



Australian Government  
Department of Health  
Therapeutic Goods Administration

# Updates from the Therapeutic Goods Administration

## Early access to medicines schemes: Local perspective

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International Society of Pharmacovigilance  
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# Presentation Overview

- Overview of Australian expedited pathways
  - Priority review pathway
  - Provisional approval
- Considerations for Implementation in Australia
- Other options for access to medicines



# TGA expedited pathways

- To facilitate earlier access to medicines that address unmet clinical needs for Australians, without compromising standards for safety, efficacy and quality.
  - Two new ‘expedited’ pathways for prescription medicines based on the government response to the recommendations of the MMDR review:
    - **Priority Review** of a complete data dossier within a reduced timeframe in certain circumstances
- Implemented 1 July 2017*
- **Provisional Approval** on the basis of early data on safety and efficacy, where the immediate availability of the medicine outweighs the risk that more data is required

*Likely to be implemented in the next few days*

# Determination process

- To use the pathways, a determination must be obtained before lodging a submission – “Entry ticket”
- Formal process to assess against the eligibility criteria
- Determinations lapse after 6 months
  - 1 extension possible for provisional, Priority cannot be extended
  - [Positive determination decisions](https://www.tga.gov.au/designation-notice) are published on the TGA website (<https://www.tga.gov.au/designation-notice>)
- Ineligible determination decisions are appealable by the sponsor only

# Why determine?

- Early look at the data – Early assessment of benefit-risk (before the registration application is received)
- Gives certainty of applications to both Sponsor and TGA
- Avoids outright rejection of indication/registration sought
- Estimation of future work load
  - 7 /10 priority determinations are for anticancer medicines
- Allows us to see if we have criteria right for public health reasons
- Consistent and transparent process for assessing eligible medicines

# Determination Eligibility criteria

| Criterion  | Provisional                   | Priority                      |
|--|-------------------------------|-------------------------------|
| New prescription or new indications medicine   | Yes                           | Yes                           |
| Serious or life-threatening condition  | Yes                           | Yes                           |
| Comparison against registered therapeutic goods ( <i>excludes provisional registration</i> ) | Yes – <b>data preliminary</b> | Yes – <b>data substantial</b> |
| Major therapeutic advance  | Yes– <b>data preliminary</b>  | Yes– <b>data substantial</b>  |
| Clinical study plan  | Yes                           | No                            |

