

# The Ever-Expanding Role of Regulatory Affairs

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**Abstract:** Regulatory Affairs (RA) is a crucial profession in pharmaceuticals, medical devices, and biotechnological industries, encompassing scientific and legal aspects of drug development. It helps companies avoid issues and ensures commercialization. RA faces challenges like geopolitical shifts, green economy, and COVID-19, impacting new therapies and their role.[1] Drug Regulatory Affairs (DRA) is a crucial unit in pharmaceutical companies, providing strategic, tactical, and operational support to expedite the development and delivery of safety and efficacy in pharmaceuticals, veterinary medicines, medical devices, pesticides, agrochemicals, cosmetics, and healthcare products. The Indian pharmaceutical industry is one of the fastest-growing in the country, with a compounded annual growth rate of over 13% in the last 5 years.[2] The US Food and Drug Administration and European Medicines Agency offer opportunities to expedite drug development and regulatory approval timelines. The 1950s pharmaceutical tragedies, including thalidomide, vaccination, and sulfanilamide elixir, led to expanded laws, tougher standards for Good Manufacturing Practices, and increased regulatory scrutiny in the USA, Europe, and India. Drug registration is regulated through development and commercialization, but marketing can be challenging. Regulatory bodies handle executive law, nonsupervisory law, secondary legislation, and rulemaking. Independent regulatory agencies are created for quick application, complexity, and political interference, conducting audits, investigations, and imposing restrictions. The drug regulatory affairs (DRA) professional is crucial in pharmaceutical research and development, ensuring regulatory compliance with the Food and Drug Act and TPP Guidelines/Policies. They secure approval from Health Canada's Therapeutic Products Programme, require excellent writing and communication skills, and can effectively negotiate favorable labeling. The RA plays a crucial role in various systems, often as a part-time or full-time employee.[3] The number of RAs and their skill situations depend on the size of the design, perceived complexity of conditions, and available resources. RAs should be considered crucial contributors, requiring a unique mix of knowledge, real-world experience, and ability to interpret and satisfy guests', druggies', and operation's intent.[4] The regulatory department is responsible for ensuring manufacturers follow global legislative and regulatory requirements at every stage of the drug development process, from research to marketing. They keep track of updated legislatives globally and advise on legal and scientific restraints. Regulatory affairs professionals collect, understand, and identify scientific and clinical data for regulatory submissions. They also provide strategic and technical advice to functional areas, including medical affairs, clinical development, and commercial marketing. They also ensure accurate records and documentation, as annual reports are required for submissions to the FDA or other governmental agencies.[5]

**Keywords:** Drug Regulatory Affairs, Regulatory Agencies, FDA, Pharmaceutical Industry, History of Regulatory Affairs, GMPs, RA Skills.

## 1. Introduction

Regulatory Affairs (RA) is a profession within pharmaceuticals, medical devices and biotechnological industries that includes both scientific and legal aspects of drug development. It helps companies avoid problems caused by bad kept records, inappropriate scientific thinking or poor presentation of data. It also plays a vital role in drug development to commercialize into the desired market.[6] The field of regulatory affairs deals with the regulatory requirements for marketing authorization of therapeutic products. This field is facing a myriad of forces, such as geopolitical shifts, the rise of the green economy, and the COVID-19 pandemic. This article will discuss the various trends that are impacting the development of new therapies and how these trends impact the role of the regulatory affairs professional.[7][1]

### 1.1 Drug Regulatory Affairs

Drug Regulatory Affairs (DRA) is a vital unit in a pharmaceutical company that provides strategic, tactical and operational direction and support for working within regulations to expedite the development and delivery of safety and efficacy in pharmaceuticals, veterinary medicines, medical devices, pesticides, agrochemicals, cosmetics and complementary medicines, healthcare products to

individuals around the world.[8] RA professionals are employed in the pharmaceutical industry, government, academic research and clinical institutions. The Indian Pharmaceutical industry is one of the fastest growing industries in India, with a compounded annual growth rate of over 13% in the last 5 years and is expected to grow at a higher rate in the coming 10 years. The clinical trials market worldwide is worth USD 52 billion, and India is expected to grow to USD 1.5-2 billion. There is a huge demand for qualified RA personnel in clinical research, and the US Food and Drug Administration and European Medicines Agency offer opportunities to expedite drug development and regulatory approval timelines. Pharmaceutical drug regulatory affairs are governed by professionals who take satisfaction in their role to enhance people's health and quality of life.[9] Drug Regulatory Affairs (DRA) is an essential unit in a pharmaceutical company, providing strategic, tactical, and operational direction and support for working within regulations. The Indian pharmaceutical business is one of the fastest expanding in the country, with the clinical research market worth USD 52 billion. US Food and Drug Administration and European Medicines Agency have potential to speed up regulatory approval and drug development processes.[10]

