

COMBINAZIONI A DOSE FISSA DI FARMACI: ASPETTI CLINICI, FORMULATIVI E REGOLATORI

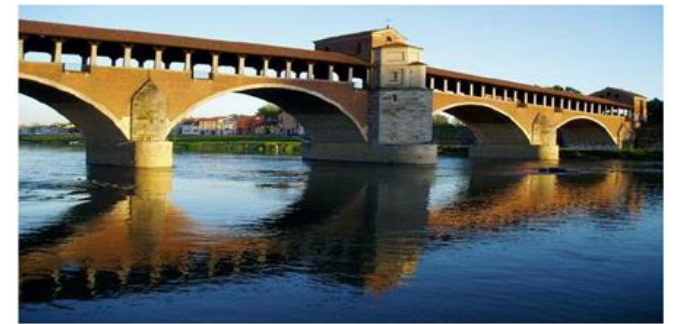


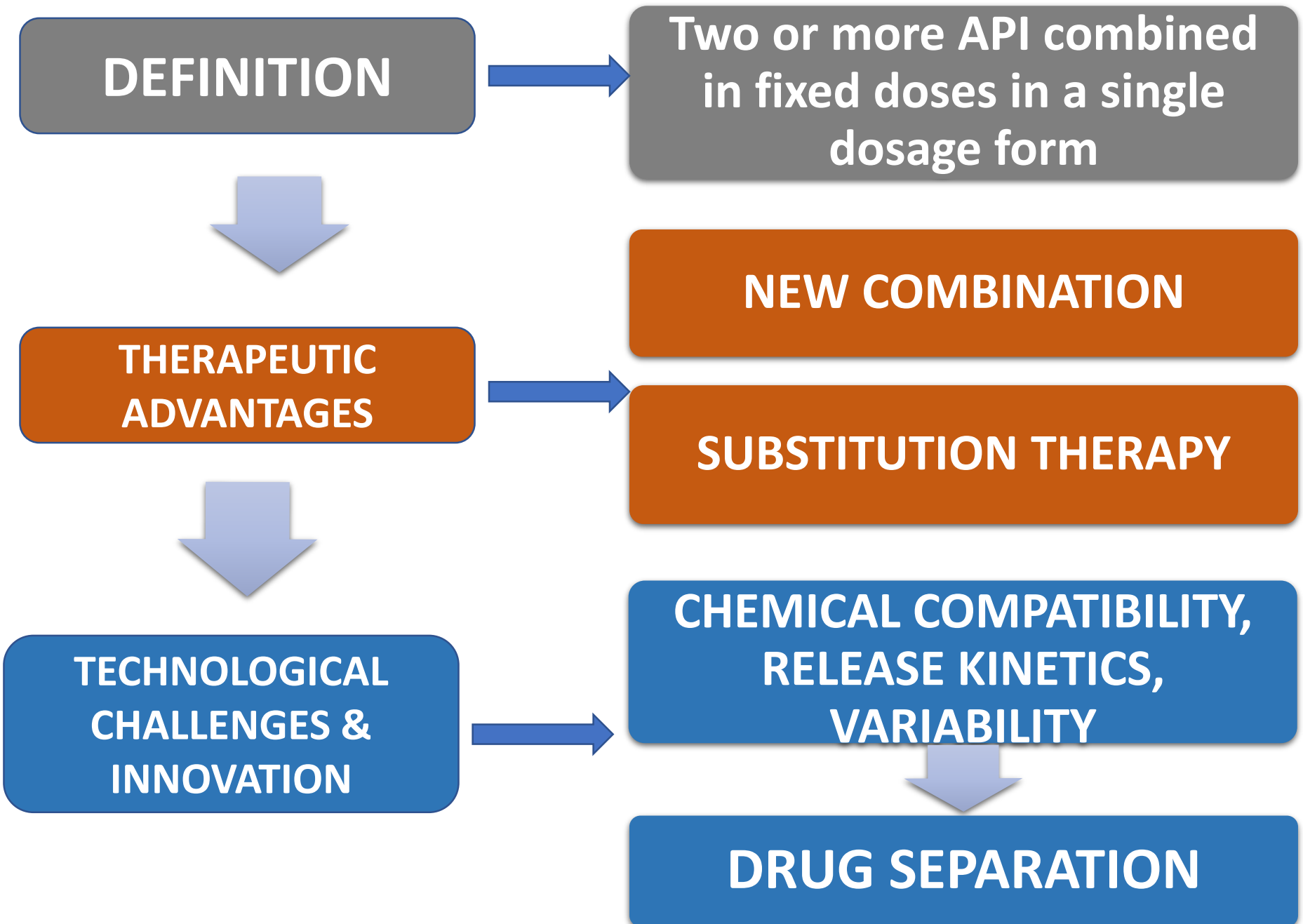
*Combinazioni terapeutiche a dosi fisse:
dal **dossier farmaceutico** all'Autorizzazione
all'Immissione in Commercio*



