**ADVISORY COMMITTEE ON BORDERLINE SUBSTANCES**

**GUIDANCE NOTES FOR COMPLETING AN APPLICATION FORM FOR A NUTRITIONAL PRODUCT TO BE CONSIDERED BY THE ACBS**

**May 2023**

**Table of Contents**

GENERAL NOTES3

SECTION 1 - COMPANY/MANUFACTURER INFORMATION3

SECTION 2 - PRODUCT OVERVIEW4

SECTION 3 - PRODUCT INFORMATION 6

SECTION 4 - PRODUCT USE7

SECTION 5 - NUTRITIONAL COMPOSITION9

SECTION 6 - PRODUCT DOCUMENTATION 12

SECTION 7 - SUPPORTING CLINICAL EFFICACY 15

SECTION 8 - PRICE18

SECTION 9 - DECLARATIONS19

SECTION 10 - ATTACHMENTS TO APPLICATION FORM19

ADDITIONAL GUIDANCE 19

EVIDENCE REQUIRED FOR TYPE 3 NUTRITIONAL APPLICATIONS 20

**GENERAL NOTES**

* When making an application, the application form must be downloaded in its entirety.
* Applicants must provide information relating to every requirement as indicated and provide supporting rationale for any information that cannot be provided.
* Information must be provided in the relevant section of the application form. Statements should not be made that refer to the information being given in supporting documents e.g. refer to data sheet.
* Attachments to the application form should be named according to Section 10 of the form.
* Applicants must conform to the format and layout of the application form.
* All information must be provided in English
* Hardcopy applications must be bound using wire-o binding (wiro binding), otherwise known as twin loop wire or double loop wire binding. The application will otherwise not be accepted. The binding instructions apply only to Type 1 and Type 2 applications. Submission of electronic copies only are still sufficient for Type 3 applications
* For Type 3 applications, only the relevant sections of the Application that are applicable to the nature of the change must be completed. See page 19 for evidence required for type 3 nutritional applications

**Applications, including Type 3 applications, which do not conform to the above requirements, WILL NOT be accepted**

**For information on how to submit an application refer to the following link:**

<https://www.gov.uk/government/publications/how-to-submit-an-application-for-acbs-approval/the-advisory-committee-for-borderline-substances-how-to-submit-an-application>

**For further information and guidance (including Appendices) related to making applications to the ACBS refer to the following link:**

<https://www.gov.uk/government/groups/advisory-committee-on-borderline-substances>

**SECTION 1 – COMPANY/MANUFACTURER INFORMATION**

* 1. **Company Name -** Provide the full name of the company
	2. **Company Address -** Provide full address of company, including postcode
	3. **Key Contact -** Provide the name, position and contact details of the key contact, including correspondence address if different from the company address.

**Notes on key contact**

Applicants of Type 1 and Type 2 applications are advised that it would be in their interests for a named representative of the Applicant to be available to respond to any queries that may arise when their product is considered at a meeting of the ACBS. This will help to ensure that their product application can be expedited efficiently but requires availability by telephone at the time of the meeting.

It will not be normal practice to invite representatives of the Applicant to attend the actual meetings of the ACBS. In exceptional circumstances and at the discretion of the ACBS, an ad-hoc meeting with representatives of the Applicant may be convened.

**SECTION 2 – PRODUCT OVERVIEW**

* 1. **Current Product Name –** Provide current full name of the product. If there is a name change as part of the application indicate the new name in Section 2.6.2.

**2.2 Is the product a FSMP? –** Please indicate if the product meets the criteria of an FSMP under the Delegated Regulation 2016/128 using the tick boxes.

* 1. **If a FSMP, has it been notified to competent authority under Regulation EU (No) 2016/128 and do you have an acknowledgement letter from DHSC? -**

If your product is a FSMP, you must notify, and receive a letter of acknowledgement from, the Nutrition Legislation team at the Department of Health and Social Care (DHSC). The acknowledgement letter must relate to the product being submitted for review. If you are changing the product you may need to make a new notification and obtain a new acknowledgement letter. Your application will not proceed to the ACBS if you fail to attach the FSMP acknowledgement letter to your application. Include the FSMP acknowledgement as Annex 1.

Further guidance and notification forms can be found at the following links:

[Guidance notes on the notification of marketing of foods for particular nutritional uses, medical foods and infant formula (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/306583/PARNUTS_NOTIFICATION_GUIDANCE_2014.pdf)

[notification-of-food-for-special-medical-purposes-fsmp.docx (live.com)](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fassets.publishing.service.gov.uk%2Fgovernment%2Fuploads%2Fsystem%2Fuploads%2Fattachment_data%2Ffile%2F1018383%2Fnotification-of-food-for-special-medical-purposes-fsmp.docx%23%3A~%3Atext%3DNotifying%2520the%2520competent%2520authority%2520of%2520when%2520first%2520placing%2Cthe%2520specific%2520compositional%2520and%2520information%2520requirements%2520for%2520FSMPs.&wdOrigin=BROWSELINK)

**2.4** **Is MHRA exemption required? -** Please indicate if a MHRA exemption is required using the tick boxes. If required, provide MHRA exemption as Annex 2.

