



# **FDA/GPhA Quarterly Meeting on GDUFA Implementation**

**December 16, 2014**



# Meeting Agenda

- |       |                              |     |
|-------|------------------------------|-----|
| I.    | Introductions                | All |
| II.   | Communications Transparency  | FDA |
| III.  | GDUFA Hiring Update          | FDA |
| IV.   | Inspection Parity Update     | FDA |
|       | Break                        |     |
| V.    | OSI (BE) Inspection Program  | FDA |
| VI.   | FY14 Update                  | FDA |
| VII.  | Submission Quality Follow up | All |
| VIII. | Wrap-up and Next Steps       | All |



# Communications Transparency

- Keith Flanagan
- Janet Woodcock
- Kathleen Uhl





## CY14 - Deep, foundational restructuring to fulfill GDUFA commitments

### A “perfect storm”

- Moved to White Oak.
- Reorganized and became a Super Office.
- New program and staffing infrastructure.
- New IT platform
- New OPQ
- Incoming submissions with goal dates for the first time.

Still need to tie up loose ends, but no additional restructuring is anticipated.





Thank you for your patience and understanding.  
We appreciate you hanging in there with us.





## CY15 – Attack pre-Year 3 workload

- Improve not only communications, but also performance
- Goals:
  - “Move the freight”
  - Focus on approvals, not actions
  - Don’t let big first generics slip through the cracks



## Next Steps:

- Assign Target Action Dates (TADs) to all pre-Year 3 submissions. (With caveats, and not all at once. See next slide.)
- Base TADs on workload management factors, with one exception: For big first generics, assign TADs roughly corresponding with expiry.
- In early CY15, start notifying applicants of TADs.
- “Launch planning updates” for big first generics 6 and 3 months before TAD.
- Certain other pre-launch “go/no go” communications.
- Iterative, “real-time communications” re deficiencies in current review cycle. Already started in CMC, scale this out to Bio next.
- Update Communications with Industry MAPP to formalize and clarify these changes.







# GDUFA Hiring Update

- CDER/OM – Sachin Shah
- ORA – Ann Marie Montemurro



# **GDUFA Hiring Update**

Melanie Keller

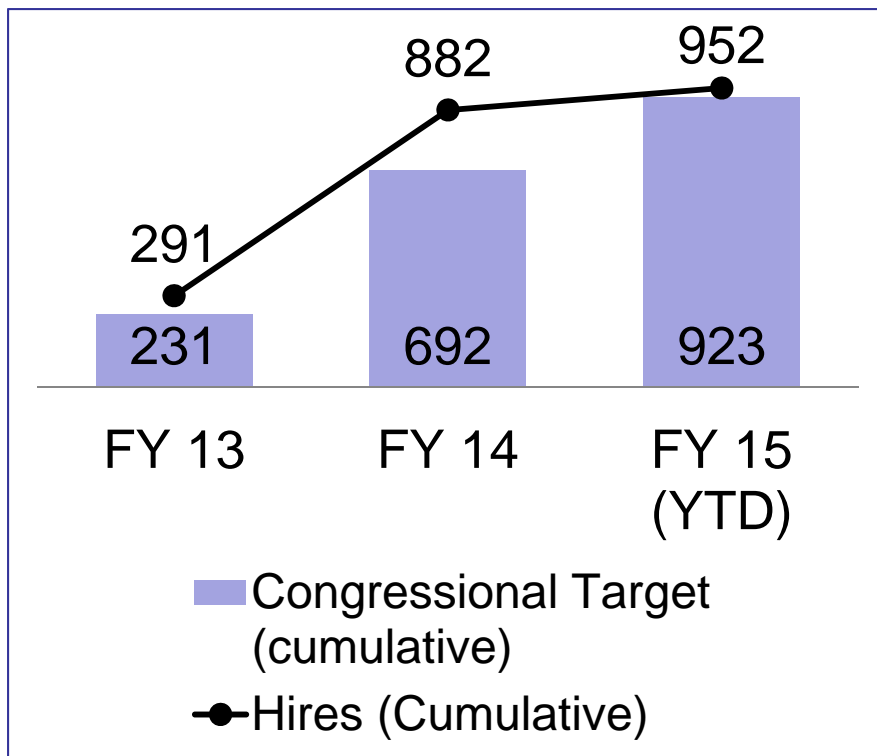
Associate Director for Management  
Center for Drug Evaluation and Research

