

Workshop on the Use of Statistical Methodologies in the Comparability Assessment of Quality Attributes

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- **Overview of Statistical Tools for Comparability Assessment**
- **Reference Product Selection**

Overview of Statistical Tools for Comparability Assessment

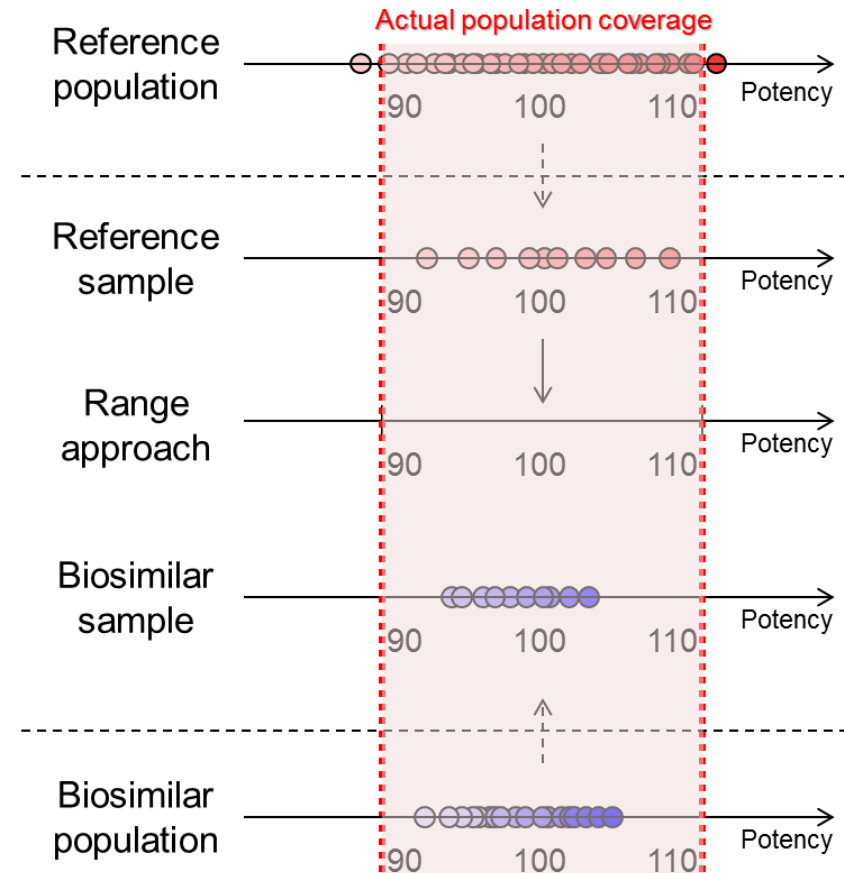
Range Approach

- Range approach utilizes samples of reference products in order to estimate the actual population
- Case studies show that range approaches consisting of min-max, x-sigma and TI can appropriately estimate the actual population

Equivalence Testing

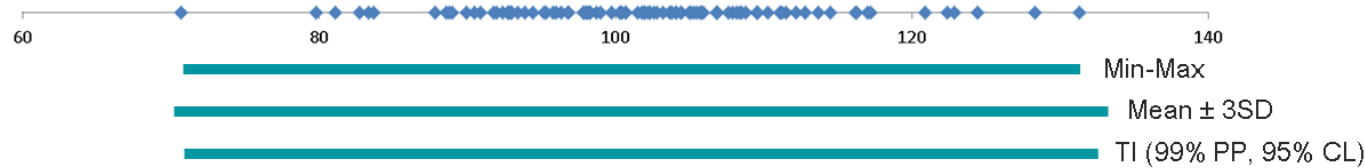
- Equivalence of attributes measured on a continuous scale can be assessed by testing the difference in means between the proposed biosimilar and reference product
- Equivalence testing can be problematic when the mean of the reference product shifts over time and when the selection of relevant reference product batches is difficult

- Range approach utilizes samples of reference products in order to estimate the actual population



