



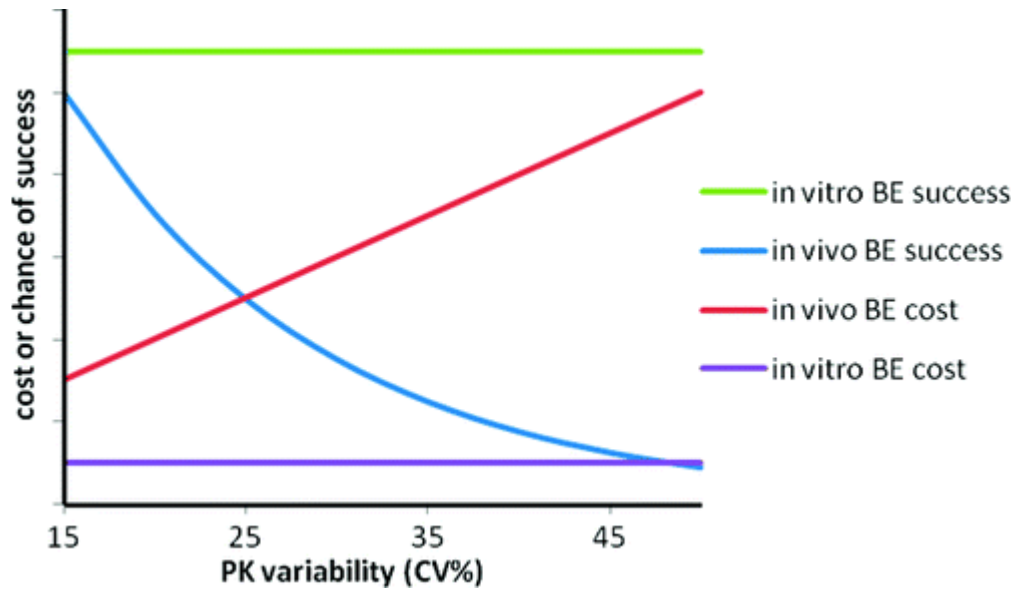
Impact of Excipients

BCS Class 3 Drug Product Dissolution and Permeability



BCS Class 3 drugs

The value to the generic industry in expanding BCS class 3 waivers to non-Q1/Q2 formulations

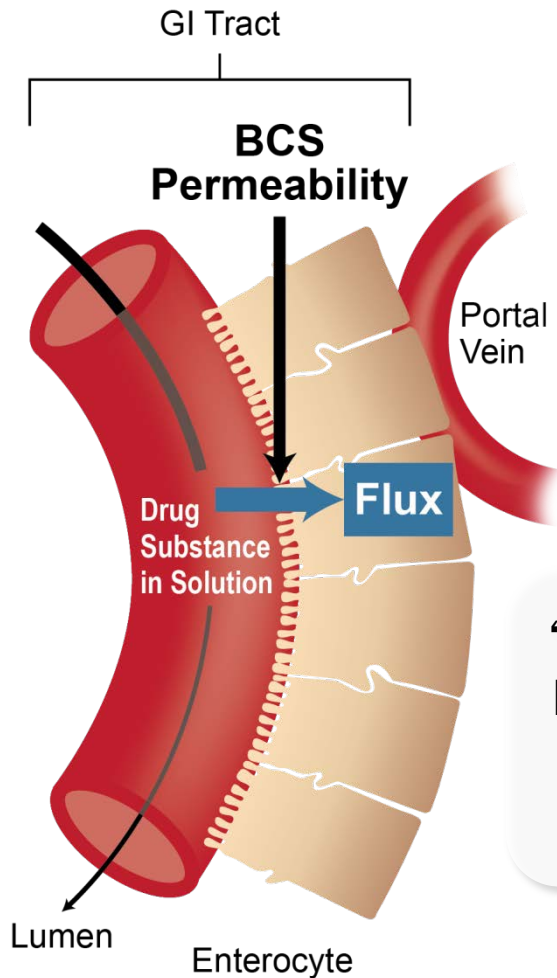


- BCS Class 3 drugs constitute 25% of drugs marketed in the United States
- Almost 40% of orally administered drugs on the WHO Model List of Essential Medicines are BCS Class 3 drugs.

