CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:
21-850

PHARMACOLOGY REVIEW(S)
DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
CENTER FOR DRUG EVALUATION AND RESEARCH

PHARMACOLOGY/TOXICOLOGY REVIEW AND EVALUATION

NDA NUMBER: 21-850
SERIAL NUMBER: 000
DATE RECEIVED BY CENTER: 5/25/2005
PRODUCT: Zegerid (Omeprazole, 20 mg and 40 mg) Chewable Tablets
INTENDED CLINICAL POPULATION: Patients with duodenal and gastric ulcers, gastroesophageal reflux disease GERD), erosive esophagitis, and maintenance of healing erosive esophagitis.

SPONSOR: Santarus Inc., San Diego, CA.
DOCUMENTS REVIEWED: N/A [505 (b)(2) application, submitted electronically]
REVIEW DIVISION: Division of Gastroenterology Products (HFD-180)

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Date of review submission to Division File System (DFS):
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Executive Summary

I. Recommendations

A. Recommendation on Approvability: From a preclinical standpoint, the NDA is approvable.

B. Recommendation for Nonclinical Studies: None.

C. Recommendations on Labeling: Included in the labeling section of the review.

II. Summary of Nonclinical Findings

A. Brief overview of nonclinical findings:

The sponsor did not provide any non clinical study report under NDA 21-850. Instead, the following statement was made. “This 505(b)(2) NDA for Zegerid® (omeprazole) Chewable Tablets, 20 mg and 40 mg references the Agency’s previous finding of safety and efficacy for Prilosec Delayed-Release Capsules, 20 mg and 40 mg (NDA 19-810). Therefore, no new reports of nonclinical information are provided.”

Toxicology studies conducted by the innovator have established the safety of omeprazole. In repeated dose toxicity studies in rats, the target organs of toxicity were identified as the stomach, adrenal glands, kidney, lungs, liver and the pancreas. Hypertrophy/hyperplasia of the enterochromaffin-like (ECL) cells of the stomach was observed in all studies in rats. In dogs also, the target organ of toxicity was the stomach. Thus, the stomach was the common target organ of toxicity in both rats and dogs. Some of the changes in the dog stomach were still present at the end of the 3 to 4 months recovery period.

Omeprazole was found to be genotoxic in an in vitro human lymphocytes chromosomal aberrations assay, in an in vivo mouse micronucleus assay, and in an in vivo mouse bone marrow chromosome aberration assay. Omeprazole was negative in the Ames test, an in vitro mouse lymphoma cell forward mutation assay, and an in vivo rat liver DNA damage assay.

In two 24-month carcinogenicity studies with omeprazole in rats, it produced dose-related incidence of gastric ECL cell carcinoid tumors (2 to 40%). In one of the carcinogenicity studies, an adenocarcinoma, a rare tumor, was observed in the stomach of a female rat which received omeprazole at daily doses of 13.8 mg/kg for 1 year, followed by a 1-year drug-free recovery period.

Omeprazole was not deleterious to the reproductive performance of rats. It was not teratogenic in rats and rabbits. However, in rabbits, dose-related increases in embryo lethality, fetal resorptions and pregnancy disruptions were observed. In rats, dose-related embryo/fetal
toxicity and post-natal developmental toxicity were observed in offspring resulting from parents treated with omeprazole.

B. Pharmacologic Activity:

Omeprazole suppresses gastric acid secretion by specific inhibition of the enzyme, H⁺, K⁺-ATPase at the surface of the gastric parietal cells. Studies in animals have shown this effect to be dose related, and lead to inhibition of both basal and agonist-stimulated acid secretion.

