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5 **Reflection paper on criteria to be considered for the**  
6 **evaluation of new active substance (NAS) status of**  
7 **biological substances**  
8 **Draft**

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14 biological substances

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## 46 **Executive Summary**

47 This document is intended to reflect the current experience of the Biologics Working Party (BWP) of the  
48 Committee for Medicinal Products for Human Use (CHMP), the Committee for Advanced Therapies  
49 (CAT), and the Co-ordination Group for Mutual Recognition and Decentralised Procedures-Human  
50 (CMDh) on New Active Substance (NAS) in the context of scientific advice and assessment of Marketing  
51 Authorisation Applications (MAA). It applies to all types of procedures for submission of a MAA, i.e.  
52 Centralised Procedure (CP), Mutual Recognition Procedure (MRP)/Decentralised Procedure (DCP) and  
53 purely national procedures for biological and biotechnology-derived medicinal products for human use.

### 54 **1. Introduction**

55 This document intends to clarify the elements that may be considered in support of a NAS claim for a  
56 biological active substance. It does not cover every possible scenario, and therefore applicants are  
57 invited to seek scientific advice on the evidence that may be appropriate to substantiate a NAS claim,  
58 especially for scenarios not covered in this reflection paper.

59 The assessment of NAS concerns the active substance contained in the finished medicinal product and  
60 not the finished medicinal product in itself (i.e., the finished product composition is not considered).

61 The NAS assessment is without prejudice to the CHMP opinion on the eligibility to the CP, or to  
62 differences in terms of International Non-proprietary Name (INN) of active substances in authorised, or  
63 previously authorised, medicinal products. Submitting a MAA under Article 8(3) of Directive  
64 2001/83/EC does not automatically confer a NAS status, nor does submitting through the centralised  
65 route. NAS claims can only be considered in the context of the assessment of a MAA.

66 The outcome of a NAS assessment has no retrospective impact on the eligibility granted to the CP.  
67 Applicants are invited to consult the 'pre-submission guidance' on the EMA website for further details  
68 on the eligibility for access to the CP.

#### 69 **1.1. Scope**

70 This document describes the current scientific thinking applied to NAS assessment of biological active  
71 substances and provides guidance on the elements required to be submitted by applicants to  
72 substantiate a NAS claim.

73 Advanced Therapy Medicinal Products (ATMPs) are within the scope of this document. The different  
74 considerations that apply to the NAS assessment of active substances in this class of products are  
75 presented separately.

76 Chemical active substances and radiopharmaceutical medicinal products are excluded from the scope  
77 of this reflection paper. Further guidance on the chemical active substances can be found in two  
78 reflection papers [EMA/651649/2010 and EMA/CHMP/QWP/104223/2015].

#### 79 **1.2. Relevant guideline**

80 The assessment of NAS claims is guided by the definition of new active substance in Annex I of  
81 Chapter 1 of Volume 2A of the Notice to Applicants (NtA), according to which "[a] *new chemical,*  
82 *biological or radiopharmaceutical active substance includes:*

- 83 - a chemical, biological or radiopharmaceutical substance not previously authorised in a medicinal  
84 product for human use in the European Union;  
85 - an isomer, mixture of isomers, a complex or derivative or salt of a chemical substance previously  
86 authorised in a medicinal product for human use in the European Union but differing significantly  
87 in properties with regard to safety and/or efficacy from that chemical substance previously  
88 authorised;  
89 - a biological substance previously authorised in a medicinal product for human use in the European  
90 Union, but differing significantly in properties with regard to safety and/or efficacy which is due to  
91 differences in one or a combination of the following: in molecular structure, nature of the source  
92 material or manufacturing process;  
93 - a radiopharmaceutical substance which is a radionuclide, or a ligand not previously authorised in a  
94 medicinal product for human use in the European Union, or the coupling mechanism to link the  
95 molecule and the radionuclide has not been authorised previously in the European Union”.

96 The above first and third indents of the NtA definition for NAS are relevant for new biological active  
97 substances. A substance is considered as NAS as long as one of the criteria is fulfilled.

## 98 **2. General considerations for assessment of biological New** 99 **Active Substance**

100 To allow for a NAS assessment, the active substance needs to be clearly defined. The claim for NAS  
101 should be aligned to what is declared in the MAA dossier, i.e. the administrative section and Module  
102 3.2.S.

### 103 **2.1. Definition of Active Substance**

104 According to Article 1(3a) of Directive 2001/83/EC, active substance is defined as “any substance or  
105 mixture of substances intended to be used in the manufacture of a medicinal product and that, when  
106 used in its production, becomes an active ingredient of that product intended to exert a  
107 pharmacological, immunological or metabolic action with a view to restoring, correcting or modifying  
108 physiological functions or to make a medical diagnosis”.

