

Rev.4, February 2008

**Assessment report
Mutual recognition Procedure**

OVERVIEW

**<Invented Name>
<(Active Substance)>**

AB/H/nnnn/

Applicant:

Date:

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COVER PAGE

Name of the product in the Reference Member State	
INN (or common name) of the active substance	
Pharmaco-therapeutic group (ATC code)	
Pharmaceutical form(s) and strength(s)	
Reference number(s) for the Mutual Recognition Procedure	
Reference Member State	
Member States concerned	
Authorisation holder's name and address in RMS	
Names and addresses of manufacturer(s) of dosage form Name and address of manufacturer(s) responsible for batch release in the EEA	
Date of first authorisation	
Marketing Authorisation number(s) in RMS	
RMS Contact Person	Name Tel: Email:
Names of assessors	Quality: Name(s) Tel: Email: Non-clinical: Name(s) Tel: Email: Clinical : Name(s) Tel: Email:

I RECOMMENDATION

Based on the review of the data on quality, safety and efficacy, the RMS considered that the application for <product name>, in the treatment of <indication>, could be approved. A national marketing authorisation was granted on <date>.

II EXECUTIVE SUMMARY

II.1 Problem statement

II.2 About the product

II.3 General comments on the submitted dossier

The active substance is <not> considered a new active substance.

II.4 General comments on compliance with GMP, GLP, GCP and agreed ethical principles

The RMS has been assured that acceptable standards of GMP are in place for these product types at all sites responsible for the manufacture and assembly of this product prior to granting its National authorisation.

< For manufacturing sites within the Community, the RMS has accepted copies of current manufacturer authorisations issued by inspection services of the competent authorities as certification that acceptable standards of GMP are in place at those sites.>

< For manufacturing sites outside the Community, the RMS has accepted copies of current GMP Certificates or satisfactory inspection summary reports, 'close-out letters' or 'exchange of information' issued by the inspection services of the competent authorities (or those countries with which the EEA has a Mutual Recognition Agreement for their own territories) as certification that acceptable standards of GMP are in place at those non-Community sites.>"

III SCIENTIFIC OVERVIEW AND DISCUSSION

III.1 Quality aspects

Drug substance

<The chemical-pharmaceutical documentation and Expert Report in relation to <product name> are of sufficient quality in view of the present European regulatory requirements.>

<The control tests and specifications for drug substance product are adequately drawn up.>

< Stability studies have been performed with the drug substance. No significant changes in any parameters were observed. The proposed retest period of <..> is justified.>

Drug Product

<The development of the product has been described, the choice of excipients is justified and their functions explained.>

<The product specifications cover appropriate parameters for this dosage form. Validations of the analytical methods have been presented. Batch analysis has been performed on <number> batches. The batch analysis results show that the finished products meet the specifications proposed.>

<The conditions used in the stability studies are according to the ICH stability guideline. The control tests and specifications for drug product are adequately drawn up.>

<The proposed shelf-life of <number> months with <storage conditions to be specified> for the drug product is considered acceptable.>

III.2 Non clinical aspects

Pharmacology

Pharmacokinetics

Toxicology

III.3 Clinical aspects

Pharmacokinetics

Pharmacodynamics

Clinical efficacy

Clinical safety

III.4 Risk Management Plan

Non-clinical and clinical safety specifications

Pharmacovigilance Plan

<The RMS considers that the Pharmacovigilance system as described by the applicant fulfils the requirements and provides adequate evidence that the applicant has the services of a qualified person responsible for pharmacovigilance and has the necessary means for the notification of any adverse reaction suspected of occurring either in the Community or in a third country.>

<The RMS considers that the Pharmacovigilance system as described by the applicant has the following deficiencies:<list the deficiencies>

<Provided that the deficiencies are rectified prior to the applicant placing the medicinal product on the market, the Member States may consider that the Pharmacovigilance system will fulfil the requirements. The applicant must ensure that the system of pharmacovigilance is in place and functioning before the product is placed on the market>

