

**CENTER FOR DRUG EVALUATION AND RESEARCH**

**Approval Package for:**

***APPLICATION NUMBER:***

**20-406/S043**

***Trade Name:*** Prevacid Delayed Release Capsules

***Generic Name:*** (lansoprazole)

***Sponsor:*** TAP Holdings Inc

***Approval Date:*** April 11, 2001

# CENTER FOR DRUG EVALUATION AND RESEARCH

*APPLICATION NUMBER:*

**20-406/S043**

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**CENTER FOR DRUG EVALUATION AND  
RESEARCH**

*APPLICATION NUMBER:*

**NDA 20-406/S043**

**APPROVAL LETTER**



NDA 20-406/S-043

TAP Pharmaceutical Products  
Attention: Ms. Leslie D. Abelson  
Associate Director, Regulatory Affairs  
675 North Field Drive  
Lake Forest, IL 60045

Dear Ms. Abelson:

Please refer to your supplemental new drug application dated December 18, 2000, received December 19, 2000, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Prevacid® (lansoprazole) Delayed-Release Capsules.

This supplement proposed to add of: \_\_\_\_\_ in the unit dose blister package for the following: **b(4)**

- Prevacid® Unit Dose Package of 100: 15 mg capsules
- Prevacid® Unit Dose Package of 100: 30 mg capsules
- Prevacid® Physician's Sample Unit Dose Package of 7: 15 mg capsules
- Prevacid® Physician's Sample Unit Dose Package of 7: 30 mg capsules.

We have completed the review of this supplemental application, and it is approved.

In addition, we wish to inform you that on March 31, 2001, additional information was requested from the Drug Master File (DMF) holder [authorized reference for DMF \_\_\_\_\_] in support of your drug product application]. The identified DMF deficiencies do not effect the approval of this supplemental application. **b(4)**

We remind you that you must comply with the requirements for an approved NDA set forth under 21 CFR 314.80 and 314.81.

If you have any questions, call Cheryl Perry, Regulatory Project Manager, at (301) 827-7457.

Sincerely,

Liang Zhou, Ph.D.  
Chemistry Team Leader for the  
Division of Gastrointestinal and Coagulation Drug  
Products, (HFD-180)  
DNDC II, Office of New Drug Chemistry  
Center for Drug Evaluation and Research

/s/

-----  
Liang Zhou

4/11/01 01:03:33 PM

**CENTER FOR DRUG EVALUATION AND  
RESEARCH**

*APPLICATION NUMBER:*  
**NDA 20-406/S043**

**CHEMISTRY REVIEW(S)**

**DIVISION OF GASTROINTESTINAL AND COAGULATION DRUG PRODUCTS**

Review of Chemistry, Manufacturing, and Controls Supplement  
NDA #:20-406 SUPPLEMENT #:SCP-043 CHEM REVIEW #: 1 REVIEW DATE: 06-Apr-2001

SUBMISSION TYPE	DOCUMENT	CDER	ASSIGNED
Original	22-Dec-2000	25-Dec-2000	28-Dec-2000

SUPPLEMENT PROVIDES FOR:

b(4)

NAME & ADDRESS OF APPLICANT: TAP Holdings, Inc.  
2355 Waukegan Road  
Deerfield, IL 60015

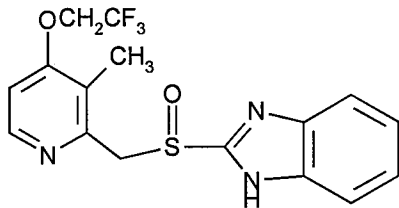
b(4)

DRUG PRODUCT NAME: Proprietary: Prevacid Nonproprietary/USAN: lansoprazole  
PHARMACOLOGICAL CATEGORY: proton pump inhibitor INDICATION: treatment of ulcers

DOSAGE FORM: CAPSULE, DELAYED RELEASE PELLETS STRENGTH: 15 and 30 mg

ROUTE OF ADMINISTRATION: oral HOW DISPENSED: X Rx      OTC

CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOL.WT:  
2-[[[3-methyl-4-(2,2,-trifluoroethoxy)-2-pyridyl]-methyl]-sulfinyl]benzimidazole



SUPPORTING DOCUMENTS: DMF — RELATED DOCUMENTS: N/A CONSULTS: N/A

b(4)

REMARKS/COMMENTS: DMF — has minor deficiencies. Stability data  
ACCEPTABLE

b(4)

CONCLUSIONS & RECOMMENDATIONS: The Supplement may be APPROVED (AP). The applicant should be informed that information has been requested from the DMF holder but that this will not have an effect on the approval.

Arthur B. Shaw, Ph.D.,  
Review Chemist, HFD-180

Liang Zhou, Ph.D.  
Chemistry Team Leader, HFD-180

R/D Init by: LZhou 10-Apr-2001  
abs F/T/ ABS 10-Apr-2001 C:\F\N20406 SCP-043.doc

2 Page(s) Withheld

✓ § 552(b)(4) Trade Secret /  
Confidential

       § 552(b)(4) Draft Labeling

       § 552(b)(5) Deliberative Process



/s/

-----  
Art Shaw  
4/10/01 12:16:39 PM  
CHEMIST

Liang Zhou  
4/10/01 12:42:58 PM  
CHEMIST

**CENTER FOR DRUG EVALUATION AND  
RESEARCH**

*APPLICATION NUMBER:*  
**NDA 20-406/S043**

**ADMINISTRATIVE and CORRESPONDENCE**  
**DOCUMENTS**



NDA 20-406/S-043

**PRIOR APPROVAL SUPPLEMENT**

TAP Pharmaceutical Products Inc.  
Attention: Ms. Leslie D. Abelson  
Associate Director, Regulatory Affairs  
675 North Field Drive  
Lake Forest, IL 60045

