

# Crossborder Access to Clinical Trials

EU X CT



# Why cross-border access to trials?

- Clinical trials are the gold standard for establishing new and reliable treatment options
- Although many patients are interested in joining a clinical trial with innovative medicines, only a small minority of patients can benefit from clinical trials (3-5%) due to various challenges
- Opportunities for patients to join a clinical trial in Europe differ greatly depending on the country they live in
- **Over the past 10 years, phase 1 clinical trials and phase 3 trials for rare diseases remain concentrated in Western European countries**



Source:

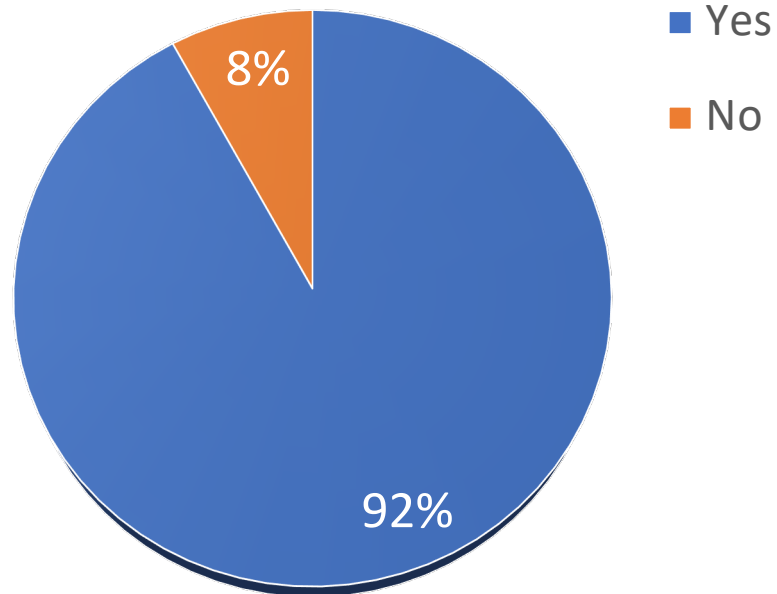
- Claire Rim Examination of current status of cross-provincial border access for clinical trials for patients with cancer. e18661 ASCO 2023. [link](#)
- Lalova T, Padeanu C, Negrouk A, Lacombe D, Geissler J, Klingmann I and Huys I (2020) Cross-Border Access to Clinical Trials in the EU: Exploratory Study on Needs and Reality. *Front. Med.* 7:585722. doi: 10.3389/fmed.2020.585722 [link](#)



# The need for cross-border access to trials

An exploratory study\* in 396 stakeholders conducted in 2019/2020 showed a high need for cross-border access to clinical trials in Europe

## Do we need cross-border access to trials?



## Stakeholder representation in survey

Investigators	46%
Patient organisations	23%
Individual patients or carers	10%
Sponsors	10%
Ethics Committees	1%
Regulators	1%
Others	9%

\* [Frontiers | Cross-Border Access to Clinical Trials in the EU: Exploratory Study on Needs and Reality \(frontiersin.org\)](https://www.frontiersin.org)



