

# Exploring the Impact of Hepatic Impairment on the Pharmacokinetics of New Molecular Entities: A Comprehensive Analysis of Labeling Information

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## Background

- Hepatic impairment (HI) has the potential to alter drug disposition, and therefore is often investigated during drug development to provide appropriate dosing regimen.
- Different approaches have been utilized to inform dosing in patients with HI:
  - Dedicated pharmacokinetic (PK) studies in participants with HI
  - Population PK analysis (popPK)
  - Prediction based on the extent of metabolism or route of administration.

## Objectives

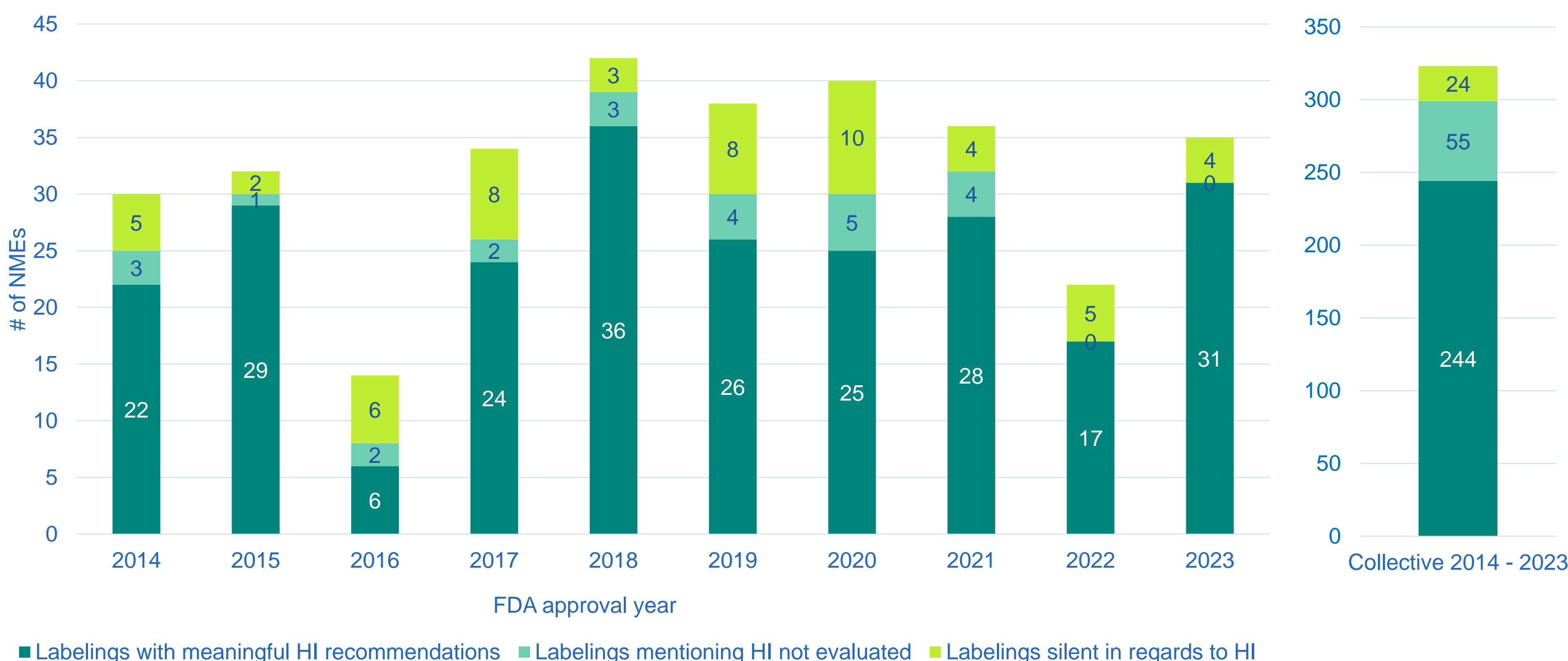
- Analyze HI labeling information of FDA-approved small molecules new molecular entities (NMEs) available upon approval.
- Characterize the current approaches used to inform dosing in patients with HI and the type of dosing recommendations.

