

C B G

M E B



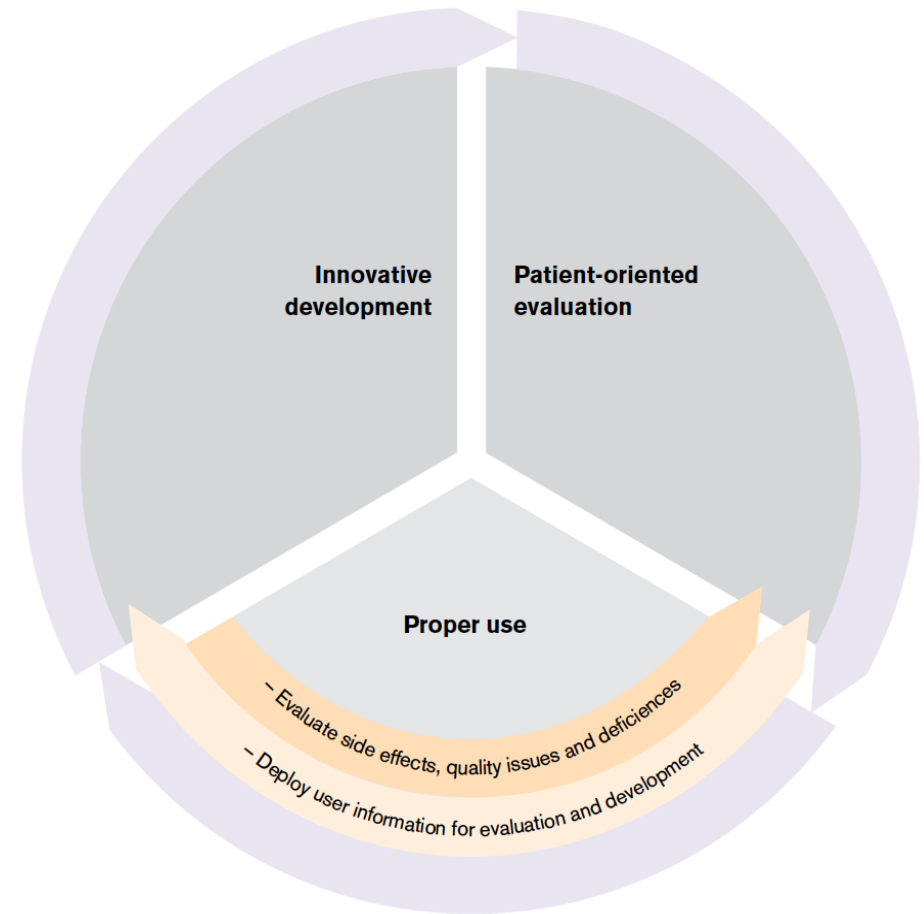
Patient involvement at the MEB

Violeta Stoyanova, MD, PhD, MPH
COMP member NL


EURORDIS summer school 2016
Barcelona

Strategic Business Plan of MEB 2014-2018

- Focus on the entire **life cycle** of a medicinal product
- **Patient** is most important stakeholder
- Aim: Receive input from patients to strengthen the connection to the user's practice
- Transparency on how MEB operates and create support for regulatory decisions



- Since 2004 “Overleg CBG patiënt en consument”
 - 3-4 times per year
 - Minutes published on the MEB website
 - Different subjects discussed: clinical guidelines, issues with product information (braille, readability text), regulatory developments (e.g. PRAC), clarification of regulatory decisions, general subjects (e.g. communication)

- Theme-meetings: biosimilars, information provision
- Goal: Inform  Inform and consult
- Questions from (individual) patients
- A list of patient organisations:
 - to inform on decisions,
 - request for input on decisions/questions
 - (e.g. Thyrax, medicinal products for ADHD, in case of suspensions)

- 2013-2014: Pilot on presence of patient representatives during the Board meetings
- Since 2015 – Annemiek Rensen - Board member on patient- and consumer-perspective

Patient organisations consulted for guidelines

- 1) Concept paper on the need for revision of the points to consider on the clinical investigation of new medicinal products for the treatment of **acute coronary syndrome** ([De Hart & Vaatgroep](#))
- 2) Draft qualification opinion of qualification of exacerbations 5 of chronic pulmonary disease tool (EXACT), and EXACT-6 respiratory symptoms measure (E-RS) for evaluating 7 treatment outcomes in clinical trials in **COPD** ([Longfonds](#))
- 3) Risk minimisation strategy for high strength and fixed combination insulin products Draft addendum to the good practice guide on risk minimisation and prevention of medication errors ([Diabetesvereniging Nederland](#))
- 4) Guideline on clinical investigation of medicinal products other than NSAIDs for treatment of rheumatoid arthritis ([Reumafonds](#))

