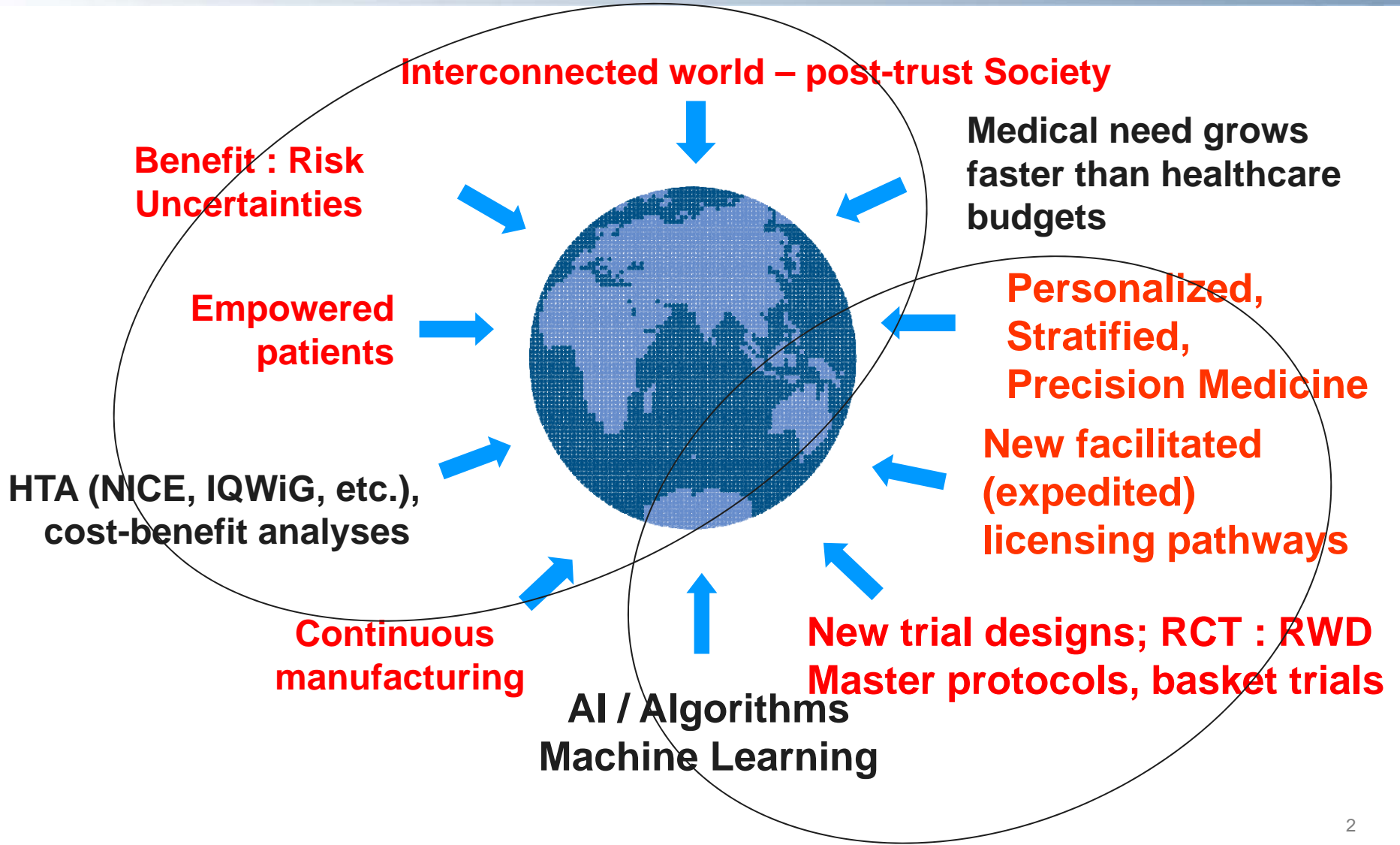


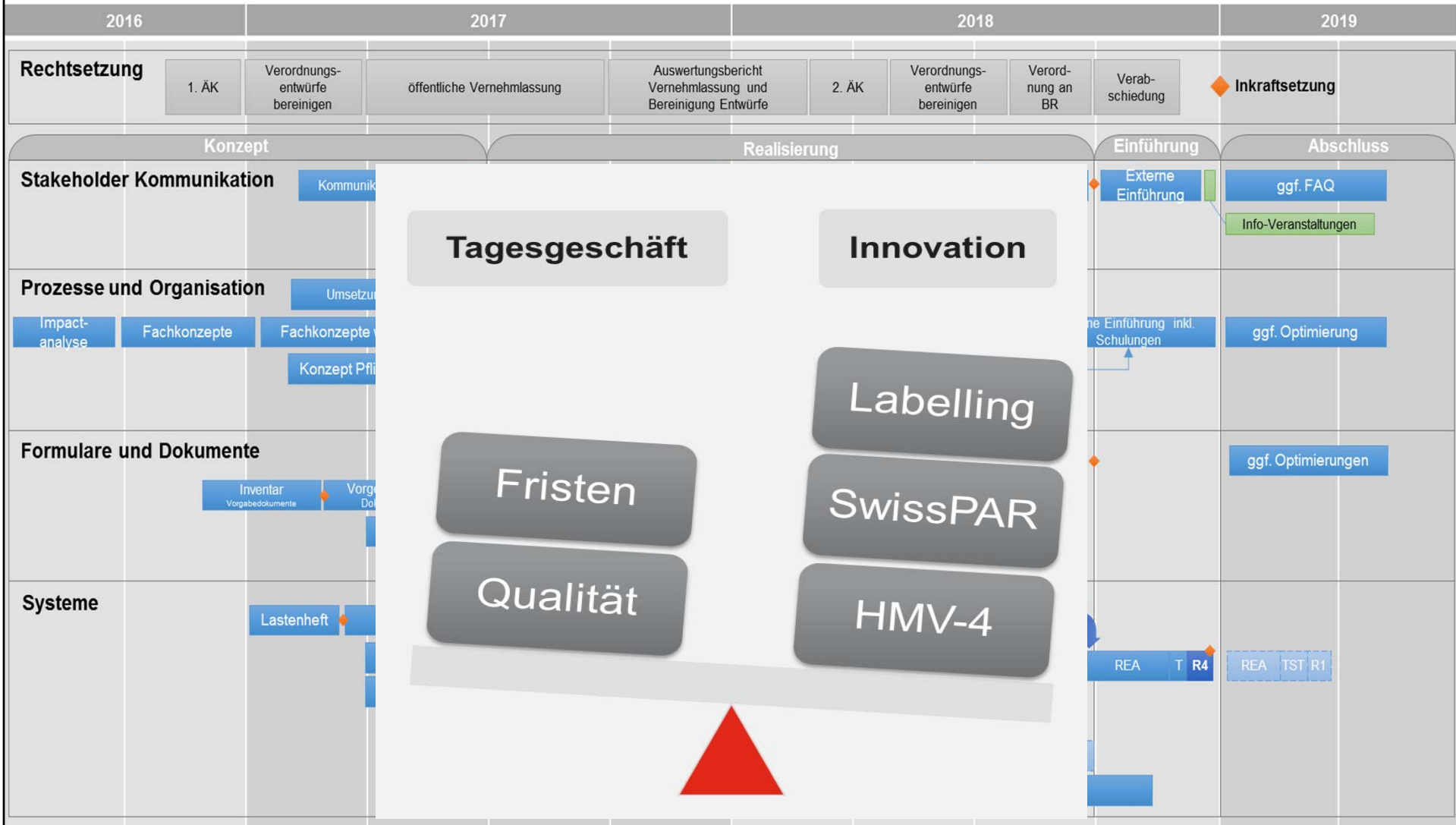
Swissmedic Regulatory News - Bereich Zulassung 11.12.2017

