

NCA perspective on the opportunities the Delegated Regulation (EU) 2016/161 on safety features brings within and beyond its anti-falsification remit

Damjan Bonač - Pharma Supply Chain & Logistics Forum - 19.10.2023

Content of presentation













- Legal framework & Structure of the system
- Implementation & State of play
- Benefits & Improvements



Legal framework







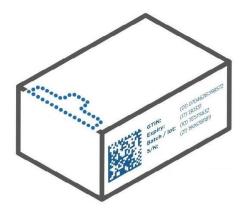






The Falsified Medicines Directive (Directive 2011/62/EU)

- Obligatory safety features a unique identifier and an anti-tampering device.
- Published on 1 July 2011, and applies since 2 January 2013.
- It amended Directive 2001/83/EC.



Legal framework







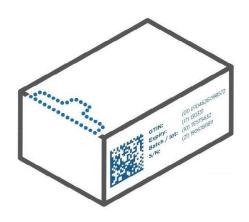






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Commission Delegated Regulation (EU) 2016/161

- Details the characteristics of the safety features, how medicine authenticity should be verified and by whom.
- Establishment, management, structure and accessibility of the repositories system.

Adopted on 2 October 2015, apply as of 9th February 2019.

PC: 09876543210982 12345AZROF1234567890

(optional) A1C2E3G4I5 Batch:







System structure



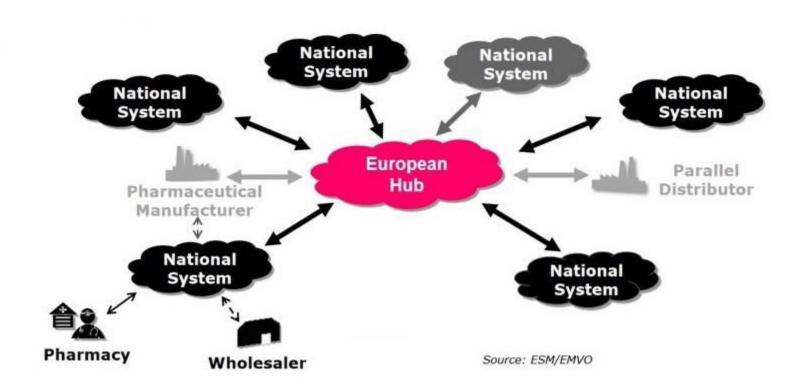














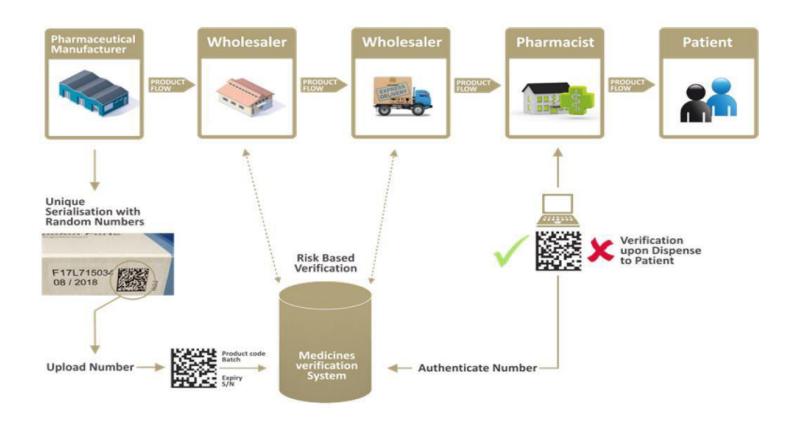
















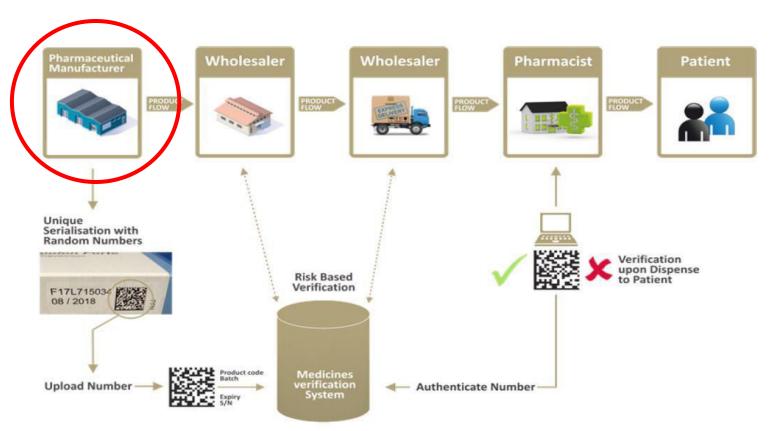






























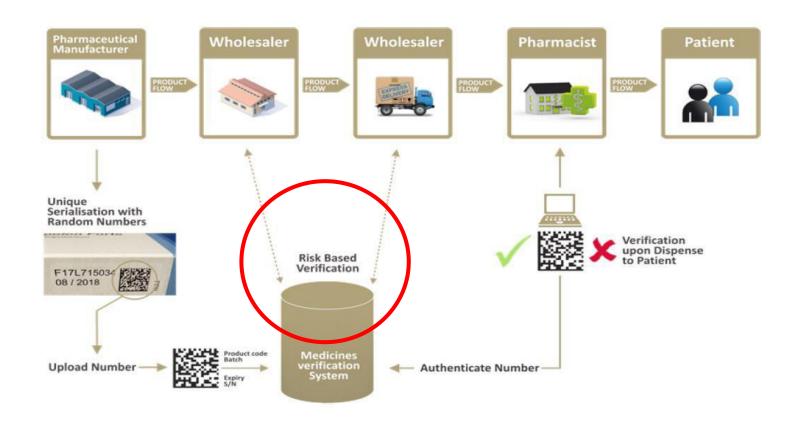




























• Start - 9th February 2019

- Need for "stabilization periods"
- Stabilization periods prevented disruptions in the supply chain, but prolonged implementation phase.
- Ending the stabilization means that pack that triggered an alert must not be supplied and every alert has to be fully investigated.

In Stabilisation period

No stabilisation period has been decided

Stabilisation period has ended

In Phased approach to end stabilisation period





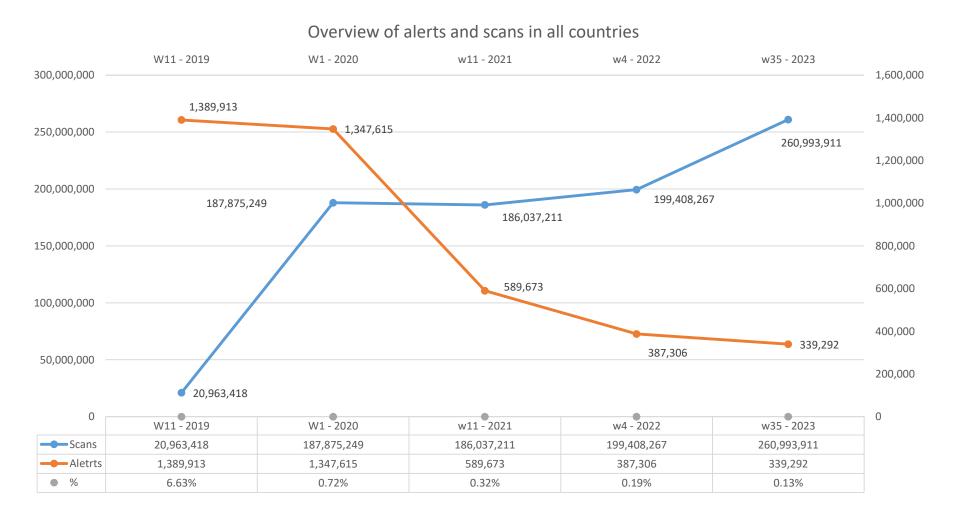
























































1.000.000 scans per week.

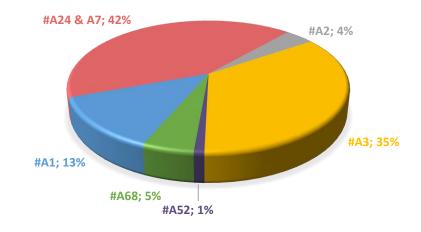


130 relevant alerts per

Frequent alert types:

#A24 & A7 - Attempt to decommission an already decommissioned pack

#A2 - Bach ID unknown & #A3 - unknown serial number





















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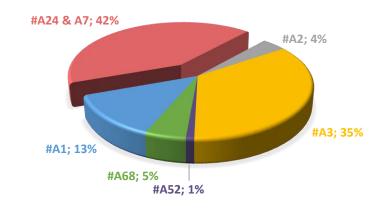


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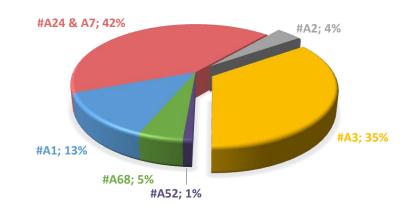


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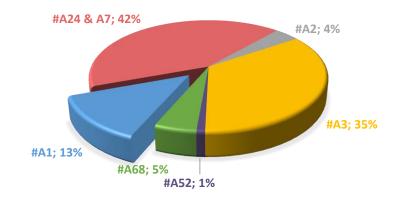


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How many falsified packs have been found so far?





Quality defect:

- A parallel trader noticed a leak inside a blister.
- The packaging was sent back to be destroyed but was accidently shipped to pharmacy.
- #A24 & A7 alert was triggered Attempt to decommission an already decommissioned pack.
- The system prevented supply.















Returns of medicines by patients:

- #A24 & A7 alert is triggered Attempt to decommission an already decommissioned pack.
- Pharmacy response:

"By mistake, we almost released boxes that were intended for destruction. There was mistake in the handling and stacking of medicines. Human error in tidying up, the pack was put on the shelf instead in the box for waste medicines. **The system prevented the supply.**"



















Importance of an ATD:

- Theft of the medicinal product.
- An alert was not triggered.
- ATD just on the top of the pack.
- Medicines could be replaced with falsified ones.





