

# ***Global Clinical Trials in Korea***



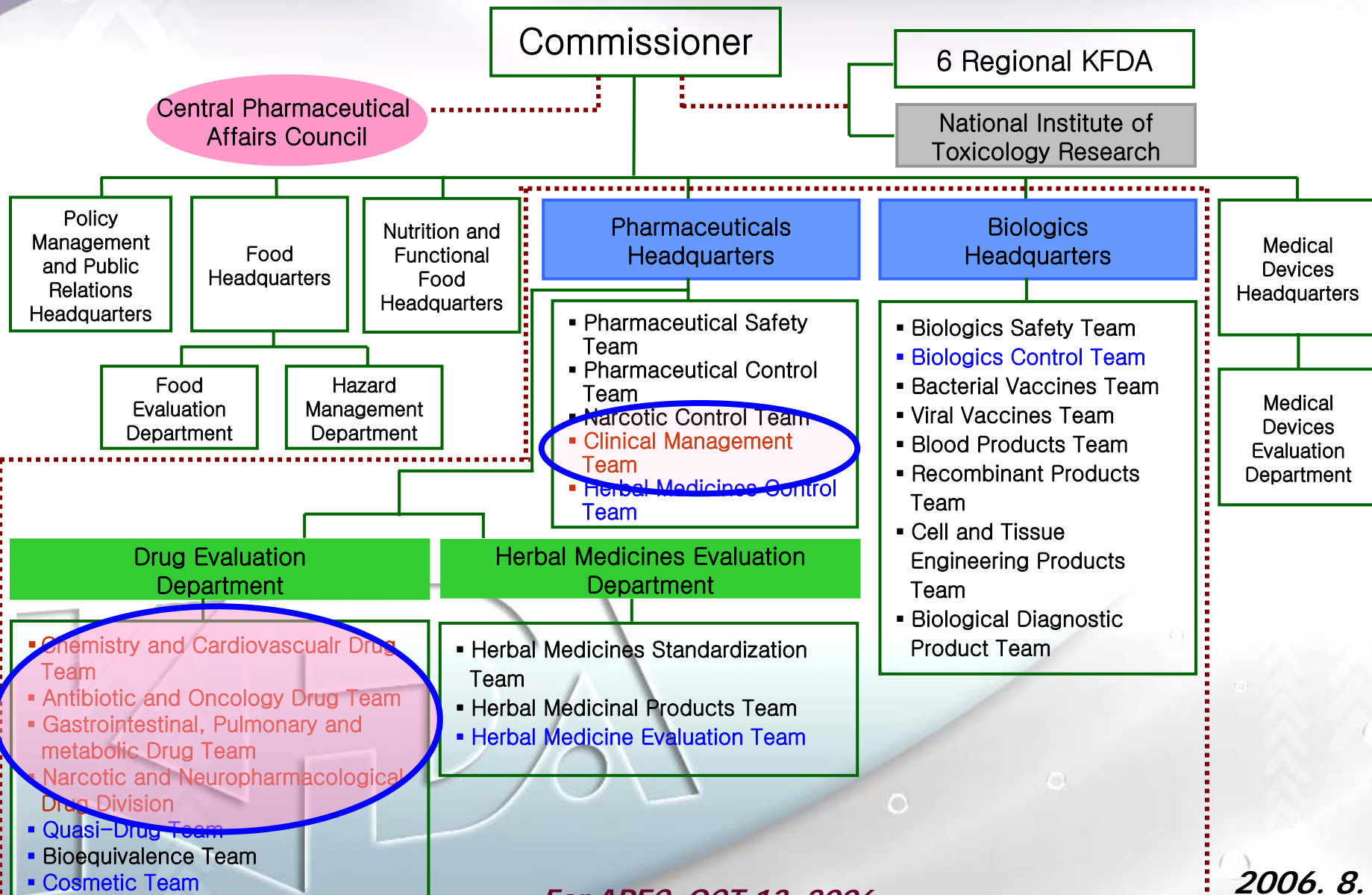
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*For APEC, OCT.13, 2006*

# *Contents*

- Regulatory changes relevant to Clinical Trials in Korea
- Current Status of Clinical Trials in Korea
- What we have learned
- Future plans

# Korea Food and Drug Administration



# *Major regulatory changes in Korea*

*since 1999*

- **Jan 2001 : Total revision of KGCP according to ICH GCP**
- **June 2001 : Adoption of the Bridging Concept**
  - Diverse bridging strategies were required
  - Effective since 2001 for NDA
- **Dec 2002 : Separation of IND from NDA**
  - Participation in international study enabled