*Impact of Biopharmaceutics Classification System-Based Biowaivers**
Jack A. Cook[†], Barbara M. Davit[§], and James E. Polli^{*||}

Vaithianathan, et al., J Pharm Sci. 2016; 105:996-1005

The Science of BCS Biowaivers



Absorptive Flux (J)

$$= C_{int} \cdot P_{wall}$$

P_{wall} = effective or BCS permeability

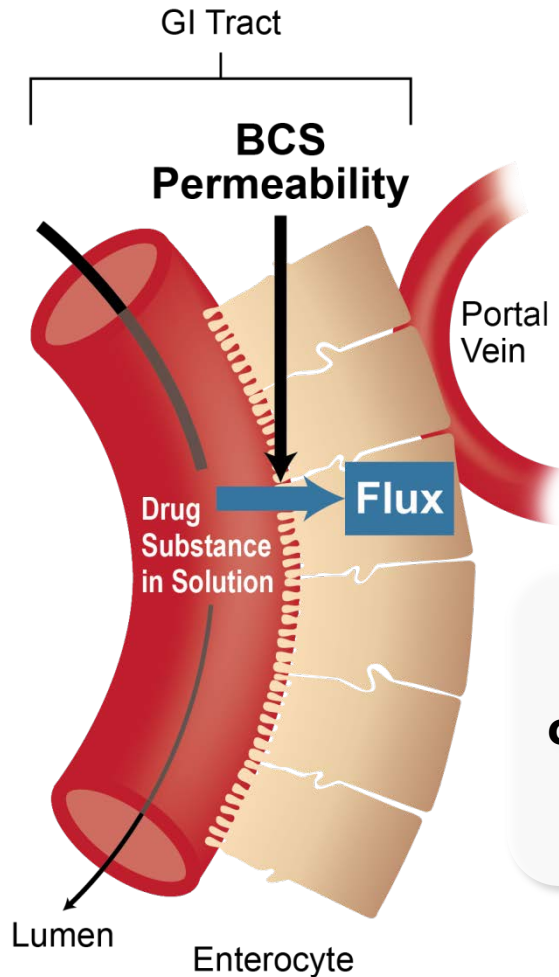
C_{int} = concentration in lumen

Which implies...

“...If two drug products, containing the same drug, have the **same concentration time profile at the intestinal membrane surface** then they will have the same rate and extent of absorption”

Amidon, G et. al. A Theoretical Basis for a Biopharmaceutics Drug Classification: The Correlation of in Vitro Drug Product Dissolution and in Vivo Bioavailability, Pharm Res (12) No. 3, 1995.

The Science of BCS Biowaivers



Absorptive Flux (J)

$$= C_{int} \cdot P_{wall}$$

P_{wall} = effective or BCS permeability

C_{int} = concentration in lumen

Which further implies...

When *in vitro* testing can demonstrate the same **GI concentration time profile under all luminal conditions**...it can serve as a reliable surrogate for judging **therapeutic equivalence** of pharmaceutically equivalent drug products

BCS 3 Biowaiver Eligibility

- The drug substance is **highly soluble**
 - The highest strength is soluble in 250 mL or less of aqueous media within the pH range of 1 - 6.8 at $37 \pm 1^\circ\text{C}$.
- The drug product is very **rapidly dissolving**
 - A mean of 85 percent or more of the labeled amount of the drug substance dissolves within 15 minutes using USP Apparatus 1 at 100 rpm or Apparatus 2 at 50 rpm in 500 mL or less in -
 - (1) 0.1 N HCl or Simulated Gastric Fluid USP without enzymes;
 - (2) a pH 4.5 buffer; and
 - (3) a pH 6.8 buffer or Simulated Intestinal Fluid USP without enzymes.
- The test product formulation is **qualitatively the same and quantitatively very similar** to the RLD

Waiver of In Vivo Bioavailability and Bioequivalence Studies for Immediate-Release Solid Oral Dosage Forms Based on a Biopharmaceutics Classification System - Guidance for Industry, December 2017

