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Effect of Formulation Development and API Characteristics on Fast Dissolving Dosage Forms Bioequivalence Studies

Gülay YELKEN DEMIREL, MSc Sanovel Pharmaceuticals BA/BE Studies Summit, Chicago/USA 18.08.2015



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- Introduction
 - Regulatory Definitions
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 - Advantages and Limitations of Fast Dissolving Drug Delivery Systems(FDDDS)
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 - Oral films
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- ☐ Clinical Considerations: Bioequivalence Studies
- Case Study: Conventional Tablet vs Orally Disintegrating Tablet
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Introduction

FDDDS were developed in the late 1970s as an alternative to conventional dosage forms for pediatric and geriatric patients.*



This systems have better patient acceptance and compliance and may offer improved biopharmaceutical properties compared with conventional oral dosage forms.

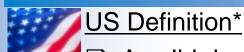


FDDDS may disintegrate in the mouth and can be taken without water.

* Ashish Garg, M.M. Gupta, Mouth Dissolving Tablets: A Review, Journal of Drug Delivery&Therapeutics; 2013



Regulatory Definitions



- □ A solid dosage form containing medicinal substances which disintegrates rapidly, usually within a matter of seconds when placed upon the tongue.
- ☐ Tablet weight <500mg. In-vitro USP disintegration test <30 seconds.

*FDA Guidance for Industry - Orally Disintegrating Tablets



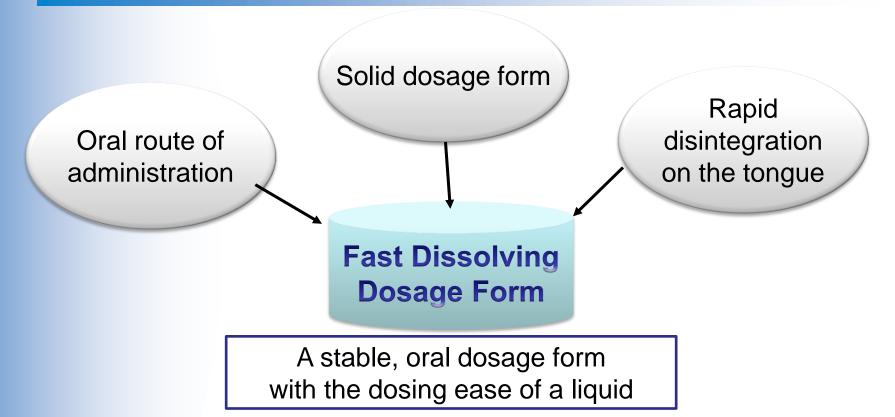
EU Definition**

- Orodispersible tablets are uncoated tablets intended to be placed in the mouth where they disperse rapidly before being swallowed.
- ☐ Disintegration Test: Orodispersible tablets disintegrate *within* 3 *minutes* when examined by the test for disintegration...

**European Pharmacopoeia (Ph.Eur.)



What are Fast Dissolving Dosage Forms?

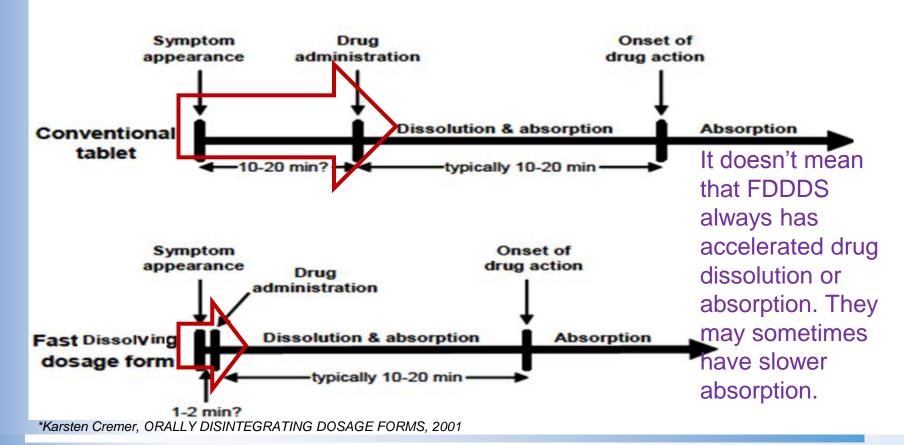


They are swallowed as easily as liquids, but at the same time they are stabl like tablets and capsules.