December 16, 2014



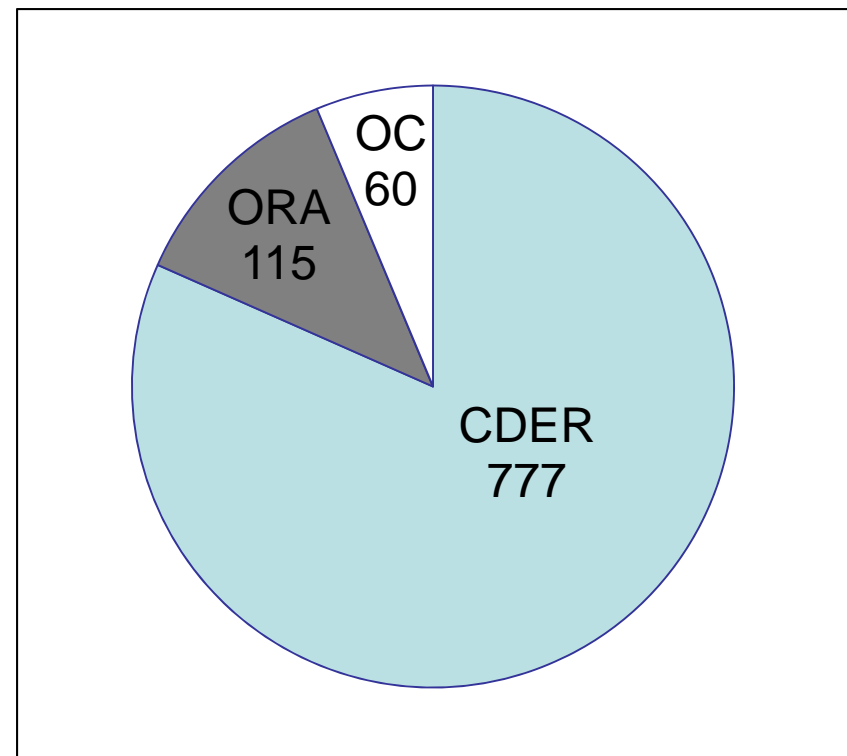
# GDUFA Hiring: Goal Met

Hiring Progress by Fiscal Year



All data through Nov. 19, 2014

Hiring by Center/Office





# Outreach For Talent

The July 18 GDUFA Hiring Event drew more than 3,000 people to the White Oak Campus



**@FDA\_Drug\_Info**



**Fdacdergdufahiring**

Social Media connected FDA to new sources of talent, increasing visibility and applicant quality.