# EU-X-CT Initiative Mission

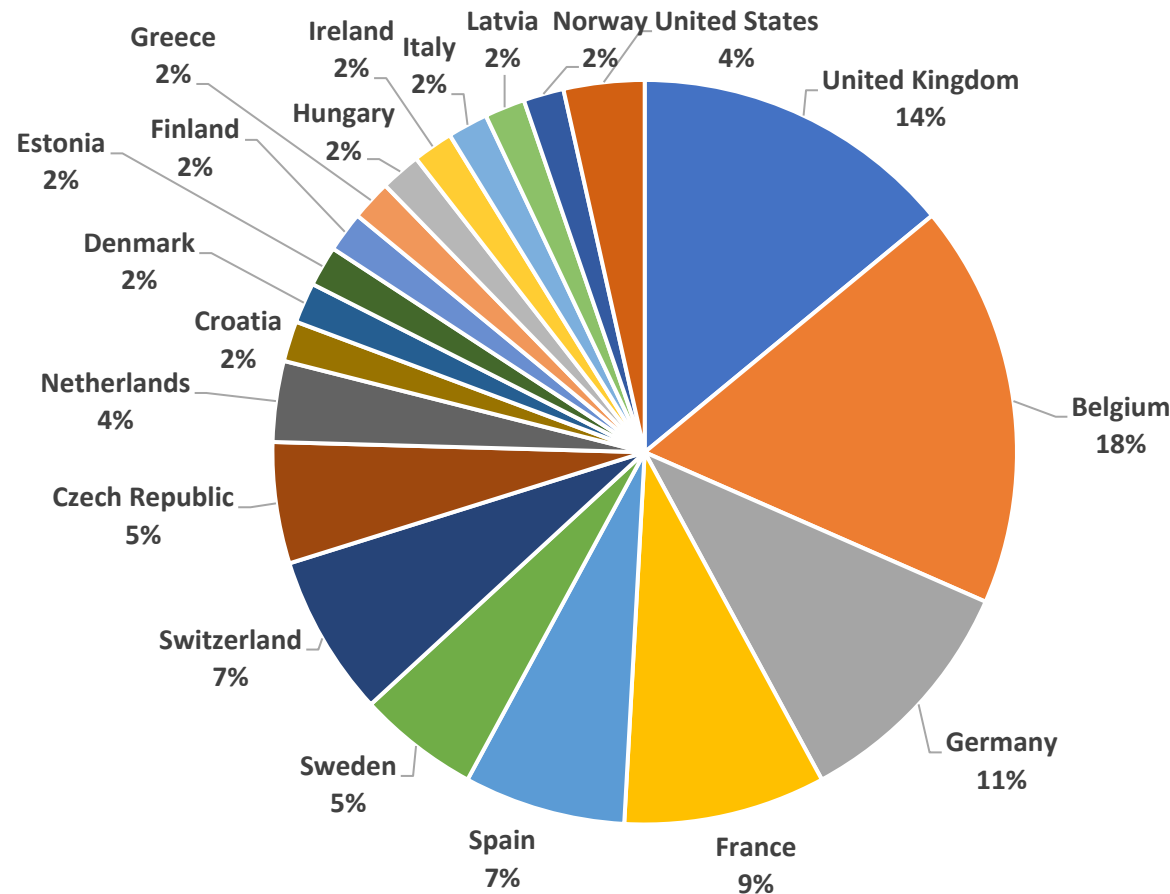
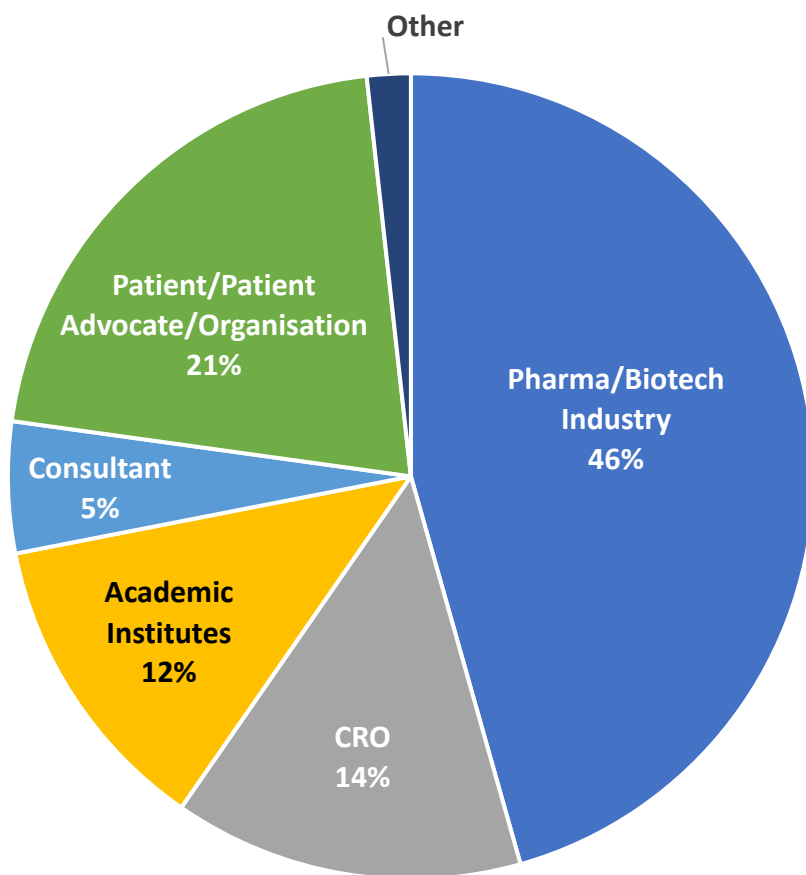
Based on the EU's principle of freedom of movement, participation in a clinical trial abroad is **theoretically possible**. However, there is no specific European legislation or guidance on facilitating cross-border clinical trial participation

Participation in a clinical trial is an important element of healthcare, especially for **patients with life-threatening and/or rare diseases** for whom a medicinal product under investigation might be the only therapeutic option.