Advantages of FDDDS: Onset of drug action

Time from symptom appearance to onset of drug action









Advantages of FDDDS

Clinical

- ✓ Enhanced efficacy (quick) onset of action, improved effectiveness)
- ✓ Enhanced oral absorption
- ✓ Minimized first-pass effect
- ✓ Faster onset of action

Medical

FDDDS

- ✓ Improved compliance
- ✓ Improved convenience
- ✓ Better taste
- ✓ Administration without water
- ✓ Ease of swallowing

Technical

- ✓ Accurate dosing
- ✓ Common process
- ✓ Conventional equipment



Advantages of FDDDS (cont.)

FDDDS

Business

- ✓ Unique product differentiation
- ✓ Value-added product line extension
- ✓ Provide exclusive marketing
- ✓ Extend patent protection
- ✓ Reduction of development costs

Formulation

- √ Rapid disintegration
- ✓ Stability
- ✓ Improve taste
- ✓ Aged-spesific formulations (pediatric, geriatric and dysphagic patients)



"Place on your tongue and swallow...
then spit out when nobody is looking."

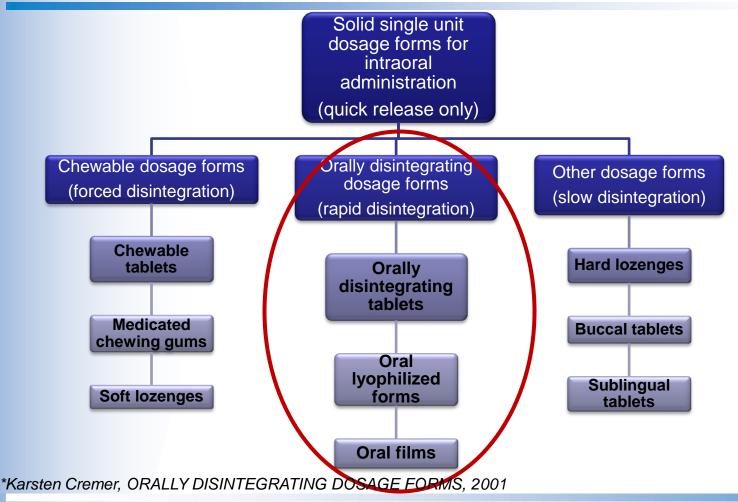


Limitations of FDDDS

- Limited drug load capacity
- Fragile products, special unit-dose packaging
- Hygroscopicity
- Unpleasant taste of a drug and poor organoleptic properties
- The lack of coated drug(API) particules may cause mucosal irritation.



What are Orally Disintegrating Dosage Forms?





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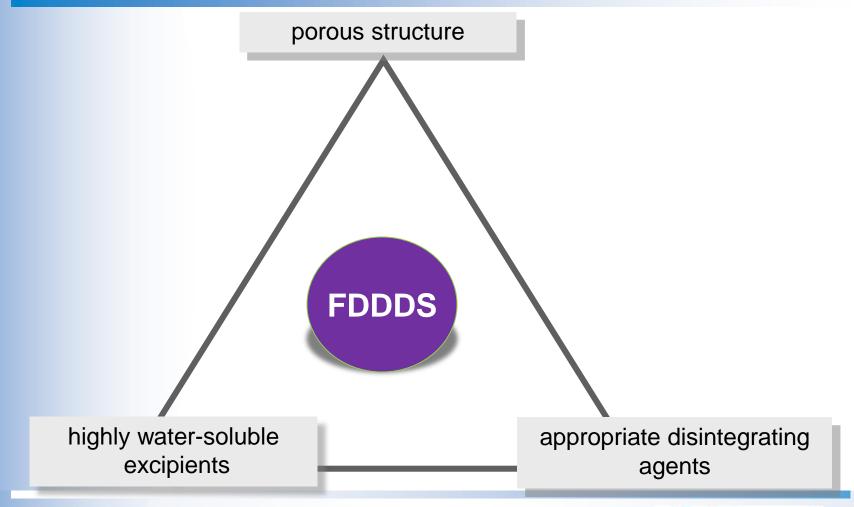
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Formulation:Basic Approaches to Develop FDDDS





