London, 3 June 2013

REPORT FOR RELEASE: April and May 2013

April 2013 product discussions

Four products reached day 90 of the mutual recognition procedure (MRP) and seven products reached day 210 of the decentralised procedure (DCP). Two products reached day 60 of the CMDv referral procedure.

	MRP	DCP	Referrals
Procedures reaching D90 (MRP), 210 (DCP) or D60 (referrals)	4	7	6
Products* :	4	7	2
Immunological	2	0	0
Pharmaceutical	2	7	2

* 1 product includes all strengths and pharmaceutical forms submitted but does not include duplicate applications, which are counted separately

CMDv referral procedures concluding in April [article 33(1) of Directive 2001/82]

Proc. no.	Product	Active subs.	Legal basis Directive 2001/82	CMS (objecting CMS)	D60	Grounds for ref.	Outcome
CZ/V/0116/ 001-005/MR	Fiprex spot-on solution for cats and dogs (S, M, L, XL)	Fipronil	Article 13a of Dir. 2001/82 (well-est. use)	AT, BE, DK, EL, ES, **IE**, IT, NL, SK, UK	18.04.13	Potential serious risk to animal health (efficacy)	Applicant attended for oral hearing. No agreement reached; procedures referred to the CVMP under article 33(4) of Directive 2001/82/EC
UK/V/0445/ 001/DC	Norbonex 5 mg/ml pour-on solution for beef and dairy cattle	Eprinomectin	Article 13(1) of Dir. 2001/82 'generic'	**DE**, NL	18.04.13	Potential serious risk to the environment	No agreement reached; procedures referred to the CVMP under article 33(4) of Directive 2001/82/EC

May 2013 product discussions

Six products reached day 90 of the MRP and twelve products reached day 210 of the DCP.

	MRP	DCP	Referrals
Procedures reaching D90 (MRP), 210 (DCP) or D60 (referrals)	6	12	0
Products* :	5	11	0
Immunological/biological	1	2	
Pharmaceutical	4	9	

* 1 product includes all strengths and pharmaceutical forms submitted but does not include duplicate applications, which are counted separately

CMDv updates and advice to applicants

1. Variations

1.1. Worksharing applications

Four new informal worksharing requests were discussed at the April meeting. These were for a change in the sterilisation process of a pharmaceutical product and for changes to the pre-inactivation titre, change to the vial stopper, transfer of manufacturing + consequential changes for three immunologicals. One formal worksharing request (only products authorised via MR/DCP) was discussed for the addition of an active substance manufacturer + ASMF. One revised informal worksharing request was considered due to the addition of some Member States.

Three new informal worksharing requests were discussed at the May meeting. These were for various quality changes and a change in shelf-life for two pharmaceutical products, as well as a change to the seed lot system for a vaccine. One formal worksharing request was discussed involving the addition of an active substance manufacturer + change from ASMF to Part 2C. One revised worksharing request was considered due to a change in the planned grouping of variations.

1.2. Revision to CMDv guidance on worksharing

The CMDv's best practice guide on worksharing (BPG-018) has been updated to take into account the changes introduced by Commission Regulation (EU) No 712/2012. Notably, from 4 August 2013, the CMDv will no longer be operating 'informal' worksharing procedures since the inclusion of purely-national MAs is now foreseen in the revised variations Regulation.

For applications intended to be submitted to the Member States before 4 August 2013:

- edition 2 of BPG-018 remains in effect;
- the current letter of intent, which still makes the distinction between 'formal' and 'informal' worksharing, should be used.

For applications intended to be submitted to the Member States after 4 August 2013:

- edition 3 of BPG-018 should be referred to. The CMDv's interested parties will be invited to comment for one month on this updated version but in the interests of time, it has already been published in track changes in order to enable all MAHs to consider the practical aspects;
- there is an updated letter of intent, which should already be used from now on.

The different versions are all clearly identified on the CMDv website (link).

1.3. General advice on submission of variations

Applicants are asked to ensure that the variation application form clearly identifies each individual change in the section on Present/Proposed. This includes proposed editorial changes and also each individual change to the quality part of the dossier (particularly the ASMF). If, on assessment of the application, the RMS identifies variations that have not been specified (e.g. within the editorial changes) in the application form, then the applicant will be asked to send a revised application form and any additional fee to the RMS and CMS(s) in order that each variation can be recorded within the life-cycle of the product.

2. Pilot for new validation checklist in MRP/DCP

The CMDv working group on validation has developed a harmonised validation checklist to be used by the RMS and CMS(s) in new marketing authorisation applications submitted via MRP/DCP. This checklist will be used during a pilot phase running from 1 June until the end of 2013. A communication has been published with further details (link) and the checklist is also available to view (link).