## 1.2 Origin/History of Regulatory Affairs

The 1950s saw a number of tragedies, including the thalidomide, vaccination, and sulfanilamide elixir tragedies, which led to a significant expansion of laws governing the quality, safety, and effectiveness of pharmaceutical products. Additionally, this has led to tougher standards for Good Manufacturing Practices (GMPs) and Marketing Authorization (MA). Let's see what transpired in the USA, Europe, and India.[3]

### Historical Overview of Pharmaceutical Industry and Drug Regulatory Affairs:

#### a) United States of America (USA):

The early Eighteenth century saw the emergence of chemical manufacturing factories and the first large scale manufacturing of glycerin. In the USA, the root of the modern pharmaceutical industry was borne during the Mexican-American war. The Import Drugs Act of 1848 established Custom Laboratories and recognized the United States Pharmacopoeia as an official compendium. At the start of the nineteenth century, new legislations for medicines control started coming into effect due to multiple tragedies worldwide. In 1901, the diphtheria antitoxin developed by City Health Department of St. Louis was contaminated by tetanus causing bacteria, leading to the death of 14 children and nine more deaths in Camden, New Jersey.[5]

The Biologics Control Act of 1902 was the result of the vaccine tragedy and mandated manufacturing and distribution licensing of biological products. The Food and Drugs Act of 1906 made mandatory labelling of ingredients and its content for drugs. The Federal Food and Drugs Act of 1906 was the starting point for eventual creation of the Food and Drug Administration (FDA). In 1938, the Sulfanilamide Elixir tragedy raised concern about the safety of drug products, leading to the Food, Drug and Cosmetic Act of 1938. This law mandated pre-marketing approval of all new drugs and required proof for scientific safety study.[3]

It also mandated categorizing medicines as Over-The-Counter (OTC) drugs and Prescription drugs. FDA is responsible for protecting the public health by assuring the safety, effectiveness and security of human and veterinary drugs, regulating over 1 trillion dollars' worth of products in New Human Drug, Biologics, Biologics, Complex Medical Devices, Food and Color Additives, Infant formulas and Animal Drugs.[5]

#### b) European union (EU):

The primary goal of healthcare laws in European nations is to keep dangerous items off the market. Few other variables, besides Quality, Safety, and Efficacy, contributed to the pharmaceutical industry's highly developed state of affairs and well-defined legal framework.[2]

**Ethical considerations:** The Helsinki Declaration was established in 1964 in order to prevent unethical and risky clinical studies and to ensure that human participants are treated safely and appropriately.[9]

**Economic issues:** The early 20th century saw the development of the first health insurance scheme. Due to the expense of drugs being shifted from the client to the private and public health insurance systems, this has led to pricing transparency.[9]

**Unsafe products usage:** In European Countries, major revolution of drug regulations started post Thalidomide tragedy. In late 1950s, a German company was marketing new sedative pills throughout Europe that supposedly helped reduced nausea in pregnant women. While taking this drug during early pregnancy, it created teratogenic effect which resulted into birth defects in almost 10000 children. The babies born to women in Germany and England were without hands, feet, toes or fingers like flippers growing out of their shoulders and trunk.[8]

## 1.3 Importance of Drug Regulatory Affairs

A highly regulated route to drug registration involves drug development and commercialization. Despite having good intentions, marketing can be challenging due to the perpetual state of change. Regulatory bodies deal with administrative law, regulatory law, secondary legislation, and rulemaking (enacting supervision or oversight for the benefit of the general public as well as codifying and enforcing rules and regulations).[6] The need for quick application of public authority in some areas, the intricacy of some regulatory and supervisory activities that call for competence, and the negative effects of political meddling all serve to justify the creation of independent regulatory agencies. Independent regulatory organisations may conduct audits or investigations, punish the responsible parties, or impose other restrictions.[4]

## 1.4 The Drug Regulatory Affairs Professional

The drug regulatory affairs (DRA) professional plays an important role in the pharmaceutical research and development process, from developing regulatory strategies to planning post-marketing activities. They secure approval from Health Canada's Therapeutic Products Programme (TPP) and ensure regulatory compliance with the Food and Drug Act and Regulations and TPP Guidelines/Policies. This position requires a proficient scientific background and knowledge of Canadian and international regulations. The importance of DRA has increased significantly over the last decade. The DRA professional is the primary liaison between the sponsor and the TPP.[11]

