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Draft Guidance on Hydroxychloroquine Sulfate

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This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic.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

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Active Ingredient:	Hydroxychloroquine sulfate
Dosage Form:	Tablet
Route:	Oral
Strengths:	200 mg, 300 mg
Recommended Studies:	Two options: (1) Biopharmaceutics Classification System (BCS)-based biowaiver, or (2) one in vivo bioequivalence study with pharmacokinetic endpoints

I. Option 1: BCS Class III-based biowaiver

A waiver request of in vivo testing for this product may be considered provided that the appropriate documentation regarding high solubility, very rapid dissolution, and the test product formulation is qualitatively the same and quantitatively similar as detailed in the most recent version of the FDA guidance for industry *M9 Biopharmaceutics Classification System-Based Biowaivers*[a] is submitted in the application. Applicants may use the information contained in the approved labeling of the reference listed drug (RLD)[1]. Peer reviewed articles may not contain the necessary details of the testing for the Agency to make a judgment regarding the quality of the studies. A decision regarding the acceptability of the waiver request can only be made upon assessment of the data submitted in the application.

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

II. Option 2: One in vivo bioequivalence study with pharmacokinetic endpoints

1. Type of study: Fed
   Design: Single-dose, two- treatment, randomized, parallel in vivo
   Strength: 300 mg
   Subjects: Healthy males and non-pregnant, non-lactating females
   Additional comments: None

Analyte to measure: Hydroxychloroquine in whole blood

Bioequivalence based on (90% CI): Hydroxychloroquine

Waiver request of in vivo testing: 200 mg strength based on (i) an acceptable bioequivalence study on the 300 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 RLD. Specifications will be determined upon review of the abbreviated new drug application.

If any strength of the tablet product has a functional score, additional dissolution profile testing should be conducted for each segment of the split tablet after manual and mechanical splitting as per the most recent version of the FDA guidance for industry *Tablet Scoring: Nomenclature, Labeling, and Data for Evaluation.*[a]

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[a] For the most recent version of a guidance, check the FDA guidance website at https://www.fda.gov/regulatory-information/search-fda-guidance-documents.