REPUBLIC OF LEBANON
MINISTRY OF PUBLIC HEALTH

Lebanese Guideline on Good Pharmacovigilance Practices (LGVP)

2025

Annex 1

Definitions

Version 1.0

Development Timeline of the Lebanese Good Pharmacovigilance Practices (LGVP) Guideline – Annex 1

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Annex I – Definitions

Abuse of a medicinal product

Persistent or sporadic, intentional excessive use of medicinal products, which is accompanied by harmful physical or psychological effects.

Adverse event (AE); synonym: Adverse experience

Any untoward medical occurrence in a patient or clinical trial subject administered a medicinal product does not necessarily have a causal relationship with this.

An adverse event can therefore be any unfavorable and unintended sign (e.g., an abnormal laboratory finding), symptom, or disease temporally associated with using a medicinal product, whether or not related to the medicinal product.

Adverse event following immunization (AEFI)

See Vaccine pharmacovigilance, Vaccine product-related reaction, Vaccine quality defect-related reaction, Immunization error-related reaction, Immunization anxiety-related reaction

Adverse reaction; synonyms: Adverse drug reaction (ADR), Suspected adverse (drug) reaction, Adverse effect, Undesirable effect

A response to a medicinal product that is noxious and unintended[1].

Response in this context means that a causal relationship between a medicinal product and an adverse event is at least a reasonable possibility (see Annex IV, ICH-E2A Guideline, https://database.ich.org/sites/default/files/E2A_Guideline.pdf).

Adverse reactions may arise from the use of the product within or outside the terms of the marketing authorization or from occupational exposure. Conditions of use outside the marketing authorization include off-label use, overdose, misuse, abuse, and medication errors.

[1] In the context of clinical trials, an adverse reaction is defined as all untoward and unintended responses to an investigational medicinal product related to any dose administered.

See also Adverse event, Serious adverse reaction, Unexpected adverse reaction, Off-label use, Overdose, Misuse of a medicinal product, Abuse of a medicinal product, Occupational exposure to a medicinal product

Audit

A systematic, disciplined, independent, and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled (see ISO 19011 (3.1)[2]).

Audit finding(s)

Results of the evaluation of the collected audit evidence against audit criteria (see ISO19011 (3.4)). Audit evidence is necessary to support the auditor's results of the evaluation, i.e., the auditor's opinion and report. It is cumulative in nature and is primarily obtained from audit procedures performed during the course of the audit. *See also Audit*

Audit plan

Description of activities and arrangement for an individual audit (see ISO19011 (3.12)).
See also Audit

Audit program

A set of one or more audits planned for a specific timeframe and directed towards a specific purpose
(see ISO 19011 (3.11)). *See also Audit*

[2] International Organization for Standardization (ISO); www.iso.org

Audit recommendation

Describes the course of action management might consider to rectify conditions that have gone awry and to mitigate weaknesses in systems of management control (see Sawyer LB et al, 2003[3]).

Audit recommendations should be positive and as specific as possible. They should also identify who is to act on them (Sawyer LB et al, 2003). *See also Audit*

Clinical trial

Any investigation in human subjects intended to discover or verify the clinical, pharmacological and/or other pharmacodynamic effects of one or more investigational medicinal product(s), and/or to identify any adverse reactions to one or more investigational medicinal product(s) and/or to study absorption, distribution, metabolism, and excretion of one or more investigational medicinal product(s) to ascertain its (their) safety and/or efficacy. This includes clinical trials carried out in either one site or multiple sites, whether in one or more Countries. *See also Ongoing clinical trial, Completed clinical trial, Investigational medicinal product*

Closed signal

In periodic benefit-risk evaluation reports, a signal for which an evaluation was completed during the reporting interval (see Annex IV, ICH-E2C(R2) Guideline). https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf

This definition is also applicable to periodic safety update reports. *See also Signal*

Company core data sheet (CCDS)

For medicinal products, a document prepared by the marketing authorization holder containing, in addition to safety information, material related to indications, dosing, pharmacology, and other information concerning the product (see Annex IV, ICH-E2C(R2) Guideline). https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf

[3] Sawyer LB, Dittenhofer MA. Sawyer's Internal Auditing. 5th ed. Altamonte Springs, FL: The IIA Research Foundation; 2003.

See also the Company's core safety information

Company core safety information (CCSI)

For medicinal products, all relevant safety information contained in the company's core data sheet, prepared by the marketing authorization holder and which the marketing authorization holder requires to be listed in all countries where the company markets the product, except when the local regulatory authority specifically requires a modification (see Annex IV, ICH-E2C(R2) Guideline) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

It is the reference information by which listed and unlisted are determined for the purposes of periodic reporting for marketed products, but not by which expected and unexpected are determined for expedited reporting (see Annex IV, ICH-E2C(R2) Guideline). *See also the Company's core datasheet*

Compassionate use of a medicinal product

Making a medicinal product available for compassionate reasons to a group of patients with a chronically or seriously debilitating disease or whose disease is considered to be life-threatening, and who cannot be treated satisfactorily by an authorized medicinal product (the medicinal product concerned must either be subject of an application for a central marketing authorization or must be undergoing clinical trials).

