Food and Drug Administration Silver Spring MD 20993

NDA 020184/S-020

SUPPLEMENT APPROVAL

Xoma (US) LLC Attention: Jeffry Winemiller Senior Associate, Regulatory Affairs 2910 Seventh Street Berkely, CA 94710

Dear Mr. Winemiller:

Please refer to your Supplemental New Drug Application (sNDA) dated January 30, 2013, received January 31, 2013, submitted under section 505(b)(1) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Aceon (perindopril erbumine) 2 mg, 4mg, and 8 mg Tablets.

Please note that this letter supersedes the approval letter dated February 26, 2013 and corrects an error in the labeling that was attached to the February 26, 2013 letter. The label did not contain the following statement in the Contraindications section: "Do not co-administer aliskiren with Aceon in patients with diabetes [see Drug Interactions (7.8)]". The effective date of action will remain February 26, 2013.

This "Prior Approval" supplemental new drug application provides for revisions to the labeling as follows:

- 1. Under **HIGHLIGHTS/RECENT MAJOR CHANGES**, the following was added:
 - Drug Interaction Dual Blockade of the Renin-Angiotensin System (7.8) 03/2013
- 2. Under **HIGHLIGHTS/DRUG INTERACTIONS**, a bullet was added:
 - Dual inhibition of the renin-angiotensin system: Increased risk of renal impairment, hypotension, and hyperkalemia (7.8).
- 3. Under **HIGHLIGHTS/CONTRAINDICATIONS**, a bullet was added:
 - Do not co-administer aliskiren with Aceon in patients with diabetes (4.0, 7.8)
- 4. Under **CONTRAINDICATIONS**, following text was added:

Do not co-administer aliskiren with Aceon in patients with diabetes. [see Drug Interactions (7.8)]

5. Under **WARNINGS AND PRECAUTIONS/Impaired Renal Function**, the following cross reference was added:

[see Drug Interactions (7.8)]

6. Under **DRUG INTERACTIONS**, the following text was added:

7.8 Dual Blockade of the Renin-Angiotensin System (RAS)

Dual blockade of the RAS with angiotensin receptor blockers, ACE inhibitors, or aliskiren is associated with increased risks of hypotension, hyperkalemia, and changes in renal function (including acute renal failure) compared to monotherapy. Closely monitor blood pressure, renal function and electrolytes in patients on Aceon and other agents that affect the RAS.

Do not co-administer aliskiren with Aceon in patients with diabetes. Avoid use of aliskiren with Aceon in patients with renal impairment (GFR <60 ml/min).

7. The revision date and version number were updated.

There are no other changes from the last approved package insert.

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

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(1)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at

http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. Content of labeling must be identical to the enclosed labeling (text for the package insert), with the addition of any labeling changes in pending "Changes Being Effected" (CBE) supplements, as well as 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, as well as annual reportable changes and annotate each change. To facilitate review of your submission, provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

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, please contact:

Lori Anne Wachter, RN, BSN, RAC Regulatory Project Manager for Safety (301) 796-3975

Sincerely,

{See appended electronic signature

Mary Ross Southworth, PharmD.
Deputy Director for Safety
Office of Drug Evaluation I
Center for Drug Evaluation and Research

ENCLOSURE: Content of Labeling

| 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/ |
| MARY R SOUTHWORTH 02/26/2013 |