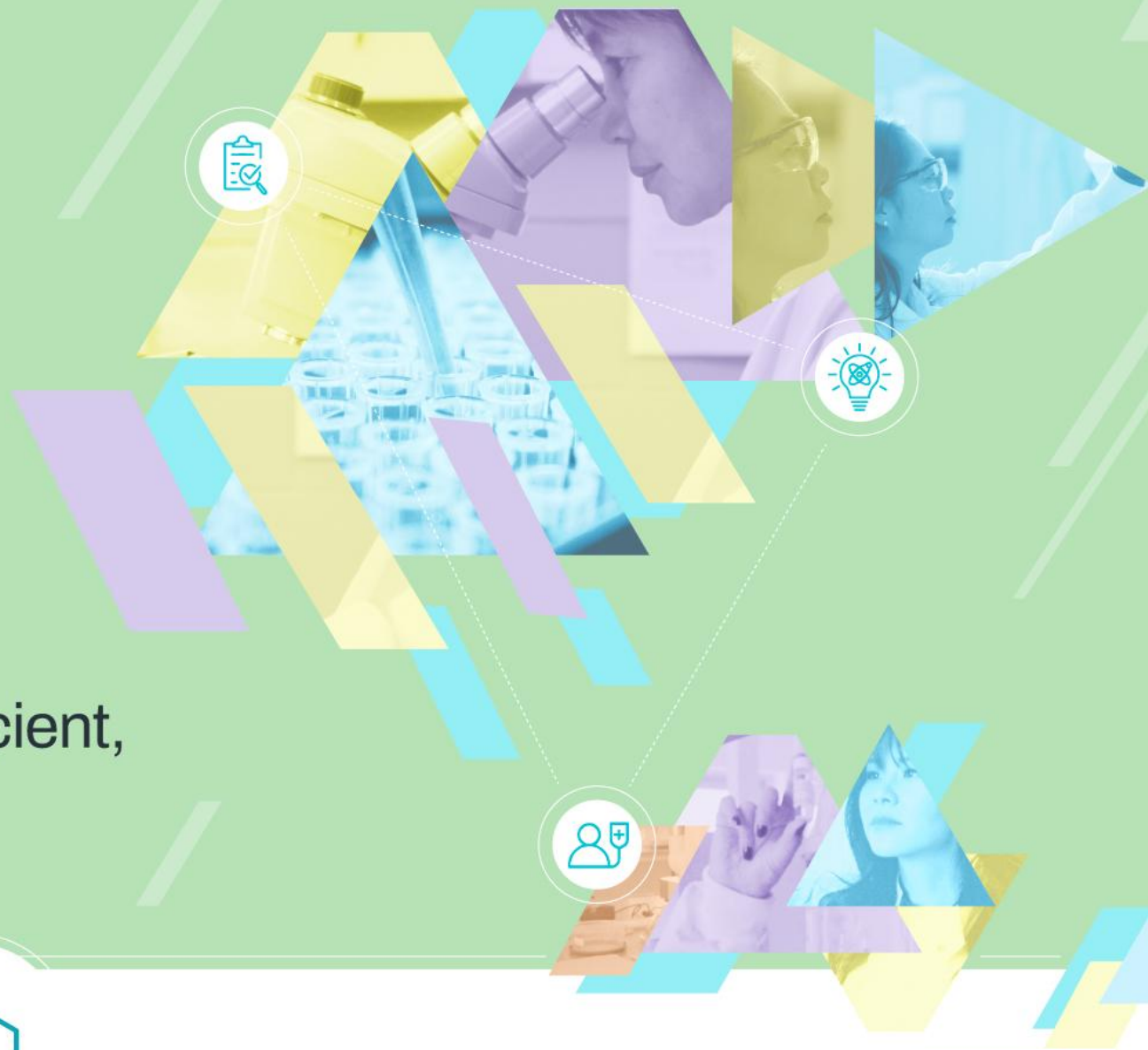


03-06 December 2024

ARC 2024
ASIA REGULATORY CONFERENCE

EVOLVING LANDSCAPES

Asia's role in driving a more efficient,
innovative and patient-centric
regulatory environment



Organized by



In partnership with



03-06 December 2024



EVOLVING LANDSCAPES

Asia's role in driving a more efficient,
innovative and patient-centric
regulatory environment

Welcome to Day 1

**Collaboration and
worksharing to bring
innovation to patients**

Organized by



In partnership with



Thank you for joining! A few guidelines for participants



The conference is held in English.



The detailed conference programme and speakers' biographies are available on arc.ifpma.org.



All participants are muted. Please use the Q&A box to raise questions to the speakers. If a question you would like to ask has already been raised, you can also “like” that question.



Polls will be used during the sessions to get feedback from participants. These will appear on screen.



We encourage you to join all conference days. There is still time to register for other sessions.



The conference is recorded. All speaker presentations and videos will be made available on the website after the conference.

Empowering patient voices: integrating patient perspectives in regulatory affairs



PANEL DISCUSSION



Edmund Lau
Committee Member
World Patients Alliance



Julie Cini
Director
Advocacy Beyond Borders



Karen Villanueva
President
Philippine Alliance of Patient
Organizations (PAPO)



Paloma Tejada
Associate Director,
Alliance Building
IFPMA

Keynote Sessions



Moderator

Keynote: The Indo-Pacific Regulatory Strengthening Program (RSP)



Felicity Jameson

Director, Regulatory Strengthening Section, International
Regulatory Branch, Medicines Regulation Division

Therapeutic Goods Administration

The Indo-Pacific Regulatory Strengthening Program (RSP)

Dr Felicity Jameson
Therapeutic Goods Administration
3 December 2024
ARC2024



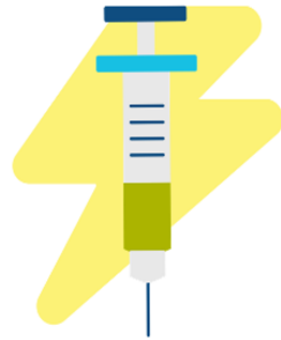
Australian Government
Department of Health and Aged Care
Therapeutic Goods Administration

[tga.gov.au](https://www.tga.gov.au)

Australia's Indo-Pacific Health Security Initiative



PROMOTE GLOBAL AND REGIONAL COOPERATION



CATALYSE INTERNATIONAL RESPONSES TO COUNTRIES' IDENTIFIED NEEDS



APPLY AUSTRALIA'S STRENGTHS IN HEALTH SECURITY



ACCELERATE ACCESS TO NEW AND EFFECTIVE TOOLS

In **October 2017**, the Australian Government launched a 5-year, AUD300 million Health Security Initiative.

To contribute to the avoidance and containment of infectious disease threats with the potential to cause social and economic harm on a national, regional or global scale.



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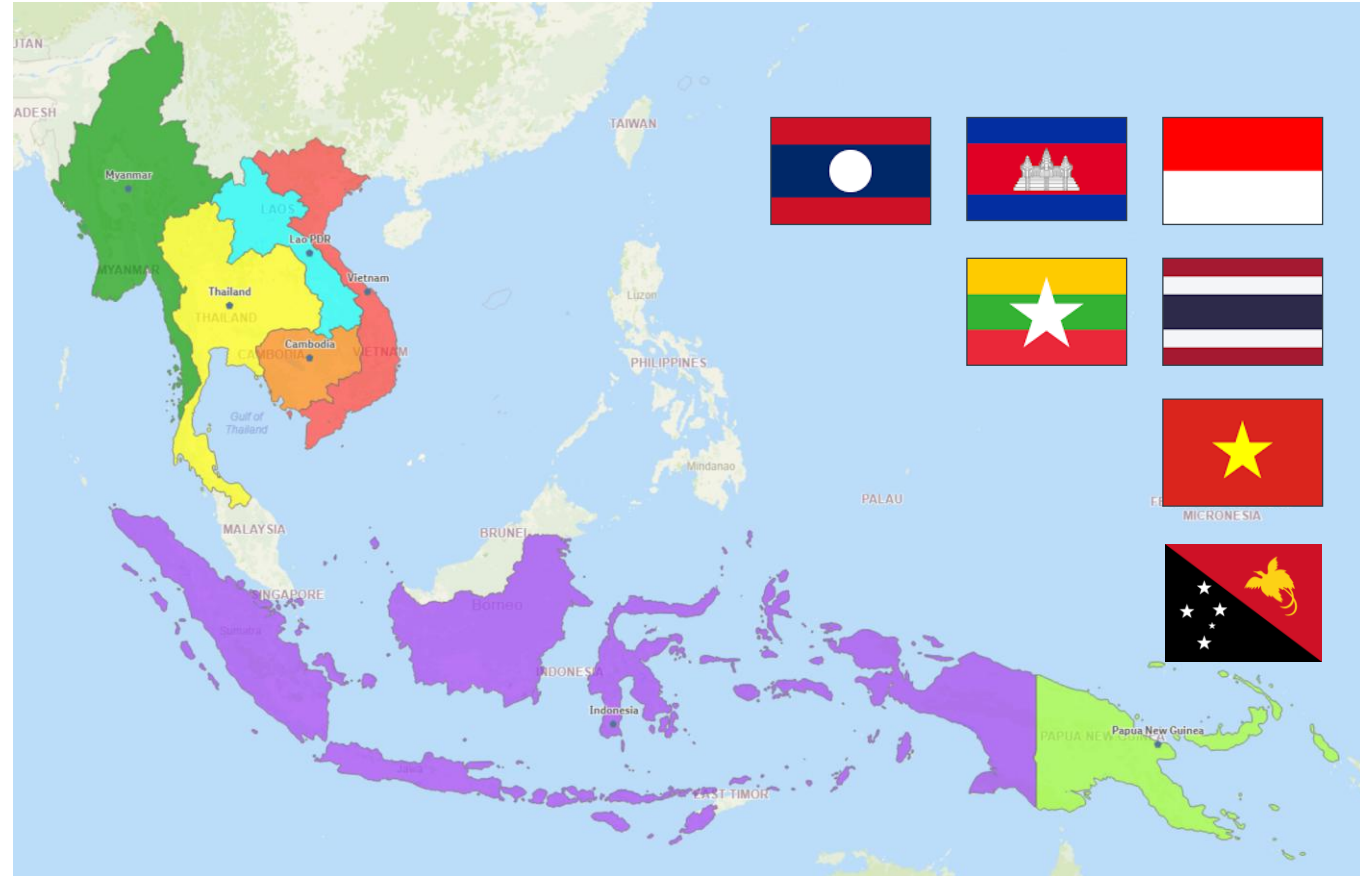
Indo-Pacific Regulatory Strengthening Program

The RSP was launched on **3 October 2018**, funded to June 2023.

Strengthening the capability of National Regulatory Agencies to increase the availability of safe and effective medicines and medical devices through improved regulatory practice and regional coordination.

Component 1 - Strengthening the capability of NRAs to increase the availability of safe and effective medical products

Component 2 - Enhancing stakeholder coordination to promote regional collaboration on regulatory practice



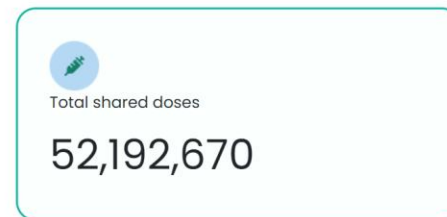
Vaccine Access and Health Security Initiative

Announced by the Foreign Minister on **30 October 2020**.

Support Pacific and Southeast Asian countries' efforts to deliver safe, effective and accessible COVID-19 immunisation programs, based on a health and regulatory systems strengthening approach and in line with best practice standards.

The funding will further help ensure that the countries of the Pacific and Timor-Leste are able to achieve full immunisation coverage, and will make a significant contribution toward meeting the needs of Southeast Asia.

The Pacific: ~ AUD200 million **Southeast Asia:** ~ AUD300 million



Country	Doses	Country	Doses
Global	114,400	Solomon Islands	618,200
Cambodia	2,830,530	The Philippines	8,132,080
Fiji	1,651,100	Timor-Leste	1,190,040
Indonesia	8,395,000	Thailand	452,790
Laos	1,504,780	Tonga	76,190
Nauru	24,280	Tuvalu	20,500
Kiribati	50,500	Vanuatu	160,000
Papua New Guinea	335,270	Vietnam	26,461,860
Samoa	175,150		

Table: COVID-19 vaccine doses shared from Australia's supply, procured by Australia, for partner countries or distributed through the COVAX Facility as at 9 May 2023.



