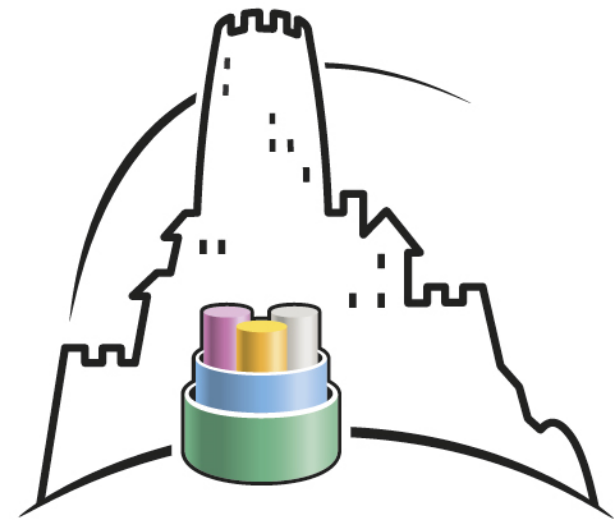
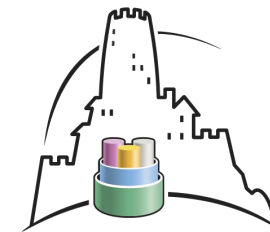


CTADHL (Citadel) Stakeholder meeting



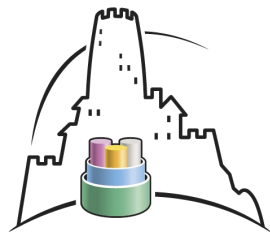
Call to Action – Delivering Data and Health Literacy
16th of November, 2021

Agenda



16th of November 2021, 15:00-17:30 PM, CEST

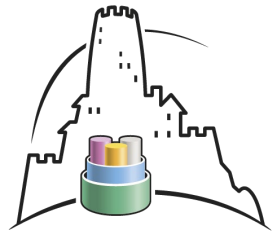
Start	Topic
15.00-15.10	Welcome and opening remarks (Vada Perkins, Frits Stulp, Christian Hay)
15.10-17.25	<p>Main discussion:</p> <ul style="list-style-type: none">- WP1: IDMP related standards and terminologies (Robert Stegwee & Christian Hay – UNICOM)- WP2: Implement IDMP, substance management in Europe (Annet Rozema, EU-SRS project manager, CBG-MEB)- WP3: Pan-European IDMP compliant application forms (Georg Neuwirther, Head of IT, Austrian medicines and medical devices agency)- WP4 : IDMP implementation at national drug agencies (Christer Backman, International & EU coordinator, Swedish Medical Products Agency) <p>Open discussion</p>
17.25-17.30	Closing remarks and final wrap up (Mary Ann Slack, Director US FDA)



UNICOM, 13 Work Packages (WP)

- WP01 IDMP-related standards and terminologies
Robert Stegwee - Christian Hay
- WP02 Implementation of IDMP – Substance Management in Europe
Joris Kampmeijer Annet Rozema (CBG)
- WP03 Pan-European IDMP-compliant application forms
Georg Neuwirther Noel Diamant (AGES)
- WP04 IDMP implementation at National Drug Agencies
Pelle Persson (MAP, Sweden), Georg Neuwirther
- WP05 IDMP adoption by eHealth Services
Diogo Martins Anderson Carmo (Portugal)
- WP06 Software and extensions for CEF eHDSI
Alexander Berler, Kostis Kaggelides, Fotis Gonidis (Greece)
- WP07 eHDSI cross-border / national eHealth services piloting **Marcello Melgara** (Italy)
- WP08 Clinical care, Patients, Pharmacies, Research and Pharmacovigilance **Dipak Kalra**, Lucia Comnes, Robert Vander Stichele
- WP09 Medicinal Product Dictionaries and Clinical System Software **Julie James**, Dipak Kalra, Ursula Tschorn
- WP10 Socio-economic Impact & Sustainable Legal and Governance Aspects **Rainer Thiel**, Karl A. Stroetmann, Petra Wilson (Legal)
- WP11 Project management Shahan Tariq, **Farah Diehl-Fahim**, Karl A. Stroetmann
- WP12 Overall scientific coordination and dissemination **Karl A. Stroetmann**, Shahan Tariq
- WP13 Ethics requirements **Veli Stroetmann**, Petra Wilson

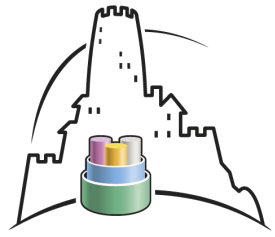




Welcome and opening remarks

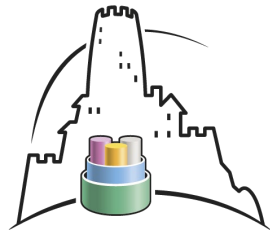
– Introduction CTADHL

CTADHL Mission



- Support global data and health literacy initiatives through trans-Atlantic collaboration and partnerships
- Strong advocate and expert of applicable international data standards
- Provide ISO-IDMP training to EU and US stakeholders who are involved in IDMP implementation or its decision making

CTADHL Board



**Vada A. Perkins –
President (CTADHL)**

- Executive Director, Bayer Pharmaceuticals
- ISO TC215, Technical Advisory Group (TAG) Member
- Strong FDA and Industry experience on adoption of ISO IDMP



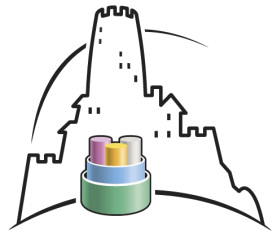
**Frits Stulp – Chairman of
the Board**

- IDMP implementation SME in industry and regulator (Iperion)
- Promotor of ISO IDMP (IRISS IDMP Topic Group Leader)



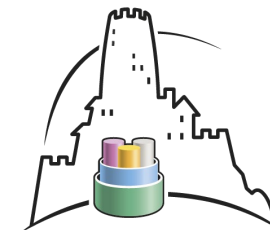
**Christian Hay – Executive
Board Member**

- Senior Consultant Healthcare (GS1, ISO TC 215)
- Strong contributor to the ISO IDMP standards globally

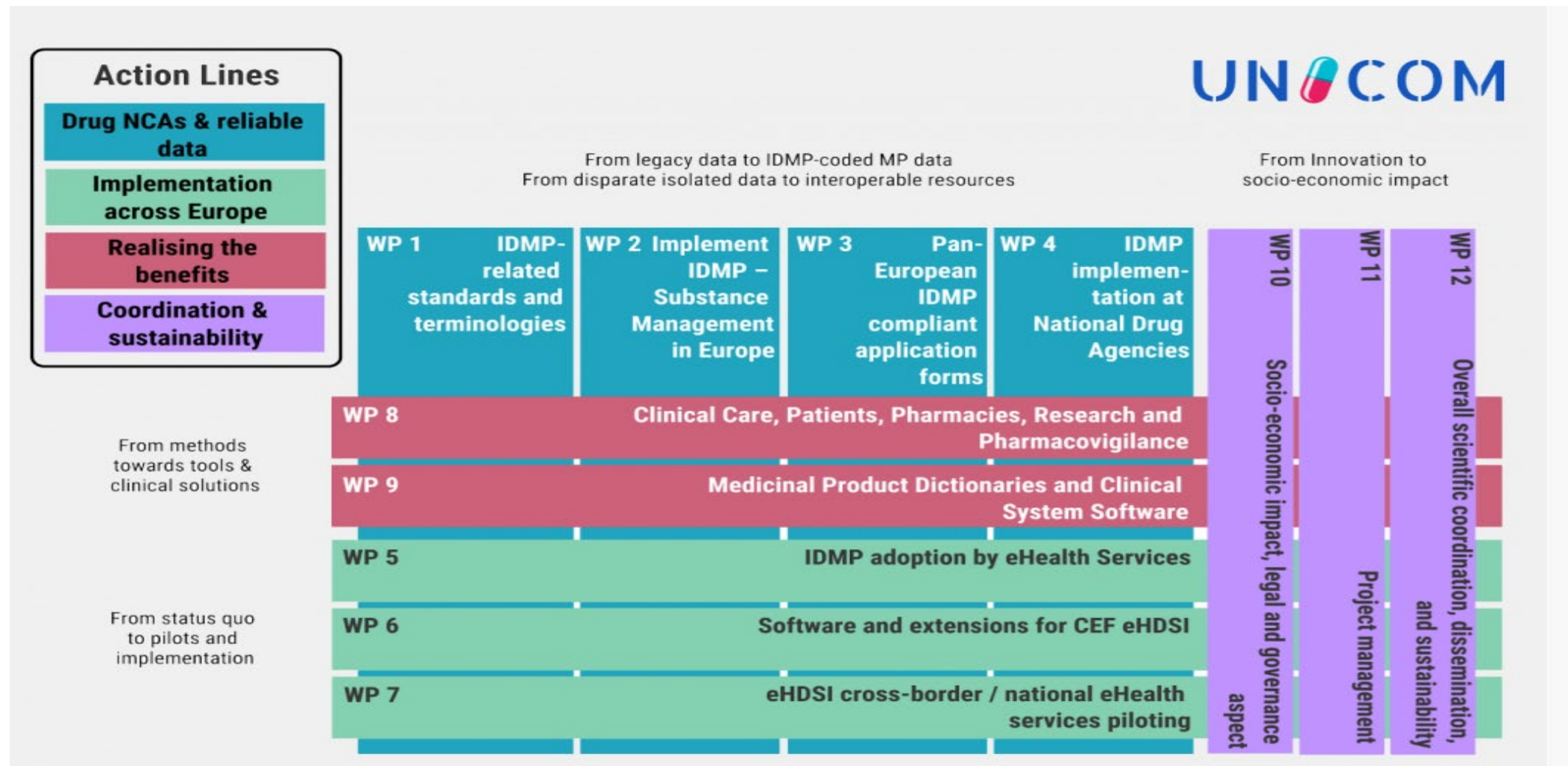


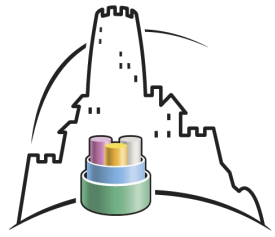
Our goal - execution

- Uniform adoption of the ISO IDMP standards in Europe, in alignment with trans-Atlantic initiatives and other regions as applicable
- Communication of use cases and value across all communities
- Communicate with key stakeholders to foster continued collaboration and engagement
- Promote and deliver training and education of ISO IDMP and related materials
- Create a network of professionals to contribute to the mission

