



## Junior Clinical Trials Assessors Training: VHP Guideline

Massimiliano Sarra, Ph.D.

26.06.2019

# Public Declaration of transparency/interests\*

The view and opinions expressed are those of the individual presenter and should not be attributed to AIFA

Interests in pharmaceutical industry	NO	Current	From 0 to 3 previous years	Over 3 previous years
<i>DIRECT INTERESTS:</i>				
1.1 Employment with a company: pharmaceutical company in an executive role	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> mandatory
1.2 Employment with a company: in a lead role in the development of a medicinal product	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> mandatory
1.3 Employment with a company: other activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X optional
2. Consultancy for a company	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
3. Strategic advisory role for a company	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
4. Financial interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X optional
5. Ownership of a patent	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
<i>INDIRECT INTERESTS:</i>				
6. Principal investigator	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
7. Investigator	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
8. Grant or other funding	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
9. Family members interests	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> optional
*Massimiliano Sarra, in accordance with the Conflict of Interest Regulations approved by AIFA Board of Directors (25.03.2015) and published on the Official Journal of 15.05.2015 according to EMA policy /626261/2014 on the handling of the conflicts of interest for scientific committee members and experts.				

N.B. I am not receiving any compensation

## Before May 2004



## Directive 2001/20/EC



## Regulation (EU) 536/2014



Different **processes and requirements** for clinical trial authorisations in each Member States...

... resulted in **delays and complications** detrimental to effective conduct of clinical trials in the EU.

First step to harmonise **processes and requirements** for clinical trial authorisations.

Implementation **1 May 2004**.

**Concerns expressed** soon after its implementation.

Published on **27 May 2014**.

**Application 6 months after** confirmation published in the OJ of **full functionality of EU portal and EU database**, in any event **not earlier than 28 May 2016**.

**Transitional arrangements.**

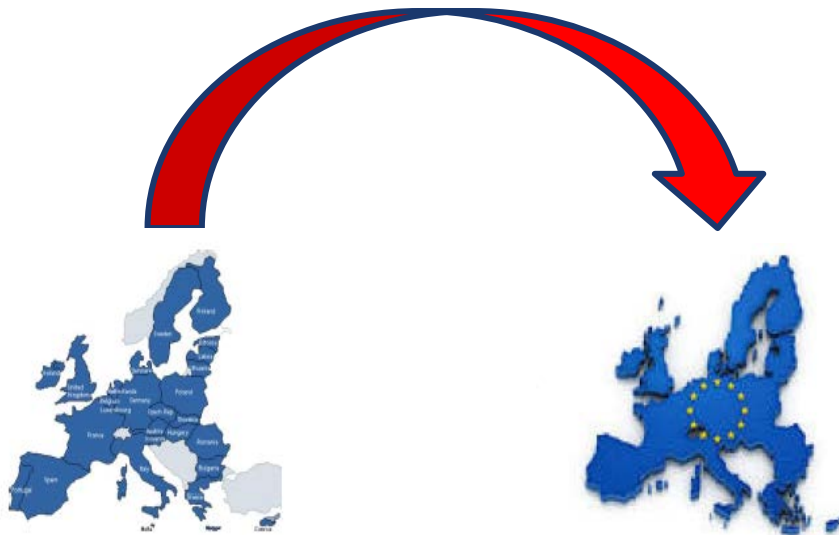
# Directive 2001/20/CE



# Regulation 536/2014/CE



## Regulation 536/2014: Key changes



2001/20/CE

536/2014/CE

- New evaluation process
- Development of a portal/database (CTIS) for submissions/communications
- New transparency roles
- Collaboration in managements of safety reports and issues

# Directive versus Regulation

Implemented in national laws



Directly applicable

"[...] experience indicates that the legal form of a Regulation would present advantages for sponsors and investigators, for example in the context of clinical trials taking place in more than one Member State, since they will be able to rely on its provisions directly, but also in the context of safety reporting and labelling of investigational medicinal products. Divergences of approach among different Member States will be therefore kept to a minimum".

Overall objective: Make EU attractive for R&D.

# The Voluntary Harmonisation Procedure (VHP)

VHP applies to all phase I-IV MN CTs involving 2 or more Member States. It allows the joint assessment of the same documentation provided by the Applicant in a specific timeline, thus leading to the harmonized conclusion on the possibility to approve or reject the CT Application in all the Member States involved.



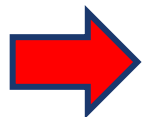


## VHP: Main Characteristics

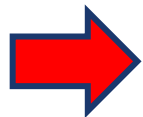
- Harmonization of the Documents (Protocol, IB, IMPD, risk/benefit) shared by the NCA through the VHP-DB
- A rigid and specific Timeline
- Nomination of a Ref-NCA that leads the assessment and collect the comments of the P-NCA
- Coordinated assessment of the CTA, thus leading to a single harmonized decision among the Member States involved

## Documents sharing procedures

An Application via VHP should be submitted by the Applicant to the VHP-Administrator (DE-PEI), which forwards the request to the NCAs of the Member States involved in the trial. The request and all notifications are circulated through specific email addresses given by the NCAs.



No communications among Sponsor and NCAs until day 0

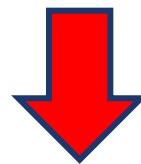


Starting from day 0 all the communications with the Sponsor are handled by the Ref-NCA.



## List of documents accepted in VHP

- General Information (Cover letter, CTA form)
- IMPD and related documents
- Investigator's Brochure
- Study Protocol
- Additional information (Scientific advices, PIP etc.)



