FDA DISCLAIMER



The views and opinions presented here represent those of the speaker and should not be considered to represent advice or guidance on behalf of the U.S. Food and Drug Administration.



ELECTRONIC SUBMISSIONS

eCTD Metrics and Challenges

Association for Accessible Medicines

GRx + Biosims 2018

Jonathan Resnick

Food and Drug Administration Center for Drug Evaluation and Research Office of Business Informatics



September 6, 2018 www.fda.gov

AGENDA



- eCTD Requirement
- Study Data Conformance
- Submit BE Site Information
- Top 3 Rejections and How to Avoid Them
- Frequently Asked Question



ECTD Requirement

4 September 2018 4

BACKGROUND



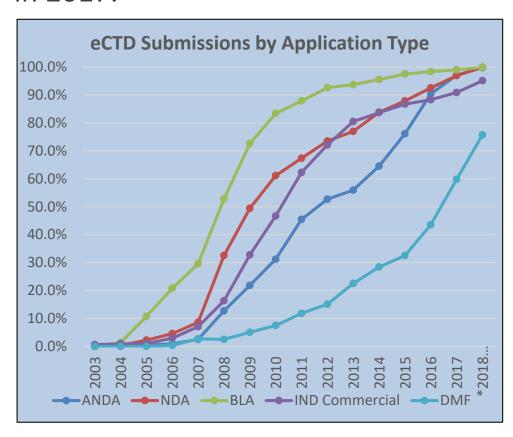
- The number of submissions to the FDA has significantly increased
- eCTD guidance became binding:
 - ✓ May 5, 2017: NDA, BLA, and ANDA must be in eCTD format
 - ✓ May 5, 2018: Commercial IND and Master Files must be in eCTD format

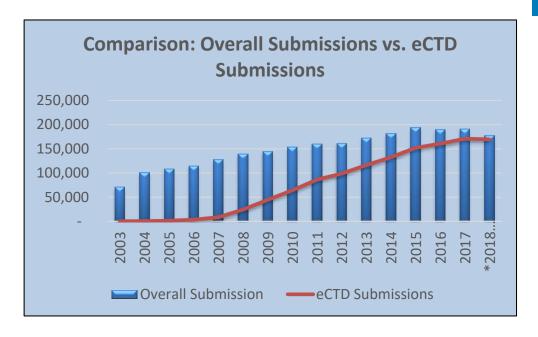


CURRENT STATE: RECEIVED SUBMISSIONS



CDER receives approximately 200,000 electronic submissions via ESG annually. Nearly 180,000 were in eCTD in 2017.



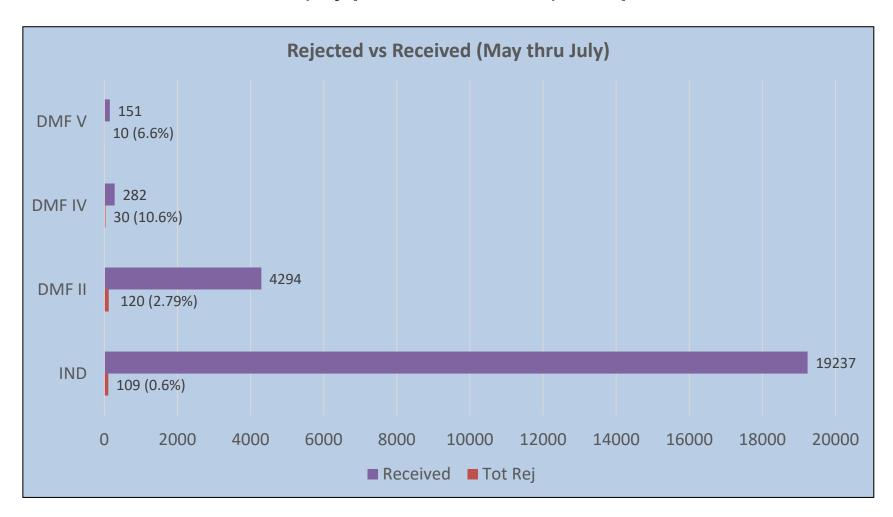


As of August 2018, 98% of the regulatory submissions (specific to Commercial INDs, NDAs, ANDAs, BLAs, DMFs Type II, IV and V) are submitted in eCTD format

ECTD SUBMISSION METRICS – CONT.



