

## **List of documents for the state registration of medicines in Azerbaijan Republic for foreign manufacturers**

*The below mentioned documents have to be submitted in a hard (paper) version: (1 copy)*

1. Application for the medicinal product registration (appendix № 1);
2. Cover letter on letterhead (official blank) or stamped with indication trade name, INN, dosage form, brief information about manufacturer. The letter should be addressed to the head of the Analytical Expertise Center);
3. Power of attorney (if manufacturer delegates functions on registration to another party);
4. Information about official status of medicinal product:
  - 4.1. document on registration of medicinal product in the manufacturing country (original or notarized copy)- Certificate of Pharmaceutical Product or Free Sale Certificate or Registration Certificate;
  - 4.2. document on registration of medicinal product in other countries approved by manufacturer (if needed a notarially certified copy of registration certificates);
  - 4.3. for the medical product manufactured on the basis of license - notarially certified copy of license holder permission;
  - 3.4. document for the medicinal product manufacturing and document proving medicinal product manufacturing in conditions correspondent to the reliable manufacturing practice (original or notarially certified copy)- Manufacturing license and GMP certificate;
  - 3.5 Certificate of Analysis of the finished drug product, active ingredients, excipients(COA) (copy certified by the manufacturer)

*The below mentioned documents have to be submitted in a E-version: (1 copy)*

The dossier should be submitted in eCTD (Common Technical Document) format. The CTD is divided into five modules.

### **Module 1**

- Regional administrative information (Scan of documents in the paper version);
- Mock-ups of primary and secondary packaging in the Azerbaijani, Turkish, Russian or English languages (Necessary information- trade name, INN, dosage form, storage condition, manufacturer and manufacturer's address);
- Package leaflet in Azerbaijani language.

## Module 2

Module 2 should begin with a general introduction to the pharmaceutical, including its pharmacologic class, mode of action, and proposed clinical use. In general, the Introduction should not exceed one page. Module 2 should contain 7 sections in the following order:

- CTD Table of Contents
- CTD Introduction
- Quality Overall Summary
- Nonclinical Overview
- Clinical Overview
- Nonclinical Written and Tabulated Summaries

## Module 3

Quality

### DRUG SUBSTANCE (NAME, MANUFACTURER)

- General information (Manufacturer, INN, chemical name, the structural formula, including relative and absolute stereochemistry);
- Manufacturing process (Information should be provided to adequately describe the manufacturing process and process controls, including, for example, quantities of raw materials, solvents, catalyst and reagents reflecting the representative batch scale for commercial manufacture, identification of critical steps, process controls, equipment and operating conditions (temperature, pressure, pH, time);
- Control of materials (Materials used in the manufacture of the drug substance (raw materials, starting materials, solvents, catalyst and reagents) should be listed identifying where each material is used in the process.
- Control of critical steps (Tests and acceptance criteria performed at critical steps of the manufacturing process);
- Validation (Process validation and/or evaluation studies for aseptic processing and sterilization should be included);

Control of Drug Substance (a brief summary of the justification of the specification(s), the analytical procedures, batch analyses and validation should be included. Information on the reference standards or reference materials used for testing of the drug substance should be provided. A description of the container closure system);

- Stability (The types of studies conducted, protocols used, and the results of studies should be summarized. The post-approval stability protocol and stability commitment should be provided.)

When a drug substance is chiral, it should be specified whether specific stereoisomers or a mixture of stereoisomers have been used in the nonclinical and clinical studies, and information should be given as to the stereoisomer of the drug substance that is to be used in the final product intended for marketing.

