This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic.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

This is a new draft product-specific guidance for industry on generic midazolam.

**Active Ingredient:** Midazolam

**Dosage Form; Route:** Spray; nasal

**Strength:** 5 mg/spray

**Recommended Studies:** Two options: in vitro or in vivo

FDA recommends the following in vitro or in vivo studies to establish bioequivalence (BE) of the test (T) and reference (R) nasal sprays containing midazolam.
In Vitro Option

If the T product formulation is qualitatively (Q1)\(^1\) and quantitatively (Q2)\(^2\) the same as the R product formulation, and the nasal spray device (e.g., pump and actuator design) of the T product is appropriate for an abbreviated new drug application (ANDA) (as demonstrated by comparative analyses further described below), BE of the T midazolam nasal spray product to the R midazolam nasal spray product can be established solely by in vitro performance tests in lieu of a pharmacokinetic (PK) BE study. FDA recommends that applicants conduct the following in vitro BE studies on samples from each of three or more batches of the T product and three or more batches of the R product, with no fewer than 10 units from each batch. FDA recommends that three primary stability batches be also used to demonstrate in vitro BE. The three batches of the T product should be manufactured from, at minimum, three different batches of the drug substance, three different batches of critical excipients, and three different batches of the device components (e.g., pump and actuator) proposed for the final device configuration of the commercial product. The T product should consist of the final device constituent part and final drug constituent formulation intended to be marketed. The following in vitro BE tests are recommended:

1. Single actuation content
2. Droplet size distribution by laser diffraction
3. Drug in small particles/droplets
4. Spray pattern
5. Plume geometry

Additional comments: Refer to the product-specific guidance for Fluticasone Propionate Nasal Spray Metered for recommendations on design and equivalence criteria for the aforementioned in vitro BE studies, and general recommendations on the conduct of the in vitro BE studies and data submission.\(^3\)

In Vivo Option

If the T formulation is not Q1 and Q2 the same as the R formulation and the nasal spray device (e.g., pump and actuator design) of the T product is appropriate for an ANDA (as demonstrated by comparative analyses further described below), the following PK study is recommended to establish BE between the T and R product:

- Type of study: Fasting
- Design: Single-dose, two-way crossover
- Strength: 5 mg/spray
- Dose: 5 mg midazolam (1 spray in 1 nostril)

\(^1\) Q1 (qualitative sameness) means that the T product uses the same inactive ingredient(s) as the R product.
\(^2\) Q2 (quantitative sameness) means that concentrations of the inactive ingredient(s) used in the T product are within ± 5% of those used in the R product.
\(^3\) Specific recommendations for in vitro BE testing at various life stages are not relevant for this product, given it is a single-use configuration.
Subjects: Adult males and non-pregnant, non-lactating females, general population
Additional comments: Prospective applicants should collect sufficient quantifiable PK samples to characterize the absorption of midazolam between the T product and the R product within the initial 10 minutes, and within 10-30 minutes after administration. Monitor subjects for at least four hours after midazolam intranasal administration. Concomitant use with strong CYP3A4 inhibitors should be contraindicated. Subjects should not engage in activities requiring complete mental alertness, operate hazardous machinery, drive a motor vehicle, or ride a bicycle after taking nasal midazolam spray until they have completely returned to their level of baseline functioning. Subjects should be warned and understand that the use of midazolam nasal spray is associated with a high incidence of partial or complete impairment of recall for several hours following an administered dose of nasal midazolam spray. Subjects should not use alcohol or any other CNS depressants after administration of a dose of nasal midazolam spray until they have completely returned to their level of baseline functioning. Exclude subjects with respiratory conditions (i.e., moderate to severe asthma, chronic obstructive pulmonary disease [COPD], etc.). Exclude subjects with narrow angle glaucoma.

**Analyte to measure:** Midazolam in plasma

**Equivalence based on:** AUC and Cmax for midazolam. The 90% confidence interval for the geometric mean T/R ratios of Cmax and AUC should fall within the limits of 80.00 - 125.00%.

**Additional Information**

**Device:**

Prospective applicants should refer to the FDA guidance for industry entitled, *Comparative Analyses and Related Comparative Use Human Factor Studies for a Drug-Device Combination Product Submitted in an ANDA*, which, when finalized, will provide the Agency’s current thinking on the identification and assessment of any differences in the design of the user interface for a proposed generic drug-device combination product when compared to its RLD.

FDA recommends that prospective applicants consider the following characteristics of the R product when designing the T product:

- Single-unit dose design
- External operating principles and external critical design attributes of the R product
- Size and shape of the R product

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