The Future of PMDA

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Chief Executive, PMDA
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Yasuhiro Fujiwara, M.D., Ph.D.

- Chief Executive of PMDA (since 2019.04)
- Deputy Director of the Hospital (Research), National Cancer Center Hospital (since 2015.04)
- Director-General, Strategic Planning Bureau of the National Cancer Center (since 2012.07)

Experience:
- Medical Oncologist, specializing in breast cancer
- Oncology drug reviewer (1997-2002)
Comprehensive Risk Management through Safety Triangle

As the only regulatory authority in the world to play these 3 roles in an integrated manner, PMDA contributes to improvement of the standard of medical care by delivering safer and higher quality products faster to medical practice, and plays an active role to prolong people's healthy life expectancy based on regulatory science.

- Improving quality of services by promoting regulatory science
- Promoting globalization
- Developing the governance/compliance system based on organizational role and social position
### 4th Mid-Term Plan (FY2019-2023)

#### 1. Active contribution to health and security of Japanese citizens based on Safety Triangle

<table>
<thead>
<tr>
<th>Relief benefits service for health damage</th>
<th>Review service</th>
<th>Safety measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Enhance publicity and dissemination of information to ensure the use of relief service</td>
<td>➢ Keep review time at the world’s fastest level and further improve its higher quality</td>
<td>➢ Promote safety assessment based on drug epidemiological survey using medical information database</td>
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<tr>
<td>➢ Prompt response to claims for benefit</td>
<td>➢ Proper operation of SAKIGAKE Designation System and Conditional Early Approval System</td>
<td>➢ Rapid identification and assessment of ADRs/malfunctions</td>
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<td></td>
<td>➢ Conduct RS Strategy Consultations, etc.</td>
<td>➢ Promote ADR reporting from medical institutions and more use of ADR information from patients</td>
</tr>
<tr>
<td></td>
<td>➢ Address utilization of RWD in submissions</td>
<td>➢ Promote utilization of safety information in clinical practice</td>
</tr>
</tbody>
</table>

#### 2. Cross-organizational activities to support and further advance Safety Triangle

<table>
<thead>
<tr>
<th>Improvement of service quality by promoting RS</th>
<th>Globalization</th>
<th>Operations</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Establish horizon scanning method</td>
<td>➢ Take global leadership</td>
<td>➢ Develop the governance and compliance system based on PMDA's role and social position</td>
</tr>
<tr>
<td>➢ Promote advanced evaluation method</td>
<td>➢ Strengthen bilateral cooperation and Asia Training Center</td>
<td>➢ Secure and develop qualified human resources and further enhance service quality</td>
</tr>
<tr>
<td>➢ Improve quality of benefit-risk assessment using medical information database</td>
<td>➢ Announce PMDA's activities actively and globally</td>
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<tr>
<td>➢ Develop organizational structure that promotes the use of MID-NET®</td>
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Dr. Fujiwara’s Priorities

◆ Patient First
◆ Access First
◆ Safety First
◆ Asia First

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“Rational Medicine” Initiative
by Kondo

Regulatory Science

“Rational Medicine” Initiative
by Kondo

February 2017
Takashi Kondo M.D., Ph.D.
Chief Therapeutics, PMEA

Introduction
Throughout my experience in clinical practice, I have continued to believe that medical care must always be administered on the basis of the most rational judgments possible.

“Rational Medicine” is the idea that a patient-centered system should be created—a system under which optimal medical care from the patient’s point of view, which is based on the latest scientific knowledge, is provided—from the preventives to the final stages of life. I strongly feel that this idea should always be borne in mind by healthcare professionals, companies.
Dr. Fujiwara’s Priorities

◆ Patient First

Improve **patient satisfaction** by learning what is happening around the clinical settings
Patient Engagement
Initiatives at Japan Agency for Medical Research and Development

Committee chair for research on patient and public involvement (PPI) in clinical trials
(conducted during 2017.07-2019.03)

- Definition, mission and basic principles of PPI were established
- PPI Guidebook was developed and published in Apr, 2019
- Report will be published soon
Patient Engagement
Initiatives within PMDA

In May 2019, PMDA established Patient Centricity Working Group to:

- discuss how patients can be involved in PMDA’s review and safety services
- develop and publish guidance and principles on PPI at PMDA
Dr. Fujiwara’s Priorities

Access First

• Ensure appropriate risk-benefit balance

• Accelerate the access to innovative medical products of public demand
New active substance (NAS) median approval time among six regulatory authorities in 2009-2018 (Pharmaceuticals)

Approval time is calculated from the date of submission to the date of approval by the agency. This time includes agency and company time. EMA approval time includes the EU Commission time.
Challenges - Low IBD in Japan -

Author’s response: “only 5% of new therapeutic agents were submitted to the PMDA before submission to the U.S. FDA or the EMA.”
Regulatory Action towards Access First

- SAKIGAKE Designation System
- Conditional Early Approval System
- Real World Data Utilization
- International Collaboration
SAKIGAKE Designation System