- Case Study 1: Case study assuming appropriate sampling
 - 100 randomly sampled data were extracted from normally distributed population with mean of 100 and SD of 10
- Case Study 2: Case study associated with introduction of outliers
 - 100 randomly sampled data were extracted from normally distributed population with mean of 100 and SD of 10 (the same as Case Study 1)
 - Outlier 150.2 was intentionally included to mimic a test error
- Case Study 3: Case study associated with sampling chance
 - When sample size is small, skewed samples could be selected
 - 10 randomly sampled data were extracted from normally distributed population with mean of 100 and SD of 10
 - From those randomly sampled data sets, a skewed data set was selected

● Case Study 1: Case study assuming appropriate sampling



Method	Ranges	Actual Population Coverage*
Min-Max	70.7-131.3	99.7%
Mean \pm 3SD	70.2-133.2	99.8%
TI (99% PP, 95% CL)**	70.9-132.5	99.8%

* Actual population coverage of the range estimated from the sampled data

** covers 99% proportion of population with 95% confidence level

● Case Study 2: Case study associated with introduction of outliers

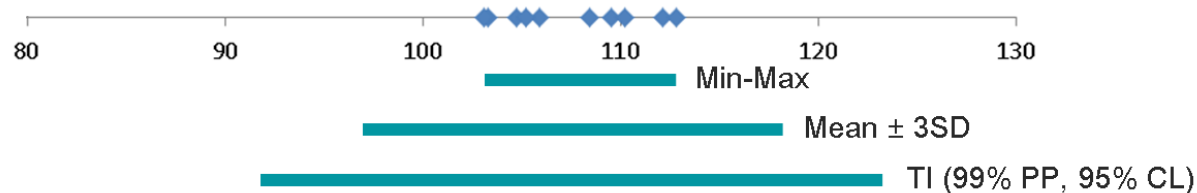


Method	Ranges	Actual Population Coverage*
Min-Max	70.7-150.2	99.8%
Mean \pm 3SD	67.6-136.5	99.9%
TI (99% PP, 95% CL)**	68.4-135.7	99.9%

* Actual population coverage of the range estimated from the sampled data

** covers 99% proportion of population with 95% confidence level

● Case Study 3: Case study associated with sampling chance

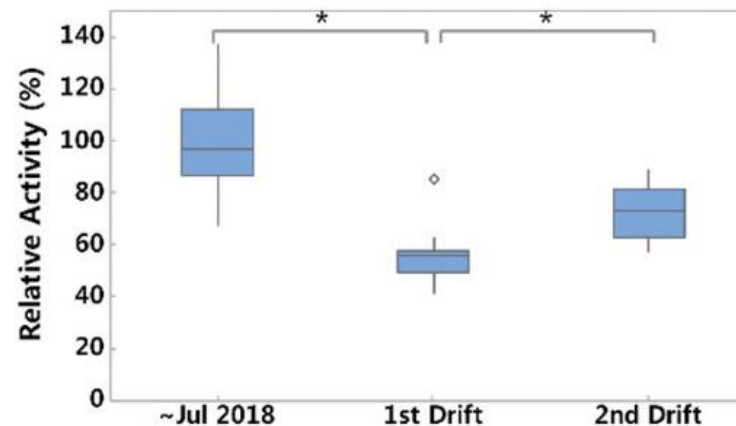
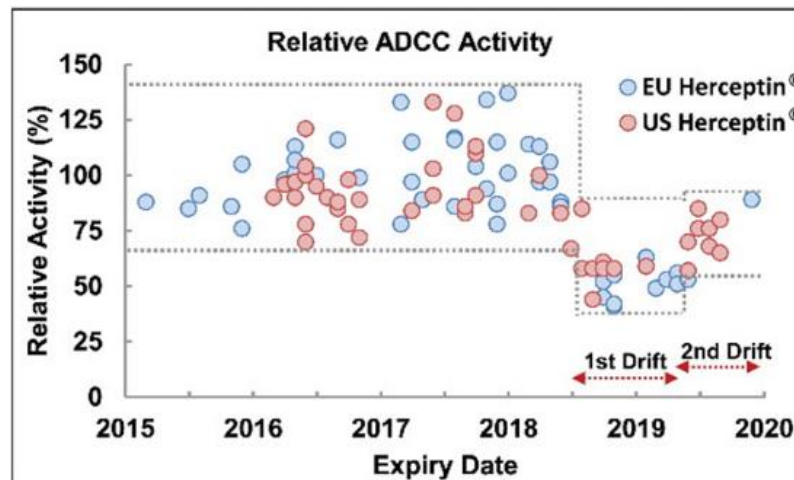