May 5, 2018: Master Files (Type II, IV & V) required in eCTD



CURRENT STATE: SUBMISSION PROCESSING



All CDER regulatory submissions received are processed by Document Room.

Current Document Room Process:

- Manually Review Approx.
 200,000 Incoming Submissions
- 2. Read the Cover Page of every submission (Approx. 850 per day) to determine submission category
- 3. Code the Submission and route to Review Divisions



FUTURE: SUBMISSION PROCESSING



Automate process to identify Submission Category

Process:

- Determine Submission
 Category based on structured data in eCTD sequence
- 2. Route to Review Division based on Submission Category

Benefit:

1. Reviewers see submission sooner



Document Room continues to process submissions where category cannot be determined automatically and submissions which contain high validation errors

FDA CHALLENGES

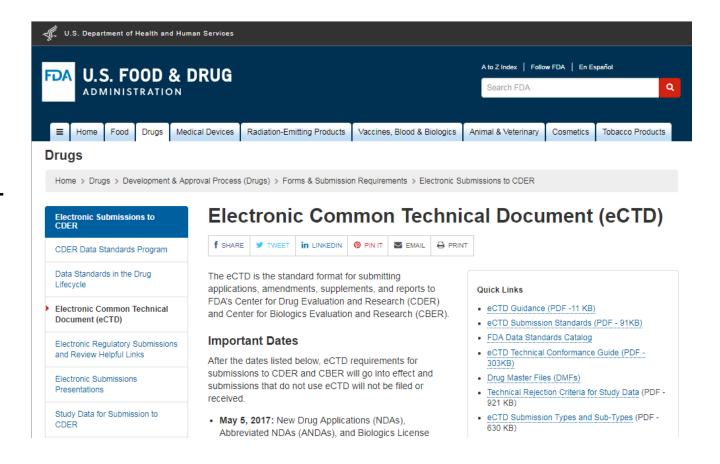


- To efficiently and effectively process the increased number of submissions and leverage the submitted structured eCTD and study data, FDA is in the process of automating inbound submissions by using structured data from the eCTD backbone files and Form 356h. However, data submitted in eCTD backbone files (e.g. us-regional.xml file) and regulatory form (e.g., Form 356h) are not always consistent.
- FDA reviewers use the state-of-the-art review tools (e.g. JMP Clinical) to support analyzing submitted study data. However, study data submitted do not always conform with the published FDA Data Standards Catalog.

ECTD BACKBONE FILES SPECIFICATION



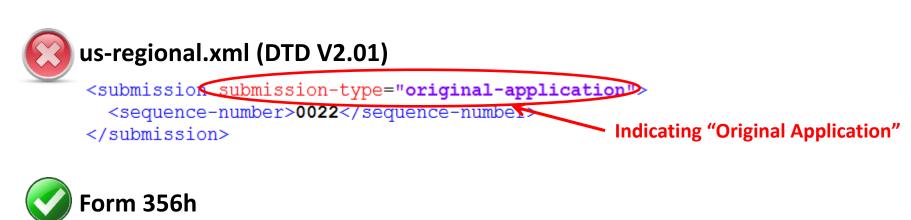
The eCTD Backbone Files Specification for Module 1" explains how to build regulatory activities using M1 elements and attributes such as submission-type, submission-id and submission-sub-type (if DTD version 3.3)



ECTD DATA DISCREPANCY EXAMPLE 1:



Can you guess the correct regulatory activity in this submission?





Indicating "Periodic Safety Report"

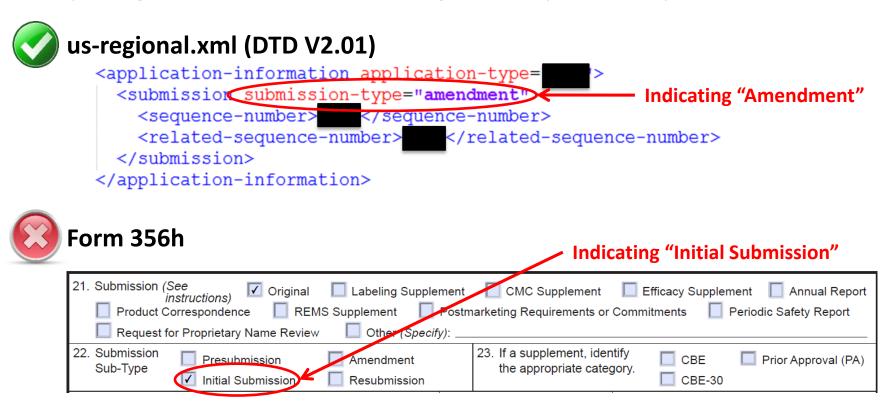
This submission was a periodic safety report.

