



EUROPEAN COMMISSION  
HEALTH AND FOOD SAFETY DIRECTORATE-GENERAL

Health systems and products  
**Medicinal products – authorisations, EMA**

PHARM 676

**PHARMACEUTICAL COMMITTEE**

**22 October 2014**

**73<sup>rd</sup> meeting**

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SUMMARY RECORD

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The Pharmaceutical Committee held its 73<sup>rd</sup> meeting on 22 October 2014, in Brussels, chaired by Sabine Jülicher, Head of Unit SANTE D5 - *Medicinal products – authorisations, EMA*.

**Agenda**

- **The draft agenda (PHARM 660) was adopted, without accepting the request to table point AOB b for discussion.**

## **1. Interpretation of Pharmaceutical legislation**

### **➤ 1a) Ongoing court cases**

The Commission called the Committee's attention to some pending cases as well as recent rulings of the European Court of Justice and the General Court, especially:

- Case C-269/13P, judgment of 10 April 2014 (Acino v Commission)
- Case C-358/13, judgment of 10 July 2014 ('Legal high')

Additionally, reference was made to the withdrawn case C-661/13 and two pending cases (E-16/14 and T-672/14).

### **➤ 1b) Legal and regulatory news (New pieces of legislation, COM guidelines)**

The Committee was informed about new regulatory acts and Commission Guidelines that have been adopted since the last Pharmaceutical Committee held in March 2014.

## **2. Implementation of Pharmaceutical legislation**

### **➤ 2a) Relation between pharmaceuticals regulatory framework and timely access of patients to medicines: Reflection on difficulties and opportunities – Follow up from the 72<sup>nd</sup> meeting and next steps**

In the 72<sup>nd</sup> meeting of the Pharmaceutical Committee the Commission services asked the members to give their comments on a number of points regarding early access of patients to innovative medicines. 13 Member States (MS) already replied and the Commission would welcome additional feedback at any stage.

The European Medicines Agency (EMA) presented the initial experience of the Adaptive Licensing pilot project: it is proposed to rename the project “Adaptive Pathways”, as the term “licensing” has generated confusion about the scope of this project, which aims at optimising development pathways, not at instituting new regulatory tools. Adaptive Pathways allow a flexible brainstorming discussion with applicants, and is a lifecycle approach, therefore discussions will also involve the experts of the National Competent Authorities (NCAs) representatives in the Pharmacovigilance Risk Assessment Committee (PRAC), the Paediatric Committee (PDCO) and the Committee for Orphan Medicinal Products (COMP) where applicable.

The characteristics of products eligible for the Pilot were explained: an iterative development plan (for example, starting in a well-defined subpopulation and subsequently expanding, or obtain a Conditional Marketing Authorisation, perhaps on the basis of surrogate endpoints and confirm); the use of Real World Data (in principle both for safety and efficacy) to supplement Clinical Trials; and the need for input of all stakeholders, particularly the Health Technology Assessment (HTA) bodies. Unmet medical need is also an important feature that allows full use of existing regulatory tools.

So far, 28 products have undergone the initial screening, and 9 were selected for an in-depth discussion with the Adaptive Licensing Review Group. The selected cases also include Orphan, advanced-therapy-medicinal-products (ATMP) and small- and medium-sized-enterprise (SMEs). HTAs that have been more involved in the pilot include UK, NL, SW, IT and it was commented that a wider approach should be fostered, also to identify obstacles to participation and implementation in other MS.

The Commission presented a summary of the Member States' comments received concerning both EMA's pilot project on adaptive licensing (AL) as well as the implementation of the EU regulatory framework on pharmaceuticals from the angle of innovation and timely patient access to medicines.

