

Food and Drug Administration Silver Spring MD 20993

NDA 020033/S-052

## SUPPLEMENT APPROVAL

US Pharmaceutical Holdings I, LLC Attention: Richard Guarino, MD Chief Medical and Regulatory Director 119 Cherry Hill Road Parisppany, NJ 07054

Dear Dr. Guarino:

Please refer to your Supplemental New Drug Application (sNDA) dated and received June 22, 2015, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Lotensin HCT (benazepril hydrochloride/hydrochlorothiazide) 5/6.25 mg, 10/12.5 mg, 20/12.5 mg, and 20/25 mg Tablets.

This supplemental new drug application provides for labeling revised as follows:

1. Under WARNINGS, Anaphylactoid and Possibly Related Reactions, the following text was added:

*Head and Neck Angioedema:* Angioedema of the face, extremities, lips, tongue, glottis, and larynx has been reported in patients treated with angiotensin-converting enzyme inhibitors. In U.S. clinical trials, symptoms consistent with angioedema were seen in none of the subjects who received placebo and in about 0.5% of the subjects who received benazepril. Angioedema associated with laryngeal edema can be fatal. If laryngeal stridor or angioedema of the face, tongue, or glottis occurs, treatment with Lotensin HCT should be discontinued and appropriate therapy instituted immediately. *When involvement of the tongue, glottis, or larynx appears likely to cause airway obstruction, appropriate therapy, e.g., subcutaneous epinephrine injection 1:1000 (0.3-0.5 mL) should be promptly administered* (see PRECAUTIONS and ADVERSE REACTIONS).

Black patients receiving ACE inhibitors have been reported to have a higher incidence of angioedema compared to nonblacks.

Patients receiving coadministration of ACE inhibitor and mTOR (mammalian target of rapamycin) inhibitor (e.g. tesmsirolimus, sirolimus, everolimus) therapy may be at increased risk for angioedema.

2. Under **PRECAUTIONS, Drug Interactions**, the following text was added:

mTOR (mammalian target of rapamycin) inhibitors

Patients receiving coadministration of ACE inhibitor and mTOR inhibitor (e.g., temsirolimus, sirolimus, everolimus) therapy may be at increased risk for angioedema (see WARNINGS)

3. The revision date and version number were updated.

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

### APPROVAL & LABELING

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(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at

<u>http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm</u>. 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/UCM0723 92.pdf

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that includes labeling changes 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(1)(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).

NDA 020033/S-052 Page 3

### 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 Office of Prescription Drug Promotion (OPDP) 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 314.81(b)(3)(i)]. Form FDA 2253 is available at <u>http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf</u>. Information and Instructions for completing the form can be found at <u>http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf</u>. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see <u>http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm</u>.

All promotional materials that include representations about your drug product must be promptly revised to be consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 314.70(a)(4)]. The revisions in your promotional materials should include prominent disclosure of the important new safety information that appears in the revised package labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 314.70(a)(4) to the address above or by fax to 301-847-8444.

#### **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 call:

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

Sincerely,

{See appended electronic signature page}

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

ENCLOSURE(S): 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/

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MARY R SOUTHWORTH 08/25/2015