Documents circulated by the VHP-Administrator through Eudralink and stored in the VHP-Area

## VHP: Main Characteristics

- Harmonization of the Documents (Protocol, IB, IMPD, risk/benefit) shared by the NCA through the VHP-DB
- **A rigid and specific Timeline**
- Nomination of a Ref-NCA that leads the assessment and collect the comments of the P-NCA
- Coordinated assessment of the CTA, thus leading to a single harmonized decision among the Member States involved

# Timeline



timelines for VHP			
VHP Application Date	<b>01.10.2015</b>	Date of Start VHP:	<b>08.10.2015</b>
type of deadline	due on	Day	
Confirmation of receipt to Sponsor	03.10.2015	-5	}
Date informing NCA on VHP/VHP-Dossier location in VHP area	03.10.2015	-5	
Final acknowledgement of receipt to Sponsor	08.10.2015	0	}
DAR/GNAs to be stored in VHP-area/VHP-Database by Ref.-NCA	28.10.2015	20	
Statement on ASR/GNAs by P-NCAs and additional GNA to be entered in VHP-DB	02.11.2015	25	
Date of consolidated List of GNAs by Ref-NCA in VHP-Database due by	05.11.2015	28	
Date acceptance P-NCA of consolidated list of GNA	06.11.2015	29	
TC on GNA before	07.11.2015	30	
Info of Sponsor on GNAs by	09.11.2015	32	
Response on GNA by sponsor due by	19.11.2015	42	
Assessment of response by Ref.-NCA in VHP-area / VHP-Database by	26.11.2015	49	
Response of P-NCAs on assessment by Ref.-NCA in VHP-Database by	03.12.2015	56	
Final ASR by Ref-NCA to be stored in VHP-area by	04.12.2015	57	
TC on unsolved GNA before	05.12.2015	58	
End of VHP / final info to Sponsor	07.12.2015	60	
National applications by Sponsor	27.12.2015	80	
National approvals by NCA	06.01.2016	90	

Validation and nomination  
(7 days)

Assessment phase  
(60 days)

National Approval  
(10 days)

\*NB1. Changes of the timeline occurs in case of ATMP

\*NB2. The timeline is not changing in case of SW but a streamline approach is encouraged

## VHP: Main Characteristics

- Harmonization of the Documents (Protocol, IB, IMPD, risk/benefit) shared by the NCA through the VHP-DB
- A rigid and specific Timeline
- **Nomination of a Ref-NCA that leads the assessment and collect the comments of the P-NCA**
- Coordinated assessment of the CTA, thus leading to a single harmonized decision among the Member States involved

## Single discussion involving all the NCAs concerned

- The technical / scientific evaluation is carried out by an NCA (Reference-NCA) involved in the clinical trial application which will deal with drawing up a document (Assessment Report) made available for all the other NCAs (Participant-NCAs).
- This assessment usually includes a list of “objections” which if not resolved by the Applicant preclude the authorization of the study (Grounds for Non Acceptance - GNA).
- The other P-NCAs participate in the technical/scientific discussion by providing their comments on the Ref-NCA and adding GNAs (if any).
- The final list of GNAs is provided by the Ref-NCA who takes into consideration all the comments received and operates to harmonize the feedback received by all the NCAs involved.

## VHP: Main Characteristics

- Harmonization of the Documents (Protocol, IB, IMPD, risk/benefit) shared by the NCA through the VHP-DB
- A rigid and specific Timeline
- Nomination of a Ref-NCA that leads the assessment and collect the comments of the P-NCA
- Coordinated assessment of the CTA, thus leading to a single harmonized decision among the Member States involved



## Single decision applicable nationally in all the MS involved

- The outcome of a VHP can be the following:
- *VHP approvable*
- *VHP approvable with conditions*
- *VHP to be rejected*

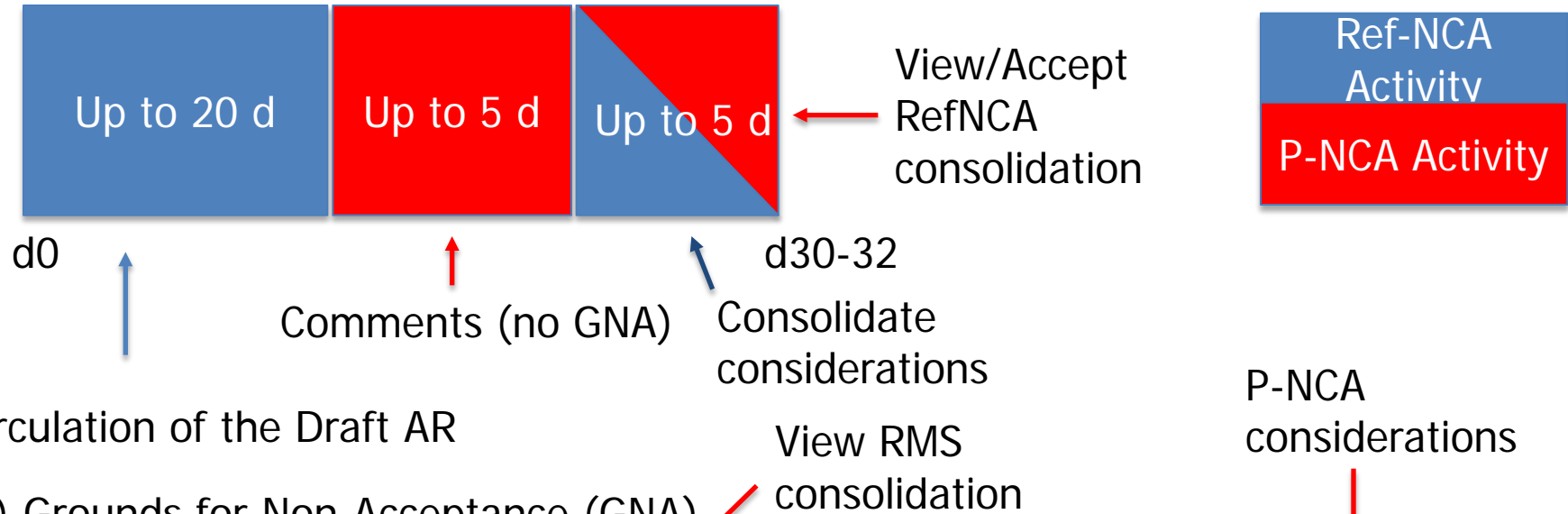


N.B. In case of a positive decision a fast-track national authorization will follow

