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SCIENCE MEDICINES HEALTH

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Human Medicines Division

Pharmacovigilance Risk Assessment Committee (PRAC) Minutes of the meeting on 05 August 2021

Chair: Sabine Straus – Vice-Chair: Martin Huber

Disclaimers

Some of the information contained in the minutes is considered commercially confidential or sensitive and therefore not disclosed. With regard to intended therapeutic indications or procedure scope listed against products, it must be noted that these may not reflect the full wording proposed by applicants and may also change during the course of the review. Additional details on some of these procedures will be published in the [PRAC meeting highlights](#) once the procedures are finalised.

Of note, the minutes are a working document primarily designed for PRAC members and the work the Committee undertakes.

Note on access to documents

Some documents mentioned in the minutes cannot be released at present following a request for access to documents within the framework of Regulation (EC) No 1049/2001 as they are subject to on-going procedures for which a final decision has not yet been adopted. They will become public when adopted or considered public according to the principles stated in the Agency policy on access to documents ([EMA/127362/2006, Rev. 1](#)).

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1. Introduction

1.1. Welcome and declarations of interest of members, alternates and experts

The Chairperson opened the meeting by welcoming all participants. Due to the current coronavirus (COVID-19 outbreak), and the associated EMA Business Continuity Plan (BCP), the meeting was held remotely.

Based on the declarations of interest submitted by the Committee members, alternates and experts and based on the topics in the agenda of the current meeting, the Committee Secretariat announced the restricted involvement of some Committee members in upcoming discussions; in accordance with the Agency's policy on the handling of conflicts of interests, participants in this meeting were asked to declare any changes, omissions or errors to their declared interests concerning the matters for discussion (see Annex II – List of participants). No new or additional conflicts were declared.

Discussions, deliberations and voting took place in full respect of the restricted involvement of Committee members and experts in line with the relevant provisions of revision 2 of the Rules of Procedure ([EMA/PRAC/567515/2012 Rev.2](#)). All decisions taken at this meeting held under the conditions of an emergency situation, the Agency's BCP and in compliance with internal guidelines were made in the presence of a quorum of members (i.e. 18 or more members were present remotely). All decisions, recommendations and advice were agreed unanimously, unless otherwise specified.

1.2. Agenda of the meeting on 05 August 2021

The agenda was adopted with some modifications upon request from the members of the Committee and the EMA secretariat.

1.3. Minutes of the previous meeting on 05-08 July 2021

The minutes were adopted with some amendments received during the consultation phase and will be published on the EMA website.

Post-meeting note: the PRAC minutes of the meeting held on 05-08 July 2021 were published on the EMA website on 10 May 2022 ([EMA/PRAC/171547/2022](#)).

2. EU referral procedures for safety reasons: urgent EU procedures

2.1. Newly triggered procedures

None

2.2. Ongoing procedures

None

2.3. Procedures for finalisation

None

3. EU referral procedures for safety reasons: other EU referral procedures

3.1. Newly triggered procedures

None

3.2. Ongoing procedures

None

3.3. Procedures for finalisation

None

3.4. Re-examination procedures¹

None

3.5. Others

None

4. Signals assessment and prioritisation²

4.1. New signals detected from EU spontaneous reporting systems

None

4.2. New signals detected from other sources

None

4.3. Signals follow-up and prioritisation

None

4.4. Variation procedure(s) resulting from signal evaluation

None

¹ Re-examination of PRAC recommendation under Article 32 of Directive 2001/83/EC

² Each signal refers to a substance or therapeutic class. The route of marketing authorisation is indicated in brackets (CAP for Centrally Authorised Products; NAP for Nationally Authorised Products including products authorised via Mutual Recognition Procedures and Decentralised Procedure). Product names are listed for reference Centrally Authorised Products (CAP) only. PRAC recommendations will specify the products concerned in case of any regulatory action required

5. Risk management plans (RMPs)

5.1. Medicines in the pre-authorisation phase

None

5.2. Medicines in the post-authorisation phase – PRAC-led procedures

None

5.3. Medicines in the post-authorisation phase – CHMP-led procedures

None

6. Periodic safety update reports (PSURs)

6.1. PSUR single assessment (PSUSA) procedures including centrally authorised products (CAPs) only

None

6.2. PSUR single assessment (PSUSA) procedures including centrally authorised products (CAPs) and nationally authorised products (NAPs)

