

IPAR



**Public Assessment Report for a
Medicinal Product for Human Use**

Scientific Discussion

Viaredin 25 mg film-coated tablets
Sildenafil citrate
PA0126/373/001

The Public Assessment Report reflects the scientific conclusion reached by the Health Products Regulatory Authority (HPRA) at the end of the evaluation process and provides a summary of the grounds for approval of a marketing authorisation for a specific medicinal product for human use. It is made available by the HPRA for information to the public, after deletion of commercially sensitive information. The legal basis for its creation and availability is contained in Article 21 of Directive 2001/83/EC, as amended. It is a concise document which highlights the main parts of the documentation submitted by the applicant and the scientific evaluation carried out by the HPRA leading to the approval of the medicinal product for marketing in Ireland.

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I. INTRODUCTION

Based on the review of the data on quality, safety and efficacy, the HPRa has granted a marketing authorisation for Viaredin 25mg & 50mg Film-coated tablet, from Clonmel Healthcare Ltd on 15th December 2023 for the following indication:

Viaredin 25mg & 50mg Film-coated tablet is indicated in adult men with erectile dysfunction, which is the inability to achieve or maintain a penile erection sufficient for satisfactory sexual performance. In order for Viaredin 25mg & 50mg Film-coated tablet to be effective, sexual stimulation is required.

This application for a marketing authorisation was submitted in accordance with Article 10(1) of Directive 2001/83/EC and is referred to as a 'generic' application.

The reference product is Viagra® 25/50/100 mg film-coated tablets by Upjohn EESV, Netherlands, registered centrally since 1998 (MA no. EU/1/98/077).

With Ireland as the Reference Member State (RMS) in the decentralised procedure, Kappler Pharma Consult GmbH applied for Marketing Authorisations for Viaredin 25mg & 50mg Film-coated tablet in Concerned Member States (CMS) Norway.

This medicinal product is subject to prescription.

The Summary of Product Characteristics for (SmPC) for this medicinal product is available on the HPRa's website at www.hpra.ie

Name of the product	Viaredin 25mg Film-coated tablet
Name(s) of the active substance(s) (INN)	Sildenafil citrate
Pharmacotherapeutic classification (ATC code)	G04BE03
Pharmaceutical form and strength(s)	25mg Film-coated tablet
Marketing Authorisation Number(s) in Ireland (PA)	PA0126/373/001
Marketing Authorisation Holder	Kappler Pharma Consult GmbH
MRP/DCP No.	IE/H/1276/001/DC
Reference Member State	IE
Concerned Member State	NO

II. QUALITY ASPECTS

II.1. Introduction

This application is for Viaredin 25mg & 50mg Film-coated tablet.

II.2 Drug substance

The active substance is Sildenafil citrate, an established active substance described in the European Pharmacopoeia, and is manufactured in accordance with the principles of Good Manufacturing Practice (GMP)

The active substance specification is considered adequate to control the quality and meets current pharmacopoeial requirements. Batch analytical data demonstrating compliance with this specification has been provided.

II.3 Medicinal product

P.1 Composition

The medicinal product contains 35.112 mg of Sildenafil citrate equivalent to 25 mg Sildenafil for the 25 mg strength, or 70.225 mg of Sildenafil citrate equivalent to 50 mg Sildenafil for the 50 mg strength.

The excipients in the medicinal product are listed in section 6.1 of the SmPC.

A visual description of the product is included in section 3 of the SmPC.

P.2 Pharmaceutical Development

The product is an established pharmaceutical form (film-coated tablet) and its development is adequately described in accordance with the relevant European guidelines.

P.3 Manufacture of the Product

The product is manufactured in accordance with the principles of good manufacturing practice (GMP) at suitably qualified manufacturing sites.

The manufacturing process has been validated according to relevant European/ICH guidelines and the process is considered to be sufficiently validated.

P.4 Control of Other Substances (Excipients)

All ingredients comply with the European Pharmacopoeia or are adequately controlled by the manufacturer's specifications.

P.5 Control of Finished Product

The Finished Product Specification is based on the pharmacopoeial monograph for tablets, and the tests and control limits are considered appropriate for this type of product.

The analytical methods used are described in sufficient detail and are supported by validation data.

Batch analytical data for a number of batches from the proposed production site(s) have been provided and demonstrate the ability of the manufacturer to produce batches of finished product of consistent quality.

P.6 Packaging material

The approved packaging for this product is described in section 6.5 of the SmPC.

Evidence has been provided that the packaging complies with the European Pharmacopoeia and EU legislation requirements for use with foodstuffs.

P.7 Stability of the Finished Product

Stability data on the finished product in the proposed packaging have been provided in accordance with EU guidelines and support the shelf-life and storage conditions listed in sections 6.3 and 6.4 of the SmPC.

II.4 Discussion on Chemical, Pharmaceutical and Biological Aspects

The important quality characteristics of the product are well-defined and controlled. Satisfactory chemical and pharmaceutical documentation has been provided, assuring consistent quality of Viaredin film-coated tablets.

