

*Contains Nonbinding Recommendations*

*Draft – Not for Implementation*

## **Draft Guidance on Pexidartinib Hydrochloride**

**May 2021**

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic. It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations. To discuss an alternative approach, contact the Office of Generic Drugs.

This guidance, which interprets the Agency’s regulations on bioequivalence at 21 CFR part 320, provides product-specific recommendations on, among other things, the design of bioequivalence studies to support abbreviated new drug applications (ANDAs) for the referenced drug product. FDA is publishing this guidance to further facilitate generic drug product availability and to assist the generic pharmaceutical industry with identifying the most appropriate methodology for developing drugs and generating evidence needed to support ANDA approval for generic versions of this product.

The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law. FDA guidance documents, including this guidance, should be viewed only as recommendations, unless specific regulatory or statutory requirements are cited. The use of the word should in FDA guidances means that something is suggested or recommended, but not required.

This is a new draft product-specific guidance for industry on generic pexidartinib hydrochloride.

**Active Ingredient:** Pexidartinib hydrochloride

**Dosage Form; Route:** Capsule; oral

**Recommended Study:** One study

1. Type of study: Fasting  
Design: Single-dose, two- treatment, two-period crossover in vivo  
Strength: EQ 200 mg Base  
Subjects: Males and non-pregnant, non-lactating females, general population  
Additional comments: Exclude subjects with abnormal liver function tests and monitor liver function tests during the study. Females of reproductive potential should use effective non-hormonal contraception methods during the study and for one month after the study. Males with female partners of reproductive potential should use effective contraception during the study and for one week after the study. Pexidartinib is approved under a Risk Evaluation and Mitigation Strategy (REMS) with Elements to Assure Safe Use (ETASU), which restricts its use. All pertinent elements of the REMS/ETASU must be incorporated into the protocol and informed consent.

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**Analyte to measure:** Pexidartinib in plasma

**Bioequivalence based on (90% CI):** Pexidartinib

**Waiver request of in vivo testing:** Not applicable

**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 the test and reference products. Specifications will be determined upon evaluation of the abbreviated new drug application.

**Unique Agency Identifier:** PSG\_211810