Mid-term Plan of the Pharmaceuticals and Medical Devices Agency (PMDA)
*(Provisional Translation)

** This translation of the original Japanese text is for information purposes only (in the event of inconsistency, the Japanese text shall prevail).*

Notification No. 0331-44 (dated March 31, 2014) of
Pharmaceutical and Food Safety Bureau,
Ministry of Health, Labour and Welfare

To achieve the Mid-term Targets of the Pharmaceuticals and Medical Devices Agency assigned on March 7, 2014 by the Minister of Health, Labour and Welfare based on the provisions of Article 29, Paragraph 1 of the Act on General Rules for Incorporated Administrative Agency (Act No. 103, 1999), the Pharmaceuticals and Medical Devices Agency (PMDA) has developed the following Mid-term Plan based on the provisions of Article 30, Paragraph 1 of the same act.

March 7, 2014

Tatsuya Kondo, Chief Executive,
Pharmaceuticals and Medical Devices Agency

Development toward global PMDA based on the PMDA Philosophy

PMDA was established in April 2004, after several times of reorganization by integrating the services of review and post-marketing safety measures, and has its roots in the “Fund for Relief Services for Adverse Drug Reactions”, which was established following tragic pharmaceutical-induced sufferings caused by pharmaceuticals such as thalidomide and diseases such as subacute myelo-optical neuropathy (SMON). Based on this history, and in order to carry out its mission to promptly provide the public with more effective and safer pharmaceuticals and medical devices, PMDA has been dedicating itself to improve its services for review, post-marketing safety measures, and relief services for adverse health effects. Essential targets have been accomplished by accelerating reviews and enhancing post-marketing safety measures in its efforts during the first and second terms. PMDA will need to further strengthen and enhance its system to aim to be a world-class institution responsible for reviews and post-marketing safety measures, in order to equal the United States and Europe in the future.

PMDA will promote comprehensive risk management through “Safety Triangle”, a system based on three major services, which are the review, post-marketing safety measures for pharmaceuticals and medical devices, and relief services for adverse health effects, to secure safety and efficacy, based on the following organizational philosophy of action (PMDA Philosophy).

1) We pursue the development of medical science while performing our duty with greater transparency based on our mission to protect public health and the lives of our citizens.
2) We will be the bridge between the patients and their wishes for faster access to safer and more effective pharmaceuticals and medical devices.
3) We make science-based judgments on quality, safety, and efficacy of medical products by training personnel to have the latest technical knowledge and wisdom in their field of expertise.
4) We play an active role within the global community by promoting global harmonization.
5) We conduct services in a way that is trusted by the public based on our experiences from the past.

In promoting its risk management, PMDA will especially make efforts to develop an environment that enables judgments from an ethical perspective based on regulatory science, and to proactively contribute in improving public health and safety. PMDA will also promote cooperation with the United States, Europe, and Asian countries, etc., and approach issues from a global perspective in order to further improve health of people not only in Japan but also in the world.

Based on the Japan Revitalization Strategy (adopted by the Cabinet on June 14, 2013), the Healthcare and Medical Strategy (an agreement among the Chief Cabinet Secretary, Minister of Health, Labour and Welfare, and Minister of Internal Affairs and Communications, etc., on June 14, 2013), the Act to Ensure Quality, Efficacy, and Safety of Pharmaceuticals and Medical Devices (Act No. 145, 1960; hereinafter referred to as the “Pharmaceutical and Medical Devices Act”), and the Act to Ensure Safety of Regenerative Medicine (Act No. 85, 2013; hereinafter referred to as the “The Act of the Safety of Regenerative Medicine”), etc., PMDA will further accelerate and improve the review services in order to promote to be the first in the world in practical use of innovative pharmaceuticals, medical devices, and regenerative medical products, while taking post-marketing safety measures, such as ensuring quality of post-marketing products and preventing occurrence and spread of health hazards.

In order to achieve these goals, the review and post-marketing safety measures in this term shall be improved by further enhancing the system and by introducing new review methods, etc., while pursuing elimination of review lag. Efforts will be made to have the public be aware of the relief services to ensure utilization of them. With these targets, the Third Mid-term Plan is to be established and implemented as follows:

Part 1

Measures to be taken in Order to Achieve Targets Related to Matters Regarding Improvement in Operation Management of the Overall Corporation and Matters Regarding Improvement in the Quality of Services and Other Operations Rendered to the Public

The following are the measures to be taken in order to achieve targets regarding improvement in efficiency of operations, as stipulated in Article 30, Paragraph 2, Item 1 of the Act on General Rules

for Incorporated Administrative Agency (Act No. 103, 1999; hereinafter referred to as the “Act on General Rules”), and to achieve targets regarding improvement in the quality of services and other operations rendered to the public, as stipulated in Article 30, Paragraph 2, Item 2 of the Act on General Rules.

1) Efficient and Flexible Management of Operations

a) Manage transparent and appropriate operations through thorough compliance risk management

- Clarify the operational targets and responsibilities of each division, and identify and resolve problems by managing the operational progress on a daily basis.
- Develop and appropriately utilize internal control processes to achieve efficacy and efficiency of operations, reliability of financial reports, compliance with acts related to operational activities, and maintenance of assets, and proactively disclose the details of those measures that were taken.
- Gather opinions on operational performance for each fiscal year and utilize them in managing the operations.
- Hold advisory councils as an opportunity to exchange opinions with experts from various fields, and seek proposals and improvement measures for operations and the management system, in order to increase efficiency as well as to ensure fairness and transparency of the operations.
- Efficiently manage the operations by flexibly allocating personnel according to situations and by effectively utilizing external experts.
- Utilize manuals for emergency management appropriately by reviewing them from time to time in response to particular situations, in order to thoroughly manage risks in the management of operations.

- Develop a system necessary to support the operations of the review, post-marketing safety measures, and relief service in order to respond to the expansion of the organization due to system reinforcement, and to enable reviewers to concentrate on technical and specialized operations.

b) Standardize operation procedures

- Standardize the procedures of each operation so that they can be conducted appropriately, which will enable utilization of non-regular staff, and as a result limit the number of regular staff members.

c) Develop materials and information databases

- Utilize an electronic format for documentary information whenever possible, and promote the development of databases that enable the information to be systematically organized and stored, as well as to enable material and information to be collected and analyzed.

d) Optimize the system to improve efficiency of operations

- Continue operations based on the basic policies of the Pharmaceuticals and Medical Devices Agency (hereinafter referred to as the “Agency”) for developing the system environment.
- Based on the Optimization Plan for Operations and Systems that was established at the end of FY 2007, a system shall be developed to promote information sharing in the operations of review, post-marketing safety measures, and relief services for adverse health effects, and further approaches shall be promoted for the optimization of operations and systems, which was revised in FY 2012 for the purpose of enhancing the accounting and personnel management functions to respond to changes such as increase in personnel. Expenses for system development and improvement shall be invested systematically and efficiently by comprehensively judging at the Committee on Investment in Information Systems from such perspectives as appropriateness, cost-effectiveness, and technical difficulty.
- Along with the Optimization Plan for Operations and Systems, increase efficiency of operations by revising the information system according to the actual status of the operations in each division.

2) Rationalize Operation Management

a) Retrench general administrative expenses (management divisions)

- By continuously improving the operation and increasing efficiency in management, the following reduction in the budget for the Mid-term Plan is expected to have been achieved by the end of the effective period for Mid-term Targets, regarding general administrative expenses (excluding personnel expenses) in which the administrative subsidies are to be applied.
- No less than 15% as compared to FY 2014
- Appropriately utilize consolidation and outsourcing for management operations such as payroll accounting, fund balancing, and calculation of travel expenses.

b) Retrench operating expenses for efficient operation management

- By increasing efficiency in operations such as promoting computerization, the following reduction in the budget for the Mid-term Plan is expected to have been made by the end of the effective period for Mid-term Targets, regarding operating expenses (excluding personnel expenses, and single fiscal-year expenses that were paid for the establishment of operations) in which the administrative subsidies are to be applied.
- No less than 5% as compared to FY 2014
- Appropriately utilize consolidation and outsourcing for management operations such as payroll accounting, fund balancing, and calculation of travel expenses.

c) Calculate administrative subsidies
- Yearly administrative subsidies are to be rigorously calculated with consideration of its debt balance.

d) Stable collection of contributions
- Have the marketing authorization holders (MAHs) of pharmaceuticals and medical devices understand the significance of the contribution system for adverse drug reaction (ADR) fund, relief for infections, and contributions to post-marketing safety measures, in order for contributions to be appropriately declared and paid, and to ensure stable collection of each contribution.
- The collection rate for the contributions of ADR fund, relief for infections, and contributions to post-marketing safety measures shall be no less than 99%.

e) Secure contract competitiveness and transparency
- Contracts shall be concluded through open competitive bidding as a principle, and the following approaches shall be made.
- Fully secure competitiveness and transparency even when contracts are not concluded by general competitive bidding such as planning competition and invitation to bids.
- To conduct biddings and conclusion of contracts appropriately, contracts should be pre-inspected, etc., by the Contract Review Committee and thoroughly checked by auditor and accounting auditor.

f) Provide and disseminate genuinely useful information from the public perspective
- Take the following measures to steadily implement the PMDA Public Relations Strategic Plan.
  1. Enhance dissemination of information by improving the website so that it can be easily understood in order for the public and patients to be able to readily access information regarding safety and efficacy of pharmaceuticals and medical devices.
  2. Conduct public relations using newsletters related to PMDA.
  3. Provide and publish information regarding PMDA in television and magazines.
  4. Create newsletters in English and disseminate information to Foreign Correspondents' Club of Japan and to foreign media.
  5. Enhance and improve the system for responding to consultations and complaints from the public.
- Enhance dissemination of information to the general public by disclosing the details of PMDA's services and achievements when appropriate, through various media including its website in order for the public to better understand the safety of pharmaceuticals and medical devices, as well as the overall services of PMDA.
- Conduct external audit in accordance with the incorporated administrative agencies system, together with systematic internal audit and accounting audit, and disclose those results.