Zulassung 2017

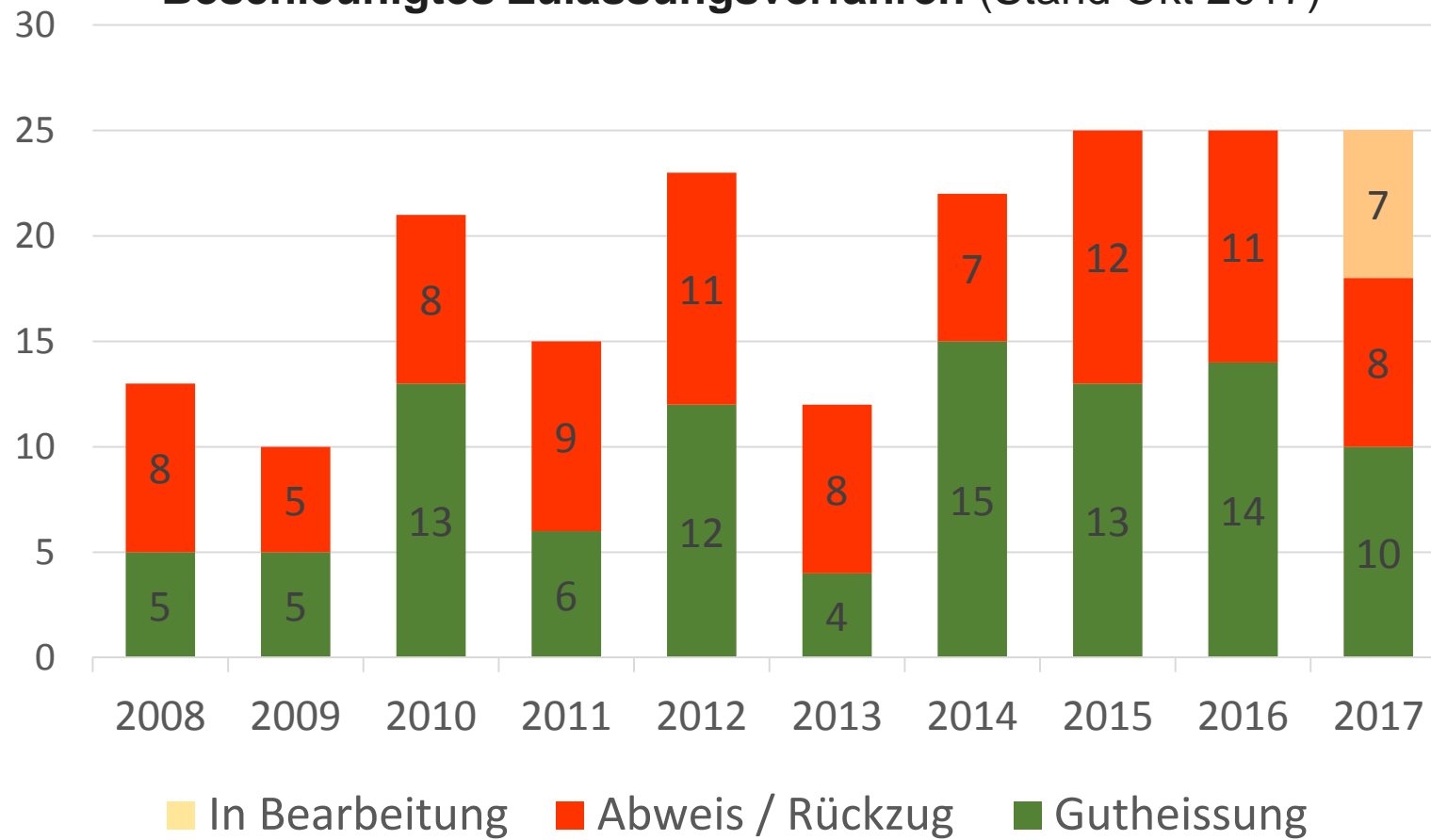


Claus Bolte, Leiter Bereich Zulassung

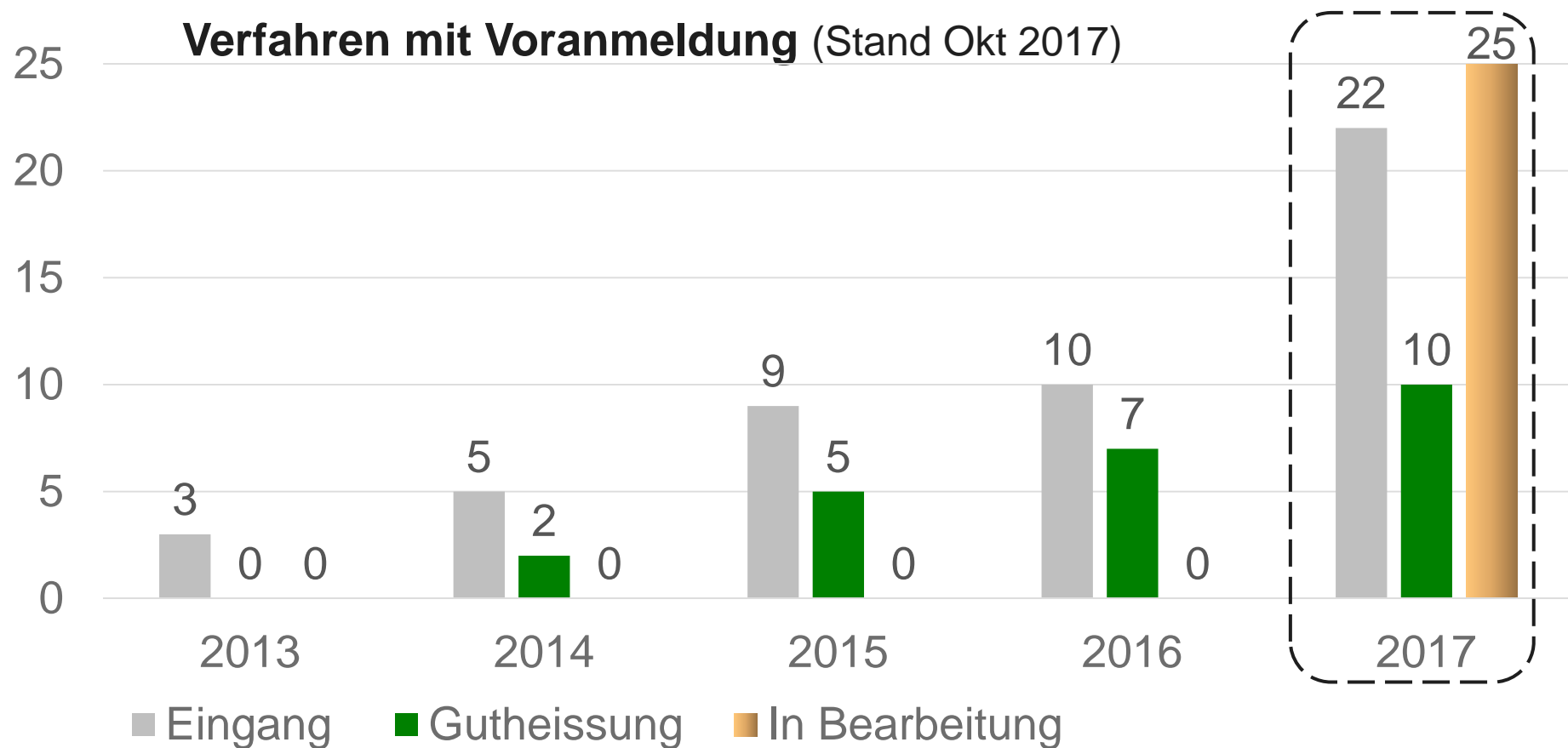




Beschleunigtes Zulassungsverfahren (Stand Okt 2017)

