



The new Clinical Trial Regulation (CTR) explained-

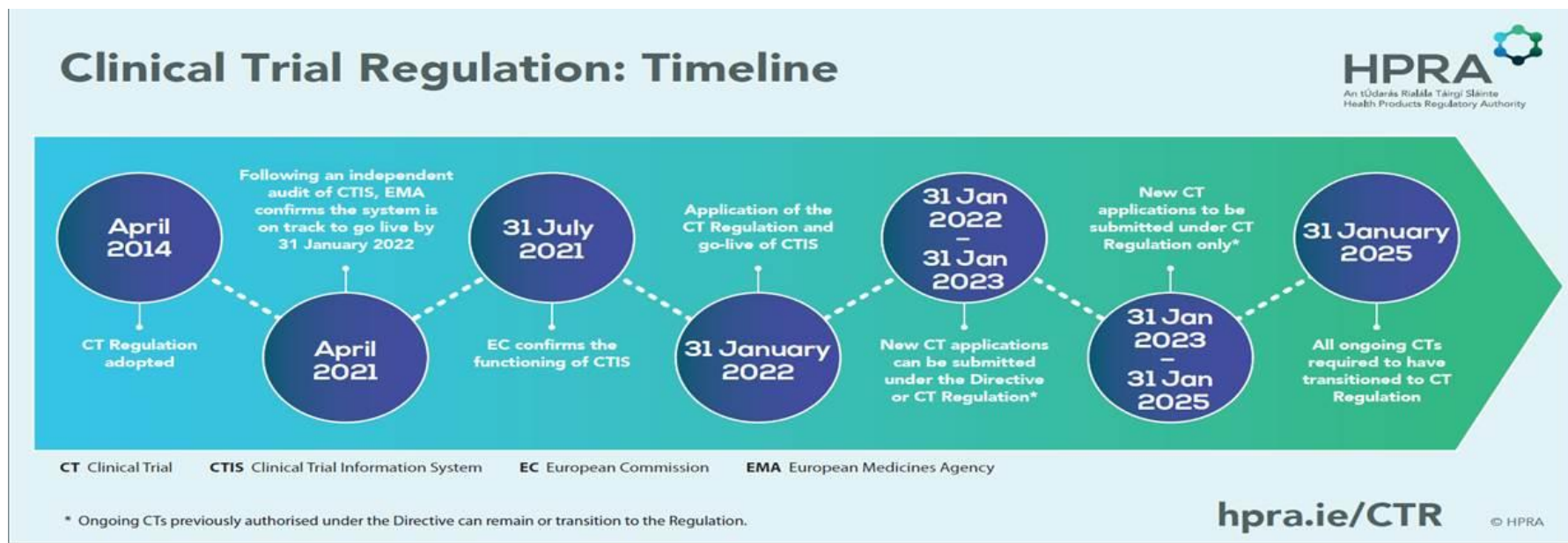
Preparation for Transition– Session 2, November 23, 2021

Shane Gormley, PhD, MPSI, Clinical Assessor

22-25 November, 2021



Timeline for transition





When to transition?

- Possible to transition at any time post January 31st 2022.
- All trials must transition by 31st January 2025
 - Sponsors should take into consideration the authorisation procedure time (60 days) when considering this deadline.
- Only **active** trials without any **pending/ongoing assessment** in any EEA country are eligible to transition.



How to transition trials authorised under the CTD to the CTR

- Transition is via submission of an application in line with Article 5 of the CTR through CTIS.
- Specific requirements may differ depending on the nature of the currently authorised trial
 - Mononational;
 - Multinational;
 - Voluntary Harmonisation Procedure (VHP).
- In all instances, it is the **Sponsors responsibility** to ensure compliance with the CTR prior to submission.



Mononational Clinical Trials

- For trials only authorised in one member state Sponsor should submit a new CT application through CTIS including:
 - Cover letter –
 - include a statement that **protocol does not differ** from authorised version
 - Include a declaration that all other part I documents are identical
 - New application form (part I and part II)
 - Part I documents:
 - Latest approved protocol
 - IB
 - GMP related documents
 - IMPD
 - Any existing documents related to auxiliary medicinal products



Mononational Clinical Trials

– Part II documents:

- Informed consent form and information on procedure
- Subjects information sheet

- In the case the sponsor cannot provide any Annex I dossier requirements specific to the CTR, they should include a blank document explaining these have been assessed by NCA or REC
- Any additional Annex I dossier requirements should be completed at the time of the first SM.



