



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

6. Update on ACT EU and CTIS

Industry Standing Group (ISG) meeting, 21 September 2023

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Data Analytics and Methods Task Force (TDA)

An agency of the European Union





- ❖ ACT EU
- ❖ CTIS SAFe Agile
- ❖ CTIS Transparency rules



ACT EU

- ACT EU SG endorses priorities for 2023-2024
- Revised 2023-2024 workplan October 2023
- **CTR Collaborate initiative**, led by CTCG, to support optimised MS and NCA/ethics collaboration on clinical trial authorisation under CTR
- Creation of Priority action on **public health emergencies**
- Launch of **ACT EU website**: [Homepage \(europa.eu\)](https://europea.eu)
- **MSP kick-off meeting report** published: [MSP workshop meeting report](#)

Better, faster, optimised clinical trials

Improving the clinical trials environment in the European Union through harmonisation, innovation and collaboration with stakeholders.

The priority areas defined have been linked to relevant PAs to make sure each priority is successfully implemented:

CTR IMPLEMENTATION

CTR Collaborate initiative: Optimise and align CTR business processes within and across MSs

Transition trials

Reinforcement of CTIS improvements

NON-COMMERCIAL SPONSORS

Regulatory helpdesk: info point (phone/mail) to collect and address (directly or redirecting) all queries from non-commercial sponsors

MULTI-STAKEHOLDER PLATFORM

Establishment of advisory group

Interplay IVDR/MDR/CTR: Project initiated by EC and MS (CT & devices), to be linked to stakeholders through the MSP activity

SCIENTIFIC ADVICE

Pilot for convergence of advice for CTA and MA

PUBLIC HEALTH EMERGENCIES

Creation of PHE PA

Establishing PHE deliverables and link to other activities

PA1 – Mapping & Governance

PA2 – Successful implementation of CTR

PA3 – Multi-stakeholder platform

PA4 – Good clinical practice modernisation

PA5 – Clinical Trials data analytics

PA6 – Targeted communication campaign

PA7 – Scientific Advice

PA8 - Methodologies

PA9 – Clinical Trial Safety

PA10 – Training curriculum

PA11 (Newly established) – Public health emergencies



Mapping & governance: **CTR Collaborate initiative** to support optimised MS and NCA/ethics collaboration on clinical trial authorisation under CTR anchored to PA1.



CTR implementation: KPI revamp (Sept); CTR Survey (deadline 4 October); Transition CTs: [CTCG Best Practice Guide for sponsors of multinational clinical trials under CTD transitioned to CTR](#); CTIS Transparency rules (ISG 21 Sept; October MB)



Multistakeholder platform: creation of the MSP Advisory Group, call for nominations to stakeholder groups to be issued shortly.



GCP modernisation: ICH E6 (R3) commenting phase; [ACT EU PA04 - Multi-stakeholder Workshop on ICH E6 R3 - Public Consultation](#)



Data analytics workshop scheduled for January 2024



Communications: Launch of the ACT EU website 19 September 2023

<https://accelerating-clinical-trials.europa.eu/>



Scientific advice: Consolidated scientific advice procedure under development



Methodologies: [Multi-stakeholder methodology workshop](#) 23 November 2023



Safety monitoring: Annual safety event (JA EU4Health Safe-CT) – 15-16 January 2024



CT training curriculum – Developing training needs and gap analysis for regulators, academia, SMEs



CTIS SAFe Agile

2 Network Product Owners

CTIS: 1 Network PO

- Estimated effort: 0.5 to 0.7 FTE

CTIS BI: 1 Network PO

- Estimated effort: 0.2 FTE

Role: develop business solution/product of shared interest with the network and responsible for maximising the value of the developed product/business solution

SMEs (Network)

CTIS: 6 Network SMEs

- Estimated effort: 0.3 FTE

CTIS BI: 2-4 Network SMEs

- Estimated effort: 0.1 FTE

Role: bring knowledge and expertise
Provide input upon request of Product Owner for specific business solution and responsible for supporting consistent enhancement
SMEs are not a permanent standing body, existing in their function for as long as the Product Owner requires their knowledge and expertise.

Product Teams

- small, self-organised product teams working with best available expertise to deliver the prioritised work
- directly involved in solution development, providing expertise on a specific business process or product
- Product Owners and SMEs inclusion is ensured at execution level of the Portfolio



CTIS Transparency rules

Transparency is a pillar of the CT Regulation, also delivered through the searchable Clinical Trial Information System (CTIS) public website.