Australian Government
Department of Health and Aged Care
Therapeutic Goods Administration

TGA's COVID-19 Vaccine Program: 2021-2023

Support for the marketing authorisation or EUL of COVID-19 vaccines.

Support for ensuring the quality of vaccines procured, based on GMP standards.

Vaccine safety reporting systems and communications.

18 Countries in Southeast and the Pacific

Cambodia, Fiji, Kiribati, Indonesia, Lao PDR, Malaysia, Myanmar, Nauru, Papua New Guinea, The Philippines, Samoa, Solomon Islands, Thailand, Timor-Leste, Tonga, Tuvalu, Vanuatu and Vietnam

Delivery: Virtual engagement from May 2021 – June 2023

Staffing: Regulatory scientists, medical officers and program management based in Canberra with a regional advisor in Singapore.



Invested: Australia's SEA Economic Strategy to 2040

Regulatory collaboration to increase regional recognition, cooperation and reliance so products approved in one Southeast Asian market can access several markets.

Improve recognition arrangements for TGA-approved products by Southeast Asian national regulatory authorities to allow for earlier access to markets, supported by the exchange of information.

Expanding regulator-to-regulator cooperation, and promoting compatibility between Australian, Southeast Asian and global frameworks through the RSP, will support health outcomes in the region and its growing markets.

Recommendations

62. Expand the TGA regulatory strengthening program to build the capacity of regional regulators.

63. Support regional health policy agencies to build digital health capabilities and policy frameworks, led by CSIRO's Australian e-Health Research Centre.



[Invested](#)

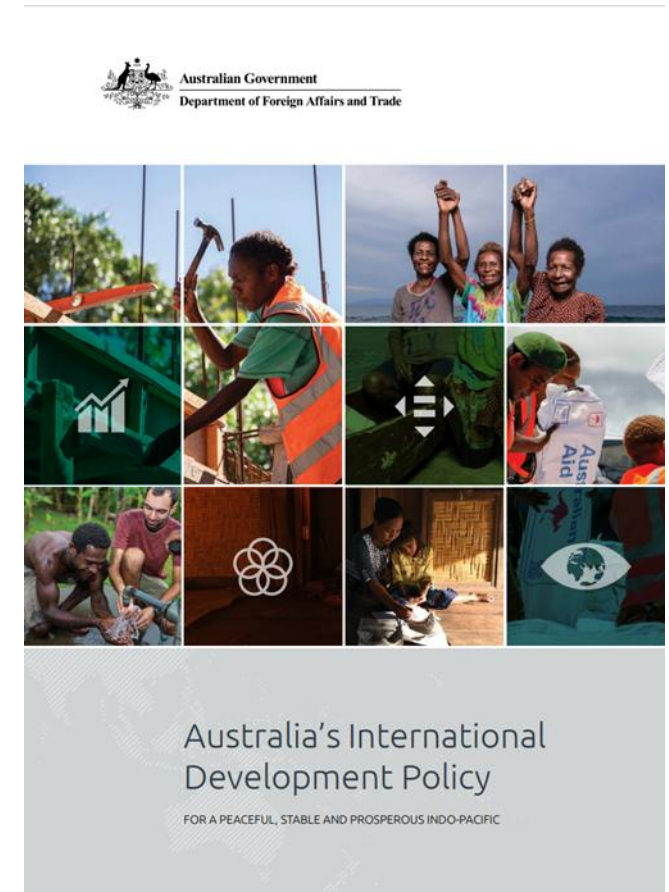
tga.gov.au

Australia's International Development Policy

Australia's International Development Policy is centred on listening, respect and genuine partnership. It will guide how Australia's development program supports a peaceful, stable, and prosperous future for Australia and our region – ensuring it is fit for the challenges and opportunities of our times.

August 2023: First new policy in a decade.

[Australia's International Development Policy | Australian Government Department of Foreign Affairs and Trade \(dfat.gov.au\)](https://www.dfat.gov.au/australias-international-development-policy)



22 of Australia's 26 nearest neighbours are developing countries, and some remain fragile.

*In many countries, **health systems** are struggling to provide universal care and combat disease... Harnessing opportunities and mitigating risks requires **effective institutions**, equitable services, and improving critical infrastructure.*

We will work closely with, and be guided by, our partners to ensure their needs are reflected... We will ensure diverse voices are heard and make sure women and girls are engaged in meaningful ways. We will start from a place of respect and an appreciation of the strengths and interests that all partners bring to the table. We have strong and enduring relationships in the region on which we will build.



Partnerships for a Healthy Region



Minister for Foreign Affairs, Senator the Hon Penny Wong

Improving the health and wellbeing of communities across the Pacific and Southeast Asia is critical to ensuring our region's security, prosperity and stability.

COVID-19 has reversed health and development gains in our region, and Australia is working with partners to restore their health systems and build on investments made during the acute phase of the pandemic.



Partnerships for a Healthy Region

5-year initiative announced by the Foreign Minister in a joint media release on **23 February 2023**.

Part of Australia's continued investment in the health of our region and an important contribution to the Pacific and Southeast Asia's recovery from COVID-19.

Expanding regional health assistance provided by key Australian Government agencies and organisations.

Extending partnerships with international agencies, supporting health systems in our region.

The RSP to continue with an expanded scope.



Australian Government
Department of Health and Aged Care
Therapeutic Goods Administration



Senator Penny Wong @SenatorWong
Australia government official

Improving the health of communities across the Pacific & Southeast Asia is critical to our region's prosperity and stability.

Today, I announced Australia is investing in high-quality health programs across our region as part of new initiative - Partnerships for a Healthy Region

7:28 am · 23 Feb 2023 · 23.5K Views

34 Retweets 9 Quote Tweets 136 Likes

Replying to @SenatorWong
Read our full statement here:

	foreignminister.gov.au Investing in a stronger, healthy region Australia will invest in high-quality health programs across the Pacific and Southeast Asia ...
--	---

3 9 33 8,110

RSP Expanded Scope



Regulatory Strengthening Program Design

Targeted capacity building activity themes

Quality

- Pre-market assessment of quality and manufacturing controls
- Good Manufacturing Practice
- Laboratory testing
- Substandard and falsified medicines
- Lifecycle management of products (variations)

Safety and Efficacy

- Pre-market assessment of safety & efficacy and post-market surveillance
- Risk Management Plans
- Medicine defects (may also involve product quality)
- Adverse event reporting
- Causality assessments
- Recalls

Risk Communication

- Role of regulators in keeping external stakeholders appropriately informed
- Promotion of the Quality Use of Medicines

Cross Cutting

Tools required to perform regulatory functions effectively (i.e. the legal, policy, IT and operational framework).

Opportunities to engage in **Reliance and Cooperation** for the purpose of:

- saving resources
- avoiding unnecessary duplication
- building a knowledge base by learning from other agencies

Design of inclusive & participatory **GEDSI** approaches and systems, including incorporation of GEDSI considerations in legal, policy and operational frameworks.



Regulatory Systems Strengthening



Targeted health systems *strengthening*, capacity building activities for 11 countries



Indonesia, Laos, Cambodia, Fiji, Papua New Guinea, Timor-Leste, the Philippines, Thailand, Vietnam, Malaysia and Myanmar (on hold)



Responsive Regulatory Support



'On call' *support* will be offered to address specific regulatory needs at a point in time for 22 countries



Indonesia, Laos, Cambodia, Fiji, Papua New Guinea, Timor-Leste, the Philippines, Thailand, Vietnam, Malaysia, Federated States of Micronesia, Kiribati, Nauru, Niue, Palau, Republic of Marshall Islands, Samoa, Solomon Islands, Tonga, Tuvalu, Vanuatu and Myanmar (on hold)



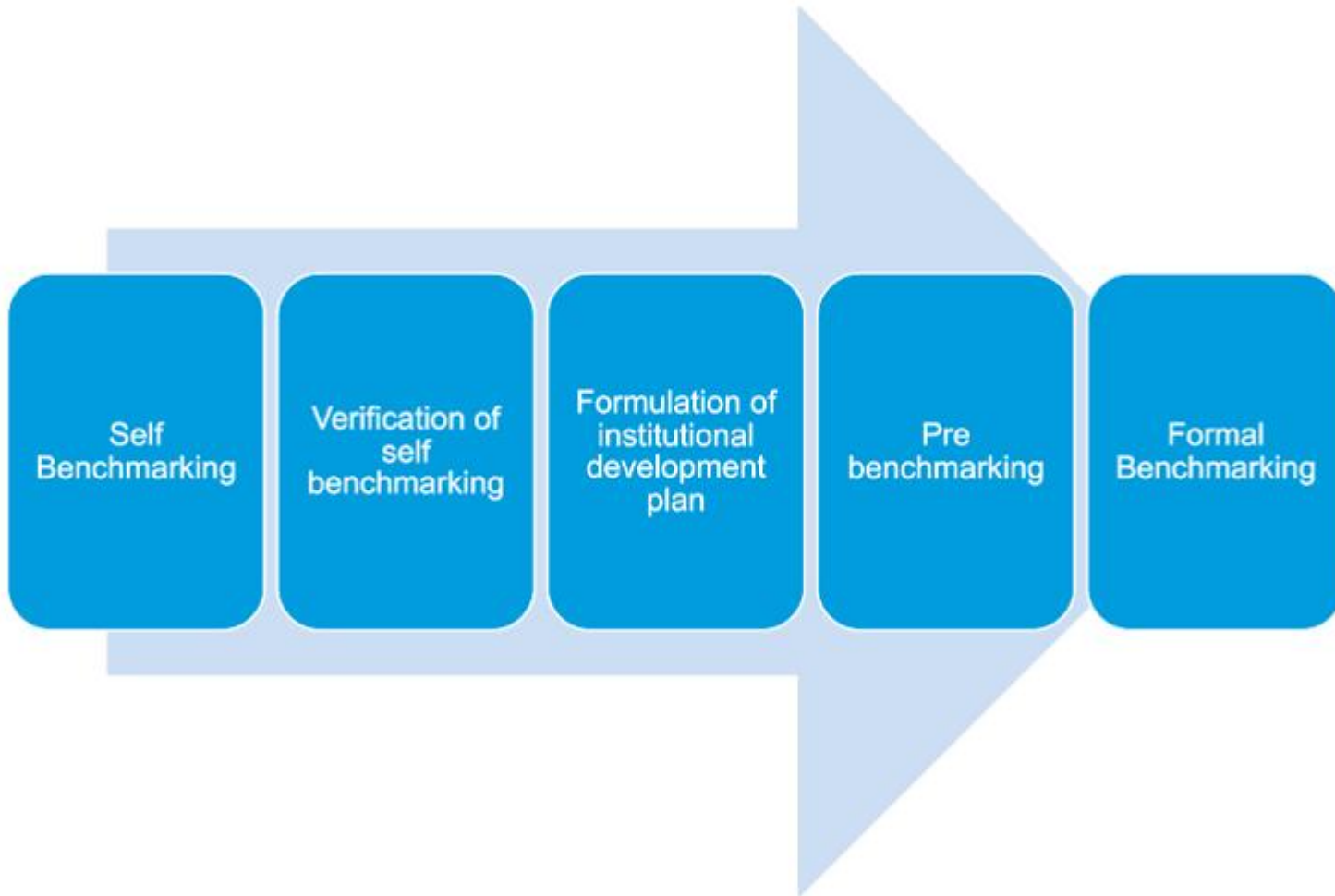
Support based on 'regulatory maturity'

WHO Global Benchmarking Tool (GBT)

Used to determine maturity levels on a 1-4 ranking

WHO GBT Performance Maturity Levels				
ISO 9004	1	2	3	4
	No formal approach	Reactive approach	Stable formal system approach	Continual improvement emphasized
WHO GBT	Some elements of regulatory system exist	Evolving national regulatory system that partially performs essential regulatory functions	Stable, well-functioning and integrated regulatory system	Regulatory system operating at advanced level of performance and continuous improvement
	Can ensure the quality of products if rely on ML 3/ ML 4 regulatory systems		Target of WHA Resolution 67.20	Advanced and well resourced regulatory systems

The GBT process



GBT Assessments

The TGA is historically a Stringent Regulatory Agency and hopes to achieve WHO Listed Authority (WLA) status to cement its international role in medical product regulation and to continue to be able to offer technical assistance to our regional colleagues as a trusted authority.

