Kooperation zwischen der FDA und der EMEA

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Increased Bilateral Cooperation

Information Exchange

Provision of Parallel Scientific Advice



Increased Bilateral Cooperation

- Promote and protect public health in the globalized world in which our regulated products are developed, manufactured, authorized, promoted, marketed, and used by practitioners and patients
- Integral part of the Critical Path of product development and authorization



Increased Bilateral Cooperation

- Increase the efficiency and impact of exchange
 - Focus on specific information routine and ad hoc basis
 - Focus of timing of exchange
 - Institutionalize the processes
- Formal Develop ways to leverage resources
- Informal Peer sounding boards



TOOLS FOR CLOSER BILATERAL COOPERATION

IMPLEMENTATION PLAN

M.O.U. / Exchange of Letters

CONFIDENTIALITY ARRANGEMENT



Confidentiality Arrangements

- Commercial confidential
- Pre-decisional
- Investigative compliance
- NOT Trade Secret

INFORMATION EXCHANGE



Information Exchange

Implementation Plan for Medicinal Products for Human Use

Finalized 16 Sept 2004 in San Francisco

Document on both the EMEA and FDA website



Information Exchange

 Regular (Routine) Exchange of Specific Information

 Ad hoc Exchange of Non-Emergency Information

 Provision for the Exchange of Staff between the two Agencies



- Quarterly Exchange of Lists
 - Marketing Authorization Applications
 - Newly submitted
 - New all
 - Variations major public health interest
 - Still undergoing review
 - Decisions during that quarter
 - Inspections (GMP/GCP/Pharmacovigilance)
 - Performed during last quarter
 - Likely to be performed during next quarter
 - Guidelines Under Development



- Provision of Scientific Advice
- Difficulties in evaluation of MAAs
- Pharmacovigilance issues
- Advance notice, before the release of information into the public domain, of significant regulatory sanctions of mutual interest concerning one another's market
- General public health issues (TSEs, Counterterrorism)
- Pilot Benchmarking Exercise Pre-market review assessments (2 applications)

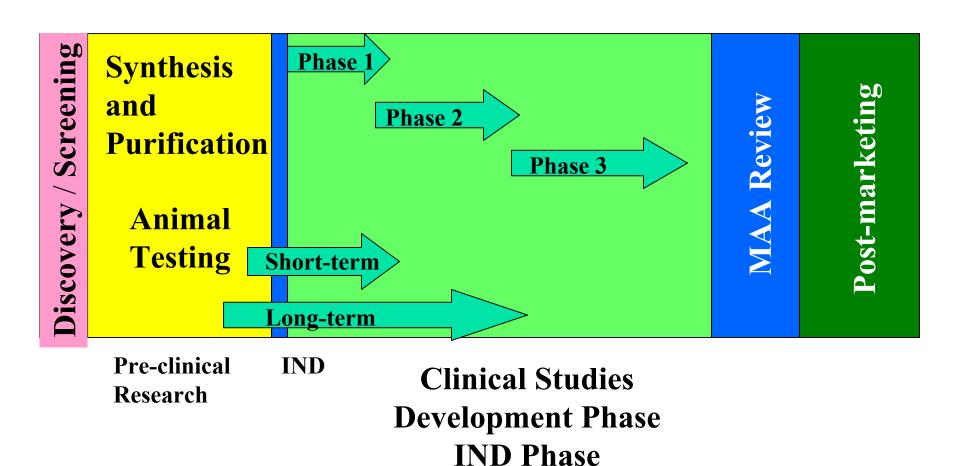


Information Exchange: Staff Exchanges

- Already several exchanges have occurred at various levels in the two organizations
- Also looking for appropriate opportunities for staff to attend and participate in FDA advisory committee meetings and EMEA CHMP meetings



NEW DRUG DEVELOPMENT



PARALLEL SCIENTIFIC ADVICE

with the EMEA and FDA



- Agreed Pilot Program for 2005
- "General Principles" Document agreed 17 September 2004 in San Francisco
- Document on both EMEA and FDA websites

http://www.fda.gov

http://www.emea.eu.int



- Expected Advantages
 - Increased dialogue between agencies and sponsor from the beginning of the product life cycle
 - Optimize product development by avoiding unnecessary testing replication or unnecessary diverse testing methodologies



- Expected Advantages (cont.)
 - Allows for additional critical issues to be identified simultaneously by both agencies and shared
 - Streamline development and facilitate access: e.g. orphan drugs, products eligible for accelerated review



- Occurs at request of sponsor sponsor nominates a product for this procedure
- Focus on specific questions or issues involving the development of a product
- Scope: Important (pediatrics or orphans) or Breakthrough products (US designated "Fast track")
- Initially limited to one such meeting per month
- Single occurrence not a continuing series on same product



- "Request for Scientific Advice" letter to Arielle North at EMEA and Michelle Limoli at FDA
- Justify why product would benefit
- Identify anticipated topic(s), including any specific question(s)
- Authorize comprehensive exchange of information between the two agencies, including trade secret information
- Request is no guarantee that meeting will be agreed to by Agencies



- If accepted for this program, sponsor notified by Email
- Pre-meeting between EMEA and FDA also usual preparations at EMEA and FDA
- Usually scheduled around 60 days after request in the margins of the Scientific Advice Working Party (EMEA)
- Tele- or Videoconferencing



Procedure and Timing

Day 0 **Day 30 Day 60 Day 70 Videoconferences Submission EMEA: first CHMP final** of request expert advice - EMEA/FDA assessors meeting reports - EMEA/FDA meeting with FDA final **FDA:** initial **Sponsor** minutes comments



- Each agency provides independent advice as per usual procedures
- Advice may still differ not "joint" advice or "combined" advice – "parallel" advice
- Should have a clearer understanding of the agencies' perspectives and the background of any divergence



 Fees and timelines are unaffected by virtue of this being a parallel scientific advice meeting



Possible reasons for conflicting advice

- Even among top experts, the way to consensus can be long and winding and sometimes not reached
- Different legal/ regulatory background
- Different priorities: absolute vs. relative benefit/risk assessment or both?
- Different therapeutic practices?
- Concept of "established" treatment?



Initial experience

- Up to May 2005 a total of three procedures have been finalised
 - Orphan Medicinal product
 - Issue on QT prolongation
 - Absence of guideline in EU and US



Initial experience (cont.)

 Two other procedures were not accepted for logistic/procedural reasons



Initial Experience (cont.)

- Cautious approach from companies
- Several additional companies have expressed interest in the procedure
- Review after one year to assess experience, value, and determine future course



What has been learnt?

- Early contact is of paramount importance:
 - Sponsors intending to pursue this route should notify the agencies as early as possible
 - Agencies will identify experts to be involved and initiate dialogue
- Best timing to coincide with EOP-2 or other milestone meeting
- Videoconference best held with participation of the sponsor

VIELEN DANK!