## Developing Complex Generics-How to Ensure Success-Industry Perspective

Gregg DeRosa- SVP Generic Clinical R&D and Internal Clinics Generic and Biosimilar Medicines Conference- November 4, 2019



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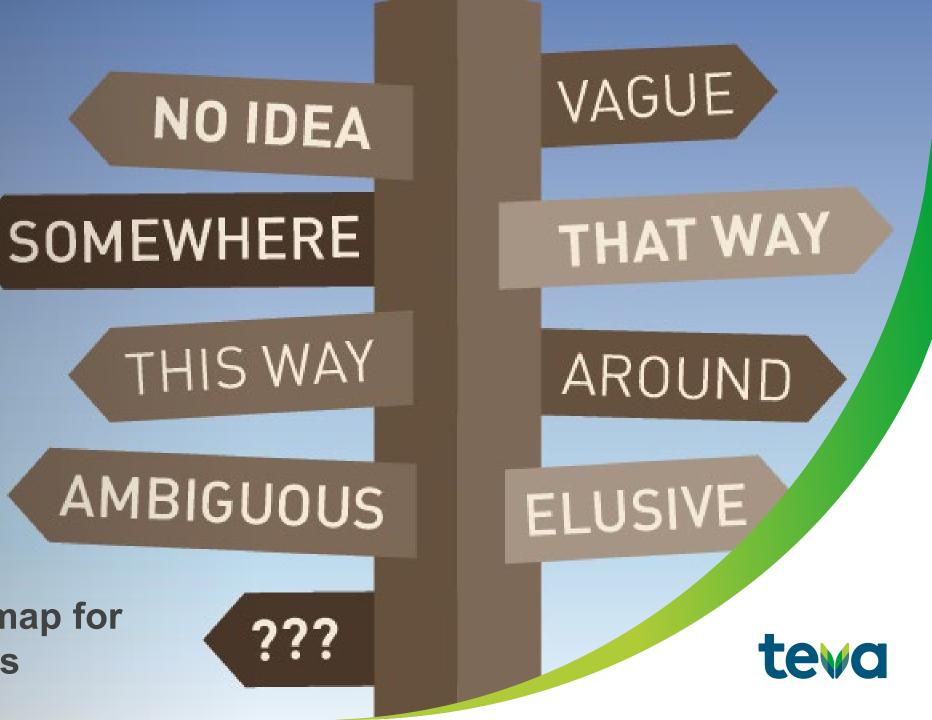




### LOST???

I wish we had good directions?!?!





**Pre-GDUFA** roadmap for **Complex Generics** 

# How has the roadmap improved? Are we better off now?

It helps if you follow the directions



### History and Progress

GDUFA has ushered in major progress

- Since 2012 close to 900 product specific guidances have been issued
  - Almost 40% of those are for complex products
- As part of GDUFA II more interaction with FDA can occur through the Pre-ANDA program
  - Product Development meetings
  - Pre-submission meetings
  - Mid cycle review meetings
  - MAAP 5220.8 issued in September 2019, outlining the policies and procedures for such meetings
- Overall, this leads to more guidance and interaction with the agency than ever before



### What are Complex Generic Drug Products?

- Complex products include:
  - Complex routes of delivery
  - Complex formulations
  - Complex API
  - Complex Drug-Device combinations
  - Complex Dosage Forms
  - Other products- where approval pathway is uncertain or an alternative approach may be warranted with early scientific input from FDA





### What are the "goals" for FDA in meetings with industry

- Product Development Meetings
  - FDA can meet the Goal by either
    - conducting a meeting or
    - providing a <u>meaningful</u> written response that will inform development and/or regulatory decision making to the applicant, within the applicable goal date
- Pre-Submission Meetings
  - Grant/Deny
    - 1<sup>st</sup> 2 years of GII within 30 days
    - last 3 years GII within 14 days
- Meetings to be held within 120 days of being granted.

### You are about to develop a complex generic

What are your options?



