

E2D(R1) EWG
Public Consultation Explanatory Note:
Proposed E2B(R3) updates to align with ICH E2D(R1) guideline

Approved by the Management Committee on 5 February 2024

1. Background

This explanatory note supports the public consultation of the draft ICH E2D(R1) guideline by explaining the proposed updates to ICH E2B(R3). The ICH E2D guideline was agreed in November 2003. In the meantime, new sources of post-approval safety information have emerged or are more frequently applied (e.g., social media, market research programs, patient support programs) which vary in characteristics and contribution to quality of post-approval safety information. The revised ICH E2D guideline (referred to as ICH E2D(R1)) aims to clarify the use of these new sources and makes reference to the use of ‘appropriate E2B values’ throughout the document. At the moment, such values are not yet available in ICH E2B.

Alignment with the ICH E2D(R1) guideline will require clarification and updates to two existing ICH E2B(R3) data-elements. Addition of new values to an existing data element can be accommodated as per established ICH E2B(R3) maintenance process and do not require a revision procedure.

2. Proposed alignment of E2B(R3) with E2D(R1)

ICH E2B(R3) data element C.1.3 Type of Report

1. It is proposed to add an explanation that the value ‘2=report from study’ is used for studies as well as other solicited sources, as described in E2D(R1).

ICH E2B(R3) data element C.5.4 ‘Study type where reaction(s) / event(s) were observed’

1. It is proposed to add an explanation that this data element is used to categorize studies as well as other solicited sources, as described in E2D(R1).
2. It is proposed to update the existing E2B(R3) value set to include new values for patient support programs (*see E2D(R1) section 4.4*), market research programs (*see E2D(R1) section 4.5*) and organized data collection systems on digital platforms (*see E2D(R1) section 4.3.2*). This will allow Marketing Authorization Holders and regulators to separate analyses of case reports from these sources and provide a clearer understanding of their contribution to safety signal identification.

The following table summarises the proposed changes, as shown in red:

Type of Report ICH E2B(R3) C.1.3	Study Type Where Reaction(s) / Event(s) Were Observed ICH E2B(R3) C.5.4 (only populated if Type of Report = 2, (ICH E2B(R3) C.1.3)) *
1 = Spontaneous report 2 = Report from study * 3 = Other 4 = Not available to sender (unknown)	1 = Clinical trials 2 = Individual patient use (e.g., ‘compassionate use’ or ‘named patient basis’) 3 = Other studies (e.g., pharmacoepidemiology, Pharmacoeconomics, intensive monitoring) <i>4 = Patient Support Programme</i> <i>5 = Market Research Programme</i> <i>6 = Organised Data Collection System with source data from a digital platform</i>

* Add explanation that the value ‘2=report from study’ and the data element ‘study type where reaction(s)/event(s) were observed’ is used for studies as well as other solicited sources, as described in E2D(R1).

3. Next steps

The proposed updates may change following comments received during public consultation of the E2D(R1) guideline and subsequent implementation discussions with the E2B(R3) Expert Working Group. The valueset for data element ICH E2B(R3) C.5.4 will be finalized upon reaching *Step 4* of the E2D(R1) guideline. The final changes will be published via the E2B(R3) Implementation Guide package and ICH E2B(R3) Questions and Answers document.

For reference: current user guidance from the ICH E2B(R3) Implementation Guide

ICH E2B(R3) data element C.1.3 Type of Report

User Guidance	<p>This data element captures the type of report independently of its source; a separate element for the designation of the source is covered in item C.4 and is not duplicated in this section.</p> <p>For example, if a case in the literature arises from spontaneous observations, ‘type of report’ should be Spontaneous report.</p> <p>If a case in the literature arises from a study, ‘type of report’ should be Report from study and the differentiation between types of studies (e.g. clinical trials or others) should be given in Section C.5.4 (See the user guidance for C.5.4).</p> <p>If it is unclear from the literature report whether or not the case(s) cited are spontaneous observations or whether they arise from a study, then this item should be Other.</p> <p>The Not available to sender option allows for the transmission of information by a secondary sender (e.g., regulatory authority) where the initial sender did not specify the type of report; it differs from Other, which indicates that the sender knows the type of report but cannot fit it into the categories provided.</p>
Conformance	Required
Data Type	1N
OID	2.16.840.1.113883.3.989.2.1.1.2
Value Allowed	<p>1=Spontaneous report</p> <p>2=Report from study</p> <p>3=Other</p> <p>4=Not available to sender (unknown)</p>
Business Rule(s)	

ICH E2B(R3) data element C.5.4 ‘Study type where reaction(s) / event(s) were observed’

User Guidance	This information should be provided if the ‘Type of Report’ (C.1.3) has been populated with ‘Report from study’.
Conformance	Optional, but required if C.1.3=2 (Report from study).
Data Type	1N
OID	2.16.840.1.113883.3.989.2.1.1.8
Value Allowed	<p>1=Clinical trials</p> <p>2=Individual patient use(e.g. ‘<i>compassionate use</i>’ or ‘<i>named patient basis</i>’)</p> <p>3=Other studies (e.g. <i>pharmacoepidemiology</i>, <i>pharmacoeconomics</i>, <i>intensive monitoring</i>)</p>
Business Rule(s)	