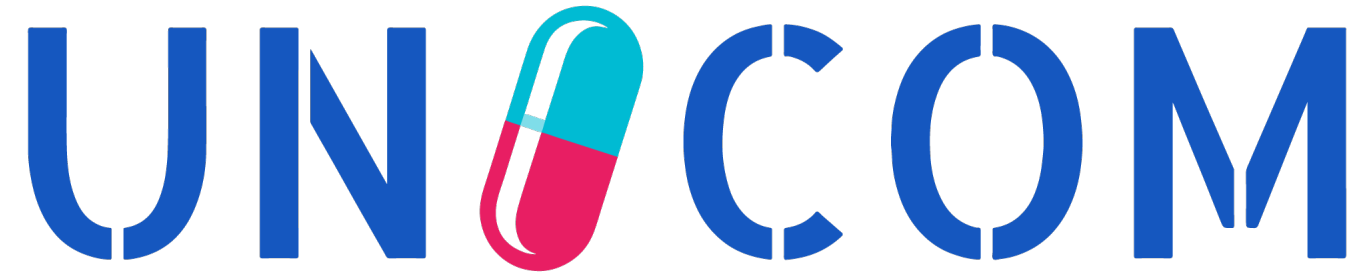


UNICOM Action Lines





Main discussion



Work Package 1

IDMP-related standards and terminologies

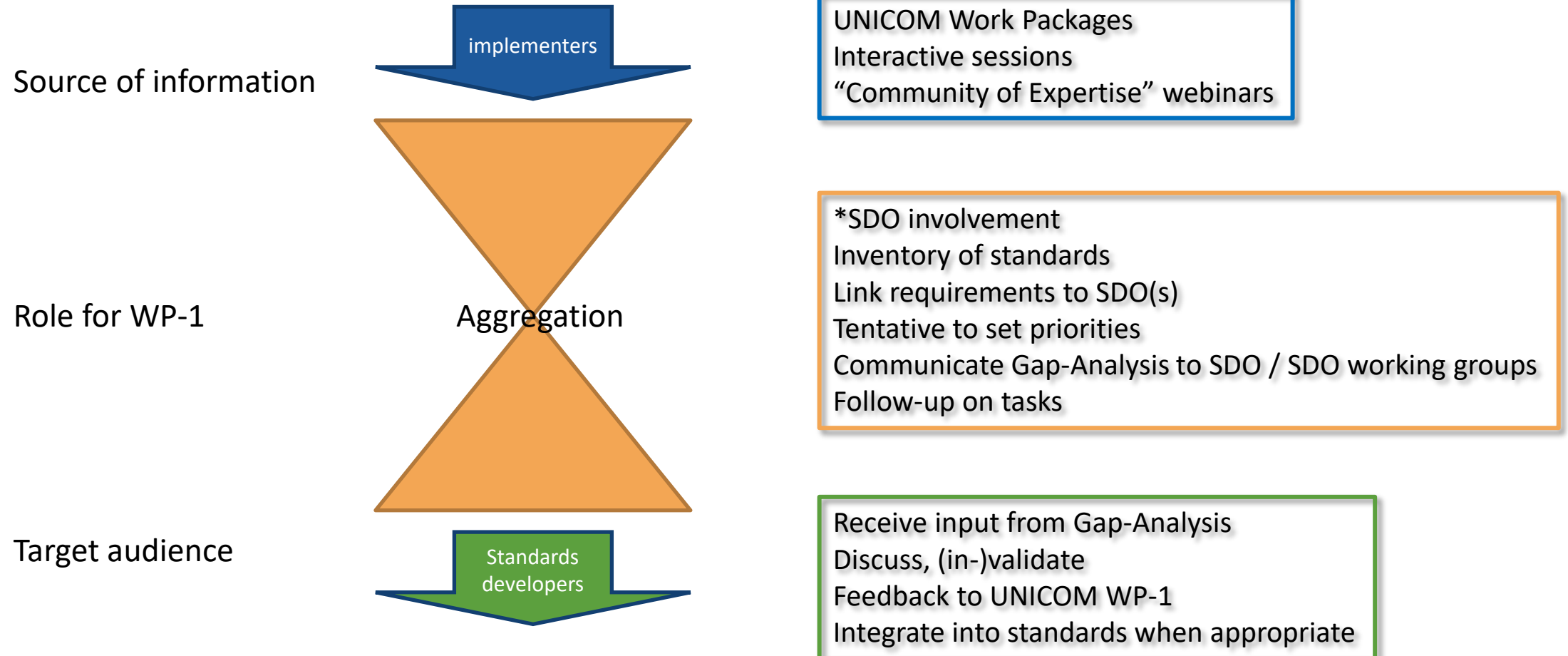
Dr Robert A. Stegwee, Co-Lead of WP 1, Chair of CEN/TC 251 Health Informatics

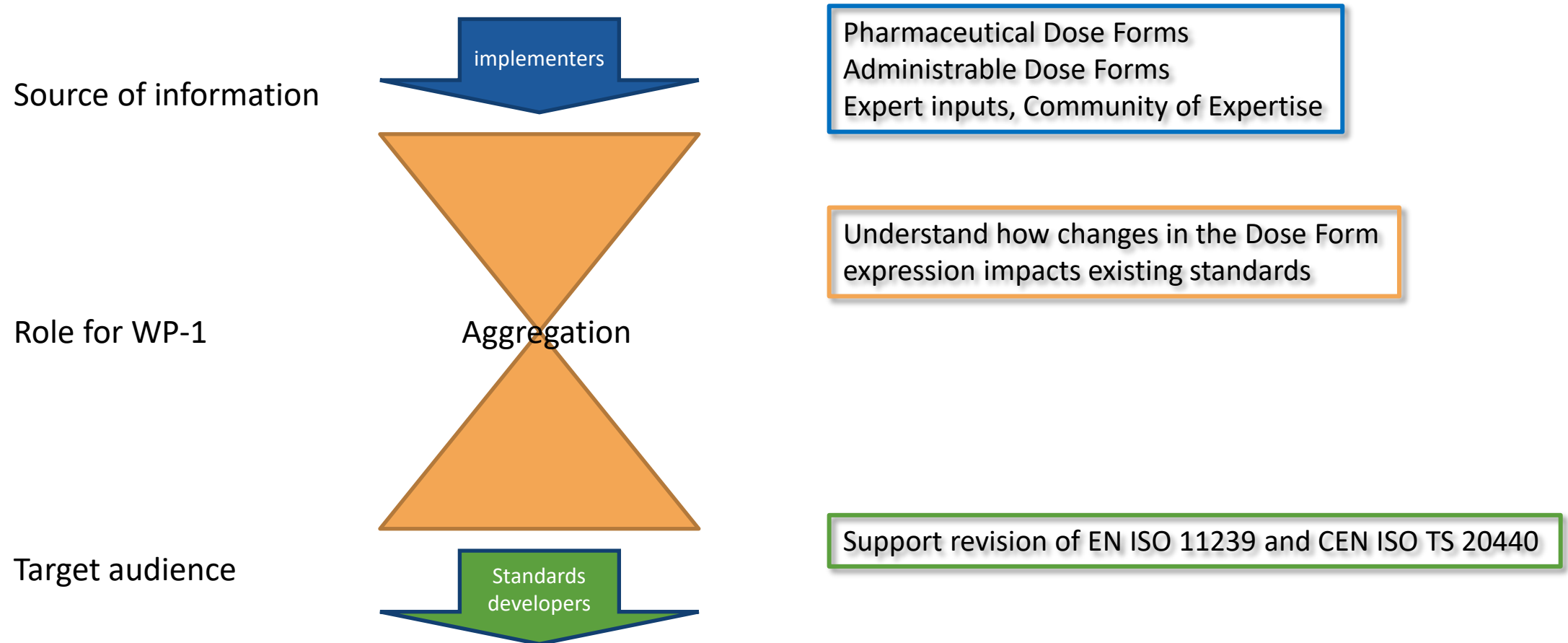


- ▶ Work Package 1 is grouping Standard Development Organisations (SDOs) and related organisations, which have a transversal impact on UNICOM



- ▶ Our main task: to facilitate the implementation of IDMP Data Exchange
 - ▷ Nearly 100 different standards define, use or should use IDMP in data exchange
 - ▷ Liaising with all other WPs, to gather their needs and provide inputs about standards





