Health Canada Santé Canada

# Therapeutic Products Directorate

Health Products and Food Branch

# Direction des produits thérapeutiques

Direction générale des produits de santé et des aliments




## BPS Strategy

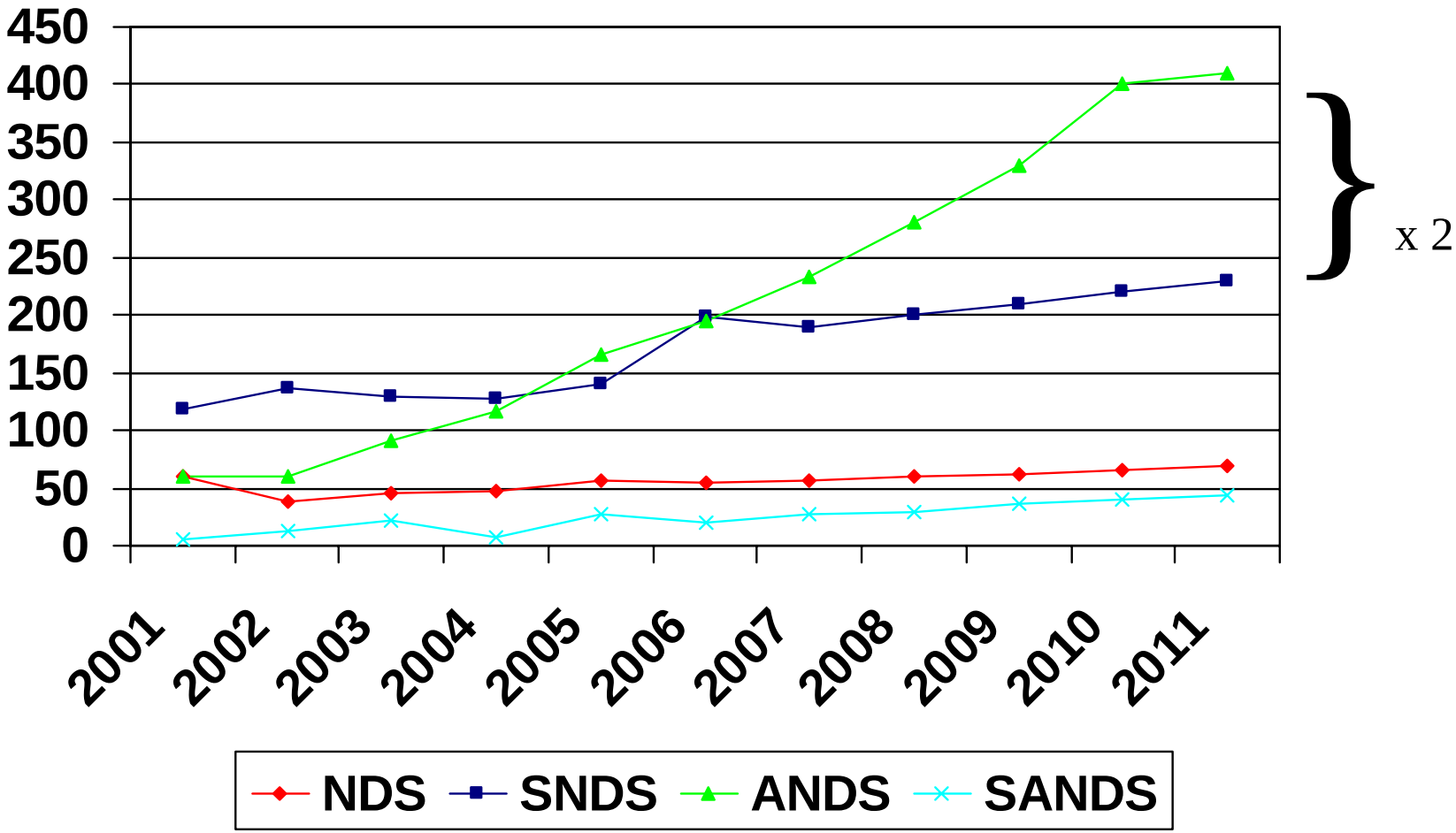
## Nov 2007

Canada

# Submission Trends

- NDS growth will be about 5% over next 4 years.
- SNDS & NCs will continue to grow as the companies move to India and China and M&A activities increase.
- Ensuring C&M quality from all Indian and Chinese companies is challenging.
- Rate of growth of Generics is currently 14%. This significantly impacts performance Typically, 8 companies file per patent expiry. With 50 significant patent expires, this could increase load by 400 submissions from 2007-2011.

