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SME Office NEWSLETTER

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IN THIS ISSUE

Guidance on pharmacovigilance for human medicines

The updated pharmacovigilance legislation brought significant changes to electronic reporting requirements for suspected adverse reactions. The Agency has launched a project to deliver a new EudraVigilance system by 2017. A change management plan including a timetable of the upcoming changes to EudraVigilance as well as detailed guidance on preparing for the changes has been published (EMA/797114/2014). It sets out the changes taking place in the EudraVigilance system and to the process of reporting Individual Case Safety Reports (ICSRs) and Suspected Unexpected Serious Adverse Reactions (SUSARs). Further information can be found under Link.

The Eudravigilance access policy has been revised (EMA/759287/2009 Revision 2) ahead of implementing the new EudraVigilance system in 2017. This revised access policy will enter into force six months after the Management Board of the Agency announces that the EudraVigilance database has achieved its full functionality (entry into force likely mid 2017).

Good Pharmacovigilance Practices

The Agency has published an update of the following EU Good Pharmacovigilance Practices (GVP) Modules (see GVP webpage):

- Updated GVP introductory note;
- Final addendum I to GVP module XVI on educational materials in risk management programmes (RMP).
- Draft revision 1 of GVP module XV on safety communication, which formalises working practices such as multi-MAH direct healthcare professional letters and the use of a communication planning template; released for public consultation until 29/02/2016.
- Draft GVP considerations on Biologicals. This is a new GVP chapter on biologicals in the series of product- or population-specific considerations of GVP; released for public consultation until 29/02/2016.

Patient registries

Patient registries are organised systems that use observational methods to collect uniform data on a population defined by a particular disease, condition, or exposure, and that is followed over time. The Agency has launched an initiative to make better use of existing registries and facilitate the establishment of high-quality new registries. The strategy and pilot phase are detailed in the initiative for patient registries (EMA/176050/2014). Further information can be found here.

Safer use of medicines

Guides on medication errors have been published:

- A good practice guide (EMA/762563/2014) which details how suspected adverse reactions caused by medication errors should be recorded, coded, reported and assessed;
- A good practice guide on risk minimisation and prevention of medication errors (EMA/606103/2014), which clarifies key principles of risk management planning in relation to medication errors and proposes options to minimise the risk of medication errors throughout the lifespan of a medicine;
- An addendum to the good practice guide on risk minimisation and prevention of medication errors which provides a strategy to minimise the potential risk of medication errors associated with high-strength and fixed-combination insulin products (EMA/686009/2014).

A new webpage highlighting measures recommended by the Agency to prevent medication errors for specific medicines has been launched with easy-to-understand information to patients and healthcare professionals to further promote the safe use of medicines. Further information can be found on the dedicated Medication errors webpage.

Database of Medicinal Products (Article 57)

A document detailing the measures taken by the Agency to improve data quality in the database of medicinal products ("Article 57" database) at the pre-submission, submission, and post-submission phases of data entry into the eXtended EudraVigilance Medicinal Product Dictionary (XEVMPD) and the methodologies used to validate the medicinal product information submitted has been published (EMA/465609/2015).

The following documents were also updated:

- Q&A document on electronic submission of Article 57 (2) data (EMA/159776/2013)
- Detailed guidance on the electronic submission of information on medicinal products for human use by marketing authorisation holders to the European Medicines Agency in accordance with Article 57(2) of Regulation (EC) No. 726/2004, Chapter 3.II: XEVPRM User Guidance (EMA/135580/2012) and Chapter 5: eXtended EudraVigilance Product Report Acknowledgement Message (EMA/718844/2011).

Reliance on Article 57 database for key pharmacovigilance information on medicines for human use in Europe

The Agency launched on 19 October 2015 a new service to national competent authorities, providing them with continuous access to key Article 57 data. National competent authorities can access product details based on the latest version of information submitted for medicinal products with a valid marketing authorization in the European Economic Area. As of 1 February 2016, for both centrally and nationally authorised medicines, marketing-authorization holders should notify the Agency of administrative changes concerning the qualified person for pharmacovigilance (QPPV) and location of the pharmacovigilance system master file (PSMF) through the Article 57 database only, and should not submit a type IA_{IN} variation to either EMA or NCAs. Further information can be found under Link.

A guideline on key aspects for the use of pharmacogenomics in the pharmacovigilance of medicinal products will come into effect on 1 April 2016 (EMA/CHMP/281371/2013). It includes considerations on how to evaluate pharmacovigilance related issues for medicinal products with pharmacogenomics associations, and how to translate the results of these evaluations to treatment recommendations in the labelling.

