

Overview of EMA's interaction with patients and consumers organisations (2014)

Nathalie Bere Stakeholders and Communication Division

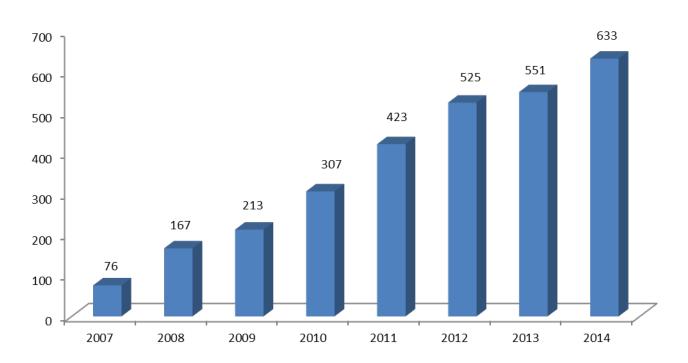


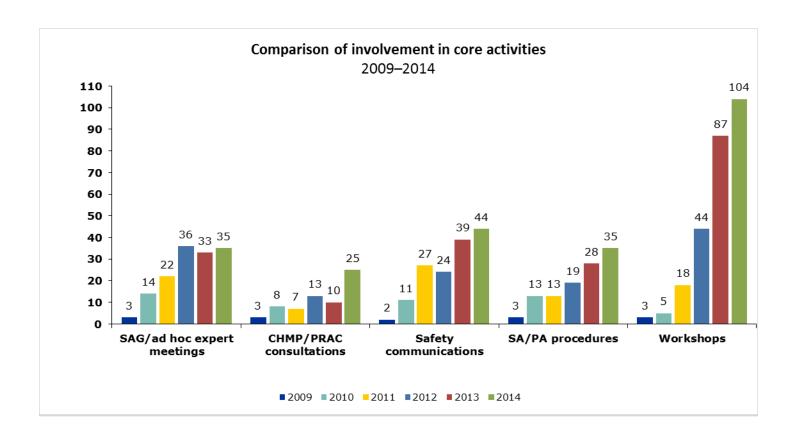


Introduction

- Overview of EMA activities where patients, consumers and their organisations have been involved throughout 2014
- Provides comparison to preceding years
- Will be included within the annual report for 2014, presented to the EMA Management
 Board and published on EMA website during 2015
- Usual high level of interaction between EMA and PCOs achieved during 2014

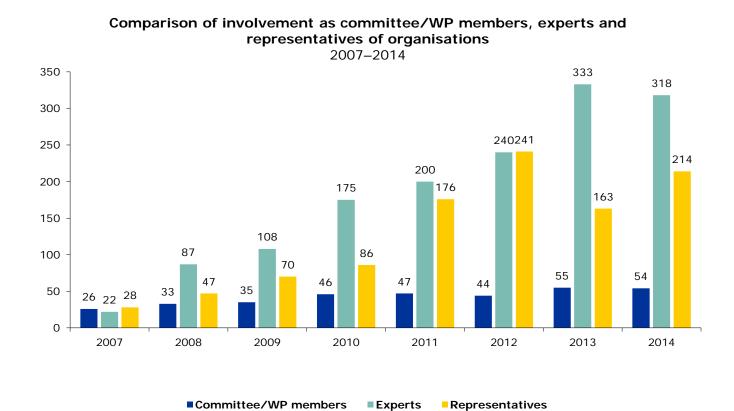
Overall number of patient & consumer involvement in EMA activities 2007–2014





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:

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

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

Experts:

336 experts were involved in Agency activities in 2014, examples:

- CHMP oral explanation
- Scientific Advisory Group (SAG)/ad-hoc expert meetings
- Scientific Advice/Protocol Assistance procedures
- PRAC consultations
- Review of package leaflets
- Review of safety communications
- Review of EPAR summaries
- Participation in EMA annual training session

Representatives:

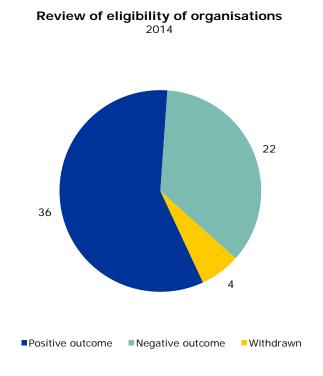
242 representatives of organisations were involved during 2014:

- Committee/EMA consultations
- Pharmacovigilance legislation forum
- Patient registries
- EMA policy on proactive publication of and access to clinical-trial data
- Pandemic preparedness
- WEB-Radr stakeholders survey
- Ad-hoc observers attending PCWP meetings
- Working groups
- Workshops



Eligible Organisations

 There are 36 eligible patient/consumer organisations working with the Agency. During 2014, 1 new organisation became eligible.



