



# Good Clinical Practice, Investigational Medicinal Product Trials

Update on Clinical Trials Regulation EU No 536/2014

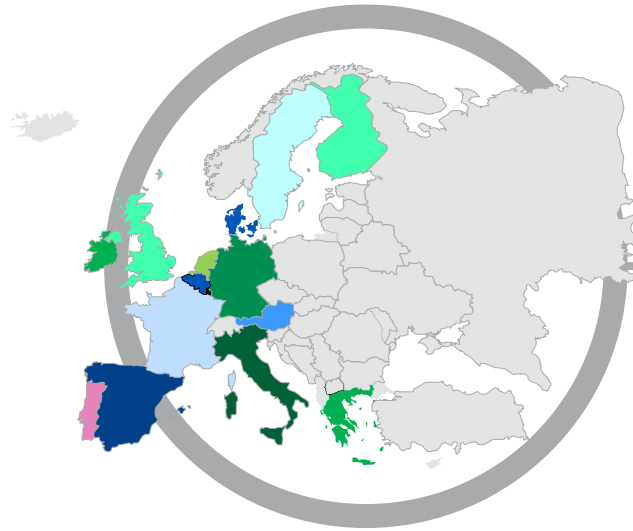
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**Dr. Agnieszka Przybyszewska**

Dublin, 23 Oct 2018

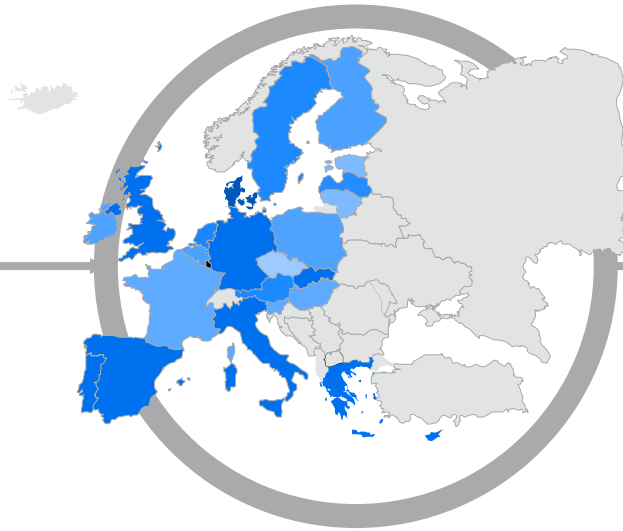


**Before May 2004**



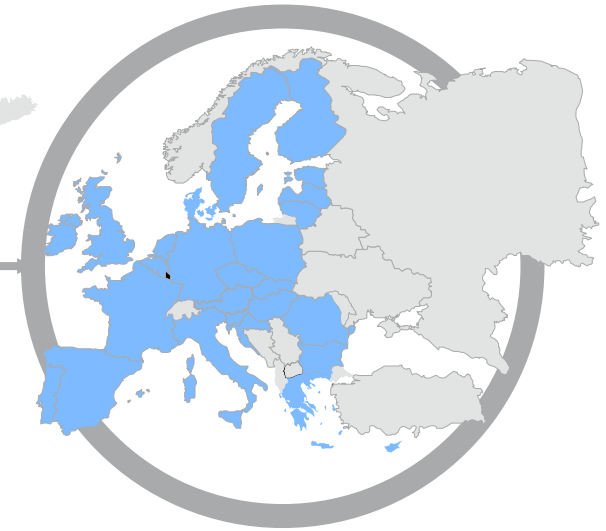
**Different processes  
and requirements**

**Directive 2001/20/EC**



**First step to harmonize**


**Regulation 536/2014**



**Published in 2014**



## Objective of the Regulation

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- To protect the rights, safety, dignity and well-being of subjects and the reliability and robustness of data generated in the CT
  - To foster innovation and simplify the clinical trial application process
  - To increase transparency, keeping the balance between protection of public health and fostering innovation capacity of European medical research while recognising the legitimate economic interests of sponsors



# Let's review main differences between Directive and Regulation

Directive 2001/20/EC

## Submission

Multiple submissions for one trial/no harmonized dossier

## Assessment

Individual assessment by each MSC with no IT collaboration tool available

NCA and Ethics committees independent assessment

## Transparency

Limited EudraCT data availability to the public: structured data from the application (CTA) and summary of results

Regulation 536/2014

## Submission

Single e-submission to all MSCs/harmonized dossier for one trial

## Assessment

Joint assessment for Part I facilitated by collaboration tools

## Transparency

Increased transparency

Single MSC decision

# Implementation of the **Regulation** depends on the development of EU portal and database



Application 6 months after confirmation published in the OJ of full functionality of EU portal and EU database.

The system could be ready to go live later in 2020.