RSP staff have assisted with GBT-based exercises in PNG, Timor-Leste, the Philippines, Singapore and the Republic of Korea.





Pre-benchmarking exercise with PNG, September 2024.



Types of regulatory support

- 1) Product specific Market Authorisation
- 2) Capacity building
- 3) Responsive technical assistance



RSP is unique!

Existing pathways for Market Authorisation

- Requires open dialogue between applicants and NRAs
- Enabled by sharing information, e.g. filing strategies
- Objectively determine the value of current ‘work sharing’ initiatives and ‘reliance’ approaches



[ACCESS](#)



[Project Orbis](#)



[EUM4All](#)

[OPEN](#)



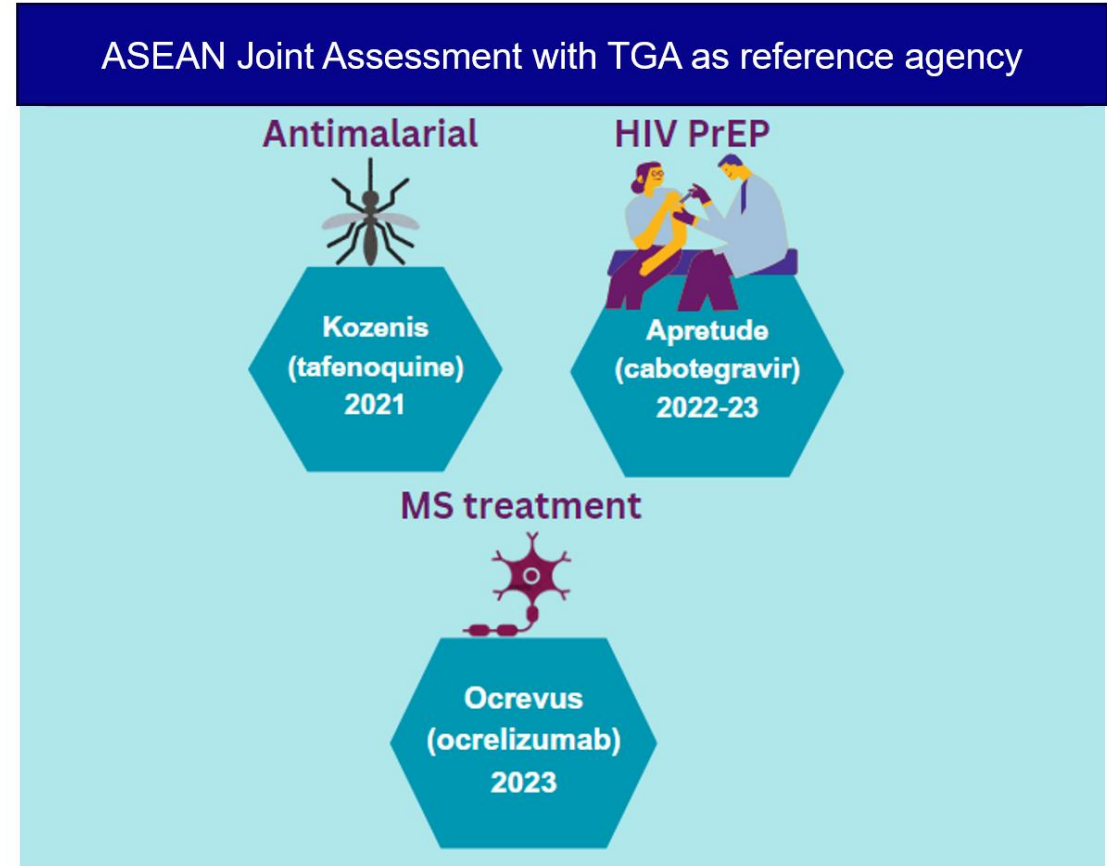
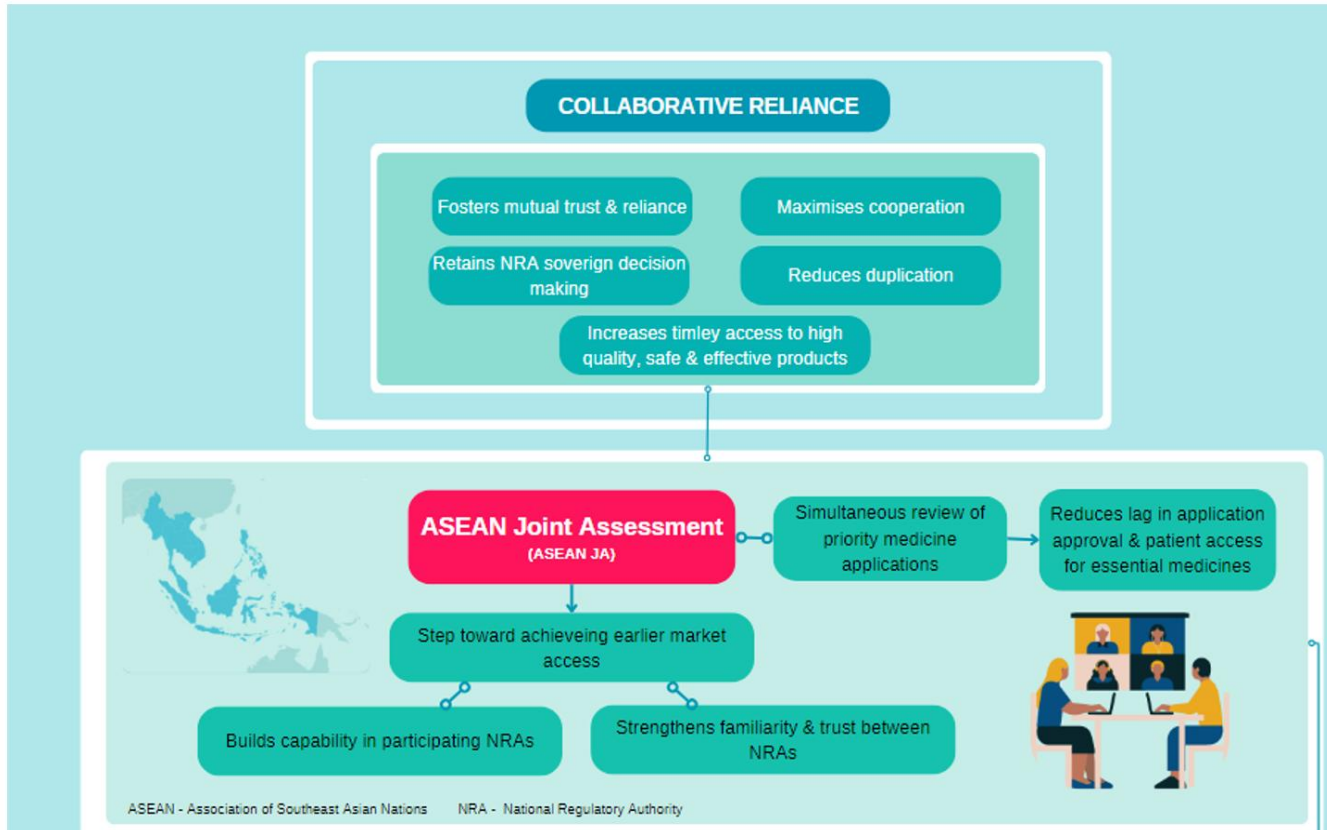
[MAGHP](#)



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TGA support for ASEAN Joint Assessments



Product Specific: Tafenoquine

Press release
For media and investors only

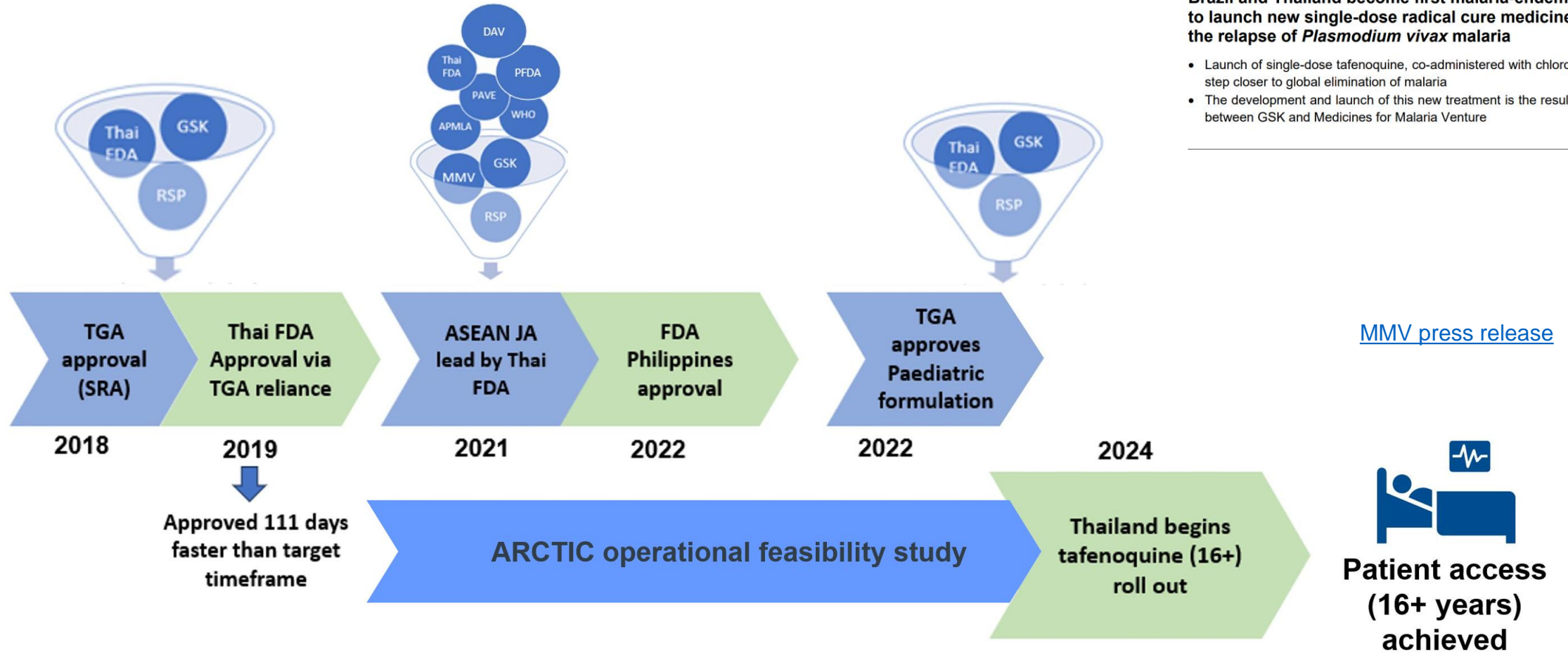
MMV
Medicines for Malaria Venture



Issued: 05 July 2024, London UK

Brazil and Thailand become first malaria-endemic countries to launch new single-dose radical cure medicine to prevent the relapse of *Plasmodium vivax* malaria

- Launch of single-dose tafenoquine, co-administered with chloroquine, is another step closer to global elimination of malaria
- The development and launch of this new treatment is the result of a partnership between GSK and Medicines for Malaria Venture



[MMV press release](#)



**Patient access
(16+ years)
achieved**



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Therapeutic Goods Administration

tga.gov.au

Bilateral Support Timeline

3 - 5 July 2019

WHO Workshop on Risk Management Plans and Periodic Safety Update Reports for tafenoquine with the Thai FDA

