

# WHY DO WE CALL EXCIPIENTS IN TOPICAL PRODUCTS INACTIVE INGREDIENTS?

#### **FDA-USP Workshop on Standards for Pharmaceutical Products:** Critical Importance of Excipients in Product Development Why Excipients are Important Now and In the Future

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- I do not have any financial interest or conflict of interest with any pharmaceutical companies.

### The Roles of Topical Excipients

- Nominal functions of topical excipients
  - Penetration enhancers/modifiers
  - Emulsifiers/stabilizers
  - Viscosity modifiers
  - Gelling agents
  - Preservatives
  - Vehicle bases, Emollients
  - Colorants, Fragrances, Flavorants
  - pH adjusters
  - Solvents
  - Etc.

#### Active vs. Inactive Ingredients



- An Active Ingredient (per 21 CFR 210.3(b)(7))
  - Any component of a drug product intended to furnish pharmacological activity or other direct effect in the diagnosis, cure, mitigation, treatment, or prevention of disease, or to affect the structure or any function of the body.
- An Inactive Ingredient (per 21 CFR 210.3(b)(8))
  - Any component of a drug product other than the active ingredient

#### Active vs. Inactive Ingredients



- An Active Ingredient
  - Directly responsible for therapeutic effect, frequently via activity in a molecular mechanism associated with the disease state.
- An Inactive Ingredient
  - Theoretically inert with respect to the disease state
  - Facilitates the formulation of the active ingredient in a dosage form appropriate for dose administration

#### Active vs. Inactive Ingredients



- Do topical excipients act on the disease state?
  - Inactive ingredients in a placebo vehicle may account for 40% of the therapeutic effect; the active ingredient may only account for an additional 20% of therapeutic effect.
  - Inactive ingredients may modulate the delivery/bioavailability of the active ingredient, which then acts on the disease state. This is the most widely characterized.
  - Do changes in the quality of topical excipients impact therapeutic effect, either way?

Hydrocortisone Ointment, USP



• USP 39 – NF 34 Monograph

#### **Hydrocortisone Ointment**

#### DEFINITION

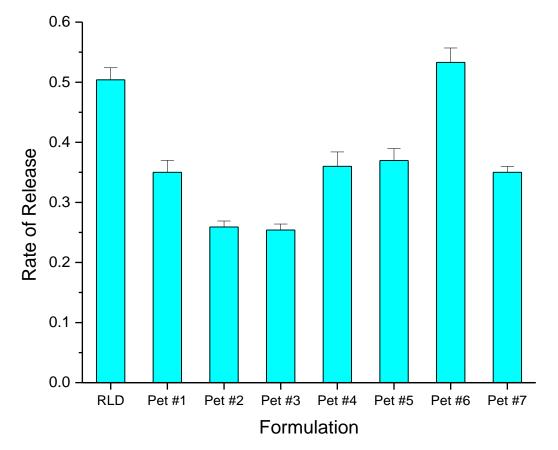
Hydrocortisone Ointment is Hydrocortisone in a suitable ointment base. It contains NLT 90.0% and NMT 110.0% of the labeled amount of hydrocortisone (C<sub>21</sub>H<sub>30</sub>O<sub>5</sub>).

- What is a suitable ointment base?
  - Would a PEG ointment base be suitable?
  - Is it suitable as long as it is Petrolatum, USP?

#### **Effects of Excipient Quality**



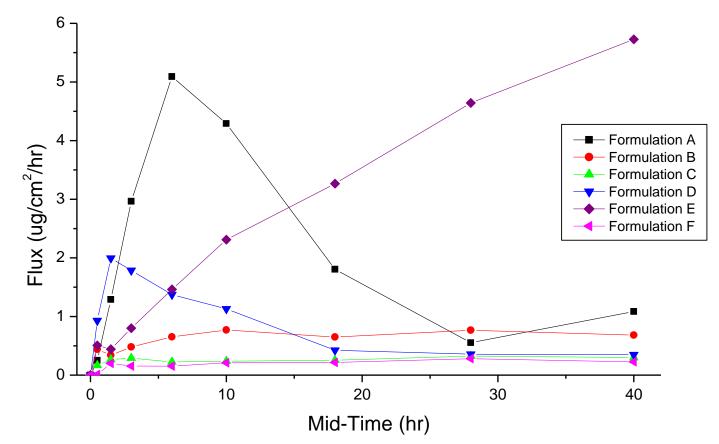
• IVRT results of a drug product formulated with Petrolatum, USP from seven different sources



