

Overview of EMA's interaction with patients and consumers organisations (2013)

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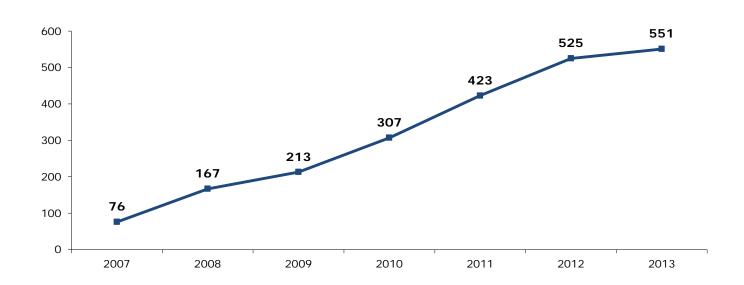


Introduction

- Quantitative overview of EMA activities where patients, consumers and their organisations have been involved throughout 2013
- Provides comparison to preceding years
- Has been included within the annual report for 2013, presented to the EMA
 Management Board and published on EMA website in 2014
- High level of interaction between EMA and PCOs achieved during 2013

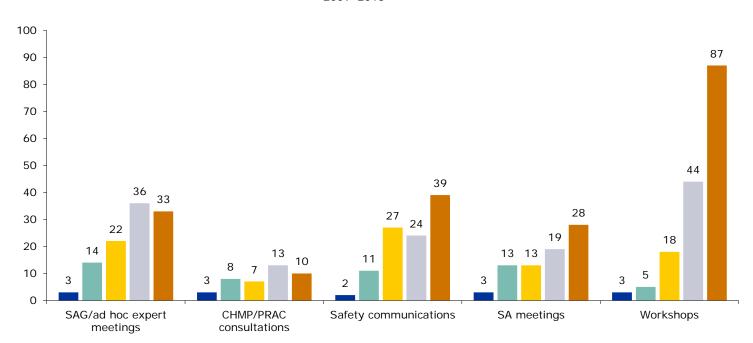


Overall number of patient & consumer involvement in EMA activities $2007 - 2013\,$





Comparison of involvement in core activities 2009–2013



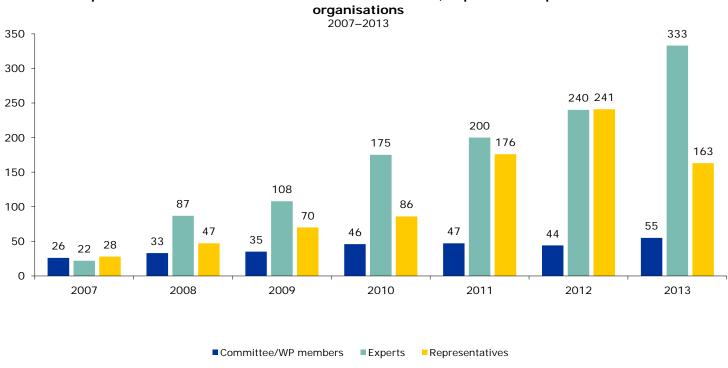
■2009 **■**2010 **■**2011 **■**2012 **■**2013



Activities are split into three categories;

- 1. Activities in which patients/consumers are members, alternates or observers,
- 2. Activities involving individual patient experts, and
- 3. Activities requiring organisation representatives.







Members of committees /working parties:

MB: 2 members, COMP: 2 members, PDCO: 3 members and 3 alternates.

CAT: 2 members and 2 alternates. **PRAC** 1 member, 1 alternate.

HCPWP: 2 observers.

Experts:

333 experts were involved in Agency activities during 2013:

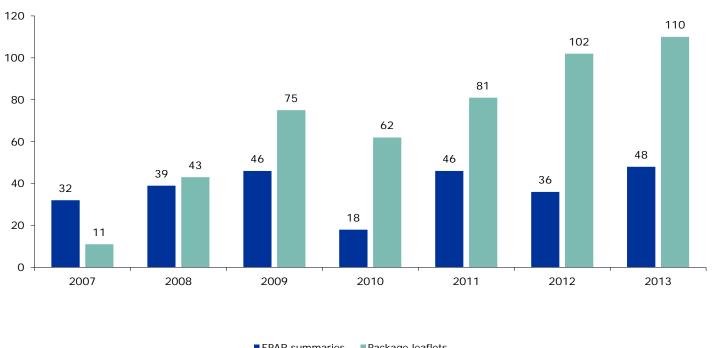
- SAG/ad-hoc expert meetings; 33 representatives (22 meetings);
- SA meetings; 28 representatives (now includes SA);
- PRAC consultations x 2 (8 Patient representatives);
- Review of package leaflets (110);
- Review of safety communications; (39);
- Review of EPAR summaries (48);
- Participation in EMA annual training session (63)

