

EMA regulatory update

Rapid Fire Session

Veronika Jekerle

Head of Pharmaceutical Quality,
European Medicines Agency

CASSS-CGT

Basel 23-24 October 2025



Innovation trends: Biologicals (2022 – 24)



Trends observed for CMC - Briefing meetings between sponsors and Innovation task force (**ITF**)
Supporting innovation | European Medicines Agency (EMA)

EU pharmaceutical legislation



What will the pharmaceutical sector reform change?

- Single Market** ○ creating a Single Market for medicines
- Regulatory framework** ○ reducing the administrative burden for medicines to reach patients faster
- Medicines for all** ○ ensuring better access to affordable medicines
- Medicine supply** ○ addressing shortages of medicines and ensuring security of supply
- Innovation** ○ promoting innovation and competitiveness
- Environmentally friendly** ○ making medicines more environmentally sustainable
- Saving lives** ○ tackling antimicrobial resistance (AMR)
- Transparency** ○ informing better about public funding used to develop medicines

Enabling mechanisms for innovation/CMC

Master files
Personalised medicines
Platform approaches
Decentralised manufacturing
Regulatory sandbox

Variation framework & Annex II
Strengthened pre-submission support

New pharmaceutical legislation

European Commission

Public Health

Home > Medicinal products > A pharmaceutical strategy for Europe > Reform of the EU pharmaceutical legislation

Reform of the EU pharmaceutical legislation

PAGE CONTENTS

- Consultations activities related to the revision of the general pharmaceuticals legislation
- Consultation activities related to the revision of the orphan and paediatric legislation
- Evaluation of legislation and impact assessments
- Consultation activities and studies related to security of supply
- Latest updates
- Documents

26 April 2023

Commission adopted a proposal for a new Directive and a new Regulation, which revise and replace the existing general pharmaceutical legislation.

- MAIN DOCUMENTS**
 - Commission proposal for the Pharmaceutical Regulation
 - Commission proposal for the Pharmaceutical Directive
 - Communication on Pharmaceutical Reform and Antimicrobial Resistance (AMR)
 - Commission proposal for a Council Recommendation on stepping up EU actions to combat antimicrobial resistance in a One Health approach (AMR)
- MEDIA**
 - EC corporate page on the Pharmaceutical Sector Reform
 - Press release
 - Q&As
 - Pharmaceutical Legislation
 - Recommendation on AMR

Revised variation classification GL: main changes

Procedural part

- **Operational details shifted** to EMA/CMDh guidance for **easiest updates** in the future.
- **Change the current code system (numbering)** to facilitate the implementation of the new framework

A. Administrative variations

- Reduction/simplification list from 8 to 5 scopes.

B. Quality variations

Review of all categories:

- **Downgrade** certain scopes when scientifically justified (risk/based approach).
- **Removed conditions of biological** medicinal products in certain circumstances allowing a Type IA variations.
- **Implementation of PACMP** as Type IB or Type IA also for BIO.
- **Alignment** and **consistency** between Chemicals and Biologics where appropriate
- New section on **In-house reference preparations**.
- New scopes for **Medical devices** in line with MDR.

C. Safety, Efficacy, PhV variations

- **Deletion** of scopes (C.I.9, C.I.10, as now done via Art. 57 database).
- C.I.3 **expanded to include** implementation of **PRAC signals** and **joint recommendations of EU authorities**.
- New scope for submission of **results** of assessments carried out on **target patient groups**.

D. PMF

- Reduction/simplification list from 23 to 16 scopes.

entry into force 15 Jan 2026

Platforms

- **Listen & learn focus group (19-20 November 2024)**
- **Regulators' considerations:** prior knowledge/platform approaches
- **Industry examples of platforms:** vaccines, mRNA, gene therapy, continuous direct compression, oligonucleotides

Discussion points:

- **Benefits of the platform:** streamlined development, data utility, acceleration
- **Prerequisites:** definition, documentation, scientific data maturity, reproducibility
- Difference between Prior knowledge & platform concept
- Modular approach versus end-to-end
- Product experience & the ideal product class
- Lifecycle management of a platform



Personalised medicines

- **Listen & learn focus group (8-9 April 2025)**
- **Current scientific understand & regulatory perspective**
- **Industry examples:** decentralised production of ATMPs, personalised T-cell therapy, synthetic DNA cancer immunotherapy, 3D printing, individualised antisense oligonucleotides

Discussion points:

- **Adaptive regulatory framework + standardisation**
- **Control strategy:** risk-based considerations, surrogate assays, prior knowledge
- AI and modelling approaches (→ link back to EMA Q&A + EU GMP Annex 22)
- Oligonucleotides: mature product class: personalised approached mentioned in EMA's draft guidance
- 3D printing: emerging technology, highly standardised, decentralised manufacturing aspects, harmonisation of QUA control (e.g. for Pharmacopoeias)



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

24 March 2025

Quality Innovation Group (QIG)
Listen and Learn Focus Group (LLFG) meeting on
Personalised Medicines
Agenda

8th-9th April 2025

Virtual ~~meeting~~roche

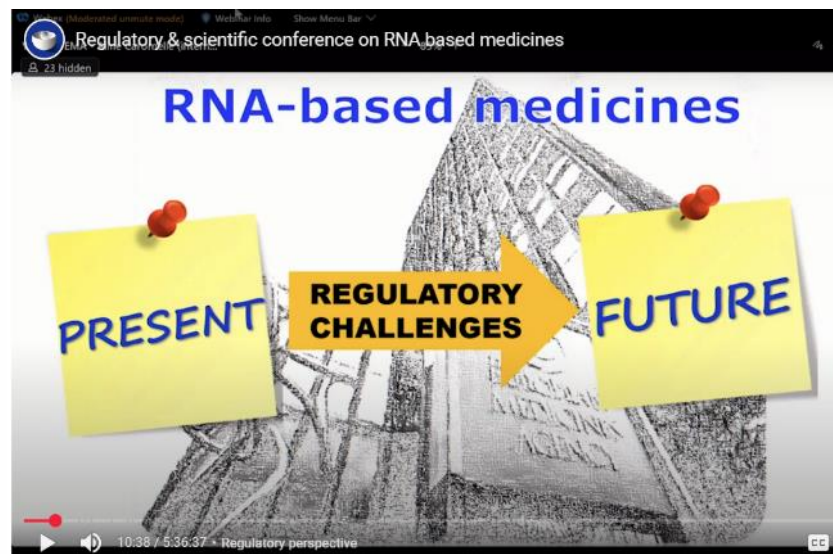
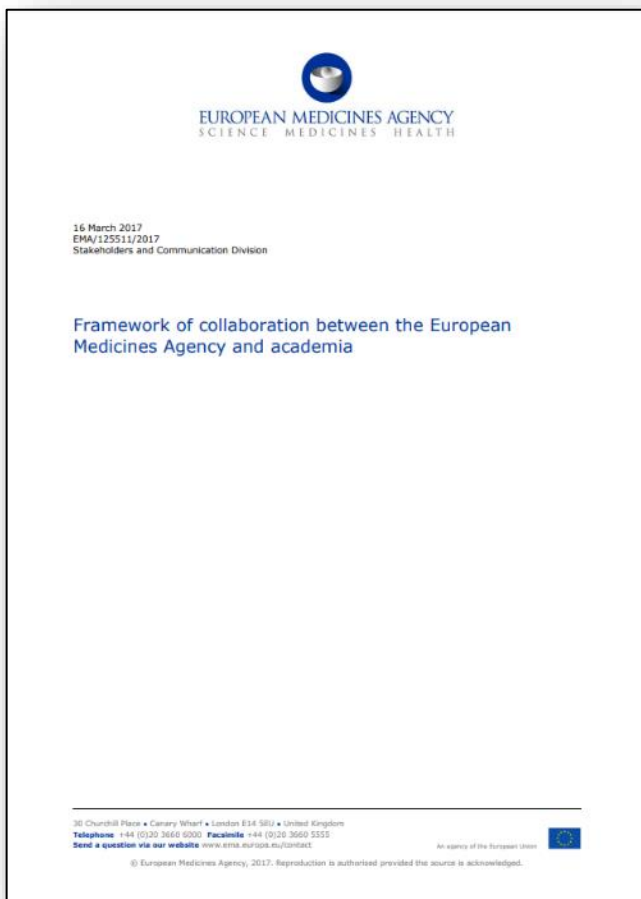
Chair: Marcel Hoefnagel