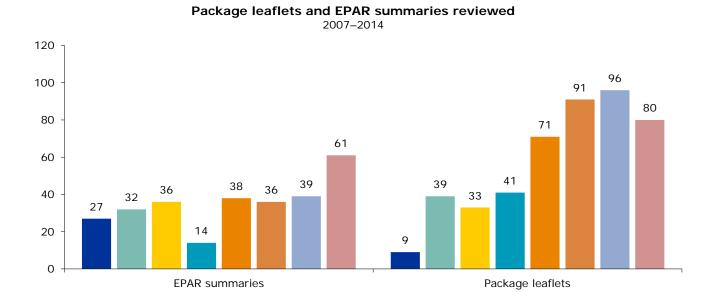


EMA Working Party with Patients & Consumers Organisations (PCWP)

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

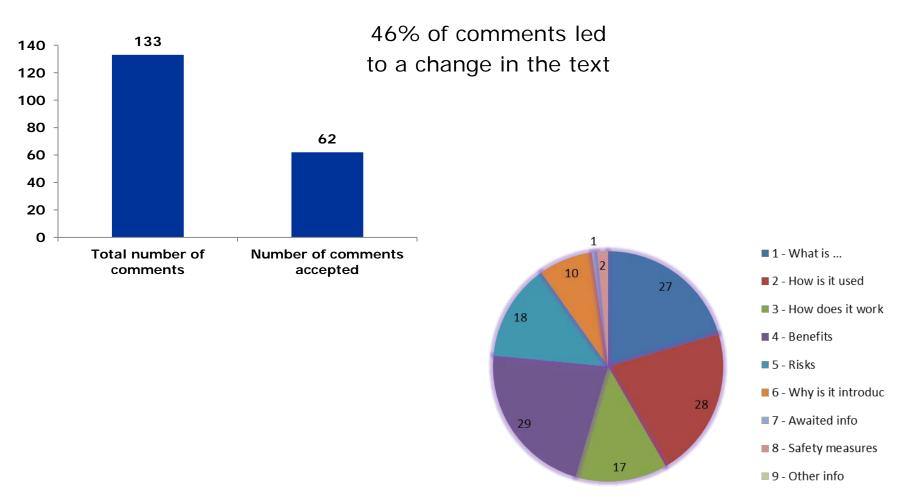
- 19 members and 16 alternates representing PCOs;
- 6 members from the EMA Scientific Committees;
- 1 member from the EMA secretariat;
- Observers from the CMD-h, HCP WP and MB.

Four PCWP meetings held during 2014; one with all 'eligible' organisations, two joint with the Healthcare Professionals' Working Party (HCP WP) and one-day training session.





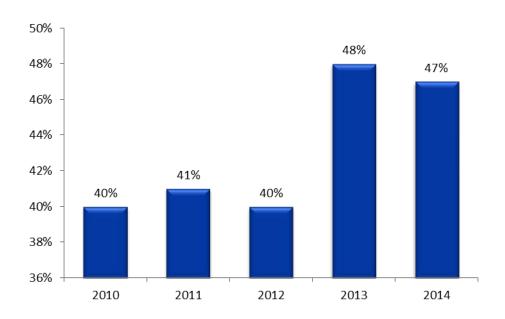
Feedback on comments received; EPAR summaries





Scientific advice – influence of patients on outcome

(comments included in final advice)



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
- ADVANCE project; patients involved

Involvement in EMA workshops/conferences

- Workshop on B/R (PCWP/HCPWP)
- EMA/DIA Eudravigilance Information Day
- Clinical trial portal and union database stakeholders meeting
- 6th Enpr-EMA Workshop (Paediatric Network)
- 8th Stakeholder Forum PhV leg
- Workshop on Risk Communication (PCWP/HCPWP)
- Clinical trial portal and union database stakeholders meeting
- Regulatory workshop on clinical trials designs in Neuromyelitis optica and spectrum disorders (NMO)
- ADVANCE WP1 Workshop (Revised framework for development of influenza vaccines)
- Clinical trials stakeholder meeting
- Workshop on Alzheimer's Disease
- WEB RADR (IMI project) workshop
- Development pathways workshop for advanced therapy medicinal products

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.

Written consultations, example...

<u>Humalog / Liprolog - Extension of indication</u>: concerns regarding introduction of a new high strength and how to ensure its safe and correct use

- Consultation with patients to obtain input on how best to minimise potential risk of medication errors
 - ➤ Input received prompted the PRAC & CHMP to request further changes to the labelling (differentiations of strengths).
 - ➤ The MAH subsequently amended the labelling and other measurements in the risk minimisation plan.

Face to face consultations, example...

<u>Article 31 referral procedure - review of Valproate</u>; PRAC review of new information on risk of long-term developmental problems in children whose mothers took Valproate

- Patient meeting

 included epilepsy, bipolar disorder and migraine patient organisations
 and organisations representing the patients, families and carers affected by valproate
 - Very constructive exchange of information; patients shared their personal experiences and provided input on how best to raise awareness for all concerned; in turn allowed PRAC to explain the assessment process
 - The need to consult with HCPs was very much emphasised by patients
- PRAC also initiated consultation with relevant HCPs organisations to obtain information on communication, awareness & understanding of risks
 - Valuable input will be taken forward by the PRAC in reaching its recommendation

Face to face consultations, example...

<u>Article 107i referral procedure – methadone</u> – PRAC review into misuse of oral methadone containing povidone leading to ADRs

- Patient expert participated in expert group meeting;
 - provided valuable information on current use and misuse of oral methadone, adherence to therapies and views of associated risks,