

**CENTER FOR DRUG EVALUATION AND RESEARCH**

**Approval Package for:**

***APPLICATION NUMBER:***  
**ANDA 79-205**

**Name:** Ibuprofen Capsules (Liquid Filled), 200 mg

**Sponsor:** Marksans Pharma Limited

**Approval Date:** June 26, 2009

# CENTER FOR DRUG EVALUATION AND RESEARCH

*APPLICATION NUMBER:*

**ANDA 79-205**

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**CENTER FOR DRUG EVALUATION AND RESEARCH**

***APPLICATION NUMBER:***

**ANDA 79-205**

**APPROVAL LETTER**



ANDA 79-205

Pharmgen LLC  
U.S. Agent for: Marksans Pharma Limited  
Attention: Nilkanth J. Patel  
Vice President, Regulatory Affairs  
1919 Middle Country Road, Suite 206  
Centereach, NY 11720

Dear Sir:

This is in reference to your abbreviated new drug application (ANDA) dated August 11, 2007, submitted pursuant to section 505(j) of the Federal Food, Drug, and Cosmetic Act (the Act), for Ibuprofen Capsules (Liquid Filled), 200 mg.

Reference is also made to your amendments dated February, 14, April 11 (2 submissions), August 4, September 11, October 6, and November 10, 2008; and June 3, 2009.

We have completed the review of this ANDA and have concluded that adequate information has been presented to demonstrate that the drug is safe and effective for use as recommended in the submitted labeling. Accordingly, the ANDA is approved effective on the date of this letter. The Division of Bioequivalence has determined your Ibuprofen Capsules (Liquid Filled), 200 mg, to be bioequivalent and, therefore, therapeutically equivalent to the reference listed drug, Advil Liqui-Gels, 200 mg, of Wyeth Consumer Healthcare. Your dissolution testing should be incorporated into the stability and quality control program using the same method proposed in your application.

Under section 506A of the Act, certain changes in the conditions described in this ANDA require an approved supplemental application before the change may be made.

We note that if FDA requires a Risk Evaluation & Mitigation Strategy (REMS) for a listed drug, an ANDA citing that listed drug also will be required to have a REMS, See 505-1(i).

Postmarketing reporting requirements for this ANDA are set forth in 21 CFR 314.80-81 and 314.98. The Office of Generic Drugs should be advised of any change in the marketing status of this drug.

Sincerely yours,

*{See appended electronic signature page}*

Gary Buehler  
Director  
Office of Generic Drugs  
Center for Drug Evaluation and Research

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**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

-----  
Robert L. West  
6/26/2009 02:07:26 PM  
Deputy Director, for Gary Buehler

# **CENTER FOR DRUG EVALUATION AND RESEARCH**

***APPLICATION NUMBER:***

**ANDA 79-205**

**LABELING**

NDC 25000-133-13

# Ibuprofen Capsules, 200 mg

Pain Reliever / Fever Reducer (NSAID)

**\*\*Liquid Filled Capsules**

**600 Softgels\*\***



Marksans

### Drug Facts

Active ingredient (in each capsule)	Purpose
Solubilized ibuprofen equal to 200 mg ibuprofen (NSAID)*	Pain reliever/Fever reducer (present as the free acid and potassium salt)
*nonsteroidal anti-inflammatory drug	

### Uses

- temporarily relieves minor aches and pains due to:
  - backache
  - headache
  - menstrual cramps
  - minor pain of arthritis
  - muscular aches
  - the common cold
  - toothache
- temporarily reduces fever

### Warnings

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing) ■ blisters
- facial swelling ■ hives ■ rash
- shock ■ skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

LOT :

EXP :



Size : 140 x 80 mm

**Drug Facts** (Continued)

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you :

- are age 60 or older
- have had stomach ulcers or bleeding problems
- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer
- right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems

**Drug Facts** (Continued)

- high blood pressure
- heart or kidney disease
- asthma
- taken a diuretic
- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin for heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**When using this product**

- take with food or milk if stomach upset occurs
- the risk of heart attack or stroke may increase if you use more than directed or for longer than directed.

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**Drug Facts** (Continued)

**If pregnant or breast-feeding**, ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- **do not take more than directed**
- **the smallest effective dose should be used**
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

**Other information**

- **each capsule contains:** potassium 20 mg
- read all warnings and directions before use
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Drug Facts** (Continued)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

Manufactured for :  
**Marksans Pharma Inc.**  
Lake Grove, NY 11755, USA

Manufactured by:  
**Marksans Pharma Ltd.**  
Verna, Goa - 403 722, India

Mfg. Lic. No. : GO/Drugs/515

R305/09

<p>NDC 25900 133 04</p> <p><b>Ibuprofen Capsules, 200 mg</b></p> <p>Pain Reliever / Fever Reducer (NSAID)</p> <p>**Liquid Filled Capsules**</p> <p>32 Softgels**</p> <p> <b>Marksans</b></p>		<p><b>READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION</b></p> <p>Uses ■ temporarily relieves minor aches and pains due to: backache, headache, menstrual cramps, minor pain</p>	<p>of arthritis, muscular aches, the common cold, toothache</p> <p>■ temporarily reduces fever</p> <p><b>Warnings</b></p> <p>■ <b>Ask your doctor before use</b> if you are pregnant, under a doctor's care for a serious condition, age 60 or over,</p>	<p>LOT : EXP : R206/09</p>
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Size : 95 x 26 mm

<p>taking any other drug or have stomach problems.</p> <p>■ This product may cause a <b>severe allergic reaction</b>, especially in people allergic to aspirin. Symptoms may include: asthma (wheezing), blisters, facial swelling, hives, rash,</p>	<p>shock, skin reddening. If an allergic reaction occurs, stop use and seek medical help right away.</p> <p><b>Do not use</b> this product if you have ever had an allergic reaction to any pain reliever/fever reducer.</p> <p>■ This product may cause <b>stomach bleeding</b>.</p>	<p>■ The risk of heart attack or stroke may increase if you use more than directed or for longer than directed.</p> <p><b>Directions ■ do not take more than directed ■ the smallest effective dose should be used</b></p> <p>■ do not take longer than 10 days, unless directed by a doctor</p>
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<p>■ adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist</p> <p>■ if pain or fever does not respond to 1 capsule, 2 capsules may be used</p> <p>■ do not exceed 6 capsules in 24 hours, unless directed by a doctor.</p> <p>■ children under 12 years: ask a doctor</p>	<p>Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.</p> <p><b>Each capsule contains:</b> potassium 20 mg</p>	<p>Mfg. Lic. No. : GO/Drugs/515</p> <p>Manufactured for : <b>Marksans Pharma Inc.</b> Lake Grove, NY 11755, USA</p> <p>Manufactured by: <b>Marksans Pharma Ltd.</b> Verna, Goa - 403 722, India</p>
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**Drug Facts** (Continued)

- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer
- right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems
- high blood pressure
- heart or kidney disease
- asthma
- taken a diuretic
- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin for heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**Drug Facts** (Continued)

**Other information**

- each capsule contains: potassium 20 mg
- read all warnings and directions before use. Keep carton.
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

609069

Manufactured for :  
**Marksans Pharma Inc.**  
Lake Grove, NY 11755, USA

Manufactured by:  
**Marksans Pharma Ltd.**  
Verna,Goa - 403 722, India  
Mfg. Lic. No. : GO/Drugs/515

**Drug Facts** (Continued)

**When using this product**

- take with food or milk if stomach upset occurs
- the risk of heart attack or stroke may increase if you use more than directed or for longer than directed.

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**If pregnant or breast-feeding**, ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- do not take more than directed
- the smallest effective dose should be used
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

NDC 25000-133-04

**Ibuprofen Capsules, 200 mg**

Pan Re ever / Fever Reducer (NSAID)

**\*\* Liquid Filled Capsules**

**32 Softgels\*\***



**Marksans**

**READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION.**

**Drug Facts**

**Active ingredient (in each capsule)**

Solubilized ibuprofen equal to Pain reliever/ 200 mg ibuprofen (NSAID)\* ..... Fever reducer (present as the free acid and potassium salt)  
\*nonsteroidal anti-inflammatory drug

**Purpose**

**Uses**

- temporarily relieves minor aches and pains due to:
  - backache ■ headache ■ menstrual cramps
  - minor pain of arthritis ■ muscular aches
  - the common cold ■ toothache
- temporarily reduces fever

**Warnings**

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing) ■ blisters ■ facial swelling ■ hives ■ rash
- shock ■ skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you : ■ are age 60 or older ■ have had stomach ulcers or bleeding problems

**CENTER FOR DRUG EVALUATION AND RESEARCH**

*APPLICATION NUMBER:*  
**ANDA 79-205**

**LABELING REVIEWS**

**APPROVAL SUMMARY**  
**REVIEW OF PROFESSIONAL LABELING**  
**DIVISION OF LABELING AND PROGRAM SUPPORT**  
**LABELING REVIEW BRANCH**

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ANDA Number: 79-205  
Dates of Submission: **June 3, 2009**  
Applicant's Name: Marksans Pharma Limited  
Established Name: Ibuprofen Capsules, 200 mg

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**Approval Summary:**

1. **Do you have copies of final printed labels and labeling?** Yes
2. **CONTAINER** – Bottles of 32 and 600 count (**for the 200 mg strength capsules**)  
Satisfactory in **final print** as of the June 3, 2009 electronic submission
3. **CARTON – 32 count bottles ONLY**  
Satisfactory in **final print** as of the June 3, 2009 electronic submission
4. **Revisions needed post-approval:** Yes
  - a. Carton/Container: Front Panel  
Revise to read as follows – (add and asterisk)  
  
Pain Reliever/Fever Reducer (NSAID)\*
  - b. 32 count Container (only)  
Increase the prominence of the established name

**BASIS OF APPROVAL:**

Was this approval based upon a petition? No  
What is the RLD on the 356(h) form: Advil Liqui-Gels®  
NDA Number: N 20-402  
NDA Drug Name: Advil Liqui-Gels®  
NDA Firm: Wyeth Consumer Healthcare; Approved May 19, 2009. (NDA-20-402/S-025)  
Date of Approval of NDA Insert and supplement: Approved May 19, 2009; NDA N 20-402/S-025  
Has this been verified by the MIS system for the NDA? Yes  
Was this approval based upon an OGD labeling guidance? No  
Basis of Approval for the Container Labels: Most recently approved labeling of the reference listed drug, Advil Liqui-Gels®

**FOR THE RECORD:**

1. MODEL LABELING  
Wyeth Consumer Healthcare. (ANDA 20-402/S-025), Approved May 19, 2009).
2. INACTIVE INGREDIENTS  
The listing of inactive ingredients in the DESCRIPTION section of the package insert appears to be consistent with the listing of inactive ingredients found in the **statement of components**.  
**(per chemistry review)**

DRUG PRODUCT: Satisfactory

**P.2.1 Components of the Drug Product**

The quantitative composition and function of each component in the drug product is as listed:

S. No.	Ingredients	Pharmacopeial reference	mg / capsule	% per capsule	Function
MEDICAMENT					
01	Ibuprofen	USP	200.00	(b) (4)	Active ingredient

3. STORAGE TEMPERATURE RECOMMENDATIONS COMPARISON

USP: Preserve in tight, light-resistant container.

RLD: Store at 20 to 25°C(68 to 77°F); avoid excessive heat above 40°C (104°F).

ANDA: Same as RLD

4. PACKAGING CONFIGURATIONS

NDA: 20s, 40s, 80s, 120s, 160s, 240s count bottles as well as 2-count capsule front and back pouch labels with 2-count pouch dispenser (50 x 2-count pouches).

ANDA: Bottles of 32 and 600 **count**

5. The tablet/capsule imprintings have been accurately described as required by 21 CFR 206,et al. (Imprinting of Solid Oral Dosage Form Products for Human Use; Final Rule, effective 9/13/95).

- Sea green to light green color oblong shaped soft gelatin capsules containing colorless to pale yellow colored, transparent, viscous liquid.

6. Manufacturing will be done by  
M/s. MARKSANS PHARMA LIMITED  
Plot No. L-82, L-83,  
Verna Industrial Estate,  
Verna, Goa – 403 722, INDIA.

7. CONTAINER/CLOSURE

**Container Closure System**

The firm will market commercial packs in white, opaque, round, (b) (4)

with counts-32 and 600 capsules.

Counts	Primary Package Type	Comment
32 capsules	(b) (4)	Smallest pack
600 capsules	(b) (4)	Largest pack

8. Patent Information

**Patent Data – NDA 20-402**

Patent No.	Patent Expiration	Use Code	Description	How Filed	Labeling Impact
None	None	None	There are no unexpired patents for this product in the Orange Book Database.	N/A	None

**Exclusivity Data– NDA 20-402**

Code	Reference	Expiration	Labeling Impact
None	There is no unexpired exclusivity for this product in the Orange Book Database.	N/A	None

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Date of Review: 6/23/09                      Date of Submission: 6/3/09  
Primary Reviewer: Jim Barlow              Date:  
  
Team Leader: Koung Lee                      Date:

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NDC 25000-133-13

# Ibuprofen Capsules, 200 mg

Pain Reliever / Fever Reducer (NSAID)

**\*\*Liquid Filled Capsules**

**600 Softgels\*\***



Marksans

### Drug Facts

Active ingredient (in each capsule)	Purpose
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Solubilized ibuprofen equal to 200 mg ibuprofen (NSAID)* ..... Pain reliever/Fever reducer (present as the free acid and potassium salt) *nonsteroidal anti-inflammatory drug	
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### Uses

- temporarily relieves minor aches and pains due to:
  - backache
  - headache
  - menstrual cramps
  - minor pain of arthritis
  - muscular aches
  - the common cold
  - toothache
- temporarily reduces fever

### Warnings

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing)
- blisters
- facial swelling
- hives
- rash
- shock
- skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

LOT :

EXP :



Size : 140 x 80 mm

**Drug Facts** (Continued)

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you :

- are age 60 or older
- have had stomach ulcers or bleeding problems
- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer
- right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems

**Drug Facts** (Continued)

- high blood pressure
- heart or kidney disease
- asthma
- taken a diuretic
- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin for heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**When using this product**

- take with food or milk if stomach upset occurs
- the risk of heart attack or stroke may increase if you use more than directed or for longer than directed.

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**Drug Facts** (Continued)

**If pregnant or breast-feeding**, ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- **do not take more than directed**
- **the smallest effective dose should be used**
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

**Other information**

- **each capsule contains:** potassium 20 mg
- read all warnings and directions before use
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Drug Facts** (Continued)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

Manufactured for :  
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**Marksans Pharma Ltd.**  
Verna, Goa - 403 722, India

Mfg. Lic. No. : GO/Drugs/515

R305/09

<p>NDC 25900 133 04</p> <p><b>Ibuprofen Capsules, 200 mg</b></p> <p>Pain Reliever / Fever Reducer (NSAID)</p> <p>**Liquid Filled Capsules**</p> <p>32 Softgels**</p> <p> <b>Marksans</b></p>		<p><b>READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION</b></p> <p>Uses ■ temporarily relieves minor aches and pains due to: backache, headache, menstrual cramps, minor pain</p>	<p>of arthritis, muscular aches, the common cold, toothache</p> <p>■ temporarily reduces fever</p> <p><b>Warnings</b></p> <p>■ <b>Ask your doctor before use</b> if you are pregnant, under a doctor's care for a serious condition, age 60 or over,</p>	<p>LOT : EXP : R206/09</p>
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Size : 95 x 26 mm

<p>taking any other drug or have stomach problems.</p> <p>■ This product may cause a <b>severe allergic reaction</b>, especially in people allergic to aspirin. Symptoms may include: asthma (wheezing), blisters, facial swelling, hives, rash,</p>	<p>shock, skin reddening. If an allergic reaction occurs, stop use and seek medical help right away.</p> <p><b>Do not use</b> this product if you have ever had an allergic reaction to any pain reliever/fever reducer.</p> <p>■ This product may cause <b>stomach bleeding</b>.</p>	<p>■ The risk of heart attack or stroke may increase if you use more than directed or for longer than directed.</p> <p><b>Directions ■ do not take more than directed ■ the smallest effective dose should be used</b></p> <p>■ do not take longer than 10 days, unless directed by a doctor</p>
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<p>■ adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist</p> <p>■ if pain or fever does not respond to 1 capsule, 2 capsules may be used</p> <p>■ do not exceed 6 capsules in 24 hours, unless directed by a doctor.</p> <p>■ children under 12 years: ask a doctor</p>	<p>Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.</p> <p><b>Each capsule contains:</b> potassium 20 mg</p>	<p>Mfg. Lic. No. : GO/Drugs/515</p> <p>Manufactured for : <b>Marksans Pharma Inc.</b> Lake Grove, NY 11755, USA</p> <p>Manufactured by: <b>Marksans Pharma Ltd.</b> Verna, Goa - 403 722, India</p>
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**Drug Facts** (Continued)

- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer
- right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems
- high blood pressure
- heart or kidney disease
- asthma
- taken a diuretic
- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

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- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin for heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**Drug Facts** (Continued)

**Other information**

- each capsule contains: potassium 20 mg
- read all warnings and directions before use. Keep carton.
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

609069

Manufactured for :  
**Marksans Pharma Inc.**  
Lake Grove, NY 11755, USA

Manufactured by:  
**Marksans Pharma Ltd.**  
Verna,Goa - 403 722, India  
Mfg. Lic. No. : GO/Drugs/515

**Drug Facts** (Continued)

**When using this product**

- take with food or milk if stomach upset occurs
- the risk of heart attack or stroke may increase if you use more than directed or for longer than directed.

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**If pregnant or breast-feeding**, ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- do not take more than directed
- the smallest effective dose should be used
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

NDC 25000-133-04

**Ibuprofen Capsules, 200 mg**

Pain Reliever / Fever Reducer (NSAID)

\*\*Liquid Filled Capsules

32 Softgels\*\*

Marksans



**READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION.**

**Drug Facts**

**Active ingredient (in each capsule)**

Solubilized ibuprofen equal to Pain reliever/ 200 mg ibuprofen (NSAID)\* ..... Fever reducer (present as the free acid and potassium salt)  
\*nonsteroidal anti-inflammatory drug

**Purpose**

**Uses**

- temporarily relieves minor aches and pains due to:
  - backache ■ headache ■ menstrual cramps
  - minor pain of arthritis ■ muscular aches
  - the common cold ■ toothache
- temporarily reduces fever

**Warnings**

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing) ■ blisters ■ facial swelling ■ hives ■ rash
- shock ■ skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you : ■ are age 60 or older ■ have had stomach ulcers or bleeding problems

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this page is the manifestation of the electronic signature.**  
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/s/

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James Barlow  
6/24/2009 10:51:58 AM  
LABELING REVIEWER

Koung Lee  
6/24/2009 02:23:16 PM  
LABELING REVIEWER  
For Wm Peter Rickman

**APPROVAL SUMMARY**  
**REVIEW OF PROFESSIONAL LABELING**  
**DIVISION OF LABELING AND PROGRAM SUPPORT**  
**LABELING REVIEW BRANCH**

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ANDA Number: 79-205  
Dates of Submission: **August 4, 2008**  
Applicant's Name: Marksans Pharma Limited  
Established Name: Ibuprofen Capsules, 200 mg

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**Approval Summary:**

1. **Do you have copies of final printed labels and labeling?** Yes
2. **CONTAINER – Bottles of 32 count (for the 200 mg strength capsules)**  
Satisfactory in **final print** as of the August 30, 2007 electronic submission
3. **CONTAINER – Bottles of 600 count (for the 200 mg strength capsules)**  
Satisfactory in **final print** as of the August 4, 2008 electronic submission
4. **CARTON – 32 count bottles ONLY**  
Satisfactory in **final print** as of the August 4, 2008 electronic submission

5. **Patent Data – NDA 20-402**

Patent No.	Patent Expiration	Use Code	Description	How Filed	Labeling Impact
None	None	None	There are no unexpired patents for this product in the Orange Book Database.	N/A	None

**Exclusivity Data– NDA 20-402**

Code	Reference	Expiration	Labeling Impact
None	There is no unexpired exclusivity for this product in the Orange Book Database.	N/A	None

6. **Revisions needed post-approval:** None

**BASIS OF APPROVAL:**

Was this approval based upon a petition? No  
What is the RLD on the 356(h) form: Advil Liqui-Gels®  
NDA Number: N 20-402  
NDA Drug Name: Advil Liqui-Gels®  
NDA Firm: Wyeth Consumer Healthcare; Approved June 12, 2008. (NDA-20-402/S-024)  
Date of Approval of NDA Insert and supplement: Approved June 12, 2008; NDA N 20-402/S-024  
Has this been verified by the MIS system for the NDA? Yes  
Was this approval based upon an OGD labeling guidance? No  
Basis of Approval for the Container Labels: Most recently approved labeling of the reference listed drug, Advil Liqui-Gels®

**FOR THE RECORD:**

1. MODEL LABELING  
Wyeth Consumer Healthcare. (ANDA 20-402/S-024), Approved June 12, 2008).
2. INACTIVE INGREDIENTS  
*The listing of inactive ingredients in the DESCRIPTION section of the package insert appears to be consistent with the listing of inactive ingredients found in the **statement of components appearing on page DRUG PRODUCT [Name, Dosage form]***

P.1 Description and Composition of the Drug Product [name, dosage form]

P.2 Pharmaceutical Development [name, dosage form]

*P.2.1 Components of the Drug Product*

What are the components and composition of the final product? What is the function of each excipient?

The quantitative composition and function of each component in the drug product is listed.

S. No.	Ingredients	Pharmacopeial reference	mg / capsule	% per capsule	Function
MEDICAMENT					
01	Ibuprofen	USP	200.00	(b) (4)	Active ingredient

(b) (4)

3. STORAGE TEMPERATURE RECOMMENDATIONS COMPARISON

USP: Preserve in tight, light-resistant container.

RLD: Store at 20 to 25°C(68 to 77°F) avoid excessive heat above 40°C (104°F).

ANDA: Same as RLD

4. PACKAGING CONFIGURATIONS

ANDA: Bottles of 32 and 600 **count**

5. The tablet/capsule imprintings have been accurately described as required by 21 CFR 206,et al. (Imprinting of Solid Oral Dosage Form Products for Human Use; Final Rule,

effective 9/13/95).