Methods: FDA-approved NMEs between 2014 and 2023 were evaluated (n=323)



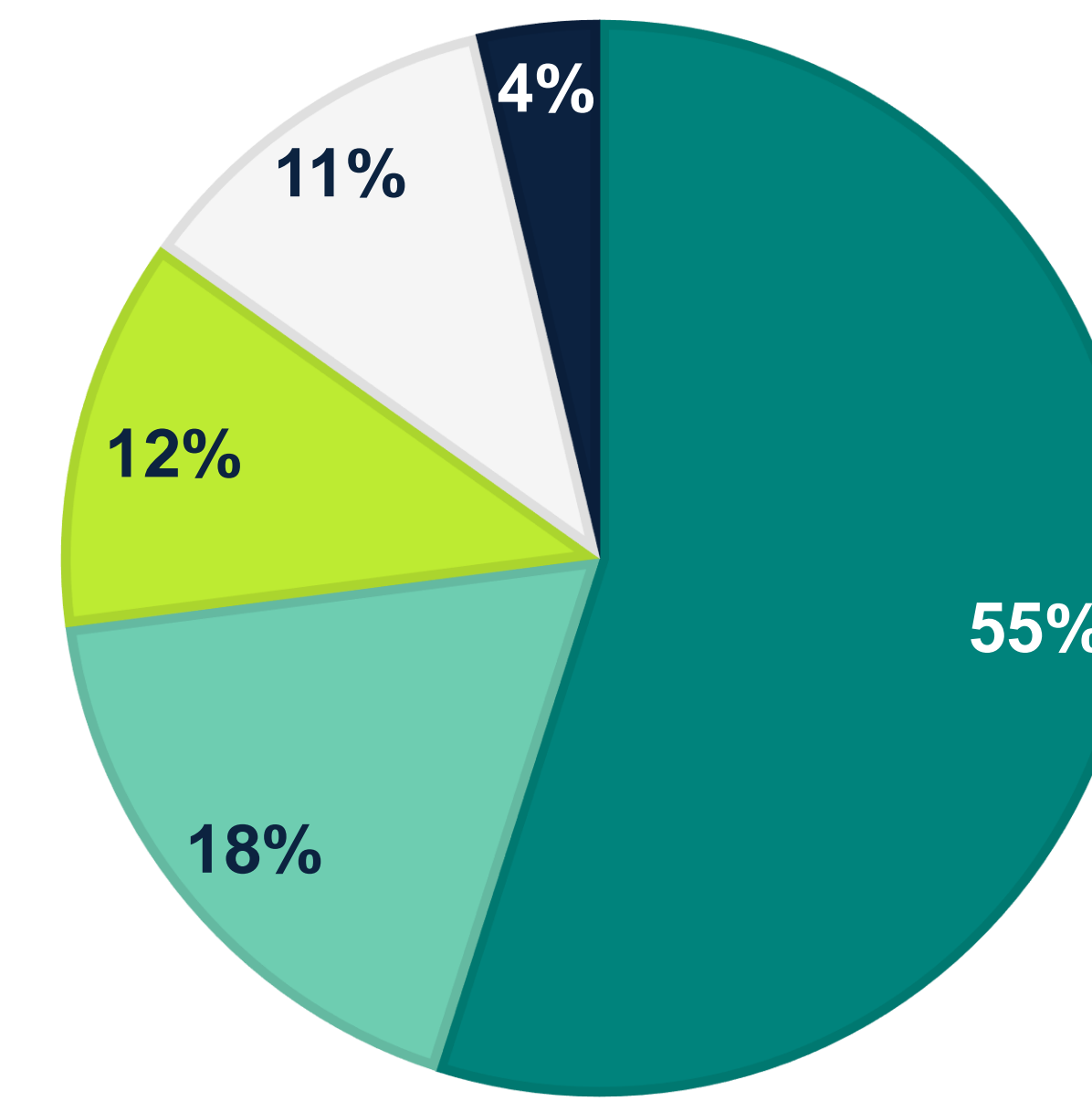
## Results

Figure 1: Number of FDA-approved NMEs with hepatic impairment language in the labeling between 2014 and 2023



## Results (continued)

Figure 2: Source to inform HI language in the labeling



■ Hepatic impairment study ■ PopPK ■ Prediction ■ Combination ■ Other

Figure 3: Percent of labelings with HI dosing recommendations according to HI category