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DEFINITION

**Two or more API combined
in fixed doses in a single
dosage form**

NEW COMBINATION

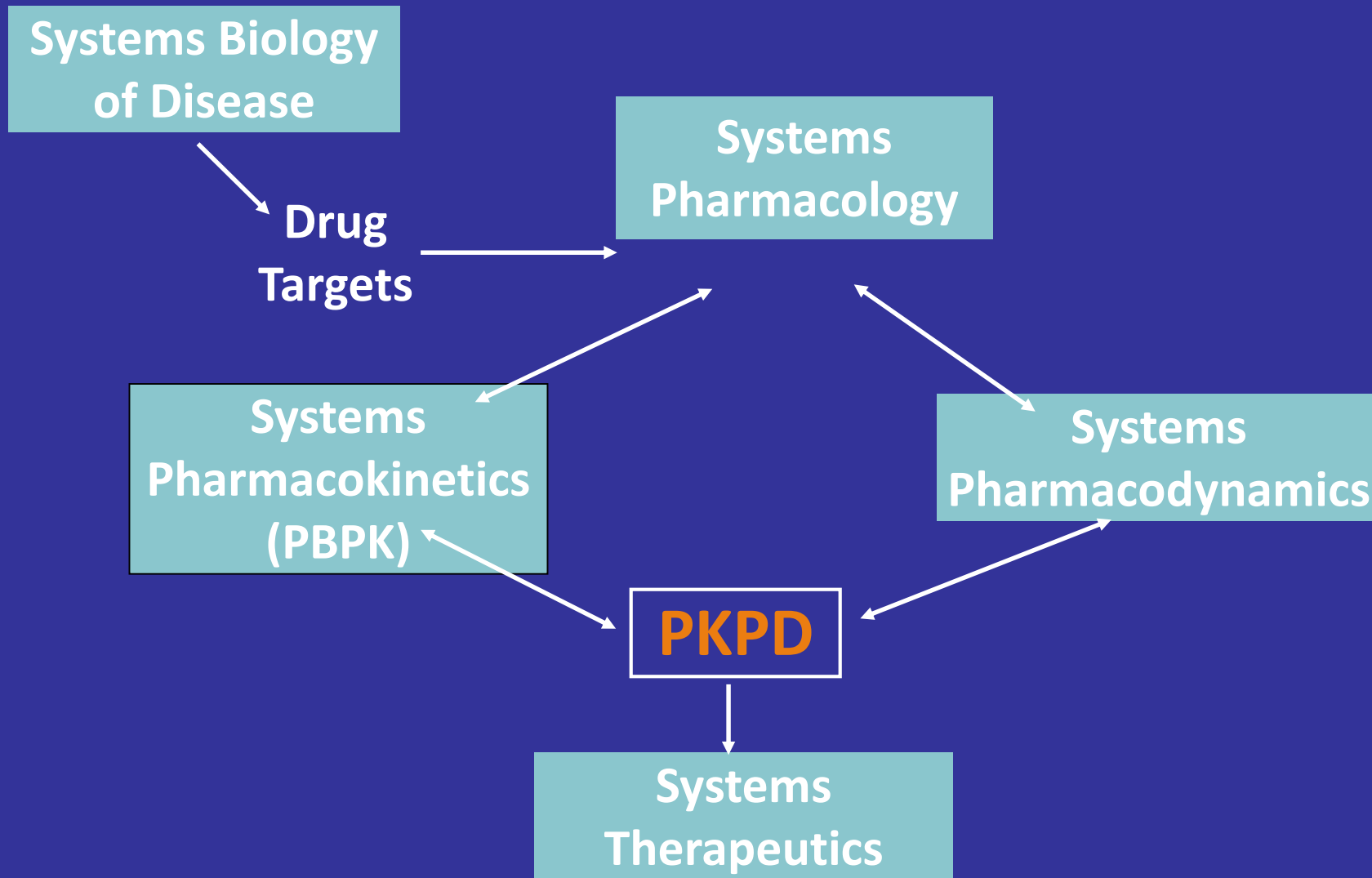
**THERAPEUTIC
ADVANTAGES**

SUBSTITUTION THERAPY

**TECHNOLOGICAL
CHALLENGES &
INNOVATION**

**CHEMICAL COMPATIBILITY,
RELEASE KINETICS,
VARIABILITY**

DRUG SEPARATION



→ *Multitarget Drugs*

→ *Rational Single Target Drug Combinations*

Guidelines

- 1. Guideline on **clinical development of fixed combination** medicinal products, CHMP/EWP/240/95 Rev. 1 (19 February 2009)
- 2. **Concept paper** on the need to revise the Guideline on the clinical development of fixed dose combinations of medicinal products regarding dossier content requirements, EMA/CHMP/779887/2012 (11 February 2013)
- 3. Guideline on **clinical development of fixed combination** medicinal products, EMA/CHMP/158268/2017 (23 March 2017)
- 4. Guideline on clinical investigation of medicinal products in the **treatment of hypertension** – 9.Fixed-dose combinations, EMA/CHMP/29947/2013/Rev. 4 (23 June 2016)
- 5.

