

**CO-ORDINATION GROUP FOR MUTUAL RECOGNITION AND
DECENTRALISED PROCEDURES – HUMAN (CMDh)
WORKPLAN 2011**

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INTRODUCTION

The Coordination Group for Mutual Recognition and Decentralised procedures–Human (CMDh) was set up under the revised EU pharmaceutical legislation for the examination of any question relating to the marketing authorisation of a medicinal product in two or more Member States, in accordance with the mutual recognition procedure (MRP) or the decentralised procedure (DCP). The CMDh started its activities in November 2005.

The tasks and functioning of the group have been outlined in the Rules of Procedures, which were adopted by the Group and endorsed by the European Commission. A proposal for the revision of the Rules of Procedures to include new responsibilities of the CMDh has been forwarded to HMA and the European Commission in 2010.

CMDh members are nominated for a period of 3 years, which is renewable. The group completed its first 3 year term in October 2008. Elections for the position of chairperson were held in the November meeting in 2008 and Ms Truus Janse-de Hoog was elected for a new 3 years term.

The CMDh decided to evaluate the functioning of the group after its first 3 year term. A questionnaire on the functioning of the CMDh was sent to the members and interested parties.

One of the recommendations of the questionnaire was to appoint alternate members of the CMDh. The CMDh included the concept of alternates in the revised Rules of Procedures and agreed to publish the names of alternate members as well on the website.

From 2011 Croatia will participate as observer in the CMDh meetings.

The amended Directive 2001/83/EC on Pharmacovigilance has been adopted in 2010 and will come into force 18 months after publication in the Official Journal (publication was 31 December 2010). The tasks of CMDh will be extended with responsibility for pharmacovigilance and it will require detailed discussions and work on drafting BPG and SOPs on new procedures. It will also require further reflection on mandate and expertise needed for CMDh members. Discussions have already started in the WG on the Future of CMDh and a close cooperation with HMA is foreseen with the implementation of their Strategy paper.

The number of applications for the Decentralised procedure is still high, but seems to have stabilised. The percentage of applications referred to CMDh and CHMP in 2010 has decreased compared with 2009. 4.3% of procedures in MRP and 0.2% of procedures in DCP have been referred to the CMDh.

PRIORITIES 2011

For 2011 the following priorities have been defined:

- 1) To prepare for the new tasks of CMDh proposed in the new legislative proposals on Pharmacovigilance. The CMDh has set up a new Working Group to give input to the discussions in the WP on the future of CMDh. The CMDh will contribute to the discussions in the different European WGs and ERMS FG.
- 2) To implement the recommendations from WP on the future of CMDh:
 - How to make the MRP/DCP attractive to the self-medication sector; addressing the issue of legal Classification and patient information.
 - How to keep the DCP an attractive procedure.
 - Optimisation of the Referral procedure and make better use of CMDh as a platform for scientific discussions to ensure a consistent approach in the assessment of medicinal products in the same active moiety.
 - Ensure consistency, transparency and compliance with CMDh “decisions”, positions, agreements etc.
 - Explore if members of the CMDh could act as experts in a certain field of competence to assist the other members of the group on agreements etc.
- 3) To organise training for new Members and training for Quality assessors in cooperation with HMA/EMA Training Project team.
- 4) To work in close cooperation with HMA taskforce on resources and especially monitor and discuss on a regular basis in the CMDh meeting:
 - Validation problems in order to find a harmonised approach and in cooperation with EC a common legal interpretation.
 - The duration of clockstops based on statistics from CTS.
 - The improvement of national closing phase and exchanging national experiences.
- 5) To successfully develop and implement a Worksharing procedure for assessment of ASMF. A new joined subgroup including QWP, EMA, CMDv and EDQM has started to discuss the organisation of worksharing and requirements for a tracking system.
- 6) To further discuss the development of CTS and cooperate with HMA in order to ensure that CTS is ready to support new developments in electronic communication and exchange of information between all Members states on applications in DCP and MRP.
- 7) To improve the MRI-product Index – The lay-out and format of the product index will be improved to provide more and better information on all products approved in MRP/DCP and Art 30 referrals. The procedure to attach the SPC, PL and public assessment report should be simplified.
- 8) Support HMA in implementing the HMA Strategy paper II.

CONTINUING/ONGOING ACTIVITIES IN 2011

- 1) After a successful start with the Variation Regulation in 2010 the CMDh will continue to contribute to further improvement of the handling of the Variation Regulation and Worksharing procedures foreseen after implementation of the Directive for national procedures. The Variation subgroup will continue to meet and will discuss questions on implementation and requests for clarification. Where MSs have different interpretations on the legislation advice will be sought from EC in order to implement the new procedures in a harmonised way. Recommendations on classification of an unforeseen Variation requested to the CMDh according Art 5 of the Regulation will be delivered in the agreed timelines in close cooperation with CMDv and the European Medicines Agency.
- 2) Reduction of national requirements. After the successful work of the validation Subgroup to reduce and harmonise national requirements HMA has been asked to reconsider the remaining national requirements.
- 3) Active participation of all Member States in Worksharing procedures:
Worksharing is a way to make the best use of available resources and avoids duplication in assessment of the same set of data. Worksharing has been agreed in the assessment of PSUR data, Paediatric data submitted in accordance with Art 45 and 46 of Paediatric regulation. It is included in the Variation Regulation No 1234/2008/EC as an option for industry to request a Worksharing procedure for the same change in products approved in Mutual recognition/decentralised procedures and/or centralised procedures.

