# **Biowaiver Application Form: Biopharmaceutics Classification System (BCS)**

This application form is designed to facilitate information exchange between the Applicant and the Namibia Medicines Regulatory Council (NMRC) if the Applicant seeks to waive bioequivalence studies, based on the Biopharmaceutics Classification System (BCS). For further information, please study the respective WHO biowaiver guidance documents. This form is not to be used, if a biowaiver is applied for additional strength(s) of the submitted product(s), in which situation a separate "Biowaiver Application Form: Additional Strengths" should be used.

#### General Instructions:

- Please review all the instructions thoroughly and carefully prior to completing the current Application Form.
- Provide as much detailed, accurate and final information as possible.
- Please enter the data and information directly following the greyed areas.
- Please enclose the required documentation in full and state in the relevant sections of the Application Form the exact location (Annex number) of the appended documents. For example, in section 2.5 indicate in which Annex the Certificate of Analysis can be found.
- Please provide the document as an MS Word file.
- Do not paste snap-shots into the document.
- The appended electronic documents should be clearly identified in their file names, which should include the product name and Annex number.
- Before submitting the completed Application Form, kindly check that you have provided all requested information and enclosed all requested documents.
- Should you have any questions regarding this procedure, please contact the Registrar of Medicines, NMRC.

The signed paper version of this Biowaiver Application Form together with Annexes (and their electronic copies on CD-ROM) should be included to the bioequivalence part of the submitted dossier.

### Administrative data

1. INN of active ingredient(s)
< Please enter information here >
2. Dosage form and strength
< Please enter information here >
3. Product Application number
< Please enter information here >
4. Name of applicant and official address
< Please enter information here >
5. Name of manufacturer of finished product and official address
< Please enter information here >
6. Name and address of the laboratory or Contract Research Organisation(s) where the BCS-based biowaiver dissolution studies were conducted.
< Please enter information here >
I, the undersigned, certify, that the information provided in this application and the
attached documents is correct and true
Signed on behalf of < <i>company&gt;</i>
(Date)
(Name and title)

#### 1. Test product

## 1.1 Tabulation of the composition of the formulation(s) proposed for marketing and those used for comparative dissolution studies

- Please state the location of the master formulae in the quality part of the submission.
- Tabulate the composition of each product strength using the table below.
- For solid oral dosage forms the table should contain only the ingredients in tablet core or contents of a capsule. A copy of the table should be filled in for the film coating/hard capsule, if any.
- Biowaiver batches should be at least of pilot scale (10% of production scale or 100,000 capsules or tablets whichever is greater) and manufacturing method should be the same as for production scale.

**Please note:** If the formulation proposed for marketing and those used for comparative dissolution studies are not identical, copies of this table should be filled in for each formulation with clear identification in which study the respective formulation was used

······································				
Composition of the batches used	for compa	rative disso	lution studi	es
Batch number				
Batch size (number of unit doses)				
Date of manufacture				
Comments, if any				
Comparison of unit dose compo (duplicate this table for each stre				
Ingredients (Quality standard)	Unit dose (mg)	Unit dose (%)	Biobatch (kg)	Biobatch (%)
Equivalence of the compositions or justified differences				
1.2 Potency (measured content) of test product as a percentage of label claim as per validated assay method  This information should be cross-referenced to the location of the Certificate of Analysis (CoA) in this biowaiver submission.				
<< Please enter i	information	here >>		
1.0 COMMENTS FROM REVIEW OF SECTION 1.0 – NMRC USE ONLY				

#### 2. Comparator product

2.1.	Comparator	product
<b>≝•</b> ±•	Comparator	product

Please enclose a copy of product labelling (summary of product characteristics), as authorized in country of purchase, and translation into English, if appropriate.