# *Regulatory Hierarchy*

## *Regulations for Clinical Trials*



- **Pharmaceutical Affairs Law**

- **Enforcement regulation of  
Pharmaceutical Affairs Law**

- **Korea GCP Guideline**
- **CTA Guideline**
- **Guideline for Accredited  
Clinical Institutes**

# *Essential Elements in a Clinical Trials*

*defined in the Enforcement regulation of PAL*

- Protocol approved by KFDA
- Only at the accredited sites
- Qualified investigator
- Protect the right and safety of subjects
- Informed consent before enrollment of subjects
- Investigational drugs



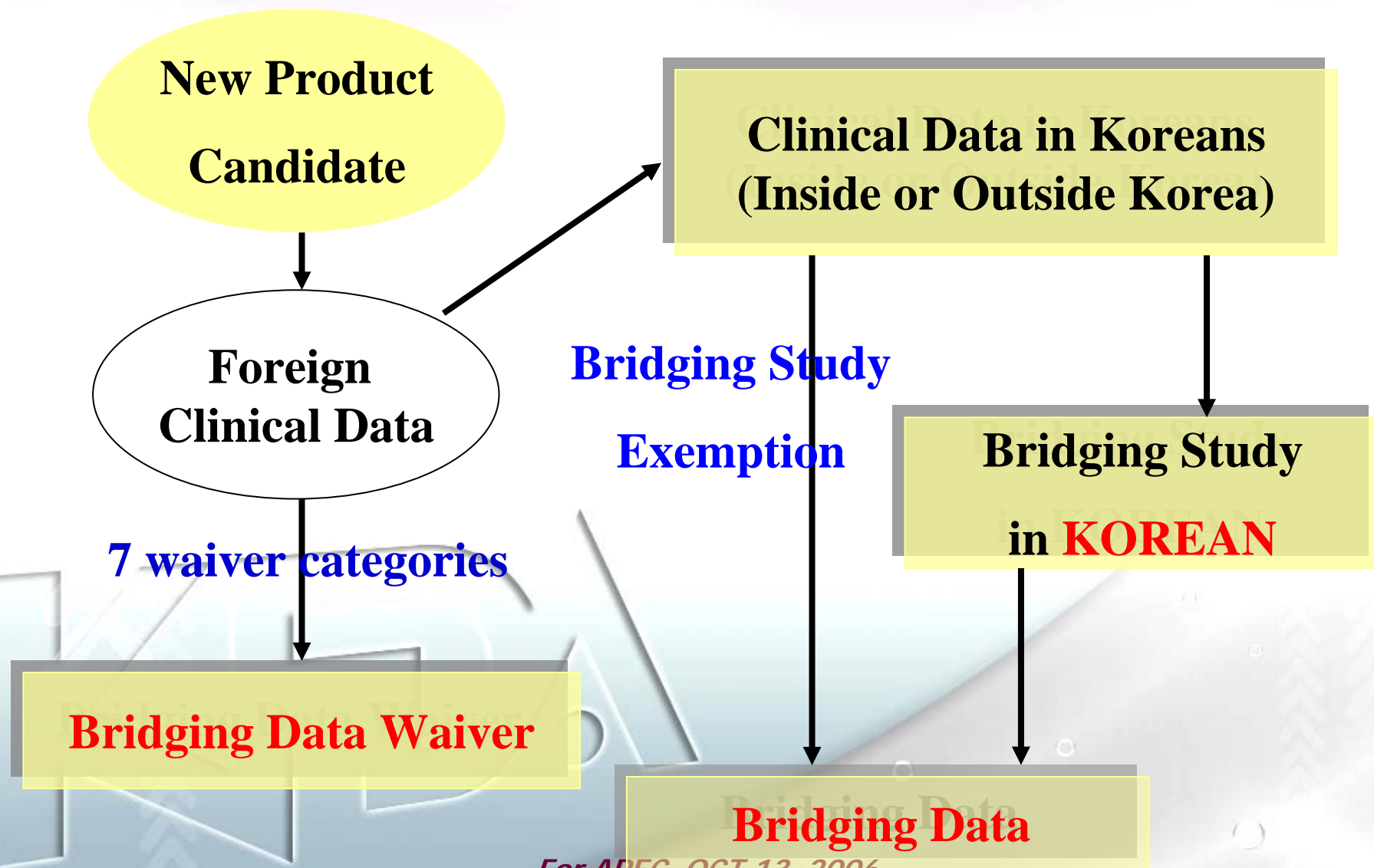
# History of KGCP

- Established as of December 28, 1987
- Enforced since October 1, 1995
- Revised as of January 4, 2000
- Legislation of IND system August, 2001
- Preparation of detailed regulations for IND system December, 2002



