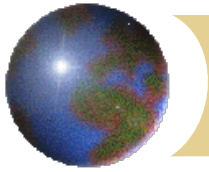


US FDA ***International Update***

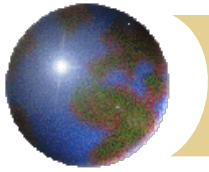
Murray M. Lumpkin, M.D., M.Sc.
Deputy Commissioner
International Programs
U.S. Food and Drug Administration

AFDO
Chicago
09 June 2009



FDA's Statutory Mission

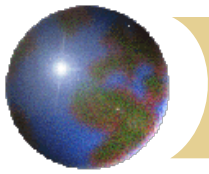
- ✦ (3) participate through appropriate processes with representatives of other countries to reduce the burden of regulation, harmonize regulatory requirements, and achieve appropriate reciprocal arrangements;**



INTERNATIONAL WORK

⊕ **DISCRETIONARY ?**

⊕ **INTEGRAL ?**

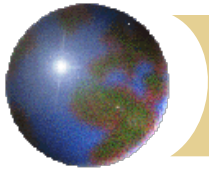


Basic Principal: International Cooperative Activities

❖ Bilateral and multilateral efforts:

❖ to *leverage* the human, scientific, and financial resources and the knowledge and experience of other key regulatory authorities

- to avoid duplication of effort,
- to make our activities more efficient
- to allow us to focus our limited resources on higher-risk areas of concern.



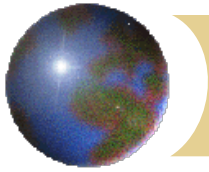
Venues and Tools

Venue:

- ⊕ **Bilaterally**
- ⊕ **Regionally or multilaterally**
- ⊕ **Multilaterally with major International Organizations**
 - ⊞ **WHO, PAHO, FAO, OIE, OECD, APEC**

Tools:

- ⊕ **FDA's Agreements Umbrella**
 - ⊞ **Confidentiality Commitments**
 - ⊞ **Memoranda of Understanding/Agreement or Exchange of Letters**
 - ⊞ **Implementation or Action Plans**
 - ⊞ **Formal Harmonization activities**

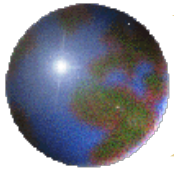


FDA's Collaborations (Agreements)

- ❖ **Over 100 bilateral agreements**

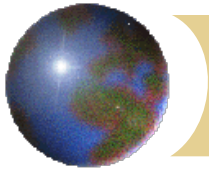
- ❖ **Confidentiality Commitments**
 - ❖ **17 Countries**
 - ❖ **European Commission (2 different DGs)**
 - ❖ **World Health Organization**
 - ❖ **EDQM**

- ❖ **Most tools for information exchange; others developed affirmative collaborations.**



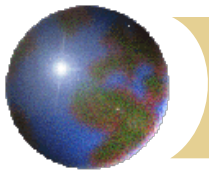
Confidentiality Arrangements

- ⊕ **Don't require us to do anything**
- ⊕ **They are a TOOL if we chose to use it**
- ⊕ **Allows exchange of otherwise non-public information EXCEPT trade secret and personal**
 - ⊕ **Commercial confidential, investigative, pre-decisional**



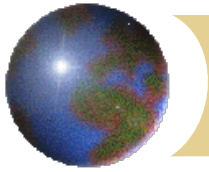
Confidentiality Commitments

- ⊕ **Australia**
- ⊕ **Belgium**
- ⊕ **Canada**
- ⊕ **Denmark**
- ⊕ **EDQM**
- ⊕ **EU**
- ⊕ **France**
- ⊕ **Germany**
- ⊕ **Ireland**
- ⊕ **Israel**
- ⊕ **Japan**
- ⊕ **Mexico**
- ⊕ **Netherlands**
- ⊕ **New Zealand**
- ⊕ **New Zealand-Australia**
- ⊕ **Singapore**
- ⊕ **Sweden**
- ⊕ **Switzerland**
- ⊕ **South Africa**
- ⊕ **United Kingdom**
- ⊕ **World Health Organization**