# Inspection Parity Update

- Russell Wesdyk



# Meeting GDUFA Inspection Commitments

## *Surveillance Selection Rules*

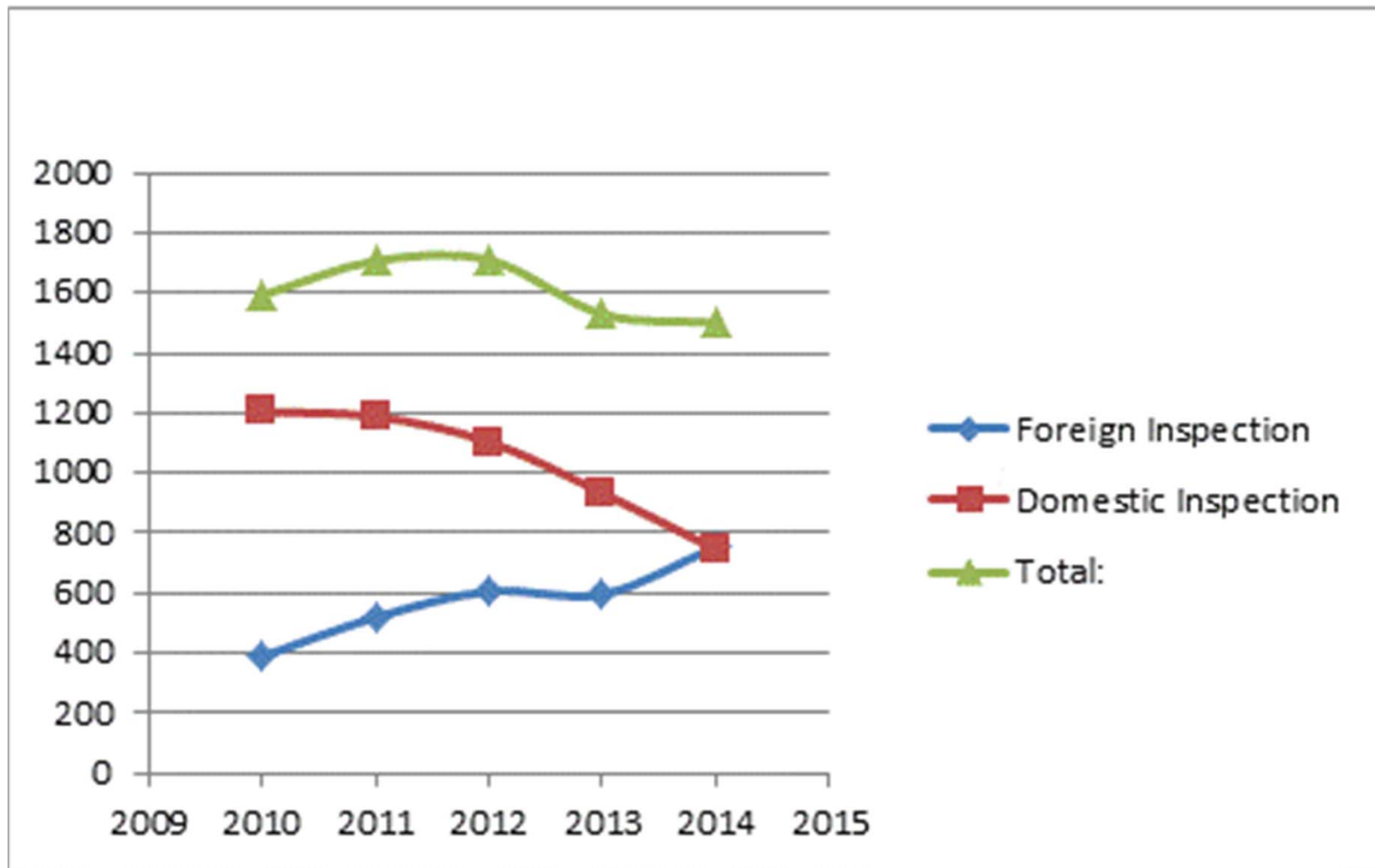


# GDUFA Inspection Goals

- “FDA will conduct risk-adjusted biennial CGMP surveillance inspections of generic API and generic finished dosage form (FDF) manufacturers, with the goal of achieving parity of inspection frequency between foreign and domestic firms in FY 2017.”
- “[...] with comparable depth and rigor of inspection.”
- Application timeline goals...



