may not accept the panel's recommendation and may instead adopt a different position that may require relabeling, recall, or other regulatory action. The Commissioner may state such position at any time by notice in the Federal Register, either separately or as part of another document; appropriate regulatory action will commence immediately and will not await publication of a final monograph. Marketing of such a product with a formulation or labeling not in accord with a proposed monograph or tentative final monograph also may result in regulatory action against the product, the marketer, or both.

(c) An OTC drug product that contains: (1) An active ingredient limited, on or after May 11, 1972, to prescription use for the indication and route of administration under consideration by an OTC advisory review panel, and not thereafter exempted from such limitation pursuant to §310.200 of this chapter, or

(2) An active ingredient at a dosage level higher than that available in any OTC drug product on December 4, 1975, which ingredient and/or dosage level is classified by the panel in category II (conditions subject to §330.10(a)(6)(ii)), may be marketed only after:

(i) The Center for Drug Evaluation and Research or the Commissioner tentatively determines that the ingredient is generally recognized as safe and effective, and the Commissioner states by notice in the Federal Register (separately or as part of another document) that marketing under specified conditions will be permitted;

(ii) The ingredient is determined by the Commissioner to be generally recognized as safe and effective and is included in the appropriate published OTC drug final monograph; or

(iii) A new drug application for the product has been approved.


PART 331—ANTACID PRODUCTS FOR OVER-THE-COUNTER (OTC) HUMAN USE

Subpart A—General Provisions

Sec. 331.1 Scope.

Subpart B—Active Ingredients

331.10 Antacid active ingredients.
331.11 Listing of specific active ingredients.
331.15 Combination with nonantacid active ingredients.

Subpart C—Testing Procedures

331.20 Determination of percent contribution of active ingredients.
331.21 Test Modifications.

Subpart D—Labeling

331.30 Labeling of antacid products.
331.80 Professional labeling.


Source: 39 FR 19874, June 4, 1974, unless otherwise noted.
§ 331.1

Subpart A—General Provisions

§ 331.1 Scope.

An over-the-counter antacid product in a form suitable for oral administration is generally recognized as safe and effective and is not misbranded if it meets each of the following conditions and each of the general conditions established in § 330.1 of this chapter.

Subpart B—Active Ingredients

§ 331.10 Antacid active ingredients.

(a) The active antacid ingredients of the product consist of one or more of the ingredients permitted in § 331.11 within any maximum daily dosage limit established, each ingredient is included at a level that contributes at least 25 percent of the total acid neutralizing capacity of the product, and the finished product contains at least 5 meq of acid neutralizing capacity as measured by the procedure provided in the United States Pharmacopeia 23/National Formulary 18. The method established in § 331.20 shall be used to determine the percent contribution of each antacid active ingredient.

(b) This section does not apply to an antacid ingredient specifically added as a corrective to prevent a laxative or constipating effect.


§ 331.11 Listing of specific active ingredients.

(a) Aluminum-containing active ingredients:

(1) Basic aluminum carbonate gel.

(2) Aluminum hydroxide (or as aluminum hydroxide-hexitol stabilized polymer, aluminum hydroxide-magnesium carbonate codried gel, aluminum hydroxide-magnesium trisilicate codried gel, aluminum-hydroxide sucrose powder hydrated).

(3) Dihydroxylaluminum aminoacetate and dihydroxylaluminum amnomic acid.

(4) Aluminum phosphate gel when used as part of an antacid combination product and contributing at least 25 percent of the total acid neutralizing capacity; maximum daily dosage limit is 8 grams.

(5) Dihydroxylaluminum sodium carbonate.

(b) Bicarbonate-containing active ingredients: Bicarbonate ion; maximum daily dosage limit 200 mEq. for persons up to 60 years old and 100 mEq. for persons 60 years or older.

(c) Bismuth-containing active ingredients:

(1) Bismuth aluminiate.

(2) Bismuth carbonate.

(3) Bismuth subcarbonate.

(4) Bismuth subgallate.

(5) Bismuth subnitrate.

(d) Calcium-containing active ingredients: Calcium, as carbonate or phosphate; maximum daily dosage limit 160 mEq. calcium (e.g., 8 grams calcium carbonate).

(e) Citrate-containing active ingredients: Citrate ion, as citric acid or salt; maximum daily dosage limit 8 grams.

(f) Glycine (aminoacetic acid).

(g) Magnesium-containing active ingredients:

(1) Hydrate magnesium aluminate activated sulfate.

(2) Magaldrate.

(3) Magnesium aluminosilicates.

(4) Magnesium carbonate.

(5) Magnesium glycinate.

(6) Magnesium hydroxide.

(7) Magnesium oxide.

(8) Magnesium trisilicate.

(h) Milk solids, dried.

(i) Phosphate-containing active ingredients:

(1) Aluminum phosphate; maximum daily dosage limit 8 grams.

(2) Mono or dibasic calcium salt; maximum daily dosage limit 2 grams.

(3) Tricalcium phosphate; maximum daily dosage limit 24 grams.