None

6.3. PSUR single assessment (PSUSA) procedures including nationally authorised products (NAPs) only

None

6.4. Follow-up to PSUR/PSUSA procedures

None

6.5. Variation procedure(s) resulting from PSUSA evaluation

None

6.6. Expedited summary safety reviews³

6.6.1. Coronavirus (COVID-19) mRNA⁴ vaccine (nucleoside-modified) - COMIRNATY (CAP) - EMEA/H/C/005735/MEA 002.6

Applicant: BioNTech Manufacturing GmbH

³ Submission of expedited summary safety reports for review in addition to the requirements for submission of PSUR(s) falling within the pandemic period and requirements set out in the list of Union reference dates (EURD list) provided for under Article 107c(7) of Directive 2001/83/EC

⁴ Messenger ribonucleic acid

PRAC Rapporteur: Menno van der Elst; PRAC Co-rapporteur: Ulla Wändel Liminga

Scope: Seventh expedited monthly summary safety report (MSSR) for Comirnaty (COVID-19 mRNA vaccine (nucleoside-modified)) during the coronavirus disease (COVID-19) pandemic

Background

Nucleoside-modified messenger ribonucleic acid (mRNA) vaccine is indicated, as Comirnaty, for active immunisation to prevent coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in people aged 16 years and older.

PRAC assessed the seventh monthly summary safety report (MSSR) for Comirnaty (COVID-19 mRNA vaccine (nucleoside-modified)) as part of the safety monitoring of the vaccine. At the plenary meeting, PRAC adopted its conclusions.

Summary of advice/conclusion(s)

- In the next MSSR⁵, the MAH should provide cumulative reviews and data. The MAH should include an analysis of cases of paraesthesia and hypoesthesia and a cumulative review of cases of capillary leak syndrome (CLS). In addition, the MAH should provide detailed reviews of cases of transverse myelitis, rhabdomyolysis, multisystem inflammatory syndrome, disseminated intravascular coagulation (DIC) and of cases reporting rheumatoid arthritis (RA) and RA relapse. Furthermore, the MAH should provide an age stratified observed/expected (O/E) analysis for deep venous thrombosis and pulmonary embolism. The MAH should also provide cumulative review of cases reporting a menstrual disorder or post-menopausal haemorrhage following vaccination. The MAH should include a discussion on the need to update the product information and/or RMP as warranted.
- In the next PSUR, the MAH should include an updated age-stratified O/E analysis of herpes zoster with a discussion on possible mechanisms that could underpin herpes zoster reactivation following vaccination.

6.6.2. Coronavirus (COVID-19) mRNA⁶ vaccine (nucleoside-modified) - SPIKEVAX (CAP) - EMEA/H/C/005791/MEA 011.5

Applicant: Moderna Biotech Spain, S.L.

PRAC Rapporteur: Hans Christian Siersted; PRAC Co-rapporteur: Brigitte Keller-Stanislawski

Scope: Sixth expedited monthly summary safety report (MSSR) for Spikevax (COVID-19 mRNA vaccine (nucleoside-modified)) during the coronavirus disease (COVID-19) pandemic

Background

COVID-19 nucleoside-modified messenger ribonucleic acid (mRNA) vaccine is indicated, as Spikevax, for active immunisation to prevent coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in adults.

PRAC assessed the sixth monthly summary safety report (MSSR) for Spikevax (COVID-19 mRNA vaccine (nucleoside-modified)) as part of the safety monitoring of the vaccine. At the plenary meeting, PRAC adopted its conclusions.

⁵ Submission date on 15 August 2021

⁶ Messenger ribonucleic acid

Summary of advice/conclusion(s)

- In the next MSSR⁷, the MAH should provide cumulative reviews and data. The MAH should include cumulative reviews of cases of thrombosis and thrombocytopenia, capillary leak syndrome (CLS), rhabdomyolysis, rheumatoid arthritis (RA) and RA relapse. The MAH should also provide cumulative review of cases reporting a menstrual disorder or post-menopausal haemorrhage following vaccination. In addition, the MAH should include a detailed review of cases of herpes zoster including cases of HZ complications such as ophthalmic zoster and meningoencephalitis zoster. The MAH should include a discussion on the need to update the product information and/or RMP as warranted.