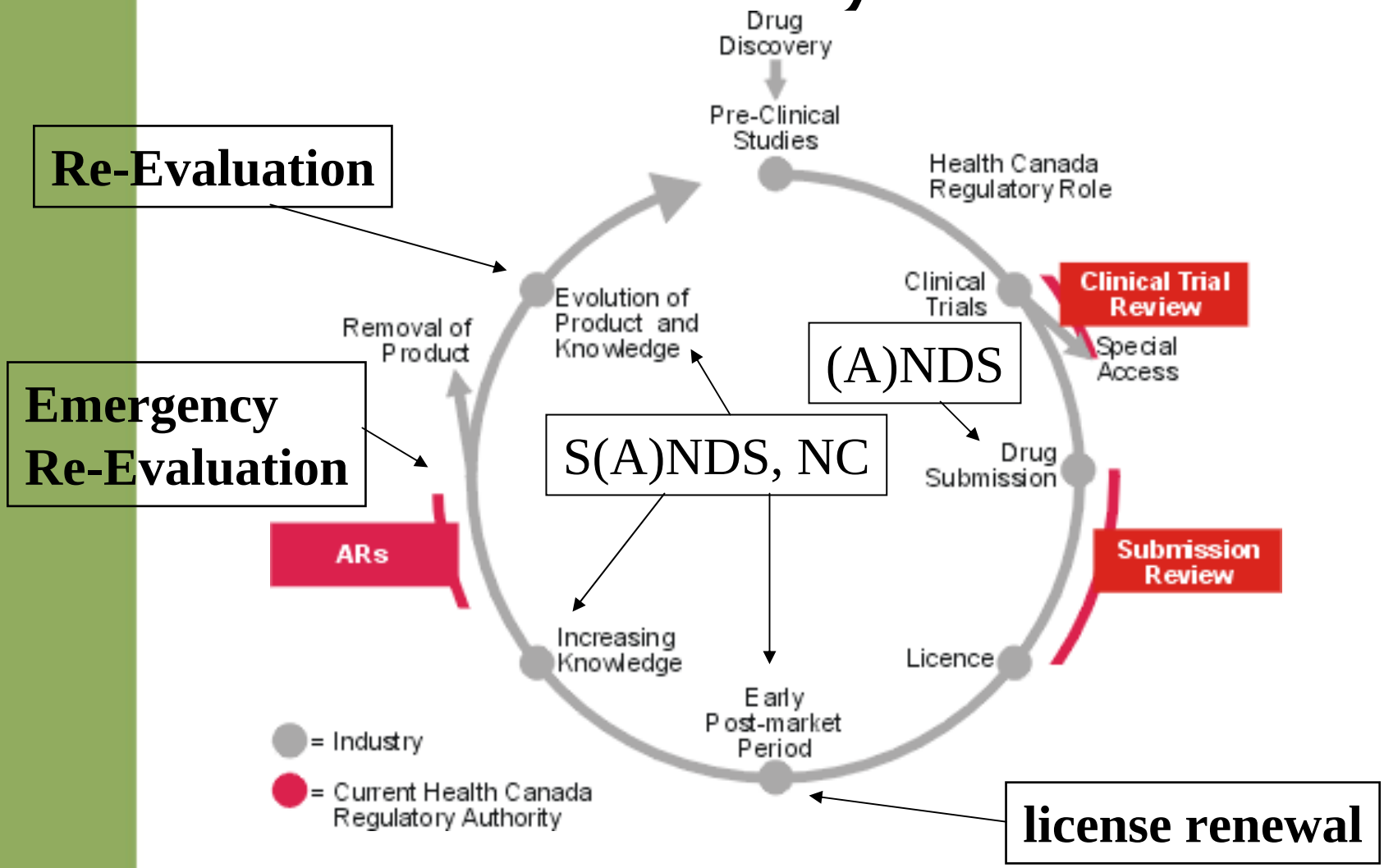
# Impact on workload



# Bureau of Pharmaceutical Sciences Strategy 2007-2010

- Lifecycle approach to regulating health products
- Better resource allocation
- Improved human resources utilization
- Advance international cooperation and be an international leader

