



European network of paediatric research
at the European Medicines Agency



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

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Product Development and Scientific Support Department

Mandate of Enpr-EMA working groups

Introduction

At the open meeting of Enpr-EMA in June 2013 it was agreed to set up ad hoc working groups (WG) tasked with addressing some of the most important needs identified. The needs relate to making the best use of paediatric research networks to develop medicines for children.

The number, composition and tasks of the WGs are reviewed every year following the annual face to face meeting.

Purpose

The purpose of the WGs is to develop pragmatic responses to some of the needs relating to paediatric medicines research that can be implemented within six months. The focus is on stating what networks can do, or what networks need to do, rather than developing comprehensive guidance. There is already good practice in many of these areas so that Enpr-EMA needs to focus on disseminating good practice rather than developing new solutions.

Each WG is responsible for defining its role and working practices, including identifying a spokesperson, preparing meeting minutes and drafting outcomes/deliverables.

Members of the WGs, who represent a network, are required to lodge a declaration of interests with the EMA¹.

Composition

Participant numbers of WGs are to be decided on a case by case basis. However, in order to ensure efficiency of the WGs they should generally not consist of more than 10 core members. A maximum of one core member should be nominated by organisation. Further interested parties could support a respective WG as co-members, e.g. by reviewing draft documents.

EMA support

EMA support consists of secretarial support, distributing documents or other resources at the disposal of WG members. EMA staff members may not be able to participate or attend all WG meetings.

¹ See [Policy on transparency and the handling of potential conflicts of interests of members of the European Network of Paediatric Research at the European Medicines Agency\(Enpr-EMA\) Coordinating Group and working groups](#)



Timelines

1. Each WG sets up communication by e-mail or teleconference/videoconference to discuss:
 - a. Terms of reference;
 - b. Contact person;
 - c. Tasks and timelines;
 - d. Ways of working;
 - e. Outputs.
2. Each WG sends a plan to the Secretariat for discussion by the Coordinating Group in October.
3. Each WG works on their tasks.
4. Each WG sends an update to the Secretariat by mid-December for discussion by the Coordinating Group in January.

List of working groups

1. Active working groups

1.1. Working group on public-private partnership

| WG Topics | How to establish communication between Enpr-EMA, networks and industry Sharing good practices within Enpr-EMA and with industry partners |
|------------|---|
| Objectives | <p>To develop recommendations for how Enpr-EMA can:</p> <ul style="list-style-type: none">• facilitate communication between industry and networks,• provide industry with easy access to information about capacities of individual Enpr-EMA networks,• increase the visibility of individual networks,• make contact with a range of industry partners (big Pharma, SMEs, biotech, CROs etc.),• gather examples of network involvement in good practice for the development and implementation of clinical trials in children and young people,• develop proposals to disseminate examples of good practice to Enpr-EMA members and industry partners. |

Action points:

2014-2015 activities and steps:

1. Run a survey to collect good practice examples from both network members and Industry colleagues.
2. Develop proposals to disseminate examples of good practice to Enpr-EMA members and industry partners.
3. Publication of results: [Pharmaceutical Industry and Pediatric Clinical Trial Networks in Europe – How Do They Communicate?](#)

2015-2016 activities and steps:

1. Implement and finalise the guidance for industry on how to engage with Enpr-EMA when planning Paediatric Development in the EU.
2. Draft an advertisement to publicise the guidance, circulate it to industry and Enpr-EMA for comments and finalise it.

2017-2018 activities and steps:

1. Pilot period-test phase for guidance (select 5-6 interested companies and networks)
2. Survey after pilot phase and publication of survey results
3. Decision on continuation with or without fees

1.2. Working group on ethics

| WG Topic | Dialogue and interaction with Ethics Committees (ECs) |
|------------|--|
| Objectives | <ul style="list-style-type: none">• To gather examples of good practice when ECs consider trials relating to children and young people.• To develop proposals to disseminate examples of good practice to ECs.• Contributing work to support the implementation of the Regulation with the view that these efforts will create a more favourable environment to speed up high quality Paediatric Research. |

2014-2015 activities and steps:

1. Table of EU EC details for informed consent for paediatric trials: legislative surroundings of the informed consent requirements for pediatric clinical trials, listed by country:
[Informed consent for paediatric clinical trials in Europe 2015](#)
2. Publication of this work in a scientific journal and thereafter on Enpr-EMA webpage
[Informed consent for paediatric clinical trials in Europe](#)

2015-2016 activities and steps:

1. Take part in the revision of the [Ethical considerations for clinical trials on medicinal products conducted with the paediatric population \(2008\)](#) opened from June to September 2016 in collaboration with EFGCP CMWP ([European Forum for Good Clinical Practice, Children's Medicines Working Party](#)) and EMA.
2. Work on the development of partly harmonised templates of inform consent / assent, in the context of the harmonisation of the application process, that will be implemented with the Clinical Trial Regulation.
3. Improve dissemination of information through industry associations in order to face the major challenge of the lack of information regarding the different national requirements for informed consent.

