

Closure Systems for OINDP: Current & Future Regulatory Expectations

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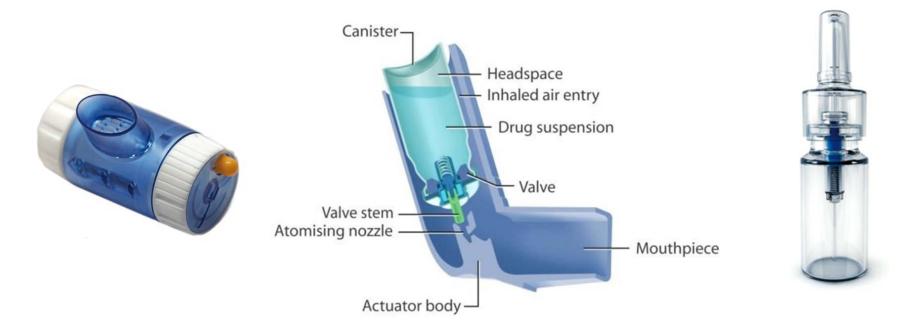
Objectives

- Container-Closure System Attributes
- **Extractables**
- **::** Regulatory Expectations
 - Asian Market
 - Regulated Market
- Bridging to Regulated Markets
- **...** Future Considerations





Container-Closure Systems



- Elastomers, plastic polymers, glass, stainless steel, aluminum
- Attributes ensure safety, stability and reproducible delivery
- Device performance requirements vary by country



Extractable & Leachable Requirements

Highly Regulated		Evolving Regulations			
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US	EU	BR	China	SE Asia	India
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Container-Closure Systems

- Device must be registered with CFDA
 - No Drug Master File (DMF) System



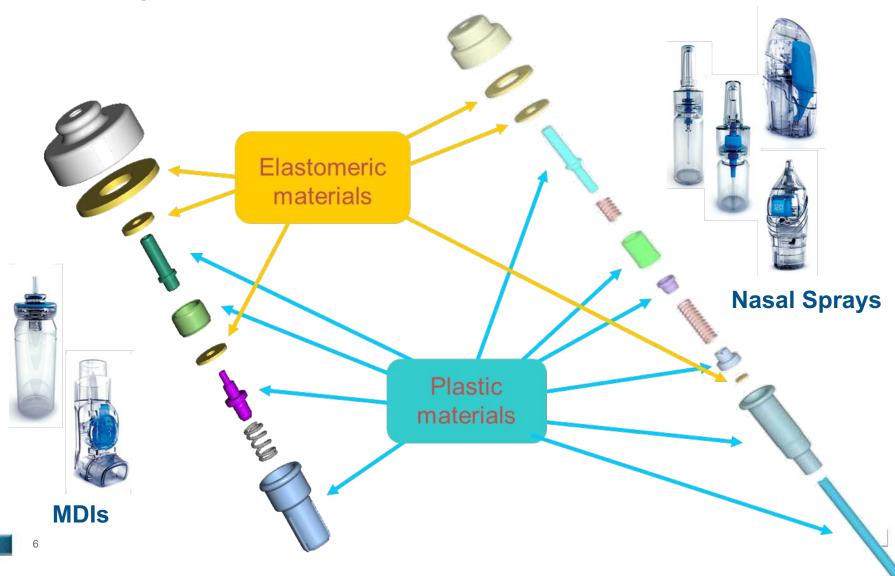
- Extractables → development data submitted
- Select Supplier with CFDA registration
- 2015 projected release for Chinese Pharmacopeia
 - Addition of multi-stage cascade impaction testing
 - Pharmaco testing expectation







Principle Extractable Sources

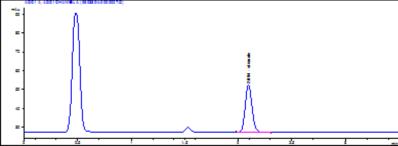




Identify Potential Extractables

- Additives (antioxidants, stabilizers, lubricants) used to improve:
 - processing
 - device assembly
 - shelf life
- Residual products (oligomers, vulcanization agent...)
- Degradation products from additives, polymers
- By-products from polymerization
- The more details provided by raw material suppliers, the easier the

controlled extraction studies





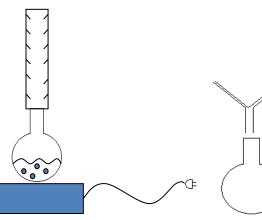
Controlled extraction studies

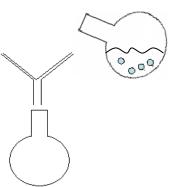




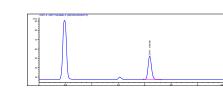
Powder











Sample prep

Extraction technique

Filtration

Evaporation of extraction solvent

Sample Solution prep

Chromatographic analysis

Materials

Microwave oven

Reflux

Soxhlet

Sonication

Accelerated

Solvent Extractor...

