

2014 50th Annual Meeting

Current Status of Pharmaceutical Regulations and the direction of international collaboration in Taiwan



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Taiwan (TFDA)

June 15-19, 2014 San Diego



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Outline

- Taiwan Profile
- Organization and Responsibility of **TFDA**
- Current Status of **IND** Regulation in Taiwan
- Current Status of **NDA** Regulation in Taiwan
- Current Status of **Post-Marketing** Management in Taiwan
- Direction of **International Collaboration**
- Future Prospects

IND: investigational drug

NDA: new drug application





Taiwan

THE HEART OF ASIA

Taiwan Profile



Taiwan Profile

- Area: about 36,000 sq.km.
(14,400 square miles)
- Capital: Taipei City
- Population: 23 million
- 99.8% Citizen Covered by NHI – a Single Payer and Single Database (IC Card)
- Pharmaceuticals Market:
NT\$ 82.4 Billion(US\$ 2.75 Billion) in 2013





Organization and Responsibility of TFDA



Establishment of TFDA

2009.6.3 TFDA
Organization Act

2010.1.1
TFDA
Inauguration

2011~2013
MOHW
Restructure

2013.7.23
TFDA Elevation

4 bureaus:

Food Safety
食品處

Pharmaceutical
Affairs
藥政處

Food & Drug
Analysis
藥物食品檢驗局