2016-2018 activities and steps:

1. Collaboration with EUREC for the planning of a paediatric training course for research ethics committees
2. Review of assent/consent template model by eYPAGnet, and by ethics expert → The Consent / Assent template as guidance document for all Enpr-EMA stakeholders to be placed publicly available on Enpr-EMA website (-> by 06/ 2018)

1.3. Working group on young patient advisory groups

| WG Topic | Best Practices to address issues with EU multi-languages of Young Persons Advisory Groups |
|------------|---|
| Objectives | <ul style="list-style-type: none">• To design a survey on Google Groups to scope what YPAGS's were now running in the member networks of Enpr-EMA, to identify the structure of the groups, their contact details, the services they provided, some examples of projects they had been involved in, their funding etc. The European, Canadian and US groups will be included.• To collate the information and ask Enpr-EMA to host it on the Enpr-EMA webpages.• To determine if the groups would like a platform where they could access and share resources such as training materials.• To review platforms such as Google Groups where that could be hosted. |

Action points:

Draft a report of the completed survey targeting Enpr-EMA networks for publishing on EMA website.

Complete the second survey by finding other non Enpr-EMA members to participate.

Build a network of young advisory group across Europe, similarly to the initiatives in North America, starting by collecting information from the already existing advisory groups and develop a standardised procedure for a more European-oriented approach.

Develop training packages for the others parties involved (cross-population approach).

Reflect on the proposal to create a funding group to sustain the database and keep it updated, and gather feedback from other WGs on possible strategies.

2017-2018 activities and steps:

1. Informed groups: Create and maintain informed groups of young experts
2. Training in clinical research: Develop a common curriculum for the European environment
3. Scientific meetings: national, European, international
4. Single point of contact
5. Coordination at European level
6. Business model for sustainability

1.4. Working group on educational training for research staff on paediatric clinical trials

| WG Topic | GCP Training across multispecialty and countries |
|-----------------|---|
| Objectives | Training of research nurses who conduct clinical trials: models, needs and current gaps across different specialties and countries. |

Action points:

1. Identify other target organisations in countries under-represented in the database for circulation of the questionnaire.
2. Collect new data, analyse them and share new information with EMA.
3. Publish results of the questionnaire in appropriate journal.
4. Discuss the proposal of the applicability of the questionnaire-based survey to other healthcare groups of professionals rather than only individuals.

1.5. Working group on paediatric clinical trials with antibiotics

| WG Topic | Harmonisation of the design and conduct of paediatric trials for the investigation of antibiotics |
|-----------------|---|
| Objectives | <p>The overarching principle of this WG is to harmonise paediatric and adult core components of CT design wherever possible. To that end, the WG will:</p> <ol style="list-style-type: none">1. Review the current international regulatory guidance for the conduct of antimicrobial trials in neonates, children and adolescents.2. Review the literature of conducted and planned (as registered on Clinicaltrials.gov) paediatric antibiotic CTs from 2000 to 2016 and PIPs with an EMA Decision.3. Summarise the key similarities and differences between children and adults in the evaluated CIS that may influence CT design and conduct. At which extent extrapolation of efficacy³ could be applied will be addressed from a qualitative point of view based on the identified similarities and differences between adults and children in the CIS mentioned above.4. Summarise the key barriers by that have been identified internationally in the design and conduct of paediatric AB CT conduct.5. Produce a summary document, based on the available evidence and expert opinion of the key components of CT design for paediatric AB studies. This document would include guidance on the key components of a) inclusion and exclusion criteria b) primary and secondary outcomes c) timing of endpoints d) length of therapy (including the switch from IV to oral therapy) e) study duration and f) key factors where study design differs from adult CTs. <p>Reference: Addendum to the guideline on the evaluation of medicinal products indicated for treatment of bacterial infections to address paediatric-specific clinical data requirements</p> |

2017-2018 activities and steps:

1. Submit safety review for publication in Drugs (under review in Oct 2017)
2. Submit second manuscript about wider aspects of design and conduct of paediatric antibiotic trials

1.6. Working group on clinical trial preparedness

| WG Topic | Facilitation of paediatric clinical trials by focusing on identification and resolution of feasibility barriers at the planning stage |
|------------|---|
| Objectives | <ol style="list-style-type: none">1. Promote dialogue among different parties to consolidate proposals2. Agree on factors recognised by all parties to have critical impact on clinical trial recruitment3. Gather examples of good as well as suboptimal practice for the development and conduction of clinical trials in the paediatric population4. Develop preparedness-orientated strategic guidance to facilitate paediatric study development and implementation |

2017-2018 activities and steps:

Review the current regulatory guidance and academic publications in relation to the conduct of trials in the paediatric population to identify discussion on preparedness.

- Deliverable: Short summary and links to guidance documents
- Timeline: By 31 January 2018

Summarise previous initiatives on paediatric clinical trials (e.g. DIA/EFGCP, ACCELERATE, IMI2, ERN, Enpr-EMA and EPAC community) to identify existing valuable guidance on overcoming challenges.

