Contains Nonbinding Recommendations

Draft – Not for Implementation

Draft Guidance on Ezogabine

October 2024

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA, or the Agency) on this topic.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

Active Ingredient: Ezogabine

Dosage Form: Tablet

Route: Oral

Strengths: 50 mg, 200 mg, 300 mg, 400 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: 400 mg

Subjects: Healthy males and non-pregnant, non-lactating females

Additional comments: None

Analytes to measure: Ezogabine in plasma

Bioequivalence based on (90% CI): Ezogabine

Waiver request of in vivo testing: 50 mg, 200 mg, and 300 mg strengths based on (i) acceptable bioequivalence study on the 400 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). Specifications will be determined upon review of the abbreviated new drug application.

Document History: Recommended April 2013; Revised October 2024

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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*.