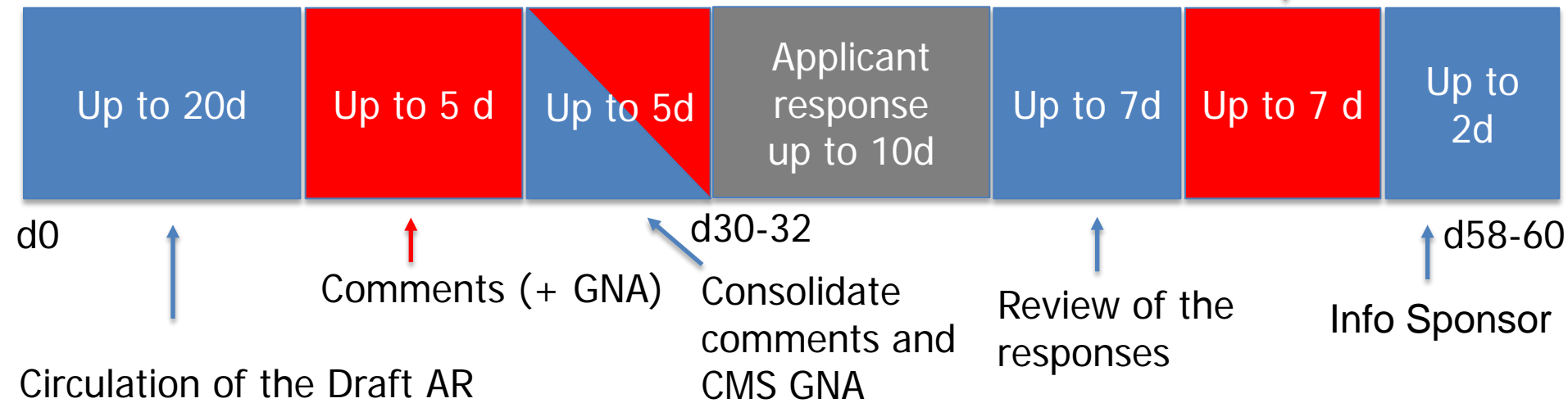
# Schematic overview of timelines and workflow for an Clinical trial application submitted via VHP



(A) NO Grounds for Non-Acceptance (GNA)

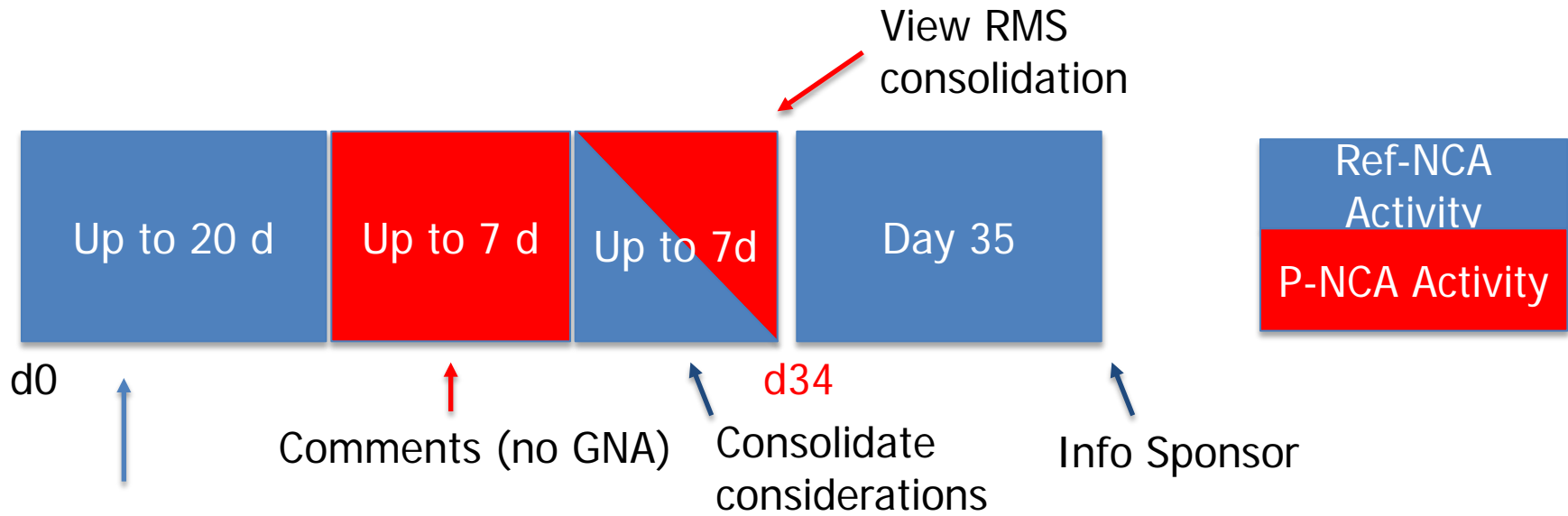


(B) Grounds for Non-Acceptance (GNA)



# Schematic overview of timelines and workflow for a Substantial Amendment application submitted via VHP





N.B. No possibility to raise GNAs in VHP SA

## Grounds for non Acceptance

- Issues that if not solved by the Applicant before the VHP conclusion will lead to a negative opinion.
- No possibility to raise question to have information nice to know/have.
- The GNA should lead to a request of document modification or a request of a rationale/justification on specific issues.

# Outcome of the assessment

The feedback of the P-NCAs is always given to the decision of the Ref-NCA



Positive: The ref-NCA decision is agreed by the other P-NCAs



Negative: The ref-NCA decision is not agreed by one or more P-NCAs

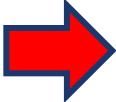
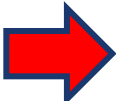
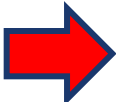