- Disclose PMDA's overall financial standing as well as its financial standing for each account and segment in order to ensure transparency of the expenditures.

g) Analyze issues of the operation system
- Quantitatively analyze and examine issues of each division regarding the current operation processes as well as their systems as much as possible by the midpoint of the effective period for the Third Mid-term Targets, based on the understanding of the past operating performances of the relief service, review, and safety divisions, and those processes and systems shall be revised if necessary in order to confirm whether the personnel are allocated appropriately for the system enhancement and whether the operations are conducted efficiently.

h) Considerations related to financial base
- Consider a financial base that is appropriate for the role of PMDA, and take necessary measures based on the current situation where PMDA's revenue such as user fees from companies accounts for the majority of the financial base of PMDA, because the review and safety services of pharmaceuticals and medical devices greatly influence the life and safety of the public.

Part 2
Measures to be taken in Order to Achieve Targets Related to Matters Regarding Improvement in Operation Management of Each Division and Matters Regarding Improvement in the Quality of Services and Other Operations Rendered to the Public

- Make all efforts to promote the safety triangle of review, safety, and relief as a mission of PMDA -

1. Relief Fund Services for Adverse Health Effects

The Relief System for ADR and the Relief System for Infections Acquired through Biological Products (hereinafter referred to as the "relief systems") are systems unique to Japan, which, along with reviews and post-marketing safety measures, are responsible for being part of the safety triangle. The following measures shall be taken for the necessity of having the relief systems to be definitely utilized through consultations with physicians and pharmacists in case of emergencies of health damage due to ADR of pharmaceuticals or regenerative medical products, or due to infections through biological products or regenerative medical products, as well as for the necessity of continuing appropriate operations, such as prompt processing of relief benefit claims.

1) Enhance Public Relations and Dissemination of Information Regarding the Relief Systems

a) Proactively develop public relations in order for the relief systems to be definitely utilized.
- Consider and proactively conduct effective public relations regarding the relief systems.

- Continue informing more of the public regarding the relief systems by utilizing such media as websites and newspapers.
- Current measures, including dissemination of thorough information with the cooperation of relevant organizations, etc., shall be promoted, and the following measures shall be focused in order to increase the awareness by the end of the effective period for the Mid-term Targets, in order to further gain awareness and understanding from the public, health care professionals and MAHs, etc., regarding the relief systems. Surveys shall be conducted every fiscal year to find out the degree of their awareness, and those results shall be examined.
  1. Public relations activities shall be proactively conducted by utilizing the opportunities of training at medical institutions for health care professionals and opportunities of informing pharmacists regarding the systems, in order to properly make patients know the existence of relief systems by healthcare professionals including physicians and pharmacists, in case health damage occurs due to ADR or infections through biological products.
  2. Develop public relations nationwide through professional medical organizations.
  3. Conduct public relations for the general public using such media as websites, television, and newspapers.
  4. Develop effective public relations through other media aside from the above that is appropriate for promoting the relief systems.

b) Announce cases of benefit payment
- Further understanding of the current situation of benefit payment and dissemination of the relief systems to the public, healthcare professionals shall be promoted, by announcing cases of benefit payment and operational statistics on the website.

c) Disseminate information regarding the relief systems
- Review the methods of disseminating information from the perspective of making it user-friendly and easy to be understood, by revising the pamphlets and claim guidelines, by improving the content of information disseminated through the Internet, etc.

d) Ensure an efficient system for the consultation services
- Allocate regular staff for the consultation services, and ensure a system where specialized consultations can be received regarding use of the relief systems as well as the procedures to process benefit payments for ADR and infections.

2) Accelerate the Processing of Relief Benefit Claims

a) Investigate and organize the facts of the claim
- In order for relief benefit claims to be promptly processed, the facts of the claims shall be investigated and organized when received, before requesting the Minister of Health, Labour and Welfare for medical and pharmaceutical judgment.

b) Promptly process within the standard administrative processing time

- The target administrative processing time from receipt of the claim until the decision of payment (within 6 months, more than 60%) shall be maintained even in situations where the number of claims is expected to increase, by taking appropriate measures such as by enhancing the system for receiving and investigating claims, further enhancing and improving instructions for filling medical certificates, and accurately managing the time to use a system.
- Administrative processing time shall exclude the period when processing could not be continued because additional or supplementary documents and investigations of the claimant or medical institutions were necessary in order to make medical and pharmaceutical judgments.

c) Promote efficient operation with the use of databases

- Data of information related to the operation of relief services of ADR, especially information on the causative pharmaceutical, etc., and health damages shall be accumulated on the database, and those accumulated data shall be statistically processed so that they can be analyzed from various perspectives, in order to operate a system that enables prompt and efficient payment of relief benefits using those results.
- Upgrade the systems, develop operation support tools, and enhance systems if necessary, in order to respond to increases in relief benefit claims and to operational situations accordingly.

3) Promote Cooperation with the Review Divisions and the Safety Divisions

- Cooperate with each division of PMDA and appropriately disseminate information, especially regarding cases of relief payment to the divisions of review and the post-marketing safety measures, with attention to ensuring protection of personal information.

4) Implement Appropriate Health and Welfare Services

- Based on the results of a survey that investigated the current situation of health damages due to ADR, investigative research shall be continued in order to obtain information for considering measures to improve QOL of patients suffering from serious and rare health damages.
- Steadily conduct consultations regarding mental issues.

5) Provide Healthcare Allowances for SMON Patients and HIV-positive Patients Infected with Blood Products Appropriately

- In providing healthcare allowances to SMON patients and HIV-positive patients infected with blood products, appropriate services shall be implemented based on the details of the consignment contract, with special attention to ensuring protection of personal information.

6) Pay Benefits to Assist Individuals Affected by Hepatitis C through Specified Fibrinogen Products and Specified Blood Coagulation Factor IX Products Contaminated by Hepatitis C virus Appropriately

- In providing benefits to assist individuals affected by hepatitis C through specified fibrinogen products and specified blood coagulation factor IX products contaminated by hepatitis C virus, appropriate operations shall be implemented, with special attention to ensure protection of personal information.

2. Reviews and Related Services

Based on the Japan Revitalization Strategy and the Healthcare and Medical Strategy, as well as the Pharmaceutical and Medical Devices Act and the Regenerative Medicine Act that were revised as a result of the Act for Partial Revision of the Pharmaceutical Affairs Act, (Act No. 84, 2013), reviewing speed shall be accelerated, aiming to reduce review lag*, and the quality of the reviews shall be improved through approaches according to the characteristic of each pharmaceutical, medical device, and regenerative medical product (hereinafter, including cellular and tissue-based product and gene therapy product). Pharmaceutical Affairs Consultation on R&D Strategy shall also be enhanced as a support to eliminate the development lag*.

In order to achieve these targets, PMDA's financial resources shall be utilized in enhancing the system.

* Drug lag and device lag are defined as delay of approvals of pharmaceuticals and medical devices, respectively, from United States in Japan. Drug lag or device lag can be divided into review lag, which are differences in review time (time from application to approval) between the United States and Japan, and development lag, which are the differences in time at which the companies submit application to the regulatory agencies of the United States and Japan (from the Japan Revitalization Strategy [approved by the Cabinet on June 14, 2013]). The overall lag shall be eliminated by eliminating the review lag and development lag.

Following measures shall be promoted in order for the above mentioned measures to be implemented appropriately and smoothly, while maintaining cooperation with MHLW.

Note: The organization responsible for implementing the following measures is PMDA unless otherwise stated as MHLW, or other corporations.

1) Make pharmaceuticals, medical devices, etc. accessible by the public more quickly

New pharmaceuticals

a) Conduct accurate and prompt reviews

- Enhance system in order to improve quality of the reviews by utilizing the Science Board and by enhancing training, with aiming to achieve elimination of review lag.
- Steadily implement the project management system in order to improve the progress management function of the review services and to increase transparency of the progress and outlook of reviews for applicants as well.
- Continue considering the efficiency and transparency of the review services and processes through exchange of opinions with the industry.
- Strengthen cooperation with academia and healthcare professionals in order to conduct consultations and reviews based on the latest medical care trends and needs, and to promote cooperation toward appropriate use of pharmaceuticals.
- Proactively support and cooperate in discussions and in requesting development for unapproved pharmaceuticals etc., at the Study Group on Unapproved and Off-label Pharmaceuticals of High Medical Need organized by MHLW.
- Continue making approaches to reduce unapproved pharmaceuticals and off-label pharmaceuticals by enhancing database for the current status of pharmaceutical approval in major overseas nations.
- Secure consistency between clinical trial consultations and reviews by maintaining cooperation between these two services, and flexibly organize groups to conduct accurate and prompt reviews and consultations.
- Conduct accurate and prompt re-examinations for new pharmaceuticals. Take appropriate measures for re-evaluations as well.
- Promote establishment of standards regarding quality of pharmaceuticals, such as the Japanese Pharmacopoeia established by MHLW, in order to conduct accurate and prompt reviews.

b) Introduce new methods for reviews and others

- Systematically enhance the system for prior assessment consultations and respond to all consultations that were requested regarding superior pharmaceuticals of high medical need by the FY 2018.
- Develop a system in PMDA that enables to accept electronic submission of clinical study data regarding new pharmaceutical applications after FY 2016.
- Improve the quality of reviews and consultations by conducting PMDA-initiated analyses using the clinical trial data and by giving indications and suggestions based on those analyses results. Consider a system that enables cross-sectional analyses of products using advanced methods of analysis and prediction evaluation, and further improve reviews and consultation by establishing guidelines, etc., and increase efficiency of pharmaceutical development.

c) Targets to aim for eliminating review lag in pharmaceuticals

- Regarding pharmaceuticals which new pharmaceutical applications were submitted after April 1, 2004, the percentile of the standard total review time from application to approval for the items

approved in respective fiscal years, shall rise in stages as shown in the following table. The review time of 9 months for priority review products and 12 months for standard review products shall be achieved at 80th percentile by FY 2018.
The review services shall be enhanced to achieve these targets.

