

#### Introduction to the European Medicines Agency

EFA training for patient experts on allergy, asthma and COPD on getting involved with the EMA, 18 February 2014

Presented by: Isabelle Moulon Head of patients and healthcare professionals department





## **Key Principles**

- The EU is a Single Market for pharmaceuticals
  ~ 0.5 billion people
- In order to market a medicinal product in the EU, a company needs a Marketing Authorisation
- There are different ways ('Procedures') for a company to obtain a Marketing Authorisation
- The main scientific principle used in the evaluation of medicines is the **benefit/risk balance**, based on <u>quality</u>, <u>efficacy</u> and <u>safety</u> aspects
- Economic considerations are excluded from the assessment



# A European agency and medicines system: Why?

- Protect and promote public and animal health
- Pooling of best scientific expertise from across Europe for evaluation of medicines
- Facilitate availability of new medicines to patients
- Same product information to patients and healthcare professionals
- Single market for pharmaceuticals
- Benefits R&D industry
- Platform for discussion of public health issues



# A European agency and medicines system: How?

'One system, two routes for approval'

- Centralised European route attracts nearly all innovative medicines
- Mutual recognition + decentralised national routes mostly generics and some new indications for existing products



# European Medicines Agency: focal point of the centralised procedure

- 1 application
- 1 evaluation
- 1 authorisation for all EU
- 1 invented name
- 1 product information (SPC, Labelling, PL)
- All EU languages



The EMA is not responsible for pricing or reimbursement

Marketing Authorisation is granted by the European Commission



#### The various roles of the EMA



The Agency is responsible for:

- The evaluation of marketing authorisation for human and veterinary applications submitted by pharmaceutical companies
- The coordination of European **pharmacovigilance** (supervision of the medicines on the market)
- The provision of scientific advice on the development of medicines
- The evaluation of applications for orphan designation in EU
- The evaluation of **paediatric investigation** plans (or waivers)
- The evaluation of arbitration and referral procedures
- The provision of good quality and independent **information** on the medicines it evaluates to patients and health
- The coordination of Member States' **inspections** (GMP, GCP, GLP)



# Eligibility: "Mandatory Scope"





## Eligibility "Optional Scope"



Art 3(3) Generic of a product authorised via EMA

The centralised procedure attracts most innovative medicines. Decentralised and MRP mainly do generics and new indications for existing products



# A networking Agency

Member States have pooled their sovereignty for authorisation of medicines

- The Agency is designed to coordinate the existing scientific resources of Member States
- It is not intended to replace national authorities, but to be a partner in the system
- It is a networking agency, providing an interface between all partners
- All parties linked by an IT network (EudraNet)



## Our partners in Europe

- More than 45 national competent authorities dealing with human and veterinary medicines and access to a network of more than 2,500 European experts
- EU institutions: European Commission, European Parliament, other EU agencies (EMCDDA, EFSA, ECDC, Translations Centre)
- European Pharmacopoeia (Council of Europe)
- Medicines Control Laboratories Network



## A dynamic and constantly changing Agency

Taking on new tasks and responsibilities

- 2001: Orphan medicines (+ new committee)
- 2005 & 2008: Extended mandatory scope
- 2005: 'Biosimilar' and generic medicines
- 2005: Herbal medicines (+ new committee)
- 2007: Paediatric medicines (+ new committee)
- 2008/2009: Advanced therapies (+ new committee)
- 2012: Pharmacovigilance (+ new committee)
- 2013: Falsified medicines legislation



### **Development of Medicines**





## Drug Development Overview





### EMA Scientific Committees and working parties









#### **EMA-EU** Network

28 EEA Member States + 4,500 European experts

#### EU institutions: Commission - Parliament

**Management Board Committee for Human Committee for Veterinary Medicinal Products Medicinal Products** (CHMP) (CVMP) EMA **Committee for Orphan Paediatric Committee Secretariat Medicinal Products** (PDCO) (COMP) **Committee for Herbal Committee for** Pharmacovigilance Risk **Medicinal Products Assessment Committee Advanced Therapies** (HMPC) (PRAC) (CAT)



# Scientific Committee CHMP

- Formulate scientific opinions to the EC
  - . on medicinal products for human use (CAP)
  - . on arbitration/referral procedures
- Scientific Advice
- EU scientific and regulatory guidelines





