

### **Topics covered by the talk**

- Brief introduction to the Ph. Eur.
- · How monographs and general chapters are elaborated
- Overview of the main texts dealing with biologicals, with a specific focus on biotech products (role of general chapters, general monographs and specific monographs)
- The flexibility provided by the Ph. Eur., including examples of QbD approaches for biologicals
- The Ph. Eur. and biosimilars, with examples of how their development is being fostered
- Update on the current work programme and hot topics in the field of biotech product monographs

## Place of the Ph. Eur. within EU regulatory network

- Lays down common, compulsory quality standards for all medicinal products in Europe.
- Mandatory on the same date in 37 states (CoE) and the EU (European Union Directives 2001/82/EC, 2001/83/EC, and 2003/63/EC, as amended, on medicines for human and veterinary use).
- ➤ The Ph. Eur. is legally binding. The legislation also includes a mechanism to provide the pharmacopoeia authority with information on the quality of products on the market;
- The European Pharmacopoeia needs to keep pace
  - with the regulatory needs of licensing, control and inspection authorities in the public health area,
  - > with technological and scientific advances, and with industrial constraints.

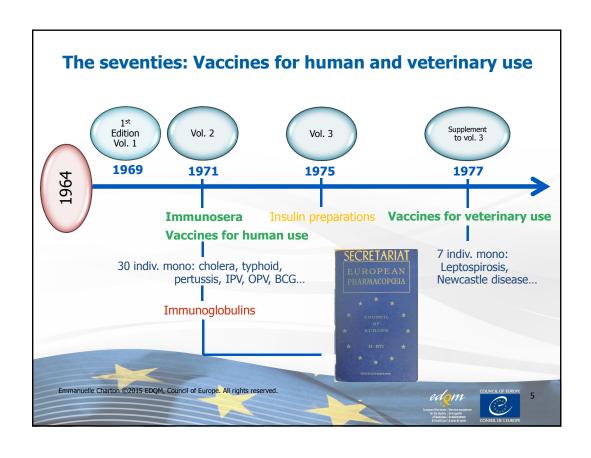
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COUNCIL OF EUROPE

BIOLOGICALS OF THE 20<sup>TH</sup>
CENTURY

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"...In addition it is appreciated that, in order to facilitate free exchange of such products throughout the countries party to the convention on the Elaboration of a European Pharmacopoeia, a common approach to control is desirable."

### Policy concerning monographs for vaccines for veterinary use (PA/PH/SG (82) 13)

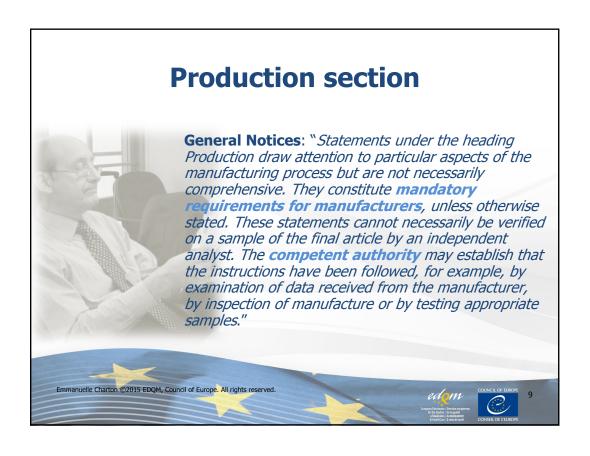
"...Recognising the **need for flexibility** with respect to statements relating to facets of control such as the choice of vaccine strains, the Group has proposed that such details be included in the introductory section of the monograph."

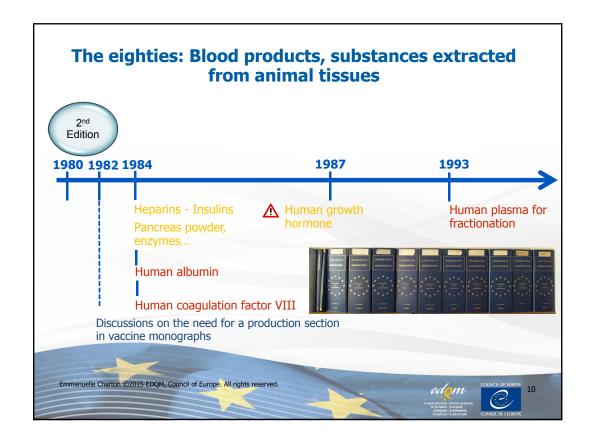
These discussions led to the creation of the **Production** section in 1991 in:

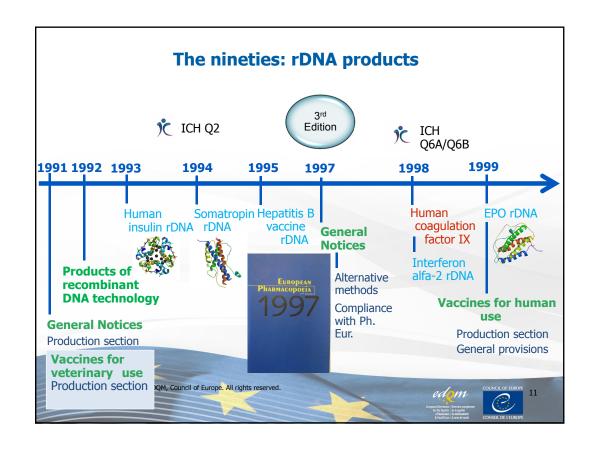
- General monograph Vaccines for veterinary use (0062)
- **General Notices**