**Notes on MHRA exemptions**

In the case of Type 1 and Type 2 applications:

You will require a statement of exemption from the licensing and other provisions of the Human Medicines Regulations 2012 (as amended) if your product is presented in a ‘Pharma Form’. Pharma Form products include:

• Sterile Liquids

• Sterile Powders

• Tablets

• Capsules

• Powders (this does not include powders that are made into liquids for drinks or foods; e.g. Infant formula, meal replacement drinks or breads)

• Creams

• Ointments

• Bath Oils

(**Note**: In absence of any medicinal claim a Statement of exemption for all other products is not required. This includes Specialist nutritional products such as enteral tube feeds and oral nutritional supplements, which are considered by the MHRA as ‘non-Pharma Form’ products.)

You can apply for a statement of exemption by completing the MHRA ACBS Request Form and sending it along with all relevant documentation mentioned in that form to the Medicines and Healthcare products Regulatory Agency (MHRA) at borderline\_medicine@mhra.gov.uk. We recommend you contact the MHRA in good time as they require the information at least 8 weeks before the closing date for ACBS submissions.

You must obtain a statement of exemption from the MHRA, and include it in your application, before you send the application to the ACBS. Failure to obtain, and include, a statement of exemption for a Pharma Form product will result in your application being rejected at the next ACBS meeting.

When submitting an application to the ACBS for a Pharma Form product, all information must be exactly the same as the information that was provided to the MHRA, otherwise the MHRA statement of exemption will not be valid. If any discrepancies are found, the ACBS will advise the MHRA who may then require a complete re-submission to confirm the exemption.

Any application that claims a product is non-Pharma Form, but which the product’s status under Medicines Regulations is unclear to the ACBS, will be shared with the MHRA for consideration under the Human Medicines Regulations. The MHRA will review the application and make a decision about whether or not a statement of exemption is required. If the MHRA decide a statement of exemption is required, the applicant will be notified by ACBS Secretariat after the next ACBS meeting. Alternatively, if the MHRA decide a statement of exemption is not required then the application will be reviewed at the next ACBS meeting. However, if the MHRA have not reached a decision within 6 weeks of a meeting, the application will not be considered at that forthcoming meeting. In such circumstances the ACBS Secretariat will retain the application until the MHRA has reached a decision. The applicant will be informed at the

earliest opportunity whether they need to apply for an MHRA exemption or if their application will proceed for review at the next available ACBS meeting.

In the case of Type 3 applications:

Any Type 3 changes to Pharma Form product should be submitted directly to the ACBS. However, if any of the changes concern the formulation, indication or claims made in the presentation, promotion or literature of the product then the application will be shared with the MHRA for consideration.

**Additionally, all applicants, whether their product is Pharma Form or not, must confirm that the product is not registered / nor in the process of being registered in line with the Medical Devices Directive.**

* 1. **Categorisation** **of nutritional product -** Provide the category of nutritional product. More information can be found in Appendix 1.
	2. **Type of application –** Indicate the type of application using the tick boxes. More information can be found in Appendix 2.

**Note**: Applicants of Type 1 and Type 2 applications are advised that preliminary advice from the ACBS / a designated representative of the ACBS might be helpful in order to confirm the Type/ categorisation of the product being submitted. No face-to-face meetings/ telephone

conversations will be held with Applicants. Correspondence must be conducted via e-mail, through the Secretariat. This is to ensure transparency and a clear audit trail.

**2.6.1** If Type 1 or Type 2 – Indicate if this product has previously been considered by the ACBS.

If ‘Yes’ – please outline below the date when this product was last considered and the reason(s) the product was not given ACBS status, along with a statement on how this current application addresses the points previously raised

**2.6.2** If Type 3 – Refer to guidance below on EVIDENCE REQUIRED FOR TYPE 3 NUTRITIONAL APPLICATIONS

* 1. **ACBS Indication(s) –** For type 1 and 2 applications, provide proposed indications for use i.e. medical conditions for which approval of the product is being sought for inclusion in Part XV of the Drug Tariff. For type 3 applications, provide the ACBS-approved indications.

**SECTION 3 – PRODUCT INFORMATION**

**3.1** **Product Description -** Provide the product description including relevant properties and characteristics, product format, flavour etc. (As per product label/data card).

