LÄKEMEDELSVERKET
MEDICAL PRODUCTS AGENCY

Public Assessment Report
Scientific discussion

Prednisolon Alternova
(previous Prednisolon E Consult)
(prednisolone)

Asp no: 2011-0921

This module reflects the scientific discussion for the approval of Prednisolon Alternova . The procedure was finalised at 2012-03-01. For information on changes after this date please refer to the module 'Update'.

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I. INTRODUCTION

Alternova A/S has applied for a marketing authorisation for Prednisolon Alternova (previous Prednisolon E Consult) Tablet, 10 mg claiming essential similarity to Prednisolon Pfizer, 10 mg, tablet marketed in Sweden by Pfizer AB. The product contains prednisolone as active substance. For approved indications see the Summary of Product Characteristics.

II. QUALITY ASPECTS

II.1 Introduction

Prednisolon Alternova is presented in the form of tablets containing 10 mg of prednisolone. The excipients are magnesium stearate, gelatin, talc, lactose monohydrate and potato starch. The tablets are packed in HDPE bottles.

II.2 Drug Substance

Prednisolone has a monograph in the Ph Eur.

Prednisolone is a white or almost white, crystalline, hygroscopic powder which is very slightly soluble in water. The structure of prednisolone has been adequately proven and its physico-chemical properties sufficiently described. The route of synthesis has been adequately described and satisfactory specifications have been provided for starting materials, reagents and solvents.

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

Stability studies under ICH conditions have been conducted and the data provided are sufficient to confirm the retest period.

II.3 Medicinal Product

Prednisolon Alternova tablet is formulated using excipients described in the current Ph Eur. All raw materials used in the product have demonstrated compliance with Commission Directive 2003/63/EC and the NfG on Minimising the risk of transmitting Animal Spongiform Encephalopathy Agents via human and veterinary medicinal products (EMEA/410/01).

The product development has taken into consideration the physico-chemical characteristics of the active substance.

The manufacturing process has been sufficiently described and critical steps identified. Results from the process validation studies confirm that the process is under control and ensure both batch to batch reproducibility and compliance with the product specification.

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 under ICH conditions have been performed and data presented support the shelf life claimed in the SPC, with no special storage precautions.

III. NON-CLINICAL ASPECTS

III.1 Discussion on the non-clinical aspects

Since this product has been shown to be essentially similar and refer to a product approved based on a full application with regard to preclinical data, no further such data have been submitted or are considered necessary.

IV. CLINICAL ASPECTS

IV.1 Pharmacokinetics

No bioequivalence study was been submitted with the application. Instead the applicant applied for a biowaiver based on the Biopharmaceutics Classification System (BCS). From a pharmacokinetic point of view, a BCS-class I based biowaiver is acceptable for an immediate release drug product if the drug substance has proven to exhibit complete absorption and the excipients that might affect bioavailability are quantitatively and qualitatively the same.

The applicant has submitted four published articles to support the claim of complete absorption. Absolute bioavailability ranging from 92 to106% was reported in three of the submitted literature references. One of the studies was a well-designed study using a specific bioanalytical method and is considered to be a strong support of complete absorption. Although another study suggest a somewhat lower bioavailability at higher doses; 77.6% after 20 mg compared to 84.5% after 10 mg, the overall data indicate that prednisolone is completely absorbed.

Except for microcrystalline cellulose, only present in the originator’s formulation, all excipients are qualitatively the same. None of the excipients are known to affect drug bioavailability.

The pharmacokinetic documentation for Prednisolon Alternova, 10 mg, tablet is sufficient.

IV.2 Discussion on the clinical aspects

Since this product has been shown to be essentially similar and refer to a product approved based on a full application with regard to clinical efficacy/safety data, no further such data have been submitted or are considered necessary.

V. OVERALL CONCLUSION, BENEFIT/RISK ASSESSMENT AND RECOMMENDATION

User consultation

A user consultation with target patient groups on the package information leaflet (PIL) has been performed on the basis of a bridging report making reference to Prednisolon 2.5 and 5 mg (111:2011/1592, approved 2011-11-18). The bridging report submitted by the applicant has been found acceptable.

The risk/benefit ratio is considered positive and Prednisolon Alternova (previous Prednisolon E Consult) Tablet, 10 mg is recommended for approval.

VI. APPROVAL

Prednisolon Alternova (previous Prednisolon E Consult) Tablet, 10 mg was approved in the national procedure on 2012-03-01.

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Public Assessment Report – Update

Scope	Procedure number	Product Information affected	Date of start of the procedure	Date of end of procedure	Approval/ non approval	Assessment report attached
						Y/N (version)

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