Human and veterinary pharmaceuticals regulation

Towards EU accession: Serbia's regulatory challenges, expectations and opportunities

29-30 November 2010

Hotel Holiday Inn, Belexpo Convention Centre, Belgrade, Serbia

Republika Srbija
Ministarstvo zdravlja
Ministarstvo poljoprivrede, šumarstva i vodoprivrede,
Uprava za veterinu

Republic of Serbia
Ministry of Health
Ministry of Agriculture, Forestry and Water Management,
Veterinary Directorate

alims
Agencija za lekove i medicinska sredstva Srbije
Medicines and Medical Devices Agency of Serbia

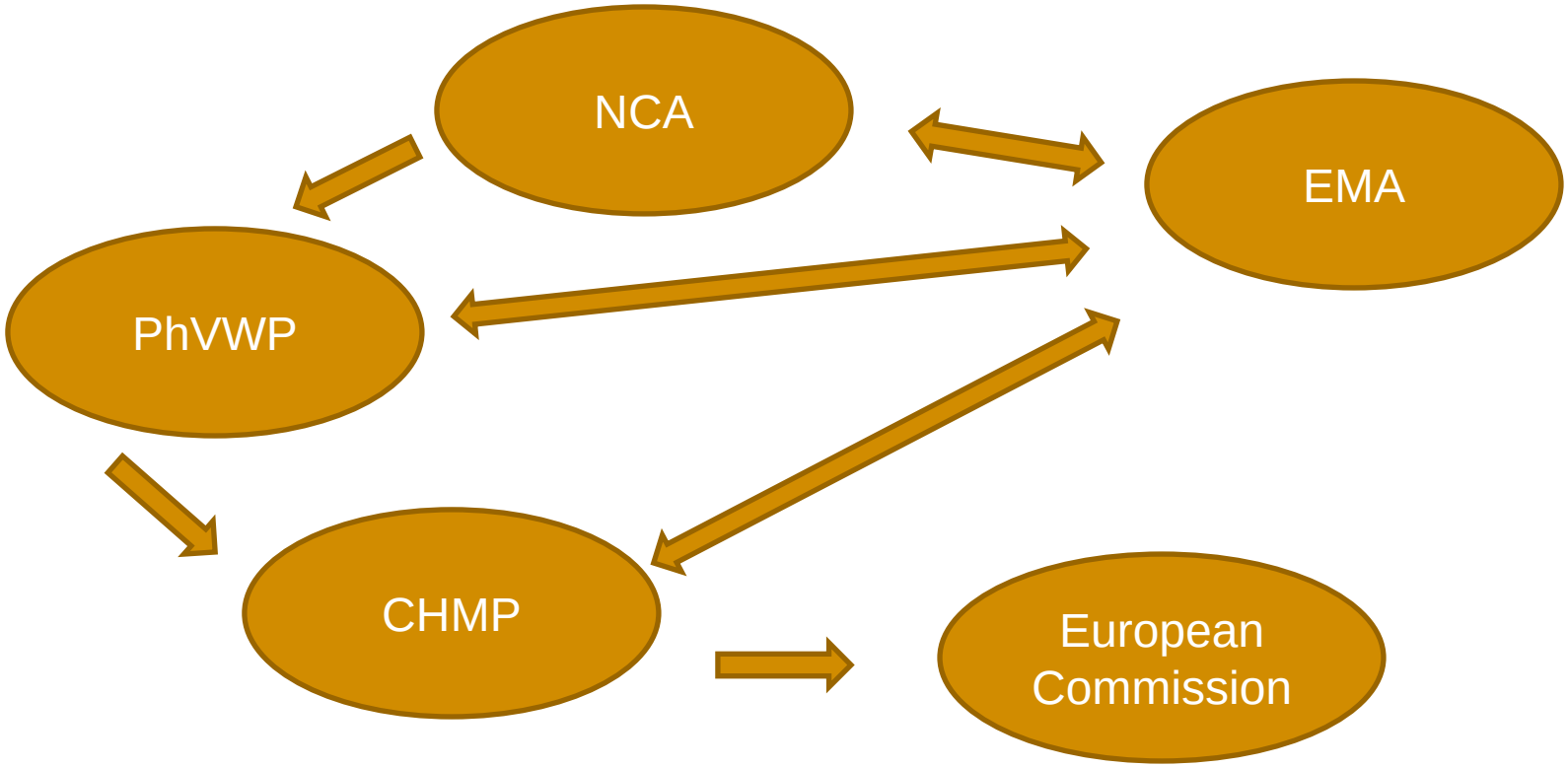
EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