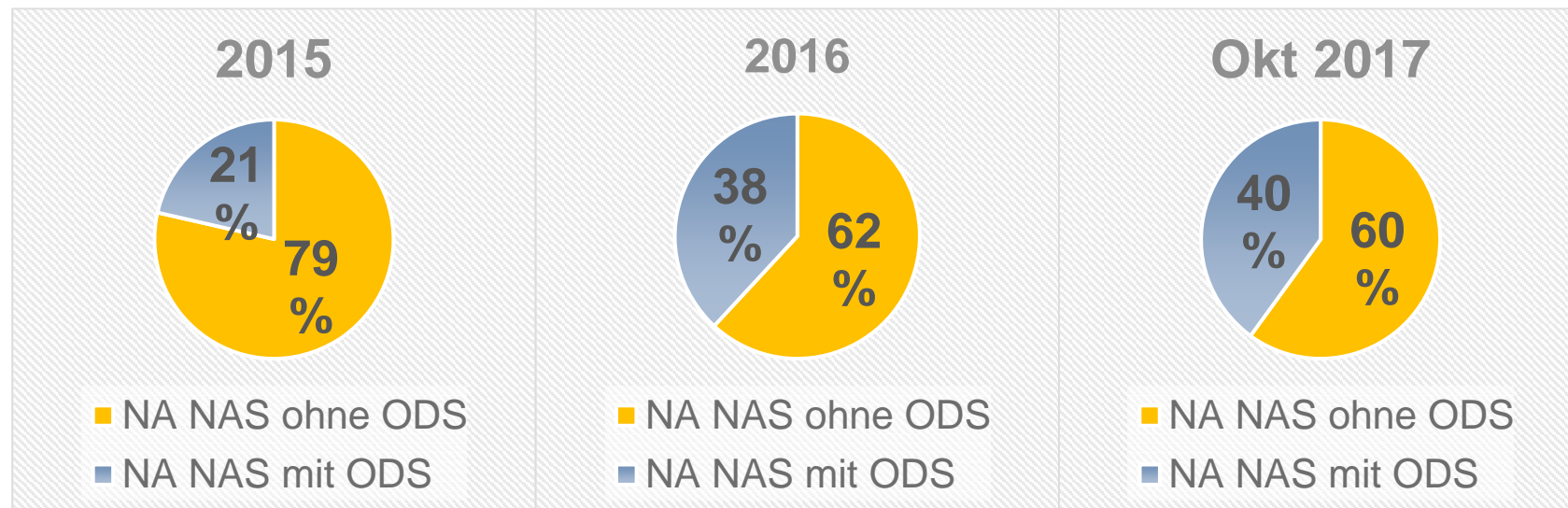


Verfahren mit Voranmeldung (Stand Okt 2017)



- 2017 wurden 22 Zulassungsgesuche im VmVA eingereicht und 10 gutgeheissen
- 25 Gesuche sind in Bearbeitung bzw. zur Einreichung im 2017 angemeldet.
- Die Gesuche wurden zu **100%** fristgerecht abgeschlossen.

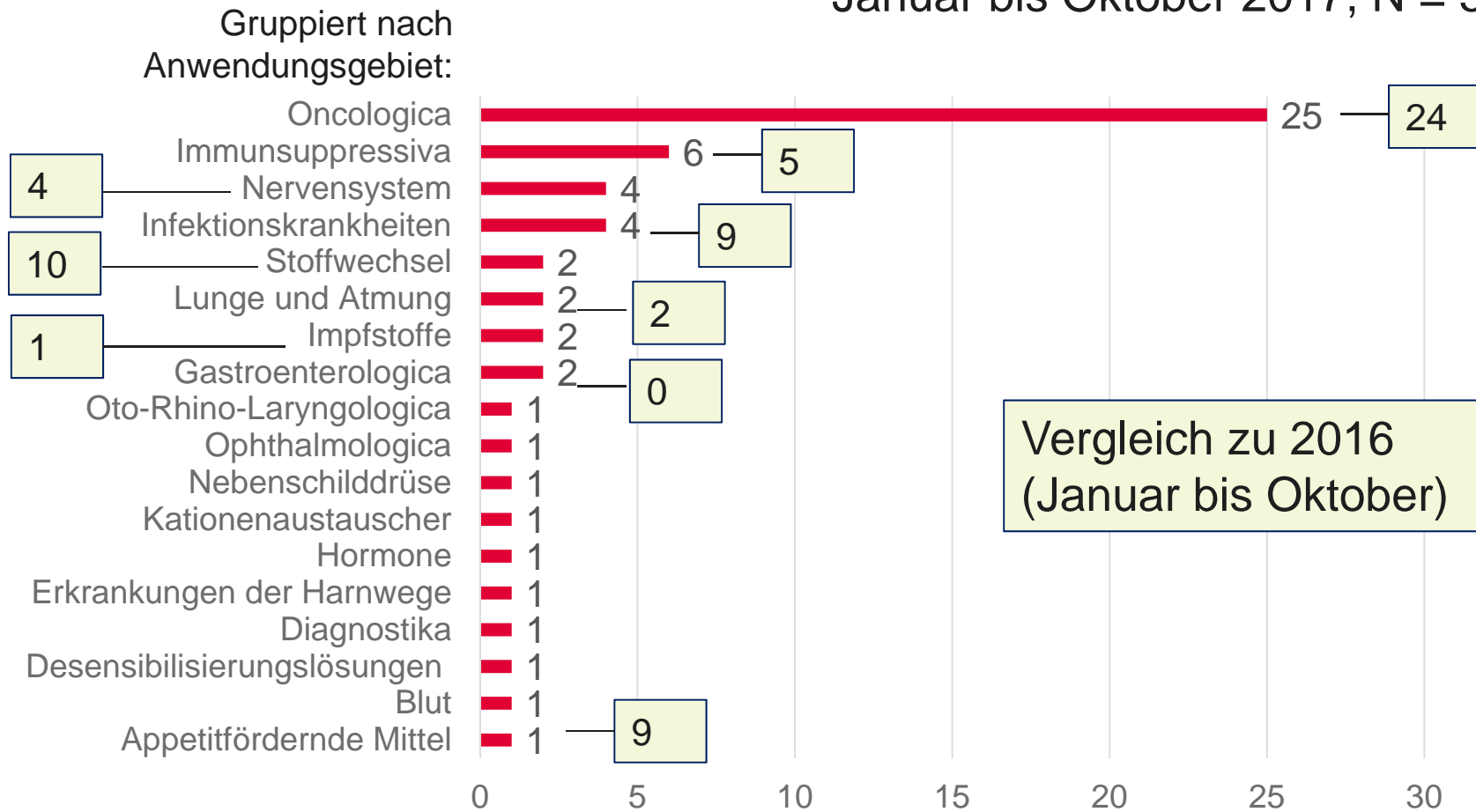
Gutgeheissene NA NAS mit Orphan Drug Status



