Workshop on

Acceptability of data generated from foreign clinical trials and ethnic factors in drug development

23 - 24 November 2009

PROGRAMME

Grand Hotel Kempinski, Geneva, Switzerland

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INSTITUTE FOR REGULATORY SCIENCE

CMR International Institute for Regulatory Science Workshop

Background

The majority of medicines are not currently developed for the exclusive use in one country, and there is a continuing debate on how best to use clinical data that are obtained from global studies so as to avoid duplicative testing, thus reducing delay in availability of medicines and increasing the cost of development. As the regulation of medicine should be based on scientific principles, it is these that should be at the forefront of any discussion on acceptability of foreign data. When considering foreign clinical data, regulators will be checking to see that the:

> Data are relevant to their country's environment from a clinical perspective; studies have been conducted to appropriate standards; data package is sufficient to meet the regulators' criteria for a registration of a new medicine; and there are no issues of differing response relating to the ethnicity between the population studied and the local population.

There are a number of countries that require local clinical trials for registration as a pre-requisite for marketing the drug in the country, such as China and India, as well as countries that require bridging studies, such as Japan, South Korea and Taiwan. It has now been over 10 years since the ICH E5 Guideline was signed off under the auspices of ICH and the guideline is still interpreted differently by different countries.

Currently Japan is being proactive in looking to encourage companies to include Japan in global trials. There is also an initiative to evaluate clinically relevant differences between Asian populations with China, Japan and South Korea in discussion about undertaking studies to identify if there are any of these differences in data generated from patients in their respective countries. In Taiwan and South Korea, the agencies have identified which products require bridging studies and for which ones a company can get a bridging waiver.

In the future, there are concerns that individual countries will increase their need for additional data to be generated in their country or region, and as more companies undertake trials outside of Europe and USA, these regulatory authorities are becoming more conscious that companies may be submitting dossiers that will predominantly include data from clinical studies conducted outside the ICH countries.

This Workshop is being held to initiate a discussion on this topic, not just to evaluate 10 years of the E5 guideline, but to understand the current perspectives of agencies and companies on the use of foreign data and to look to the future and identify the framework that agencies should be using when assessing the need for and interpretation of foreign clinical data.

Objectives

- **Identify the companies' and agencies' current perspectives** with regards to ethnic differences in clinical trial data
- **Discuss how often potential clinical differences occur** between different populations and how extrinsic and intrinsic factors play a role in ethnic differences
- **Review where bridging studies have been required** and whether these have been justified
- **Review what the regulatory requirements** are to accept foreign data, the potential issues and solutions.

Venue

The Workshop will take place at the Grand Kempinski Hotel, Geneva, Switzerland commencing at 09.00 on Monday, 23 November and finishing 12.30 pm on Tuesday, 24 November 2009.

Style and Participation

Following the agreed practices for Institute Workshops, the meeting will be closed and the size will be limited to allow productive networking and discussions.

Day 1: Monday 23 November 2009

08:30 Registration

SESSION 1: ACCEPTABILITY OF FOREIGN DATA IN A GLOBALISED WORLD: WHAT ARE THE PRINCIPLES?		
09.00	**Chairman's welcome and introduction:**	**Dr Paul Huckle,** *Senior Vice President, Global Regulatory Affairs, GlaxoSmithKline, USA*
	Ethnic factors, ten years on from adoption of the E5 Guideline: What have we learnt and is E5 fit-for-purpose in the changing global development landscape?	
09.10	**Regulators viewpoint**	**Dr Robert O'Neill,** *Director Office of Biostatistics, CDER, FDA, USA*
09.35	**A company viewpoint**	**Dr Sue Forda,** *Vice President, International Regulatory Affairs, Eli Lilly and Company Ltd, UK*
	Ethnic Factors and the E5 Guideline: What has been learnt about ethnic differences - A view based on experience	
10.00	**The Japanese Experience**	**Dr Mamoru Narukawa**, *Associate Professor, Division of Pharmaceutical Medicine, Kitasato University Graduate School of Pharmaceutical Sciences, Japan*
10:20	**The Chinese Taipei Experience**	**Dr Meir-Chyun Tzou**, *Director, Division of Pharmaceutical Chemistry,,Bureau of Food and Drug Analysis, Department of Health, Chinese Taipei*
10.40	**The South Korean Experience**	**Dr Jung Yun Chang,** *Deputy Director, Korea Food and Drug Administration, South Korea*
11.00	**Discussion**	
11.10	**Break**	
	Acceptability of data generated in global studies: How are agencies and companies ensuring credible and reliable clinical trials so that the data generated is robust enough for global regulatory scrutiny?	
11.45	**A perspective from Singapore**	**Dr Huei-Xin Lou,** *Deputy Director, Pharmaceuticals and Biologics Branch, Health Sciences Authority, Singapore*
12.05	**A Perspective from China**	**Dr Jane Lin,** *Senior Medical and Regulatory Affairs Director, Baxter (China) Investment Co Ltd, China*
12.25	**What are the key regulatory principles that will give confidence to regulators for acceptance of foreign clinical data to be used as pivotal in the assessment of new medicines for approval?**	**Dr Fergus Sweeney,** *Head of Sector, Inspections, European Medicines Agency, UK*
12.50	**Discussion**	
13.00	**Lunch**	