- Harmonize with ICH guideline E6
- Clarify the responsibility of investigator
- Reinforce the function of IRB
- Protect the rights and safety of subjects

# *Evaluation on Foreign Clinical Data and Bridging data in Korea*





# *Bridging Waiver Categories*

- Orphan drugs or drugs used as orphan drugs
- Drugs for AIDS
- Drugs for Life-threatening Disease
- Anticancer drugs of the followings :
  - ✓ No standard therapy
  - ✓ Therapy followed by a failure in a standard therapy
- Diagnostics or Radioactive drugs
- Topical drugs with no systemic effect
- No ethnic differences

# *Introduction of IND*

- Separation between developmental clinical stage and commercial product approval, such as IND and NDA
  - Effective since December 2002
  - Different submission requirement according to the drug developmental stage
  - Shortening of review period (30 days)
  - Encouragement to participate in multinational clinical trials
  - Activation of Pre-IND consultation programs
  - Flexible regulation on manufacturing/importing of clinical supplies
  - Alleviation of qualifications for IND applicant

# *Guidance of Accredited Clinical Institutes*

## ■ Purpose

- To assure the quality of clinical study and institutes

## ■ What are Essential to Accredited?

- Appropriate facilities and equipments
- Pool of personnel to support the clinical study
- Activities of IRB
- Education program of GCP
- Structures and activities to manage the clinical study

# ***Qualified Institutional Pool***

## *Number of accredited clinical institutes*

<b>Class</b>	<b>Phase I</b>	<b>Phase II</b>	<b>Phase III</b>
<b>Hospital</b>	<b>32</b>	<b>84</b>	<b>107</b>
<b>Dental Hospital</b>	<b>1</b>	<b>6</b>	<b>6</b>
<b>Total</b>	<b>33</b>	<b>90</b>	<b>113</b>

( by 2006. 8.)

