

Communication to patients, consumers and healthcare professionals

Belgrade, 23 June 2014

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European Medicines Agency's (EMA) main responsibilities

evaluation of marketing authorisation applications of medicines; coordination of pharmacovigilance in the EU; provision of scientific advice during drug development; evaluation for orphan designation and paediatric investigation plans.

But also ...

Provides information to patients, consumers and healthcare professionals (HCPs) on the medicines that the Agency evaluates.

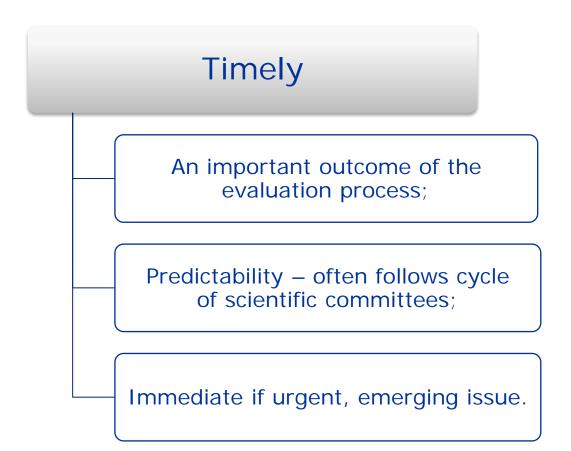
- Good quality;
- Science/ evidence based;
- Unbiased, independent;
- Timely;
- Up-to-date;
- Adapted to the target audience.

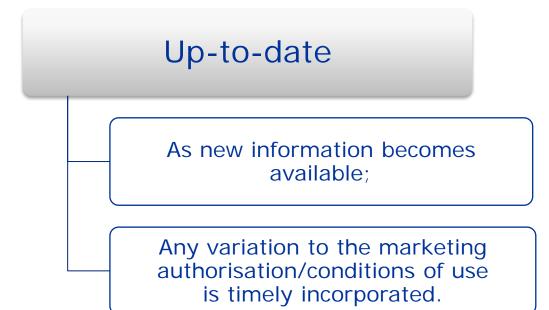


Done in parallel to the scientific assessment;

Written by experts in communication, but reviewed by the assessors;

Consistent with the scientific conclusions.









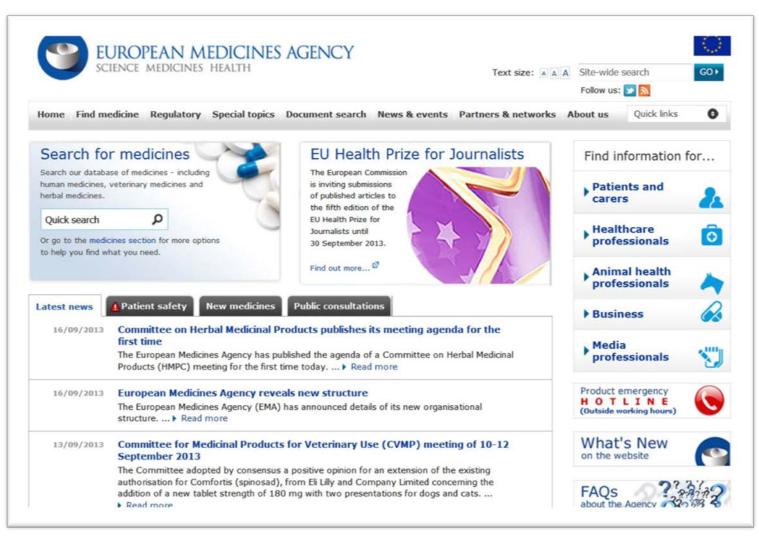
What information on medicines does EMA provide?