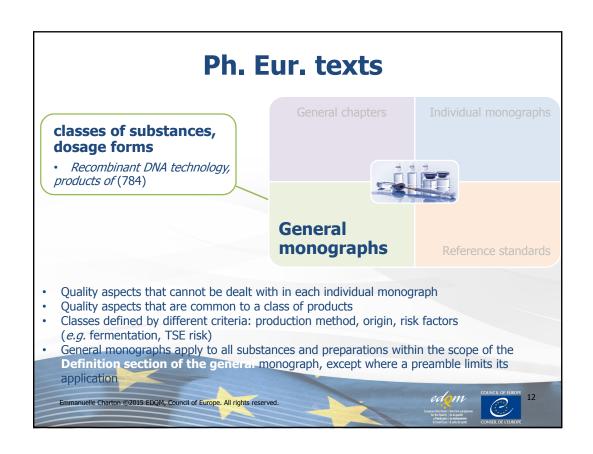


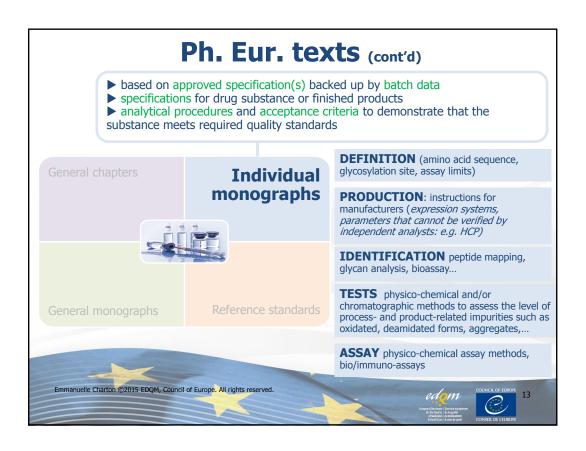


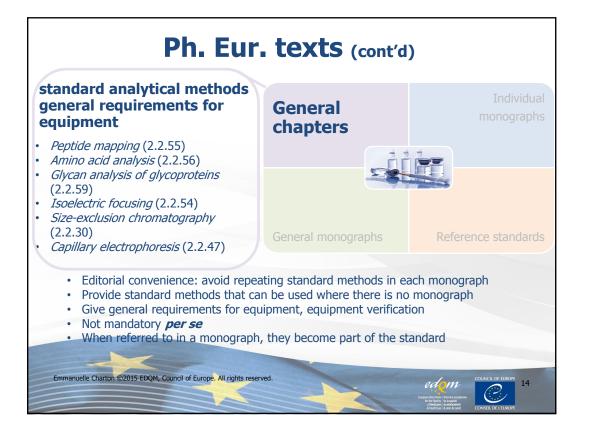


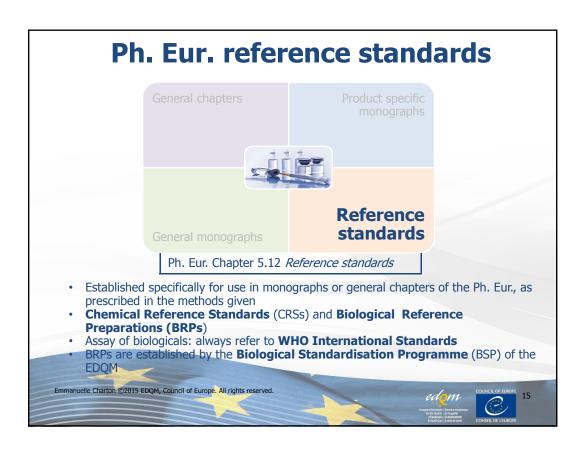
















- > Ph. Eur. tests are reference methods, essential in cases of dispute.
- Compliance is required, but alternative methods may be used as long as they lead to the same pass/fail result.
- ➤ It is the responsibility of the user to demonstrate their suitability. **Approval of the competent authority** is necessary in many cases.

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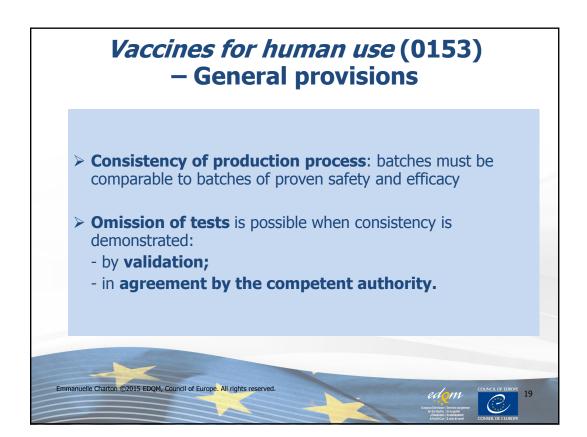
## Flexibility in the Ph. Eur. - Waiving of tests

