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RESEARCH**

*APPLICATION NUMBER:*

**20-764/S-011**

**20-241/S-017**

**APPROVAL LETTER**



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
Rockville, MD 20857

NDA 20-241/S-017  
NDA 20-764/S-011

SmithKline Beecham Corporation  
d/b/a GlaxoSmithKline  
Attention: Eric B. Benson  
Senior Director, Regulatory Affairs, Psychiatry  
Five Moore Drive; P.O. Box 13398  
Research Triangle Park, NC 27709

Dear Mr. Benson:

Please refer to your supplemental new drug applications (sNDAs) dated June 5, 2002, received June 6, 2002, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Lamictal (lamotrigine) Tablets and Lamictal (lamotrigine) Chewable Dispersible Tablets.

We acknowledge receipt of your submissions dated April 10, 2003, April 21, 2003, May 16, 2003, June 5, 2003, and June 12, 2003. Your submission of April 21, 2003 constituted a complete response to our April 4, 2003 action letter. Furthermore, as discussed with you during a teleconference on June 17, 2003, we have not reviewed Attachment 1 of your June 12, 2003 submission as part of this sNDA action, and we recommend that you submit this information in more detail as labeling supplements to these NDA applications for our review.

These supplemental new drug applications provide for the use of Lamictal (lamotrigine) Tablets and Lamictal (lamotrigine) Chewable Dispersible Tablets for the maintenance treatment of Bipolar I Disorder to delay the time to occurrence of mood episodes (depression, mania, hypomania, mixed episodes) in patients treated for acute mood episodes with standard therapy.

We have completed our review of these supplemental applications, as amended, and have concluded that adequate information has been presented to demonstrate that the drug products are safe and effective as recommended in the enclosed, agreed-upon labeling text. Accordingly, these supplemental applications are approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the enclosed labeling (text for the package insert, text for the patient package insert) and submitted labeling (immediate container and carton labels submitted June 5, 2002 and revised April 21, 2003).

Please submit the FPL electronically according to the guidance for industry titled Providing Regulatory Submissions in Electronic Format – NDA. Alternatively, you may submit 20 paper copies of the FPL as soon as it is available, in no case more than 30 days after it is printed. Please individually mount ten of the copies on heavy-weight paper or similar material. For administrative purposes, these submissions should be designated "FPL for approved supplement NDA 20-241/S-017 and NDA 20-764/S-011." Approval of these submissions by FDA is not required before the labeling is used.

FDA's Pediatric Rule [at 21 CFR 314.55/21 CFR 601.27] was challenged in court. On October 17, 2002, the court ruled that FDA did not have the authority to issue the Pediatric Rule and has barred FDA from enforcing it. Although the government decided not to pursue an appeal in the courts, it will work with Congress in an effort to enact legislation requiring pharmaceutical manufacturers to conduct appropriate pediatric clinical trials. In addition, third party interveners have decided to appeal the court's decision striking down the rule. Therefore, we encourage you to submit a pediatric plan that describes development of your products in the pediatric population where it may be used. Please be aware that whether or not this pediatric plan and subsequent submission of pediatric data will be required depends upon passage of legislation or the success of the third party appeal. In any event, we hope you will decide to submit a pediatric plan and conduct the appropriate pediatric studies to provide important information on the safe and effective use of these drugs in the relevant pediatric populations.

The pediatric exclusivity provisions of FDAMA as reauthorized by the Best Pharmaceuticals for Children Act are not affected by the court's ruling. Pediatric studies conducted under the terms of section 505A of the Federal Food, Drug, and Cosmetic Act may result in additional marketing exclusivity for certain products. You should refer to the Guidance for Industry on Qualifying for Pediatric Exclusivity (available on our web site at [www.fda.gov/cder/pediatric](http://www.fda.gov/cder/pediatric)) for details. If you wish to qualify for pediatric exclusivity you should submit a "Proposed Pediatric Study Request". FDA generally does not consider studies submitted to an NDA before issuance of a Written Request as responsive to the Written Request. Applicants should obtain a Written Request before submitting pediatric studies to an NDA.

In addition, submit three copies of the introductory promotional materials that you propose to use for these products. Submit all proposed materials in draft or mock-up form, not final print. Send one copy to this division and two copies of both the promotional materials and the package insert directly to:

Division of Drug Marketing, Advertising, and Communications, HFD-42  
Food and Drug Administration  
5600 Fishers Lane  
Rockville, MD 20857

If you issue a letter communicating important information about this drug product (i.e., a "Dear Health Care Professional" letter), we request that you submit a copy of the letter to this NDA and a copy to the following address:

MEDWATCH, HFD-410  
FDA  
5600 Fishers Lane  
Rockville, MD 20857

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

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If you have any questions, call Jacqueline H. Ware, Pharm.D., Senior Regulatory Project Manager, at (301) 594-2850.

Sincerely,

*{See appended electronic signature page}*

Russell Katz, M.D.  
Director  
Division of Neuropharmacological Drug Products  
Office of Drug Evaluation I  
Center for Drug Evaluation and Research

Enclosure

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**This is a representation of an electronic record that was signed electronically and  
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/s/

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Russell Katz  
6/20/03 09:55:12 AM