



# Medsafe consultation submission

<b>Guideline on the Regulation of Therapeutic Products in New Zealand - Part 10: Requirements for information for prescribers and consumers (Edition 7.0)</b>	
<b>Name and designation</b>	
<b>Company/organisation name and address</b>	Apotex NZ Ltd [Redacted]
<b>Contact phone number and email address</b>	
I would like the comments I have provided to be kept confidential: <i>(Please give reasons and identify specific sections of response if applicable)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<i>(Reasons for requesting confidentiality must meet Official Information Act criteria)</i>	
I would like my name to be removed from all documents prior to publication on the Medsafe website.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
I would like for my name not to be included within the list of submissions published on the Medsafe website.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

It would help in the analysis of stakeholder comments if you provide the information requested below.

<b>I am, or I represent, an organisation that is based in:</b>			
<input checked="" type="checkbox"/> New Zealand	<input type="checkbox"/> Australia	<input type="checkbox"/> Other <i>(please specify):</i>	
<b>I am, or I represent, a: <i>(tick all that apply)</i></b>			
<input checked="" type="checkbox"/> Importer	<input checked="" type="checkbox"/> Manufacturer	<input checked="" type="checkbox"/> Supplier	<input checked="" type="checkbox"/> Sponsor
<input type="checkbox"/> Government organisation	<input type="checkbox"/> Researcher	<input type="checkbox"/> Professional body	<input type="checkbox"/> Industry organisation
<input type="checkbox"/> Consumer organisation	<input type="checkbox"/> Member of the public	<input type="checkbox"/> Institution (eg university, hospital)	
<input type="checkbox"/> Regulatory affairs consultant	<input type="checkbox"/> Laboratory professional		
<input type="checkbox"/> Health professional – <i>please indicate type of practice:</i>			
<input type="checkbox"/> Other - <i>please specify:</i>			

Please return this form to:

**Email:** [medsafeadrquery@moh.govt.nz](mailto:medsafeadrquery@moh.govt.nz) including "Data sheet guideline" in the subject line

**Or Post:** Clinical Risk Management  
Medsafe  
PO Box 5013  
Wellington 6145

**Medsafe is seeking comments on the following:**

1. References to overseas prescribing information or using a source document have been removed from this revision of the Guideline. The reason for this is that medicine sponsors should rely on their own core data set or reference safety information in order to prepare their data sheet provided they are entirely consistent with the New Zealand approved particulars for the medicine, or follow the market innovator or market leader in preparing their data sheets.

- Do you have any comments on this change?

Medsafe should allow the generic companies to refer to overseas source documents for products where the innovator is no longer available in the NZ market and the innovator is no longer maintaining their datasheet with the latest findings of clinical studies, adverse reactions etc. This will ensure that information is current and up to date not only in New Zealand but consistent with other markets.

2. *Section 2.4: General requirements for data sheets*

- Are the general requirements appropriate?
- Is the information easily understood?
- Are there other general requirements that you think should be included in the guideline?

No comment

Please include additional pages if necessary.

3. *Section 2.5: Format and style consistency in data sheets*

The EU SPC format that is proposed to be adopted has been adapted in order to meet New Zealand requirements (see [Data sheet template and particularly the Data sheet template explanatory guide](#)). These adaptations are summarised below.

- References to herbal medicines have been removed.
- Sections on dosimetry and radiopharmaceuticals have been deleted (these are not currently medicines in New Zealand).
- A 'black triangle' system for warnings is not used.
- The data sheet can cover more than one dose form / strength / formulation.
- The EU SPC does not allow registration and trademarks to be included. In New Zealand, sponsors may include such markings in the data sheet if they wish, provided this does not adversely affect the layout of the final data sheet.
- Information regarding biosimilars and non-interchangeable medicines required by current Medsafe regulatory policy has been inserted in Section 1, Section 2, Section 4.2 and Section 5.1.
- Section 4.2 heading Posology and administration is changed to Dose and method of administration.
- In Section 4.8, a link (web address) for reporting suspected adverse reactions to the New Zealand Pharmacovigilance Centre is required to be included.
- In Section 4.9, NZ Poisons Centre details are required to be added in the Overdose subsection.
- In Section 5, information to state whether the medicine is approved under "Provisional Consent" is required.

