USP <1724> Prospective Scope and Content

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In Vitro Release Test (IVRT) and In Vitro Permeation Test (IVPT) Methods

Best Practices and Scientific Considerations for ANDA Submissions

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Disclaimer

The views and opinions expressed in this presentation are mine and made in my individual capacity. They must not be construed as representing the views or opinions of my employer.

Agenda

Key Changes

- Chapter Layout and IVRT *vs.* IVPT comparison
- Recommendations on IVRT and IVPT

Main Changes

- Inclusion of IVPT subsections
- Use of generic diagrams for apparatuses
- Inclusion of subsections on equipment maintenance and qualification
- IVRT section layout change

IVRT and IVPT: tentative section layout

IVRT

a. Theory

- b. IVRT Method Development
 - i. Synthetic Membrane
 - ii. Equipment
 - iii. Analytical Method
 - iv. Experimental Design
 - 1. Dose
 - 2. Receptor Solution
 - 3. Experiment length and sampling
 - 4. Number of replicates
 - 5. Membrane temperature
 - 6. Data reporting
- **c.** Application of IVRT in Scale-up and Post-approval change

IVPT

- a. IVPT Method Development
 - i. Biological Membrane
 - ii. Equipment
 - iii. Bioanalytical Method
 - iv. Experimental Design
 - 1. Dose
 - 2. Receptor Solution
 - 3. Experiment length and sampling
 - 4. Number of replicates and donors
 - 5. Membrane temperature
 - 6. Membrane integrity
 - 7. Drug tissue distribution and mass balance
 - 8. Data reporting
- **b.** IVRT versus IVPT comparison

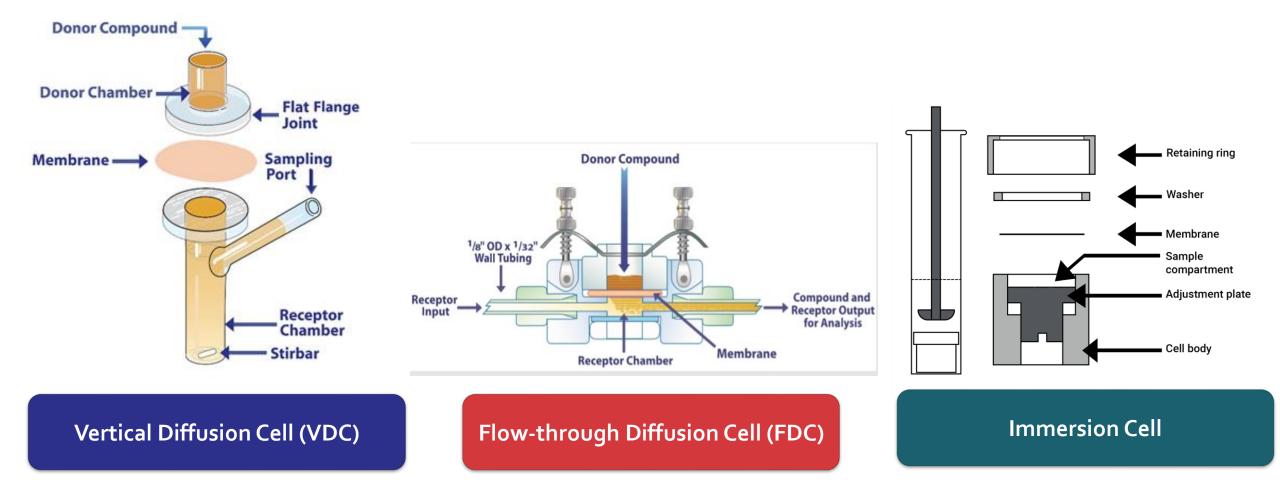
IVRT versus IVPT: Methodology Selection

Evaluation/goal	IVRT	Ινρτ		
In vitro in vivo correlation assessment		\checkmark		
Ability of the compound/formulation to cross the stratum corneum and distribution of compound in epidermis and dermis, respectively		\checkmark		
Selection of a new chemical entity (NCE) for further development as a semi-solid formulation	Not recommended	\checkmark		
Compare in vitro kinetics of different semi-solid formulations (different composition of different presentation, such as solutions, gels, creams, ointments)	recommended	\checkmark		
Compare the rate and extent to which a topically administered compound becomes available in and/or through the skin from a reference versus a test semi-solid formulation		\checkmark		
Evaluate the effect of inactive ingredients on the rate of drug release from the formulation matrix	\checkmark			
Assess sameness of formulations with the same active and inactive ingredients and/or same levels of active/inactive ingredients	✓	Not recommended		
Compare the effect of critical manufacturing/process steps on the microstructure and associated performance (release rate) of semisolid formulations	\checkmark			
Compare batch-to-batch variability of drug substance release rate at the time of manufacture, and during stability	✓			