- ❖ No **specific guidelines** are available for the fixed-dose combination related to quality issues, meaning that the existing guidelines apply to pharmaceutical development!
- ❖ What are the **basic information** needed and **requirements** to be fulfilled!?

From a regulatory perspective..

EMA/CHMP/158268/2017

The ***basic scientific requirements for any fixed combination medicinal product*** are:

1. Justification of the pharmacological and medical ***rationale*** for the combination.
2. Establishment of the ***evidence base*** for the:
 - a. ***relevant contribution*** of all active substances to the desired therapeutic effect (efficacy and/or safety);
 - b. ***positive benefit-risk*** for the combination in the targeted indication.
3. ***Demonstration*** that the ***evidence*** presented - if based on combined administration of separate active substances - ***is relevant to the fixed combination medicinal product*** for which the application is made.

From a regulatory perspective..

EMA/CHMP/158268/2017

The therapeutic scenarios in which fixed combination medicinal products may be used are as follows:

- ***Add-on treatment*** of patients insufficiently responding to an existing therapy with one or more active substances
- ***Substitution therapy*** in patients adequately controlled with two or more active substances used in combination
- ***Initial combination therapy*** for patients receiving previously neither of the substance
- ***Additional requirements*** for development of fixed combination medicinal products with new active substance(s) (NAS)

Systems therapeutics poses new challenges and promotes innovation in drug delivery

Drug combinations →

- differences in the delivery rate of each separate compound may be needed, based on PKPD data
- Flexibility needed to cope with different dose ratios and with intersubject variability

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- ❖ No **specific guidelines** are available for the fixed-dose combination related to quality issues, meaning that the existing guidelines apply to **pharmaceutical development!**
- ❖ What are the **basic information** needed, the **possible strategies** and other **requirements** to be fulfilled!?

Nuova combinazione di nuova DS (NAS) con DS nota oppure di due DS note

Problematiche legate alle DSs

- **Completa caratterizzazione DS nuova**
- Solubilità in fluidi biologici pH 1-8
- Stabilità, ev. stabilizzazione
- Strategie per **↑**solubilità/dissoluzione
Amorfizzazione, effetto tampone, ...
Possibile introduzione di un sale e/o intermedio
- **Differente BCS class delle sostanze**
- Differenze di **dosaggio**
- **Compatibilità** chimica e fisica con gli eccipienti

Forma di dosaggio e sviluppo formulativo

- **Compatibilità** della miscela delle DSs
- Necessita di **granulazione separata**
Es. instabilità/scarsa solubilità di una DS
- Eventuale ricorso a **doppia compressione** (bi-strato) o **doppia incapsulazione**
- Ricorso a forma ad **unità multiple**
Es.: minicompresse +granuli/pellets in capsule

Nuova combinazione di **nuova DS (NAS)** con **DS nota**
oppure di due **DS note**

Sviluppo farmaceutico

- Necessità di introdurre un **intermedio** di processo e relativo controllo
- Necessità di sviluppare **diverse formulazioni** (es con un sale o una dispersione solida) **della nuova DS**
- Necessità di **diversi dosaggi della nuova DS** da somministrare in combinazione libera
- Necessità di produrre **diversi rapporti** della combinazione fissa (**strengths**)
- Necessità di **bridging fra le varie formulazione usate nei trial clinici**

