

Dynamic dialogue, expanding perspectives.



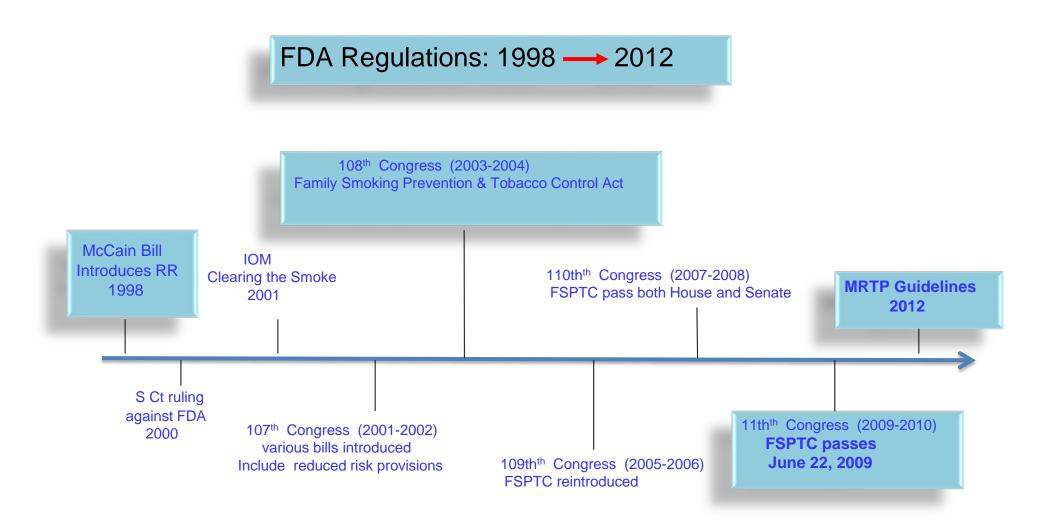
Session #9

Great Expectations: A Regulatory Perspective on Reduced Risk Products

Bruce D. Clark PhD
Philip Morris International R&D

Path to Regulation: The FDA Experience





FDA Implementation of FSPTCA



IMPLEMENTING THE TOBACCO CONTROL ACT

CTP has authority to regulate tobacco products intended for human consumption to reduce harm across the population

- Regulate the manufacture, marketing, and distribution of cigarettes, cigarette tobacco, roll-your-own, and smokeless
- Assert jurisdiction over other products that meet the definition of a tobacco product, including e-cigarettes, cigars, and hookah



FDA presentation at SRNT Feb 2015

"We should all expect further rulemaking to come once deeming has been finalized."

M. Zeller NATO conference 2015



MRTP DRAFT Guidance: FDA Authorization



BACKGROUND

In order for a Modified Risk Tobacco Product to be legally introduced or delivered for introduction into interstate commerce:

- An application must be filed with FDA; and
- FDA must issue an order under section 911(g) with respect to such product allowing it to be introduced or delivered for introduction into interstate commerce.

FDA presentation at SRNT Feb 2015



MRTP DRAFT Guidance: Classification of Authorization Orders



TYPES OF MODIFIED RISK ORDERS

Risk Modification Orders

Are for tobacco products that have been shown to significantly reduce harm and the risk of tobacco-related disease to individual tobacco users, and benefit the health of the population as a whole, taking into account both users and non-users of tobacco products. (Section 911(g)(1))

FDA presentation at TPSAC April 2015

Exposure Modification Orders

Are for tobacco products that reduce or eliminate exposure to a harmful substance and for which the available scientific evidence is not sufficient to meet the standard for a risk modification order but suggests that a measurable and substantial reduction in morbidity and mortality is reasonably likely in future studies. (Section 911(g)(2))



MRTP DRAFT Guidance: Evidence Based Approach



RISK MODIFICATION ORDERS

In order for a tobacco product to make claims that the product presents a lower risk of disease, an applicant must make the demonstrations outlined in 911(g)(1):

That the product, as it is actually used by consumers:

- Will significantly reduce harm and the risk of tobacco-related disease to individual tobacco users; and
- Benefit the health of the population as a whole, taking into account both users and non-users of tobacco products.

FDA presentation at TPSAC April 2015



MRTP Guidance: Evidence Based Approach



FOLLOWING THE SCIENCE

- As a regulatory agency FDA can only go as far as the regulatory science can take us
- The stronger the science base the more likely we are to prevent or prevail in any litigation
- Developing a robust regulatory science program is critical to achieving programmatic success

M. Zeller at SRNT Feb 2015



PMI Evidence-based Assessment Approach



Post-Market Studies & Surveillance

Consumer Perception and Behavior Assessment

Clinical Trials

Systems Toxicology
Assessment

Standard Toxicology
Assessment

Aerosol Chemistry and Physics

Product Design and Control Principles

Reduced Population Harm

Reduced Exposure & Risk

Reduced Risk in Laboratory Models

Reduced Toxicity in Laboratory Models

Reduced Formation of HPHCs



Relative Reduction of Harm / Risk



LOOKING AT NICOTINE DIFFERENTLY

- Establish an integrated, FDA-wide policy on nicotine-containing products that is publichealth based
- Recognize that there is a continuum of nicotine-containing products...and the reality that people smoke for the nicotine but die from the tar
- Implications for tobacco, drug, and device regulatory policy

