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3 Committee for Medicinal Products for Human Use (CHMP)

4 **Reflection paper on the chemical structure and properties**  
5 **criteria to be considered for the evaluation of New Active**  
6 **Substance (NAS) status of chemical substances**  
7 **Draft**

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Comments should be provided using this [template](#). The completed comments form should be sent to [qwp@ema.europa.eu](mailto:qwp@ema.europa.eu)

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## 13 **Table of contents**

14	<b>Executive Summary</b> .....	<b>3</b>
15	<b>1. Introduction</b> .....	<b>3</b>
16	1.1. Scope .....	3
17	1.2. Legal basis and relevant guidelines.....	3
18	<b>2. Discussion and guidance</b> .....	<b>4</b>
19	2.1. Isomers .....	4
20	2.2. Mixtures of isomers .....	4
21	2.3. Complexes .....	5
22	2.4. Derivative .....	5
23	2.5. Esters and ethers .....	6
24	2.6. Salts.....	6
25	2.7. Solid state forms and NAS status .....	6
26	2.8. Documentation .....	6
27	<b>3. References</b> .....	<b>7</b>
28		

## 29 **Executive Summary**

30 This reflection paper is intended to reflect the current experience of the Quality Working Party (QWP),  
31 of the Committee for Medicinal Products for Human Use (CHMP) and the Co-ordination Group for  
32 Mutual Recognition and Decentralised Procedures-Human (CMDh) concerning the definition of a New  
33 Active Substance (NAS) in the context of preparation of dossiers and submissions of applications for  
34 Marketing Authorisation (MAA) in the Centralised Procedure (CP), the Mutual Recognition Procedure  
35 (MRP)/Decentralised Procedure (DCP) and purely national procedures for chemical medicinal products  
36 for human use.

37 The paper describes the chemical structure and properties criteria to be taken into account by the  
38 CHMP to qualify a chemical active substance as NAS, as well as the required elements to be submitted  
39 by applicants to substantiate their claims.

## 40 **1. Introduction**

41 This reflection paper intends to provide clarifications for applicants on the elements to qualify an active  
42 substance as NAS in the light of Article 10.2b of Directive 2001/83/EC and the Chapter I - Volume 2A  
43 of Notice to Applicants, as well as the evidence required. However it cannot cover every scenario, and  
44 therefore applicants are invited to obtain scientific advice for scenarios not covered in this reflection  
45 paper.

46 The above assessment is without prejudice to any assumption at the time of eligibility to the CP,  
47 MRP/DCP procedures, or to the grant of an International Non-proprietary Name (INN) by the WHO.

48 Eligibility to the CP based on the claim that the medicinal product for human use contains a new active  
49 substance must be dissociated from the assessment of the scientific data submitted in support of the  
50 NAS claim during evaluation of the marketing authorisation application. Agreement on designation as a  
51 NAS can only be made after a detailed assessment of the application.

52 Applicants are invited to consult the 'pre-submission guidance' on the EMA website for further details  
53 on the eligibility to the CP.

### 54 **1.1. Scope**

55 This reflection paper describes the chemical structure and properties criteria to be taken into account  
56 to qualify a chemical active substance as NAS, as well as the required elements to be submitted by  
57 applicants. It applies to marketing authorisation applications including solely chemical active  
58 substance(s) eligible to the centralised and MPR/DCP and purely national procedures.

59 Biological and biotechnological active substances and active substances to be included in  
60 radiopharmaceutical medicinal products are excluded from the scope of this reflection paper.

### 61 **1.2. Legal basis and relevant guidelines**

62 Directive 2001/83/EC

63 Article 10.2.b of Directive 2001/83/EC states:

64 *"[...] The different salts, esters, ethers, isomers, mixture of isomers, complexes or derivatives of an*  
65 *active substance shall be considered to be the same active substance unless they differ significantly in*

66 *properties with regard to safety and/or efficacy. In such cases, additional information providing proof*  
67 *of the safety and/or efficacy of the various salts, esters or derivatives of an authorised active*  
68 *substance must be supplied by the applicant [...]."*

69 Further information can be found in the Annex 1, Volume 2A, Chapter 1 of the Notice to Applicants  
70 (NtA).

## 71 **2. Discussion and guidance**

72 A chemical active substance that is not previously authorised in a medicinal product for human use in  
73 the European Union and that is from a chemical structure point of view not related to any other  
74 authorised substances should be considered as a NAS. Such substance is considered to be new in  
75 itself, when the structure of the therapeutic moiety is different from any other authorised so far as a  
76 medicinal product for human use.