29 June – 6 July 2019

Mission to Thai FDA – CMC and Clinical aspects of the tafenoquine review

29 July – 2 Aug 2019

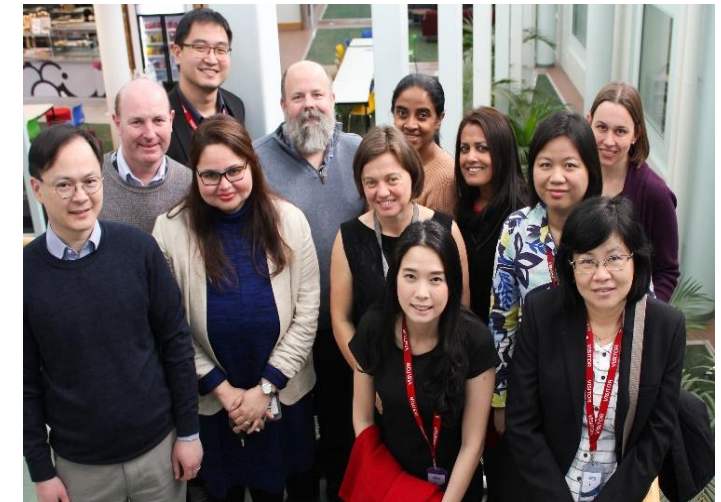
Thai FDA, Bureau of Drug Control visit the TGA

12 – 16 August 2019

Thai FDA, Health Products Vigilance Centre and WHO visit the TGA

4 – 6 September 2019

WHO Workshop on Signal Detection and Management and Benefit-Risk Assessment with the Thai FDA



Australian Government
Department of Health and Aged Care
Therapeutic Goods Administration

Other Product Reviews

	KOZENIS	Anti-HIV products	ZOLGENSMA
Complexity	Small molecule, single active	Small molecule, FDC	Gene therapy
TGA registration	Sep-18	Feb-19	Mar-21
Partner NRA approval	Dec-19	Nov-22	Mar-23
Estimated review period*	< 1 year	~ 2 years	~ 1 year
Engagement	in-person	virtual	virtual
PDP	MMV	-	-

* Estimates based on period of engagement between TGA and partner NRAs



Capacity building in Fiji



- No requirement for products to be registered prior to importation
- Implementing medicine registration processes
- Links to procurement for public hospital system

2023: Listing products

- Visibility over products being imported
- Establish a database
- Provide importers time to submit applications

Mid-2024:
Registration of
products for
import

Listing pathway open from Feb 2023 – Feb 2025

What is the minimum information Fiji should request to ensure the quality, safety and efficacy of imported products?

- RSP is working with Fiji's regulator to determine standards, develop guidelines, communicate changes to applicants and train staff
- Encourage the use of reliance, where practical

Responsive technical assistance

Urgent request received 31 January 2024.

First delivery 23 February 2024.

- IV antibiotics
- Glucose, saline and water for injection
- Zero stock of EML medicines and some essential supplies

Follow up in-country support through RSP team March 2024.



Medicine delivery 23 February 2024



Our Stakeholders



Australian Government



INDO-PACIFIC CENTRE FOR HEALTH SECURITY

Department of Foreign Affairs and Trade (DFAT)
Centre for Health Security

Incidents and Substandard/Falsified Medical Products (ISF)

Facilitated Product Introduction (FPI) SEARO (and SEARN) Coalition of Interested Parties (CIP) – GSG (Global Steering Group)

WPRO (and WPRA)

Regulatory Systems Strengthening (RSS)  World Health Organization Pharmacovigilance

Coalition of Interested Parties (CIP) - SEARN WHO country offices UMC (Uppsala Monitoring Centre)



ASEAN



NCIRS - National Centre for Immunisation Research and Surveillance



BADAN POM

Indonesian Food and Drug Authority, Badan POM/BPOM



NATIONAL PHARMACEUTICAL REGULATORY AGENCY
MINISTRY OF HEALTH MALAYSIA

Malaysia National Pharmaceutical Regulatory Agency (NPRA)



Ministry of Health, Lao PDR.
Food and Drug Department (FDD)



Thai Food and Drug Administration (Thai FDA)



Asian Development Bank (ADB)



MMV Medicines for Malaria Venture



CoRE



CEPI - Coalition for Epidemic Preparedness Innovations



MINISTRY OF HEALTH
DEPARTMENT OF DRUGS AND FOOD

Ministry of Health, Cambodia
Department of Drugs and Food (DDF)



Drug Administration of Vietnam (DAV)



Fiji Medicines Regulatory Authority (Fiji MRA)



Bill & Melinda Gates Foundation (BMGF)



TB Alliance




CHAI - Clinton Health Access Initiative




Papua New Guinea
National Department of Health (NDOH)



Food and Drug Administration (FDA), Philippines



Ministry of Health Timor-Leste, Direcção Nacional da Farmacia e Medicamentos (DNFM) (National Directorate of Pharmacy and Medicine)

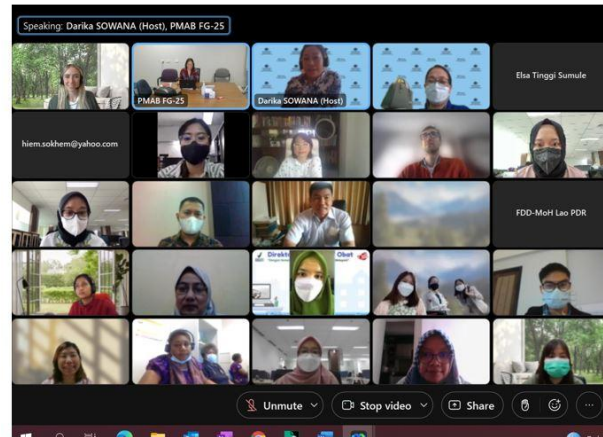


Pharmaceuticals and Medical Devices Agency (Japan)

Asia-Pacific Economic Cooperation - Regulatory Harmonization Steering Committee (APEC RHSC)



Who we work with...







Australian Government

Department of Health and Aged Care
Therapeutic Goods Administration

Keynote: Collaboration and work sharing to bring innovation to patients



Marie Valentin

Team Lead, Facilitated Product Introduction Regulation and Safety Unit [REG] Regulation and Prequalification Department [RPQ]

World Health Organization

Collaboration and work sharing to bring innovation to patients

Marie Valentin

Team Lead,

Facilitated Product Introduction

Regulation and Safety Unit, Regulation and
Prequalification Department,

World Health Organization

IFPMA 12th Asian Regulatory Conference – Day 1 Tuesday 3rd December 2024 (virtual)

Asia's role in driving a more efficient, innovative and patient-centric regulatory environment

Medical products – instrument for public health



SDG 3 – Target 3.8

Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

Access to medical products – global challenge

- Good health is impossible without access to medical products;
- An estimated **two billion people have no access to essential medicines**, effectively shutting them off from the benefits of advances in modern science and medicine.
- Reasons for limited/insufficient access are numerous – including insufficient/inadequate regulatory capacity and lack of collaboration and work sharing between countries in regulation of medical products.



Objectives of the WHO regulatory system strengthening programme

Why reliance?

ML

With some elements of regulatory system

1

Evolving national regulatory system

2

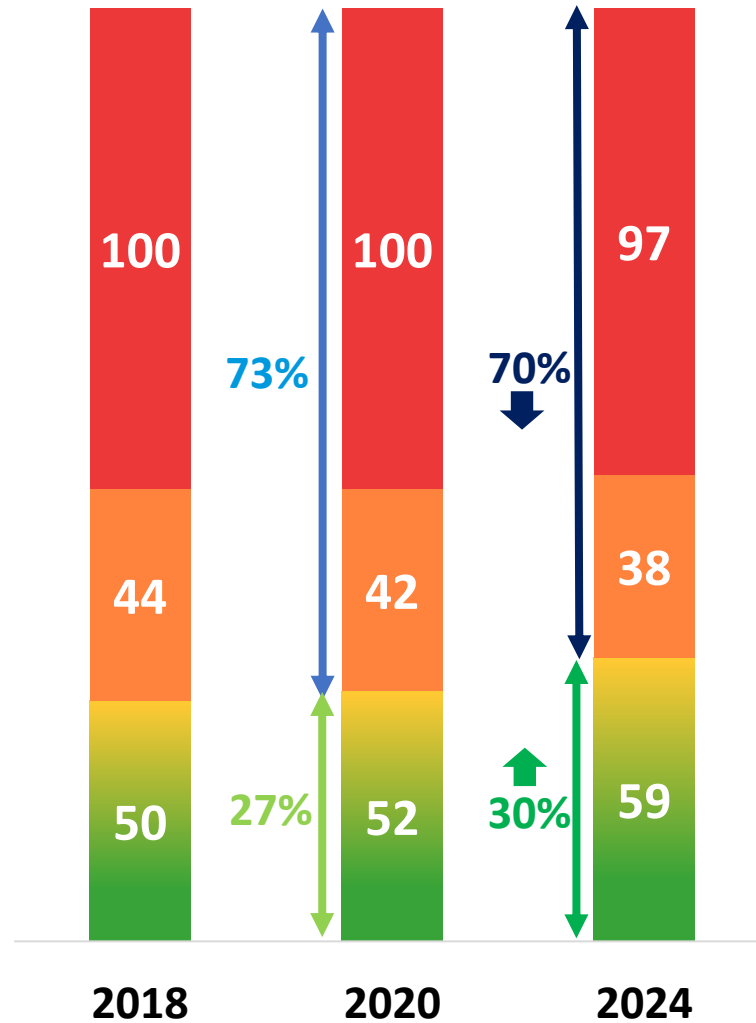
Stable, well functioning and integrated

3

Advanced level of performance and continuous improvement

4

ML: (regulatory system) maturity level



Total Number of countries = 194

1 - Build regulatory capacity in Member States consistent with good regulatory practices



Good regulatory practices, 2021

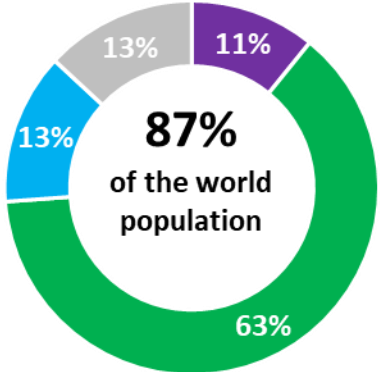
2 - Promote regulatory cooperation, convergence and transparency through networking, work-sharing and reliance



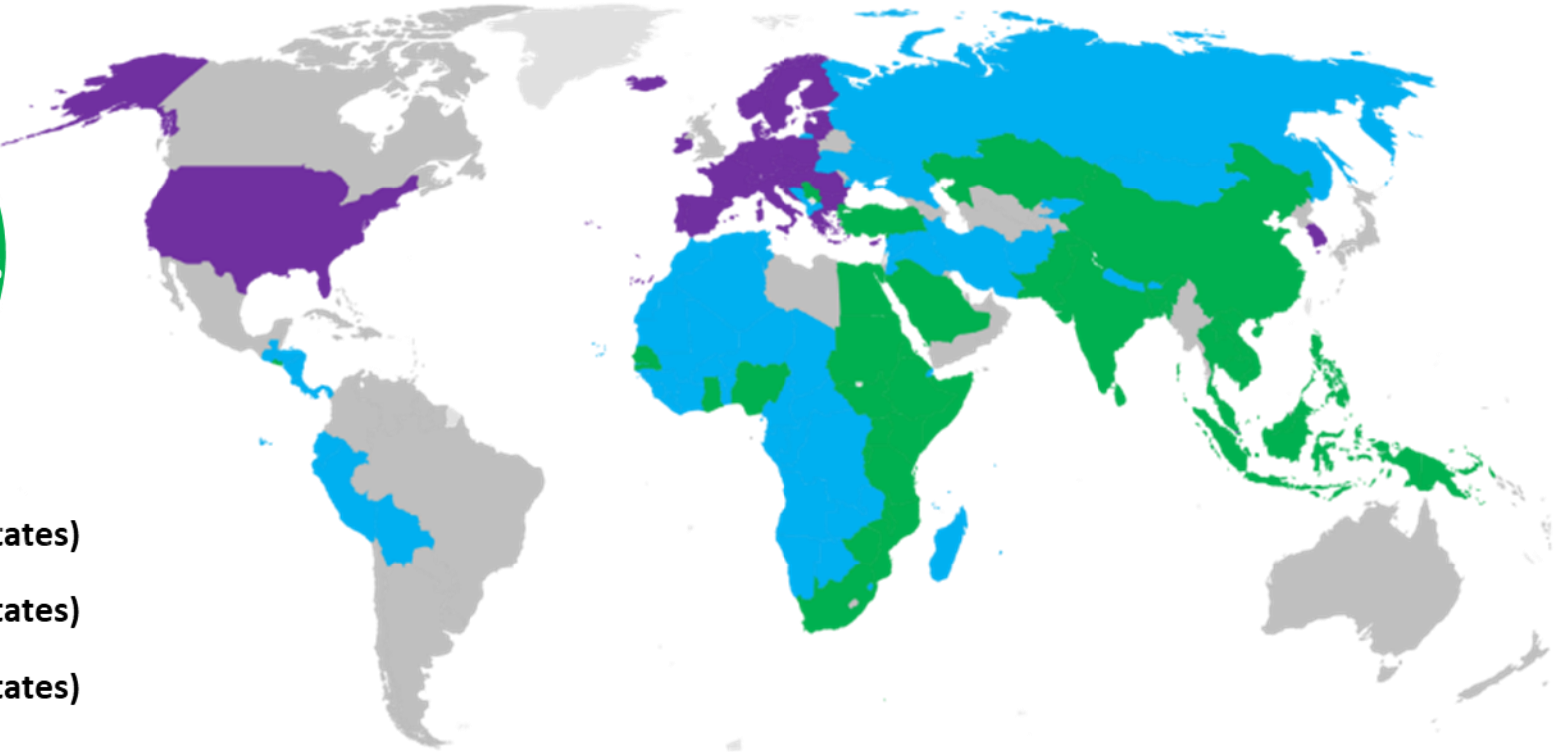
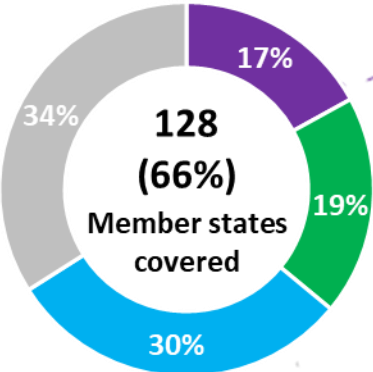
Good reliance practices, 2021

