



NDA 020591/S-027

SUPPLEMENT APPROVAL

Abbvie, Inc.
Attention: Robert Baker
Senior Manager, Regulatory Affairs - USA & Canada
1 North Waukegan Road
Dept. PA77/Bldg. AP30
North Chicago, IL 60064

Dear Mr. Baker:

Please refer to your Supplemental New Drug Application (sNDA) dated and received January 11, 2016, submitted under section 505(b)(1) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Tarka (trandolapril/verapamil) 2/180 mg, 1/240 mg, 2/240 mg, and 4/240 mg Tablets.

We also refer to our Approval letter dated July 12, 2016. The label appended to the July 12, 2016 letter contained an error; the text regarding mammalian target of rapamycin (mTOR) was inadvertently omitted. This letter supersedes the July 12, 2016 letter and corrects the error in labeling. The approval date will remain the same.

This supplemental new drug application provides for labeling revised as follows (additions are marked as underlined text and deletions are marked as ~~striketrough text~~):

1. Under **PRECAUTIONS, Drug Interactions**, the following sections were added:

Ivabradine

Concurrent use of verapamil increases exposure to ivabradine and may exacerbate bradycardia and conduction disturbances. Avoid co-administration of verapamil and ivabradine.

Dabigatran

Verapamil, a P-gp inhibitor, increases exposure to dabigatran (a thrombin inhibitor) when administered concomitantly; however, no dose adjustment of dabigatran is required when administered with verapamil.

2. The revision date and version number were updated.

There are no other changes from the last approved package insert.

We have completed our review of this supplemental application, 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), with the addition of any labeling changes in pending “Changes Being Effectuated” (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).

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
Regulatory Project Manager for Safety
(301) 796-3975

Sincerely,

{See appended electronic signature page}

Mary Ross Southworth, PharmD.
Deputy Director for Safety
Division of Cardiovascular and Renal Products
Office of Drug Evaluation 1
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/

MARY R SOUTHWORTH
07/12/2016