Data provided courtesy of Paul A. Lehman and Dr. Thomas J. Franz

### **Effects of Excipient Composition**

• IVPT results of a drug product formulated with different excipients (inactive ingredients)



Data provided courtesy of Paul A. Lehman and Dr. Thomas J. Franz

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## Effects of Excipients on Bioavailability

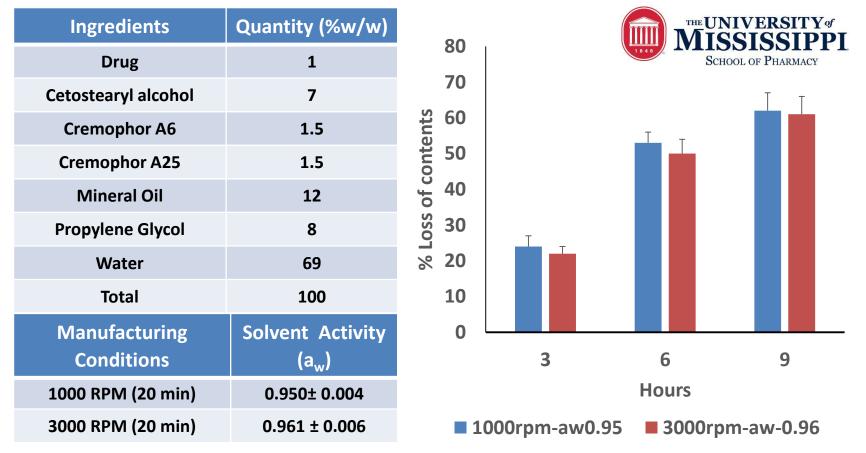
- It is widely understood that the formulation of a topical semisolid dosage form matters greatly
- It is now increasingly clear how excipients exert their influence, by modulating the physicochemical and microstructural arrangement of matter in the dosage form
- The resulting physical and structural characteristics of topical dosage forms, and their metamorphic properties on the skin, can directly influence topical bioavailability

### Effects of Excipients on Bioavailability

- Excipient quality and composition can affect:
  - The phase states and the arrangement of matter
  - Drug diffusion within the dosage form
  - Drug partitioning from the dosage form into the SC
  - Alteration of skin structure and chemistry
  - Drug diffusion within the skin itself
  - Drug delivery & bioavailability at the target site
  - Skin (de)hydration, irritation or damage
  - Metamorphosis of the dosage form on the skin



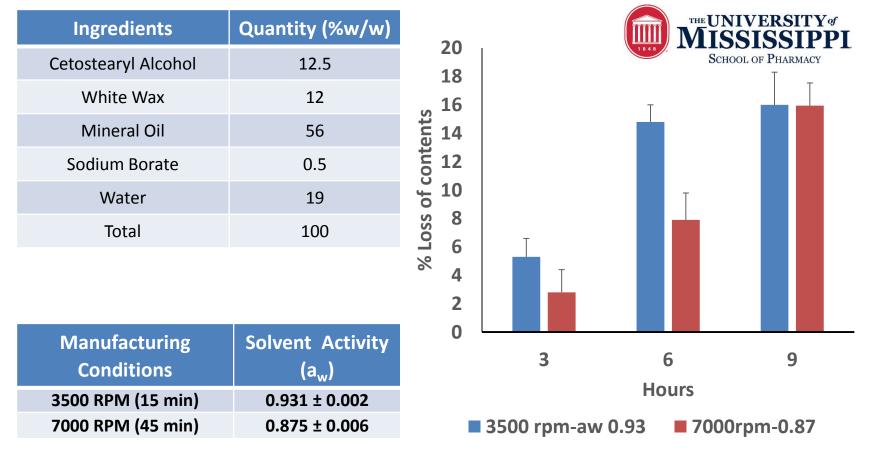
• Solvent Activity of Q1/Q2 Identical Creams Prof. Narasimha Murthy FDA Award U01-FD005223



