



European Medicines Agency
Evaluation of Medicines for Human Use

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<p>COMMITTEE FOR HUMAN MEDICAL PRODUCTS (CHMP)</p>

<p>EXPLANATORY NOTE ON IMMUNOMODULATORS FOR THE GUIDELINE ON ADJUVANTS IN VACCINES FOR HUMAN USE</p>

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The current version of the “*Note for guidance on adjuvants in vaccines for human use*” (EMEA/CHMP/VEG/134716/2004) lists compounds such as MF 59 and GM-CSF, as examples of adjuvants (footnote 2 of the guideline, p. 6/18). However, such products can also be administered separately and/or at a different time point from the vaccine antigen, in order to pre-condition the immune system, where both molecules are needed for vaccine activity.

According to Directive 2001/83/EC, an adjuvant is a constituent of the medicinal product. This is also reflected in the introduction of the Guideline on adjuvants in vaccines for human use, where it is stated that “*incorporation of adjuvants into vaccine formulations is aimed at enhancing, accelerating and prolonging the specific immune response towards the desired response to vaccine antigens*”. Hence, it is concluded that an adjuvant should be part of the (reconstituted) formulation that is administered. Compounds that are given separately and/or at a different time point are therefore not considered to be adjuvants and are called immunomodulators.

An adjuvant is intended to help the immune response by a local, simultaneous and concomitant action with the antigen. Immunomodulators pre-condition the immune system in a more systemic way.

Nevertheless, most of the principles of the Guideline on adjuvants in vaccines for human use are also applicable to immunomodulators.