

1 Resolution #43 (16) –2016 Annual Leadership Forum  
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3 TITLE: Expiration Dates on Epinephrine Auto-Injectors  
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5 SPONSORED BY: Section on Allergy/Immunology  
6 Section on Pediatric Pulmonology and Sleep Medicine  
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8 DATE: December 1, 2015  
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10 DISPOSITION: ADOPTED  
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12 Whereas, children with severe food and venom allergies are required to have  
13 two epinephrine auto-injectors on hand at all times; and  
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15 Whereas, many children are cared for in multiple locations, requiring several  
16 auto-injectors; and  
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18 Whereas, the cost of these auto-injectors has risen by 200% or more over the  
19 last four years, now exceeding \$500 in some locations; and  
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21 Whereas, these devices are marketed with an expiration date that is only  
22 slightly more, and sometimes less, than one year from the time of  
23 purchase, and schools require unexpired products, therefore be it  
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25 RESOLVED, that the Academy request the Food and Drug Administration  
26 (FDA) to explain why the expiration date for epinephrine auto-  
27 injectors such as EpiPen is so short (resulting in need to re-  
28 purchase the device repeatedly), and if it is due to lack of scientific  
29 data, ask that the FDA require the device companies to produce  
30 such data.  
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32 FISCAL NOTE:  
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34 REFER TO: 2016 Annual Leadership Forum  
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40 BACKGROUND  
41 INFORMATION: Background Information from the Author  
42 The FDA requires medication manufacturers to place a date on  
43 their products that indicate the medication is guaranteed to be  
44 effective and usable up to that date. There is usually very little  
45 information in the literature on whether these medications are  
46 effective or usable after that date. One exception, however, is the

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50 epinephrine auto-injector made by Mylan, where the research  
51 indicates that these devices retain some potency for up to 5 years  
52 after that date. This places an exceptional financial burden on  
53 families, who are forced to purchase new auto-injectors every year  
54 to satisfy school requirements. If these devices do retain some  
55 potency for a much longer period of time, why is the expiration  
56 period so short? Health care providers need to know the basis for  
57 these expiration dates, and have the FDA establish rules for  
58 transparent, realistic information on the shelf-life of this and other  
59 medications.  
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61 Background Information from the Committee on Drugs

62 At this time, the Committee on Drugs is not addressing the issue(s)  
63 raised in the resolved portion(s) of this resolution. However, the  
64 following is current information related to the topic:  
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66 Title 21 CFR Part 211 of the Code of Federal Regulations -  
67 Current Good Manufacturing Practice for Finished  
68 Pharmaceuticals (CGMPs), establish requirements concerning  
69 expiration dating and stability testing to assure the appropriateness  
70 of that date. Each drug product may be considered by FDA as a  
71 unique article because of, for instance, differences in (1) chemical  
72 and physical properties of the active ingredients or the excipients,  
73 (2) manufacturing procedures, (3) formulations, (4) containers and  
74 closures, (5) proposed storage conditions, and (6) the stability of  
75 the article to maintain its quality or purity through the use of  
76 antioxidants or preservatives. Because of the uniqueness of each  
77 drug product, FDA acknowledges that it is virtually impossible to  
78 provide one set of rules that can apply to all situations. CGMP  
79 provisions were purposely written broadly to allow for such unique  
80 differences.  
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82 **21 CFR 211.137 – Expiration Dating**

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84 (a) To assure that a drug product meets applicable standards of  
85 identity, strength, quality, and purity at the time of use, it shall bear  
86 an expiration date determined by appropriate stability testing  
87 described in 211.166.

88 (b) Expiration dates shall be related to any storage conditions  
89 stated on the labeling, as determined by stability studies described  
90 in 211.166.  
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96 (c) If the drug product is to be reconstituted at the time of  
97 dispensing, its labeling shall bear expiration information for both  
98 the reconstituted and unreconstituted drug products.

99 (d) Expiration dates shall appear on labeling in accordance with the  
100 requirements of 201.17 of this chapter.