The EU-X-CT Initiative is reaching out **to enable cross-border access to trials for patients** when there is no option for them to join a clinical trial in their own country

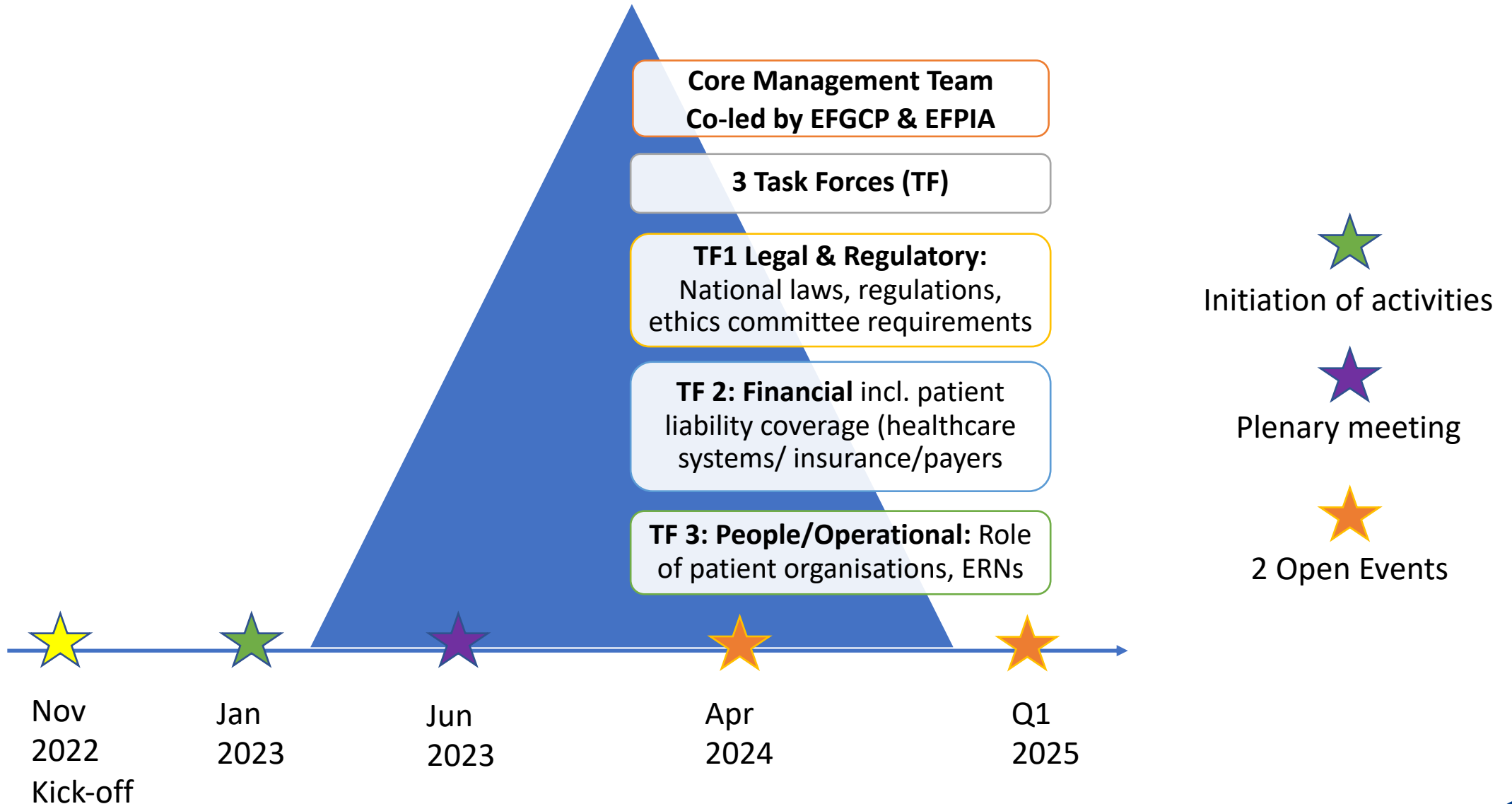
# Who are the initiative members?



