13th Invitation to Manufacturers to Submit an Expression of Interest (EOI) for Product Evaluation by the WHO Expert Review Panel (ERP) for Reproductive Health Medicines 12 October 2017

1. Background

In 2011, UNFPA's Executive Board approved a new Quality Assurance Policy for Reproductive Health Medicines. The preferred approaches are for procurement of finished pharmaceutical products (FPPs) that meet the following criteria:

- 1. FPPs prequalified by the WHO Prequalification Programme or authorized for use by a Stringent Drug Regulatory Authority (SRA)¹; or
- 2. FPPs recommended for use based on advice provided by the Expert Review Panel for Reproductive Health Medicines (ERP/RHM).

2. Expert Review Panel for Reproductive Health Medicines

The ERP/RHM is an independent technical body composed of external technical experts and hosted by the Unit of Regulation of Medicines and other Health Technologies (RHT) of WHO Department of Essential Medicines and Health Products (WHO/EMP/RHT). The Procurement Services Branch of UNFPA (UNFPA/PSB) provides the Secretariat for the ERP/RHM. The ERP/RHM will be convened by WHO/EMP/RHT and review product dossiers submitted by manufacturers of FPPs that are not yet WHO-prequalified or SRA-authorized, undertake a quality risk analysis associated with the use of those products and provide written advice to the Secretariat to help making evidence based procurement decisions.

3. Eligibility criteria for ERP/RHM review

FPPs are eligible for review by the ERP if the following conditions have been met:

- (a) the manufacturer of the FPP has submitted an application for prequalification of the product² by the WHO Prequalification Programme or provides written commitment to submit an application within three months from the date of approval into the ERP, and/or
- (b) the manufacturer of the FPP has submitted an application for marketing authorization to an SRA, and it has been accepted for review by the SRA, and

For more information:

¹ Stringent Regulatory Authority (SRA) means a regulatory authority (in case of the European Union both EMEA and national competent authorities are included) which is:

a) a member of ICH prior to 23 October 2015, namely: the US Food and Drug Administration, the European Commission and the Ministry of Health, Labour and Welfare of Japan also represented by the Pharmaceuticals and Medical Devices Agency; or

b) an ICH observer prior to 23 October 2015, namely: the European Free Trade Association, as represented by Swissmedic and Health Canada: or

c) a regulatory authority associated with an ICH member through a legally-binding, mutual recognition agreement prior to 23 October 2015, namely: Australia, Iceland, Liechtenstein and Norway.

https://extranet.who.int/prequal/sites/default/files/documents/75%20SRA%20clarification February2017 0.pdf

¹ Kindly note that the product submitted/to be submitted to the PQP or for SRA marketing authorisation must be from the same manufacturing site as the one submitted to the ERP process.

(c) the FPP is manufactured at a site that is compliant with the standards of Good Manufacturing Practice (GMP) that apply for the relevant product formulation (as verified after inspections by parties such as, but not limited to, SRA, WHO Prequalification Programme or any inspectorate participating in the Pharmaceutical Inspection Cooperation Scheme (PIC/S).

4. Reproductive health medicines 13th Invitation for EOI for ERP for RH Medicines

Interested manufacturers are encouraged to submit documentation for recommended dosage forms and strengths, as specified below, of reproductive health medicines in the following categories:

Treatment of maternal syphilis and prevention of congenital syphilis

Adult formulations

 Benzathine benzylpenicillin 2.4 million units per dose in vial for reconstitution and intramuscular Injection

5. Basis of review process

The ERP will assess the ERP dossier. Risk assessment is based on the following major product attributes of submitted products:

Risk assessment is based on the following major product attributes of submitted products:

- GMP status of the manufacturing site(s)
- API source and quality
- FPP manufacturing process and FPP quality specifications
- Stability data
- Evidence of safety and efficacy (e.g. bioequivalence data)

6. Time limitation

If the ERP issues a positive opinion, any subsequent recommendation for procurement by UNFPA with regard to an FPP will be valid for a period of no more than 18 months ("validity period"), or until the FPP is WHO-prequalified or SRA-authorized, whichever is the earlier. However, the Secretariat may, in its sole discretion, request the ERP to consider extending the validity period for up to an additional 12 months if the FPP is not yet WHO-prequalified or SRA-authorized within the validity period. UNFPA may refer more than one request for such an extension to the ERP and in this case a new ERP dossier has to be submitted. Any advice from ERP with regard to extension of the validity period will be based on ERP's evaluation of the new dossier and progress of the FPP dossier in the PQP or SRA pipeline.

