

Draft Guidance on Hydrochlorothiazide; Lisinopril

October 2024

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Active Ingredients:	Hydrochlorothiazide; Lisinopril
Dosage Form:	Tablet
Route:	Oral
Strengths:	12.5 mg; 10 mg, 12.5 mg; 20 mg; 25 mg; 20 mg
Recommended Studies:	Two in vivo bioequivalence studies with pharmacokinetic endpoints

1. Type of study: Fasting
Design: Single-dose, two-treatment, two-period crossover in vivo
Strength: 25 mg; 20 mg
Subjects: Healthy males and non-pregnant, non-lactating females
Additional comments: None
2. Type of study: Fasting
Design: Single-dose, two-treatment, two-period crossover in vivo
Strength: 12.5 mg; 20 mg
Subjects: Healthy males and non-pregnant, non-lactating females
Additional comments: None

Analytes to measure: Hydrochlorothiazide and lisinopril in plasma

Bioequivalence based on (90% CI): Hydrochlorothiazide and lisinopril

Waiver request of in vivo testing: 12.5 mg; 10 mg strength based on (i) acceptable bioequivalence study on the 25 mg; 20 mg strength, (ii) acceptable in vitro dissolution testing of both strengths, and (iii) proportional similarity of the formulations between both 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 May 2007; Finalized May 2008; Revised December 2008, December 2012, October 2024

Unique Agency Identifier: PSG_019778

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*.