

**CENTER FOR DRUG EVALUATION AND RESEARCH**

*APPLICATION NUMBER:*

**50-805**

**PHARMACOLOGY REVIEW**



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
FOOD AND DRUG ADMINISTRATION  
CENTER FOR DRUG EVALUATION AND RESEARCH

## PHARMACOLOGY/TOXICOLOGY REVIEW AND EVALUATION

NDA NUMBER: 50-805  
SERIAL NUMBER: 000  
DATE RECEIVED BY CENTER: 8/3/05  
PRODUCT: Oracea  
INTENDED CLINICAL POPULATION: Patients with Inflammatory Lesions from Rosacea  
SPONSOR: CollaGenex Pharmaceuticals  
DOCUMENTS REVIEWED: Vols. 1, 2 and 4  
REVIEW DIVISION: Division of Dermatology and Dental Drug Products (HFD-540)  
PHARM/TOX REVIEWER: Carmen Booker, Ph.D.  
PHARM/TOX SUPERVISOR: Paul Brown, Ph.D.  
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PROJECT MANAGER: Shalini Jain

Date of review submission to Division File System (DFS): May 1, 2006

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## ***EXECUTIVE SUMMARY***

### **I. Recommendations**

- A. Recommendation on approvability: The product is approvable with respect to nonclinical concerns.
- B. Recommendation for nonclinical studies: The sponsor has committed to conduct a necessary second carcinogenicity study in mice during Phase 4.
- C. Recommendations on labeling: None.

### **II. Summary of nonclinical findings**

#### **A. Brief overview of nonclinical findings**

Doxycycline did not elicit signs of toxicity when administered to CrI:CD(SD)BR rats by gavage on a single occasion at a dose of 500 mg/kg. Of two males and two females that received single doses of 750 mg/kg, only one death occurred (a male). In a 13-week study in which doxycycline was administered to rats at dosages of 25, 100, 400 and 600 mg/kg/day, toxicity was observed at 400 mg/kg/day and above, including adverse clinical signs, a trend toward reduced weight gain, suppressed erythrocytic parameters, reduced plasma protein, reduced weight and hematopoietic activity of the spleen, and mild inflammation of the GI tract, including moderate to marked focal erosions of the stomach. The NOAEL was determined to be 100 mg/kg/day. Daily administration of doxycycline to cynomolgus monkeys at doses of 5, 15 or 30 mg/kg/day for 12 months was generally well tolerated and produced minimal signs of toxicity.

Doxycycline demonstrated no potential to cause genetic toxicity in an *in vitro* point mutation study with mammalian cells (CHO/HGPRT forward mutation assay) or in an *in vivo* micronucleus assay conducted in CD-1 mice. Data from an *in vitro* assay with CHO cells for potential to cause chromosomal aberrations suggest that doxycycline is a weak clastogen.

A two-year bioassay was conducted in rats to assess the carcinogenicity of doxycycline. The only remarkable, statistically significant, treatment-related observation in the study was an increased incidence of uterine polyps in females in the high-dose group (200 mg/kg/day). The sponsor has committed to conduct a second carcinogenicity study in mice during Phase 4.

Doxycycline, as a tetracycline, is likely to induce tooth staining in children when administered to children or pregnant women. Doxycycline adversely affected fertility and reproductive performance of rats. Doxycycline is in pregnancy category D.

B. Pharmacologic activity

Doxycycline is an antibiotic compound as well as an inhibitor of collagenase. However, the speculative mechanism of action in treatment of rosacea is via the inhibition of neutrophil activity and several neutrophil-associated pro-inflammatory processes. No adverse pharmacological activity has been observed in the cardiovascular, respiratory and central nervous systems following doxycycline treatment.

C. Nonclinical safety issues relevant to clinical use

There are no nonclinical safety issues relevant to the clinical use of Oracea™.