ORGANISATIONAL MATTERS

The meeting calendar and relevant procedure dates have been published on CMDh website.

The secretariat is keeping track of the expiry dates of nominations, whilst the Member States are responsible for sending in renewals or new nominations in time.

REFERRALS

The number of referrals has decreased in 2010, for DCP the numbers are still lower than MRP. Detailed statistics over 2010 are presented in CMDh Summary of activities 2010.

Especially in the Decentralised procedure, discussions in the CMDh could start earlier around the clock stop. This will allow all the Member States to give their views in the scientific discussions earlier and discuss potential options to come to consensus. The RMS can organise teleconferences or use virtual meeting facilities to discuss different views between CMSs and RMSs earlier in the procedure in addition to discussion in the CMDh.

It is important that the CMDh will continue to be a platform for scientific discussions, if there are different views between the Member States. The CMDh should also discuss different standards in assessment and stimulate harmonised interpretation of Guidelines. Cooperation with the CHMP Working parties has been successful in answering general questions and giving further clarification on Guidelines. This cooperation is very important in developing a harmonised approach also between different procedures (CP, MRP, DCP) and keeping informed on new developments that are considered to be 'state of the art'. This will help to avoid future referrals, but also to agree on common standards in assessment of dossiers.

COOPERATION WITH THE EUROPEAN MEDICINES AGENCY

The CMDh and the EMA will continue to exchange information on generic applications in order to ensure consistency of the assessment and make better use of available resources.

With the implementation of the Variation Regulation, variation Worksharing procedures between centrally authorised products and products approved in MRP/DCP are processed.

Interaction with the CHMP working parties: it is considered important to have a harmonised approach in the assessment of dossiers.

CMDh WORKING PARTIES/WORKING GROUPS

The following permanent or ad hoc Working groups are in place

CTS Working Group (Hum+Vet)

The CTS Working group will start meeting remotely every other meeting.

A proposal for HMA will be prepared to discuss CTS business case and readiness for the future.

SmPC harmonisation

A new list of products for SmPC harmonisation in 2011 will be sent to the European Commission. On CMDh websites an overview is published of ongoing and finalised Art 30 referrals with a link to the Commission Decision. CMDh will mention finalised referrals in their press release and encourage harmonisation of SmPC's of products with the same active substance that are already on the market.

Joint CMDh-PhVWP Working Group

The agreed procedure on Interactions on safety warnings agreed in PhVWP and CMDh will be followed. The CMDh and PhVWP will continue to have joint meetings every 2 months.

The group will continue work together and focus on fast and simple procedures for implementation of safety information in SmPC and PL.

The ongoing project of synchronisation of PSUR submissions and work sharing will be followed and CMDh members will participate in the PSUR Taskforce.

Meetings in 2011 will also focus more on a coordinated implementation of the PhV legislation.

CMDh-EMEA Sub-group on Paediatrics

All paediatric data, submitted in accordance with Art 45 and 46 of the Paediatric Regulation, will be assessed in an EU Work sharing procedure. In 2011 four waves of substances in the Art 45 procedure are planned. CMDh will monitor a fair distribution of Workload in Paediatric Worksharing. If appropriate, meetings with interested parties can be arranged and training for assessors can be organised.

CMDh-GCP Inspectors

The group will monitor an annual programme on routine GCP inspections of CROs most often used in the conduct of Bioequivalence trials included in the MAA for generic products in MRP and DCP. Information on the outcome of Inspections will be shared.

Joint Subgroup on Variations

The subgroup will continue to work together with CMDv and the Agency in order to agree on a harmonised interpretation of the Regulation.

The Variation subgroup will continue to meet and will discuss questions on implementation and requests for clarification. Where MSs have different interpretations on the legislation advice will be sought from EC in order to implement the new procedures in a harmonised way.

Future of CMDh

The Working Party on the future of CMDh will discuss the future scope of the CMDh. The mandate of the Working Party is making an analysis of the scope of CMDh in the future taking into account existing tasks and the extended responsibilities foreseen in the coming pharmacovigilance legislation. Further to present to the CMDh ideas on how the work of CMDh could be improved and adapted to future legislation. The Working Party will finalise the recommendations drafted in 2010 and work on the implementation of the agreed recommendations.

