

Periodic Safety Update Reports

Some commonly asked questions

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Outline

- Periodic Safety Update report (PSUR) or Periodic Benefit Risk Evaluation Report (PBRER)?
- PSUR requirements
- Should I include a cover letter?
- How do I work out when to submit my PSURs?
- What does the Post-market Surveillance Branch (PMSB) do with the PSURs?
- Questions



PSUR vs PBRER

- European Union (EU) guidelines adopted by the TGA include
 - Guideline on good pharmacovigilance practices (GVP) Module VII Periodic Safety
 Update Reports (Revision 1)
 - Defines scope, objectives, format and content of the PSUR
 - Format and content are based on ICH-E2C(R2) Guideline on Periodic Benefit Risk Evaluation Reports
 (PBRER)
 - PBRER format adopted in all EU states but are still called PSURs to be consistent with legislation
- The adopted EU guidelines and TGA annotations are provided on the TGA website http://www.tga.gov.au/industry/pm-euguidelines-adopted-pharmacovigilance.htm
- PSUR = PBRER for reporting to the TGA



Requirements

- Required for all products that have an RMP and for other products as determined by the delegate
- Format
 - GVP Module VII
- Emailed electronic file (ideally PDF) preferred
 - Can be mailed on CD if files too large to email
 - Mailed in hard copy not ideal
- Send all PSURs to the RMP Coordinator
 - Details at end of presentation

Cover letter?

- Yes please
- Include
 - *Ingredient
 - *Tradename
 - *Submission number/s
 - Sponsor
 - ARTG number
 - Period this PSUR is covering
 - For bonus points which PSUR it is (first, third, final etc)
 - Dated approval letter

^{*}key information



PSUR timing (1)

Check the approval letter for PSUR conditions

- The PSUR conditions are in the approval letter in *Attachment 4 Specific Conditions Applying to this Therapeutic Good* which generally states the following (or similar):
 - An obligatory component of Risk Management Plans is routine pharmacovigilance. Routine pharmacovigilance includes the submission of Periodic Safety Update Reports (PSURs). Reports are to be provided annually until the period covered by such reports is not less than three years from the date of this approval letter. No fewer than three annual reports are required. The reports are to at least meet the requirements for PSURs as described in the European Medicines Agency's Guideline on good pharmacovigilance practices (GVP) Module VII-Periodic Safety Update Report (Rev 1), Part VII. Structures and processes. Note that submission of a PSUR does not constitute an application to vary the registration. Each report must have been prepared within ninety calendar days of the data lock point for that report.
 - Unless agreed separately between the supplier who is the recipient of the approval and the TGA, the first report must be submitted to TGA no later than 15 calendar months after the date of this approval letter. The subsequent reports must be submitted no less frequently than annually from the date of the first submitted report until the period covered by such reports is not less than three years from the date of this approval letter.
 - The annual submission may be made up of two PSURs each covering six months. If the sponsor wishes, the six monthly reports may be submitted separately as they become available.





PSUR timing (2)

Translation of the conditions in the approval letter

- You must submit PSURs at least annually for at least 3 years, starting from the date of the approval letter
 - alternatively, they can be six monthly
 - either submit separately every 6 months or submit two together at the end of the year that they cover.
- The data lock point (DLP) is the cut off date for receipt of safety information that will be considered in the current PSUR
 - the first DLP is either 6 months or 1 year from the date of the approval letter.
- After the DLP you have 90 calendar days to finish putting the report together and submitting it to the TGA
 - first PSUR must be submitted to the TGA no later than 15 calendar months after the date of the approval letter
 - any safety information in the 90 days preparation period should be included and discussed under the "late breaking information" section.
- Follow the EMA's GVP guidelines on structure and process available in pdf on our website
 - use full PSUR/PBRER format, not addendum reports or abbreviated reports.
- This scheduling and format must be followed unless you have made a successful formal application to vary the conditions of registration.



PSUR timing (3)

Example

- Your approval letter is dated 1 May 2014.
- Your first data lock point (DLP) is either 1 May 2015 or 1 November 2014.
- For annual submission
 - use all safety information collected up to 1 May 2015
 - complete the PSUR and submit to the TGA within 90 days (30 July 2015).
- Your last DLP will be 1 May 2017 with final submission due 30 July 2017.
- After the final PSUR, you don't have to submit to the TGA unless there have been further PSUR requirements placed as conditions of registration
 - for example, following extension of indication.
- In between those dates you can submit 3 annual or 6 six-monthly reports (or a combination of these).



What does the PMSB do with PSURs?

- Risk Management Plan Evaluation Section tracks them
- Signal Investigation (Medicines) Unit reviews PSURs for products that have an RMP and refers others to the relevant delegate in MAB
- PSUR reviews are conducted with particular interest in:
 - Safety document changes whether CCDS or international regulator
 - CCDS safety-related changes are expected to be implemented in the Australian PI within a reasonable timeframe (e.g. 6 months)
 - Overseas regulatory action must be included in the PSUR even if CCDS changes are not planned
 - Expectation that we will also be notified at the time of the regulatory change
 - New safety signals
 - Changes to known risks
- Don't wait for the PSUR submission to notify the TGA of significant new information relating to the safety of your product
 - Report significant safety issues within 72 hours see Australian requirements and recommendations for pharmacovigilance responsibilities of sponsors of medicines.



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Questions?