The appropriate eCTD "submission-type" would have been "other".

ECTD DATA DISCREPANCY EXAMPLE 2:



Can you guess the correct regulatory activity in this submission?



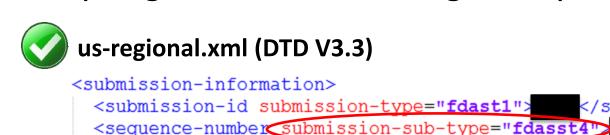
This submission was an amendment containing patent information.

The appropriate "Submission Sub-Type" on Form 356h would have been "Amendment"

ECTD DATA DISCREPANCY EXAMPLE 3:

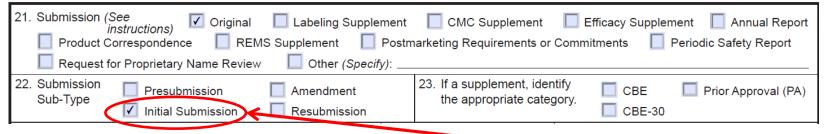


Can you guess the correct regulatory activity in this submission?



For

Form 356h



Indicating "Initial Submission"

</sequence-number>

Indicating "Amendment"

</submission-id>

This submission was an amendment to an original application.

The appropriate "Submission Sub-Type" on Form 356h would have been "Amendment"

ECTD DATA DISCREPANCY IMPACT



- When data is submitted correctly in eCTD backbone files (e.g. us-regional.xml file) and regulatory form (e.g., Form 356h), submission can be efficiently routed to the assigned review division and/or reviewer(s)
- Indicating different Submission Type and/or Submission Sub-Type in us-regional.xml and Form 356h could:
 - Impact FDA's ability to automate the submission process
 - Require addition effort to read the Cover Letter in order to resolve the discrepancy
 - May require Request(s) for Information that may otherwise not be necessary



Study Data Conformance

FDA GUIDANCE AND DATA STANDARDS CATALOG

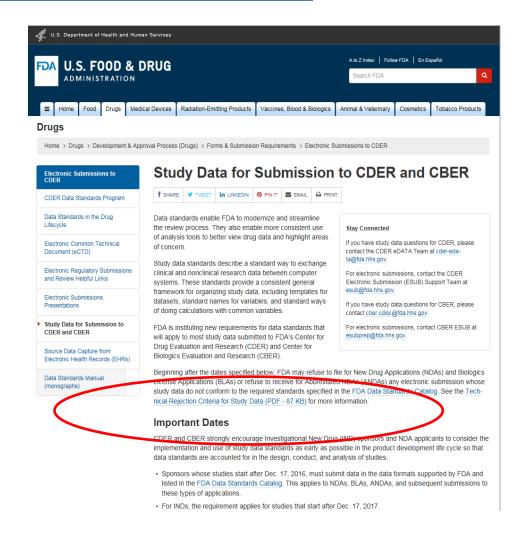


- Per FD&C Act Section 745A(a), drug application sponsors must use the standards defined in the FDA Data Standards Catalog starting 24 months after final guidance for a specific submission type.
- FDA issued "Providing Regulatory Submissions in Electronic Format -Standardized Study Data: Guidance for Industry" in December 2014.
- Sponsors must conform to standards in the FDA Data Standards Catalog
 - ➤ NDA, BLA, ANDA studies that started after December 17th, 2016
 - Commercial IND studies that started after December 17th, 2017

TECHNICAL REJECTION CRITERIA FOR STUDY DATA



- ❖ FDA published "Technical Rejection Criteria for Study Data" which specifies the criteria to be used to assess conformance to the required Study Data Standards.
- When a submission is technically-rejected, the submission sequence is not transferred from the FDA Electronic Submission Gateway into the FDA electronic document rooms.



