

## PHV-4 Version 9 ELECTRONIC REPORTING OF ADVERSE DRUG REACTIONS

As of 1st September 2023, this Guideline shall supersede PHV-4 version 8.

The Guideline is issued on the basis and in accordance with the provision of Section 91 paragraph 4 and Section 93a of Act no. 378/2007 Coll., on Pharmaceuticals.

The Guideline concerns the reporting of suspected adverse reactions to medicinal products in their post-authorisation period, i.e. those sent to the EVPM module of the EudraVigilance database. The ADR reports from clinical trials (SUSARs) sent to the EVCTM module of the EudraVigilance database follow the relevant guidances of EMA and the Clinical Trials Department of SÚKL.

**The Guideline is legally binding.**

Amendments in this Guideline:

- Specify the group of ADR reports to which the Guideline applies
- Repeal information on the no longer valid R2 format for ADR reporting
- Modify the process for submitting literature articles
- Clarify the requirements for follow-up requests

### 1. Introduction and general provisions

#### **1.1 Purpose of the Guideline specification**

The Guideline specifies the rules of electronic exchange of adverse reaction reports concerning medicines for human use via the EudraVigilance (EV) system. The Guideline is intended for marketing authorization holders and organizations that perform electronic reporting of adverse reaction reports in format E2B (R3) on behalf of marketing authorization holders. The content and general rules of reporting are governed by the applicable legal regulations and guidance of SÚKL and the Agency.

#### **1.2 List of abbreviations**

<b>ACK</b>	acknowledgement message sent by a report receiver to a report sender
<b>ADR</b>	adverse drug reaction
<b>EEA</b>	European Economic Area
<b>EMA</b>	European Medicines Agency, hereinafter also the “Agency”
<b>EV</b>	EudraVigilance
<b>EVCTM</b>	EudraVigilance Clinical Trial Module
<b>EVPM</b>	EudraVigilance Post-Authorisation Module
<b>FU</b>	follow-up report
<b>GVP</b>	Guideline on good pharmacovigilance practices
<b>ICH</b>	International Conference on Harmonization
<b>ICSRs</b>	Individual Case Safety Reports
<b>ID</b>	Identifier in the EudraVigilance system
<b>ISO</b>	International Organization for Standardization
<b>MAH</b>	Marketing Authorisation Holder
<b>SÚKL</b>	State Institute for Drug Control
<b>SUSAR</b>	Suspected unexpected serious adverse reaction

#### **1.3 Legislative and standardisation base of the guideline**

Act No. 378/2007 Coll., on Pharmaceuticals and on Amendments to Some Related Acts, as amended (hereinafter the “Pharmaceuticals Act” or the “Act”)

Decree No. 228/2008 Coll., on the marketing authorisation of medicinal products, as amended

Regulation (EC) No. 726/2004 of the European Parliament and of the Council of 31 March 2004 laying down Community procedures for the authorisation and supervision of medicinal products for human and veterinary use and establishing a European Medicines Agency

Guideline on good pharmacovigilance practices: Annex 1 - Definitions

Guideline on Good Pharmacovigilance Practices Module VI: Management and reporting of adverse reactions to medicinal products

Note for guidance – EudraVigilance Human – Processing of safety messages and individual case safety reports (ICSRs) including other EU guidelines and ICH standards (in particular E2B, M1 and M2).

Implementation Guide for Electronic Transmission of Individual Case Safety Reports (ICSRs): E2B(R3) Data Elements and Message Specification

EU Individual Case Safety Report (ICSR) Implementation Guide

Announcement of the EMA Management Board - Confirmation of the mandatory use of the ISO Individual Case Report standard based on ICH E2B(R3) modalities and related ISO standard terminology, EMA/561671/2019

Mandatory use of ISO ICSR/ICH E2B(R3) and EDQM terminology for Dosage Forms (DF) and Routes of Administration (RoA), EMA/580321/2021 Rev 1

SÚKL Guideline PHV-6 - SÚKL requirements for reporting changes in the PSMF, for appointing the qualified person for pharmacovigilance and for appointing the contact person for pharmacovigilance issues in the Czech Republic

Further details can be found in the relevant ongoing Q&A documents published on the EMA website.

## 2. Clarification of definitions in the area of the electronic interchange of reports

**EudraVigilance** – a database and a system for electronic interchange of reports within the EEA, established and managed by EMA

**Individual Case Safety Report (ICSR)** – a report of suspected adverse drug reaction

**Acknowledgement (ACK)** – an ichicsrack report in the xml format – a report sent by the recipient of ICSR to the sender, confirming successful processing of the sent report (code AA - CA) or informing about errors preventing the processing of this report (code AE – CR or AR)

**Follow-up of the report** – a complement of the new important additional information to the initially reported ADR report

**MAH** – a marketing authorisation holder of a medicinal product

**Re-routing of ICSRs** – an automatic process done by EMA during which ICSRs sent to EV database by MAHs are re-routed (re-sent) to particular NCAs in the EEA down by the country of a (main) reporter.

## 3. Method and particulars of reporting

**An electronic report** shall mean an individual case safety report in the format defined by the ISO ICH E2B(R3) guideline, the individual items of which are described by the ICH ICSR M2 guideline and E2B(R3) Implementation Guide. Reports which do not comply with this definition shall be, for the purposes of this guideline, referred to as **non-electronic reports**, even if they are sent electronically (e.g. by e-mail).