# Surveillance Trends

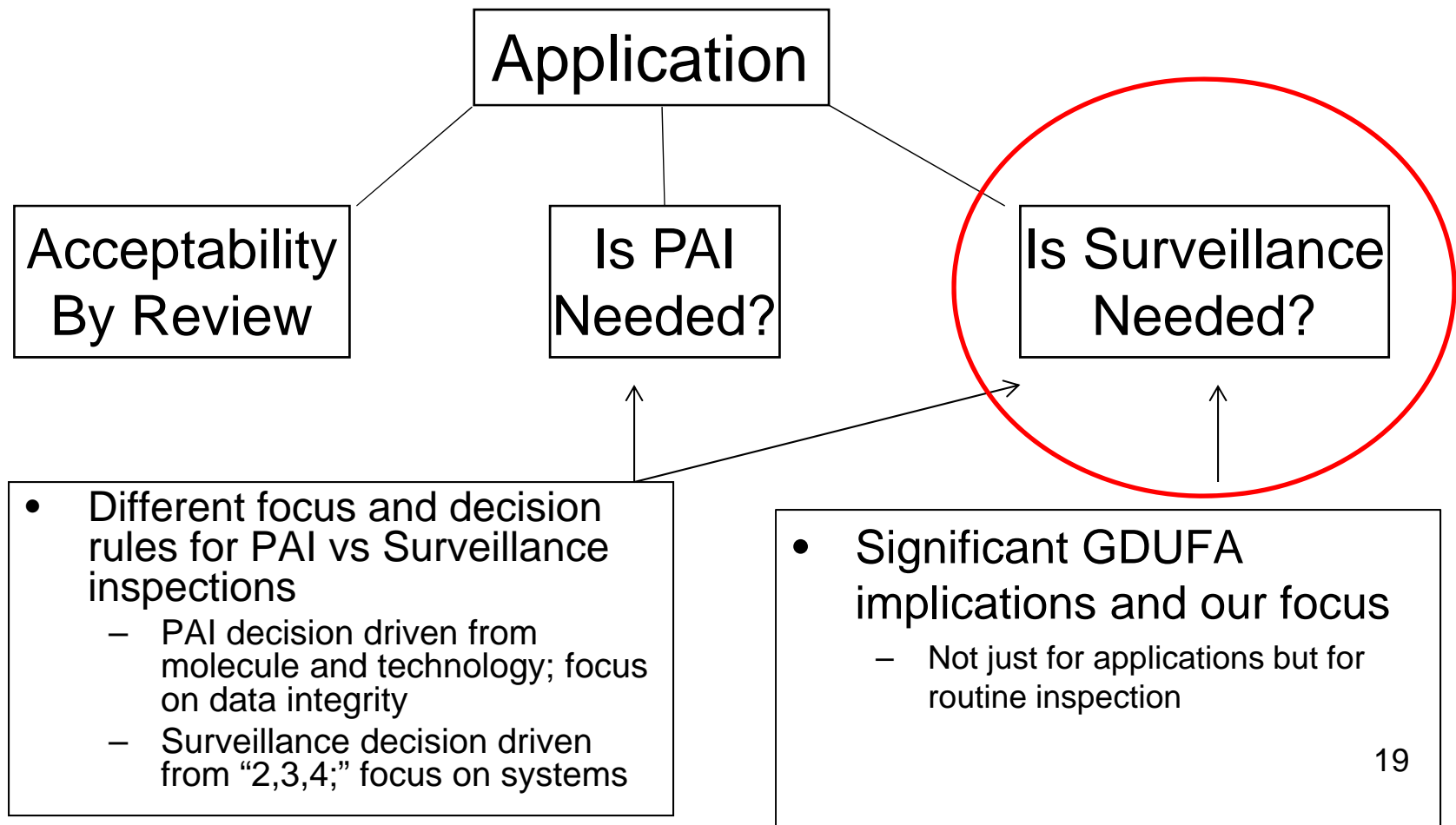




# **INTRODUCTION**



# For Application Decisions





# Biennial and 705

- Historic biennial requirement replaced with risk based approach detailed in FDASIA 705
- FDASIA section 705 - In establishing the risk-based schedule under paragraph (3), the Secretary shall inspect establishments according to the known safety risks of such establishments, which shall be based on the following factors:
  - “(A) The compliance history of the establishment.
  - “(B) The record, history, and nature of recalls linked to the establishment.
  - “(C) The inherent risk of the drug manufactured, prepared, propagated, compounded, or processed at the establishment.
  - “(D) The inspection frequency and history of the establishment, including whether the establishment has been inspected pursuant to section 704 within the last 4 years.
  - “(E) Whether the establishment has been inspected by a foreign government or an agency of a foreign government recognized under section 809.
  - “(F) Any other criteria deemed necessary and appropriate by the Secretary for purposes of allocating inspection resources.

