Clinical Trials Regulation

Why, when, what and how ?

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DG SANTE B4

Medical products: quality, safety, innovation

Content

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Under the Clinical Trial Directive

- The **number of applications** for authorisation to clinical trials in the EU **decreased by 25%** between 2007 and 2011
- The **costs** of conducting clinical trials **increased**
- And the **average waiting time** for clinical trials **increased by 90%** (152 days) (Tenti et al, 2018)

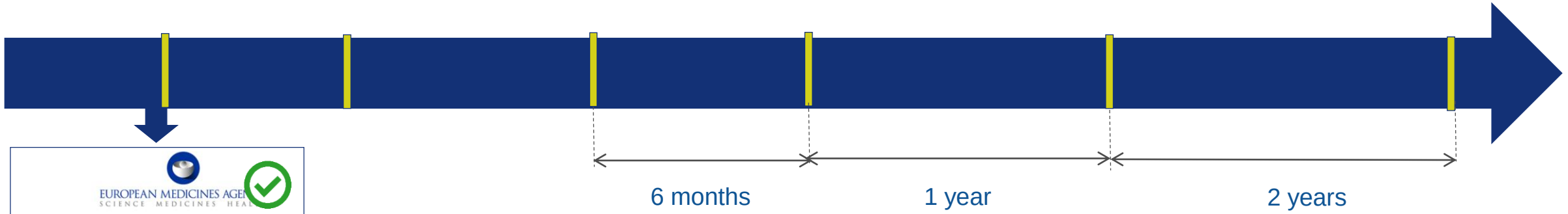
In 2012, the European Commission proposed a new Regulation

Purpose of the CTR

- To make Europe **competitive in research** considering the decline in CTs and number of patients the past years by
  - **harmonization of the approval process** for clinical trials with maximum timelines
  - Close **coordination between Member States** and support the conduct of **multi-country trials** (including countries with fewer applications at present)
  - **minimizing the scope for regulatory autonomy** at national level
  - ensuring the **production of reliable and robust**, high-level scientific data, **ensuring patient safety**
  - **increased transparency**

Timeline for the CTR

EU Portal and database audit	Endorse-ment of audit by EMA MB	Notice in Official Journal	CTR applicable	-> All trials need to be submitted under CTR rules	EC 2001/20 stops applying (end of transition period)
Q1 2021	21/04/2021	*31/07/2021*	*31/01/2022*	*31/01/2023*	*31/01/2025*




EUROPEAN MEDICINES AGE
SCIENCE MEDICINES HEA

25 March 2015
EMA/42176/2014 Rev. 1, Corr.*
Compliance and Inspections

Functional specifications for the EU portal and EU database to be audited

- EMA MB endorsement of full functionality is a condition for the publication of the notice in the official journal and was confirmed on 21/04/2021. 6 months later, the CTR starts to apply

- The *expected* date of application is January 31, 2022 - the actual date depends on the publication of the Notice in the OJ

European Commission

New concepts in the CTR

- **Adapted definitions** on clinical trial, introducing low-intervention clinical trials
- Streamlined **submission and review process via EU Portal and Database** (EUPD) including a **tacit approval** system
- **Single decision** per Member State (=/ NCA + Ethics Committee)
- **Coordinated assessment** with one **Reporting Member State**, proposed by the sponsor and **involvement of all Member States Concerned**