7. How to submit an EOI

In order to submit an Expression of Interest for product evaluation, the manufacturer must submit the following:

- A covering letter expressing interest to submit the product to ERP for review.
- A letter about submitting/accepting the dossier for assessment from the WHO Prequalification of Medicines Programme or an SRA confirming that the product application has been accepted for review OR <u>A letter stating commitment to submit dossier for assessment to WHO PQT or an SRA</u> within 3 months of results from ERP.
- Documentation related to the GMP status of the FPP manufacturer, i.e. evidence of GMP compliance issued by WHO PQP, SRA or PIC/S member regulatory authority and, if applicable,

manufacturer is strongly encouraged to submit inspection report even if the outcome may be negative.

- A completed questionnaire with annexes (attached, see Appendix 1: The Interagency Finished Pharmaceutical Product Questionnaire based on the model quality assurance for Procurement Agencies).
- A full set of the analytical test methods including Standard Test Procedures (If non-pharmacopeia).
- Two non-returnable product samples as requested in Section 1.7.1 of the questionnaire.
- Electronic copies of the submission.

All documentation must be provided in two formats:

- One digital copy (CD)
- o One hard copy

Submissions should be addressed to the UNFPA office in Copenhagen, as follows:

UNITED NATIONS POPULATION FUND United Nations City 51 Marmorvej 2100 Copenhagen Denmark

REF: ERP for Reproductive Health Medicines, UNFPA/DNK/EOI/17/032

Attention: Seloi Mogatle

8. Deadline for submissions:

All submissions must reach the UNFPA reception in Copenhagen by Tuesday, 31 October 2017, at 17.00h (Copenhagen time).

9. Further information and contact details

Any questions related to the review processes should be addressed to Ms. Seloi Mogatle at mogatle@unfpa.org.

10. United Nations Global Marketplace

All the information in this document, as well as eventual clarifications, will be made public in the UNGM website (www.ungm.org).

Appendix 1

Interagency finished pharmaceutical product questionnaire













Interagency finished pharmaceutical product questionnai	re ¹
Section 1: Administrative Section	_
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¹ Working document as per WHO TECHNICAL REPORT SERIES, NO. 986 under Annex 3 -Model quality assurance system for procurement agencies -Appendix 6- Interagency finished pharmaceutical product questionnaire based on the model quality assurance system for procurement agencies.

Please fill out one separate form for each pharmaceutical product Section 1: Administrative Section

1.1 Product identification

1.1.1 Active pharmaceution	al ingredient(s) (use INN if an	y):	
1.1.2 Generic name of the	product:			
1.1.3 Trade (proprietary) r	name (if any):			
1.1.4 Dosage form:				
□ Tablets □ Capsul	es □ Injectab	ole □ Syrups/	oral liquids	
Other: (Please specify)				
1.1.5 Strength per dosage	e unit:			
1.1.6 Route of administrat	ion:			
□ Oral □ I.M.	[□]I.V.	□ s.c.	□ Other (Please spe	cify)
indicate the standard	g active ingred for each ingre dose combinative ingredients for dosage unit 1.2 aterials used f	ient(s), overagedient (e.g. BP, ation (FDC) or contains a contains	es if any and excipients). USP, in-house). Mention so-packaged: Annex A of medical/pharmaceuticalcohol 10%, paraben	Please also specifically if al relevance,)
1.2.2 Description, pack six				s:
		ntact detai cturer iden	_	
Name, address and a (or contract manufact	activities of the		and manufacturing site(s)	
Name of manufacturer, contract manufacturer if any				
2				

² For example, HDPE bottle, Alu-Alu strip, neutral glass vial.

Reference of manufacturing licence, date and expiry date, if any			
Physical address. Please specify units, and block if existing			
Telephone number, facsimile number and email contact details			
Activity (e.g. packaging)			
(to be filled in if not identical Name of company): Physical address (complete Telephone number): Fax: Website:	al to that indic	,	
Email:			
Link with the product			
☐ Marketing licend	ce holder	☐ Manufacturer	
Distributor/whole	esaler	Other	
	•	the applicant	
confidentially among ICRC	, MSF, WHO	this questionnaire can be sh O procurement centre, UNFPA ou have any objection, please ind ealing with.	and

Has the dossier been submitted to any of the following: ERP, ICRC, MSF, WHO procurement centre, UNFPA, UNICEF?

