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Biosimilars Regulatory Considerations in Saudi Arabia

Professor Aws Alshamsan, BPharm, RPh, PhD, Saudi Arabia

10 October 2018

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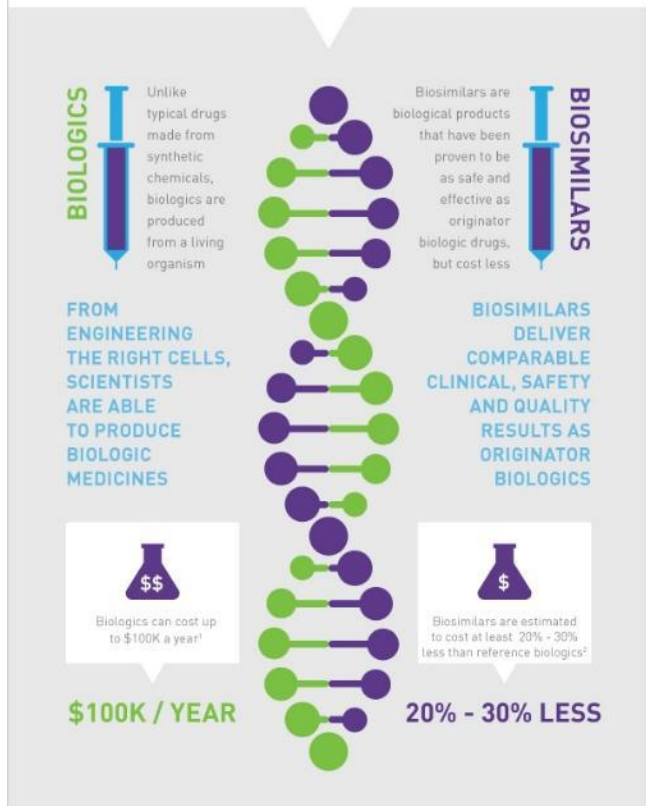
Dean and Associate Professor at College of Pharmacy, King Saud University

Consultant of the Drug Sector at SFDA

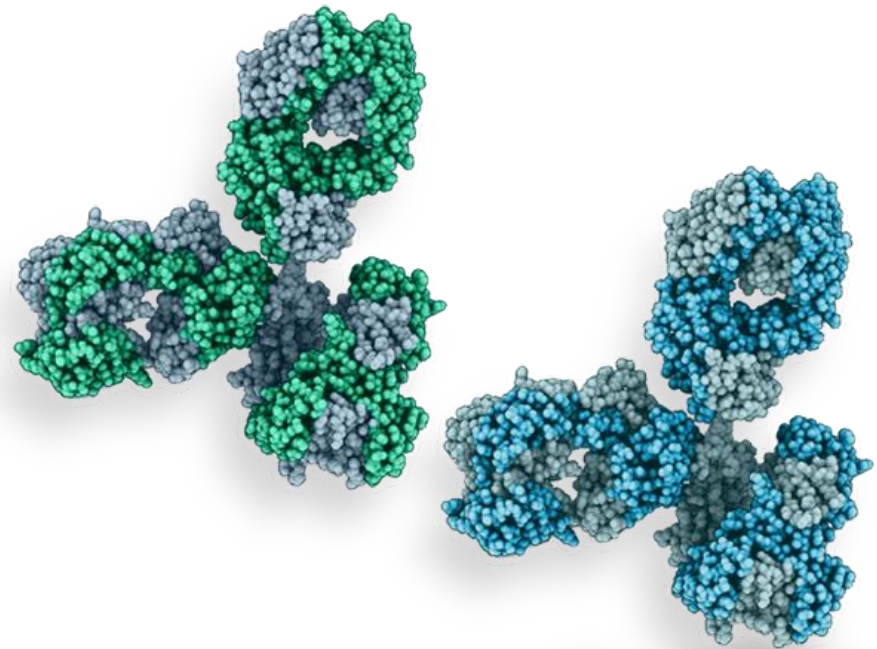
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BIOSIMILARS

WHAT ARE BIOSIMILARS?



Biological medicinal product that is highly similar to another biological medicine that has already been approved for use



