Opportunities for the adoption of common standards harmonization and convergence

Maria Luz Pombo
Advisor, Vaccines and Biotechnological Products

Regulatory convergence and harmonization: barriers to effective use and adoption of common standards

- Objectives
- Mehodology
- Results
- Conclusions

María Luz Pombo, Analía Porrás, Patricia Claudia Saidon, and Stephanie M. Cascio

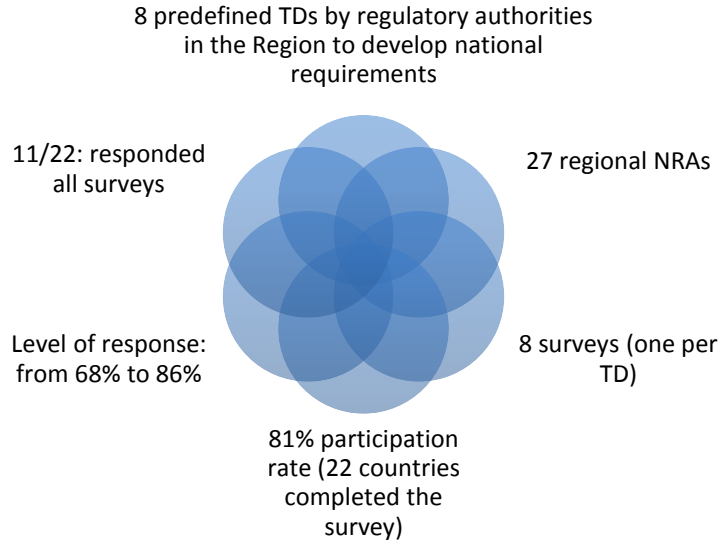
Pan American Journal of Public Health, 2016

Objectives	Methodology
Measuring the level of adoption of PANDRH TDs from 1999 to 2013 among participating countries;	▪ 8 surveys (one per TD) and a consent form, sent on-line to NRA technical officers
Identifying the barriers that influenced the uptake of TDs;	▪ 10 countries received a semi- structured survey ▪ At least one country from each sub-region: MERCOSUR, CARICOM, SICA, NAFTA and ANDEAN region
Establishing the impact of TD No1 in countries (used as an objective measure of the effective deployment of the TD in the national regulatory framework).	▪ 11-question survey distributed by PANDRH VWG to regulatory professionals responsible for the evaluation of biological medicines licensing application within NRAr ○ 17 countries surveyed ○ identified the legal regulatory framework supporting vaccine licensing in the 12 responding countries and Nicaragua, Peru, and the United States

Results: Level of adoption of PANDRH TDs

Proportion of countries that have used the TD in question to develop national requirements

Rate of use of specific TDs is variable among countries and topic



Variable reasons for not using the TD at the national level:

- Current regulations on other harmonization initiatives (ICH)
- Adoption of regulation prior to the development of the PANDRH TD
- No specific written requirements for the area covered by the TD