Completed clinical trial

Study for which a final clinical study report is available (see ICH-E2F Guideline). https://database.ich.org/sites/default/files/E2F_Guideline.pdf

See also Clinical trial.

Consumer

For the purpose of reporting cases of suspected adverse reactions, a person who is not a healthcare professional, such as a patient, lawyer, friend, or relative/parent/child of a patient (*see Annex IV, ICH-E2D Guideline*). https://database.ich.org/sites/default/files/E2D_Guideline.pdf

Crisis

A situation where, after assessment of the associated risks, urgent and coordinated action within the country is required to manage and control the situation. *See also Incident*

Data lock point

For a periodic safety update report (PSUR), the date is designated as the cut-off date for data to be included in a PSUR.

For a periodic benefit-risk evaluation report (PBRER), the date designated as the cut-off date for data to be included in a PBRER is based on the international birth date (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

For a development safety update report (DSUR), the date designated as the cut-off date for data to be included in a DSUR is based on the development international birth date (*see ICH-E2F Guideline*) https://database.ich.org/sites/default/files/E2F_Guideline.pd.

The date includes day and month (*see ICH-E2F Guideline*) https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

See also Periodic safety update report, Development safety update report, international birth date, Development international birth date

Development International Birth Date (DIBD)

Date of first approval (or authorization) for conducting an interventional clinical trial in any country (*see ICH-E2F Guideline*) https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

Development Safety Update Report (DSUR)

Format and content for periodic reporting on drugs under development (*see ICH-E2F Guideline*) https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

Direct Healthcare Professional Communication (DHPC)

A communication intervention by which important information is delivered directly to individual healthcare professionals by a marketing authorization holder or by a competent authority, to inform them of the need to take certain actions or adapt their practices in relation to a medicinal product.

DHPCs are not replies to inquiries from healthcare professionals.

EU reference date; synonym: Union reference date

For medicinal products containing the same active substance or the same combination of active substances, the date of the first marketing authorization in the EU of a medicinal product containing that active substance or that combination of active substances; or if this date cannot be ascertained, the earliest of the known dates of the marketing authorizations for a medicinal product containing that active substance or that combination of active substances.

Generic medicinal product

A medicinal product that has the same qualitative and quantitative composition in active substances and the same pharmaceutical form as the reference medicinal product, and whose bioequivalence with the reference medicinal product has been demonstrated by appropriate bioavailability studies.

Good pharmacovigilance practices (GVP) for Lebanon

A set of guidelines for the conduct of pharmacovigilance in Lebanon, drawn up based on the European GVP, by the cooperation of national medicines authorities in Lebanon, and applying to marketing authorization holders in Lebanon and national medicines authorities in Lebanon.

Healthcare professional

For the purposes of reporting suspected adverse reactions, healthcare professionals are defined as medically qualified persons, such as physicians, dentists, pharmacists, nurses, and coroners (*see Annex IV, ICH-E2D Guideline*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf.

Herbal medicinal product

Any medicinal product, exclusively containing as active ingredients one or more herbal substances or one or more herbal preparations, or one or more such herbal substances in combination with one or more such herbal preparations.

Herbal substances are all mainly whole, fragmented, or cut plants, plant parts, algae, fungi, and lichen in an unprocessed, usually dried, form, but sometimes fresh. Certain exudates that have not been subjected to a specific treatment are also considered to be herbal substances. Herbal substances are precisely defined by the plant part used and the botanical name according to the binomial system.

Herbal preparations are preparations obtained by subjecting herbal substances to treatments such as extraction, distillation, expression, fractionation, purification, concentration, or fermentation. These include comminuted or powdered herbal substances, tinctures, extracts, essential oils, expressed juices, and processed exudates.

Identified risk

An untoward occurrence for which there is adequate evidence of an association with the medicinal product of interest (*see ICH-E2F Guideline*) https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

Examples include:

- an adverse reaction adequately demonstrated in non-clinical studies and confirmed by clinical data;

- an adverse reaction observed in well-designed clinical trials or epidemiological studies for which the magnitude of the difference, compared with the comparator group, on a parameter of interest suggests a causal relationship;
- an adverse reaction suggested by a number of well-documented spontaneous reports where causality is strongly supported by temporal relationship and biological plausibility, such as anaphylactic reactions or application site reactions (*see ICH-E2F Guideline*).

In a clinical trial, the comparator may be a placebo, an active substance, or non-exposure.