Dear Ms. Abelson:

We have received your supplemental drug application submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for the following:

Name of Drug Product:      Prevacid<sup>®</sup> (lansoprazole) Delayed-Release Capsules  
NDA Number:                    20-406  
Supplement Number:        043  
Date of Supplement:         December 22, 2000  
Date of Receipt:                December 26, 2000

This supplement proposes to add \_\_\_\_\_  
in the unit dose blister package for the following:

**b(4)**

- Prevacid<sup>®</sup> Unit Dose Package of 100: 15 mg capsules
- Prevacid<sup>®</sup> Unit Dose Package of 100: 15 mg capsules
- Prevacid<sup>®</sup> Physician's Sample Unit Dose Package of 7: 15 mg capsules
- Prevacid<sup>®</sup> Physician's Sample Unit Dose Package of 7: 30 mg capsules

Unless we notify you within 60 days of our receipt date that the application is not sufficiently complete to permit a substantive review, this application will be filed under section 505(b) of the Act on February 24, 2001 in accordance with 21 CFR 314.101(a). If the application is filed, the primary user fee goal date will be April 26, 2001 and the secondary user fee goal date will be June 26, 2001.

NDA 20-406/S-043

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Please cite the application number listed above at the top of the first page of any communications concerning this application. All communications concerning this supplemental application should be addressed as follows:

U.S. Postal/Courier/Overnight Mail:

Food and Drug Administration  
Center for Drug Evaluation and Research  
Division of Gastrointestinal and Coagulation Drug Products, HFD-180  
Attention: Division Document Room, 6B-45  
5600 Fishers Lane  
Rockville, Maryland 20857

If you have any questions, please call me at (301) 827-7475.

Sincerely,

Cheryl Perry  
Regulatory Health Project Manager  
Division of Gastrointestinal and Coagulation Drug Products  
Office of Drug Evaluation III  
Center for Drug Evaluation and Research

/s/

-----  
Cheryl Perry

1/2/01 04:56:30 PM



TAP PHARMACEUTICAL PRODUCTS INC.

ORIGINAL

675 North Field Drive  
Lake Forest, IL 60045

December 22, 2000

Lilia Talarico, M.D.

Director

Division of Gastrointestinal and Coagulation Drug Products,

Document Control Room 6B-24

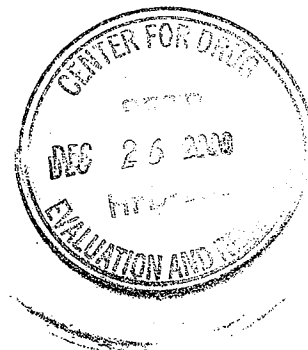
Center for Drug Evaluation and Research

Food and Drug Administration

5600 Fishers Lane

Rockville, MD 20857

NDA NO. 20-406 REF. NO. SCP-043  
NDA SUPPL FOR Packaging Change



Attn: Cheryl Perry, Project Manager

RE: Lansoprazole (Prevacid® Delayed-Release Capsules)

NDA 20-406

Prior Approval Supplement-Packaging Change

Supplement No. 043

Dear Dr. Talarico:

The sponsor, TAP Pharmaceutical Products Inc., (TAP) submits in accordance with section 505(i) of the Federal Food, Drug and Cosmetic Act and Title 21 CFR 314.70(b)(2)(vii), a Prior Approval Supplement for a packaging change to approved NDA 20-406 for Prevacid® (lansoprazole) Delayed-Release Capsules.

The aforementioned packaging change affects the following:

- Prevacid® Unit Dose Package of 100: 15 mg capsules
- Prevacid® Unit Dose Package of 100: 30 mg capsules
- Prevacid® Physician's Sample Unit Dose Package of 7: 15 mg capsules
- Prevacid® Physician's Sample Unit Dose Package of 7: 30 mg capsules

Prevacid® Capsules are packaged using \_\_\_\_\_ b(4)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ b(4)

\_\_\_\_\_ . TAP proposes to add an alternate \_\_\_\_\_

The proposed \_\_\_\_\_ b(4)

\_\_\_\_\_ b(4)



December 22, 2000  
NDA 20-406  
Page 2

All \_\_\_\_\_ for the proposed and the current Physician's Sample Unit Dose Package and Unit Dose Package are identical.

\_\_\_\_\_ of Prevacid® Capsules were packaged in the Unit Dose Package \_\_\_\_\_ stability at \_\_\_\_\_

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TAP commits to place one lot of each product strength on long term stability using the approved protocol. Standard tests \_\_\_\_\_

\_\_\_\_\_ Release specifications and labeling for the drug product packaged in the proposed packaging remain unchanged.

A field copy of this submission has been submitted to the Chicago District Office.

Attached is Form FDA 356h to complete this submission. Please contact Dr. Nancianne Knipfer (847-236-2193) regarding any questions or comments on this submission.

Sincerely,

A handwritten signature in cursive script that reads "Leslie D. Abelson".

Leslie D. Abelson (Ms.)  
Assistant Director, Regulatory Affairs  
(847) 236-2631  
(847) 236-2880 (fax)



TAP PHARMACEUTICAL PRODUCTS INC.

675 North Field Drive  
Lake Forest, IL 60045

### FIELD COPY CERTIFICATION

I hereby certify that the field copy is a true and accurate copy of the archival and review copies of the Prior-Approval Supplement submission to NDA 20-406 as Supplement 043.

Leslie D. Abelson (Ms.)  
Assistant Director, Regulatory Affairs  
TAP Pharmaceutical Products Inc.