FAQ

eSubmission

Version 0.92.1, Aug 2015

About the Food and Drug Administration Thailand - Bureau of Drug Control

- The Bureau of Drug Control has set a vision as an institute with reliability and good reputation in consumer protection. The public is thus assured of accessibility to safe and efficacious marketed pharmaceutical products of standard quality, to reliable and adequate information, and to advance technology. The Bureau promotes the production capacity of local pharmaceutical industries to the extent that they are able to export medicines of standard quality.

- The Bureau carries out its mission in consultation or cooperation with experts in science, medicine, pharmacy and public health, consumers, manufacturers, importers, distributors and retailers of drugs. It works closely with several other organizations (e.g. universities, industries, hospitals, health-care professional groups, consumer groups, other relevant agencies and foreign governments) in the drug development and review processes.

Version History

Version	Description of change	Working Group	Effective date
V0.92.1	Draft FAQ	**Ms.Anchalee Jitruknatee** Pharmacist, Senior Professional Level and eCTD Project Manager **Mr.Kritsada Limpananont** Pharmacist, Professional Level and eCTD Project Deputy Manager	03/08/2015

Table of Contents

1.0 Software Requirements

1.1 Do eCTD submissions need to be compiled and published using software by LORENZ or can any similar software be used?

Applicants are free to use any appropriate software to compile and publish eCTD submissions. Submissions must pass the FDA's validation processes to be accepted.

1.2 Does FDA recommend the use of eCTD compilation and viewing tools and if so should this be the LORENZ tool?

The FDA does recommend the use of an eCTD compilation system but no specific system is recommended.

1.3 What is the maximum file size of an entire eCTD submission that is accepted by the FDA?

The maximum size of an individual PDF file is 100MB. There is no maximum for the entire submission.

1.4 Will the eCTD format be acceptable for new drug, new generic, new biological, and generic?

Yes.

1.5 Will medical devices be included in the eCTD project?

Medical devices will not initially be included. Medical devices are likely to be included when the international standard for Regulated Product Submissions (RPS) is sufficiently stable.

1.6 Will the eCTD applications be submitted via the internet portal?

Initially application submissions will be via electronic media. A future phase will examine internet portal requirements.

2.0 Transition

2.1 Is there going to be a transition period for eCTD submissions and how long will this be?

After the completion of the eCTD pilot phase, applicants can opt in as they choose. Applicant can choose to submit paper ACTD or electronic eCTD. However, once a submission for a product is submitted in the eCTD format, all future submissions for that product must be in the eCTD format.

2.2 When does eCTD submission will be mandate?

eCTD Submission will be mandate for New Chemical Entity, New Drug, New Biological, Biological and optional for Generic and New Generic in 2016.

In 2017 eCTD submission will be mandate for all submission.

2.3 Will the FDA be providing comprehensive resources on their website for industry to have a single source of truth on eCTD requirements for the FDA?

FDA intends to provide comprehensive resources on a dedicated page of the FDA website. If, after reviewing this page, you believe further information is required, please send an email outlining your request to drug_esubmission@fda.moph.go.th.

2.4 Is any paper going to be required with eCTD submissions to the FDA?

It is expected that submissions in the eCTD format will not need to be accompanied by a paper copy of the application however the paper should be available upon request.

2.5 Does the FDA recommend or welcome applicants submitting 'test eCTD submissions' to the FDA?

As validation tools will be available and the system is being developed in stages (e.g. initially electronic media) it is expected that each submission will be tested by applicants before submitting to the FDA as a final submission. In these circumstances it should be unnecessary to submit 'test eCTD submissions'.

2.6 Will all variations be submitted via eCTD or just new registration applications?

We expect to be able to receive all types of submissions, including variations (with baseline eCTD submissions), in the eCTD format. Once a submission for a product is submitted in the eCTD format, all future submissions related to that product must be in the eCTD format.

2.7 Does the first eCTD sequence number need to be '0000'?

The first eCTD submission for any product (including a new application or the accumulated documents to date of an existing product) has a sequence number of 0000.

If a baseline eCTD submission is provided, the baseline should normally be submitted as sequence 0000. The baseline is a separate submission and should not include any requests for new regulatory actions. The first new regulatory activity relating to a product, e.g. the next variation, in eCTD format should then be submitted as sequence 0001.

2.8 Will a submission be given review priority by virtue of it being in the eCTD format?

No

2.9 Is there going to be any financial incentive for submitting in eCTD compared to hard copy (paper) (reduced fees/quicker review time)?

There are no incentives planned to encourage eCTD submissions apart from the benefits of the reduced need for a paper copy of the application.