Adverse reactions included in section 4.8 of the summary of product characteristics (SmPC) are also considered identified risks, unless they are class-related reactions which are mentioned in the SmPC but which are not specifically described as occurring with this product (these would normally be considered as a potential risk).

See also Risks related to the use of a medicinal product, Important identified risks and Important potential risks, Missing information, Unexpected adverse reaction

Illegal purposes

See Misuse for illegal purposes

Immunological medicinal product

Any medicinal product consisting of vaccines, toxins, serums, or allergen products:

Vaccines, toxins, and serums shall cover in particular agents used to produce active immunity (such as cholera vaccine, BCG, polio vaccine, smallpox vaccine), agents used to diagnose the state of immunity (including in particular tuberculin and tuberculin PPD, toxins for the Schick and Dick Tests, brucellin) and agents used to produce passive immunity (such as diphtheria antitoxin, anti-smallpox globulin, anti-lymphocytic globulin).

Allergen products shall mean any medicinal product that is intended to identify or induce a specific acquired alteration in the immunological response to an allergizing agent. BCG stands for Bacillus Calmette-Guérin vaccine, and PPD for purified protein derivative.

Immunization

The process of making a person immune.

For the context of Considerations, Person Immunization refers to the process of making a person immune to an infection. *See also Vaccination*

Immunization error-related reaction

An adverse event following Immunization that is caused by inappropriate vaccine handling, prescribing, or administration and thus by its nature is preventable (see CIOMS-WHO).

In this definition, Immunization means the usage (handling, prescribing, and administration) of a vaccine for the purpose of immunizing individuals (see CIOMS-WHO), which in Lebanon is preferably referred to as vaccination (in the report of CIOMS/WHO Working Group on Vaccine Pharmacovigilance, the terms Immunization and vaccination are used interchangeably).

Inappropriate refers to usage (handling, prescribing, and administration) other than what is licensed and recommended in a given jurisdiction based on scientific evidence or expert recommendations. *See also Adverse reaction, Vaccine pharmacovigilance, Vaccination*

Important identified risk and Important potential risk

An identified risk or potential risk that could have an impact on the risk-benefit balance of the product or have implications for public health (see ICH-E2F Guideline) https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

What constitutes an important risk will depend upon several factors, including the impact on the individual, the seriousness of the risk, and the impact on public health. Normally, any risk that is likely to be included in the contraindications or warnings and precautions section of the product information should be considered important (see Annex IV, ICH-E2C(R2) Guideline) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

See also Risk-benefit balance, Identified risk, Potential risk, Safety concern

Important potential risk

See Important identified risk and Important potential risk

Incident

A situation where an event occurs or new information arises, irrespective of whether this is in the public domain or not, in relation to (an) authorized medicinal product(s) which could have a serious impact on public health.

The incident may be related to quality, efficacy, or safety concerns, but most likely to safety and/or quality (and possibly subsequent supply shortages). In addition, situations that do not seem at first glance to have a serious impact on public health, but are in the public domain - the subject of media attention or not- and may lead to serious public concerns about the product, may also need to be considered as incidents. Likewise, other situations which might have a negative impact on the appropriate use of a medicinal products (e.g. resulting in patients stop taking their medicine) may fall within the definition of an incident.

Individual case safety report (ICSR); synonym: Adverse (drug) reaction report

Format and content for the reporting of one or several suspected adverse reactions to a medicinal product that occur in a single patient at a specific point of time.

In the context of a clinical trial, an individual case is the information provided by a primary source to describe suspected unexpected serious adverse reactions related to the administration of one or more investigational medicinal products to an individual patient at a particular point in time See also Minimum criteria for reporting

International birth date (IBD)

The date of the first marketing authorization for any product containing the active substance granted to any company in any country in the world (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

Investigational drug

Experimental product under study or development. This term is more specific than investigational medicinal product, which includes comparators and placebos (*see ICH-E2F Guideline*) https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

See also Investigational medicinal product

Investigational medicinal product

An investigational medicinal product is a pharmaceutical form of an active substance or placebo being tested or used as a reference in a clinical trial, including products already with marketing authorization but used or assembled (formulated or packaged) in a way different from the authorized form, or when used for an unauthorized indication, or when used to gain further information about the authorized form. *See also Clinical trial*

Labeling

Information on the immediate or outer packaging.

Medicinal product

Any substance or combination of substances

- presented as having properties for treating or preventing disease in human beings; or
- which may be used in or administered to human beings either with a view to restoring, correcting or modifying physiological functions by exerting a pharmacological, immunological or metabolic action, or to making a medical diagnosis.

Medicinal products derived from human blood or human plasma

Any medicinal product based on blood constituents which is prepared industrially by a public or private establishment, such as a medicinal product including, in particular, albumin, coagulating factor(s), and immunoglobulin(s) of human origin.