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102 **21 CFR 211.166 – Stability Testing**

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104 (a) There shall be a written testing program designed to assess the  
105 stability characteristics of drug products. The results of such  
106 stability testing shall be used in determining appropriate storage  
107 conditions and expiration dates. The written program shall be  
108 followed and shall include:

- 109 (1) Sample size and test intervals based on statistical criteria for  
110 each attribute examined to assure valid estimates of stability;  
111 (2) Storage conditions for samples retained for testing;  
112 (3) Reliable, meaningful, and specific test methods;  
113 (4) Testing of the drug product in the same container-closure  
114 system as that in which the drug product is marketed;  
115 (5) Testing of drug products for reconstitution at the time of  
116 dispensing (as directed in the labeling) as well as after they are  
117 reconstituted.

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119 Additionally, an adequate number of batches of each drug product  
120 shall be tested to determine an appropriate expiration date and a  
121 record of such data shall be maintained. Accelerated studies,  
122 combined with basic stability information on the components, drug  
123 products, and container-closure system, may be used to support  
124 tentative expiration dates provided full shelf life studies are not  
125 available and are being conducted. Where data from accelerated  
126 studies are used to project a tentative expiration date that is beyond  
127 a date supported by actual shelf life studies, there must be stability  
128 studies conducted, including drug product testing at appropriate  
129 intervals, until the tentative expiration date is verified or the  
130 appropriate expiration date determined.

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132 **FDA Guidance**

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134 FDA has published several guidance documents related to stability  
135 testing. While guidance is not legally enforceable, it does provide  
136 the agency's current thinking on a topic and includes  
137 recommendations. For example, the objective of FDA's *QIA*  
138 *Stability Testing of New Drug Substances and Products* is to define

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what stability data for a new drug substance or drug product is sufficient for a registration application within the three regions of the European Union (EU), Japan, and the United States. The purpose of stability testing is to provide evidence on how the quality of a drug substance or drug product varies with time under the influence of a variety of environmental factors, such as temperature, humidity, and light, and to establish a retest period for the drug substance or a shelf life for the drug product and recommended storage conditions.

FDA has also published – *Guidance for Industry and Staff: Technical Considerations for Pen, Jet, and Related Injectors for Use with Drugs and Biological Products*. This guidance focuses on the scientific and technical considerations that a manufacturer should consider when developing a pen, jet, or related injector and submitting a marketing application. Injectors are subject to different regulatory requirements depending, for example, on their intended use, technological characteristics, proposed labeling, and packaging. Per the guidance:

Applications for injectors intended for use with a specific drug/biologic product or for a drug/biological class/family or product line should include stability data to establish the shelf-life and expiration dating of the relevant fully assembled injector-drug/biological product. For example, as appropriate, tests may assess the shelf life of the assembled product in storage conditions before use. They may also assess stability and expiration dating of the final to-be-marketed configuration under expected in-use conditions (e.g., rugged use, different environmental conditions). Where applicable, the tests should evaluate the product after reconstitution. They should assess any injectate that remains in the fluid path after injection; e.g., to determine if it degrades or contributes to the denaturing of the drug/biological product. As applicable, the in-use life testing should include data to demonstrate that the method of injection (e.g., rate, shear force, injection pressure) does not affect stability, safety, or effectiveness of the drug or biological product(s).

When conducting stability and expiration dating tests, the entire injector system should be tested; i.e., the drug/biological product in its direct container closure (cartridge) plus any surrounding injector materials and packaging. Bench testing for container

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188 closure and packaging ruggedness should include, but is not  
189 limited to, mechanical reliability (release specifications),  
190 accelerated testing, temperature cycling, temperature extremes,  
191 pressure changes, vibration, etc.

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193 Background Information from the Committee on Federal  
194 Government Affairs

195 Food and Drug Administration (FDA) regulations require drug  
196 products to carry expiration dates to assure that they meet  
197 “applicable standards of identity, strength, quality, and purity at the  
198 time of use” (21 CFR 211.137). Manufacturers are required to  
199 conduct stability testing of their products (under 21 CFR 211.166)  
200 and the results of such stability testing is required to “be used in  
201 determining appropriate storage conditions and expiration date.” In  
202 practice, expiration dates tend to be a date at which manufacturers  
203 still guarantee continued effectiveness of a drug product, but not  
204 necessarily the date at which a drug is no longer effective. FDA  
205 regulations do not prohibit use of drugs after their expiration date.  
206 The Committee on Federal Government Affairs has not at this time  
207 addressed the issue of epinephrine auto-injector expiration dates.

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209 RESPONSE

210 INFORMATION: \*Response from the Section on Allergy and Immunology

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