(j) Potassium-containing active ingredients:

(1) Potassium bicarbonate (or carbonate when used as a component of an effervescent preparation); maximum daily dosage limit 200 mEq. of bicarbonate ion for persons up to 60 years old and 100 mEq. of bicarbonate ion for persons 60 years or older.

(2) Sodium potassium tartrate.

(k) Sodium-containing active ingredients:

(1) Sodium bicarbonate (or carbonate when used as a component of an effervescent preparation); maximum daily dosage limit 200 mEq. of sodium for...
persons up to 60 years old and 100 mEq.
of sodium for persons 60 years or older,
and 200 mEq. of bicarbonate ion for per-
sons up to 60 years old and 100 mEq. of
bicarbonate ion for persons 60 years or
older. That part of the warning re-
quired by § 330.1(g), which states, “Keep
this and all drugs out of the reach of
children” is not required on a product
which contains only sodium bicarbon-
ate powder and which is intended pri-
marily for other than drug uses.

(2) Sodium potassium tartrate.

(l) Silicates:
(1) Magnesium aluminosilicates.
(2) Magnesium trisilicate.

(m) Tartrate-containing active ingre-
dients. Tartaric acid or its salts; maxi-
mum daily dosage limit 200 mEq. (15
grams) of tartrate.

[39 FR 19874, June 4, 1974, as amended at 51
FR 27763, Aug. 1, 1986; 55 FR 19859, May 11,
1990]

§ 331.15 Combination with nonantacid
active ingredients.
(a) An antacid may contain any gen-
erally recognized as safe and effective
nonantacid laxative ingredient to cor-
rect for constipation caused by the ant-
cid. No labeling claim of the laxative
effect may be used for such a product.
(b) An antacid may contain any gen-
erally recognized as safe and effective
analgesic ingredient(s), if it is indi-
cated for use solely for the concurrent
symptoms involved, e.g., headache and
acid indigestion, and is marketed in a
form intended for ingestion as a solu-
tion.
(c) An antacid may contain any gen-
erally recognized as safe and effective
antiflatulent ingredient if it is indi-
cated for use solely for the concurrent
symptoms of gas associated with heart-
burn, sour stomach or acid indigestion.

Subpart D—Labeling

§ 331.30 Labeling of antacid products.
(a) Statement of identity. The labeling
of the product contains the established
name of the drug, if any, and identifies
the product as an “antacid.”
(b) Indications. The labeling of the
product states, under the heading “In-
dications,” the following: “For the re-
lief of” (optional, any or all of the fol-
lowing:) “heartburn,” “sour stomach,”
and/or “acid indigestion” (which may
be followed by the optional statement:)
“and upset stomach associated with”
(optional, as appropriate) “this symp-
tom” or “these symptoms.” Other
truthful and nonmisleading state-
ments, describing only the indications
for use that have been established and
listed in this paragraph (b), may also
be used, as provided in § 330.1(c)(2)
of this chapter, subject to the provisions
of section 502 of the act relating to
misbranding and the prohibition in sec-
tion 301(d) of the act against the intro-
duction or delivery for introduction

Subpart C—Testing Procedures

§ 331.20 Determination of percent con-
tribution of active ingredients.
To determine the percent contribu-
tion of an antacid active ingredient,
place an accurately weighed amount of
the antacid active ingredient equal to
the amount present in a unit dose of
the product into a 250-milliliter (mL)
beaker. If wetting is desired, add not
more than 5 mL of alcohol (neutralized
to an apparent pH of 3.5), and mix to
wet the sample thoroughly. Add 70 mL
of water, and mix on a magnetic stirrer
at 300±30 r.p.m. for 1 minute. Analyze
the acid neutralizing capacity of the
sample according to the procedure pro-
vided in the United States Pharma-
copeia 23/National Formulary 18 and
calculate the percent contribution of
the antacid active ingredient in the
total product as follows:

Percent contribution = (Total mEq.
Antacid Active Ingredient x100)/(Total
mEq. Antacid Product).
[61 FR 4823, Feb. 8, 1996]

§ 331.21 Test modifications.
The formulation or mode of adminis-
tration of certain products may require
a modification of the United States
Pharmacopeia 23/National Formulary
18 acid neutralizing capacity test. Any
proposed modification and the data to
support it shall be submitted as a peti-
tion under the rules established in
§10.30 of this chapter. All information
submitted will be subject to the disclo-
sure rules in part 20 of this chapter.
[61 FR 4823, Feb. 8, 1996]
 sectional 505(a) of the act.
(c) Warnings. The labeling of the product contains the following warnings, under the heading "Warnings", which may be combined but not rearranged to eliminate duplicative words or phrases if the resulting warning is clear and understandable:

(1) "Do not take more than (maximum recommended daily dosage, broken down by age groups if appropriate, expressed in units such as tablets or teaspoonfuls) in a 24-hour period, or use the maximum dosage of this product for more than 2 weeks, except under the advice and supervision of a physician."