6. Manufacturing will be done by  
US Agent:

Nilkanth Patel  
Pharmgen LLC  
1919 Middle Country Road, Suite 206  
Centereach, NY 11720

7. CONTAINER/CLOSURE

**Container Closure System**

The firm will market commercial packs in (b) (4)

with counts-32 and 600 capsules. (b) (4) bottle packs shall be packaged in outer shipper. In addition, it will ship bulk capsules in double (b) (4) bags, placed in (b) (4) container (b) (4) for repacking purpose. The largest and smallest packaging proposed for Ibuprofen capsules are:

Counts	Primary Package Type	Comment
32 capsules	(b) (4)	Smallest pack
600 capsules	(b) (4)	Largest pack

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Date of Review: 9/10/08

Date of Submission: 8/4/08

Primary Reviewer: Jim Barlow

Date:

Team Leader: John Grace

Date:

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NDC 25000-133-13

# Ibuprofen Capsules 200 mg

Pain Reliever / Fever Reducer (NSAID)

**\*\*Liquid Filled Capsules**

**600 Softgels\*\***



Marksans

### Drug Facts

Active ingredient (in each capsule)	Purpose
Solubilized ibuprofen equal to 200 mg ibuprofen (NSAID)*	Pain reliever/Fever reducer (present as the free acid and potassium salt)
*nonsteroidal anti-inflammatory drug	

### Uses

- temporarily relieves minor aches and pains due to:
  - backache
  - headache
  - menstrual cramps
  - minor pain of arthritis
  - muscular aches
  - the common cold
  - toothache
- temporarily reduces fever

### Warnings

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing)
- blisters
- facial swelling
- hives
- rash
- shock
- skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

LOT :

EXP :



Size : 140 x 80 mm

**Drug Facts** (Continued)

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you :

- are age 60 or older
- have had stomach ulcers or bleeding problems
- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer
- right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems
- high blood pressure
- heart or kidney disease
- asthma

**Drug Facts** (Continued)

- taken a diuretic
- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin to prevent heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**When using this product**

- take with food or milk if stomach upset occurs
- long term continuous use may increase the risk of heart attack or stroke

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools.  
These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**If pregnant or breast-feeding,** ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a

**Drug Facts** (Continued)

doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- **do not take more than directed**
- **the smallest effective dose should be used**
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

**Other information**

- **each capsule contains:** potassium 20 mg
- read all warnings and directions before use
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene

**Drug Facts** (Continued)

glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

Manufactured for :  
**Marksans Pharma Inc.**  
Lake Grove, NY 11755, USA

Manufactured by:  
**Marksans Pharma Ltd.**  
Verna, Goa - 403 722, India

Mfg. Lic. No. : GO/Drugs/515

R208/08

: dX3

: 101



**Drug Facts** (Continued)

- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer ■ right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
  - ulcers
  - bleeding problems
  - high blood pressure
  - heart or kidney disease
  - asthma
  - taken a diuretic
  - reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin to prevent heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**When using this product**

**Drug Facts** (Continued)

- take with food or milk if stomach upset occurs
- long term continuous use may increase the risk of heart attack or stroke

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**If pregnant or breast-feeding,** ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- do not take more than directed
- the smallest effective dose should be used
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

**Drug Facts** (Continued)

**Other information**

- each capsule contains: potassium 20 mg
- read all warnings and directions before use. Keep carton.
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

P2008/08

Manufactured for :  
**Marksans Pharma Inc.**  
Lake Grove, NY 11755, USA

Manufactured by:  
**Marksans Pharma Ltd.**  
Verna, Goa - 403 722, India  
Mfg. Lic. No. : GO/Drugs/515

NDC 25000-133-04

**Ibuprofen Capsules 200 mg**

Pain Reliever / Fever Reducer (NSAID)

**\*\*Liquid Filled Capsules**

**32 Softgels\*\***

**Marksans**



**READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION.**

**Drug Facts**

**Active ingredient (in each capsule)**

Solubilized ibuprofen equal to Pain reliever/ 200 mg ibuprofen (NSAID)\* ..... Fever reducer (present as the free acid and potassium salt)  
\*nonsteroidal anti-inflammatory drug

**Purpose**

**Uses**

- temporarily relieves minor aches and pains due to:
  - backache ■ headache ■ menstrual cramps
  - minor pain of arthritis ■ muscular aches
  - the common cold ■ toothache
- temporarily reduces fever

**Warnings**

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing) ■ blisters ■ facial swelling ■ hives ■ rash ■ shock ■ skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you : ■ are age 60 or older ■ have had stomach ulcers or bleeding problems

<p>NDC 25000 133 04</p> <p><b>Ibuprofen Capsules</b> <b>200 mg</b></p> <p>Pain Reliever / Fever Reducer (NSAID)</p> <p>**Liquid Filled Capsules**</p> <p>32 Softgels**</p> <p> <b>Marksans</b></p>	<p><b>READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION</b></p> <p><b>Uses</b> ■ temporarily relieves minor aches and pains due to: backache, headache, menstrual cramps, minor pain</p>	<p>of arthritis, muscular aches, the common cold, toothache</p> <p>■ temporarily reduces fever</p> <p><b>Warnings</b></p> <p>■ <b>Ask your doctor before use</b> if you are pregnant, under a doctor's care for a serious condition, age 60 or over,</p>	<p>LOT : EXP : R108/07</p>
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Size : 95 x 26 mm

<p>taking any other drug or have stomach problems.</p> <p>■ This product may cause a <b>severe allergic reaction</b>, especially in people allergic to aspirin. Symptoms may include: asthma (wheezing), blisters, facial swelling, hives, rash,</p>	<p>shock, skin reddening. If an allergic reaction occurs, stop use and seek medical help right away.</p> <p><b>Do not use</b> this product if you have ever had an allergic reaction to any pain reliever/fever reducer.</p> <p>■ This product may cause <b>stomach bleeding</b>.</p>	<p>■ <b>Long term continuous use</b> of this product may increase risk of heart attack or stroke.</p> <p><b>Directions</b> ■ <b>do not take more than directed</b> ■ <b>the smallest effective dose should be used</b></p> <p>■ adults and children 12 years and over: take 1 capsule every 4 to</p>
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<p>6 hours while symptoms persist ■ if pain or fever does not respond to 1 capsule, 2 capsules may be used</p> <p>■ do not exceed 6 capsules in 24 hours, unless directed by a doctor.</p> <p>■ children under 12 years: ask a doctor</p>	<p><b>Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.</b></p> <p><b>Each capsule contains:</b> potassium 20 mg</p>	<p>Mfg. Lic. No. : GO/Drugs/515</p> <p>Manufactured for : <b>Marksans Pharma Inc.</b> Lake Grove, NY 11755, USA</p> <p>Manufactured by: <b>Marksans Pharma Ltd.</b> Verna, Goa - 403 722, India</p>
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this page is the manifestation of the electronic signature.**  
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/s/

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James Barlow  
9/10/2008 02:27:21 PM  
LABELING REVIEWER

John Grace  
9/11/2008 11:19:55 AM  
LABELING REVIEWER

**APPROVAL SUMMARY  
REVIEW OF PROFESSIONAL LABELING  
DIVISION OF LABELING AND PROGRAM SUPPORT  
LABELING REVIEW BRANCH**

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ANDA Number: 79-205  
Dates of Submission: **August 30, 2007**  
Applicant's Name: Marksans Pharma Limited  
Established Name: Ibuprofen Capsules, 200 mg

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**Approval Summary:**

- 1. Do you have copies of final printed labels and labeling?** Yes
- 2. CONTAINER – Bottles of 32 and 600 count (for the 200 mg strength capsules)**

Satisfactory in **final print** as of the August 30, 2007 electronic submission

- 3. CARTON – 32 count bottles ONLY**  
Satisfactory in **final print** as of the August 30, 2007 electronic submission

**4. Patent Data – NDA 20-402**

Patent No.	Patent Expiration	Use Code	Description	How Filed	Labeling Impact
None	None	None	There are no unexpired patents for this product in the Orange Book Database.	N/A	None

**Exclusivity Data– NDA 20-402**

Code	Reference	Expiration	Labeling Impact
None	There is no unexpired exclusivity for this product in the Orange Book Database.	N/A	None

- 5. Revisions needed post-approval:** None

**BASIS OF APPROVAL:**

Was this approval based upon a petition? No  
What is the RLD on the 356(h) form: Advil Liqui-Gels®  
NDA Number: N 20-402  
NDA Drug Name: Advil Liqui-Gels®  
NDA Firm: Wyeth Consumer Healthcare; Approved April 28, 2006. (NDA-20-402/S-016)  
Date of Approval of NDA Insert and supplement: Approved April 28, 2006; NDA N 20-402/S-016  
Has this been verified by the MIS system for the NDA? Yes  
Was this approval based upon an OGD labeling guidance? No  
Basis of Approval for the Container Labels: Most recently approved labeling of the reference listed drug, Advil Liqui-Gels®

**FOR THE RECORD:**

- MODEL LABELING  
Wyeth Consumer Healthcare. (ANDA 20-402/S-016), Approved April 28, 2006).
- INACTIVE INGREDIENTS  
*The listing of inactive ingredients in the DESCRIPTION section of the package insert appears to be consistent with the listing of inactive ingredients found in the **statement of components appearing on page DRUG PRODUCT [Name, Dosage form]***

P.1 Description and Composition of the Drug Product [name, dosage form]

P.2 Pharmaceutical Development [name, dosage form]

*P.2.1 Components of the Drug Product*

What are the components and composition of the final product? What is the function of each excipient?

The quantitative composition and function of each component in the drug product is listed.

S. No.	Ingredients	Pharmacopeial reference	mg / capsule	% per capsule	Function
MEDICAMENT					
01	Ibuprofen	USP	200.00	(b) (4)	Active ingredient

(b) (4)

3. STORAGE TEMPERATURE RECOMMENDATIONS COMPARISON

USP: Preserve in tight, light-resistant container.

RLD: Store at 20 to 25°C (68 to 77°F) avoid excessive heat above 40°C (104°F).

ANDA: Same as RLD

4. PACKAGING CONFIGURATIONS

ANDA: Bottles of 32 and 600 **count**

5. The tablet/capsule imprintings have been accurately described as required by 21 CFR 206, et al. (Imprinting of Solid Oral Dosage Form Products for Human Use; Final Rule, effective 9/13/95).

6. Manufacturing will be done by  
US Agent:  
Nilkanth Patel  
Pharmgen LLC  
1919 Middle Country Road, Suite 206  
Centereach, NY 11720

7. CONTAINER/CLOSURE

**Container Closure System**

The firm will market commercial packs in (b) (4)

with counts-32 and 600 capsules. (b) (4) bottle packs shall be packaged in outer shipper. In addition, it

will ship bulk capsules in double (b) (4) bags, placed in (b) (4) container (b) (4) for repacking purpose.

The largest and smallest packaging proposed for Ibuprofen capsules are:

Counts	Primary Package Type	Comment
32 capsules	(b) (4)	Smallest pack
600 capsules	(b) (4)	Largest pack

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Date of Review: 6/5/08

Date of Submission: 8/30/07

Primary Reviewer: Jim Barlow

Date:

Team Leader: John Grace

Date:

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NDC 25000-133-13

# Ibuprofen Capsules 200 mg

Pain Reliever / Fever Reducer (NSAID)

**\*\*Liquid Filled Capsules**

**600 Softgels\*\***



Marksans

### Drug Facts

Active ingredient (in each capsule)	Purpose
Solubilized ibuprofen equal to 200 mg ibuprofen (NSAID)*	Pain reliever/Fever reducer (present as the free acid and potassium salt)
*nonsteroidal anti-inflammatory drug	

### Uses

- temporarily relieves minor aches and pains due to:
  - backache
  - minor pain of arthritis
  - muscular aches
  - the common cold
  - temporarily reduces fever
- headache
- menstrual cramps
- toothache

### Warnings

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing)
- facial swelling
- shock
- blisters
- hives
- rash
- skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

LOT :

EXP :

R108/07



Size : 140 x 80 mm

**Drug Facts** (Continued)

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you :

- are age 60 or older
- have had stomach ulcers or bleeding problems
- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer ■ right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems
- high blood pressure
- heart or kidney disease
- taken a diuretic

**Drug Facts** (Continued)

- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin to prevent heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**When using this product**

- take with food or milk if stomach upset occurs
- long term continuous use may increase the risk of heart attack or stroke

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**If pregnant or breast-feeding,** ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a

**Drug Facts** (Continued)

doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- **do not take more than directed**
- **the smallest effective dose should be used**
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

**Other information**

- **each capsule contains:** potassium 20 mg
- read all warnings and directions before use
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene

**Drug Facts** (Continued)

glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

Manufactured for :  
**Marksans Pharma Inc.**  
Lake Grove, NY 11755, USA

Manufactured by:  
**Marksans Pharma Ltd.**  
Verna, Goa - 403 722, India

Mfg. Lic. No. : GO/Drugs/515

F10807

<p>NDC 25000 133 04</p> <p><b>Ibuprofen Capsules</b> <b>200 mg</b></p> <p>Pain Reliever / Fever Reducer (NSAID)</p> <p>**Liquid Filled Capsules**</p> <p>32 Softgels**</p> <p> <b>Marksans</b></p>	<p><b>READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION</b></p> <p><b>Uses</b> ■ temporarily relieves minor aches and pains due to: backache, headache, menstrual cramps, minor pain</p>	<p>of arthritis, muscular aches, the common cold, toothache</p> <p>■ temporarily reduces fever</p> <p><b>Warnings</b></p> <p>■ <b>Ask your doctor before use</b> if you are pregnant, under a doctor's care for a serious condition, age 60 or over,</p>	<p>LOT : EXP : R108/07</p>
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Size : 95 x 26 mm

<p>taking any other drug or have stomach problems.</p> <p>■ This product may cause a <b>severe allergic reaction</b>, especially in people allergic to aspirin. Symptoms may include: asthma (wheezing), blisters, facial swelling, hives, rash,</p>	<p>shock, skin reddening. If an allergic reaction occurs, stop use and seek medical help right away.</p> <p><b>Do not use</b> this product if you have ever had an allergic reaction to any pain reliever/fever reducer.</p> <p>■ This product may cause <b>stomach bleeding</b>.</p>	<p>■ <b>Long term continuous use</b> of this product may increase risk of heart attack or stroke.</p> <p><b>Directions</b> ■ <b>do not take more than directed</b> ■ <b>the smallest effective dose should be used</b></p> <p>■ adults and children 12 years and over: take 1 capsule every 4 to</p>
--	---	--

<p>6 hours while symptoms persist ■ if pain or fever does not respond to 1 capsule, 2 capsules may be used</p> <p>■ do not exceed 6 capsules in 24 hours, unless directed by a doctor.</p> <p>■ children under 12 years: ask a doctor</p>	<p><b>Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.</b></p> <p><b>Each capsule contains:</b> potassium 20 mg</p>	<p>Mfg. Lic. No. : GO/Drugs/515</p> <p>Manufactured for : <b>Marksans Pharma Inc.</b> Lake Grove, NY 11755, USA</p> <p>Manufactured by: <b>Marksans Pharma Ltd.</b> Verna, Goa - 403 722, India</p>
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: dX3

: 107



**Drug Facts (Continued)**

- take a blood thinning (anticoagulant) or steroid drug
- take other drugs containing an NSAID [aspirin, ibuprofen, naproxen, or others]
- have 3 or more alcoholic drinks every day while using this product
- take more or for a longer time than directed

**Do not use**

- if you have ever had an allergic reaction to any other pain reliever/fever reducer ■ right before or after heart surgery

**Ask a doctor before use if you have**

- problems or serious side effects from taking pain relievers or fever reducers
- stomach problems that last or come back, such as heartburn, upset stomach, or stomach pain
- ulcers
- bleeding problems
- high blood pressure
- heart or kidney disease
- taken a diuretic
- reached age 60 or older

**Ask a doctor or pharmacist before use if you are**

- taking any other drug containing an NSAID (prescription or nonprescription)
- taking a blood thinning (anticoagulant) or steroid drug
- under a doctor's care for any serious condition
- taking aspirin to prevent heart attack or stroke, because ibuprofen may decrease this benefit of aspirin
- taking any other drug

**When using this product**

- take with food or milk if stomach upset occurs

**Drug Facts (Continued)**

**Other information**

- each capsule contains: potassium 20 mg
- read all warnings and directions before use. Keep carton.
- store at 20 to 25°C (68 to 77°F)
- avoid excessive heat above 40°C (104°F)

**Inactive ingredients** Ammonium Hydroxide, FD&C Green No. 3, Gelatin, Iron oxide black, Medium chain triglycerides, Polyethylene glycol, Propylene glycol, Potassium hydroxide, Purified water, Shellac, Sorbitol, Sorbitan monooleate.

Do Not Use if seal under bottle cap imprinted with "SEALED for YOUR PROTECTION" is broken or missing.

**Drug Facts (Continued)**

- long term continuous use may increase the risk of heart attack or stroke

**Stop use and ask a doctor if**

- you feel faint, vomit blood, or have bloody or black stools. These are signs of stomach bleeding.
- pain gets worse or lasts more than 10 days
- fever gets worse or lasts more than 3 days
- stomach pain or upset gets worse or lasts
- redness or swelling is present in the painful area
- any new symptoms appear

**If pregnant or breast-feeding**, ask a health professional before use. It is especially important not to use ibuprofen during the last 3 months of pregnancy unless definitely directed to do so by a doctor because it may cause problems in the unborn child or complications during delivery.

**Keep out of reach of children.** In case of overdose, get medical help or contact a Poison Control Center right away.

**Directions**

- do not take more than directed
- the smallest effective dose should be used
- do not take longer than 10 days, unless directed by a doctor (see Warnings)
- adults and children 12 years and over: take 1 capsule every 4 to 6 hours while symptoms persist
- if pain or fever does not respond to 1 capsule, 2 capsules may be used
- do not exceed 6 capsules in 24 hours, unless directed by a doctor.
- children under 12 years: ask a doctor

NDC 25000-133-04

Ibuprofen Capsules 200 mg

Pain Reliever / Fever Reducer (NSAID)

\*\*Liquid Filled Capsules

32 Softgels\*\*

Marksans



**READ AND KEEP CARTON FOR COMPLETE WARNINGS AND INFORMATION.**

**Drug Facts**

**Active ingredient (in each capsule)**

Solubilized ibuprofen equal to Pain reliever/ 200 mg ibuprofen (NSAID)\* ..... Fever reducer (present as the free acid and potassium salt) \*nonsteroidal anti-inflammatory drug

**Purpose**

**Uses**

- temporarily relieves minor aches and pains due to:
  - backache ■ headache ■ menstrual cramps
  - minor pain of arthritis ■ muscular aches
  - the common cold ■ toothache
- temporarily reduces fever

**Warnings**

**Allergy alert:** Ibuprofen may cause a severe allergic reaction, especially in people allergic to aspirin.

Symptoms may include :

- asthma (wheezing) ■ blisters ■ facial swelling ■ hives ■ rash
- shock ■ skin reddening

If an allergic reaction occurs, stop use and seek medical help right away.

**Stomach bleeding warning:** This product contains a nonsteroidal anti-inflammatory drug (NSAID), which may cause stomach bleeding. The chance is higher if you : ■ are age 60 or older ■ have had stomach ulcers or bleeding problems

R108007

Manufactured for : Marksans Pharma Inc. Lake Grove, NY 11755, USA

Manufactured by: Marksans Pharma Ltd. Verna, Goa - 403 722, India Mfg. Lic. No. : GO/Drugs/515

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this page is the manifestation of the electronic signature.**  
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/s/

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James Barlow  
6/5/2008 03:11:36 PM  
LABELING REVIEWER

John Grace  
6/6/2008 12:10:03 PM  
LABELING REVIEWER

**CENTER FOR DRUG EVALUATION AND RESEARCH**

*APPLICATION NUMBER:*

**ANDA 79-205**

**CHEMISTRY REVIEWS**

# **ANDA 79-205**

**Ibuprofen Capsules (liquid filled), 200 mg**

**Marksans Pharma Limited**

**Subhash C. Dhanesar, Ph.D.**

**Chemistry Division I**

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B. Environmental Assessment Or Claim Of Categorical Exclusion .....	

# Chemistry Review Data Sheet

1. ANDA 79-205
2. REVIEW #3
3. REVIEW DATE: November 24, 2008
4. REVIEWER: S. Dhanesar, Ph.D.

**5. PREVIOUS DOCUMENTS:**

<u>Submission(s) Reviewed</u>	<u>Document Date</u>
Original Submission	August 30, 2007
Gratuitous Amendment	September 12, 2007
Gratuitous Amendment	December 11, 2007
Amendment (AB)	February 14, 2008
Amendment (AB)	April 11, 2008
Amendment (CMC)	March 11, 2008
Amendment (CMC)	April 16, 2008
Amendment (CMC)	April 21, 2008
Amendment (<467>) (AA)	May 22 and May 30, 2008
	August 15, 2008

**6. SUBMISSION(S) BEING REVIEWED:**

<u>Submission(s) Reviewed</u>	<u>Document Date</u>
Amendment	October 6, 2008

**7. NAME & ADDRESS OF APPLICANT:**

Name: Marksans Pharma Limited  
Address: 601-622, 6th Floor, Chintamani Plaza  
Mohan Studio Compound  
Andheri-Kurla Road  
Andheri (East), Mumbai 400 099, India  
Representative: US Agent:  
Nilkanth Patel  
Pharmgen LLC  
1919 Middle Country Road, Suite 206  
Centereach, NY 11720  
Telephone: 631-656-9753  
Fax: 631-656-9754

**8. DRUG PRODUCT NAME/CODE/TYPE:**

## Executive Summary Section

a) Proprietary Name:

b) Non-Proprietary Name (USAN): Ibuprofen Capsules (liquid filled), 200 mg

9. LEGAL BASIS FOR SUBMISSION: Advil® Liquid-Gels® from Wyeth

There are no unexpired patents or exclusivities for the drug product.

10. PHARMACOL. CATEGORY: Short term management of pain

11. DOSAGE FORM: Solid (Capsules)

12. STRENGTH/POTENCY: 200 mg

13. ROUTE OF ADMINISTRATION: Oral

14. Rx/OTC DISPENSED: \_\_\_Rx \_\_\_x\_OTC

15. [SPOTS \(SPECIAL PRODUCTS ON-LINE TRACKING SYSTEM\)](#):

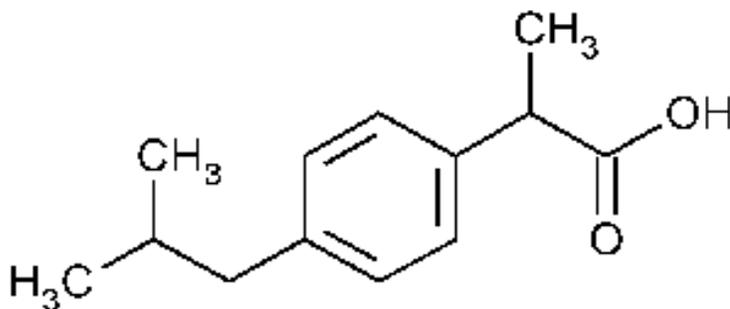
\_\_\_\_\_SPOTS product – Form Completed      \_\_\_x\_\_\_Not a SPOTS product

16. CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOLECULAR WEIGHT:

Benzene acetic acid, alpha-methyl-4-(2-methylpropyl), (±)-

(±)-*p*-Isobutylhydratropic acid

(±)-2-(*p*-Isobutylphenyl)propionic acid



Executive Summary Section

17. RELATED/SUPPORTING DOCUMENTS:

**A. DMFs:**

DMF #	TYPE	HOLDER	ITEM REFERENCED	CODE <sup>1</sup>	STATUS <sup>2</sup>	DATE REVIEW COMPLETED	COMMENTS
		(b) (4)	Ibuprofen USP	3	Adequate	11-19-2008	R. Powers
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			

<sup>1</sup> Action codes for DMF Table:

1 – DMF Reviewed.

Other codes indicate why the DMF was not reviewed, as follows:

2 –Type 1 DMF

3 – Reviewed previously and no revision since last review

4 – Sufficient information in application

<sup>2</sup> Adequate, Inadequate, or N/A (There is enough data in the application, therefore the DMF did not need to be reviewed)

18. STATUS:

CONSULTS/ CMC RELATED REVIEWS	RECOMMENDATION	DATE	REVIEWER
Microbiology	N/A		
EES	Acceptable	12-22-2008	
Methods Validation	Not required		
Labeling	Acceptable	06-25-2009	J. Barlow
Bioequivalence	Acceptable	05-29-2009	G. Johnson
EA	Granted		
Radiopharmaceutical	N/A		

*Note: The firm did accept the DBE's dissolution conditions and specification. Clinical review is pending.*

19. ORDER OF REVIEW

The application submission(s) covered by this review was taken in the date order of receipt.

\_\_\_ Yes  No If no, explain reason(s) below: Minor Amendment

# The Chemistry Review for ANDA 79-205

## The Executive Summary

### I. Recommendations

#### A. Recommendation and Conclusion on Approvability

The ANDA is approvable.

#### B. Recommendation on Phase 4 (Post-Marketing) Commitments, Agreements, and/or Risk Management Steps, if Approvable: N/A

### II. Summary of Chemistry Assessments

#### A. Description of the Drug Product(s) and Drug Substance(s)

The drug product is an immediate release 200 mg Ibuprofen (liquid filled) soft gelatin capsules. <sup>(b) (4)</sup>

The drug substance is Ibuprofen, USP. The maximum daily dose is 1200 mg.