Controlled
Drugs
管制藥品管理局



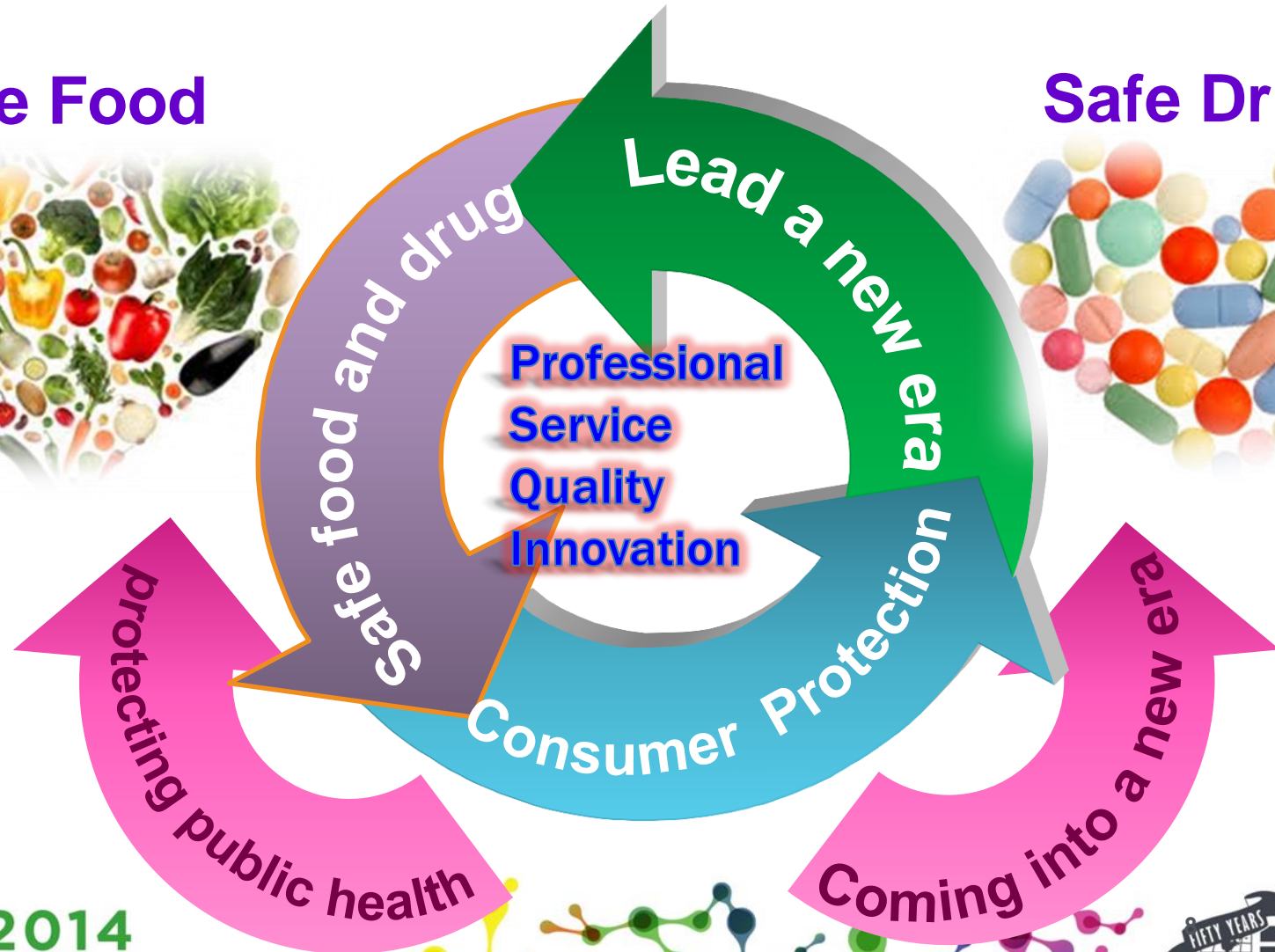


Vision & Core Value

Safe Food



Safe Drug

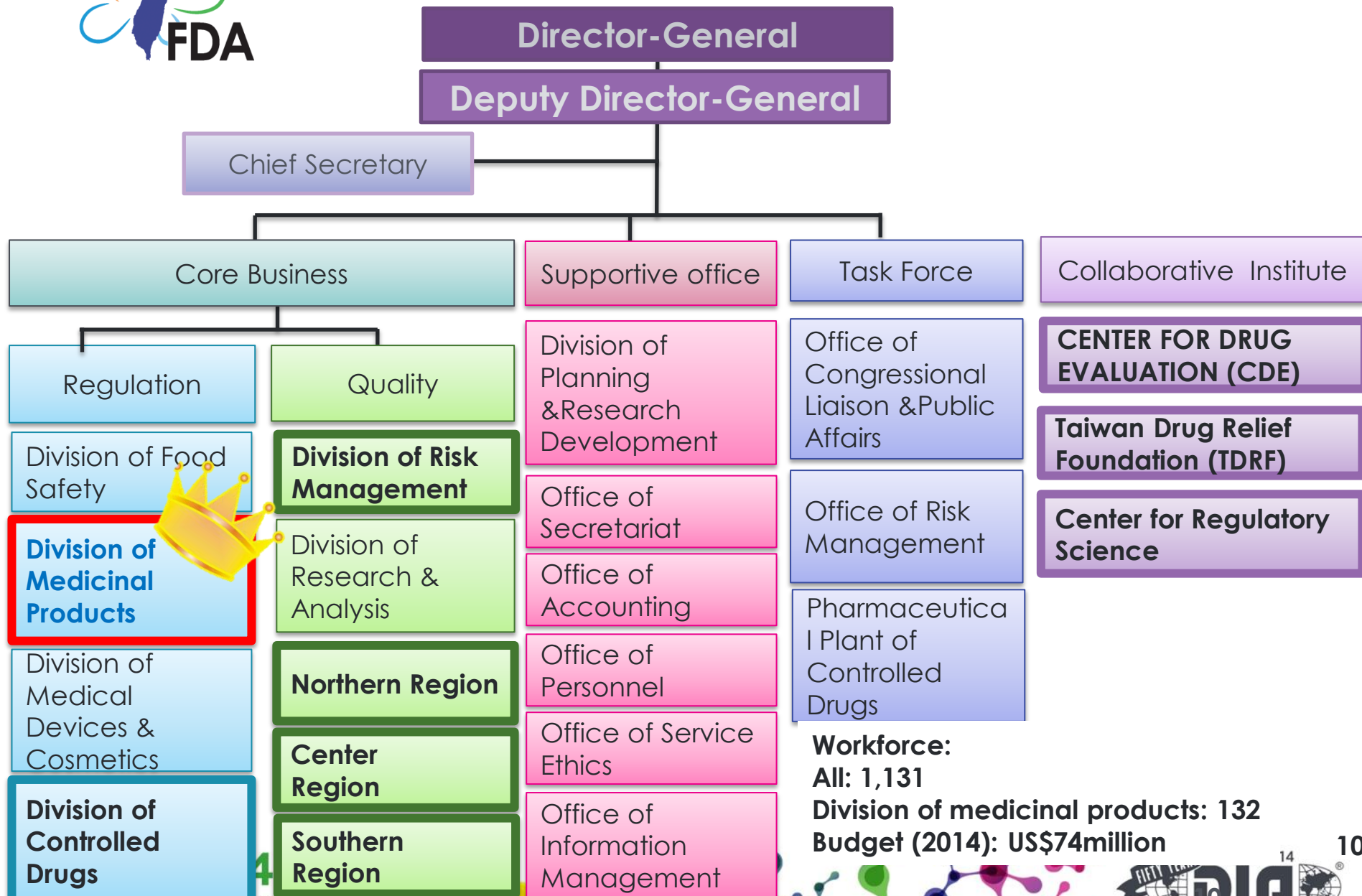


Food and Drug Safety Management System



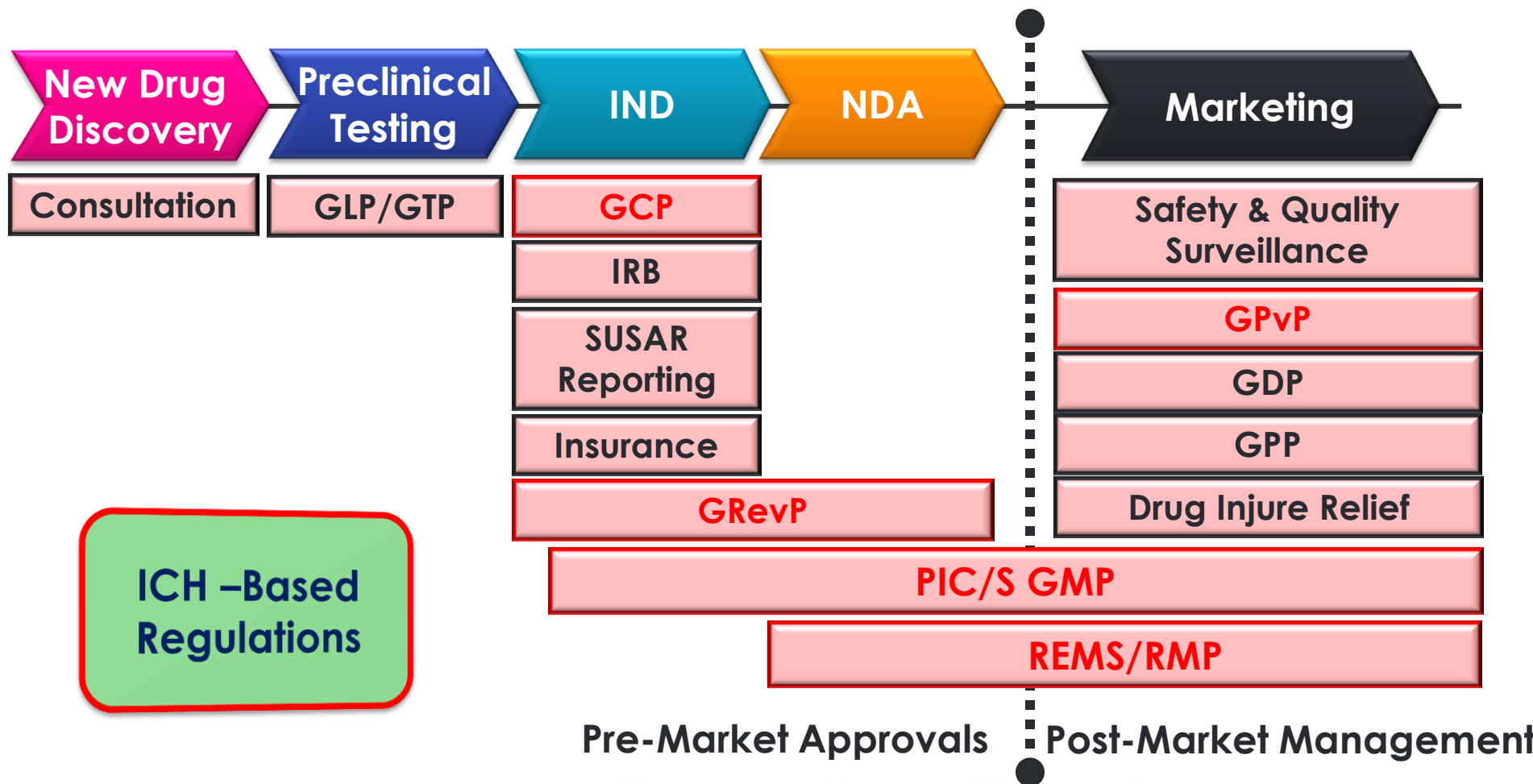


TFDA Organization Chart

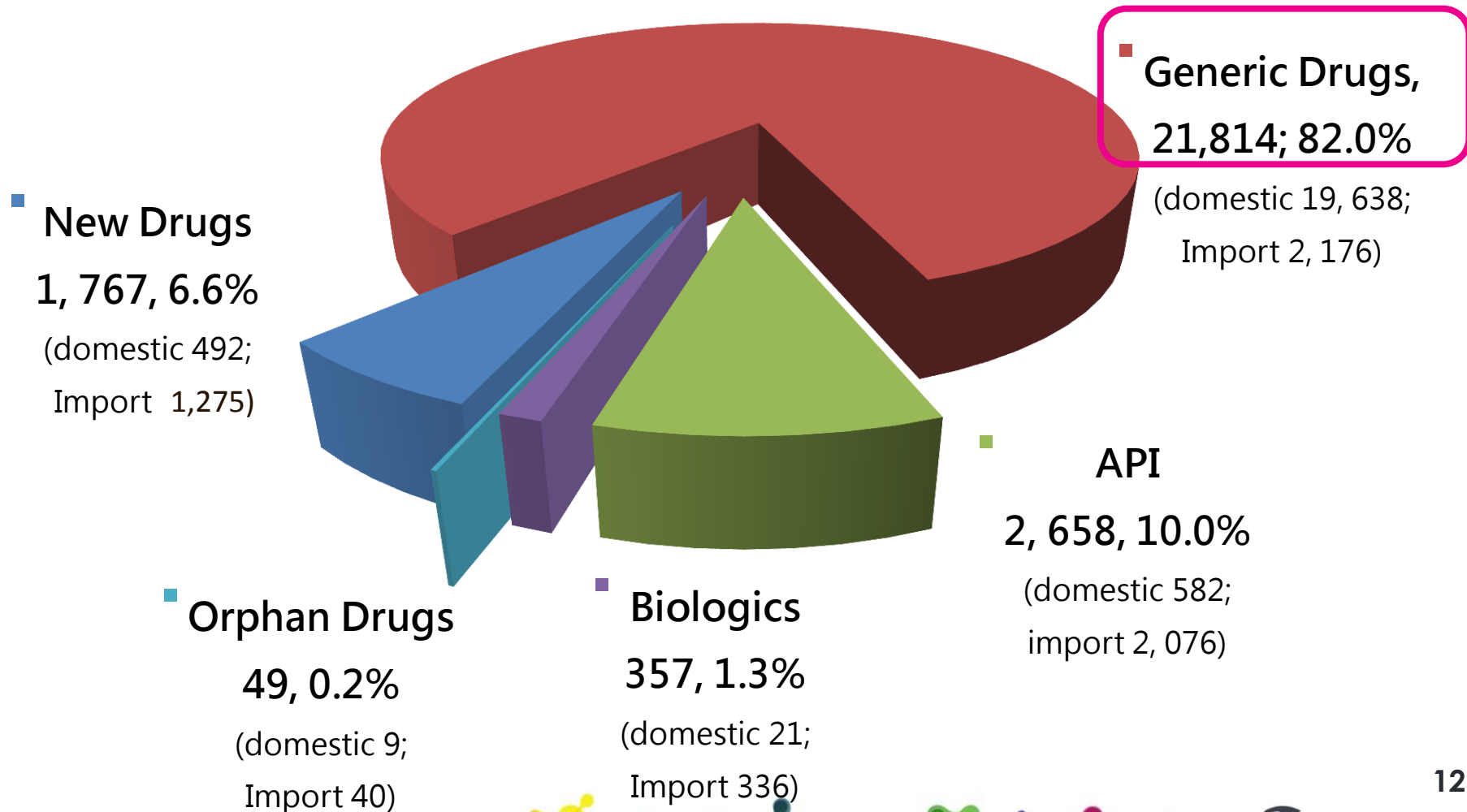


Pharmaceutical Regulation in Taiwan

■ Life cycle management of medicinal products



Statistics on Pharmaceutical Licenses in Taiwan (up to date) <26,654>





Current Status of IND Regulation in Taiwan





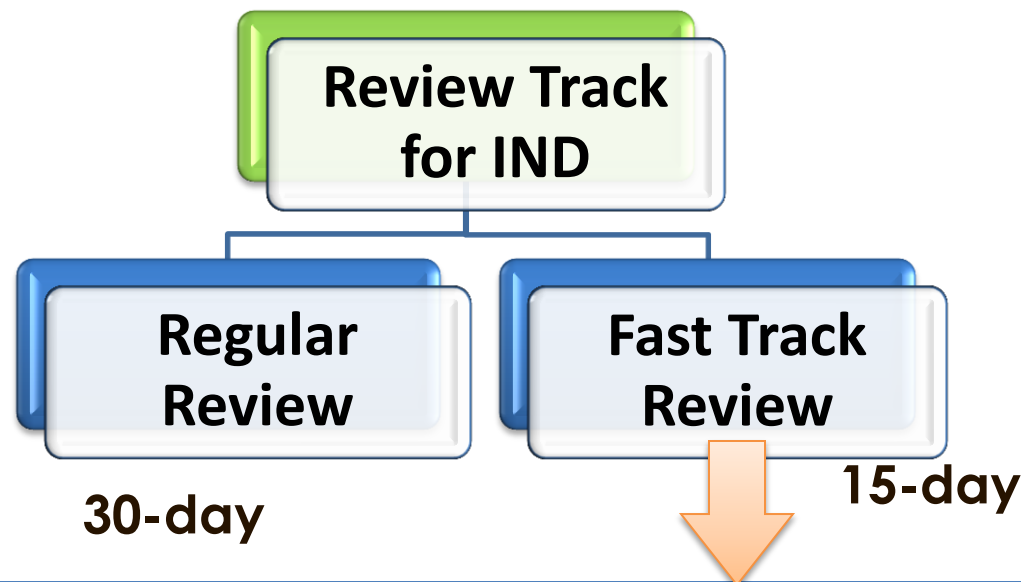
Current Status of IND Regulation in Taiwan