1. Review time for new pharmaceuticals (priority review products)

Fiscal year	Percentile	Review time
FY 2014	60%	9 months
FY 2015	60%	9 months
FY 2016	70%	9 months
FY 2017	70%	9 months
FY 2018	80%	9 months

2. Review time for new pharmaceuticals (standard review products)

Fiscal year	Percentile	Review time
FY 2014	60%	12 months
FY 2015	70%	12 months
FY 2016	70%	12 months
FY 2017	80%	12 months
FY 2018	80%	12 months

- Regarding re-examination of new pharmaceuticals, the review time shall be reduced in stages regarding pharmaceuticals that are to be submitted for re-examination after FY 2014, with review results issued in respective fiscal years, and the total review time of 18 months shall be achieved at 50th percentile (median) by FY 2018. Products re-examined before FY 2014 shall also be sequentially processed.
- Regarding re-evaluations, evaluation and confirmation shall be conducted without delay by setting the appropriate standard review time to each pharmaceutical, based on the points of the application.

d) Promote multi-regional clinical trials

- In order to promote multi-regional clinical trials, appropriately respond to requests for consultations related to multi-regional clinical trials, based on the guidance regarding study design, etc.
- In order to promote multi-regional clinical trials especially in Asian countries, PMDA shall support the approaches of the Multi Regional Clinical Trial Roadmap led by MHLW at APEC RHSC, and develop an environment for conducting multi-regional clinical trials in Asian countries.

- PMDA shall promote multi-regional clinical trials in clinical trial consultations, etc., including information sharing with foreign regulatory agencies so as to increase the rate of conducting multi-regional clinical trials that Japan will participate amongst foreign clinical trials by FY 2018, to eliminate pharmaceutical development lag.

e) Conduct smooth clinical trial consultations, etc.
- Priority consultations and advance confirmation of application documents shall be continued, in order to increase opportunities to provide guidance and consultations before applications.
- Firmly maintain the time it currently takes from request for clinical trial consultation of new pharmaceuticals to direct consultation (about 2 months), while at any time accepting requests for priority clinical trial consultations so as to accelerate procedures for clinical trial consultations on new pharmaceuticals.
- Regarding categories such as prior assessment consultations, Pharmaceutical Affairs Consultation on R&D Strategy, and simple consultations, categories shall be added or altered according to the needs of the applicants by exchanging opinions with relevant industries and by analyzing the content of consultations, so as to enhance clinical trial consultations.

f) Promote evaluation of new technologies, etc.
- For pharmaceuticals developed using new technologies, concepts regarding development and evaluation shall be established in cross-sectional projects, along with guidelines if necessary, by using the knowledge of the Science Board and opinions of external experts.
- PMDA shall increase its scientific knowledge in order to lead the development of pharmaceuticals using latest technologies such as iPS cells.
- Cooperate with MHLW in establishing guidelines for evaluating products using the latest technologies, and proactively disclose the points to consider for evaluations.
- For preliminary reviews regarding the Act Concerning the Conservation and Sustainable Use of Biological Diversity through Regulations on the Use of Living Modified Organisms (hereinafter referred to as the “Cartagena Act”), the regulatory review time shall be 6 months for approval of first-class use and 2 months for confirmation of second-class use, with a target of achieving 50th percentile (median) for each class.
- Enhance the Pharmaceutical Affairs Consultation on R&D Strategy by conducting consultations where suggestions can be made on development processes (roadmap) as well as confirmatory trial protocols, and by conducting consultations for pharmaceutical companies on developmental strategies.

Generic drugs, etc.

The following measures shall be taken to promote wide use of generic drugs, etc.

a) Conduct accurate and prompt reviews

1. Establish a new office for generic drugs, etc.

- Enhance and accelerate reviews by appropriately increasing and allocating members for the generic drug, etc. group and by establishing a new office.

2. Ensure efficient and transparent reviews

- Strengthen cooperation with academia and healthcare professionals, etc. to conduct consultations and reviews based on the latest medical care trends and needs, and to promote cooperation toward appropriate use of pharmaceuticals.
- Promote establishment of standards regarding quality of pharmaceuticals, etc., such as the Japanese Pharmacopoeia, etc., established by MHLW, in order to conduct accurate and prompt reviews.
- Recommend application by CTD/eCTD format in order to increase efficiency in reviews.
- Ensure transparency of the reviews by preparing and disclosing review reports on new generic drugs.
- Establish guidelines for bioequivalence testing in order to respond to the increased complexity of bioequivalence assessments and the diverse pharmaceutical products that are being developed.
- Cooperate with relevant offices to take appropriate measures to steadily implement the risk management plan.

b) Targets for reducing review time

- Regarding pharmaceuticals which applications were submitted after April 1, 2004, the target review times for the items approved in respective fiscal years, shall be as shown in the following table. The regulatory authority shall make efforts to achieve these targets with the cooperation of the applicants.

  The review system shall be enhanced to achieve these targets.

1. Review time for new application of generic drugs

   The following targets shall be achieved at 50th percentile (median) by FY 2018.

Product	Regulatory review time
New generic drugs	10 months

2. Review time of application for partial change approval in generic drugs, etc. (standard review products)
   Targets shall be achieved at 50th percentile (median) by FY 2018, based on the following plan.

Fiscal year	Total review time
FY 2014	15 months
FY 2015	14 months
FY 2016	13 months
FY 2017	12 months
FY 2018	10 months

3. Review time of application for partial change approval in generic drugs, etc. (products other than standard review products)
   The following targets shall be achieved at 50th percentile (median) by FY 2018.

Products	Total review time
Products applied for partial change approval (change in procedure of study, etc.)	6 months
Products applied for partial change approval (prompt review)	3 months

c) Conduct smooth clinical study consultations, etc.
- All consultations shall be conducted for those requested for quality consultation or bioequivalence consultation (face to face consultation).
- Enhance consultation services by considering whether setting up new consultation categories are necessary to meet the needs of the applicants.

Behind-the-counter (BTC) drugs*, over-the-counter (OTC) drugs, and quasi-drugs

The following measures shall be taken to promote public self-medication.

a) Conduct accurate and prompt reviews
- In order to conduct accurate and prompt reviews for BTC drugs, OTC drugs, and quasi-drugs, etc., the following measures shall be taken to enhance the review system, etc., including safety assessments.

1. Enhance system for BTC drugs and OTC drugs, etc.
- In order to respond to the establishment of BTC drugs system, etc., that was newly developed by the Act for Partial Revision of the Pharmaceutical Affairs Act and the Pharmacists Act (Act No.

103 of 2013), the review system shall be enhanced by allocating reviewers for toxicity and clinical matters (including biostatistics), and by securing human resources who have experience in post-marketing safety measures and conformity assessment.

- Strengthen cooperation with academia and healthcare professionals, etc., in order to conduct consultations and reviews based on the latest medical care trends and needs, and to promote cooperation toward appropriate use of BTC drugs and OTC drugs.
- Conduct accurate and prompt reviews by establishing standards regarding quality of pharmaceuticals, such as the Japanese Pharmacopoeia as well as official specification for excipients.
- Increase efficiency and enhance the review service for Chinese herbal medicines and crude drugs.

2. Enhance system for quasi-drugs, etc.

- Increase the number of reviewers in order to accelerate reviews for innovative products.
- Increase efficiency of the reviews by establishing standards for quasi-drugs, such as the Japanese Standards of Quasi-drug Ingredients established by MHLW, as well as establishing quality standards for excipients, etc.
- Improve quality of the reviewers through training, etc.
- Strengthen cooperation with academia and healthcare professionals, etc., in order to conduct consultations and reviews based on the latest medical care trends and needs, and to promote cooperation toward appropriate use of quasi-drugs.

*Behind-the-counter (BTC) drugs are defined as switch OTC drugs and powerful OTC drugs which require pharmacist's intervention.

b) Targets for reducing review time

- Regarding BTC drugs, OTC drugs and quasi-drugs which applications were submitted after April 1, 2004, and were approved in respective fiscal years, the target review times shall be as shown in the following table. Approaches shall be made to achieve these targets.

1. Review time for BTC drugs and OTC drugs

The following target shall be achieved at 50th percentile (median) by FY 2018.

Product	Regulatory review time
BTC drugs and OTC drugs	7 months

2. Review time for quasi-drugs

The following target shall be continuously achieved at 50th percentile (median) by FY 2018.

