



ANNUAL REPORT 2023



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1. INTRODUCTION

In 2023, the State Institute for Drug Control continued its highly intensive cooperation with the Ministry of Health of the Czech Republic (hereinafter referred to as the “Ministry of Health”), not only in the implementation of tasks within the scope of EU cooperation in the area of pharmaceuticals and medical devices, but also in the preparation and subsequent legislative process of the adoption of new legal regulations with relevance for the scope of the Institute’s operation. Every-day active cooperation with the Ministry of Health in the effort to safeguard sufficient quantities of quality pharmaceuticals for the citizens of the Czech Republic was commonplace.

In 2023, the Institute, in cooperation with the Ministry of Health, continued preparatory works on the new Act on Pharmaceuticals, specifically splitting the existing Act No 378/2007 Coll., on Pharmaceuticals, as amended, into the human and veterinary parts. Furthermore, the Institute was involved in the preparation of an amendment to the Act on Pharmaceuticals concerning limited availability of medicinal products; this amendment was adopted by majority with effect from 01 January 2024, and hence in the last quarter of the year, the Institute concentrated upon the joint preparatory efforts for this amendment. In the course of 2023, joint meetings with the Ministry of Health, the purpose of which was the preparation of new legislative regulations, were also held and the work is to continue also in 2024.

In addition to the aforementioned, the Institute also contributed to legislative amendments concerning the marketing authorisation of medicinal products, clinical trials on medicinal products, and medical devices. Along with direct legislative works, the Institute was also involved in the assessment of various proposed amendments to the concerned Chamber documents discussed by the Chamber of Deputies of the Parliament of the Czech Republic. Furthermore, the Institute commented on other proposed legal regulations governing areas that were also of relevance for the Institute’s operation.

As in the previous years, close communication with the Ministry of Health in drafting of opinions of the Czech Republic on first questions presented to the European Court of Justice regarding the sphere of powers of the Institute continued also during the last year.

In 2023, the Institute continued to cooperate with the Institute for State Control of Veterinary Biologicals and Medicines in Brno; in the sphere of regulating the pharmaceuticals market, it cooperated with the Office for the Protection of Competition. In the sphere of market surveillance, the Institute’s partners included, in particular, the Czech Agriculture and Food Inspection Authority (CAFIA) and the Customs Administration. The Institute, however, cooperated also with law enforcement authorities, where a significantly increasing trend of sharing information and data from the information systems administered by the Institute, primarily the ePrescription system, has been obvious.

Cooperation on the international level also continues. As part of international cooperation, the Institute has been actively involved in more than 100 workgroups, subgroups, and committees. These are primarily the bodies of the EU Council, European Commission, and the European Medicines Agency (EMA) as well as the working bodies of the World Health Organisation (WHO), the Council of Europe and its European Directorate for the Quality of Medicines and Health Care (EDQM) or the Organisation for Economic Cooperation and Development (OECD). One of the highest priorities in terms of drug regulation is primarily the membership of the Institute’s experts in EMA scientific committees which address issues associated e.g., with the safety of medicinal products on the EU market or the approval of new pharmaceuticals. Furthermore, the Institute has been actively involved in informal working groups of experts from various countries in the field of regulation of pharmaceuticals and medical devices, pricing, health technology assessment (HTA) or regulation of human tissues and cells. One of the most important groups is the Heads of Medicines Agencies (HMA) network that, along with EMA, forms the European medicines regulatory network. The Institute has been involved in this network not only via the Institute’s Management membership, but also through direct involvement in the team for the executive support of the steering group of the entire network, the role of which has been significantly enhanced due to the global COVID-19 pandemic.

Following successful validation, the total of 606 applications were submitted for expert assessment to the Marketing Authorisation Section. In 2023, the number of received applications for DCP marketing authorisations with the Czech Republic as the Reference Member State was similar as in 2022. Furthermore, 314 applications for the revocation of marketing authorisation were processed, which is a slight decrease compared to 2022.

2023 was another year of the transitory period (starting on 31 January 2022) following the coming into force of Regulation (EU) No 536/2014 of the European Parliament and of the Council of 16 April 2014 on clinical trials on medicinal products for human use, and repealing Directive 2001/20/EC; therefore sponsors had yet another month to choose the method of submitting their applications for the authorisation of clinical trials either nationally (no later than by 30 January 2023), or via the CTIS and joint assessment of the application by all of the concerned Member States. In 2023, the total of 440 applications for clinical trial authorisation were submitted; 37 applications for clinical trial authorisation/notification were submitted nationally and 403 applications were submitted via the CTIS. In total, 132 national decisions were issued. Most of the applications concerned phase III international, multicentric, randomised, blinded, placebo- or active-controlled clinical trials conducted by foreign sponsors.

In 2023, the Institute received 4,089 suspected adverse drug reaction (ADR) reports in total. This number of received reports is significantly lower than the numbers received in the previous two years, when a huge interest in the safety of COVID-19 vaccines resulted in an unprecedented attention given to in suspected ADR reporting. Nevertheless, the total number of reports

in 2023 is higher than the average normally seen during pre-COVID years – in 2010–2020, SÚKL received on average approx. 3,000 reports per year.

The Laboratory Control Department completed 803 sample analyses. The number of samples rated as non-compliant slightly decreased compared to the previous year and accounted for 1.7 %. Quality defects were confirmed primarily in pharmacy samples. Otherwise, the quality of proprietary medicinal products available on the Czech market is very good.

As at the end of 2023, the Institute registered the total of 2,461 pharmacies and 3,495 vendors of selected human medicinal products, 41 nuclear medicine departments of healthcare facilities, 385 distributors, and 48 brokers of medicinal products for human use. In 2023, the inspectors of the Pharmacy and Distribution Department completed the total of 675 inspections of pharmacy care facilities – pharmacies, of which 32 were hospital pharmacies of inpatient care providers. In 2023, the inspections of vendors of selected medicinal products involved 108 shops in total; furthermore, 259 inspections of distributors and 17 inspections of brokers were carried out in total.

In 2023, the Inspection Department conducted the total of 284 inspections as part of its surveillance activities in the sphere of manufacture of pharmaceuticals (incl. the manufacture of transfusion products and raw materials for further manufacture of pharmaceuticals), of which 55 were inspections focusing upon the regulated area of tissues and cells.

In 2023, the Quality Defects Unit, which is in charge of cases concerning the occurrence of counterfeit medicinal products in the legal distribution chain or theft of medicinal products, addressed the total of 67 such cases, of which three were cases of theft of medicinal products from the legal distribution chain.

In 2023, the Institute addressed the total of 122 instigations concerning a breach of Act No 40/1995 Coll., on Advertising Regulation, as amended; 19 administrative procedures were completed and as a result thereof, 19 fines amounting to the total of 5,970,000 CZK for the breach of the Act on Advertising Regulation were imposed.

The Institute, as the supervisory authority, also carries out inspections of manufacturers, importers, distributors, persons servicing, selling, and dispensing medical devices, as well as activities in the area of assessments of proper placement of medical devices onto the market.

The objective of both scheduled and ad hoc inspections carried out by the Medical Device Section is to ensure that medical devices that are made available on the market in the Czech Republic be safe and functional and that health care be provided using appropriate, safe, and effective medical devices in a manner preventing any damage to the health of users or patients in the proper use of the devices for their intended purposes. In 2023, the inspectors of the Control Unit conducted the total of 167 inspections, of which 92 were inspections at providers of healthcare services (both state and non-state healthcare facilities) and 75 were inspections at medical device manufacturers, importers, distributors, and persons dispensing or servicing medical devices.


In the course of 2023, the Section of Pricing and Reimbursement Regulation continued to commence in-depth reimbursement revisions as planned. The plan for 2023 included 27 in-depth revisions (of 683 SÚKL codes) and these were commenced. In 2023, savings in public health insurance funds were achieved both through in-depth and abbreviated reimbursement revisions. The total savings generated by abbreviated revisions and by in-depth revisions executable in 2023 are estimated at 2,844,167,039 CZK and at 2,347,864,044 CZK, respectively.

The ePrescription system keeps bringing a wealth of benefits, particularly for the patients. Last year, two new modules – eVaccination and eOrder – were successfully launched. Also, a new option allowing for the use of citizen's identity also by healthcare professionals, was implemented. The electronic delivery of the ePrescription identifier – i.e., via SMS or e-mail messages – has been gaining an ever-growing popularity. In 2023, the numbers increased to the record amount of more than 47.8 million SMS messages and 840 thousand e-mail messages. In 2023, cross-border ePrescription was launched in Croatia, Poland, Estonia, Spain, and Portugal. In these countries, almost 800 Czech prescriptions were dispensed in 2023. The system is planned to be gradually extended to other EU countries in the coming years.

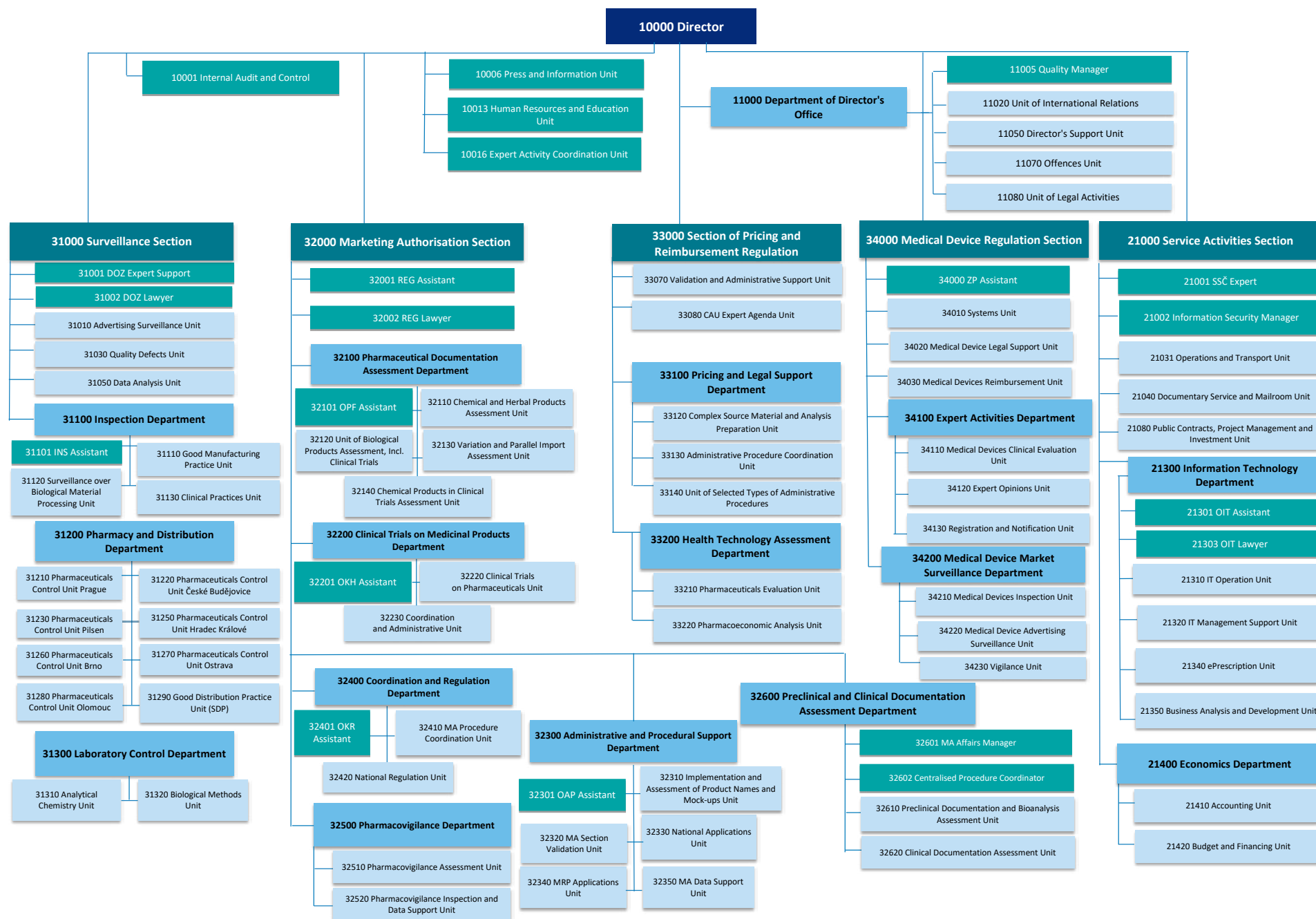
Within the scope of its obligation to inform both the professionals and the general public, in 2023, the Institute administered the following websites: www.sukl.cz, www.olecich.cz, www.epreskripce.cz, and www.sakl.cz. The Press and Information Unit also coordinates publication activities, specifically the preparation and publication of the Věstník (Newsletter), the Farmakoterapeutické informace (Pharmacotherapeutic Information) drug bulletin, and the Zpravodaj nežádoucích účinků léčiv (Adverse Drug Reaction Newsletter).



In 2023, the numbers of SMS and e-mail messages with ePrescription identifier were record-breaking. Specifically, they amounted to more than **47.8** mio SMS messages and **840** thous. e-mail messages.

The background of the slide is a teal color. On the left side, there are several concentric white circles of varying radii. The right side of the slide features a photograph of a modern, clean laboratory. The lab has white cabinetry, a long white countertop, and various pieces of scientific equipment, including what appears to be a large fume hood or biosafety cabinet. The floor is highly reflective, showing the overhead lights. The overall aesthetic is professional and scientific.

2. SÚKL'S ORGANISATIONAL STRUCTURE





3. INVOLVEMENT IN THE NETWORK OF NATIONAL, EUROPEAN, AND OTHER INTERNATIONAL INSTITUTIONS

3.1 COOPERATION WITH THE MINISTRY OF HEALTH IN THE AREA OF LEGISLATION

In 2023, the Institute continued its close cooperation with the Ministry of Health of the Czech Republic, particularly in the implementation of EU regulations governing the sphere of pharmaceuticals, human tissues and cells, and medical devices, and also in the legislative process of adoption of new legal regulations or amendments to existing legislation with significant impact upon the scope of the Institute's operation.

First and foremost, it should be mentioned that since the start of 2023, the Institute, in cooperation with the Ministry of Health, continued the preparatory works on the Act on Pharmaceuticals, specifically the splitting of the existing Act No 378/2007 Coll., on Pharmaceuticals, to a human and veterinary part. Following agreement between the Ministry of Health and the Ministry of Agriculture, it was decided to prepare a new act due to the need for the actual division of regulation of pharmaceuticals in the human and veterinary sectors, and also with a view to the excessive number of amendments made to the regulations that significantly hindered the clarity of the Act which is rather extensive in itself.

In this respect, the Institute, as the regulator in the sphere of medicinal products, has been significantly involved in the drafting of the new wording of the basic standard governing medicinal products. These works were ongoing throughout 2023, including joint meetings with the representatives of the Ministry of Health. All SÚKL's regulatory organisational units concerned by the agenda of medicinal products have been actively involved in this preparatory process.

In the sphere of medicinal products, in 2023, the Institute was also actively cooperating in the drafting of several amendments and addressing of comments submitted in respect of these amendments. This concerns, in particular, an amendment that has been adopted with effect from 01 January 2024 as Act No 456/2023 Coll., Amending Act No 378/2007 Coll., on Pharmaceuticals and on Amendments to Some Related Acts (Act on Pharmaceuticals), as amended, and Act No 48/1997 Coll., on Public Health Insurance and on Amendments to Some Related Acts, as amended, the purpose of which is to improve the availability of medicinal products.

In this amendment, the Institute was also intensively involved in the preparation of related amendments to implementing legal regulations, specifically the following decrees:

- No. 457/2023 Coll., on the list of human medicinal products not subjected to the obligation of the marketing authorisation holder to ensure supplies thereof after the supply suspension or termination date;
- No. 458/2023 Coll., amending Decree No. 329/2019 Coll., on the prescribing of medicinal products in the provision of healthcare services, as amended;
- No. 459/2023 Coll., amending Decree No. 84/2008 Coll., on good pharmaceutical practice and detailed conditions of handling of pharmaceuticals in pharmacies, healthcare facilities, and other operators and facilities dispensing medicinal products, as amended;
- No. 460/2023 Coll., amending Decree No. 228/2008 Coll., on marketing authorisation of medicinal products, as amended;
- No. 461/2023 Coll., amending Decree No. 229/2008 Coll., on the manufacture and distribution of pharmaceuticals, as amended.

Another amendment is the bill amending the Act on Pharmaceuticals and Act on Medical Devices concerning the implementation of Regulation (EU) 2022/123 of the European Parliament and of the Council of 25 January 2022 on a reinforced role for the European Medicines Agency in crisis preparedness and management for medicinal products and medical devices, whose legislative process has not been completed to date (Chamber document 461). Its aim is to safeguard a high standard of human health protection by enforcing the EU's ability to manage emergencies in the sphere of public health that affect medicinal products and medical devices, and to respond thereto, and, moreover, to contribute to ensuring flawless functioning of the internal market with these products during emergencies in the area of public health.

Upon call by the Ministry of Industry and Trade, the Institute also drafted proposed amendment to Act No 40/1995 Coll., on Advertising Regulation and on Amendment to Act No 468/1991 Coll., on Advertising Regulation and on Amendments to Act No 468/1991 Coll., on the Operation of Radio and Television Broadcasting, as amended, considered necessary thereby for the sphere of human medicinal products and medical devices.

Furthermore, the Institute intensively cooperated with the Ministry of Health in the finalisation of a proposed bill amending Act No 48/1997 Coll., on Public Health Insurance and on Amendments to some Related Acts, implementing Regulation (EU) 2021/2282 of the European Parliament and of the Council of 15 December 2021 on health technology assessment and amending Directive 2011/24/EU. Health technology assessment (HTA) is a multidisciplinary process collecting and evaluating information on medical, social, economic, and ethical impacts of the use of health technologies. Its aim is to increase the effective capacity of the healthcare system and to maximise utility with limited resources. For the purposes of the implementation, the Institute has drafted the initial proposal of the amendment to the Act on Public Health Insurance, which is to undergo further legislative process in 2024.

In the field of public health insurance, the Institute was involved in the drafting of amendment to Act No 48/1997 Coll., on Public Health Insurance and on Amendments to Some Related Acts, in the area of pricing and reimbursements of medicinal

products and medical devices. This work is to intensively continue also in 2024, as by the end of 2023, the internal comments procedure was still in process.

Along with direct legislative works, the Institute was also monitoring the activities in the Czech Parliament and was involved in the assessment of various proposed amendments to the Chamber documents of interest that were subject to Parliamentary discussion.

In addition to the activities associated with these important legislative tasks, the Institute continuously and actively monitors the preparation of all legal regulations that could affect the interests protected by the Institute, and, where applicable, files comments thereon; this concerns e.g., amendment to Act No 526/1990 Coll., on Prices, amendment to Act No 263/2016 Coll., the Atomic Act, amendment to Act No 167/1998 Coll., on Dependency-Producing Substances and on Amendments to Some Other Acts, two amendments to Act No 372/2011 Coll., on Healthcare Services and Conditions of their Provision (Act on Healthcare Services), and amendment to Act No 373/2011 Coll., on Specific Healthcare Services, and implementing legal regulations to these acts, particularly Decree No 143/2008 Coll., on detailed requirements for ensuring the quality and safety of human blood and blood components (Decree on Human Blood), and Decree No 114/2013 Coll., on detailed conditions governing the determination of medical fitness and the scope of examination of living or deceased donors of tissues or organs for transplantation purposes (Decree on Medical Fitness of Donors of Tissues and Organs for Transplantation Purposes). In this respect, the Institute held consultations not only with the Ministry of Health, but also with the Ministry of Finance, and the State Office for Nuclear Safety.

The statutory requirements governing individual areas of expert activities were further explained by the Institute in the guidelines published thereby. In these guidelines, the Institute was also informing the public about the guidance published by the European Commission and by the European Medicines Agency.

As in the previous years, close cooperation with the Ministry of Health of the Czech Republic in drafting of opinions of the Czech Republic on first questions raised by the European Court of Justice regarding the sphere of powers of the Institute continued also during the last year.

3.2 COOPERATION WITH OTHER STATE INSTITUTIONS IN THE CZECH REPUBLIC

The Institute continued its cooperation with the Institute for State Control of Veterinary Biologicals and Medicines in Brno. In the area of pharmaceutical market regulation, its partners were primarily the Czech Agriculture and Food Inspection Authority (CAFIA) and the Customs Administration. As in the previous years, also in 2023, the Institute continued its highly intensive cooperation with public authorities through providing answers to their questions falling within the scope of the Institute's powers. The majority of requests came from law enforcement authorities and a significantly increasing trend in the provision of information and data from information systems administered by the Institute has been obvious, particularly from the ePrescription system: 37 requests in 2021, 95 requests in 2022, and 183 requests in 2023.

In total, this involved 366 requests, of which 338 were raised by the Czech Police, 13 by courts of justice, three by the General Directorate of Customs, four by revenue authorities, three by the General Inspectorate of Security Forces, one by the Ministry of Health of the Czech Republic, one by the ombudsman, one by the Military Police, one by a court enforcement officer, and one by the Prison Service of the Czech Republic.

3.3 COOPERATION WITH EU INSTITUTIONS AND OTHER FOREIGN PARTNERS

The Institute has been actively involved in international cooperation through its participation in the activities of more than 100 working groups, subgroups, and committees. These represent namely bodies of the EU Council, the European Commission, and the European Medicines Agency (EMA) as well as the working bodies of the World Health Organisation (WHO), the Council of Europe and its European Directorate for the Quality of Medicines and HealthCare (EDQM), or the Organisation for Economic Co-operation and Development (OECD). The membership of the Institute's employees in EMA scientific committees that address e.g., issues associated with medicinal product safety on the EU market or the approval of new pharmaceuticals, is considered a matter of particular importance from the perspective of regulation of pharmaceuticals.

The Institute has been also actively involved in informal working groups that bring together experts from various countries specialised in the field of regulation of pharmaceuticals and medical devices, pricing and health technology assessment, or the regulation of human tissues and cells. One of the most important groups is the network of the Heads of Medicines Agencies (HMA) that, along with the EMA, forms the European medicines regulatory network. The Institute regularly participates in its activities not only via the membership of the Institute's director, but also through direct involvement of experts in the area of law, enforcement, clinical trials or communication. As part of its activities in HMA working groups as well as their management structures, the Institute has been involved in the development and implementation of the joint HMA/EMA strategy.

The Institute has been regularly delegating its representatives, including top management members, senior staff as well as external experts, to attend the meetings of the aforementioned working bodies. Relevant strategic information from these groups is forwarded via membership in sectoral and cross-sectoral bodies also down to the national level. One of the key topics being addressed in the long term on the international level is particularly the availability of medicinal products or the issue of antimicrobial resistance (AMR).

For its employees, the Institute avails of the offer of education in the EU NTC HMA/EMA European training centre, the purpose of which is to harmonise scientific and regulatory practice across the EU and to enhance the qualification of employees of drug agencies in the EU Member States.

In May 2023, the Institute organised a training event for foreign delegates as part of the OMCL Counterfeit/Illegal Medicines Training. The expert aspects were covered by colleagues from the Laboratory Control Department.

In 2023, the Institute successfully completed an audit within the JAP scheme and also the "Benchmarking of European Medicines Agencies" – BEMA V audit, which focused upon drug agency processes in the sphere of management, assessment of applications for marketing authorisation of medicinal products, pharmacovigilance activities, safety of medicines, and inspections. The Benchmarking of European Medicines Agencies pointed out SÚKL's strengths in the sphere of clinical trials and in the area of safety of medicines and it highly appreciated the Institute's involvement in the activities of the European regulatory network and the support provided by the Institute's Management in this area.

Representatives of SÚKL's Management took part in mutual talks with a Malaysian delegation from the Medical Device Authority held within the premises of the Ministry of Industry and Trade, where both parties presented their activities in the sphere of medical devices and shared their experience.

On the EU level, the Institute is also involved in the process of adoption of new European legislation and in discussions on non-legislative proposals in the EU Council falling within the scope of the Institute's responsibility. In 2023, discussions on the draft regulation on the standards of quality and safety of substances of human origin continued; the regulation is to revise the current EU legislation governing the standards of quality and safety of human blood and the determination of quality and safety standards for human tissues and cells. Furthermore, discussions on so called Pharmaceutical Package commenced. The Pharmaceutical Package brings the most extensive reform of pharmaceutical legislation in the last 20 years, with the primary aim to improve the availability of medicines for EU patients, to support innovations, and to ensure environmental sustainability of pharmaceuticals.

BUSINESS TRIPS ABROAD

Compared to the previous year, 2022, which was, in its first quarter, still partially affected by the COVID-19 pandemic with international meetings being held online at that time, in 2023, the conditions for travel were not restricted by any limitations and most scheduled trips abroad took place. In total, 233 business trips abroad took place in 2023, of which 128 were partially or fully refunded by the organising institutions (the European Commission, EU Council, EMA, EDQM, etc.). Of the total number of completed trips, 18 were educational events, ten were trips within the scope of expert projects, ten trips were undertaken to conduct foreign inspections (particularly in India), and 195 were routine business trips abroad. The Institute's employees travelled mostly to Brussels and Amsterdam, where they took part in events held in European institutions.



4. REGULATORY ACTIVITIES OF SÚKL

4.1 RECORD SYSTEM

In 2023, the electronic record system of the Institute, incl. its regional workplaces, registered 93,363 delivered documents and 72,443 dispatched documents (Table 1). In the course of 2023, more than 95.7 % of all documents were sent electronically. Of the total number of 72,443 sent documents, 52,054 documents were sent via the data mailbox (Table 2). The overview of communication channels indicates continued electronisation of individual agendas in the Institute.

Tab. 1 Registration of documents in 2021–2023

	2021	2022	2023
Received documents	102,484	92,515	93,363
Dispatched documents	77,488	71,700	72,443

Tab. 2 Overview of communication channels in 2023

	Mailroom	E-mail messages	Data messages	Medical device reimbursement notifications	Total
Received documents	27,781	51,420	11,736	2,426	93,363

	Dispatch room	E-mail messages	Data messages	Electronic notice board	Total
Dispatched documents	3,106	11,054	52,054	6,229	72,443



MARKETING AUTHORISATION SECTION

Prior to their placement onto the market in the Czech Republic, most proprietary medicinal products are subject to marketing authorisation. Within the scope of the marketing authorisation procedure, the Marketing Authorisation Section assesses dossiers, through which the future marketing authorisation holder evidences the safety, efficacy, and quality of the product.

The product therapeutic indications, contraindications, posology, classification for dispensing, name of the medicinal product as well as the package leaflet intended for patients and proposed labelling of the medicinal product are subjected to assessment. Upon the issuance of the marketing authorisation, the Institute sends the following to the marketing authorisation holder: the approved Summary of the Product Characteristics, which serves doctors and healthcare professionals as a key source of information about the medicinal product; approved package leaflet intended for patients; approved labelling of the medicinal product; and the identification sheet with the allocated medicinal product codes allowing for the identification of each presentation of the medicinal product. The Marketing Authorisation Section also assesses submitted applications for variations to marketing authorisation, marketing authorisation renewals, transfers, and revocations as well as applications for the authorisation of parallel import and variations to, renewals or revocations of parallel import authorisations. At the same time, the Section is responsible for the implementation of the results of European assessments into the marketing authorisations of medicinal products (e.g., referrals, uniform PSUR [Periodic Safety Update Report] assessments, PRAC [Pharmacovigilance Risk Assessment Committee] recommendations on pharmacovigilance signals or paediatric work-sharing), for the development of lists of medicinal products jeopardized or extinct due to the sunset clause application, and for the conduct of administrative procedures concerning exceptions from the sunset clause application.

The Clinical Trials on Medicinal Products Department carries out assessments of applications for authorisation/notification of clinical trials, supervises the conduct of clinical trials, and assesses applications for hospital exemptions; it also assesses non-interventional efficacy studies and projects of studies to decide whether the study in question is a clinical trial on pharmaceuticals or not.

The Department of Pharmacovigilance is in charge of ensuring the safety of medicinal products and conducting the evaluation of their risk/benefit ratios. The pharmacovigilance activities comprise of the collection of data about potential risks of pharmaceuticals (from the system of spontaneous suspected adverse drug reaction reporting, from post-marketing studies of

various types, scientific literature, etc.), evaluation of any available data on potential risks, implementation of regulatory measures intended for risk minimisation, and of communicating new safety information both to professionals and to the general public.

4.2 MARKETING AUTHORISATION OF MEDICINAL PRODUCTS

APPLICATIONS FOR NEW MARKETING AUTHORISATION

In 2023, 606 applications in total were forwarded for expert assessment following successful validation. Most of them were applications for MRP/DCP marketing authorisations. The total number of applications for marketing authorisation increased from 603 applications in 2022 to 657 applications in 2023. In the area of DCP/MRP marketing authorisations, the number of applications where the Czech Republic acts as the Reference Member State is essential. In 2023, the number of received applications for DCP marketing authorisation with the Czech Republic acting as the Reference Member State was similar to that in 2022.

MARKETING AUTHORISATION RENEWALS

In 2023, the total of 361 applications were forwarded for expert assessment following successful validation. Most of them were applications for MRP/DCP marketing authorisation renewals; the total number of applications for marketing authorisation renewal received in 2023 was slightly higher than in 2022.

VARIATIONS TO MARKETING AUTHORISATIONS

In 2023, the number of received applications for variations to MRP/DCP marketing authorisations was slightly lower than that in the previous year; also, the number of received applications for variations to national marketing authorisations slightly decreased. The total number of received applications hence slightly dropped. The number of submitted applications for MRP/DCP marketing authorisation transfers increased in 2023, while the number of applications for transfers of national marketing authorisations dropped compared to 2022.

PARALLEL IMPORT

In 2023, the number of submitted applications for parallel import authorisation was similar to that in 2022. The number of submitted applications for variations to parallel import authorisations remained similar as in the previous year, at the same time, however, the number of submitted applications for parallel import authorisation renewals increased from 13 applications in 2022 to 41 applications in 2023.

MARKETING AUTHORISATION REVOCATIONS

In 2023, 314 applications for revocation of marketing authorisation were decided, which is a slight decrease compared to 2022.

606
applications for new
marketing authorisation
were forwarded for expert
assessment following
successful validation

Tab. 3 Marketing authorisation (MA) applications agenda

Process of marketing authorisation of medicinal products	Submitted in 2023	Decided in total in 2023	Total pending as of 31 December 2023
New marketing authorisations	657	471	1,067
- of which national	19	35	60
- of which MRP-RMS	36	18	77
- of which DCP-RMS	131	74	235
- of which CMS (MRP and DCP)	471	344	695
MA renewals	351	384	260
- of which national	17	24	51
- of which RMS	67	80	27
- of which CMS	267	297	182
National variations to MAs	1,685	1,722	283
- of which MA transfers	42	50	3
- of which PIL and labelling	84	100	4
- of which bulk NAT variations	1,559	1,572	276
MRP-RMS variations	766	720	182

Process of marketing authorisation of medicinal products	Submitted in 2023	Decided in total in 2023	Total pending as of 31 December 2023
- of which MA transfers	39	37	2
- of which PIL and labelling	30	26	5
- of which bulk MRP-RMS variations	697	657	175
MRP-CMS variations	4,041	4,194	1,033
- of which MA transfers	112	126	8
- of which PIL and labelling	108	98	14
- of which bulk MRP-CMS variations	3,821	3,970	1,011
MA revocations	314	314	2
Parallel import	35	25	29
Parallel import variations	89	86	13
Parallel import renewals	41	24	20
Parallel import revocations	3	3	0

Note: The Table does not reflect the numbers of pending applications from the previous period.

Explanatory notes for the Table:

RMS – Reference Member State

CMS – Concerned Member State

MRP – Mutual Recognition Procedure

DCP – Decentralised Procedure

EXPIRY/NON-EXPIRY OF MARKETING AUTHORISATIONS

In 2023, the Institute conducted 127 administrative procedures concerning the granting of an exemption from the sunset clause (marketing authorisation expiry for products not placed on the market for the period of three years).

In the course of 2023, the sunset clause as referred to under Section 34a of the Act on Pharmaceuticals was applied to 61 MA numbers and the marketing authorisation of these medicinal products was terminated.

Tab. 4 Applications for exemption from the sunset clause

	Conducted in 2023
Administrative procedures for exemption from the sunset clause	127
- of which: submitted applications	126
- of which: ex officio initiated administrative procedures	1
- granted	123
- declined	0
- suspended as undue	4
- suspended as unjustified	0
- suspended for failure to provide amendment	0
- withdrawal of application	0

Note: The table does not reflect the numbers of pending applications from the previous period.

CONSULTATIONS AND SEMINARS IN THE AREA OF MARKETING AUTHORISATION OF MEDICINAL PRODUCTS

In 2023, we gave eight oral consultations (including consultations held in the form of teleconferences) and issued twelve written opinions on process-regulation and expert requests for consultations, 26 written opinions on requests for consultations concerning medicinal product names, and 18 opinions for active substances forming an integral part of a medical device.

4.3 COOPERATION WITH THE EUROPEAN MEDICINES AGENCY AND CHMP

In 2023, as part of its cooperation with the European Medicines Agency (EMA) and the Committee for Medicinal Products for Human Use (CHMP), the Institute was involved in the assessment of centralised marketing authorisations as follows:

- ten times as rapporteur/co-rapporteur;
- 32 times it assessed type I and II variations to centralised marketing authorisations;
- once it assessed a marketing authorisation renewal;
- 26 times it assessed pharmaceutical documentation for scientific advice procedures.

Along with the aforementioned, the Institute provided comments on other centralised procedures. It regularly and actively participated in discussions held during meetings of the CHMP and other committees (COMP, PDCO, CAT, PRAC) and working groups.

4.4 CLINICAL TRIALS

2023 was another year of the transitory period (starting on 31 January 2022) following the coming into force of Regulation (EU) No 536/2014 of the European Parliament and of the Council of 16 April 2014 on clinical trials on medicinal products for human use, and repealing Directive 2001/20/EC; therefore sponsors had yet another month when they could choose the method of submitting their applications for the authorisation of clinical trials – either nationally (no later than by 30 January 2023), or via the CTIS and joint assessment of the application by all of the concerned Member States. This is associated also with the effect of two versions of the Act on Pharmaceuticals and implementing legal regulations that govern the process with a view to the method of application submission. The transitory period will last until 30 January 2025; for this period of time, it is also necessary to maintain two systems of ethics committees. Although it is no longer possible to submit the application for clinical trial authorisation nationally, there are still ongoing clinical trials authorised or approved nationally, and these are governed by the previous legislation.

Twelve ethics committees (SÚKL's Ethics Committee and eleven multicentric ethics committees) are involved in the process of assessment of applications for clinical trial authorisation submitted via CTIS. In the course of the year, five meetings with the representatives of these ethics committees were organised to set up coordination of the process, their harmonised approach to the application assessment, and their involvement in transition clinical trials. Regular working meetings will continue also next year.

In 2023, the total of 440 applications for clinical trial authorisation/approval were submitted; 37 applications for clinical trial authorisation/notification were submitted nationally and 403 applications were submitted via the CTIS. Of the 403 applications submitted via CTIS, 244 were initial applications, 18 with the Czech Republic added as a new Member State accessing a previously authorised clinical trial, twelve applications contained only IMPD with reference to other submitted applications for clinical trial authorisation, 16 applications constituted resubmission, and 113 applications concerned a transition from a clinical trial previously authorised/approved nationally pursuant to Directive 20/2001/EC to the regimen governed by Regulation 536/2014. Furthermore, 24 substantial modifications of documentation Part I, 53 modifications of documentation part II, and 112 substantial modifications of both Part I and II of documentation were submitted via CTIS.

In 2023, 132 authorisations/approvals of clinical trials submitted nationally were issued, 22 applications submitted nationally were withdrawn by the sponsor, and none of the clinical trials submitted nationally was declined. Most of the applications concern phase III, international, multicentric, randomised, blinded, placebo- or active-controlled clinical trials conducted by foreign sponsors. Of the total number of 132 nationally processed applications for clinical trial authorisation/notification, ten were clinical trials submitted by non-commercial entities (academic research), 13 applications concerned orphan medicinal products, 18 were applications for clinical trials which enrolled also children or which were directly intended for paediatric population (paediatric trials), eight applications for clinical trial authorisation concerned advanced therapy products (four gene therapies, two somatic cellular therapies, and two tissue engineering products); none of the applications concerned a first-in-human (FIH) trial with first administration of a medicinal product to man.



440

submitted applications for
clinical trial approval

Of the 403 applications for clinical trial authorisation submitted via CTIS, 208 applications were authorised, 48 clinical trials were authorised with condition, 26 applications were withdrawn, six applications were declined, two applications lapsed during validations, and seven applications lapsed for failure to observe the timeline. Of the total number of 208 authorised clinical trials, eleven clinical trials were submitted by non-commercial entities (academic research), 20 concerned orphan medicinal products, 32 were clinical trial which enrolled also children or which were directly intended for paediatric population (paediatric trials), five authorised clinical trials concerned advanced therapy products (four gene therapies and one somatic cellular therapy), and four were first-in-human (FIH) trials.

Tab. 5.1 Clinical trials in 2023

Applications for clinical trial (CT) authorisation		
Initial applications (INIT)	244	
Czech republic added to a previously approved CT as another Member State (AM)	18	
Stand-alone application containing only IMPD	6	
Resubmission	15	
Transition trial (TTR)	113	
Resubmission – TTR	1	
Stand-alone application containing only IMPD for TTR	6	
Concluded applications for CT authorisation		
Authorised	208	
Authorised with condition	48	
Declined	6	
Withdrawn by sponsor	26	
Lapsed	7	
Lapsed during validation	2	
Czech Republic acting as the RMS		
Submitted applications	90	
Concluded as authorised	37	
Concluded as authorised with condition	12	
Concluded as lapsed	2	
Concluded as withdrawn by sponsor	12	
Submitted applications for substantial modification authorisation (SM)		
Documentation PART I only	24	
Documentation PART II only	53	
Documentation PART I and II	112	
Other classification – by CT type		
	Submitted	Concluded
National	11	9
International	393	288
Low-intervention	10	5
Cluster	0	0

Tab. 5.2 Applications submitted nationally

	Applications received in 2023	Number of decisions issued in 2023	Of which declined	Of which withdrawn
Applications for CT authorisation	37	49	0	13
CT notifications		83	0	9
Notifications of amendments to CTs	3,784	3,689	–	–

Tab. 6.1 Numbers of applications submitted nationally in 2023 by clinical trial phase

	Applications received in 2023	Applications assessed in 2023
Phase I	4	9
Phase II	13	52
Phase III	13	83
Phase IV	2	5
Bioequivalence studies	5	5

Tab. 6.2 Numbers of applications submitted via CTIS in 2023 by clinical trial phase

	Received in 2023	Concluded in 2023
Phase I – bioequivalence study	7	6
Phase I – first-in-human (FIH)	3	0
Phase I – other	9	8
Phase I/II – bioequivalence study	1	1
Phase I/II – first-in-human (FIH)	4	4
Phase I/II – other	12	6
Phase II	87	64
Phase II/III	14	10
Phase III	248	185
Phase III/IV	7	4
Phase IV	12	9

Tab. 7.1 Indication groups of clinical trials – Submitted nationally and assessed in 2023

Indication group	Number
Oncology	35
Metabolic disorders + endocrinology	1
Healthy volunteers	8
Neurology	19
Cardiovascular system	12
Respiratory + allergology	10
Infectious	4
Dermatology	8
Rheumatology	10
Haematology	2
Psychiatry	6
GIT	9
Urogenital diseases	3
ENT	0
Gynaecology	1
Ophthalmology	5
Paediatrics	1

Indication group	Number
Internal medicine	8
Transplantations	1
Anaesthesiology and resuscitation	0
Investigations	0
Diabetology	2
Other	3
Pain	0
Vaccination	2
Pharmacokinetics	4

Tab. 7.2 Indication groups of clinical trials – Submitted via CTIS and authorised in 2023

CTIS indication group	Number
C04 Neoplasms	75
C01 Metabolic Disorders and Hormonal Diseases	3
C20 Immune System Diseases	30
C10 Nervous System Diseases	25
C14 Cardiovascular Diseases	30
C08 Respiratory Tract Diseases	15
C01 Bacterial Infections and Mycoses	0
C17 Skin and Connective Tissue Diseases	12
C19 Hormonal diseases	1
C15 Hemic and Lymphatic Diseases	17
C05 Musculoskeletal Diseases	8
C06 Digestive System Diseases	17
G08 Reproductive and Urinary Physiological Phenomena	2
C09 Otorhinolaryngologic Diseases	1
C13 Female Urogenital Diseases and Pregnancy Complications	4
C11 Eye Diseases	7
C16 Congenital, Hereditary, and Neonatal Diseases and Abnormalities	5
G12 Immune system processes	1
E01 Diagnosis	0
C18 Nutritional and Metabolic Diseases	15
C23 Pathological Conditions, Signs and Symptoms	1
C02 Virus Diseases	2
F04 Psychiatry and Psychology - Behavioral Disciplines and Activities	1
F03 Psychiatry and Psychology - Mental Disorders	3
E01 Diagnosis	3
Including multiple diagnoses	19

Also in this year, we took active part in the activities of the EMA working group; the topic discussed coherently during all meetings was the current situation of CTIS. We were addressing outages and errors of the system, looking for and setting up solutions of situations not covered by Regulation (EU) No 536/2014, arising in the course of the year. We continued to be involved in the provision of comments on and updating EMA's Q&A document on the requirements for submitted documents, with particular focus on clinical trials transferred into the mode governed by Regulation (EU) No 536/2014. We actively participated in meetings of international groups; the Clinical Trials Coordination Group (CTCG) held ten meetings (six online and four face-to-face), the Clinical Trial Expert Group (CTEG) two online meetings, the Clinical Trials Advisory Group (CTAG) eleven meetings (six online and five face-to-face), and the Clinical Trial Information System (CTIS) Forum held four online meetings and there were two online CTIS BI trainings; we also took part in the ACT EU multi-stakeholder platform workshop, a meeting of representatives of sponsors, academia, regulatory authorities, EMA, and the European Commission on work and experience with CTIS. In the course of the year, regular online meetings of drug agency representatives, EMA, and the European Commission on CTIS issues based on submitted specific questions (so called assessors' round table) continued. As part of cooperation with EDQM, nine toxicology assessment reports for the Pharmacopoeia Conformity Certification Unit were prepared.

We have been also involved in the operation of the Committee for Advanced Therapies (CAT), where we attended eleven meetings, of which five were face-to-face and the rest via on-line connection.

In 2023, we continued our involvement in two international projects – EU4Health CT-CURE for accelerated assessment of clinical trials focused upon the treatment of the COVID-19 disease. The other project is the EU4Health SAFE-CT, focusing upon joint assessment of safety data in clinical trials. In this project that focuses particularly on coordinated assessment of active substance safety in clinical trials, we acted as the Safety Assessing Member State (saMS) for 30 active substances.