THE SECRETARIAT

The support of CMDh secretariat is extremely important for the functioning of CMDh. It includes amongst others: organisation of the meetings, drafting Agenda and Minutes, follow-up actions, coordination of referrals, Art. 5 requests, paediatric worksharing and variation worksharing and liaison with other committees and Working Parties.



CMDh GUIDANCE DOCUMENTS
To be revised / created in 2011

Document	Action(s)	Adoption / Last Update
<u>ABOUT CMDh</u>		
<i>CMDh Activities</i>		
CMDh Rules of procedure	Update	November 2005
Function and tasks of CMDh	Update	February 2006
Role of the Vice-Chairperson of the CMDh	Update	January 2006
<i>Contacts with Representative Organisations</i>		
Recommendations on contacts with Representative Organisations	Check need for update	November 2006
<i>Transparency Measures</i>		
Position paper on transparency policy of the CMDh	Check need for update	February 2007
<u>PROCEDURAL GUIDANCE</u>		
<i>General Info</i>		
CMDh Best Practice Guide for the public assessment report in the decentralised and mutual recognition procedure	Check need for update	January 2006

Document	Action(s)	Adoption / Last Update
Notifications to the EMEA/CHMP in the MRP/DCP	Check need for update	March 2006
Best Practice Guide for the Reference Member State in the Mutual Recognition and Decentralised Procedures	Check need for update	July 2006
CMDh Agreement on sunset clause and its application to marketing authorisations granted in more than one MS	Check need for update	December 2006
Best practice guide for the exchange of regulatory and administrative information regarding orphan medicinal products between the EMEA and the national competent authorities	Check need for update	February 2007
CMDh guidance for MAHs on the pharmacovigilance system and risk management plan in the MPR & DCP	Check need for update	November 2007
<i>Application for Marketing Authorisation</i>		
MSs Recommendations: Extension applications in Mutual Recognition and Decentralised Procedures – MS Recommendations	Check need for update	July 2006
Guideline on the Assessment Report in MRP/DCP	Check need for update	September 2006
Recommendations on Multiple applications in Mutual Recognition Procedures	Check need for update	June 2007
<i>Application for Marketing Authorisation/MRP</i>		
Flow chart of the Mutual Recognition Procedure	Check need for update	May 2007
<i>Applicant's responses</i>		
Applicant's Response Document in Mutual Recognition and Decentralised Procedures - Recommended CTD Format	Check need for update	June 2006

Document	Action(s)	Adoption / Last Update
<i>Article 61.3 procedure</i>		
Flow-chart for the Article 61(3) procedure	Check need for update	July 2007
<u>TEMPLATES</u>		
<i>AR/DCP</i>		
Template DCP D70 PrAR Non-Clinical	Check need for update	January 2006
Template DCP D70 PrAR Clinical	Check need for update	January 2006
Template DCP D105 clock stop	Check need for update	January 2006
Template DCP RMS D120 PrAR Quality	Check need for update	January 2006
Template DCP D120 PrAR Non-Clinical	Check need for update	January 2006
Template DCP D120 PrAR Clinical	Check need for update	January 2006
Template DCP D120 Finalisation (End of Procedure)	Check need for update	January 2006
Template DCP D150 Finalisation (End of Procedure)	Check need for update	January 2006
Template DCP D180 RMS report to CMDh	Check need for update	January 2006
Template DCP D210 Finalisation (End of Procedure)	Check need for update	January 2006
<i>AR/Art.61.3 Procedure</i>		
Templates - Notification form Art. 61.3 procedure	Check need for update	July 2007

Document	Action(s)	Adoption / Last Update
<i>AR/Public AR</i>		
Templates Public Assessment Report - PAR update	Check need for update	December 2005
<i>AR/Paediatric Data</i>		
Template for the Paediatric assessment report	Check need for update	January 2007
<i>Art.29 Referrals</i>		
Template D90/210 referral request (CMS)	Check need for update	May 2007
Template Referral to CMDh (RMS)	Check need for update	June 2007
<i>AR/Variations</i>		
Type II variation - Preliminary Variation Assessment Report	Check need for update	December 2007
Type II variation - Final Variation Assessment Report	Check need for update	December 2007
<u>CMD SUBGROUPS/ WORKING GROUPS</u>		
<i>Subgroup on Harmonisation of SmPCs</i>		
Mandate for the CMDh Subgroup on Harmonisation of SmPCs	Check need for update	November 2005
Criteria for selection of products for SPC Harmonisation	Check need for update	February 2006
<i>Others</i>		
Mandate of CMDh-GCP Inspection Sub-group	New	

Document	Action(s)	Adoption / Last Update
Mandate of ad-hoc group on ASMF assessment	New	
<u>PAEDIATRIC REGULATION</u>		
<i>Guidance documents</i>		
Best Practice Guide for the preparation of the Public Assessment Report in the EU Work sharing project for the assessment of paediatric data	Check need for update	March 2007