Potential Research:

Perceptions of disease risk of the range of nicotinecontaining products

Potential Research:

Evaluation of relative toxicities across the spectrum of products

M. Zeller at SRNT Feb 2015



Relative Reduced of Harm / Risk



LOOKING AT NICOTINE DIFFERENTLY

- · Related actions include:
 - Finalizing Deeming regulation
 - Developing jurisdiction policy on nicotine-containing products across FDA
 - Working with CDER and CDRH to determine how regulation of therapeutic nicotine products (Rx, OTC, drugs, devices) could evolve
 - Exploring options at CTP for an expedited premarket review policy based on principle of relative toxicity and risk
- Also has implications for HHS policies (e.g. reimbursement)

M. Zeller at Legacy's Kenneth E. Warner lecture, June 2014

"Armed with more science, yes, future regulations should take into consideration a products' place on the continuum of risk,"

Mitch Zeller NATO April 2015

Reduced Harm / Risk: Science and Behavior





What?

- **Exposure**

What level of reduction in exposure to harmful chemicals can be achieved compared to continued cigarette smoking?

- Risk / Harm

What level of reduction can be achieved compared to continued cigarette smoking?

How?

Acceptability

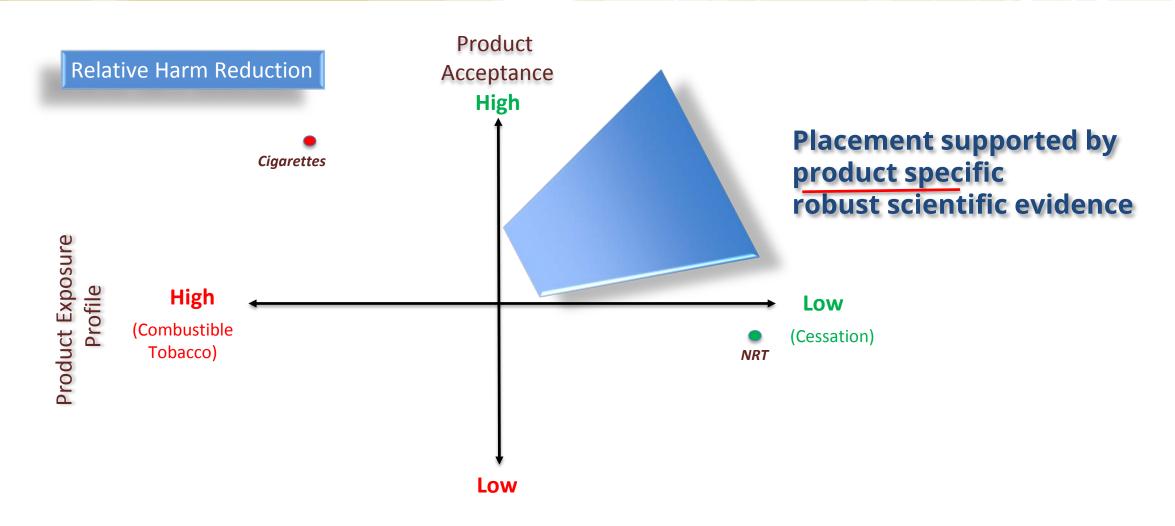
Is the product acceptable to adult smokers and not appealing to non-smokers?

- Behavior

Are smokers willing to fully (or predominantly) switch to the product?

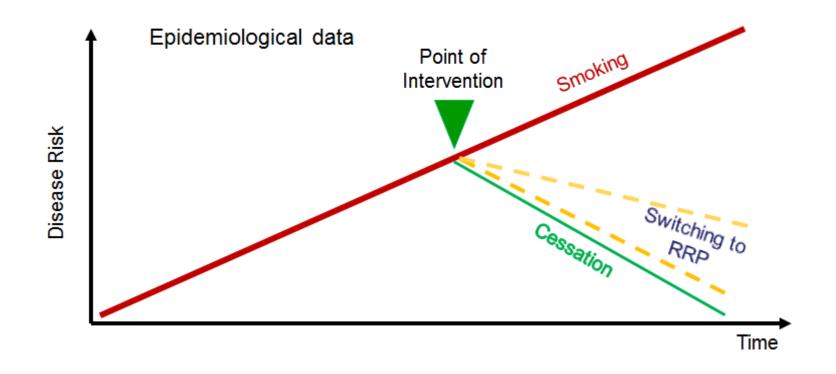
Reduced Harm / Risk: Continuum of Harm





Reduced Harm / Risk: Cessation Benchmark

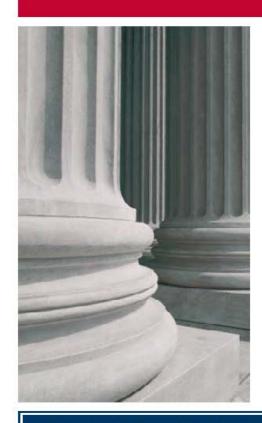




Regulatory Intent



PROTECTING CONSUMERS



As the regulatory gatekeeper, CTP now stands between tobacco products and consumers

M. Zeller at Legacy Kenneth E. Warner lecture, June 2014



What About the Consumer?



