



1 6 January 2011
2 EMA/CVMP/287420/2010
3 Committee for Medicinal Products for Veterinary Use (CVMP)

4 CVMP strategy on antimicrobials 2011-2015

5

Discussion at CVMP	10 November 2010
Adoption by CVMP for release for consultation	9 December 2010
End of consultation (deadline for comments)	31 March 2011

6

7

Comments should be provided using this [template](#). The completed comments form should be sent to vet-guidelines@ema.europa.eu

8



9 CVMP Vision Statement on antimicrobials¹ 2011-2015

10 The CVMP strategy seeks to promote the continued availability of effective antimicrobials for use in
11 animals whilst at the same time acting to minimise risks to animals or man arising from their use.

12 To deliver this vision the CVMP will:

- 13 • Consider available data on antimicrobial resistance (AMR) and give AMR related risks adequate
14 weight in the benefit risk assessment on which a decision to authorise, or to restrict the use of, an
15 antimicrobial is based. When appropriate, risk mitigation measures will be included within the
16 terms of the authorisation. The CVMP Scientific Advisory Group on Antimicrobials (SAGAM) will be
17 consulted to provide high quality scientific advice coherent with the most recent knowledge.
- 18 • Work in collaboration with other interested parties to promote prudent and responsible use of
19 antimicrobials throughout EU in a farm to fork perspective. Approvals of antimicrobials are based
20 on the assumption that they will be used prudently and according to the label and thus for the risk
21 mitigation measures to be effective, it is important that the recommendation given in product
22 literature are fully implemented in everyday veterinary practice.
- 23 • Keep updated on the current knowledge on AMR including levels of resistance and volumes of sales
24 of antimicrobials, as well as on methods for collecting and interpreting such information. With
25 assistance from SAGAM, CVMP will publish reflection papers on matters related to AMR and
26 contribute to the work of other expert groups working in this area.
- 27 • Provide recommendations on measures to be taken to minimise risks from AMR related to the use
28 of veterinary products when appropriate. On request from the European Commission or member
29 states CVMP will reconsider the terms of authorisation of approved products in the context of
30 referral procedures to ensure that compliance with prudent use principles is applied, updated or
31 maintained.

32 Summary of the CVMP strategy on antimicrobials 2011-2015

- 33 • CVMP perceives the need for effective antimicrobial treatment for relevant indications in all species.
- 34 • CVMP wishes to encourage an increased level of innovation on treatment alternatives for infectious
35 diseases.
- 36 • Authorised antimicrobials should have product information recommending the products to be used
37 prudently to avoid unnecessary selection pressure for AMR.
- 38 • Pivotal clinical trials should be conducted according to prudent use principles.
- 39 • Risk mitigation measures at a proportionate level are needed to contain risks for human health.
- 40 • The need to allow off label use under some circumstances is acknowledged. However such use may
41 constitute a non-assessed risk to public and animal health related to AMR.
- 42 • CVMP work should be seen in a context as a part of an overall EU strategy on antimicrobials.
- 43

44

¹ OIE definition "Antimicrobial agent": *"means a naturally occurring, semi-synthetic or synthetic substance that at in vivo concentrations exhibits antimicrobial activity (kill or inhibit the growth of micro-organisms). Anthelmintics and substances classed as disinfectants or antiseptics are excluded from this definition"*
(http://www.oie.int/eng/normes/mcode/en_glossaire.htm#rubrique_definitions)

45 **Introduction**

46 In this document CVMP presents for the third time its strategy on antimicrobials. The need for
47 comprehensive guidance on how to ensure availability of effective antimicrobials whilst safeguarding
48 against the increased levels of resistance was first discussed in the *Risk Management Strategic Plan for*
49 *controlling antimicrobial resistance through authorisation of veterinary medicines* adopted in 2000.
50 That document was followed by the *CVMP Strategy on Antimicrobials 2006-2010 and Status Report on*
51 *Activities on Antimicrobials* where CVMP presented a status report and proposed a number of actions.

