

Introduction to MedDRA

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What is Coding? Why code??









MedDRA What do you see?







How many cases of Headache??

Head Pain

His head started paining after he woke up from sleep

Pounding in head

Dull Headache

Throbbing pain in head

Pain in Head

Headache

Cephalgia

Hedache

Headache recurrent

Hammering pain in Head

Pain head

My temples are hurting





What Happens when we code?

- A standard code is assigned to each verbatim
- -8 digit MedDRA code gets assigned to the verbatim term

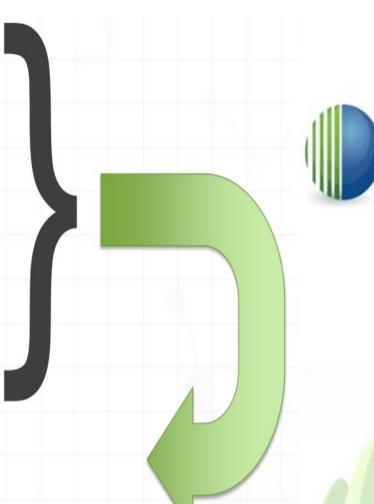
Verbatim text	Low Level Term (LLT)	LLTCode	Preferred Term (PT)	PTCode	System Organ Class (SOC)	SOC Code
Pain in eye	Pain in eyes	10033426	Eye pain	10015958	Eye disorders	10015919
Sore eyes	Sore eyes	10041357	Eye pain	10015958	Eye disorders	10015919
Pyrexia	Pyrexia	10037660	Pyrexia	10037660	General disorders and administration site conditions	10018065
Spiking temperature	Spiking temperature	10041523	Pyrexia	10037661	General disorders and administration site conditions	10018066
Suffering from Fever	Fever	10016558	Pyrexia	10037662	General disorders and administration site conditions	10018067



Importance of "Coding"

- Accuracy
- Consistency
- Transparency
- Standardisation
- Analysis
- Evaluation

Patient Safety







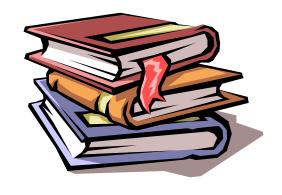
MedDRA What is MedDRA?

Med = Medical

D = Dictionary for

R = Regulatory

A = Activities



MedDRA is a clinically-validated international medical terminology used by regulatory authorities and the regulated biopharmaceutical industry. The terminology is used through the entire regulatory process, from premarketing to post-marketing, and for data entry, retrieval, evaluation, and presentation.



MedDRA MedDRA's Purpose

- Facilitate the exchange of clinical information through standardization
- Important tool for product evaluation, monitoring, communication, electronic records exchange, and oversight
- Supports coding (data entry) and retrieval and analysis of clinical information about human medical products including pharmaceuticals, biologics, vaccines, and drug-device combination products



MedDRA Why MedDRA?

ICH initiative (M1)

- An international terminology for coding of medical information throughout the regulatory cycle (clinical trials Phase I-IV and postmarketing)
- Enables standardized communication of coded data between regulators and manufacturers/sponsors
 - Example: MedDRA used is a standard terminology in electronic transmission of Individual Case Safety Reports (ICSRs) following ICH E2B standards
 - Use of MedDRA in Vigibase [WHO global database of individual case safety reports (ICSRs)]
 - SDTM is one of the required standards for data submission to FDA (U.S.) and PMDA (Japan)



MedDRA Why MedDRA?

- Enables medical accuracy and transparency in coding, since many and specific MedDRA terms
- MedDRA Hierarchy and other concept groupings (such as SMQs) allow for useful data retrieval and presentation
- Global ICH-endorsed guides for coding and data retrieval (ICH Points to Consider documents)
- Global version synchronization