## 2.6 PHARMACOLOGY/TOXICOLOGY REVIEW

### 2.6.1 INTRODUCTION AND DRUG HISTORY

**NDA number:** 50-805

**Review number:** 1

**Sequence number/date/type of submission:** N-000/3-Aug-2004

**Information to sponsor:** Yes ( ) No ( X )

**Sponsor and/or agent:** CollaGenex Pharmaceuticals

**Reviewer name:** Carmen D. Booker, Ph.D.

**Division name:** Division of Dermatology and Dental Drug Products

**HFD #:** 540

**Review completion date:**

**Drug:**

Trade name: Oracea

Generic name: Doxycycline monohydrate

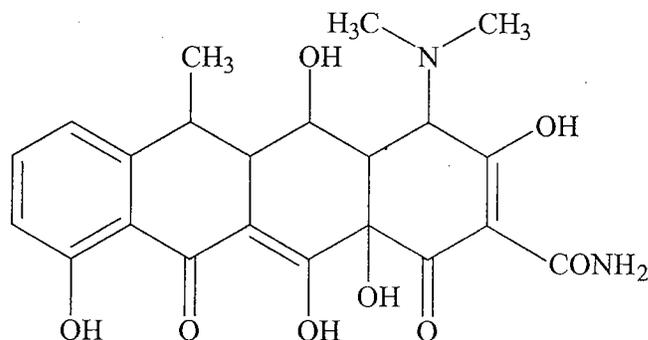
Code name: COL-101

Chemical name: 4-(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-3,5,10,12,12a-pentahydroxy-6-methyl-1,11-dioxo-2-naphthacene-carboxamide monohydrate

CAS registry number: 17086-28-1

Molecular formula/molecular weight:  $C_{22}H_{24}N_2O_8 \cdot H_2O$  / 462.46

Structure:



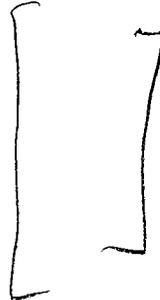
**Relevant INDs/NDAs/DMFs:** IND 67,833; \_\_\_\_\_; NDA 50-744; NDA 50-783;  
IND \_\_\_\_\_

**Drug class:** Antibiotic/collagenase inhibitor

**Intended clinical population:** To ~~\_\_\_\_\_~~ inflammatory lesions in patients with rosacea

**Clinical formulation:** Quantitative Composition (mg/capsule)

Doxycycline Monohydrate, USP/NF  
 Hypromellose, — USP/NF  
 Methacrylic Acid Copolymer, —, USP/NF  
 Triethyl Citrate, USP/NF  
 Talc, USP/NF  
 \_\_\_\_\_  
 Sugar Spheres, — USP/NF  
 Hard Gelatin Capsule — Beige Opaque



**Route of administration:** oral

**Disclaimer:** Tabular and graphical information are constructed by the reviewer unless cited otherwise.

**Studies reviewed within this submission:** None. Please see the Pharmacology review of NDA 50-744 for evaluation of applicable data. NDA 50-744 is held by the same sponsor (CollaGenex) as the current NDA and contains the applicable study reports.

**Studies not reviewed within this submission:** None.

## 2.6.2 PHARMACOLOGY

### 2.6.2.1 Brief summary

Doxycycline is an antibiotic compound as well as an inhibitor of collagenase. However, the speculative mechanism of action in treatment of rosacea is via the inhibition of neutrophil activity and several neutrophil-associated pro-inflammatory processes. No adverse pharmacological activity has been observed in the cardiovascular, respiratory and central nervous systems following doxycycline treatment.

### 2.6.2.2 Primary pharmacodynamics

**Mechanism of action:** The speculative mechanism of action is via anti-inflammation. Neutrophil-mediated processes contribute, in part, to the development of inflammatory lesions in patients with rosacea. Doxycycline has been shown to inhibit neutrophils activity and several neutrophil-associated pro-inflammatory processes.