109 The Directive further defines in Annex I, Part I, Section 3.2.1 “biological [active] substance” as a  
110 substance that is produced by or extracted from a biological source and that needs for its  
111 characterisation and the determination of its quality a combination of physico-chemical-biological  
112 testing, together with the production process and its control (see Glossary for further details).

113 As a general principle, for well-characterised and highly purified active substances, the main  
114 component serves as the basis for the substantiation of a NAS claim, and it is normally sufficient to  
115 compare its basic structural elements (see Glossary). However, for less well-characterised proteins,  
116 complex mixtures of biological active substances, or certain classes of biologicals (e.g. vaccines,  
117 plasma-derived products, low molecular weight heparins), the assessment of differences in the basic  
118 structural element(s) may require additional considerations, as applicable. These active substances  
119 contain several molecular species which are all related to the intended molecular entity, i.e. besides  
120 the main molecular entity, other active structurally related entities or isoforms (product related  
121 substances) may be present.

122 The principle outlined above as regards the basic structural element(s) would generally apply to  
123 different classes of biological substances. In the case of ATMPs, an adapted approach should be  
124 applied, having regard to the specific characteristics of these products. ATMPs are therefore discussed  
125 separately (section 4).

## 126 **2.2. Toolbox approach**

127 It is the responsibility of the Applicant to provide a satisfactory scientific and robust substantiation for  
128 a NAS claim. This document discusses tools which may be used to support such a claim. An Applicant  
129 is not required to address each and every aspect that this reflection paper presents. If one 'tool'  
130 suffices to support the NAS claim, then other tools are not considered necessary. For example, if it is  
131 demonstrated that the amino acid sequence is different from any active substance authorised in an EU  
132 medicinal product ('first indent claim' from the above-quoted definition in Annex I of Chapter 1 of  
133 Volume 2A of the NtA), this would likely constitute sufficient substantiation and further arguments  
134 (e.g. claimed clinical benefits based on different manufacturing process, 'third indent claim') are  
135 superfluous.

## 136 **2.3. Other general considerations**

137 It is emphasised that product or process related impurities and extraneous agents (potentially being  
138 present) are not considered in the assessment of the NAS claim, whilst they may be relevant for the  
139 benefit/risk evaluation of the medicinal product in the context of a MAA. The Q&A contains a list of  
140 examples that provide some general guidance. For cases not covered by this Reflection Paper,  
141 companies are recommended to seek further scientific advice from the competent authorities.

## 142 **3. Active substances derived by recombinant or non-** 143 **recombinant systems (excluding-ATMPs)**

### 144 **3.1. Considerations for New Active Substance assessment based on first** 145 **indent of NtA definition of NAS**

146 *First indent of the NtA definition of NAS: "a chemical, biological or radiopharmaceutical substance not*  
147 *previously authorised in a medicinal product for human use in the European Union".*

148 The first indent addresses the structure of the active substance in itself without considering the need to  
149 provide evidence of differences on safety and efficacy. A biological active substance that is not  
150 previously authorised in a medicinal product for human use in the European Union and that is from a  
151 structure point of view not related to any other authorised substances should be considered as a NAS.  
152 Such substance is considered to be new in itself provided that the administration of the applied active  
153 substance would not expose patients to the same therapeutic moiety as already authorised active  
154 substance(s) in a medicinal product in the European Union.

155 The therapeutic moiety comprises one or more basic structural elements.

156 Examples of such basic structural element(s) are the filgrastim part of a PEG-filgrastim or the FVIII  
157 part in a FVIII-Fc conjugate (Q&A provides further examples). A biological molecular entity showing  
158 differences in this basic structural element(s) would likely be considered a NAS.

159 For proteins, the amino acid sequence would be considered as the basic structural element. Proteins  
160 showing substantial differences in the amino acid sequence constituting the basic structural element  
161 would likely be considered NAS. Importantly, changes introduced in the basic structural element should  
162 be substantial to warrant a conclusion of NAS (e.g. a conservative mutation of one amino acid only  
163 may not be substantial) but . When claiming NAS status, the applicant may therefore need to justify  
164 why a given change to the basic structural element is considered substantial. Supportive data would be  
165 expected to include analysis of amino acid alignments (e.g. FASTA file format) between the active  
166 substance under assessment and active substance(s) in authorised medicinal product(s) (published or  
167 own testing data).

