



**IT'S TIME TO GO TO JAPAN !**

*THE JAPANESE REGULATORY  
AND MARKET ACCESS  
ENVIRONMENT*

**March 18<sup>th</sup>, 2016**

**Shogo NAKAMORI**

**PAREXEL International**

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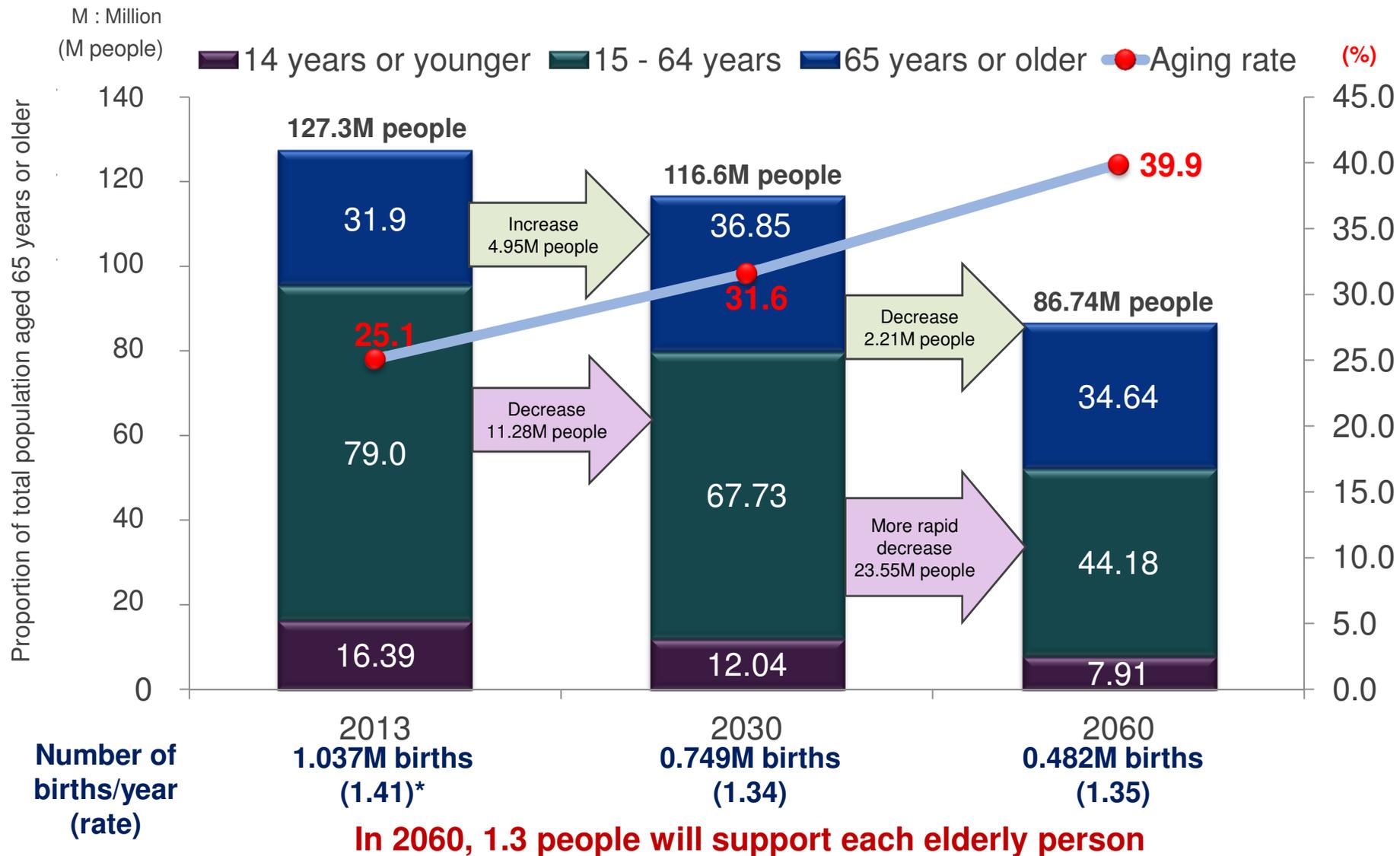


