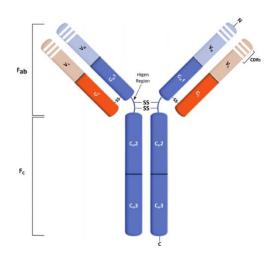
1	Original Research
2	Challenges Faced by the Bio-Pharmaceutical Industry in the Development and Marketing Authorization of
3	Biosimilar Medicines in BRICS-TM Countries: An Exploratory Study
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22	Journal Name: Pharmaceutical Medicine

Biopharmaceutical Industry Perspective

Biosimilar Development, Submission and Review Questionnaire (BDSR)



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CONFIDENTIAL

Industry's view on Biosimilar in BRICS-TM markets

QUESTIONNAIRE-03

VERSION 010 JULY 2020

EC Approved Protocol Number: aLMS/PGR/UH/03332(1)

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Confidentiality

All information collected from individual company or will be kept strictly confidential. No data that will identify an individual company will be reported or made available to any third party. External reports or presentations of the data will include only blinded results and any appropriate analytical interpretations.

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INFORMATION FOR PARTICIPANT INDUSTRY'S VIEWS ON BIOSIMILAR IN BRICS-TM MARKETS

STUDY BACKGROUND

This study is intended, primarily, to document procedures and practices that relate to biological medicines that are the subject of **biosimilar** applications.

AIM OF THE STUDY

To identify key challenges faced by bio-pharmaceutical companies in developing, manufacturing and commercializing biosimilar products across BRICS-TM countries.

OUTCOMES

Based on the information collected from the regulatory agencies, physicians and industry representatives across BRICS-TM markets, the key challenges and gaps in the approval pathway and patient access mechanisms will be identified. It is, therefore, hoped that a common biosimilar development strategy and an improved model for regulatory pathways in the BRICS-TM countries will be proposed.

WHO TO CONTACT FOR QUESTIONS OR ADDITIONAL INFORMATION?

If you need any additional information or have questions, please contact either Hasumati Rahalkar at hrt17abj@herts.ac.uk or Professor Sam Salek at m.s.salek@herts.ac.uk If you would like a summary report of the outcomes of the study, please state your request at the end of the questionnaire with your contact details.

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PART I: INFORMATION ON BIOSIMILAR EXPERIENCE

Q1	How many years ha of biosimilars?	s your company been	involved in the develo	pment and commercialization
	☐ 1-5 years	☐ 6-10 years	☐ 11-15 years	☐ More than 15 years
Q2	How many biosimila	ars are being marketed	by your company?	
	☐ Less than 3	☐ Between 3-5	☐ Between 5-10	☐ More than 10
Q3	How many biosimila	ars are under developm	ent (including partner	ed) by your company?
	□ 1-3	□ 4-5	□ 5-10	☐ More than 10
Q4	Is your company mayour country?	arketing/developing bio	esimilars for any of BR	ICS-TM markets, in addition to
	☐ Yes		□ No	
	If Yes, please specif	fy Country		
05	Does your company	/ have in-house biosim	ilar manufacturing faci	lity?
αJ	☐ Yes	riiave iii-iiouse biosiiii		nty:
		y location		
	ii 100, piodoo opooii			
	PART II: CHALL	ENGES RELATING	TO BIOSIMILAR A	PPROVAL PROCESS
Q6	How would you rate your country?	the current regulatory	GUIDELINES for appr	oval process of biosimilars in
	•	sparent guidelines and e	fficient review process	
		s with tedious review pro	·	
		transparency with guide		interpretation
	☐ Others, please spe	. , ,		into protestori
	Additional	Cony		comments:
	-			
	-			
Q7	How would you eval	luate the TRANSPAREI	NCY of the REVIEW PR	OCESS of biosimilar?
	☐ Review process is	transparent, and files ca	an be tracked online from	n submission to final approval
	☐ Review process is	relatively transparent, fi	es can be tracked online	e from the agency's letters/Q&A
	☐ Review process is	generally transparent fo	r the main milestones bu	ut the decision-making process
	within each milesto	one is not transparent		
	☐ The review proces	ss is not transparent		