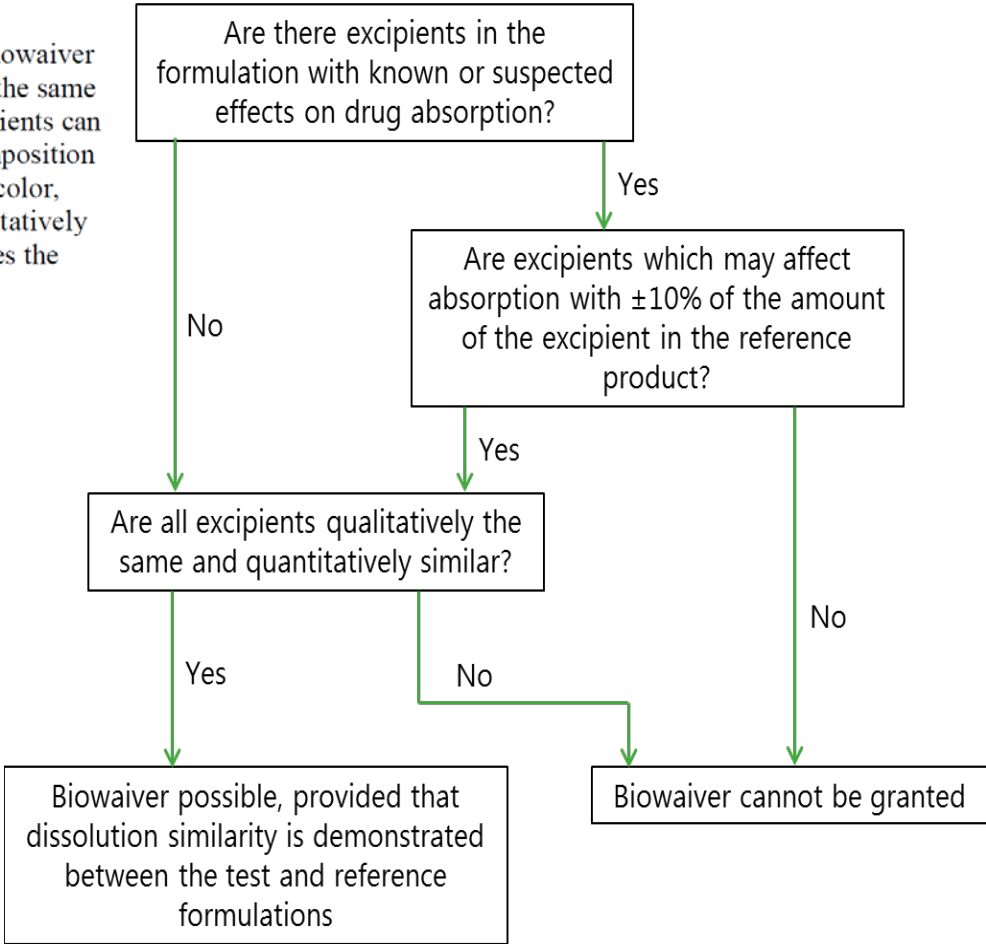
BCS Class 3 Drug Products

(ii) BCS class 3 drug products: Unlike for BCS class 1 products, for a biowaiver to be scientifically justified, BCS class 3 test drug product must contain the same excipients as the reference product. This is due to the concern that excipients can have a greater impact on absorption of low permeability drugs. The composition of the test product must be qualitatively the same (except for a different color, flavor, or preservative that could not affect the BA) and should be quantitatively very similar to the reference product. Quantitatively very similar includes the following allowable differences:

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The total additive effect of all excipient changes should not be more than 10 percent.