■ Objectives

- To enhance IND **review efficiency**
- To strengthen **clinical trial quality**
- To promote international collaboration of clinical trials
 - encouraging multi-regional clinical trials (**MRCT**), and early phase trials in Taiwan



Enhance IND review efficiency



Applicable for:

1. IND with the Same **US FDA-Approved** IND Number (July, 2004)
2. Multinational multicenter trials **simultaneously conducted in one of the medically advanced countries**; Taiwan's medical center hospital also involved (Aug, 2010)

Strengthen clinical trial quality -GCP Inspection in Taiwan

ICH-GCP

■ Regular inspection

- First-in human, pivotal, phase IV (30 ~ 40 cases/ yr)
- with 1~2 cases/yr unacceptable (3~7% unacceptable)

■ For-cause inspection (~3 cases/yr)

- Clinical trial with GCP violation and safety concern
- Clinical trial with serious adverse event (SAE) occurred



Strengthen clinical trial quality

-Qualified Clinical Trial Sites for IND

- 131 teaching hospitals (Qualified sites) in Taiwan
 - 26 sites with government funding

Total Teaching Hospitals (qualified clinical sites) , 131					
Excellent Center*	6	Excellent Center of Oncology*	8	General Clinical Research Center*	12

- **International recognition certificate and accreditation**
 - 23 sites (Ethics committees and IRB) in Taiwan have received **SIDCER # / FERCAP#** Recognition certificate (2005-2012)
 - 2 sites in Taiwan have earned **AAHRPP#** Accreditation (~2013)

#SIDCER: Strategic Initiative for Developing Capacity in Ethical Review

#FERCAP: The Forum for Ethical Review Committees in the Asian and Western Pacific Region

#AAHRPP: The Association for the Accreditation of Human Research Protection Programs

International collaboration in Clinical Trials

- MOU between Taiwan Centers of Excellence and the International Pharmaceutical Companies

