Workshop on Metals in Pharmaceuticals and Dietary Supplements

USP Headquarters Rockville, Maryland April 28-29, 2009

Final Summary Session

The content of this presentation reflects the ideas and suggestions of the participants at the Metal Impurities Workshop, April 28-29, 2009. These deliberations are advisory and are not binding in any way to the Council of Experts, its Expert Committees and Advisory Panels, or USP staff.



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Final Summary: Limits

Moderator: Doug Templeton



Metals and Limits

What metals?

- As, Cd, Pb, Hg consensus
- Sb, Cr(VI) further evaluation
- Catalysts Later stages if necessary
- "No safe limit for Pb" (?)
- Botanicals individual elements (e.g., Cd)



Metals and Limits

What Limits?

- Separate limits from implementation.
- Data, data, data! Base on solid scientific toxicoloical data a vast literature on As, Cd, Hg, Pb wrt. PDE, NOE, etc.
- Good data, safety data, education and rationales, transparency.
- Staged approach soundest data first, standard population first.
- How much data do we need to generate??? Historical data in Pharmaceuticals maybe not very useful (due to limitations of methods used), but lots of toxicity data.



Chank You

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Final Summary: Methodology

Moderator: Michael Wierer



Participant Feedback—Methodology

- Participants requested allowing further use of either specific wet chemical metal tests or and improved (sample preparation, sensitivity) version of the (231) test. However capabilities to be determined.
- ICP-MS or GF-AAS and cold vapor AAS were considered suitable for analyzing the "big 4"
- ICP-OES considered less suitable
- Allow flexibility in choice of any validated method or other approaches demonstrating compliance with the limits
- Some preference for performance based approach vs. referee methods



Participant Feedback—Methodology

- Sample preparation seems to be most crucial point
- Possible approaches
 - Dilute and shoot
 - Sample digestion by microwave digestion techniques
 - Validation/ verification needed
- Tests should be validated as limit tests
- Reference standards only to be established where they are not available from or traceable to NIST



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Final Summary: Risk Assessment and Implementation

Moderator: Scott Lyon



General issues

- Implementation cannot be fully determined until limits and method are finalized.
- FDA guidance is a critical aspect to implementation issues
- A second Stimuli article is a recommendation to import ideas for methods and limits generated in this conference



Material Sources

- Look at finished drug products differently than excipients (<467> approach)
- Obtaining information from suppliers may be difficult mainly natural source variation
- Focus on the big four elements
- Broadening list of elements beyond big four and EMEA metal catalysts is a possibility as an "above 1000" informational chapter
- Focus on "what is likely to be present" although this may be difficult to specifically define



Manufacturer Responsibilities/Supply Chain

- For proprietary issues, supplier can work directly with the FDA
- Excipient manufacturers will need to generate more background data
- If regulatory burden is too high, suppliers may not supply the product



Regulatory Considerations

- Evaluation of historical data and comparison to current data may guide regulators on long-term testing requirements
- Key questions:
 - Would regulators require individual filing updates for every drug, DMF, etc.?
 - What would be the extent and format of data required?
 - What is the expectation of suppliers to report and what is the extent of information required?
 - Will the new requirements be considered tightening of limits (i.e., annually reportable)



Test Reduction

- This is a regulatory issue vs. a compendial issue
- Key issue is extent of routine testing required
- Will additional supplement require FDA buy-in



Alternative Technologies

- Would the proposed method be considered a referee method?
- Would the <467> model be acceptable?
- How will Performance Based Methods be viewed by FDA?



Phased Approach

- There may be issues for smaller non-global and non-IPEC firms
- Considering coordinating phased approach with ICH/PDG to assure consistent global implementation



Implementation Time

- Obtain FDA's regulatory expectations first, then determine timeline
- Five-years after publishing, but more time may be necessary
- Adherence to timelines will improve the harmonization process (i.e., ICH)



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Overall Summary

Moderator: Matthew Borer



Original Problem Statement

- We are committed to advancing the current standards (<231>) so that widely agreed upon safe limits for key metal impurities are properly measured, thereby protecting the public health.
- There has been significant debate about how to achieve this goal.



Limits/Methods/Implementation

- We want to set limits for appropriate metal impurities
 - (of known toxicity, that are sufficiently likely to be present)
- We want analytical techniques that measure selected metal impurities at the limits that we set
- We want an implementation approach that addresses concerns raised in the public response to the stimuli article in *Pharmacopeial Forum*, Vol. 34(5) [Sept.–Oct. 2008]



What Did We Achieve?

- Captured a full range of valuable perspectives on this topic
- Built communication channels to promote ongoing process
- A number of valuable proposals



- The new <231> should focus on the top four metal impurities
 - inorganic arsenic, cadmium, lead, methyl mercury
- We need to implement based on the assumptions that metal impurities are assessed as part of the composition profile of a test article, not a random contamination



 Consider a new general chapter for expected metal contaminants (e.g., catalysts and organometallic reagents) that is aligned with the EMEA Guideline (EMEA/CHMP/SWP/4446/2000)



Propose methodology but allow flexibility to apply any validated test method (for example, as stated in <467> ... "the following methods are useful...")



 Provide clarity that other metal impurity contamination must be handled as Foreign Substances and Impurities (per USP General Notices, Tests and Assays)



Meeting Summary - Regulatory

- Implementation process requires FDA position
 - Acceptance of strategy
 - Define "likely to be present"
 - Define expectations associated with regulatory filings
- Desire for discussion between Industry, FDA, and USP



What We Expect

- The input collected will be used to revise the proposed General Chapter
- The rationale for how the discussion points were (or were not) addressed will be made clear
- USP will communicate the approaches prior to PF publication
- Assure global harmonization
- Further engage Heavy Metals Project Team to advance these efforts



Chank You