C. Nonclinical Safety Issues Relevant to Clinical Use: The following nonclinical safety issues are relevant to the clinical use of the drug: the genotoxic activity of omeprazole in both in vitro and in vivo assays, the reproductive toxicity in rats and rabbits and the tumorigenicity in rats.
2.6 PHARMACOLOGY/TOXICOLOGY REVIEW

2.6.1 INTRODUCTION AND DRUG HISTORY

NDA number: 21-850
Review number: 01
Sequence number/date/type of submission: 000/Original/May 25, 2005
Information to sponsor: Yes ( ) No (X)
Sponsor and/or agent: Santarus, Inc., San Diego, CA 92130.
Manufacturer for drug substance: 

Reviewer name: Sushanta Chakder, Ph.D.
Division name: Division of Gastroenterology Products
HFD #: 180
Review completion date: January 30, 2006

Drug:
  Trade name: Zegerid
  Generic name: Omeprazole
  Code name: N/A
  Chemical name: 5-methoxy-2-[(4-methoxy-3, 5-dimethyl-2-pyridinyl) methyl] sulfinyl]-1H-benzimidazole.
  CAS registry number: 73590-58-6
  Molecular formula/molecular weight: C_{17}H_{19}N_{3}O_{3}S/345.42

Structure:

Relevant INDs/NDAs/DMFs:

NDA 19, 810, Omeprazole (Losec, 20 mg and 40 mg) Capsules, Merck & Co., Inc., West Point, PA.

Drug class: Gastric parietal cell H^+ , K^+ -ATPase (Proton pump) inhibitor.

Intended clinical population: Zegerid is intended for the following indications-
  • Short-term treatment of active duodenal ulcer
• Treatment of heartburn and other symptoms associated with gastroesophageal reflux disease (GERD)
• Short-term treatment (4-8 weeks) of erosive esophagitis which has been diagnosed by endoscopy
• Maintenance of healing of erosive esophagitis

Clinical formulation: Each chewable tablet of Zegerid contains 20 mg or 40 mg omeprazole and the following excipients: sodium bicarbonate (600 mg), magnesium hydroxide (mg), hydroxypropyl cellulose ( ), croscarmellose sodium ( ), xylitol ( ), sucralose ( ), magnesium stearate ( ) and flavorings.

Route of administration: Oral

Data reliance: Any information or data necessary for approval of NDA 21-850 that Santarus does not own or have a written right to reference constitutes one of the following: (1) published literature, or (2) a prior FDA finding of safety or effectiveness for a listed drug, as described in the drug’s approved labeling.

Studies reviewed within this submission: The sponsor did not provide any non-clinical study report under NDA 21-850. Instead, the sponsor referred to the Agency’s previous finding of safety and efficacy for Prilosec Delayed-Release Capsules, 20 mg and 40 mg (NDA 19-810) to assess the safety of Zegerid chewable tablets.

The sponsor submitted NDA 21-850 for Zegerid (Omeprazole, 20 mg and 40 mg) chewable tablets for the short-term treatment of active duodenal and gastric ulcers, treatment of heartburn and other symptoms associated with gastrointestinal reflux disease (GERD), short-term treatment of erosive esophagitis, and maintenance of healing of erosive esophagitis. The NDA was submitted as a 505 (b) (2) application. The sponsor did not conduct any preclinical studies with omeprazole. The safety assessment of Zegerid capsules was based on the Agency’s previous evaluation of the innovator’s data for Prilosec delayed-release capsules.

2.6.2 PHARMACOLOGY

No study reports were submitted.

2.6.3 PHARMACOLOGY TABULATED SUMMARY
N/A

2.6.4 PHARMACOKINETICS/TOXICOKinetics

No pharmacokinetics/toxicokinetics data were submitted.
2.6.6 TOXICOLOGY
No toxicology study reports were submitted.

Proposed Text for the Labeling of Zegerid (Omeprazole, 20 mg and 40 mg) Chewable Tablets:
Page(s) Withheld

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

§ 552(b)(5) Deliberative Process

§ 552(b)(4) Draft Labeling
OVERALL conclusions and recommendations

Conclusions:

Omeprazole is a substituted benzimidazole, and it inhibits gastric acid secretion by specific inhibition of the enzyme, H⁺K⁺-ATPase (also known as proton pump) at the surface of the gastric parietal cells. The sponsor submitted NDA 21-850 for Zegerid (omeprazole capsules, 20 and 40 mg) for the short-term treatment of active duodenal and gastric ulcers, treatment of heartburn and other symptoms associated with GERD, short-term treatment of erosive esophagitis and maintenance of healing of erosive esophagitis. The NDA was submitted as a 505 (b) (2) application. The sponsor did not conduct any preclinical studies with omeprazole. The safety assessment for the omeprazole sodium bicarbonate formulation was based on the Agency’s previous evaluation of the innovator’s data for Prilosec delayed-release capsules.

