

CMA

Conditional Marketing Authorisation

How early access to medicines has helped patients from 2006 to 2016

What it is

- ▶ an EU early access route for medicines
- ▶ for medicines that fulfil an unmet medical need
- ▶ only granted if the benefit of immediate availability for patients is greater than the risk of less comprehensive data than normally required
- ▶ valid for a year; can be renewed annually
- ▶ comprehensive data is generated post-authorisation, to agreed timelines

Scope includes

- ▶ medicines to target seriously debilitating or life-threatening diseases
- ▶ medicines to fight public health threats in emergency situations (e.g. a pandemic)
- ▶ medicines to treat rare diseases

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CMAAs

- 24 Target debilitating or life-threatening conditions
- 14 Are orphan medicines
- 3 Address emergency situations linked to a public health threat

By therapeutic area



17 Oncology



9 Infectious diseases



3 Neurology



1 Ophthalmology

107 post-authorisation obligations

(of these, 57 obligations were fulfilled before June 2016)

Categories of specific obligations imposed to companies



- 78 Final results from clinical studies or pool of studies
- 9 Interim results of a clinical trial
- 8 Additional analysis
- 3 Quality data
- 9 Other measures

How timely was the submission of specific obligation results?



- 33 Due date +/- 1 month
- 15 Early (1-6 months)
- 4 Early (6-12 months)
- 1 >1 year early
- 2 Late (1-6 months)
- 2 Late (6-12 months)

>90%

of completed specific obligations did not have major changes to their scope

≈70%

of specific obligations were completed within specified timelines

By year

EMA's Committee for Medicinal Products for Human Use (CHMP) reviews all data collected annually to decide about a further renewal of the CMA or its conversion into a standard marketing authorisation.

On average, a CMA is converted into a standard marketing authorisation **within 4 years**.

