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- 2 CHMP/PKWP/EMA/422408/2013
- 3 Committee for Medicinal Products for Human Use (CHMP)

## 4 Voriconazole Product-Specific Bioequivalence Guidance

## 5 Draft

Draft Agreed by Pharmacokinetics Working Party	October 2013
Adoption by CHMP for release for consultation	24 October 2013
Start of public consultation	15 November 2013
End of consultation (deadline for comments)	15 February 2014

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Comments should be provided using this <u>template</u>. The completed comments form should be sent to <u>PKWPsecretariat@ema.europa.eu</u>.

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Keywords	Bioequivalence, generics, voriconazole
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12	<u>Disclaimer</u> :

13 This guidance should not be understood as being legally enforceable and is without prejudice to the need to ensure that the data submitted in support of 14 a marketing authorisation application complies with the appropriate scientific, regulatory and legal requirements.

16 Requirements for bioequivalence demonstration (PKWP)\*

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BCS Classification**	BCS Class:
	Background: Voriconazole is a low solubility compound.
BE Study design	single dose
	cross-over
	healthy volunteers



	<b>Strength:</b> 200 mg for the tablets because it is the highest strength, 200 mg for the 40 mg/ml powder for the oral suspension (in line with comparison highest tablet strength)	
	Number of studies: one single dose study for tablets, one single dose study for the oral suspension	
Analyte	□ parent □ metabolite □ both	
	⊠ plasma □ blood □ urine	
	Enantioselective analytical method: ☐ yes ☒ no	
Bioequivalence assessment	Main pharmacokinetic variables: AUC <sub>0-t</sub> , Cmax	
	90% confidence interval: 80.00- 125.00	

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<sup>\*</sup> As drug variability has not been reviewed, this guidance is not applicable to highly variables drugs.

<sup>\*\*</sup> The BCS classification should be confirmed by the Applicant at time of submission based on available data (solubility experiments, literature, etc.). If a drug substance has been classified as BCS class II or IV, no further solubility investigations are needed.