Technologies for Manufacturing FDDDS

- Oral lyophilized dosage forms
- Orally disintegrating tablets
- Oral films



Technologies for Manufacturing FDDDS

- □ Oral lyophilized dosage forms
- Orally disintegrating tablets
- Oral films



Oral Lyophilized Dosage Forms

- The most successful fast-dissolving oral dosage forms today
- Resulting solid material is a highly porous matrix network
- Disintegrates in less than 10s, typically less than 5s
- Their basic manufacturing process are freeze-drying or lyophilization.
- Expensive manufacturing technology
- Freeze dried ODT Zydis®, RP Scherer in 1986



Formulation Composition

Matrix former

Structure former

Structure promoter

Sweeteners

Other

The critical point of the formulation is that particles are not larger than about 100 µm.



Technologies for Manufacturing FDDDS

- Oral lyophilized dosage forms
- Orally disintegrating tablets
- Oral films



ODTs are also called as;

- ✓ Orodispersible tablets
- ✓ Fast disintegrating tablets, Quick disintegrating tablets
- √ Fast dissolving tablets, Rapid dissolving tablets
- ✓ Mouth dissolving tablets
- ✓ Quick melt tablets





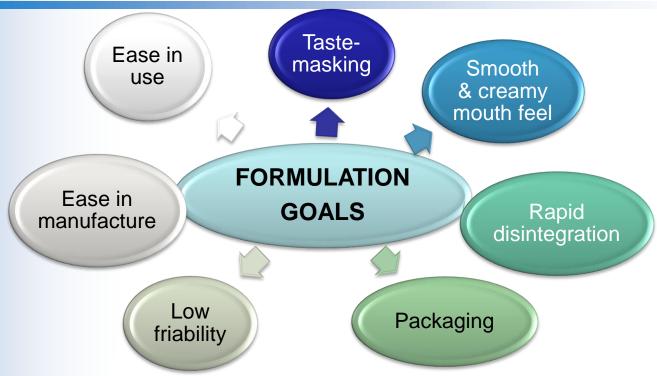
The majority of this technology involves compressed tablets.

Main product attributes;

- Easy to manufacture; lower cost
- Less breakable and friable (less than 2%) than lyophilized dosage forms
- Sufficient mechanical strength and good package design
- Disintegrate within 20-30 seconds
- May be moisture-sensitive
- Gritty of insoluble excipient residue may remain on the tongue
- Effervescent couples are used







One of the more important thing about formulation is mouthfeel and taste of ODTs.

If the drug has bitter taste, API taste-masking coating may be necessary (Microencapsulation, chelation, complexation, cyclodextrins...).



Tablet manufacturers and patented technologies characteristics

	<u> </u>			
Technology	In-vitro disintegration time(s)	Tablet hardness and robustness	Packaging	Drug-loading dose(mg)
AdvaTab(Eurand)	15-30	hard, robust	bottles or blister pack	<700
DuraSolv(Cima Labs)	<30	hard, robust	bottles or blister pack	<500
FlashDose(Biovail)	5-15	soft, friable	blister pack	<600
FlashTab(Ethypharm SA)	30-60	relatively durable	blister pack	<650
Lyoc(Cephalon)	<10	soft, friable	blister pack	<1000
OraQuick(KV Pharmaceuticals)	<20	relatively durable	bottles or blister pack	<500
OraSolv(Cima Labs)	<30	soft, friable	blister pack	<750
SATAB(Sato)	<10	relatively durable	blister pack	<600
WOWTAB(Yamanouchi)	<30	relatively durable	bottles or blister pack	<500

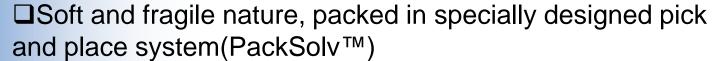
^{*}K. Ostrander, "Advances in Fast Dispersing Technologies-Zydis", Oct. 29, 2003.



Orally Disintegrating Tablets: OraSolv® & DuraSolv™

OraSolv® Technology, Cima Labs Inc.

- ■Tasted-masked API
- □Contains effervescent agents
- □ Direct compression technique at low compression force





DuraSolv™ Technology, Cima Labs Inc.