FDA Final Guidance December 2017

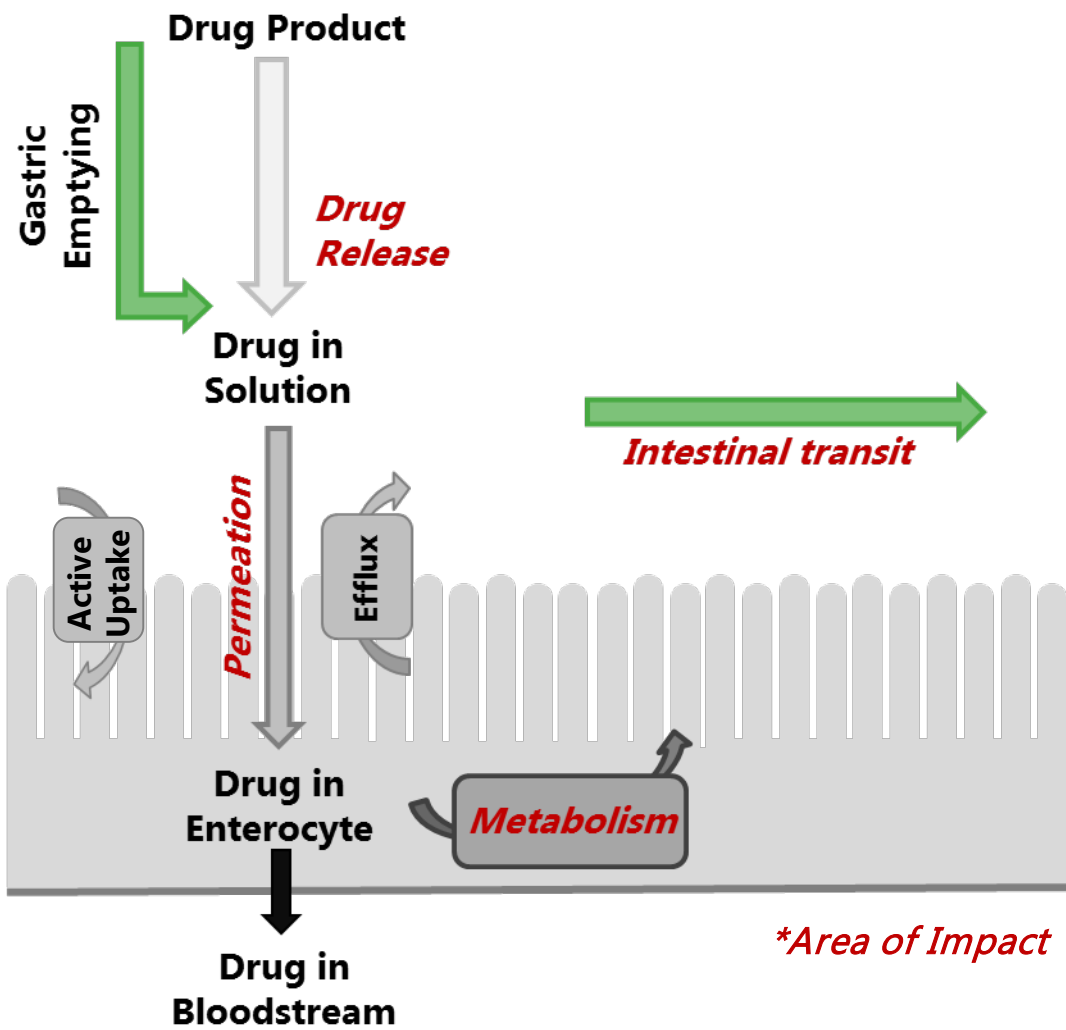


Challenges

- Legal - Potential Patents
- Will we receive feedback*?
 - "Consistent with the Agency's past and current practices, FDA does not intend to review proposed formulations that are neither required by regulation nor recommended in guidance to be Q1/Q2 to the RLD"
- Logistics - Cycle time for Q1/Q2 response
- Deformulation techniques - Multiple cycles may be required
- Can we create excipient exception categories?
 - Insoluble excipients
 - Excipients that are food constituents

**Controlled Correspondence Related to Generic Drug Development Guidance for Industry, Draft Guidance, November 2017*

How Excipients May Impact Absorption?



Release rate/amount of drug in solution

- Altered disintegration time
- Altered dissolution rate
- Altered local pH
- Complexation (excipient-drug complexes)

Transit and luminal volumes

- Faster gastric emptying
- Increased luminal volume (osmotic effect)
- Altered small intestinal transit time

Altered effective permeability

- Damage to intestinal surface/ tight junction modulation
- Inhibition of efflux
- Inhibition or enhancement of active uptake

Altered metabolism

- Inhibition of gut wall metabolism

**Area of Impact*

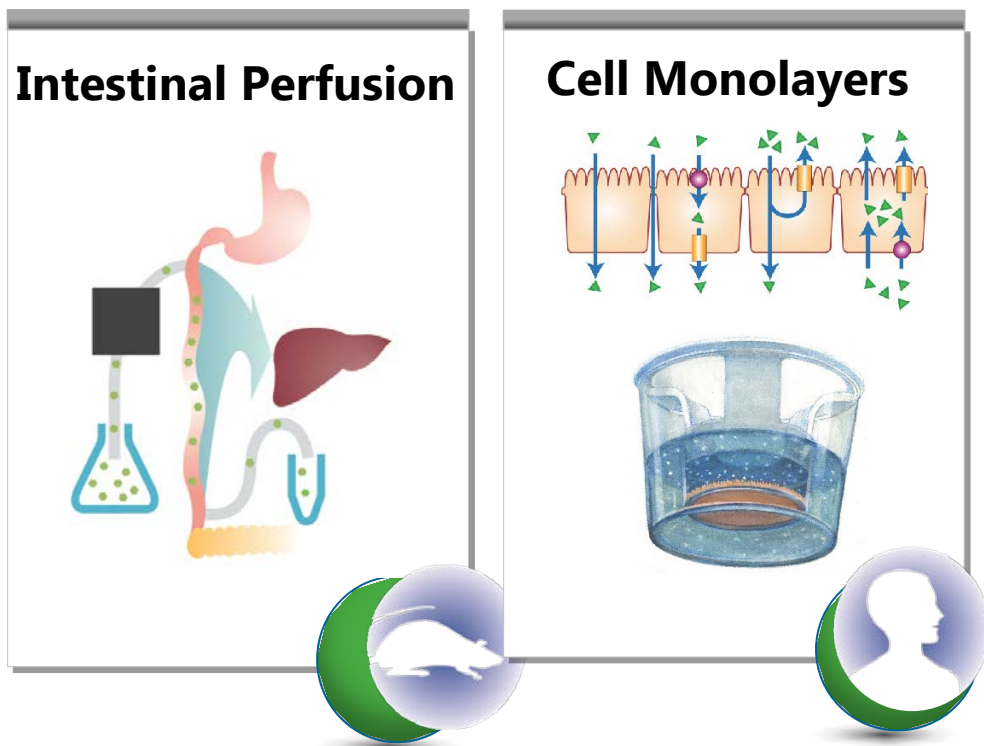
Ref. Dr. Talia Flanagan

Conventional Techniques

Dissolution

- Using USP Apparatus 1 or Apparatus 2
- In a volume of 500 mL to 900 mL
- Representative media:
 - 0.1 N HCl or Simulated Gastric Fluid USP without enzymes;
 - pH 4.5 buffer
 - pH 6.8 buffer or Simulated Intestinal Fluid USP without enzymes.

