

AGAH and Club Phase-I: 3rd Joint Annual Meeting

Managing challenges in early drug development: Biologicals and small molecules

**Tuesday, April 28, 2009 and
Wednesday, April 29, 2009**

ESPACE TETE D`OR, LYON, FRANCE

Accreditation of Phase-I Units in Germany

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The current legal status in Germany is ...

- No legal state request for accreditation of phase-I units
- No possibility for a voluntary accreditation „on demand“ ...
- 1st take home message: **We don't have it**

The future legal status in Germany will be ...

- No legal state request for accreditation of phase-I units
- No possibility for a voluntary accreditation „on demand“ ...
- 2nd take home message: **We won't get it**

Agenda

1. Legal background
2. Correlation of Accreditation and Quality/Safety
3. Dis/Advantages of non-accreditation
4. Alternative proofs of quality and safety
5. SUMMARY
6. CONCLUSION

1 - Introduction: The legal basis in Germany (1)

- European Directive 2001/20/EC
- German Drug Law (AMG, Novel 14)
- GCP-Directive 2005/28/EC
- Declaration of Helsinki (**DoH, Seoul 2008?**)
- German Medical Association's Professional Code of Conduct (Berufsordnung für Ärzte)

1 - Introduction: The legal basis in Germany (2)



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- Highest German State Competent Authorities in Drug Development are: BfArM Bundesamt für Arzneimittel; small chemical molecules) and PEI (Paul Ehrlich Institut; biologicals)
- BUT: Their responsibility covers IMPD and the clinical trial plan as such, NOT the local site of performance
- Surveillance of all producing or performing pharmaceutical Units or CROs are complete responsibility of the different German Federal States
- **IMPORTANT NOTE:** German State Authorities are legally not in the position to define Rules and Regulations on Accreditations for local Clinical Units

1 - Introduction: The legal basis in Germany (3)



- Germany is split up in 16 Federal States (Bundesländer) and the surveillance of producing or performing sites (CROs) is in the sole responsibility of **local Competent Authorities (Länder-behörden)** and also local ECs (as registered in the Federal States)

1 - Introduction: The legal basis in Germany (4)

- Toxicological data to support human use, updated as information in the IB, protocol and CRFs
- ... plus all relevant data in the format of an IMPD for the German State Competent Authorities (CA)
- Receipt of EudraCT-No.
- Written favorable opinion of a local (Federal) EC
- Written authorisation by the German State Competent Authority (no grounds for non-acceptance raised)
- Information of local (Federal) Competent Authorities (Regierungspräsidium, Amtsapotheker)

2 - Accreditation versus quality and safety

- Does Accreditation really certify quality and safety?
 - Is Absence of Accreditation Equal to Poor Quality?
- Would the TeGenero-Case have been avoided with an Accreditation?
- Is it likely that the Unit that performed the trial would not have been accredited?

3 - Dis/Advantages of Presence or Absence of Accreditation?

- Would Germany (or all other non-accrediting European Countries) end up with a quality/safety disaster?
- Are financial losses to be expected?
 - Comparison with DIN/ISO certification

4 - Do we see any alternatives for Accreditation?

- Central / Local inspections of Competent German Authorities as performed
- Track records of FDA/AFSSAPS inspections as performed
- Track records of several company audits and inspections
- Trial initiation visit of sponsors with inspection of proven training and experience of staff in FIM
- Sponsors inspection of proven experience of staff with compound/class

5 - SUMMARY

- Only questionable improvement of quality in already qualified sites
- Possible improvement in hindering unqualified sites from participation (Typical job of the sponsor / EC)
- Definite additional increase of bureaucracy and cost
- Possible assymetria from site to site within Germany, if the procedure is not centralized nationwide
- Possible assymetria within Europe, if the procedure is only on a national state basis

6 - CONCLUSION

- If Accreditation should make sense, then it should be
 - On an identical legal basis all over Europe (centralized procedure?),
 - No local (Federal) competent authorities be involved in Germany
 - Standards and their control should be performed by scientific bodies – NOT regulatory bodies – due to higher practical experience
- Try to avoid additional bureaucracy as much as possible