

EP

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20 June 2008

ARABIC

ORIGINAL: ENGLISH



2008 / 18 - 14

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()

•

()
2008 :

:(MB)

() 2010-2008

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(2007 / 2006) 7 -

		12 414.9	
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(2007 / 2006) -

			46.0	98.9	11-
			276.5	370.0	12-
					114-
			322.5	468.9	

423.2	()
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250	13 000 000
-----	------------

	:
340.5	:()
322.5	:()
	:()
40	:()
18 850 502	:()
	:()
16 299 000	:
420 400	:(%10)
1 989 502	:
	:
100	:(%)
	:(%)
18 708 902	:()
58.1	:(/)
1 403 168	:()
20 112 070	:()
	:(/)
	:(/)

--	--

18 850 502) 322.5 -1
1 413 788 (

22 316 189 280.9 -2
1 673 714
2006

.(23/53) -3

: .(UNEP/OzL.Pro/ExCom/53/28)
()
)

/(6 :)
.(ExCom/53/28
.2009 ()

()
()
()
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()

()

12007 36 38 16 104 18 -4
 .(2005)
 -5

:

: _____ ()

341.0 280.9 322.5
 .
 : _____ ()
 :

)
 .(

: _____ ()

(1)
 20 000

5)
 20 000 (

(2)

¹ كانت المشاريع الستة عشر تحمل 22 رخصة غير منتجة.

50 000

(3)

.23/53

: _____ ()

:

(1)

50 000 :

(10)

5

200 000

()

50 5

680 000

(3)
100

100 50

1 320 000

(2)

(3)

-6

18 850 502

: 1

3 465 687

- 1

()			
-	1 100 000	1 100 000	
(2 600 000)	-	2 600 000	
585 000	7 020 000	6 435 000	*2007
2 605 000	3 485 000	880 000	2007
1 300 000	5 560 000	4 260 000	
(40 000)	680 000	720 000	()
(27 500)	412 500	440 000	()
1 513 187	3 502 689	1 989 502	
130 000	556 000	426 000	
3 465 687	22 316 189	18 850 502	

(*)

.()

-7

-8

:

152.1
.2007

340.5 2004

()

()

2

² المصانع السبعة هي: بيجين هايدرون للأدوية (رقم 2)؛ وغوانغزو دونغكانغ للأدوية (رقم 8)؛ وغويانغ ديشانغيانغ للأدوية (رقم 9)؛ وهابلونغ جيانغ تانغلونغ للأدوية (رقم 16)؛ وبنغلالي نووكانغ للأدوية (رقم 19)؛ ومجموعة شنغهاي للأدوية (رقم 28)؛ ومجموعة ووكسي شانهي للأدوية (رقم 32).

- 2

2007 ()	2006 ()	2005 ()			
	4 538.0	3 494.0		B04	1
	8 665.0	7 460.0		B13	1
730.0		745.9		B15	3
		180.3		B01	3
57.0	-	-		B01	31
597.0	900.0	1 350.0		B15	31
70.7	-	-	()	B16	31
1 454.7	14 103.0	13 230.2			

2006

: 3

2007

()

2006

- 3

2007 ()	2006 ()				
214.0	6 424.0		B15	⁴	2
-	2 915.0		B22		2
325.0	27.0		B23		2
-	300.0		B11	⁵	14
-	4 202.0		B12		38
539.0	13 868.0				

2007

2007

()

³ توقفت شركة متعددة الجنسيات أخرى، هي جلاكسو سميثكلين، عن إنتاج جهاز الاستنشاق بالجرعة المقننة البكوميثازون الذي يعتمد على الكلوروفلوروكربون منذ عام 2005.

⁴ نتيجة لمسائل بيئية، نقل المصنع في 1999 إلى موقع جديد: وبدأ الإنتاج التجريبي لأجهزة الاستنشاق بالجرعة المقننة القائمة على الكلوروفلوروكربون في النصف الثاني من 2005 وبدأ الإنتاج الكامل في 2006. وتراوح استهلاك المواد الكلوروفلوروكربونية بين 3 567 كيلو غرام و4 459 كيلو غرام بين سنتي 1996 و1998.

⁵ استهلك المصنع 300 كيلو غرام و150 كيلو غرام من المواد الكلوروفلوروكربونية في 2001 و2003 لإنتاج المنتج B11.

2007

- 4

() 2007				
127.0		B14		11
30.0		B22		22
70.0		B04		22
57.0		B01		31
70.7	()	B16		31
3 200.0		B15	1	32
3 420.0		B15		35
2 650.0	()	B16		35
9 624.7				

13 ()

5 6

(B01) (1)
 - (B14) (B13)
 %97 (B22) (B16) (B15)
 .2007

(2)

(B04) :) %3 (B05)
 (B12) (B09) (B17)
 .((B24) (B23)

(3)

(B09) (B17)
 2006 (B23) 1 308.0
) (2007 1 606

⁶ أشارت منظمة الأمم المتحدة للتنمية الصناعية إلى أنه قد تم إنتاج 100 000 جهاز استنشاق بالجرعة المقننة للإبيرارتروبيوم (B23) في 1997 وبلغ إجمالي استهلاك الكلوروفلوروكربون فيها 1 414 كيلوغرام؛ وأنتجت أجهزة استنشاق بالجرعة المقننة للهواشاشين في 2001 (32 000 جهاز استنشاق بالجرعة المقننة) و2003 (16 000 جهاز استنشاق بالجرعة المقننة)؛ واعتمدت رخصة جهاز الاستنشاق بالجرعة المقننة فومات الكيتوتيفين (B09) في 1995، غير أنه لا توجد معلومات عن مستويات الإنتاج قبل 2004 وجهاز الاستنشاق بالجرعة المقننة الذي يعتمد على سلفات الساليوتامول (B25) هو استخدام ووفق عليه حديثاً.

*	()				
	2007	2006	2005		
%0.00	10.0	10.0			B17
%0.03	100.0	70.0	22.2		B05
%0.09	320.0	130.8	30.0		B24
%0.10	325.0	27.0	-		B23
%0.37	1 271.0	1 271.0	-		B09
%1.01	3 443.0	7 395.0	1 851.0		B12
%1.20	4 069.0	8 037.0	6 273.5		B04
%3.99	13 591.0	7 541.5	6 902.0		B14
%7.88	16 612.7	8 665.0	7 460.0		B13
%12.76	43 452.0	47 324.0	40 647.2		B22
%17.61	59 954.0	23 048.0	16 796.6		B01
%25.07	85 378.0	91 650.0	69 905.3	()	B15
%32.88	111 968.7	85 396.2	93 793.1	()	B16
%100.0	340 494.4	280 565.5	243 680.9		

.2007

(*)

2009

-9

2010

.2010

341
2011

748.3

2007

.2014

3 332.3

2014 2008

2014

-10

.7 2009 2008

1 100

2 232.3

⁷ بموجب الاتفاق بين حكومة الصين واللجنة التنفيذية على خطة الإزالة المعجلة للمواد الكلوروفلوروكربونية / رابع كلوريد الكربون / الهالونات، كان يمكن للصين تصدير 100 طن من قدرات استنفاد الأوزون من المواد الكلوروفلوروكربونية في 2008 و50 طنًا من قدرات استنفاد الأوزون في 2009.

-11

100 .2011 2007

.2012
-134a

%75

2010

.2010
2010

-12

"
"
"
"

-13

20 000 () 85 000

11.735

:

33 : 80 7.315 ()

⁸44 () 195 000) 2007

20 000) 2007

⁸ سوف يتم التخلي عن 3 من المنتجات الأربعة والأربعين في المستقبل القريب.

									1.1	()
									40 000	()
			720 000							
									2.6	()
		16								-14
									(21)
			0.55							()
			(37 25 22 16 11 9 2)	
			(32 24 8					4.2		
						50 000				
9.8	6.1									()
		200 000	(36 35)				
			26.1 21.7							()
			73.3					(28 19)	
					680 000		(18)		
		175.2								()
			1 320 000		(21)				
3 502 689										-15
	7.08)		1 989 502		(	/		12.47)		
								(/	
		(	5.64)		(	/		4.06)		
					(	/	2.70)		(/
										3.59)
										-16
8	5)								

					(/
		2			3.5
					-17
	(	2 600 000)		(	1 100 000)
					.2007
					-18
58.46					()
	322.475			/	
				/	20.00
(	/	38.08)		(/
(	/	36.36)	(	/	36.61)
			(	/	37.75)
					()
					(1)
32.93	(21 18)			
	/		26.76	/	
			%74		
					%77
	67 (35 28 19	)			(2)
			/	99	/
11 8 2	)	/	788	/	178
1.128				(36 32 24	
(25 16 9	)	/	1.619	/	
5.145	/		5.140		

.(37 22) /

880 000 (3)

2007

()

-19

-20

2010

300 000

-21

-22

%97	(5)	.		
			2 400 000	-23
	1 200 000		800 000)	
			.(
	%3	)		-24
600 000	(
3.43 12-				
6	9.540		/	
	4 200 000			-25
	16			-26
		:		
			50 000 ()	
			10	
	20 000		30 000	
			400 000 ()	
		100 20		
			2 000 000 ()	
			100	
			()	
		%10	4 180 000	
4.43	322.475			-27
) /	
	1 430 000		.(

-28

: 2 380 000
 (20 000) 32 ()
)
 .(640 000
 30 000) ()
 .(480 000) .()
)
 .(%10 420 000
)
 %20 840 000 . ()

-29

: 12 490 000
 300 000
 4 200 000
 4 180 000
 1 430 000
 2 380 000

-30

-31

5 ()

6

- 6

()			
-	1 100 000	1 100 000	
(2 600 000)		2 600 000	
585 000	7 020 000	6 435 000	2007
2 605 000	3 485 000	880 000	2007
1 356 000	5 560 000	4 204 000	
40 000	680 000	640 000	()
(27 500)	412 500	440 000	()
1 513 187	3 502 689	1 989 502	
135 600	556 000	420 400	
3 607 287	22 316 189	18 708 902	

3 607 287

-33

80/41

2010

.2010 / 1

-34

ورقة تقييم المشروع - مشروعات متعددة السنوات
الصين

أولا - عنوان المشروع:	الوكالة:
بروميد المثيل	منظمة الأمم المتحدة للتنمية الصناعية - إيطاليا

ثانيا - اخر معطيات المادة 7:	عام: 2006
12414.9 :CFC	774.4: CTC
161	هاتفات: 300.4
279.9 :TCA	بروميد المثيل: 279.9

المجموع		نصف النوع		بروميد المنيل		استعمال مختبري		أجهزة الاستمناق العزودة بمقاييس للحرعات		عوامل التصنيع		مذيبات		نريد		هالوننت		رعاوي		ايروسول		المواد	
		Non QPS		QPS																			
10.870,4	21,3							280,9						3.287,	493,8			6.318,6		468,8			CFC
891,1						534,6				356,5													CTC
795,																	795,						
878,2		310,		568,2																			
279,9													279,9										TCA

المجموع		2002		2003		2004		2005		2006		2007		2008		2009		2010		2011		2012		2013		2014		2015	
حدود استهلاك بروتوكول مونتريال		MB		1.102,1		1.102,1		1.102,1		881,7		881,7		881,7		881,7		881,7		881,7		881,7		881,7		881,7		0,	
الحد الأقصى للاستهلاك المسموح به (أطنان من القدرات المستنفذة للأوزون)		MBR		1.087,8		1.087,8		1.087,8		880,		723,8		570,6		390,		250,		209,		176,		150,		100,		50,	
تكليف المشروع (دولار أمريكي)		تكليف المشروع		4.086.600,								1.200.000,		1.800.000,		1.300.000,		600.000,		500.000,		500.000,		500.000,		302.742,		10.789.342,	
تكليف الدعم		تكليف الدعم		306.495,								90.000,		135.000,		97.500,		45.000,		37.500,		37.500,		37.500,		22.706,		809.201,	
تكليف المشروع		تكليف المشروع						4.000.000,																				4.000.000,	
تكليف الدعم		تكليف الدعم						470.000,																				470.000,	
مجموع الأموال الموافق عليها مدينا (دولار أمريكي)		تكليف المشروع		4.086.600,				4.000.000,				1.200.000,		1.800.000,		1.300.000,		600.000,		500.000,		500.000,		500.000,		302.742,		14.789.342,	
تكليف الدعم		تكليف الدعم		306.495,				470.000,				90.000,		135.000,		97.500,		45.000,		37.500,		37.500,		37.500,		22.706,		1.279.201,	
مجموع الأموال التي سرحتها اللجنة التنفيذية (دولار أمريكي)		تكليف المشروع		4.086.600,				4.000.000,				1.200.000,		0,		0,		0,		0,		0,		0,		0,		9.286.600,	
تكليف الدعم		تكليف الدعم		306.495,				470.000,				90.000,		0,		0,		0,		0,		0,		0,		0,		866.495,	
مجموع الأموال المعطوية للعلم الجاري (دولار أمريكي)		تكليف المشروع												1.800.000,														0,	
تكليف الدعم		تكليف الدعم												135.000,														0,	

	:	-
--	---	---

تطبيقات الحجر الصحي السابق للشحن: QPS
تطبيقات غير خاصة بالحجر الصحي السابق للشحن: Non-QPS

				-35
		1 800 000	(2008)	
				135 000
				-36
)	14 789 342			
389				
(30/44)				
5 200 000				
(	470 000)	560 000	(	90 000)
				-37
()			
				-38
			55	
				-39
2007 /				
		.2008		
			.2006	
	.2004 / 1			-40
/ 1	2006 /			
		2007 / 21	.2007	
	"		"	

2008	/			
(		(	)	-41
)	7 731 598	(	9 286 600)	
	1 555 002			.(
				<u>2008</u>
	(2006)			-42
	2006			2008
/	)			(2008
				-43
2007				
	389.5	2007		-44
	181.1		492.1	
570.6		881.6		
				-45
	/	/	/	
		()	

-46

3

-47

:

	()	()		
	135 000	1 800 000)	()

2007

()

750 000

10

2008
2008

-48

2008
2007

2007

2008 / - /

-49

15

:

-50

()

/

2007

()

()

+

()

-

()

()

()

()

.2007

()

-51

2007

2007

-52

3 066.25

3 474.6

.()

:

-53

-54

%30

%30

.5

5 175

2007

.2007

6 945

:

-55

()

.2007

750 000

10

()

2008

خطة قطاعية لإزالة إنتاج بروميد الميثيل (MB):
برنامج عمل 2010-2008 (المرحلة الثانية)

مقدمة

.56

2010-2008 (MB)
225 000
2007 2005

3

2010-2008

خلفية

9.8

2005

.57

3

(MB)

.2007-2005

	2015	2014	2013	2012	2011	2010	2009	2008	2007	2006	2005	
-	*0.0	50	100	150	176	209	250	390	570.6	600	621	) (ODP
9 790	0	1 790	0	0	2 000	0	0	3 000	0	0	3 000	'000) (
734	0	134	0	0	150	0	0	225	0	0	225	'000) (
10 524	0	1 924	0	0	2 150	0	0	3 225	0	0	3 225	('000)

(QPS)

.58

2007 2005 (MB)

.2008 / .59

.60

(ODP) 621

.2007 ODP 570.6 2006 ODP 600 2005

.61

			%40 /%60	
	1989	500	1992	1995 .1977
	800		/	60
	1999			/ 4000
	2 400			
	.(QPS)			
7 900	/ 2 400	/	1 500	/ 4 000
/				
	828		149	2 582
	794		176	2 023
	308		241	1 920

2004

2003-2002
(SEPA/UNIDO)

.62

(MB)

Br₂ CH₃OH

-
-
-
-

Br₂ CH₃OH

•

•

.63

(MB)

.64
(QPS)

:

:

•

.(AOSIQ)

.AOSIQ

:

•

:

•

:

•

/

.65

.66

.67

			()
730 739	1030	1035	2005
985 085	1000	1000	2006
686 275	900	951	2007

: .68

2007	2006	2005		
686 275	985 085	730 739		
1 534 736	1 313 611	1 356 271	(QPS)	
1 461 426	992 955	1 098 364		
3 682 437	3 291 651	3 185 368		
*	985 088	730 115		
*	1 313 615	1 357 753	(QPS)	
*	992 953	1 097 500		
*	3 291 656	3 185 368		

2007-2005

.2008 2007-2005 .69

(MEP)
2008-2005

*2008	2007	2006	2005	
640	900	1 000	1 030) (
650	951	1 000	1 035	

(AOSIQ) .70

.AOSIQ MEP (QPS) AOSIQ
.(QPS)

" (MOC) (GAC) (MEP) " .71

GAC MEP

() (ODS) () : () (QPS)

GAC MEP (GAC) " " .2008

" (MEP) : " .72

2007 / 16		1
(QPS) : (ODS)		2
/ .2008		3

: ,73

/ 1 (MEP) -1.1.1 ()

:2003

2004 / 21 ()

(QPS)					()
				2004 /	QPS
2006 /	26	(MEP)			()
(MPS)		AQSIQ MoA MEP			()
	(SAWS)			(SFA)	
15					.74
			3		
					.75
			2000		(ODS)
(QPS)					
					.76
(CTC)				(ODS)	(MB)
(CTC)					
					.77

180
90 QPS
.78
/

2010-2008
2008
2010-2009
.79

(MEP)
(MB) (MEP) (MEP)
.80

.81
.QPS

Annex I. Summary of analysis of the MDI manufacturing plants in China

No*	Company Name	Products (B)	CFC 2007	Can 2007	\$License*	\$Capital	\$Prod Validation	\$Trainin g	\$Operatin g	\$Patent*	\$Other TAS*	\$Total	CE (\$/kg)
22	Shandong Lino Kefeng pharmaceutical Co.	04, 22	540	48,306	390,000	55,000	40,000	27,500	4,367	4,354	1,842	523,063	968.63
37	Zigong Chenguang Pharmaceutical	5	1,780	141,360	390,000	55,000	40,000	27,500	13,127	14,352	6,072	546,050	306.77
9	Guiyang Dechangxiang Pharmaceutical	24	320	20,206	195,000	55,000	40,000	27,500	1,990	2,580	1,092	323,162	1,009.88
16	Heilongjiang Tianlong Pharmaceutical Co. Ltd	15	412	23034	390,000	55,000	40,000	27,500	2351	3,322	1,405	519,578	1,261.11
25	Pharmaceutical Factory of Shanxi Medical University	16	240	16,000	195,000	55,000	40,000	27,500	1553	1,935	819	321,807	1,340.86
11	Harbin Hengcang Pharmaceutical co.	14, 15	73,260	5,550,000	195,000	748,000	80,000	27,500	521,229	590,669	249,898	2,412,296	32.93
2	Beijing Haiderun Pharmaceutical	15, 23	26,100	2,216,150	585,000	748,000	80,000	27,500	202,656	210,435	89,030	1,942,621	74.43
8	Guangzhou Dongkang Pharmaceutical	15, 22	175,178	9,295,910	780,000	1,452,000	40,000	27,500	964,119	1,412,397	597,553	5,273,569	30.10
36	Chongqing Kerui Pharmaceutical	16	100	10,000	-	55,000	40,000	27,500	884	806	341	124,531	1,245.31
24	Shandong Lunan Beite Pharmaceutical	04, 17, 25	4,115	169,400	390,000	55,000	40,000	27,500	19,171	33,178	14,037	578,886	140.68
32	No.1 Pharmaceutical of Wuxi Shanhe Group	15	637	32,785	195,000	55,000	40,000	27,500	3,434	5,136	2,173	328,243	515.29
35	Guangdong Tongde Pharmaceutical Co. Ltd	15, 16	20,656	1,289,879	1,560,000	748,000	40,000	27,500	127,440	166,542	70,460	2,739,942	132.65
28	Shanghai Pharmaceutical (Group)	01, 04, 09, 12, 14, 15, 16, 22	3,200	195,560	390,000	55,000	40,000	27,500	19,440	25,800	10,916	568,656	177.71
19	Penglai Nuokang Pharmaceutical	15, 16, 22	6,070	550,000	390,000	220,000	40,000	27,500	49,588	48,940	20,705	796,734	131.26
18	Jinan Weiming Pharmaceutical	22	9,767	575,520	195,000	220,000	40,000	27,500	57,817	78,748	33,316	652,381	66.79
21	Jewim Pharmaceutical	01, 14, 15, 16	100	2,300	195,000	55,000	40,000	27,500	337	806	341	318,984	3,189.84
	Total production facilities		322,475	20,136,410	6,435,000	4,686,000	720,000	440,000	1,989,503	2,600,000	1,100,000	17,970,503	55.73
	MDIs not in production				880,000							880,000	
	Grand total		322,475	20,136,410	7,315,000	4,686,000	720,000	440,000	1,989,503	2,600,000	1,100,000	18,850,503	58.46

* The request of US \$2.6 million for patents and US \$1.1 million for technical assistance were prorated among eligible plants based on their 2007 CFC consumption

Annex II

CHINA PROCESS AGENT SECTOR PLAN

PHASE II

2007 CTC Consumption Verification Report

The World Bank

10 May 2008

CHINA PROCESS AGENT SECTOR PLAN

PHASE II

2007 CTC Consumption Verification Report

The World Bank

May 10, 2008

I SUMMARY

Under the Agreement on the CTC/PA Sector (Phase II), China is obligated to limit its CTC consumption to **6,945 ODP tonnes** in the verification year of 2007.