ANALYSIS OF RECEIVED SUBMISSION WITH STUDY DATA



	All	NDA	ANDA	BLA	Comm. IND
Total Number of Submissions	85,493	24,837	38,346	7,601	14,709
Total Number of Submissions with Study Data	3,221	1,126	1,446	473	176
Total Number Submissions with Critical Errors	1,032	302	551	138	41
Error 1734	968	290	506	137	35
Error 1736 *	84	14	63	1	6
Error Rate (% among submissions with Study Data)	32.04%	26.82%	38.11%	29.18%	23.30%

^{*} Error 1736 validation is not performed if a study has Error 1734

Note: • One drug application could contain multiple submissions throughout its review lifecycle, such as original, supplements, and amendments.

- NDA, BLA, and ANDA submissions received from 12/18/2016 to 3/31/2018
- Commercial IND submissions received from 12/18/2017 to 3/31/2018
- Submission that contains multiple studies can report both Errors 1734 and 1736



Submit BE Site Information

BIOEQUIVALENCE (BE) SITES



Current Challenges

- Key components of BE site information is missing (name & address)
- > BE sites appear in various formats (Tables, Study Reports, etc.)
- ➤ BE sites not consistently placed in the correct location of the eCTD submission

Implication

Potential delayed issuance of an action letter due to misplaced or missing BE sites and relevant information.

WE NEED YOUR HELP...



To improve the access to quality data.



- Submit a complete list of all BE sites on Table 10 – Study Information
- Place BE Summary Tables in section 2.7.1 of the eCTD

Additional information about the ANDA submissions is available on the ANDA Forms and Submission Requirements Web page located at

https://www.fda.gov/Drugs/DevelopmentApprovalProcess/HowDrugsareDevelopedandApproved/ApprovalApplications/AbbreviatedNewDrugApplicationANDAGenerics/ucm120955.htm

TABLE 10 – BE STUDY INFORMATION



Study Number	Permeability Other
Study Title	In Vivo BE In Vitro BE Permeability
Study Type	In VIVO BE
Submission Location:	5312
Study Report	location, ex: 5.3.1.2 location, ex: 5.3.1.2
Validation Report	location, ex. 5.3.1.4
Bioanalytical Report	location, ex. 7.00
Clinical Site	
(Name, Address, Phone #,	
Fax#)	
Principal Clinical	
Investigator	
(Name, Email)	
Amabetical Site	
(Name, Address, Phone #,	
Fax#)	
Principal Analytical	
Investigator	
(Name, Email)	
Sample Storage: (a) Duration (no. of d	ays
(a) Duration (no. o. o. from the first day	of
sample collection	to
the last day of sa	mple
analysis)	
(b) Temperature Ra	nge
(e.g., -20°C to -8	
Long-Term Storage Stal	sility Analyte 1:
(LTSS) Coverage (no. de	Analyte 2: (if applicable) Analyte 2: (if applicable)
(LTSS) Coverage (temp °C)	T TSS should be conducted at
temp (C)	ture range.
	Note: The LT33 section of the LTSS study reports and data, inclu Specify the exact location of the LTSS study reports and data, inclu Subsection, and page(s). Provide hyperlink(s) to
LTSS Data Location	Specify the exact location of the LTSS study reports and deliberation of the LTSS study reports and deliberatio
Lissban	Module, Section, Sect
	locations as appropria

Provide a separate table for each bioequivalence study.