- Chair (Dr. Tomas Salmonson)
- 1 member (+ 1 alternate) per MS
- 1 member (+ 1 alternate) NO IS
- 5 co-opted members





### **Committee Plenary Meeting**





# Scientific Advice



#### Scientific Advice



• Working Party of the CHMP



# Paediatric Development



## Paediatric Initiative - Objectives

#### Improve the health of children

- Increase high quality, ethical research into medicines for children
- Increase availability of authorised medicines for children
- Increase information on medicines

#### Achieve the above

- Without unnecessary studies in children
- Without delaying authorisation for adults





### Paediatric Initiative

- Obligation to study products in children
- Paediatric Investigation Plan (PIP) or Waivers for products for new marketing authorisation, extension of indications, new pharmaceutical forms
- Rewards in the form of extension of supplementary patent certificate
- PIP/Waivers requests to be submitted by end of human PK studies
- Incentives for old products of paediatric interest
- Coordination of a Network of EU paediatric networks
- Paediatric Committee (PDCO)



#### **Integration into Development Plan**





# Orphan Drugs



## **Orphan Medicinal Products**

#### Criteria:

- Life threatening or debilitating condition
- Epidemiological Prevalence <5/10.000
- No satisfactory methods exist or significant benefit over authorised products/methods
   Or
- Economical: unlikely to generate sufficient return on investment
- Committee for Orphan Medicinal Products (COMP) 2000

#### IMPORTANT:

- Designation for Orphan status (not Marketing Authorisation)
- Confirmation of Orphan status before Marketing Authorisation



# **Advanced Medicines**



# Advanced Therapies Medicinal Products (ATMPs)

- Gene therapy products
- Somatic Cell therapy products
- Tissue engineered products





# Scientific Committee CAT

- Formulate draft opinion on Advanced Therapy
- Medicinal Products for final approval by CHMP
- •ATMP classification (gene, cell, tissue)
- •ATMP quality and clinical data certification





- Chair (Dr. C. Schneider)
- 5 CHMP members (with alternates)
- 1 member (+ 1 alternate) per MS (not represented by CHMP member)
- 1 member (+ 1 alternate) NO IS
- 2 members (+ 2 alternates) patients organisations
- 2 members (+ 2 alternates) healthcare professionals





# Monitoring and supervision of medicines





### Pharmacovigilance and Risk Management

#### Pharmacovigilance

the science and activities relating to the detection, understanding and prevention of adverse drug reactions or any other drug-related problems

#### Risk Management System

⇒ a set of pharmacovigilance activities and interventions designed to identify, characterise, prevent or minimise risks relating to medicinal products, including the assessment of the effectiveness of those interventions

## Pharmacovigilance and Risk Management

#### What we know at the end of the clinical trial programme...

#### What we don't know!

- . What happens when the medicinal product is used in normal practice?
- . What is its adverse event profile?



# Pharmacovigilance and Risk Management Data Collection and Management





# Pharmacovigilance and Risk Management; Signal Detection and Data Analysis





# Scientific Committee PRAC

- Assess aspects of risk management (detection, assessment, minimisation and communication of risk of adverse reactions)
- PASS and pharmacovigilance audit
- Recommendations on questions on PhV activities



- Chair (Dr. June Raine)
- 1 member (+ 1 alternate) per MS
- 1 member (+ 1 alternate) NO IS
- 6 experts nominated by EC
- 1 member (+ 1 alternate) healthcare professionals
- 1 member (+ 1 alternate) patients organisations



#### How does the PRAC Work?




# Transparency and communication



### What information does EMA provide?

- EMA website main channel of communication
- Different information at different stages of life-cycle of medicines
- Information on medicines authorised via EMA
- Safety communication for all medicines authorised in the EU
- Agendas and minutes of all scientific committees



#### EMA website: www.ema.europa.eu





# Pre-authorisation (1): orphans and paediatrics

- Information on orphan designation
- Information on review of orphan designation at the time of marketing authorisation.
- Opinions and decisions on paediatric investigation plans.
- Information available in English.