Wake Up Calls of 2007-08

- ✦ **Melamine in pet food - China**
- ✦ **Melamine in infant formula and dairy products - China**
- ✦ **Over-sulfated chondroitin sulfate in heparin – China**
- ✦ **DEG in Cough syrup - Panama**
- ✦ **DEG in toothpaste – China**
- ✦ **Cantaloupes – Honduras**
- ✦ **5 types of aquacultured fish – China**
- ✦ **Innumerable adulterated “dietary supplements” – China**

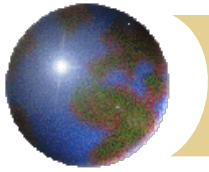


Main Lessons Learned

- ❖ **FDA – To do our job more effectively at home, we’ve got to do our job more efficiently abroad. Build on the foundation we had established.**

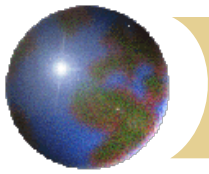
- ❖ **Industry – Its “brand” reputation is dependent on the quality of suppliers with whom they choose to engage.**
 - ❑ **Both individual corporate and industry-wide “brands”**

- ❖ **Consumer – When it comes to food and drugs, maybe cheapest isn’t the most desirable attribute.**



Main Lessons Learned

- ❖ **All – In the world of sourcing our food and drugs, we're not in Kansas anymore – it's a GLOBAL SUPERMARKET – and Americans are shopping everywhere.**
- ❖ **In 2007, the United States imported more than \$2 trillion worth of FDA-regulated products, from roughly 200 countries or territories, using 825,000 importers, through over 300 U.S. ports–of-entry.**

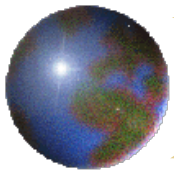


Challenges of Globalization

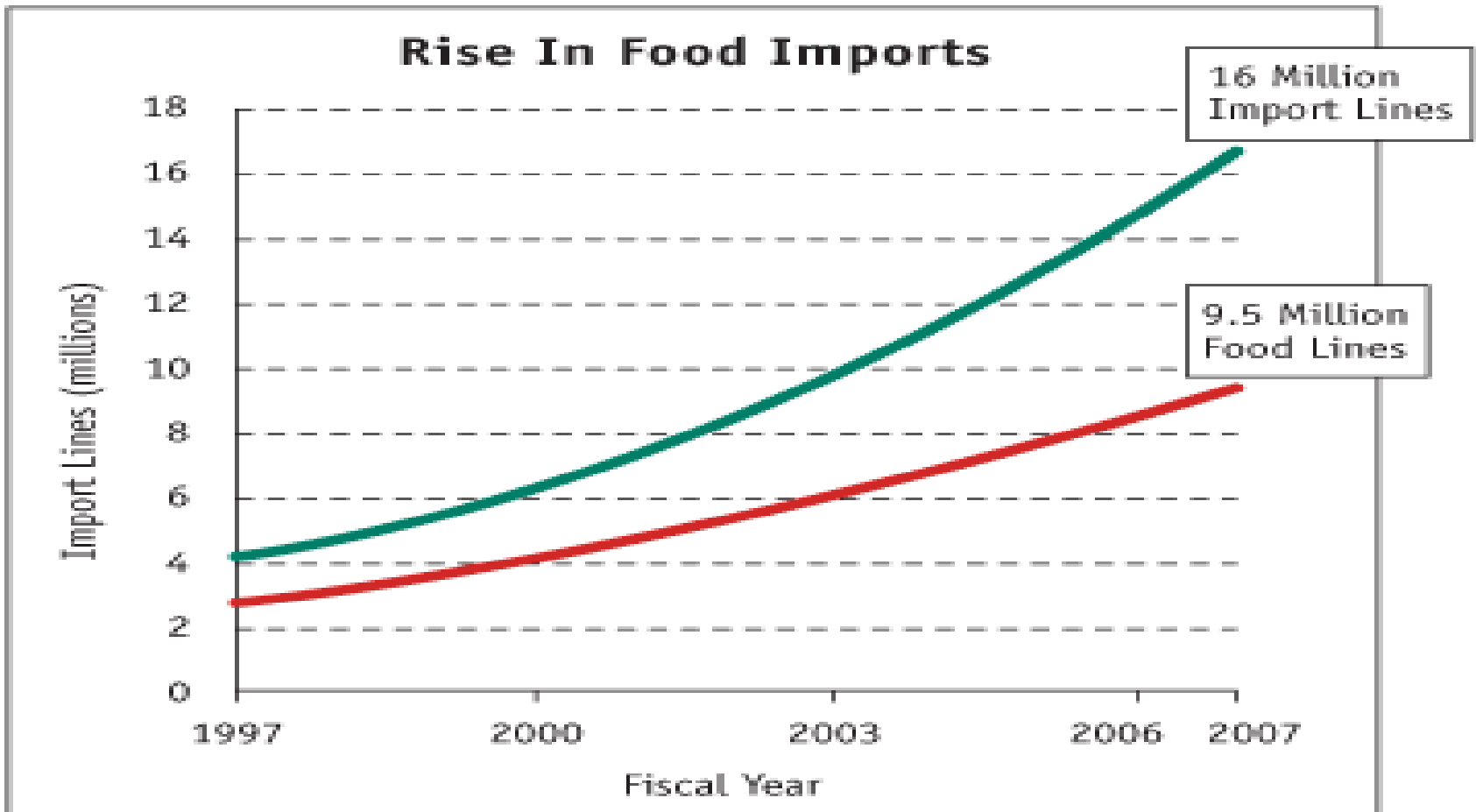
Globalization has fundamentally changed the environment for regulating food and medical products