The VHP is closed



Divergent decision

## Outcome of a VHP

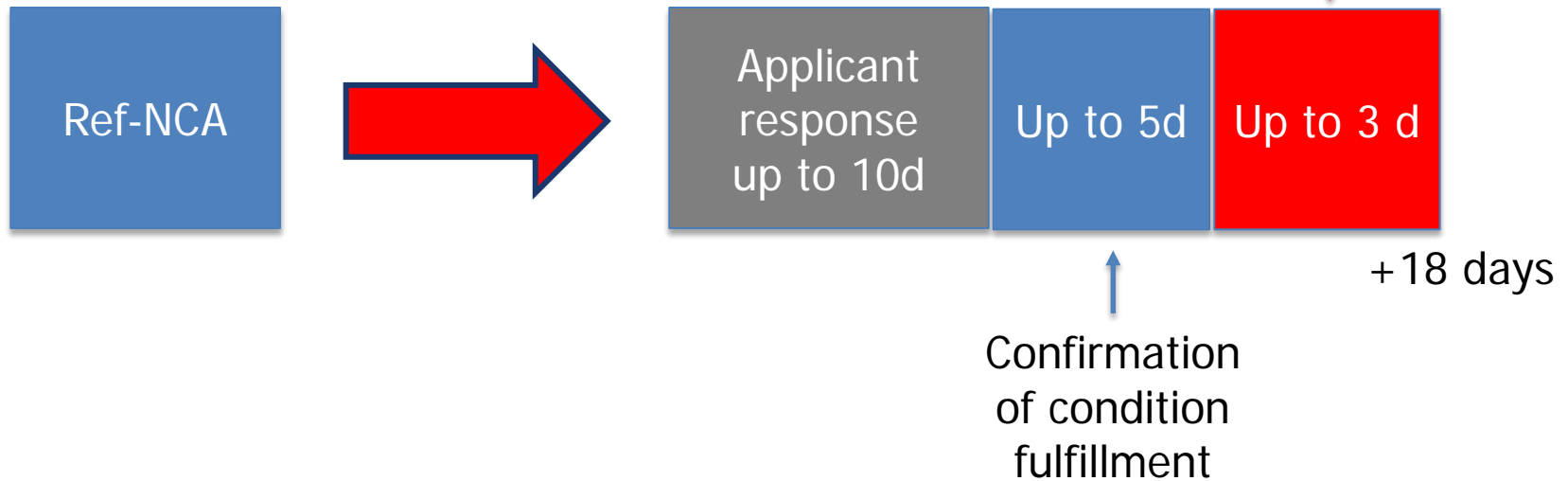
- VHP approvable  The VHP received a positive feedback and the Sponsor can submit the CTA nationally in the MS involved
- VHP approvable with conditions  The VHP can receive the positive opinion only after the fulfillment of a specific condition. The national submission can be done only after the conclusion of the VHP
- VHP to be Rejected  The VHP received a negative opinion and the study cannot be submitted nationally. A resubmission in VHP is usually encouraged.



# VHP Conditional Approval

The Ref-NCA inform  
the Sponsor and  
transfer the text of  
the condition

P-NCA acceptance  
/ non-acceptance



## Definition of Condition in VHP

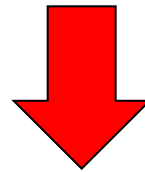
*“In case of conditional approval the conditions of the NCAs should be clear and the change request should be self-explaining. This means that the changed documents should not require a scientific assessment again, but only the check if the condition is fulfilled. If a condition is not clear, clarification shall be provided by the Ref-NCA”*



- Request of additional data/information
- Request of clarification/justification/rationale
- Request to amend the document at the next regulatory opportunity

## Divergent Decision

If no harmonized position are reached, the outcome of the VHP may be different between the various NCAs involved in the experimentation