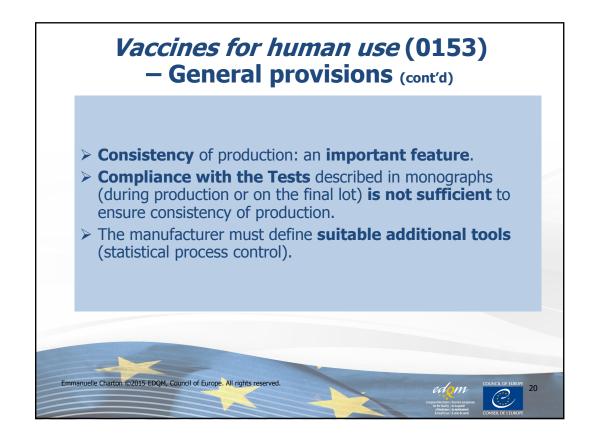
"An article is not of Pharmacopoeia quality unless it complies with all the requirements stated in the monograph. **This does not imply that performance of all the tests** in a monograph is necessarily a prerequisite for a manufacturer in assessing compliance with the Pharmacopoeia before release of a product. The manufacturer may obtain assurance that a product is of Pharmacopoeia quality from data derived, for example, from validation of the process and from validation studies of the manufacturing process and from in-process control".

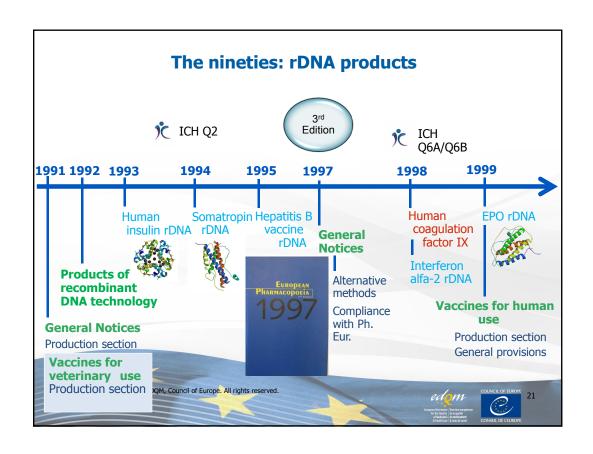
**General Notices** (3rd Edition to Supplement 8.1)



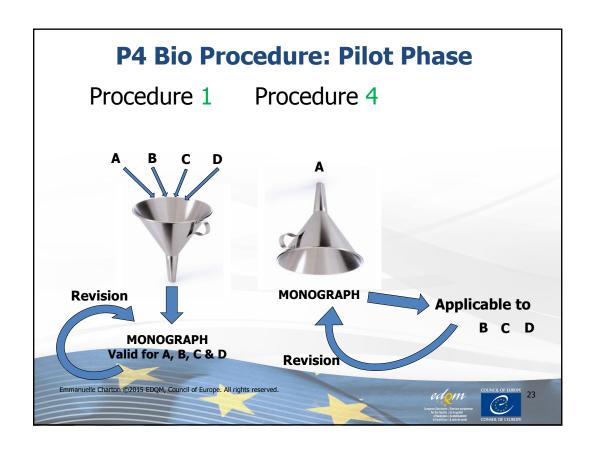


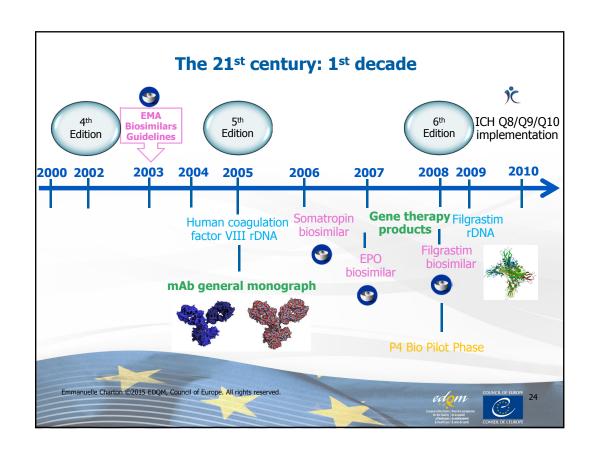












#### PURIFIED BULK FACTOR VIII (rDNA)

The purified bulk complies with a suitable combination of the following tests for characterisation of integrity of the factor VIII (rDNA). Where any substance added during preparation of the purified bulk interferes with a test, the test is carried out before addition of that substance. Where applicable, the characterisation tests may alternatively be carried out on the finished product.

Specific biological activity or ratio of factor VIII activity to factor VIII antigen. Carry out the assay of human coagulation factor VIII (2.7.4). The protein content, or where a protein stabiliser is present, the factor VIII antigen content, is determined by a suitable method and the specific biological activity or the ratio of factor VIII activity to factor VIII antigen is calculated.

Protein composition. The protein composition is determined by a selection of appropriate pharacterisation techniques which may include peptide mapping, Western blots, HPLC, gel electrophoresis, capillary electrophoresis, mass spectrometry or other techniques to monitor integrity and purity. The protein composition is comparable to that of the manufacturer's reference preparation.

Molecular size distribution. Using size-exclusion chromatography (2.2.30), the molecular size distribution is comparable to that of the manufacturer's reference preparation.