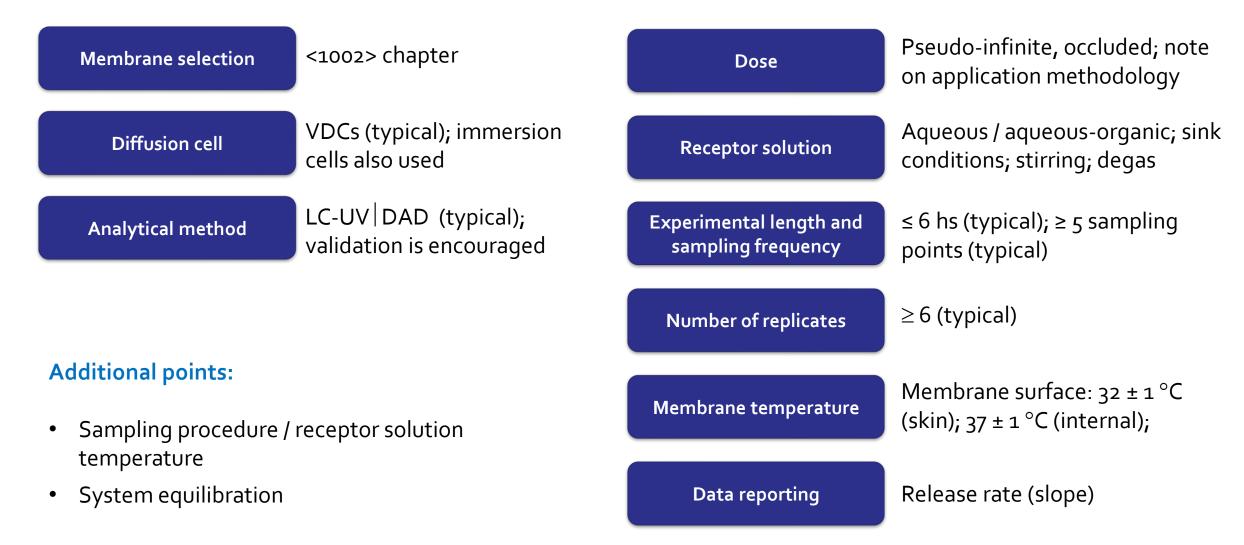
IVRT versus IVPT: Key Differences

Parameter	IVRT	IVPT
Membrane	Synthetic (e.g., mixed cellulose esters, nylon, polysulfone, polyethersulfone)	Biological; ex vivo human skin is typical, but other ex vivo epithelial tissues may be used (e.g., vaginal tissue, corneal tissue, nails, other mucosal tissues)
Receptor Solution	Aqueous and aqueous-organic combination, may include high percentages (≥30%) of organic solvents (e.g., ethanol, isopropyl alcohol, acetonitrile, etc.)	Aqueous, typically phosphate buffered saline; low levels (typically ≤5%) of additives may be added to allow sink conditions
Sampling	Small volume aliquots of the receptor solution at regular intervals	Larger volume sampling (e.g. entire content of the receptor solution replaced at every sampling time for VDCs). FDCs offer a different sampling methodology due to the continuous flow of receptor solution into the collection vials.
Apparatus	Vertical Diffusion Cells (VDC); Immersion Cells, USP Apparatus 4	VDC or flow-through diffusion cell (FDC)
Dose	Pseudo-infinite, occluded	Finite (typically ≤15 mg/cm²), unoccluded
Experimental length	Typically, \leq 6 hours	Typically, \geq 24 hours
Receptor solution drug levels	µg to mg range	pg to ng range
Analytical technique	HPLC/UPLC with detection by UV, DAD, or FLD	HPLC/UPLC with mass spectrometric detection
Key data obtained	Release rate (slope)	Flux profile including peak flux (<i>J_{max}</i>) and cumulative amount permeated (AMT)

Examples of Generic Diagrams for Apparatuses



IVRT: General Recommendations



IVPT: General Recommendations

Biological membrane	Human skin; dermatomed; ex vivo vs cadaver; anatomical area	Dose	Finite (typically ≤15 mg/cm²), unoccluded; application methodology
		Receptor solution	Aqueous; additives may be needed; sink conditions; stirring;
Diffusion cell	VDCs; FDCs	Experimental length and sampling frequency	12-72 hs (typical); ≥ 8 non-zero time points (flux profile)
Bioanalytical method	LC-MS (typical); validation is encouraged	Number of replicates and donors	Minimum: ≥ 4 donors; ≥ 4 replicates /donor/treatment
		Membrane temperature	Membrane surface: 32 ± 1 °C (skin);
Additional points: Sampling procedure / receptor solution temperature 		Membrane integrity	TEWL; Electrical impedance; tritiated water
		Drug tissue distribution and mass balance	Mass balance and epidermis /dermis splitting considerations
 System equilibration 		Data reporting	(J _{max}) and cumulative amount permeated (AMT)

Equipment Maintenance and Qualification

VDCs

Maintenance of all components, and requalification every 6-12 months

- Diffusion cell size and volume measurements – orifice diameter and cell volume
- Heating systems
- Stirring device (rate/speed)
- Flow rate
- Sampling devices and accuracy assessment

FDCs

Similar recommendations from VDCs; further:

- Tubing length must be the same for all diffusion cells
- Peristaltic pump/tubing unclamped at the end of test
- Tubing replacement during regular intervals
- Tubing alignment for proper sample collection

Immersion cells

Similar recommendations from VDCs; further:

Due to the uniformity in manufacturing immersion cells, individual identification of the cells and components is recommended, but not required

General Chapter 1724, Semisolid Drug products – Performance Tests. United States Pharmacopeia – under review by Expert Panel; last update 30-June-2021

Panel discussion