
| FI (3) | 18 |
| FI (2) | 5 |
| FR (2) | 14 |
| FR (1) | 11 |
| HU (3) | 5 |
| IE (1) | 4 |
| NL (1) | 15 |
| NL (3) | 2 |
| NL (1) | 2 |
| NL (2) | 5 |
| SE (1) | 2 |
| SE (1) | 2 |
| SE (4) | 7 |
| SE (1) | 6 |
| SE (1) | 24 |
| SE (1) | 12 |
| UK (2) | 10 |
| UK (2) | 10 |
| UK (2) | 13 |
| UK (3) | 5 |
| UK (4) | 9 |
| UK (4) | 1 |
| UK (4) | 7 |
| UK (3) | 1 |

*All documents mentioned in this press release can be found at the MRFG website at the European Medicines Authorities Windows under the heading* Press releases.

*Information on the above mentioned issues can be obtained from the chair of the CMD(h):*

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**http://heads.medagencies.org/**