Product	Regulatory review time
Quasi-drugs	5.5 months

c) Conduct smooth consultation services
- For BTC drugs and OTC drugs, conduct consultations on the appropriateness of developing new OTC drugs, etc., pre-application consultations for switch OTC drugs, and consultations on confirming the key points of the protocols.
- For quasi-drugs, develop and conduct pre-application consultations.

Medical devices

a) Conduct accurate and prompt reviews
- Systematically enhance the review system for new medical devices in order to accelerate the reviews for innovative medical devices.
- Accelerate reviews by making efforts to conduct rational reviews based on the characteristic of medical devices which constantly being improved, etc.
- Strengthen cooperation with academia and healthcare professionals in order to conduct consultations and reviews based on the latest medical care trends and needs, and to promote cooperation toward appropriate use of medical devices.
- Proactively support and cooperate in requesting development for medical devices, including unapproved medical devices, at the Study Group on the Early Introduction of Medical Devices, etc. with High Medical Need held by MHLW.
- Make efforts to smoothly operate and implement the new use-results evaluation system for medical devices.
- For new medical devices, improved medical devices, and generic medical devices, thoroughly manage the timeline for the standard review process so as to be conducted adequately.

b) Clarify review standards, etc.
- Compile and disclose the concept regarding clinical evaluation.
- In order to accelerate the reviews, cooperate with MHLW in establishing approval standards, certification standards, and review guidelines for medical devices, and disclose those standards and guidelines on the website, etc.
- Clarify, share, and establish the concept of substantial equivalence for generic medical devices.

c) Smoothly transfer specially controlled medical devices to the third party certification system
- Transfer to the third party certification system sequentially from the products whose standards have been established among specially controlled medical devices (class III).

d) Targets to aim for eliminating review lag in medical devices
- Regarding medical devices which applications were submitted after April 1, 2004, the percentile of the standard total review time from application to approval for the items approved in respective fiscal years, shall be raised in stages as shown in the following table, in order for the targets to be achieved by FY 2018. Approaches shall be made to achieve these targets by

systematically and intensively completing processing of the devices that were submitted for application in the past as soon as possible, and the regulatory authority shall make efforts to improve the lag with the cooperation of the applicants.

1. Review time for new medical devices (priority review products)

Achieve 10 months at 80th percentile by FY 2018 based on the following plan.

Fiscal year	Percentile	Review time
FY 2014	60%	10 months
FY 2015	60%	10 months
FY 2016	70%	10 months
FY 2017	70%	10 months
FY 2018	80%	10 months

2. Review time for new medical devices (standard review products)

Achieve 14 months at 80th percentile by FY 2018 based on the following plan.

Fiscal year	Percentile	Review time
FY 2014	60%	14 months
FY 2015	60%	14 months
FY 2016	70%	14 months
FY 2017	70%	14 months
FY 2018	80%	14 months

3. Review time for improved medical devices (with clinical data)

Achieve 10 months at 60th percentile by FY 2018 based on the following plan.

Fiscal year	Percentile	Review time
FY 2014	52%	10 months
FY 2015	54%	10 months
FY 2016	56 %	10 months
FY 2017	58 %	10 months
FY 2018	60 %	10 months

4. Review time for improved medical devices (without clinical data)

Achieve 6 months at 60th percentile by FY 2018 based on the following plan.

Fiscal year	Percentile	Review time
FY 2014	52%	6 months
FY 2015	54%	6 months
FY 2016	56 %	6 months
FY 2017	58 %	6 months
FY 2018	60 %	6 months

5. Review time for generic medical devices

Achieve 4 months at 60th percentile by FY 2018 based on the following plan.

Fiscal year	Percentile	Review time
FY 2014	52%	4 months
FY 2015	54%	4 months
FY 2016	56 %	4 months
FY 2017	58 %	4 months
FY 2018	60 %	4 months

e) Conduct smooth clinical trial consultations, etc.

- Reconsider the consultation category and improve consultation methods in order for the consultation service to be easier to utilize, and to be efficient and effective.
- Address the relevant industries to proactively utilize the consultation service, in order to eliminate review lag and development lag.

f) Promote evaluation of new technologies, etc.

- For medical devices using new technologies, guidelines, etc., shall be established if necessary, utilizing knowledge of the Science Board and opinions of external experts.
- Make efforts to accumulate relevant knowledge, etc., in order to appropriately respond to the development of medical devices using the latest technologies.
- Cooperate with MHLW in establishing guidelines for evaluating products that were developed using the latest technologies, and proactively disclose the points to consider for evaluations.
- For preliminary reviews regarding the Cartagena Act, the regulatory review time shall be 6 months for approval of first-class use and 2 months for confirmation of second-class use, with a target of achieving 50th percentile (median) for each class.
- Enhance the Pharmaceutical Affairs Consultation on R&D Strategy by conducting consultations where suggestions can be made on development processes (roadmap) and confirmatory trial protocol, and by conducting consultations for medical devices related companies on developmental strategies.

In vitro diagnostics

a) Conduct accurate and prompt reviews

- Appropriately increase and allocate members for the *in vitro* diagnostics group, in order to accelerate and increase transparency of the reviews.
- Strengthen cooperation with the academia and healthcare professionals, etc., to conduct consultations and reviews based on the latest medical care trends and needs, and to promote cooperation toward appropriate use of *in vitro* diagnostics.

- Proactively support and cooperate in requesting development of *in vitro* diagnostics, including those that are still unapproved, that were discussed at the Study Group on the Early Introduction of Medical Devices, etc., with High Medical Need held by MHLW.

b) Enhance consultation service
- Reconsider the consultation category and improve consultation methods in order for the consultation service to be easier to utilize, and to be efficient and effective.

Regenerative medical products

a) Conduct accurate and prompt reviews
- Enhance the services of the division of Pharmaceutical Affairs Consultation and its relevant divisions, as well as the division of biologics reviews. Strengthen cooperation with academia such as the Japanese Society for Regenerative Medicine, the National Institute of Health Sciences, and the Center for iPS Cell Research and Application (CiRA), etc., in order to conduct consultations and reviews based on the latest medical care trends and needs.
- Conduct consultations.

b) Introduce new review methods
- With the implementation of the Act for Partial Revision of the Pharmaceutical Affairs Act, respond appropriately to conditions related to regenerative medical products and to the introduction of time-limited approvals. Develop a system for this, along with its review process, and conduct them accurately.

c) Target review time
- For regenerative medical products which applications were submitted based on the Pharmaceutical Medical Devices Act, standard review time (regulatory time) for the items approved in respective fiscal years shall be set to 9 months.
  The review system shall be enhanced to achieve this target.

d) Conduct smooth clinical study consultations, etc.
- Make efforts to conduct thorough consultations so as to be understood easily, since regenerative medical products are a new field.
- Conduct high-quality consultations by utilizing the Science Board for considering evaluation methods, etc., and highly-qualified external experts, etc., to obtain the latest knowledge.
- PMDA shall make efforts to have applications of regenerative medical products after going through consultations such as the Pharmaceutical Affairs Consultation on R&D Strategy (as the substitute of pre-confirmation application) and pre-application consultations, and develop a system necessary to conduct prompt and smooth reviews considering the current situation of consultations and reviews.

- In order to enable the academia and ventures to consult easily, the target details, etc., of the Pharmaceutical Affairs Consultation on R&D Strategy shall be considered for regenerative medical products, based on the current situation.

e) Promote evaluation of new technologies, etc.
- Conduct appropriate evaluations for regenerative medical products, by utilizing the Science Board for considering evaluation methods, etc., and highly-qualified external experts.
- Make efforts to accumulate relevant knowledge, etc., in order to be able to appropriately respond to the development of regenerative medical products using the latest technologies, such as iPS cells, etc.
- Clarify and rationalize the review standards by promoting the initiative to facilitate development and designated research.
- Enhance the post-marketing surveillance, considering especially the surveillance methods for those conducted after conditional and time-limited approvals, cooperating with the safety division.
- Cooperate with the MHLW in establishing evaluation guidelines regarding products using the latest technologies, and proactively disclose the points to consider for evaluations.
- Enhance consultations to enable proactive utilization of Pharmaceutical Affairs Consultation on R&D Strategy as the substitute of preliminary reviews conducted before clinical trials regarding regenerative medical products and gene therapy products.
- For preliminary reviews regarding the Cartagena Act, the regulatory review time shall be 6 months for approval of first-class use and 2 months for confirmation of second-class use, with a target of achieving 50th percentile (median) for each class.

Promotion of conformity assessments and clinical trials, etc.