**3.2 Appearance and form of the product -** Provide a description of the appearance and format of the product e.g. solid, powder, liquid, pasta, bread, biscuit.

**3.3 Presentation and size of individual unit -** Indicate:

* The presentation and size of an individual unit of the product

e.g. 500 ml bag, 200ml bottle, 400g can.

**3.4 Presentation of secondary unit -** Indicate the presentation and size/weight of the secondary/cluster packaging level. This should represent the selling unit e.g. 4 x 125ml bottles.

**3.5 Dispensing unit -** Indicate the type/size and weight of the dispensing unit / pack size. This should represent what will be dispensed at the pharmacy level e.g. box of 30 x 24g sachets.

**3.6** **Dispensing arrangements -** Indicate how the product will be made available to pharmacists to dispense against a prescription.

**3.7** **Flavours -** Provide a list of all the flavours of the product presented within this application.

**3.8** **Contraindications/Precautions -** Details of warnings, contraindications, side effects, potential interactions with medicines (both general and, if known, specific), adverse reactions and guidance on clinical monitoring must be given.

**Notes**: This information must be provided on the data sheet, any technical healthcare professional / patient literature and, wherever possible, on the label.

Appropriate guidance should be given if the product is not suitable for use by particular cultures and must be provided on both the data sheet and any other relevant technical healthcare professional / patient literature. This information should also appear on the label if possible.

Specific guidance must be provided, if relevant, about the following:

* Use during pregnancy / lactation
* Any potential for overdosing

**3.9** **Age suitability -** Provide the recommended age suitability of the product, as appropriate.

**3.10** **Storage (unopened) -** Directions must be provided about the product storage conditions of the unopened product in its packaging, as sold.

**3.11 Storage (opened/reconstituted) at room temperature -** Directions must be provided about the product storage conditions at room temperature once the container is opened or once product is prepared for use, if preparation is required prior to use.

**3.12** **Storage (opened/reconstituted) in the fridge -** Directions must be provided for the storage of opened or reconstituted product if stored in the refrigerator.

**3.13** **Shelf life -** Information must be provided about the maximum length of time (e.g. months) after manufacture during which the product can be used.

**3.14** **Ingredients (please bold any allergens)** - A full list of ingredients must be provided as they appear on the product label. If the application includes multiple flavours separate ingredient lists should be provided for each recipe.

**SECTION 4 – PRODUCT USE**

**Product presentation -** Tick the relevant category and complete the corresponding section below, as specified. Leave the other sections empty, as appropriate.

**4.1 Ready to consume/use - no preparation required**

**4.1.1** **Directions for use -** Provide directions for use of the product e.g. shake well before use.

**4.1.2 Measuring device size (if applicable) -** If applicable, indicate the size/volume of the measuring device e.g. measuring cup = 30ml.

**4.1.3 Route of administration -** Provide the methods and routes of administration, i.e. oral consumption and/or tube feeding.

**4.1.4 Recommended intake and/or use** **-** Where appropriate, amount, timing and / or frequency of administration for adults, infants and children must be given.

**Note**: This information should be provided on the label, datasheet and any technical healthcare professional / patient literature

**4.2 Powdered product, which requires reconstitution**

All powdered productsmust include information on how to measure the amount of powder e.g. scoop/sachet and instructions for reconstitution. There must also be instructions for safe storage after reconstitution.

**Note:** Regulation (EU) 2016/127 and the corresponding UK legislation require that instructions are provided for appropriate preparation, storage and disposal of all infant products.

**4.2.1 Sachet or scoop size -** Indicate the weight/volume of the sachet/scoop.

**4.2.2 Volume of reconstituted product -** Indicate the volume of liquid required to reconstitute one sachet or a specified weight or number of scoops, and the final volume of the reconstituted product.

**4.2.3 Number of sachets or scoops per serving/feed -** Indicate the number of sachets or scoops required when reconstituting one serving/feed of the product.

**4.2.4 Directions for use/preparation guidelines -** Provide directions for the use/preparation of the product as indicated on the label/ data card.

**4.2.5 Route of administration -** Provide the methods and routes of administration, i.e. oral consumption and / or tube feeding.

**4.2.6 Recommended intake and/or use** **-** Where appropriate, amount, timing and / or frequency of administration for adults, infants and children must be given.

**Note**: This information should be provided on the packaging (outer/inner), datasheet and any technical healthcare professional / patient literature.

**4.3 Specialised products in food form**

**4.3.1 Standard serving size -** Provide an indication of the amount that would normally be expected to be consumed as one serving e.g. 80g pasta, 2 x 20g slices of bread.

**4.3.2 Directions for use/preparation guidelines -** Standard recipes / baking instructions must be provided if appropriate for the preparation of the product prior to consumption, e.g. cooking time for pasta, instructions for use of a bread mix. This is not required if products are sold as consumed.

