This part outlines the scientific assessment and knowledge about this product at the time of prequalification. Updates to this information are included in parts 1 to 5 and 8 of this WHOPAR.

SCIENTIFIC DISCUSSION

Name of the Finished Pharmaceutical Product	[MA191 trade name]*	
Manufacturer of Prequalified Product	Ipca Laboratories Limited	
Active Pharmaceutical Ingredient(s) (API)	Pyrimethamine/sulfadoxine	
Pharmaco-therapeutic group (ATC Code)	Antimalarial Pyrimethamine combinations. (P01BD51)	
Therapeutic indication	[MA191 trade name] is indicated for perennial malaria chemoprevention of children at high risk of severe malaria in areas of moderate to high perennial malaria transmission, where sulfadoxine-pyrimethamine is effective.	

1. Introduction

[MA191 trade name] is indicated for perennial malaria chemoprevention of children at high risk of severe malaria in areas of moderate to high perennial malaria transmission, where sulfadoxine-pyrimethamine is effective.

[MA191 trade name] should ideally be administered as directly observed therapy (DOT). Treatment regimens should take into account the most recent official treatment guidelines (e.g. those of the WHO) and local information on the prevalence of resistance to antimalarial drugs.

2. Assessment of quality

The assessment was done in accordance with the requirements of WHO's Guidelines on submission of documentation for a multisource (generic) finished pharmaceutical product for the WHO Prequalification of Medicines Programme: quality part.

Active pharmaceutical Ingredients (APIs)

Pyrimethamine and sulfadoxine have been prequalified by WHO according to WHO's Procedure for assessing the acceptability, in principle, of active pharmaceutical ingredients for use in pharmaceutical products (WHO Technical Report Series No. 953, 2009, Annex 4). This procedure provides an assurance that the APIs, used in the manufacture of [MA191 trade name], are of good quality and manufactured in accordance with WHO Good Manufacturing Practices. API prequalification consists of a comprehensive evaluation procedure that has two components: Assessment of the API master file (APIMF) to verify compliance with WHO norms and standards, and inspection of the sites of API manufacture to verify compliance with WHO GMP requirements.

^{*} Trade names are not prequalified by WHO. This is the national medicines regulatory authority's responsibility.

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Other ingredients

Other ingredients used in the dispersible tablet formulation include microcrystalline cellulose, pregelatinized starch, crospovidone, colloidal silicon dioxide, povidone, sucralose and magnesium stearate. None of the excipients used in the manufacture of the tablets are of human or animal origin. TSE/BSE free certificate from the supplier has been provided for magnesium stearate.

Finished pharmaceutical product (FPP)

Pharmaceutical development and manufacture

The multisource product is a white to off-white, round, uncoated tablet. It is flat on the top and bottom with a bevelled edge. The tablet has a break line on one side and plain on the other side. The break line can be used to divide the tablet in to two equal halves. The tablets are packaged in a clear colourless plastic (PVC) on aluminium foil blister card.

Two strengths of pyrimethamine/sulfadoxine dispersible tablets proportionally similar in composition were developed: 12.5 mg/250 mg and 25 mg/500 mg. The development focused on the 25 mg/500 mg strength, which was used in the BE study against the pyrimethamine/sulfadoxine 25 mg/500 mg tablets of the WHO recommended comparator product SPAQ-COTM dispersible tablets (pyrimethamine/sulfadoxine 25 mg/500 mg tablets + amodiaquine 153 mg tablets). Once the formulation for the 25 mg/500 mg strength was finalized, the 12.5 mg/250 mg strength was pursued using dose-proportionality approach.

The aim of the product development was to formulate a robust, immediate release oral dosage form, which is stable, dispersible, pharmaceutically equivalent and bioequivalent to the WHO recommended comparator product. The selection of excipients was based on the physico-chemical characteristics of the APIs, API-excipient compatibility and the quality target product profile. Sulfadoxine API is slightly bitter in taste, and considering that the tablets are dispersible, a sweetening agent was included in the formulation. Wet granulation process was chosen for manufacturing of the dispersible tablets as it gave satisfactory dissolution profiles, matching those of the comparator product. Formulation trials were performed to optimize the concentration of excipients and process parameters, resulting in a product with the desired physicochemical characteristics. Appropriate in-process controls were set to ensure batch-to-batch reproducibility.

According to a risk evaluation by the applicant, the FPP appears to have no potential to contain nitrosamine impurities and hence no risk was identified.

Specifications

The finished product specifications include tests for description, identification of APIs (TLC and HPLC), average weight, friability, hardness, disintegration time, fineness of dispersion, dissolution (HPLC detection), assay (HPLC), related substances (HPLC), uniformity of dosage units (content uniformity), loss on drying and microbial limits. The test procedures have been adequately validated.

Stability testing

Stability studies have been conducted at 30°C/75%RH as long-term storage conditions and for six months at 40°C/75%RH as accelerated storage conditions in the packaging intended for marketing of the product. The product proved to be quite stable at these storage conditions. The data support the proposed shelf life at the storage conditions as stated in the SmPC.

Conclusion

The quality part of the dossier is accepted.

3. Assessment of bioequivalence

The following bioequivalence study has been performed in 2022 according to internationally accepted guidelines.

Single dose oral bioequivalence study of Pyrimethamine/sulfadoxine 25 mg/500 mg dispersible tablets and Pyrimethamine/sulfadoxine 25 mg/500 mg dispersible tablets of SPAQ-COTM Co-blister in healthy adult human subjects under fasting conditions (study no. C1B01297).