# Public summary of opinion on orphan designation on EMA website





# Pre-authorisation (2): clinical trials (CT)

- Information on CT the EU Clinical Trials Register website: <u>https://www.clinicaltrialsregister.eu/</u>
- The Register allows to search for information on CT in the EU Member States.
- Information on:
  - trial design;
  - sponsor;
  - investigated product and therapeutic area;
  - the status of the trial.



# EU Clinical Trials Register:

#### https://www.clinicaltrialsregister.eu/

U Clinical Trials R	egister				Clinicaltrialsregist
arch for Clinical Trials					
enesse		Search	Reset Advanced Search		
xamples: Cancer AND Drug Name. Pneumonia lick here for more information	AND Sponsor Name.				
arch Tips: Under advanced search you can u em to your search terms in the text field.	ise filters for Country, Age	e Group, Gender, Trial P	hase, Trial Status, Date Range, Rare Diseases	and Orphan Designation. For these items you should us	e the filters and not add
ownload Options 🛛 🔊 Subscribe to	this Search				
		Query returne	d 1 Clinical Trial(s). Displaying page 1	of 1.	
udraCT Number: 2009-011018-51		Sponsor Protoco	ol Number: CUV029	Sponsor Name: Clinuvel Pharmaceuticals	Limited
Full Title: A Phase III, Multicentre, Doub Subcutaneous Bioresorbable Afamelanotic			udy to Confirm the Safety and Efficacy of	Start Date <sup>*</sup> : 2009-08-06	
Medical condition: Erythropoietic Proto	porphyria (EPP)				
	Version	SOC Term	Classification Code	Term	Level
			10015000	Erythropoietic protoporphyria	LLT
Disease:	9.1		10015289	=: / ···· · · · · · · · · · · · · · · · ·	
Disease: Population Age: Adults, Elderly	9.1		10015289	Gender: Male, Female	



### Authorisation/ Licensing

- EPAR summary in all EU languages
- Assessment report (scientific discussion)
- Product Information in all EU languages:
  - Summary of Product Characteristics;
  - Package leaflet;
  - Labelling.
- Risk Management Plan (soon!)



### EPAR summary on the EMA website





### Post-authorisation

 New therapeutic indications;

 New contraindications;



- Update of the EPAR summary;
  - Update of Product information;

• Other variations.

 Publication of relevant assessment report.



# Communication about safety referrals *Procedure*



PRAC recommendation

#### CHMP/CMD(h)

47



### Communication about safety referrals



- 'EMA public health communication'
- Single piece of information (integrates PR+Q&A into one document), composed of three sections:
  - Summary of the issue (for press and general public)
  - Information to patients
  - Information to healthcare professionals
- Explain any divergence with PRAC recommendation if applicable
- Syndicated to press, patients and healthcare professionals contacts

Example: Tredaptive



# Information on adverse drug reactions: http://www.adrreports.eu/

- This EU database displays information on 'suspected adverse drug reactions' for medicines authorised in the EU.
- A phased development: so far, only for medicines approved via centralised procedure.
- The reports are constantly updated.



# European database of suspected adverse drug reaction reports: <u>http://www.adrreports.eu/</u>





### Human medicines highlights Newsletter



<u>Delamanid</u> (delamanid)

Other medicines

Intended for the treatment of multidrug-resistant tuberculosis



### Conclusions

Information on medicines is a key factor of the safe and rational use of medicines. EMA provides understandable, up-to-date, evidence-based information on medicines.

Patients play a key role in the evaluation of medicines and the provision of information by the EMA.



#### Acronyms

- ADR = Adverse Reaction
- AR = Assessment Report
- CHMP = Committee for Medicinal Products for Human Use
- CD = Commission Decision
- D1, etc = Day 1 (procedural timeline)
- GCP Good Clinical Practice
- GLP = Good Laboratory Practice
- GMP = Good Manufacturing Practice
- LoQ = List of Questions
- LoOIs = List of Outstanding Issues

- MAH = Marketing Authorisation Holder
- MS = Member State
- OE = Oral explanation
- PASS = Post Authorisation Safety Study
- **PI** = product information
- PRAC = Pharmacovigilance Risk Assessment
  Committee
- PSUR = Periodic Safety Update Report
- RMP Risk Management Plan
- SmPC = Summary of Product Characteristics



## **Any Questions?**



# Thank you for your attention

