Il percorso regolatorio dei Farmaci per le Malattie Rare.

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Commissione Tecnico-Scientifica (Aifa)

Fondazione LIRH
LEGA ITALIANA RICERCA HUNTINGTON E MALATTIE CORRELATE - ONLUS

La ricerca sulle malattie rare e le prospettive di cura per la malattia di Huntington
Convegno annuale della Fondazione LIRH onlus

Dichiarazione di trasparenza/interessi*

Le opinioni espresse in questa presentazione sono personali e non impegnano in alcun modo l'AIFA

Interessi nell'industria farmaceutica	NO	Attualmente	Precedenti 2 anni	Da oltre 2 a 5 anni precedenti	Oltre 5 anni precedenti (facoltativo)
Interessi diretti:					
Impiego in una società	x				
Consulenza per una società	x				
Consulente strategico per una società	x				
Interessi finanziari	x				
Titolarità di un brevetto	x				
Interessi indiretti:					
Sperimentatore principale	x				
Sperimentatore	x				
Sovvenzioni o altri fondi finanziari	x				

* **Patrizia Popoli,** secondo il regolamento sul Conflitto di Interessi approvato dal CdA AIFA in data 26.01.2012 e pubblicato sulla Gazzetta Ufficiale del 20.03.2012 in accordo con la policy 0044 EMA/513078/2010 sulla gestione del conflitto di interessi dei membri dei Comitati Scientifici e degli esperti.

N.B. Per questo intervento non ricevo alcun compenso

Orphan drugs

* The European Medicines Agency plays a central role in the development and authorisation of medicines for rare diseases. These medicines are termed '**orphan drugs**' in the medical world.

* Rare diseases are **life-threatening or chronically debilitating conditions** affecting **no more than 5 in 10,000** people in the EU.

Storia della legislazione sui farmaci orfani

* **1983** – Primo Orphan Drug Act negli Stati Uniti
* **1990s** – Legge sui farmaci orfani adottata a Singapore (91) in Giappone (93) e in Australia (97)

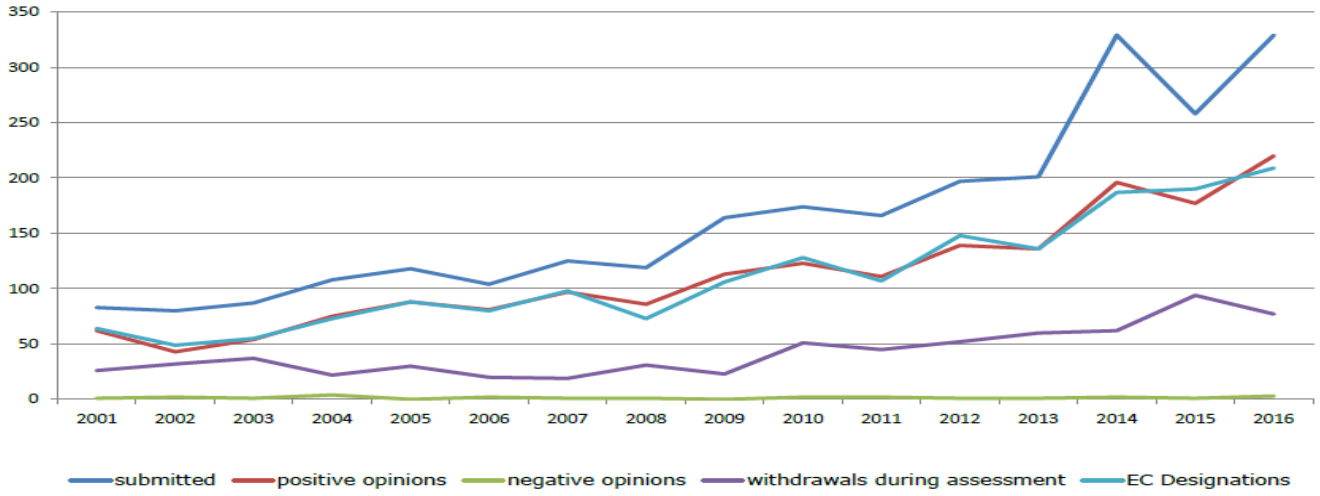
Quadro normativo europeo per farmaci orfani

Regolamento (CE) n. 141/2000 del Parlamento europeo e del Consiglio, del 16 dicembr 1999, concernente i medicinali orfani.