Day 1
Chair: Marcel Hoefnagel

Timing		Contributors:
10:00 – 10:10	Opening of the LLFG Welcome to participants. Introduction to QIG, meeting scope and objectives of the QIG LLFG on Personalised Medicines.	Marcel Hoefnagel (QIG Chair, MEB)
10:10 – 10:40	1: Setting the scene: <u>Personalised</u> Medicines	Silke Schüle (QIG Member)
Session 1		
10:40 – 11:10	2: Artificial Intelligence-driven, Decentralized Production for Advanced Therapies in the Hospital	Frederik Erkens (Fraunhofer IPT) John Jacobs (ORTEC), Joe Egan (UCL), Katrin

Academia

- Support, engagement and collaboration framework



<https://www.ema.europa.eu/en/events/regulatory-and-scientific-virtual-conference-rna-based-medicines>

<https://www.ema.europa.eu/en/partners-networks/academia>

[Home](#) > [News](#)

> EMA pilot offers enhanced support to academic and non-profit developers of advanced therapy medicinal products

EMA pilot offers enhanced support to academic and non-profit developers of advanced therapy medicinal products

[Share](#)

29 September 2022

[News](#) [Human](#) [Advanced therapies](#) [Medicines](#)

EMA is launching a pilot to support the translation of basic research developments into medicines that could make a difference in patients' lives in the European Economic Area (EEA). The pilot is open to academic sponsors and non-profit organisations who are developing advanced therapy medicinal products (ATMPs). These medicines for human use are based on genes, tissues or cells and might offer ground-breaking treatment options to patients.

The pilot will focus on the needs of non-profit academic developers. They are a major contributor to the development of ATMPs and diagnostic and delivery devices, but experience has shown that navigating regulatory requirements can be challenging.

During the pilot, EMA will provide enhanced regulatory support for up to five selected ATMPs that address unmet clinical needs and are solely developed by academic and non-profit developers in Europe. EMA will guide the participants through the regulatory process with the aim to optimise the development of the ATMPs, starting from best practice principles for manufacturing to planning clinical development that meets regulatory standards.

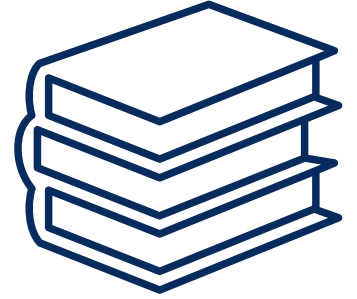
The pilot's first participant has already been selected. This ATMP is ARI-0001, a chimeric antigen receptor (CAR) product based on patients' own T-cells, that is developed by the Hospital Clínic Barcelona. In December 2021, the product was



Resources

CAT

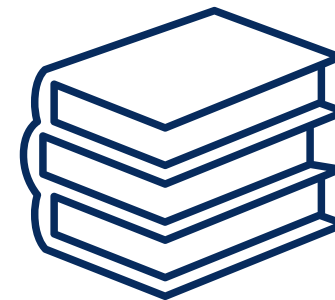
→ Ilona



CHMP/BWP guidance

- Guideline on quality aspects of **RNA vaccines** (*revision for finalisation in 2026*)
- Guideline on the development and manufacture of human medicinal products specifically designed for **phage therapy** (*draft in public consultation*)
- QIG Preliminary Considerations on **Pharmaceutical Process Models** (*draft*)
- Guidance to support **new variations framework** (i.e. complex manufacturing, PACMP, PLCM, other)
- **ICH Guidance:**
 - Cell & Gene therapies discussion group (i.e. comparability of ATMPs)
 - ICH Q1/ICH Q5C Stability Testing of Biotechnological/Biological Products
- Parallel scientific advice with FDA ([link](#))

Resources



nature reviews drug discovery

[nature](#) > [nature reviews drug discovery](#) > [biobusiness briefs](#) > [article](#)

BIOBUSINESS BRIEFS | 15 March 2024

Genome-editing medicinal products: the EMA perspective

By [Anna Tavidou](#)  [Dolça Rogers](#), [Giada Farinelli](#), [Jordanis Gravanis](#) & [Veronika Jekerle](#)

Genome editing technologies such as CRISPR–Cas9 are being developed as therapeutic platforms, especially for monogenic diseases that could be treated by targeting the associated mutations. The first CRISPR–Cas9-based medicinal product, [Casgevy](#) (exagamglogene autotemcel), has recently been granted marketing authorization in the European Union for sickle cell disease and β -thalassaemia, and a substantial number of other genome-editing medicinal products (GEMPs) are in development.