Taipei Veterans General Hospital

- 2009 Sanofi Aventis
- 2010 GSK
- 2011 Novartis

National Taiwan University Hospital

- 2007 GSK
- 2009 Novartis, Boehringer Ingelheim
- 2012 Pfizer, Bayer, MSD

China Medical University Hospital

- 2010 Novartis

Chung Gung Medical Hospital

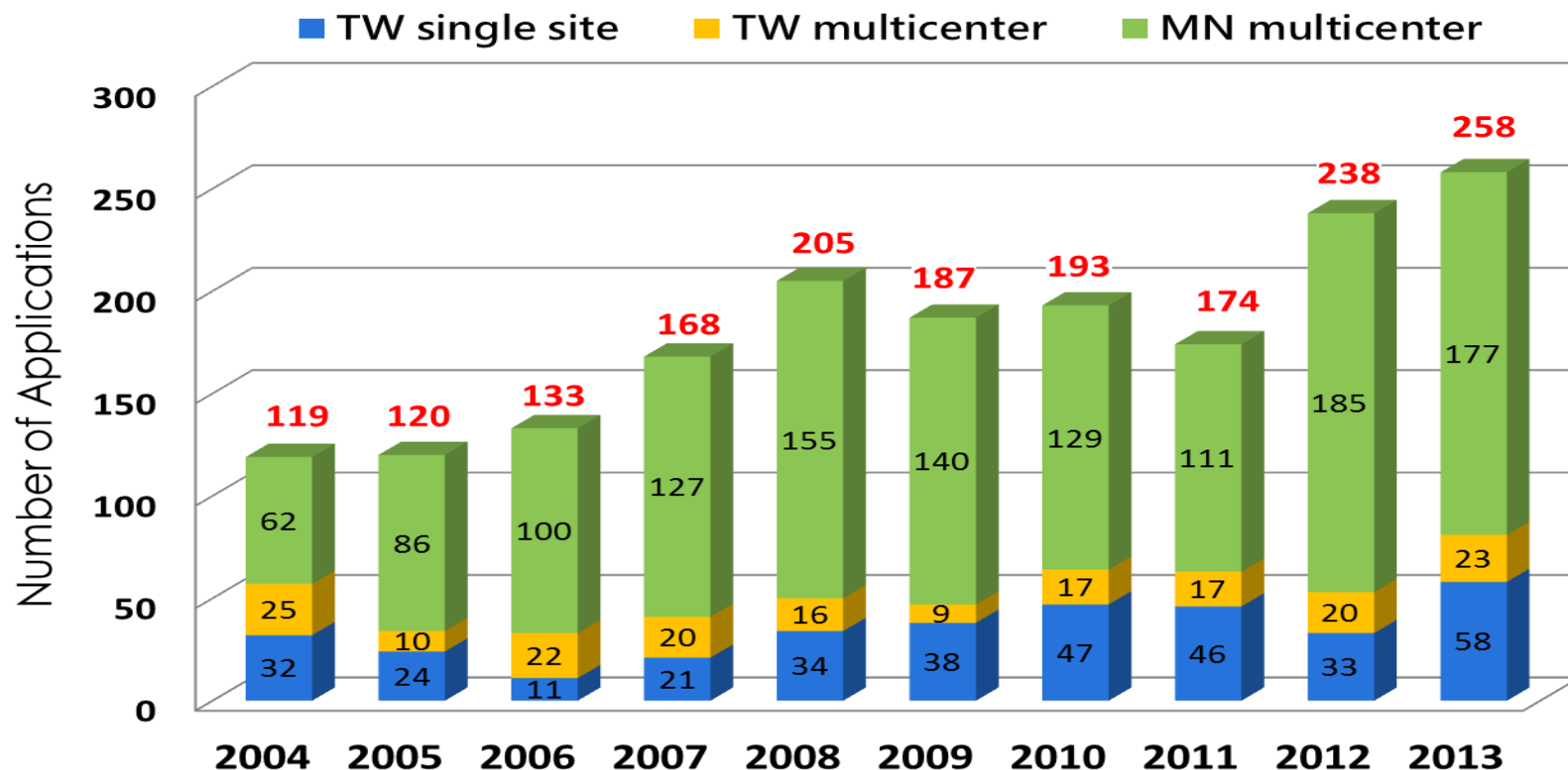
- 2010 Novartis
- 2012 GSK
- 2013 MSD

Chung Gung Medical Hospital

- 2010 Novartis, MSD
- 2011 Novartis



IND Applications in Taiwan



Increase of multiregional trials





Current Status of NDA Regulation in Taiwan

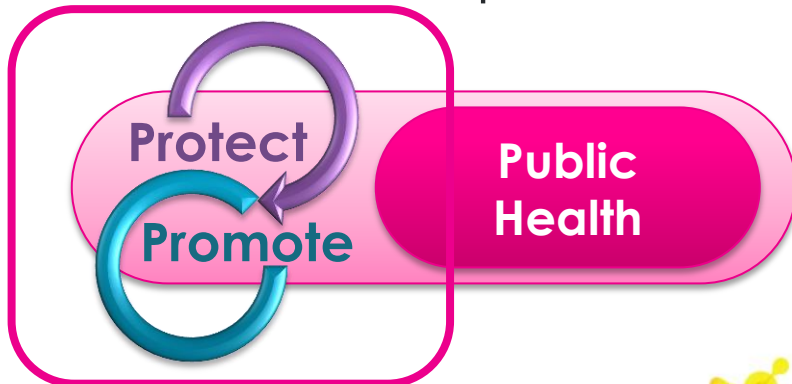




Current Status of NDA Regulation in Taiwan

● Objectives:

- Refine NDA review strategy
- Optimize NDA regulations
- Facilitate innovative medicine industry
 - Regulation Paradigm shift
 - from protection to promotion