77 If the chemical active substance is structurally related as a salt, ester, ether, isomer, mixture of  
78 isomers, complex or derivative of an already approved active substance(s) in the European Union, it  
79 should be assessed whether it shares the same therapeutic moiety at the site of the biological activity  
80 as the already approved active substance and if so whether it differs significantly in properties with  
81 regard to safety and/or efficacy.

82 Guidance is provided below to define the elements taken into account to qualify an active substance as  
83 salt, ester, ether, isomer, mixture of isomers, complex or derivative of another one in the context of  
84 the NAS status claim.

### 85 **2.1. Isomers**

86 Isomers should in this context be understood as enantiomers. Other types of isomers are presumed  
87 not to share the same therapeutic moiety unless they are able to isomerise *in vivo*. Stereoisomers  
88 related to each other as enantiomers have the same connectivity but are non-superimposable mirror  
89 images of each other. This implies that enantiomers have the same chemical and physical properties  
90 (except their ability to rotate plane polarized light), i.e. act in exactly the same manner, except when  
91 they interact with other chiral structures. In the case one enantiomer is applied for where the other  
92 enantiomer is the active substance in a previously authorised medicinal product for human use within  
93 the European Union it has to be assessed whether they differ significantly with respect to safety and/or  
94 efficacy properties. This assessment will be based on the data provided by the applicant.

95 When an isomer that is not the enantiomer of an already approved active substance (diastereoisomer,  
96 geometrical isomer, regioisomer, constitutional isomer etc.) is applied for it is presumed that it will not  
97 expose the patients to the same therapeutic moiety, unless it is able to isomerise *in vivo*, and could be  
98 considered as NAS. In such cases, evidence that the substance is not able to isomerise *in vivo* may  
99 need to be provided.

### 100 **2.2. Mixtures of isomers**

101 Where a previously authorised medicinal product for human use in the European Union includes a  
102 racemate and a new application for only one of the two enantiomers of the racemate is submitted, this  
103 enantiomer would have been a substantial part (50 %) of the racemate and would therefore be  
104 considered as the same active substance as the racemic mixture, unless the applicant provides  
105 evidence that the two substances differ significantly in properties with regard to safety and/or efficacy.

106 This does also apply to other situations where mixtures of diastereoisomers or other isomers have  
107 been authorised as medicinal products for human use and a new application contains only one of the  
108 isomers of the mixture.

### 109 **2.3. Complexes**

110 The term 'complexes' encompasses several types of structures. Two examples of complexes used as  
111 medicinal products for human use can be found below.

112 a. Complexes intended to release an active substance that is entrapped by the complex in the blood  
113 circulation or elsewhere. Examples of such complexes are e.g. piroxicam betadex or nicotine  
114 betadex.

115 b. Another type of complexes is those that are intended to remain intact in the body. There are e.g. a  
116 number of gadolinium complexes, with different complexing ligands, and with extremely low  
117 dissociation constant. They exhibit their effect by distributing gadolinium to places where it  
118 enhances the images obtained by NMR imaging. Due to the toxicity of free gadolinium they are  
119 designed to remain intact (not dissociate and release the metal).

120 Complexes of the category a. above prepared from an already approved active substance are designed  
121 to release the original substance *in vivo* and will consequently not be considered as NAS in themselves.  
122 Therefore the NAS status will have to be justified by significant differences with regard to safety and/or  
123 efficacy. On the contrary, complexes of the category b. exhibit their effect without dissociating, and  
124 different ligands may be used to complex the same metal. Because they do not dissociate the  
125 therapeutic moieties are presumed to be different and could be considered as NAS. In such cases,  
126 evidence that the complex does not dissociate may need to be provided.

### 127 **2.4. Derivative**

128 The term derivative, in the context of this reflection paper, includes related active substances which  
129 expose the patient to the same therapeutic moiety.

130 This includes notably situations:

131 a. Where the original substance or its active metabolite(s) *in vivo* will be derived from the new  
132 applied substance in such a manner that the patients are exposed to the same therapeutic moiety  
133 of the original substance (the applied substance is a prodrug).