Nevertheless, the field of GEMPs is still nascent, with very limited scientific guidance available to developers to fit these complex products into existing regulatory frameworks. A recent [horizon scanning report](#) by the EU Innovation Network includes initial regulatory considerations, socioeconomical aspects and recommendations to help better understand general challenges and opportunities of genome editing. Developers seeking to market their products in Europe should also make use of tailored support from [national competent authorities](#) and the European Medicines Agency (EMA): that is, [Innovation Task Force \(ITF\) meetings](#), [PRiority MEdicines \(PRIME\) designation](#) and [scientific advice](#) (SA). SA – recommendations from the EMA that may aid developers on aspects of the medicine development supporting a marketing

Received: 22 July 2020 | Revised: 13 November 2020 | Accepted: 19 November 2020
DOI: 10.1111/bcp.14672

ORIGINAL ARTICLE



Towards a better use of scientific advice for developers of advanced therapies

Anna Tavidou¹  | Dolça Rogers² | Milton Bonelli¹ | Anja Schiel^{3,4} | Ana Hidalgo-Simon⁵

¹Scientific Advice Office, Human Medicines Division, European Medicines Agency, Amsterdam, The Netherlands

²Pharmaceutical Quality Office, Human Medicines Division, European Medicines Agency, Amsterdam, The Netherlands

³Regulatory and Pharmacoeconomic Statistics, Norwegian Medicines Agency (NoMA), Norway

⁴Chair of Scientific Advice Working Party (SAWP), European Medicines Agency, Amsterdam, The Netherlands

⁵Head of Advanced Therapies, Human Medicines Division, European Medicines Agency, Amsterdam, The Netherlands

Correspondence
Anna Tavidou, PhD, Scientific Advice Office, Human Medicines Division, European Medicines Agency, Domenico Scarlattilaan 6, 1083 HS Amsterdam, The Netherlands.
Email: anna.tavidou@ema.europa.eu

Scientific advice (SA) is an important tool offered by regulators to help developers generate robust evidence on a medicine's benefits and risks. Drawing on accumulated experience and looking at the SA provided by the European Medicines Agency in 2018 to advanced therapy medicinal products originally developed by public bodies, we discuss most commonly raised issues and the complexity and timings of the questions posed. Earlier and more frequent SA could help advanced therapy medicinal product developers to pre-empt delays at the marketing authorisation stage. Carefully addressing quality and nonclinical issues before entering the pivotal phase of development will clear the path for a smooth clinical development and successful marketing authorisation.

KEYWORDS

advanced therapy medicinal products, drug development, drug regulation, scientific advice

1 | INTRODUCTION

Public bodies (including academic institutions, research organisations, hospitals), public–private partnerships and small and medium sized enterprises (SMEs) represent an important source of innovative therapeutics.¹ This holds particularly true for the area of advanced therapy medicinal products (ATMPs), as research on these products and their initial development is conducted to a great extent by public bodies and SMEs.² This is confirmed by a recent survey, which concluded that the European ATMP field is still in early phase of maturity with a high representation of SMEs (65%) and 72% of reported therapeutics in early clinical development (phases I–III).³

Public bodies and SMEs tend to have limited resources to con-

pharmaceutical companies (e.g. Strimvelis, Imlygic, MACI, Holoclar, Zolgensma). Moreover, academic institutions and SMEs may encounter more challenges in navigating– and complying with– regulatory requirements on various aspects of development compared with large pharmaceutical companies.⁴ These challenges could cause delays at different stages of development and even lead to abandonment of potentially promising projects.

The scientific advice (SA) service is provided by regulators around the globe and is a useful tool to support the timely and sound development of high quality, effective and safe medicines, for the benefit of patients. At the European Medicines Agency (EMA), this service is provided by the Scientific Advice Working Party supported by the Committee of Advanced Therapies.⁵ This is,

Drug Discovery Today • Volume 30, Number 9 • September 2025

REVIEWS



Learning from the EMA experience: common CMC deficiencies in marketing authorisation applications over the past decade

Dolores Hernán Pérez de la Ossa*, Friederike Haas, Robert N. Bream, Evangelos Kotzagiorgis, Klara Tiltso, Veronika Jekerle

European Medicines Agency, Pharmaceutical Quality Office, Human Division, Amsterdam, the Netherlands

Here, we present an analysis of major objections (MOs) raised on quality aspects during review of marketing authorisation applications (MAAs) for new medicines via the centralised procedure in the European Union (EU). The review covers a 10-year period by analysing data from 2013, 2018, and 2023. We identify common deficiencies, which should help developers prepare dossiers aligned with EU and global standards and avoid delays to approval of medicines, thereby improving patient access to medicines. The most common deficiencies are correlated with specific product types, recent public health crises, new legal frameworks, and the publication or revision of guidance.

Keywords: medicines; marketing authorisation; major objection; quality; deficiencies

Introduction

In the EU, in general, all medicines must be authorised before they can be marketed and made available to patients. Several mechanisms exist: the centralised procedure (CP) [coordinated by the European Medicines Agency (EMA) and authorisation granted by the European Commission (EC)], and the national, decentralised, and mutual recognition procedures [managed by the respective National Competent Authorities (NCAs)]. A medicine approved through the CP can be marketed throughout the EU and, thus, made available to all patients and healthcare professionals in the EU simultaneously. The CP is governed by Regulation (EC) 726/2004^[1] and adheres to legal timelines, comprising assessment periods and ‘clock-stops’, which allow the applicant to respond to questions raised at defined milestones during the assessment.^[2] To apply for a marketing authorisation, an applicant must submit a comprehensive set of information and data [an electronic Common Technical Document (eCTD),^[3] also ‘dossier’] to EMA and NCAs demonstrating that the medicine is safe, efficacious, and of suitable quality for its intended use. The Committee for Medicinal Products for Human use (CHMP) of the EMA is responsible for assessing the quality, safety, and efficacy of the medicine and determining

its benefit/risk to provide a scientific opinion to the EC on whether it should be granted a marketing authorisation. During the assessment, deviations from the EU standards are raised as issues in the form of either Major Objections (MOs) or Other Concerns (OCs), which need to be resolved before a marketing authorisation can be granted. MOs are serious concerns on the quality, safety, or efficacy of the medicine, with an impact on its benefit–risk ratio, and can relate, for example, to the way in which the medicine was developed, the way it was manufactured or tested, or to the effects seen in patients. OCs relate to issues that are not deemed crucial for the benefit–risk ratio of the medicine, but are still expected to be addressed before marketing authorisation. In general, the number of MOs and OCs raised is a good indicator of the maturity of a dossier and can highlight challenges that an applicant faced during product development. A dossier that is aligned with the EU regulatory standards decreases the probability of delays to authorisation and sets a good basis for lifecycle management of the medicine.