Risk Minimisation Plan

Insert summary table of proposed pharmacovigilance activities and proposed risk minimisation activities by safety concern

Periodic Safety Update Report (PSUR)

<The applicant has applied for a PSUR submission scheme of <number> years upon approval as:

<active substance> is a well known active substance which has been marketed for many years throughout the EU. The suggestion is <acceptable> <not acceptable because >

<active substance> is found in the list published by the Heads of Medicines Agencies with an EU Harmonised Birthday and related Data Lock Point (DLP). The suggestion is <acceptable> <not acceptable because the innovator product has a <number> year PSUR submission scheme and this period should be followed.>

<The applicant has not requested a different PSUR cycle upon approval.><The PSUR submission scheme will follow Volume 9A of The Rules Governing Medicinal Products in the European Union starting with 6-monthly PSUR.>< The RMS considers the submission of 6-monthly PSURs not necessary <and recommends PSUR submissions to be aligned with the EU Harmonised Birthday and related Data Lock Points as published on the HMA website> or < and recommends submission of <number> yearly PSURs.

IV BENEFIT RISK ASSESSMENT

V RECOMMENDED CONDITIONS FOR MARKETING AUTHORISATION AND PRODUCT INFORMATION

V.1 Conditions for the marketing authorisation

Legal Status

Follow-up measures

Specific obligations

V.2 Summary of Product Characteristics (SPC)

V.3 Package Leaflet (PL) and User Testing

V.3.1 Package Leaflet

V.3.2 Assessment of User Testing

Assessment of the User Testing is attached in the 'QRD Guidance and Checklist for the Review of User Testing Results'.

V.4 Labelling

VI APPENDIX

QRD GUIDANCE AND CHECKLIST FOR THE REVIEW OF USER TESTING RESULTS

QRD GUIDANCE AND CHECKLIST FOR THE REVIEW OF USER TESTING RESULTS

[Disclaimer: This guidance has been set up to provide practical information on how to evaluate user testing reports which are based on the readability testing method as described in Annex 1 of the EC Readability Guideline. This does not exclude the submission and evaluation of user testing reports based on methods other than the one outlined above, for which specific assessment guidance may be issued once experience has been gained]

[Useful links: More detailed practical guidance can be found in the following documents:

- *EC Readability Guideline [link to be inserted]*
- *“Operational procedure on Handling of “Consultation with target patient groups” on Package Leaflets (PL) for Centrally Authorised Products for Human Use [link to be inserted]*
- *[MRP/DCP relevant document – link to be inserted]*

PRODUCT INFORMATION

Name of the medicinal product:	
Name and address of the applicant:	
Name of company which has performed the user testing:	
Type of Marketing Authorisation Application:	
Active substance:	
Pharmaco-therapeutic group (ATC Code):	
Therapeutic indication(s):	

- Report provided	<input type="checkbox"/> yes	<input type="checkbox"/> no
- Justification for not submitting report:		
<input type="checkbox"/> extensions for the same route of administration		
<input type="checkbox"/> ref to test on same class of medicinal product		
<input type="checkbox"/> ref to test with same safety issues		
<input type="checkbox"/> other _____		
- Is the justification for not submitting a report acceptable?	<input type="checkbox"/> yes	<input type="checkbox"/> no
Reasons [<i>assessor's views on acceptability or not of the justification – assessment of justification</i>]		

1 TECHNICAL ASSESSMENT

1.1 Recruitment

- Is the interviewed population acceptable? yes no

Comments/further details _____

Guidance regarding Recruitment

The following points should be taken into consideration when assessing recruitment methods:

- *Is the recruitment method well defined? Is it clear that serious thought was given to the composition of the test group? (e.g. in terms of variables such as sex, age, education, experience with the medicinal product, existing knowledge of the complaint, etc.)*
- *How has the test group been recruited? Are they new users or patients, parents or carers?*
- *Is it clear how many people were involved in the test/test rounds?*
- *Is that number sufficient? (The PL should be tested in minimum 2 rounds of 10 participants each)*