The use of EudraVigilance:

perspective from a NCA

Lennart Waldenlind, MD, Associate Professor
Medical Products Agency
Sweden

Different stakeholders on the authority side regarding drug safety



Responsibilities – Centrally Authorised Products

Rapporteur	Evaluate, make conclusions
EMA	Coordinate, collect SAEs and distribute information, inform PhVWP, about safety problems
PhVWP	Risk identification, assessment, management, recommends action to
CHMP	Considers recommendations from PhVWP, makes a recommendation to the Commission
EU Commission	Decides

Responsibilities – Products authorised by Mutual Recognition Procedure (MRP)

RMS	Analyse and monitor SAEs, provide AR[1] to CMS[2]
Lead-RMS	For class-effects
CMP	Should give input together with RMS
PhVWP	Coordination of pharmacovigilance
EMA	Should be informed, coordinates
CHMP	Involved if an action is required

[1] Assessment Report
[2] Concerned Member State

Decentralised Procedure

Handled in the same way as the MRP

EudraVigilance – Experiences

- The common database for the EU

- Includes all serious adverse reactions from global sources for products approved in the EU

EudraVigilance, con'd

- All member countries have access to the database
- A personel access is given by the EMA after approval of the local NCA and a course held at the EMA

Format of the database

- The database follows the E2b-format

- It has additional administrative fields

Duplicate detection

Duplicates are (have been?) a great problem

- Literature cases
- Generics
- Publications on NCA homepage

This area is under investigation from EMA

How do we handle duplicate problem?

For new signals to be evaluated we run a line-listing

Sort by country, age (birth date), sex, date of event

If these data are similar we may look at the narratives

Generic products vs. NCEs

For NCE there are usually one or two MAHs

For generic products the number of MAHs may be high, meaning that no single MAH may have the reporting overview– then the authority has more relative responsibility to coordinate the issues

For these situations EudraVigilance may give a good overview of the total reporting situation

Importance of generics, cont'd

Preparat (M-)	2000	2001	2002	2003	2004	2005	2006
Losec	14	11	9	4	1	1	1
Losec Mups	47	37	31	18	9	8	4
Omeprazol Arrow				0	11	11	12
Omeprazol Bmm Pharma					0	7	10
Omeprazol Merck Nm	0			5	8	14	11
Omeprazol Ratiopharm				4	9	13	16
Omeprazol Sandoz				1	6	6	22
Total	61	48	41	32	43	60	76

Situations where we use the EudraVigilance Database

- Signal detection
- PSUR assessments

Some principles when reactions are analysed

Incidence in population	Reported incidence	Analysis easy/diff.	Where to look?
Rare	Low (>3-4 cases)	Relatively easy	PMS databases
Rare	Medium-high	Easy	PMS databases
…	…	…	
Common	Low	Not possible	Clin trials/ PMS databases
Common	Low-Moderate	Difficult	Clin trials/ PMS databases

Data from EudraVigilance

Data from different MAH's may be compared

Comparison of data for a given class may be made

Earlier detection / confirmation of findings may be made

Different MedDRA Levels may be used

Meddra Level	Example
SOC [system organ class]	Cardiac
HLGT [high level group term]	Cardiac arrhythmias
HLT [high level term]	Ventricular arrhythmias and cardiac arrest
PT [preferred term]	Torsade de Pointes

SMQ's [standardised MedDRA queries] may also be used

HLGT vs. PT

EudraVigilance and the Future

- New PharmaPackage December 2010
- New Regulation and Directive in 2012 (June)
- ***Regulation*** = Centrally approved products
- ***Directive*** = All other products

Where can they be found?

In Volume 1 on the following official address:

http://ec.europa.eu/health/documents/eudralex/index_en.htm

The PharmaPackage can be found here:

http://ec.europa.eu/health/human-use/pharmacovigilance/index_en.htm

The Importance of EudraVigilance will increase

Signal analysis in EudraVigilance will replace PSURs for some products

For generics the EudraVigilance is the single point for all relevant reports

Case retrieval for PSURs will be made from EudraVigilance

Con'd

All cases will be reported to EudraVigilance including nonserious reports and consumer reports

Will be an important tool for evaluating the risk management system for medicinal products

The importance of EudraVigilance for a new member state

Acute problems – get an overview of the worldwide/European/Serbian situation

PSURs and signal detection

Learn a few useful basic search methods

MAH reporting directly to EudraVigilance

Thank You for listening!