6.6.3. Coronavirus (COVID-19) vaccine (Ad26.COVID-S, recombinant) - COVID-19 VACCINE JANSSEN (CAP) – EMEA/H/C/005737/MEA 014.3

Applicant: Janssen-Cilag International N.V.

PRAC Rapporteur: Ulla Wändel Liminga; PRAC Co-rapporteur: Jean-Michel Dogné

Scope: Fourth expedited monthly summary safety report (MSSR) for COVID-19 Vaccine Janssen (COVID-19 vaccine (Ad26.COVID-S, recombinant)) during the coronavirus disease (COVID-19) pandemic

Background

COVID-19 vaccine (Ad26.COVID-S, recombinant) is a monovalent vaccine composed of a recombinant, replication-incompetent human adenovirus type 26 vector that encodes a severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) full-length spike (S) glycoprotein indicated as COVID-19 vaccine Janssen, a centrally authorised vaccine for active immunisation to prevent COVID-19 caused by SARS-CoV-2 in individuals 18 years of age and older.

PRAC assessed the fourth monthly summary safety report (MSSR) for COVID-19 vaccine Janssen (COVID-19 vaccine (Ad26.COVID-S, recombinant)) as part of the safety monitoring of the vaccine. At the plenary meeting, PRAC adopted its conclusions.

Summary of advice/conclusion(s)

- The MAH for COVID-19 vaccine Janssen (COVID-19 vaccine (Ad26.COVID-S, recombinant)) should submit to EMA, within 15 days, variation(s) to update⁸ the product information to add immune thrombocytopenia (ITP) as a warning and as an undesirable effect, and to add tinnitus and dizziness as undesirable effects. The MAH should propose frequencies accordingly. The RMP should be also updated to re-classify thrombocytopenia from an important potential to an important identified risk.
- In the next MSSR⁹, the MAH should provide cumulative reviews and data. These include cumulative reviews of acute generalised exanthematous pustulosis (AGEP) and drug reaction with eosinophilia and systemic symptoms (DRESS). Regarding sensorineural hearing loss (SNHL), the MAH should provide a detailed review with updated observed/expected (O/E) analyses for SNHL alone (without tinnitus). The MAH should also include a cumulative review of cases of inflammatory cardiac conditions including

⁷ Submission date on 15 August 2021

⁸ Update of SmPC sections 4.4 (for ITP) and 4.8 (for all). The package leaflet is to be updated accordingly

⁹ Submission date on 15 August 2021

myocarditis and pericarditis. In addition, the MAH should present all cases of thrombosis with thrombocytopenia syndrome (TTS). With regard to thromboembolic events, the MAH should provide further reviews, including updated O/E analyses on pulmonary embolism, deep vein thrombosis (DVT) and cerebrovascular events with or without thrombocytopenia. Finally, the MAH should include a cumulative review of cases reporting a menstrual disorder or post-menopausal haemorrhage following vaccination. The MAH should discuss the need to update the product information and/or RMP as warranted.

6.6.4. Coronavirus (COVID-19) vaccine (ChAdOx1-S [recombinant]) - VAXZEVRIA (CAP) - EMEA/H/C/005675/MEA 027.4

Applicant: AstraZeneca AB

PRAC Rapporteur: Jean-Michel Dogné; PRAC Co-rapporteur: Maria del Pilar Rayon

Scope: Fifth expedited monthly summary safety report (MSSR) for Vaxzevria (COVID-19 vaccine (ChAdOx1-S [recombinant])) during the coronavirus disease (COVID-19) pandemic

Background

Coronavirus (COVID-19) vaccine (ChAdOx1-S [recombinant]) is a monovalent vaccine composed of a single recombinant, replication-deficient chimpanzee adenovirus (ChAdOx1) vector encoding the S glycoprotein of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) indicated, as Vaxzevria, a centrally authorised vaccine, for active immunisation to prevent COVID-19 caused by SARS-CoV-2, in individuals 18 years of age and older.

PRAC assessed the fifth monthly summary safety report (MSSR) for Vaxzevria (COVID-19 vaccine (ChAdOx1-S [recombinant])) as part of the safety monitoring of the vaccine. At the plenary meeting, PRAC adopted its conclusions.