As guided by the Terms of Reference for April-May 2008 PA II Consumption Verification, the World Bank's mission conducted an independent verification on China CTC consumption and closure activities at each of the fifteen selected PA II enterprises that operated in 2007. The fifteen selected enterprises covered **37% of all enterprises** listed by the CTC/PA II Sector Plan.

Field visits of the verification mission started from April 7 to May 6, 2008 in Beijing. The Verification Team consisted of one technical expert from Canada, Mr. Zhiqun Zhang (Consultant of the World Bank), and accompanied by project officers¹ from SEPA.

In conclusion, the Verification Team confirmed that the CTC purchase and consumption of the fifteen selected enterprises in 2007 was **3,066.25 ODP tonnes (2,787.50 ODS tonnes)** and **2,646.50 ODP tonnes (2,409.51 ODS tonnes)** respectively, which shared **59.24% and 56.28%** of the total PA II purchase and consumption in 2007 as reported by SEPA at the national level².

Table 1 presented the verification schedule and operation status of the verified enterprises in 2007. Table 2 summarized the verified 2007 production and their CTC purchase, consumption and stockpiles for each of the fifteen visited enterprises. Individual plant verification reports are presented in following text of the summary report.

Detail information, verification data records and plant closure activities are included in Annex I of the summary report for each of the verified enterprise³.

Digital photos taken from site inspection at each of the plant visits are included in Annex II⁴.

Copy of the plant closure documents, dismantling photos and video CDs collected from each of the concerned enterprises are included in Annex III⁵.

¹ Mr. Wang Linhong attended from April 8th to 20th, Mr. Li Yunpeng attended from April 21st to May 1st, and Mr. Feng Liulei attended from May 4th to 6th, 2008.

² Refers to Table 4 (a), CHINA: ODS IV PROJECT CTC/PA II Sector Annual Progress Reports for 2007 Annual Program, January 15, 2008.

³ See a separate file attached to the verification report.

⁴ To be submitted via separate e-mails on request due to the large volume of the digital photos.

⁵ See a separate envelop submitted to Helen via WBOB courier service in May 2008, together with the verification report.

Table 1 Date of visit and verification status of the fifteen selected enterprises in 2007

Plant # in Sector Plan	Brief Name of Enterprise	Product that uses CTC PA	CTC use in 2003	Status in 2007	Date of visit
20	Guangzhou Jinzhujiang	CPP	430.91	Production	April 19, 2008
		CEVA	114.38	Production	
22	Jincheng Chemical	CPP	715.88	Production	April 17, 2008
		CEVA	114.38	Production	
38	Jingzhou Sanonda	MIC	42.25	Production	April 11, 2008
40	Hunan Gofar	MIC	88.21	Production	April 12-13, 2008
61	Jiangsu Anpon*	Bupropfenzin	189.91	Production and Closure	April 21, 2008
63	Jiangsu Changlong**	MIC	175.27	Production	April 26-27, 2008
		Bupropfenzin	126.96	Production	
		Imidacloprid	46.38	Converted 2004	
		Mefenacet	7.75	Converted 2006	
80	Jiangsu Yangnong Group	Imidacloprid	160.24	Production	April 24-25, 2008
84	Jiangyin Tongqi Tianlong	MPB	N/A	Plant closure	April 28, 2008
91	Liangyungang Yabang Jindun	Oxadiazon	57.00	Plant closure	April 20, 2008
126	Haili Guixi	MIC	202.60	Production	April 15, 2008
150	Xizhou Sihai	CPP	50.00	Plant closure	May 5, 2008
188	Zhejiang Hisun	Imidacloprid	23.25	Formulation only	April 9, 2008
207	Rudong Shidian	CPP	30.00	Production and Closure	April 23, 2008
N/A	Jiangsu Yixing Yonggu	CPP	N/A	Production	April 29-30, 2008
N/A	Xinzhou Local National (newly identified)	CPP	N/A	Plant closure	May 4, 2008

* The company had two bupropfenzin production lines that use CTC as a process agent. Line #1 was stopped in March 2005 and dismantled in April 2007. Line #2 was in normal operation and converted to a non-ODS process in March 2007. The mission verified both line #1 closure and line #2 production activities in 2007.

** Historically, the company had four products that use CTC as a process agent, which are MIC, Bupropfenzin, Imidacloprid and Mefenacet. However, the production of imidacloprid had been converted to a non-ODS process in 2004 and the use of CTC in mefenacet production was also phased out by end of 2006, therefore only two existing CTC-based products (MIC and bupropfenzin) that received CTC quota and operated in 2007 were verified by the mission.

Table 2 Summary of 2007 verification result of the fifteen selected PA II enterprises

Plant #	Name of enterprise*	Product using CTC PA	Production (MT)	CTC opening stock (ODS tonne)	CTC purchase (ODS tonne)	CTC consumption (ODS tonne)	CTC closing stock (ODS tonne)
20	Guangzhou Jinzhujiang	CPP	1,333.09	359.99	349.88	383.12	326.75
		CEVA	564.40				
22	Jincheng Chemical	CPP	1,076.20	235.35	646.44	432.34	449.45
		CEVA	186.83				
38	Jingzhou Shanonda	MIC	577.00	6.75	80.00	73.75	13.00
40	Hunan Gofar	MIC	1,343.80	0.00	170.00	149.75	20.25
61	Jiangsu Anpon	Bupropfenzin	1,169.57	66.97	0.00	Use: 38.57 Sale: 28.40	0.00
63	Jiangsu Changlong	MIC	1,535.20	0.00	660.30	216.05	151.97
		Bupropfenzin	4,004.19			292.28	
80	Jiangsu Yangnong Group	Imidacloprid	602.00	19.89	198.20	192.42	25.65
84	Jiangyin Tongqi Tianlong	MPB*	0.00	0.00	0.00	0.00	0.00
91	Liangyungang Jindun	Oxadiazon*	0.00	0.75	0.00	0.00	0.75
126	Haili Guixi	MIC	721.39	16.00	155.74	Use: 148.75 Sale: 22.99	0.00
150	Shanxi Xizhou Sihai	CPP*	0.00	0.00	0.00	0.00	0.00
188	Zhejiang Hisun**	Imidacloprid	0.00	0.00	0.00	0.00	0.00
207	Rudong Shidian	CPP*	0.00	29.92	0.00	Sale: 29.51 Loss: 0.41	0.00
208	Yixing Yonggu	CPP	493.45	10.50	526.94	397.57	139.87
N/A	Xinzhou Local National	CPP*	0.00	0.00	0.00	0.00	0.00
Total verified CTC purchase, consumption and stocks in 2007			(ODS tonnes)	746.12	2787.50	2405.91	1127.69
			(ODP tonnes)	820.73	3066.25	2646.50	1240.46

* The CTC-based production line was shutdown and there was no CTC purchase and consumption in 2007.

** The company stopped the use of CTC in production of 2-chloro-5-chloromethyl-pyridine (CCP) at end of 2005 and turned to purchase CCP from outside for imidacloprid production. Further in 2007, the production of imidacloprid technical was also fully stopped and only kept the imidacloprid dispensing and formulation workshop in operation, with imidacloprid technicals purchased from outside. Therefore, in the verification year of 2007, there was neither imidacloprid technical production nor CTC purchase/consumption within plant.

PROJECT COVER SHEET – MULTI-YEAR PROJECTS**COUNTRY: China, People's Republic****PROJECT TITLE:**

Sector Plan for Phase out of CFCs Consumption in China's MDI Sector

IMPLEMENTING AGENCY:

UNIDO

NATIONAL CO-ORDINATING AGENCY:Ministry of Environment Protection (MEP)
State Food and Drug Administration (SFDA)**LATEST REPORTED CONSUMPTION DATA FOR ODS ADDRESSED IN PROJECT****A: ARTICLE-7 DATA (ODP TONNES, 2006, AS OF MAY 2008)**

Annex A, Group I	12,420.43	Annex B, Group II	890.93
Annex A, group II	795.01	Annex E, MeBr	

B: COUNTRY PROGRAMME SECTORAL DATA (ODP TONNES, 2006, AS OF MAY 2008)

ODS	Foam	Refrigeration	Aerosol	MDI
CFC-11	6,318.55	405.8	98.87	40.9
CFC-12	0	3,264.34	370	236.7
CFC-114		27.69		3.3

CFC consumption remaining eligible for funding (ODP tonnes)**423.2****CURRENT YEAR BUSINESS PLAN: Total funding: US\$ 13,000,000 Total phase-out: 250 ODP tonnes.**

PROJECT DATA		2007	2008	2009	2010	2011	2012	2013	2014	Total
CFCs (ODP tonnes)	Montreal Protocol limits	8,672.8	8,672.8	8,672.8	0	0	0	0	0	n.a.
	Annual consumption limit	7,400	550	550	614.6	748.3	650.0	400.0	-	n.a.
	Annual phase-out newly addressed	0	0	0	0	0	98.3	250.0	400.0	748.3
Total ODS Consumption to Be Phased Out		0	0	0	0	0	98.3	250.0	400.0	748.3
Total ODS consumption to be phased-in (CFCs)		0	0	0	0	0	0	0	0	0
Project costs (US \$):			18,850,502							18,850,502
Support costs (US \$)			1,413,788							1,413,788
Total cost to Multilateral Fund (US \$)			20,264,289							20,264,289
Project cost effectiveness (US \$/kg):										58,46

FUNDING REQUEST: Approval of the MDI Sector CFCs Phase out Plan for China and its total project funding of **US\$ 18,850,502** plus support cost of **US\$1,413,788** as indicated above.

Prepared by: SFDA, MEP and UNIDO

Date: 15 May 2008

EXECUTIVE SUMMARY

This sector plan will assist China to phase out all CFC consumption of MDI sector in China. This is the second submission of the Plan and it takes into consideration the request of the ExCom formulated in its Dec. 53/23. The funding request targets the eligible consumption of 322.5 ODP tonnes (276.5 tonnes of CFC-12, 46 tonnes of CFC-11). The sector plan will be implemented through a series of technical assistance, legislative and investment activities starting in 2008. The sector plan was prepared on the basis of a detailed analysis and on site surveys of Chinese owned MDI manufacturing enterprises in China, and covers all enterprises and production lines available in the sector. The sector plan proposes a mix of approaches for conversion to non-ODS substitute processes where economically feasible, and closure of production through market tools and incentives where other approaches are not feasible. The sector plan includes policy actions to ensure that the phase out proceeds on schedule, and that the ineligible enterprises, which are not financed under the project, will stop using ODSs as propellant or dispersant of MDI production. The sector plan also addresses transitional arrangements and policy issues related to production and consumption of CFCs for domestic MDI use in the post-compliance period of 2010-2014.

Contents

PROJECT COVER SHEET – MULTI-YEAR PROJECTS	1
Contents	3
Chapter I Introduction	5
Chapter II Sector Baseline	7
A Development of MDI in China	7
B Asthma and COPD in China	7
C Treatment of Asthma and COPD in China	8
D Production process of MDIs	11
E Data Survey	12
F Enterprise information, CFC Consumption in the MDI Sector	16
Chapter III Regulation and Policy for the MDI Sector and CFC Phase out	27
A Regulatory framework for Drug, especially for MDI	27
B Policies Related to CFC Phase out	30
Chapter IV Technical Options	32
A Potential Ways to Phase out CFCs in the MDI Sector	32
B DPI Production	33
C Alternative excipient - Hydrofluoroalkanes (HFA)	33
D Alternative Technologies	34
E Policy and Patent Issues	35
Chapter V Phase-out Strategy and Policy Framework	37
A Objectives	37
B CFC Consumption Phase-out Schedule	37
C Transitional Arrangement and Need for Essential Use Exemption	38
D CFC production during 2008-2013	39
E Policies and Measures	40
Chapter VI Incremental Cost Calculation	42
A Incremental Costs Identified	42
Incremental Cost at Enterprise Level	42
Incremental Cost for Technical Assistance	44
B Industrial Rationalization and Cost Effectiveness – Implementation of ExCom Decision 53/23	44
C Basic Assumptions for the Incremental Cost Calculation	45
Eligibility Criteria for Incremental Cost Calculation	45
Key Assumptions for Incremental Operating Cost Calculation	46
D Incremental Investment Cost for Conversion of MDI manufacturers	46
Preparation of Technical Dossier Required for non-CFC MDI Registration	46

Patent Cost	50
Cost of Modification of Existing Production Facilities	50
Validation Process	53
(1) Validation for Changing Excipient (Alternative Propellant)	53
(2) Validation of Workshop, Public Utility System and Computer System	54
(3) Validation of Production Equipment	54
(4) Validation of Production Process	54
(5) Validation for Personnel and Other Relevant Items	55
(6) Validation for Change in Dosage Form	55
(7) Staff Training	55
E Incremental Operating Cost	56
F Contingency of incremental capital cost	59
G Technical Assistance (TA)	59
H Summary	59
Chapter VII Operating Mechanism	61
A Agreement between MEP and UNIDO	61
B Roles and Responsibilities	61
I. UNIDO	61
II. MEP	62
II. SFDA	62
IV. SWG	63
V. DIA	63
C Auditing and Reporting	64
D Destruction of CFC Equipment and Certification	64
Chapter VIII Action Plan	65

Chapter I Introduction

- 1) **Montreal Protocol and achievement of CFCs phase out in China.** In September 1989, China joined the worldwide effort to protect the ozone layer by ratifying the Vienna Convention on the Protection of Ozone Layer. China deepened its commitments by signing the Montreal Protocol and its London Amendment in June 1991 and ratifying its Copenhagen Amendment in April 2003. To implement the phase out of Ozone Depleting Substances (ODS), China has been meeting its obligations to these international agreements by implementing the Country Program for Phase out of Ozone Depleting Substances (CP), which the government approved in January 1993 and updated in November 1999. By 1 July 2007, China successfully completed the Accelerated Phase-out Plan for CFC and Halon Production and Consumption in China, i.e. two and a half years earlier than the requirements of the Montreal Protocol. Excluding CFCs used in MDI sector, all CFCs consumption has been phased out, thus the phase out of CFCs in the MDI sector represents the main challenge for China to complete the total phase out of CFCs production and consumption.
- 2) **Institutional arrangements for management of ODS phase out.** To monitor and manage the CP implementation, China established a National Leading Group (NLG) for Ozone Layer protection. The NLG provides strategic guidance and inter-sectoral coordination for ODS phase-out. The State Environmental Protection Administration (MEP) leads the NLG, which includes the Ministry of Foreign Affairs, Ministry of Finance, Ministry of Science and Technology, National Development and Reform Commission, Ministry of Public Security, Ministry of Information Industry, State Food and Drug Administration (SFDA) and selected government departments responsible for the industrial sector. For the day-to-day management, China has established an Implementation Office for Compliance with the Montreal Protocol (IOC for MP, the former Project Management Office) hosted by MEP. There are nine special working groups in the IOC, which consist of staff from MEP and other ministries, commissions and sector industrial associations.
- 3) **Policy and Regulation.** China issued and implemented a number of national and sectoral policies for ODS phase out during the past 15 years. The key policies include: (1) Air Pollution Prevention and Control Act, which is the basis for the ODS regulatory system in China; (2) Circular on the ban of establishment of new production facilities producing or consuming ODS, (ODS production control); (3) Management Measures on the Import and Export of ODS. (4) The Guiding Catalogue of Industrial Structure Regulation (2005) (issued by the National Development and Reform Commission at the end of 2005), which classifies over 1,000 industries into the categories of encouragement, restriction and elimination. The ODS industries were classified into the latter two categories (i.e. restriction and elimination).
- 4) **Efforts made for phase-out of CFCs in the MDI sector.** The Chinese Government and the stakeholders of the country's MDI sector have attached great importance to the CFCs phase-out tasks, which are to be undertaken with active yet careful attitude in the MDI manufacturing sector. They carried out preparations for alternative technology identification, exchange of information with experts from home and abroad, and conducted two rounds of preliminary surveys. In March 1995 and

December 1998, entrusted by MEP, the Aerosol Newsletter (a professional magazine of China's aerosol sector), organised two International MDI Technology Workshops in Beijing. Experts from international companies and Chinese MDI enterprises, research institutes and government agencies participated in these workshops. In 1997, MEP established the MDI Sector Technical Team for CFCs Phase-out, which was composed by experts from research institutes, national testing centres and MDI producers. In December 2003 and during the preparation of this proposed sector plan, MEP and SFDA established a special technical expert team, which is composed of the Chinese Academia: Chinese Academy of Engineering, Chinese Academy of Medical Sciences, MDI aerosol researchers from universities and research institutes, experts from factories, etc. Since then, the technical expert team carried out a comprehensive study of alternatives as well as other options to phase-out CFCs in MDI sector.

- 5) **Development of the MDI CFC Phase-out Sector Plan (MDISP)**. Funding of US\$ 90,000 was approved at the 43rd ExCom meeting in July 2004 to prepare the Sector Plan for Phase-out of CFCs Consumption in China's MDI Sector. As the leading agency for the implementation of Montreal Protocol, MEP in cooperation with SFDA selected National Institute for the Control of Pharmaceutical and Biological Products (NICPBP) to prepare this sector plan. The development of MDISP started in early 2005 under the auspices of MEP and SFDA. The first draft of MDISP was completed in April 2007 and was endorsed at a national workshop in August 2007.
- 6) The project document developed on the basis of the MDISP was submitted to the 53rd ExCom for its consideration. The Secretariat and the ExCom raised several questions, part of them was answered, however some issues e.g. the cost-effectiveness, the actual consumption data, industrial consolidation etc., required additional work as stipulated in Decision 53/23 of the ExCom. This work was carried out by MEP, SFDA and UNIDO through resurvey of enterprises and further dialogues with the stakeholders. The new data collected and the agreements reached with the beneficiaries are reflected in this document.
- 7) **Main contents of the sector plan and the impact of the project on the country's Montreal protocol obligations**. This sector plan address the MDI sector in terms of:
 - a) Data survey and analysis,
 - b) Current regulations and policies governing the sector,
 - c) Technical options, selection of most appropriate alternatives and technologies,
 - d) Strategy of phase out and policy framework, transitional arrangements in the compliance period,
 - e) Incremental costs analysis,
 - f) Operating mechanism, and
 - g) Action plan.
- 8) Upon approval of this Sector Plan with the requested funding of US\$ 18,850,502 (without agency support cost) the Chinese Government will ensure the phase out of all the remaining eligible unfunded CFC consumption in the MDI sector amounting to 322.5 ODP tonnes /year, including the phase out of all CFC consumption at 38 enterprises, producing 25 types of MDIs (104 product licenses).

Chapter II Sector Baseline

A Development of MDI in China

- 9) The first pharmaceutical aerosols made of sulfamido compound aerosols were developed in 1942, while the first metered dose inhaler (MDIs) aerosol was born in Riker Laboratories and came to the market in 1956. The medical aerosol industry in China started fairly late. In 1964, an anti-asthmatic aerosol, the first Chinese medicinal aerosol product, had been developed and produced jointly by Shanghai Institute of Pharmaceutical Industry, Shanghai Sine Pharmaceutical Factory, Wuxi First Pharmaceutical Factory and Chongqing Seventh Pharmaceutical Factory. However, during the first 20 years after the initial stage of the production, i.e. until the 1980s, the development of medicinal aerosols in China was comparatively slow due to the scarcity of cans, valves and satisfactory metering devices. Great progress was made along with the solution of all these technical problems after 1980s. Up to 2007, 104 MDI production licences were approved in China. These are applied by 38 producers manufacturing 25 types of CFC MDIs, based on 22 active chemical ingredients and 3 MDIs based on Chinese traditional medicines.