# Clinical Trial Approval Process

## KFDA Process

**Pre-IND Consultation**

- Effective 2002.12.
- Optional Consultation

**Submission**

**Review**

- Protocol
- CMC
- Preclinical
- IB

**Approval**

**Approval  
timeline  
: 30 days**

**Contract  
With Hospital**

## IRB Process ;

Parallel review with KFDA process

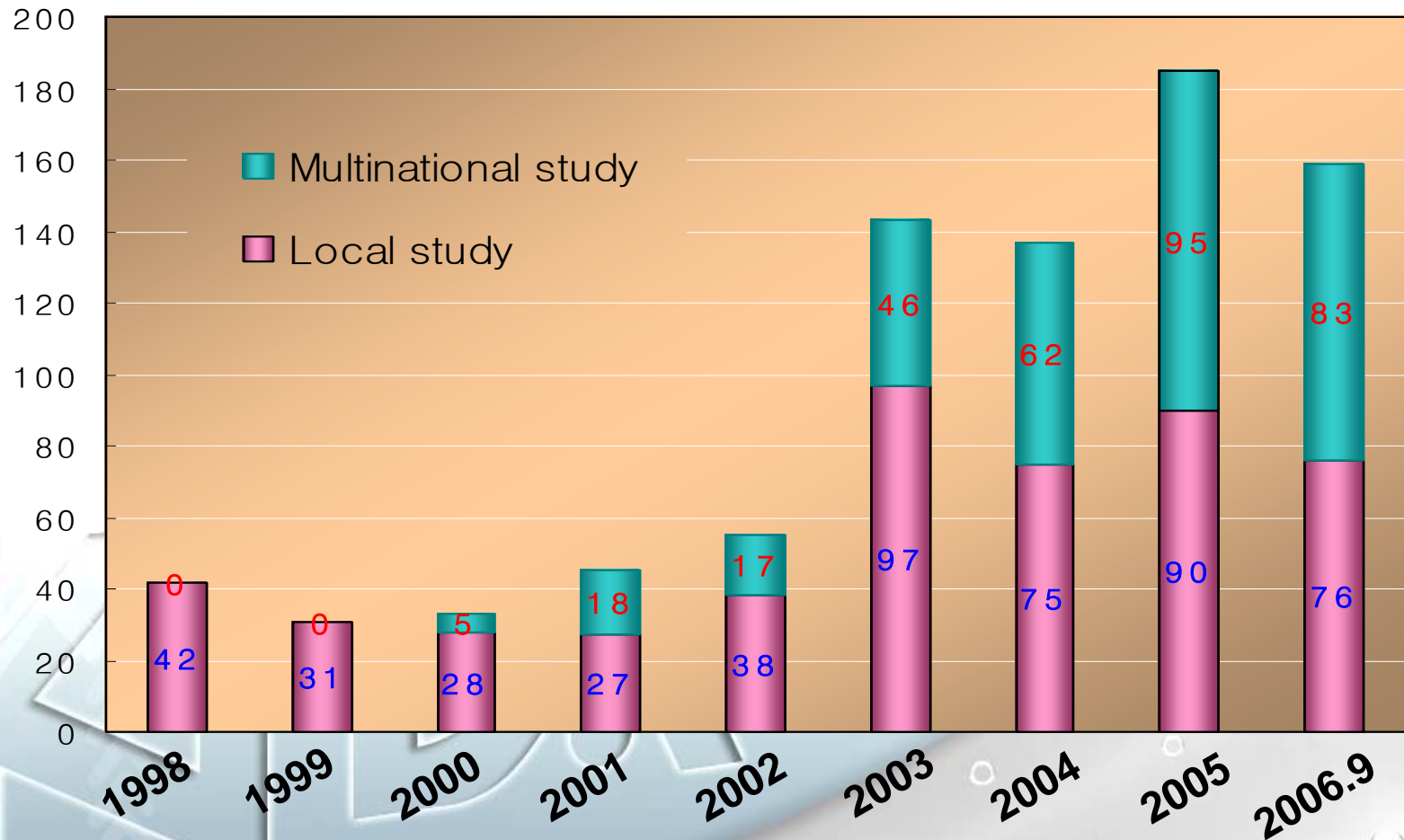
**Submission**

**Review**

**Approval**

- Protocol, ICF
- IB, CRF, CV

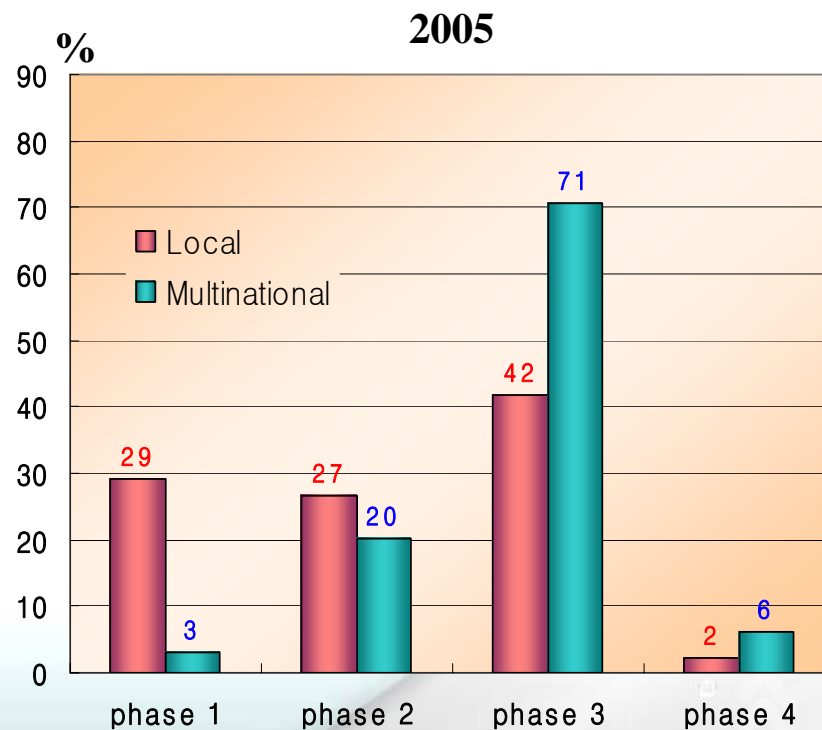
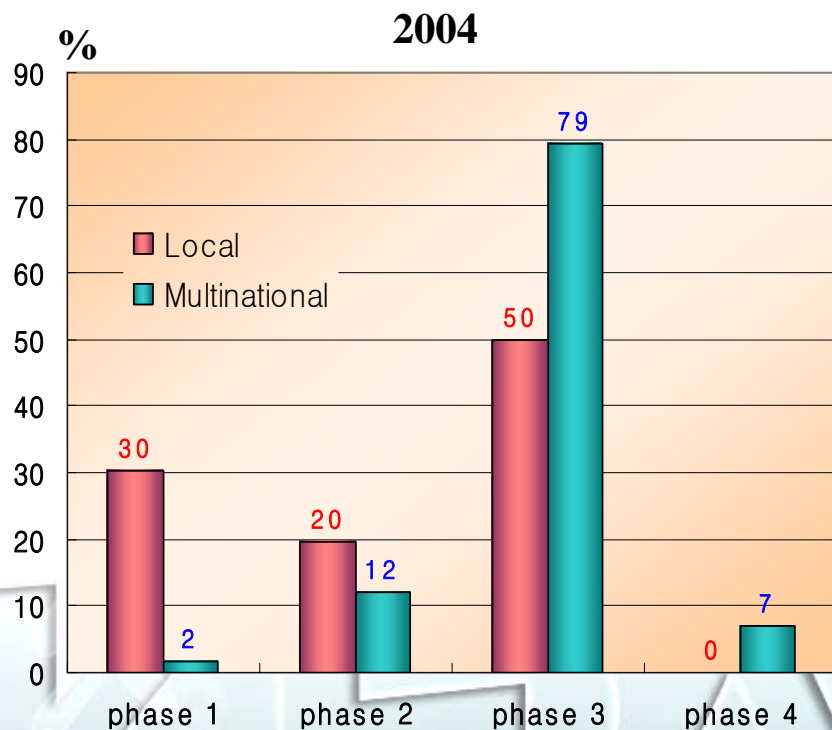
# Increased Number of Clinical Trials



