Pharmaceutical Biotechnology • Volume 13

Rational Design of Stable Protein Formulations

Theory and Practice

Edited by
John F. Carpenter
and
Mark C. Manning

RS 431
.P75 R38
2002

ALXN2079
IPR2023-00998

ALXN2079
IPR2019-00740

Rational Design of Stable Protein Formulations

Theory and Practice

Rational Design of Stable Protein Formulations

Theory and Practice

Edited by

John F. Carpenter

and

Mark C. Manning

University of Colorado Health Sciences Center
Denver, Colorado

Kluwer Academic / Plenum Publishers
New York, Boston, Dordrecht, London, Moscow

Pharmaceutical Biotechnology

Series Editor: Ronald T. Borchardt
The University of Kansas
Lawrence, Kansas

Recent volumes in this series:

Volume 7 PHYSICAL METHODS TO CHARACTERIZE PHARMACEUTICAL PROTEINS
Edited by James N. Herron, Win Jiskoot, and Daan J. A. Crommelin

Volume 8 MODELS FOR ASSESSING DRUG ABSORPTION AND METABOLISM
Edited by Ronald T. Borchardt, Philip L. Smith, and Glynn Wilson

Volume 9 FORMULATION, CHARACTERIZATION, AND STABILITY OF PROTEIN DRUGS: Case Histories
Edited by Rodney Pearlman and Y. John Wang

Volume 10 PROTEIN DELIVERY: Physical Systems
Edited by Lynda M. Sanders and R. Wayne Hendren

Volume 11 INTEGRATION OF PHARMACEUTICAL DISCOVERY AND DEVELOPMENT: Case Histories
Edited by Ronald T. Borchardt, Roger M. Freidinger, Tomi K. Sawyer, and Philip L. Smith

Volume 12 MEMBRANE TRANSPORTERS AS DRUG TARGETS
Edited by Gordon L. Amidon and Wolfgang Sadée

Volume 13 RATIONAL DESIGN OF STABLE PROTEIN FORMULATIONS: Theory and Practice
Edited by John F. Carpenter and Mark C. Manning

Volume 14 DEVELOPMENT AND MANUFACTURE OF PROTEIN PHARMACEUTICALS
Edited by Steven L. Nail and Michael J. Akers

A Chronological Listing of Volumes in this series appears at the back of this volume

---

A Continuation Order Plan is available for this series. A continuation order will bring delivery of each new volume immediately upon publication. Volumes are billed only upon actual shipment. For further information please contact the publisher.

Library of Congress Cataloging-in-Publication Data

Rational design of stable protein formulations: theory and practice/edited by John F. Carpenter, Mark C. Manning.
p. cm. — (Pharmaceutical biotechnology; v. 13)
Includes bibliographical references and index.
ISBN 0-306-46741-0
1. Protein drugs—Stability. 2. Protein engineering. 3. Drugs—Design. I. Carpenter, John F. II. Manning, Mark C. III. Series.
RS431.P75 R38 2002
615'.19—dc21

2001057997

ISBN: 0-306-46741-0

© 2002 Kluwer Academic / Plenum Publishers, New York
233 Spring Street, New York, N.Y. 10013

http://www.wkap.nl/

10 9 8 7 6 5 4 3 2 1

A C.I.P. record for this book is available from the Library of Congress

All rights reserved

No part of this book may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, microfilming, recording, or otherwise, without written permission from the Publisher

Printed in the United States of America

Contributors

Tsutomu Arakawa • Alliance Protein Laboratories, Thousand Oaks, California 91360

John Carpenter • Center for Pharmaceutical Biotechnology, Department of Pharmaceutical Sciences, School of Pharmacy, University of Colorado Health Sciences Center, Denver, Colorado 80262

Byeong S. Chang • Department of Pharmaceutics and Drug Delivery, Amgen, Inc., Thousand Oaks, California 90132

William Garzon-Rodriguez • Center for Pharmaceutical Biotechnology, Department of Pharmaceutical Sciences, School of Pharmacy, University of Colorado Health Sciences Center, Denver, Colorado 80262

Susan Hershenson • Department of Pharmaceutics and Drug Delivery, Amgen, Inc., Thousand Oaks, California 90132

Bert Ho • Tularik Corporation, S. San Francisco, California 94080

LaToya S. Jones • Center for Pharmaceutical Biotechnology, Department of Pharmaceutical Sciences, School of Pharmacy, University of Colorado Health Sciences Center, Denver, Colorado 80262

Brent S. Kendrick • Amgen, Inc., Boulder, Colorado 80301

Geoffrey Lee • Department of Pharmaceutical Technology, Friedrich-Alexander University, Erlangen, Germany

Tiansheng Li • Amgen, Inc., Thousand Oaks, California 90132

Mark Manning • Center for Pharmaceutical Biotechnology, Department of Pharmaceutical Sciences, School of Pharmacy, University of Colorado Health Sciences Center, Denver, Colorado 80262

Jeffrey D. Meyer • Center for Pharmaceutical Biotechnology, Department of Pharmaceutical Sciences, School of Pharmacy, University of Colorado Health Sciences Center, Denver, Colorado 80262

Linda O. Narhi • Amgen, Inc., Thousand Oaks, California 90132

Rajiv Nayar • HTD Biosystems, Hercules, California 94547

Theodore W. Randolph • Center for Pharmaceutical Biotechnology, Department of Chemical Engineering, University of Colorado, Boulder, Colorado 80503

1

Practical Approaches to Protein Formulation Development

Byeong S. Chang and Susan Hershenson

INTRODUCTION

As is the case with other pharmaceuticals, formulation development is one of the critical steps in developing a protein as a therapeutic product. Development of stable protein formulations may require even more resources and effort than conventional small molecule pharmaceuticals. Proteins typically have more stability issues as a result of their complexity and delicate structural stability. Fortunately, a great deal of research regarding protein stability has been conducted and this information is readily available in the literature (reviewed by Manning et al., 1989; Chen, 1992; Ahern and Manning, 1992a, 1992b; Arakawa et al., 1993; Cleland et al., 1993; Wang and Pearlman, 1993; Pearlman and Wang, 1996; Volkin and Middaugh, 1997). Ultimately, it would be ideal to be able to develop a pure pharmaceutical containing only the native protein. However, it is not practical to have only the native form of a protein in the formulation because the protein must be purified from a complex biological mixture containing a pool of other proteins which includes misfolded, denatured, and degraded forms of the same protein. Furthermore, a major challenge is to maintain the integrity of the purified protein during routine pharmaceutical processing, storage, handling, and delivery to the patient. One could envision achieving this goal by developing a formulation with

Byeong S. Chang and Susan Hershenson • Department of Pharmaceutics and Drug Delivery, Amgen, Inc., Thousand Oaks, CA 90132.

Rational Design of Stable Protein Formulations, edited by Carpenter and Manning. Kluwer Academic / Plenum Publishers, New York, 2002.

perfect stability, i.e., no physical and chemical change in the protein. Because proteins are complex molecules composed of numerous reactive chemical groups and delicate three-dimensional structures, identifying a set of conditions to keep all components stable is virtually impossible. In general, commercial therapeutic protein formulations are developed under the assumption that some degree of physicochemical changes will occur during storage and handling.