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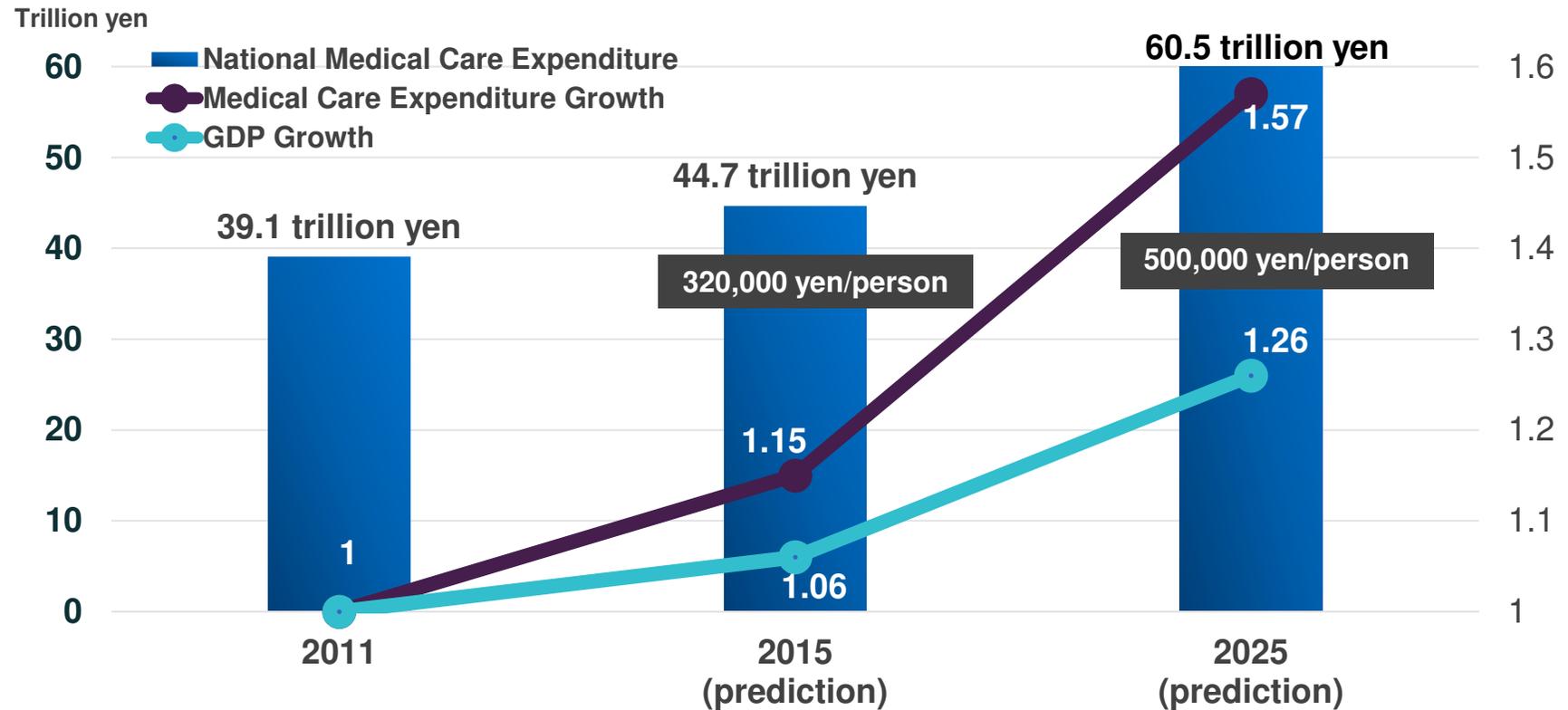
# SUDDEN CHANGES IN POPULATION COMPOSITION



Source: Ministry of Internal Affairs and Communications "National Census" National Institute of Population and Social Security Research "Population Projection for Japan (January 2012 estimate (median birth/median death estimates) (Current population for October 1 each year) Ministry of Health, Labour and Welfare "Demographic Statistics" \*1 Source: 2012 Annual Demographic Statistics

# NATIONAL MEDICAL CARE EXPENDITURE FORECASTS

Issue for 2025: All members of the baby boomer generation (born 1947–51) will be "latter-stage elderly" aged 75 years or older (18% of overall) and annual medical care expenditure will reach 920,000 yen.