3.0 Submission and Sequence Numbers

3.1 Can we set our own sequence numbers to track our applications or does the FDA intend to generate these?

Sequence numbers for a particular submission start at 0000 and increment by 1 each time.

3.2 Do eCTD sequences numbers need to run sequentially or can eCTD submission be sent out of sequential order (e.g. a delay submitting sequence 0012 means sequence 0013 is submitted before 0012)?

The sequence need to be submitted in sequential order to minimise any delays in the process, out of sequence isn't recommended.

3.3 Can we set our own eSubmission identifier numbers or does the FDA intend to issue numbers that we need to track the application with?

Applicants require an eSubmission Identifier, issued by FDA, in the 'envelope' information for each submission. The submissions will be stored against this number and subsequent sequences must include this identifier.

3.4 How do I get an eSubmission Identifier?

To get an eSubmission Identifier, the applicant should submit a request for an eSubmission identifier should made via website (THAI FDA e-logistic data base). The request will require the following information:

- Licensee Number
- Description of Application.
- Dosage Form
- INN or Generic Name
- Strength
- WHO ATC Code
- Sequence Type
- Application form
- CPP (In case of Importer)

3.5 Can multiple 'Sequence Types' be submitted in a sequence number?

Only one sequence type can be used for each sequence number. However applicants can submit more than one sequence at a time, a sequence description should be provided in the tracking table.

4.0 Validation Requirements

4.1 Will the FDA release a list of the validation criteria for eCTD?

The FDA validation criteria will be available on the web site

4.2 Will the FDA validate an application upon submission or will we need to do this ourselves.

The FDA will validate all eCTD submissions.

The FDA will require a copy of the applicant's validation report as part of the submission to allow for variations in the validation tools over time. It is in the applicant's interest to validate before submission as failing validation may cause delays or rejection or losing application(if applicable) during the application processing.

The applicant is fully responsible for the correctness and completeness of the submitted files within any type of electronic application submitted to the FDA. To this end the applicant must ensure that the submitted file will comply with the full requirements as laid down in the ICH specifications and the Thailand requirements as published on the FDA website.

4.3 Will the FDA notify the sponsor if there are any validation errors after submitting the eCTD to the FDA? Will there be time for validation errors to be fixed before the eCTD is technically rejected?

The technical validation of an eCTD formatted submission is a separate activity to the content validation of a submission and takes place irrespective of the type of the submission. FDA will adopt a set of technical validation criteria against which all eCTD sequences can be checked. Four categories of validation rules apply: 'Pass/Fail', Information and 'Best Practice'.

Sequences that fail to meet one or more of the 'Pass/Fail' criteria will be returned to the applicant for correction and resubmission. FDA may accept sequences that fail to meet one or more of the 'Information' and 'Best Practice' criteria; however, the applicant should make every effort to address these areas before the eCTD is submitted to FDA.

4.4 Validation criterion 14.BP1 states that this value must be specified for any 'sequence-type' that is equal to either 'J-SUPPL' or 'corrigendum'. However, 'corrigendum' is not referred to in the guidance in any manner.

TH Validation criteria of 'J-SUPPL' or 'corrigendum' is consider as best practice in TH Validation criteria.

5.0 Document Requirements

5.1 What is the working documents folder for and what should be submitted in this folder?

The Product Information should be provided in PDF format within the eCTD. Working documents are not needed and do not need to be provided within the eCTD framework for Thailand.

5.2 Will correspondence to the FDA need to be in eCTD format or can industry still send documents via email?

Documents and significant correspondence should be via eCTD sequences (e.g. responses to requests for additional information).

5.3 Are there any submission types that will not need to be submitted in eCTD format (GMP certificates, SMF, etc.)?

The eCTD format is regarded as the principal electronic submission format for Thailand. FDA expects that all submissions will be able to use the eCTD format including registration applications, master files and periodic safety update reports.

5.4 How will replacement of pages work in variation applications if the numbering of the original eCTD does not go down to that level?

Under the ICH eCTD standard, the applicant can submit new sequences. A sequence can lifecycle complete documents (replace or delete documents), or add new documents. For example, an application for updated product information involves submitting a new sequence with the administrative information and the proposed new documents.

The applicant should choose the appropriate level of granularity for an electronic application. When relevant information is changed at any point in the product's lifecycle, replacements of complete files should be provided in the eCTD.

5.5 Does the FDA recommend the use of the 'append' operation in LifeCycle management?

No.

5.6 Does the FDA accept cross referencing to documents in previously or concurrently submitted eCTD sequences?

Cross referencing to other eCTD submissions is allowed under the eCTD standard as long as the location of the file is accurately cited in the xlink:href attribute for the leaf element referencing that file.