Minimum criteria for reporting

For the purpose of reporting cases of suspected adverse reactions, the minimum data elements for a case are an identifiable reporter, an identifiable patient, an adverse reaction, and a suspect medicinal product (*see Annex IV, ICH-E2D Guideline*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf.

For the purpose of validation of individual case safety reports as qualifying for reporting in Lebanon, *see Module VI. See also Individual case safety report*

Missing information

Gaps in knowledge, related to safety or particular patient populations, which could be clinically significant.

The change of the term in Lebanon, to name this concept —missing information‖ rather than " important missing information‖, is to be clear that in Lebanon a marketing authorization cannot be granted if there are unacceptable gaps in knowledge, a marketing authorization shall be refused if the quality, safety, or efficacy are not properly or sufficiently demonstrated.

Misuse of a medicinal product

Situations where the medicinal product is intentionally and inappropriately used not in accordance with the authorized product information.

See also Misuse of a medicinal product for illegal purposes

Misuse of a medicinal product for illegal purposes

Misuse for illegal purposes is misuse with the additional connotation of an intention of misusing the medicinal product to cause an effect on another person. This includes, amongst others, the

sale, to other people, of medicines for recreational purposes and the use of a medicinal product to facilitate assault. *See also Misuse of a medicinal product*

Name of the medicinal product

The name, which may be either an invented name not liable to confusion with the common name, or a common or scientific name accompanied by a trademark or the name of the marketing authorization holder.

The common name is the international non-proprietary name (INN) recommended by the World Health Organization, or, if one does not exist, the usual common name.

The complete name of the medicinal product is the name of the medicinal product followed by the strength and pharmaceutical form.

Newly identified signal

In periodic benefit-risk evaluation reports, a signal is first identified during the reporting interval, prompting further actions or evaluation (see Annex IV, ICH-E2C(R2) Guideline) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

This definition could also apply to a previously closed signal for which new information becomes available in the reporting interval, prompting further action or evaluation (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

This definition is also applicable to periodic safety update reports.

See also Signal, Closed signal

Non-interventional trial; synonym: Non-interventional study

A study where the medicinal product(s) is (are) prescribed in the usual manner in accordance with the terms of the marketing authorization. The assignment of the patient to a particular therapeutic strategy is not decided in advance by a trial protocol but falls within current practice and the

prescription of the medicine is clearly separated from the decision to include the patient in the study. No additional diagnostic or monitoring procedures shall be applied to the patients and epidemiological methods shall be used for the analysis of collected data.

Thus, a trial is non-interventional if the following requirements are cumulatively fulfilled:

- The medicinal product is prescribed in the usual manner in accordance with the terms of the marketing authorization;
- The assignment of the patient to a particular therapeutic strategy is not decided in advance by a trial protocol but falls within current practice, and the prescription of the medicine is clearly separated from the decision to include the patient in the study; and
- No additional diagnostic or monitoring procedures are applied to the patients, and epidemiological methods are used for the analysis of collected data.

Non-interventional studies are defined by the methodological approach used and not by the scientific objectives. Non-interventional studies include database research or review of records where all the events of interest have already happened (this may include case-control, cross-sectional, cohort, and other study designs making secondary use of data). Non-interventional studies also include those involving primary data collection (e.g., prospective observational studies and registries in which the data collected derive from routine clinical care), provided that the conditions set out above are met. In these studies, interviews, questionnaires, and blood samples may be performed as normal clinical practice.

Occupational exposure to a medicinal product

For the purpose of reporting cases of suspected adverse reactions, an exposure to a medicinal product as a result of one‘s professional or non-professional occupation.

Off-label use

Situations where a medicinal product is intentionally used for a medical purpose, not in accordance with the authorized product information.

Off-label use includes use in non-authorized pediatric age categories. Unless specifically requested, it does not include use outside the Lebanon concerned in an indication authorized in that territory which is not authorized in Lebanon.

Ongoing clinical trial

The trial, where enrolment has begun, whether a hold is in place or analysis is complete, but for which a final clinical study report is not available (*see ICH-E2F Guideline).* https://database.ich.org/sites/default/files/E2F_Guideline.pdf.

See also Clinical trial, Completed clinical trial

Ongoing signal

In periodic benefit-risk evaluation reports, a signal remains under evaluation at the data lock point (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

This definition is also applicable to periodic safety update reports.

See also Signal, Data lock point

Overdose

Administration of a quantity of a medicinal product given per administration or cumulatively, which is above the maximum recommended dose according to the authorized product information. Clinical judgment should always be applied.

Package leaflet

A leaflet containing information for the user that accompanies the medicinal product.

