Regulatory Advances in Drug Regulation

Accelerated Pathways of Approval

Jarbas Barbosa da Silva Junior
Director-President / Brazilian Health Regulatory Agency - ANVISA

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Brazil at a glance

Source: IBGE

Population: 208,892,578

26 states and the Federal District - 5,570 municipalities

Life expectancy at birth: 75.99 (70.85 in MA to 79.37 in SC)

GDP total: US$ 1.9 tri (0.38 tri in SP to 1.9 bi in RR)

GDP per capita: US$ 9,290

Population on the poverty line: 25.4% (family income: US$ 5.5 per day)

SUS – National Public Health System:

"**Health as a citizen´s right and the government's responsibility**": free and universal access to health care.

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Brazilian Drug Market

7º World Market 5th in 2020

US$ 18.7 bi Industrial pharmaceutical market in Brazil in 2016

4 bi Number of units of drugs sold (packaging) by the industry in 2016

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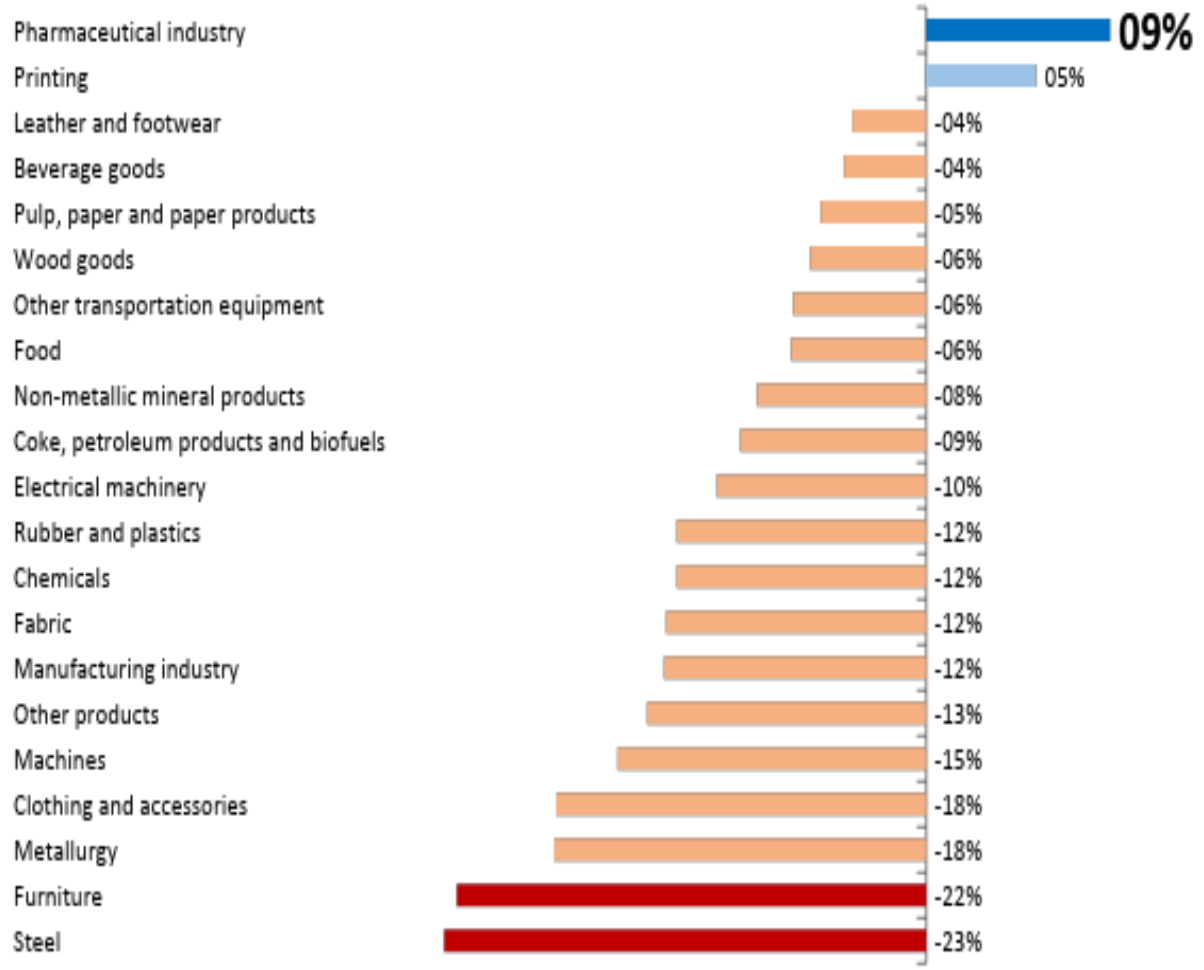
Brazilian Drug Market



