

NDA 21636-S22  
NDA 21849-S18

## SUPPLEMENT APPROVAL

Salix Pharmaceuticals, Inc.  
Attn: Libette Luce, MA  
Senior Director, Global Regulatory Affairs  
400 Somerset Corporate Blvd.  
Bridgewater, NJ 08807

Dear Ms. Luce:

Please refer to your supplemental new drug application (sNDA) dated and received July 23, 2020, and your amendments, submitted pursuant to section 505(b)(2) of the Federal Food, Drug, and Cosmetic Act (FDCA) for ZEGERID (omeprazole and sodium bicarbonate) for oral suspension and ZEGERID (omeprazole and sodium bicarbonate) capsules.

We also refer to our letter dated June 18, 2020, notifying you, under Section 505(o)(4) of the FDCA, of new safety information that we believe should be included in the labeling for proton pump inhibitors (PPIs). This information pertains to the risk of subclinical acute or chronic interstitial nephritis associated with PPIs leading to chronic renal inflammation and reduced renal function reported in published literature.

This supplemental new drug application provides for revisions to the labeling for ZEGERID. The agreed upon changes to the language included in our June 18, 2020, letter are as follows (additions are noted by underline and deletion are noted by ~~strikethrough~~).

Other edits to reflect the changes and minor editorial revisions of formatting and commas are included in the attached label.

### 5.2 Acute Tubulointerstitial Nephritis

Acute <sup>(b) (4)</sup> tubulointerstitial nephritis (TIN) has been observed in patients taking PPIs and may occur at any point during PPI therapy. Patients may present with varying signs and symptoms <sup>(b) (4)</sup> from symptomatic <sup>(b) (4)</sup> hypersensitivity reactions to non-specific symptoms of decreased renal function (e.g., malaise, nausea, anorexia) <sup>(b) (4)</sup>. In reported case series, some patients were diagnosed on biopsy and in the absence of extra-renal manifestations (e.g., fever, rash or arthralgia). <sup>(b) (4)</sup>

(b) (4)  
Discontinue ZEGERID and evaluate patients with suspected acute (b) (4)

(b) (4) TIN. - (b) (4)

(b) (4) [see Contraindications (4)].

## **APPROVAL & LABELING**

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.

We note that your November 13, 2020, submission includes final printed labeling (FPL) for your Prescribing Information and Medication Guide. We have not reviewed this FPL. You are responsible for assuring that the wording in this FPL is identical to that of the approved content of labeling in the structured product labeling (SPL) format.

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 labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 314.70(a)(4).

## **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 Andrew Kelleher, Regulatory Project Manager, at (240) 402-0075.

Sincerely,

*{See appended electronic signature page}*

Joyce Korvick, M.D., M.P.H.  
Deputy Director for Safety  
Division of Gastroenterology (DG)  
Office of Immunology and Inflammation (OII)  
Center for Drug Evaluation and Research

ENCLOSURES:

U.S. Food and Drug Administration  
Silver Spring, MD 20993  
[www.fda.gov](http://www.fda.gov)

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**This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.**  
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/s/  
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JOYCE A KORVICK  
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