Summary of advice/conclusion(s)

- In the next MSSR¹⁰, the MAH should provide cumulative reviews and data. With regard to thrombosis in combination with thrombocytopenia (TTS), the MAH should include a cumulative description of findings on anti-platelet factor 4 (PF4) and D-dimer, at first, second dose and for fatal cases as well as information on the effectiveness of the diagnostic and treatment guidelines implemented. The MAH should also include detailed reviews of cases of anaphylaxis, thrombosis, Guillain-Barré syndrome (GBS), acute disseminated encephalomyelitis (ADEM) and encephalitis, Bell's palsy and facial paralysis, and of myocarditis and pericarditis. In addition, the MAH should provide detailed reviews of cases of extensive limb swelling and of menstrual disorder or post-menopausal haemorrhage following vaccination together with a discussion on the need to update the product information as warranted.

¹⁰ Submission date on 15 August 2021

7. Post-authorisation safety studies (PASS)

7.1. Protocols of PASS imposed in the marketing authorisation(s)¹¹

None

7.2. Protocols of PASS non-imposed in the marketing authorisation(s)¹²

None

7.3. Results of PASS imposed in the marketing authorisation(s)¹³

None

7.4. Results of PASS non-imposed in the marketing authorisation(s)¹⁴

None

7.5. Interim results of imposed and non-imposed PASS submitted before the entry into force of the revised variation regulation

None

7.6. Others

None

7.7. New Scientific Advice

None

7.8. Ongoing Scientific Advice

None

7.9. Final Scientific Advice (Reports and Scientific Advice letters)

None

8. Renewals of the marketing authorisation, conditional renewal and annual reassessments

8.1. Annual reassessments of the marketing authorisation

None

¹¹ In accordance with Article 107n of Directive 2001/83/EC

¹² In accordance with Article 107m of Directive 2001/83/EC, supervised by PRAC in accordance with Article 61a (6) of Regulation (EC) No 726/2004

¹³ In accordance with Article 107p-q of Directive 2001/83/EC

¹⁴ In accordance with Article 61a (6) of Regulation (EC) No 726/2004, in line with the revised variations regulation for any submission as of 04 August 2013

8.2. Conditional renewals of the marketing authorisation

None

8.3. Renewals of the marketing authorisation

None

9. Product related pharmacovigilance inspections

9.1. List of planned pharmacovigilance inspections

None

9.2. Ongoing or concluded pharmacovigilance inspections

None

9.3. Others

None

10. Other safety issues for discussion requested by CHMP or EMA

10.1. Safety related variations of the marketing authorisation

None

10.2. Timing and message content in relation to Member States' safety announcements

None

10.3. Other requests

None

10.4. Scientific Advice

None

11. Other safety issues for discussion requested by the Member States

11.1. Safety related variations of the marketing authorisation

None

11.2. Other requests

None

12. Organisational, regulatory and methodological matters

12.1. Mandate and organisation of PRAC

None

12.2. Coordination with EMA Scientific Committees or CMDh-v

None

12.3. Coordination with EMA Working Parties/Working Groups/Drafting Groups

None

12.4. Cooperation within the EU regulatory network

None

12.5. Cooperation with International Regulators

None

12.6. Contacts of PRAC with external parties and interaction with the Interested Parties to the Committee

None

12.7. PRAC work plan

None

12.8. Planning and reporting

None

12.9. Pharmacovigilance audits and inspections

12.9.1. Pharmacovigilance systems and their quality systems

None

12.9.2. Pharmacovigilance inspections

None

12.9.3. Pharmacovigilance audits

None

12.10. Periodic safety update reports (PSURs) & Union reference date (EURD) list

12.10.1. Periodic safety update reports

None

12.10.2. Granularity and Periodicity Advisory Group (GPAG)

None

12.10.3. PSURs repository

None

12.10.4. Union reference date list – consultation on the draft list

None

12.11. Signal management

12.11.1. Signal management – feedback from Signal Management Review Technical (SMART) Working Group

None

12.12. Adverse drug reactions reporting and additional monitoring

12.12.1. Management and reporting of adverse reactions to medicinal products

None

12.12.2. Additional monitoring

None

12.12.3. List of products under additional monitoring – consultation on the draft list

None

12.13. EudraVigilance database

12.13.1. Activities related to the confirmation of full functionality

None

12.13.2. Coronavirus (COVID-19) pandemic – facilitating processing on individual case safety reports (ICSR) for COVID-19 vaccines

As a follow-up to the June 2021 discussion (for background, see [PRAC minutes June 2021](#)), the EMA Secretariat presented to PRAC the results of the non-urgent information (NUI) sent to Member States relating to the increase in the number of adverse drug reaction (ADR) reports associated with COVID vaccines roll-out and options to facilitate processing individual case safety reports (ICSR) for COVID-19 vaccines. PRAC members were invited to send National Competent Authorities (NCA) nominations to further work on this facilitation.

