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SCIENCE MEDICINES HEALTH

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Information Management

Electronic submission of investigational medicinal product (IMP) data to the Extended EudraVigilance medicinal product dictionary (XEVMPD) Frequently asked questions & answers (FAQs)

Version 1.0

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1. Submission of investigational medicinal products (IMPs)

1.1. Legal obligations to submit IMP information to the XEVMPD

Question: Do we have to submit investigational medicinal product data to the XEVMPD? Are they to be provided as per requirements of Art57(2)?

Answer: Legal obligations set out in Article 57(2) of Regulation (EC) No 726/2004 relate to "*medicinal products for human use authorised in the Union*".

As stated in the [Detailed guidance on the collection, verification and presentation of adverse event/reaction reports arising from clinical trials on medicinal products for human use \('CT-3'\) \(OJ 2011/C 172/01\)](#) published by the Commission on 11 June 2001, paragraph 7.9. Format of report, section 104: "*the Sponsor should provide, before completing the clinical trials application form, information on the IMP in the EudraVigilance Medicinal Product Dictionary ('EVMPD')*"¹.

Moreover, as per Article 81(3) of [CT Regulation \(EU\) No 536/2014](#): "*The EU database shall support the recording and submission to the Medicinal Product Dictionary, contained in the Eudravigilance database, of all the data on medicinal products without a marketing authorisation in the Union and substances not authorised as part of a medicinal product in the Union, that are necessary for the maintenance of that dictionary.*"

Therefore, the investigational medicinal product data must be provided to the XEVMPD.

1.2. Insertion of an IMP in the XEVMPD

Question: How do we insert an IMP in the XEVMPD?

Answer: Directive 2001/20/EC, Article 2 (d), provides the following definition for an IMP: "*a pharmaceutical form of an active substance or placebo being tested or used as a reference in a clinical trial, including products already with a marketing authorisation but used or assembled (formulated or packaged) in a way different from the authorised form, or when used for an unauthorised indication, or when used to gain further information about the authorised form.*"

IMP data must be entered in the Extended EudraVigilance medicinal product dictionary (XEVMPD) via an Extended EudraVigilance medicinal product report message (XEVPRM). XEVPRMs must be submitted in the XEVMPD by organisations [registered with EudraVigilance](#) for [medicinal product reporting](#) either via Gateway or the EudraVigilance web application (EVWEB). EVWEB allows registered users to create and send XEVPRMs, receive XEVPRM acknowledgements, view medicinal product information and perform queries.

- Information on authorised medicinal products (AMPs) is entered in the XEVMPD (also known as 'Article 57 database') by the marketing authorisation holders (MAHs) in accordance with the principles described in [Chapter 3.II: Extended EudraVigilance product report message \(XEVPRM\) user guidance](#) available on the ['Guidance documents' webpage](#).
- Information on development medicinal products (DMPs) is entered in the XEVMPD by sponsor organisations in accordance with the principles described in the *'Guidance on the electronic submission of information on investigational medicinal products for human use in the eXtended*

¹ 'EVMPD' is the acronym of a previous version of the XEVMPD in use at the time of publication of CT-3.

EudraVigilance Medicinal Product Dictionary (XEVMPD)' document available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

Sponsors registered with EudraVigilance for medicinal product reporting should send an XEVPRM with the operation type 'Insert' (1) for a new development medicinal product to the XEVMPD.

Providing that the insertion was successful, an EV Code will be assigned to the medicinal product entry and sent automatically to the sender's organisation ID via an XEVPRM acknowledgement.

- If the sender organisation is registered for submissions via EVWEB (i.e. a WEB Trader user), the XEVPRM Acknowledgement will be sent to the WEB Trader "Inbox" available in EVWEB, and later archived in the "Archived Inbox".
- Gateway users should check with their Gateway providers where their XEVPRM acknowledgements are stored.

The 'eXtended EudraVigilance medicinal product dictionary (XEVMPD) data-entry tool user manual' and step-by-step documents available on the ['Training' webpage](#) provide supporting information on the use of EVWEB.

2. Submission of development medicinal products (DMPs)

2.1. Mandatory data elements for a DMP entry

Question: What information needs to be provided when entering development product information in the XEVMPD?