Realizing that it is impossible to develop a perfectly stable formulation, especially while meeting an aggressive product development timeline, the main objective then becomes one of maintaining the appropriate safety and efficacy of the product. In order to achieve this objective, it is imperative to understand the broad spectrum of degradation pathways affecting proteins, and to have available equipment and expertise in an extensive repertoire of analytical methods. Formulation development focuses on determining the potential degradation pathways, assessing the significance of each and optimizing variables to minimize the degradation products that are clinically significant.

Regulatory guidelines also are critical elements for guiding formulation development. They provide information about how to conduct studies and obtain useful results for evaluating formulations. The results obtained allow formulation scientists to write an appropriate developmental pharmaceutics section in regulatory filings. The guidelines also help to evaluate the significance of some inevitable degradation products that are produced during manufacturing, shipping and storage. For example, if the degradation products have properties comparable to those of the desired product with respect to activity, efficacy, and safety, they can be classified as product-related substances. This classification is significantly different from considering the degradation product as an impurity when there is not sufficient supporting evidence to justify classification as a product-related substance (Appendix, Regulatory Document 1). Understanding of these practical issues of regulatory requirements is critical for formulation scientists during design, implementation, evaluation and reporting of their studies.

In addition to insight into the scientific and regulatory issues, developing commercial formulations requires a clear understanding of the potential market. For example, indication, patients, method of delivery, frequency of dosing, typical dose requirement, market distribution and other business-related information will provide directions for the design of a successful formulation. Also, it is important to consider the competitiveness of the formulation as compared to other products available in the market.

In this chapter, an overview of critical factors affecting the design of therapeutic protein formulations and a general guide to developing commercially viable dosage forms for protein pharmaceuticals will be discussed. Since the majority of practical issues are not covered very well in the scientific literature, this chapter also includes information from regulatory guidance documents (see Appendix), labels from marketed products and routine industrial experience.

PREPARATION FOR FORMULATION DEVELOPMENT

Resource Requirements for Formulation Development

A list of resources that should be available before starting formulation development is summarized in Table 1. Some resources may not be as critical as others, depending on the nature of problems encountered, but it is important to have sufficient resources to discover major formulation issues as early as possible in the product development process. Without the appropriate equipment and personnel, the development of an acceptable formulation can be greatly hampered, potentially to such a degree that the product is never brought to market. Of course, not all of the resources need to be at the company developing the therapeutic protein, but if outside contractors are employed it is essential that timely access to resources is available. In addition, the quality of raw materials should be carefully evaluated because unexpected impurities may introduce unnecessary

Table 1.
Resource Requirements for Initial Protein Formulation Development

Resources	Requirement	Example
Purified protein	Representative of manufacturing process; sufficient quantity to cover dose bracket, formulation variables, and stress conditions; minimum complication by impurity (precipitation of impurity, degradation by impurity like proteolytic cleavage).	Purified bulk, sample from final purification process
Qualified excipients	Pharmaceutically acceptable quality, manufacturers with qualified production procedures and sufficient scale, specifications on critical impurities, quality that can be carried on to clinical studies and commercial distribution.	USP, Ph. Eur, JP
Access to fill finish facility	Capability to sterilize container/closure components; fill/finish under aseptic environment; head-space purge system; drying equipment	Sterile hood, filling machine, lyophilizer
Analytical instruments	Structural analyses; concentration determination, chromatographic analyses; electrophoresis; bioassays; other microcharacterizations.	CD, UV, fluorescence, HPLCs, mass-spectrometry, SDS-PAGE
Facility to accommodate stability studies	Controlled temperature, controlled light exposure, controlled relative humidity, devices to provide controlled agitation.	Freezer, refrigerator, incubator, light chamber, RH incubator, agitator

Table 2.
Examples of Information Useful for Designing Formulation Studies

Information	Examples
Clinical indication	Site of treatment (self-administration, office visit, hospital), methods of delivery, concomitant medication, competition.
Patient population	Age, strength, tolerability, capability to manipulate devices, sensitivity to excipient
Typical routes of delivery	Injectables (IV, SC, IM, IP, ICV, IT, IO), topical, inhalation, nasal, oral, etc.
Dose requirement	PK profile, frequency of dosing, variable vs. fixed dose, single-dose/multidose
Drug interaction	Co-administration with other drug, dilution or reconstitution with other solution; presence of undesirable compounds like reducing sugars, preservatives
Typical dosage forms	Liquid, lyophilized, spray-dried, aerosol by liquid or powder, other novel carrier; stability, physical properties, reconstitution art
Container/closure	Vial/stoppers, prefilled syringes, prefilled cartridges, dual-chamber cartridges, blister packages, product contact material, leacheates, breakage, light sensitivity, moisture penetration
Delivery device	Syringes, prefilled-syringes, pen injectors, auto-injectors, needle-free injectors, inhalation devices, infusion pumps

complications in the stability profile that is determined during formulation development and testing.

Useful Information for Designing Formulations

The configuration of a protein formulation is affected by how the drug will be used as a product. If such information is available when designing formulation studies, it is recommended to consider the limitations and challenges associated with each application. Examples of such information are listed in Table 2.

PREFORMULATION DEVELOPMENT

It is important to understand the critical properties of a protein before starting large studies to design and test the final formulation. Preformulation studies are designed to learn about the protein's susceptibility to a variety of pharmaceutically relevant stresses. The main objectives of preformulation research

Table 3.
Information Obtained from Pre-formulation Studies for Protein Pharmaceuticals

Characterization	Examples
Physical properties	Primary, secondary, tertiary and quaternary structures, solubility, viscosity, self-association, hydrophobicity, molecular weight, extinction coefficient, glycosylation, effects of ionic strength, etc.
Biological properties	Substrate or receptor affinity, in vitro activity model, *in vivo* preclinical model, etc.

include: general characterization of the product; investigation of potential stability issues; development of relevant analytical methods; establishment of a stability profile with stability-indicating assays; and identification of major formulation challenges. A summary of these issues will be presented in this section.

Characterization of Protein Pharmaceuticals

There is available in the literature extensive coverage of analytical methods and their principles for the characterization of proteins (e.g., Jones, 1993; Reubsaet et al., 1998; Herron et al., 1995). General points to consider when characterizing a protein as an active ingredient are listed in Table 3. As a protein's biological activity is dependent on its structure, significant emphasis has been given to structural properties and stability against various stresses.

Accelerated Stability Studies

In order to predict potential stability problems within a short period of time and to develop appropriate analytical methods, proteins are exposed to stronger-than-real stresses and various degradation products induced by the stresses are examined. The results obtained from these so-called "accelerated stability studies" might also be useful to predict the kinetics of the degradation processes under real handling conditions, when there are not sufficient real-time results available because of time and resource constraints. However, the accelerated stability study is not acceptable to determine expiry of the product, so it is best used to rank order the importance of different degradation pathways. Approaches and cautions in the extrapolation of data from accelerated stability testing to real-time stability and normal handling conditions are discussed in detail below.