In this study, we review the questions raised by CHMP during the assessment of quality-related aspects (also known as chemistry manufacturing and controls; CMC) of dossiers for marketing authorisation applications (MAAs) for human medicines

* Corresponding author: Hernán Pérez de la Ossa, D. Dolores.HernanPerez@ema.europa.eu

1359-6446/25/25 The Author(s). Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).
<https://doi.org/10.1016/j.drudis.2025.104844>

www.drugdiscoverytoday.com



CAT regulatory update

Rapid Fire Session CASSS-CGT Basel, 23-24 October 2025

Ilona Reischl

Austrian Medicines and Medical Devices Agency

(AGES-MEA)

Pre-authorisation activities

Guidance

Guideline on requirements for investigational ATMPs in clinical trials

- Finalized, accessible via the EMA webpage, EudraLex Volume 10 to come
- Internal training and external training in preparation
- Publication on ATMP clinical trials in Europe 2016-2024



20 January 2025
EMA/CAT/22473/2025
Committee for Advanced Therapies (CAT)

Guideline on quality, non-clinical and clinical requirements
for investigational advanced therapy medicinal products
in clinical trials

Pre-authorisation activities

Guidance

Revision of the Questions and Answers on Gene Therapy

- EMA/CHMP/GTWP/212377/2008 was published in 2009 and is outdated.
- Major revision is needed and work is ongoing
- Widen the scope to include all ATMPs and include CAT/BWP lessons learned



London, 17th December 2009
Doc. Ref: EMA/CHMP/GTWP/212377/2008

**COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE
(CHMP)**

QUESTIONS AND ANSWERS ON GENE THERAPY

Pre-authorisation activities

Guidance

Development of guidance on Gene editing

- Workshop co-organized with ARM

<https://www.ema.europa.eu/en/events/committee-advanced-therapies-cat-workshop-gene-editing>

- Hybrid setting: CAT secretariat & CAT experts in person, speakers & audience remote.
 - Open session (10.00 – 17.00):
 - 15 speakers
 - 474 participants (registered) + live broadcast (participant numbers not known)
 - Closed session - 1 company presentation
-
- Initiate the development of a concept paper / reflection paper on genome editing

Pre-authorisation activities

Guidance

Development of guidance on Gene editing

- Opportunities for further engagement depending on the setting and goals:
 - ITF meetings (informal interaction)
 - Quality Innovation group (QIG) interaction
 - Scientific advice (EMA and NCAs)
 - PRIME: [Toolbox guidance on scientific elements and regulatory tools to support quality data packages for PRIME and certain marketing authorisation applications](#)
- All general paths for interaction are also open in the context of gene editing

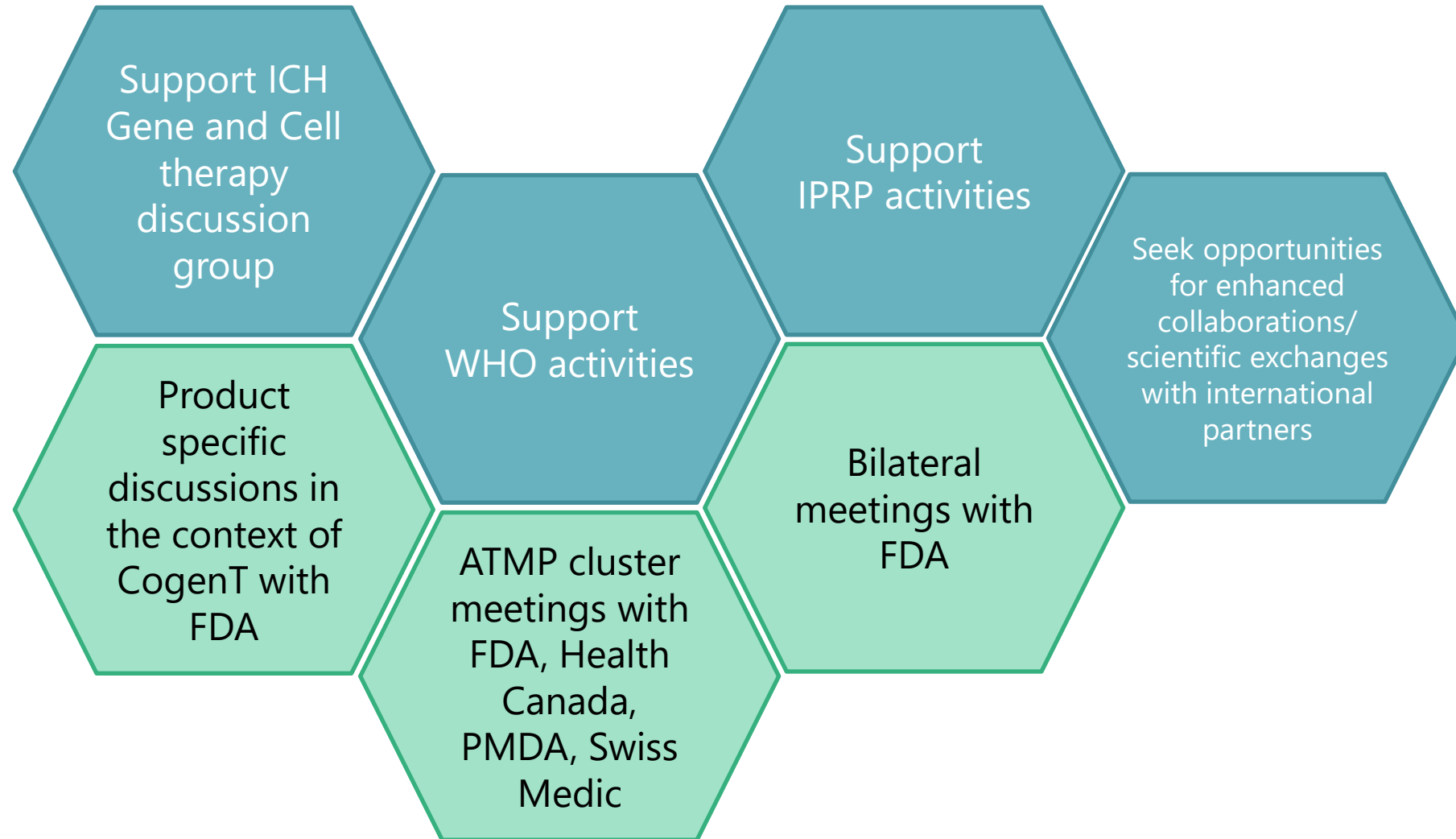


- ## Still a need for systematic inclusion of PED in medicines development and regulation



Horizontal activities and other areas

International Regulatory Science Collaboration



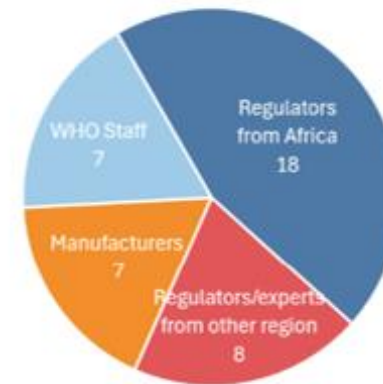
Horizontal activities and other areas

International Regulatory Science Collaboration

Implementation Workshop on 'WHO Considerations in Developing a Regulatory Framework for Human Cells and Tissues and for Advanced Therapy Medicinal Products';
24-26 September 2025, Brazzaville, Congo

Chair: I. Reischl, Rapporteur: G. Jotwani

<https://www.who.int/publications/m/item/executive-summary-regulatory-framework-human-cells-tissue>