1.2 Questionnaire

- Is the number of questions _____ sufficient? yes no
- Questions cover significant (safety) issues for the PL concerned? yes no

Comments/further details _____

Guidance regarding Questionnaire

The following points should be taken into consideration when assessing the questionnaire:

- *Have the key messages for safe use been identified by the applicant*
- *Do the questions cover the key messages and the following areas:*
 - => *General impressions of package leaflet;*
 - => *“Diagnostic” part of PL (i.e. questions aiming to test whether the participants were able to find specific information quickly and easily in each section of the PL and to verify if they were able to understand this information correctly; the questionnaire should primarily concentrate on safety and correct use of the medicinal product and understanding of the participant to assure safe use –it must be ensured that key safety messages have been addressed);*
 - => *Aspects such as design and layout of PL.*
- *Is the number of questions sufficient? (too few or too many –e.g. 12- 15)*
- *Do the questions address “wording” aspects? Can respondents easily understand the text they are reading?*
- *Do the questions provide open or pre-defined answers? Respondents should not be provided with ready-made answers, thus increasing the possibility of positive results. Questions should be open, should be ordered randomly to see how patients use the PL and should not be leading. Questions that require self-assessment (example: in your opinion, is paragraph X clear?) should be avoided. Questions that require a long list of answers to be given (example: “what are the adverse events of this medicinal product?”) should also be avoided.*

1.3 Time aspects

- Is the time given to answer acceptable? yes no
- Is the length of interview acceptable? yes no

Comments/further details _____

Guidance regarding Time aspects

The following points should be taken into consideration when assessing the time aspects:

- *Is it clear how long the test lasted?*
- *Was the time given for respondents to read and answer the questions adequate? How long did the interview last?*
[The test should be designed in a way to last no more than 45 minutes, to avoid tiring participants]

1.4 Procedural aspects

- Rounds of testing including pilot _____

Comments/further details _____

Guidance regarding Procedural aspects

The following points should be taken into consideration when assessing the procedural aspects:

- *Is the test based on different testing rounds? (minimum two test rounds, each involving 10 participants, are required: As this is an iterative process more rounds may be required in order to satisfy the success criteria; a pilot test (including 3 to 6 persons) could precede to assure the questionnaire is understood and major gaps are precluded. The PL after changes should then be tested on 10 participants in total. However, one single testing round may also be considered sufficient and acceptable on a case-by-case basis)*

A satisfactory test outcome for the method outlined above is when 90% of literate adults are able to find the information requested within the PL, of whom 90% can show they understand it, i.e. each and every question must be answered correctly by at least 81% of the participants

- *Does it make use of modification phases in-between the testing rounds in order to maximise readability?*
- *Do interviewers use scenarios or live demonstrations (e.g. in order to increase the efficiency of the test, if appropriate).*

1.5 Interview aspects

- Was the interview conducted in well structured/organised manner? yes no

Comments/further details _____

Guidance regarding Interview aspects

The following points should be taken into consideration when assessing the interview aspects:

- *Are there clear instructions for the test instructor(s)? (e.g. instructions on how to get more information from the consumers test, whether or not help should be given, etc.)*
- *Do interviewers let respondents show where information on the medicinal product can be found in the leaflet?*
- *Do they ask respondents to give their answer in their own words and not to rely on memory?*

2 EVALUATION OF RESPONSES

2.1 Evaluation system

- Is the qualitative evaluation of responses acceptable? yes no
- Does the evaluation methodology satisfy the minimum prerequisites? yes no

Comments/further details _____

Guidance regarding Evaluation system

The following points should be taken into consideration when assessing the evaluation system:

- *Is the assessment based on a check list covering the following 3 basic areas:*

Whether the respondent was able:

⇒ **To find** the information (e.g. can a respondent easily find the information on dosage?)