Table 4.
Various Conditions Used to Accelerate Protein Degradation

Stresses	Routine ranges	Practical applications	Problems to monitor
Temperature	0–50°C	Storage, shipping, handling, delivery	Structural changes (precipitation, aggregation, recovery loss), solubility, increased reaction rates for all degradations
Light	>1.2 million lux hrs illumination, >200 watt hrs/square meter UV energy	Light exposure, container, package	Oxidation, cleavage
Freezing	Multiple freeze-thaw, liquid nitrogen freeze	Frozen storage, accidental freezing, lyophilization	Precipitation, aggregation, pH change, crystallization of excipients
Oxidation	Oxygen purge, peroxide spike	Storage, excipient stability, impurity	Oxidations, inactivation
Humidity	0–100% RH	Storage, container integrity, powder	Moisture content, moisture related degradations
Mechanical stresses	Vortex, agitation, shear-stress ($3000\,s^{-1}$)	Manufacturing, filling, shipping, handling, delivery	Precipitation, aggregation, recovery loss
Other denaturants	—	Impurities, pH, denaturing excipients	Precipitation, aggregation, recovery loss, structural changes

Conditions to accelerate various degradation reactions in protein products and potential problems to monitor are listed in Table 4. Proteins contain numerous amino acid side chains and delicate three-dimensional structures, which can be susceptible to different stresses. Therefore, it is important to test the protein under a variety of physical and chemical stresses in order to provide a good simulation of the degradation products that can be generated.

Development of Analytical Methods

A brief summary of typical analytical methods is presented in Table 5. It is essential to have a wide range of analytical methods available to identify and characterize degradation products. The analytical methods should be further selected and customized to accommodate the specific needs for each protein product.

Table 5.
Typical Methods Used to Characterize Proteins and Degradation Products

Methods	Examples	Applications
Column chromatography	HPLC, FPLC, low pressure LC; size-exclusion, reversed-phase, ion-exchange, hydrophobic, affinity columns; coupled with UV, fluorescence, RI, and other analytical instruments as detectors	Most physical and chemical degradations, excipient impurities, leacheates
Electrophoresis	SDS-PAGE, native PAGE, isoelectric focusing, capillary electrophoresis, etc.	Degradations with changes in size and/or charge
Spectroscopy	CD, fluorescence, FTIR, UV, Raman, NMR, etc.	Structural changes, chemical modifications of side groups
Thermal analysis	Differential scanning calorimetry, thermogravimetric analysis, thermomechanical analysis, etc.	Protein structure, lyophilized cake structure, powder characterizations
Light scattering/turbidity	Dynamic light scattering, other light scattering devices, turbidity, particle size determination, particle counter, etc.	Aggregation, precipitation, molecular weight determination
Other microcharacterization methods	Peptide mapping, peptide sequencing, amino acid analysis, mass spectrometry, other specific analyses for individual reactive groups	Identification of impurities and chemical degradation, analysis of complex proteins, e.g., antibody and glycoprotein

Evaluation of the Significance of Problems

As stated earlier, it would be ideal to have a pure protein in an absolutely stable formulation. In reality, however, scientists have to design formulation based on compromises that deal with several different potential problems. To make matters worse, the formulation needs to be recommended long before it is evaluated fully, because of typical aggressive timelines in the industry. In general, the formulation will have to be optimized based on assumptions and extrapolations of results obtained during a limited time. Therefore, it is important to utilize the given time efficiently, by collecting as much relevant information as possible for evaluating the significance of each problem.

Due to the marginal stability of proteins, it is possible to create rapidly a variety of degradation products during accelerated stability testing. However, not

all the degradation products that are observed will be significant under normal handling, shipping and storage conditions. Furthermore, the rank order of different degradation processes under accelerated stability testing will NOT be the same under practical handling conditions, because each reaction has a different temperature dependency, i.e., reaction order and activation energy. Another important thing to keep in mind when evaluating different degradation processes is the contribution to the pharmaceutical quality of the product. Critical degradation products should be designated not on the quantity obtained during accelerated stability studies, but on a comprehensive understanding of their contributions to the quality of the product.

Quantitative Assessment. Usually, the rate of each degradation reaction during real storage conditions (e.g., at 4–8°C) should be very slow. In order to predict the rate under real storage conditions, reaction rates obtained under accelerated stability conditions can be extrapolated by using the Arrhenius equation.

Predicting the correct reaction rate requires a proper understanding of the reaction order, because the amount of the degradation product does not linearly increase over time unless the reaction follows zero-order kinetics. One way to determine the reaction order is to calculate the linearity between the concentration of residual native protein and time. The reaction order can be calculated from:

$$dC/dt = kC^n \tag{1}$$

where, C is the protein concentration, t is the time, k is the reaction rate constant, n is the reaction order. For a zero order reaction $n = 0$ and $C_0 - C = k \cdot t$. For a first order reaction $n = 1$ and $\log C_0 - \log C = k \cdot t$. For a second order reaction $n = 2$ and $1/C - 1/C_0 = k \cdot t$. For each reaction order a characteristic transformation of concentration will show a linear relationship with time, e.g., $\log C$ will show a linear relationship with time for a first order reaction, whereas $1/C_0$ will be linear versus time for second order reactions.

After obtaining the reaction rate constants for different temperatures, the activation energy can be found by using with the Arrhenius equation.

$$k = A \cdot e^{(-Ea/RT)} \tag{2}$$

The activation energy is obtained by plotting (log k) vs (1/T) and determining the slope of the plot. Using the activation energy, the reaction rate constant for real storage condition, e.g., 2–8°C for refrigerated storage, can be estimated by extrapolation.

Care must be taken when extrapolating the rate constants because there are numerous cases when the Arrhenius relationship does not apply. The Arrhenius reaction applies only to irreversible reactions where the product is accumulated as a single quantifiable species. If the degradation product is the result of serial

reactions, the reaction order and rate constant will be determined only by the rate-limiting reaction at the testing condition. If the rate-limiting reaction changes or another significant variable is introduced at the extrapolated condition, then the extrapolated rate constant will be in error. Such complications routinely can be found in various degradation pathways that are affected by temperature-sensitive reactions such as structural changes, pH changes, by physical changes such as the glass transition of an amorphous phase in a lyophilized formulation and by changes in reactants like dissolved oxygen. For example, proteins have relatively high activation energies for structural changes. Thus, many reactions that are dependent on a major perturbation of the native protein structure tend to cause substantial damage under accelerated storage conditions, e.g., higher temperature. However, many of these reactions are not necessarily major problems when the product is stored at 2–8°C where the protein maintains its native conformation. In contrast, degradation reactions with lower activation energies, which might not be coupled to protein conformational changes (e.g., oxidation of surface methionine residues), tend to be much more problematic in the development of protein formulations.

Results from stresses (e.g., agitation) other than heat imposed in accelerated stability studies potentially could be extrapolated in a similar way to storage and actual handing conditions. The major challenge is the ability to assess quantitatively the magnitude of the stress so that the stress-stability relationship can be established. To date there are not published guidelines for such quantitation.

Qualitative Assessment. Not all of the degradation products are equivalent in terms of their contribution to the pharmaceutical quality of the protein product. Therefore, a qualitative assessment of each degradation product is important when weighing their significance. Regardless of their quantity, some degradation products are generally less acceptable than others. If the degradation product comprises the safety of the product, then it should be considered less acceptable. For example, even at levels of a few percent or less of the total protein population, non-native aggregates can cause adverse reactions in patients such as immune responses and even anaphylactic shock. Also, if the degradation reaction results in the inactivation of protein, it needs to be considered more important than other degradation reactions that do not affect the activity. For example, certain chemical changes (e.g., deamidation) may not alter the activity of a given product, whereas other reactions (e.g., oxidation) may render that product inactive. The relative impact of each degradation product on safety and efficacy cannot be predicted and must be determined for each protein therapeutic.