The following measures shall be taken to enhance, with strengthening the organization, studies related to the application such as clinical trials, and to ensure reliability of submitted application documents, with focus on an importance of ensuring the reliability of clinical trial data, etc., at the application of pharmaceuticals and medical devices.

a) Implement smooth and efficient conformity assessments for new pharmaceuticals, etc.
- Strengthen the organization to conduct timely assessments which will not affect the time of approval. New assessment methods with efficiency and effectiveness shall also be introduced.
- As for the items concurrently submitted with the applications in the world, etc., strengthen the coordination on partnership with foreign regulatory agencies and strengthen the organization, for example, considering the assessment in collaboration with them.
- Make clear policy on the procedure for clinical trials in which CDISC was introduced from data gathering step.

b) Implement smooth and efficient conformity assessments for medical devices
- Strengthen the organization to conduct timely assessments which will not affect the time of approval.
- Strengthen the organization conduct GCP on-site assessment, in particular, focus on innovative medical devices and multi-regional clinical trials, etc.
- Establish and disseminate detailed requirements that are necessary for applications, in order to implement conformity assessments smoothly and promptly.

c) Implement smooth and efficient conformity assessments for regenerative medical products
- Cope with the introduction of a conditional and time-limited approval system.
- In order to implement appropriate conformity assessments, coordinate with the division of biologics review sufficiently considering assessment methods and processes that are based on the characteristics of regenerative medical products.

d) Implement smooth and efficient GLP compliance assessment
- Train GLP inspectors that has global competency.
- Examine how to establish a smooth operation of the GLP regulation considering global consistency, and implement the GLP compliance assessment more appropriately and efficiently.

e) Implement smooth and efficient conformity assessment for re-examinations (including conformity assessment on use-results evaluation)
- Implement efficient and effective GPSP on-site assessments and document-based conformity assessments.
- To enable high quality post-marketing surveillances, examine to establish such as consultation to provide guidance and advices regarding the compliance for GPSP, etc., during the re-examination period.
- Examine and disseminate effective assessment methods, to enable smooth and prompt conformity assessments for re-examination, etc.

f) Promote appropriate clinical trials, etc.
- Enlighten the further promotion for implementation of appropriate clinical trials, etc., through the conformity assessment at medical institutions and sponsors, and training course, etc., in the period of the Mid-term targets, to ensure the quality of clinical trials, etc. in Japan.
- Examine the establishment of advice system that enables individual cases on GCP, etc.

Promotion of GMP/QMS/GCTP inspection

In order for manufacturers to appropriately maintain and control manufacturing processes and the quality management system for pharmaceuticals, medical devices, and regenerative medical products, the following improvements shall be made to improve inspectional quality.

a) Conduct efficient GMP inspections

- In response to accelerated reviews and increased numbers of bio-products, methods to improve GMP inspection efficiency shall be considered and conducted. This includes system enhancements to conduct timely inspections and clarify application time, while not affecting the time of approval.
- Increase the efficiency of inspections by using the assessment results of other regulatory agencies under PIC/S etc., in risk evaluation to decide if inspections shall be conducted on-site or off-site.
- In response to globalization of active pharmaceutical ingredients supply, partnerships with foreign regulatory agencies shall be reinforced and inspectional information shall be exchanged. A system to enhance on-site inspections at manufacturers overseas, especially in Asian countries, shall be developed.
- Quality of inspections shall be improved by having reviewers accompany the GMP inspection team and by promoting cooperation between GMP inspectors and reviewers.
- Enhance staff training for GMP inspectors by letting them proactively participate in training and meetings conducted overseas. Overseas training will increase staff with knowledge of global GMP harmonization and practices.

b) Conduct smooth and efficient QMS inspections

- QMS inspection and related operations streamlined by the Act for Partial Revision shall be established.
- Promote cooperation between the review groups and the QMS inspection group.
- Standardize inspection methods with other domestic and overseas inspection agencies, such as registered certification bodies.
- Build expertise in global QMS harmonization and practices, through enhancing training for QMS inspectors and let them proactively participate in training and meetings conducted overseas, etc.
- Share inspection information with relevant domestic authorities to efficiently use resources.

c) Conduct smooth GCTP inspections

- For accurate and prompt GCTP (Good gene, Cellular and Tissue Practice) inspections by PMDA that will start after enactment of the Act for Partial Revision, appropriate inspection methodology and necessary resources shall be established and secured.
- For buildings/facilities conformity assessments and relevant on-site inspections by PMDA into establishments that are processing cell/tissue products, that will start after enactment of the Regenerative Medicines Safety Act. Necessary resources shall be immediately secured and managed and current domestic and overseas situation regarding production of such products shall be figured out.

d) Increase efficiency of inspectional efficiency by utilizing the Kansai Branch and by conducting GMP inspections.

Establishment of control function for the registered certification bodies

- Improve the quality of certification bodies by ensuring the quality of the inspectors and by conducting appropriate training, etc., for those bodies.

2) Provide Support to be the First in the World to Facilitate Practical Use of Innovative Pharmaceuticals, Medical Devices, and Regenerative Medical Products

a) Establish and update review standards regarding innovative products
- Utilize the Science Board, the initiative to facilitate practical use of innovative pharmaceuticals, medical devices, and regenerative medical products, and regulatory science research (hereinafter referred to as the “RS research”), etc., in order to establish guidelines and guidance and to consider RS research, etc., that PMDA shall make approaches on.
- Establish guidelines and guidance, etc., in cross-sectional projects regarding development and evaluation of pharmaceuticals, etc., that uses new technologies, and make necessary approaches in order to smoothly implement them.

b) Proactively conduct Pharmaceutical Affairs Consultation on R&D Strategy, etc.
- Conduct consultations where suggestions can be made on development processes (roadmap) and confirmatory trial protocol. Conduct consultations for pharmaceutical companies on developmental strategies as well.
- Promote medical innovations by utilizing the Kansai Branch to fully educe technological capacity of Japan regarding biopharmaceuticals, medical devices, and regenerative medical products, etc.
- Regarding PMDA’s function to mediate between clinical study and practical use, support, etc., shall be proactively provided through Pharmaceutical Affairs Consultation on R&D Strategy, etc., in establishing exit strategies, with the cooperation of the Japan National Institutes of Health, etc.

c) Operation of approval system based on the characteristics of regenerative medical products
- In order to appropriately cope with conditions related to regenerative medical products as well as the system for time-limited approval that were both introduced by the enforcement of the Act for Partial Revision of the Pharmaceutical Affairs Act, information dissemination and utilization of the consultations shall be promoted, by enhancing Pharmaceutical Affairs Consultation on R&D Strategy and by cooperating with relevant academia and industry.

3. Safety Measures

Utilize finances including PMDA's own financial resource and enhance system necessary to improve post-marketing safety measures of pharmaceuticals, medical devices, etc., based on the Act for Partial Revision of the Pharmaceutical Affairs Act that reflects the details of Japan Revitalization Strategy, the Healthcare and Medical Strategy, the final recommendation by the Committee for Investigation of Pharmaceutical-induced Hepatitis Cases and Appropriate Regulatory Administration to Prevent Similar Sufferings, the discussions held by the Investigational Sub-committee on Revision of Pharmaceutical Regulatory Systems of the Health Science Council, etc.

The following measures shall be taken in order to promote appropriate and efficient approaches mentioned above, with close cooperation with MHLW.

Note: The organization responsible for implementing the following measures is PMDA unless otherwise stated to be MHLW, etc., or other corporations, etc.

1) Enhance Collection of ADR and Malfunction Information

- Establish a system in which patients can easily report ADR, based on opinions, etc., from the patients and patients' families, etc., who have reported them, and officially commence accepting and evaluating ADR reports, including reports on OTC drugs and Switch OTC and powerful drugs.
- Accept reports from MAHs as well as healthcare professionals, and take measures to increase reports from healthcare professionals with the cooperation of MHLW.
- Enhance and improve the systems to report information on ADR and malfunctions, etc., based on the current situation of global development such as ICH E2B and on the advancement of information technology, etc., and promote efficient and effective collection of safety information, etc.
- Enhance measures to collect information on ADR of quasi-drugs and cosmetics.

2) Systematize Information of ADR, etc., and Its Evaluation Analysis

- In order to appropriately respond to the evaluation approach for ADR which is increasingly sophisticated and specialized, substantially enhance current framework to assemble and analyze information on ADR. For this purpose, it is necessary to increase the number of staff members in each group organized according to pharmaceutical effect classification and area of medical practice that correspond to the review divisions. Measures, such as utilizing IT technology, shall also be taken to carefully investigate the overall domestic reports on ADR and infections.
- Modify a PMDA-initiated system step-by-step to follow-up on ADR reported from medical institutions, and ensure its application for all reports that needs investigation by FY 2018.

- Standardize and increase transparency of the process from obtaining information of ADR to take post-marketing safety measures including revision of package inserts, and increase accuracy and expediting of the process.
- Steadily accelerate the process taken to prepare post-marketing safety measures by setting a target time, and by increasing efficiency of the process with standardization. For the target time, consider, reducing the current median time from the first meeting with the MAHs until notification of investigation results.
- Modify submission process for package inserts to enable MAHs to smoothly submit package inserts.

  Establish a system to check contents of submitted package inserts and ensure that the submitted information is based on the latest knowledge.
- Respond promptly to consultations from MAHs when it voluntarily develop or revise either package inserts or communication tools for healthcare professionals and patients.
- Respond promptly to medical safety consultations from MAHs regarding safer use of pharmaceuticals and medical devices at clinical practice.

3) Establish Database, etc., for Medical Information

- Conduct pharmacoepidemiological analyses using electronic medical information, such as the Medical Information Database Network, and improve those analysis methods to promote its utilization for risk/benefit assessments of pharmaceuticals and for post-marketing safety measures.
- Promote MAHs to utilize the Medical Information Database Network for post-marketing safety measures, with its conditions of utilization determined by MHLW for post-marketing surveillance, etc., based on results of utilization obtained through pilot studies.
- Data accumulation shall be promoted in order to improve the quantity and quality of the Medical Information Database Network as well as to improve post-marketing safety measures.
- In order to promptly and safely provide useful medical devices and regenerative medical products, discussions up to the previous effective period for the Mid-term Targets shall be put into consideration to enhance the system of collecting post-marketing information, for example, by establishing a patient registry system for confirming long-term safety, with the cooperation of relevant academia and companies, etc.
- Promote investigational research regarding utilization of pharmacogenomics in post-marketing safety measures.

4) Establish a System for Post-marketing Safety Measures by Providing Information Feedback, etc.

