

Practical considerations on medical device clinical trials in Georgia, a former Soviet Union country

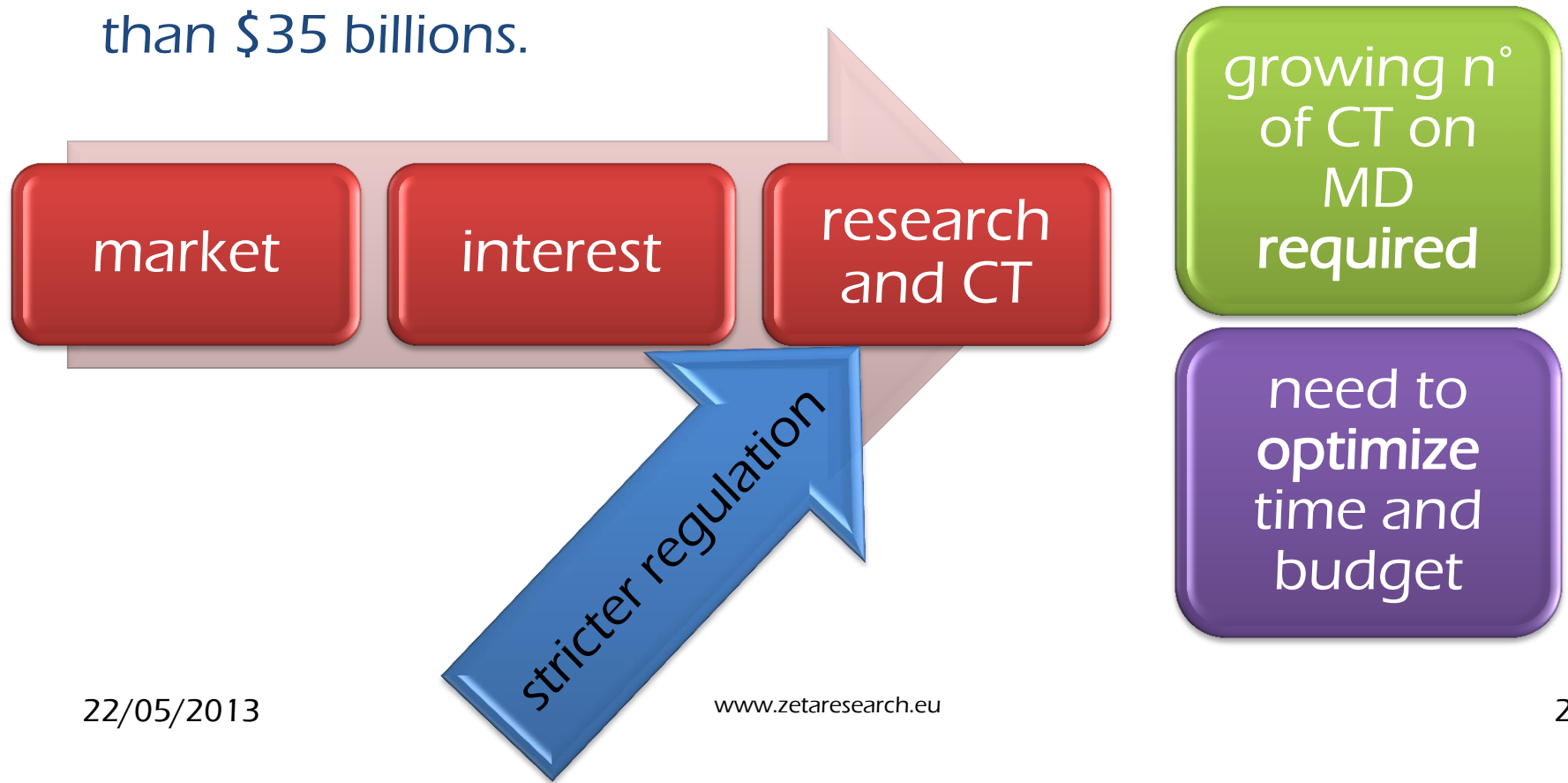
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Clinical Trials (CT) on Medical Devices (MD)

- Medical device global market is estimated to be \$454 billion worth by 2014 .
- Pharma and (main) MD research is considered to reach more than \$35 billions.