Source: \*1: Created from future estimate backup data released as documents at an intensive review meeting held on June 2, 2011 regarding social security reform  
 \*2: Medical Care Expenditure and GDP growth are shown as versus 2011. Source: documents created by the Ministry of Health, Labour and Welfare

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# REGULATORY AUTHORITIES IN JAPAN

## MHLW

Pharmaceutical and Food Safety Bureau, MHLW

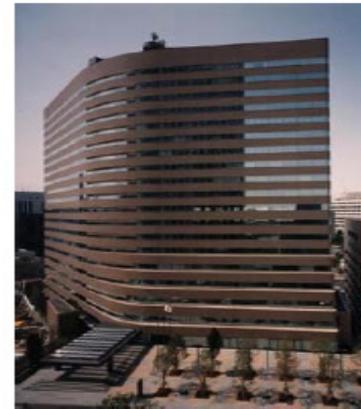
- Final authorization of applications
- Publishing Guidelines
- Advisory Committee
- Supervising PMDA activities



## PMDA

Pharmaceuticals and Medical Devices Agency

- Scientific Review for Drugs & Medical Devices
- GCP, GMP inspection
- Consultation on Clinical Trials etc.

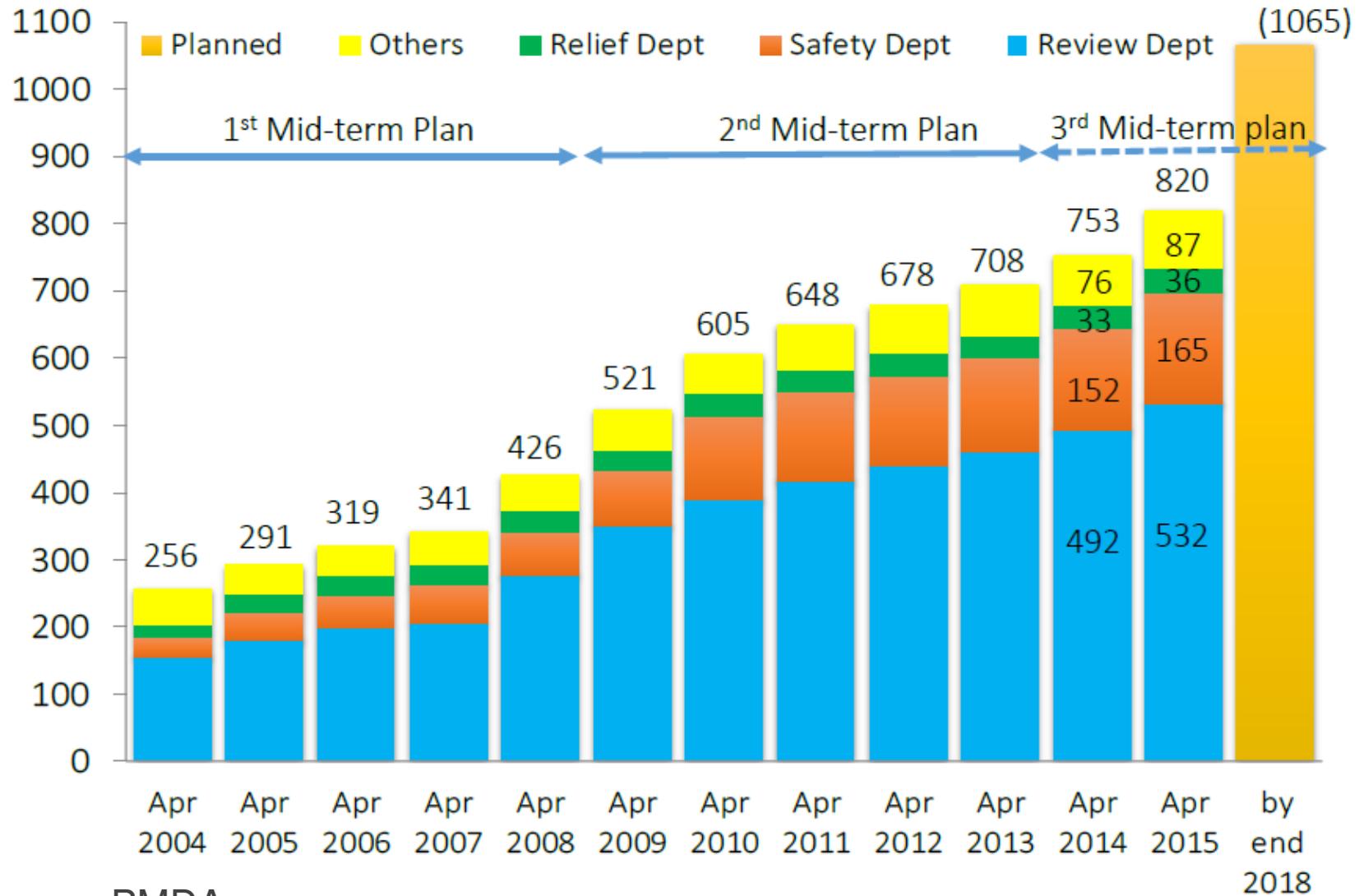


# RECOMMENDED SEQUENCE OF STEPS TO REACH THE JAPANESE MARKET

ACTION	PURPOSE
1. Key Opinion Leader (KOL) Interviews	Define unmet medical need; obtain support
2. Pre-Consultation Meeting with PMDA	Set stage for consultation and questions/discussions
3. Consultation Meeting with PMDA (clinical; may also need CMC or others)	Obtain consensus on registration strategy and required studies
4. Clinical Trial Notification (CTN)	Approval to conduct studies
5. Orphan Drug Designation Application (if appropriate)	Obtain ODD and Priority Review status; consider grant application
6. Clinical Trials	Collect clinical evidence in Japanese patients
7. Pre-JNDA Consultation with PMDA	Set stage for JNDA approval
8. JNDA Submission (by local MAH holding a Marketing Business License)	Obtain marketing approval
9. Pricing dossier	Negotiate price and reimbursement