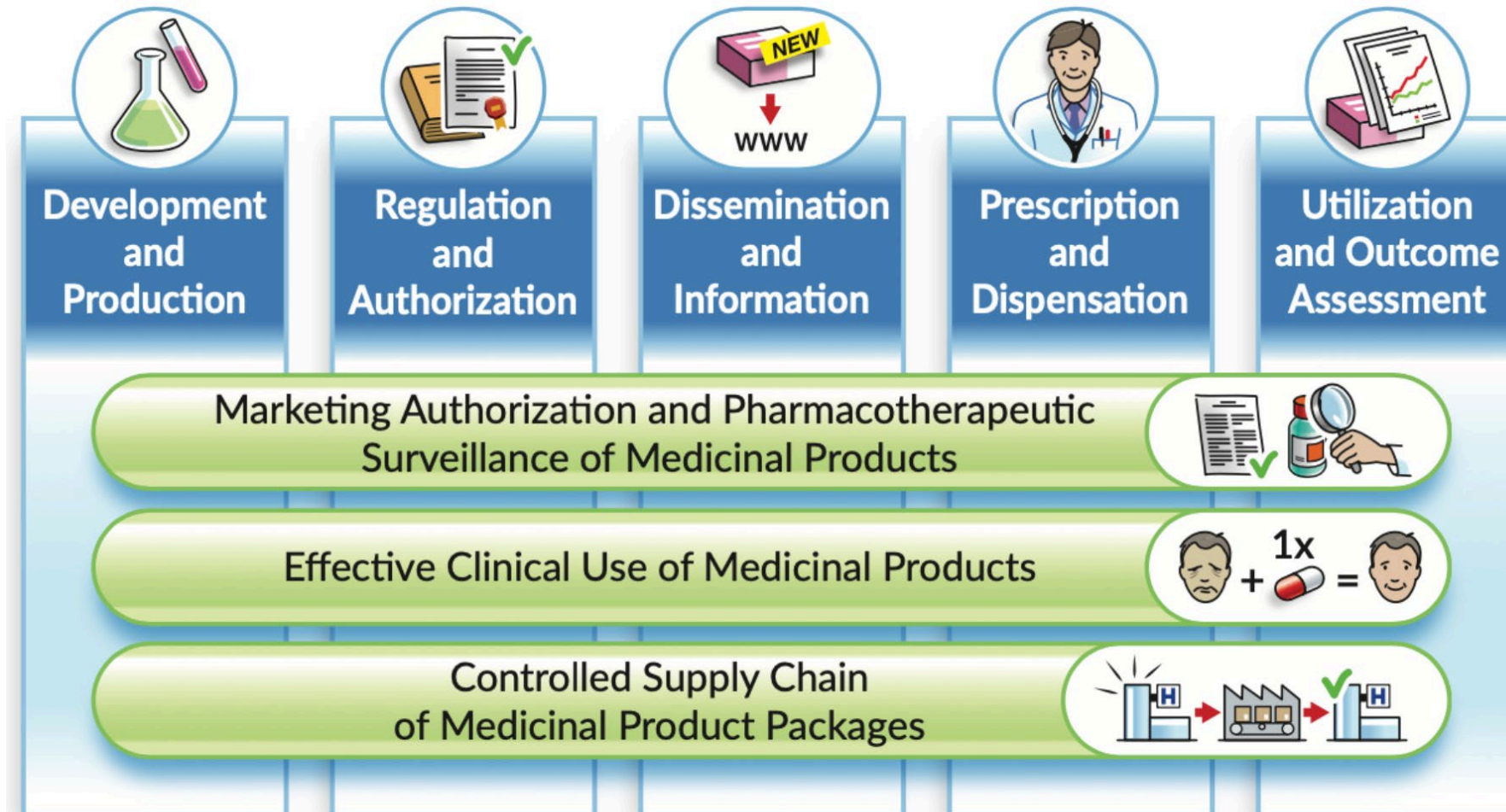
What does it mean for you?

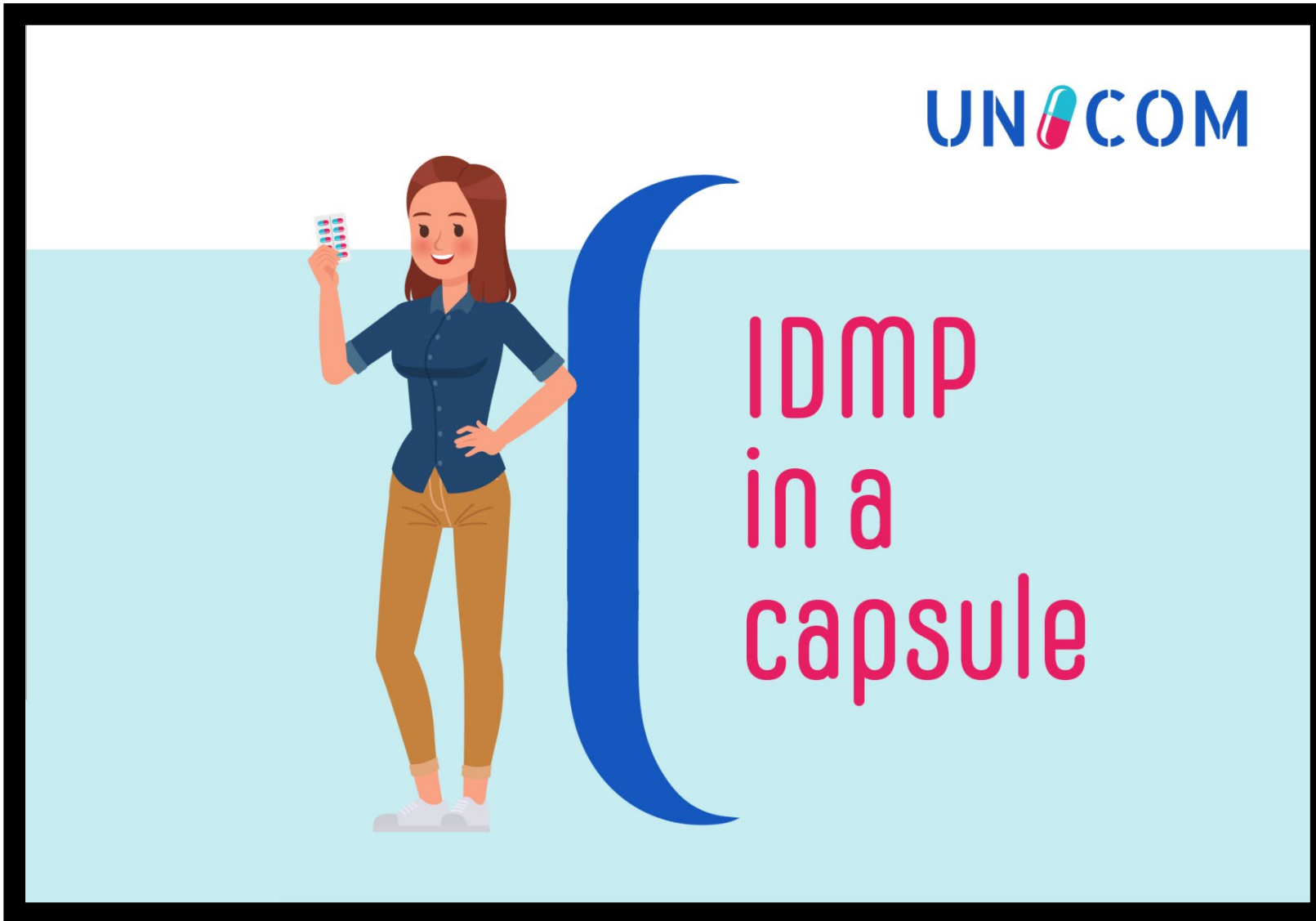
- What is your role in the life-cycle of a medicinal product?



What does it mean for you?

- Which of the high-level processes are you engaged in?



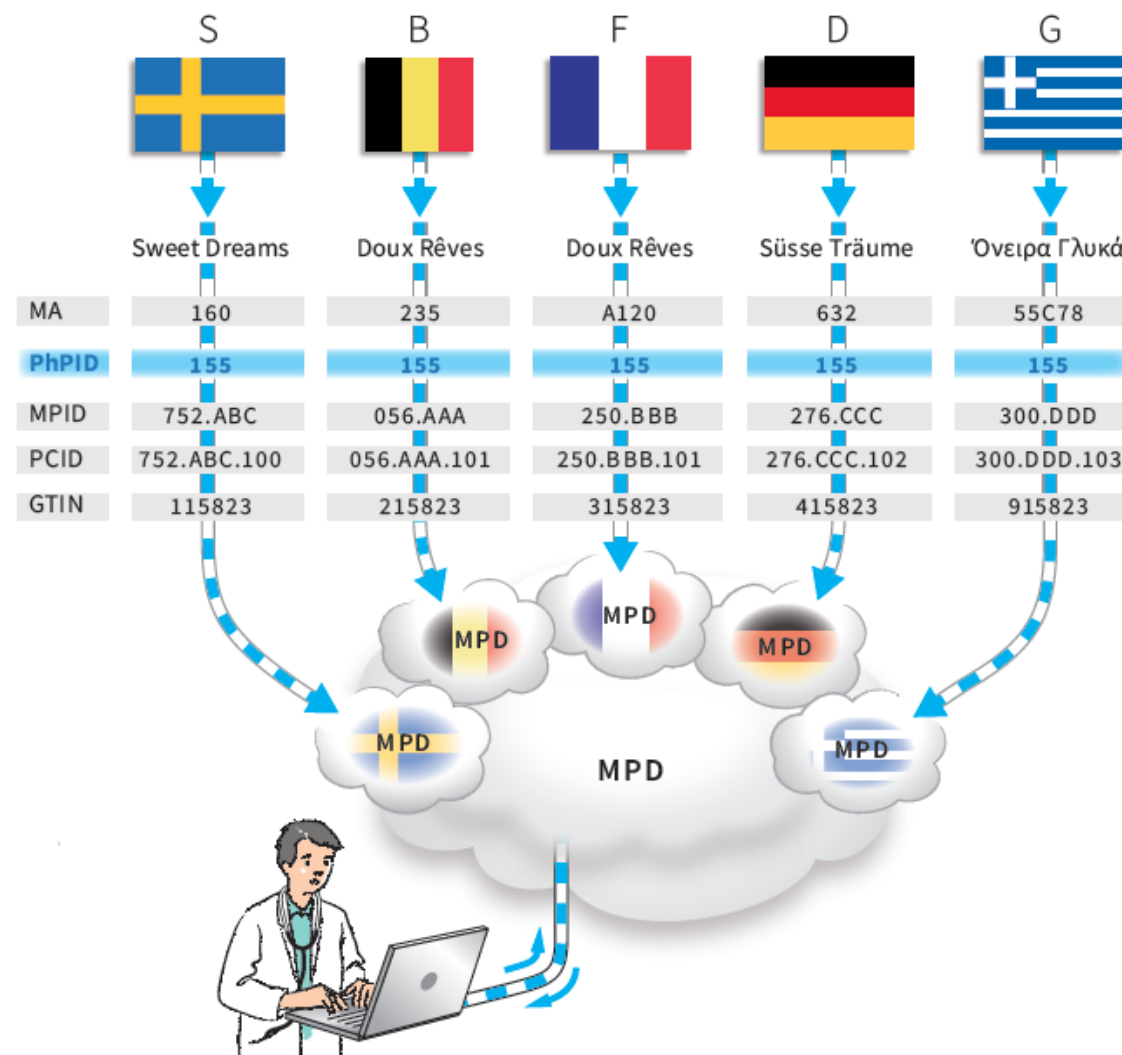


[https://bit.ly/IDMP in a capsule](https://bit.ly/IDMP_in_a_capsule)

Three themes:

1. The **story of Ingrid** – a person using medication and traveling abroad
2. The **theory of IDMP** explained in simple terms
3. The **story of SweetDreams** – a medicinal product marketed under different names in different countries

- Illustrate how IDMP identifiers «bridge» the different processes:



- ▶ Pharmaceutical companies and regulators shall take action to fully implement IDMP standards for medicinal products
- ▶ IDMP standards-enabled information shall then be collected and stored in medicinal product dictionaries (MPD) for easy access by doctors and pharmacists
- ▶ With the link between IDMP standards and the MPD, IT solution providers shall integrate this medicinal product information in their solutions
- ▶ Only then, will healthcare providers be able to safely prescribe and dispense the right medicinal products to the right patients, regardless of where they are
- ▶ Public health organisations can more easily and quickly aggregate worldwide information to address ADEs, recalls and important public health initiatives to ensure the world is a safer place for everyone.