**4.3.3 Route of administration -** Methods and routes of administration must be described i.e. for oral consumption.

**4.3.4 Recommended intake and/or use** **-** Where appropriate, amount, timing and / or frequency of recommended intake for adults, infants and children should be given.

Note: Where relevant this information should also be provided on the datasheet and any technical healthcare professional / patient literature and where possible on the label.

**SECTION 5 – NUTRITIONAL COMPOSITION**

**5.1** **Nutrition profile**

Complete all relevant information within the nutritional composition table 5.1 (Annex 3) for each product recipe/flavour included in the application. If there is more than one formulation that forms part of the application use additional sheets 5.1.1, 5.1.2, 5.1.3 etc. If a nutrient is not relevant, please state N/A.

The nutritional composition of the product as sold should be provided in Column C per 100g or per 100ml.

If the product is to be reconstituted, diluted or otherwise altered, information will be required in Column D in respect of the nutritional composition as consumed or fed per serving of reconstituted powdered product. For ready to feed products the information in Column D should be provided per container e.g. 200ml bottle.

When submitting a Type 2 application, please compare the nutritional composition of your product with a product that is broadly similar in composition and intended use and already listed in Part XV of the Drug Tariff. The nutritional profile of the comparator product should be completed in columns E and F as sold (per 100g/100 ml) and per container or per serving. (Please note that the product used for the comparison is also required for any price comparison provided as part of the application).

When submitting a type 3 application with a formulation change, please complete both current and revised product nutritional composition to show the change in formulation.

The nutritional profile of the current product should be completed in columns E and F per 100g/100ml as sold and per container or per serving.

Electrolyte composition should be provided in mmol (SI/Système Internationale) units as well as in milligrams, SI being the standard unit of clinical measurement in the UK. The expectation is that mmol will be stated on any nutrient profiles provided within the text of the application, label and data card to improve patient safety. **Note**: Electrolytes in this context include sodium, potassium, chloride, calcium, phosphorus (in mg and as phosphate in mmol) and magnesium.

**5.2** **Protein hydrolysis** **-** If applicable, provide information about any protein hydrolysis (if the product contains hydrolysed proteins) in sections 5.2.2 – 5.2.6 of the application form. If there is more than one hydrolysed protein source provide the information for each hydrolysed protein – as protein (a), protein (b) etc.

* Whole protein used as the source material
* Degree of hydrolysis i.e. chain lengths
* Source of enzymes used for hydrolysis of the protein
* Proportion of the hydrolysate present as free amino acids
* Whether there is any trace of enzyme or whole proteinremaining in the product

**5.3 Carbohydrate hydrolysis** **-** If applicable, provide information about any carbohydrate hydrolysis (if the product contains hydrolysed carbohydrate) in sections 5.3.2 – 5.3.4 of the application form.

If there is more than one hydrolysed carbohydrate source provide the information for each hydrolysed carbohydrate – as carbohydrate (a), carbohydrate (b) etc.

* Carbohydrate source
* Source of enzymes used for hydrolysis
* Is there is any trace of enzyme remaining in the product?

**5.4** **Nutritionally complete volume**

**5.4.1 -** Indicate if the product is nutritionally complete using the tick box. If ‘yes’ please complete sections 5.4.2 and 5.4.3.

**5.4.2 -** Indicate which age groups the product is nutritionally complete for.

**5.4.3 -** Indicate that a copy of the nutritionally complete table has been provided and completed. Please attach this as Annex 4 to the application form.

Complete the nutritionally complete table as follows:

* Tick to indicate the columns/age bandings that are relevant to the usage of the product as a sole source of nutrition. For Paediatric products, please complete all relevant tables for the corresponding age ranges
* For each relevant age banding indicated complete the product composition per 100g or 100 ml for each of the nutrients
* For each age banding indicated complete the volume or amount of product that is required to meet the nutritional requirements
* The table will auto-calculate the % of the EAR/RNI.

For a product to be considered “nutritionally complete”, it must be able to provide the sole source of nourishment (with safe and appropriate levels of all macro / micronutrients) for each 24 hours for the person for whom it is intended when used in accordance with the Applicant’s instructions; no additions will be necessary to maintain optimal nutritional intake.

Information used to demonstrate nutritional completeness within the table is as follows:

1. Age range
* All products must have an age range suitability identified
* For adults, a 19 - 49 year old adult must be stated as a comparator
* For children, the following age ranges must be stated as a comparator:
	+ 1 - 3 years
	+ 4 - 6 years
	+ 7 - 10 years
* Applicants must provide a rationale for the age range given for their products.
1. The Estimated Average Requirement (EAR)\*
* EAR must be stated as a comparator with reference to the above bandings.
1. The Recommended Nutrient Intakes (RNI’s)\*
* RNI for protein, electrolytes, minerals and vitamins must be stated as a comparator with reference to the above bandings.
1. Volume
* The volume within which the product meets these requirements and is therefore promoted as being nutritionally complete (rounded up or down to the nearest 50 ml) must be stated.
1. The percentage of the RNI provided by the volume given to meet these requirements.