They must possess excellent writing and communication skills and be an effective negotiator to ensure that requests or comments generated during the submissions review process are promptly answered and to negotiate the most favorable labeling. Knowledge of several computer applications is essential to effectively fulfill the job requirements.[12]

### 1.5 Skills & Attributes required for making a good RA Skills

The RA fulfills several critical design places. On numerous systems, the RA is a part-time existent who's else engaged as PM, product director, system mastermind, inventor, or in some other capacity. On other systems, there may be a full time RA or indeed several RAs and a conditions director. The size of the design and the perceived complexity of the demanded conditions-related conditioning, as well as the backing available, are the major determinants of the number of RAs and their demanded skill situations.[9] The places of the RA may be divided among those available to do the demanded work, also considering current chops, interests, and asked development requirements. Whatever the situation, RAs should consider themselves crucial coffers, suitable to contribute to the design in the places described in the former chapter. The RA requires a unique mix of chops that reflects knowledge and real-world exposure, as well as the capability to interpret and satisfy guests', druggies', and operation's intent. Some of the chops are natural in the way an individual workshop (similar as logical and interpersonal chops) and others are learned (e.g., facilitation chops).[8]

The numerous required skills & attributes are listed below:

- a) Present Quality
- b) An effective negotiator
- c) Persuade Accuracy
- d) Work independently
- e) Influence IT Literate
- f) Excellent writing and communication skills
- g) Listen actively
- h) Interpret and consolidate data
- i) Strong follow-ups and convincing ability
- j) Technical sound knowledge

### 1.6 Emerging Trends Affecting Regulatory Strategy

**Strong growth in Emerging Markets:** Pharma emerging markets carry high hopes for investors. With patent expiration, changes in disease patterns and the increasing sale of generics and biosimilars, pharma industry profits from these markets can be astronomical. The countries that constitute emerging markets expanded substantially recently. BRIC countries are still the leaders and are expected to remain in leadership until the end of the decade.[11] However, challenges should be taken into consideration such as the fall of oil prices and abysmal performance by major pharmaceutical companies. The pharma industry progress in these emerging markets has been marred by substandard drugs and corruption scandals discouraging further investments.[9] Pharma companies should tailor their strategies to fit local markets. They should also be armed with patience and strong recruiting skills. Moreover, strict quality control policies should be implemented to maintain quality standards for manufactured drugs.

**Acquisition and licensing opportunities:** A business arrangement whereby one firm authorizes another company to produce its goods in exchange for a certain fee. Leasing out your patents, trademarks, copyrights, designs, and other intellectual property to third parties is one of the fastest and most profitable methods to expand your firm.[13]

**Biologics and Biosimilars market expansion:** The clinical trial, import, and manufacturing procedures for all medications, including biologics and biosimilars, are governed by the Drugs & Cosmetics Act of 1940 and its implementing regulations, the Drugs & Cosmetics Rules of 1945 (the "D&C Rules"). The D&C Act's New Drugs & Clinical Trial Rules, 2019 ("New Drugs & CT Rules"), which govern how clinical trials for all medications, including biologics and biosimilars, are conducted; "Biosimilar Guidelines" (guidelines that specify the pre-clinical trial needs for biosimilars): Guidelines on Similar Biologics: Regulatory needs for Marketing Authorization in India, 2016; Regulations and Guidelines on Biosafety of Recombinant DNA Research, Rules for Manufacture, Use, Import, Export, and Storage of Hazardous Microorganisms/Genetically Engineered Organisms or Cells, 1989 (the "Genetically Engineered Microorganisms Rules"), and Environment (Protection) Act of 1986 (applicable to manufacture, import, and storage of microorganisms and gene-technological products as well as "Clinical Data Guidelines" are guidelines for generating pre-clinical and clinical data for rDNA vaccines, diagnostics, and other biologicals. (Discuss preclinical and clinical assessments. Their goal is to produce preclinical and clinical data on the efficacy, potency, purity, and safety of rDNA vaccines, diagnostics, and other biologicals.[14] CDSCO Guidance for the Industry, 2008 ("Guidance for the Industry") (offers clinical trial sponsors advice on how to submit clinical trial applications under the D&C Act and GCP Guidelines); In India, Institutional Biosafety Committees ("IBSC") are required to be established in order to oversee preclinical trials of biologics and biosimilars. The Institutional Biosafety Committee Guidelines and Handbook, 2011 ("IBSC Guidelines") gives direction to these committees. The National Institute of Biologicals published a document in 2016 titled "Guidance for Industry: Submission of Stability Data and Related Documents for Review and Expert Opinion for Granting Post-approval Changes in Shelf Life of Recombinant Biotherapeutic Products and Therapeutic Monoclonal Antibodies" (the "Post-Approval Guidelines"). This document offers advice and recommendations to holders of marketing authorization for biologics who intend to make post approval changes in the shelf life of their products.[11]