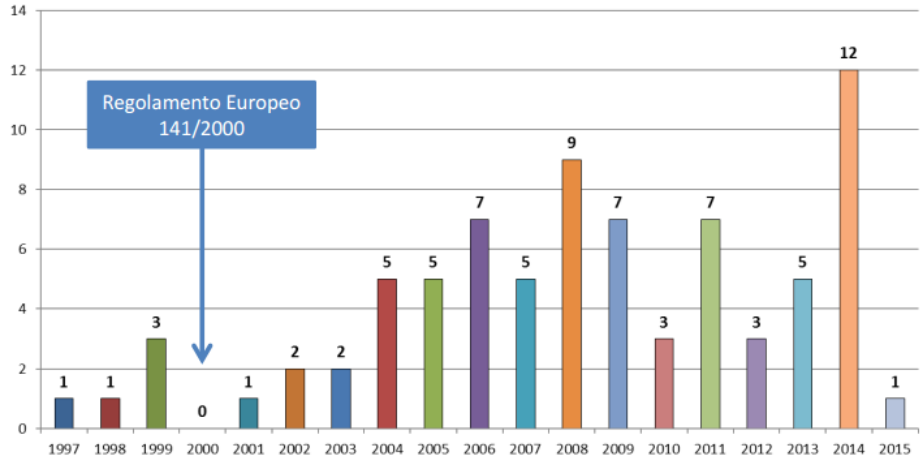
- Criteri per la designazione, procedura per ottenere la designazione; istituzione del **COMP presso EMA**,
- Incentivi economici**:**
  - Accesso diretto alla Procedura Centralizzata di registrazione
  - Assistenza per l'elaborazione dei protocolli
  - Esenzione dai diritti
  - Priorità all'accesso ai programmi di ricerca europei
  - Scientific advice gratuito
  - 10 anni esclusiva di mercato

- **Regolamento (CE) n. 847/2000 della Commissione del 27 aprile 2000.**
- **Raccomandazione del Consiglio dell'8 giugno 2009 su un'azione nel settore delle malattie rare (2009/C 151/02).**