#### B. Description of How the Drug Product is Intended to be Used

The drug product is sold over the counter and is used as directed in the package insert or as directed by a physician.

#### C. Basis for Approval Recommendation

The ANDA is approvable.

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/s/

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Subhash Dhanesar  
6/26/2009 03:12:11 PM  
CHEMIST

Albert Mueller  
6/26/2009 04:26:43 PM  
CHEMIST

Dat Doan  
6/29/2009 09:34:34 AM  
CSO

# **ANDA 79-205**

**Ibuprofen Capsules (liquid filled), 200 mg**

**Marksans Pharma Limited**

**Subhash C. Dhanesar, Ph.D.**

**Chemistry Division I**

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B. Environmental Assessment Or Claim Of Categorical Exclusion .....	

# Chemistry Review Data Sheet

1. ANDA 79-205
2. REVIEW #2
3. REVIEW DATE: May 13, 2008/August 15, 2008
4. REVIEWER: S. Dhanesar, Ph.D.

5. PREVIOUS DOCUMENTS:

<u>Submission(s) Reviewed</u>	<u>Document Date</u>
Original Submission	August 30, 2007
Gratuitous Amendment	September 12, 2007
Gratuitous Amendment	December 11, 2007
Amendment (AB)	February 14, 2008
Amendment (AB)	April 11, 2008

6. SUBMISSION(S) BEING REVIEWED:

<u>Submission(s) Reviewed</u>	<u>Document Date</u>
Amendment (CMC)	March 11, 2008
Amendment (CMC)	April 16, 2008
Amendment (CMC)	April 21, 2008
Amendment (<467>) (AA)	May 22 and May 30, 2008
	August 15, 2008

7. NAME & ADDRESS OF APPLICANT:

Name: Marksans Pharma Limited  
Address: 601-622, 6th Floor, Chintamani Plaza  
Mohan Studio Compound  
Andheri-Kurla Road  
Andheri (East), Mumbai 400 099, India  
Representative: US Agent:  
Nilkanth Patel  
Pharmgen LLC  
1919 Middle Country Road, Suite 206  
Centereach, NY 11720  
Telephone: 631-656-9753  
Fax: 631-656-9754

8. DRUG PRODUCT NAME/CODE/TYPE:

## Executive Summary Section

- a) Proprietary Name:  
b) Non-Proprietary Name (USAN): Ibuprofen Capsules (liquid filled), 200 mg

## 9. LEGAL BASIS FOR SUBMISSION: Advil® Liquid-Gels® from Wyeth

There are no unexpired patents or exclusivities for the drug product.

## 10. PHARMACOL. CATEGORY: Short term management of pain

## 11. DOSAGE FORM: Solid (Capsules)

## 12. STRENGTH/POTENCY: 200 mg

## 13. ROUTE OF ADMINISTRATION: Oral

## 14. Rx/OTC DISPENSED: \_\_\_Rx \_\_\_x\_OTC

15. [SPOTS \(SPECIAL PRODUCTS ON-LINE TRACKING SYSTEM\):](#)

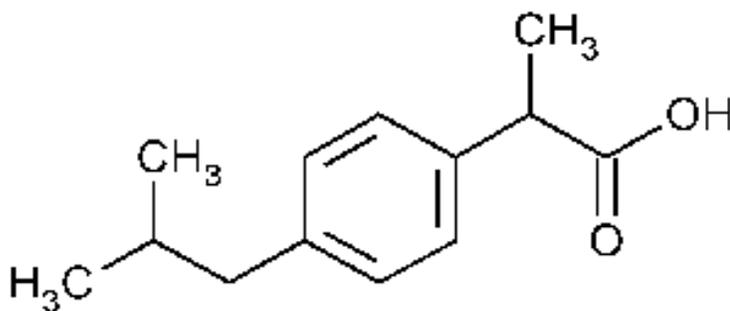
\_\_\_ SPOTS product – Form Completed \_\_\_x Not a SPOTS product

## 16. CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOLECULAR WEIGHT:

Benzene acetic acid, alpha-methyl-4-(2-methylpropyl), (±)-

(±)-*p*-Isobutylhydratropic acid

(±)-2-(*p*-Isobutylphenyl)propionic acid



Executive Summary Section

**17. RELATED/SUPPORTING DOCUMENTS:**

**A. DMFs:**

DMF #	TYPE	HOLDER	ITEM REFERENCED	CODE <sup>1</sup>	STATUS <sup>2</sup>	DATE REVIEW COMPLETED	COMMENTS
		(b) (4)	Ibuprofen USP	3	Inadequate	08-13-2008	R. Powers
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			

<sup>1</sup> Action codes for DMF Table:

1 – DMF Reviewed.

Other codes indicate why the DMF was not reviewed, as follows:

2 – Type 1 DMF

3 – Reviewed previously and no revision since last review

4 – Sufficient information in application

<sup>2</sup> Adequate, Inadequate, or N/A (There is enough data in the application, therefore the DMF did not need to be reviewed)

**18. STATUS:**

CONSULTS/ CMC RELATED REVIEWS	RECOMMENDATION	DATE	REVIEWER
Microbiology	N/A		
EES	deficient	9/2/08	Z. Williams
Methods Validation	Not required		
Labeling	Acceptable	06-05-2008	J. Barlow
Bioequivalence	Pending		
EA	Granted		
Radiopharmaceutical	N/A		

*Note: The firm did accept the DBE's dissolution conditions and specification. Clinical review is pending.*

**19. ORDER OF REVIEW**

The application submission(s) covered by this review was taken in the date order of receipt.

\_\_\_ Yes  No     If no, explain reason(s) below: Minor Amendment

# The Chemistry Review for ANDA 79-205

## The Executive Summary

### I. Recommendations

#### A. Recommendation and Conclusion on Approvability

The ANDA is not approvable due to pending EER and Bioequivalence (clinical) reviews. CMC is deficient. Labeling is acceptable. The dissolution conditions and specification recommended by DBE was accepted by the firm. The firm amended the CMC portion of the ANDA on April 21, 2008 to revise the testing specifications for the drug product and provided gratuitous amendment dated August 15, 2008 for USP<467> update.

#### B. Recommendation on Phase 4 (Post-Marketing) Commitments, Agreements, and/or Risk Management Steps, if Approvable: N/A

### II. Summary of Chemistry Assessments

#### A. Description of the Drug Product(s) and Drug Substance(s)

The drug product is an immediate release 200 mg Ibuprofen (liquid filled) soft gelatin capsules. (b) (4)

The drug substance is Ibuprofen, USP. The maximum daily dose is 1200 mg.

#### B. Description of How the Drug Product is Intended to be Used

The drug product is sold over the counter and is used as directed in the package insert or as directed by a physician.

#### C. Basis for Not-Approval Recommendation

The ANDA is not approvable due to pending EER. Bioequivalence (clinical) and CMC reviews are deficient. Labeling is acceptable.

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/s/

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Subhash Dhanesar  
9/5/2008 11:35:42 AM  
CHEMIST

Albert Mueller  
9/5/2008 12:14:11 PM  
CHEMIST

Dat Doan  
9/5/2008 01:11:08 PM  
CSO

# **ANDA 79-205**

**Ibuprofen Capsules (liquid filled), 200 mg**

**Marksans Pharma Limited**

**Subhash C. Dhanesar, Ph.D.**

**Chemistry Division I**

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# Chemistry Review Data Sheet

1. ANDA 79-205
2. REVIEW #: 1
3. REVIEW DATE: January 18, 2008
4. REVIEWER: S. Dhanesar, Ph.D.
5. PREVIOUS DOCUMENTS: None

6. SUBMISSION(S) BEING REVIEWED:

<u>Submission(s) Reviewed</u>	<u>Document Date</u>
Original Submission	August 30, 2007
Gratuitous Amendment	September 12, 2007
Gratuitous Amendment	December 11, 2007

7. NAME & ADDRESS OF APPLICANT:

Name: Marksans Pharma Limited  
601-622, 6th Floor, Chintamani Plaza  
Address: Mohan Studio Compound  
Andheri-Kurla Road  
Andheri (East), Mumbai 400 099, India  
US Agent:  
Nilkanth Patel  
Representative: Pharmgen LLC  
1919 Middle Country Road, Suite 206  
Centereach, NY 11720  
Telephone: 631-656-9753  
Fax: 631-656-9754

8. DRUG PRODUCT NAME/CODE/TYPE:

- a) Proprietary Name:
- b) Non-Proprietary Name (USAN): Ibuprofen Capsules (liquid filled), 200 mg

9. LEGAL BASIS FOR SUBMISSION: Advil® Liquid-Gels® from Wyeth

There are no unexpired patents or exclusivities for the drug product.

10. PHARMACOL. CATEGORY: Short term management of pain

## Chemistry Review Data Sheet

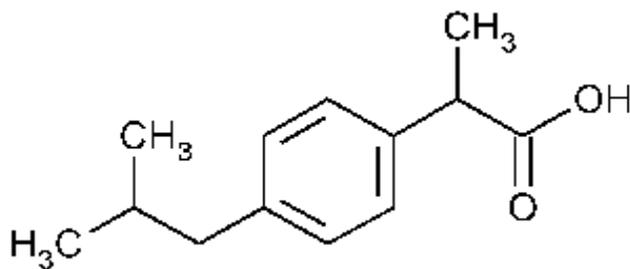
11. DOSAGE FORM: Solid (Capsules)
12. STRENGTH/POTENCY: 200 mg
13. ROUTE OF ADMINISTRATION: Oral
14. Rx/OTC DISPENSED: \_\_\_ Rx \_\_\_ x \_\_\_ OTC
15. [SPOTS \(SPECIAL PRODUCTS ON-LINE TRACKING SYSTEM\)](#):  
\_\_\_\_\_ SPOTS product – Form Completed      \_\_\_ x \_\_\_ Not a SPOTS product

16. CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOLECULAR WEIGHT:

Benzene acetic acid, alpha-methyl-4-(2-methylpropyl), (±)-

(±)-*p*-Isobutylhydratropic acid

(±)-2-(*p*-Isobutylphenyl)propionic acid



Chemistry Review Data Sheet

17. RELATED/SUPPORTING DOCUMENTS:

**A. DMFs:**

DMF #	TYPE	HOLDER	ITEM REFERENCED	CODE <sup>1</sup>	STATUS <sup>2</sup>	DATE REVIEW COMPLETED	COMMENTS
		(b) (4)	Ibuprofen USP	3	Adequate	02-05-2008	R. Powers
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			
		(b) (4)		4			

<sup>1</sup> Action codes for DMF Table:

1 – DMF Reviewed.

Other codes indicate why the DMF was not reviewed, as follows:

2 – Type 1 DMF

3 – Reviewed previously and no revision since last review

4 – Sufficient information in application

5 – Authority to reference not granted

6 – DMF not available

7 – Other (explain under "Comments")

<sup>2</sup> Adequate, Inadequate, or N/A (There is enough data in the application, therefore the DMF did not need to be reviewed)

**B. Other Documents: None**

18. STATUS:

CONSULTS/ CMC RELATED REVIEWS	RECOMMENDATION	DATE	REVIEWER
Microbiology	N/A		
EES	Pending		
Methods Validation	Not required		
Labeling	Pending		
Bioequivalence	Pending		
EA	Granted		
Radiopharmaceutical	N/A		

## Chemistry Review Data Sheet

## 19. ORDER OF REVIEW

The application submission(s) covered by this review was taken in the date order of receipt.  Yes  No If no, explain reason(s) below:

# The Chemistry Review for ANDA 79-205

## The Executive Summary

### I. Recommendations

#### A. Recommendation and Conclusion on Approvability

The ANDA is not approvable due to pending EER, Bioequivalence and Labeling reviews and deficient CMC review.

#### B. Recommendation on Phase 4 (Post-Marketing) Commitments, Agreements, and/or Risk Management Steps, if Approvable: N/A

### II. Summary of Chemistry Assessments

#### A. Description of the Drug Product(s) and Drug Substance(s)

The drug product is an immediate release 200 mg Ibuprofen (liquid filled) soft gelatin capsules.

The drug substance is Ibuprofen, USP. The maximum daily dose is 1200 mg.

#### B. Description of How the Drug Product is Intended to be Used

The drug product is sold over the counter and is used as directed in the package insert or as directed by a physician.

#### C. Basis for Not-Approval Recommendation

The ANDA is not approvable due to pending EER, Bioequivalence and Labeling reviews and deficient CMC review.

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/s/

-----  
Subhash Dhanesar  
2/13/2008 04:16:58 PM  
CHEMIST

Albert Mueller  
2/13/2008 04:33:53 PM  
CHEMIST

Dat Doan  
2/14/2008 12:11:25 PM  
CSO

**CENTER FOR DRUG EVALUATION AND RESEARCH**

*APPLICATION NUMBER:*  
**ANDA 79-205**

**BIOEQUIVALENCE REVIEWS**

**DIVISION OF BIOEQUIVALENCE ACCEPTABLE DSI INSPECTION REPORT  
REVIEW**

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<b>ANDA No.</b>	79-205
<b>Drug Product Name</b>	Ibuprofen Capsules
<b>Strength</b>	200 mg
<b>Applicant Name</b>	Marksans Pharma Limited
<b>Date of Original Submission</b>	August 30, 2007
<b>Date of Report</b>	May 29, 2009
<b>Reviewer</b>	Nam Chun, Pharm.D.

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### **EXECUTIVE SUMMARY**

Marksans Pharma Limited submitted ANDA 79-205 for Ibuprofen Capsules, 200 mg on August 30, 2007.

The bio review was completed and found acceptable on December 20, 2008 pending the outcome of a DSI inspection of the analytical and clinical sites, Accutest Research Laboratories, located at A-31TTC Industrial Area, Kopar Khairane, Navi-Mumbai, India.

The DSI inspection history for the sites is as follows:

- A "For Cause" inspection for ANDA (b) (4) was completed on 4/26/2005 and the outcome was VAI.
- A "Routine" inspection for ANDA (b) (4) was completed on 7/7/2004 and the outcome was VAI.

A new request for a "Routine" DSI re-inspection was requested for ANDA (b) (4) on June 2, 2008. ANDA 79-205 was added as a related ANDA to this request because both ANDAs shared the same study sites.

Per Bob West's request, since this application is ready for approval and the re-inspection of Accutest Research Laboratories has not yet been conducted, based upon prior satisfactory inspectional history of the sites, "the inspection link" to ANDA (b) (4) is hereby cancelled and the bio review of ANDA 79-205 is now acceptable. However, the study sites will be inspected at a later date as per our routine inspection request for ANDA (b) (4). (Please see attachment below for more information)

The bioequivalence section of the application is now complete and acceptable.

### **DEFICIENCY COMMENTS:**

None

### **RECOMMENDATIONS:**

From a bioequivalence point of view, the firm has met the requirements for *in vivo* bioequivalence and *in vitro* dissolution testing. The bioequivalence section of the application is acceptable.

**ATTACHMENT:**


---

From: Doan, Dat  
 Sent: Friday, May 22, 2009 1:30 PM  
 To: Solana-Sodeinde, Diana A  
 Subject: 79-205/Marksans/Ibuprofen

Hi Diana,

Concerning ANDA 79-205/Marksans/Ibuprofen

In the past you mentioned that this bio review is AC pending DSI. Can you give me a little more detail on the DSI (are they re-inspecting the site, what's holding it up?).

The firm is fairly new and getting this approved is a huge financial impact for them.

Thanks Diana,

Dat

---

From: Solana-Sodeinde, Diana A  
 Sent: Tuesday, May 26, 2009 11:44 AM  
 To: Doan, Dat  
 Subject: RE: 79-205/Marksans/Ibuprofen

Hi Dat

RE: Current status of ANDA 79-205

I just tried to call you but no answer.

The Bio review for ANDA 79205 has been completed thus far but NOT Approvable because of pending DSI results of ANDA (b) (4). These two applications share the same analytical and clinical sites located at Accutest Research Laboratories, A-31TTC Industrial Area, Kopar Khairane, Navi-Mumbai, India.

The DSI inspection history for the sites at the location mentioned above is listed below:

- A "For Cause" inspection for ANDA (b) (4) was completed on 4/26/2005 and the outcome was VAI. (Expired since inspection occurred more than 3 years ago)
- A "Routine" inspection for ANDA (b) (4) was completed on 7/7/2004 and the outcome was VAI. (Expired since inspection occurred more than 3 years ago)

In summary, a new request for a "Routine" DSI inspection was entered for ANDA (b) (4) on 6/2/2008 while ANDA 79205 was indicated as a "Related ANDA," pending the outcome of DSI inspection of ANDA (b) (4). Completion of the inspection has been due since 12/1/2008. However, there is substantial delay probably due to the location of the sites (foreign country), especially in Mumbai, where there was a recent safety issue (terrorist attacks!) that affected the completion of most of the DSI inspections in India.

I am aware that the firms have been calling.

In fact I spoke to Mr. Milton Patel (U.S. Agent for firm) and a Senior representative from the firm in India but unfortunately, since we are not allowed to give any information about DSI, all I can say is that the Bio status is "Under Review."

I hope this helps!

*Thank you,*

*Diana (Lola) Solana-Sodeinde, Pharm. D.*

---

**From:** Doan, Dat  
**Sent:** Wednesday, May 27, 2009 8:23 AM  
**To:** West, Robert L  
**Subject:** FW: 79-205/Marksans/Ibuprofen

[Message forwarded to Bob West](#)

---

**From:** West, Robert L  
**Sent:** Wednesday, May 27, 2009 8:32 AM  
**To:** Doan, Dat; Solana-Sodeinde, Diana A  
**Subject:** RE: 79-205/Marksans/Ibuprofen

[Diana:](#)

[I recommend that if the reinspection of the Accutest Research Laboratories has not been scheduled, please complete the bio review based upon the satisfactory inspectional history of the sites.](#)

[Thank you,](#)

[Bob](#)

**I. Completed Assignment for 79205 ID: 8382**

**Reviewer:** Solana-Sodeinde, Diana      **Date Completed:**  
**Verifier:** ,      **Date Verified:**  
**Division:** Division of Bioequivalence  
**Description:** DSI Inspection Report

*Productivity:*

<i>ID</i>	<i>Letter Date</i>	<i>Productivity Category</i>	<i>Sub Category</i>	<i>Productivity</i>	<i>Subtotal</i>
8382	8/30/2007	Other	DSI Inspection Report	1	1
				<b>Bean Total:</b>	<b>1</b>

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/s/

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Diana Solana-Sodeinde  
5/29/2009 03:33:22 PM  
BIOPHARMACEUTICS

Lizzie Sanchez  
5/29/2009 03:38:17 PM  
BIOPHARMACEUTICS

## DIVISION OF BIOEQUIVALENCE REVIEW

<b>ANDA No.</b>	79205	
<b>Drug Product Name</b>	Ibuprofen Liquid Filled Capsules (OTC)	
<b>Strength(s)</b>	200 mg	
<b>Applicant Name</b>	Marksans Pharma Ltd.	
<b>Address</b>	601-622, Chintamani Plaza, Andheri Kurla Road, Andheri (East), Mumbai-400099, India	
<b>Applicant's Point of Contact</b>	Authorized U.S. Agent: Mr. Nikanth J. Patel, Vice President Pharmgen LLC, 1919 Middle Country Road, Suite #206 Centereach, NY 11720	
<b>Contact's Telephone Number</b>	631-656-9753	
<b>Contact's Fax Number</b>	631-656-9754	
<b>Original Submission Date(s)</b>	30 Aug 2007 and 22 April 2008 (dissolution acknowledgement)	
<b>Submission Date(s) of Amendment(s) Under Review</b>	11 Sept 2008 submission of corrected SAS fed and fasted data	
<b>Reviewer</b>	Zakia R. Williams Ph.D.	
<b>Study Number (s)</b>	US/07/023	US/07/024
<b>Study Type (s)</b>	Fasted (STF)	Fed (STP)
<b>Strength (s)</b>	200 mg	200 mg
<b>Clinical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31	
<b>Clinical Site Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA	
<b>Analytical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31	
<b>Analytical Site Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA	
<b>OUTCOME DECISION</b>	<b>ACCEPTABLE</b>	

### Review of a Study Amendment

#### 1 EXECUTIVE SUMMARY

The current study amendment contains the results of the re-submitted SAS data for the fasted study, US/07/023 and fed study, US/07/024. On August 30, 2007, Marksans Pharma Ltd, submitted fasted and fed bioequivalence (BE) studies comparing its test product, Ibuprofen Capsules (Liquid Filled) 200 mg (OTC) to the corresponding reference product Wyeth Consumer Healthcare's Advil® Liquid-Gel® Capsules (Liquid Filled) 200 mg. That review was deemed incomplete for the fasted and fed studies due to deficiencies in the datasets. The firm responded in a Bioequivalence Amendment dated September 11, 2008 with clarifications on all the discrepancies identified by the reviewer concerning the datasets. The firm also submitted supportive documents.

The dissolution testing was reviewed previously (DFS N079205 N000 AB 14-Feb-2008). The firm's dissolution testing using the FDA-recommended method (900 mL of pH 7.2 phosphate buffer with basket at 150 rpm) is acceptable. The firm acknowledged its acceptance of the FDA-recommended specification of NLT (b)(4)% (Q) in 20 minutes in a Bioequivalence Amendment dated April 11, 2008.

The clinical and analytical sites were inspected on 3/14/2005, outcome VAI.

The application is now acceptable with no deficiencies.

### **Background**<sup>1</sup>

On April 11, 2008, the firm submitted two (2) single dose, two-way crossover, *in vivo* BE studies under fed (1) and fasted (1) conditions comparing its test product, Ibuprofen Liquid Filled Capsules (OTC), 200 mg, to the RLD product, Advil® Liquid-Gel® Capsules (OTC), 200 mg, in healthy adult subjects. The fed and fasted BE studies were incomplete due to the following reasons:

1. The fed BE study was deemed incomplete because the data in the paper copy was inconsistent with the data submitted in the electronic copy. In the electronic copy, the **treatment variable** was mislabeled for the following subjects: #3, #5, #7, #10, #12, #13, #16, #17, #19, #21 and #23. The treatment variable indicated that the respective subjects received the reference product in both periods. As a result, the data was analyzed according to the treatment variables listed in the paper copy, which showed those subjects receiving test product in period I and reference product in period II.
2. The fasted BE study was deemed incomplete because the data in the paper copy was inconsistent with the data submitted in the electronic copy. The plasma concentration data submitted in the paper copy **did not** correspond with the plasma concentration data submitted in the electronic copy. In the paper copy, the plasma concentration data of the test product is reported in the electronic copy as the reference product plasma concentration data. Similarly, the plasma concentration data reported in the paper copy of the reference product is listed in the electronic copy as the test product plasma concentration data.

In the firm's initial written response (9/11/08) to these deficiencies, the firm also submitted additional data regarding the drop-outs for the fed BE study. In their response, there was a statement requesting to "kindly note that subjects No. 5 and 19 were dropped out from the study" in period II for the fed BE study. The reviewer identified this additional information to be inconsistent with the data submitted in the original submission. On October 20, 2008, the DBE contacted the firm by telephone regarding clarification of the accurate number of dropout subjects stated in its Bioequivalence Amendment Query Reply. The firm submitted an electronic response

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<sup>1</sup> Division of System Files v 2.0. ANDA 79-205. Bioequivalence Review. N 079205 N 000 30-Aug-2007.

to this deficiency on November 10, 2008. The telephone deficiency response is also included in this amendment review.

Note: See additional information in the original review: DFS N 079205 N 000 30-Aug-2007

#### **DBE Deficiency Comment No. 01**

The data submitted for the fed bioequivalence (BE) study are not consistent between the electronic and paper copies. The plasma concentration data in the paper copy correspond with the **concentration data** submitted in the SAS files; however, in the SAS files, the **treatment variable** *does not* correspond to the sequence or period for the following subjects: 3,5,7,10,12,13,16,17,19,21,23 in the paper copy. The SAS files show these subjects receiving the reference product in both period 1 and period 2. Please explain this discrepancy and resubmit the data for the fed BE study, US/07/024, with correct treatment, period, and sequence information.