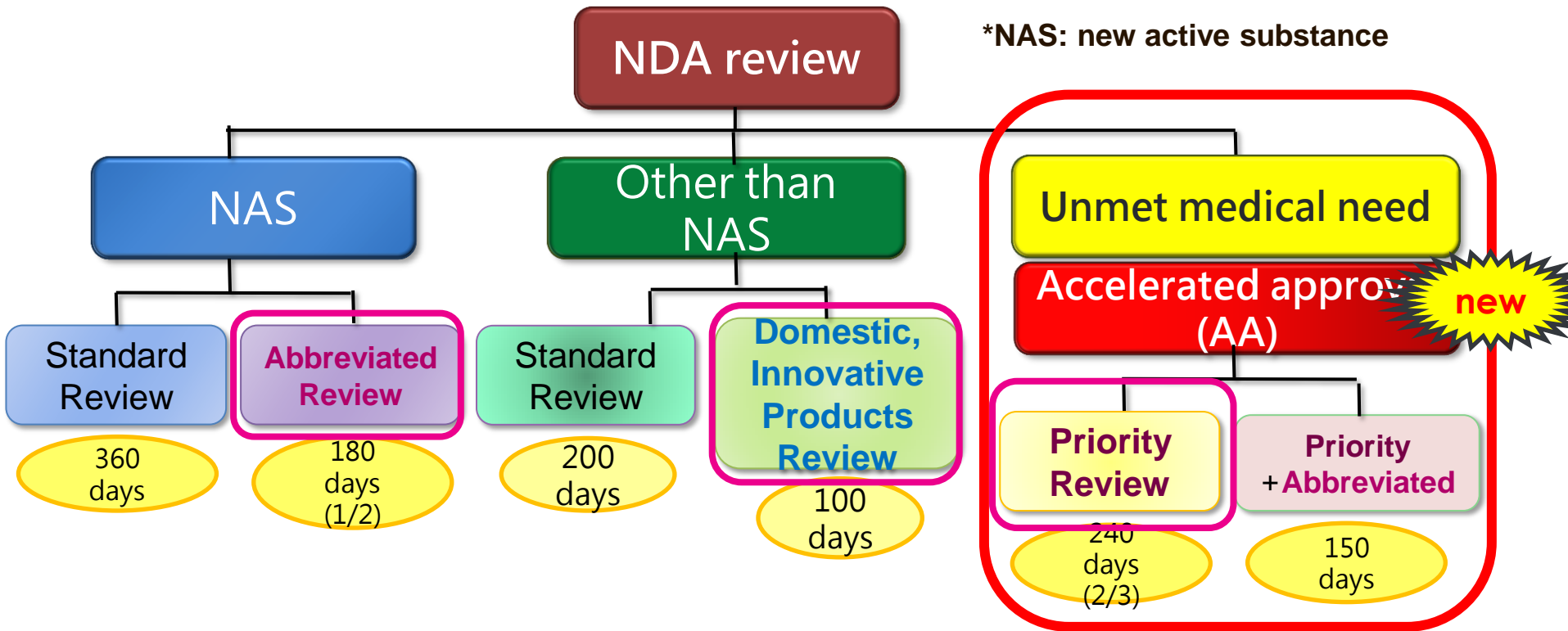


Assure **QUALITY, SAFETY, EFFICACY** of Medicinal Products

Help to Speed the Development of Innovative Medicine



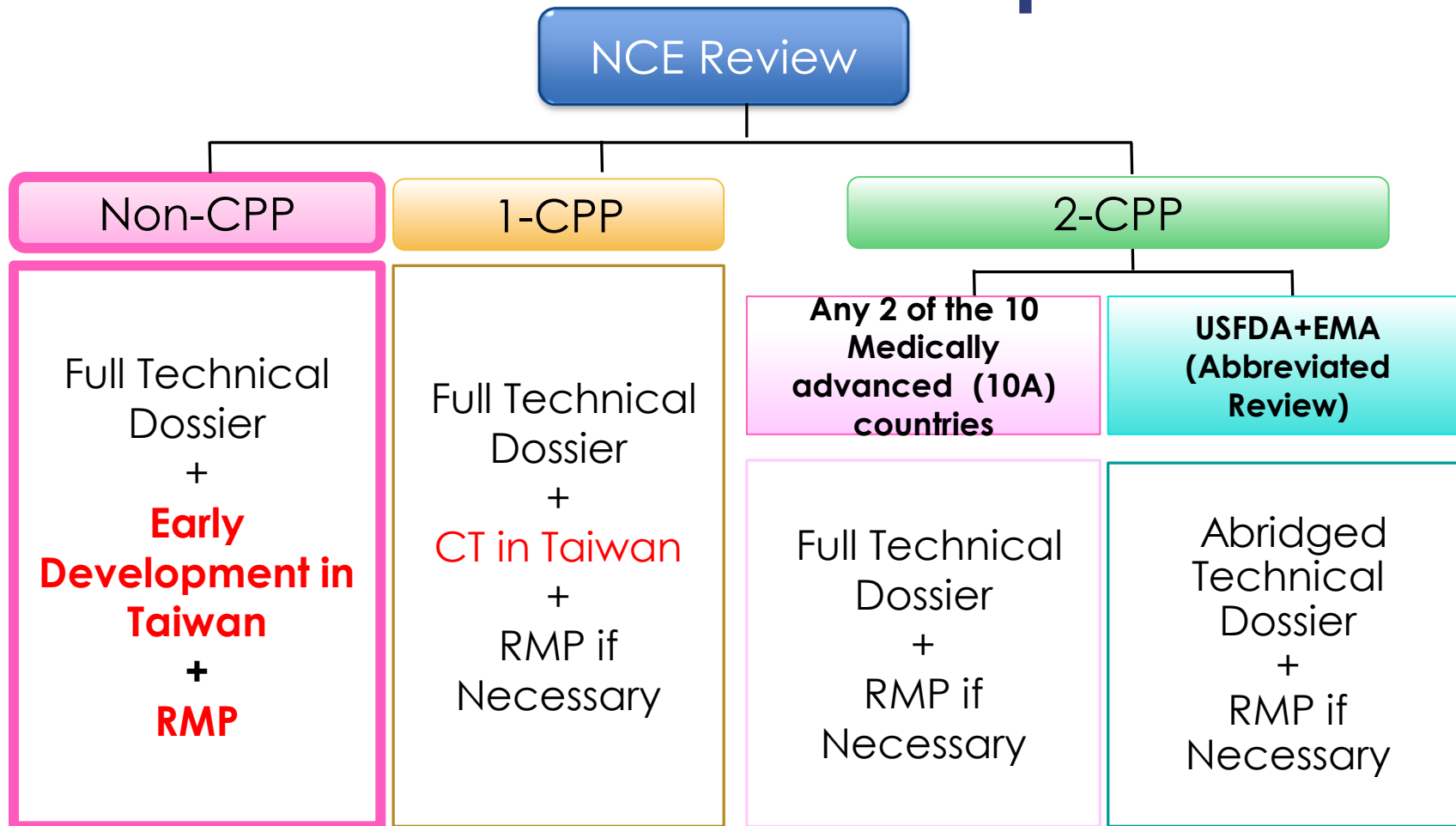
Refine NDA review strategy



- Standard Review : NAS +US FDA and EMA approved + no ethnic issue
- Priority Review : NAS+unmet medical need
- Domestic, Innovative Products Review : Other than NAS+PIC/S
- AA: unmet medical need → Surrogate endpoint CT