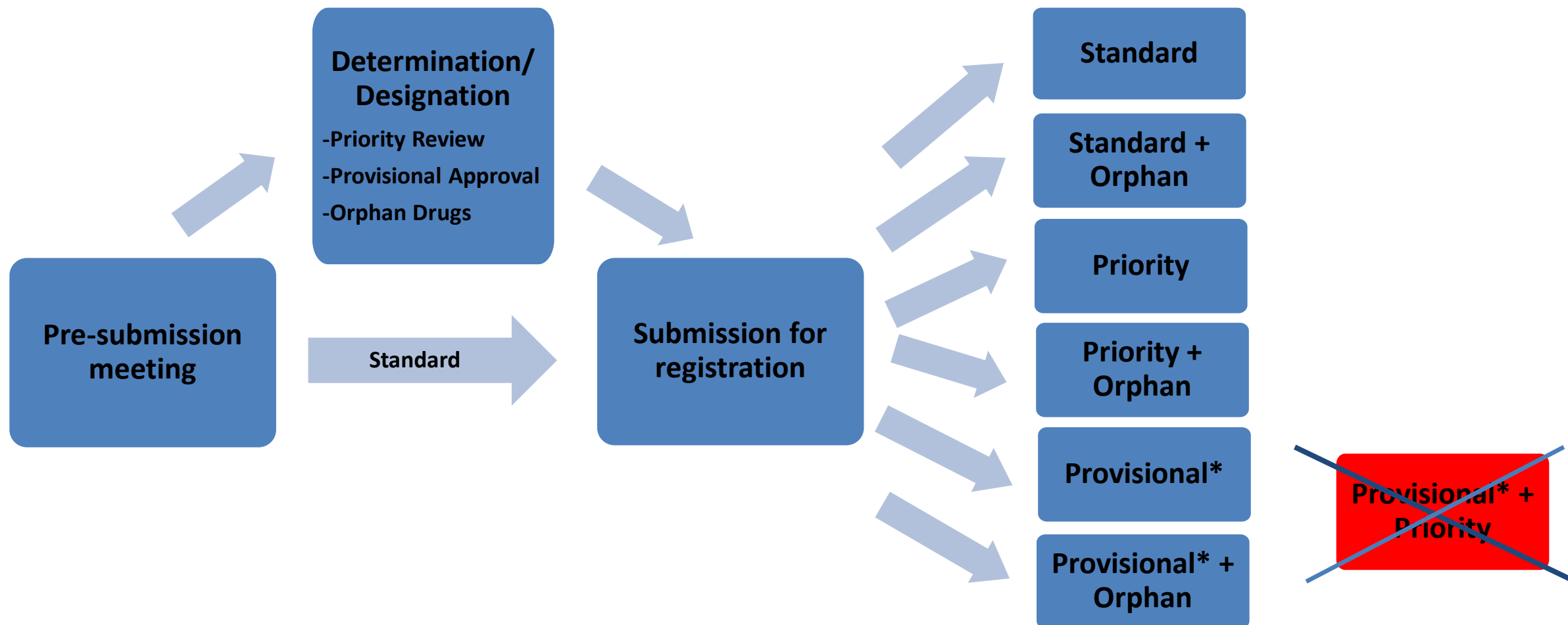


# Determination administrative requirements

- Must use eCTD format
  - Manage increased number of simultaneous applications
  - PI and CMI changes may be required – impact on other areas
- For priority – resolve GMP early

