



Quality Considerations for Topical Ophthalmic Drug Products – Guidance for Industry

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Learning Objectives



- Provide an overview of the draft guidance
- Explain current practices on assessment of key topics discussed in the guidance

Scope of the Guidance

- Ophthalmic drug products intended for topical delivery
 - Gels, ointments, creams
 - Liquid formulations
 - Solutions, suspensions, and emulsions
 - NDAs, ANDAs, BLAs, OTC

Topics Covered

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- Microbiological Considerations
- Visible Particulate Matter
- Extractables and Leachables
- Impurities and Degradation Products
- In Vitro Drug Release/Dissolution Testing for Quality
- CCS Design and Delivery and Dispensing Characteristics
- Stability

Microbiological Considerations

- Provides for microbiological considerations related to product sterility for all ophthalmic drug products
- Emphasis on complying with CGMP requirements to ensure product quality
- Guidance for Industry *Sterile Drug Products Produced by Aseptic Processing—Current Good Manufacturing Practice* (September 2004) and
- *Submission Documentation for Sterilization Process Validation in Applications for Human and Veterinary Drug Products* (November 1994)

Microbiological Considerations

- Multidose Drug Products - Should remain free from harmful contamination following potential microbial ingress
- Use of preservative if drug product does not have inherently antimicrobial activity
- Using silver sulfate or other silver containing compounds as preservative
 - not recommended
- Multidose preservative free formulations
 - Robust protection for each unit from incidental contamination during multiple use
 - Validation of all aseptic and sterilization processes

Visible Particulate Matter

- Visual inspection to ensure products are not adulterated
- Drug products packaged in opaque container – use of non-destructive (e.g., X-ray) or destructive testing
- Suspensions and emulsions – stability testing to evaluate changes in particle size over the shelf life

Extractables and Leachables

- Assessment for extractables and leachables for primary, secondary and tertiary packaging components (including labeling) of CCS
- Framework for Extractable and Leachable studies
 - USP<1663> *Assessment of Extractables Associated With Pharmaceutical Packaging/Delivery Systems*
 - USP<1664> *Assessment of Drug Product Leachables Associated With Pharmaceutical Packaging/Delivery Systems*
 - *Guidance for Industry – Container Closure Systems for Packaging Human Drugs and Biologics: Chemistry, Manufacturing, and Controls Documentation (May 1999)*