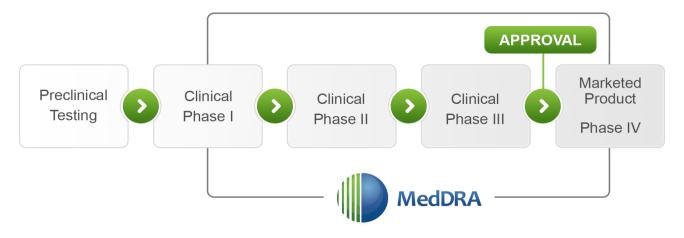


MedDRA MedDRA and the MSSO

- International support and development of terminology
- Foster use of MedDRA through communications and educational offerings
- "Custodians", not owners, of the terminology
- JMO (partner organization for Japanese-language MedDRA)
- Governed by a Management Committee (industry, regulators, multi-national, other interested parties)



MedDRA Where MedDRA is Used



Regulatory Authority and Industry Databases Individual Case Safety Reports and Safety Summaries

Clinical Study Reports

Investigators' Brochures

Core Company Safety Information

Marketing Applications

Publications

Prescribing Information

Advertising



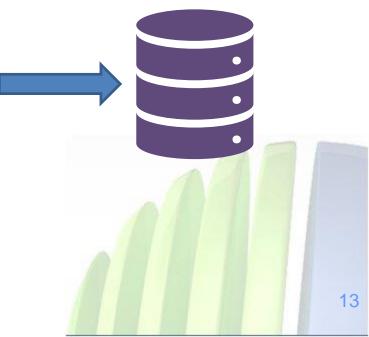


Where MedDRA is Used (Contd)

Individual Case Safety Reports (ICSRs) - ICH E2B (R3) Data Elements in MedDRA

Element id	Element Name
D.7.1.r.1b	Medical History (disease / surgical procedure / etc.) (MedDRA code)
D.8.r.6b	Indication (MedDRA code)
D.8.r.7b	Reaction (MedDRA code)
D.9.2.r.1b	Reported Cause(s) of Death (MedDRA code)
D.9.4.r.1b	Autopsy-determined Cause(s) of Death (MedDRA code)
D.10.7.1.r.1b	Medical History (disease / surgical procedure / etc.) (MedDRA code)
D.10.8.r.6b	Indication (MedDRA code)
D.10.8.r.7b	Reactions (MedDRA code)
E.i.2.1b	Reactions / Event (MedDRA code)
F.r.2.2b	Test Name (MedDRA code)
G.k.7.r.2b	Indication (MedDRA code)
H.3.r.1b	Sender's Diagnosis / Syndrome and / or Reclassification of Reaction / Event (MedDRA code)

Regulator Database





Where MedDRA is Used (Contd)

- Regulatory Safety Databases Coded in MedDRA (examples)
 - US FDA
 - FAERS: drugs and biologics
 - VAERS: vaccines
 - CAERS: foods, dietary supplements, cosmetics
 - EMA
 - EudraVigilance Database
 - Health Canada
 - Canada Vigilance Database
 - MHLW/PMDA
 - Safety database



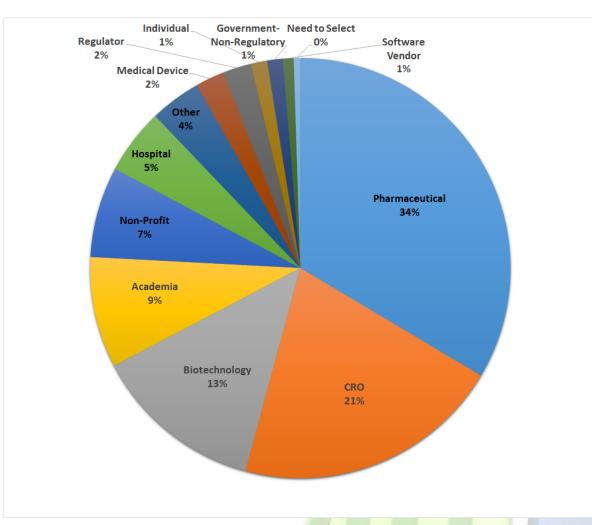
Where MedDRA is Used (Contd)

