



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

# Pharmacovigilance during the Pandemic

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**PHV platform meeting 30/10/2020**

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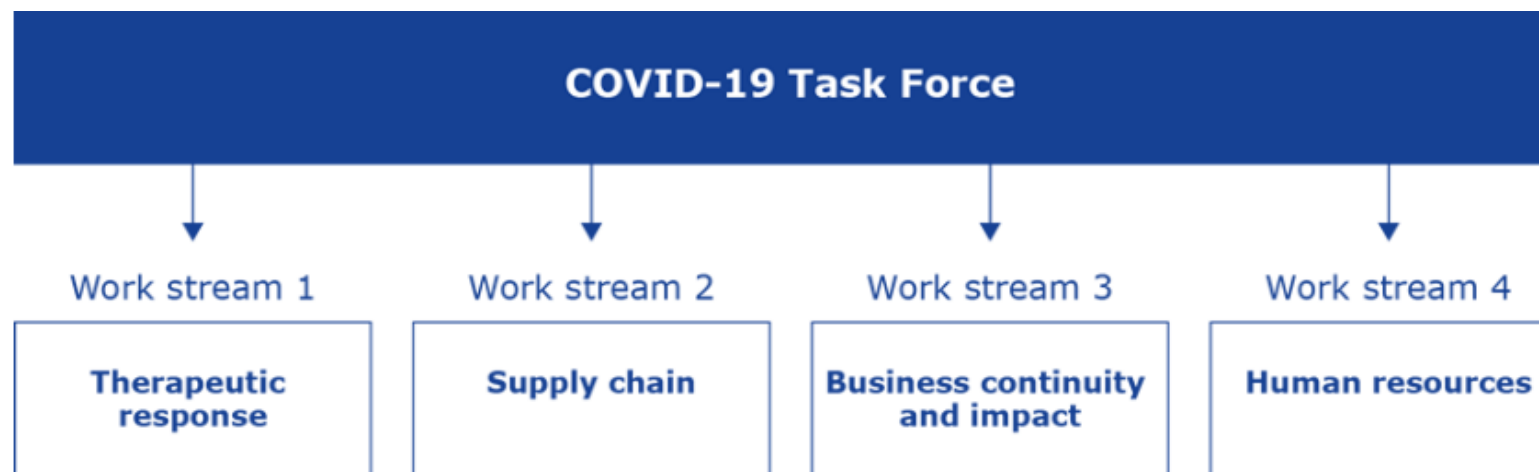
European Medicines Agency



# EMA Approach to the Pandemic

## COVID-19 EMA pandemic task force (COVID-ETF):

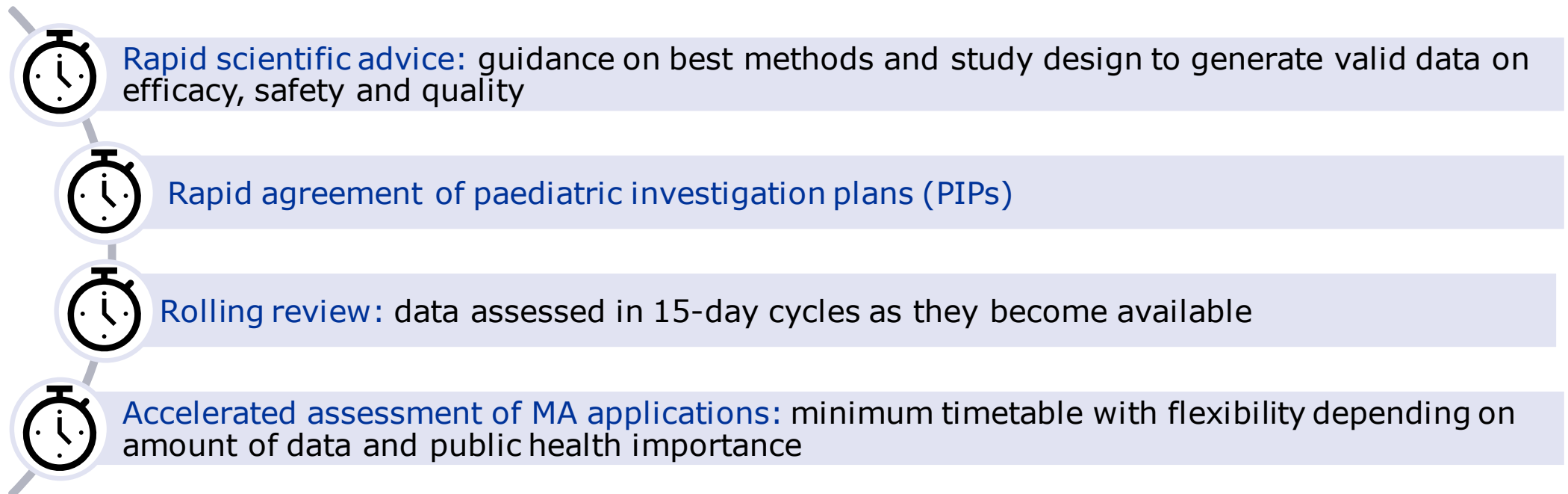
- EMA scientific committee and working party members expert in vaccines, infectious diseases, preclinical and clinical trial design, paediatric aspects, quality of biological medicinal products
- Support to the development, authorisation and supervision of medicines and vaccines
- Deal with the scientific, regulatory and operational challenges created by the COVID-19 pandemic