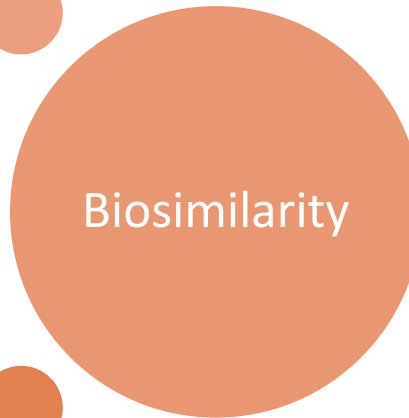
Manufacturing
Process



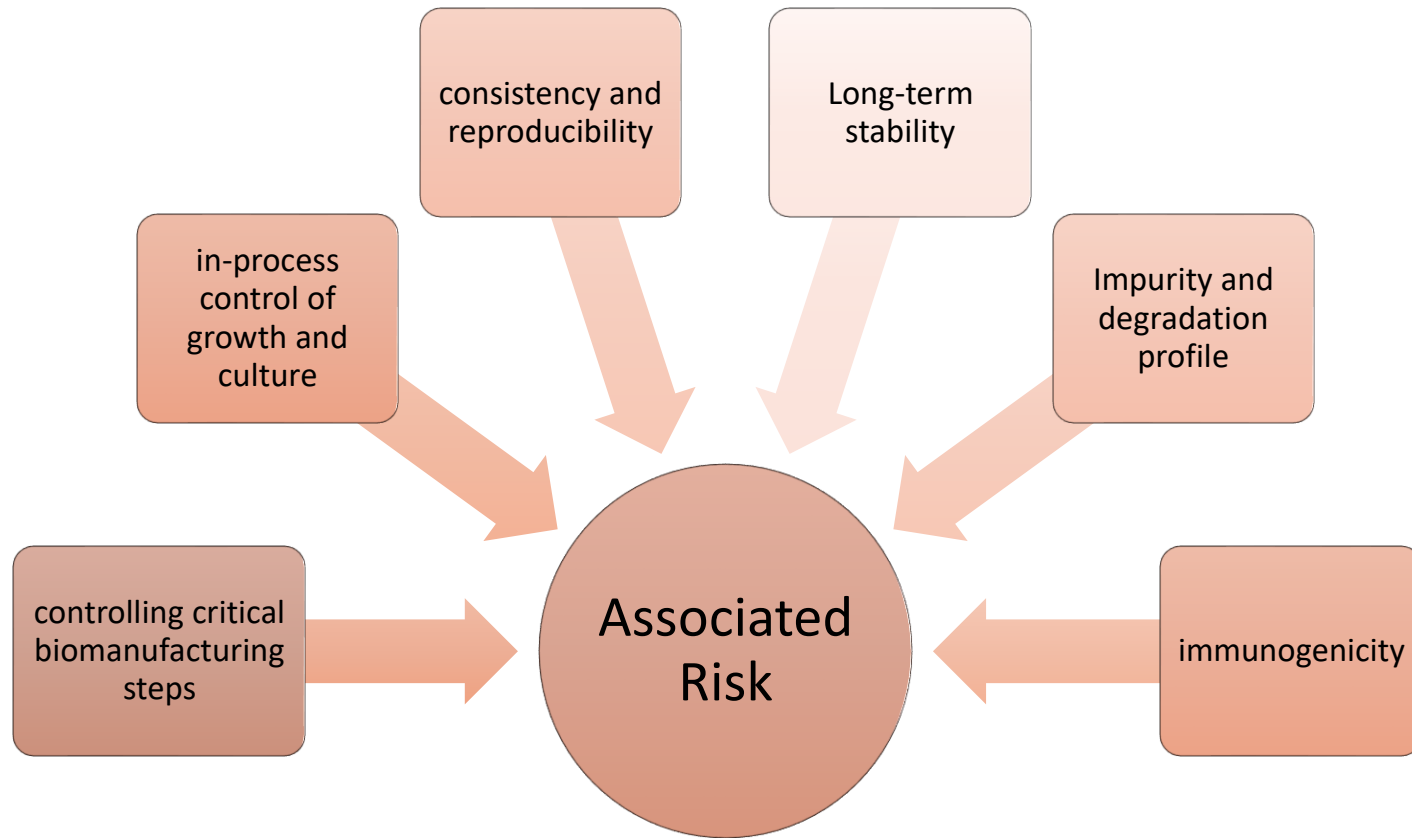
Quality
Attributes



Clinical
Outcome



Associated Risk



BIOSIMILARS

Pre-clinical assessments

- Analytical characterisation
- Structural
- In vitro functional
- Pharmacokinetic/ pharmacodynamic (animal)
- Toxicology

Clinical assessments

- Pharmacokinetic
- Efficacy
- Safety

Amount of
data required



Reference Product

Quality	Nonclinical	Clinical
<ul style="list-style-type: none">• Drug substance<ul style="list-style-type: none">• Manufacture• Characterisation• Control• Reference standard• Container• Stability• Drug product<ul style="list-style-type: none">• Description• Development• Manufacture• Control• Reference standard• Container• Stability	<ul style="list-style-type: none">• Pharmacology<ul style="list-style-type: none">• Primary pharm.• Secondary pharm.• Safety pharm.• Interactions• Pharmacokinetics<ul style="list-style-type: none">• ADME• Interactions• Toxicology<ul style="list-style-type: none">• Single dose• Repeat dose• Genotoxicity• Carcinogenicity• Reproduction• Local tolerance	<ul style="list-style-type: none">• Pharmacology• Pharmacokinetics<ul style="list-style-type: