

*Contains Nonbinding Recommendations*

*Draft – Not for Implementation*

**Draft Guidance on Ibrutinib**

**August 2024**

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic.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.

In general, FDA’s guidance documents do not establish legally enforceable responsibilities. Instead, guidances describe the Agency’s current thinking on a topic and should be viewed only as recommendations, unless specific regulatory or statutory requirements are cited. The use of the word *should* in Agency guidances means that something is suggested or recommended, but not required.

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**Active Ingredient:** Ibrutinib

**Dosage Form:** Tablet

**Route:** Oral

**Strengths:** 140 mg, 280 mg, 420 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: 420 mg  
Subjects: Healthy males and non-pregnant, non-lactating females  
Additional comments: Due to the embryo-fetal toxicity of ibrutinib, female subjects of reproductive potential should use effective method of contraception during the study and for one month after the last dose. Males with female partner of reproductive potential should use effective method of contraception during the study and for one month after the last dose. Applicants may consider using a reference-scaled average bioequivalence approach for ibrutinib. If using this approach, provide evidence of high variability in the pharmacokinetic parameters (i.e., within-subject variability  $\geq 30\%$ ) for the reference listed drug. For detailed information on this approach, refer to the most recent version of the FDA guidance for industry on *Bioequivalence Studies with Pharmacokinetic Endpoints for Drugs Submitted Under an ANDA*.<sup>a</sup>

**Analyte to measure:** Ibrutinib in plasma

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

**Waiver request of in vivo testing:** 140 mg, and 280 mg strengths based on (i) acceptable bioequivalence study on the 420 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 each of all strengths of the test and reference products. Specifications will be determined upon review of the abbreviated new drug application.

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**Revision History:** Recommended September 2019; Revised August 2024

**Unique Agency Identifier:** PSG\_210563

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<sup>a</sup> For the most recent version of a guidance, check the FDA guidance website at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents>.