4 December 2012
EMA/234449/2012
Human Unit

Best practice guidance on the common principle for collaboration between CMDh/RMS and EMA on generics and hybrids

1. Introduction

The current legislation allows generic and hybrid applications to follow the centralised (CP) or the decentralised (DCP) or mutual recognition procedure (MRP). Applications referring to more complex medicinal products (e.g. complex pharmaceutical forms such as modified release, patches, inhalers, locally applied medicines, narrow therapeutic index drugs, low bioavailability, and complex molecules) may need preliminary discussions to ensure a consistent approach to the assessment and data requirements. The monthly CMDh meeting may be used as a discussion forum in this respect.

The same dossier can be submitted through different regulatory routes at the same time, introducing the potential risk of a disharmonised assessment outcome. In this context the EMA and CMDh recognise the need to set up a system in order to identify and track identical or similar applications (e.g. same Active Substance Master File (ASMF), same module 3.2.S or/and 3.2.P, same bioequivalence or other clinical studies) submitted through the different EU procedures.

In addition dossiers concerning the same active substance might be considered equally important in the context of exchanging information in case of specific active substance or specific formulation issues.

2. Scope

The purpose of this document is to give guidance on exchange of information between EMA, CMDh and Member States (MS) in an efficient manner, in order to facilitate the identification of identical or similar generic and hybrid dossiers, and to ensure a consistent approach in their assessment.

The following information has been identified to be relevant in the identification of identical or similar dossiers:

- Manufacturer(s) of drug substance (if applicable CEP (Certificates of Suitability) and/or ASMF holder and sites of production)
- Manufacturer(s) of finished products
- CRO (contract research organisation)/site of bioequivalence/clinical study (full address)
- Bioequivalence/clinical study protocol number/sponsor name

7 Westferry Circus ● Canary Wharf ● London E14 4HB ● United Kingdom
Telephone +44 (0)20 7418 8400 **Facsimile** +44 (0)20 7418 8595
E-mail info@ema.europa.eu **Website** www.ema.europa.eu
An agency of the European Union

3. New applications

3.1. EMA actions

Once a month, the EMA provides CMDh members (via the CMDh secretariat) with a list of centralised generics and hybrid procedures finalised and ongoing with the information included under section 2. (Scope) in order for Member States to identify identical /similar applications. Products in this list for which the reference product is nationally authorised are highlighted. The list is included in the monthly CMDh meeting documents.

EMA should also take the initiative to provide information on specific issues concerning generic and hybrid applications which might be relevant for products submitted via the decentralised or mutual recognition procedure (e.g. guideline interpretation, Product Information harmonisation, Risk Management Plan issues, Periodic Safety Update Report (PSUR), etc).

3.2. RMS actions

Each CMDh member will circulate this information in his/her National Competent Authorities to the relevant Product Managers and Assessors, according to their internal policies and/or SOPs. MS will inform the EMA Product Team Leader (PTL) (see the monthly list of centralised generic applications) in case identical/similar applications are identified.

MS should also take the initiative to provide information on specific issues concerning generic and hybrid applications which might be relevant for products submitted via the centralised procedure (see examples under EMA actions). MS should provide this information through the CMDh.

3.3. EMA and MS actions

If identical or similar generic applications are identified, EMA and the National Competent Authorities will exchange relevant information and assessment reports in order to avoid inconsistencies in the assessment of the concerned applications and to agree on a common interpretation of data. If feasible, information may also be exchanged in case of specific active substance or specific formulation issues, even if the dossiers under consideration are different.

Procedure:

- Reference Member States (RMS) to inform EMA PTL that a similar or identical dossier has been identified or where a specific active substance or formulation issue arises (see examples under EMA actions);
- MS retrieves the relevant Centralised Assessment Reports (ARs) from the relevant distribution lists or an email to EMA PTL can be sent requesting this information;
- EMA PTL retrieves the relevant ARs (DCP & MRP) from the relevant database or an email can be sent to the RMS contact point or CMDh representative;
- If identical dossiers are identified before any circulation of ARs, exchange of views between Rapporteurs might be considered during the evaluation, if necessary, and a Peer review teleconference may be organised by the EMA PTL

At any time during the on-going procedure Rapporteur(s) and RMS(s) involved should liaise, if necessary, (e.g. by means of teleconference organised by EMA PTL) in order to ensure, if possible, a

harmonised approach to minimise possible major inconsistencies with identical/similar generic and hybrid applications or with a specific active substance or formulation issue.

In addition EMA (PTL) and CMDh secretariat/RMS will communicate to each other any issues of particular interest discussed at the CHMP or RMS level in relation to specific applications or more general issues related to generics and hybrids.

4. Post-authorisation applications

4.1. Generics approved nationally where the reference product is centrally authorised

In order to inform MS on new safety changes in the Summary of Product Characteristics (SmPC) for the centrally authorised reference product, the EMA PTL will inform MS through the CMDh secretariat.

Once a safety variation for the reference medicinal product has received a positive opinion from CHMP, the EMA PTL circulates to the MS (via the CMDh secretariat) the following documents:

- Copy of the outcome fax sent to the centrally authorised generics MAHs requesting them to submit a variation within 2 months.
- The updated Product Information (changes highlighted)

4.2. Reference product approved nationally where there are generic(s)/hybrid(s) authorised via the Centralised Procedure

In order to inform EMA about agreed safety changes in the SmPC of the national reference product, the EMA PTL should inform the RMS through the CMDh of the existence of generics/hybrids referring to a nationally authorised reference medicinal product.

Once a safety variation has been approved by the national competent authority/RMS for the reference medicinal product, the contact person in the national competent authority/RMS circulates to the EMA PTL with copy to the CMDh secretariat the following documents:

- RMS finalisation Letter
- The updated Product Information (changes highlighted)