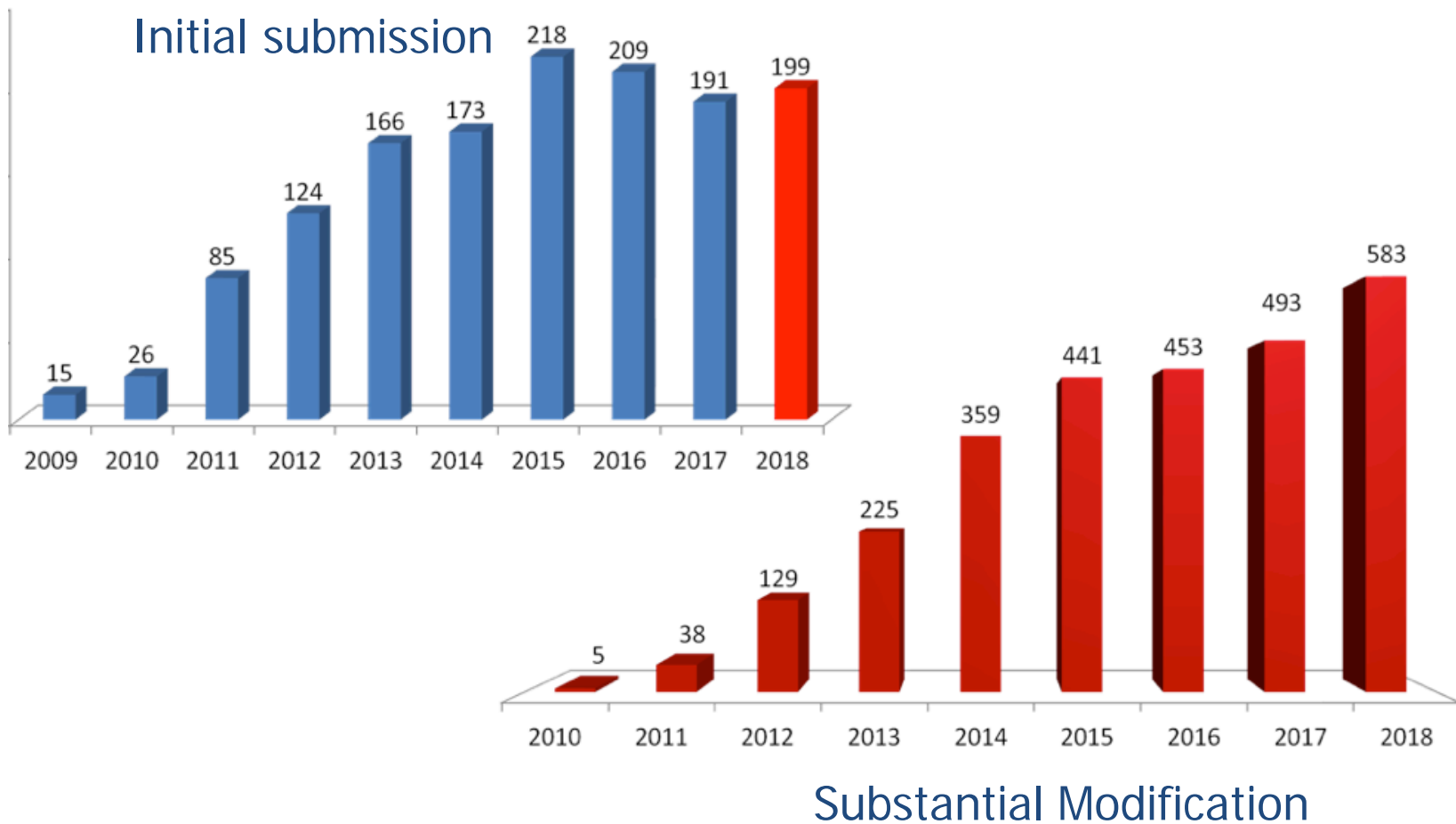
**Different position among the MS**



**Differences of the documents**

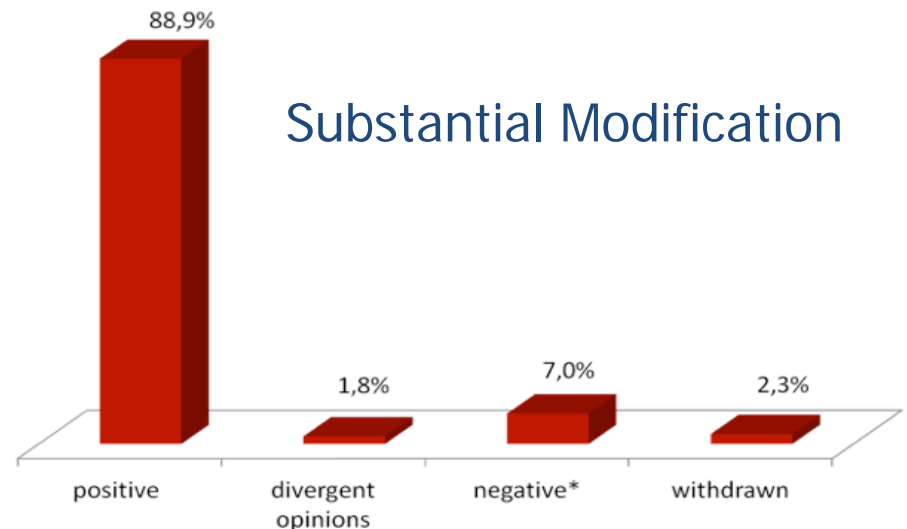
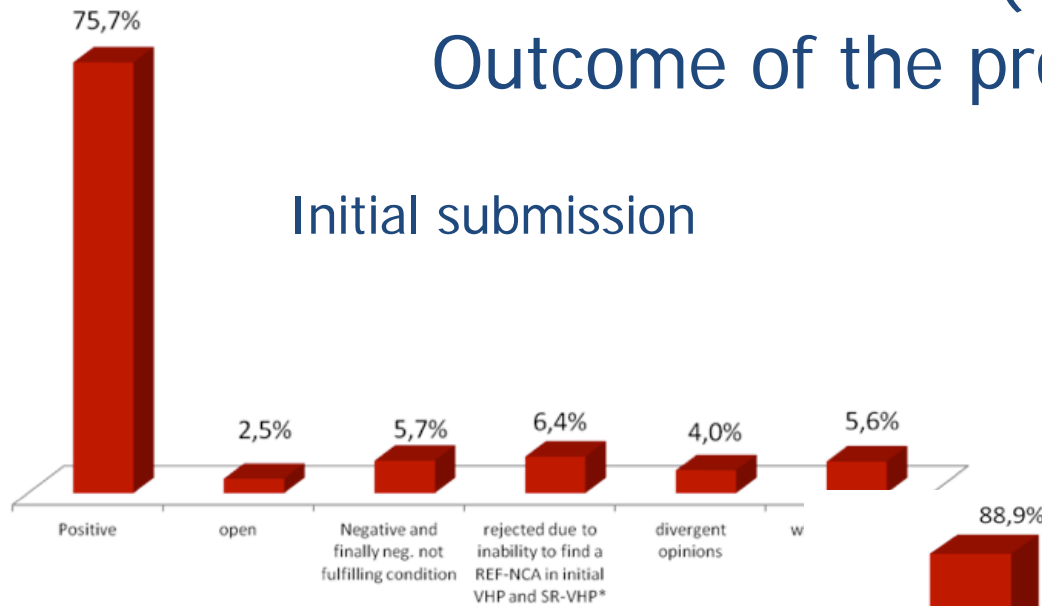
# Results of the VHP (2009-2018)