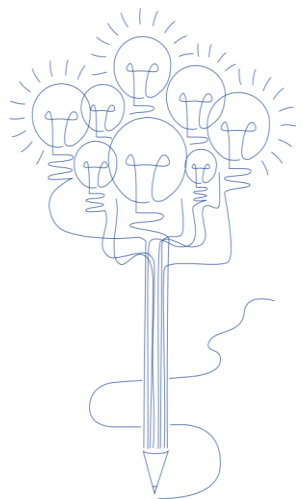
# EMA Approach to the Pandemic

- Regulatory procedures adapted to grant marketing authorisation (MA) of **safe, effective and high-quality COVID-19 vaccines and therapeutics** as soon as possible
- Fast reviews supported by **COVID-ETF** coordinates and enables fast regulatory actions on development, authorisation and safety monitoring of treatments and vaccines intended for COVID-19:





# Summary of activities



**165** therapeutics in discussion with EMA

**40** vaccines identified for interaction

Rapid scientific advice proceeding for advanced vaccines and therapeutics (43 completed – 18 ongoing)

2 Rolling reviews started (AstraZeneca/Oxford and BNT162b2, BioNTech/Pfizer)



COVID-19 | VACCINES

**First rolling review of a COVID-19 vaccine starts**

EMA has started evaluating a first batch of data on the vaccine, which come from laboratory studies. Much of the evidence on the vaccine's safety and effectiveness is still to be submitted.



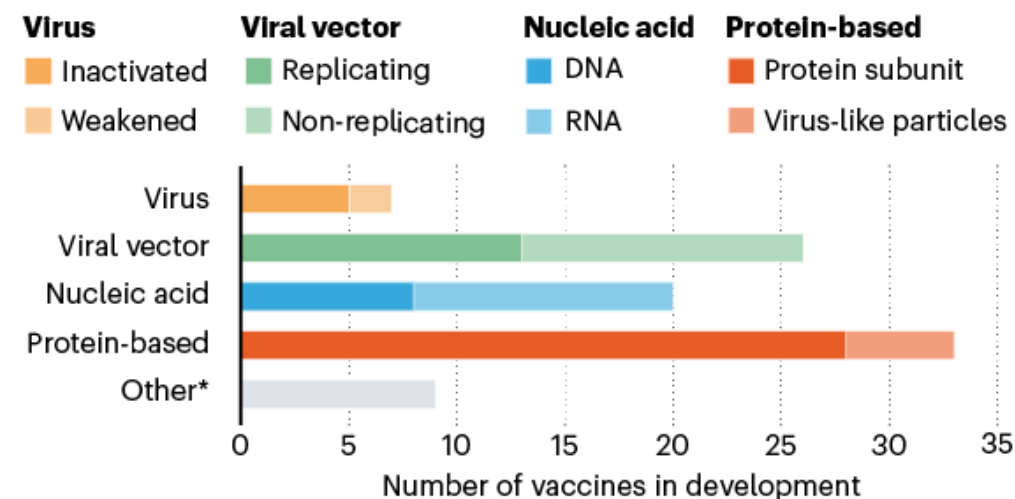
## Enhanced Safety Monitoring of Medicines Used In Treatment of COVID-19