Information useful for the qualitative evaluation of degradation products includes the identity, clinical and preclinical experiences with the degradation product, biological activity, stability and potential side effects. Regulatory documents also provide clear guidance about what assessment is necessary for protein degradation products (Appendix, Regulatory Documents 2,3). The criteria for

identification, reporting and qualification of degradation products are set up based on the total patient exposure and percentage of the degradation products (Appendix, Regulatory Document 3). When certain degradation products cannot be prevented from forming in the formulation, their inclusion in the product must be qualified, which may require that additional information on safety and efficacy be obtained as recommended in the regulatory guidelines (Appendix, Regulatory Documents 2,3). Obtaining this information requires a significant amount of additional work, which may include clinical studies.

FORMULATION DEVELOPMENT

As discussed above, the critical parameters affecting the pharmaceutical quality of a protein therapeutic are defined during the preformulation studies. In formulation development, the effects of formulation variables on the defined critical parameters are examined to optimize protein stability. Which variables are most important depends of the formulation type chosen. For example, resistance to agitation and/or accidental freezing is a critical property for an aqueous formulation, which would not be a concern for a lyophilized formulation. Similarly, choosing excipients that provide a glassy matrix to stabilize the protein is only a concern for dried formulations.

Formulation Options for Protein Pharmaceuticals

Different types of formulations need to be developed based on clinical needs, patient compliance, delivery method, stability of the drug, storage and distribution, and market competitiveness. Having a clear plan about what type of formulation is desired will allow one to design better formulation studies. Liquid formulations have been generally preferred due to the convenience of manufacturing and use. However, protein drugs may not be stable enough to be handled as a liquid formulation. Dried formulations (e.g., lyophilized) or suspension formulations (e.g., insulin zinc suspension) have been successfully used to overcome stability problems. In addition, specific applications and delivery may demand the appropriate type of formulation, e.g., a spray-dried powder for pulmonary delivery. As details of the stability issues are discussed in other chapters in this book, only practical issues regarding these different types of formulations will be summarized here.

Liquid Formulations. It is important to understand that developing conditions to keep proteins stable in a liquid form for a pharmaceutically relevant

storage time (e.g., two years) is not a simple task. For most proteins, including relatively stable ones, at least some degradation should be expected even during refrigerated storage. Unless there is strong evidence supporting that the protein remains stable for two years and the evidence is supported by a broad spectrum of analytical methods, one needs to be very careful about the final decision to market a liquid formulation. Physical or chemical changes that have low activation energy should be monitored especially carefully under real storage conditions. If there is a degradation product that can significantly affect the pharmaceutical quality at its minimum concentrations (e.g., formation of particulates) great care must be taken to assure that such a product does reach unacceptable levels during real-time storage. If long-term storage studies are not implemented until late in the product development process, there is a risk that problems due to unacceptable levels of degradation products will not be discovered in time to test alternative formulations. In addition to stability during storage, temporary exposure to temperatures outside the recommended conditions should also be tested because it can affect the quality of the drug. Also, results obtained from multiple freeze-thawing cycles will be useful to determine if the formulation can accommodate unexpected freezing during distribution and storage. Likewise, sensitivity to agitation or surface denaturation needs to be understood to support formulation choices as well as shipping and handling guidelines. For formulations containing low protein concentration, special attention is required to avoid impurity-related stability issues (e.g., oxidation fostered by metal contaminants in excipients).

Solid Dosage Forms. Recent improvements in devices designed for easier use of lyophilized products, e.g., dual chamber syringes, dual chamber cartridges and convenient reconstitution devices, have helped pharmaceutical industries to develop lyophilized products without too many concerns surrounding patient compliance issues. Because lyophilized products have less stability-related issues and have a much greater potential tolerance for room-temperature storage, many biopharmaceutical industries consider the lyophilized formulation as a default option. In fact, lyophilization has been widely utilized to overcome various stability issues of labile proteins. However, it is important to note that lyophilization can present its own challenges, particularly in designing appropriate formulations and economic cycles. Detailed discussion about the rational design of stable lyophilized formulations is available in another chapter in this book.

In addition to the required stability, a successful lyophilized formulation should also have the desired physical properties of the dried powder, e.g., ruggedness of the cake and the maintenance of the physical states for each of the ingredients. For example, crystallization of an initially amorphous excipient during storage can lead to unacceptable degradation of the protein product and loss of cake structure. Furthermore, optimal water content for protein stability should be studied and controlled during storage. It is preferable to define an acceptable

range of water contents to provide flexibility in the manufacturing process. To assure that the appropriate water content is maintain, the integrity of container/ packaging should be monitored in a high relative humidity environment.

The identity and volume of the reconstitution medium should also be clearly defined, because the use of injectable fluids other than the recommended one may compromise the quality of the product (e.g., solution tonicity or protein stability). Reconstitution should be convenient and rapid, and the stability of the reconstituted solution during handling and delivery needs to be demonstrated.

Only recently have spray-dried formulations become commonly used with the advent of novel protein delivery technologies. For example, spray-dried powders have been useful for developing products that require uniform particle size (e.g., pulmonary inhalation for systemic delivery). Similar issues to the lyophilized formulation apply to the spray-dried formulation, and the details of development of spray-dried formulations are presented in another chapter in this book. In addition to protein stability, physical properties pertinent to powder processing and powder stability (e.g., flowablity, hygroscopicity, agglomeration, density and crystallization of excipients) need to be well characterized.

Single Dose and Multidose Forms. Most protein pharmaceuticals are marketed as single dose forms. However, multidose formulations are useful when the dose needs to be split (e.g., dose titration or dose combination). Multidose formulations are distinguished by the presence of preservatives in the formulation, which prevent microbial contamination and/or growth during multiple disruptions of container closure integrity. In general, the addition of preservative(s), regardless of the preservative used, significantly changes the stability profiles of proteins (Maa and Hsu, 1996; Fransson et al., 1997; Lam et al., 1997). In some extreme cases, visible precipitation and aggregation have been reported. Therefore, the effect of various preservatives on the stability of protein should be carefully examined. Other experiments required to qualify a multidose formulations include the preservative effectiveness test and the stopper self-sealing test. Detailed procedures and specification are available from the USP (U.S. Pharmacopeia), the Ph. Eur. (European Pharmacopeia) and the JP (Japan Pharmacopeia).

Desired properties of the ideal preservative include: effectiveness at low concentration against a wide variety of organisms; chemical stability; solubility; compatibility with the protein drug, excipients and auxiliary agents; free from objectionable odor, taste, color and stinging; and non-toxic and non-sensitizing both internally and externally at the required concentration. Also, it must not absorb, penetrate, or interact with containers or closures (Thompson, 1998). For further details on preservatives, readers are referred to Regulatory Document 4 in the Appendix and Thompson (1988). Examples of typical preservatives used for parenteral protein pharmaceuticals are benzyl alcohol, phenol, *m*-cresol and benzalkonium chloride.

Typical Protein Stability Problems: Causes and Solutions

Table 6 summarizes typical stability problems observed during protein formulation development and potential methods to solve each problem. The list does not represent the complexity of multiple problems that can be experienced with a given protein. Formulation research should be designed to handle each protein based on its unique stability profile.