Periodic safety update report (PSUR)

Format and content for providing an evaluation of the risk-benefit balance of a medicinal product for submission by the marketing authorization holder at defined time points during the post-authorization phase.

In Lebanon, periodic safety update reports should follow the format described in Module VII.

Pharmacovigilance

Science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other medicine-related problem (see WHO[4]).

In line with this general definition, the underlying objectives of pharmacovigilance by the applicable legislation are:

- Preventing harm from adverse reactions in humans arising from the use of authorized medicinal products within or outside the terms of marketing authorization or from occupational exposure; and
- Promoting the safe and effective use of medicinal products, in particular through providing timely information about the safety of medicinal products to patients, healthcare professionals, and the public.
- Pharmacovigilance is, therefore, an activity contributing to the protection of patients ‘and public health.

Pharmacovigilance system

A system used by the marketing authorization holder and by national competent authority to fulfil the pharmacovigilance tasks and responsibilities listed in national regulations and designed to monitor the safety of authorized medicinal products and detect any change to their risk-benefit balance.

[4] World Health Organization (WHO). The importance of pharmacovigilance: safety monitoring of medicinal products. Genève: WHO; 2002.

In general, a pharmacovigilance system is a system used by an organization to fulfill its legal tasks and responsibilities in relation to pharmacovigilance and is designed to monitor the safety of authorized medicinal products and detect any change to their risk-benefit balance.

Pharmacovigilance system master file (PSMF)

A detailed description of the pharmacovigilance system used by the marketing authorization holder with respect to one or more authorized medicinal products. *See also Pharmacovigilance system*

Pharmacovigilance sub-system file (PSSF)

The National Pharmacovigilance Sub-System File or PSSF describes the key elements of pharmacovigilance activities in a concerned country (Lebanon). PSSF includes information and documents to describe the pharmacovigilance sub-system as part of the global PV system & integrate with it.

Post-authorization safety study (PASS)

Any study relating to an authorized medicinal product conducted with the aim of identifying, characterizing or quantifying a safety hazard, confirming the safety profile of the medicinal product, or of measuring the effectiveness of risk management measures.

A post-authorization safety study may be an interventional clinical trial or may follow an observational, non-interventional study design. *See also Clinical trial, non-interventional trial*

Potential risk

An untoward occurrence for which there is some basis for suspicion of an association with the medicinal product of interest, but where this association has not been confirmed (*see ICH-E2F Guideline*).

Examples include:

- Non-clinical toxicological findings that have not been observed or resolved in clinical studies;
- Adverse events observed in clinical trials or epidemiological studies for which the magnitude of the difference, compared with the comparator group (placebo or active substance, or unexposed group), on the parameter of interest raises suspicion of, but is not large enough to suggest, a causal relationship;
- A signal arising from a spontaneous adverse reaction reporting system;
- An event known to be associated with other active substances within the same class or which could be expected to occur based on the properties of the medicinal product (see ICH-E2F Guideline).

See also Adverse event, Signal

Quality adherence

Carrying out tasks and responsibilities in accordance with quality requirements.

See also Quality requirements

Quality assurance

See Quality control and assurance

Quality control and assurance

Monitoring and evaluating how effectively the structures and processes have been established and how effectively the processes are being carried out.

This applies for the purpose of fulfilling quality requirements.

See also Quality requirements

Quality improvements

Correcting and improving the structures and processes where necessary.

This applies for the purpose of fulfilling quality requirements.

See also Quality requirements

Quality of a pharmacovigilance system

All characteristics of the pharmacovigilance system are considered to produce, according to estimated likelihoods, outcomes relevant to the objectives of pharmacovigilance. *See also Pharmacovigilance system, Quality system of a pharmacovigilance system*

Quality objectives

See Quality requirements

Quality planning

Establishing structures and planning integrated and consistent processes.

This applies for the purpose of fulfilling quality requirements.

See also Quality requirements

Quality requirements

Those characteristics of a system are likely to produce the desired outcome or quality objectives.

See also Pharmacovigilance system, Quality system of a pharmacovigilance system

Quality system of a pharmacovigilance system

The organizational structure, responsibilities, procedures, processes, and resources of the pharmacovigilance system as well as appropriate resource management, compliance management, and record management.

The quality system is part of the pharmacovigilance system.

See also Pharmacovigilance system, Quality of a pharmacovigilance system

Reference safety information

In periodic benefit-risk evaluation reports for medicinal products, all relevant safety information contained in the reference product information (e.g. the company core data sheet) prepared by the marketing authorization holder and which the marketing authorization holder requires to be listed in all countries where it markets the product, except when the local regulatory authority specifically requires a modification (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

It is a subset of information contained within the marketing authorization holder‘s reference product information for the periodic benefit-risk evaluation report. Where the reference product information is the company's core data sheet, the reference safety information is the company's core safety information (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

See also Company core data sheet, Company core safety information

Registry

An organized system that uses observational methods to collect uniform data on specified outcomes in a population defined by a particular disease, condition, or exposure.