In 2023, we organised three working meetings with the representatives of the Association of Innovative Pharmaceutical Industry (AIFP), the Association of Clinical Research Organisations (ACRO), the Czech Association of Pharmaceutical Companies (ČAFF), and the Czech Clinical Research Infrastructure Network (CZECRIN), one meeting with the representatives of all stakeholders in the area of clinical trials focused upon home care and its utilisation in clinical trials. We actively participated in two meetings of the Ethics Committee Forum, with a clinical trial news update. We were involved in the organisation and active participation in a discussion forum with experts from the sphere of clinical trials "Meet the expert", which took place in SÚKL.

In 2023, we organised one seminar for sponsors, CROs, monitors, and contact persons on CTIS and experience with work in CTIS; four lectures for academic researchers (University Hospital Hradec Králové, the Institute for Clinical and Experimental Medicine (IKEM), two seminars for young paediatricians); three lectures for university students (Pharmaceutical Faculty Hradec Králové and two for University of Chemistry and Technology Prague); one lecture for a course for pharmacists and one lecture for qualified persons held at the Institute for Postgraduate Medical Education; one lecture for sponsors and CROs and one lecture as part of the Good Clinical Practice course for investigators; one lecture on GMOs prepared for a meeting held at the Ministry of Environment; one lecture for patient organisations; and one lecture for the Clinical Trials National Day. Newly, we organised three workshops for the representatives of multicentric ethics committees with a practical training in CTIS, so as to assist ethics committees with the transition to the new system of handling applications via CTIS. In 2023, we gave 22 consultations to ten pharmaceutical companies and twelve non-commercial entities (the academia, researchers, representatives of healthcare providers), twelve by means of an oral consultation and ten in the form of a written opinion issued upon request. Furthermore, we issued 22 written opinions upon request for project distinction to advise whether a particular project is a clinical trial on a medicinal product or not.

4.5 PHARMACOVIGILANCE

In compliance with the Act on Pharmaceuticals, SÚKL's Pharmacovigilance Department (OFV) operates a system of spontaneous reports of suspected adverse drug reactions (ADR) from the Czech Republic. In 2023, SÚKL received the total of 4,089 reports (the figure may slightly vary with a view to the data cut-off for the Annual Report, as the report duplicity and validity checks continue to be performed on an ongoing basis). This number of received reports is significantly lower than the figures from the previous two years when the huge interest in the safety of COVID-19 vaccines provoked an unprecedented attention given to ADR reporting (13,759 reports in total for 2021, of which 10,631 were reports concerning COVID-19 vaccines; 5,702 reports in total for 2022, of which 2,260 were reports concerning COVID-19 vaccines). Nevertheless, the total number of reports for 2023 is higher than the average from the pre-pandemic years – in 2010-2020, SÚKL was receiving approx. 3,000 reports per year on average. Of the total number of reports received in 2023, 1,614 reports were from medicinal product marketing authorisation holders (pharmaceutical companies) and 2,475 were reports sent to SÚKL directly by healthcare professionals and patients (of which 1,404 were reports from healthcare professionals and 1,071 reports from patients).

Of the total number of 4,089 received reports, 672 concerned vaccines, of which 247 were reports concerning COVID-19 vaccines. In respect of all other medicinal products, 3,417 reports were received. Nonetheless, all of the reports concern merely suspected ADRs, which should serve for the identification of possible new ADRs on the basis of evaluation of a large amount of collected similar reports. To be able to conduct a detailed evaluation, adequate report quality is necessary – i.e., important information about the patient's medical history, concomitant medication, a good clinical description of the reaction, its detailed progress, etc. When the report is received, it is often necessary to contact the reporter to ask for additional missing important data, in particular where a very serious or unexpected ADR is suspected. In 2023, we contacted the reporter 412 times to obtain important additional information concerning the report (so called follow-up), which is more than in the previous years. Each individual spontaneous report delivered to the Institute is processed, individually assessed, entered into the database of adverse drug reactions from the Czech Republic (CDNÚ), and, at the same time, sent to the EudraVigilance pan-European database as well as to the WHO global database. Records in ADR databases are regularly checked and evaluated using statistical as well as qualitative methods for the purposes of new pharmacovigilance signal detection. In addition to thorough continuous assessment of all reported adverse drug reactions from the Czech Republic, pharmacovigilance assessors are responsible for the evaluation of signals regarding 87 active substances on the pan-European level. In 2023, the Pharmacovigilance Assessment Unit assessed 833 monthly ADR reports from the EudraVigilance database regarding substances in respect of which the Czech Republic acts as the pharmacovigilance signal rapporteur for the EU.



4,089
suspected ADR reports

The Pharmacovigilance Assessment Unit keeps enhancing its involvement in international pharmacovigilance procedures. In the area of Periodic Safety Update Reports (PSURs) for individual products, in the course of 2023, the Institute assessed the total of 28 PSUSA procedures (i.e., PSUR single assessment for a particular substance) from the position of so called PSUSA – Lead Member State (LMS). The Institute acts as the PSUSA LMS for the total of 70 substances, for which the respective PSUR reports are submitted in regular intervals of various duration. As the EU PRAC rapporteur (the chief pharmacovigilance assessor) for centrally authorised medicinal products, in the course of 2023, we completed the assessment of three new marketing authorisations of these medicinal products and performed the assessment of 25 more procedures concerning centrally authorised products in total. We have been appointed the PRAC rapporteur for 24 centrally authorised medicinal products in total.

In 2023, we acted as the chief rapporteur in the pseudoephedrine PRAC referral. This referral was conducted in three rounds of assessment and we presented and discussed the conclusions from each of them during PRAC meetings. We also led an expert group meeting which was organised as part of this referral, and held consultations with a group of EU pharmacists and the PRISMA EMA group. The referral was commenced in February 2023 and completed in accordance with our conclusions during the December meeting of PRAC with a recommendation to add information to the product label so as to enhance the safety of pseudoephedrine use.

SÚKL's Pharmacovigilance keep enhancing their involvement in pharmacovigilance activities on the European level on a continuous basis. We actively participated in eleven regular meetings of the PRAC pharmacovigilance committee of the European Medicines Agency (EMA); after the pandemic, these meetings assume alternately a remote form and the form of face-to-face meetings in EMA. Furthermore, ten one-day teleconference meetings of PRAC took place. Our active participation involves not only the role of the lead MS for numerous procedures, but also thorough monitoring and provision of comments on ongoing procedures held by other countries. In the course of 2023, we sent written comments on procedures held by other countries

126 times in total and at meetings, we presented 20 procedures held by us. In addition to regular PRAC meetings, there were two extraordinary meetings organised under the auspices of the state presiding the EU Council (Sweden and Spain in 2023). We also actively participated in these meetings. Furthermore, we are actively involved in the European group of pharmacovigilance inspectors (PhV IWG), an expert group for the EudraVigilance system (EV EWG), and EMA's PhV Business Team. We are an active member of the group for harmonisation of risk management plans (HARP), for which we prepare our own assessments and provide comments on assessments drafted by other members. We are also actively represented in several PRAC working groups – the group for follow-up questionnaires, i.e., questionnaires used to obtain additional important information on reported suspected ADRs; the group focused upon the treatment of pregnant and lactating women with multiple sclerosis; the opiate risk communication group; and the group which prepares the update to EMA Guideline on risk assessment of medicinal products on human reproduction and lactation: from data to labelling.

In cooperation with other organisational units of the Marketing Authorisation Section, conclusions adopted by CHMP and the PRAC pharmacovigilance committee were being transferred to Czech clinical practice on an ongoing basis. In 2023, the Institute published on its website eleven communications intended for healthcare professionals or for the general public on medicinal product safety. In cooperation with marketing authorisation holders, the Institute published educational materials on the safer use of 84 active substances in total and ten letters to healthcare professionals focused upon enhanced safety of medicinal product use. Assessors from the Pharmacovigilance Assessment Unit were involved in the assessment of marketing authorisation dossiers of nationally authorised medicinal products, where they looked at the pharmacovigilance section; in 2023, they prepared 1,797 reports on pharmacovigilance documentation in total.

The Pharmacovigilance Department continues to publish the Adverse Drug Reactions Bulletin (Nežádoucí účinky léčiv). In 2023, we published four issues. The Bulletin provides up-to-date information on suspected adverse drug reactions reported in the Czech Republic in the course of the previous year, other pharmacovigilance news, a regular column “You Reported to Us” which gives specific cases of adverse drug reactions reported from the Czech Republic, as well as quarterly reviews of important pharmacovigilance outputs. In 2023, 45 notifications (of commencement, termination, or update) of post-marketing safety studies conducted in the Czech Republic were processed.

In 2023, the Pharmacovigilance Inspection and Data Support Unit carried out the total of 13 inspections of pharmacovigilance systems of marketing authorisation holders (MAHs). Of the conducted inspections, six were inspections of the complete pharmacovigilance system, where the MAH's PSMF is stored in the Czech Republic (of which one was conducted as an inspection requested by CHMP). Seven inspections were focused upon the pharmacovigilance activities of the MAH's local representation in the Czech Republic. Three of the inspections assumed the form of a videoconference. The inspections revealed critical shortcomings for four MAHs.

The Pharmacovigilance Department communicates with the public, it answers questions from healthcare professionals, the general public as well as pharmaceutical companies. In 2023, we answered 460 questions in writing or by phone. As part of dissemination of information on the safety of pharmaceuticals and also to enhance suspected adverse drug reaction reporting, the employees of the Pharmacovigilance Department gave twelve presentations at professional congresses or seminars for doctors and pharmacists or courses of the Institute for Postgraduate Medical Education (IPVZ) or as part of student education.



SURVEILLANCE SECTION

The Laboratory Control Department carries out analyses of pharmaceuticals required by law (e.g., from random controls of pharmaceuticals on the market or batch release) or requested by other organisational units of the Institute or state administration bodies, and those performed within the scope of international cooperation. The laboratories are integrated into the international General Network of Official Medicines Control Laboratories (OMCL). The laboratories do not conduct analyses upon request for any commercial entities (except for batch release pursuant to the Act on Pharmaceuticals). The Laboratory Control Department is also involved in the publishing of the Czech Pharmacopoeia and the preparation of the European Pharmacopoeia.

The Pharmacy and Distribution Department is in charge of surveillance over compliance with legislative requirements governing wholesale distribution of pharmaceuticals, with focus upon the principles of Good Distribution Practice and the issuance of authorisations for wholesale distribution activities, including the administration of a register of brokers of medicinal products, and, moreover, carries out surveillance over the area of dispensing, sale, and preparation of medicinal products. The inspected entities are wholesale distributors, pharmacies, vendors of selected medicinal products, and specialised workplaces of health-care facilities. Inspections of medicinal product handling are conducted also in any other healthcare facilities. The inspections are performed by individual regional units of the Institute according to their territorial competence.

The Inspection Department is in charge of surveillance activities in the sphere of manufacture of pharmaceuticals, good clinical and laboratory practices, and issuance of binding opinions on the import and export of medicinal products, including cooperation with customs authorities. It also oversees donation, procurement, testing, processing, storing, and distribution of human tissues and cells aimed at safeguarding their quality and safety. This activity includes the issuance of authorisations to engage in the activities of a tissue centre, donation centre or a diagnostic laboratory, the conduct of inspections, monitoring of serious adverse events and reactions or suspected serious adverse events and reactions, and, in cases where doubts arise, issuance of decisions as to whether tissues and cells regulated by the applicable law are concerned.

The Quality Defects Unit is in charge of addressing quality defects of pharmaceuticals and excipients available on the market in the Czech Republic and it safeguards activities aimed at eliminating a potential jeopardy caused by a pharmaceutical or an excipient of inadequate quality, including assessments of the measures proposed/adopted by the regulated entities. Furthermore, it is in charge of issues of counterfeit and stolen medicinal products in the legal distribution network and it addresses also cases of unsuccessful verification of safety features on medicinal products in compliance with effective legislation in order to protect the public from counterfeit medicinal products. This activity also includes assessment of requests submitted as per the provision of Section 11(r) of the Act on Pharmaceuticals.

The exercise of surveillance over compliance with the Act on Advertising Regulation in the sphere of advertising for medicinal products for human use (HMPs) and sponsorship in this area (with the exception of radio and television broadcasting) is safeguarded by the Advertising Regulation Unit. The Unit carries out investigations into complaints pertaining to inappropriate advertising for HMPs and provides expert opinions on advertising materials and on advertising regulation issues. The Unit is, moreover, involved in enforcement in those cases where illegal situation has been identified – i.e., illegal handling of pharmaceuticals, and also in decision-making on whether a specific product is a medicinal product or not.

4.6 LABORATORY CONTROL

Laboratory control is carried out by the Laboratory Control Department both within the scope of requirements set forth by the Act on Pharmaceuticals, i.e., the Department controls the quality of pharmaceuticals in circulation pursuant to predefined projects and releases batches of predefined medicinal products, and on the basis of internally submitted requests (requirements from other organisational units of the Institute). This includes, in particular, addressing of quality defects of medicinal products, analyses of pharmacy samples, suspected counterfeit and illegal pharmaceuticals, adverse drug reactions, etc. Since 1995, the laboratory units of the Laboratory Control Department have been active members of the international OMCL network under the European Directorate for the Quality of Medicines (EDQM). The employees of both laboratory units of the Department attend annual OMCL meetings and are members of working groups.

The Department has an established quality management system compliant with the ČSN EN ISO/IEC 17025 standard. In 2021 and 2022, further verifications of the established quality system by a group of EDQM auditors took place. International recognition of the quality management system is a precondition for participation in international studies of control of centrally

authorised medicinal products organised by EMA/EDQM, recognition of the results of MRP/DCP product analyses, and international recognition of batch release certificates for selected medicinal products (Official Control Authority Batch Release, OCABR) within the EU.

The results of sample analyses that were performed in 2023 by both laboratory units of the Laboratory Control Department are summarised in the tables below.

Tab. 8 Surveillance over the quality of pharmaceuticals on the market by means of laboratory analyses by predefined projects – projects concluded in 2023

Project name	Number of analysed products	Number of analysed samples	Number of compliant samples	Number of non-compliant samples	Number of comments on MA dossier
3/2023 Pharmacy samples	86	221	215	6	0
Individually prepared medicinal products –shelf-life verification	7	14	10	4	2
2/2021 – Medicinal products containing quetiapine fumarate	12	23	23	0	0
5/21 – Medicinal products containing lisinopril and captopril	11	22	22	0	0
6/2021 – Medicinal products containing metamizole	9	18	18	0	1
7/2021 – Medicinal products containing levetiracetam	10	18	18	0	0
8/2021 – Medicinal products containing allopurinol	8	16	16	0	0
BIO/1/2021 Leros herbal teas	18	36	36	0	0
BIO/2/2021 Megafyt herbal teas	26	52	52	0	0
Project BIO/2/2023	25	52	52	0	0
Total	212	472	462	10	3

Projects are prepared on the basis of a “risk-based” analysis. The criteria include, in particular, high consumption of the controlled products, less common pharmaceutical forms or routes of administration, target patient groups, or frequent complaints of patients or medical and pharmaceutical professionals. Proposed projects and reports on completed projects are approved by the SÚKL's Quality Team. In 2024, works on the following projects have been under way: control of medicinal products containing betahistine, aripiprazole, sertraline, nimesulide, celecoxib and meloxicam, budesonide, gabapentin and donepezil, and, moreover, verification of microbiological quality of selected medicinal products. Nadále se kontrolují lékárenské vzorky a Braillovo písmo na obalech léčivých přípravků a probíhá analýza zachycených padělků a nelegálních vzorků, zejména na žádost Policie ČR. Furthermore, pharmaceutical samples and Braille on the labelling of medicinal products continue to be controlled and analyses of identified counterfeit and illegal samples continue to be carried out, particularly upon request of the Czech Police. Analytical control of influenza vaccines and verification of the method of monoclonal antibody analysis by capillary electrophoresis are being planned. In cooperation with the MA Dossier Assessment Department, the project of Masking effect and subsequent development of LER (low endotoxin recovery) effect of bacterial endotoxin in selected medicinal products has been initiated.

Tab. 9 Batch release of predefined medicinal products

Product type	No. of medicinal products	No. of batch reports	Released on the basis of certificate	Released after lab. control	Total number of released batches	Not released	Completed within timeline
Blood derivatives	52	716	712	4	716	0	716
Vaccines	35	348	342	6	348	0	448

Tab. 10 Laboratory control of pharmaceuticals and excipients requested by other organisational units of the Institute, other state administration organisations or EDQM

	Number of samples	Of which compliant	Of which non-compliant
Suspected quality defect of a pharmaceutical	25	23	2
Suspected counterfeit, illegal samples*	136	-	-
International OMCL studies	17	-	-
Internal quality control of purified water	117	115	2
Other analyses**	26	26	0
Total	321	164	4

* Sample compliance cannot be evaluated.

** E.g., requested microbiological controls, other requested analyses, etc.

The tables above indicate that in the Laboratory Control Department, 803 sample analyses were completed. Compared to the last year, the number of samples rated as non-compliant (ex. counterfeit and illegal products) slightly decreased to 1.7 % (2.6 % in 2022; 3.0 % in 2021; 3.2 % in 2020; 4.2 % in 2019; 5.8 % in 2018). Quality defects were confirmed particularly for pharmacy samples. Otherwise, the quality of proprietary medicinal products available on the Czech market has been very good.

To the extent of the statutory task of batch release, all of the reported batches were released onto the market in time, i.e., within timelines stipulated by the law, which, in the last year, concerned also COVID-19 vaccines. Fig. 3 illustrates the number of released batches of blood derivatives and vaccines; for some blood derivatives and vaccines, internationally recognised certificates (OCABR) were issued after laboratory testing.

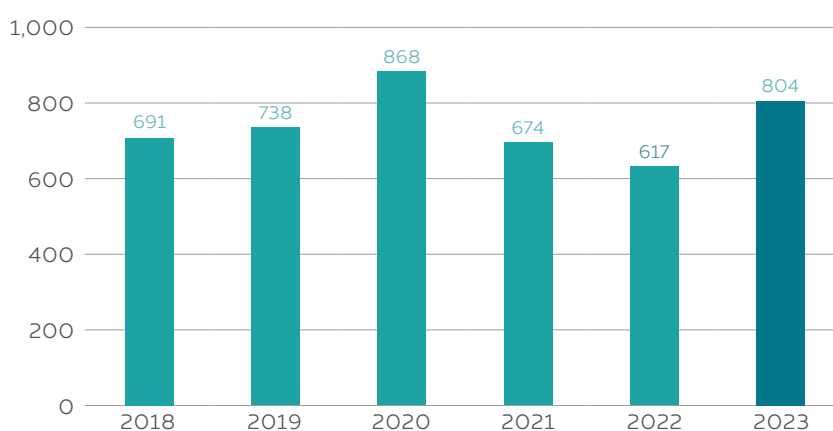
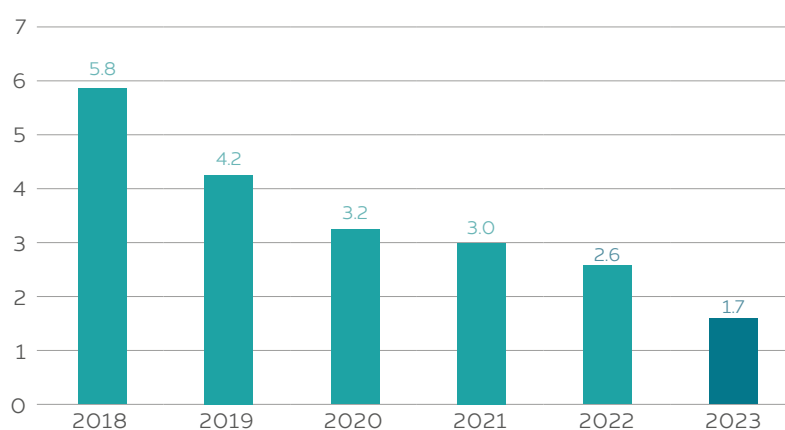
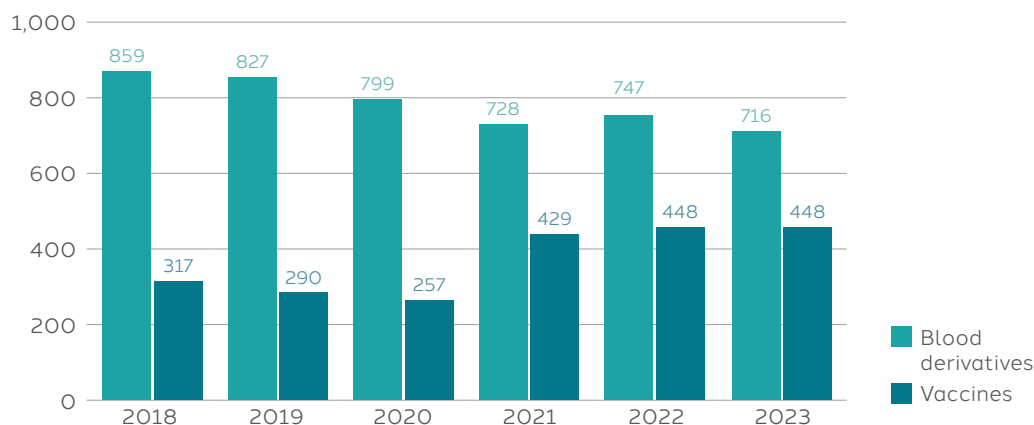
Fig. 1 Number of sample analyses in 2018–2023**Fig. 2 Development in the number of non-compliant samples in 2018–2023 (%)**

Fig. 3 Number of released batches in 2018–2023

INTERNATIONAL COOPERATION IN THE SPHERE OF LABORATORY CONTROL

The Department has been involved in joint studies on the control of the quality of marketed pharmaceuticals (this concerns, in particular, analyses of medicinal products authorised via the MRP or DCP), laboratory proficiency testing for the conduct of various analytical methods, and verification of the quality of reference substances for the European Pharmacopoeia. As part of international cooperation, SÚKL laboratories are contract laboratories for the Slovak State Institute for Drug Control (ŠÚKL), namely in the area of microbiological and sterility tests.

In 2023, the Laboratory Control Department participated in collaborative international studies listed in Table 11.

Tab. 11 Participation in international studies

Study	Study name	Rating
PTS 233	Bacterial Endotoxins	Corrective action
PTS 236	Potentiometric Titration	good
PTS 237	Dissolution	good
PTS 238	Liquid Chromatography	good
PTS 243	Seasonal Inactivated Influenza Vaccine Potency	good
CRS	Cefapirin Sodium	good
SUP 012	Suspected Unknown Product	good

Legend to abbreviations:

PTS – Proficiency Testing Study organised by EDQM. Quality control of the work of the laboratory; EDQM provides the samples, reference substances, and method. Once the results are sent back to EDQM, they are statistically processed and the laboratory obtains the rating of the study.

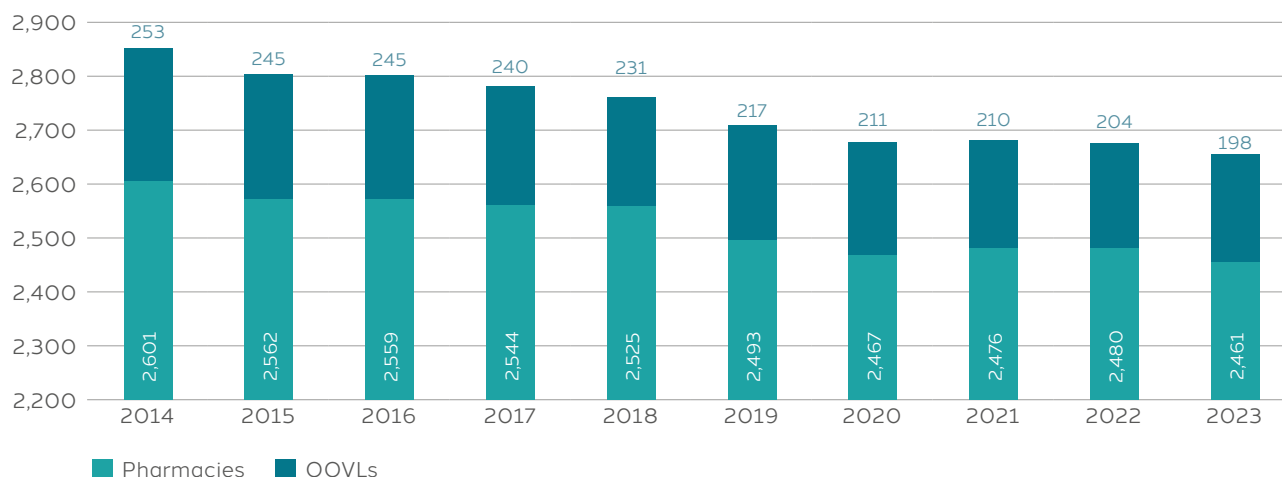
CRS – Verification of the quality of the reference substance for EDQM (Chemical Reference Substance).

SUP – A comparative study to verify the laboratory's ability to analyse Suspected Unknown Products.

4.7 SURVEILLANCE IN THE AREA OF PREPARATION, DISPENSING, SALE, AND DISTRIBUTION OF PHARMACEUTICALS

Surveillance in the area of medicinal product handling is one of the principal activities of the Pharmacy and Distribution Department. The control activities are conducted by the Institute in pharmacies, at vendors of selected medicinal products for human use, in healthcare facilities (including their specialised departments), and wholesale distributors and brokers of medicinal products. Furthermore, the Pharmacy and Distribution Department is in charge of the performance of price inspections of medicinal products and foods for special medical purposes, inspections of the conditions of dispensing of prescription-only medicinal products in compliance with the Act on Public Health Insurance, and inspections of handling of dependency-producing substances and precursors, including products containing the aforementioned, in pharmacies. The Pharmacy and Distribution Department also keeps and regularly updates publicly accessible lists of the aforementioned regulated entities with the exception of healthcare facilities.

By the end of 2023, the Institute kept a record on 2,461 pharmacies in total, of which four were within the scope of powers of the Ministry of Defence of the Czech Republic; moreover, the Institute kept a record on 198 detached pharmaceutical and medical device dispensing units (hereinafter referred to as “OOVL”), 3,495 outlets of vendors of selected medicinal products for human use, 41 nuclear medicine departments in healthcare facilities, 385 wholesale distributors, and 48 brokers of medicinal products for human use. Compared to 2022, the total number of pharmacies decreased by 19 entities and the number of OOVLs decreased by six units (Fig. 4).

Fig. 4 Number of pharmacies and OOVs in the last 10 years (as at 31 December 2023)

In 2023, the inspectors of the Pharmacy and Distribution Department conducted the total of 675 inspections in pharmacies, of which 32 were hospital pharmacies of inpatient care providers. Of the total number of completed inspections, 22 were targeted inspections, which were conducted on the basis of reports or complaints.

Separate inspections of handling of dependency-producing substances and precursors were conducted in 372 pharmacies.

Price control focused upon compliance with the Act on Prices and rules of price regulation was conducted in 101 pharmacies and ten wholesale distributors.

On the basis of facts identified during the conducted inspections, the total of 59 final decisions on imposition of a fine for breach of obligations stipulated by the **Act on Pharmaceuticals** in the total amount of 22,090,000 CZK, incl. aggregate fines (see below) and finalised administrative procedures based on inspections performed in the previous period, and three admonitions were adopted in respect of pharmacy operators. Twelve fines with final effect in the total amount of 1,750,000 CZK were imposed for failure to cooperate during the inspection. In eight **cases**, the preparation of medicinal products was suspended for a pharmacy due to unverified weights used during the preparation of the medicinal products.

The main reasons for the issuance of a decision imposing an administrative penalty included very serious shortcomings in the proper record-keeping and archival of the medicinal products received, stocked, and dispensed; dispensing of medicinal products with a quality defect for which they should have been recalled; dispensing of medicinal products without medical prescription or on invalid prescriptions; and failure to comply with the principles of Good Pharmaceutical Practice in the preparation of medicinal products, particularly the use of expired active substances and excipients or active substances and excipients without quality documentation or preparation using non-verified weights.

Within the scope of inspections focused on the **handling of dependency-producing substances** in pharmacies, in 2023, identification of major breaches of the Act on Dependency-Producing Substances resulted in the total of seven final decisions on fine imposition upon pharmacy operators, of which the fines only for offences referred to under this Act amounted to the total of 145,000 CZK. In other cases, pharmacy operators committed offences referred to also under the Act on Pharmaceuticals, and for this reason, an aggregate fine was imposed thereupon.

In the case of **control of handling precursors**, no final decision on fine imposition pursuant to the Act on Precursors was issued in 2023.

The main reasons for the issuance of a decision on fine imposition included serious and recurring breaches of the Act on Dependency-Producing Substances in terms of record-keeping and documentation of dependency-producing substances and shortcomings in reporting the stock and movement of dependency-producing substances and products or failure to submit the report within the predefined timeline.

Completed inspections focusing upon compliance with **price regulation** rules governing medicinal products in pharmacies identified 29 cases of a price regulation breach. In 2023, the total of eleven decisions on administrative penalty imposition became final, of which three cases involved fines amounting to 33,000 CZK in total and the other eight cases were admonitions imposed for price offences concerning failure to comply with the binding procedure for the determination of the sale price of individually prepared medicinal products and proprietary medicinal products treated prior to dispensing; failure to keep or store evidentiary price records; failure to observe officially fixed maximum prices during sale; and failure to observe the conditions and procedures for their application. In one case, the inspected person failed to provide necessary cooperation during the inspection and a fine in the amount of 100,000 CZK was imposed thereupon with final effect pursuant to the Code of Control Procedure.

As part of regular inspection activities of the Institute, two breaches of the ban on the offering and provision of advantages in the dispensing of prescription-only medicinal products reimbursed from the public health insurance was identified in 2023. Two decisions on administrative penalty imposition became final – one admonition and one fine for a breach of the Act on Pharmaceuticals and Act on Public Health Insurance identified in the previous period; the fine amounted to 95,000 CZK (aggregate fine).

Furthermore, in 2023, 249 inspections concerning the **handling of medicinal products in healthcare facilities** were conducted. The inspections took place in 17 inpatient departments of healthcare service providers and in 232 separate outpatient offices of general practitioners and medical specialists and in other healthcare facilities. On the basis of reports received by the Institute in respect of the operation of healthcare facilities where health care is provided, 18 targeted inspections in total were carried out.

In 2023, the total of three final decisions on fine imposition in the total amount of 170,000 CZK were issued for the identified breaches of the Act on Pharmaceuticals (this includes also finalised administrative procedures based on inspections conducted in the previous period).

The main reasons for the issuance of the decision on administrative penalty imposition included shortcomings associated with recalls of medicinal products due to their quality defects; handling of medicinal products contrary to the summary of the product characteristics; serious or multiple breaches of obligations governing the handling of medicinal products set forth by implementing legal regulations.

In 2023, inspections of **vendors of selected medicinal products** involved 108 outlets in total. For breach of the obligations implied by the Act on Pharmaceuticals, 15 final decisions on fine imposition in the total amount of 163,000 CZK and one admonition were issued.

In other healthcare facilities authorised to prepare medicinal products (Nuclear Medicine Departments [ONM] and workplaces preparing autogenous vaccines for human use [HAV]), 15 inspections in total were conducted. For identified breaches of the obligations implied by the Act on Pharmaceuticals, one fine with final effect in the amount of 10,000 CZK and one admonition were imposed.

Summary results from inspections completed in 2023 are provided in Table 12.

Tab. 12 Inspection surveillance over pharmacies, nuclear medicine departments, healthcare facilities, and vendors of selected medicinal products in 2023

Inspected entity	Inspection type	Number	Classification of defects						Penalties		
			1	%	2	%	3	%	A	B	C
Pharmacies	Regular inspections	675	445	65,9	132	19,6	98	14,5	8	–	76
	Price controls	101	Not rated by classification of defects						–	–	12
	Inspections of dependency-producing substances and precursors	372	315	84,7	50	13,4	7	1,9	–	–	7
ONMs		12	9	75,0	3	25,0	–	–	–	–	1
HAVs		3	2	66,7	1	33,3	–	–	–	–	1
Healthcare facilities		249	191	76,7	45	18,1	13	5,2	–	–	3
Vendors of selected medicinal products		108	77	71,3	17	15,7	14	13,0	–	–	16

Classification of defects

- 1 – None or minor defects identified
 2 – Major or recurring defects
 3 – Critical defect or serious breach of law

Penalties

- A – Suspended preparation
 B – Suspended operation
 C – Administrative penalty imposed (final decision)

In 2023, inspectors from the Pharmacy and Distribution Department took a total of 218 samples of medicinal products during inspections in pharmacies, of which 60 were samples of pharmaceutical products intended for the preparation of magistral formulas in the pharmacy. Out of 158 pharmacy samples (medicinal products prepared in pharmacies), four were out-of-specification: all of the cases concerned an out-of-specification content of the active substance. In four samples intended for dispensing, defects in their labelling were identified.

Other activities of the Pharmacy and Distribution Department include issuance of binding opinions on the technical and material equipment of pharmacies for the purposes of gaining authorisation for the provision of healthcare services. In 2023, the total of 237 requests for issuance of an opinion were received from pharmacy operators and 228 favourable binding opinions were issued.

In 111 cases, the issuance of the binding opinion was associated with an inspection in the pharmacy (on-the-spot check of technical and material equipment) and in eight cases, with an inspection of the OOVL (Table 13 refers). Furthermore, in this context, 128 consultations on the instrumentation of existing pharmacies or the construction of new pharmacies, and 498 consultations concerning the obligations of inspected entities implied by the Act on Pharmaceuticals, Act on Dependency-Producing Substances and on Precursors, their implementing regulations, and SÚKL guidelines took place. Table 13 also provides data on newly established and defunct pharmacies/OOVLs.

Tab. 13 Other activities of the Pharmacy and Distribution Department

Initial pharmacy inspection	Establishment of a new pharmacy/ OOVL	Defunct pharmacies/OOVLs
111	65/6	84/12
Initial OOVL inspection	Consultations on material and technical equipment	Other consultations
8	128	498

DISTRIBUTION OF MEDICINAL PRODUCTS

In 2023, the number of distributors exhibited a year-to-year decrease by two entities to the total of 385 medicinal product distribution authorisation holders. Of the total number of authorised distributors, 87 entities are both a distribution authorisation holder and a pharmacy operator.

In 2023, 21 new distribution authorisations and 91 decisions on variations to distribution authorisations were issued, and 17 authorisations were revoked upon request of their holders. For one entity, the distribution authorisation expired pursuant to Section 76(4) of the Act on Pharmaceuticals and in five cases, the authorisation was revoked by the decision of the Institute pursuant to Section 76(3) of the Act on Pharmaceuticals.

In 2023, the total of 19 entities applied for entry into, variation to entry in, or deletion from the Registry of Brokers of Human Medicinal Products; as of 31 December 2023, the Registry included 48 brokers in total.

Table 14 provides an overview of received applications and issued decisions concerning distribution authorisations, variations thereto or revocation thereof, and the registration of brokers of medicinal products.

Tab. 14 Distribution and brokerage of pharmaceuticals in 2023

	Received applications	Decisions issued/Registry entries made
Application for distribution authorisation	21	21
Application for variation to distribution authorisation	93	91
Application for revocation of distribution authorisation	16	17
Application for entry in the Registry /variation to entry in the Registry/deletion from the Registry	19	19

Note: The table does not include the numbers of pending applications from the previous period.

In 2023, the total of 259 inspections of distributors and 17 inspections of brokers were conducted, of which 13 were targeted inspections carried out on the basis of internal and external reports. In total, twelve reports on the operation of distributors were received, in respect of which three serious shortcomings in the observance of Good Distribution Practice (GDP) were identified.

The top priorities of the surveillance activities included a complex control of the medicinal product distribution chain and associated compliance with GDP principles, of the quality assurance system and analysis of risks associated with the distribution activities, conditions of storage and transport of medicinal products, including control of records kept on the distribution activities carried out as well as controls of proper and complete provision of data on the volume of distributed medicinal products, control of compliance with the distributor's obligation to notify in advance of their intention to export a medicinal product placed on the list of the Ministry of Health of the Czech Republic abroad and of observation of the ban on distribution and export, and, moreover, control of compliance with the distributor's obligations associated with the verification and checks of safety features in respect of those medicinal products that bear such features.

Of the total number of 217 rated inspections of distributors (follow-up and targeted inspections), 78.8 % were rated with grade 1 (good), 16.1 % with grade 2 (satisfactory), and 5.1 % with grade 3 (not satisfactory). On the basis of identified facts, in 27 cases in total it was proposed to initiate an administrative procedure regarding fine imposition for major breaches of obligations implied by the Act on Pharmaceuticals and its implementing regulations and related GDP guidance.

Following the completed inspections, the total of 188 post-inspection Good Distribution Practice Certificates were issued, of which eight Certificates were of limited validity or scope (three with validity limited to two years; five with restricted storage scope). Just like distribution authorisations and variations thereto, all of the issued Certificates have been regularly entered into the EudraGMDP European Database.

The Good Distribution Practice Unit, with the authorisation of the Strasbourg EDQM inspectorate and the Institute's Laboratory Control Department, performed sampling of authorised medicinal products in the distribution chain for the purposes of laboratory control of the product quality.

Within the scope of consultation activities, the Unit gave the total of 52 consultations concerning the application of Good Distribution Practice principles and, on an ongoing basis, has been providing opinions and source materials upon request from other bodies and organisations, including those from abroad (the Czech Ministry of Health, revenue authorities, courts of justice, the Czech Police, the National Antidrug Centre (NPC), EMA).

In 2023, ten price controls of distributors focused upon control of compliance with the Act on Prices and with effective Pricing Regulations issued by the Ministry of Health for the regulation of prices of medicinal products and foods for special medical purposes took place. A breach of pricing regulations was identified in six cases and these consisted of failure to comply with the procedure set forth by material conditions, rules or procedures governing the determination of official prices, changes thereto, and the method of their negotiation and application as required by the pricing authority pursuant to Section 5(5) of the Act on Prices. In 2023, two fines in the total amount of 205,000 CZK were imposed with final effect upon distributors for committed pricing offences.

In 2023, on the basis of facts identified during the completed inspections, distributors were imposed one admonition and the total of 16 final decisions on fines for breaches of obligations set forth by the Act on Pharmaceuticals and its implementing regulations amounting to 5,855,000 CZK in total (incl. also finalised administrative procedures based on inspections conducted in the previous period). Three final decisions on imposition of a fine in the amount of 250,000 CZK were issued for failure to cooperate during the inspection.

In addition to failure to comply with GDP rules, the main reasons for the proposed fine imposition included distribution of medicinal products outside the territory of the Czech Republic contrary to a measure issued by the Ministry of Health of the Czech Republic; failure to notify of the intention to distribute a medicinal product placed on the list of the Ministry of Health of the Czech Republic abroad; as well as failure to file an application for variation to the distribution authorisation in case of changes concerning the distributor; and failure to verify safety features of medicinal product labelling along with failure to comply with the obligation to notify the Institute of suspected counterfeit medicinal products.



78.8 %
of inspections at
distributors' rated by grade
1 (Good)

In seven cases, the distribution authorisation was suspended and declaration of non-conformity with GDP rules was issued due to serious breaches of the obligations implied by the Act on Pharmaceuticals and conditions of Good Distribution Practice; these were entered in the EudraGMDP database.

The results of inspections at distributors' in 2023 are shown in Table 15.

Tab. 15 Inspection surveillance over distributors

Total	Number of inspections				Inspection rating			Measures	
	Initial	Follow-up	Targeted	Variation	1	2	3	NCR	Proposed fine
259	20	204	13	22	171	35	11	7	27

Inspection Rating

Inspections are rated on the basis of the identified shortcomings and their severity, and according to the achieved point score, the overall level of compliance with the principles of Good Distribution Practice is expressed by the following rating:

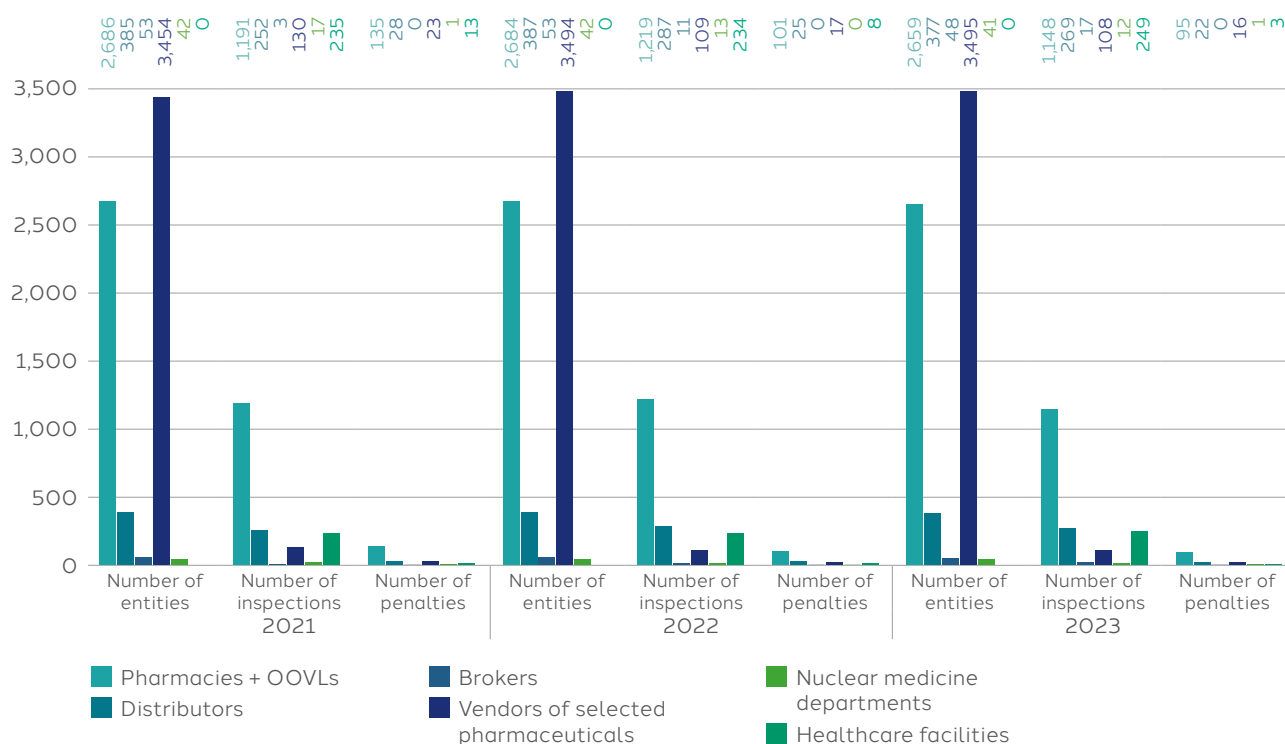
1 – Good;

2 – Satisfactory;

3 – Not satisfactory.

A comparison of the number of regulated entities, conducted inspections, and imposed penalties for the last four years is illustrated by Fig. 5.