- ☐Second generation technology
- ☐ Used conventional tableting equipment, 15-50 Newton
- □Low friability(less than 2 %), packaging in conventional packaging systems



Orally Disintegrating Tablets: OraSolv®&DuraSolv™

Formulation Composition

Filler

Disintegrant

Flavor

Sweetener

Lubricant

Colorant, if required

Effervescent components







Technologies for Manufacturing FDDDS

- Oral lyophilized dosage forms
- Orally disintegrating tablets
- □ Oral films



Oral Films (Rapid Films)

- ☐ It is complying with the orodispersible tablet definition of the Ph.Eur.
- ☐ The delivery system based on a water soluble polymer and it is usually obtained by solvent casting, hot-melt extrusion, solid dispersion.

Advantages

- □ Rapid disintegration
- □ Elegant presentation
- □Improved portability
- ■Accurate dosing
- □ Discrete administration

Limitations

- □ Drug loading
- □Unpleasant taste of API
- ☐ Manufacturing cost
- **□**Stability
- □Film integrity



Oral Films: Formulation

Formulation Composition

Water soluble polymer

Plasticizers

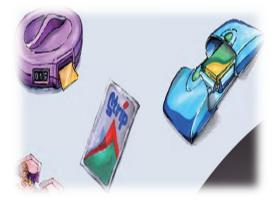
Surfactants

Sweetening agent

Saliva stimulating agent

Fillers, colours, flavors etc.







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In-vitro Evaluating Parameters of FDDDS

- ☐ In-process control tests (thickness, hardness, uniformity of weight, friability, disintegration test...), dissolution, assay and impurity analyses
- Wetting time and water absorption ratio

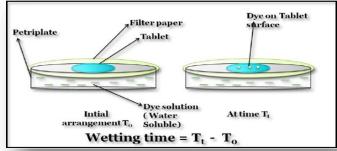
B = 5 sec. C = 10 sec. D = Finish (~ 15 sec.)

Wetting time

FDA recommends using a disposable syringe,1 mL of water is delivered directly onto a tablet placed on a flat surface, completeness of disintegration of the tablet is checked and is set as the disintegration specification for ODTs.

10 cm diameter Petri dish is filled with 10 mL of water containing a water soluble dye and a 10 cm diameter tissue paper is placed in the petri dish. The tablet is placed in the center of the dish and the time for the tablet to completely disintegrate is noted as the disintegration

time.



*J.Segado Ferran et al., 'Orally Disintegrating Tablets and Process for obtaining them', WO 103629(2003)



In-vitro Evaluating Parameters of FDDDS

Oral Films

- Thickness
- Dryness test
- Tensile strength
- Percent elongation
- Folding endurance
- Stickiness determination
- Contact angle measurement











Electronic Tongue is very helpful for taste comprasion (organoleptic properities) studies especially for the generic companies.



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Clinical Considerations: Bioequivalence Studies

□ Creating a Fast Dissolving Dosage Form version of an existing immediate release product means that the two formulations must be bioequivalent. Typically the results are similar.

If the method of taste-masking retards the dissolution rate of active ingredients, it may cause failure of the bioequivalence study.

□Whenever a significant degree of buccal absorption of a drug with a high hepatic first-pass effect is achieved, the bioavailability may be increased considerably.



Clinical Considerations:Bioequivalence Studies

- If drug absorption of FDDF is faster than with the corresponding formulation (conventional tablet or capsule), whether caused by some degree of buccal absorption or simply by faster disintegration and drug dissolution followed by rapid gastric or intestinal absorption, clinical studies for the establishment of product efficacy and safety should be established.
- If no significant degree of buccal or sublingual absorption occurs, the pharmacokinetic profile will typically be similar to that of a conventional tablet or capsule containing the same dose of the drug. In these cases, a bioequivalence status should be established.



Clinical Considerations: API Characteristics

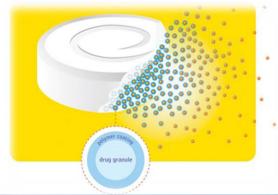
API Characteristics

- Buccal and sublingual absorption
- Water-solubility
- pKa value
- Molecular weight
- Lipophilicity

Buccal absorption takes place when a drug is water-soluble to a degree that allows the dose to dissolve in saliva, has a moderate pKa allowing a fraction of the dissolved drug to be unionized, has a relatively low molecular weight and a degree of lipophilicity leading to a high mucosal permeability relative to its dose.