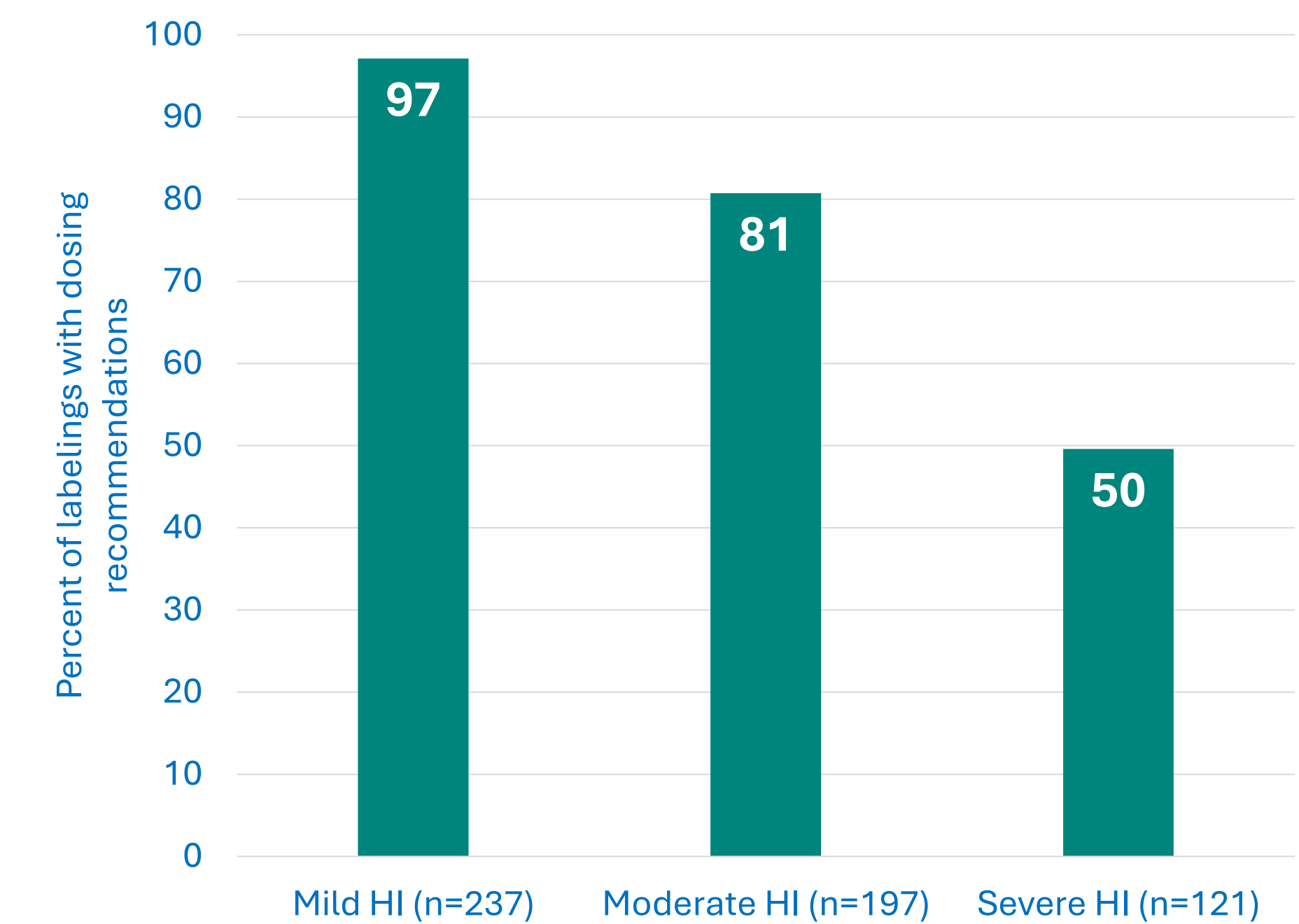
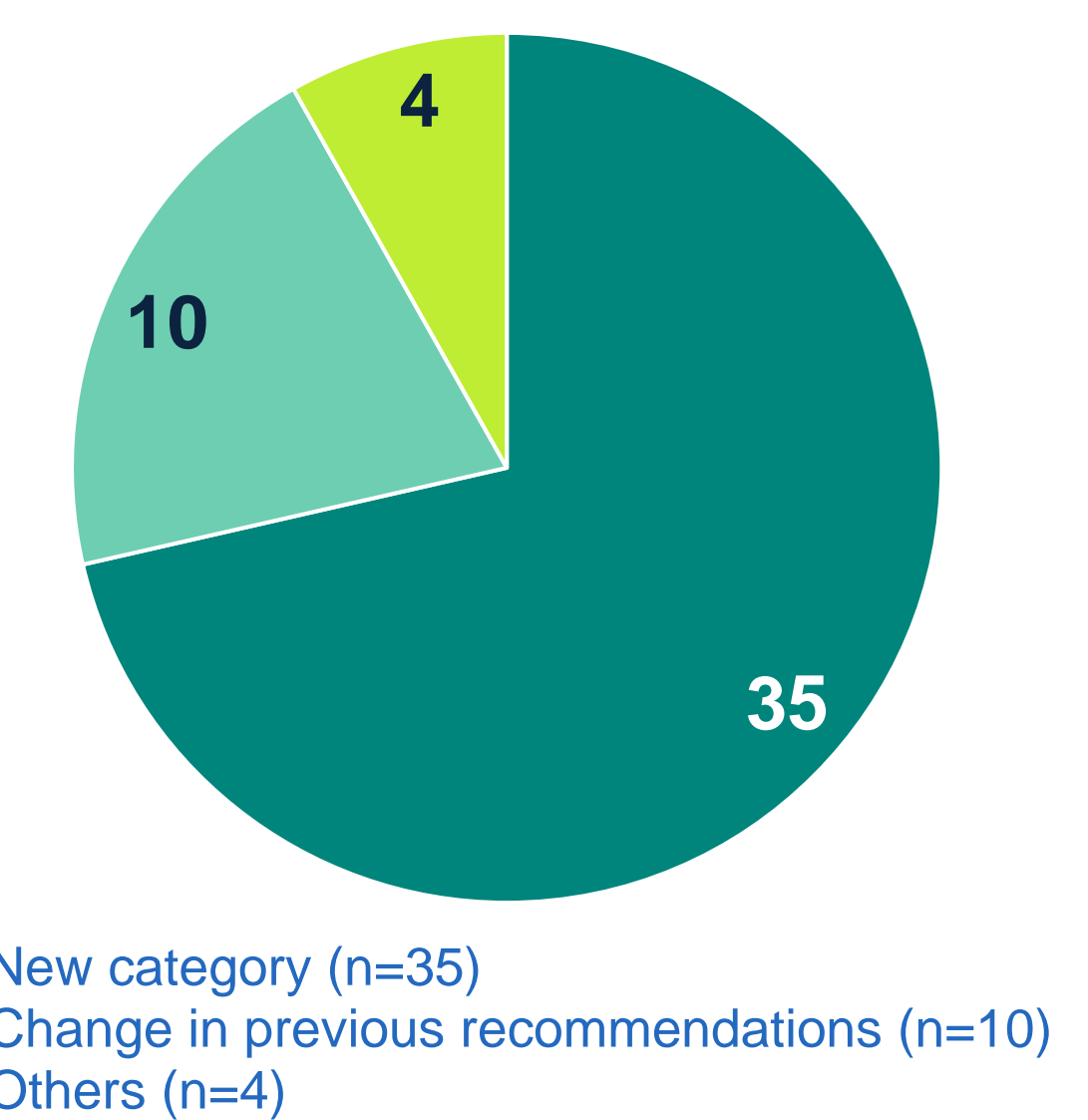


Table 1: Distribution of HI dosing recommendations amongst 128 labelings (data presented as %)

Dosing recommendations	Mild HI	Moderate HI	Severe HI
No dose adjustment (NDA)	82	47	16
Dose adjustment <sup>a</sup>	2	11	9
Monitor	0	0	0
Contraindication	1	2	3
Not recommended (NR)	0	5	7
Not studied (NS)	2	19	34
Combination <sup>b</sup>	8	11	28
NDA + others	4	3	2
NS + NR	1	3	20
Other	4	4	3

<sup>a</sup> Labeling refers to a required or suggested dose adjustment. <sup>b</sup> combination of two or more dosing recommendations.

48 labelings were updated



## Conclusions

- At the time of drug approval, the majority of NMEs provided dosing guidance for patients with HI; however, these recommendations were primarily available for mild HI and often suggested no dose adjustment.
- Gaps still exist in informing dosing recommendations for patients with moderate and severe HI.
- Phase 1 PK studies in patients with HI, popPK modeling, and prediction were the primary sources to inform dosing recommendations.
- PBPK had minimal contribution in informing the labeling (used in three cases in combination with another source to inform HI dosing).