- e-Marketing Applications ICH eCTD, for example
 - US FDA
 - NDAs: New Drug Applications, including Integrated Summary of Safety (ISS) – adverse event dataset
 - ANDAs: Abbreviated New Drug Applications
 - INDs: Investigational New Drugs
 - BLAs: Biologics License Applications
 - EMA
 - MAAs: Marketing Authorisation Applications
 - Health Canada
 - New Drug Submissions (NDSs)
 - MHLW/PMDA
 - NDAs: New Drug Applications



MedDRA Users Profile

- As of March 2019
 - 5,800 Subscribing organizations (MSSO+JMO)
 - 125 Countries
- Graph shows types of subscribing organizations





MedDRA MedDRA Data Sharing

- Subscription grants access to MedDRA for one year
- Subscriber cannot grant any sublicense, publish or otherwise distribute MedDRA to a third party
- Data may be freely exchanged between current MedDRA subscribers
 - Sponsor-sponsor, sponsor-CRO, vendor-user, etc.
 - Use Self-Service Application to check organization's subscription status
- Sharing MedDRA with a non-subscribing organization is a violation of the MedDRA license

17



2019 MedDRA Subscription Rate Table

MedDRA Subscription Types	2019 Annual Subscription Rates
Regulatory Authority	\$0 USD
Non-Commercial / Non-Profit	\$0 USD
Commercial (Parent Company Annual Revenue or Turnover)	
Level 0 (Annual Revenue < \$1 Million)	\$154 USD
Level 1 (Annual Revenue \$1-\$10 Million)	\$654 USD
Level 2 (Annual Revenue \$10-\$20 Million)	\$2,496 USD
Level 3 (Annual Revenue \$20-\$500 Million)	\$4,727 USD
Level 4 (Annual Revenue \$500 Million-\$1 Billion)	\$9,918 USD
Level 5 (Annual Revenue \$1-\$5 Billion)	\$41,150 USD
Level 6 (Annual Revenue \$5-\$20 Billion)	\$54,334 USD
Level 7 (Annual Revenue > \$20 Billion)	\$70,889 USD
System Developer	\$2,556 USD

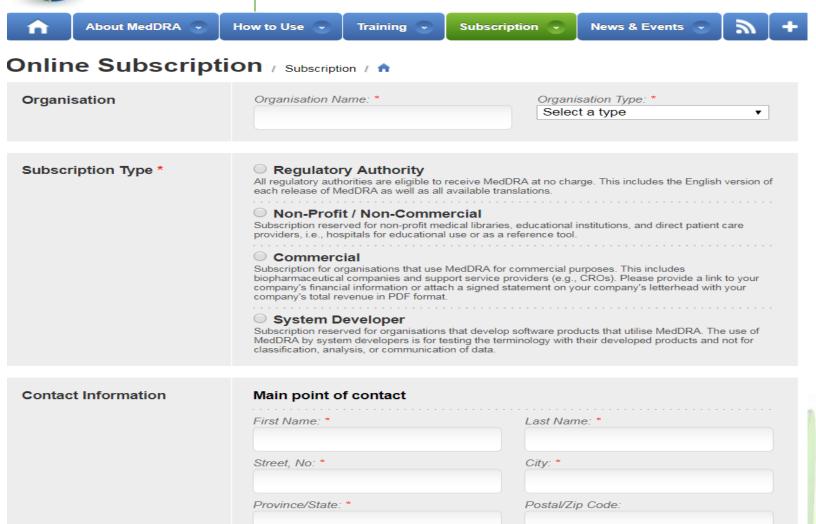
77% of all MedDRA users pay no fee or \$654 (or less)





How to subscribe?

Phone: *



Country: *



Scope of MedDRA

Not a drug dictionary

Patient demographic terms

Clinical trial study design terms

OUT

IN

Frequency qualifiers

Medical conditions
Indications
Investigations (tests, results)
Medical and surgical procedures
Medical, social, family history
Medication errors
Product quality issues
Device-related issues
Product use issues
Pharmacogenetic terms
Toxicologic issues
Standardized queries

