

Ignite the future - our exciting PAC reliance journey with 48 NRAs

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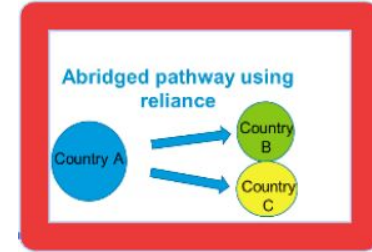
Associate Regulatory Program Director

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Major drug substance process change for mAb

Supply critical variation

- EMA - reference agency
- Unilateral reliance



- Reducing the global approval and implementation timelines for a Major DS Process change **from 2.5 YEARS to 6.5 MONTHS** to ensure the continuous supply to patients
 - **Reduce country specific requirements**
- Enhance greater **transparency** to NRAs by sharing EMA assessment report and Q&A

Pilot's Layout & Participation Criteria



One Standard Dossier



EU dossier submitted to all countries

No Country Specific Requirements



Avoid submission of country specific requirements when justified by scientific rationale

Q&A Document



EU questions and Roche's responses document will be shared with the participating NRAs

No Testing



According to EU, for this type of change, no testing required

EU Assessment Report



EU assessment report will be shared with NRAs

One Timeline for All



Same dossier and Q&A review timelines for all participating NRAs

Roche PAC Reliance Pilot - Participating Countries



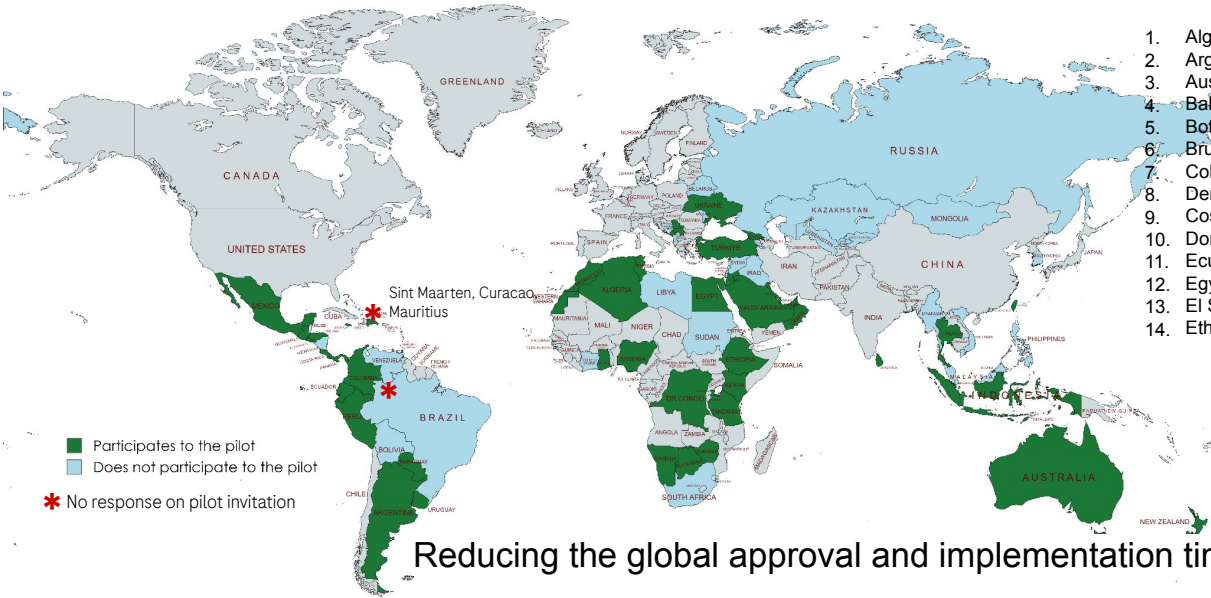
84 COUNTRIES IMPACTED BY THE CHANGE



48 COUNTRIES AGREED to participate in the pilot

57%

Acceptance Rate

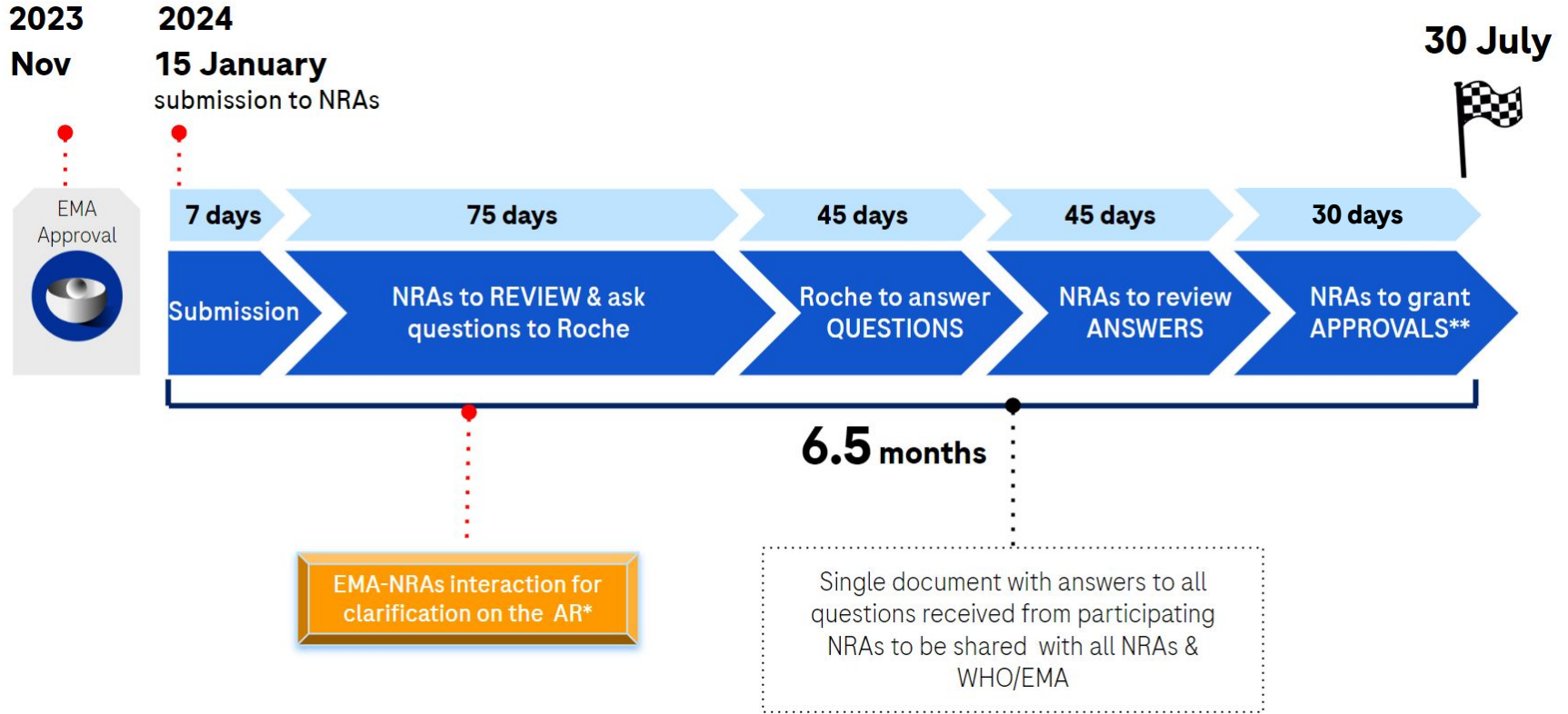


- | | | | |
|------------------------|----------------|-------------------------|--------------------------|
| 1. Algeria | 15. Georgia | 29. New Zealand | 43. Tunisia |
| 2. Argentina | 16. Ghana | 30. Nigeria | 44. Türkiye |
| 3. Australia | 17. Guatemala | 31. Oman | 45. Ukraine |
| 4. Bahrain | 18. Honduras | 32. Panama | 46. United Arab Emirates |
| 5. Botswana | 19. Indonesia | 33. Paraguay | 47. Uruguay |
| 6. Brunei | 20. Israel | 34. Peru | 48. Zimbabwe |
| 7. Colombia | 21. Jamaica | 35. Qatar | |
| 8. Dem. Rep. of Congo | 22. Jordan | 36. Saudi Arabia | |
| 9. Costa Rica | 23. Kenya | 37. Serbia | |
| 10. Dominican Republic | 24. Kuwait | 38. Sri Lanka | |
| 11. Ecuador | 25. Mexico | 39. Taiwan | |
| 12. Egypt | 26. Montenegro | 40. Tanzania | |
| 13. El Salvador | 27. Morocco | 41. Thailand | |
| 14. Ethiopia | 28. Namibia | 42. Trinidad and Tobago | |