#### **Firm's Response:**

Marksan Pharma Ltd. acknowledged the deficiency as a “transcription error”. As a result, the firm re-submitted the SAS data file correctly identifying subjects receiving either test product or reference product in the “Treatment Administered’ column for subjects: 3,5,7,10,12,13,16,17,19,21,23.

#### **DBE Deficiency Comment No. 02**

The data submitted for the fasted BE study are not consistent between the electronic and paper copies. The plasma concentration data in the paper copy do not correspond with the plasma concentration data submitted in the SAS files. Please explain this discrepancy and resubmit the data for the fasted BE study, US/07/023 distinguishing the correct plasma concentration data for the test and reference product.

#### **Firm's Response:**

Marksan Pharma Ltd. responded to the deficiency comment stating “it was verified and confirmed that the plasma concentration data in the paper copy with the data submitted in the SAS file **are consistent**”. Therefore, the firm did not make any changes to the data.

Note: Upon further investigation, the reviewer noticed that there were two paper copies sent to the Agency from the firm: one which was scanned and sent in a file via the eCTD, and the other which was sent in the orange jackets. The reviewer identified and noticed the *plasma concentration data sent in the orange jackets did not* correspond to the plasma concentration data submitted in the scanned paper copy or in the SAS electronic copy, both sent via eCTD. To clarify which plasma concentration data was correct, the reviewer cross-referenced the analytical raw data from the chromatographic report, as well as the output data from the statistical analysis report to the data from the eCTD. Upon verification, the reviewer analyzed the data using the information sent via eCTD.

The firm's response to the deficiency stating that the data submitted in the SAS file was consistent with the data in the paper copy was accurate for the scanned paper copy sent via eCTD.

### **DBE Telephone Deficiency Comment**

In your summary tables and bio-study data in the original ANDA (79-205) you identified 3 drop out subjects (# 4, #5, and #19) for fed study (US/07/024); however, in response to deficiency #1, you mentioned 2 drop out subjects (#5 and #19). Please provide written clarification.

#### **Firm's Response:**

As mentioned in the clinical study report and DBE table (Model Bioequivalence Data Summary Tables) total three subjects (4, 5 and 19) were dropped out due to personal reasons (as they did not report for period 2). Total 21 subjects completed clinical study and data from 21 subjects were considered for statistical conclusion. The earlier response to deficiency (query) received from OGD refers to transcriptional error for subjects having sequence AB, hence subjects with sequence AB only, were addressed in the response. Although subject number 4 was dropped out from the study (as mentioned in the clinical study report and DBE tables) it was not addressed in the earlier response as subject number 4 was having sequence BA.

#### **Comments from the Reviewer:**

##### **Fasted BE Study No.US/07/023 (two-way crossover)**

1. For the fasted Study No. US/07/023, the firm enrolled twenty four (24) healthy subjects (18 male and 6 female), but 23 healthy subjects completed the study (subject #23 dropped out). In each study period, 200 mg of the test product was administered to the subjects after an overnight fast. The data for the subjects that completed the study was used in BE statistical evaluations.
2. The 90% confidence intervals for log-transformed  $LAUC_T$ ,  $LAUC_{\infty}$ , and  $LC_{max}$  are within the acceptable range of 80-125%.
3. The firm's responses to the deficiency comment for the fasting BE study is acceptable.

##### **Fed BE Study No. US/07/024 (two-way crossover)**

1. The firm enrolled twenty four (24) subjects, but 21 healthy subjects completed the study. In each study period, after an overnight fast of at least 10 hours, a high fat breakfast was given to each subject half an hour before dosing. The data for the subjects (excluding subjects nos. 04, 05, and 19) that completed the study was used in BE statistical evaluations.
2. The firm re-submitted the SAS data file correctly identifying subjects receiving either test product or reference product. The only change in the re-submitted SAS data was the treatment variable correctly corresponding to the sequence and period for each subject. The re-submitted plasma concentration submitted in the SAS data file was consistent with the initial submitted plasma concentration data in the paper copy. For

that reason, it was not necessary to re-analyze the data. The 90% confidence intervals for log-transformed LAUC<sub>T</sub>, LAUC<sub>∞</sub>, and LC<sub>max</sub> data are within the acceptable range of 80-125%.

3. The firm's responses to both deficiency comments for the fed BE study are acceptable.

**Deficiency Comments:**

None

**Recommendations**

1. The Division of Bioequivalence accepts the fasted BE study (US/07/023) conducted by Marksans Pharma Ltd., on its Ibuprofen Capsules (Liquid Filled) 200 mg (OTC) lot # FH7006 comparing it to Wyeth Consumer Healthcare Advil® LIQUI-GELS® 200 mg lot # B98587.
2. The Division of Bioequivalence accepts the fed BE study (US/07/024) conducted by Marksans Pharma Ltd., on its Ibuprofen Capsules (Liquid Filled) 200 mg (OTC) lot # FH7006 comparing it to Wyeth Consumer Healthcare Advil® LIQUI-GELS® 200 mg lot # B98587.
3. The firm successfully completed the *in vitro* dissolution testing on its test product, Ibuprofen Capsules (Liquid Filled), 200 mg and on April 11, 2008, it accepted and acknowledged the following FDA-recommended dissolution method and specification:

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
USP Apparatus:	I (Basket)
Rotation Speed:	150 rpm

NLT <sup>(b)</sup><sub>(4)</sub>% (Q) of the labeled amount of ibuprofen in the dosage form is dissolved in 20 minutes.

4. The firm should be informed of the above recommendations.

BIOEQUIVALENCE COMMENTS TO BE PROVIDED TO THE APPLICANT

ANDA: 79-205  
APPLICANT: Marksans Pharma Ltd.  
DRUG PRODUCT: Ibuprofen (Liquid Filled) Capsules, 200 mg  
(OTC)

The Division of Bioequivalence has completed its review and has no further questions at this time.

We acknowledge that you will conduct dissolution testing on your Ibuprofen Capsules (Liquid Filled) 200 mg (OTC) using the following FDA-recommended dissolution method and specification:

Medium: Phosphate buffer, pH 7.2  
Volume: 900 mL  
USP Apparatus: I (Basket)  
Rotational Speed: 150 rpm

The test product should meet the following specification:

NLT  $\frac{(b)}{(4)}\%$  (Q) of the labeled amount of Ibuprofen in the dosage form is dissolved in 20 minutes.

Please note that the bioequivalence comments provided in this communication are preliminary. These comments are subject to revision after review of the entire application, upon consideration of the chemistry, manufacturing and controls, microbiology, labeling, or other scientific or regulatory issues. Please be advised that these reviews may result in the need for additional bioequivalence information and/or studies, or may result in a conclusion that the proposed formulation is not approvable.

Sincerely yours,

{See appended electronic signature page}

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

**4.7 Outcome Page**

ANDA: 79-205

**Reviewer:** Williams, Zakia

**Date Completed:**

**Verifier:** ,

**Date Verified:**

**Division:** Division of Bioequivalence

**Description:** Ibuprofen Amend liq 200 mg

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*Productivity:*

<i>ID</i>	<i>Letter Date</i>	<i>Productivity Category</i>	<i>Sub Category</i>	<i>Productivity</i>	<i>Subtotal</i>
6590	9/11/2008	Other	Study Amendment	1	1
				<b>Bean Total:</b>	<b>1</b>

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/s/

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Zakia R Williams  
12/18/2008 02:06:23 PM  
BIOPHARMACEUTICS

Glendolynn S Johnson  
12/18/2008 04:04:41 PM  
BIOPHARMACEUTICS  
Signing for Yih Chain Huang

Hoainhon T. Nguyen  
12/20/2008 09:42:06 AM  
BIOPHARMACEUTICS  
For Dale P. Conner, Pharm. D., Director, Division of  
Bioequivalence I

**DIVISION OF BIOEQUIVALENCE REVIEW**

<b>ANDA No.</b>	79205		
<b>Drug Product Name</b>	Ibuprofen Liquid Filled Capsules (OTC)		
<b>Strength(s)</b>	200 mg		
<b>Applicant Name</b>	Marksans Pharma Ltd.		
<b>Address</b>	601-622, Chintamani Plaza, Andheri Kurla Road, Andheri (East), Mumbai-400099, India		
<b>Applicant's Point of Contact</b>	Authorized U.S. Agent: Mr. Nikanth J. Patel, Vice President Pharmgen LLC, 1919 Middle Country Road, Suite #206 Centereach, NY 11720		
<b>Contact's Telephone Number</b>	631-656-9753		
<b>Contact's Fax Number</b>	631-656-9754		
<b>Original Submission Date(s)</b>	30 Aug 2007		
<b>Submission Date(s) of Amendment(s) Under Review</b>	11Apr 2008 (dissolution acknowledgement)		
<b>Reviewer</b>	Zakia R. Williams Ph.D.		
<b>Study Number (s)</b>	US/07/023	US/07/024	
<b>Study Type (s)</b>	Fasted (STF)	Fed (STP)	
<b>Strength (s)</b>	200 mg	200 mg	
<b>Clinical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31		
<b>Clinical Site Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA		
<b>Analytical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31		
<b>Analytical Site Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA		
<b>OUTCOME DECISION</b>	<b>INCOMPLETE</b>		

## 1 EXECUTIVE SUMMARY

This application contains the results of fasted and fed bioequivalence (BE) studies comparing the test product Ibuprofen Capsules (Liquid Filled) 200 mg (OTC) by Marksans Pharma Ltd. to Advil® Liquid-Gel® Capsules (Liquid Filled), 200 mg (OTC) by Wyeth Consumer Healthcare. Each of the BE studies was designed as a single-dose, two-way crossover study in healthy adult subjects. Statistical analysis of the pharmacokinetic (PK) parameters from plasma concentrations of ibuprofen demonstrated bioequivalence in both fasted and fed studies. The results are summarized in the tables below. However, both studies are incomplete due to discrepancies in the data presented between the electronic copy and the paper copy.

Ibuprofen Capsules (Liquid Filled) 1 x 200 mg Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals					
Fasted Bioequivalence Study No.US/07/023					
Parameter (units)	Test	Reference	Ratio	90% C.I.	
				Lower	Upper
AUC <sub>0-t</sub> (hr *µg/ml)	63.70	68.13	0.93	90.00	97.13
AUC <sub>∞</sub> (hr *µg/ml)	65.65	69.98	0.94	90.61	97.14
C <sub>max</sub> (µg/ml)	24.93	26.47	0.94	86.85	102.15

Ibuprofen Capsules (Liquid Filled) 1 x 200 mg Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals					
Fed Bioequivalence Study No. US/07/024					
Parameter (units)	Test	Reference	Ratio	90% C.I.	
				Lower	Upper
AUC <sub>0-t</sub> (hr *µg/ml)	52.64	54.90	0.96	92.99	98.85
AUC <sub>∞</sub> (hr *µg/ml)	56.07	58.13	0.96	93.26	99.77
C <sub>max</sub> (µg/ml)	11.69	12.34	0.95	88.18	101.73

The dissolution testing was reviewed previously (DFS N079205 N000 AB 14-Feb-2008). The firm's dissolution testing using the FDA-recommended method (900 mL of pH 7.2 phosphate buffer with basket at 150 rpm) is acceptable. The firm acknowledged its acceptance of the FDA-recommended specification of NLT <sup>(b)</sup><sub>(4)</sub>% (Q) in 20 minutes in a Bioequivalence Amendment dated April 11, 2008.

The firm submitted the study data in both electronic and paper copies. For the fed study, the plasma concentration data in the paper copy corresponds with the **concentration data** submitted in the electronic copy; however, the **treatment variable** *does not* correspond to the sequence or period for the following subjects: 3,5,7,10,12,13,16,17,19,21,23. See Deficiency Comment section 3.10. For the fasted study, the *plasma concentration data* in the paper copy **does not** corresponds with the *plasma concentration data* submitted in the electronic copy. Consequently, the correct corresponding concentration data of test and reference product is not known. See Deficiency Comment section 3.10.

The clinical and analytical sites were inspected on 3/14/2005, outcome VAI.

The application is incomplete due to discrepancies in the data submitted in both fasted and fed BE studies.

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### 3 SUBMISSION SUMMARY

#### 3.1 Drug Product Information

<b>Test Product</b>	Ibuprofen Capsules (Liquid Filled) (OTC), 200 mg
<b>Reference Product</b>	Advil® Liquid-Gel® Capsules (OTC), 200 mg
<b>RLD Manufacturer</b>	Wyeth Consumer Healthcare
<b>NDA No.</b>	020402
<b>RLD Approval Date</b>	20 April 1995
<b>Indication</b>	Used to <ol style="list-style-type: none"> <li>1. Relieve pain and inflammation</li> <li>2. Reduce fever</li> <li>3. Treat osteoarthritis, rheumatoid arthritis and menstrual cramps</li> </ol>

#### 3.2 PK/PD Information<sup>1,2</sup>

<b>Bioavailability</b>	The orally administered drug is approximately 80% absorbed from the gut. A linear dose-response is noted for single ibuprofen doses up to 800 mg. There is also a correlation between the reduction of fever and drug concentration over time.
<b>Food Effect</b>	Although the peak concentration is lower and time to peak concentration is slower if the drug is taken with food, the extent of ibuprofen absorption is not affected.
<b>Tmax</b>	1.15 hour (non-fasting); 0.7 hour (fasting) <sup>2</sup>
<b>Metabolism</b>	Ibuprofen is metabolized via hepatic oxidation by cytochrome P450 2C9 to two inactive metabolites.
<b>Excretion</b>	Ibuprofen is excreted in the urine, 50 - 60% as metabolites and approximately 10% as unchanged drug. Some biliary excretion may occur. Excretion is usually complete within 24 hours of oral administration.
<b>Half-life</b>	2.526 hour (single oral dose) <sup>2</sup>
<b>Drug Specific Issues (if any)</b>	The FDA pregnancy category is B during the first and second trimesters and D during the third trimester of pregnancy.

<http://www.clinicalpharmacology-ip.com/Forms/Monograph/monograph.aspx?cpnum=303&sec=monphar>

<sup>2</sup>Enterprisearch- NDA 20-402; 200 mg (Ibuprofen) Liquigel Capsules. Submission Date: December 11, 1996

#### 3.3 OGD Recommendations for Drug Product

<b>Number of studies recommended:</b>	2: Fasted and Fed	
<b>1.</b>	<b>Type of study:</b>	Fasted
	<b>Design:</b>	Single-dose, two-treatment, two-period crossover in-vivo
	<b>Strength:</b>	200 mg

<b>Subjects:</b>	Normal healthy adult, human subjects
<b>Additional Comments:</b>	

<b>2.</b>	<b>Type of study:</b>	Fed
	<b>Design:</b>	Single-dose, two-treatment, two-period crossover in-vivo
	<b>Strength:</b>	200 mg
	<b>Subjects:</b>	Normal healthy adult, human subjects
	<b>Additional Comments:</b>	

<b>Analytes to measure (in plasma/serum/blood):</b>	Ibuprofen
<b>Bioequivalence based on:</b>	90% CI
<b>Waiver request of in-vivo testing:</b>	N/A
<b>Source of most recent recommendations:</b>	Control 07-0327 (Perrigo)
<b>Summary of OGD or DBE History</b>	<p>There is no approved generic drug listed in the Orange Book (OTC section) for this product.</p> <p><u>Control Document History</u>                  (b) (4)                  07-0327 Perrigo 4/27/2007                  (b) (4)                  (u) (*)</p> <p><u>ANDA History:</u>                  (b) (4)                  77-338 (Dr. Reddy) submitted 10/21/2004: The 90% CI on LCmax was 70.11% - 97.60%. The study was initiated on January 4, 2003, which met the FDA acceptance criteria in place at that time for FED bioequivalence studies. The CDER Guidance "Food-Effect Bioavailability and Fed Bioequivalence Studies" was issued on December 2002.                  78-682 (Banner) submitted 12/15/2006</p>

### 3.4 Contents of Submission

Study Types	Yes/No?	How many?
Single-dose Fasted	Yes	1
Single-dose fed	Yes	1
Steady-state	No	---
In vitro dissolution	Yes	1
Waiver requests	No	---
BCS Waivers	No	---
Clinical Endpoints	No	---
Failed Studies	No	---
Amendments	Yes	1 (Dissolution acknowledgment)

### 3.5 Pre-Study Bioanalytical Method Validation

<b>Information Requested</b>	<b>Ibuprofen Capsules (Liquid Filled) 200 mg</b>
Bioanalytical method validation report location	Volume II of V, (Appendix 16.7.3 of Bioanalytical Report), Pages 1 to 72
Analyte	Ibuprofen
Internal standard (IS)	(b) (4)
Method description	LC/MS/MS

<b>Limit of quantification</b>	0.251 µg/mL
<b>Average recovery of drug (%)</b>	105.75%
<b>Average recovery of IS (%)</b>	94.90%
<b>Standard curve concentrations (units/mL)</b>	0.251 µg/mL to 99.940 µg/mL
<b>QC concentrations (units/mL)</b>	LLOQQC: 0.251 µg/mL QC-1 (LQC): 0.753 µg/mL QC-2 (MQC): 40.177 µg/mL QC-3 (HQC): 77.842 µg/mL ULOQQC: 99.940 µg/mL
<b>QC Intra day precision range (%)</b>	LLOQQC: 6.36 % LQC: 4.66% MQC: 3.88% HQC: 6.02% ULOQQC: 6.71%
<b>QC Intra day accuracy range (%)</b>	LLOQQC: 93.56 % LQC: 99.34% MQC: 104.25% HQC: 101.45% ULOQQC: 104.79%
<b>QC Inter day precision range (%)</b>	LLOQQC: 9.70 % LQC: 4.89% MQC: 4.28% HQC: 6.07% ULOQQC: 6.71%
<b>QC Inter day accuracy range (%)</b>	LLOQQC: 98.86 % LQC: 99.71% MQC: 101.27% HQC: 97.76% ULOQQC: 99.79%
<b>Carry Over Effect*</b>	Mean % Interference: (see comment below) For Drug: 11.60% of LLOQ For IS: 0.05%
<b>Bench-top stability (hrs)</b>	8 hours @ room temperature
<b>Stock solution stability (days)</b>	24 hours @ room temperature, 17 days @ 2°C -8°C
<b>Processed stability (hrs)</b>	11 hours @ 4 <sup>0</sup> C
<b>Freeze-thaw stability (cycles)</b>	3 cycles
<b>Long term stability (days)</b>	16 days @ -20°C ± 5°C: In an amendment dated 14-Feb-2008, the firm submitted sufficient long-term stability data covering 51 days at -20° C for ibuprofen in the biological matrix.
<b>Reinjection reproducibility</b>	At least for 10 minutes
<b>Dilution integrity</b>	Two times and Four times (see comments below)
<b>Selectivity</b>	no significant interference peaks.
<b>Matrix effect</b>	LQC: 1.52% CV HQC: 5.05% CV For IS: 6.97% CV

<b>SOPs submitted</b>	Yes
<b>Bioanalytical method is acceptable</b>	Yes

**Comments on the Pre-Study Method Validation:**

Complete.

1. Carryover effect of the analyte was measured in terms of interference at the retention time of analyte in blank sample (47.5) injected after ULOQ sample compared against the mean response obtained in the processed LLOQ sample (410). Thus, the mean interference of the analyte (ibuprofen) is  $47.5/410 = 11.6\%$  of LLOQ.
2. The dilution integrity stock solutions (DQC) prepared was 1.7 times the ULOQ working solution concentration. A spiked sample of ibuprofen in plasma was prepared to 2 and 4 dilutions of the original concentration and analyzed against a calibration curve. The precision (%CV) for both dilutions 2 and 4 was 2.62% and 3.0% respectively and accuracy for both dilutions was 103.07% and 100.93%, respectively. It should be noted that no dilution is needed for study samples.
3. The pre-study method validation is **complete**.

## 3.6 In Vivo Studies

Table 1 Summary of all in vivo Bioequivalence Studies\*\*

Study Ref. No.	Study Design	Study Objective	Treatments (Dose, Dosage Form, Route) [Product ID]	Subjects (No. (M/F) Type Age: mean (Range))	Mean Parameters +/-SD (% CV)						Study Report Location
					C <sub>max</sub> (ng/mL)	T <sub>max</sub> § (hr)	AUC <sub>0-t</sub> (ngxhr/mL)	AUC <sub>∞</sub> (ngxhr/mL)	T <sub>½</sub> (hr)	K <sub>el</sub> (hr <sup>-1</sup> )	
US/07/023	Single-dose, open label, two period, two treatment, two sequence, randomized, crossover study	* The objective of this study is to demonstrate bioequivalence between Test Product and Reference Product	<b>Test product:</b> Ibuprofen soft gelatin capsules 200 mg [Batch # FH7006]	23 Healthy human (18M/5F) Subjects	25.36 ± 4.93 (19.48)	0.75 (0.50-1.25)	66.66 ± 21.57 (32.38)	68.95 ± 23.53 (34.15)	1.94 ± 0.53 (27.28)	0.38 ± 0.09 (22.93)	Volume I, File 1 of 2, Section 5.3, Page No. 1-44
			<b>Reference product:</b> Advil® Liqui-Gels® Solubilized Ibuprofen Capsules, 200 mg [Batch # B98587]	25.87 ± 5.50 (18-37)	0.50 (0.25-1.75)	71.92 ± 26.68 (37.08)	73.99 ± 28.00 (37.83)	1.97 ± 0.63 (31.74)	0.38 ± 0.10 (25.39)	Volume I, File 1 of 2, Section 5.3, Page No. 1-44	

\*\*This table was submitted by the firm in the EDR with the units expressed as ng/mL. This may be a typographical error while the correct unit is µg/mL

Study Ref. No.	Study Design	Study Objective	Treatments (Dose, Dosage Form, Route) [Product ID]	Subjects (No. (M/F) Type Age: mean (Range))	Mean Parameters +/-SD (% CV)						Study Report Location
					C <sub>max</sub> (ng/mL)	T <sub>max</sub> § (hr)	AUC <sub>0-t</sub> (ngxhr/mL)	AUC <sub>∞</sub> (ngxhr/mL)	T <sub>½</sub> (hr)	K <sub>el</sub> (hr <sup>-1</sup> )	
US/07/024	Single-dose, open label, two period, two treatment, two sequence, randomized, crossover study	* The objective of this study is to demonstrate bioequivalence between Test Product and Reference Product	Test product: Ibuprofen Soft Gelatin Capsules 200 mg p.o [Batch # FH7006]	21 Healthy human (!5M/6F)	12.08 ± 3.26 (27.12)	2.50 (0.75-6.00)	54.81 ± 15.22 (27.82)	58.42 ± 16.66 (28.56)	2.27 ± 0.57 (24.94)	0.32 ± 0.08 (25.14)	Volume I, File 1 of 2, Section 5.3, Page No. 1-45
			Reference product: Advil® LIQUI-GELS® Solubilized Ibuprofen Capsules 200 mg p.o [Batch # B98587]	Subjects 26.90 ± 5.93 (19-36)	12.91 ± 3.72 (29.04)	3.00 (1.25-4.00)	57.05 ± 15.71 (27.59)	60.40 ± 16.82 (27.89)	2.20 ± 0.55 (24.73)	0.33 ± 0.08 (23.72)	Volume I, File 1 of 2, Section 5.3, Page No. 1-45

\*\*This table was submitted by the firm in the EDR with the units expressed as ng/mL. This may be a typographical error while the correct unit is µg/mL

**Table 2 Statistical Summary of the Comparative Bioavailability Data Calculated by the Reviewer**

<b>Ibuprofen Capsules (Liquid Filled)</b> <b>1 x 200 mg</b> <b>Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals</b>					
<b>Fasted Bioequivalence Study No.US/07/023</b>					
<b>Parameter (units)</b>	<b>Test</b>	<b>Reference</b>	<b>Ratio</b>	<b>90% C.I.</b>	
				<b>Lower</b>	<b>Upper</b>
<b>AUC<sub>0-t</sub> (hr *µg/ml)</b>	63.70	68.13	0.93	90.00	97.13
<b>AUC<sub>∞</sub> (hr *µg/ml)</b>	65.65	69.98	0.94	90.61	97.14
<b>C<sub>max</sub> (µg/ml)</b>	24.93	26.47	0.94	86.85	102.15

<b>Ibuprofen Capsules (Liquid Filled)</b> <b>1 x 200 mg</b> <b>Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals</b>					
<b>Fed Bioequivalence Study No. US/07/024</b>					
<b>Parameter (units)</b>	<b>Test</b>	<b>Reference</b>	<b>Ratio</b>	<b>90% C.I.</b>	
				<b>Lower</b>	<b>Upper</b>
<b>AUC<sub>0-t</sub> (hr *µg/ml)</b>	52.64	54.90	0.96	92.99	98.85
<b>AUC<sub>∞</sub> (hr *µg/ml)</b>	56.07	58.13	0.96	93.26	99.77
<b>C<sub>max</sub> (µg/ml)</b>	11.69	12.34	0.95	88.18	101.73

**Table 3. Reanalysis of Study Samples**

Ibuprofen Capsules (liquid filled) 1 x 200 mg Fasted Study No US/07/023								
Reason why assay was repeated	Number of samples reanalyzed				Number of recalculated values used after reanalysis			
	Actual number		%of total assays		Actual number		% of total assays	
	T	R	T	R	T	R	T	R
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>00</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.00</b>

Ibuprofen Capsules (liquid filled) 1 x 200 mg Fed Study No US/07/024								
Reason why assay was repeated	Number of samples reanalyzed				Number of recalculated values used after reanalysis			
	Actual number		%of total assays		Actual number		% of total assays	
	T	R	T	R	T	R	T	R
Pharmacokinetic	0.0	0.0	0.00	0.00	0	0	0.00	0.00
Reason B (Sample Repeated For Inconsistent Internal Standard Response)	1	0.0	0.14	0.00	1	0	0.14	0.00
<b>Total</b>	<b>1</b>	<b>0</b>	<b>0.14</b>	<b>0.00</b>	<b>1</b>	<b>0</b>	<b>0.14</b>	<b>0.00</b>

**Did use of recalculated plasma concentration data change study outcome?**

There were no samples reanalyzed for PK reasons.

