

**CAPRA, TORONTO, APRIL 29&30, 2014**

# **@-Review**

**Modernizing Canada's E-Regulatory System**

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**Therapeutic Products Directorate**



**Health Canada**

# Outline

- Guidance Documents and Planned Revisions
- Areas of Deficiency or Insufficient Information in eCTD Format
- Validation Rules
- Update on How the Health Canada eCTD Viewing Tool is Used
  - ✓ Submission Management
  - ✓ Regulatory Information Management (RIM)
  - ✓ Electronic Workflow Management

# Guidance Documents for Submissions in eCTD Format

- Creation of the Canadian Module 1 Backbone
  - ✓ Final version posted – September 2012
  - ✓ Revision to Table 4 planned for late 2014/early 2015
    - To be posted for comment period
- Canadian Module 1 Schema version 2.2
  - ✓ Final version 2.2 posted – July 2012
  - ✓ The old module 1 dtd 1.0 is no longer accepted
- Preparation of Drug Regulatory Activities in eCTD format
  - ✓ Structure and Content of the RAs and RTs in eCTD format
  - ✓ Life Cycle Management
  - ✓ Filing Process for Regulatory Transactions in eCTD format
- Preparation of Drug Regulatory Activities in CTD format
  - ✓ Structure of the Canadian module 1 and module 2-5
  - ✓ Examples of document placement in every section of module 1



# Guidance Documents for Submissions in eCTD Format con't

- Notice – Validation Rules for Regulatory Transactions in eCTD format
    - ✓ Validation Rules implemented – August 2013
    - ✓ eCTD Validator - Profile HC-SC-3.0
    - ✓ Revision Planned for late 2014/early 2015
  - Various Other Notices
    - ✓ Notice: Post NOC Changes: Level III changes
    - ✓ Notice: Instructions for Submitting Drug Notification Forms (DNFs)
    - ✓ Notice: Adoption of the ICH Guidance on PBRER
    - ✓ Notice: Pilot Project for the Implementation of DSUR
- Will be consolidated in the final eCTD Guidance



# Pre-Submission Meeting Information

- The following Regulatory Activity Types should be used: MPNDS, MPSNDS, MPNC
- HC strongly recommends that Pre-Submission meeting information should be provided in eCTD format
- If you intend to submit the Pre-Submission Meeting Package in eCTD format the Request must be provided in eCTD format
- The whole Regulatory Activity could have the following transactions:
  - ✓ 0000 – **Pre-Submission Meeting Request**
  - ✓ 0001 – Pre-Submission Meeting Package
  - ✓ 0002 – Meeting Slides
  - ✓ 0003 – Priority Review Package (PRNDS)
  - ✓ 0004 – Draft Meeting Minutes
  - ✓ 0005 – Final Meeting Minutes
  - ✓ 0006 – NDS .....

# Post-NOC Pharmacovigilance Data

- The following Regulatory Activity types should be used: PSUR-PV, RMP-PV, UD-PV
- Even though MHPD might issue a single request, the requested information should be provided as separate Regulatory Activities:
  - ✓ PSUR-PV - as a separate eCTD sequence using the corresponding sequence description - For Period of Mmm. dd, yyyy to Mmm. dd, yyyy
  - ✓ RMP-PV – as a separate eCTD sequence using the corresponding sequence description - RMP version <number> dated Mmm. dd, yyyy
  - ✓ UD-PV – as a separate eCTD sequence using the corresponding sequence description - e.g Response to MHPD Requests dated Mmm. dd, yyyy, Risk communication document.....
- For PBRER use PSUR-PV as the Regulatory Activity type in the module 1 schema