Numerical values for results

Severity descriptors

Not an equipment, device, diagnostic product dictionary



MedDRA MedDRA Structure

```
System Organ Class (SOC) (27)

High Level Group Term (HLGT) (337)

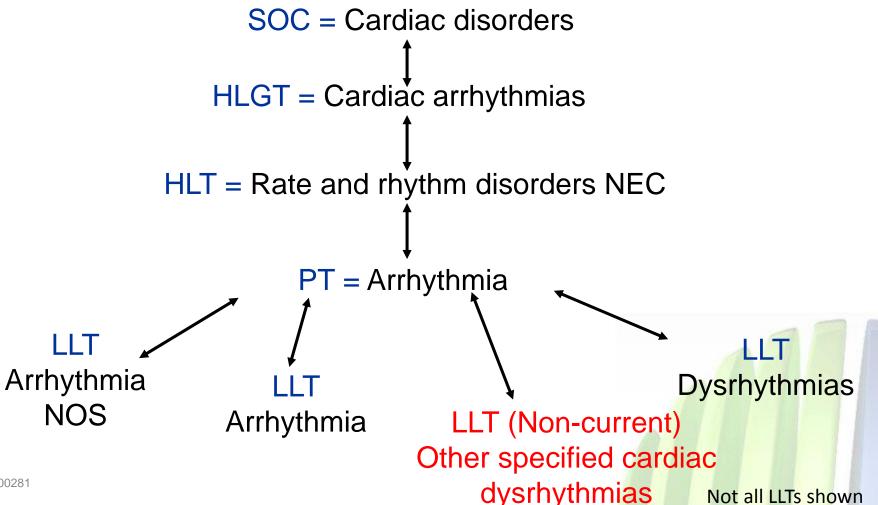
High Level Term (HLT) (1,737)

Preferred Term (PT) (23,708)
```

Lowest Level Term (LLT) (80,262)



MedDRA Structure (Cont)





System Organ Classes

- Blood and lymphatic system disorders
- Cardiac disorders
- Congenital, familial and genetic disorders
- Ear and labyrinth disorders
- Endocrine disorders
- Eye disorders
- Gastrointestinal disorders
- General disorders and administration site conditions
- Hepatobiliary disorders
- Immune system disorders
- Infections and infestations
- Injury, poisoning and procedural complications
- Investigations
- Metabolism and nutrition disorders

- Musculoskeletal and connective tissue disorders
- Neoplasms benign, malignant and unspecified (incl cysts and polyps)
- Nervous system disorders
- Pregnancy, puerperium and perinatal conditions
- Product issues
- Psychiatric disorders
- Renal and urinary disorders
- Reproductive system and breast disorders
- Respiratory, thoracic and mediastinal disorders
- Skin and subcutaneous tissue disorders
- Social circumstances
- Surgical and medical procedures

Vascular disorders

000281



MedDRA MedDRA Codes

- Each MedDRA term assigned an 8-digit numeric code starting with "1"
- The code is non-expressive
- Codes can fulfill a data field in various electronic submission types (e.g., E2B)
- New terms are assigned sequentially



Codes and Languages





A Multi-Axial Terminology (cont)

SOC = Respiratory, thoracic and mediastinal disorders (Secondary SOC)



HLGT = Respiratory tract infections



HLT = Viral upper respiratory tract infections



PT = Influenza

SOC = Infections and infestations (Primary SOC)



HLGT = Viral infectious disorders



HLT = Influenza viral infections





MedDRA ICH MedDRA Coding Guide

MedDRA Term Selection: Points to Consider (MTS:PTC)

MedDRA® TERM SELECTION: POINTS TO CONSIDER

ICH-Endorsed Guide for MedDRA Users

Release 4.17 Based on MedDRA Version 22.0

1 March 2019

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- Provides term selection advice for industry and regulatory purposes
- Objective is to promote accurate and consistent term selection to facilitate a common understanding of shared data
- Recommended to be used as basis for individual organization's own coding conventions



MedDRA Term Selection: Points to Consider (MTS:PTC)