Article 81(4) of Regulation (EU) No. 536/2014

- EU database publicly accessible by default, with exceptions justified on any of the following grounds:
 - Protection of personal data;
 - Protection of commercially confidential information in particular taking into account the MA status of the medicinal product, unless there is an overriding public interest in disclosure;
 - Protecting confidential communication between MS in relation to the preparation of the assessment report;
 - Ensuring effective supervision of the conduct of a clinical trial by Member States.

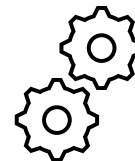
Current CTIS transparency rules defined in the [Appendix on disclosure rules](#)

How transparency is currently implemented in CTIS

- Broad publication of the clinical trial application (CTA) dossier and information submitted in CTIS during the CT life cycle - i.e., notifications, summary of results



- Key aspects of the current disclosure rules:
 - *Deferral* mechanisms (up to 7-years after end of trial) to protect CCI considering applicable clinical trials categories OR
 - *Redaction* of commercially confidential information (CCI) in the document version 'for publication'



Note: Redaction of personal data is always applicable, regardless of the use of deferrals

- Transparency requirements among the main obstacles of CTR implementation for sponsors based on feedback from a targeted survey to sponsors in 2022
- Complexity of current rules might lead to technical / human error
- Concerns about the timing for the publication of key clinical trials document, namely protocols (deferrals up to 7-years from end of trial)



Public consultation on CTIS Transparency rules from 3 May to 28 June 2023
to gather feedback from CTIS stakeholder community



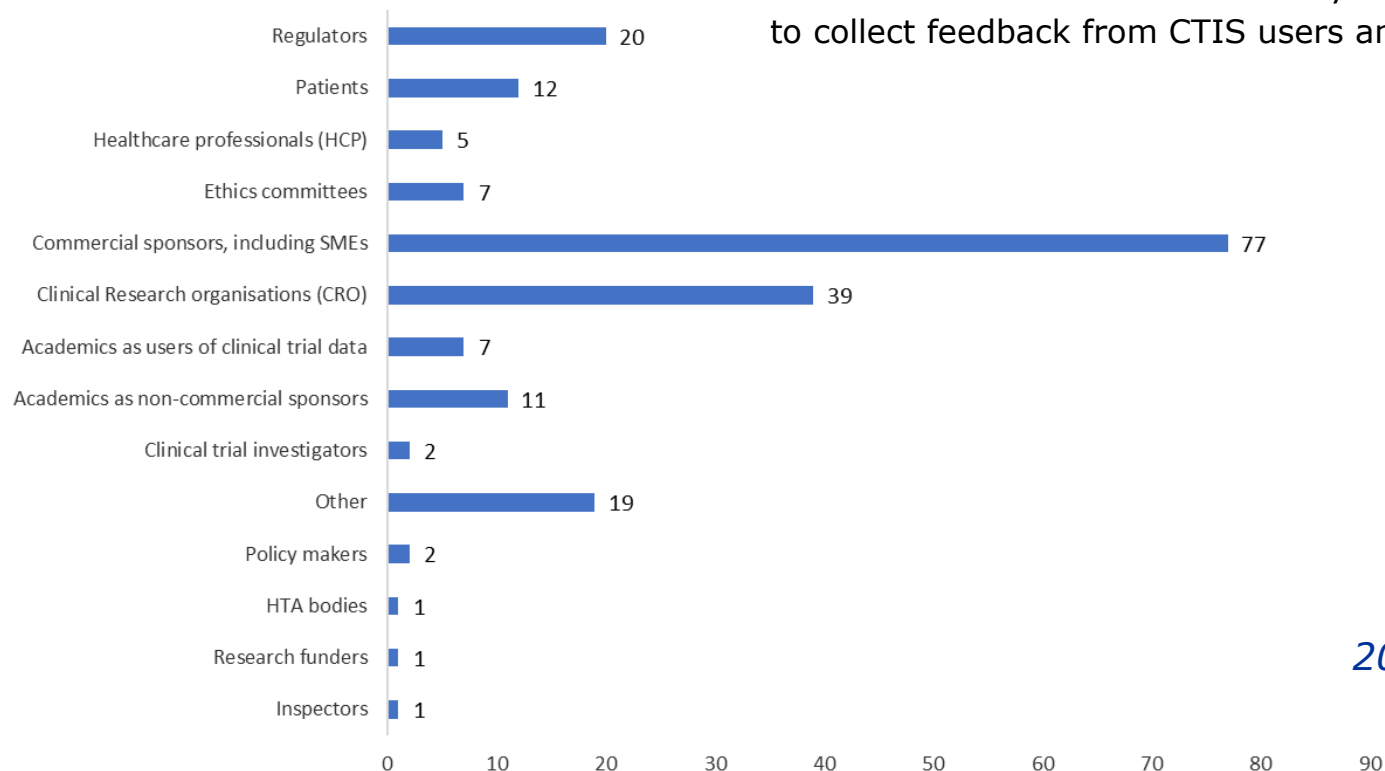
Results of the public consultation

Responses grouped by affiliation



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Public consultation launched – 3 May to 28 June 2023 -
to collect feedback from CTIS users and stakeholders