Risk-benefit balance

An evaluation of the positive therapeutic effects of the medicinal product in relation to the risks, i.e., any risk relating to the quality, safety, or efficacy of the medicinal product as regards patients‘ health or public health.

See also Risks related to the use of a medicinal product

Risk management plan (RMP)

A detailed description of the risk management system.

To this end, it must identify or characterize the safety profile of the medicinal product(s) concerned, indicate how to characterize further the safety profile of the medicinal product(s) concerned, document measures to prevent or minimize the risks associated with the medicinal product, including an assessment of the effectiveness of those interventions and document post-authorization obligations that have been imposed as a condition of the marketing authorization. *See also Risk management system, Risk minimization activity*

Risk management system

A set of pharmacovigilance activities and interventions designed to identify, characterize, prevent, or minimize risks relating to a medicinal product, including the assessment of the effectiveness of those interventions.

Risk minimization activity; synonym: Risk minimization measure

An intervention intended to prevent or reduce the probability of the occurrence of an adverse reaction associated with the exposure to a medicine, or to reduce its severity should it occur.

These activities may consist of routine risk minimization (e.g., product information) or additional risk minimization activities (e.g., healthcare professional or patient communications/educational materials).

Risks related to the use of a medicinal product

Any risk relating to the quality, safety, or efficacy of the medicinal product as regards patients' health or public health, and any risk of undesirable effects on the environment.

Safety concern

An important identified risk, an important potential risk, or missing information.

It is noted that the ICH definition of safety concern is: an important identified risk, important potential risk, or important missing information, i.e., includes the qualifier —important‖ in relation

to missing information (see Annex IV, ICH-E2C(R2) Guideline) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

The ICH-E2E Guideline (see Annex IV) uses the terms safety issue and safety concern interchangeably, with the same definition for safety concern as defined in the ICH-E2C(R2) Guideline https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

See also Important identified risk and Important potential risk, and Missing information

Serious adverse reaction

An adverse reaction that results in death, is life-threatening, requires in-patient hospitalization or prolongation of existing hospitalization, results in persistent or significant disability or incapacity, or is a congenital anomaly/birth defect.

Life-threatening in this context refers to a reaction in which the patient was at risk of death at the time of the reaction; it does not refer to a reaction that hypothetically might have caused death if more severe (*see Annex IV, ICH-E2D Guideline*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf.

Medical and scientific judgment should be exercised in deciding whether other situations should be considered serious reactions, such as important medical events that might not be immediately life-threatening or result in death or hospitalization but might jeopardize the patient or might require intervention to prevent one of the other outcomes listed above. Examples of such events are intensive treatment in an emergency room or at home for allergic bronchospasm, blood dyscrasias, or convulsions that do not result in hospitalization or development of dependency or abuse (*see Annex IV, ICH-E2D Guideline*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf.

Any suspected transmission via a medicinal product of an infectious agent is also considered a serious adverse reaction. *See also Adverse reaction*

Signal

Information arising from one or multiple sources, including observations and experiments, which suggests a new potentially causal association, or a new aspect of a known association between an intervention and an event or set of related events, either adverse or beneficial, that is judged to be of sufficient likelihood to justify verificatory action.

For Section 16.2 of the periodic benefit-risk evaluation report, signals relate to adverse effects (*see Annex IV, ICH-E2C(R2) Guideline*) https://database.ich.org/sites/default/files/E2C_R2_Guideline.pdf.

See also Validated signal, Newly identified signal, Closed signal, Ongoing signal, Signal management process, Adverse reaction

Signal management process

Includes the following activities: signal detection, signal validation, signal confirmation, signal analysis and prioritization, signal assessment, and recommendation for action.

It is therefore a set of activities performed to determine whether, based on an examination of individual case safety reports (ICSRs), aggregated data from active surveillance systems or studies, literature information, or other data sources, there are new risks causally associated with an active substance or a medicinal product, or whether known risks have changed.

See also Signal validation

Signal validation

Process of evaluating the data supporting a detected signal to verify that the available documentation contains sufficient evidence demonstrating the existence of a new potentially causal association, or a new aspect of a known association, and therefore justifies further analysis of the signal.

See also Validated signal

Solicited sources of individual case safety reports

Organized data collection systems, which include clinical trials, registries, post-authorization named-patients use programs, other patient support and disease management programs, surveys of patients or healthcare providers, or information gathering on efficacy or patient compliance. For the purpose of safety reporting, solicited reports should not be considered spontaneous but classified as individual case safety reports from studies and therefore should have an appropriate causality assessment by a healthcare professional or the marketing authorization holder (*see Annex IV, ICH-E2D*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf.