Detailed coding instructions

SECTION	2 - GENERAL TERM SELECTION PRINCIPLES
2.1 0	uality of Source Data
2.2 Q	uality Assurance
	o Not Alter MedDRA
24 4	ways Select a Lowest Level Term
	elect Only Current Lowest Level Terms
2.6 W	hen to Request a Term
2.7 U	se of Medical Judgment in Term Selection
2.8 S	electing More than One Term
2.9 C	heck the Hierarchy
2.10	Select Terms for All Reported Information. Do Not Add Information
SECTION	3 - TERM SELECTION POINTS
	efinitive and Provisional Diagnoses with or without Signs and Symptoms
	eath and Other Patient Outcomes
3.2	
3.2	2 Death as the only reported information
3.2	3 Death terms that add important clinical information
3.2	4 Other patient outcomes (non-fatal)
33 5	uicide and Self-Harm
	3.3.1 If overdose is reported
	3.3.2 If self-injury is reported
	3.3.3 Fatal suicide attempt
3	4 Conflicting/Ambiguous/Vague Information
	3.4.1 Conflicting information
	3.4.2 Ambiguous information
	3.4.3 Vague information
3	5 Combination Terms
	3.5.1 Diagnosis and sign/symptom
	3.5.2 One reported condition is more specific than the other
	3.5.3 A MedDRA combination term is available
	3.5.4 When to "split" into more than one MedDRA term.
- 2	3.5.5 Event reported with pre-existing condition
3	6 Age vs. Event Specificity. 3.6.1 MedDRA term includes age and event information.
	3.6.1 MedDRA term includes age and event information
3	7 Body Site vs. Event Specificity
	3.7.1 MedDRA term includes body site and event information
	3.7.2 No available MedDRA term includes both body site and event information
	3.7.3 Event occurring at multiple body sites
3	8 Location-Specific vs. Microorganism-Specific Infection
	3.8.1 MedDRA term includes microorganism and anatomic location
	3.8.2 . No available MedDRA term includes both microorganism and anatomic location 19
	9 Modification of Pre-existing Conditions.
	10 Exposures during Pregnancy and Breast Feeding

3.	10.2	Events in the child or foetus	
3.11	Cor	ngenital Terms	3
3.1	11.1	Congenital conditions	
3.	11.2	Acquired conditions (not present at birth)	3
3.	11.3	Conditions not specified as either congenital or acquired	
3.12	Nec	oplasms	3
3.	12.1	Do not infer malignancy	
		dical and Surgical Procedures	63
3.	13.1	Only the procedure is reported	9
		Procedure and diagnosis are reported	
3.14	Inv	estigations	-
		Results of investigations as ARs/AEs	
3.1	14.2	Investigation results consistent with diagnosis	100
		Investigation results not consistent with diagnosis	
3.	14.4	Grouped investigation result terms	
3.	14.5	Investigation terms without qualifiers	
3.15	Me	dication Errors, Accidental Exposures and Occupational Exposures	
3.	15.1	Medication errors	
3.	15.2	Accidental exposures and occupational exposures	
3.16	Mis	suse, Abuse and Addiction	
3.	16.1	Misuse	
3.	16.2	Abuse	
3.	16.3	Addiction	
3.	16.4	Drug diversion	
		nsmission of Infectious Agent via Product	
		erdose, Toxicity and Poisoning	

	- 3.	16.1	Overdose reported with clinical consequences
	3.	18.2	Overdose reported without clinical consequences
3.	19	Des	vice-related Terms
	3.	19.1	Device-related event reported with clinical consequences
	3.	19.2	Device-related event reported without clinical consequences
3.	20	Dru	ug Interactions
			Reporter specifically states an interaction
	3.3	20.2	Reporter does not specifically state an interaction
3	21	No	Adverse Effect and "Normal" Terms
	3.	21.1	No adverse effect
	3.3	21.2	Use of "normal" terms
3.	22	Une	expected Therapeutic Effect
3.	23	Mo	dification of Effect
	3.	23.1	Lack of effect
	3.	23.2	Do not infer lack of effect
	3.	23.3	Increased, decreased and prolonged effect
3.	24	Soc	cial Circumstances
	3.	24.1	Use of terms in this SOC
	3.	24.2	Illegal acts of crime or abuse
			dical and Social History
3.	26	Ind	lication for Product Use
		26.1	Medical conditions
	3.	26.2	Complex indications
	3.	26.3	Indications with genetic markers or abnormalities
	3.3	26.4	Prevention and prophylaxis
	3.	26.5	Procedures and diagnostic tests as indications
		3.2	26.6 Supplementation and replacement therapies
		3.2	26.7 Indication not reported
	3	3.27	Off Label Use
		3.3	27.1 Off label use when reported as an indication
			27.2 Off label use when reported with an AR/AE
		3 28	
			28.1 Product quality issue reported with clinical consequences
		3:	28.2 Product quality issue reported without clinical consequences
			28.3 Product quality issue vs. medication error
	SEC		14 - APPENDIX
	7.77		Versioning
			1.1 Versioning methodologies
			1.2 Timing of version implementation
			1.2 Timing of Persion implementation