52 The objective of this document is to present the CVMP's view on responsibility with regard to
53 antimicrobial resistance (AMR) covering both animal and public health aspects. CVMP considers it
54 important to update its view on AMR periodically in order to keep aligned with the ever changing
55 animal and public health situation while applying the experience it has gathered from marketing
56 authorisation approval. This includes reflections about usage pattern of antimicrobials in the field and
57 collaboration within and outside the EU in order to make the strategy most effective. Intentions for
58 direct action during the next five year period are added in boxes following each section.

59 In accordance with Regulation (EC) No 726/2004, the CVMP is responsible for preparing the Agency's
60 opinions on all questions concerning veterinary medicines. With regard to antimicrobials this
61 responsibility includes considerations of risks related to development, emergence and spread of
62 antimicrobial resistance. Such risks may be either risks to animal health due to lack of effective
63 treatment options or risks to public health due to exposure to resistant bacteria (zoonotic or
64 commensal organisms carrying resistance determinants). Exposure could be either through direct
65 contact with the animal, via the environment or via food of animal origin and the level of exposure will
66 be dependent on the selection pressure that unavoidably arises from the use of antimicrobials.

67 Another possible risk for public health is linked to residues in food. This risk is considered as detailed in
68 the VICH guideline 36 (Studies to evaluate the safety of residues of veterinary drugs in human food:
69 general approach to establish a microbiological ADI) and is not further discussed in this document.

70 The CVMP can act on several levels; marketing authorisations (including wordings in product
71 information), guidance documents and reflection papers. Reflection papers have been used to promote
72 certain risk mitigation measures such as the need to retain some antimicrobials for second line use.
73 CVMP assessment of data provided in support of applications for marketing authorisations constitutes
74 the basis for European Commission decisions. These procedures aim at ensuring that veterinary
75 medicines on the market have a positive benefit-risk balance when used in the animal population they
76 are intended for and this balance includes considerations of risks related to antimicrobial resistance.
77 Risk mitigation measures (including SPC warnings) on a proportionate level are of importance to
78 minimise such risks and thereby increase the lifetime of effective antimicrobials on the market and
79 reduce risks to public health related to spread of drug residues and resistance from animals to humans.
80 Guidance documents on antimicrobial efficacy and antimicrobial resistance provide an important
81 framework for applicants and assessors and reflection papers provide a tool to express the views of
82 CVMP.

83 Multi-resistant bacteria are an emerging global problem. In the field of veterinary medicine both farm
84 animals and companion animals are affected. The problem cannot be reliably quantified as there is
85 insufficient surveillance data on resistance in animals, but reports on emerging resistance are now
86 common.

87 During the last decade a number of events have stressed the need for increased awareness of public
88 health aspects related to antimicrobial resistance in animal husbandry. For example, the emergence of
89 ESBLs (extended spectrum beta lactamases including AmpC and carbapenemases) shows that risks to
90 human health include the possibility of horizontal transfer of resistance genes. Thus, foodborne risks

91 go beyond spread of zoonotic bacteria (such as Salmonella and Campylobacter). In addition, clonal
92 spread of a certain meticillin resistant Staphylococcus aureus (MRSA) strain in livestock represents a
93 risk to human health from contact with animals. This exemplifies that risks for humans related to
94 antimicrobial resistance in animals are not restricted to foodborne risks alone.

95 **1. CVMP perceives the need for effective antimicrobial treatment for**
96 **relevant indications in all species**

97 When animals are diseased and suffering, there is a need to treat them or to alleviate their pain by
98 other means.

99 Ideally the prescriber should have several different treatment options available for all infections and all
100 species. CVMP notes that although the number of approved products on the market continues to
101 increase, there are still large gaps in approved indications pertaining to a number of infectious diseases
102 especially in minor species. In many cases these gaps could be filled by adding new species/indications
103 to existing marketing authorisations or by presenting new formulations containing known active
104 substances.

105 Availability of different formulations of narrow spectrum antimicrobials is of special importance as
106 these are essential to allow targeted treatment. It would be beneficial to increase the number of such
107 products on the market especially products that offer convenient treatment alternatives to make it
108 attractive to tailor treatment based on correct diagnosis.

109 CVMP would like to encourage initiatives to increase the number of product alternatives on the market
110 covering different species and indications including those with a limited market. A number of national
111 marketing authorisations exist and where appropriate these could be expanded to cover all of the EU
112 provided AMR risks have been adequately assessed and mitigated. CVMP will look favourably upon
113 developments that increase the number of narrow-spectrum antimicrobials especially those formulated
114 to increase compliance and thereby providing practical alternatives to broad spectrum antimicrobials.