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Q8 What are the key challenges in review and evaluation of biosimilar dossier by your country's agency? (Please rate here on the scale of 1 to 5, 1 being the least significant challenge and 5 being the most significant challenge)

Rate 1 to 5

List of Challenges

	List of Challenges	Rate 1 to 5	
	Insufficient subject matter experts		
	Inadequate budget allocation		
	Unclear guideline, open to varying	interpretation	
	Process inefficiency		
	Inadequate communication channel	el between the	
	sponsor and the agency		
	Lack of consultation with the spons	sor	
	Others (please specify)		
	EMA & USFDA?	nent of the biosimilar regulatory review prod	cess with the
	☐ Local regulations are fully aligned with		
	☐ Local regulations are fully aligned with	n USFDA	
	☐ Local regulations are partially aligned	with EMA	
	\square Local regulations are partially aligned	with USFDA	
	☐ Local regulations are not aligned with	either EMA or USFDA	
	☐ If not aligned, please describe with wh	nich agency it is aligned:	
Q10	How FREQUENTLY are you able to see a specific biosimilar product?	ek scientific advice/regulatory input from th	e agency for
	\square As and when required with no upper li	imit defined	
	☐ Specific meetings for non-clinical, clini	ical and pre-submission phase	
	☐ 1-2 meetings, meeting type/phase not	defined	
	☐ No interaction possible		
	= No interaction possible		
Q11	filing a biosimilar application?	ATISFACTORY scientific advice by an auth	ority prior to
	☐ Adequate advice received ☐	☐ Inadequate advice received	
	☐ Advice not received		
		tific advice provided will be LEGALLY bind	ding for both
	the regulator and the sponsor?		
	☐ Yes, for both parties	☐ No, for both parties	
	☐ Yes, only for company [☐ Yes, only for regulator	
	, , , , , , , , , , , , , , , , , , , ,	, , ,	

Q12 What is the CURRENT TIMELINE for evaluation and approval of a biosimilar by the regulatory agency?

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			☐ 12 months	☐ 24 months
Q13		OPTIMAL TIMELINE		oval of a biosimilar by the
	regulatory agency in		☐ 12 months	□ 24 months
	☐ Others			L 24 Months
	What is the timeline fo and pricing approval a		of a biosimilar post appro	val with a national product
	☐ 1 month	☐ 2 months	☐ 3 months	☐ 6 months
	☐ Others			
Q15 /			ed review pathway for	marketing authorisation
	applications? □ Yes		□ No	
	□ 162		□ NO	
	If Yes, have you e	ver obtained an appr	oval under this pathway?	
	☐ Yes		□ No	
	From which count	ry did you receive fir	st approval	
	b. Did you get waive	r for any of these stu	ıdies under the abridged r	eview pathway?
	☐ Pre-clinical stud	у	☐ Clinical Safety study (Ir	nmunogenicity)
	☐ Clinical Efficacy	study (Confirmatory)	☐ Post-marketing Surveill	lance study
Q16 I	Does your agency allo	w nriority/fast track	annlication?	
α.σ.	☐ Yes	w priority/idot track	□ No	
	If Yes, has your com	oany ever received a	n approval under this pat	hway?
	☐ Yes		□ No	
	If Yes, please specify	the biosimilar prod	uct	
Q17 I	n your country, is IP r	_	biosimilar?	
	☐ No, favourable to O		oduct	
	,	3		
	PART III: CH	ALLENGES relati	ng TO BIOSIMILAR DI	EVELOPMENT
Q18 I	☐ Yes		enge relating to the conter	nt of a dossier application?

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Q19 Reference Biological Product Selection

