



NDA 20-919

Pfizer, Inc.
Attention: Nickie V. Kilgore, D.V.M.
Senior Associate Director, Worldwide Regulatory Affairs
50 Pequot Avenue MS6025-B2168
New London, CT 06320

Dear Dr. Kilgore:

Please refer to your new drug application (NDA) dated December 17, 1997, received December 17, 1997, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Geodon (ziprasidone mesylate) for Injection.

We acknowledge receipt of your submissions dated December 21, 2001, February 13, 2002, March 21, 2002, March 31, 2002, June 7, 2002, and June 12, 2002. Your submission of December 21, 2001 constituted a complete response to our March 6, 2001 action letter.

This new drug application provides for the use of Geodon (ziprasidone mesylate) for Injection for the treatment of acute agitation in schizophrenic patients for whom treatment with ziprasidone is appropriate and who need intramuscular antipsychotic medication for rapid control of the agitation.

We have completed the review of this application, 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 enclosed labeling text. Accordingly, the application is approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the enclosed labeling (text for the package insert, text for the patient package insert). 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 heavy-weight paper or similar material. For administrative purposes, this submission should be designated "FPL for approved NDA 20-919." Approval of this submission by FDA is not required before the labeling is used.

Phase IV Commitment

The pharmacokinetic data submitted do not provide a justification for eliminating our recommendation for an assessment of the reproductive toxicity of IM ziprasidone [to include dosing during all stages of development]. The recommendation was made based on a concern that SBECD may affect the

reproductive toxicity potential of ziprasidone, particularly considering that ziprasidone and SBECD, each alone produces adverse effects on reproduction.

Therefore, we remind you of your postmarketing study commitment (email of June 19, 2002) to conduct an assessment of the reproductive toxicity of IM ziprasidone. This study should be conducted Phase 4 using ziprasidone in combination with SBECD. If formulation problems are potentially dose-limiting, you should consider alternative dosing regimens, e.g., b.i.d. dosing. Please refer to the ICH document, Detection of Toxicity to Reproduction for Medicinal Products [ICH-S5A, Sept 1994] for guidance.

Submit clinical protocols to your IND for this product. Submit non-clinical and chemistry, manufacturing, and controls protocols, and all final study 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 June 2005. However, in the interim, please submit your pediatric drug development plans 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 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 Steven D. Hardeman, R.Ph., Senior Regulatory Project Manager, at (301) 594-5525.

Sincerely,

{See appended electronic signature page}

Russell Katz, M.D.
Director
Division of Neuropharmacological Drug Products
Office of Drug Evaluation I
Center for Drug Evaluation and Research

Enclosure

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

/s/

Russell Katz
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