European Pharmacopoeia – activities in the cell and gene therapy field

Olga Kolaj-Robin, PhD

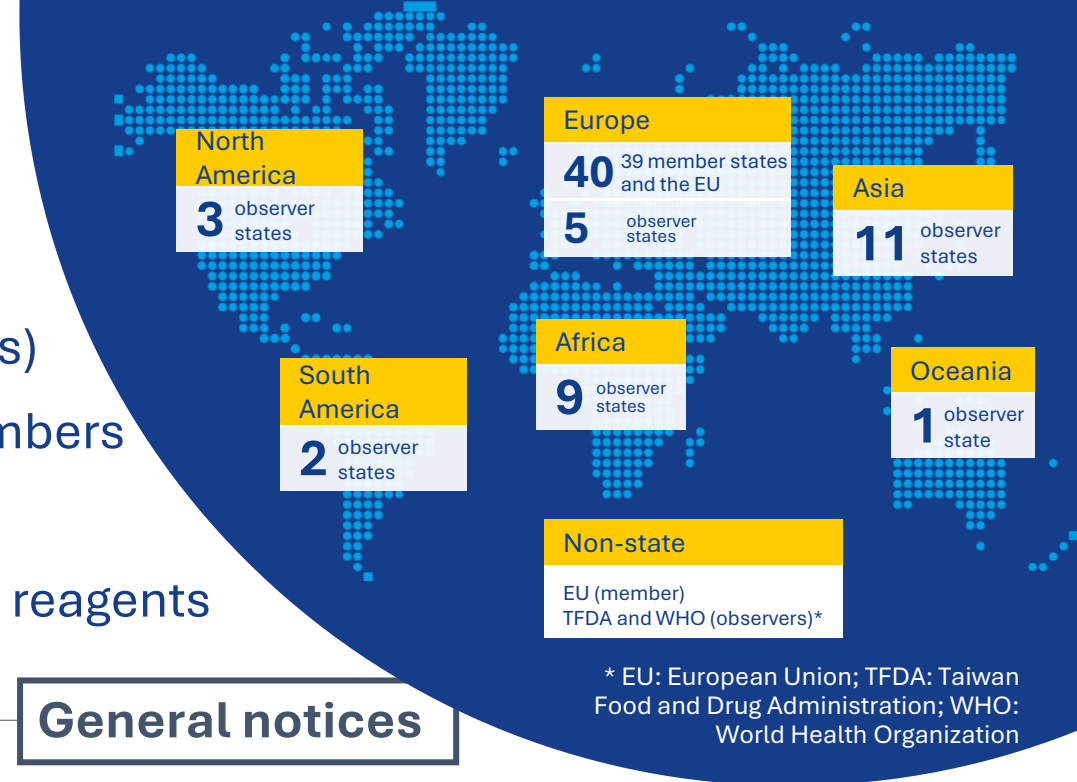
CASSS CGT Europe

23-24 October, Basel, Switzerland



European Pharmacopoeia (Ph. Eur.) and its structure

- ★ Protecting public health – one common compulsory standard
- ★ Official pharmacopoeia in Europe (+ national pharmacopoeias)
- ★ Legally binding quality standards; at the same date for all Members
- ★ 40 Members, 33 Observers
- ★ Issue 12.2: ~2600 monographs, ~400 general chapters, ~3000 reagents



General chapters & general texts

- provide standard analytical procedures; guidance
- **become mandatory** when referred to in a monograph

Individual monographs

- Specific but not a stand-alone text
- Based on approved specifications backed up by batch data

General notices

- **Essential reading**
- Apply to all texts, address general topics
- Include rules to understand texts

General monographs

Dosage form monographs

- **Mandatory** for all substances/products within scope of their definition
- Not cross-referenced in individual monographs (exceptions)



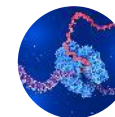
Ph. Eur. Reference standards / preparations & reagents

Cell and gene therapy – Ph. Eur.

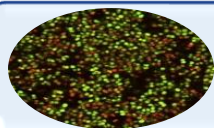


General overarching texts

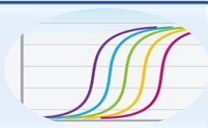
- ~~5.1 Transfer of medicinal products for human use~~
- 3.11 Gene therapy medicinal products for human use
- 5.34 General information on gene therapy medicinal products for human use
- 5.2.12 Raw materials of biological origin for the production of cell-based and gene therapy medicinal products
- 5.32 Cell-based preparations for human use
- 5.47 Gene edited cells for human use



+ mRNA-based GTMPs



General methods: numeration & viability



- 2.7.23 Numeration of CD34+/CD45+ cells in haematopoietic products
- 2.7.24 Flow cytometry
- 2.7.28 Colony-forming cell assay for human haematopoietic progenitor cells
- 2.7.29 Nucleated cell count and viability
- 2.6.35 Quantification and characterisation of host-cell DNA

General chapters: Microbiology aspects & viral safety



- 2.6.1 Sterility
- 5.1.6 Alternative methods for control of microbiological quality
- 2.6.27 Microbiological examination of cell-based preparations
- 2.6.39 Microbiological examination of human tissues
- 5.1.13 Pyrogenicity - 2.6.30 MAT - 2.6.14 BET - 2.6.32 rFC
- 2.6.7 Mycoplasmas
- 5.1.7 Viral safety
- 5.2.8 TSE

Under elaboration

Under revision

Recently adopted/published/revi

Suppressed/planned suppression

Other published

Individual monographs

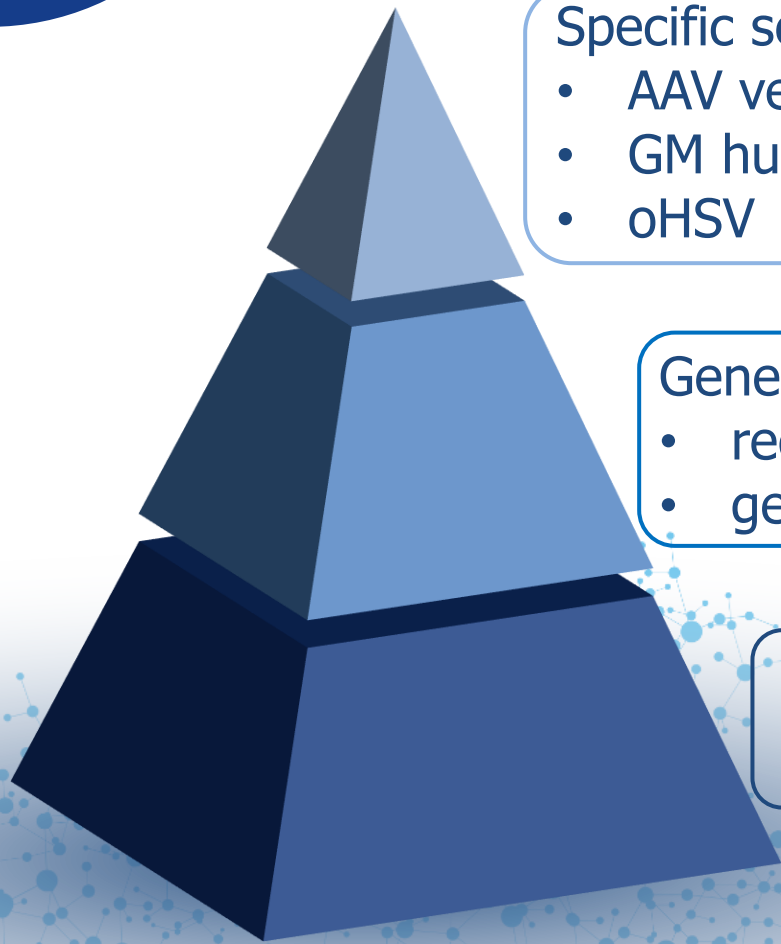


- Bovine serum (2262)
- Human haematopoietic stem cells (2323)

