abbreviated licensure pathway in section 351(k) for biological products shown to be biosimilar to or interchangeable with an FDA-licensed biological reference product (see sections 7001 through 7003 of the Patient Protection and Affordable Care Act Of 2010 (Affordable Care Act) (Pub. L. 111–148)).

Section 351(k) of the PHS Act sets forth the requirements for an application for a proposed biosimilar product and an application or a supplement for a proposed interchangeable product. Specifically, section 351(k)(4) provides that upon review of an application submitted under section 351(k), or any supplement to such an application, FDA will determine the biological product to be interchangeable with the reference product if FDA determines that the information submitted in the application (or supplement) is sufficient to show that the biological product is biosimilar to the reference product and can be expected to produce the same clinical result as the reference product in any given patient; and for a biological product that is administered more than once to an individual, the risk in terms of safety or diminished efficacy of alternating or switching between use of the biological product and the reference product is not greater than the risk of using the reference product without such alternation or switch. Section 351(i) of the PHS Act states that the term *interchangeable* or *interchangeability,* in reference to a biological product that is shown to meet the standards described in subsection 351(k)(4), means that the biological product may be substituted for the reference product without the intervention of the health care provider who prescribed the reference product.

This guidance gives an overview of important scientific considerations in demonstrating interchangeability, including:

- The data and information needed to support a demonstration of interchangeability;
- Considerations for the design and analysis of a switching study or studies to support a demonstration of interchangeability;
- Recommendations regarding the use of U.S.-licensed reference products in a switching study or studies; and
- Considerations for developing presentations, container closure systems, and delivery device constituent parts for proposed interchangeable products.

This draft guidance is being issued consistent with FDA's good guidance practices regulation (21 CFR 10.115). The draft guidance, when finalized, will represent the current thinking of FDA on topics sponsors should consider when seeking to demonstrate that a proposed therapeutic protein product is interchangeable with a reference product. It does not establish any rights for any person and is not binding on FDA or the public.

II. Topics for Comment

In addition to comment on the draft guidance, we also invite general comments on interchangeability, including comments on regulation of an interchangeable product over its lifecycle, as well as comments on the following topics:

1. Since the mid-1990s, FDA has approved manufacturing changes for biological products based on data from comparability assessments comparing the pre-change and post-change product using comparative analytical, and, when necessary, animal and/or clinical (*e.g.,* pharmacokinetic, immunogenicity) studies. A demonstration of comparability between pre- and post-change product supports a determination that the safety and efficacy profile remains the same for the product. With respect to interchangeable products, are there considerations in addition to comparability assessments that FDA should consider in regulating post-approval manufacturing changes of interchangeable products? Your comments should include the scientific rationale and justification for your recommendations, as well as recommendations for processes and systems (including key logistics) to implement your recommendations.

2. As explained in the guidance ''Considerations in Demonstrating Interchangeability With a Reference Product,'' FDA expects that sponsors seeking an interchangeability determination will submit data and information to support a showing that the proposed interchangeable product can be expected to produce the same clinical result as the reference product in all of the reference product's licensed conditions of use. How, if at all, should the Agency consider conditions of use that are licensed for the reference product after an interchangeable product has been licensed? Your comments should include the scientific rationale and justification for your recommendations, as well as recommendations for processes and systems (including key logistics) to implement your recommendations.

III. Paperwork Reduction Act of 1995

This draft guidance refers to previously approved collections of information found in FDA regulations. These collections of information are subject to review by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501–3520). The collections of information under 21 CFR part 312 have been approved under OMB control number 0910–0014; the collections of information under 21 CFR part 601 have been approved under OMB control number 0910–0338; and the collections of information under section 351(k) of the PHS Act have been approved under OMB control number 0910–0719.

IV. Electronic Access

Persons with access to the Internet may obtain the draft guidance at *http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/default.htm, http://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation/Guidances/default.htm,* or *https://www.regulations.gov*.

Dated: January 12, 2017.

Leslie Kux,

Associate Commissioner for Policy.

[FR Doc. 2017–01042 Filed 1–17–17; 8:45 am]

BILLING CODE 4164–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2016–P–2469]

Determination That SYMMETREL (Amantadine Hydrochloride), Syrup, 50 Milligrams/5 Milliliters, Was Not Withdrawn From Sale for Reasons of Safety or Effectiveness

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA or Agency) has determined that SYMMETREL (amantadine hydrochloride), Syrup, 50 milligrams/5 milliliters (50 mg/5 mL), was not withdrawn from sale for reasons of safety or effectiveness. This determination means that FDA will not begin procedures to withdraw approval of abbreviated new drug applications (ANDAs) that refer to SYMMETREL, and it will allow FDA to continue to approve ANDAs that reference SYMMETREL if all other legal and regulatory requirements are met.

FOR FURTHER INFORMATION CONTACT: Stefanie S. Kraus, Center for Drug Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 51, Rm. 6215, Silver Spring, MD 20993–0002, 301–796–9585.