Fig. 5 Information on surveillance activities in 2021–2023



4.8 SURVEILLANCE IN THE AREA OF MANUFACTURE OF PHARMACEUTICALS, HUMAN TISSUES AND CELLS, GOOD LABORATORY AND CLINICAL PRACTICE

The Inspection Department safeguards surveillance activities in the sphere of manufacture of pharmaceuticals (including the manufacture of transfusion products and starting materials for further manufacture of pharmaceuticals – hereinafter referred to as “TP”), Good Clinical Practice and Good Laboratory Practice, issuance of binding opinions on the import of active substances, including cooperation with the customs authorities. The Department also conducts surveillance over the donation, procurement, examination, processing, storage, and distribution of human tissues and cells (hereinafter referred to as “HTC”) aimed at the assurance of their quality and safety. This activity involves also the issuance of authorisations to engage in the operation of a tissue centre, donation centre, HTC distributor or diagnostic laboratory, the conduct of inspections, monitoring of actual or suspected serious adverse events and reactions, and, where doubts arise, decision-making as to whether tissues and cells subjected to regulation by a particular act are concerned. Furthermore, it provides for activities in the sphere of haemovigilance, monitoring of serious adverse reactions experienced by transfusion product donors or recipients, and serious adverse events associated with blood donation, examination, processing, storage, and distribution of transfusion products or starting materials for further production or with transfusion product dispensing. The Department also receives and assesses reports from the European rapid alert systems for blood (hereinafter referred to as “RAB”) and for HTC (hereinafter referred to as “RATC”).

MANUFACTURE OF PHARMACEUTICALS

The updated lists of supervised operators in the sphere of manufacture of pharmaceuticals are available from [the Institute's website](#).

In the area of manufacturers (incl. blood centres), the total of 93 applications for manufacturing authorisation or variations thereto were received (Table 16 refers). The number of cases brought forward from one year to another corresponds to the timelines governing the application processing.

HUMAN TISSUES AND CELLS

This is an area regulated by the Institute pursuant to Act No 296/2008 Coll., on Human Tissues and Cells.

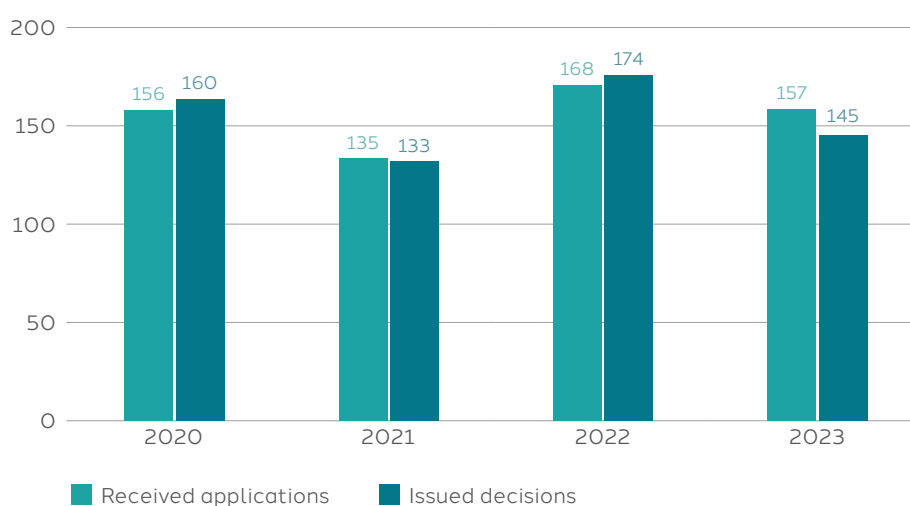
In 2023, 57 applications for authorisation to engage in an operation and applications for variations thereto were received.

Tab. 16 Activities associated with applications in the sphere of manufacture of pharmaceuticals and in the sphere of human tissues and cells

Application type		2020		2021		2022		2023	
		Received applications	Issued decisions	Received applications	Issued decisions	Received applications	Issued decisions	Received applications	Issued decisions
Application for manufacturing authorisation	Manufacturers of medicinal products	4	4	1	0	3	2	2	2
	Control laboratories	0	0	1	1	1	1	3	2
	Blood centres	1	1	3	3	3	3	2	2
Application for variation to manufacturing authorisation	Manufacturers of medicinal products	53	52	53	53	52	55	43	43
	Control laboratories	5	5	2	2	6	6	10	9
	Blood centres	49	47	39	43	47	46	33	32
Application for manufacturing authorisation revocation	Manufacturers of medicinal products	6	6	2	2	3	3	3	3
	Control laboratories	0	0	1	1	0	0	3	2
	Blood centres	0	0	0	0	1	1	0	0
Application for operating authorisation for:	Tissue centre	1	3	0	1	2	2	1	1
	Distribution of tissues and cells	1	1	0	0	0	0	2	0
	Donation centre	0	0	0	0	0	0	0	0
	Diagnostic laboratory	0	1	1	1	1	1	0	0

Application type		2020		2021		2022		2023	
		Received applications	Issued decisions	Received applications	Issued decisions	Received applications	Issued decisions	Received applications	Issued decisions
Application for variation to operation of:	Tissue centre	27	32	29	24	41	46	47	42
	Distribution of tissues and cells	0	0	0	0	0	0	0	0
	Donation centre	0	0	0	0	2	2	1	1
	Diagnostic laboratory	7	7	2	2	4	4	6	5
Application for revocation of operation of:	Tissue centre	1	1	0	0	0	0	1	1
	Distribution of tissues and cells	0	0	0	0	1	1	0	0
	Donation centre	1	1	0	0	0	0	0	0
	Diagnostic laboratory	0	0	0	0	1	1	0	0
Total		156	160	135	133	168	174	157	145

Fig. 6 Numbers of received and decided applications



In 2023, the total of 284 inspections were carried out, of which 55 inspections concerned the regulated area of tissues and cells. Their nature and resulting ratings are provided in Table 17. A comparison of the number of inspections and breaches of the Act on Pharmaceuticals, or of the Act on Human Tissues and Cells, where applicable, in the period of 2020-2023 is provided in Table 18 and in Fig. 7 and 8.

Initial inspections were conducted in association with an application for operating authorisation as referred to under Section 63(4) of Act No. 378/2007 Coll. Follow-up inspections were carried out at sites of manufacturers of medicinal products and active substances or in control laboratories within intervals set forth by Decree No. 229/2008 Coll. and, in case of blood centres, pursuant to Decree No. 143/2008 Coll., or in abbreviated intervals on the basis of the previous inspection rating which, in addition to the evaluation of the standard of Good Manufacturing Practice (GMP) proper, covers also manufacture risk assessment and rating of other criteria. Inspections associated with variations are performed where the conditions under which the operation was authorised have changed. Targeted inspections are conducted in order to review a certain section of activities (e.g., an inspection associated with a quality defect of a medicinal product).

Of the total number of 109 inspections at manufacturers' of medicinal products and active substances or in control laboratories, no breach of law was identified. The GMP standard in blood centres was rated mostly as good and no breach of law was identified. The plan of follow-up inspections was fulfilled in respect of all regulated entities.

Inspections in tissue centres, donation centres and in diagnostic laboratories are carried out in compliance with Decree No. 422/2008 Coll., on detailed requirements for the safeguarding of the quality and safety of human tissues and cells intended for use in humans.

Tab. 17 Inspections conducted in 2023 and their outcomes

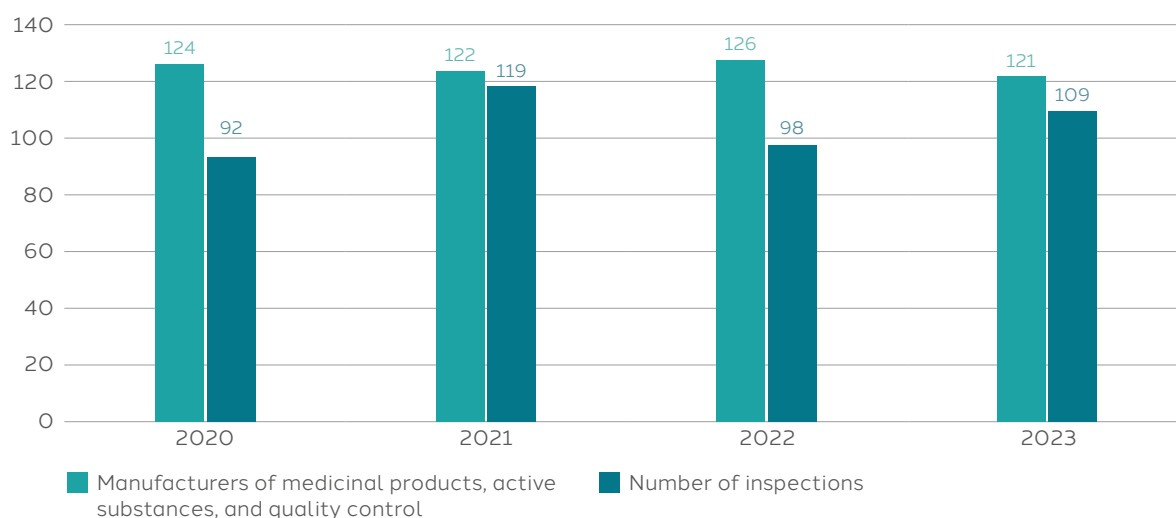
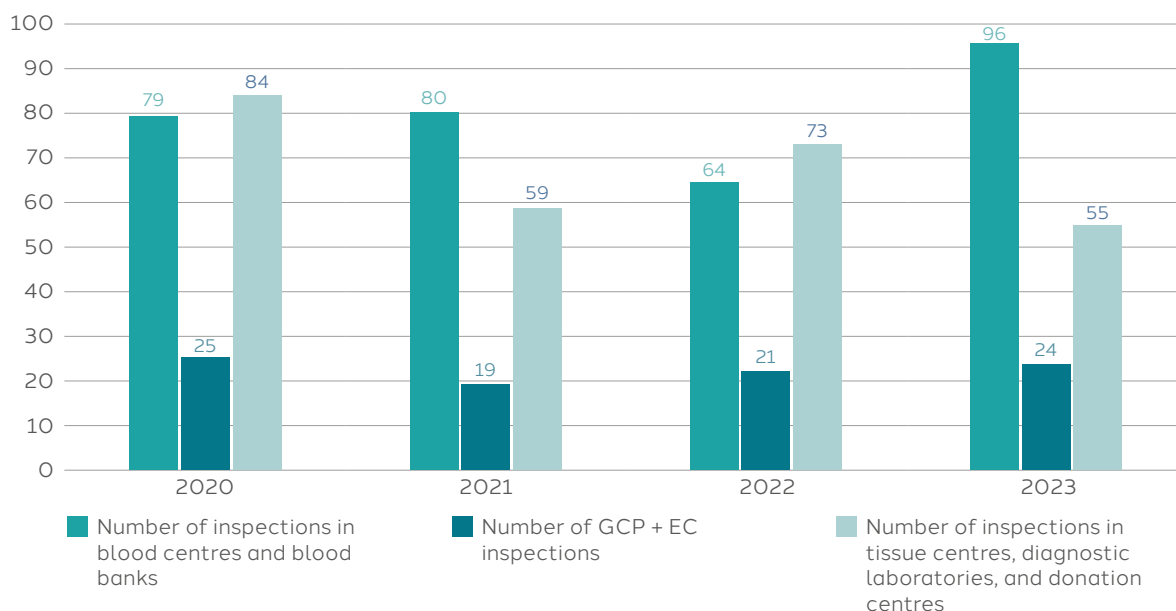
	Number of inspections					Inspection rating			
	Total	Initial	Follow-up	Targeted	Variation	Compliant ¹	Non-compliant	Breach of law	Proposed fine
Manufacturers of medicinal products	36	1	31	0	4	32	0	0	0
Manufacturers of investigational medicinal products	18	2	14	0	2	16	0	0	0
Manufacturers of active substances	29	6	15	1	7	21	0	0	0
Control laboratories	17	3	11	0	3	14	0	0	0
Control laboratories for investigational medicinal products	6	0	6	0	0	6	0	0	0
Active substance importers	3	2	1	0	0	3	0	0	0
Blood centres	74	3	66	2	3	69	0	0	0
Blood banks	22	0	22	0	0	22	0	0	0
GCP inspections	24	0	0	24	0	0	0	0	0
TC, DC, DL, DIS inspections	55	3	45	5	2	48	0	0	0

Explanatory notes: TC – tissue centre; DC – donation centre; DL – diagnostic laboratory; DIS – distributor of tissues and cells

¹ Rated only in case of initial and follow-up inspections.

Tab. 18 Inspections conducted in 2020–2023

	2020		2021		2022		2023	
	No. of inspections	Breaches of law	No. of inspections	Breaches of law	No. of inspections	Breaches of law	No. of inspections	Breaches of law
Manufacturers of medicinal products	56	1	67	4	62	0	54	0
Manufacturers of active substances	22	0	33	1	17	0	29	0
Control laboratories	10	0	19	0	14	0	23	0
Active substance importers	4	0	4	0	5	0	3	0
Blood centres	62	0	77	0	52	0	74	0
Blood banks	2	0	3	0	12	0	22	0
GCP inspections	21	0	19	0	21	1	24	2
Tissue centres, donation centres, diagnostic laboratories	53	0	59	0	73	0	55	0
Total	230	0	281	1	256	1	284	0

Fig. 7 Number of manufacturers of medicinal products and active substances, number of control laboratories and an overview of conducted inspections**Fig. 8 Overview of conducted inspections in the area of blood centres + blood banks, GCP and HTC (tissue centres, diagnostic laboratories, donation centres) in the period of 2020–2023**

HAEMOVIGILANCE

In 2023, 55 reports of suspected serious adverse reactions (hereinafter referred to as “SAR”) experienced by donors of blood and blood components or recipients of transfusion products were received, of which three reports are still pending and in 20 cases, the suspected SAR was not confirmed. Thirty-six SARs involved blood or blood component donors (two investigations are still pending) and 19 SARs concerned post-transfusion reactions in transfusion product recipients (one investigation is still pending) – the investigations concern nine cases of anaphylaxis; two cases of transfusion-associated circulatory overload (TACO); two cases of haemolytic reactions arising from ABO system incompatibility; two cases of immune haemolytic reactions caused by another alloantibody (one investigation is still pending); one case of febrile non-haemolytic reaction; two cases of suspected HBV transmission by transfusion; and one circulatory arrest in the transfusion product recipient. Of the concluded suspected SARs affecting transfusion product recipients, one SAR was concluded as causing serious consequences for the transfusion product recipient, two cases resulted in death unrelated to the transfusion, other SARs completely resolved. Out of 36 suspected SARs in donors of blood or blood components, 19 were not confirmed, two investigations are still pending, and for all of the 15 confirmed and concluded SARs affecting donors, donor recovery was confirmed.

Furthermore, 34 reports of suspected serious adverse events (SAE) associated with blood donation, testing, processing, storage, and distribution of transfusion products or raw materials for further manufacture, or transfusion product dispensing were reported; 16 cases concerned reports associated with parvovirus B19 infection, three cases were reports associated with donor positivity for syphilis; four cases were reports associated with donor HBV infection, three cases were reports associated with donor HCV infection, three cases concerned a human error (two transfusion product confusions during dispensing, one sample

confusion), and one case concerned transfusion product haemolysis. In eight cases, the SAE was not confirmed.

Each report, which the Institute received, was processed, evaluated, and entered in the database of SARs and SAEs and, concurrently, processed to be incorporated in the Annual SAE and SAR Report for the Czech Republic intended for the European Commission.

Within the scope of its involvement in the European Rapid Alert System for Blood (RAB), in 2023, the Institute received the total of seven reports from four countries. All of the cases concerned an epidemiological situation (five were associated with the occurrence of the West Nile virus fever, two were associated with the occurrence of the dengue fever).

GOOD LABORATORY PRACTICE (GLP)

In 2023, a total of twelve holders of Good Laboratory Practice Certificates issued by the Institute were listed, with prevailing scope of activities in toxicological studies; these are included in the National GLP Programme. In the same year, seven follow-up inspections were conducted.

GOOD CLINICAL PRACTICE (GCP)

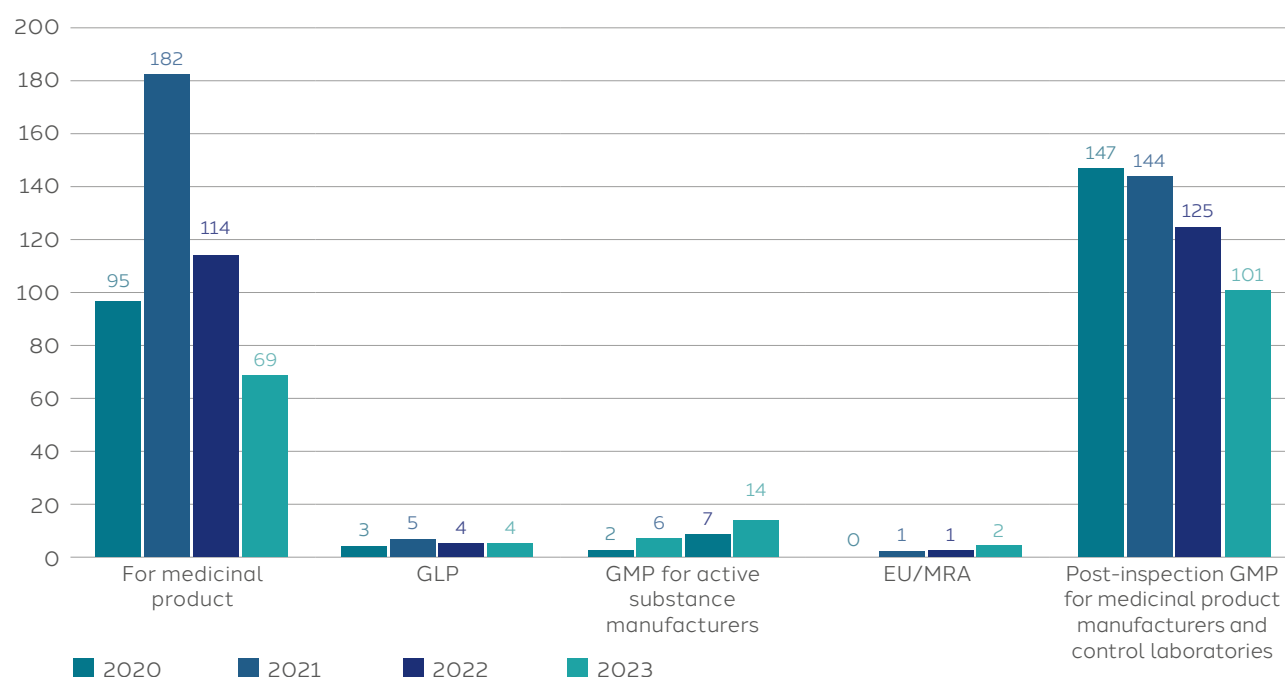
In the course of 2023, the total of 24 Good Clinical Practice inspections were conducted. Of the said number, 16 concerned a targeted inspection of a clinical trial site (a GCP inspection at the investigator's site), one was an inspection of compliance with the obligations of the sponsor taken over by the Contract Research Organisation (CRO), five were inspections on the basis of an application for the issue of a Good Clinical Practice Certificate carried out at a healthcare service provider where a first-in-human (FIH) clinical trial is conducted, two were inspections on the basis of an application for the issue of a Good Clinical Practice Certificate carried out at a healthcare service provider where a clinical trial without therapeutic or preventive effect for trial subjects is conducted, namely bioequivalence and pharmacokinetic clinical trials. In two cases, potential breach of legislation was identified.

CERTIFICATION

In total, 190 various certificates were issued. Post-inspection Good Manufacturing Practice Certificates are entered in the EudraGMPD database kept by EMA. All of the certificates for medicinal products were issued within the prescribed 30-day timeline and all post-inspection Good Manufacturing Practice Certificates within the 90-day timeline.

24
conducted Good Clinical
Practice inspections

Fig. 9 Issued certificates



ASSESSMENT OF GMP COMPLIANCE WITHIN THE SCOPE OF MARKETING AUTHORISATION ACTIVITIES

The total of 1,355 cases were received; all of them were processed within predefined timelines.

FOREIGN INSPECTIONS

In 2023, five Good Manufacturing Practice inspections at foreign entities were carried out.

Tab. 19 Foreign GMP inspections

	2020	2020	2022	2023
Number of inspections	2	3	6	5
Certificate issuance	1	3	6	5
Issued non-compliance	0	0	0	0

MEDICAL CANNABIS

As of 01 January 2022, the amended Act on Dependency-Producing Substances has been effective; it stipulates new provisions on the licencing of medical cannabis growing. In the Institute, it is the GMP Unit of the Inspection Department who are in charge of this agenda. In 2023, the Institute granted five licenses for medical cannabis growing.

In 2023, five inspections at medical cannabis growers were conducted in total; these inspections did not reveal any breach of law.

The Inspection Department was also in charge of ensuring compliance with the Institute's information and notification obligations in respect of the Czech Police and the Ministry of Health of the Czech Republic, as required by Act No 167/1998 Coll., on Dependency-Producing Substances. Current information on legislative amendments and monthly statistics of medical cannabis dispensing in the Czech Republic were regularly published on the www.sakl.cz website.

Tab. 20 Cannabis dispensing in individual months of 2023

	January	February	March	April	May	June
No. of issued e-prescriptions	2 931	2 608	3 007	2 688	3 223	443
No- of patients prescribed medical cannabis (unique)	2 465	2 271	2 540	2 265	2 632	2 828
Dispensed medical cannabis amounts (g)	17 712,13	16 275,75	17 590,83	14 948,22	18 086,52	18 885,52

	July	August	September	October	November	December
No. of issued e-prescriptions	2 635	3 126	2 955	3 506	3 450	2 944
No- of patients prescribed medical cannabis (unique)	2 223	2 617	2 515	2 953	2 957	2 576
Dispensed medical cannabis amounts (g)	15 212,51	18 358,21	16 275,86	20 487,46	19 546,42	16 482,41

4.9 QUALITY DEFECTS OF PHARMACEUTICALS AND COUNTERFEIT PRODUCTS IN THE LEGAL DISTRIBUTION CHAIN

Since 2015, the number of reports in the area of quality defects of pharmaceuticals has been increasing (Table 21 refers). A substantial increase in the number of received reports was seen in 2022; this included both reports received from the Czech Republic and from foreign countries (Fig. 10 refers). This trend continued also in 2023. The reason is, inter alia, the increased field awareness about the importance of reporting quality defects and the possibility to avail of electronic forms that make reporting easier. The growing number of reports from abroad is due to a higher involvement of non-European regulatory authorities in the information system via which quality defect reports are being received.

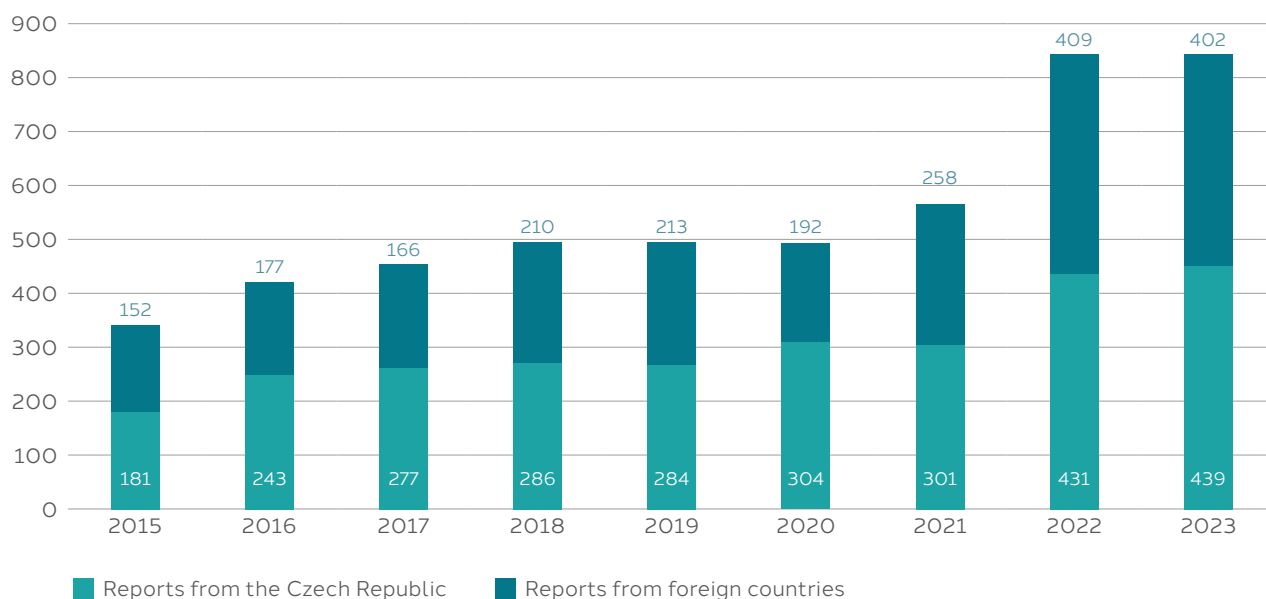
Tab. 21 Number of reports received in 2023

Quality defects	2015	2016	2017	2018	2019	2020	2021	2022	2023
Reports received in total	333	420	443	496	497	496	559	840	841
Reports from the Czech Republic	181	243	277	286	284	304	301	431	439
Reports from abroad	152	177	166	210	213	192	258	409	402
Resulted in recall (in SÚKL codes)	79	72	79	89	59	47	54	38	37
Administrative procedure (since 04/2017)	–	–	20	33	81	55	80	99	80
Rapid Alert	11	17	22	6	15	1	8	10	7

Explanatory notes: Rapid alert = a rapid alert notification sent by the Institute within the scope of the international Rapid Alert system.

As part of addressing quality defects, effective actions have been taken to reduce the impact of quality defects of pharmaceuticals upon patient health. Just like in previous years, in 2023, the complaints concerned not only authorised medicinal products and individually prepared medicinal products, but also non-authorised or investigational medicinal products as well as substances intended for the manufacture of medicinal products and for the preparation of medicinal products in pharmacies. Through the international Rapid Alert System involving the EU, MRA, and PIC/S Member States, the Institute received and evaluated the total of 402 reports on quality defects. The percentage of received Czech and foreign reports is illustrated by Fig. 10.

Fig. 10 Number of received reports from 2015 to 2023

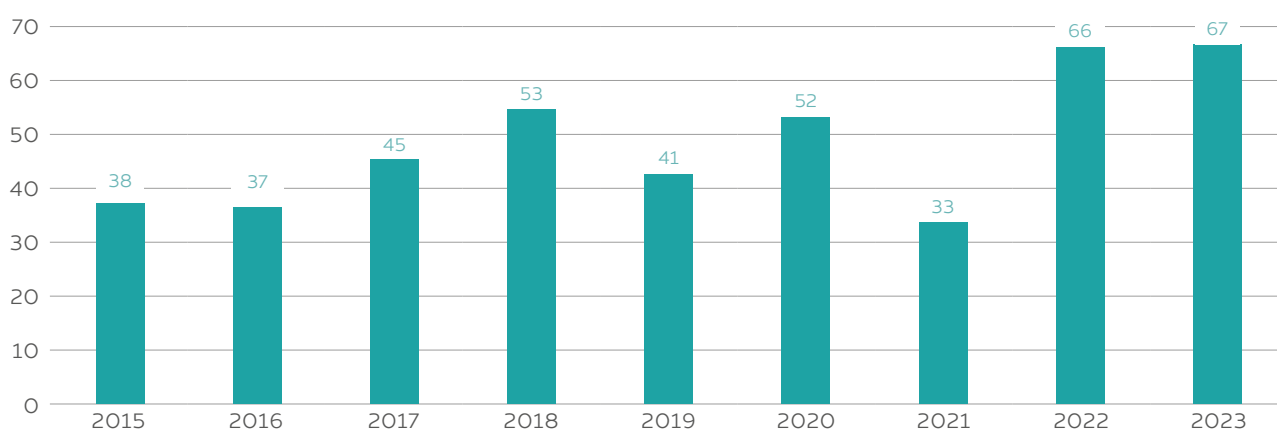


In case of a quality defect of a pharmaceutical not constituting a jeopardy to the life or health of people, the Quality Defects Unit issues a decision on allowing the distribution, dispensing, placement into circulation, and use of such pharmaceutical or its particular batch in the provision of healthcare services. In 2023, 80 administrative procedures in total were initiated and 77 final decisions were issued; these concerned 229 batches of medicinal products corresponding to 131 SÚKL codes of medicinal products. The issuance of three decisions was brought forward to the following year.

Since May 2022, the Quality Defects Unit has been publishing information letters for operators specifying the quality defect for which a decision on keeping the pharmaceutical on the market or a warning of a quality defect of a pharmaceutical or a condition that could be considered defective has been issued. In 2023, 23 information letters were published.

The Quality Defects Unit addresses also cases concerning the presence of counterfeit medicinal products in the legal distribution chain or theft of medicinal products. In 2023, the Quality Defects Unit addressed 67 such cases in total, of which four concerned theft of medicinal products from the legal distribution chain. An overview of addressed cases concerning the occurrence of counterfeit products and theft of medicinal products is provided in Fig. 11.

Fig. 11 Counterfeit medicinal products in the legal distribution chain and stolen medicinal products



Reports received from foreign countries include also reports on GMP non-compliance on the part of the manufacturer of a pharmaceutical. In 2023, the Quality Defects Unit received and evaluated 187 such reports in total.

Furthermore, the Quality Defects Unit monitored the recall of three medicinal products for marketing authorisation reasons. Two cases concerned piecemeal recall of medicinal products due to reduced shelf-life, the other case was recall due to change in the method of dispensing.

An overview of measures adopted in 2023 for individual medicinal products (related to SÚKL codes) is provided in Table 22. All of these cases concerned measures taken by the marketing authorisation holders or operators themselves; the Institute was only monitoring or adjusting these measures.

Tab. 22 Measures implemented in 2023 (related to SÚKL codes)

Implemented measures	Number
Recall from distributor level	0
Recall from healthcare facility level	23
Recall from patient level	3
Suspended distribution, dispensing and/or use	4
Released distribution, dispensing, and use	4
Permitted distribution, dispensing, marketing, and use in the provision of healthcare services through an administrative procedure	131 (number of batches: 229)

The Quality Defects Unit was involved in the adaptation of Regulation 161/2016, supplementing Directive 2001/83/EC of the European Parliament and of the Council by laying down detailed rules for the safety features appearing on the packaging of medicinal products for human use (hereinafter referred to as the “Safety Feature Regulation”). The representatives of the Institute participated in the meetings of the expert group for safety features, in international teleconferences, and regular meetings with the National Organisation for Medicines Verification (Národní organizace pro ověřování pravosti léčiv, z. s.; NOOL). The Unit was also providing information from the National System for Medicines Verification audit trail to state institutions of the Czech Republic.

For 2023, the Institute recorded the total of 13,262 reports on unsuccessful safety feature verification (for the entire period from 09 February 2019 to 31 December 2023, this number amounted to 1,206,266 reports in total). In the course of 2023, the Unit issued favourable recommendations for the total of 14 medicinal products and 56 batches, on the basis of which a temporary measure as referred to under Section 11(r) of the Act on Pharmaceuticals was issued by the Ministry of Health so as to safeguard the availability of medicinal products in the Czech Republic. The Quality Defects Unit also conducted investigations into 39 reports concerning suspected broken anti-tamper devices (ATDs), including other cases of non-compliances with Regulation No 2016/161.

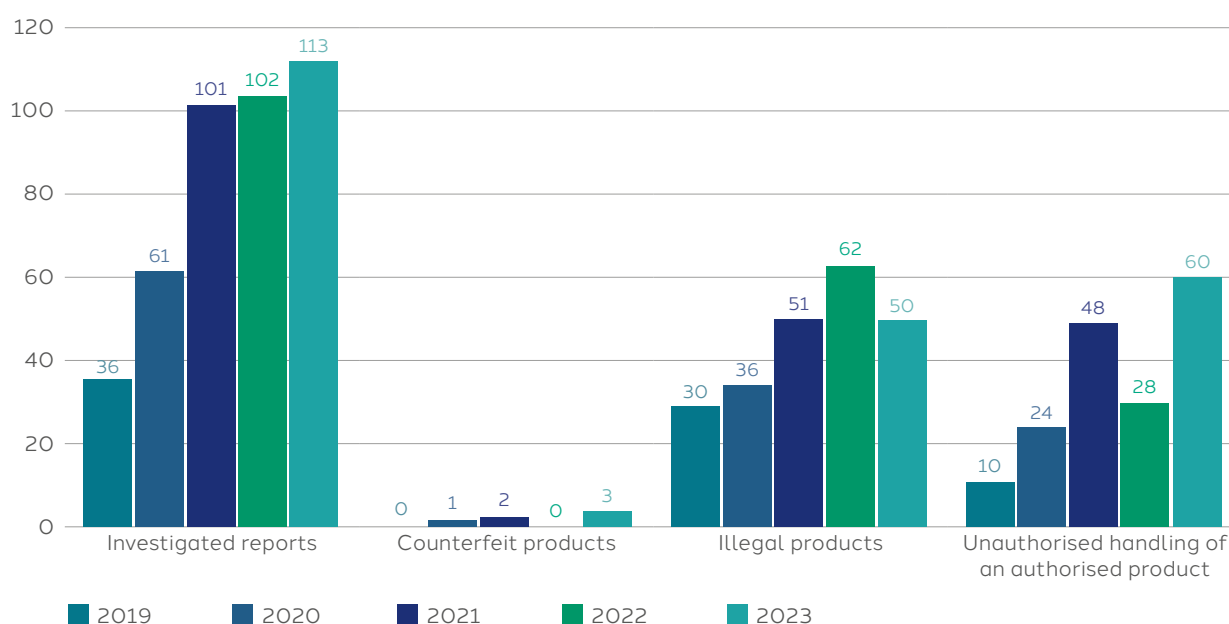
4.10 ENFORCEMENT

In 2023, active surveillance in the area of illegal handling of medicinal products focused particularly upon the identification, investigation, and penalisation of cases of distribution and sales of medicinal products by unauthorised persons and upon monitoring of the internet environment, where illegal sale of medicinal products is being carried out. In the sphere of enforcement, the Institute closely cooperates with the Czech Customs Administration, Czech Police, Czech Trade Inspection, and the Czech Agriculture and Food Inspection Authority (CAFIA). Cooperation has been extended also to foreign partners, not only in the exchange of information, but also in the investigation of specific cases with potentially international impact.

In 2023, the total of 113 reports (either the Institute's own or received reports) were investigated. In 2023, the Institute was monitoring and detecting illegal offers of medicinal products in the internet environment and executed 31 control purchases. It identified 50 cases of handling of unauthorised medicinal products and 60 cases of unauthorised handling of authorised medicinal products.

50 cases of handling
unauthorised medicinal
products
and **60** cases of
unauthorised handling
of authorised medicinal
products

Fig. 12 Control activities in the period of 2019–2023



In 2023, the Institute prepared the total of 307 opinions on shipments from third countries for the customs authorities for the purposes of release or non-release of medicinal products imported from third countries. The Institute assessed whether products that were the object of non-commercial import in mail shipments, express shipments, and in other types of parcel services, were medicinal products as defined by the provision of Section 2 of Act No 378/2007 Coll., on Pharmaceuticals and on Amendments to Some Related Acts (the Act on Pharmaceuticals).

In compliance with its new power referred to under the provision of Section 13(3)(s) of Act No 378/2007 Coll., on Pharmaceuticals and on Amendments to Some Related Acts (the Act on Pharmaceuticals), since 01 January 2022, the Institute has been keeping a list of websites offering medicinal products contrary to this Act (hereinafter referred to as the “list of websites with illegal medicinal product offer”); the list is being published by the Institute on its website. In 2023, the Institute investigated 40 cases of websites with illegal medicinal product offer and included 38 websites on the list.

4.11 SURVEILLANCE IN THE AREA OF REGULATION OF ADVERTISING FOR MEDICINAL PRODUCTS

In 2023, the Institute investigated the total of 122 reports of suspected breaches of Act No. 40/1995 Coll., on Advertising Regulation, as amended (hereinafter referred to as the “Act on Advertising Regulation”); 19 administrative procedures were completed and these resulted in the imposition of 19 fines for breaches of the Act on Advertising Regulation in the aggregate amount of 5,970,000 CZK.

Tab. 23 Overview of investigated reports of suspected breaches of the Act on Advertising Regulation in 2023

	Reports brought forward from 2022	Newly received reports in 2023	Total
Number of reports	6	122	128
Investigation completed	6	110	116
Forwarded for commencement of administrative procedure	6	40	46
Number of fines imposed with final effect	6	12	18

The subject of investigations into advertising was printed advertising matter (53 %), websites (45 %), and promotional samples (2 %).

Advertising for prescription-only medicines accounted for 48 % of the investigated cases; advertising for over-the-counter medicines represented 52 % of the cases.

Pharmaceutical companies or their legal representatives filed 18 % of reports on suspected breaches of law, 12 % of reports were lodged by private individuals, 2 % by state administration authorities, and 57 % by SÚKL employees; anonymous reports accounted for 10 %.

Fig. 13 Overview of investigated reports of suspected breaches of the Act on Advertising Regulation (2019–2023)

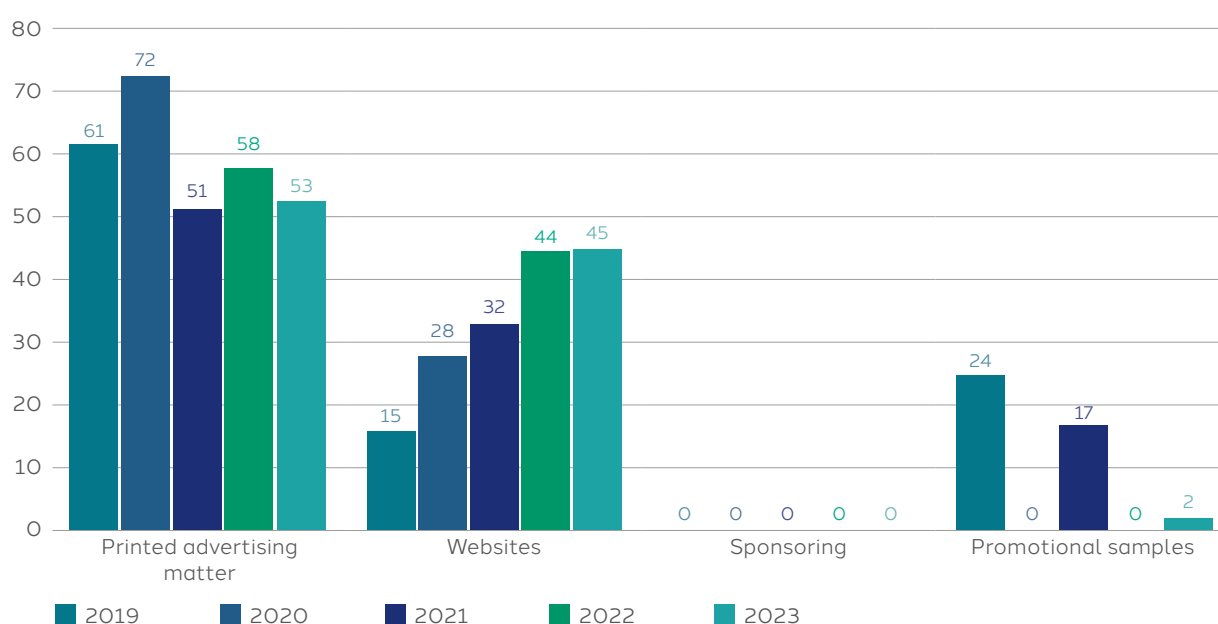
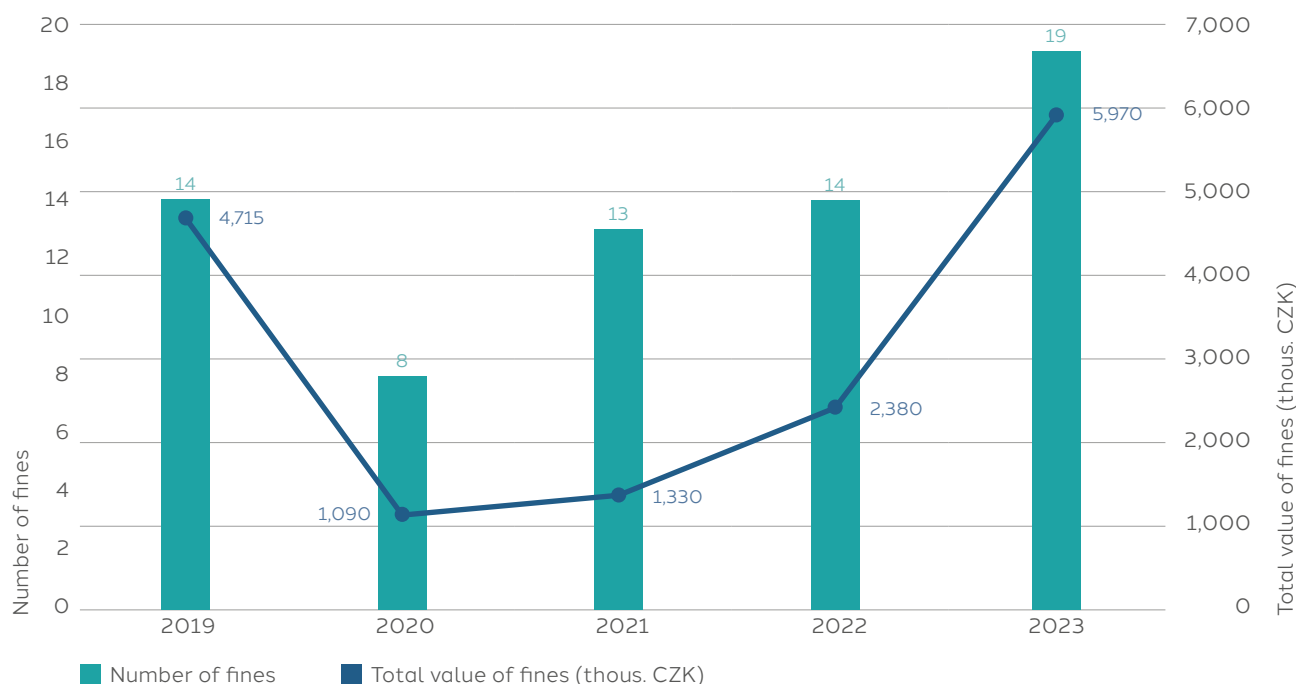


Fig. 14 Overview of fines imposed for breaches of the Act on Advertising Regulation (2019–2023)

Upon request, the Institute issued/provided 37 expert opinions/consultations on issues concerning proposed advertising for medicinal products for human use.

The inspectors of the Advertising Regulation Unit completed 25 inspections of compliance with the Act on Advertising Regulation and the Act on Pharmaceuticals and identified shortcomings in three controlled persons.

SURVEILLANCE IN THE AREA OF DECISION-MAKING ABOUT PRODUCT CLASSIFICATION

In 2023, the Institute initiated investigation into 197 cases of various products, most often dietary supplements and cosmetic products, for suspected classification as a medicinal product. In eleven cases, an administrative procedure regarding product classification was initiated ex officio or upon request. In 2023, the Institute reclassified the total of seven products to the category of medicinal products. Upon request, the Institute provided five expert opinions on issues regarding product classification as a medicinal product or another product.