Answer: Please refer to the guidance provided in section 1. *Initial submission of a development medicinal product* of the 'Guidance on the electronic submission of information on investigational medicinal products for human use in the eXtended EudraVigilance Medicinal Product Dictionary (XEVMPD)' document available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#) for the required information.

2.2. Submission of an authorised medicinal product information studied in a clinical trial for new indication(s)/route(s) of administration

Question: In our clinical trial, we are using a medicinal product which is already authorised. It is however studied for a new indication not listed in the SmPC. How should we submit such product to the XEVMPD?

Answer: If a medicinal product authorised in the EEA is used in a clinical trial in its authorised form (i.e. the pharmaceutical dose form, active ingredient and its concentration remain unchanged) for authorised or unauthorised indications and/or route of administration(s), no DMP needs to be submitted to the XEVMPD by the sponsor.

In the Clinical Trial Application (CTA) form, the sponsor makes a reference to the AMP entered in the XEVMPD by the marketing authorisation holder.

Information on all authorised medicines contained in the Article 57 database is published in the form of an [excel document](#) on the ['Public data from Article 57 database' webpage](#).

2.3. Submission of a DMP studied in clinical trials run by different sponsors

Question: In our clinical trial, we are using a development product, which is most likely already entered in the XEVMPD by another sponsor. Should we enter this product in the XEVMPD again? Or should we update the existing product entry submitted by another sponsor?

Answer: Since each DMP in a clinical trial needs to be uniquely identifiable and is sponsor-specific, you should insert a new DMP entry in the XEVMPD. Data entered in the XEVMPD as 'development' are strictly confidential and visible to the sponsor organisation that 'owns' this product data in the XEVMPD. Maintenance related operations (such as updates) on this data can only be performed by the owner organisation or the European Medicines Agency (EMA).

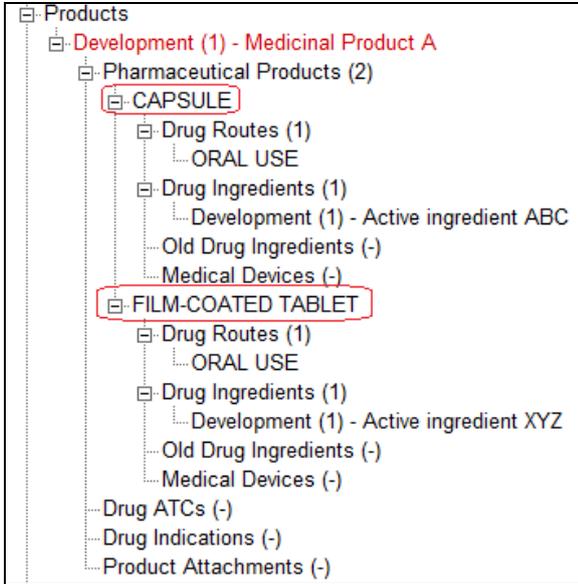
2.4. Submission of a DMP containing multiple pharmaceutical products

Question: In our clinical trial, the patients receive orally two different pharmaceutical forms, each containing a different active ingredient. How should we submit this to the XEVMPD?

Answer: If the two studied pharmaceutical forms are part of one medicinal product (i.e. part of a package), then one development medicinal product with two different pharmaceutical products should be submitted to the XEVMPD. Only one EV Code will be assigned to this development medicinal product.

EXAMPLE 1:

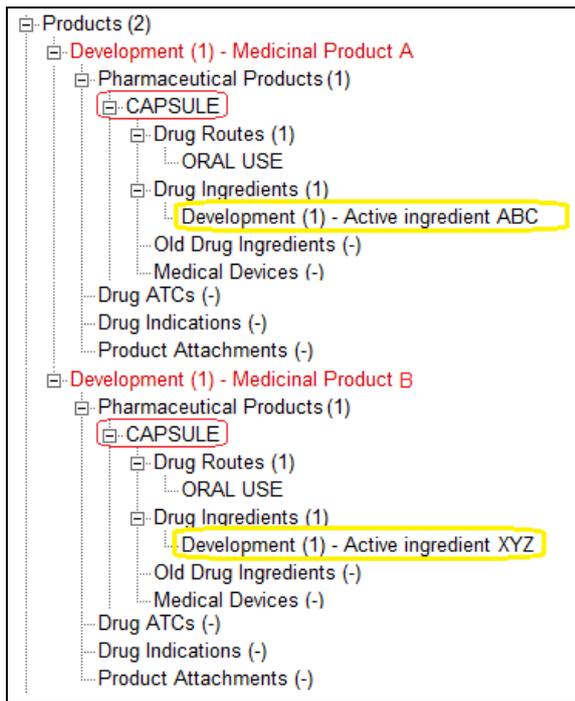
"Medicinal product A" is administered to the patient as a capsule containing 50 mg of active ingredient ABC and as a film-coated tablet containing 25 mg of active ingredient XYZ. This medicinal product should be submitted to the XEVMPD as follows:



