



Single Dossier: Will national early stage trials suffer or benefit? Regulatory Authority view

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Implementation of the EU CT Regulation – Opportunities and Threats to Early Medicines Development. Brussels, 20th of May 2015

Part I -EU

Single CT dossier

Part II - National

- Protocol
- Investigator's Brochure
- IMPD/AMPD
- GMP compliance
- Labelling
- Scientific Assessment/PIP

- Informed Consent
- Compensations/payments
- Recruitment arrangements
- Damage compensation
- Data protection
- Sites and investigators
- Biological samples

EU Portal

EU Data base

Key information

- ✓ The rationale for the dose/dose escalation and treatment schedule based on available preclinical and clinical data.
- ✓ IMP level of risk and measures taken to minimize CT risks.
- ✓ Sequential treatment of subjects and justification of the period of observation before the next subject receives a dose.
- ✓ Clear rules for stopping dose escalation
- ✓ Detailed decision criteria and time of decision to allow progression to further part (integrated protocols)
- ✓ Independent Data Monitoring Committee (working procedures)
- ✓ Contraception and pregnancy test measures
- ✓ Reference Safety Information

Key information

- ✓ CTFG Recommendations related to **contraception and pregnancy testing** in clinical trials
- ✓ CTFG Recommendations for **integrated protocols and for novel-novel CT** in Q &A document
- ✓ CTFG Q & A **Reference Safety Information**

<http://www.hma.eu/ctfg.html>

- ✓ The **investigators should be able to break the blind without restrictions in case of an emergency**

http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/q_and_a/q_and_a_detail_000016.jsp&mid=WC0b01ac05800296c5&jseabled=true

Clinical Trials Facilitation Group

VHP (voluntary harmonization procedure)

Coordinated assessment of part I by the concerned Competent Authorities (certain countries also involve Ethics Committee in protocol and IB assessment)

- For CT with **2 or more Member States**
- **Single part I CT dossier**, application to CTFG.
- **Single list of questions, 60 days max.**
- **Quick official national application afterwards** (authorisation <10 days from a valid application)
- Also applies to substantial amendments



Clinical Trials Facilitation Group

VHP (voluntary harmonization procedure)

CTFG: <http://www.hma.eu/ctfg.html>

Guidance and data

Contact and submissions:

VHP-CTFG@VHP-CTFG.EU

or Tel.:+ 49 6103 771811



Working with electronic CT dossiers implies **certain changes** in order to benefit from information technologies

1. Data/Information to be provided only once
2. Quick access to key data/information



e-CT dossier

1. Cross-references instead of duplicated information

- ***Structured protocol summary:*** Main CT characteristics



Fostering Responsible Data Sharing through Standards

Rebecca Kush, Ph.D., and Michel Goldman, M.D., Ph.D.

N Engl J Med 2014; 370:2163-2165 (**Innovative
Medicines Initiative**)

The diverse ways in which data are collected and reported in clinical studies make it hard to query across data sets, pool and share data, or integrate data for multi-trial analyses to gain new scientific insights. Use of standard data formats can solve these problems.

1. Cross-references instead of duplicated information

- *Structured protocol summary*: Main CT characteristics
- **Cover letter/application form**: specific info for the application (e.g. MS concerned, part I, part II, remarks...)
- **Protocol**: CT design/conduction.
- **Investigator's Brochure**: Non clinical and clinical data, Reference safety information, overall risk benefit analysis (sponsor protocol code number plus EudraCT number)
- **IMPD/AMPD**: Quality/manufacturing information;
- **EU MP number (application)**: Product identification, type, qualitative composition, mechanism of action, manufacturers

2. Showing traceability of changes within CT

Indispensable to interpret CT results.

In substantial modifications:

- The **protocol's summary should be updated** by providing only the modified pieces of information every time.
- With respect to documents:
 - **Summary of changes** with respect to previous version **and justification for them.**
 - **Updated document** identified **with a new version date.**

3. Showing traceability of changes within IMP (AMP)

In relation to non authorised IMP/AMP

Necessary

- IMPD versions should be related to the corresponding CTs (EU CT numbers), keeping track of Substantial Modifications to the IMPD (Q).
- To keep updated EU MP number information.
- MS concerned for one CT on a specific IMP should have access to all IMPD and IB versions in the EU Database.

What is a non authorised MP requiring an EU MP number?

IMP suffer many changes along CT development.

A pharmaceutical form of an active substance produced according to the manufacturing procedure defined in the IMPD/AMPD.

Comment: Strengths should be an attribute of a pharmaceutical form. Need for a numbering system that permits to relate all strengths of a pharmaceutical form, and all pharmaceutical forms of a specific IMP.



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productos sanitarios

Thank you very much!!

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