4.12 STANDARDISATION AND PHARMACOPOEIAL ACTIVITIES

During the first half of 2023, the new edition of Czech Pharmacopoeia 2023 (hereinafter referred to as “Ph. Cz. 2023”) was prepared for print.

Ph. Cz. 2023 was published in cooperation with the Grada Publishing house in four volumes as binding from 01 December 2023 and it is available also in electronic format (as a PDF file accessible via a paid link on Grada’s website).

The European part of Czech Pharmacopoeia contains texts updated as at the Eleventh Edition of European Pharmacopoeia (Ph. Eur. 11.0).

Ph. Cz. 2023 is published in a new format and it was drafted in accordance with a new concept for pharmacopoeia publishing, approved by the Pharmacopoeia Commission of the Ministry of Health of the Czech Republic. The changes pertain to the European special part, which is, starting from this edition, translated only selectively. The texts were selected by the Pharmacopoeia Commission in collaboration with healthcare professionals, so as to ensure that the Czech Pharmacopoeia contained translation of those articles that are being used in the Czech healthcare and pharmaceutical environment. The European special part contains Czech translations of all articles referred to by the National Part and general chapter 4 – Reagents, as well as articles included upon request from professionals. Those articles that have not been selected for the Czech Pharmacopoeia, will no longer be translated, and hence will not form part of the Czech Pharmacopoeia, nevertheless, they remain binding in the European Pharmacopoeia. The general part of the European Pharmacopoeia has been translated and published completely.

The European Part of Ph. Cz. 2023 contains translations of new and amended texts of the Eleventh Edition of the European Pharmacopoeia (Ph. Eur. 11.0) binding from 01 January 2023 and unchanged texts from previous editions that had been included in the Czech Pharmacopoeia. In total, this represents 995 texts.

The General Part contains 411 texts, of which 358 are general chapters (of which three are new), 21 general articles, and 32 general articles for pharmaceutical forms.

The Special Part contains 584 selected texts, of which 499 are chemical and biological articles for active substances, excipients, and medicinal products; 46 articles for herbal drugs; one article for a vaccine for human use; and 38 articles for radiopharmaceuticals. The remaining articles of the Eleventh Edition of European Pharmacopoeia (incl. new or revised ones) have not been published in Ph. Cz. 2023.

The National Part of Ph. Cz. 2023 contains specific Czech items and has been published completely. This represents 161 texts in total.

A new, rather extensive text, is the List of articles of the Special Part of European Pharmacopoeia, which contains a listing of all European articles with basic information: Latin name, Czech name, English name, Ph. Eur. article number, CAS number, binding nature of Ph. Eur. (Ph. Eur. Edition) and Czech Pharmacopoeia Edition.

Its General Part includes three texts, incl. an overview of updated reagents and reference substances used in national articles and 15 updated tables.

The Special Part contains 140 national articles. As a new feature, a three-digit numbering of articles with the label "CZ" has been introduced and provided in their headers, e.g., CZ 005:2023. On the basis of requirements submitted by the Pharmacy Section of the Pharmacopoeia Commission of the Ministry of Health, the original article *Solutio Jarisch* was split into two articles: article *Solutio Jarisch* (CZ 115) without preservatives, and a new article *Solutio Jarisch cum parabenis* (CZ 149), containing preservative water. Seven articles were deleted from the National Part of the Czech Pharmacopoeia as obsolete and out of date: *Acaciae mucilago* (CZ 001), *Acidi borici et acidi salicylici solutio ethanolica cum glycerolo* (CZ 003), *Ammoniae solutio 10%* (CZ 026), *Dextrani 40 infusio* (CZ 052), *Dextrani 70 infusio* (CZ 053), *Ethanolum 70%* (CZ 057), and *Sulfuris pasta composita* (CZ 122).

In collaboration with the Pharmacy Section of the Pharmacopoeia Commission, six articles were revised: *Atropini sulfatis oculoguttae* (CZ 034), *Ergotamini tartras triturtus* (CZ 054), *Homatropini hydrobromidi oculoguttae* (CZ 070), *Tetracaini hydrochloridi oculoguttae* (CZ 125), *Geranii etheroleum* (CZ 066), and *Natrii tetraboratis globulus* (CZ 089).

Tab. 24 Number of texts in the European Part of Czech Pharmacopoeia 2023

European Part	General Part	Special Part	Total
New	3	0	3
Revised	408	584	992
Total	411	584	995

Along with the proof-reading and print preparation of Ph. Cz. 2023, the preparation of the first supplement to Ph. Cz. 2023 – Supplement 2024 (hereinafter referred to as "Suppl. 2024") was under way. In its European Part, Suppl. 2024 will contain translations and revisions of articles from Suppl. 11.1–11.4.

The list of all articles from the Special Part of European Pharmacopoeia of these four European supplements was published on [SÚKL's website \(Pharmacopoeia\)](#).

For the European Part of Suppl. 2024, translations of 36 new or revised articles from the General Part of Ph. Eur. (of which three are new ones) have been prepared. To date, 237 European articles have been included in the Special Part (incl. those which have no revision in Suppl. 11.1–11.4, but have been included upon request). In the European Part, this will amount to approx. 270 texts in total.

The preparation and distribution of national reference pharmacopoeial substances for national articles *Butamirati citras* (five CRLNs in total) and *Suxamethonium-dijodid CRLN* was organised.

Cooperation with the European Pharmacopoeia Commission (hereinafter referred to as "EPC") in the preparation of further Ph. Eur. editions and in the preparation of the Czech translations of standard terms of pharmaceutical forms, methods of administration, and packaging and their inclusion in the EDQM database continued.

The employees regularly attended the EPC meetings and meetings of secretariats of national pharmacopoeia commissions.

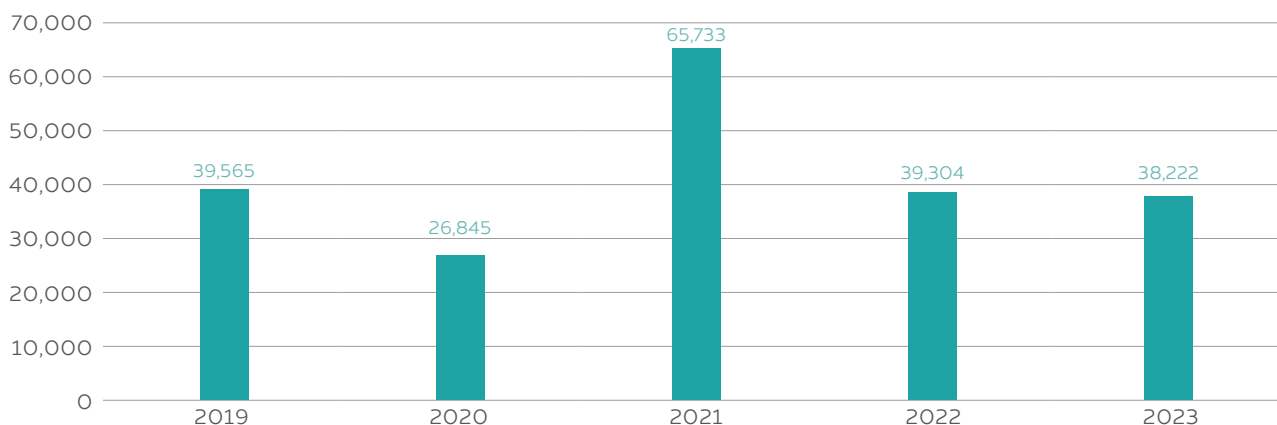
Information about the binding nature of individual Ph. Eur. editions was published in SÚKL's information media.

4.13 PENALTIES IMPOSED IN THE AREA OF PHARMACEUTICALS AND MEDICAL DEVICES

PENALTIES IN THE AREA OF PHARMACEUTICALS AND HUMAN TISSUES AND CELLS

Based on its ex-officio findings, particularly those identified during regular inspections of regulated entities, or findings from reports received from the Czech Police and other administrative bodies of the Czech Republic or from private individuals or legal entities, the Institute initiates administrative procedures concerning offences within which penalties pursuant to the applicable laws are imposed according to the severity of the identified breach. In the area of penalisation, in 2023, the Institute continued to impose penalties in the form of so called aggregate fines for committed offences referred to under various acts according to which the Institute is the body in charge of investigation into offences, particularly those arising in the area of medicinal product handling. As of 01 July 2017, the Institute has been applying Act No 250/2016 Coll., on Liability for Offences and Procedures Pertaining Thereto, as amended, in its practice of administrative penalisation. Pursuant to this Act, where less serious offences are concerned, the Institute has also the option to impose an admonition as an administrative penalty instead of a financial sanction. The Institute has been availing of this possibility since 2018. In 2023, the Institute imposed the total of 15 admonitions and 167 fines in the total amount of 38,222,000 CZK. Most often, the penalties were imposed for breaches of the Act on Pharmaceuticals (119 fines and six admonitions), for breaches of the Act on Advertising Regulation (19 fines), the Code of Control Procedure (16 fines), and the Act on Prices (five fines and eight admonitions). By the end of 2023, the Institute imposed as many as 33 fines for systematic withdrawal of medicinal products from pharmacy stock, of which 19 fines in the total amount of 17,285,000 CZK became final in 2023.

Fig. 15 Amount of finally imposed penalties in the area of pharmaceuticals and human tissues and cells in the period of 2019–2023 (thous. CZK)



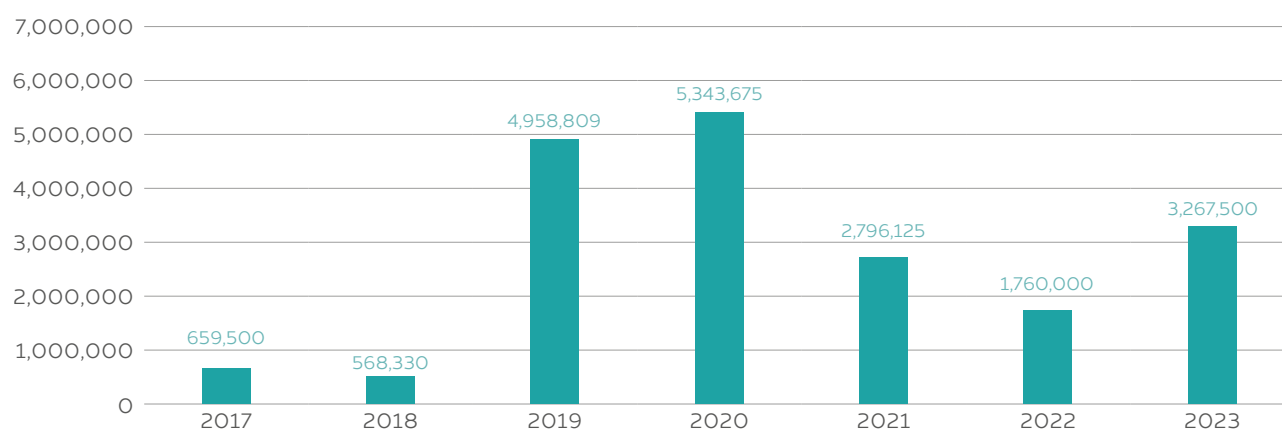
Tab. 25 Amounts of penalties in the area of pharmaceuticals and human tissues and cells in 2019–2023

Act	2019	2020	2021	2022	2023
	39,565,000	26,845,000	65,733,000	39,303,500	38,222,000
on Pharmaceuticals	29,079,000	24,559,000	62,237,000	26,757,500	29,674,000
on Drug Precursors	0	0	0	45,000	0
on Dependency-Producing Substances	263,000	250,000	160,000	60,000	145,000
on Prices	4,387,000	54,000	872,000	9,141,000	238,000
on Advertising Regulation	4,715,000	1,090,000	1,330,000	2,370,000	5,970,000
on Human Tissues and Cells	200,000	0	0	0	0
on Public Health Insurance	50,000	732,000	374,000	0	95,000
Code of Control Procedure	490,000	160,000	760,000	930,000	2,100,000
on Medical Devices	46,000	0	0	0	0
on Technical Requirements for Products	335,000	0	0	0	0

PENALTIES IN THE AREA OF MEDICAL DEVICES

On the basis of ex officio findings of the Institute arising, in particular, from inspection activities conducted at regulated entities and on the basis of reports from private individuals, the Legal Support Unit of the Medical Device Department initiates administrative procedures concerning offences, within which penalties are imposed with a view to the severity of the identified breach as per the respective act. Also in 2023, the Institute continued to impose penalties on the basis of so-called order pursuant to the Code of Administrative procedure. In the area of penalisation, in 2023, the Institute, moreover, continued to impose penalties in the form of so-called aggregate fines for committed offences referred to by several acts according to which the Institute is the body in charge of investigation into such offences. As of 01 July 2017, the Institute has been applying Act No 250/2016 Coll., on Liability for Offences and Procedures Pertaining Thereto, as amended, in its practice of administrative penalisation. Pursuant to this Act, the Institute has also the option to impose an admonition as an administrative penalty instead of a financial sanction where less serious offences are concerned. The Institute has been availing of this possibility since 2018. In 2023, the Institute imposed one admonition in total. With the coming into force of Act No 268/2014 Coll. (on 01 April 2015), since 2016, the Medical Device Legal Support Unit has observed an increase in proposals to initiate administrative procedures for administrative offences as part of adverse event investigation monitoring, particularly breaches of the obligation stipulated by Section 75 of Act No 268/2014 Coll., i.e., to inform the Institute about established safety corrective actions and their termination. In association with the new Act on Medical Devices and the Act on in Vitro Diagnostic Medical Devices that came into force on 26 May 2021, however, these merits of the case, however, have been kept only in the Act on in Vitro Diagnostic Medical Devices.

Fig. 16 Overall comparison of fines in the area of medical devices in the period of 2017–2023 (CZK)

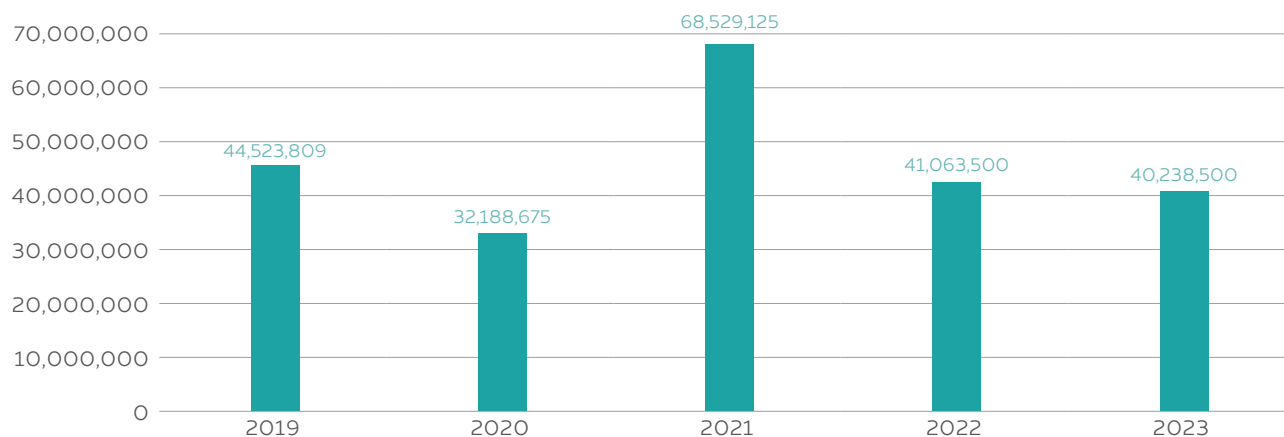


Tab. 26 Comparison of fines in the area of medical devices in the period of 2017–2023

Act	2017	2018	2019	2020	2021	2022	2023
	659,500	568,330	4,958,809	5,343,675	2,796,125	1,760,000	3,267,500
Code of Control Procedure	0	0	0	0	50,000	250,000	200,000
on Medical Devices	559,500	568,330	3,210,058	3,723,125	1,320,000	1,095,000	2,947,500
on Technical Requirements for Products	100,000	0	1,748,751	1,620,550	1,426,125	415,000	120,000

SUMMARY OF PENALTIES IMPOSED BY THE INSTITUTE IN 2023 (PHARMACEUTICALS AND MEDICAL DEVICES)

In 2023, the Institute imposed penalties in the overall amount of 40,238,500 CZK (Tables 25 and 26 refer). In accordance with Act No 250/2016 Coll., on Liability for Offences and Procedures Pertaining Thereto, as amended, in 2023, the Institute imposed the total of 16 admonitions instead of a financial penalty.

Fig. 17 Total penalties imposed by the Institute (pharmaceuticals and medical devices)



SECTION OF PRICING AND REIMBURSEMENT REGULATION

In compliance with the provisions of Act No 48/1997 Coll., on Public Health Insurance and Amendments to Some Related Acts (hereinafter referred to as the “Act on Public Health Insurance”), the Section of Pricing and Reimbursement Regulation decides on maximum prices and reimbursements of medicinal products and foods for special medical purposes.

For proprietary medicinal products, this is done via administrative procedures that fully comply with the principles of procedure transparency stipulated by the European legislation. Administrative procedures are conducted in cases specified by law either ex officio (most often, so called in-depth and abbreviated revisions) or upon request of persons authorised to file such requests by law (marketing authorisation holders in the case of authorised medicinal products; importers or domestic manufacturers of medicinal products if the medicinal product imported or manufactured thereby is used in the territory of the Czech Republic within a specific therapeutic programme or other persons applying for a specific therapeutic programme; importers or domestic manufacturers of foods for special medical purposes; health insurance companies). A request for the initiation of an ex-officio administrative procedure may be submitted by any person.

4.14 PRICING AND REIMBURSEMENTS

In 2023, the primary legal regulation governing the area of pricing and reimbursement regulation of medicinal products and foods for special medical purposes continued to be the Act on Public Health Insurance, in respect of which no major amendments were adopted compared to the previous year.

MAXIMUM EX-FACTORY PRICES

Tab. 27 Overview of administrative procedures in 2023

Applications for maximum ex-factory price determination	Number of SÚKL codes
Initiated	36
Decided	33
Appeal procedure pending	0
Became final	32
Applications for maximum ex-factory price change	
Initiated	246
Decided	219
Appeal procedure pending	0
Became final	213
Applications for maximum ex-factory price reduction – abbreviated procedure	
Initiated	0
Decided	0
Appeal procedure pending	0
Became final	0
Applications for maximum ex-factory price revocation	
Initiated	12
Decided	12
Appeal procedure pending	10
Became final	2

For this year, Price Regulation of the Ministry of Health of the Czech Republic no. 2/2023/OLZP of 30 November 2022, on the regulation of prices of medicinal products and foods for special medical purposes, was issued with effect from 01 January 2023. Price regulation continues to govern producer prices, by determining the maximum price by the State Institute for Drug Control or by means of material price regulation as referred to under Price Regulation of the Ministry of Health No. 2/2023/OLZP, as well as the profit margin by determining the maximum profit margin amount. Medicinal products listed in Art. II(7) of Price Regulation of the Ministry of Health No. 2/2023/OLZP continue to be regulated only in terms of profit margin.

In 2023, the Price Decision of the Ministry of Health of the Czech Republic 5/2020/CAU of 21 January 2020, laying down a list of ATC groups that are not subject to price regulation by setting the maximum price in the specified pharmaceutical form, continued to be in effect. Thereafter, with effect as at 01 October 2023, Amending Price Regulation of the Ministry of Health was issued, this was Price Regulation No. 9/2023/OLZP of 01 September 2023, amending Price Regulation No. 2/2023/OLZP, on the regulation of prices of medicinal products and foods for special medical purposes, and amending Price Decision of the Ministry of Health No. 10/2023/OLZP of 01 September 2023, amending Price Decision No. 5/2020/CAU, laying down a list of ATC groups that are not subject to producer price regulation in the specified route of administration. On 01 October 2023, the aforementioned resulted in a partial change in terms of the newly stipulated conditions governing exclusion of medicinal products from price regulation in those cases where the health insurance company and the marketing authorisation holder concluded a contract on the highest producer price for such medicinal product and where, at the same time, the active substance of such medicinal product falls within the ATC group with the specified route of administration, which is listed in the annex to Price Decision No. 5/2020/CAU. The change concerns specific groups of medicinal products important for the provision of healthcare services, whose availability is jeopardised due to inadequately low set maximum producer price.

In 2023, 24 administrative procedures regarding maximum price determination were initiated (cf. 29 administrative procedures in 2022). For maximum price change, 164 administrative procedures were commenced (cf. 63 administrative procedures in 2022); applications filed by marketing authorisation holders prevailed (27 applications were filed by health insurance companies and 137 applications were filed by marketing authorisation holders).

In the last three years, the number of regulated medicinal products has been gradually slightly decreasing, particularly in the segment of medicinal products regulated by profit margin (Fig. 18).

Fig. 18 Structure of reimbursed products by the type of price regulation (no. of codes of medicinal products/foods for special medical purposes)



Tab. 28 Overview of the number of codes of medicinal products/foods for special medical purposes in the maximum price zones as per the List of Prices and Reimbursements (SCAU) by month

Price regulation zone	01	02	03	04	05	06	07	08	09	10	11	12
Up to 20 CZK incl.	9	8	8	8	8	7	7	7	7	6	6	6
More than 20 CZK up to 50 CZK incl.	238	235	232	229	223	221	226	224	224	220	225	224
More than 50 CZK up to 100 CZK incl.	656	648	637	640	628	613	615	616	623	618	619	615
More than 100 CZK up to 200 CZK incl.	869	864	870	873	866	855	857	855	863	876	887	882
More than 200 CZK up to 300 CZK incl.	494	494	497	496	487	478	481	488	493	499	509	505
More than 300 CZK up to 500 CZK incl.	449	456	467	475	474	474	475	482	491	498	498	514
More than 500 CZK up to 1,000 CZK incl.	657	676	685	694	697	685	689	688	691	699	703	710
More than 1,000 CZK up to 2,000 CZK incl.	535	535	538	537	529	520	526	531	513	536	536	538
More than 2,000 CZK up to 3,000 CZK incl.	230	234	233	233	230	224	229	235	236	243	245	245
More than 3,000 CZK up to 5,000 CZK incl.	274	275	276	276	276	271	274	274	277	280	280	283
More than 5,000 CZK up to 10,000 CZK incl.	254	251	252	247	245	238	242	244	246	248	247	249
More than 10,000 CZK up to 20,000 CZK incl.	213	216	218	219	223	223	224	230	230	232	235	237
More than 20,000 CZK up to 30,000 CZK incl.	110	112	114	114	113	110	111	111	114	115	114	113
More than 30,000 CZK up to 50,000 CZK incl.	100	103	104	111	109	107	108	107	113	112	113	115
More than 50,000 CZK up to 100,000 CZK incl.	197	199	200	199	201	199	199	195	193	195	195	196
More than 100,000 CZK	97	98	98	99	100	102	97	100	107	109	110	108
Number of codes	5,382	5,404	5,429	5,450	5,409	5,327	5,360	5,387	5,421	5,486	5,522	5,540

With a view to the structure of medicinal products (Table 28), it may be stated that in the individual months of 2023, the numbers of medicinal products in the aforementioned maximum price zones were decreasing more in the lower price zones. The most significant decrease in the number of codes occurred in the zone of “More than 50 CZK up to 100 CZK incl.” In the middle price zones where an increase in the number of codes occurred, the highest increase was seen in the zone of “More than 300 CZK up to 500 CZK incl.”

DEVELOPMENT OF AVERAGE END-USER PRICES

In 2023, there was no change to the profit margins or to the VAT, the rate of which for medicinal products remained at 10 % also in 2023. In respect of medicinal products regulated by the maximum price (maximum price determined by an administrative procedure and profit margin as per the Price Regulation), the average end-user price increased by 13.9 %. The highest increase of average prices occurred in the “More than “5,000 up to 10,000 CZK” price zone. The biggest decrease was seen in the “More than 2,500 CZK up to 5,000 CZK” price zone. In respect of medicinal products regulated by notified price and profit margin (as per the Price Regulation and the Price Decision), the average end-user price increased by 2.2 %, with the highest increase in the “More than 10,000 CZK” price zone.

The biggest decrease occurred in the “More than 300 up to 500 CZK incl.” price zone. The situation in ex-factory price levels (ex. profit margin and VAT) focusing upon a more detailed comparison of the last quarters of 2022 and 2023 is illustrated by Figures 19 and 20.

Fig. 19 Prices of pharmaceuticals regulated by maximum price – comparison of average prices in Q4 2022 and Q4 2023 by price zones

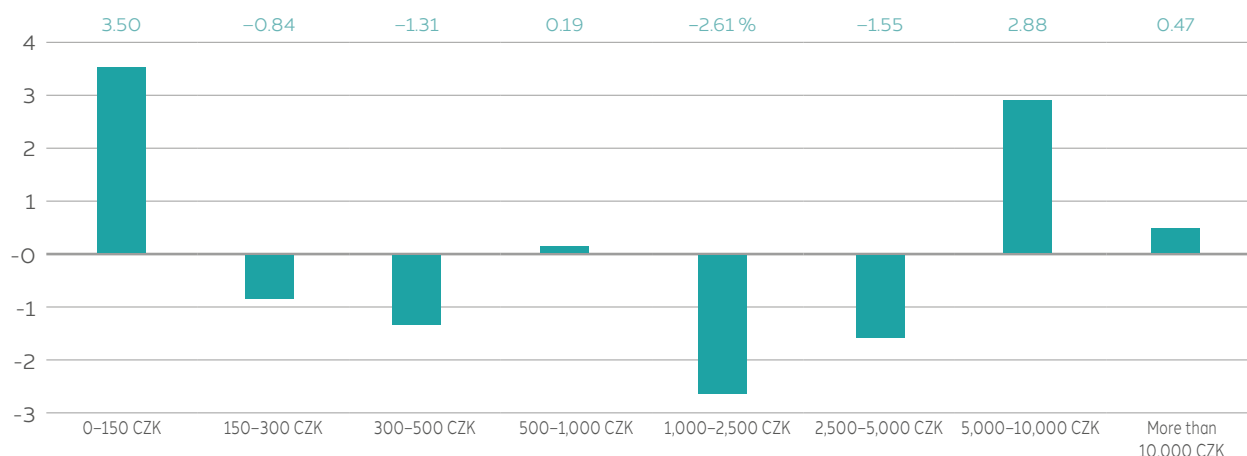
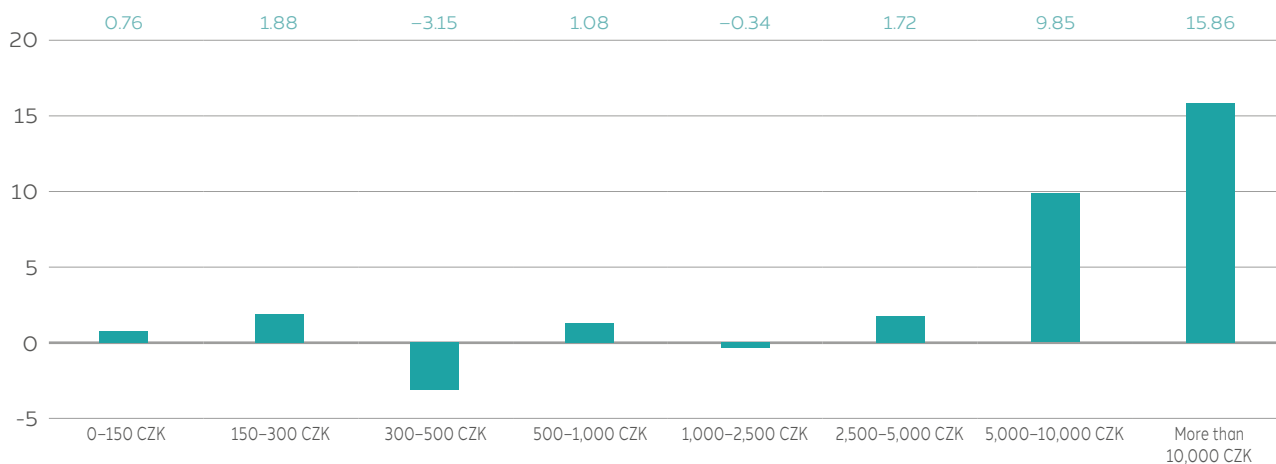


Fig. 20 Prices of pharmaceuticals regulated by profit margin – comparison of average prices in Q4 2022 and Q4 2023 by price zones



OVERVIEW OF THE MOST COMMONLY DISTRIBUTED MEDICINAL PRODUCTS WHOSE MAXIMUM PRICE CHANGED

On the basis of periodical distributor reports on executed supplies of medicinal products, an overview of ten most commonly distributed medicinal products was compiled, along with an overview of ten products with the highest financial volume by the ex-factory price, in respect of which the maximum ex-factory price changed.

In 2023, the maximum prices both increased and decreased in the group of the most commonly distributed medicinal products whose maximum price changed. The biggest change in terms of maximum price increase occurred for medicinal product KALNORMIN (Table 29).

Tab. 29 Ten most commonly distributed medicinal products by number of packages reported in compliance with DIS-13 Guideline whose maximum price changed

Code	ATC	Name	Name supplement	No. of packages	Original maximum price (CZK)	New maximum price (CZK)	Change to maximum price (%)
0200935	A12BA01	KALNORMIN	1G TBL PRO 30	780,647	37.07	52.60	41.9
0215956	J07BA01	FSME-IMMUN	0,5ML INJ SUS ISP 1X0,5ML+J	713,442	682.01	528.69	-22.5
0001066	D06AX	FRAMYKOIN	250IU/G+5,2MG/G UNG 10G	625,229	51.18	66.53	30.0
0201970	D06AX	PAMYCON	33000IU/2500IU DRM PLV SOL 1	567,202	69.72	80.88	16.0
0017189	A12BA01	KALIUM CHLORATUM BIOMEDICA	500MG TBL ENT 100	376,113	64.79	91.47	41.2
0093109	N01BB58	SUPRACAIN	40MG/ML+5MCG/ML INJ SOL 10X2ML	320,272	173.78	225.34	29.7
0168904	B01AF01	XARELTO	20MG TBL FLM 98 II	316,773	4,891.61	3,967.75	-18.9
0210230	A10BJ05	TRULICITY	1,5MG INJ SOL PEP 2X0,5ML	257,281	1,009.39	860.35	-14.8
0193747	B01AF02	ELIQUIS	5MG TBL FLM 168	236,768	4,232.24	3,623.82	-14.4
0193741	B01AF02	ELIQUIS	2,5MG TBL FLM 168	184,299	4,482.97	3,672.62	18.1

Medicinal products with the highest financial volume fall within the middle and higher price zones. For all of the medicinal products listed in the table below, the maximum price decreased (Table 30).

Tab. 30 Ten most commonly distributed medicinal products by financial volume in end-user prices reported in compliance with DIS-13 Guideline whose maximum price changed

Code	ATC	Name	Name supplement	Financial volume in end-user price	Original maximum price (CZK)	New maximum price (CZK)	Change to maximum price (%)
0168904	B01AF01	XARELTO	20MG TBL FLM 98 II	1,344,798,124	4,891.61	3,967.75	-18.9
0193747	B01AF02	ELIQUIS	5MG TBL FLM 168	841,832,538	4,232.24	3,623.82	-14.4
0222376	J05AP57	MAVIRET	100MG/40MG TBL FLM 84(4X21)	756,818,824	305,259.08	261,346.43	-14.4
0222208	M09AX07	SPINRAZA	12MG INJ SOL 1X5ML	663,161,971	1,849,784.25	1,599,774.41	-13.5
0210636	J07BM03	GARDASIL 9	INJ SUS ISP 1X0,5ML+2J	610,557,811	2,696.43	2,393.12	-11.2
0215956	J07BA01	FSME-IMMUN	0,5ML INJ SUS ISP 1X0,5ML+J	579,181,187	682.01	528.69	-22.5
0210049	L04AG05	ENTYVIO	300MG INF PLV CSL 1	508,083,436	38,240.82	34,742.40	-9.1
0222937	L01XK01	LYNPARZA	150MG TBL FLM 56	440,366,608	55,971.10	50,714.58	-9.4
0168899	B01AF01	XARELTO	15MG TBL FLM 98 II	399,079,861	4,891.61	3,967.75	-18.9
0193741	B01AF02	ELIQUIS	2,5MG TBL FLM 168	336,096,733	4,482.97	3,672.62	-18.1

AMOUNTS AND CONDITIONS OF REIMBURSEMENTS FROM HEALTH INSURANCE FUNDS

Tab. 31 Overview of administrative procedures in 2023

Applications for determination or change of the amount and conditions of reimbursement	Number of SÚKL codes
Initiated	398
Decided	286
Appeal procedure pending	15
Became final	268
Applications for determination or change of maximum price and the amount and conditions of reimbursement	
Initiated	87
Decided	39
Appeal procedure pending	5
Became final	33
Applications for reimbursement revocation	
Initiated	347
Decided	315
Appeal procedure pending	0
Became final	265
Applications for maximum price and reimbursement revocation	
Initiated	143
Decided	141
Appeal procedure pending	0
Became final	133
Ex officio initiated procedures	
Initiated	1,833
Decided	1,582
Appeal procedure pending	341
Became final	1,198
Procedures concerning similar products	
Initiated	653
Decided	645
Appeal procedure pending	1
Became final	594

In 2023, 24 applications for determination of reimbursement of highly innovative products were submitted.

In the course of 2023, the Section continued to initiate in-depth reimbursement revisions according to the schedule. Twenty-seven in-depth revisions (683 SÚKL codes) were scheduled for and also initiated in 2023.

Pursuant to the provisions of Section 39 of the Act on Public Health Insurance, in in-depth-revisions, the Institute is obliged, i. a., to review, and, where applicable, change the amount of the basic reimbursement, the consistency of the amounts of reimbursements for all principally therapeutically replaceable medicinal products or foods for special medical purposes with the basic reimbursement, the uniformity and effectiveness of the determined conditions of reimbursement, and compliance of the determined amounts and conditions of reimbursement of medicinal products and foods for special medical purposes with the law, particularly meeting the expected results and reasons for pharmacotherapy and cost-effectiveness. The Institute initiates also other types of administrative procedures ex officio, such as so-called abbreviated revisions or individual administrative procedures to change or revoke the amounts and conditions of reimbursement.

In 2023, savings of public health insurance funds were generated both by in-depth and abbreviated revisions of reimbursements. The total savings arising from abbreviated revisions enforceable in 2023 are estimated at 2,844,167,039 CZK, and those arising from in-depth revisions at 2,347,864,044 CZK.

Tab. 32 Overview of enforceable decisions on reimbursement revisions and the impact on public health insurance funds

Effective date	Number of SÚKL codes	Number of administrative procedures	Impact on health insurance funds
1/2023	0	0	0
2/2023	19	3	181,185,403.00 CZK
3/2022	95	5	800,161,430.00 CZK
4/2022	265	7	965,327,758.00 CZK
5/2022	14	2	144,414,455.00 CZK
6/2022	57	3	275,994,180.00 CZK
7/2022	42	4	440,266,733.00 CZK
8/2022	61	2	300,283,603.00 CZK
9/2022	462	9	1,107,246,233.00 CZK
10/2022	27	4	385,430,526.00 CZK
11/2022	22	1	308,815,532.00 CZK
12/2022	193	3	282,905,230.00 CZK

Note: Positive figures represent savings from health insurance funds, negative figures an increased impact upon the budget.

The overview of the number of medicinal product codes in the SCAU reimbursement price zones indicates that most often, medicinal products fall into the lower price zones, i.e., 3–7, in the reimbursement range of 50–1,000 CZK (Table 33 refers). The value distribution in 2023 is almost identical to that of 2022, with minimum deviations only.

Tab. 33 Overview of the number of codes of medicinal products/foods for special medical purposes in price zones according to the List of Prices and Reimbursements (SCAU) by month

Reimbursement zone	01	02	03	04	05	06	07	08	09	10	11	12
Up to 20 CZK, incl.	163	165	163	163	155	152	154	153	156	155	155	155
More than 20 CZK up to 50 CZK, incl.	690	686	692	696	684	654	660	664	673	673	678	677
More than 50 CZK up to 100 CZK, incl.	1,086	1,076	1,089	1,144	1,123	1,091	1,087	1,096	1,130	1,146	1,154	1,138
More than 100 CZK up to 200 CZK, incl.	1,491	1,498	1,520	1,503	1,464	1,412	1,417	1,431	1,438	1,445	1,449	1,429
More than 200 CZK up to 300 CZK, incl.	776	787	788	800	780	759	773	793	826	834	847	844
More than 300 CZK up to 500 CZK, incl.	901	898	909	905	892	855	843	892	897	919	927	929
More than 500 CZK up to 1,000 CZK, incl.	1,036	1,050	1,057	1,064	1,052	1,002	999	954	927	922	923	958
More than 1,000 CZK up to 2,000 CZK, incl.	821	817	811	787	777	750	751	750	763	780	794	783
More than 2,000 CZK up to 3,000 CZK, incl.	361	360	366	356	354	347	344	344	309	319	318	312
More than 3,000 CZK up to 5,000 CZK, incl.	328	332	331	330	330	328	329	337	341	336	332	333
More than 5,000 CZK up to 10,000 CZK, incl.	481	481	481	470	462	452	452	462	457	459	467	470
More than 10,000 CZK up to 20,000 CZK, incl.	346	361	388	386	381	369	374	354	363	371	383	385
More than 20,000 CZK up to 30,000 CZK, incl.	160	166	160	155	152	128	138	118	120	120	124	123
More than 30,000 CZK up to 50,000 CZK, incl.	155	152	148	148	151	132	132	111	112	109	112	115
More than 50,000 CZK up to 100,000 CZK, incl.	136	124	113	117	116	114	107	101	103	103	110	110
More than 100,000 CZK	81	81	81	82	84	86	83	84	91	93	99	97
Number of codes	9,012	9,034	9,097	9,106	8,957	8,631	8,643	8,644	8,706	8,784	8,872	8,858

OVERVIEW OF THE MOST COMMONLY DISTRIBUTED MEDICINAL PRODUCTS FOR WHICH REIMBURSEMENT FROM HEALTH INSURANCE WAS CHANGED

The overview clearly indicates that in the group of medicinal products with the highest financial volume in end-user prices, there was a less significant decrease in the reimbursement for individual packages of medicinal products. The highest reduction of reimbursement occurred for medicinal product GILENYA; reimbursements for these high-volume medicinal products were not increased (Table 34).

Tab. 34 Ten most commonly distributed medicinal products by financial volume in end-user prices reported in compliance with DIS-13 Guideline, for which reimbursement was changed

Code	ATC	Name	Name supplement	Financial volume in end-user prices	Original reimbursement (CZK)	New reimbursement (CZK)
0209484	L01FF02	KEYTRUDA	25MG/ML INF CNC SOL 1X4ML	2,545,073,681	69,734.19	63,241.46
0168904	B01AF01	XARELTO	20MG TBL FLM 98 II	1,344,798,124	4,265.29	3,845.17
0223046	L01FF01	OPDIVO	10MG/ML INF CNC SOL 1X24ML	1,306,266,779	66,620.15	63,344.83
0193747	B01AF02	ELIQUIS	5MG TBL FLM 168	841,832,538	3,655.96	3,295.86
0193695	S01LA05	EYLEA	40MG/ML INJ SOL ISP 1X0,09ML	771,925,887	16,258.18	12,157.13
0222376	J05AP57	MAVIRET	100MG/40MG TBL FLM 84(4X21)	756,818,824	355,385.11	257,273.89
0249566	L01FC01	DARZALEX	1800MG INJ SOL 1X15ML	691,307,053	116,108.83	105,560.60
0168462	L04AE01	GILENYA	0,5MG CPS DUR 28	646,214,061	36,175.21	19,937.39
0210636	J07BM03	GARDASIL 9	INJ SUS ISP 1X0,5ML+2J	610,557,811	3,555.12	3,171.25
0215956	J07BA01	FSME-IMMUN	0,5ML INJ SUS ISP 1X0,5ML+J	579,181,187	958.55	756.17

The group of medicinal products for which reimbursement changed and which were distributed in the highest volumes, includes particularly relatively inexpensive medicinal products. In 2023, reimbursements of the aforementioned products were being reduced. Despite the reduction of their reimbursement, the number of packages increased for all of the medicinal products except for medicinal product PRADAXA, for which a reduced level of distribution was seen (Table 35).

Tab. 35 Deset nejčastěji distribuovaných léčivých přípravků dle počtu balení vykázaných dle DIS-13, u kterých došlo ke změně UHR

Code	ATC	Name	Name supplement	A (no. of packages)	Original reimbursement (CZK)	New reimbursement (CZK)	B (no. of packages)	Note
0215956	J07BA01	FSME-IMMUN	0,5ML INJ SUS ISP 1X0,5ML+J	45,661	958.55	756.17	45,946	x/
0250995	N06AX05	TRITTICO AC	150MG TBL MRL 45	220,180	197.99	108.55	253,638	
0230415	N06AB04	CITALEC	20MG TBL FLM 30	166,707	132.00	72.37	188,088	
0250994	N06AX05	TRITTICO AC	75MG TBL MRL 45	168,385	98.98	54.28	184,637	
0049009	C10AA05	ATORIS	20MG TBL FLM 90	76,551	279.53	165.41	88,734	*/
0253668	N06AB06	ASENTRA	50MG TBL FLM 30	147,532	132.00	72.37	156,775	
0168904	B01AF01	XARELTO	20MG TBL FLM 98 II	150,134	4,265.29	3,845.17	166,639	
0168373	B01AE07	PRADAXA	150MG CPS DUR 60X1 I	161,003	1,305.70	1,177.09	151,019	
0049006	C10AA05	ATORIS	10MG TBL FLM 90	66,352	139.77	82.70	88,920	*/
0230409	N06AB04	CITALEC	10MG TBL FLM 30	134,722	65.99	36.18	137,782	

* – the period of one quarter of a year; x – the period of one sixth of a year; number of packages distributed during six months prior to the change; B – number of packages distributed during six months after the change

The table provides a summary overview of new innovative pharmaceuticals that entered the reimbursement system for the first time, as well as previously reimbursed pharmaceuticals in respect of which reimbursement was newly extended to a new diagnosis or a broader patient population. Furthermore, the table provides an overview of highly innovative medicinal products entering the reimbursement system pursuant to Section 39d of the Act on Public Health Insurance, and of orphan medicinal products entering the reimbursement system pursuant to Section 39da of the Act on Public Health Insurance.

For these selected administrative procedures the result of which may be important both for the general public and for professionals from the perspective of the addressed expert issue (application for determination of reimbursement for a new active substance, application for determination of reimbursement for a new indication, application for major change to the conditions of reimbursement), the Institute has been publishing so called assessment report summaries on its website on an ongoing basis since 2020. The Institute has been publishing the summaries for individual pharmaceuticals/procedures on its website in order to facilitate access to basic data and information on the assessed pharmaceuticals for the general public.