•EMA holds a database with comprehensive information on all medicines authorised centrally (via EMA);

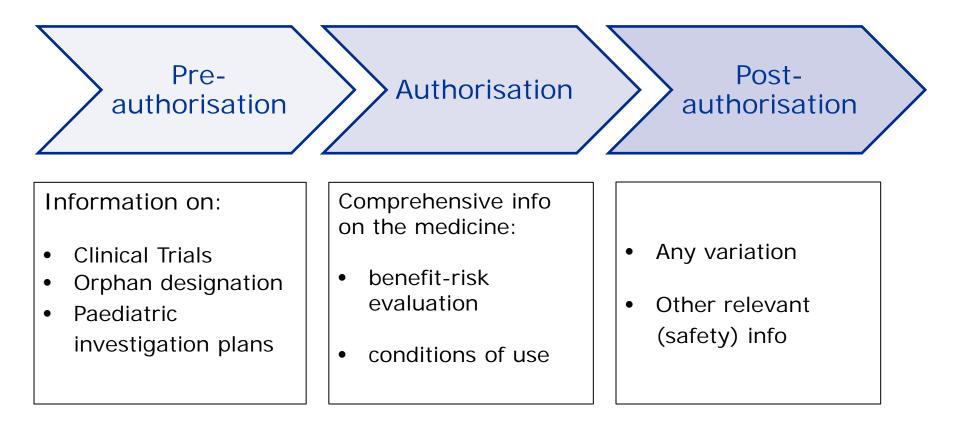
•DOES NOT include full information on medicines authorised via decentralised/ national procedures;

•Also communicates on emerging safety issues (for all medicines authorised in EU) – 2012 PhV legislation.

EMA website – main channel of communication



What information on medicines does EMA provide?





Pre-authorisation Orphans and paediatrics

Information on:

medicines under development which have been designated as orphan;

 review of orphan designation at the time of the medicine's authorisation;

•opinions and decisions on paediatric investigation plans.

Information available only in English.

Public summary of opinion on orphan designation



Pre-authorisation Clinical Trials

•Information on CT – the EU Clinical Trials Register website: <u>https://www.clinicaltrialsregister.eu/</u>

•The Register allows to search for information on CT in the EU Member States.

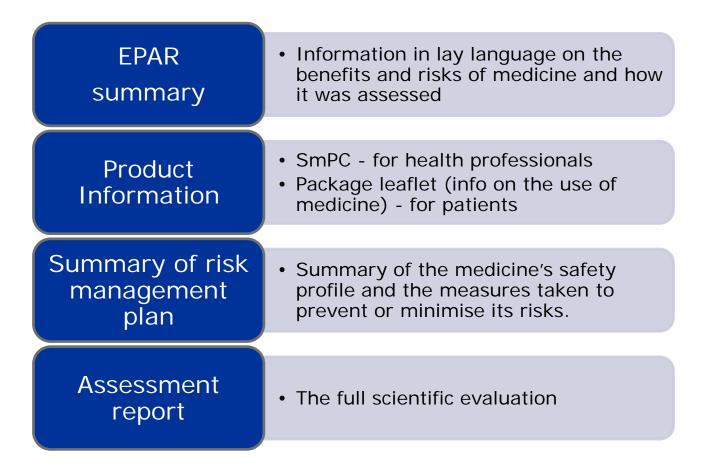
- Information on:
 - trial design
 - sponsor
 - investigated product and therapeutic area
 - the status of the trial
 - trial summary results

Pre-authorisation Clinical Trials

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earch for Clinical Trials					
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At the time of authorisation: EPAR