**Electronic reporting** is defined as the transfer of the ichicsr message in the xml format between the sender and recipient using the EudraVigilance system, and subsequent transfer of the Acknowledgement (ACK) from the recipient to the sender. The ACK format is also defined by the ICH M2 guideline and E2B(R3) IG.

Electronic report submission is considered successful and completed only if the sender of the message or report receives an ACK in the correct format showing the value of AA – CA.

Since **22 November 2017** (the date of the new EudraVigilance system go-live) all ADR reports received from HCPs or consumers by SÚKL **are sent to EudraVigilance database** from the production ID CZSUKL in accordance with the rules given by the Pharmaceuticals Act § 93c (3) as follows:

<b>All CZ serious reports</b>	<b>Within 15 days after report receipt</b>
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All CZ non-serious reports	Within 90 days after report receipt
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Since 22 November 2017 SÚKL **has not resent any ADR reports** received by SÚKL from HCPs or consumers to MAHs. These reports are available for MAHs in EudraVigilance database in the extent given by EV Access Policy.

At the same time since 22 November 2017 **SÚKL has not accepted** any ICSRs sent by MAHs, MAHs submit their ICSRs directly to the EV database (to ID EVHUMAN for reports to EVPM module and to ID EVCTMPROD for reports to EVCTM module) within the scope of the centralised reporting. These reports are obtained by SÚKL using the EMA re-routing function.

When processing reports which are originated in CZ and are submitted to the European database in accordance with §93a (2) of the Pharmaceuticals Act, SÚKL shall apply all the rules for their processing and quality assessment as specified in GVP Module VI (the version in force).

According to guideline PHV-6 MAH is obliged to appoint a contact person for pharmacovigilance issues in the Czech Republic. Their primary responsibility is to ensure communication with SÚKL, including in the area of ICSR reporting, the contact person for pharmacovigilance issues is the primary contact for issues related to ICSR reporting from the Czech Republic (ICSR data quality issues, technical problems, follow-up requests from SÚKL).

#### 4. Specific requirements for the reports originated in CZ:

##### **4.1 Case narrative in reporter's native language**

For ICSRs from the Czech Republic sent to the EudraVigilance database it is required by SÚKL to provide information on Case narrative and Reaction/Event as reported in native reporter's language in case they are available to MAH. Such information should be given in the form of verbatim text according to the report source documents in appropriate E2B (R3) fields (Case Summary and Reporter's comments Text (H.5.r.1a) and Reaction/Event as reported by the Primary Source in Native Language (E.i.1.1a). It is also important to add the language codes to both fields. – in H.5.r.1b and E.i.1.1b fields.

The obligation to fill in case narrative in the native language of the reporter (field H.5.r.1a Case Summary and Reporter's Comments) does not apply to reports from the literature. In this case, a literature article is considered as a sufficient description of the case in the native language; it is not necessary to include it or its summary in the report.

The obligation to fill in the reactions as reported by the reporter (field E.i.1.1a Reaction / Event) in the native language of the reporter, however, still applies to reports from the literature.

The requirement is based on EU ICSR Implementation Guide document, ***1.C.3.4 Use of local Language in Reaction/Event section and Case Summary section.***

##### **4.2 Literature article submission to SÚKL**

In accordance with GVP Module VI, SÚKL can ask the MAH which transmitted to EudraVigilance the initial ADR report originated from scientific literature (where the occurrence country or the primary source country is the Czech Republic) to provide a copy of the source literature article.

The article is sent to the person who requested it in the format available to MAH as an e-mail attachment, and in a copy to the address: [farmakovigilance@sukl.cz](mailto:farmakovigilance@sukl.cz).

### **4.3 Follow-up request**

SÚKL accepts MAHs' follow-up (FU) requests to the reports which have been sent to EV system by SÚKL. Requests have to be always substantiated, SÚKL with reference to the GVP Module VI will not accept routine FU requests.

The following situations are covered in as reasons for FU process initiating:

- important additional information is necessary for case evaluation or reconciliation
- clarifications are needed regarding inconsistent data within ICSRs
- there is a need to obtain further information in the context of the validation of a signal, the evaluation of a safety issue and so on

The FU request is to be sent by e-mail to the e-mail address [farmakovigilance@sukl.cz](mailto:farmakovigilance@sukl.cz)

The request has to contain worldwide unique case identification number of the report which is going to be followed-up; it has to include the justification for this request; it has to be sent in the form of clearly formulated questions. It must not contain repetitive questions to facts which have already been stated by the reporter in the ICSR. The requests in the form of a questionnaire will also not be accepted. In the case SÚKL obtains the requested information from the reporter, follow-up is processed by SÚKL, the ICSR is sent to EV database only and will thus be available to the MAHs.

On the other hand, MAH could be asked by SÚKL to follow-up the ICSR which has been sent to EV database by the MAH, in reasonable cases described above. For that purpose, SÚKL will contact MAH's contact person for pharmacovigilance issues. The elaborated FU is submitted directly to the EV database by the MAH, FU is going to be re-routed to SÚKL by EMA afterwards.