



NDA 022504

NDA APPROVAL

Kendle International
Attention: Michelle Wilson
U.S. Agent for Acrux Pharma Pty Ltd.
441 Vine Street, Suite 500
Cincinnati, OH 45202

Dear Ms. Wilson:

Please refer to your New Drug Application (NDA) dated and received January 25, 2010, submitted under section 505(b)/pursuant to section 505(b)(2) of the Federal Food, Drug, and Cosmetic Act for Axiron[®] (testosterone) topical solution.

This new drug application provides for the use of Axiron[®] (testosterone) topical solution for replacement therapy in males for conditions associated with a deficiency or absence of endogenous testosterone.

We acknowledge receipt of your amendments dated February 3, March 3, April 2, May 12 and 20, June 11 and 18, July 1 and 30, August 16, September 3 and 24, October 1, 14, and 20, and November 19, 2010.

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.

We request that the labeling approved today be available on your website within 10 days of receipt of this letter.

We are waiving the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information. This waiver applies to all future supplements containing revised labeling unless we notify you otherwise.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit, via 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 to the enclosed labeling text for the package insert, Medication Guide and REMS.

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/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND IMMEDIATE CONTAINER LABELS

Submit final printed carton and container labels that are identical to the carton and immediate container labels submitted on November 19, 2010, as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry titled “Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008).” Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission “**Final Printed Carton and Container Labels for approved NDA 022504.**”

Approval of this submission by FDA is not required before the labeling is used.

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

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric study requirement for this application because the necessary studies would be impossible or highly impractical and there are too few children with the disease/condition to study.

RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS

Section 505-1 of the FDCA authorizes FDA to require the submission of a risk evaluation and mitigation strategy (REMS), if FDA determines that such a strategy is necessary to ensure that the benefits of the drug outweigh the risks [section 505-1(a)].

In accordance with section 505-1 of FDCA, we have determined that a REMS is necessary for Axiron[®] (testosterone) to ensure that the benefits of the drug outweigh the risk of secondary exposure of children to testosterone due to drug transfer from adult men using this product.

In accordance with section 505-1 of FDCA, as one element of a REMS, FDA may require the development of a Medication Guide as provided for under 21 CFR 208. Pursuant to 21 CFR 208, FDA has determined that Axiron[®] poses a serious and significant public health

concern requiring the distribution of a Medication Guide. The Medication Guide is necessary for patients' safe and effective use of Axiron[®]. FDA has determined that Axiron[®] is a product for which patient labeling could help prevent serious adverse effects and that has serious risks (relative to benefits) of which patients should be made aware because information concerning the risks could affect patients' decisions to use, or continue to use, Axiron[®] and that the Medication Guide is important to health and patient adherence to directions for use is crucial to the drug's effectiveness. Under 21 CFR 208, you are responsible for ensuring that the Medication Guide is available for distribution to patients who are dispensed Axiron[®].

Your proposed REMS, submitted on May 12, 2010, and appended to this letter, is approved. The REMS consists of a Medication Guide and a timetable for submission of assessments of the REMS. Your proposed timetable for submission of assessments (18 months, 3 years, and 7 years) is acceptable.

The REMS assessment plan should include, but is not limited to, an evaluation of patients' understanding of the serious risks of Axiron[®].

Assessments of an approved REMS must also include, under section 505-1(g)(3)(B) and (C), information on the status of any post approval study or clinical trial required under section 505(o) or otherwise undertaken to investigate a safety issue. With respect to any such post approval study, you must include the status of such study, including whether any difficulties completing the study have been encountered. With respect to any such post approval clinical trial, you must include the status of such clinical trial, including whether enrollment has begun, the number of participants enrolled, the expected completion date, whether any difficulties completing the clinical trial have been encountered, and registration information with respect to requirements under subsections (i) and (j) of section 402 of the Public Health Service Act. You can satisfy these requirements in your REMS assessments by referring to relevant information included in the most recent annual report required under section 506B and 21 CFR 314.81(b)(2)(vii) and including any material or significant updates to the status information since the annual report was prepared. Failure to comply with the REMS assessments provisions in section 505-1(g) could result in enforcement action.

We remind you that in addition to the assessments submitted according to the timetable included in the approved REMS, you must submit a REMS assessment and may propose a modification to the approved REMS when you submit a supplemental application for a new indication for use as described in section 505-1(g)(2)(A) of FDCA.

Prominently identify the submission containing the REMS assessments or proposed modifications with the following wording in bold capital letters at the top of the first page of the submission:

NDA 022504 REMS ASSESSMENT

**NEW SUPPLEMENT FOR NDA 022504
PROPOSED REMS MODIFICATION
REMS ASSESSMENT**

**NEW SUPPLEMENT (NEW INDICATION FOR USE)
FOR NDA 022504
REMS ASSESSMENT
PROPOSED REMS MODIFICATION (if included)**

If you do not submit electronically, please send 5 copies of REMS-related submissions

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 to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Drug Marketing, Advertising, and Communications
5901-B Ammendale Road
Beltsville, MD 20705-1266

As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the package insert, 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 <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>.

LETTERS TO HEALTH CARE PROFESSIONALS

If you decide to 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, at least 24 hours prior to issuing the letter, an electronic copy of the letter to this NDA to the following address:

MedWatch Program
Office of Special Health Issues
Food and Drug Administration
10903 New Hampshire Ave
Building 32, Mail Stop 5353
Silver Spring, MD 20993

REPORTING REQUIREMENTS

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

If you have any questions, call Jeannie Roule, Regulatory Project Manager, at (301) 796-3993.

Sincerely,

{See appended electronic signature page}

George Benson, M.D.
Deputy Director
Division of Reproductive and Urologic Products
Office of Drug Evaluation III
Center for Drug Evaluation and Research

ENCLOSURES:

Content of Labeling
Medication Guide
REMS

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

/s/

GEORGE S BENSON
11/23/2010