It was agreed that this discussion should be continued at a more technical level and therefore a Group of Experts on "Safe and Timely Access of Medicines to Patients" (STAMP) will be soon created. This group will be used as a flexible and dynamic forum for discussion focusing on: (i) the follow up of EMA's pilot project (ii) identifying issues related to the implementation of the EU Pharmaceutical legislation (iii) exchanging views and information on experiences and initiatives between the MS and (iv) identifying ways to further improve safe and timely access and availability of medicines for patients. EMA will regularly inform the STAMP group on developments of the AL pilot project.

The discussions are expected to start early in 2015 and the members are invited to send their proposals for topics for discussion by the end of November 2014. From a practical point of view, the invitation will be sent to the Permanent Representations. The Pharmaceutical Committee will be regularly informed on the outcomes of discussions at the STAMP group.

On the question whether HTA authorities could become members of the STAMP group, the COM clarified that under the Cross Border Directive there is already a network gathering HTA authorities and representatives from Ministries. Communication between the HTA network and the STAMP will be facilitated by the Commission.

#### ➤ **2b) 50 years of pharmaceutical legislation in 2015**

The Committee was updated regarding the activities the Commission intends to undertake to mark the 50th birthday of the Pharmaceutical legislation in 2015 (Directive 65/65). The Commission plans to organise a conference in Brussels in the second half of 2015, but also invited Member States to consider communication activities.

#### ➤ **2c) State of play on the preparations for the application of the Clinical Trials Regulation**

The Commission presented the planning of works as regards the preparation of necessary implementing measures required by the Clinical Trials Regulation (Regulation (EU) No 536/2014), adopted on 16 April 2014. The Commission informed that the priorities are the adoption of the Implementing Regulation on Good Clinical Practice (GCP) inspections and of

the Delegated Regulation on Good Manufacturing Practice (GMP) as well as update of the GMP guidelines. The Commission declared that its intention is to complete an update of all relevant guidelines and documents. In executing these tasks the Commission intends to work closely with the ad hoc group on clinical trials and in consultation with the relevant groups at EMA. The preliminary discussion on the new Regulations took already place on the meeting of the ad hoc group on 6 June 2014. The Commission informed that it will propose working documents on the new Regulations for the discussion on the next meeting of the ad hoc group on 1 December. The Commission stressed that it is fully involved in the activities of the EMA expert group on the preparation of the EU Portal and Database and it follows closely the work of the Clinical Trial Facilitation Group (CTFG). The coordination of all the preparatory activities is ensured by the Clinical Trials Coordination Group, to which Commission is party.

The Commission informed as well that the majority of the Member States have already appointed their contact persons, as required by Article 83 of the Regulation on Clinical Trials. The Commission invited the remaining Member states to communicate their nominations.

The EMA gave an update on progress with preparation of the clinical trial portal and database which it is required to develop in accordance with articles 80-82 of the clinical trial Regulation (EU) No. 536/2014. The Agency thanked the Permanent Representatives for nominating delegates to the wording group established to support interactions between the Agency and Member States in preparation of the portal and database. Meetings with the expert group have taken place regularly since January 2014 (approximately monthly) and the full group of all Member States has met for the first time on 11 September 2014 and will meet again in November 2014 and quarterly thereafter in 2015 and 2016. The Agency will continue progressing with the detailed design of the system and its development in 2015. Monthly meetings with the expert group will continue in 2015 and fortnightly or more often with the subgroups formed to address specific aspects (the latter meet by teleconference or Adobe connect). Monthly meetings are also held with Stakeholder groups (sponsors (commercial and non-commercial), patients and consumers and health care providers). The Agency with the Member States and Commission has prepared the draft Functional Specifications for the portal and database (in accordance with article 82 of the Regulation) and these were released for public consultation on 10 October 2014. The responses to the consultation will be discussed with the expert group on 7 November, with the expert and stakeholders on 21 November and then with the meeting with all Member States on 26 November 2014 following which they will be submitted to the EMA Management Board for endorsement at its meeting of 18 December 2014.