## National implementation of the Regulation

- Regulations have binding legal force
- Specific national legislation still required as the Regulation defers to national legislation for detailed requirements:

Role and composition of ethics committee	Informed consent: for who can take consent, who can provide consent	Incapacitated subjects: more stringent rules in national legislation
Legal Representative: MS can opt out and request a contact person only	Insurance/indemnity arrangements	Inclusion of prisoners, care home residents, military personnel
Investigator must be a medical doctor: unless national law specify	MS lay down penalties	Medical files archived as per national legislation





# Implementation in Ireland

**Clinical Trials  
Regulation (EU)  
No. 536/2014  
Pilot Project**

**DoH: Plans to  
reform the  
current Research  
Ethics  
Committee  
structure for  
CTIMPs**

**DoH: Consultation  
on draft legislation  
before the end of  
the year.**



## Clinical Trials Regulation (EU) No. 536/2014 Pilot Project

Joint assessment  
Part I  
HPRA, ethics committee

Voluntary for  
Sponsors

HPRA  
"submission portal"

**4 clinical  
trials**

Guide to Clinical Trials Regulation (EU) No. 536/2014 Pilot Project - Ireland



*The sponsor of a clinical trial and the investigator shall ensure that the clinical trial is conducted in accordance with the protocol and with the principles of good clinical practice*



Article 47, Regulation 536/2014



# GCP related changes in the Regulation





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**Other  
GCP  
related  
changes**

Mandatory reporting of serious breaches

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Content of the trial protocol is defined by Annex  
I of the Regulation

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Publication of inspection reports

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## **Transparency- Balancing between public interest and sponsor's economic interest**

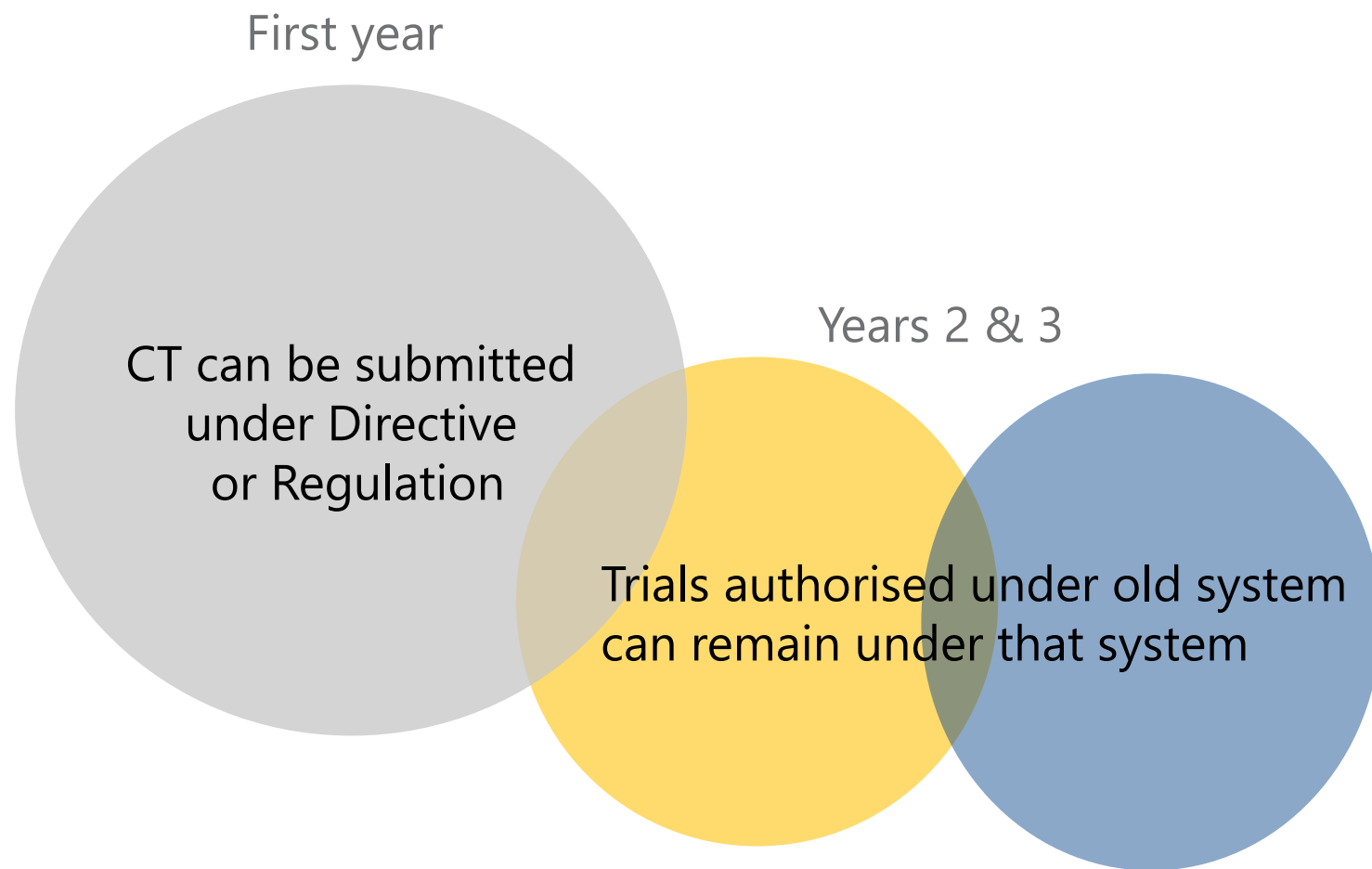
Introduction of trial categories

Depending on the category of trial the sponsor can defer publication of certain data and documents up to a maximum time limit



Appendix, on disclosure rules,  
to the "Functional specifications for the EU portal and EU database to be audited - EMA/42176/2014

# Transition period



All CTs to switch to new Regulation 3 years after implementation. Voluntary earlier transition possible



# Thank you

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