Global status of benchmarking and performance evaluation of regulatory systems (2016 – September 2024)

% of world population



% of member states



- WHO Listed authority (WLA) **(33 member states)**
- Benchmarking **(37 member states)**
- Self-benchmarking **(58 member states)**

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization (WHO) concerning the legal status of any country, territory, city or area of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on map represent approximate border lines for which there may be not yet be full agreement.

Source: WHO RSS database, Sep 2024

Powered by Bing
© Australian Bureau of Statistics, GeoNames, Microsoft, Navinfo, OpenStreetMap, TomTom

Growing use of reliance



Growing use of reliance



Long history of improving efficiency through reliance (e.g. CPP)

Reliance embedded in the WHO Global Benchmarking Tool

WHO Good Reliance Practices, March 2021

Promote “informed” reliance

Increase reliance for all regulatory functions & worksharing

Develop more guidance for practical implementation

PAST

COVID-19/emergency response as strong accelerator for reliance

Universality, regardless of maturity level or resources

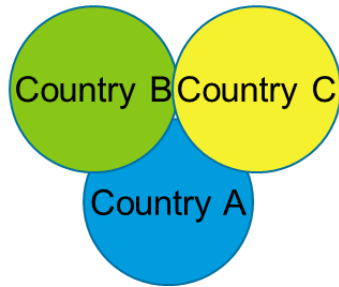
FUTURE

PRESENT

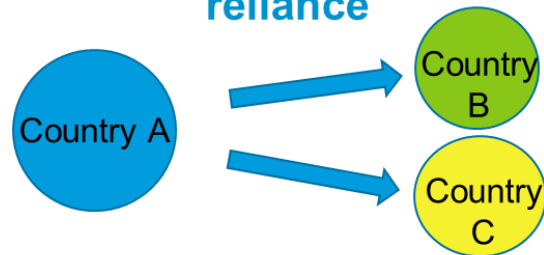
Reliance's many shapes and forms

“The act whereby the regulatory authority in one jurisdiction **takes into account and gives significant weight to assessments performed by another regulatory authority or trusted institution**, or to any other authoritative information, **in reaching its own decision**. The relying authority remains **independent, responsible and accountable** for the decisions taken, even when it relies on the decisions, assessments and information of others.”

Work-sharing



Abridged pathway using reliance



Recognition



Unilateral



Mutual recognition

- Sovereignty maintained;
- More efficient use of global regulatory resources;
 - Decrease duplication, increase trust and collaboration.

Source of information on reliance

WHO Good Reliance Practices

Annex 10

Good reliance practices in the regulation of medical products: high level principles and considerations

Background

WHO supports reliance on the work of other regulators as a general principle in order to make the best use of available resources and expertise. This principle allows leveraging the output of others whenever possible while placing a greater focus at national level on value-added regulatory activities that cannot be undertaken by other authorities, such as, but not limited to: vigilance, market surveillance, and oversight of local manufacturing and distribution. Reliance



Adopted by WHO Expert Committee on Specification for Pharmaceutical Products in October 2020, published in March 2021 <https://www.who.int/publications/i/item/55th-report-of-the-who-expert-committee-on-specifications-for-pharmaceutical-preparations>



Short eLearning Module of main principles and examples of reliance (Oct 2022)
<https://openwho.org/courses/good-reliance-practices>

International Pharmaceutical Regulators Programme
Questions & Answers on Reliance
https://admin.iprp.global/sites/default/files/2022-11/IPRP_RelianceQ%26As_2022_0930.pdf

IPRP Good Reliance Practice Repository on current models and frameworks for reliance
October 2024 - <https://www.iprp.global/news/iprp-good-reliance-practices-repository-now-published>



IPRP Questions and Answers document¹ on Reliance
Version dated 30 September 2022

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1. What is reliance ?	2
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3. Why is reliance important for the regulatory oversight of medical products?	3
4. Do National Regulatory Authorities maintain their independence and sovereignty when using reliance?	3
5. What are the main principles of reliance?	4
6. What competences are required in applying reliance?	4
8. What type of reliance models exist?	5
10. How can an NRA start using reliance models?	6
11. What is the risk-based approach in reliance?	6
12. At which stages of the product life cycle can reliance be used?	7



Examples of reliance in WHO Processes



WHO Prequalification (abridged, alternative etc.)



Good Practices Inspections



WHO Collaborative Registration Procedure



WHO Certificate of Pharmaceutical Products

Reliance key to facilitate access during pandemic response

Reliance is key to effective access and oversight of medical products in case of public health emergencies

Agnes Saint-Raymond, Marie Valentin, Nobumasa Nakashima, Nick Orphanos, Gustavo Santos, Georgios Balkamos & ...show all
Pages 805-810 | Received 18 Dec 2021, Accepted 07 Jun 2022, Published online 09 Aug 2022

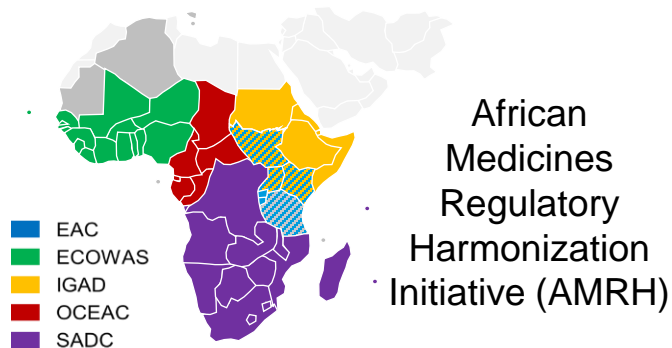
Download citation <https://doi.org/10.1080/17512433.2022.2088503>

[Full Article](#) [Figures & data](#) [References](#) [Citations](#) [Metrics](#) [Licensing](#) [Reprints & Permissions](#)

Expert Review of Clinical Pharmacology
<https://www.tandfonline.com/doi/full/10.1080/17512433.2022.2088503>

Regulatory convergence and harmonization initiatives

Convergence and harmonization efforts should in theory diminish duplication, creating a "common language" for decision-making and facilitating cooperation, work-sharing and eventually reliance or recognition



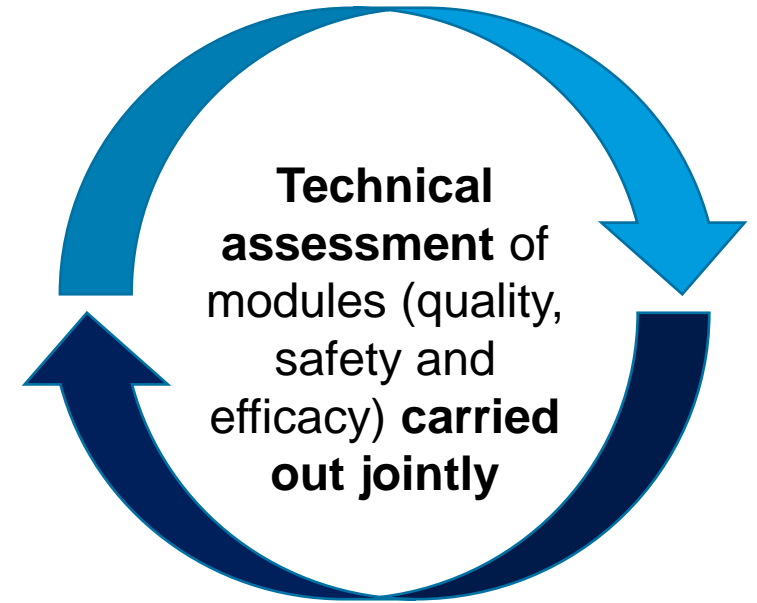
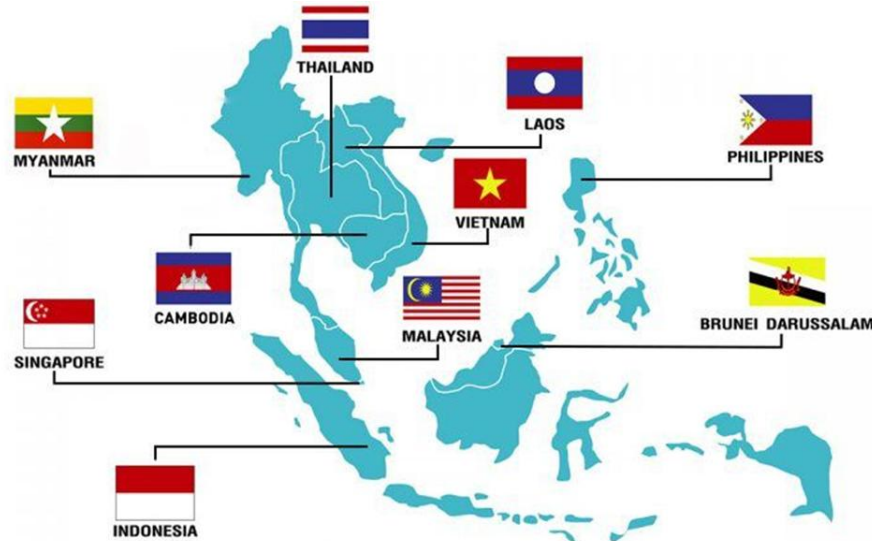
ASEAN SIAHR Project



African Vaccine Regulators Forum (AVAREF)

ASEAN Joint Assessment concept and principles

Same application



- Open to all 10 ASEAN NRAs on a **voluntary basis**
- **Minimum of 3 NRAs**
- Administrative/local submission/assessment is conducted by individual NRAs in parallel/before the technical assessment starts
- **Final regulatory decision taken by each NRA** (according to national timelines) based on joint assessment report and national-relevant considerations if applicable (30 to 90 days)