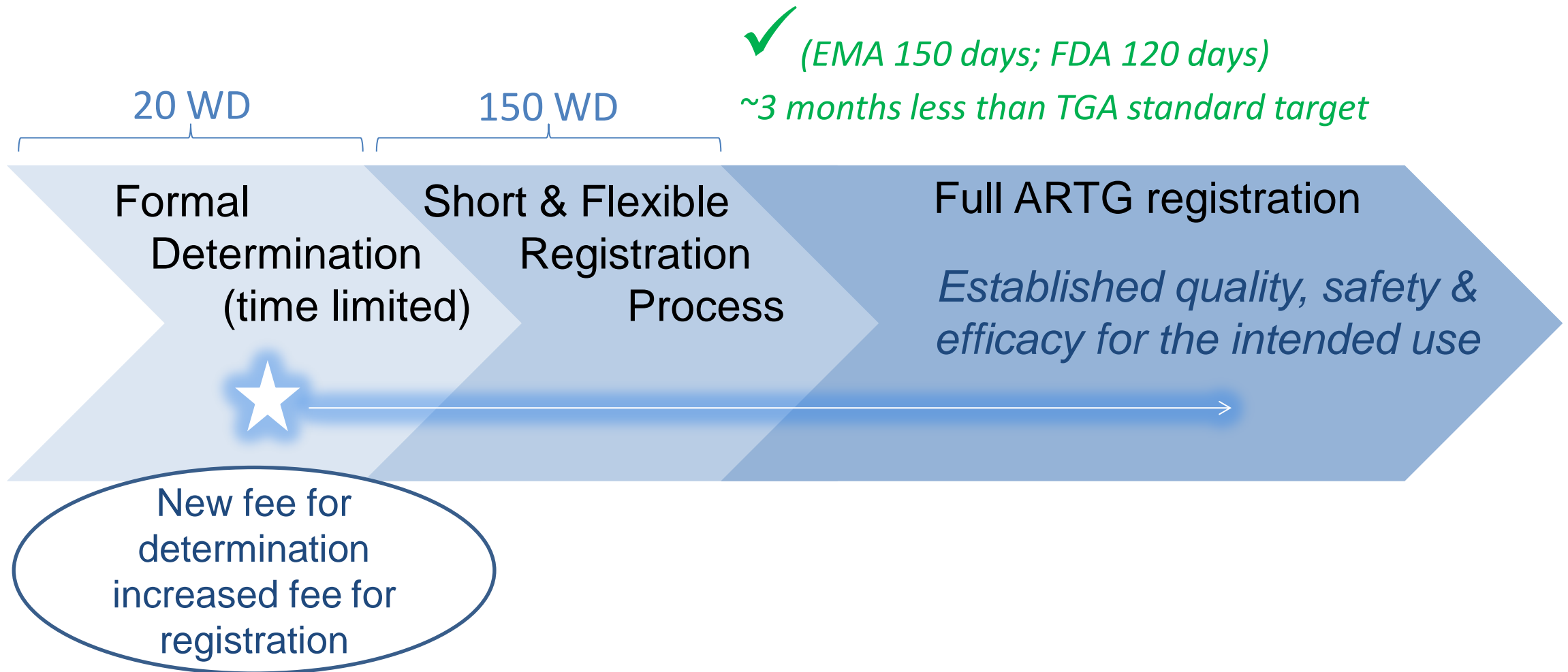


# Pre-submission and submission process





# Priority Review Process



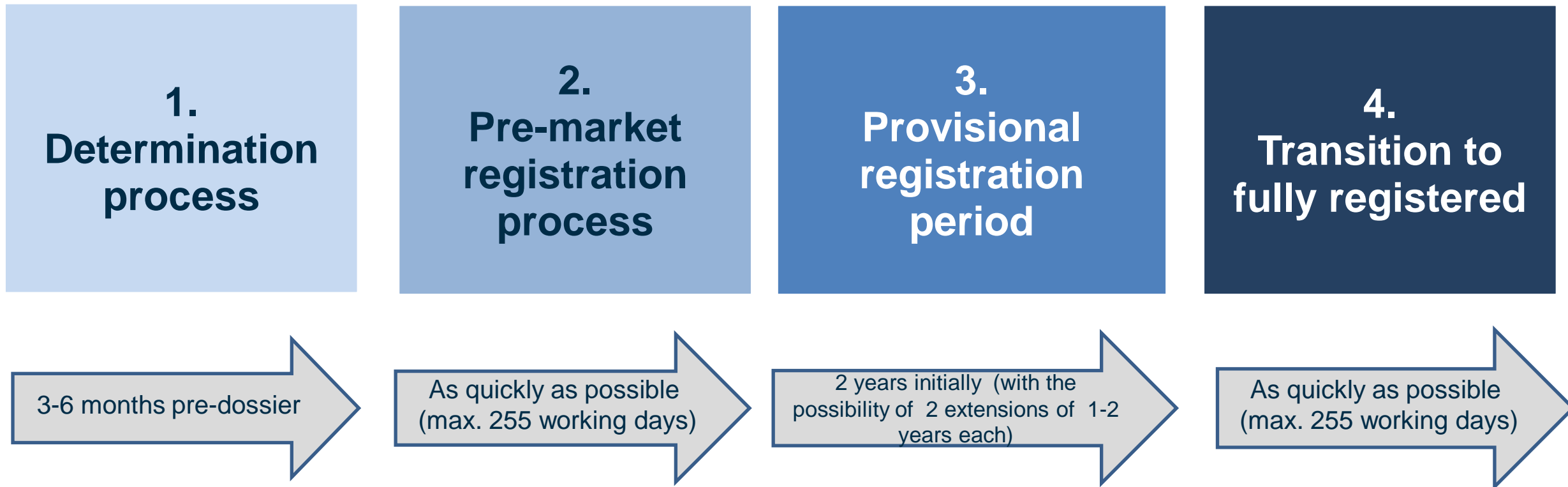
# How do we consistently meet timelines?

- Flexible business processes to reduce the subsequent registration timeframe
- ‘Partnership’ with applicant, standard timeframes will apply if requirements for Priority Review are not met
- The first and second round evaluation phases can be condensed
- Rolling questions during the first round assessment process
  - Provides speed and re-assurance for the clinical evaluation
  - Gives an indication of emerging issues
- Flexible arrangements for seeking expert advice

# Provisional approval

- Intended to strike a balance between making decisions on the basis of promising data for the benefit of Australian patients, knowing that we need to proactively manage the risks of more unknowns about the efficacy and safety of these medicines
- Provisional registration granted for specified time periods (2 years + up to 2 extensions, max 2 years each)
- Intended only for those medicines where further confirmatory data is still being gathered.
- Pathway subject to the provision of clear advice to consumers and healthcare professionals and any other conditions imposed by the TGA

# Overview of the Provisional Approval pathway





# Considerations for Implementation in Australia



# Products approved via expedited pathways

## New Active Substances (NAS)

|              | Total NAS approvals | 'Priority'                    | 'Provisional'                 |
|--------------|---------------------|-------------------------------|-------------------------------|
| EMA          | 28                  | 5 (18%)<br><i>accelerated</i> | 7 (25%)<br><i>conditional</i> |
| FDA          | 22                  | 15 (68%)                      | 6 (27%)<br><i>accelerated</i> |
| PMDA (Japan) | 48                  | 22 (46%)                      | -                             |

- **1<sup>st</sup> Priority medicine registered on 30 January 2018**
  - ✓ Alectinib (Alecensa), Extension of Indication
- **2<sup>nd</sup> Priority medicine registered on 23 February 2018**
  - ✓ Emicizumab (Hemlibra), New chemical entity



# Priority determinations

- 14 Priority determinations received as of 28 February 2018
- 10 (71%) Priority determinations approved
  - 6 Extension of Indications (EOI) , 4 - New Chemical Entities (NCE)
  - 70% anticancer pharmaceuticals
- Rejection reasons – Failure to meet criteria
  - #3 – comparison against existing registered therapeutic goods
    - Criteria 3 challenging: Example Interferon for Melanoma but < 100 patients per year
  - # 4 – Major therapeutic advance

