Food and Drug Administration Silver Spring MD 20993

NDA 022078/S-016

SUPPLEMENT APPROVAL

AbbVie, Inc. Attention: Richard Leber Manager, Regulatory Affairs-PPG 1 N. Waukegan Road Dept PA77/Building AP30 North Chicago, IL 60064

Dear Mr. Leber:

Please refer to your Supplemental New Drug Application (sNDA) dated September 21, 2012, received September 21, 2012, submitted pursuant to section 505(b)(2) of the Federal Food, Drug, and Cosmetic Act (FDCA) for SIMCOR (niacin ER/simvastatin) Tablets, 500 mg/20 mg, 500 mg/40 mg, 750 mg/20 mg, 1000 mg/20 mg, and 1000 mg/40 mg.

We acknowledge receipt of your amendments dated October 12, 2012.

We also refer to our letter dated August 22, 2012, notifying you, under Section 505(o)(4) of the FDCA, of new safety information that we believe should be included in the labeling for HMG-CoA reductase inhibitor (statin) drugs. This information pertains to the risk of immune-mediated necrotizing myopathy (IMNM).

Supplemental new drug application, S-016, provides for revisions to the labeling for SIMCOR. The agreed upon changes to the language included in our August 22, 2012, letter are as follows (additions are noted by underline and deletions are noted by strikethrough).

In the Full Prescribing Information, under WARNINGS AND PRECAUTIONS, 5.1 Myopathy/Rhabdomyolysis:

There have been rare reports of Immune-r	mediated necrotizing myopathy (IMNM), an
autoimmune myopathy, associated with	(b) (4)
statin (4) use. (b) (4) I	IMNM (b) (4)
is characterized by: proximal m	nuscle weakness and elevated serum creatine
kinase, which persist despite discontinuation	on of statin treatment; muscle biopsy showing
necrotizing myopathy without significant i	inflammation; improvement with
immunosuppressive agents.	

In the Full Prescribing Information, under **ADVERSE REACTIONS**, **6.2 Postmarketing Experience**, **Simvastatin**:

The following additional adverse reactions have been identified during postapproval use of simvastatin. Hypersensitivity reaction including one or more of the following features: anaphylaxis, angioedema, lupus erythematous-like syndrome, vasculitis, purpura, thrombocytopenia, leucopenia, hemolytic anemia, positive ANA, ESR increase, eosinophilia, arthritis, photosensitivity, chills, toxic epidermal necrolysis, erythema multiforme, Stevens-Johnson syndrome, urticaria, fever, dyspnea, and arthralgia; pancreatitis, hepatitis, fatal and non-fatal hepatic failure, pruritus, cataracts, polymyositis, dermatomyositis, peripheral neuropathy, erectile dysfunction, depression, interstitial lung disease, alopecia, a variety of skin changes (e.g., nodules, discoloration, dryness of skin/mucous membranes, changes to hair/nails), muscle cramps, vomiting, malaise.

There have been rare reports of immune-mediated necrotizing myopathy associated with statin use [see *Warnings and Precautions (5.1)*.

We have completed our review of this supplemental application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed, agreed-upon labeling text.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(1)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. Content of labeling must be identical to the enclosed labeling (text for the package insert and patient package insert), with the addition of any labeling changes in pending "Changes Being Effected" (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

Information on submitting SPL files using eLIST may be found in the guidance for industry titled "SPL Standard for Content of Labeling Technical Qs and As" at http://www.fda.gov/downloads/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in MS Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes and annotate each change. To facilitate review of your submission, provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) the package insert(s) to:

Food and Drug Administration Center for Drug Evaluation and Research Office of Prescription Drug Promotion (OPDP) 5901-B Ammendale Road Beltsville, MD 20705-1266

You must submit final promotional materials and package insert(s), accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. Form FDA 2253 is available at http://www.fda.gov/opacom/morechoices/fdaforms/cder.html; instructions are provided on page 2 of the form. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm.

All promotional materials that include representations about your drug product must be promptly revised to be consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 314.70(a)(4)]. The revisions in your promotional materials should include prominent disclosure of the important new safety information that appears in the revised package labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 314.70(a)(4) to the address above or by fax to 301-847-8444.

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

If you have any questions, call Kati Johnson, Regulatory Project Manager, at 301-796-1234.

Sincerely,

{See appended electronic signature page}

Amy G. Egan, M.D., M.P.H.
Deputy Director for Safety
Division of Metabolism and Endocrinology Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

ENCLOSURE:

Content of Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.	
/s/	
AMY G EGAN 10/31/2012	