pid	osimilar developmen	t?	eference Biologi	
	Yes	□ No		
	Others (please specif	y)		
	oes your agency exp velopment stage?	pect to use multiple batch	es of reference b	piological product dur
	Yes	□ No		
lf `	Yes, how many batch	es		
c. ha	ve you faced difficul	ties in sourcing multiple b	atches of Referer	nce Biological Product
	Yes	□ No		
De	efine challenges			
		ilability/withdrawn of Origi ate biological product to b	_	
	Yes			ones product.
If '	Vaa ja thia rafaranaa			
	res, is this reference	e product also a BIOSIMILA	R?	
	Yes	e product also a BIOSIMILA	IR?	
In yo	Yes our opinion, in whi onstrating BIOSIMILA	-	elow, does indu	-
In yo	Yes our opinion, in whi onstrating BIOSIMILA	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge)	elow, does indu	B, 1 being the least signific
In yo	Our opinion, in which constrating BIOSIMILA enge and 3 being the result of Challenges Comparatively Physical Comparatively Physical Comparative Physical Co	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological	elow, does indu the scale of 1 to 3 Rate 1 t	8, 1 being the least signific
In yo	Our opinion, in which constrating BIOSIMILA enge and 3 being the result of Challenges Comparatively Physical Characterisation (Q	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality)	elow, does indu the scale of 1 to 3 Rate 1 t	8, 1 being the least signific
In yo	Dur opinion, in which constrating BIOSIMILA and 3 being the result of Challenges Comparatively Physical Characterisation (Quantum In-vitro or In-vivo No.	□ No ch of the areas listed because the proof of the areas listed because the areas listed because the proof of the areas listed because the areas listed	elow, does indu the scale of 1 to 3 Rate 1 t	8, 1 being the least signifi
In yo	Dur opinion, in which constrating BIOSIMILA and 3 being the result of Challenges Comparatively Physical Characterisation (Quantum In-vitro or In-vivo No.	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality)	elow, does indu the scale of 1 to 3 Rate 1 t	B, 1 being the least signific
) In yo demo	Dur opinion, in which constrating BIOSIMILA and 3 being the result of Challenges Comparatively Physical Confirmatory clinical confir	□ No ch of the areas listed because the proof of the areas listed because the areas listed because the proof of the areas listed because the areas listed	elow, does industries the scale of 1 to 3	o 3
In yo demo	Dur opinion, in which constrating BIOSIMILA and 3 being the result of Challenges Comparatively Physical Confirmatory clinical confir	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological uality) on-clinical study all safety and efficacy study	elow, does industries the scale of 1 to 3	o 3
D In you demo	Dur opinion, in which constrating BIOSIMILA and 3 being the research Comparatively Physical Comparatively Physical In-vitro or In-vivo Note Confirmatory clinical thers (please specify) your company face a	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological uality) on-clinical study all safety and efficacy study	elow, does industries the scale of 1 to 3	8, 1 being the least signifi