### A range of pharmacovigilance measures have been put in place:

- ✓ Dedicated [eRMRs](#) (EudraVigilance safety monitoring reports) with increased frequency
- ✓ Close monitoring of [ongoing observational studies](#) and sharing information to network on a weekly basis
- ✓ Reduced timeframe for confirming urgent [COVID-19 related signals](#)
- ✓ [Periodicity of PSURs](#) for COVID-19 relevant products reviewed
- ✓ Call for [ADR reporting](#) to HCP and patients
- ✓ Extension of EMA [Medical Literature Monitoring](#) service to cover active substances of interest in treatment of COVID-19
- ✓ Updated guidance on conduct of clinical trials during pandemic to [stimulate SUSAR reporting in EV](#)
- ✓ [Stimulate reporting in EudraCT](#): reminders sent to NCAs, sponsors reminded to include “COVID-19” in titles
- ✓ Encouraged registration of observational studies related to the pandemic in [EU-PAS Register](#)

- Potentially many different vaccines, **new technologies**
- **Accelerated** development and approval
- **Rapid vaccination** to occur in millions or billions
- **Safety critical**: Unexpected or rare serious ADRs could negatively affect vaccination campaigns and increase vaccine hesitancy
- Regulators need to demonstrate to have systems in place to rapidly **detect** and **minimise** serious risks to patients
- **Transparency** and **communication** will be key

## AN ARRAY OF VACCINES

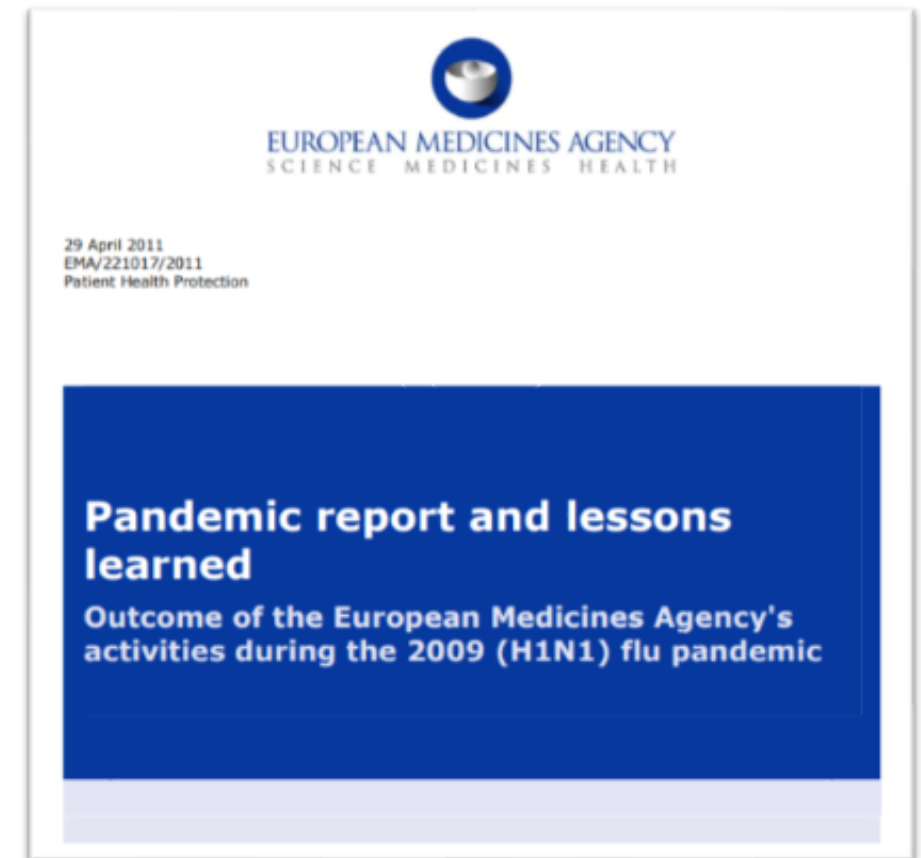
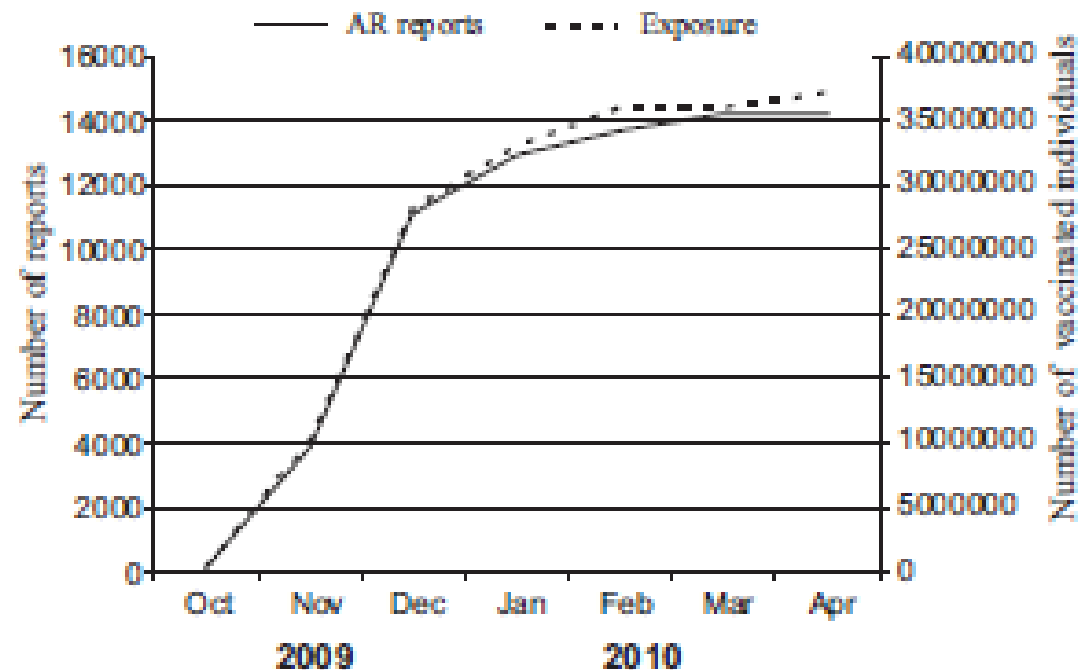