**Comments from the Reviewer:**

**Fasted BE Study No.US/07/023 (two-way crossover)**

1. For the fasted Study No. US/07/023, the firm enrolled twenty four (24) healthy subjects (18 male and 6 female), but 23 healthy subjects completed the study (subject #23 dropped out). In each study period, 200 mg of the test product was administered to the subjects after an overnight fast. The data for the subjects that completed the study was used in BE statistical evaluations.

2. The 90% confidence intervals for log-transformed  $LAUC_T$ ,  $LAUC_\infty$ , and  $LC_{max}$  are within the acceptable range of 80-125%. However, the fasted study is incomplete since the data in the paper copy and the electronic copy are not consistent.
3. Two subjects (# 20 for Test and #8 for Reference) had first measurable concentrations  $C_{max}$  at the 0.25 hour. According to the *Guidance for Industry Bioavailability and Bioequivalence Studies for Orally Administered Drug Product*, a study data should be considered and accepted when the firm has taken collection of early time points between 5 and 15 minutes after dosing followed by additional sample collection in the first hour after dosing. Therefore, the data from subjects #8 and #20 were included in the statistical analysis.

#### **Fed BE Study No.US/07/024 (two-way crossover)**

1. The firm enrolled twenty four (24) subjects, but 21 healthy subjects completed the study. In each study period, after an overnight fast of at least 10 hours, a high fat breakfast was given to each subject half an hour before dosing. The data for the subjects (excluding subjects nos. 04, 05, and 19) that completed the study was used in BE statistical evaluations.
2. The 90% confidence intervals for log-transformed  $LAUC_T$ ,  $LAUC_\infty$ , and  $LC_{max}$  data are within the acceptable range of 80-125%. However, the fed study is incomplete since the data in the paper copy and the electronic copy are not consistent.

### 3.7 Formulation

Location in appendix	Section 4.2, Page 42
If a tablet, is the RLD scored?	N/A
If a tablet, is the test product biobatch scored	N/A
Is the formulation acceptable?	<b>FORMULATION ACCEPTABLE</b>
If not acceptable, why?	

### 3.8 In Vitro Dissolution

Location of DBE Dissolution Review	DFS N079205 N 000 30-Aug-2007 DFS N079205 N 000 AB 14-Feb-2008
Source of Method (USP, FDA or Firm)	FDA-recommended method
Medium	Phosphate buffer pH 7.2
Volume (mL)	900 mL
USP Apparatus type	USP 1 (Basket)
Rotation (rpm)	150
DBE-recommended specifications	Not less than (NLT) $\frac{(b)}{(4)}\%$ (Q) in 20 minutes
If a modified-release tablet, was testing done on ½ tablets?	N/A
F2 metric calculated?	No
If no, reason why F2 not calculated	Single strength and High %CV at 5 and 10 minutes
Is method acceptable?	<b>COMPLETE (see comment below)</b>
If not then why?	

The dissolution testing was reviewed previously (DFS N079205 N000 AB 14-Feb-2008). The firm's dissolution testing using the FDA-recommended method (900 mL of pH 7.2 phosphate buffer with basket at 150 rpm) is acceptable. The firm acknowledged its acceptance of the FDA-recommended specification of NLT  $\frac{(b)}{(4)}\%$  (Q) in 20 minutes in a Bioequivalence Amendment on April 11, 2008.

### 3.9 Waiver Request(s)

None

### 3.10 Deficiency Comments

1. The data submitted for the fed BE study are not consistent between the electronic and paper copies. The plasma concentration data submitted in the paper copy and electronic copy are consistent; however, in the electronic copy, the **treatment variable** *does not* correspond to the sequence or period for the following subjects: 3,5,7,10,12,13,16,17,19,21,23 in the paper copy. The electronic copy shows these subjects receiving reference product in both period 1 and period 2. The firm should explain this discrepancy and resubmit the data for the fed BE study, US/07/024 with correct treatment, period, and sequence information.
2. The data submitted for the fasted BE study are not consistent between the electronic and paper copies. The plasma concentration data submitted in the paper copy **does not** correspond with the plasma concentration data submitted in the electronic copy. In the paper copy, the plasma concentration data of the test product is reported in the electronic copy as the reference product plasma concentration data. Similarly, the plasma concentration data reported in the paper copy of the reference product is listed in the electronic copy as the test product plasma concentration data. The firm should explain the discrepancy and resubmit the data for the fasted BE study, US/07/023 with correct plasma concentration data for each treatment.

### 3.11 Recommendations

1. The fasted BE study, US/07/023, conducted by Marksans Pharma Ltd. on its Ibuprofen Soft Gelatin Capsules 200 mg comparing it to Wyeth Consumer Healthcare Advil<sup>®</sup> LIQUI-GELS<sup>®</sup> 200 mg is complete. However, the fasted study is incomplete since the data in the paper copy and the electronic copy are not consistent.
2. The fed BE study, US/07/024, conducted by Marksans Pharma Ltd. on its Ibuprofen Soft Gelatin Capsules 200 mg comparing it to Wyeth Consumer Healthcare Advil<sup>®</sup> LIQUI-GELS<sup>®</sup> 200 mg is complete. However, the fed study is incomplete since the data in the paper copy and the electronic copy are not consistent.
3. The firm's in vitro dissolution testing on its test product, Ibuprofen Capsules (Liquid Filled), 200 mg is complete upon its acceptance and acknowledgment of the following FDA-recommended dissolution method and specification

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
USP Apparatus:	I (Basket)
Rotation Speed:	150 rpm

NLT  $\frac{(b)}{(4)}$ % (Q) of the labeled amount of ibuprofen in the dosage form is dissolved in 20 minutes.

4. On 4/11/2008, the firm submitted a bioequivalence amendment in the electronic copy stating that “Marksans Pharma Ltd. acknowledges and commits to accept FDA-recommended dissolution method instead of previously submitted in-house dissolution method and specification NLT (b)(4)% in (b)(4) minutes for this drug product”.

### 3.12 Comments for Other OGD Disciplines

Discipline	Comment

## 4 APPENDIX

### 4.1 Individual Study Reviews

#### 4.1.1 Single-dose Fasted Bioequivalence Study

##### 4.1.1.1 Study Design

**Table 4 Study Information**

Study Number	US/07/023
Study Title	A randomized, single dose, open label, bioequivalence study of Ibuprofen Soft Gelatin Capsules 200 mg in normal, healthy, adult, human subjects under fasted condition.
Clinical Site	Accutest Research Laboratories (I) Pvt. Ltd., A-31, M.I.D.C., T.T.C., Industrial Area, Khairane, Navi Mumbai-400 709, INDIA. Tel.: +91 22 27780718 Telefax: +91 22 27780721
Clinical Investigator	<b>Dr. Suhas Khandave M.D. (Pharmacology)</b>
Dosing Dates	12/June/2007 19/June/2007
Analytical Sites	Accutest Research Laboratories (I) Pvt. Ltd., A-31, M.I.D.C., T.T.C., Industrial Area, Khairane, Navi Mumbai-400 709, INDIA. Tel.: +91 22 27780718 Telefax: +91 22 27780721
Analysis Date	Date of Initiation of Subject Analysis: 23 <sup>rd</sup> July 2007 Date of Completion of Subject analysis: 27 <sup>th</sup> July 2007
Analytical Director	(b)(4)
Storage Period of Biostudy Samples No. of days from the first day of sample collection to the last day of sample analysis.	45 day. In an amendment, dated 14-Feb-2008 the firm submitted sufficient long-term stability data covering 51 days at -20° C for ibuprofen in the biological matrix.

**Table 5. Product information**

Product	Test	Reference
Treatment ID	A	B
Product Name	Ibuprofen Soft Gelatin Capsules 200 mg	Advil® LIQUI-GELS® Solubilized Ibuprofen Capsules 200 mg
Manufacturer	Marksans Pharma Limited, Goa, India	Distributed by: Wyeth Consumer Healthcare, Madison, NJ 07940, Made in USA. By arrangements with R.P. Scherer Corp.
Batch/Lot No.	FH7006	B98587
Manufacture Date	April 2007	-----
Expiration Date	-----	August 2008
Strength	200 mg	200 mg
Dosage Form	Soft gelatin capsules	Soft gelatin capsules
Bio-batch Size	(b) (4) Capsules*	-----
Production Batch Size	(b) (4) Capsules	-----
Potency	(b) (4)% 198.6 mg/Capsule	(b) (4)% 198.8 mg/Capsule
Content Uniformity (mean, %CV)	(b) (4) (98.0%-100.6%)	(b) (4)% (94.2%-103.7%)
Dose Administered	A single oral dose of test formulation Ibuprofen capsules 200 mg in each period with 240 mL of water	A single oral dose of reference formulation Advil® LIQUI-GELS® 200 mg in each period with 240 mL of water
Route of Administration	Oral	Oral

\*As presented in the submission. This number may be a typographical error.

**Table 6. Study Design, Single-Dose Fasted Bioequivalence Study**

Number of Subjects	24 healthy, adult , human subjects (18 male and 6 female) enrolled; 23 completed
No. of Sequences	2
No. of Periods	2
No. of Treatments	2
No. of Groups	1
Washout Period	7 days
Randomization Scheme	AB:1, 4, 5, 8, 9, 11, 13, 15, 17,19, 22, 24, BA:2, 3, 6, 7, 10, 12, 14, 16, 18, 20, 21, 23
Blood Sampling Times	Pre-dose samples were collected within 60 minutes before scheduled dosing time and 0.25, 0.50, 0.75, 1.00, 1.25, 1.50, 1.75, 2.00, 2.25, 2.50, 3.00, 4.00, 6.00, 8.00, 12.00, 24.00 hours post dose

<b>Blood Volume Collected/Sample</b>	Samples were collected through an indwelling cannula placed in a forearm vein or by direct vein puncture. A total of 17 blood samples (6 mL each) were collected from 0 hour pre-dose to 24 hours post dose during each period. Samples were collected in BD Vacutainer® containing K2 EDTA 10.8 mg
<b>Blood Sample Processing/Storage</b>	Post collection, study blood samples were centrifuged at 10° C and spun at 3500 rpm for 10 minutes. Plasma was dispensed in vials in two aliquots one as analytical sample and the other as control sample. All plasma samples were stored upright at -20°C ± 5°C.
<b>IRB Approval</b>	Yes June 2, 2007
<b>Informed Consent</b>	Yes, December 16, 2006
<b>Length of Fasted</b>	Overnight fast of at least 10 hours prior to dosing and 4 hours post-dose in each period
<b>Length of Confinement</b>	Subjects were confined at 12 hours prior to dosing until after the 24 hour post dose.
<b>Safety Monitoring</b>	Safety was evaluated by monitoring clinical adverse events during each period. The investigator measured vital signs, including auxiliary temperature, blood pressure, pulse and respiration rate.

**Comments on Study Design:**

The study design is complete.

**4.1.1.2 Clinical Results**

**Table 7. Demographics Profile of Subjects Completing the Bioequivalence Study**

<b>Fasted Bioequivalence Study, Study No.US/07/023</b>			
		<b>Treatment Groups</b>	
		<b>Test Product N = 23</b>	<b>Reference Product N =23</b>
Age (years)	Mean ± SD	25.87 ± 5.50	25.87 ± 5.50
	Range	18-37	18-37
Age Groups	< 18	Nil	Nil
	18 – 39	23 (100%)	23 (100%)
	40 – 64	Nil	Nil
	65 – 75	Nil	Nil
	> 75	Nil	Nil
Sex	Male	18 (78.26%)	18 (78.26%)
	Female	5 (21.74%)	5 (21.74%)
Race	Asian	23 (100%)	23 (100%)
	Black	Nil	Nil
	Caucasian	Nil	Nil

	Hispanic	Nil	Nil
	Other	Nil	Nil
BMI (Kg/m <sup>2</sup> )	Mean ± SD  Range	On Protocol basis Subject were enrolled according to Life Insurance Corporation Chart	On Protocol basis Subject were enrolled according to Life Insurance Corporation Chart
Other factors	-	Nil	Nil

**Table 8. Dropout Information, Fasted Bioequivalence Study**

Study No. US/07/023				
Subject No	Reason for dropout/withdrawn replacement	Period	Replaced?	Replaced with
23	Dropped out in period I due to personal reasons; having sequence (BA)	I	Not Applicable	Not Applicable

**Table 9. Study Adverse Events, Fasted Bioequivalence Study**

Body system/Adverse Event	Reported Incidence by Treatment Groups	
	Fast Bioequivalence Study No.:US/07/023	
	Test n (%)	Reference n (%)
Body System/ Adverse Events	Adverse Events	
	Test n (%)	Reference n (%)
Central Nervous System		
Headache	1 (50.0%)	0 (0.0%)
Gastrointestinal System		
Burning sensation (Epigastric region)	0 (0.0%)	1 (50.0%)
Total	<b>1 (50.0%)</b>	<b>1 (50.0%)</b>

**Table 10. Protocol Deviations, Fasted Bioequivalence Study**

Study No. US/07/023		
Type	Subject #s (Test)	Subject #s (Ref.)
Deviation in scheduled time in blood sample collection	6	2

**Comments on Dropouts/Adverse Events/Protocol Deviations:**

1. No serious adverse events (SAEs) were reported during the fasted BE study.
2. The blood sampling time point deviations (ranging from 3 to 17 minutes) were noted but the original scheduled time points were used for the calculation of all of the pharmacokinetic parameters. The time point deviations were not close to Tmax.
3. No concomitant medication was given prior to the study.

**4.1.1.3 Bioanalytical Results**

**Table 11. Assay Validation – Within the Fasted Bioequivalence Study**

Bioequivalence Study No. : US/07/023 Ibuprofen Capsules (Liquid Filled) 200 mg								
Parameter	Standard Curve Samples							
Concentration (µg/mL)	0.251	0.502	2.009	10.044	30.133	60.265	80.353	99.940
Inter day Precision (%CV)	2.53	5.08	2.31	1.59	2.02	1.66	1.45	2.43
Inter day Accuracy (% Actual)	100.36	98.28	103.12	103.20	97.99	95.88	99.62	101.47

Linearity (Range of r Values)	(r > 0.98) 0.9984-0.9997
Linearity Range (µg/mL)	0.251 to 99.940
Sensitivity/LOQ (µg/mL)	0.251

<b>Bioequivalence Study No.: US/07/023</b>						
<b>Ibuprofen Capsules (Liquid Filled) 200 mg</b>						
Parameter	Quality Control Samples					
	LLOQ QC	LQC	MQC_01	MQC_02	HQC	ULOQ QC
<b>Concentration (µg/mL)</b>	NA	0.753	25.110	40.177	77.842	NA
<b>Inter day Precision (%CV)</b>	NA	6.37	5.93	5.90	5.40	NA
<b>Inter day Accuracy (%Actual)</b>	NA	100.28	108.46	105.18	100.88	NA

**Comments on Study Assay Validation:**

- Initially, the firm had only one MQC of 40.177 µg/mL, between the LQC and HQC. The firm introduced a second MQC\_02 with a nominal concentration of 25.110 µg/mL after reviewing data of the first three batches. The highest concentration of the study samples was 40.737 µg/mL; therefore, HQC was not relevant.
- The accuracy and precision parameters of the QC's and standard curves were all acceptable.

<b>Any interfering peaks in chromatograms?</b>	No
<b>Were 20% of chromatograms included?</b>	Yes
<b>Were chromatograms serially or randomly selected?</b>	Serially 12,13, 14, 15,16

**Comments on Chromatograms:**

Acceptable.

**Table 12. SOP's Dealing with Bioanalytical Repeats of Study Samples**

SOP No.	Effective Date of SOP	SOP Title
ARL/AL/SOP/069/02	27/01/07	STANDARD OPERATING PROCEDURE FOR REPEAT ANALYSIS

**Table 13. Additional Comments on Repeat Assays**

Were all SOPs followed?	Yes
Did recalculation of PK parameters change the study outcome?	NA
Does the reviewer agree with the outcome of the repeat assays?	NA
If no, reason for disagreement	NA

**Summary/Conclusions, Study Assays:**

The bioanalytical method is acceptable.

**4.1.1.4 Pharmacokinetic Results**

**Table 14. Arithmetic Mean Pharmacokinetic Parameters**

Mean plasma concentrations are presented in Table 18

Fasted Bioequivalence Study, Study No.US/07/023									
Parameter (units)	Test				Reference				T/R
	Mean	%CV	Min	Max	Mean	% CV	Min	Max	
AUC <sub>0-t</sub> (hr * µg/ml)	66.613	32.38	42.55	116.10	71.941	37.08	43.72	145.68	0.93
AUC <sub>∞</sub> (hr *µg/ml)	68.919	34.15	43.71	128.69	74.021	37.83	44.83	147.22	0.93
C <sub>max</sub> (µg/ml)	25.298	19.48	16.73	40.67	27.040	21.92	17.23	40.74	0.94
T <sub>max</sub> * (hr)	0.750	.	0.50	1.25	0.500	.	0.25	1.75	1.50
K <sub>el</sub> (hr <sup>-1</sup> )	0.379	22.80	0.20	0.56	0.379	25.44	0.18	0.55	1.00
T <sub>1/2</sub> (hr)	1.937	27.29	1.23	3.51	1.971	31.75	1.26	3.78	0.98

- T<sub>max</sub> values are presented as median, range

**Table 15. Geometric Means and 90% Confidence Intervals - Firm Calculated**

Ibuprofen Capsules (Liquid Filled) 1 x 200 mg Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals					
Fasted Bioequivalence Study No.US/07/023					
Parameter (units)	Test	Reference	Ratio	90% C.I.	
				Lower	Upper
AUC <sub>0-t</sub> (hr *µg/ml)	63.70	68.13	.95	90.00	97.12
AUC <sub>∞</sub> (hr *µg/ml)	65.66	69.98	.94	90.62	97.14
C <sub>max</sub> (µg/ml)	24.93	26.47	.94	86.85	102.15

**Table 16. Geometric Means and 90% Confidence Intervals - Reviewer Calculated**

Ibuprofen Capsules (Liquid Filled)					
1 x 200 mg					
Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals					
Fasted Bioequivalence Study No.US/07/023					
Parameter (units)	Test	Reference	Ratio	90% C.I.	
				Lower	Upper
AUC <sub>0-t</sub> (hr *µg/ml)	63.70	68.13	0.93	90.00	97.13
AUC <sub>∞</sub> (hr *µg/ml)	65.65	69.98	0.94	90.61	97.14
C <sub>max</sub> (µg/ml)	24.93	26.47	0.94	86.85	102.15

**Table 17. Additional Study Information, Fasted Study No.US/07/023**

Root mean square error, AUC <sub>0-t</sub>	0.0750	
Root mean square error, AUC <sub>∞</sub>	0.0685	
Root mean square error, C <sub>max</sub>	0.1598	
	<b>Test</b>	<b>Reference</b>
Kel and AUC <sub>∞</sub> determined for how many subjects?	23	23
Do you agree or disagree with firm's decision?	Agree	Agree
Indicate the number of subjects with the following:		
measurable drug concentrations at 0 hr	None	None
first measurable drug concentration as C <sub>max</sub> *	1	1
Were the subjects dosed as more than one group?	No	No

\*The arithmetic table does not accurately reflect the C<sub>max</sub> value of the Test product of subject 20 because the data were not properly submitted electronically. See deficiency comment in section 3.10

Ratio of AUC <sub>0-t</sub> /AUC <sub>∞</sub>				
Treatment	n	Mean	Minimum	Maximum
Test	23	0.97	0.90	0.99
Reference	23	0.97	0.92	0.99

**Comments on Pharmacokinetic and Statistical Analysis:**

1. The firm and reviewer used the data from the 23 healthy, adult male and female subjects completing the fasted BE study statistical evaluations.
2. The 90% CI for the least squares geometric means of lnAUC<sub>t</sub>, lnAUC<sub>∞</sub>, and lnC<sub>max</sub> of ibuprofen calculated by the reviewer agree with the firm's calculations.