57 members from 19 European countries and the United States

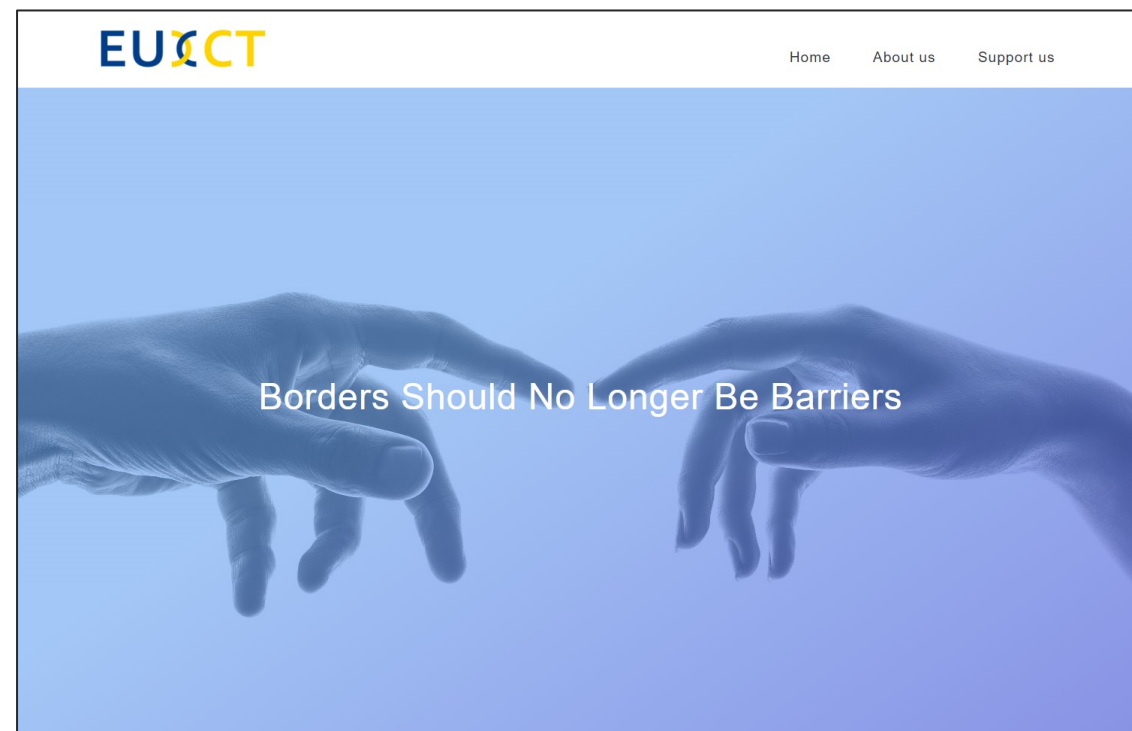


# How are we organized?



## We are developing the EU-X-CT website

- Independent, neutral
- Freely accessible
- Presentation of information on known conditions for cross-border access and options per country for
  - Patients and patient organisations
  - Treating physicians/ investigators
  - Sponsors
  - Healthcare systems/payers/insurers
- Recommendations, guidelines
- Information on European and national events/occasions to discuss/improve the conditions for better cross-border access to trials



# Where are we now?

## Task Force 1: information on regulatory, legal, ethical aspects

- Survey distributed to stakeholders through the EU-X-CT members in May 2023
- >100 responses from stakeholders so far
- Feedback to the questions is still under evaluation
- Following up with respondents who agreed to be contacted for any missing information
- Questions were translated into a few EU languages (French, Spanish, Bulgarian) to enable more responses
- Results will be incorporated into the EU-X-CT website

