

## *CONCEPT PAPER*

In an effort to support Member States in ensuring that rare disease patients have access to the same quality treatments as other patients, the EU adopted the Orphan Drug Regulation (141/200/EC) in year 2000. A similar philosophy was at the origin of the document “Improving Access to Orphan Medicines for all Affected EU Citizens” included in the conclusions and recommendations of the EU High Level Pharmaceutical Forum that were adopted by the Member States on 2<sup>nd</sup> October 2008. Soon after, on 11<sup>th</sup> November 2008, the European Commission adopted its Communication on “Rare Diseases: Europe's Challenges” (COMM (2008) 679) calling for specific actions and giving clear directions to present and future community activities in the field of rare diseases. The overarching objective of these initiatives is to further improve the access and equity to prevention, diagnosis and treatment for patients suffering from a rare disease throughout the European Union. Further to this milestone document, on 8th June 2009, the EU Council adopted a Council Recommendation to undertake specific actions in the field of rare diseases. Both documents mention the common assessment of the clinical added-value of orphan drugs.

It is in this political framework that the EU rare disease patient community - represented by the European Organisation for Rare Diseases (EURORDIS) - adopted a “Proposal for the Practical Implementation of Policy Principles to Improve Access to Orphan Drugs in the EU” in September 2009. This proposal was echoed by the European pharmaceutical industry in the EuropaBio and European Biopharmaceutical Enterprises (EBE) document: “Industry Recommendations and Suggestions for the Practical Implementation of Policy Principles to Improve Access to Orphan Medicinal Products in the EU” issued on 25<sup>th</sup> November 2009.

In 2010, in line with all the above initiatives, the European Commission (DG SANCO) and the Executive Agency for Health and Consumers launched a Call for Tender to propose a methodology for a relative effectiveness assessment in order to facilitate timely and effective access to orphan medicines for those affected by a rare condition. This objective is expected to be pursued by increasing collaboration at the European level achieving, if possible, a common methodology for health technology assessments of new orphan medicines. The

commissioned study also aims at identifying and assessing the possible options for the creation of a mechanism to facilitate the exchange of knowledge between Member States and European authorities on the scientific assessment of the relative effectiveness of orphan medicines.

Based on the first two milestones of this study, namely the understanding of the regulatory process for orphan medicines - from Orphan Designation at the European level to reimbursement in the Member State - as well as the description of the Health Technology Assessment expertise used at national level, Ernst and Young, in collaboration with all involved stakeholders, has issued a proposal to be discussed during this 14<sup>th</sup> joint ERTC Workshop.

The future CAVOD mechanism could be set up on the basis of a four-step approach designed to better answer the various needs of the Member States' health technology authorities and their practices:

- 1) an “information exchange” giving Member States the opportunity to access the most comprehensive information on an orphan drug, its targeted pathology and the disease epidemiology;
- 2) a “methodology/toolkit” offering Member States a methodological support specific to orphan drugs in order to help them perform their own assessment;
- 3) a “CAVOD analysis assessment report” to assist Member States, with limited time and resources, to perform their own assessment and report;
- 4) an “additional evidence generation” offering Member States and industry recommendations for post-marketing evidence generation.

Within the time frame of the orphan drug life cycle, four points have been identified as key stages in which the CAVOD mechanism could be helpful to Member States:

1. prior to the opinion of the CHMP,
2. between the positive opinion of the CHMP and the EC marketing authorization,
3. six to twelve months after the marketing authorization and
4. a couple of years after the marketing authorization.

Notably, the attendees will be invited:

- to comment on the Ernst &Young proposal of a specific mechanism on the clinical added-value of orphan medicines,
- to help define the most appropriate structure to perform such evaluation, in consultation with the European Commission competent Units, the European Union Committee of Experts on Rare Diseases (EUCERD), the EMA, the COMP and other EMA Committees (CHMP, CAT and PDCO),
- to comment on the recommendations that should be formulated regarding the principal tasks of this mechanism for non-binding Common Assessment Reports of Orphan Medicines approved at the EU level and for setting up the modus operandi of the dialogue with Member States to facilitate coordination of possible additional national requirements,
- to propose the best possible articulation between the post-marketing evidence generation plan of the Clinical Added-Value of Orphan Medicines and the CHMP post-marketing obligations.

This meeting, the third and last in the context of the DG SANCO tender, will help to draft and finalise the Final Recommendation Report, including a format for the Common Assessment Report for the scientific assessment of the relative effectiveness of orphan medicines.

Since the CAVOD project aims at taking into account and building on the basis of, and in partnership with previous existing and simultaneous initiatives on orphan drug development and market access, representatives from initiatives such as the EUnetHTA joint action, from the Corporate Social Responsibility project with DG Enterprise, from centers of expertise for rare diseases & European Reference Networks (ERN), EUCERD, have also been invited to attend this meeting and express their views on the proposed mechanism.

All involved parties expect that the CAVOD mechanism will really contribute to building bridges and to developing a continuum between pre-marketing authorization practices (clinical development) at EU level and post-marketing authorizations steps at Member State level, in order to help to bridge the gap between regulators and HTA bodies. This mechanism

is expected to finally ensure that all EU patients affected by rare diseases have a timely access to their newly authorised orphan medicines.