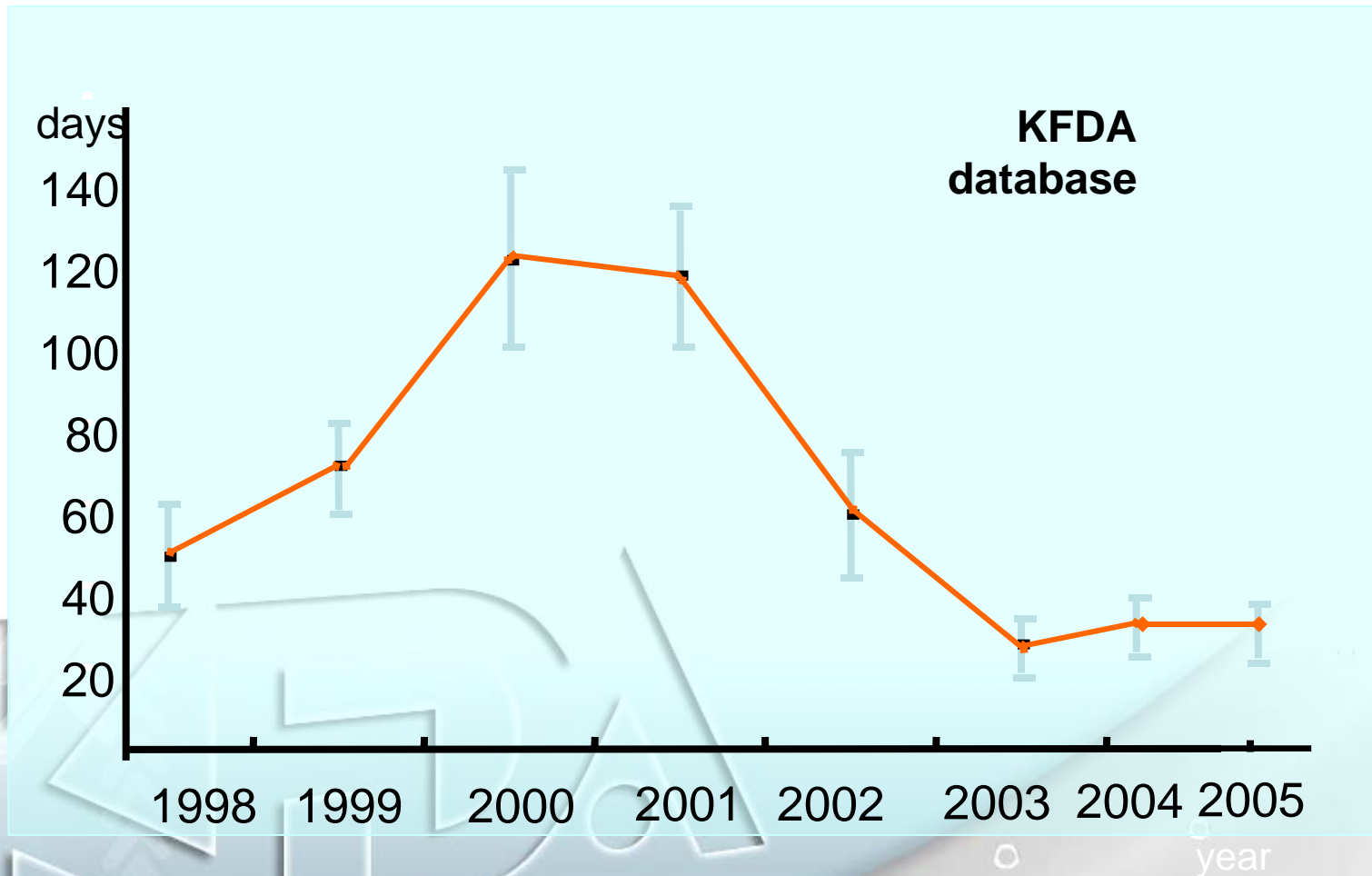
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# Status of Clinical Trials by Study Phase



