Multisectorial cooperation through SPOCs; health, customs, police perspectives

Domenico Di Giorgio
Director of Counterfeit Prevention Unit
AIFA – Italian Medicines Agency

Single Points of Contact

International Co-operation

Network
National SPOC

Co-operation with industry

SPOC for Drug Regulatory Authority (DRA)
• Risk Assessment for Public Health
• National SPOC

SPOC for Customs

SPOC for Police

SPOC for Justice

See pre-reading document
Purpose of model

Model should be the basis for countries to establish the SPOC network at national level or to check their existing networks.

National network should be set up by and in between the main national authorities who are competent for handling pharmaceutical crime.
Tasks of a SPOC

- represents the co-operation partner within the network
- manages incoming and outgoing information - reports a case
- handles the information flow
- develops and applies a model procedure for managing pharmaceutical crime cases within his/her authority.
- DRA SPOC coordinates the risk assessment of pharmaceutical crime signal. The signal shall be identified, analysed and evaluated. The risk management procedure shall be continuously reviewed and improved. In any case, the protection of public health has priority.

Medicrime Convention

Article 17
National measures of co-ordination, collaboration and information exchange
3 a. receiving information and data, including through contact points, at the national or local levels and in collaboration with private sector and civil society, for the purpose of taking preventive and repressive action, observation, evaluation and comparison of phenomena related to counterfeiting of medical products and similar crimes involving threats to public health;

Article 22
International co-operation on prevention and other administrative measures
2 The Parties shall, without prejudice to their internal reporting systems, designate a national contact point which shall be responsible for transmitting and receiving requests for information and/or co-operation in connection with the fight against counterfeiting of medical products and similar crimes involving threats to public health.

Information and text: www.coe.int/medicrime
Survey: Network and SPOCs System

Survey questions

1) Is there a collaboration system?
2) Formal – Informal – Ad Hoc?
3) Frequency of meetings?
4) SPOCs nominated?
5) Obstacles for setting up a Network?

Survey report: 2004  [see in your documents]

Survey: Network and SPOCs System

Feedback from countries (n=24):

Austria – Belgium - Czech Republic – Denmark - Estonia –
Finland - France – Germany - Hungary - Ireland - Latvia -
Liechtenstein - Malta – The Netherlands - Northern Ireland -
Norway - Poland – Portugal – Romania - Slovakia – Spain -
Sweden - Switzerland - UK
Survey: Network and SPOCs System

Feedback from 24 EU countries: **Major Observations**

- Members of the HMA-WGEO (EU) are only at the first onset of organized collaboration against Pharmaceutical Crime at national level.
- Collaboration (operational and/or exchange of information) is mostly ad hoc based and informal.
- There are little organised frequent meetings between the main players: DRA, customs, police, others.
- Members are convinced about the importance of nominating SPOCs so they know whom to address.

Survey: SPOC network Added value

- *Indicate example* (template for information exchange about recent national cases of counterfeit medicines and related crimes). *Give conclusions for networking between SPOCs, added value for that particular case*

- 6 of 12 countries indicated recent examples of collaboration of SPOCs, 5 countries indicated routine collaboration of SPOCs.
- 10 of 12 countries seem to have a functioning collaboration system, they described collaboration of 2 to 6 national authorities (mostly 3 authorities).
- 7 of 12 countries explicitly named benefits of the SPOC network:
  - Thanks to international network of National SPOCs the information about the adulterated product could be transferred to other countries.
  - A SPOC network improves collaboration and speeds up the investigation.
  - By using the network of National SPOCs statements, invoices and bank documents were obtained in a timely manner....
  - The created collaboration system between competent authorities and network of national SPOCs allow to protect people from serious health danger.
Building of SPOC network

Obstacles:
- exchange of information barriers?
- legal reasons?
- political reasons?
- priority reasons?

Ratification of Medicrime Convention (?)

Objectives of national network

- Regular and ad hoc meetings, secretariat
- Structured secure database at SPOC and network level
- Procedures for handling routine pharmaceutical crime signals
- Procedures for co-operation, information exchange, data collection and management
- Stakeholders notify any signal to the National SPOC who informs the network if necessary
- Set up training
- Annual report

Improvement at national level?
Example 1: Switzerland - collaboration with customs

- Training of customs officers by Swissmedic
- Joint elaboration of customs proceedings
- Imports of drugs, including mail, courier and personal carrying, are controlled by customs.
- Customs officers call Swissmedic in every case of a suspected illegal import.
- Swissmedic expert decides whether to pass or hold the import.
- In case of hold, administrative measures against the importer are started
- About twice a year: special campaign e.g. open all parcels from India
Example 2: Belgium – Multidisciplinary Hormone Cell

- Informal network: Police, Customs, Medicines agency, Food Agency, Justice
- Initially fight against illegal hormonal treatment of cattle
- Expanded to PHARMACEUTICAL CRIME: doping in sports, illegal medicines, counterfeit medical products, internet, smuggle..
- Collaboration script (no procedures yet)
- Meeting every two weeks, meeting reports, secretariat
- Database
- Training
- Annual report
Example 3: Italy – IMPACT Italia

- Formal network: Police, Customs, Medicines agency (AIFA) and Justice
- Cooperation in different areas: Operations, IT Intelligence, campaigns...
- Regular meetings
- Database and portal
- Training

Example 4: Portugal – 3C: Collaboration with customs

**INFARMED/Customs cooperation on a daily basis**

1. INFARMED/I.P.
   - Decision: Product destruction (falsified medicines)
   - Return to the sender (legal medicines)
   - Sampling to Lab control (Unknown products)

2. Customs
Example 4: Portugal – 3C : Collaboration with customs

**Autoridades Aduaneiras**

<table>
<thead>
<tr>
<th>nº</th>
<th>Infarto de</th>
<th>Nome da</th>
<th>País de</th>
<th>Designação medicamentosa</th>
<th>Qt.</th>
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**INFARMED**

- Data: 2011/02/01 to 2011/10/31
- Total: 3281 packages w/ illegal medicines
- Daily average:
  - 18 different products
  - 129 packs
  - 1851 units

*Data and names are for illustrative purposes only due to data protection issues.*
Example 4: Portugal – 3C : Collaboration with customs

Quantidades - Tipo de Medicamentos

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<th>Main products:</th>
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<td>- Skin whitening</td>
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<td>- Weight lost</td>
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Country D

Country B

Country A

Country C

Country G

Country F
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THANK YOU

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Director of Counterfeit Prevention Unit
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d.digiorgio@aifa.gov.it