A 360° System Overview

A Journey From SDEA to PSMF: The Complete Pharmacovigilance Lifecycle

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“When Quality Fails, Compliance Crumbles”

Table of Contents

GVP Expectations: 2024/2025 Focus Areas

- **GVP Module I (QMS):** Stronger emphasis on PV Quality System ownership, governance, and leadership accountability.
- **GVP Module II (PSMF):** Expectation of real-time PSMF accuracy with complete annexes and clear QPPV oversight.
- **GVP Module IV (Audits):** Risk-based PV audit programs covering vendors, partners, and affiliates with documented oversight.
- **GVP Module V (RMP):** Alignment of safety concerns, aRMM effectiveness, and periodic updates driven by signals and PSURs.
- **GVP Module VI (ICSRs):** Tighter focus on case quality, timeliness, data integrity, and narrative medical relevance.
- **GVP Module VII (PSUR/PBRER):** Consistency across benefit–risk assessments, signals, RMPs, and global submissions.
- **GVP Module IX (Signals):** End-to-end traceability of signal detection, prioritization, assessment, and decision-making.

Understanding Compliance (1)

Global Compliance

Meeting overarching requirements for major regulatory bodies (e.g., EMA, FDA) and aggregate reports.

- Global case management & Periodic Report Submissions
- Global Signal Detection & Management
- Risk Management Plan (RMP) Updates
- Benefit-Risk Assessments
- QPPV/Global Patient Safety Oversight

Local Compliance

Adhering to specific, individual requirements of each country's Health Authority.

- Local Expedited Reporting (ICSRs/SUSARs)
- Local Literature Screening
- Local RMP/RMM Implementation
- Health Authority Query Responses
- Local -Level SOPs & Oversight

Understanding Quality (2)

Overall System & Process Quality

Defines the health and robustness of the entire PV system (Macro-level).

- SOPs & GxP Alignment
- Audit & Inspection Readiness
- Vendor & Affiliate Oversight
- CAPA Effectiveness
- System Validation & Maintenance
- Training & Competency Metrics

Case Level & Data Quality

Focuses on the accuracy and completeness of individual safety reports (Micro-level).

- ICSR Data Entry Accuracy
- MedDRA & WHODrug Coding
- Narrative Quality & Coherence
- Medical Review Consistency
- Completeness of Follow-up
- QC/QA Error Rate Trending

PV Ecosystem: Core and Collaborators

PV Ecosystem: Key Responsibilities

Affiliate

- PV intelligence
- LPVRP/LSO responsibilities
- Training and documentation
- AE and local literature review
- Signal & Risk management
- Audit & Inspection readiness

License Partners

- Local PV intelligence
- Joint Signal & Risk management
- Local training & documentation
- Local regulatory submissions
- Local BCP & Archiving

Importers & Distributors

- AE and complaint reporting
- Trained staff
- Documented processes
- Timely data handover
- Audit/inspection support

CRO/Service Provider

- Global PV oversight
- SOP governance & training
- Case processing & compliance
- Global Literature monitoring
- Aggregate reporting
- Vendor oversight & audits

Database Hosting

- System validation CSV
- User management
- Backup & disaster recovery
- E2B gateway management
- 24/7 technical support

PV Quality System (SOPs, CAPA, Audits)

"Quality is not about SOPs. Quality is about living the SOPs." – The Rulebook

Key Content

- SOP lifecycle
- Training & competency
- CAPA effectiveness
- Vendor qualification
- Affiliate oversight
- Audit program
- Inspection readiness program (mock, toolkit, Q&A)

Risks

- SOPs not aligned
- Trainings not tracked
- CAPAs closed superficially

Safety Governance & QPPV Oversight

"Governance is where compliance lives. It is continuous scrutiny and improvement of the entire system."