- ▶ Started with a series of workshops on specific issues with IDMP standards across UNICOM
- ▶ Published the Gap Analysis report, detailing what is missing or could be improved across the standards landscape
- ▶ Published the Requirements for a new ISO Logical Model, integrating the different life-cycle stages and separating out the stage-specific requirements for regulatory, for clinical use, for pharmacovigilance, etc.
- ▶ Identified work to be started on mapping EDQM to SNOMED-CT, to have access to correct pharmaceutical dose form information (both manufactured and administrable) in the clinical context
- ▶ Many more topics to promote the reuse of data across the life-cycle, rather than recoding, retyping, and maintaining the same information in each of the silo's / stages
- ▶ We're following through with the actions identified in the Gap Analysis report, through user interviews across the WPs
- ▶ We're reaching out to the broader audience through our monthly Community of Expertise meetings.

► www.unicom-project.eu

Dr Robert A. Stegwee

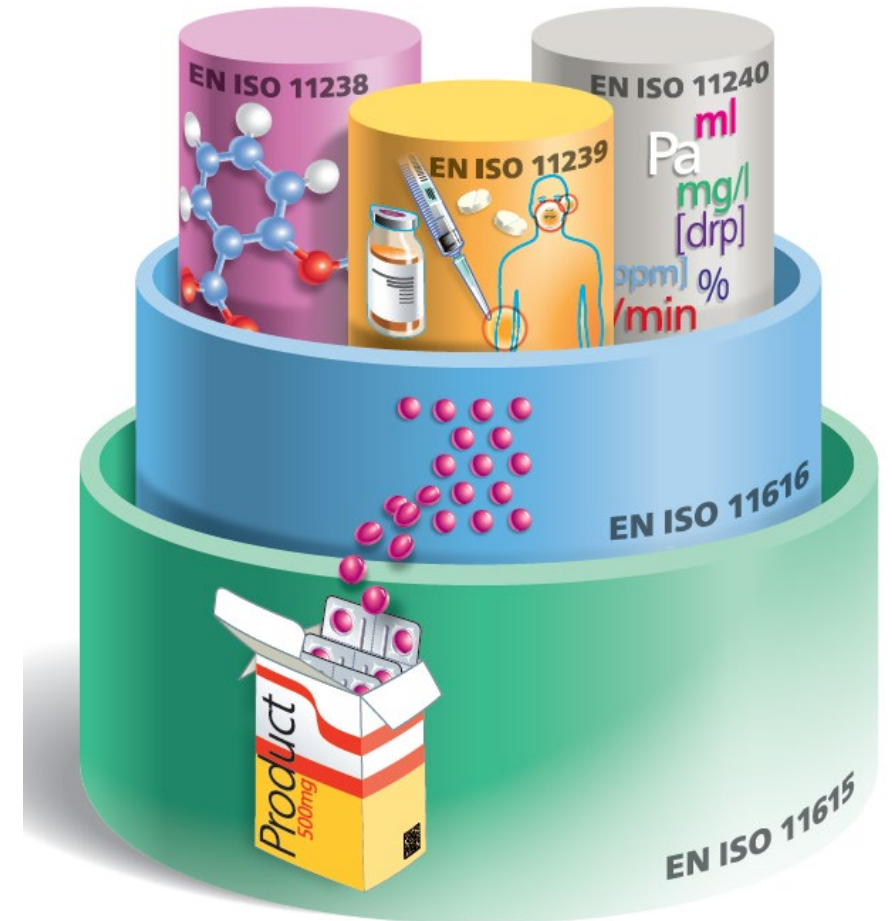
Transformational Consulting in eHealth

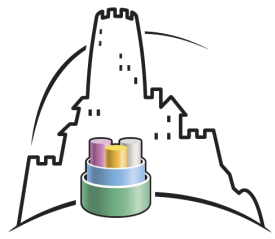
Spoorstraat 31

7471 BV Goor / The Netherlands



robert@trace-health.nl





Up-scaling the global univocal identification of medicines

WP2: Technical review

- ▶ Background of EU-SRS project
 - ▷ What is EU-SRS
 - ▷ EU-SRS Project
 - ▷ Collaboration with partners
 - ▷ The future of substance management
- ▶ Data cleansing activities
 - ▷ General update on cleansing
 - ▷ Chemicals cleansing results
 - ▷ Next phase
- ▶ System-related matters
- ▶ Globalization



Background EU-SRS / WP₂

What is EU-SRS?

- ▶ EU-SRS = **E**uropean **S**ubstance **R**egistration **S**ystem
- ▶ EU-SRS will be connected to the EMA-SPOR Substance Management Service (SMS)
- ▶ EU-SRS will be maintained by a group of experts, *Substance Validation Group (SVG)* in cooperation with EMA data stewards

Why EU-SRS?

- ▶ There is no EU wide database with scientifically sound substance information of adequate quality for use in regulatory use cases, leading to errors in submissions, rework by assessors and duplication of substance expert work across the network.
- ▶ Successful support of the Product Management Service (PMS) as part of SPOR, is fully dependent upon the availability of a stable, reliable substances information, of adequate granularity.
- ▶ There is a legal obligation to implement the ISO IDMP standards: (EU) No 520/2012
- ▶ Many current business cases cannot be efficiently implemented without an EU substance database.
- ▶ NCA's will benefit of an EU substance database in the management of their own local substance database.

WP2 – Key components of the activities

Substance Data

Cleansing EMA's SMS data
Building data in EU-SRS

- Chemicals
- Proteins
- Structurally Diverse /Vaccines
- Polymers
- Mixtures
- SSG1

EU-SRS System

Install & validate EU-SRS &
Load substance data

- Validation Plan
- Test scenarios
- Prepare for interface with SMS
- Data load script
- Interim Hosting: BfArM (current)
- Final hosting: EMA (2022)

Documentation

Best practices
Maintenance processes

- Data cleansing guide (published)
- EU-SRS User manuals
- User training materials
- Interim process description
- Final process description
- Master Data Management Plan
- Signature Fields per Subst Class

Project oversight

Project Management
Stakeholders & Collaboration

- Oversight, planning, risk mgt
Collaboration & Communication:
- EMA, NCA's, HMA,
 - FDA/NATS, WHO-UMC
 - Industry (Subst. Work Groups)
 - Other WPs (esp WP1, WP3, WP4, WP8, WP9)

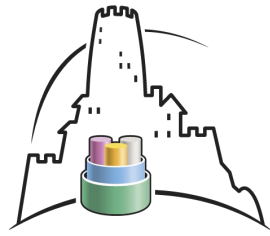
Parties directly involved

Unicom partners + other partners

- **EU Agencies:**
 - Unicom: AEMPS, AGES, BfArM, NoMA, SEMPA, FIMEA, CBG
 - Others: SUKL, PEI, JAZMP, ANSES, EMA
- **Others**: WHO-UMC, FDA/NCATS

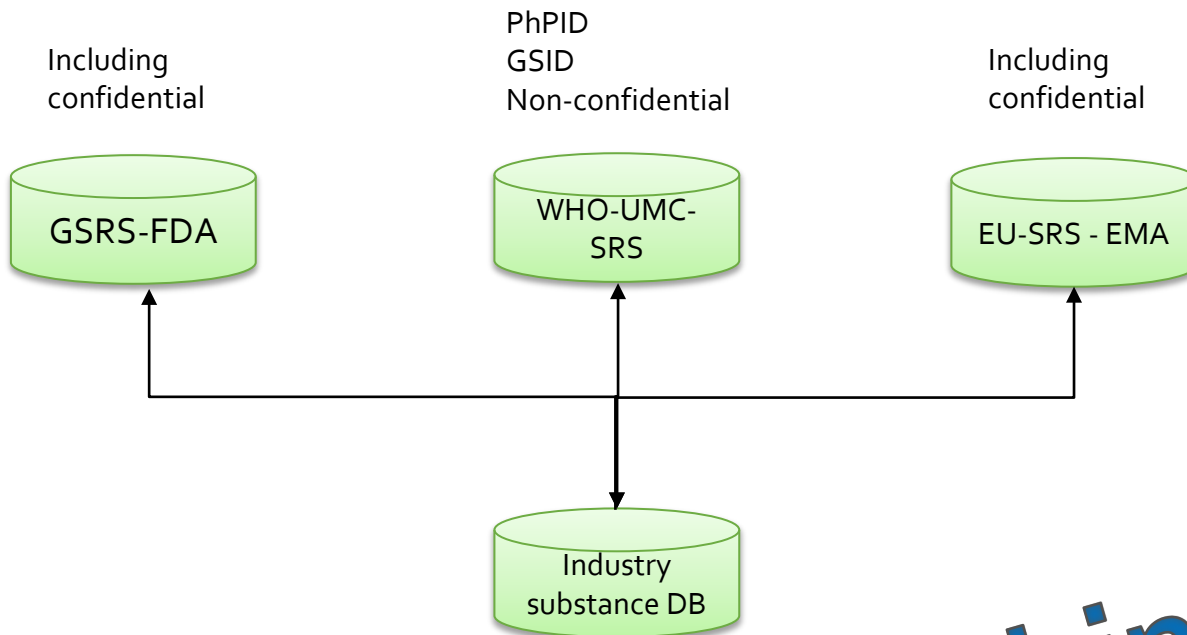


EU-SRS – Collaboration with Partners



- There is a close collaboration with EMA, NCA's, FDA/NCATS, and WHO-UMC
- The 22 SVG members come from a variety of NCA's. They are assessors and/or substance experts

The future of substance management?