Peptide mapping (2.2.55). There is no significant difference between the test protein and the manufacturer's reference preparation.

Carbohydrates/sialic acid. To monitor batch-to-batch consistency, the monosaccharide content and the degree of sialylation or the oligosaccharide profile are monitored and correspond to those of the manufacturer's reference preparation.

### Human coagulation factor VIII (rDNA) (1643)

- Reference to Ph. Eur. general chapters
- No details of the exact procedure to be followed
- Carbohydrates/sialic acid to monitor batch to batch consistency

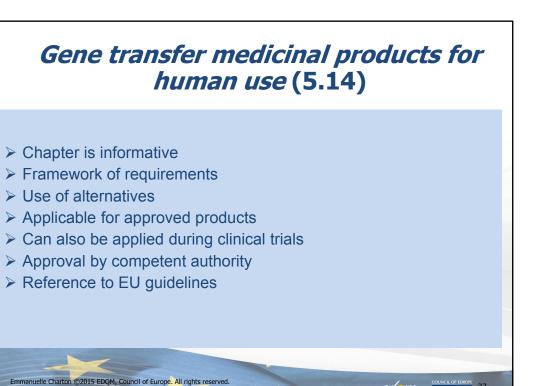


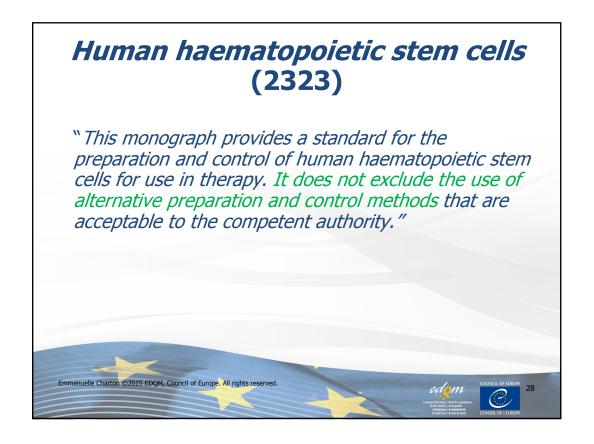
## General monograph: *Monoclonal* antibodies for human use (2031)

- > Applies to all monoclonal antibodies products
- > **General requirements** for the production and testing of monoclonal antibodies:
  - · Production based on seed lot system using master cell banks
  - **Tests**: reference to general chapters: degree of opalescence (2.2.1) and degree of coloration (2.2.2), pH (2.2.3), Osmolality (2.2.35), Extractable volume (2.9.17), Total protein (2.5.33), Molecular-size distribution by size-exclusion chromatography (2.2.30), Water (2.5.12), Sterility (2.6.1), Bacterial endotoxins (2.6.14)
  - Purity: Tests for process- and product-related impurities are carried out by suitable validated methods
  - Assay: Carry out a suitable biological assay compared to the reference preparation













### **Process Analytical Technologies (PAT)**

#### **EDQM International Symposium, Cannes, 3-4 May 2004**

- Concurrent with ICH Q8 finalisation
- Recognition of the fact that the European Pharmacopoeia:



- has to provide legal requirements for the quality of medicinal products and their components: methodologies and acceptance criteria;
- ...while at the same time... has to provide flexibility, to keep pace with current thinking and concepts, to allow for the use of modern technologies.

#### > Ph. Eur. chapters:

 2.9.47 Demonstration of Uniformity of Dosage Units Using Large Sample Sizes (Supplement 7.7, 04/2013); 2.2.40 Near Infrared Spectroscopy (Revised: 8th Edition, 01/2014);

#### Close collaboration with EMA PAT team

• <u>JUST ADOPTED</u>: Raman spectrometry (2.2.48), Chemometric methods applied to analytical data (5.21)

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## Ph. Eur. texts on biologicals Flexibility / Alternative methods – Overview

- ✓ Production section (since 1991)
- ✓ Alternative methods and possibility to omit tests in General Notices (since 1997)
- ✓ General provisions in the general monograph on vaccines for human use: need for control strategy and suitable in-process testing (since 1998)
- ✓ Clear statements on the non-mandatory character of many texts (especially in the field of advanced therapies)

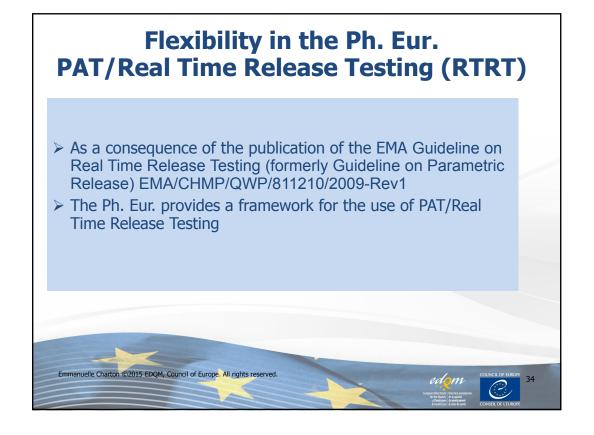
These were solutions that the experts found at the time to cope with the complexity of biologicals (there was no other way).

