

## MISSION

To maintain a leadership role in identifying and applying scientific principles for the purpose of advancing regulatory and HTA policies and processes in developing and facilitating access to medicinal products.

## Key Activities

**International Workshops:** Meetings for members are convened at which invited participant interactions are optimised to facilitate networking, constructive discussion, recommendations and actions.

**CIRS Research Projects:** Specialised research and surveys are carried out among leading pharmaceutical companies and regulatory and HTA agencies with expert analyses and interpretation of the findings.

**Identification of and Advocacy for Best International Practices:** Using findings from our Workshops and research projects CIRS interacts with companies, regulators, HTA agencies and other international organisations to promulgate efficiencies in global medicine development.

**Publications and Presentations:** Reports are prepared from Workshops and projects. Dissemination of findings and recommendations through the R&D Briefing series, conference presentations, papers in peer-reviewed journals and the CIRS website are key aspects of the CIRS educational communication mission.

## MEMBER COMPANIES AND PARTICIPATING REGULATORY AUTHORITIES

### Member Companies

| USA                   | Europe               | Japan          |
|-----------------------|----------------------|----------------|
| AbbVie                | Actelion             | Astellas       |
| Allergan              | AstraZeneca          | Daiichi-Sankyo |
| Amgen                 | Bayer                | Eisai          |
| Biogen-Idec           | Boehringer Ingelheim | Takeda         |
| Celgene               | GlaxoSmithKline      | Zeria          |
| Eli Lilly and Company | Merck Serono         |                |
| Johnson & Johnson     | Novartis             |                |
| Merck                 | Novo Nordisk         |                |
| Pfizer                | Roche                |                |
| Shire                 | Sanofi               |                |
|                       | Servier              |                |

### HTA and Coverage Bodies

| Country         | Organisation  |
|-----------------|---|
| Australia       | PBAC  |
| Belgium         | INAMI; KCE  |
| Brazil          | CONITEC   |
| Canada          | CADTH; DSEN, Canadian Institutes of Health Research, INESSS, Alberta Health Services                                    |
| Croatia         | AAZ   |
| Denmark         | Danish Health and Medicines Authority   |
| England, Wales  | NICE  |
| Europe          | EUnethHTA   |
| France          | HAS   |
| Finland         | THL   |
| Italy           | AIFA  |
| Lithuania       | VASPV   |
| Norway          | NOKK  |
| Poland          | AHTAPol   |
| Portugal        | INFARMED  |
| Scotland        | Scottish Medicines Consortium   |
| Spain           | CAHIAQ, Osteba  |
| Sweden          | TLV   |
| Switzerland     | BAG   |
| The Netherlands | ZIN   |
| United States   | UnitedHealth Group; TEC, Blue Cross/Blue Shield Association; Kaiser Permanente Institute for Health Policy; AHRQ; OPTUM |

### Participating Regulatory Authorities

| Country              | Authority     |
|----------------------|---------------|
| Argentina            | ANMAT         |
| Australia            | TGA           |
| Brazil               | ANVISA        |
| Canada               | Health Canada |
| Chile                | ANAMED        |
| China                | SFDA; CDE     |
| Chinese Taipei       | TFDA; CDE     |
| Colombia             | INVIMA        |
| Egypt                | DPPC          |
| EU                   | EMA           |
| India                | CDSCO         |
| Indonesia            | NAFDC         |
| Israel               | MoH           |
| Japan                | MHLW, PMDA    |
| Jordan               | JFDA          |
| Kuwait               | KDFC          |
| Malaysia             | NCPB          |
| Mexico               | COFEPRIS      |
| Oman                 | MoH           |
| Peru                 | DIGEMID       |
| Philippines          | DOH, FDA      |
| Qatar                | SCH           |
| Saudi Arabia         | SFDA          |
| Singapore            | HSA           |
| South Africa         | MRA           |
| South Korea          | MFDS          |
| Sweden               | MPA           |
| Switzerland          | Swissmedic    |
| Turkey               | MARA          |
| United Arab Emirates | MoH           |
| United Kingdom       | MHRA          |
| United States        | FDA           |