OUR EXPERIENCE: what about trying abroad?

Abroad = outside EU borders, “growing countries” someway close to EU

TIME

- Could it be quicker?

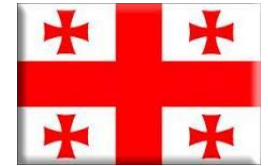
MANAGEMENT

- Could it be easier?

MONEY

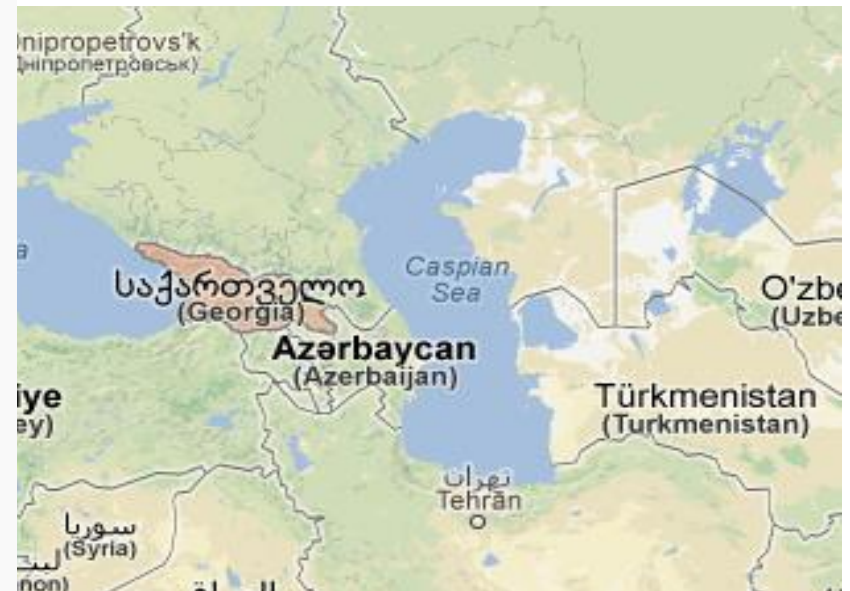
- Could it be less expensive?

OUR EXPERIENCE: why Georgia?



NOT TOO FAR...

- Close to EU borders



OUR EXPERIENCE: why Georgia?

NOT TOO FAR...

- Close to EU culture:
 - Democratic republic (independent from USSR since 1991)
 - Close to occidental cultural level
 - Open borders and open-mind

About going abroad...

What we were SUPPOSED to find...and what we've found:

No/low regulation on MDCT

“Essential” but clear regulation

- Existing regulation concerns only medical products (drugs)
- MoH has few but clear “rules” and strict limits for MD trials.

About going abroad...

What we were SUPPOSED to find...and what we've found:

Absent Competent Authorities (CA)

Effective and efficient presence of CA

- MoH approval for Investigational Products (IP) always required
- Response is provided within 21 days from request
- Only Georgian society can apply for approval
- Ethical Committees work on flexible session calendar

About going abroad...

What we were SUPPOSED to find...and what we've found:

Less strict ethical requirements

Same ethical evaluation approach

- Same requirements and documentation as EU for ethical approval
- Great attention to investigational products

About going abroad...

What we were SUPPOSED to find...and what we've found:

Lack of skilled personnel

Qualified medical personnel

- Qualification level in most clinics is comparable at European level
- Fluent English is commonly spoken among medical personnel
- Slight differences in ordinary medical practices can be met

About going abroad...

What we were SUPPOSED to find...and what we've found:

Deficient infrastructures

Modern and westernized structures

- Clinics are private and modern ones, very close to occidental standards
- All clinics have high speed internet !

About going abroad...