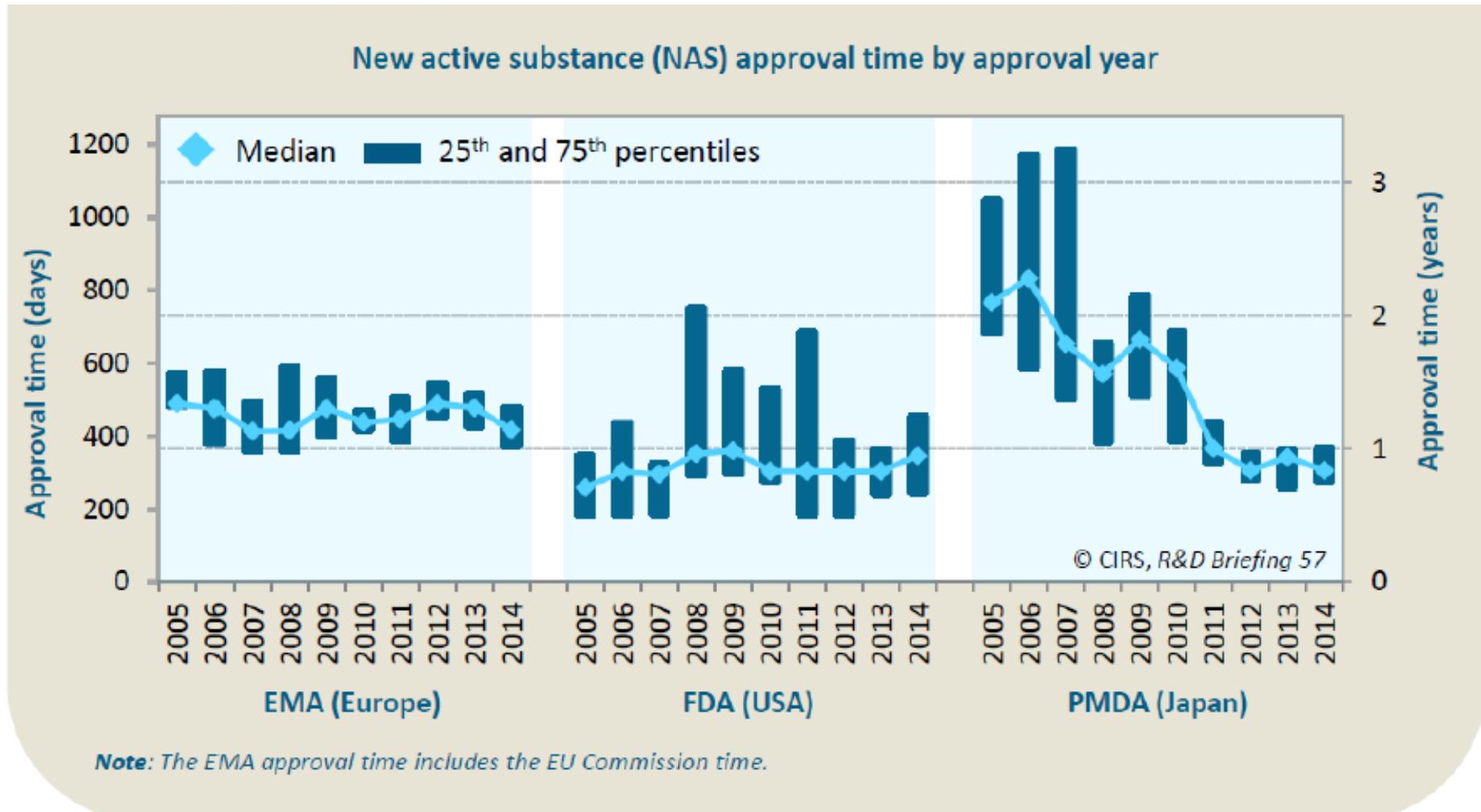
# RAPID INCREASE IN PMDA REVIEW STAFF REFLECTS INTEREST IN INDUSTRY CONSULTATIONS (400+/YEAR)