168 Several classes of biological medicinal products are comprised of a group of related molecules with  
169 heterogeneous basic structural elements, heparin being one example. In this case, to support a claim  
170 of NAS, changes to the range of the heterogeneous basic structures would need to be shown. This  
171 might include additional structures or a change in the relative proportion of the various structures.  
172 However, where a molecular structure with the same basic structural element is produced but has  
173 additional post-translational modifications, such a structure would likely be considered as 'known active  
174 substance' unless it can be shown that these modifications have a significant clinical impact in terms of  
175 safety and/ or efficacy. See Section 3.2 on *Third indent below*.

176 Where additional molecular structures are chemically attached as part of the downstream  
177 manufacturing process, i.e. covalently bound, with or without a linker to the basic structural element,  
178 the whole molecule would likely be considered as 'known active substance', irrespective whether the  
179 additional structures are located at different positions within the same basic structural element, unless  
180 it can be shown that these modifications result in a significant difference in terms of safety and/or  
181 efficacy. See Section 3.2 on *third indent below*.

182 For the particular case where the active substance is formed by compounds (molecular entities) that  
183 comprise multiple molecular elements, whereby each element constitutes a (potential) active  
184 substance in itself, i.e. each element makes a fundamental contribution to the  
185 pharmacological/immunological/metabolic action of the molecular entity as a whole, it will be evaluated  
186 whether it will qualify as an active substance as a whole entity in itself or as a combination of active  
187 substances. For example, in an antibody-drug conjugate, both the antibody and drug are expected to  
188 have a pharmacological/immunological/metabolic action. Whilst the antibody-drug conjugate (as a  
189 whole entity) is considered as the active substance, differences in either the antibody or drug should  
190 be considered in the assessment and might be supportive of a NAS claim. The same reasoning can be  
191 applied to conjugated vaccine antigens.

192 As noted, biologicals are usually complex mixtures. However, as the NAS is based on the basic  
193 structural element, which is expected to be present in most if not all components of the mixture,  
194 consideration of the main component or expected (amino acid) sequence would usually be sufficient in  
195 the justification of a NAS claim. For example, in the case of the active substance human insulin, the  
196 A21 desamido human insulin (which is considered part of the insulin active substance<sup>1</sup>) does not need  
197 to be separately taken into consideration in the NAS assessment.

### 198 **3.2. Considerations for New Active Substance assessment based on the** 199 ***third indent of NtA definition of NAS***

200 *Third indent of NtA definition of NAS: "a biological substance previously authorised in a medicinal*  
201 *product for human use in the European Union, but differing significantly in properties with regard to*  
202 *safety and/or efficacy which is due to differences in one or a combination of the following: in molecular*  
203 *structure, nature of the source material or manufacturing process"*

204 A biological substance can still be considered as a NAS even when structural differences are insufficient  
205 for a NAS claim under indent 1. In such case, the therapeutic moiety has the same basic structural  
206 element(s) but other differences in variability are present and have an impact on safety and efficacy.

207 A third indent NAS claim should follow a two-step justification. Firstly, the active substance and its  
208 difference with previously authorised active substances should be unequivocally defined. Secondly, it  
209 should be demonstrated that due to the differences identified, the active substance has a significantly

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<sup>1</sup> Ph.Eur. 01/2011;0838

210 different safety and efficacy profile compared to active substance(s) contained in EU authorised  
211 medicinal product(s).

212 The claimed differences in quality attributes must be unequivocally defined for a NAS claim to be valid.  
213 These differences in quality attributes could include post translational modifications such as  
214 glycosylation, sulfatation, phosphorylation or disulphide bridging, or the addition of a functional  
215 structure such as polyethylene glycol. Differences in the source of material or manufacturing process  
216 should result in clearly defined differences in quality attributes. For example, a different expression  
217 system could result in changes to the active substance glycosylation profile which might lead to a  
218 significant difference in the product safety and/or efficacy profile. To substantiate such claim, a wide  
219 range of sensitive analytical methods should be applied to demonstrate that such claimed differences  
220 in quality attributes, as compared to the active substance(s) contained in corresponding EU authorised  
221 medicinal product(s), are consistently present, i.e. is not due to batch-to-batch variability.

222 As noted in section 2, a biological active substance can be a complex mixture of a main component  
223 and/or several product related substances. Meaningful changes within the exact composition of such a  
224 complex mixture (e.g. complete afucosylation of a monoclonal antibody instead of the presence of both  
225 fucosylated and afucosylated forms) could be considered sufficient to justify the granting of NAS  
226 status, if it is substantiated that it translates in significant difference (e.g. in afucosylation) in terms of  
227 efficacy and/or safety.

228 In summary, claims of NAS linked to structural difference of the substance insufficient for a NAS claim  
229 under indent 1 shall be justified under this indent and require evidence of significant differences in  
230 properties with regard to efficacy and/or safety compared to the active substance(s) contained in EU  
231 authorised medicinal products.