Variation between first quarter of 2016 and same period in2015
Source: CNI, 2016

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License and Incorporation of health technologies in Brazil

License – ANVISA

Evaluation of the **quality**, **efficacy** and **safety** of a medicine or health product aiming at **marketing authorization**

Incorporation – CONITEC

Analysis of the **effectiveness** of the technology, comparing it with the treatments already incorporated in SUS. If the new technology demonstrates **superiority** in relation to the technologies already offered in SUS, the **magnitude of expected benefits and risks**, the **cost** of its incorporation, and the **budgetary** and **logistical** impacts that it will bring to the system will also be evaluated

In order for these technologies to be used in SUS, in addition to being licensed by Anvisa, they must be evaluated and approved by CONITEC (National Committee for Technology Incorporation).

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Accelerated Pathways of Approval

RDC 204/2017 – Framework for prioritization of registration, variations and clinical trial authorization

Establishes the criterias for eligibility for the **Priority Pathway**:
The product must meet at least one of the eligibility criteria (e.g. Drug product for neglected disease; vaccine incorporated in the National Immunization Program)

- Drug product registration: 120 calendar days (cd);
- Variations/Post-approval changes: 60 cd;
- Clinical Trial Authorization: 45 cd for first evaluation

RDC 205/2017 – Establishes special procedure fo clinical trials authorization, GMP (Good Manufacturing Practice) certification and Registration of new medicines for the treatment, diagnosis or prevention of rare diseases.

Defines the eligibility criteria for this special pathway and *special* requirements (on going stability studies; concluded fase II with on going fase III clinical trials)

- GMP Certification: 120 cd
- Clinical Trial authorization: 30 cd for first review cicle; 30 cd for companies to respond to questions; 30 cd for final decision.
- Drug product registration: 60 cd for first evaluation; 30 cd for companies to respond to questions; 45 cd for final decision.
  - Must have pre submission meeting, CTD format

Accelerated Pathways of Approval

Previous rules (RDC 37/2014)	Current rules RDC 204/2017
75 days for authorization requests and **90 days** for post-authorization requests, to manifest for the first time	**120 days** for authorization requests and **60 days** for post-authorization requests, to inform the final decision
System of points, according to the criteria	Focus on prioritizing drugs that are relevant to public health
Drug authorization prioritization: ▪ Fractionable pharmaceutical forms; ▪ Rare, neglected diseases; ▪ Emerging or reemerging diseases; ▪ Basic, specialized, or strategic component for the Health Ministry; ▪ Vaccines within the National Immunization Program; ▪ First 3 generic drugs; ▪ First similar drug; ▪ API manufactured in the country; ▪ Risk of shortage in the National Public Health System.	**Prioritization to authorize drugs for**: ▪ Pediatric population; ▪ Neglected diseases; (rare diseases – RDC 205/17) ▪ Emerging or reemerging diseases; ▪ Public health emergencies; ▪ Serious debilitating conditions; ▪ Vaccines to be included in the National Immunization Program; ▪ First 3 unprecedented generic drugs; ▪ Risk of shortage in the market.