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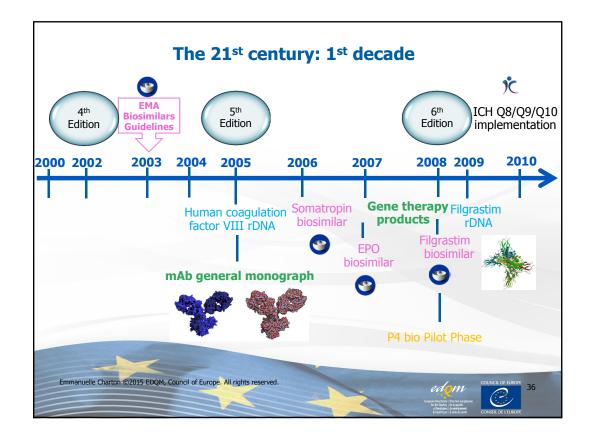


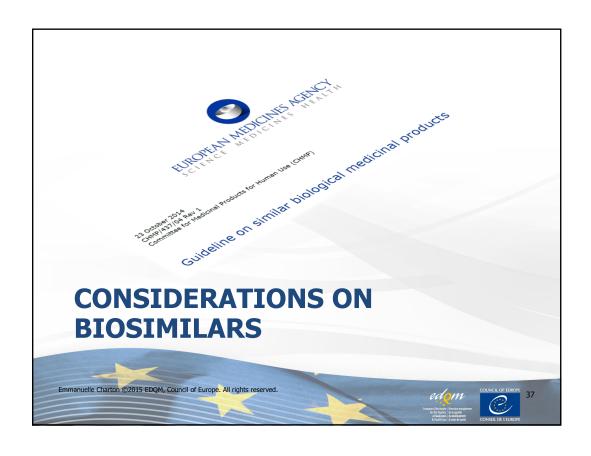




## Acceptance criteria/specifications in Ph. Eur.

- Conventional specifications are needed!
- Correlation to be made between the prediction (RTRT) and the conventional specifications
- Conventional expression of specifications will always be needed for:
  - ✓ Product development
  - ✓ Independent controls (*e.g.* Official Medicines Control Laboratories)
  - ✓ Stability studies
  - ✓ Applicants that decide to apply the "conventional approach"
- ➤ **Need for a tiered system**, providing "conventional" specifications, but enabling the implementation of new approaches, *e.g.* PAT
- PAT and public standards are compatible with each other





### Biosimilars and Ph. Eur.

Directive 2001/83/EC:

"The provisions of Article 10(1)(a) (iii) may not be sufficient in the case of biological medicinal products. If the information required in the case of essentially similar products (generics) does not permit the demonstration of the similar nature of two biological medicinal products, additional data, in particular, the toxicological and clinical profile shall be provided."

 Guideline on Similar Biological Medicinal Products (CHMP/437/04 Rev 1):

"The **similar biological medicinal product** shall, with regard to the quality data, fulfil all requirements for Module 3 as defined in Annex I to Directive 2001/83/EC and satisfy the technical requirements of the monographs of the European Pharmacopoeia and any additional requirements, such as defined in relevant CHMP and ICH guidelines."





 Guideline on similar biological medicinal products containing biotechnology-derived proteins as active substance: quality issues (revision 1) EMA/CHMP/BWP/247713/2012

"A comparison of the biosimilar to a publicly available standard, e.g. a pharmacopoeial monograph, is not sufficient for the purpose of comparability.

(...)

Extensive state-of-the-art characterisation studies should be applied to the biosimilar and reference medicinal products in parallel, to demonstrate with a high level of assurance that the quality of the biosimilar is comparable to the reference medicinal product. It is the responsibility of the applicant to demonstrate that the selected methods used in the biosimilar comparability exercise would be able to detect slight differences in all aspects pertinent to the evaluation of quality (e.g. ability to detect relevant variants with high sensitivity). Methods used in the characterisation studies form an integral part of the quality data package and should be appropriately qualified for the purpose of comparability. If applicable, standards and reference materials (e.g. from Ph. Eur., WHO) should be used for method qualification and standardisation."

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## WHO GUIDELINES ON EVALUATION OF SIMILAR BIOTHERAPEUTIC PRODUCTS (SBPs), 2009

#### 8.3 Specifications

"Specifications are employed to verify the routine quality of the drug substance and drug product rather than to fully characterize them. As for any biotherapeutic product, specifications for a SBP should be set as described in established guidelines and monographs, where these exist. It should be noted that pharmacopoeial monographs may only provide a minimum set of requirements for a particular product and additional test parameters may be required."





## WHO GUIDELINES ON EVALUATION OF SIMILAR BIOTHERAPEUTIC PRODUCTS (SBPs), 2009 (cont'd)

#### Reference biotherapeutic product (RBP)

"A reference biotherapeutic product is used as the comparator for head-to-head comparability studies with the similar biotherapeutic product in order to show similarity in terms of quality, safety and efficacy. Only an originator product that was licensed on the basis of a full registration dossier can serve as a RBP. It does not refer to measurement standards such as international, pharmacopoeial, or national standards or reference standards."

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### Ph. Eur. reference standards

Ph. Eur. Reference standards are not intended to be used as reference (comparator) products in the context of applications for biosimilars!