Non exhaustive list



New general monograph 3186 – requirement layers



Specific sections

- AAV vectors
- GM human autologous cells
- oHSV

General requirements

- recombinant vectors
- genetically modified cells

General provisions for GTMP production

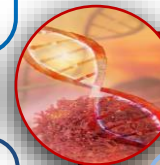
Revised from 5.14
New sections



Gene therapy medicinal products for human use (3186)

General
monograph

- Definition
- General requirements on:
 - the Production of GTMPs
 - Recombinant vectors (including GM bacterial cells)
 - Genetically modified cells
- Genetically modified autologous human cells modified by integrating retroviral or lentiviral vectors
- Adeno-associated-virus (AAV) vectors for human use
- Oncolytic herpes simplex virus (oHSV) for human use




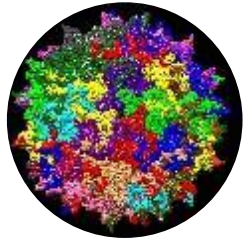
Additional information on gene therapy medicinal products for human use (5.34)

General
chapter

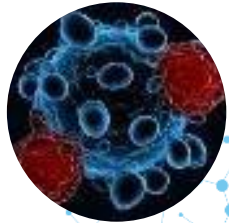
- Plasmid vectors for human use including
Bacterial cells used for the manufacture of plasmid vectors for human use
- Genetically modified bacterial cells for human use
- Adenovirus vectors for human use
- Poxvirus vectors for human use
- Retroviridae-derived vectors for human use

Ph. Eur. gene therapy texts - flexibility

- ❖ risk-based approach incorporated (general requirements) 
- ❖ Flexible wording, reference to suitable methods, no numerical acceptance criteria



- ❖ recombinant vectors: possibility to perform the test listed under respective headings at an alternative stage of the process; requirements applicable and performed under approved testing scheme if not possible to distinguish between harvests and final lot (general requirements)



- ❖ genetically modified cells: listed tests to be performed at appropriate stages depending on the manufacturing process (general requirements and the individual section)



Advancements in gene therapy: the European Pharmacopoeia's new approach

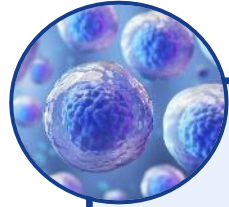
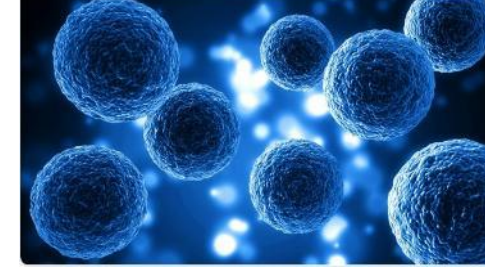


ON DEMAND WEBINAR &
PDF PRESENTATION

<https://www.edqm.eu/en/-/advancement-in-gene-therapy-new-approach>



Cell-based preparation for human use (5.32)



General
chapter

Cell-based preparations (5.32)

- **Definition**
- **General requirements**
 - General provisions for the production
 - Substances and materials used in production
 - Source cells
 - In-process control tests
 - Final lot (Identification, Tests, Assays)
- **Specific requirements**
 - Human haematopoietic stem cells
 - Chondrocytes
 - Limbal stem cells
 - Mesenchymal stem cells



adopted 181st EPC Session



Published 1 October 2025

- Need for a general text covering quality of cell-based preparations
- encompassing products already on the market and new products to come

Scope



- autologous, allogeneic and xenogeneic cell-based preparations
- including living, damaged and dead cells
- Could be applicable to cells used in further processing



- Cells already covered in *Human hematopoietic stem cells (2323)*
- Specific consideration related to genetic modifications and their associated requirements
→ see GTP texts

Rapid microbiological methods (RMM) in the Ph. Eur.

The Ph. Eur.
facilitates
the use of
RMM

5.1.6 Alternative methods for control of microbiological quality

General principles of alternative microbiological methods
Guidance on how to implement alternative microbiological methods

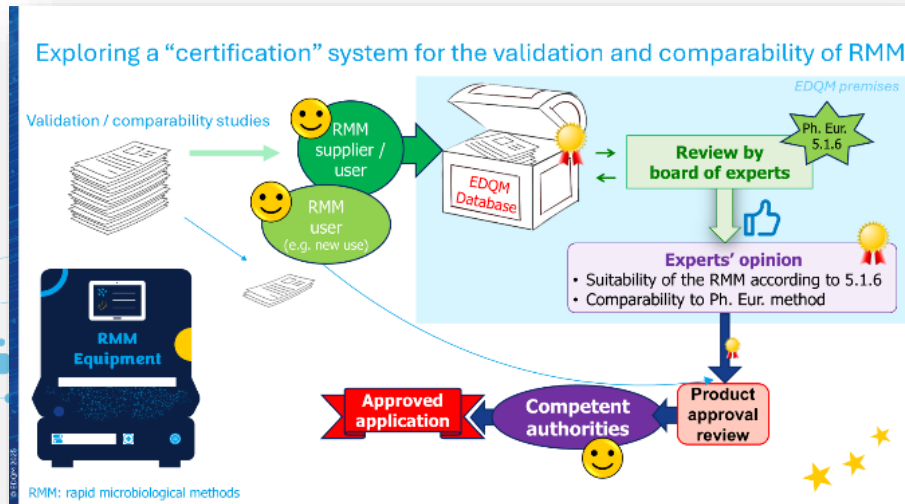
Examples of validation
protocols booklet
(<https://go.edqm.eu/expprotmicrobioe>)

2.6.27 Microbiological examination of cell-based preparations

Approaches to microbiological examination of cell-based preparations

5.1.9 Guidelines for using the test for sterility

Reflect the use of alternative methods in accordance with chapter 5.1.6



- ★ Implementation of RMM remains a challenge due to complex validation and comparability
- ★ EDQM has initiated a project to develop a "certification" system for the validation and comparability of RMM to support their implementation based on 5.1.6