Accelerated Pathways of Approval

Previous rules (RDC 37/2014)	Current rules RDC 204/2017
Prioritization of drug post-authorization requests: ▪ Fractionable pharmaceutical forms; ▪ Rare, neglected, emerging, or reemerging diseases; ▪ Use extended to the pediatric population; ▪ Basic, specialized, or strategic component for the Health Ministry; ▪ Vaccines within the National Immunization Program; ▪ The only generic and similar drugs in the market; ▪ First similar drug; ▪ The only API manufacturer; ▪ Risk of shortage in the Unified Health System.	**Prioritization of post-authorization requests of drugs for**: ▪ Rare diseases; ▪ Pediatric population; ▪ Neglected diseases; ▪ Emerging or reemerging diseases; ▪ Serious debilitating conditions; ▪ Public health emergencies; ▪ Vaccines to be included in the National Immunization Program; ▪ The only generic drug; ▪ Reference drugs unavailable in the market; ▪ Risk of shortage in the market.

Accelerated Pathways of Approval

Previous rules (RDC 37/2014)	Current rules RDC 204/2017
Prioritization of drug clinical research authorization requests: ▪ Rare, neglected, emerging, or reemerging diseases; ▪ For the pediatric or adolescent population; ▪ Basic, specialized, or strategic component for the Health Ministry; ▪ Vaccines within the National Immunization Program; ▪ Productive Decelopment Partnerships; ▪ Phase I in the Brazilian territory; ▪ Radical or incremental innovation manufactured in the country.	**Prioritization of clinical research authorizations:** • Neglected diseases; • Emerging or reemerging diseases; • Public health emergencies; • Serious debilitating diseases; • Pediatric population; and • Vaccines within the National Immunization Program.

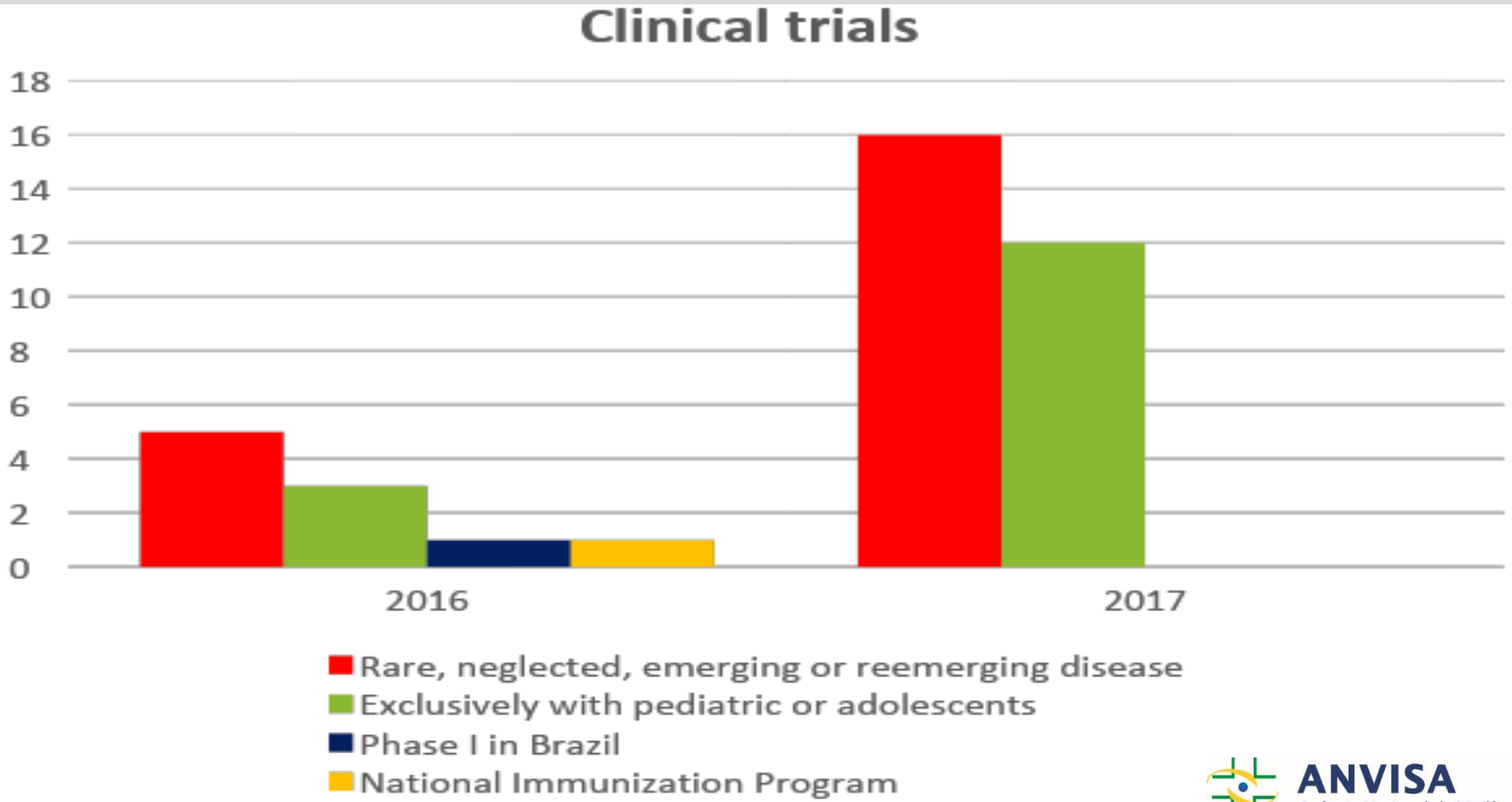
Accelerated Pathways of Approval
Rare Diseases – Market Authorization (RDC 205/2017)