(2) For products which cause constipation in 5 percent or more of persons who take the maximum recommended dosage: "May cause constipation."

(3) For products which cause laxation in 5 percent or more of persons who take the maximum recommended dosage: "May have laxative effect."

(4) For products containing more than 50 mEq. of magnesium in the recommended daily dosage: "Do not use this product except under the advice and supervision of a physician if you have kidney disease."

(5) For products containing more than 25 mEq. of potassium in the maximum recommended daily dose: "Do not use this product except under the advice and supervision of a physician if you have kidney disease."

(6) For products containing more than 5 gm per day lactose in a maximum daily dosage: "Do not use this product except under advice and supervision of a physician if you are allergic to milk or milk products."

(d) Drug interaction precaution. The labeling of the product contains the following statements under the heading "Drug Interaction Precaution": "Antacids may interact with certain prescription drugs. If you are presently taking a prescription drug, do not take this product without consulting your physician or other health professional."

(e) Directions for use. The labeling of the product contains the recommended dosage, under the heading "Directions", per time interval (e.g., every 4 hours) or time period (e.g., 4 times a day) broken down by age groups if appropriate, followed by "or as directed by a physician."

(f) Exemption from the general accidental overdose warning. The labeling for antacid drug products containing the active ingredients identified in §331.11(a), (b), and (d) through (m); permitted combinations of these ingredients provided for in §331.10, and any of these ingredients or combinations of these ingredients in combination with simethicone (identified in §332.10 of this chapter and provided for in §331.15(c)), are exempt from the requirement in §330.1(g) of this chapter that the labeling bear the general warning statement "In case of accidental overdose, seek professional assistance or contact a poison control center immediately." With the exception of sodium bicarbonate powder products identified in §331.11(k)(1), the labeling must continue to bear the first part of the general warning in §330.1(g) of this chapter, which states, "Keep this and all drugs out of the reach of children."

(g) [Reserved]

(h) The word "doctor" may be substituted for the word "physician" in any of the labeling statements in this section.

ulcer, gastritis, peptic esophagitis, gastric hyperacidity, and hiatal hernia.

(3) For products containing basic aluminum carbonate gel identified in §331.11(a)(1)—Indication. “For the treatment, control, or management of hyperphosphatemia, or for use with a low phosphate diet to prevent formation of phosphate urinary stones, through the reduction of phosphates in the serum and urine.”

(4) For products containing aluminum identified in §331.11(a)—Warnings. (i) Prolonged use of aluminum-containing antacids in patients with renal failure may result in or worsen dialysis osteomalacia. Elevated tissue aluminum levels contribute to the development of the dialysis encephalopathy and osteomalacia syndromes. Small amounts of aluminum are absorbed from the gastrointestinal tract and renal excretion of aluminum is impaired in renal failure. Aluminum is not well removed by dialysis because it is bound to albumin and transferrin, which do not cross dialysis membranes. As a result, aluminum is deposited in bone, and dialysis osteomalacia may develop when large amounts of aluminum are ingested orally by patients with impaired renal function.

(ii) Aluminum forms insoluble complexes with phosphate in the gastrointestinal tract, thus decreasing phosphate absorption. Prolonged use of aluminum-containing antacids by normophosphatemic patients may result in hypophosphatemia if phosphate intake is not adequate. In its more severe forms, hypophosphatemia can lead to anorexia, malaise, muscle weakness, and osteomalacia.

(b) Professional labeling for an antacid-antiflatulent combination may contain the information allowed for health professionals for antacids and antiflatulents.


PART 332—ANTIFLATULENT PRODUCTS FOR OVER-THE-COUNTER HUMAN USE

Subpart A—General Provisions

§ 332.1 Scope.

§ 332.3 Definitions.

Subpart B—Active Ingredients

§ 332.10 Antiflatulent active ingredients.

Subpart C—Labeling

§ 332.30 Labeling of antiflatulent products.

§ 332.31 Professional labeling.


SOURCE: 39 FR 19877, June 4, 1974, unless otherwise noted.

Subpart A—General Provisions

§ 332.1 Scope.

An over-the-counter antiflatulent product in a form suitable for oral administration is generally recognized as safe and effective and is not misbranded if it meets each of the following conditions and each of the general conditions established in §330.1 of this chapter.

§ 332.3 Definitions.

As used in this part:

Antigas. A term that may be used interchangeably with the term antiflatulent. Neither term should be considered as describing the mechanism of action of the active ingredient contained in the product.

[61 FR 8838, Mar. 5, 1996]

Subpart B—Active Ingredients

§ 332.10 Antiflatulent active ingredients.

Simethicone; maximum daily dose 500 mg. There is no dosage limitation at this time for professional labeling.

[61 FR 8838, Mar. 5, 1996]

§ 332.15 Combination with non-antiflatulent active ingredients.

An antiflatulent may contain any generally recognized as safe and effective antacid ingredient(s) if it is indicated for use solely for the concurrent symptoms of gas associated with heartburn, sour stomach or acid indigestion.