204 valid responses

- Results show that stakeholders have different views and needs, with industry focusing on CCI protection and civil society asking the immediate publication of key clinical trial documents
- **Consensus on the need for simplification**
- Deferrals should be maintained in CTIS if the number of documents to be published is high, as otherwise redaction would be too burdensome
- Medical writing plays an important role on the document content - reducing the amount of personal data and CCI that are included will help to limit the need for redaction

EMA reviewed received feedback to propose a revision of CTIS transparency rules

Ensuring **timely transparency that delivers for stakeholders**, through:

- Earlier publication of key clinical trials information (i.e., structured data and documents)
- Ensure publication of information most relevant for the public, focusing on needs of patients and clinical researchers in EU/EEA
- Simplification of the system: removal of the deferral mechanism in CTIS ensuring timely publication of key data and documents
- A balanced approach between transparency of information and protection of commercially confidential information

The aim is a *less complex, more efficient and user-friendly* system, maintaining early public access to key clinical trials information, in line with the aims of the CTR

- Publication of structured data fields in the CTA largely unchanged, except for dose and strength details for some trials, which will no longer be published
- Publication focused on a **reduced** number of key (redacted) documents of interest
- Deferral functionality removed, allowing publication of fewer (redacted) documents at the time of decision on a clinical trial application (CTA)
- Redaction as the main tool to protect CCI and personal data, if included in the documents
- Summary of results published with a layperson summary when submitted in CTIS, except for category 1 trials in adults > publication occurs 30 months after end of trial in EU/EEA

Notes:

- Specificities for publication of structured data fields and documents for early development phase trials remain in place
- Interplay with Policy 0070 on publication of clinical study reports remain in place

- **Category 2 and 3 trials (vast majority of all trials)** - Publication of documents at the time of the Member State decision* limited to:

- ☐ Protocol, including synopsis and patients facing documents
- ☐ Informed consent form and patient information sheet
- ☐ Summary of medicinal product characteristics (SMPC)
- ☐ Recruitment arrangements, advertising material

The first MSC issuing the decision triggers the publication in CTIS public domain

Final summary of results and layperson summary published when submitted in CTIS

- **Category 1 trials**: publication of protocol and summary of results simultaneously: 6 months after end of trial (for paediatric trials) and 30 months after the end of trial (for adult population)
- **For all trials**: clinical study reports published when submitted in CTIS

*Authorised, authorised with conditions, not authorised

- [Guidance](#) has been provided to CTIS users on CCI protection (chapter 4)
- [Questions and answers](#) document also elaborates on MSs Authorities view on CCI protection
- CCI protection is time dependent and redaction of CCI expected to decrease overtime
- Listening to stakeholders' feedback, under the new rules certain data/documents will no longer be published, including:
 - RFI and RFI responses
 - Investigator Brochure (IB) in part I of the CTA dossier
 - MSs final assessment reports part I and part II, decision letters, GCP inspection reports
 - Any documents attached to RFI, RFI responses, notifications
 - Dose and strength details for certain types of trials
- A balanced approach on transparency on the publication of key clinical trial information in a timely manner allowing also sponsor to protect their legitimate economic interest and promote clinical research in the EU

Sponsors

- Less documents requiring redaction of CCI and personal data → Reduced complexity and **faster preparation of CTA dossier**
- Removal of the deferral mechanism delivers **significant process simplification** and reduces the risk of inadvertent publication of CCI
- Simpler and earlier publication increases patients' engagement and trust

Patients/ HCP

- By removing deferral functionality patients can **access key data and documents as early as possible in the clinical trial lifecycle**, before the start of the trial
- Focus on publication of key clinical trial information (incl. protocols) → patients able to easily **identify published information of interest by reduced complexity**
- Earlier access to information for patients will facilitate the start of trial and enrolment
- Increased awareness on possible treatment options

01

Revised rules
for endorsement by
EMA MB

5 Oct 2023

02

New specifications and
implementing changes
to CTIS public portal

Q4 2023 – Q2 2024

03

Launch of revamped
CTIS public portal &
application of new
transparency rules

Q2 2024



Any questions?

Further information

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