- Substance identifiers (UNII, EUTCT, GSID)
- Global approach, standards
- Same "signature fields" in each SRS
- Data exchange, staging area
- JSON file shared, validated, confirmed
- Share resources (agreed process)
- Scope differences between the instances
 - Early devt substances yes/no
 - Veterinary substances yes/no
 - Food, homeopathics

Current thinking

Data Cleansing



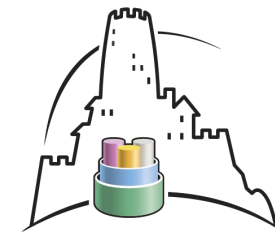
General overview cleansing substances

Substance Class	# unique EUTCT codes	SVG cleansing names	SMS processing SVG advice	EU-SRS building records
Chemicals	17.000	Completed	Ongoing. Aim to complete 93% in 2021	Load into EU-SRS with script. Testing ongoing
Veterinary vaccines	1.036	Completed	Completed	Load script + some manual work. Preparation in finalization stage
Human vaccines	1.030	Ongoing, per organism type Bordetella, Influenza	Ongoing	Ongoing per organism type 5 / 55 organism groups built in EU-SRS
Proteins	2.000	Ongoing	Not yet started	Started, on hold. Current focus is on documenting the cleansing approach
Polymers	1.465	Ongoing, recently kicked-off	N/A	N/A
SSG1	>17.000	Ongoing, prioritization per type	N/A	N/A
Mixtures	1.856	To start in 2022	N/A	N/A



- ▶ **17k unique chemical substances cleansed**
 - ▷ Confirm the preferred term
 - ▷ Match with FDA-UNII
 - ▷ Data load: make use of US public substances data from GSRS (pre-specified what fields to use)
 - ▷ Missing UNII's will be shared with FDA colleagues
 - Possibly increase the rate of matches
 - FDA confirmed the intention to load EUTCT codes into GSRS
 - ▷ Finalize documentation:
 - Master Data Management Manual for chemicals (will be shared with US colleagues)
 - EU-SRS user guide
 - Process description

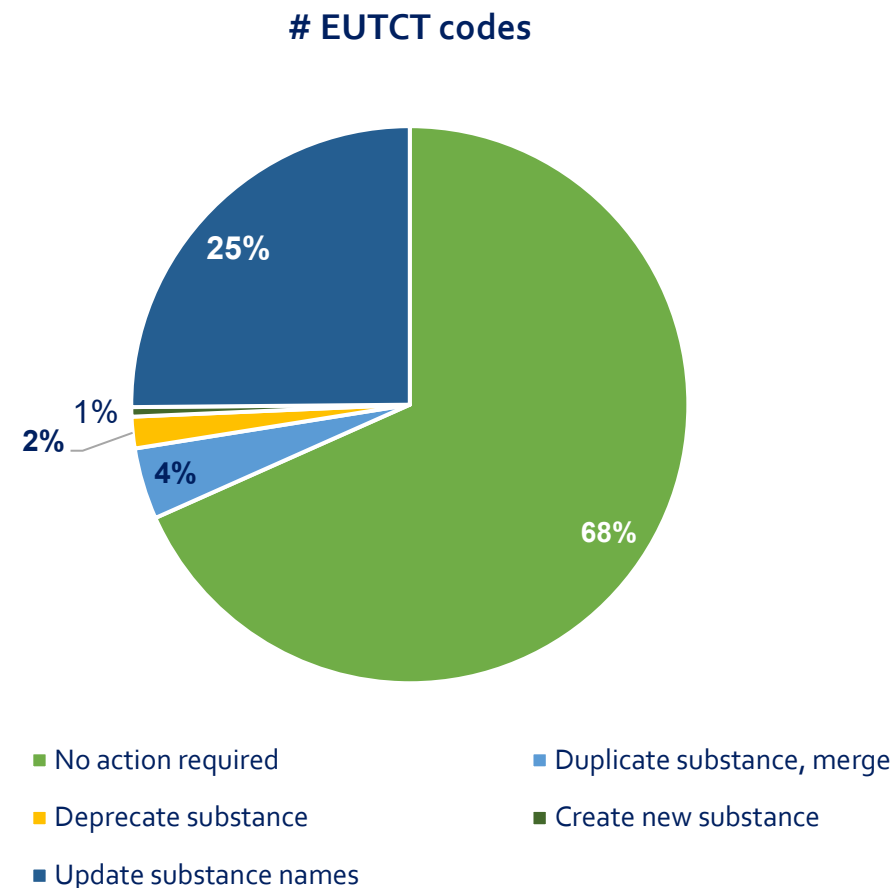
Pre-final results chemicals cleansing



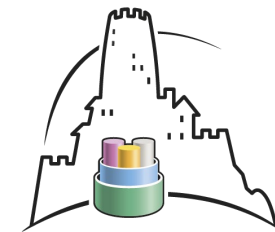
Substance advice categories

- | | |
|---|-----------|
| 1. No Action required for entire EUTCT id | n= ~11200 |
| 2. Substance to be merged, duplicate | n= ~680 |
| 3. Deprecate full EUTCT id | n= ~300 |
| 4. Create new substance/new EUTCT id | n= ~90 |
| 5. Update substance names* | n= ~4120 |

n~17000 unique chemical substances



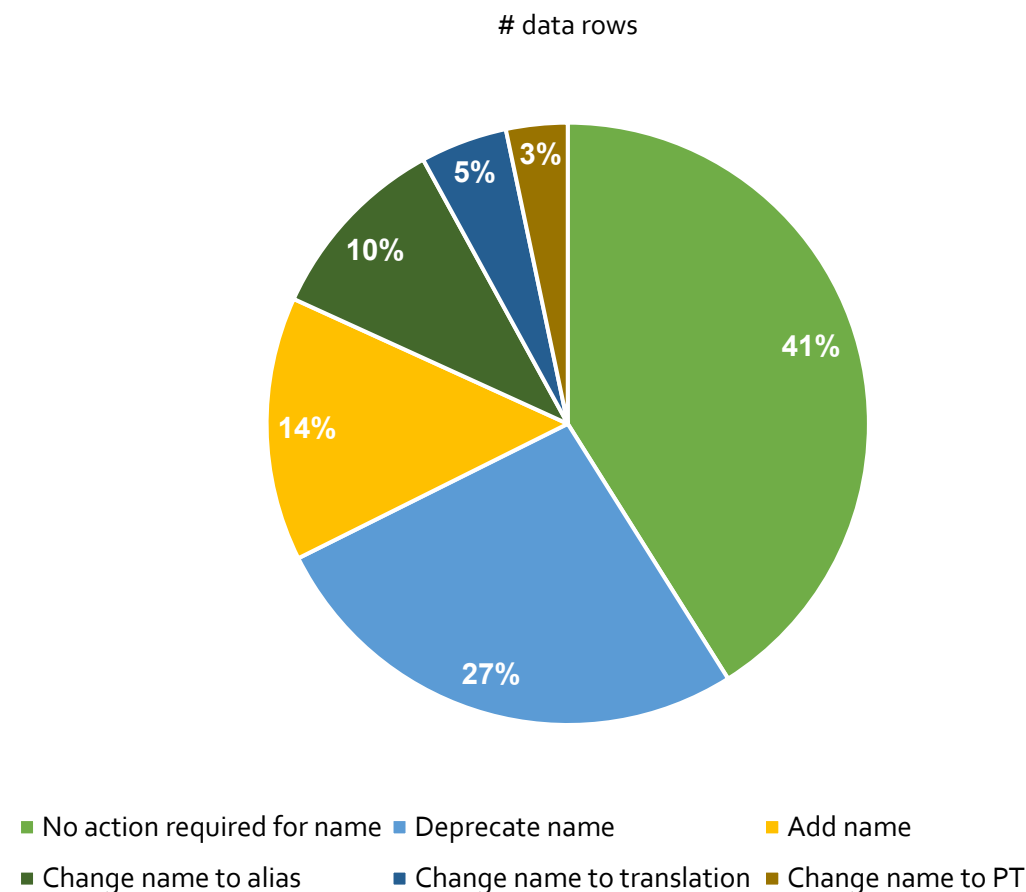
* Details further specified on next slide



Update of substances, continued

Update substance (# of rows)

1. No action required for name **n=~5100**
2. Deprecate name **n= ~3300**
3. Add name **n=~1760**
4. Change name to alias **n=~1270**
5. Change name to translation **n=~580**
6. Change name to PT **n=~ 410**



▶ Next: prioritization of data cleansing

- ▷ EMA provided file with product count per substance
- ▷ Prioritize data cleansing based on product count
 - Authorized substances
 - Excipients + Active ingredients
- ▷ Larger impact from cleansing expected in other substance classes, e.g.
 - Human vaccines
 - Proteins (e.g. insulins)
 - Polymers
 - SSG₁

EU-SRS system matters

UNCOM

- ▶ **EU-SRS at BfArM**
 - ▷ Current hosting by BfArM (GSRS software version 2.7)
 - ▷ Secured access SVG / EU-SRS steam through EurdraNet
 - ▷ Prepare for initial release at BfArM
 - GSRS software version 3.0 (software release expected in December 2021)
 - Validation of the software
 - Validation/confirmation of data load
- ▶ **Hand-over EU-SRS to EMA in 2022**
 - GSRS software version 3.x
 - System documentation
 - Validation documentation
- ▶ **EU-SRS / SMS interface**
 - ▷ Arranging the interface: the earlier the better
 - ▷ Specification of the interface to start soon
 - ▷ Field-by-field definitions, which system is in the lead?
 - ▷ Controlled vocabularies

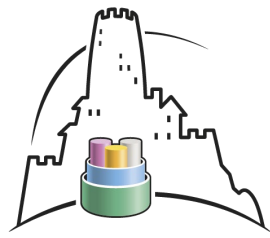
- ▶ **GSRS as open source software**
 - ▷ GSRS software developed by the NCATS team (specs FDA)
 - ▷ Custom code developed by BfArM (DE-SRS / EU-SRS)
 - ▷ Code submitted to the NCATS team
 - ▷ Several components of code implemented in the core software
- ▶ **EU-SRS decisions to be made**
 - ▷ Software version to use
 - ▷ Which custom code components to use (impact on validation)
 - ▷ Validation strategy
- ▶ **Collaboration with the US**
 - ▷ Regular meetings to discuss system-related matters
 - ▷ Input into GSRS software development roadmap
 - ▷ Support in testing efforts, user requirements specification
- ▶ **Future wish: exchange data**
 - ▷ Transatlantic/global alignment
 - ▷ Interest from industry to become involved
 - ▷ WHO-UMC to receive public data

Globalization

UN  COM

- ▶ Wish to take a global view on substance management
 - ▷ Global Vaccines Pilot (results available)
 - ▷ Global approach technically
 - ▷ Global approach in substance management
- ▶ GSRS software under investigation or (being) implemented:
 - ▷ GSRS
 - ▷ USP-SRS
 - ▷ DE-SRS
 - ▷ UMC-SRS
 - ▷ EU-SRS



