EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

Disseminating EMA information

Patients and Consumers Working Party (PCWP) and Healthcare Professionals Working Group (HCP WG) Joint Meeting

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Communications Sector

Overview

- How we disseminate our communication documents
- Results of survey on our press releases and Q&As
- Results of an audit of syndication of our communications on your websites
- What we would like to do in the future

How we disseminate news, press releases and Q&As

- EMA website (around 165,000 unique visitors monthly: 500,000 visits)
- Publish through Twitter account (more than 3,500 followers)
- Publish on 'News and events' RSS feed (more than 6,000 subscribers)
- Press distribution list: core list of more than 300 journalists (newspapers, magazines, broadcast, special interest, trade, business) and extended press list of over 2,300
- Send to patient representative groups
- Send to healthcare professional representative groups
- Send to national competent authorities
- Include in human medicines highlights newsletter


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European Medicines Agency advises doctors treating patients with nosocomial pneumonia with Doribax
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22/06/2012
European Medicines Agency advises doctors treating patients with nosocomial pneumonia with Doribax
Current dosing recommendations may not be enough for serious cases; no change in advice for all other approved indications
The European Medicines Agency has given new advice for the treatment of patients with nosocomial pneumonia, also known as hospital-acquired pneumonia, with Doribax (doripenem). A review of available data raises concerns that the currently approved dose of Doribax of 500mg every 8 hours may not be sufficient to treat all patients with nosocomial pneumonia, including ventilator-associated pneumonia.
Nosocomial pneumonia is caused by bacterial infection, and Doribax is one of a limited number of medicines available to treat this life-threatening disease.
For the treatment of patients with augmented renal clearance or with infections with non-fermenting gram-negative pathogens, the Agency's Committee for Medicinal Products for Human Use (CHMP) is recommending that doctors double the dose to 1g every 8 hours. The Committee also advises doctors that a longer treatment period (10-14 days) is required in patients with nosocomial pneumonia, including ventilator-associated pneumonia.
Doctors should exercise particular caution in patients for whom non-fermenting gram-negative pathogens such as Pseudomonas aeruginosa and Acinetobacter are suspected or confirmed as the cause of infection. In some of these patients, doctors should consider initiating concomitant treatment with an aminoglycoside antibiotic.
Related information
Doribax: EPAR
Questions and answers on the review of Doribax (doripenem) (22/06/2012)
Doribax: Product information as approved by the CHMP on 21 June 2012, pending endorsement by the European Commission (22/06/2012)
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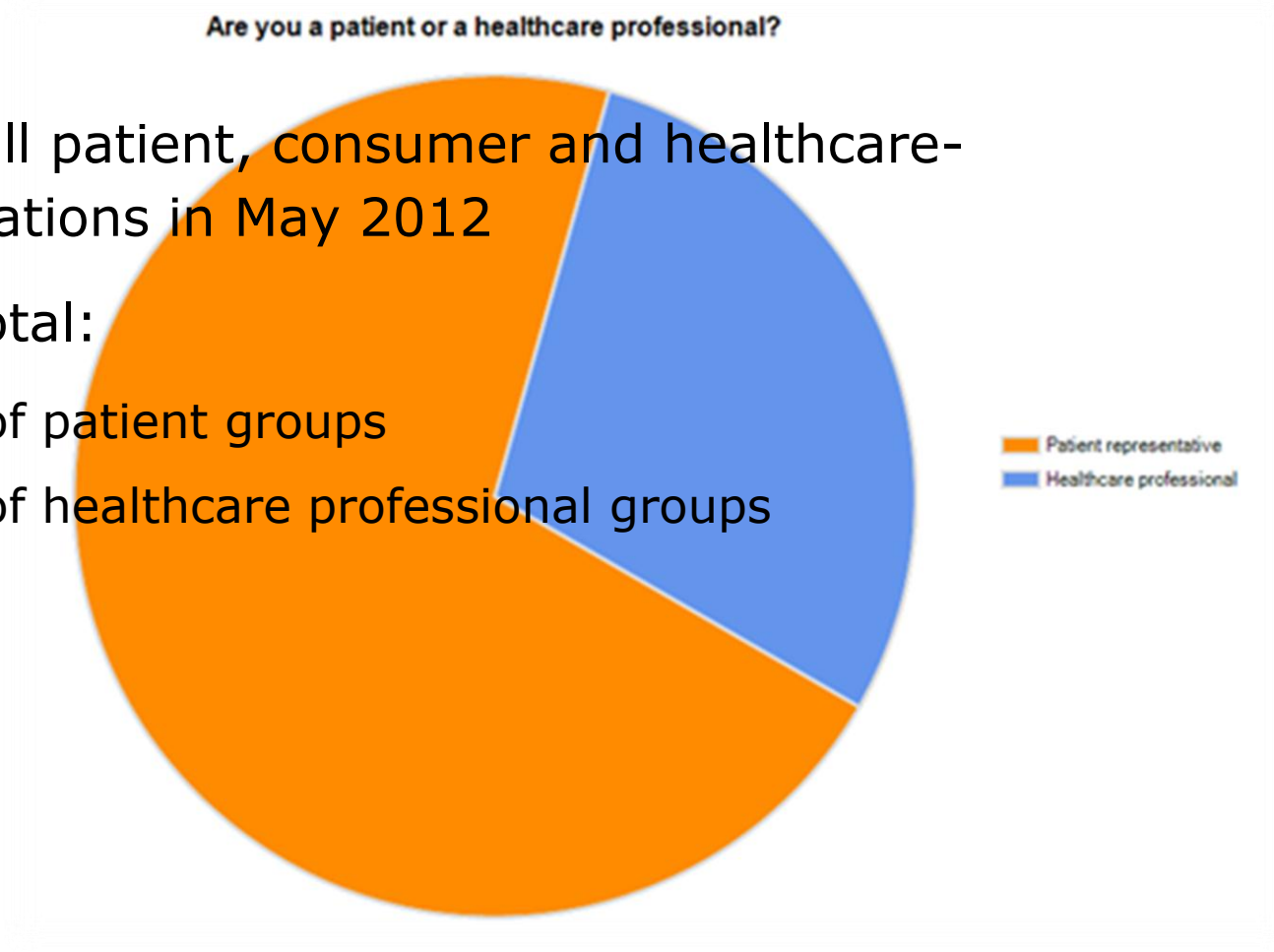
Survey on our press releases and Q&As