3.18.1 Overdose reported with clinical consequences



What are Coding Conventions?

Written guidelines for coding with MedDRA in your organization

Support accuracy and consistency

Common topics

- Misspellings, abbreviations and acronyms
- Combination terms and "due to" concepts
- "Always query" terms, e.g., "Chest pain"

Should be consistent with the MedDRA Term Selection: Points to Consider document



MSSO's MedDRA Browsers

- MedDRA Desktop Browser (MDB)
 - Download MDB and release files from MedDRA website
- MedDRA Web-Based Browser (WBB)
 - https://tools.meddra.org/wbb/
- Features
 - Both require MedDRA ID and password
 - View/search MedDRA and SMQs
 - Support for all MedDRA languages
 - Language specific interface
 - Ability to export search results and Research Bin to local file system

30



MedDRA How to code with MedDRA?

- Lowest Level Term that most accurately reflects the reported verbatim information should be selected
- Degree of specificity may be challenging
 - Example: "Abscess on face" → select "Facial abscess," not simply "Abscess"
- Select current LLTs only
 - Non-current terms for legacy conversion/historical purposes
- If no exact match in MedDRA, use medical judgment to match to an existing term that adequately represents the concept
- Avoid company-specific "work-arounds" for MedDRA deficiencies, submit change request to MSSO

31



How to code with MedDRA? Example:

- Verbatim: THYROID CARCINOMA
 - Coded to LLT : Thyroid carcinoma
 - Thyroid carcinoma [10043702]
 - Thyroid cancer [10066474]
 - Thyroid neoplasms [10043747]
 - ☐ NT Thyroid neoplasms malignant [10043749]
 - Endocrine neoplasms malignant and unspecified [10014713]
 - Neoplasms benign, malignant and unspecified (incl cysts and polyps) [10029104]



How to code with MedDRA? Example:

- Verbatim: 03/19/2012: Patient was hospitalized with severe upper abdominal burning pain radiating to the back, nausea, and vomiting that worsened with eating. Upon further investigation her serum amylase levels where found to be elevated and was diagnosed with Pancreatitis. During the hospitalization she was also found to have DVT.
 - Coded to
 - 1. LLT: Pancreatitis

Pancreatitis [10033645]
Prancreatitis [10033645]
Prancreatitis [10033645]
Prancreatitis [10033646]
Prancreatitis [10033646]
Prancreatitis [10033646]
Prancreatitis [10033646]
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Prancreatitis [10033646]
Prancreatitis [1003364]
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Prancreatitis [100336]
Prancreatitis [100336]
Pran

2. LLT: DVT

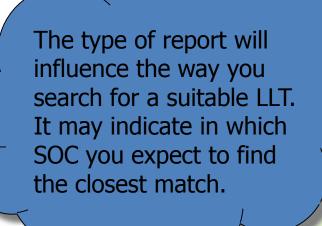




Assessing the Reported Information

- Consider what is being reported. Is it a:
 - Clinical condition Diagnosis, sign or symptom?
 - Indication?
 - Test result?
 - Injury?
 - Procedure?
 - Medication error?
 - Product use issue?
 - Product quality issue?
 - Social circumstance?
 - Device issue?
 - Procedural complication?

— Is it a combination of these?





How to code with MedDRA?

Gastric Boating







What Terms to Select?