Method	Ranges	Actual Population Coverage*
Min-Max	103.1-112.8	27.8%
Mean \pm 3SD	96.9-118.2	58.8%
TI (99% PP, 95% CL)**	91.8-123.3	78.5%

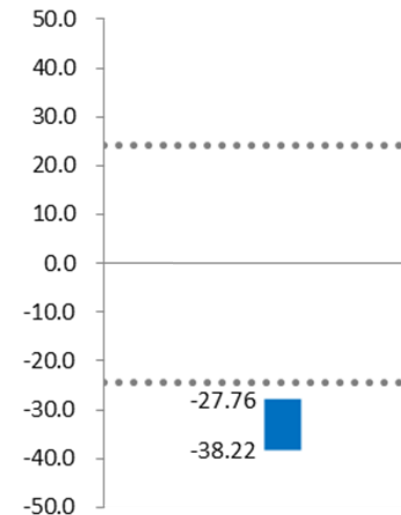
* Actual population coverage of the range estimated from the sampled data

** covers 99% proportion of population with 95% confidence level

- Equivalence testing comparing the means can be problematic since the mean of the reference products can change over time
- Variability of ADCC potency in Herceptin® reference product over time indicating a drift in mean ADCC potency
- Comparability within the originator products using equivalence testing can not be demonstrated due to the drift in mean



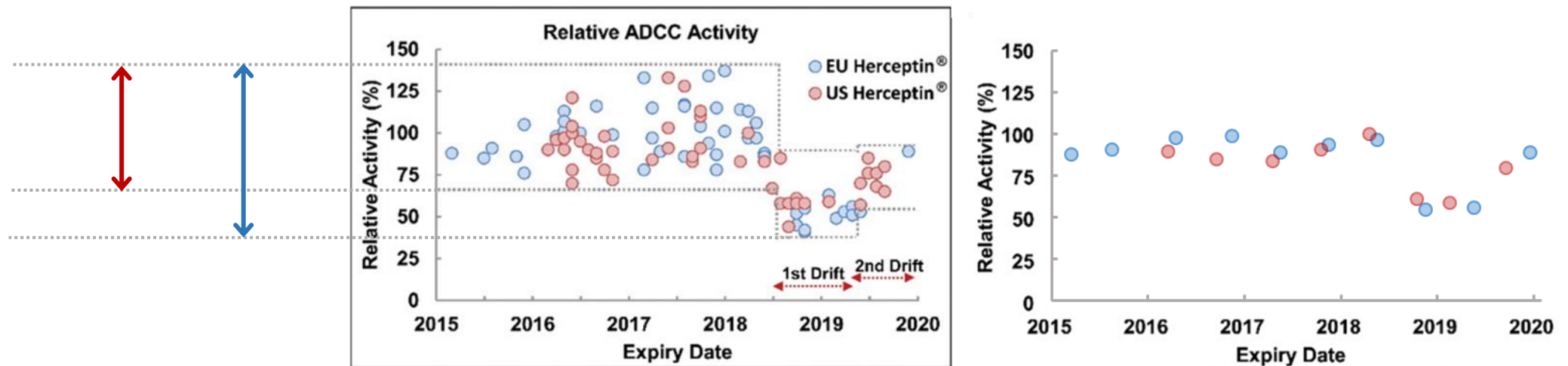
E.T. (Pre-drift vs. Post-drift)



