

EU ECOSYSTEM FOR MONITORING OF POST-LICENSURE VACCINE

BENEFIT AND RISK:

FROM ADVANCE TO VAC4EU

Meeting the requirements on quality and timeliness of evidence from heterogeneous existing health data for regulatory decision making

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Mandate of the PRAC

All aspects of the riskmanagement of the use of medicinal products including:

- detection, assessment, minimisation and communication of the risk of adverse reactions
- having due regard to the therapeutic effect of the medicinal product
- the design and evaluation of post authorisation safety studies and pharmacovigilance audit

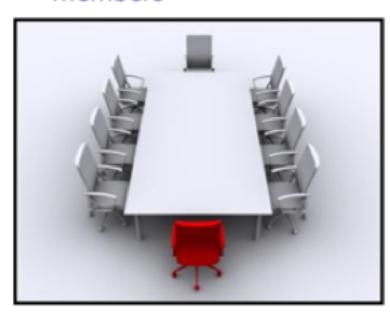
PRAC's composition



Appointed by each Member State:



- 1 member + 1 alternate
- 28 + EEA countries non voting members

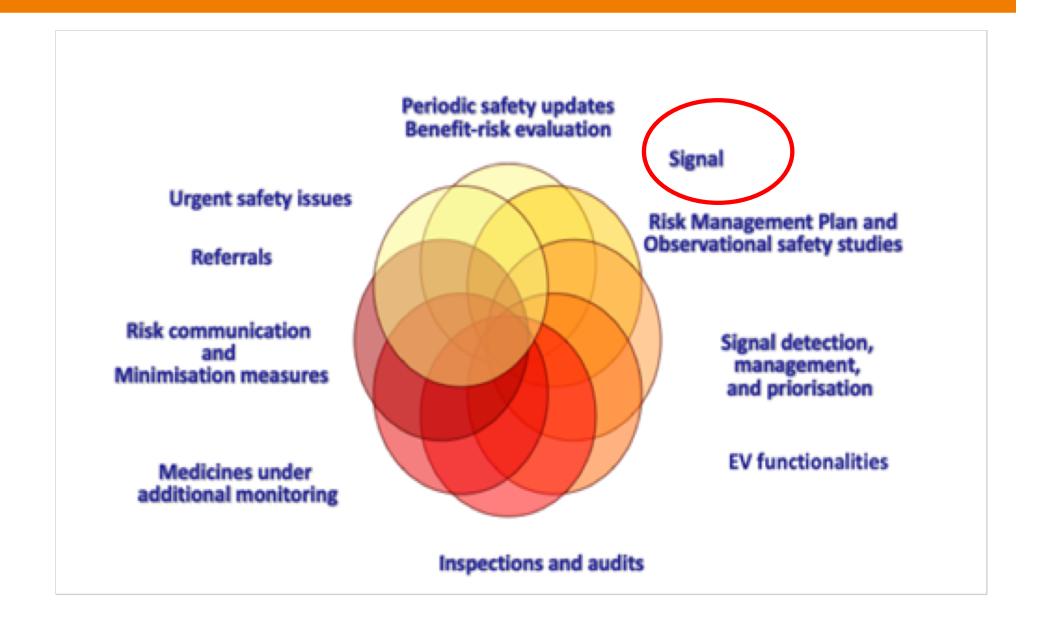


Appointed by the European Commission following a public call for expressions of interest:

- 1 patient organisations¹ rep + alternate
- <u>1 healthcare professionals¹ rep +</u> alternate
- 6 members to ensure relevant expertise available
- Criteria for involvement in EMA activities

PRAC's activities







EU signal management process: the full picture

Signal detection (EV) & validation

EMA, NCAs

MAHs

Confirmation
PRAC Rapp / Lead MS

Initial analysis & prioritisation, assessment, recommendation

PRAC (with MAH input)



Validated signal



GVP definition

"A signal where the signal <u>validation process</u> of evaluating the <u>data</u> supporting the detected signal has <u>verified</u> that the available documentation contains <u>sufficient evidence</u> demonstrating the existence of a <u>new potentially causal association</u>, or a <u>new aspect of a known association</u>, and therefore <u>justifies further analysis</u> of the signal."





[elements of signal validation]

- Clinical relevance
 - Strength of evidence
 - Seriousness and severity
 - Novelty of the reaction
 - Reaction due to possible drug-drug interaction
 - Reactions occurring in special populations



Regulatory Pharmacovigilance Prioritisation System (MHRA)

Four categories and an overall priority

- Strength of evidence for a causal effect
- Potential public health implications
- Public perceptions
- Agency obligations

Strengthening regulatory decisions



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Good quality data e.g.
      completeness
       reliability/validity
       consistency
Timeliness
Contextualize risk/concern e.g.
       background on disease/ disease epidemiology
       exposure data /vaccination rate
      baseline rates of ADRs / signal ( eg incidence in population
seriousness, natural history)
       preventibility
Trust building e.g.
       Consistency
      Transparancy
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