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Dockets Management Branch (HFA-305)
Food and Drug Administration
5350 Fishers Lane
Room 1061
Rockville, Maryland 20857

Boehringer Ingelheim
Pharmaceuticals Inc.

October 10, 2003

**Docket No. 00N-1484 Safety Reporting Requirements for Human Drugs
and Biologic Products; Proposed Rule**

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Dear Sir or Madam:

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Boehringer Ingelheim Pharmaceuticals, Inc. (BIPI) recently completed its review of the proposed rule for **Safety Reporting Requirements for Human Drug and Biologic Products** published in the 14 March 2003 *Federal Register*. BIPI strongly supports the Agency's move to harmonize US safety reporting requirements with international pharmacovigilance standards espoused by ICH and CIOMS. In addition, we support the Agency's decision to focus individual case data collection efforts on serious adverse events; to streamline risk-benefit assessments using comprehensive aggregate data review; to eliminate duplicative reporting of aggregate data; and to standardize adverse event coding terminology. With respect to the latter requirement, we would appreciate greater clarity from the Agency regarding its expectations with respect to handling data base conversions, e.g. clinical trial data bases for ongoing development programs that span several MedDRA versions.

While Boehringer is pleased with the philosophical underpinnings of the proposed regulation, we share the same concerns put forth by PhRMA and the European Federation of Pharmaceutical Industries and Associations (EFPIA) in their respective comments to the Agency. As both organizations provided the Agency with comprehensive comments, Boehringer would like highlight and request clarification on several issues rather than provide detailed comments:

- Resources: The current proposal has extensive infrastructure and resource implications, e.g. data base configuration, processes/procedures. Therefore, the Agency should provide industry with adequate lead time prior to implementing the proposal.

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- **Definition of SADR:** The proposed definition for a SADR will lead to greater numbers of cases being unblinded and forwarded to the Agency as well as Investigators and IRBs. It is unclear, however, whether this will further the understanding of the potential risk profile of the compound under study or create uncertainty and confusion by inundating the Agency, investigators and IRBs with single case, non-comparative safety data. In an effort to focus investigator and IRB communication on important safety issues, we strongly urge the Agency to consider adopting the forthcoming recommendations from CIOMS VI regarding investigator and IRB notification.
- **Active Query by Health Care Professionals:** While BIPI supports the Agency's effort to ensure consistent quality data collection for individual case reports, each company should be given latitude to establish appropriate data collection standards, to hire appropriately qualified personnel and to train personnel in a manner that enables them to account for potential cultural and legal differences among operating units within their organization.
- **Contractor:** The Agency's proposal to hold companies to a 5 day reporting timeline for adverse event data exchange is extremely concerning given the data quality and active query standards set forth by the Agency. Such data exchange should be governed by pharmacovigilance exchange agreements negotiated between companies. Further clarification from the Agency regarding when the regulatory clock begins for each company would be most welcome.
- **Solicited Reports:** Further clarification from the Agency regarding solicited reports would be welcome. Specifically, the Agency should clearly state their expectation regarding causal assessments for such reports, e.g. A health care professional causal assessment should determine regulatory reporting, not a consumer causal assessment.
- **Aggregate Data:** It is unclear whether the Agency's proposal to append local information to the core PSUR will better serve the public health as any potential public health issues identified in the local data set would need to be presented and discussed in the body of the PSUR.

Boehringer appreciates the opportunity to comment on the proposed rule change. We hope the Agency will carefully consider our comments and requests for clarification along with the more detailed comments previously submitted by PhRMA and EFPIA.

Sincerely,



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Drug Surveillance and Information