Key Content

- QPPV oversight plan
- Metrics, KPIs, and quality indicators
- Deviation tracking
- Senior management involvement
- PV system training & roles

Risks

- Disconnected QPPV
- Periodic monitoring not performed/documented
- No evidence of escalation
- Lack of oversight & governance

Department Focus: Training and Compliance

Key Content

- Role-based training matrix (who needs what training)
- New-hire onboarding (GVP/PV fundamentals)
- Annual GVP/SOP refreshers for all staff
- Meticulous documentation of all training activities
- Compliance monitoring (KPIs, metrics)
- Competency assessment (not just "attended" training)

Common Pitfalls

- "Tick-box" training with no competency check
- Poor or incomplete training documentation (not inspection-ready)
- Non-PV staff (e.g., Sales) not trained in AE reporting
- Compliance metrics are collected but not acted upon

SDEA & Partner Oversight

"If SDEA is weak, everything downstream collapses. Inspectors ask for because it defines who does what and when. Yet most companies treat it as a legal formality."

Key Content

- Clear responsibility tables (ICSR/SUSAR timelines)
- Defined roles for partners and vendors
- Data flow and reconciliation process
- Safety contact points & escalation
- PV responsibilities: clinical vs post-marketing
- Periodic review and Change Control

Common Pitfalls

- SDEAs not aligned with practice
- No evidence of oversight
- Reconciliation failures
- Local affiliates unaware of commitments

Department Focus: PVCC & Medical Information

PV Call Centre (PVCC)

- 24/7 availability for AE & Product Complaint intake
- Standardized scripts and structured data intake forms
- Triage of AEs vs. PCs vs. Medical Information (MI)
- Reconciliation of call logs with the PV safety database
- Training on "open" questioning to elicit Aes

Pitfalls

- Staff not trained to identify non-explicit AEs
- Failure to reconcile call logs, leading to missed cases

Medical Information (MI)

- Use of standard response letters (SRLs)
- Robust process to identify AEs/PCs from inquiries
- Clear "hand-off" process and timelines to PV team
- Training MI staff on AE/PQC identification
- Reconciliation of MI database with PV database

Pitfalls

- Delayed transfer of safety information to PV
- "Hidden" AEs in complex medical questions are missed

Strategic & Expedited Risk Management (SERM)

A look at proactive and reactive measures in PV.

Case Intake & ICSR Management

"The foundation of PV: It is not about collecting cases, but missing a single case that could impact patient safety."

Key Content

- Global vs local intake pathways
- Triage, duplicate check, and validity
- Expedited reporting
- MedDRA coding accuracy
- Medical review consistency
- Follow-up strategy
- Case reconciliation with partners
- Quality review & error trending

Risks

- Missed cases
- Delayed SUSAR reporting
- Poor narrative quality
- Coding inconsistencies
- No medical oversight
- Local case submissions E2B

Literature Screening

"Literature searches are a scientific safety activity not only finding ICSRs."

Key Content

- Global and local literature
- Search term strategy
- Databases used
- Weekly/Monthly screening
- Backup process
- Documentation and evidence
- Linking literature cases into ICSR workflow

Risks

- Non-validated search strings
- Missed local literature
- No evidence of weekly monitoring

Aggregate Reporting (DSUR, PSUR/PBRER)

"Aggregate reports are the integral part of PV system. Cumulative data analysis affects –BRA, Signal and Risks."

Key Content

- Signal summaries
- Benefit-risk evaluation
- Cumulative tabulation accuracy
- Label alignment (SmPC/USPI)
- Submission tracking
- Medical writing quality

Risks

- Data inconsistencies
- Missed submission timelines
- Non-aligned Benefit-Risk sections

Signal Detection & Management

"The Brain of PV System – Missing signals in early stages costs you more"

Key Content

- Manual signal review
- Data mining (optional)
- Review frequencies
- Thresholds and triggers
- QPPV involvement
- Documentation of closed/no-signal decisions
- Integration into RMP and labeling

Risks

- Signal review meetings
- No end-to-end documentation
- Lack of follow-up actions

RMP & Risk Minimization Measures (RMM)

“An RMP is dynamic document and continuously updated throughout the Lifecycle of the product.”