Permeability



Limitations with Conventional Techniques

- Dissolution testing - **insensitive** to excipient-drug complexation and impact of altered local pH
- Over-sensitivity of the cell monolayers to excipient effects –**model configuration?**
Aungst BJ, J Pharm Sci. 2000; 89(4):429-442)
- Sensitivity to excipients such as SLS at concentrations known to be safe and widely used – **deviation from “real world” correlation**
Rege, et al. (J Pharm Sci. 2001;90(11):1776-1786
- Same excipients tested in in situ rat intestinal perfusion model, with no obvious excipient-related effects outside the inherent variability of that model – **in vitro model over-discrimination or variability of in situ perfusion**
Parr, et al. Pharm Res. 2016; 33(1):167-176
- BE studies in humans showed lack of excipient effect with two model BCS Class 3 compounds and 12 commonly used excipients – **Lack of in vivo correlation but in vivo can be difficult to deconvolute and/or scale**

Vaithianathan, et al J Pharm Sci. 2016; 105:996-1005

Basis for Innovation: Biopharmaceutics

“The study of the chemical and physical properties of drugs and the biological effects they produce”

Using this principle:

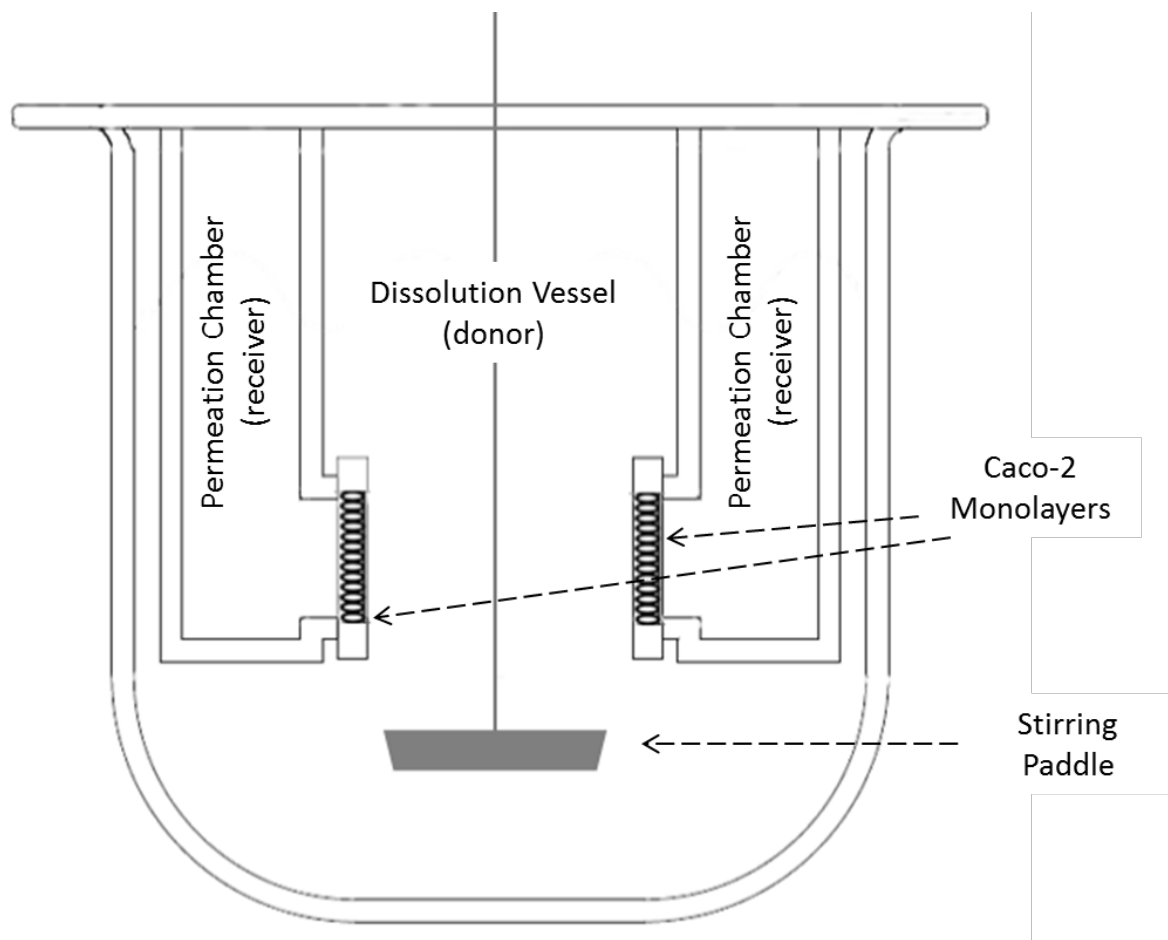
- Develop tools that are more bio-relevant
- Link API and formulation to their effect

Applications

- Infer pharmaceutical and bioequivalence
- Performance testing of dosage forms
 - Predict and control BA & BE
 - Accelerate product development