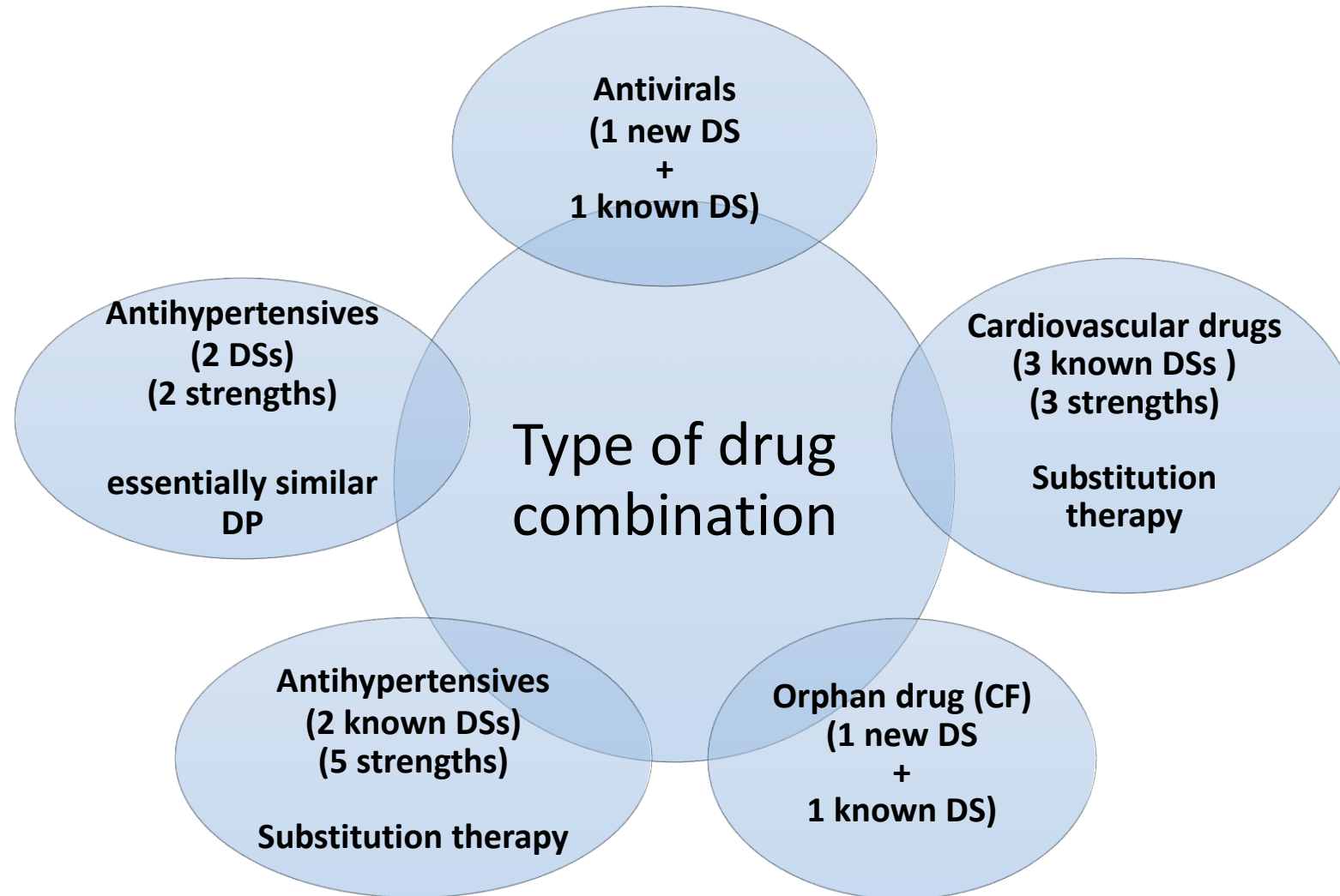
Sviluppo biofarmaceutico e clinico

- Messa a punto/disponibilità di **un test di dissoluzione validato e discriminatorio** per entrambi le DS
- Se necessario mettere a punto **un doppio test di dissoluzione** per rispettare le condizioni di sink (diverse solubilità nei mezzi fisiologici)
- **Biowaiver** per **diversi dosaggi (strengths)**, laddove applicabile