### Scientific Advisory Council

**Chair:** Professor Sir Alasdair Breckenridge, Former Chairman, MHRA, UK  
**Vice Chair:** Barbara J. Sabourin, Director, TPD, Health Canada  
**Dr Petra Dörr**, Deputy Exec. Dir., Swissmedic  
**Prof Hans-Georg Eichler**, Senior Medical Officer, EMA  
**Dr John Lim**, Deputy Director of Medical Services, MOH, Singapore; Executive Director, Centre of Regulatory Excellence, Duke-NUS, Singapore  
**Dr Richard Moscicki**, US FDA  
**Prof Robert Peterson**, Exec. Dir. DSEN, Canadian Institutes of Health Research  
**Dr John Skerritt**, National Manager, TGA,  
**Tomas Salmonson**, Chair, CHMP/EMA

**Dr Mary Baker**, Pres., European Brain Council  
**Dr Murray Lumpkin**, Senior Fellow, Bill and Melinda Gates Foundation  
**Prof Stuart Walker**, Founder, CIRS

**Dr Stephane Andre**, Head of EU/ROW Reg. Affairs, F. Hoffmann-La Roche Ltd  
**Dr Jay T. Backstrom**, SVP, Regulatory Affairs and Pharmacovigilance, Celgene Corporation  
**Adrian Griffin**, Vice President for HTA Policy Johnson & Johnson  
**Dr Tim Garnett**, CMO, SVP, Eli Lilly  
**Dr Edmund Harrigan**, SVP, Worldwide Regulatory and Safety Strategy, Pfizer  
**Dr Paul Huckle**, Chief Regulatory Officer and SVP, GlaxoSmithKline  
**Dr David Jefferys**, SVP, Head of Global Regulatory, Eisai Europe Ltd  
**Dr Ronald Robison**, VP, Reg Affairs, Medical Services, R & D, AbbVie  
**Dr Joseph Scheeren**, Head of Global Reg Affairs, Bayer Healthcare Company Ltd

### Advisory Management Committee

**Chair:** Prof Robert Peterson, Exec. Dir, DSEN, Canadian Institutes of Health Research

**Dr Carmen Bozic**, SVP, Clinical and Safety Sciences, Biogen-IDEC  
**Robin Evers**, SVP, NovoNordisk  
**Paul Huckle**, Chief Regulatory Officer and SVP, GlaxoSmithKline  
**Dr Hilary Malone**, Head, Global Reg Affairs, Sanofi  
**Dr Ronald Robison**, VP, Reg Affairs, Medical Services, R & D, AbbVie  
**Dr Joseph Scheeren**, Head of Global Regulatory Affairs, Bayer Healthcare Company  
**Lawrence Libertini**, Executive Director, CIRS  
**Dr Neil McAuslane**, Director, CIRS  
**Prof Stuart Walker**, Founder, CIRS

### Specialist Advisors to the Executive Director

**Professor Bruno Flamion**, Professor of Pharmacology, University of Namur  
**Dr Thomas Lönngren**, Independent Strategy Advisor, Pharma Executive Consulting  
**Prof Mamoru Narukawa**, Associate Professor Pharmaceutical Medicine, Kitasato University Graduate, School of Pharmaceutical Sciences

## ADVISORY NETWORKS

## TRACKS AND THEMES



Medicine development in the 21st century requires a globally coordinated development, regulatory and access effort. To address the key topics that will impact global medicines development and access, CIRS has organised its activities into two Tracks.

**The Global Development Track:** Designed to address the challenges posed by the need to align global submissions and to fulfil requirements for regulatory reviews across mature and developing jurisdictions.

**The Health Technology Assessment and Market Access Track:** As HTA assessments inform and influence market access, the need to identify the factors that can be built into early medicine development, conducted in concert with regulatory requirements, and that characterise the value of new therapies will be the focus of this track.