If the two studied pharmaceutical forms are NOT part of the same medicinal product package, then two development medicinal products, each referencing one pharmaceutical product and its respective pharmaceutical form, should be submitted in the XEVMPD. Two EV Codes will be assigned to these development medicinal products.

EXAMPLE 2:

"Medicinal product A" is administered to the patient as a capsule containing 50 mg of active ingredient ABC. "Medicinal product B" is administered to the patient as a capsule containing 25 mg of active ingredient XYZ. Both development products should be submitted to the XEVMPD as follows:



2.5. Submission of a DMP with the same pharmaceutical form and active ingredient studied in different strengths

Question: In our clinical trial, we are testing the same active ingredient (XYZ) in the same pharmaceutical form (tablet) in different concentrations (50 mg and 100 mg). How should we capture this in the XEVMPD? How many development products should we submit?

Answer: If an active substance is used in a clinical trial in the same pharmaceutical dose form with different strengths, separate development medicinal products should be submitted to the XEVMPD:

1. DMP 1 = tablet with 50 mg of the active ingredient XYZ
2. DMP 2 = tablet with 100 mg of the active ingredient XYZ

An EV Code will be assigned to each development medicinal product.

2.6. Submission of a DMP if the posology is different to the AMP

Question: We are a non-commercial sponsor and will run a clinical trial where the IMP is a medicinal product with marketing authorisation and where the posology described in the SmPC is one dose. The subjects of our clinical trial will receive a second dose of the medicinal product. The pharmaceutical dose form, active ingredient and the concentration of the IMP remain unchanged, the only change compared to SmPC is the posology. Should the medicinal product be entered in the XEVMPD as a development medicinal product?

Answer: Since the difference is only in the posology, and the pharmaceutical dose form, active ingredient and its concentration do not change, there is no need to enter the product in the XEVMPD as a DMP.

2.7. Bioequivalence trial DMP registration

Question: According to CT-3, the sponsor should provide, before completing the clinical trials application form, information on the IMP in the EudraVigilance medicinal product dictionary ('EVMPD').

Could you please confirm if this requirement is applicable for bioequivalence studies (in which the IMP is a generic of the reference medicinal product)?

Answer: The requirement you are referring to is applicable to all EU/EEA studies/trials that must be registered with EudraCT regardless of the scope of the trial. The information on the medicinal product must therefore be submitted to the XEVMPD as a development medicinal product, referencing the sponsor of the clinical trial.

3. Submission of sponsor information

Question: When entering information about our DMP in the XEVMPD via EVWEB, I am unable to find our sponsor organisation in the 'Sponsor' look up table. Our organisation is registered in Organisation Management Service (OMS). Can you please clarify why I am unable to find my organisation in the XEVMPD?

Answer: If an organisation is missing in the XEVMPD 'Sponsor' look-up list, the sponsor information should be submitted in the XEVMPD as new by the sponsor via an XEVPRM with operation type 'Insert'. Following a successful submission, an EV Code will be assigned to the sponsor organisation and provided to the sender organisation via an XEVPRM acknowledgement.

Please refer to your [XEVMPD Data-Entry Tool \(EVWEB\) User Manual](#) or the published [step-by-step document](#) for information on how to insert a sponsor organisation information in the XEVMPD.

4. Pharmaceutical product information

4.1. Pharmaceutical product form(s)

Question: The pharmaceutical form is a mandatory field in which only one EV Code can be referenced. However, we wonder about the data entry possibilities for a 'Powder for solution for injection'; is this only one pharmaceutical form?

Answer: In development medicinal product entries, only the administrable pharmaceutical form must be referenced. Where the pharmaceutical form must be reconstituted or diluted prior to administration, the pharmaceutical form should be specified as a single value. E.g. 'Powder for solution for injection' is a pharmaceutical form, for which the administrable pharmaceutical form is 'Solution for injection'.