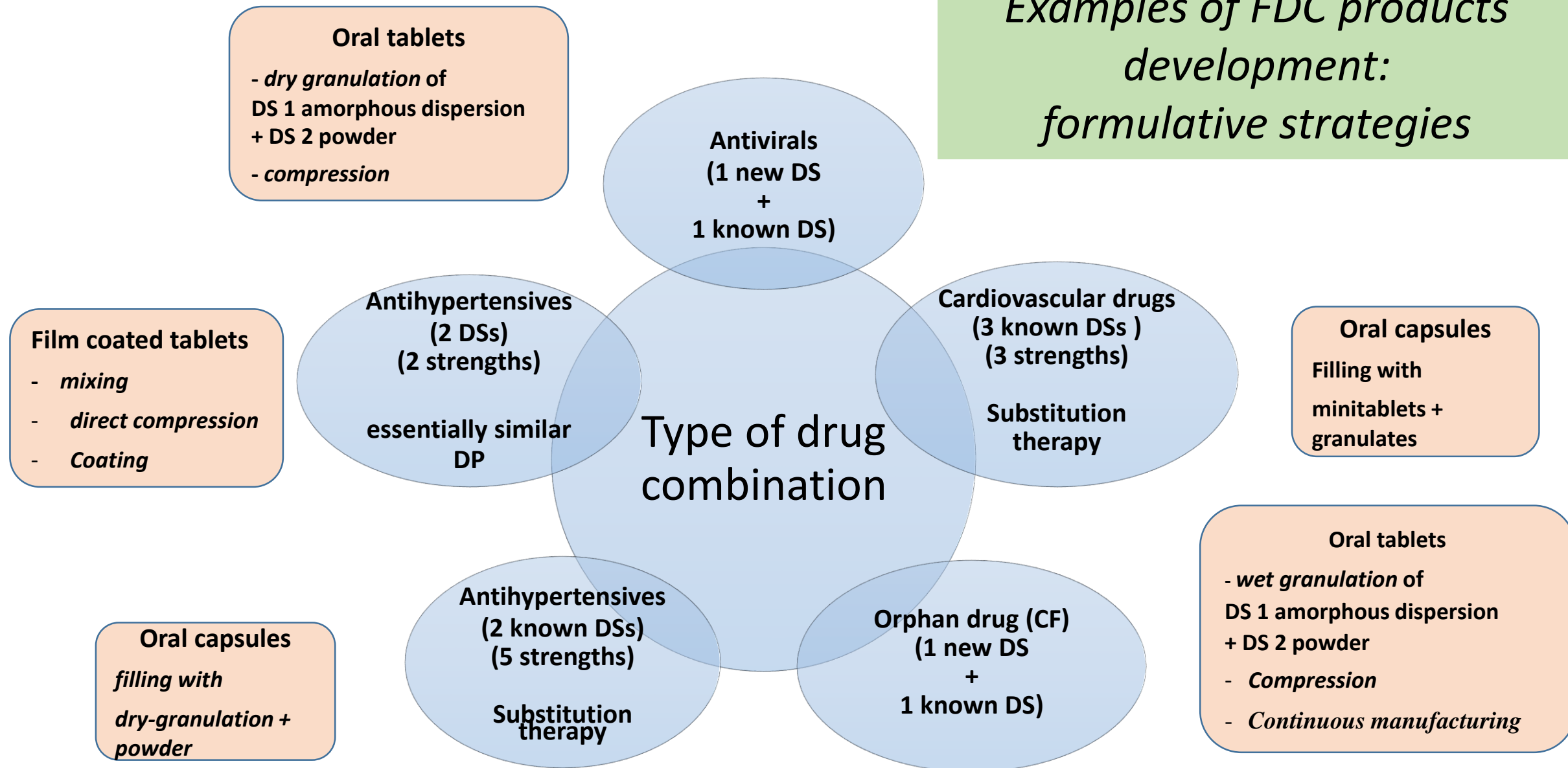
❖ **Sviluppo clinico completo**

❖ Studi di **bioequivalenza**

Examples of *fixed-dose combination (FDC)* products



Examples of FDC products development: formulative strategies



Examples of FDC products development: formulative strategies

Type of drug combination

Oral tablets

- *dry granulation of DS 1 amorphous dispersion + DS 2 powder*
- *compression*

Antivirals
(1 new DS + 1 known DS)

Antihypertensives
(2 DSs)
(2 strengths)

essentially similar DP

Cardiovascular drugs
(3 known DSs)
(3 strengths)

Substitution therapy

Oral capsules

Filling with minitables + granulates

Film coated tablets

- *mixing*
- *direct compression*
- *Coating*

Antihypertensives
(2 known DSs)
(5 strengths)

Substitution therapy

Orphan drug (CF)
(1 new DS + 1 known DS)

Oral tablets

- *wet granulation of DS 1 amorphous dispersion + DS 2 powder*
- *Compression*
- *Continuous manufacturing*

Oral capsules

filling with dry-granulation + powder

New combination: new DS 1 (NAS) plus known DS 2 (one strength 200/125 mg)
developed as ***orphan drug***

Drug substance 1

Appearance	White to off-white crystalline solid
pK_a-value:	<i>2.51 (basic) and 4.28 (acidic) at 25.0°C.</i>
Melting point	206 °C (DSC)
Partition coefficient:	log D is 2.29 at pH=7.4 and 25°C
Hygroscopicity:	Non-hygroscopic
Stereochemistry:	None
Polymorphism	Present. Form I and Form II are enantiotropically related (T _f =58-62°C) with Form I being the thermodynamically more stable above transition temperature. <i>Form I is used in clinical trials.</i>
Solubility (at room temperature and after 24 hours)	<i>Form I practically insoluble in water and buffer solutions pH 1.0 to pH 8.0</i> sparingly soluble to freely soluble in process relevant solvents

Drug substance 2 *

Appearance	White to off-white crystalline solid
pK_a-value:	<i>9.40 (acid) and 11.60(acid) at 24.8 – 25.0°C</i>
Melting point	292°C
Partition coefficient:	log D value is 5.68 at pH=7.4 and 25°C
Hygroscopicity:	Low (slight) hygroscopicity
Stereochemistry:	None
Polymorphism	Present. Mixture of two major crystalline neat polymorphic forms (B and C). Form C is the most thermodynamically stable form.
Solubility (at room temperature and after 24 hours)	<i>practically insoluble in the aqueous solvents tested at pH = 1.0 -7.0 (< 0.05 µg/mL)</i> and also in fasted and fed simulated intestinal fluids. more soluble in organic solvents than in aqueous solvents