Post-meeting note: Based on received feedback from NCAs, EMA sent to NCAs a detailed proposal to facilitate processing ICSR during the COVID-19 pandemic.

12.14. Risk management plans and effectiveness of risk minimisations

12.14.1. Risk management systems

None

12.14.2. Tools, educational materials and effectiveness measurement of risk minimisations

None

12.15. Post-authorisation safety studies (PASS)

12.15.1. Post-authorisation Safety Studies – imposed PASS

None

12.15.2. Post-authorisation Safety Studies – non-imposed PASS

None

12.16. Community procedures

12.16.1. Referral procedures for safety reasons

None

12.17. Renewals, conditional renewals, annual reassessments

None

12.18. Risk communication and transparency

12.18.1. Public participation in pharmacovigilance

None

12.18.2. Safety communication

None

12.19. Continuous pharmacovigilance

12.19.1. Incident management

None

12.20. Impact of pharmacovigilance activities

None

12.21. Others

None

13. Any other business

None

14. Annex I – Signals assessment and prioritisation¹⁵

14.1. New signals detected from EU spontaneous reporting systems

None

14.2. New signals detected from other sources

None

15. Annex I – Risk management plans

15.1. Medicines in the pre-authorisation phase

None

15.2. Medicines in the post-authorisation phase – PRAC-led procedures

None

15.3. Medicines in the post-authorisation phase – CHMP-led procedures

None

¹⁵ Each signal refers to a substance or therapeutic class. The route of marketing authorisation is indicated in brackets (CAP for Centrally Authorised Products; NAP for Nationally Authorised Products including products authorised via Mutual Recognition Procedures and Decentralised Procedure). Product names are listed for reference Centrally Authorised Products (CAP) only. PRAC recommendations will specify the products concerned in case of any regulatory action required

16. Annex I - Periodic safety update reports (PSURs)

16.1. PSUR single assessment (PSUSA) procedures including centrally authorised products (CAPs) only

None

16.2. PSUR single assessment (PSUSA) procedures including centrally authorised products (CAPs) and nationally authorised products (NAPs)

None

16.3. PSUR single assessment (PSUSA) procedures including nationally authorised products (NAPs) only

None

16.4. Follow-up to PSUR/PSUSA procedures

None

17. Annex I – Post-authorisation safety studies (PASS)

17.1. Protocols of PASS imposed in the marketing authorisation(s)¹⁶

None

17.2. Protocols of PASS non-imposed in the marketing authorisation(s)¹⁷

None

17.3. Results of PASS imposed in the marketing authorisation(s)¹⁸

None

17.4. Results of PASS non-imposed in the marketing authorisation(s)¹⁹

None

17.5. Interim results of imposed and non-imposed PASS submitted before the entry into force of the revised variation regulation

None

¹⁶ In accordance with Article 107n of Directive 2001/83/EC

¹⁷ In accordance with Article 107m of Directive 2001/83/EC, supervised by PRAC in accordance with Article 61a (6) of Regulation (EC) No 726/2004

¹⁸ In accordance with Article 107p-q of Directive 2001/83/EC

¹⁹ In accordance with Article 61a (6) of Regulation (EC) No 726/2004, in line with the revised variations regulation for any submission as of 04 August 2013

17.6. Others

None

17.7. New Scientific Advice

None

17.8. Ongoing Scientific Advice

None

17.9. Final Scientific Advice (Reports and Scientific Advice letters)

None

18. Annex I – Renewals of the marketing authorisation, conditional renewals and annual reassessments

18.1. Annual reassessments of the marketing authorisation

None

18.2. Conditional renewals of the marketing authorisation

None

18.3. Renewals of the marketing authorisation

None

19. Annex II – List of participants

including any restrictions with respect to involvement of members / alternates / experts following evaluation of declared interests for the 05 August 2021 meeting.