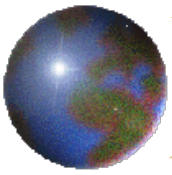
Created unique regulatory challenges for FDA:

- ✦ **More foreign facilities supplying the U.S.;**
- ✦ **Increasing volume of imported products;**
- ✦ **More outsourcing of manufacturing and clinical trials;**
- ✦ **Greater complexity in supply chains;**
- ✦ **Growing complexity of products and manufacturing methods;**
- ✦ **Imports coming from countries with less well developed regulatory systems; and**
- ✦ **Greater opportunities for economic fraud.**

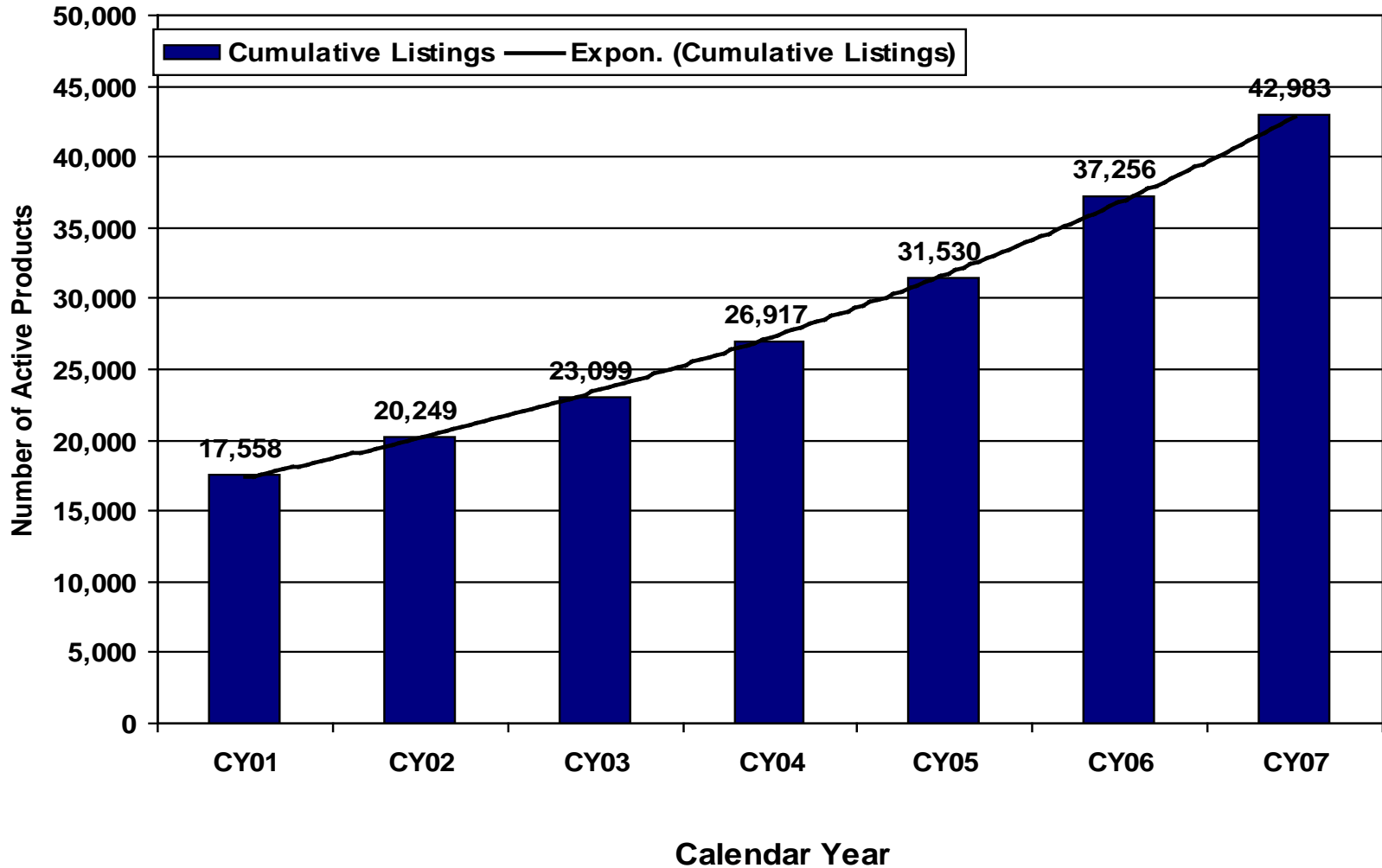


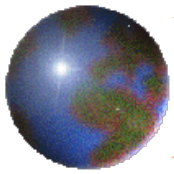
GLOBAL SUPERMARKET



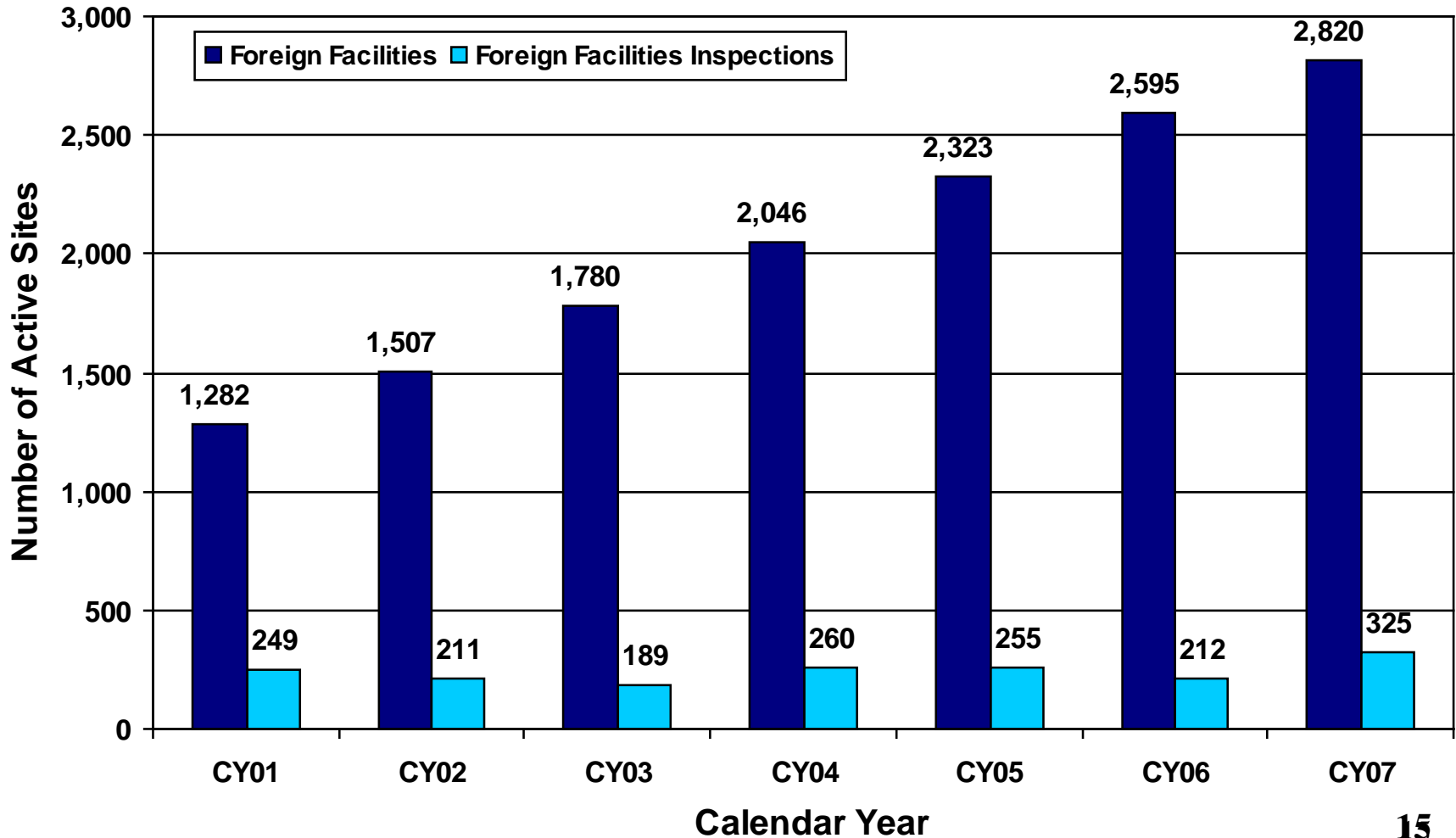


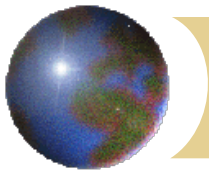
Number of Drugs* Manufactured at Foreign Sites Has More Than Doubled Since 2001





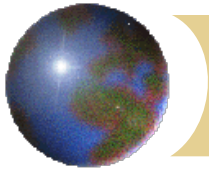
Number of Foreign Sites Making FDA-Regulated Drugs Has More Than Doubled Since 2001.





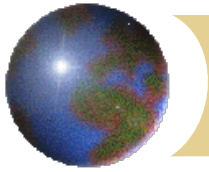
Multiple Challenges

