Implementation of the EU Clinical Trials Regulation
Update for the Federal Office of Public Health
- December 2017 -

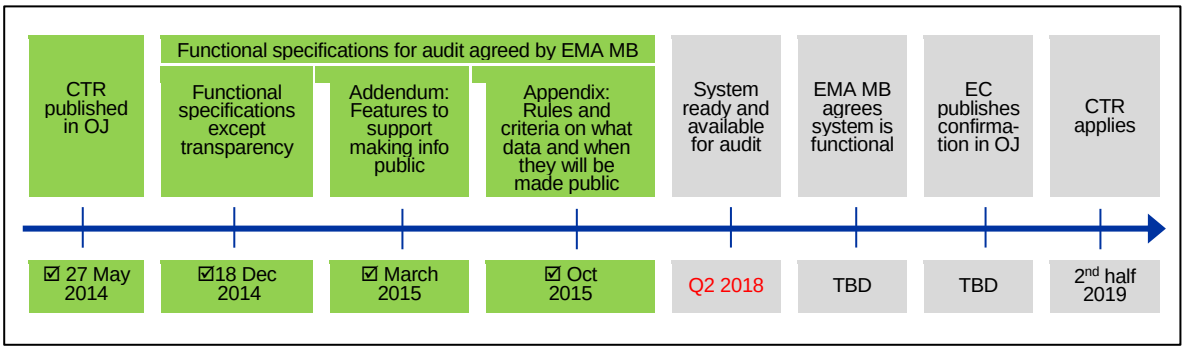
1. EU PORTAL AND EU DATABASE

1.1. EMA process and milestones

At its meetings in October and December 2017, the Management Board of the European Medicines Agency (EMA) reported that the audit of the auditable version of the EU portal is expected to take place in 2018, possibly in Q2 of that year. The auditable version will deliver the required end-to-end processes.

The EMA stated that the current draft project timelines aim for the EU portal to go live in the second half of 2019. It was also announced that information on the exact timelines will be delivered only after the completion of the audit.

Figure 1: EMA key milestones and timelines for design and development of the EU portal and the EU database



Source: EMA 2017 (CTR: Clinical Trials Regulation; OJ: Official Journal of the EU; EC: European Commission; MB: Management Board) red: updated timelines

1.2. User acceptance testing

At its meetings in October and December 2017, the Management Board of the EMA gave various updates on the state of completion and testing of the EU portal. It was reported that important progress was made in the implementation of the EU portal.

Regarding release 0.6, it was reported that delays detected in April and May 2017 resulted in a delay in its delivery. The implementation of release 0.6 required to divert efforts from release 0.7 as a consequence of this delay.

Release 0.6 is said to be the largest release delivered so far. It included all planned requirements, which represent 75% of all “must” requirements of the complete system and 76% of all “auditable must” requirements. This level of completion allows, for the first time, to conduct end-to-end business scenarios for sponsors and Member States. A public view of the clinical trials database is also possible.

In addition, a “partially completed version” of the portal was reported to have undergone a round of user acceptance testing (UAT) in November 2017. This UAT involved representatives of the European Commission, the Member States, academia, the pharmaceutical industry and Contract Research Organizations (CROs). The feedback received from the participants is being consolidated and analysed by the EMA, and the identified bugs are being addressed.

Regarding release 0.7, the EMA reported in its October 2017 Management Board meeting that the schedule for its completion was under review by the supplier and that its UAT (UAT 7) is likely to be performed at the end of Q1 2018.

1.3. Implementation in Belgium

On 22 May 2017, Belgium published a law on clinical trials with the aim of, inter alia, ensuring the practical implementation of the CTR in Belgium (see report from June 2017). On 10 November 2017, a royal decree dated 9 October 2017 was published in the Belgian Official Journal in order to implement it. In addition, this law provides details on the designation of ethics committees.

1.4. Implementation in France

The French Medicines Agency (ANSM) has previously reported on the first year (see report from February 2017) and 18 months (see report from August 2017) of its pilot project to prepare for the enforcement the CTR, which started in 2015. On 8 November 2017, the ANSM gave an update on the first 24 months of the pilot. It was reported that for a total of 260 applications received in the context of the pilot, 210 were handled, of which 193 were completed by the ANSM. Out of these 193, 127 were authorized by the ANSM and received a favorable feedback from the relevant ethics committee. These 127 applications were dealt with in an average of 68.9 days.

There has been an increase in the percentage of applications handled under the pilot. While this number represented 11% of the total number of applications for clinical trials received by the ANSM during the first six months, 12.5% during the first year and 13.3% during the first 18 months (see report from August 2017), this percentage reached 14.2% during the first 24 months.

Finally, the ANSM stated that it aims to increase the above-mentioned percentage of applications to reach 50%. If achieved, this objective is said to allow France to be fully compliant with the CTR.

1.5. Implementation in Ireland

On 14 December 2017, the Irish Health Products Regulatory Authority (HPRA) announced the launch of a pilot project for the implementation of the CTR. This pilot project was established in conjunction with the ethics committees and sponsors can participate on a voluntary basis. It will run until the application of the CTR.

The pilot aims to (1) develop processes and procedures for the joint scientific and ethical assessment of clinical trials and for the compilation of the Part I assessment report and (2) to assess the need for and implement changes to allow Ireland to be compliant with the CTR.

The HPRA published a guide that details the process for sponsors who would like to participate in the pilot project.

1.6. Relocation of the EMA

On 20 November 2017, the decision to relocate the European Medicines Agency (EMA) from London to Amsterdam was taken by the EU 27 Member States. As of December 2017, the EMA has only fifteen months to relocate its 900 staff members currently based in London. There is concern that the relocation process may result in disruption of certain EMA activities, gaps in knowledge and loss of expertise. It is yet unclear how the relocation process will affect the implementation of EU portal and database.

2. CLINICAL TRIAL SAFETY REPORTING

No update available.

3. ADOPTION OF IMPLEMENTING ACTS, DELEGATED ACTS AND GUIDELINES

No update available

4. BACKGROUND

4.1. EU Clinical Trials Regulation

In the future, clinical trials in the EU will be uniformly regulated by the EU Regulation (No 536/2014) on clinical trials with medicinal products (CTR). Under the CTR, the authorization procedure will be harmonized in the EU. According to the current Clinical Trials Directive (2001/20/EC), sponsors of a multinational clinical trial must submit separate applications to the authorities and ethics committees of each participating EU Member State, in the local language and with different application forms.

In the future, one single application per multinational trial will be submitted by the sponsor via an online portal (EU portal) run by the EMA. The CTR entered into force on 16 June 2014 and will apply as soon as the EU portal is fully functional.

4.2. Implementation of the CTR

After the CTR's entry into force on 16 June 2014, the following implementation work is envisaged:

- **EU portal and EU database:** in collaboration with the EU Member States and the European Commission, the EMA will set up and maintain an EU portal and an EU database at Union level. Furthermore, it will draw up the functional specifications for the portal and database, together with the timeframe for their implementation (Articles 80 - 82 CTR).
- **EudraVigilance database:** the EMA will set up and maintain an electronic database for safety reporting (Article 40 CTR), which would be a module of the existing EudraVigilance database.
- **Secondary legislation:** the Commission has the power to adopt implementing acts, delegated acts (Chapter XVII of the CTR) and guidelines.

5. SOURCES

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