## Nr. of VHP per year

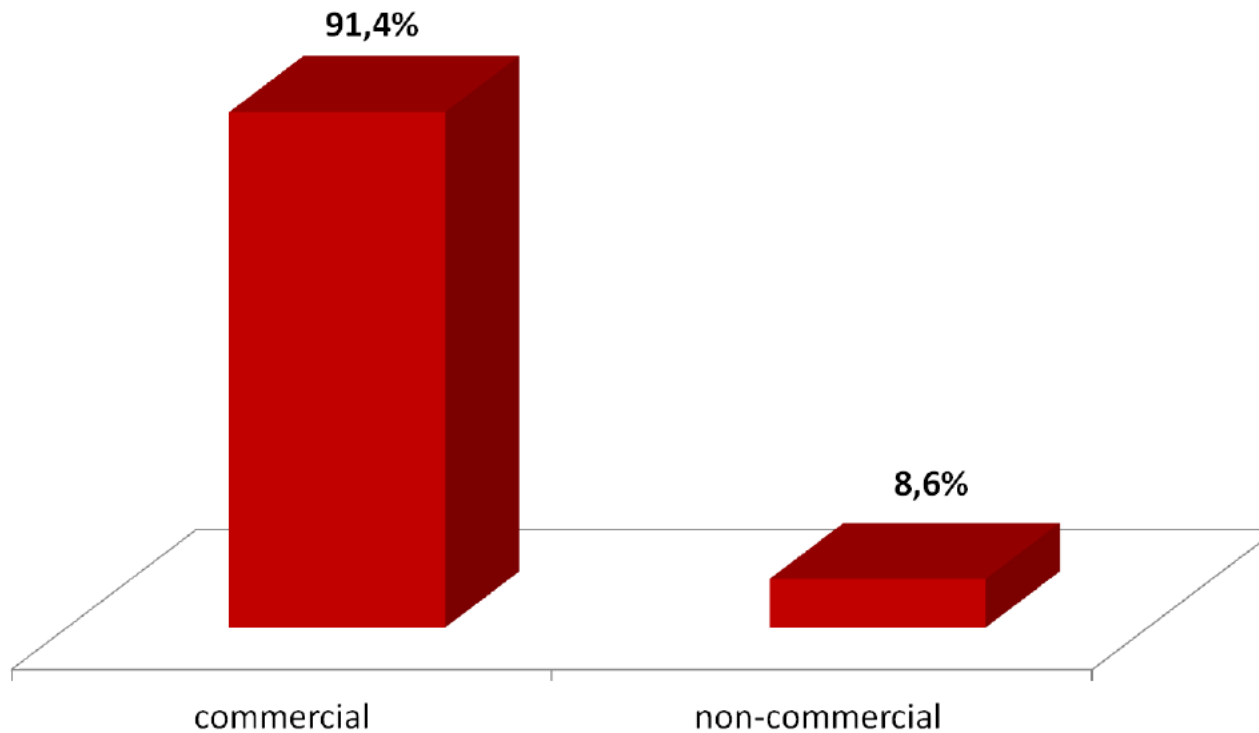


# Results of the VHP (2009-2018)

## Outcome of the procedures



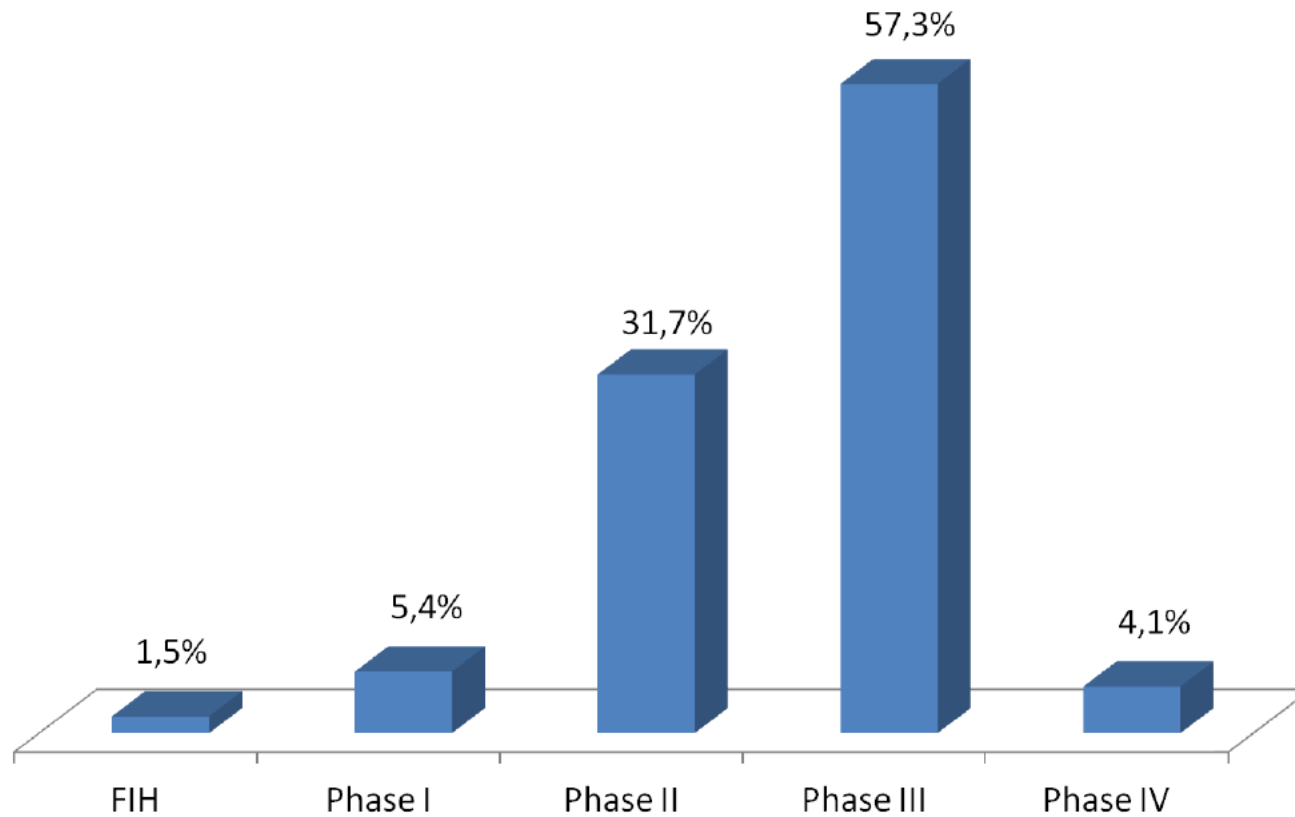
## Distribution of commercial / non-com. Sponsors in VHP



## Distribution of IMPs

Group IMP	Percentage
Chemicals	51,0
Biologicals	49,0

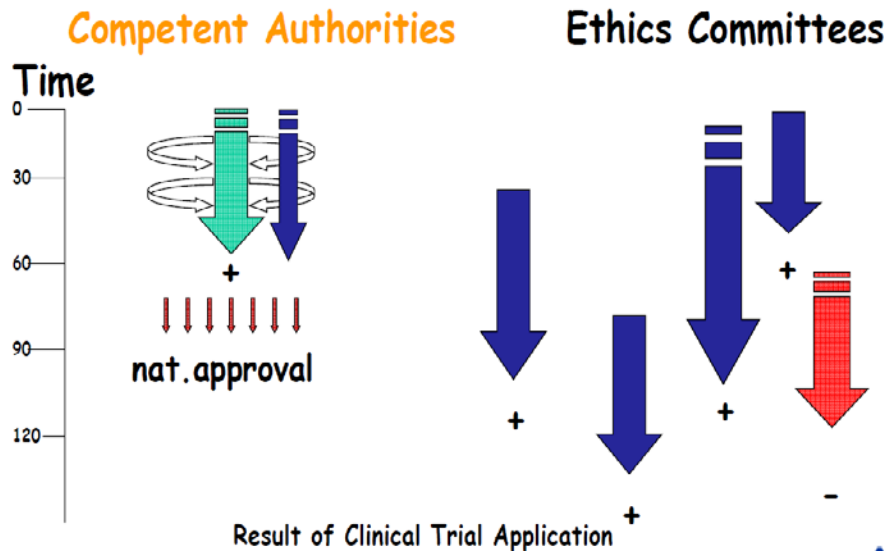
# Distribution of VHPs by phase of the clinical trial