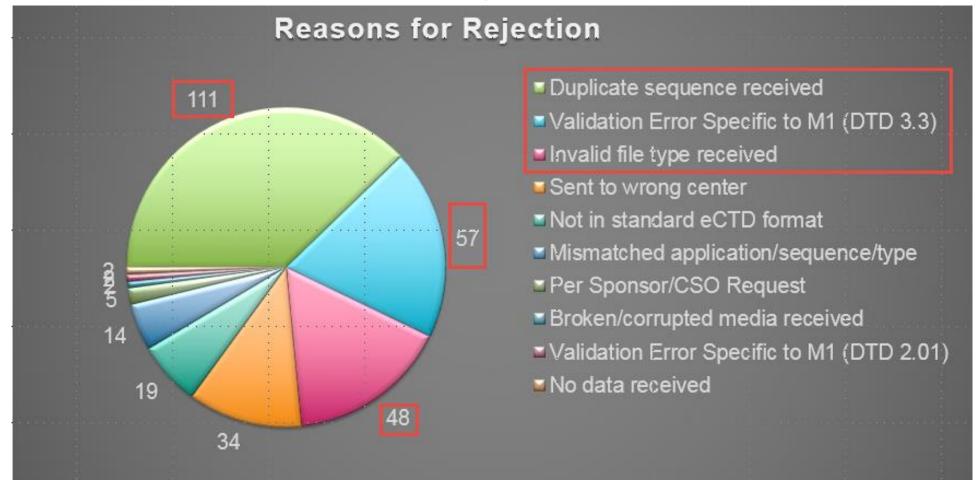
Model Bioequivalence Data Summary Tables (PDF - 185KB)



Top 3 Rejections and How to Avoid Them



❖ A closer look at the 3 most common rejections for eCTD NDA, BLA, IND, MF, ANDA (sample size: 15,765)





1. Duplicate Sequence Number Received

Issue	Resolution
Submitting revised content under same sequence number (e.g. trying to swap out a sequence)	Content should be updated by submitting changes in the next available sequence
Transfer of application but new owner is not aware of sequence numbers used	Recommend obtaining full sequence history from prior owner
Re-using a sequence number if submission has been withdrawn	Even if a submission is withdrawn, FDA continues to keep the sequence



2. Most Common M1 (DTD 3.3) Mistake

Issue

Validation Code 2022: You have used a submission-sub-type which is not allowed for the submission-type and/or type of application.

Ex: Original Application/Correspondence

Resolution

See list of valid **Submission Type** and **Sub-Type** combinations.

Resource: eCTD Backbone Files

Specifications for Module 1, Table 2:

<u>Submission Types and Descriptions of Use</u>

Table 2: Submission Types and Descriptions of Use

Submission Type	Submission Sub-Type	Supplement Effective Date Type (if applicable and submission-sub-type = "application")	Valid For Application Types
Original Application	Presubmission Application Amendment Resubmission		IND, NDA, ANDA, BLA, DMF, EUA
Efficacy Supplement	Presubmission		NDA, BLA
	Application	Prior Approval Supplement (PAS)	
	Amendment Resubmission		
Chemistry Manufacturing	Presubmission		NDA, ANDA, BLA
Controls Supplement	Application	Prior Approval Supplement (PAS), Changes Being Effected (CBE-0), or Changes Being Effected 30 (CBE-30)	
	Amendment Resubmission		
Labeling Supplement	Presubmission		NDA, ANDA, BLA
	Application	Prior Approval Supplement (PAS) or Changes Being Effected (CBE-0)	
Annual Report	Report		IND, NDA, ANDA,
	Amendment		BLA, DMF
Product	Correspondence		IND, NDA, ANDA,
Correspondence	Amendment		BLA, DMF



3. Invalid File Types

> .exe, .zip, and others single file submissions are not allowed



Frequently Asked Questions

FREQUENTLY ASKED QUESTIONS



- **❖** Where do I place my content?
- Resources:
 - ✓ <u>The Comprehensive</u><u>Table of Contents</u><u>Headings and Hierarchy</u>

The Comprehensive Table of Contents Headings and Hierarchy

Module 1 Administrative information

1.1 Forms

Form [form-type]

1.2 Cover letters

1.3 Administrative information

1.3.1 Contact/sponsor/applicant information

1.3.1.1 Change of address or corporate name

1.3.1.2 Change in contact/agent

1.3.1.3 Change in sponsor

1.3.1.4 Transfer of obligation

1.3.1.5 Change in ownership of an application or reissuance of license

1.3.2 Field copy certification

1.3.3 Debarment certification

1.3.4 Financial certification and disclosure

1.3.5 Patent and exclusivity

1.3.5.1 Patent information

1.3.5.2 Patent certification

1.3.5.3 Exclusivity claim

1.3.6 Tropical disease priority review voucher

- ✓ M4 Organization of the Common Technical Document for the Registration of Pharmaceuticals for Human Use Guidance for Industry
- ✓ FDA Regulatory Project Manager