none">• Single dose• Repeat dose• Special populations• Efficacy and safety<ul style="list-style-type: none">• Dose finding• Schedule finding• Pivotal<ul style="list-style-type: none">• Indication 1• Indication 2• Indication 3• Indication 4• Post-marketing studies

BIOSIMILARS

Quality

- Drug substance
 - Manufacture
 - Characterisation
 - Control
 - Reference standard
 - Container
 - Stability
- Drug product
 - Description
 - Development
 - Manufacture
 - Control
 - Reference standard
 - Container
 - Stability
- Comparability data
 - Analytical comparison with reference product

Nonclinical

- Pharmacology
 - Primary pharm.
 - Secondary pharm.
 - Safety pharm.
 - Interactions
- Pharmacokinetics
 - ADME
 - Interactions
- Toxicology
 - Single dose
 - Repeat dose
 - Genotoxicity
 - Carcinogenicity
 - Reproduction
 - Local tolerance

Clinical

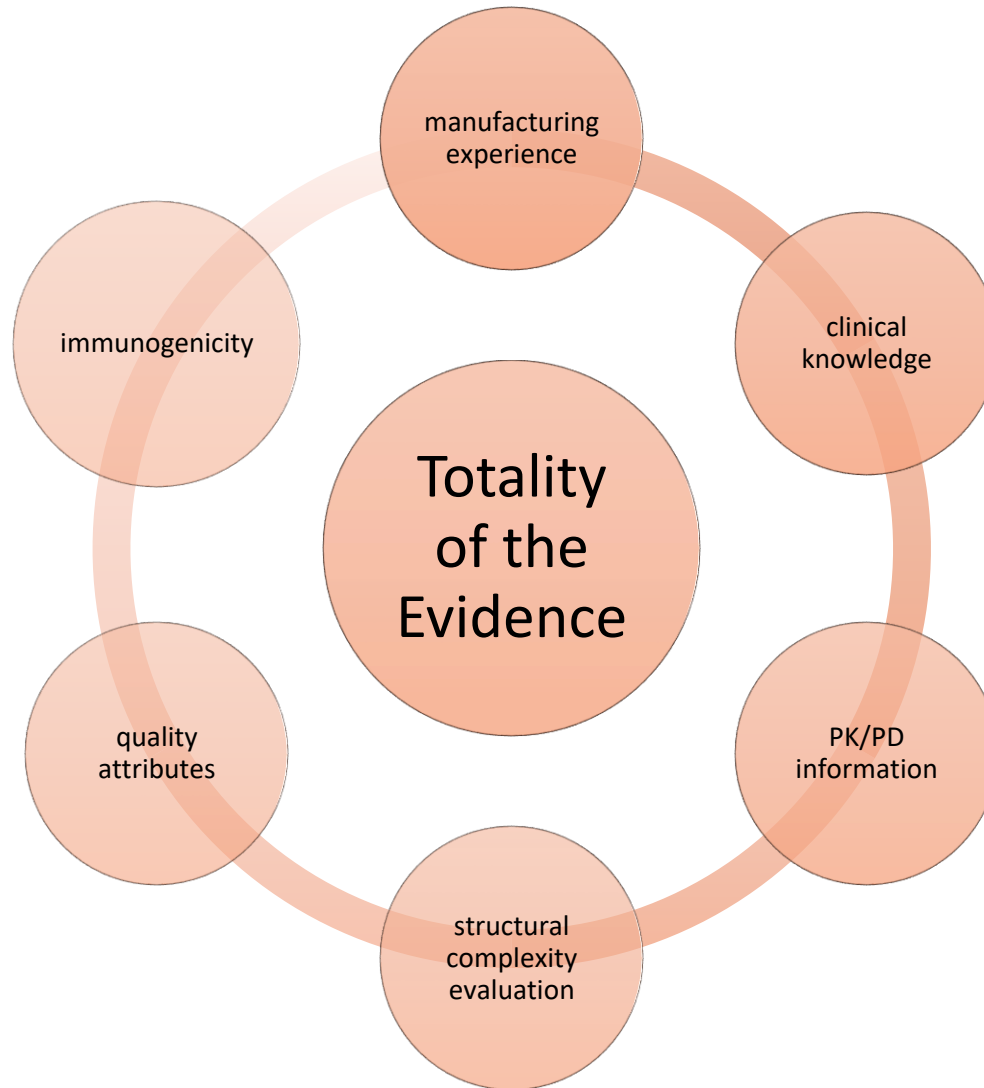
- Pharmacology
- Pharmacokinetics
 - Single dose
 - Repeat dose
 - Special populations
- Efficacy and safety
 - Dose finding
 - Schedule finding
 - Pivotal
 - Indication 1
 - Indication 2
 - Indication 3
 - Indication 4
- Post-marketing studies
 - Safety in larger population
 - Efficacy in other indications
 - Immunogenicity