- Regarding line listing of ADR, the time from ADR reporting to disclosure shall remain as within 4 months.
- ADR reports from medical institutions shall be promptly disclosed in the line listing for those that have been investigated by PMDA.

- The instructions for revising the package inserts shall be published on the website within 2 days after issuance of those instructions.
- Disseminate information related to cases of ADR and malfunction, etc., for those that served as the basis for revising package inserts for prescription pharmaceuticals and medical devices, etc.
- Consider with MHLW about measures to enable medical institutions to discern the urgency and importance of the disseminated information more easily.
- Enhance dissemination of information to promote appropriate use of generic drugs.
- Regularly disseminate medical safer information so that pharmaceuticals and medical devices, etc., will be used safely at clinical settings.
- Collect medical safety information from vocational groups, etc., and enhance dissemination of the information.
- Aim for a wider use of the Pharmaceuticals and Medical Devices Information E-Mail Alert Service by enhancing the content of the service and by increasing the number of registries at an early period before the end of FY 2018 by more than 1.5 times that at the end of FY 2013, by means of strongly promoting registry of healthcare professionals working at medical institutions and pharmacies with the cooperation of relevant organizations, and so on.
- Let healthcare professionals, including physicians and pharmacists, etc., increase understanding of the information that PMDA provides.

5) Enhance Dissemination of Information to the Public Regarding Safety of Pharmaceuticals and Medical Devices, etc.

- Improve the method of disseminating information on the website regarding safety of pharmaceuticals and medical devices, etc., in order to respond to changes in the environment in which pharmaceuticals, medical devices, and regenerative medical products are provided, such as internet marketing of OTC drugs.
- Promptly release important safety information in a manner that is easy to understand from the patients' perspective.
- Enhance dissemination of information to patients by further increasing patient's awareness of the Pharmaceutical Guide for Patients and by increasing its convenience.
- Enhance dissemination of information that can be used for medication instructions for patients.
- Conduct consultations services for general consumers and patients for a safe and secure use of pharmaceuticals and medical devices, etc.
- Further improve the contents of information to the public, etc.

6) Conduct Appropriate Post-marketing Safety Measures Based on the Risk Management Plan of Pharmaceuticals

- Consultation and instruction systems shall be strengthened and enhanced to appropriately conduct pharmacovigilance activities and risk minimization activities, based on the new Risk Management Plan (RMP) of pharmaceuticals.

- The new pharmaceuticals review divisions and the safety divisions shall cooperate together through discussions with the applicant in confirming RMP before reviews of new pharmaceuticals concludes.
- Regarding generic drugs, the generic drugs review division and the safety divisions shall cooperate together in order to confirm in the reviews the pharmacovigilance activity and the risk minimization activity that the MAHs are required to conduct.

7) Enhance Safety Measures in Response to the Introduction of New Review Service, and a Safety Management System Consistent from the Review Stage

- Safety management system shall strengthen cooperation with the relief services and maintain consistency from the review stage. Information from the relief services shall be utilized in the post-marketing safety measure operation, with special attention to ensuring protection of personal information.
- The safety divisions and the review divisions shall share information on adverse reactions caused by regenerative medical products (including time during conditional and time-limited approvals), and shall cooperate in taking post-marketing safety measures.
- Information on malfunctions of new medical devices and certified medical devices shall be shared among the safety divisions, the review divisions, and the registered certification body assessment division, for taking post-marketing safety measures.
- The system of safety management shall be enhanced in order to maintain consistency from the review stage, by allocating multiple risk managers for each field according to the number of new pharmaceutical products.
- The management function of the overall post-marketing safety measures shall be enhanced and the groups shall coordinately cooperate, to conduct appropriate operation.
- For products which need investigation on all cases as an approval condition, safety and efficacy information obtained from post-marketing surveillance shall be promptly provided to the public and health care professionals.

8) Enhance Follow-ups of the Safety Measures Conducted

- Conduct investigations to confirm the current status of post-marketing safety measures in MAHs, for example, whether information is definitely conveyed from the MAHs to medical institutions, and to confirm whether information from MAHs is conveyed and utilized within medical institutions and pharmacies. Based on the investigation results, information regarding methods of utilizing safety information in medical institutions and pharmacies shall be disseminated as best practices to use pharmaceuticals and medical devices safely.
- Investigate the status of whether the information provided from PMDA is utilized by general consumers and healthcare professionals, and analyze their needs and satisfaction level, to reflect them in the information service improvement.

9) Data Collection, Investigation, and Analysis on Adverse Reactions Reports in Accordance with the Preventive Vaccination Act

- Adverse reactions shall be promptly disclosed on the website for those that were reported from medical institutions and were investigated by PMDA.
- Details of adverse reactions reports shall be investigated in accordance with the Preventive Vaccination Act, with special attention to ensuring protection of personal information, and investigations and analyses shall be conducted in order to ensure safety of vaccination.

4. Promotion of Regulatory Science and Globalization, etc.

In order to promptly provide clinical settings with necessary pharmaceuticals and medical devices, etc., it is essential for the quality, efficacy, and safety of pharmaceuticals and devices to be accurately estimated, evaluated, and determined based on scientific rationale and to be ascertained from an ethical perspective on whether to allow the public to use them. Regulatory science (RS) pursue this, and it has become increasingly important to be promoted, and research needs to be conducted on establishing prompt and accurate evaluation methods, etc., based on the latest results of technology, by utilizing external experts and by improving PMDA's capability.

In the midst of global development, manufacturing, distribution, and marketing of pharmaceuticals and medical devices, the services of PMDA have increasingly become globalized. Under these circumstances, improvement in medical services as well as establishment of PMDA's global standing shall be made by cooperating with MHLW, the United States, Europe, and Asian countries, etc., and by proactively promoting global activities based on the PMDA International Strategic Plan, PMDA International Vision, and Road map for the PMDA International Vision.

Note: Regulatory science = Science for coordinating results of science and technology into the most desirable form for harmonizing people and the society, by conducting accurate and evidence-based estimations, evaluations, and decisions in order for the results of science and technology to be used for the people and the society (from the Science and Technology Basic Plan, adopted by the Cabinet on August 19, 2011).

1) Promotion of Regulatory Science

1. Utilize the Science Board

- Proactively utilize the Science Board comprising external experts from the fields of medical science, dentistry, pharmaceutics, and engineering, to strengthen cooperation and communication with universities, research institutions, etc., and clinical settings regarding evaluation methods for innovative pharmaceuticals, medical devices, and regenerative medical products, and to make approaches to advanced technology products more adequately, for example, by utilizing Pharmaceutical Affairs Consultation on R&D Strategy.

2. Enhance regulatory science research

- Establish a system in PMDA to enable electronic submission of clinical study data for new pharmaceuticals that are to be submitted after FY 2016.

Conduct PMDA-initiated cross-sectional analyses on cross-sectional clinical study data, etc., using advanced methods of analysis and prediction evaluation, and consider a system that increases the efficiency of pharmaceutical development through establishment of guidelines, etc.

- As a part of RS research aimed at improving the quality of PMDA's services, a system and environment shall be developed by cooperating with external organizations (NIHS, academia, etc.) when necessary, so PMDA can take initiative in reaching solutions for issues that become evident through its services and issues of making practical use of the latest technologies.
- Develop an environment to easily engage in RS research, to promote and enhance designated research.
- Promote RS research, and encourage those results to be presented at conferences or to be submitted to scientific journals. Through RS research, train human resources to be experts in it.
- As for cross-sectional activities, establish the concept of developing and evaluating pharmaceuticals to enable exchange of opinions between industry, government, and academia, and to establish guidelines and GRP, etc.

3. Enhance staff training

- Besides improving the quality of review, etc., and post-marketing safety measures, from the perspective of developing experts in RS research, status of the current training programs shall be evaluated for their implementation status, and their content shall be improved and conducted steadily.
- Enhance staff training to raise staff members with abilities to take the initiative in discussions at global negotiations and conferences, and to cooperate with foreign countries in establishing standards and guidelines, etc.
- Enhance on-site training at clinical settings and at manufacturing sites of companies, etc., as it is necessary, when conducting reviews, etc., and post-marketing safety measures, to have experience in clinical settings and increase in knowledge of manufacturing processes and quality controls for pharmaceuticals and medical devices.

4. Promote Interaction and investigative research with external researchers

- Proactively accept personnel from universities and research institutions in the field to facilitate practical use of innovative pharmaceuticals, medical devices, and regenerative medical products conducted by MHLW, while also dispatching staff from PMDA in order to help promote the development of innovative seed-stage resources and to establish guidelines.
- Develop and enhance education and research guidance systems that are conducted by directors and staff members at joint graduate school program, including regulations for those systems. These approaches will target increasing staff members who have a doctoral degree, etc.

