#### **Approval Package for:**

#### **APPLICATION NUMBER:**

### NDA 19-599/S-007

**Trade Name:** Naftin

Generic Name: naftifine hydrochloride

**Sponsor:** Merz Pharmaceuticals LLC.

Approval Date: June 4, 2002

*Indication:* For the treatment of interdigital tinea pedis, tinea

cruris, and tinea corporis caused by the organism

Trichophyton rubrum.

# APPLICATION NUMBER: NDA 19-599/S-007

#### **CONTENTS**

### Reviews / Information Included in this NDA Review.

Approval Letter	X
Approvable Letter	
Labeling	
Summary Review	
Officer/Employee List	
Office Director Memo	
<b>Cross Discipline Team Leader Review</b>	
Medical Review(s)	
Chemistry Review(s)	X
<b>Environmental Assessment</b>	
Pharmacology Review(s)	
Statistical Review(s)	
Microbiology Review(s)	
Clinical Pharmacology/Biopharmaceutics Review(s)	
Risk Assessment and Risk Mitigation Review(s)	
Proprietary Name Review(s)	
Other Review(s)	
Administrative/Correspondence Document(s)	

APPLICATION NUMBER: NDA 19-599/S-007

### **APPROVAL LETTER**



Food and Drug Administration Rockville MD 20857

NDA 19-599/S007

Allergan Attention: Stephen Buxbaum Director, Worldwide Regulatory Affairs 2525 Dupont Drive P. O. Box 19534 Irvine, CA 92623-9534

Dear Mr. Buxbaum:

Please refer to your supplemental new drug application dated November 20, 2001, received November 21, 2001, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Naftin (naftifine hydrochloride) 1% Cream.

This "Changes Being Effected in 30 days" supplemental new drug application provides for as a contract manufacturer to replace all manufacturing operations for this product previously conducted by Allergan at the Irvine, CA, facility. This supplemental new drug application also provides for a change in tube sealant from In addition, as part of this manufacturing site change, will perform all necessary testing for raw material, component and finished product release and ongoing stability testing.

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

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 Frank H. Cross, Jr., Project Manager, at (301) 827-2020.

Sincerely,

{See appended electronic signature page}

Wilson H. DeCamp, Ph.D.
Chemistry Team Leader for the
Division of Dermatologic & Dental Drug Products,
(HFD-540)
DNDC III, Office of New Drug Chemistry
Center for Drug Evaluation and Research

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/s/

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Wilson H. DeCamp 6/4/02 02:33:38 PM approved

APPLICATION NUMBER: NDA 19-599/S-007

### **CHEMISTRY REVIEW(S)**

#### NDA SUPPLEMENT REVIEW

CH	IEMIST'S REVIEW	1.	ORGANIZ	ZATIO	N	2.	NDA NUMBER
			DDDDP (I	HFD-5	40)		19-599
3.	NAME & ADDRESS O	F API	PLICANT			4.	AF NUMBER
	Allergan 2525 Dupont Drive P.O. Box 19534 Irvine, CA 92623-9534					N	<u>SUPPLEMENT(s)</u> UMBER(s)DATE(s)
						SC	CM-007 11/20 /02
6.	NAME OF DRUG Naftin	7.	NONPRO naftifine hy			4MI	E
8.	SUPPLEMENT(s) PRO	VIDE	S FOR:	9.		R (F	ENTS AND REPORTS, etc.)
	(b) (4) as con tube sealant from	tract m	nanufacturer i	for fini	shed drug	g pro	oduct and a change in
10.	PHARMACOLOGIC CATEGORY	<b>AL</b> 1	1. <b>HOW I</b>	DISPE	NSED		2. RELATED ND/NDA/DMF(s)
13.	DOSAGE FORM(s)	1	4. <b>POTEN</b>		_		
	Cream		1%				
15.	CHEMICAL NAME	AND	STRUCTU	RE			
				<u>16.</u>	RECOL	RDS	AND REPORTS
m.v				CU	JRRENT		
CA	S Registry No				x Yes	No	)
					VIEWEI		
17	COMPARING				x Yes	No	2
hyd All dru	ergan provides for	uct and	laces the pre- will performed ongoing sta	viously ed all o	approve f the test	d ma ing f	
		(	is an esta	blished	l manufa	cturi	ng facility for other
nhe	rmaceuticals.						(b) (4)

In ad		change in the tube sealant f	
NDA	gan marketed products, e.g	lergan, this sealant was appro a., FML (flourometholone op- solone acetate, gentamicin su	hthalmic ointment) 0.1%,
ории	iannic ominient, etc.		
In su	pport of this supplement, th	ne following information was	s submitted:
			(D) (4)
18.		RECOMMENDATIONS	ant
	Recommend approvar ie	tter to issue for this supplem	ent.
cc:	Orig: NDA 19-599		
	HFD-540	HFD-540/Vaughan	
	HFD-540/Mainigi	HFD-540/Cross	D/D ::4:-1-4
	HFD-5420/EGPappas	HFD-540/WHDeCamp	D: R/D illitiated
10	DEVIEWED		
19. NAM		SIGNATURE	DATE COMPLETEI
	st G. Pappas		6/03/0
DIST	TRIBUTION ORIGINAL	JACKET REVIEWER I	DIVISION FILE

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/s/

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Ernest G. Pappas 6/4/02 10:07:28 AM CHEMIST

Recommend approval of supplement.

Wilson H. DeCamp 6/4/02 01:10:01 PM

CHEMIST

concur with review; AP letter may be prepared