Celebrating 20 years of the PCWP
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The first interactions of patients with EMA

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“Regulation” for registration (some statements*)

Medicines “Regulation” aims at protecting and promoting public health

Dangerous or ineffective (for their intended use) medicines should not be allowed into the market.

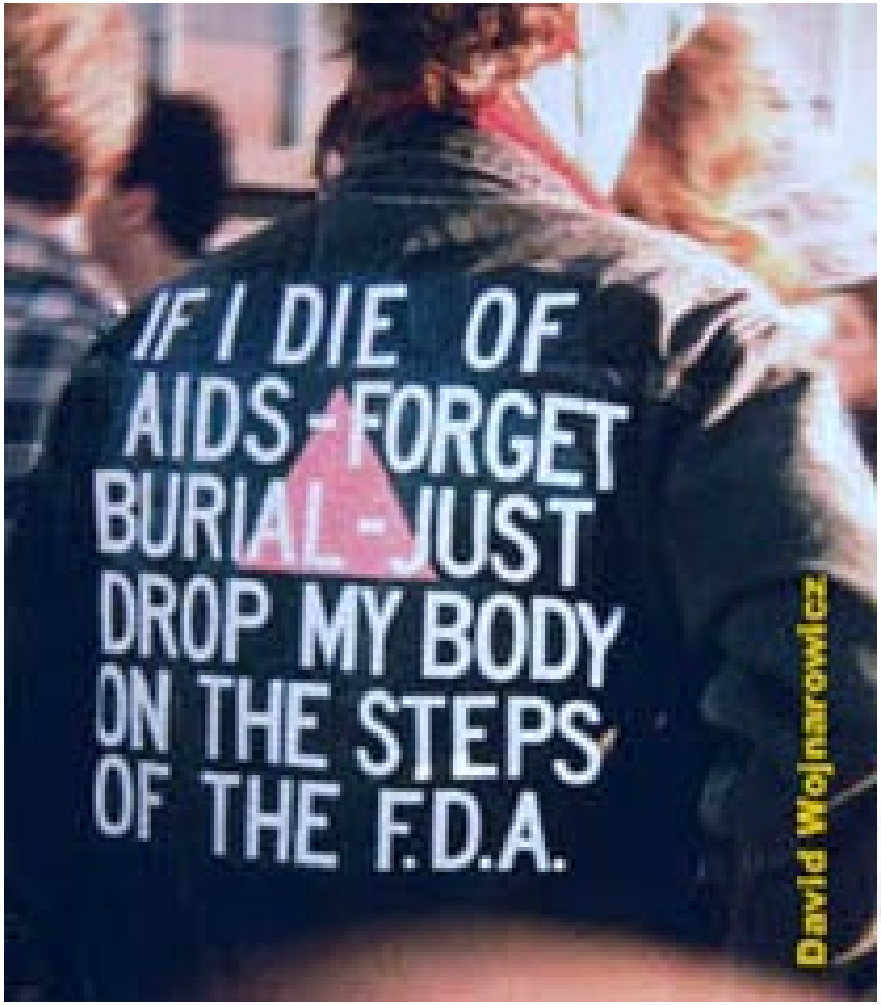
The **needed** evidence for useful drugs should be **timely** generated

Regulatory institutions are likely to perform their task better if they **interact with those affected**/ involved: society, health professionals, investigators, drug developers, **patients**…

But, in any case, the process should be **accountable and generally transparent**

And **should consider all the relevant available evidence** not just single pieces of it (however “pivotal” or “primary” they are declared).

* Disclaimer: The views are personal, not to be understood or quoted as made on behalf of or reflecting the position of the AEMPS, the EMA or any of their committees or working parties.



Some time **before even the EMEA existed there were "interactions" –not necessarily cooperative-** between patients' groups and medicines regulatory institutions.

Arguably, it all started with the emergence of AIDS (This historic picture is from 1988 [based on wojfound.org])

The creation 20 years ago of a standing common committee, the PCWP, at the EMA to constructively address shared issues is well worth celebrating

At the beginning of the EMA (then EMEA) the first (more or less formal) interactions of patients with the CHMP related also to AIDS ….