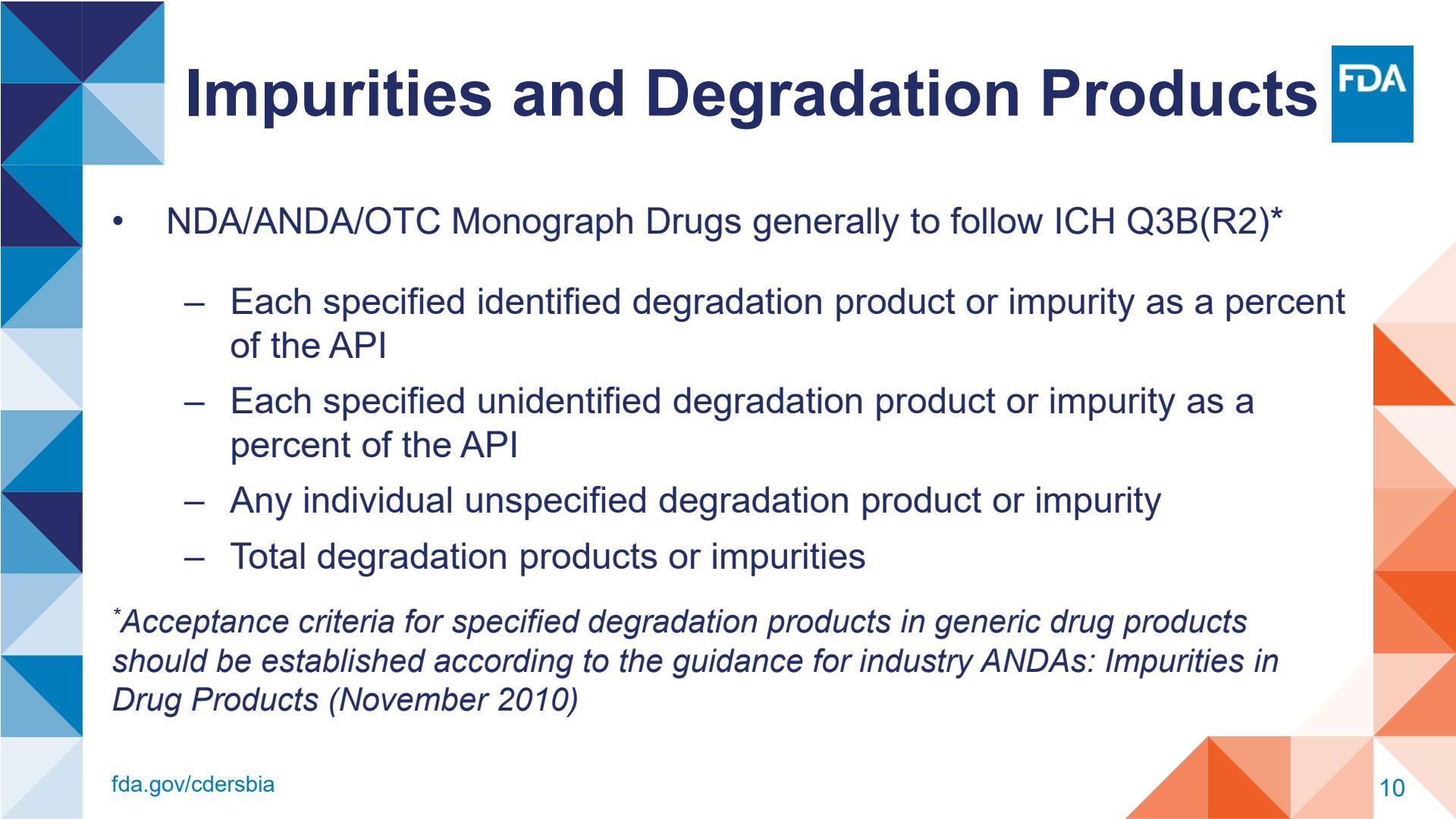


Extractables and Leachables



- Leachable Studies for CCS
- **Safety Thresholds**
 - Reporting threshold: 1 ppm
 - Identification threshold: 10 ppm
 - Qualification threshold: 20 ppm
- Analytical Method: $LOQ \leq IT$





Impurities and Degradation Products

FDA

- NDA/ANDA/OTC Monograph Drugs generally follow ICH Q3B(R2)*
 - Each specified identified degradation product or impurity as a percent of the API
 - Each specified unidentified degradation product or impurity as a percent of the API
 - Any individual unspecified degradation product or impurity
 - Total degradation products or impurities

**Acceptance criteria for specified degradation products in generic drug products should be established according to the guidance for industry ANDAs: Impurities in Drug Products (November 2010)*

Impurities and Degradation Products

FDA

- Individual unspecified degradation products or impurities – different than corresponding thresholds in ICH Q3B(R2)
 - Potential for high local concentration in the eye
 - Lack of data on potential effects

FDA's Recommended Thresholds for Unspecified Degradation Products or Impurities in Ophthalmic Drug Products*

Drug Product Strength (% w/v)	Recommended Identification and Qualification Threshold
Greater than 0.1% to less than or equal to 1%** (> 0.1% to \leq 1%)	0.1%
Less than or equal to 0.1% (\leq 0.1%)	1% or 1 ppm***

*These recommended thresholds apply to OTC monograph ophthalmic drug products and ophthalmic drug products submitted under NDAs and ANDAs.

** Limits above 1% will be evaluated on a case-by-case basis.

*** Whichever is higher; ppm=parts per million (i.e., parts of a leachable per unit mass of the ophthalmic drug product).

- For impurities above IT/QT – Safety information should address both local ocular toxicity as well as general systemic toxicity

In Vitro Drug Release/Dissolution

- Rate and extent of drug release – quality criteria to ensure consistency for suspensions, emulsions and semi-solids
- In vitro drug release/dissolution – part of quality control strategy
- Alternatively, using one or more CQAs sensitive to the formulation and process variants

Challenge Question #1



For leachables study in topical ophthalmic drug products, threshold at or above which the observed leachable should be qualified for safety is:

- A. 1 ppm
- B. 10 ppm
- C. 20 ppm
- D. 0.1%

CCS Design and Delivery and Dispensing Characteristics



- **Tamper-Evident Packaging**
 - For non-retaining tamper-evident ring
 - Consumer complaints – rings slip off bottle neck