The objective of the study was to compare the bioavailability of the stated Pyrimethamine/sulfadoxine 25 mg/500 mg FDC tablet manufactured for/by Ipca Laboratories Limited, India (test drug) with the reference formulation SPAQ-COTM (pyrimethamine/sulfadoxine + amodiaquine) tablets 25/500 mg (Guilin Pharmaceutical Co Ltd) and to assess bioequivalence. The comparison was performed as a single centre, open label, single dose, randomized, parallel study in healthy subjects under fasting conditions. Each subject was assigned to receive one of the following treatments in a randomized fashion:

Treatment T: Test – 1 tablet Pyrimethamine/sulfadoxine 25/500 mg

(pyrimethamine 25 mg + sulfadoxine 500 mg)

Batch no.: IBI0310029

Treatment R: References -1 tablet SPAQ-COTM

(pyrimethamine 25 mg + sulfadoxine 500 mg)

Batch no.: LF190321

The tablets were administered (dispersed) with 20 mL water. There was no wash-out period as this was a parallel designed study. Serial blood samples (1 pre-dose sample and 12 samples within 72 h post dose) were taken during each study period to obtain bioavailability characteristics AUC, C_{max} and t_{max} for bioequivalence evaluation. Drug concentrations for pyrimethamine and sulfadoxine were analyzed using a validated LC-MS/MS method. The limit of quantification was stated to be about 4 ng/mL for pyrimethamine and about 1.5 μ g/mL for sulfadoxine.

The study was performed with 52 participants; data generated from a total of 50 subjects were utilized for analysis to establish pharmacokinetic parameters and assess bioequivalence.

Arithmetic mean and geometric mean values of the pharmacokinetic variables for pyrimethamine and sulfadoxine as well as statistical results are summarised in the following tables.

Pyrimethamine

	Test formulation (T)	Reference (R)	log-transformed parameters	
Pharmacokineti c Parameter	arithmetic mean \pm SD	arithmetic mean \pm SD	Ratio	Conventional
	(geometric mean)	(geometric mean)	T/R (%)	90% CI (ANOVAlog)
t _{max} (h)	3.04 ± 1.29	3.53 ± 1.49	_	_
C _{max} (ng/mL)	203 ± 19	208 ± 32	98.2	92.4 – 104.2
	(202)	(205)		
AUC _{0-72h}	9605 ± 1269	10170 ± 1727	94.9	88.2 – 102.2
(ng·h/mL)	(9522)	(10029)		

Sulfadoxine

	Test formulation (T)	Reference (R)	log-transformed parameters	
Pharmacokinetic	arithmetic mean \pm SD	arithmetic mean \pm SD	Ratio	Conventional
Parameter	(geometric mean)	(geometric mean)	T/R (%)	90% CI (ANOVAlog)
t _{max} (h)	3.60 ± 2.02	3.31 ± 1.78	-	_
C _{max} (µg/mL)	85.5 ± 7.6	83.0 ± 8.7	103.2	98.4 – 108.1
	(85.1)	(82.5)		
AUC _{0-72h}	4794 ± 419	4581 ± 451	104.8	100.2 – 109.5
(μg·h/mL)	(4776)	(4559)		

The results of the study show that preset acceptance limits of 80 -125 % are met by both AUC and C_{max} values regarding pyrimethamine and sulfadoxine. Accordingly, the test Pyrimethamine/sulfadoxine 25 mg/500 mg FDC tablet meets the criteria for bioequivalence with regard to the rate and extent of absorption and is therefore bioequivalent to the reference G- SPAQ- CO^{TM} 25/500 mg tablet (Guilin Pharmaceutical Co Ltd).

A biowaiver was granted for the additional 12.5/250 mg FDC tablet strength (Ipca Laboratories Limited India) in accordance to WHO guideline. In comparison with the strength of the test product used in the bioequivalence study, the pyrimethamine/sulfadoxine 12.5/250 mg FDC tablet was determined to be qualitative essential the same, the ratio of active ingredient and excipients between the strengths was considered essential the same and the dissolution profiles between the formulations for the APIs were determined the same.

4. Summary of product safety and efficacy

[MA191 trade name] has been shown to conform to the same relevant standards of quality, efficacy and safety as those required of the comparator product. According to the submitted data on quality and bioavailability, [MA191 trade name] is pharmaceutically and therapeutically equivalent and thus interchangeable with the comparator product SPAQ-COTM (Guilin Pharmaceutical Co Ltd) for which benefits have been proven in terms of clinical efficacy. The clinical safety of [MA191 trade name] is considered acceptable when guidance and restrictions stated in the summary of product characteristics (SmPC) are considered. Refer to the SmPC (WHOPAR part 4) for data on clinical safety.

5. Benefit risk assessment and overall conclusion

Quality

Physicochemical and biological aspects relevant to the uniform pharmaceutical characteristics have been investigated and are controlled in a satisfactory way. The quality of this product is considered to lead to an acceptable clinical performance when [MA191 trade name] is used in accordance with the SmPC.

Bioequivalence

[MA191 trade name] fulfilled all criteria for waiving an *in vivo* bioequivalence study as per relevant WHO guidance.

Efficacy and Safety

Regarding clinical efficacy and safety, [MA191 trade name] is considered effective and safe to use when the guidance and restrictions in the SmPC are taken into consideration.

Benefit Risk Assessment

Based on WHO's assessment of data on quality, bioequivalence, safety and efficacy the team of assessors considered that the benefit—risk profile of [MA191 trade name] was acceptable for the following indication: 'for perennial malaria chemoprevention of children at high risk of severe malaria in areas of moderate to high perennial malaria transmission, where sulfadoxine-pyrimethamine is effective', and would allow inclusion of [MA191 trade name], manufactured at Ipca Laboratories Limited, Plot no. 255/1, Village Athal, Silvassa 396 230, U.T. of Dadra and Nagar Haveli and Daman and Diu, India in the list of prequalified medicinal products.