

20-949\_ORIG\_APPROVAL\_PKG

**CENTER FOR DRUG EVALUATION AND RESEARCH**

**APPROVAL PACKAGE FOR:**

**APPLICATION NUMBER(S)**

**20-949**

**Trade Name:** AccuNeb Inhalation 0.75 mg per 3 mL and 1.5 mg per 3 mL) Solutions

**Generic Name(s):** (albuterol sulfate)

**Sponsor:** Dey Laboratories, L.P.

**Agent:**

**Approval Date:** April 30, 2001

**Indication:** Provides for the treatment of asthma-related bronchospasm in patients 2 to 12 years of age

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**Approval Letter(s)**



NDA 20-949

Dey Laboratories, L.P.  
2751 Napa Valley Corporate Drive  
Napa, CA 94558

Attention: Peggy J. Berry  
Director  
Regulatory Affairs

Dear Ms. Berry:

Please refer to your new drug application (NDA) dated March 27, 1998, received March 30, 1998, submitted pursuant to section 505(b)(2) of the Federal Food, Drug, and Cosmetic Act for AccuNeb (0.75 mg per 3 mL and 1.5 mg per 3 mL albuterol sulfate) Inhalation Solutions.

We acknowledge receipt of your submissions dated May 18, June 9, 15, and 19, July 1 and 17, September 15 and 29, and October 6, 1998, and March 29 and December 3, 1999, and January 20, February 22, April 21, May 19, October 27, November 10, and December 8 and 12, 2000, and February 27, March 7, 12, and 30, and April 4, 11, 17, 20, 25, 27, and 30, 2001. Your submission of October 27, 2000, constituted a complete response to our June 6, 2000, action letter.

This new drug application provides for the use of AccuNeb (0.75 mg per 3 mL and 1.5 mg per 3 mL albuterol sulfate) Inhalation Solutions for the treatment of asthma-related bronchospasm in patients 2 to 12 years of age.

We have completed the review of this application, as amended, and it is approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the submitted draft labeling (package insert submitted April 30, 2001, patient package insert submitted April 30, 2001, immediate container and carton labels submitted April 25, 2001, and (c) vial text submitted April 17, 2001). Marketing the product with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

Please submit the copies of final printed labeling (FPL) electronically 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 heavyweight paper or similar material. For administrative purposes, this submission should be designated "FPL for approved NDA 20-949." Approval of this submission by FDA is not required before the labeling is used.

We remind you of your agreements to monitor leachables and foreign particulates according to the updated stability protocol provided in the March 30, 2001, amendment. We also remind you of your agreement to provide samples of both strengths of finished product from the first commercial batch when available.

We remind you of your postmarketing study commitment in your submission dated October 27, 2000. This commitment is listed below.

Conduct a 90-day inhalation toxicology study to qualify the  $\sigma$

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Final Report Submission: Within 12 months of the date of this letter

Submit nonclinical and chemistry, manufacturing, and controls protocols and all study final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii), you should include a status summary of each commitment in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies, number of patients entered into each study. All submissions, including supplements, relating to these postmarketing study commitments must be prominently labeled "Postmarketing Study Protocol," "Postmarketing Study Final Report," or "Postmarketing Study Correspondence."

Validation of the regulatory methods has not been completed. At the present time, it is the policy of the Center not to withhold approval because the methods are being validated. Nevertheless, we expect your continued cooperation to resolve any problems that may be identified.

Be advised that, as of April 1, 1999, all applications for new active ingredients, new dosage forms, new indications, new routes of administration, and new dosing regimens are required to contain an assessment of the safety and effectiveness of the product in pediatric patients unless this requirement is waived or deferred (63 FR 66632). We note that you have not fulfilled the requirements of 21 CFR 314.55 (or 601.27). We are deferring submission of your pediatric studies until December 31, 2002. However, in the interim, please submit your pediatric drug development plans for children below the age of 2 years within 120 days from the date of this letter, unless you believe a waiver is appropriate. Within approximately 120 days of receipt of your pediatric drug development plan, we will review your plan and notify you of its adequacy.

If you believe that this drug qualifies for a waiver of the pediatric study requirement, you should submit a request for a waiver with supporting information and documentation in accordance with the provisions of 21 CFR 314.55 within 60 days from the date of this letter. We will notify you within 120 days of receipt of your response whether a waiver is granted. If a waiver is not granted, we will ask you to submit your pediatric drug development plans within 120 days from the date of denial of the waiver.

Pediatric studies conducted under the terms of section 505A of the Federal Food, Drug, and Cosmetic Act may result in additional marketing exclusivity for certain products (pediatric exclusivity). You should refer to the *Guidance for Industry on Qualifying for Pediatric Exclusivity* (available on our web

site at [www.fda.gov/cder/pediatric](http://www.fda.gov/cder/pediatric)) for details. If you wish to qualify for pediatric exclusivity you should submit a "Proposed Pediatric Study Request" (PPSR) in addition to your plans for pediatric drug development described above. We recommend that you submit a Proposed Pediatric Study Request within 120 days from the date of this letter. If you are unable to meet this time frame but are interested in pediatric exclusivity, please notify the Division in writing. FDA generally will not accept studies submitted to an NDA before issuance of a Written Request as responsive to a Written Request. Sponsors should obtain a Written Request before submitting pediatric studies to an NDA. If you do not submit a PPSR or indicate that you are interested in pediatric exclusivity, we will review your pediatric drug development plan and notify you of its adequacy. Please note that satisfaction of the requirements in 21 CFR 314.55 alone may not qualify you for pediatric exclusivity. FDA does not necessarily ask a sponsor to complete the same scope of studies to qualify for pediatric exclusivity as it does to fulfill the requirements of the pediatric rule.

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 Mr. David Hilfiker, Regulatory Project Manager, at (301) 827-1084.

Sincerely yours,

*{See appended electronic signature page}*

  
Robert J. Meyer, M.D.  
Director  
Division of Pulmonary and Allergy Drug Products  
Office of Drug Evaluation II  
Center for Drug Evaluation and Research