# Study Tagging Files and Node Extensions

- Health Canada accepts data organized using Study Tagging Files and Node extensions in module 4 and 5
- Study Tagging Files
  - ✓ Data has to be organized according to the ICH eCTD Specification v2.6.1
  - ✓ If STFs are used in module 4 and 5 then the CRFs should be built in the related STF and not submitted separately in 5.3.7
- Node extensions
  - ✓ If the **Study report** is broken into multiple pdf files
  - ✓ For **Case Report Forms** it is recommended to first organize them by study name then by site (CRFs have to be filed under *m5-3-7-case-reports-forms-and-individual-patient-listinigs* heading)
  - ✓ In Module 1 it can be used to organize data under *m1-2-7-International-Information* heading (to provide to HC a copy of information exchanged with EMA or FDA)  
Node extension should not be used under any other nodes in module 1
  - ✓ A consistent approach should be used when creating node extensions



- ▲ 4 Nonclinical Study Reports
  - ▲ 4.2 Study Reports
    - ▲ 4.2.1 Pharmacology
      - ▶ 4.2.1.1 Primary Pharmacodynamics
      - ▶ 4.2.1.2 Secondary Pharmacodynamics
      - ▶ 4.2.1.3 Safety Pharmacology
      - ▲ 4.2.1.4 Pharmacodynamic Drug Interactions
        - 4.2.1.4.1 1596 Interaction of ibuprofen with antiepileptic drugs, mouse, ip
        - 4.2.1.4.2 66598 Pseudo-isobolographic evaluation, rat, ip
      - ▶ 4.2.2 Pharmacokinetics
      - ▶ 4.2.3 Toxicology
    - ▶ 4.3 Literature References
  - ▲ 5 Clinical Study Reports
    - ▶ 5.2 Tabular Listing of all Clinical Studies
    - ▲ 5.3 Clinical Study Reports
      - ▶ 5.3.1 Reports of Biopharmaceutic Studies
      - ▶ 5.3.2 Reports of Studies Pertinent to Pharmacokinetics using Human Biomaterials
      - ▶ 5.3.3 Reports of Human Pharmacokinetic (PK) Studies
      - ▶ 5.3.4 Reports of Human Pharmacodynamic (PD) Studies
      - ▶ 5.3.5 Reports of Efficacy and Safety Studies
      - ▲ 5.3.5 Reports of Efficacy and Safety Studies
        - ▲ 5.3.5.1 Study Reports of Controlled Clinical Studies Pertinent to the Claimed Indication
          - 5.3.5.1.1 Study 12 Phase 2, placebo-controlled, efficacy and safety,
          - ▶ 5.3.5.1.2 Study 13 Phase 2b, placebo-controlled, efficacy and safety, DNP
          - ▶ 5.3.5.1.3 Study 14 Phase 3, placebo-controlled, efficacy and safety, DNP
          - ▶ 5.3.5.1.4 Study 15 Phase 3, placebo-controlled, efficacy and safety, DNP
          - 5.3.5.1.5 Study 16 Phase 3, controlled withdrawal trial to open-label trial
          - 5.3.5.1.6 Study 17 Phase 3, randomized, placebo controlled, multi-center
        - ▶ 5.3.5.2 Study Reports of Uncontrolled Clinical Studies
        - ▶ 5.3.5.3 Reports of Analyses of Data from More than One Study
        - ▶ 5.3.5.4 Other Study Reports
      - ▲ 5.3.7 Case Report Forms and Individual Patient Listings
        - ▶ Study 12
        - ▶ Study 13
        - ▶ Study 14
        - ▶ Study 15
        - ▶ Study 16





# Questions from Sponsors and eCTD requirements

- Use of Operation Attributes “new”, “replace”, “append”
  - ✓ Refer to section 4.3.4 general rules and 4.3.5 for specific examples
    - The use of an operation attribute depends on how the content of the document is managed
    - “Replace” – to be used when the additional information and the previously submitted information are provided as a consolidated document.
    - “Append” – when the additional information submitted is used to build upon previously submitted information, without resubmitting it.
    - Cover letter requirements – the operation attribute should be always “new”. “Replace” should be used when correcting an error in the letter
    - Submission Application Form (3011) – “new” should be used when provided with a new (initial) RA. “Replace” should be used when correcting an error in a 3011
    - Life Cycle Management Table - 0000 “new”, all other sequence numbers “replace”



