COLLEGE TER BEOORDELING VAN GENEESMIDDELEN

Policy document

Direct Healthcare Professional Communications (DHPCs)

MEB 44

October 2024

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2. Introduction

A *Direct Healthcare Professional Communication* (DHPC) is a one-off, additional risk minimisation measure used to directly inform healthcare providers about new, important information regarding a medicinal product. The need to issue a DHPC, accompanied by a proposal for a text in the English language, is usually coordinated at European level (*Pharmacovigilance Risk Assessment Committee* (PRAC), *Committee for Medicinal Products for Human Use* (CHMP), *Coordination Group for Mutual Recognition and Decentralised Procedures – Human* (CMDh)). The Board will then decide whether the DHPC will also be sent in the Netherlands.

This document is based on the *Guideline on Good Pharmacovigilance Practices (GVP) Module XV – Safety communication*, which deals with the situation in the Netherlands. The document describes the procedure involving the implementation of DHPCs in the Netherlands. It also provides instructions for translating the DHPC, for determining the target groups and its digital dissemination. The premise in that respect was that the information contained in the DHPCs should be as useful as possible for healthcare providers, making this additional risk minimisation more effective.

3. Scope of the document

The information contained in this document is based on scientific research (thesis by S. Piening, 2013), feedback from the clinical practice in the Netherlands and the internal 2020 MEB report entitled 'Vision of the future of risk communication'.

This directive provides general recommendations; it is not a detailed work instruction. It offers a framework for the Medicines Evaluation Board (MEB) to deal with DHPCs, and the considerations we make during assessments.

All proposals assume that the Marketing Authorisation Holder (MAH) is responsible for the whole process involving the translation and dissemination of DHPCs in the Netherlands. A Marketing Authorisation Holder may act on behalf of other Marketing Authorisation Holders if several Marketing Authorisation Holders are concerned.

This policy document focusses on communication to the BIG registered healthcare providers with prescribing authority and hospital and other pharmacists (Articles 3 and 36a of the Individual Health Care Professions Act (*Wet BIG*), as these could be the official target groups of a DHPC. With every DHPC, the recipient must be considered as well as the method of information dissemination.

4. Other relevant documents

GVP module XV – Safety Communication (Rev 1)

GVP Annex II – Templates: Direct Healthcare Professional Communication (DHPC) (Rev 1)

5. General guidelines

If a DHPC must be sent in the Netherlands for a particular medicinal product, the Marketing Authorisation Holder must provide the following documents:

- In European procedures: the English version of the approved DHPC;
- A Dutch translation of the approved English version of the DHPC in 'MS Word' format;
- A distribution plan, including the target groups of the DHPC;
- The number of prescribers and/or users of the medicinal product in the Netherlands;
- To publish the MEB news message, one (or more) photographs of the product that is the subject of the DHPC. In a joint DHPC of several Marketing Authorisation Holders, it is up to the concerned Marketing Authorisation Holders to select a suitable photograph of one or more products, provided the name of the active ingredient is clearly visible.

These documents mentioned above cannot be processed as part of an ongoing procedure. Marketing Authorisation Holders must submit these to the MEB as a separate national procedure. This is done in the same way as in other procedures.

The Marketing Authorisation Holder must clearly state in the accompanying letter that it involves the submission of a DHPC. If the Marketing Authorisation Holder has any questions about submitting the documents, it can contact the MEB case manager of the medicinal product.

Once the Dutch translation of the DHPC has been approved, the Marketing Authorisation Holder shall promptly send a version of the DHPC in a Word document with any personal data removed. The MEB will then publish said document on its website. The DHPC that is sent to the target groups must contain personal data.

Personal data include names and signatures, but also email addresses, for example. Under the GDPR, email addresses from which the name of an employee can be derived in full are not allowed. Therefore, the Marketing Authorisation Holder should use an email address that does not contain any personal data, such as departmentname@organisation.tld, or even an email address that only contains abbreviations: (first letter of first name) (first two letters of surname)@organisation.tld. Using this type of abbreviation makes it harder for outsiders to trace the email address back to a natural person.

5.1. One DHPC for several products

Marketing Authorisation Holders are currently under no legal obligation to collaborate in case of a joint DHPC. However, 'GVP Module XV - Safety communication' does state the following in this regard:

'In each Member State, when several Marketing Authorisation Holders are concerned (i.e. when the DHPC covers several products with the same active substance or products of the

same therapeutic class), Marketing Authorisation Holders are strongly encouraged to arrange for one Marketing Authorisation Holder to act on behalf of all concerned Marketing Authorisation Holders as the contact point for the national competent authority.'

