

## CTFG Work Plan 2008-2009

### 1. INTRODUCTION

To help implement the clinical trial directive (2001/20/EC (CTD) and its guidances consistently in MSs legislation, the EU Heads of Medicines Agencies (HMA) agreed to establish the Clinical Trials Facilitation Group (CTFG) in 2004. The Member State National Competent Authorities (NCAs), the European Commission and the European Medicines Agency (EMA) are represented on the Group. The CTFG meetings provide a unique opportunity for MS clinical trial leads to network with colleagues addressing similar issues and discuss best practice.

So far, CTFG's aims have been to:

- Improve interactions between the MS NCAs;
- Discuss implementation of the Clinical Trials Directive by MS;
- Clarify different interpretations of the Directive or guidances;
- Identify common issues with implementation;
- Share best practice across the MS.

### 2. AMBITIONS FOR CTFG IN 2008-9

Further to the 3 October 2007 conference organised by the European Commission and EMA, the importance of maintaining the following general principles for the conduct of clinical research in the European Union has been recognised:

- Protect clinical trials (CT) subjects
- Ensure high-quality research in the EU
- Contribute to a favourable research environment in EU.
- Bring innovative medicines to patients as quickly as possible.

The question is to rapidly make the system more efficient so that it enhances its contributions to public health and avoid unnecessary burden to sponsors.

For these reasons there is a strong need, within the current legal framework:

- to bring more coherence and coordination to the system, by securing the scientific value and the conduct of multinational CTs
- to get a common interpretation of the regulatory aspects, and get harmonisation and simplification of the requirements in the dossiers submitted to NCAs
- to streamline procedures
- and to enhance transparency with stakeholders.

These are the main concerns that the HMA have highlighted in the new mandate of CTFG.

For the next two years and according to the exact terms of its new mandate, the CTFG has 4 ambitions, based on the need for harmonisation:

- sharing scientific assessment of multinational CTs ;
- harmonising processes and practices relating to clinical trials, mainly in the fields of clinical trial applications (CTA), amendments and safety procedure;
- developing data sharing and participating in the improvement of information systems;
- developing communication with stakeholders and cooperating with other EU working groups.

### **3. 2008-2009 CTFG ACTIONS PLAN.**

#### **Sharing scientific assessment of multinational CTs (MNCTs).**

The promotion of coordination between NCAs in the evaluation of multinational clinical trials and of harmonised decisions is one of the major tasks of CTFG.

In this context, common assessment criteria and general principles are to be developed in order to ensure subjects' safety and IMP's quality and safety within the best time frames for sponsors, by:

The organisation of a forum for experts discussion of scientific issues related to clinical trials.

In this context, CTFG should:

- a) Develop, support and expand scientific CT assessors networks through
  - regular and easy exchanges of information,
  - meetings dedicated to specific issues in order to build common assessment criteria.
- b) Share information thanks to the European information systems
- c) Discuss critical multinational first-in-human (FIH) clinical trials, contribute to the identification and evaluation of factors of risk in clinical trials, based on the experience of individual applications particularly for first-in-human trials, and use the experience for input into the update of guidelines.

For that purpose, CTFG should develop coordination of the assessment of critical multinational FIH by:

  - o Strengthening informal exchanges,
  - o Reviewing and discussing FIH prematurely ended,
  - o Evaluating divergent decisions.

The development of a standardised sharing process for a coordinated assessment of Multinational CTs.

A procedure for coordinating the assessment of multinational CTs (Voluntary harmonised procedure/VHP) including multinational FIH is to be proposed and a pilot phase to be set up as soon as the procedure is endorsed by HMA.

## **Harmonising processes and practices relating to CTs.**

CTFG should develop harmonised and simplified procedures (as far as these are not set in national regulations) and practices relating to clinical trials.

In that context, CTFG should particularly focus on 3 main fields: the CTA dossier, substantial amendments (SA) and pharmacovigilance of clinical trials through two subgroups: the CTFG CTA-SA subgroup and the CTFG pharmacovigilance (PV) subgroup. CTFG should:

Harmonise process and practices relating to CTA and SA

- With regard the Clinical Trial Applications (CTA), the objectives are:
  - a) To agree on a single set of requirements as the core information required by any MS for a CTA,
  - b) To agree on the information specifically requested by any MS (in addition to the MS's agreed core set) and format for the publication (CTFG website) ;
  - c) To foster simplification of the MS's specific requirements for a CTA, as far as far as these are not set in national regulations;
  - d) Develop harmonised procedures and standardised digital formats and structures to support CTA electronic submission to NCA across MSs
  
- With regard to Substantial Amendments (SA) the CTFG's objectives are:
  - e) To clarify the guidance on SA
  - f) To improve the consistency of NCAs interpretation and related procedures with regard to SA

### Harmonise MS requirements for reporting-assessing adverse reactions

The objectives of the CTFG PV subgroup, working with Eudravigilance working group of EMEA, are to :

- a) Agree on a single set of requirements for reporting SUSARs (harmonisation of SUSARs reporting in EU, clarification of definitions (seriousness, unexpectedness), harmonisation of unblinding rules) ;
- b) Implement procedures to ensure that all SUSARs are entered into the Eudravigilance Clinical Trials Module (EVCTM);
- c) Agree on methods for monitoring the safety of clinical trials;
- d) Agree on the content and format for annual safety reports taking into account the ICH draft document on development safety update report (DSUR);
- e) Explore different formats and content for reports of safety data from EVCTM;
- f) Agree on how to use resources effectively to monitor CT safety by MS sharing work.

## **Developing data sharing and participating in the improvement of information systems (EudraCT and Eudravigilance databases).**

Data sharing is the key element of the coordination of assessment. As a result, the need for developing functionalities of Eudract to support exchange of information on decision making and to facilitate work-sharing has been clearly identified.

### EudraCT enhancement

- Enhancement of alerts on MS decisions, including withdrawals, to be circulated to all NCAs.

- Enhancement of search and report functionalities
- Ability to attach assessment reports
- Improved links with Eudravigilance clinical trial module (EVCTM) to facilitate combined analysis of SUSARs and CTA (via the development of data warehouse)
- Coding IMPs, to combine Eudract and EVCTM information.

Improvement of the rate and quality of data entry into Eudra CT by NCAs, by:

- Prioritising data entry of information about refusals, withdrawals or grounds for non acceptance of a CTA by each NCA,
- Standardising data use in order to improve CTA processus, developing new functionalities of Eudract, working on export from national databases.

### **Developing communication on CTs and cooperation with other working groups**

Communication with stakeholders

Simple communication channels between the clinical trials units of the NCAs.

The details of CTFG work should be communicated to interested parties and the general public through the CTFG website which should be set up in the new HMA website.

Cooperation with other working groups e.g.

- With the European Commission's ad hoc experts group for the development and implementation of future CT legislation and guidance,.
- With other working groups at the EMEA level.