

Involvement of Healthcare Professionals' Organisations in EMA activities in 2011

Presented by: Ivana Silva Medical Information Sector/ Public Information and Stakeholder Networking





Area of information on medicines

- Revised template for the package leaflet (PL) was presented to the HCP WG following the consultation in 2010
- Public consultation on pack design and labelling for centrally authorised nonprescription human medicinal products (targeted dissemination to 52 organisations, of which 29 HCPOs; comments received from 17 entities, of which 3 were HCPOs - 1 was in the targeted dissemination)
- The involvement of HCPs in the review of product labelling was discussed with the HCP
 WG and the Agency is preparing a procedure to identify in advance which specific cases
 would most benefit from HCPs' input and how they are to be involved



Area of information on medicines

- A proposal to publish DHPCs on the EMA website was presented to the HCP WG
- eHealth and aspects related with electronic product information were introduced as a topic for information and discussion in 2 two meetings (March and June)
- Comments were requested prior to public consultation on the draft guideline on the warning on transmissible agents in SmPCs and packages leaflets for plasma-derived medicinal products (in order to discuss with QRD)
- There was a good cooperation with the relevant organisations to streamline communication with their constituencies on aspects related with shortages and recalls (e.g. shortage of Apidra cartridges; precautionary recall of Advagraf)



- Promote **awareness and understanding of the SmPC** (through participation in the SmPC Advisory group).
- Get input during the preparation of relevant safety information.
- Dissemination of key safety information.
- Involvement in the update of the pandemic communication strategy.

Area of Pharmacovigilance and Risk Management

- Three Stakeholders Forum on the PhV legislation were organised (1st April and 2nd
 June 4 HCPOs attending (of which 2 were speakers); 3rd October 3 HCPOs attending)
- Product-specific consultations related with:
 - communication practice on a safety issue (use of gadolinium-containing contrast agents for magnetic resonance and risk of Nephrogenic Systemic Fibrosis)
 - implementation of a risk minimisation activity (Pregnancy Prevention Programme) in clinical practice (isotretinoin)
- Initial ideas for the web-based reporting of ADRs presented at the HCP WG (October) and input requested



- Continue to contribute to the Agency's preparation for the implementation of the legislation
- Explore the potential contribution of the HCP WG to assess the **effectiveness of risk minimisation measures** in clinical practice (using existing examples).
- Continue to explore healthcare professionals' contribution to the preparation and awareness of DHPC.
- Contribute to the further implementation of the EudraVigilance access policy



Area of transparency and dissemination

- Comments to the EudraVigilance dashboards/ feedback questionnaire (3 HCPOs provided input, through the 'EV users group')
- Draft guidance for the interpretation of ADRs data available for HCPs/General public in EudraVigilance to be circulated to the 'EV Users Group' for review and comments (4Q 2011)
- Participation in the user acceptability tests of the EU Clinical Trials Register (4 HCPs involved)
- Enlargement of HCPs representation in the **EudraCT JOG** (3 representatives)
- Continued observer role in ENCePP (identification of three HCPs representatives: 1 member and two alternates)
- Call for expression of interest to participate in the EMA/DIA Infodays on ENCePP and on EudraVigilance
- Call for participation on the Agency website online survey



Area of transparency and dissemination

- Dissemination of the following strategic documents:
 - EMA Road MAP to 2015
 - EMA geriatric medicines strategy
 - Implementing the European Medicines Agency's Road map to 2015: The Agency's contribution to Science, Medicines, Health "From Vision to Reality
- Dissemination of information on other relevant activities:
 - Launch of the EU Clinical Trials Register
 - European Commission's call for expression of interest to represent healthcare
 professionals and patient organisations in the EMA Management Board, CAT and PRAC
 - Publication of the European Commission's legislative proposals on information to patients



 Support to the further implementation of the new Agency's transparency policy.

 Support to the development of the EudraCT database and the EU Clinical Trials Register (through participation in EudraCT JOG).

Raising public awareness of EMA activities.

 Continue to provide feedback on the functionality and userfriendliness of the EMA website (HCPs dedicated section).



Involvement in Agency SC related activities

- Participation in SAGs (by 27.10.2011):
 - 23 SAGs/ Ad hoc expert group meetings for which HCPOs were contacted (able to provide experts for
 15 SAGs; attending experts in 12 SAGs)
 - 13 organisations contacted (some more than once; 3 non-HCP WG)
 - 43 experts identified (15 attended meetings; 6 had Col; 21 unavailable; 1 already identified)
- Involvement in guideline development:
 - Expert Group meeting on the concept paper to develop the HIV guideline (expert identified by EACS)
 - Workshop on monoclonal antibodies (participation of the International Psoriasis Council, following input received during the public consultation in Nov 2010 on the draft guideline on biosimilar medicines containing monoclonal antibodies)
 - By 24.10.2011: 59 documents disseminated (16 concept papers; 11 draft guidelines; 7 reflection papers; 21 herbal monographs; 4 other public consultations)

Involvement in Agency SC related activities

- Product-specific consultations related with:
 - changes in the pharmaceutical form (re. expression of strength) with a potential for medication errors (topotecan)
 - obtaining information on the current use of the medicine in clinical practice and the therapeutic environment, for the purpose of benefit/risk decisionmaking (stavudine; celecoxib)
 - obtaining information on the availability of a medicine in clinical practice, in the context of the evaluation of a new marketing authorisation application (velaglucerase alfa)

- Facilitate that healthcare professionals' organisations can contribute as an additional source for identifying the most adequate independent experts (e.g. SAGs participation).
- Identify those situations where healthcare professionals' organisations can provide relevant information from real clinical practice, which can be used during benefit/risk evaluation.

Organisational Matters

- New policy on conflict of interest
 - New policy presented to HCP WG in March
 - 17 e-DoIs out of 26
- Framework for interaction between the Agency and healthcare professionals
 - The full document was presented, following extensive discussion throughout
 2010, and adopted by the HCP WG in March 2011
 - Endorsement by the Management Board is foreseen in December 2011

- Contribute to establish an evaluation process of healthcare professionals' organisations.
- Prepare the HCP WP Mandate and Rules of Procedure.
- Develop a template to support the systematic monitoring of the interaction.
- Develop performance indicators to assess further aspects on the progress of the interaction (e.g. communication).
- Prepare an annual report on the progress of the interaction to be presented to the Management Board.

Interaction with patients and consumers

Joint meeting organised in June

Actions for 2012: Organise two joint HCP WG-PCWP meetings; Ensure adequate coordination on issues of common interest.

Other areas of participation

- EMA workshop on drug-related progressive multifocal leukoencephalopathy
 (July) 3 experts identified by 1 HCPO
- EMA workshop on regulatory ophthalmology (October) 4 experts identified by 3 HCPOs (2 non-HCP WG)

Areas identified for 2012: geriatric medicines, implementation of new legislation in the area of falsified medicines, EnprEMA, ENCePP, online public registry of EMA's stakeholders



Meetings scheduled for 2012

- 28 February 2012 PCWP/HCPWG Joint meeting
- 27 or 29 February HCPWG Plenary meeting (to be confirmed)
- 8 May 2012 HCPWG Plenary meeting
- 24 September HCPWG Plenary meeting (to be confirmed)
- 25 September 2012 PCWP/HCPWG Joint meeting