Tab. 36 Overview of newly reimbursed original pharmaceuticals and significant extensions of reimbursement with decisions issued in 2023

Name of the medicinal product and active substance	Indication (clinical use)	Reimbursement effective from
ONTOZRY (cenobamate)	Treatment-resistant epilepsy and/or intolerance of previous therapy with at least two 2 antiepileptic agents	January 2023
JAKAVI (ruxolitinib)	Treatment of splenomegaly and/or clinically significant symptoms of the disease, in adult patients with primary myelofibrosis (PMF), post polycythemia vera myelofibrosis (postPV MF) or post essential thrombocythemia myelofibrosis (post-ET MF)	January 2023
REVESTIVE (teduglutide)	Treatment of patients with short bowel syndrome	February 2023
ZEPOSIA (ozanimod)	Second or higher biological treatment line for ulcerative colitis and first-line treatment of relapsing-remitting multiple sclerosis	February 2023
MAVENCLAD (cladribine)	Relapsing-remitting multiple sclerosis: extension of reimbursement by two more treatment cycles	February 2023
VABYSMO (faricimab)	Age-related macular degeneration (AMD), diabetes-related macular edema (DME)	March 2023
AKLIEF (trifarotene)	Local treatment of acne (large skin areas)	March 2023
TECENTRIQ (atezolizumab)	Adjuvant treatment of non-small cell lung carcinoma (NSCLC) with high risk of disease recurrence	March 2023
XELJANZ oral solution (tofacitinib)	Polyarticular juvenile idiopathic arthritis in children 2 years of age and older (first and further biological treatment lines)	April 2023
PHESGO (pertuzumab and trastuzumab)	Early HER2-positive breast cancer with high risk of recurrence	April 2023
EMPLICITI (elotuzumab)	Relapsing/refractory multiple myeloma: third and further treatment lines (combination elotuzumab + pomalidomide + dexamethasone)	April 2023
XTANDI (enzalutamide)	Prostate cancer: non-metastatic, castration-resistant, with high risk of metastasis development and metastatic, hormone-sensitive	April 2023
VYEPTI (eptinezumab)	Migraine (following failure or intolerance of at least 2 agents from different groups of standard prophylactic medication)	May 2023
VERZENIOS (abemaciclib)	Early HER2-negative breast cancer with high risk of recurrence	April 2023
SLENYTO (melatonin)	Treatment of insomnia in children and adolescents with autistic spectrum disorder and/or with Smith–Magenis syndrome in cases where sleep hygiene measures are insufficient	April 2023
REVLIMID (lenalidomide)	Combined VRd treatment (bortezomib + lenalidomide + dexamethasone) in patients with treatment-naïve multiple myeloma, who are not suitable candidates for transplantation	April 2023
KEYTRUDA (pembrolizumab)	Early triple-negative breast cancer with high risk of recurrence	April 2023
DUDOPA subcutaneous (levodopa + carbidopa)	Parkinson's disease (advanced stage)	May 2023
LEQVIO (inclisiran)	Primary hypercholesterolemia or mixed dyslipidaemia (in cases of failure to achieve target LDL-C levels by maximally intensive standard treatment)	April 2023
LENVIMA (lenvatinib)	Advanced or recurring endometrial cancer (combination lenvatinib + pembrolizumab)	May 2023
KEYTRUDA (pembrolizumab)	Metastatic triple-negative breast carcinoma (first-line treatment, combination with paclitaxel or nab-paclitaxel)	May 2023

Name of the medicinal product and active substance	Indication (clinical use)	Reimbursement effective from
VYXEOS LIPOSOMAL (daunorubicin + cytarabine)	Acute myeloid leukaemia (first-line treatment)	May 2023
XOSPATA (gilteritinib)	Acute myeloid leukaemia (first relapse)	May 2023
JARDIANCE (empagliflozin)	Symptomatic chronic cardiac failure with sustained or mildly impaired renal function	May 2023
LYNPARZA (olaparib)	Advanced carcinoma of the ovary, fallopian tube or primarily peritoneal carcinoma with evidenced BRCA1/2 mutation in patients who responded to chemotherapy regimen containing platinum	May 2023
NEXVIADYME (avalglucosidase alfa)	Pompe disease (metabolic enzyme disorder)	June 2023
REVOLADE (eltrombopag)	Reimbursement extension to early form of immune thrombocytopenia in adults (medicinal products already reimbursed for chronic form of the disease)	June 2023
REVLIMID (lenalidomide)	Multiple myeloma in patients after bone marrow transplantation (monotherapy)	June 2023
OPDIVO (nivolumab)	Urothelial carcinoma with high risk of recurrence (adjuvant treatment)	July 2023
JORVEZA (budesonide)	Active eosinophilic esophagitis	July 2023
HUMIRA (adalimumab)	Active non-infectious uveitis	July 2023
TRODELVY (sacituzumab govitecan)	Advanced triple-negative breast carcinoma (in pre-treated patients)	July 2023
KEYTRUDA (pembrolizumab)	Persistent, recurring or metastatic cervical cancer in patients with tumours expressing PD-L1 with CPS ≥ 1	July 2023
SAPHNELO (anifrolumab)	Systemic lupus erythematosus (further treatment lines)	July 2023
VITAFLO PKU SPHERE, MEVALIA (glycomacropeptide)	Phenylketonuria (part of patient's diet)	August 2023
BRAFTOVI (encorafenib)	Metastatic colorectal carcinoma in pre-treated patients	August 2023
POLIVY (polatuzumab)	Relapsing/refractory diffuse large B cell lymphoma (combination polatuzumab + bendamustine + rituximab)	August/September 2023
OPDIVO (nivolumab)	Metastatic squamous oesophageal cancer (combination therapy with ipilimumab or fluoropyrimidine and platinum)	August 2023
OPDIVO (nivolumab)	Metastatic adenocarcinoma of the stomach or oesophagus (combination therapy with fluoropyrimidine and platinum)	August 2023
IKERVIS (cyclosporine, drops)	Severe dry keratitis (inflammation of the cornea)	September 2023
MAVENCLAD (cladribine)	Relapsing/remitting multiple sclerosis (RRMS): reimbursement extension for first-line treatment (active form of the disease with a significant MRI finding)	September 2023
BAVENCIO (avelumab)	Advanced urothelial carcinoma (stable on previous platinum therapy)	November 2023
KISPLYX (lenvatinib)	Advanced kidney cancer with moderate or poor prognosis (combination therapy with pembrolizumab)	September 2023
LUMYKRAS (sotorasib)	Advanced non-small cell lung carcinoma (monotherapy, further treatment lines)	September 2023
TUKYSA (tucatinib)	HER2-positive, locally advanced or metastatic breast cancer after at least 2 previous anti-HER2 treatment regimens (in combination with trastuzumab and capecitabine)	September 2023
MAYZENT (siponimod)	Extensive metabolisers (increased reimbursement) and poor metabolisers (another increased reimbursement) in the indication of secondary progressive multiple sclerosis	September 2023
KERENDIA (finerenone)	Diabetic kidney disease (with severe albuminuria)	September 2023
RYEQO (relugolix + estradiol + norethisterone)	Moderate to severe uterine myomas in patients not suitable for surgical intervention	October 2023
OCTIM (desmopressin)	Prevention of bleeding in minor surgical procedures in patients with mild and moderate haemophilia A and with Type 1 and 2 von Willebrand disease	October 2023

Name of the medicinal product and active substance	Indication (clinical use)	Reimbursement effective from
LYNPARZA (olaparib)	HER2 – locally advanced or metastatic breast carcinoma with positive BRCA1/2 mutation in patients previously not treated with chemotherapy for metastatic disease	December 2023
BRUKINSA (zanubrutinib)	Chronic lymphocytic leukaemia (relapsing or refractory)	November 2023
EVENITY (romosozumab)	Osteoporosis in post-menopausal women (with high risk of fractures)	November 2023
KEYTRUDA (pembrolizumab)	Combination therapy with LENVIMA – advanced or recurring endometrial cancer	November 2023
RINVOQ (upadacitinib)	Second/further line of biological/targeted therapy for ulcerative colitis	November 2023
ASPAVELI (pegcetacoplan)	Paroxysmal nocturnal haemoglobinuria	November 2023
KEYTRUDA (pembrolizumab)	Combined treatment with KISPLYX – advanced kidney carcinoma with moderate or poor prognosis	November 2023
VENCLYXTO (venetoclax)	In combination with azacitidine in AML patients not suitable for intensive chemotherapy	November 2023
DUPIXENT (dupilumab)	Chronic rhinosinusitis with nasal polyps	November 2023
LYNPARZA (olaparib)	Advanced HER2-negative breast cancer with BRCA mutation (in patients not treated with chemotherapy for advanced disease)	December 2023
NILEMDO (bempedoic acid)	Treatment of adult patients with primary hypercholesterolemia (heterozygote familial and non-familial) or with mixed dyslipidaemia	December 2023
NUSTENDI (bempedoic acid + ezetimibe)	Treatment of adult patients with primary hypercholesterolemia (heterozygote familial and non-familial) or with mixed dyslipidaemia	December 2023
TECENTRIQ (atezolizumab)	First-line treatment of adult patients with extensive-stage small-cell lung carcinoma (ES-SCLC), in combination with etoposide and carboplatin	November 2023
INREBIC (fedratinib)	Treatment of splenomegaly and/or clinically significant symptoms of the disease in adult patients with primary myelofibrosis, post polycythemia vera myelofibrosis or post essential thrombocythemia myelofibrosis	December 2023
RALBIOR (ramipril + bisoprolol)	Hypertension, chronic cardiac failure and chronic coronary syndrome	December 2023
FORXIGA (dapagliflozin)	Chronic kidney disease in diabetic patients (reimbursement extension to patients with urine albumin/creatinine ratio of less than 200 mg/g)	December 2023
POLIVY (polatuzumab)	First-line treatment of DLBCL (in combination with rituximab, cyclophosphamide, doxorubicin and prednisone)	December 2023
ENHERTU (trastuzumab deruxtecan)	Non-resectable/metastatic HER2-positive breast cancer in patients who completed one or more 2nd- and 3rd-line anti-HER2-based treatment lines	December 2023
Highly innovative medicinal products		
ONUREG (azacitidine, oral)	Maintenance therapy of acute myeloid leukaemia	January 2023
REVESTIVE (teduglutide)	Treatment of patients with short bowel syndrome	February 2023
EMPLICITI (elotuzumab)	Relapsing/refractory multiple myeloma: third and further treatment line (combination elotuzumab + pomalidomide + dexamethasone)	April 2023
REVLIMID (lenalidomide)	VRd combination therapy (bortezomib + lenalidomide + dexamethasone) in patients with treatment-naïve multiple myeloma, who are not suitable candidates for transplantation	April 2023
KEYTRUDA (pembrolizumab)	Early triple-negative breast cancer with high risk of recurrence	April 2023
LENVIMA (lenvatinib)	Advanced or recurring endometrial cancer (combination lenvatinib + pembrolizumab)	May 2023
KEYTRUDA (pembrolizumab)	Metastatic triple-negative breast carcinoma (first-line treatment, combination with paclitaxel or nab-paclitaxel)	May 2023
VYXEOS LIPOSOMAL (daunorubicin + cytarabine)	Acute myeloid leukaemia (first-line treatment)	May 2023
XOSPATA (gilteritinib)	Acute myeloid leukaemia (first relapse)	May 2023
LYNPARZA (olaparib)	Advanced carcinoma of the ovary, fallopian tube or primarily peritoneal carcinoma with evidenced BRCA1/2 mutation in patients who responded to chemotherapy regimen containing platinum	May 2023

Name of the medicinal product and active substance	Indication (clinical use)	Reimbursement effective from
SARCLISA (isatuximab)	Treatment of adult patients with relapsing and refractory multiple myeloma, who completed at least two previous therapies, incl. treatment with lenalidomide and a proteasome inhibitor, who progressed while on the last therapy	June 2023
KEYTRUDA (pembrolizumab)	Adjuvant treatment of adults with renal carcinoma with an increased risk of recurrence after nephrectomy or after nephrectomy and metastatic lesion resection	June 2023
TRODELVY (sacituzumab govitecan)	Advanced triple-negative breast carcinoma (in pre-treated patients)	July 2023
KEYTRUDA (pembrolizumab)	Persistent, recurring or metastatic cervical cancer in patients with tumours expressing PD-L1 with CPS ≥ 1	July 2023
BRAFTOVI (encorafenib)	Metastatic colorectal carcinoma in pre-treated patients	August 2023
POLIVY (polatuzumab)	Relapsing/refractory diffuse large B cell lymphoma (combination polatuzumab + bendamustine + rituximab)	August/September 2023
OPDIVO (nivolumab)	Metastatic squamous oesophageal cancer (combination therapy with ipilimumab or fluoropyrimidine and platinum)	August 2023
OPDIVO (nivolumab)	Metastatic adenocarcinoma of the stomach or oesophagus (combination therapy with fluoropyrimidine and platinum)	August 2023
BAVENCIO (avelumab)	Advanced urothelial carcinoma (stable on previous platinum therapy)	November 2023
LUMYKRAS (sotorasib)	Advanced non-small cell lung carcinoma (monotherapy, further treatment lines)	September 2023
TUKYSA (tucatinib)	HER2-positive, locally advanced or metastatic breast cancer after at least 2 previous anti-HER2 treatment regimens (in combination with trastuzumab and capecitabine)	September 2023
LYNPARZA (olaparib)	HER2 – locally advanced or metastatic breast carcinoma with positive BRCA1/2 mutation in patients previously not treated with chemotherapy for metastatic disease	December 2023
KEYTRUDA (pembrolizumab)	Combination therapy with LENVIMA – advanced or recurring endometrial cancer	November 2023
KEYTRUDA (pembrolizumab)	Combined treatment with KISPLYX – advanced kidney carcinoma with moderate or poor prognosis	November 2023
VENCLYXTO (venetoclax)	In combination with azacitidine in AML patients not suitable for intensive chemotherapy	November 2023
LYNPARZA (olaparib)	Advanced HER2-negative breast cancer with BRCA mutation (in patients not treated with chemotherapy for advanced disease)	December 2023
ENHERTU (trastuzumab deruxtecan)	Non-resectable/metastatic HER2-positive breast cancer in patients who completed one or more 2nd- and 3rd-line anti-HER2-based treatment lines	December 2023
Orphan medicinal products		
ONIVYDE PEGYLATED LIPOSOMAL (peg. lip. irinotecan)	Metastatic adenocarcinoma of the pancreas in patients progressing on gemcitabine-based therapy	March 2023
TREPULMIX (treprostinil)	Chronic thromboembolic pulmonary hypertension	April 2023
VYNDAQEL (tafamidis)	Wild-type transthyretin amyloidosis in ATTR-CM	June 2023
EVRYSDI (risdiplam)	Spinal muscular atrophy	September 2023
VOXZOGO (vosoritide)	Achondroplasia (congenital disease with disorders of growth, bone structure, etc.)	August 2023
KOSELUGO (selumetinib)	Stable or progressing Type 1 neurofibromatosis (NF1) in patients of 3 to 18 years of age with inoperable plexiform neurofibroma	September 2023
CRYSVITA (burosumab)	X-linked hypophosphatemia (XLH) in children of at least 1 year of age and in adolescent patients with growing skeleton	October 2023
FINTEPLA (fenfluramine)	Treatment of epileptic seizures associated with Dravet syndrome as add-on therapy to other antiepileptic agents in patients 2 years of age and older	December 2023

VALIDATION OF APPLICATIONS

In 2023, the total of 987 applications for determination, change or revocation of maximum price and/or the conditions and amount of reimbursement of medicinal products/foods for special medical purposes or for abbreviated reimbursement revision were submitted.

Compared to 2022, the number of submitted applications increased by more than 25 %. A significant increase was seen particularly in Q1 2023, when the number of submissions accounted for more than one third of the total number of applications.

The highest proportion (approx. 31 %) represented applications for determination of the amount and conditions of reimbursement / for determination of maximum price and the amount and conditions of reimbursement, on the basis of which administrative procedures conducted as per the provisions of Section 39g(9) of the Act on Public Health Insurance were initiated, followed by submissions applying for revocation of the amount and conditions of reimbursement of medicinal products/foods for special medical purposes (approx. 22 %), applications for change of the amount and conditions of reimbursement of medicinal products/foods for special medical purposes (approx. 17 %); a significant proportion was represented also by submissions applying for change of the maximum price of medicinal products/foods for special medical purposes (approx. 16 %).

In respect of 45 administrative procedures, an invitation to eliminate shortcomings of the application was issued. The primary reason was failure to reimburse the costs of expert activities, often associated with the failure to pay the administrative fee (approx. 60 % of cases).

The total of 24 administrative procedures initiated upon request were suspended by resolution as early as during the control of the application in so-called validation phase. The resolution to suspend administrative procedure due to an obstacle preventing the commencement of the procedure as per the provision of Section 48(1) of the Code of Administrative Procedure (lispensens), which in the previous years represented a major cause preventing the continuation of the conduct of administrative procedures, represented a mere four cases. Other causes of suspending the administrative procedure in the validation phase included, along with the withdrawal of the application by the submitter, an obvious legal inadmissibility of the application due to a non-authorized medicinal product, lack of authorisation on the part of the applicant, impossibility to conduct a procedure concerning the maximum price for medicinal products not subjected to price regulation, and failure to eliminate shortcomings within timeline, etc.

On 01 July 2023, the practice of administrative procedures commenced upon request has changed, specifically in those cases where a notification of administrative procedure commencement is not issued on the application submission date. In these situations, the Institute issues a resolution on the extension of the timeline for the submission of evidence and other proposals as referred to under Section 39g(5) of the Act on Public Health Insurance in order to safeguard an identical timeline for all parties to the procedure.

In 2023, 42 medicinal products entered the reimbursement system on the basis of an application for the adoption of producer price and the amount and conditions of reimbursement from the reimbursed code of an identical medicinal product.

In 2023, reimbursed costs of unperformed expert activities were returned in 30 cases; this was in association with an overpayment of the costs, non-submission of the application, or termination of the administrative procedure as early as in the validation stage.



987

applications for
determination, change or
cancellation of maximum
price and/or the amount
and conditions of
reimbursement of medicinal
products/foods for special
medical purposes or for
abbreviated reimbursement
revision

Tab. 37 Activities in the area of validation of applications for determination/change/revocation of maximum prices and/or reimbursement amounts and conditions, for abbreviated revision of maximum price or reimbursement system – 2023

Period	Submitted applications	Suspended due to defective submission and application shortcomings	Discontinued in the validation phase
January	129	4	2
February	147	2	8
March	74	6	2
April	56	1	0
May	62	4	0
June	78	5	2
July	64	3	0
August	101	3	2
September	68	2	2
October	71	4	3
November	74	4	1
December	63	7	2
Total	987	45	24

INDIVIDUALLY PREPARED MEDICINAL PRODUCTS (IPLP) AND OTHER PRODUCTS FOR WHICH REIMBURSEMENT IS DETERMINED BY MEANS OF GENERAL MEASURES

Individually prepared medicinal products (hereinafter referred to as “IPLPs”) are subjected to the conditions of material price regulation (hereinafter referred to as “VUC”) set forth by the Price Regulation (effective for 2023). This regulation applies to the following groups of medicinal products: individually prepared radiopharmaceuticals (hereinafter referred to as “RF”), individually produced transfusion products and autologous transfusion products (hereinafter referred to as “TP”), parenteral nutrition products for home therapy (hereinafter referred to as “DPV”), individually prepared medicinal products in pharmaceutical care facilities – magistral formulas (hereinafter referred to as “MAG”), and advanced therapy products (hereinafter referred to as “ATP”), to which an exemption allowing for the use of a non-authorized advanced therapy product in a healthcare facility providing inpatient care applies.

The conditions governing the stipulation of the amount and conditions of reimbursement by means of a general measure (hereinafter referred to as the “OOP”) are set forth by the provisions of Section 15(5) of the Act on Public Health Insurance. The drafting of an OOP and the method of its publication is then governed by the provisions of Sections 171-174 of Act No 500/2004 Coll., the Code of Administrative Procedure.

GENERAL MEASURES

In the course of 2023, seven OOP procedures in total were initiated and regularly completed.

As of 01 February 2023, OOP 01-23 for RF was issued; as of 01 March 2023, the following OOPs were issued: OOP 02-23 for DPV and OOP 03-23 for TP. All of these OOPs were issued in compliance with effective legislation. OOP 01-23 RF and OOP 03-23 TP reflected the change in the minute performance rate in compliance with Decree No 313/2022 Coll., amending Decree No 134/1998 Coll., setting forth the list of healthcare procedures and their point values, as amended, with effect from 01 January 2023. The overhead minute rate was increased from the original value of 3.38 points per minute of time performance to the new value of 3.51 points. In compliance with Decree No 315/2022 Coll., setting point values, reimbursement amounts for reimbursed services, and regulatory restrictions for 2023, the point value was increased from the original amount of 1.08 CZK to the new amount of 1.11 CZK per point. In OOP 01-23 RF, the Institute included a new code of radiopharmaceutical 18F-Fluorodopa (code 0002115, LP IASOdopa) within the scope of a specific therapeutic programme on the IPLP List and, at the same time, extended the list of indication neurological centre sites for amyloid plaque imaging in the brain of AD patients by three new sites: Clinic of Neurology of University Hospital Brno, Department of Neurology of Hospital České Budějovice, and Clinic of Neurology of the 3rd Medical Faculty of Charles University and Thomayer's University Hospital.

As of 01 May 2023, OOP 04-23 for TB came into effect; in this OOP, the Institute included codes 7112602, 7043133, 7043132, 7043119, and 7115674 on the IPLP List and, at the same time, excluded the following two codes therefrom: 7112970 and 7112971.

In the RF group, OOP 05-23 was issued with effect from 01 June 2023; in this OOP, the Institute reflected price source materials and the €/CZK exchange rate as per the materials published by the Czech National Bank for Q1 2023, and, furthermore, it included radiopharmaceutical 68Ga-gozetotid (code RF 0002116, LP LOCAMETZ), which, to date, had been used within the scope of a specific therapeutic programme, on the IPLP List.

On 01 July 2023, supplementary general measure OOP 06-23 for the RF group took effect; by means of this OOP, the Institute included radiopharmaceutical 18F-fluorestradiol (code 0002117, LP 18F-FES) within the scope of a specific therapeutic programme on the IPLP List with effect until 31 January 2025.

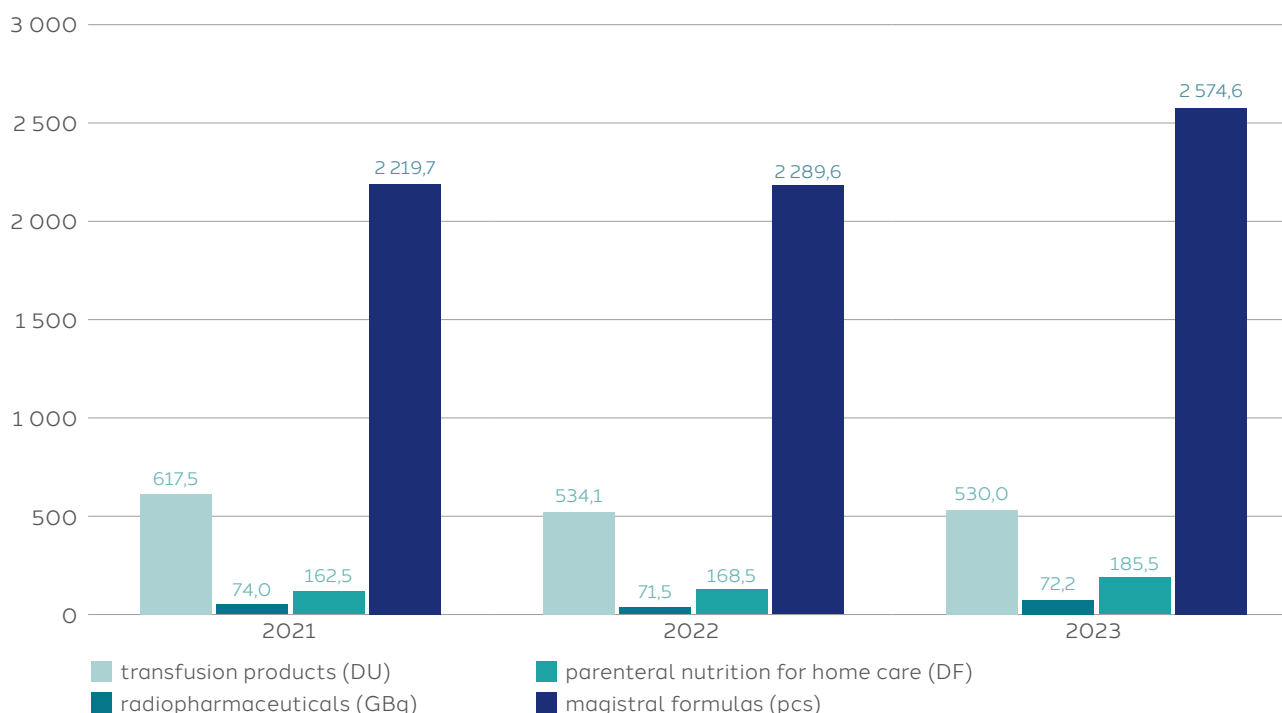
The latest regularly issued measure is OOP 07-23 for the TB group, in which the Institute reflected received initiatives for change of conditions and amount of reimbursement.

CONSUMPTION AND COSTS OF INDIVIDUALLY PREPARED MEDICINAL PRODUCTS INCURRED BY THE PUBLIC HEALTH INSURANCE SYSTEM

The consumption of individually prepared medicinal products is evaluated in defined units (hereinafter referred to as "DU") by individual IPLP subgroups.

In case of the TP subgroup, in 2023, the consumption decreased, while in respect of the other subgroups, i.e., RF, DPV and MAG, consumption slightly increased in comparison to the previous period. The values specified for the period of 2022 in the 2022 annual report were updated as of 12 January 2024. Data for the consumption of individually prepared medicinal products in 2023 are available as at 01 October 2023, due to the delay caused by the hand-over of statistical data by health insurance companies, and hence incomplete data from the Institute of Health Information and Statistics of the Czech Republic (hereinafter referred to as "ÚZIS"). For this reason, Q4 2023 assumes the form of an estimate of the anticipated expenses and future cost prediction using the least squares method. An overview of the consumption of individually prepared medicinal products in DU for the period of 2021 to 2023 is shown in Figure 21.

Fig. 21 Overview of consumption of individually prepared medicinal products in the period of 2021-2023 in thous. DU



In 2023, expenses incurred for individual IPLP subgroups were influenced by change to the minute overhead rate per minute of time performance from the original value of 3.38 points to the value of 3.51 points in compliance with Decree No 313/2022 Coll., amending Decree No 134/1998 Coll., setting forth the list of healthcare procedures and their point values, as amended, with effect from 01 January 2023. In compliance with Decree No 315/2022 Coll., setting point values, reimbursement amounts for reimbursed services, and regulatory restrictions for 2023, the point value was increased from the original amount of 1.08 CZK to the new amount of 1.11 CZK per point.

In 2023, new items from the RF group were placed on the IPLP List. The diagnostic radiopharmaceutical 18F-Fluordopa (code 0002115) in a specific therapeutic programme was included with effect from 01 February 2023 until 31 August 2024; the code is reported with procedures 47357 (hybrid MRI-PET assessment) and 47355 (hybrid CT-PET assessment). With effect from 01 June, radiopharmaceutical 68Ga-gozetotid inj. (code 0002116) was included in the IPLP List in association with a specific therapeutic programme and the code is reported with procedures 47357 and 47355. With effect from 01 July 2023, a new code of radiopharmaceutical 18F-fluorestradiol (code 0002117) was included in the RF group; it is reported with procedure 47 197 (glomerular filtration rate measured by blood sample radioactivity).

The distribution of expenses in the IPLP group in 2023 by individual subgroups is illustrated by Fig. 22.

Fig. 22 Distribution of total expenses in the IPLP group in 2023

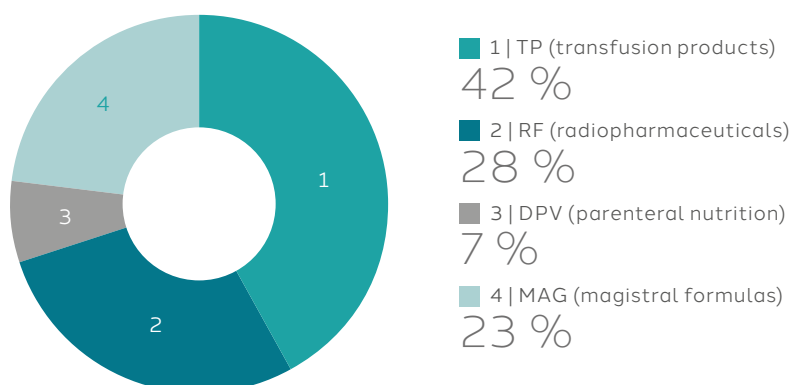
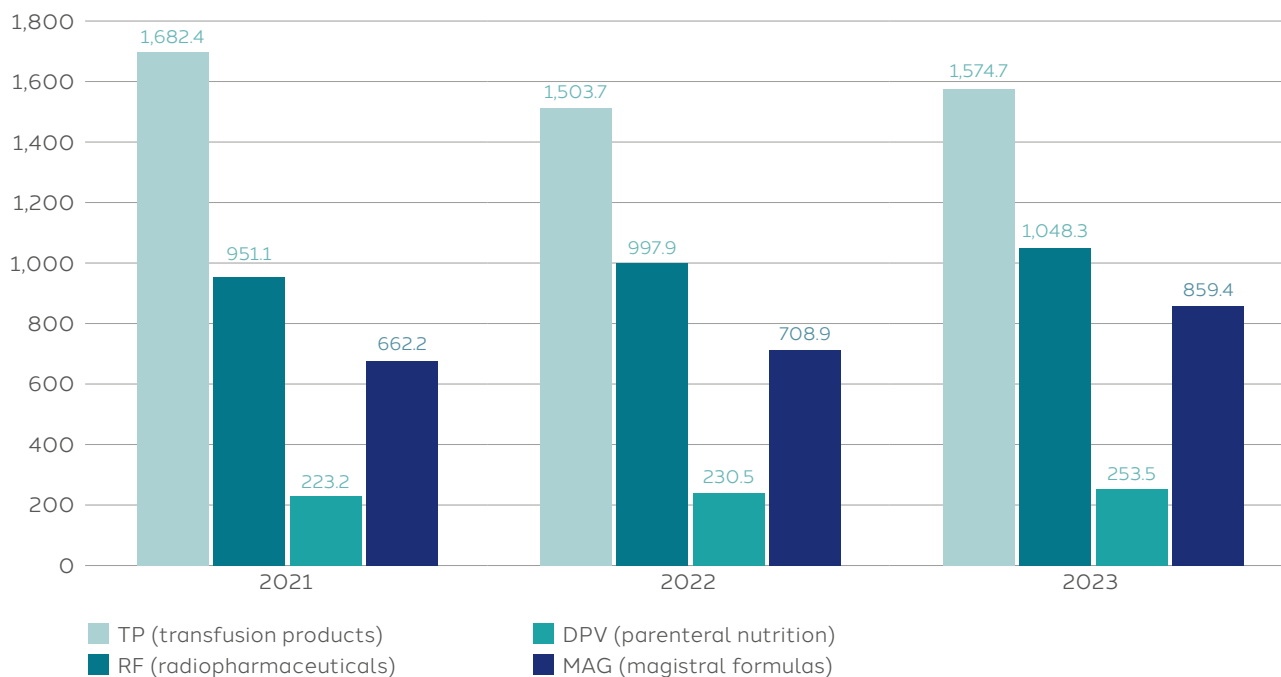


Fig. 23 illustrates also a comparison of expenses in the period of 2021-2023 for individual IPLP subgroups. An increase in the expenses incurred by the public health insurance funds was seen in the DPV, RF, and MAG subgroups; only the TP subgroup exhibited a decrease compared to 2022, which corresponds also to the lower consumption in this subgroup.

Fig. 23 Comparison of expenses by IPLP groups in the period of 2021-2023 in mil. CZK



The total expenses for the IPLP group reimbursed from public health insurance funds in 2022 amounted to 3,704.4 mil. CZK; in 2023 this amount was 3,735.9 mil. CZK, which represents an increase of expenses by 31.5 mil. CZK, i.e., by 0.85 % compared to 2022.



MEDICAL DEVICE REGULATION SECTION

On the basis of systemisation effective as of 01 January 2023, the Medical Device Regulation Section was re-established; it constitutes of the Medical Device Market Surveillance Department, Expert Activity Department, and three more units that report directly to the Section Director. In the course of the year, workforce capacities were allocated primarily to the set-up of processes of the newly established organisational units, field education in expert issues, and the preparation of a new Medical Device Information System.

At the same time, the employees were actively involved in the implementation of the newly effective European and national legislation governing the sphere of medical devices and in the set-up of processes implied by the Act on Consumer Protection and by the Act on Advertising Regulation. Within the scope of their membership in working groups established under the European Commission, the employees of the Medical Device Regulation Section actively participated in the preparation of new recommendatory MDCG guidance. In association with enhancing the expert standard of the Section, the employees of the Vigilance Unit and of the Control Unit became involved in projects under the auspices of the EU4Health programme, launched by the European Commission with the objective to safeguard the implementation of processes implied by the European regulations in professional practice.

4.15 MEDICAL DEVICE MARKET SURVEILLANCE DEPARTMENT

4.15.1 CONTROL UNIT (KON)

The Institute's surveillance activities over persons handling medical devices was, in 2023, governed by Regulation (EU) 2017/745 of the European Parliament and of the Council on medical devices (hereinafter referred to as the "MDR"), Regulation (EU) 2017/746 of the European Parliament and of the Council on in vitro diagnostic medical devices (hereinafter referred to as the "IVDR"), and Act No 375/2022 Coll., which covers the area of medical devices on the national level (hereinafter referred to as "Act No 375/2022 Coll."). The regulated persons include healthcare service providers in the sphere of medical device use as well as medical device manufacturers, importers, distributors, persons servicing medical devices, and persons dispensing medical devices. This surveillance activity includes also the agenda of assessments of proper placement of medical devices on the market and newly also surveillance as part of consumer protection in the area of medical devices.

The objective of both scheduled and ad hoc inspections conducted by the Institute is to ensure that medical devices supplied onto the market in the Czech Republic were safe and functional and that health care were provided using appropriate, safe, and effective medical devices in a manner preventing any damage to the health of users or patients in the proper use of the devices for their intended purposes. In 2023, the inspectors of the Control Unit conducted the total of 189 inspections, of which 63 were inspections at providers of healthcare services (both state and non-state healthcare facilities) and 126 were inspections at medical device manufacturers, importers, distributors, persons dispensing medical devices, and in servicing organisations. The tables below provide more detailed statistical data on the total number of inspected persons.

Sixty-three inspections were carried out at providers of healthcare services, within the scope of which documents certifying compliance with the conditions for the medical device use in the provision of health care were checked. Furthermore, 75 inspections were conducted as part of market surveillance, in which compliance with the requirements governing medical device supply to the market was checked.

The Control Unit forwarded the total of 60 motions for further procedure initiation to the Medical Device Legal Support Unit.

189
conducted
inspections

Tab. 38 Overview of inspections conducted by the Control Unit

Number of inspections	189
Number of inspections instigated by a motion (of the total number of inspections)	28
Number of inspected medical devices	662*
Number of motions forwarded to the Medical Device Legal Support Unit (proposals for administrative procedure initiation)	60

* Due to the fact that not all of the inspections have been concluded to date, this is a qualified estimate.

Tab. 39 Rating of inspections conducted by the Control Unit

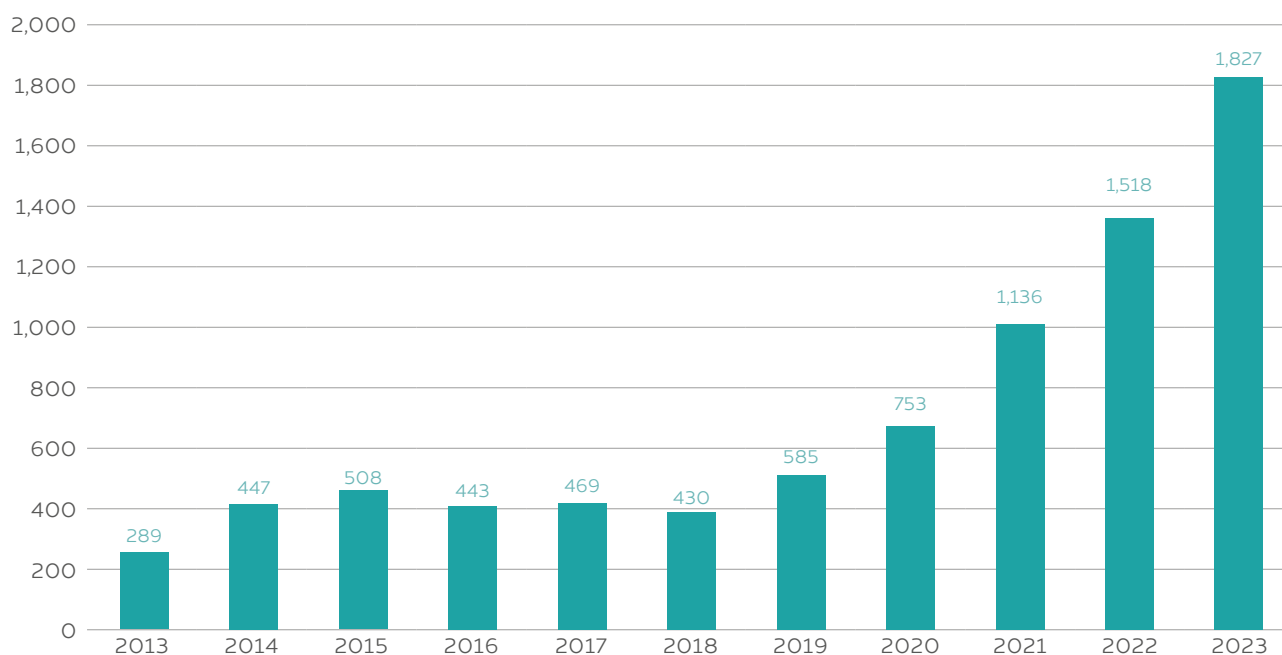
Entity	Number of inspections	Number of inspections with shortcomings
POS – providers	63	39
CEN – price control	27	1
DIS/DOV – distributors and importers	33	17
SER – persons servicing medical devices	25	3
VYD – persons dispensing medical devices	3	1
VYR – manufacturers	22	1
OS – consumer protection	16	0

* Due to the fact that not all of the inspections have been concluded to date, this is a qualified estimate.

4.15.2 MEDICAL DEVICE VIGILANCE UNIT (VIG)

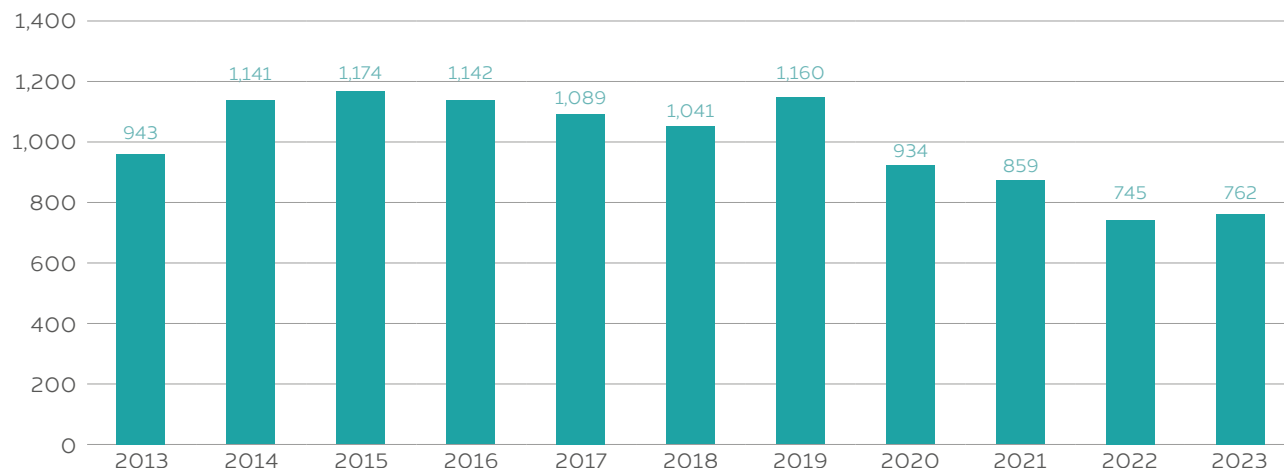
The coming into force of Act No 375/2022 Coll. brought several changes also to the vigilance area. One of the major changes was the cancellation of the obligation to report suspected serious incidents for providers and distributors. Nevertheless, reports of suspected serious incidents from distributors, persons servicing medical devices, and healthcare service providers are welcome and supported as they help ensure the safety of patients and medical device users.

On the basis of effective legislation of the Czech Republic, 1,827 serious incidents considered associated with the use of medical devices in the provision of healthcare services within the territory of the Czech Republic were reported to the Institute. In all of the cases, monitoring was initiated. The development of the number of serious incident reports in 2013–2023 is illustrated in more detail by Figure 24.

Fig. 24 Overview of notified incidents/serious incidents in the period of 2013–2023

The total number of received reports on safety corrective actions regarding medical devices from competent national authorities, manufacturers or their authorised representatives, distributors or importers, as applicable, amounted to 762. Of the total number of received reports, 431 concerned medical devices made available on the Czech market. The development of the number of reports on safety corrective actions in 2013–2023 is illustrated by Figure 25.

Fig. 25 Overview of safety corrective actions for medical devices adopted in 2013–2023



In 2023, 404 communications to medical device users – Field Safety Notices (FSN) were published via the Registry of Medical Devices (RZPRO). FSNs are disseminated by the manufacturer, authorised representative, or distributor in association with an adopted Field Safety Corrective Action (FSCA).

As part of monitoring of a safety corrective action adopted by a Czech manufacturer, 16 reports for competent national authorities (NCAR), the European Commission, and the competent bodies of EU Member States were issued and disseminated via the EUDAMED 2 database.

In 2023, the inspectors of the Medical Device Vigilance Unit participated in meetings of the PMSV (Post Market Surveillance and Vigilance) Working Group established by the Medical Device Coordination Group (MDCG) of the European Commission; a working group of the JAMS 2.0 project (signal detection and vigilance); and teleconferences focused upon exchange of information among Member States of the European Union concerning currently addressed vigilance cases and determination of further course of action to be taken in their solution.

4.15.3 MEDICAL DEVICE ADVERTISING SURVEILLANCE UNIT (DRZP)

The Institute's surveillance activities in the area of regulation of advertising for medical devices and in vitro diagnostic medical devices became part of the Institute's powers on 26 May 2021 as referred to under Section 7(b) of Act No 40/1995 Coll., on Advertising Regulation and on Amendments to Act No 468/1991 Coll., on the Operation of Radio and Television Broadcasting, as amended (hereinafter referred to as the "Act on Advertising Regulation"). In January 2023, a new unit which has been gradually staffed was established on the basis of systemisation. In that period, the Institute applied amendments to legal regulations with influence upon the Institute's surveillance activities in the area of advertising for medical devices and in vitro diagnostic medical devices to its practice.