Innovation: IDAS

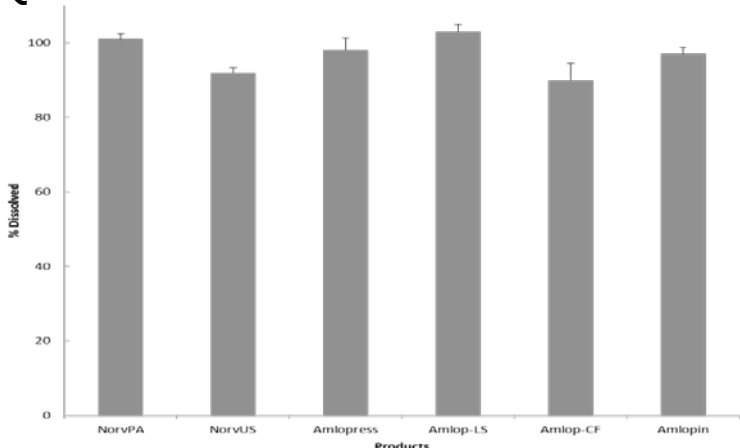
***In Vitro* Dissolution Absorption System** combines traditional dissolution testing with a means to **determine and quantify** interactions with a bio-relevant membrane.



Biopharmaceutics Dissolution with Better *In Vivo* Correlation

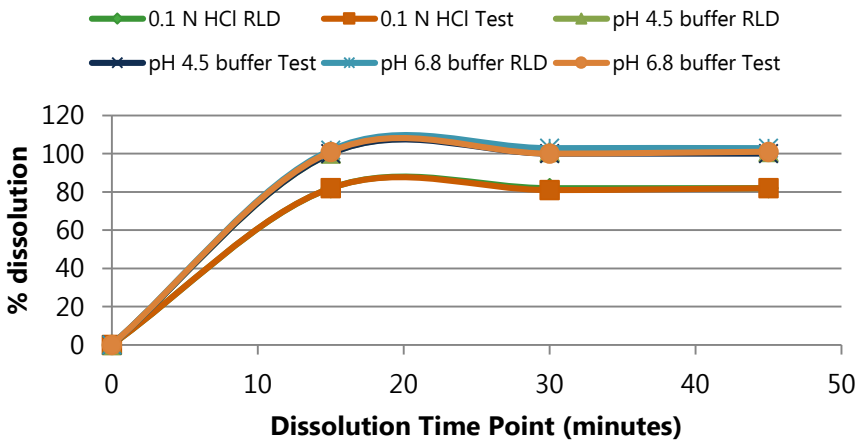
Why IDAS?

**Batch Release Data for Product A-
Q value was similar for different manufacturers**



2016 AAPS AM; Poster #22R1030

Dissolution for Compound B [BCS III]



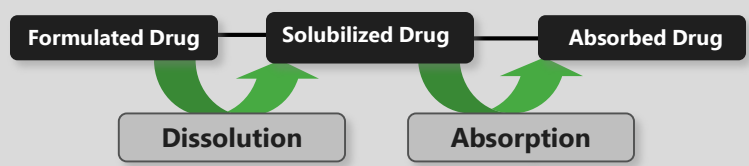
Data using IDAS shows marked differences in AUC and % permeated for different manufacturers

| Product | AUC (0-2 hours) | % Permeation (0-2 hours) |
|----------|------------------|--------------------------|
| FF15-025 | 7304.8 ± 407.1 | 2.33 ± 0.52 |
| FF15-027 | 4001.3 ± 590.1* | 0.25 ± 0.13* |
| FF15-028 | 2166.1 ± 756.8* | 0.51 ± 0.16* |
| FF15-029 | 5043.8 ± 1157.7* | 0.55 ± 0.35* |
| FF15-030 | 6477.0 ± 1031.9 | 0.51 ± 0.16* |

*: p < 0.05

IDAS Achieves Discrimination

- The **test product failed bioequivalence** for C_{max} and AUC
- IDAS – **dual gated process**



POTENTIAL

Why IDAS?

