

**Prequalification Team Inspection services  
WHO PUBLIC INSPECTION REPORT  
(WHOPIR)  
DESK ASSESSMENT OF CONTRACT RESEARCH ORGANIZATION (CRO)**

<b>Part 1</b>	<b>General information</b>	
<b>Company information</b>		
Name of Company	FARMOVS (Pty) Ltd.	
Corporate address of Company	Pharmacology Building, Building No. 80 - Block C Dekaan Street University of The Free State 205 Nelson Mandela Drive Bloemfontein Free State 9301 South Africa	
<b>Inspected site</b>		
Name & address of CRO	Same as above (Formerly known as FARMOVS-PAREXEL Pty. Ltd)	
<b>Desk assessment details</b>		
Date of review	27 - 30 May 2019	
Product and study information covered by this desk assessment	<b><u>Study number: PXL 231461 / CT-G02 1.2</u></b> A single center, single-dose, open-label, laboratory-blinded, randomized, two-treatment, two-period crossover study to determine the bioequivalence of a new fixed dose combination film-coated tablet formulation containing 300 mg Tenofovir Disoproxil Fumarate and 300 mg lamivudine in at least 40 healthy males and females under fasting conditions.	
<b>Part 2</b>	<b>Summary of SRA/NRA inspections evidence considered (from most recent to last)</b>	
<i>US FDA</i>	Dates of inspection:	8-12 Jan 2018
	Type of inspection:	Bioanalytical inspection
	Unit:	Bioanalytical site
	Type of study covered:	BE study
<i>US FDA</i>	Dates of inspection:	27-30 Mar 2017
	Type of inspection:	Unannounced high priority prescription drug user fee inspection (PDUFA)
	Unit:	Early phase clinical unit
	Type of study covered:	BE study
<i>US FDA</i>	Dates of inspection:	28 Nov – 1 Dec 2016
	Type of inspection:	Unannounced - Clinical part

	Unit:	Qdot Pharma which was acquired by Parexel
	Type of study covered:	Clinical study
<i>BASG/AGES – Federal office for Safety in Health Care; Austrian authority</i>	Dates of inspection:	22-26 Aug 2016
	Type of inspection:	Clinical, analytical and statistical part of the study
	Unit:	Bioanalytical and clinical unit
	Type of study covered:	BE study
<i>US FDA</i>	Dates of inspection:	11-15 Jul 2016
	Type of inspection:	Unannounced inspection of method validation experiments and sample analysis of BE study
	Unit:	Bioanalytical Unit
	Type of study covered:	BE study
<b>Part 3</b>	<b>Summary of the last WHO inspection</b>	
Date and conclusion of most recent WHO inspection	Not applicable since the site has not previously been inspected by WHO.	
Brief description of the site's activities	<p>FARMOVS (Pty) Ltd, (formerly known as FARMOVS-PAREXEL Pty. Ltd) is a clinical research organization located on the campus of the University of the Free State (UFS), Bloemfontein, South Africa. The Clinical Research Organization has been in existence since 1974. In March 2018, the University of the Free State acquired PAREXEL's 70% shares in the business and is now the sole owner. FARMOVS supports clinical research in different patient populations in partnership with the Faculty of Health Sciences at the UFS. Through this partnership, the CRO has access to specialist physicians and their patients, across all therapeutic areas.</p> <p>Types of studies conducted at FARMOVS include Bioequivalence / Bioavailability (BE/BA), PK and PD (including clamp studies), Phase I to III clinical studies, QTc, Proof of Concept (PoC), first-in-human ([FiH] (excluding first dosing) and SAD/MAD studies, renal and hepatic impairment, drug-drug interaction and food effect studies.</p>	
Additional product(s) and clinical trial(s) to be covered by this desk assessment:	N/A	
<b>Abbreviations</b>	<b>Meaning</b>	
CCs	Calibration Curve standards	
CAPA	Corrective and preventive action	
CROMF	CRO master file	
GCP	Good clinical practices	

GLP	Good laboratory practices
NC	Non-conformity
NRA	National regulatory agency
QA	Quality assurance
QC	Quality control
QCL	Quality control laboratory
SOP	Standard operating procedure
SRA	Stringent regulatory authority

<b>Part 4</b>	<b>Summary of the assessment of supporting documentation</b>
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**a) Clinical trial license granted by the local authority:**

According to the legislation, neither FARMOVS Clinical Research Organisation nor any other research facility in South Africa is required to have a clinical trial license. The regulatory authority in South Africa, i.e. the South African Health Products Regulatory Authority (SAHPRA), previously known as Medicines Control Council (MCC) and the Ethics Committee approval letters for the conduct of the applicable study were submitted.

Application to conduct the biostudy was authorized by the then Medicine Control Council, Republic of South Africa on 15 May 2017.

**b) CRO Master File:**

FARMOVS Master File together with following attachments were provided:

- FARMOVS Quality Manual, effective 18 Dec 2018
- QA org chart
- EC constitutions as to found in their respective SOPs
- The FARMOVS Press Release

The Master File was arranged in accordance with the WHO guidelines for the preparation of a contract research organization master file, Annex 7, no 957, 2010.

**c) List of all regulatory inspections performed in the last 3 years and their outcomes:**

The list of all regulatory inspections performed in the last 5 years was provided.

The respective EIR and inspection reports were provided and reviewed.