EDQM WORKSHOP

EXPLORING A CERTIFICATION SYSTEM
FOR THE VALIDATION OF RAPID
MICROBIOLOGICAL METHODS

15-16 October 2024, Strasbourg, France



Regulatory revisions in Switzerland and International harmonization efforts

Julia Djonova, Head Division Advanced Therapy Medicinal Products

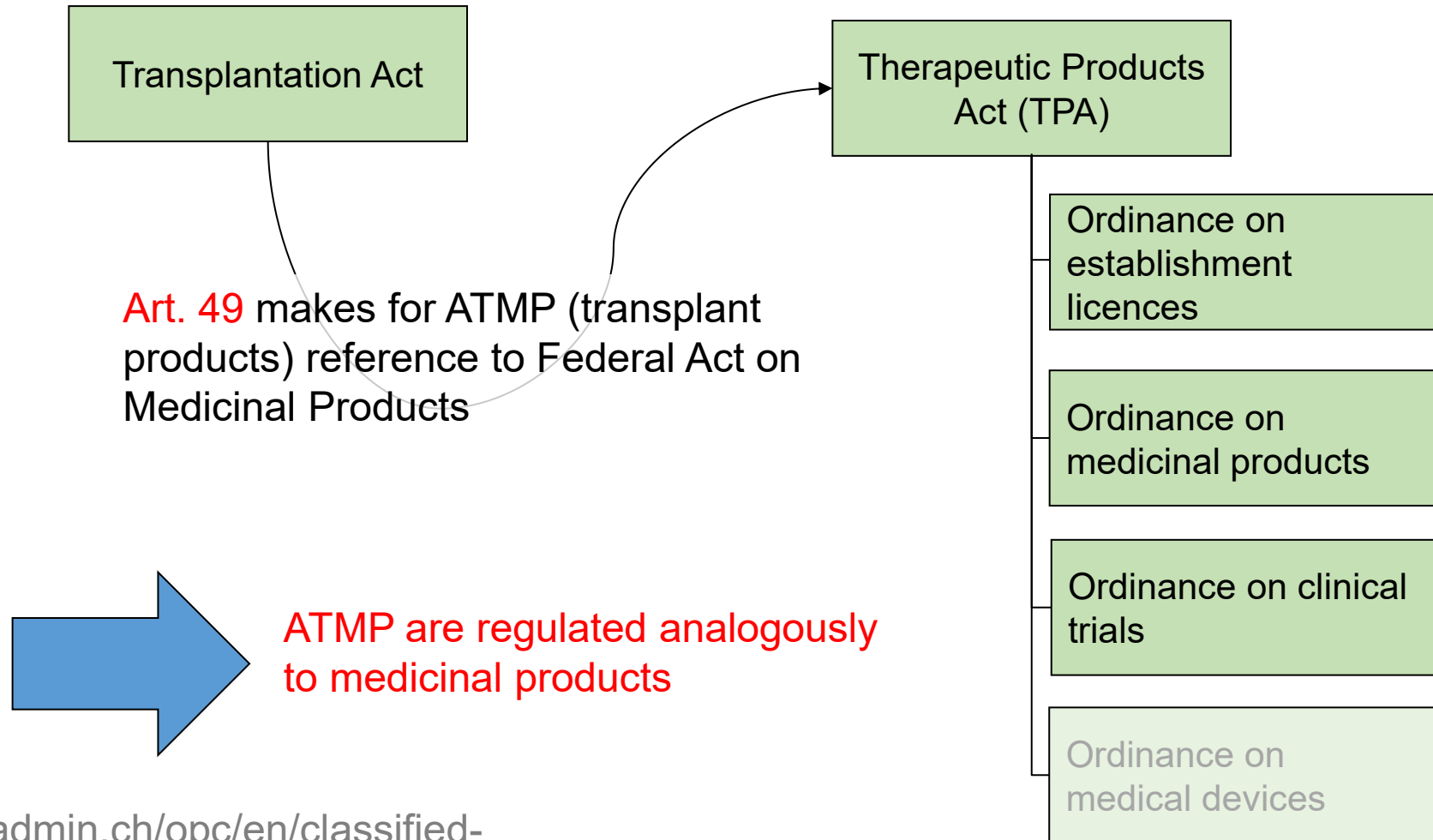
CASSS-CGT

Basel 23-24 October 2025

Schweizerisches Heilmittelinstitut
Institut suisse des produits thérapeutiques
Istituto svizzero per gli agenti terapeutici
Swiss Agency for Therapeutic Products

Hallerstrasse 7, 3012 Bern
www.swissmedic.ch

Current regulation applies to ATMP but is not specific



<http://www.admin.ch/opc/en/classified-compilation/20002716/index.html>

<https://www.fedlex.admin.ch/en/cc/internal-law/81#812>

“Intent Document ”on the revision of the law adopted in September 2025 from the Federal Council

- The ATMP’s regulation will be transferred from the Transplantation Act to the Therapeutic Product Act , which will create a specific and comprehensive framework for complex, innovative therapies
- Considering the scientific advances and new technologies in the field of ATMP and updated regulatory expectations around quality, traceability and safety
- Providing biotech innovators with a clearer framework for early development and clinical translation and strengthening the position as a forward-looking environment for ATMP development



What is new – 1

**Products with nucleic acid modifications
will be introduced as a special category of ATMP's**

mRNA, CRISPR,
Antisense,
Oligo-
nucleotides,
etc.

- Products whose active ingredient contains recombinant biological or synthetic nucleic acid sequences or genetically modified microorganisms (DNA plasmids, mRNA, iRNA, antisense oligonucleotides, viral vectors containing RNA or DNA, aptamers, CRISPR CAS) with therapeutic or preventive effect
- Genetically modified organisms are organisms whose genetic material has been modified in a way that does not occur under natural conditions through crossing or natural recombination (Swiss Genetic Act and Release Ordinance)
- Excluded are: Nucleic acids which are used only as “adjuvants” and are therefore not directly involved in the intended medical effect of the preparation
- No distinction is made between recombinant or synthetic production, nor between short or long nucleic acid sequences

