



NDA 21689/S-014

SUPPLEMENT APPROVAL

AstraZeneca LP
Attention: Judy W. Firor
Director, Global Regulatory Affairs and Patient Safety
1800 Concord Pike, PO Box 8355
Wilmington DE 19803-8355

Dear Ms. Firor:

Please refer to your Supplemental New Drug Application (sNDA) dated May 29, 2008, received May 29, 2008, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Nexium I.V. (esomeprazole sodium) for Injection.

We acknowledge receipt of your amendments dated June 19, 2008, August 7, 2008, August 21, 2008, August 25, 2008, September 3, 2008, September 4, 2008, September 25, 2008, October 9, 2008, October 22, 2009, September 15, 2010, November 16, 2010, January 10, 2011, January 24, 2011, February 14, 2011, February 21, 2011, March 14, 2011, April 6, 2011, April 19, 2011, May 5, 2011, May 23, 2011, June 1, 2011, October 13, 2011, June 13, 2012, December 14, 2012, February 19, 2013, February 28, 2013, March 12, 2013, March 21, 2013, April 22, 2013, June 20, 2013, June 27, 2013, July 16, 2013, July 25, 2013, August 14, 2013, August 22, 2013, September 4, 2013, September 12, 2013 and March 3, 2014 .

The December 14, 2012, submission constituted a complete response to our June 16, 2011, action letter.

This "Prior Approval" supplemental new drug application provides for the use of Nexium I.V. (esomeprazole sodium) for Injection for risk reduction of rebleeding of gastric or duodenal ulcers following therapeutic endoscopy in adults.

APPROVAL & LABELING

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 and with the minor editorial revisions listed below (underlined and strike through text) and indicated in the enclosed labeling.

6 ADVERSE REACTIONS

Risk Reduction of Rebleeding of Gastric or Duodenal Ulcers in Adults

The data described below reflect exposure to NEXIUM I.V. for Injection in 375 patients. NEXIUM I.V. for Injection was studied in a placebo-controlled trial. Patients were randomized to receive NEXIUM I.V. for Injection (n=375) or placebo (n=389). The population was 18 to 98 years old; 68% Male, 87% Caucasian, 1% Black, 7% Asian, 4% other, who presented with endoscopically confirmed gastric or duodenal ulcer bleeding. Following endoscopic hemostasis, patients received either 80 mg esomeprazole as an intravenous infusion over 30 minutes followed by a continuous infusion of 8 mg per hour or placebo for a total treatment duration of 72 hours. After the initial 72-hour period, all patients received oral proton pump inhibitor (PPI) (b) (4) for 27 days.

WAIVER OF HIGHLIGHTS SECTION

Please note that we have previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information.

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(l)] 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, except with the revisions indicated, the enclosed labeling (text for the 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 via 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 with the revisions indicated above 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).

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric study requirement for the above indication because there are too few children with the disease to study and therefore necessary studies are impossible or highly impracticable.

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>.

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 CDR Stacy Barley, Senior Regulatory Project Manager, at (301) 796-2137.

Sincerely,

{See appended electronic signature page}

Donna Griebel, M.D.
Director
Division of Gastroenterology and Inborn Errors
Products
Office of Drug Evaluation III
Center for Drug Evaluation and Research

ENCLOSURE(S):
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/

DONNA J GRIEBEL
03/04/2014