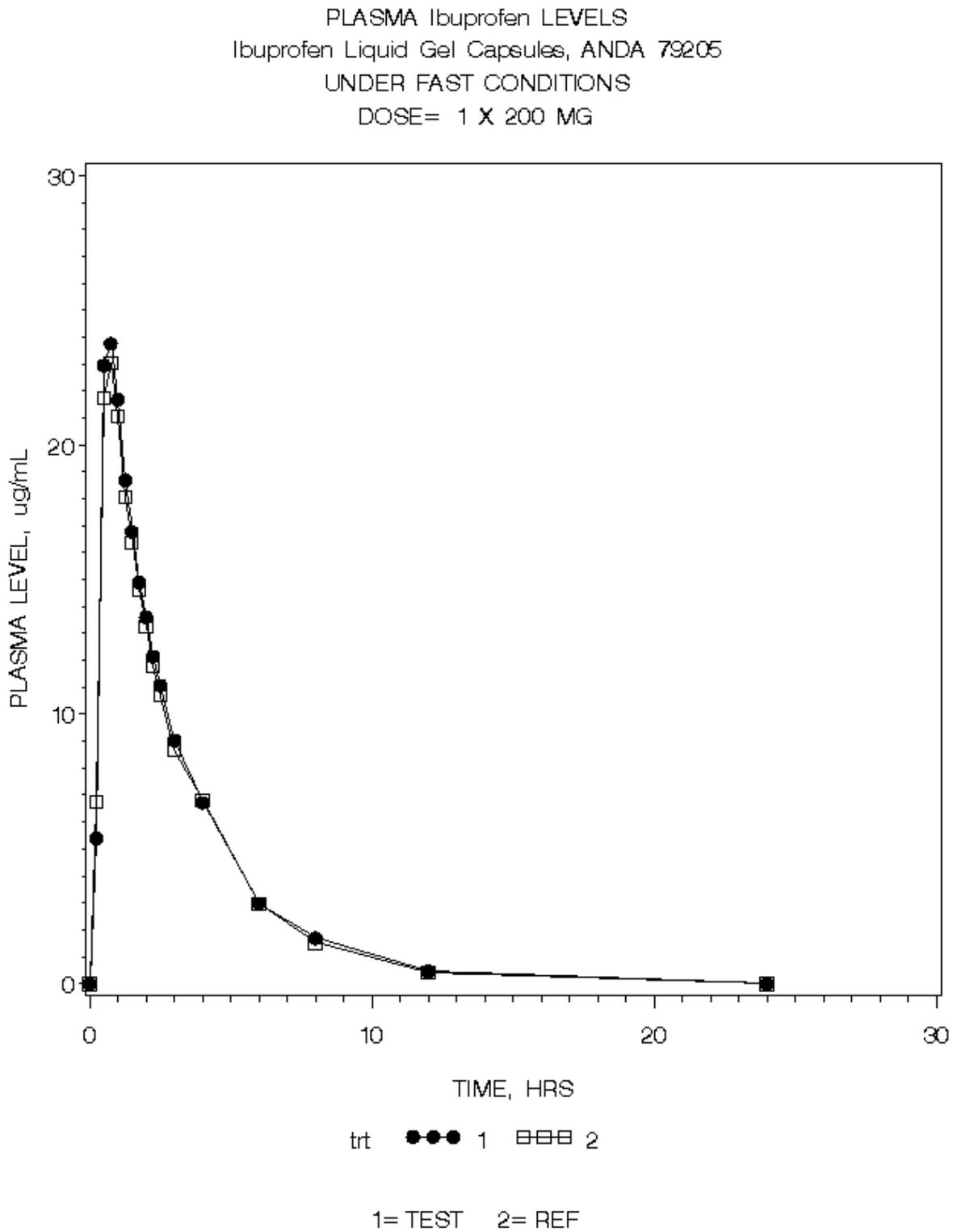
**Summary and Conclusions, Single-Dose Fasted Bioequivalence Study:**

The single-dose fasted bioequivalence study is incomplete due to discrepancies in the SAS dataset submitted in the electronic and paper copy. See Deficiency Comment section 3.10

**Table 18. Mean Plasma Concentrations, Single-Dose Fasted Bioequivalence Study**

<b>Ibuprofen Capsules (Liquid Filled) 200 mg</b>					
<b>Time (hr)</b>	<b>Test (n= 23)</b>		<b>Reference (n=23 )</b>		<b>T/R Ratio</b>
	<b>Mean (µg/mL)</b>	<b>% CV</b>	<b>Mean (µg/mL)</b>	<b>% CV</b>	
0.00	0.00	.	0.00	.	.
0.25	5.40	130.76	6.77	141.28	0.80
0.50	22.96	41.07	21.76	40.03	1.06
0.75	23.76	19.27	23.04	23.61	1.03
1.00	21.68	21.05	21.05	21.17	1.03
1.25	18.69	19.87	18.08	18.87	1.03
1.50	16.78	24.29	16.38	20.96	1.02
1.75	14.90	26.77	14.64	23.15	1.02
2.00	13.61	31.19	13.28	26.87	1.02
2.25	12.15	33.47	11.78	27.38	1.03
2.50	11.08	36.89	10.72	30.92	1.03
3.00	9.04	38.27	8.69	32.22	1.04
4.00	6.72	47.46	6.80	48.41	0.99
6.00	2.98	61.87	2.96	59.16	1.01
8.00	1.69	83.59	1.52	81.79	1.11
12.00	0.47	140.65	0.40	156.91	1.17
24.00	0.01	479.58	0.00	.	.

Figure 1. Mean Plasma Concentrations, Single-Dose Fasted Bioequivalence Study



## 4.1.2 Single-dose Fed Bioequivalence Study

### 4.1.2.1 Study Design

**Table 19. Study Information**

Study Number	US/07/024
Study Title	A randomized, single dose, open label, bioequivalence study of Ibuprofen soft gelatin capsules 200 mg in normal, healthy, adult, human subjects under fed condition.
Clinical Site	Accutest Research Laboratories (I) Pvt. Ltd., A-31, M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA. Tel.: +91 22 27780718 Telefax: +91 22 27780721
Clinical Investigator	Dr. Suhas Khandave M.D. (Pharmacology)
Dosing Dates	22 <sup>nd</sup> June 2007 01 <sup>st</sup> July 2007
Analytical Sites	Accutest Research Laboratories (I) Pvt. Ltd., A-31, M.I.D.C., T.T.C., Industrial Area, Khairane, Navi Mumbai-400 709, INDIA. Tel.: +91 22 27780718 Telefax: +91 22 27780721
Analysis Date	Date of Initiation of Subject Analysis: 24 <sup>th</sup> July 2007 Date of Completion of Subject analysis: 28 <sup>th</sup> July 2007
Analytical Director	(b) (4)
Storage Period of Biostudy Samples No. of days from the first day of sample collection to the last day of sample analysis.	36 days In an amendment, dated 14-Feb-2008 the firm submitted sufficient long-term stability data covering 51 days at -20° C for ibuprofen in the biological matrix.

**Table 20. Product Information**

Product	Test	Reference
Treatment ID	A	B
Product Name	Ibuprofen Soft Gelatin Capsules 200 mg	Advil® LIQUI-GELS® Solubilized Ibuprofen Capsules 200 mg
Manufacturer	Marksans Pharma Limited, Goa, India.	Distributed by: Wyeth Consumer Healthcare, Madison, NJ 07940, Made in USA. By arrangements with R.P. Scherer Corp.
Batch/Lot No.	FH7006	B98587
Manufacture Date	April 2007	-----
Expiration Date	-----	August 2008
Strength	200 mg	200 mg

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Dosage Form	Soft gelatin capsules	Soft gelatin capsules
Bio-batch Size	(b) (4) Capsules*	-----
Production Batch Size	(b) (4) Capsules	-----
Potency	(b) (4) % 198.6 mg/Capsule	(b) (4) % 198.8 mg/Capsule
Content Uniformity	(b) (4) % (98.0%-100.6%)	(b) (4) % (94.2%-103.7%)
Dose Administered	A single oral dose of test formulation Ibuprofen capsules 200 mg in each period with 240 mL of water	A single oral dose of reference formulation Advil® LIQUI-GELS® 200 mg in each period with 240 mL of water
Route of Administration	Oral	Oral

\*As presented in the submission. This number may be a typographical error

**Table 21. Study Design, Single-Dose Fed Bioequivalence Study**

<b>No. of Subjects</b>	24 healthy, adult , human subjects (18 male and 6 female) enrolled 21 completed
<b>No. of Sequences</b>	2
<b>No. of Periods</b>	2
<b>No. of Treatments</b>	2
<b>No. of Groups</b>	1
<b>Washout Period</b>	9 days
<b>Randomization Scheme</b>	AB:1,3,5,7,10,12,13,16,17,19,21,23 BA:2,4,6,8,9,11,14,15,18,20,22,24
<b>Blood Sampling Times</b>	Pre-dose samples were collected within 60 minutes before scheduled dosing time and 0.25, 0.50, 0.75, 1.00, 1.25, 1.50, 1.75, 2.00, 2.25, 2.50, 3.00, 4.00, 6.00, 8.00, 12.00, 24.00 hours post dose
<b>Blood Volume Collected/Sample</b>	Samples were collected through an indwelling cannula placed in a forearm vein or by direct vein puncture. A total of 17 blood samples (6 mL each) were collected from 0 hour pre-dose to 24 hours post dose during each period. Samples were collected in BD Vacutainer® containing K2 EDTA 10.8 mg
<b>Blood Sample Processing/Storage</b>	Post collection, study blood samples were centrifuged at 10° C and spun at 3500 rpm for 10 minutes. Plasma was dispensed in vials two in aliquots one as analytical sample and the other as control sample. All plasma samples were stored upright at -20°C ± 5°C.
<b>IRB Approval</b>	Yes June 2, 2007
<b>Informed Consent</b>	Yes, December 16, 2006
<b>Length of Fast Before Meal</b>	Overnight fast of at least 10 hours prior to the high fat breakfast given half an hour before dosing.
<b>Length of Confinement</b>	Subjects were confined at 12 hours prior to dosing until after the 24 hour post dose.
<b>Safety Monitoring</b>	Safety was evaluated by monitoring clinical adverse events during each period. The investigator measured vital signs, including auxiliary temperature, blood pressure, pulse and respiration rate.

<b>Standard FDA Meal Used?</b>	No	
<b>If No, then meal components and composition is listed in the tables below</b>		
<b>Composition of Meal Used in Fed Bioequivalence Study US/07/024</b>		
<b>Composition</b>	<b>Percent of total cal</b>	<b>cal</b>
	<b>Test Meal</b>	<b>Test Meal</b>
Fat	55	531
Carbohydrate	27	260
Protein	18	168
Total	100	959

Components of Non-standard FDA Meal Used in Fed Bioequivalence Study

**APPENDIX B**  
**MEALS FOR EACH STUDY PERIOD**

Food-item	Conventional Measure	Ingredients	CHO (g)	Protein (g)	Fat (g)	Energy (calories)
<b>HIGH-FAT BREAKFAST</b>						
Milk	2 cups	Whole milk	24	16	16	300
		Almond	0	0	5	45
		Sugar	5	0	0	20
Paneer Paratha	1 (~100g)	Wheat flour	22	3	0	105
		Paneer	0	7	5	75
Curds	1 cup	Beaten curds	12	8	8	150
Green chutney		Coriander leaves + mint leaves + green chillies	NA	NA	NA	NA
Cheese Singles	2 slices	Cheese	2	8	10	130
Cashew	10 pieces	Cashew	0	0	5	45
	2 tsp	Ghee	0	0	10	90
<b>Total</b>			<b>65</b>	<b>42</b>	<b>59</b>	<b>960</b>
<b>Total calories</b>			<b>260</b>	<b>168</b>	<b>531</b>	
<b>Percent</b>			<b>27</b>	<b>18</b>	<b>55</b>	
<b>LUNCH</b>						
Phulkas	2 nos. (30g each)	Wheat flour (kneaded)	30	4	0	140
Rice	1 cup	Rice	30	4	0	140
Patti-Dal	1 cup	Dal	13	4	0	70
		Onion	5	0	0	20
Methi vegetable	1 cup cooked	Onion	5	0	0	20
		Methi leaves	15	2	0	70
		Tomato chopped				
Tomato-cucumber salad	1 cup	Tomato + cucumber (chopped)				
	3 tsp	Cooking oil	0	0	15	135
<b>Total</b>			<b>98</b>	<b>14</b>	<b>15</b>	<b>595</b>
<b>SNACK</b>						
Dahi Vada	3 pieces	Maida vadas	23	4	0	105
		Curd (whole - milk)	6	4	4	75
		Sugar	10	0	0	40
Whole milk	½ cup	Whole milk	6	4	4	75
Fruit	1 no.	Banana	15	0	0	60
		Oil	0	0	5	45
<b>Total</b>			<b>60</b>	<b>12</b>	<b>13</b>	<b>400</b>

<b>DINNER</b>						
Chapatti	2 nos. (30 g each)	Wheat flour (kneaded)	30	4	0	140
Steamed Rice	1 cup	Rice	30	4	0	140
Patli Dal	1 cup	Dal	13	4	0	70
		Onion	4	1	0	20
Curd	½ cup	Curd (skim milk)	6	4	4	75
Cooked Vegetable	1 cup	Spinach leaves	15	2	0	70
		Onion	4	1	0	20
Tomato-cucumber salad	1 cup	Tomato + cucumber (chopped)				
Fruit	1 no	1 banana	15	0	0	60
	2 tsp	Cooking oil	0	0	10	90
<b>Total</b>			<b>117</b>	<b>20</b>	<b>14</b>	<b>685</b>

Abbreviations use:- *tsp*: teaspoon, *tbsp*: tablespoon, *NA*: Not Applicable

<b>Nutritive Value of the Day's Menu:-</b>				
Description	CHO (g)	Protein (g)	Fat (g)	Energy (calories)
<b>BREAKFAST</b>	65	42	59	960
<b>LUNCH</b>	98	14	15	595
<b>EVENING SNACK</b>	60	12	13	400
<b>DINNER</b>	117	20	14	685
<b>TOTAL</b>	<b>340</b>	<b>88</b>	<b>101</b>	<b>2640</b>
<b>Calories</b>	<b>1360</b>	<b>352</b>	<b>909</b>	
<b>Percent Contributed</b>	<b>52</b>	<b>13</b>	<b>35</b>	

**Comments on Study Design:**

The study design is acceptable

#### 4.1.2.2 Clinical Results

**Table 22. Demographics Profile of Subjects Completing the Bioequivalence Study**

Study No. US/07/024				
		Treatment Groups		
		Test Product N = 21	Reference Product N = 21	
Age (years)	Mean ± SD	26.90 ± 5.93		26.90 ± 5.93
	Range	19-36		19-36
Age Groups	< 18	Nil		Nil
	18 – 40	21 (100%)		21 (100%)
	41 – 64	Nil		Nil
	65 – 75	Nil		Nil
	> 75	Nil		Nil
Sex	Male	15 (71.43%)		15 (71.43%)
	Female	6 (28.57%)		6 (28.57%)
Race	Asian	21 (100%)		21 (100%)
	Black	Nil		Nil
	Caucasian	Nil		Nil
	Hispanic	Nil		Nil
	Other	Nil		Nil
BMI	Mean ± SD	On Protocol basis Subject were enrolled according to Life Insurance Corporation Chart		On Protocol basis Subject were enrolled according to Life Insurance Corporation Chart
	Range			
Other Factors		Nil		Nil

**Table 23. Dropout Information, Fed Bioequivalence Study**

Study No.US/07/024				
Subject No	Reason for dropout/replacement	Period	Replaced?	Replaced with
04	Dropped out in period II due to personal reasons; having sequence (BA)	II	Not Applicable	Not Applicable
05	Dropped out in period II due to personal reasons; having sequence (AB)	II	Not Applicable	Not Applicable
19	Dropped out in period II due to personal reasons; having sequence (AB)	II	Not Applicable	Not Applicable

**Table 24. Study Adverse Events, Fed Bioequivalence Study**

Adverse Event	Reported Incidence by Treatment Groups	
	Fed Bioequivalence Study Study No. US/07/024	
	Test Product (A)	Reference Product (B)
<b>Central Nervous System</b>		
Giddiness	0 (0.0%)	1 (14.286 %)
<b>Gastrointestinal System</b>		
Pain in abdomen	0 (0.0%)	1 (14.286 %)
<b>Musculoskeletal System</b>		
Backache	0 (0.0%)	1 (14.286 %)
<b>Body As Whole</b>		
Pain in Claves*	1 (14.286 %)	0 (0.0%)
Burn over dorsal aspects of left foot	1 (14.286 %)	0 (0.0%)
Fever with chills	0 (0.0%)	1 (14.286 %)
Body ache	0 (0.0%)	1 (14.286 %)
<b>Total</b>	<b>2 (28.57 %)</b>	<b>5 (71.43 %)</b>

\*As submitted by firm. This may be a typographical error for Calves.

**Table 25. Protocol Deviations, Fed Bioequivalence Study**

Study No:US/07/024		
Type	Subject (Test)	Subject (Reference)
Deviation in scheduled time in blood sample collection	1	3

**Comments on Dropouts/Adverse Events/Protocol Deviations:**

1. No SAE's were reported during the fed BE study.
2. The blood sampling time point deviations (ranging from 3 to 6 minutes) were noted but the original scheduled time points were used for the calculation of all of the pharmacokinetic parameters. The time point deviations were not close to Tmax.

3. No scheduled concomitant medication was given prior to the study.

#### 4.1.2.3 Bioanalytical Results

**Table 26. Assay Validation – Within the Fed Bioequivalence Study**

Bioequivalence Study No. :US/07/024 Ibuprofen Capsules (Liquid Filled) 200 mg								
Parameter	Standard Curve Samples							
Concentration (µg/mL)	0.251	0.502	2.009	10.044	30.133	60.265	80.353	99.940
Inter day Precision (%CV)	2.53	5.08	2.31	1.59	2.02	1.66	1.45	2.43
Inter day Accuracy (% Actual)	100.36	98.28	103.12	103.20	97.99	95.88	99.62	101.47
Linearity (Range of Values)	(r > 0.98) 0.9984-0.9997							
Linearity Range (µg/mL)	0.251 to 99.940							
Sensitivity/LOQ (µg/mL)	0.251							

Bioequivalence Study No.: US/07/024 Analyte Name: Ibuprofen							
Parameter	Quality Control Samples						
	LLOQ QC	LQC	MQC_03	MQC_01	MQC_02	HQC	ULOQ QC
Concentration (µg/mL)	NA	0.753	12.557	25.114	40.183	77.855	NA
Inter day Precision (%CV)	NA	5.92	5.23	4.55	4.50	5.28	NA
Inter day Accuracy (%Actual)	NA	97.14	91.84	96.67	103.54	105.20	NA

#### Comments on Study Assay Validation:

- The firm introduced a third MQC\_03 with a nominal concentration of 12.557 µg/mL after reviewing data of first three batches with MQC\_01 and MQC\_02 with nominal concentrations of 25.114 µg/mL and 40.183 µg/mL, respectively. The highest concentration of the study samples was 22.24 µg/mL; therefore, MQC\_02 and HQC were not relevant.
- The accuracy and precision parameters of the QC's and standard curves were all acceptable.

Any interfering peaks in chromatograms?	No
Were 20% of chromatograms included?	Yes

Were chromatograms serially or randomly selected?	Serially 12,13, 14, 15,16
---	---------------------------

**Comments on Chromatograms:**

Acceptable

**Table 27. SOP's Dealing with Bioanalytical Repeats of Study Samples**

SOP No.	Effective Date of SOP	SOP Title
ARL/AL/SOP/069/02	27/01/07	STANDARD OPERATING PROCEDURE FOR REPEAT ANALYSIS

**Table 28. Additional Comments on Repeat Assays**

Were all SOPs followed?	Yes
Did recalculation of PK parameters change the study outcome?	No
Does the reviewer agree with the outcome of the repeat assays?	Yes
If no, reason for disagreement	NA

**Summary/Conclusions, Study Assays:**

1. The 90% CI for the least squares geometric means of  $\ln AUC_t$ ,  $\ln AUC_\infty$ , and  $\ln C_{max}$  of Ibuprofen calculated by the reviewer agree with the firm's calculations and meet the criteria for BE.
2. The single-dose fed bioequivalence study is incomplete due to discrepancies in the SAS dataset submitted in the electronic and the paper copy. See Deficiency Comment section 3.10

**4.1.2.4 Pharmacokinetic Results**

**Table 29. Arithmetic Mean Pharmacokinetic Parameters**

Mean plasma concentrations are presented in Table 33 and Figure 2

Fed Bioequivalence Study, Study No.US/07/024									
Parameter (units)	Test				Reference				T/R
	Mean	%CV	Min	Max	Mean	%CV	Min	Max	
AUC <sub>0-t</sub> (hr*µg/m)	54.694	27.82	30.47	79.21	56.923	27.59	32.60	84.24	0.96
AUC <sub>∞</sub> (hr*µg/m)	58.342	28.56	30.97	86.96	60.312	27.89	34.58	92.01	0.97
C <sub>max</sub> (µg/ml)	12.013	27.11	5.57	21.12	12.811	29.03	5.26	22.24	0.94
T <sub>max</sub> * (hr)	2.500	.	0.75	6.00	3.000	.	1.25	4.00	0.83
Kel (hr <sup>-1</sup> )	0.322	24.81	0.18	0.53	0.331	23.83	0.21	0.47	0.97

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<b>T1/2 (hr)</b>	2.284	24.93	1.31	3.93	2.207	24.75	1.46	3.33	1.03
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\* Tmax values are presented as median, range

**Table 30. Geometric Means and 90% Confidence Intervals - Firm Calculated**

Ibuprofen Capsules (Liquid Filled) 1 x 200 mg Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals					
Fed Bioequivalence Study No.US/07/024					
Parameter	Test	Reference	Ratio	90% C.I.	
				Lower	Upper
AUC0-t (hr * µg/ml)	52.71	54.85	0.96	92.90	99.41
AUCi (hr * µg/ml)	56.13	58.09	0.97	93.24	100.14
Cmax (hr * µg/ml)	11.67	12.36	0.94	87.98	101.26

**Table 31. Geometric Means and 90% Confidence Intervals - Reviewer Calculated**

Ibuprofen Capsules (Liquid Filled) 1 x 200 mg Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals					
Fed Bioequivalence Study No. US/07/024					
Parameter (units)	Test	Reference	Ratio	90% C.I.	
				Lower	Upper
AUC0-t (hr * µg/ml)	52.64	54.90	0.96	92.99	98.85
AUCi (hr * µg/ml)	56.07	58.13	0.96	93.26	99.77
Cmax (hr * µg/ml)	11.69	12.34	0.95	88.18	101.73

**Table 32. Additional Study Information**

Root mean square error, AUC <sub>0-t</sub>	0.0572			
Root mean square error, AUC <sub>∞</sub>	0.0631			
Root mean square error, C <sub>max</sub>	0.1338			
	<b>Test</b>	<b>Reference</b>		
Kel and AUC <sub>∞</sub> determined for how many subjects?	21	21		
Do you agree or disagree with firm's decision?	Agree	Agree		
Indicate the number of subjects with the following:				
measurable drug concentrations at 0 hr	None	None		
first measurable drug concentration as C <sub>max</sub>	None	None		
Were the subjects dosed as more than one group?	No	No		
Ratio of AUC <sub>0-t</sub> /AUC <sub>∞</sub>				
Treatment	n	Mean	Minimum	Maximum
Test	21	0.94	0.80	0.98
Reference	21	0.94	0.88	0.99

**Comments on Pharmacokinetic and Statistical Analysis:**

1. The firm and reviewer used data from the 21 healthy, adult subjects completing the fed BE study statistical evaluations.
2. The 90% CI for the least squares geometric means of lnAUC<sub>t</sub>, lnAUC<sub>∞</sub>, and lnC<sub>max</sub> of ibuprofen calculated by the reviewer agree with the firm's calculations