Optimize NDA regulation

-Relaxation of CPP Requirement

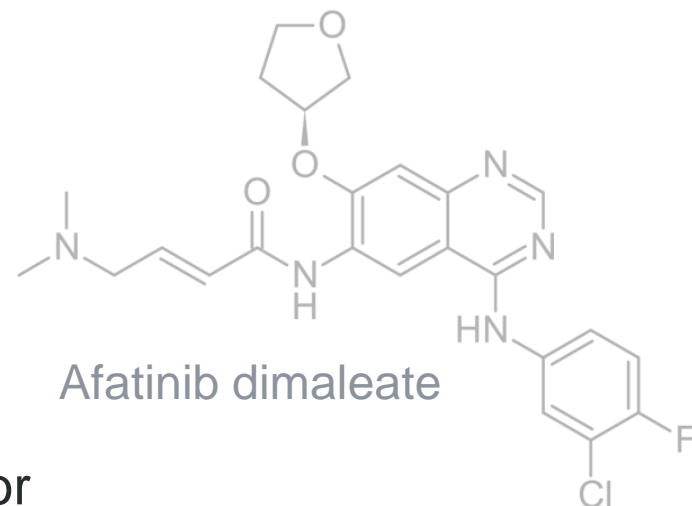


CPP: Certification of Pharmaceutical Products
RMP: Risk Management Plan

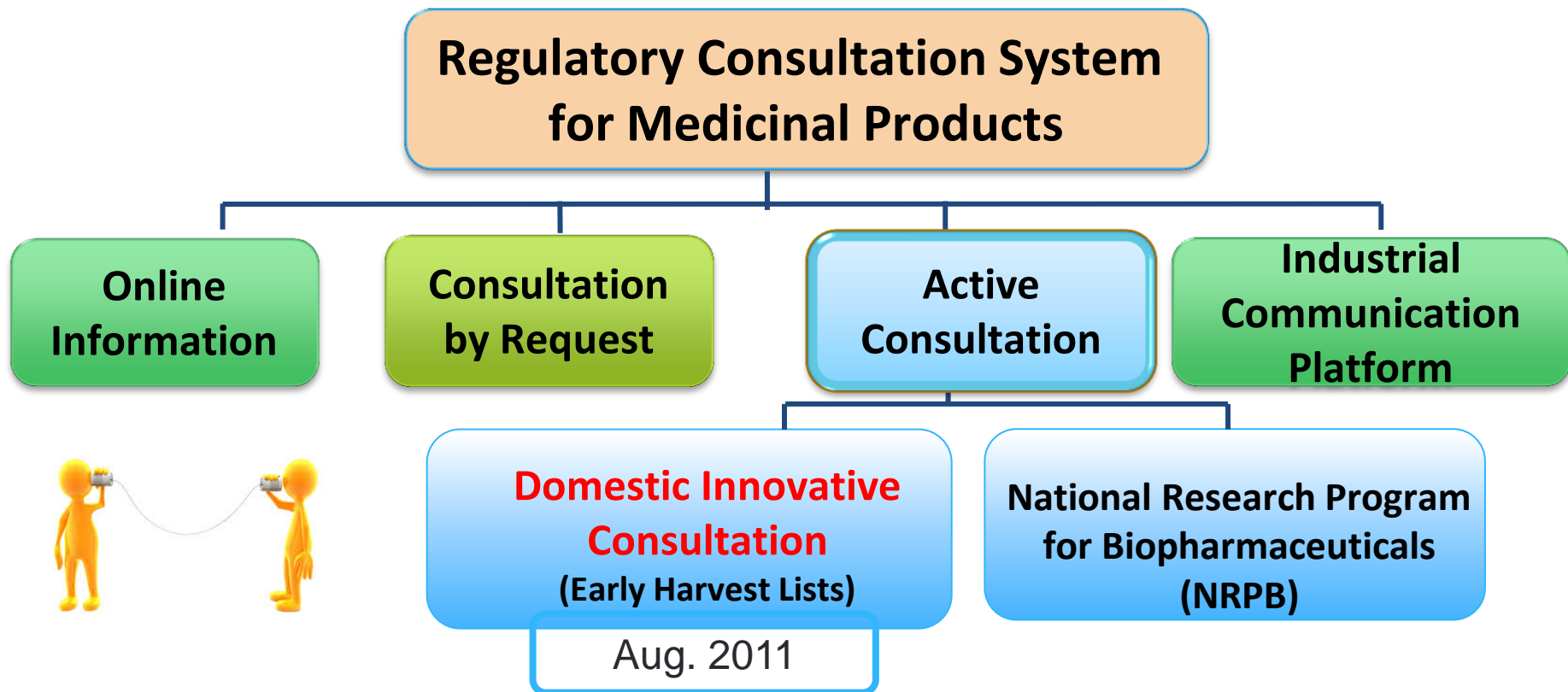


Case Sharing– Afatinib

- New Chemical Entity
- non-small cell lung cancer with epithelial growth factor receptor (EGFR) mutation
- **First approved in the world (May 2013)**
- **MRCT** lead by Taiwan Principle Investigator
- 80% of the subjects in phase II and 20% of subjects in phase IIB/III were from Taiwan
- **Non-CPP** Review Track
- Review time: 120 days



Facilitate innovative medicine industry -Regulatory Consultation System





memo

<input type="checkbox"/>	_____
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Facts and Opportunities



TIME

Fair! not longer
than ICH countries
Quick!
Parallel IRB and fast
track



COST

Fair!
Definitely **cost down**
than in Europe



QUALITY

Good!
**With no
doubt!**



**Come and conduct clinical trials
in *Taiwan*.**

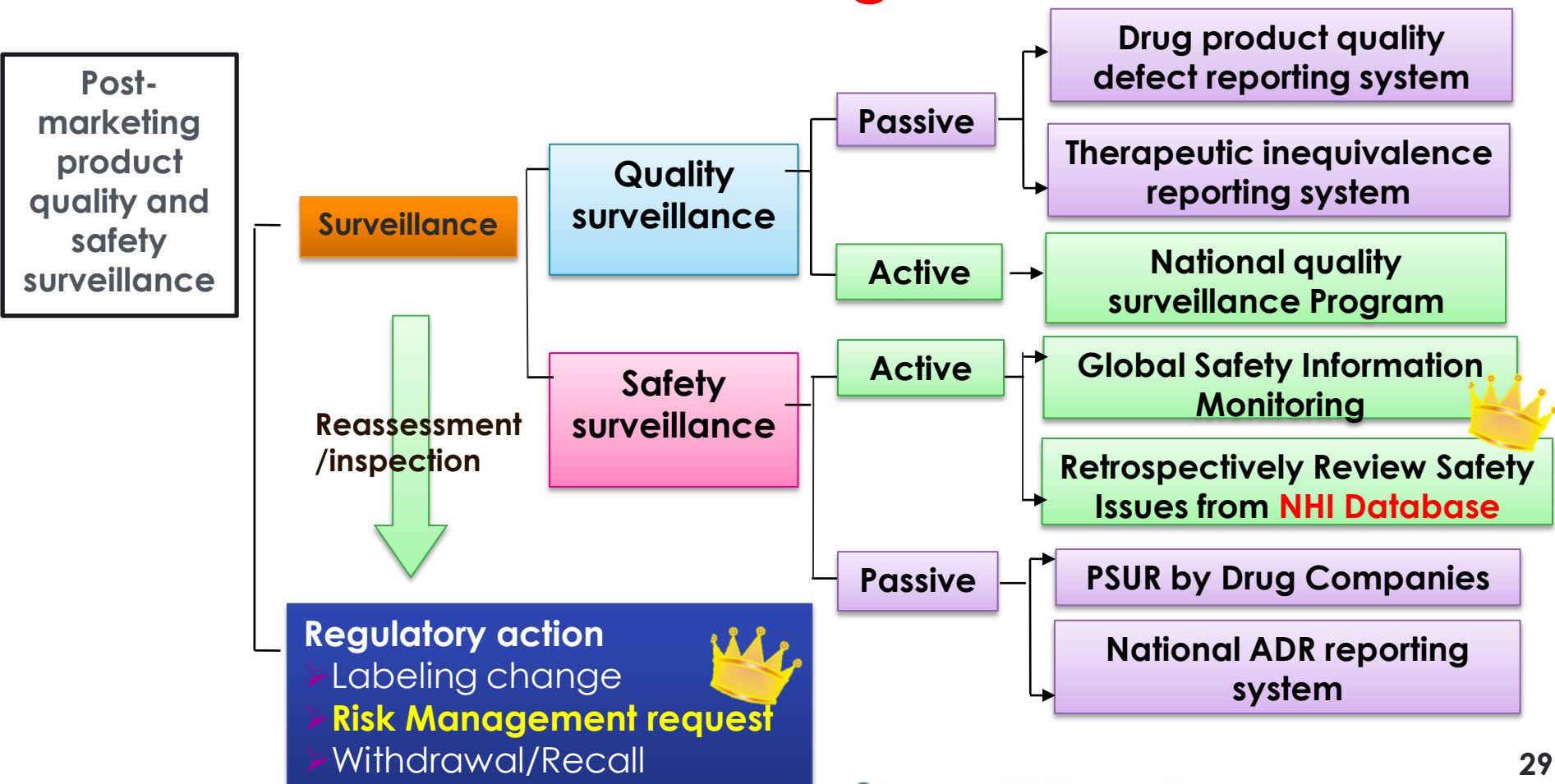




Current Status of Post-Marketing Management in Taiwan



Post-Marketing Safety and Quality Surveillance —Risk Management



Risk Management Plan

By careful **design**, **monitor** and **control**, the implementation of Risk management plan :

- Provides **early access to new drugs** (especially in non-CPP cases)
- Prevents marketed drug **withdrawn**
- Ex. Currently **29 NDAs** and **4 marketed ingredients** (Carbamazepine, TNF-Alpha Blockers, Rosiglitazone, Pioglitazone) in Taiwan require RMP conduction.