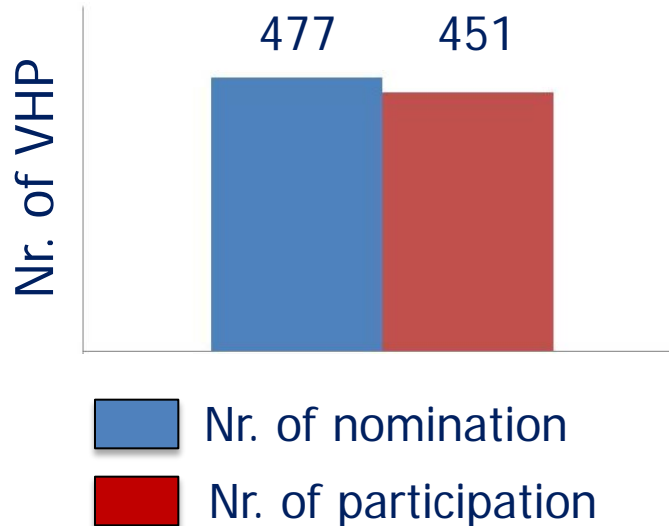
# Involvement of Ethics committees in VHP: VHP Plus

## EU Voluntary Harmonisation Procedure (VHP) for multinational Clinical Trials

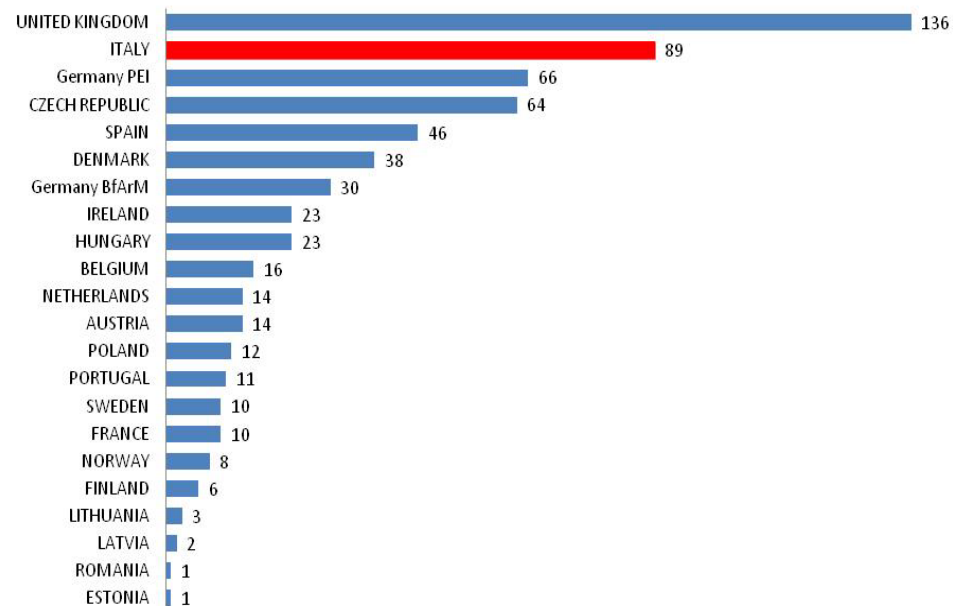


VHP-plus is a VHP involving Ethics Committees in the assessment of benefit/risk, IB and protocol in some Member States