In the reported period, the Unit carried out inspection activities based on received motions at entities defined by the Act on Advertising Regulation as well as controls of documentation of the investigated medical devices and investigations of persons as per Act No 375/2022 Coll., on Medical Devices and in Vitro Diagnostic Medical Devices in association with the investigated medical devices. Furthermore, the Unit was educating the general public, experts, and employees of healthcare service providers by means of information, recommendatory guidance published on the Institute's website, and lectures presented during seminars. As part of ongoing evaluation of the surveillance activities in the sphere of regulation of advertising for medical devices with regard to impact upon the market, the Medical Device Advertising Surveillance Unit drafted a proposed amendment to the Act on Advertising Regulation. A quantitative overview of the Unit's activities is provided in Table 40 below.

Tab. 40 Overview of DRZP Unit activities in 2023

Subject	No. of inspections
Number of motions external/internal	25/4
Number of investigated communication media	66
Number of investigated entities	81
Number of investigated medical devices	37
Number of opinions	11
Number of consultations	4
Number of motions forwarded to other authorities	9
Number of motions forwarded to the Medical Device Legal Support Unit for administrative procedure initiation	0
Number of recommendatory guidelines and information published on the website – updates arising from legislative amendments	7
Number of seminars	3

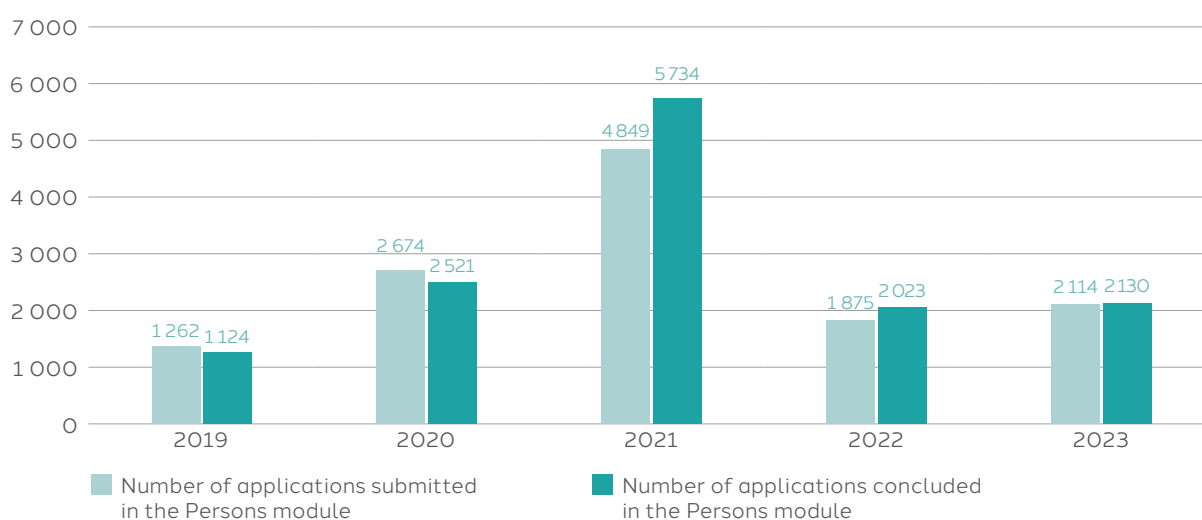
4.16 EXPERT ACTIVITY DEPARTMENT (OEČ)

4.16.1 REGISTRATION AND NOTIFICATION UNIT (RAN)

The Registration and Notification Unit (RAN) focuses upon registration of persons and associated activities, on medical device notifications and associated activities, and the issuance of certificates of free sale in compliance with Act No 375/2022 Coll. and with the MDR and IVDR.

REGISTRATION OF PERSONS HANDLING MEDICAL DEVICES

In total, during the past year, the RAN Unit confirmed or asked for amendment of 2,613 notifications in the Persons module. In 2023, 2,114 notifications were submitted and 2,130 were completed. A comparison of submitted and concluded notifications (completed procedures governed by the Code of Administrative Procedure – Act No 500/2004 Coll.) is illustrated by Figure 26.

Fig. 26 Ratio of submitted and concluded notifications in the Persons module

• Notification of a person

In 2023, the RAN Unit concluded 360 submitted notifications of persons.

• Notification of an activity

In 2023, 113 notifications regarding activities in general were concluded – these concerned activities of manufacturers, distributors, importers, persons servicing medical devices, authorised representatives, and clinical investigation sponsors.

- **Notifications of changes to data**

In total, 1,414 notifications of changes to data of a person were processed and concluded.

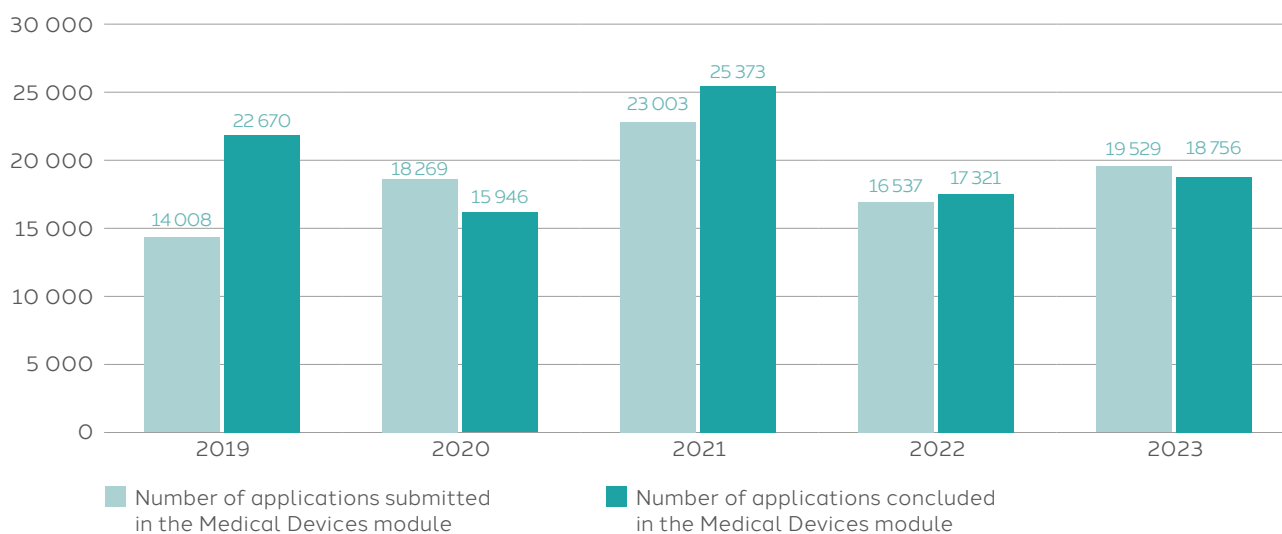
- **Notification of deletion of a person**

In 2023, the RAN Unit processed all of the 32 notifications of deletion of a person.

MEDICAL DEVICE NOTIFICATIONS

In total, the RAN Unit issued 18,954 documents, incl. invitations for amendment, in the Medical Devices module in the last year. In 2023, 19,529 applications were submitted in the Medical Devices module. A comparison of submitted and concluded applications (completed procedures governed by Act No 500/2004 Coll., the Code of Administrative Procedure) is illustrated by Figure 27.

Fig. 27 Ratio of submitted and concluded applications



Note: The chart does not illustrate data concerning certificates of free sale.

- **Applications for medical device notification**

In 2023, the Unit concluded 5,886 administrative procedures regarding applications for medical device notification.

- **Applications for medical device notification renewal**

In total, 4,648 administrative procedures regarding applications for medical device notification renewal were concluded.

- **Applications for change to medical device data**

In total, 7,245 applications for change to medical device data were processed and concluded.

- **Applications for medical device deletion**

The Unit concluded 977 applications for medical device deletion.

CERTIFICATES OF FREE SALE

- **Applications for certificate of free sale issuance**

In 2023, 200 applications were submitted, of which 185 were concluded. Furthermore, six applications from 2022 were concluded.

4.16.2 EXPERT OPINION UNIT (OPC)

Expert opinions are issued on the basis of received requests for the issuance of an expert opinion from external entities as well as on the basis of motions from other units of the Institute and in response to filed applications for medical device notification in the RZPRO. In 2023, the Expert Opinion Unit issued 70 expert opinions concerning the nature of a product or medical device classification. In the conduct of the aforementioned activities, when processing opinions regarding product nature or medical device classification, the Unit cooperates also with the Pharmaceuticals Advertising Surveillance Unit. Of the aforementioned number, 54 opinions were issued on the basis of an external request and 16 opinions on the basis of requests from other units of the Institute.

4.16.3 MEDICAL DEVICE CLINICAL TRIALS UNIT (KHZP)

Pursuant to the obligation imposed upon the sponsors of clinical investigations on medical devices (hereinafter referred to as "CIMD") by Act No 375/2022 Coll. and the MDR, 43 individual applications for authorisation of CIMD conduct and 39 individual applications for variations to CIMD conditions were submitted to the Institute in 2023 via the RZPRO Clinical Investigations module. The year-to-year increase in the number of applications for clinical investigations was 34 %.

In compliance with the newly implemented IVDR, 18 applications for authorisation of the conduct of a performance study, eight applications for authorisation of a modification of a performance study, and three notifications of the conduct of a performance study were submitted. The number of applications for performance studies increased by 350 % compared to the previous year.

Thirty favourable decisions authorising the conduct of clinical investigation were issued; eight procedures were stopped; and one application was declined.

Thirty-six decisions authorising modifications of clinical investigations were issued; one procedure was stopped.

Nine authorisations of the conduct of a performance study were issued, five procedures were stopped and, at the same time, three notifications of the conduct of a performance study were assessed.

Eight decisions authorising modifications of the conditions of a performance study were issued.

For ongoing clinical trials, 166 individual serious adverse event (SAE) reports were filed via the Clinical Investigation module of the RZPRO registry.

Within the scope of international cooperation in the sphere of clinical evaluations, in 2023, a representative of the Medical Device Clinical Trials Unit participated in regular meetings of the medical device expert WG on Clinical Investigation and Evaluation of the European Commission. The meetings focused upon the development of implementing regulations and the EUDAMED database in association with the MDR and, furthermore, upon exchange of information among the EU Member States. At the same time, intensive international cooperation in the implementation of the IVDR has been ongoing.

Tab. 41 Number of applications for clinical investigation authorisation

	2022	2023
Number of submitted applications for clinical investigation authorisation in RZPRO	32	43
Number of authorised clinical investigations	23	30
Number of suspended clinical investigations	8	8
Number of declined clinical investigations	1	1

Tab. 42 Number of applications for authorisation of clinical investigation modification

	2022	2023
Number of submitted applications for clinical investigation modification in RZPRO	40	39
Number of authorised clinical investigation modifications	39	36
Number of suspended clinical investigation modifications	2	1
Number of declined clinical investigation modifications	0	0

Tab. 43 Number of applications for performance study authorisation

	2022	2023
Number of submitted applications for performance study authorisation in RZPRO	4	18
Number of authorised performance studies	4	9
Number of suspended performance studies	0	5
Number of declined performance studies	0	0
Number of notifications of performance study conduct	1	3

Tab. 44 Number of applications for authorisation of performance study modification

	2022	2023
Number of submitted applications for performance study modification in RZPRO	0	8
Number of authorised performance study modifications	0	8
Number of suspended performance study modifications	0	0
Number of declined performance study modifications	0	0

4.17 LEGAL SUPPORT UNIT OF THE MEDICAL DEVICE REGULATION SECTION (PPZ)

Decision-Making in the Area of Product Nature Determination and Proper Classification of the IVDs; Decision-Making on Whether a Product is Governed by MDR/IVDR

In compliance with Act No 268/2014 Coll., on Medical Devices, effective until 25 May 2021 (hereinafter referred to as "Act No 268/2014 Coll."), since 2015, the Institute, as the first-instance administrative authority, has gradually become involved in the agenda of decision-making in the area of product nature determination and proper classification of medical devices. Since the effective date of the Act on Medical Devices and the coming into existence of the IVD Act, i.e., since 26 May 2021, this agenda has been split into decision-making about whether a product is governed by the MDR, and decision-making on the determination of the nature of an IVD device and its proper classification.

Until 25 May 2021, the following applied: if the Institute, in its assessment of applications for medical device notification, identified any justified doubt as to the proper risk class classification of the assessed medical device, or doubts as to whether the product met the definition of a medical device, it commenced an administrative procedure with the applicant. Since 26 May 2021, the Institute commences administrative procedures where, in its assessment of the application for medical device notification, it identifies any justified doubt as to whether the assessed product is governed by the MDR and where it identifies any justified doubt as to the proper risk class classification of the assessed IVD or doubt as to whether the product meets the IVD definition.

Since 22 December 2022, i.e., since the effective date of Act No 375/2022 Coll., which has set forth uniform conditions governing general medical devices and IVD devices, the Institute has had the power to commence only procedures to determine whether a product is governed by the MDR or IVDR. Furthermore, the power to conduct administrative procedure concerning product classification has ceased to exist.

In 2023, twelve proposals for the commencement of an administrative procedure on whether a product was governed by the MDR/IVDR, were forwarded to the Medical Device Legal Support Unit.

In 2023, the Institute commenced three ex-officio administrative procedures on whether a product was governed by the MDR/IVDR.

In 2023, the Institute received two applications for a decision on whether a product was governed by the MDR/IVDR.

In 2023, six decisions stating that a product was governed by the MDR/IVDR were issued.

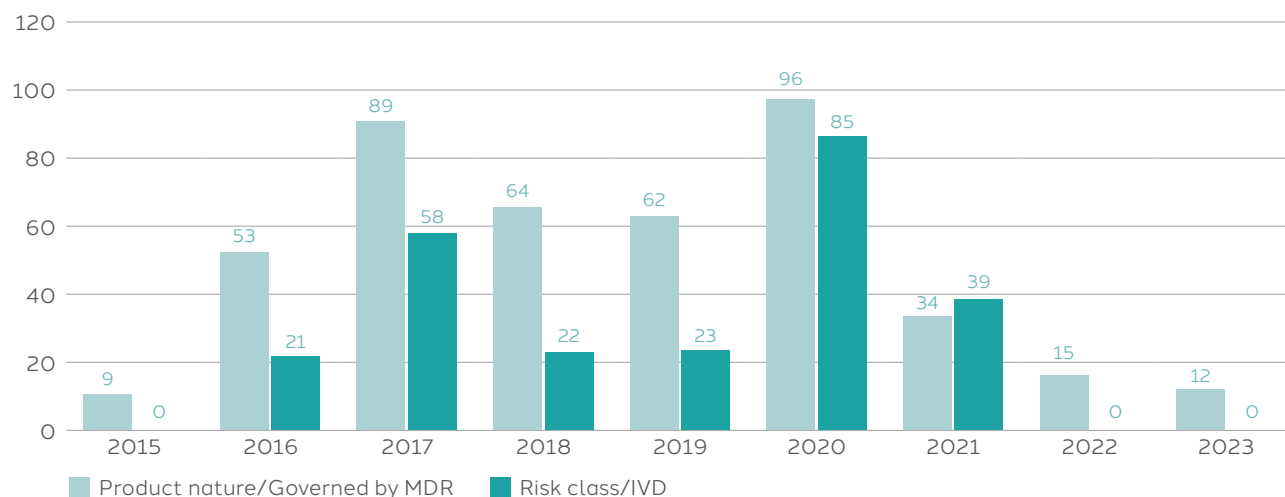
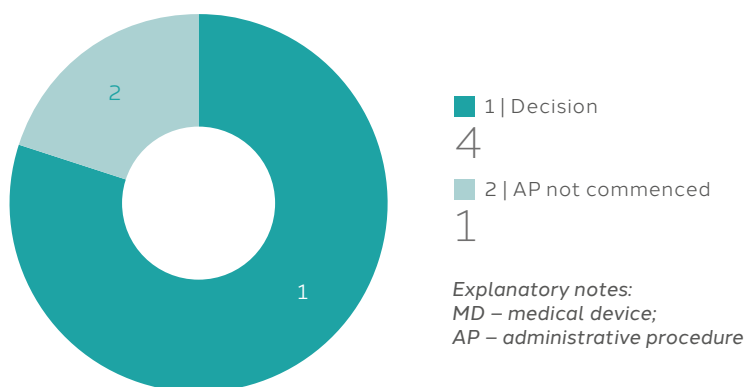
Fig. 28 Overview of forwarded proposals for the commencement of ex-officio administrative procedures in 2015–2023

Fig. 29 Overview of decisions issued in 2023



OFFENCES

The Institute, as the first-instance administrative authority, commences administrative procedures regarding offences in case a breach of Act No 375/2022 Coll., particularly with reference to the inspection activities carried out at manufacturers, providers of healthcare services, distributors, authorised representatives, persons servicing, dispensing or prescribing medical devices, importers, clinical investigation sponsors and investigators, both for medical devices and for IVD devices.

In 2023, the Institute imposed fines for breach of the Act on Medical Devices amounting to the total of 3,267,500 CZK. The highest proportion of fines imposed in 2023 for the breach of the Act on Medical Devices were fines imposed upon medical device distributors and healthcare service providers.

In 2023, 34 orders and twelve decisions were issued. Furthermore, the Institute issued one resolution on the termination of administrative procedures regarding an offence.

In recent years, the Medical Device Legal Support Unit has observed the highest increase of offences in the area of distribution, specifically in the area of Good Storage and Transportation Practice, where breaches of Article 14 of the MDR/IVDR occur, and hence offences referred to under Section 58(g) of Act No 375/2022 Coll. are committed; with the coming into effect of this Act, the area of offences was extended compared to the previous legislation, and, moreover, with the coming into effect of the MDR and IVDR, the maximum amounts of fines became higher.

Tab. 45 Overview of forwarded motions for administrative procedure commencement in 2015–2023

Overview for year:	2015	2016	2017	2018	2019	2020	2021	2022	2023
Clinical Trials Unit	–	3	1	–	–	–	4	–	–
Vigilance Unit	2	47	79	88	185	65	21	4	5
Control Unit	22	69	64	20*	–*	116	71	58	60
Medical Device Notification Unit	–	–	–	–	6	–	1	1	–
Total	24	119	144	108	191	181	97	63	65

* In the period from 01 August 2018 to 31 December 2019, surveillance over the medical device market was the responsibility of SÚKL's Surveillance Section.

APPEALS

In 2023, the Medical Device Legal Support Unit received the total of nine appeals to be addressed. In compliance with Section 88 of Act No 500/2004 Coll., the Code of Administrative Procedure, as amended, these appeals were forwarded via the Institute to the Ministry of Health of the Czech Republic as the appellate body.

Tab. 46 Overview of appeals forwarded to the Ministry of Health of the Czech Republic in 2023

Unit	No. of appeals	Returned for re-consideration	Granted	Declined	Withdrawn by applicant	Terminated administrative procedures
Legal Support Unit	9	–	6*	–	–	–

* Number of decisions of the Ministry of Health of the Czech Republic that were sent back to the Institute.

4.18 MEDICAL DEVICE REIMBURSEMENT UNIT (UZP)

The reimbursement regulation has been based on a notification principle. Decisions on the inclusion of a specific medical device into a particular reimbursement group are primarily not taken via administrative procedures. Manufacturers themselves notify the Institute of the inclusion of their medical device in a reimbursement group. It is possible to notify of a new inclusion, change or removal of a medical device from the reimbursement group, which influences its reimbursement from the public health insurance funds and out-of-pocket payment for the patient. In case a notification of a medical device inclusion in an improper reimbursement group is received, the Institute initiates an administrative procedure regarding non-inclusion in the reimbursement group or removal from a reimbursement group. Notifications of medical device reimbursements may be lodged at any time, without any time limitations. Reimbursement limits for individual reimbursement groups are stipulated by the Act on Public Health Insurance.

An important part of the Medical Device Reimbursement Unit's operation is the agenda of the year-to-year producer price increase, which is implemented in compliance with Price Regulation 1/2023/OLZP of 30 November 2023, amending Price Regulation 1/2019/CAU of 22 May 2019, regulating medical device prices, and Price Regulation 2/2022/OLZP of the Ministry of Health of 07 January 2022, amending Price Regulation 1/2019/CAU of 22 May 2019, regulating medical device prices.

The main output from the Medical Device Reimbursement Unit's operation is, in particular, the process of issuing the Medical Device Reimbursement and Price List for medical devices reimbursed on order (hereinafter referred to as the "Medical Device Price List"), which is the main index for the realisation of reimbursements for medical devices reimbursed on order from the public health insurance funds. As at 31 December 2023, the Medical Device Price List contained 13,103 items in total.

Tab. 46 Medical device reimbursement notifications in 2023

Reimbursement notifications	Number
Total submissions	7,216
New notifications	1,024
Change notifications	674
Removal notifications	595
Year-to-year producer price increases	4,923

Tab. 47 Overview of administrative procedures

Administrative procedures	Number
Commenced	4
Concluded	0

Tab. 48 Medical Device Price List

Medical Device Price List	Number
Total	13,103
Included	940
Excluded	890

4.19 SYSTEMS UNIT (SYS)

In the course of 2023, the Systems Unit focused primarily upon the development of the new Medical Device Information System (ISZP), implied by the currently effective legislation governing medicinal products. At the same time, modifications of the Registry of Medical Devices (RZPRO) arising from the partial transfer of some agendas to the ISZP system were being prepared. Due to delays in the development of the European database of medical devices (EUDAMED) on the part of the European Commission, to which the national ISZP system was to be connected, analyses resulting in an alternative set-up for the fulfilment of some national legislative obligations were carried out. The Systems Unit was involved in the organisation of numerous seminars of the Medical Device Regulation Section in order to safeguard proactive education for professionals and it participated in meetings of working groups established by the Medical Device Coordination Group (MDCG).

4.20 COORDINATION OF EXPERT ACTIVITIES

As part of systemisation, the Expert Activity Coordination Unit (hereinafter referred to as “KOČ”) was established in 2019. KOČ is an organisational unit reporting directly to SÚKL’s Director and it represents the Institute in activities stipulated by Act No 378/2007 Coll., on Pharmaceuticals and on Amendments to Some Related Acts (Act on Pharmaceuticals), in areas safeguarding availability of medicinal products for patients in the Czech Republic.

As stipulated by the provision of Section 11 of the Act on Pharmaceuticals, the primary role in creating conditions allowing to safeguard the availability of medicinal products important for the provision of healthcare services is that of the Ministry of Health (hereinafter referred to as the “Czech MoH”) and the Institute is obliged by the Act to provide maximum cooperation in the analysis and implementation of individual procedures. For this reason, in the beginning of 2019, the Expert Activity Coordination Unit, in cooperation with the Pharmaceuticals and Medical Devices Department of the Czech MoH, prepared a methodological guideline on addressing the availability of pharmaceuticals in document “ENSURING THE AVAILABILITY OF MEDICINAL PRODUCTS – COMMON MoH AND SÚKL METHODOLOGY”.

4.21 ACTIVITIES OF THE EXPERT ACTIVITY COORDINATION UNIT IN RESPECT OF SAFEGUARDING THE AVAILABILITY OF MEDICINAL PRODUCTS

1. Market Report Administration – reports from marketing authorisation holders (hereinafter referred to as “MAHs”) on the medicinal product placement on the market and suspension or termination of supplies thereof referred to under Section 33(2) of the Act on Pharmaceuticals

- Marketing authorisation holders are obliged to report to the Institute the placement of a medicinal product onto the market in the Czech Republic as well as its suspended, renewed, or terminated supplies, within timelines and by ways stipulated by the Act and Decree. The reporting is done via an electronic form available from the Institute’s website. Data from these reports are copied to the database of medicinal products and presented on the Institute’s website in the “Medicinal Product Supply Disruptions” section.
- The task of KOČ assessors is to evaluate the reported suspensions or terminations of supplies in view of ensuring the availability of medicinal products important for the provision of healthcare services. The Institute always assesses the replaceability of each medicinal product individually (with regard to the characteristic properties of the medicinal product, its current consumption and duration of supply disruption). The KOČ employee always allocates the replacement medicinal product or evaluation of its replaceability with another therapy to the individual reports. Information on irreplaceable or difficult-to-replace medicinal products is entered in a table shared by the Institute and the Ministry of Health of the Czech Republic. The table also specifies individual steps addressing the shortage of the respective medicinal product. Information on unavailability of critical medicinal products is sent to the Czech Medical Association of Jan Evangelista Purkyně and to concerned professional societies. The method of addressing the shortage of an irreplaceable medicinal product is chosen with a view to the duration of the supply disruption, stock level, importance of the medicinal product in the provision of health care, and cause of the medicinal product shortage.
- KOČ employees, moreover, are in charge of entries into the database of medicinal products in case the electronic report functionality fails, when changes to the reports are notified, or in case the MAH report is submitted through a channel other than electronic report form, and they answer questions on availability and check for availability with the MAHs in case reporting discrepancies arise.

1.1 Reporting Statistics for the Mandatory Market Reports in 2023:

- Suspended supplies: 4,145 reports (in 80 % of which supplies have already been renewed);
- Terminated supplies: 1,044 reports;
- Renewed supplies: 2,900 reports;
- Initiated supplies: 884 reports;
- Irreplaceable medicinal products: 170.

2. Addressing Medicinal Product Unavailability

2.1 Addressing Medicinal Product Shortages within the Institute

- Checking/addressing the current situation with medicinal products whose shortage has been caused by reasons constituting procedural or marketing authorisation reasons or quality defects.

2.2 Allowing for the Placement of a Foreign-Language Batch of a Medicinal Product on the Market

- Pursuant to Section 38 of the Act on Pharmaceuticals, the Institute, having regard to public health protection, may allow for the omission of certain data on the labelling and in the package leaflet of the concerned medicinal product; the Institute may also allow for the labelling and package leaflet to be partially or fully in a language other than the Czech.
- When assessing applications for the placement of individual batches of a medicinal product the labelling of which is in a language other than the Czech on the market, the KOČ employee abides by the particulars set forth by Section 3(6)(b) of Decree No 228/2008 Coll.
- In 2023, the Institute issued the total of 226 decisions allowing for the placement of a foreign-language batch on the market, which is a 20-% increase compared to the previous year.

2.3 Identifying the Possibilities of Individual Import of Non-authorised Medicinal Products

- Pursuant to the provision of Section 8(3) of the Act on Pharmaceuticals, the physician may prescribe or use a non-authorised medicinal product in cases when the authorised medicinal product is not available.
- KOČ employees check the database in compliance with Article 57 (EMA database, Regulation [EC] no. 726/2004 of the European Parliament and of the Council) to see whether in the EU, medicinal products which could be used as a replacement for the medicinal products unavailable in the Czech Republic have been authorised. Furthermore, KOČ employees use the regular market reports from distributors (guideline DIS-13) to see whether such medicinal products are imported to the Czech Republic, or, if applicable, they contact medicinal product distributors about possible import of non-authorised medicinal products.
- In the application of Section 77(1)(i) of Act No 378/2007 Coll., on Pharmaceuticals, and Section 46 of Decree No 229/2008 Coll., on manufacture and distribution, the KOČ Unit assesses and issues approvals of submitted applications for import of non-authorised medicinal products from third countries. In 2023, 196 approvals of import of non-authorised medicinal products from third countries were issued in total, which is 31 % more than in the previous year.

2.4 Z Drafting of Opinions on Specific Therapeutic Programmes (Hereinafter Referred to as “SpTP”)

- Where the supply of a foreign-language presentation of a medicinal product cannot be organised and the Institute considers the product irreplaceable, the Ministry of Health of the Czech Republic, having regard to the anticipated duration of supply disruption, authorises the Institute within the meaning of the provision of Section 2a(b) of Minister’s Order No 20/2011, “Coordination of the activities of the Ministry of Health of the Czech Republic and SÚKL in addressing certain specific processes to safeguard the availability of medicinal products important for the provision of health care”, to publish a communication about the emergency need and call for proposals of specific therapeutic programmes using non-authorised medicinal products for human use.
- Furthermore, in compliance with Section 49 of Act No 378/2007 Coll., on Pharmaceuticals, and Section 2 of Decree No 228/2008 Coll., on marketing authorisation of medicinal products, the KOČ Unit safeguards the preparation of opinions on the submitted applications for specific therapeutic programmes using non-authorised medicinal products for human use (guideline UST-20), the purpose of which is the treatment, prophylaxis, or diagnosis of life-threatening conditions for a defined patient group.
- In 2023, the Institute drafted opinions on 70 new applications, which represents a 19-% increase.

2.5 Identifying the Possibility of Individual Preparation of Medicinal Products (Hereinafter Referred to as “Individually Prepared Medicinal Products” or “IPLPs”) in Pharmacies

- IPLPs offer a way how to resolve a medicinal product availability problem on a temporary basis. Nevertheless, medicinal products prepared in this manner are not identical to authorised proprietary medicinal products. KOČ employees consult such alternative options with pharmaceutical specialists.

2.6 In 2023, the KOČ Unit drafted an assessment of a specific therapeutic programme as referred to under Section 49 (6-9) of Act No 378/2007 Coll., on Pharmaceuticals.

3. Communication with the Public

- As part of their activities, KOČ employees also address questions from professionals as well as from the general public concerning unavailability and replaceability of medicinal products.

4. Assessment of Medicinal Product Replaceability in Relation to the Activities of Other Organisational Units

- KOČ employees also assess medicinal product replaceability for the Quality Defects Unit (hereinafter referred to as “ZJ”) and the Marketing Authorisation Section (hereinafter referred to as “REG”). In total, this concerned 30 replaceability assessments for the Quality Defects Unit and 57 assessments of exemptions from the sunset clause for the Marketing Authorisation Section in 2023.

5. Preventive Measures Related to Restricted Re-export of Medicinal Products

- **5.1** In compliance with Section 77c of Act No 378/2007 Coll., on Pharmaceuticals, the Institute collects information on the volume of medicinal products on the market in the Czech Republic and on the volume of medicinal products dispensed and used in the provision of healthcare services from marketing authorisation holders, distributors, and pharmacies. The Institute processes this information and assesses whether the quantities of a medicinal product irreplaceable with another medicinal product of adequate therapeutic properties or of medicinal products mutually replaceable in terms of their therapeutic properties sufficiently covers the current needs of patients in the Czech Republic. Where the Institute, having regard to the evaluation of the stated facts, arrives at a conclusion that the current stock level of the concerned medicinal product or medicinal products no longer adequately covers the current needs of patients in the Czech Republic and shortage of this medicinal product would jeopardise the availability and efficacy of treatment of patients in the Czech Republic with a direct impact upon the protection of the people’s health and a significant impact upon the provision of healthcare services, it notifies the Ministry of Health to this effect, providing also background materials and information on the basis of which the Institute drew this conclusion. In 2023, the KOČ Unit submitted the total of 33 motions on jeopardised availability for 356 medicinal products (SÚKL codes) in total, i.e., the amount of motions sent to the Ministry of Health increased by 18 %; furthermore, four proposals for exclusion from the list for 5 medicinal products (SÚKL codes) were submitted.

- **5.2** In case the Institute receives a report from a distributor as referred to under Section 77(1)(q) of Act No 378/2007 Coll., on Pharmaceuticals, concerning an intention to export a medicinal product placed on the list of medicinal products whose distribution abroad has to be reported by distributors to the Institute, KOČ employees assess whether such distribution abroad would, in the coming period, cause a shortage of the medicinal product that is not replaceable with another medicinal product of adequate therapeutic properties or of medicinal products that are mutually replaceable in terms of their therapeutic properties, for the current needs of patients in the Czech Republic. In 2023, the Institute validated 2,243 applications from distributors intending to distribute listed products abroad. In case the availability of treatment for patients in the Czech Republic is jeopardised, with a direct impact upon the protection of the people's health and a significant impact upon the provision of healthcare services, the Institute submits a motion to the Ministry of Health for the issuance of a general measure pursuant to Section 77d of Act No 378/2007 Coll., on Pharmaceuticals, by means of which the Ministry of Health would prohibit the distribution of the concerned medicinal product(s) abroad. In 2023, the KOČ Unit submitted 59 motions suggesting prohibition of distribution abroad for the total of 86 medicinal products (SÚKL codes), which represented an 84-% year-to-year increase.

6. Preparation, Sharing, Communication, and Addressing of Availability on the European Level

- **6.1** In 2023, the Czech Republic was represented by the Institute in the Executive Steering Group on Shortages and Safety of Medicinal Products (MSSG) and the Single Point of Contact Working Party (SPOC WP), where the representatives of national agencies mutually share information on the availability of critical pharmaceuticals and discuss suitable solutions. The Institute played a significant role in negotiations concerning the supplies of antibiotics and antidiabetics on the European level, and, moreover, substantially contributed to the development of methodology as well as to the creation of the first version of the EU list of critical pharmaceuticals.

With regard to the amended Act on Pharmaceuticals (Act No 456/2023 Coll.) coming into effect on 01 January 2024, which focuses upon the availability of medicinal products in the Czech Republic, as at 31 December 2023, the KOČ Unit ceased to exist to be replaced with a new Medicinal Product Shortage and Replaceability Unit, which will take over the current KOČ agenda as well as the extended agenda of availability of medicinal products essential for the provision of healthcare services in compliance with the amended Act on Pharmaceuticals and the rights and responsibilities implied thereby.



5. PROCESSING AND PROVISION OF INFORMATION



5.1 INFORMATION TECHNOLOGIES

In the area of information technologies, 2023 was marked by the preparation of new key systems. These are, in particular, the following ones:

- new public database of medicinal products;
- new information portal SUKL.cz;
- Medical Device Information System (ISZP);
- information system for administrative procedures in the area of pricing and reimbursements (ASTERx).

The new public database of medicinal products and foods for special medical purposes (PZLÚ) was created on the basis of internal SÚKL's initiative, in order to develop a more advanced, easy-to-navigate, and more functional database. The new database was launched in April 2023 in an effort to provide straightforward access to information about medicinal products particularly for the general public, but also for healthcare professionals. The benefits of this new database include easier searches for medicinal products, incl. active substance combinations, a straightforward display of all important pieces of information at a single point (incl. information letters on medicinal products and education materials), and a straightforward graphic display showing the availability of individual forms of medicinal products. As a new feature, the database publishes also information arising from field requests: the possibility to display also revoked marketing authorisations of medicinal products, display of so called legal bases of applications for marketing authorisation of pharmaceuticals, or European identification numbers.

In 2023, a contract for a new portal SUKL.cz was awarded and the portal was designed and prepared for live operation. The objective of the project is a radical modernisation of SÚKL's presentation using new technologies, new design, compatible with other state administration websites. The launch of the new website is scheduled for April 2024.

The Medical Device Information System was developed and tested in 2023. Its development took into account particularly the new legislation governing the area of medical devices. The new system will replace a major part of the existing RZPRO system. Launch for professionals is expected to take place in March 2024.

In 2023, the development of a new information system for administrative procedures in the area of pricing and reimbursements was initiated. This system will fully replace the existing one which is no longer suitable for the current needs both in terms of its technical and user aspects. The new system will be a full-process system that will contribute to a higher efficiency in the processing of the pricing and reimbursement agenda. The launch of the new system is anticipated in late 2024.

In late 2023, the work of the Information Technology Department was influenced by the amendment to the Act on Pharmaceuticals, which introduced measures to ensure better availability of medicinal products. Most of the measures required IT support not only in the form of amendments to the existing reports of obligate entities, such as Market report, DIS13, REG13, etc., but also the development of completely new reports about stock levels to be used from 01 January 2024. We were able to design, develop, and launch these reports in production environment in record time, meeting the timelines stipulated by the legislation.

In 2023, new functionalities were successfully launched in the ePrescription system – cross-border ePrescription & eDispensing and a registry of mandates. Both functionalities again enhance patient comfort during work with ePrescription.

As regards infrastructure, we were able to utilise resources from the National Recovery Plan to modernise some of the key parts, such as back-ups or SIEM. The scheduled reconstruction of the back-up data centre, for which project documentation had been prepared, was launched as planned and, due to the location of some technologies, coordinated with the project of reconstructions of roof of SÚKL's Building no. 24. Full launch in routine operation is scheduled for March 2024.

Home-office style of work became part of normal routine in the Institute's operation. The employees availed of mobile technologies and remote access to the Institute to a great extent.

It may be stated that in 2023, the Information Technology Department continued to implement numerous measures to enhance the performance, availability, and security level of operated systems of the Institute in line with the trends in this sphere and the growing risk of potential cyber-attacks aimed at the Institute's systems. Also, the efforts to enhance electronisation of processing of expert agendas have been successful.

EPRESCRIPTION SYSTEM

Electronic prescription and the establishment of the ePrescription information system are legislatively based on Act No 378/2007 Coll., on Pharmaceuticals, as amended. By means of the ePrescription system, the doctor issues an electronic prescription (ePrescription) for the patient; on the basis of this prescription, the pharmacy dispenses the medicinal product. The Central Repository of Electronic Prescriptions, as one of the components of the ePrescription system, collects and stores all ePrescriptions under conditions stipulated by effective legislation. The established ePrescription system is one of the eHealth services and since 01 January 2018, its operation in the Czech Republic has been mandatory. Pursuant to Section 81f of Act No 378/2007 Coll., on Pharmaceuticals, exceptional situations when it is possible to continue to issue paper-based prescriptions are still permissible.

In association with the requirement for mandatory electronic prescription, the process of modernisation of the entire system, also with regard to its inclusion in the eHealth National Strategy of Electronic Healthcare and Strategic eGovernment Development Framework 2014+, was initiated as early as in 2015. The implementation of the ePrescription project was carried out according to the effective schedule and the project was completed in December 2017. The ePrescription system has been included in the critical infrastructure of the state, and hence has been governed by the tightest security measures as referred to by the Act on Cyber-Security and related legal regulations.

An ongoing system support has been established and on the basis of suggestions submitted by professionals as well as the general public, the system is being continuously improved, which is consistent with the performance of the service agreement on the provision of service support. In an open tender held in 2020, the currently effective service agreement was awarded that ensures support and development of all of the ePrescription system components that, pursuant to Section 81 of the Act on Pharmaceuticals, includes the Central Repository of Electronic Prescriptions (CÚER), the Central Repository of Electronic Orders (CÚEP), the Central Repository of Vaccination Records (CÚEO), the Registry of Restricted Medicinal Products ("RLPO"), the medication record, consent administration, and other specified components.

Since 01 January 2018, the system has been operated in the mode of mandatory electronic prescription. Throughout 2023, as well as in the previous years, its operation was not hindered by any major problems. Health insurance companies routinely download batches of ePrescriptions and eOrders for their insureds, which provides the former with a complete overview of dispensing. Since the launch of the mandatory electronic prescription, applications for patients and healthcare professionals have been also made available.

In their application, doctors have the possibility to prescribe an ePrescription and an eOrder or make a record of applied vaccination also outside their offices. The eOrder prescription module is available in the application also to other healthcare professionals who are authorised to carry out this activity. Pharmacists and other persons dispensing medical devices may use the application to record the dispensing of a medical device on eOrder. In the application, doctors and pharmacists may also view the patient's medication record, i.e., information on prescribed medicinal products or recorded vaccinations until 30 November 2022, if they are authorised to access these data. For pharmacists, moreover, there is a special application allowing them to obtain information about an ePrescription in case functional standard communication with the ePrescription system is not available.

The patient application allows patients to view the list of ePrescriptions and eOrders prescribed for them or applied vaccinations completed prior to 30 November 2022, in respect of which the individual patient was clearly identified in the Registry of Inhabitants (ROB). Furthermore, parents have the option to view ePrescriptions and eOrders issued for their underage children and the records of their vaccinations completed prior to 30 November 2022. In the application, the patient may set up his/her consent or disagreement with the viewing of his/her medication record (list of ePrescriptions and vaccination records) or the medication record of his/her underage children. Furthermore, the complete history of accesses to his/her data, i.e., when a particular doctor or pharmacist viewed the lists of the patient's data, is available to the patient. Since November 2023, the patient may also grant or accept a mandate for viewing of ePrescriptions or eOrders in the patient application.

The ePrescription system offers a wealth of benefits, particularly for the patient. **Electronic delivery of the ePrescription identifier – via SMS or e-mail messages – has been gaining an ever-growing popularity. The final volume for 2018 amounted to three million SMS messages and 492 thousand e-mail messages; in 2019, these figures increased to more than 10.5 million SMS messages and 702.5 thousand e-mail messages; in 2020, it was 28.5 million SMS messages and 840 thousand e-mail messages; in 2021, almost 34 million SMS messages and 688 thousand e-mail messages; in 2022, the figures exceeded 41 million SMS messages and 700 thousand e-mail messages; and in 2023 they amounted to as many as 47.8 million SMS messages and 800 thousand e-mail messages.**

Since the launch of the electronic prescription, the www.epreskripce.cz website is being continuously updated. This website is the publication point for any information concerning the ePrescription, medication record, vaccination record or the electronic medical device order, and other news from the sphere of eHealth.

Within the scope of the electronic prescription system operation, the Institute provides also support for the users of the given system. A free hotline has been available to professional as well as lay users during working days from 7:00 a.m. to 5:00 p.m.

The Institute, as the administrator and operator of the ePrescription system, safeguards continuous access also to data maintained in the RLPO registry for prescribing doctors and dispensing pharmacists, the purpose of which is to ensure the limitation of prescription and dispensing of the medicinal product to the quantity set forth by the marketing authorisation pursuant to Section 39(4)(c) or Section 39(5) of Act No 378/2007 Coll., and the restriction stipulated by Decree No 236/2015 Coll. To fulfil the provision of Section 43a(2)(b) of Act No 167/1998 Coll., on Dependency-Producing Substances, as amended, which stipulates the authority of the Czech Police to retrieve data from the RLPO registry via a defined point of contact, electronic access to this Registry via the ePrescription system has been made available for the Czech Police.

In 2018, the total of 58.5 million ePrescriptions were issued; 56 million were dispensed; the total value of reimbursements of the dispensed reimbursed medicinal products prescribed via the ePrescription system exceeded 26,118,000 thous. CZK.

In 2019, more than 73.5 million ePrescriptions in total were issued; 71.5 million were dispensed; the total value of reimbursements of the dispensed reimbursed medicinal products prescribed via the ePrescription system exceeded 33,154,301 thous. CZK, which represents more than a 25-% increase.

In 2020, more than 79 million ePrescriptions were issued; almost 77 million were dispensed and the total value of reimbursements of the dispensed reimbursed medicinal products prescribed via the ePrescription system exceeded 32,981,849 thous. CZK.

In 2021, more than 76 million ePrescriptions were issued and almost 75 million were dispensed, which only confirmed the well-established routine operation and utility of the system.

In 2022, more than 81 million ePrescriptions were issued and almost 80 million were dispensed, which have been the highest figures since 2018 to date. In February 2022, the borderline of 300 million ePrescriptions issued since the start of mandatory electronic prescription was overcome.

In 2023, more than 83 million ePrescriptions were issued and more than 82 million were dispensed, which have been the highest figures since 2018 to date. In May 2023, the borderline of 400 million ePrescriptions issued since the start of mandatory electronic prescription was overcome. The ePrescription system has hence become an essential instrument in the area of healthcare service provision.