# Course of CTA average Review Time



# *Reinforcement inspection system*

- Inspection for IRB management system
- Inspection for Investigator (on-going C/T)
- Systematic Inspection for clinical trials
  - ✓ Regular report on the status of on-going clinical trial
  - ✓ Notification on the completion of clinical trial
  - ✓ Sponsor, CRO, IRB, Investigator etc.
- Develop and disseminate check-list for Inspection to facilities

# Good Regulation Practice in Clinical Trials of KFDA

- ❖ Amendment of Regulations
- ❖ Good Review Practice
  - Assurance consistency, clarity, transparency
  - Promotion and application of Guidelines for Clinical Evaluation by indications
  - Development of Training program for the reviewers
  - Meeting within KFDA and sharing the review experiences
  - Activation the consultations by formal meetings with sponsors
- ❖ Disclosure of Review Summary
- ❖ Dialogues between customers and the KFDA
- ❖ Restructure KFDA to functional team for review quality and efficiency



# *Amendment of Regulations*

- Task Force Team
  - ✓ Regulator, experts from industries and academia
- Draft regulations
- Open to the public for hearing the opinion
- Evaluation for unnecessary restriction by regulatory reform committee
- Amendment of Regulations

## *What we have learned :*

- ❖ Qualification of Investigator
- ❖ Importance of IRB review
- ❖ Importance of SOP
- ❖ Need for Clinical Research Resources
- ❖ Need for Regulatory Service from Authorities
- ❖ Need for communication and harmonization with Foreign Authorities



# *Improvement in Clinical Study Institutes*

## **Hospital**

### Improvement in hardware

- Increased number of accredited hospital
- Major hospitals have specialized clinical trial centers and laboratories

## **IRB**

### Improvement in software

- IRBs are well-organized and well-operated in accordance with the KGCP requirements
- IRBs hold regular training as to KGCP and ICH-GCP for the investigators, pharmacists, CRC and other medical staffs

# *Improvement in Clinical Trials Staff*

## **Investigator**

### Improvement in qualification

- Increased opportunities to participate in global study since 2001 and good awareness of GCP
- Enthusiastic to join in early development stages of new drugs
- Proficiency in strict regulatory inspection

## **Clinical Research Coordinator**

### Improvement in qualification

- Increased number of research nurses with clinical expertise
- Major hospitals are able to utilize CRC pools in and out of the hospitals
- Well-organized and qualified annual trainings for CRCs are available

# *Future Plan*

- ❖ IRB management
- ❖ Resource management
  - Support the training course for investigators, CRC, CRA, IRB members
  - Develop the training program for reviewers
  - Keep the transparency of review process
- ❖ Supporting plan for Clinical Centers by MOHW
  - 9 Regional centers designated in 2004-2006
  - Support for Facilities, Operation systems, R&D etc.
  - \$ 0.5 ~ 1 million/center/yr for 5 years
- ❖ Revise the regulations to harmonize with international ICH guidelines
- ❖ Encouragement the industries to participate in multinational clinical trial

***Thank you very much***  
***for your attention !!***

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