232 Despite not being generally applicable to biological medicinal products, relevant guidance on the type  
233 of evidence required to show differences in safety and/or efficacy compared to the active substance(s)  
234 contained in medicinal products already authorised in the EU, as well as on what might constitute a  
235 significant difference in safety and/or efficacy to justify the designation of the active substance as NAS,  
236 can be found in Section 2.2 "Type of evidence required to show differences" of the "Reflection paper on  
237 considerations given to designation of a single stereo isomeric form (enantiomer), a complex, a  
238 derivative, or a different salt or ester as new active substance in relation to the relevant reference  
239 active substance" (EMA/651649/2010). Examples of such clinically relevant differences quoted in this  
240 reflection paper include changes to the overall efficacy at clinically relevant doses, clinically relevant  
241 changes that result in significant differences to contraindications, warnings or clinically significant  
242 adverse reactions, clinically relevant changes that affect significantly drug:drug interactions such that  
243 the population able to take the drug is significantly different, clinically relevant changes that allow the  
244 product to be used in a wider patient population within the current indication or previously excluded  
245 sub-groups.

246 The aforementioned reflection paper also acknowledges that compelling non-clinical data may support  
247 relevant substantial differences in safety and/or efficacy, where it is not feasible to conduct head-to-  
248 head clinical studies.

## 249 **4. Advanced Therapy Medicinal Products (ATMPs)**

250 This section is aimed at providing guidance for supporting a NAS claim for ATMPs based on the first or  
251 third indent of the above referenced NtA NAS definition. In both cases, the NAS claim should be based  
252 on differences in active substance. Differences in process- and product-related impurities or  
253 extraneous agents are not considered for a NAS claim.

254 **4.1. Considerations for New Active Substance assessment based on first**  
255 **indent of NtA definition of NAS**

256 For ATMPs, it may be technically difficult to identify the basic structural features. For this reason, under  
257 indent 1, the consideration whether an active substance constitutes a NAS could be based on its  
258 biological characteristics and/or biological activity. However, to the extent that the basic structural  
259 element of the active substance in an ATMP can be defined, differences in the basic structural element  
260 compared to active substance(s) authorised in the EU could support a NAS claim.

261 The following illustrative differences in active substance can justify a NAS claim under indent 1.

262 **4.1.1. Cell-based and tissue engineered products**

263 A first indent NAS claim could be justified by substantial differences in biological characteristics and/or  
264 biological activity and/or (to the extent that is technically possible to define basic structural features)  
265 in basic structural elements, of the active substance, including differences caused by a difference in  
266 starting materials or manufacturing process. The following is a non-exhaustive list of examples:

267 i. *Different cell type:* A difference in cell type as active substance, such as mesenchymal  
268 stem cells (MSCs) versus hematopoietic stem cells (HSCs) or T-lymphocytes versus B  
269 lymphocytes could be considered a difference that could justify a first indent NAS claim.  
270 Differences in cell types considered impurities should not justify a first indent NAS claim.

271 ii. *Different cell source:* Certain differences in the cell source, such as in the case of primary  
272 cells vs. cell lines, or tumour cell line vs. non-tumour cell line could be considered  
273 differences that could justify a first indent NAS claim.

274 Differences in the source of starting material used for the manufacturing of MSCs (e.g.,  
275 placenta, adipose tissue, umbilical cord blood, or bone marrow) could justify a first indent  
276 NAS claim as they could be considered to cause substantial differences in the biological  
277 characteristics and/or biological activity of the active substance. In contrast, it cannot be  
278 assumed that a difference in the source material used for manufacturing HSCs (i.e., bone  
279 marrow or mobilised peripheral blood) impact *a priori* on biological characteristics and/or  
280 biological activity of the active substance. It follows that, in case of HSCs, a first indent  
281 NAS claim based on a difference in the source material should be supported by a product-  
282 specific justification that such changes result in substantial differences in the biological  
283 characteristics and/or biological activity of the active substance.

284 It is stressed that the mere change of cell stock, or in case of a different donor for primary  
285 cells (as in an autologous or matched-donor scenario) does not justify a NAS claim, unless  
286 evidence of a substantial change in the biological characteristics and/or biological activity  
287 of the active substance can be demonstrated.

288 iii. *Different cell composition:* A difference in the ratio of different related cell-types that are  
289 part of the active substance (e.g. CD4+/CD8+ or CD34+ subpopulations) could be  
290 considered a difference that could justify a first indent NAS claim, provided that the cellular  
291 composition is controlled within a range that is defined by the manufacturing process rather  
292 than by patient to patient variability and impacts in a substantial manner the biological or  
293 functional characteristics of the active substance.

