

# All Your Ingredients In One Magazine

# Ingredients

## SOUTH ASIA

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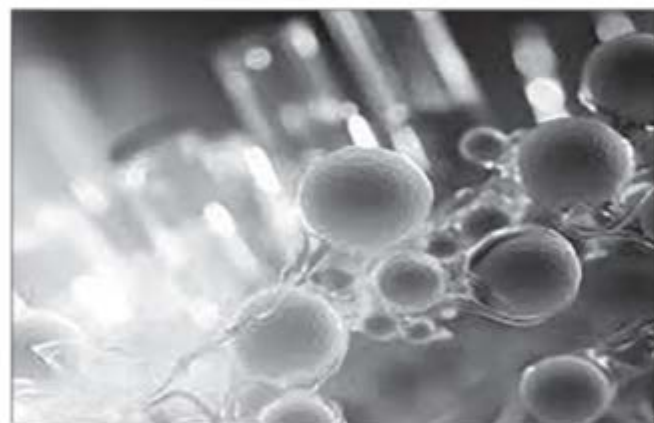
# India emerging significant force in HPAPI sphere

DR SANJAY AGRAWAL

In the ever-evolving landscape of pharmaceuticals, Highly Potent Active Pharmaceutical Ingredients (HPAPIs) are fast becoming the cornerstone of innovative therapies. These highly concentrated compounds can trigger powerful therapeutic responses at extraordinarily low doses, fueling groundbreaking treatment options for diseases such as cancer, hormone-related conditions, autoimmune disorders, and central nervous system diseases. As HPAPIs gain prominence, understanding their significance, challenges, and future prospects is crucial for industry stakeholders.

## What are HPAPIs?

HPAPIs are pharmaceutical ingredients characterised by their ability to exert profound pharmacological effects at very low concentrations—often with occupational exposure limits (OELs)



below 10 µg/m³. Their unique properties allow:

- Smaller, more effective doses
- Greater precision in targeting diseases
- Potential for fewer side-effects when carefully formulated

However, this same potency poses significant risks in handling and manufacturing, making robust safety and containment measures essential.

## Key Applications of HPAPIs

### 1. Oncology

HPAPIs find their most prominent application in oncology. Targeted cancer therapies—especially, Antibody Drug Conjugates (ADCs)—rely on HPAPIs as cytotoxic “payloads” that attack cancer cells while minimising harm to healthy tissues.

### 2. Hormonal Disorders

Steroidal HPAPIs like estrogen, progesterone, and testosterone are widely used in hormone replacement therapies, contraception, and treatments for hormonal imbalances.

### 3. Autoimmune Diseases

Medications for conditions such as rheumatoid arthritis and Crohn’s disease often incorporate immunosuppressive HPAPIs to modulate immune responses effectively.

### 4. Central Nervous System (CNS) Disorders

HPAPIs play a role in drugs designed to cross the blood-brain barrier, providing potent solutions for CNS conditions that require targeted intervention.

## Manufacturing HPAPIs: Balancing Precision and Protection

HPAPI manufacturing is markedly different from traditional API production:

- **Containment Requirements:** Operations must be conducted in advanced isolators, glove boxes, or closed RABS, ensuring minimal risk of cross-contamination and exposure.

- **Dedicated Facilities:** Regulatory bodies often mandate segregated production lines and facilities, especially in multi-purpose plants.

- **Advanced Equipment:** Specialised in-

frastructure is crucial, including precision air filtration (HEPA filters), pressure cascading, and continuous real-time environmental monitoring.

- **Worker Safety:** Comprehensive training, use of personal protective equipment (PPE), and ongoing exposure monitoring are non-negotiable.

## The Rise of Outsourcing and CDMOs

Given the complex-

ity and expense of HPAPI manufacturing, many pharmaceutical firms are turning to Contract Development and Manufacturing Organisations (CDMOs):

- **Ready Infrastructure:** CDMOs possess state-of-the-art containment and safety systems.
- **Cost-Effectiveness:** Outsourcing reduces the financial burden and expedites time-to-market.
- **Scalability:** Facilities are equipped to handle clinical trial batches as well as full-scale commercial production.
- **Regulatory Support:** CDMOs often assist with stringent compliance requirements.

Asia (especially India and China) and Europe are seeing significant growth in HPAPI-centric CDMOs, expanding global access to these specialised capabilities.

## Regulatory Landscape

The production, handling, and distribution of HPAPIs are governed by strict global regulations. Agencies such as the US FDA, EMA (Europe),

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# Momentum enabling India to lower import dependence

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and India's CDSCO enforce rigorous standards: Occupational Health and Safety Protocols; Facility Design and Segregation; Detailed Cleaning and Validation Procedures; and Containment Verification and Environmental Monitoring.

