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***APPLICATION NUMBER:***

**ANDA 077707**

**APPROVAL LETTER**



ANDA 077707

Teva Pharmaceuticals USA  
Attention: Jean W. Zwicker  
Senior Director, Regulatory Affairs  
1090 Horsham Road  
P.O. Box 1090  
North Wales, PA 19454

Dear Madam:

This is in reference to your abbreviated new drug application (ANDA) dated May 13, 2005, submitted pursuant to section 505(j) of the Federal Food, Drug, and Cosmetic Act (the Act), for Methylphenidate Hydrochloride Extended-release Capsules (CD), 10 mg, 20 mg and 30 mg (Once Daily).

Reference is also made to your amendments dated January 13, May 4, August 23, November 17, and December 4, 2006; April 13 (2 submissions), April 18, July 23, and November 5, 2007; January 17, March 5, March 19, April 9, July 30, and August 29, 2008; January 20, May 4, and July 15, 2009; September 24, and November 15, 2010; March 7, and October 3, 2011; and February 28, and May 3, 2012.

We have completed the review of this ANDA and have concluded that adequate information has been presented to demonstrate that the drug is safe and effective for use as recommended in the submitted labeling. Accordingly the ANDA is approved, effective on the date of this letter. The Division of Bioequivalence has determined your Methylphenidate Hydrochloride Extended-release Capsules (CD), 10 mg, 20 mg and 30 mg, to be bioequivalent and, therefore, therapeutically equivalent to the reference listed drug (RLD), Metadate CD Extended-release Capsules, 10 mg, 20 mg, and 30 mg, respectively, of UCB, Inc. (UCB).

Your dissolution testing should be incorporated into the stability and quality control program using the same method proposed in your ANDA. The "interim" dissolution specifications are as follows:

Apparatus: USP Apparatus II (paddle)  
Speed: 50 rpm  
Medium: Water  
Volume: 500 mL  
Temperature: 37 ± 0.5 °C  
Sampling time: 1, 2, 4, 8, 12 hours

Specifications:

<u>Time (Hours)</u>	<u>Percent Dissolved</u>
1	(b) (4)
2	(b) (4)
4	(b) (4)
8	(b) (4)
12	NMT (b) (4)

The "interim" dissolution test(s) and tolerances should be finalized by submitting dissolution data from the first three production size batches. These data should be submitted as a "Special Supplement - Changes Being Effected" if there are no revisions to be made to the "interim" specifications, or if the final specifications are tighter than the "interim" specifications. In all other instances, the information should be submitted in the form of a Prior Approval Supplement.

The RLD upon which you have based your ANDA, UCB's Metadate CD Extended-release Capsules, 10 mg, 20 mg and 30 mg, is subject to a period of patent protection. As noted in the agency's publication titled Approved Drug Products with Therapeutic Equivalence Evaluations (the "Orange Book") U.S. Patent No. 6,344,215 (the '215 patent), is scheduled to expire on October 27, 2020.

Your ANDA contains a paragraph IV certification under section 505(j)(2)(A)(vii)(IV) of the Act stating that the '215 patent is invalid, unenforceable, or will not be infringed by your manufacture, use, or sale of Methylphenidate Hydrochloride Extended-release Capsules (CD), 10 mg, 20 mg, and 30 mg (Once Daily), under this ANDA. You have notified the agency that Teva Pharmaceuticals USA (Teva) complied with the requirements of section 505(j)(2)(B) of the Act, and that no action for infringement was brought against Teva within the statutory 45-day period, which action would have resulted in a 30-month stay of approval under section 505(j)(5)(B)(iii).

With respect to 180-day generic drug exclusivity, Teva was the first applicant to submit a substantially complete ANDA with a paragraph IV certification for Methylphenidate Hydrochloride Extended-Release Capsules (CD), 10 mg, 20 mg and 30 mg, and Teva

has lawfully maintained this certification. Your ANDA was received by the agency on May 13, 2005, and was never granted tentative approval. This ANDA, therefore, was not granted tentative approval within the 30-month period described in section 505(j)(5)(D)(i)(IV). Nevertheless, the agency has determined that the failure to obtain tentative approval within the 30-month period was caused by a change in or a review of the requirements for approval of the application imposed after the date on which the application was filed.<sup>1</sup> We therefore conclude that the 180-day exclusivity period described in section 505(j)(5)(B)(iv) of the Act was not forfeited by Teva, and that with this approval Teva is eligible for 180 days of generic drug exclusivity for Methylphenidate Hydrochloride Extended-Release Capsules (CD), 10 mg, 20 mg and 30 mg. This exclusivity, which is provided for in section 505(j)(5)(B)(iv) of the Act, will begin to run from the date of the first commercial marketing of Methylphenidate Hydrochloride Extended-Release Capsules (CD), 10 mg, 20 mg and 30 mg (including the first commercial marketing of the listed drug) by any first applicant. Within 10 days of first commercial marketing, please submit correspondence to this ANDA informing the agency of the date you begin commercial marketing of Methylphenidate Hydrochloride Extended-Release Capsules (CD), 10 mg, 20 mg, and 30 mg. Please also be aware that, under section 505(j)(5)(D), 180-day exclusivity shall be forfeited by Teva if a forfeiture event, as described in section 505(j)(5)(D), occurs with respect to Teva.

Under section 506A of the Act, certain changes in the conditions described in this ANDA require an approved supplemental application before the change may be made.

Please note that if FDA requires a Risk Evaluation & Mitigation Strategy (REMS) for a listed drug, an ANDA citing that listed drug also will be required to have a REMS. See section 505-1(i) of the Act.

Postmarketing reporting requirements for this ANDA are set forth in 21 CFR 314.80-81 and 314.98. The Office of Generic Drugs should be advised of any change in the marketing status of this drug.

Promotional materials may be submitted to FDA for comment prior to publication or dissemination. Please note that these submissions are voluntary. If you desire comments on proposed

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<sup>1</sup> A citizen petition was submitted that required the agency to review the requirements for approval for generic drug products for which Metadate CD is the RLD. See Docket No. FDA-2004-P-0290 (formerly 2004P-0225).

launch promotional materials with respect to compliance with applicable regulatory requirements, we recommend you submit, in draft or mock-up form, two copies of both the promotional materials and package insert directly to:

Food and Drug Administration  
Center for Drug Evaluation and Research  
Office of Prescription Drug Promotion  
5901-B Ammendale Road  
Beltsville, MD 20705

We call your attention to 21 CFR 314.81(b)(3) which requires that all promotional materials be submitted to the Office of Prescription Drug Promotion with a completed Form FDA 2253 at the time of their initial use.

As soon as possible, but no later than 14 days from the date of this letter, submit, using the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format, as described at

<http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>, that is identical in content to the approved labeling (including the package insert, and any patient package insert and/or Medication Guide that may be required).

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 via publicly available labeling repositories.

Sincerely yours,

*{See appended electronic signature page}*

Gregory P. Geba, M.D., M.P.H.  
Director  
Office of Generic Drugs  
Center for Drug Evaluation and Research

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**This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.**  
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/s/  
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ROBERT L WEST

07/19/2012

Deputy Director, Office of Generic Drugs  
for Gregory P. Geba, M.D., M.P.H.