Regular employees



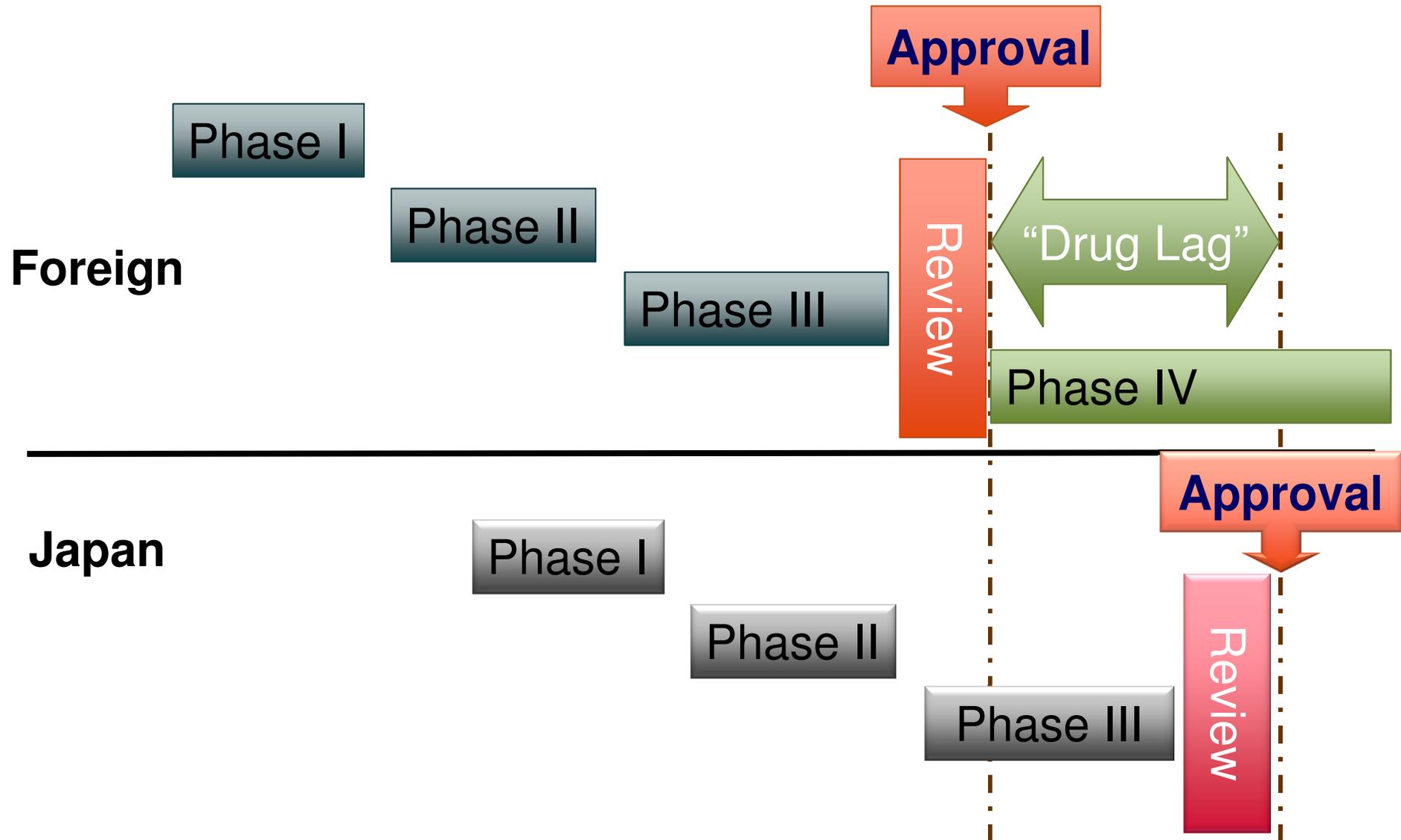
Source: PMDA

# NEW DRUG APPROVALS IN ICH COUNTRIES 2005-2014: JAPAN IS NOW ON PAR WITH EMA AND FDA

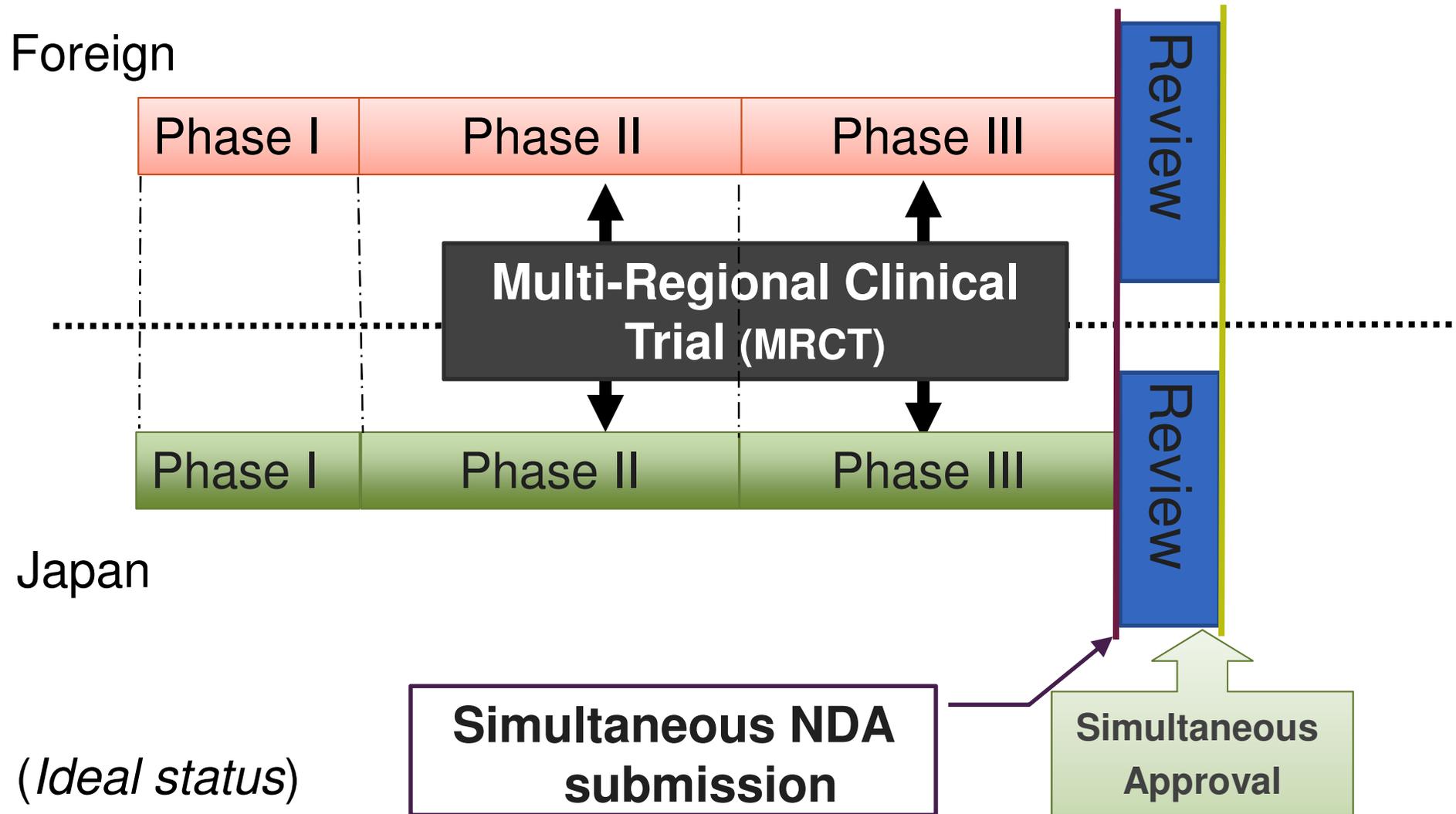