Guideline on Biosimilar Products

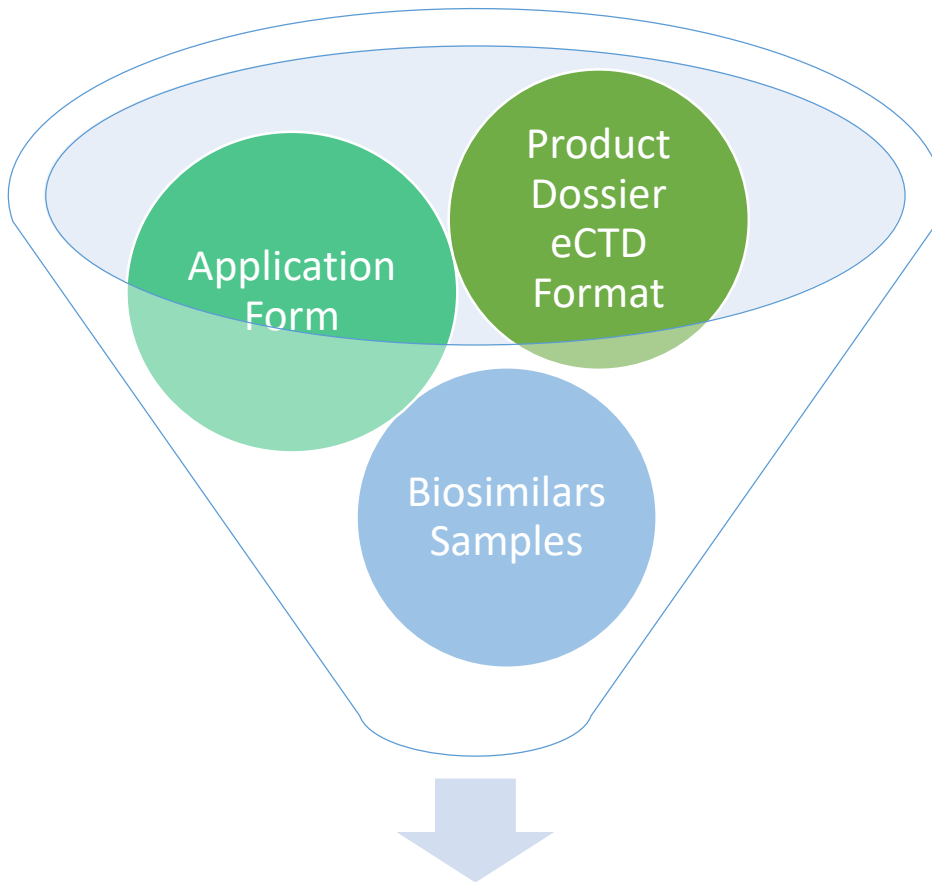
Quality Considerations

Version 1.0

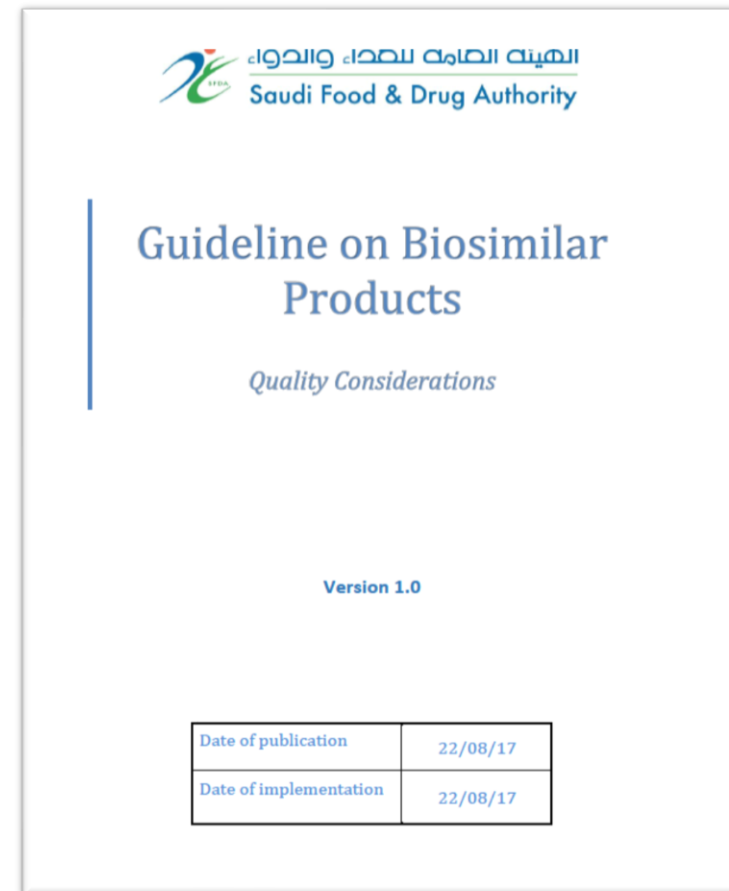
Date of publication	22/08/17
Date of implementation	22/08/17