*Used as spray-dried amorphous dispersion in stabilizing hydrophilic polymer and wetting agent (***intermediate***)

Pharmaceutical development

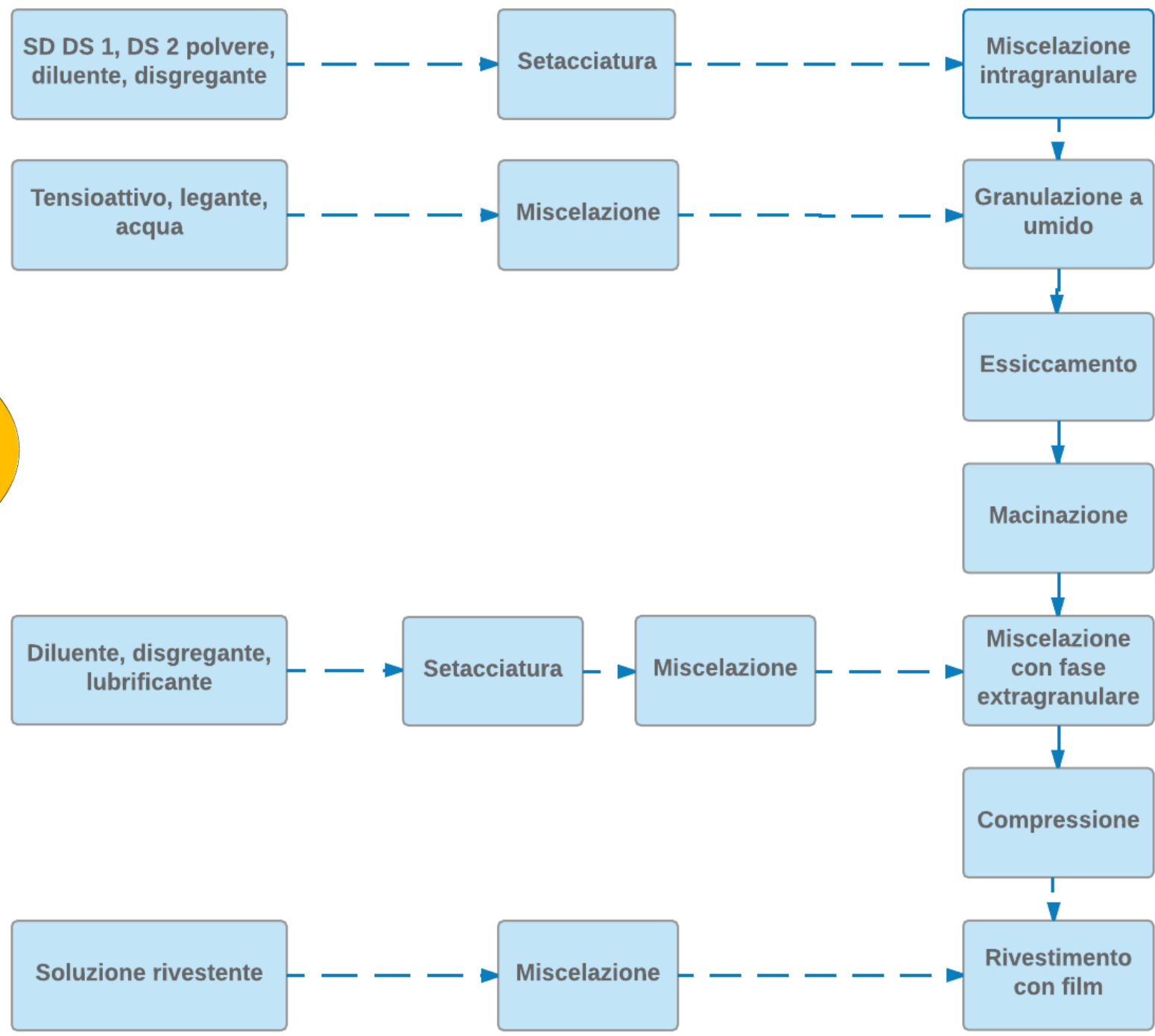
Step 1

- Desirable properties: **immediate release oral dosage swallowable, acceptable shape and size, reliable drug product quality**
- **Initial** development of an **immediate release dosage form** containing DS 1 (**suspension, capsule or tablet**) used in clinical trials
- **DS 2 already available** in suitable dosage form and used as **SDD intermediate**
- **Moving to combination therapy** new DS 1 formulations (eg smaller,...) are developed
- Then to enhance patient safety and compliance, **a fixed dose combination DS1/DS2(FDC) (200 mg/125 mg)** is developed
- no incompatibilities were detected between the two DSs, **physical separation not required**