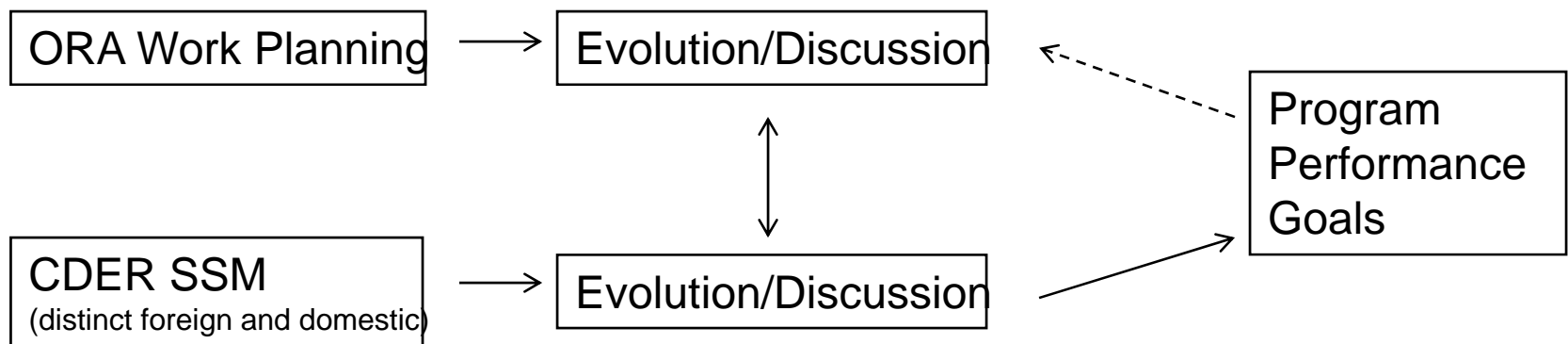


# How Can We Align?

- Comply with new legislation
- Achieve GDUFA Goals
- Measure success

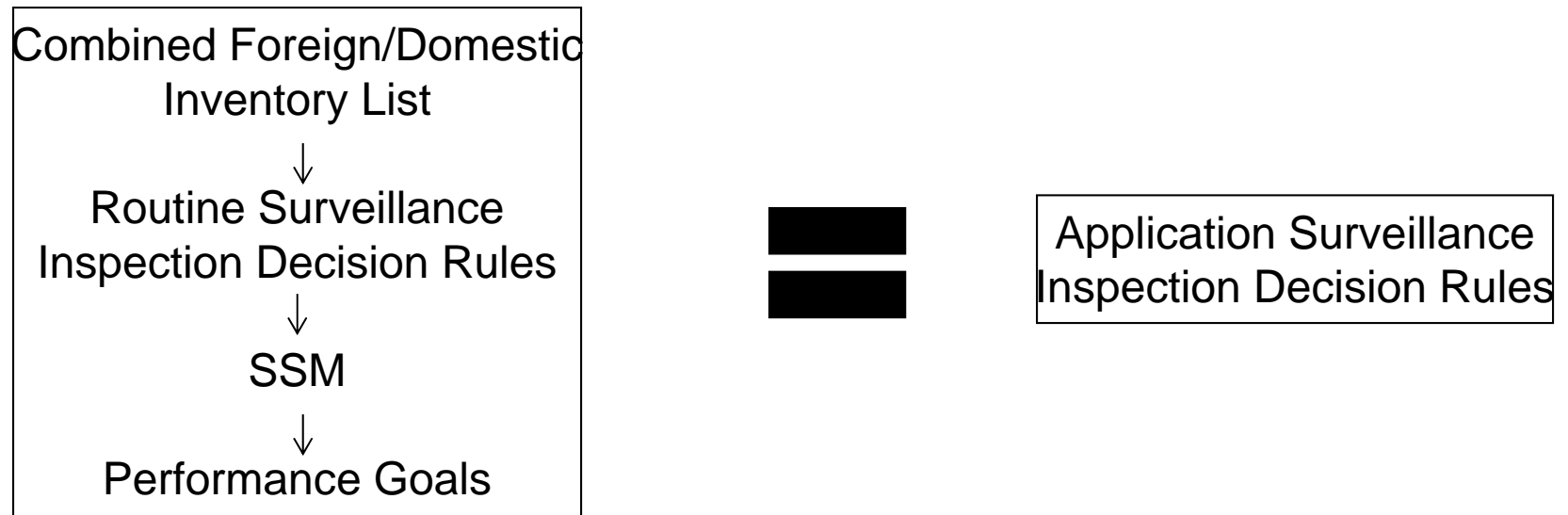
# Historic Surveillance Rules

- For ROUTINE surveillance program:



