

*Contains Nonbinding Recommendations*  
*Draft – Not for Implementation*  
**Draft Guidance on Trospium Chloride**  
**December 2025**

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic.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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<b>Active Ingredient:</b>	Trospium chloride
<b>Dosage Form:</b>	Capsule, extended release
<b>Route:</b>	Oral
<b>Strength:</b>	60 mg
<b>Recommended Studies:</b>	Two in vivo bioequivalence studies with pharmacokinetic endpoints

1. Type of study: Fasting  
Design: Single-dose, two-treatment, two-period crossover in vivo  
Strength: 60 mg  
Subjects: Healthy males and non-pregnant, non-lactating females  
Additional comments: Applicants may consider using a reference-scaled average bioequivalence approach for trospium. 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 (RLD).<sup>1</sup> For detailed information on this approach, refer to the most recent version of the guidance for industry *Bioequivalence Studies With Pharmacokinetic Endpoints for Drugs Submitted Under an ANDA*.<sup>a</sup>

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<sup>1</sup> If the RLD is not available, refer to the most recent version of the guidance for industry *Referencing Approved Drug Products in ANDA Submissions*.

2. Type of study: Fed  
Design: Single-dose, two-treatment, two-period crossover in vivo  
Strength: 60 mg  
Subjects: Healthy males and non-pregnant, non-lactating females  
Additional comments: See comments above.

**Analyte to measure:** Trospium in plasma

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

**Additional strengths:** Not applicable

**Dissolution test method and sampling times:** For modified release drug products, applicants should develop specific discriminating dissolution methods. Alternatively, applicants may use the dissolution method set forth in any related official United States Pharmacopeia (USP) drug product monograph, or in the FDA's database, <http://www.accessdata.fda.gov/scripts/cder/dissolution/>, provided that applicants submit adequate dissolution data supporting the discriminating ability of such a method. If a new dissolution method is developed, submit the dissolution method development and validation report with the complete information/data supporting the proposed method. Conduct comparative dissolution testing on 12 dosage units for each of the test product and RLD.<sup>1</sup> Specifications will be determined upon review of the abbreviated new drug application.

In addition to the method above, submit dissolution profiles on 12 dosage units for each of the test product and RLD generated using USP Apparatus 1 at 100 rpm and/or Apparatus 2 at 50 rpm in at least three dissolution media (e.g., pH 1.2, 4.5 and 6.8 buffer). Agitation speeds may be increased if appropriate. It is acceptable to add a small amount of surfactant if necessary. Include early sampling times of 1, 2, and 4 hours and continue every 2 hours until at least 80% of the drug is released to provide assurance against premature release of drug (dose dumping) from the formulation.

**Alcohol dose dumping studies:** None

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**Document History:** Recommended August 2008; Revised May 2017, August 2024, December 2025

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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>.