Table 1. Basic information on production licences and producers

	Product licenses	Types of products	Producers	Remarks
All registration licences issued for CFC-based MDI products	104	25	38	Including those holding registration licences but currently not producing
Currently produced CFC-based MDI products	36	13	16	

- 10) MDI has irreplaceable advantages in curing asthma and COPD: easy to carry, low dose, fast relieve and control of symptoms like dyspnoea of the patients.

B Asthma and COPD in China

- 11) According to the Global Initiative for Asthma (GINA) asthma is a chronic inflammatory disorder of the airways. Chronically inflamed airways are hyperresponsive; they become obstructed and airflow is limited (by bronchoconstriction, mucus plugs, and increased inflammation) when airways are exposed to various risk factors.
- 12) The common risk factors for asthma symptoms include exposure to allergens (such as those from house dust, mites, animals with fur, cockroaches and pollens.), occupational irritants, tobacco smoke,

respiratory (viral) infections, exercise, strong emotional expressions, chemical irritants, and drugs (such as aspirin and beta blockers).

- 13) A stepwise approach to pharmacologic treatment to achieve and maintain control of asthma should take into account the safety of treatment, potential for adverse effects, and the cost of treatment required to achieve control.
- 14) Asthma causes recurring episodes of wheezing, breathlessness, chest tightness, and coughing, particularly at night or in the early morning. Unfortunately asthma is one of the most common chronic diseases worldwide. The prevalence of asthma symptoms in children varies from 1 to more than 30 percent in different populations and is increasing in most countries, especially among young children. Fortunately asthma can be effectively treated and most patients can achieve good control of their disease through treatment and medication.
- 15) Development of anti-asthma drugs is targeting the inflammatory factors as leukotriene, the platelet-activating factor - thromboxane A₂, cytokines, phospholipase A₂-inhibitor, and tachykinin, in view of the complicated mechanism of the occurrence. Anti-inflammation has become the front line treatment, mainly including carbohydrate corticosteroid and antagonists against inflammatory mediators. Although the side effects of inhaled treatment are dramatically decreased compared with the systematic treatment with carbohydrate corticosteroid, the safety of the long term treatment is still widely disputed; especially when it has been found that the incidence and mortality still can not be lowered by long term treatment of inhaled carbohydrate corticosteroid. Thus the research about antagonists against inflammatory mediators is more and more becoming the hotspot of asthma treatment.
- 16) The incidence of asthma in China is rising during the past few years: in 2000 the number of annual incidence of asthma among the Chinese residents amounted to 15.6 million, or 1.2%, which shows an increase of 75% (with a rate of 4% per year), compared with the data in 1980. The incidence of asthma is highest in the population of children under 14 years of age, based on a medical report, the incidence is ranging between 0.5 and 3.6%. The second highest incidence is 2.6% among people more than 60 years old. The incidence is higher in the regions of coastal and southern China, with a highest 3.03% in Fujian province and 2.53% in Guangzhou. In the northern and inland region of China it is lower, with 0.5% in Shandong province and 0.11% in the Tibet autonomous region.

C Treatment of Asthma and COPD in China

- 17) Based on old habits of treatment, some doctors and patients still many times choose less effective oral medicines or injections instead of MDI to relieve or cure asthma. Some patients also take Chinese traditional medicines. Based on an incomplete investigation, only about 10% of the patients are using MDI, but the numbers are growing fast along with the rapid development of the country.

18) The types of asthma treatment were classified by the Coordination Group of Asthma Treatment under the Chinese Medical Association on Respiratory Diseases and the classification was published in “*The Directory of prevention and control of Bronchial Asthma*”. Seven kinds of treatment were recommended in the directory, which could be classified into 3 kinds of drug delivery manners: inhalation, oral and intravenous.

Table 2. The Recommended Treatment Methods for Preventing and Control of Bronchial Asthma

Drug type	Drug Delivery	Drug Name	Remarks
Glucocorticoids	Inhalation	BeclometasoneDipropionate	
		Budesonide	
		FluticasonePropionate	
	Oral	Prednisone	
		Prednisolone	
		Methyl Prednisone	
	Intravenous injection	Succinic Hydrocortisone	
		Methyl Prednisolone	
		Dexamethasone	
β -adrenergic receptor agonists (not suitable for severe cases)	Inhalation	Ssalbutamol	
		Terbutalin	
		Fenoterol	
		Formoterol	Long-acting
		Salmeterol	Long-acting
	Oral	Salbutamol	
		Terbutalin	
		Procaterol	
		Bambuterol	
	Injection		High incidence of systematic adverse reactions
	Theophyllines	Oral	Aminophylline
Controlled (Sustained)Released Theophylline			
Intravenous		Aminophylline	
		Doxofylline	
		Bis 2-Hydroxylpropylene Theophylline	
Anticholinergic drugs	Inhalation	Ipratropium Bromide	
		Atropine oxybromide	
		Tiotropium bromide	
	Oral	Zafirlukast	

Drug type	Drug Delivery	Drug Name	Remarks
Leukotriene regulators	Oral	Zafirlukast	
		Montelukast	
		Ibudilast	
Noncortical hormone (slight asthma)	Inhalation	Sodium Cromoglycate	
		Nedocromil sodium	
Antihistamine	Oral	Ketotifen fumarate	
		Loratadine	
		Astemizole	
		Azelastine	
Antiallergic drugs	Oral	Tranilast	
		Repirinast	
Chinese traditional medicine	Oral Inhalation	Guilong Kechuanming Aerosol,, Hajie Dingchuan Aerosol, Huashanshen Aerosol, Zhichuanling Aerosol	

- 19) China Asthma Alliance (CAA) was set up in June 2005. It is led by the Coordination Group of Asthma Treatment under Chinese Medical Association on Respiratory Diseases. CAA aims to disseminate the standard treatments of asthma, and improve the control and research level of asthma in China, by ways of strengthening the cooperation with other asthma control organizations throughout the country.
- 20) For the time being, 26 provinces (including municipalities directly under the central government) have their own asthma alliances. The activities to propagate standard treatments and to develop doctor training programmes with the help of asthma control organizations follow the directives of GINA and “The Directory of Prevention and Control of Bronchial Asthma in China”. Accordingly, MDI should be recommended by the doctors as the first choice to treat asthma.
- 21) Based on the statistics derived from the report of “Market investigation of anti-asthma drugs”, published recently by the South China Institute of Medical Economic Research, which is an affiliated organization of SFDA, more than 70% of asthma drugs was sold in hospitals. The market has been increasing steadily from 2004 to 2006.
- 22) It is expected that in China MDI will be used more and more to treat the asthma.

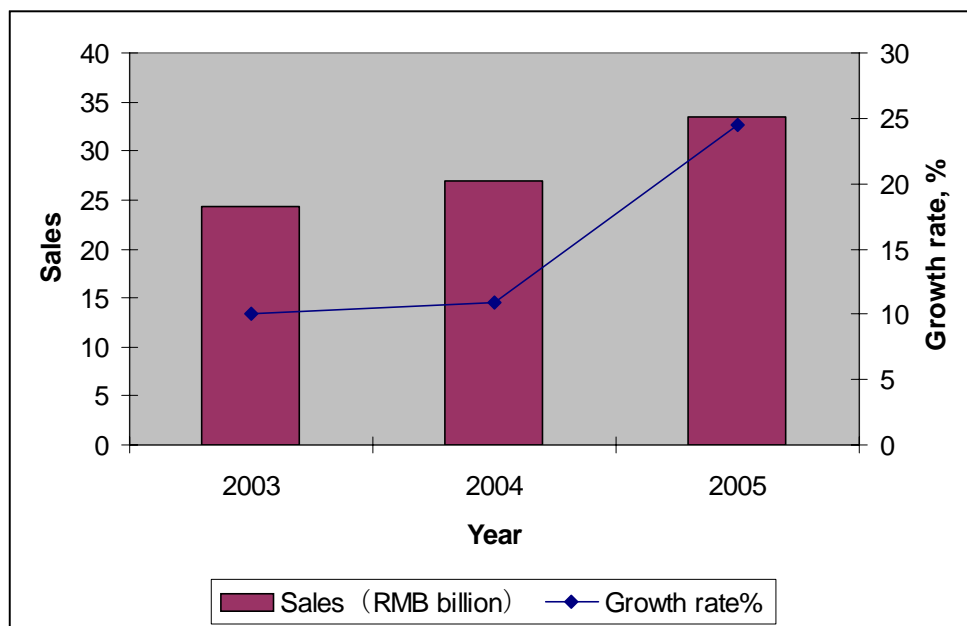


Fig. 1: The Sales of MDI Products in China

D Production process of MDIs

- 23) As other medicines, MDIs should be registered at SFDA prior to the start of their production. The detailed registration process is described in Section A, chapter III.
- 24) The MDI production process is simply described on the following figure.

Operation	Equipment	Process description	QCO
Preparation	Preparation Cabinet	Add medicine with high speed mix at lower temp	
Mixing	Preparation Tank	Add Supplementary material with high speed mix round under lower temp	
Filling	Filling machine	Fill the aluminum cans	
Capsulation	Cap machine	Put caps	IPC
Charging CFCs	CFC charging machine	Charging CFCs	IPC
Inspection Packaging	Water bath audio tester Manual packing	Put in water bath then pack after test	LPC

Fig. 2: The production process for Salbutamol Aerosol (suspension)

E Data Survey

- 25) NICBPB was entrusted by SFDA, MEP and UNIDO to carry out an investigation of the MDI sector and prepare the sector plan to phase out CFCs in the MDI sector of China.
- 26) The data survey process is shown in following figure 3.
- 27) The data survey was planned to be conducted by the following ways:
- Identify all the MDIs manufacturers in the drug registration system;
 - Send a comprehensive questionnaire to related enterprises for completion;
 - Visit enterprises to verify the CFC consumption;
 - Verify all data again during consultation on the draft sector plan.

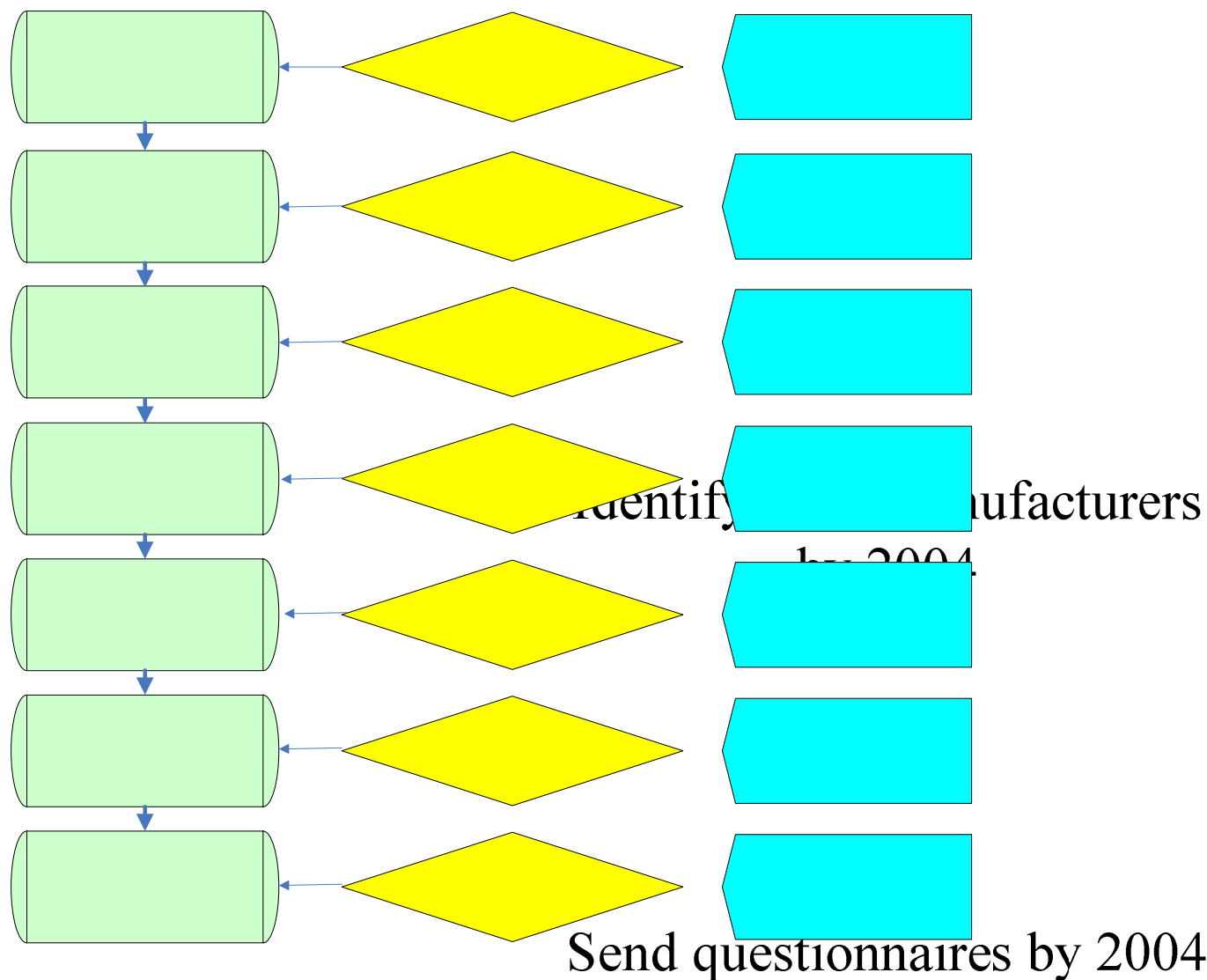


Fig. 3: Data survey process

28) The actual chronology of events was as follows:

- a) SFDA and NICPBP identified all MDI producers;
- b) SFDA, MEP and NICPBP prepared a questionnaire to collect the consumption, production and technical data under support of UNIDO;
- c) The questionnaire was distributed to all the MDI producers in China;
- d) Up to the November 2004, SFDA received feedback from all companies;
- e) In August 2004, MEP, NICPBP and SFDA carried out field investigations at three pharmaceutical aerosol producers, namely: S&P Pharmaceutical Co., Ltd., Xinjiang Biochemistry Pharmaceutical Co., Ltd., and Xinjiang Pharmaceutical Factory.
- f) In September 2005, SFDA and NICPBP visited 38 producers to collect and verify the required information.
- g) In March 2006, SFDA requested local Food and Drug Bureaus through-out the country to confirm the status of MDI enterprises and their products.

- h) In April 2006, SFDA organized a meeting to initially discuss the plan of CFCs phase-out; this was attended by all MDIs enterprises. During the meeting, all the enterprises confirmed their data once again.
 - i) In May-June 2006 UNIDO reviewed the outcomes of the first surveys and plan with MEP, SFDA and NICPBP in Beijing and visited several major producers in Hangzhou, Shanghai and Wuxi to verify the data.
 - j) In May 2007, MEP, NICPBP re-visited three enterprises which showed the biggest consumptions of CFCs in the years 2003 to 2005.
 - k) In June 2007, MEP, NICPBP, and SFDA re-visited all the above mentioned 21 enterprises to collect MDI production and CFCs consumption data for the year 2006 and verify the data of previous years.
 - l) UNIDO has organized several meeting through the recent years to harmonise the data collection exercise, discuss the status of the preparation of the Sector Plan and advise on various issues of concern.
- 29) The 53rd ExCom reviewed the project document and decided to postpone the consideration of the approval of the project to a future meeting. Since there were some differences between the previously reported CFC consumption data and the ones reflected in the document presented to the 53rd ExCom, it was agreed that prior to the resubmission of the project UNIDO in close cooperation with SFDA and MEP/FECO will revisit the data in the framework of a new survey of the enterprises to reflect the latest verified data in this revised document.
- 30) The resurvey was carried out in the first quarter of 2008 by the following methodology:
- a) Early 2008, SFDA sent to the local food and drug bureaus an official document requesting all local FDAs to conduct a survey on production of MDI producers within their area of authority and report the survey results to NICPBP.
 - b) According to the feedback from local FDA, an on-site survey of all MDI producers with CFC consumption in 2007 was carried out by NICPBP as a lead agency jointly with MEP and SFDA. The verification of the affected 13 MDI producers was conducted by 4 groups.
 - c) The following official documents and data were reviewed and crosschecked:
 - i) Subsidiary ledger of the use of raw materials for 2007 (by types and amounts): quantity of CFCs procured, consumption of CFCs, opening and closing stockpiles, and origin of raw material;
 - ii) Subsidiary ledger on sales for 2007 (by product and amount): unit price and quantity of products, sales and destination;
 - iii) Subsidiary ledger on products 2007: warehouse-entry amount, warehouse-out amount and opening and closing inventory of products;
 - iv) Collecting copies of invoices, on procurement of CFCs and product sales.
 - v) Collecting and reviewing the questionnaires on ODS consumption 2007 completed by the MDI producers.
 - d) The flow chart of verification is shown below:

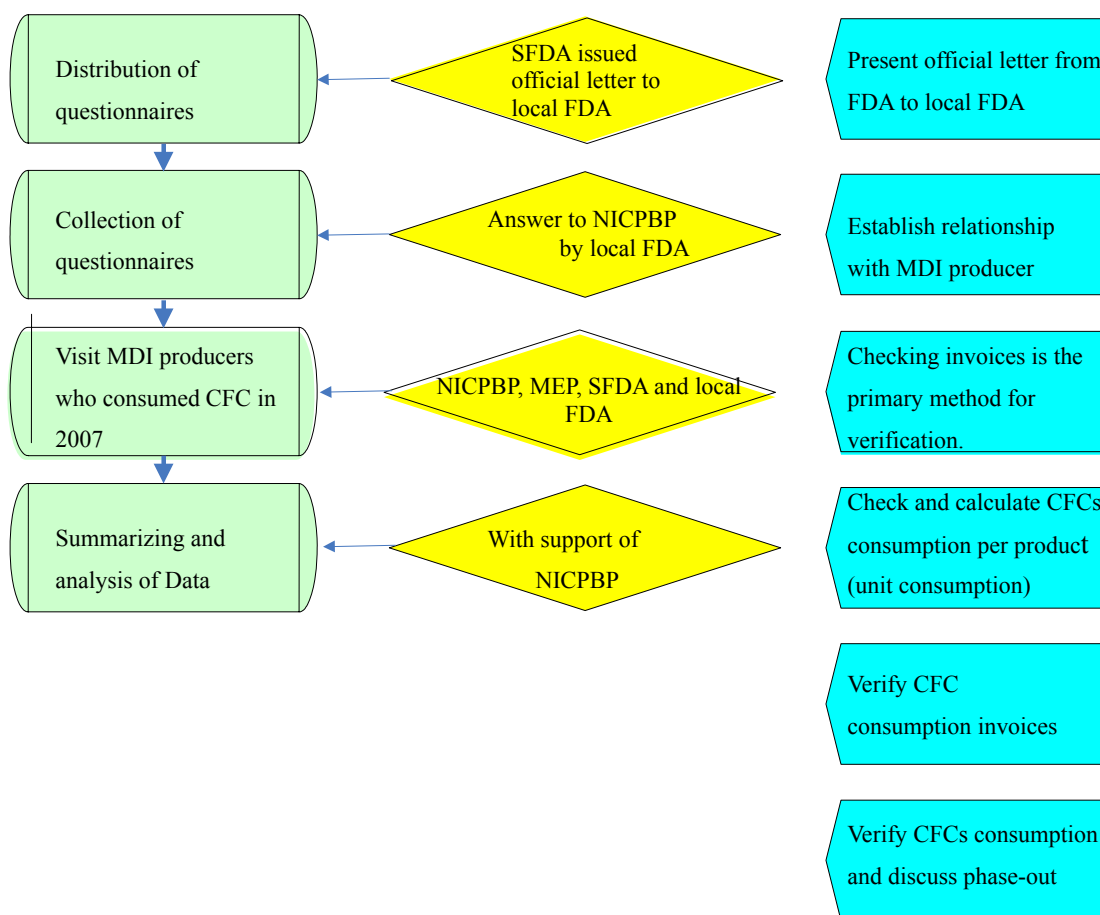


Fig. 4: Flow Chart of Verification

- 31) The new survey shows that the total CFCs consumption in 2007 amounted to 340.5 tonnes. In which, the 322.5 tonnes is accounted for Chinese-owned enterprise.
- 32) There are 16 enterprises who consumed CFCs in 2007, holding 60 licenses, of which, 36 have been in production and 24 without production.
- 33) The Chinese owned enterprises do not export MDI to non-A5 countries. They were all established before the cut-off date proposed, thus, in 2007 the eligible for funding CFC consumption in the MDI sector of China amounted to **322.5 ODP tonnes**.
- 34) The data deriving from the new enterprise level survey are reflected in the following Table 3 through Table 7.