Results: Level of adoption of PANDRH TDs

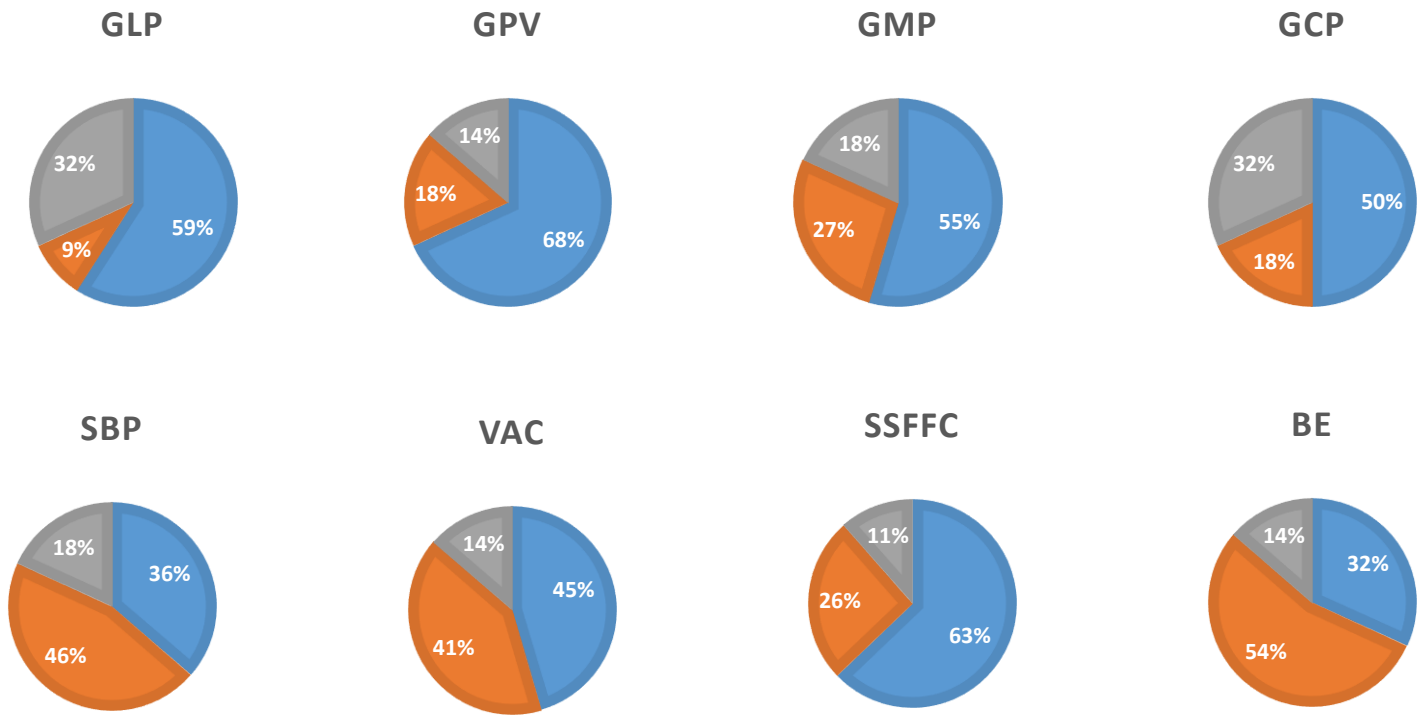


Figure 1: Rate of use of Technical Documents (TDs). Blue: used; Orange: not used; Grey: did not respond.
The TDs included in this Figure are: Document on self-evaluation of Good Laboratory Practices (GLP), Good Pharmacovigilance Practices for the Americas (GPV), Guideline for Good Manufacturing Practices Inspection (GMP), Good Clinical Practices: Document of the Americas (GCP), Guidelines on evaluation of similar biotherapeutic products (SBP), Harmonized requirements for the licensing of vaccines in the Americas and Guidelines for preparation of application (VAC), Guideline for Health authorities in the case of suspected counterfeit medical products (SSFFC), Framework for implementation of equivalence requirements for pharmaceutical products (BE)

Results: Hurdles for the use and adoption of PANDRH TDs reported by Member States PANDRH TDs

Factors that influenced the adoption and use of the TD at the national level

Determinants	Identified hurdle
Standards, guidelines, specifications and procedures	Some of the TD are considered too general and lack necessary guidance to facilitate its adoption: this include clarification of hard to understand topics, practical steps to break down complex processes and support in the interpretation of the requirements proposed in the TD.
Quality management system	Traceability system is either absent or inefficient.
Human and financial resources	Shortage of human resources dedicated to a specific task. Lack of appropriate competences for the human resources assigned to a task due to absence of continuing education programs within NRA and/or the regulated sector (industry). Lack of specific technical competences to face new or emergent regulatory challenges such as SSFFC products or the regulation of complex products.
Infrastructure including information systems	Lack of digital information system to systematization and follow up actions. Lack of automated systems to receive notifications and alerts. Lack of physical infrastructure to comply with specific requirements, in particular for GMP.
Other harmonization initiatives and/or timing of adoption of new regulation	A country may participate and/or follow guidelines produced by other harmonization initiatives, such as ICH. In general, these countries adopted the requirements for a specific regulatory process previous to the publication of the PANDRH TD since the ICH guidelines publication preceded PANDRH's corresponding documents.

Results: Impact of PANDRH TDs on regulatory requirements: the TDNo1

- Assess the incorporation of TDNo1 recommendations;
- Identify the legal regulatory framework supporting vaccine licensing in the countries;
- Illustrate the role of PANDRH in promoting convergence/ harmonization across member states.

TABLE 2. Impact of PANDRH TDNo1[a] on national requirements of member states: PANDRH VWG[b] participants and nonparticipants, Americas Region, 2013

Country	Participates in PANDRH VWG	Uses TDNo1 for development of local requirements	NRA[c] has specific requirements for licensing vaccines
Argentina	Yes	No	Yes
Bolivia	No	No	Yes
Brazil	Yes	Yes	Yes
Canada	Yes	No	Yes
Colombia	No	Yes	Yes
Costa Rica	No	Yes	Yes
Cuba	Yes	No	Yes
Dominican Republic	No	No	No
Ecuador	Yes	Yes	Yes
El Salvador	No	No	Yes
Guatemala	No	No	Yes
Honduras	No	No	No
Mexico	No	Yes	Yes
Nicaragua	No	Yes	Yes
Paraguay	No	No	No
Peru	No	Yes	Yes
Uruguay	No	Yes	No
United States	No	No	Yes
Venezuela	Yes	Yes	Yes

Source: compiled by the authors based on the study results.

[a] Pan American Network for Drug Regulatory Harmonization Technical Document No. 1 (*Harmonized requirements for the licensing of vaccines in the Americas and guidelines for the preparation of applications*).

[b] VWG: PANDRH Vaccine Working Group.

[c] NRA: national regulatory authority.

- 15 countries reported having specific vaccine licensing requirements
- 19 countries reported using TDNo1 for developing national requirements

Conclusions

- PANDRH has played an important and significant role in promoting harmonization/convergence
  - Convergence: through specific adoption of TDNo1 and activities surrounding its development (PANDRH VWG)
  - Harmonization: number of countries have adopted standards from other harmonization initiatives while others still lack a specific requirements for vaccines
  - Example:
    - Situational analysis of the regulation or biologicals in the Americas up until 2008 (1): uptake of specific regulations and requirements for vaccine registration and convergence of TDNo1 by countries

1 *Pombo ML, Di Fabio JL, Cortes MA. Re- view of regulation of biological and bio- technological products in Latin America and Caribbean countries. Biologicals. 2009;37:271–6.*

Conclusions

- Strengthening regulatory capacities is a precondition for the success of harmonization/convergence efforts
  - Issue regulatory guidelines, incorporate and deploy common standards
  - Inform on incorporation of recommendations according to level of capacity and guide capacity building
  - Leverage results from established NRAs to strengthen low-resource settings NRAs and QMS capacities
  - Adopt and adapt existing guidelines based on transparency and good regulatory practices to ensure timely and efficient implementation of PANDRH TDs (ICH procedures)
  - Ensure PANDRH participation in international standards to incorporate a regional perspective

Acknowledgments

We thank PANDRH Technical Working Group members for providing technical support during development of technical documents and for promoting and sharing best regulatory practices among countries in the Region of the Americas.