Where the medicinal product contains a pharmaceutical form, for which no reconstitution, dilution or transformation is necessary prior to administration, the authorised pharmaceutical form should be specified as a single value. E.g., 'Film-coated tablet' is a pharmaceutical form, for which the administrable pharmaceutical form is 'Film-coated tablet'.

4.1.1. Pharmaceutical form not available in the XEVMPD

Question: How should a dose form be provided if the standard term for the pharmaceutical form, which we want to reference in our development product entry, is not available in the XEVMPD look-up table/controlled vocabulary list available on the ['Guidance documents' webpage](#)?

Answer: If a pharmaceutical form is not available in the XEVMPD as a standard term, the sponsor can reference a proposed term of the required pharmaceutical dose form, if available in the XEVMPD.

If no standard or proposed term of the required pharmaceutical form is available in the XEVMPD, the sponsor can insert the pharmaceutical form in the XEVMPD as proposed or development, based on the principles described in section 1.8.1. *Administrable pharmaceutical form (PP.1)* of the '*Guidance on the electronic submission of information on investigational medicinal products for human use in the eXtended EudraVigilance Medicinal Product Dictionary (XEVMPD)*' document available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

Please refer also to the ['eXtended EudraVigilance Medicinal Product Dictionary \(XEVMPD\) Data-Entry Tool \(EVWEB\) User Manual'](#) available on the [XEVMPD e-learning webpage](#) for related information on how to submit a pharmaceutical form in the XEVMPD using EVWEB.

4.2. Route(s) of administration

4.2.1. Route of administration (RoA) not available in the XEVMPD

Question: How should a RoA be provided if the standard term is not available in the XEVMPD look-up table/controlled vocabulary list available on the ['Guidance documents' webpage](#)?

Answer: If a RoA is not available in the XEVMPD as a standard term, the sponsor can reference a proposed term of the required RoA, if available in the XEVMPD.

If no standard or proposed term of the required route of administration is available in the XEVMPD, the sponsor can insert the RoA in the XEVMPD as proposed or development, based on the principles described in section 1.8.1.1. *Route of administration (PP.AR.1)* of the '*Guidance on the electronic submission of information on investigational medicinal products for human use in the eXtended*

EudraVigilance Medicinal Product Dictionary (XEVMPPD)' document available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

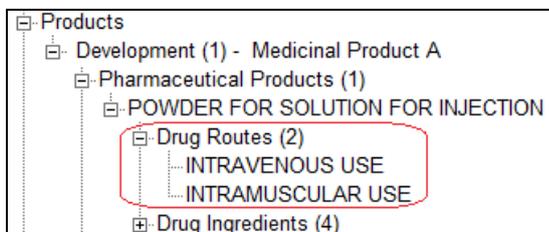
Please refer also to the "eXtended EudraVigilance Medicinal Product Dictionary (XEVMPPD) Data-Entry Tool (EVWEB) User Manual" available on the [XEVMPPD e-learning webpage](#), for related information on how to submit a route of administration in the XEVMPPD via EVWEB.

4.2.2. Submission of multiple routes of administration within one pharmaceutical product

Question: According to the technical specification, the route of administration is a mandatory field in which only one entry can be made. What if a pharmaceutical product can be administered in two different ways?

Answer: The 'route of administration' section is a repeatable section in EVWEB; several routes of administrations can therefore be referenced in one pharmaceutical product entry. Where possible, the standard term should be used.

EXAMPLE:



4.3. Substance

4.3.1. Substance EV Code

Question: We are going to conduct a clinical trial and we need to complete the clinical trial application using online EudraCT form. How/where can we obtain the substance EV Code?

Answer: A list of approved substance names available in the XEVMPPD is published in the ['XEVMPPD substances' Excel list](#) on the ['Guidance documents' webpage](#). The published vocabulary list contains substances available at the time of publication. The EudraVigilance look-up table in EVWEB contains the most up-to-date data, as substance information is submitted to the XEVMPPD on daily basis.

Sponsors registered with EudraVigilance for the reporting of medicinal product information in the XEVMPPD can also access XEVMPPD via EVWEB and perform search on approved substance names and/or their translations and synonyms.