F Enterprise information, CFC Consumption in the MDI Sector

- 35) Until today, there have been totally 25 types of MDIs (including three Chinese traditional medicine) produced in China by 38 companies (including 5 with foreign ownership).
- 36) In the period 2004-2007 25 companies produced 17 types of MDIs using CFCs. Due to market reasons eight types of MDIs were not produced during 2004-2007. The companies and their CFC consumptions are listed in Table 3:

Table 3. Products and CFC Consumption by enterprises

Company Code	Company Name	Product Code	Product Name (active ingredient)	Consumption of CFC (g/can)	Annual CFC Consumption (kg),			
					2004	2005	2006	2007
01	AstraZeneca Pharmaceutical Co., Ltd.	B13	Terbutaline Sulfate Aerosol	17.5	4,240.0	4,559.0	5,536.0	0
01	AstraZeneca Pharmaceutical Co., Ltd.	B04	Budesonide Aerosol	9.9	3,262.0	3,494.0	4,538.0	0
01	AstraZeneca Pharmaceutical Co., Ltd.	B13	Terbutaline Sulfate Aerosol	9.9	4,010.0	2,901.0	3,129.0	16,612.70
02	Beijing Haiderun Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	11.0	0.0	0.0	6,424.0	214
02	Beijing Haiderun Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	11.0	0.0	0.0	2,915.0	0
02	Beijing Haiderun Pharmaceutical Co., Ltd.	B23	Ipratropium Bromide Aerosol	11.3	0.0	0.0	27.0	325
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	21.9	504.6	745.9		730
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B01	Beclometasone Dipropionate Aerosol	22.0	270.5	180.3		0
05	GlaxoSmithKline (Tianjin) Co., Ltd.	B01	Beclometasone Dipropionate Aerosol	27.3	12,203.1	0.0		0
05	GlaxoSmithKline (Tianjin) Co., Ltd.	B01	Beclometasone Dipropionate Aerosol	20.4	2,733.6	0.0		0
06	GlaxoSmithKline (Chongqing) Co., Ltd. *	B15	Salbutamol Aerosol	25.5				0

Company Code	Company Name	Product Code	Product Name (active ingredient)	Consumption of CFC (g/can)	Annual CFC Consumption (kg),			
					2004	2005	2006	2007
06	GlaxoSmithKline (Chongqing) Co., Ltd.*	B01	Beclometasone Dipropionate Aerosol	27.3				0
06	GlaxoSmithKline (Chongqing) Co., Ltd.*	B26	Beclomethasone Dipropionate Aerosol	13.1				0
06	GlaxoSmithKline (Chongqing) Co., Ltd.*	B01	Beclometasone Dipropionate Aerosol	19.8				0
08	Guangzhou Dongkang Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	12.5	2,370.0	2,010.0	1,341.0	1,660
08	Guangzhou Dongkang Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	12.5	250.0	400.0	219.0	120
09	Guiyang Dechangxiang Pharmaceutical Co., Ltd.	B24	Zhichuanling Aerosol	12.0	393.6	30.0	130.8	320
11	Harbin Hengchang Pharmaceutical Co., Ltd.	B14	Sodium Cyomoblicate Aerosol	17.89	0	0	0	127
11	Harbin Hengchang Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	22.5	172.1	179.5	0.0	286
14	Henan Xinxin Pharmaceutical (Group) Co., Ltd.	B11	Huashanshen Aerosol	9.8	0.0	0.0	300.0	0
15	Henan Zhongfu Pharmaceutical Co.,Ltd.	B15	Salbutamol Aerosol	14.7	670.3	1,380.3	2,205.0	0
16	Heilongjiang Tanglong Pharmaceutical Co.,Ltd.	B15	Salbutamol Aerosol	13.9	27.8	0.0		240
18	Jinan Weimin Pharmaceutical Co.,Ltd.	B15	Salbutamol Aerosol	13.2	22,560.1	29,676.2	33,652.0	39,600

Company Code	Company Name	Product Code	Product Name (active ingredient)	Consumption of CFC (g/can)	Annual CFC Consumption (kg),			
					2004	2005	2006	2007
18	Jinan Weimin Pharmaceutical Co.,Ltd.	B22	Isoprenaline Hydrochloride Aerosol	13.2	24,492.6	26,574.2	30,134.0	33,660
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	B15	Salbutamol Aerosol (solution)	11.3	12,219.0	12,395.0	16,025.0	18,098
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	B22	Isoprenaline Hydrochloride Aerosol	11.3	12,028.0	10,618.0	12,769.0	7,912
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	B16	Salbutamol Aerosol (suspension)	20.9	7.5	7.4	41.7	90
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	B14	Sodium Cyomoglicate Aerosol	25.3	0.0	0.0	50.5	0
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	B07	Compound Isoprenaline Hydrochloride Aerosol (suspension)	20.9	0.0	0.0	41.7	0
21	Jewim Pharmaceutical (Shandong)Co., Ltd.	B16	Salbutamol Aerosol (suspension)	17.2	37,405.7	79,163.9	70,000.0	90,507
21	Jewim Pharmaceutical (Shandong)Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	23.2	7,288.5	16,526.3	22,950.0	59,807
21	Jewim Pharmaceutical (Shandong)Co., Ltd.	B15	Salbutamol Aerosol (solution)	16.2	2,947.4	9,801.2	20,250.0	11,479
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B14	Sodium Cyomoglicate Aerosol	16.9	2,109.9	6,902.0	7,378.0	13,386
22	Shandong Linuo Kefeng Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	10.2	0	0	0	30

Company Code	Company Name	Product Code	Product Name (active ingredient)	Consumption of CFC (g/can)	Annual CFC Consumption (kg),			
					2004	2005	2006	2007
22	Shandong Linuo Kefeng Pharmaceutical Co., Ltd.	B04	Budesonide Aerosol	9.8	0	0	0	70
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	B04	Budesonide Aerosol	49.4	3,459.0	2,344.5	3,210.0	3,551
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	B25	Salbutamol Aerosol Compound Salbutamol Sulfate Aerosol	22.4			100.0	544
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	B17	Salmeterol Xinafoate Aerosol	3.3			10.0	10
25	Pharmaceutical Factory of Shanxi Medical University	B16	Salbutamol Aerosol (suspension)	19.5	1,003.0	858.0	689.0	637
25	Pharmaceutical Factory of Shanxi Medical University	B01	Beclomethasone Dipropionate Aerosol (suspension)	19.5	62.0	90.0	19.0	0
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B15	Salbutamol Aerosol (solution)	15.6	2,617.1	7,222.2	7,035.0	6,890
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B16	Compound Salbutamol Aerosol (suspension)	19.5	4,767.8	6,233.8	7,289.0	8,247
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B12	Ribavirin Aerosol	15.0	0.0	1,851.0	3,193.0	3,443
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B09	Ketotifun Fumarate Aerosol	20.1	0.0	0.0	1,271.0	1,271

Company Code	Company Name	Product Code	Product Name (active ingredient)	Consumption of CFC (g/can)	Annual CFC Consumption (kg),			
					2004	2005	2006	2007
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B04	Budesonide Aerosol	20.9	198.0	435.0	289.0	448
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B22	Isoprenaline Hydrochloride	15.6	165.0	200.0	165.0	190
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B01	Beclometasone Dipropionate Aerosol	23.3	0.0	0.0	79.0	90
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B14	Sodium Cyomoglicate Aerosol	21.9	0.0	0.0	113.0	78
28	Shanghai Pharmaceutical (Group) Co., Ltd Prescription Drug Business Unit	B17	Salmeterol Xinafoate Aerosol	15.0	33.6	0.0	0.0	0
29	Tianjin Century Pharmaceutical Co.,Ltd.	B22	Isoprenaline Hydrochloride Aerosol	0	0.0	0.0	0.0	0
29	Tianjin Century Pharmaceutical Co.,Ltd.	B15	Salbutamol Aerosol	9.8	0.0	0.0	0.0	0
31	Weifang Zhongshi Pharmaceutical Co.,Ltd.	B01	Beclometasone Dipropionate Aerosol	20	0	0	0	57
31	Weifang Zhongshi Pharmaceutical Co.,Ltd.	B15	Salbutamol Aerosol (solution)	11.6	3,150.0	1,350.0	900.0	557
31	Weifang Zhongshi Pharmaceutical Co.,Ltd.	B16	Salbutamol Aerosol (suspension)	15.0	0.0	0.0	0.0	70.7

Company Code	Company Name	Product Code	Product Name (active ingredient)	Consumption of CFC (g/can)	Annual CFC Consumption (kg),			
					2004	2005	2006	2007
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	B15	Salbutamol Aerosol	11.5	7,570.0	6,755.0	4,840.0	3,200
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	B22	Isoprenaline Hydrochloride Aerosol	11.5	1,470.0	1,245.0	0.0	0
35	Guandong Tongde Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	11.41	0	0	0	3,420
35	Guandong Tongde Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	10.6	0	0	0	2,650
36	Chongqing Kerui Pharmaceutical Co.,Ltd.	B16	Salbutamol Aerosol (suspension)	16.8	5,550.0	7,530.0	7,376.5	9,767
37	Zigong Chengguang Pharmaceutical Co.,Ltd.	B05	Dimethicone Aerosol	25.2	307.1	22.2	70.0	100
38	Jiangsu Tianji Pharmaceutical Co.,Ltd.	B12	Ribavirin Spray	9.0	0	0	4,202.0	0.00

Table 4. CFC Consumption of MDI Sector in China 2004 - 2007 (unit: tons ODP)

Year	2004	2005	2006	2007
CFC-11	27.1	40.1	40.9	46
CFC-12	152.6	200.9	236.7	294.5
CFC-114	2.9	2.7	3.3	0
CFCs	182.5	243.7	280.9	340.5
Of which consuming by 5 foreign companies	30.4	13.2	14.1	18
Of which consumption by 18 domestic companies*	152.1	230.5	266.8	322.5

* There are 15 domestic companies, which have registered MDI products but have had no production during 2004-2007.

** The ODP tonnes of CFC-11, CFC-12 and CFC-114 are same as the metric tonnes.

Table 5. Production of CFCs MDI in China 2004 - 2007

Year	2004	2005	2006	2007
Output (Cans)	12,027,255	15,871,614	18,857,763	21,589,832

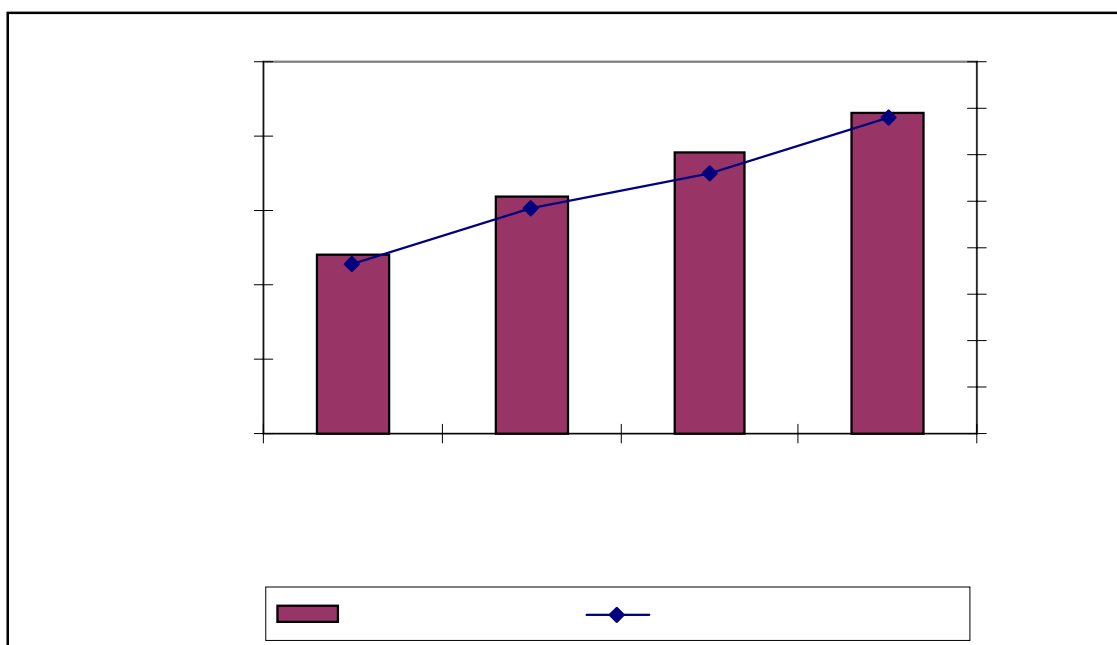
**Fig. 5:** CFC Consumption and MDI production during 2004 - 2007

Table 6. General Information of the MDI Manufacturing Enterprises

Company Code	Company Name	Year of Establishment	Chinese share of ownership	Number of line	Number of Licences	Type	CFC Consumption in 2007, (kg)	Output in 2007, (cans)
1	AstraZeneca Pharmaceutical Co., Ltd.	1992	0%	1	1	B13	16,613	1,364,859
2	Beijing Haiderun Pharmaceutical Co., Ltd.	1978	100%	1	2	B15, B23	540	48,306
3	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	1991	0%	1	1	B15	730	33,333
8	Guangzhou Dongkang Pharmaceutical Co., Ltd.	1988	100%	1	2	B15, B22	1,780	141,360
9	Guiyang Dechangxiang Pharmaceutical Co., Ltd.	1979	100%	1	1	B24	320	20,206
11	Harbin Hengchang Pharmaceutical Co., Ltd.	1993	100%	1	2	B14, B15	412	23,034
16	Heilongjiang Tanglong Pharmaceutical Co.,Ltd.	1997	100%	1	1	B15	240	16,000
18	Jinan Weimin Pharmaceutical Co.,Ltd.	1979	100%	2	2	B15, B22	73,260	5,550,000
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	1993	100%	2	3	B15, B22 B16	26,100	2,216,150
21	Jewim Pharmaceutical (Shandong)Co., Ltd.	1993	100%	1	4	B15, B14 B16, B01	175,178	9,295,910

22	Shandong Linuo Kefeng Pharmaceutical Co., Ltd.	1991	100%	1	2	B15, B22	100	10,000
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	2001	100%	1	3	B17, B25, B04	4,115	169,400
25	Pharmaceutical Factory of Shanxi Medical University	1994	100%	1	1	B16	637	32,785
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	1982	100%	1	8	B12, B15, B22 B16 B09 B04 B14 B01	20,656	1,289,879
31	Weifang Zhongshi Pharmaceutical Co.,Ltd.		0%	1	3	B15 B16 B01	685	55,230
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	1965	100%	1	1	B15	3,200	195,560
35	Guangdong Tongde Pharmaceutical Co.,Ltd.	1993	100%	1	2	B15 B16	6,070	550,000
36	Chongqing Kerui Pharmaceutical Co.,Ltd.	1975	100%	1	1	B16	9,767	575,520
37	Zigong Chenguang Pharmaceutical Co.,Ltd.	1981	100%	1	1	B05	100	2,300
38	Jiangsu Tianji Pharmaceutical Co.,Ltd.			18	36		340,503	21,589,832

Note:

1. Companies marked with * don't produce anymore.
2. Companies with no MDI lines are using contract fillers to fill their products.

37) The summary of information on enterprises for the year 2007 is as follows:

Table 7. Summary of information of enterprises for 2007

	Number of producers	Number of Licences	Number of Licences in production
Number of MDI producers	38	104	40
Domestic ownership in production	16	51	36
Domestic ownership with idling capacities	18	36	0
Foreign ownership in production	4	17	4
Foreign ownership, closed*	1	*	*
Consumption (tons):			
CFC-11	46		
CFC-12	294.5		
CFC-114	0		
Total CFC consumption (MT)	340.5		
Consumption of 5 foreign companies (MT)	18		
Consumption of 15 domestic companies (MT)	322.5		

* One of foreign companies stopped producing in Chongqing and shifted its registered products to its sister company in Tianjin.

38) The CFC consumption data survey did not show the expected rapid growth of CFC based MDI production and CFC consumption. The reason is that from late 1990's, MEP began to conduct public awareness raising activities on CFCs phase out in this sector. Currently, a large amount of imported DPI and CFC-free MDIs are on the Chinese market.

39) According to the discussion with enterprises during the site visits, MDI manufacturing enterprises in China face many problems and difficulties in the process of CFCs replacement. Up to now, only one product from one enterprise got approval from SFDA for clinical tests. The preparation of the National MDI Strategy and the project document raised awareness among the enterprises and they are seriously studying and developing their strategies to phase out CFCs in their companies.

Chapter III Regulation and Policy for the MDI Sector and CFC Phase out

A Regulatory framework for Drug, especially for MDI

40) CFCs are used as an inactive carrier substance (excipient) in the production of MDI. According to the laws, regulations and policies concerning drug management in China, strict procedures must be followed when formulation of a drug including the excipient is changed. The main laws, regulations and policies governing the drug management are as follows:

Drug Administration Law of the People's Republic of China (took effect on 1 December 2001)

41) This law is a national law to be observed strictly by all pharmaceutical products related production enterprises and institutions. The stipulations of the Drug Administration Law of PRC are used as the guiding principle in this Sector Plan of CFCs Phase out in the MDI Sector. This law aims to strengthen drug administration, guarantee drug quality, safeguard the safety of use of drugs in human body, safeguard human health, and protect legal rights to use the drug. As specified in its Clause 2, this law must be observed strictly by any unit or individual functioning in R&D, production, operation, use, and supervisory administration of drugs within Chinese territory. The MDI aerosol is one kind of drugs, and thus its supervisory administration (including the substitution of excipient/propellant and the modification of the form of drug) shall comply with various regulations of *Drug Administration Law of PRC*. Some clauses related to the MDI sector plan include, but not limited to:

- a) Control over Manufacturers. Article 9 states that “drug manufacturers shall conduct production according to the Good Manufacturing Practices for Pharmaceutical Products (GMP) formulated by the Drug Administration Department under the State Council on the basis of this Law. The drug regulatory department shall inspect drug manufacturers on their compliance with the GMP requirements and issue a certificate to the manufacturers passing the inspection. The specific measures and schedule for implementing the GMP shall be formulated by the Drug Administration Department under the State Council.”
- b) Control over Drugs. Article 29 states that the dossier on a new drug research and development, including the manufacturing process, quality specifications, results of pharmacological and toxicological study, and the related data and the samples shall, in accordance with the regulations of the Drug Administration Department under the State Council, be truthfully submitted to the said department for approval, before clinical trial is conducted. Measures for verifying the qualifications of clinical study institutions for drugs shall be formulated jointly by the drug regulatory department and the administration department for health under the State Council. When a new drug has gone through clinical trials and passed the evaluation, a New Drug Certificate shall be issued upon approval by the Drug Administration Department under the State Council.
- c) Control over Production. Article 31 states that “A drug manufacturer may produce the drug only after an approval number (production license) is granted to it.”

Regulation on Drug Registration revised recently by SFDA (No. 28, effective as of 1 October 2007)

- a) Article 12 states that “a new drug application means a registration application for a drug that has not been marketed in China. A drug that has been marketed in China, for which an application is made for a change in dosage form, or route of administration of medicaments, addition of new indication shall be treated as a new drug application.” “Supplementary application means an application for the change, addition, or cancellation of any item or content in the existing registration approval of a new drug, or of a drug already with national standards (approved for another company), or import drug.”
- b) Article 18 stipulates, that regarding a drug or its formulation, manufacturing process and indication etc. the applicant shall submit documents to explain the patent status and ownership rights in China. If patent(s) related to the above is valid in China the applicant shall submit a letter of guarantee to declare that the drug will not infringe the patent rights of others and that the applicant assumes liability for any possible infringement. If any disputes on patent occur in the process of registration, the related parties shall try to resolve the matter according to relevant laws, regulations.
- c) Article 113 requires that if there is a change a.) in drug registration standards, b.) excipient, or c.) the production process, which may affect product quality a supplementary application should be processed. The application should be submitted to the FDA of the Province, Autonomous Region or Municipality under the Central Government, who shall review the application and submit recommendations to SFDA for approval. Then applicant will be notified subsequently.
- d) Article 150 authorises SFDA to administer the technical review during the drug registration process in accordance with the following requirement:
 - i) Complete approval procedure in 90 days for a drug to apply new clinical study, complete approval procedure in 80 days if a drug meets the requirements under Article 48 of this Regulation;
 - ii) Complete approval procedure in 150 days for production of new drug, complete approval procedure in 120 days if a drug meets the requirements under Article 48 of this Regulation;
 - iii) Complete approval procedure in 160 days for an imitated drug already with national standards, or a change in dosage form.
 - iv) Complete approval procedure in 40 days for supplemental application if a technical review is needed.