- In Section 5.2, antibiotic specific information (which is in the current data sheet checklist) is required to be included.
- In Section 5.3, reference to environmental risk assessment is not necessary and should not be included.
- In Section 7, medicine classification is required to be included.
- Section 8 heading Marketing authorisation holder is changed to Sponsor, and as authorisation number (as used in Europe) does not apply, this should not be included in New Zealand data sheets.

- Do you agree with the adoption and adaptation of the European Summary of Product Characteristics format as summarised above and presented in the [Data sheet template](#) and the [Data sheet template explanatory guide](#)?

- If you do not agree, please explain why and suggest suitable alternatives.

- Are there any changes you would like to suggest?

Apotex supports the harmonisation of all data sheets across all sponsors and the alignment of the NZ datasheet to the EU SPC format.

Note that the current TGA guidelines require the Australian PI to be included in an injectable pack as the package insert. Harmonised stock between both countries will no longer be possible as differing pack inserts will be required. Would Medafe accept Australian PIs being used as pack inserts as long as the information was consistent across both markets?

Please include additional pages if necessary.

4. Medsafe considers that the proposed switch to the adapted EU SPC format should involve only formatting and layout changes and does not involve changes to the content of the data sheet. Medsafe proposes the following timelines for implementing the changes to the new process and switch to the new data sheet format:

#### New Medicine Applications

- a) New Medicine Applications where evaluation has not commenced – a data sheet in the proposed format should be submitted with the response to the initial Request For Information (RFI 1), or the Outcome of Evaluation letter.
- b) New Medicine Applications where evaluation has commenced or are in the final stages of assessment – a data sheet in the new format should be submitted in response to the Outcome of Evaluation letter.
- c) New Medicine Applications where evaluation has been completed and a recommendation for consent is made – data sheets should be submitted in the new format within 10 days of consent to distribute being notified in the New Zealand Gazette.

#### Changed Medicine Notifications

- d) Changed Medicine Notifications already submitted to Medsafe – data sheets do not have to be updated to the new format until 1 January 2017.
- e) Changed Medicine Notifications yet to be submitted to Medsafe – where the change(s) affects the data sheet, the data sheet should be submitted in the new format with the notification.

#### All other instances

- f) A Self-Assessable Change Notification for reformatting all existing data sheets to the new format should be submitted by 1 January 2017.

g) Where there are other material changes instead of just a reformatting of the data sheet (such as content changes), the Changed Medicine Notification process should be followed.

- Do you agree with these proposals?

- If not, what do you suggest?

Apotex agrees with the proposal for datasheet updates in regards to NMA applications.

Apotex does not support the timeframe or fees associated with self-assessable datasheet updates.

We suggest a minimum of 12 months from the date of implementation of the revised Part 10 for marketed products / published datasheets.

If the datasheet is reformatted only and there is no change to the content of the datasheet there should be no fee associated with this. Any changes to content of the datasheet would be submitted as a SACN or CMN as applicable, dependent of the changes.

For any non-marketed products the sponsor could provide a commitment that the datasheets will be updated prior to any product launch

Please include additional pages if necessary.

5. Medsafe proposes that current data sheets in the Australian format should be revised to the proposed format by 1 January 2017. This is expected only to involve a "shuffling" of existing content. Medsafe emphasises that these proposals do not affect package inserts or consumer medicine information.

- Do you agree with this proposal and the deadline? If not, please explain.

N/A – Apotex has no datasheets in the Australian format

6. The current Medicines legislation mandates the use of the term "Data sheet". One objective of this consultation is to help inform the thinking for the new Therapeutic Products Bill. Would you prefer the term "Data sheet" to continue to be used, or for the use of an alternative term such as "Product Information", "Prescribing Information", "Summary of Product Characteristics", or another term altogether?

- Please advise us of your preference. If you consider that a different term to "Data sheet" should be used, please explain.

Apotex is happy to retain the term 'Datasheet' If any changes were to be made then Product Information to align with Australian terminology or Prescribing Information would be the preference

Please include additional pages if necessary.

7. It is envisaged that greater use of technology will facilitate communication about products distributed in New Zealand, and the dissemination of information about how to use medicines appropriately, for example current use of QR codes to access information. For example, internet links included in data sheets or consumer medicine information to instructional how-to-use video or further educational materials.

