

Food and Drug Administration Silver Spring MD 20993

NDA 021321/S-032

SUPPLEMENT APPROVAL

Baxter Healthcare Corporation Attention: Jennifer Masek-Little Director, Global Regulatory Affairs 32650 North Wilson Road Mail Stop WG2-3S Round Lake, IL 60073

Dear Ms. Masek-Little:

Please refer to your Supplemental New Drug Application (sNDA) dated and received January 8, 2015, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Extraneal (icodextrin) Peritoneal Dialysis Solution.

We acknowledge receipt of your amendments dated March 20, May 22, and August 21, 2015 and your risk evaluation and mitigation strategy (REMS) assessment dated March 3, 2015.

This supplemental new drug application provides for proposed modifications to the approved risk evaluation and mitigation strategy (REMS), and the Medication Guide. This supplement is in response to our December 9, 2014, REMS Modification Notification letter.

APPROVAL & LABELING

We have completed our review of this supplemental application, as amended, and 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(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 the enclosed labeling (text for the package insert, text for the patient package insert, Medication Guide), 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.

Reference ID: 3834142

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/U CM072392.pdf

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that includes labeling changes 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).

We request that the labeling approved today be available on your website within 10 days of receipt of this letter.

RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS

The REMS for Extraneal was originally approved on March 9, 2011, and a REMS modification was approved on February 25, 2014. The REMS consists of a Medication Guide, elements to assure safe use, an implementation system, and a timetable for submission of assessments of the REMS. In order to ensure the benefits of Extraneal outweigh its risks, we determined that you were required to make the following REMS modifications: Changes to the Extraneal REMS and appended materials to align the REMS with the revised label approved in the December 9, 2014, Supplement Approval letter (S-028) for the conversion of the Extraneal label to the Physician's Labeling Rule (PLR).

Your proposed modified REMS, submitted on August 21, 2015, and appended to this letter, is approved.

The timetable for submission of assessments of the REMS remains the same as that approved on March 9, 2011.

There are no changes to the REMS assessment plan described in our February 25, 2014 letter.

We remind you that in addition to the REMS assessments submitted according to the timetable in the approved REMS, you must include an adequate rationale to support a proposed REMS modification for the addition, modification, or removal of any goal or element of the REMS, as described in section 505-1(g)(4) of the FDCA.

We also remind you that you must submit a REMS assessment when you submit a supplemental application for a new indication for use as described in section 505-1(g)(2)(A) of the FDCA. This assessment should include:

- a) An evaluation of how the benefit-risk profile will or will not change with the new indication;
- b) A determination of the implications of a change in the benefit-risk profile for the current REMS;
- c) If the new indication for use introduces unexpected risks: A description of those risks and an evaluation of whether those risks can be appropriately managed with the currently approved REMS.
- d) If a REMS assessment was submitted in the 18 months prior to submission of the supplemental application for a new indication for use: A statement about whether the REMS was meeting its goals at the time of that last assessment and if any modifications of the REMS have been proposed since that assessment.
- e) If a REMS assessment has not been submitted in the 18 months prior to submission of the supplemental application for a new indication for use: Provision of as many of the currently listed assessment plan items as is feasible.
- f) If you propose a REMS modification based on a change in the benefit-risk profile or because of the new indication of use, submit an adequate rationale to support the modification, including: Provision of the reason(s) why the proposed REMS modification is necessary; the potential effect on the serious risk(s) for which the REMS was required, on patient access to the drug, and/or on the burden on the health care delivery system; and other appropriate evidence or data to support the proposed change. Additionally, include any changes to the assessment plan necessary to assess the proposed modified REMS. If you are not proposing REMS modifications, provide a rationale for why the REMS does not need to be modified.

If the assessment instruments and methodology for your REMS assessments are not included in the REMS supporting document, or if you propose changes to the submitted assessment instruments or methodology, you should update the REMS supporting document to include specific assessment instrument and methodology information at least 90 days before the assessments will be conducted. Updates to the REMS supporting document may be included in a new document that references previous REMS supporting document submission(s) for unchanged portions. Alternatively, updates may be made by modifying the complete previous REMS supporting document, with all changes marked and highlighted. Prominently identify the submission containing the assessment instruments and methodology with the following wording in bold capital letters at the top of the first page of the submission:

NDA 021321 REMS CORRESPONDENCE (insert concise description of content in bold capital letters, e.g., UPDATE TO REMS SUPPORTING DOCUMENT - ASSESSMENT METHODOLOGY

An authorized generic drug under this NDA must have an approved REMS prior to marketing. Should you decide to market, sell, or distribute an authorized generic drug under this NDA, contact us to discuss what will be required in the authorized generic drug REMS submission.

We remind you that section 505-1(f)(8) of FDCA prohibits holders of an approved covered application with elements to assure safe use from using any element to block or delay approval of an application under section 505(b)(2) or (j). A violation of this provision in 505-1(f) could result in enforcement action.

Prominently identify the submission containing the REMS assessments or proposed modifications of the REMS with the following wording in bold capital letters at the top of the first page of the submission as appropriate:

NDA 021321 REMS ASSESSMENT

NEW SUPPLEMENT FOR NDA 021321/S-000 CHANGES BEING EFFECTED IN 30 DAYS PROPOSED MINOR REMS MODIFICATION

or

NEW SUPPLEMENT FOR NDA 021321/S-000 PRIOR APPROVAL SUPPLEMENT PROPOSED MAJOR REMS MODIFICATION

or

NEW SUPPLEMENT FOR NDA 021321/S-000
PRIOR APPROVAL SUPPLEMENT
PROPOSED REMS MODIFICATIONS DUE TO SAFETY LABEL
CHANGES SUBMITTED IN SUPPLEMENT XXX

or

NEW SUPPLEMENT (NEW INDICATION FOR USE) FOR NDA 021321/S-000 REMS ASSESSMENT PROPOSED REMS MODIFICATION (if included)

Should you choose to submit a REMS revision, prominently identify the submission containing the REMS revisions with the following wording in bold capital letters at the top of the first page of the submission:

REMS REVISIONS FOR NDA 021321

To facilitate review of your submission, we request that you submit your proposed modified REMS and other REMS-related materials in Microsoft Word format. If certain documents, such as enrollment forms, are only in PDF format, they may be submitted as such, but the preference is to include as many as possible in Word format.

If you do not submit electronically, please send 5 copies of REMS-related submissions.

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, please call:

Lori Anne Wachter, RN, BSN, RAC Regulatory Project Manager for Safety (301) 796-3975

Sincerely,

{See appended electronic signature page}

Mary Ross Southworth, PharmD.
Deputy Director for Safety
Office of Drug Evaluation I
Center for Drug Evaluation and Research

ENCLOSURE(S):
Content of Labeling
REMS

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.	
/s/	
MARY R SOUTHWORTH 10/16/2015	

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