TO the Editor:

Unfortunately, I did not attend the workshop on Comparative Bioavailability of Oral Contraceptive Products held in Ottawa, Canada, on June 4, 1990. However, as stated by Dr. Gallicano and his colleagues, many of the issues which I addressed must have been discussed at that time.

The main issue involves whether the current FDA bioequivalence interval (80-120%) is too broad when testing medications given once a day in microgram doses, wherein there is little room for error.

This seems to be most important, because there can be marked differences in an individual's response to a particular medication, as noted by these authors in their third paragraph.

The recommendations I made apply to both brand name and generic birth control pills. Although expensive, a system of post-marketing surveillance is essential to ensure that the products being sold, especially those in the critical drug category, are therapeutically effective.

Thank you for letting me respond to the thoughtful comments contained in the preceding letter.

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