**CIRS will address three overlapping themes within these two tracks.**

### *METRICS*

**Theme:** Managing uncertainty and improving predictability

**Goal:** To undertake the collection, curation and analysis of data, information and processes to provide insights into the performance of companies and agencies in the development, review and access of new medicines. These activities are supported by company- and agency-led metrics programmes, topic-specific focused surveys, and collation of supportive public domain information. Findings are communicated through CIRS confidential reports and R&D briefings to enable a clearer understanding of the regulatory and HTA environment for medicines development.

### *QUALITY OF PROCESS*

**Theme:** Improving development and regulatory processes and ultimately, the quality of decision making

**Goal:** Building on CIRS' considerable experience in refining a benefit-risk framework, these activities will focus on developing a framework for a structured, transparent and logical approach to quality decision making. This will be applicable throughout all stages of medicine development and review, including the regulatory and HTA review processes.

### *ALIGNMENT*

**Theme:** To promote convergence within and across organisations and stakeholders.

**Goal:** Activities will assess approaches and identify the building blocks to help regulatory and HTA agencies best use and share resources between and among them. With the participation of the industry in developing these best practices we envision promoting activities that result in more efficient and timely development and access to medicines. Accelerating access while managing the uncertainty associated with medicine development will be a key aspect of these activities. We will work toward an agreement for a flexible, risk-based approach to the development and assessment of innovative therapies.

## 2015 WORKSHOPS



**2-3 February, Chinese Taipei**

*Utilisation of a common benefit-risk framework: Can it facilitate decision-making and improve communication within and across agencies?*

Benefit-risk assessment is the cornerstone of every regulatory decision, irrespective of the type of review and in the future, the use of a benefit-risk framework will be part of good review practices. This Workshop will build on the work that has been accomplished in mature markets and through the ongoing activities of the CIRS *international Summary Approach to Benefit-Risk Evaluation* (ISABRE).

### OBJECTIVES

- Consider how utilisation of a structured systematic benefit-risk framework and its documentation can aid both the process and communication within and across agencies
- Recommend how a benefit-risk framework can best be used to optimise internal decision making and external communication

### Key discussion points

What are the processes, procedures and considerations that agencies undertake to make benefit-risk decisions for their jurisdictions and how this process is documented?

### OBJECTIVES

- Discuss the potential influences on good decision making, both at the review team- and senior-management level
- Identify considerations for companies and agencies when applying or embedding decision frameworks within decision-making processes

### Key discussion points

How are the structured approaches to evaluating the evidence in balancing benefit-risk undertaken within companies and agencies? How are these approaches incorporated into the broader key decision-making processes?



**11-12 June, Washington, DC, USA**

*Exploring approaches to decision making*

Over the last three years, in addition to work to develop a systematic structured approach to benefit risk, CIRS has undertaken a project to identify the important issues that influence quality decision making from both individual and organisational perspectives. As a result of this background research, a draft framework for good decision making in the development and review of medicines has been developed.



**7-8 October, UK**

*Patient's role in informing the decision process for approval and reimbursement of new medicines*

The patient's role in the development, regulation and health technology assessment processes for new medicines continues to grow in importance to all stakeholders. This Workshop will build on CIRS Workshops on this topic conducted during 2012-2014.

### OBJECTIVES

- Improve understanding of the importance of patient involvement
- Identify best practices in the acquisition of patient input
- Recommend methods for leveraging the same patient input for both health technology assessment and regulation

### Key discussion points

What are the learnings from current practices for patient involvement from different HTA and regulatory agencies? How can industry and agencies identify truly representative patient viewpoints? How do reviewers use the various inputs from patients and what weights to patients' perspectives have on final decisions?