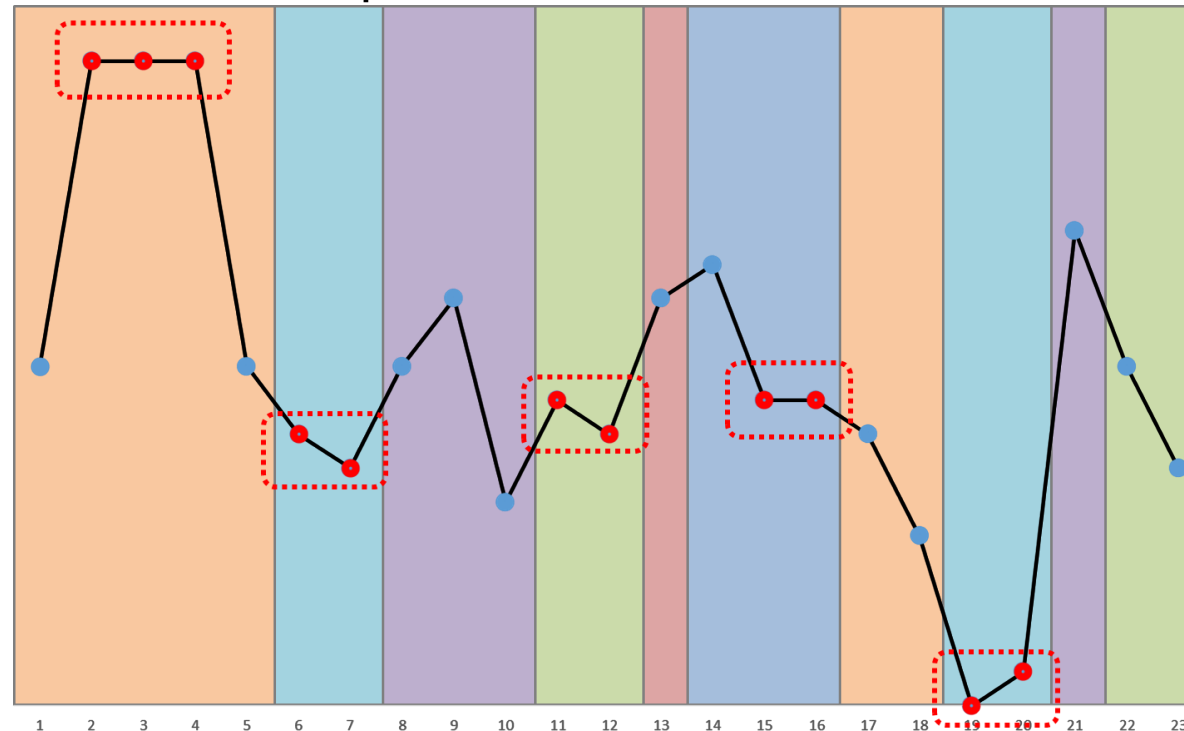
Reference Product Selection

- Age of the reference product should be taken into account for comparative assessment
 - It is not recommended to compare fresh biosimilar product with reference medicinal product at the end of the shelf life
- The reference product lots should be selected across the shelf-life of the approved product shelf-life
- The age of the reference product lots selected for the similarity assessment should be similar to that of biosimilar batches to minimize the impact of age on product quality