EPAR summary

	PEAN N medicine	EUROPEAN MEDICINES AGENCY SCIENCE MEDICINES HEALTH	GO Þ GO Þ
lome Find medicine	Human reg	EMA/807654/2013 EMEA/H/C/002614	
Human medicines	▶ Home	EPAR summary for the public	
European public assessment reports	Sirt bedag		Share
Patient safety		Sirturo	
Pending EC decisions	About		ISED
Withdrawn applications		bedaquiline	is
Paediatrics	This is		use in Union
Rare disease designations	how th condit	This is a summary of the European public assessment report (EPAR) for Sirturo. It explains how the Agency assessed the medicine to recommend its authorisation in the EU and its conditions of use. It is not intended to provide practical advice on how to use Sirturo.	Union
Medicines under evaluation	For pr contac	For practical information about using Sirturo, patients should read the package leaflet or contact their	
Medicines for use outside the EU	Expi	doctor or pharmacist.	ı last six ultidrug-
Referrals	Si	What is Sirturo and what is it used for?	03/2014)
Shortages catalogue	Tu Sii		oducts
Veterinary medicines	tul	Sirturo is a tuberculosis medicine that contains the active substance bedaquiline. Tuberculosis is an infection caused by the bacterium <i>Mycobacterium tuberculosis</i> . Sirturo is used in combination with other tuberculosis medicines in adults with tuberculosis that is affecting the lung and that is multi-drug	-19 13)
Herbal medicines for human use	co the Be	other tuberculosis medicines in addits with tuberculosis that is anecting the lung and that is multi-orug resistant (resistant to at least isoniazid and rifampicin, two standard tuberculosis medicines). It is given when combinations without Sirturo cannot be used, either because the disease is resistant to them or because of their side effects.	y new istant
	ra	Because the number of patients with tuberculosis is low in the EU, the disease is considered 'rare', and Sirturo was designated an 'orphan medicine' (a medicine used in rare diseases) on 26 August 2005.	
		How is Sirturo used?	
	E w	Sirturo can only be obtained with a prescription. Treatment should be started and monitored by a doctor who is experienced in the treatment of multi-drug resistant tuberculosis. In addition, it is	

EPAR summary

- •EMA 'landing' page for each medicine (centrally) authorised;
- •Written in lay language for lay audience;
- •Available in all EU languages;
- Constantly kept updated;
- •Summarises the evaluation of each medicine:
 - Explains the reasons why the medicine is approved (why its benefit/risk is positive);
 - Briefly describes what it is used for.

EPAR summary

- Provides access (links) to the 'product information' (SmPC and Package Leaflet) and, if the reader wants to know more, to:
 - Summary of RMP;
 - Scientific assessment report.
- Undergone a recent update (format and content):
 - More user-friendly and better explain the reasons leading to the medicine's approval.
- Prepared by specialists, in close collaboration with assessors and always user-tested by patients, consumers and HCPs during preparation.

Example: <u>Sirturo</u>

RMP summary

- •First published in March 2014 1 year pilot phase;
- Increased transparency and access to relevant (safety) information;
- •Complements and links to the EPAR summary and Product Information;
- •Target audience:
 - <u>Primarily</u> stakeholders with professional interest in medicines;
 - <u>Secondary</u> useful resource for any member of the public who wants to know more about his/her medicine.

Example: <u>Sirturo</u>

RMP summary – an example

EMA/16634/2014

Summary of the risk management plan (RMP) for Sirturo (bedaquiline)

This is a summary of the risk management plan (RMP) for Sirturo, which details the measures to be taken in order to ensure that Sirturo is used as safely as possible. For more information on RMP summaries, see <u>here</u>.

This RMP summary should be read in conjunction with the <u>EPAR summary</u> and the product information for Sirturo, which can be found on Sirturo's EPAR page.

Overview of disease epidemiology

Tuberculosis (TB) is an infectious disease that is caused by a bacterium called *Mycobacterium tuberculosis*. TB usually infects the lungs but can also affect other parts of the body such as the brain, kidneys and spine. There are two forms of the disease: latent TB and active TB. Latent TB is when the human immune system, the body's natural defences against germs and other substances that cause infection, fight the bacteria causing TB and prevent it from causing disease. The bacteria remain hidden or inactive without causing symptoms. Active TB is when the bacteria causing TB become active and make you sick. This can happen when the immune system is weakened, e.g., due to infection with the human immunodeficiency virus (HIV).

