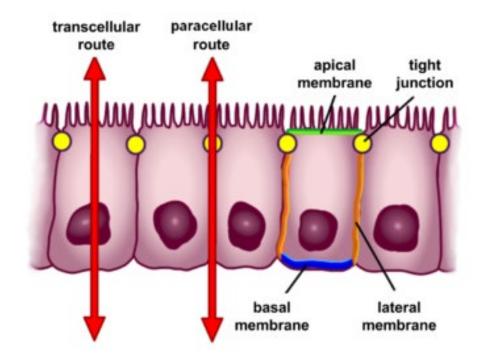
Regulatory Education for Industry (REdI) and CERSI Workshop Current State and Future Expectations of Translational Modeling Strategies to Support Drug Product Development, Manufacturing Changes and Controls

September 23-25, 2019 College Park, MD **BREAKOUT SESSION D DAY 1:** Permeability Along the GI tract. Translation from Biopharmaceutical Measurement to a Model Parameter?

<u>Moderators and scribes:</u> Xinyuan Zhang (FDA); Neil Parrott (Roche); Andrew Babiskin (FDA); Erik Sjögren (Pharmatheus)

Session Background

Permeability probably receives less attention from this community than solubility/dissolution



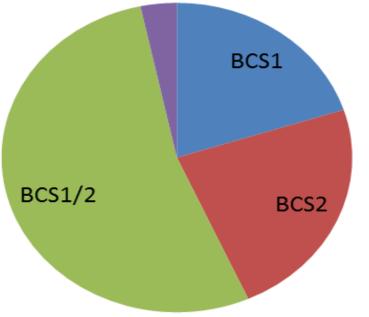
Does it matter?

Session Background



Entries into Clinical Development at Roche 2003 -2015

BCS3/4

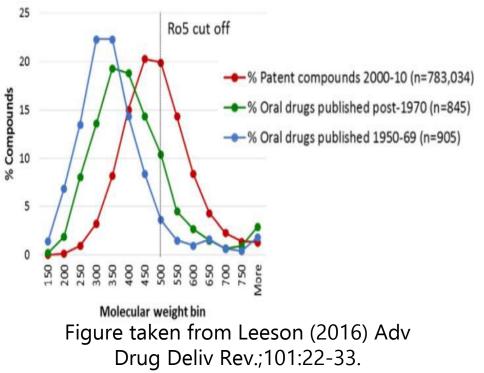


Industry Trends in Novel Chemical Entities entering clinical development

Increasing number of non drug-like small molecules

Higher MW, poorer permeability

Driven by challenging targets, e.g. proteinprotein interactions



Session Outline

	Question	Moderator
•	What are the strengths/weaknesses of in silico and in vitro tools to estimate permeability for PBBM at different stages in drug product development?	Neil
•	What is the best practice for optimization of permeability using in vivo PK?	Susie
•	What is the best practice for predicting regional permeability given an estimate of jejunal Peff?	Neil
•	Can formulation factors or food change permeability? If yes, what are the potential mechanisms?How do we incorporate this into a mechanistic model?	Susie
•	What is the best practice to incorporate GI active transport? What are the pitfalls?	Neil
•	What are the limitations which we should overcome to obtain better models for intestinal permeability?What are the feasible paths to overcome these limitations?	Susie

What are the strengths/weaknesses of in silico and in vitro tools to estimate permeability for PBBM at different stages in drug product development?

• Discuss the available methods / conditions

What is the best practice for optimization of permeability using in vivo PK?

- Discuss the assumptions and methods
- Discuss the utility of animal data

What is the best practice for predicting regional permeability given an estimate of jejunal Peff?

- Discuss the scenarios where animals can be misleading for human
- Discuss the utility of various in silico permeability models such as (MechPeff model and logD moel)

Can formulation factors or food change permeability? If yes, what are the potential mechanisms?

• How do we incorporate this into a mechanistic model?

What is the best practice to incorporate GI active transport? What are the pitfalls?

What are the limitations which we should overcome to obtain better models for intestinal permeability?

• What are the feasible paths to overcome these limitations?