The following additional statements on the data card will be viewed by the ACBS as helpful:

* These amounts may need to be modified according to the age and clinical condition of the patient.
* Referral to a dietitian is always recommended when there is any doubt about an individual patient’s nutritional requirements.

\*For reference, the Dietary Reference Values to be used are:

* For nutrients, excluding vitamin D - Dietary Reference Values for Food Energy and Nutrients for the United Kingdom. Report on Health and Social Subjects No 41. Department of Health, London, HMSO, 1991.
* For energy - Scientific Advisory Committee on Nutrition. Dietary Reference Values for Energy. TSO, London, 2011.
* For vitamin D - Scientific Advisory Committee on Nutrition. Vitamin D and Health. 2016.

**SECTION 6 – PRODUCT DOCUMENTATION**

**6.1** **Product data sheet** **for healthcare professionals -** Attach a full-size copy of the healthcare professional data card for the product as Annex 5 to the application form and indicate this has been provided in the tick box.

**Notes on DESCRIPTIVE LITERATURE** (Type 1, Type 2 and relevant Type 3 applications)

The UK Food Information Regulations (2014) prohibit any medicinal claims being made in the labelling or advertising of foods.

Reference must only be made of the condition for which the product has been approved (the wording must reflect the ACBS approved indication accurately) and not imply that the product has other characteristics or is free from other substances which have not been specifically approved by the ACBS.

 The wording outlined on the label / packaging of gluten free products submitted for the indication of ‘established gluten sensitive enteropathy’ must not imply that the product has other characteristics or is free from substances other than gluten.

Any literature intended for healthcare professionals and / or patients must comply with relevant legislation.

The datasheet provided must also comply with the requirements of the relevant legislation. The datasheet must show the date on which the sheet was produced together with the date(s) of any revision(s). The country in which the data originated must also be shown.

**6.2** **Manufacturing process and quality control mechanisms -** Attach a copy of the current and appropriate external certification, recognised by the UK/ EU as Annex 6 to the application and indicate this has been provided in the tick box.

 **Notes on Manufacturing process and quality control mechanisms**

The ACBS will require evidence that appropriate manufacturing processes and quality control mechanisms are in place. The applicant must provide current and appropriate external certification which is recognised by the UK.

If any part of the manufacturing process takes place outside the UK/EU, companies must provide evidence that manufacturing, and quality standards continue to comply with the relevant UK / EC legislation and that equivalent manufacturing accreditations and testing methodologies are in place.

There must also be an absence of pathogenic bacteria in all liquid products, specifically E Coli and Salmonella. While sterility cannot be guaranteed, all powdered products must be free from pathogenic E Coli and pathogenic Salmonella.

**6.3** **Labelling and packaging -** Attach a copy of the product labels for all unit sizes and flavours as Annex 7, including labelling for secondary/cluster packaging and indicate this has been provided in the tick box.

For Type 3 applications only - In addition, attach a copy of the current product labels for all unit sizes of products, including labelling for secondary/cluster packaging in Annex 7 and indicate this has been provided in the tick box. Make clear these are the current product labels.

**Note:** Applicants must provide a sample of “actual size” labels, using a print resolution equivalent to that which would be expected from a normal print run. If it is not possible to submit an “actual size” label, then a sample of the product (preferably without the contents) must be provided. In this situation, i.e. when a sample is being provided, a readable label must also be submitted within the application.

**Notes on Labels, packaging and descriptive literature**

*(*Type 1, Type 2 and relevant Type 3 applications)

*Labels provide information and the ACBS want to ensure that the risk of clinical errors due to inappropriate labelling is minimised. Labels should be clear enough to maximise safety and understanding for both patients and healthcare professionals and to enable the prescriber to feel safe.*

Details of labels / packaging or proposed labels / packaging for all unit sizes for products must be provided, including labelling for secondary / cluster packaging.

Any changes to existing labelling required for the UK market must be submitted to the ACBS. Both old and new labels must be included and identified as such.

If the product is a Food for Special Medical Purposes (FSMP), the approved indication should be very clear and **must** include the phrase “for the dietary management of……”.

Products which are not FSMP’s (this includes gluten free foods) must not carry this phrase.