# Questions from Sponsors and eCTD requirements

- ✓ For the documents (such as: Risk Management Plan, CIPD...) that have changed location continue the life cycle using “replace” operation attribute
- ✓ ”Append” should not be used in module 1 - sections 1.0 to 1.5 for the documents such as: Cover letter, Life Cycle Management Table, Post NOC change (Level III form)...
- ✓ How to provide corrections to Pristine Product Monograph
  - When correcting typos in the Pristine PM, “replace” should be used
  - If applicable the request from HC should be included in 1.0.3
  - The next version of the eCTD Guidance will include a complete revision of the operation attribute for the Product Monograph
- ✓ Second Language Product Monograph
  - For eCTD dossier always provide the second language PM as a sequence in eCTD format
  - When combining Pristine PM and Second Language PM, ensure that the cover letter indicates that both PMs are included



# Questions from Sponsors and eCTD requirements

## ■ Cross Referencing

- ✓ Internal discussion to be held to confirm a consistent approach and provide examples. Outcome will be discussed in the next version of the eCTD Guidance document
  - File Reuse - could be used when cross referencing a full section from a previous sequence (e.g 3.2.S)
  - Hyperlink - could be used when cross referencing a single document from a previous sequence
  - Is the section or document that is cross referenced approved?
  - Which operation attributes to use when applying file reuse: “new” or “replace”
  - Parallel submission
- ✓ For the time being, a case-by-case approach should be discussed with Health Canada



# Questions from Sponsors and eCTD requirements

- How to handle multi-product submissions
  - ✓ Long term solution - eCTD version 4
  - ✓ For the time being, a case-by-case approach should be discussed with Health Canada
- Withdrawals
  - ✓ Internal discussion to be held to confirm a consistent approach and provide examples. Outcome will be discussed in the next version of the eCTD Guidance document
    - At what stage is the submission being cancelled/withdrawn
    - Is the submission being refiled at later time
    - Is the submission being refiled as a different submission type
  - ✓ For the time being, a case-by-case approach should be discussed with Health Canada