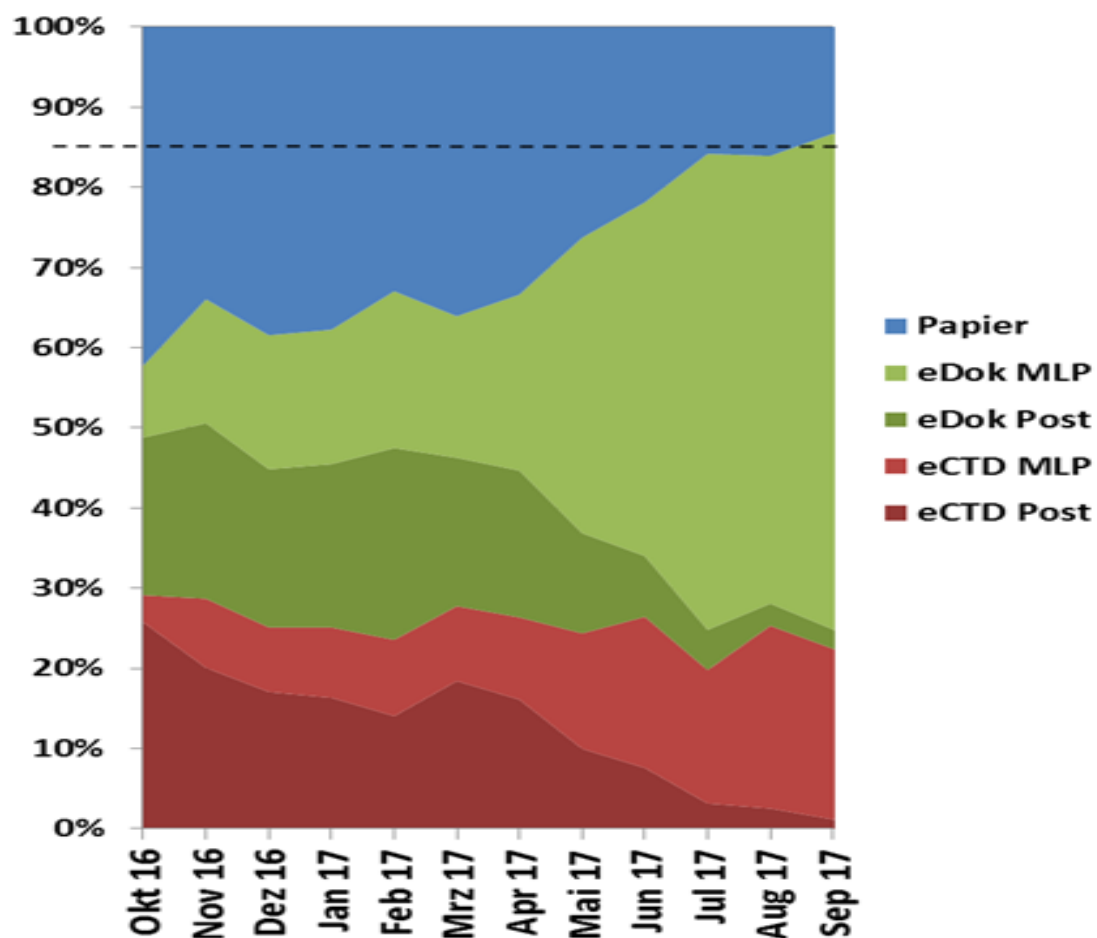
Gesuchstyp / Verfahren	2014	2015	2016	Okt 2017
NA NAS	37	28	42	30
NA NAS mit ODS	10 (27%)	6 (21%)	16 (38%)	12 (40%)
NA NAS mit ODS im BZV	3	3	2	4
Antrag Status ODS → Status gewährt	20 20 (100%)	34 28 (82%)	40 39 (98%)	43 42 (98%)

HMEC-Empfehlungen

Januar bis Oktober 2017, N = 57



Anteile Eingangsformate Zulassungsgesuche



eSubmissions-Plattform

Der Anteil der reinen Papiereinreichungen (blau) ist im September erstmals auf unter **15%** gesunken.

Innerhalb der eDok und eCTD Formate ist der den Anteil der per MLP eingereichten Gesuche am hellerem Farbton.

eCTD und eDok werden **fast ausschliesslich** per Plattform (MLP) eingereicht.