Mucosal irritation of the oral cavity may be another factor to be considered.

Using taste-masking polymers may retard the dissolution rate of API and may cause problems.





API Characteristics: BCS Class-II: High Permeability, Low Solubility There is no buccal and sublingual absorption information is available. There is no food effect.

Dissolution method development conditions

- □ FDA-Recommended Dissolution Methods*(0.5 % SLS in water, 1000 mL, 50 rpm, paddle)
- ☐ Different SLS content(0.25 %, 1.0 %, SLS-free)
- Rotation speed(50, 75 rpm)
- ☐ Dissolution volume(1000,500 mL)
- □ 3 different pH media with and without different amount of SLS content
- ☐ Fassif(Fasted State Simulated Intestinal Fluid-biorelevant dissolution media)

Fasted State Simulated Intestinal Fluid (FaSSIF)

Sodium taurocholate 3mM Lecithin 0.75 mM NaOH (pellets) 0.174 g NaH₂PO₄.H₂O 1.977 g NaCl 3.093 g Purified water gs. 500 mL

Media has a pH of 6.50 and an osmolality of about 270 mOsmol/kg.

*http://www.accessdata.fda.gov/scripts/cder/dissolution/index.cfm



Developed Formulation Unit Formula*

API

Mannitol

Crospovidone

Polyvinylpyrrolidone

Sucralose

Sodium lauryl sulfate

Flavor

Colouring agent

Sodium stearyl fumarate

Reference Listed Drug Unit Formula**

API

Lactose monohydrate

Croscarmellose sodium

Hydroxypropylcellulose

Microcrystalline cellulose

Sodium lauryl sulfate

Magnesium stearate

Film coating material (Opadry II

Yellow)

*Appearance : blue-coloured, round tablets

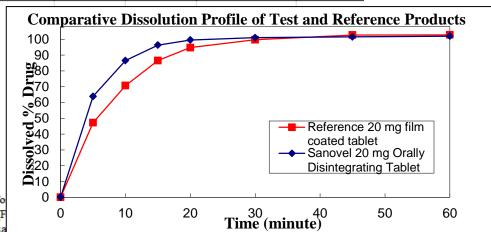
**Appearance : yellow-coloured round tablets



		DISSOLVED %								
Time	Reference 20 mg film coated tablet				Sano	vel 20 mg Ora	Tablet			
(minute)	Average (%)	Standart Deviation	Relative Standart	Confidence Interval	Average (%)	Standart Deviation	Relative Standar			
		Deviation	Deviation (%)	(95 %)		Deviation		Dissolution		
0	0	0.0	0.0	0.0	0	0.0	0.0	Conditions:		
5	47	6.6	13.9	3.7	64	2.8	4.4	O F O/ CL C in water		
10	71	5.3	7.5	3.0	87	1.5	1.8	0.5 % SLS in water ,		
15	87	3.5	4.0	2.0	96	1.8	1.9	1000 mL, 50 rpm,		
20	95	1.7	1.8	1.0	100	1.9	2.0	iooo iiiL, oo ipiii,		
30	100	1.3	1.3	0.7	101	1.4	1.4	oaddle		
45	103	1.1	1.1	0.6	102	1.8	1.8			
60	103	1.3	1.2	0.7	102	1.6	1.5	0.9		

Reference / Test Product:							
Time							
(minute)	(R-T)	SR :	604.3				
0	0.0	S(R-T):	50.2				
5	16.6						
10	15.8						
15	9.8						
20	4.8]					
30	1.3	1					
45	1.1						
60	0.8]					

Conclusion: Where more than 85% of the drug is dissolved fo accepted as similar without further mathematical evaluation. (F Bioequivalence Studies for Immediate-Release Solid Oral Dosa