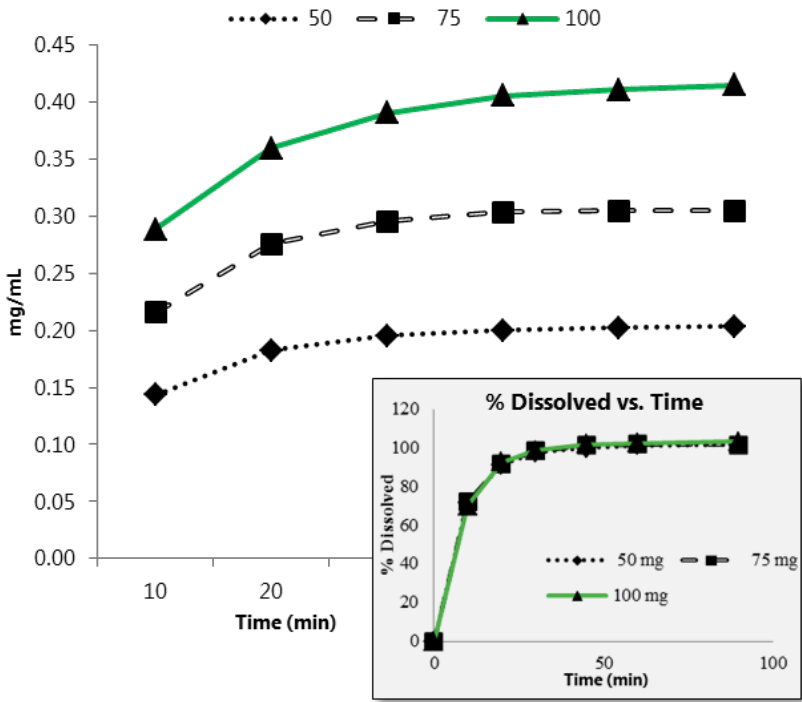
- Dissolution, solubility and permeability are routinely measured independently and under conditions that may have less physiologic relevance
- Poor discrimination, which impacts the link between *in vitro* drug product release characteristics and *in vivo* performance.
- Concomitant evaluation of bio-relevant processes

Application: Product Discrimination

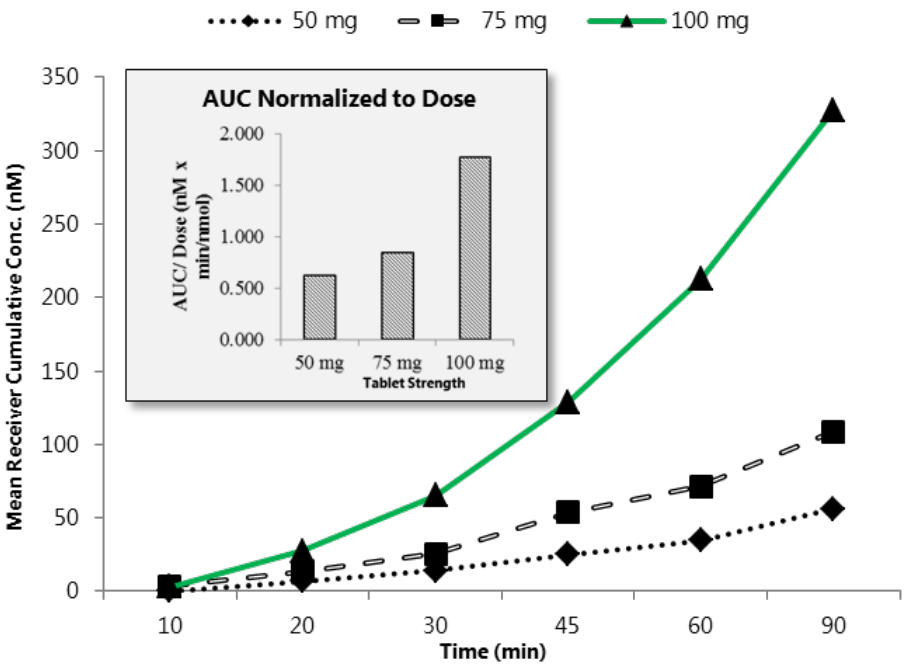
IDAS Achieves Improved Dose Discrimination:

Dissolution vs. permeability in fasted simulated intestinal fluid for a tablet with different strengths

Amount Dissolved vs. Time



Amount Permeated vs. Time



IDAS Resource Library

■ Posters

- **In Vivo Correlation:** Assessment of Drug Gastrointestinal Supersaturation Using a Two-Stage In Vitro Dissolution Absorption System 2 (CRS 2018)
- **Supersaturation:** Assessment of drug gastrointestinal supersaturation using In Vitro Dissolution - Absorption System 2 (AAPS 2018)
- **Food Effects:** Study of the Effect of Simulated Fast vs Fed State on the Dissolution and Permeation of BCS Class 1-4 Drugs Using the In-vitro Dissolution Absorption System 2 (AAPS 2018)
- **In Vivo Correlation:** Evaluation of the In Vitro Dissolution and Absorption (IDAS2) as a potential surrogate for in vivo performance of drug formulations (AAPS 2018)
- **Biowaivers:** Applications of the In vitro Dissolution and Absorption System 2 as a Bioequivalence Biowaiver Tool (AAPS 2018)

■ Publications

- **Supersaturation:** In Vitro and In Vivo Assessment of the Potential of Supersaturation to Enhance the Absorption of Poorly Soluble Basic Drugs (in progress, 2019)
- **PSD:** Simultaneous Analysis of Dissolution and Permeation Profiles of Nanosized and Microsized Formulations of Indomethacin Using the *In Vitro* Dissolution Absorption System 2 (Li, et al., J Pharm Sci. 2019, in press)
- **Biowaivers:** Innovative *in vitro* methodologies for establishing therapeutic equivalence (Murray, et al., Rev Panam Salud Publica. 2016; 40(1): 23-28)

