







Revision of European Guidelines on clinical investigation of medicinal products: Treatment of Chronic Obstructive Pulmonary Disease (COPD)

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INTRODUCTION

In order to help applicants to prepare the dossier for a MAA, the European Medicines Agency, prepares Scientific Guidelines. The Committee for Human Medicinal Products (CHMP) delegated these tasks in different Working Parties. The Efficacy Working Party (EWP) has been responsible for the development and update of clinical scientific guidelines (Figure 1).

MIA

To describe the key aspects of the update of the European guideline on clinical investigation of medicinal products in the treatment of chronic obstructive pulmonary disease (COPD) (CPMP/EWP/562/98).

METHODS

Co-Rapporteurs, from Spain and Sweden, were appointed by the Committee for Proprietary Medicinal Products (CHMP) Efficacy Working Party (EWP). Based on the complexity of the disease, internal and external experts were also involved.

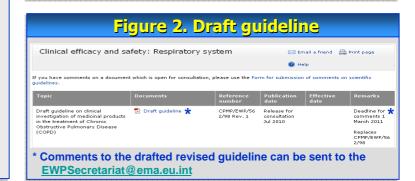
The following issues were considered when updating the guideline:

- 1) Implementation of updated clinical guidelines;
- **2)** Implementation of new scientific knowledge (e.g. epidemiological and pathophysiological information; reversibility test of pulmonary function in COPD patients and possible influence on outcome; severity staging of the disease; definition of exacerbation and severe exacerbation);
- usefulness and validation of biomarkers;
- 4) updated requirements for pivotal study/ies, including: a) possible influence of concomitant pharmacological (e.g. acetylcysteine) and non-pharmacological treatments (e.g. smoking cessation, surgical measurements, physical action, pneumo-sport); b) standardisation of clinical trials, recommendation of primary [e.g. rate of moderate/severe exacerbations, pre-bronchodilator Forced Expiratory Volume in one second (FEV1)] and secondary endpoints; c) critical discussion of active controlled clinical trials vs. placebo-controlled trials; d) discussion on clinically relevant differences in key endpoints; e) duration of pivotal studies:
- 5) Discussion of safety requirements (e.g. investigation of drug interactions, data on renal and hepatic dysfunction); and
- **6)** implementation of pharmaceutical particularities [need of spacer development in case of orally inhaled treatment with Metered Dose Inhalers (MDI's), statement of orally inhaled treatment and flow rate dependency].

Efficacy Working Party (EWP) Implementation Adoption of final guideline for publication Preparation of final version of guideline Collection of comments Preparation of initial draft guideline Adoption/release for consultation of concept paper Development of a concept paper Appointment of Rapporteur/Co-Rapporteur Selection of topic

RESULTS

The first step included the elaboration, adoption and consultation of the concept paper EMEA/CHMP/EWP/8197/2009 (need for revision of the COPD guideline). The preliminary concept paper was circulated to interested learned societies and patients associations on February 2009. Any organisation or individual was allowed to submit comments using a publicly available template. The first step ended on 31st May 2009. The second step (ongoing) includes the drafting of the guideline and further consultation and adoption. Three versions were drafted and internally discussed at the EWP before a final version was agreed in the July 2010 EWP meeting. The draft revised guideline has been released for consultation. Deadline for comments is March 2011 (Figure 2).



CONCLUSIONS

- ✓ The update of European guidelines on clinical investigation follows a well established public procedure in which many agents are involved (Rapporteurs, EWP members, CHMP, internal and external experts, interested parties and individuals).
- ✓ A final version of the COPD Guideline can be expected by end 2011.

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