

# *Summary of Session 4: Low-Risk and Very Low Risk Products*

---

**Anitha Palamakula Govada, Ph.D.**  
**Senior Pharmaceutical Quality Assessor,**  
**DPQA VI, OPQA I, OPQ, CDER, FDA**

**Public Workshop: The Evolution of Biopharmaceuticals: Risk Assessment and Clinical Relevance**  
**May 1, 2026**

# Disclaimer

---

This presentation reflects the views of the author and should not be construed to represent FDA's views or policies.

# Session- 4 Presentations Recap

The biopharmaceutics risk assessment framework: Is dissolution testing truly necessary for very low risk and low risk compounds?

Dissolution testing should be fit-for-purpose, calibrated to actual drivers of in vivo performance, not applied uniformly across all formulation types

**Routine dissolution testing** may be an **excessive regulatory and development burden**. PBBM for **expanding biowaivers beyond BCS 1 and 3**.

Case study of an aqueous polymeric suspension product. the importance of selecting an appropriate dissolution method (standard vs complex).

The concept of a focused evidence-based data package as a **streamlined alternative to extensive dissolution method development**

*Disintegration test or Standard Dissolution Method when clinical PK data supports consistent performance.*

# Key Takeaways from Session 4

Rethink Dissolution  
for Very Low and  
Low-Risk Compounds

A comprehensive risk  
assessment should be  
the foundation of that  
rethinking.

Very low-risk  
products may qualify  
for dissolution testing  
waivers

Disintegration in lieu  
of dissolution

Supporting clinical/PK  
data justification

Standard dissolution  
methods vs. complex  
methods for in vivo  
predictability

**A shift from "rule-based" to "risk-based" testing.**

# Conclusion



LOW RISK  $\neq$  NO  
STANDARDS FOR  
REGULATORY COMPLIANCE



QUALITY CONTROL TO ENSURE  
CONSISTENT PRODUCT  
QUALITY THROUGHOUT THE  
PRODUCT LIFECYCLE



BASELINE SAFETY AND  
PERFORMANCE STANDARDS  
WHILE MAINTAINING HIGH  
QUALITY AND CONSISTENCY.

# Breakout Session E

**Disintegration in lieu of dissolution**

**Biopharmaceutics risk classification of Low- and Very Low-risk products**

**Simple Dissolution tests for Low-risk products**

**Fit-for-purpose dissolution methods**

**Justification beyond BCS for low risk and very risk - Global regulatory alignment**

# Thank You!



Session 5 starts after a short break.

# Breakout Session E



<b>Group</b>	<b>Moderator (Regulatory)</b>	<b>Moderator (Industry)</b>	<b>Scribe</b>
<b>Group E-1 (Room 1032)</b>	<b>Tapash Ghosh</b>	<b>Eva Karlsson</b>	<b>Moshe Honick</b>
<b>Group E-2 (Room 2032)</b>	<b>Rushikesh Sable</b>	<b>Carrie Coutant</b>	<b>Arindom Pal</b>
<b>Group E-3 (Room 2052)</b>	<b>Rajesh Savkur</b>	<b>Susan Ewing</b>	<b>Jiaher (Jacob) Tian</b>
<b>Group E-4 (Ballroom)</b>	<b>Anitha Govada</b>	<b>Tzuchi “Rob” Ju</b>	<b>Nadia Ahmed</b>

# Breakout Session E: Questions

## 1. When is it scientifically justified to use disintegration in lieu of dissolution for Low- or Very Low-risk products?

- What product attributes support Very Low vs. Low-risk categorization?
- Is specific product development testing data needed to justify the risk level?
- What level/type of disintegration–dissolution relationship is sufficient to support the transition from dissolution to disintegration?
- How does this align with ICH Q6A principles?

# Breakout Session E: Questions

## 2. When dissolution is required for QC of Low-Risk products, what should a fit-for-purpose method demonstrate?

- Is the standard method listed in the FDA guidance sufficient or acceptable?
- Is discriminating ability even relevant for a fit-for-purpose method?
- How to balance development of dissolution method for QC vs. scientifically justified/clinical or bio-relevant methods?
- How critical is acceptance criterion time point for low-risk products, with rapid drug release.
- Should there be flexibility set acceptance criterion at other timepoints based on T<sub>max</sub> (30 mins vs 15 min vs 45 mins)? What level of justification should be provided for changes in AC (%drug release and time point).

# Breakout Session E: Questions

## **3. Beyond BCS: Evidence needed to justify Low or Very Low risk and how to improve global regulatory alignment?**

- How to justify Low risk outside “high solubility”?
- What evidence is essential vs. supportive?
- What would improve consistency across agencies?

# Breakout Session E: Questions

## 4. What should a practical framework look like for the initial biopharmaceutics risk classification of Low- and Very Low-risk products?

- Key physicochemical factors?
- Common Pitfalls and Best Practices for Dissolution Method Development
- Impact of formulation, process and DOE on product development?
- Consideration of Clinical/PK/in silico data for determining the risk level?
- When can QC be streamlined to cover most drugs using standardized method and when should this be more product-specific decision?