Optimization of Formulation Variables

Overview of the Process. The optimization of formulation variables for product stability is the most critical part of protein formulation development. Various formulation excipients and buffers (Table 7) can be utilized and must, therefore, be chosen to maximize the pharmaceutical quality of the product (i.e., stability and activity) without introducing significant side effects. Among the listed formulation variables, the most powerful one is pH. Problems associated with the physical properties of a protein, e.g., precipitation due to solubility and/or stability, are generally very difficult to manage by other formulation means. Optimization of pH is a simple but very useful solution for such problems (Kolvenbach et al., 1997). Most chemical reactions also are affected by pH, e.g.,

Table 6.
Typical Stability Problems Observed in Protein Pharmaceuticals

Problems	Potential causes	Possible solutions
Non-covalent aggregation	Solubility, structural changes, heat, shear, surface, denaturants, impurities	pH, ionic additives, amino acids, surfactants, protein concentration, raw material purity
Covalent aggregation	Disulfide scrambling, other unknown mechanisms	pH, inhibit non-covalent aggregation
Deamidation	pH < 5.0 or pH > 6.0	pH optimization
Cyclic imide	pH around 5	pH optimization
Cleavages	Protease impurity, other unknown mechanisms	pH, product purity, inhibitors
Oxidation	Active oxygen species, free radicals, metals, light, impurity	Excipient purity, free-radical scavenger, active oxygen scavengers
Surface denaturation, adsorption	Low protein concentration, specific affinity, protein hydrophobicity	Surfactants, protein concentration, pH

Table 7.
Important Components of Protein Formulations

Formulation Variables	Desired attributes	Examples
pH	Provides good physical properties of protein, minimize degradations	
Stabilizer	Inhibit degradations, effective at low concentrations	Surfactants, sugars, salts, antioxidants
Solubilizer	Improve the solubility, effective at low concentrations	Salts, amino acids, surfactants
Buffer	Good buffering capacity, stable to temperature change, stable to freezing, good safety record	Phosphate, acetate, histidine, glutamate
Tonicity modifier; bulking agent	Inert, good safety record	Sodium chloride, sorbitol, mannitol, glycine

deamidation, cyclic imide formation, disulfide scrambling, peptide bond cleavage, and oxidation (see reviews listed above). Other functional excipients should be also carefully evaluated for the benefit of the product (e.g., use of sucrose to stabilize protein during lyophilization and storage in the dried solid).

In addition to their intended use, excipient candidates should be also qualified as appropriate pharmaceutical ingredients. Generally, it is preferred to select excipients that have been used in marketed products with a relevant route of delivery. Further, it is preferable if these excipients have been used with similar frequency of dosing, history of chronic use and similar patient populations. Otherwise, the approval and safety of the excipients need to be carefully examined. If the excipient is considered safe with a solid scientific basis or has a proven clinical safety record, it can be considered equivalent to approved excipients. The list of excipients used for parenteral pharmaceuticals is available in the literature (Powell et al., 1998; Nema et al., 1997; Appendix Regulatory Document 5). When it is necessary to introduce other excipients with minimum safety records, a significant risk associated with the excipients will be added to the product development and additional pre-clinical and clinical studies may be needed.

Another important requirement in qualifying an excipient is the purity of the raw material. Depending on the historical use as a pharmaceutical ingredient, several different pharmaceutical grades are available, e.g., USP (U.S. Pharmacopeia), Ph. Eur. (European Pharmacopeia) and JP (Japan Pharmacopeia). These pharmaceutical grade materials should be considered as a primary resource, but the quality provided may not be good enough for specific product development. For example, significant stability problems can be found with some impurities

even at concentrations below their specification, e.g., metal ions, peroxides, proteases and reducing sugars. These problems are more prominent in low protein concentration products due to a high impurity-protein ratio, although problems like visible precipitation of the protein may be independent of protein concentration. If adjustment in the existing specification is necessary, it is critical to look into the availability of GMP quality raw materials with modified specifications as early as possible, once the potential problem is identified.

The use of excipients derived from animals (e.g., Tweens) or humans (e.g., human serum albumin) should be avoided if possible due to the risk associated with transmissible diseases like bovine spongiform encephalopathy, Creutzfeldt-Jakob Disease, hepatitis virus and HIV. Numerous regulatory guidelines have been issued to discourage the use of animal/human-derived excipients (Appendix Regulatory Documents 6,7,8). When animal-derived excipients have to be included in the product, the manufacturer will need to demonstrate that their selection is fully justified.

Design of the Study. A design for the formulation optimization study should be in place before commencing the work. A typical study protocol will include the following information:

- Study title
- Study objective
- Source and quality of drug substance and excipients
- Material preparation
- Formulation matrix
  - Formulation variables
  - Protein concentrations or bracket
- Analytical methods
- Storage conditions (temperature, light, humidity)
- Additional sample handling conditions (temporary exposure to stresses, container orientation, etc.)
- Sampling schedule and expected duration of the study
- Plan for data analysis and report

The study can be more efficiently designed by utilizing experimental design software packages, which will help to minimize the resources required for sample preparation, analyses, and data analysis.

Necessary Studies for Formulation Development

Storage Stability Study. Documenting that the formulation will keep the protein stable until the desired expiry can be the most time-consuming part of

formulation development. The expiry requirements are determined by distribution not regulatory requirements. One year is probably too short for effective manufacturing and distribution through normal channels. In general, a shelf life of 18 month is considered acceptable for commercialization. Results obtained from accelerated stability studies are useful for predicting potential degradation products and appropriate analytical methods, but whatever the actual shelf life, it must be supported by sufficient real-time storage data to obtain regulatory approval. Thus, it is important to establish a final formulation and start the real-time storage studies as early as possible during product development.

Process Development. Formulations that can be prepared on a small scale without experiencing any problems may encounter significant problems during the scale-up of the process. For example, mixing solutions in a large stainless steel tank, pumping solutions through stainless steel tubing, filtration and filling through a high-speed filling machine can introduce unexpected stresses to the protein. An increase in the formation of particulates, along with a loss of proteins due to surface adsorption and aggregation, has routinely been observed. It is important to expose the formulation to equivalent stresses and make sure that no formulation adjustment is necessary to accommodate the manufacturing processes. Again, this testing should be done as early in the development process as possible.

Transportation, Handling and Delivery Study. Unexpected environmental changes can be encountered during the distribution and handling of products (e.g., accidental freezing, exposure to temperatures different from the recommended conditions, vigorous agitation, etc). It is critical to develop the formulation with these stresses in mind because they can compromise the quality of the product.

Also, during administration to the patient, proteins can be exposed to different types of stresses introduced by the device and the routes of delivery. Examples include incompatibility with the delivery device (e.g., protein aggregation induced by exposure to tubing surfaces) and/or concomitant medication (e.g., protein aggregation induced by co-administered antibiotics).

Preclinical and Clinical Studies. Results documenting the maintenance of the biophysical and biochemical properties of the protein are essential for a final formulation decision. Before finalizing the formulation, it is also important to confirm that it does not affect critical *in vivo* biological properties of the protein (e.g., activity, pharmacokinetic profile, and toxicity profile). Maintenance of a protein's biophysical properties can be examined using various structural analyses (e.g., circular dichroism, fluorescence and infrared spectroscopies, etc.). It is possible to determine the biochemical equivalence of the protein pharmaceutical by *in vitro* activity and/or preclinical *in vivo* bioassays. Results supporting the toxicity profile of the formulation can be generated by both preclinical and clinical studies.