2) Response to Globalization

1. Reinforce partnerships with the United States, Europe, Asian countries, and global organizations, etc.

- Cooperation with the United States FDA, the European Commission, EMA, and Swissmedic, etc., in promoting bilateral conferences based on confidentiality agreement and promoting exchange of information.
- Establish partnerships with other countries in America, Europe, and Asia, and global organizations.
- Continue dispatching liaison personnel to the United States, Europe, and Switzerland as much as possible, while promoting further dispatches to other countries in America, Europe, and Asia, etc., and global organizations, etc., as well.
- Utilize the liaison personnel dispatched to foreign countries to proactively collect information from their dispatched country, and to strengthen cooperation with those countries.
- Regarding GLP, GCP, GMP, and QMS inspections, further strengthen cooperation with foreign countries by proactively exchanging information on inspection notifications and investigation reports, etc.
- Respond to globalization of pharmaceutical distribution by enhancing globalization measures, for example, by promoting support in issuing an English version of the Japanese Pharmacopoeia as soon as possible, by disseminating information in English, and by promoting partnerships with the pharmacopoeias of Europe, the United States and Asia, etc.
- Reinforce partnerships with regulatory agencies in the United States and Europe in order to conduct accurate reviews and consultations based on the latest science and technology, and to take post-marketing safety measures based on the latest information.
- Promote cooperation necessary to deepen mutual understanding regarding pharmaceutical regulations with the regulatory agencies in Asian countries, which are becoming increasingly important as sites of clinical development and manufacturing of pharmaceuticals, etc.
- Make necessary efforts for the pharmaceuticals and medical devices approved in Japan to be accepted by regulatory agencies in foreign countries, by enhancing information dissemination regarding review and post-marketing safety measures in Japan, etc.

2. Enhance approaches toward global harmonization

- Contribute to the establishment of global standards and provide cooperation at global conferences regarding establishment of standards, such as at ICH and International Medical Device Regulators Forum (hereinafter referred to as “IMDRF”), etc., by proposing new topics, taking the initiative in establishing global standards, and proactively stating opinion on topics initiated by other countries. Promote harmonization with other global standards, such as standards for establishing application data that were defined in these conferences, and the ISO and others.
- For medical devices, continue promoting activities of the Harmonization by Doing (HBD) conducted with the United States and promote exchange of information.
- Promote globalization of the Japanese Pharmacopoeia through global harmonization of pharmacopoeia, etc., at the Pharmacopoeial Discussion Group (PDG).

- Participate in discussions at IGDRP, where global collaboration is held for generic drugs, and promote cooperation with foreign countries regarding reviews for generic drugs.
- Cooperate with MHLW in discussions at the International Cooperation on Cosmetics Regulation (ICCR) in order to promote cooperation with foreign countries.
- Participate in and contribute to global cooperation activities such as WHO and OECD.
- Consider accepting a wider range of submission data for new pharmaceutical applications that are in English.

3. Promote interaction of personnel
- In order to promote establishment of networks with foreign regulatory agencies, have staff members proactively participate in global academic meetings and conferences, and increase opportunities to dispatch staff to organizations other than FDA, EMA, and Swissmedic.
- Promote personnel interactions through PMDA training seminars with Asian countries, etc., and global organizations, etc., and accepting trainees, etc., in order to establish a system to regularly exchange information related to reviews and post-marketing safety measures. Also have Asian countries, etc., increase their understanding of Japanese regulations, etc., and standards regarding pharmaceutical applications, etc., through symposiums co-hosted by multiple countries, etc.

4. Train and enhance human resources to acquire global perspectives and communication skills
- In order to train human resources to be globally involved in establishing guidelines such as ICH and IMDRF, staff training programs shall be established and conducted, including attendance at meetings and global conferences where guidelines are established, and research opportunities at foreign institutions and graduate schools, etc.
- Improve linguistic ability by continuing and enhancing English training for executives and staff members, etc.

5. Enhance and improve global public relations and information dissemination
- Enhance system to improve ability of disseminating information globally.
- Enhance and improve the content of PMDA’s website in English to promote exchange of opinions and information with foreign countries. To be more specific, proactively release English versions of pharmaceutical regulations, details of services, review reports, and safety information, etc. Make certain that review reports are translated into English especially for products having significance in disseminating information, such as products that are the first in the world to be approved. (Forty products per year by the end of FY 2014. Thereafter, targets will be set in each fiscal year plan, with consideration of the utilization status of relevant people and the application status of pharmaceuticals and medical devices, etc.)
- Continuously conduct lectures and present booth exhibits, etc., at global conferences.

3) Measures for Intractable Diseases and Orphan Diseases, etc.

- Develop review guidelines and enhance consultation services regarding pharmaceuticals for intractable diseases and orphan diseases.
- Take necessary measures to operate notifications and guidance regarding companion diagnostics pharmaceuticals, etc., smoothly.
- Take necessary measures through discussions with foreign regulatory agencies regarding points to be considered in developments, etc., using biomarkers.
- In order to promote utilization of pharmacogenomics in pharmaceutical development, PMDA shall take initiative in establishing evaluation guidelines at ICH, cooperate and share information with foreign regulatory agencies to establish a system that enables the 3 regions, including FDA and EMA, to make recommendations together, and thereby contributing to the development of global methods.

4) Provide Information Including Review Reports, etc.

- In order to promote transparency of the services, PMDA shall proactively promote efforts to enhance disclosure of information by cooperating with MHLW to promptly provide information related to review reports, including results of priority reviews, and other review services, in an easily accessible manner for the public and healthcare professionals, and by enhancing the content of information related to review.
- Both the regulatory authority and the applicants shall make efforts to reveal in public review reports of new pharmaceuticals and new medical devices under the concept of rational use on the website immediately after approval, and also take appropriate measures to release re-examination reports of pharmaceuticals, etc. The outlines of the documents related to new pharmaceuticals and new medical devices shall also be released on the website within three months after approval.
- In addition to the integration of the services of releasing information, such as the service of information disclosure based on the Act on Access to Information Held by Independent Administrative Agencies, and the service of revealing in public review reports, so that PMDA can cope with the yearly increasing disclosure requests of documents, PMDA shall further improve efficiency of the services with the cooperation of relevant divisions.

5) Ensuring Fairness when Utilizing External Experts

- Utilize external experts with relevant knowledge. When utilizing external experts, PMDA shall ensure neutrality and fairness in both the review, etc., and post-marketing safety measures services based on fair rules, and shall review those rules when necessary.

6) Improving the Quality of Review and Safety Services by Enhancing the Information System

- Improve the quality of services by enhancing the function of information system to cope with the changes in review and post-marketing safety measures services where increase of the

amount of information to be handled and deepening of the correlation and accuracy of information are expected.

- Consider Enhancing computerization of review procedures, including eCTD, and improving the IT literacy of the staff.

Part 3
Budget, Income and Expenditure Plan and Cash Flows Plan

1. Budget: see Attachment 1

2. Income and expenditure plan: see Attachment 2

3. Cash flows plan: see Attachment 3

Part 4
Limit of Short-term Borrowing

1) Limit of Borrowing

2.2 billion yen

2) Expected Reasons for Short-term Borrowing

a) Shortage of funds due to delayed receipt of administrative subsidies, subvention, and agent service fees, etc.

b) Unexpected retirement payments.

c) Shortage of funds due to other unexpected situations.

Part 5
Plans for Transferring or Mortgaging Important Property if Applicable

None

Part 6

Use of Surplus Funds

Surplus funds can be allocated to the review account, for the following purposes.
- Resources for expenditure related to operational improvement.
- Financial resources for training and research, etc., to improve personnel qualifications and service quality.

Regarding the ADR relief account and the infection relief account, surplus funds shall be adjusted as reserve funds, as specified in the provision of Article 31, Paragraph 4 of the Act on the Pharmaceuticals and Medical Devices Agency (Act No. 192, 2002).

Part 7
Other Matters Regarding Operation Management Specified in the Ordinance of the Competent Ministry, etc.

The following measures shall be taken for matters regarding operation management, etc., specified in Article 4 of the Ministerial Ordinance Regarding Operation Management, Finance, and Accounting of the Pharmaceuticals and Medical Devices Agency (MHLW Ministerial Ordinance No. 55, 2004), etc.

1) Matters Regarding Personnel Affairs

a) Plans regarding personnel affairs of staff members
- In order to increase regular staff, PMDA shall employ highly specialized and capable human resources, mainly through open recruitment based on the Act for Partial Revision of the Pharmaceutical Affairs Act that reflects the final proposals of the Japan Revitalization Strategy, the Healthcare and Medical Strategy, and the Committee for Investigation of Pharmaceutical-induced Hepatitis Cases and Appropriate Regulatory Administration to Prevent Similar Sufferings.

Note: Standards regarding personnel affairs
The number of regular staff at the end of the term shall not exceed 141.9% of that at the beginning of the term.

Reference 1) Number of regular staff members at the beginning of the term: 751
Number of regular staff members at the end of the term: 1,065

Reference 2) Total personnel expenses for effective period for the Mid-term Targets: 36,535 million yen (estimate)
Note that the above amount is equivalent to the expenses for the executive

compensation and basic pay, miscellaneous allowances, and overtime work pay for staff members.

- Improve qualification and capacity of the staff members by interacting with the government, research institutions, and universities with a consideration of a mobilization of human resources, and reduce proportion of transferees from the government with a consideration of appropriate balance.

  Therefore, PMDA shall strive to make reductions in accordance with the Basic Policy for Review of System/Organization of Incorporated Administrative Agencies (adopted by the Cabinet) established on December 7, 2010, and shall disclose those statuses every year.

  PMDA shall also systematically make approaches to steadily increase staff members, including specialized technical employees, etc., as specified in Part 7-1). Employment terms shall also be revised systematically to make a more attractive work environment.