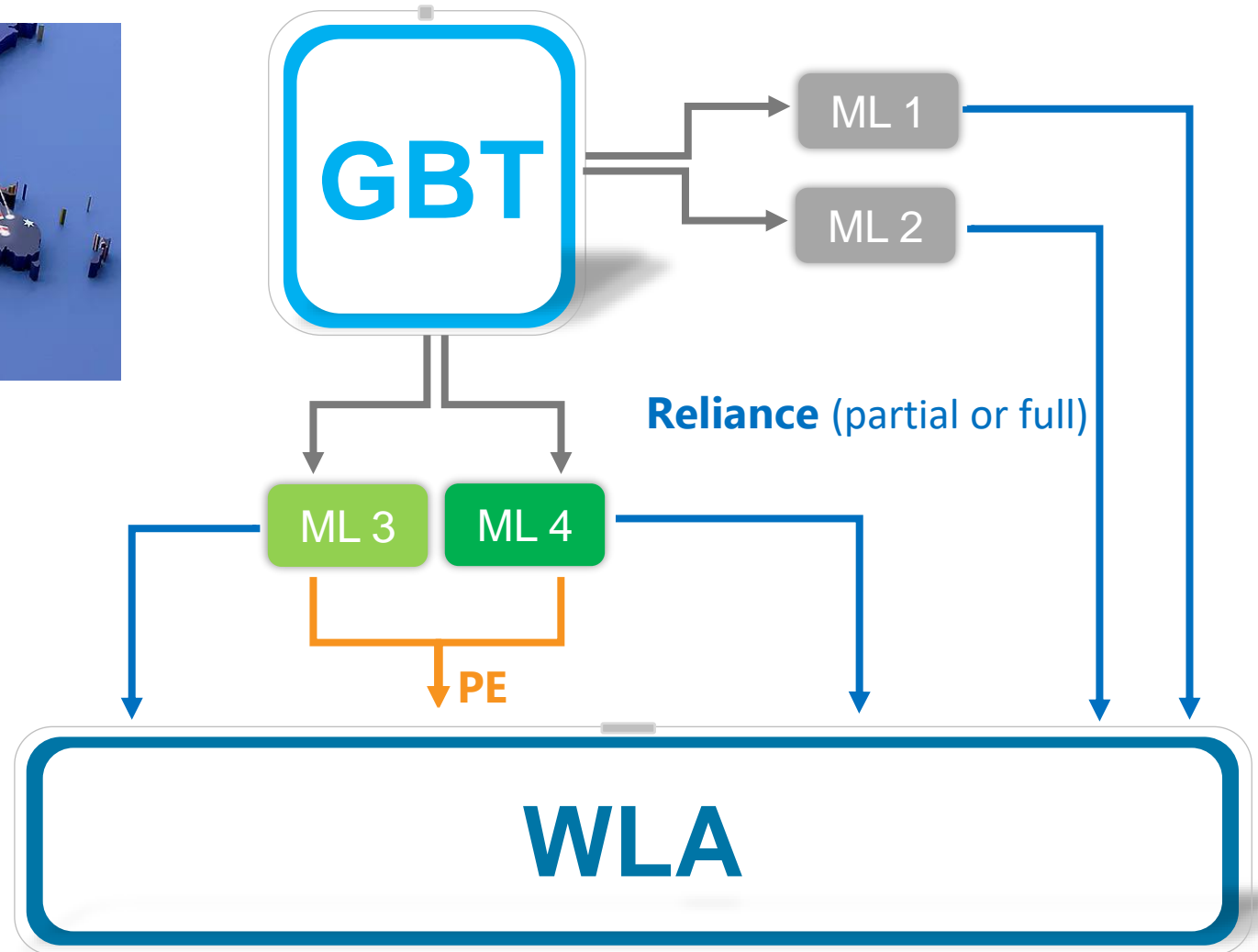


* Can be used by other ASEAN non-participating NRAs

Fostering reliance through the WLA initiative



- Only ML3 and ML4 RAs are eligible for performance evaluation
- Reliance can be applied by all



First three WLAs

31st October 2023



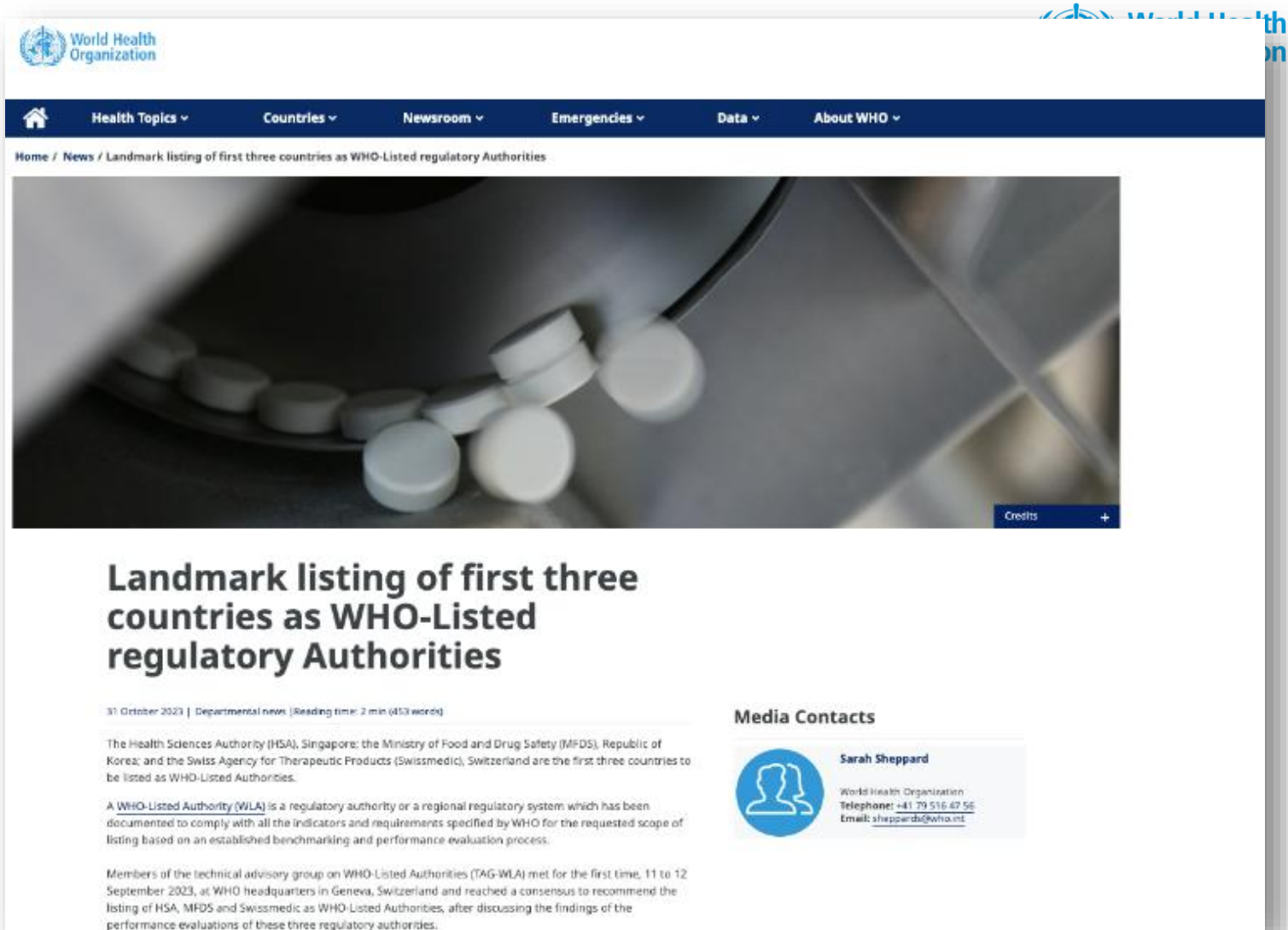
Switzerland
Swissmedic



Republic of Korea
MFDS



Singapore
HSA



The screenshot shows a WHO news article titled "Landmark listing of first three countries as WHO-Listed regulatory Authorities". The article is dated 31 October 2023 and is categorized as "Departmental news". The text states that the Health Sciences Authority (HSA) of Singapore, the Ministry of Food and Drug Safety (MFDS) of the Republic of Korea, and the Swiss Agency for Therapeutic Products (Swissmedic) of Switzerland are the first three countries to be listed as WHO-Listed Authorities. The article also mentions that a technical advisory group on WHO-Listed Authorities (TAG-WLA) met for the first time on 11 to 12 September 2023, at WHO headquarters in Geneva, Switzerland, and reached a consensus to recommend the listing of HSA, MFDS, and Swissmedic as WHO-Listed Authorities. A "Media Contacts" section lists Sarah Sheppard as the contact person, with her phone number (+41 79 516 67 56) and email (sheppard@who.int).

<https://www.who.int/news/item/31-10-2023-landmark-listing-of-first-three-countries-as-who-listed-regulatory-authorities>

33 new WLAs

20th May 2024



European Medicines
Regulatory Network

EC/EMA
+30 NCAs



United States
of America

US FDA



Singapore

HSA*

* MC function



The screenshot shows a WHO news article titled "Largest number of regulatory agencies for medical products approved as WHO Listed Authorities". The article is dated 20 May 2024 and has a reading time of 2 minutes (536 words). The main text states that WHO has approved the designation of 33 national and regional regulatory authorities (WLAs) that can be relied on for fulfilling the highest level of regulatory standards and practices for quality, safety and efficacy of medicines and vaccines. This listing makes a total of 36 regulatory authorities from 34 Member States now designated as WLAs since the launch of the initiative in March 2022. The newly approved WLAs include: the U.S. Food and Drug Administration (US FDA) and the European Medicines Regulatory Network (EMRN), which is composed of the European Commission, the European Medicines Agency (EMA) and the medicines regulatory authorities of the following 30 countries: Austria

Media Contacts: WHO Media Team, World Health Organization, Email: mediaoutreach@who.int

<https://www.who.int/news/item/20-05-2024-largest-number-of-regulatory-agencies-for-medical-products-approved-as-who-listed-authorities>

How can we collectively better manage PAC?

**Initial
authorization**

**Post-
authorization
changes**



Pragmatic approach

More recognition for (minor) variations?

Increase transparency of PAC assessment

Accommodate new concept for product lifecycle management (e.g. ICH Q12)

Simplification of regulatory frameworks

More reliance and ensuring product sameness

Build trust between stakeholders

Key Messages on reliance going forward

- Essential for all regulators to accommodate/implement reliance in their regulatory functions.
- Collaboration & communication between all stakeholders is key.
- New opportunities for reliance with the WLA framework.
- Collectively define better model for PAC management.





www.who.int/medicines

Thank you for your attention!

Marie Valentin, Team Lead, Facilitated Product Introduction Team, World Health Organization

valentinm@who.int

03-06 December 2024



EVOLVING LANDSCAPES

Asia's role in driving a more efficient,
innovative and patient-centric
regulatory environment

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Virtual coffee/tea break



ACCESS Consortium



Moderated Panel

PANEL DISCUSSION



Leonard Both
Swissmedic



Michelle Cheng
Abbvie



Helen Critchley
Sanofi



Freddie Foo
Health Sciences Authority



Joel Raffel
Medicines and Healthcare
products Regulatory
Agency



Michael Wiseman
Therapeutic Goods
Administration



Tham Vo
Medicines Australia



The Access Consortium

IFPMA, ARC Dec 2024, Virtual Conference

Leonard Both, PhD LLM

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Institut suisse des produits thérapeutiques
Istituto svizzero per gli agenti terapeutici
Swiss Agency for Therapeutic Products

Hallerstrasse 7, 3012 Bern
www.swissmedic.ch

Disclaimer

- The views and opinions expressed in the following PowerPoint slides are those of the individual presenter.

Background

- There is a growing awareness of the need for regulators to work together to maximise use of resources.
- Global collaboration is urgently needed. Working together allows patients earlier access to medicines, which is both an industry objective and a regulator's objective.
- The Access Consortium is actively exploring approaches to ensure deeper collaboration and ultimately facilitate timely patient availability of medicines across all Access regions.
- Our work has recently been expanded to ATMPs, inspections, advice to companies via *Access Pipeline meetings*, and clinical trials.
- This session will explore how Access Consortium agencies have been working together and how their collaboration could evolve in the future.

Our goal



Our main goal is to maximise international co-operation between partners in the Access consortium, reduce duplication, and increase each agency's capacity to ensure patients have timely access to high quality, safe and effective therapeutic products.

The trend towards globalisation of therapeutic products industries and the rapid emergence of new technologies in the last decade accompanied with shared global challenges have created an increased need for regulatory bodies to co-operate and communicate with each other routinely. To address this, we maximise the use of up-to-date technical expertise, and ensures a consistent, contemporary approach to assessing the benefits and risks associated with the use of therapeutic products.