【Ordinal Review】

Clinical Trial Ph I/II → Consultation → Clinical Trial Ph III → Review

- Consultation: 2 months
- Review: 12 months

【SAKIGAKE】

Clinical Trial Ph I/II → Priority Consultation → Clinical Trial Ph III → Priority Review

- Priority Consultation: 1 month
- Priority Review: 6 months
PMDA's Efforts Toward Utilization of Real-World Data (RWD)

1. New Consultation Category for Registry Utilization *(piloted in FY2019)*

- Multiple consultation categories for registry holders and product developers
  - For registry holders
    - General considerations to ensuring reliability of registry data for regulatory approval
  - For product developers
    - Advice on the development plan using registry and the reliability of the registry data for individual product

2. Preparation of Guideline for Product Development utilizing RWD

- Notification issued
  - Amended GPSP Ordinance
  - Basic Principle for Utilization of Medical Information Database in Post-Marketing Pharmacovigilance (2017.6.9)
  - Points to Consider for Ensuring the Data Reliability on Post-Marketing Database Study for Drugs (2018.2.21)
  - Points to Consider for Ensuring the Data reliability on Post-Marketing Database Study for Medical Devices (2018.12.19)

- **Basic principle for utilization of registry data for regulatory submission and points to consider for ensuring the data reliability are being developed**, considering experience from consultations and global circumstance.
  - **Drafts will be developed in FY2019**, and their finalization/publication is planned in FY2020 after discussion with experts.
  - **Finalization/publication is planned in FY2020**
International Collaboration for Early Patient Access
MHLW/PMDA’s participation in ICMRA

- Member of the ICMRA Executive Committee
- Former project lead of the ICMRA Innovation Project
  WS1: Horizon Scanning, Methodology and Best Practice
- Maintenance and update of the ICMRA public website
- Active participation in nearly all projects and initiatives

ICMRA Public Website (www.icmra.info)
Dr. Fujiwara’s Priorities

◆ Safety First

Implement **efficient post-marketing data collection and product distribution control**, especially for accelerated approval scheme.
Conditional and Time-limited Approval of Regenerative Medical Product

Conventional Approval Process

Clinical research → Clinical trial (Confirmation of efficacy and safety) → Approval → Marketing

Regulatory System that Facilitate Early Patient Access

Clinical research → Clinical trial (likely to predict efficacy, confirmation of safety) → Conditional and time-limited approval → Marketing → Approval or Revocation of the conditional approval → Continued marketing → Re-Application (or Expiration) within max. 7yrs

Further confirmation of efficacy and safety
PMDA-Qualified Real World Data Medical Information Database Network (MID-NET)

- Promote safety measures by pharmaco-epidemiological method using medical information database.
- MHLW/PMDA have established a medical information database for collecting large-scale medical data at sentinel site hospitals and have constructed analytical systems at PMDA since FY 2011.

**Expected Outcome:**
- Prompt and precise safety actions

**Researcher, MAHs**

**PMDA**
- Safety information collection and analysis

**Sentinel site hospitals**
- Data analysis

**Networking 10 sentinel sites of 23 hospitals**
- More than 4,000,000 patients included

**Summary of studies published**


**[History and way forward]**

- April 2010: 「Revision of pharmaceutical administration etc. to prevent recurrence of pharmaceutical disasters (final recommendation)」
- April 2011: Start construction of MID-NET system
- April 2013: Start data quality validation to assure precision and comprehensiveness of the collected data
- April 2015: Start trial operations by PMDA and sentinel sites
- April 2015: Setting utilization rules for full-scale operation and framework of operation cost / user fees.
- April 2018: Full scale operation, enable MAHs and researchers to use MID-NET
Dear Healthcare Professionals Letter of Rapid Safety Communication

- Brand Name: Verzenio 50mg, 100mg, 150mg (abemaciclib)
- Letter issued on: May 17, 2019
- Safety Information: 14 serious cases of interstitial lung disease reported in patients treated with Verzenio Tablets in Japan

Health care professionals are requested to pay careful attention to use this drug.
Dr. Fujiwara’s Priorities

◆ Asia First

- Promote regulatory harmonization and improve public health among Asian countries/regions
- Further build trust in Japanese regulatory system
Asia First

Similarities in:
- geography
- genetics
- cultures

Streamlined product development

Access to all Asian population around the world
Asia Training Center for Pharmaceuticals and Medical Devices Regulatory Affairs (PMDA-ATC, est. April 2016)

- Plan, design and coordinate training for regulators in Asia and other parts of the world
- Provide **training opportunities** including **on-site training**

Contribute to capacity building of regulators in Asia and other parts of the world

- Attendees (FY 2018)
  - 10 training seminars
  - 267 attendees from 31 countries/regions

*(1) Training seminar by PMDA, local prefectures and industry*

*(2) Assign to local site*

*(3) APEC Training Centre for Multi-Regional Clinical Trial and Pharmacovigilance*
The Future of PMDA

Patient First

Safety First

Asia First

Access First
Thank You

The Future of PMDA

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