**Summary/Conclusions, Single-Dose Fed Bioequivalence Study:**

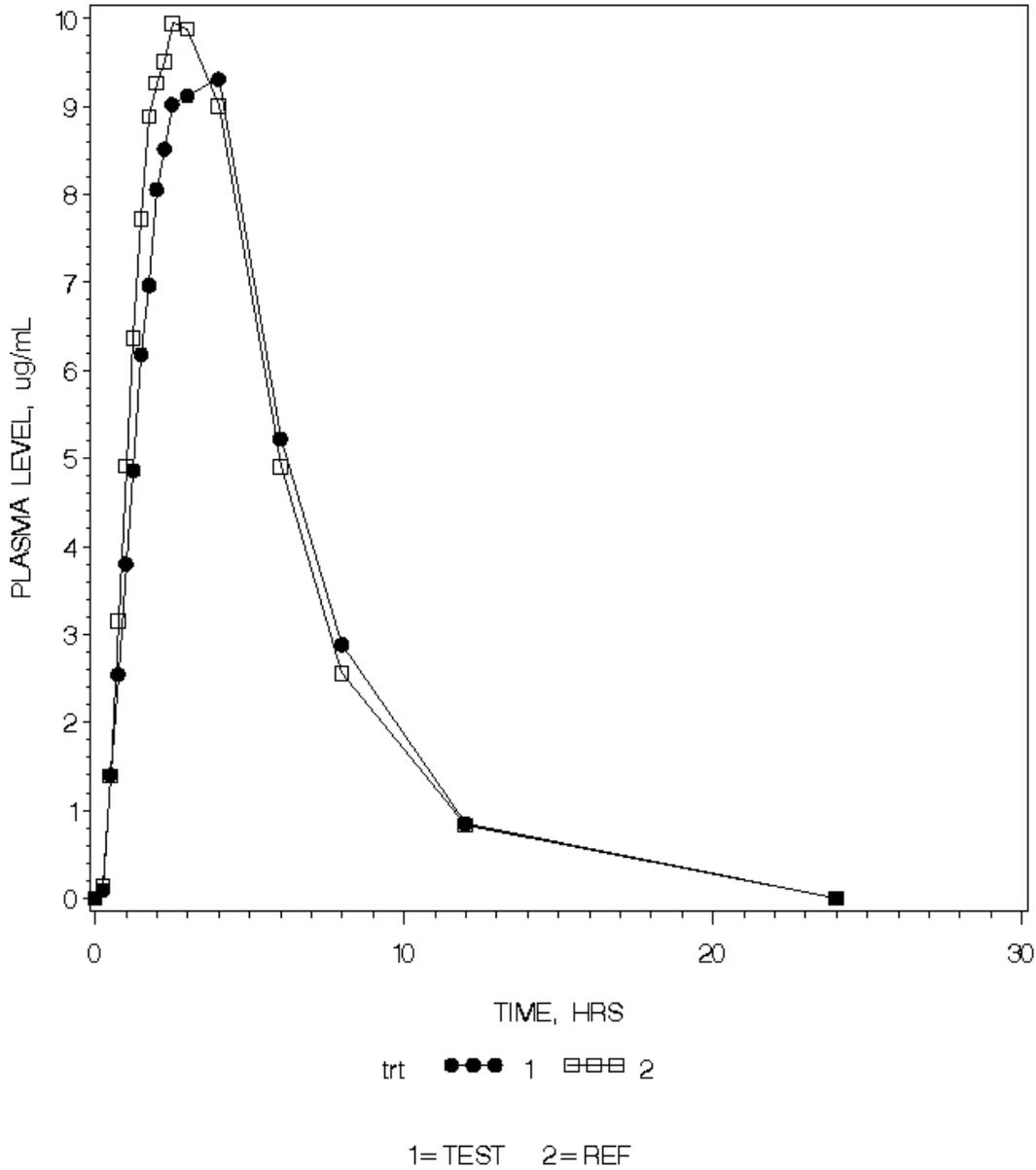
The single-dose fed bioequivalence study is incomplete due to discrepancies in the SAS dataset submitted in the EDR and paper copy. See Deficiency Comment section 3.10

**Table 33. Mean Plasma Concentrations, Single-Dose Fed Bioequivalence Study**

<b>Ibuprofen Capsules (Liquid Filled) 200 mg</b>					
<b>Time (hr)</b>	<b>Test (n=21)</b>		<b>Reference (n=21)</b>		<b>Ratio (T/R)</b>
	<b>Mean (µg/mL)</b>	<b>CV%</b>	<b>Mean (µg/mL)</b>	<b>CV%</b>	
0.00	0.00	.	0.00	.	.
0.25	0.10	307.19	0.14	211.96	0.69
0.50	1.40	173.51	1.40	89.36	1.01
0.75	2.55	123.23	3.16	74.23	0.81
1.00	3.80	106.92	4.91	72.14	0.77
1.25	4.87	88.41	6.37	65.48	0.76
1.50	6.19	73.84	7.73	62.84	0.80
1.75	6.97	67.24	8.89	58.69	0.78
2.00	8.06	54.06	9.27	46.31	0.87
2.25	8.52	47.11	9.51	40.19	0.90
2.50	9.03	41.00	9.95	33.18	0.91
3.00	9.12	32.20	9.89	32.71	0.92
4.00	9.31	33.10	9.00	35.56	1.03
6.00	5.22	46.47	4.91	46.29	1.06
8.00	2.89	57.91	2.56	58.99	1.13
12.00	0.85	74.02	0.84	75.99	1.02
24.00	0.00	.	0.00	.	.

**Figure 2. Mean Plasma Concentrations, Single-Dose Fed Bioequivalence Study**

PLASMA Ibuprofen LEVELS  
Ibuprofen Liquid Gel Capsules, ANDA 79205  
UNDER FED CONDITIONS  
DOSE= 1 X 200 MG



## 4.2 Formulation Data

S. No.	Ingredients	Pharmacopoeia reference	mg / capsule	% per capsule	Function
MEDICAMENT					
01	Ibuprofen	USP	200.00	(b)(4)	Active ingredient

(b)(4)

<b>Is there an overage of the active pharmaceutical ingredient (API)?</b>	NO
<b>If the answer is yes, has the appropriate chemistry division been notified?</b>	N/A
<b>If it is necessary to reformulate to reduce the overage, will bioequivalence be impacted?</b>	N/A
<b>Comments on the drug product formulation:</b>	<p>Acceptable</p> <ol style="list-style-type: none"> <li>1. All of the excipients are within the IIG limits</li> <li>2. The color additive FD&amp;C green No. 3 is (b) (4)% per capsule, less than the 0.1% requirement, therefore its amount is insignificant.</li> <li>3. (b) (4) hence insignificant.</li> </ol>

### 4.3 Dissolution Data

The firm's proposed specification shown below in the table is not acceptable (see dissolution review in DFS N079205 N 000 AB 14-Feb-2008). The firm has acknowledged and accepted the DBE-recommended dissolution specification of NLT  $\frac{(b)}{(4)}\%$  (Q) in 20 minutes in the Bioequivalence Amendment dated April 11, 2008. See Recommendation section 3.11

Dissolution Conditions		Apparatus:		USP Type I						
		Speed of Rotation:		150 rpm						
		Medium:		Phosphate buffer pH 7.2						
		Volume:		900 mL						
		Temperature:		37°C ±0.5°C						
Firm's Proposed Specifications		Not less than $\frac{(b)}{(4)}\%$ of the labeled amount is dissolved in $\frac{(b)}{(4)}$ minutes								
Dissolution Testing Site (Name, Address)		Marksans Pharma Ltd.								
Study Ref No.	Testing Date	Product ID \ Batch No.	Dosage Strength & Form	No. of Dosage Units		Collection Times (minutes)				Study Report Location
						5	10	20	30	
Study Report #: MV/AMV/DP/FH/017	Report date: 14 <sup>th</sup> August 2007	Marksans Pharma Ltd.'s Ibuprofen Capsules, 200 mg (liquid filled) Lot # FH7006	200 mg Capsule	12	Mean (%)	2.5	75.9	94.0	94.3	Module 5.3.1.3
					Range (%)	(1.2 to 5.9)	(29.0 to 90.1)	(87.2 to 97.0)	(91.3 to 98.1)	
					%CV	62.6	24.1	2.7	2.1	
Study Report #: MV/AMV/DP/FH/017	Report date: 14 <sup>th</sup> August 2007	Wyeth Consumer Healthcare's Advil <sup>®</sup> Liqui-Gels <sup>®</sup> (solubilized Ibuprofen Capsules 200 mg) Lot # B98587	200 mg Capsule	12	Mean (%)	3.6	72.2	100.6	100.1	Module 5.3.1.3
					Range (%)	(2.0 to 6.6)	(19.9 to 97.5)	(99.1 to 102.4)	(99.1 to 101.7)	
					%CV	37.3	39.0	1.0	0.7	

### 4.4 Detailed Regulatory History (If Applicable)

### 4.5 Consult Reviews

70 PAGES HAVE BEEN WITHHELD IN FULL AS B4 (CCI) IMMEDIATELY FOLLOWING THIS PAGE

BIOEQUIVALENCE DEFICIENCIES

ANDA: 79-205

APPLICANT: Marksans Pharma Ltd.

DRUG PRODUCT: Ibuprofen (Liquid Filled) Capsules, 200 mg (OTC)

The Division of Bioequivalence (DBE) has completed its review of your submissions acknowledged on the cover sheet. The following deficiencies have been identified:

1. The data submitted for the fed bioequivalence (BE) study are not consistent between the electronic and paper copies. The plasma concentration data in the paper copy correspond with the **concentration data** submitted in the SAS files; however, in the SAS files, the **treatment variable** does not correspond to the sequence or period for the following subjects: 3,5,7,10,12,13,16,17,19,21,23 in the paper copy. The SAS files show these subjects receiving the reference product in both period 1 and period 2. Please explain this discrepancy and resubmit the data for the fed BE study, US/07/024, with correct treatment, period, and sequence information.
2. The data submitted for the fasted BE study are not consistent between the electronic and paper copies. The plasma concentration data in the paper copy do not correspond with the plasma concentration data submitted in the SAS files. Please explain this discrepancy and resubmit the data for the fasted BE study, US/07/023 distinguishing the correct plasma concentration data for the test and reference product.

Sincerely yours,

{See appended electronic signature page}

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

#### 4.7 Outcome Page

ANDA: 79-205

#### Enter Review Productivity and Generate Report

<http://cdsogd1/bioprod>

**Reviewer:** Williams, Zakia

**Date Completed:**

**Verifier:** ,

**Date Verified:**

**Division:** Division of Bioequivalence

**Description:** Ibuprofen liqui-gel 200 mg

---

#### *Productivity:*

<i>ID</i>	<i>Letter Date</i>	<i>Productivity Category</i>	<i>Sub Category</i>	<i>Productivity</i>	<i>Subtotal</i>
5829	8/30/2007	Bioequivalence Study	Fasted Study	1	1
5829	8/30/2007	Bioequivalence Study	Fed Study	1	1
5829	2/14/2008	Other	Dissolution Amendment	0	0
5829	4/11/2008	Dissolution Data	Dissolution Acknowledgement	0	0
				<b>Bean Total:</b>	<b>2</b>

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**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

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Zakia R Williams  
9/2/2008 11:51:02 AM  
BIOPHARMACEUTICS

Yih Chain Huang  
9/2/2008 12:41:29 PM  
BIOPHARMACEUTICS

Hoainhon T. Nguyen  
9/2/2008 02:48:28 PM  
BIOPHARMACEUTICS  
For Dale P. Conner, Pharm. D., Director, Divison of  
Bioequivalence I

**DIVISION OF BIOEQUIVALENCE DISSOLUTION REVIEW**

<b>ANDA No.</b>	79-205
<b>Drug Product Name</b>	Ibuprofen Capsules (Liquid Filled)
<b>Strength (s)</b>	200 mg
<b>Applicant Name</b>	Marksans Pharma Ltd.
<b>Address</b>	601-622, Chintamani Plaza, Andheri Kurla Road, Andheri (East), Mumbai-400099, India
<b>Applicant's Point of Contact</b>	Authorized U.S. Agent: Mr. Nikanth J. Patel, Vice President Pharmgen LLC, 1919 Middle Country Road, Suite #206 Centereach, NY 11720
<b>Contact's Phone Number</b>	631-656-9753
<b>Contact's Fax Number</b>	631-656-9754
<b>Submission Date(s)</b>	30 Aug 2007
<b>Amendment Date(s)</b>	14 Feb 2008
<b>First Generic</b>	No
<b>Reviewer</b>	April C. Braddy, Ph.D.
<b>Study Number (s)</b>	US/07/023                      US/07/024
<b>Study Type (s)</b>	Fasting (STF)                      Fed (STP)
<b>Strength(s)</b>	200 mg                                      200 mg
<b>Clinical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31
<b>Clinical Site Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairme, Navi Mumbai-400 709, INDIA
<b>Analytical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31
<b>Analytical Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairme, Navi Mumbai-400 709, INDIA
<b>OUTCOME DECISION</b>	INCOMPLETE

**I. EXECUTIVE SUMMARY**

Review of a dissolution amendment. This is the **second** review of the dissolution testing data only.

There is no USP method for this product but there is an FDA-recommended method. The firm conducted dissolution testing using its proposed dissolution method and the FDA-recommended method. The firm's dissolution testing data with the FDA-recommended method are acceptable at S<sub>1</sub> level. The firm proposed specification of not less than <sup>(b)</sup><sub>(4)</sub> (Q) in <sup>(b)</sup><sub>(4)</sub> minutes differs from the FDA-recommended specification [NLT <sup>(b)</sup><sub>(4)</sub>% (Q) in 20 minutes]. The firm should acknowledge the FDA-recommended method and specification.

The firm provided sufficient long-term stability data for ibuprofen in the biological matrix.

The DBE will review the fasted and fed BE studies at a later date.

**Table 1: SUBMISSION CONTENT CHECKLIST**

Information		YES	NO	N/A	
Did the firm use the FDA-recommended dissolution method		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Did the firm use the USP dissolution method		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Did the firm use 12 units of both test and reference in dissolution testing		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Did the firm provide complete dissolution data (all raw data, range, mean, % CV, dates of dissolution testing)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Did the firm conduct dissolution testing with its own proposed method		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is FDA method in the public dissolution database (on the web)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
SAS datasets submitted to the electronic document room (edr)	Fasting BE study	PK parameters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Plasma concentrations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fed BE study	PK parameters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Plasma concentrations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other study	PK parameters	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Plasma concentrations	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are the DBE Summary Tables present in either PDF and/or MS Word Format?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If any of the tables are missing or incomplete please indicate that in the comments and request the firm to provide the complete DBE Summary Tables 1-16.					
Is the Long Term Storage Stability (LTSS) sufficient to cover the maximum storage time of the study samples?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If the LTSS is NOT sufficient please request the firm to provide the necessary data.					

**Table 2: SUMMARY OF IN VITRO DISSOLUTION DATA**

**A. FDA-Recommended Dissolution Method**

*USP Apparatus I (Basket) at 150 rpm in 900 mL of Phosphate buffer, pH 7.2*

Dissolution Conditions		Apparatus:		USP Type I						
		Speed of Rotation:		150 rpm						
		Medium:		Phosphate buffer pH 7.2						
		Volume:		900 mL						
		Temperature:		37°C ±0.5°C						
Firm's Proposed Specifications		Not less than <sup>(b)</sup> <sub>(4)</sub> % of the labeled amount is dissolved in <sup>(b)</sup> <sub>(4)</sub> minutes								
Dissolution Testing Site (Name, Address)		Marksans Pharma Ltd.								
Study Ref No.	Testing Date	Product ID \ Batch No.	Dosage Strength & Form	No. of Dosage Units		Collection Times (minutes)				Study Report Location
						5	10	20	30	
Study Report #: MV/AMV/DP/FH/017	Report date: 14 <sup>th</sup> August 2007	Marksans Pharma Ltd.'s Ibuprofen Capsules, 200 mg (liquid filled) Lot # FH7006	200 mg Capsule	12	Mean (%)	2.5	75.9	94.0	94.3	Module 5.3.1.3
					Range (%)	(1.2 to 5.9)	(29.0 to 90.1)	(87.2 to 97.0)	(91.3 to 98.1)	
					%CV	62.6	24.1	2.7	2.1	
Study Report #: MV/AMV/DP/FH/017	Report date: 14 <sup>th</sup> August 2007	Wyeth Consumer Healthcare's Advil <sup>®</sup> Liqui-Gels <sup>®</sup> (solubilized Ibuprofen Capsules 200 mg) Lot # B98587	200 mg Capsule	12	Mean (%)	3.6	72.2	100.6	100.1	Module 5.3.1.3
					Range (%)	(2.0 to 6.6)	(19.9 to 97.5)	(99.1 to 102.4)	(99.1 to 101.7)	
					%CV	37.3	39.0	1.0	0.7	

## B. Firm's Proposed Dissolution Method

USP Apparatus I (Basket) at (b) (4) rpm in 900 mL of Phosphate buffer, pH 7.2 + (b) (4)

Dissolution Conditions		Apparatus:	USP Type I										
		Speed of Rotation:	(b) (4) rpm										
		Medium:	Phosphate buffer pH 7.2 + (b) (4)										
		Volume:	900 mL										
		Temperature:	37°C ±0.5°C										
Firm's Proposed Specifications		Not less than (b) (4)% of the labeled amount is dissolved in (b) (4) minutes											
Dissolution Testing Site (Name, Address)		Marksans Pharma Ltd.											
Study Ref No.	Testing Date	Product ID \ Batch No.	Dosage Strength & Form	No. of Dosage Units		Collection Times (minutes)							Study Report Location
						5	10	15	20	30	45	60	
Study Report #: MV/AMV/DP/FH/011	Report date: 3 <sup>rd</sup> May 2007	Marksans Pharma Ltd.'s Ibuprofen Capsules, 200 mg  Lot # FH7006	200 mg Capsule	12	Mean (%)	1.69	41.35	93.33	95.72	96.17	95.88	92.69	Module 5.3.1.3
					Range (%)	(0.9-2.2)	(8.9-85.3)	(90.2-95.6)	(92.9-102.9)	(92.8-102.7)	(92.2-105.0)	(89.6-97.1)	
					%CV	21.5	55.3	1.5	2.6	2.5	3.4	2.8	
Study Report #: MV/AMV/DP/FH/011	Report date: 3 <sup>rd</sup> May 2007	Wyeth Consumer Healthcare's Advil® Liqui-Gels® (solubilized Ibuprofen Capsules 200 mg)  Lot # B98587	200 mg Capsule	12	Mean (%)	2.43	45.55	98.13	99.32	100.77	101.03	101.02	Module 5.3.1.3
					Range (%)	(1.4-5.9)	(5.7-87.6)	(92.9-100.8)	(98.1-103.4)	(98.1-106.1)	(97.8-107.5)	(97.1-108.1)	
					%CV	50.4	66.4	2.0	1.4	2.5	3.1	3.4	

**II. COMMENTS:**

1. Currently, there is no USP method for Ibuprofen Capsules (Liquid filled). The dissolution method and specification for the over-the-counter product, Advil® Liqui-Gel® Capsules, 200 mg are proposed by the innovator firm, Wyeth Consumer Healthcare.

**(NOT TO BE RELEASED UNDER FOIA)**

<b>Location of NDA Dissolution Review</b>	Internal databases:  FDA Enterprise Search, N 020402 REV 14-May-1999  Division of System Files v 2.0. ANDA 078082 Review bioequivalence Biopharmaceutics N 078082 N 000 22-Dec-2005.
<b>Source of Method (USP, FDA or Firm)</b>	FDA (020402)
<b>Medium</b>	Phosphate buffer, pH 7.2
<b>Volume (mL)</b>	900
<b>USP Apparatus type</b>	I (Basket)
<b>Rotation (rpm)</b>	150
<b>Dissolution specification</b>	Not less than (NLT) (b)(4)% (Q) in 20 minutes

2. The firm conducted dissolution testing using its proposed dissolution method and the FDA-recommended dissolution method. The difference between the two (2) methods was the dissolution medium and rotation speed of the USP apparatus I. The firm proposed using (b)(4).  
Whereas, the dissolution medium for the FDA-recommended method is Phosphate Buffer, pH 7.2 and the rotation speed of the USP Apparatus I (Basket) is 150 rpm.

	<b>Firm's dissolution method</b>	<b>FDA-recommended method</b>
<b>Medium</b>	Phosphate buffer, pH 7.2 (b)(4)	Phosphate buffer, pH 7.2
<b>Volume (mL)</b>	900	900
<b>USP Apparatus type</b>	I (Basket)	I (Basket)
<b>Rotation (rpm)</b>	(b)(4)	150
<b>Specification</b>	Not less than (NLT) (b)(4)% (Q) in (b)(4) minutes	Not less than (NLT) (b)(4)% (Q) in 20 minutes

3. The firm's dissolution testing on its Ibuprofen Capsules (Liquid filled), 200 mg, lot # FH7006 and the reference product, Advil<sup>®</sup> Liqui-Gel<sup>®</sup> Capsules, 200 mg, lot # B98587 using the FDA-recommended method is acceptable, [Table 2-A](#). The firm dissolution testing using its proposed method is not acceptable, see [Table 2-B](#).
4. The firm's proposed specification of NLT  $\frac{(b)}{(4)}\%$  (Q) in  $(b)(4)$  minutes differs from the FDA-recommended specification of NLT  $\frac{(b)}{(4)}\%$  (Q) in 20 minutes. However, the firm's test product still met the FDA-recommended specification at the S<sub>1</sub> level.
5. In this amendment, the firm submitted its dissolution testing data using the FDA-recommended method in the recommended DBE common-technical document (CTD) format.
6. In this amendment, the firm submitted sufficient long-term stability data covering 51 days at -20°C for ibuprofen in the biological matrix.
7. As previously, stated in the original dissolution review the firm provided the SAS datasets (.xpt format) for its BE studies.
8. No Division of Scientific Investigations (DSI) inspections are pending or necessary.

### III. DEFICIENCY COMMENT

The firm's proposed specification is not acceptable. The firm should acknowledge and accept the FDA-recommended dissolution method and specification for its test product, Ibuprofen Capsules, 200 mg

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
Temperature:	37°C ± 0.5°C
USP Apparatus:	I (Basket)
Rotational Speed:	150 rpm
Sampling times:	5, 10, 15, 20, 30, and 45 minutes
Specification:	NLT $\frac{(b)}{(4)}\%$ (Q) in 20 minutes

#### **IV. RECOMMENDATIONS:**

1. The *in vitro* dissolution testing conducted by Marksans Pharma Ltd., on its Ibuprofen Capsules (Liquid filled), 200 mg, lot # FH7006 is acceptable.
2. The firm should acknowledge and accept the FDA-recommended dissolution method and specification for its test product, Ibuprofen Capsules (Liquid Filled).

The firm should be informed of the above deficiency comments and recommendations.

BIOEQUIVALENCE DEFICIENCY

ANDA: 79-205  
APPLICANT: Marksans Pharma Ltd.  
DRUG PRODUCT: Ibuprofen Capsules (Liquid Filled), 200 mg

The Division of Bioequivalence has completed its review of only the dissolution testing portion of your submission(s) acknowledged on the cover sheet. The review of the bioequivalence (BE) studies will be conducted later. The following deficiencies have been identified:

Based on the dissolution testing data submitted for your Ibuprofen Capsules (Liquid Filled), your proposed specification of not less than (NLT)  $\frac{(b)}{(4)}\%$  Q in  $\frac{(b)}{(4)}$  minutes is not acceptable. Please provide your acknowledgment and acceptance of the following FDA-recommended dissolution method and specification:

Medium: Phosphate buffer, pH 7.2  
Volume: 900 mL  
Temperature:  $37^{\circ}\text{C} \pm 0.5^{\circ}\text{C}$   
USP Apparatus: I (Basket)  
Rotational Speed: 150 rpm  
Sampling times: 5, 10, 15, 20, 30 and 45 minutes

The test product should meet the following specification:

**NLT**  $\frac{(b)}{(4)}\%$  (Q) of the labeled amount of ibuprofen in the dosage form should be dissolved in **20 minutes**.

Sincerely yours,

*{See appended electronic signature page}*

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

**V. OUTCOME**

ANDA: 79-205

<i>ID</i>	<i>Letter Date</i>	<i>Productivity Category</i>	<i>Sub Category</i>	<i>Productivity</i>	<i>Subtotal</i>
4917	8/30/2007	Dissolution Data	Dissolution Review	0	0
4917	2/14/2008	Dissolution Data	Dissolution Amendment	0	0
				<b>Bean Total:</b>	<b>0</b>

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**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

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April Braddy  
2/28/2008 08:53:02 AM  
BIOPHARMACEUTICS

Moheb H. Makary  
2/28/2008 08:56:06 AM  
BIOPHARMACEUTICS

Barbara Davit  
2/29/2008 04:52:47 PM  
BIOPHARMACEUTICS

**DIVISION OF BIOEQUIVALENCE DISSOLUTION REVIEW**

<b>ANDA No.</b>	79-205	
<b>Drug Product Name</b>	Ibuprofen Capsules (Liquid Filled)	
<b>Strength (s)</b>	200 mg	
<b>Applicant Name</b>	Marksans Pharma Ltd.	
<b>Address</b>	601-622, Chintamani Plaza, Andheri Kurla Road, Andheri (East), Mumbai-400099, India	
<b>Applicant's Point of Contact</b>	Authorized U.S. Agent: Mr. Nikanth J. Patel, Vice President Pharmgen LLC, 1919 Middle Country Road, Suite #206 Centereach, NY 11720	
<b>Contact's Phone Number</b>	631-656-9753	
<b>Contact's Fax Number</b>	631-656-9754	
<b>Submission Date(s)</b>	30 Aug 2007	
<b>First Generic</b>	No	
<b>Reviewer</b>	April C. Braddy, Ph.D.	
<b>Study Number (s)</b>	US/07/023	US/07/024
<b>Study Type (s)</b>	Fasting (STF)	Fed (STP)
<b>Strength(s)</b>	200 mg	200 mg
<b>Clinical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31	
<b>Clinical Site Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA	
<b>Analytical Site</b>	Accutest Research Laboratories (I) Pvt. Ltd., A-31	
<b>Analytical Address</b>	M.I.D.C., T.T.C., Industrial Area, Khairne, Navi Mumbai-400 709, INDIA	
<b>OUTCOME DECISION</b>	INCOMPLETE	

## **I. EXECUTIVE SUMMARY**

This is a review of the dissolution testing data only.