Proposed Experimentation

- Use IDAS to evaluate excipients at 3 levels:

Follow-up to Parr, et al. Pharm Res. 2016; 33(1):167-176

| Excipient | Concentration (mg/mL) | | |
|---------------------------------------|-----------------------|--------|-------------------|
| | Low | Medium | High [#] |
| HBSSg, pH 6.5 (control) | --- | --- | --- |
| Lactose monohydrate | 0.5 | 2.0 | 8.0 |
| Povidone K30 | 0.05 | 0.2 | 0.81 |
| Hypromellose 2910 (4000 mPa·s) | 0.5 | 2.0 | 8.0 |
| SLS | 0.025 | 0.1 | 0.39 |
| PEG-400 | 0.075 | 0.3 | 3.84 |

Consistent with the Inactive Ingredients Database;

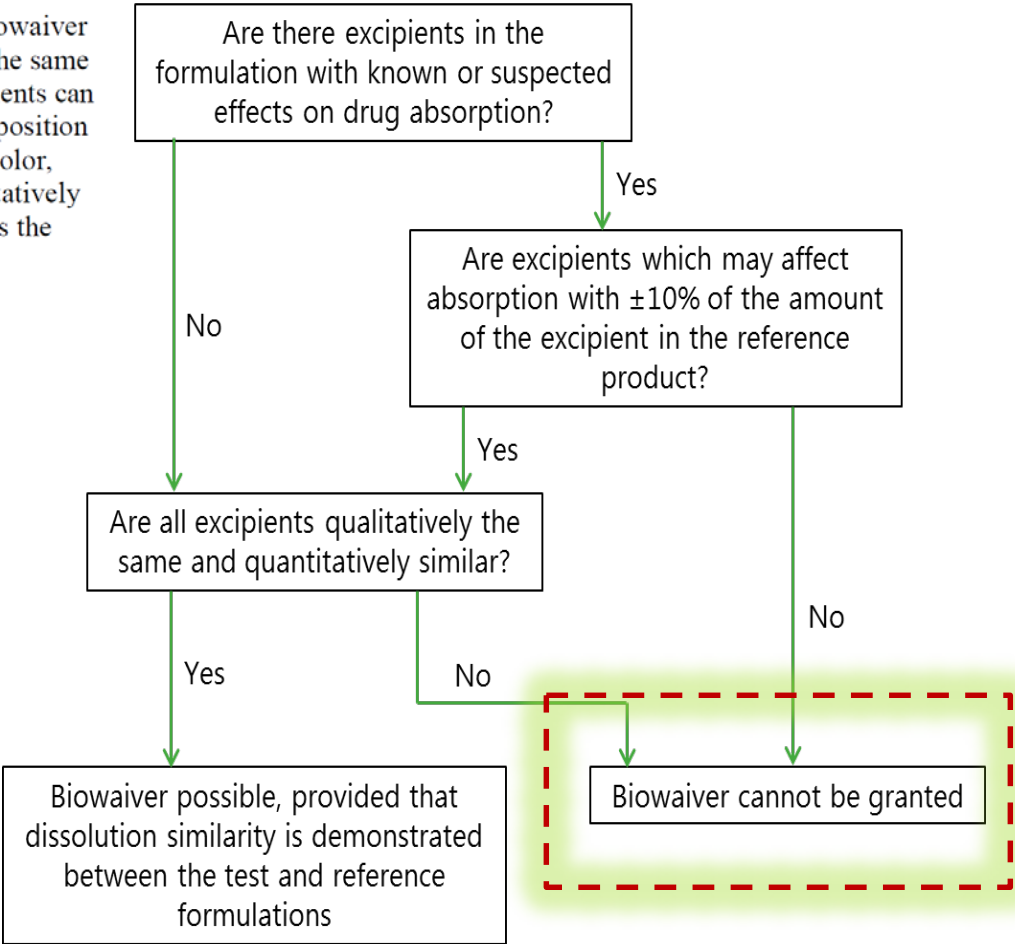
Expanded Utility of BCS Class 3 Biowaivers

(ii) BCS class 3 drug products: Unlike for BCS class 1 products, for a biowaiver to be scientifically justified, BCS class 3 test drug product must contain the same excipients as the reference product. This is due to the concern that excipients can have a greater impact on absorption of low permeability drugs. The composition of the test product must be qualitatively the same (except for a different color, flavor, or preservative that could not affect the BA) and should be quantitatively very similar to the reference product. Quantitatively very similar includes the following allowable differences:

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FDA Final Guidance December 2017



To works towards – Exception categories, alternative pathways for evaluation, expanded tolerance ranges