Orphan Applications Figures 2000-2016



I farmaci orfani disponibili in Italia

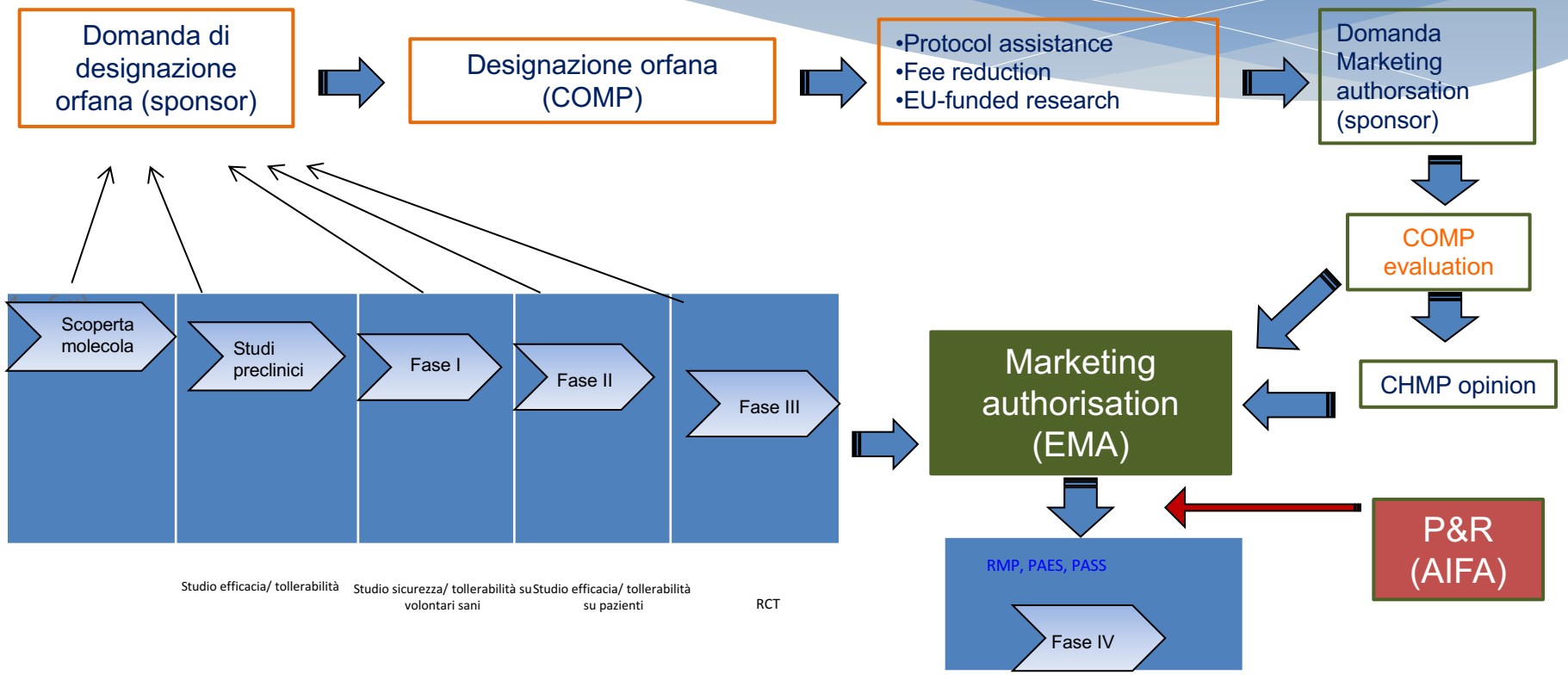


Ad oggi sono stati classificati ai fini della rimborsabilità **79 farmaci orfani** di cui 74 dopo l'approvazione del Regolamento EU nel 2000.
L'**78%** dei **93** Farmaci Orfani approvati in EU è disponibile in Italia.

Fonte: European Medicines Agency / Gazzetta Ufficiale Italiana

Da: gruppo di lavoro sui farmaci orfani, aprile 2014

PROCESSO REGOLATORIO FARMACO ORFANO



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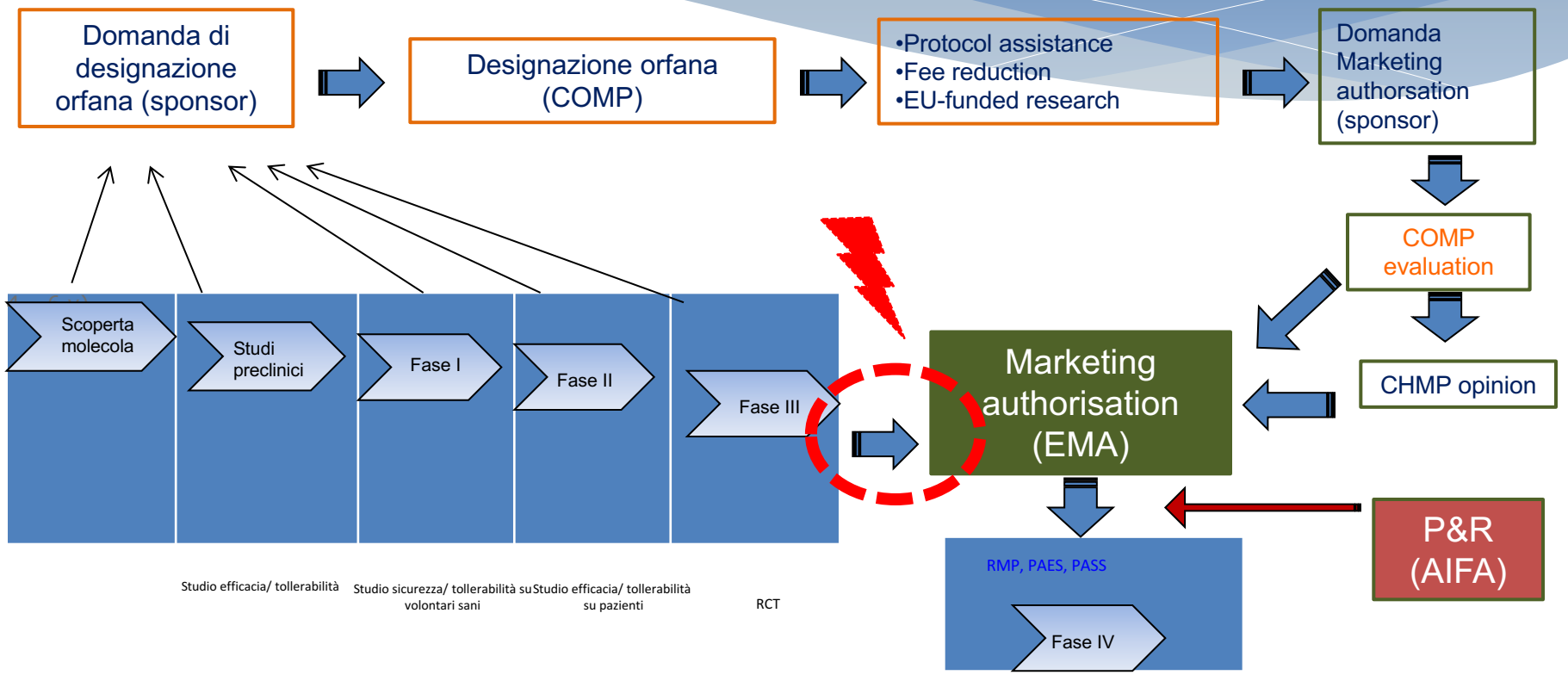

