European Herbal Practitioners Association

Response to EMEA Consultation Document CPMP/QWP/2819/00 REV 1 AKA EMEA/CVMP/814/00 REV 1

Guideline on Quality of Herbal Medicinal Products/Traditional Herbal Medicinal Products

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- 1. The European Herbal Practitioners Association (EHPA) was founded in 1993. It represents the interests of professional herbal practitioners and their patients across the EU. The EHPA is designated an "interested party" by the EMEA Herbal Medicinal Products Committee, attending its open meetings.
- 2. The EHPA notes that Footnote 1 of the document states, "Throughout the guideline and unless otherwise specified, the term 'herbal medicinal products' includes 'traditional herbal medicinal product'". It is thus clear that so far as quality assurance is concerned, the Guideline on the Quality of Herbal Medicinal Products regards herbal medicinal products as synonymous with traditional herbal medicinal products. The EHPA contends that quality guidelines for traditional herbal medicinal products should be specifically designed to recognise the characteristics and meet the needs of traditional herbal medicinal products. As explained below, these should not be taken to be exactly the same as those of herbal medicinal products.
- 3. The Guidelines on Specifications CPMP/QWP/2819 (hereinafter referred to as "the Guidelines" were originally developed by the Herbal Medicinal Products Working Party (HMPWP) in 1999. These guidelines were published to provide guidance in support of a full marketing authorisation for licensed herbal products and were adopted by the Committee for Proprietary Medicinal Products (CPMP) and the Committee for Veterinary Medicinal Products (CVMP) in July 2001. Thus these guidelines were developed and agreed a considerable time before the passage into law of the Traditional Herbal Medicinal Products Directive (THMPD) in April 2004. This Guideline and CPMP/QWP/2820/00 Rev 1, both part of the present consultation process, seek to ensure the appropriateness of the Guidelines for the THMPD.
- 4. Although the EHPA concurs with the general principle proposed in the Guidelines that "the quality of a medicinal product is independent of its traditional use", nevertheless, it should be recognised that the Guidelines were developed for assuring the quality of products licensed under Directive 2001/83/EC (e.g. the "Well-Established Use" category), not Directive 2004/24/EC (THMPD). The EHPA submits that these current Guidelines now out for consultation should be redrafted to suit the new class of herbal products destined to be licensed under Directive 2004/24/EC (THMPD). The adoption of specific Guidelines appropriate to this new class of herbal products will enable the THMPD to achieve its objective of bringing traditionally-used herbal medicinal products within the EU medicines licensing system. We submit that this goal will not be achieved if the currently proposed

- Guidelines are adopted without such revision and that this will lead to an increase by the public of unregulated herbal products available via the Internet.
- 5. It is a fact that many traditional herbal medical products currently on sale in the EU are multiherb preparations. It is not unusual for such traditional formulae to comprise 5 or more herbs. In the case of traditional Chinese, Tibetan and Ayurvedic medicines, the number of herbs in a complex herbal formula may frequently number 10 or more.
- 6. The EHPA submits that the relatively rigid quality standards being implemented by these Guidelines and those also under review in the consultation Guideline entitled Guideline On Quality of Herbal Medicinal Products (CPMP/QWP/2820/00 Rev 1) are proving, technically very difficult and in many cases unworkable in practice. The Guideline (2819/00 Rev 1) calls for tests to demonstrate that the known constituents of any herbal medicines in the product are present in the finished product. The Guideline states (vide page 7 "Control Tests on the Finished Product") that if a herbal medicinal product contains a combination of several herbs, "the determination may be carried jointly for several active substances." The Guidance note advises (vide page 6 "control of herbal preparations") that such identification tests should be carried out using "appropriate chromatographic methods". The problem here is that demonstrating exactly what is present in the finished product by chromatographic means is easier said than done. These quality control measures are relatively easy to carry out for an orthodox drug which contains a single chemical entity or for a single herbal compound for which the Guidelines were originally designed but often impossible to demonstrate when evaluating a complex herbal mixture of several herbs each one containing a multiplicity of chemical signatures. The EHPA contends that the proposed Guidelines must be adapted so that they can apply to complex herbal mixtures.
- 7. The EHPA submits that quality and safety of multi herb products should be assured by the identification and control of the raw materials of these products rather that by the quantitative testing of the end product.
- 8. Similarly, the EHPA submits that stability testing of the final product should focus on microbial, physical and finger-print chromatographic testing and only require the quantification of claimed active(s) or marker(s) solely for single-herb products where appropriate.
- 9. The rationale of the THMPD is that herbal products must demonstrate 30 years of safe traditional use, with 15 years of this usage being within the EU. In this way, by definition, herbal products licensed under the THMPD must have demonstrated a good safety profile over many years so that the quantification of actives is not necessary for establishing a safety profile. Moreover the quantification of actives is unnecessary for the establishment of efficacy since the basis of efficacy for the THMPD is traditional use.
- 10. The EHPA proposes that this proposed quality and safety model is supported by required pharmacovigilance, providing a clear method of evaluating the safety of traditional herbal medicinal products on the market.

This response sent to QWP@emea.eu.int 30/09/2005
It should be read in conjunction with the EHPA response to CPMP/QWP/2820/00 Rev 1 sent previously.

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