Is a DHPC applicable to several products (innovator and generics, or various innovators/generics, parallels)? If so, the MEB expects to receive one DHPC on behalf of the joint Marketing Authorisation Holders. All Marketing Authorisation Holders must cooperate in a joint DHPC, regardless of whether their product has been marketed. An annex to the DHPC includes a list of the products that are the subject of the DHPC. The DHPC itself states in the introductory sentence both the product name of the innovator product (if applicable) and the substance name. In the remainder of the DHPC, only the product name is stated.

At the Marketing Authorisation Holder's request, the MEB can provide a list of Marketing Authorisation Holders. We expect the Marketing Authorisation Holder of the innovator product to coordinate the process of translating and dispatch of the joint DHPC. If there is no longer an innovator product on the Dutch market, we request the Marketing Authorisation Holder of the generic product with the then largest market share to assume this role.

6. Dutch translation

The main aspects of the translation are:

A. what is the message to be conveyed?;

B. what information does a healthcare provider need in practice?;

C. what specific action is expected of the healthcare provider?

Currently, the Dutch translation of a DHPC follows the text adopted at the European level as much as possible, or translated as literally as possible. Since this does not always improve the clarity of the message, it is possible to deviate from the English text in structure (active sentences) and/or word choice.

In addition, the DHPC should be in line with the template and standard sentences shown in Annex I of this document.

7. Layout

7.1. Design of the letter and details of the digital message

To increase the recognition and reliability of DHPCs, both the digital message and the attached letter (PDF) should have a uniform appearance:

- No logos of the Marketing Authorisation Holder(s) on the letter or in the digital message;
- The letter must feature the icon of an orange or white hand;

- The letter includes as a footer: *Important, non-commercial risk information about a pharmaceutical product*
- The digital message must feature the icon of an orange or white hand;
- The digital message must have the following in the subject line:
    - DHPC <name of medicinal product>: <brief description of the problem>

      Example
      DHPC Valproate: New precautions for (future) fathers using Valproate
- The digital message displays the summary of the DHPC immediately upon opening;
- The DHPC is attached to the digital message in letter form (PDF);
- The DHPC includes a reference to:
    - News about safety of medicinal products | Medicines Evaluation Board (cbg-meb.nl)
- The Marketing Authorisation Holder(s) sign the DHPC

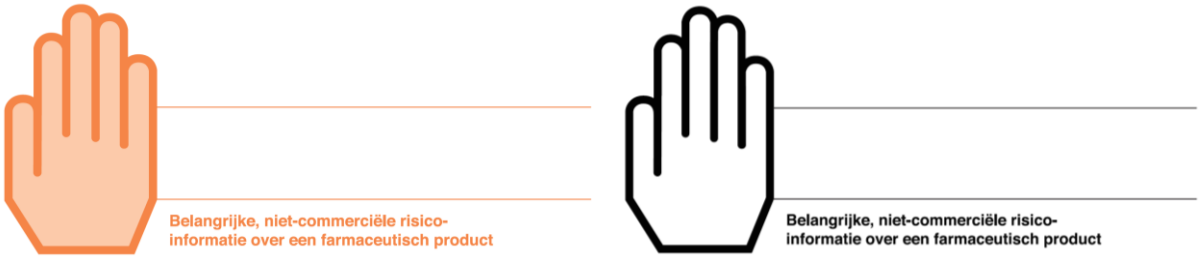
7.2. Orange or white hand

During the review of the translation of the DHPC, the MEB case manager coordinates the target groups and the need for an orange hand with the Healthcare and Youth Inspectorate (IGJ). The decision to use an orange hand is made on a case-by-case basis. Examples of situations requiring the use of an orange hand:

- limitation of indication;
- addition of new contraindication;
- change in patient's therapy;
- additional visit to the doctor or pharmacist necessary;
- recall at pharmacist and patient level.

This is not a definitive list of conditions for an orange hand. We weigh the need for this on an individual basis.

The addition of the icon of an orange or white hand on the letter and in the digital message serves two purposes: the icon increases the recognition of DHPCs, and it helps distinguish it from commercial information.



8. Distribution plan

Target groups are usually indicated at European level. Marketing Authorisation Holders shall submit a distribution plan as part of the implementation procedure. In the plan, the Marketing Authorisation Holder translates the target groups to the situation in the Netherlands. In doing so, critically consider which healthcare providers should receive the DHPC, and also which healthcare providers in training should be included. In addition to healthcare providers with Article 3 professions (listed in the BIG register), these can also be Article 36a professions. Furthermore, in addition to individual addressees, there is the possibility of adding general addressees (departments, practices) as recipients of the DHPC.

A limited distribution to part of the target group is allowed in exceptional cases, for example with orphan medicinal products. When limited distribution is being proposed in the distribution plan, the Marketing Authorisation Holder must describe the method to be used in identifying and reaching the precise target group.

9. Communications and logistics

9.1. Timelines

The timelines for DHPCs are generally established at European level. These timelines will take into account the time needed for implementation and alignment at the national level.

