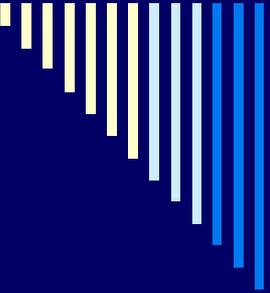


Abuse Deterrent Products: Next Steps

***Tufts Health Care Institute Program On
Opioid Risk Management: Guidelines for
the Development of Abuse-Deterrent
Opioid Formulations***

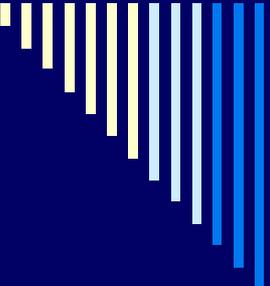
November 9-10, 2006

Cynthia McCormick MD



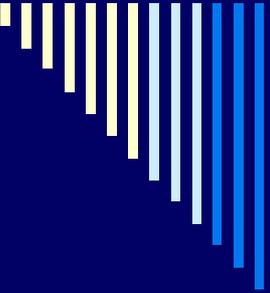
Assuming that Abuse Deterrent products are a good idea...

- What incentives would stimulate their development?
 - What steps would then ensure their availability?
-



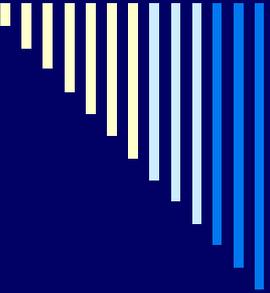
Proposed incentives

- Exclusivity
 - Reimbursement
 - Tax credits for clinical trials
 - Clearly articulated ground rules (Guidance) and protocol assistance
 - Fast track status
 - Priority review
 - Meaningful Labeling
-



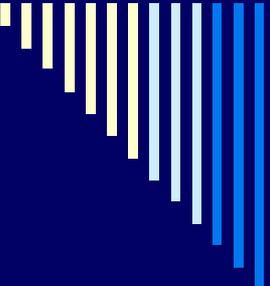
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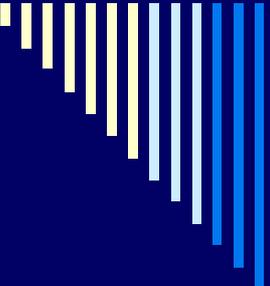
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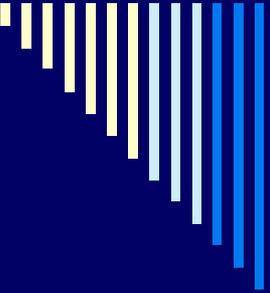
“Prescription Drug Abuse: What is being done to address this new Drug Epidemic?”

- Hearing: Subcommittee on Criminal Justice, Drug Policy and Human Resources July 26, 2006
 - Three questions for FDA
 - “if the FDA has responded to Congress’s year-old request for a report on how the agency might handle priority review of abuse-resistant formulations of prescription controlled drugs”
 - “Why hasn’t FDA provided guidance on this important matter?”
 - “to provide specific legislative recommendations for the reauthorization of PDUFA that will provide incentives for developing, and allow for the accelerated approval of, abuse-resistant forms of highly abused drugs”
-



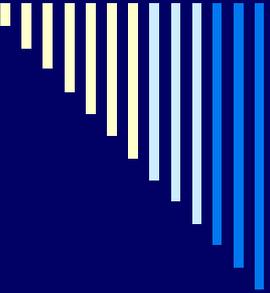
Making your voice heard at FDA

- Comment on proposed Regulations
 - Comment on proposed Guidance
 - Submit Citizen's Petition
-



Making your voice heard at FDA

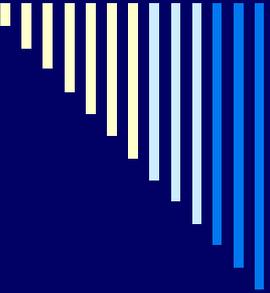
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Participation in Guidance Development

Under Section 701(h)(1)(A) of FDAMA
May include:

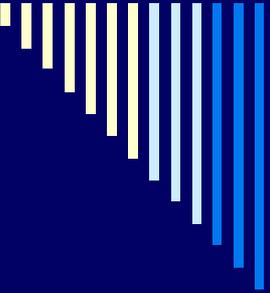
- ❑ Suggestions for areas of guidance development
 - ❑ Submission of drafts to FDA for consideration
 - ❑ Suggestions about revisions of an existing guidance document
 - ❑ Submission of comments on an annual list of possible topics for future FDA guidance development
 - ❑ Submission of comments on specific proposed and final guidance documents
-



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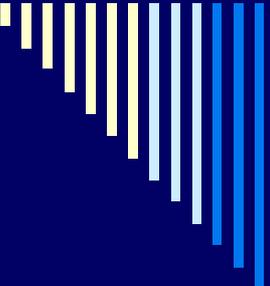
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-



Suggestions for areas of guidance development

- <http://www.accessdata.fda.gov/scripts/oc/dockets/comments/commentdocket.cfm?AGENCY=FDA>

[Dockets Open for Comment]

Docket Number & Title: 2004N-0234 - Annual Guidance Agenda

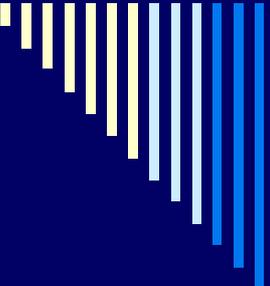
FR Type: Notice

Action: Other

Comment Period End Date: 08/31/07

[View FR Document for this Docket](#)