Toxicology studies conducted with omeprazole by the innovator, established its safety. In acute toxicity studies, single oral doses of 1350, 1339 and 1200 mg/kg were lethal to mice, rats and dogs, respectively. Subchronic and chronic toxicity studies in rats identified the stomach, adrenal gland, kidney, lung, liver and the pancreas as target organs of toxicity. In 3, 6, and 12 month toxicity studies dogs, the stomach was the target organ of toxicity. Thus, in both rats and dogs, the stomach was the common target organ of toxicity. Some of the effects on the stomach may be related to the pharmacological actions of the drug.

Omeprazole was genotoxic in the in vitro human lymphocyte chromosome aberration assay, in one of the two in vivo mouse micronucleus assay, and in the in vivo mouse bone marrow chromosomal aberration assay. Omeprazole was negative in the bacterial reverse mutation assay (Ames assay), an in vitro mouse lymphoma cell forward mutation assay, and an in vivo rat liver DNA damage assay.
In two 24-month carcinogenicity studies with omeprazole in rats, a dose-related increase in the incidence of gastric ECL cell carcinoid tumors was observed at daily oral doses of 1.7 to 140.8 mg/kg. In one of the carcinogenicity studies in rats, an adenocarcinoma, an extremely rare tumor, was observed in the stomach of a female animal which received omeprazole at daily doses of 13.8 mg/kg for 1 year, followed by a 1 year drug-free recovery period. No similar tumor was observed in male and female rats treated with omeprazole for 2 years. A 78-week mouse carcinogenicity study with omeprazole did not show increased tumor occurrence. A 26-week p53 (+/-) transgenic mouse carcinogenicity study was not positive.

Omeprazole, at oral doses up to 138 mg/kg/day, had no effect on the fertility and general reproductive performance of male and female rats. However, there were dose-related increases in post-implantation losses, decreases in the number of viable fetuses, decreases in the number of viable pups born, decreases in survival of pups and retarded body weight gains of pups. It had no teratogenic potential in rats and rabbits. In rats, dose-related embryo/fetal toxicity and postnatal developmental toxicity were observed in offspring resulting from parents treated with omeprazole at 13.8 to 138.0 mg/kg/day. In rabbits, omeprazole at oral doses of 6.9, 27.6 and 69.1 mg/kg/day produced dose-related increases in embryo-lethality, fetal resorptions and pregnancy disruptions. In the pre- and post-natal toxicity study in rats, omeprazole produced dose-related developmental toxicity for F1 pups in all treatment groups as evidenced by decreased body weights on Day 21 postpartum.

Each capsule of Zegerid contains 600 mg sodium bicarbonate and \( \sim \) mg magnesium hydroxide. The primary role of these two ingredients is to protect omeprazole from degradation from the gastric acid. The amount of sodium bicarbonate and magnesium hydroxide in Zegerid capsules are much less than the dose recommended as antacids (up to 8.0 g/day for sodium bicarbonate and up to 5.0 g/day for magnesium hydroxide).

The safety of omeprazole was adequately studied in preclinical toxicology studies, conducted by the innovator, and the sponsor’s proposed clinical dose for the proposed indication appears to be safe.

Recommendations: The preclinical studies conducted with omeprazole by the innovator support the safety of omeprazole chewable tablets at the proposed doses.

Suggested labeling: See the labeling section of the review.

Signatures:

Reviewer Signature

Supervisor Signature Concurrency Yes ___ No ___
cc: list:
NDA
HFD-180
HFD-181/CSO
HFD-180/Dr. Chakder
HFD-180/Dr. Choudary

R/D Init.: J. Choudary 1/27/06
This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

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