Health Canada
Santé Canada



ACSS
CONSORTIUM

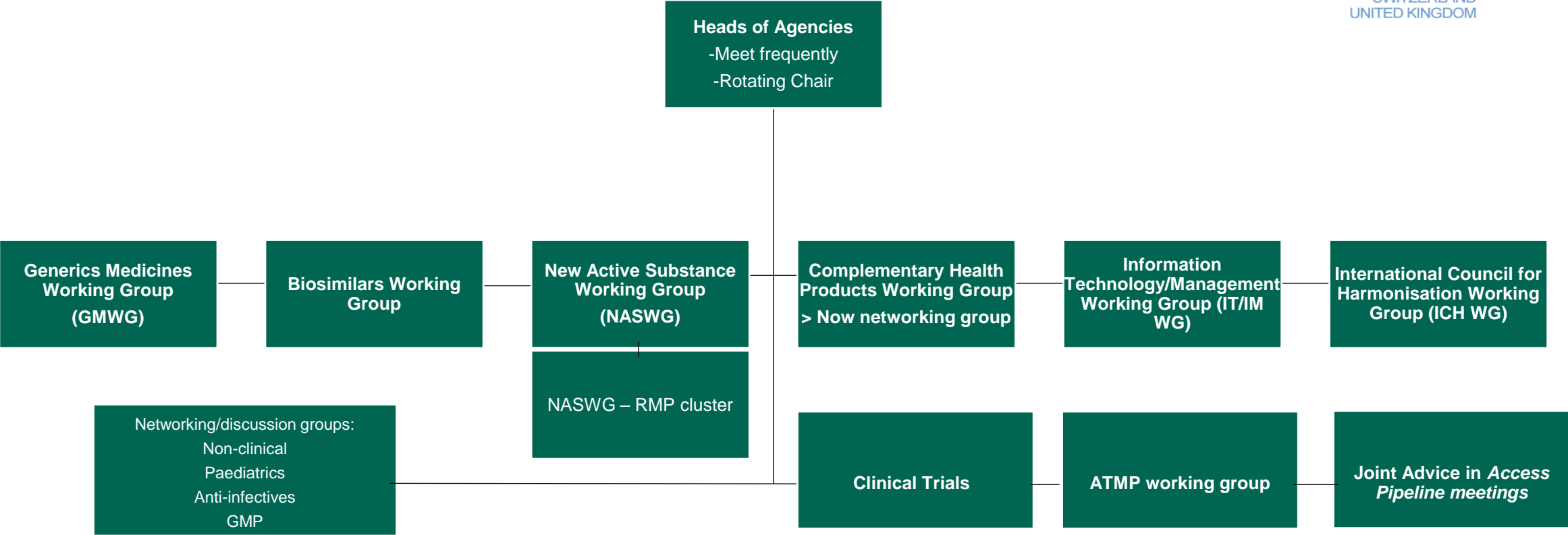
AUSTRALIA
CANADA
SINGAPORE
SWITZERLAND



ACCESS
CONSORTIUM

AUSTRALIA
CANADA
SINGAPORE
SWITZERLAND
UNITED KINGDOM

Structure



Access Consortium

Strategic Plan 2021-2024



Strategic Objectives

The following are the strategic objectives for 2021-2024 to guide the Access Consortium in achieving its vision and mission.

Strengthening Access work-sharing initiatives

Making Access a competitive and efficient submission pathway of choice for industry, supported by regulators:

- Increase the number of applications assessed by Access work-sharing initiatives
- Increase the variety of health products assessed within Access
- Optimize work-sharing through greater alignment of regulatory approaches and technical and scientific requirements
- Strengthen collaboration by supporting Access participation in international initiatives
- Explore best practices with optimal use of resources for assessment collaboration
- Capture lessons learned from the COVID-19 experience to innovate together and improve work-sharing

Expanding lifecycle approach

Maximizing collaboration throughout the health product lifecycle:

- Consider collaboration on clinical trials design and/or sponsor advice
- Explore the use of real-world data and real-world evidence in clinical trial design and regulatory approaches
- Establish collaboration and scientific information sharing within Access on risk management, pharmacovigilance and post-market safety
- Explore the use of pharmacovigilance and real-world data to support early entry on the market of vaccines and therapeutics for COVID-19 and other diseases
- Consider further collaboration, including work-sharing, on global Good Practice (GxP) inspections complementary to existing international initiatives

Regulatory innovation that integrates a healthcare systems approach

Increasing regulatory capacity while collaborating with key national healthcare systems partners to facilitate uptake of innovative health products:

- Strengthening and leveraging regulatory scientific capacity within Access for emerging technologies and innovative products
- Explore collaboration with national health technology assessment organizations (and similar)
- Explore a more collaborative aligned “systems” approach to regulating innovative products by:
 - integrating national healthcare system partners throughout the lifecycle of innovative products, and
 - fostering links between healthcare system needs and regulatory oversight of innovative products

Indicators of Success

The Access goal to become regulators of choice will be measured by the following indicators of success:

- Increase in applications to Access at the same time or soon after filed with other major medicines regulators
- Increase in number of products made available to patients via Access
- Increase in diversity of products assessed via Access
- Decrease in average time to market for products assessed under Access
- Reduced effort and duplication for both regulators and industry
- Increased collaboration on the alignment of products made available to patients via Access with healthcare system needs
- Increased collaboration on global GxP inspections
- Increase in number of ICH guidelines implemented through Access collaboration

Example for successful Access collaboration

Research and analysis

ACCESS Consortium guidance on strain changes in authorised COVID-19 vaccines

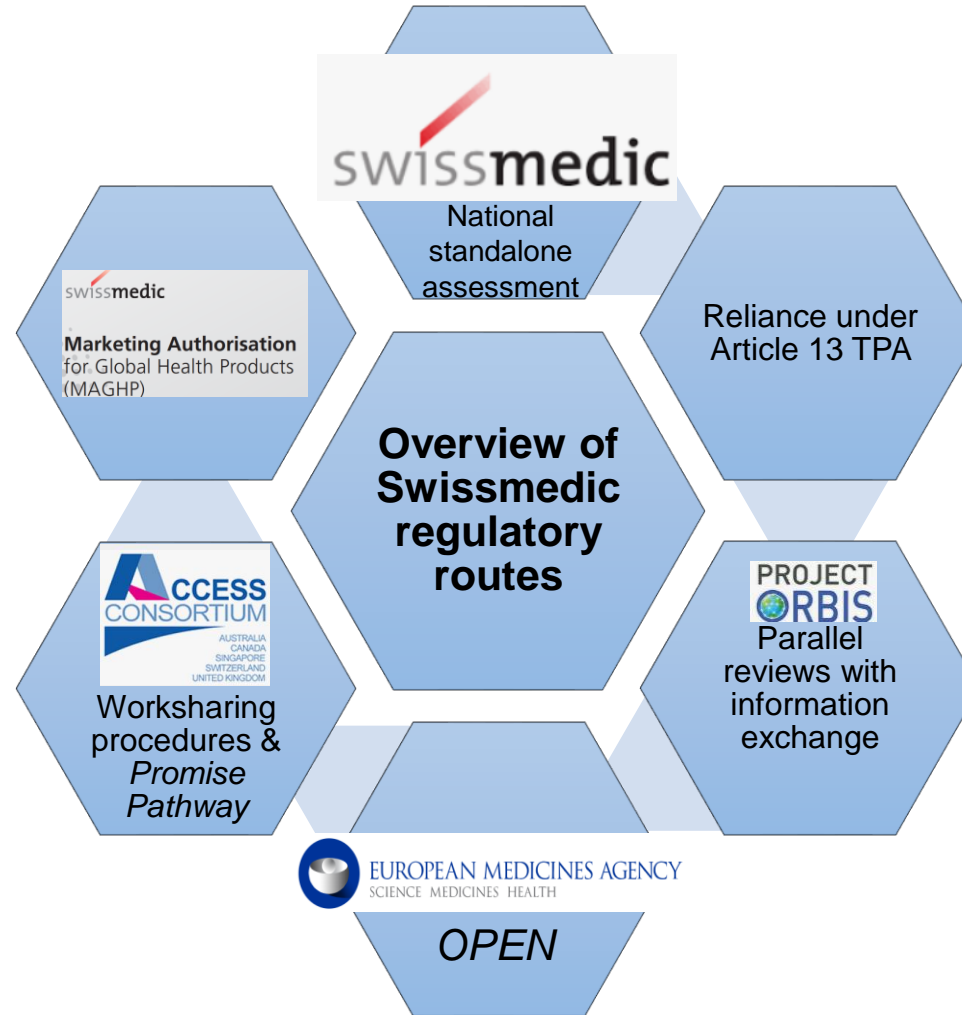
A regulatory approach for updating authorised coronavirus vaccines should mutations at any time make them less efficacious due to insufficient cross-reactivity.

This document is only applicable to COVID-19 vaccines which have already been authorised, based on adequate data on pharmaceutical quality, safety and efficacy from pivotal clinical trials.

On public health and scientific considerations, Regulatory Authorities do not consider an updated coronavirus vaccine to be an entirely novel product with the resulting requirement for lengthy full-blown clinical studies.

Rather, a regulatory approach like for seasonal updates for influenza vaccines can be taken. Evidence gathered by the large pivotal clinical studies for initial authorisation and by mass vaccination campaigns is a strong foundation for this approach, as is ongoing research on the “correlate of protection” (i.e. what immunological readouts correlate with clinical protection from COVID-19 disease).

Access Consortium worksharing is part of an agency's toolkit (Example Switzerland)



Agencies can benefit from a sustainable toolkit of regulatory pathways, including reliance, worksharing, info exchange, and independent national reviews.

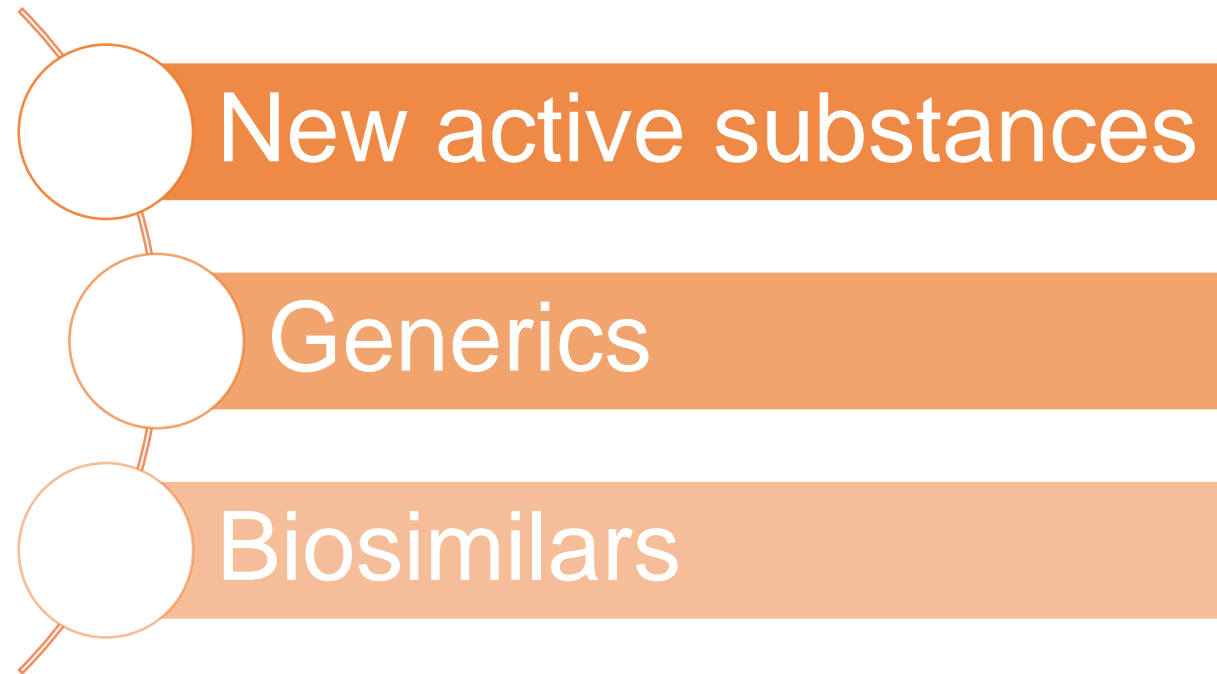
Access Consortium worksharing is part of an agency's toolkit

(Example UK)



Agencies can benefit from a sustainable toolkit of regulatory pathways, including reliance, worksharing, info exchange, and independent national reviews

3 Access Consortium initiatives for worksharing (WS):



WS procedures are subject to sovereign decisions for each country.

