Newsletter of the Drug Control Authority, Malaysia

BERITA UBAT-UBATAN

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EVENTS

1) *Mutual Joint Visit (MJV) by the Organisation for Economic Cooperation's and Development (OECD) Good Laboratory Practice (GLP) Working Group to NPCB*

The Malaysian Government (through a Cabinet decision in February 2008) had agreed to appoint the National Pharmaceutical Control Bureau (NPCB) as the Compliance Monitoring Authority (CMA) for monitoring of compliances to the OECD Principles of Good Laboratory Practice (GLP) for non-clinical safety testing of test items contained in pharmaceutical products, cosmetic products, veterinary drugs and food additives. The Drug Control Authority (DCA) in its 214th Meeting in March 2009 had enforced this decision in accordance to Regulation 29 of the Control of Drugs and Cosmetics Regulations 1984 (Revised 2006).

IN THIS ISSUE

DCA EDITORIAL TEAM

Malaysia had been accepted as a provisional member of the OECD Mutual Acceptance of Data (MAD) in October 2008. Since then, NPCB had developed its GLP Compliance Monitoring Programme. The programme describes the organisation and structure, policies, processes and procedures in managing the GLP compliance monitoring programme in Malaysia. NPCB had conducted a number of GLP inspections at non-clinical test facilities in Malaysia and to date, 2 test facilities were in the programme.

The assessment on NPCB's GLP Compliance Monitoring Programme was conducted through Mutual Joint Visit (MJV) on 14th -19th November 2011. The purpose of the MJV was to evaluate NPCB's programme and the inspectors' competencies in performing GLP inspection. The MJV team consisted of evaluators from United Kingdom (lead evaluator), Switzerland and Japan. An OECD secretariat was also present during the MJV. Environment Technology and Research Centre (ETRC) of SIRIM Berhad, Shah Alam was chosen as the facility for inspection by the team.

Preliminary results from the MJV were very encouraging. No major issue of non-compliances was found in NPCB during the MJV. The MJV team will recommend Malaysia to the OECD GLP Working Group which will be held in May 2012 (in Paris) as a Full Member of the OECD MAD for GLP. With the full membership, non-clinical data conducted by a test facility in the NPCB GLP Compliance Programme shall be accepted by all OECD countries and Non-OECD countries that adhere to GLP MAD System.

2) *WHO Training Workshop on the Quality Assessment of Active Pharmaceutical Ingredients (API) & Awareness Seminar on Regulatory Control of API*

The NPCB had organised the WHO Training Workshop on the Quality Assessment of Active Pharmaceutical Ingredients (API) on 29th – 30th September 2011 and the Awareness Seminar on Regulatory Control of API on 1st October 2011. The regulatory control of API will be implemented mandatorily in January 2012 (starting with new chemical entities).

Objectives of the seminar and workshop:

- *Disseminate current information onto the industry regarding the regulatory control of APIs as part of the requirements in the product registration application;*
- *Strengthen the competency among regulatory officers in assessing technical quality information of APIs.*

i. Training Workshop

A total of 47 participants comprising of regulatory officers from Malaysia (NPCB), Singapore (Health Science Authority), Indonesia (National Agency for Drug and Food Control) and Brunei attended this workshop.

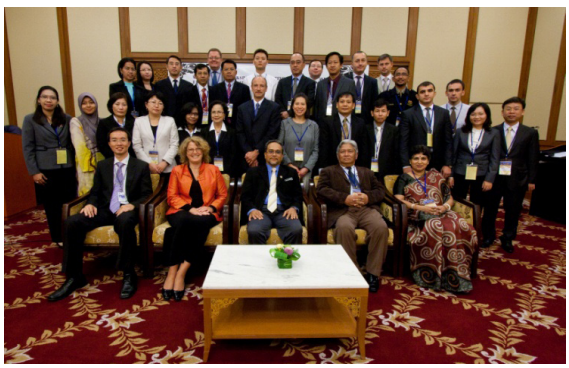
Lecturers were given by speakers from WHO. Representatives from Indonesia, Singapore and Brunei were given the chance to share relevant information regarding the regulatory control of APIs in their respective countries. Participants were divided into six groups during group work sessions where they were assigned to assess the Drug Master File based on the lectures given.