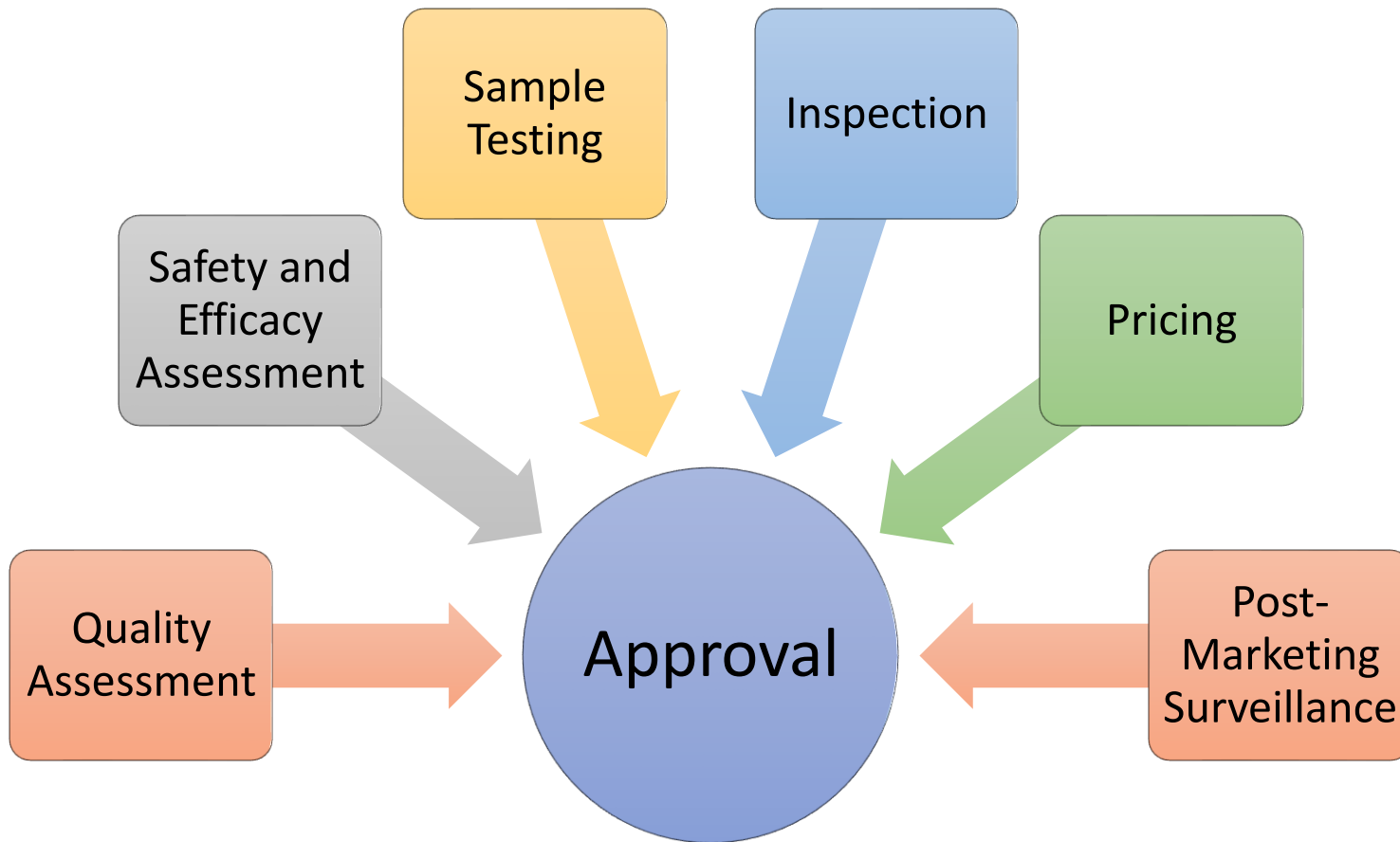
BIOSIMILARS SUBMISSION GUIDE



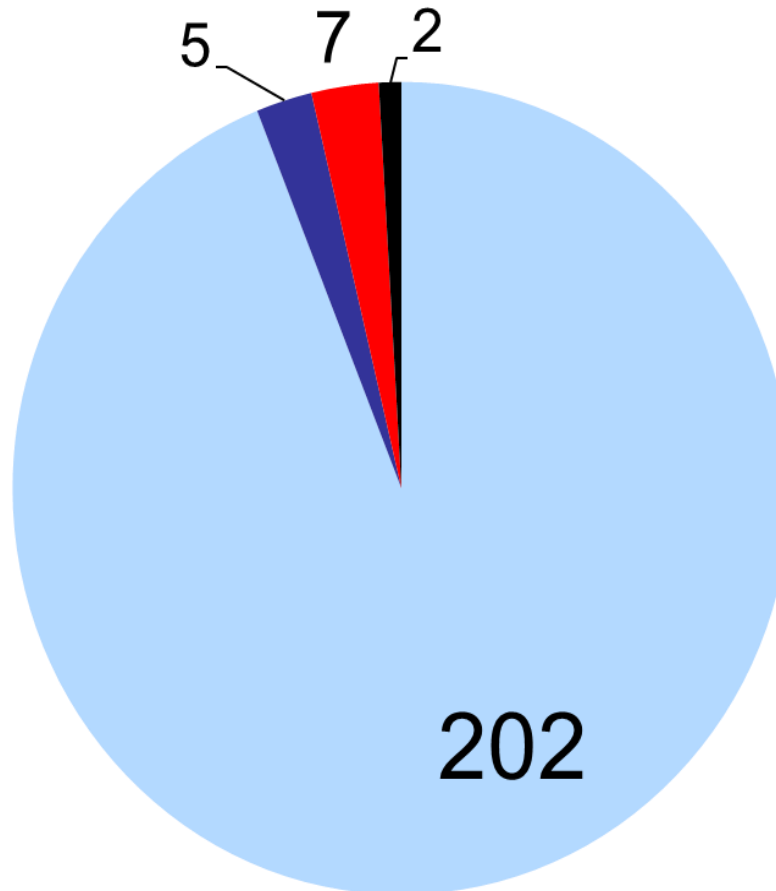
Complete Drug Application



Department-Centric Evaluation



290 days



■ Biologics

■ Biosimilars

■ Rejected
biosimilars

■ Under process

Examples of Approved Products

- Omnitrope: Recombinant Somatropin 2014
- Remsima: Infliximab 2015
- Zarzio: Filgrastim 2015
- Grastofil: Filgrastim 2017
- Binocrit: Erythropoietin 2017
- The biosimilar on average is 37% cheaper
- Biosimilar Uptake