Almost 50 thousand doctors and dentists, i.e., their vast majority, have access data generated by SÚKL for them. In 2023, application verifications with all professional chambers was flawlessly carried out on a continuous basis. Dispensing of prescribed medicinal products may be conducted practically in all pharmacies in the Czech Republic. **As of 31 December 2023, 48,113 doctors, 18,148 healthcare facilities, and 2,765 pharmacies were actively involved.** At the moment, the numbers of active entities and healthcare professionals reflect only common changes in the field, i.e., retiring individuals, arrivals of new graduates, establishment or dissolution of healthcare service providers.

On 01 January 2020, the Ministry of Labour and Social Affairs and the Czech Social Security Administration (ČSSZ) launched an electronic sick note system. Also in 2023, authentication to the B2B channel was carried out via the same SSL communication certificate as that used by the healthcare service provider (healthcare facility) for communication with the ePrescription system. Since March 2021, the same certificate has been used also by the Reservatic system serving for the reservation of COVID-19 vaccination appointments. This is an important positive step taken in favour of professionals as healthcare staff may avail of the current authentication means for other systems implemented nationwide by the state administration.

Since 01 April 2020, the citizens of the Czech Republic may apply for an excerpt of ePrescriptions issued and dispensed for them in a selected period of time from the ePrescription information system at a public administration contact point (Czech POINT). Thanks to this functionality, the patient may have his/her electronic prescriptions printed out at a Czech POINT site. Since 01 January 2022, the citizens of the Czech Republic may also apply for an excerpt from the list of vaccinations applied thereto. The data that may be required in the excerpt are limited to the period from 01 January 2022 to 30 November 2022. The scope of the data to be provided is defined by relevant legislation.

Since 01 June 2020, the patient has had, moreover, the option to provide a list of all of the identifiers of his/her ePrescriptions for dispensing in a pharmacy by presenting his/her machine-readable identification document – primarily the ID card. On the basis of the presented patient's document, the pharmacist can retrieve the list of all ePrescriptions issued for the patient that may be dispensed. The medicinal product dispensing proper is then carried out in a standard manner on the basis of the obtained ePrescription identifiers.



83

million issued
ePrescriptions

The amendment to Act No 167/1998 Coll., on Dependency-Producing Substances, with implications for Act No 378/2007 Coll., on Pharmaceuticals, taking effect on 01 January 2022, and the amended Decree No 329/2019 Coll., on the prescribing of medicinal products, effective as of 23 December 2021, brought numerous changes relevant for the area of electronic prescription. In 2021, all of the changes were implemented in a manner allowing the schedule to fully observe the legislative timelines for the launch of the individual functionalities.

On 01 January 2022, mandatory electronic format of so-called blue-stripe prescriptions, i.e., prescriptions for medicinal products containing highly addictive substances listed under Annex 1 or 5 to Government Regulation on the List of Dependency-Producing Substances was launched. Prior to the end of 2021, these prescriptions had been issued in paper format only; since 01 January 2022, however, they have been issued in electronic format only. Their electronic format is mandatory, nevertheless, the same exemptions apply to it as those applicable to standard prescriptions in terms of the possibility to issue the prescription in paper format. This extension was associated also with the change in prescribing medical cannabis which, since 01 January 2022, has been prescribed only on prescriptions with the highly-addictive-substance flag.

In order to safeguard the control activities entrusted to regional authorities, since January 2022, SÚKL has provided regional authority employees with access to an application that allows them to retrieve and check ePrescriptions with the blue stripe/highly-addictive-substance flag issued in the concerned region.

Another record-keeping system is the electronic vaccination record. Since 01 January 2022, doctors have been obliged to make a vaccination record in the ePrescription system for any applied vaccination – regular, special, extraordinary as well as voluntary ones, reimbursed and non-reimbursed ones, with the transient exemption for vaccination against COVID-19. It has been possible to make a record of applied vaccination for patients whose identity has or has not been verified, but, as is the case with the medication record, the record of the specific patient displays only those vaccinations for which the identity of the patient was verified during the record-taking. This record-keeping system has become part of the medication record and hence it is accessible only for the patient whose identity was unequivocally verified against the ROB registry during the vaccination. The amendment to Act No 378/2007 Coll., on Pharmaceuticals, terminated the recording of applied vaccinations in the ePrescription system as at 30 November 2022.

As of 01 December 2021, a functionality for citizens has been launched allowing them to express their potential disagreement with the viewing of their vaccination record. The list of all granted or withdrawn consents is managed through the consent administration of the ePrescription system that was launched on 01 December 2019. At any time, the patient has the right to express his/her global disagreement with doctors or pharmacists viewing his/her medication or vaccination record. Equally, the patient may grant an explicit consent exclusively for a selected particular doctor or pharmacist. Parents also have the right to express their disagreement with a doctor or pharmacist viewing the shared medication or vaccination record of their children. The default set-up used as of 01 December 2021 for the viewing of the patient's vaccination record was the set-up currently used by the patient for his/her medication record. The entered consents or disagreements with the viewing of the vaccination record are applicable solely to the data entered in the ePrescription system, i.e., data for the period from 01 January 2022 to 30 November 2022.

The patient's consents or disagreements may be set up as the patient desires via the patient application, the patient's data mailbox or a letter signed with an officially authenticated signature.

For healthcare professionals, the conditions for viewing the vaccination record are identical to those governing the viewing of the medication record. Pursuant to the effective legislative provision, the initial viewing of the patient's shared medication record or vaccination record by a doctor who, to date, has not prescribed any ePrescription for the patient, is possible only upon the presentation of the patient's identification document. Nevertheless, where an established link between the doctor and the patient is evidenced by the fact that this doctor prescribed an ePrescription for the patient sometime in the past, and the ePrescription was then dispensed in a pharmacy, the presentation of the identification document is not required. The pharmacist may view the record only if the patient presents his/her identification document.

Pursuant to effective legislation, the vaccination record is accessible also for Regional Public Health Authorities and the Public Health Authority of the Capital City of Prague. On the basis of the legislative authorisation, such access to data within the stipulated scope has been provided by SÚKL since January 2022. Available are data recorded in the period from 01 January 2022 to 30 November 2022.

On the basis of Act No 89/2021 Coll., on Medical Devices, electronicisation of medical device orders (eOrders) was launched as one of the components of the ePrescription system. This Act came into effect on 26 May 2021 and, **in compliance with Communication No 54/2022 Coll., of 08 March 2022, on putting the central repository of electronic orders into operation, the eOrder was launched as of 01 May 2022.** On 29 April 2022, Decree No 97/2022 Coll., of 22 April 2022, implementing some provisions of the Act on Medical Devices concerning electronic orders was published in the Collection of Acts. The Decree has been effective since 01 May 2022. At the moment, the eOrder record-keeping is set up as optional.

With its functionality, the eOrder replaces paper orders for medical devices. The intention in the development of the eOrder module was to avail of the existing ePrescription system functionalities as much as possible to make the prescribing and issuance of eOrders as simple as practicable. Orders may be issued electronically for all types of medical devices, i.e., those for sight correction, for patients with a hearing impairment as well as any others. The major processes covered by the

ePrescription system include also the approval of eOrders by health insurance companies where required by the nature of the prescribed medical device. The eOrder module also allows for mail-order dispensing of the medical device where the requirements governing remote sale set forth by the Medical Device Regulation have been met.

In association with the launch of eOrder, also the number of user roles that may access the ePrescription system has been extended. In addition to the previously established roles of the doctor and pharmacist, eOrders may be prescribed also by other healthcare professionals and they may be dispensed also by pharmaceutical assistants, orthotics, prosthetics, optometrists, opticians, and other persons dispensing medical devices. Since May 2022, all of the users of the ePrescription system can access the ePrescription system also by means of citizen's identity, i.e., login via e.g., bank identity, mobile eGovernment key or identity card with an activated contact electronic chip. Initially, this option was available only to patients using their patient application.

In 2022, almost 158 thous. eOrders were issued and approx. 133 thous. were dispensed.

In 2023, more than 838 thous. eOrders were issued and the number of both prescribers and dispensing persons has been nearing 10 thousand. By the end of 2023, for the first time, almost one million of eOrders was issued.

The www.epreskripce.cz website publishes current information about active dispensaries where eOrders may be used for dispensing. Their number is now more than 3.300.

Since as early as 2018, SÚKL has been involved in the Deployment of Cross Border Services in the Czech Republic (ePrescription/eDispensation) NIX-ZD.CZ II. project, where the main project partner is the Vysočina Region. The NIX-ZD.CZ project focuses upon cross-border exchange of ePrescriptions and information about dispensed medicinal products, which, as a result, offers increased safety and quality of provided health care and patient comfort.

Cross-border exchange of electronic prescriptions will provide access to the ePrescription to a pharmacist in another participating EU Member State than the state where the ePrescription was issued. The Czech patient will be able to collect his/her medicine in any other EU Member State involved in the production operation of this cross-border exchange of electronic prescriptions. And, on the other hand, patients from those European countries that operate in the production environment, will be able to collect their medicines in Czech pharmacies.

In 2022, the last steps towards launching the cross-border ePrescription were carried out. Following successful European testing, the final audit conducted by the European Commission was also successfully completed.

In 2023, production operation with Croatia, Poland, Estonia, Spain and Portugal was launched. In the aforementioned countries, almost 800 Czech ePrescriptions were dispensed during 2023. Gradual extension to other EU countries is planned in the coming years.

In November 2023, another module of the ePrescription system – the mandate registry – was launched. Via this module, the patient can grant a power of attorney to be represented in negotiations concerning access to data entered in the ePrescription system established pursuant to Section 81(1) of Act No 378/2007 Coll., on Pharmaceuticals. The patient (principal) can appoint an agent to represent him/her in individual areas – ePrescription, eVaccination, eOrder, and consent administration.

The authorisation may be set up via a web or mobile application for patients, by submitting a completed form via the principal's data mailbox or by sending a paper-based submission with an officially authenticated signature of the principal to SÚKL's registered office address. The mandate registry serves also for the purposes of setting up access to the ePrescription system for guardians of persons who have been legally incapacitated by a court decision.

The ePrescription system has proven to be much valuable particularly at the time of the COVID-19 epidemic in the Czech Republic. During this difficult period, the electronic prescription rather effectively supported the desirable social distancing, significantly reducing the need for patients to come to doctors' offices, which substantially contributed to safeguarding the protection of health for all citizens of the Czech Republic. The importance of the ePrescription system may be evidenced also by numerous awards gained thereby since 2018. In 2022, ePrescription was pronounced the most beneficial project in the sphere of eHealth and digitisation of Czech health care and won an award on the INMED conference organised by EEZY Publishing, s. r. o. In 2023, the "The National eHealth Point of Contact – ePrescription and eDispensing" came 3rd in the Government The Best competition.

Fig. 30 Number of prescribed and dispensed ePrescriptions in individual months of 2023 (mil.)

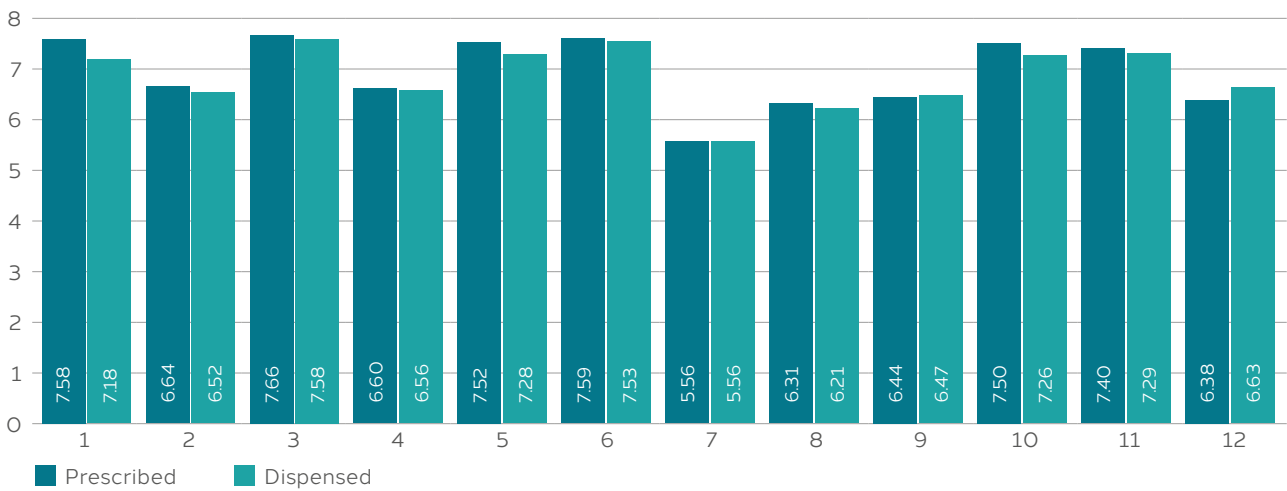


Fig. 31 Number of e-mail and SMS messages sent in individual months of 2023

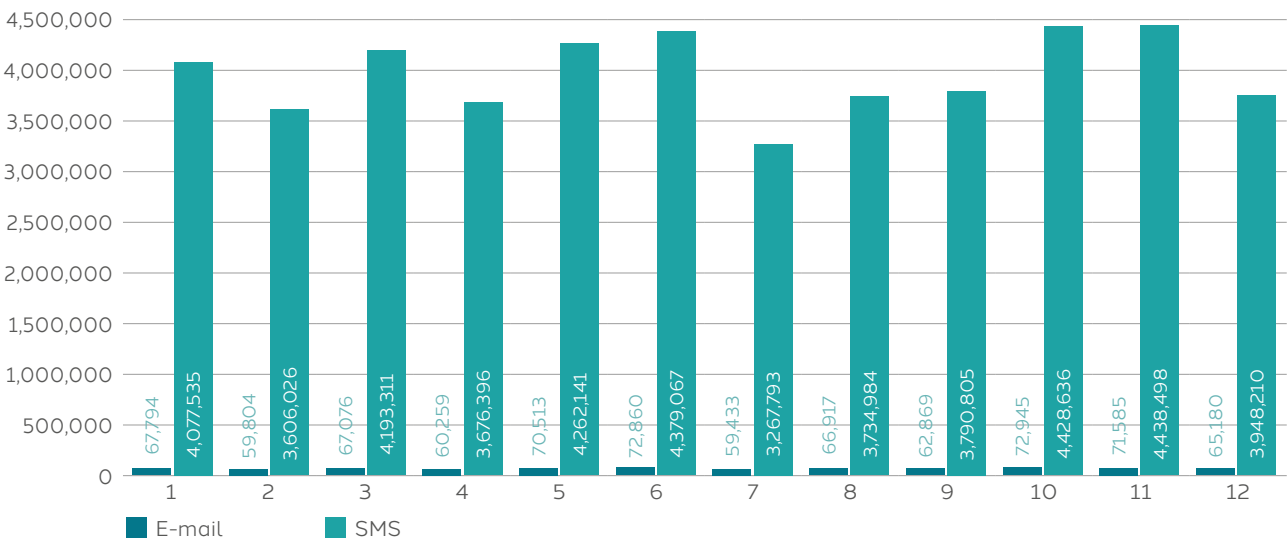
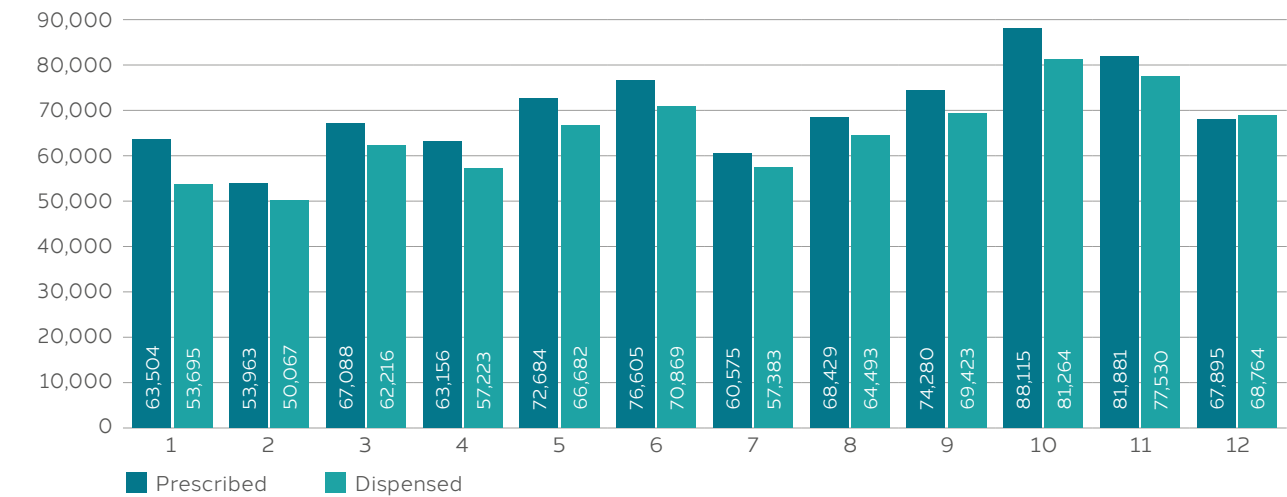


Fig. 32 Number of prescribed and dispensed eOrders in individual months of 2023



5.2 DATABASE OF MEDICINAL PRODUCTS AND MONITORING OF SUPPLIES TO PHARMACIES

On the basis of the obligation set forth by the Act on Pharmaceuticals, the Institute keeps a registry of authorised medicinal products and arranges for the publication of selected information in its information media. For the purposes of this registry, an internal database of medicinal products (DLP) is used; this registry is updated on an ongoing basis. The mandatory disclosure information from DLP is displayed in the database of medicinal products available from SÚKL's website.

REGISTRY OF ACTIVE SUBSTANCES

At present, the DLP Component Library contains 20,473 components (incl. combined components). In 2023, 506 new components were entered.

- In 2023, the flagging of components as prohibited substances in terms of doping and flagging of products containing such substances was updated in compliance with "The 2023 Prohibited List – The World Anti-Doping Code", effective as of 01 January 2023. Thereafter, flagging was performed on a weekly basis and from February 2023, a list of all authorised medicinal products with doping components was sent to the Czech Antidoping Committee on a monthly basis.
- A revision of substances labelled as doping by the Pharmazie.de database was performed.
- New components were entered and components from Czech Pharmacopoeia 2023 and European Pharmacopoeia – Supplements 11.1, 11.2, and 11.3 were amended.
- Components were piecemeal amended so as to be consistent with the new concept of the DLP Component Library (dedicated lines for certain literature sources).
- Components from the Proposed and Recommended INN WHO lists issued in 2023 were entered or amended.

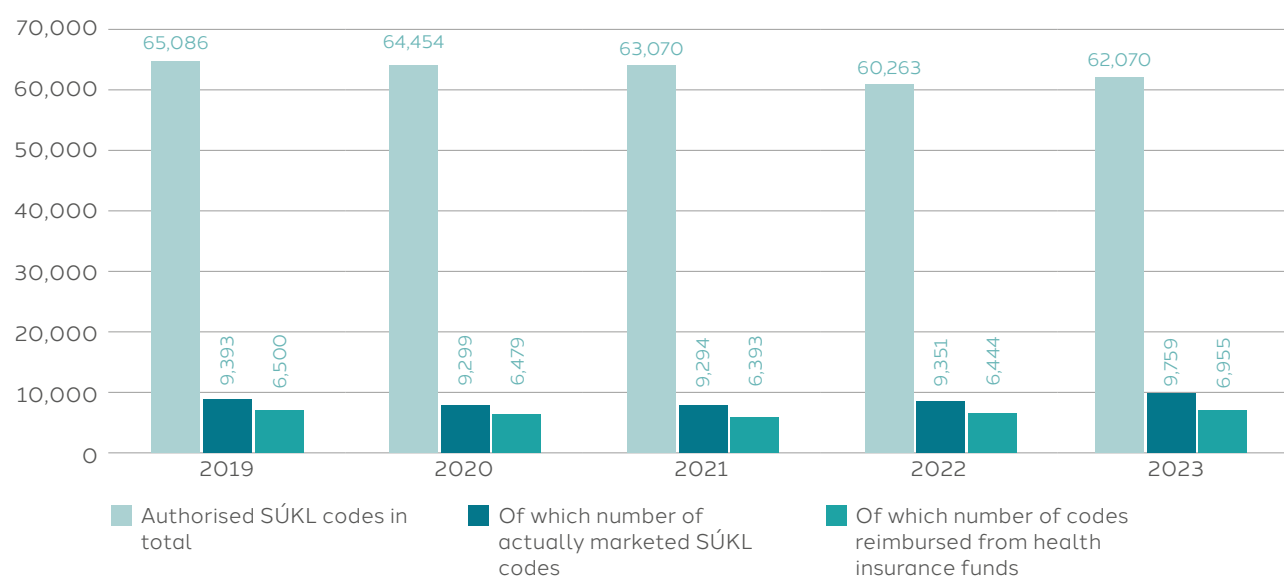
REGISTRY OF MEDICINAL PRODUCTS

In 2023, the Institute granted 376 marketing authorisations (2,783 SÚKL codes). Authorisation was revoked for 310 marketing authorisation numbers, which corresponds to 3,750 codes. The authorisation was revoked either upon request of the marketing authorisation holder (310 marketing authorisation numbers), due to the sunset clause (61 marketing authorisation numbers), or due to the fact that the MA holder did not apply for marketing authorisation renewal (11 marketing authorisation numbers). The validity of 4,257 codes in total expired (the period of the code final sale expired or marketing authorisation was revoked).

In the course of 2023, no distribution was reported for 52,311 codes (84 %) of medicinal products, excluding homeopathic preparations. Hence despite having a valid marketing authorisation, these products were not placed on the market.

Authorised medicinal products contain 2,659 various active substances in total.

Fig. 33 Authorised medicinal products in the period of 2019–2023



Tab. 45 Selected subgroups of authorised medicinal products entered in SÚKL's database as of 31 December 2023

	Total no. of MA numbers / marketed MA numbers	Total no. of SÚKL codes / marketed SÚKL codes
Medicinal products in total (excl. homeopathic preparations)	18,906/6,547	62,070/9,759
Of which by MA numbers:		
MA numbers granted by the Institute	6,463/4,875	49,567/7,578
MA numbers of products authorised via Community Centralised Procedure	12,443/1,671	12,485/1,681
Of which by content:		
Single-component	15,268	50,376
Multi-component	3,637	11,682
Of which by type of dispensing:		
Prescription-only medicinal products	18,110/5,883	58,400/8,156
OTC medicinal products	862/677	3,620/1,106
Restricted OTC medicinal products	4/4	22/4
Restricted prescription-only medicinal products	4/6	26/6
Homeopathic preparations	269/264	787/338

REGULAR OUTPUTS FROM THE DATABASE OF MEDICINAL PRODUCTS

For professionals as well as for the general public, the Institute regularly publishes information about authorised medicinal products, approved specific therapeutic programmes, and foods for special medical purposes with all details in the database of authorised medicinal products.

Since 2008, the Institute has been publishing the “List of Prices and Reimbursements of Medicinal Products and Foods for Special Medical Purposes”, including updates thereof, on its website. In 2010, the system of so-called “Control List” publication was established. The List notifies professionals in advance of possible changes to maximum prices and reimbursements implied by final decisions. In 2011, in compliance with Act No. 298/2011 Coll., the title “Control List” was changed to “Draft List”.

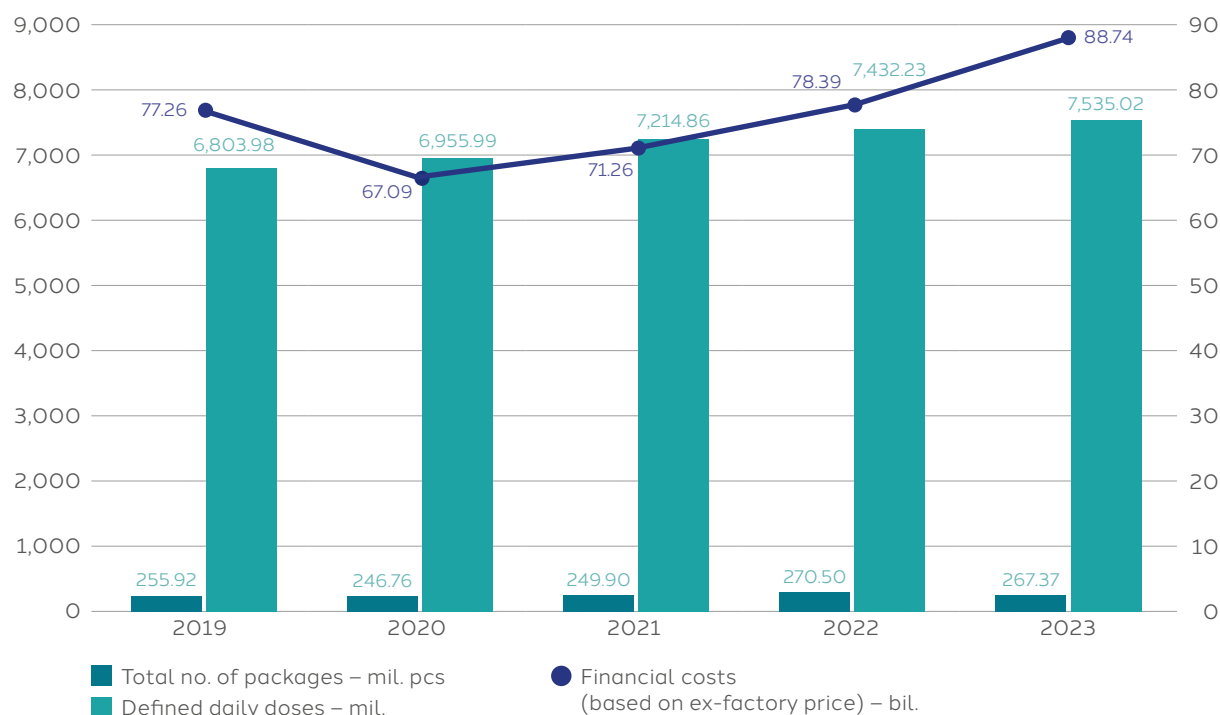
Information from the database is, moreover, utilised for the market report overview – reports on placements on the market or suspension or termination of supplies of medicinal products onto the market; for the overview of variations to marketing authorisations; or for the overview of non-interventional post-marketing studies.

EVALUATION OF DELIVERIES OF DISTRIBUTED MEDICINAL PRODUCTS

In 2023, evaluation of deliveries of distributed medicinal products based upon the mandatory reporting from entities authorised to distribute medicinal products in the Czech Republic was performed on a monthly basis. The subject-matter of the reports concerned deliveries of medicinal products to pharmacies and other healthcare facilities both in the Czech Republic and abroad. In addition to authorised medicinal products, products included in specific therapeutic programmes and non-authorised products supplied on medical prescription for a specific patient were also being evaluated.

Data on the volumes of distributed medicinal products in the number of packages, in financial volumes (CZK), and in the number of daily defined doses (DDD) were being evaluated. Due to the need to compare the financial cost values over the years, data on financial costs are provided in producer prices, i.e., in ex-factory prices excl. VAT (VAT rates were changing over the years), and excl. profit margin. Since 2020, the Institute has been receiving data about the price of a medicinal product only for medicinal products in respect of which reimbursement from the public health insurance funds has been established. Since 2008, the Institute's website contains a table showing deliveries for each active substance (further broken down by route of administration, where applicable). On a monthly basis, moreover, the Institute publishes summary information from monthly reports of entities authorised to distribute medicinal products in the Czech Republic on its website.

In 2023, 267.37 million packages of medicinal products were distributed, which corresponds to approx. 7,535.02 mil. DDDs. The value of these deliveries amounted to 88.74 billion CZK (based on ex-factory price).

Fig. 34 Deliveries of medicinal products in the period of 2019–2023**Tab. 46 Dodávky distribuovaných léčivých přípravků v roce 2023**

Medicinal products in total	Number
Deliveries to pharmacies and healthcare facilities (mil. packages)	267.372
Deliveries to pharmacies and healthcare facilities (mil. CZK based on ex-factory price)	88,739.246
Deliveries to pharmacies and healthcare facilities (mil. DDD)	7,535.023
DDD/1,000 inhabitants/day	1,904.520
Prescription-only medicinal products	
Deliveries to pharmacies and healthcare facilities (mil. packages)	183.725
Deliveries to pharmacies and healthcare facilities (mil. CZK based on ex-factory price)	88,508.469
Deliveries to pharmacies and healthcare facilities (mil. DDD)	6,913.982
DDD/1,000 inhabitants/day	1,740.673
OTCs and selected pharmaceuticals	
Deliveries to pharmacies, healthcare facilities and vendors of selected pharmaceuticals (mil. packages)	83.353
Deliveries to pharmacies, healthcare facilities and vendors of selected pharmaceuticals (mil. CZK based on ex-factory price)	230.783
Deliveries to pharmacies, healthcare facilities and vendors of selected pharmaceuticals (mil. DDD)	650.849
DDD/1,000 inhabitants/day	163.858
Restricted OTCs	
Deliveries to pharmacies and healthcare facilities (mil. packages)	0.294
Deliveries to pharmacies and healthcare facilities (mil. DDD)	0.086
DDD/1,000 inhabitants/day	0.022
Homeopathic preparations	
Deliveries to pharmacies (mil. packages)	1.917

5.3 INFORMATION ACTIVITIES

The primary task of the Press and Information Unit (TIO) is to provide information on all activities of the Institute to the general public and to professionals. In 2023, the most important sources of information about the Institute included the www.sukl.cz website and the information portal for the public www.olecich.cz, administered by TIO and serving both of the aforementioned groups. TIO is also in charge of social networks ([Facebook](#), [X \[formerly Twitter\]](#), [Instagram](#), and [LinkedIn](#)), through which it communicates news, information as well as topics of current importance addressed by SÚKL.

In 2023, the information portal www.olecich.cz provided patients with information from the sphere of pharmaceuticals, including a database of medicinal products, database of pharmacies, and database of clinical studies. Furthermore, a vaccination schedule with essential information regarding both mandatory and optional vaccination, incl. relevant vaccines, was available. For several years now, the general public may avail of the “Ask Us” service, through which doctors and pharmacists answer questions raised by the public. Within the scope of the “Ask Us” service, the following specialists were answering questions from the public: a general practitioner, a paediatrician, and two pharmacists. Thanks to that, it was possible to answer 46 patient questions.

Also in 2023, TIO administered an expert library and was in charge of publication activities, represented by the preparation and publication of “Věstník” (Bulletin), the drug bulletin “Farmakoterapeutické informace” (Pharmacotherapeutic Information, a member of the International Society of Drug Bulletins – ISDB), and the “Zpravodaj nežádoucích účinků léčiv” (Adverse Drug Reactions Bulletin). All of the above-mentioned publications are available from www.sukl.cz.

In 2023, TIO answered 2,842 inquiries from the general public as well as from professionals which were sent via e-mail or post. Further 2,304 inquiries were handled by the infoline.

Via e-mail, the Unit answered the total of 400 questions from the media and tens of other questions were answered by phone. The representatives of the Institute also provided regular statements for radio or television broadcasting. On its website, the Institute published 18 press releases or reactions.

In 2023, the representatives of the Press and Information Unit acted as guarantors of the development of new websites that the State Institute for Drug Control plans to launch in 2024.



6. FINANCIAL AND MATERIAL RESOURCES OF THE INSTITUTE



6.1 THE 2023 INCOME AND EXPENDITURE ACCOUNT

INCOME

In 2023, extra-budgetary income amounted to the total of 617,584 thous. CZK. The major part of this income was generated by the reimbursement of costs of expert activities that were conducted by SÚKL upon requests submitted by manufacturers, distributors, vendors, and other legal entities as well as natural persons. The largest proportion of the overall volume was represented by income from applications in the sphere of marketing authorisations of medicinal products and in the sphere of maintenance payments. The income from completed expert activities was used piecemeal by the Institute in compliance with Act No 378/2007 Coll., on Pharmaceuticals, as amended, Act No 296/2008 Coll., on Human Tissues and Cells, as amended, Act No 48/1997 Coll., on Public Health Insurance, as amended, Act No 167/1998 Coll., on Dependency-Producing Substances, as amended, and Act No 375/2022 Coll., on Medical Devices and on in Vitro Diagnostic Medical Devices, as amended, for the funding of payroll, operating, and investment expenditures not covered by allocated financial resources from the state budget. In 2023, the total amount of 628,555 thous. CZK was used in this manner through permissible excess expenditure. Of this amount, 576,277 thous. CZK were used for non-investment expenditure and 52,278 thous. CZK for the financing of investment needs.

In addition to income from the reimbursement of costs of expert activities, another part of income came from the revenues of the state budget, such as collected administrative fees for submitted applications amounting to 19,060 thous. CZK, income from imposed fines amounting to 6,135 thous. CZK, income from lease in the amount of 490 thous. CZK, income from insurance claims in the amount of 258 thous. CZK, compensations of administrative procedure costs and refunds of excess advance payments made, related fully to the previous budgetary years, in the amount of 315 thous CZK, etc. The Transfers from the reserve fund line shows the volume of extra-budgetary income used for the funding of expenditures in 2023. An overview of the budget income as of 31 December 2023 is shown in Table 47.

Tab. 47 State budget income (thous. CZK)

Item	Approved budget	Actual amount
Administrative fees	24,800	19,060
Received penalty payments	4,000	6,135
Income from lease	0	490
Income from insurance claims	0	258
Income from service provision	0	70
Received non-capital contributions and compensation	0	315
Transfers from other own funds	0	299
Transfers from the reserve fund	0	628,555
Total	28,800	655,182

EXPENDITURE

Data on expenditures incurred in 2023 broken down by individual categories are provided in Table 48.

The total investment expenditure from extra-budgetary resources amounted to 24,133 thous. CZK. Investment resources were used to finance the procurement of laboratory instruments in the total amount of 1,066 thous. CZK (ultra-pure-water delivery system, ultra-microweights, a SDS PAGE set), logos for SÚKL buildings in the amount of 230 thous. CZK, technical equipment of a meeting room in the amount of 72 thous. CZK, and a promotion video in the amount of 254 thous. CZK. The costs of procured licences amounted to 160 thous. CZK, the costs of technical upgrades of applications and SW (ERP, eSSL Athena, and others) to 17,544 thous. CZK, the costs of HW purchase and replacement to 2,371 thous. CZK, the costs of procurement of a personnel information system to 1,196 thous. CZK, and the costs of a new agenda system (ISZP) to 617 thous. CZK. A super-structure upgrade of the JBS security system was implemented (224 thous. CZK) as well as a security system and a data network for OKL České Budějovice (110 thous. CZK). The preparation of documentation for planned construction works amounted to the total of 289 thous. CZK (in particular, preparation of reconstruction of roof of Building no. 24, data centre reconstruction, and the development of a temporary parking lot).

The total investment expenditure in 2023 amounted to 72,375 thous. CZK. Utilised extra-budgetary resources amounted to 52,278 thous. CZK, and most of the resources were used particularly for roof reconstruction in Building no. 24, SÚKL process electronicisation development, IT technology modernisation as well as for the replacement of laboratory instruments. In 2023, SÚKL obtained funds from the state budget and EU resources for the project of Shared medication record – service enhancement in the area of consent administration, access log, which is being implemented as part of the National Recovery Plan. The investment expenditures incurred for the said project amounted to 20,097 thous. CZK.

Non-investment expenditures were utilised in the total amount of 738,548 thous. CZK, of which 162,379 thous. CZK came from the state budget and 576,169 thous. CZK were taken from extra-budgetary resources. Extra-budgetary resources included resources from abroad provided for an international project within the EU.

Tab. 48 Expenditures (thous. CZK)

Indicator	Approved budget	Final budget	Actual amount
Employee salaries	25,092	55,538	55,538
Civil servant salaries	95,344	328,159	328,079
Other payments for completed work, severance pay, surrenders	3,603	18,201	18,201
Mandatory insurance premium	41,926	133,916	133,889
Fund of Social and Cultural Needs contribution	2,409	7,821	7,821
Operating acquisitions and related expenditure	967	204,146	195,020
Acquisition of long-term tangible and intangible fixed assets	0	89,702	72,375
Total	169,341	837,483	810,923
of which: operating expenditure	169,341	747,781	738,548
capital expenditure	0	89,702	72,375

SÚKL'S INVOLVEMENT IN INTERNATIONAL PROJECTS WITHIN THE EU

JAMS 2.O.

Reinforced market surveillance of medical devices and in-vitro devices

The subject-matter of this project is deepened cooperation in the area of market surveillance and vigilance and harmonisation of approaches across EU countries.

The purpose of the project is to share information, well-established procedures, know-how and resources, to support exchange of information about market surveillance among the competent authorities via data collected from the entire EU market, to develop standard control procedures, and to support inspection method development. Furthermore, joint procedures for the implementation of campaigns in the area of market surveillance will be introduced, and, eventually, training tools for uniform skill development and enhanced technical know-how in the sphere of vigilance and surveillance over the medical device and in vitro diagnostic medical device market will be created.

The total project budget for SÚKL is 80,303 EUR.

EU4H 11

Joint Action on quality of medicines and implementation of the pharmaceutical legislation/strategy

The subject-matter of the project is "joint action on quality of medicines and implementation of the pharmaceutical legislation/strategy", which is part of the EU4Health programme funded by the European Commission. The total budget of this joint action is more than 3 million EUR; 80 % of the costs is to be co-financed by the European Commission. The project will support enhancement of capacity of GMP and GDP inspectorates in EU/EEA countries, with the objective of global mutual reliance on inspection data in order to better safeguard the quality of medicinal products and public health protection.

The project has been undertaken by 39 EU/EEA drug inspectorates from the total of 29 EU/EEA countries. The inspectorates oversee regulatory compliance by pharmaceutical manufacturers of medicines for human and veterinary use from all over the EU/EEA. The joint action is led by Austria (AGES/BASG) as the coordinator together with the national competent authorities of France (ANSM), Croatia (HALMED), and Hungary (NCPHP) as work package leaders. The three main objectives of EU4H 11 are as follows:

- enhancement of the Joint Audit Programme (JAP) for good manufacturing practice inspectorates in the EU/EEA;
- drafting of proposals for the inclusion of good distribution practice in the current Joint Audit Programme;
- introduction of harmonised training and qualification processes for GMP inspectors in cooperation with the PIC/S Inspectorates Academy (PIA).

Co-financing of the costs associated with the JAP activities supports participation of Member States in the JAP and initial as well as ongoing training of GMP inspectors to enhance the competences of GMP inspectors in the entire EU/EEA.

The total project budget for SÚKL is 87,740 EUR.

CHESSMEN

Coordination and Harmonization of the Existing Systems against Shortage of Medicine – European Network

The objective of the project is to support personnel and technical infrastructure of the EU Member States in the area of harmonisation of monitoring, communication, and new solutions preventing medicinal product shortages in the EU.

Sharing of approaches of EU Member States to the evaluation of root causes, prevention, monitoring, evaluation, IT solutions, and medicinal product shortage solutions. In individual technical work packages (WP), best practices will be shared and recommendations on a harmonised approach will be created. The aim of the project is, moreover, to complement and support activities in the sphere of medicine shortages with the tasks of other working groups and newly adopted legislation, such as the implementation of Regulation (EU) 123/2022.

The total project budget for SÚKL is 384,986 EUR.

CT-CURE

Clinical Trial Competitive multinational assessment timelines in the European Union ensuring Regulatory Excellence (CT-CURE)

The objective of the project is to support coordinated and accelerated assessments of clinical trials on anti-COVID-19 therapeutic agents and accelerated fight against the COVID-19 pandemic.

The CT-CURE project associates 15 EU Member States responsible for the assessment of clinical trials in the EU with a common, specific, and strategic task: to cater for harmonised and accelerated assessment of international clinical trials on anti-COVID-19 therapeutic agents with the utilisation of the Clinical Trials Information System (CTIS). The project aims to improve access to, availability, and affordability of medicinal products intended for the treatment of COVID-19, to support innovations concerning such products, and hence accelerate the fight against the COVID-19 pandemic. Another task of the project is to inform both commercial sponsors and the academia about this project – and for this purpose, the <https://ctcure.eu/> website has been developed.

The total project budget for SÚKL is 56,905 EUR.

SAFE CT

Safety assessment cooperation and facilitated conduct of clinical trials (SAFE CT)

The objective of the project is to enhance expert knowledge in the area of safety assessment in clinical trials; to support the initiation and maintenance of cooperation in the sphere of safety surveillance over clinical trials and implementation of the Clinical Trial Regulation No. 536/2014 (CTR).

The subject-matter of the project is to propose measures that will eventually increase the capacity for the assessment of safety data from clinical trials in the EU Member States. This concerns training of new safety assessors and enhancement of competence of all safety assessors. Harmonisation and alignment of assessment across the EU Member States and the achievement of safety assessment consistency are also essential. Other important tasks are mutual sharing of practical experience or problems and ways of finding solutions to achieve a uniform approach to safety assessment in clinical trials, which will be, in future, based upon the CTIS European portal and will serve for the assessment of safety information from clinical studies and risk assessment across EU Member States.

The total project budget for SÚKL is 135,453 EUR.

ASSETS

The total assets as of 31 December 2023 amounted to 1,395,995 thous. CZK, of which fixed assets were in the volume of 398,996 thous. CZK and current assets in the volume of 996,998 thous. CZK. Of the total liabilities of 1,395,995 thous. CZK, equity amounted to 1,343,900 thous. CZK and borrowed capital to 52,095 thous. CZK. Selected types of assets and liabilities are provided in Table 49.

Tab. 49 Overview of selected types of assets and liabilities of the organisation (thous. CZK)

Item	Past period 2022	Current period 2023
ASSETS	1,357,291	1,395,995
A. Total fixed assets	355,819	398,996
of which:		
I. Long-term intangible fixed assets – total	87,310	106,052
II. Long-term tangible fixed assets – total	268,509	292,944
of which:		
Lots	4,530	4,530
Buildings	221,985	244,260
Separate tangible movables and sets of tangible movables	35,654	38,555
Unfinished tangible fixed assets	6,340	5,599
B. Total current assets	1,001,472	996,998
of which:		
I. Inventory – total	153	157
II. Short-term receivables – total	17,476	15,971
III. Short-term financial assets – total	983,843	980,870
LIABILITIES	1,357,291	1,395,995
C. Equity	1,304,425	1,343,900
of which:		
I Assets of the accounting entity and adjustments	226,531	226,552
II. Funds of the accounting entity	941,425	936,517
Fund for Cultural and Social Needs	2,238	2,864
Reserve Fund	939,187	933,653
III. Economic result	-1,142,598	-1,253,977
Economic result for the current accounting period	-136 837	-111 380
Economic result for the previous accounting periods	-1,005,761	-1,142,598
IV. Income and expenditure account of the budget management	1,279,067	1,434,808
D. Total borrowed capital	52,866	52,095
of which:		
I. Total long-term liabilities	0	0
II. Total short-term liabilities	52,866	52,095

AUDITING

In 2023, no public administration audits conducted by control bodies pursuant to the Act on Financial Audits were carried out.