Step 2

- A FDC tablet is obtained using known excipients and standard mft processes (**wet granulation then compression and coating**)
- It is based on **the same formulation** (and process) used in monotherapy (a portion of DS 1 in the intra-granular blend was replaced by DS 2 **keeping the ratio of the excipients the same**)
- a FDC tablet containing **200 mg DS1 and 83 mg DS2** was developed by changing the ratio of the drugs in the intra-granular blend, while **keeping the ratio of the excipients the same**
- **Bioequivalence** demonstrated using either a fixed dose combination tablet (200 mg /125 mg) or individual tablets

**Orphan drug (CF)
(1 new DS
+
1 known DS)**



Pharmaceutical development

Dissolution test dvl

- **Two independent in-vitro dissolution methods**, one for each active ingredient, were developed for testing both the FDC tablet, 200/125 mg and the FDC tablet, 200/83 mg.
- **The dissolution of DS 1** from the FDC tablets is determined using a medium of 0.5% cetyltrimethylammonium bromide (CTAB), pH 4.5 in Ph.Eur. 2.9.3 apparatus 2
- **The dissolution of DS2** is determined using 0.4% sodium lauryl sulfate (SLS), pH 6.8 also in Ph.Eur. 2.9.3 apparatus 2.
-

Manufacturing process dvl

- Intensive implementation of QbD
- Spray-drying of DS 1/polymer/surfactant mixture solvent solution
- Blending with DS 2 (micronized) and excipients
- Wet granulation (screw granulator)
- Drying in fluid bed drier
- Second blending and compression
- Continuous manufacturing and extensive PAT

*Examples of FDC products development:
formulative strategies*

**Antivirals
(1 new DS
+
1 known DS)**

Oral tablets
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- *compression*

**Antihypertensives
(2 DSs)
(2 strengths)**

essentially similar DP

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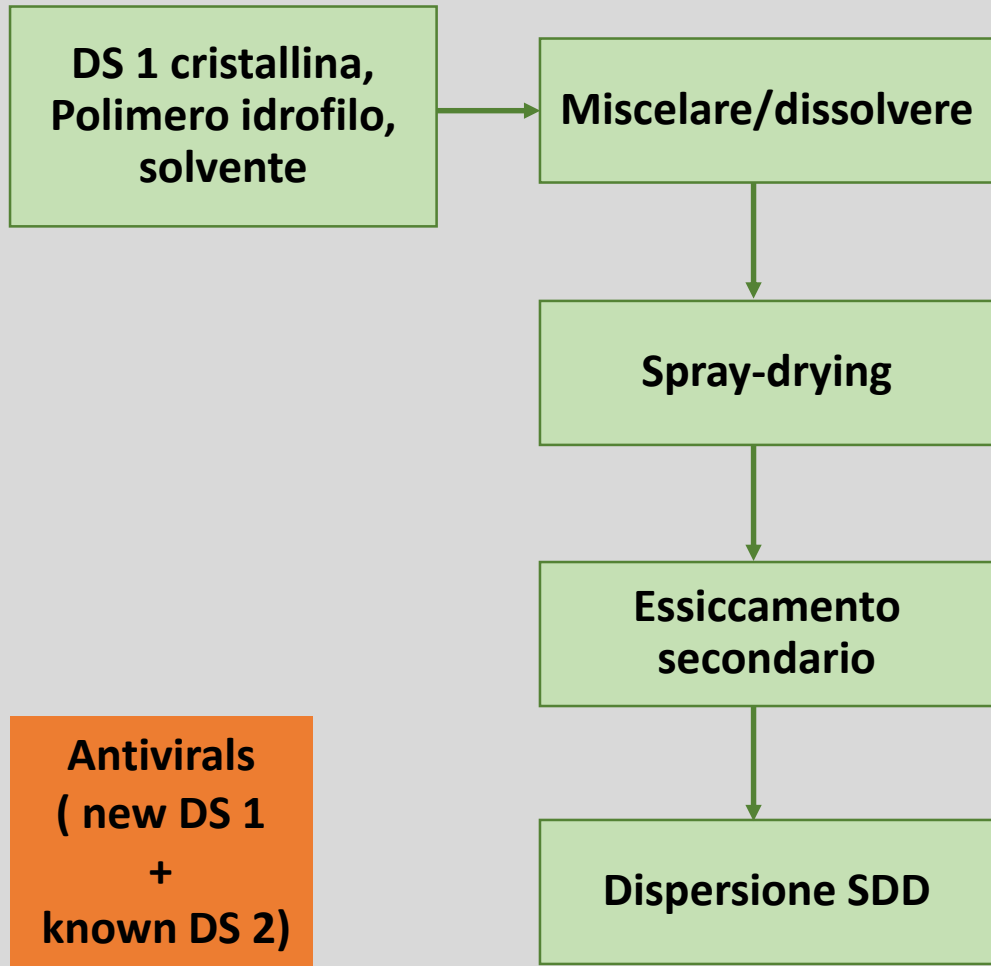
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**Antihypertensives
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(5 strengths)**