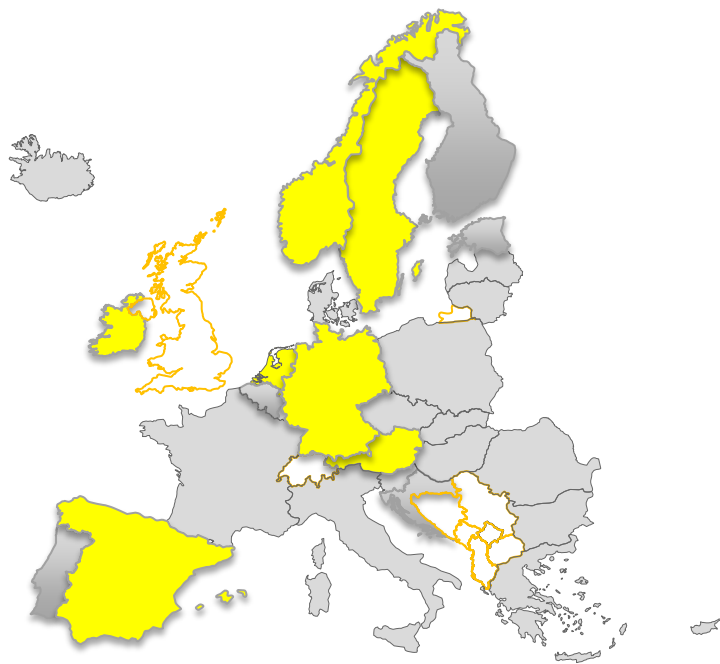


Up-scaling the global univocal identification of medicines

WP3: Pan-European IDMP compliant application forms

Georg Neuwirth, Noel Diamant
Austrian Medicines and Medical Devices Agency, 16.11.2021

- ▶ Engaged and fully committed consortium of 40 members
 - core IDMP data value chain actors are consortium partners
 - 26 National Drug and eHealth Authorities, 7 partners are working in WP3



WP3 members

NCA's
AEMPS – WP3
HALMED
CBG – WP3
BfArM – WP3
AFMPS
HPRA – WP3
INFARMED
FIMEA
SEMPA – WP3
AGES
EESAM
NOMA



“ This innovation action is expected to support two goals:

- (i) the cross-border mobility of European patients by offering safer eDispensations across borders,*
- (ii) the implementation of the IDMP standards in Member States drug databases (including a possible linkage to the EU SPOR - Substance, Product, Organisation and Referential master data database) allowing the identification of locally available medicinal products which are equivalent to the one identified in a foreign prescription. ...”*

Focus for us - the EMRN - is item ii), “.. to foster the implementation of IDMP in Europe. ..”



- ▶ Applying for authorisations for medicinal products and managing their life cycles is a regulated process supported by **electronic application forms** and **supporting electronic tools**.
- ▶ At the moment neither application forms nor the tools for initial authorisations, variations and renewals are **compliant** to the IDMP standards. Thus it is currently not possible to start, automate and feed regulatory processes with IDMP compliant/structured data and easily re-use the data in EU-wide eHealth services.



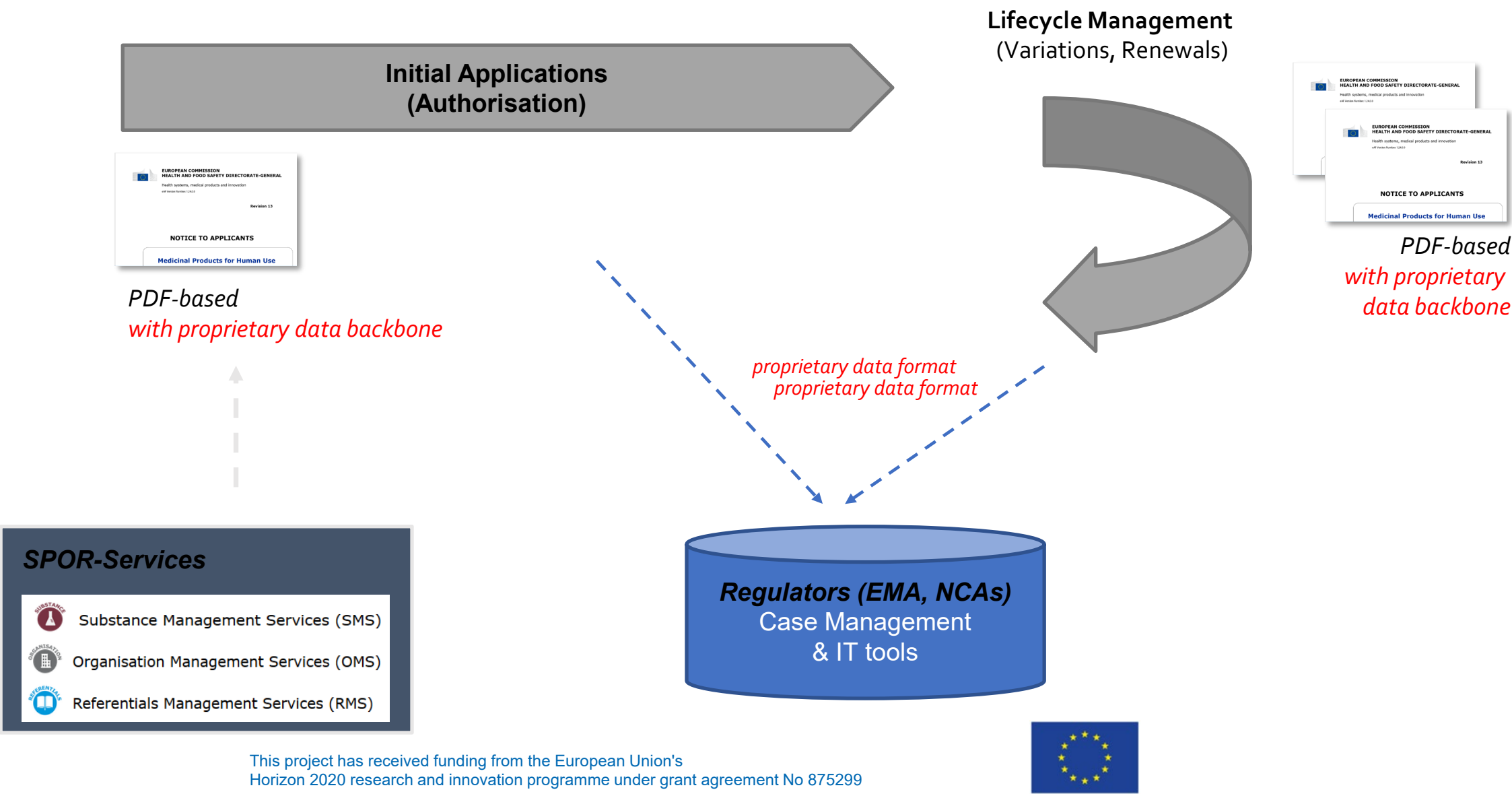
- ▶ The aim of this work package is to adapt the application forms and required tools towards the IDMP standards and to increase the usage of EMA's SPOR. It will therefore

Deliver web-based application forms compatible with IDMP standards

- Differences between the current application data format and IDMP need to be identified;
- potential content related changes on the current application data format discussed with stakeholders, especially with Notice to Application (NtA) who is the owner of the application form
- UNICOM focus is on the human domain but synergies with the veterinary domain may be realized

- ▶ ☐ procedures will be then already started with IDMP structured data!

Current situation






Initial Applications
(Authorisations)


Lifecycle Management
(Variations, Renewals)

NEW: modern web tool supporting the creation of IDMP/FHIR compatible datasets
Implemented by the EU project DADI

SPOR-Services

-  Substance Management Services (SMS)
-  Organisation Management Services (OMS)
-  Referentials Management Services (RMS)

+ NEW

 **Product Management Services (PMS)**

**NEW: IDMP/FHIR
compliant data format**

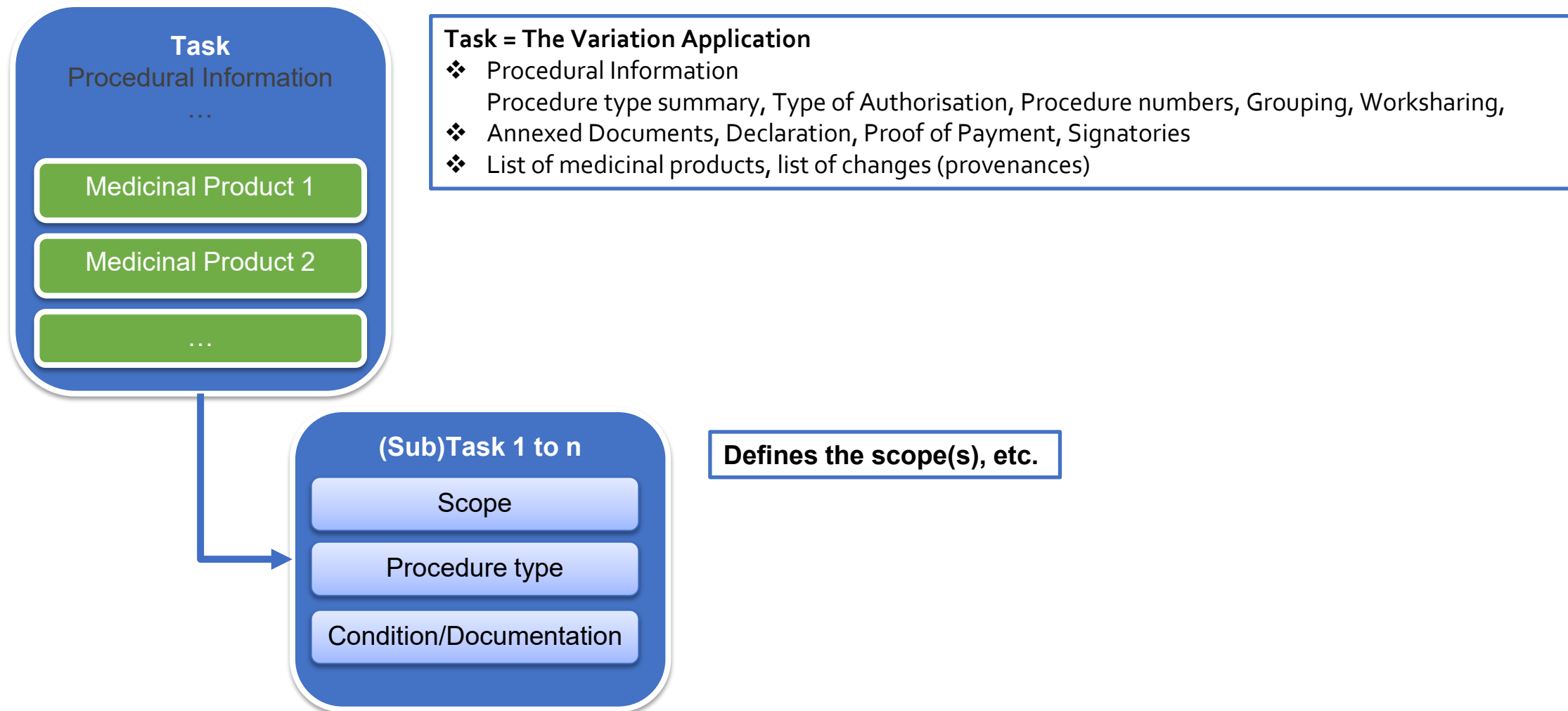
Regulators (EMA, NCAs)
Case Management
& IT tools