Data provided courtesy of Prof. Narasimha Murthy



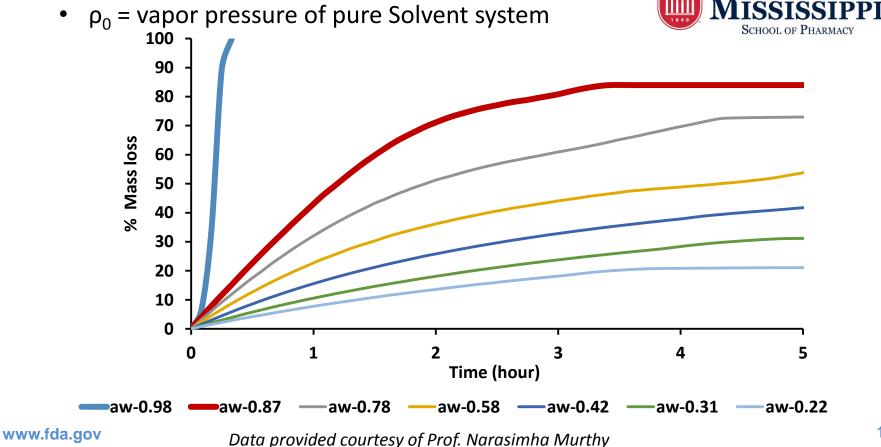
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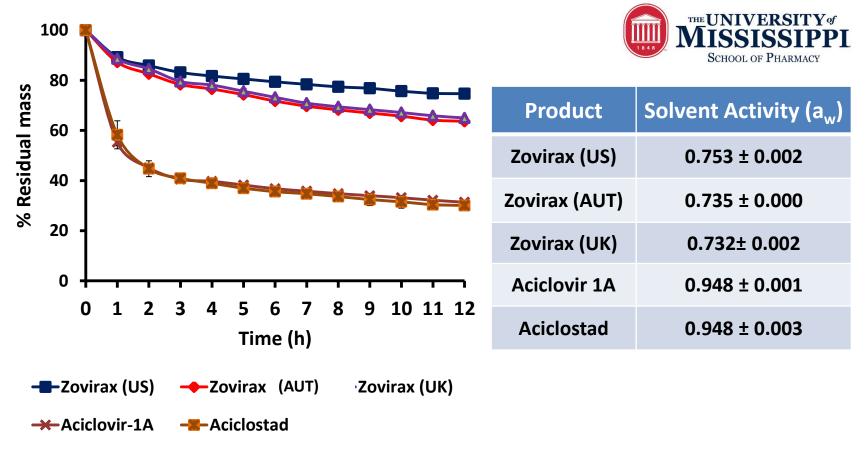
Data provided courtesy of Prof. Narasimha Murthy

- Solvent Activity  $(a_s) = \rho/\rho_0$  **Prof. Narasimha Murthy** FDA Award U01-FD005223
  - $\rho$  = partial vapor pressure of Solvents in the product



FD/

• Solvent Activity and Drying Rate Prof. Narasimha Murthy FDA Award U01-FD005223



Data provided courtesy of Prof. Narasimha Murthy

### **Excipients Affect Product Quality**

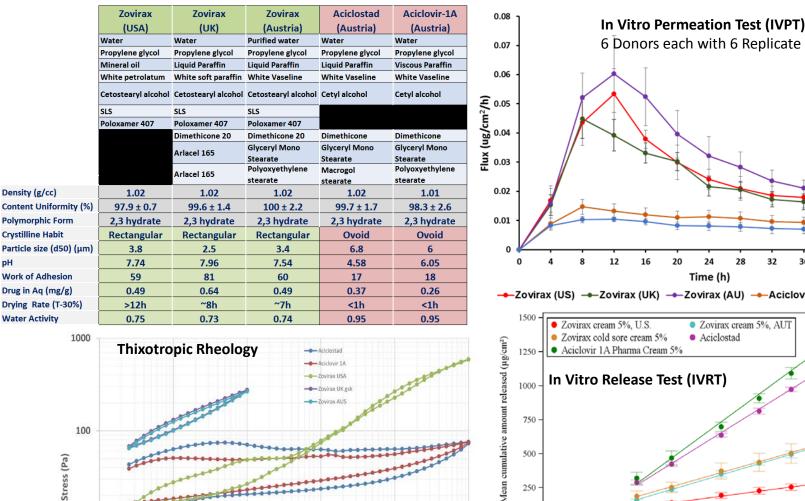


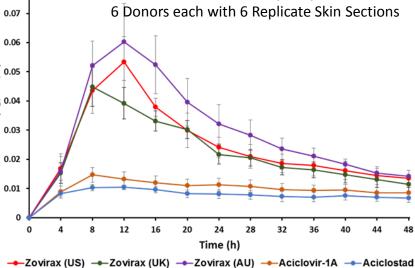
• 5 Pharmaceutically Equivalent Acyclovir Creams