Iniziative volte a favorire l'accesso ai farmaci
attraverso una semplificazione del processo di sviluppo

Table 2 Comparison of existing, new, and emerging reimbursement access pathways/facilitators

Pathway/tool	Jurisdiction (year of introduction)	Status	Purpose	Assessment basis	Mechanism for accelerated access	Other elements
CMA	EU (2005)	Existing	Seriously debilitating and life-threatening conditions, medicinal product for emergency use, or orphan medicinal products; must address unmet medical need	Noncomprehensive data with little likelihood that there will be timely collection of additional data after the authorization	Shortened development time	Authorized for 1 year with option to renew as long as benefit–risk profile remains positive. Typically, there are postauthorization conditions in relation to the collection of the outstanding data that must be met. A Periodic Safety Update Report is required at 6-month intervals. Authorization is expected to be temporary and to be converted to normal authorization with data confirming a positive risk–benefit profile
Approval under exceptional circumstances	EU (1993)	Existing	Medicines with urgent public health need	Noncomprehensive nonclinical and clinical data with little likelihood that it will ever be collected	Shortened development time	Postauthorization data collection, which usually includes an identified program of studies, the results of which form the basis of an annual reassessment of the benefit–risk profile
Adaptive licensing/ MAPPs	EU/US/ Canada/ Singapore	Emerging (2012 PCAST report supported conduct of pilot projects; 2014 EMA announcement of initiation of pilot projects)	Initially, medicines to treat an unmet medical need for a serious condition; to be applied more broadly with experience and strengthening of post–initial authorization systems for monitoring medicine utilization and experience	Clinical safety, efficacy, relative effectiveness, and cost-effectiveness data, as appropriate, collected across the life cycle of the medicine and submitted for successive regulatory and reimbursement assessments and decisions	Shortened development cycle, and shortened regulator and payer/HTA review times due to early alignment of stakeholder requirements, better focused data, and better informed decision making at various stages of development	Multistakeholder participation required. Enhanced monitoring of drug safety and drug utilization controls required after initial authorization

Conditional marketing authorisation

The European Medicines Agency (EMA) supports the development of medicines that address unmet medical needs of patients. In the interest of public health, applicants may be granted a conditional marketing authorisation for such medicines where **the benefit of immediate availability outweighs the risk of less comprehensive data than normally required**.

Medicines are eligible if they belong to **at least one of these categories:**

- aimed at treating, preventing or diagnosing seriously debilitating or life-threatening diseases;
- intended for use in emergency situations;
- designated as orphan medicines.

