M7 Q&A Support Document

Note: The following is an extract of the M7(R2) draft Guideline and is made available as a Support Document to the M7 Q&A question #7.4. The full M7(R2) draft Guideline will be made available for public consultation separately. Please refer to the ICH website for further information regarding the status of the M7(R2) draft Guideline.

Note 7   **Table 4**: Examples of clinical use scenarios with different treatment durations for applying acceptable intakes

Scenario[1]	Acceptable Intake (µg/day)
Treatment duration of ≤ 1 month: e.g., drugs used in emergency procedures (antidotes, anesthesia, acute ischemic stroke), actinic keratosis, treatment of lice	120
Treatment duration of > 1-12 months: e.g., anti-infective therapy with maximum up to 12 months treatment (HCV), parenteral nutrients, prophylactic flu drugs (~ 5 months), peptic ulcer, Assisted Reproductive Technology (ART), pre-term labor, preeclampsia, pre-surgical (hysterectomy) treatment, fracture healing (these are acute use but with long half-lives)	20
Treatment duration of >1-10 years: e.g., stage of disease with short life expectancy (severe Alzheimer's), non-genotoxic anticancer treatment being used in a patient population with longer term survival (breast cancer, chronic myelogenous leukemia), drugs specifically labeled for less than 10 years of use, drugs administered intermittently to treat acute recurring symptoms[2] (chronic Herpes, gout attacks, substance dependence such as smoking cessation), macular degeneration, ~~HIV[3]~~	10
Treatment duration of >10 years to lifetime: e.g., chronic use indications with high likelihood for lifetime use across broader age range (hypertension, dyslipidemia, asthma, Alzheimer's (except severe Alzheimer disease), hormone therapy (e.g., growth hormone, thyroid hormone, parathyroid hormone), lipodystrophy, schizophrenia, depression, psoriasis, atopic dermatitis, Chronic Obstructive Pulmonary Disease (COPD), cystic fibrosis, seasonal and perennial allergic rhinitis, HIV[3]	1.5

[1] This table shows general examples; each example should be examined on a case-by-case basis. For example, 10 µg/day may be acceptable in cases where the life expectancy of the patient may be limited e.g., severe Alzheimer's disease, even though the drug use could exceed 10 year duration.

[2] Intermittent use over a period >10 years but based on calculated cumulative dose it falls under the >1-10 year category.

[3] ~~HIV is considered a chronic indication but resistance develops to the drugs after 5-10 years and the therapy is changed to other HIV drugs.~~ Changed in M7(R2) from 1-10 years to lifetime because of clinical treatment advances. See Q&A.