

NDA 21-141
NDA 21-176

May 26, 2000

GelTex Pharmaceuticals, Inc.
Attention: Martha J. Carter
Vice President, Regulatory Affairs
153 Second Avenue
Waltham, MA 02451

Dear Ms. Carter:

Please refer to your new drug applications (NDAs) dated July 30, 1999, received July 30, 1999, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Welchol (colesevelam hydrochloride) Tablets (NDA 21-176) and Capsules (NDA 21-141).

We acknowledge receipt of your submissions to both NDAs dated September 7 and 28, October 5 and 14, and November 3 and 29, 1999, and February 3 and 4, March 8, 23, 29, and 30, April 7, 18, 20, 25, 26, and 28, and May 8, 15, and 24, 2000.

We also acknowledge receipt of your submission to NDA 21-176 dated March 27, 2000.

These new drug applications provide for the use of Welchol (colesevelam hydrochloride) tablets and capsules, alone or in combination with an HMG-CoA reductase inhibitor, for the reduction of elevated LDL-cholesterol in patients with primary hypercholesterolemia (Frederickson Type IIa).

We have completed the review of these applications, as amended, and have concluded that adequate information has been presented to demonstrate that the drug product is safe and effective for use as recommended in the agreed-upon labeling text. Accordingly, the applications are approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the submitted draft labeling (package inserts submitted May 24, 2000, immediate container and carton labels submitted April 26, 2000). 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 20 copies of the FPL as soon as it is available, in no case more than 30 days after it is printed. Please individually mount ten of the copies on heavy-weight paper or similar material. For administrative purposes, these submissions should be designated **AFPL** for approved NDA 21-141[@] and **AFPL** for approved NDA 21-176.[@] Approval of these submissions by FDA is not required before the labeling is used.

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. We are deferring submission of your pediatric studies until December 3, 2001. However, in the interim, please submit your pediatric drug development plan 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) 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 of Metabolic and Endocrine Drug Products 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.

In addition, please submit three copies of the introductory promotional materials that you propose to use for this product. All proposed materials should be submitted in draft or mock-up form, not final print. Please submit one copy to the Division of Metabolic and Endocrine Drug Products and two copies of both the promotional materials and the package insert directly to:

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Division of Drug Marketing, Advertising, and Communications, HFD-40
Food and Drug Administration
5600 Fishers Lane
Rockville, Maryland 20857

Please submit one market package of each drug product when it is available.

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 William C. Koch, R.Ph., Regulatory Project Manager, at (301) 827-6412.

Sincerely,

/s/ Lisa Rarick, M.D. for

John K. Jenkins, M.D.
Director
Office of Drug Evaluation II
Center for Drug Evaluation and Research