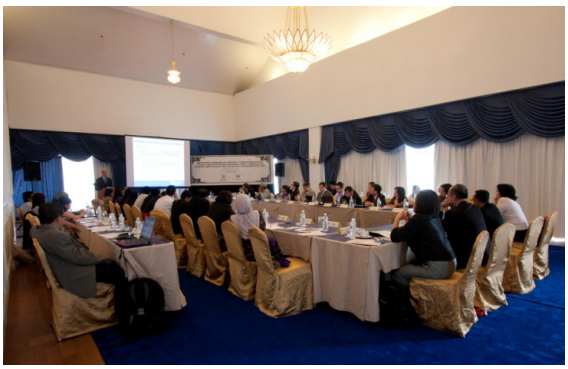
ii. Seminar

The seminar was organised in collaboration with WHO and the Malaysian Pharmaceutical Society (MPS). It was attended by 186 participants (mostly representatives from pharmaceutical industry).

The seminar started with an opening speech by Mdm. Siti Aida Abdullah, Deputy Director of the Centre for Product Registration, NPCB followed by talks from a local speaker as well as three WHO speakers namely Dr. Milan Smid, Dr. Antony Fake and Dr. Jurgen Schomakers. It was concluded with a closing remark by Mdm. Rosilawati Ahmad from NPCB and a speech from Dr. Milan Smid.

3) WHO Consultative Meeting on Combating Substandard / Spurious / Falsely-labelled / Falsified / Counterfeit (SSFFC) Medicines and Building Global Capacity for Surveillance and Monitoring of SSFFC





The NPCB was given the honour to host the 2nd WHO Consultative Meeting on Combating Substandard / Spurious / Falsely-labelled / Falsified / Counterfeit (SSFFC) Medicines and Building Global Capacity for Surveillance and Monitoring of SSFFC which was held on 3rd – 5th October 2011 in Kuala Lumpur. The 1st consultative meeting for the European Region has been held in Kiev in June 2011. The objectives of the meeting were:

- To update the current situation of counterfeit and substandard medicines at the regional and global level and to share experiences and good practices in combating them;

- To review the existing surveillance and reporting system of the counterfeit and substandard products, at the regional and the global levels, including the Regional Rapid Alert System (RAS) for combating counterfeit medicines;

- To discuss the WHO project on Building Global Capacity for Surveillance and monitoring of substandard and counterfeit medicines and to explore the participation of regulatory authorities of the Member Countries in the Western Pacific and South East Asian region of WHO;

- To discuss the development and piloting of a global system for surveillance and monitoring of substandard and counterfeit medicines.

This meeting was attended by delegates from Indonesia, Malaysia, Myanmar, Thailand, Philippines, Cambodia, Lao DPR, Vietnam, China, Mongolia, Ukraine, Azerbaijan and Russian Federation. Representatives from the World Health Organisation (WHO) and the United States Food and Drug Administrations (FDA) were also present.

The outcome of this meeting would be used by WHO to develope a global data base with systematic information of SSFFC medicines.