	DISSOLVED %									
Time	Ref	ference 20 mg	film coated ta	blet	Sanove	Sanovel 20 mg Orally Disintegrating Tablet				
(minute)	Average (%)	Standart Deviation	Relative Standart Deviation (%)	Confidence Interval (95 %)	Average (%)	Standart Deviation	Relative Standart Deviation	Confidence Interval (95 %)		
0	0	0.0	0.0	0.0	0	0.0	⊤Dissolເ	ıtion Co	nditions:	
5	90	3.1	3.4	1.7	61	6.9				
10	96	2.1	2.2	1.2	81	2.8	_U.1 N H	CI WITH	0.5 % SLS,	
15	98	2.8	2.8	1.6	88	1.5	_1000 m	1 50 rn	m, paddle	
20	99	3.1	3.1	1.7	88	1.7	1000 111	L, 30 1P	iii, paddie	
30	99	3.2	3.2	1.8	87	1.8	2.0	1.0		
45	98	3.3	3.4	19	87	1.7	file of Test and R	1.0		
60	98	3.6	3.7		ts					
Reference / 7	Test Product:			100 90			•	•	•	
Time (minute)	(R-T)	SR :	677.1	80 -						
0	0.0	S(R-T) :	97.8	50.70						
5	28.6			0,50	7					
10	14.7			\$ 50 F	/		 R	eference 20 mg	ı film	
15	10.6			<u>9</u> 40 //	/			pated tablet	,	
20	10.2			Dissolved %Drug 60 - 60 - 60 - 60 - 60 - 60 - 60 - 60 -			→ S	anovel 20 mg C	orally	
30	11.3			≝ ²⁰ ∤				isintegrating Ta	·	
45	11.1			10				· · · · · · · · · · · · · · · · · · ·		
60	11.3			0 🕌						
Conclusion: W	0 10 20 30 40 50 60 Conclusion: Where more than 85% of the drug is dissolved fo									

similar without further mathematical evaluation. (FDA, Guidance for industry, Waiver of In Vivo Bioavailability and Bioequivalence Studies for Immediate-Release Solid Oral Dosage Forms Based on a Biopharmaceutics Classification System, 2000.)

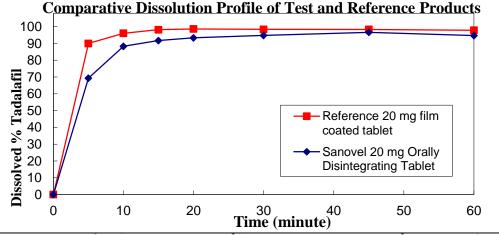


		DISSOLVED %								
Time	Reference 20 mg film coated tablet			olet	Sanov					
(minute)	Average (%)	Standart Deviation	Relative Standart Deviation (%)	Confidence Interval (95 %)	Average (%)	Standart Deviation	Relative Standart Deviation (%)	Confidence Interval		
0	0	0.0	0.0	0.0	0	0.0	— Dissolut	ion Cor	nditions:	
5	90	3.1	3.4	1.8	69	2.9	—pH=4.5 a	cetate	huffer	
10	96	2.1	2.2	1.2	88	2.1	•			
15	98	2.8	2.8	1.6	92	1.3	with 0.5	% SLS,	1000 mL,	
20	99	3.1	3.1	1.7	93	1.3	50 rpm	naddla	·	
30	98	3.2	3.3	1.8	95	1.1	─ 50 rpm,	paudie		
45	98	3.3	3.3	1.8	97	1.6	1.7	0.9		
60	98	3.3	3.4	1.9	95	1.3	1.4	0.7		

Reference / Test Product:								
Time								
(minute)	(R-T)	SR :						
0	0.0	S(R-T):						
5	20.7							
10	7.8							
15	6.5							
20	5.3							
30	3.6							
45	1.7							
60	3.2							

Conclusion: Where more than 85% of th

accepted as similar without further mathe



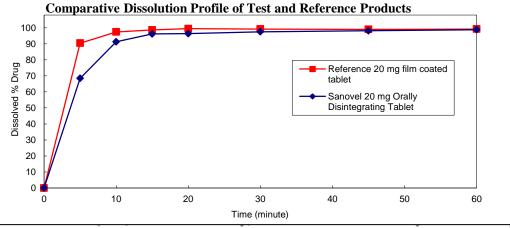
Bioequivalence Studies for Immediate-Release Solid Oral Dosage Forms Based on a Biopharmaceutics Classification System, 2000.)