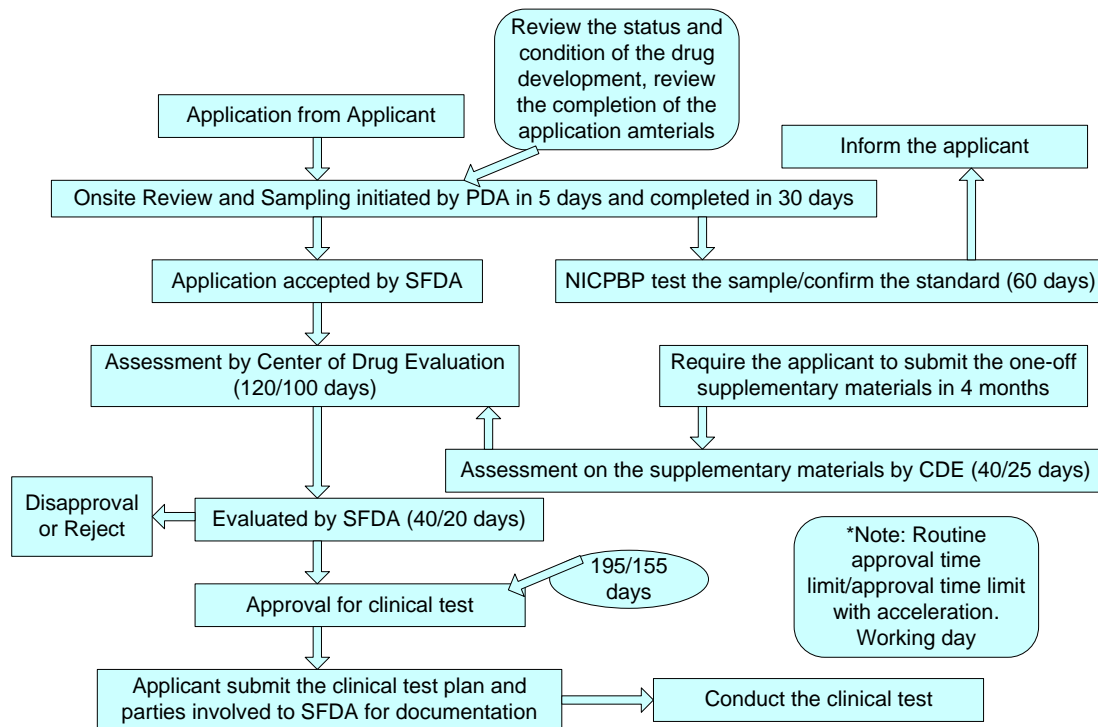


Fig. 6: Approval Procedure for Clinical Test of the New Drug

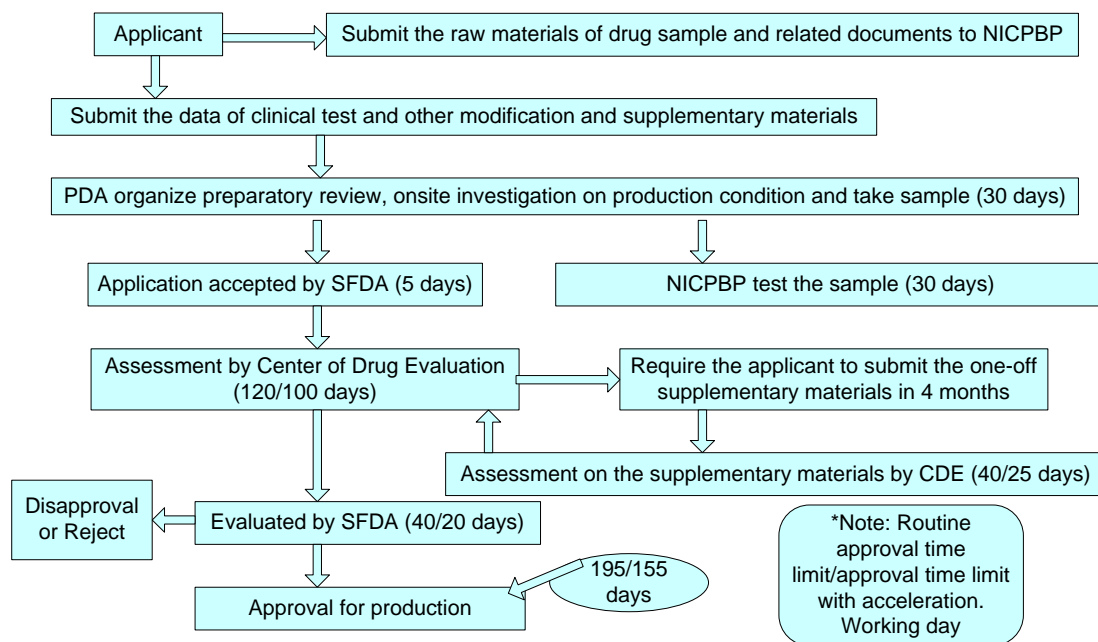


Fig. 7: Approval Procedure for the Production of New Drug

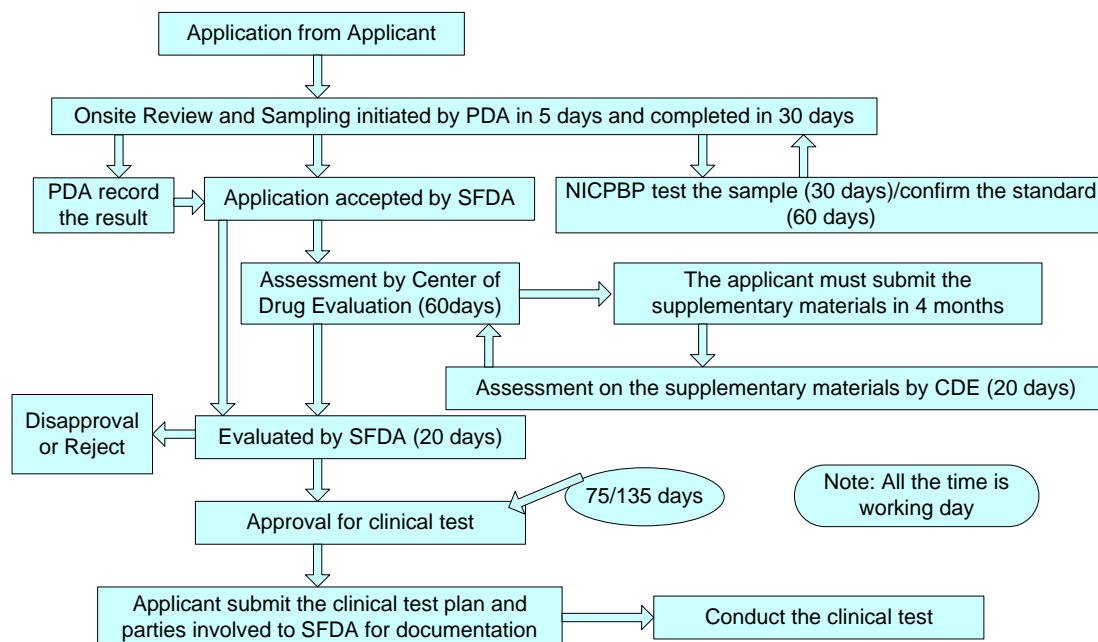


Fig. 8: Approval Procedure for Clinical Test for Change to Existing Drug

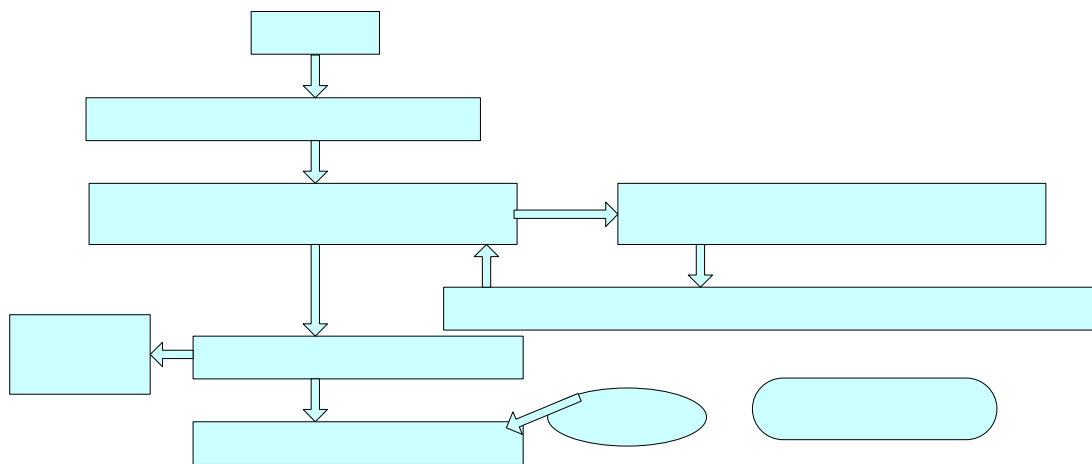


Fig. 9: Approval Procedure for Production for Change to Existing Drug

B Policies Related to CFC Phase out

Notice on Terminating the Use of Chlorofluorocarbons (CFCs) as Excipient for Medical Aerosols (Guo Si Yao Jian Zhu No. [2006] 279):

42) This notice issued by SFDA on 22 June 2006, specifies the following relevant matters in order to accomplish the commitment of the Chinese Government and guarantee the smooth phase out of CFCs in line with accelerated CFC Phase-out Plan of China:

- a) China stopped using CFCs as pharmaceutical excipient in the production of external-use aerosol from 1 July 2007. The external-use aerosols produced with CFC based excipient before this date can be circulated and used until the expiration of their validity date.
- b) China stopped importing the CFC based external-use aerosol from 1 July 2007, and the external aerosols imported before this date can be circulated and used until the expiration of their validity date. China will stop importing the CFC based metered inhalant aerosol from 1 January 2010, and the inhalant aerosol imported before this date can be circulated and used until the expiration of their validity date.
- c) China stopped examining and approving registration applications for CFC based external-use aerosols (including that for imported ones) from 1 July 2007 and that of CFC based metered inhalant aerosol (including that of imported ones) from 1 January 2010.
- d) To eliminate CFCs in line with the Sectoral Phase out Plan, drug producers shall, according to the relevant requirements of the Regulations on Drug Registration, apply for modification of the pharmaceutical excipient or drug form of pharmaceutical aerosols.

Chapter IV Technical Options

A Potential Ways to Phase out CFCs in the MDI Sector

43) There are two major issues to be considered when converting CFCs based MDIs to non-ODS alternatives:

- a) In-kind: find the substitute excipient to replace CFCs,
- b) Non in-kind: adopt other drug delivery system: e.g. compressed air atomizer, ultrasonic atomizer, two-phase system, self-pressurising system or dry powder inhalation.

Table 8. Comparison of Different Types of Asthma Treatment Drugs

Type of inhaler	Advantages	Disadvantages
Metered dose inhalers (MDI)	<ol style="list-style-type: none"> 1. Simple actuation system 2. Reliable accurate dose regardless of the patient's breathing capacity 3. Compact and portable 4. Easy to use 5. Economical 6. Good resistance to moisture 	<ol style="list-style-type: none"> 1. Mostly use CFCs as propellants 2. The method of pressing and breathing requires coordination between actuation and breathing (breath-actuated systems do not have this drawback). 3. Dosage accuracy may be dependant on the formulation. 4. Complex manufacturing process.
Dry Power Inhalers (DPI)	<ol style="list-style-type: none"> 1. No propellant used 	<ol style="list-style-type: none"> 1. Drug release depends on the patients breathing capacity. 2. The inhaled fraction is reduced if the patient breath is directed into the system. 3. Relatively expensive. 4. Costly conversion and patent rights
Nebulisers	<ol style="list-style-type: none"> 1. No special breathing coordination required. 2. Works with patients using mechanical breathing. 3. Useful to administer new or less used drugs. 	<ol style="list-style-type: none"> 1. Not portable. 2. Depends on an electric supply. 3. Expensive. 4. Operation takes a long time. 5. Requires the use of preservatives to reduce risk of bacteria contamination.

44) For the time being, the potential substitutes of CFCs used for MDI are HFA 134a and HFA 227.

B DPI Production

- 45) SFDA together with the industry and representatives of the academia reviewed the possibility to introduce DPI at one or more of the MDI producers. The findings of their investigations can be summarised as follows:
- a) As a new kind of product a whole cycle registration process has to be applied. It is an even more expensive and time consuming procedure than the one to be applied for change of propellant.
 - b) There is a need for purchase and installation of a totally different plant, including some special and very costly machinery for the production of very fine and homogenous powder.
 - c) The dosing units are not available in China. Their import would be expensive and installation of a plant to manufacture the dosing units would require substantial resources and involves patent right issues.
 - d) The current market price of the DPIs in China is about five times higher than the same of MDIs. This is a serious market obstacle in view of the weak purchasing power of many Chinese asthma patients.
 - e) A Japanese company is establishing a DPI factory in China to address the available niche market for DPIs. Currently, there seems to be no place on the market for another new (Chinese) producer.
 - f) In view of the above, the consideration of introducing DPI manufacturing in the present conversion process had to be dropped.

C Alternative excipient - Hydrofluoroalkanes (HFA)

- 46) HFA have similar properties as CFCs, however their chemical stability and polarity are slightly lower than that of CFCs. Table 9 below shows the comparison between HFA and CFCs in terms of the physical and chemical characteristics and their environmental properties.

Table 9. Comparison of Properties between Fluoroalkanes and CFCs

Property	CFC-11	CFC-12	CFC-114	HFA-134a	HFA-227
Chemical formula	CFCl ₃	CF ₂ Cl ₂	CF ₂ ClCF ₂ Cl	CF ₃ CFH ₂	F ₃ CHFClF ₃
Vapour pressure (kPa, 21.1 °C)	92.4	484	88.9	569 (20 °C)	3.99
Boiling point (°C)	24	-30	4	-26.5	-17.3
Density (g/ml)	1.49	1.33	1.47	1.22	1.41
ODP	1	1	1	0	0
GWP	4,000	8,500	9,300	1,300	2,900
Life time in the atmosphere (year)	75	111	7200	15	33

Table 10. Advantages and Disadvantages of using HFA for MDIs

	Advantages	Disadvantages	Comments
HFA	<ol style="list-style-type: none"> 1. Low inhalation toxicity 2. Higher chemical stability 3. High purity 4. No harm to ozone layer 	<ol style="list-style-type: none"> 1. Bad solvent, low polarity 2. High GWP - greenhouse effect 3. Higher cost 	<ol style="list-style-type: none"> 1. HFA may be used by the MDI aerosol producers in China as a potential substitute to CFCs

D Alternative Technologies

47) In recent years, international MDI producers did intensive research on the technology of substitution of CFCs and change of drug formulation. The substitute propellants currently used in the world are mainly HFA-134a and HFA-227a. Except for terbutaline, the CFCs used with all the other active ingredients could be replaced by HFA. The leading companies in the world such as Boehringer, Fisons, 3M, Glaxo and Riker have obtained relevant formulation patents, which cover the propellant system including components, co-solvent, hydrocarbon surfactant and fluoro-surfactant.

48) In contrast with the above, the results of our sector investigation show that Chinese MDI manufacturing enterprises are now preparing themselves for the process of CFCs replacement. It is reported that many issues still have to be resolved for introduction of Hydrofluoroalkane as propellants for MDIs:

- Co-solvent with Low Boiling Point.** Both tetrafluoroethane (HFA-134a) and heptafluoropropane (HFA-227a) have higher vapour pressure and are in gaseous state under normal atmospheric temperature. No Hydrofluoroalkane is available, which has the same high boiling point as CFC-11 does. Therefore, it brings challenges to design the formulation and production process. One of the solutions is to seek for proper solvents without toxicity or irritation but with certain volatility and good compatibility with Hydrofluoroalkane. Today, the commonly used co-solvents

include low-molecular-weight alkane (e.g. propane and butane) and low-molecular-weight alcohols (e.g. ethanol and isopropanol).

- b) **Surfactant Selection.** Surfactant is used to disperse medicament particles and lubricate the valve. As Hydrofluoroalkane has lower polarity than CFCs, it can not dissolve majority of surfactants. One solution is to identify surfactants with good solubility and compatibility with medicaments. Another solution is to add a co-solvent which can dissolve the surfactant.
- c) **Drug Characteristics.** Some medicaments easily form solvates in the new propellant system, thus increasing the tendency of crystal growth. Some poly-crystalline drugs (such as steroid hormone) are easier to undergo crystalline transformation and promote crystal growth. Thus, drug characteristics should be taken into account in formulation design, particularly in the design for suspended aerosols.
- d) **Valve Selection.** As Hydrofluoroalkane is chemically less stable than CFCs, valve components (e.g. airproof rubber and its additive) should be compatible with the new propellant. Similarly, valve components should not cause HFA to decompose. At present, several major valve companies such as Bepak, 3M and Valois conduct research on the valve system for Hydrofluoroalkane.
- e) **Alternative Actuator.** In case a medicament can not be formulated into suspended aerosol, it is generally made into solution aerosol. In general, solution aerosol has poorer atomisation effect. Decreasing vapour pressure of the canister results in bigger atomized particle size. Though increasing the pressure can reduce the particle size, it also causes majority of particulate medicaments to be accumulated at throat due to the bumping of particles arising from the increased initial speed. Thus, it is needed to design new actuators, which can both crash the particles and reduce the initial speed.

E Policy and Patent Issues

- 49) Phase out of CFC is the commitment made by the government of China. The obstacles include lengthy and costly drug registration, lack of funds and technologies.
 - a) Based on “The Drug Administration Law of the People's Republic of China”, change of excipient leads to the re-registration of the drug. Preparation of the technical dossier is required for the re-registration, for which lengthy and voluminous pharmaceutical and pharmacodynamic studies must be done.
 - b) Modification of production and market promotion of new drugs cost large amounts of money. It's a heavy burden for most of the MDI enterprises.
 - c) In addition, the patent issue is a major obstacle to conduct CFC phase out in MDI sector.
- 50) There are two major HFA MDI related patents in China. They cover the
 - a. formulation, which use HFA134a, HFA227 and their mixture as propellant for all the applications currently produced in China, and
 - b. co-solvent and surfactant as well.

51) The cost for the patent transfer is extremely high. It seems, however even more difficult and costly to develop new technologies. The detailed content of the patents are listed in the Table 11 below:

Table 11. MDI related patents in China

Patent Name	<u>CFC-free aerosol to cure the diseases in the respiratory system</u>	Patent Number	00133271.6
Publication Number	CN1296814	Date published	2001.05.30
Applicants	China Pharmaceutical University		
Inventor	Junshou Zhang, Li Ding, Yizhong You	International Application	

Patent Name	<u>New aerosol reagent containing polarized fluoride molecules</u>	Patent Number	01815467.0
Publication Number	CN1455663	Date published	2003.11.12
Applicants	AstraZeneca Co. Ltd.		
Inventor	P. Rogda	International Application	PCT/SE01/01606 2001.7.10

Chapter V Phase-out Strategy and Policy Framework

A Objectives

52) The main objectives of this plan are:

- a) To ensure sustained phase out of CFC consumption in China's MDI sector and the related CFC production of the Country;
- b) To maintain the phase-out momentum and to avoid risk in compliance with the Montreal Protocol for phase out of CFCs;
- c) To encourage new alternatives in China's MDI sector; introduce ozone friendly technologies and to maintain MDI production at the level to meet the clinical demands.

B CFC Consumption Phase-out Schedule

53) Earlier China planned to meet the phase out schedule of CFCs for protection of the Ozone layer and compliance with Montreal Protocol as indicated in Table 12.