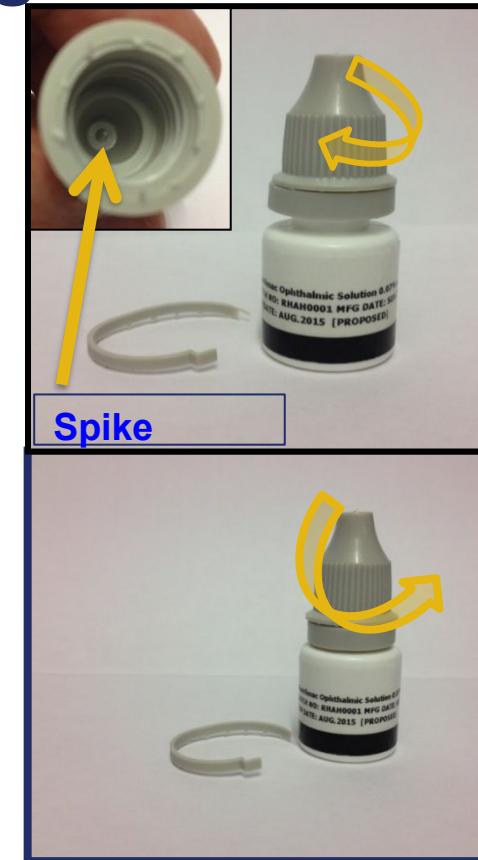
- Recommendation: Positive-retention mechanism to prevent rings from coming off during use

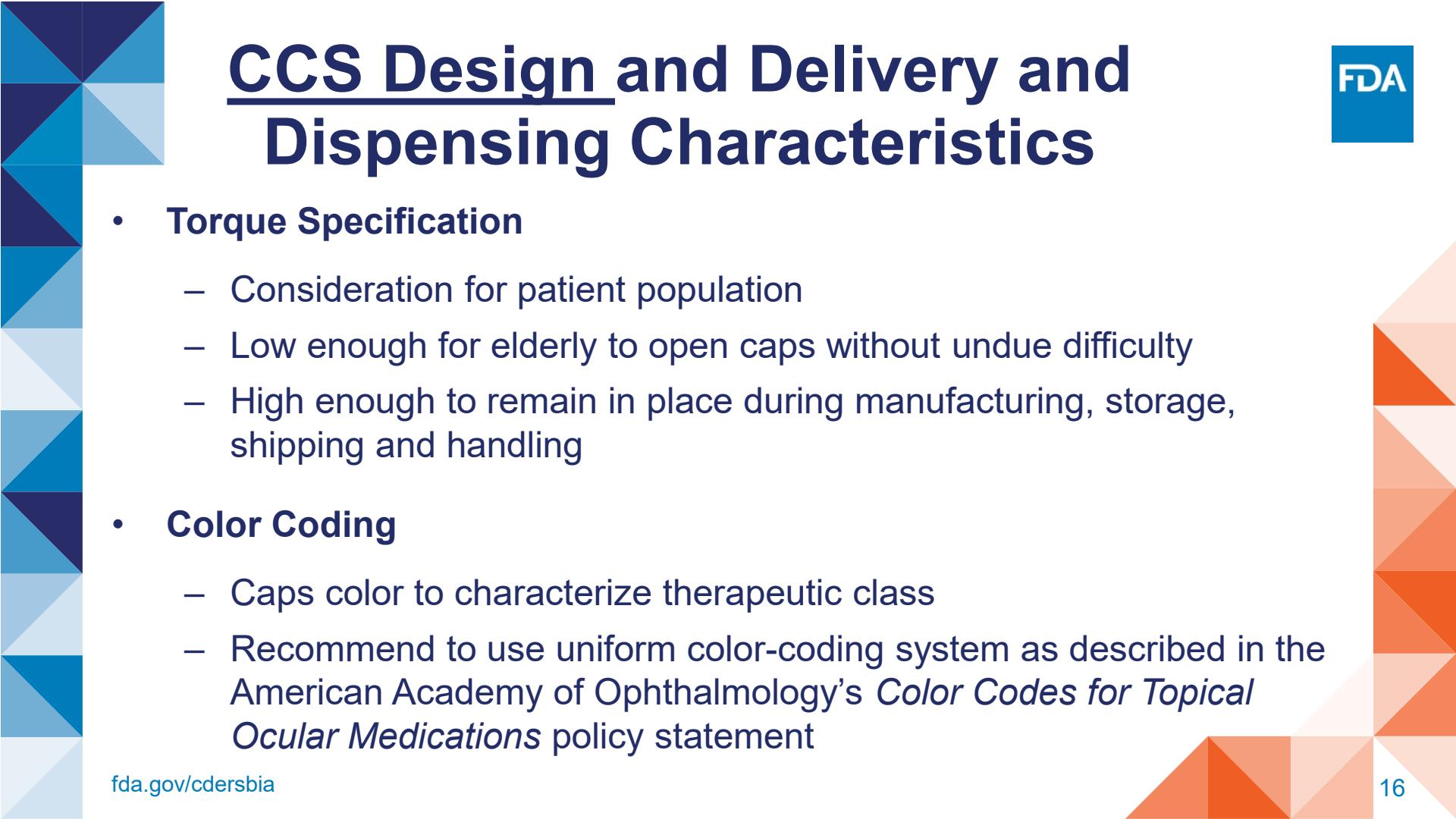
CCS Design and Delivery and Dispensing Characteristics