D In you demonstrated to the challed	Dur opinion, in which constrating BIOSIMILA enge and 3 being the result of Challenges Comparatively Physic Characterisation (Quantum In-vitro or In-vivo Note Confirmatory clinical thers (please specify) by your company face and at a spart of a section data as part of a section	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality) on-clinical study all safety and efficacy study any challenges in submitting a dossier submission?	elow, does industries the scale of 1 to 3	8, 1 being the least signification 3
D In you demo	Dur opinion, in which constrating BIOSIMILA enge and 3 being the result of Challenges Comparatively Physic Characterisation (Quantum In-vitro or In-vivo Note Confirmatory clinical thers (please specify) by your company face and at a spart of a section data as part of a section	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological uality) on-clinical study all safety and efficacy study	elow, does industries the scale of 1 to 3	o 3
D In you demonst challed the c	Dur opinion, in which postrating BIOSIMILA and 3 being the research Comparatively Physical Comparatively Physical Confirmatory clinical thers (please specify) by our company face and attended to the second control of the	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality) on-clinical study all safety and efficacy study any challenges in submitting a dossier submission?	elow, does industries the scale of 1 to 3 Rate 1 to 3	o 3 ERCIAL SCALE BATCH
D In you demonst challed the c	Dur opinion, in which postrating BIOSIMILA and 3 being the research Comparatively Physical Comparatively Physical Confirmatory clinical thers (please specify) by our company face and attended to the second control of the	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality) on-clinical study all safety and efficacy study any challenges in submitting a dossier submission? □ No	elow, does industries the scale of 1 to 3 Rate 1 to 3	o 3 ERCIAL SCALE BATCH
Does valida	Dur opinion, in which postrating BIOSIMILA and 3 being the research Comparatively Physical Comparatively Physical Confirmatory clinical thers (please specify) by our company face and attended to the second control of the	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality) on-clinical study all safety and efficacy study any challenges in submitting a dossier submission? □ No	elow, does industries the scale of 1 to 3 Rate 1 to 3	o 3 ERCIAL SCALE BATCH
Does valida	Dur opinion, in which constrating BIOSIMILA ange and 3 being the result of Challenges. Comparatively Physic Characterisation (Quantum In-vitro or In-vivo Note Confirmatory clinical and there (please specify). The specific of the specifi	□ No ch of the areas listed bearing (Please rate here or most significant challenge) sico-Chemical and Biological uality) on-clinical study all safety and efficacy study any challenges in submitting dossier submission? □ No	elow, does industries the scale of 1 to 3 Rate 1 to 3	ERCIAL SCALE BATCH
Does valida	Dur opinion, in which constrating BIOSIMILA ange and 3 being the result of Challenges. Comparatively Physic Characterisation (Quantum In-vitro or In-vivo Note Confirmatory clinical and there (please specify). The specific of the specifi	□ No ch of the areas listed be ARITY? (Please rate here or most significant challenge) sico-Chemical and Biological quality) on-clinical study all safety and efficacy study any challenges in submitting a dossier submission? □ No	elow, does industries the scale of 1 to 3 Rate 1 to 3	ERCIAL SCALE BATCH