**Delegated Regulation 2016/128 on food for special medical purposes states that product labelling shall include, where appropriate, a warning that the product is not for parenteral use.** However, the ACBS has advised the Department of Health and Social Care that this warning compromises patient safety and, therefore, it encourages ACBS applicants to instead include a warning that, where appropriate, a product is ‘For enteral use only.’ The Department of Health and Social Care greatly values the advice of the ACBS on this matter but recognises the need to work within the current legislation and so ACBS applicants are free to include a warning that a product is not for parenteral use.

The ACBS recognises the need to work within the current legislation, but to optimise clarity the ACBS would like to see the following:

In accordance with Food Law, the salt content of the product must be shown on the label. The ACBS would also like to see the sodium content (in mmol) included on the label to support safe prescribing.

**Notes on Labels, packaging and descriptive literature continued**

* Labels should not refer to the fact that the product is ‘Organic’
* Any warning / precautions should be particularly clear and attract immediate attention
* Clearly contrasting background and text – in colour
* The avoidance of too much information appearing in too small a space
* The avoidance of multi-lingual labelling whenever possible
* A font size / style which will facilitate easy reading
* The use of the stop (•) as the decimal delimiter, rather than the comma (,). This is the accepted practice in the UK and USA / Canada as well as being the standard for scientific measurements published in international journals.

**Notes on PROMOTIONAL POLICY** (Type 1, Type 2 and relevant Type 3 applications) applicable to labelling, datacards, descriptive literature.

Reference to ACBS approval should only be made in technical information specifically designed for the advice of healthcare professionals. This includes:

* entries in the BNF, MIMS, Chemist and Druggist
* articles in peer reviewed journals
* the standard company data sheet
* product data sheets on company websites (which must be password protected)

Any “direct to patient” marketing or advertising material (in either hard copy or electronic format including social media websites) promoting an ACBS approved product must not make any reference (express or implied) to (a) ACBS approval; or (b) the product being available on prescription. Any breach of this provision may result in the product being recommended for de-listing.

Reference to ‘electronic format’ includes any information contained on company websites.

**SECTION 7 – SUPPORTING CLINICAL EVIDENCE**

**7.1** (For Type 1 applications only) Provide one copy of the detailed report of the completed clinical trial and one copy of the abstract meeting the requirements stated in this section. Attach in Annex 8 and indicate these have been provided in the tick boxes.

**7.2** (For Type 2 applications only) Attach one copy of the detailed report of the completed acceptability study and one copy of an abstract meeting the requirements stated in this section. Attach in Annex 8 and indicate these have been provided in the tick boxes.

**7.3** (For Type 1 and Type 2 applications) Attach one copy each of two relevant papers from the peer reviewed journals as cited within the abstract provided. Attach in Annex 8 and indicate that these have been provided in the tick boxes.

**7.4** (For Type 3, only if required) Attach a report if required by the guidance below. Attach in Annex 8 and indicate that it has been provided in the tick box.

**Supporting clinical evidence**

Applicants of Type 1 and Type 2 applications are advised that preliminary advice from the ACBS / a designated representative of the ACBS might be helpful in order to confirm the Type / categorisation of the product beingsubmitted. No face-to-face meetings / telephone conversations will be held with Applicants. Correspondence must be conducted via e-mail, through the Secretariat. This is to ensure transparency and a clear audit trail.

Clinical trials and palatability studies will not, normally, be required for either gluten free or low protein foods.

Applications for gluten free foods to be considered by the ACBS are not required to make the case for the efficacy of a gluten free diet in the treatment of Established Gluten Sensitive Enteropathy.

Applications for gluten free foods to be considered by the ACBS must include a ‘Certificate of Declaration’ confirming the gluten content of the product.

In the event that a submitted product requires specific expertise in order to consider any or all aspects of it fully, the ACBS will identify and approach a recognised expert in the field on an ad-hoc basis to inform the deliberations of the Committee.

1. **Type 1 applications**

The minimum information the ACBS will expect to see is given in Appendices 4 and 5.

The Committee expect that all Type 1 applications will be fully supported with evidence, including information on acceptability, and will require all of the following:

- one copy of the detailed report of completed clinical trial(s) of the product which demonstrate its therapeutic usefulness in the management of disease in the community for the indications sought. Trials should conform to European Regulations on ‘Good Clinical Practice’ for clinical practice and research.

- PLUS an abstract of the completed clinical trial(s), which must include full references to directly relevant papers from peer reviewed journals.

- PLUS full copies of two relevant papers from the peer reviewed journals as cited within the abstract.

**Note:** These must be included within each copy of the application -both electronic submission and hard copy dossiers. The hard copy submission dossiers must be exactly the same in all respects as the electronic copy.

In situations where it can be anticipated that clinical trials are likely to be incomplete e.g. very rare conditions, advice from the ACBS prior to submission might be helpful. Correspondence must be conducted via e-mail, through the Secretariat. This is to ensure transparency and a clear audit trail.

