



1 3 December 2013  
2 CHMP/PKWP/EMA/423716/2013  
3 Committee for Medicinal Products for Human Use (CHMP)

4 **Sunitinib Product-Specific Bioequivalence Guidance**  
5 **Draft**

<b>Draft Agreed by Pharmacokinetics Working Party</b>	<b>October 2013</b>
Adoption by CHMP for release for consultation	21 November 2013
Start of public consultation	3 December 2013
End of consultation (deadline for comments)	3 March 2014

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

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<b>Keywords</b>	<b><i>Bioequivalence, generics, sunitinib</i></b>
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11 Disclaimer:

12 *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*  
13 *a marketing authorisation application complies with the appropriate scientific, regulatory and legal requirements.*

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15 **Requirements for bioequivalence demonstration (PKWP)\***

<b>BCS Classification**</b>	<b>BCS Class:</b> <input type="checkbox"/> I <input checked="" type="checkbox"/> III <input type="checkbox"/> Neither of the two <b>Background:</b> Sunitinib malate may be considered a high solubility and a low permeability compound.
<b>BE Study design</b>	<b>single dose</b>
	<b>cross-over</b>
	<b>healthy volunteers</b>
	<input checked="" type="checkbox"/> <b>fasting</b> <input type="checkbox"/> <b>fed</b> <input type="checkbox"/> <b>both</b> <input type="checkbox"/> <b>either fasting or fed</b>



	<p><b>Strength:</b> 50 mg because it is the highest strength</p> <p><b>Background:</b> The bioequivalence study should in general be conducted at the highest strength. However, as this is a drug with linear pharmacokinetics and the drug substance is highly soluble, selection of a lower strength than the highest is also acceptable.</p>
	<p><b>Number of studies:</b> one single dose study</p>
<b>Analyte</b>	<p><input checked="" type="checkbox"/> parent      <input type="checkbox"/> metabolite      <input type="checkbox"/> both</p>
	<p><input checked="" type="checkbox"/> plasma      <input type="checkbox"/> blood      <input type="checkbox"/> urine</p>
	<p><b>Enantioselective analytical method:</b>    <input type="checkbox"/> yes    <input checked="" type="checkbox"/> no</p>
<b>Bioequivalence assessment</b>	<p><b>Main pharmacokinetic variables:</b> AUC<sub>0-72h</sub> and C<sub>max</sub></p>
	<p><b>90% confidence interval:</b> 80.00– 125.00</p>

16 \* As drug variability has not been reviewed, this guidance is not applicable to highly variables drugs.

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