- Deliverable: List of initiatives on trial conduct
- Timeline: By 31 January 2018

Utilise deliverables from other Enpr-EMA WGs which have an impact on paediatric clinical trial conduct.

- Deliverable: Summarise output from previous Enpr-EMA working groups
- Timeline: By 31 January 2018

Development of a prompt guide/questionnaire to be used in interviews and brainstorming sessions on trial preparedness with stakeholder groups.

- Deliverable: Define the action point further (target groups, high-level plan including deliverables and timelines)
- Timeline: By 30 November 2017

Development of preparedness-orientated guidance document including (a) narrative, (b) Q&A, (c) decision tree, (d) risk management strategy

- Deliverable: First draft of preparedness guidance document
- Timeline: By 31 January 2018

Further deliverables with involvement of all working group members, and timelines: Draft ready for public consultation by June 2018, finalisation by December 2018

2. Inactive working groups (on hold)

2.1. Working group on organisation of multi-stakeholder meetings when encountering difficulties with implementation / conduct of clinical trials agreed in PIPs

| WG Topic | A framework for networks to interact with industry and regulators when implementation/conduct of clinical trials agreed in PIPs is no longer possible |
|------------|---|
| Objectives | What can networks offer to industry when they submit modifications of agreed PIPs because conduct of agreed studies is no longer feasible? What information are regulators looking for when considering requests for modification to PIPs? |

Action points:

- Implement the guideline to address generic issues during the study preparation at early stage, by identifying therapeutic-specific needs and develop a strategy on how to address them.
- Look at lessons learned from the meeting on Type 2 diabetes.
- Find inputs from the interactive framework guideline currently under development by EMA.
- Run a pilot preparedness-oriented meeting.

2015-2016 update:

The working group drafted a standard operating procedure on how to organise and manage multi-stakeholder meetings that is currently under review to align it with the relevant EMA policies.

2.2. Working group on neonatology

| WG Topic | Neonatology issues |
|------------|----------------------|
| Objectives | Pending working plan |

This working group is now actively contributing to and participating in the International Neonatal Consortium (<http://c-path.org/programs/inc/>).

2.3. Joint Enpr-EMA/ENCePP working group on paediatric pharmacovigilance

| WG Topic | Paediatric pharmacovigilance |
|------------|--|
| Objectives | To discuss and contribute to the planned revision of the paediatric pharmacovigilance guideline. Important aspects to be addressed are: <ul style="list-style-type: none">• Specific methods of pharmacovigilance activities (e.g. risk management plans, signal management, post-authorisation safety studies) which need to be considered when applied to the paediatric field. Experience from networks/investigators that have already performed paediatric PV studies should be incorporated. |

| WG Topic | Paediatric pharmacovigilance |
|----------|--|
| | <ul style="list-style-type: none"> Operation of the EU regulatory network capturing the lifecycle transition of PDCO concerns into PIP opinions and subsequently into PRAC/CHMP requests for PASS and PAES. <p>The revision of the paediatric pharmacovigilance guideline should aim to be suitable for a paediatric module of the good pharmacovigilance practices (GVP).</p> <p>To discuss the planned specific paediatric chapter in the ENCePP Guide on Methodological Standards in Pharmacoepidemiology. This would involve the group collecting relevant paediatric literature articles and guidance documents on methodological standards in paediatric pharmacovigilance studies. These would be submitted, each with an accompanying brief review/justification for inclusion, for consideration by the ENCePP Working Group on Research Standards and Guidance for incorporation in the paediatric chapter.</p> |

Action points:

1. To contribute to the drafting of the revised paediatric pharmacovigilance guideline.
2. To provide comments on the new GVP module on paediatric pharmacovigilance.
3. Once drafting of guideline completed, to discuss paediatric post-authorisation safety studies (PASS) and create a short questionnaire addressed to Enpr-EMA and ENCePP networks regarding the capacity to conduct paediatric PASS and ways to find targeted study population.

3. Closed working groups (no longer active)

3.1. Joint working group on network funding, sustainability and FP7 projects

| WG Topic | Strategies for funding and maintaining a paediatric research network FP7 Projects |
|------------|--|
| Objectives | <p>To gather experience and elaborate key requirements for how to develop and maintain a national or specialty network from a business perspective, and share these with other networks which are being established/have just been established.</p> <p>Bring together all principal investigators of agreed FP7 programmes to discuss how to carry out research in off patent medicines funded by EC (FP7) and how to work with PDCO/EMA on this topic. This group intends to come up with a list of identified hurdles and proposals how to tackle them and to discuss directly with PDCO, once this list has been established and proposals are drafted.</p> |

Action points:

After publication of the article [Successful private-public funding of paediatric medicines research: lessons from the EU programme to fund research into off-patent medicines](#) in the European Journal of Pediatrics, the working group stopped further activities.