Table 12. Current phase out control targets for CFC consumption in MDI sector (tons ODP)

Maximum Allowable CFCs consumption	2006	2007	2008	2009	2010
National level	13,500	7,400	550	550	0**
MDI sector	280.9		550	550	0
Max allowable CFCs production *	13,500	7,400	550	550	0

* Appendix 2-A. The targets, and funding, AGREEMENT BETWEEN CHINA AND THE EXECUTIVE COMMITTEE FOR THE CFCS/CTC/HALON ACCELERATED PHASE-OUT PLAN, ANNEX XII.39 Policies, procedures, guidelines, criteria.

** Except the essential use agreed by the parties.

54) The most important prerequisites of the phase out of CFCs in the MDI sector in China is that it should not impose any negative impact on the clinical demand and supply situation for MDI products, i.e. it should enable China to maintain its MDI production at a level to meet the clinical demand by quality and quantity and at acceptable prices.

55) In China, the average growth rate of CFC containing MDI production over the past four years amounted to 22%/year; the CFC consumption grew at a similar rate. This trend will continue in the coming years unless it is curbed by conversion of MDI producers to new technologies replacing CFCs in the production of MDIs to other alternatives.

- 56) Due to the limited time before 1 January 2010, when according to the original CFC phase-out schedule the use of virgin CFCs should be stopped in all sectors, it will be not possible for the MDI producers to complete the drug re-registration process. Thus, CFC will have to be used in 2010 and onwards.
- 57) In case the project is approved by the 55th ExCom, the majority of the enterprises will be in a position to complete the phase out of CFC by end 2013.
- 58) Some specialty products (Chinese medicines) do not have known alternative technologies. While the companies will continue the research and development work in this field, it might happen that small quantities (below 10 tonnes annually) of CFC would be required for some period of time. The Government and the enterprises will make efforts to satisfy these needs from stockpiled CFCs.

C Transitional Arrangement and Need for Essential Use Exemption

- 59) China is committed to phase out CFCs as soon as practically feasible taking into consideration the above situation and a reasonable project implementation time schedule.
- 60) Based on the current survey, the consumption for the whole MDI sector will be steadily growing.
- 61) Table 13 shows the strategy foreseen at the current stage for the phase out process and the likely essential use exemption requirement of the Government of China.
- 62) The unconstrained growth and phase out schedule proposed in this plan are contained in Table 13.

Table 13. Unconstrained growth and phase-out plan of CFC consumption in China's MDI sector

Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Output, (Million cans)	12.03	15.87	18.86	21.59	26.29	32.01	38.97	47.45	57.77	70.34	85.64
Unconstrained CFC consumption, MT	182.5	243.7	280.9	341	414.6	504.8	614.6	748.3	911.1	1,109.3	1,350.6
CFC Consumption if project is approved at 55th ExCom	182.5	243.7	280.9	341	414.6	504.8	614.6	748.3	650.0	400.0	0

- 63) The impact of the project is well illustrated on Fig.10, which compares the unconstrained growth scenario with the proposed phase out schedule.

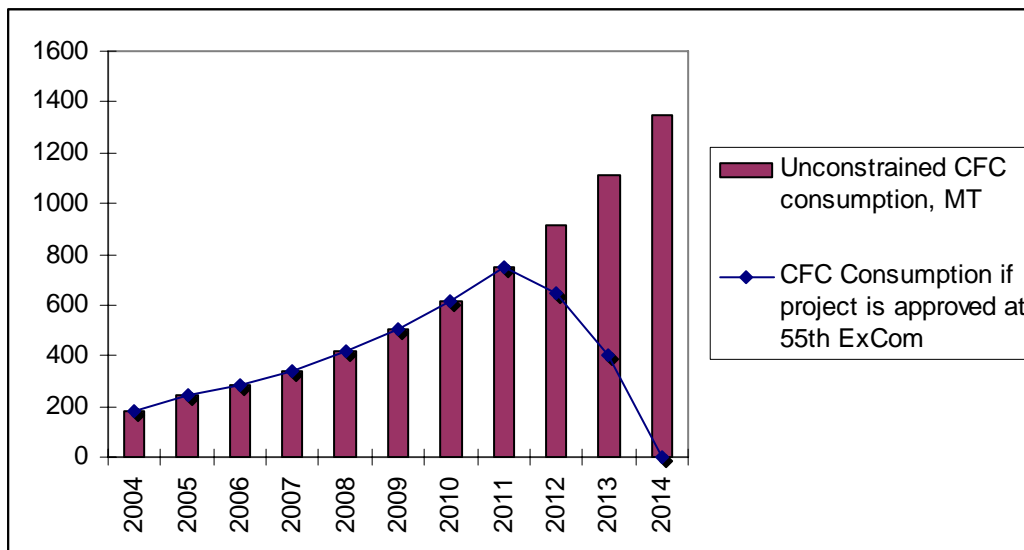


Fig. 10: Unconstrained growth and proposed CFC phase out schedule in China's MDI sector

D CFC production during 2008-2013

- 64) It is crucial to cover the domestic demand of the MDI sector after 2008 with freshly produced CFCs. Since this MDI sector plan is the last CFC phase out plan in China, during the period 2008-2013, the CFCs production for domestic sales will be limited for MDI sector and possible essential uses only.
- 65) Taking into consideration that China has the capacity to cover this demand, the Government proposes to integrate the necessary requirements in the Agreement between China and the Executive Committee for the CFCs/CTC/Halon Accelerated Phase-Out Plan (ANNEX XII.39 Policies, Procedures, Guidelines and Criteria) and set up a new CFC production plan for the duration of the implementation of this project.
- 66) If, the project is approved by the 55th ExCom the conversion process will show its first results in 2012 through completing some phase out project(s) by end 2011. In 2012 and 2013 further reductions in CFC consumption will occur and upon completion of the project in 2013, the complete phase-out of the use of freshly produced CFCs will be achieved. Thus, considering the implementation schedule of this sector plan as well as the current consumption and the export demand, the maximum production quota to be issued will be 550 tonnes/year in 2008 and 2009 respectively. Currently, if no other decisions will be taken by the Parties in the future, it is planned to cease export as of end 2009 and based on future approval of the Meeting of the Parties the production is planned to be maintained in the period 2010-2013 as indicated in Table 14.

Table 14. Planned CFC demand and related production in China

	2008	2009	2010	2011	2012	2013	2014
Production approved	550	550	0	0	0	0	0
Consumption of the MDI sector*	415	505	615	748	650.0	400.0	0**
Exports planned	135	45	0	0	0	0	0
Additional production required*	0	0	615	748	650.0	400.0	0*

*Essential use exemption for 2010-2013 to be requested from the Parties

**The possible essential use exemption for this and following years will be considered based on the progress of the project

E Policies and Measures

- 67) **Adaptation of ODS licensing system to control CFCs consumption in the MDI sector.** To propose, based on current ODS licensing system, a monitoring and evaluation plan for CFCs consumption control in the MDI sector, including review of enterprise information, issuance of CFCs licenses and quotas for consumption, as well as regular site supervision. The key points of the licensing system include (1) no trade in CFCs is allowed between the licensed enterprises and the non-licensed ones; (2) no change of licenses from one type of CFC to another one is allowed between the enterprises holding licenses for different ODS substances; (3) no purchase of CFCs from other licensed enterprises is allowed exceeding the issued quota; (4) all transactions and trade must be approved by MEP, and (5) all transaction and trade process must be entered into the information management system.
- 68) **Issue CFCs consumption ban for MDI sector.** The National Leading Group of Ozone Layer Protection under the State Council will issue a ban on CFCs consumption to ensure that all CFC producers and consumers are informed and prepared. The date of issuance of the CFC ban for the MDI sector will follow the date of approval by the ExCom of the MDI sector plan.
- 69) **Strengthen supervision and capacity of sector plan implementation.** A monitoring system will be developed for the implementation of the MDI sector plan. It will track the implementation of the sector plan by (1) review of CFCs consumption data and information reported by the enterprises, (2) review of transactions and trade processes of CFCs, and (3) timely adjustment of CFCs quotas and its license holders. A supervisory and monitoring team will be established.
- 70) **Strengthen formulation of technical standards for the CFCs alternatives.** China will revise the relevant technical standards and codes of CFCs alternatives based on its production and alternative technology development and the progress of CFC phase out in MDI sector.
- 71) **Policies Ranging over the Transition Period (after 2012).** China will stop using CFCs as excipients for MDI as of end 2012. That means that there will be no virgin CFCs produced for the MDI sector. After this date, MDI manufacturers can (in case of necessity) use only stockpiled CFCs. However, using of stockpiled CFCs would be under stringent supervision of the government. SFDA will make

the necessary transitional arrangements. When receiving the application from the manufacturers for using stockpiled CFCs during the transition period, SFDA and MEP will review and approve the applications.

- 72) **Public awareness and education.** China will continue to strengthen the education and training programme for enterprises, public, and those who are responsible for implementation of ODS policies, especially stakeholders in the MDI sector.
- 73) **Supervision after 2012.** After 2012, SFDA and MEP will monitor non-CFCs aerosol products so as to guarantee its safety and efficacy of clinical application.

Chapter VI Incremental Cost Calculation

- 74) The incremental costs for the MDI sector have been calculated taking into consideration:
- a) MLF guidelines,
 - b) Activities identified for conversion of CFCs based technologies to no-CFC based ones;
 - c) Remaining eligible consumption of CFCs in the sector;
 - d) Enterprise level incremental conversion costs for all the identified eligible enterprises, according to their activities;
 - e) Identified Technical Assistance activities;
 - f) Possible industrial rationalization for enterprises without CFC-MDI production or very low production in baseline year.

A Incremental Costs Identified

Incremental Cost at Enterprise Level

- 75) The conversion activities at enterprise level include seven items:
- a) Research & Development of non-CFC MDIs (including technology screening and formulation development);
 - b) Adaptation of new alternatives and technologies including procurement of rights to use the related patents;
 - c) Registration of the new products;
 - d) Modification of existing facilities;
 - e) Training to meet the new production requirements;
 - f) Validation of new production process ;
 - g) Incremental operating cost of materials and utilities for production;
 - h) Promotion of new products on the market.
- 76) In order to reduce the cost of the project to the Multilateral Fund two kinds of costs of the conversion process, were excluded from the IC requested from MLF and will be paid by the beneficiaries as their counterpart contribution, namely:
- a) Cost for Research & Development of non-CFC MDIs (including technology screening and formulation development), and
 - b) Cost for marketing and promotion of new products.
- 77) The relationship between conversion activities at enterprise level and the IC requested from MLF are shown as follows:

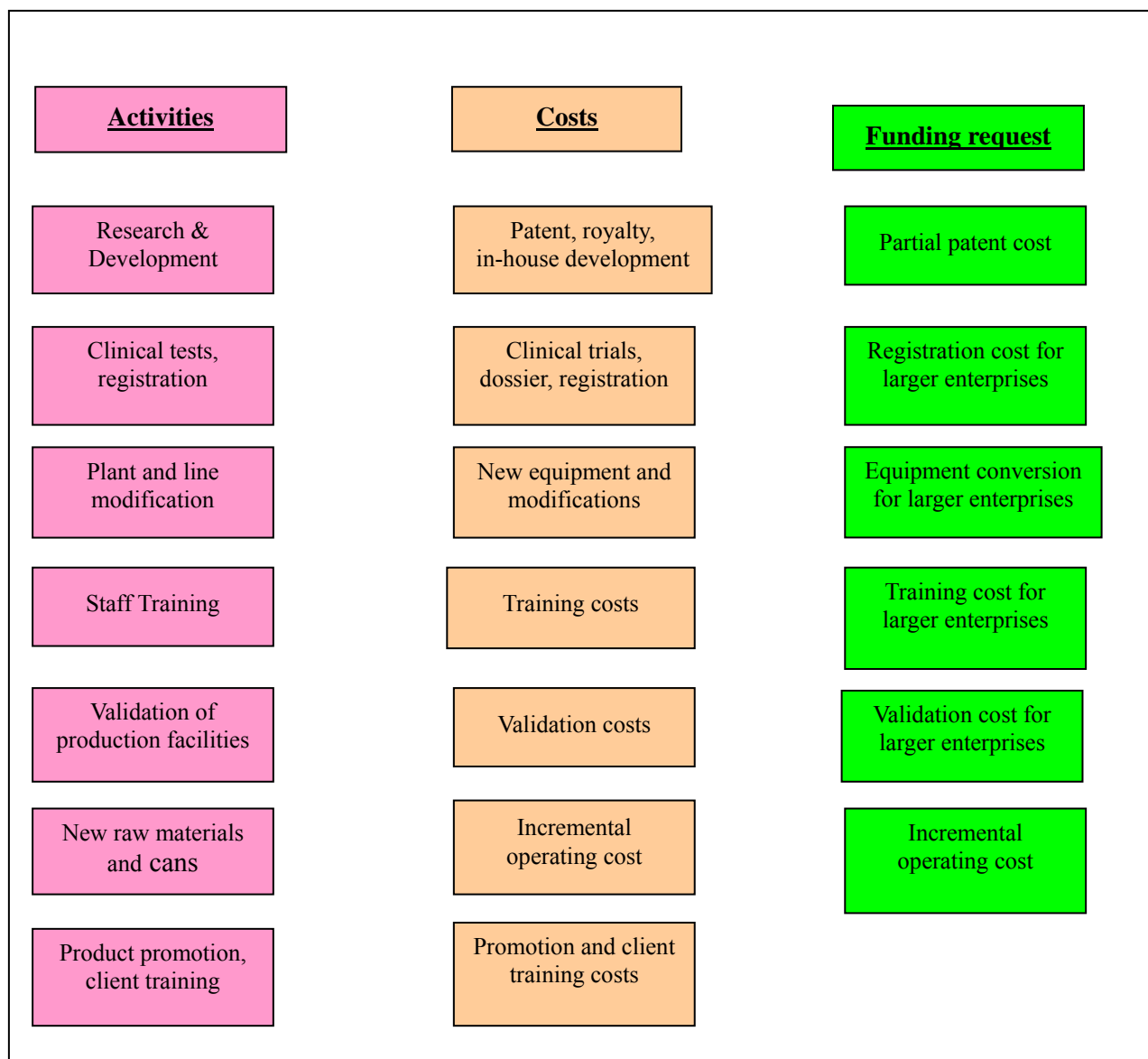


Fig. 11: The relationship between conversion activities at enterprise level to the incremental cost items requested from MLF

- 78) **Cost for research & development of new formulation.** Since research and development of the new formulations of MDI would be done by the MDI producers themselves, or would be bought from the patentees, the cost for the new formulation could be very different. If the MDI producers buy the technologies from the patentees, royalty fee will be required based on their annual production. These costs, according to the information received, are very high and will substantially increase the cost of Research & Development of the new formulation of MD Is. For this reason at least partial compensation is sought for the purchase of unavoidable patents valid in China.
- 79) **Cost for marketing and promotion of new products.** CFC-MDIs are familiar to the patients and have been widely used in China. The non-CFC MDIs have some different properties, thus in addition to the normal advertisement and sales promotion extra efforts are needed from the MDI producers to

promote their non-CFC-MDI products on the market. This campaign has to address both the doctors and the patients. However, these kinds of costs are difficult to be estimated at enterprise level.

Incremental Cost for Technical Assistance

80) Beside the enterprise level costs, as described in Section 4.3, there are a series of activities of technical assistance nature, like: capacity building, training, data collection, public awareness, development and implementation of policies, progress monitoring, performance verification, and supervision.

B Industrial Rationalization and Cost Effectiveness – Implementation of ExCom Decision 53/23

81) In its decision 53/23(b) the ExCom decided to:

“To request the Government of China and UNIDO to take into consideration industrial rationalization and cost-effectiveness when resubmitting a revised project proposal.”

82) The decision of f the ExCom was implemented as follows:

- a) During the site visits and data survey carried out early 2008, SFDA and MEP discussed with related stakeholders of mainly smaller and less viable enterprises to seriously consider their participation in an industrial rationalization process. It was found that no enterprise is willing to abandon their MDI production lines and production licenses on a voluntary basis.
- b) As a next step, the possibility of forced rationalization was investigated. It was found that the within the current legal framework of China there is no legal tool to enforce closure or consolidation of enterprises or some of their production lines with the aim of industrial rationalization in the MDI sector.
- c) Thus, the only viable option to curb the production of small MDI producers through consolidation is to use market forces in the form of incentives and disincentives. In order to achieve this aim the following measures are proposed in this sector plan:
 - i) For enterprises without production in baseline year, no ICC, IOC, cost for validation, training is being requested and will be paid, except for only 20,000 US\$/licence, which equals to a partial cost compensation of giving up their production license;
 - ii) For the enterprises with very low production in baseline year representing max. 5 tonnes annual CFC consumption, very much reduced ICC and IOC along with only US\$ 20,000/licence is being requested and will be paid as partial compensation for registration or abandoning their production licenses;

The above two measures will be applied for 44 of the total 77 production licences.

- iii) The ICC was calculated in several categories. Thus, enterprises with an annual CFC consumption:

- (1) Below 5 tonnes, i.e. those, which demonstrated quite low production in baseline year, will receive only limited ICC amounting to US\$ 50,000/line equal to partial compensation of the cost of destruction of the CFC based MDI manufacturing equipment and abandoning CFC based MDI production. There will be 10 enterprises in this category (63% of the total);
 - (2) Between 5-50 tonnes/year the ICC compensation will be reduced to US\$ 200,000. This will affect two enterprises.
 - (3) The remaining four enterprises will receive a compensation of US\$ 680,000 (3 companies with CFC consumption between 50 tonnes and 100 tonnes) and US\$ 1,320,000 (one company with consumption above 100 tonnes) for the conversion of their existing facilities.
- iv) The cost of acquisition of patents will be compensated partially and mainly to the large enterprises only. Small enterprises would hardly benefit from MLF compensation requested for acquisition of patents.
- d) It is strongly believed that if the sector plan is implemented in this manner, some enterprises could face difficulties in the future to raise funds for the implementation of conversion process and would have to consider giving up as an independent MDI producer. Others could decide to involve non-MLF financial resources to cover the total cost of conversion. This will lead to concentration of MDI production in China at a lower number of enterprises with larger capacity and higher economic and technical viability.
- e) The said approach, if approved by the ExCom, will substantially improve the cost-effectiveness of the sector plan in addition to the sectoral level techno-economic benefits, which are expected to be achieved through eventual rationalization and consolidation. Thus, the decision 53/23 of the ExCom will be fulfilled.

C Basic Assumptions for the Incremental Cost Calculation

Eligibility Criteria for Incremental Cost Calculation

- 83) There are three factors impacting eligibility: (1) the installation date of the production facility; (2) ownership of the company and (3) export ratio of MDI production..
- a) **The installation date of the production facility**. The cut-off date of 25 July 1995 normally applied for other CFC consuming sectors should not be applied to the MDI sector, because:
 - i) in 1995 no alternative technology was available;
 - ii) as in many other countries, even until 2006 it was not yet clear for SFDA if CFC consumption in MDI production could be phased out in China at all.

Therefore, it is suggested to apply as cut-off date 30 November 2004, when the preparatory assistance project for the MDI sector plan was approved.

- b) **Ownership of the company.** There were four enterprises with foreign ownership in 2007, which were not considered in the calculation of the incremental costs. The baseline consumption (2007) of these enterprises with foreign ownership is 18 ODP tonnes ODP.
- c) **Export ratio of MDI production.** As mentioned in Section F, Chapter II, China imports and exports MDI products. The export ratio is high at the four foreign ownership enterprises, due to their partnership arrangements. However, others, especially the 100% domestic ownership enterprises, export very small amounts of MDIs (well below 10%) due to the limitations of registrations of their medical products in foreign countries. They carry out no export to non A5 countries. Therefore, no deduction of export ratio of MDI production is considered.

Key Assumptions for Incremental Operating Cost Calculation

- 84) There are several factors, which have bearing on the incremental cost, e.g. (1) the alternative technology selected and (2) the period for calculation of incremental operating cost.
- 85) **Alternative technology.** According to the survey, the majority of Chinese MDI manufacturers may use HFAs (e.g. HFC-134a, HFC-227) as CFCs alternatives after screening a variety of technologies. As discussed in Chapter IV, based on the recent sector investigation and the literature review of international experience, HFA-134a will be the first choice for most MDI producers. Besides, conversion to HFA is financially more feasible in China than the DPI route, because, as described in Chapter IV B, paragraph 45.
- 86) **Period for calculation of incremental operating cost.** In the approved MLF projects different periods are used for the calculation of incremental operating costs. In order to reduce the total cost of the project only 1 year was used in the calculation of the request for incremental operating cost compensation.