Key Content

- Safety concerns
- Routine vs Additional RMMs
- Implementation tracking
- Local adaptations
- Compliance review
- Measuring effectiveness

Risks

- RMMs not implemented
- No effectiveness data
- RMP not updated after signals

PSMF – The Final Reflection of Your PV System

"The Blueprint of PV System: PSMF is the mirror. Inspectors don't inspect processes – they inspect the PSMF story."

Key Content

- PSMF index + main body
- Annexes completeness
- System description accuracy
- Contractual agreements list
- CAPA summary
- Metrics and system performance

Risks

- PSMF not aligned with practice
- Outdated annexes
- No vendor oversight documented

Cross-Functional Alignment

Clinical Operations, Medical Affairs, & Regulatory

Department Focus: Clinical Operations (ClinOps)

Key Content

- Clear safety reporting section in study protocols
- Investigator/site staff training on SAE/SUSAR reporting
- Management of SUSAR distribution to sites/IRBs
- Periodic reconciliation (Clinical DB vs. Safety DB)
- Oversight of CROs handling clinical safety tasks

Common Pitfalls

- **Reconciliation failures** – the #1 inspection finding
- Late or missed SUSAR reports from investigative sites
- Protocol ambiguity on safety reporting requirements
- Inadequate oversight of CRO safety data handling
- Failure to unblind for expedited SUSAR reporting

Department Focus: Global Medical Affairs (GMA)

Key Content

- Understanding regulatory & safety implications.
- AE reporting process - Medical Science Liaisons (MSL)
- PV oversight of Benefit-risk, signals and Risk measures
- Safety review of publications and presentations
- Handling safety aspects – Medico-Marketing/ Promotional materials

Common Pitfalls

- Lack of training on PV aspects, signals and risks.
- MSLs delaying AE reports
- Lack of documented safety issues and risks
- Inconsistent safety information provided by MSLs
- Tracking and updates on promotional materials

Department Focus: Global Regulatory Affairs (GRA)

Key Content

- Managing safety variations & labeling updates (CCDS, SmPC, USPI)
- Coordinating responses to Health Authority (HA) queries
- Submission of aggregate reports (DSURs, PBRER, RMPs)
- Communicating critical HA feedback to PV/QPPV
- Tracking global submission timelines and HA commitments

Common Pitfalls

- Slow implementation of safety-related label updates
- Inconsistent answers provided to different HAs
- Delayed communication of HA requests to the PV team
- Missed aggregate report submission deadlines and eCTD submission failures

Current Trends in PV, RA & QA

AI/ML Integration: Automation of case intake, case processing, and preliminary signal detection.

Automation of PV Activities: Robotic Process Automation (RPA) for repetitive tasks like data entry and reconciliation.

Real-World Data & Evidence: Inclusion of data from EMR, claims, and wearables to support benefit-risk.

Continuous QMS Validation: Moving from periodic to continuous validation of PV systems.

System Integration: Linking CTMS, RIMS, eQMS, LMS and Safety databases for a single source of system.

Challenges & Best Practices

Common Challenges

- Maintaining data quality across global partners
- Ensuring consistent, effective training and evaluation
- Complex data exchange and reconciliation
- Early & accurate signal detection from multiple sources
- Tracking risk minimization (aRMM) effectiveness
- Meeting divergent global submission timelines

Best Practices

- Standardized global SOPs with local addendums
- Strong cross-functional collaboration (PV/RA/QA/MA)
- Trainer evaluation and competency checks
- Risk-based approaches to auditing and oversight
- Leveraging AI/ML for efficiency and optimization

Key Takeaways

PV Intelligence: Regular both global & local PV intelligence.

Agreements: SDEAs/PVAs must be aligned with local & global regulations.

Documentation: SOPs & WIs must reflect the actual processes & procedures.

Training: Focus on training evaluation, documentation, and competency.

Oversight: Conduct regular, risk-based audits of all partners and processes.

Improvement: Implement a continuous Quality Improvement Plan (QIP).

Automation: Adopt AI/ML and automation to enhance quality and compliance.

Thank you!

For attending the session.