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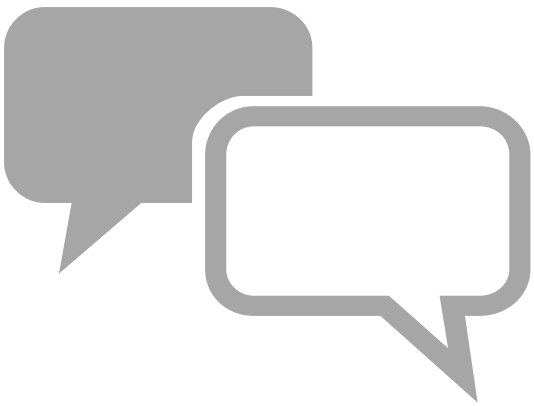

Department of Health
Review of Medicines and Medical Devices Regulation – First Report

Stakeholder Forums

Summary of feedback

Medicines Forum

5 August 2015
Recommendations 3-9, 13

In collaboration with:

Industry associations

Consumer groups

Clinical and professional groups

Government agencies

In consultation with:

THINKPLACE
Bridging vision and reality

Key themes emerging from the forums – Stakeholder comments

Efficiency without lowering the standard of regulation

Stakeholders want more streamlined processes and reduced duplication, but do not want to see a reduction in the current high standard of regulation in Australia.

The devil is in the detail

Ongoing engagement with stakeholders throughout the design process will be critical in ensuring the long-term success, viability and uptake of the Reviews Recommendations and that expectations are met.

Enhanced post market monitoring

Stakeholders consider it essential that any changes in pre-market assessments needs to be balanced by more robust post-market monitoring and appropriate enforcement.

Ensure sufficient resourcing for the Therapeutic Goods Administration

Stakeholders acknowledge that implementation and ongoing management of the changes suggested by the recommendations would require reallocation of resources within Therapeutic Goods Administration (TGA). Stakeholders identified sufficient resourcing for the TGA as essential for the successful implementation of the recommendations discussed.

Decision-Making Structure

Further work will need to be undertaken in considering how Recommendation 29 would work in practice and possible alternatives to the proposed decision-making structure of the regulator, that will bring greater transparency to the current decision-making process and opportunities for greater engagement by sponsors and consumers.

Medicines Forum

5 August 2015

Recommendations 3-9, 13

Main points discussed by the stakeholders about recommendations in focus:

Benefits

- There was overall support for the 3 Pathways outlined in Recommendations 3-9, however some stakeholders advised that Pathway 1 would be the main pathway they used.
- The Recommendations will provide flexibility and choice through multiple pathways for NCEs and generics, and more process possibilities for variations.
- Likely to reduce duplication as there will be only one international report required under Pathway 2 and Pathway 3.
- The Recommendations have the potential to provide faster, increased access to products in Australia.
- May create greater incentive for sponsors to bring their products to the Australian market.
- In general, there was overall support for Recommendation 13 ("do and tell"), as risk-based assessment of variations are likely to increase efficiency and result in a significant workload reduction for both sponsors and the regulator.

Risks

- Potential that the fast tracked pathway (Pathway 3) may be misused. New mechanism to detect misuse will be required.

- The new pathways (Pathways 2-3) do not necessarily reduce timeframes and may even increase timeframes due to:
  - Accessing un-redacted reports could be very time consuming for sponsors.
  - Waiting for overseas reports to be completed.

- Need to ensure that the new pathways (Pathways 2-3) do not increase timeframes for Pathway 1 by diverting resources from the existing pathway/s.

- There is a risk that benefits achieved through process improvements, such as increased interaction between the regulator and sponsors will be lost through implementation of these pathways.

- Post market monitoring – if the regulator uses overseas reports, how will post-market evaluations be undertaken without a full dataset?