Strategies to Overcome Difficult Formulation Problems

Occasionally, problems are encountered that are difficult to overcome with conventional formulation approaches. It is possible to conduct additional studies to confirm that the problem is pharmaceutically acceptable. On the other hand, unique formulation approaches can be introduced to address specific problems. Examples of this approach are provided below.

Qualification of Degradation Products. If decreasing the amount of degradation product below the specified threshold is not feasible, then the degradation product can be defined as a drug substance by demonstrating that it does not affect the pharmaceutical quality of the drug product, i.e., safety and efficacy (Appendix, Regulatory Document 1). If there is not sufficient information available, additional qualification studies recommended in the regulatory guidance can be carried out (see the discussion above). The experience of having these degradation products in the materials used for clinical studies can sometimes be very useful because the results obtained can provide useful insight into the clinical implication of the degradation products.

Site-directed Mutagenesis to Improve Properties. Some problems related to the intrinsic properties of a protein cannot be overcome unless a change in the sequence is introduced. After careful research is carried out to identify the problematic region or residue, the protein can be engineered for better physical and/or chemical properties. For serious problems like precipitation due to insolubility or poor stability, changes in protein sequence have been proven effective for improving physical properties (Murby et al., 1995; Roig and Kennedy, 1995).

Chemical Modifications. The physical properties of proteins can be improved by modifying problematic amino acid side chains with small compounds or large polymers (e.g., attachment of polyethylene glycol) (Fagain, 1995; Guerra et al., 1998; Francis et al., 1998). In addition, there are other desirable improvements that can be achieved by the conjugation chemistry (e.g., enhanced pharmacokinetic profiles, reduced immunogenecity, enhanced adsorption, etc.).

Unconventional Dosage Forms. Some protein stability problems can be resolved by introducing novel approaches in the formulation. Examples include suspension formulations (Defelippis et al., 1998), microencapsulation with cyclodextrin (Brewster et al., 1991), suspension of dry-powder in non-aqueous vehicle (Knepp et al., 1998), and use of non-aqueous vehicles with hydrophobic ion-pairing (Manning et al., 1995).

FORMULATION IN COMMERCIAL PRODUCT DEVELOPMENT

Critical Formulation Decisions During Pharmaceutical Development

A brief summary of the important phases of a commercial product development is shown in Figure 1. Ideally, a stable formulation would be available during the early discovery research period to ensure that the protein is in its active and stable form during critical feasibility studies. However, development of a stable formulation for each drug candidate is not practically possible because such an approach would take too much time and too many resources. Generally, formulation development starts after the decision is made to start clinical trials. A

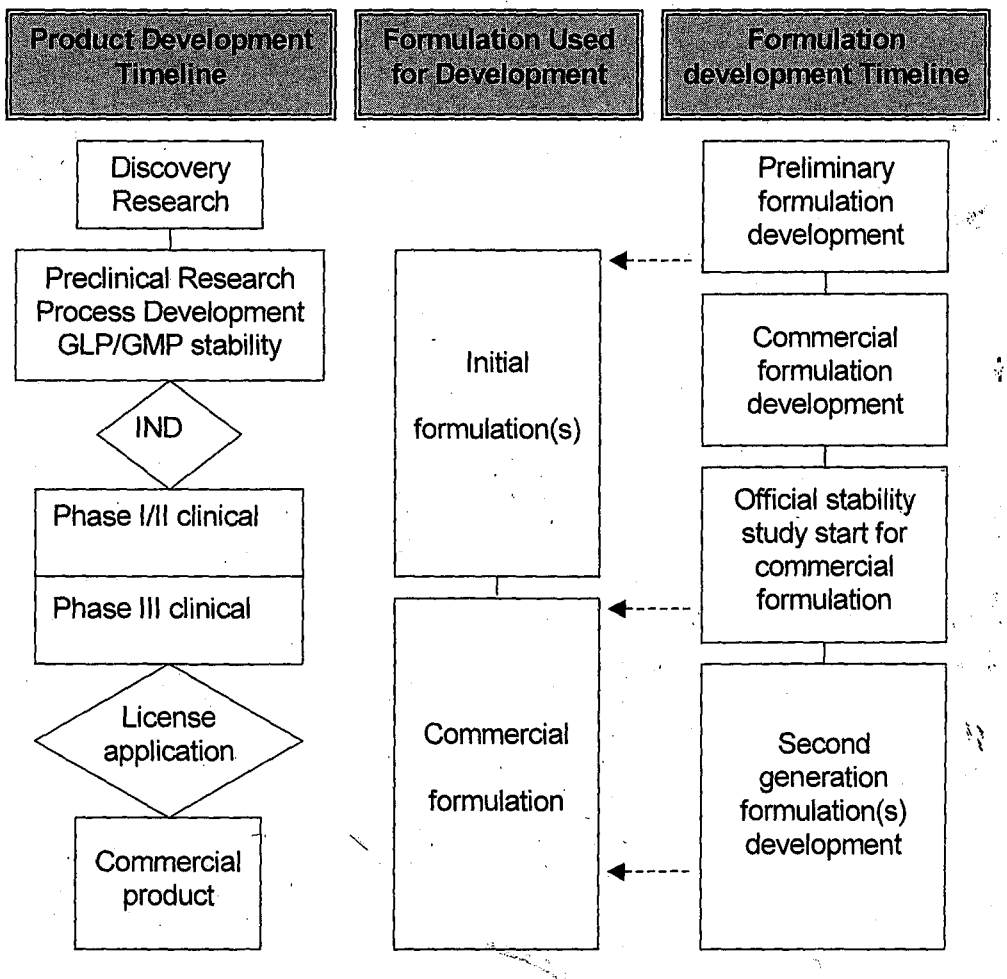

Figure 1. Diagram showing commercial formulation development process.

reliable formulation is required to support various preclinical and clinical studies. The formulation can be further improved later to satisfy the clinical, marketing, and regulatory needs. Although formulation development does not necessarily appear rate-limiting during this improvement period, it is important to understand that changing a formulation may require much more supporting work, including additional clinical trials, which can take years.

Formulation for Early Preclinical and Clinical Studies

When a promising protein drug candidate is identified from preliminary feasibility studies, a decision will be made to introduce the drug to clinical studies. In order to obtain regulatory approval to initiate the clinical trials, it is required to demonstrate safety, manufacturing capability, stability of the drug and reproducibility in studying the drug. A sufficiently stable formulation is necessary at this stage because it is important to maintain the quantity and quality of the protein for all research studies from which results will be used for registration of the product with regulatory agencies. Therefore, formulation development becomes a rate-limiting process at this early stage. Formulations can be stored frozen or lyophilized for this purpose. At this stage in product development, the shelf-life requirement is determined by the logistics of supplying drug for clinical trials.

Commercial Formulation

Commercially viable and market competitive formulations have some common features. Most of all, the formulation should maintain the safety and efficacy profile of the protein drug during all the handling and uses specified on the label. Since commercial distribution channels are not equipped for frozen products, shipping and storage at refrigerated temperature or higher are required. Sufficient shelf life needs to be determined under conditions to which the product will be exposed in the commercial distribution system. Various systematic studies need to be carried out to comply with regulatory requirements for registration. It takes 1–2 years to collect all of these results, so the commercial formulation is developed while preclinical studies or early clinical trials (with the preliminary formulation) are in progress. If possible, the commercial formulation should be introduced before the pivotal clinical trial because clinical experience is the most effective way to confirm the safety and efficacy aspects of the formulation. In addition, formulation changes after this point may introduce formidable challenges to the clinical program and to obtaining regulatory approval.