294 iv. *Differences in other biological characteristics:* A difference in the activation or differentiation  
295 status of the cells could be considered a difference that could justify a first indent NAS claim,



296 provided that this property is substantial for the biological characteristics and/or biological  
297 activity of the active substance.

298 v. *Differences in manufacturing process:* The following is a non-exhaustive list of examples of  
299 differences in manufacturing process that could justify a first indent NAS claim, provided that  
300 the difference in manufacturing process has a substantial impact on biological characteristics  
301 and/or biological activity of the active substance.

302 ○ Non-cultured cells vs. cultured cells.

303 ○ Selective stimulation during cell culture by inclusion of growth factors or cytokines

304 ○ Dendritic cells activated with a tumour lysate vs. dendritic cells activated by means  
305 of purified tumour protein,

306 ○ Bioprinting of the active substance vs. conventional tissue engineering methods.

#### 307 **4.1.2. In vivo gene therapy**

308 A first indent NAS claim could be justified by substantial differences in biological characteristics and/or  
309 biological activity and/or (to the extent that is technically possible to define basic structural features)  
310 in basic structural elements, of the active substance, including differences caused by the  
311 manufacturing technology. The following is a non-exhaustive list of examples:

312 i. *Differences in the transfer system:* A difference in the transfer system when being part of the  
313 active substance (e.g. viral vector system vs. non-viral vector system) is expected to be a  
314 substantial difference that could justify a first indent NAS claim.

315 ii. *Differences in the viral vector:* A difference in the viral vector (e.g. adenovirus vs. AAV) is  
316 expected to be a substantial difference that could justify a first indent NAS claim.

317 In addition, a difference in virus capsid due to the use of a different (sub-)type of virus vector or the  
318 presence of different capsid proteins is expected to be a substantial difference that could justify a first  
319 indent NAS claim.

320 The above examples are not exhaustive, other substantial differences in the viral sequence (e.g.  
321 differences that reduce the risk of insertional mutagenesis or the risk of formation of replication  
322 competent viruses, as well as differences associated with the integration profile) could also justify a  
323 first indent NAS claim.

324 iii. *Differences in the therapeutic sequence:* A difference in the therapeutic sequence resulting in  
325 a substantial difference in amino acid sequence of the therapeutic protein could justify a first  
326 indent NAS claim.

327 In addition, other differences in the therapeutic sequence that substantially impact on the biologic  
328 characteristics and/or biological activity of the therapeutic protein could justify a first indent NAS claim.  
329 Differences in the therapeutic sequence that substantially impact the level of expression or stability of  
330 the therapeutic protein could justify a first indent NAS claim.

331 iv. *Differences in the regulatory sequences:* Differences in the regulatory sequences that  
332 substantially impact the level of expression of the therapeutic protein, stability, tissue tropism  
333 or transduction efficiency could justify a first indent NAS claim.

334 v. *Differences in manufacturing technology:* Differences in manufacturing process that have a  
335 substantial impact on biological characteristics and/or biological activity of the active substance  
336 could justify a first indent NAS claim. For example, due to the different precision, efficiency,

337 and specificity profiles of the different nuclease-based engineering technologies, the various  
338 technologies are considered to likely substantially impact on biological and functional  
339 characteristics of the active substance and thus could justify a first indent NAS claim.

### 4.1.3. Genetically modified cells

A 1<sup>st</sup> indent NAS claim could be justified by substantial differences in biological characteristics and/or biological activity and/or (to the extent that is technically possible to define basic structural features) in basic structural elements, of the active substance, including differences caused by the manufacturing technology. The following is a non-exhaustive list of examples:

- i. *Differences in cells*: As genetically modified cells are also cell-based products, considerations as described above for cell-based products apply.
- ii. *Differences in therapeutic sequence*: considerations as described above for *in vivo* gene therapy products apply.
- iii. *Differences in regulatory sequences*: Differences in the regulatory sequences that substantially impact the level of expression, function or stability of the therapeutic protein could justify a 1<sup>st</sup> indent NAS claim.
- iv. *Differences in the viral vector (starting material)*: Differences in the viral vector that have a substantial impact on biological characteristics and/or biological activity of the active substance could justify a 1<sup>st</sup> indent NAS claim. The following is a non-exhaustive list of examples that could justify a NAS claim:
  - o differences in the viral vector used to transduce the cells (e.g. retrovirus vs. lentivirus);
  - o differences at the level of the viral sequence that reduce the risk of insertional mutagenesis or the risk of formation of replication competent viruses in the transduced cells;
  - o differences associated with the integration profile in the transduced cells;
  - o differences at the level of the virus capsid or viral sequence that impact the transduction profile or composition of the transduced cell population.
- v. *Differences in manufacturing process*: Differences in manufacturing process that have a substantial impact on biological characteristics and/or biological activity of the active substance could justify a 1<sup>st</sup> indent NAS claim. For instance, the use of different nuclease-based engineering technologies (e.g. zinc finger vs Cas9) is expected to have a substantial impact and could justify a 1<sup>st</sup> indent NAS claim, even if they target the same DNA sequence.