 Sepsis leading to shock from possible spontaneous bacterial peritonitis or bowel perforation

Sepsis

Shock

Septic shock

Spontaneous bacterial peritonitis

Bowel perforation



Hypoglycemia (blood glucose = 200 mg/dL)

Blood glucose abnormal Blood glucose increased Hypoglycemia





Clinical complication of IUD

IUD complication (PT Complication associated with device)

Intra-uterine death (PT Foetal death)
Unevaluable event





 Retinal disease from HIV with near total blindness (R and L)

Retinal damage

Retinal disorder

HIV disease

Blindness

HIV retinopathy

Blindness, both eyes

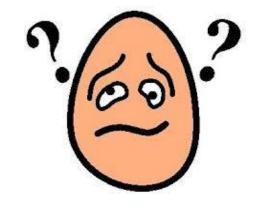




• MI

Myocardial infarction?
Mitral incompetence?
Mental Illness?

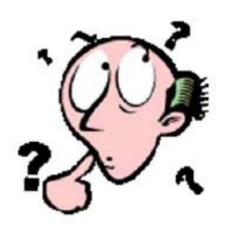








"Husband had his uterus scrapped and frozen"







 Patient attempted to commit suicide by walking into the sea; unfortunately, he could swim



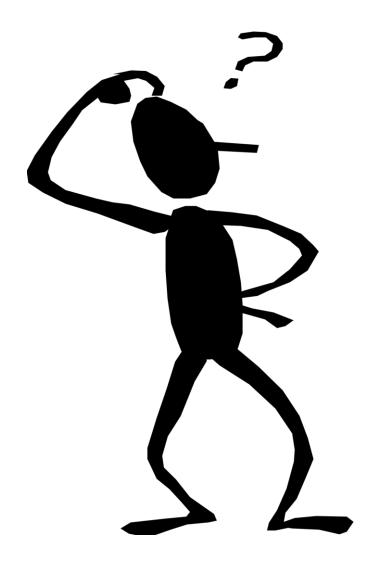




Attempted suicide



MedDRA After Coding?







How is MedDRA Used for Analysis?

- MedDRA can be used to summarise large volumes of data
 - Standard approach is to list data at PT and SOC levels for overview
- Focused searches can be made using features of MedDRA
 - Searching for specific PTs
 - Summarising at HLT or HLGT levels
 - Using multiaxial links to group diagnoses with signs and symptoms
 - Selecting a set of relevant PTs which reflect the condition of interest
 - Using Standardised MedDRA Queries (SMQs) for signal detection
 - Customized search / Modified MedDRA Queries



Analysis Guidelines

MedDRA Data Retrieval and Presentation: Points to Consider

MedDRA® DATA RETRIEVAL AND PRESENTATION: POINTS TO CONSIDER

ICH-Endorsed Guide for MedDRA Users on Data Output

Release 3.17 Based on MedDRA Version 22.0

1 March 2019

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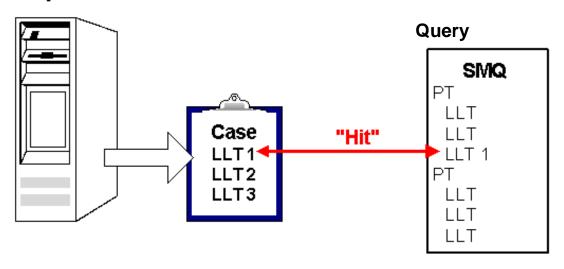
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- Provides data retrieval and presentation options for industry or regulatory purposes
- Recommended to be used as basis for individual organization's own data retrieval conventions
- Most effective when used in conjunction with MedDRA Term Selection: PTC document



MedDRA What is a Query?