Eliminate technical alerts





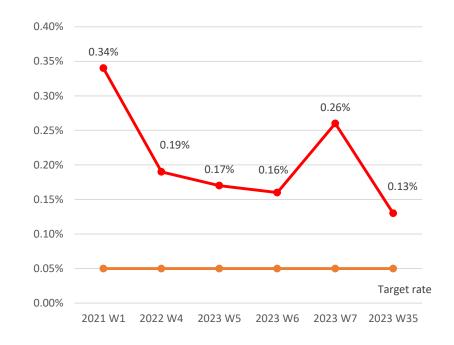








- Number of false alerts too high.
- EMVO target rate: less than 0,05%.
- Not all issues are complex.
- We must fix the causes of false alerts and not just silence them.

















- Overall compliance of pharmacies is good.
- Deviations were noticed with specific medicines.
- Verification rate should be 100%.



Deactivated	Supplied	%	Medicinal product
524	539	97,2	Plivit D3 4000 i.e./ml peroralne kapljice
99	183	54,1	Asentra 50 mg film. obložene tabl.
643	649	99,1	Nalgesin forte 550 mg film. obložene tabl.
295	298	99	Concor 5mg film. obložene tablete
9	9	100	Concor COR 10 mg film. obl. tabl.
1	1	100	Tametil 10 mg filmsko obložene tablete















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Transition to full track and trace?



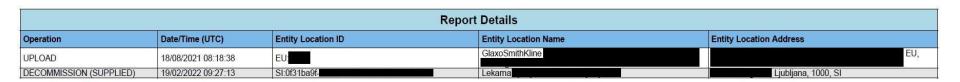


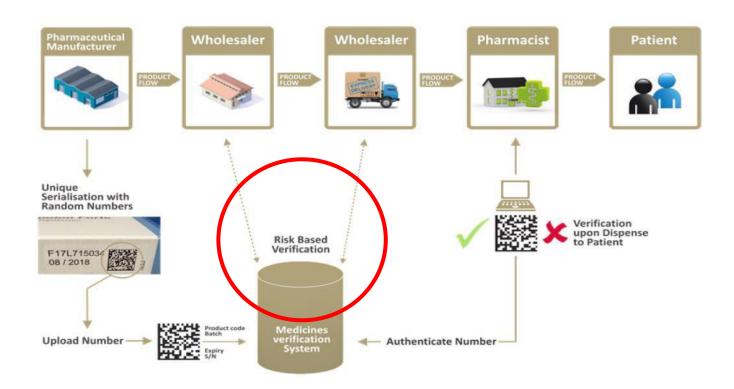












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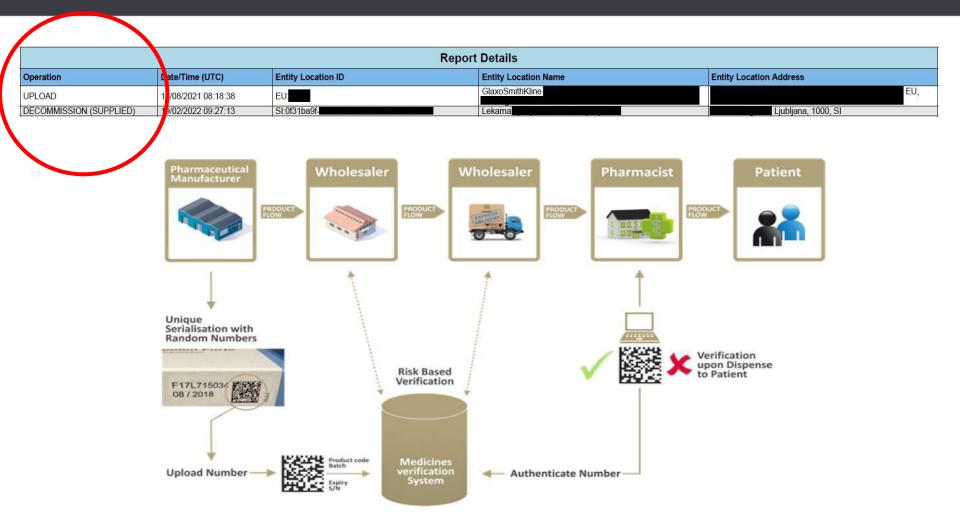












We should not neglect ATD! 🕒 😂

























We should not neglect ATD!

















- No mandatory rules on ATD design.
- ISO 21976:2018; Packaging Tamper verification features for medicinal product packaging.

EMVS opportunities?













Could the system be used for monitoring of shortages?

Article 39

Access by national competent authorities

A legal entity establishing and managing a repository used to verify the authenticity of or decommission the unique identifiers of medicinal products placed on the market in a Member State shall grant access to that repository and to the information contained therein, to competent authorities of that Member State for the following purposes:

- (a) supervising the functioning of the repositories and investigating potential incidents of falsification;
- (b) reimbursement;
- (c) pharmacovigilance or pharmacoepidemiology.





EMVS opportunities?













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Questions?















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