Source: R&D Briefing 57, July 2015, Centre for Innovation in Regulatory Science Ltd.

*JAPAN HAS SUFFERED FROM A “DRUG LAG” :  
TRADITIONAL STANDALONE CLINICAL MODEL*



# ELIMINATING THE DRUG LAG: GLOBAL SIMULTANEOUS CLINICAL DEVELOPMENT MODEL





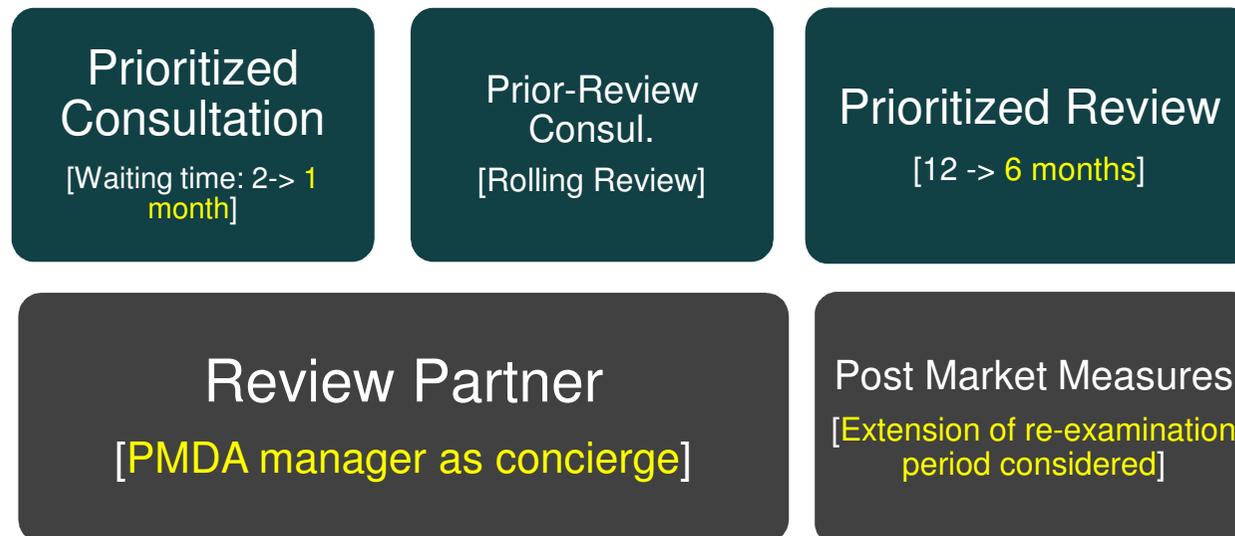
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# ACCELERATED PATHWAY FOR PRODUCT DEVELOPMENT: SAKIGAKE (“BREAKTHROUGH”) FRAMEWORK

