



Bristol-Myers Squibb Company

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April 19, 2006

**Dockets Management Branch
Food and Drug Administration, HFA-305
5630 Fishers Lane, Room 1061
Rockville, MD 20852**

Re: Docket No. 2005N-285; Current Good Manufacturing Practice Regulation and Investigational New Drugs, Direct Final Rule, 71 Federal Register 2458 (January 17, 2006); Docket No. 2005N-285; Current Good Manufacturing Practice Regulation and Investigational New Drugs, Proposed Rule, 71 Federal Register 2494 (January 17, 2006); Docket No. 2005N-286; Draft Guidance for Industry on Investigational New Drugs; Approaches to Complying with Current Good Manufacturing Practices During Phase 1; Availability, 71 Federal Register 2552 (January 17, 2006)

Dear Sir or Madam:

Bristol-Myers Squibb (BMS), a diversified global health care company, is pleased to have the opportunity to offer comments on the **Draft Guidance for Industry on Investigational New Drugs; Approaches to Complying with Current Good Manufacturing Practices During Phase 1**. Our company's mission is to extend and enhance human life by providing the highest-quality pharmaceutical and related health care products. For this reason, we are interested in commenting on the Draft Guidance for Industry on Investigational New Drugs- Approaches to Complying with Current Good Manufacturing Practices During Phase 1. Our comments are set forth below.

Summary of BMS Comments on Proposal

We commend the FDA for the efforts to assist persons producing drug and biological products (investigational drugs) for use in phase 1 development while complying within CGMPs. There are, however, several aspects of the Draft guidance that we would offer comment, which we have cited below.

2005D-0286

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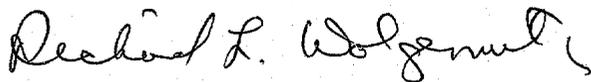
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Specific Comments (Items that Need Clarification & Recommended Actions)

- Where vague terms are used it is recommended that additional clarification be provided by citing examples of what is included or excluded. Examples of vague terms include
 - Line 35 most investigational drugs
 - Line 75 certain exploratory products
 - Line 135 most drugs
 - Line 158 most phase I studies
- More detail regarding the scope and level of detail of the proposed QC plan is recommended. It also does not appear to be fully aligned with EU Directive/Annex 13.
- The guidance is a departure from EC Annex 13 and ICH Q7A. It permits a new level of quasi-GMP that multi-national firms may not realize a benefit as they produce investigational articles for use in a global environment.
- The guidance would gain greater clarity if a more consistent use of terms within the guidance is applied. It is recommended that the terms Quality Unit, Quality Control and Quality Assurance not be used interchangeably, but rather the specific organizational unit intended be used in a more consistent manner.
- The guidance would be strengthened if it were further aligned with other guidance documents such as ICH Q8 Pharmaceutical Development (EMEA/CHMP/167068/2004) and ICH Q9 Quality Risk Management.
- The guidance may be misinterpreted as to the requirements for assuring sterility of injectable products or aseptically processed products. This is most pronounced in relation with the need for environmental monitoring and qualification of the aseptic processing by media fill runs. The guidance as delineated in section VI may not be sufficient to demonstrate, without reasonable doubts, the sterility and biological purity of a phase I drug product to be injected in a healthy human subject. In this regard, we would recommend that the requirements are strengthened to harmonize with the FDA guidance on aseptic processing or specifically exclude sterile dosage forms from the scope of this guidance.

BMS appreciates the opportunity to provide comment and respectfully requests that FDA give consideration to our recommendations. We would be pleased to provide additional pertinent information as may be requested.

Sincerely,



Richard Wolgemuth, Ph.D.
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Global Regulatory Sciences