115 **2. CVMP wishes to encourage an increased level of innovation on treatment**
116 **alternatives for infectious diseases**

117 Already today there are certain diseases where treatment outcome is compromised by high resistance
118 levels against most antimicrobials and there will for the future a need for new treatment alternatives,
119 covering both antimicrobials and non-antimicrobial treatments (vaccines etc) against bacterial diseases
120 and diseases that may precipitate secondary bacterial diseases.

121 When it comes to antimicrobials that offer new treatment options (e.g. due to a new mechanism of
122 action), CVMP sees a potential inbuilt conflict in cases where the same molecule is developed in parallel
123 for both human and veterinary use as the veterinary use of antimicrobials might constitute a risk factor
124 for emergence of resistance in humans. CVMP intends to collaborate closely with the human side and
125 communicate with industry at an early stage to allow specific assessment of such drugs and when
126 appropriate restrict them as last resort medicines for humans. Such restrictions should be made based
127 on risk assessment in each case to allow appropriate decisions without unnecessarily restricting
128 availability on the veterinary side.

129 CVMP will work to reduce the current perceived risk in developing antimicrobials for veterinary use by
130 clarifying the opportunities and restrictions on development of novel antimicrobials. This would require
131 close collaboration with ECDC together with a dialogue with industry early in product development.
132 Measures to promote scientific advice for AMR issues should be developed. This includes initiatives for
133 non-antimicrobial treatment or prevention against bacterial diseases.

134 **3. Authorised antimicrobials should have product information**
135 **recommending the products to be used prudently to avoid unnecessary**
136 **selection pressure for AMR**

137 Prudent use of antimicrobials, as defined e.g. in Chapter 6.9 in the OIE Terrestrial Animal Health Code,
138 is regarded a cornerstone to contain resistance for benefit of both animal and human health.

139 Within the process of approval of veterinary medicinal products, the summary of product
140 characteristics (SPC) is used as the tool to make available appropriate information in the case of both
141 products approved since long time and new products on the market. To allow users to comply with
142 prudent use principles the SPC should clearly describe the conditions under which the antimicrobial
143 products are to be used.

144 Indications should be clear and precise. Doses should be optimised to ensure effective therapy without
145 inducing unnecessary emergence of resistance including avoidance of unnecessarily long treatment
146 periods. To enable the users of the product to take an evidence based decision on the correct use of
147 the product in the various field conditions, information on pharmacokinetic/pharmacodynamic
148 properties of the antimicrobial agent, including information on sensitivity of the target pathogens
149 should be presented in line with the requirements of the respective SPC guideline. Preventive
150 treatment of an entire group/flock when infection has started in some animals should be restricted to
151 highly contagious and severe diseases. Oral products for group or flock medication is of special concern
152 since in intensive animal production there might be comprehensive use of antimicrobials and from a
153 pharmacological perspective treatment is not well controlled as the ingested doses varies between
154 animals and the exposure to the GI-tract (where most zoonotic bacteria are present) will be high. In
155 addition, there is pressure for enhanced performance of animals which might imply short term benefits
156 from non-sustainable use of antimicrobials.

157 Fluoroquinolones and 3rd to 4th generation cephalosporins are second line antimicrobials to be
158 reserved for conditions that have responded poorly or are likely to respond poorly to other classes of
159 antimicrobials and they should not be used for general prophylaxis e.g. in pig and poultry production.
160 More emphasis should be put into promoting this restriction to reserve these critically important
161 antimicrobials for situations where they should be used according to prudent use principles. In this
162 respect, group and flock treatments must be justified in relation to the severity and contagiousness of
163 the disease. Fixed combinations with second line antimicrobials for mass medication are of special
164 concern and thus of high priority for action.

165 Macrolides comprise an important group for action as low dose/long term treatment is still approved
166 for some products in some countries. From the high number of products available (including numerous
167 products where macrolides are included in fixed combinations with other antimicrobials) and
168 considerable geographical differences, there seems to be room for revisions of the SPCs without
169 compromising availability of effective treatment options.