## 340 4.2. Considerations for New Active Substance assessment based on the 341 third indent of NtA definition of NAS

342 A NAS claim based on the third indent of the above referenced NtA NAS definition should be considered  
343 where a related active substance has been previously authorised in a medicinal product in the EU but  
344 differs significantly in properties with regard to safety and/or efficacy, due to differences in molecular  
345 structure, nature of the source material or the manufacturing process.

346 The following examples could justify a NAS claim under indent 3:

- 347 • using autologous vs. allogeneic cells, as the nature of the starting material is expected to  
348 significantly impact the safety and/or efficacy.

- 349 • differences in cell isolation or selection procedure that lead to improved consistency in  
350 composition of the active cell population that is relevant to, and significantly impacts, the  
351 safety and/or efficacy

352 difference in the manufacturing process that permit expanding the treatable population (within the  
353 same targeted therapeutic indication).

### 354 **4.3. Level of evidence**

#### 355 **4.3.1. NAS claim under indent 1**

356 The claim of substantial differences in the biological characteristics and/or biological activity and/or (to  
357 the extent that is technically possible to define basic structural features) in basic structural element, of  
358 the active substance should be based on analytical data or plausible scientific grounds, e.g. on the  
359 basis of information that is publicly available or otherwise accessible to the applicant, such as scientific  
360 literature as well as available data. Generation of clinical data is not required.

361 It is noted that a single substantial difference in biological characteristics, biological activity and/or (to  
362 the extent they can technically be defined) basic structural element is sufficient to justify a NAS claim.  
363 One clear-cut and convincing justification is sufficient. For example, in the case of cells transduced with  
364 different viral vectors, the applicant is not expected to demonstrate that, in addition of the relevant  
365 differences linked to the vector, there are also relevant differences at the level of the therapeutic  
366 and/or regulatory sequences. Moreover, in cases where it is possible to identify relevant differences in  
367 basic structural elements, the applicant could justify a NAS claim on the basis of these differences,  
368 without having to demonstrate substantial differences in biological characteristics and/or biological  
369 activity. For example, in the case of CAR-T-cells, the applicant may choose to justify a NAS claim on  
370 the basis of relevant differences in the CAR construct.

371 This document contains a list of possible differences that may justify a NAS claim to guide applicants  
372 (toolbox).

#### 373 **4.3.2. NAS claim under indent 3**

374 As in the case of a NAS claim under indent 1, this justification should be based on plausible scientific  
375 grounds, e.g., on the basis of information that is publicly available or otherwise accessible to the  
376 applicant, such as scientific literature, and/or available data. Clinical data may be used, if available, but  
377 the generation of clinical data is not a priori required.

378 When a NAS claim is made on the basis of indent 3, the applicant should justify how the differences in  
379 molecular structure, nature of the source material or manufacturing process of the active substance  
380 may significantly impact on the safety and/or efficacy profile.

## 381 **5. Q & A for new active biological substance**

382 This Q&A provides additional elements complementing Section 3 of this Reflection Paper. Examples  
383 related to ATMPs have been provided in Section 3.

### 384 **1. For biological active substances derived by recombinant DNA 385 technology could a different amino acid sequence substantiate a new 386 active substance claim?**

387 Yes, for biological active substances derived by recombinant DNA technology, a different amino acid  
388 sequence in the basic structural elements could justify the status of a new active substance, provided

389 that the change is considered substantial (e.g. not a 'conservative substitution'). The Applicant may  
390 need to justify that the differences in amino acid sequence are substantial in order to warrant a  
391 conclusion of NAS (first indent NtA definition).

392 Example:

393 A monoclonal antibody could be considered a new active substance in itself (first indent) if the amino  
394 acid sequence is substantially different compared to other monoclonal antibodies; mutations to the  
395 constant regions (while keeping the CDR unchanged) would likely be considered not substantial, unless  
396 this mutation results in e.g. different binding to Fc-receptors.

397 If a B-domain deleted coagulation factor FVIII (which constitutes a major difference when compared to  
398 the basic structural element of the native full length factor FVIII) were to be submitted it would likely  
399 be considered new active substance when its amino acid sequence, i.e. the basic structural element, is  
400 substantially different from the amino acid sequence of the active substance already authorised in the  
401 EU (first indent NtA).

