This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic.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

In July 2010, FDA issued a draft product-specific guidance for industry on generic ethinyl estradiol; norethindrone. We are now issuing revised draft guidance for industry that replaces the previously issued guidance.

Active Ingredients: Ethinyl estradiol; Norethindrone

Dosage Form; Route: Tablet; oral

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: 0.035 mg; 0.4 mg
   Subjects: Non-pregnant, non-lactating females, general population
   Additional comment: The tablet should be swallowed whole with 240 mL of water.
2. **Type of study:** Fed  
   **Design:** Single-dose, two-treatment, two-period crossover in vivo  
   **Strength:** 0.035 mg; 0.4 mg  
   **Subjects:** Non-pregnant, non-lactating females, general population  
   **Additional comment:** See comment above.

**Analytes to measure:** Ethinyl estradiol and norethindrone in plasma

**Bioequivalence based on (90% CI):** Ethinyl estradiol and norethindrone

**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/](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 ANDA.

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**Revision History:** Recommended March 2009; Revised July 2009, July 2010, August 2022

**Unique Agency Identifier:** PSG_021490