170 Pleuromutilins are regarded by CVMP as critically important antimicrobials in veterinary medicine as
171 they are the sole therapy for some conditions such as macrolide resistant infections of *Brachyspira*
172 *hyodystenteriae* in swine. Therefore the need for avoidance of unnecessary use of pleuromutilins must
173 be stressed.

174

175 [Following its recommendations on fluoroquinolones and 3rd to 4th generation cephalosporins CVMP has](#)
176 [agreed a priority list for action. Warning sentences as recommended have been implemented in SPCs](#)
177 [for all fluoroquinolones containing products and similar exercises are recommended for cephalosporins.](#)

178 The committee notes the need to update SPC texts for numerous products to ensure that texts are
179 balanced and consistent with CVMP recommendations, current state of art and scientific/technical
180 knowledge. Fluoroquinolone containing combination products have highest priority for action using the
181 referral tool. It needs to be assessed whether there are any appropriate indications for fixed
182 combinations with second line antimicrobials. Products for group/flock medication are of special
183 concern.

184 SPCs for fluoroquinolones and cephalosporins are recommended to be updated to ensure clear and
185 specific indications and appropriate posology. Well established products with sparse documentation and
186 generics of such should not have broader indications or longer treatment periods approved as
187 compared to those which have a complete and/or updated documentation.

188 CVMP has recently (November 2010) published for consultation recommendations for macrolides². It is
189 anticipated that there is a need for referrals to update the indication and posology sections of some
190 SPCs especially products for group/flock medication.

191 CVMP together with SAGAM will reflect on the need for action on pleuromutilins.

192 **4. Protocols for pivotal clinical trials should consider prudent use principles**

193 Marketing authorisations are granted with indications for use based on the results from pivotal clinical
194 trials. To allow products to be used prudently in practice it is crucial that such studies are designed in a
195 way that takes into account prudent use principles. There is certain problem areas related to this that
196 needs to be further elaborated on. For instance there might be a need for special study design when
197 documenting effects from antimicrobial classes such as fluoroquinolones and higher generation
198 cephalosporins that are intended to be second line treatments.

199 In many cases, for instance chronic or mild infections and in all cases of preventive treatment, studies
200 should be designed to allow assessment of rate of self cure as need for antimicrobial treatment might
201 not be obvious. In addition there might be a need to assess the additive effect for antimicrobials
202 compared to non-antimicrobial therapy.

203 CVMP and its Efficacy Working Party will together with SAGAM further elaborate on requirements for
204 clinical trials and if needed revise the relevant guideline.

² Reflection paper on the use of macrolides, lincosamides and streptogramins (MLS) in food-producing animals in the EU available at http://www.ema.europa.eu/ema/pages/includes/document/open_document.jsp?webContentId=WC500099151

205 **5. Risk mitigation measures at a proportionate level are needed to contain**
206 **risks for human health**

207 In the EU, the dossier requirements for veterinary medicinal products are laid down in Directive
208 2001/82/EC, as amended³, attention should be given to guidance on pre-approval efficacy and
209 post-marketing surveillance. In addition, a guideline (GL27⁴) to detail dossier requirements for
210 approval of veterinary medicinal products for food producing animals with respect to antimicrobial
211 resistance has been developed by VICH with active participation from CVMP. Beyond food-borne risks
212 there will be a need in the future to address risks related to contact between animals (including
213 companion animals and horses) and humans. It is essential that an antimicrobial resistance risk
214 assessment in relation to dossier assessment is made in a structured, consistent and transparent way.

215 Risks related to AMR are to be considered in the benefit/risk assessment and in case these risks are
216 found unacceptably high and cannot be sufficiently mitigated marketing authorisation will not be
217 granted.

218 Of special concern are molecules that represent totally new modes of action (and thus resistances
219 unrelated to those already evident on the market) and a very strict view will be applied where the
220 molecules in questions are specifically reserved as last resort medicine for use in zoonotic infections in
221 humans.

222 CVMP will elaborate on the need for further guidelines and update of existing guidance on AMR risk
223 analysis as related to approval of veterinary medicinal products. Linked to this the committee will
224 elaborate further on specific issues related to benefit/risk assessment of antimicrobials. The CVMP
225 Efficacy Working Party and SAGAM will assist CVMP in this task as appropriate.