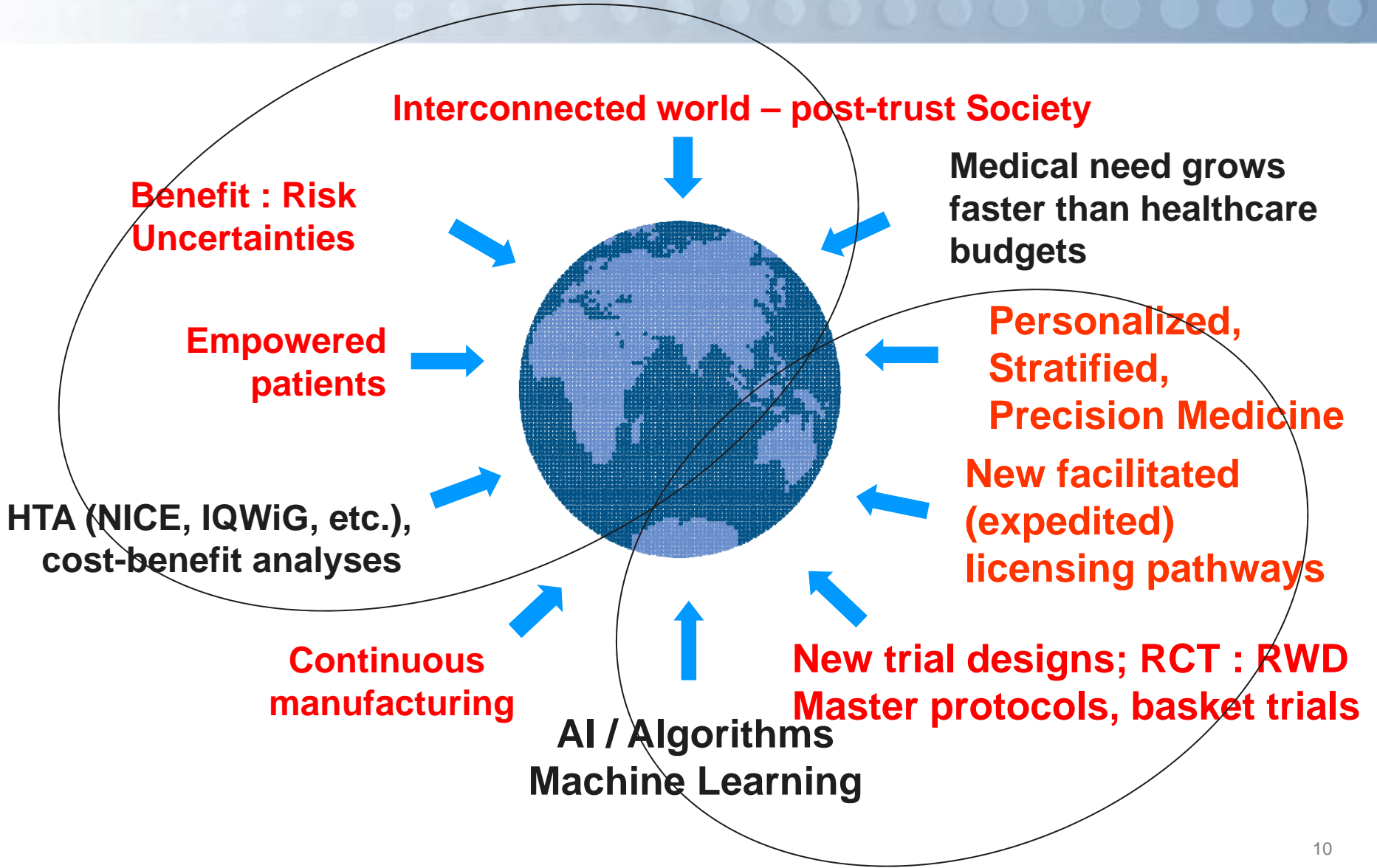
Gesamtdauer Labelling-Phase



NA NAS: Für ca. **8 %** des Aufwandes wird ca. **ein Drittel** der Zeit benötigt.

Gesuchstyp	Labelling-Dauer [KT]	% Labelling an Gesamtzeit
Neue aktive Substanz	157	32%
Bekannte Wirkstoffe <u>mit</u> Innovation	203	38%
Bekannte Wirkstoffe <u>ohne</u> Innovation	150	34%
Indikationserweiterungen	128	31%
Neue Dosierungsempfehlungen, -stärken, galenische Formen	129	34%
Alle Gesuche	144	34%







Review article: Current opinion | Published 13 March 2015, doi:10.4414/smw.2015.14120

Cite this as: Swiss Med Wkly. 2015;145:w14120

Only conflicts of interest?

Reto Obrist

Former director / chief physician, Cantonal Oncology Department, Valais, Switzerland

cation. In the words of Nassim Taleb: “The relation of a career scientist to science corresponds to the relation of a prostitute to love” [22].

Summary

The current situation of the biomedical sciences is critically discussed. It can be summarized as follows:

1. We have to acknowledge the presence of a **serious credibility problem**, which might undermine the foundations of medical science. (“Sliding on a slippery slope”)
2. Multiple forces going beyond simple conflicts of interest push medical science further down the slippery slope. (“Who is pushing?”)
3. The **public awareness of something seriously wrong with medical science** is mounting on all levels of our multimedia society. (“Looking into the media mirror”)
4. Technical corrective measures may be easily implemented, however, to change an expanding and “successful” science culture actually destroying its own foundations will need a sustained effort by the medical and scientific community on all levels. (“Look away - or act?”)

Key words: *biomedical science; irreproducibility; publication bias; ethical blindness; scientific integrity*

Examples of potential COIs in medical research are:

- Patient care vs doctor / clinical researcher as agent for research;
- Scientific truth vs career opportunities (publication numbers, impact factors, university rankings);
- Science vs marketing (pharma, doctors, publishers);
- Healthcare system costs vs income/expenses of doctors, hospitals, cantons, pharma, insurance).

The common denominator is that a third party is at risk,

Gesuchstyp	Anzahl Gesuche
NA NAS HAM	11
NA BWS mit Innovation	55
NA BWS ohne Innovation	41
NA BWS HAM-KPA	2
NA BWS NKO HAM	3
NA AM Art. 12 Abs. 4 VAZV	20
NA Biosimilar	0
W-AE IE	30
W-AE NDE	8
W-AE NDO	5
W-AE NGF	7
Total	132 (=100%)

Versand
parteiöffentlicher EB
für Verfügungen im 1.
Halbjahr 2017

Fragen > Antworten

- sinnvoll?
- Nutzen : Aufwand?
- Feedback?



