

1 **Minutes of the DPTC Teleconference**
2 **on 1 December 2005**

3 **ATTENDEES**

Terry Tougas, *Chair* (Boehringer Ingelheim, IPAC-RS)
Tony Amann (ACN Pharma, GPhA)
David Christopher (Schering-Plough, IPAC-RS)
Sylvia Gantt (PQRI Executive Secretary)
Lana Lyapustina (IPAC-RS Secretariat)
Lee Nagao (IPAC-RS Secretariat)
Rich Poska (Abbot, PhRMA)
Robert Seevers (Lilly, PhRMA)
Raj Uppoor (FDA)

Apologies for absence received from Chris Moreton (Idenix Pharmaceuticals, IPEC)

4 **AGREEMENTS**

- 5 1. The RFID Report will be forwarded for final review and approval by the DPTC members and
6 their organizations. When approved, the report will be provided to the PQRI Steering
7 Committee (SC).
- 8 2. Dr. Tougas will communicate to the SC the suggestion that broader PQRI membership be
9 involved in a discussion of the PQRI future strategy.

10 **DISCUSSION SUMMARY**

11 *Opening*

12 Dr. Tougas opened the meeting and read the antitrust admonition: “Our discussions today are
13 subject to the anti-trust guidance applicable in the U.S. and E.U. Nothing discussed at this
14 meeting is intended to restrict the individual decision-making of any member company or to
15 represent an agreement to coordinate marketing or sales conduct. Those participating in this
16 meeting are instructed to avoid discussion of competitively sensitive subjects, including, but
17 not limited to, confidential marketing, sales, and pricing information.”

18 The objectives of the meeting were to update on the recent SC meeting, to discuss the RFID
19 report and to update on the DPTC Working Groups.

20 *Update on PQRI Strategic Meeting*

21 Dr. Tougas reviewed the outcomes of the 29 November Strategic Meeting of the SC’s
22 Subcommittee. He explained that in light of FDA’s changing view of the guidances,
23 Agency’s strained resources and the ongoing cGMP/Risk Management/Quality-by-Design

24 initiatives, PQRI is planning to shift its focus away from the regulation/guidances and
25 towards providing scientific input on issues of pharmaceutical product quality. FDA will not
26 be required to nominate representatives to each and every Working Group, which would
27 address the concern with resources and also the concern with the circular process when
28 “FDA is making recommendations to FDA.” Instead, more emphasis will be given to the
29 technical expertise of the Working Group members. As part of the refocusing, more
30 attention will be given to publicizing scientific findings in peer-reviewed journals. PQRI will
31 use the publications forum to allow scientific differences to be resolved through a regular
32 scientific process even when complete concordance cannot be reached within a PQRI group,
33 in which case both parties would be allowed to support their positions with scientific data or
34 models in open published literature. This would also allow avoiding delays in
35 communicating PQRI findings to the scientific community, which had been another concern
36 with the PQRI organization until now. PQRI will also consider restructuring the Technical
37 Committees to allow better coordination between MTC and DPTC, possibly sun-setting
38 DSTC, and revisiting the objectives of BTC. In summary, the SC has recognized that the
39 model used by PQRI for the last several years, which was originally based on the highly
40 successful SUPAC work, is in need of re-aligning with new paradigms and today’s
41 environment.

42 Dr. Uppoor commented, and others agreed, that PQRI should consider how to obtain data for
43 these scientific investigations. He explained that requiring only validated methods and only
44 approved-products’ data may not be practical because of regulatory, legal and financial
45 ramifications, whereas a traditional scientific approach, with careful analysis of accurate
46 experimental data might be just as sufficient for the evidence-based research. Dr. Uppoor
47 stressed that it would be important to populate Working Groups with individuals who not
48 only are knowledgeable about the subject matter but also have hands-on experience with the
49 methods and tools needed for a given project.

50 Dr. Poska encouraged the SC to involve the broader PQRI membership in the discussion of a
51 future PQRI strategy, e.g., through an all-PQRI meeting similar to those that were held in the
52 past. He requested clarification of the role FDA would play in PQRI, and strongly agreed
53 with the option of “minority reports”.