226 Quality assured training of assessors is also considered important.

227 **6. The need to allow off label use under some circumstances is**
228 **acknowledged. However such use may constitute a non-assessed risk to**
229 **public and animal health related to AMR**

230 Use of antimicrobials in veterinary medicine is not restricted to use of approved veterinary medicinal
231 products, nor to approved indications, doses or methods of administration. Veterinary medicinal
232 products are used for non approved indication and posologies, tentatively or in cases where there is
233 evidence based data available but where SPCs have not been updated accordingly. In addition there is
234 an established use of medicinal products approved for human use according to "the cascade"⁵. CVMP
235 acknowledges the need of such off label use to ensure availability of medicines needed for animals.
236 However, increased awareness of AMR is needed for such prescription as in those cases the
237 responsibility for AMR risk assessment is placed on the prescribing veterinarian. CVMP sees a need for
238 increased awareness and improved competence among veterinarians to ensure prudent decisions. Of
239 special concern are those molecules that are restricted in the human side to be reserved as last resort
240 medicines. Use of such substances in veterinary medicine should be avoided as far as possible. In case
241 of such life threatening infections where there is a need for treatment with last resort medicines in
242 animals, treatment should always be evidence based and consider risks for selection of resistance.

³ Directive 2001/82/EC on the Community code relating to veterinary medicinal products, as amended by Directive 2004/28/EC of the European Parliament and of the Council of 31 March 2004.

⁴ VICH GL27: Guidance on the pre-approval information for registration of new veterinary medicinal products for food producing animals with respect to antimicrobial resistance

(http://www.ema.europa.eu/ema/pages/includes/document/open_document.jsp?webContentId=WC500004308)

⁵ See Article 10 and 11 of the Directive 2001/82, as amended

243 Off-label use also comprises situations where the practitioner changes the dose or treatment duration
244 of a product authorised for veterinary use from the label recommendation. Further work is needed to
245 consider how CVMP should approach antimicrobial products, which are approved with a dose that has
246 been shown to be too low both in relation to real-life efficacy and resistance development. Such
247 situations are complicated by the fact that simply increasing the dosage will also influence several
248 other factors of the benefit-risk balance, e.g. target animal safety, withdrawal period, environmental
249 risk assessment etc.

250 For the future it would be appropriate to have a system to restrict “the cascade” in case of risks related
251 to AMR to allow proportionate risk mitigation following appropriate scientific risk analysis. CVMP will
252 work with the European Commission and other stakeholders to define the best way by which such
253 restrictions on off label use might be introduced without inappropriately comprising the clinical freedom
254 of veterinarians.

255 CVMP has recently presented recommendations on meticillin-resistant *Staphylococcus*
256 *pseudintermedius* in dogs and the committee is willing to take part in further work to address the issue
257 of AMR related risks from veterinary use of antimicrobials off label and will contribute to any action
258 aiming at increasing the prescriber’s awareness.

259 CVMP will further consider risks related to off-label use when reflecting on efficacy, resistance and
260 benefit-risk for antimicrobials.

261 **7. CVMP work should be seen in a context as a part of an overall EU** 262 **strategy on antimicrobials**

263 Support to activities aimed at the promotion of prudent use principles is regarded as a cornerstone to
264 contain resistance and these by definition includes activities that involve a number of different players,
265 of which CVMP is only one. The remit of CVMP is to provide scientific opinions as a base for setting
266 MRLs and approving of veterinary medicinal products together with giving scientific advice and
267 guidance in these areas, whereas the total concept of containing antimicrobial resistance is much
268 broader and covers numerous aspects of veterinary medicine and animal husbandry. To play an
269 appropriate part in this context, CVMP is actively involved in the scientific debate on antimicrobials and
270 will have an open dialogue with other parties about the efforts necessary to contain AMR. It is
271 acknowledged that the amount and pattern of use depends on numerous different factors, some of
272 them economic and therefore appropriate product information is not by itself a sufficient measure.

273 There is an increasing need for collaboration between institutions on AMR. CVMP is today active on a
274 number of different platforms; supporting EMA in several projects, collaborating with other bodies e.g.
275 EFSA, ECDC and the European Commission. Collaboration between national competent authorities and
276 networking of experts is also seen as an important activity.