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-DoI	Topics on agenda for which restrictions apply
Sabine Straus	Chair	The Netherlands	No interests declared	Full involvement
Jan Neuhauser	Member	Austria	No interests declared	Full involvement
Jean-Michel Dogné	Member	Belgium	No interests declared	Full involvement
Laurence de Fays	Alternate	Belgium	No interests declared	Full involvement

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-DoI	Topics on agenda for which restrictions apply
Maria Popova-Kiradjieva	Member	Bulgaria	No interests declared	Full involvement
Nikica Mirošević Skvrce	Member	Croatia	No interests declared	Full involvement
Panagiotis Psaras	Member	Cyprus	No interests declared	Full involvement
Jana Lukacisinova	Alternate	Czechia	No interests declared	Full involvement
Maia Uusküla	Member	Estonia	No interests declared	Full involvement
Krõõt Aab	Alternate	Estonia	No interests declared	Full involvement
Kirsti Villikka	Member	Finland	No interests declared	Full involvement
Tiphaine Vaillant	Alternate	France	No interests declared	Full involvement
Martin Huber	Member (Vice-Chair)	Germany	No interests declared	Full involvement
Brigitte Keller-Stanislawski	Alternate	Germany	No interests declared	Full involvement
Melinda Palfi	Member	Hungary	No interests declared	Full involvement
Guðrún Stefánsdóttir	Member	Iceland	No restrictions applicable to this meeting	Full involvement
Rhea Fitzgerald	Member	Ireland	No interests declared	Full involvement
Ilaria Baldelli	Alternate	Italy	No interests declared	Full involvement
Zane Neikena	Member	Latvia	No interests declared	Full involvement
Rugile Pilviniene	Member	Lithuania	No interests declared	Full involvement
Nadine Petitpain	Member	Luxembourg	No restrictions applicable to this meeting	Full involvement
Benjamin Micallef	Alternate	Malta	No interests declared	Full involvement
Menno van der Elst	Member	The Netherlands	No interests declared	Full involvement

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-DoI	Topics on agenda for which restrictions apply
Liana Gross-Martirosyan	Alternate	The Netherlands	No interests declared	Full involvement
Karen Pernille Harg	Alternate	Norway	No interests declared	Full involvement
Adam Przybylkowski	Member	Poland	No interests declared	Full involvement
Katarzyna Ziolkowska	Alternate	Poland	No interests declared	Full involvement
Ana Sofia Diniz Martins	Member	Portugal	No interests declared	Full involvement
Alexandra - Maria Spurni	Alternate	Romania	No interests declared	Full involvement
Polona Golmajer	Alternate	Slovenia	No interests declared	Full involvement
Eva Segovia	Member	Spain	No interests declared	Full involvement
Maria del Pilar Rayon	Alternate	Spain	No interests declared	Full involvement
Ulla Wändel Liminga	Member	Sweden	No interests declared	Full involvement
Annika Folin	Alternate	Sweden	No interests declared	Full involvement
Annalisa Capuano	Member	Independent scientific expert	No interests declared	Full involvement
Milou Daniel Drici	Member	Independent scientific expert	No restrictions applicable to this meeting	Full involvement
Maria Teresa Herdeiro	Member	Independent scientific expert	No interests declared	Full involvement
Patricia McGettigan	Member	Independent scientific expert	No interests declared	Full involvement
Raymond Anderson	Member	Healthcare Professionals' Representative	No interests declared	Full involvement
Roberto Frontini	Alternate	Healthcare Professionals' Representative	No restrictions applicable to this meeting	Full involvement
Cathalijne van Doorne	Member	Patients' Organisation Representative	No interests declared	Full involvement

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-DoI	Topics on agenda for which restrictions apply
Christelle Bizimungu	Expert - via Webex*	Belgium	No restrictions applicable to this meeting	Full involvement
Jamila Hamdani	Expert - via Webex*	Belgium	No interests declared	Full involvement
Françoise Wuillaume	Expert - via Webex*	Belgium	No interests declared	Full involvement
Petra Kaftanová	Expert - via Webex*	Czechia	No interests declared	Full involvement
Kirsten Egebjerg Juul	Expert - via Webex*	Denmark	No interests declared	Full involvement
Päivi Susanna Worsøe	Expert - via Webex*	Denmark	No interests declared	Full involvement
Youssef Shaim	Expert - via Webex*	France	No restrictions applicable to this meeting	Full involvement
Dennis Lex	Expert - via Webex*	Germany	No restrictions applicable to this meeting	Full involvement
Jan Mueller-Berghaus	Expert - via Webex*	Germany	No interests declared	Full involvement
Jayne Crowe	Expert - via Webex*	Ireland	No interests declared	Full involvement
Grainne Kirwan	Expert - via Webex*	Ireland	No interests declared	Full involvement
Amelia Cupelli	Expert - via Webex*	Italy	No interests declared	Full involvement
Bruno Sepodes	Expert - via Webex*	Portugal	No interests declared	Full involvement
Fatima Ventura	Expert - via Webex*	Portugal	No restrictions applicable to this meeting	Full involvement
Simona Badoi	Expert - via Webex*	Romania	No interests declared	Full involvement
Maria Martinez Gonzalez	Expert - via Webex*	Spain	No restrictions applicable to this meeting	Full involvement