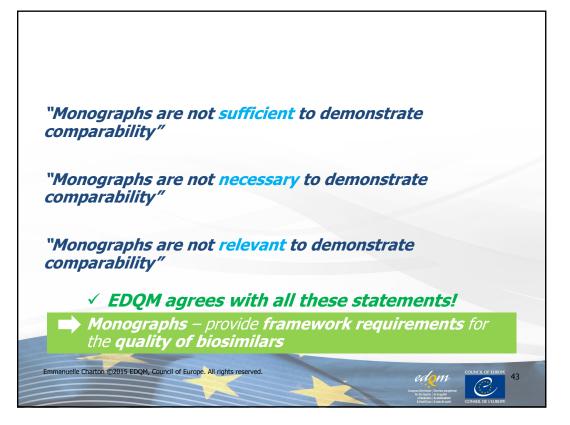
Ph. Eur. Reference standards can be used during the development of biosimilars for method qualification and standardisation

Ph. Eur. Chapter 5.12 Reference standards

- Established specifically for use in monographs or general chapters of the Ph. Eur., as prescribed in the methods given
- Chemical Reference Standards (CRSs) and Biological Reference Preparations (BRPs)
- Assay of biologicals: always refer to WHO International Standards
- BRPs are established by the Biological Standardisation Programme (BSP) of the EDOM











Annex 1 of Directive 2001/83/EC: "In cases where a specification contained in a monograph of the European Pharmacopoeia or in the national pharmacopoeia of a Member State might be insufficient to ensure the quality of the substance, the competent authorities may request more appropriate specifications from the marketing authorisation holder. The competent authorities shall inform the authorities responsible for the pharmacopoeia in question. The marketing authorisation holder shall provide the authorities of that pharmacopoeia with the details of the alleged insufficiency and the additional specifications applied."



Feedback on the ability of the Ph. Eur. monograph to support the quality part in the comparability exercise is essential for the monograph to remain useful.

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### 20 Biosimilars approved in Europe

- ✓ ...within the product classes of human growth hormone, granulocyte colony-stimulating factor, erythropoietin, insulin and TNF-inhibitor, for use in the EU.
- ✓ Corresponding Ph. Eur. monographs:
  - > Somatropin (0950, 0951, 0952, 2370)
  - > Erythropoietin (1316)
  - > Filgrastim (2206)
  - > Follitropin (2285, 2286)
  - ➤ Insulin glargine (2571)





### **Corresponding Ph. Eur. monographs**

- **EPO: limits for isoforms 3 and 7** have been modified in light of batch data for approved products (Supplement 5.3)
  - > Current work to strengthen the **carbohydrate analysis**
  - > 3R strategy for the *in vivo* assay
- Filgrastim: adopted by Commission Nov. 2014, to be published in Supplement 8.6
  - ✓ **Definition**: minimum potency limit lowered, based on recent batch data.
  - ✓ Impurities with molecular masses higher than that of filgrastim: separate limit for the sum of aggregates and oligomers, in addition to that for total impurities with molecular masses higher than that of filgrastim.
  - ✓ Related proteins: new method which is simpler and allows better resolution of impurities
- Somatropin: request for revision (March 2015)
- · Follitropin, insuline glargine: only recently published

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## Human coagulation factor IX (rDNA) concentrated solution (2522)

#### **Glycan Analysis: Problem statement**

- On the one hand, generic methods of analysis that are already described in the Ph. Eur. should be referred to if applicable.
- On the other hand, all details should be given for a user to be able to carry out the test.
- One specification might not be suitable for all registered products.

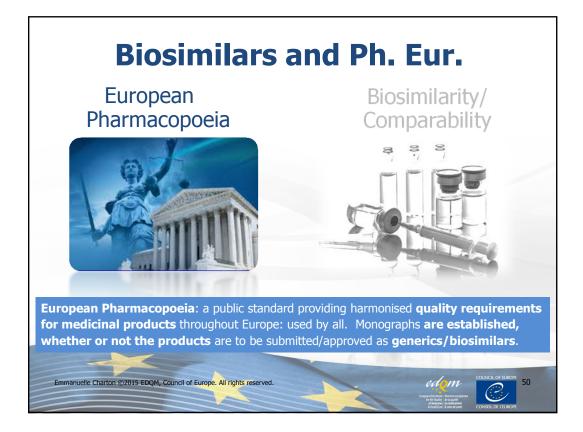
## Human coagulation factor IX (rDNA) concentrated solution (2522) (cont'd)