Any evidence of health economic benefits of a product will be welcomed by the ACBS.

General statements of support from healthcare professionals should not be provided and will not be considered by the ACBS.

1. **Type 2 applications**

Details of acceptability information that the ACBS will expect to see is given in Appendix 5

The Committee expect that all Type 2 applications will be fully supported with evidence and will require all of the following:

One copy of the report of an acceptability study conducted in patients for whom the product is intended. Details of acceptability information that the ACBS will expect to see is given in Appendix 5.

- an abstract describing published clinical trials of any similar products (which could be considered to be suitable alternatives) demonstrating their therapeutic usefulness in the management of disease in the community for the indications sought. This must include full references to directly relevant papers from peer reviewed journals.

**Note:** This must be included within each copy of the application.

- PLUS full copies of two relevant papers from the peer reviewed journals, cited above

**Note:** These must be included within each copy of the application.

 Any evidence of health economic benefits of a product will be welcomed by the ACBS.

 General statements of support from healthcare professionals will not be considered by the ACBS.

1. **Type 3 applications**

Details of the information the Committee will expect to see is given on page 19 under evidence required for type 3 nutritional applications

If several Type 3 changes are requested for the same product, such that the product is significantly altered, the applicant may be asked to submit a Type 2 application.

The Committee will require the following evidence of efficacy

* + - 1. If the proposed change relates to minor macronutrient content modification i.e. nitrogen, fat or carbohydrate (or any component of these), micronutrient content or concentration, the rationale must be provided and this should be based on clinical studies wherever possible.
			2. If the proposed change relates to changes in the corporate strategy, manufacturing process, ingredient availability, presentation, new flavours of an approved product, labelling, patient acceptability or cost, the rationale must be provided.

**Note:** If the proposed changes relate to any aspect of acceptability, the guidance in Appendix 5 must be followed.

* + - 1. If compositional changes are in response to either UK / EC legislation, then this must be referenced.
			2. If the application is for new flavour variants of an approved product, palatability data is required.

**Note:** Any amendments as above will, normally, be submitted for Chair’s action. Digital copies only of the Application should be submitted initially by e-mail to the Secretariat. Hard copies of the application may be requested.

 **Note**: for further information and guidance (including Appendices) related to making applications to the ACBS refer to the following link:

 <https://www.gov.uk/government/groups/advisory-committee-on-borderline-substances>

**SECTION 8 – PRICE**

**8.1** **Price** **-** Please provide the cost price to the NHS per dispensing unit (section 3.5), inclusive of all distribution costs.

A statement of the proposed total price of the product (i.e. single dispensing unit) to the NHS must be provided.  This must include the NHS list price and any distribution costs that may be typically charged to dispensers. Applicants must ensure that the proposed total price of the product is inclusive of all distribution costs.

**8.2.1** (Type 2 only) Please provide name of comparator product. See note below.

**8.2.2** (Type 2 only) Please provide price of comparator product. See note below.

For Type 2 applications, please compare the price of the product to a product that is broadly similar in composition or intended use and already on the market. This must be the same as the product you’ve included for the nutritional comparison in Section 5.

**8.3** **Price Rationale** **-** Where appropriate, applicants should provide information on the proposed price. Refer to pricing guidance: <https://www.gov.uk/government/publications/guidelines-on-the-pricing-of-acbs-products/information-on-the-pricing-of-acbs-products>

**SECTION 9 – DECLARATIONS**

The applicant should confirm that the information provided is correct and complete to the best of their knowledge. Any changes to the product, its price, presentation, packaging and marketing will be notified to the ACBS and will only be promoted to prescribers at NHS expense for those conditions recommended by the ACBS.

The declaration must be signed and dated by an appropriately competent and authorised individual describing their status and accepting legal responsibility for the validity of the evidence provided on behalf of the Applicant.

**SECTION 10 – ATTACHMENTS TO APPLICATION FORM**

Ensure all relevant attachments are included with the application form as outlined in this table and indicate this in the right-hand column.

|  |  |  |
| --- | --- | --- |
| **Annex** | **Corresponding Section** | **Included within this application (Y/NA)** |
| 1  | 2.3 | Acknowledgement letter from DHSC |  |
| 2 | 2.4 | MHRA exemption if required |  |
| 3 | 5.1 | Nutritional profile table |  |
| 4 | 5.4.3 | Nutritionally complete table |  |
| 5 | 6.1 | Product data sheet for healthcare professionals |  |
| 6 | 6.2 | Manufacturing certification |  |
| 7 | 6.3 | Product labels |  |
| 8 | 7.1 - 7.4 | Supporting Clinical Evidence |  |

**ADDITIONAL GUIDANCE**

**PRODUCT APPROVAL** (All applications)

Products that are FSMP must be notified to the competent authority, in this case the Nutrition Legislation team at the Department of Health, before an application is submitted to ACBS.