III. NON-CLINICAL ASPECTS

III.1 Introduction

This active substance is a generic formulation of Viagra 25 and 50 mg film-coated tablets on the European market. No new preclinical data have been submitted. This is acceptable for this type of application.

III.2 Pharmacology

N/A

III.3 Pharmacokinetics

N/A

III.4 Toxicology

N/A

III.5 Ecotoxicity/environmental risk assessment

Since Viaredin 25 and 50 mg film-coated tablets are generic products, they will not lead to an increased exposure to the environment. Additional studies on environmental risk assessment are therefore not deemed necessary.

III.6 Discussion on the non-clinical aspects

Pharmacodynamic, pharmacokinetic and toxicological properties of sildenafil citrate are well known. As sildenafil citrate is a widely used, well-known active substance, the applicant has not provided additional studies and further studies are not required. A nonclinical overview based on literature review was provided and is acceptable for this type of generic application. Nonclinical sections of the SmPC are in line with the originator which is acceptable.

IV. CLINICAL ASPECTS

IV.1 Introduction

Sildenafil is a well-known active substance with established efficacy and tolerability.

The content of the SmPC approved during the decentralised procedure is in accordance with that accepted for the reference product Viagra® 25/50/100 mg film-coated tablets marketed by Upjohn EESV, Netherlands, registered centrally since 1998 (MA no. EU/1/98/077).

For this generic application, the applicant has submitted one bioequivalence study in which the pharmacokinetic profile of the test product containing sildenafil (Sildenafil 100 mg film coated tablets) is compared with the pharmacokinetic profile of the reference product VIAGRA 100 mg film-coated tablets.

A single-dose, randomised, two-period, two-treatment, two-sequence, crossover bioequivalence study was carried out. The test product Sildenafil 100 mg film coated tablets, was compared to the reference product VIAGRA 100 mg film-coated tablets, PFIZER PHARMA GmbH, Germany). Based on the pharmacokinetic parameters of active substance sildenafil, the reference tablet VIAGRA® 100 mg film-coated tablets, PFIZER PHARMA GmbH, Germany) and test tablet Sildenafil 100 mg film coated tablets are bioequivalent with extent to the rate and extent of absorption and fulfil the bioequivalence requirements outlined in the relevant CHMP Note for Guidance.

A biowaiver for the 50mg and 25mg strengths was proposed. The biowaiver criteria were fulfilled as per Note for Guidance on the Investigation of Bioavailability and Bioequivalence" (CPMP/EWP/QWP/1401/98 Rev. 1/corr**). The results of the bioequivalence study performed with the Sildenafil 100 mg film coated tablets therefore apply to the other two strengths.

The HPRA has been assured that GCP standards were followed in an appropriate manner in the studies conducted.

IV.2 Pharmacokinetics

Absorption

Sildenafil is rapidly absorbed. Maximum observed plasma concentrations are reached within 30 to 120 minutes (median 60 minutes) of oral dosing in the fasted state. The mean absolute oral bioavailability is 41 % (range 25-63 %). After oral dosing of sildenafil AUC and C_{max} increase in proportion with dose over the recommended dose range (25-100 mg).

When sildenafil is taken with food, the rate of absorption is reduced with a mean delay in T_{max} of 60 minutes and a mean reduction in C_{max} of 29 %.

Distribution

The mean steady state volume of distribution (Vd) for sildenafil is 105 l, indicating distribution into the tissues. After a single oral dose of 100 mg, the mean maximum total plasma concentration of sildenafil is approximately 440 ng/ml (CV 40 %). Since sildenafil (and its major circulating N-desmethyl metabolite) is 96 % bound to plasma proteins, this results in the mean maximum free plasma concentration for sildenafil of 18 ng/ml (38 nM). Protein binding is independent of total drug concentrations.

In healthy volunteers receiving sildenafil (100 mg single dose), less than 0.0002 % (average 188 ng) of the administered dose was present in ejaculate 90 minutes after dosing.

Biotransformation

Sildenafil is cleared predominantly by the CYP3A4 (major route) and CYP2C9 (minor route) hepatic microsomal isoenzymes. The major circulating metabolite results from N-demethylation of sildenafil.

This metabolite has a phosphodiesterase selectivity profile similar to sildenafil and an in vitro potency for PDE5 approximately 50 % that of the parent drug. Plasma concentrations of this metabolite are approximately 40 % of those seen for sildenafil. The N-desmethyl metabolite is further metabolised, with a terminal half-life of approximately 4 h.

Elimination

The total body clearance of sildenafil is 41 l/h with a resultant terminal phase half-life of 3-5 h. After either oral or intravenous administration, sildenafil is excreted as metabolites predominantly in the faeces (approximately 80 % of administered oral dose) and to a lesser extent in the urine (approximately 13 % of administered oral dose).