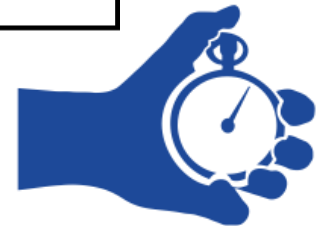
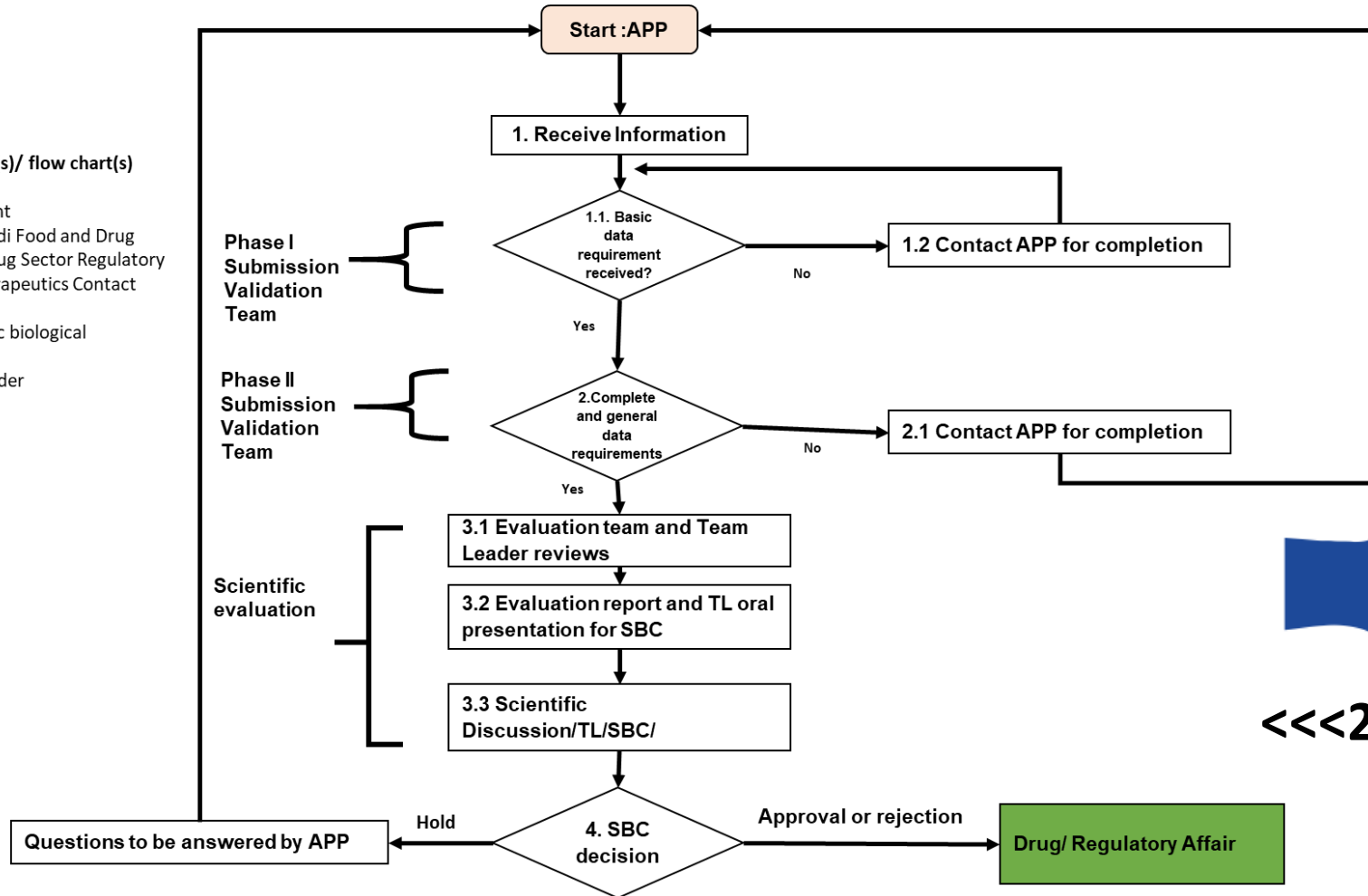
Examples of Rejected Products

- Follitropin alfa: Failure in Clinical comparability
- 6 Insulins: Failures in quality, safety, and efficacy

Product-Centric Evaluation

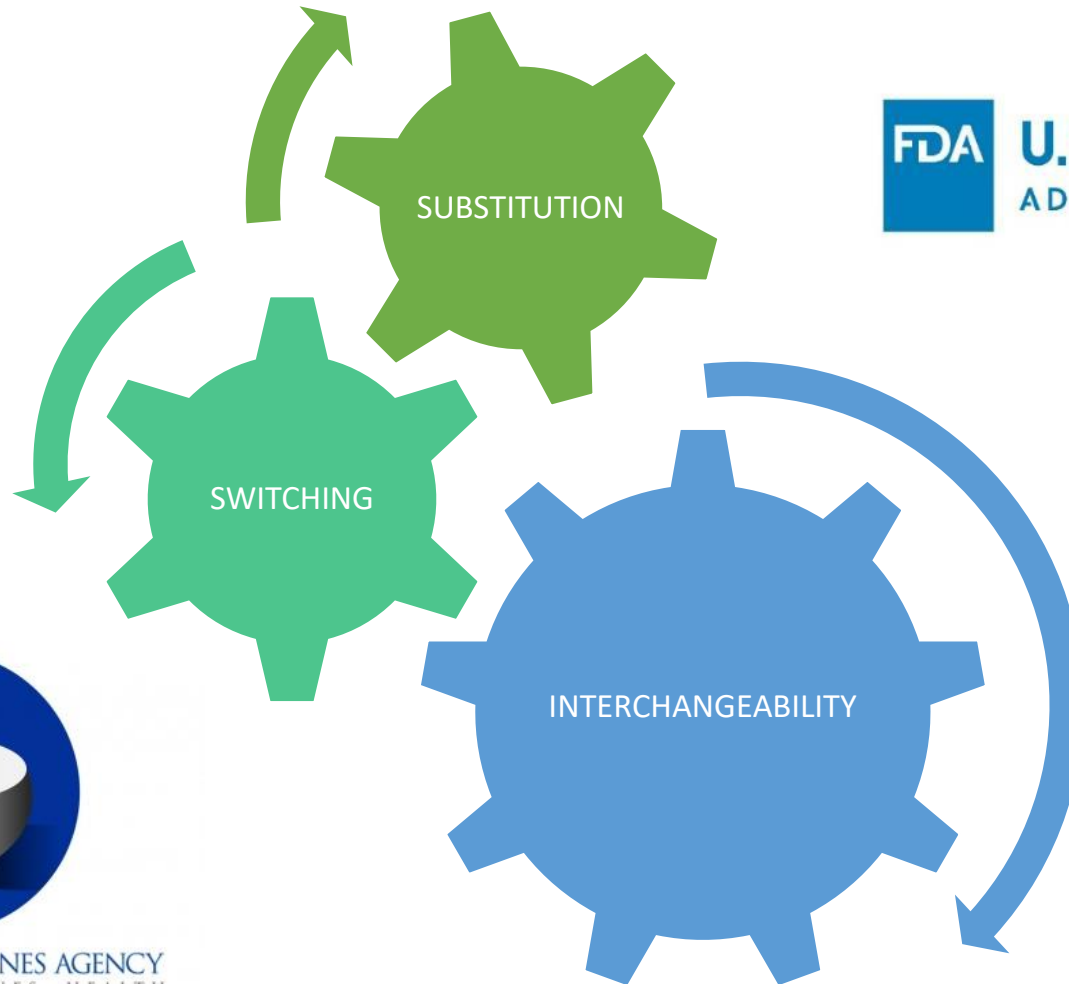
Process map(s)/ flow chart(s)