Previous rules (RDC 37/2014)	Current rules RDC 205/2017
Pre-submission meeting: there were no provisions	Pre-submission meeting: compulsory For imported drugs: up to 60 days after the first authorization request to another authority
Period to submit the request (company): there were no provisions	Period to submit the request (company): 30 days after the pre-submission meeting
First manifestation (Anvisa): 75 days after analysis prioritization approval	First manifestation (Anvisa): up to 60 days after the authorization request was filed
Compliance with the requirements (company): up to 120 days	Compliance with the requirements (company): up to 30 days after receipt
Assessment of compliance (Anvisa): there were no provisions	Assessment of compliance (Anvisa): up to 45 days
Submission of price dossier (company): there were no provisions	Submission of price dossier (company): concomitant with the authorization request

Accelerated Pathways of Approval: Rare Diseases - Clinical Research (RDC 205/2017)

Previous rules (RDC 37/2014)	Current rules RDC 205/2017
Pre-submission meeting: there were no provisions	Pre-submission meeting: compulsory
First manifestation (Anvisa): 45 days after analysis prioritization approval (RDC 37/2014)	First manifestation (Anvisa): up to 30 days after the request was filed
Compliance with the requirements (company): up to 120 days	Compliance with the requirements (company): up to 30 days after receipt
Assessment of the compliance with the requirements (Anvisa): there were no provisions	Assessment of the compliance with the requirements (Anvisa): up to 30 days after filing