		DISSOLVED %								
Time	R	Reference 20 mg film coated tablet				Sanovel 20 mg Orally Disintegrating Tablet				
(minute)	Average (%)	Standart Deviation	Relative Standart	Confidence Interval	Average (%)	Standart Deviation	Relative Standart	Confidence Interval		
	(70)	Deviation	Deviation (%)	(95 %)	(70)	Deviation	Dissolution Condition			
0	0	0.0	0.0	0.0	0	0.0				
5	90	3.2	3.6	1.8	68	4.5	pH=6.8 phc	sphate	butter	
10	97	1.1	1.2	0.6	91	2.0	with 0.5 %			
15	99	0.9	0.9	0.5	96	3.2	WILII U.5 %	SLS, IUU	JU III∟,	
20	99	0.9	0.9	0.5	96	1.9	50 rpm, pad	ddle		
30	99	0.6	0.6	0.4	97	2.2	ر	1.5	I	
45	99	0.7	0.7	0.4	98	2.3	2.4	1.3		
60	99	0.7	0.7	0.4	99	2.2	2.2	1.2		

Reference	/ Test Produc	t:
Time		
(minute)	(R-T)	SR :
0	0.0	S(R-T):
5	22.0	
10	6.2	
15	2.5	
20	3.1	
30	1.7	
45	0.9	
60	0.4	

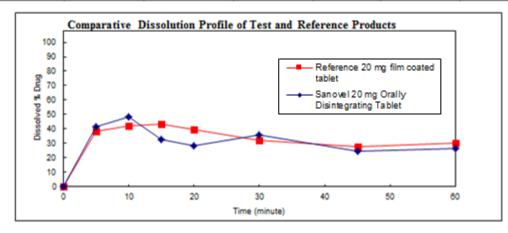
Conclusion: Where more than 85% of t accepted as similar without further math



Bioequivalence Studies for Immediate-Release Solid Oral Dosage Forms Based on a Biopharmaceutics Classification System, 2000.)



		DISSOLVED %									
Time	R	deference 20 m	g film coated tab	olet	Sanovel 20 mg Orally Disintegrating Tablet						
(minute)	Average (%)	Standart Deviation	Relative Standart Deviation (%)	Confidence Interval (95 %)	Average (%)	Standart Deviation	Relative Standart Deviation (%)	Confidence Interval (95 %)			
0	0	0.0	0.0	0.0	0	0.0	0.0	0.0			
5	38	3.2	3.6	1.8	42	4.5	6.5	2.5			
10	42	1.1	1.2	0.6	48	3.0	3.3	1.7			
15	43	0.9	0.9	0.5	33	3.2	3.3	1.8			
20	40	0.9	0.9	0.5	28	1.9	2.0	1.1			
30	32	0.6	0.6	0.4	36	2.2	2.3	1.3			
45	28	0.7	0.7	0.4	25	2.3	2.4	1.3			
60	30	0.7	0.7	0.4	26	2.2	2.2	1.2			



FASSIF CONDITIONS



Comparative Pharmacokinetic Results							
Parameters	Test*	Reference**					
Cmax(µg/mL)	369.631±59.185	353.056±87.772					
Tmax(h)	2.926±1.177	3.280±1.295					
t _{1/2} (h)	21.903±7.558	21.569±6.212					
AUC _{0-tlast} (µg/mL/h)	9160.425±2426.795	8990.354±2045.818					
AUC ₀ –∞(μg/mL/h)	10494.620±3200.168	10094.698±2728.826					

The mean plasma concentration-time profiles were similar for ODT and Conventional Tablet.

The test and reference formulations met the regulatory requirements for bioequivalence (80–125%, 90% CI).

*Sanovel 20 mg Orally Disintegrating Tablet
**Conventional 20 mg Film Coated Tablet



Conclusion

- FDDDS can be used for improving patient compliance, extending patent life, product life cycle and product differentiation.
- Because of increased patient demand, these dosage forms are expected to become more popular.
- The pharmacokinetic profile will typically be similar to that of a conventional tablet or capsule containing the same dose of the drug with FDDDS.
- Some clinical studies should be concern if API has significant degree of buccal or sublingual absorption.



Thank you for your attention...





Let us meet again..

We welcome you all to our future conferences of OMICS International 7th World Congress on Bioavailability & Bioequivalence: BA/BE Studies Summit

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