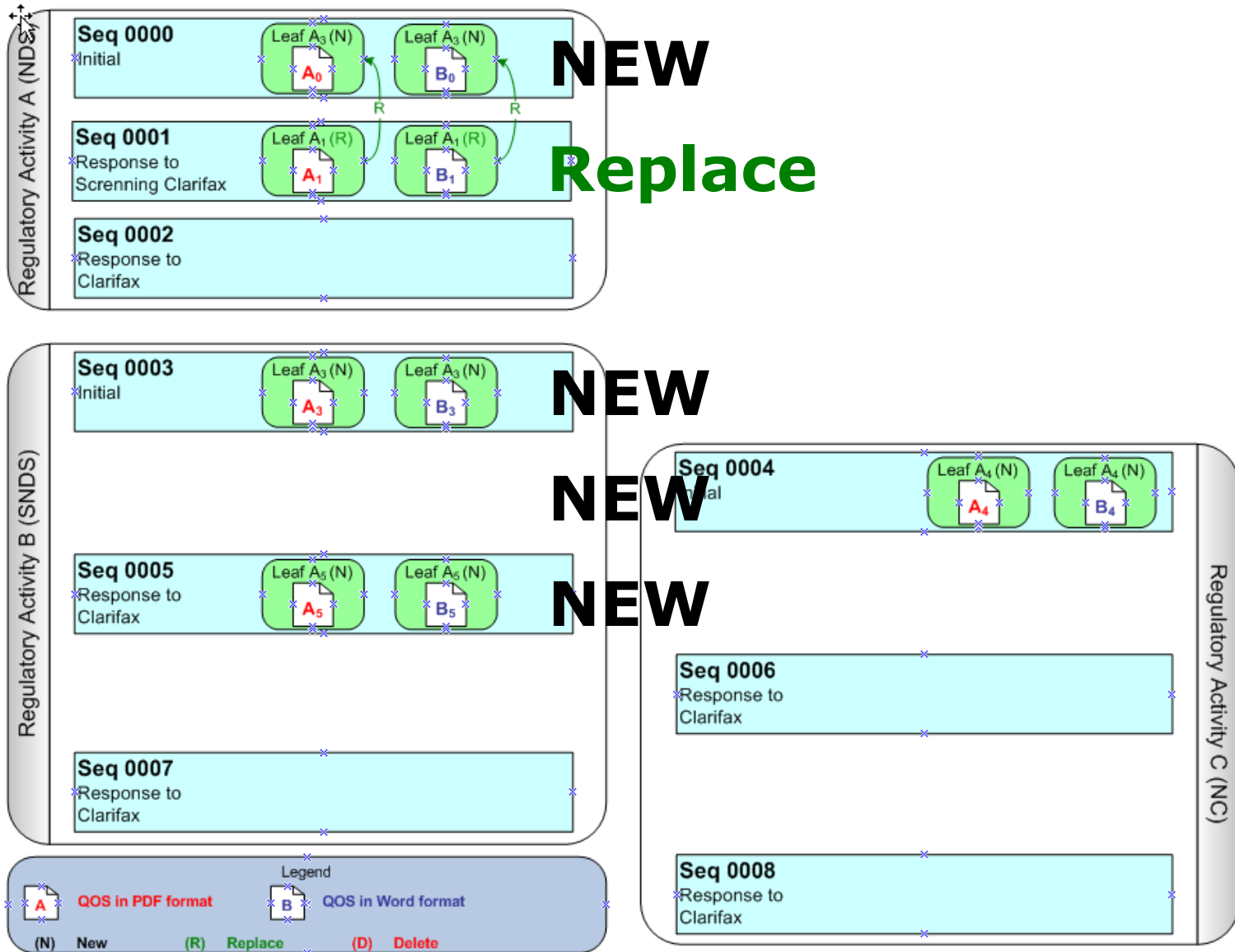


# Questions from Sponsors and eCTD requirements

- Cover Letter Requirements as outlined in the eCTD Guidance
  - ✓ Most common deficiencies:
    - Dossier Identifier
    - Control number (if known)
    - Reason for filing
    - Regulatory Transactions that contain HC-SC3011 should include a table structured as recommended in the eCTD Guidance
    - Response to requests for clarification should clearly state the name of the requester
- Mailing Requirements
  - ✓ The printed cover letter should be provided with the media (CD, DVD, USB....)
  - ✓ Of course the preferred method of communication is the Gateway (CESG)



# Lifecycle Management of the QOS



# Element Attributes

- Element Attributes in module 2, module 3, and module 5 as per ICH eCTD Specification V 3.2.2 dated 16-July-2008

Table 6-9

Element	Attribute	Description/Instructions	Example
<m2-7-3-summary-of-clinical-efficacy>	indication	Name of the indication	Pain
<m5-3-5-reports-of-efficacy-and-safety-studies>	indication	Name of the indication.	Pain

Table 6-10

Element	Attribute	Description/Instructions	Example
<m3-2-s-drug-substance>	substance	Name of one of the drug substances	Acetaminophen
	manufacturer	Name of the manufacturer of the drug substance	My Supplier

Table 6-11

Element	Attribute	Description/Instructions	Example
<m3-2-p-drug-product>	product-name	Name of one of the drug products	Wonder drug
	dosageform	Dosage form	Capsule
	manufacturer	Manufacturer of the drug product	Company A



# Element Attributes con't

- ✓ There is currently no standard terminology list for element attributes. Applicants should choose these attributes carefully as they can not be easily changed during the life cycle of the application
- ✓ The attributes are case sensitive: [Nausea] [nausea]
- ✓ Should not be changed when the company undergone company name change
- ✓ Typographical mistakes should not be corrected
- ✓ The attributes should be left as they have been written in the sequence of the original submission
  - Most likely sequence 0000 or a sequence higher if sequence 0000 was a pre-submission meeting
- ✓ Any slight modification to these attributes creates a duplicate node



