



NDA 21-254/S-012

**SUPPLEMENT APPROVAL**

GlaxoSmithKline  
P. O. Box 13398  
Five Moore Drive  
Research Triangle Park, NC 27709-3398

Attention: Kevin C. Fitzgerald, R. Ph.  
Director, Regulatory Affairs

Dear Mr. Fitzgerald:

Please refer to your Supplemental New Drug Application (sNDA) dated March 19, 2010, received March 19, 2010, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Advair HFA (fluticasone propionate and salmeterol xinafoate) Inhalation Aerosol 45 mcg/21 mcg, 115 mcg/21 mcg, and 230 mcg/21 mcg.

We acknowledge receipt of your amendments dated May 17, and September 24, 2010, and your risk evaluation and mitigation strategy (REMS) assessment dated March 19, 2010.

This Prior Approval supplemental new drug application provides for proposed modifications to your approved REMS.

**CONTENT OF LABELING**

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 to the enclosed labeling (text for the Medication Guide) and include the labeling changes proposed in any pending "Changes Being Effected" (CBE) supplements and any annual reportable changes not included in the enclosed labeling. 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 from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling

[21 CFR 314.50(l)(1)(i)] in MS Word format that includes the changes approved in this supplemental application.

### **RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS**

The REMS for Advair HFA Inhalation Aerosol was originally approved on July 31, 2008. The REMS consists of a Medication Guide, and a timetable for submission of assessments of the REMS. Your proposed modifications to the REMS consist of a revised Medication Guide and communication plan with information about the risk of serious asthma outcomes (asthma related death, intubations, and hospitalization), and a timetable for submission of the REMS.

Your proposed modified REMS, submitted on September 24, 2010, and appended to this letter is approved. The modified REMS consists of a Medication Guide, communication plan, and a timetable for submission of assessments of the REMS.

The timetable for submission of assessments of the REMS will remain the same as that approved on July 31, 2008.

The REMS assessment plan should include but may not be limited to:

1. An evaluation of patients' understanding about the serious risks of Advair HFA including the increased risk of asthma-related deaths.
2. An analysis of the physicians' understanding about the increased risk of asthma related deaths and the safe use of LABAs.
3. A description of specific measures that would be taken to increase awareness if the assessment of the prescribers indicates that the prescribers' awareness is not adequate.
4. A narrative summary with analysis of all reported asthma-related deaths during the reporting period.
5. Drug use patterns (reasons for use, patient demographics, length of therapy, prescribing medical specialties)
6. With regard to the communication plan:
  - a. The date of launch of the communication plan (DHCP letter, website, and communication to professional societies)
  - b. The number of recipients of the DHCP letter distribution
  - c. Date(s) of distribution of the DHCP letter
  - d. A Copy of all documents included in each distribution
  - e. The professional societies to which you communicated
  - f. The information that the professional societies disseminated to its members and the timing for the dissemination
7. Based on the information reported, an assessment of and conclusion of whether the REMS is meeting its goal and whether modifications to the REMS are needed.

Assessments of an approved REMS must also include, under section 505-1(g)(3)(B) and (C), information on the status of any postapproval study or clinical trial required under section 505(o)

or otherwise undertaken to investigate a safety issue. With respect to any such postapproval study, you must include the status of such study, including whether any difficulties completing the study have been encountered. With respect to any such postapproval 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.

If you currently distribute or plan to distribute an authorized generic product under this NDA, you will also need to submit a REMS, REMS supporting document, and any required appended documents for that authorized generic, to this NDA. In other words, you must submit a complete proposed REMS that relates only to the authorized generic product. Review and approval of the REMS is required before you may market your product.

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 as appropriate:

**NDA 21-254 REMS ASSESSMENT**

**NEW SUPPLEMENT FOR NDA21-254  
PROPOSED REMS MODIFICATION  
REMS ASSESSMENT**

**NEW SUPPLEMENT (NEW INDICATION FOR USE)  
FOR NDA21-254  
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 the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) 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  
Beltsville, MD 20705-1266

You must submit final promotional materials and package insert(s), accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.(b)(3)(i)]. Form FDA 2253 is available at <http://www.fda.gov/opacom/morechoices/fdaforms/cder.html>; instructions are provided on 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 Carol Hill, Regulatory Project Manager, at (301) 796-1226.

Sincerely,

*{See appended electronic signature page}*

Badrul A. Chowdhury, M.D., Ph.D.  
Director  
Division of Pulmonary, Allergy, and Rheumatology  
Products  
Office of Drug Evaluation II  
Center for Drug Evaluation and Research

ENCLOSURES:  
Medication Guide  
REMS

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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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SALLY M SEYMOUR  
01/04/2011  
for Badrul Chowdhury