402 **2. Would an active substance derived by recombinant DNA technology,  
403 automatically be granted the status of a new active substance, if such  
404 an active substance, but derived from a natural source, is already  
405 present in an EU authorised medicinal product?**

406 No. Biological active substances derived by recombinant DNA technology products will not  
407 automatically be considered a new active substance versus an authorised active substance derived  
408 from a natural source authorised in the EU. In case it is demonstrated that these active substances  
409 differ significantly in properties with regard to safety and/or efficacy due to differences discussed in  
410 Section 3.2 **Error! Reference source not found.** of the present reflection paper, the biological active  
411 substance derived by recombinant DNA technology could be considered NAS under the third indent.

412 It should be noted that potential differences in viral safety are not considered in the assessment of NAS  
413 because these are not due to the properties of the active substance of the medicinal product.

414 Example:

415 If a recombinant coagulation factor active substance was to be submitted for the first time and a  
416 plasma-derived version of the same coagulation factor active substance was already authorised in the  
417 EU, it would not be considered a new active substance, except if these active substances differ  
418 significantly in properties with regard to safety and/or efficacy (third indent NtA definition). In such  
419 case the recombinant coagulation factor could be considered NAS.

420 **3. a. Would a pegylated version of an existing active substance be  
421 considered a new active biological substance?**

422 If the basic structural element (the protein part) of the pegylated version would be the same as for the  
423 active substance previously authorised in the EU, the pegylated version would not *per se* be considered  
424 NAS under the first indent of the NtA definition. However, the pegylated version of an active substance  
425 could be considered as a NAS provided the pegylation of the basic structural element would lead to  
426 properties differing significantly with regard to safety and/or efficacy (third indent NtA definition).

427 **3. b. Is it possible for a second pegylated version of a pegylated active  
428 substance to be considered a New Active Substance?**

429 A second pegylated version of a pegylated active substance could still be eligible for NAS status. For  
430 example, in case the PEG element would be attached at a different position of the amino acid  
431 sequence, i.e. the basic structural element, or the PEG element would differ in size, and result in a

432 substance differing significantly in properties with regard to safety and/or efficacy, it could be  
433 considered a NAS (third indent NtA definition).

434 **4. Would a vaccine antigen produced from a new viral or bacterial strain**  
435 **be considered to be a new active biological substance?**

436 Yes, a vaccine antigen produced from a new viral or bacterial strain would likely be considered to be a  
437 new active substance. This is without prejudice to Articles 12, 13f, 18 and 21 of Regulation (EC) No  
438 1234/2008.

439 **5. Would a second conjugated versus an authorised conjugated vaccine**  
440 **antigen be considered to be a new active biological substance when**  
441 **using a different carrier molecule?**

442 Yes. Due to the difference in carrier structure (which has a immunological action in itself), the second  
443 conjugated vaccine would likely be considered NAS (first indent NtA definition).

444 Example:

445 If an antigen was to be prepared by conjugation with CRM<sub>197</sub> and the authorised antigen was  
446 conjugated to a tetanus toxoid, the CRM conjugated antigen would likely to be considered a NAS.

447 **6. Would a version of an existing biological active substance produced by**  
448 **a different manufacturer using a different process be considered as**  
449 **new active biological substance?**

450 An evaluation of the specific scenario is needed. A difference in manufacturer and/or differences in the  
451 manufacturing process would in itself not be sufficient to grant New Active Substance status.

452 If the change in manufacturing process would result in significantly different properties with regard to  
453 safety and/or efficacy, the active substance could be considered NAS (third indent NtA definition).

454 Examples:

455 Authorised Biosimilar Medicinal Products may be from different manufacturers and/or produced using  
456 different manufacturing processes, however they have shown not to have significant differences in  
457 terms of safety and/or efficacy vis-à-vis the reference medicinal product.

458 **7. Would the presence of a protein variant (due to misincorporation) in**  
459 **addition to the desired protein, could qualify as a NAS ?**

460 No. It is acknowledged that due to misincorporation (especially under limited feeding conditions)  
461 variants may be present at levels of a few percent, where amino acids substituted. These would likely  
462 be qualified as product related substances in the total mixture which constitutes the active substance.

463 **8. For biological active substances comprising mRNA, would a difference**  
464 **in the mRNA sequence (protein encoding or regulatory/untranslated)**  
465 **be considered a new active substance?**

466 Yes, provided sufficient evidence is submitted that the differences in the mRNA sequence are  
467 substantial.

468 **6. Glossary**

469 **Active substance**

470 Any substance or mixture of substances intended to be used in the manufacture of a medicinal product  
471 and that, when used in its production, becomes an active ingredient of that product intended to exert a  
472 pharmacological, immunological or metabolic action with a view to restoring, correcting or modifying  
473 physiological functions or to make a medical diagnosis, as provided by Article 1(3a) of Directive  
474 2001/83/EC.