APP: Applicant
RA_BCP: Saudi Food and Drug Authority, Drug Sector Regulatory Affair Biotherapeutics Contact Person
SBC: Scientific biological committee
TL: Team Leader

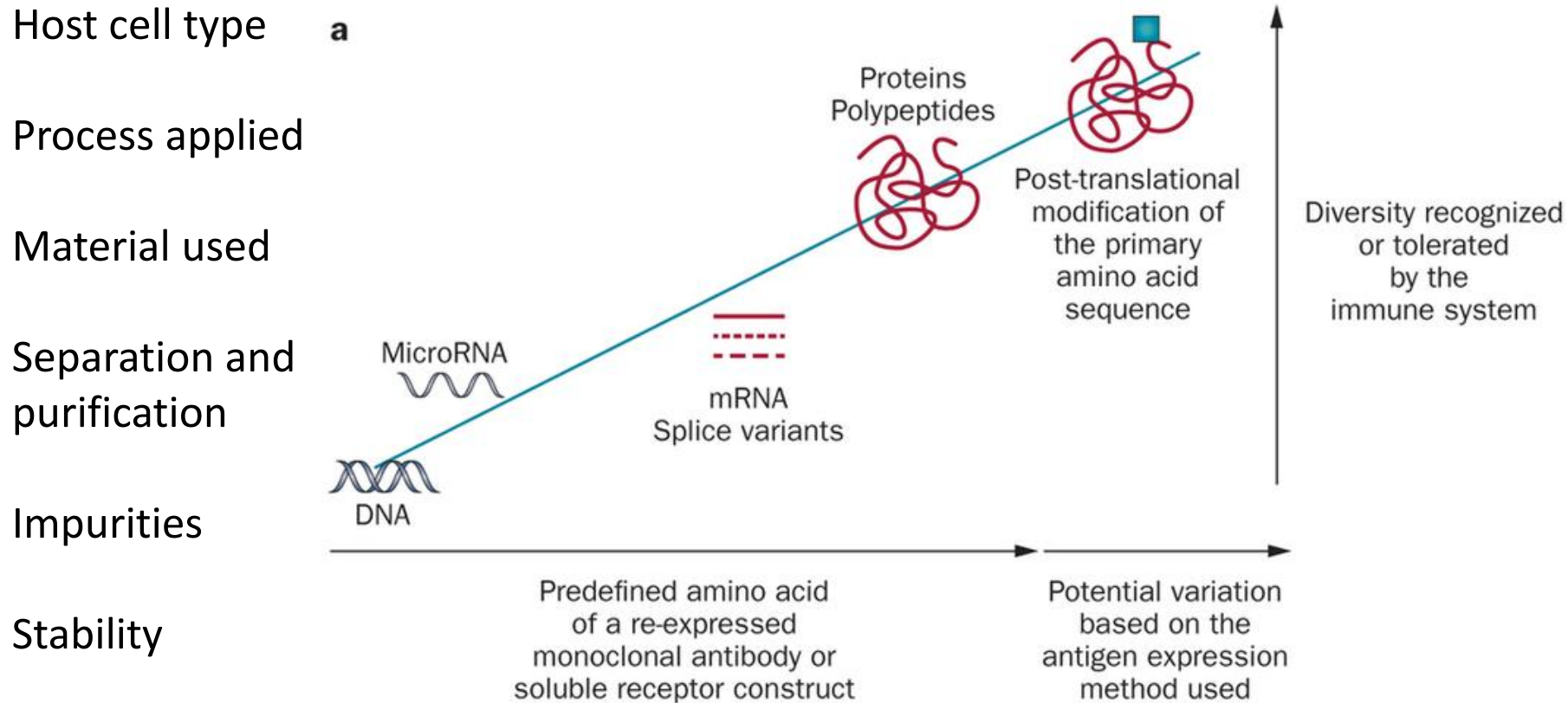


<<<290 days

INTERCHANGEABILITY



COMPLEXITY

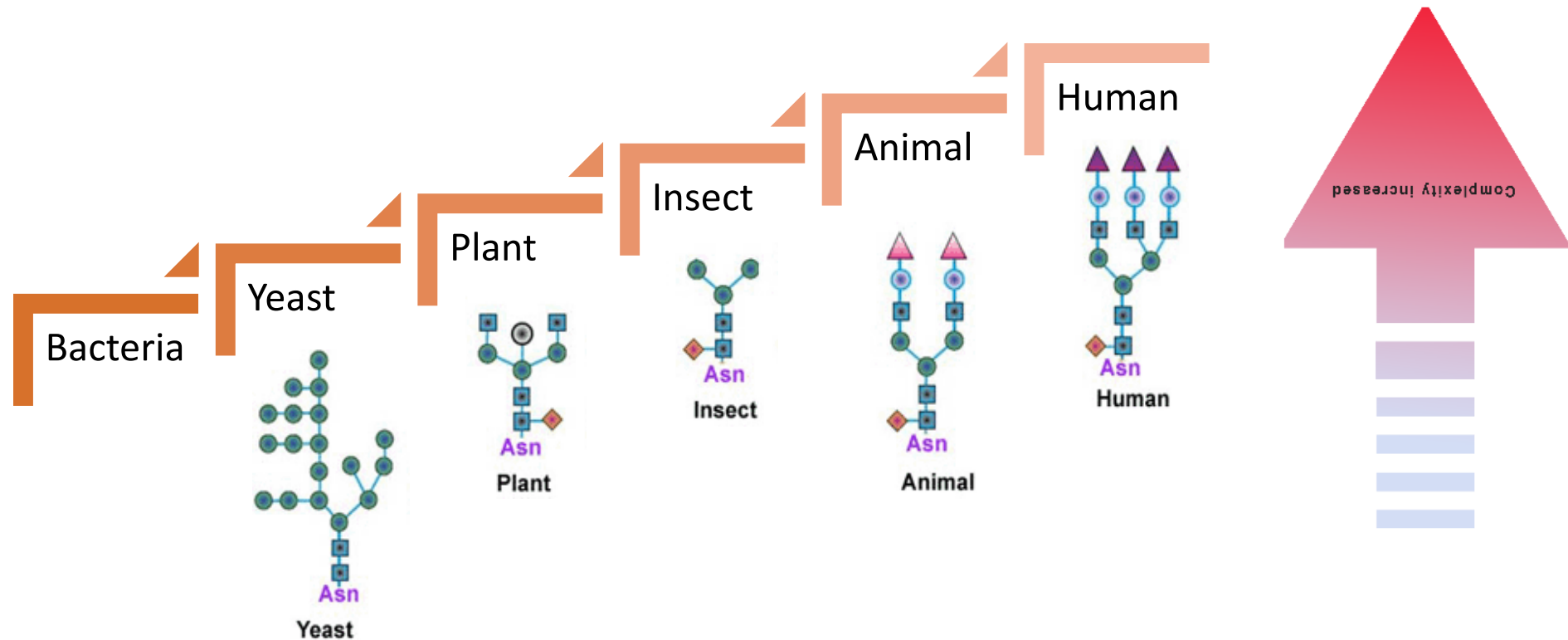


Biosimilars in rheumatology: current perspectives and lessons learnt.

Thomas Dörner, Jonathan Kay

Nat Rev Rheumatol. 2015 Dec; 11(12): 713–724

COMPLEXITY



REVIEW ARTICLE

Immunogenicity of therapeutic proteins: Influence of aggregation

Kirsty D. Ratanji, Jeremy P. Derrick, Rebecca J. Dearman, and Ian Kimber

Faculty of Life Sciences, University of Manchester, Manchester, UK

Abstract

The elicitation of anti-drug antibodies (ADA) against biotherapeutics can have detrimental effects on drug safety, efficacy, and pharmacokinetics. The immunogenicity of biotherapeutics is, therefore, an important issue. There is evidence that protein aggregation can result in enhanced immunogenicity; however, the precise immunological and biochemical mechanisms responsible are poorly defined. In the context of biotherapeutic drug development and safety assessment, understanding the mechanisms underlying aggregate immunogenicity is of considerable interest. This review provides an overview of the phenomenon of protein aggregation, the production of unwanted aggregates during bioprocessing, and how the immune response to aggregated protein differs from that provoked by non-aggregated protein. Of particular interest is the nature of the interaction of aggregates with the immune system and how subsequent ADA responses are induced. Pathways considered here include 'classical' activation of the immune system involving antigen presenting cells and, alternatively, the breakdown of B-cell tolerance. Additionally, methods available to screen for aggregation and immunogenicity will be described. With an increased understanding of aggregation-enhanced immune responses, it may be possible to develop improved manufacturing and screening processes to avoid, or at least reduce, the problems associated with ADA.