#2 - If there is no PSG- approach FDA through a predevelopment meeting

> #3 - Alternate approach to the PSG- approach FDA - predevelopment meeting

- #4 Proceed at your own peril
- > #5 Go back to developing simple products



# Other FDA interaction opportunities- Controlled correspondence

- Controlled Correspondence (CC)
  - FDA will review and respond to standard CC's and to complex CC's with meaningful responses that can more consistently inform development and/or regulatory decision making
    - Review & respond to Standard CC's w/in 60 days of submission
    - Review & respond to Complex CC's w/in 120 days of submission
  - FDA will review and respond to 90% of requests to clarify ambiguities in the CC response w/in 14 days of receipt of such request.



- If you are unsure, utilize the pre-ANDA meeting as well as other avenues, throughout the development process
- Take advantage of pre-ANDA and post CRL meetings to get FDA concurrence
- Do not expect FDA to do your work for you!! Non specific questions or seeking solutions from the agency will lead to a denial of the meeting
- All meeting requests should be supported with data, and suggestions from the sponsor on how to solve the problem/issue
- Make the interaction with FDA be a normal routine. Incorporate this behavior in your development process and timelines



### How to ensure success (continued)

- Understand your product! Based on the target product profile, have well defined critical quality attributes (CQA's)
- Understand the Critical process parameters (CPP) in your manufacturing process and how changes can affect the product
- Ensure your critical materials are secured and available throughout development and submission process (API, critical excipients etc.)
- Continual testing of RLD throughout the development and submission process, so potential RLD changes can be identified early and included in the development plan
- Specifically for products with complex API, ensure you are using the most modern, quantitative analytical techniques to characterize and establish API sameness



### How to ensure success (continued)

- For implants and IUD's, develop discriminatory, accelerated and predictive (if possible) drug release methods
- For drug-device combinations:
  - Conduct your pivotal BE study on the to be marketed device
  - Consider the overall presentation and the user interface during development
  - To support design differences between generic drug-device and RLD, three point threshold analysis along with comparative use human factor studies should be conducted
  - Device should be shown to be compatible with the formulation through appropriate studies (extractable/leachable studies etc.)



- Teva has had numerous opportunities to interact with the agency for pre-ANDA, post-CRL and pre-submission meetings
- In general:
  - The products included in our experience examples were drug-device combinations, complex formulation, complex dosage form and complex API
  - When we submitted a complete package with clear and concise questions, we received detailed, thoughtful and scientific responses that were extremely helpful to our development process
  - When we submitted a less robust package or unclear questions, the responses were less than optimal
  - In the end, the more robust the package, the better the feedback



### Teva's experience (continued)

- One recent glaring example of a very poor interaction with FDA that Teva recently experienced
  - The product is a complex API
  - PSG is available since 2015
  - Teva followed the PSG and submitted the product
  - Teva received a major CRL stating the BE was inadequate
  - We were puzzled because we followed the recommendations in the PSG
  - FDA informed us another study was needed
  - We asked for clarification at a post-CRL meeting and were told another study is needed but FDA could not give us any detail on what they expected and suggested we submit a protocol.
  - We now have no clear regulatory pathway to approval and no idea how to proceed, because we believe the current PSG is adequate



### Some final thoughts and suggestions

- For sponsors:
  - Take advantage of the opportunities to interact with FDA
  - Don't think FDA will do your job for you, the interactions are only meaningful if you put the effort and thought into them
- For FDA:
  - Please post a timeline on when the PSG's you are working on will be available
  - When updating guidances, could we get a "track changes" version, so we can clearly see what has changed?
  - When asking for additional studies in a CRL (in vitro or in vivo) is there any other more substantive mechanism to interact other than a post-CRL meeting?
  - While you are working on alternatives to CE studies, is there an opportunity to simplify the current designs, not just a copy of what the innovator did?



### Before and After GDUFA for Complex Products







#### Acknowledgements

**A BIG THANK YOU** 

- Scott Tomsky, Teva
- > Anil Sachdeva, Teva
- > Elizabeth Rody, Teva
- > Nageshwar Thudi, Teva
- > Cory Wohlbach, Teva





