

Contains Nonbinding Recommendations

Draft – Not for Implementation

Draft Guidance on Selexipag

October 2024

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Active Ingredient: Selexipag

Dosage Form: Tablet

Route: Oral

Strengths: 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1.0 mg, 1.2 mg, 1.4 mg, 1.6 mg

Recommended Study: One in vivo bioequivalence study with pharmacokinetic endpoints

1. Type of study: Fasting
Design: Single-dose, two-treatment, two-period crossover in vivo
Strength: 0.4 mg
Subjects: Healthy males and non-pregnant, non-lactating females
Additional comments: For the mitigation of adverse events, the bioequivalence studies should include options for treatment of nausea and vomiting that will not alter the pharmacokinetics of selexipag and interfere with assessment of bioequivalence.

Analytes to measure: Selexipag and the pharmacologically active metabolite ACT-333679 in plasma

Submit the metabolite data as supportive evidence of comparable therapeutic outcome. For the metabolite, the following data should be submitted: individual and mean concentrations, individual and mean pharmacokinetic parameters, and geometric means and ratios of means for AUC and C_{max}.

Bioequivalence based on (90% CI): Selexipag

Waiver request of in vivo testing: The 0.2 mg, 0.6 mg, 0.8 mg, 1.0 mg, 1.2 mg, 1.4 mg, and 1.6 mg strengths based on (i) acceptable bioequivalence study on the 0.4 mg strength, (ii) acceptable in vitro dissolution testing of all strengths, and (iii) proportional similarity of the formulations across all strengths

Dissolution test method and sampling times: The dissolution information for this drug product can be found in the FDA's Dissolution Methods database, <http://www.accessdata.fda.gov/scripts/cder/dissolution>. Conduct comparative dissolution testing on 12 dosage units for each of all strengths of the test product and reference listed drug (RLD).¹ Specifications will be determined upon review of the abbreviated new drug application.

Document History: Recommended June 2016; Revised March 2020, October 2024

Unique Agency Identifier: PSG_207947

¹ If the RLD is not available, refer to the most recent version of the FDA guidance for industry on *Referencing Approved Drug Products in ANDA Submissions*.