- How do you see the expansion of e-information contributing to patient safety?
- How do you see e-technology and medicine information being used in the future?
- What do you think are the benefits or drawbacks of these advances?
- Where do you think Medsafe should be heading?

Apotex supports the idea that technology could be used to facilitate communication and provide additional information to healthcare providers and the end user. Medsafe would need to provide clear guidelines as to what is and isn't permissible as any links etc provided must remain consistent with the NZ approved product information.

As sponsors we need to ensure that the full product information be available to healthcare professionals and patients.

8. If you are a medicine sponsor as well as a medical device sponsor, do you think that a data sheet (or similar) should be available for higher-risk medical devices? Is there alternative or suitable terminology that could be used for such an information sheet?

Apotex is not a sponsor of any devices

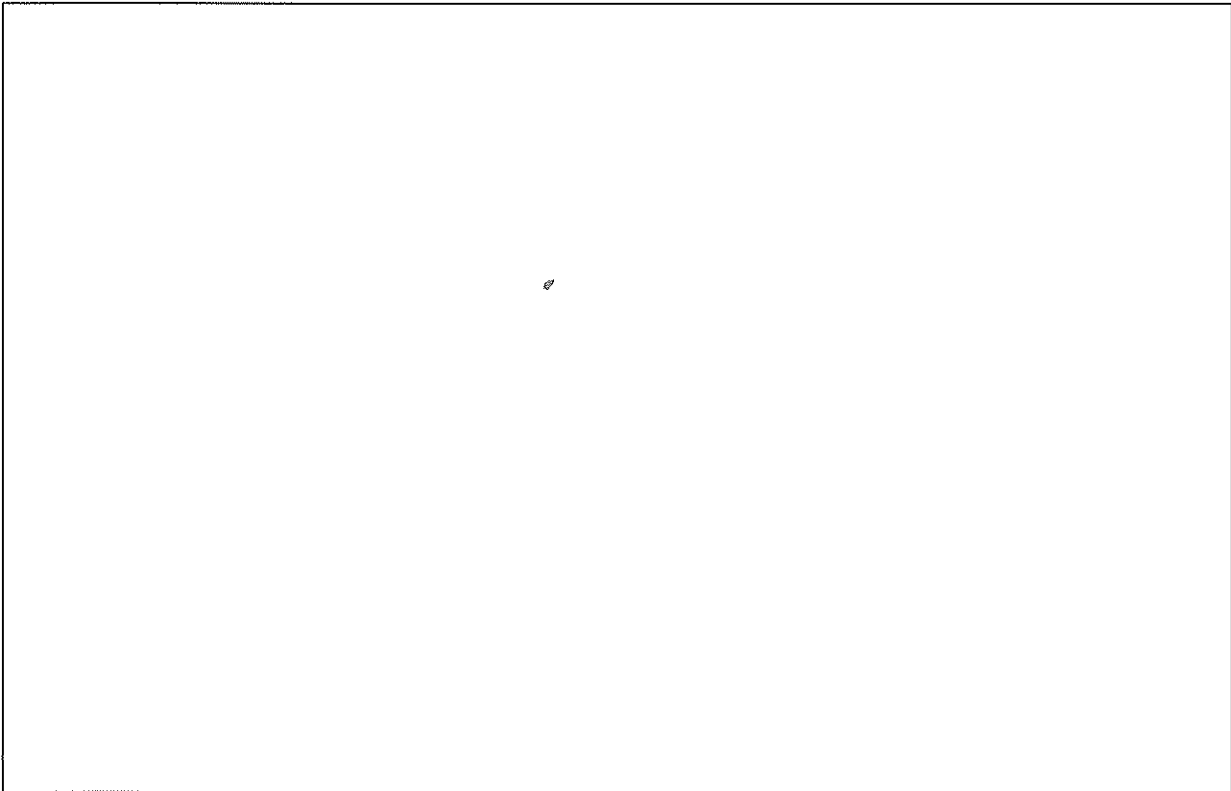
Please include additional pages if necessary.

9. Would you support making device data sheets a requirement for medical devices when they are notified to WAND?

Apotex is not a sponsor of any devices

10. *Additional Comments*

- Is there any other information or subject that you would like to raise?
- Is there anything else that should be included in the data sheet guideline?



Please include additional pages if necessary.