\* Other efforts include testing whether existing vaccines against poliovirus or tuberculosis could help to fight SARS-CoV-2 by eliciting a general immune response (rather than specific adaptive immunity), or whether certain immune cells could be genetically modified to target the virus.

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Lessons have been learned from A/H1N1 pandemic vaccination campaign, but more uncertainties and fast introduction of COVID-19 vaccines after approval



## Lessons Learned H1N1

Lessons learned from [A/H1N1](#) pandemic adapted to current emergency situation



## Signal Detection Methods

- Rapid **detection, exchange, prioritisation** and **assessment** of safety **signals**
- Testing of existing and new **methodologies** specific for COVID-19



## COVID-19 Vaccines Monitoring Preparedness Plan

Enhanced monitoring activities to be carried out in the EU for COVID-19 vaccines, including **roles, responsibilities** and **interactions** of stakeholders involved



- Active surveillance of **vulnerable populations**:
  - Active data collection on **rare** and **severe** risks
- **ACCESS, ICMRA, pregnancy studies, int. cohorts**

## International And Research Centres Collaboration



- **Engage** and **communicate** with public, patients and HCP.
- **Enhanced communication** and **transparency** measures

## Transparency & Communication





# Real-World Monitoring of COVID-19 Treatments and Vaccines

## EMA review of study results

- **Daily triage** of published studies
- **Reviews** e.g. ACEi/ARBs and HCQ to support regulatory decision making
- Use of **EU PAS Register** to support collaborations and quality of studies

## EMA-funded projects

- Framework for COVID-19 **vaccine monitoring**
- Framework for **multi-centres collaboration** for observational studies
- **Pregnancy** study on effects of COVID-19 infection and treatments

## International Collaboration (ICMRA, WHO)

- Preparation for **vaccine safety monitoring** (lead MHRA/TGA)
- Building **international cohorts** facilitating multicentre observational studies (lead Health Canada)
- **Pregnancy research** to support regulatory decision-making (lead EMA)
- WHO Europe Regional Working Group on COVID-19 vaccination



# Transparency and Communication

- **Timely communication** and high level of **transparency** critical to ensure public trust in vaccines and protect public health
- Engage and communicate with **public**, **patients** and **HCP**
- **Exceptional transparency measures**
- **Pharmacovigilance updates**

