FRPath.org Where the Roads to Accelerated Assessments Converge



FRPath.org Country and FRP Information Input Form							
Country: United States of America			Agency Name: United States Food and Drug Administration (USFDA)				
Name of FRP: FDA Accelerate	d Approva	al					
Is this FRP Proposed or Active	? Active						
Date FRP was officially enacted	Date FRP was officially enacted: Click here to enter a date.						
 Facilitates activities 	2. Accelerates the regulatory		e regulatory	3. Relies on or recognizes a prior			
during development	review process		cess	regulatory decision			
Is a Guidance or SOP describing	ng how	Yes- see	reference belo	W			
to apply this FRP publicly ava	ilable?						
When should the FRP be requ	ested?	Before the marketing authorisation submission					
Does the agency provide		Yes- For	any product ty	pe			
assistance/advice to the spon	sor?						
For which types of product(s) can this		The accelerated approval provisions of FDASIA in section					
FRP be used? E.g. NMEs, generics,		506(c) of the FD&C Act provide that FDA may grant					
biologics, biosimilars, all prod	gics, biosimilars, all products		accelerated approval to:				
				ous or life-threatening disease or			
				termination that the product has an			
				ndpoint that is reasonably likely to			
		1 1		or on a clinical endpoint that can be			
				rreversible morbidity or mortality,			
				to predict an effect on irreversible			
			· ·	or other clinical benefit, taking into			
		I .		rity, or prevalence of the condition			
			•	ack of alternative treatments".			
				oval pathway has been used primarily			
				disease course is long and an			
			•	e would be required to measure the t of a drug. For example, accelerated			
		I .		l extensively in the approval of drugs			
		1 1 1		cers and human immunodeficiency			
			,	re an effect on tumor growth or viral			
		I .		pidly, but demonstrating an effect on			
		I .		enerally requires lengthy and			
		I .		pecause of the duration of the typical			
			•	rated approval is also potentially			
			acute disease :				
				nical benefit can be demonstrated			
				ly because the clinical event that			
		, ,	, ,	ated to demonstrate clinical benefit			
		occurs ra					
Must the product address an u	unmet	Yes	,				
most the product address and	J. 11 11 C C	1 03					

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medical need or serious condition?		
If a fee is required, what is the amount	FDA User Fee Programs	
(in US\$ equivalent)		
Total target (agency) time for	Click here to enter text.	
assessment (calendar days)		
Total target (company) time for	Click here to enter text.	
responses to agency questions (If		
stated)		

Stated)					
Select one of the following (* see definitions at end of document)					
Is this a verification review (a recognition pathway)?*	Is this an abridged* review (selected dossier portions)? (a reliance pathway)?*		Is this a full* review of all parts of the dossier?		
If this is a reliance or recognition pathway, what are the accepted reference agencies?		No, this is not a reliance or recognition pathway.			
How many reference agency decisions are required?		Not applicable.			
Does this FRP require submission of Assessment Reports from prior decisions?		Not applicable			
Is a CPP (Certificate of Pharmaceutical Product) required for approval?		Not applicable			
Can an alternate form of reference documentation to the CPP be used? If so, what types of documents?		Not applicable.			
If this process is through a Regional Regulatory Initiative, which countries participate in this process?		No, this process is not through a Regional Regulatory Initiative.			
Does the product have to have been marketed in another country? For a specific amount of time? If so, for how long?		Not applicable.			
How are queries to the companies sent?		Choose an item.			
Are external reviewers (e.g. non- agency) involved in the assessment?		Choose an item.			
Post-authorization study commitments		Always required			
For how long is the initial approval or designation valid?		Choose an item.			
Any other details you wish to p	rovide?	many years to lo provides a real	a new drug, it can sometimes take earn whether a drug actually effect on how a patient survives, ns. A positive therapeutic effect that		

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- is clinically meaningful in the context of a given disease is known as "clinical benefit". Mindful of the fact that it may take an extended period of time to measure a drug's intended clinical benefit, in 1992 FDA instituted the Accelerated Approval regulations. These regulations allowed drugs for serious conditions that filled an unmet medical need to be approved based on a surrogate endpoint. Using a surrogate endpoint enabled the FDA to approve these drugs faster.
- In 2012, Congress passed the Food and Drug
 Administration Safety Innovations Act (FDASIA).
 Section 901 of FDASIA amends the Federal Food,
 Drug, and Cosmetic Act (FD&C Act) to allow the FDA
 to base accelerated approval for drugs for serious
 conditions that fill an unmet medical need on
 whether the drug has an effect on a surrogate or an
 intermediate clinical endpoint.
- The FDA bases its decision on whether to accept the proposed surrogate or intermediate clinical endpoint on the scientific support for that endpoint. Studies that demonstrate a drug's effect on a surrogate or intermediate clinical endpoint must be "adequate and well controlled" as required by the FD&C Act.
- For drugs granted accelerated approval, postmarketing confirmatory trials have been required to verify and describe the anticipated effect on IMM or other clinical benefit.
- FDA encourages sponsors to communicate with the Agency early in development concerning the potential eligibility of a drug for accelerated approval, proposed surrogate endpoints or intermediate clinical endpoints, clinical trial designs, and planning and conduct of confirmatory trials. A sponsor seeking accelerated approval may also need to prepare for a more rapid pace for other aspects of the drug development (e.g., manufacturing, development of a necessary companion diagnostic).
- Unless otherwise informed by the Agency, an applicant must submit to the Agency for consideration during the preapproval review period copies of all promotional materials, including promotional labeling as well as advertisements, intended for dissemination or publication within 120 days following marketing approval. After 120 days following marketing approval, unless otherwise

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	informed by the Agency, the applicant must submit promotional materials at least 30 days prior to the intended time of initial dissemination of the labeling or initial publication of the advertisement.	
Date of this update	11 APRIL 2020	
References	 Accelerated Approval. https://www.fda.gov/patients/fast-track-breakthrough-therapy-accelerated-approval-priority-review/accelerated-approval Accessed on 11 April 2020. Guidance for Industry: Expedited Programs for Serious Conditions – Drugs and Biologics. https://www.fda.gov/media/86377/download Accessed on 11 April 2020. 	

*Definitions:

Verification review: A checklist review based on recognition of a prior regulatory decision. Recognition is the routine acceptance of the regulatory decision of another regulator or other trusted institution. Recognition indicates that evidence of conformity with the regulatory requirements of economy A is sufficient to meet the regulatory requirements of economy B.

Abridged review: An abbreviated review of selected portions of the dossier and the reliance on prior assessment decisions. Reliance is the act whereby a regulatory authority in one jurisdiction may take into account/give significant weight to work performed by another regulator or other trusted institution in reaching its own decision

Full review: A comprehensive review of all components of the dossier. This may or may not be CPP-dependent. This may form part of a reliance or recognition pathway.

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