FREQUENTLY ASKED QUESTIONS



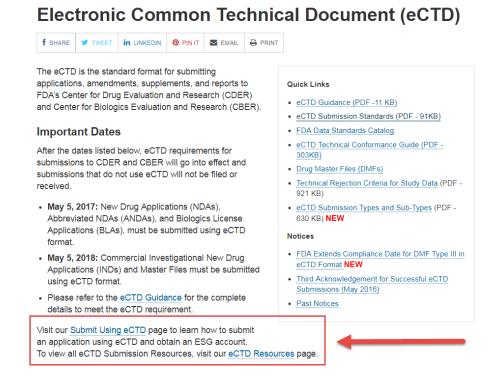
Can I submit a xyz file format?

- When creating content, follow the <u>Specifications for File</u>
 <u>Format Types Using eCTD Specifications</u> for guidance on file
 formats FDA expects under the different CTD headings
- Questions related to PDF files (e.g. hyperlinks, bookmarks, font, etc)
 - Follow FDA's PDF Specifications and communicate to vendors the need to follow these specifications

FREQUENTLY ASKED QUESTIONS



- ❖ How do I get started with eCTD?
- How do request an application number?
- How do I get a gateway account?
- These questions and more are answered on the eCTD website:



Submit Using eCTD



When submissions arrive in eCTD format, reviewers can easily find and access the information they need to review, whether it was part of the original submission or added later by the product sponsor.

Electronic submissions make it easier for FDA to review data, approve new drugs, and monitor drugs after they go on the market. Using eCTD also simplifies the process for submitters, because it is the same format used by drug regulatory agencies in other countries.

If you are new to eCTD, follow these steps to get started:

Learn about eCTD

Review the Electronic Submission Resources

Submit Fillable Forms and Compliant PDFs

Request an Application Number

Register for an Electronic Submissions Gateway Account

Send a Sample Submission to FDA

Submit Via the Electronic Submission Gateway

1. Learn About eCTD

- NEW eCTD Submission Requirements: What You Need to Know fact sheet (PDF 224KB)
- Recent eCTD presentations by FDA staff
- CDER Small Business and Industry Assistance (CDER SBIA) Webinar Electronic Submission Requirements for ANDAs: Are You Ready? – November 21, 2016

Tip: Build and maintain a knowledge base by staying informed about existing, new, and updated eCTD-related tools and information

WHERE TO GET HELP

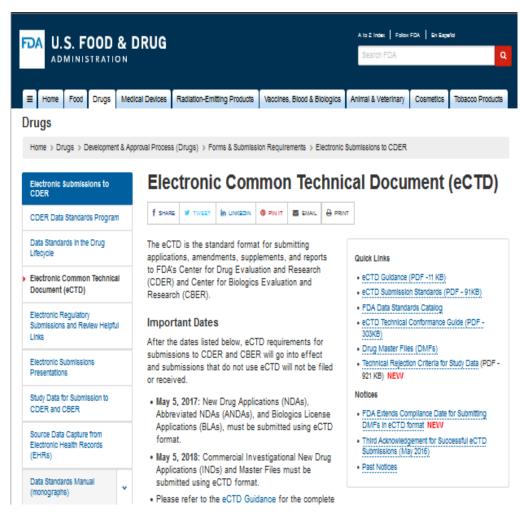


Specification documents are posted on www.fda.gov/ectd in the

eCTD Submission Standards

- Validation Documents Include:
 - > eCTD Validation Specifications
 - ➤ Technical Rejection for Study

 Data Criteria
- CDER submissions, contact:
 - ➤ EDATA@fda.hhs.gov
 - >ESUB@fda.hhs.gov







Modernizing interactions between CDER and industry

Association for Accessible Medicines

GRx + Biosims 2018

Jonathan Rappaport, MBA

Food and Drug Administration Center for Drug Evaluation and Research Office of Business Informatics

September 6, 2018 www.fda.gov

WHAT OPPORTUNITIES DO WE HAVE TO IMPROVE COMMUNICATIONS BETWEEN CDER AND INDUSTRY?



Much of today's regulatory communication is sent through a collection of **emails** and submissions to the **Electronic Submission Gateway**.