Medicines Forum

5 August 2015

Recommendations 3-9, 13

Main points discussed by the stakeholders about recommendations in focus:

Considerations

- The details of design need to be considered in collaboration with stakeholders. For example:
  - Will decisions about designation of pathways be reviewable?
  - What will be the level of acceptable differences allowed before a Pathway 2 application goes to Pathway 1 (Rec 3-9, Pathway 2).
  - What if two [overseas] NRAs don't make the same decision in relation to a medicine? (Rec 3-9, Pathway 2) Does this mean that the regulator would require a Pathway 1 decision to be made?
  - Clearly defined criteria for Pathway 3 approval is critical (Rec 3-9, Pathway 3) .
  - How will different types of medicines be handled such as orphan, rare and super rare medicines? (Rec 3-9)
  - How will variations to new / novel indications and / or populations for existing NCEs be handled if they have come through Pathway 2 or 3? (Rec 13)
  - Practicalities of work-sharing and information sharing (Rec 3-9, Pathway 1)
- The new pathways should be monitored and evaluated to measure performance [and] effectiveness
- A different pathway may be required for biosimilars given their differences from generics
- Look to other jurisdictions for models such as Singapore and New Zealand in relation to the use of evaluation reports of other regulators
- Ensure adequate resources for the TGA for implementation and ongoing management
  - Resources will need to be redirected to post market
- Strong pharmacovigilance is critical. There will need to be a comprehensive, integrated post-market monitoring scheme (for both medicines and devices). How will post-market data collection work under a new framework?
  - Who does it?
  - What needs to be improved?
  - How will we detect gaming of the system?
- Consider including rolling reviews in the design of Pathway 3
- Will overseas variations be recognised? (R13)

Medicines Forum

5 August 2015

Recommendations 3-9, 13

Considerations - continued

- Clear communication and comprehensive guidance materials will be required to assist sponsors to select the correct pathway upfront.
- Early notification to the NRA of which pathway is proposed will be important if the available resources are to be used most effectively.
- It will be important to consider the parallel processes for consumer access (i.e. Pharmaceutical Benefits Advisory Committee) in the design of new pathways, and that it is viewed as part of a continuum.

Main points raised about other recommendations:

Recommendation 29

There were concerns raised in relation to Recommendation 29, such as:

- Whether the proposed committee decision-making structure could slow approval processes
- The decision–making process works now – so why change it?
- Concerns about the ability to get committee with skills and sufficient time
- Concerns about whether the CMO will have sufficient skills / time to make decisions.
- There are other ways to achieve the intention of the recommendation which is to improve transparency of decision-making and to improve engagement with stakeholders.

Recommendation 28

It was suggested that Recommendation 28, relating to the comprehensive review of the legislative framework, be raised to a higher priority.

Recommendations in focus

Recommendations related to new pathways for NCEs

Recommendation three

The Panel recommends that there be three pathways to seek registration of a new chemical entity and its inclusion in the ARTG:

Pathway One

Submission of a complete dossier for de novo assessment. This assessment may be undertaken in full by the Australian National Regulatory Authority (NRA) or via a work-sharing arrangement between the Australian NRA and a comparable overseas NRA.

Pathway Two

Submission of an un-redacted evaluation report from a comparable overseas NRA, along with a copy of the dossier submitted to that NRA and an Australian specific Module 1, for assessment by the Australian NRA. The Australian NRA to make a recommendation regarding registration of the medicine once it has considered the data within the Australian context.

Pathway Three

Application for expedited approval of a medicine in certain circumstances. Any expedited approval pathway should make provision for submission of data and assessment consistent with requirements of Pathways One and Two as outlined above.

Recommendation five

The Panel recommends that the Australian Government develop and apply transparent criteria for identifying comparable overseas NRAs. Such criteria might include that a comparable overseas NRA must:

A. Regulate for a population demographic that is broadly representative of the Australian population and has similar health outcomes; and
B. Adopt ICH guidelines; and
C. Have a credible and consistent track record of approving safe and effective medicines; and
D. Conduct de novo evaluations of data dossiers for all types of medicines, e.g. new chemical entities, generics and biosimilars; and
E. Have processes in place that require peer review or independent assessment of the evaluations that they conduct; and
F. Have evaluators with the necessary technical and clinical capabilities to evaluate the data provided and make an independent regulatory decision in accordance with the ICH guidelines; and
G. Provide access to un-redacted evaluation reports and, where applicable, individual patient data; and
H. Communicate and prepare evaluation reports in the English language.

