Emerging Markets

The precise definition may vary, but the term is usually applied to nations in the process of rapid economic growth. The number of countries described as such has grown over the years. South Korea, China, Russia and parts of Latin America, Eastern Europe, Africa and the Middle East can now count themselves as emerging markets.
Having been propelled to the forefront of global economic growth, how are the Medicines Regulatory Agencies faring?

To start with, Regulatory agencies in emerging markets are gaining experience with respect to regulations prevalent in regulated markets. Another welcome development is that many of the emerging countries are updating their guidelines to keep pace with the changing regulatory scenario in different regions of the world.

Harmonization of Regulatory Standards is in progress among various countries of Asia. The Agencies themselves are getting better connected with each other by accepting harmonised dossier formats and registration guidelines like in case of ASEAN (Association of South East Asian Nations) group of countries. Currently, the member countries of ASEAN are: Brunei Darussalam, Cambodia, Indonesia, Laos, Malaysia, Myanmar, Philippines, Singapore, Thailand, and Vietnam. The mission of the PPWG (Association of South East Nations Pharmaceutical Product Working Group) is to develop harmonisation schemes of pharmaceutical regulations of the ASEAN Member countries to complement and facilitate the objective of AFTA (ASEAN Free Trade Area). Particularly, the elimination of technical barriers to trade posed by regulations, without compromising on drug quality, efficacy, and safety. (Reference: www.ich.org)

The PPWG’s scope of harmonisation/cooperative activities includes: (Reference: www.ich.org)

- the discussion of existing technical guidelines and regulatory requirements
- the study of harmonized procedures and regulatory systems currently implemented in other regions relating to technical guidelines and regulatory requirements
- the harmonization of technical guidelines and regulatory requirements applicable to the ASEAN pharmaceutical industry
- the development of Common Technical Documents with a view to arriving at Mutual Recognition Arrangement (MRAs).

Pharmaceutical products covered within ASEAN’s scope includes New Chemical Entities (NCEs), biotechnological products, major and minor variation products, as wells as generics.
Global Regulatory Challenges
In contrast to the efforts of ASEAN, a distinct lack of harmonisation is prevalent among other regions like Africa and Latin America. Some nations continue to maintain and update their own specific guidelines. In some cases, these guidelines are not aligned with ICH. The International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH) brings together the regulatory authorities and pharmaceutical industry of Europe, Japan and the US to discuss scientific and technical aspects of drug registration. ICH is playing a critical role with respect to Regulatory harmonisation, which is beneficial to both regulatory agencies and the pharmaceutical industry. Many countries have started accepting ICH technical guidelines and Common Technical Document as a standard dossier format. Although, some Regulatory Agencies still have their own set of requirements and dossier formats.

Adoption of new guidelines:
This poses a challenge with respect to the review process. The agencies need to have technical experts in the areas of quality, regulatory, analytical, clinical etc. who understand the requirements thoroughly. The need for experts compounds the delay in the review process within Regulatory Agencies due to a lack of resources. The level of expertise for technical review of the dossiers for Chemistry, Manufacturing and Controls, Clinical and non-clinical partly varies with different regulatory agencies. Most countries rely upon CPPs or Certificate of Pharmaceutical Product, especially when importing. The CPP scheme was introduced by WHO (World Health Organisation) to support countries with undersized Medicines Regulatory Authorities or Agencies without a fully developed Quality Assurance facility.

The language barrier:
Guidelines are available in the local language for most countries. Furthermore, dossiers and labelling are generally submitted in the country’s local language.

Separate audits are done by the regulatory agencies of different markets. Brazil conducts its own inspections, while some regulatory agencies accept certifications from regulated/developed markets.

Technical Challenges and possible solutions
In order to promote the harmonisation of Drugs Regulatory Agencies, especially between the more established and Emerging Markets, a number of technical challenges (below) need to be encountered, and resolved.

1. Global product development for different countries is hampered by varying regulatory requirements.
   This can be overcome by involving regulatory colleagues from the beginning itself as part of global product development.

2. The Global stability programme is made difficult due to countries falling in different temperature zones.
   One possible solution would be to consider the requirements of all targeted markets early on in the process.
   Another idea would be to keep the batches on stability at accelerated and real time conditions, meeting the requirements of all targeted markets. This will involve an upfront investment due to high initial costs, however in the long run, future filings will be more time and cost efficient throughout various emerging markets.
3. Labelling varies throughout different countries. Keeping inventory stock of packaging material for different regions/markets poses a challenge. A way to manage this within the company would be to harmonise labelling within the region, as a minimum. For example, harmonising labelling for Latin American markets within the company, wherever possible and keeping same inventory of packaging material (instead of having different labelling for different countries in Latin America). However, the benefits of this would only be reaped once labelling is harmonized by the Regulatory Agencies within their respective regions, as a minimum. For example within all Latin American countries or within all African countries.

4. There is a lack of formal pre-submission meetings or scientific advice. This leads to issues later in the process once the submissions are complete. This can be overcome by consulting experts/regulatory agency (wherever possible) with any technical concerns at the product development stage as well as during clinical development/Bioequivalence programme.

The way forward
We have discussed the global and technical challenges faced by Medicines Regulatory Agencies establishing themselves within emerging economies, along with some suggested solutions.

The next step? Building and maintaining close collaboration with the Regulatory Agencies is critical. Furthermore, a thorough understanding of national guidelines and requirements is imperative.

Gaining approval in regulated markets provides an automatic advantage. While some markets’ Regulatory Authorities may require site inspections, this can be waived if the manufacturing site has already been inspected by any of the Regulatory Bodies of the EU, US, Australia, Canada or Japan.

Collaborating with Regulatory authorities at the initial stages of the Global Product Development Plan is necessary in order to cater to the requirements of diverse emerging markets from different regions. It is a must to have a technically sound regulatory expert to coordinate with regulatory agencies (with his first language as the local country’s language).

A global stability programme and harmonized labelling (wherever possible) for emerging and regulated markets would also generate significant savings in time and resources.

In summary, Emerging markets offer huge opportunities with more and more companies looking to register medicinal Products in these markets. The gradual shift towards harmonisation by Regulatory agencies represents a significant leap in the right direction.

About the author
A regulatory affairs consultant, Sarita specialises in global submissions. She has worked as the Global Head of Regulatory Affairs at both Pfizer and Fresenius Kabi. Sarita holds a Masters Degree in Pharmaceutics from the Delhi Institute of Pharmaceutical Sciences and Research, India.