Risk Management by Government

- 3rd cause of drug injury relief cases
- SADR : Stevens-Johnson Syndrome/Toxic Epidermal Necrolysis (SJS/TEN)

- off-label use?
- HLA-B*1502 genotype and SJS?
- Health Care Professional remind the patients with the ADR?

- approved indications unified, **labeling revision**, black boxed warning added...(2004 、 2007 、 2008 、 2010)
- **HLA-B*1502 gene screening included in NHI(2010.06)**
- Mandatory printed labels, **Pharmacists are required to remind the patients of potential side effects** when fill out the prescriptions (2010.07)
- Revision of Drug Injury Relief Act (2011.05)
- **RMP by pharmaceutical companies** (2011.09)

**The New England
Journal of Medicine**

THE NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Carbamazepine-Induced Toxic Effects
and HLA-B*1502 Screening in Taiwan

Pei Chen, Ph.D., Hsuei-Jueng Lin, M.D., Chin-Song Lu, M.D.,
Heung-Ter Ong, M.D., Peiyuan F. Hsieh, M.D., Chih-Chao Yang, M.D.,
Yu Tai, M.D., Shey-Lin Wu, M.D., Cheng-Hsien Lu, M.D., Yung-Chu Hsu, M.D.,
Yu Yu, M.D., Long-Sun Ro, M.D., Chung-Ta Lu, M.D., Chun-Che Chu, M.D.,
G-Jane Tsai, M.D., Yu-Hsiang Su, M.D., Sheng-Hsing Lan, M.D.,
Cheng-Feng Sung, M.D., Shu-Yi Lin, M.S., Hui-Ping Chuang, B.S.,
Chen Huang, M.D., Ying-Ju Chen, M.S., Pei-Joung Tsai, M.S.,
Liao, M.S., Yu-Hsuan Lin, M.S., Chien-Hsiun Chen, Ph.D.,
Chung, M.D., Ph.D., Shuen-Ju Huang, Ph.D., Jer-Yuarn Wu, Ph.D.,
ang, Ph.D., Luke Chen, Ph.D., Yuan-Tsong Chen, M.D., Ph.D.,
en-Yang Shen, Ph.D., for the Taiwan SJS Consortium*

ABSTRACT

Convulsant and a mood-stabilizing drug, is the main cause
syndrome (SJS) and its related disease, toxic epidermal
most Asian countries. Carbamazepine-induced SJS-TEN is
HLA-B*1502 allele. We sought to prevent carbamazepine-
induced HLA-B*1502 screening to prospectively identify
condition.

We recruited 4877 candidate subjects who had not
and DNA purified from the subjects' peripheral
ed the HLA-B*1502 allele. Those testing posi-
were advised not to take carbamazepine and
advised to continue taking their presy-
were advised to take carbamazepine. We
a week for 2 months to monitor them
ical incidence of SJS-TEN as a control.

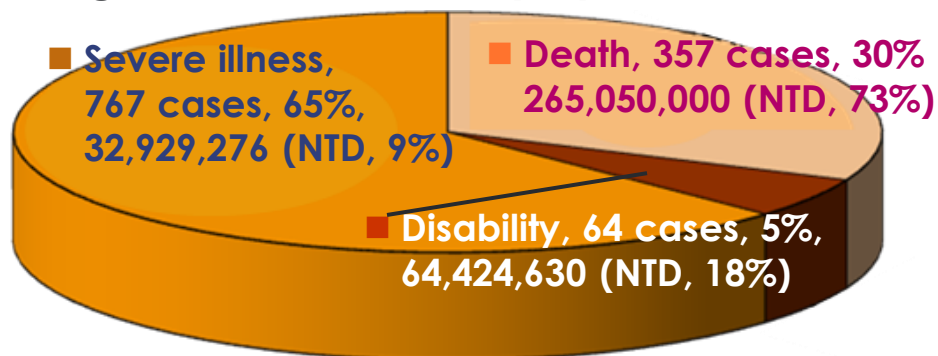
ts; more widespread rash devel-
TEN did not develop in
SJS-TEN. In contras-

1964-2014
DIA
www.diahome.org

Taiwan Drug Injury Relief System



■ Drug relief cases and payment, (since 1999)



■ Drug relief ranking, (since 1999)

ranking	Active ingredient	Case no.
1	Allopurinol	178
2	Phenytoin	119
3	Carbamazepine	109
4	Isoniazid/Rifampin/Pyrazinamide	69/68/67
5	Diclofenac	51
6	Co-trimoxazole	36
7	Mefenamic acid	32
8	Lamotrigine	29
9	Cefazolin	28
10	Ibuprofen	27



Drug Hazard Victim

Licensed Holders



Direction of International Collaboration



Current Status of International Collaboration

■ Regulation Harmonization

- Regulation Convergence, such as **ICH standards**
- EP* observer 、 USP* observer



■ Regular participation in international organization/conference

- Organization oriented: **APEC** 、 **ICH** 、 **DIA** 、 **IGDRP** 、 FIP 、 WTO (TRIPS 、 TBT) 、 WHO (NRA 、 ICDRA)
- Topic oriented: orphan drug 、 biologics 、 bridging study 、 vaccine

■ Active involvement

- **APEC GRP roadmap**
- **MOU**

■ **MOU/arrangement/agreement:**

- Japan: arrangement
- China: agreement
- Australia: MOU
- UK: confidentiality MOU
- EDQM: confidentiality agreement

*EP: *European pharmacopeia*

*USP: *US pharmacopeia*



Step in to Taiwan Today Step out to the World Tomorrow

● China:
Cooperation
Agreement

● Japan:
Arrangement

● Australia: MOU

2013.1.1 PIC/S GMP member
Please expect PICS/GMP talk tomorrow



Future Prospects



Future Prospects



**Consumer
Protection**



Win-Win-Win



Government
Smart
Administration

Industry
Competences
Enhancement





Thank You for Your Attention

Chiang Kai-shek Memorial Hall



Taipei 101



Yehliu Geopark



Sun Moon Lake



North-East coast
of Taiwan



Pingxi Flying Lanterns



Penghu



Night Markets



Temples

For more information, please go to: <http://www.fda.gov.tw>