- ❖ Some of these products come from countries with governments that do not wish us well**
- ❖ Some come from countries with little ability to provide the regulatory oversight needed to assure the safety of products exported from their country.**



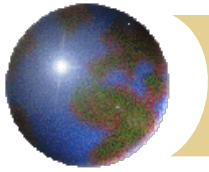
Multiple Challenges

- ❖ Lax oversight in many foreign locales presents opportunities for contamination, counterfeiting, or economic “gain” by cutting corners**
- ❖ Food, cosmetics, and medical products could all be used as unsuspected offensive weapons against a large part of the US or any other country’s population**



21st Century Reality

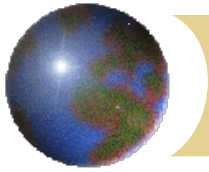
- ✦ **Borders can no longer be the first line of defense**
- ✦ **We can no longer “inspect” out bad products at the border**
- ✦ **Borders must be places where we “audit” that indeed quality has been built in at the point of manufacture**



21st Century Reality

 **We must:**

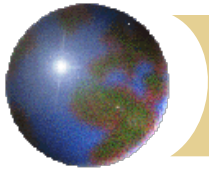
**Engage more effectively abroad in
order to be more effective at home**



The Response

✦ FDA Global Presence

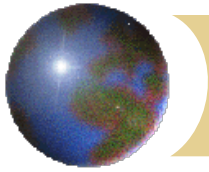
- ✦ Continued bilateral and multilateral engagement with trusted counterparts
 - International Standards Development and Harmonization
 - Foreign Inspections – cadre and individual volunteers
 - Receive **and Use** Inspection Reports from trusted foreign counterpart authorities
 - Third Party Certification
- ✦ **24/7 Presence in Strategic Areas**



Present In-Country Focus

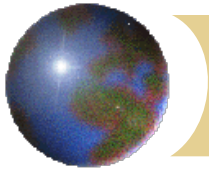
Better Information

- ✦ Through several broad initiatives, many of which are specific to certain areas, obtain **better and more robust information to help FDA officials in the centers and at the borders make better decisions about the products:**
 - ❏ that are being **developed** for the US market,
 - ❏ that are being **reviewed** for marketing authorization in the USA,
 - ❏ that are being **presented** for entry into the US, and
 - ❏ that are presently **already on** the US market.



