

Public Assessment Report Scientific discussion

Movprep Apelsin (macrogol / ascorbic acid/ sodium sulfate, anhydrous/ sodium ascorbate/ sodium chloride/ potassium chloride)

SE/H/1800/02/E/02

This module reflects the scientific discussion for the approval of Movprep Apelsin. The procedure was finalised on 2021-09-03. For information on changes after this date please refer to the module 'Update'.

I. INTRODUCTION

Based on the review of the quality, safety and efficacy data, a marketing authorisation has been granted for Movprep Apelsin (Orange), powder for oral solution.

The main active ingredient of Movprep Apelsin is Macrogol 3350. A comprehensive description of the indication and posology is given in the SmPC.

For recommendations to the marketing authorisation not falling under Article 21a/22a/22 of Directive 2001/83/EC and conditions to the marketing authorisation pursuant to Article 21a/22a/ 22 of Directive 2001/83/EC to the marketing authorisation, please see section VI.

The application is an extension, addition of a new flavour, of the previously authorised product: Movprep, powder for oral solution marketed by Norgine BV since 2007. The addition was classified as an extension in 2011, and even though it is not acceptable today, the product continues with the same classification during its lifecycle.

The application for Movprep Apelsin Powder for oral solution, is submitted according to Article 10b of Directive 2001/83/EC. The applicant, Norgine B.V., applies for a marketing authorisation in FR through this repeat use procedure with Sweden acting as reference member state (RMS).

Potential similarity with orphan medicinal products

According to the application form and a check of the Community Register of orphan medicinal products there is no medicinal product designated as an orphan medicinal product for a condition relating to the indication proposed in this application.

II. QUALITY ASPECTS

II.1 Drug Substance

The structure of the drug substance has been adequately proven and its physico-chemical properties are sufficiently described.

The manufacture of the drug substance has been adequately described and satisfactory specifications have been provided for starting materials, reagents and solvents.

The drug substance specification includes relevant tests and the limits for impurities and degradation products have been justified. The analytical methods applied are suitably described and validated.

Stability studies confirm the retest period.

II.2 Medicinal Product

The medicinal product is formulated using excipients listed in section 6.1 in the Summary of Product Characteristics.

The manufacturing process has been sufficiently described and critical steps identified.

The tests and limits in the specification are considered appropriate to control the quality of the finished product in relation to its intended purpose.

Stability studies have been performed and data presented support the shelf life and special precautions for storage claimed in the Summary of Product Characteristics, sections 6.3 and 6.4.

III. NON-CLINICAL ASPECTS

The pharmacological, pharmacokinetic and toxicological properties of macrogol 3350, sodium sulphate anhydrous, sodium ascorbate and Vitamin C (ascorbic acid) are well known. As these four active substances are well known, no further studies are required and the applicant has provided none. The application is made under Article 10(b) of Directive 2001/83/EC as amended, as a so called “fixed combination” claiming a line extension to Moviprep Lemon with regards to non-clinical data. This is acceptable.

The non-clinical statement has been written by Dr Chaouki Zerouala PhD, a toxicologist and with acceptable experience in pharmacology and toxicology.

Environmental Risk Assessment (ERA)

Since product name is a generic product, it will not lead to an increased exposure to the environment. An environmental risk assessment is therefore not deemed necessary.

There are no objections to approval from a non-clinical point of view.

IV. CLINICAL ASPECTS

Pharmacokinetics

Macrogol in the molecular weight range used (3200-3700) shows minimal absorption from the gastrointestinal tract, and the traces absorbed are eliminated by glomerular filtration.

Ascorbic acid is absorbed mainly at the small intestine level by a mechanism of active transport, which is sodium dependant and saturable. There is an inverse relationship between the ingested dose and the percentage of the absorbed dose. For oral doses between 30 and 180 mg an amount of about 70-85% of the dose is absorbed. Following oral intake of up to 12 g ascorbic acid, it is known that only 2 g is absorbed. After high oral doses of ascorbic acid and when plasma concentrations exceed 14 mg/litre, the absorbed ascorbic acid is mainly eliminated unchanged in the urine.

According to the Guideline on the investigation of Bioequivalence (CHMP/QWP/EWP/1401/98 Rev. 1), bioequivalence studies may be waived if the test product is an aqueous oral solution at time of administration and contains an active substance in the same concentration as an approved oral solution. However, if the excipients may affect gastrointestinal transit, absorption, solubility or stability, a bioequivalence study should be conducted, unless the differences in the amounts of these excipients can be adequately justified by reference to other data.

The absence of a bioequivalence study has been adequately justified given that the proposed product is administered as an aqueous solution containing the same active substances at the same concentration as the oral solution currently approved, there being no other ingredients in the product which would affect gastrointestinal transit, absorption or in-vivo stability of the active substances.

Waiving bioequivalence studies is acceptable.

The safety and efficacy of the constituents of this product in the treatment of constipation are well established and have been reviewed by the Clinical Expert.

There are no objections to marketing authorisation from a Clinical perspective.

Risk Management Plan

The MAH has not submitted any risk management plan.

Assessor's comment:

No RMP was submitted in the initial extension procedure and no RMP has been submitted for this RUP procedure. The second revision of the RMP template is mandatory as of 31 March 2018. However, an exemption is made for applications via MRP/RUP and instead a commitment to implement the second revision of the RMP template with a variation submitted within 3 months after the end of MRP/RUP will be accepted.

V. USER CONSULTATION

The user test was accepted in UK/H/891/02/DC.

VI. OVERALL CONCLUSION, BENEFIT/RISK ASSESSMENT AND RECOMMENDATION

This product is a line extension formulation (flavouring) to an existing established product. There is no change in risk benefit profile and the Summary of Product Characteristics is similar to the innovator product.

A marketing authorisation is recommended.

List of recommendations not falling under Article 21a/22a/22 of Directive 2001/83/EC in case of a positive benefit risk assessment

N/A

List of conditions pursuant to Article 21a/22a or 22 of Directive 2001/83/EC

N/A

VII. APPROVAL

The mutual recognition procedure for Movprep Apelsin (Orange), powder for oral solution was positively finalised on 2021-09-03.

Public Assessment Report – Update

Procedure number*	Scope	Product Information affected (Yes/No)	Date of end of procedure	Approval/non approval	Summary/Justification for refuse

*Only procedure qualifier, chronological number and grouping qualifier (when applicable)