

Draft Guidance on Hydromorphone Hydrochloride

October 2024

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Active Ingredient:	Hydromorphone hydrochloride
Dosage Form:	Tablet
Route:	Oral
Strengths:	2 mg, 4 mg, 8 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: 8 mg
Subjects: Healthy males and non-pregnant, non-lactating females
Additional comments: A clear plan for continuous respiratory monitoring from the time of dosing past the time of expected peak effect of the drug (i.e., at least 3 hours from dosing) should be included. Standard operating procedures should be in place for assessing and treating ventilatory depression, and personnel qualified to treat ventilatory emergencies should be immediately available. Hydromorphone hydrochloride tablet is under a Risk Evaluation and Mitigation Strategy (REMS) with Elements to Assure Safe Use (ETASU). All pertinent elements of the REMS/ETASU are recommended to be incorporated into the protocol and informed consent.

Analyte to measure: Hydromorphone in plasma

Bioequivalence based on (90% CI): Hydromorphone

Waiver request of in vivo testing: 2 mg and 4 mg strengths based on (i) acceptable bioequivalence study on the 8 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.

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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*.