

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

20-978 / S-009

Trade Name: Ziagen

Generic Name: (abacavir sulfate)

Sponsor: GlaxoSmithKline

Approval Date: December 24, 2002

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APPLICATION NUMBER:

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APPROVAL LETTER



NDA 20-978/S-009

GlaxoSmithKline
Attn: Kevin A. Miller
Five Moore Drive, P.O. Box 13398
Research Triangle Park, NC 27709

Dear Mr. Miller:

Please refer to your supplemental new drug application dated July 1, 2002, received July 2, 2002, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for ZIAGEN[®] (abacavir) Oral Solution, 20 mg/mL.

This "Changes Being Effected in 30 days" supplemental new drug application provides for an alternate manufacturing, packaging, and testing site at _____ and changes to the container-closure system.

We have completed the review of this supplemental application, and it is approved.

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 Virginia Yoerg, Regulatory Project Manager, at (301) 827-2335.

Sincerely,

{See appended electronic signature page}

Stephen P. Miller, Ph.D.
Chemistry Team Leader for the
Division of Antiviral Drug Products, (HFD-530)
DNDC III, Office of New Drug Chemistry
Center for Drug Evaluation and Research

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/s/

Stephen Paul Miller
12/24/02 02:31:26 PM
NDA 20-978 S-009 is approved
HNY

CENTER FOR DRUG EVALUATION AND RESEARCH

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CHEMISTRY REVIEW(S)

SUPPLEMENTAL NDA CHEMIST'S REVIEW		DUE DATE 1/2/03	1. ORGANIZATION HFD-530	2. NDA NUMBER 20-978	
3. NAME AND ADDRESS OF APPLICANT GlaxoSmithKline Five Moore Drive, P.O. Box 13398 Research Triangle Park, NC 27709 Attn: Kevin A. Miller			4. TYPE OF SUPPLEMENT CBE-30		
			5. DOCUMENT(S)		
			NUMBERS SCM-009	DATED 7/1/02	RECEIVED 7/2/02
6. NAME OF DRUG ZIAGEN® Oral Solution			7. NONPROPRIETARY NAME abacavir oral solution		
8. SUPPLEMENT PROVIDES FOR: An alternate manufacturing, packaging, and testing site at _____ and changes to the container-closure system.				9. AMENDMENTS/DATES	
10. PHARMACOLOGICAL CATEGORY Anti-HIV		11. HOW DISPENSED <input checked="" type="checkbox"/> R <input type="checkbox"/> OTC		12. RELATED IND/NDA/DMF(s)	
13. DOSAGE FORM(S) Oral solution			14. POTENCY (CIES) 20 mg/mL		
15. CHEMICAL NAME AND STRUCTURE (1S,cis)-4-[2-amino-6-(cyclopropylamino)-9H-purin-9-yl]-2-cyclopentene-1-methanol sulfate (salt)				16. MEMORANDA	
17. COMMENTS					
[]					
18. CONCLUSIONS AND RECOMMENDATIONS This Supplement is therefore recommended for approval.					
19. REVIEWER					
NAME George Lunn, Ph.D.		SIGNATURE [signed electronically in DFS]		DATE OF DRAFT REVIEW 12/20/02	
20. CONCURRENCE: HFD-530/SMiller [signed electronically in DFS]					
DFS CC LIST	<input type="checkbox"/> L	GLunn	<input type="checkbox"/> L	Med:	PharmTox
L = Action Letter	<input type="checkbox"/> RL	SMiller	<input type="checkbox"/> RL	PM: VYoerg	Micro
R = Review	<input type="checkbox"/> RL	CChen		Biopharm	

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/s/

George Lunn
12/23/02 01:32:45 PM
CHEMIST

Abacavir solution transfer to Mississauga

Stephen Paul Miller
12/24/02 10:52:02 AM
CHEMIST