The Agency emphasised its commitment to defining the document, data and technical standards for the interface with Member State systems at an early stage as this is important to the development of both the portal and database at Agency level and of Member State systems at national level. The Committee was broadly welcoming of the progress being made and recognition of the needs of Member States in terms of the aforementioned interface, of the national calendars for timing of activities particularly those with very short time frames and of the commitment of the Agency for Member States to be closely involved throughout the design and development in order to ensure that the system meets the requirements and is fit for purpose. Everyone recognised the significant challenges that the implementation of the Regulation brings with it and the need to work closely together. There will also be careful attention to training both for Member State experts and for sponsors, once the system has been developed and in the period prior to the Regulation coming into application.

➤ **2d) Summary of comments to study on availability of medicines for human use**

The Commission presented the summary of comments to the external study report on the availability of medicinal products for human use (document PHARM 670). It was agreed that when putting the report on the web page of the Committee, together with all the Member States' comments, the disclaimer will be reinforced to draw the attention to some factual mistakes that have been identified. The Commission clarified that availability issues could be discussed, as necessary, within the new Commission Expert Group on Safe and Timely Access to Medicines for Patients (STAMP).

**3. Pharmaceuticals in the Environment**

**Strategic approach to pollution of water by pharmaceutical substances: feedback from EU workshop 11/09/2014**

The Commission informed the Committee on the EU workshop organised by the Commission (DG ENV & SANTE) on the development of a strategic approach to pollution of water by pharmaceutical substances which took place on 11 September 2014.

The main findings of the BIO IS study conducted for the Commission were presented.

The key messages were that the strategic approach should ensure that the benefits of medicinal products are preserved and at the same time that their impact on the environment is minimal. It concerns a shared responsibility between public services, the pharmaceuticals industry, environmental experts, doctors, pharmacists and patients, veterinarians and farmers.

The strategic approach is planned to be delivered by the Commission by September 2015.

**4. Pharmacovigilance**

➤ **4a) Report on the performance of pharmacovigilance tasks by the Member States**

The Commission drew the Committee's attention to the requirement under Article 108b of Directive 2001/83/EC for the Commission to make public a report on the performance of pharmacovigilance tasks by the Member States by July 2015. The Commission informed the Committee that to facilitate the collection of information for the report a template would be circulated early in 2015.

The Committee was informed that on 2 May 2014 a report on the pharmacovigilance tasks of the European Medicines Agency that had been completed during the first year of application of the new pharmacovigilance legislation (July 2012 to July 2013) had been made available<sup>1</sup>. A short presentation of some highlights of the report was given.

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<sup>1</sup> [http://ec.europa.eu/health/files/pharmacovigilance/2014\\_ema\\_oneyear\\_pharmacov\\_en.pdf](http://ec.europa.eu/health/files/pharmacovigilance/2014_ema_oneyear_pharmacov_en.pdf)

➤ **4b) Update on the Reports of Member States pharmacovigilance audits**

The Commission informed the Committee that an overview of the 2013 reports of the Member States' audit of their pharmacovigilance systems was being prepared and would be circulated to the Committee when finalised.

**5. Legislative issues**

➤ **Paediatrics: “Road to 2017”**

The Commission provided the Committee with an indicative planning of actions the Commission considers in order to prepare the 10-year report on the Paediatric Regulation, which should be presented in 2017. In this context, the Commission asked Member States to share information, studies or data that could be used for this exercise. It was agreed, that the Commission will outline in a post-meeting note in more detail the data it is looking for.

**6. International developments**

➤ **6a) Update on multilateral collaborations:**

**i. International Conference for Harmonisation of Technical Requirements of Pharmaceuticals for Human Use (ICH)**

The Commission gave a presentation to the Committee about the state of play regarding the ongoing reform of ICH. The Commission explained what has been achieved so far and the issues which remain to be resolved. Despite diverging views between the ICH parties, the intention is to reach overall agreement at the next ICH meeting in Lisbon (8-13 November 2014).