Regulatory Issues in Formulation Development

Incorporating regulatory guidelines into the formulation development is not only useful to develop high quality pharmaceutical formulations for maximum benefit to the patients, but also critical to prepare complete documents necessary for regulatory approval for commercialization of the drug. Readers who wish to obtain a comprehensive understanding of the guidelines are referred to the relevant documents published by regulatory agencies. In this section, a brief summary of the guidelines related to the formulation issues is provided.

Guidelines for Stability Studies. Comprehensive guidelines can be obtained from regulatory agencies (Appendix, Regulatory Documents 9–12) and review articles in the literature (Grimm, 1998; Kommanaboyina and Rhodes, 1999; Matthews, 1999). These guidelines generally cover the formal stability studies for bulk drug material, in-process samples and final formulated product. Although some issues may not be relevant for the earlier formulation development work, these guidelines provide key elements for designing stability studies. The guidelines provide information such as what types of experiments should be included in the study protocol, how to propose a stability-indicating profile, and what analytical results are needed to define the purity of the product and the molecular characteristics of degradation products. Another important piece of information provided in the guidelines is the definition of proper experimental conditions, e.g., definition of storage temperature, humidity, light strength, and accelerated and stressed conditions. The guidelines also provide the official protocols to evaluate the results obtained from stability studies.

Results Required to Apply for Regulatory License for a Drug Product. Detailed information regarding the formulation is presented at the Development Pharmaceutics section in the CMC section of regulatory applications (Appendix, Regulatory Docoments 13–16). All of the essential information required to apply for regulatory approval of protein formulations can be found in Note for Guidance on Development Pharmaceutics (Appendix Regulatory Document 17) and Development of Pharmaceutics for Biotechnological and Biological Products (Appendix, Regulatory Document 8). It is important to note that this is currently a European requirement although the international harmonization process may eventually introduce it to U.S. regulatory requirements. A brief summary of the important formulation information is shown in Table 8.

Results Required to File Formulation Amendments. A formulation change can introduce substantial potential adverse effects on the identity, strength, quality, purity or potency of the product as related to the safety or effectiveness of the product. For this reason, it is required that a supplement to the approved license application be submitted. This supplement should include a detailed description of the proposed change. It should also include methods and results for the studies performed to evaluate the effect of the change on the

Table 8.
Summary of Information Included in Regulatory Applications

	General information	Comments specific to proteins
Active substance (protein)	Compatibility with excipients and other combined products, and physicochemical characteristics	Structural elements responsible for the biological activity; good coverage of degradations occurring during storage, manufacturing, and delivery.
Excipients	Function of each excipients, justification for their inclusion, and compatibility with other excipients, choice of quality	
Formulated products	Overage, physicochemical parameters, components with appropriate results supporting intended purpose; compatibility with diluent, device, and other drugs in contact before delivery; critical physical properties	Stability of structure in terms of biological activity; formulation optimization for both manufacturing process and stability
Packaging material	Integrity of container and closure during storage, reconstitution, admixture, dilution; sorption to container, leaching, and dose reproducibility	Adsorption, denaturation at the interface, and aggregation of the surface-denatured protein; reconstitution of dry-powder formulation
Manufacturing process	Manufacturing process for the preparation of formulation and its justification, appropriate method of sterilization and justification	Results to support the quality and stability of the protein during the manufacturing process; membrane filtration under aseptic conditions sufficient

product's identity, strength, quality, purity, and potency of the product, as related to the product's safety or effectiveness (Appendix, Regulatory Documents 18–20). When the degradation profile is changed qualitatively or quantitatively, it is recommended to follow the impurity-related guidelines discussed above (Appendix, Regulatory Documents 2,3). The manufacturer must obtain approval of the supplement by FDA prior to distribution of the product made using the change. In general, the following studies (Table 9) can be carried out to confirm

Table 9.
Studies Needed to Support Change in Formulation

Research requirements	Supporting results
Purity	Stability, compatibility, Structural analyses
Potency	*In vitro/in vivo* bioassays, preclinical and/or clinical pharmacokinetic comparability , clinical efficacy
Safety	Preclinical safety, clinical safety

that the change in the formulation will not affect the safety and effectiveness of the product. It is recommended to consult the regulatory representative to find out how much additional information may be needed for the approval of the changed formulation.

APPENDIX: LIST OF REGULATORY DOCUMENTS

1. International Conference on Harmonization: Guidance on specifications: Test procedures and acceptance criteria for Biotechnological/Biological Products. Federal Register: August 18, Volume 64, Number 159, pp. 44928–44935 (1999).
2. International Conference on Harmonization: Impurities in New Drug Products. FDA Q3B (11/97).
3. Guidance for Industry. ANDAs: Impurities in Drug Products. Draft guidance. FDA (12/98).
4. Note for Guidance on Inclusion of Antioxidants and Antimicrobial Preservatives in Medicinal Products (CPMP/CVMP/QWP/115/95) EMEA (7/97).
5. Inactive ingredient guide: inactive ingredients for currently marketed drug products. (1996) FOI Services, Inc. Rockville, MD.
6. Note for guidance on minimizing the risk of transmitting animal spongiform encephalopathy agents via medicinal products. EMEA (4/99).
7. Note for guidance on plasma-derived medicinal products. EMEA (7/98).
8. Development Pharmaceutics for Biotechnological and Biological Products. Annex to Note for Guidance on Development Pharmaceutics (CPMP/QWP/155/96). EMEA (10/1999).
9. International Conference on Harmonization: Stability testing of new drug substances and products. Federal Register, Sept. 22, Volume 59, Number 183, pp. 48754–48759 (1994).
10. International Conference on Harmonization: Final guideline on stability testing of biotechnological/biological products. Federal Register, July 10, Volume 61, Number133, pp. 36466–36469 (1996).
11. Guideline for Industry: Stability testing for drug substances and drug products: draft guidances. FDA, (6/98).
12. International Conference on Harmonization: Guidelines for the photostability testing of new drug substances and products. Federal Register, May 16, Volume 62, Number. 95, pp. 27115–2712 (1997).
13. Guideline for Submitting Documentation for the Stability of Human Drugs and Biologics FDA. (2/87).
14. Guidance for Industry. For the Submission of Chemistry, Manufacturing and Controls and Establishment Description Information for Human Plasma-

Derived Biological Products, Animal Plasma or Serum-Derived Products. FDA (2/99).
15. Guidance for Industry. INDs for Phase 2 and 3 Studies of Drugs, Including Specified Therapeutic Biotechnology-Derived Products Chemistry, Manufacturing, and Controls Content and Format (Draft guidance) FDA (2/99).
16. Content and Format of Investigational New Drug Applications (INDs) for Phase 1 Studies of Drugs, Including Well-Characterized, Therapeutic, Biotechnology-Derived Products, FDA (11/95).
17. Note for Guidance on Development of Pharmaceutics (CPMP/BWP/328/99). EMEA (01/1998).
18. Demonstration of Comparability of Human Biological Products, Including Therapeutic Biotechnology-Derived Products, April, 1996.
19. Guidance for Industry: Changes to an Approved Application. For Specified Biotechnology and Specified Synthetic Biological Products, 21 CFR 601.12, 314.70; July 24, 1997, Vol 62. No. 142.
20. Guidance for Industry: Changes to an Approved Application: Specified Biotechnology and Specified Synthetic Biological Products; July 1997.