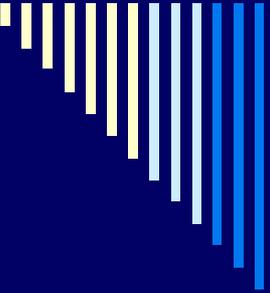
submit comments



Submission of drafts of guidance documents to FDA

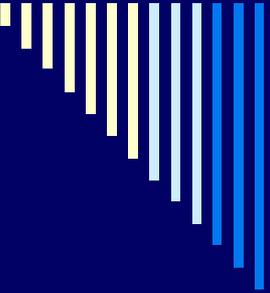
If you want FDA to draft a guidance document on a particular issue you should:

- Contact the Center (i.e., CDER) or Office (Office of the Commissioner) that is responsible for the regulatory activity covered by the guidance document
 - Include a statement of why the new document is necessary
-



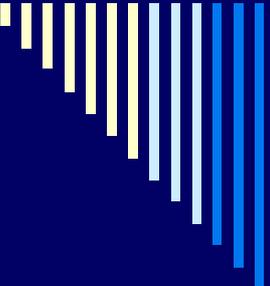
Question for consideration

- Why is the proposed guidance document necessary?
-



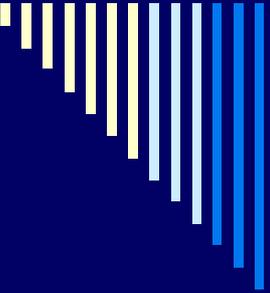
Citizen's Petition

- ...to request the commissioner of FDA to (issue, amend, or revoke a regulation or order, or to take or refrain from taking any other administrative action
-



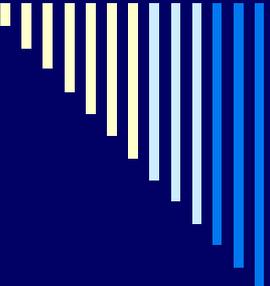
Citizen's Petition: Possibilities

- To draw upon the collective knowledge of experts in the area of analgesia, addiction, abuse liability assessment, diversion control, epidemiology (etc) to develop a series of guidance documents that provide a specific framework for development and labeling of abuse-deterrent products.
 - To designate abuse-deterrent products aimed at lessening the burden of Prescription Drug Abuse for “fast track” and assign a “priority review” (6 months) upon NDA submission.
 - Develop a credible plan for a legislative remedy that would provide greater incentives for innovation in the area of abuse-deterrent opioid formulation development
-



Guidances: further possibilities

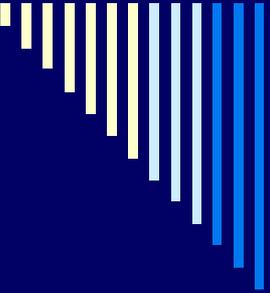
- Developing an Abuse-deterrent formulation
 - CMC (subsection or companion guidance)
 - Specifications for testing extractability, tamperability and separation
 - Labeling (subsection or companion guidance)
 - Guidance for obtaining specific implicit claims in product labeling related to abuse liability and tamper-deterrence
 - Others?
-



MAPP 4000.2

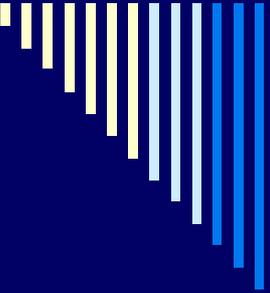
Developing and Issuing Guidances

- ❑ Communication of new policies through informal mechanisms such as speeches and letters to firms must be avoided until a policy is appropriately formulated, documented, and cleared...Repeated questions about a particular area may signal the need to develop clarifying policy and guidance for that area
 - ❑ CDER maintains a Guidance Agenda
 - ❑ Agency may solicit or accept early input on the need for a new...guidance, or assistance in the development of a particular guidance document from individual governmental and nongovernmental groups.
 - ❑ The Agency may participate in meetings with these various parties to obtain each party's views on priorities for developing guidance documents.
-



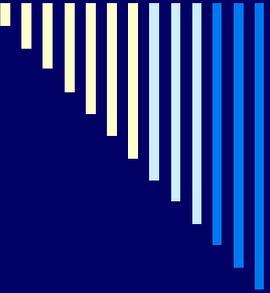
MAPP 4000.2

- Level approach to guidance development (Level 1—unusually complex scientific issues, highly controversial issues, changes in policy)
 - Level 1 requires public input (usually solicited prior to implementation)
 - NOA
 - Post draft guidance on CDER home page
-



Drafting a Guidance

- ❑ Specific protocol has been developed for initiating, drafting and clearance within FDA
 - ❑ Template available only on CDER Intranet
 - ❑ Guidances are developed to reflect FDA policy
 - ❑ FDA has intentionally not included specific elements of Good Guidance in the regulations
 - ❑ Guidance is nonbinding but there must be adequate cause to deviate from the written guidance as it reflects “current policy”
-



Proposal

- Provide outline for elements that are necessary for development of an abuse deterrent formulation
- Consider the elements that FDA considers when approving a drug and outline these systematically as they relate to new abuse-deterrent formulations
 - CMC (extraction, physical tampering, chemical tampering, separating components)
 - Efficacy (demonstration of effectiveness at various regimens and with transition from a traditional formulation—issues of LOE and withdrawal)
 - Safety (preclinical toxicology and clinical—demonstrating safety of new excipients, for example)
 - Biopharmaceutics (DDI, alcohol interaction, bioavailability by various routes of administration if extracted)
 - Abuse liability (compared with traditional formulation)
 - Labeling (implicit claims)