Dear Ms. Miller:

Please refer to your new drug application (NDA) originally submitted April 30, 2004, and resubmitted May 30 and December 5, 2007 under section 505(b)(1) of the Federal Food, Drug, and Cosmetic Act for nebivolol 2.5, 5, and 10 mg Tablets.

We acknowledge receipt of your submissions dated December 2, 4, and 5, 2007.

The December 5, 2007 submission constituted a complete response to our November 30, 2007 approvable letter.

This new drug application provides for the use of Bystolic (nebivolol) 2.5, 5, and 10 mg Tablets for the treatment of hypertension alone or in combination with other antihypertensive agents.

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling text.

NDA 21-742 was not referred to an advisory committee for review because there are several previously approved agents in the β-blocker class of drugs, evaluation of the safety data did not reveal particular safety issues that were unexpected for this class, and the design and results of the efficacy trials did not pose particular concerns.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, please submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format as described at http://www.fda.gov/oc/datacouncil/spl.html that is identical to the enclosed labeling (text for the package insert). Upon receipt, we will transmit that version to the National Library of Medicine for public dissemination. For administrative purposes, please designate this submission, “SPL for approved NDA 21-742.”
We acknowledge your November 30, 2007 submission containing final printed carton and container labels.

Marketing the product(s) with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

**PEDIATRIC RESEARCH EQUITY ACT (PREA)**

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. We are waiving the pediatric study requirement for this application because there is evidence suggesting that nebivolol would not be safe in all pediatric age groups. The safety concern is the possible risk of changes in long-term fertility. Given the availability of many β-blockers with properties similar to nebivolol, there seems no good reason to pursue pediatric studies.

**POSTMARKETING COMMITMENT**

We remind you of the agreed-upon postmarketing study commitment listed below.

1. Conduct a placebo-controlled withdrawal study following at least three months of treatment.

   - Final Protocol Submission: by 04/2008
   - Study Start: by 10/2008
   - Final Report Submission: by 12/2010

Submit clinical protocols to your IND for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all study final 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 should be prominently labeled “Postmarketing Study Commitment Protocol”, “Postmarketing Study Commitment Final Report”, or “Postmarketing Study Commitment Correspondence.”

**PROMOTIONAL MATERIALS**

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the package insert(s) to:

Food and Drug Administration  
Center for Drug Evaluation and Research  
Division of Drug Marketing, Advertising, and Communications  
5901-B Ammendale Road  
Beltville, MD 20705-1266
As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the package insert(s), at the time of initial dissemination or publication, accompanied by a Form FDA 2253. For instruction on completing the Form FDA 2253, see page 2 of the Form. For more information about submission of promotional materials to the Division of Drug Marketing, Advertising, and Communications (DDMAC), see www.fda.gov/cder/ddmac.

LETTERS TO HEALTH CARE PROFESSIONALS

If you issue a letter communicating important safety related information about this drug product (i.e., a “Dear Health Care Professional” letter), we request that you submit an electronic copy of the letter to both this NDA and to the following address:

MedWatch
Food and Drug Administration
HFD-001, Suite 5100
5515 Security Lane
Rockville, MD 20852

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

MEDWATCH-TO-MANUFACTURER PROGRAM

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at www.fda.gov/medwatch/report/mmp.htm.

If you have any questions, please call Dan Brum, Pharm.D., MBA, Regulatory Health Project Manager, at (301)796-0578.

Sincerely,

{See appended electronic signature page}

Robert Temple, M.D.
Director
Office of Drug Evaluation I
Center for Drug Evaluation and Research

CC: Enclosed agreed-upon labeling text
This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

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Robert Temple
12/17/2007 05:53:53 PM