

Comment for EANM website & vEANM Newsletter:

## **NEW REGULATION ON CLINICAL TRIALS APPROVED BY EUROPEAN PARLIAMENT**

During its session on April 2nd, the European Parliament approved the new Regulation on clinical trials on medicinal products for human use, repealing the old Directive 2001/20/EC (the “Clinical Trial Directive”).

The full text of the approved Regulation 536/2014 has now been published: [http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=OJ:JOL\\_2014\\_158\\_R\\_0001&from=ES](http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=OJ:JOL_2014_158_R_0001&from=ES)

This is a **very substantial change in the way clinical trials will be carried out in Europe** in the very near future, hopefully fostering clinical research and consequently also biomedical translational and preclinical research.

## **REMARKABLE CHANGES OF THE NEW REGULATION COMPARED WITH THE PREVIOUS DIRECTIVE ON CLINICAL TRIALS**

The fact that **it is a Regulation** (that is immediately enforceable and does not need transposition to national legislation) is very relevant, as this will mean that all EU Countries will have not a similar, but an identical regulation for clinical trials.

New regulation is focused on patient **safety and reasonable and proportionate risk assessment**, simplifying all the approval procedures and favoring multicenter trans-national clinical trials.

The concept of clinical trial is clarified by introducing the broader concept of 'clinical study' of which the clinical trial is a category. This approach takes due account of international guidelines, and is in line with the EU law governing medicinal products, which builds on the dichotomy of 'clinical trial' and 'non-interventional study'.

The new Regulation introduces very substantial changes in the overall authorization procedure for clinical trials. The multiple submission of largely identical information will be avoided and replaced by the submission of one application dossier to all the Member States concerned through a single submission portal. The competent authorities will provide a flexible and efficient procedure designed to ensure: 1) patient safety or public health, 2) a strict scientific and ethical review, and 3) adequate procedures to answer clinical trials applications within the given timelines to avoid administrative delays.

Furthermore, clinical trials for the development of orphan medicinal products and of medicinal products addressed to subjects affected by rare and ultra-rare diseases will be fostered by a rapid assessment procedure.

Trying to promote transparency and transfer of information obtained from clinical trials to the wider society in a timely manner, the sponsor will have to submit a summary of the results of the clinical trial together with a summary that is understandable to a layperson, and the clinical study report, within defined timelines.

Changes in relation to auxiliary medicinal products are also introduced by the new Regulation. Such products include those used to assess end-points in a clinical trial, as will be the case for many diagnostic radiopharmaceuticals. Where there are problems with respect to the availability of authorised auxiliary medicinal products, non authorised auxiliary medicinal products may be used in a clinical trial in justified cases.

## THE SPECIFIC CASE OF RADIOPHARMACEUTICALS IN THE NEW REGULATION

Radiopharmaceuticals deserve a special treatment considering some very important exceptions for the general rules in relation with some diagnostic radiopharmaceuticals that mean very relevant changes as compared with the previous Clinical Trial Directive.

1. **No need to hold an authorisation for manufacture or import of radiopharmaceuticals used as diagnostic investigational medicinal products (IMPs)** where this process is carried out in hospitals, health centres or clinics, by pharmacists or other persons legally authorised in the Member State concerned to carry out such process , and if the IMPs are intended to be used exclusively in hospitals, health centres or clinics taking part in the same clinical trial in the same Member State (art. 61.5)
2. **No need for GMP production of diagnostic radiopharmaceuticals used as IMPs and prepared and used in the conditions stated above** (art. 63.2 in relation to 61.5)
3. **Simplified labelling of radiopharmaceuticals used as IMPs** (this refers to the label of the vial/syringe with the dose). Art. 68 in relation with art. 66 and 67.

The Regulation will come into force 20 days after its publication, but it will not be enforceable before 2 years of that date (art. 99).

This new regulation is going to be of benefit for the nuclear medicine community, allowing the use of radiopharmaceuticals in clinical trials in a way that is easier than before.

It is important to recognise the role of EANM in achieving the changes stated above in relation with radiopharmaceuticals. It was of utmost importance that EANM contact with appropriate persons early in the process was able to influence the Commission when it first drafted the very first proposal of this Regulation, followed up by an EANM delegation to Brussels during the consultation phase, resulting in an expansion of the exemption for diagnostic radiopharmaceuticals.

We want to consider this successful story as an example of how important is to have collaborative and fruitful interactions with the institutions, in order to be proactive in promoting our discipline.

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