Agenda of the Meeting:

i. *Presentations on country experiences of surveillance and monitoring of 'substandard / spurious / falsely-labelled / falsified / counterfeit (SSFFC)' medicines.*

ii. *Discussion on the needs of Regulatory Authorities of participating countries in identification of SSFFC medicines that have entered or that threaten to enter their countries' supply chain.*

iii. *Presentation on the best practices for reporting of cases of SSFFC medicines, to facilitate common understanding and unification of minimum standards needed for individual case reports.*

DIRECTIVE

1) *Directive 13/2011: Compulsory Submission of Notification by Bioequivalence (BE) Study Centres to NPCB for All BE Studies That Do Not Require Clinical Trial Import License (CTIL) / Clinical Trial Exemption (CTX)*

A directive under Regulation 29 of the Control of Drugs and Cosmetics Regulations 1984 (Revised 2006) had been issued by the Senior Director of Pharmaceutical Services, Dato' Eisah A. Rahman following decisions made by the Drug Control Authority (DCA) in its 244th Meeting on 26th September 2011. Bioequivalence (BE) study centres are required to submit notification to NPCB for all BE studies that do not require Clinical Trial Import License (CTIL) / Clinical Trial Exemption (CTX) (which will be conducted at either local or foreign BE study centres) for registered products as well as products that will be registered in Malaysia.

The directive will be enforced from 1st January 2012 onwards and shall include all applications for the registration of new products.

All product registration holders are instructed to comply with this requirement.

Implementation

a) Pharmaceutical company that wish to conduct BE study that do not require CTIL / CTX at local BE study centre.
Documents required:

i. Study Protocol
ii. Clinical study registration number from the National Medical Research Registry (NMRR)
iii. Approval from relevant ethics committee (recognized by the DCA)

b) Local pharmaceutical company that wish to conduct BE study at foreign BE study centre
Documents required:

i. Study Protocol
ii. Clinical study registration number from the country where the BE study is conducted,
iii. eg, NMRR, WHO International Clinical Trials Registry Platform(ICTRP), European Clinical Trial Database (EudraCT), Clinical Trial Registry-India (CTRI) andothers.
iv. Approval from ethics committee from the country where the BE study is conducted.
v. Approval from the National Regulatory Authority of the country where the BE study is conducted (if any).
vi. A copy of certificate of accreditation (for the BE study Centre) from the regulatory agency of the country where the BE study isconducted; or a confirmation letter issued by the regulatory agency of the country (stating the recognition of the BE study centre).

c) Foreign pharmaceutical company that conduct BE study at foreign BE study centre Notification to NPCB is not required.However, the same documents as (b) must be submitted to NPCB during the registration processproducts.

d) Notification number will be given within 10 working days after complete application is received.

e) Starting from 2013, all applications for BE study notification and product registration that involves BE study shall include the certificate of accreditation from NPCB for the BE study centre involved/BE inspection report from the US FDA, EMA (including MHRA, AFSSAPS), TGA, Japan(valid for 3 years from the date of inspection).

ANNOUNCEMENTS

1) *Prohibition of the Use of 2-Aminophenol (O-Aminophenol; CI 76520) and Its Salt (Issued on 3rd October 2011)*

According to the Guidelines for Control of Cosmetic Products in Malaysia, o-Aminophenol is listed in Annex III, Part 2, No. 34 (List of substances provisionally allowed) which cosmetic products must not contain except subject to restrictions and conditions laid down. For its use as an oxidative hair dye, a maximum concentration of 2% in the finished cosmetic products was established.

However, from 3rd January 2012 onwards, the use of o-Aminophenol will be prohibited in cosmetic products and it will be listed under Annex II, No. 1372 (List of substances which must not form part of the composition of cosmetic products). This decision was agreed at the 16th ASEAN Cosmetic Committee (ACC) Meeting which was held in Brunei on 22nd -23rd June 2011; in line with the amendments specified in the Commission Directive 2011/59/EU. Based on the scientific data for o-Aminophenol, it cannot be concluded that this substance is safe to be used in hair dye.

The notification for all cosmetic products containing o-Aminophenol will be cancelled (after 3rd January 2012). Hence, the notification holders should ensure that:

i) The existing stock in the market is cleared before 3rd January 2012.
ii) The remaining stock of existing products in the market (if any) is recalled within 30 days (after 3rd January 2012) followed by proper disposal.