If necessary, the MEB informs professional associations of relevant healthcare providers of an announced DHPC during the national implementation phase. Depending on established timelines, this will be done as soon as the English text is available, usually on the last day of the PRAC or CHMP meeting. This can also be done when the Dutch translation is available. This allows for unambiguous communication to be prepared, thereby ensuring that healthcare providers are informed about the case in question as soon as possible.

9.2. Electronic distribution

The DHPC must be disseminated through digital means. The registration holder may use a third party for that purpose. Please note: do not use the sender for dispatching the DHPC for commercial purposes.

The sender should be reliable and recognisable and could look like this, for example: DHPC@organisation.tld.

Electronic dispatch is leading, but DHPCs may also be sent by post (as addition). This is the case if:

- The healthcare provider's digital address is unknown;
- A digital message has not reached the addressee (e.g. return email).

9.3. Distribution by post

Dispatch by post is still required in some cases (see 9.2 electronic distribution).The Marketing Authorisation Holder is responsible for requesting the orange hand envelopes from the Association for Innovative Medicinal Products in the Netherlands, https://www.verenigginginnovatievegeneesmiddelen.nl. Do this as soon as possible, due to the delivery time of the envelopes.

The white hand should be used for the other DHPCs. White hand envelopes are requested in the same way via the VIG.

Annex 1: Standard sentences in DHPC letter

Date

Important risk information: [*subject*]

Dear Sir/Madam,

For centrally authorised products and MRP/DCP products for which there is coordinated EU action, the first sentence reads:

In consultation with the European Medicines Agency (EMA), the Medicines Evaluation Board (MEB) and the Healthcare and Youth Inspectorate (IGJ), [*Marketing Authorisation Holder*] wishes to inform you about.....

For only national action, the first sentence reads:

In consultation with the Medicines Evaluation Board (MEB) and the Healthcare and Youth Inspectorate (IGJ), [*Marketing Authorisation Holder*] wishes to inform you about.....

Summary

[Itemised list, bold and larger font]

[...]- brief description of message in context of indication, recommendations for risk minimisation (contraindication, warnings, precautions, and if relevant, alternative therapy).

- recall information, if relevant

Additional information

[…]

- the indication must also be included here.

Reporting adverse reactions to the Netherlands Pharmacovigilance Centre Lareb *[if relevant / depending on the subject]*

▼This medicinal product is subject to additional monitoring. As a result, new safety information can be established quickly. *[If applicable]*

It is important to report suspected adverse reactions after authorisation of the medicinal product. This ensures that the relationship between benefits and risks of the medicinal product is continuously monitored. Healthcare professionals are requested to report any suspected adverse reactions via the Netherlands Pharmacovigilance Centre Lareb; website www.lareb.nl.

Contact information

If you have any questions or require further information regarding *[product name]*, please contact *[department]* of *[Marketing Authorisation Holder]*, which can be reached on *[telephone number]*, or at *[email address that does not contain any personal data].*

Kind regards,

[*name, possible signature of authorised person*]

NB: This DHPC was sent to the following healthcare providers: *[list of target groups]*

Overview DHPCs:

News about safety of medicinal products | Medicines Evaluation Board (cbg-meb.nl)

- List of literature references *[if applicable]*

[as a footnote on all pages of the letter:
'Important, non-commercial risk information about a pharmaceutical product'

Appendices:

- List of concerned Marketing Authorisation Holders *[if applicable in a joint DHPC]*
- Official product information of the product or only the relevant sections, in which the changes are indicated [*if applicable*]

Annex 2: Standard sentences in DHPC digital message

Date

Important risk information: [*subject*]

Dear Sir/Madam,

For centrally authorised products and MRP/DCP products for which there is coordinated EU action, the first sentence reads:

In consultation with the European Medicines Agency (EMA), the Medicines Evaluation Board (MEB) and the Healthcare and Youth Inspectorate (IGJ), [*Marketing Authorisation Holder*] wishes to inform you about.....

For only national action, the first sentence reads:

In consultation with the Medicines Evaluation Board (MEB) and the Healthcare and Youth Inspectorate (IGJ), [*Marketing Authorisation Holder*] wishes to inform you about.....

Summary

[Itemised list, bold and larger font]

[...]- brief description of message in context of indication, recommendations for risk minimisation (contraindication, warnings, precautions, and if relevant, alternative therapy).

- recall information, if relevant

The full DHPC text is available in the PDF in the annex.

For an overview of all DHPCs, go to:

News about safety of medicinal products | Medicines Evaluation Board (cbg-meb.nl)

Contact information

If you have any questions or require further information regarding *[product name]*, please contact *[department]* of *[Marketing Authorisation Holder]*, which can be reached on *[telephone number]*, or at *[email address that does not contain any personal data].*

Kind regards,

[*name, possible signature of authorised person*]

NB: This DHPC was sent to the following healthcare providers: *[list of target groups]*