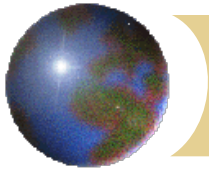
FDA Global Presence: Activities

- ✦ (1) Working with counterpart agencies in-country, gather better knowledge about the production of these products and their transport to US ports
- ✦ (2) Engage with *trusted* counterpart agencies overseas to leverage scientific, inspectional, and other resources



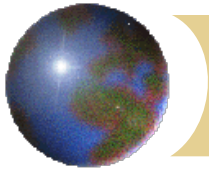
FDA Global Presence: Activities

- ✦ (3) When requested, engage with *developing* counterpart agencies to help build their capacity
- ✦ (4) Engage private- and public-sector *trusted third parties* to provide helpful information about regulated industry compliance with FDA standards



FDA Global Presence: Activities

- ❖ (5) Engage with *regulated industry* to provide greater information about expectations and standards for their products to be admitted to the USA
- ❖ (6) Engage with *USG agencies already in-country* with complementary missions

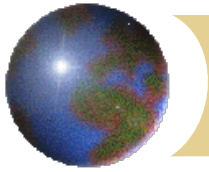


FDA Global Presence: Activities

- ✦ (7) Have the capacity to perform *more overseas inspections of high risk facilities*

RESULT: Must be assured that products meet our standards **BEFORE** they reach our ports

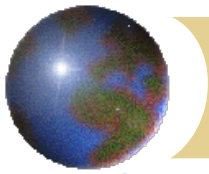
- ✦ *Point of manufacture, point of export, in transit, and when presented for importation*



FDA Global Presence

Initial In-Country Locations

- ✚ China**
- ✚ India**
- ✚ Latin America**
- ✚ Europe**
- ✚ The Middle East**



Current FDA Foreign Locations Status

✚ China: Posts officially opened in Nov 2008.

✚ Beijing

- Director; Sr Tech Experts in foods, medicines, and medical devices

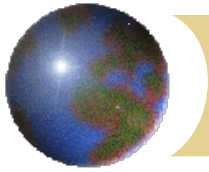
✚ Guangzhou

- 2 inspectors (foods expertise)

✚ Shanghai

- 2 inspectors (medicines expertise)

✚ Local hires in all three posts (n=5)



Current FDA Foreign Locations Status

✚ **India: Post in New Delhi opened Jan '09
Mumbai opened later in year.**

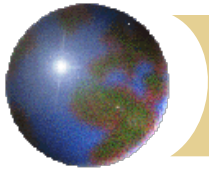
✚ **New Delhi**

- **Director, Sr Technical experts in medicines, medical devices, and foods**

✚ **Mumbai**

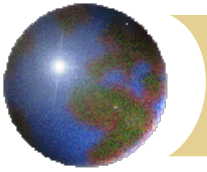
- **Inspectors (foods and medicines expertise)**

✚ **Local hires in both posts**



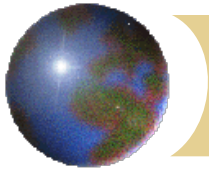
Current FDA Foreign Locations Status

- ✦ **Latin America: Post San José, Costa Rica opened in Jan '09; Posts also in Mexico City, and Santiago.**
 - ❏ **San Jose**
 - Director, Sr technical experts in laboratory medicine and foods
 - ❏ **Mexico city**
 - Sr technical experts in foods and medicines
 - ❏ **Santiago**
 - Sr Technical expert in foods
 - ❏ **Local hires at each post**



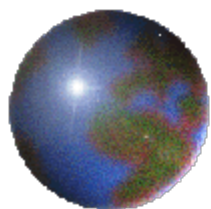
Current FDA Foreign Locations Status

- ✦ **Europe: Main location in Brussels opened in Dec '08; sr tech expert in medicines located at European Medicines Agency in London, and sr tech expert in foods located at European Food Safety Agency in Parma.**
- ✦ **Middle East: Locations under discussion with US State Department**
 - ❏ **Director and Sr technical expert in medicines on board. Sr technical expert in foods to be selected. Inspector to be selected.**



Current FDA Foreign Locations Status

Total: 35 US nationals overseas
15 US nationals Rockville
19 Foreign nationals



THANK YOU

Murray.Lumpkin@fda.hhs.gov