134 b. Where the new applied active substance is the same substance as the therapeutic moiety that the  
135 patients were exposed to when treated with the original active substance (the applied substance is  
136 a metabolite).

137 In these situations, substances related as a "derivative" to the active substance of an already approved  
138 medicinal product for human use in the European Union will not be confirmed as NAS unless the  
139 applicant provides evidence that the substance being evaluated differs significantly in properties with  
140 regard to the safety and/or efficacy from the substance already approved.

141 The above mentioned situations also apply to stereoisomers which isomerise to authorised active  
142 substances *in vivo*.

## 143 **2.5. Esters and ethers**

144 Converting an active substance to certain esters or ethers is a well-established way of preparing so-  
145 called prodrugs. The purpose of a prodrug is to deliver the same therapeutic moiety to the patient,  
146 possibly with some differences such as a different bioavailability, a different *in vivo* distribution  
147 pattern, etc. Such esters or ethers of an already approved medicinal product in the European Union  
148 that are designed to be hydrolysed *in vivo* and expose the patient to the same therapeutic moiety as  
149 the original active substance will not be considered as NAS unless the applicant provides evidence that  
150 the substance being evaluated differs significantly in properties with regard to safety and/or efficacy  
151 from the one already approved.

152 If the applicant provides evidence that an ester or ether of an already approved medicinal product in  
153 the European Union exerts its effect in an intact shape (is not hydrolysed *in vivo*), and the patients are  
154 not exposed to the same therapeutic moiety as with the already approved medicine it could be  
155 considered as NAS. In such cases, evidence that the substance exerts its effect in an intact shape (is  
156 not hydrolysed *in vivo*) may need to be provided.

## 157 **2.6. Salts**

158 Salts usually dissociate in aqueous solution and the therapeutic moiety is no longer associated with the  
159 counter ion but is rather surrounded by solvent molecules and ions present in the solution. A different  
160 salt of an active substance previously authorised as part of a medicinal product in the European Union  
161 would be considered as the same active substance, unless the applicant provides evidence that the  
162 substance being evaluated differs significantly in properties with regard to safety and/or efficacy from  
163 the one already approved.

## 164 **2.7. Solid state forms and NAS status**

165 Since cocrystals, hydrates and solvates are held together by weak interactions that usually dissociate  
166 in a similar way as salts upon dissolution they will expose a patient to the same therapeutic moiety. As  
167 for salts, they will not be considered as NAS unless the applicant provides evidence that the substance  
168 being evaluated differs significantly in properties with regard to safety and/or efficacy from the one  
169 already approved.

170 This applies also to morphologically different crystal forms of an active substance. The differences  
171 between such polymorphic forms will immediately disappear when dissolved and they will be  
172 considered as the same active substances.

## 173 **2.8. Documentation**

174 Where an applicant submits a claim of NAS in the light of Article 10.2b of Directive 2001/83/EC, the  
175 applicant should demonstrate whether the active substance(s) subject of the application shares the  
176 same therapeutic moiety as the active substance(s) previously authorised in medicinal product(s) for  
177 human use. This should include a demonstration that the administration of the applied active  
178 substance would not expose the patient to the same therapeutic moiety as an already authorised  
179 active substance in the European Union. It is recommended that this is substantiated by comparison of  
180 structural substance/features which can be obtained using established databases and discussion on the  
181 therapeutic moieties for any structurally related already authorised substances in relation to the  
182 therapeutic moiety of the claimed NAS. Results of such investigations should be provided within the  
183 dossier.

184 When a substance applied for exposes the patient to the same therapeutic moiety as the previously  
185 active substance(s) as part of a medicinal product(s) authorised in the European Union, the applicant  
186 should provide evidence that the related active substances differ significantly in properties with regard  
187 to safety and/or efficacy. The documentation needed for such a claim will be dependent on the  
188 particular case details; applicants are advised to seek Scientific Advice accordingly.

### 189 **3. References**

190 Directive 2001/83/EC of the European Parliament and of the Council of 6 November 2001 on the  
191 Community Code relating to medicinal products for human use.

192 Notice to Applicants (NtA), Volume 2A – Procedures for marketing authorisation - Chapter 1 marketing  
193 authorisation.

194 Reflection paper on considerations given to designation of a single stereo isomeric form (enantiomer),  
195 a complex, a derivative, or a different salt or ester as new active substance in relation to the relevant  
196 reference active substance (Doc. Ref.: EMA/651649/2010).