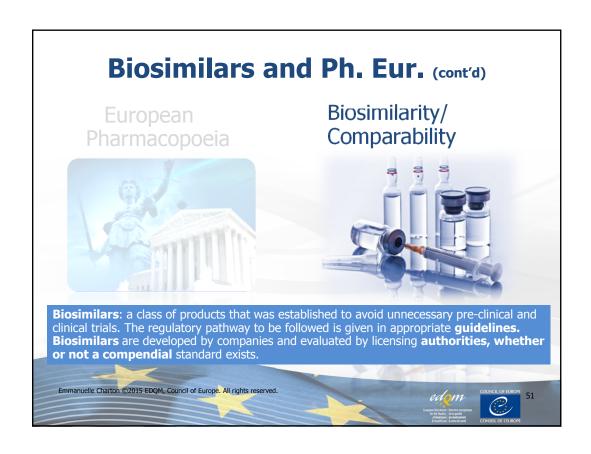
#### **Production Section**

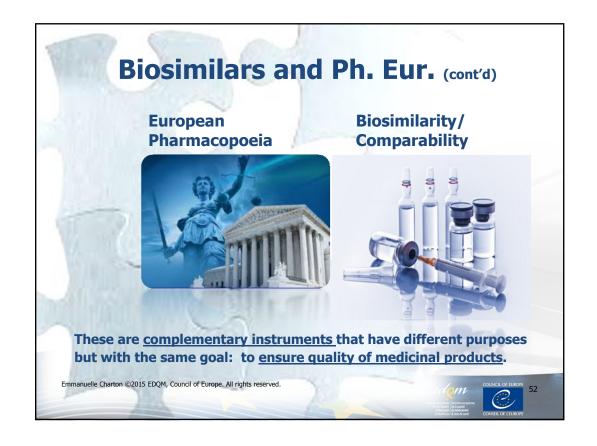
- ➤ The **glycan analysis** test is described in the **Production section** of the monograph, according to the provisions given in the General Notices, as the test cannot be performed by an independent analyst for the following reasons:
  - · the glycan profile depends on the manufacturing process;
  - the test prescribes the use of an in-house reference standard shown to be representative of batches tested clinically and batches used to demonstrate consistency of production;
  - no specifications are given: they have to be set by the manufacturer in agreement with the competent authority.
- This approach is compatible with the development of biosimilars!

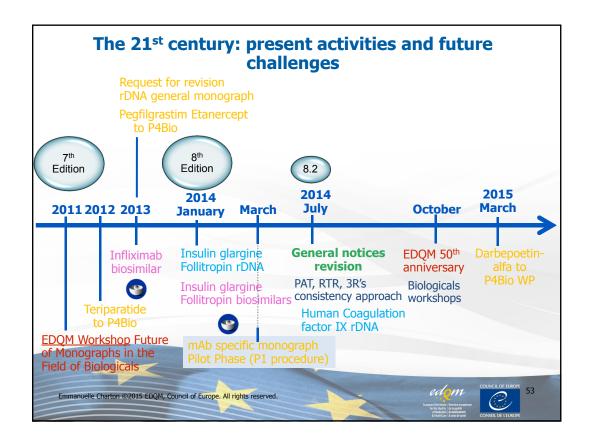
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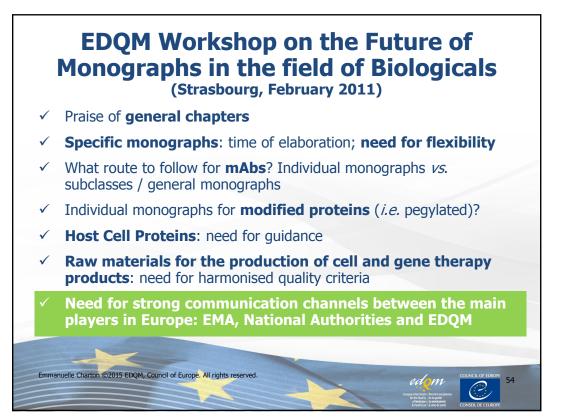
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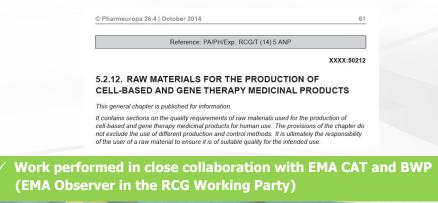








- ✓ EDQM International Workshop: April 2013
- ✓ Publication of draft chapter *Raw materials for the production of cell and* gene therapy products (5.2.12) in Pharmeuropa 26.4 (October 2014)



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### **Host Cell Proteins**

✓ New Chapter 2.6.34: Host- This general chapter provides guidance for the development and validation of host-cell protein **Cell Protein Assays** 

Pharmeuropa 27.2 (April 2015)  $\rightarrow$  *comments* until end of June 2015

#### 2.6.34 HOST-CELL PROTEIN ASSAYS

6. CHANGE OF HCP ASSAY AND/OR REAGENT.....

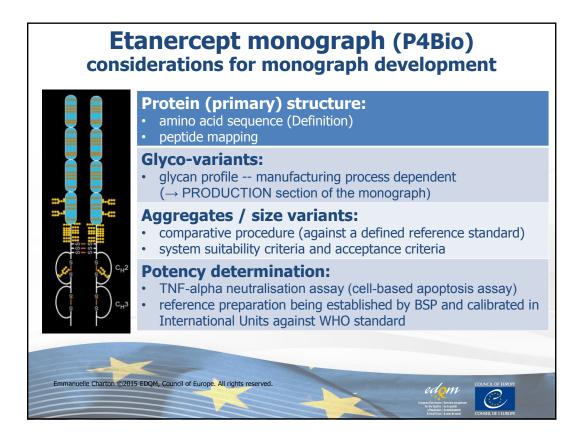
(HCPs) assay used to test products obtained by recombinant DNA technology. It does not exclude the use of alternative approaches that are acceptable to the competent authority.