Prioritization criteria



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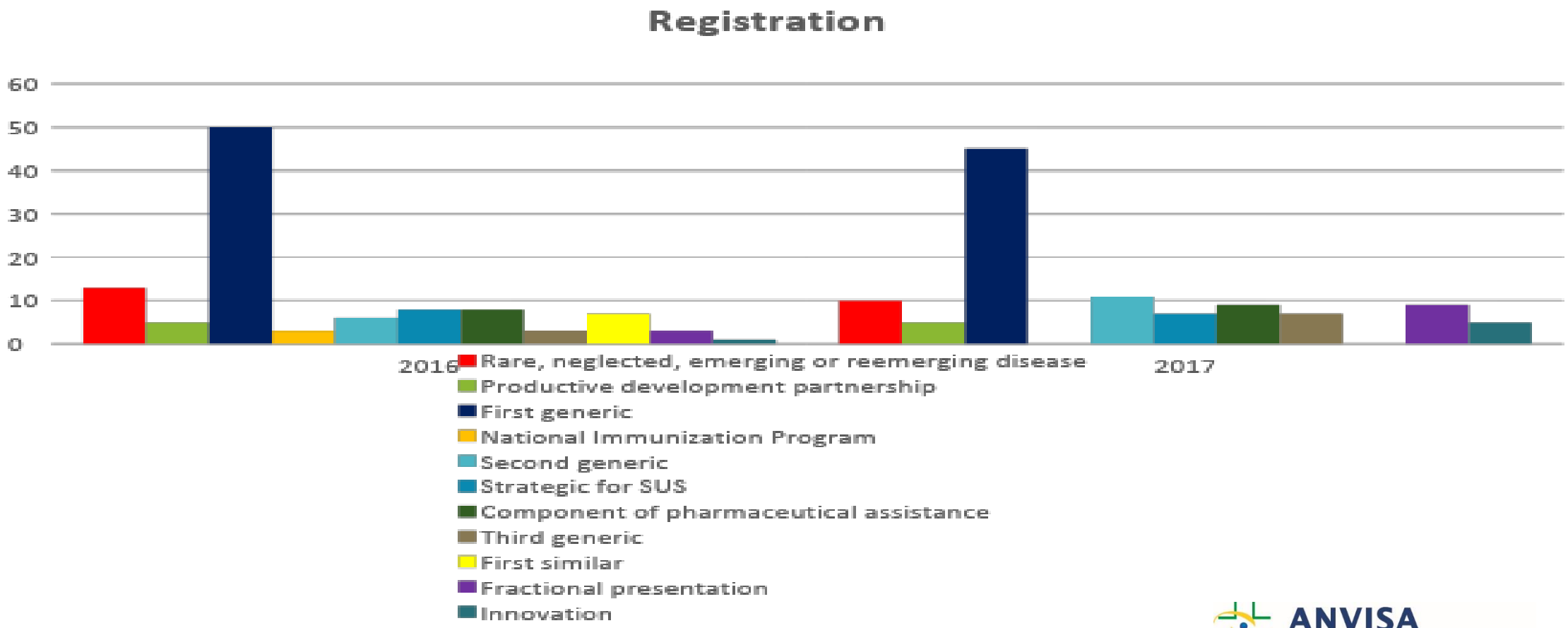
Prioritization criteria



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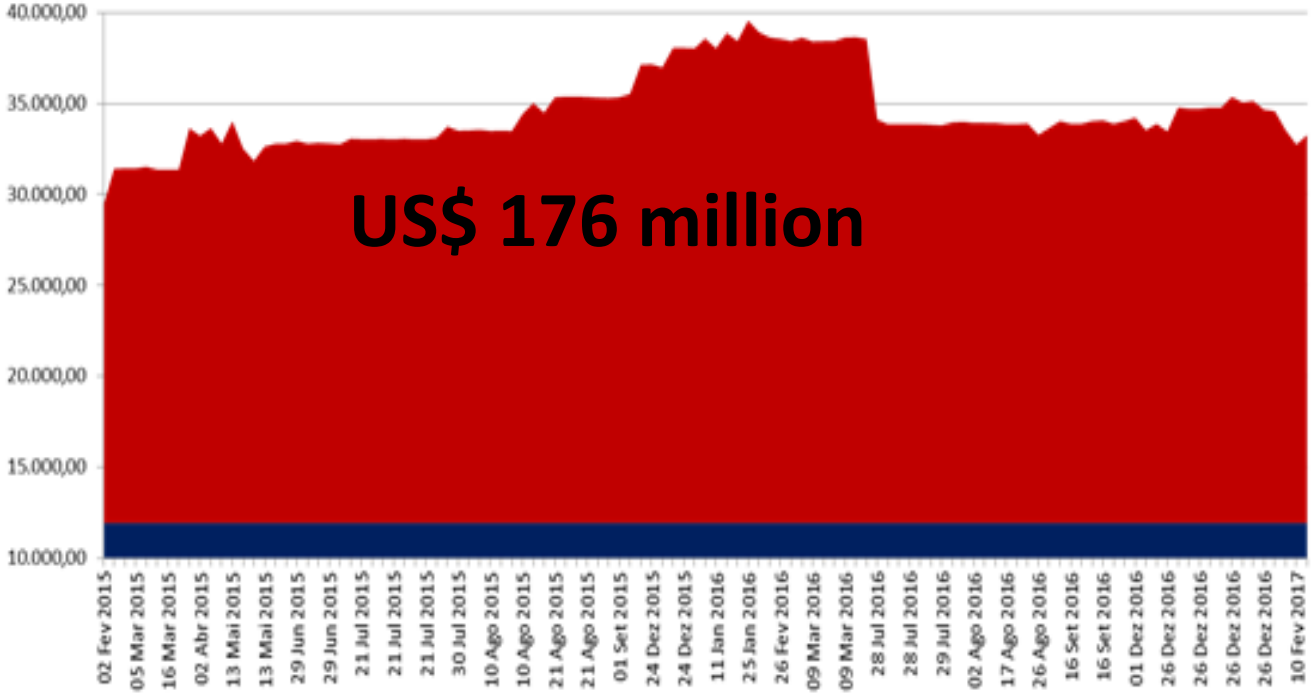
Pricing regulation results in Brazil