⇒ **To understand** the information (e.g. can a respondent say in his/her own words what the proper dosage and the instructions for use are?)

⇒ **To use** the information (e.g. “*imagine you are in situation X and Y happens, what must you do?*”)

2.2 Question rating system

- Is the quantitative evaluation of responses acceptable? yes no

Comments/further details _____

Guidance regarding Questions rating system

The following points should be taken into consideration when assessing the questions rating system:

- *How are answers evaluated? (e.g. 1= no answer, 2=wrong answer, 3=incomplete answer, 4=ambiguous answer, 5=complete and correct answer)*

3 DATA PROCESSING

- Are data well recorded and documented? yes no

Comments/further details _____

Guidance regarding Data processing

The following points should be taken into consideration when assessing the data processing:

- *Is it clear how the data are recorded?*

- *Is the way in which they are recorded satisfactory?*

- *Have the data been processed satisfactorily? (e.g., is it clear how verbal assessments have been converted into graded answers?)*

- *Has the assessor been provided with the patient leaflets used during (different rounds of) testing?*

- *Are the revisions in the PL explained/justified? Is it also clear which comment from the participants were ignored and why?*

4. QUALITY ASPECTS

4.1 Evaluation of diagnostic questions

- Does the methodology follow Readability guideline Annex 1? yes no
- Overall, each and every question meets criterion of 81% correct answers yes no

Comments/further details _____

4.2 Evaluation of layout and design

- Follows general design principles of Readability guideline yes no
- Language includes patient friendly descriptions yes no
- Layout navigable yes no
- Use of diagrams acceptable yes no

Comments/further details _____

Guidance regarding Quality aspects

The following points should be taken into consideration when assessing the quality aspects:

- *Is the report complete?*
- *Does the report clearly distinguish between quantitative and qualitative results?*
- *Is the medicinal product and the company concerned clearly indicated?*
- *Based on EC guidelines, are “diagnostic” questions (see 1.2) scoring satisfactorily?*
- *Do respondents find the layout and design of the package leaflet satisfactory?*
 - Special focus should be given to the following elements:*
 - ⌘ *Writing style (simple language, short sentences, use of bullets)*
 - ⌘ *Type face (font size, italics/underlining, lower/upper case)*
 - ⌘ *Layout (spacing, white space, contrast, left justified, columns)*
 - ⌘ *Headings (consistent location, stand out)*
 - ⌘ *Use of colour (present, adequate contrast)*
- *Pictograms should be subject to user testing as it is well known that these can confuse patients.*
- *Do respondents encounter difficulties in locating and using correctly (if appropriate) the information provided in the PL?*

5. DIAGNOSTIC QUALITY/EVALUATION

- Have any weaknesses of the PL been identified? yes no
- Have these weaknesses been addressed in the appropriate way? yes no

Comments/further details _____

Guidance regarding Diagnostic quality/evaluation

The following points should be taken into consideration when assessing diagnostic quality/evaluation:

- Are the results (as far as possible) related to actual passages of text?
- Is an attempt made to explain that readers' problems arose because of certain characteristics of those passages (e.g. something was difficult to find because of a badly chosen heading; or a passage could not be understood because of a double negative; or specific information could not be applied properly because certain terms were unclear)?
- Was a second round revision carried out?
- Have weaknesses of the first round been clearly identified and addressed in the appropriate way? (e.g. questions that scored low led to modifications on the PL => introduction of stylistic changes to improve readability or removal of redundant and confusing information)
- Is it clear which passages have been revised and how and on the grounds of what observations in the first round?
- Is it also clear what observations were ignored in making the revision and why?
- Have modifications been tested and proved to improve readability?

6. CONCLUSIONS

- Have the main objectives of the user testing been achieved? yes no
- Is the conclusion of applicant accurate? yes no
- Overall impression of methodology positive negative
- Overall impressions of leaflet structure positive negative