**Aging populations:** Carrying out pharmacokinetic and pharmacodynamic examination is fundamental while making new pharma items, with growing new prescriptions for the old no special case. A significant issue that should be defeated is the expanded gamble of adverse drug reaction (ADR). Two times as numerous patients matured 65 or more are hospitalized because of ADR-related conditions contrasted with more youthful individuals on the grounds that the mix of prescriptions expected to treat different age-related messes improves the probability of compounded effects. In addition, as the body ages, its decreased water maintenance and more prominent fat circulation concentrates drugs. Old organs process tranquilizes slower, expanding the time it takes for the body to discharge meds. This is especially hazardous for narcotic medications used to treat older patients in light of the fact that the gamble of falls or mishaps is higher.[4]

**New product development strategies:** In the present serious world, there are a few procedures to manage the quick evolving climate, among which New Product Development (NPD) is a typical technique. Be that as it may, close to half of the assets that organizations commit to NPD are spent on items that might fizzle. This issue is especially featured in the drug business principally in light of a long advancement time, low achievement rate, high capital prerequisite, and market vulnerability. This review recognizes basic achievement elements of NPD in light of the important literary works and well-qualified suppositions in Iranian drug industry, then, at that point, focuses on them utilizing the philosophy of numerous standards directions through dissecting 50 filled surveys organized based on the AHP (Analytic Hierarchy Process) approach. Albeit the NPD achievement factors appear a similar in both nonexclusive and bio-conventional drug businesses, the fundamental variables furthermore, related sub-factors show the different significance in these two businesses. In any case, this "That's what study uncover", the "company capabilities" is the main component influencing new item advancement progress in both drug conventional and bio-nonexclusive industry. The outcomes of this study add to particularly make benchmark data for drug industry Iranian drug organizations to be more successful in financial plan portion on further developing NPD achievement factors so they can support the achievement pace of NPD all the more successfully.[11]

**Rare diseases:** The gathering zeroed in on systems to smooth out the clinical advancement process and work with administrative endorsement of medicines for uncommon sicknesses. Key boundaries to sedate improvement incorporate low persistent numbers, unfortunate comprehension of illness pathology and movement, absence of laid out clinical preliminary endpoints, and fluctuation in sickness show. The utilization of regular history information and verifiable control information as outer controls was recognized as a critical component in tending to these difficulties.[13] This information can be utilized as outer controls in clinical preliminaries, restricting the quantity of patients presented to fake treatment. Novel clinical preliminary plans and approaches were talked about, including blind-start hybrid and randomized deferred start preliminaries, single-arm preliminaries with inner or outside controls, genuine proof controls, versatile review plans, many-to-one matching strategies, randomized enhancement draws near, quantitative demonstrating of sickness movement, displaying and extrapolation approaches for portion finding, reenactment/demonstrating approaches, and patient-driven ways to deal with factual investigations. Sickness based explicit libraries are direly expected to advance examination drives and safeguard patient personalities.[12][6]

**Quality aspects in entire supply chain:** Pharmaceutical Supply Chain (PSC) challenges and their elements utilizing writing survey, well-qualified assessment obtaining, and subjective framework elements displaying. It distinguishes error in determining, long lead times, absence of target stock, and high SC costs as central questions. The concentrate additionally utilizes subjective framework elements philosophy to exhibit the between connection

between factors influencing difficulties. Three key approaches are suggested: cooperative provider connections, interest in new advancements, and IT foundation. The outcomes give a thorough view to PSC directors.[13]

**ICH expansion:** The International Council for Harmonisation of Specialized Prerequisites for Drugs for Human Use (ICH) is a worldwide association that means to fit drugs for human use. Laid out in 1990, it has advanced to incorporate 21 individuals and 36 spectators, guaranteeing protected, viable, and excellent drugs are created and kept up with effectively.[13]

**Collaboration among regulatory agencies:** The European Prescriptions Organizations Organization Technique to 2020 features the significance of coordinated effort between meds controllers in the worldwide drug industry. The paper examines the projects and drives where controllers depend on cooperation and evaluation work from different controllers while keeping up with their own administrative choices. It proposes apparatuses and ideas to make these methodologies more methodical.[6] The paper additionally features the possible advantages of trading experience with controllers in different areas.