The rules and operational procedures for WS procedures can be found on the agencies' websites.

Reasons for agencies to workshare

- Access members have equal status in terms of engagement and decision making and can opt out if they wish.
- For new drug applications, the workload is simply split by CTD modules
- Applicants (sponsors) can choose from two to five jurisdictions (Australia's TGA, Health Canada, Singapore's HSA, Swissmedic and MHRA).
- **1st wave** agency positioning with a large population - All five jurisdictions have a collective population base of ~160 million.



Reason for Company Participation

80%

- Consolidated Questions For Multiple Markets
- Reduced Number Of Clarifaxes
- Possibility Of Shorter Review

60%

- Predictable Timeline For Receipt Of Questions

50%

- Near Simultaneous Approval In Multiple Markets

Graph from *Innovative Medicines Canada* survey conducted in June 2021

Work-sharing: Process

- Review under the Access Consortium is initiated by sponsors by submitting an “Expression of Interest” (EOI) application form outlining any differences foreseen in the dossiers to all applicable health authorities.
- Participating regulatory authorities and the sponsor may conduct a joint meeting to lay out a consolidated roadmap for the review cycle, including dates for the initial list of joint questions and the proposed decision date.
- At this point, the principal review activities are divided/assigned to different participating health authorities while country-specific CTD module 1 and the risk-management plan are independently reviewed by each authority.

Access Consortium work-sharing authorisations

Applications that have successfully received market approval through the Access Consortium “New Active Substance Work Sharing Initiative” (NASWSI) in Switzerland:

Medicinal product	Active substance	Partner agencies involved
Xofluza [®]	Baloxavir Marboxil	Australia’s Therapeutic Goods Administration (TGA), Health Canada
Kesimpta [®]	Ofatumumab	TGA Australien, Health Canada, Health Sciences Authority (HSA) Singapore
VeraSeal [®]	Fibrinogen and Thrombin	Australia’s Therapeutic Goods Administration (TGA), Health Canada
Verquvo [®]	Vericiguat	Australia’s Therapeutic Goods Administration (TGA), Health Sciences Authority (HSA) Singapore
Kerendia [®]	Finerenone	Health Sciences Authority (HSA) Singapore, Australia’s Therapeutic Goods Administration (TGA)
Nexviadyme [®]	Avalglucosidase alfa	Health Canada, Australia’s Therapeutic Goods Administration (TGA)
Cibinqo [®]	Abrocitinib	Health Sciences Authority (HSA) Singapore
Vabysmo [®]	Faricimab	Australia’s Therapeutic Goods Administration (TGA), Health Canada, Health Sciences Authority (HSA) Singapore, Medicines and Healthcare Products Regulatory Agency (MHRA)
Scemblix [®]	Asciminib	Australia’s Therapeutic Goods Administration (TGA), Health Canada, Health Sciences Authority (HSA) Singapore, Medicines and Healthcare Products Regulatory Agency (MHRA)
Kapruvia [®]	Difelikefalin	Australia’s Therapeutic Goods Administration (TGA), Health Canada
Mounjaro [®]	Tirzepatid	Australia’s Therapeutic Goods Administration (TGA), Health Canada, Health Sciences Authority (HSA) Singapore

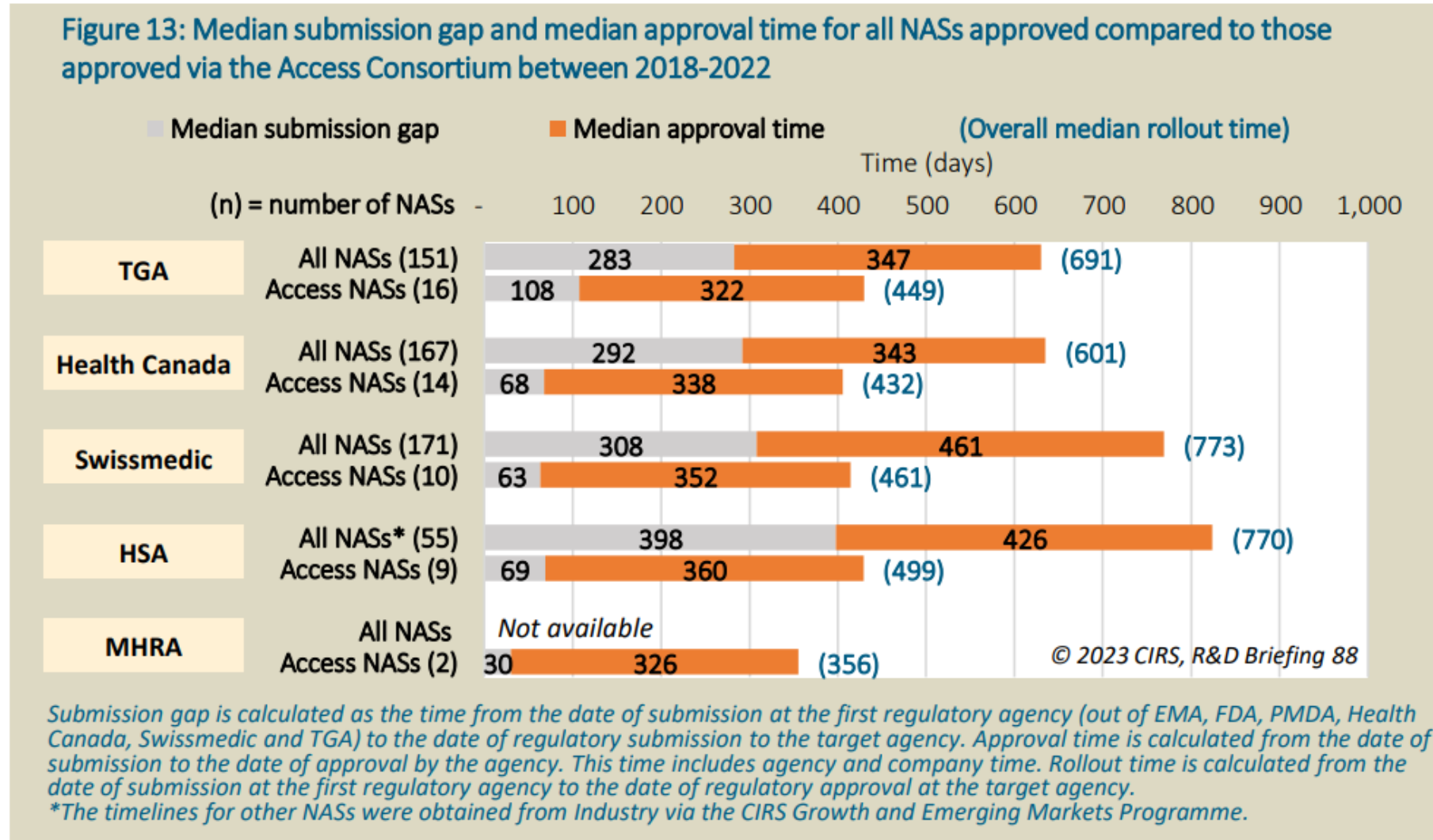
Tavneos [®]	Avacopan	Health Canada
Vafseo [®]	Vadadustat	Australia’s Therapeutic Goods Administration (TGA), Medicines and Healthcare Products Regulatory Agency (MHRA)
Alhemo [®]	Concizumab	Australia’s Therapeutic Goods Administration (TGA), Health Canada
Omvo [®]	Mirikizumab	Australia’s Therapeutic Goods Administration (TGA)
Veozza [®]	Fezolinetant	Australia’s Therapeutic Goods Administration (TGA)
Awikli [®]	Insulin icodex	Health Canada, Australia’s Therapeutic Goods Administration (TGA)
Fruzaqla [®]	Fruquintinib	Australia’s Therapeutic Goods Administration (TGA), Health Canada, Health Sciences Authority (HSA) Singapore, Medicines and Healthcare Products Regulatory Agency (MHRA)
Velsipity [®]	Etrasimod	Health Sciences Authority (HSA) Singapore
Winrevair [®]	Sotatercept	Australia’s Therapeutic Goods Administration (TGA), Health Canada, Health Sciences Authority (HSA) Singapore

Applications that have successfully received market approval through the Access Consortium “Generic Medicines Work Sharing Initiative” (GMWSI) in Switzerland:

Generic Medicines	Active substance	Partner agencies involved	Links
Everolimus Teva [®]	Everolimus	Australia’s Therapeutic Goods Administration (TGA), Health Canada	
Dabigatran Sandoz [®]	Dabigatran	Australia’s Therapeutic Goods Administration (TGA)	
Agilus [®]	Dantrolen	Medicines and Healthcare Products Regulatory Agency (MHRA)	
Enzalutamid Sandoz [®]	Enzalutamid	Medicines and Healthcare Products Regulatory Agency (MHRA)	

NAS Work-sharing Initiative

Metrics published in [CIRS R&D Briefing 88](#) confirm reduced submission gaps, as well as competitive approval times.



Access collaboration

- Shortened submission gaps, improved use of available resources and competitive approval times usually outweigh coordination efforts between Access partners.
- A common challenge is conducting a peer review based on something another agency has assessed. Trust must be built between parties, including direct interactions and dialogue.
- Access collaboration goes beyond the assessment of MAA modules, extending into post-marketing and inspection activities, spanning from small to large molecules, and more recently, also covering ATMPs.
- In addition, to make Access submissions more attractive to companies, a new fast-track assessment called the *Promise Pathway* has recently been introduced.

Pilot: Access Consortium Promise Pathway

New Access Work-Sharing Pathway for Priority Procedures

Promise Pilot Pathway

13.12.2023

The Access Consortium working group for new active substances has established an aligned process for priority review, which includes the decision on priority status. In order to facilitate the process for applicants, common timelines for the priority review request have been established, and the request is evaluated in a collaborative way, seeking a consensus decision.

In creating the Promise Pilot Pathway, the Access partners sought commonality in their respective criteria for priority review. Applications for new active substances fulfilling the following criteria are eligible for the Promise Pilot Pathway:

- diagnoses, treats or prevents a condition that is serious, life-threatening or severely debilitating and
- for which no other treatment is currently registered and marketed in participating jurisdictions for the proposed indication

Legal framework in various Access countries

The image displays three overlapping website screenshots. The top-left screenshot is from **legislation.gov.uk**, showing a search interface with fields for 'Title:' and 'Year:'. Below the search fields, the text 'The Human Medicines' and 'UK Statutory Instruments > 2012 No. 1916' is visible. The top-middle screenshot is from the **Justice Laws Website**, featuring the Government of Canada logo and the text 'An Act respecting food, drugs, cos'. The top-right screenshot is from **Fedlex**, titled 'Food and Drugs Act', showing a breadcrumb trail: 'Home > Classified Compilation > 8 Health - Employment - Social security > 81 Health > 812.21 Federal Act of 15 December 2000 on Medicinal Products and Medical Devices (Therapeutic Products Act, TPA)'. It includes a 'General information' table and a 'Federal Act on Medicinal Products and Medical Devices (Therapeutic Products Act, TPA) of 15 December 2000 (Status as of 1 January 2024)' section.

General information	
This text is in force	
Abbreviation	TPA
Decision	December 15, 2000
In force	January 1, 2002
Source	AS 2001 2790
Publication language	DE FR IT EN

- The differences in legislation may lead to a different terminology, product classification, or statutory procedural timelines between Access countries
- In addition, there are differences in local regulations and guidelines between Access countries (e.g. biosimilars)
- Overall, there is still a long way to go for Access, but working together will lead to increased international harmonisation and regulatory convergence over time.

Thank you for listening!

QUESTIONS AND ANSWERS

We encourage you to use the Q&A box to raise questions to the speakers.

If a question you would like to ask has already been raised, you can also “like” that question.



KEY TAKEAWAYS AND INSIGHTS

- Australia's regulatory system program is aimed at strengthening capability and enhancing stakeholder collaboration in the Indo-Pacific region.
- For WHO, reliance, collaboration and worksharing exist in several forms and can help to address the access gap for patients.
- Growing awareness that national regulatory authorities need to maximize use of resources.
- ACCESS Consortium designed to maximize international co-operation and reduce duplication.

Thank you

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03-06 December 2024



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