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bio		ined approval for extrapolated indication (based on reference andications) by demonstrating of biosimilarity in one indicationNo
If I	No, was there any reason fo	rejection? Please specify.
	st-approval challenges Is the INN for a biosimilar	the same as that for the original biological product?
	☐ Yes	□ No
	If No, please explain the di	fferences
b.	Does your agency have a s	eparate PV system to report adverse reactions for biosimilars?
	☐ Yes	□ No
	If Yes, how do you report a	dverse reactions in the system?
	☐ By INN	☐ By trade name
	☐ Others (please specify)	
c.		nced a need for demonstration of biosimilarity due to change i as part of post approval changes for a biosimilar?
C.	the manufacturing process	as part of post approval changes for a biosimilar?

Q24 In your experience, which of the following NON-CLINICAL study (indicating requirement) is mandatory to be performed as part of biosimilar applications?

Study	Required (Y/N)	Type of animal species	Sample size
1. PKPD in-vivo			
2. Toxicity			
Single dose toxicity study			
Repeated-dose toxicity			
study			
Unspecific toxicity			
Reproduction toxicology			
Carcinogenicity			
3. Immunogenicity			
Comparative Safety pharmacology			

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• Lo	cal tolerance						
Others	, if any						
	, ,						
In your	experience, what is the	timolino fo	r approval a	f a alini	ool trial on	nligati	on?
	•	umenne ro	approvaro 45 d		cai iriai ap	piicati	OII?
				•			
□ Spec	cify (if different)						
approved	experience, which of bedsimilar from your of half-life products		tudy design	were a	ccepted b	y you	r agency
	☐ Single dose CROSS-0	OVER with I	ate eliminatio	n phase			
	Single-dose PARALLE			-			
	Others (if any)		•				
	half life and doc						
•	half-life products	VED . 20. 1	ta alliast i ett				
	Single dose CROSS-O						
	Single-dose PARALLE		•				
	Others (if any)						
Has your	company faced any cl	nallenges i	n clinical PKI	PD stud	ly for a bio		
Has your	company faced any cl rate here on the scale of nt challenge)	nallenges i	n clinical PKI	PD stuc significa	ly for a bio ant challeng	ge and	
Has your	company faced any cl rate here on the scale of nt challenge) List of Challenges	nallenges in 1 to 5, 1 be	n clinical PKI eing the least	PD stuc significa	ly for a bio	ge and	
Has your (Please	r company faced any cl rate here on the scale of nt challenge) List of Challenges Approval of protocol from	nallenges in 1 to 5, 1 be	n clinical PKI eing the least	PD stuc significa	ly for a bio ant challeng	ge and	
Has your (Please	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval	nallenges in 1 to 5, 1 be	n clinical PKI eing the least	PD stuc significa	ly for a bio ant challeng	ge and	
Has your (Please	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment	nallenges in factor of the agence	n clinical PKI eing the least	PD stuc significa	ly for a bio ant challeng	ge and	
Has your	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF	nallenges in factor 1 to 5, 1 beam the agence	n clinical PKI eing the least	PD stuc	ly for a bio ant challeng	ge and	
Has your (Please	recompany faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir	nallenges in factor 1 to 5, 1 beam the agence	n clinical PKI eing the least	PD stuc	ly for a bio ant challeng	ge and	
Has your (Please significal	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design	nallenges in factor 1 to 5, 1 beam the agence	n clinical PKI eing the least	PD stuc	ly for a bio ant challeng	ge and	
Has your (Please significal	recompany faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir	nallenges in factor 1 to 5, 1 beam the agence	n clinical PKI eing the least	PD stuc	ly for a bio ant challeng	ge and	
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Has your (Please significant of the significant of	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design s (please specify) u ever performed cor	mallenges in the agence and the agence agenc	eing the least	PD stuc significa	ly for a bio ant challeng Rate 1 to 5	ge and	5 being th
Has your (Please signification of the control of th	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design s (please specify) u ever performed cor	mallenges in the agence RO	r clinical PKI eing the least ey	PD stuc significa	ly for a bio ant challeng Rate 1 to 5	ge and	5 being th
Has your (Please signification of the Please signification	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design s (please specify) u ever performed coron?	nallenges in factor of the agence of the age	r clinical PKI eing the least eing the least eight eing the least eight eight eing the least eight eight eing the least eight eight eine eight eine eight eine eight eine eight eigh	PD stuce signification and sig	ly for a bio ant challeng Rate 1 to 5	ge and	5 being th
Has your (Please signification of the Please signification	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design s (please specify) u ever performed cor	nallenges in factor of the agence of the age	r clinical PKI eing the least eing the least eight eing the least eight eight eing the least eight eight eing the least eight eight eine eight eine eight eine eight eine eight eigh	PD stuce signification and sig	ly for a bio ant challeng Rate 1 to 5	ge and	5 being th
Has your (Please signification of the research	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design s (please specify) u ever performed coron?	nallenges in factor of the agence of the age	r clinical PKI eing the least eing the least eight eing the least eight eight eing the least eight eight eing the least eight eight eine eight eine eight eine eight eine eight eigh	PD stuce signification and sig	ly for a bio ant challeng Rate 1 to 5	ge and	5 being th
Has your (Please significant) Other Have yo application Yes Other	r company faced any clarate here on the scale of the challenge) List of Challenges Approval of protocol from Ethics approval Patient recruitment Availability of time at CF Lack of specific and bir clinical study design s (please specify) u ever performed coron?	nallenges in a to 5, 1 be method agence. RO nding scient.	r clinical PKI eing the least ey ific advice on extra	PD stuce signification and sig	ly for a bio ant challeng Rate 1 to 5	ge and	5 being th

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Q29 What is the minimum sample size expected by your agency for CLINICAL STUDIES?