□Yes □No
Please indicate to which one:
Please provide the date of the submission:
1.6 Regulatory (licencing) status1.6.1 In the country of manufacture. Provide a copy of the licence in Annex D
Product registered and currently marketed Licence no:
Product registered for marketing in the country of manufacturing but currently not marketed Licence no.:
☐ Product not registered (please clarify):
▶ Please attach a certificate of pharmaceutical product (CPP) according to the WHO Certification Scheme (WHO Technical Report Series, No. 863; an earlier version is not acceptable) in Annex E.
➤ If a CPP cannot be obtained from the national medicines regulatory authority (NMRA), please state the reason and send an equivalent document if any.
➤ Submit recent as well as historical deficiency letters issued by the WHO Prequalification Programme (PQP)/SRA in relation to the specific product dossier in Annex F .
1.6.2 In other countries List other countries where the product is registered and is currently marketed (please provide registration number)-Provide a copy of the licence-Annex-D
1.6.3 WHO prequalification status, if applicable
This product is prequalified by WHO/PQP.3
□ Yes
If yes, please attach a copy of the relevant WHO/PQP acceptance letter signed by your company in Annex G .
1.6.4 If submitted for prequalification: indicate date of submission, WHO acceptance letter for product dossier review mentioning the WHO reference number assigned by WHO for this specific product in Annex H

³ WHO Prequalification website: http://apps.who.int/prequal/.

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1.7 Samples for technical evaluation

1.7.1 Samples of finished product and insert information You are required to provide a sample of the finished product(s) offered. If you cannot submit with the questionnaire, please state the reason and when you will do so:
1.7.2 Primary packaging label language (attach a copy in Annex I):
☐ Bilingual English/French ☐ English ☐ French
Other (specify)
1.7.3 Secondary packaging label language (attach a copy in Annex I):
☐ Bilingual English/French ☐ English ☐ French
☐ Other (specify) ☐ Multilingual English/French/Spanish
For oral powder for suspension and powder for injection, in-use periods and storage conditions after reconstitution should be stated on the product label/leaflet.
1.7.4 Patient information leaflet/Package insert (attach a copy in
Annex J)
☐ Yes ☐ No
Section 2: Active pharmaceutical ingredients (If there is more than one active pharmaceutical ingredient or more than one API manufacturer is used, please replicate this section.)
2.1 Details of API used (INN if any)
2.1.1 Manufacturer Manufacturer (name, physical address and country)/manufacturing site:
GMP certificate from the country of origin: attach a copy of the GMP certificate, if available, in Annex K.
Last inspection of API manufacturing site performed, when available (please attach GMP certificate or relevant letter) by:
☐ Finished product manufacturer

☐ WHO Prequalification Programme, Geneva
□ US FDA
□ PIC/S members
□ Others (specify)
□ None of above
Outcomes and date:
Is/are the API used to manufacture this product WHO-prequalified?
□ Yes □ No
2.1.2 API specifications
☐ British Pharmacopoeia (BP) (edition/year):
☐ United States Pharmacopeia (USP) (edition/year):
☐ The International Pharmacopoeia (Ph.Int.) (edition/year)
Others (specify):
Specifications additional to those in the pharmacopoeia referred to above if available [Yes No
Attach a copy of the FPP manufacturer internal API specifications in Annex L.
▶ If analytical methods are in-house, different from BP, USP and Ph.Int. attach a copy of the analytical method and analytical validation data in Annex M.
For sterile API: Please provide the data on validation of the sterile aspects including recent media fill validation data, as applicable, in Annex N .
Describe the method of sterilization used when applicable:

2.1.3 Certificate of analysis

Please provide a copy of the certificate of analysis of the API from the API manufacturer as well as from the finished pharmaceutical product (FPP) manufacturer in **Annex O**.

Are mon	ability of monograpl you in a possessi lograph of the Euro	on of the C		•		
(CE	tificate of suitability P): please attach a					oeia
2.1.5 Ope	n part of drug mast	er file (DMF	registered ir	n (country):		
	Section 3: 3.1	Finishe Manufact	d pharma turing site	aceutical	product	
		NRA of origin	country of	Any	other inspe	
	GMP certificate no.					
	Valid until					
	Country					
	ase attach the recer er GMP inspections years):			` '	-	
	Agency		Date of a	audit	Outco	ome
	WHO Prequalification Programme	ation				
	UNICEF Supply [Division				
	MSF Internationa	ıl				
	ICRC					

Standard	Edition	Year published		
BP				
USP				
Ph.Int.				
In-house	Year do	Year documented		
Specifications additional to those in the pharmacopoeia referred to above (e.g. dissolution, syringe ability) explain:				
Other (specify)				
se attach copies of release a ex R. If analytical methods a t., attach a copy of the analyticame in Annex R. se attach a copy of the certif	are in-house, differer ical method and analy	nt from BP, USP and tical validation data ir		
nes released in Annex S .				
3.3 Method of manuf	facture and proce	ess validation:		
e the manufacturing metho ated? Yes \square No	ds for each standa	ard batch size beer		
please clarify:				