- **Tips**

- CCS designs with tip sealed until opening
 - multistep procedure to unseal the tip is discouraged
- Complex procedure leads to confusion
- Recommend use of single-step procedure with simple directions and twisting the cap without removing it

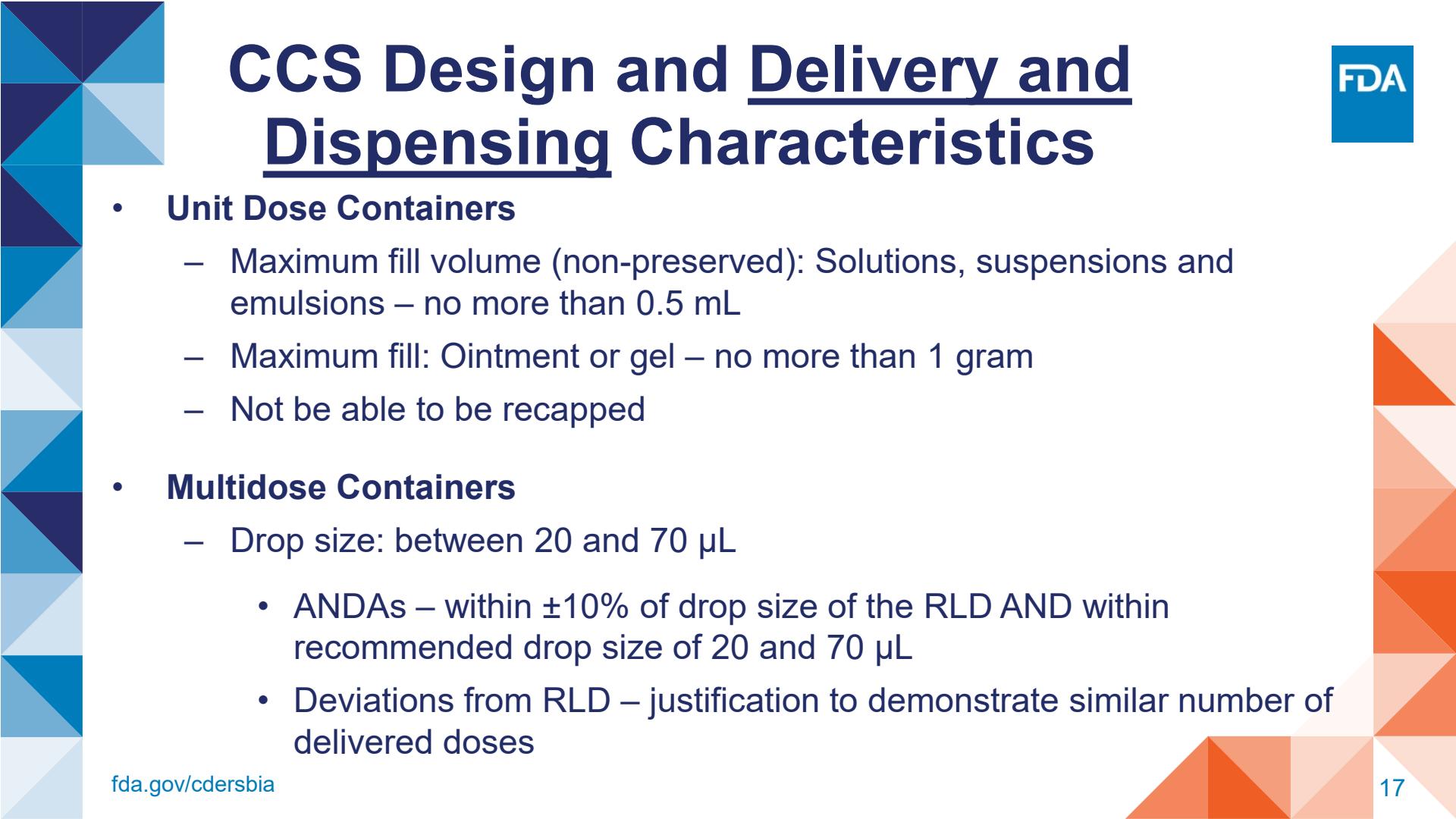




CCS Design and Delivery and Dispensing Characteristics



- **Torque Specification**
 - Consideration for patient population
 - Low enough for elderly to open caps without undue difficulty
 - High enough to remain in place during manufacturing, storage, shipping and handling
- **Color Coding**
 - Caps color to characterize therapeutic class
 - Recommend to use uniform color-coding system as described in the American Academy of Ophthalmology's *Color Codes for Topical Ocular Medications* policy statement



CCS Design and Delivery and Dispensing Characteristics



- **Unit Dose Containers**
 - Maximum fill volume (non-preserved): Solutions, suspensions and emulsions – no more than 0.5 mL
 - Maximum fill: Ointment or gel – no more than 1 gram
 - Not be able to be recapped
- **Multidose Containers**
 - Drop size: between 20 and 70 μ L
 - ANDAs – within $\pm 10\%$ of drop size of the RLD AND within recommended drop size of 20 and 70 μ L
 - Deviations from RLD – justification to demonstrate similar number of delivered doses

CCS Design and Delivery and Dispensing Characteristics



- Multidose Containers – Suspensions
 - Resuspendability/Redispersibility
 - Qualitative test – performed per labeling instructions to mimic actual patient use conditions
 - Acceptance criteria – time for resuspension of drug product after storage: e.g., NMT 15 – 30 seconds
 - Dose Uniformity of Suspension drug products
 - One-time dose uniformity study
 - Quantitative test – unit dose samples from top, middle and bottom of container – after shaking per labeling instructions
 - From at least three pilot or exhibit batches
 - Samples tested for assay – using assay acceptance criteria
 - Ensure drop homogeneity within the entire container throughout product shelf life

Stability

- Appropriate Storage Conditions
- Ophthalmic drug products packaged in semi-permeable containers (e.g., LDPE), should be kept in low relative humidity conditions.