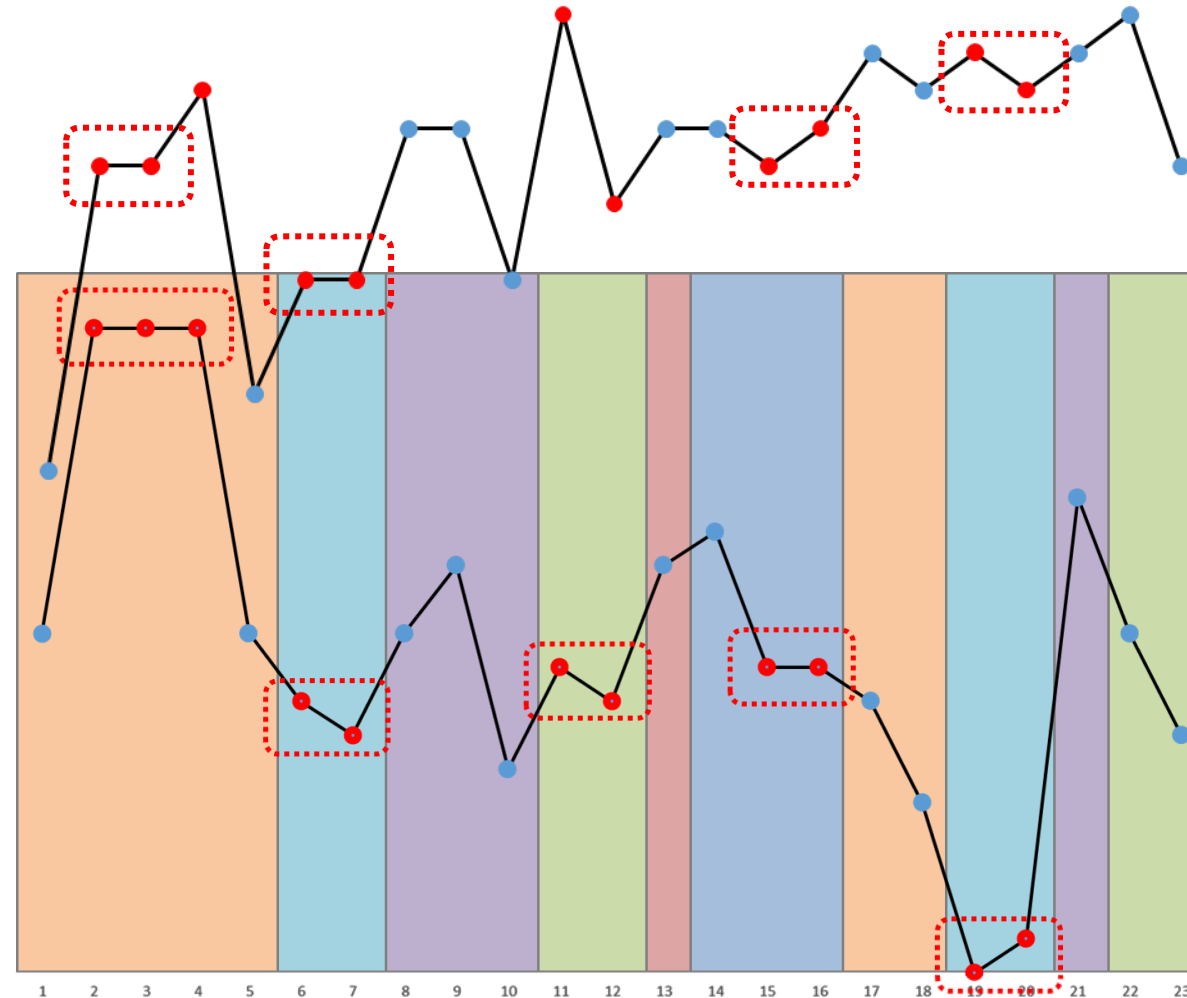
- Results of statistical assessment, especially that of equivalence testing, could vary significantly depending on the selected reference product
- Selection of appropriate reference product for comparability assessment is difficult since the trend in quality can not be easily detected without extensive monitoring of the reference products



- When reference products made with the same drug substance are chosen, equivalence testing becomes problematic since it does not reflect the variability of the reference product accurately
 - Selection of reference product that represent the variability of the reference may be difficult since information of each reference products are not available to the biosimilar developers



- Similar trend was observed for another quality attributes



- Biosimilarity assessment results can differ significantly depending on the selection of reference products
 - Two samples (A and B) having 10 data each are all randomly sampled from normally distributed population with mean of 100 and SD of 10
 - The pass rate of sample B to fall within the comparability range established using sample A are calculated using simulations
 - When data clusters were intentionally introduced into sample A, the pass rate of each statistical tools were altered
 - The impact is largest for equivalence test

Method	Random	Adjusted*	Gap
Equivalence Testing	81.2%	68.1%	13.1%
Min-Max	23.5%	15.5%	8.0%
Mean \pm 3SD	86.3%	76.0%	10.3%
TI (99% PP, 95% CL)**	98.2%	94.2%	4.0%

*adjusted to include data cluster to mimic data of DPs manufactured from the same DS

**covers 99% proportion of population with 95% confidence level

- All statistical tools have their own pros and cons, which are associated with the condition of the data sets
- EMA's draft reflection paper focuses on the limitation of statistical tools focusing on intervals, such as the min-max, x-sigma and TI
- Case studies show that equivalence testing can be problematic when the mean shifts over time and when the selection of relevant reference product batches is difficult
- Case studies show that range approaches consisting of min-max, x-sigma and TI, may be selected and used appropriately depending on the data sets
- Reflection paper and the subsequent guideline should provide flexibility in statistical tools used for comparability assessment

Thank You