## DRUG PRODUCT

- Description and Composition of the Drug Product (Exact composition including auxiliaries, colors, flavorings, stabilizers, et c. with indication of quantity of all ingredients, function of the components, included into one pharmaceutical form basing on the normative documents (monograph, pharmacopeia, manufacturer' documents);
- Pharmaceutical Development (The Pharmaceutical Development section should contain information on the development studies conducted to establish that the dosage form, the formulation, manufacturing process, container closure system, microbiological attributes and usage instruction are appropriate for the purpose specified in the application);
- Physicochemical and Biological properties (Parameters relevant to the performance of the drug product, such as pH, ionic strength, dissolution, redispersion, reconstitution, particle size distribution, aggregation, polymorphism, rheological properties, biological activity or potency, and/or immunological activity, should be addressed);
- Components of drug product (For combination products, the compatibility of drug substances with each other should be discussed. The choice of excipients, their concentration, their characteristics that can influence the drug product performance should be discussed relative to their respective functions);
- Manufacturing process (A brief description of the manufacturing process and the controls that are intended to result in the routine and consistent production of product of appropriate quality. (A flow diagram should be presented giving the steps of the process and showing where materials enter the process. The critical steps and points at which process controls, intermediate tests or final product controls are conducted should be identified. Steps in the process should have the appropriate process parameters identified, such as time, temperature, or pH. Description, documentation, and results of the validation and/or evaluation studies should be provided for critical steps or critical assays used in the manufacturing process (validation of the sterilization process or aseptic processing or filling.);
- Control of Excipients (Specifications, analytical procedures, analytical validation information. For excipients of human or animal origin, information should be provided

regarding adventitious agents (e.g., sources, specifications, description of the testing performed, viral safety data. Detailed information should be provided on the avoidance and control of non-viral adventitious agents (e.g. transmissible spongiform encephalopathy agents, bacteria, mycoplasma, fungi.) This information can include, for example, certification and/or testing of raw materials and excipients.);

- Control of drug products (A brief summary of the justification of the specification(s), a summary of the analytical procedures and validation, batch analyses and characterization of impurities should be provided.);
- Reference Standards or Materials (Information on the reference standards or reference materials used for testing of the drug product should be provided);
- Container Closure System (A description of the container closure systems should be provided, including the identity of materials of construction of each primary and secondary packaging component and its specification.);
- Stability (The types of studies conducted, protocols used, and the results of studies should be summarized. The post-approval stability protocol and stability commitment should be provided. Conclusions with respect to storage conditions and shelf-life and, if applicable, in-use storage conditions and shelf-life should be given. Results of the stability studies should be presented in an appropriate format(e.g. tabular, graphical, narrative).

## **Module 4 (FOR ORIGINAL DRUGS)**

### **Nonclinical Study Reports**

The Nonclinical Overview should be presented in the following sequence:

- Overview of the nonclinical testing strategy
- Pharmacology
- Pharmacokinetics
- Toxicology
- Integrated overview and conclusions
- List of literature references

## **Module 5**

### **Clinical Study Reports**

The Clinical Overview should present the strengths and limitations of the development program and study results, analyze the benefits and risks of the medicinal product in its intended use, and describe how the study results support critical parts of the prescribing information.

## **Reports of Biopharmaceutical Studies:**

- Bioavailability (BA) Study Reports-(Studies comparing the release and systemic availability of a drug substance from a solid oral dosage form to the systemic availability of the drug substance given intravenously or as an oral liquid dosage form);
- Comparative BA and Bioequivalence (BE) Study Reports (Comparative BA or BE studies may use PK, PD, clinical, or in vitro dissolution endpoints, and may be either single dose or multiple dose.);
- In vitro-In vivo Correlation Study Reports (In vitro dissolution studies that provide BA information, including studies used in seeking to correlate in vitro data with in vivo correlations);

Reports of Bioanalytical and Analytical Methods for Human Studies (Bioanalytical and/or analytical methods for biopharmaceutical studies or in vitro dissolution studies should ordinarily be provided in individual study reports.);

Reports of Human Pharmacokinetic (PK) Studies;

Reports of Human Pharmacodynamics (PD) Studies;

Reports of Efficacy and Safety Studies;

Reports of Post-Marketing Experience;

Literature References (Copies of referenced documents, including important published articles, official meeting minutes, or other regulatory guidance or advice should be provided here. This includes copies of all references cited in the Clinical Overview, and copies of important references cited in the Clinical Summary or in the individual technical reports that were provided in Module 5).