WHAT OPPORTUNITIES DO WE HAVE TO IMPROVE COMMUNICATIONS BETWEEN CDER AND INDUSTRY?







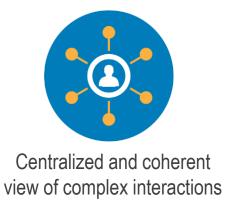








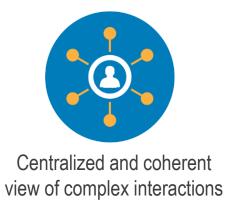






















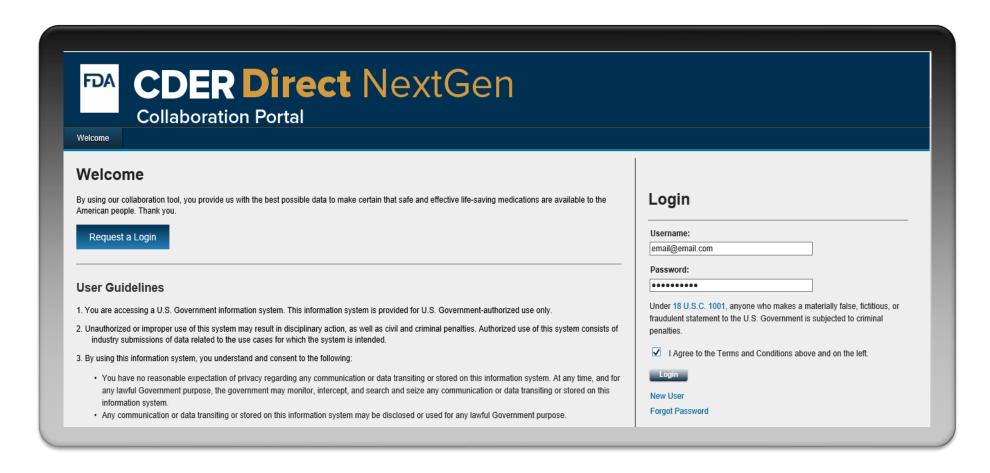




WHAT ARE WE DOING TO SHIFT THE PARADIGM?



The CDER Direct NextGen **Collaboration Portal** is a **cloud-based** system that has enabled a transformation in the way CDER and industry work together. It serves as a "**one-stop-shop**" for your communications.









<u>Streamlined</u> step-by-step guidance through the submission process with dropdown menus and fillable fields





Streamlined step-by-step guidance through the submission process with dropdown menus and fillable fields



<u>Live</u> validation against CDER's master data with instant discrepancy reconciliation requests





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Real-time status updates and notifications to submission owners





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<u>Centralized</u> chronological view of all communications and documents





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<u>Full integration</u> with CDER's internal work management systems





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Real-time status updates and notifications to submission owners



<u>Centralized</u> chronological view of all communications and documents



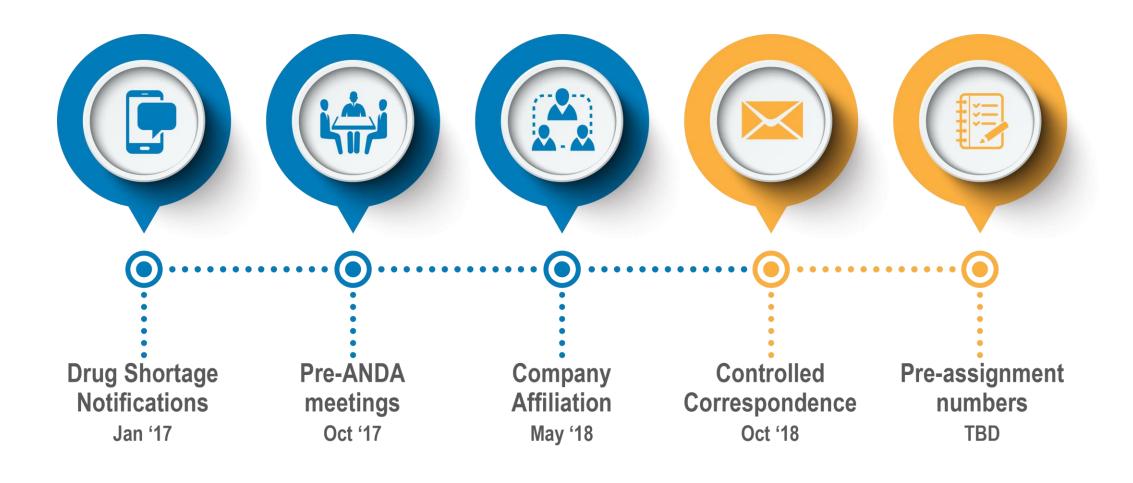
<u>Full integration</u> with CDER's internal work management systems



Scalable cloud architecture to accommodate future growth

WHAT HAVE WE ALREADY DONE, AND WHAT COMES NEXT?