# Approval times: TGA Experience 2004-2018

| Product Name  | Pathway                           | Year approved | Working Days |
|---|-----------------------------------|---------------|--------------|
| Cervarix Human Papillomavirus Vaccine Types 16 & 18 | Standard with rolling submissions | 2007          | 81           |
| ADT Vaccine diphtheria and tetanus vaccine          | Standard                          | 2006          | 81           |
| Isentress (Raltegravir)                             | Standard – priority status        | 2008          | 82           |
| Imbruvica (Ibrutinib) -140mg                        |                                   | 2015          | 88           |
| Panvax pandemic influenza vaccine                   | Standard with rolling submission  | 2008          | 91           |
| Gardasil (HPV recombinant vaccine)                  |                                   | 2006          | 92           |
| Opdivo-nivolumab                                    | Standard                          | 2016          | 94           |
| <b>Alecensa (Alectinib)</b>                         | <b>New Priority Pathway</b>       | <b>2018</b>   | <b>98</b>    |
| Lucentis (ranibizumab)                              | Standard – priority status        | 2007          | 99           |
| Alimta (pemetrexed )                                | Standard – priority status        | 2004          | 102          |
| <b>Hemlibra (emcizumab)</b>                         | <b>New Priority Pathway</b>       | <b>2018</b>   | <b>104</b>   |

# Safety Considerations

Research

JAMA | Original Investigation

## Postmarket Safety Events Among Novel Therapeutics Approved by the US Food and Drug Administration Between 2001 and 2010

Nicholas S. Downing, MD; Nilay D. Shah, PhD; Jenerius A. Aminawung, MD, MPH; Allison M. Pease, BS;  
Jean-David Zeltoun, MD, MHPM; Harlan M. Krumholz, MD, SM; Joseph S. Ross, MD, MHS

- 32% novel therapeutics affected by a post market safety issue
- Accelerated and near-regulatory deadline approval statistically associated with higher events

# Safety Considerations – Priority pathway

- Based on full data set
- Additional pharmacovigilance issues not expected
- Additional efficacy data not specified
- May have up to 7 EOI for one New Chemical Entity (NCE) or New Biological Entity (NBE)
- Safety signals may be from another therapeutic area
- Does Faster review increase risk to patients?

# Safety Considerations – Provisional pathway

- Early data – could be NCE or NBE
  - Increased risk due to limited patient exposure
- Early data for an EOI for already registered NCE/NBE
  - Increased risk if new dose or patient group
- We will allow pre-specified updates to the dossier
  - Will this provides ability to deal with safety issues quickly?
  - Will this be enough to update PI and CMI?

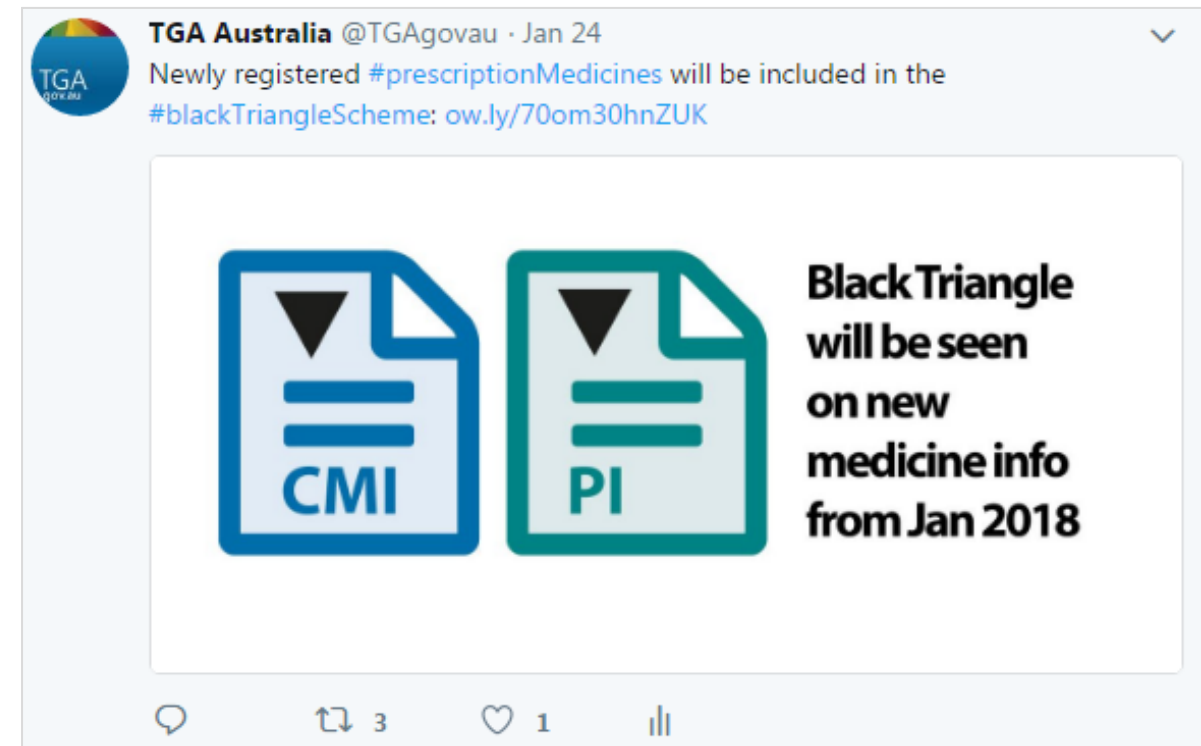
# Safety considerations – Provisional Pathway

