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BIODISPONIBILIDADE E BIOEQUIVALÊNCIA

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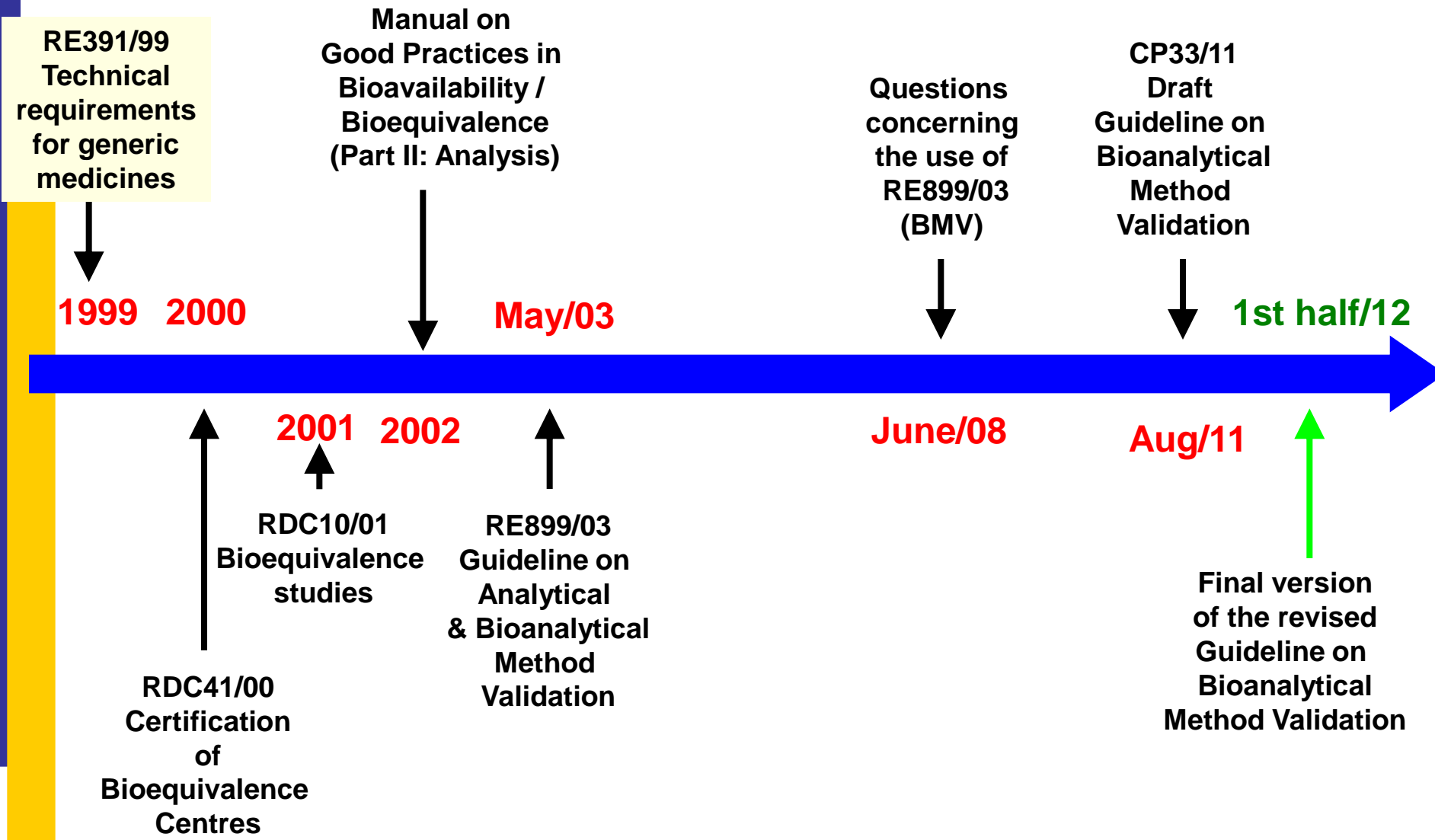
Update on ANVISA Bioanalytical Method Validation (BMV) Guideline

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*EBF - European Bioanalysis Forum - 4th Open Symposium
Date: 16-18 November 2011*

- This presentation is intended to show the main aspects of the ongoing revision of the Brazilian guideline on BMV
 - The draft called CP33 has been published in 28/June/2011 for contributions
 - Deadline: 28/August/2011 (closed)
- Brazilian BMV
 - Focused on relative bioavailability / bioequivalence studies
 - Last issue: 2003
 - The revised version is intended to be more comprehensive
 - It will be the first guideline on BMV in Latin America
- The Coordination of Bioequivalence (COBIO) of ANVISA (Brazilian Health Surveillance Agency) is leading the revision process
 - ACBIO through its department (focus group) of Bioanalysis (ACBIO-Bioanalises) has made meetings with COBIO/ANVISA on this issue

Historical aspects on Brazilian BMV



■ RE899/03

- Glossary: few definitions
- Written mostly for LC method
 - LBAs not considered
 - Endogenous compounds also not considered