277 Over the period covered by this CVMP Strategy, the European Commission will be implementing the
278 revised Community Animal Health Strategy (CAHS) 'Prevention is better than cure'. Antimicrobial
279 resistance is an area that requires a coordinated approach between human and veterinary communities
280 as both animal and human health is dependent on effective means to treat infection diseases.
281 Therefore this CVMP strategy of AMR should be read in conjunction with the Community Animal Health
282 Strategy.

283 In CVMP’s view a global (EU)-strategy on antimicrobial resistance is urgently needed. The management
284 of this problem for society cannot be left to the prescribing veterinarian, who is faced with sick animals,
285 it can also not be left on the shoulders of the farmer, who has to obtain a benefit from the animal
286 production and it is not a problem that the consumer can solve through the shopping basket.

287 The following elements are found essential in this EU strategy (the list is not intended to be
288 exhaustive):

- 289 • Animal management/husbandry aspects should be included in the discussion as ultimately
290 antimicrobials are not needed when the animals are healthy. For example better herd management,
291 availability of reliable, fast and affordable diagnostic tools for animal diseases,, improved
292 biosecurity measures, better feeding strategies, breeding for disease-resistance, and individual
293 animal surveillance and treatment using modern electronic techniques are important points to
294 consider. Use of vaccines should be promoted. For some infective diseases where vaccines are on
295 the market, antimicrobials may be easier and cheaper to use.
- 296 • Education of veterinarians and farmers and other measures to increase compliance with
297 recommendations given are highly important. Prudent use principles need to be implemented in
298 everyday life at farms and animal clinics.
- 299 • A tendency towards increased advertising and a reduction in prices of antimicrobials is noted. The
300 number of approved products has increased considerably during the last 10 years without a
301 corresponding increase in the number of treatment options because new product applications are
302 in many cases products with the same active substance, indications and resistance patterns as
303 already approved products. This intensified competition is likely to lead to an increase of overall
304 use of antimicrobials with corresponding increase in resistance
- 305 • Monitoring of data on sales/consumption of antimicrobials is essential. Such monitoring is a
306 prerequisite for the evaluation of the extent to which given recommendations are complied with
307 and of the impact of measures taken to promote prudent use. To allow such impact assessment it
308 is highly important to have available harmonised accurate and detailed data on sales of
309 antimicrobials covering both food producing and companion animals. Preferably it should be
310 possible to collect data on use per species and per indication.
- 311 • Monitoring of resistance is of importance to identify areas there might be a need for action. Besides
312 data from surveillance programmes and EU zoonosis reports mapping the prevalence of zoonotic
313 agents and commensals from food producing animals of relevance for human health there is an
314 increased need to monitor target animal pathogens (covering both food producing and companion
315 animals) and to develop harmonised diagnostic tools and interpretation criteria.

316 To ensure that any future measures to be taken with respect to veterinary use of certain antimicrobials
317 are proportionate and effective, a risk analysis at an appropriate level of detail should be performed in
318 each case according to principles as outlined in the Codex Draft Guidelines for Risk Analysis of
319 Foodborne Antimicrobial Resistance, preferably before the action is taken. In this respect, both positive
320 and negative impacts on animal and/or public health should be considered. Further work is needed to
321 quantify the magnitude and impact of the flow of resistant bacteria or resistance determinants from
322 (certain areas of) the veterinary field to the human field.

323 CVMP will work for an overarching EU-strategy on AMR in veterinary medicine, covering both human
324 and animal health aspects, and supports initiatives to create a common platform for AMR risk
325 management activities including further work on the impact and consequences of veterinary use
326 patterns. This includes communication and collaboration with the Commission, EFSA and ECDC but also
327 different interested parties in animal production. In this work CVMP will be supported by the CVMP
328 Efficacy Working Party and SAGAM as appropriate.

329 CVMP supports the recently introduced EMA project on monitoring of sales (European Surveillance of
330 Veterinary Antimicrobial Consumption, ESVAC). Once available, CVMP/SAGAM will use data from
331 ESVAC to be used as background information for impact assessment of taken measures.

