

The European Medicines Agency: a model of patient/consumer interaction

V International Conference on patient safety

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Access to medicines in the EU: the role of the EMA

How patients and consumers contribute to the work of the EMA





European Medicines Agency's role and responsibilities



The role of the European Medicines Agency

A decentralised Agency of the European Commission, created in 1995.

The Agency provides the Member States and the European Institutions with scientific advice on the evaluation of the quality, safety and efficacy of medicines (Human and Vet).

What does that mean

The Agency is responsible for:

- The evaluation of marketing authorisation applications submitted by pharmaceutical companies, for certain types of products
- Coordination of pharmacovigilance at European level (supervision of the medicines on the market)
- Provision of scientific advice on the development of medicines
- Evaluation of applications for orphan designation in EU
- Evaluation of paediatric investigation plans (or waivers)
- Provision of good quality and independent information on medicines it evaluates to patients and health professionals



The EMA is not responsible for:

- Controlling advertising
- Pricing and reimbursement
- Providing information on diseases (including therapeutic guidelines)

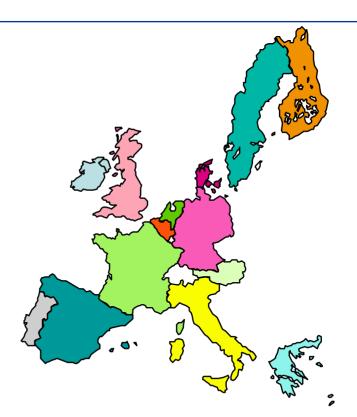
Marketing Authorisation - Key Principles

- The EU is a Single Market for pharmaceuticals approx. 0.5 billion people.
- In order to sell a medicinal product in the EU, a company needs a Marketing Authorisation
- There are a number of 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 mainly on quality, efficacy and safety aspects



Marketing Authorisation Procedures PRE - 1995

- 15 National Competent Authorities
- 15 Parallel National Reviews
- 15 Independent Marketing Authorisations
 - Poor resource utilisation
 - Divergent scientific opinions
 - Divergent patient / doctor information





Marketing approval for medicines today - Two European Systems

Centralised Procedure

(via EMEA)

Mutual Recognition
Decentralised
Procedure
(national licences)

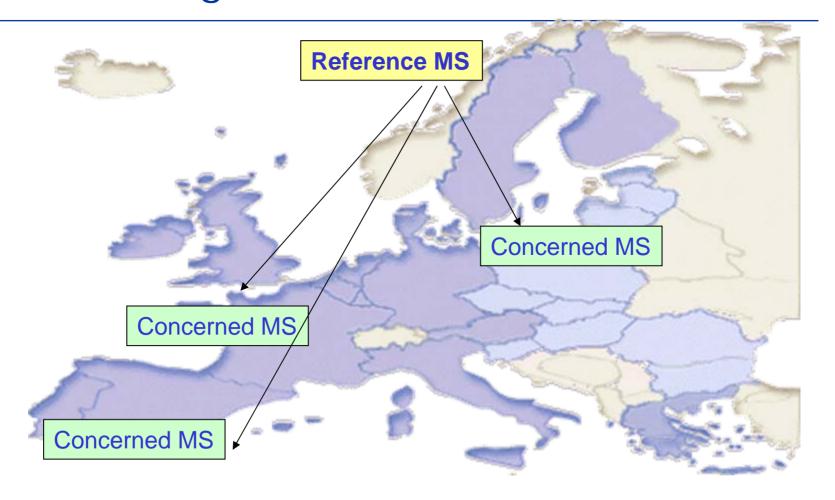
Both Systems allow



Better Resource Utilisation
Harmonised Scientific Opinions
Harmonised Information to Doctors
/ Patients



Mutual Recognition/Decentralised



Centralised Procedure

Creation of EMEA:

- •to manage the centralised procedure
- •to formulate scientific opinions



Sent to the European Commission:



(Pan European Marketing Authorisation)





Centralised Procedure

1 application

1 evaluation

1 authorisation for all EU

1 product information (SPC, Labelling, PL)

All EU languages



Which medicines are evaluated at the EMA?