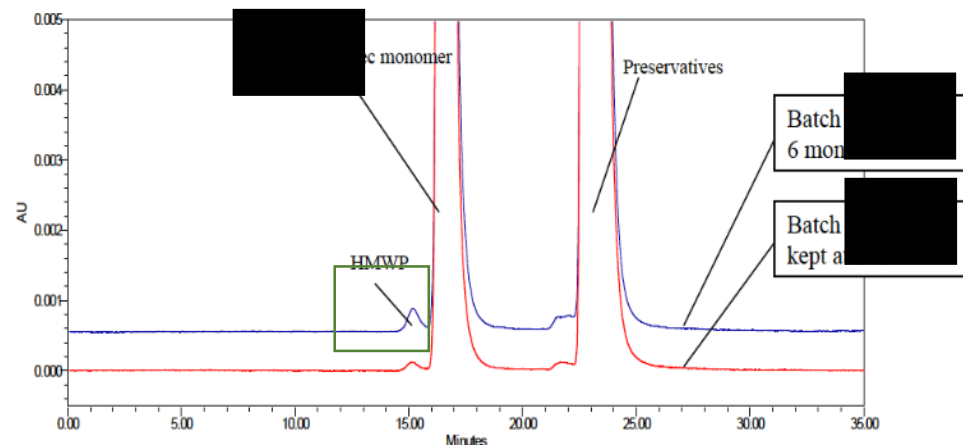
Keywords

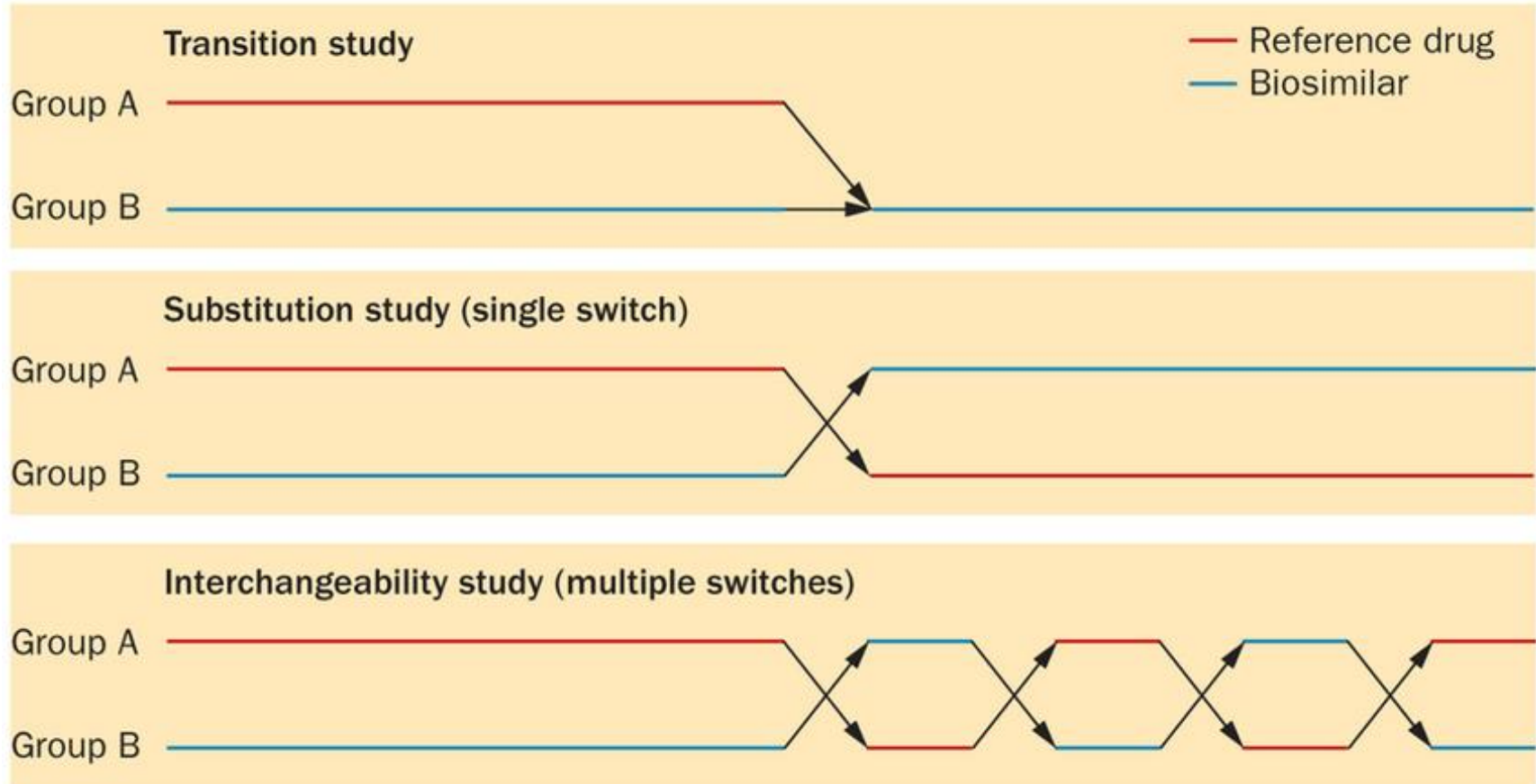
Aggregation, anti-drug antibodies, bioprocessing, biotherapeutic, immunogenicity

History

Received 30 May 2013
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Accepted 28 June 2013
Published online 6 August 2013

Section 3.2.S.3 Characterization of Impurities





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Nature Reviews | Rheumatology

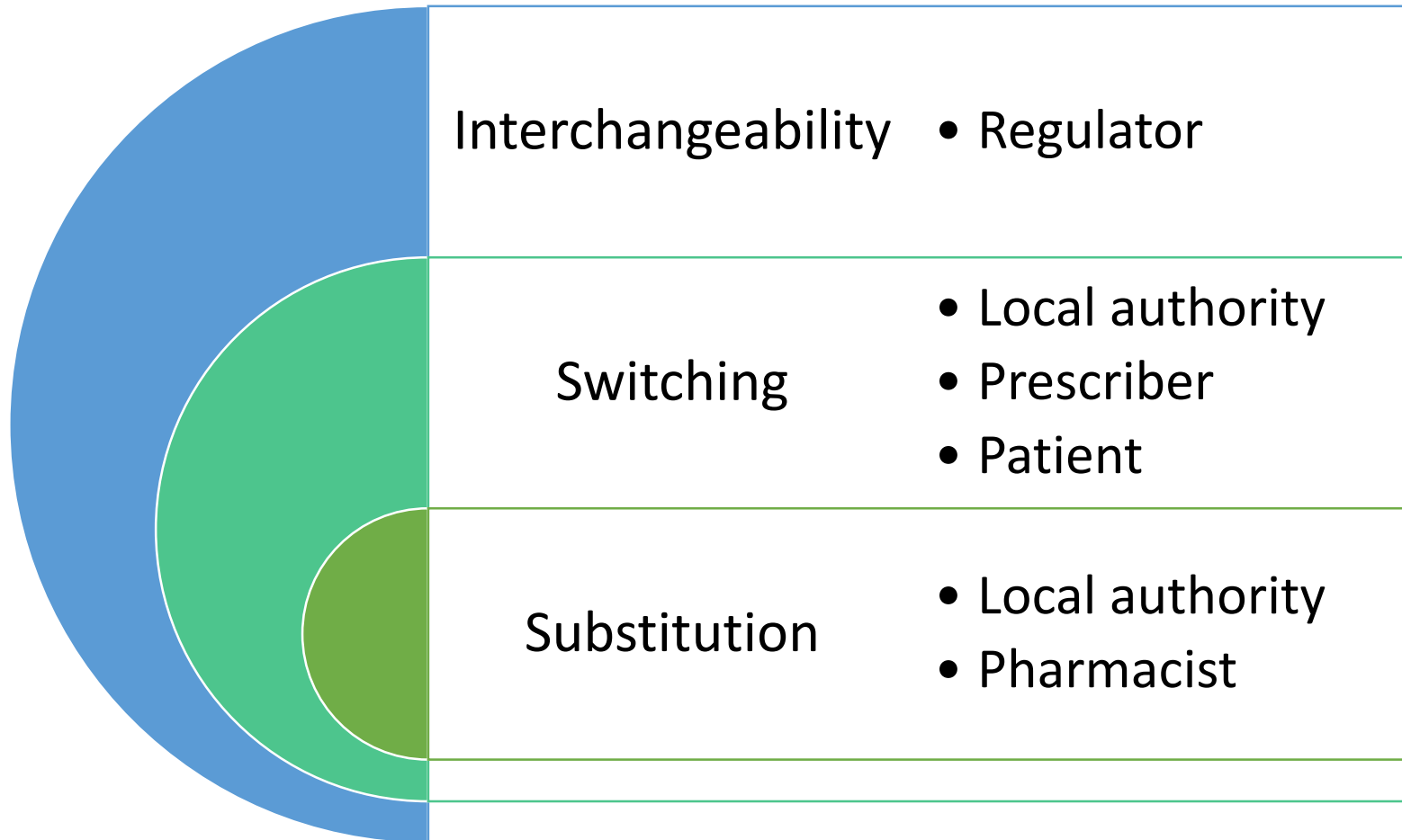
(1) Changing from an innovator drug to a biosimilar drug which used that same innovator drug as its RMP for comparability (or vice versa) can be accepted after physician and patient discussion.

(2) Changing from a biosimilar drug to another same biosimilar drug from a different manufacturer can be accepted after physician and patient discussion only if they both used the same RMP for comparability purposes.”

(3) Pharmacists cannot substitute biosimilars without [...] consultations with treating physicians

- Saudi Food and Drug Authority-

LEVELS



Biosimilar Celebrities

