EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

English version labeling review

Overview of the new process for initial MAAs and data from two years experience

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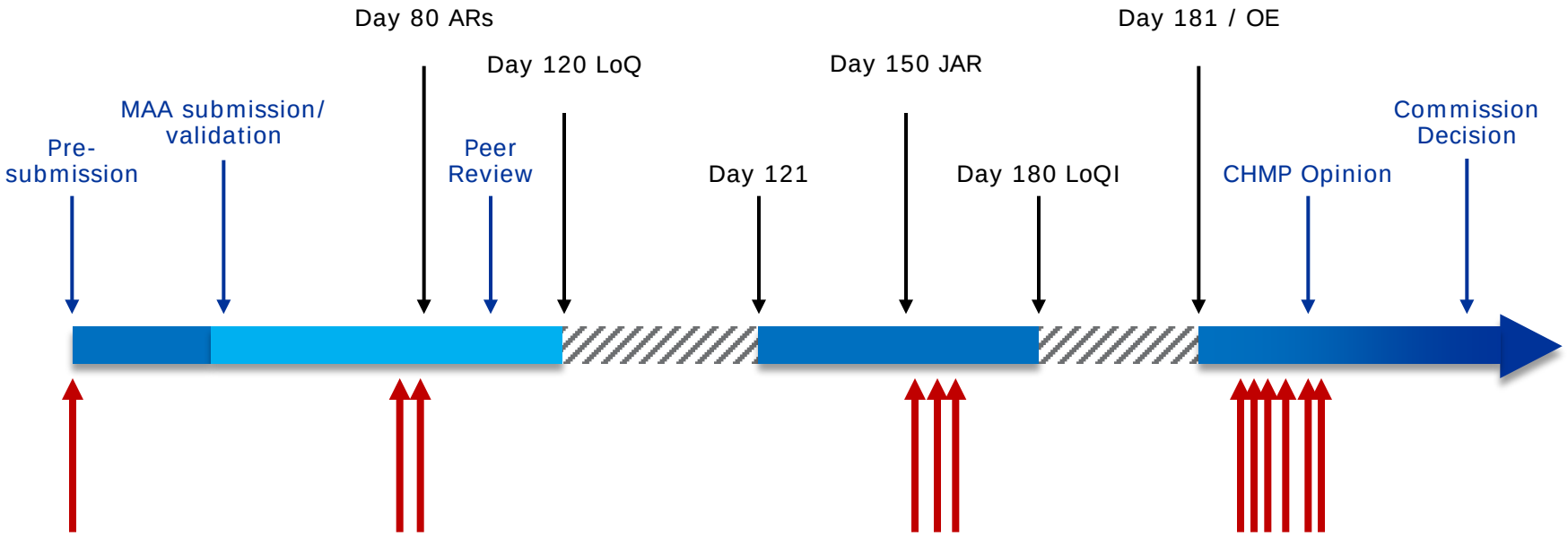
Contents

Executive summary

- As part of the improvement work the Agency undertook in 2013-14, the process behind the review of the Product Information, as a subset of the initial MA process, was also carefully looked at, and need for improvement was identified.

2. Initial Reflection of the ‘old’ Process

Process before revision



Room for improvement (a few examples)
Feedback from different forums

QRD group

Issues:

Dispersed comments

- Assessors' and EMA's comments on PI are handled separately
- The different reviews (assessors, scientific committees, QRD, EMA) are not presented as a single-comprehensive output
- Not always clear on roles and responsibilities

Timing

- Timing issue and late finishing of SmPC (e.g. expression of strength, INN vs salt etc)

SmPC AG

...some more issues:

Consistency

- Lack of consistency within the same therapeutic area
- SmPC guideline and QRD templates not always followed
- Growing amount of information in SmPCs over time

Informal CHMP

SmPC vs labelling/PL

- Labelling/PL not always given the same level of attention as SmPC
- EMA's contribution in identifying potential of medication errors due to packaging -> sometimes overlooked

EC report

3. The Labeling Review

Optimised support to the assessment: change in the Agency's organisational structure

In September 2014, a dedicated team "Labeling Review & Standards" was created within the Evaluation division

Expected benefits:

- Strengthening focus on product information.
- Brings together existing resources dealing with the SmPC and related documents
- Strengthen collaboration with the therapeutic areas supporting the benefit/risk aspects, which need to be accurately reflected in the product information.
- to support scientific committees in achieving consistency and high quality of information.

Areas of change (1/2): Earlier identification and greater consistency

Pre-submission stage:

- Identify poorly compliant sections with the SmPC guideline
- Identify issues of inconsistencies across same class/ products authorised outside EU
- Identify QRD and packaging issues

Timing evaluation stage:

- D0 — D121 (1st phase of evaluation)
  - Initial PI check to be carried out by **D10** (ex-D110) – Focus on SmPC
  - Ensure compliance with current standards (QRD templates), consistency with SmPC guideline, highlight claims in need of further substantiation (evidence based)
- D121 — D210 (2nd phase of evaluation)
  - PI review by **D140** to better match the assessors workflow (D150 AR):
    - Follow-up on SmPC
    - Focus on package leaflet (after user testing) and on Annex II (PhVg activities)

Benefits for assessors / committees / patients & HCPs / industry / stakeholders:

- Evidence based PI
- Early flagging of PI issues into D80 AR => facilitate discussion ahead of opinion
- Avoid delay of opinions due to late PI issues
- Rationalisation of comments internally before sharing them with assessors
- Support the peer review of the PI
- Improve consistency:
  - Across therapeutic class
  - Between SmPC and Package Leaflet
  - Between assessors and committees
- Clear and integrated output for the applicant

Timing

Consistency

Day 10

- At this early stage main focus on SmPC and Labelling
- Based on proposed PI wording alone (naïve review)
- Follow-up on any PI issues raised during pre-submission meetings

- Is the information clear, relevant and in line with agreed terminologies/standards?
- Is the information consistent
  - with SmPC guideline & other guidelines/guidance as relevant?
  - across product/therapeutic class, pharmaceutical form, route of administrations?

Day 140

- Review of all parts of the product information
- Focus on
  - Follow-up on implementation of Day 120 PI comments
  - readability and clarity of information in the PL
  - consistency between SmPC and labelling/PL
  - consistency with SmPC guideline

Additional reviewers involved at this stage (in addition to EMA product team):

- QRD members (full PI)
- Patients organisation (package leaflet)
- EMA Medical writers (use of lay language)

Areas of change (2/2): Process simplification

Main changes

- One global set of comments on product information throughout
- EMA technical comments sent by D10 with the aim to be used by assessors as the basis of their scientific assessment
- Clear identification of author of comments (e.g. EMA comments, Rapporteur's comments, etc.) and all stakeholders to use track changes and commenting boxes

Benefits for assessors / committees / industry:

- Faster reconciliation of comments
- Only one version to be sent to the applicants/ avoid parallel documents
- Improve overall quality and facilitate applicant's response

Experience so far: May 2015 - May 2017

- A total of 196 new MAAs reviewed.
- Use of a single version of labeling comments at day 10: 99%
- Level of consolidation of EMA day 10 labeling comments by Rap: 95%
- Use of a single version of labeling comments at day 140: 99%
- Level of consolidation of EMA day 140 labeling comments by Rap: 95%

Level of implementation applicants: 95%

Final observations

- Very high compliance and implementation rates by assessors and applicants;
- Overall the quality of submitted product information has improved over the years;
- Still some issues with small pharma;
- Early identification of issues has helped timely resolution;
- Increased awareness from companies of the new system.

Thanks

Any questions?