Clinical Trial Database Safety Database





Standardised MedDRA Queries (SMQs)

- Tools developed to facilitate retrieval of MedDRA-coded
- Collaboration between CIOMS (Council for International Organizations of Medical Sciences) and ICH (MSSO)
- Groupings of terms from one or more MedDRA SOCs related to medical condition or area of interest
- Terms relate to signs/symptoms, diagnoses, syndromes, physical findings, laboratory and other test data, etc.
- Intended to aid in case identification
- Broad/narrow scope
- Hierarchical SMQs
- Algorithmic SMQs





SMQ in Production - Examples

- As of Version 22.0, a total of 104 level 1 SMQs in production
 - Agranulocytosis
 - Anaphylactic reaction
 - Cerebrovascular disorders
 - Convulsions
 - Depression and suicide/self-injury
 - Hepatic disorders
 - Hypersensitivity
 - Ischaemic heart disease
 - Lack of efficacy/effect

- Medication errors
- Osteonecrosis
- Peripheral neuropathy
- Pregnancy and neonatal topics
- Pseudomembranous colitis
- Rhabdomyolysis/myopathy
- Severe cutaneous adverse reactions
- Systemic lupus erythematosus



MedDRA SMQ Applications

Clinical trials

- Where safety profile is not fully established, use multiple SMQs on routine basis as screening tool
- Selected SMQs to evaluate previously identified issue (pre-clinical data or class effect)

Post –marketing

- Selected SMQs to retrieve cases for suspected or known safety issue
- Signal detection (multiple SMQs employed)
- Single case alerts
- Periodic reporting (aggregate cases for safety and other issues, e.g., lack of efficacy)





EMA: Signal of Lactic MedDRA Acidosis -PT vs. SMQ



Broad search of SMQ identifies additional ICSRs with related **signs** and symptoms where no specific diagnosis is made. These would be missed if search only conducted with PT Lactic acidosis.

SMQ Lactic acidosis (Broad search)

PT	Cases
Acidosis	2
Anion gap increased	1
Blood bicarbonate abnormal	1
Blood bicarbonate decreased	6
Blood gases abnormal	1
Blood lactic acid increased	27
Hyperlactacidaemia	22
Lactic acidosis	63
Metabolic acidosis	18
PCO2 decreased	1



Use of SMQs at FDA – Reviewing Prescribing Information

- Proposed Prescribing Information:
- Warnings & Precautions:
 - Dizziness/Somnolence
 - Withdrawal of Antiepileptic Drugs
 - Suicidal Behavior and Ideation (class labeling)

SMQ (Narrow Search)	RR
(1) Hostility/aggression	4.4
(2) Vestibular disorders	4.258
(1) Hearing and vestibular disorders	4.088
(1) Hyponatraemia/SIADH	3.832
(2) Hearing impairment	3.832
(1) Dyslipidaemia *	2.555
(1) Biliary disorders	2.135
(2) Functional, inflammatory and gallstone related biliary disorders	2.135

- Final Prescribing Information
- Boxed Warning:
 - Serious Psychiatric and Behavioral Reactions
- Warnings & Precautions:
 - Falls
 - Dizziness & somnolence
 - Withdrawal of Antiepileptic Drugs
 - Suicidal Behavior and Ideation (class labeling)



Required Skills?



Coding

- --Logical approach
- --Ability to apply rules
- --Clinical knowledge
- --Research skills
- --Language abilities
- --Good memory
- -- Desire to understand
- --Attention to detail
- --Ability to explain to others

Analysis

- --Clinical knowledge
- --Desire to understand
- --Patience
- --Lateral thinking
- --Willingness to explore data
- --Ability to remain unbiased





MedDRA Who uses MedDRA?

- Coder Codes Clinical Trials and Pharmacovigilance data
- Drug Safety Associate Enters cases for monitoring & reporting
- Clinical Scientist Evaluates & analyses clinical trial data
- Drug Safety Physician Performs periodic reporting & signal detection
- Others
 - Investigator site staff
 - CRA/Monitor
 - Data Manager
 - Statistician
 - Quality & documentation
 - Software designer
 - Database programmer





MedDRA Know more?

Visit: <u>www.meddra.org</u>



MedDRA Training

How to subscribe

Learn more

Register for the
MedDRA & UMC
WHODrug User Group
Meeting

Bristol-Myers Squibb is hosting the next US Industry MedDRA User Group meeting on 3 October and the UMC WHODrug meeting on 4 October

15 August 2019 MedDRA v22.1 will be





Medical Dictionary for Regulatory Activities

Thank You!!

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