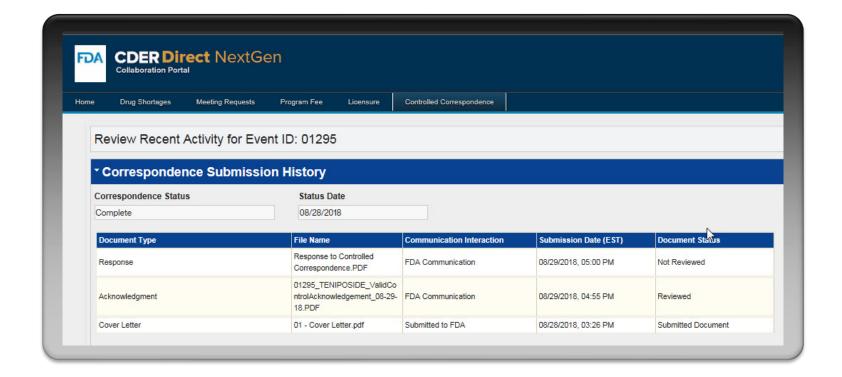




WHAT CAN YOU EXPECT FOR CONTROLLED CORRESPONDENCE?



Email announcement from CDER in the coming weeks informing you that the Collaboration Portal will be ready to receive your Controlled Correspondences



HOW ARE WE SECURING YOUR INFORMATION?





The Collaboration Portal is compliant with FedRAMP cloud service security requirements.





EARLY SUCCESS FOR THE COLLABORATION PORTAL



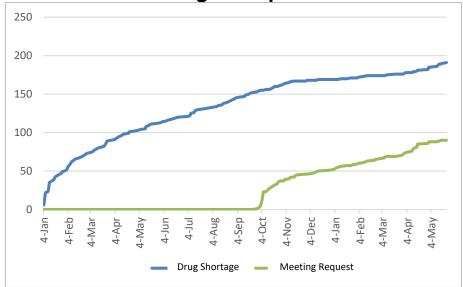
248

148

Unique Users

Registered Companies





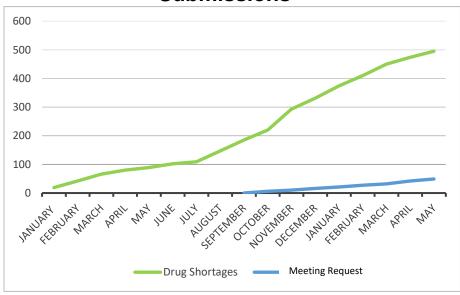
495

Drug Shortages Notifications

49

Meeting Requests

Submissions



WHAT ARE PEOPLE SAYING?







Collaboration in the cloud is an evolution for **efficiency** in our communications. It's an enabling technology that paves the way for significant improvements in the regulatory process.



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Some aspirational business process transformations:

356h online: enter key data once rather than re-sending with each submission



Collaboration in the cloud is an evolution for **efficiency** in our communications. It's an enabling technology that paves the way for significant improvements in the regulatory process.

Some aspirational business process transformations:

- 356h online: enter key data once rather than re-sending with each submission
- Administrative changes: use a tailored interface to update responsible official, address, etc., rather than a using a "one size fits all" form



Collaboration in the cloud is an evolution for **efficiency** in our communications. It's an enabling technology that paves the way for significant improvements in the regulatory process.

Some aspirational business process transformations:

- 356h online: enter key data once rather than re-sending with each submission
- Administrative changes: use a tailored interface to update responsible official, address, etc., rather than a using a "one size fits all" form
- Information request: capture the complete chronological view of the back-and-forth involved in information requests and responses

THANK YOU