This aspect will be subject to testing in the FDA implementation. It is not known yet if the FDA can rely on cross referencing so initially applicants should supply appropriate copies of documents.

5.7 If there are products with the same active ingredient, dosage form and therapeutic group but has more than one strength, will there need to be separate eCTD applications for each of the registration?

Only one eSubmission identifier will be issued to cover all strengths.

5.8 Will FDA accept modified United States Food and Drug Administration (FDA) submissions that include Study Tagging Files (STFs)?

The submission in eCTD format must adhere to the Thailand Module 1 and ICH specifications. Submission including STFs will be accepted but are not required. However, if STFs are included, they must pass validation. If an FDA submission containing STFs is modified by removing the STFs, the study files must be organized using node extensions.

5.9 What is the intended purpose and proposed format of Section 1.0.1 Tracking Table?

The Tracking table is an overview of the eCTD lifecycle for an application in human readable format. It is essentially a Table of Contents of the Sequences. This should be submitted as part of applicant.

5.10 Do applicant have to renumbering the documents?

Module 1 structure are define in TH eCTD specification and Module 2-5 can be submit according to ICH eCTD Specification Document.

5.11 What is the scanned document requirement?

Documents, Plotter, Chromatography and Similar images should be scanned at a resolution of 300 dots per inch (dpi) to balance legibility and file size. The use of grayscale or color is discouraged because of file size.

Hand-written note, Photographs, Gels and Karyotypes should be scanned at least 600 dpi

OCR(Optical character recognition) is enabled.

5.12 What are the recommend document practice?

Node	Title	Recommend Practice
1.3.1	SPC, Labelling and Package Leaflet	Document template should include line number which can be reference during evaluation process
1.R	Response to Questions	Document should include hyperlink to each section for change or response to comment

6.0 Storage and Access

6.1 How will the eCTD be stored at the FDA?

The folder structure of eCTD submissions will be preserved in the FDA's file storage system under a folder named the same as the eSubmission Identifier. Subject to testing, this may allow for cross referencing of documents between submissions.

6.2 If the submission is electronic only, will the requirement for the sponsor's archive copy to be in electronic format only as well?

Applicants should maintain archival copies of submissions according to their business rules. FDA recommends archiving all applications in the format the application was submitted to the FDA.

6.3 Will we have access to the eCTD once submitted to FDA i.e. on line so that we can see our application live?

There are no plans to allow online access to FDA stored submissions.

6.4 Who will have access to the eCTD information once the application is submitted to FDA and once the product is approved?

Authorized internal FDA and External Evaluator of the eCTD review system will have access to submissions generally. External users of the eCTD Review system will only have access to relevant submissions on a case by case basis and only during the active review. Once the review has been finalized, external users will no longer have access to the eCTD sequence.

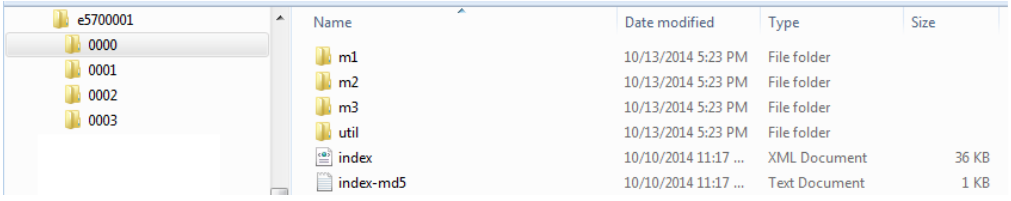
FDA will be loading the data submitted to a secure server, on which all processing and review will be performed. All electronic media will be stored in a secure environment.

6.5 Is the intent to have the submission delivered on CD/DVD?

A submission should fit on a single media which CD/DVD is preferred format however HDD/USB can be submit if the applicant informs the THAIFDA in advance.

6.6 What is the correct folder structure?

A submission which is on single media all files need to be store under eSubmission identifier and sequence folder.



7.0 Future Developments

7.1 Will eCTDs be reviewed quicker than paper copy submissions?

Overall timelines is meet or beat paper timelines due to re-engineered business process and immediate access to relevant information will increase the efficiency of the review process, however, the time spent by an evaluator on a review is not likely to be significantly altered.

7.2 Is the FDA considering moving to RPS (eCTD 4.0) in the future?

The FDA is planning for RPS (eCTD 4.0).

7.3 What is the change request process for FDA's eCTD guidance documents?

Interested parties are welcome to forward comments on FDA's eCTD guidance documents at any time. It is expected that guidance documents will be further modified at intervals based on comments received, experience gained, and further ICH developments. Comments may be forwarded to drug_esubmission@fda.moph.go.th. FDA will review all requests and comments for inclusion in consultation with stakeholders.