D Incremental Investment Cost for Conversion of MDI manufacturers

Preparation of Technical Dossier Required for non-CFC MDI Registration

- 87) On the basis of preliminary screening tests, the MDI producer shall determine the substitution route according to the specific conditions (such as the properties and cost of alternative product), and apply for approval of modification of the medical excipient according to the Law of Drug Administration of PRC, the *Regulations on Drug Registration*, and the application requirement of the substitute. According to the *Regulations on Drug Registration*, different sets of technical documents shall be submitted corresponding to the following two cases of modification of medicinal adjuvant:
 - a) the excipient was already approved in China for medical applications;
 - b) new medicinal excipient to be used first time in China (to register as new medicinal adjuvant, and determine the application type according to the actual conditions of the aerosol producers).
- 88) Table 15 lists the content of the dossier for application for change of excipient to a new one, already within the National Standards.

Table 15. Technical Documents on Registration Application for Changing the Adjuvant of Medical Aerosol to a new one, already within the National Standard

Modification Item	Document Required
Excipient of medical requirement approved for other products	1. Copy of drug approval certification documents and their appendix
	2. Certification documents
	3. Sample of revised <i>Package Insert</i> enclosed with detailed revision illustrations
	4. Sample of revised package/ label enclosed with detailed revision illustrations
	5. Documents of pharmacological research
	6. Real sample of drug
	23. Research documents & literature of genital toxicity research
	24. Research documents & literature of carcinogenesis research
	25. Domestic and relevant foreign overview of clinical trial documents
	26. Plan & scheme of clinical trial
	27. Clinical researcher manual
	28. Sample of Informed Consent, and approval document of Ethics Committee.
	29. Clinical Trial Report

89) Table 16 lists the content of dossier for Drug Registration Application for the Use of New Excipients.

Table 16. Technical Documents required for Registration Application for Modifying the Adjuvant of Medical Aerosol

Modification Item	Document Required
New medicinal adjuvant	1. Name & naming basis of medicinal adjuvant
	2. Certification documents
	3. Objective & basis of topic establishment
	4. Summary & assessment of main research results
	5. Sample of <i>Package Insert</i> , drafting illustrations, and latest reference
	6. Design sample of package & label
	7. Overview of pharmacological research documents
	8. Research documents & literature of production process
	9. Research documents & literature verifying chemical structure or compositions
	10. Research documents & literature of quality research work
	11. Research documents & literature of drug-related compatibility
	12. Standard draft and drafting illustrations, with standard product or control product
	13. Inspection Report on 3 continuous batches of samples
	14. Research documents & literature of stability research

	15. Selection basis & quality standard of packing materials and containers in direct contact with medicinal adjuvant
	16. Overview of pharmacological & toxicological research documents
	17. Research documents & literature of pharmaco-dynamics influence on to-be-applied drug
	18. Research documents & literature of general pharmacological research
	19. Research documents & literature of acute toxicological research
	20. Research documents & literature of long-term toxicological research
	21. Research documents & literature of main local/systemic administration -related special safety test, such as allergy (local, systemic, and light), hemolysis, and local irritability (blood vessel, mucosa, muscle)
	22. Research documents & literature of mutagenesis research
	23. Research documents & literature of genital toxicity research
	24. Research documents & literature of carcinogenesis research
	25. Domestic and foreign relevant overview of clinical trial documents
	26. Plan & scheme of clinical trial
	27. Clinical researcher manual
	28. Sample of Informed Consent, and approval document of Ethics Committee.
	29. Clinical Trial Report

90) Table 17 lists the dossier for Drug Registration Application for Change in Dosage Form.

Table 17. Technical Documents for Registration Application for Modifying the Drug Dosage Form of Medical Aerosol

Modification Item	Document Required
Modification of dosage form of drugs already sold on the Chinese market, not modifying their administration route	1. Drug name
	2. Certification documents
	3. Objective & basis of topic establishment
	4. Summary & assessment of main research results
	5. <i>Package Insert</i> , drafting illustrations, and relevant reference
	6. Design sample of package & label
	7. Overview of pharmacological research documents
	8. Research documents & literature of production process for raw drugs, and research documents & literature of prescription and process for preparation
	9. Research documents & literature verifying chemical structure or compositions
	10. Research documents & literature of quality research work
	11. Drug standard and drafting illustrations, with standard product or control product
	12. Inspection Report on samples

	13. Origin, quality standard, and Inspection report of raw drugs and adjuvant
	14. Research documents & literature of drug stability research
	15. Selection basis & quality standard of packing materials and containers in direct contact with drug
	16. Overview of pharmacological & toxicological research documents
	17. Research documents & literature of special safety test, such as allergy (local, systemic, and light), hemolysis, and local irritability (blood vessel, mucosa, muscle)
	18. Research document & literature other than clinical pharmacokinetics research
	19. Domestic and foreign relevant overview of clinical trial documents
	20. Plan & scheme of clinical trial
	21. Clinical researcher manual
	22. Sample of Informed Consent, and approval document of Ethics Committee.
	23. Clinical Trial Report

- 91) The cost of preparation of the technical dossier will depend on the application of the selected propellant and the production process. It can not be accurately calculated at the current stage. Therefore, Table 18 is the best estimate based on past experience. Six key items are included for the estimation, though there are some other items as well, which were not included.
- 92) In accordance with the relevant regulations, each manufacturer has to make registration and get its license for their new MDI aerosol product based on its formulation and production process, though some products may also be produced by multiple manufacturers. Therefore, if all enterprises would wish to convert their MDIs they would have to make re-registration applications for new licenses for a total of 77 MDIs (excluding 17 application in foreign enterprises and 10 applications in domestic enterprises, which confirmed that they do not to produce MDIs any longer). Referring to Table 7, Section F in Chapter II for the 33 licenses in production in 2007 the US\$ 195,000 will be requested from MLF, as detailed in Table 18. For licenses not in production in 2007 companies will only be compensated at the level of US\$ 20,000 to give up their licence rights.

Table 18. Cost of Preparation of Technical Dossier for Registration

No	Application Materials	For Licences in Production in 2007 (US\$ \$)	For Licences Not in Production in 2007 (US\$ \$)
1	Study of Production Process	12,500	0
2	Study of Quality	7,500	0
3	Pharmacological Study	20,000	0
4	Toxicological Study	20,000	0
5	Special safety Test	15,000	0
6	Clinical Test	120,000	0
7	Compensation to abandon the licence		20,000
	<i>Subtotal</i>	<i>195,000</i>	<i>20,000</i>
	Number of License with Production in 2007	33	44
	<u>Sub – Total</u>	<u>6,435,000</u>	<u>880,000</u>
Grand Total			7,315,000

Patent Cost

93) The investigation of the patent issues shows that the patent cost for the transfer and/or application of HFA based MDI technology is extremely high. There are at least two relevant patents valid in China. To reduce the total budget for this project, it is proposed that the enterprises will be responsible to develop the technology and acquire the required patent rights. However, at least a limited patent cost compensation at the level of 2.6 million US\$ is requested for all the eligible MDI producers in total..

Cost of Modification of Existing Production Facilities

94) The requested incremental cost for modification of existing facilities shown in Table 19 is based on the assumption that these manufacturers will convert to HFA-134a excipient. As HFA-134a is not compatible with the hermetic seals and materials and some components of the existing facilities, it is necessary to modify or replace the existing pumps, pipes, hermetic pipe fittings, valves as well as the filling & charging equipment and associated instruments.

95) Based on information in Table 7, Section F in Chapter II, currently, 19 enterprises produced CFC based MDIs in baseline year 2007, among which only 16 enterprises with production lines are of 100% Chinese ownership. The cost of conversion of these 18 production lines in the 16 Chinese enterprises will be requested from the MLF.

96) The cost for converting/replacing of the drug mixing tank, piping, valves, sealings, labour etc. for the enterprise with annual CFC consumption of

- a) More than 100 tonnes, will be calculated at USD 800,000/line.
- b) Less than 100 tonnes and more than 10 tonnes, cost for the modification of the same items will be compensated at the level of as USD 420,000/line.
- c) Less than 10 tonnes, the compensation for these changes are calculated at USD 100,000/line.

d) Less than 5 tonnes, a compensation of US\$ 25,000 will be paid for destruction of the equipment and abandoning CFC based MDI production.

97) The cost of conversion/replacement of filling/crimping line equipment is also classified into three categories:

- a) USD 520,000 for those with more than 100 tonnes of annual CFC consumption;
- b) USD 260,000 for those with more than 50 tonnes of annual CFC consumption;
- c) USD 100,000 for those with more than 5 tonnes of annual CFC consumption.
- d) Less than 5 tonnes, a compensation of US\$ 25,000 will be paid for destruction of the equipment and abandoning CFC based MDI production.

Table 19. Cost of Modification of Existing Facilities

Company Code	Company Name	CFC Consumption (kg)	Output (can)	Cost for Mixing Tank and Related (US\$)	Cost for Filling/ Crimping Line (US\$)	Total (US\$)
2	Beijing Haiderun Pharmaceutical Co., Ltd.	540	48,306	25,000	25,000	50,000
8	Guangzhou Dongkang Pharmaceutical Co., Ltd.	1,780	141,360	25,000	25,000	50,000
9	Guiyang Dechangxiang Pharmaceutical Co., Ltd.	320	20206	25,000	25,000	50,000
11	Harbin Hengchang Pharmaceutical co.	412	23034	25,000	25,000	50,000
16	Heilongjiang Tianlong Pharmaceutical Co. Ltd	240	16,000	25,000	25,000	50,000
18	Jinan Weiming Pharmaceutical Co., Ltd.	73,260	5,550,000	420,000	260,000	680,000
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	26,100	2,216,150	420,000	260,000	680,000
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	175,178	9,295,910	800,000	520,000	1,320,000
22	Shandong Lino Kefeng pharmaceutical Co.	100	10,000	25,000	25,000	50,000
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	4,115	169,400	25,000	25,000	50,000
25	Pharmaceutical Factory of Shanxi Medical University	637	32,785	25,000	25,000	50,000
28	Shanghai Pharmaceutical Co., Ltd Sine Pharma Laboratory	20,656	1,289,879	420,000	260,000	680,000
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	3,200	195,560	25,000	25,000	50,000
35	Guangdong Tongde Pharmaceutical Co. Ltd	6,070	550,000	100,000	100,000	200,000
36	Chongqing Kerui Pharmaceutical Co., Ltd.	9,767	575,520	100,000	100,000	200,000
37	Zigong Chenguang Pharmaceutical Co., Ltd.	100	2,300	25,000	25,000	50,000
Grand Total						4,260,000

Validation Process

- 98) *Provisions on Quality Management for Pharmaceutical Production* (SFDA #9,) was issued by SFDA in 1998 and is effective as of 1 August 1998. Article 57 stipulates that validation of pharmaceutical production shall consist of
- a) Validation of the workshop,
 - b) Validation of installation of facilities and equipment,
 - c) Validation of facility operation and performance, and
 - d) Validation for products.
- 99) Article 58 states that re-validation shall be carried out in case of a change of main quality related factors such as production process, quality control method, main excipients and production facility.
- 100) In accordance with *Guidance of Validation of Pharmaceutical Production* (2004), Drug production validation includes prospective validation, concurrent validation, retrospective validation and revalidation. Due to the replacement of propellant or change of dosage form, new production equipment, production technology and product application will be introduced.
- 101) Therefore, it is necessary to carry out prospective validation before commercial production could start. The purpose of prospective validation is to evaluate and confirm the reproducibility and reliability of production process.
- 102) Concurrent validation has to be conducted after the start of commercial production in order to obtain data from the actual process operation, so as to prove that it fulfils the expected requirements.
- 103) After normal production for a certain period of time of normal commercial production retrospective validation is to take place to collect statistical data and make trend analysis, thus discovering the worst conditions for the process operation and indicating the risk of potential malfunctions.
- 104) Revalidation includes compulsive validation, alternate validation and regular validation

(1) Validation for Changing Excipient (Alternative Propellant)

- 105) Changing of excipient requires prospective validation, concurrent validation, retrospective validation and revalidation. The validation includes:
- a) Validation of workshop;
 - b) Validation of public utilities;
 - c) Validation of computer system;
 - d) Validation of production equipment;
 - e) Validation of production process;
 - f) Validation of personnel;
 - g) Validation of other relevant items.

(2) Validation of Workshop, Public Utility System and Computer System

- 106) Validation of workshop is needed to confirm that 1) the reconstructed workshops is in compliance with design standards; 2) the flow of people and materials is proper; 3) workshop cleanliness is up to the level of 300,000 grade.
- 107) Validation of public utilities consists of six items, namely, heating, ventilation, air conditioning, discharging system, cooling system and propellant supply system.
- 108) Validation of computer system consist of four items, namely, batch record/SOP management system, material management system, lab system and the management system for production/engineering spare parts.

(3) Validation of Production Equipment

- 109) Validation of production equipment comprises six items, namely, weighing scales, containers, valve cleansing equipment, and compound vessel system, filling equipment, weight inspection system and spray inspection system.

(4) Validation of Production Process

- 110) Validation items for dispensing preparation includes: temperature of liquid product in compound vessels, particle sizes and homogenization of the drug liquid.
- 111) Validation of cleaning effect of containers: various impurities placed into the container should be totally removed by cleaning.
- 112) Validation items for filling process include appearance, filling weight and leakage. At least three batches shall be inspected. Samples shall be taken from different places to check the appearance, filling weight, active ingredient and leakage.
- 113) Validation items for weighing equipment include weighing accuracy and elimination of under-weighed and over-weighed samples.
- 114) Validation items for timing of product inspection include leakage and shot weight per actuation. Different inspection times shall be selected to test the leakage and the shot per actuation so as to find out the best inspection time.
- 115) Validation item for spray inspection include the performance of spray and elimination of samples that don't spray or don't spray continuously.
- 116) Validation of metered aerosols is done based on the product quality standards. The items include validation of appearance, active ingredient per actuation, quantity of actuation per canister, shot weight per actuation, spray distribution, microbes, etc. At least three batches of samples shall be inspected with validated sampling and analysis methods to ensure that finished products are produced steadily in compliance with product delivery standards.
- 117) Validation items for cleanliness include the cleanliness of compound vessels and filling lines. There shall be no cross-contamination between different batches. After cleaning of the filler, the contents of raw medicinal material, water and solvent shall be measured, to make sure that no active medicinal material or solvent remained.

(5) Validation for Personnel and Other Relevant Items

118) Validation for personnel consists of establishment of filing system for each person engaged in aerosol production, including records for training, health, safety and personnel performance, etc.

119) Validation for other relevant items includes document recording, instrument calibration, preventative maintenance, production areas and area for changing clothes as well as waste cleansing and sterilization.

(6) Validation for Change in Dosage Form

120) For change in dosage form, it is required to conduct prospective validation, concurrent validation, retrospective validation and revalidation. The validations are basically the same as those for Part A, except that there are some differences in validation items for finished product. Validation for metered aerosol includes appearance, total times of actuation per canister, shot weight per actuation, active ingredient per actuation, spray distribution, variation of filling amount (filling amount) and microbes, etc. At least three batches of samples shall be inspected with validated sampling and analysis methods to ensure that finished products are produced steadily in compliance with product delivery standards.

121) There are 18 eligible production lines in 16 eligible enterprises, which had MDI production in 2007. Cost for production validation is detailed in Table 20.

Table 20. Cost of Production Validation

No.	Item	Content	Expenses (US\$)
1	Equipment	Scales, Containers, Valve Cleansing Equipment; Compound Vessel System; Filling & Charging Equipment; Weight Checking System; Spray Checking System	12,500
2	Production process	Liquid Drug Processing, Cleaning effectiveness for Containers; Filling Process; Weight Checking System; Product Checking Time; Spray Checking; Finished Products; Cleaning Effectiveness.	20,500
3	Others	Workshop; Public Utilities; Computer System; Others	7,000
	<i>Subtotal for one production line</i>		<i>40,000</i>
	Number of production lines at 16 enterprises with production in 2007		18
	Grand Total, Validation		720,000

(7) Staff Training

122) Due to the introduction of new substitutes, it is necessary to provide training for the staff of the manufacturers. Those people who should receive training include quality control technicians, operators, recorders, engineers, management staff and those working for procurement, transportation

and maintenance. It is estimated that each manufacturer has 20 for production and 40 for the other areas.

Table 21. Cost for Staff Training

	Production Staff	Other Staff	Public Training
Number of Trainees	20	40	10,000
Unit cost (US\$/person)	125	375	
Subtotal (US\$)	2,500	15,000	
<i>Subtotal of one production line (US\$)</i>			<i>27,500</i>
Number of eligible enterprises with production in 2007			16
Grand Total, Training (US\$)			440,000

E Incremental Operating Cost

123) The calculation is based on the consumption, production and cost data collected from manufacturers during the survey undertaken by NICBP, SFDA, MEP and UNIDO. On the recommendation of the Secretariat the calculation IOC was revisited. As indicated in Paragraph 87, in the calculation of IOC one year was selected for the period of compensation. IOC is calculated based on the CFC consumption and production output of the year preceding the submission of the document, i.e. in 2007. The price differences for HFA MDIs and CFC MDIs are shown in Table 22.

Table 22. Price difference for HFA products and CFC products

Item	Original Product (CFC as propellant)		Product after Conversion (HFA-134a as propellant)	
	US\$/kg	Unit Cost (US\$/can)	US\$/kg	Unit Cost (US\$/can)
1. propellant	3.43		7.38	
2. Packaging				
Canister		0.169		0.175
Valve		0.048		0.113
<u>Subtotal for packaging</u>		<u>0.217</u>		<u>0.288</u>

124) In the process of IOC calculation foreign ownership enterprises were excluded.

125) Literature reviews indicate that on average, HFA MDI uses 30% less propellant than a CFC MDI.

126) The calculation for each enterprises based on the above parameters is shown below in Table 23. The total IOC request is US\$1,989,502.

Table 23. Enterprise level IOC Calculation

Company Code	Company Name	Year of Establ.	CFC Consumption (kg)	IOC, Propellant,	Output (can)	IOC, Can, US\$	Total IOC
2	Beijing Haiderun Pharmaceutical Co., Ltd.	1978	540	937	48,306	3,430	4,367
8	Guangzhou Dongkang Pharmaceutical Co., Ltd.	1988	1,780	3,090	141,360	10,037	13,127
9	Guiyang Dechangxiang Pharmaceutical Co., Ltd.	1979	320	556	20206	1,435	1,990
11	Harbin hengchang Pharmaceutical co.		412	715	23034	1,635	2,351
14	Henan Xinxin Pharmaceutical (Group) Co., Ltd.	1982	0	0	0	0	0
15	Henan Zhongfu Pharmaceutical Co., Ltd.	1992	0	0	0	0	0
16	Heilongjiang Tianlong Pharmaceutical Co. Ltd		240	417	16,000	1,136	1,553
18	Jinan Weiming Pharmaceutical Co., Ltd.	1979	73,260	127,179	5,550,000	394,050	521,229
19	Penglai Nuokang Pharmaceutical Co.,Ltd.	1993	26,100	45,310	2,216,150	157,347	202,656
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	1993	175,178	304,109	9,295,910	660,010	964,119
22	Shandong Lino Kefeng pharmaceutical Co.		100	174	10,000	710	884

24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	2001	4,115	7,144	169,400	12,027	19,171
25	Pharmaceutical Factory of Shanxi Medical University	1994	637	1,106	32,785	2,328	3,434
28	Shanghai Pharmaceutical (Group) Co., Ltd Sine Pharma Laboratory	1982	20,656	35,859	1,289,879	91,581	127,440
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	1965	3,200	5,555	195,560	13,885	19,440
35	Guangdong Tongde Pharmaceutical Co. Ltd		6,070	10,538	550,000	39,050	49,588
36	Chongqing Kerui Pharmaceutical Co., Ltd.	1975	9,767	16,956	575,520	40,862	57,817
37	Zigong Chenguang Pharmaceutical Co., Ltd.	1981	100	174	2,300	163	337
38	Jiangsu Tianji Pharmaceutical Co., Ltd.		0	0	0	0	0
Grand Total, IOC			322,475	559,817	20,136,410	1,429,685	1,989,502

F Contingency of incremental capital cost

127) Contingency is calculated as 10% of the cost of modification of the production facilities.