Products that are presented in Pharma Form, according to section 3 above, require a statement of exemption from the licensing and other provisions of the Human Medicines Regulations 2012 (as amended), which must be obtained from the MHRA before an application is submitted to ACBS.

Product applications that fail to comply with the above requirements will be rejected at the next ACBS meeting and the applicant will be notified of the rejection thereafter.

In all other cases, the ACBS Secretariat will advise the Applicant whether or not the product has been given ACBS status.

The ACBS Secretariat will not inform the NHS Business Services Authority to include the product in Part XV of the Drug Tariff (Borderline Substances) until the applicant informs the ACBS Secretariat that the product is being brought to market.

Products that have been given ACBS status must be launched within 12 months of the date of the confirmation letter from the Secretariat. Failure to do so may mean that a new application is required.

The ACBS will not expect to consider a Type 3 application for a product until it has been launched and included within the Drug Tariff. If, in exceptional circumstances this is unavoidable, the Applicant must provide a detailed explanation describing why the requested change was not included within the original application. The ACBS may accept the explanation and consider the Type 3 application.

If the Type 3 application is rejected, the Applicant could then either re-apply for a Type 3 change after the product has been brought to market or submit a new application incorporating the required change, in which case the original approval would no longer be valid.

**DURATION OF ACBS APPROVAL FOR PRODUCTS** (All applications)

The ACBS may review a product at any time and **may** request a re-application. Products will not automatically be de-listed.

**Notes:** Product review is necessary to reflect current trends including:

* Changes in clinical practice
* Changes in marketing direction
* The prescriptions issued in respect of individual products over a period of time

Companies will be advised if their products are due to be reviewed. They will have the option of providing supplementary information at this time, if they choose to do so.

**EVIDENCE REQUIRED FOR TYPE 3 NUTRITIONAL APPLICATIONS**

Each application should be completed using the Application Form.

Applicants need only supply copies of the evidence relating to the information relevant to the changes made to the product currently listed in Part XV of the Drug Tariff. Evidence should be provided according to the table below. Any sections that are not relevant to the change should indicate “Not applicable” (N/A).

Refer to the below guidance for information on how to submit an application.

[The Advisory Committee on Borderline Substances: how to submit an application - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/how-to-submit-an-application-for-acbs-approval/the-advisory-committee-for-borderline-substances-how-to-submit-an-application)

|  |  |  |
| --- | --- | --- |
| ***Nature of change*** | ***Evidence required*** | ***Sections in Application Form*** |
| All Type 3 applications | Full size copy of existing and amended label(s)Amended Data Sheet(s).Signed declaration. | Complete section 6 (Product Documentation e.g. labelling).Complete declaration in section 9 |
| **Product formulation** | Proposed changes and the reason for these with clinical evidence where appropriate (where a significant formulation change may impact acceptability).A statement that all other elements of nutrition composition remain unchanged will be required.Both the current and new nutritional profile must be provided with the changes highlighted. | Indicate in section 2.6.2 which elements of the formulation have changed and the reason for the change. State that all other elements of the formulation remain unchanged.Complete sections 1 – 5.1 In Section 5.1 provide a comparison of the nutritional profile of the current and the new formulation. Highlight all changes.Only complete section 5.2 - 5.4 if there are changes from the current formulation. |
| **New flavours of an approved product**  | Details of new flavour with supporting clinical evidence where appropriate.  | Complete all sections of the application form if applicable. |
| **Product name change** | Proposed name and reason for the change. | Complete sections 1, 2, 3 and 6 of the application form.In section 2.6.2 provide details of the name change and the reason for the change. |
| **Instructions for reconstitution** | New instructions, reasons for change. | Complete sections 1 - 4 of the application form. |
| **Packaging and general labelling** | Details of changes including pack size. | Complete sections 1 - 4 of the application form.Provide details of the changes in section 2.6.2 |
| **Data sheets** | Copies of proposed changes/ new data sheets.  | Complete sections 1 and 2 of the application form.Complete any sections of the form related to the change in the data card. |
| **Changes in the manufacturing process** **where this impacts product composition** | Appropriate information about any changes in the manufacturing processthat impact product composition must be provided. | Complete sections 1, 2 and 3 of the application form.Indicate any changes to product composition in section 2.6.2 and complete any relevant sections impacted by the change. |

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| **Version** | **Date** | **Summary of changes** |
| 1.0 | 17/11/22 | * Entirely new guidance notes published.
 |
| 1.1 | 25/05/23 | * Section 2.4: The MHRA email address has been amended.
* Version control table added to end of document.
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