See also Clinical trial, Post-authorization safety study, Non-interventional trial

Spontaneous report, synonym: Spontaneous notification

Unsolicited communication by a healthcare professional or consumer to a company, regulatory authority, or other organization (e.g. the World Health Organization, a regional center, a poison control center) that describes one or more adverse reactions in a patient who was given one or more medicinal products and that does not derive from a study or any organized data collection scheme (*see Annex IV, ICH-E2D*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf.

In this context, an adverse reaction refers to a suspected adverse reaction.

Stimulated reporting can occur in certain situations, such as after a direct healthcare professional communication (DHPC), a publication in the press, or questioning of healthcare professionals by company representatives, and adverse reaction reports arising from these situations are considered spontaneous reports (*see Annex IV, ICH-E2D*) https://database.ich.org/sites/default/files/E2D_Guideline.pdf, provided the report meets the definition above. Reporting can also be stimulated by invitations from patients‘ or consumers‘

organizations to their members. Reporting made in the context of early post-marketing phase vigilance (EPPV), e.g., in Japan, is also considered stimulated reporting.

See also Adverse reaction

Stimulated reporting

See Spontaneous report

Substance

Any matter is irrespective of origin which may be human (e.g. human blood and human blood products), animal (e.g. micro-organisms, whole animals, parts of organs, animal secretions, toxins, extracts, blood products), vegetable (e.g. micro-organisms, plants, part of plants, vegetable secretions, extracts), chemical (e.g. elements, naturally occurring chemical materials and chemical products obtained by chemical change or synthesis).

Summary of product characteristics (SmPC)

Part of the marketing authorization of a medicinal product setting out the agreed position of the product as distilled during the course of the assessment process, which includes the information described in the national regulations. It is the basis of information for healthcare professionals on how to use the product safely and effectively. The package leaflet is drawn in accordance with the summary of product characteristics (based on A Guideline on Summary of Product Characteristics, Volume 2C of the Rules Governing Medicinal Products in the EU, which is acknowledged in Lebanon).

Target population (treatment); synonym: Treatment target population

The patients who might be treated with the medicinal product in accordance with the indication(s) and contraindications in the authorized product information.

Target population (vaccine); synonym: Vaccine target population

Persons who might be vaccinated in accordance with the indication(s) and contraindications in the authorized product information and official recommendations for vaccinations.

Traditional herbal medicinal product

A herbal medicinal product that fulfils the conditions, i.e.

(a) It has (an)indication(s) exclusively appropriate to traditional herbal medicinal products which, by virtue of their composition and purpose, are intended and designed for use without the supervision of a medical practitioner for diagnostic purposes or for prescription or monitoring of treatment;

(b) It is exclusively for administration in accordance with a specified strength and posology;

(c) It is an oral, external, and/or inhalation preparation;

(d) The period of traditional use has elapsed;

(e) The data on the traditional use of the medicinal product are sufficient; in particular, the product proves not to be harmful in the specified conditions of use, and the pharmacological effects or efficacy of the medicinal product are plausible based on long-standing use and experience.

Regarding (d), the product must have been in medicinal use throughout a period of at least 30 years, including at least 15 years within Lebanon.

See also Herbal medicinal product

Unexpected adverse reaction

An adverse reaction, the nature, severity, or outcome of which is not consistent with the summary of product characteristics[5].

This includes class-related reactions, which are mentioned in the summary of product characteristics (SmPC) but which are not specifically described as occurring with this product. For products authorized nationally, the relevant SmPC is authorized by the national competent authority in Lebanon to whom the reaction is being reported. See also Summary of product characteristics

Upper management

A group of persons in charge of the highest executive management of an organization. Membership of this group is determined by the governance structure of the organization. While it is envisaged that the upper management usually is a group, the head of the organization is the one person at the top of the organization with ultimate responsibility for ensuring that the organization complies with relevant legislation.

Vaccination

The administration of a vaccine with the aim of producing an immune response.

See also Immunization

Vaccination failure

Vaccination failure due to actual vaccine failure or failure to vaccinate (see CIOMS-WHO**Error! Bookmark not defined.**).

[5] For investigational medicinal products, an unexpected adverse reaction is an adverse reaction, the nature or severity of which is not consistent with the applicable product information (e.g. the investigator's brochure for an unauthorized investigational product or the summary of product characteristics for an authorized product).

Vaccination failure may be defined based on clinical endpoints or immunological criteria, where correlates or surrogate markers for disease protection exist. Primary failure (e.g., lack of seroconversion or seroprotection) needs to be distinguished from secondary failure (waning immunity) (see CIOMS-WHO[Error! Bookmark not defined.]).

See also Vaccine failure, Failure to vaccinate

Vaccine

See Immunological medicinal product

Vaccine failure

Confirmed or suspected vaccine failure.