IV.3 Pharmacodynamics

Sildenafil is an oral therapy for erectile dysfunction. In the natural setting, i.e. with sexual stimulation, it restores impaired erectile function by increasing blood flow to the penis.

The physiological mechanism responsible for erection of the penis involves the release of nitric oxide (NO) in the corpus cavernosum during sexual stimulation. Nitric oxide then activates the enzyme guanylate cyclase, which results in increased levels of cyclic guanosine monophosphate (cGMP), producing smooth muscle relaxation in the corpus cavernosum and allowing inflow of blood.

Sildenafil is a potent and selective inhibitor of cGMP specific phosphodiesterase type 5 (PDE5) in the corpus cavernosum, where PDE5 is responsible for degradation of cGMP. Sildenafil has a peripheral site of action on erections. Sildenafil has no direct relaxant effect on isolated human corpus cavernosum but potently enhances the relaxant effect of NO on this tissue. When the NO/cGMP pathway is activated, as occurs with sexual stimulation, inhibition of PDE5 by sildenafil results in increased corpus cavernosum levels of cGMP. Therefore, sexual stimulation is required in order for sildenafil to produce its intended beneficial pharmacological effects.

IV.4 Clinical Efficacy

The efficacy of sildenafil in the proposed indications is established in clinical use. No additional efficacy clinical studies to demonstrate efficacy have been included in the application and none are required for a generic application.

IV.5 Clinical Safety

The overall safety profile of sildenafil is established and generally known. The test formulation and the reference medicinal product were well tolerated in the bioequivalence study and no serious adverse events were reported. No new safety studies were provided, and none are required for a generic application.

The safety information in the SmPC and Package Leaflet are in line with those of the reference product.

Risk Management Plan (RMP)

The MAH has submitted a risk management plan, in accordance with the requirements of Directive 2001/83/EC as amended, describing the pharmacovigilance activities and interventions designed to identify, characterise, prevent, or minimise risks relating to Viaredin film-coated tablets.

Summary table of safety concerns in approved RMP

Important identified risks	<ul style="list-style-type: none"> • None
Important potential risks	<ul style="list-style-type: none"> • Non-arteritic anterior ischaemic optic neuropathy (NAION)
Missing information	<ul style="list-style-type: none"> • None

Pharmacovigilance Plan

Routine pharmacovigilance is suggested, and no additional pharmacovigilance activities are proposed by the applicant, which is endorsed.

Risk minimisation measures

Routine risk minimisation is suggested, and no additional risk minimisation activities are proposed by the applicant, which is endorsed.

Periodic Safety Update Report (PSUR)

With regard to PSUR submission, the MAH should take the following into account:

- PSURs shall be submitted in accordance with the requirements set out in the list of Union reference dates (EURD list) provided for under Article 107c(7) of Directive 2001/83/EC and published on the European medicines web-portal. Marketing authorisation holders shall continuously check the European medicines web-portal for the DLP and frequency of submission of the next PSUR.
- For medicinal products authorized under the legal basis of Article 10(1) or Article 10a of Directive 2001/83/EC, no routine PSURs need to be submitted, unless otherwise specified in the EURD list.
- In case the active substance will be removed in the future from the EURD list because the MAs have been withdrawn in all but one MS, the MAH shall contact that MS and propose DLP and frequency for further PSUR submissions together with a justification.

IV.6 Discussion on the clinical aspects

As this is a generic application under Article 10(1) of Directive 2001/83/EC, additional non-clinical and clinical studies to demonstrate efficacy and safety are not required. The applicant has submitted the results of a suitable bioequivalence study with the 100 mg strength which has demonstrated the similarity of the test product against the reference product, in accordance with the Note for Guidance on the Investigation of Bioavailability and Bioequivalence" (CPMP/EWP/QWP/1401/98 Rev. 1/corr**). Justification for a biowaiver for the 25mg and 50 mg strength was provided.

The applicant has also submitted a clinical overview and summary of the evidence demonstrating the efficacy and safety of this product in clinical practice.

V. OVERALL CONCLUSIONS

Viaredin 25mg & 50mg Film-coated tablet from Kappler Pharma Consult GmbH is a generic form of Viagra 25mg & 50 mg film-coated tablet by Upjohn EESV, Netherlands, registered centrally since 1998 (MA no. EU/1/98/077). Viagra 25mg & 50 mg film-coated tablet is a well-known medicinal product with a proven chemical-pharmaceutical quality and an established favourable efficacy and safety profile.

Bioequivalence has been shown to be in compliance with the CHMP guidance documents. The SmPC is consistent with that of the reference product.

The MAH has provided written confirmation that systems and services are in place to ensure compliance with their pharmacovigilance obligations.

The HPRA, on the basis of the data submitted considered that Viaredin 25mg & 50mg Film-coated tablet demonstrated bioequivalence with the reference product as well as a satisfactory risk/benefit profile and therefore granted a marketing authorisation.

VI. REVISION DATE

09.11.2028