- For APPLICATION decisions largely “2,3,4” plus individual refinement to 3,4,5

– PAI rules distinct from that



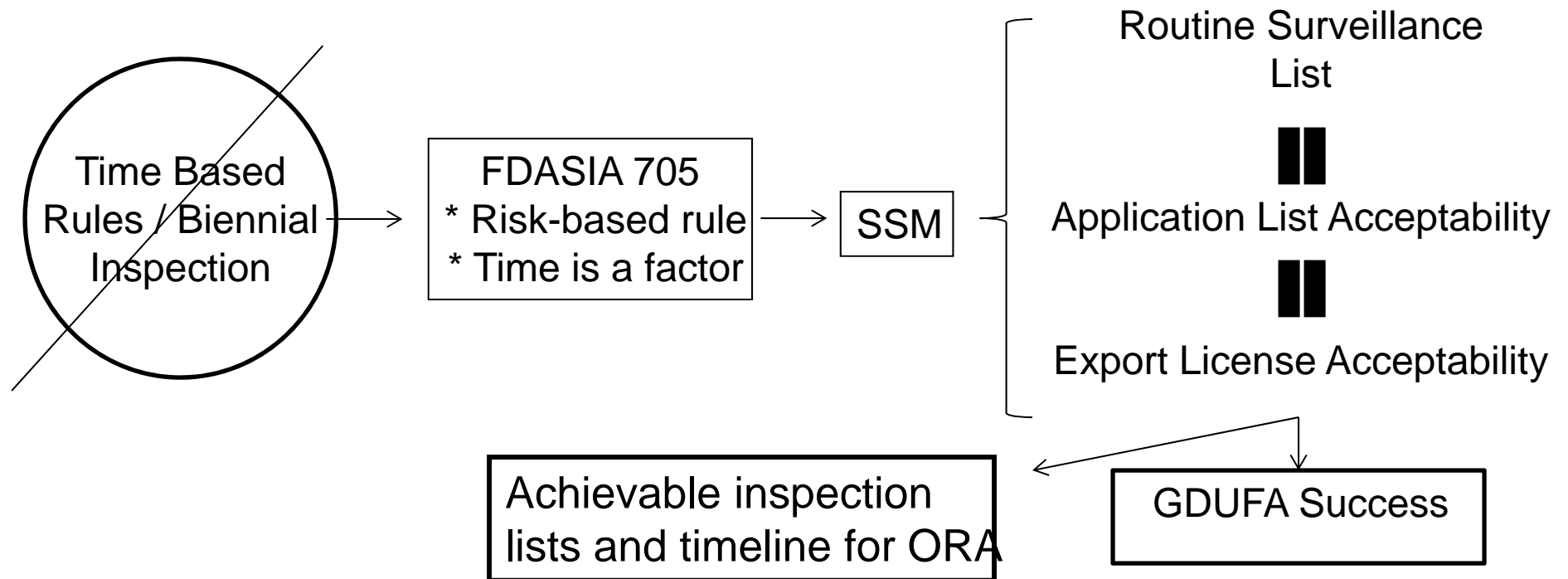




# GDUFA Inspection Goals: Measuring Success

- **Risk-based foreign and domestic frequency parity**
  - Propose to document success by following the output of the SSM
    - This addresses the “risk-adjusted” component
    - Is geography neutral ranking
  - Track progress against SSM list +/- 20%
- **Equal depth and rigor**
  - Document success by follow the NIPP protocol
  - This does not require measurement