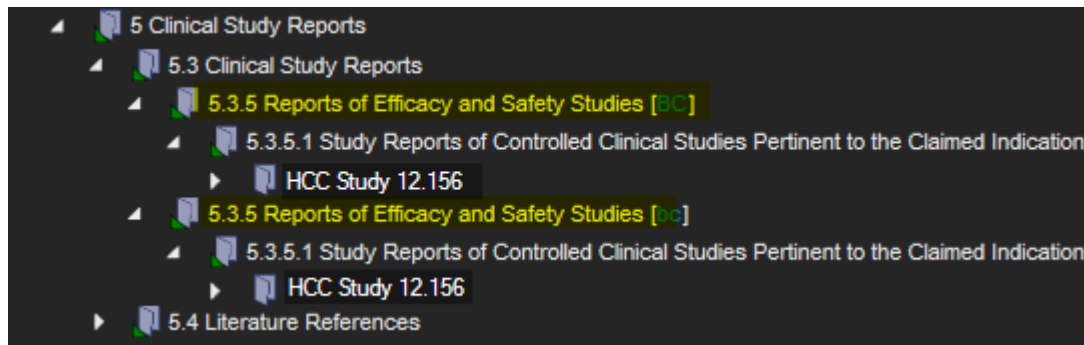


# Element Attributes (con't)

## Consequences

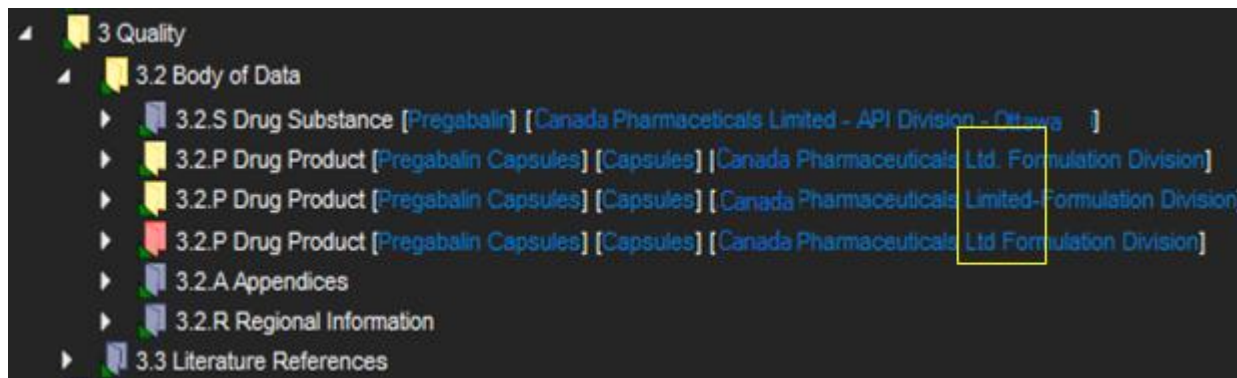
- Data for one study are found under more than one node

### Example 1



- Data for one dosage form are found under more than one node

### Example 2



# Important message

**“Once a sponsor files a regulatory activity in eCTD format, all additional information and subsequent regulatory activities for the same dossier should be filed in eCTD format. Sponsors should not revert to paper-based CTD format.”**

- As stated in the current Draft Guidance Document: Preparation of Drug Regulatory Activities in eCTD format: All information related to a submission exchange with Health Canada must be provided as a sequence in eCTD format. Including:
  - ✓ Second language Product Monograph
  - ✓ Pristine Product Monograph
  - ✓ Response to e-mail clarification
  - ✓ Response to telephone request
  - ✓ Market notification (DNF and final labelling materials)
  - ✓ Correspondence with OPML
  - ✓ etc.