What we were SUPPOSED to find ...and what we've found:

Political instability

Stabile and open-minded society

- Despite recent history, most of Georgia is a safe and stable country
- Massive open-mind towards foreign people and models

About going abroad...

What we were SUPPOSED to find ...and what we've found:

Low attributes of patients

Positive attitude to be involved in CT

- No reimbursement for expensive bio-tech is provided to citizens: patients are glad to be enrolled in CT to receive “new” treatments
- Difficulties in patients' retainment in the study

About going abroad...

- Lack of self-explaining English informations available

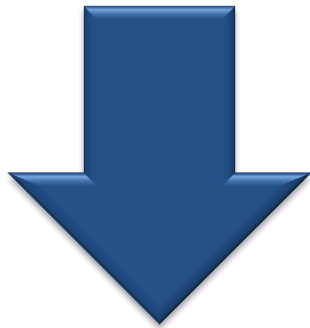


need
for

**Strong local PARTNERSHIP
and sound knowledge of PROCEDURES**

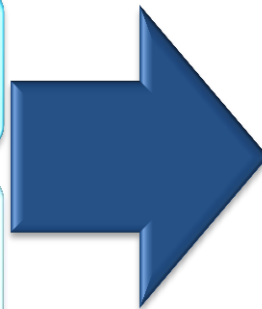
So...what kind of saving?

strong and consolidated local
PARTNERSHIP and PROCEDURES



Quicker start-up

GCP application



High
DATA QUALITY

TIME-SAVING

ECONOMIC SAVING
up to -30%

OUR EXPERIENCE: some data

4 Clinical Trials in Georgia in 2012/13:

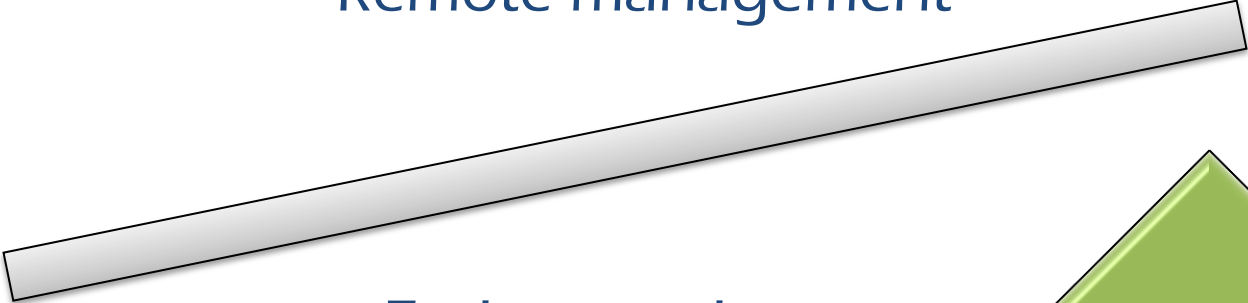
- On class I and II Medical Devices
- Post-market (commercialized in EU)
- Adult and pediatric population
- Ophthalmology, rheumatology, allergology
- 2 closed, 1 ongoing, 1 planned
- Local partnership + Centralized data management

Summing up...



CONS

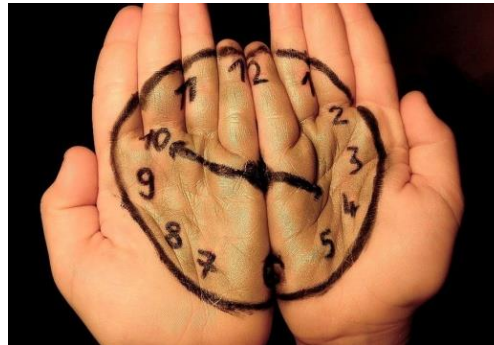
- Need for a local partnership / consolidated experience (language, regulations, MoH, custom)
- Remote management

- 
- Easier recruitment
 - Quicker EC approval and defined MoH response time
 - GCP standards known and applied
 - **Economic saving**



PROS

THANK YOU
FOR YOUR ATTENTION...



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