Why expansion of the definition

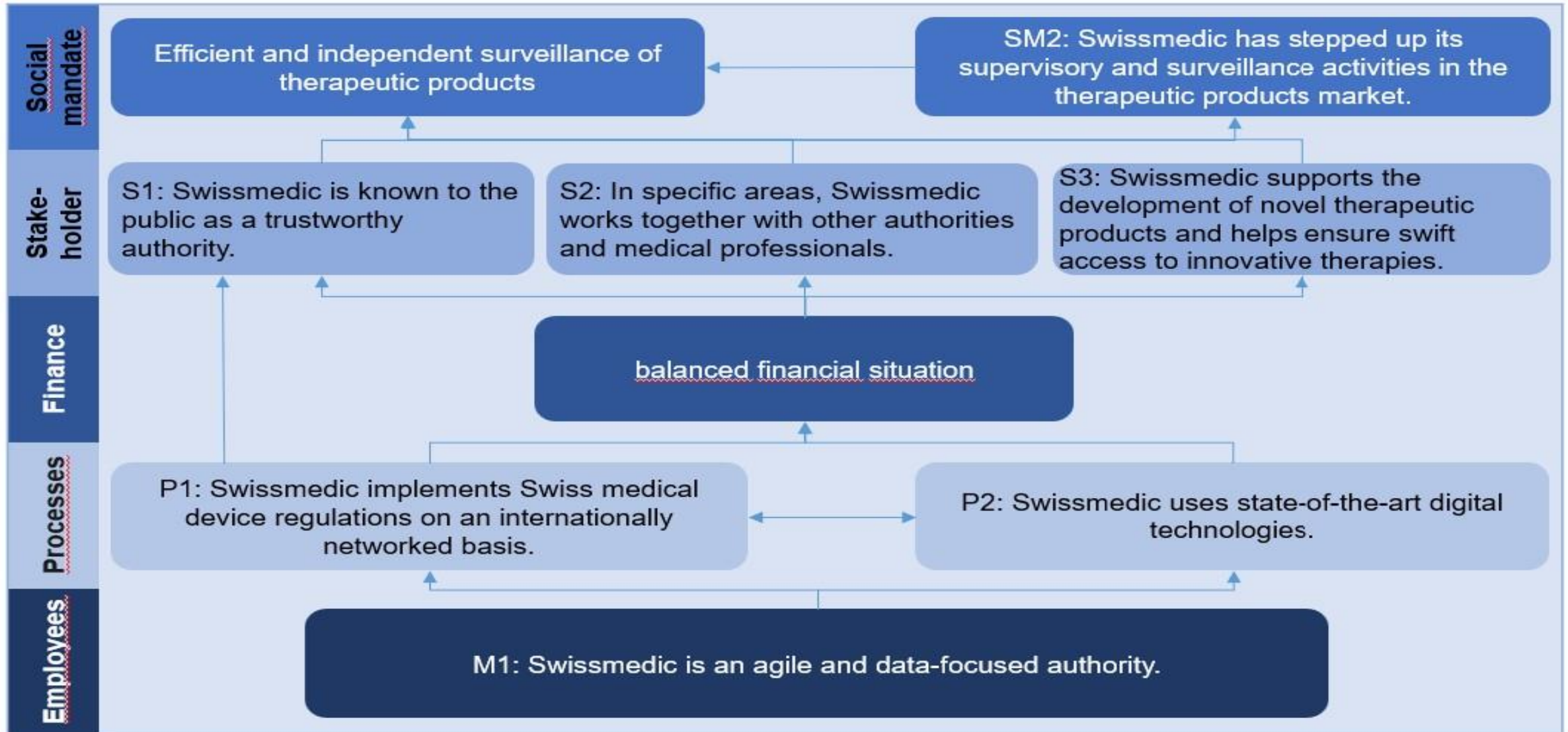
- To respond to the new developments, the term nucleic acid products covers more product types than are currently regulated in the EU by Regulation (EC) 1394/2007
- In the near future DNA or RNA products can be produced purely synthetically
- The processes /requirements should be identical for all nucleic acid products containing genetic information, regardless of whether they are used preventively or therapeutically
- Products comparable to ATMP in terms of their functionality and risk profiles serving other purposes (anti-aging, esthetical) will be included in the definition

**Vaccines-
prevent infections
or therapeutic
ATMP**

What is new –2

- **Temporary Authorization for the Use of Unapproved Advanced Therapy Medicinal Products (“hospital exemptions”)**
 - The development of ATMP has highly experimental nature and often originates in academic research environments
 - Most of the products are for rare diseases and are subsequently manufactured on a patient-specific basis or in small quantities, «unmet medical needs»
- **Biovigilance**
 - At the time of approval limited information available on benefits and long-term effects - appropriate measures to ensure that long-term treatment and safety data are documented and evaluated (e.g. mandatory Register)

Swissmedic Strategy-Map 2023 – 2026



International Procedures

- **ACCESS Consortium:** Worksharing Initiative with Canada, Australia, Singapore and UK -> Market Size of 160Mio
- **Project Orbis:** collaboration / Parallel Review with FDA
-> focus on oncologic drugs
- **OPEN** with EMA – just started, pilot during Covid-19 pandemic – focus on PRIME products – partners: Japan, Canada, Australia, Brazil
- **MAGHP** Marketing Authorisation for Global Health Products



International Authorisation Procedures

International collaboration and harmonization

Benefits of work-sharing

- Regulatory convergence , harmonisation
- Sharing and expanding scientific expertise
- Shorter timelines, faster access for patients
- Simultaneous market access in several countries
- Consolidated List of Questions
- Predictability: evaluation plan specified in advance
- Saving resources

Swissmedic supports the early access of ATMP's at all stages

Innovation Office (Start 2023) :

- Regular dialogue with industry, facilitation of international approval procedures
- Scientific advice meetings (Wyss Translation Center, Allschwil Basel , Biopole Lausanne; in 2024 : >50 meetings and 32 «regular» scientific advice meetings
- The needs of the stakeholders were assessed through an online survey of 39 ATMP companies: further and more intensive dialogue with Swissmedic to reduce uncertainty about the regulatory process and its requirements is welcome; increased demand was observed

Reimbursement: Support on request of FOPH through Early Dialogue

Saudi Food and Drug Authority (SFDA) Regulatory Updates on Advanced Therapies

Wala Turkistani
Head of Advanced Therapies
SFDA

CGTP Europe 2025
23- 24 October 2025
Basel, Switzerland

Supportive Programs

Breakthrough Designation

Accelerate development and review of new drugs that address unmet medical need in the treatment of serious or life-threatening conditions

Enhanced interaction and early dialogue with drug developers, to optimise development plans and speed up evaluation



Research and Investigational Drugs (RAID)

Designation for investigational products that are under development, not yet authorized in Saudi Arabia, and intended for future submission as marketing authorization application (MAA)

Enhanced interaction and early dialogue with drug developers, to optimise development plans and speed up evaluation



Guidance Documents

SFDA Guideline for Technology Transfer of Biological Products *(Under development)*

Clarify the regulatory requirements for the technology transfer of human biological medicinal products and to outline the key technical considerations

Special annex for considerations for tech transfer of ATMPs

Guidance on Submission of Chemistry, Manufacturing, and Control (CMC) Information for Cell-based Clinical Trial Applications



Guidance on Submission of Chemistry, Manufacturing, and Control (CMC) Information for Gene Therapy Clinical Trial Applications



SFDA Guideline on Classification of Advanced Therapy Medicinal Products



Regulatory Support and Innovation

SFDA in National Industrial Development and Logistics Program (NIDLP)

Support the local manufacturing for biological, genetics, and advanced therapy medicinal products (ATMPs)

This initiative contributes to achieving Vision 2030 strategic objective to localize promising manufacturing industries.

- Workshops with stakeholders
- Scientific and regulatory advice
- Training



SFDA Regenerative Medicine Scheme

Regulatory framework governing the classification, evaluation, and oversight of minimally manipulated (MM) cell-based products for human use in Saudi Arabia.

Thank You