The following questions and answers documents were also updated :

- Q&A document on signal management has been published (EMA/261758/2013 Rev 1). This document addresses a number of questions which stakeholders may have on the management of safety signals.
- Q&A document on Periodic safety update reports (EMEA-H-19984/03 Rev. 55).

Non-clinical and clinical guidance

A guideline on the clinical investigation of medicinal products for the treatment of amyotrophic lateral sclerosis (ALS) will come into force on 1 June 2016 (EMA/531686/2015). It describes the main requirements for medicinal products for the treatment of ALS with respect to diagnostic criteria, study endpoints and trial design.

A guideline on the clinical investigation of medicinal products for the treatment of Duchenne and Becker muscular dystrophy will come into force on 1 July 2016 (EMA/CHMP/236981/2011, Corr. 1). Guidance is provided on the identification of the target population, study design and choice of efficacy endpoints and safety parameters.

A revised "appendix 4" to the guideline on the evaluation of anticancer medicinal products, will come into effect on 1 February 2016 (EMA/CHMP/703715/2012 Rev. 1). It includes a section on the role of the pathological Complete Response as an endpoint in neoadjuvant breast cancer studies.

A revised guideline on the clinical investigation of medicinal products for the treatment of asthma will come into effect on 1 May 2016 (CHMP/EWP/2922/01 Rev.1). The revision takes into account updated international clinical recommendations for asthma, focused on a control-based management. A detailed section on the development of medicinal products for the treatment of asthma in children and considerations for the development of immunotherapy have also been included.

A revised guideline on the clinical investigation of medicinal products for the treatment of juvenile idiopathic arthritis will come into effect on 1 June 2016 (EMA/CHMP/239770/2014 Rev. 2). It has been updated to take into account recent developments relating to study design and validated disease activity evaluation tools to assess clinical and structural outcomes.

A revised guideline on non-clinical local tolerance testing of medicinal products will come into effect on 1 May 2016 (EMA/CHMP/SWP/2145/2000 Rev. 1, Corr. 1). It provides guidance on the development and evaluation of medicinal products that may come into contact with different sites of the human body following normal clinical use, as well as after unintentional administration.

A draft guideline on the use of pharmacokinetics and pharmacodynamics in the development of antibacterial medicinal products was released for consultation until 31 March 2016 (EMA/CHMP/594085/2015). It outlines the regulatory expectations for application dossiers and takes into account the scientific advances in the field that have implications for antimicrobial agent development programmes.

A draft guideline on the clinical development of medicinal products intended for the treatment of pain has been released for consultation until 31 March 2016 (EMA/CHMP/970057/2011). It replaces and updates the separate guidelines on neuropathic (CPMP/EWP/252/03) and nociceptive pain (CPMP/EWP/612/00).

A draft guideline on "Points to consider on frailty; Evaluation instruments for baseline characterisation of clinical trial populations" has been released for consultation until 31 May 2016 (EMA/CHMP/778709/2015). It provides guidance for the evaluation of the baseline frailty status of patients enrolled in a clinical trial or other clinical investigation (e.g. registry).

A revised draft guideline on immunogenicity assessment of biotechnology-derived therapeutic proteins has been released (EMEA/CHMP/BMWP/14327/2006 Rev. 1). The final revision will contain specific requirements for immunogenicity assays and integrated analysis of the clinical significance of immunogenicity.

A revised draft guideline on the clinical investigation of medicinal products for prevention of venous thromboembolism in non-surgical patients has been released for public consultation until 15 May 2016 (EMA/CHMP/41252/2015). The update include changes such as clarifications regarding imaging tests to be used in dose-finding and confirmatory trials, need for specific studies depending on the claimed indication, target population and treatment duration.

The inventory of paediatric therapeutic needs in gastroenterology has been adopted in October 2015 (EMA/PDCO/552359/2015).

Regulatory and procedural guidance

PRIority MEdicines (PRIME)

A new scheme has been developed by the Agency to reinforce early dialogue and regulatory support to stimulate innovation, optimise development and enable accelerated assessment of PRIority MEdicines (referred to as PRIME). It aims to strengthen support to medicines that have the potential to benefit patients with no treatment options, or that may offer a major therapeutic advantage over existing treatments. A draft reflection paper outlining the eligibility criteria, procedure, key features and data requirements for the PRIME scheme has been published (EMA/CHMP/57760/2015). Earlier entry into the scheme is envisaged for micro-, small- and medium-sized enterprises (SMEs) and applicants from the academic sector. Further information can be found on the dedicated webpage (Link).

Adaptive pathways

The Adaptive Pathways pilot programme is ongoing and the Agency is still accepting applications for adaptive pathways meetings with health-technology-assessment bodies. Guidance for companies considering submissions to the Adaptive Pathways pilot was released on 9 November 2015 (EMA/707235/2015). Further information can be found under Link.