Solvents of different polarities:

Dichloromethane

Water

Isopropanol

Hexane etc...





HPLC-UV HPLC-ELS HPLC-MS GC-FID GC-MS GC-NCD GC-TEA GC-NPD



PQRI Extractable and Leachable Guidelines

- Prescriptive guidelines
- Determine Analytical Evaluation Thresholds (AET)
- Safety Thresholds
 - Qualification Threshold (QT)
 - 5 mcg/day
 - Safety Concern Threshold (SCT)
 - 0.15 mcg/day



8 SEPTEMBER 2006

SAFETY THRESHOLDS AND BEST PRACTICES FOR EXTRACTABLES AND LEACHABLES IN ORALLY INHALED AND NASAL DRUG PRODUCTS

Submitted to the PQRI Drug Product Technical Committee, PQRI Steering Committee, and U.S. Food and Drug Administration by the

PQRI Leachables and Extractables Working Group

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Extractable Studies Process

Extractable screening for identification

Development /
Validation of analytical
methods capable of
quantifying extractables

Controlled extraction studies on materials

Material is validated in terms of extractables



Measurement of extracts on several batches of raw materials

Establishment of specifications

Implementation of routine controls

Possible DMF*
submission or
Registration by Device
Manufacturer

*DMF: Drug Master File



Setting Extractables Specifications: Routine Controls

- For extractables to be monitored, specifications are established for each material based on:
 - Measurement of extracts profile from several batches
 - Limits are set:
 - ✓ For each extractable to be monitored.
 - ✓ For unknowns as a reporting limit (e.g limit of quantification of the method)
- Based on extractables profile, appropriate routine quality controls are implemented:
 - Systematic control of each batch upon reception
 - Verification of the consistency of packaging material from batch to batch and avoid new impurities (e.g. contamination)
 - To guarantee that the manufacturing process is under control



Device Quality Agreement

- **Commitment to test incoming materials**
- Quality Agreement criterion will vary by market regulations

Device quality agreement inclusions	Objective	Reference
Food contact certificate	Ensure that the materials used in the CCS conform to the minimum considered generally safe	e.g 21 CFR 177, EU 10/2011
USP monograph compliance	Assure compliance with plastic, rubber & toxicology standard tests etc.	e.g. USP <661> plastics, USP <381> Elastomers, USP <87,88> biological reactivity tests etc.
International GMP or ISO compliance	Compliance with accepted international quality standards	ISO 9001, 13485, 15378, 21 CFR 210
Standard performance limits (release testing)		USP <601>, FDA (5), EP Inhalanda & Nasalia



Certificate of Analysis (CofA)

- Metrics based on internal company standards or regulatory expectations
- Items included in CofA can be tailored for Pharmaco requirements

Example CofA nitrile elastomers in nasal pumps for the US market		
Characteristic / Analytical test	Units of measure	
Identification	Infra-red profile	
Dimensional, metrology	Technical drawings	
Extractables		
PNAs	ppm	
Acrylonitrile monomer	ppb	
Fatty Acids	mg/g	
Semi-volatiles	mg/g	
Nitrosamines	ppb	



Additional Considerations for Selection

- Container Closure Manufacture
 - ISO 15378, GMP and/or Quality Agreement
 - Site of manufacture



- End user requirements
- Economic considerations
- Regional differences within a population











Regulated Markets

Innovator

- FDA Chemistry Manufacturing and Control Guidances
- EMA CHMP Guidelines
- Well established for nasal and pulmonary drug products

Generic

- FDA and Brazil detailed BE pathways
- EMA outlines BE approach

Super Generic

- 505(b)(2) (US)
- Similar (BR)









505(j) Abbreviated New Drug Application (ANDA)

Bioequivalence

- Demonstrate equivalent rate and extent of absorption
- Reduced scope of in vivo and/or in vitro comparison
- Full CMC still needed
- Global approaches to bioequivalence
 - EMA applies step wise approach to BE
 - FDA applies weight of evidence
 - Required tests and statistical approaches differ







FDA Drug Specific Guidance: Albuterol MDI BE Expectations

- Dose Counter
 - Required if present on RLD
 - May need to demonstrate robustness and accuracy
 - In vitro and in-use (suggests patient handling)
- Single Actuation Content (SAC)
- Aerodynamic Particle Size Distribution (APSD)
- Spray pattern
- Plume geometry
- Priming and Repriming
- Note PK and PD studies required for full BE





Fluticasone Proprionate/Salmeterol Xinafoate DPI

- In vitro and in vivo required
 - Clinical endpoint and PK
- All strengths
- SAC and APSD at 3 flow rates
 - SAC 2L; Population Bioequivalence (PBE) stats
 - APSD 4L; PBE Impactor Stage Mass (ISM) and submit CI profiles
- Device comparability necessary
 - Same device resistance
 - Internal mechanism can differ
- Robustness of T product required
 - In vitro and in-use







