

## FDA Issues Abuse Deterrent Guidance But Does Not Address Generics

FDA issued long-awaited draft guidance on abuse deterrent formulations for opioids Wednesday (Jan. 9) laying out pre- and postmarket study requirements that would allow innovator companies to add abuse deterrent claims to their labels, but the agency said it still needs more data before it can determine whether the new formulations deter drug abuse. The agency also put off deciding whether to require that generic painkillers be abuse deterrent — a response that drew criticism from an advocacy group — but said abuse-deterrent product claims should make these products more attractive to physicians and payors.

The FDA Safety and Innovation Act-mandated guidance outlines studies to determine if a product is abuse deterrent, how those studies will be evaluated by the agency and what labeling claims may be approved based on those studies, the agency said.

FDA will base assessments of an opioid's abuse deterrence on three categories of premarket studies. Companies should perform lab studies testing the formulation against mechanisms used by drug abusers to manipulate the product or alter the amount of the drug released, according to the document. The guidance also calls for pharmacokinetic studies to see if certain foods or alcohol increase the effects of the drug, and clinical trials to determine abuse potential. Further, the guidance recommends companies do postmarket studies to see if abuse-deterrent formulations are effective and decrease misuse of the drug.

Sponsors who follow the guidelines can seek approval for label changes indicating their product is abuse deterrent, which the agency said is meant to incentivize companies to make new formulations. An FDA official, however, said the agency will need more data before it can evaluate how effective the new formulations are and will not make any safety determinations about non-abuse deterrent generics until it has closed some of those information gaps.

"This guidance does not address generics," said Douglas Throckmorton, deputy directory for regulatory programs at FDA's drug center. "What future actions we may take with generics in regard to abuse deterrence is not something I can address today."

However, adding abuse deterrent properties on labels would make the products more attractive to payors and prescribers, he said.

Throckmorton said given the limited amount of information on abuse deterrence technology, FDA chose labeling changes for brand drugs as the first step in addressing the issue.

A House GOP lawmaker said although the guidance was an important tool, the agency still needed to prioritize removing non-abuse deterrent generic opioids from the market.

"While commendable, the FDA still needs to get its priorities straight," said Rep. Hal Rogers (R-KY). "First and foremost, the FDA needs to prevent crushable, generic pain pills from hitting the street, otherwise the incentives and process provided in this guidance are moot. Longer term, the guidance will be an important tool in speeding the development of painkillers with abuse-deterrent formulations, but the underlying issue of the approaching release of crushable, highly addictive generic painkillers this Spring remains."

Rogers has been vocal about opioid drug abuse and held a roundtable discussion with FDA, HHS, the Drug Enforcement Agency and the Department of Justice in November to discuss the issue. He said FDA's focus must turn to helping save the lives that are lost to the deadly epidemic, which he added "could increase without immediate action to stop the release of highly abusable generic opioids."

An advocate for stronger drug diversion policies also said the guidance showed FDA was not serious about providing incentives to produce abuse-deterrent drugs, a decision that the advocate said could be "fatal."

"The Obama-Biden Administration states that it intends to incentivize the development of safer medications, but its actions discredit its words," said Michael Barnes, executive director of the Center for Lawful Access and Abuse Deterrence. "The Administration's January 1 decision to allow generic, non-abuse-deterrent products on the market after abuse-deterrent versions of them are available dealt a blow to the fragile market for safer medications that will likely prove to be fatal."

Barnes said third-party payors and pharmacists are financially motivated to dispense cheaper, generic drugs and enhanced labeling will not be enough to encourage them to use newer, safer products. Only a market transition in which branded and generic medications are abuse deterrent will make a difference in the prescription drug abuse epidemic, he said.

However, the proposed label changes are still significant even though the guidance failed to how these label changes

could affect generic opioids, an industry attorney said.

“The fact that they’re allowing labeling changes is huge,” the attorney said. “It’s important for physicians and providers to know a product has certain abuse deterrent properties.”

Expensive and novel testing requirements could lead to label claims that would delay generic competition, the attorney said. The attorney also said FDA’s reluctance to address the generic component of the issue prolongs generic drugmaker’s uncertainty on how to proceed in this area and could in innovators’ favor.

The controversy over generic versions stems from citizen petitions. Endo Pharmaceuticals and Purdue Pharma submitted separate citizen petitions to FDA last year requesting the agency not approve generic versions of their drugs Opana ER and OxyContin that were not also abuse-deterrent. Last month, Endo lost a lawsuit that would have forced FDA to respond to its petition by Dec. 31, ahead of the market introduction of Impax Laboratories’ generic version of Opana.

Impax launched generic Opana on Friday (Jan.4). FDA said it will respond to Endo’s citizen petition, filed in August, within 270 days.

The Generic Pharmaceutical Association said it plans to work with FDA to address opioid abuse.

“GPhA is committed to participating with the FDA in the process of examining potential workable methods of deterring the abuse of opioid drugs,” the group said in a statement. “Over the coming days, our member companies will be looking more closely at the FDA’s draft guidance released today. We look forward to collaborating with the Agency and with other regulatory bodies to address the issue of abuse of these critical medications.”

FDA will hold a public meeting to discuss the draft guidance, but that meeting has not been scheduled yet. —

*Stephanie Beasley*