Public Meeting on Benefit-Risk Framework Implementation



September 18, 2017

Session 3 – Special Topics in Benefit-Risk Assessment

3:15 – 3:30 pm

Advancing Decision Science Methods for Regulatory Use

Baruch Fischhoff, Ph.D.,
Carnegie Mellon University

3:30 – 3:45 pm

Potential Areas for Quantitative Benefit-Risk Approaches

Richard Forshee, Ph.D.
OBE, CBER, FDA

3:45 – 4:00 pm

Communicating Benefit-Risk to the Public

Lisa Schwartz, M.S., M.D., & Steve Woloshin, M.S., M.D.
Dartmouth Institute for Health Policy and Clinical Practice and Dartmouth Medical
School

4:00 – 4:30 pm

Panel Discussion and Q&A

Panel includes Session 3 Presenters plus

Peter Stein, MD,
OND, CDER, FDA

Bennett Levitan, M.D. Ph.D.
Janssen R&D Pharmaceutical Companies of Johnson & Johnson

Clause Bolte, M.D.
Swissmedic

EFFICACY - M4E(R2)

When **describing** the benefit-risk assessment, the following additional aspects should be considered:

- The impact of the therapeutic context on the assessment, which may include information on the **patient perspective** if available. This discussion should consist of the following:
 - how the **severity of disease** and expected benefit influence the **acceptability of the risks** of the therapy.
 - how the medicinal product addresses a medical need.
- Key aspects of risk management that are important in reaching a favourable benefit-risk assessment, such as:
 - the proposed **labeling**.
 - whether non-responders can be readily identified allowing them to discontinue treatment.
 - other **risk management** activities, such as registries or **restricted distribution** systems.

There are many approaches available for conducting the benefit-risk assessment. This guideline **does not prescribe a specific approach**. A **descriptive approach** that explicitly communicates the interpretation of the data and the benefit-risk assessment will generally be adequate. An applicant may choose to use **methods that quantitatively** express the underlying judgments **and uncertainties** in the assessment. Analyses that compare and/or weigh benefits and risks using the submitted evidence may be presented. However, before using any method,¹⁴

2017 ASCO ANNUAL MEETING

Making a Difference in Cancer Care *WITH YOU*

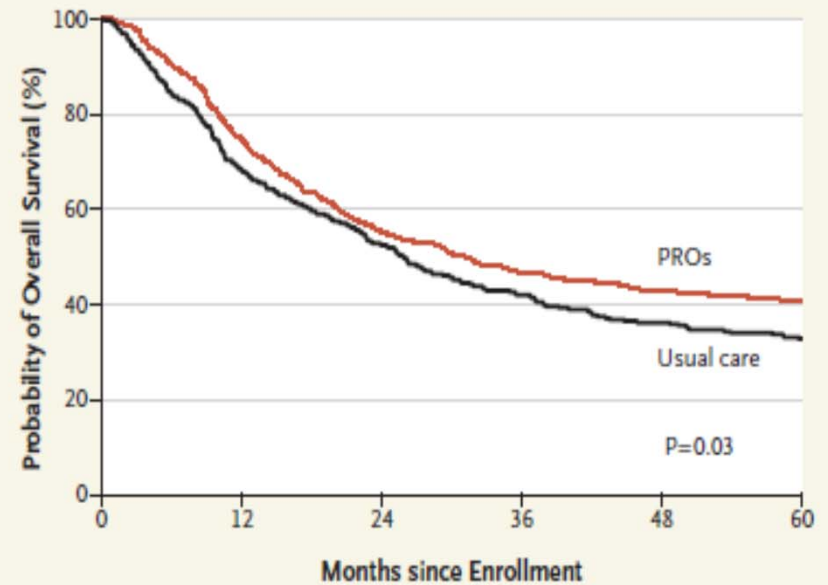
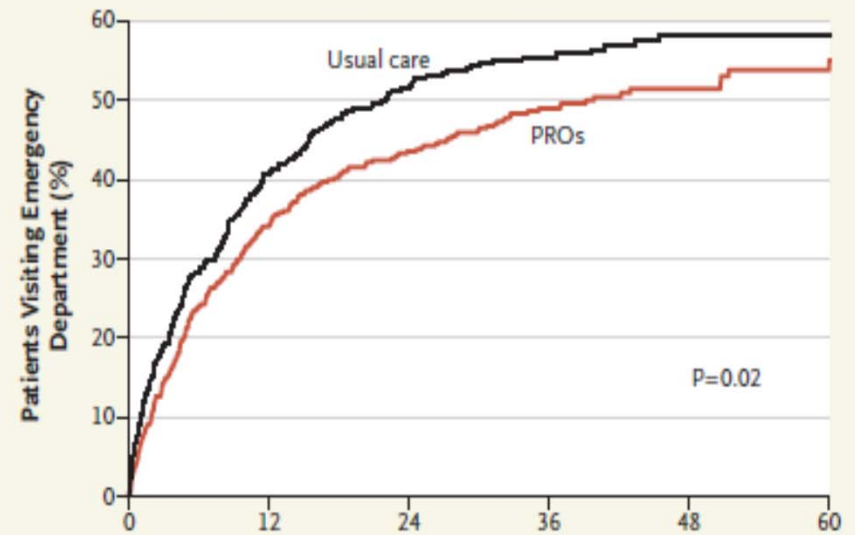
1:00 PM - 4:00 PM Plenary Session

Plenary Session Including the Science of Oncology Award and Lecture

Location: Hall B1 (Simulcast Location: Hall D1)

Overall survival results of a randomized trial assessing patient-reported outcomes for symptom monitoring during routine cancer treatment.