## 1.7 Global Markets

**Regulated Market:** US, EU (UK, Germany, France, Ireland, Sweden, etc.), Japan, Canada, Australia, New Zealand, South Africa.

**Semi regulated Market: (ROW Countries):** Asia, African countries, Middle East countries, Latin America, CIS.

- Asia (Sri Lanka, India, Bangladesh; ASEAN: 10 Countries group - Philippines, Vietnam Singapore, Malaysia, Thailand, Indonesia, Laos, Cambodia, Brunei Darussalam, Myanmar)
- African countries (Algeria, Zambia, Ethiopia, Ghana, Kenya, Malawi, Mozambique, Namibia, Nigeria, Sierra Leone, Tanzania, Zimbabwe etc.)
- Middle East countries (Gulf Co-operation Council countries i.e. Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, UAE)
- Latin America (Mexico, Brazil, Panama, Peru, Guatemala, Argentina, Chile, Dominican Republic)
- CIS (Commonwealth of Independent States): Russia, Ukraine, OFSUs (Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan, Kirghizstan, Moldova, Tajikistan, Turkmenistan, Uzbekistan etc.)[14]

## 1.8 Responsibility of Regulatory Affairs Professional's

Overall, the regulatory department is responsible for a lot. First, they have to ensure manufacturers follow any applicable global legislative and regulatory requirements. And these steps need to be followed at each stage of the development process, so all the way from research and development to the pre-clinical phase through the clinical phase, and then followed by marketing and post-marketing. [3]

Along with the drug development process, there are many times where regulatory submissions are required to move on

to the next phase of the drug development process. Next, regulatory affairs professional is also responsible for keeping track of all the different updated legislative not only in the countries that the company might be in but globally which means, basically, anywhere that company is looking to distribute its products. [4]

Regulatory is also called upon for advising different legal and scientific restraints and requirements throughout the drug development process. Regulatory affairs professional is also responsible for collecting, understanding, collating and identifying scientific and clinical data. Again, that data goes to all the different regulatory submissions.

So, it's very important for every regulatory person to understand what that data truly means. Along with that, the regulatory affairs department is also responsible for giving any strategic and technical advice to the different functional areas from a regulatory standpoint. And these functional areas can stand from medical affairs, clinical development but also into commercial marketing. [2]

Another huge responsibility for regulatory affairs professionals is to make sure that all the records and documentation are kept correctly. A lot of submissions require annual reports to the FDA or to any other governmental agency depending on the country and to fill out these reports is very important to understand what happens throughout the year and that requires immaculate documentation.[4]

## 2. Conclusion

Administrative Undertakings (RA) is a crucial calling in drugs, clinical gadgets, and biotechnological enterprises, enveloping logical and legitimate parts of medication improvement. It assists organizations with keeping away from issues and guarantees commercialization. RA faces difficulties like international movements, green economy, and Coronavirus, influencing new treatments. The Indian drug industry is one of the quickest developing, with chances to speed up drug advancement and administrative endorsement courses of events. Administrative bodies handle managerial regulation, administrative regulation, optional regulation, and rulemaking. RAs assume a significant part in drug innovative work, guaranteeing administrative consistence with the Food and Medication Act and TPP Rules/Strategies. They gather, comprehend, and distinguish logical and clinical information for administrative entries, give key and specialized exhortation, and guarantee precise records and documentation.

## List of Abbreviations

RA: Regulatory Affairs  
 DRA: Drug Regulatory Affairs  
 USFDA: United States Food and Drug Administration  
 USA: United States of America  
 FDA: Food and Drug Administration  
 TPP: Target Product Profile  
 USD: United States Dollar  
 GMPs: Good Manufacturing Practices  
 MA: Marketing Authorization

OTC: Over-The-Counter  
 EU: European Union  
 TPP: Therapeutic Products Programme  
 IT: Information Technology  
 BRIC: Brazil, Russia, India, China  
 D&C Rules: Drugs & Cosmetics Rules  
 rDNA: recombinant Deoxyribonucleic acid  
 CDSCO: Central Drugs Standard Control Organization  
 GCP: Good clinical practice  
 IBSC: Institutional Biosafety Committees ("IBSC  
 ADR: Adverse Drug Reaction  
 NPD: New Product Development  
 AHP: Analytic Hierarchy Process  
 PSC: Pharmaceutical Supply Chain

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