Scenario without price cap regulation for an orphan drug



- In Brazil, SCMED/ANVISA established the ceeling price for medicines

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Recent Regulatory Advances

Simplification of procedures

Resolution RDC nº 73/2016 (post-approval changes)

✓Complexity-based analysis

Resolution RDC nº 107/2016 (simplified notification)

✓37 new molecular entities in the “low risk” category (a 50% increase in the list)

Evaluation of new registrations and post-approval changes of lesser complexity by new units (CRMEC and CPMEC)

Recent Regulatory Advances

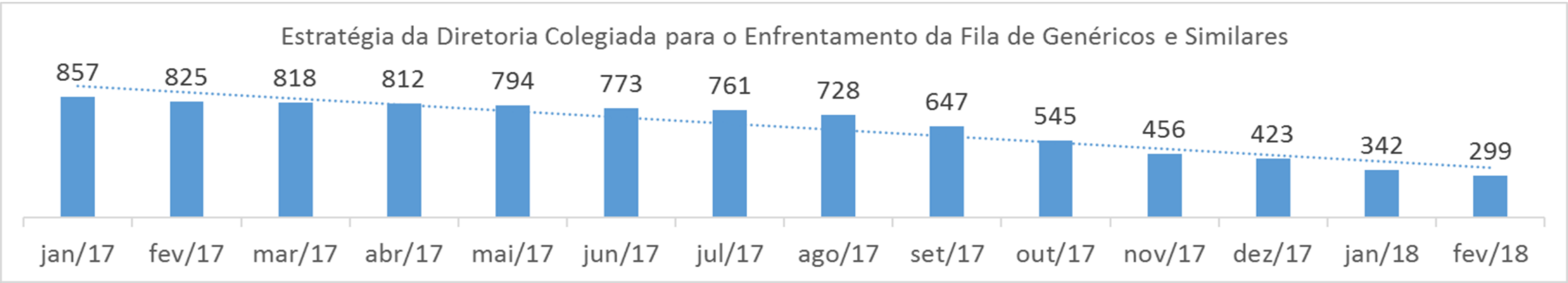
OS Nº 45, February 2018 (Service Orientation)

- Establishes a Optimized Review Pathway for Biological Products (registration and variations/post approval changes)
- *Reliance Pilot Project (one year)*
- *Elegibily criteria: Registered in the USFDA **and** EMA; same indications; dosage; adverse reactions; precautions.*
- AR Approval Reports should be provided
- Submitions received: None

Recent Regulatory Advances

Backlog Reduction

- Law 13.411/2016 established new timeline targets and the General Office of Drugs implemented several strategies to reduce the backlog and increase efficiency;
  - Grouping of the applications in the backlog into 4 groups according to submission date; pharmaceutical form; similarity of the manufacturing process; Active Pharmaceutical Ingredient; number of submission per company;
  - Teleworking with an increase of 20% of the assessors individual productivity;
  - Task force to increase the number of assessors evaluating drug applications.



Thank you!

contacts

Agência Nacional de Vigilância Sanitária - Anvisa
SIA Trecho 5 - Área especial 57 - Lote 200
CEP: 71205-050
Brasília - DF

www.anvisa.gov.br
www.twitter.com/anvisa_oficial
Anvisa Atende: 0800-642-9782

ouvidoria@anvisa.gov.br

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