

## COMPARISON OF CANADIAN CTA & U.S.

# IND Submission Requirements

CLINICAL TRIAL APPLICATION (CTA)	INVESTIGATIONAL NEW DRUG APPLICATION (IND)
<b>Principle</b> New CTA filed for each trial	<b>Principle</b> One IND filed per product, unless new indications or different route of administration
<b>Review Time</b> 30-day default review for most trials (7-day for Comparative BA and healthy volunteers) <ul style="list-style-type: none"> <li>• Clarifaxes – respond within 2 calendar days</li> <li>• NSN – Not Satisfactory Notice</li> <li>• NOL – No Objection Letter</li> <li>• CTSI form submitted for each investigator/site</li> </ul>	<b>Review Time</b> 30-day default review for initial IND filing <ul style="list-style-type: none"> <li>• Information requests</li> <li>• Clinical Hold</li> <li>• Safe to proceed letter for initial IND (usually)</li> <li>• New investigators submitted as Protocol Amendment</li> </ul>
<b>CTA Format</b> Common Technical Document (CTD) submitted as paper copy (including Word and/or pdf files on CD)	<b>IND Format</b> Old Format "Parts 1 to 10" or CTD (paper or electronic copy)
<b>CTA Content</b> <ul style="list-style-type: none"> <li>• Module 1: Forms, Protocol, PSEAT-CTA or submission rationale, Investigator's Brochure (IB), Informed Consent Forms (ICF)</li> <li>• Module 2: Quality Overall Summary (QOS; NCE use templates)</li> <li>• Module 3: Quality documents for biologic</li> <li>• Canadian signature on forms</li> </ul>	<b>IND Content</b> <ul style="list-style-type: none"> <li>• Parts 1 to 10 or CTD Modules 1 -5 (forms, Protocol, IB, CMC, all pharm/tox and clinical reports must be submitted)</li> <li>• If draft nonclinical reports submitted, final audited reports should be available within 120d</li> <li>• U.S. Agent signature (requires physical location in US)</li> </ul>
<b>New Protocol</b> Any new Protocol requires filing of new CTA	<b>New Protocol</b> New protocols (Phase I, II or III) added to IND as Protocol Amendment
<b>CTA Amendments (CTA-A)</b> <ul style="list-style-type: none"> <li>• Protocol Changes (e.g., inc/exc criteria, safety or risk, duration)</li> <li>• New CMC (Quality) that may affect drug quality or safety</li> <li>• Requires 30-day review period</li> </ul>	<b>Protocol Amendment</b> <ul style="list-style-type: none"> <li>• New protocol, Protocol changes, New investigator</li> <li>• Administrative changes may not need submission</li> <li>• Can be initiated after submission to FDA and IRB approval</li> </ul>
<b>CTA Notifications (CTA-N)</b> <ul style="list-style-type: none"> <li>• Minor changes to protocol or CMC, study closure</li> <li>• Notify within 15 days of change</li> </ul>	<b>Information Amendment</b> <ul style="list-style-type: none"> <li>• CMC, nonclinical or clinical information</li> <li>• Everything else</li> </ul>
<b>Annual Report</b> NOT required. Instead submit IB update annually, as a CTA-N. Pharmacology/Toxicology and Clinical information is only contained in the IB	<b>Annual Report</b> Required
<b>Labeling</b> Both French and English required "Investigational Drug: To Be Used By Qualified Investigators Only" and "Drogue de recherche: Réservée uniquement à l'usage de chercheurs compétents".	<b>Labeling</b> "Caution: New Drug-Limited by Federal (or United States) law to investigational use."
<b>Lot Release</b> Required for Biologics submit "Fax-Back Form" for each lot	<b>Lot Release</b> Not required
<b>Record Retention</b> 25 years	<b>Record Retention</b> 2 years post-market approval or 2 years after FDA notified