# Examples of feedback

## Germany

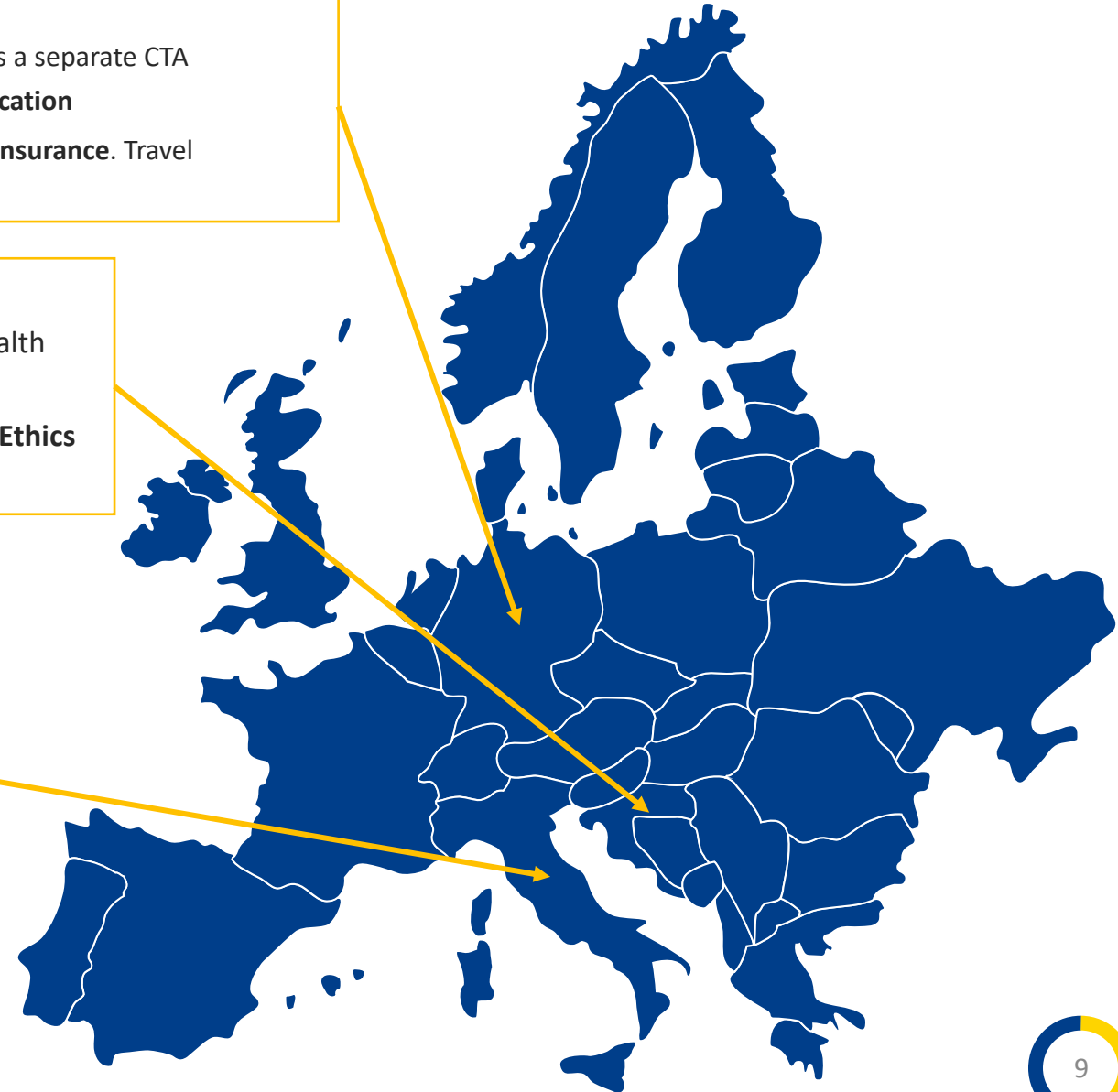
- Follow-up visits and treatments for cross-border patients back in Germany is approved as a separate CTA
- **Ethics Committee (EC) approval needed if other languages are to be used for communication**
- Important is **translation of patient facing materials into their own language and travel insurance**. Travel arrangements by third party to ensure data protection of participant.

