



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

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Committee for Medicinal Products for Human Use (CHMP)

## Nilotinib hard capsules 50, 150 and 200 mg product-specific bioequivalence guidance

Draft Agreed by Methodology Working Party (MWP)	23 April 2024
Adopted by CHMP for release for consultation	21 May 2024
Start of public consultation	25 June 2024
End of consultation (deadline for comments)	30 September 2024
Final Agreed by Methodology Working Party (MWP)	21 October 2024
Adopted by CHMP	04 November 2024
Start of public consultation	01 September 2025

<b>Keywords</b>	<b><i>Bioequivalence, generics, nilotinib</i></b>
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# Nilotinib hard capsules 50, 150 and 200 mg product-specific bioequivalence guidance

Disclaimer:

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

Requirements for bioequivalence demonstration (MWP)\*

<b>BCS Classification**</b>	<b>BCS Class:</b> <input type="checkbox"/> I <input type="checkbox"/> III <input checked="" type="checkbox"/> <b>Neither of the two</b> <b>Background:</b> Nilotinib hydrochloride monohydrate is considered a low solubility compound
<b>Bioequivalence study design</b> <i>in case a BCS biowaiver is not feasible or applied</i>	<b>single dose</b>
	<b>cross-over</b>
	<b>healthy subjects</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>
	<b>Strength:</b> 200 mg <b>Background:</b> Highest strength for drug with low solubility but dose-proportional pharmacokinetics in dose range 50-200 mg.

	<b><i>In vitro</i> evaluation:</b> Additionally, <i>in vitro</i> studies showing compatibility of the generic nilotinib formulation with applesauce should be conducted.
<b>Analyte</b>	<input checked="" type="checkbox"/> <b>parent</b> <input type="checkbox"/> <b>metabolite</b> <input type="checkbox"/> <b>both</b>
	<input checked="" type="checkbox"/> <b>plasma/serum</b> <input type="checkbox"/> <b>blood</b> <input type="checkbox"/> <b>urine</b>
	<b>Enantioselective analytical method:</b> <input type="checkbox"/> <b>yes</b> <input checked="" type="checkbox"/> <b>no</b>
<b>Bioequivalence assessment</b>	<b>Main pharmacokinetic variables:</b> $C_{max}$ , $AUC_{0-t}$
	<b>90% confidence interval: 80.00– 125.00%</b>

\* As intra-subject variability of the reference product has not been reviewed to elaborate this product-specific bioequivalence guideline, it is not possible to recommend at this stage the use of a replicate design to demonstrate high intra-subject variability and widen the acceptance range of  $C_{max}$ . If high intra-individual variability ( $CV_{intra} > 30\%$ ) is expected, the applicants might follow respective guideline recommendations.