# Product Lifecycle View



# Tactics to Achieve the Goals

- **Lifecycle approach**
  - Incorporate risk-based approach to regulatory review
- **Resource allocation**
  - Rigorous project management
  - Use of integrated review process to screen out deficient submissions
  - Regulatory reduction of post-market change submissions
- **Improve human resources utilization**
  - Hiring of experienced personnel and better training of staff
  - Enhanced Review Capacity
- **Advance international cooperation and be an international leader**
  - Leverage International Cooperation with EDQM, WHO, ICH, EMEA, TGA and FDA
  - Leading edge Guidance development

# ICH Q9 Provides Framework for Quality Risk Management

- Risk = Probability of harm, Severity of harm.
- Manufacturing of drug products entails risk.
- Product Quality should be maintained throughout the product lifecycle

# Quality Risk Management Principles

- Evaluation of the risk to quality is based on scientific knowledge and product understanding.
- Level of effort, formality and documentation of the quality risk management system based on level of risk.

# Risk-based approach to regulatory review

- Identification of significant risk elements in pharmaceutical quality based on scientific knowledge gained from performing reviews of submissions.
- Mitigation by assessing these identified risks early and prioritized evaluation during the review.

# Identified Areas of Significant Risk

- for a subsequent-entry product, a drug product that is not considered pharmaceutically equivalent to the Canadian Reference Product (e.g., not the identical medicinal ingredient)
- use of a reference product that is not an acceptable Canadian reference product.
- lack of *in vivo* safety and/or efficacy data (e.g., lacking required bioequivalence studies).
- the batches that were used in the pivotal clinical or bioequivalence studies are not representative of the proposed commercial method of manufacturing or formulation.
- no viral safety data or where a TSE risk assessment is required (e.g., for materials of human or animal origin).

# Identified Areas of Significant Risk (2)

- significant deficiencies on the manufacturing process or controls for the drug substance, either in the drug submission or in a Drug Master File (e.g., incomplete information on the starting material or route of synthesis).
- lack of evidence of GMP compliance for manufacturing, fabrication, packaging, labelling, and testing (e.g., GMP compliance rating issued by the HPFB Inspectorate).
- significant deficiencies on the manufacturing process or controls for the drug product (e.g., data on new batches to support the proposed commercial method of manufacturing or formulation, lack of justification for aseptic fills versus terminal sterilization, use of a pivotal clinical or bioequivalence batch that is not considered "pilot scale", insufficient process validation information).

# Identified Areas of Significant Risk (3)

- lacking data or studies (e.g., impurity investigation, process validation for a sterile product, compatibility studies, stability studies)
- lacking safety/toxicological data to qualify a proposed impurity limit
- lacking information from extractables/leachable studies for components in the container closure system (e.g., USP <87>/<88>)

# Results of Meeting Identified Risks

- At screening, a Screening Deficiency Notice will be issued.
- During review, a Notice of Non-Compliance will be issued.

# Immediate goals of this approach

- Ensure consistent decisions.
- Establish a mechanism for maintaining a record of decision based on science.
- Clear communication with sponsors on expectations.
- Alignment with the *Cabinet Directive on Streamlining Regulations*
  - proper focusing of resources
  - identifying points for effective intervention
  - regulatory response is proportional to the degree and type of risk
  - making use of international standards
  - imposing least possible cost to business
  - ensure regulatory restriction is proportionate to achieve intended policy objective

# Long term goal

Protecting and promoting the health and safety of Canadians by ensuring product:

- Identity
- Purity
- Potency/ strength
- Bioavailability/ delivery
- Packaging/ labeling

# And by finding the right balance

**Fast Access** ⟷ **Safety**

**Innovation** ⟷ **Stewardship**

**Sovereign Interests** ⟷ **Globalization**

**Economic Interests** ⟷ **Social Interests**