	The batch numbers of the validated batches
	Manufacturing dates of the validated batches
	Reference number for the process validation report
	If processes are yet to be validated, the reference number for the process validation protocol should be indicated
Dans	
Prov	ide batch formulae for all proposed batch sizes:
>	Please provide in Annex T a flow diagram and brief narrative describing the manufacturing and control process of this product with relevant parameters.
3.3.1 Addit	tional information for sterile products
>	Provide the data on validation of the sterile aspects of the product including recent media fill validation data as applicable in Annex U .
>	Describe the method of sterilization used including conditions such as temperature, time, pressure, if applicable:
	3.4 Stability of finished product
3.4.1 Is sta	ability testing data available?
r	
	lYes □No

Please provide the protocol and the report for accelerated and long-term stability testing, including: type and material of container; conditions (temperature/ relative humidity/duration of stability study); number of batches involved in the study (minimum three); batch sizes for each lot tested; date of beginning of the study; and study conclusions. These can be provided in **Annex V**.

3.4.2 Was the stability testing done on a product of the same formula, same API source, manufactured on the same site and packed in the same packaging material as the product that will be supplied?
☐ Yes ☐ No
If no, describe the differences:
3.4.3 Please specify whether stability studies have been done or are ongoing with all declared API sources:
□ Yes □ No
Submit a declaration in Annex W that stability studies have been done or are being done with all declared API sources.
If no, explain why:
3.4.4 Do you have ongoing stability data for this product?
☐Yes ☐ No
Attach status report of any ongoing stability studies in Annex X .
3.4.5 Shelf-life as it appears on packaging:
□ 2 years □ 3 years □ 4 years □ 5 years □ Other (please specify):
3.4.6 Specific storage conditions for this product as they appear on the packaging and based on stability studies (e.g. "Do not store above 30 °C - Protect from light"):
Temperature
Light
Humidity
Other (specify)

3.4.7 Product suitable for use in the following ICH Climatic Zones:

□ Zo	one I
	one II
	one III
[□] Z c	one IVa
[□] Zo	one IVb
[]O	ther (please specify):
be fur	al powder for suspension and powder for injection, or injection that may ther diluted, or multidose containers provide in-use stability data and e conditions after reconstitution and/or dilution in Annex Y .
which	te the period (hours/days) and storage condition until the product is stable after reconstitution and/or dilution based on ailable in-use stability data:
(WHO	on 4: Safety/efficacy and/or therapeutic equivalence Technical Report Series (TRS), No. 902, Annex 11/ TRS No. 937, nnex 7 or recent version)
	4.1 For innovator products e attach a summary of pharmacology, toxicology and efficacy of the roduct in Annex Z.
	4.2 For generic products: therapeutic equivalence
□ Demo	onstrated
□ Not d	lemonstrated
□ Not re	elevant, please explain why
If demor	nstrated,
> 1	Attach graphic/pictorial representation of summary study results in Annex AA .
(Provide a copy of the report of the proof of therapeutic equivalence BE study) comparative dissolution profile, dissolution tests, and others, if any, in Annex AB .
\ t	WHO/PIC/S inspection status of the Contract Research Organisation (CRO) (if the CRO has ever undergone inspections in relation to the current or other studies).

tudy	period (dd/mm/yyyy): from		to
Dofo	erence product		
Kele			
	Generic name:		
	Dosage form:		
	Strength:		
	Brand/trade name:		
	Manufacturer:		
	Manufacture site:		
	Batch number:		
	Expiry date:		
Stud	ly protocol		
	Contract research organization		
	Country of study:		
	Number of volunteers:		
	Study design (describe in detail):		
	Bio batch size:		
	Bio batch number:		
	Bio batch API(s) source(s):		
	Study conclusion:		
_	ly results:		
Stuc		1	

	Generic name	
	Dosage form	
	Strength	
	Brand/trade name	
	Manufacturer	
	Manufacture site	
	Batch number	
	Expiry date	
.2.3	F1 (difference factor) value: Study conclusion: By another method (please desconding place) Types No (explain):	cribe the method and the study conclusion, briefly):
4. 3		equivalence study is essentially the same as the one terials from the same suppliers, same formula and
	☐ Yes ☐ No	
	If no, explain what the differences have any impact on the bioavailabil	are and justify that the differences do not lity:
	Section 5: Comm	itment and authorization
j.1 (Commitment	
	I, the undersigned,	(position in the company, I Person. Responsible Pharmacist), acting