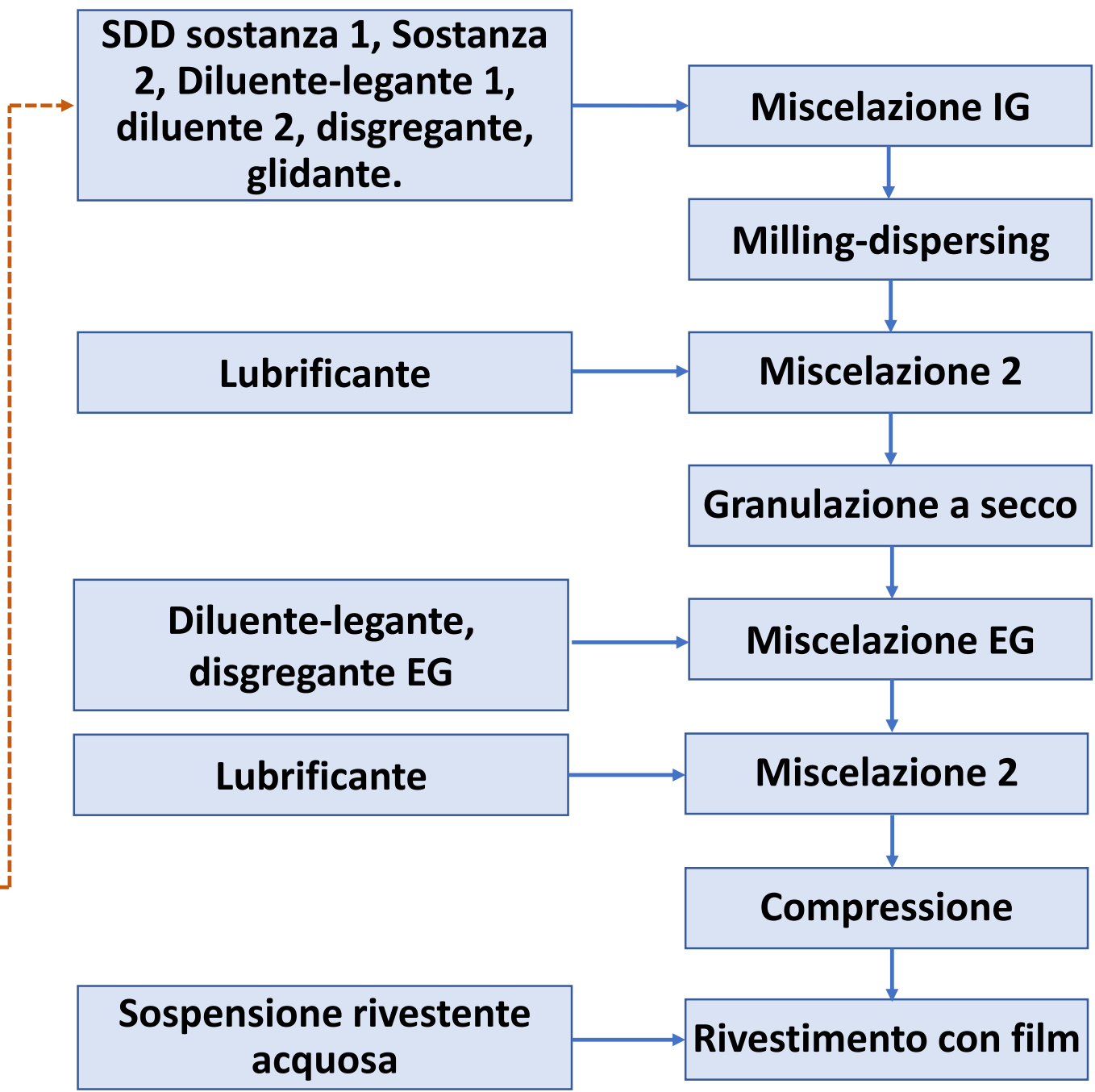
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Oral tablets
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- *Continuous manufacturing*



Antivirals
(new DS 1
+
known DS 2)



Conclusione

rules of thumbs and lessons learned

- Sviluppare una formulazione ***semplice e flessibile*** specialmente se ***DS NAS*** e in ***fase clinica 1*** (ev cambio di dosaggio)
- Tenere come base ***la formulazione della DS nota*** specialmente se possibile accomodare la DS nuova (es dosaggio più basso) o viceversa
- Nell'aggiungere nuovi dosaggi o strengths della FDC considerare le conseguenze in termini di ***numero di studi di BE*** necessari per il bridging
- Se si tratta di una FDC per terapia di sostituzione (***2 o + DSs note***), lo sviluppo farm. è avvantaggiato ma ***non sfugge alle problematiche di compatibilità, solubilità, stabilità, ..***
- problematiche di biowaiver per le ***diverse strengths***

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*Grazie per
l'attenzione*