- ▶ A decision was made to align the technical framework to the EMA technology strategy.
- ▷ UNICOM WP3 and EMA are now working together with EMA in the “DADI” project to replace the current PDF-forms
- ▷ UNICOM WP3 contributes e.g. by acting as the product owner (joint with a second product owner from EMA)
- ▷ The new tool will be implemented in EMA’s technical platform (Microsoft PowerApps) organised and executed by EMA

FHIR Backbone

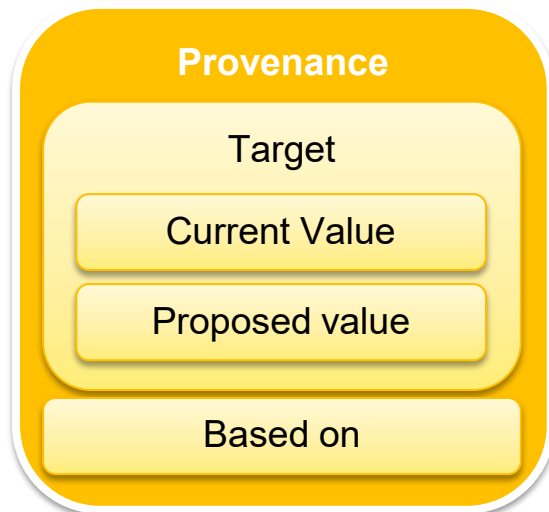


Overview: Future FHIR message structure relevant in Variation Forms 1/2



Overview: Future FHIR message structure relevant in Variation Forms 2/2

M:N □ A provenance can belong to many subtasks and vice versa



Target

- ❖ Which resources and elements are affected by the change. A list of links to the lowest point of the changed content. A link can always be followed to identify which medicinal product or packaged medicinal product is being changed.

Current Value

- ❖ Value and Type of the „old“ data

Proposed Value

- ❖ A value and type or a link to a resource and an attribute within the product area

Based on

- ❖ The link to (Sub)Task showing that a specific change can belong to many variation classifications

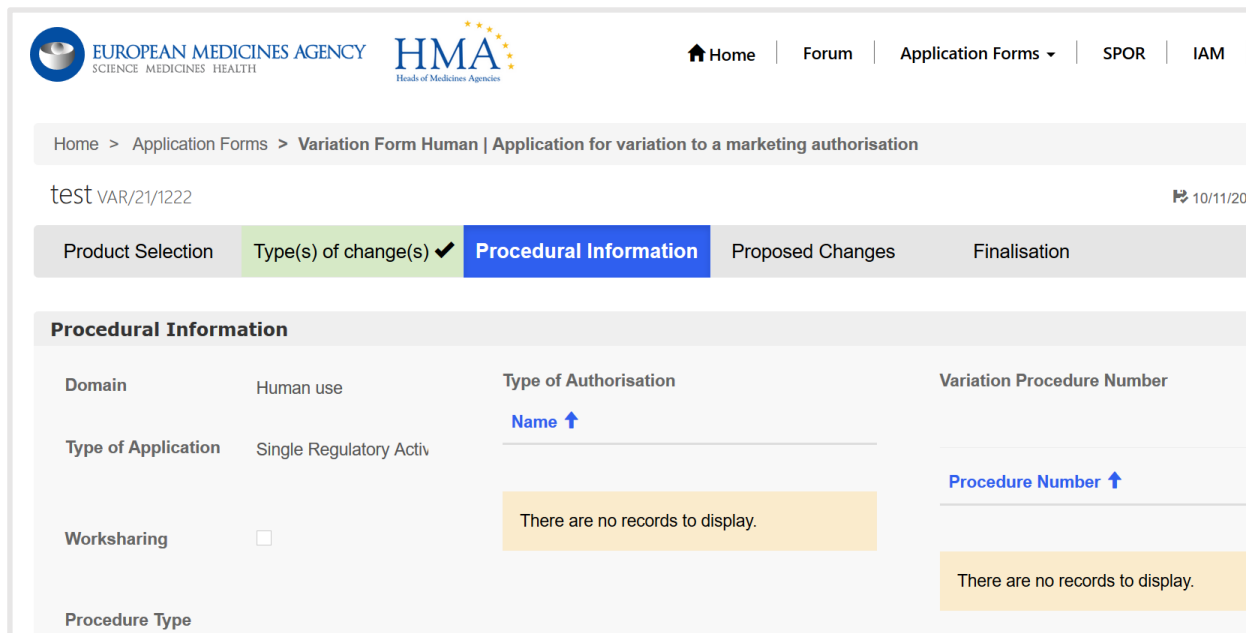
First impressions of the future UI



Overview Application Form

Example: Variation Form Human

- ▶ **Product Selection:** Select from Nickname, PMS ID, active substance(s), EU Number, EMA Number, Marketing Authorisation Holder
- ▶ **Types of changes:** Select from Variation Classification
- ▶ **Procedural Information:** Mostly calculated fields
- ▶ **Proposed Changes:** structured product changes or unstructured dossier changes
- ▶ **Additional Information:** orphan, paediatric and market exclusivity



The screenshot displays the 'Variation Form Human' application interface. At the top, the European Medicines Agency (EMA) and Heads of Medicines Agencies (HMA) logos are visible, along with navigation links for Home, Forum, Application Forms, SPOR, and IAM. The breadcrumb trail indicates the path: Home > Application Forms > Variation Form Human | Application for variation to a marketing authorisation. The form title is 'test VAR/21/1222' with a date of 10/11/2021. Below the title, there are five tabs: Product Selection, Type(s) of change(s) (checked), Procedural Information (active), Proposed Changes, and Finalisation. The 'Procedural Information' section contains a table with the following data:


Procedural Information	
Domain	Human use
Type of Application	Single Regulatory Activ
Worksharing	<input type="checkbox"/>
Procedure Type	


Below the table, there are two sections: 'Type of Authorisation' with a 'Name' field and an upward arrow, and 'Variation Procedure Number' with a 'Procedure Number' field and an upward arrow. Both sections display a message: 'There are no records to display.'



Product Selection

► Select from Nickname, PMS ID, active substance(s), EU Number, EMA Number,

 **EUROPEAN MEDICINES AGENCY**
SCIENCE MEDICINES HEALTH

 **HMA**
Heads of Medicines Agencies

Home | Forum | Application Forms ▾ | SPOR | IAM | Nina Novotny ▾

Home > Application Forms > Product Selection > Add/Edit Product Details > **View/Select Product**

Available Products | All Products


Column visibility ▾


Nickname	PMS ID	MPID/ PCID	Active substance(s)	EU Number	EMA Number	Marketing Authorisation Holder	Authorisation Country
Bondronat 6 mg/6 ml - Concentrate for solution for infusion	600000032367	370612	IBANDRONATE SODIUM HYDRATE	EU/1/96/012	EMA/H/C/000101	UAT-LOC12	European Union
Bondronat 50 mg - Film-coated tablet	600000032524	370608	IBANDRONATE SODIUM HYDRATE	EU/1/96/012	EMA/H/C/000101	UAT-LOC12	European Union
Bondronat 1 mg/1 ml - Concentrate for solution for infusion	600000033304	370593	IBANDRONATE SODIUM HYDRATE	EU/1/96/012	EMA/H/C/000101	UAT-LOC12	European Union



User Interface – Type (s) of changes

Select from Variation Classification

**EUROPEAN MEDICINES AGENCY**
SCIENCE · MEDICINES · HEALTH

**HMA**
Heads of Medicines Agencies

Home > Application Forms > Type(s) of Change(s) > **Add Scope****Add Scope****Classification Level 1**

B. QUALITY CHANGES

Classification Level 2

B.II. FINISHED PRODUCT

Classification Level 3

B.II.a) Description and composition


Classification Level 4


B.II.a.2 Change in the shape or dimensions of the pharmaceutical form

Classification Level 5

B.II.a.2.a Immediate release tablets, capsules, suppositories and pessaries



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**HMA**
Heads of Medicines Agencies

Home > Application Forms > Type(s) of Change(s) > **Add/Edit Scope****Add/Edit Scope****Selected Scope**

B.II.a.2.a Immediate release tablets, capsules, suppositories and pessaries

Select Procedure Type

Variation Type IB

Select Conditions☐ **Conditions** ↑ Note☐ If appropriate, the dissolution profile of the reformulated product is comparable to the old one. For herbal medicinal products, where dissolution testing may not be feasible, the disintegration time of the new product compared to the old one.☐ Release and end of shelf-life specifications of the product have not been changed (except for dimensions).☐ The change does not relate to a scored tablet that is intended to be divided into equal doses.☐ The qualitative or quantitative composition and mean mass remain unchanged.**Select Documentations**☐ **Documentations** ↑ Note☐ Amendment of the relevant section(s) of the dossier (presented in the EU-CTD format or NTA volume 68 format for veterinary products, as appropriate), including a detailed drawing of the current and proposed situation, and including revised product information as appropriate.☐ Samples of the finished product where applicable (see NTA, Requirements for samples in the Member States).