## • Criteria

- Medical products (drugs, devices, regenerative therapies) for diseases in dire need of innovative therapy
- Applied for approval first in Japan or simultaneously in Japan and other countries
- Prominent effectiveness can be expected based on non-clinical study and early phase of clinical trials

## • Advantages for Designated Products



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## *EVIDENCE OF JAPAN'S APPETITE FOR INNOVATION – DOMESTIC AND FOREIGN*

- Investment in PMDA staffing
- Priority Review of J-NDAs available
- *Sakigake* framework for breakthrough products
- Orphan Drugs framework
- Reduced “drug lag”
- Regenerative Medicine Law
- 7 Biosimilars approved (vs 1 in US and 22 in EU)
- PMDA Outreach to Academic Scientists to promote innovation
- Creation of AMED (NIH-like Agency for Medical Research and Development)
- Premium prices granted to innovative medicines, including 10-20% premium pricing for *sakigake*

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## *IT'S TIME TO GO TO JAPAN !*

- Conditions in Japan are now favorable for:
  - ✓ Productive **early and direct communications** with Japanese Regulators and KOLs
  - ✓ **Inclusion of a subset of Japanese patients** in East Asian or global clinical studies as part of a global development program
  - ✓ Achievement of timely **registration** (comparable timelines to FDA and EMA) for NMEs, biosimilars and generics
  - ✓ **Attractive pricing**, and premiums for innovative therapies – including *sakigake* products

# *INTRODUCTION OF PAREXEL INTERNATIONAL*

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# FULL RANGE OF EXPERTISE

## PAREXEL Clinical Research Services

- Early Phase Services
- Phase II-III Services
- Clinical Trial Supplies and Logistics
- Quantitative Clinical Development

## PAREXEL Informatics

- Clinical Data Management (DataLabs® EDC)
- Randomization and Trial Supply Management (ClinPhone® RTSM)
- Electronic Patient-Reported Outcomes (ePRO)
- Perceptive MyTrials® Platform and Infrastructure
- Study Management and Monitoring (IMPACT® CTMS)
- Medical Imaging
- Regulatory Information Management (LIQUENT InSight®, LIQUENT SmartDesk™)

## PAREXEL Consulting

- Regulatory Strategy and Operations
  - Regulatory Outsourcing Services
  - Integrated Product Development
- Strategic Compliance and Risk Management

## PAREXEL Access

- Late Phase Interventional
- Observational Research
- Drug Safety
- Market Access Consulting
- Medical Communications

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# PAREXEL JAPAN OVERVIEW



**Tokyo Office**



**Osaka Office**



**Kobe Office**

- **Chairman and CEO: Josef H. von Rickenbach**
- **Established in 1995/7 and incorporated in 1997/10.**
- **General Manager: Shogo Nakamori**
- **More than 1,000 full-time employees.**
- **Office Locations: Tokyo, Osaka, Kobe**
- **Membership of professional institutions:**
  - Japan CRO Association Full Member
    - Shogo Nakamori is “Executive Director of JCROA”
  - Osaka Pharmaceutical Manufacturers Association (OPMA)

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*THANK YOU*