G Technical Assistance (TA)

128) In order to implement the sector plan smoothly, it is necessary to undertake TA activities. The total fund requested for Technical Assistance is 1.1 million US dollars covering the following activities:

- a) Workshops for equipment manufacturers and technical experts during the implementation of the sector plan;
- b) Training of responsible staff of government agencies such as local Food and Drug Administration Bureaus and Environmental Protection Bureaus on the implementation of the phase out policies in the MDI sector;
- c) Legislative support activities;
- d) Preparation and appraisal of feasibility study reports to decide on the group of eligible enterprises and the funding needs;
- e) Technical support and harmonisation of product and process conversion activities;
- f) Development of a MIS system, monitoring and management of the Sector Plan, verification of performance indicators;
- g) Auditing of CFCs consumption annually for pharmaceutical aerosol manufacturers;
- h) Study tours;
- i) Public awareness promotion activities;
- j) General training of doctors, patients and pharmacists, environmental and health officials, the medical community, clinics, pharmaceutical companies and non-governmental organizations
- k) Other TAs as necessary.

H Summary

129) The total costs requested from the MLF, includes the one time investment cost and the one year operating cost for the eligible producers as well as the cost of technical assistance activities required for the implementation of this sector plan. The incremental cost will be used to phase out of 322.5 ODP tonnes/year CFCs in the MDI sector of China.

Table 24. Summary of incremental costs

Item	Incremental Cost (US\$)
Development of conversion technologies, registration of products	7,315,000
Patent Cost	2,600,000
Modification of Existing Production Facilities	4,260,000
Production Validation	720,000
Staff Training	440,000
Incremental Operating Cost	1,989,502
Technical Assistance and transition strategy	1,100,000
Contingency*	426,000
Total	18,850,502
Implementing Agency Support Cost	1,413,788
Total Funding Requested	20,264,289
Cost Effectiveness, US\$/kg	58.46

* The contingency is calculated as 10% of Cost of Modification of Existing Production Facilities.

Chapter VII Operating Mechanism

A Agreement between MEP and UNIDO

- 130) Following approval of the Sector Plan by the ExCom, MEP and UNIDO will sign an agreement, which will indicate that UNIDO entrusts MEP to implement the Sector Plan under UNIDO's supervision. According to the Agreement, UNIDO will disburse grants to MEP based upon (a) submission of a detailed Work Plan on the implementation for the Sector Plan, hereafter referred to as the Work Plan and (b) satisfactory performance of implementation and (c) meeting the agreed performance indicators.
- 131) The Work Plan will include the key activities and schedule for conversion of enterprises, the amount of CFC elimination, conditions and amount of fund disbursement, the necessary technical assistance activities and their schedules.
- 132) After signing the Agreement with UNIDO, MEP and SFDA will jointly establish a special working group (SWG). SWG will organize, manage and monitor the implementation of the sector plan in close cooperation with the recipient companies.
- 133) Based on the satisfactory progress report of MEP and verified achievement of the phase-out target. UNIDO will disburse funds to a special account; ODS Special Account set up in MEP after receiving MEP's funding request.

B Roles and Responsibilities

- 134) The MDI Sector Plan will be executed by MEP, acting on behalf of Chinese Government. The daily work will be done by FECO, one affiliated institution of MEP. MEP and SFDA will jointly set up the SWG, whose office will be located in FECO. SWG will be responsible for preparing the Work Plan. MEP and SFDA will jointly select through a bidding process a domestic implementing agency (DIA) for the management of daily works during the implementation of the Sector Plan.
- 135) Roles and Responsibilities of each institution involved are described as follows.

I. UNIDO

- 136) Will be responsible for overall implementation of the Sector Plan and accomplishment of its objectives as approved by the ExCom. UNIDO will:
- a) Establish working and reporting arrangement with MEP and SFDA;
 - b) Supervise MEP, SFDA and the recipient companies to complete this Sector Plan;
 - c) Provide necessary technological and managerial support to MEP and SFDA for the implementation of this Sector Plan;
 - d) Pay the fund of the Sector Plan to MEP based on the agreed conditions;

- e) Monitor the implementation of the Work Plan, conduct necessary audit and inspection, review bidding processes of selecting the DIA, eligible enterprises and the institutions undertaking the technical assistance projects; and
- f) Report to the ExCom. on the implementation status of the Sector Plan.

II. MEP

137) Will be through PMO, be responsible for overall project management and coordination for the implementation of the Sector Plan. MEP will:

- a) Set up a SWG consisting of staff from PMO and SFDA, and selected technical experts from the industry jointly with SFDA;
- b) Set up an ODS Special Account;
- c) Select a DIA jointly with SFDA, supervise the work of DIA;
- d) Review the funding request submitted by the Working Group and DIA, and approve the disbursement;
- e) Review the CFC consumption quota submitted by the work group and issue the quota to the enterprises;
- f) Submit progress report to UNDIO semi-annually;
- g) Verify and ensure the realization of CFC phase out target of the Sector Plan, and the destruction of CFC equipment in enterprises involved; and
- h) Prepare and issue the related regulations jointly with SFDA.

II. SFDA

138) Will cooperate with MEP to implement this Sector Plan. SFDA will:

- a) Help PMO to set up the SWG and select qualified technical experts for SWG;
- b) Set up SWG office and facilitate its operation;
- c) Select a DIA jointly with MEP;
- d) Coordinate the relationships among MEP, SWG, DIA and counterpart enterprises;
- e) Help MEP to realize the CFC phase out target indicated in the Sector Plan,
- f) Monitor the destruction of CFC equipment at the recipient enterprises according to MLF rules;
- g) Provide support on sector policy and technology, lead MDI manufacturing enterprises to eliminate CFC consumption and prepare relevant regulations jointly with MEP so that they can be issued and enter into force subsequently;
- h) Design CFCs phase-out policies in MDI sector, in cooperation with MEP;
- i) Organize local FDAs to implement phase-out policies and undertake irregular spot check to the MDI manufacturers;
- j) Supervise CFCs consumption of MDI aerosol manufacturers;

- k) Ensure adequate clinical supply of MDI products.

IV. SWG

139) Will, with the backstopping of MEP and SFDA, be responsible for implementing the Work Plan and undertake the following activities:

- a) Manage daily works of implementing the Sector Plan, coordinate the activities among all relevant parties;
- b) Establish an implementing and monitoring mechanism as well as a computerized database in English, which should include the status of the implementation of the Sector Plan for all eligible and non-eligible CFC-based MDI manufacturers, so that SWG, MEP/PMO, SFDA and UNIDO can easily learn each project's situation.
- c) Select most cost-effective contractors to execute the conversion project;
- d) Through bidding, select contractors of the technical assistance projects, and manage their implementation;
- e) Review DIA's payment requests and submit them to PMO for disbursement;
- f) Monitor DIA's work, submit progress report to PMO quarterly, timely report to PMO on technical, managerial, or implementation problems, which might arise;
- g) Visit beneficiaries, inspect project implementation, take part in the destruction of their CFC equipment;
- h) With the help of DIA, organize official project commissioning;
- i) Help MEP/PMO prepare quarterly and annual reports on the status of ODS Special Account, including budget revisions requested from PMO and UNIDO. With PMO's entrustment, prepare requests for replenishment of funds and submit it to UNIDO; and
- j) Provide assistance to verification audits as may be required by the Government, UNIDO and the ExCom.

V. DIA

140) With the backstopping of PMO, SFDA and SWG, DIA will be responsible for the project activities at enterprise level as follows:

- a) Provide necessary managerial and technological assistance to SWG;
- b) Conduct equipment and service procurement for beneficiary enterprises, help the enterprises in converting their production lines;
- c) Prepare payment requests for beneficiaries, or review beneficiaries payment request before submitting it to PMO;
- d) Submit regular report on project implementation to SWG, help SWG prepare progress reports on project implementation;
- e) Verify and inform SWG and PMO on problems that might arise at enterprises; and
- f) Organize official project commissioning.

C Auditing and Reporting

- 141) SWG will execute the Work Plan; submit progress reports to PMO four times a year. PMO will submit semi-annual and annual reports to UNIDO. The reports will be prepared in a format agreed by MEP, SFDA and UNIDO. UNIDO will report to ExCom on the progress of implementation and financial status of the project.
- 142) UNIDO will audit each year's project implementation.
- 143) UNIDO will supervise the implementation of the Work Plan, including spot check of project records and periodic check on enterprises. MEP will be responsible for conducting local annual audits according to regulations set for the ODS Special Account.

D Destruction of CFC Equipment and Certification

- 144) Confirmation of the destruction of CFC equipment and its certification should be obtained from an authorized organization in a form as specified in the ODS Phase out Contracts between MEP and enterprises. MEP will be responsible for preparing a completion report for each enterprise confirming that all terms and conditions of the ODS Phase out contract, including the destruction of equipment, have been fulfilled. UNIDO will retain the right to carry out factory inspections.

Chapter VIII Action Plan

145) This Chapter presents the schedule of implementation of CFC Phase-out Plan for China's MDI Sector. The proposed Action Plan is summarized in Table 25.

Table 25. Phase-out Targets, Funding Request Activities and Indicators from 2008 to 2014

	2007 (Baseline)	2008 (Estimate)	2009	2010	2011	2012	2013	2014
CFC Consumption Targets								
Maximum Allowable CFC Consumption/Production under the Accelerated CFC Phase out Plan (except for essential use consumption)		550	550	0	0	0	0	0
CFCs Consumption (newly produced CFCs)	340.5	414.6	504.8	614.6	748.3	650.0	400.0	0
Funding Request (USD)								
Enterprise-Level Activities	n.a.	17,750,502						
Technical Assistance Activities	n.a.	1,100,000						
Support Cost (7.5%)	n.a.	1,413,788						
Total MLF Cost	n.a.	20,264,289						
Actions								
Enterprise-level Activities	n.a.	Sign CFC phase out contract with SFDA/MEP		Modification of Existing Facilities				
		Identification of alternatives			Validation and New Production			
		Registration of Applications.						
		Workshops, Trainings						

	2007 (Baseline)	2008 (Estimate)	2009	2010	2011	2012	2013	2014	
Technical Assistance Activities			Workshops on alternatives, new processes, technical requirements, consumption quota, contract issues etc.						
			Workshops on new products and technical standards.						
		Study of standards and other technical issues.							
		Study of conversion techniques							
Policies and legislative measures		Issue and enforce consumption quota licenses to MDI producers							
		Verification audit of CFCs consumptions							
							Prepare and issue ban on use of CFCs for MDI production.		
		Preparation of Progress Reports covering all sector plan activities.							
Indicators									
			Eligible MDI producers using at least 65% of CFC signed phase out contract	All eligible MDI producers signed contract for CFC phase out.				CFC production and consumption of fresh CFC for MDI are 0 ODP tonnes.	
		Consumption quota system is established.	CFC production and CFC consumption quota are equal or below the agreed target.	CFC production and CFC consumption quota are equal or below the agreed target.	CFC production and CFC consumption quota are equal or below the agreed target.	CFC production and CFC consumption quota are equal or below the agreed target.			

	2007 (Baseline)	2008 (Estimate)	2009	2010	2011	2012	2013	2014
			Annual TA activity contracts are signed.	Annual TA activity contracts are signed.	Annual TA activity contracts are signed.	Annual TA activity contracts are signed.		
					At least 3 producers completed conversion.		All producers completed conversion.	
							Ban on use of CFCs for MDI production is issued.	

Appendix 1

Chinese Producers and Varieties of MDI Products

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
01	AstraZeneca Pharmaceutical Co., Ltd.	B04	Budesonide Aerosol (100d)	H20030410	
01	AstraZeneca Pharmaceutical Co., Ltd.	B04	Budesonide Aerosol	H20030411	
01	AstraZeneca Pharmaceutical Co., Ltd.	B13	Terbutalin Sulfate Aerosol (400 sprays)	H10930058	
01	AstraZeneca Pharmaceutical Co., Ltd.	B13	Terbutalin Sulfate Aerosol (200 sprays)	H10930059	
02	Beijing Haiderun Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H11021384	
02	Beijing Haiderun Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H11021180	
02	Beijing Haiderun Pharmaceutical Co., Ltd.	B23	Ipratropium Aerosol	H11022421	
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (50µg)	H11020191	
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (100µg)	H11020192	
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (200µg)	H11020193	
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (250µg)	H11020194	
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B12	Ribavirin Spray	H11020195	
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B14	Sodium Cromoglicate Aerosol	H11020196	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
03	Beijing Shengdelaibao Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H11020197	
04	Beijing Double-Crane Modern Medicinal Technology Co., Ltd.	B19	Isopropyl Scopolamine Bromide Aerosol	H11022168	
04	Beijing Double-Crane Modern Medicinal Technology Co., Ltd.	B23	Ipratropium Aerosol	H11021801	
04	Beijing Double-Crane Modern Medicinal Technology Co., Ltd.	B23	Ipratropium Aerosol	H11021802	
05	GlaxoSmithKline (Tianjin) Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (250ug/200 sprays)	H20056231	
05	GlaxoSmithKline (Tianjin) Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (50ug/200 sprays)	H20056259	
07	Guangzhou Baiyunshan Hejigong Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H44023113	
07	Guangzhou Baiyunshan Hejigong Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H44023121	
07	Guangzhou Baiyunshan Hejigong Pharmaceutical Co., Ltd.	B20	Clenbuterol Hydrochloride Aerosol	H44025373	
07	Guangzhou Baiyunshan Hejigong Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H44023123	
08	Guangzhou Dongkang Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H44024063	
08	Guangzhou Dongkang Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H44020217	
08	Guangzhou Dongkang Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H44020226	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
09	Guiyang Dechangxiang Pharmaceutical Co., Ltd.	B24	Zhichuanling Aerosol	Z52020225	yes
10	Harbin Guangji Pharmaceutical Factory	B15	Salbutamol Aerosol (liquid)	H23020561	
10	Harbin Guangji Pharmaceutical Factory	B16	Salbutamol Aerosol (suspension)	H23020684	
11	Harbin Hengchang Pharmaceutical Co., Ltd.	B14	Sodium Cromoglicate Aerosol	H23023413	
11	Harbin Hengchang Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H23020333	
12	Harbin Huili Pharmaceutical Co., Ltd.	B17	Salmeterol Xinafoate Aerosol	H19980105	
13	Hangzhou Zhongmei Huadong Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H33021444	
14	Henan Xinxin Pharmaceutical (Group) Co., Ltd.	B11	Physochlaina infundibulris Kuang Aerosol	z41022146	yes
15	Henan Zhongfu Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H41021424	
16	Heilongjiang Tianlong Pharmaceutical Co., Ltd.	B14	Sodium Cromoglicate Aerosol	H23020369	
16	Heilongjiang Tianlong Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H23020370	
16	Heilongjiang Tianlong Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H23020371	
17	Jilin Xiuzheng Pharmaceutical (Group) Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H22023411	
18	Jinan Weiming Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H37020653	
18	Jinan Weiming Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (28mg,0.2%(g/g))	H37020653	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
18	Jinan Weiming Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H37020655	
19	Penglai Nuokang Pharmaceutical Co., Ltd.	B07	Compound Isoprenaline Hydrochloride Aerosol (suspension)	H37023690	
19	Penglai Nuokang Pharmaceutical Co., Ltd.	B14	Sodium Cromoglicate Aerosol	H20003867	
19	Penglai Nuokang Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H37020545	
19	Penglai Nuokang Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H37020544	
19	Penglai Nuokang Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H37020549	
20	Qiqihar Pharmaceutical Factory	B15	Salbutamol Aerosol	H23022108	
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (250µg/100 sprays)	H20059866	
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol (250µg/200 sprays)	H20059867	
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H37022928	
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B14	Sodium Cromoglicate Aerosol	H37022929	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H19983227	
21	Jewim Pharmaceutical (Shandong) Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H37022817	
22	Shandong Linuo Kefeng Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H37022314	
22	Shandong Linuo Kefeng Pharmaceutical Co., Ltd.	B18	Isosorbide Dinitrate Aerosol	H37022845	
22	Shandong Linuo Kefeng Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H37023560	
23	Shandong Lukang Cisen Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H37021846	
23	Shandong Lukang Cisen Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H37022070	
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	B04	Budesonide Aerosol	H20030987	
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	B17	Salmeterol Xinafoate Aerosol	H20052614	
24	Shandong Lunan Beite Pharmaceutical Co., Ltd.	B25	Salbutamol Sulfate Aerosol	H20060409	
25	Pharmaceutical Factory Shanxi Medical University	B01	Beclomethasone Dipropionate Aerosol	H14020317	
25	Pharmaceutical Factory Shanxi Medical University	B16	Salbutamol Aerosol (suspension)	H14020757	
25	Pharmaceutical Factory Shanxi Medical University	B18	Isosorbide Dinitrate Aerosol	H14023848	
26	Shanghai Boehringer-Ingelheim Pharmaceutical Co., Ltd.	B08	Compound Ipratropium Aerosol (5ml)	H20046117	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
26	Shanghai Boehringer-Ingelheim Pharmaceutical Co., Ltd.	B08	Compound Ipratropium Aerosol (10ml)	H20046118	
26	Shanghai Boehringer-Ingelheim Pharmaceutical Co., Ltd.	B23	Ipratropium Aerosol (Atrovent Aerosol, 10ml)	H20033863	
27	Shanghai Fuxing Zhaohui Pharmaceutical Co., Ltd.	B02	Beclomethasone Dipropionate Aerosol (suspension)	H31021090	
27	Shanghai Fuxing Zhaohui Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H31021094	
27	Shanghai Fuxing Zhaohui Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H31020802	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B01	Beclomethasone Dipropionate Aerosol	H31020770	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B04	Budesonide Aerosol	H20010552	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B07	Compound Isoprenaline Hydrochloride Aerosol (suspension)	H31022807	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B09	Ketotifun Fumarate Aerosol	H31022604	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B10	Carbochromen Aerosol	H31022283	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B12	Ribavirin Aerosol	H10970349	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B14	Sodium Cromoglicate Aerosol	H31020681	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B15	Salbutamol Aerosol (liquid)	H31020606	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B16	Salbutamol Aerosol (suspension)	H31020560	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B17	Salmeterol Xinafoate Aerosol	H20010548	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B20	Clenbuterol Hydrochloride Aerosol	H31022809	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B21	Bromhexine Hydrochloride Aerosol	H31022607	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B22	Isoprenaline Hydrochloride Aerosol	H31021141	
28	Sine Pharma Laboratory of Shanghai Pharmaceutical (Group) Co., Ltd	B22	Isoprenaline Hydrochloride Aerosol	H31022858	
29	Tianjin Century Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol	H12020083	
29	Tianjin Century Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H12020084	
30	Tonghua Baishan Pharmaceutical Co., Ltd.	B06	Compound Danshen Aerosol	Z10950049	yes
31	Weifang Zhongshi Pharmaceutical Co., Ltd.	B01	Beclomethasone Dipropionate Aerosol	H37022152	
31	Weifang Zhongshi Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H37023628	

Company Code	Company Name	Product Code	Product Name	Approval No.	Traditional Chinese Medicine
31	Weifang Zhongshi Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H37022160	
31	Weifang Zhongshi Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H37022161	
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	B15	Salbutamol Aerosol	H32021545	
32	No.1 Pharmaceutical Co., Ltd. of Wuxi Shanhe Group	B22	IsoprenalineHydrochloride Aerosol	H32022731	
33	Xian Lisheng Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H61020946	
34	Xinjiang Pharmaceutical Factory	B15	Salbutamol Aerosol	H65020321	
35	Zhanjiang New Ton Tex Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H44023669	
35	Zhanjiang New Ton Tex Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H44023668	
36	Chongqing Kerui Pharmaceutical Co., Ltd.	B15	Salbutamol Aerosol (liquid)	H50020452	
36	Chongqing Kerui Pharmaceutical Co., Ltd.	B16	Salbutamol Aerosol (suspension)	H50020453	
36	Chongqing Kerui Pharmaceutical Co., Ltd.	B20	Clenbuterol Hydrochloride Aerosol	H50021660	
36	Chongqing Kerui Pharmaceutical Co., Ltd.	B22	Isoprenaline Hydrochloride Aerosol	H50020323	
37	Zigong Chenguang Pharmaceutical Co., Ltd.	B05	Dimethicone Aerosol	H51021906	
38	Jiangsu Tianji Pharmaceutical Co., Ltd.	B12	Ribavirin Spray	H20059502	