**d) Copy of any warning letter, or equivalent regulatory action, issued by any authority for the site:**

N/A

**e) Confirmation by the senior quality assurance representative that a full self-inspection or external audit dedicated to the studies conducted for WHO product(s) has been performed and all matters dealt with:**

A self-inspection statement and relating QA statement letters were provided to confirm that internal audits for Tenofovir and Lamivudine study were performed as per annual QA-audit plan.

**f) IRB/IEC clinical trial approval (including the approved protocol, the amended protocol and consent form):**

The project approval letter issued by Health Sciences Research Ethics Committee, an Independent Research Ethics Committee was issued on 31 May 2017.

**g) Additional documents submitted**

Additional documents were requested and provided to verify the adequacy of performance of the study.

<b>Part 5</b>	<b>Conclusion – Desk assessment outcome</b>
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Based on the previous WHO inspections and on the GCP/GLP/BE evidence received and reviewed, it is considered that a desk assessment is acceptable in lieu of a WHO onsite inspection. The site *FARMOVS (Pty) Ltd.* located at *Pharmacology Building no 80 – Block C; Dekaan St., University of The Free State 205, Nelson Mandela Drive, Bloemfontein, Free State, 9301, South Africa* is considered to have performed the studies submitted to WHO PQT under an acceptable level of compliance with WHO guidelines.

This WHOPIR will remain valid for 3 years, provided that the outcome of any inspection conducted during this period is positive.

<b>Part 6</b>	<b>List of WHO guidelines referenced in this inspection report</b>
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1. Guidance for organizations performing in vivo bioequivalence studies. WHO Expert Committee on Specifications for Pharmaceutical Preparations. Fiftieth Report Geneva, World Health Organization, 2016 (WHO Technical Report Series, No. 996), Annex 9. **Short name: WHO BE guidance** [http://www.who.int/medicines/publications/pharmprep/WHO TRS 996 annex09.pdf](http://www.who.int/medicines/publications/pharmprep/WHO_TRS_996_annex09.pdf)
2. Good clinical laboratory practice (GCLP), WHO on behalf of the Special Programme for Research and Training in Tropical Diseases. Geneva, 2009  
**Short name: WHO GCLP**  
<https://www.who.int/tdr/publications/documents/gclp-web.pdf>
3. Guidelines for good clinical practice for trials on pharmaceutical products. WHO Technical Report Series, No. 850, 1995 (pp. 97–137). **Short name: WHO GCP**  
<http://apps.who.int/medicinedocs/en/d/Js5516e/19.11.html>
4. WHO guidance on good practices for desk assessment of compliance with good manufacturing practices, good laboratory practices and good clinical practices for medical products regulatory decisions. WHO Expert Committee on Specifications for Pharmaceutical Preparations. Fifty-Second Report. Geneva, World Health Organization, 2018 (WHO Technical Report Series, No. 1010), Annex 9. **Short name: WHO TRS 1010, Annex 9**  
[https://www.who.int/medicines/areas/quality\\_safety/quality\\_assurance/TRS1010annex9.pdf?ua=1](https://www.who.int/medicines/areas/quality_safety/quality_assurance/TRS1010annex9.pdf?ua=1)

5. Handbook – Good Laboratory Practice (GLP): quality practices for regulated non-clinical research and development – Annex I: The OECD Principles on GLP, 2nd ed., 2009. **Short name: OECD GLP**  
<http://www.who.int/tdr/publications/documents/glp-handbook.pdf>
6. Standards and operational guidance for ethics review of health-related research with human participants. Guidance Document. Geneva, World Health Organization, 2011. **Short name: WHO Ethics Committee Guidance**  
<https://www.who.int/ethics/publications/9789241502948/en/>
7. Model guidance for the storage and transport of time-and temperature-sensitive pharmaceutical products. WHO Expert Committee on Specifications for Pharmaceutical Preparations. Forty-Fifth Report. Geneva, World Health Organization, 2011 (WHO Technical Report Series, No. 961), Annex 9. **Short name: WHO storage and transport guidance or TRS 961 Annex 9**  
<http://apps.who.int/medicinedocs/documents/s18683en/s18683en.pdf>
8. Guidelines for the preparation of a contract research organization master file, WHO Expert Committee on Specifications for Pharmaceutical Preparations. Forty-Fourth Report. Geneva, World Health Organization, 2010 (WHO Technical Report Series, No. 957), Annex 7.  
**Short name: WHO CROMF Guidelines or TRS No. 957, Annex 7**  
<http://www.who.int/medicines/publications/44threport/en/>
9. Glove use information leaflet, Patient Safety, Save lives clean your hands. Geneva, World Health Organization, 2009 (revised). **Short name: Glove use information leaflet**  
[http://www.who.int/gpsc/5may/Glove\\_Use\\_Information\\_Leaflet.pdf](http://www.who.int/gpsc/5may/Glove_Use_Information_Leaflet.pdf)
10. WHO guidance on good data and record management practices. WHO Expert Committee on Specifications for Pharmaceutical Preparations. Fiftieth Report Geneva, World Health Organization, 2016 (WHO Technical Report Series, No. 996), Annex 5.  
**Short name: Annex 5 WHO GDRMP guidance**  
[http://www.who.int/medicines/publications/pharmprep/WHO\\_TRS\\_996\\_annex05.pdf](http://www.who.int/medicines/publications/pharmprep/WHO_TRS_996_annex05.pdf)