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-DoI	Topics on agenda for which restrictions apply
Consuelo Mejías Pavón	Expert - via Webex*	Spain	No interests declared	Full involvement
Sol Ruiz	Expert - via Webex*	Spain	No interests declared	Full involvement
Charlotte Backman	Expert - via Webex*	Sweden	No interests declared	Full involvement
A representative from the European Commission attended the meeting				
Meeting run with support from relevant EMA staff				

* Experts were evaluated against the agenda topics or activities they participated in

20. Annex III - List of acronyms and abbreviations

For a list of acronyms and abbreviations used in the PRAC minutes, see:

[Home>Committees>PRAC>Agendas, minutes and highlights](#)

21. Explanatory notes

The Notes give a brief explanation of relevant minute's items and should be read in conjunction with the minutes.

EU Referral procedures for safety reasons: Urgent EU procedures and Other EU referral procedures

(Items 2 and 3 of the PRAC minutes)

A referral is a procedure used to resolve issues such as concerns over the safety or benefit-risk balance of a medicine or a class of medicines. In a referral, EMA is requested to conduct a scientific assessment of a particular medicine or class of medicines on behalf of the European Union (EU). For further detailed information on safety related referrals please see:

http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general/general_content_000150.jsp&mid=WC0b01ac05800240d0

Signals assessment and prioritisation

(Item 4 of the PRAC minutes)

A safety signal is information on a new or incompletely documented adverse event that is potentially caused by a medicine and that warrants further investigation. Signals are generated from several sources such as spontaneous reports, clinical studies and the scientific literature. The evaluation of safety signals is a routine part of pharmacovigilance and is essential to ensuring that regulatory authorities have a comprehensive knowledge of a medicine's benefits and risks.

The presence of a safety signal does not mean that a medicine has caused the reported adverse event. The adverse event could be a symptom of another illness or caused by another medicine taken by the patient. The evaluation of safety signals is required to establish whether or not there is a causal relationship between the medicine and the reported adverse event.

The evaluation of safety signals may not necessarily conclude that the medicine caused the adverse event in question. In cases where a causal relationship is confirmed or considered likely, regulatory action

may be necessary and this usually takes the form of an update of the summary of product characteristics and the package leaflet.

Risk Management Plans (RMPs)

(Item 5 of the PRAC minutes)

The RMP describes what is known and not known about the side effects of a medicine and states how these risks will be prevented or minimised in patients. It also includes plans for studies and other activities to gain more knowledge about the safety of the medicine and risk factors for developing side effects. RMPs are continually modified and updated throughout the lifetime of the medicine as new information becomes available.

Assessment of Periodic Safety Update Reports (PSURs)

(Item 6 of the PRAC minutes)

A PSUR is a report providing an evaluation of the benefit-risk balance of a medicine, which is submitted by marketing authorisation holders at defined time points following a medicine's authorisation.

PSURs summarises data on the benefits and risks of a medicine and includes the results of all studies carried out with this medicine (in the authorised and unauthorised indications).

Post-authorisation Safety Studies (PASS)

(Item 7 of the PRAC minutes)

A PASS is a study of an authorised medicinal product carried out to obtain further information on its safety, or to measure the effectiveness of risk management measures. The results of a PASS help regulatory agencies to evaluate the safety and benefit-risk profile of a medicine.

Product related pharmacovigilance inspections

(Item 9 of the PRAC minutes)

Inspections carried out by regulatory agencies to ensure that marketing authorisation holders comply with their pharmacovigilance obligations.

More detailed information on the above terms can be found on the EMA website:

<https://www.ema.europa.eu/en>