Post Authorisation Efficacy Study (PAES)

The Agency has released a draft guideline on how to design and conduct post-authorisation efficacy study (PAES) (EMA/PDCO/CAT/CMDh/PRAC/CHMP/261500/2015; dedicated webpage). It will apply to both imposed and voluntary PAES and is intended to provide scientific guidance on PAES with regards to the general need for such studies, general methodological considerations and study conduct. The EMA post-authorisation procedural advice for users of the centralised procedure has been updated to reflect this change (Link).

Non-acceptability of replacement of pivotal clinical trials

A position paper has been published to inform applicants and Marketing Authorisation Holders (MAH) on the position of the Agency concerning the non-acceptability of replacement of pivotal clinical trials during the assessment of an application in the context of a marketing authorisation in cases of GCP non-compliance (EMA/448853/2015).

Electronic application form for marketing authorisation dossiers

Since 1 January 2016, the use of the Electronic Application Form (eAF) is mandatory for all procedures in the EU (Centralised procedure, MRP, DCP and by default National procedure), for Human and Veterinary products. The word forms are therefore no longer available. A webinar session providing information on where to find relevant documents and addressing the most common issues and workaround solutions when filling the forms is available (video and slides). Please also refer to the eAF website for further information (Link).

Veterinary medicines

The draft Committee for Medicinal Products for Veterinary Use (CVMP) strategy on antimicrobials for 2016-2020 has been released for consultation until 29 February 2016 (EMA/CVMP/209189/2015). The strategy sets clear objectives based on a "One Health" approach to help combat the threat of resistance which may arise from the use of antimicrobials in animals.

Workshops, meetings and reports

EMA roundtable with SME stakeholders

To mark the 10 year anniversary of the SME initiative, the Agency's SME Office held on 27 November 2015 a roundtable meeting with SME stakeholders. The aim of the meeting was to provide an update on the SME initiative 10 years after its implementation, to present the results of a follow-up survey conducted in September 2015 and to share experience with stakeholders. The aim was also to discuss future challenges and opportunities for SMEs. The programme, the presentations and the report on the event have been published on the Agency's website (Link).

Reports, presentations and/or videos of the following meetings have been published:

September 2015

- Ninth stakeholder forum on the pharmacovigilance legislation (Link);
- Second stakeholder meeting on the implementation of the EMA's policy on publication of clinical data for human medicines (Link);
- EU International Organization for Standardization (ISO) for the identification of medicinal products (IDMP) task force meeting (Link);
- Visit of the European Association of Pharmaceutical Full -line Wholesalers (Link);
- EMA Human Scientific Committees' Working Parties with Patients' and Consumers' Organisations (PCWP) and Healthcare Professionals' Organisations (HCPWP) joint meeting: workshop on risk minimisation measures (Link);
- EMA workshop on extrapolation across age groups (Link).

October 2015

- Joint Biologics Working Party/ Quality Working Party/ Good Manufacturing and Distributing Practice Inspectors Working Group – European industry workshop on lifecycle management (Link);
- EMA - EuropaBio information day (Link).

December 2015

- EMA workshop on demonstrating significant benefit of orphan medicines: concepts, methodology, and impact on access (Link).

Selection of upcoming events

February 2016

- Workshop for micro-, small- and medium-sized enterprises on statistical perspectives in regulatory clinical development programmes - 5 February 2016 (Link);
- Workshop on challenges for the approval of anti-cancer immunotherapeutic drugs – 4 and 5 February 2016 (Link).

March 2016

- EMA/International Federation for Animal Health Europe info day 2016 – 17 and 18 March 2016 (Link).

May 2016

- EMA public workshop on extrapolation of efficacy and safety in medicine development – 17 and 18 May 2016 (Link).

Registered SMEs

Currently, 1336 companies have SME status assigned by the Agency.

The names and profiles of these companies are published in the Agency's public SME Register.

If you would like to have your company details included in the SME Register, you must first apply for SME status at the Agency.

See the How to apply section of the SME Office pages on the Agency's website for information on how to do this.

About the SME Office

The SME Office was set up within the European Medicines Agency to address the particular needs of smaller companies.

The Office has dedicated personnel who can help SMEs by:

- responding to practical or procedural enquiries;
- setting up briefing meetings to discuss regulatory strategy;
- organising workshops and training sessions.

Need more information?

Visit the European Medicines Agency website:

http://www.ema.europa.eu

In particular, these sections may interest you:

SME Office
Pre-authorisation (human medicines)
Pre-authorisation (veterinary medicines)

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