Representatives:

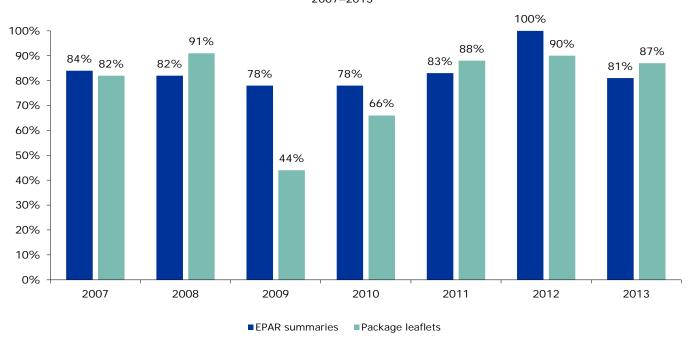
163 representatives of organisations were involved during 2013:

- CHMP consultation
- Pharmacovigilance legislation forum
- Working groups (e.g. funding of organisations, EudraCT)
- Ad-hoc observers attending PCWP meetings
- Workshops

Package leaflets and EPAR summaries sent for review 2007-2013

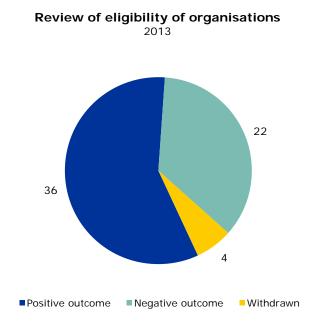


Percentage of package leaflets and EPAR summaries reviewed 2007–2013



Eligible Organisations

There are 37 eligible patient/consumer organisations working with the Agency.
 During 2013, 4 new organisations became eligible.



EMA Working Party with Patients & Consumers Organisations (PCWP)

The PCWP continues to play a key role in the interaction between the EMA and PCOs.

- 19 members and 18 alternates representing PCOs;
- •6 members from the EMA Scientific Committees:
- •1 member from the EMA secretariat;
- •Observers from the CMD-h, HCP WP and MB.

Four PCWP meetings held during 2013; one with all 'eligible' organisations, two joint with the Healthcare Professionals' Working Party (HCP WP) and one-day training session.

PCWP representatives involved in many EU-wide initiatives

- •The European Network of Paediatric Research (Enpr-EMA); patient representative member of the Enpr-EMA coordinating group
- •The European Network of Centres for Pharmacoepidemiology and Pharmacovigilance (ENCePP); PCO representative member of the steering group
- •The Pharmacoepidemiological Research on Outcomes of Therapeutics (PROTECT); patient representatives are involved in the PROTECT consortium

Activities involving patients and consumers during 2013:

Increased involvement in **benefit / risk** evaluations

- •CHMP & PRAC consultations: specific consultations with PCOs on medicines / issues under evaluation
- •SAG/expert meetings 33 patients participated as patient experts in 22 meetings have provided unique information in terms of real life experiences and views.
- •Scientific Advice Working Party 28 patients' representatives participated as experts in specific scientific advice requests (16 for protocol assistance (orphan drugs).



Activities related to the implementation of the new pharmacovigilance legislation

- 1 stakeholder meeting (including industry, patient/consumer and healthcare professional representatives, national medicines regulatory authorities and the European Commission)
- Additional monitoring of medicines & direct patient reporting impact on the package leaflet; PCOs extensively consulted on the black symbol and related text and launch

Involvement in EMA workshops/conferences

- Workshop on Conflicts of Interest Policy
- Clinical Trial advisory groups
- Workshop on medication errors
- Workshop on patient support and market research programmes
- Workshop on medicines shortages
- · Workshop on the patient voice in benefit-risk assessment
- Workshop on clinical investigation of medicines for multiple sclerosis
- Workshop on biosimilars
- Workshop on Antimicrobial Resistance (AMR)

Challenges

- New member integration;
- Limited time, often not enough for allowing meaningful discussion;
- Managing group size, especially in joint meetings;
- Managing individuals' and organisations' sometimes conflicting expectations;
- Managing complex topics over several meetings in 3 month intervals

Conclusion

- The involvement of PCOs continues to be extremely beneficial;
- They are a recognised and integral part of the Agency's work
- With the passing years, their involvement continues to increase and expand, but also evolves ensuring it occurs in the most optimal manner possible.
- This collaborative interaction allows patients to engage with the EMA to share their reallife experiences and in doing so, they provide valuable feedback which ultimately contributes to the quality of the decision-making process.