# Involvement of Italy in VHP procedures (Cumulative data 2015-2018)



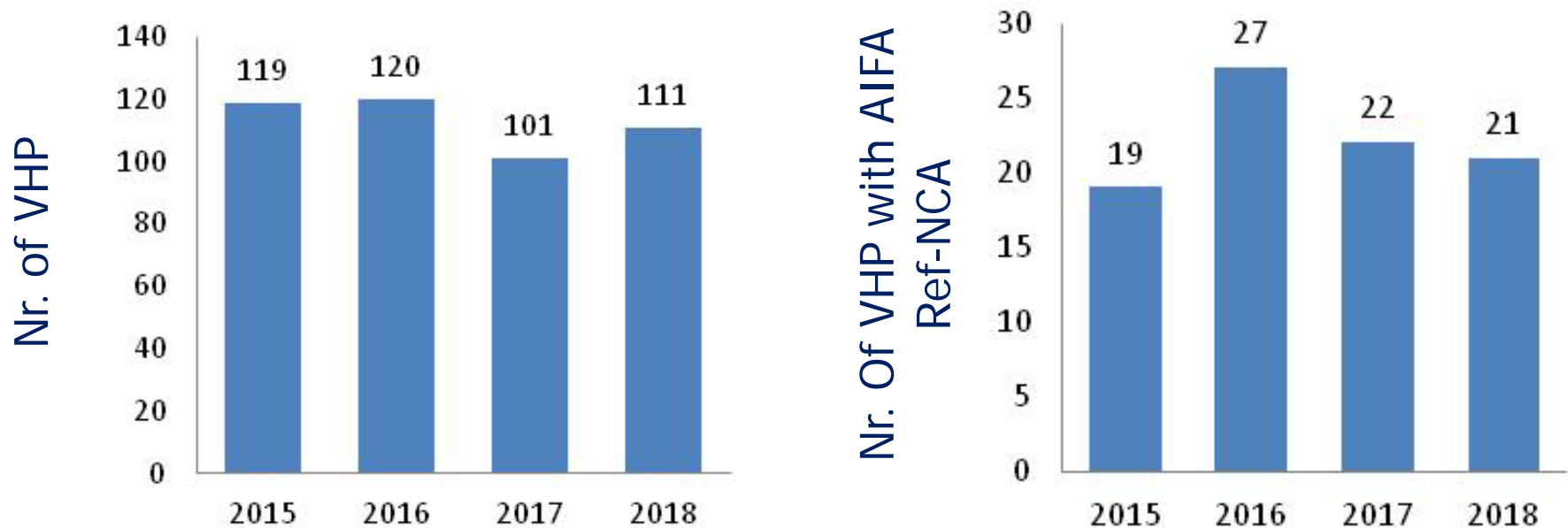
## Nr. di VHP as Ref-NCA



Source: HMA website

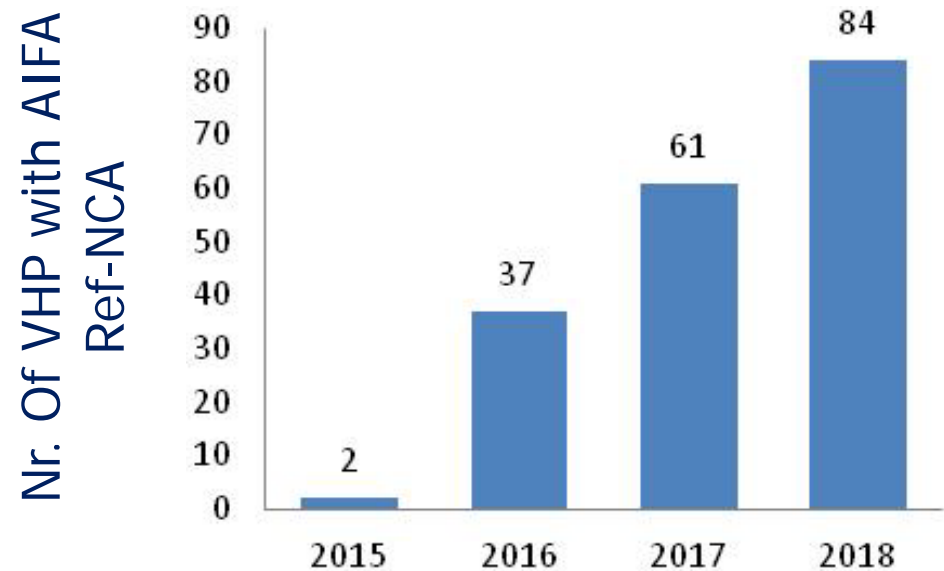
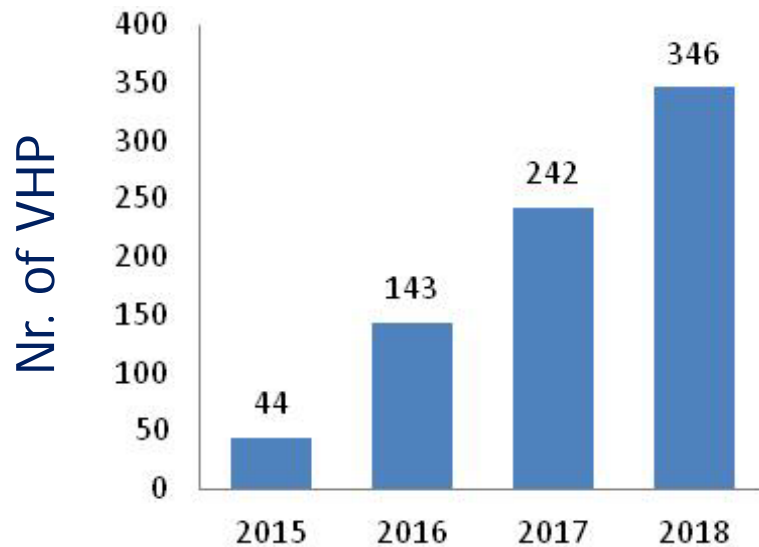
# Involvement of Italy in VHP procedures (01.2015-09.2018)

## Initial submissions involving Italy



# Involvement of Italy in VHP procedures (01.2015-09.2018)

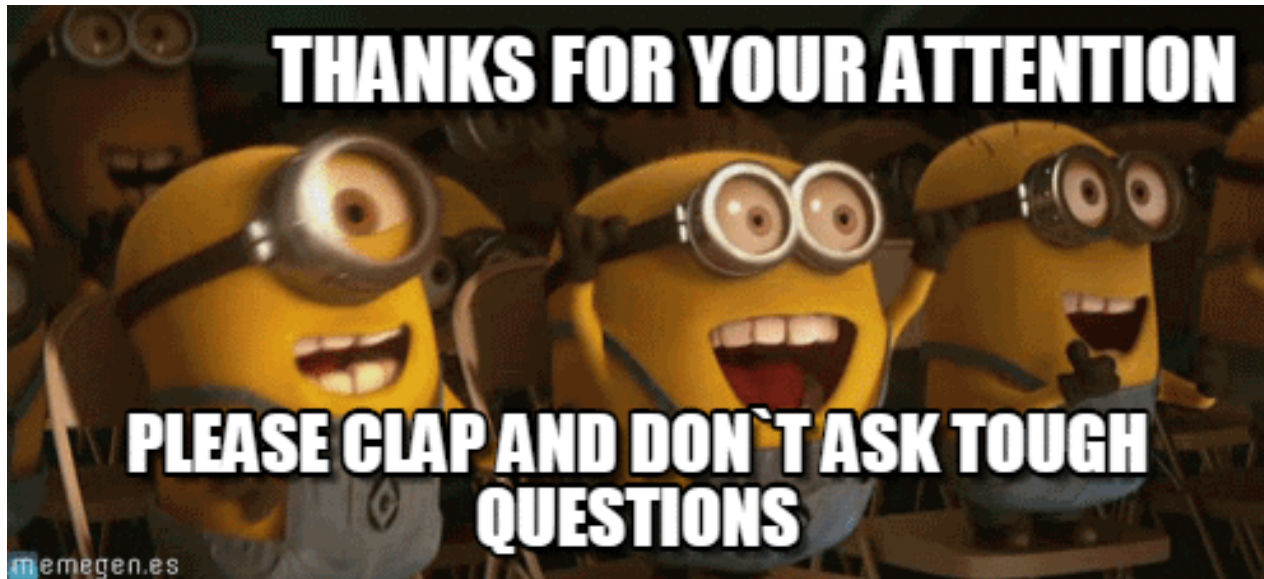
## Substantial Amendments involving Italy



## Conclusions: looking forward at the implementation of the new regulation

- Harmonization of the decisions with a very small percentage of divergences.
- Harmonization of the documents.
- Clear and defined timeline for providing a final decision.
- Streamline approach to the assessment.





Massimiliano Sarra, PhD  
Pre-authorization Dept.  
Italian Medicine Agency (AIFA)  
m.sarra@aifa.gov.it  
Tel. +39 06.59784075

[www.aifa.gov.it](http://www.aifa.gov.it)