SESSION 2: SYNDICATE SESSIONS		
14.00	**Introduction to the Syndicate Sessions** **Ethnic factors, E5 Guideline and Acceptability of Foreign Data: What is the company experience and perspective for the future?** *Outcome of an Institute survey of companies as background for the syndicate discussion: What has been the impact of the E5 Guideline? How often does potential real clinical differences occur between different populations? Have these been identified prior to undertaking clinical trials? How do companies view/account for extrinsic ethnic differences? Where bridging studies have been required, what is the company experience of whether these have been justified (ie did the outcomes add any new knowledge)?*	**Dr Neil McAuslane,** *Director, CMR International Institute for Regulatory Science*
14.30	**Syndicate sessions on:** **TOPIC A: How to ensure acceptance of foreign clinical data at time of registration** What is the challenge for companies to determine the impact of ethnic factors on individual medicines? What are the key principles (Framework) that companies and agencies need to work within to ensure regulatory acceptance of foreign clinical data? **TOPIC B: What are the arguments for and against individual countries requiring data to be generated in their country or region** The role and relevance played by extrinsic and intrinsic ethnic factors in the clinical evaluation of medicines and how requirements for local clinical trials may mean duplicative testing of little value. What are the factors that need to be considered that will establish confidence within regulatory agencies that the appropriate benefit-risk decisions for the local population can be determined without the need for a local clinical trial?	**Chair: Dr Petra Dörr,** *Head of Management Services and Networking, Swissmedic* **Rapporteur: Dr Simon Larkin,** *Head of Product Development, Celgene International, Switzerland* **Chair: Dr Robert Peterson,** *Professor of Paediatrics, University of British Columbia Faculty of Medicine, Canada* **Rapporteur: Julie Dennis,** *Senior Director, Asia Region, Worldwide Regulatory Strategy, Emerging Markets Pfizer Limited, UK*
16.00	**Break**	
16.30	**Syndicate resumes**	
18.30	**End of Syndicate Discussion and end of day one**	
19.00	**Reception**	
19.30	**Dinner**	

DAY 2: Tuesday 24 November 2009

SESSION 3: GLOBAL CLINICAL RESEARCH: ARE ETHNIC DIFFERENCES EFFECTIVELY COVERED?		
08.30	**Chairman's Introduction**	**Dr Murray Lumpkin,** *Deputy Commissioner, International Programs, Food and Drug Administration, USA*
08:35	**Feedback of day one syndicate discussion**	
09.15	**Panel: Discussion** *A reflection from UK MHRA, Health Canada and Australian TGA on the outcome of the syndicate discussion on acceptance of Foreign Data/need for local data in drug registrations for their jurisdictions*	**Prof Sir Alasdair Breckenridge,** *Chairman, Medicines and Healthcare products Regulatory Agency,(MHRA), UK* **Dr Supriya Sharma,** *Director General, Therapeutic Products Directorate, Health Canada* **Dr Ruth Loper,** *Principle Medical Adviser, Therapeutic Goods Administration, Australia*
	Subgroup analysis: What are the strengths and weakness of this approach to interpreting global clinical trials and identifying ethnic differences? *What can we learn from statistical analysis on how to power a sub-group analysis so that we can learn about differences within study populations, which are multinational? Does the experience in Europe and the USA of undertaking trials in diverse local populations provide any insights into how regulators should approach foreign clinical data? What are the methods for identification of variability during phase 3?*	
09.45	**A Regulatory Perspective**	**Rob Hemmings,** *Statistics Unit Manager MHRA and CHMP, , Medicines and Healthcare products Regulatory Agency,(MHRA), UK*
10.05	**A Company Perspective**	**Ray Harris,** *Director of Biostatistics, Eisai, UK.*
10.25	**Discussion**	
10.30	**Break**	
	Globalisation of clinical research: What are the ethical (& Scientific) implications and what needs to be in place? Are the conditions the study is conducted under as important as their relevance to the target population? What role do IRBs and ethical boards play in ensuring acceptability of clinical data?	
11.00	**A Perspective from an ethics Expert**	**Francis Crawley,** *Executive Director, Good Clinical Practice Alliance – Europe (GCPA), Belgium*
11.25	**A Company Perspective**	**Dr Pol Vandenbrouke,** *Vice President, Development, Emerging Markets, Pfizer Inc, USA*
11.55	**An FDA Reflection on the Acceptability of Foreign Data and future issues that need to be addressed.**	**Dr Murray Lumpkin,** *Deputy Commissioner, International Programs, Food and Drug Administration, USA*
12.20	**Discussion**	
12.25 *12.30*	**Chairman's Summary and Close of session** **Close of Workshop followed by lunch**	