Dear Mr. Arnold:

Please refer to your Supplemental New Drug Application (sNDA) dated June 28, 2011, received June 28, 2011, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Symbicort® (budesonide and formoterol fumarate dihydrate) Inhalation Aerosol.

We acknowledge receipt of your amendment dated July 12, 2011, and your risk evaluation and mitigation strategy (REMS) assessment dated June 28, 2011.

This supplemental new drug application proposes to eliminate the Medication Guide as an element of the approved Symbicort (budesonide and formoterol) Inhalation Aerosol REMS.

We have completed our review of this supplemental application, as amended. It is approved, effective on the date of this letter.

**RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS**

The REMS for Symbicort® (budesonide and formoterol) Inhalation Aerosol was originally approved on February 27, 2009, and the most recent REMS modification was approved on February 16, 2011. The REMS consists of a Medication Guide, a communication plan, and a timetable for submission of assessments of the REMS.

Your proposed modification to the REMS consists of eliminating the requirement for the Medication Guide as an element of the REMS.

We have determined that maintaining the Medication Guide as part of the approved labeling is adequate to address the serious and significant public health concern and meets the standard in 21 CFR 208.1. Therefore, it is no longer necessary to include the Medication Guide as an element of the approved REMS to ensure that the benefits of Symbicort® (budesonide and formoterol) Inhalation Aerosol outweigh the risks.

Reference ID: 3002707
Your proposed modified REMS, submitted on July 12, 2011, and appended to this letter, is approved.

The modified REMS consists of a communication plan and a timetable for submission of assessments of the REMS.

We remind you that the Medication Guide will continue to be part of the approved labeling for Symbicort® (budesonide and formoterol) Inhalation Aerosol in accordance with 21 CFR 208.

The timetable for submission of assessments of the REMS will remain the same as that approved on February 16, 2011.

The revised REMS assessment plan should include, but is not limited to, the following:

1. An analysis of prescribers’ understanding of the increased risk of asthma-related deaths and the safe use of long acting beta2-adrenergic agonists (LABAs).

2. A description of specific measures that would be taken to increase awareness if the assessment of healthcare prescribers indicates that prescriber awareness is not adequate.

3. A narrative summary with analysis of all reported asthma-related deaths during the reporting period.

4. Drug use patterns (reasons for use, patient demographics, length of therapy, prescribing medical specialties)

5. With regard to the communication plan:
   a. The date of launch of the communication plan
   b. The number of recipients of the Dear Health Care Provider (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 that you communicated to
   f. The information that the professional societies disseminated to its members and the timing for the dissemination

6. Based on the information reported, an assessment of and conclusion regarding whether the REMS is meeting its goal and whether modifications to the REMS are needed.
We remind you that 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)(3) 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.

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 must submit a complete proposed REMS that relates only to the authorized generic product. Submit a proposed REMS, REMS supporting document, and any required appended documents as a prior approval supplement. Approval of the proposed REMS is required before you may market your authorized generic product.

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

**NDA 21929 REMS ASSESSMENT**

**NEW SUPPLEMENT FOR NDA 21929**

**PROPOSED REMS MODIFICATION**

**REMS ASSESSMENT**

**NEW SUPPLEMENT (NEW INDICATION FOR USE)**

**FOR NDA 21929**

**REMS ASSESSMENT**

**PROPOSED REMS MODIFICATION (if included)**

If you do not submit electronically, please send 5 copies of REMS-related submissions.
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 Ladan Jafari, Safety Regulatory Project Manager, at (301) 796-1231.

Sincerely,

{See appended electronic signature page}

Sally Seymour, M.D.
Deputy Director for Safety
Division of Pulmonary, Allergy, and Rheumatology Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

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

/s/

SALLY M SEYMOUR
08/18/2011