332 CVMP supports activities related to monitoring of resistance both the EU zoonosis reports and projects
333 studying target animal pathogens, especially those working for a harmonised methodology and
334 interpretation criteria within the EU and globally.

335 **Annex**

336 **CVMP STATUS REPORT ON ACTIVITIES ON ANTIMICROBIALS**

337 **SUMMARY**

338 In order to facilitate the development of the new CVMP strategy on antimicrobials for 2011-2015, this
339 CVMP status report on activities on antimicrobials (2010) has been prepared for reviewing the activities
340 carried out after the adoption of the previous CVMP Strategy on Antimicrobials (2006-2010).

341 **REVIEW OF PROGRESS SINCE CVMP STRATEGY ON ANTIMICROBIALS (2006-2010).**

342 The CVMP strategy 2006-2010 summarised the following areas of activities.

Strategy 2006-2010	CVMP actions taken
Ensure harmonised interpretation of dossier requirements by efficient training of assessors.	One training of assessors session (<i>Antimicrobial products: Specific aspects of efficacy and safety assessment</i>) was held in Dec 2007 and another on assessment on data from VICH GL27 is planned for 2011.
Provide guidance on how to interpret the data requested according to GL27 and when to provide additional information	This work was initiated but later withdrawn. It was concluded that further guidance for industry was not needed and guidance on how to assess data could be given at training sessions.
Develop further guidance for orally administered products. This should also include considerations about the maximum treatment periods and possibilities to further use PK-PD modelling in the establishment of the best dose and dosing regimen.	No guidance documents have been developed. It was concluded that this area needs to be covered on product level rather than generally. A number of referrals have been run during the period where doses and treatment periods have been evaluated.
Consider the available information on antimicrobial resistance in the EU including the data from surveillance programmes and EU zoonosis reports.	Such data have been considered as appropriate in relation to the need for warnings sentences to be put in SPCs e.g. during referrals.
Stress the importance of availability of information on the overall use of antimicrobials from the Member States.	CVMP supports the EMA ESVAC project on monitoring of sales.

<p>Enhance the communication with other parties especially EFSA, ECDC, FVE and veterinary medicines industry in order to more efficiently exchange information on resistance issues and usage of antimicrobials.</p> <p>Active involvement in the scientific debate on antimicrobials to have an open dialogue with other parties about the efforts, which are necessary to maintain the efficacy of antimicrobials.</p>	<p>During the period CVMP has been involved in the Codex Alimentarius TFAMR and together with other bodies participated in the projects Joint Opinion on antimicrobial resistance (AMR) focused on zoonotic infections (ECDC, EFSA, EMA, SCENIHR) and Joint scientific report of ECDC, EFSA and EMEA on meticillin resistant <i>Staphylococcus aureus</i> (MRSA) in livestock, companion animals and food. In addition CVMP/EMA together with HMA and the Czech presidency organised a meeting in Marienbad in May 2009 where interested parties were invited and AMR has been on the agenda at several meetings with interested parties such as at a Focus group meeting on fluoroquinolones in October 2006.</p>
<p>Finalise the review on fluoroquinolones</p>	<p>All proposed warning sentences are now included in SPCs for products of concern.</p> <p>The Commission has invited CVMP to propose further referrals to be made to address issues related to indications and posology. This work has been started.</p>
<p>Initiate activities on other groups of antimicrobials that are listed as critically important for human use, in particular 3rd and 4th generation cephalosporins.</p>	<p>A reflection paper with recommendations on cephalosporins was published in 2009. The work with the implementation of those recommendations is to be started.</p> <p>Referral procedures similar to those on fluoroquinolones will be needed.</p>
<p>Take further initiative and explore possibilities to liaise with the regulatory authorities outside the EU, in particular those of the United States and Japan, on antimicrobial issues.</p>	<p>CVMP supports increased collaboration between FDA and EMA and notes that these two bodies have a confidentiality agreement and exchange information on AMR on a regular basis.</p>

344 It is concluded that the CVMP has made substantial efforts in the field of AMR over the last
345 5 years. The work has been ongoing, in general successfully, and most of the goals as detailed in the
346 strategic plan for 2006-2010 have been achieved. However, during this period AMR related issues have
347 become increasingly important and in many cases actions taken during this period represent initiatives
348 that need to be continued and expanded.