Recommendations in focus

Recommendations related to new pathways for NCEs

Recommendation six

The Panel recommends that in circumstances where a sponsor seeks registration of a new chemical entity in Australia via Pathway Two and has submitted all necessary materials, including an un-redacted evaluation report from a comparable overseas NRA, to the Australian NRA:

1. The Australian NRA makes a recommendation regarding registration of the new chemical entity once it has satisfied itself that:
    - A. The new chemical entity is identical in dosage form, strength, formulation and indications; and
    - B. The new chemical entity will be manufactured at a plant that has received GMP certification from the Australian NRA (or from a comparable overseas NRA with whom the Australian NRA has co-recognition); and
    - C. The manufacturing process to produce the new chemical entity will be identical to that assessed by the comparable overseas NRA for the overseas product; and
    - D. There are no specific issues regarding applicability of the submitted data to the Australian context that need to be examined; and
    - E. Proposed product labelling, Product Information and Consumer Medicine Information are appropriate and consistent with Australian requirements
2. Where the new chemical entity seeking registration in Australia does not meet conditions 1A to 1D above, the Australian NRA undertakes an assessment of the extent to which the differences have the potential to impact the quality, safety or efficacy of the product.
    - A. If the differences are assessed to have minimal impact on product quality, safety or efficacy, the Australian NRA should satisfy itself that the proposed product labelling, Product Information, and Consumer Medicine Information is appropriate and consistent with Australian requirements before making a recommendation regarding registration of the new chemical entity in the ARTG.
    - B. Where differences between the new chemical entity seeking registration in Australia and that approved by the comparable overseas NRA have the potential to impact product quality, safety or efficacy, before making a recommendation regarding registration of the new chemical entity in the ARTG, the Australian NRA should:
        - I. Undertake an assessment of the application for registration to the extent necessary to satisfy itself that any potential impact of the differences on quality, safety or efficacy have been addressed and/or taken into consideration in assessing risk and benefit; and
        - II. Assess whether the proposed product labelling, Product Information, and Consumer Medicine Information are appropriate and consistent with Australian requirements.

Recommendation eight

The Panel recommends that the Australian NRA should develop and apply transparent criteria under which application may be made for accelerated assessment of promising new medicines (Pathway Three). Such criteria should not be inconsistent with those adopted by comparable overseas NRAs for accelerated assessment.

Recommendations in focus

Recommendations related to new pathways for NCEs

Recommendation nine

The Panel recommends that in circumstances where the Australian NRA has approved an expedited approval process utilising Pathway Two, and the sponsor has submitted all necessary materials, including an un-redacted evaluation report from a comparable overseas NRA, to the Australian NRA, the Australian NRA makes a recommendation regarding registration of the new chemical entity once it has satisfied itself that:

A. The new chemical entity is identical in dosage form, strength, formulation and indications; and
B. The new chemical entity will be manufactured at a plant that has received GMP certification from the Australian NRA (or from a comparable overseas NRA with whom the Australian regulator has co-recognition); and
C. The manufacturing process to produce the new chemical entity will be identical to that assessed by the comparable overseas NRA for the overseas product; and
D. There are no specific issues regarding applicability to the Australian context that need to be examined; and
E. Proposed product labelling, Product Information and Consumer Medicine Information are appropriate and consistent with Australian requirements; and
F. Any conditions placed on the medicine by the comparable overseas NRA are applicable to the Australian context; and
G. Data provided to the comparable overseas NRA under these conditions will be available to the Australian NRA in a timely way.

Recommendations in focus

Recommendations related to new pathways for new generic medicines

Recommendation four

The Panel recommends that there be two pathways to seek registration of a generic medicine or biosimilar and its inclusion in the ARTG:

Pathway One

Submission of a complete dossier for de novo assessment. This assessment may be undertaken in full by the Australian NRA or via a work-sharing arrangement between the Australian NRA and a comparable overseas NRA.