**ii. International Pharmaceutical Regulators Forum (IPRF)**

The Commission informed the Committee on the outcome of the last IPRF meeting and on the main topics that were due to be discussed at the next IPRF meeting in Lisbon (10-11 November 2014). Given the interest of several Member States to receive more detailed information on the ongoing activities of the different working groups of IPRF, it was agreed that the Commission would invite all Member States and EMA to a dedicated phone conference on this matter in advance of the next IPRF meeting.

**iii. International Coalition of Medical Regulatory Authorities**

The Commission gave a presentation to the Committee on the International Coalition of Medical Regulatory Authorities (ICMRA). The ICMRA is a voluntary, high-level, strategic coordinating, advocacy and leadership entity of regulatory authorities that work together to address current and emerging human medicine regulatory and safety challenges globally, strategically and in an on-going, transparent and institutional manner, provide direction for areas and activities common to many regulatory authorities' missions, identify areas for potential synergies, wherever possible, leverage existing initiatives/enablers and resources.

ICMRA will provide a global architecture to support enhanced communication, information sharing, crisis response and address research gaps. The ICMRA has established interim rules for the next two years. Some Member States whose National Competent Authorities are not currently participating in ICMRA, indicated their interest to join the Coalition. The next Meeting of ICMRA will take place on 20-21 November 2014 in Beijing.

➤ **6b) Update on bilateral negotiations, notably the Transatlantic Trade and Investment Partnership (TTIP)**

The Committee was informed of the main developments of the ongoing negotiations with the United States in the framework of the Transatlantic Trade and Investment Partnership (TTIP) for the sector of medicinal products. The objective of Mutual Recognition of GMP inspections has the highest priority. In order to facilitate technical information on the EU and US systems amongst regulatory authorities, the Mutual Reliance Initiative was established. Inspectorates from Member States are closely involved in this process through the GMP/GDP Inspectors Working Group. The Commission informed Member States that it would provide financial support to the audits that are due to take place in 2015 in the framework of the Joint Audit Program as well as to a mission in the United States.

The Committee was also informed on recent developments regarding Biosimilars as well as on the other regulatory topics that are currently under consideration in the TTIP.

➤ **6c) Biological Qualifier**

The Commission informed briefly that in July 2014 the World Health Organisation International Nonproprietary Names (INN) Expert Group launched a public consultation on a proposal for a Biological Qualifier. The expert group met on the third week of October, during which an open session for stakeholders was also held. The INN secretariat informed that more than 100 comments were received, which will be reviewed by the Expert Group.

It is the intention of WHO to explore the possibility of holding a meeting with stakeholders in conjunction with the next INN Consultation which is scheduled for April 2015 (dates still to be confirmed) to make the best and most transparent use of the comments received.

During the open session some stakeholders gave presentations to give their point of view on the Biological Qualifier.

Prior to the open session some of these stakeholders also held meetings with the Commission to inform of their positions. The positions known from stakeholders were highlighted to the Pharmaceutical Committee.

Once the executive summary of the meeting will be available the link to the WHO website will be shared with the MS.

**7. A.O.B.**

➤ **7a) Update on antimicrobial resistance (AMR) – World Health Organisation input**

The Commission presented an update of the implementation of the 12 actions included in the 5-year Action Plan against the rising threats from Antimicrobial Resistance, including the activities related to Action 8 about international cooperation.

Recently the Commission provided a response to the consultation of the WHO on a Global Action Plan on AMR. The Organisation for Economic Co-operation and Development is evaluating the possibility to conduct a study on the economic impact of AMR. The progress report of the Transatlantic Cooperation on AMR (TATFAR) between the European Union and the United States of America was published on 13 May 2014. In the context of the bilateral cooperation between China and EU it is being discussed whether a bilateral meeting will take place in the beginning of 2015. A detailed overview of the 12 actions covered by the Action Plan, including the operational objectives, the concrete activities and the deadlines can be found at the website of DG SANTE ([http://ec.europa.eu/health/antimicrobial\\_resistance/policy/index\\_en.htm](http://ec.europa.eu/health/antimicrobial_resistance/policy/index_en.htm))

➤ **7b) Adoption of legal proposal on veterinary medicines**

The Commission presented to the Committee the main objectives and key provisions of the two proposals adopted by the Commission on 10 September 2014 on veterinary medicines: (1) the Proposal for a Regulation of the European Parliament and the Council on veterinary medicinal products and (2) the Proposal for a Regulation of the European Parliament and the Council amending Regulation (EC) No 726/2004 laying down Community procedures for the authorisation and supervision of medicinal products for human and veterinary use and establishing a European Medicines Agency.