In order to ensure that products containing o-Aminophenol are no longer marketed after the specified date above, notification holders are advised not to apply for any new notification for products containing this substance. It is the responsibility of notification holders to comply with all the legislations and regulations under Regulation 29, the Control of Drugs and Cosmetics Regulations 1984 as well as Guidelines for Control of Cosmetic Products in Malaysia.

Did You Know?

Until the early 1900s, hair dye was made from a wide range of herbal and natural dyes. French chemist Eugene Schuller created the first safe commercial hair dye in 1909. His invention was based on a chemical known as paraphenylenediamine. In 1932, hair dye was further refined by Lawrence Gelb who created hair dye that actually penetrated the shaft of the hair.

2) *Changes in Traditional Product Sample Quantity for the Purpose of Laboratory Testing*

The NPCB would like to inform all traditional product registration holders and manufacturers regarding changes in the quantity of samples for traditional products that have to be sent to the Centre for Quality Control for laboratory testing. The changes were as follows:

i. 6 separate containers for all dosage forms, or
ii. 60 pieces of patches or plasters with a total content of not less than 200 grams or 200mL.

These changes were made to meet the requirements of MS ISO / IEC 17025:2005 and the standard requirements of the United States Pharmacopeia (USP) for weight uniformity testing. Hence, all parties involved are urged to follow the new requirements while waiting for the updated Drug Registration Guidance Document (DRGD) to be uploaded onto the NPCB website.

SUMMARY OF PRESS RELEASES

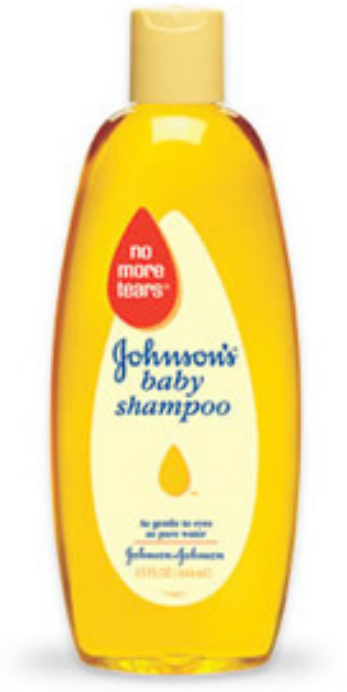
1) Response to Newspaper Articles Regarding the Safety of Johnson's Baby Shampoo

- SIN CHEW DAILY (1ST NOVEMBER 2011):
CONSUMERS OF THE UNITED STATES BOYCOTT JOHNSON & JOHNSON BABY SHAMPOO BECAUSE IT CONTAINS CANCER CAUSING INGREDIENT

- GUANG MING DAILY (2ND NOVEMBER 2011):
US JOHNSON'S BABY SHAMPOO ACCUSED TO BE CANCER-CAUSING
RETAILERS HAVE NOT RECEIVED NOTIFICATION TO REMOVE PRODUCTS FROM SHELF

- CHINA PRESS (2ND NOVEMBER 2011):
JOHNSON'S BABY SHAMPOO FOUND TO CONTAIN CARCINOGENIC SUBSTANCE IN HONG KONG

The local newspaper reports stated above were based on a statement issued by The Campaign for Safe Cosmetics in United States (on 1st November 2011). It was reported that Johnson's Baby Shampoo found in the market in several countries still contains Quaternium-15. It was claimed that the amount of formaldehyde produced by Quaternium-15 in this product can cause cancer.



