

Section 505(j)(7) of the FD&C Act 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approval of the drug’s NDA or ANDA for reasons of safety or effectiveness or if FDA determines that the listed drug was withdrawn from sale for reasons of safety or effectiveness (21 CFR 314.162).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may petition the Agency to determine, or the Agency may determine on its own initiative, whether a listed drug was withdrawn from sale for reasons of safety or effectiveness. This determination may be made at any time after the drug has been withdrawn from sale, but must be made prior to approving an ANDA that refers to the listed drug (§ 314.161 (21 CFR 314.161)).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.

KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, are the subject of NDA 017533, held by Cheplapharm Arzneimittel GmbH, and initially approved on April 9, 1997. KLONOPIN is indicated for seizure disorders and panic disorder.

KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, are currently listed in the “Discontinued Drug Product List” section of the Orange Book.

Hyman, Phelps & McNamara, P.C. submitted a citizen petition dated June 20, 2025 (Docket No. FDA–2025–P–1808), under 21 CFR 10.30, requesting that the Agency determine whether KLONOPIN (clonazepam) tablets, 0.25 mg, were withdrawn from sale for reasons of safety or effectiveness. Although the citizen petition did not address the 0.125 mg strength, that strength has also been discontinued. On our own initiative, we have also determined whether that strength was withdrawn for safety or effectiveness reasons.

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at this time, FDA has determined under § 314.161 that KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, were not withdrawn for reasons of safety or effectiveness. The petitioner has identified no data or other information suggesting that KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, were withdrawn for reasons of safety or effectiveness. We have carefully reviewed our files for records concerning the withdrawal of

KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, from sale. We have also independently evaluated relevant literature and data for possible postmarketing adverse events. We have found no information that would indicate that these drug products were withdrawn from sale for reasons of safety or effectiveness.

Accordingly, the Agency will continue to list KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, 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. ANDAs that refer to KLONOPIN (clonazepam) tablets, 0.125 mg and 0.25 mg, 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 these drug products should be revised to meet current standards, the Agency will advise ANDA applicants to submit such labeling.

**Grace R. Graham,**

*Deputy Commissioner for Policy, Legislation, and International Affairs.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA–2026–N–0672]

#### **Issuance of Priority Review Voucher; Rare Pediatric Disease Product; WASKYRA (etuvetidigene autotemcel)**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the issuance of a priority review voucher to the sponsor of a rare pediatric disease product application. The Federal Food, Drug, and Cosmetic Act (FD&C Act) authorizes FDA to award priority review vouchers to sponsors of approved rare pediatric disease product applications that meet certain criteria. FDA is required to publish notice of the award of the priority review voucher. FDA has determined that WASKYRA (etuvetidigene autotemcel), approved on December 9, 2025, manufactured by Fondazione Telethon ETS, meets the criteria for a priority review voucher.

**FOR FURTHER INFORMATION CONTACT:** Myrna Hanna, Center for Biologics Evaluation and Research, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 71, Rm. 7301, Silver Spring, MD 20993–0002, 240–402–7911.

**SUPPLEMENTARY INFORMATION:** FDA is announcing the issuance of a priority review voucher to the sponsor of an approved rare pediatric disease product application. Under section 529 of the FD&C Act (21 U.S.C. 360ff), FDA will award priority review vouchers to sponsors of approved rare pediatric disease product applications that meet certain criteria. FDA has determined that WASKYRA (etuvetidigene autotemcel), manufactured by Fondazione Telethon ETS, meets the criteria for a priority review voucher. WASKYRA (etuvetidigene autotemcel) is indicated for the treatment of pediatric patients aged 6 months and older and adults with Wiskott-Aldrich Syndrome (WAS) who have a mutation in the WAS gene and for whom hematopoietic stem cell transplantation (HSCT) is appropriate and no suitable human leukocyte antigen (HLA)-matched related stem cell donor is available.

For further information about the Rare Pediatric Disease Priority Review Voucher Program and for a link to the full text of section 529 of the FD&C Act, go to <https://www.fda.gov/industry/developing-products-rare-diseases-conditions/rare-pediatric-disease-rpd-designation-and-voucher-programs>. For further information about WASKYRA (etuvetidigene autotemcel), go to the Center for Biologics Evaluation and Research’s Approved Cellular and Gene Therapy Products website at <https://www.fda.gov/vaccines-blood-biologics/cellular-gene-therapy-products/approved-cellular-and-gene-therapy-products>.

**Grace R. Graham,**

*Deputy Commissioner for Policy, Legislation, and International Affairs.*

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