**Drug activity related to proposed indication:** The inhibition of pro-inflammatory processes, such as those associated with nitric oxide production or interleukin-6, caused by doxycycline decreases the inflammatory response associated with rosacea.

### **2.6.2.3 Secondary pharmacodynamics**

Doxycycline is an antibiotic compound with activity against many species of bacteria when administered at sufficient doses. Tetracyclines, such as doxycycline, are primarily bacteriostatic and have antimicrobial activity against a wide range of gram-positive and gram-negative organisms. It is believed that tetracyclines exert their antimicrobial effect via the inhibition of protein synthesis.

### **2.6.2.4 Safety pharmacology**

The literature and previous clinical experience with Periostat® and Vibramycin suggest that there are no safety pharmacology concerns associated with doxycycline.

### **2.6.2.5 Pharmacodynamic drug interactions**

The labeling for Oracea™ will include the same information on precautions regarding drug interactions as the approved product labeling for Periostat®.

## **2.6.3 PHARMACOLOGY TABULATED SUMMARY**

No new pharmacology or safety pharmacology studies have been conducted on doxycycline. See summaries above.

## **2.6.4 PHARMACOKINETICS/TOXICOKINETICS**

### **2.6.4.1 Brief summary**

No new nonclinical pharmacokinetic studies on doxycycline have been conducted. The pharmacokinetics of doxycycline has been discussed extensively in scientific literature. Doxycycline is well-absorbed from the GI tract. Protein binding is extremely variable. Published values for the serum half-life and renal clearance of doxycycline are 14.5-22 hours and 16 mL/minute, respectively. Doxycycline is excreted in the urine and feces as unchanged drug.

### **2.6.4.2 Methods of Analysis**

Methods of analysis are discussed within individual study reviews. Please see reviews associated with NDA 50-744.

### **2.6.4.3 Absorption**

Doxycycline is well absorbed after oral administration.

### **2.6.4.4 Distribution**

As stated in the approved labeling for Periostat®, doxycycline is greater than 90% bound to plasma proteins.

#### **2.6.4.5 Metabolism**

Major metabolites of doxycycline have not been identified.

#### **2.6.4.6 Excretion**

Doxycycline is excreted in the urine and feces as unchanged drug.

#### **2.6.4.7 Pharmacokinetic drug interactions**

Enzyme inducers such as barbiturates, carbamazepine and phenytoin decrease the half-life of doxycycline. Bismuth subsalicylate, proton pump inhibitors, antacids and nutritional supplements containing aluminum, calcium, magnesium or iron impair the absorption of doxycycline.

#### **2.6.4.8 Other Pharmacokinetic Studies**

No new nonclinical pharmacokinetic studies on doxycycline have been conducted.

#### **2.6.4.9 Discussion and Conclusions**

No new nonclinical pharmacokinetic studies on doxycycline have been conducted.

#### **2.6.4.10 Tables and figures to include comparative TK summary**

No new nonclinical pharmacokinetic studies on doxycycline have been conducted.

### **2.6.5 PHARMACOKINETICS TABULATED SUMMARY**

No new nonclinical pharmacokinetic studies on doxycycline have been conducted. See summaries above.

### **2.6.6 TOXICOLOGY**

Note: All nonclinical studies were conducted using doxycycline hyclate (Periostat®). In humans, Oracea™, 40 mg QD has been shown to be equivalent (using least squares mean  $C_{max}$  and  $AUC_{ss}$  values) to the approved product Periostat® tablets, 20 mg BID (according to the sponsor).