If substance information is missing in the XEVMPPD, the addition of the substance information should be requested using the process described in the ['Changes to some business rules of the eXtended EudraVigilance Medicinal Product Dictionary \(XEVMPPD\): Submission of substance information' document](#) available on the ['Guidance documents' webpage](#).

4.3.2. Substance EV Code not available

Question: We need to reference in our DMP a substance name that is not available in the XEVMPD. We tried to submit the substance information via an XEVPRM but received a negative XEVPRM acknowledgement. How can we insert a new substance in the XEVMPD?

Answer: Substance information is entered in the XEVMPD by the Substance Management Service (SMS) team. To request a new substance information to be inserted in the XEVMPD or to update information within an existing substance record, please follow the process described in section 8. *Initial submission of substance information of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document*, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#) or refer to the information available in the ['Changes to some business rules of the eXtended EudraVigilance Medicinal Product Dictionary \(XEVMPD\): Submission of substance information' document](#) available on the ['Guidance documents' webpage](#).

4.3.3. Description of strength of excipient(s)

Question: Does the strength of the excipients need to be entered or is it enough to only specify the excipients?

Answer: It is not mandatory to enter excipients for a development product. If the sponsor decides to do so, the amount of the excipient is not mandatory and therefore does not need to be provided. For active ingredients and adjuvants, the amount must be provided.

5. Submission of placebos

Question: Is it required from sponsors to submit information on placebos to the XEVMPD?

Answer: As stated in section D.8 Reporting of the ['Placebo of the Note for guidance – EudraVigilance Human – Processing of safety messages and individual case safety reports \(ICSRs\)' document](#):

" If relevant, placebos can be reported in the ICSRs in the following data elements:

- *medicinalproduct (ICH E2B(R2) B.4.k.2.1)*
- *patientdrugname (ICH E2B(R2) B.1.8a)*
- *parentdrugname (ICH E2B(R2) B.1.10.8a)*

Placebos reported in ICSRs are recoded against the entry 'PLACEBO' in the Product Index Database. Placebos do not need to be entered in EVMPD. However, when a placebo is reported in the data element medicinalproduct (ICH E2B(R2) B.4.k.2.1) as 'SUSPECT' or 'INTERACTING', the suspected ingredient(s) of the placebo has/have to be specified in the data element activesubstancename (ICH E2B(R2) B.4.k.2.2).

The possibility to report placebos is applicable to both EVPM and EVCTM.

See Detailed Guidance ENTR/CT 318 for the managing of SUSARs associated with placebo

Furthermore, regarding the reporting of cases of adverse reaction in clinical trials, as mentioned in the [Detailed guidance on the collection, verification and presentation of adverse event/reaction reports arising from clinical trials on medicinal products for human use \(@'CT-3'\) \(2011/C 172/01\)](#), events associated to placebo should not be reported unless one of the ingredients of the placebo is suspected to have induced the reaction: *"Events associated with placebo will usually not satisfy the criteria for a SUSAR and therefore for expedited reporting. However, where SUSARs are associated with placebo (e.g. reaction due to an excipient or impurity), the Sponsor should report such cases". The suspected ingredient of the placebo should be specified in the ICH E2B(R2) data element B.4.k.2.2. or E2B(R3) G.k.2.3.r.1 'Active substance name'.*

In conclusion, sponsors do not need to submit information on placebo to the XEVMPD. Only information on the active ingredient(s) of the investigational medicinal product is required.

6. Visibility/confidentiality of data entered in the XEVMPD as 'development'

Question: Are data entered in the XEVMPD as 'development' considered confidential or will they be visible to other XEVMPD users?

Answer: Data entered in the XEVMPD as 'development' are visible in EVWEB to the users registered under the owner organisation profile [i.e. the HQ organisation and its affiliate(s) that submitted and therefore owns the data in the XEVMPD], registered users from the EMA and registered users from the national competent authorities (NCAs). Even if such data is validated (i.e. the 'Product validity' field displays 'Valid') by the EMA, the development data cannot be accessed and/or visible to other users via EVWEB. For further information please refer to section *XEVMPD data access policy* of the '*Extended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials*' document, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

7. Printed product information

Question: Is it mandatory to add an attachment to our development medicinal product entry in the XEVMPD?