- Meeting a population harm reduction objective is not possible without accurate (evidence-based) consumer communications
 - Truthful and not misleading
 - Understood by the consumer
- Without appropriate communication?

August 2015 report by Public Health England*

"Over the last year there has been an overall shift among adults & youth towards the inaccurate perception of e-cigarettes as at least as harmful as cigarettes"

Leads them to state:

"The latest evidence will be considered in the next tobacco control plan for England... a view to maximizing the potential of e-cigarettes as a route out of 'smoking' and minimizing the risk of them acting as a route into smoking"

Divergence of Regulatory Opinion Globally



- 1. Many countries prohibit e-cigarettes
- 2. Singapore banned all tobacco and nicotine "novel and emerging products"
- 3. Concept of harm reduction emerging primarily in the US and EU
- 4. Developments in the US, including any product approval, has the potential to influence regulatory agenda in other countries

Challenges of Emerging Regulation



- 1. Marketing authorization / notification
- 2. Standards of evidence
- 3. Claims or consumer communications
- 4. Post-marketing observation
- 5. Re-authorization or renewal

EU Tobacco Products Directive (TPD): Novel Tobacco Products



- 1. Pre-market Notification vs Authorization
- 2. Data requirement has limited commonalities with US framework:
 - 1. Evidence of the product impact on initiation and cessation
 - 2. Provision of data on consumer perception
- 3. Risk/benefit analysis
- 4. No specific standards established
- 5. Member States must implement by May 2016





EU Tobacco Products Directive

EC required to draft a report evaluating "tobacco products which may have the potential Ban of snus to reduce harm" -(Directive never submitted 92/41/EEC (Directive amending 2001/37/EC) Directive 2001 89/622/EEC) 1992

Draft of new Tobacco Products Directive (TPD):

- Introduces category of novel tobacco products
- Medicinal classification of most e-cigarettes (those with nicotine concentration exceeding 4 mg/ml)
 2012

New TPD transposed in Member States:

e-cigarettes and novel tobacco products are placed on the market under the new rules 2016

New TPD (Directive 2014/40/EU)
published:
E-cigarettes under 20 mg/ml
regulated under TPD

2014

WHO TobReg Study Group Report 2015



"A "harm reduction" strategy to develop tobacco products that are less toxic and addictive could be an effective element of a comprehensive approach to reducing tobacco-related deaths and disease. Such a strategy might not only be beneficial on a population scale but might also be necessary to reduce the risk for disease of tobacco users who are unwilling or unable to break their dependence on tobacco."

"A notification or premarket authorization should be required for all novel products. When feasible, a regulatory body should determine which products are allowed on the market, on the basis of scientific evidence of potential public health benefit...Regulatory strategies developed by the US Food and Drug Administration could be used as a basis for deciding on best practices."

/HO Technical Report Series

989

WHO STUDY GROUP ON TOBACCO PRODUCT REGULATION

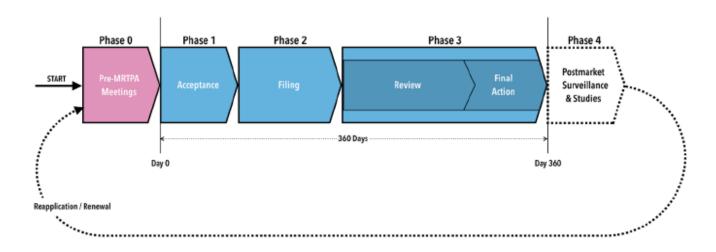
Report on the Scientific Basis of Tobacco Product Regulations: Fifth Report of a WHO Study Group



PMI Application for MRTP in the US



MRTPA REVIEW PROCESS



 Based on the assessment of the THS RRP, PMI intends to file an MRTP application to FDA in 2016



Where We Are



- Science is demonstrating that RRPs can reduce exposure to HPHCs and potential for exposure-related harm
- Regulators have an obligation to facilitate development of accurate, scientifically sound information in order to enable informed consumer choice
 - Learn from years of experience of the benefits of cessation that scientifically accurate information can help consumers make the right choices
- Multiple RRP products are a certainty as technology and science evolve
- All jurisdictions should establish solid regulatory frameworks setting clear standards of scientific evidence and rules for communicating product benefits to consumers



Reduced-Risk Products ("RRPs") is the term the company uses to refer to products with the potential to reduce individual risk and population harm in comparison to smoking combustible cigarettes. PMI's RRPs are **in various stages of development and commercialization**, and we are conducting **extensive and rigorous scientific studies** to determine whether we can support claims for such products of reduced exposure to harmful and potentially harmful constituents in smoke, and ultimately claims of reduced disease risk, when **compared to smoking combustible cigarettes**.

Before making any such claims, we will need to **rigorously evaluate the full set of data** from the relevant scientific studies to determine whether they substantiate reduced exposure or risk. Any such claims **may also be subject to government review and approval**, as is the case in the US today.



Thank you



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