#### **2.6.6.1 Overall toxicology summary**

General toxicology: Please see the reviews associated with NDA 50-744. Briefly, doxycycline did not elicit signs of toxicity when administered to CrI:CD(SD)BR rats by gavage on a single occasion at a dose of 500 mg/kg. Of two males and two females that received single doses of 750 mg/kg, only one death occurred (a male). In a 13-week study

in which doxycycline was administered to rats at dosages of 25, 100, 400 and 600 mg/kg/day, toxicity was observed at 400 mg/kg/day and above, including adverse clinical signs, a trend toward reduced weight gain, suppressed erythrocytic parameters, reduced plasma protein, reduced weight and hematopoietic activity of the spleen, and mild inflammation of the GI tract, including moderate to marked focal erosions of the stomach. The NOAEL was determined to be 100 mg/kg/day. Daily administration of doxycycline to cynomolgus monkeys at doses of 5, 15 or 30 mg/kg/day for 12 months was generally well tolerated and produced minimal signs of toxicity.

Genetic toxicology: Please see the reviews associated with NDA 50-744. Briefly, doxycycline demonstrated no potential to cause genetic toxicity in an *in vitro* point mutation study with mammalian cells (CHO/HGPRT forward mutation assay) or in an *in vivo* micronucleus assay conducted in CD-1 mice. Data from an *in vitro* assay with CHO cells for potential to cause chromosomal aberrations suggest that doxycycline is a weak clastogen.

Carcinogenicity: A two-year bioassay was conducted in rats to assess the carcinogenicity of doxycycline. The only remarkable, statistically significant, treatment-related observation in the study was an increased incidence of uterine polyps in females in the high-dose group (200 mg/kg/day). The sponsor has committed to conduct a second carcinogenicity study in mice during Phase 4.

Reproductive toxicology: Doxycycline, as a tetracycline, is likely to induce tooth staining in children when administered to children or pregnant women. Doxycycline adversely affected fertility and reproductive performance of rats. Doxycycline is in pregnancy category D.

#### **2.6.6.2 Single-dose toxicity**

Please see the reviews associated with NDA 50-744. No new toxicity studies on doxycycline have been submitted.

#### **2.6.6.3 Repeat-dose toxicity**

Please see the reviews associated with NDA 50-744. No new toxicity studies on doxycycline have been submitted.

#### **2.6.6.4 Genetic toxicology**

Please see the reviews associated with NDA 50-744. No new genetic toxicology studies on doxycycline have been submitted.

#### **2.6.6.5 Carcinogenicity**

Please see the reviews associated with NDA 50-744. No new carcinogenicity studies on doxycycline have been submitted.

The sponsor has submitted a protocol for a carcinogenicity study in mice to be conducted as a Phase 4 commitment. The sponsor intends to conduct a 7-day dose range finding study in July 2006. A subsequent 4-week toxicology study will be conducted in September 2006. The sponsor anticipates that a 13-week toxicology study will begin in January 2007. During June 2007, the sponsor will file the proposed doses for use in the 104-week carcinogenicity study with the Agency for review by the CAC. The 104-week carcinogenicity study will begin in August of 2007. The sponsor anticipates having a final report for the carcinogenicity study available in February 2010.

#### **2.6.6.6 Reproductive and developmental toxicology**

Please see the reviews associated with NDA 50-744. No new reproductive and developmental toxicology studies on doxycycline have been submitted.

#### **2.6.6.7 Local tolerance**

Oracea™ is orally ingested; therefore, local tolerance is not a safety concern.

#### **2.6.6.8 Special toxicology studies**

Please see the reviews associated with NDA 50-744. No new special toxicology studies on doxycycline have been submitted.

#### **2.6.6.9 Discussion and Conclusions**

Doxycycline did not elicit signs of toxicity when administered to Crl:CD(SD)BR rats by gavage on a single occasion at a dose of 500 mg/kg. Of two males and two females that received single doses of 750 mg/kg, only one death occurred (a male). In a 13-week study in which doxycycline was administered to rats at dosages of 25, 100, 400 and 600 mg/kg/day, toxicity was observed at 400 mg/kg/day and above, including adverse clinical signs, a trend toward reduced weight gain, suppressed erythrocytic parameters, reduced plasma protein, reduced weight and hematopoietic activity of the spleen, and mild inflammation of the GI tract, including moderate to marked focal erosions of the stomach. The NOAEL was determined to be 100 mg/kg/day. Daily administration of doxycycline to cynomolgus monkeys at doses of 5, 15 or 30 mg/kg/day for 12 months was generally well tolerated and produced minimal signs of toxicity.