Survey sent out to all patient, consumer and healthcare-professional organisations in May 2012

38 respondents in total:

- 27 representatives of patient groups
- 11 representatives of healthcare professional groups



What you think about our press releases and Q&As

33 organisations (87%) think that press releases and Q&As are written in **appropriate language**

33 (89%) consider the information to be **sufficiently detailed**

34 (92%) find the instructions for patients and healthcare providers contained in these documents **sufficiently clear**

30 (81%) are content with the information provided on **benefits and risks** of the medicine

What you think about our press releases and Q&As

Some comments:

- *Too much medical terminology, too technical*
- *Information only available in English*
- *Sometimes too much emphasis on benefits, too little on risks*
- *Include reference to further information where possible*
- *Sometimes clearer instructions needed*
- *More details, particularly regarding the elderly*
- *Statistical information needs translating into individual risk*

What you think about our press releases and Q&As

Your proposals for improvement:

- *Better links to background information and more information*
- *Better customisation options to select relevant information*
- *Format should allow easy transfer of data*
- *Balanced approach to information (covering both benefits and harms)*
- *Information in national languages.*
- *Itemised search function, dated archive*

What you do with the information

10 organisations (27%) have never disseminated information to members, because:

- It’s not relevant for your members
- You don’t have the resources to do it
- The format makes dissemination difficult
- It is not clear who in your organisation receives the information

How you disseminate our information

8% through social media channels

30% publish EMA press releases or Q&As on your website

43% link to the EMA press release or Q&A on your website

facebook

Review of PCWP member websites

- In March 2012 we carried out a high-level review of the websites of the organisations represented in the PCWP
- PCWP websites are a key channel for reaching patients – we wanted to understand how we were being referenced
- Some websites referenced the Agency a lot, described our role, linked to key news, some did not, 7 cases where no mention of EMA/EMEA
- We would like to work together to ensure that we reference Agency information to its full potential

Next steps

- Provide you with the audit document so you can see where the main issues are on each website
- Provide each organisation with a list of relevant information that they could link to from their websites: special topic pages, therapeutic area pages, EPAR searches etc.
- Create links with the web editors at your organisation so we can directly provide interesting content to them as it appears
- Work on syndication initiatives to provide content such as medicine information direct to your website, for example

What we would like to do in the future

Continue to listen to feedback and improve our outputs

More audiovisual content

Social media:

- Increase activity on Twitter
- Investigate using other channels (Facebook, LinkedIn, Google+ etc.)

Conclusions

In general, you are **satisfied** with our outputs, but there is room for improvement

We need you to help us get our information and messages out to patients, consumers and healthcare professionals

We are looking at **increasing our outputs** and **engaging more** with patients, consumers and healthcare professionals over the coming years