- Rare diseases
- HIV, cancer, neurodegenerative disorders, diabetes
- auto-immune diseases, viral diseases
- All biotech products
- Gene therapy
- Monoclonal antibodies
- <u>+</u> Other innovative products



How does the Agency work? (1)

Scientific Committees:

- Committee for Medicinal Products for Human Use (CHMP)
- Committee for Medicinal Products for Veterinary Use (CVMP)
- Committee for Orphan Medicinal Products (COMP)
- Committee for Herbal Medicinal Products (HMPC)
- Paediatric Committee (PDCO)
- Committee for Advance Therapies (CAT)

Working parties:

give support to the Committees

How does the Agency work? (2)

Agency's secretariat:

gives technical, scientific and administrative support

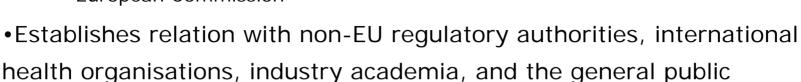
Experts:

 throughout the EU collaborates with Scientific Committees and Working Parties

The European Medicines Agency network

A unique structure

- •The Agency partners with:
 - More than 40 national competent authorities
 - 4000 EU Experts
 - European Parliament
 - European Commission







Role of the Agency on antimicrobial resistance

Work with many partners across EU to monitor and evaluate risks to human and animal health related to antimicrobial resistance:

- Human health: Jointly with ECDC, EFSA, SCENIHR
- Animal health: CVMP (2006-2010 strategy)



Agency's interaction with Patients' and Consumers' Organisations



Basis for interaction

Legal basis for interaction with consumers, patients and healthcare professionals

Agency's Road Map

Pharmaceutical Forum





Interaction with patients'/consumers' organisations

- Long experience since the agency was created
- Unique model of interaction:
 - framework of interaction and,
 - selection criteria

Framework of interaction

The framework comprises:

- The scope of the interaction
- The objectives to be achieved
- The working methodology
- The monitoring (including performance indicators)

Ultimate goal:

- Involve patients in the Agency's activities
- Better inform patients

Framework of interaction

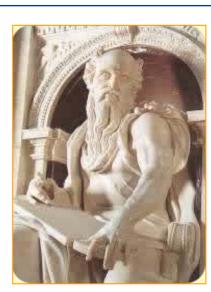
Principle of patient empowerment:

Patient involvement/patient information/patient safety

Role of patients/consumers' organisations as multipliers of the interaction (promoting patient safety)

Selection criteria for involvement of patients' organisations

- Legitimacy
- Mission/objectives
- Activities
- Representativity
- Structure
- Accountability and Consultation Modalities
- Transparency



Eligible organisations (1)

Permanent Call for interest to work with the EMEA:

Launched in 2005 and "continuous"

List of eligible Patients' & Consumers' Organisations published on the Agency's website

Eligible organisations (2)

Working with patients and consumers

Eligible organisations

The following patients' and consumers' organisations fulfil the criteria for eligibility and may be involved in the activities of the European Medicines Agency;