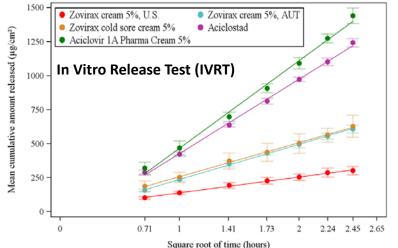
Zovirax	Zovirax	Zovirax	Aciclostad	Aciclovir-1A
(USA)	(UK)	(Austria)	(Austria)	(Austria)
Water	Water	Purified water	Water	Water
Propylene glycol	Propylene glycol	Propylene glycol	Propylene glycol	Propylene glycol
Mineral oil	Liquid Paraffin	Liquid Paraffin	Liquid Paraffin	Viscous Paraffin
White petrolatum	White soft paraffin	White Vaseline	White Vaseline	White Vaseline
Cetostearyl alcohol	Cetostearyl alcohol	Cetostearyl alcohol	Cetyl alcohol	Cetyl alcohol
SLS	SLS	SLS		
Poloxamer 407	Poloxamer 407	Poloxamer 407		
	Dimethicone 20	Dimethicone 20	Dimethicone	Dimethicone
	Arlacel 165	Glyceryl Mono	Glyceryl Mono	Glyceryl Mono
		Stearate	Stearate	Stearate
	Arlacel 165	Polyoxyethylene	Macrogol	Polyoxyethylene
		stearate	stearate	stearate

#### **Excipients Affect Product Quality**









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10 0.001

0.01

0.1

1

Shear rate 1/s

Data provided courtesy of Prof. Narasimha Murthy & Dr. Frank Sinner

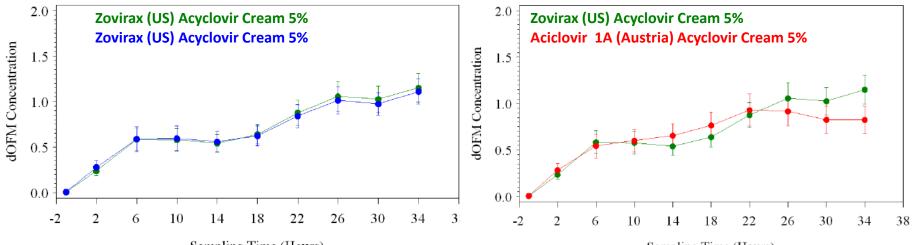
100

10

### Excipients Affect In Vivo BA/BE



Dermal Pharmacokinetics by dOFM (20 subjects)



Sampling Time (Hours)

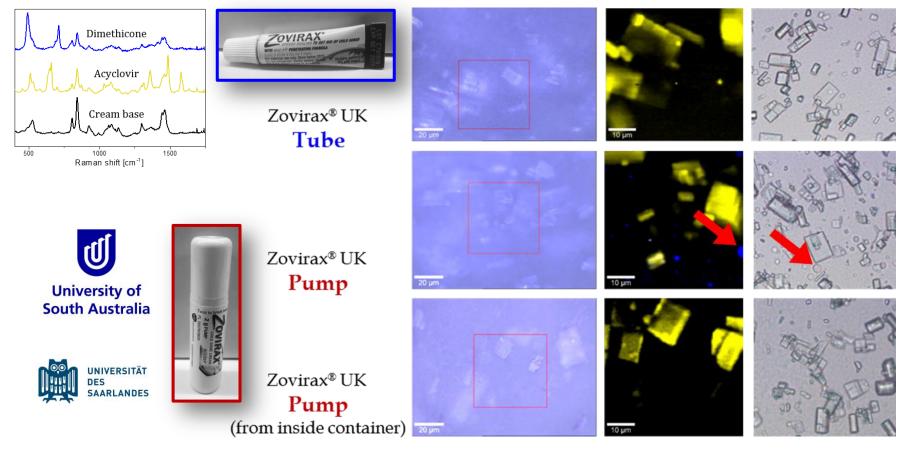
Sampling Time (Hours)