## 2015 CIRS ACTIVITIES CALENDAR



| Date         | Activity   | Venue               |
|--------------|--|---------------------|
| 1 February   | 6 <sup>th</sup> Annual Regulators Forum  | Chinese Taipei      |
| 2-3 February | Workshop: <i>Utilisation of a common benefit-risk framework: Can it facilitate decision-making and improve communication within and across agencies?</i> | Chinese Taipei      |
| 11-12 June   | Contemporary Insights Workshop: <i>Exploring approaches to decision making</i>   | Washington, DC, USA |
| 7-8 October  | Workshop: <i>Patient's role in informing the decision process for approval and reimbursement of new medicines</i>  | UK                  |
| 17 November  | Emerging Markets Industry Discussion Meeting   | Heathrow, UK        |
| 18 November  | Global Development Technical Forum   | Heathrow, UK        |
| 19 November  | HTA Industry Discussion Meeting  | Heathrow, UK        |
| 20 November  | HTA Technical Forum: <i>How does the effective use of various kinds of scientific advice support access success?</i>                                     | Heathrow, UK        |

### TENTATIVE WORKSHOPS FOR 2016-2017

| Date                  | Workshop   | Venue |
|-----------------------|--|-------|
| January/February 2016 | Workshop: <i>Building trust across agencies: what activities support alignment of activities?</i>  | TBD   |
| June 2016             | Contemporary Insights Workshop: <i>Communication and social media</i>  | USA   |
| October 2016          | Workshop: <i>Commonality in evidentiary requirement across stakeholders. Has the gap between HTA and Regulatory evidence requirements closed?</i>  | UK    |
| February 2017         | Workshop: <i>Risk-based decision making –What does this mean and what are the underpinning requirements? (Ties in with quality decision making and comparison of various regional (EAC, GCC, APAC) activities for better access to priority medicines)</i> | TBD   |
| June 2017             | Contemporary Insights Workshop: <i>Post approval pharmacovigilance using innovative data sources</i>   | USA   |
| October 2017          | Workshop: <i>Flexible regulatory/access pathway; are we there yet? How does this tie in with personalised medicine and adaptive management? Or Sharing assessment reports and other regulatory or HTA data to expedite reviews and access to medicines</i> | UK    |

## BENEFITS OF MEMBERSHIP

Membership is open to all pharmaceutical companies, in particular those engaged in research and development of new active substances, prescription medicines, devices and biologics with a view to global product development, regulatory affairs and market access.

### The benefits enjoyed by members of CIRS include:

- Be part of the small interactive CIRS Workshops, which provide exceptional learning and networking opportunities where you can interact with peers from industry, regulatory authorities, HTA agencies and academia in an atmosphere of informed and productive discussion
- Full registration and accommodation (excluding travel) for up to three participants at each Workshop (two from the Global Development Track and one from the HTA Track).
- The opportunity to meet and network with senior regulatory personnel from government agencies, international pharmaceutical companies and academia
- The ability to contribute to the direction of the programme of work for CIRS and put forward subjects for discussion and debate at future Workshops as well as topics for surveys and studies
- The opportunity to be nominated for participation in the Advisory Management Committee or the Scientific Advisory Council, Steering Committees and Taskforces
- Exclusive, priority access to
  - Information derived from studies and surveys to which your organisation has contributed
  - Reports and slide presentations from CIRS Workshops
- Early access to
  - Full reports and supportive documents from all Workshops and projects, projects highlighting regulatory and HTA developments, issues and attitudes as a unique information resource
  - Archives of all CIRS publications including survey and Workshop reports and R&D briefings

The fee for each Track entitles the member organisation to all of the benefits of membership described in this brochure and the annual *Agenda*; this includes the full registration and accommodation (excluding travel) for two participants at each Workshop (Global Development Track) and one participant (HTA Track). Additional participants may attend Workshops (space permitting) and will be assessed a registration fee, to cover direct participation costs (conference rate, meals and accommodations, administration and overhead; travel excluded).

CIRS - The Centre for Innovation in Regulatory Science - is a neutral, independent UK-based subsidiary company, forming part of the Intellectual Property and Science business of Thomson Reuters. The mission of CIRS is to maintain a leadership role in identifying and applying scientific principles for the purpose of advancing regulatory and HTA policies and processes. CIRS provides an international forum for industry, regulators, HTA and other healthcare stakeholders to meet, debate and develop regulatory and reimbursement policy through the innovative application of regulatory science. It is governed and operated for the sole support of its members' activities. The organisation has its own dedicated management and advisory boards, and its funding is derived from membership dues, related activities, special projects and grants.

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