Name of organisation	
Alzheimer Europe (AE) view summary information	
European AIDS Treatment Group (EATG) view summary information	
European Federation of Allergy and Airways Diseases Patients' Associations (EFA) view summary information	
European Cancer Patient Coalition (ECPC) view summary information	
European Federation of Neurological Associations (EFNA) <u>view summary information</u>	
European Genetic Alliances' Network (EGAN) view summary information	
European Heart Network (EHN) <u>view summary information</u>	
European Multiple Sclerosis Platform (EMSP) view summary information	
European Myeloma Platform (EMP) <u>view summary information</u>	
European Older People's Platform (AGE) view summary information	
European Organisation for Rare Diseases (EURORDIS) view summary information	
European Parkinson's Disease Association (EPDA) <u>view summary information</u>	
European Patients' Forum (EPF) <u>view summary information</u>	
European Public Health Alliance (EPHA) view summary information	
Global Alliance for Mental Illness Advocacy Networks (GAMIAN-Europe) <u>view summary information</u>	
Health Action International (HAI) view summary information	
Insulin Dependent Diabetes Trust (IDDT) view summary information	
International Alliance of Patients' Organizations (IAPO) view summary information	
International Diabetes Federation (IDF) <u>view summary information</u>	
International Patient Organisation for Primary Immunodeficiencies (IPOPI) view summary information	
Myeloma Euronet (ME) <u>view summary information</u>	
Rett Syndrome Europe (RSE) <u>view summary information</u>	
Thalassaemia International Federation (TIF) <u>view summary information</u>	
The European Consumers' Organisation (BEUC) <u>view summary information</u>	
The International Confederation of Childhood Cancer Parents Organisations (ICCCPO) view summary inform	ation

Patient involvement in the Agency's activities: so-far experience (1)

- Full members of:
 - Management Board
 - Committee for Orphan Medicinal Products (COMP)
 - Paediatric Committee (PDCO)
 - Committee for Advance Therapies (CAT)

Patient involvement in the Agency's activities: so-far experience (2)

- Patients and Consumers Working Party (PCWP)
- Review of Product Information:
 - EPAR summaries, Package Leaflets, safety information—Q&As-)
- CHMP (Ad-hoc collaboration):
 - Input on assessment of products (e.g. thalidomide, tysabri,etc)
 - Experts in scientific advice/protocol assistance
 - Input in guideline preparation
 - Observers in Pharmacovigilance working party (pilot phase)
- Regular participation in Agency's workshops and conferences

EMA Scientific Committees Working Party with Patients' and



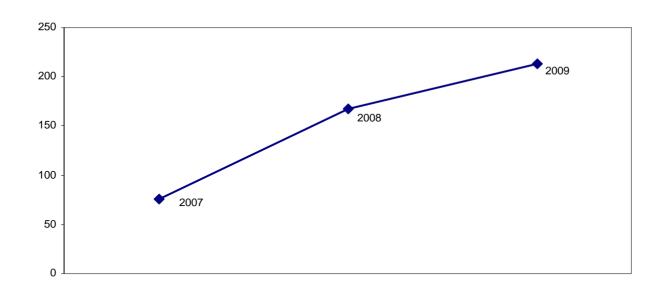
PCWP Members: 15/25 Eligible Organisations + representatives from Agency's Scientific Committees (CHMP, COMP, HMPC, PDCO and CAT)

Co-Chair: Isabelle Moulon (EMA)/Nikos Dedes (EATG)

4 meetings per year (one joint with Healthcare professionals)



Number of patients/consumers involved in EMA activities in recent years





Outcome

Which is the **added value** of involving patients in the scientific process?

- in general, patients bring real-life experience of the disease and its current therapeutic environment; as a consequence:
 - it enriches regulatory outcome by complementing it with the views of those directly affected by regulatory decisions,
 - it increases confidence and trust in the regulatory process
 - it incurs in higher level of transparency

Issues to be considered

- Lack of resources in the organisations
- Need for training to understand the regulatory environment
- Need to define the roles of the patient in the different activities/scientific committees
- Difficulty to find suitable experts (e.g. language barrier)

The way forward in involving patients in the work of the agency

- Revision of the current framework of interaction is ongoing:
 - Define the role of patients/consumers in the agency's scientific committees
 - Further involve patients in benefit/risk evaluation
 - Foster involvement in the preparation and dissemination of EMA information intended to the public (including safety communication)
 - Participation in the Pharmacovigilance working party
 - Provision of specific (financial) support



Thank you for your attention