- Reanalysis not covered

- Application to the routine analysis

- Not discussed with bioanalytical community
 - Draft not published

■ CP33

- Glossary: definitions improved
- Other analytical techniques (non-chromatographic) could be used
 - Although it is advised to use LC method as first choice

- New issues covered
 - Reanalysis
 - Endogenous compounds analysis

- Criteria for application of a validated method

- Workshops between ACBIO and COBIO/ANVISA for previous discussions

■ RE899/03

■ Validation Parameters

- Specificity
- Calibration curve/Linearity
- Precision (HQC, MQC, LQC)
– intra and inter-run
- Accuracy (HQC, MQC, LQC)
– intra and inter-run
- Lowest Limit of Quantification (LLOQ)
- Detection limit
- Recovery
- Stability
 - Freeze-and-thaw
 - Short-term
 - Long-term
 - Post-processing
 - Stock solution
 - Comparison against freshly prepared samples

■ CP33

■ Validation parameters

- **Selectivity**
- Calibration curve
- Precision – including Dilution integrity (LLOQ, HQC, MQC, LQC, DQC)
- Accuracy - including Dilution integrity (LLOQ, HQC, MQC, LQC, DQC)
- **Carry over**
- **Matrix effect (Matrix factor)**
- Stability
 - Freeze-and-thaw
 - Short-term
 - Long-term
 - Post-processing
 - Stock solution
 - **Comparison based upon nominal conc.**

■ Selectivity

■ Biological matrix

- Plasma: 6 sources (including hemolized and lipemic)
- Whole blood: 5 sources (including lipemic)
- Other: it should be evaluated and tested

■ How to determine hemolysis?

- Each lab should have a SOP

■ Co-medications/metabolites should be also tested (if necessary)

■ Carry over

- Inject ULOQ followed by 3 blank samples
- Same criteria as in selectivity

■ Matrix effect

- Expressed IS normalised matrix factor for LQC and HQC
- Biological matrix:
 - Plasma: 8 sources (4 normal, 2 lipemic and 2 hemolysed)
 - Whole blood: 6 sources (4 normal and 2 lipemic)
 - Other: 6 sources
- For each source should be calculated the IS normalized MF as:

$$IS\ MF = \frac{\frac{\text{Analyte response matrix}}{\text{IS response matrix}}}{\frac{\text{Analyte response solution}}{\text{IS response solution}}}$$

- CV <15%

■ Calibration curve

- Use the same biological matrix of the study
- Non-linear response should be justified
 - Linear: the weight of the equation used should be justified
- Criteria
 - 75% of all replicates should pass ($\pm 20\%$ for LOQ and $\pm 15\%$ for others)
 - At least 6 standards (8 for non-linear) should be included

- Precision and accuracy
 - QC at 3 levels: Low, medium and high
 - LLOQ
 - Diluted QC for dilution integrity purposes
 - Should cover the expected dilution of the study samples
 - 5 replicates (within-run) and 3 runs (between-run)
 - Precision
 - CV% <15% (20% for LOQ)
 - Accuracy
 - Calculated as (mean / nominal conc. X 100)
 - 115 – 85% (120 – 80% for LOQ)
 - ACBIO suggested to change the way to calculate this parameter as relative error ([mean – nominal conc.]/nominal conc. X 100)

■ Stability

- 3 samples in 2 levels (LQC and HQC)
- Freshly prepared calibration curve
 - Compare with nominal conc.
 - Not compare with freshly prepared samples (major change)
 - Processed sample or on-instrument, Short-term, long-term and freeze-and-thaw
 - Criterion: $\pm 15\%$ of nominal conc.
 - Stock and working solution
 - Compare in response (area)
 - Criterion: $\pm 10\%$

- Endogenous compounds analysis
 - Neat solution (instead of biological matrix)
 - Surrogate matrix
 - Generic approach comparing the slopes of the curves
- Reanalysis
 - Accepted only in 3 cases
 - 1) Concentration above ULOQ (dilution needed)
 - 2) Analytical problems (poor chromatography, injection fail, etc.)
 - 3) Pre-dose samples with concentration above LLOQ
 - PK reason is not accepted
 - CC and QC samples should not be reassayed

- Ligand Binding Assays (LBA)
 - Incipient in Brazil under GLP conditions
 - ANVISA reported only few applications using this technique
- Incurred Samples Reanalysis
 - ANVISA is trying to better understand the real purpose of this test
 - In case of fail, what to do with the data?
- IS variation
 - Still not have consensus on how to deal with this issue

- Brazilian BMV guideline is becoming more comprehensive
- ANVISA is trying to adopt international practices in bioanalysis
 - “ACBIO-Bioanalises” is contributing in this process
- ACBIO-Bioanalises in trying to put together all bioanalyst for pursuing this goal
 - ANVISA is open for harmonization process
- Once published the final version of the ANVISA BMV guideline ...



**1st in South
Hemisphere?**

- To MSc João Tavares Neto and all the technical staff of ANVISA
- To the organizing committee of 4th Open Forum - EBF
- To all the ACBio-Bioanalises members
- For contacting me:
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- 1st Latin American Meeting on Bioanalysis
 - May, 2012
 - São Paulo/SP
- For more information, visit our web site: www.acbio.org.br