Patients with drug-susceptible TB (DS-TB) respond well to the medicines most commonly used to treat TB, which are called first-line anti-TB medicines. In patients with multidrug-resistant tuberculosis (MDR-TB), the TB bacteria have become resistant to first-line anti-TB medicines, and patients must be

RMP summary – an example

Summary of safety concerns

Important identified risks

Important potential risks

Risk	What is known
Serious liver side effects (Severe hepatotoxicity)	During clinical trials, side effects involving the liver were seen more often in patients who received bedaquiline than in patients who did not. Most of these side effects were related to changes in the amount of liver enzymes, which speed up essential chemical reactions in the liver. Other medicines used to treat MDR-TB, including pyrazinamide, ethambutol, prothionamide, p-aminosalicyclic acid and linezolid, can cause side effects that involve the liver. During clinical trials, these medicines were often given together with bedaquiline, so it is not known in each case whether the liver side effects were due to bedaquiline, another anti-TB medicine, or a combination of anti-TB medicines .
	that increase the QT interval, potentially life threatening); patients with a family history of increased OT

Missing information

Risk	What is known
Long-term effects of bedaquiline treatment on death (mortality)	There is limited information on the long-term effects of bedaquiline on the rate of death among patients taking bedaquiline.

Post-authorisation

 New therapeutic indications;

New contraindications;

• Other variations.

- Update of EPAR summary;
- Update of Product Information;
- Update of RMP summary;
- Publication of relevant assessment report.



Emerging (safety) communication Example of safety referrals

Start of safety referral by PRAC

PRAC recommendation

CHMP/CMD(h)

Human medicines Highlights Newsletter



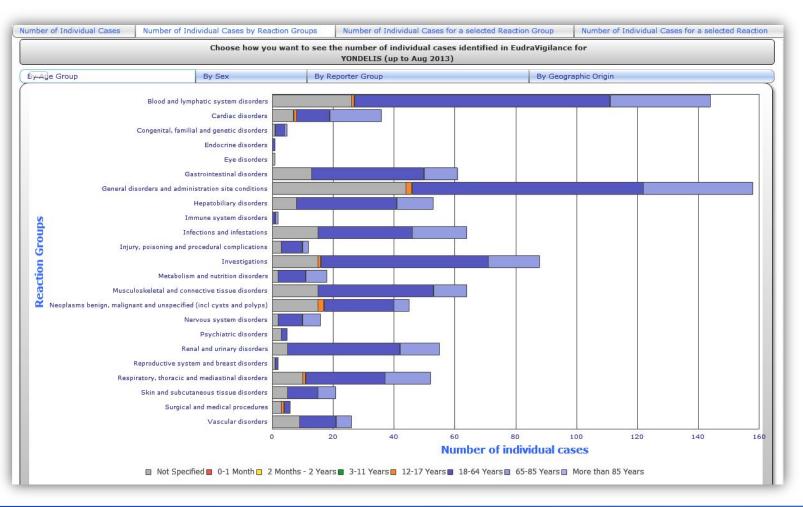


Information on adverse drug reactions http://www.adrreports.eu

•EU database with information on 'suspected adverse drug reactions' for medicines authorised in the EU.

- •A phased development:
 - so far, only for medicines approved via centralised procedure.
- •The reports are constantly updated.

EU database of suspected adverse drug reactions reports - http://www.adrreports.eu/



Conclusions

 Patients, consumers and healthcare professionals – key stakeholders for EMA;

 Important steps in recent years in adapting and focusing our communication to them

- Producing specific information and tools for them
- In order to succeed:
 - Strong collaboration with Patients and healthcare professionals' organisations;
 - Working in the context of EU Regulatory Network (EU Member States, European Commission and EMA).

Conclusions

 Progressively more regulatory authorities in the EU target their communications to medicine users;

•Website is the main tool for EMA communication;

 Predictability and coordination of emerging (safety) information is paramount:

• Among regulatory authorities while involving patients and healthcare professionals.



Thank you for your attention.