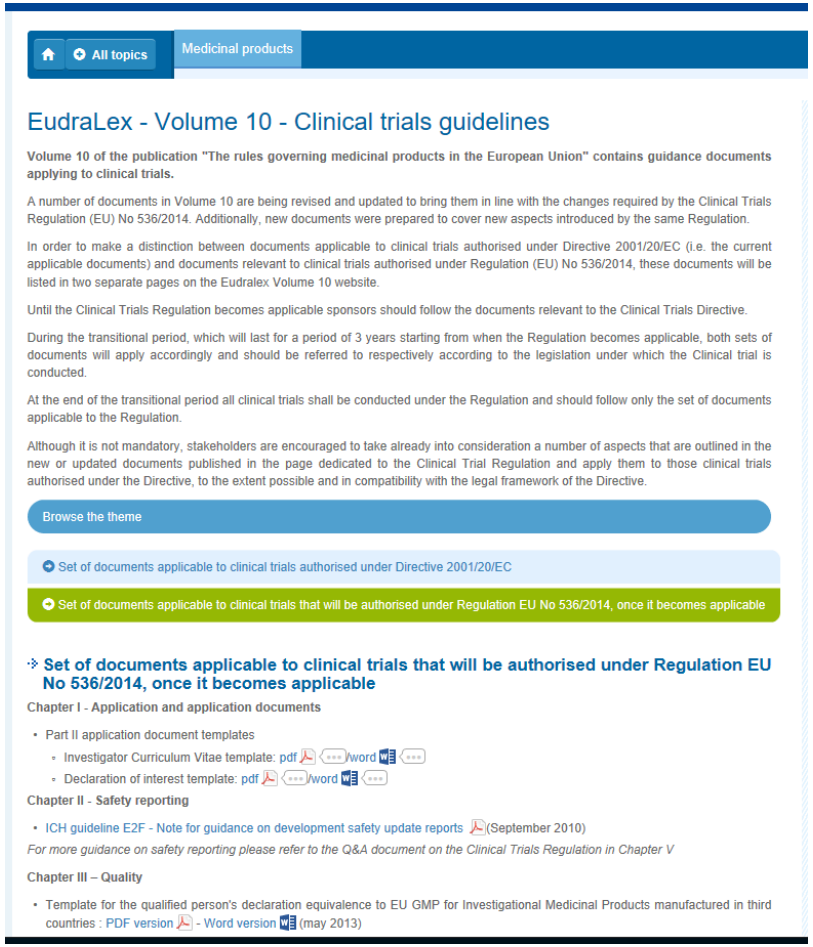
New concepts in the CTR (2)

- Strengthened patients' protection and **informed consent,** specific modalities on **cluster trials**
- Strengthened **independence** of persons **validating** and/or **assessing** the application
- **Coordinated safety assessment** through work-sharing and **streamlined safety reporting**
- **More transparency** on the conduct and results of the clinical trial
- The possibility for the **Commission to conduct controls** in Member States and third countries on the CT systems

European Commission

Guidance documents, training

- DG SANTE (CTEG) guidance documents: EudraLex-Volume 10
- Collaboration with EMA and CTFG
- Separately for the Directive 2001/20/EC and the Regulation (EU) No 536/2014



https://ec.europa.eu/health/documents/eudralex/vol-10_en)

European Commission

Clinical Trials Expert Group (CTEG)

- **Type:** non-public meeting, informal group
- **Organizer and chair:** DG SANTE, European Commission
- **Attendees:** 1 representative from **NCA and EC** per MS, EMA observer.
- **Meeting:** at the moment, 4 times/year, with thematic *ad hoc* meetings as necessary
- **Purpose CT EG**:
  - To provide the COM with advice and expertise on clinical trials in relation to the preparation and implementation of legislation and policy initiatives.
  - Draw up and adopt guidelines and documents related to the transition from the CTD to the CTR and to the implementation of the Regulation

Clinical Trials Coordination and Advisory Group (CTAG)

- **Type:** non-public meeting, formal group established by the CTR art. 85
- **Organizer and chair:** DG SANTE, European Commission
- **Attendees:** 1 representative per MS (national contact point), EMA.
- **Meetings:** regular and *ad hoc* when necessary
- **Purpose CTAG**
  - support the exchange of information on the experience acquired with regard to the implementation of this Regulation
  - assist the Commission in providing the support on coordinated safety assessment
  - prepare recommendations on criteria regarding the selection of a RMS

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National contact points

- Designated by the Member States (one/MS)
- List is public: https://ec.europa.eu/health/sites/health/files/files/clinicaltrials/contact-points_clinical-trials_reg-536-2014.pdf
- Function:
  - Facilitate procedures in initial trial applications and applications for substantial modifications
  - Members of the CTAG

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Additional collaborations

- Training: joint COM/EMA/CTFG-HMA trainings to sponsors and authorities
- CTIS development: coordinated jointly by EMA, COM with MS involvement
- IA for coordinated safety assessment: EMA/CTFG/COM drafting team (joint CTEG/CTFG review)
- Joint guidelines e.g.:
  - Joint COVID-19/CT Guidance
  - General QnA for CTR (safety chapter by CTFG)
  - Guideline to interface IVDR/CTR (in progress, driven by CTFG)

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THANK YOU FOR YOUR ATTENTION

DG SANTE B4 Clinical Trial Team

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