(Abstract LBA2) E. M. Basch, A. M. Deal, A. C. Dueck, A. V. Bennett, T. M. Atkinson, H. I. Scher, M. G. Kris, C. A. Hudis, P. Sabbatini, D. Dulko, L. J. Rogak, A. E. Barz, D. Schrag



Total	766	554	415	344	308	288
PROs	441	331	244	207	190	181
Usual	325	223	171	137	118	107

Emergency Department Visits and Probability of Survival Associated with Integrating Patient-Reported Outcomes (PROs) into Cancer Care.

Interactions between traditional Chinese medicines and Western therapeutics.

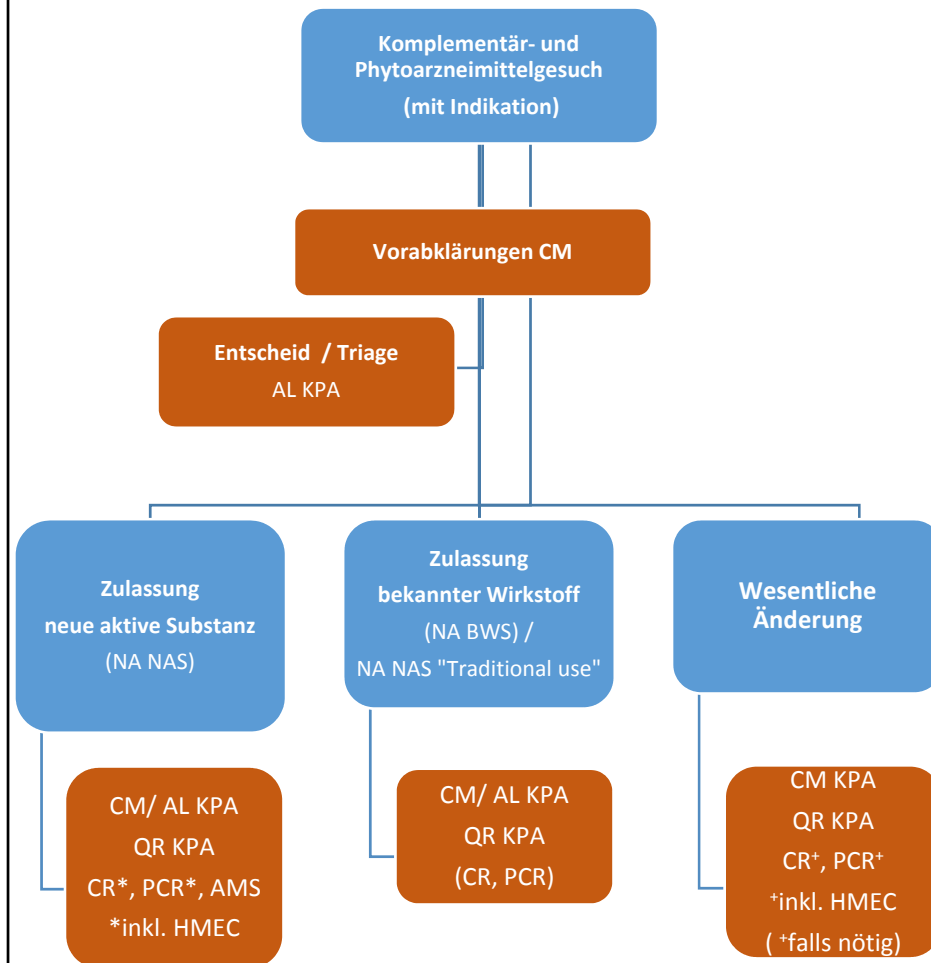
[Curr Opin Drug Discov Devel.](#) 2010 Jan;13(1):50-65.
Interactions between traditional Chinese medicines and Western therapeutics.

[Chan E1](#), [Tan M](#), [Xin J](#), [Sudarsanam S](#), [Johnson DE](#).
 Emiliem Inc, Emeryville, CA 94608, USA.

Abstract

Traditional Chinese medicine (TCM) is a holistic approach to health that attempts to bring the body, mind and spirit into harmony. ... **An integration of the traditional Chinese and Western systems of medicine has begun in multiple medical centers internationally**, and there is increasing evidence that several herbs and combinations of herbs used in TCM impart important pharmacological effects. ... when TCM is used in combination with other drugs. **Herb-drug interactions are similar to drug-drug interactions in terms of their effects on ADME properties.**

Improvements in the knowledge of the molecular targets and metabolic pathways ... will lead to the development of rational approaches for the safe combination of healthcare systems from different cultures.



Eingefügt aus

<https://www.ncbi.nlm.nih.gov/pubmed/20047146?report=abstract>

«Öko»-Bienen-TAM
(z.B. organische Säuren)

MUMS-Status for
Gene-Therapy
(Panion's Epilepsy
Project in Dogs)

SWISSmedic
Schweizerisches
Heilmittelinstitut

FDA



Bundesamt für Lebensmittelsicherheit und
Veterinärwesen BLV

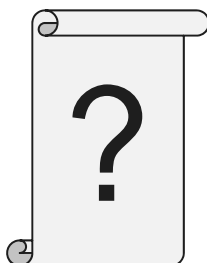
EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

STAR
(Einsatz von AB in
der Tiermedizin)

Stem-Cell Therapy in
Dogs & Horses
(Expert Group on Veterinary
Novel Therapies)



Vereinbarung zum Beitrag für das Buchprojekt «Die Schweiz im Jahr 2030»



- **(post-)Trust**
- **ZL Verfahren**
- **Datenquellen**
- **Evaluation - B:R:U**
- **Value**