# Summary





# QUESTIONS?



**Break Time**

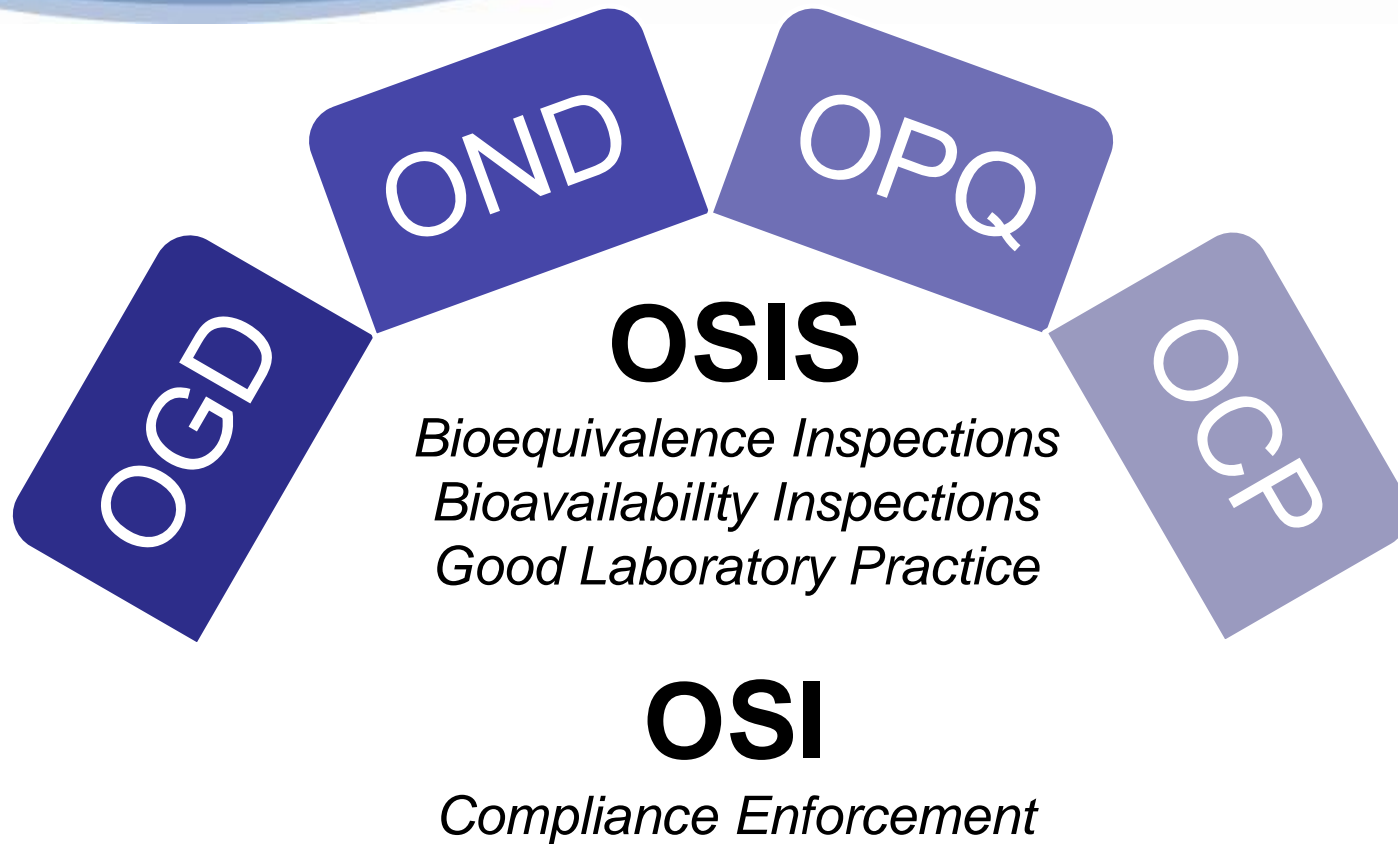




# Office of Scientific Investigations

- Sean Kassim
- John Kadavil





**OSIS = Office of Study Integrity & Surveillance**

**OSI = Office of Scientific Investigations**



**OSIS:**  
***SITE INSPECTIONS for***  
***BIOEQUIVALENCE/BIOAVAILABILITY STUDIES***

- **SURVEILLANCE INSPECTIONS**
  - **Clinical & analytical sites**
  - **More studies inspected at each site**



## **OSIS: *DETERMINATION for an INSPECTION***

- **Inspection history**
- **Date of last inspection**
- **New site**
- **Type of submission**
- **Study complexity**
- **For-Cause inspection requests**



## **OSIS: *EXPECTATIONS for COMPLIANCE***

- **Human subject protection, & clinical/analytical data integrity**
- **Documentation & record retention**
- **Protocols & SOPs**
- **Clinical sites: Inclusion/exclusion criteria, adverse events, sample collection (documented, consistent with protocol)**
- **Analytical sites (method validation & study sample analysis): Precision / accuracy / reproducibility of the method, stability**
- **Above expectations are not all-inclusive**



## OSIS: *ISSUES to AVOID*

- **Following issues are not all-inclusive**
- **Inadequate documentation**
- **Clinical site issues include not maintaining or improperly storing/selecting reserve samples, not maintaining the blinding code**
- **Analytical site issues include unjustified repeats, not reporting failed runs**



## OSIS: **REFERENCES to CONSIDER**

- **“Workshop/Conference Report — Quantitative Bioanalytical Methods Validation and Implementation: Best Practices for Chromatographic and Ligand Binding Assays”, *AAPS Journal*, Vol. 9, No. 1, February 2007**
- **“2011 White Paper on Recent Issues in Bioanalysis and Regulatory Findings from Audits and Inspections”, *Bioanalysis*, Vol. 3, No. 18, September 2011**
- **“2012 White Paper on Recent Issues in Bioanalysis and Alignment of Multiple Guidelines”, *Bioanalysis*, Vol. 4, No. 18, September 2012**