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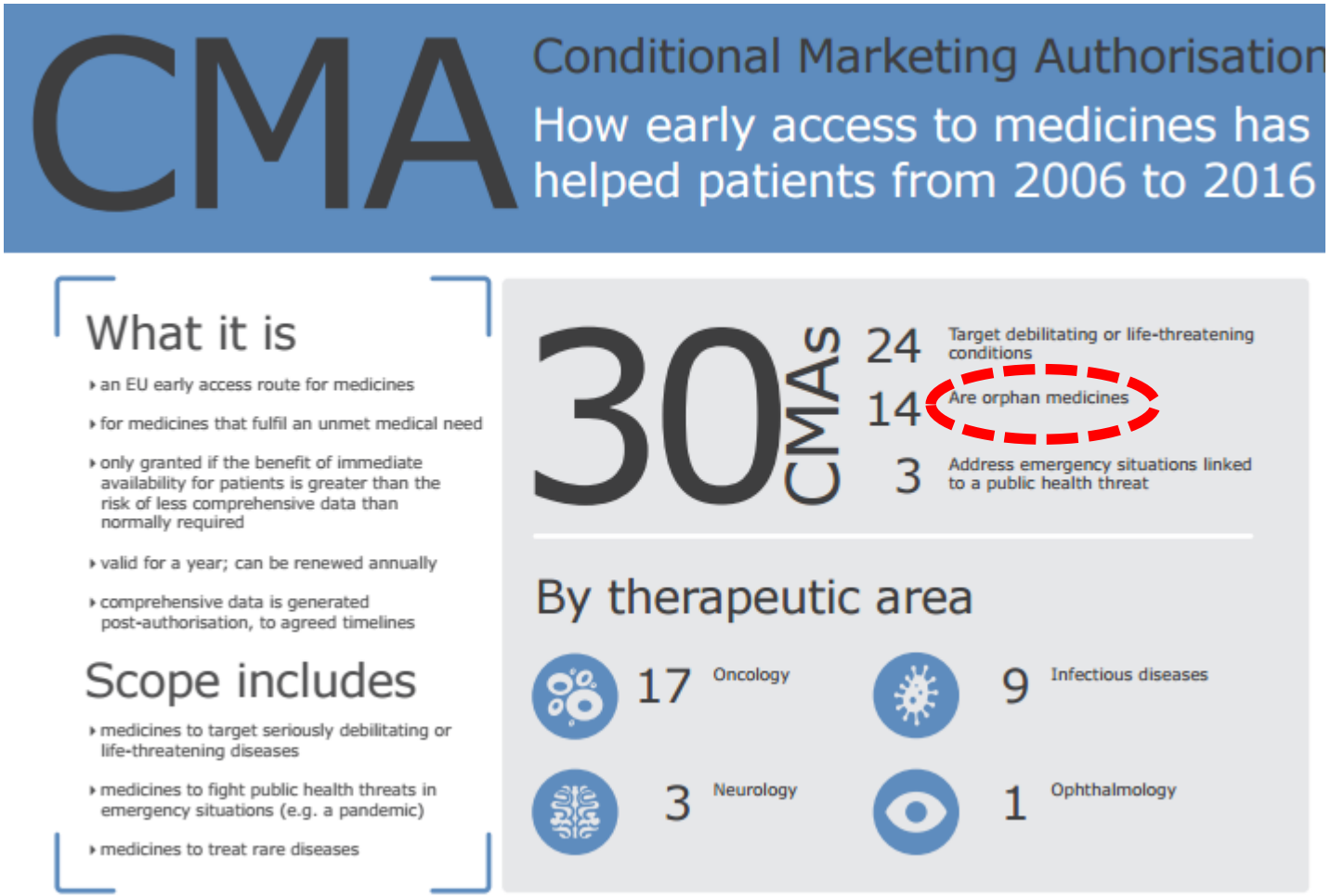
CMA
Conditional Marketing Authorisation
How early access to medicines has helped patients from 2006 to 2016
What it is
an EU early access route for medicines
for medicines that fulfil an unmet medical need
only granted if the benefit of immediate availability for patients is greater than the risk of less comprehensive data than normally required
valid for a year; can be renewed annually
comprehensive data is generated post-authorisation, to agreed timelines
Scope includes
medicines to target seriously debilitating or life-threatening diseases
medicines to fight public health threats in emergency situations (e.g. a pandemic)
medicines to treat rare diseases
30 CMAs
24 Target debilitating or life-threatening conditions
14 Are orphan medicines
3 Address emergency situations linked to a public health threat
By therapeutic area
17 Oncology
9 Infectious diseases
3 Neurology
1 Ophthalmology