SUPPLEMENTARY INFORMATION: In 1984, Congress enacted the Drug Price Competition and Patent Term Restoration Act of 1984 (Pub. L. 98–417) (the 1984 amendments), which authorized the approval of duplicate versions of drug products under an ANDA procedure. ANDA applicants must, with certain exceptions, show that the drug for which they are seeking approval contains the same active ingredient in the same strength and dosage form as the ''listed drug,'' which is a version of the drug that was previously approved. ANDA applicants do not have to repeat the extensive clinical testing otherwise necessary to gain approval of a new drug application (NDA).

The 1984 amendments include what is now section 505(j)(7) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(j)(7)), which requires FDA to publish a list of all approved drugs. FDA publishes this list as part of the ''Approved Drug Products With Therapeutic Equivalence Evaluations,'' which is known generally as the ''Orange Book.'' Under FDA regulations, drugs are removed from the list if the Agency withdraws or suspends approval of the drug's NDA or ANDA for reasons of safety or effectiveness or if FDA determines that the listed drug was withdrawn from sale for reasons of safety or effectiveness (21 CFR 314.162).

A person may petition the Agency to determine, or the Agency may determine on its own initiative, whether a listed drug was withdrawn from sale for reasons of safety or effectiveness. This determination may be made at any time after the drug has been withdrawn from sale, but must be made prior to approving an ANDA that refers to the listed drug (§ 314.161 (21 CFR 314.161)). FDA may not approve an ANDA that does not refer to a listed drug.

SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, is the subject of NDAs 016023 and 017118, held by Endo Pharmaceuticals, and initially approved on February 14, 1968, and July 20, 1976, respectively. SYMMETREL is indicated for the prophylaxis and treatment of signs and symptoms of infection caused by various strains of influenza A virus. SYMMETREL is also indicated for the treatment of parkinsonism and drug-induced extrapyramidal reactions.

In a letter dated March 19, 2009, Endo Pharmaceuticals notified FDA that SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, was being discontinued and requested withdrawal of NDA016023 for that product. FDA moved the drug product to the ''Discontinued Drug Product List'' section of the Orange Book and announced in the **Federal Register** of July 21, 2010 (75 FR 42455), that FDA was withdrawing approval of NDA 016023, effective August 20, 2010.

Hyman, Phelps & McNamara submitted a citizen petition dated August 3, 2016 (Docket No. FDA–2016–P–2469), under 21 CFR 10.30, requesting that the Agency determine whether SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, was withdrawn from sale for reasons of safety or effectiveness.

After considering the citizen petition and reviewing Agency records and based on the information we have at this time, FDA has determined under § 314.161 that SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, was not withdrawn for reasons of safety or effectiveness. The petitioner has identified no data or other information suggesting that this drug product was withdrawn for reasons of safety or effectiveness. We have carefully reviewed our files for records concerning the withdrawal of SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, from sale. We have also independently evaluated relevant literature and data for possible postmarketing adverse events. We have reviewed the available evidence and determined that this drug product was not withdrawn from sale for reasons of safety or effectiveness.[1]

Accordingly, the Agency will continue to list SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, in the ''Discontinued Drug Product List'' section of the Orange Book. The ''Discontinued Drug Product List'' delineates, among other items, drug products that have been discontinued from marketing for reasons other than safety or effectiveness. FDA will not begin procedures to withdraw approval of approved ANDAs that refer to SYMMETREL. Additional ANDAs that refer to SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, may be approved by the Agency as long as they meet all other legal and regulatory requirements for the approval of ANDAs. If FDA determines that labeling for this drug product should be revised to meet current standards, the Agency will advise ANDA applicants to submit such labeling.

Dated: January 12, 2017.

Leslie Kux,

Associate Commissioner for Policy.

[FR Doc. 2017–01064 Filed 1–17–17; 8:45 am]

BILLING CODE 4164–01–P

[1] Due to high levels of resistance to currently circulating Influenza A viruses, the Centers for Disease Control and Prevention currently recommends against using amantadine to treat Influenza A. Given the potential for viral reassortment, however, amantadine may be effective against future Influenza A viruses. Consistent with this, the current label for SYMMETREL (amantadine hydrochloride), Syrup, 50 mg/5 mL, was revised to caution prescribers to consider susceptibility and clinical benefit when deciding whether to use amantadine to treat Influenza A.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2010–D–0026]

Assessment of Abuse Potential of Drugs; Guidance for Industry; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of availability.

SUMMARY: The Food and Drug Administration (FDA or Agency) is announcing the availability of a guidance for industry entitled ''Assessment of Abuse Potential of Drugs.'' This guidance is intended to assist sponsors of investigational new drugs and applicants for approval of a new drug in evaluating whether their new drug product has abuse potential. Specifically, this guidance provides recommendations for assessing the abuse potential of central nervous system (CNS)-active new drugs. Drug products with abuse potential generally contain drug substances that are active within the CNS and produce psychoactive effects such as euphoria and hallucinations. Thus, if a drug substance is CNS-active, the new drug product containing that drug substance will likely need to undergo a thorough assessment of its abuse potential and may be subject to control under the Controlled Substances Act (CSA). This guidance finalizes the draft guidance of the same name issued on January 27, 2010.

DATES: Submit either electronic or written comments on Agency guidances at any time.

ADDRESSES: You may submit comments as follows:

Electronic Submissions