Three Member States expressed concerns as to the rationale for amending Regulation (EC) No 726/2004.

➤ **7c) Update on the study on off-label use**

The COM services informed the Committee about the state of play of the terms of reference (ToR) for the study on off-label use. On 3 June 2014, the Commission services presented to the EMA Human Scientific Committees's joint working parties with healthcare professionals' organisations and with Patients' and Consumers' organisations (HCPWP-PCWP) the aim and scope of the study. Comments were received from these parties and the terms of reference are currently being finalised internally. The ToR should be published before the end of the year and the study should start in the first trimester of 2015, if a consultant is selected.

➤ **7d) New Voting Rules in Committees**

COM services presented to the members the new voting system introduced by the Lisbon Treaty, which as from November 2014 will apply in Comitology Committees. Under the new rules a qualified majority will be attained if:

1) at least 55% of the Member States vote in favour. This means that a qualified majority has to comprise at least 16 Member States.

2) the Member States voting in favour represent at least 65% of the population of the Union.

COM services informed that a note concerning this issue was sent to all Permanent Representatives, Member States being members of the human and veterinary standing committees.

COM services took the occasion to discuss the length of the written procedure of the comitology procedure in the human committee. The EU legislation foresees a delay of 22



days, which can be shortened in case the decision has to be taken urgently, with a minimum of 5 working days, except in exceptional circumstances.

In addition to this, COM services proposed that in case the CHMP would have performed the assessment under the accelerated procedure, this will be highlighted by COM services when launching the comitology phase. COM services would then have the possibility to proceed with the decision making process without having to wait the deadline of the procedure. It was underlined that it implies that members would have to provide their position and would not refer to the tacit agreement (absence of answer within the deadline). It will be then at the discretion of all the Member States to proceed in a shorter time to the decision making process by reducing the comitology consultation period.

➤ **7e) Move from DG Health and Consumers to DG Internal Market, Industry, Entrepreneurship and SMEs**

The members were informed that the two Pharmaceutical Units remain in the same Directorate General which will be renamed to Health and Food Safety (SANTE). The part dealing with Consumer issues was transferred to DG Justice.

From 1<sup>st</sup> November 2014, Ms Paola Testori Coggi will no longer be the Director-General of DG SANTE and will leave the Commission.

➤ **7f) Update on the common logo for on-line pharmacies**

The Commission, referring to the adoption on 24 June 2014 of the Implementing Regulation (EU) No 699/2014 on the common logo for the on line sales of medicinal products, reminded the representatives of the Member States of the necessity to sign a licence agreement on the use of logo before June 2015. The representatives of the Member States were invited to contact Unit D6 of DG SANTE in order to arrange the signature.

➤ **7g) Joint meeting: Member State authorities for Tissues & Cells and Medicinal products – specifically Advanced Therapy Medicinal Products (ATMP)**

The Commission informed the members that in 2015 a joint meeting between the abovementioned authorities will be organised because there are a lot of scientific developments within those two closely linked areas. The date is not yet fixed but the Commission asked for help from the MS with experience in ATMP in order to help prepare the joint meeting. Any authorities wishing to do so are kindly asked to contact the Commission (a pre-meeting should take place beginning of December).

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The next meeting of the Pharmaceutical Committee (human) is **tentatively** planned for **17 March 2015**. (no travel arrangements should be made until final date is confirmed by the Commission in February 2015).