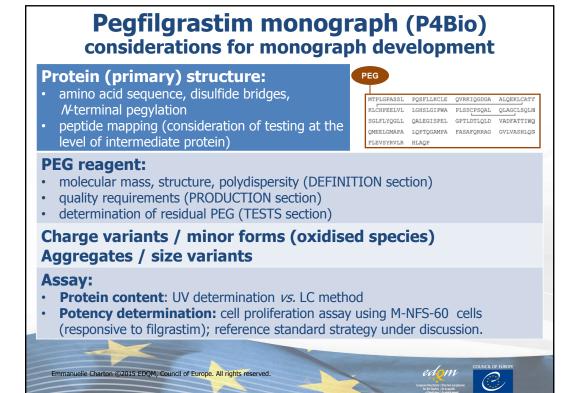
✓ Publication of draft chapter in 1. Content 1. INTRODUCTION..... 2. ASSAY SELECTION..... 2.1. Type of assays....

3. PRODUCTION AND TESTING OF THE HCP ANTIGEN...... 3.1. Process-Specific Assays ..... 3.2. Platform Assays.....

4. PRODUCTION AND CHARACTERISATION OF THE ANTI-HCP ANTIBODY REAGENT.... 4.1. Process-Specific and Platform Assays..... 4.2. Generic Assays..... 5. VALIDATION OF THE HCP ASSAY.....







### P4Bio challenges, novel molecules

- How to translate release specifications into a public standard
- Specifications for comparability are not release specifications!
- > Assay:
  - o proprietary cell lines or reagents are not an option
  - o concurrent establishment of International Standard
  - > Collaboration with World Health Organisation

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# MAB Working Party: mAb P1 pilot phase using infliximab as case study

- > **Specific** monographs versus **general** monograph
- Define the quality attributes that are common to all mAbs or to all biosimilars of the same specific mAb
- > **Assay** standardisation
- ➤ MAB Working Party: P1 Procedure manufacturers of biosimilar/follow-on biologicals can participate in the discussions
- Link with P4Bio on the approaches to be followed





## Introducing new technologies to Ph. Eur. texts on biologicals (1/2)

#### Replacement of current Ph. Eur. methods

Validation of alternative methods is a challenge:

- > The results may not be expressed in the same way
- Practical implementation of equipment, knowledge of analytical software, automation
- Higher sensitivity: if more impurities are seen, what to do with the new information:
  - · Should new specifications be added?
  - or rather, use the methods to verify the consistency of the production process
- The current methods were validated before ICH Q2: this is particularly the case for vaccine monographs: need for guidance on substituting methods with others when one-to-one comparison is not possible.

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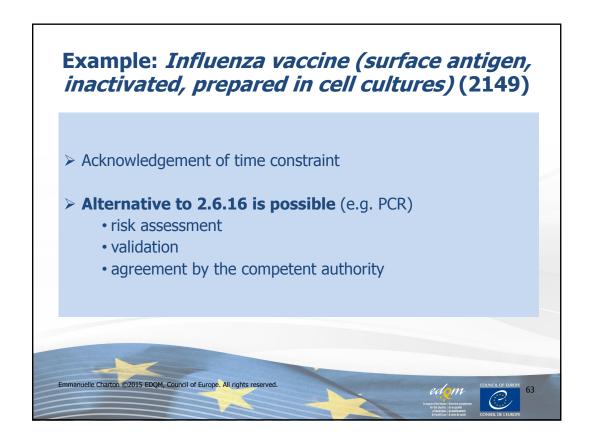


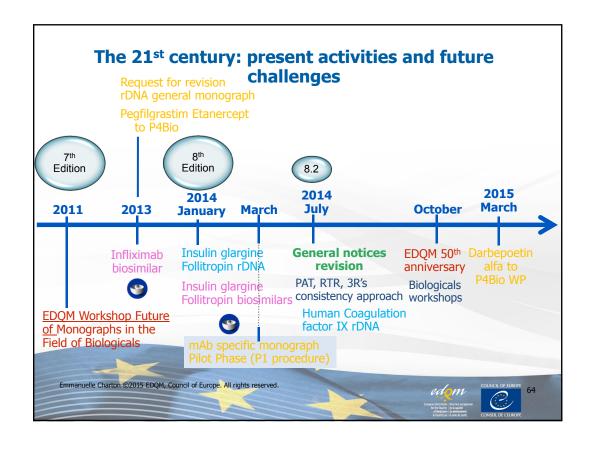


# **Introducing new technologies to Ph. Eur. texts on biologicals** (2/2)

- Use of alternative methods could be facilitated by provision of additional tools for verification of method performance;
- ➤ The reflection has to take place between **all partners**: regulators (at EMA and in all member states), industry, Official Medicines Control Laboratories and Ph. Eur.







# **European Pharmacopoeia Convention (1964)**

#### **Objectives:**

to harmonise specifications for medicinal substances which, in their original state or in the form of pharmaceutical preparations, are of general interest and importance to the peoples of Europe;

to hasten the drawing up of specifications for the growing number of new medicinal substances appearing on the market.

**This aim can best be achieved** by the progressive establishment of a common pharmacopoeia for the European countries concerned.

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## **Acknowledgements**

All the experts and specialists of the European Pharmacopoeia!