Confirmed clinical vaccine failure

Occurrence of the specific vaccine-preventable disease in a person who is appropriately and fully vaccinated, taking into account the incubation period and the normal delay for the protection to be acquired as a result of Immunization (see CIOMS-WHO[Error! Bookmark not defined.]).

Suspected clinical vaccine failure

Occurrence of disease in an appropriately and fully vaccinated person, but the disease is not confirmed to be the specific vaccine-preventable disease, e.g., disease of unknown serotype in a fully vaccinated person (based on CIOMS- WHO[Error! Bookmark not defined.]).

Confirmed immunological vaccine failure

Failure of the vaccinated person to develop the accepted marker of protective immune response after being fully and appropriately vaccinated, as demonstrated by having tested or examined the vaccinated person at an appropriate time interval after completion of Immunization (based on CIOMS-WHO).

Suspected immunological vaccine failure

Failure of the vaccinated person to develop the accepted marker of protective immune response after being fully and appropriately vaccinated, but with the testing or examination of the vaccinated person done at an inappropriate time interval after completion of Immunization (based on CIOMS-WHO). For interpreting what it means to be appropriately vaccinated, consider the explanatory note for Immunization error-related reaction. *See also Vaccination failure*

Vaccine pharmacovigilance

The science and activities relating to the detection, assessment, understanding, and communication of adverse events following Immunization and other vaccine- or Immunization-related issues, and to the prevention of untoward effects of the vaccine or Immunization (see CIOMS-WHO[Error! Bookmark not defined.]).

In this definition, Immunization means the use of a vaccine for immunizing individuals (see CIOMS-WHO, which in Lebanon is preferably referred to as vaccination). In the report of CIOMS/WHO Working Group on Vaccine Pharmacovigilance, the terms Immunization and vaccination are used interchangeably. Usage includes all processes that occur after a vaccine product has left the manufacturing/packaging site, i.e., handling, prescribing, and administration of the vaccine (*see CIOMS-WHO*[Error! Bookmark not defined.]).

An adverse event following Immunization (AEFI) is any untoward medical occurrence that follows Immunization and which does not necessarily have a causal relationship with the usage of the vaccine. The adverse event may be any unfavorable or unintended sign, abnormal laboratory finding, symptom, or disease. While this AEFI definition is compatible with the definition of adverse events applied in Lebanon, the AEFI definition is not needed to describe pharmacovigilance for vaccines in Lebanon. However, Lebanon's guidance on pharmacovigilance for vaccines makes use of the terminology suggested by CIOMS-WHO regarding possible causes of adverse events, turning them into suspected adverse reactions. A coincidental event is an AEFI that is caused by something other than the vaccine product, Immunization error, or Immunization anxiety (see CIOMS-WHO[Error! Bookmark not defined.]).

See also Adverse event, Immunization anxiety-related reaction, Immunization error-related reaction, Vaccine product-related reaction, Vaccine quality defect-related reaction, Vaccination

Vaccine product-related reaction

An adverse event following Immunization that is caused or precipitated by a vaccine due to one or more of the inherent properties of the vaccine product (see CIOMS-WHO[Error! Bookmark not defined.]).

In this definition, Immunization means the usage (handling, prescribing, and administration) of a vaccine for the purpose of immunizing individuals (see CIOMS-WHO[Error! Bookmark not defined.]), which in Lebanon is preferably referred to as vaccination (in the report of CIOMS/WHO Working Group on Vaccine Pharmacovigilance, the terms Immunization and vaccination are used interchangeably[Error! Bookmark not defined.]).

See also Adverse reaction, Vaccine pharmacovigilance

Vaccine quality defect-related reaction

An adverse event following Immunization that is caused or precipitated by a vaccine that is due to one or more quality defects of the vaccine product, including its administration device, as provided by the manufacturer (*see CIOMS-WHO*[Error! Bookmark not defined.]).

In this definition, Immunization means the usage (handling, prescribing, and administration) of a vaccine for the purpose of immunizing individuals (*see CIOMS-WHO*[Error! Bookmark not defined.]), which in Lebanon is preferably referred to as vaccination (in the report of CIOMS/WHO Working Group on Vaccine Pharmacovigilance, the terms Immunization and vaccination are used interchangeably[4]).

For the purpose of this definition, a vaccine quality defect is defined as any deviation of the vaccine product as manufactured from its set quality specifications (see CIOMS-WHO[4]). *See also Adverse reaction, Vaccine pharmacovigilance*

Valid individual case safety report

See Individual case safety report

Validated signal

A signal where the signal validation process of evaluating the data supporting the detected signal has verified that the available documentation contains sufficient evidence demonstrating the existence of a new potentially causal association, or a new aspect of a known association, and therefore justifies further analysis of the signal.

See also Signal