	of Studies		Sample Size	
Phar	rmacokinetics (PK)			
Phar	rmacodynamics (PD)			
Com	bined PKPD			
Clini	cal Safety (Immunogenicity study)			
Clini	cal Efficacy (Confirmatory Clinical Trial)			
	t-marketing Surveillance study			
1 000	Thankeling Garveniance study			
) Have	you ever planned to take your product	outside of yo	our country, in BRIC	S-TM markets?
□ Ye		□ No	•	
If Yes	s, please specify which Country			
	helow were experienced by your companies least significant challenge and 5 being List of Challenges			e of 1 to 5, 1 be
	No harmonised guideline for biosimilar	development	Nate 1 to 4	
	across BRICS-TM markets.	acvelopment		
	Acceptance of a Reference Biological	Product from		
	the BRICS-TM markets other than you	•		
	Absence of a common clinical trial	•		
	approval process across the BRICS-TN	M markets.		
Acceptance of foreign patients' data.				
	Acceptance of foreign patients data.			
	Others (please specify)			
				ESS
	Others (please specify)	nting TO PR	ICING AND ACC	ESS
	Others (please specify) PART IV: CHALLENGES relations access biosimilar medicines e	ating TO PR	ICING AND ACC	ESS
1 Can p □ Ye	PART IV: CHALLENGES related to the second of	easily in your o	ICING AND ACC country?	nilars to patient
1 Can p □ Ye 2 Acco (Plea	PART IV: CHALLENGES relations access biosimilar medicines ended by the second of the s	easily in your o	ICING AND ACC country?	nilars to patien
1 Can p □ Ye 2 Acco (Plea	PART IV: CHALLENGES related to the second of	easily in your o	ICING AND ACC country?	nilars to patien
1 Can p □ Ye 2 Acco (Plea	PART IV: CHALLENGES relations access biosimilar medicines ended by the second of the s	easily in your o	ICING AND ACC country?	nilars to patien
1 Can p □ Ye 2 Acco (Plea	PART IV: CHALLENGES relations access biosimilar medicines es Principal No. 1	easily in your of the company of the least significant control of	ICING AND ACC country? d access of biosim gnificant challenge an	nilars to patien
1 Can p □ Ye 2 Acco (Plea	PART IV: CHALLENGES related patients access biosimilar medicines et es Ording to you what are the main reason as a rate here on the scale of 1 to 5, 1 being ifficant challenge) List of Challenges Innovator patent term and strategy Higher cost of therapy as compare to se	easily in your of the company of the least significant control of	ICING AND ACC country? d access of biosim gnificant challenge an	nilars to patien
1 Can p □ Ye 2 Acco (Plea	PART IV: CHALLENGES related patients access biosimilar medicines et es Principal District Challenges Innovator patent term and strategy Higher cost of therapy as compare to se medicines	easily in your of the least sign and the least sign	ICING AND ACC country? d access of biosim gnificant challenge and Rate 1 to 5	nilars to patien
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Q33 In your opinion, what are the biggest entry barriers for industry players to be active in biosimilar space? (Please rate here on the scale of 1 to 5, 1 being the least significant challenge and 5 being the most significant challenge) Rate 1 to 5 **List of Entry barriers** In-house expertise and infrastructure for biosimilar Prohibitive cost of clinical trials for biosimilars Late and unsure return on investment considering high cost involved Highly competitive and fluctuating prices for Pressure on pricing from health authorities/insurers /procurement authority ☐ Others (please specify) Q34 Concluding Observations List THREE major improvement areas relating to development and regulatory review process of biosimilars. Q35 Would you like to receive a summary report of the outcomes of this study? ☐ No If yes, please provide your email address: Please provide your details below Name of the person: **Company Name:** Position: ☐ Male \square Female Age: Gender: Country:

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Place:

Date:

Glossary of terms and abbreviations

Term	Definition
Abridged review pathway	It conserves resources by not re-assessing scientific supporting data that has been reviewed and accepted elsewhere but includes an 'abridged' independent review of the product in terms of its use under local conditions. This might include a review of the biopharmaceutical (CMC) data in relation to climatic conditions and distribution infrastructure and a benefit-risk assessment in relation to use in the local ethnic population, medical practice/culture and patterns of disease and nutrition.
Clinical efficacy study	The ability to produce a desired effect i.e. appropriate pharmacological activity for a specified indication.
Clinical safety study	It is the pharmacological science relating to the collection, detection, assessment, monitoring and prevention of adverse effects.
INN	International Non-proprietary Names (INN) identify pharmaceutical substances or active pharmaceutical ingredients. Each INN is a unique name that is globally recognized and is public property.
IP regime	Intellectual property (IP) is for a technical invention which allows manufacturer to prevent others from using invention for commercial purposes for up to 20 years.
Marketing authorization application (MAA)	Authorization application submitted to a regulatory authority to launch a drug product on the market for which the application has been submitted.
PK study	Comparative pharmacokinetic (PK) studies designed to demonstrate similar PK profile of the biosimilar and the reference medicinal product regarding key PK parameters. The design of a PK study depends on various factors, including clinical context, safety, PK characteristics of the reference product (target-mediated disposition, linear or non-linear PK, time-dependency, half-life, etc.)
PD study	The branch of pharmacology concerned with the effects of drugs and the mechanism of their action.
PV	Pharmacovigilance (PV) is the science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other medicine-related problem after it is in the market place.

Thank You for completing this questionnaire

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