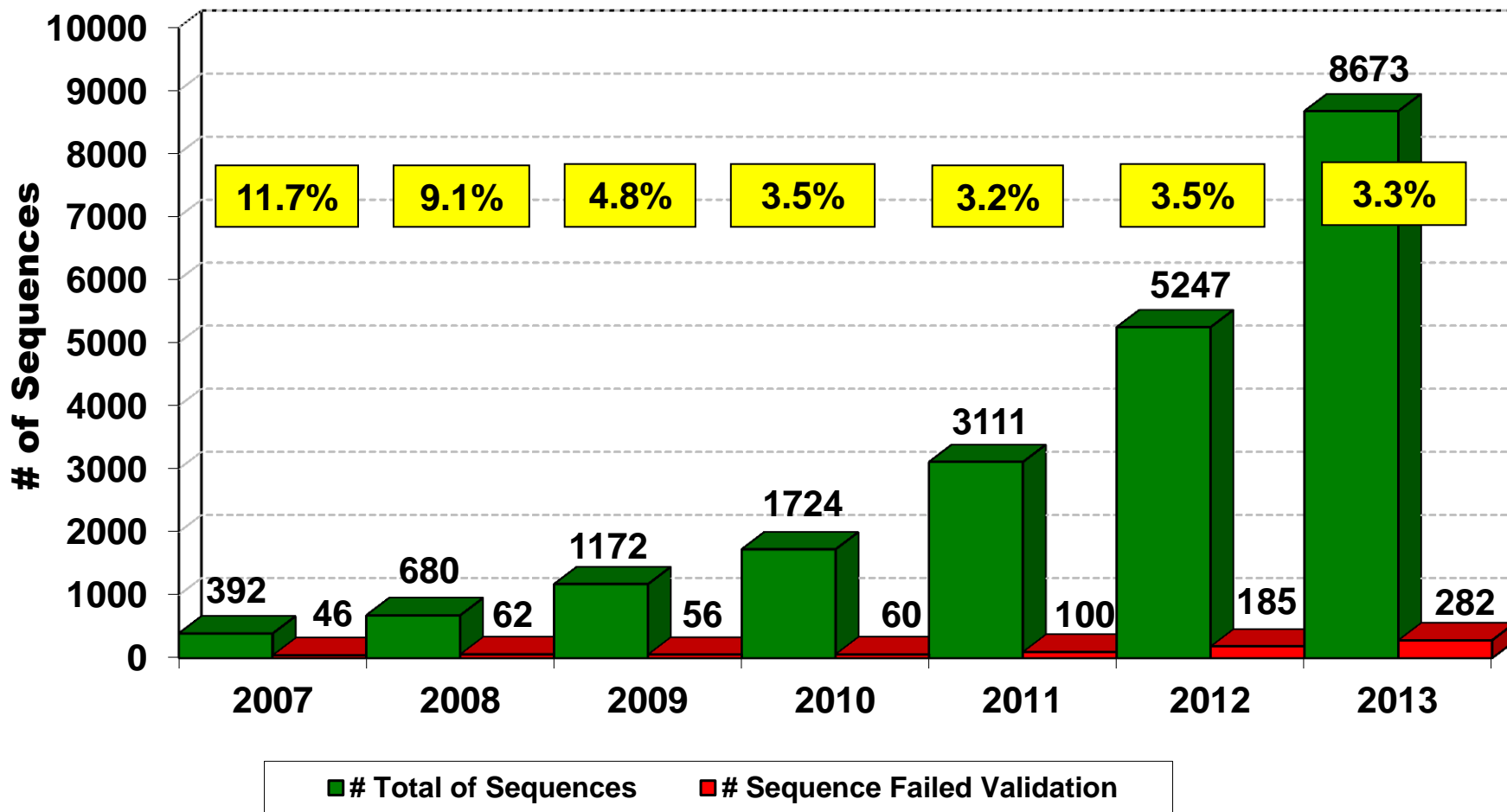
# Validation rules and profile

Revision to Validation Rules for Regulatory Transactions in eCTD format planned for late 2014/early 2015

