Impact of the 2012 pharmacovigilance legislation on the harmonisation of DHPCs in the EU

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Declaration of interest: This study was performed under the umbrella of Copenhagen Centre for Regulatory Science (CCORS). CCORS is a cross-faculty university anchored institution involving various public (Danish Medicines Agency, Copenhagen University) and private stakeholders (Novo Nordisk, Lundbeck, Ferring pharmaceuticals, LEO Pharma) as well as patient organisations (Rare Diseases Denmark). The centre is purely devoted to the scientific aspects of the regulatory field and with a patient-oriented focus and the research is not company-specific product or directly company related.

Introduction

Background

Direct healthcare professional communication (DHPC) is one of the most used measures to manage post-marketing drug risks in the EU. Previous research showed that there are substantial differences between countries for DHPCs published before 2013.

Objectives

The aim of the study was to analyse the content and timing of DHPCs sent out in Denmark and United Kingdom during January 2007-December 2016 in order to see if and how the implementation of the new EU pharmacovigilance legislation in 2012 have had an impact on the publication practice between the countries.

Methods

Data collection

All DHPCs from January 2007 to December 2016 were retrieved from national competent authorities, either from their websites (DKMA 2013-2017 and Mhra 2007-2016), or through a request for information (DKMA 2007-2012). Letters were categorized as safety-related or not, and date of publication, drugs (ATC), EMA involvement and authorisation type (central/national) were recorded. For safety letters, adverse events (AEs, MedDRA) involved and recommendations were recorded.

Pairs of DHPCs published in both countries were identified based on ATC and publication date (<2yr), see Figure 1.

Within pairs timing of publication, AEs and recommendations were compared. DHPCs on drugs marketed in one country only were excluded.

Manual comparison of the DHPCs

All matching DHPCs from Denmark and United Kingdom (‘C’ in Figure 1 and 2) were additionally scrutinized and compared manually, and registered if the content of the letters was the same or not.

Results

The number of DHPCs per year as well as the proportion of safety-letters fluctuated over time, with a peak in total number in 2013 in both countries, see Figure 3.

Among the safety letters, a significant increase was observed with respect to the number of releases available in both countries before (38/103, 37%) and after (73/101, 72%) 2012 (p<0.0001), see Figure 4.

With respect to content, 118/119 DHPC pairs in group C (99%) concerned the same letters. As a result, no changes over time were observed in the proportion of same letters.

Conclusion

The pharmacovigilance legislation impacted on number of identical releases available in both countries and has thereby led to more harmonization between these two European countries with respect to DHPC publications.