Multinational Clinical Trials

- Sponsor must ensure that the clinical trial has a harmonised or consolidated protocol approved in all MSC prior to transitioning.
 - Harmonised protocol – identical protocol and trial procedures in all MSC;
 - Consolidated protocol – identical protocol, but MSC specific considerations on specific trial procedures are included.



Multinational Clinical Trials

- Following aspects of the protocol must be identical in all MSC
 - EudraCT number
 - Trial Title
 - Protocol version number
 - Primary objective
 - Primary endpoint
 - Definition of end of trial
 - Main inclusion and exclusion criteria



Multinational Clinical Trials – Protocol differences across MSC scenarios

- Harmonised (i.e. identical) protocol in all MSC – no need to submit a substantial amendment under the directive prior to transitioning.
- Non-substantial (i.e. administrative) differences in protocols in MSC – a consolidated or harmonised version can be submitted.
 - Sponsor must declare there are **no substantial differences** in the protocol relative to that approved in all MSCs under the directive.
- Substantial differences – a substantial amendment should be submitted to the NCA of each MSC to harmonise the protocols prior to transition.



Multinational Clinical Trials

- For trials authorised in more than one member state with the same EudraCT, Sponsor should submit a new CT application through CTIS including:
 - Cover letter –
 - include a statement that protocol does **substantially** differ from version authorised **in all MSC**
 - include a declaration that all other part I documents are identical
 - New application form (part I and part II)
 - Part I documents:
 - **Consolidated/harmonised** protocol
 - IB
 - GMP related documents
 - IMPD
 - Any existing documents related to auxiliary medicinal products



Multinational Clinical Trials

- Part II documents:
 - Informed consent form and information on procedure
 - Subjects information sheet
- In the case the sponsor cannot provide any Annex I dossier requirements specific to the CTR, they should include a blank document explaining these have been assessed by NCA or REC.



Multinational Clinical Trials - VHP

- VHP will discontinue as of entry into force of the regulation.
- For VHP trials transitioning, the ref-NCA for the VHP should be nominated as the RMS with all concerned MS identified in the application in CTIS.
- Sponsor must ensure that harmonised documentation exists in all MSC to the VHP as per the multinational procedure already discussed.
- If a harmonised protocol does not exist, substantial amendments under the directive should be submitted to harmonise documents prior to submission of the application for authorisation under the CTR.



Transition process

- Validation of the submitted documents to take place, but no assessment is foreseen.
- **Sponsors responsibility** to ensure document requirements are in line with the CTR.
- Tacit approval within 60 days of submission.
- MSC can take **corrective measures** as per Article 77 if they subsequently find out the Trial is not in compliance with the CTR.
 - Revoke;
 - Suspend;
 - Modify.
- Documents submitted through CTIS will be subject to transparency and publication rules post-authorisation.



Resources

- Regulation 536/2014: https://ec.europa.eu/health/sites/default/files/files/eudralex/vol-1/reg_2014_536/reg_2014_536_en.pdf
- Current and future Commission guidelines: <https://ec.europa.eu/health/documents/eudralex/vol-10>
- General Q+A: https://ec.europa.eu/health/sites/default/files/files/eudralex/vol-10/regulation5362014_qa_en.pdf
- Transition period: [2018 05 CTFG Best Practice Guide for sponsors of transition multinational clinical trials. pdf \(hma.eu\)](https://www.hma.eu/2018/05/ctfg-best-practice-guide-for-sponsors-of-transition-multinational-clinical-trials.pdf)
- Transparency: https://www.ema.europa.eu/en/documents/other/appendix-disclosure-rules-functional-specifications-eu-portal-eu-database-be-audited_en.pdf
- Risk proportionate approaches: https://ec.europa.eu/health/sites/health/files/files/eudralex/vol-10/2017_04_25_risk_proportionate_approaches_in_ct.pdf
- Auxiliary meds: https://ec.europa.eu/health/sites/health/files/files/eudralex/vol-10/2017_06_28_recommendation_on_axmps.pdf
- Serious breaches: https://www.ema.europa.eu/en/documents/scientific-guideline/draft-guideline-notification-serious-breaches-regulation-eu-no-536/2014-clinical-trial-protocol_en.pdf
- Commission training course March 2021: https://ec.europa.eu/health/human-use/events/ev_20210309_en



Thank you!



Health Products Regulatory Authority

CTReg@hpra.ie