- Rules to be revised:
  - ✓ HREFs to target outside sequence
  - ✓ File Reuse
  - ✓ PDF protection: Owner password (eForms)
  - ✓ Replace or append should not provide identical content
- Common validation errors and warnings
  - ✓ Broken bookmarks and hyperlinks
  - ✓ Life Cycle Management Semantics
  - ✓ Unreferenced files, md-5 checksum related errors
- In most cases those validation errors are caused by faulty burning process of data onto CD (media)
  - ✓ The eCTD sequence should be validated **after** burning the CD (media)

# Sequences that Failed eCTD Validation

as of December 2013

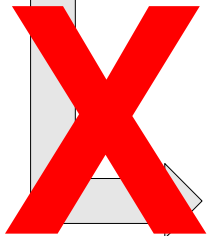


# Regulatory Data from Sponsors

Gateway

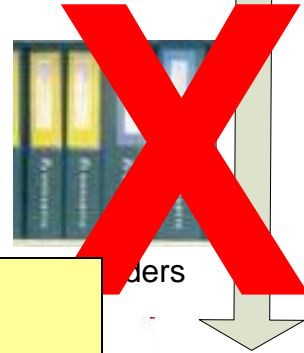
FAX

Regulatory Information Generated by Health Canada



- Administrative letters
  - Acknowledgement
  - Acceptance
- Clarification Requests (clarifax)
- Regulatory Notices
  - SDN, NSN, NON, NOD, NOC
- Regulatory Letters
  - Refusal
  - Withdrawal
  - No Objection
- Licences
- Review Reports
- Etc.

Regulatory Information Management (RIM) Project



Production of Boxes received since 2005

(8465 → 1441) 83%

D (846 → 38) 95%

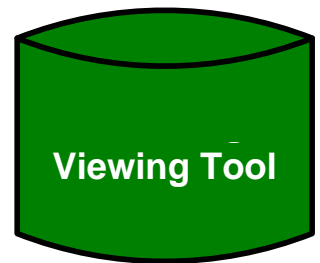
Off Site Storage



CD's/  
DVD's

Gateway

25,000 volumes



Viewing Tool



# Submission Management

Submissions that have been uploaded and managed in the Health Canada eCTD viewing tool:

- All submissions in eCTD format since 2006
- (CDs/DVDs) (electronic portion) received with paper-based submissions
  - ✓ Human Pharmaceutical and Biologic since May 2007
  - ✓ Pharmacovigilance since May 2009
  - ✓ Clinical Trial Applications since July 2008
  - ✓ Medical Device since July 2009
  - ✓ Veterinary Drugs since October 2011

# Regulatory Information Management (RIM)

The RIM functionality of the eCTD viewing tool was implemented in the spring of 2012 for submission related documents generated by HPFB

## Type of RIM Documents

- Regulatory Information Generated by Health Canada
- Templates used in the review process
- Foreign Information received directly from other regulators

## This new process provides many benefits:

- ✓ easy access of all documents
- ✓ complete life cycle management of information in one system
- ✓ eliminates printing and filing in paper-based Central Registry files;
- ✓ eliminates used of share drive for storage of transitory electronic copies of information