Doxycycline demonstrated no potential to cause genetic toxicity in an *in vitro* point mutation study with mammalian cells (CHO/HGPRT forward mutation assay) or in an *in vivo* micronucleus assay conducted in CD-1 mice. Data from an *in vitro* assay with CHO cells for potential to cause chromosomal aberrations suggest that doxycycline is a weak clastogen.

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mg/kg/day). The sponsor has committed to conduct a second carcinogenicity study in mice during Phase 4.

Doxycycline, as a tetracycline, is likely to induce tooth staining in children when administered to children or pregnant women. Doxycycline adversely affected fertility and reproductive performance of rats. Doxycycline is in pregnancy category D.

**2.6.6.10 Tables and Figures**

Please see the reviews associated with NDA 50-744. No new toxicity studies on doxycycline have been submitted.

**2.6.7 TOXICOLOGY TABULATED SUMMARY**

No new toxicology studies on doxycycline have been submitted. See summaries above.

**OVERALL CONCLUSIONS AND RECOMMENDATIONS**

Conclusions: There are no nonclinical safety issues relevant to the clinical use of Oracea™.

Unresolved toxicology issues: Sponsor has committed to conduct a 2-year carcinogenicity study with doxycycline monohydrate in mice.

Recommendations: NDA 50-805 is approvable in regard to pharmacologic and toxicologic concerns.

Suggested labeling: The labeling for Oracea™ with regard to nonclinical safety will be the same as that approved for Periostat®, with the exception of the section entitled “Carcinogenesis, Mutagenesis, Impairment of Fertility”. In this section, the sponsor was asked (in an information request sent April 7, 2006) to use AUC values for exposure comparisons. In a response sent to the Agency on April 19, 2006, the sponsor adjusted the label using AUC data collected in preclinical studies (see attached table). The label is acceptable to this reviewer.

Signatures (optional):

Reviewer Signature \_\_\_\_\_

Supervisor Signature \_\_\_\_\_ Concurrence Yes \_\_\_ No \_\_\_

## APPENDIX/ATTACHMENTS

Table 2. Comparison of Preclinical Versus Human Exposure

Study	Dose (mg/kg/day)	Dose (mg/m <sup>2</sup> /day)	AUC <sub>0-24</sub> (ng*h/ml), average	Dose increase (factor)	AUC increase (factor)
13 week oral tox. in rats	0 (Control)	0 (Control)	-		
	25 mg/kg	162.5 mg/m <sup>2</sup>	13,711		
	100 mg/kg	650 mg/m <sup>2</sup>	54,642	4	4
	400 mg/kg	2600 mg/m <sup>2</sup>	166,490	4	3.05
	600 mg/kg	3900 mg/m <sup>2</sup>	152,062	1.5	0.91
2 year carcinogenicity in rats	20 mg/kg	130 mg/m <sup>2</sup>	10,968 <sup>a</sup>		
	75 mg/kg	487.5 mg/m <sup>2</sup>	40,981 <sup>a</sup>		
	200 mg/kg	1300 mg/m <sup>2</sup>	91,925 <sup>b</sup>		
Reproductive toxicology, rat	50 mg/kg	325 mg/m <sup>2</sup>	27,321 <sup>a</sup>		
Human Exposure	0.5 mg/kg	22.2 mg/m <sup>2</sup>	7.543*		
Carcinogenicity 200 mg/kg multiple vs. human dose	400	58.6	12.2		
Reproductive 50 mg/kg multiple vs. human dose	100	5.6	3.6		

<sup>a</sup> interpolation calculated assuming dose-linearity<sup>b</sup> interpolation calculated as  $Y = 372.83x + 17359$ 

\* data from study COL-101-SSPK-106

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/s/

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