Reducing the global approval and implementation timelines

From **2.5 YEARS** to **6.5 MONTHS** to ensure continuous supply to patients

Highlights and Timelines




*Assessment Report

**If approval not granted NRA should share rationale for refusal

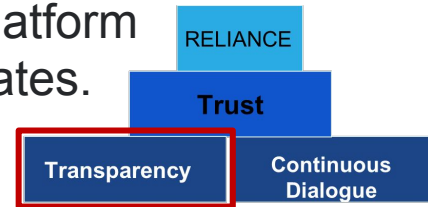
Handling potential Questions & Answers transparently



Q & A were shared via a Accumulus Synergy 

- **A first-of-its-kind, cloud-based data and information exchange platform** supporting regulatory interactions between Life Sciences Organizations and Global Health Authorities
- This tool is a proposal for **greater visibility and transparency**. All participating NRAs were able to see the questions real-time from other NRAs

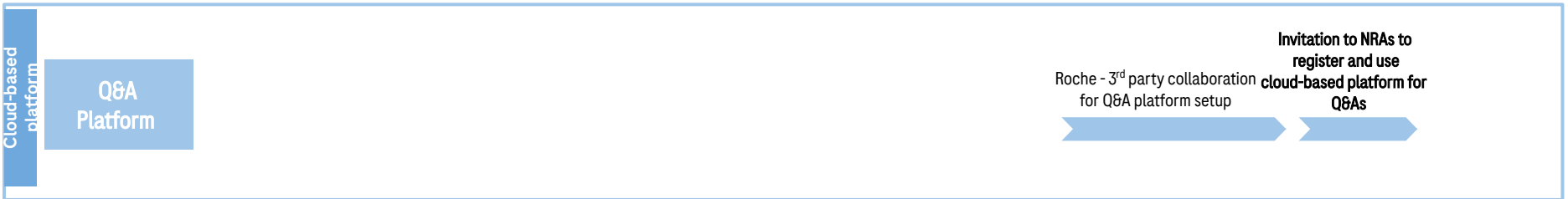
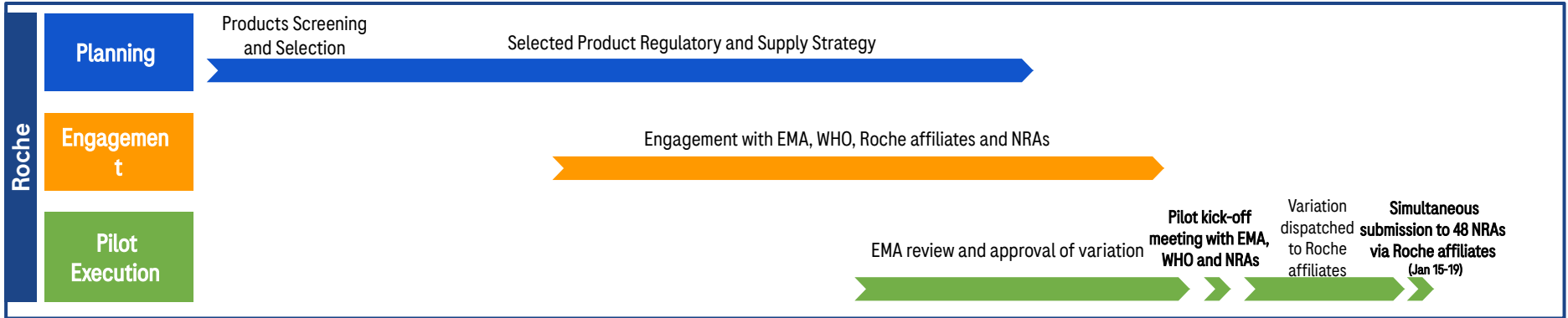
Each NRA could choose whether to use the Accumulus Q&A platform or issue Q&As following its standard process via Roche affiliates.