54 Dr. Tougas agreed to communicate these suggestions to the Steering Committee.

55 ***The RFID Working Group***

56 Dr. Seevers provided an updated on the RFID report which had been circulated to the DPTC
57 members previously. He highlighted the following revisions, which had been made since the
58 last DPTC discussion of this report during the 4 November meeting:

- 59 – the review of the CDRH paper on simulated insulin studies has been incorporated into
60 the report;
- 61 – an executive summary has been added;
- 62 – a historical background and purpose of the report has been included; and
- 63 – typos have been corrected.

64 Dr. Seevers reminded the participants that the RFID Working Group had started with the
65 goal of creating a protocol for investigation of RF effects on drugs and biologics. FDA
66 requested that before drafting such a protocol, the Working Group conduct a risk assessment
67 of RF exposure. The presented RFID report is that risk assessment.

68 The report draws on the following main sources of information for the risk assessment:

- 69 – Accenture studies, which showed that for exposures under 16 hours, even a liquid
70 product would exhibit a temperature increase of less than 2°C, which is the range of
71 uncertainty allowed by ICH guidelines for stability chambers and therefore by
72 definition is negligible.
- 73 – Analytical literature on RF demonstrating that non-thermal effects (which are in fact
74 highly localized thermal effects) have no impact on products' stability.
- 75 – Review of high-field NMR measurements, which expose proteins and other
76 biological molecules to RF for days and yet are used as a bioassay to determine the
77 localization of hydrogen bonds, meaning that the RF does not disrupt protein's
78 integrity.

79 Dr. Seevers concluded that all the available evidence, including the FDA-commissioned
80 CDRH study, point in the same direction, namely that there is no significant risk from RF to
81 any drug or biologic product.

82 Dr. Seevers noted that in a recent public forum FDA had expressed a desire to pursue
83 experimental studies on RFID. He underscored that such further studies are outside the
84 scope of the present report, and reiterated that this report had been requested by FDA in
85 August 2005 as a risk assessment, and that this task has now been completed.

86 During the DPTC discussion of the RFID report, the participants commented that the report
87 is based on published literature and established scientific principles, and commended Dr.
88 Seevers for the work he had done. They also discussed that while several of FDA
89 representatives may agree with the report, Dr. Poochikian in the past has been requesting
90 more experimentation. Dr. Poska asked about the process for reaching consensus within the
91 RFID Working Group, and Dr. Uppoor offered to email FDA participants internally to
92 discuss a way forward.

93 Dr. Seevers explained that there had never been a Working Group in place, and the DPTC is
94 the primary body for RFID discussions. Dr. Tougas clarified that Ms. Winkle had requested
95 a prompt submission of the available information to FDA through the PQRI channels so that
96 FDA could consider it while formulating the Agency's own position on RFID.

97 The DPTC agreed to proceed with the voting on the RFID report by email. Any dissenting
98 opinion would be noted when the report is provided to the SC. Dr. Poska requested that the
99 deadline for comments be set for early 2006 so that PQRI member organizations have time to
100 review and respond to the report. A deadline of 6 January 2006 was agreed.

101 ***The Excipients Working Group***

102 Dr. Uppoor reported that the Excipients Working Group held a meeting on 29 November to
103 discuss results of the recently completed survey. Dr. Uppoor will be drafting a report of
104 findings in the next three weeks.

105 ***The Leachables and Extractables Working Group***

106 On behalf of Dr. Nagao, Dr. Lyapustina reported that the Working Group is looking forward
107 to seeing DPTC members at the L&E Workshop next Monday and Tuesday. The current
108 number of registrants is 123 and more are still coming in. The Working Group's deliverable
109 was circulated to the DPTC on November 15, with a request for comments by 1 February
110 2006. Comments will also be collected during the Workshop and after the workshop from
111 workshop attendees.

112 ***The Profile Comparisons Working Group***

113 Mr. Christopher reported that the Working Group had received comments from the reviewer
114 on the paper submitted for publication earlier this fall. The reviewer recommended
115 separating historical background from the scientific findings and providing more data to
116 support certain statements. The Working Group will be discussing these comments on the
117 upcoming teleconference.

118 **NEXT MEETING/TELECONFERENCE**

119 To be determined.
120

Finalized on 30 December 2005