Authorization under exceptional circumstances

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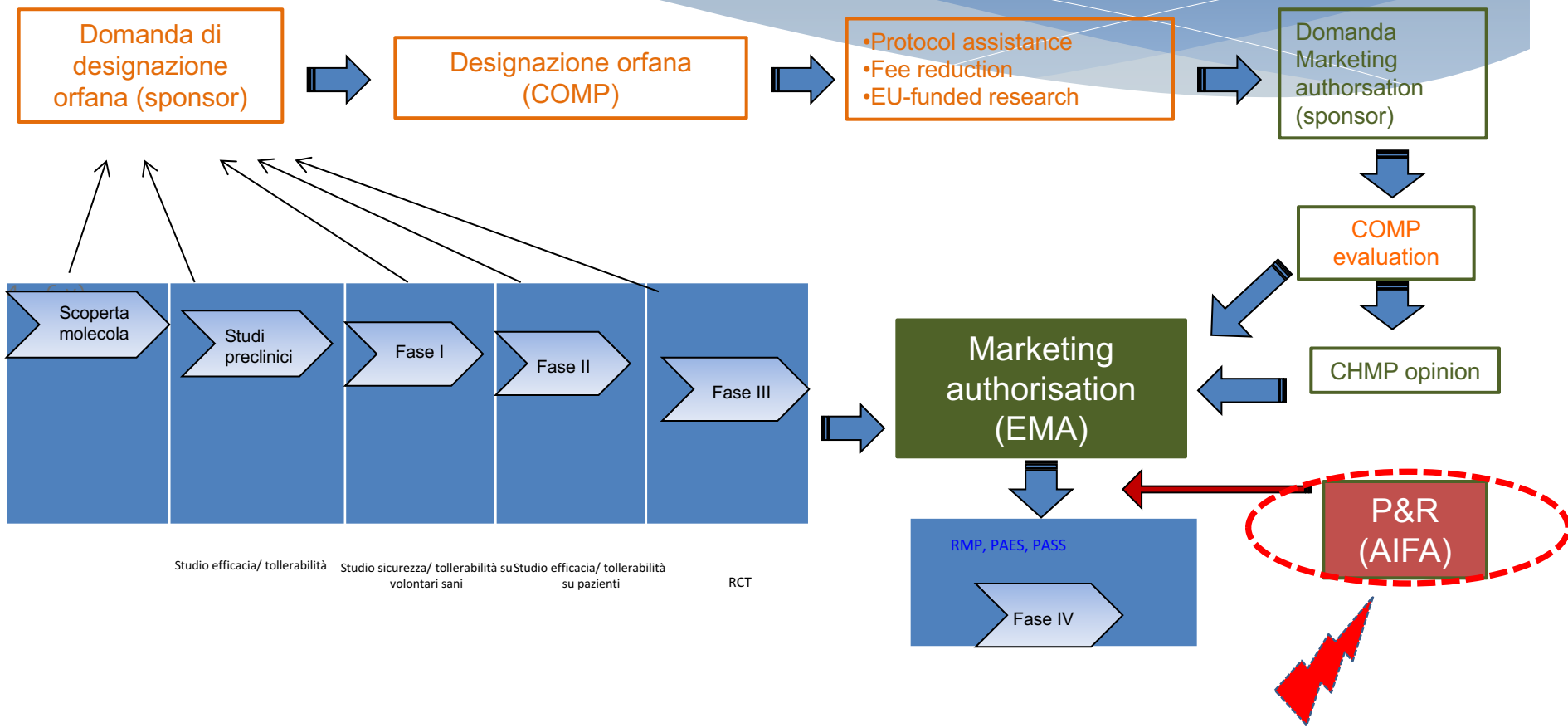
* Directive 2001/83/EC states that when the applicant can show that he is **unable to provide comprehensive data on the efficacy and safety under normal conditions of use**, because:

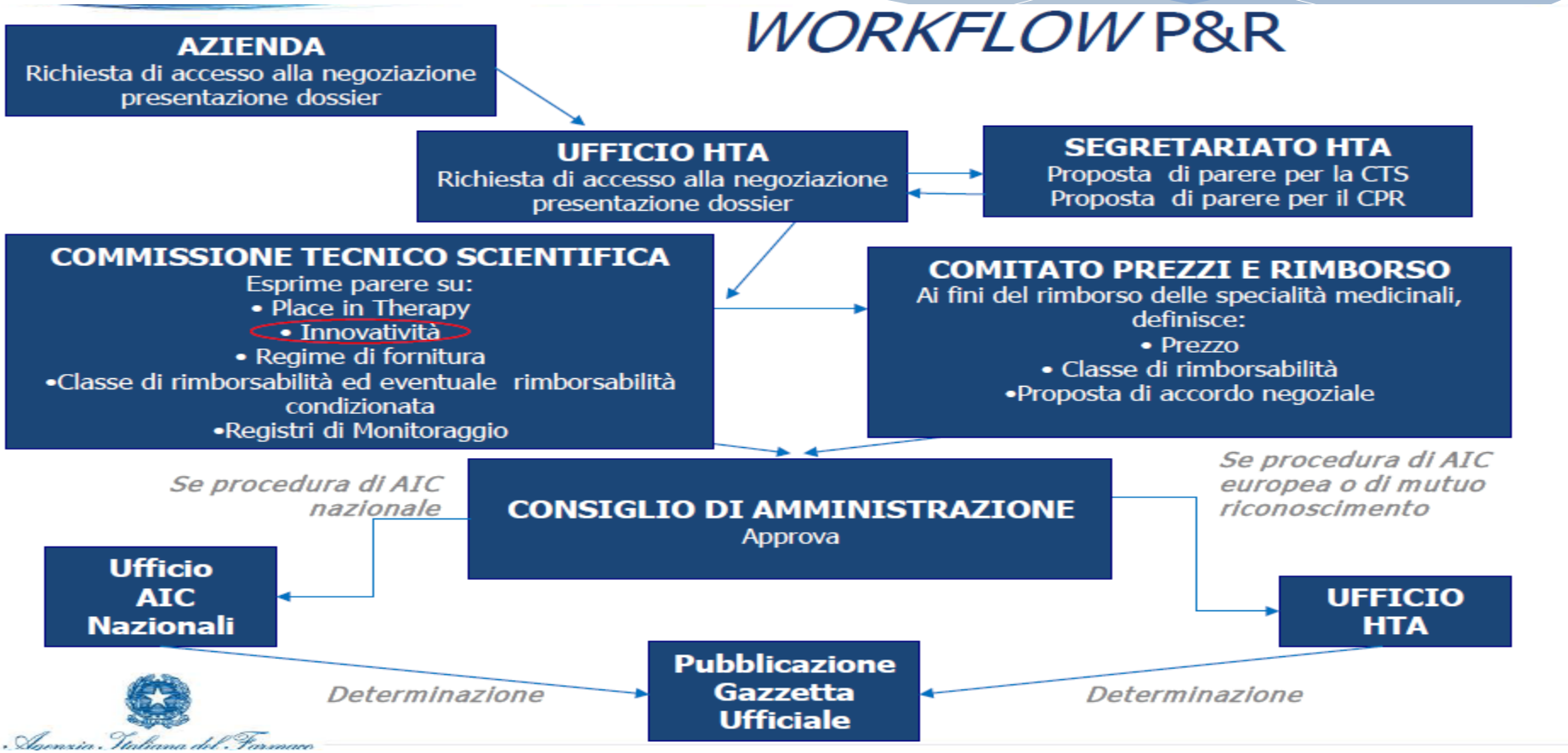
* – The indications for which the product in question is intended are encountered so rarely that the applicant cannot reasonably be expected to provide comprehensive evidence, or
* – In the present state of scientific knowledge, comprehensive information cannot be provided, or
* – It would be contrary to generally accepted principles of medical ethics to collect such information,

a marketing authorisation may be granted subject to certain specific obligations.

PROCESSO REGOLATORIO FARMACO ORFANO



Il processo per la definizione del prezzo e della rimborsabilità di un farmaco in Italia



Innovatività

* Per farmaci indicati per le malattie rare, in presenza di un elevato bisogno terapeutico e di forti indicazioni di un beneficio terapeutico aggiunto, potrà essere possibile attribuire l'innovatività anche in presenza di una qualità delle prove di livello basso.

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PHARMACOECONOMICS

Affordable orphan drugs: a role for not-for-profit organizations

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AIMS

The success of the Regulation on Orphan Medicinal Products in the European Union is evidenced by the 127 orphan drugs that have had market authorization since 2000. However, the incentives aimed at stimulating research and development have had the unintended consequence of increasing drug cost, resulting in many orphan drugs not being cost-effective. Orphan drugs command an increasing share of the pharmaceutical market and account for a disproportionate amount of healthcare expenditure. Orphan drug ownership by socially motivated, not-for-profit organizations may facilitate access to more affordable orphan drugs, for the benefit of patients and healthcare systems alike.

Grazie per la vostra attenzione

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