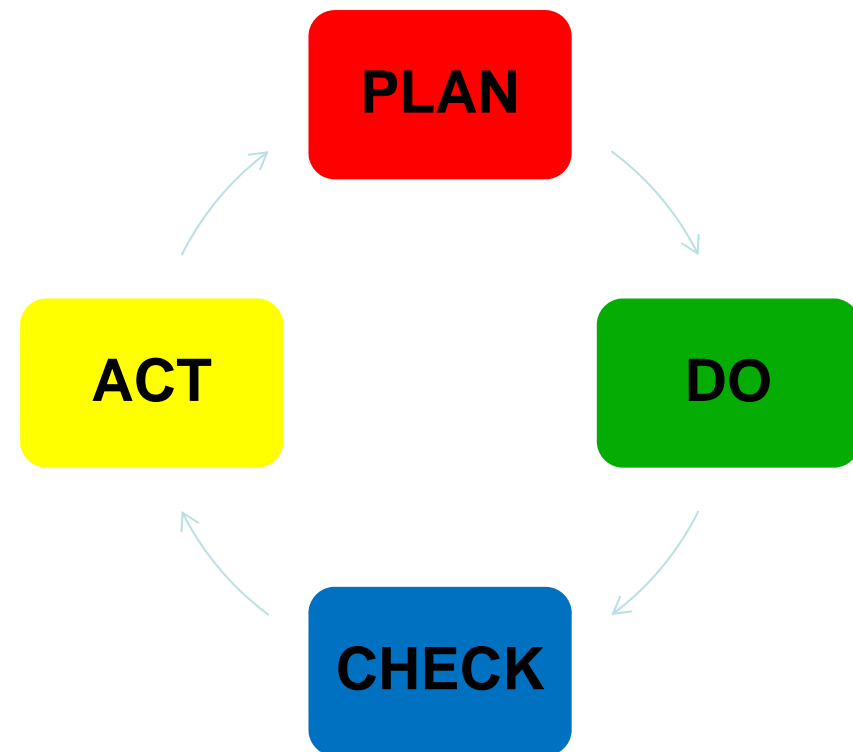


# FY14 Highlights & Update

- Kathleen Uhl

## SUCCESSFULLY IMPLEMENTING GDUFA ...BUILDING A QUALITY SYSTEM

- Hire & Train
- Process & Policy
- Inspectorate
- Informatics (“Platform”)
- Regulatory Excellence
- Agency Alignment







# GDUFA BACKLOG

- 2866 original ANDAs
  - 1873 PAS supplements
- } 90% get first ACTION by end of GDUFA YR 5 (9/30/2017)

## First Actions 10/1/2012 to 9/26/2014:

	<b>Original</b>	<b>PAS</b>	<b>Total</b>
Number with First Action**	1707	1362	3069
<b>% Complete</b>	60%	73%	<b>65%</b>
AP	447	779	1226
TA	105	3	108
CR with inspection	953	408	1361
RTR	70	2	72
WD	132	170	302

\*\* Numbers are tentative and do not reflect actual numbers for Congressional reporting purposes



# APPROVALS & ACTIONS

	PRE-GDUFA	GDUFA	
	FY2012	FY2013	FY2014*
ANDA approvals	517	440	409
PAS approvals	275	535	659
Tentative Approval (TA)	102	95	91
Complete Response (CR)	84	1251	1254
<b>TOTAL **</b>	<b>978</b>	<b>2226</b>	<b>2413</b>
DMF Completeness Assessment (CA)	0	1699	1706

\* Numbers are rounded and do not reflect actual numbers for Congressional reporting purposes

\*\* FDA will aspire to the extent possible to maintain levels of productivity at least similar to pre-GDUFA levels, while hiring and training incremental staff necessary to achieve the program performance goals, building necessary systems and implementing outlined program changes in years 1 and 2 of the program (GDUFA Commitment Letter, page 3)



# Actions 10/1/14 to 12/9/2014

<b>ANDA Approvals</b>	<b>80</b>
<b>ANDA Tentative Approval (TA)</b>	<b>18</b>
<b>ANDA Complete Response (CR)</b>	<b>148</b>
<b>ANDA Refuse to Receive (RTR)</b>	<b>14</b>
<b>Supplement Approvals</b>	<b>901</b>
<b>CBE 0/30 Status Denied</b>	<b>21</b>



# Submission Quality Follow-up

- GPhA



# Wrap-Up and Next Steps