Answer: No, it is optional to insert and reference a printed product information (PPI) document in a DMP.

7.1. Content of PPI

Question: If we decide to attach the PPI for our development medicinal product, which document shall we provide?

Answer: A copy of the Investigator's Brochure can be provided.

7.2. Confidentiality of PPI

Question: If we submit our Investigator's brochure to the XEVMPD, will it be visible to all XEVMPD users or to the public?

Answer: No. The investigator's brochure attached to a development medicinal product entry will only be visible in EVWEB to registered users from the owner organisation, the EMA and NCAs.

7.3. Format of PPI

Question: In which format shall the PPI be provided?

Answer: The expected format of the provided IB is PDF (1), .DOC (2) or .DOCX (3).

Please refer to section 7. *Initial submission of an attachment of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document*, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#), for related information.

7.3.1. Accepted PDF files

Question: Will the EMA accept any kind of PDF file as a PPI or is there a limitation to a specific version of PDF?

Answer: PDF file version 1.4 or 1.7 should be used. Sponsors are advised not to send scanned PDF documents; 'genuine' PDF documents (files converted to PDF) should be provided.

7.4. PPI naming conventions and a link between XEVPRM and attachment(s)

Question: How will the attachment be stored and how can the link between XEVPRM and attachment be maintained? How should the PPI attachment be named?

Answer: The requirements for the submission of the attachment are reflected the section 7. *Initial submission of an attachment of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document*, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

The file name for the attachment can be assigned by the sponsor; there is no naming convention to be followed.

The link between the product information and its PPI attachment (IB) is maintained via a PPI EV Code. At least one of those products that will refer to the investigator's brochure should also be present in the same XEVPRM.

8. ATC Codes

8.1. Not assigned or not applicable ATC Code

Question: When creating an XEVPRM with development product data, what shall we insert in a product if the ATC Code is not assigned or not available?

Answer: The provision of an ATC Code for a development product is optional.

However, should the sponsor wish to enter an ATC Code, the principles described in section 1.8. *ATC of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document*, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#) should be followed.

8.2. ATC Code not available in the XEVMPD

Question: An ATC Code already published by the WHO is not yet available in the XEVMPD 'ATC Code' look-up list. How can we reference this ATC Code in our product entry?

Answer: If the ATC Code for your medicinal product is not yet available in the look-up table available in the XEVMPD but has been approved and published by the WHO, the ATC code should be submitted by the sponsor as a 'proposed term' via an XEVPRM with operation type 'Insert'.

8.3. Required levels of ATC Codes

Question: Is the provision of a three level ATC Code sufficient for the submission in XEVMPD? In some cases, an ATC Code might not be available. What should be provided in these cases if we chose to enter an ATC Code for our DMP?

Answer: All five levels of the ATC Code can be used. For related information please refer to section 1.8. *ATC of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document*, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

8.4. Multiple ATC Codes in one XEVMPD product entry

Question: What should we do if multiple ATC codes are applicable for one product and wish to reference these in our DMP entry?

Answer: The ATC code section is repeatable in the XEVPRM schema. You can reference several ATC Codes for one product entry in the XEVMPD.

9. Controlled vocabularies (CVs)

9.1. Availability of controlled vocabularies

Question: Where can we find the list of controlled vocabularies to support XEVPRM submissions?

Answer: The controlled vocabularies are published on the '[Guidance documents](#)' webpage, in the section 'Controlled Vocabularies'.

- A copy of MedDRA needs to be obtained from the MedDRA MSSO <http://www.meddramsso.com/>.
- ATC Codes need be obtained from the WHO Collaborating Centre for Drug Statistics Methodology http://www.whocc.no/atc_ddd_index/.
- Pharmaceutical forms and routes of administration are based on the standard terms published by the European Directorate for the Quality of Medicines & HealthCare <http://www.edqm.eu>.
- The Unified Code for Units of Measure (UCUM) is maintained by the Regenstrief institute <http://unitsofmeasure.org/>.
- The official list of ISO 3166-1 country codes is maintained by the International Organization for Standardization (ISO) and can accessed using the following link http://www.iso.org/iso/country_codes/iso_3166_code_lists/country_names_and_code_elements.htm.
- The official list of ISO 639-1:2002 codes for the representation of names of languages: Part 1: Alpha-2 code is maintained by the [International Organization for Standardization \(ISO\)](#).