5.1

responsible for the company as (name of the company), certify that the information provided (above) is correct and true,

(if the product is marketed in the country of origin, select the appropriate box below)

manufacturing and quincluding formulation, active and excipient st	product offered is identical in all aspects of ality to that marketed in (country of origin), method and site of manufacture, sources of arting materials, quality control of the product ackaging, shelf-life and product information.
□ and I certify that the	ne product offered is identical to that marketed in
	(name of country), except:
	(e.g. formulation, method and site of
manufacture, sources of active and excipient	starting materials, quality control of the finished
product and starting material, packaging, she	elf-life, indications, product information)
	ormation after the submission of this product r/supplier undertakes to provide the relevant
Date:	Signature:
5.2)	Power of attorney
The manufacturer authorizes a di	stributor to submit the questionnaire
Date:	Signature:
Distributor (Signed by Distributor Please provide a copy of the po	for Manufacturer under power of attorney) ower of attorney in Annex AE .
5.3 Authorization for sh	aring information with other agency
	ne company has no objection to the ng shared with the agencies listed in clause
•	t the information provided above is to-date and true at the time of submission.
Full name	
Full title/position in company:	
Company name:	
Signature	Date

Company seal/stamp:		
Section 6: Attachments/annexes		
Attachments or Annexes to the questionnaire should be in PDF format and should be well indexed to facilitate review		
Please ensure that all documents necessary to enable objective evaluation of your product are attached. This checklist may not be exhaustive.		
\square A. Formulation of the product (complete qualitative and quantitative composition including active ingredient(s) and excipients (1.1.7)		
□ B. Description and composition of primary packaging materials (1.2.1)		
☐ C. Description and composition of secondary packaging materials (1.2.2)		
□ D. Copy of product registration and market status– Licence No (1.6.1)		
 □ E. Certificate of pharmaceutical product (CPP) according to the WHO Certification Scheme (WHO Technical Report Series, No. 863. An earlier version is not acceptable) (1.6.1) 		
☐ F. Recent as well as historical deficiency/acceptance letters issued by PQP/SRA in relation to the specific product dossier (1.6.1)		
☐G. Copy of the relevant WHO Prequalification acceptance letter signed by your company (1.6.3)		
□H. WHO acceptance letter for product dossier review mentioning the WHO reference number assigned by WHO for this specific product (1.6.4)		
□ I. Copy of primary and secondary packaging/label (1.7.1)		
☐ J. Patient information leaflet/package insert (1.7.4)		
☐ K. GMP certificate of the API manufacturer(s) from the country of origin (2.1.1)		
\square I. Copy of the internal API(s) specification(s) (2.1.2)		

[□] M.	Validated analytical methods if analytical methods for API are inhouse analytical method, different from BP, USP and Ph.Int. (2.1.2)
[□] N.	Data on validation of the sterile aspects of the product including recent media fill validation data, as applicable (2.1.2)
[□]O.	Copy of the certificate(s) of analysis of the API from the API manufacturer as well as from the FPP manufacturer (2.1.3)
□ P1	. Copy of the certificate of suitability to the European Pharmacopoeia (CEP) and its annexes (2.1.4)
□ P2	2. Attach a copy of the Technical file (2.1.5)
□ Q.	Recent/valid GMP certificates/letter of compliance of the FPP manufacturer (3.1)
[□] R	. If in-house specification is different from BP, USP and Ph.Int., attach copy of the in-house finished product specifications and also validated analytical methods (3.2)
[□]S.	Copy of the certificate of analysis for the three last batches released (3.2)
[□]T. I	Flow diagram and brief narrative describing the manufacturing and control process of this product with relevant parameters (3.3)
[□]U.	Data on validation of the sterile aspects of the product including recent media fill validation data as applicable (3.3.1)
[□]V. I	Protocol and report for accelerated and long-term stability testing (3.4.1)
[□]W.	Declaration that stability studies have been done or are being done with all declared API sources (3.4.3)
[□] X.	Status report of any ongoing stability studies (3.4.4)
[□] Y.	In-use stability data and storage conditions after reconstitution for oral powder for suspension, powder for injection, or injection that may be further diluted, or
	multidose containers (3.4.8)
□ Z.	Summary of pharmacology, toxicology and efficacy of the product (4.1)

□ AA.	Graphic/pictorial representation of summary study results (4.2.3)
□ AB.	Copy of the report of the proof of therapeutic equivalence (BE study) comparative dissolution profile, dissolution tests, and others if any (4.3)
□ AC.	Schematic representation of study design (4.3)
□ AD.	Study protocol summary (4.3)
□ AE.	Copy of the power of attorney (5.2)