## Croatia

- Trial participation in Croatia possible for patients with Croatian citizenship and health insurance living in neighboring country (i.e. Bosnia and Herzegovina)
- Other patients must have: **ICF in native language or interpreter, ICF approved by Ethics Committee and Ministry of Health**

## Italy

- Italian patients can participate in trials approved in other countries (recipient country regulations will apply), patients from EU and Non-EU countries are able to participate in trials in Italy
- One survey responder stated ECs must only be notified about cross-border patients, another commented that EC approval is required
- Informed consent requirements are strict and **patient documents must be translated**. A site appointed cultural mediator/translator **should be available for the patient at all visits**.



# Potential concerns raised

## **Ethics Committee in Belgium commented:**

- Need to consider the burden of frequent relocation for patients
- Possibility of clinical follow-up on site, and differences in care in each country
- Possible effect on attracting patients from other countries and problems with reimbursement of costs at the sites afterwards
- Financial burden at sites
- Practical organization at the sites receiving cross-border patients - to what extent would these need to consider people coming from abroad
- How to ensure sponsors do not access the identity of the trial participants



# Potential solutions

## Feedback from investigator in Denmark:

- Patients must receive written information in a language they can read and understand (it doesn't need to be their mother tongue).
- If they don't read and understand Danish, a correct translation into another language can be done (by a qualified translator), and the translated document sent to the Ethics Committee as a notification.
- The Ethics committee acknowledges receipt but doesn't check the correctness of the translation - the submitting person/party is responsible for the translation being correct.
- Several inspections by the regulatory body (DKMA) acknowledged that we enroll children referred from abroad
- Regarding insurance during the trial, a publicly funded compensation system is in place (Patienterstatningen), which covers ANY damages compensation for patients treated at a publicly funded Danish hospital (within a clinical trial or in standard clinical care) independent of the patient's country of residence.
- For patients referred from an EU country to Denmark an S2 form or other payment guarantee (e.g. from home country health insurance or referring hospital) must be in place.



# Where are we now?

## Task Force 1: initial evaluation

- Thus far it is evident that there are largely no national legal/regulatory/ethical frameworks available for cross-border access to trials
- However, feedback supports that cross-border trial access in general is not prohibited
- Several countries (and the Heads of Medicines Agencies\*) have issued guidelines for cross-border access for patients from Ukraine to clinical trials in the EU
- Country approval requirements and guidance from Ethics Committees potentially required on a case-by-case level
- Patient facing material is often required in their own language and there can be requirements for translation/ translators at sites and approval by Ethics Committees
- Insurance/indemnity considerations are key, and it is difficult to find information
- Further analysis required

[\\*CTCG recommendation to sponsors on managing the impact of the war in Ukraine on clinical trials](#)

# What information are we collecting?

## Task Force 2: Financial and insurance aspects

### Collecting information on coverage of healthcare costs for trial participants e.g.

- Coverage for costs not covered by the trial fees like travel and/or baseline diagnostic and therapy costs at the site in the country hosting the trial
- Cover for additionally occurring costs like adverse-event-related medical care or long-term baseline medication in the patient's home country between their study visits?
- Follow-up healthcare costs occurring in the patient's home country after their participation in a trial in another country?
- Liability insurance coverage for patients not covered by the insurance at the trial site that enrolls the patient

**Very limited feedback obtained so far indicates the lack of availability of information on healthcare costs and insurance/liability beyond a few individual experiences**

**More support is needed to reach out to knowledgeable stakeholders**

# What information are we collecting?

## **Task Force 3: People & operational aspects (patients and investigators)**

Two separate surveys are being developed – one for investigators and one for patients/ patient representatives. The latter is available in 24 national languages.

The survey for investigators covers e.g.

- The options that their site offer for patients coming from abroad
- How many patients have been enrolled in the past 24 months from other countries
- The challenges of enrolling patients from abroad
- Additional administrative procedures
- Language and cultural barriers
- Logistical challenges – accommodation, trial medication and care in the patients' home country

# What information are we collecting?

## Task Force 3

The survey being sent to patients addresses aspects such as:

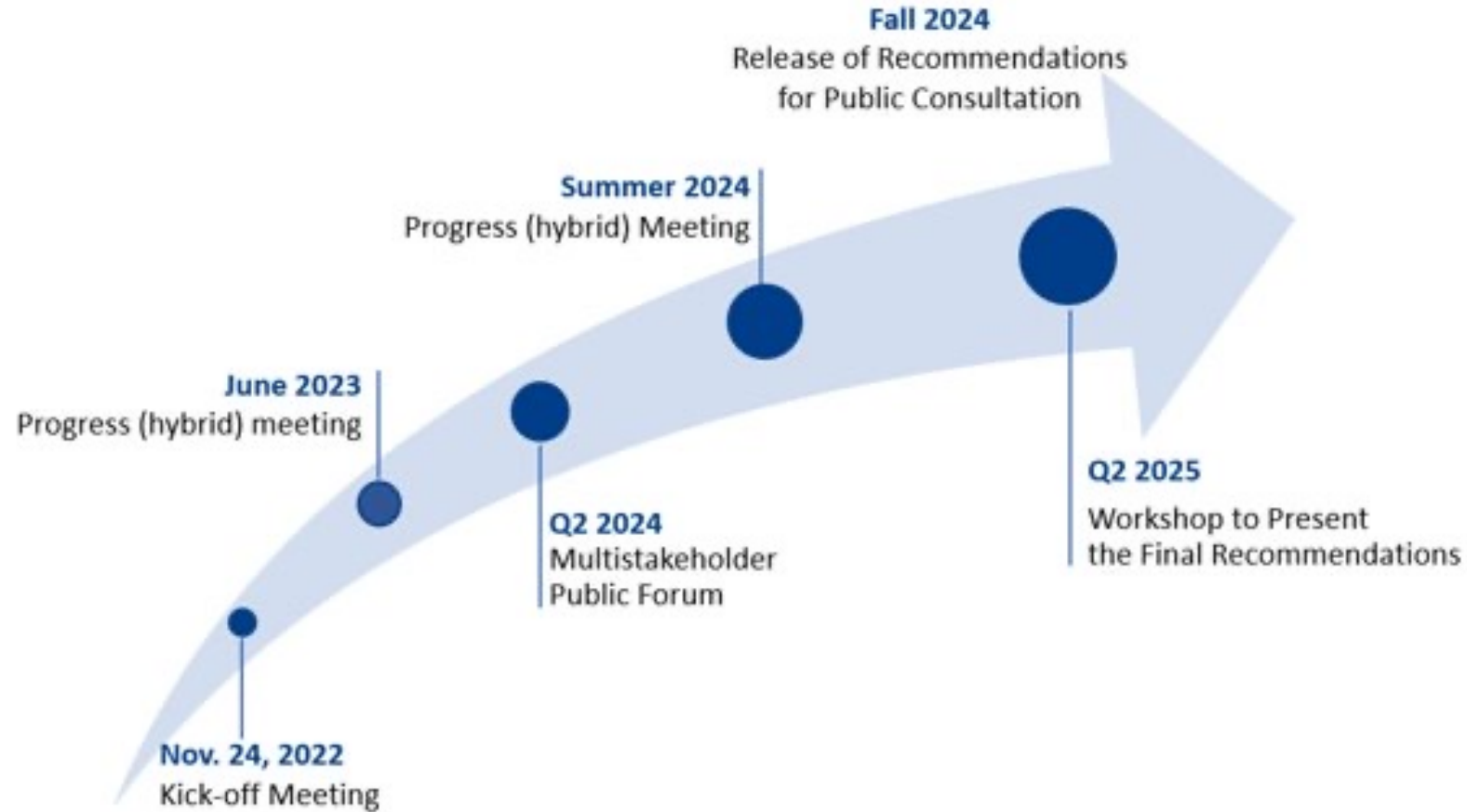
- Burdensome procedures at hospital when trying to access a clinical trial in another country
- Problems with language barriers
- Any accommodation and travel issues
- Problems with access to medical documentation
- Any issues in home country with cross-border trial participation (e.g. continuation of medical care, access to trial medication)

# Next steps

- Using the information collected, the EU-X-CT initiative will draw up a set of recommendations for cross-border access to trials based on legal requirements, financial practices, and investigator and patient experiences collated from the surveys
- A public stakeholder forum will be held on 12<sup>th</sup> April 2024 in Brussels to discuss the results of the EU-X-CT surveys and how to proceed with drafting the recommendations
- **We will share the draft recommendations with multiple stakeholders including regulators and the EU Commission for input and awareness. We will aim to obtain buy-in for the recommendations from as many stakeholders as possible.**
- All information will be made available on a public EU-X-CT website set up and managed by EFGCP



# Next milestones...



# Thank you!

On behalf of EU-X-CT

**New members are always welcome to join the initiative!**

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