



DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration
Rockville, MD 20857

NDA 21-061/ S-019, S-020
NDA 21-062/ S-021, S-022

Bristol Myers-Squibb Company
Attention: Joan Fung-Tomc, Ph.D.
Director, Regulatory Science
5 Research Parkway
P. O. Box 5100
Wallingford, CT 06492-7660

Dear Dr. Fung-Tomc:

Please refer to your supplemental new drug applications submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for the following:

Product	NDA Number	Supplement Number	Date of Supplement	Date of Receipt
Tequin [®] (gatifloxacin) Tablets, 200 mg and 400 mg	21-061	019	July 8, 2003	July 9, 2003
		020	October 1, 2003	October 2, 2003
Tequin [®] (gatifloxacin) Injection, 200 mg and 400 mg	21-062	021	July 8, 2003	July 9, 2003
		022	October 1, 2003	October 2, 2003

We acknowledge receipt of your submission to each supplement dated December 26, 2003.

These "Changes being Effected" supplemental new drug applications provide for the following changes to the package insert (additions are double underlined and deletions are in strikethrough):

1. The following paragraph was added and appears immediately before the **DESCRIPTION** section:

To reduce the development of drug-resistant bacteria and maintain the effectiveness of TEQUIN and other antibacterial drugs, TEQUIN[®] should be used only to treat or prevent infections that are proven or strongly suspected to be caused by bacteria.

2. CLINICAL PHARMACOLOGY

- The last paragraph of the **Electrocardiogram** subsection was revised to read:

There is limited information available on the potential for a pharmacodynamic interaction in humans between gatifloxacin and drugs that prolong the QTc interval of an electrocardiogram ~~Therefore, gatifloxacin should not be used with such as~~ such as Class IA and

Class III antiarrhythmics, cisapride, erythromycin, antipsychotics, and tricyclic antidepressants (see **WARNINGS** and **PRECAUTIONS: Information for Patients**).

3. INDICATIONS AND USAGE

- The last paragraph was revised to read:

Appropriate To reduce the development of drug-resistant bacteria and maintain the effectiveness of TEQUIN and other antibacterial drugs, TEQUIN[®] should be used only to treat or prevent infections that are proven or strongly suspected to be caused by susceptible bacteria. When culture and susceptibility tests should be performed before treatment in order to isolate and identify organisms causing infection and to determine their susceptibility to gatifloxacin. Therapy with TEQUIN may be initiated before results of these tests are known; once results become available, appropriate therapy information are available, should be continued they should be considered in selecting or modifying antibacterial therapy. In the absence of such data, local epidemiology and susceptibility patterns may contribute to the empiric selection of therapy.

4. PRECAUTIONS

- The following sentence was added to the beginning of the **General** subsection:

Prescribing TEQUIN[®] in the absence of proven or strongly suspected bacterial infection or a prophylactic indication is unlikely to provide benefit to the patient and increases the risk of the development of drug-resistant bacteria.

- The following sentence was added to the **General** subsection under **Information for Patients**:

Patients should be advised:

- that antibacterial drugs including TEQUIN[®] should only be used to treat bacterial infections. They do not treat viral infections (eg, the common cold). When TEQUIN is prescribed to treat a bacterial infection, patients should be told that although it is common to feel better early in the course of therapy, the medication should be taken exactly as directed. Skipping doses or not completing the full course of therapy may (1) decrease the effectiveness of the immediate treatment and (2) increase the likelihood that bacteria will develop resistance and will not be treatable by TEQUIN or other antibacterial drugs in the future;

- The following sentence concerning VIDEX in the **General, Information for Patients** subsection was revised to read:

- that TEQUIN[®] should be taken 4 hours before VIDEX[®] (didanosine) buffered tablets; ~~buffered solution~~ or ~~buffered pediatric~~ powder for oral solution;

5. ADVERSE REACTIONS

- The second paragraph in the **Post Marketing Adverse Event Reports** subsection was revised to read:

Abnormal renal function (including acute renal failure), acute allergic reaction including anaphylactic reaction and angioneurotic edema, hepatitis, hypotension, increased International Normalized Ratio (INR)/prothrombin time, pancreatitis, severe hyperglycemia (including hyperosmolar nonketotic hyperglycemia), severe hypoglycemia (including hypoglycemic coma), Stevens-Johnson syndrome, syncope, tendon rupture, thrombocytopenia, and torsades de pointes.

6. DOSAGE AND ADMINISTRATION

- The third paragraph was revised to read:

Oral doses of TEQUIN[®] should be administered at least 4 hours before the administration of ferrous sulfate, dietary supplements containing zinc, magnesium, or iron (such as multivitamins), aluminum/magnesium-containing antacids, or VIDEX[®] (didanosine) buffered tablets, ~~buffered solution~~ or buffered pediatric powder for oral solution.

7. All references to the TEQUIN[®] 20 mL (200 mg) vial were deleted throughout the package insert.

We have completed the review of these supplemental new drug applications, as amended, and have concluded that adequate information has been presented to demonstrate that the drug products are safe and effective for use as recommended in the agreed upon labeling text (enclosed). Accordingly, these supplemental applications are approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the submitted draft labeling (package insert submitted December 26, 2003).

Please submit the copies of final printed labeling (FPL) electronically to each application according to the guidance for industry titled *Providing Regulatory Submissions in Electronic Format - NDA* (January 1999). Alternatively, you may submit 20 paper copies of the FPL as soon as it is available but no more than 30 days after it is printed. Please individually mount ten of the copies on heavy-weight paper or similar material. For administrative purposes, these submissions should be designated "FPL for approved supplements NDA 21-061/S-019, S-020 and NDA 21-062/S-021, S-022." Approval of these submissions by FDA is not required before the labeling is used.

If a letter communicating important information about this drug product (i.e., a "Dear Health Care Professional" letter) is issued to physicians and others responsible for patient care, we request that you submit a copy of the letter to each NDA and a copy to the following address:

MEDWATCH, HF-2
FDA
5600 Fishers Lane
Rockville, MD 20857

We remind you that you must comply with the requirements for an approved NDA set forth under 21 CFR 314.80 and 314.81.

If you have any questions, call Robin Anderson, Labeling Reviewer, at (301) 827-2127.

Sincerely,

{See appended electronic signature page}

Renata Albrecht, M. D.
Director
Division of Special Pathogen and Immunologic Drug
Products
Office of Drug Evaluation IV
Center for Drug Evaluation and Research

**This is a representation of an electronic record that was signed electronically and
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/s/

Renata Albrecht
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