A woman in a white lab coat and blue safety goggles is looking through a blue and white microscope. She is wearing blue gloves and adjusting the slide. In the background, another person in a lab coat is visible, working at a desk. The scene is set in a laboratory with various glassware and equipment on the table.

7. FOCUS UPON EMPLOYEES

7.1 PERSONNEL ISSUES

ORGANISATIONAL STRUCTURE

In compliance with the Institute's systemisation approved for 2023 pursuant to Act No 234/2014 Coll., on Civil Service, as of 01 January 2023, the total number of systemised positions in the Institute was 587, of which 480 were civil service positions and 107 were employment positions.

As part of the organisational changes associated with the Institute's systemisation effective as of 01 January 2023, compared to 2022, the number of civil service and employment positions changed by four requirements for extra positions. All of the newly created positions are covered by extra-budgetary funds. The reason for the creation of the new positions was the implementation of new agendas set forth by legislation (amended Act No 634/1992 Coll., on Consumer Protection, Resolution of the Government of the Czech Republic No 296 of 13 April 2022).

In the course of 2023, several other systemisation modifications were implemented with effect as of 01 April 2023, 01 July 2023, and 01 October 2023; these modifications concerned changes to the subordination of civil service positions, changes to other attributes of civil service positions, and modifications in the appointment of managerial staff permanent substitutes. As at 01 July 2023, the number of civil service positions changed to 480 and the number of employment positions to 108. The increase in the number of employment positions was given by the cancellation of one full-time job position and the creation of two part-time job positions.

The number of physical employees on the Institute's payroll as of 31 December 2023 was 549 persons, of which 439 were women (i.e., 80 %) and 110 were men (i.e., 20 %).

As part of the Personal and Working Life Harmonisation Policy support, as of 31 December 2023, the total of 78 employees of the Institute (of which 77 were women), i.e., 14.2 % of the total number of employees, worked part-time.



587
systemised civil-service
and employment positions

Tab. 50 Numbers of employees at local workplaces as of 31 December 2023

Brno	35
České Budějovice	3
Hradec Králové	7
Olomouc	4
Ostrava	5
Plzeň	2
Praha	495

AGE STRUCTURE OF EMPLOYEES

Average age: females 43.5 years; males 42.9 years. The overall average age of all employees is 43.2 years.

Tab. 51 Age structure of employees as of 31 December 2023

Year	% of employees under 35 years	% of employees aged 36-55 years	% employees older than 55 years
2020	28.9	53.0	18.1
2021	27.1	53.3	19.6
2022	22.4	57.6	20.0
2023	23.3	57.5	19.2

QUALIFICATION STRUCTURE OF EMPLOYEES

Tab. 52 Qualification structure of employees by achieved level of education as of 31 December 2023

Highest achieved education	Primary	Secondary	Technical colleges	University – bachelor's degree	University – master's degree	Postgraduate
Number of employees	1	102	5	37	412	52
% of the total number of employees	0.16	16.75	0.82	6.08	67.65	8.54

* The data include employees taking their compensatory leave, maternity leave, and parental leave.

STAFF TURNOVER

The overall staff turnover taking into account all entries into and terminations of employment/civil service amounted to 12.82 %, which was a slight increase compared to 2022.

In the course of 2023, the total of 272 tenders for vacancies were opened, of which 85 job openings were filled (see Table 53).

Tab. 53 Overview of tenders completed pursuant to the Act on Civil Service (civil service positions) and pursuant to the Labour Code (employment positions) and associated entries into employment/civil service

	Civil service		Employment	
	No. of positions to be staffed through tenders	Staffed	No. of positions to be staffed through tenders	Staffed
Total	151	50	121	35

In 2023, the total of 66 employees/civil servants terminated their jobs, of which 31 were employment terminations and 35 were civil service terminations.

Tab. 54 Overview of employment and civil service terminations in 2023 by reason of employment/civil service termination

	Employment	Civil service
Cancellation of employment/civil service in probationary period	6	5
Agreed time expiry	3	0
Termination by agreement (Section 49 of the Labour Code)	11	0
Notices given by employees/termination of civil service upon request of the civil servant	8	22
Notices given due to organisational reasons/by decision of the civil service authority	1	4
Termination of civil service performance in SÚKL due to transfer of the civil servant to another civil service authority	–	2
Retirement	2	1
Total	31	35*

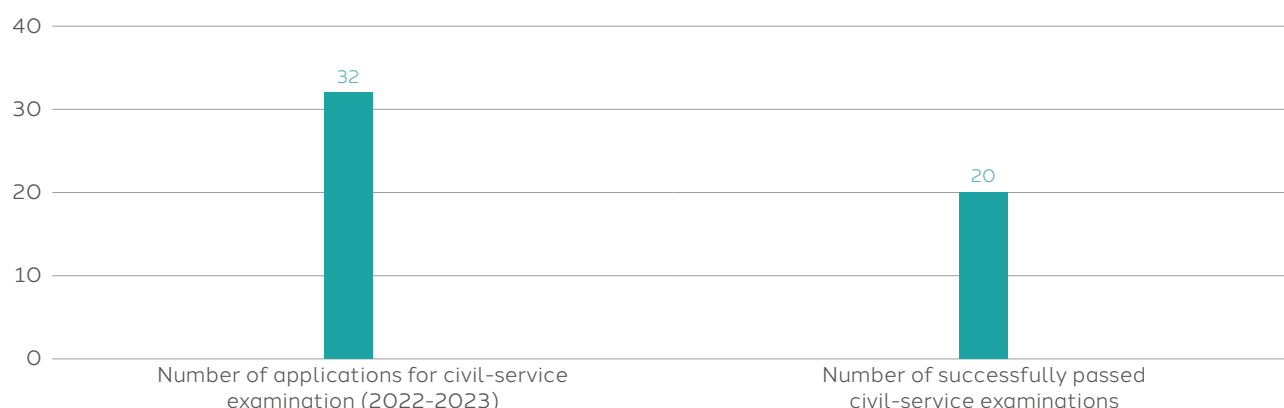
* Civil service terminations include, unfortunately, one termination due to death of the civil servant.

CIVIL-SERVICE EXAMINATION

Pursuant to Section 35 of Act No 234/2014 Coll., on Civil Service, a civil servant is obliged to successfully complete a civil-service examination comprising of two parts – the general part and a specialised part (depending on the field of service).

Twelve applications were brought forward from 2022 to the next calendar year and in the course of 2023, 20 new applications submitted by the employees of the Institute were registered, which amounts to 32 applications in total. Of the total number, 20 employees successfully passed both parts of the civil-service examination in 2023. The remaining twelve employees will take the examination in 2024 (within twelve months of their recruitment as civil servants, as stipulated by the Act on Civil Service).

Of the total number of civil-service examinations taken, all of the employees successfully passed the concerned civil-service examination on the first attempt.

Fig. 35 Civil-service examinations in 2023

7.2 EMPLOYEE EDUCATION

In 2023, employee education assumed mostly the form of personally attended courses. Where a course or a seminar was offered also in the on-line form, the employees availed also of this form of education.

As part of initial education, all new employees were trained in all topics stipulated by the currently effective legislation: *employee evaluation, basic information about the Institute and its internal regulations, information security incl. personal data protection, quality management, the Code of Ethics, internal regulation of conflict of interest, human rights protection, equality of men and women, prohibited discrimination, environmental responsibility, and whistle-blower protection.*

Other, follow-up employee education focused particularly upon expert education, due to the high demands on staff expertise, implementation of legislative changes, and the need for continuous deepening and increasing of qualification and knowledge of our staff in individual fields. In the course of the year, regular internal training in the Athena documentary service was taking place, particularly with focus upon new users.

The employees also travelled abroad for business trips during which they attended specialised educational events and they were sent to study courses to increase their qualification.

Management training focused particularly on the development of personal talents and management skills. For the purposes of this type of education, case studies, model situations, and results from research in the field of neuroscience and occupational psychology were used.

Furthermore, in 2023, internal language courses for employees were organised on the basis of current needs, strategies, and objectives of the Institute. Language courses were intended primarily for the employees of expert organisational units who use the English language for necessary working purposes and for employees representing the Institute in international institutions, audits, and inspections.

The total volume of funds incurred for all types of educational activities amounted to **2,127,466 CZK**.

Tab. 55 Overview of educational activities in 2023 – follow-up education

Type of event	Number of events	Number of hours	Number of attendees
Specialised courses & training; language courses	2,165	6,555	1,079
Mandatory training	184	1,339	657
Foreign specialised training	23	429	25

A woman with blonde hair tied back, wearing a white lab coat over a grey top, is looking down at a tablet computer she is holding. She is in a laboratory setting, with various glass bottles and equipment visible in the background. The image has a teal overlay on the left side with concentric white circles.

8. INFORMATION DISCLOSURE PURSUANT TO ACT NO 106/1999 COLL.

2023

Annual Report on Information Disclosure pursuant to Section 18 of Act No 106/1999 Coll., on Free Access to Information, as amended (hereinafter referred to as the “Act on Free Access to Information”).

PARAGRAPH 1(A)

In 2023, the State Institute for Drug Control received 237 requests for information lodged in compliance with the Act on Free Access to Information. In 30 cases, a decision declining the request was issued, and in 10 cases, a decision declining some part of the request was issued.

PARAGRAPH 1(B)

In five cases, an appeal against the decision declining the request was filed.

PARAGRAPH 1(C)

No court procedures regarding information disclosure pursuant to the Act on Free Access to Information were held.

PARAGRAPH 1(D)

The State Institute for Drug Control did not grant any exclusive licence for information disclosure pursuant to the Act on Free Access to Information.

PARAGRAPH 1(E)

In association with information disclosure pursuant to the Act on Free Access to Information, four complaints concerning the course of action taken when addressing the request for information were filed.



9. FOCUS UPON QUALITY



SÚKL has an established and certified quality management system compliant with the requirements set forth by the ČSN EN ISO 9001 standard and the Methodological Guideline for Quality Management in Civil-Service Authorities.

The Laboratory Control Department has developed a management system compliant with the ČSN EN ISO/IEC 17025 standard.

In May 2023, SÚKL was awarded the Ministry of Interior Prize for Quality in Public Administration for 2022 for long-term development of the quality management system pursuant to ISO 9001.

In November 2023, the LL-C (Certification) Czech Republic, s.r.o., certification body carried out a recertification audit of SÚKL's processes and noted that the Institute's quality management system meets the requirements set forth by the aforementioned standard and ensures their proper implementation as well as the provision of services in line with the requirements of clients or relevant acts and regulations, so as to enhance stakeholder satisfaction.

Safeguarding the necessary standard of quality management forms an integral part of all key and auxiliary processes in SÚKL.

BENCHMARKING

In 2023, the fifth "Benchmarking of European Medicines Agencies" (BEMA V) exercise took place in SÚKL. BEMA V focused upon processes in the area of management, marketing authorisation of medicinal products, clinical trials, pharmacovigilance, inspections, and medicinal product availability. The primary objective of this benchmarking is to improve the operation of the entire European network of medicines agencies and to share lessons learned from the experience of other EU agencies.

The benchmarking exercise is based upon the preparation of self-evaluation of process maturity in predefined areas according to pre-set specific performance indicators (SPIs; for the fifth BEMA cycle, a questionnaire with 40 SPIs was prepared) and subsequent peer review by specifically trained assessors from other EU medicines agencies.

More than 30 SÚKL employees were involved in the drafting of the self-assessment report and in subsequent preparations for the peer review in the period from February to November 2023. Thereafter, in the course of a three-day visit of external assessors from the Slovak, Latvian, and Hungarian medicines agencies that took place in December, SÚKL's performance was independently evaluated against the predefined indicators according to evaluation criteria. Compared to the assessment from 2017, a major improvement was again accomplished and SÚKL achieved the excellent average rating of 4,29 (of the maximum rating of 5).

SÚKL continues to be involved in the EU medicines agency benchmarking programme.

INTERNAL AUDITS

The functionality of the quality management system and process effectiveness were being continuously checked also within the scope of internal audits; in 2023, 17 such internal audit were completed. One of the scheduled internal audits of the quality management system for the agenda of Good Clinical Practice of the Inspection Department was not conducted, as it was impossible to agree on a replacement date for the audit, and this internal audit was hence included in the 2024 internal audit plan.

The internal audit plan is based upon the 2021–2025 Audit Strategy and upon risk analysis.

Tab. 56 Development of QMS internal audits in the period of 2021–2023

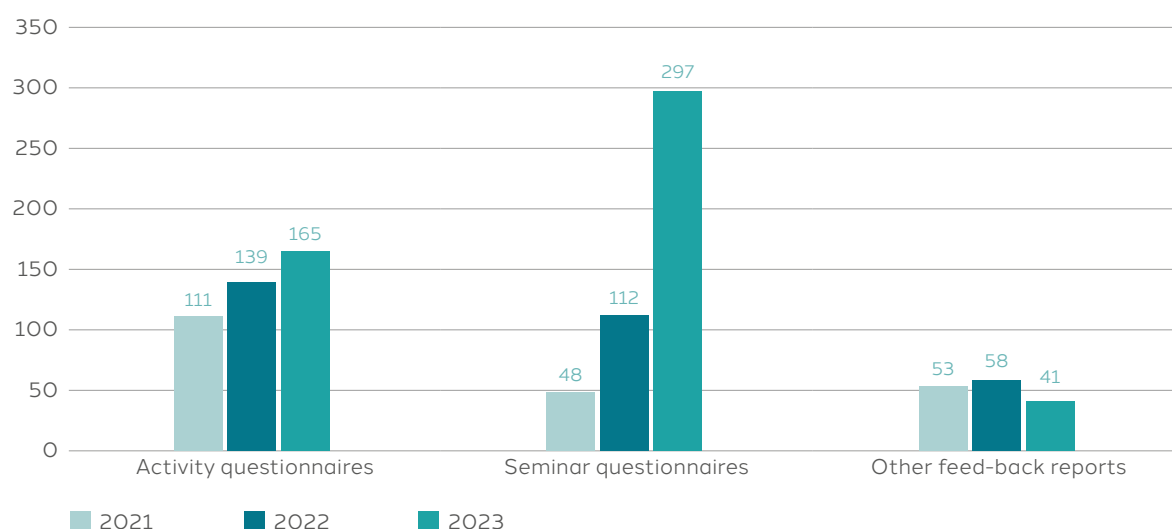
Year	2019	2020	2021	2022	2023
Number of completed QMS audits	20	23	21	12	17
Number of identified nonconformities	3	0	4	15	6
Number of identified shortcomings	7	1	14	9	2
Number of recommendations for improvement	42	45	69	46	46
Number of new risks	11	7	23	14	21

FEED-BACK

SÚKL continuously strives to perform activities at a high standard, predictably, using transparent documentation, at as short timelines as practicable, and in the required quality, keeping an open mind to stimuli, observing ethic rules, environmentally friendly behaviour, and safety at work. All of these efforts are aimed at increasing stakeholder satisfaction, at creating a positive image of SÚKL, and at achieving international recognition.

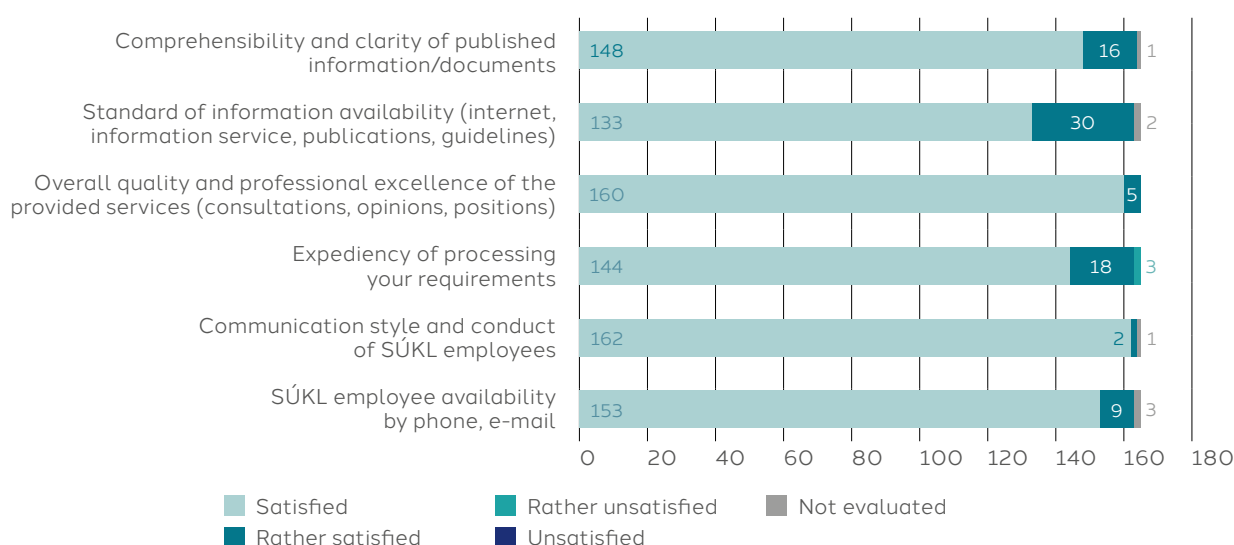
In 2023, we received 503 feed-back reports from external entities which were provided in the form of answers to questions in satisfaction surveys or as opinions submitted in other forms.

Fig. 36 Feed-back obtained in the period of 2021–2023



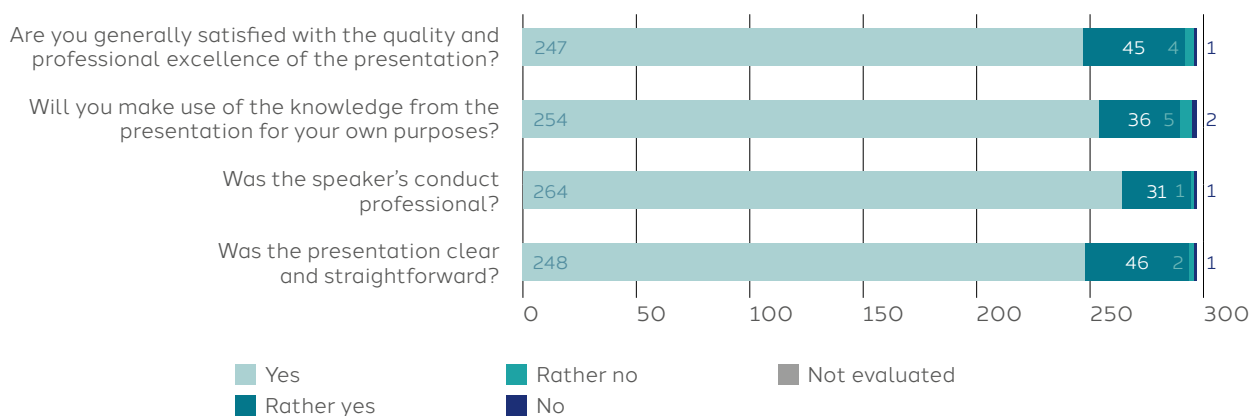
The answers to questions from questionnaires focusing upon SÚKL's activities suggest that the stakeholders were the least satisfied with the "expediency of request processing", where three respondents were rather unsatisfied and 18 respondents were rather satisfied, and with the "standard of information availability", where 30 respondents were rather satisfied.

Fig. 37 Outcomes of questionnaires focusing upon SÚKL's activities



The answers provided in questionnaires focusing upon SÚKL's seminars or presentations suggest that the lowest satisfaction level was for the item "Will you make use of the knowledge from the presentation for your own purposes?", where two respondents would not use the knowledge at all and five respondents answered "rather no". Furthermore, four respondents were rather unsatisfied with the "quality and professional excellence of the presentation" and one respondent was unsatisfied with everything that SÚKL presented and how it was presented.

Fig. 38 Outcomes of questionnaires focused upon SÚKL's seminars or presentations



SÚKL much appreciates any stimuli and comments from the obtained feed-back, as these are a step towards ensuring a higher effectiveness and improvement of our activities. Most of the stimuli for improvement received in 2023 concerned the organisation of seminars. Also in the coming year, our employees will organise numerous seminars for external entities to provide education on good practice or to inform about new regulation or changes.



10. STRATEGY

MISSION

Public health protection and support on the basis of effective regulation in areas within the scope of SÚKL's powers, based on state-of-the-art scientific and research knowledge. SÚKL fulfils its mission within the scope of competences set forth by legal regulations through medicinal product and medical device regulation aimed at safeguarding their quality, efficacy, and safety in clinical practice.

VISION

SÚKL as an independent, competent, professionally sound, economically stable regulatory authority respected both nationally and internationally, with high degree of transparency, flexibility, predictability of decision-making practice and independence, governed by high standards of quality of work.

STRATEGY

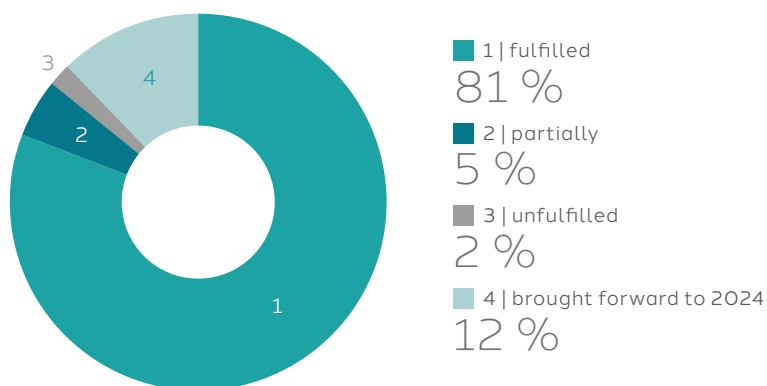
For the fulfilment of its mission and achievement of its vision, SÚKL has developed the Strategic Plan of the State Institute for Drug Control for the Period of 2021–2025, including strategic aims, the fulfilment of which is reviewed on an annual basis by SÚKL Management.

In total, 12 % of unfulfilled or partially fulfilled specific objectives are brought forward to the next period.

Seven per cent of specific objectives have been partially fulfilled or unfulfilled in terms of their defined target values.

Most often, the failure to fulfil an objective within the predefined timeline was caused by external factors, incorrect planning, lack of capacities (be it on the part of SÚKL or on the part of the vendor), and complications arising in public contracts.

Fig. 39 Specific objective fulfilment in 2021–2023



The background of the slide is a vibrant, futuristic digital interface. On the left, a robotic hand with blue and red mechanical components is positioned as if interacting with the interface. The interface itself is filled with glowing red and blue data, including various graphs, charts, and numerical readouts. A prominent feature is a large, glowing red heart shape, which appears to be a central element of the data being presented. The overall aesthetic is high-tech and cybernetic, with a strong emphasis on red and blue lighting. In the top left corner, there are several concentric, semi-transparent white and light blue circular arcs that create a sense of motion or signal waves.

11. INFORMATION SECURITY MANAGEMENT POLICY AND CYBERSECURITY

Every year, the demands for safeguarding cybersecurity are higher and higher and this trend continued also in 2023.

The number of noted cybersecurity attacks aimed at SÚKL's information systems was high also in 2023; nevertheless, none of the attacks was successful.

V May 2023, the Institute successfully passed a surveillance audit of the information security management system (ISMS) pursuant to the ČSN ISO/IEC 27001:2014 standard, which means that it has been the holder of the relevant certificate for as long as 16 years.

In mid-year, the role of the Cybersecurity Manager was re-staffed and the position is currently outsourced.

In August 2023, a regular communication exercise, Comm Czech 2023, took place in SÚKL; the exercise was managed by the National Cyber and Information Security Agency (NÚKIB) and its purpose was to check the availability and currency of the notified contacts.



12. OUTLOOK FOR 2024



2024 is the year of great expectations and positive changes in the area of ensuring medicinal product availability for our patients. We are in for the implementation of an extensive amendment to the Act on Pharmaceuticals (456/2023 Coll.). This amendment introduces new measures in support of medicinal product availability on the market and new obligations for marketing authorisation holders, distributors, as well as pharmacies. SÚKL will establish and launch a new system for the collection, evaluation, and publication of data on medicinal product availability and their stock levels. Furthermore, modifications will be made to the ePrescription system; processes for the determination of prices and reimbursements of replacement medicinal products will be established. Using the newly available data and staff trained in these issues, the Institute will focus upon a more precise monitoring of medicinal product movements. A higher focus upon preventing and addressing medicines shortages by appropriate, targeted, and early intervention can be expected. In 2024, we will concentrate also on the education of both professionals and patients, particularly with a view to the publication of information on the movements and availability of medicinal products in the distribution chain. Apps for doctors and for patients will display the stock levels of medicinal products with the limited availability flag. To facilitate patient navigation, a map displaying 20 closest pharmacies where the prescribed medicinal product was in stock the previous evening is to be included.

It is encouraging to see that in recent years, on the European level, the numbers of decentralised procedures with the Czech Republic acting as the Reference Member State have been significantly increasing (in 2023, SÚKL ranked 5th in terms of the number of launched procedures); equally, SÚKL's involvement in the assessment of centralised procedures has been growing. The primary specialisation is that of biosimilars, an area where SÚKL has one of the five most active assessor teams. With regard to the limited assessor capacities in the EU, SÚKL becomes involved in international assessor teams more and more often; these teams contribute to operational allocation of procedures and enable more expedient assessment of new medicinal products. SÚKL successfully continues and constantly enhances its active involvement in committees and working groups of the European Medicines Agency (EMA) and the Heads of Medicines Agencies (HMA) network, particularly in the Committee for Medicinal Products for Human Use (CHMP), the Pharmacovigilance Risk Assessment Committee (PRAC) or the renowned Scientific Advice Working Party (SAWP). SÚKL plans to continue to develop its global position of a transparent, accommodating authority sought by regulated entities also in the coming years. We believe that even in the years to come, the Institute will successfully increase its involvement in centralised procedures both in the role of the CHMP rapporteur/co-rapporteur and in the role of the PRAC rapporteur and, last but not least, also its involvement in quality assessments within the SAWP. We will continue to support and develop the provision of important safety information on medicinal products via the ePrescription functionalities, the medication record or through direct communication with healthcare professionals and patient organisations. SÚKL will carry on its active involvement in the sphere of submission of clinical trial applications via the new Clinical Trials Information System (CTIS). At the same time, 2024 is the last year of the transition period when it is necessary to switch ongoing clinical trials approved or authorised nationally to the regimen governed by Regulation 536/2014 on clinical trials, and submit them via the CTIS. This is a major challenge brining an unprecedented increase in the agenda, as it will be necessary to complete such switch for almost 500 studies, while maintaining the processing of newly submitted applications. In 2024, SÚKL will also prepare for the implementation of the new Regulation 1234/2008 (amending regulation) which is to come into effect on 01 January 2025. Furthermore, SÚKL is involved in the IncreaseNET joint action, the purpose of which is to support the enhancement of expert assessor capacities in medicines agencies.

We will continue to support and develop the provision of important safety information on medicinal products via the ePrescription functionalities, the medication record or through direct communication with healthcare professionals and patient organisations.

In the area of medical device regulation, in 2024, SÚKL intends to carry on activities associated with the implementation of obligations implied by Regulation EU 745/2017, on medical devices (MDR), and Regulation EU 746/2017, on in vitro diagnostic medical devices (IVDR). The aforementioned entails the set-up and conduct of surveillance activities in the form of inspections of economic operators, modifications of vigilance processes and assessment of applications for the authorisation of clinical investigations and performance studies, and, where necessary with a view to public interest protection, also through penalisation procedures. In association with the new legislation, SÚKL staff will be actively involved in international projects under the auspices of the EU4Health programme in the area of vigilance and market surveillance and will actively

participate in working groups on the EU level. Due to the fact that the new Regulations introduce new obligations for some of the economic operators, such as manufacturers of custom-made devices and manufacturers of so called in-house devices, SÚKL will focus its activities upon field education and preparation of recommendatory guidance in cooperation with the concerned entities. In the first quarter of 2024, the new Medical Device Information System (ISZP) will be launched. It will partially replace the processes previously performed in the Medical Device Registry (RZPRO) and, in future, it will be connected to the prepared European database of medical devices (EUDAMED) established by the European Commission.

In the agendas that are within SÚKL's powers, the employees of the Institute represent the Czech Republic in negotiations concerning new legislative proposals and non-legislative documents on the EU Council working level and they provide expert support for all levels of negotiations, including the meeting of the Employment, Social Policy, Health and Consumer Affairs Council (EPSCO) of ministers. SÚKL, as the leader, draws down the framework position, which is approved by the government and which defines the basic position of the Czech Republic and essential, insuperable limits, so called red lines. During the negotiations, SÚKL then prepares instructions and attends negotiations with other Member States aimed at arriving at a joint position of the Council and in finding a common compromise also in the following phase of dialogues with the European Parliament and with the European Commission. As regards SÚKL's powers, we expect that in 2024, primary attention will be given to negotiations concerning the revision of general pharmaceutical legislation, i.e., Regulation (EU) 726/2004 and Directive 2001/83/EC, which was submitted in April 2023. SÚKL will be also involved in the drafting of legislation implementing the HTA Regulation and the Regulation on standards of quality and safety for substances of human origin.

In 2024, the laboratories of SÚKL's Laboratory Control Department are expected to become more involved in monoclonal antibody analyses within the scope of international cooperation of the Official Medicines Control Laboratories, specifically by the introduction of a new method of capillary electrophoresis, which is intended primarily for purity testing. An integral part of the Department's development is the maintenance and improvement of the quality system as per the ISO/IEE 17025 standard for control and calibration laboratories. SÚKL will undertake intensive preparations for an international audit that is scheduled for 2025. In compliance with SÚKL's approved strategy for the period of 2021–2025, our objective is to sustain a consistent and transparent control system which has been built for many years, and keep a team of qualified experts and inspectors capable of ad hoc interventions anywhere in the Czech Republic without affecting the efficiency of the performed surveillance activities. Our constant aim is to enhance the quality of the conducted activities, to fully avail of all information resources of the Institute, and to improve the established processes of controls, their professional conduct, synchronisation of individual actions, and optimisation and adequacy of control duration. We wish to continue to build on the successfully developing consultation and education activities intended for professionals and control efficiency enhancement in the area of price regulation, including active cooperation in processes associated with ensuring the availability of medicinal products for the needs of Czech patients.

SÚKL will continue to employ its well-established processes in the area of addressing quality defects of pharmaceuticals, occurrence of counterfeit products in the legal distribution chain, impacts of identified nonconformities with GMP principles at manufacturers of pharmaceuticals upon the quality of medicines in the Czech Republic, and in the area of addressing safety feature issues also in 2024. In 2024, the Institute will strive to enhance the awareness of quality defects of pharmaceuticals both for professionals and for the general public; the priority in the area of safety features will be the provision of information about the use of the Alert Management System (AMS) for the field. In the sphere of enforcement, the priority for 2024 is to deepen cooperation with the General Directorate of Customs and with the individual customs authorities in detecting illegal possession of medicinal products or other forms of illegal handling thereof, identified during control activities by surveillance units of the customs authorities. Extended cooperation in these activities, where we avail of our long-term experience in the determination of whether a product is a medicinal product or another product, and the knowledge of authorised entities in the area of Good Manufacturing Practice and Good Distribution Practice of medicinal products, will be a significant contribution in combatting illegal trade with medicinal products and counterfeit products.

A major challenge for 2024 is the preparation of a new information system for the conduct and record-keeping of administrative procedures in the Section of Pricing and Reimbursement Regulation. The new system will provide a more expedient and easier access to information about administrative procedures and their current state both to the parties to the procedure and to the general public. SÚKL will continue to enhance the provision of information about its activities in the area of pricing and reimbursement regulation of medicinal products/foods for special medical purposes for professionals as well as for the general public and help cultivate the HTA environment in the Czech Republic by organising regular seminars or by taking part in external lectures and training sessions. In 2024, much attention will be paid to the implementation of the EU HTA Regulation which brings also greater demands on the time and development of expert knowledge of SÚKL's staff. For this reason, attention will be given to increasing the effectiveness and optimisation of existing as well as new processes and to the development of expert knowledge of the assessor team.

Further development will be carried out also in the area of cross-border exchange of ePrescriptions. At the moment, six EU countries are involved; in the coming weeks, however, two or three new countries are expected to join, and, by the end of the year, other countries will become involved. A major new feature in the ePrescription system will be the proposed registry of limits of deductible out-of-pocket payments for partially reimbursed medicinal products. For each insured, a protection limit of payments for medicinal products partially reimbursed from the public health insurance funds has been set up. At present, health insurance companies analyse potential cases of exceeded limits; the health insurance companies then return such overpayments to patients on a quarterly basis. With regard to the standard legislative process, we expect that

if the proposal is approved, as of 01 January 2025, the control of the limit will be carried out online via the ePrescription system upon each dispensing of a prescribed partially reimbursed medicinal product in a pharmacy. This will much increase the patient comfort, as at the moment the limit is spent, the patient will no longer pay the amount of the deductible out-of-pocket payment in the pharmacy, but instead, the pharmacy will receive such amounts from the concerned health insurance company at the time of settlement.

Last but not least, it should be mentioned that as part of its effort to enhance the quality of communication with professionals as well as with the general public, in 2024, we plan to launch a new website which will unify all of the existing SÚKL's websites. It is our strategic objective to make the new website a modern platform for the presentation of information reflecting current trends and demands for the availability of information, easy-to-navigate layout and visual design, and search options. SÚKL's long-term aim is to be perceived both by professionals and by the general public as the primary source of expert, comprehensible and verified information about authorised medicinal products, notified medical devices, and about reimbursements of such products or devices.



13. LIST OF ABBREVIATIONS

ACT EU	The Accelerating Clinical Trials in the European Union
ACRO	Association of Clinical Research Organizations of Czech Republic
AD	Alzheimer's disease
AGES	Austrian Medicines and Medical Devices Agency
AIFP	Association of Innovative Pharmaceutical Industry (Asociace inovativního farmaceutického průmyslu)
AM	Addition of the Czech Republic as a new Member State to a previously authorised clinical trial
AMR	Antimicrobial resistance
ANSM	National Agency for the Safety of Medicines and Health Products
ASTERx	Information system for administrative procedures in the area of pricing and reimbursement
ATC	Anatomical Therapeutic Chemical
ATD	Anti-tampering device
BASG	The Federal Office for Safety in Health Care
BEMA	Benchmarking of European Medicines Agencies
CAT	Committee for Advanced Therapies
CAU	Pricing and Reimbursement Regulation Section
CDNÚ	Central Database of Adverse Drug Reactions
CEN	Price control
CHMP	Committee for Medicinal Products for Human Use
CKS	End-user price
CMDh	Coordination Group for Mutual Recognition and Decentralised Procedures – Human
CMS	Concerned Member State
CP	Price zone
CRLN	National chemical reference substances
CRO	Contract Research Organization
CRS	Chemical Reference Substance
CTAG	Clinical Trials Advisory Group
CTCG	Clinical Trials Coordination Group
CT-CURE	European Union ensuring Regulatory Excellence
CTEG	Clinical Trial Expert Group
CTIS	Clinical Trial Information System
CTR	Clinical Trial Regulation
CÚEO	Central Repository of Vaccination Records (Centrální úložiště záznamů o očkování)
CÚEP	Central Repository of Electronic Orders (Centrální úložiště elektronických poukazů)
CÚER	Central Repository of Electronic Prescriptions (Centrální úložiště elektronických receptů)
CZECRIN	Czech Clinical Research Infrastructure Network
ČAFF	Czech Association of Pharmaceutical Companies (Česká asociace farmaceutických firem)
Cz.Ph.	Czech Pharmacopoeia
ČR	Czech Republic

ČSN	Czech technical standard
ČSN EN ISO	Czech version of an international standard (adopted by the European Committee for Standardization)
ČSN EN ISO/IEC	Czech version of a standard published by the International Organization for Standardization and by the International Electrotechnical Commission (adopted by CEN)
ČSSZ	Czech Social Security Administration (Česká správa sociálního zabezpečení)
DCP	Decentralised Procedure for marketing authorisations
DDD	Daily defined dose
DIS	Distributor of tissues and cells
DIS-13	Distributed medicinal product supply and stock report
DOV	Importers
DJ	Defined unit
DL	Diagnostic laboratory
DLBCL	Diffuse large B-cell lymphoma
DLL	Importers of active substances
DLP	Database of medicinal products (Databáze léčivých přípravků)
DPV	Parenteral nutrition products for home therapy
DRZP	Medical Device Advertising Surveillance Unit
EDQM	European Directorate for the Quality of Medicines
EEA	European Economic Area
EMA	European Medicines Agency
EC	European Communities
EU	European Union
EUDAMED	European database of medical devices
EudraGMP	European Community of Manufacturing Authorisations and of Certificates of Good Manufacturing Practice
EV EWG	EudraVigilance Expert Working Group
FF	Pharmaceutical Faculty
FIH	First-in-human
FKSP	Fund of social and cultural needs
FN	University Hospital
FSCA	Field Safety Corrective Action
FSN	Field Safety Notice
PV	Pharmacovigilance
GMO	Genetically modified organisms
HALMED	Medicines and Medical Products Agency
HARP	Harmonisation of risk management plans
HAV	Human autogenous vaccines
HLP	Medicinal products for human use
HMA	Heads of Medicines Agencies
HTA	Health Technology Assessment
HVLP	Proprietary medicinal products
IKEM	Institute for Clinical and Experimental Medicine
IMPD	Investigational Medicinal Product Dossier
INIT	Initial applications
INN WHO	International Non-proprietary Name
IPLP	Individually prepared medicinal product

IPVZ	Institute for Postgraduate Medical Education
ISDB	International Society of Drug Bulletins
ISMS	Information Security Management System
ISO	International Organization for Standardization
ISZP	Medical device information system (Informační systém zdravotnických prostředků)
IVD	In-vitro diagnostic medical device
IVDR	In Vitro Diagnostic Medical Device Regulation
JAP	Joint Audit Programme
KB	Blood bank
CT	Clinical trial
KHZP	Medical Device Clinical Trials Unit
QC	Quality control
KLP	Cannabis for medical use
KOČ	Expert Activity Coordination Unit
KON	Control Unit
KOP	Medical Device Control and Expert Opinion Unit
CIMD	Clinical investigation of medical devices
LER	Low Endotoxin Recovery
LK	Pharmacopoeia Commission
AS	Active substance
LMS	Lead Member State
MP	Medicinal product
ATMP	Advanced therapy medicinal products
HTC	Human tissues and cells
MAG	Magistral formula
MAH	Marketing Authorisation Holder
MC	Maximum price
MDCG	Medical Devices Coordination Group
MDR	Medical Device Regulation
MRA	Medicine Regulatory Authority
MRP	Mutual Recognition Procedure
MSSG	Executive Steering Group on Shortages and Safety of Medicinal Products
MoH	Ministry of Health of the Czech Republic
MŽP	Ministry of Environment of the Czech Republic
NCAR	National Competent Authority Report (medical devices)
NCPHP	The North Carolina Professionals Health Program
NCR	Non-Compliance Report
NOOL	Organisation for Medicines Verification (Národní organizace pro ověřování pravosti léčiv, z. s.)
AE	Adverse events
NPC	National Antidrug Centre (Národní protidrogová centrála)
ADR	Adverse drug reaction
NÚKIB	National Cyber and Information Security Agency
OCABR	Official Control Authority Batch Release
OECD	Organisation for Economic Co-operation and Development
OEČ	Expert Activity Department

OFN	SÚKL's Pharmacovigilance Department
OFV	Pharmacovigilance Department
OLZP	Pharmaceuticals and Medical Devices Department
OMCL	Official Medicines Control Laboratories
ONM	Nuclear Medicine Department
OOP	General Measure
OOVL	Detached pharmaceuticals dispensing unit
OP	Profit margin
OS	Consumer protection
OZ	Donation centre
PČR	Czech Police
PhV	Pharmacovigilance
PhV IWG	Pharmacovigilance Inspectors Working Group
PIA	PIC/S Inspectorates' Academy
PIC/S	Pharmaceutical Inspection Co-operation Scheme
PMSV	Post-Market Surveillance and Vigilance Working Group
POS	Providers
PPZ	Medical Device Legal Support Unit
PRAC	Pharmacovigilance Risk Assessment Committee
PSMF	Pharmacovigilance System Master File
PSUR	Periodic Safety Update Report
PSUSA	Periodic Safety Update Single Assessment
PTS	Proficiency Testing Study
PZLÚ	Foods for special medical purposes
RA	Rapid Alert
RAB	Rapid Alert System for Blood and Blood Components
RAN	Rapid Alert Network
RAN	Registration and Notification Unit
RATC	Rapid Alert System for Human Tissues and Cells
RF	Radiopharmaceuticals
RLPO	Registry of Restricted Active Substances (Registr pro léčivé látky s omezením)
RMS	Reference Member State
ROB	Registry of Inhabitants (Registr obyvatel)
RZPRO	Registry of Medical Devices (Registr zdravotnických prostředků)
SAE	Serious Adverse Event
SAFE CT	Safety assessment cooperation and facilitated conduct of clinical trials
SAKL	State Agency for Medical Cannabis
SCAU	Foods for special medical purposes reimbursed from health insurance funds
GDP	Good Distribution Practice
SER	Servicing persons
GCP	Good Clinical Practice
GLP	Good Laboratory Practice
SM	Submitted applications for substantial modification
QMS	Quality Management System
SPI	Specific performance indicator

SpTP	Specific therapeutic programme
SPOC	Single point of contact
SPOC WP	Single Point of Contact Working Party
AP	Administrative procedure
SSL	Secure Socket Layer
SŠ	Secondary school
SÚKL	State Institute for Drug Control
SUP	Suspected unknown product
SUSAR	Suspected Unexpected Serious Adverse Reaction
GMP	Good Manufacturing Practice
SYS	Systems, Education, and European Affairs Unit
CAFIA	Czech Agriculture and Food Inspection Authority
ŠÚKL	Slovak State Institute for Drug Control
TB	Tissues and Cells Group
TIO	Press and Information Unit
TP	Transfusion products
TTR	Transition trials
TZ	Tissue centre
UHR	Reimbursement
ÚZIS	Institute of Health Information and Statistics of the Czech Republic (Ústav zdravotnických informací a statistiky)
UZP	Medical Device Reimbursement Unit
VIG	Medical Device Vigilance Unit
VOŠ	Technical college
VŘ	Tender
VŠ	University
VŠCHT	University of Chemistry and Technology Prague
VUC	Material price regulation
VYD	Dispensing persons
VYR	Manufacturers
WHO	World Health Organisation
WP	Work packages
ZJ	Quality Defects Unit
ZNP	Serious incident
ZNR	Serious adverse reaction
ZNU	Serious adverse effect
ZoRR	Act on Advertising Regulation
ZP	Health insurance
ZP	Medical device
ZTS	Blood centre
ZZ	Healthcare facility



STATE INSTITUTE FOR DRUG CONTROL

Šrobárova 48
100 41 Praha 10
Czech Republic

phone: +420 272 185 111
fax: +420 271 732 377
e-mail: posta@sukl.cz

www.sukl.cz / www.sukl.eu