Office for Registration
of Medicinal Products, Medical Devices and Biocidal Products

41 Ząbkowska Str., 03–736 Warsaw, Poland; phone +48 22 492–11–00, fax +48 22 492–11–09
NIP 521–32–14–182 REGON 015249601

Opinion from Pharmacovigilance Department on the "IMPLEMENTING MEASURES IN ORDER TO HARMONISE THE PERFORMANCE OF THE PHARMACOVIGILANCE ACTIVITIES PROVIDED FOR IN DIRECTIVE 2001/83/EC AND REGULATION (EC) NO 726/2004 THE CONCEPT PAPER SUBMITTED FOR PUBLIC CONSULTATION"

Deadline for Public Consultation: 7 November 2011

CONTACT:
Responses should be sent preferably by e-mail to sanco-pharmaceuticals@ec.europa.eu, or by post to Directorate-General for Health and Consumers, Unit SANCO/D/3, BE-1049 Brussels. The subject of the letter/email
should refer to "PCIM/11/01 - Public Consultation on implementing measures for pharmacovigilance".

Ad Pharmacovigilance System Master File

Consultation item no. 1: Should additional processes and pharmacovigilance tasks be covered?

The Office for Registration's comment:
The proposed list of processes is very general. It should be considered to include detailed description of some activities, such as: variation to SmPC implementation, handling of databases of individual case safety reports, and its compatibility with EV system (or E2B /ISO standards).

Consultation item no. 2: The aim of the pharmacovigilance master file is two-fold: to concentrate information in one global document and to facilitate maintenance by uncoupling it from the marketing authorisation. Therefore changes to the content of the master file will be no longer subject to variation obligations. Would it be nevertheless appropriate to require the marketing authorisation holder to notify significant changes/modifications to the master file to the competent authorities in order to facilitate supervision tasks? If so, how should this be done? Should the master file contain a date when it was last reviewed?

The Office for Registration's comment:
The concept of Pharmacovigilance System Master File is that it is not submitted as a part of registration dossier. It is also not required to submit the first version of the document, unless competent authority is asking for it. Therefore notifying about change / modification of the PSMF would not be reasonable.
PSMF should contain the date when it was last reviewed.

Consultation item no. 3: Is it necessary to be more precise on potential delegation, e.g. in the case of co-marketing of products? Please comment.

The Office for Registration's comment:

The pharmacovigilance master file should be stored as single printed version, signed by QPPV.

Potential delegation is satisfactory described.

Consultation item no. 4: Should a copy of the audit report be retained in the master file? Would it be appropriate to require documentation of audit schedules?

The Office for Registration's comment:
Yes, it should. Audit report would be valuable source of information for further reference.
Yes, it should.

Consultation item no. 5: Overall, do you agree with the requirements as regards the content and maintenance of the pharmacovigilance master file? Please comment.

The Office for Registration's comment:
Yes, we agree.
As stated above, the pharmacovigilance master file should be stored as single printed version, signed by QPPV.

Consultation item no. 6: Is there a need for additional quality procedures, e.g. in relation to study reporting in accordance with Article 107p of the Directive, in relation to communication on pharmacovigilance between the marketing authorisation holder and patients/health professionals; in relation to processes for taking corrective and improvement actions or in relation to the detection of duplicates of suspected adverse reaction reports in the Eudravigilance database?

The Office for Registration's comment:
Yes, it would be valuable to introduce such quality procedures.

Consultation item no. 7: Do you agree with the requirements for marketing authorisation holders? Please comment.

The Office for Registration's comment:
Yes, we agree. It is good that timelines are described.

Consultation item no. 8: Do you agree with the quality system requirements? Please comment, if appropriate separately as regards requirements for marketing authorisation holders, national authorities and EMA.

The Office for Registration's comment:
Yes, it would be valuable to introduce quality procedures.

Consultation item no. 9: For efficiency reasons a 'work sharing' procedure could be appropriate for the monitoring of medicinal products or active substances contained in several medicinal product. However, do you see a risk in cumulating all tasks (for the authorisation, PSUR scrutiny and Eudravigilance monitoring) in one Member State, as thereby the benefits of parallel monitoring may be lost ("peer review" system)? Additionally, it may be envisaged to extend 'work sharing' to all medicinal products (including all centrally approved products) and to appoint a lead Member State in addition to EMA (Article 28a(1)(c) of Regulation (EC) No 726/2004). Please comment.

The Office for Registration's comment:
It doesn't look that this proposal would be of advantage to signal detection.
We see a risk in cumulating all tasks in one Member State.

Consultation item no. 10: In the Commission's view the aim of this part is to establish common triggers for signal detection; to clarify the respective monitoring roles of marketing authorisation holders, national competent authorities and EMA; and to identify how signals are picked up? Are the proposed provision sufficiently clear and transparent or should they be more detailed? If so, which aspects require additional considerations and what should be required? Please comment.

The Office for Registration's comment:
Statistical methods at current level might be use only as supportive tools to signal detection.
WHO experience should be taken into account in this aspect.

Consultation item no. 11: Do you agree with the proposed terminology? Please comment.

No further comment on question 11.

Consultation item no. 12: Do you agree with the list of internationally agreed formats and standards? Please comment.

No further comment on question 12, since those standards are under development.

Consultation item no. 13: Is there additionally a need for transitional provisions as regards certain aspects of this implementing measure, especially in relation to the specifications on format and content? Please comment.

The Office for Registration's comment:
Yes, there is a need for transitional provisions.

Consultation item no. 14: Do you agree with the proposed format and content? Please comment.

The Office for Registration's comment:
We agree with proposed format and content.

Consultation item no. 15: Do you agree with the proposed format and content? Please comment.

The Office for Registration's comment:
We agree with proposed format and content.

Consultation item no. 16: Do you agree with the proposed format and content? Please comment.

The Office for Registration's comment:
The proposed format of PSUR is more complex including additional data (e.g. data from clinical trials, information on benefit). It seems that the document will be very broad. Evaluation of such document would be more difficult.

Consultation item no. 17: Do you agree with the proposed format? Please comment.

No further comments to question 17.
Only post-authorisation safety studies are described in Concept Paper.
Are there any plans to include post-authorisation efficacy/effectiveness studies as well?