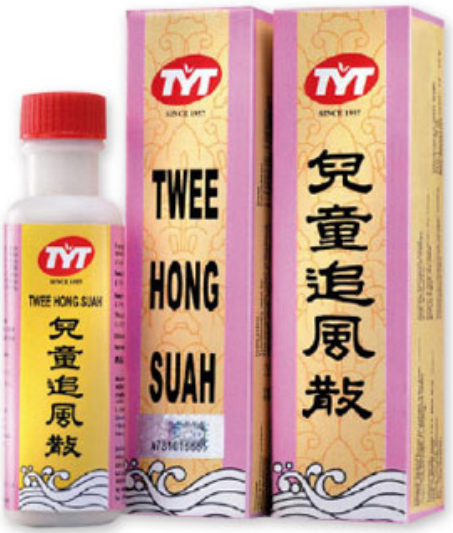
Johnson's Baby Shampoo is notified with the National Pharmaceutical Control Bureau and it contains Quaternium-15 at a concentration of 0.05% which is within the permissible limit. It also complies with the Guidelines for Control of Cosmetic Products in Malaysia as well as the ASEAN Cosmetic Directive.

Quarternium-15 is allowed in cosmetic product formulations as a preservative (at concentrations of up to 0.2%). Formaldehyde is also allowed in cosmetics formulations as a preservative with concentrations of up to 0.1% for oral hygiene preparations and up to 0.2% for other cosmetic products. This limit had been deemed safe for use in cosmetics by various regulatory agencies. Therefore, the use of these substances in accordance to the required terms and conditions is allowed by most countries including European countries, United States, China and ASEAN countries.

The same issue regarding the safety of Johnson's Baby Shampoo had been reported in local newspapers back in 2009 and the Ministry of Health had also responded that this product is safe for use. To date, no report involving the safety issue of such substance in cosmetics has been received.

The NPCB has been continuously monitoring cosmetic products in the market through the Post Marketing Surveillance Programme to ensure the safety and quality of these products.

2) Cancellation of Registration for Traditional Product "Twee Hong Suah" due to High Mercury Level



The DCA had cancelled the registration of a traditional product namely Twee Hong Suah (MAL20034112T) as it was found to exceed the permitted mercury limit in traditional products. The marketing authorisation holder and manufacturer, Hong Yang Hoo Pharma Sdn. Bhd. (Penang) had been ordered to stop the sale / supply of Twee Hong Suah immediately and recall all stocks from the market.

Twee Hong Suah was traditionally used for the symptomatic relief of flatulence, stomach-ache, mild vomiting, mild diarrhea, cough and fever in children.

Mercury is a heavy metal that may cause poisoning if consumed in excessive quantity. Poisoning symptoms may include numbness or itching, pain, skin discoloration, swelling, and shedding of skin. It can also cause serious effects such as brain and kidney damage.

The public is advised to stop using this product and seek medical advice if experiencing any unpleasant effects or symptoms of poisoning. Consumers may contact NPCB for further enquiry or information.

CONTACTS & MAP

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CENTRES	EXTENSION NO.
Centre for Product Registration – Deputy Director	5487
• New Drug Section	5522
• Generic Medicine Section	5490
• Biotechnology Section	8423
• Complementary Medicine Section	8415
• Active Pharmaceutical Ingredient Section	8424
• Veterinary Medicine Section	5500
• Regulatory Coordination Section	5502
Centre for Post-Registration of Products – Deputy Director	5538
• Surveillance and Product Complaints Section	5552
• Pharmacovigilance Section	5543
• Variation Section	5588
• Cosmetic Section	5532
Centre for Investigational New Product – Deputy Director	5581
• Investigational Product Evaluation Section	8406
• Investigational Product Safety Monitoring Section	8408
• GCP Compliance Section	8401
• GLP Compliance Section	8404
Centre for Compliance and Licensing – Deputy Diretor	5564
• GMP Section	5566
• Quality, Certification, Licensing and GDP Section	5569
Centre for Organisational Development – Deputy Director	5553
• Information, Communication & Technology Section	5555
• Quality System Section	5556
Centre for Quality Control – Deputy Director	5429
• Bio-Pharmaceutical Testing Section	8457
• Research and Development Section	8448
• Pharmaceutical Chemistry Testing Section	5462, 5456, 5450
• Laboratory Services Unit	5431
• Natural Product Testing Section	5471
• Reference Standard Unit	5468
Centre for Administration – Head	8458

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