#### 475 **Basic structural element**

476 The core structure of the active substance without added functional molecular structures or other  
477 structures that are added, for example, due to post-translation modifications.

#### 478 **Biological substance**

479 A biological substance is a substance that is produced by or extracted from a biological source and that  
480 needs for its characterisation and the determination of its quality a combination of physico-chemical-  
481 biological testing, together with the production process and its control, as provided in Annex I, Part I,  
482 Section 3.2.1, of Directive 2001/83/EC. *Please refer also to the CMDh Questions & Answers on*  
483 *Biologicals.*

#### 484 **International Non-proprietary Name (INN)**

485 An International Non-proprietary Name (INN) identifies a pharmaceutical substance or active  
486 pharmaceutical ingredient by a unique name that is globally recognised and is public property. A non-  
487 proprietary name is also known as a generic name. *Please refer to the Guidance on the use of*  
488 *International Non-proprietary Names (INNs) for pharmaceutical substances (2017), WHO.*

#### 489 **Functional (molecular) structure**

490 A molecular structure that is added to the basic structural element and is significantly contributing to  
491 the functional characteristics of the active substance.

#### 492 **New active substance (NAS)**

- 493
- 494 • a chemical, biological or radiopharmaceutical substance not previously authorised in a  
495 medicinal product for human use in the European Union;
  - 496 • an isomer, mixture of isomers, a complex or derivative or salt of a chemical substance  
497 previously authorised in a medicinal product for human use in the European Union but differing  
498 significantly in properties with regard to safety and/or efficacy from that chemical substance  
499 previously authorised;
  - 500 • a biological substance previously authorised in a medicinal product for human use in the  
501 European Union, but differing significantly in properties with regard to safety and/or efficacy  
502 which is due to differences in one or a combination of the following: in molecular structure,  
503 nature of the source material or manufacturing process;
  - 504 • a radiopharmaceutical substance which is a radionuclide, or a ligand not previously authorised  
505 in a medicinal product for human use in the European Union, or the coupling mechanism to link  
506 the molecule and the radionuclide has not been authorised previously in the European Union,

506 *as provided in Annex I of Chapter 1, Volume 2A of the Notice to Applicants.*

#### 507 **Process-Related Impurities**

508 Impurities that are derived from the manufacturing process. They may be derived from cell substrates  
509 (e.g., host cell proteins, host cell DNA), cell culture (e.g., inducers, antibiotics, or media components),  
510 or downstream processing (e.g., processing reagents or column leachables). *ICH Topic Q6B -*  
511 *Specifications: Test Procedures and Acceptance Criteria for Biotechnological/Biological Products.*  
512 *CPMP/ICH/365/96.*

513 **Product-Related Impurities**

514 Molecular variants of the desired product (e.g., precursors, certain degradation products arising during  
515 manufacture and/or storage) which do not have properties comparable to those of the desired product  
516 with respect to activity, efficacy, and safety. *ICH Topic Q6B - Specifications: Test Procedures and*  
517 *Acceptance Criteria for Biotechnological/Biological Products. CPMP/ICH/365/96.*

518 **Product-Related Substances**

519 Molecular variants of the desired product formed during manufacture and/or storage which are active  
520 and have no deleterious effect on the safety and efficacy of the drug product. These variants possess  
521 properties comparable to the desired product and are not considered impurities. *ICH Topic Q6B*  
522 *Specifications: Test Procedures and Acceptance Criteria for Biotechnological/Biological Products.*  
523 *CPMP/ICH/365/96.*

524 **2. References**

- 525 • Directive 2001/83/EC of the European Parliament and of the Council of 6 November 2001 on the  
526 Community Code relating to medicinal products for human use.
- 527 • Notice to Applicants (NtA), Volume 2A – Procedures for marketing authorisation - Chapter 1  
528 marketing authorisation.
- 529 • ICH Topic Q 6 B Specifications: Test Procedures and Acceptance Criteria for  
530 Biotechnological/Biological Products. CPMP/ICH/365/96
- 531 • CHMP Reflection paper on considerations given to designation of a single stereo isomeric form  
532 (enantiomer), a complex, a derivative, or a different salt or ester as new active substance in  
533 relation to the relevant reference active substance. EMA/651649/2010. 18 October 2012
- 534 • Reflection paper on the chemical structure and properties criteria to be considered for the  
535 evaluation of new active substance (NAS) status of chemical substances.  
536 EMA/CHMP/QWP/104223/2015, 17 December 2015.
- 537 • CMDh Questions & Answers on Biologicals CMDh/269/2012, Rev. 2