MEB wants to strengthen the connection with patient organisations, and involve patients earlier in the decision making process

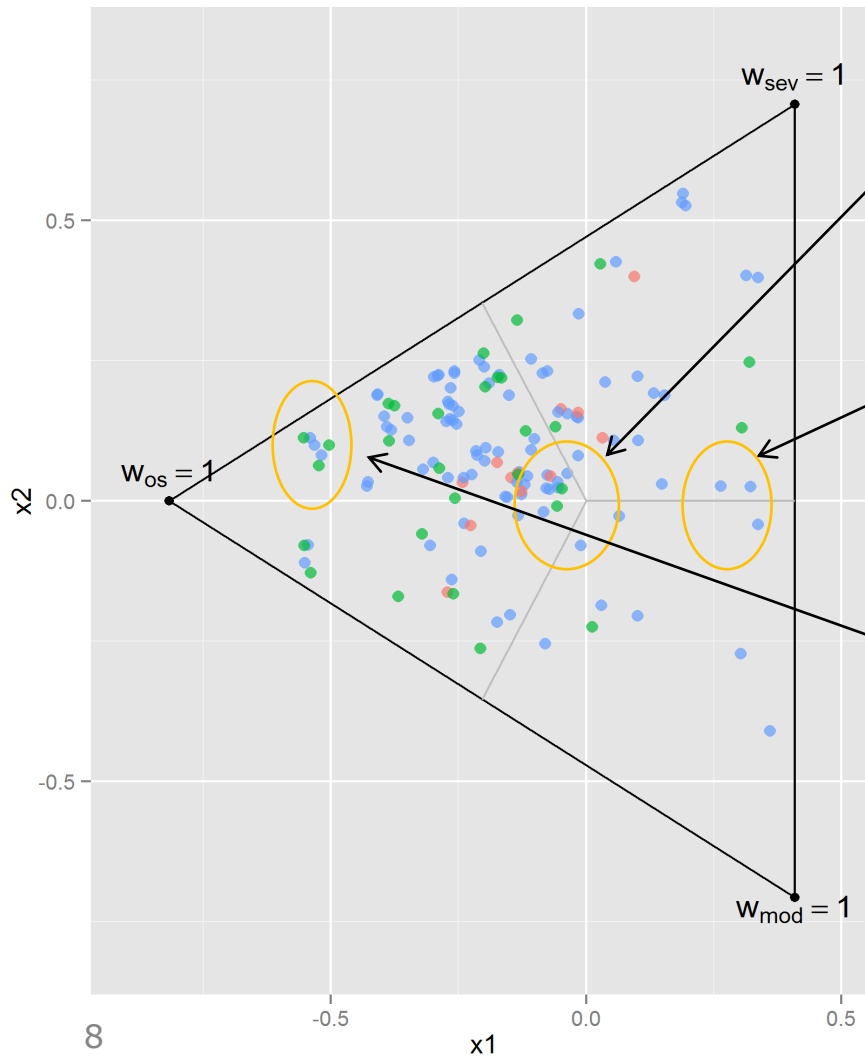
- Regulatory guidelines
- Scientific Advice
- Risk Communication Material
- Theme meetings on a specific disease area

Consultation with patient and consumer organisations

<http://english.cb-g-meb.nl/human/for-patients-and-consumers>

- In December 2014, the EMA Management Board adopted a revised framework of EMA interaction with patients, consumers and their organisations to reach out to a wider audience
- One of the objectives of the framework is **to facilitate participation of patients and consumers in benefit/risk evaluation**
- A number of methodologies are available, from informal methods (expert opinions) to **more formal methods (little experience so far)**

Distribution of the individual preferences



Centroid: all three criteria are equally important

Reducing toxicity is far more important than improving survival. Both toxicities are about equally important

Overall survival >> severe toxicity >> moderate toxicity

- Preliminary learnings
 - It is possible to use “rapid methods” to elicit patient values
 - Larger sample sizes are required to take into account demographic and clinical covariates
- Next steps:
 - Conduct a second pilot study

Acknowledgments:

EMA: N. Bere, M. Mavris, I. Moulon,

UMCG: H. Hillege, J. Kuiper, G. van Valkenhoef

*Innovative medicines faster available for the
(Dutch) patient at a socially acceptable price*



Thank you!