EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

Section 4.1: Therapeutic indications

Rev.1

SmPC training presentation

Note: for full information refer to the European Commission's Guideline on summary of product characteristics (SmPC)

SmPC Advisory Group

Index

I. General objectives of section 4.1

The section “Therapeutic indications” should clearly define the disease and the population for which the benefit risk balance of the medicine is positive

Indication(s) should be stated clearly and concisely

II. Key principles

Target disease or condition

Treatment (symptomatic, curative, modifying)
Prevention (primary, secondary)
Diagnostic

SmPC examples
1 symptomatic
2 curative
3 prevention
4 diagnosis

Target population

Especially when restrictions to patient populations apply

5 target population

Age groups, specifying age limits

X is indicated in <adults> <neonates> <infants> <Children><adolescents>

<aged x to y <years, months>

6 age groups
7 age groups

Example 1–treatment – symptomatic

Target disease or condition treatment (symptomatic)

Active substance X 1.5 mg hard capsules

Symptomatic treatment of mild to moderately severe Alzheimer's dementia.

Symptomatic treatment of mild to moderately severe dementia in patients with idiopathic Parkinson's disease.

Example 2–treatment – curative

Target disease or condition
treatment (curative)

Active substance X 1 g powder for concentrate for solution for infusion

Active substance X is indicated in adults for the treatment of Clostridium difficile infections (CDI) also known as C. difficile-associated diarrhoea (CDAD)

Example 3–prevention

Target disease or condition (prevention)

Active substance X 40 mg hard capsules

Active substance X 40 mg is indicated for the prevention of postoperative nausea and vomiting (PONV) in adults.

Example 4–diagnosis

Target disease or condition (diagnosis)

Active substance X 0.25 mmol/ml, solution for injection

This medicinal product is for diagnostic use only.

Contrast enhancement in magnetic resonance angiography (CE-MRA).

Active substance X is indicated for contrast-enhanced magnetic resonance angiography for visualisation of abdominal or limb vessels in patients with suspected or known vascular disease.

Example 5–target population

Target population especially when restriction to patient population applies

Active substance X 10 mg tablets

Active substance X is indicated for the treatment of chronic hepatitis B in adults with:

- compensated liver disease with evidence of active viral replication, persistently elevated serum alanine aminotransferase (ALT) levels and histological evidence of active liver inflammation and fibrosis;
- decompensated liver disease.

Example 6–age groups

Age groups, specifying age limits

Active substance X 100 mg film-coated tablets

Active substance X is indicated as adjunctive therapy in the treatment of seizure associated with Lennox Gastaut syndrome in patients 4 years and older.

Example 7–age groups

Age groups, specifying age limits

Active substance X powder and solvent for suspension for injection

Active substance X is indicated for prevention of herpes zoster ("zoster" or shingles) and herpes zoster-related post-herpetic neuralgia (PHN).

Active substance X is indicated for immunization of individuals 50 years of age or older.

III. Additional information

Mandatory conditions of product usage

SmPC examples

8 mandatory conditions

9 mandatory conditions

Study endpoints should not normally be included unless recommended by CHMP Guidelines. Information on an authorised indication may be considered for inclusion in section 5.1

10 example CHMP Guidance

Also see 'Examples presentation' for section 5.1

The objective of a prevention indication may be mentioned in general terms only

11 objective of prevention

Example 8–mandatory conditions

Mandatory conditions of product usage not covered more appropriately in other parts of the SmPC may also be included when relevant. e.g. **concomitant dietary measures**, lifestyle changes, or other therapy

Active substance X 120 mg hard capsules

Active substance X is indicated in conjunction with a mildly hypocaloric diet for the treatment of obese patients with a body mass index (BMI) greater or equal to 30 kg/m², or overweight patients (BMI > 28 kg/m²) with associated risk factors.

Treatment with active substance X should be discontinued after 12 weeks if patients have been unable to lose at least 5% of the body weight as measured at the start of therapy.

Example 9–mandatory conditions

Mandatory conditions of product usage not covered more appropriately in other parts of the SmPC may also be included when relevant. e.g. concomitant dietary measures, lifestyle changes, **or other therapy**

Active substance X 80 mg/ml oral solution

Active substance X is indicated in combination with other antiretroviral agents for the treatment of HIV-1 infected patients (adults and children of 2 years of age and older).

Example 10–CHMP guideline

Study endpoints should not normally be included, unless such mention is specified as being appropriate for the indication in the CHMP guidelines

Where results from subsequent studies provide further definition or information on an authorised indication, such information, provided it does not itself constitute a new indication, may be considered for inclusion in section 5.1

Active substance X 2.5 mg tablets

Section 4.1 Therapeutic indications
Adults
Active substance X is indicated for the treatment of schizophrenia.
Active substance X is effective in maintaining the clinical improvement during continuation therapy in patients who have shown an initial treatment response.

CHMP Note for guidance on the clinical investigation of medicinal products in the treatment of schizophrenia

CHMP Note for Guidance on the clinical investigation of medicinal products in the treatment of schizophrenia
2.4 Recurrence/episodic symptoms and relapse.
Relapse prevention studies may be used to show that the effect of medicinal products is maintained, but it is not an indication in itself.

Example 11–objective of prevention

The objective of a prevention indication may be mentioned in general terms only

Active substance X

Primary Prevention
Reduction of cardiovascular mortality and morbidity in patients with moderate or severe hypercholesterolemia and at high risk of a first cardiovascular event, as an adjunct to diet (see section 5.1)

IV. FAQs

1. What is the limit between a restriction of indication and a contraindication?

2. If data are missing to define a posology in a subpopulation e.g. infant, can the product be indicated in this population?

3. How should uncertainties in a subpopulation be reflected when there is a lack of data?*

1. What is the limit between a restriction of indication and a contraindication?

- The SmPC guideline states that section 4.1 should define the target population especially when restrictions to the patient populations apply
- A restriction to a patient population will be required when a positive benefit/risk balance has not been established in a subpopulation e.g. lack of data in a subset of the paediatric population
- A medicinal product should be contraindicated in a situation where the medicinal product must not be given for safety reasons e.g. in patients with cardiac heart failure

2. If data are missing to define a posology in a subpopulation e.g. infant, can the product be indicated in this population?

- A medicinal product can only be indicated in a subpopulation if a posology recommendation can be given. Therefore, if the benefit/risk assessment can not recommend a posology in a subpopulation, the indication should be restricted accordingly

3. How should uncertainties in a subpopulation be reflected when there is a lack of data?*

- Statements such as "*X has not been studied in patients with Y"* or *"The benefit in subgroup X has not been established"* are not informative. For this reason, the following should be considered for all subpopulations when there is a lack of data (except for the paediatric population, for which there is a existing guidance in the SmPC guideline):
  - A posology recommendation should be provided in section 4.2 for all subpopulations included in section 4.1 and not excluded in 4.3;
  - Section 4.4 should include information on patient groups at increased risk, in specifying which is the increased risk and any precaution(s) that may have to be taken. This should cover subpopulation for whom lack of data raises potential specific or increased risk;
  - Section 5.1 can present information on populations studied in the main trials to support or provide background information on the approved indication(s), e.g. in informing on exclusion criteria or summarising the main characteristics of the studied population;
  - In all cases, uncertainties in subpopulation should be explained in discussing the benefit-risk of the approved indication in public assessment report.

FAQs

Thank you for consulting this training presentation

SmPC Advisory Group

Please note the presentation includes examples that may have been modified to best illustrate the related principle