Roche PAC Reliance Pilot Journey



2022		2023											2024	
Q4		Q1			Q2			Q3			Q4			Q1
Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan



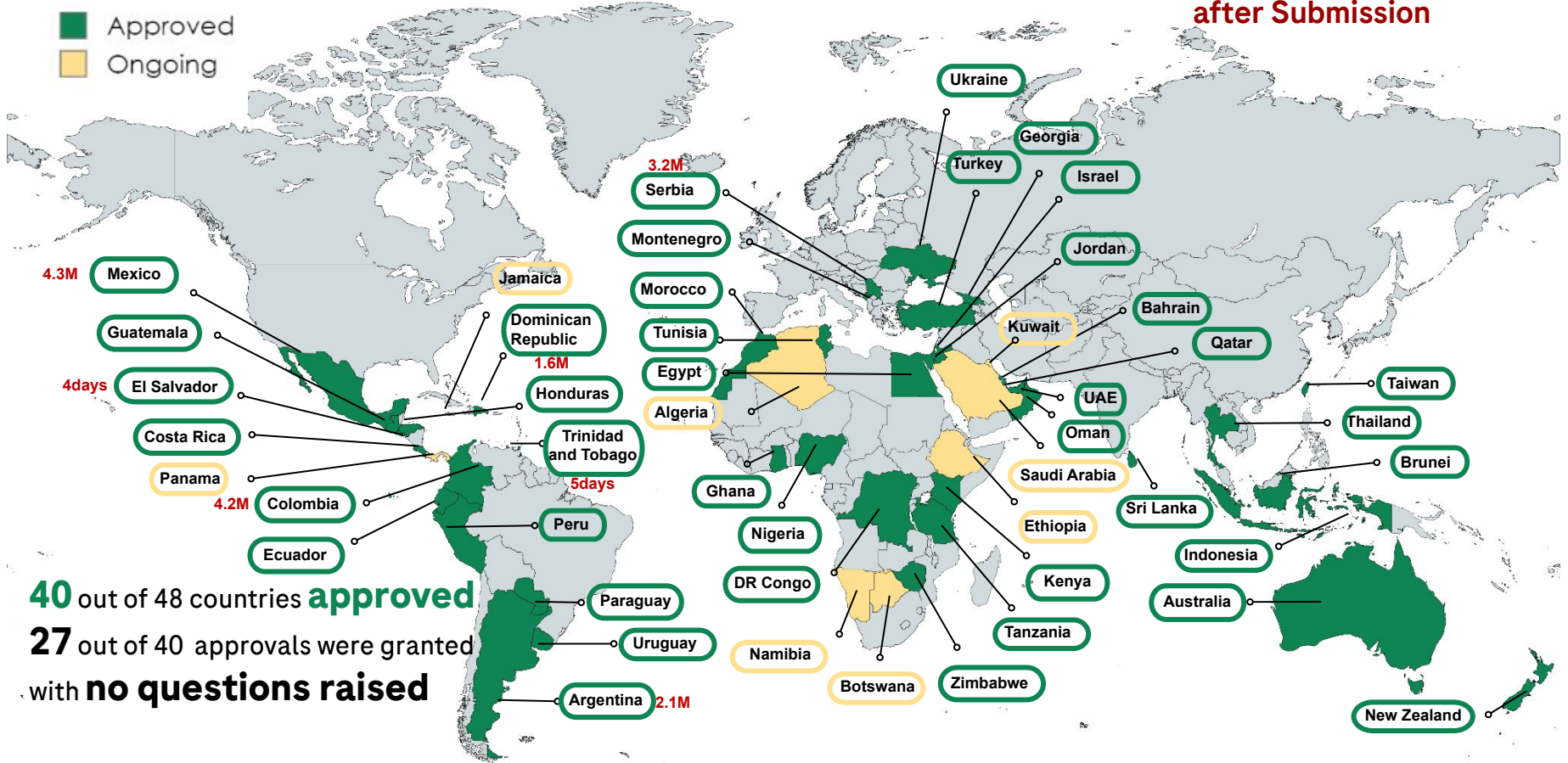
Current Status (as of August, 7th '24) - Approvals