REFERENCES

Ahern, T.J. and Manning, M.C., 1992a. Stability of protein pharmaceuticals, Part A: Chemical and physical pathways of protein degradation. *Pharm. Biotech. Ser.* Volume 2. Plenum Press, N.Y.

Ahern, T.J. and Manning, M.C., 1992b. Stability of protein pharmaceuticals, Part B: In vivo pathways of degradation and strategies for protein stabilization. *Pharm. Biotech. Ser.* Volume 3. Plenum Press, N.Y.

Arakawa, T., Prestrelski, S., Kinney, W., and Carpenter, J.F., 1993. Factors affecting short-term and long-term stabilities of proteins. *Adv. Drug Delivery Rev.* 10:1.

Brewster, M.E., Hora, M.S., Simpkins, J.W., and Bodor, N., 1991. Use of 2-hydroxypropyl-beta-cyclodextrin as a solubilizing and stabilizing excipient for protein drugs. *Pharm. Res.* 8:792.

Cleland, J.L., Powell, M.F., and Shire, S.J., 1993. The development of stable protein formulations—A close look at protein aggregation, deamidation and oxidation. *Crit. Rev. Ther. Drug* 11:60.

Chen, T., 1992. Formulation concerns of protein drugs. *Drug Dev. Ind. Pharmacy*, 18:1311.

Defelippis, M.R., Bakaysa, D.L., Bell, M.A., Heady, M.A., Li, S., Pye, S., Youngman, K.M., Radzuik, J., and Frank, B.H., 1998. Preparation and characterization of a cocrystalline suspension of [Lys(B28),Pro(B29)] human insulin analogue. *J. Pharm. Sci.* 87:170.

Fagain, C.O., 1995. Understanding and increasing protein stability. *Biochimica et Biophysica Acta.* 1252:1.

Francis, G.E., Fisher, D., Delgado, C., Malik, F., Gardiner, A., and Neale, D., 1998. PEGylation of cytokines and other therapeutic proteins and peptides: the importance of biological optimisation of coupling techniques *Int. J. Hematology.* 68:1.

Fransson, J., Hallen, D., and Florin-Robertsson, E., 1997. Solvent effects on the solubility and physical stability of human Insulin-like Growth Factor I. *Pharm. Res.* 14:606.

Grimm, W., 1998. Extension of the international conference on harmonization tripatic guieline for stability testing of new drug substances and products to countries of climatic zones III and IV. *Drug Dev. Indust. Pharm.* 24:313.

Guerra, P.I., Acklin, C., Kosky, A.A., Davis, J.M., Treuheit, M.J., and Brems, D.N., 1998. PEGylation prevents the N-terminal degradation of megakaryocyte growth and development factor *Pharm. Res.* 15:1822.

Herron, J.N., Jiskoot, W., and Crommelin, D.J.A., 1995. Physical methods to characterize pharmaceutical proteins. *Pharm. Biotech. Ser.* Volume 7. Plenum Press, N.Y.

Jones, A.J.S., 1993. Analysis of polypeptides and proteins *Adv. Drug Del. Rev.* 10:29.

Knepp, V.M., Muchnik, A., Oldmark, S., and Kalashnikova, L., 1998. Stability of non-aqueous suspension formulations of plasma derived factor IX and recombinant human alpha interferon at elevated temperatures. *Pharm. Res.* 15:1090.

Kolvenbach, C.G., Narhi, L.O., Philo, J.S., Li, T., Zhang, M., and Arakawa, T., 1997. Granulocyte-colony stimulating factor maintains a thermally stable, compact, partially folded structure at pH 2 *J. Pept. Res.* 50:310.

Kommanaboyina, B. and Rhodes, C.T., 1999. Trends in stability testing with emphasis on stability during distribution and storage. *Drug Dev. Indust. Pharm.* 25:857.

Lam, X.M., Patapoff, T.W., and Nguyen, T.H., 1997. The effect of benzyl alcohol on recombinant human interferon-gamma *Pharm. Res.* 14:725.

Maa,Y.F. and Hsu, C.C., 1996. Aggregation of recombinant human growth hormone induced by phenolic compounds *Int. J. Pharm.* 140:155.

Manning, M.C., Matsuura, J.E., Kendrick, B.S., Meyer, J.D., Dormish, J.J., Vrkljan, M., Ruth, J.R., Carpenter, J.F., and Shefter, E., 1995. Approaches for increasing the solution stability of proteins *Biotech. Bioeng.* 48:506.

Manning, M.C., Patel, K., and Borchardt, R.T., 1989. Stability of protein pharmaceuticals. *Pharm. Res.* 6:903.

Matthews, B.R., 1999. Regulatory aspects of stability testing in Europe. *Drug Dev. Indust. Pharm.* 25:831.

Murby, M., Samuelsson, E., Nguyen, T.N., Mignard, L., Power, U., Binz, H., Uhlen, M., and Stahl, S., 1995. Hydrophobility engineering to increase solubility and stability of a recombinant protein from respiratory syncytial virus. *Eur. J. Biochem.* 230:38.

Nema, S., Washkuhn, R.J., and Brendel, R.J., 1997. Excipients and their use in injectable products *PDA J. Pharm. Sci. Technol.* 51:166.

Note for Guidance on Inclusion of Antioxidants and Antimicrobial Preservatives in Medicinal Products, 1997. (CPMP/CVMP/QWP/115/95) EMEA (7/97).

Pearlman, R. and Wang, Y.J., 1996. Formulation, characterization, and stability of protein drugs: case histories. *Pharm. Biotech. Ser.* Volume 9. Plenum Press, N.Y.

Powell, M.F., Nguyen, T., and Baloian, L., 1998. Compendium of excipients for parenteral formulations. *PDA J. Pharm. Sci. Technol.* 52:238.

Reubsaet, J.L.E., Beijnen, J.H., Bult, A., Van-Maanen, R.J., Marchal, J.A.D., and Underberg, W.J.M., 1998. Analytical techniques used to study the degradation of proteins and peptides: chemical instability *J. Pharm. Biomed. Anal.* 17:955.

Roig, M.G. and Kennedy, J.F., 1995. Perspectives for biophysicochemical modifications of enzymes. *J. Biomaterials Sci. Polymer Ed.* 7:1.

Thompson, J.E., 1998. Practical Guide to Contemporary Pharmacy Practice. Lippincott Williams & Wilkins, Hagerstown, MD.

Volkin, D.B., Mach, H., and Middaugh, C.R., 1997. Degradative covalent reactions important to protein Stability. *Molec. Biotech.* 8:5.

Wang, Y.J. and Hanson, M.A., 1988. Parenteral formulations of proteins and peptides: stability and stabilizers. *J. Parent. Sci. Technol.* 42:SS4.

Wang, Y.J. and Pearlman, R., 1993. Stability and characterization of protein and peptide drugs: case histories. *Pharm. Biotech. Ser.* Volume 5. Plenum Press, N.Y.