Non-compliance can result in recalls, penalties, or shutdowns, underscoring the importance of rigorous oversight throughout the HPAPI lifecycle.

## Market Trends and Growth Drivers

The HPAPI market is set to surpass \$35 billion globally by 2030, propelled by several forces:

- **Oncology Drug Pipeline:** Over one-third of clinical trials now focus on cancer, driving higher demand for potent cytotoxics.
- **Biologics and ADCs:** The growth of biopharmaceuticals and ADCs directly increases the need for HPAPIs.
- **Precision Medicine:** New therapies depend on highly potent agents for efficacy without increased toxicity.
- **Global Health Needs:** Aging populations and rising chronic disease rates are fueling wider adoption.

## The Indian Perspective

India is emerging as a significant force in the

HPAPI sphere. Traditionally strong in generic APIs, the country is now boosting its HPAPI footprint via: Investment in high-containment and dedicated facilities; Participation in government incentive schemes (such as PLI); Collaborations with multinational pharma innovators; Enhanced training and upgradation of worker safety protocols.

This momentum is enabling India to lower import dependence, increase export capacity, and position itself as a global leader in high-potency pharmaceuticals.

## Key Challenges Ahead

Despite robust growth, the HPAPI sector faces persistent challenges: High capital investment requirements; Shortage of specialised talent; Complex regulatory compliance; Demanding supply chain and waste management standards; Environmental and occupational safety.

Overcoming these hurdles demands targeted investment in technology, talent, and collaborative international standards.

## The Road Ahead: Innovations and Opportunities

The future of HPAPIs is closely tied to advances in: Continuous and closed-system

manufacturing; Artificial intelligence for process modelling and optimisation; Big data analytics for risk reduction; Next-generation containment and real-time monitoring systems; Flexible, modular cleanroom design.

As the move toward personalisation and targeted therapies intensifies, HPAPIs will increasingly form the bedrock of new drug development.

## Conclusion

HPAPIs are reshaping the pharmaceutical industry. Their capability to achieve dramatic therapeutic effects at nanogram doses makes them indispensable - not just in oncology, but across the biomedical spectrum. However, this promise is matched by manufacturing and regulatory complexity that only the best-prepared companies can navigate successfully.

For nations like India - and for the global industry - the ongoing challenge and opportunity lie in scaling safe, efficient HPAPI production while staying at the forefront of innovation. As the world's demand for potent, precise therapies grows, HPAPIs are set to be the very core of pharma's future - a future that's not just potent, but highly potent. □

*(The author is a leading pharmaceutical consultant)*

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- I3C: Indole-3-Carbinol
- DIM: 3,3'-Diindolylmethane
- I3CA: Indole-3-Carboxaldehyde
- Ascorbigen
- DMG.HCL: N-N Dimethylglycine HCl
- PEA: Palmitoylethanolamide
- Calcium Undecylenate
- Ascorbyl Palmitate (Vit C Ester)
- Calcium Glycero-phosphate
- Natural Vegan Vitamin D3 Powder: NLT 1,00,000 IU/gm

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- Zinc: Bisglycinate/ Citrate/ Aspartate/ Monomethionine

- Calcium: Butyrate/ Citrate/ Citrate Malate/ Malate/ Orotate
- Strontium: Citrate
- Lithium: Orotate/ Aspartate
- Manganese: Citrate/ Aspartate/ Glycinate
- Boron: Aspartate/ Citrate/ Glycinate

### PHARMACEUTICAL KSM's, INTERMEDIATES & SPECIALITY CHEMICALS

- Phthalimide
- Potassium Phthalimide
- N-Hydroxy Phthalimide
- N-Methyl Phthalimide
- N-Hydroxy-Methyl Phthalimide
- N-(2-Hydroxyethyl) Phthalimide
- N-Chloro Phthalimide
- N-Propyl Phthalimide
- N-Butyl Phthalimide
- N-Isopropyl Phthalimide
- 1,2,3,6-Tetrahydrophthalimide
- N-(2-Hydroxyethyl)-1,2,3,6-Tetrahydrophthalimide
- 3,4,5,6-Tetrahydrophthalimide

- ONB: 2-Nitrobenzaldehyde
- Barbituric Acid
- HOBt: 1-Hydroxybenzotriazole Monohydrate
- Chloramine Trihydrate
- Orotic Acid

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- Barium Chloranilate
- Sodium Chloranilate

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- HBr-48%: Hydrobromic Acid-48%
- DBB: 1,4 Dibromo Butane
- ETPB: Ethyl triphenyl phosphonium Bromide
- PBA: 4-Bromo Aniline