Regulatory procedure	Standard practice	COVID-19 medicines
<u>Compassionate use opinion</u>	Published in <a href="#">Compassionate use</a> after <a href="#">CHMP opinion</a>	News announcement published within 1 day of <a href="#">CHMP opinion</a>
Start of <a href="#">rolling review</a>	Not applicable	News announcement published within 1 day of start of review
<u>Marketing authorisation application</u>	<a href="#">Active substance</a> and therapeutic area listed in <a href="#">Medicines under evaluation</a>	News announcement published within 1 day of application
<u>Application for extension of indication</u>	Not announced	News announcement published within 1 day of application
<u>Publication of European public assessment report (EPAR)</u>	<a href="#">Published</a> at least 2 weeks after <a href="#">marketing authorisation</a>	<a href="#">Published</a> within 3 days of <a href="#">marketing authorisation</a>
<u>Product information</u>	Published in all EU languages with <a href="#">EPAR</a>	Published (in English) within 1 day of positive <a href="#">CHMP opinion</a> ; published in other EU languages with <a href="#">EPAR</a>
<u>Risk management plan (RMP)</u>	Summary of RMP published	Full RMP published
<a href="#">Clinical trial data</a>	Publication suspended until further notice	Published on <a href="#">Clinical data website</a> <a href="#">after marketing authorisation</a>



## Clarifications on received questions - Rapid signal assessment coordination and communication

- Validated signals that are not an ESI should be submitted in monthly summary safety reports and PSURs
- List of confirmed signals on PRAC agenda (i.e. to be discussed at PRAC) and list of non-confirmed signals are sent to all QPPVs prior to each PRAC meeting
- PRAC signal assessment report is shared with concerned MAHs at both the preliminary and final stages
- Emerging safety issues to NCAs and EMA "P-PVemerging-safety-issue@ema.europa.eu". This should be done as soon as possible and no later than 3 working days after establishing that a validated signal or a safety issue from any source meets the definition of an emerging safety issue.

## Clarifications on received questions – core RMP

- core RMP in 2009 defined all the requirements for H1N1 vaccines (+lessons learned)
- Since then, EMA developed: GVP guidance (rev 2 for RMP), RMP template (rev 2.0.1), GVP PI vaccines, CHMP influenza vaccines clinical guidance

Manufacturers: Pre-submission interaction, scientific advice requests on PhV

Unified view from EMA Committees on RMP requirements for COVID-19 vaccines:

- Additional guidance, no duplication (existing guidance applies)
- Requirements & recommendations = more than a list of possible options
- Reflects current understanding of the pandemic and the vaccines development
  - Will be a living document, integrating outcomes of EMA/EU funded projects and other international collaborations



## Clarification received questions – core RMP

### Main topics:

- Additional COVID-19 specific topics to be addressed in the safety specification, including missing information and AESI.
- Methods for signal detection adapted to pandemic use (to be described in RMP);
- Content and periodicity of Summary Safety Reports (monthly at start);
- Use of stickers for traceability, additional electronic methods to be considered;
- Key elements of PASS design: e.g. rapid start, fast data generation, frequent reports, using results of ongoing EU efforts;
- Additional guidance on section of the RMP template, with a different level of detail.



# Clarification based on received questions - ACCESS

- Focused on **preparedness** prior to vaccine introduction (e.g. background rates) and **readiness of hospital sites and data sources** post licensure by providing protocols and the establishment of a European network of hospitals/data sources that are able to provide high quality data/robust sample sizes. By establishing this network, ACCESS prepares countries to do this in a harmonized (common protocols) and collaborative manner (European network of data sources).
- Within the ACCESS contract, **it is not envisioned that studies will be performed** using the protocols and identified data sources, but it provides an opportunity for data providers, vaccine manufacturers and public institutions to use the outputs of ACCESS (protocols, background rates) and to perform studies on effectiveness, safety and coverage.
- The common protocols and platform/infrastructure of data sources **will be disseminated** through the VAC4EU (Vaccine monitoring Collaboration for Europe) being a partner of the ACCESS project and will guarantee a continuous monitoring through their website <https://vac4eu.org/> and hosting of the ACCESS deliverables, including a tool/dashboard for accessing background rates and common protocols and training manuals. ACCESS includes a code of conduct and governance principles for collaborative studies using the ADVANCE code of conduct endorsed by VAC4EU.



## Key messages

- COVID-19 is a major public health challenge
- Unprecedented collaboration and unprecedented interest and scrutiny
- Regulators and companies need to rise to the challenge and demonstrate to have systems in place to rapidly detect any safety issues and minimise serious risks to patients
- Timely exchange of information, transparency and communication are critical
- We need to be prepared and we are all committed to a common goal

Any questions?

Thank you for your attention



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