9.2. Format of controlled vocabulary lists published by the EMA

Question: The CV lists are currently published in an Excel format. Could they be provided in a different format?

Answer: The controlled vocabularies maintained by the Agency are published only in Excel format. However, sponsors can convert the CVs from Excel to the most suitable format to best suit their needs.

10. MedDRA

Question: Is it mandatory to provide indications for our DMP entries in XEVMPD?

Answer: The provision of indications for a development product is optional.

If the sponsor wishes to provide this information, the principles described in section 1.10. *Product indications (DP.INDs)* of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#) should be followed.

See also the ['Coding of indications in the eXtended EudraVigilance Medicinal Product Dictionary \(XEVMPD\)' document](#) available on the ['Guidance documents' webpage](#) for related information.

10.1. Consistency of MedDRA coding

Question: How will consistency of MedDRA coding be established across industry and within XEVMPD? What granularity of coding is required for utility of MedDRA codes?

Answer: Please refer to section 1.10. *Product indications (DP.INDs)* of the 'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials' document, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#), for the required information.

10.2. Multiple terms in MedDRA

Question: There are many indications for products registered where qualifiers cannot be reflected by selecting one single term in MedDRA. Are multiple terms permitted to cover the medical concept of the indication? Or if there is no direct match and the nearest approaching term must be selected or creation of a new term must be requested at MSSO.

Example: Therapeutic Indication: newly diagnosed Philadelphia chromosome positive chronic myeloid leukemia (Ph+CML) MedDRA 14.1 LLT name: LLT-Philadelphia chromosome positive and HLT-Leukaemias chronic myeloid or LLT-Chronic myeloid leukemia only

Issue: Multiple terms to code an indication is not allowed (at least for AE reporting) so here only the LLT-Chronic myeloid leukemia would be coded.

Answer: Multiple terms can be used to code the medical concepts of indication(s) both at the level of the underlying disease where applicable and the signs, symptoms or intended effects. The use of qualifiers will be possible with the implementation of the ISO IDMP standards.

EXAMPLE:

'Treatment of hyperammonaemia due to N-acetylglutamate synthase deficiency'

Terms coded in MedDRA:

Hyperammonaemia (LLT=10020575)

Inborn error of metabolism LLT=10062018)

Updated in version 14 to LLT/PT

N-Acetylglutamate synthase deficiency (LLT= 10071092)

See also the ['Coding of indications in the eXtended EudraVigilance Medicinal Product Dictionary \(XEVMPD\)' document](#) available on the ['Guidance documents' webpage](#) for further information.

10.3. MedDRA version

Question: Which MedDRA version should be used for coding?

Answer: Please refer to section *1.10.1. MedDRA version (DP.IND.1)* of the *'eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials'* document, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#), for the required information.

11. Maintenance of data

11.1. Maintenance of development product records

Question: Which of the operation types currently available in the EVWEB can we use to modify our development product entries? Can anybody modify our data entries submitted to the XEVMPD using EVWEB?

Answer: The medicinal product information provided in the XEVMPD via an XEVPRM is "owned" by the headquarter (HQ) of the organisation that submitted that information in the XEVMPD. Maintenance related operations UPDATE (2) and NULLIFICATION (4) can be performed on your data via EVWEB by the users registered under the HQ and and/or its affiliate(s) profiles and/or users registered under the EMA EV profile.

See section 3.I.a.5 - *Data Operations and Ownership* of [Chapter 3.I: Extended EudraVigilance product report message \(XEVPRM\) technical specifications](#) and *Operation types that can be performed by sponsors in the XEVMPD* of the '*eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials*' document, available on the '[Guidance for clinical trial sponsors: data submission on investigational medicines](#)' webpage, for related information.

11.2. Use of operation type 'Nullify'

Question: When should 'Nullify' operation type be used?

Answer: An XEVMPD entity, which is duplicated (i.e. multiple EV Codes are assigned to the same entity) or erroneously submitted (e.g. the entity was not supposed to be submitted), can be flagged as 'nullified' by the owner organisation or the EMA by submitting an XEVPRM with the operation type 'Nullification' (4).

Sponsors may nullify XEVMPD entities, which their organisation owns in the XEVMPD, as per information available in section 9.5. *Nullification of duplicated or obsolete information* of the '*eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials*' document available on the '[Guidance for clinical trial sponsors: data submission on investigational medicines](#)' webpage.