  To ensure employment of highly specialized human resources, PMDA shall determine strategic methods, including an increase in number of fixed-term staff and introduce an annual salary system.
- In order to avoid any suspicion of inappropriate relationships with pharmaceutical companies, etc., PMDA shall appropriately manage personnel by establishing certain restrictions in employment, allocation, and post-retirement reemployment, etc., for executives and employees.

b) Develop a comfortable working environment

- Consider developing a comfortable working environment for employees by improving working environment such as a promotion of work-life balance. Make approaches that enable a good balance between family life and career and that allows especially the women staff members, accounting for about half of the total employees, to keep fulfilling their abilities.

c) Adjust salary standards

- Based on the Basic Policy Regarding Reform of Incorporated Administrative Agency (adopted by the Cabinet on December 24, 2013), PMDA shall take necessary measures to adjust the salary standards of the employees to achieve an appropriate and efficient level, taking into consideration the salary standards of national government employees as well as its competitiveness to stably securing distinguished human resources.

  PMDA shall also inspect its state of approaches for adjusting salary standards every year from the following perspectives and shall disclose those results.

  1) Appropriateness in salary standards of the employees when compared to the national government employees in view of factors such as their office locations and academic backgrounds, etc.
  2) Room to improve the causes of high salary standards, for example, high proportion of employees dispatched form the government.

3) Ability to thoroughly explain the appropriateness of the current salary standards when the large government spending, the accumulated losses, and the salary standards of private companies engaged in similar services are pointed out.
4) Competitive salary standards of PMDA's staff members compared to the standards in the relevant fields, such as pharmaceutical companies and research institutes at universities, etc., when we need to secure human resources with highly specialized knowledge and experience in technical matters.
5) Other explanations for the salary levels must be rational to gain sufficient public consent.

d) Improve qualifications of the staff members

- In order to improve the quality of the services, PMDA shall improve qualification of the staff members by systematically providing opportunities for training according to targets of the services, etc., by enhancing training conducted with the cooperation of companies, and by interacting with MHLW, as well as domestic and foreign universities and research institutions, etc.
- Training for new staff members shall especially be enhanced in order to ensure effectiveness of enhancing system by increasing staff numbers.
- Enhance staff training programs for administrative staff members who are on main career tracks, so as to improve the quality of staff members at clerical positions supporting the organizational management.
- Implement a personnel evaluation system that allows motivation of the staff members to increase, and appropriately reflect those evaluations and the status of achieving their goals on their salary, pay raise, and promotion.
- Strategically allocate the staff members in view of their future career development to maintain their specialization as well as the continuity of operations.

2) Ensure Security

- Continue enhancing the internal control system for security and confidentiality reasons by thoroughly controlling entrances and exits 24 hours a day, using the entrance and exit control system at the office.
- Continue ensuring security of information related to the information system.
- Continue ensuring the document control system based on the property of the stored documents.

3) Matters Regarding Facilities and Equipment

None

4) Matters Regarding Disposition of the Reserve Funds Specified in Article 31, Paragraph 1 of the Act on the Pharmaceuticals and Medical Devices Agency

In cases where there are still reserve funds for the review account even after adjusting profit and loss according to Article 44 of the Act on General Rules at the end of the last fiscal-year of the effective period for the Second Mid-term Targets, the amount approved by the MHLW out of those reserve funds can be applied to the financial resources of the review service and post-marketing safety measures service, as specified in Article 15 of the Act on Pharmaceuticals and Medical Devices Agency.

5) Other Matters

Steadily conduct approaches based on the government policy indicated in past Cabinet decisions, etc.

Attachment 1

Budget

Budgets for Mid-term Plan (FY 2014 - FY 2018) (Unit: million yen)

Classification	Amount						
	Adverse drug reactions relief account	Infection relief account	Review account	Specified relief account	Commission and loan account	Commission payment account	Total
Income							
Administrative subsidies			6,350				6,350
Governmental subsidies	883	707	1,854				3,444
Contributions	20,322	553	16,043	18,390			55,308
User fees			60,151				60,151
Commissioned operations			926		5,410	3,262	9,598
Management income	1,671	312					1,983
Miscellaneous income	7	1	146		8	5	167
Total	22,883	1,572	85,471	18,390	5,418	3,268	137,001
Expenditure							
Operating expenses	16,501	1,300	81,659	18,585	5,380	3,243	126,667
Personnel expenses	1,254	130	38,056	85	188	99	39,813
Administrative expenses	15,247	1,170		18,500	5,192	3,143	43,252
Expenses for reviews and related services			29,533				29,533
Expenses for safety measures, etc.			14,069				14,069
General administrative expenses	541	74	10,526	12	38	25	11,216
Personnel expenses	270		3,626				3,897
Non-personnel expenses	271	74	6,899	12	38	25	7,319
Total	17,043	1,374	92,184	18,597	5,418	3,268	137,883

<Note 1>

Personnel expenses were calculated as expenses based on self-financial resources for increases in and after FY 2015.

<Note 2>

In principle, all figures have been rounded off; therefore, individual totals shown may not coincide with the actual totals.

Attachment 2

Income and Expenditure Plan

Income and Expenditure Plan for the Mid-term Plan (FY 2014 - FY 2018) (Unit: million yen)

Classification	Amount						
	Adverse drug reactions relief account	Infection relief account	Review account	Specified relief account	Commission and loan account	Commission payment account	Total
Expenditure							
Ordinary expenses	24,163	1,495	93,471	18,600	5,422	3,269	146,420
Operating expenses	16,346	1,233	75,708	18,585	5,383	3,243	120,498
Relief benefits	12,270	155					12,425
Operating expenses for health and welfare	197	621					818
Operating expenses for reviews			29,719				29,719
Operating expenses for safety measures			11,317				11,317
Specified relief benefits				18,390			18,390
Benefits (healthcare allowances, etc.)					5,118		5,118
Benefits (special allowances, etc.)						1,294	1,294
Operating expenses for research and study						1,768	1,768
Administrative expenses	2,619	331		117	93	88	3,249
Personnel expenses	1,260	126	34,673	78	172	92	36,399
General administrative expenses	542	78	10,520	12	38	25	11,214
Personnel expenses	272		3,306				3,577
Non-personnel expenses	270	78	7,214	12	38	25	7,636
Depreciation expenses	241	16	7,243	4	1	1	7,507
Provision for liability reserve	7,030	163					7,192
Miscellaneous losses	5	5					10
Income							
Ordinary income	22,876	1,572	85,713	18,600	5,418	3,268	137,447
Governmental subsidies	883	707	1,854	207			3,651
Contributions	20,322	553	16,043				36,918
User fees			60,151				60,151
Commissioned operations					5,410	3,262	8,672
Other governmental grants			926				926
Administrative subsidies			6,350				6,350
Reversal of asset offset subsidies			89	4			92
Reversal of asset offset administrative subsidies			207				207
Reversal of asset offset gifts received							
Financial income (no operating income)	1,671	312					1,983
Gain on reversal of specified relief fund deposit received				18,390			18,390
Miscellaneous income		1	92		8	5	107
Net income (△net loss)	△ 1,287	77	△ 7,759	0	△ 4	△ 1	△ 8,974
Reversal of appropriated surplus							
Gross income (△gross loss)	△ 1,287	77	△ 7,759	0	△ 4	△ 1	△ 8,974

<Note 1>

Administrative subsidies are assumed to be the financial resource for retirement allowances for staff members in charge of operations financed by administrative subsidies under the review account.

However, this excludes the amount arranged through administrative subsidies as retirement allowances equivalent to tenure, as provided for in Article 8-2 of the supplementary provisions in the Act for Pharmaceuticals and Medical Devices Agency.

<Note 2>

In principle, all figures have been rounded off; therefore, individual totals shown may not coincide with the actual totals.

Attachment 3

Cash Flows Plan

Cash Flows Plan for the Mid-term Plan (FY 2014 - FY 2018) (Unit: million yen)

Classification	Amount						
	Adverse drug reactions relief account	Infection relief account	Review account	Specified relief account	Commission and loan account	Commission payment account	Total
Cash Outflows							
Cash outflows from operating activities	16,462	1,210	86,230	18,599	5,430	3,304	131,234
Relief benefits	12,251	155					12,406
Operating expenses for health and welfare	197	621					818
Operating expenses for reviews			29,012				29,012
Operating expenses for safety measures			10,811				10,811
Specified relief benefits				18,390			18,390
Benefits (healthcare allowances, etc.)					5,131		5,131
Benefits (special allowances, etc.)						1,294	1,294
Operating expenses for research and study						1,768	1,768
Administrative expenses	2,275	243		114	86	119	2,837
General administrative expenses	266	69	6,882	12	31	25	7,286
Personnel expenses	1,472	121	39,525	83	183	97	41,480
Cash outflows from investing activities	20,532	2,664	5,357				28,552
Payments for purchases of investment in securities	20,000	2,500					22,500
Payments for purchases of intangible fixed assets	532	164	5,357				6,052
Cash outflows from financial activities							
Amount carried forward to the next mid-term plan period	438	422	9,440	123	40	96	10,559
Total	37,431	4,296	101,026	18,721	5,471	3,400	170,345
Cash Inflows							
Cash inflows from operating activities	22,906	1,575	86,332	18,423	5,433	3,268	137,937
Governmental subsidies	885	708	1,854				3,447
Administrative subsidies			6,350				6,350
Contributions	20,322	553	16,043	18,422			55,340
User fees			60,975				60,975
Commissioned operations			382		5,423	3,262	9,067
Miscellaneous income	1,698	315	728	1	10	6	2,757
Cash inflows from investing activities	14,100	2,500					16,600
Cash inflows from financial activities							
Amount brought forward at the beginning of the mid-term plan period	426	221	14,694	299	37	132	15,808
Total	37,431	4,296	101,026	18,721	5,471	3,400	170,345

<Note>

In principle, all figures have been rounded off; therefore, individual totals shown may not coincide with the actual totals.