Outcome variable	CI <sub>90%</sub>		Outcome variable	Cl <sub>90%</sub>
log(AUC0-36h)	[-0.148 ; 0.162] or [86.2 % ; 117.5 %]		log(AUC0-36h)	[-0.369 ; 0.050] or [69.1 % ; 105.2 %]
$\log(\mathrm{C}_{\max})$	[-0.155 ; 0.190] or [85.7 % ; 120.9%]	JOANNEUM RESEARCH HEALTH	log(C <sub>max</sub> )	[-0.498 ; 0.022] or [60.8 % ; 102.2%]

Data provided courtesy of Dr. Frank Sinner

# Influence of Dispensing Stress on Q3

• Influence of Dose Dispensing on Product Quality Prof. Michael Roberts FDA Award U01-FD005226



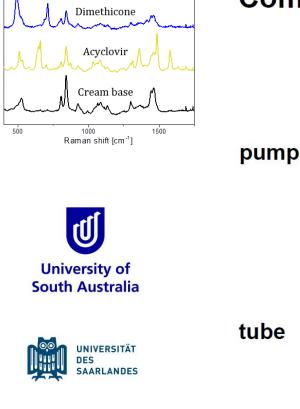
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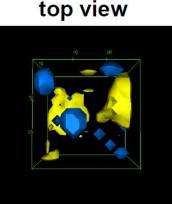
Data provided courtesy of Prof. Michael Roberts & Prof. Maike Windbergs

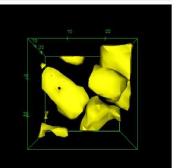
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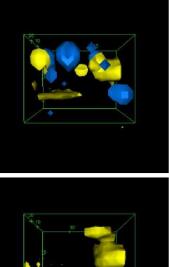


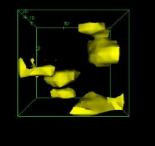






side view



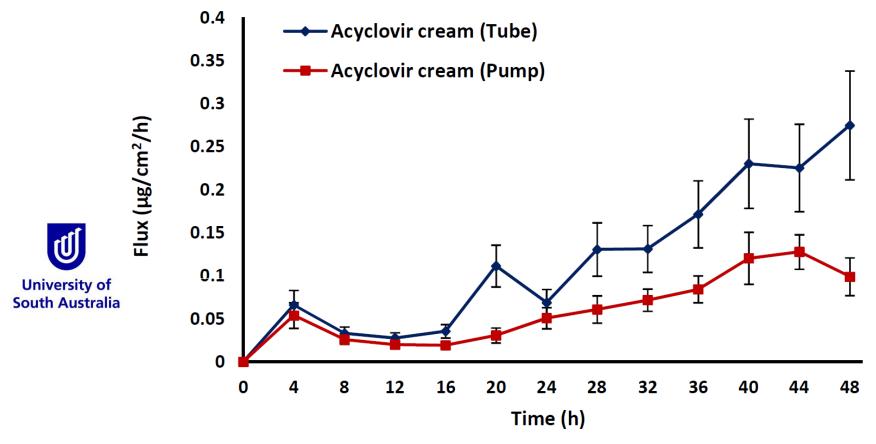


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Data provided courtesy of Prof. Michael Roberts & Prof. Maike Windbergs



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Data provided courtesy of Prof. Michael Roberts

#### Summary



- Excipient-Related Effects on the Drug Product
  - How critical is the composition of inactive ingredients?
  - How critical is the grade of each inactive ingredient?
  - How consistent is the quality of each inactive ingredient?
  - How critical is the sequence of mixing?
  - How critical are mixing rates and durations?
  - How critical are temperatures and rates of change?
  - How critical are the orifice diameters, tube lengths? pressures, etc. during transfer, holding, packaging?
  - How critical is the inertness of the container closure system (e.g. are there adsorption/absorption issues)?
  - How critical are the product dispensing stresses/forces?

#### Summary



- Excipient-Related Effects on the Patient
  - Consider product quality attributes that relate to
    - Storage, dispensing and re-dispensing
    - Dose application, maintenance and removal
    - Patient perceptions of quality and acceptability
  - Consider how the product quality changes during dose application and during subsequent metamorphosis
  - Consider how the vehicle impacts the skin (hydrating or dehydrating effects, irritancy, burning sensation)
  - Consider how product quality attributes at the limits of stability specifications impact these factors
  - Consider how the control of excipient quality may impact patient perceptions and actual therapeutic performance

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Frank Sinner, PhD

