



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

Why is it so difficult to treat pregnant & breastfeeding women and what can EMA do to help?

Workshop on benefit-risk of medicines used during pregnancy and breastfeeding



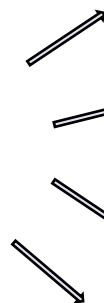
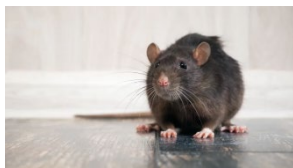
Presented by Corinne de Vries on 22 September 2020

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An agency of the European Union



Why is it so difficult to treat pregnant & breastfeeding women?





Reality of medicine use in pregnancy

130 million births globally per annum, 5 million in Europe

In high resource countries:

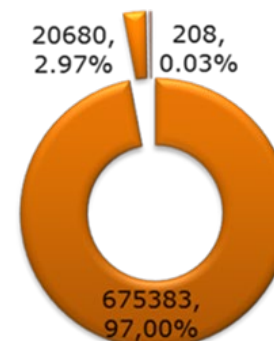
90% of pregnant women take medications in pregnancy

- 25% chronic diseases
- Infections
- Complications of pregnancy
- Unplanned pregnancies

Similar disorders, plus 10% postnatal depression,
in breastfeeding



696.271 live births in UK and Wales (2016)



1. Healthy live births
2. Congenital anomalies in the overall population – mostly due to genetic factors & 'bad luck'
3. Congenital anomalies due to environmental factors, incl. medication



The remit of regulators...

- Expectations from our stakeholders vs the legal basis for our work
- Product-specific benefit-risk, not relative benefit-risk
- Precautionary principle & being risk-proportionate



1 EMA/653036/2019 DRAFT FOR PUBLIC CONSULTATION
2 4 December 2019

- 3 **Guideline on good pharmacovigilance practices (GVP)**
4 **Product- or Population-Specific Considerations III: Pregnant and**
5 **breastfeeding women**



London, 14 November 2005
EMA/CHMP/313666/2005

COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE
(CHMP)

GUIDELINE ON
THE EXPOSURE TO MEDICINAL PRODUCTS DURING PREGNANCY:
NEED FOR POST-AUTHORISATION DATA



London, 24 July 2008
EMA/CHMP/203927/2005

COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE
(CHMP)

GUIDELINE ON RISK ASSESSMENT OF MEDICINAL PRODUCTS ON HUMAN
REPRODUCTION AND LACTATION: FROM DATA TO LABELLING



What can EMA do to help?

Better use of existing methods

- PSURs, EUDRAVigilance analyses, PK studies in breastfeeding
- Translated into good risk minimisation measures

Together with our stakeholders, tackle old problems with new solutions...

- Innovative non-clinical methods
- Epigenetics
- Hybrid study designs
- Human breast milk studies / biobank
- Sustainable infrastructure for evidence generation





Possibilities & data capture at different regulatory stages

Preclinical

- Better use of PK
- Development & regulatory acceptance of novel methods

Clinical trials

- Think differently about BR(AN)
- Obtaining the benefits while protecting women

Post authorisation

- Better use of existing & development of novel methods & infrastructure

Product communication

- Communicating uncertainty of risk
- Content and communication skills



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#PregnancyEMAWorkshop

Thank you for your attention

Further information

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