- Recommended ICH Q1A(R2) conditions
 - Long Term: $25^{\circ}\text{C} \pm 2^{\circ}\text{C}/40\% \text{ RH} \pm 5\%$ RH or $30^{\circ}\text{C} \pm 2^{\circ}\text{C}/35\% \text{ RH} \pm 5\%$
 - Intermediate: $30^{\circ}\text{C} \pm 2^{\circ}\text{C}/65\% \text{ RH} \pm 5\%$
 - Accelerated: $40^{\circ}\text{C} \pm 2^{\circ}\text{C}/\text{NMT } 25\% \text{ RH}$
- Higher RH may be employed – deriving water loss at the reference RH through calculation – ICH Q1A(R2)

Stability

- Container Orientation During Storage
 - NDAs: Preliminary development work to evaluate storage conditions
 - two different orientations – upright and inverted or horizontal
 - Worst-case orientation for batches representing commercial manufacturing process
 - ANDAs: Two different orientations – primary stability batches – upright and either inverted or horizontal
 - Data from both orientations
 - Worst-case orientation for routine stability
 - BLAs: Primary stability studies to determine storage under real-time conditions

Stability

- Water Loss
 - Moisture transmission properties of the CCS and protective properties of any secondary packaging
- Freeze/Thaw Study
 - One-time study for suspensions and emulsions
 - Three cycles – freezing (-20°C to 0°C) and ambient (25°C – 35°C) for a cumulative minimum of 3 days
 - Alternative conditions and durations should be adequately justified
- In-Use Stability
 - To support labeling claims – storage conditions that may change after opening
 - Change in temperature
 - Light exposure

Challenge Question #2



Which of the following studies is most suitable to mitigate the risk to drug product quality for ophthalmic suspensions and emulsions due to temperature variations during shipping and storage?

- A. In-Use stability study
- B. Photostability study
- C. Water loss study
- D. Freeze/Thaw study

Take Home



- The draft guidance provides recommendations for certain quality considerations for topical ophthalmic drug products
- The draft guidance also provides recommendations on the documentation
- Adequate supporting data in ANDA applications to ensure smooth and timely assessment of applications



Questions?

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