Export Triggers

- ▶ A product update in case there was a parallel variation
- ▶ A full data set validation
- ▶ A FHIR XML validation

Download: PDF with the FHIR XML attached

test VAR/21/1222 10/11/2021 10:55:26 AM

Export typically takes less than a minute but can take longer to complete, depending on the size of your Application. You'll get an email to notify you when the process is complete and ready to download.

Data Fetch Successful

Column visibility▼ Show 10 rows▼ Search Refresh

Modified On	Created On	Requestor	Status Reason	FHIR PDF	Validation XML	Export Message
10/11/2021 10:55:31 AM	10/11/2021 10:55:29 AM	Nina Novotny	Export Started			

Showing 1 to 1 of 1 entries



test VAR/21/1222 10/11/2021 13:03:32 PM

Export typically takes less than a minute but can take longer to complete, depending on the size of your Application. You'll get an email to notify you when the process is complete and ready to download.

Completed FHIR xml Validation Failed

Download

Column visibility▼ Show 10 rows▼ Search Refresh

Modified On	Created On	Requestor	Status Reason	FHIR PDF	Validation XML	Export Message
10/11/2021 13:03:46 PM	10/11/2021 13:03:46 PM	Nina Novotny	Active			
10/11/2021	10/11/2021	Nina Novotny	Completed			



Example output

Attached FHIR XML data backbone

Concept of subtasks not shown here

Start Werkzeuge a1e6fe4b-0a46-ec1... x

Human readable form

EUROPEAN COMMISSION
HEALTH AND CONSUMERS DIRECTORATE-GENERAL

Health systems, medical products and innovation

eAF Version Number: 1.24.0.1

February 2018

NOTICE TO APPLICANTS

**APPLICATION FOR VARIATION TO
A MARKETING AUTHORIZATION**

Lesenzeichen X

- TABLE OF CONTENTS
- 1. APPLICATION FOR VARIATION TO A MARKETING AUTHORIZATION
- 2. PRODUCTS CONCERNED BY THIS APPLICATION
- 3. TYPES OF CHANGE(S)
- 4.a Type IB and Type II variation - new indication - orphan medicinal product information
- 4.b Type IB and Type II variation - Paediatric requirements
- 4.c Type II variations - Extended data exclusivity/market protection

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Thanks for your attention! For any questions, please contact us!

georg.neuwirther@ages.at
noel.diamant@ages.at

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Thank you!

Pelle Persson, SEMPA



UNCOM

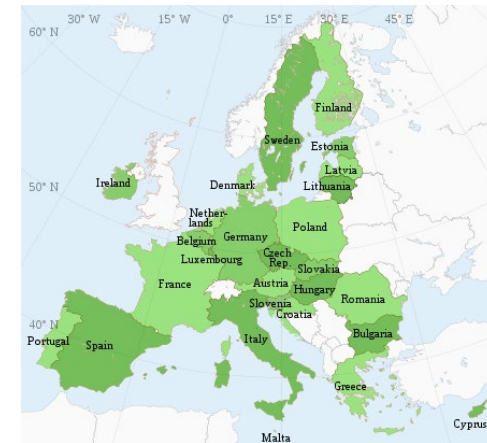


Up-scaling the global univocal identification of medicines

Transatlantic workshop 16 Nov 2021

WP4: IDMP implementation at NCAs

- ▶ **11 national implementation projects**
- ▶ Austria, Belgium, Croatia, Estonia, Finland, Germany, Ireland, Norway, Portugal, Spain, Sweden
- ▶ **Development of guidelines, training and knowledge about IDMP**
- ▶ **Adaptation of the European Communication and Tracking System (CTS)**
 - ▷ Used for tracking and co-ordinating pre- and post-licensing regulatory processes
 - ▷ for human and veterinary medicinal products
 - ▷ authorised via mutual recognition and decentralised procedures



- ▶ Each NCA will **refactor** their old systems or **build new** medicinal product databases to make them IDMP compatible
- ▶ The systems will be connected to **EMA SPOR** services where applicable
- ▶ Competence is the key
 - Knowledge provision and best practice sharing on how to implement ISO IDMP at NCA level
 - European-wide guidance on how to standardise legacy data towards IDMP



- ▶ **Progress report** on refactoring or new build of national IT systems, migration of national data, and data interfaces to EMA's SPOR from all 11 NCA's
 - ▷ Monthly status reports from NCAs – orally and in writing
 - ▷ Bi-weekly meetings in WP₄ lead
 - ▷ Monthly reports cross WPs (PEC)

- ▷ **Mapping and cleansing data (SPOR) - priority**
 - Dependency on EMA
 - Delays occur – SPOR API, EU Implementation guides, Covid-19



► Best practice sharing and lessons learnt workshops

- ▷ All 11 NCAs shared during 2020 and 2021
- ▷ Most lessons are related with the SPOR initiative organised by EMA/HMA, especially in conjunction with organisation data (OMS), substance terms (SMS), referentials (RMS).
 - ❖ Due to "moving targets" (FHIR standard versioning, interpretation of IDMP, EU IG vX) the project is more effort than expected.
 - ❖ Internal business experts' engagement is crucial for success of system development
 - ❖ Organization and responsibilities around eHealth are complex and projects in different agencies need to be in sync.
 - ❖ The ISO-IDMP standard does not specify which "**standard vocabulary**" should be used. Therefore, a database could be "ISO-IDMP compliant" but based on region wide – and not world –wide underlying terminology.



- ▶ Project SAFEST and FHIR implementation
- ▶ Best practice workshop on IDMP ingredient
- ▶ Telematics Forum on UNICOM and IDMP including a special topic on “Ingredients
- ▶ Best practice workshop on IDMP manufactured items and packaged medicinal product
- ▶ Best practice workshop on IDMP manufactured items and Pharmaceutical product
- ▶ Best practice workshop on IDMP packages

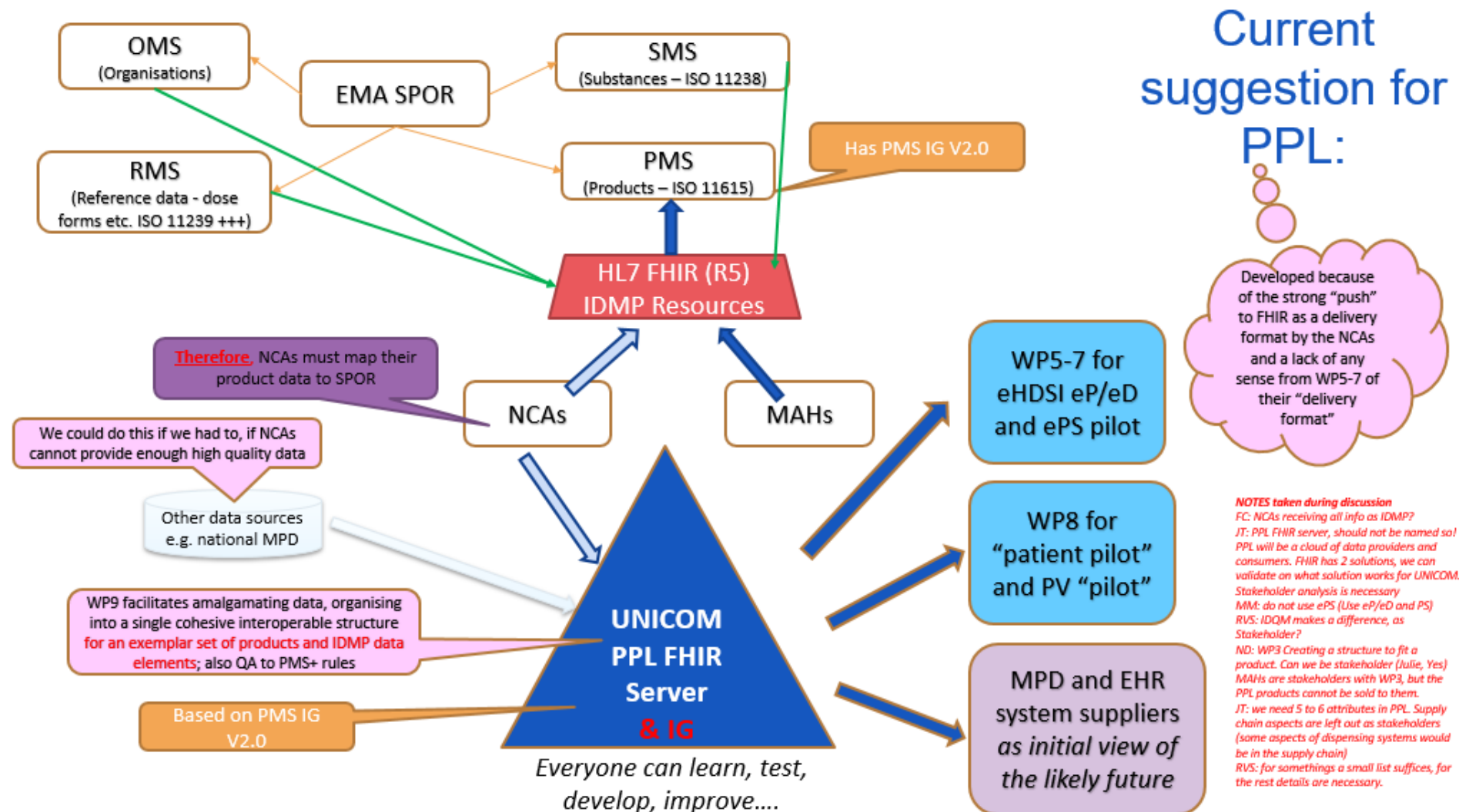


Deliverables not yet started

- ▶ Training through the Telematics Curriculum (EU NTC, training platform)
- ▶ Prototype presentation of ISO IDMP compliant datafeeds to eHealth consumers
- ▶ IDMP Gap-Analysis report on CTS (Communication and Tracking System)

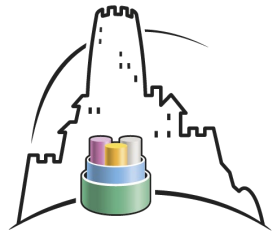


Delivery of selected ISO IDMP medicinal product data for cross-border pilots

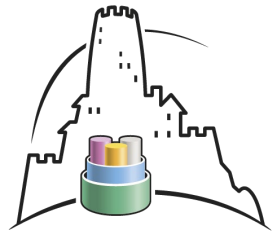


Thank you for your attention

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Open discussion



Closing remarks

CTADHL (Citadel)

www.ctadhl.com