2.2. Name and manufacturer of the	comparator produ	ct and offici	al address
< Please	enter information he	ere >	
2.3. Qualitative (and quantitative, if	available) informa	tion on the o	composition of the
<b>comparator product</b> Please tabulate the composition of the comparator	rator product based on av	ailable informa	ation and state the
source of this information.	r		
Composition of the comparator p		solution	
studies	8		
Batch number			
Expiry date			
Comments, if any			
	Unit	Unit	
Ingredients	dose	dose	
ingredients	(mg)	(%)	
		` ′	
2.4. Purchase, shipment and storage	of the comparator	product	
Please attach relevant copies of documents (e	.g. receipts) proving the	stated condition	18.
<< Please	enter information he	re >>	
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2.5. Potency (measured content) of the comparator product as a percentage of label claim, as measured by the same laboratory under the same conditions as the test product.

This information should be cross-referenced to the location of the Certificate of Analysis (CoA) in this biowaiver submission.

<< Please enter information here >>
( Trease enter ingermation here //

3. Comparison of test and comparator products
3.1. Formulation
3.1.1 Identify any excipients present in either product that are known to impact on <i>in</i>
<ul><li>vivo absorption processes</li><li>A literature-based summary of the mechanism by which these effects are known to occur should be included</li></ul>
and relevant full discussion enclosed, if applicable.
<< Please enter information here >>
< Trease enter information here >>
3.1.2 Identify all qualitative (and quantitative, if available) differences between the
compositions of the test and comparator products  The data obtained and methods used for the determination of the quantitative composition of the comparator
product as required by the guidance documents should be summarized here for assessment.
<< Please enter information here >>
3.1.3 Provide a detailed comment on the impact of any differences between the compositions of the test and comparator products with respect to drug release and in vivo absorption
T · ·
<< Please enter information here >>

3.1. COMMENTS FROM REVIEW OF SECTION 3.1 – NMRC USE ONLY
3.2. Comparative in vitro dissolution
Information regarding the comparative dissolution studies should be included below to provide adequate evidence supporting the biowaiver request. Comparative dissolution data will be reviewed during the
assessment of the Quality part of the dossier.
Please state the location of:
<ul> <li>the dissolution study protocol(s) in this biowaiver application</li> <li>the dissolution study report(s) in this biowaiver application</li> </ul>
• the analytical method validation report in this biowaiver application
<< Please enter information here >>
3.3. Summary of the dissolution conditions and method described in the
study report(s)
Summary provided below should include the composition, temperature, volume, and method of de-aeration
of the dissolution media, the type of apparatus employed, the agitation speed(s) employed, the number of
units employed, the method of sample collection including sampling times, sample handling, and sample storage. Deviations from the sampling protocol should also be reported.
3.3.1. Dissolution media: Composition, temperature, volume, and method of de-aeration
<< Please enter information here >>
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3.3.2. Type of apparatus and agitation speed(s) employed
<< Please enter information here >>
3.3.3. Number of units employed
<< Please enter information here >>
3.3.4. Sample collection: method of collection, sampling times, sample handling and storage
<< Please enter information here >>
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3.3.5. Deviations from sampling protocol
<< Please enter information here >>
<b>3.4. Summarize the results of the dissolution study(s)</b> Please provide a tabulated summary of individual and mean results with %CV, graphic summary, and any calculations used to determine the similarity of profiles <b>for each set of experimental conditions</b> .
<< Please enter information here >>
<b>3.5. Summarize conclusions taken from dissolution study(s)</b> Please provide a summary statement of the studies performed.
Trease provide a summary statement of the studies performed.
<< Please enter information here >>
3.2 – 3.5 COMMENTS FROM REVIEW OF SECTION 3.2 – 3.5: – NMRC USE ONL
4. Quality assurance
<b>4.1. Internal quality assurance methods</b> Please state location in this biowaiver application where internal quality assurance methods and results are described for each of the study sites.
<< Please enter information here >>
<b>4.2. Monitoring, Auditing, Inspections</b> Provide a list of all monitoring and auditing reports of the study, and of recent inspections of study sites by regulatory agencies. State locations in this biowaiver application of the respective reports for each of the study sites e.g., analytical laboratory, laboratory where dissolution studies were performed.
<< Please enter information here >>

4.0 COMMENTS FROM REVIEW OF SECTION 4.0 – NMRC USE ONLY
CONCLUSIONS AND RECOMMENDATIONS – NMRC USE ONLY