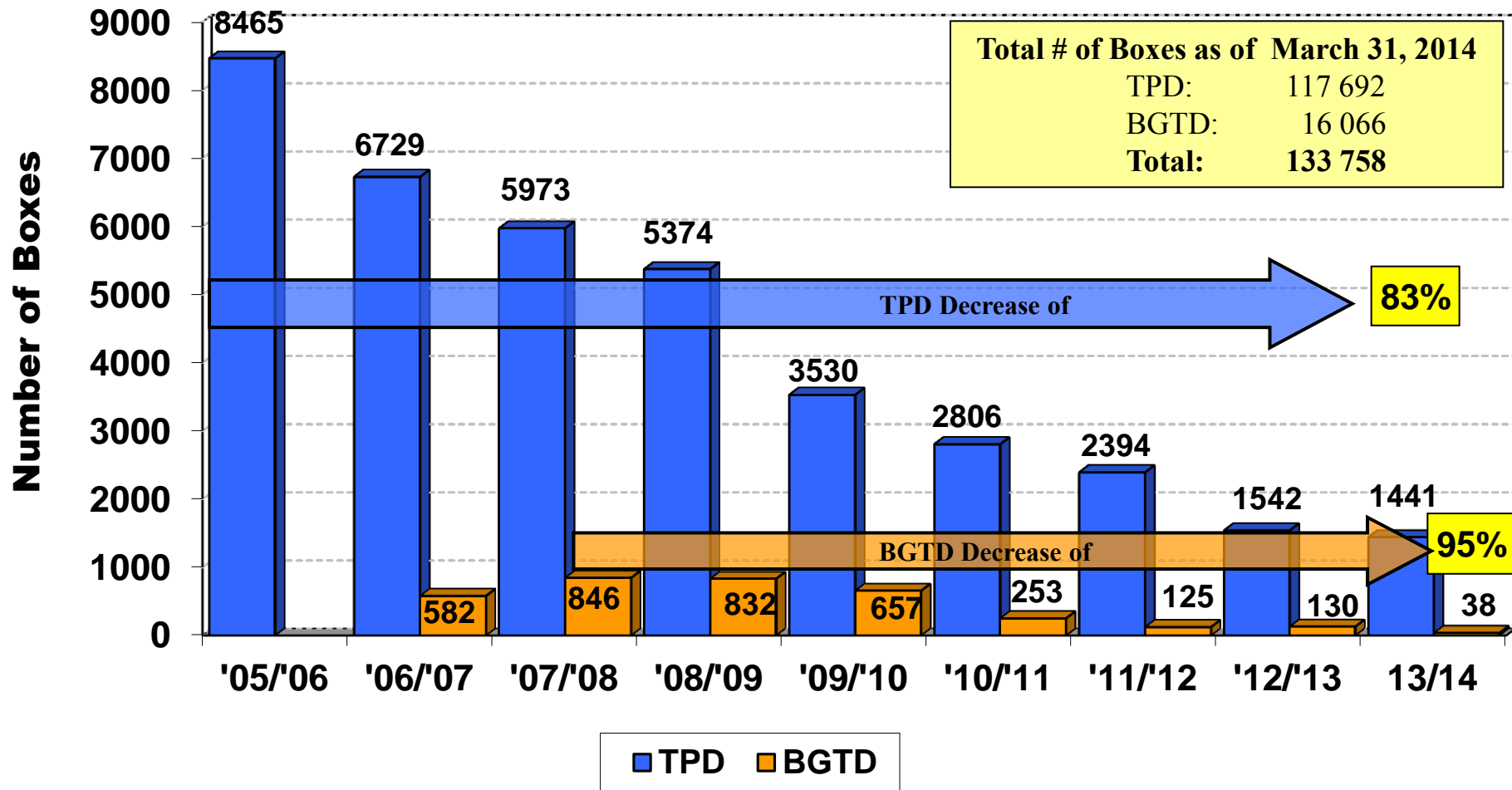
# Electronic Workflow Management

- Implemented for the Notice Approval Process
  - ✓ Piloted for generic drugs July 2012-March 2013
  - ✓ As of April 1, 2013, in use for all pharmaceutical (including Administrative Submissions)
  - ✓ To follow: Biologic, Veterinary Drug, and Medical Device
  - ✓ Next Step: e-Signature and publishing e-Notice/e-Letter
- Implemented for the Medical Device Special Access Program since May 2013
- Will be implemented for Clinical Trial Notification and Site Information in June 2014
- Investigating as a replacement of the Review Folders (targeted for Summer 2014)





# Number of Boxes of Submissions Received per fiscal year between April 2005 and March 2014 Paper Reduction



# Questions?

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