Pathway Two

Submission, to the Australian NRA for assessment, of an un-redacted evaluation report from a comparable overseas NRA, along with a copy of the dossier submitted to that NRA and an Australian specific Module 1, and:

A. If the product is a generic product, evidence that the reference product used by the comparable overseas NRA when assessing bioequivalence was identical to, or interchangeable with, the Australian reference product; or
B. If the product is a biosimilar, evidence that the overseas reference product and the Australian reference product are the same.

The Australian NRA to make a recommendation regarding registration of the medicine once it has considered the data within the Australian context.

Recommendation five

The Panel recommends that the Australian Government develop and apply transparent criteria for identifying comparable overseas NRAs. Such criteria might include that a comparable overseas NRA must:

A. Regulate for a population demographic that is broadly representative of the Australian population and has similar health outcomes; and
B. Adopt ICH guidelines; and
C. Have a credible and consistent track record of approving safe and effective medicines; and
D. Conduct de novo evaluations of data dossiers for all types of medicines, e.g. new chemical entities, generics and biosimilars; and
E. Have processes in place that require peer review or independent assessment of the evaluations that they conduct; and
F. Have evaluators with the necessary technical and clinical capabilities to evaluate the data provided and make an independent regulatory decision in accordance with the ICH guidelines; and
G. Provide access to un-redacted evaluation reports and, where applicable, individual patient data; and
H. Communicate and prepare evaluation reports in the English language.

Recommendations in focus

Recommendations related to new pathways for new generic medicines

Recommendation seven

The Panel recommends that in circumstances where a sponsor seeks registration of a generic medicine or biosimilar in Australia via Pathway Two and has submitted all necessary materials, including an un-redacted evaluation report from a comparable overseas NRA, to the Australian NRA:

1. The Australian NRA makes a recommendation regarding registration of the generic medicine or biosimilar once it has satisfied itself that:
    A. The generic medicine or biosimilar is identical in dosage form, strength, and formulation to the product approved by the comparable overseas NRA; and
    B. The generic medicine or biosimilar will be manufactured at a plant that has received GMP certification from the Australian NRA (or from a comparable overseas NRA with whom the Australian authority has co-recognition); and
    C. The manufacturing process to produce the generic medicine or biosimilar will be identical to that assessed by the comparable overseas NRA for the overseas product; and
    D. If the product is a generic medicine - the reference product used by the comparable overseas NRA when assessing bioequivalence was identical to, or interchangeable with, the Australian reference product; or
    E. If the product is a biosimilar - the overseas reference product and the Australian reference product were the same; and
    F. Proposed product labelling, Product Information and Consumer Medicine Information are appropriate and consistent with Australian requirements.

2. Where the generic medicine seeking registration in Australia does not meet conditions 1A to 1D above, the Australian NRA undertakes an assessment of the extent to which the differences have the potential to impact the quality, safety or efficacy of the product.
    A. If the differences are assessed to have minimal impact on product quality, safety or efficacy, the Australian NRA should satisfy itself that the proposed product labelling, Product Information and Consumer Medicine Information are appropriate and consistent with Australian requirements before making a recommendation regarding registration of the generic medicine in the ARTG.
    B. Where differences between the generic medicine seeking registration in Australia and that approved by the comparable overseas NRA have the potential to impact product quality, safety or efficacy, before making a recommendation regarding registration of the generic medicine in the ARTG, the Australian NRA should:
        I. Undertake an assessment of the application for registration to the extent necessary to satisfy itself that any potential impact of the differences on quality, safety or efficacy have been addressed; and
        II. Assess whether the proposed product labelling, Product Information, and Consumer Medicine Information are appropriate and consistent with Australian requirements.

Australian Government

Department of Health

Further Information

If you would like more information on the Review of Medicines and Medical Devices Regulation, please contact the Department of Health.

Email: MMDReviewTaskforce@health.gov.au

Phone: (02) 6289 1404 (MMD Review Taskforce Hotline)

Website: http://www.health.gov.au/internet/main/publishing.nsf/Content/Expert-Review-of-Medicines-and-Medical-Devices-Regulation

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