- New powers under the Act for provisionally registered medicines to:
  - reduce the class of persons for whom the medicine is suitable
  - to change the directions for use
  - to add a warning or precaution
  - change the Product Information related to the medicine
- Gives delegates confidence to make a decision
- Provides TGA ability to protect patients if unexpected problems occur



# Enhanced Vigilance Framework

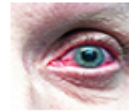
- Provisional medicines prioritised in enhanced vigilance framework
  - Black Triangle Scheme
  - PI Reformat
  - Inspection program
  - RMP Compliance Monitoring
  - Improved Adverse Event Management System (AEMS)



# Confirmatory Trials



IMAGES IN CLINICAL  
MEDICINE  
Acute Angle-Closure Glaucoma



PERSPECTIVE  
Tumors and Tra

## Perspective

# The Fate of FDA Postapproval Studies

Steven Woloshin, M.D., Lisa M. Schwartz, M.D., Brian White, B.A., and Thomas J. Moore, A.B.

Evaluated 614 requirements made in 2009-2010

- 20% of studies had not been started after 5-6 years
- 25% were still ongoing
- 9% delayed, 16% on schedule
- 54% completed as of 2015

# Confirmatory Trials: TGA approach

- Provisional intended only for those medicines where further confirmatory data can be collected
- 2 year checkpoint to assess progress on clinical trial plan
  - Flexible approach needed as a smaller regulator
- Requirement for Sponsor to have a clinical trial plan at determination stage
- Planned trials to be fully accrued at determination stage
- Other sources of real world data?

# Other Consideration: Quality & Outcomes

Format: Abstract ▼

[JAMA](#). 2017 Aug 15;318(7):626-636. doi: 10.1001/jama.2017.9415.

## **Characteristics of Preapproval and Postapproval Studies for Drugs Granted Accelerated Approval by the US Food and Drug Administration.**

[Naci H<sup>1</sup>](#), [Smalley KR<sup>1</sup>](#), [Kesselheim AS<sup>2</sup>](#).

⊕ Author information

**CONCLUSIONS AND RELEVANCE:** Among 22 drugs with 24 indications granted accelerated approval by the FDA in 2009-2013, efficacy was often confirmed in postapproval trials a minimum of 3 years after approval, although confirmatory trials and preapproval trials had similar design elements, including reliance on surrogate measures as outcomes.

# Other Considerations: Communicating Risk

- Standard wording in Consumer Medicine Information (CMI) & Product Information (PI)
- Consumer and Health Professional Communication Plan
- Improving Access to CMI
- Reforming of CMI
- Black Box warning
- Promotion of provisional medicines – Industry may consider Medicines Australia Code of Conduct



# Other Considerations

- Pressure from sponsors and patient groups
- Media interest – short response times
- Access via a visa protection
- Regional obligations
  - Criteria applies to Australia context only



## News

## TGA in line for bumper 2018 approvals

Posted 17 January 2018

The TGA approved a total of 34 new products over 2017, according to its [website](#), making it a lower-than-average year for the regulator. Although overseas approvals predict an influx of 2018 registrants,



# Other options for Early access

|                       | Medicine Applications approved/Notifications (Jul 2016- June 2017) |
|-----------------------|--|
| Special Access Scheme | 68,287   |
| Clinical trials       | 705 (new trials)   |
| Authorised Prescriber | 764  |

## Reasons

- Not commercially viable in Australia
- Unproven therapy
- Novel or new therapy
- Travellers bringing products from overseas
- Compassionate Access
- Pre- provisional registration
- Lapse of provisional registration



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