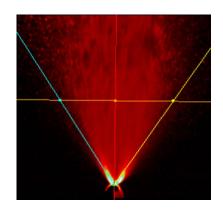
In Vitro BE for Nasal Sprays Across Regulatory Bodies

FDA	Brazil (ANVISA)	EMA
Droplet Size	Droplet Size	Droplet Size officially
Single Actuation Content Uniformity	Single Actuation Content Uniformity	Other in vitro tests appear to be used
Spray Pattern	Spray Pattern	
Prime Reprime	Prime Reprime	
Particle Size	Number of Metered Doses	
Plume Geometry	Pump Delivery	
Particles < 10μm		
19 OF THE PARTY OF	ANVISA	EUROPEAN MEDICINES AGENCY SCIENCE MEDICINES HEALTH



FDA and Brazil Generic Pathways

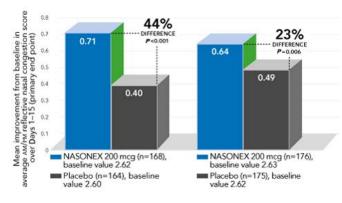
Agency	Bioequivalence (BE)	Pharmaceutical Equivalence (PE)
FDA	In Vivo and/or In Vitro	Definition does not exist
ANVISA	In Vivo	In Vitro



In Vitro
Plume Geometry



In Vivo Pharmacokinetics (PK)



In Vivo Clinical Endpoint





Brazil PE Tests

In Vitro Test	Metric for Statistics	Similarity to FDA BE
Contents of an actuation on the total contents of the device (single actuation content uniformity)	Mass (μg) of drug	Same
Dose mass (pump delivery)	Spray weight (mg) No stats	Not required
Droplet size distribution	D50 Span	Same
Spray pattern	Ovality Area	Same
Number of doses	Count No stats	Not required
Load and reload (prime and reprime)	Mass of drug Meet 95-105% LC	Three orientations required not one Stats required



US FDA ANDA Notes

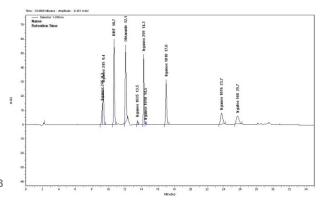
- Three registration batches on stability
 - Effective June 2014
- Statistical approach defined in the Budesonide Inhalation Suspension Draft Guidance (September 2012)
- Chi2 Ratio for cascade impaction (CI)
 - FDA will look at the whole CI profile
 - No equivalence criterion on this ratio yet
- Don't forget CMC characterization studies (applies to NDAs too)
 - Leachables



Leachables Studies

- **!!** Delivery device in contact with drug product
- Leachables profile is drug product specific
 - ✓ Responsibility of the pharmaceutical companies
- Leachables assessment can be performed based on extractables information and methods
- **Performed during stability studies**

Knowledge of leachables and their toxicity can determine which extractables are to be put under routine control







Bridging to Regulated Markets

- Container Closure System Needs
 - Routine testing controls from Supplier
 - Materials that meet regulated market expectations
 - Extractables and leachables
 - Manufacture to ISO or GMP standards
 - Reference DMF (US) market or MAA (EU)



- Compatibility with closure
- API and excipients







Patient Experience (ANDA Route)

- Device sameness—US Expectation
- For Dry Powder Inhalers
 - Shape, size, dose counter, resistance, external operation
 - Internal operation can be different as long as it doesn affect patient experience
- Thought process extends to nasal sprays and other device platforms









1. OPEN



2. CLICK



3. INHALE



Advair Package Insert



Alternate US Pathways

- 505(b)(1) New Drug Application (NDA)
 - Full clinical, toxicology and CMC
- 505(b)(2)
 - New drug approval without conducting the full complement of safety and efficacy trials
 - Stability and CMC package required
 - Examples
 - Benzodiazepines delivered as nasal sprays
 - Albuterol sulfate branded generic (ProAir)







Similars

- **Branded generic**
 - Formulations may differ
 - Example: preservative free formulations



:: Potential future pathway for Similar to become a Reference



Budecort AQ 32 and 64 µg Reference



Noex 32 and 64 µg Similar

Noex 50 and 100µg Reference



Future

- **::** Affordable healthcare
 - US OTC Switch
- **Growing regulations in China**
- **FDA** presence in India
 - FDASIA monitoring exports
 - Safety, drug shortages...
 - Expansion to other countries?

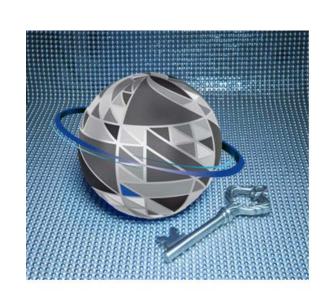






Summary: Select the Right Closure

- **::** Regulatory requirements
- Market demands
- **::** Keys to success
 - Quality agreement with Supplier
 - Routine controls
 - Ability to scale manufacture
 - Domestic production
 - Strong relationship with regulatory bodies





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