

Provisional Translation (as of August 2025).

This English document has been prepared for reference purpose only. In the event of inconsistency and discrepancy between the Japanese original and the English translation, the Japanese text shall prevail.

Points to consider when calculating the maximum daily amount of use of a pharmaceutical excipient

- When the dose per kg of body weight is specified, the maximum amount of use should be calculated on the basis of a 60-kg body weight.
- When the dose per m² of body surface area is specified, the maximum amount of use should be calculated on the basis of a 1.65-m² body surface area.
- For the drug products for children in which the dose per body weight is specified but the upper limit of the daily dose is not specified, the upper limit should be the maximum dose for adults if a drug product with the same indication for adults is available. If such a drug product for adults is not available, calculation should be performed using 60 kg as the upper limit of body weight. When the drug product is used only in infants and toddlers, calculation should be performed by converting the standard body weight at the oldest eligible age (boy or girl body weight, whichever is heavier). For the standard body weight data for infants and toddlers, data from the National Growth Survey on Preschool Children by the Ministry of Health, Labour and Welfare should be referred to.
- For the drug products for external dental use, oral cavity use, or sublingual application, the maximum daily dose may be deemed to be not calculable, except for those in which the dose is specified and entirely swallowed, allowing the calculation of a definite amount of use.
- For drug products for external, otolaryngologic, or ophthalmic use, the maximum amount of use should be calculated based on the concentration (mg/g, mg/mL, etc.).
- The dosage and administration statement "The dose may be adjusted as appropriate," does not need to be considered. Calculation should be performed using the upper limit of the dose on the label.
- For drug products with a statement such as "administer every 6 hours" on the label, the total dose should be calculated on the assumption that the drug product is administered at the labeled interval over 24 hours and then used as the daily dose. For example, administration every 6 hours can be interpreted as 4 doses per day. However, if the drug product is unlikely to be administered repeatedly throughout the day based on common sense, calculation should be performed on a case-by-case basis.
- If the dose per unit time is specified, the upper limit may differ depending on the pathological condition indicated. The maximum daily amount of use may not be calculated except for drug products for which the duration of use can be clearly determined. However, for drugs used for hemodialysis, calculation should be performed using 5 hours as the upper limit of duration of use, in principle.
- For drug products with a label that specifies only the dose per use without specifying the maximum number of doses per day, calculation should be performed using the dose per use. If

the drug product is likely to be clearly administered more than once a day, calculation should be performed on a case-by-case basis.

- For drug products with a label stating that the same dose may be additionally administered as needed, the daily dose should be calculated on the assumption that one additional dose is administered. If multiple additional doses are likely to be clearly administered, calculation should be performed on a case-by-case basis.
- For drug products with multiple dosage regimens, some of which do not allow calculation of the dose, the calculable maximum dose should be used as the maximum daily dose.
- When calculating the amount of excipients used in a drug product, it will be greater for multiple units of the low-strength drug product than for the high-strength drug product (for example, the daily dose of 120 mg can be administered using 2 units of 60-mg tablets or 4 units of 30-mg tablets). If administration using the low-strength drug product is considered feasible in terms of the number of units based on common sense, the maximum amount of use should be calculated for each drug product (for each application form). For drug products for which the package insert instructs the choice of strength in a drug product according to use conditions (for example, a strength is specified to minimize the number of tablets per dose) and measures to prevent the above case, calculation should be performed for each drug product (for each application form) according to the choices in the package insert.
- Excipients contained in extended-release dosage form For a drug product that is formulated to release the active ingredient over 7 days and contains 70 mg of an excipient, for example, the maximum daily amount of use should be deemed to be 70 mg, the amount contained in a dose, instead of $70 \text{ mg}/7 \text{ days} = 10 \text{ mg/day}$. Because the active ingredient can be released slowly in principle, but excipients may not always be released in this manner, they should be assumed to be entirely released at once.
- For drug products, such as anticancer drugs, that are not in extended-release dosage forms but are administered at intervals of several days, for example, on Days 1, 8, 15, and 22 of a 4-week cycle, the maximum amount of use per daily dose should be calculated.
- For drugs products of which the label would not readily lead to calculation of the maximum daily amount of use, calculation may not have to be performed compulsorily, and the reason for omission of the calculation should be described in the column of reason for calculation of conversion factor. For example, drug products exempted from calculation may include those for which an appropriate amount is applied to the oral cavity, but not limited to them.
- Products not directly applied to the human body, such as insecticides, will be excluded from the calculation. In the column of reason for calculation of conversion factor, a note such as “Not calculated because it is not applied to the human body” should be described.
- For drug products available in different strengths, such as capsules, feasible combinations

should be used in the calculation to always return whole numbers as the number of units per dose (for example, if a drug product is available in 200-mg and 150-mg strengths and is used in a 400-mg regimen [A] and a 300-mg regimen [B], the conversion factor for the 150-mg drug product should be calculated using the formula of $300/150 = 2$, instead of $400/150 = 2.66$). However, this does not apply to the drug products for which a conversion factor with a decimal fraction is practical, such as scored tablets.