11.3. Use of operation type 'Update'

Question 1: When should we use operation type 'Update'?

Answer: Operation type 'Update' (2) should be used to amend previously submitted information. Using the operation type 'Update', the XEVPRM will overwrite and replace, once submitted, the existing data in the system.

Question 2: If we are to submit an update of an existing entry to the XEVMPD, do we have to submit the whole entry within the XEVPRM with all its related data (all single and all repeatable elements/fields, which are already populated with values at the XEVMPD) or is it accepted to only include the updated and newly added data elements?

Answer: For the operation type 'Update' (2) all information on the medicinal product/organisation or any other updatable entity should be provided in the XEVPRM based on the latest status.

11.4. Nullification of product information

Question: How should we reflect in the XEVMPD that the activities for our IMP, registered in the XEVMPD as development medicinal product, will no longer be performed with this IMP? Should the product be withdrawn or nullified in the XEVMPD?

Answer: It is not possible to 'withdraw' a development product entity, there is no such operation type applicable for a DMP. DMPs can only be nullified if they were submitted by mistake (e.g. as a duplicated product, from the wrong sponsor organisation, they were never supposed to be submitted etc.).

The product entry should remain in the XEVMPD as it is used to support the recoding of any received Suspected unexpected serious adverse reactions reports (SUSARs).

11.5. Transfer of a DMP to another sponsor

Question: We have a development product in XEVMPD for which we are the sponsor. This product has been transferred to another sponsor and they will perform clinical trials later this year. Do we have any action to take on our existing development product information in XEVMPD, or does the new sponsor just create a new entry for the same product?

Answer: If an existing development product was transferred to a new sponsor, then the new sponsor should insert a new development product in the XEVMPD; a new DMP EV Code will be assigned.

Please refer to section 9.3. *Transfer of DMP to a new sponsor* of the '*eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials*' document, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#), for further information.

12. Registration with EudraVigilance

12.1. How to register with EudraVigilance

Question: Where do we find information on how to register with EudraVigilance?

Answer: Please see the ['EudraVigilance: how to register' webpage](#). A basic overview is also provided in section *Pre-submission requirements* of the '*eXtended EudraVigilance Medicinal Product Report (XEVPRM) user guidance for sponsors of clinical trials*' document, available on the ['Guidance for clinical trial sponsors: data submission on investigational medicines' webpage](#).

12.2. Registrations of third-party service providers on behalf of sponsors

Question: Is it possible for another organisation to submit development product information in the XEVMPD on behalf of a sponsor?

Answer: Yes if the organisation is registered as a third-party service provider. Please refer to section [IT vendors and third-party service providers](#) on the ['EudraVigilance: how to register' webpage](#) and the ['EudraVigilance Registration Frequently Asked Questions' document](#) for further information.

13. Access to EVWEB

Question: I am a user registered under the HQ profile of a sponsor organisation and I have my login credentials to access the XEVMPD production environment. However, when I try to access it, I receive an error message stating "Unable to launch application". Can you please advise what I need to do to access EVWEB?

Answer: Please refer to the information available on the ['How to submit information' webpage](#) providing information on steps to take to access EVWEB.

14. Training

14.1. XEVMPD training for sponsors

Question: Is it necessary to be trained on how to use the XEVMPD?

Answer: Yes. To start the electronic submission of medicinal product information to the XEVMPD, MAH and sponsors organisations need to register with the Agency. This is to ensure that proper privacy and security measures are in place and that the principles of integrity, accountability and availability of data are adhered to.

Registration is based on the existing EudraVigilance (EV) registration process in operation since the implementation of the electronic transmission of individual case safety reports (ICSRs) and the establishment of the XEVMPD.

At least one user from each MAH or sponsor organisation must receive training; this is to ensure the quality of data submitted to the XEVMPD. A 'Notification of successful completion of the XEVMPD training' is requested from one user as part of the organisation's EV registration process.

Detailed information on the available XEVMPD training courses can be found on the ['Extended EudraVigilance medicinal product dictionary \(XEVMPD\) training' webpage](#); dedicated training for users from sponsor organisation is available as a face-to-face (currently provided virtually) training course and as an e-learning training course.