83%



Approvals 6.5M
after Submission

Approved
Ongoing



- **40** out of 48 countries **approved**
- **27** out of 40 approvals were granted with **no questions raised**

Current Status - Overview of Questions Received

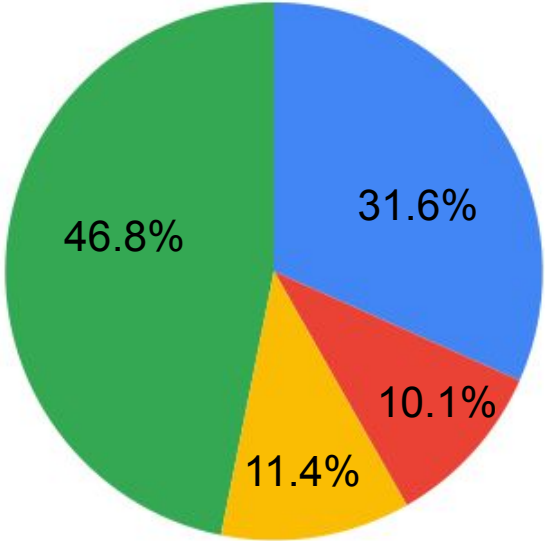


14 COUNTRIES issued questions
85 Total **QUESTIONS**



Questions Categories

- Technical ●
- Clarifying ●
- Country Specific Document ●
- Administrative ●



Success Factors



Transparency and Dialogue: same variation package as EMA, EMA's Q&As and unredacted assessment report



Support from EMA and WHO, strong advocates for reliance around the globe



Choice of product and supply critical variation: This medicine is used for treating life-threatening diseases and involves a major supply-critical variation with high public health and business impact.



Overall product strategy, especially the impact of the pilot on change implementation, should be continuously and carefully assessed.



Regulatory affiliates of each participating company, which operate in the countries impacted by this variation, play a crucial role as the primary contact with their respective NRAs.

Conclusion

- **57% participation rate** → Strong interest and willingness of many NRAs across the globe to bring reliance into action for PACs
- **83% of NRAs approved in 6.5 months**
- **Transparency** is key in building trust with regulators
- Applying reliance throughout the lifecycle of the product, including PACs, represents a contribution towards global convergence and harmonization

You want to know more about the Roche PAC Reliance

*Pilot? Check out our latest **publication on TIRS** ([LINK!](#))*

Therapeutic Innovation & Regulatory Science
<https://doi.org/10.1007/s43441-024-00677-8>

DIA

ANALYSIS

Unleashing the Power of Reliance for Post-Approval Changes: A Journey with 48 National Regulatory Authorities

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Received: 26 April 2024 / Accepted: 18 July 2024
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Abstract

Post-approval changes (PACs) to marketed products are routinely introduced to continuously enhance the product lifecycle management. However, bringing a chemistry, manufacturing and control (CMC) change through the global health authorities can be a complex and lengthy process taking up to several years, therefore negatively impacting supply continuity. In order to accelerate the review and approval of regulatory submissions and ensure continuous supply to patients, the World Health Organization (WHO) is strongly supporting the implementation of reliance among National Regulatory Authorities (NRAs). While some promising developments have been made with the use of reliance pathways for initial marketing authorizations, reliance is still not widely used for PACs. With the support of the European Medicines Agency (EMA) and WHO, Roche launched a reliance pilot based on EMA approval to file a supply critical variation for a monoclonal antibody. The variation constitutes major changes to the approved manufacturing process. Sameness of the product is ensured by submitting to all participants the same variation package as in the EU. The objectives of the pilot are to ensure continuous supply of this critical medicine by targeting global approval in 6.5 months, to promote regulatory convergence by waiving country specific requirements, and enhance greater transparency by sharing EMA Committee for Medicinal Products for Human Use (CHMP) final assessment report and Q&As to participating NRAs. Globally 48 NRAs have agreed to join the pilot. This article outlines the process of establishing the pilot project, including a planning phase and an engagement phase with the EMA, WHO and the participating NRAs.

Keywords Reliance · Post-Approval Changes · Convergence · Transparency

Introduction

Post-approval changes (PACs) are crucial for the continuous supply of essential medicines, responding to demand surges, change in regulatory requirements, and technologi-



Thank you!