3. Changes to the active substance master file (ASMF) procedure

The joint CMD/CxMP/QWP/EMA/EDQM working group on the ASMF procedure has developed a worksharing procedure for assessment of ASMFs, for which the pilot phase is intended to commence on 1 October 2013. There is a link from the CMDv website (under the 'Applications' section) to the relevant section of the CMDh website (link), where the procedural document and a communication regarding the ASMF worksharing pilot will shortly be published.

4. Borderline working group

The CMDv's borderline WG discussed a product for the establishment of healthy gut flora in poultry chicks. For this type of product, the claims are critical to whether it is to be considered as a veterinary medicinal product or not e.g. a statement on reducing the risk of re-infection with *Salmonella* would imply a medicinal status (by presentation) in many Member States. The group also noted that the claims for a borderline product are sometimes provided, not on the immediate/outer packaging/package leaflet, but in a stand-alone brochure that is made available to the user on request. The CMDv noted jurisprudence from the case Ter Voort C-219/91, where the following is stated: *"A product whose therapeutic properties are indicated solely in a publication, such as a brochure, which is sent - at his request - to the purchaser after sale by the manufacturer or the seller of the product or by a third party (where the third party does not act completely independently of the manufacturer or seller) may be categorised as a medicinal product by virtue of its presentation."*

5. Invoking article 6(3) of Directive 2001/82/EC

MA applications submitted under article 6(3) for VMPs used in horses not intended for human consumption should be an exception. Both criteria laid down within this article must be followed i.e. where MRLs have not been set for the pharmacologically active substance(s), the application can only be accepted if there are no other VMPs authorised in the EU for use in horses for the same condition(s) *NB the active substance is not an exclusive criterion in determining the application of article 6(3)*. It was agreed by the CMDv that it is difficult for Member States to individually review requests for applications under article 6(3) since information is required from other MSs on whether they have products authorised for the same condition(s). Therefore, applicants are requested to copy the CMDv secretariat when approaching Member States regarding the use of article 6(3) so that the requests can be circulated via the CMDv.

6. Interested parties meeting

An extended interested parties meeting was held on 16 May between the CMDv and members of IFAH-Europe, EGGVP and AVC. During the meeting, there were fruitful discussions on the following points:

- Update on the pilot ASMF worksharing procedure;
- Registration of a spot-on product with different presentations (follow-up question to the CMDv on what constitutes a strength versus a presentation for such products, to be further discussed);
- Update on CMDv pilot for standard validation checklist in MRP/DCP;
- QRD/CMDv product information template v8, discussion on opportunities for reducing labelling text;
- Update from IFAH-Europe on their development of a catalogue of standard pictograms and abbreviations for the immediate label;
- Single package leaflets for several strengths of oral, solid/semi-solid dosage forms (to be further discussed by the CMDv).

7. Transfer to mutual recognition-status after article 34 referral procedure

After finalisation of an article 34 referral procedure with a positive European Commission Decision, subsequent variations for the product involved must be submitted via MRP in order to maintain the harmonisation achieved. The CMDv has outlined a procedure to 'lift' existing national MAs to mutual recognition-status (link) and MAHs can contact the CMDv via the secretariat with any questions on this procedure for their particular product. This CMDv procedure is referred to in the letter that MAHs receive from the European Medicines Agency with the adopted CVMP opinion at the end of an article 34 referral procedure. Two products have successfully undergone this transfer to MR-status, resulting in newly-allocated MRP numbers.

8. Documents

8.1. CMDv best practice guide on the decentralised procedure

CMDv BPG-002 on the DCP has undergone a general update and was sent for a two-month consultation to the CMDv's interested parties running until 24 June. After this time, any comments received will be further discussed by the CMDv and the finally-revised version will be re-published on the CMDv's website in track changes.

8.2. CMDv best practice guide on worksharing

See section 1.2 on page 2.

8.3. High quality national translations after MR/DCP

The CMDv adopted new guidance: BPG-017 on the submission of high quality translations during the national phase following day 90/210 of MR/DCP (based on existing CMDh document). It will shortly be sent to the CMDv's interested parties for a two-month consultation period, after which time the document will be reviewed in light of any comments received.

8.4. CMDv guidance on email use between RMS & CMS during MRP/DCP

CMDv GUI-003 has been updated and re-published (link) to reflect current practice and aspects such as worksharing procedures, which were not included in the previous version. This document is for information only to applicants since it is intended for use by the RMS and CMS(s).

Information

CMDv documents are available on www.hma.eu/cmdv.html
For further information, please contact the secretariat at the European Medicines Agency, 7 Westferry Circus, Canary Wharf, London, E14 4HB, UK; cmdv@ema.europa.eu

Common abbreviations used in this document

BPG	Best Practice Guide (CMDv)
MA	Marketing authorisation
MAA	Marketing authorisation application
MAH	Marketing authorisation holder
MS	Member State
NCA	National competent authority