There is no USP method for this product but there is an FDA-recommended method. The firm conducted dissolution testing using its proposed dissolution method. Therefore, the firm should conduct and submit dissolution testing on twelve (12) dosage units of each test and reference product using the following FDA-recommended method: USP Apparatus I (Basket) @ 150 rpm in Phosphate buffer, pH 7.2 (900 mL) at  $37^{\circ}\text{C} \pm 0.5^{\circ}\text{C}$ .

In addition, the firm should submit sufficient long-term stability data for ibuprofen in the biological matrix covering at least 46 days.

The DBE will review the fasted and fed BE studies at a later date.

**Table 1: SUBMISSION CONTENT CHECKLIST**

Information		YES	NO	N/A	
Did the firm use the FDA-recommended dissolution method		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Did the firm use the USP dissolution method		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Did the firm use 12 units of both test and reference in dissolution testing		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Did the firm provide complete dissolution data (all raw data, range, mean, % CV, dates of dissolution testing)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Did the firm conduct dissolution testing with its own proposed method		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is FDA method in the public dissolution database (on the web)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
SAS datasets submitted to the electronic document room (edr)	Fasting BE study	PK parameters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Plasma concentrations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fed BE study	PK parameters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Plasma concentrations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other study	PK parameters	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Plasma concentrations	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are the DBE Summary Tables present in either PDF and/or MS Word Format?		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
If any of the tables are missing or incomplete please indicate that in the comments and request the firm to provide the complete DBE Summary Tables 1-16.					
Is the Long Term Storage Stability (LTSS) sufficient to cover the maximum storage time of the study samples?		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If the LTSS is NOT sufficient please request the firm to provide the necessary data.					

**Table 2: SUMMARY OF IN VITRO DISSOLUTION DATA**

Dissolution Conditions		Apparatus:	USP Type I										
		Speed of Rotation:	(b)(4) rpm										
		Medium:	Phosphate buffer pH 7.2 + (b)(4)										
		Volume:	900 mL										
		Temperature:	37°C ±0.5°C										
Firm's Proposed Specifications		Not less than (b)(4)% of the labeled amount is dissolved (b)(4) minutes											
Dissolution Testing Site (Name, Address)		Marksans Pharma Ltd.											
Study Ref No.	Testing Date	Product ID \ Batch No.	Dosage Strength & Form	No. of Dosage Units		Collection Times (minutes)							Study Report Location
						5	10	15	20	30	45	60	
Study Report #: MV/AMV/DP/FH/011	Report date: 3 <sup>rd</sup> May 2007	Marksans Pharma Ltd.'s Ibuprofen Capsules, 200 mg  Lot # FH7006	200 mg Capsule	12	Mean (%)	1.69	41.35	93.33	95.72	96.17	95.88	92.69	Module 5.3.1.3
					Range (%)	(0.9-2.2)	(8.9-85.3)	(90.2-95.6)	(92.9-102.9)	(92.8-102.7)	(92.2-105.0)	(89.6-97.1)	
					%CV	21.5	55.3	1.5	2.6	2.5	3.4	2.8	
Study Report #: MV/AMV/DP/FH/011	Report date: 3 <sup>rd</sup> May 2007	Wyeth Consumer Healthcare's Advil <sup>®</sup> Liqui-Gels <sup>®</sup> (solubilized Ibuprofen Capsules 200 mg)  Lot # B98587	200 mg Capsule	12	Mean (%)	2.43	45.55	98.13	99.32	100.77	101.03	101.02	Module 5.3.1.3
					Range (%)	(1.4-5.9)	(5.7-87.6)	(92.9-100.8)	(98.1-103.4)	(98.1-106.1)	(97.8-107.5)	(97.1-108.1)	
					%CV	50.4	66.4	2.0	1.4	2.5	3.1	3.4	

**II. COMMENTS:**

1. Currently, there is no USP method for Ibuprofen Capsules (Liquid filled). The dissolution method and specification for the over-the-counter product, Advil® Liqui-Gel® Capsules, 200 mg are proposed by the innovator firm, Wyeth Consumer Healthcare.

**(NOT TO BE RELEASED UNDER FOIA)**

<b>Location of NDA Dissolution Review</b>	Internal databases:  FDA Enterprise Search, N 020402 REV 14-May-1999  Division of System Files v 2.0. ANDA 078082 Review bioequivalence Biopharmaceutics N 078082 N 000 22-Dec-2005.
<b>Source of Method (USP, FDA or Firm)</b>	FDA (020402)
<b>Medium</b>	Phosphate buffer, pH 7.2
<b>Volume (mL)</b>	900
<b>USP Apparatus type</b>	I (Basket)
<b>Rotation (rpm)</b>	150
<b>Dissolution specification</b>	Not less than (NLT) $\frac{(b)}{(4)}\%$ (Q) in 20 minutes

2. The firm's dissolution testing on its Ibuprofen Capsules (Liquid filled), 200 mg, lot # FH7006 and the reference product, Advil® Liqui-Gel® Capsules, 200 mg, lot # B98587 using its proposed method is not acceptable, see [Table 2](#). The firm should conduct dissolution testing using the FDA-recommended dissolution method.
3. The firm provided the sixteen (16) bioequivalence (BE) summary tables in pdf and/or word format.
4. The firm provided the SAS datasets (.xpt format) for its BE studies.
5. The long-term stability data provided by the firm of 16 days at  $-20 \pm 5$  °C is not sufficient to cover the maximum storage time for the ibuprofen human plasma samples.
  - For the fasting BE study No. US/07/023, the time from the first sample collection until the last sample was analyzed was 46 days (12 Jun 2007 to 27 Jul 2007).
  - For the fed BE study No. US/07/024, the time from the first sample collection until the last sample was analyzed was 37 days (22 Jun 2007 to 28 Jul 2007).

6. No Division of Scientific Investigations (DSI) inspections are pending or necessary.

### III. DEFICIENCY COMMENTS:

1. The firm did not conduct its dissolution testing using the FDA-recommended dissolution method. The FDA-recommended dissolution method is as follows:

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
Temperature:	37°C ± 0.5°C
USP Apparatus:	I (Basket)
Rotational Speed:	150 rpm
Sampling times:	5, 10, 15, 20, 30, and 45 minutes

2. The firm did not provide sufficient long term stability data for ibuprofen in the biological matrix (human plasma).

### IV. RECOMMENDATIONS:

1. The *in vitro* dissolution testing conducted by Marksans Pharma Ltd., on its Ibuprofen Capsules (Liquid filled), 200 mg, lot # FH7006 is incomplete for the reason provided in deficiency comment No. 1.

The firm should conduct and submit dissolution testing on twelve (12) dosage units of each test and reference product using the following FDA-recommended dissolution method:

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
Temperature:	37°C ± 0.5°C
USP Apparatus:	I (Basket)
Rotational Speed:	150 rpm
Sampling times:	5, 10, 15, 20, 30, and 45 minutes

2. The firm should submit sufficient long-term stability data for ibuprofen in the biological matrix (human plasma) covering at least 46 days.

The firm should be informed of the above deficiency comments and recommendations.

BIOEQUIVALENCE DEFICIENCIES

ANDA: 79-205

APPLICANT: Marksans Pharma Ltd.

DRUG PRODUCT: Ibuprofen Capsules (Liquid Filled), 200 mg

The Division of Bioequivalence has completed its review of only the dissolution testing portion of your submission(s) acknowledged on the cover sheet. The review of the bioequivalence (BE) studies will be conducted later. The following deficiencies have been identified:

1. Your dissolution testing is incomplete. Please submit dissolution testing on twelve (12) dosage units of each test and reference product using the following FDA-recommended method:

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
Temperature:	37°C ± 0.5°C
USP Apparatus:	I (Basket)
Rotational Speed:	150 rpm
Sampling times:	5, 10, 15, 20, 30 and 45 minutes

Please submit the comparative dissolution results which should include the individual capsule data as well as the mean, range, %CV at each time point for the 12 capsules tested and dates of dissolution testing. Also, please resubmit the dissolution testing data summary table with the above data.

2. The long-term stability data you provided is not sufficient to cover the storage period of the study samples for the BE studies you submitted. Please provide the data to support the long-term storage stability of ibuprofen in frozen study samples for the period equal to the time from the first sample collection to the day the last sample was analyzed which was at least 46 days.

Sincerely yours,

*{See appended electronic signature page}*

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

**V. OUTCOME**

ANDA: 79-205

<i>ID</i>	<i>Letter Date</i>	<i>Productivity Category</i>	<i>Sub Category</i>	<i>Productivity</i>	<i>Subtotal</i>
4579	8/30/2007	Dissolution Data	Dissolution Review	1	1
				<b>Bean Total:</b>	<b>1</b>

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**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

-----  
April Braddy  
1/28/2008 09:05:22 AM  
BIOPHARMACEUTICS

Moheb H. Makary  
1/28/2008 09:28:10 AM  
BIOPHARMACEUTICS

Barbara Davit  
1/31/2008 03:38:32 PM  
BIOPHARMACEUTICS

**CENTER FOR DRUG EVALUATION AND RESEARCH**

*APPLICATION NUMBER:*  
**ANDA 79-205**

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

OGD APPROVAL ROUTING SUMMARY

ANDA # 79-205 Applicant Marksans Pharma Limited  
Drug Ibuprofen Capsules (liquid filled), 200 mg Strength(s)

APPROVAL  TENTATIVE APPROVAL  SUPPLEMENTAL APPROVAL (NEW STRENGTH)  OTHER

REVIEWER:

DRAFT Package

FINAL Package

1. **Martin Shimer** Chief, Reg. Support Branch Date 27 May 2009 Initials MHS Date 6/26/09 Initials rlw
- Contains GDEA certification: Yes  No  Determ. of Involvement? Yes  No   
(required if sub after 6/1/92) Pediatric Exclusivity System  
RLD = Advil Liqui- NDA#20-402
- Patent/Exclusivity Certification: Yes  No  Date Checked N/A  
If Para. IV Certification- did applicant Nothing Submitted   
Notify patent holder/NDA holder Yes  No  Written request issued   
Was applicant sued w/in 45 days: Yes  No  Study Submitted   
Has case been settled: Yes  No  Date settled: \_\_\_\_\_
- Is applicant eligible for 180 day  
Generic Drugs Exclusivity for each strength: Yes  No   
Date of latest Labeling Review/Approval Summary \_\_\_\_\_  
Any filing status changes requiring addition Labeling Review Yes  No   
Type of Letter: Full Approval.  
Comments: ANDA submitted on 9/4/2007, BOS=Advil Liquid Gels NDA 20-402, PI cert provided. ANDA ack for filing on 9/4/2007 (LO dated 11/16/2007). There are no remaining patents or exclusivities which protect the RLD. This ANDA is eligible for immediate Full Approval.
2. **Project Manager**, Dat Doan Team1 Review Support Branch Date 5/27/09 Initials sdd Date \_\_\_\_\_ Initials \_\_\_\_\_
- Original Rec'd date 8/11/07 EER Status Pending  Acceptable  OAI   
Date Acceptable for Filing 8/14/07 Date of EER Status 2/11/09  
Patent Certification (type) I Date of Office Bio Review \_\_\_\_\_  
Date Patent/Exclus. expires \_\_\_\_\_ Date of Labeling Approv. Sum 9/11/08  
Citizens' Petition/Legal Case Yes  No  Date of Sterility Assur. App. \_\_\_\_\_  
(If YES, attach email from PM to CP coord) Methods Val. Samples Pending Yes  No   
First Generic Yes  No  MV Commitment Rcd. from Firm Yes  No   
Priority Approval Yes  No  Modified-release dosage form: Yes  No   
(If yes, prepare Draft Press Release, Email it to Cecelia Parise) Interim Dissol. Specs in AP Ltr: Yes
- Acceptable Bio review tabbed Yes  No   
Bio Review Filed in DFS: Yes  No   
Suitability Petition/Pediatric Waiver  
Pediatric Waiver Request Accepted  Rejected  Pending   
Previously reviewed and tentatively approved  Date \_\_\_\_\_

Previously reviewed and CGMP def. /NA Minor issued  Date \_\_\_\_\_  
Comments:bio AC 5/29/09, labeling ac 6/25/09

3. **Labeling Endorsement**

Reviewer:

Date \_\_\_\_\_  
Name/Initials \_\_\_\_\_

Labeling Team Leader:

Date 6/26/09  
Name/Initials rlw/for

Comments:

From: Lee, Koung U  
Sent: Friday, June 26, 2009 10:08 AM  
To: Doan, Dat; Barlow, James T  
Cc: West, Robert L  
Subject: RE: 79-205/Marksans/Ibuprofen

Dat,

I concur. I'm also concurring for Jim.

Thanks.

Koung

---

From: Doan, Dat  
Sent: Friday, June 26, 2009 9:39 AM  
To: Lee, Koung U; Barlow, James T  
Cc: West, Robert L  
Subject: 79-205/Marksans/Ibuprofen  
Importance: High

HI Koung, Jim:

Can I please get your endorsements for ANDA 79-205/Marksans/Ibuprofen?

<< File: 79205.ap.labeling.summary.pdf >>

<< File: 79205.ap.letter.DOC >>

Thanks,

Dat

4. **David Read (PP IVs Only)** Pre-MMA Language included  Date 6/26/09  
OGD Regulatory Counsel, Post-MMA Language Included  Initials rlw/for  
Comments: N/A. There are no patents currently listed in the "Orange Book" for this drug product.

5. **Div. Dir./Deputy Dir.** Date 6/2/09

Chemistry Div. I II OR III  
Comments:Satisfactory for AP.

InitialsRMP

6. **Frank Holcombe** First Generics Only  
Assoc. Dir. For Chemistry  
review)

Date 6/26/09  
Initials rlw/for

Comments: (First generic drug

N/A. Banner Pharmacaps ANDA 78-682 for this drug product was approved on 3/24/09.

7. Vacant  
Initials \_\_\_\_\_  
RLD = Advil LiquiGels 200 mg  
Wyeth Consumer Healthcare NDA 20-402

Date \_\_\_\_\_ Deputy Dir., DLPS

8. **Peter Rickman**  
Director, DLPS  
Para.IV Patent Cert: Yes  No ; Pending Legal Action: Yes  No ; Petition: Yes  No   
studies (fasting and non-fasting) found acceptable. In-vitro dissolution testing also found acceptable. Bio study sites have acceptable DSI inspection histories - see memo in DFS endorsed 5/29/09. Office-level bio endorsed 12/20/08.

Date 6/26/09  
Initials rlw/for

Comments: Bioequivalence

Final-printed labeling (FPL) found acceptable for approval 6/24/09.

CMC found acceptable for approval (Chemistry Review #3).

OR

8. **Robert L. West**  
Deputy Director, OGD  
Para.IV Patent Cert: Yes  No ; Pending Legal Action: Yes  No ; Petition: Yes  No   
Press Release Acceptable   
Comments: Acceptable EES dated 12/22/08 (Verified 6/26/09). No "OAI" Alerts noted.

Date 6/26/09  
Initials RLWest

There are no patents or exclusivity listed in the current "Orange Book" for this drug product.

This ANDA is recommended for approval.

9. **Gary Buehler** Date 6/26/09  
 Director, OGD Initials rlw/for  
 Comments:  
 First Generic Approval  PD or Clinical for BE  Special Scientific or Reg.Issue   
 Press Release Acceptable

10. Project Manager, Team Dat Doan Date 6/26/09  
 Review Support Branch Initials dd

\_\_\_\_\_ Date PETS checked for first generic drug (just prior to notification to firm)

Applicant notification:  
2:20pm Time notified of approval by phone  
2:21pm Time approval letter faxed

FDA Notification:  
6/26/09 Date e-mail message sent to "CDER-OGDAPPROVALS" distribution list.  
6/26/09 Date Approval letter copied to \\CDS014\DRUGAPP\ directory.

EER DATA:

**EES Data for: 079205**

**\*\*\* Compliance Recommendations \*\*\***

App No	Doc Seq No	Date	OC Recommendation
079205	000	12/22/2008	ACCEPTABLE

**\*\*\* EER Table \*\*\***

CFN	Name	Profile Code	Last Milestone Name	Last Milestone Date	Last Status	Last Status Date	OAI Alert/Effective Date
	MARKSANS PHARMA LIMITED	CSG	OC RECOMMENDATION	12/22/2008	AC	12/22/2008	None
	(b) (4)	CTL	OC	8/7/2008	AC	8/7/2008	None

			RECOMMENDATION					
	(b) (4)	CTL	OC RECOMMENDATION	5/29/2008	AC	5/29/2008	None	
(b) (4)	(b) (4)	CSN	OC RECOMMENDATION	11/21/2007	AC	11/21/2007	None	

COMIS TABLE:

**Comis Application Table Data for Application No: 079205**

\*\* Note: For Enterprise Search Files you may have to click and close the new window on first use

[Back to Search Form](#) [COMIS Pool Reviewers](#) [ES DFS Files Only](#) [ES - All Files](#) [EDR](#) [Cycles](#)

Drug Name:

Potency:  Dosage Form:  APPL Type:

Applicant:

Status Code:  Status Date:  Clock Date:  USP:  Org:

Therapeutic Drug Class:

Patent Certification:  Patent Expiration Date:  PEPFAR:

<a href="#">Incom Doc Type</a>	<a href="#">Seq No</a>	<a href="#">Supp Mod Type</a>	<a href="#">Letter Date</a>	<a href="#">Stamp Date</a>	<a href="#">Decision Code</a>	<a href="#">Decision Date</a>	<a href="#">Status code</a>	<a href="#">Status Date</a>	<a href="#">Priority Flag</a>	<a href="#">Document ID-Click to see Assignment</a>	<a href="#">Priority Date</a>
<a href="#">N</a>  <a href="#">Volume Locator</a>	000	MC	9/12/2007	9/13/2007	CL	9/13/2007				<a href="#">3156107</a>	
<a href="#">N</a>  <a href="#">Volume Locator</a>	000		8/30/2007	9/4/2007	NM	2/14/2008	PN	10/7/2008	1	<a href="#">3152151</a>	10/7/2008
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<a href="#">N</a>  <a href="#">Volume Locator</a>	000	AB	2/14/2008	2/15/2008	OP	2/15/2008				<a href="#">3912257</a>	
<a href="#">N</a>  <a href="#">Volume Locator</a>	000	AM	3/11/2008	3/13/2008	NM	9/5/2008				<a href="#">3924178</a>	

N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AB	4/11/2008	4/15/2008	OP	4/15/2008				<a href="#">3940089</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AM	4/16/2008	4/17/2008	NM	9/5/2008				<a href="#">3941437</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AM	4/21/2008	4/23/2008	NM	9/5/2008				<a href="#">3943931</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AM	5/22/2008	5/27/2008	NM	9/5/2008				<a href="#">3959798</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AM	5/30/2008	6/2/2008	NM	9/5/2008				<a href="#">3962209</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AF	8/4/2008	8/5/2008	OP	8/5/2008				<a href="#">3994510</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AA	8/15/2008	8/18/2008	NM	9/5/2008				<a href="#">4001054</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AB	9/11/2008	9/12/2008	OP	9/12/2008				<a href="#">4013394</a>	
N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AM	10/6/2008	10/7/2008	OP	10/7/2008				<a href="#">4024982</a>	
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N  <a href="#">Volume</a> <a href="#">Locator</a>	000	AF	6/3/2009	6/4/2009	OP	6/4/2009				<a href="#">4145555</a>	<i>Comis Document Table Data</i>

ORANGE BOOK PRINT OFF :

Patent and Exclusivity Search Results from query on Appl No 020402 Product 001 in the OB\_OTC list.

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## Patent Data

**There are no unexpired patents for this product in the Orange Book Database.**

[Note: Title I of the 1984 Amendments does not apply to drug products submitted or approved under the former Section 507 of the Federal Food, Drug and Cosmetic Act (antibiotic products). Drug products of this category will not have patents listed.]

## Exclusivity Data

**There is no unexpired exclusivity for this product.**

[View a list of all patent use codes](#)

[View a list of all exclusivity codes](#)

[Return to Electronic Orange Book Home Page](#)

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FDA/Center for Drug Evaluation and Research

Office of Generic Drugs

Division of Labeling and Program Support

Update Frequency:

Orange Book Data - **Monthly**

Generic Drug Product Information & Patent Information - **Daily**

Orange Book Data Updated Through May, 2009

Patent and Generic Drug Product Data Last Updated: June 25, 2009

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**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

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Dat Doan  
6/26/2009 02:29:35 PM

## COMPLETE RESPONSE -- MINOR

ANDA 79-205

OFFICE OF GENERIC DRUGS, CDER, FDA  
Document Control Room, Metro Park North II  
7500 Standish Place, Room 150  
Rockville, MD 20855-2773 (240-276-9327)



APPLICANT: Marksans Pharma Ltd.

TEL: 631-656-9753

ATTN: Nikanth J. Patel

FAX: 631-656-9754

FROM: Dat Doan

FDA CONTACT PHONE: (240) 276-8573

Dear Sir:

This facsimile is in reference to your abbreviated new drug application dated August 30, 2007, submitted pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act for Ibuprofen Capsules (Liquid Filled), 200 mg.

Reference is also made to your amendment dated March 11, April 16, April 21, May 22, May 30, and August 15, 2008.

**SPECIAL INSTRUCTIONS: please see attached**

**Please submit your response in electronic format.**

**This will improve document availability to review staff.**

We have completed the review of your ANDA and have determined that we cannot approve this application in its present form. We have described below our reasons for this action and, where possible, our recommendations to address these issues in the following attachment (1 page). This facsimile is to be regarded as an official FDA communication and unless requested, a hard copy will not be mailed.

The file on this application is now closed. You are required to take an action described under 21 CFR 314.120 which will either amend or withdraw the application. Your amendment should respond to all of the deficiencies listed. Facsimiles or partial replies will not be considered for review, nor will the review clock be reactivated until all deficiencies have been addressed. The response to this facsimile will be considered to represent a MINOR AMENDMENT and will be reviewed according to current OGD policies and procedures. The designation as a MINOR AMENDMENT should appear prominently in your cover letter. Upon OGD's acceptance for filing of your ANDA, it was determined that an adequate amount of information was submitted to allow for review of your Bioequivalence and Microbiology data. You will be notified in a separate communication of any further deficiencies identified during our review of your Bioequivalence and Microbiology data. If you have substantial disagreement with our reasons for not approving this application, you may request an opportunity for a hearing.

**THIS DOCUMENT IS INTENDED ONLY FOR THE USE OF THE PARTY TO WHOM IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, OR PROTECTED FROM DISCLOSURE UNDER APPLICABLE LAW.**

If received by someone other than the addressee or a person authorized to deliver this document to the addressee, you are hereby notified that any disclosure, dissemination, copying, or other action to the content of this communication is not authorized. If you have received this document in error, please immediately notify us by telephone and return it to us by mail at the above address.

## CHEMISTRY COMMENTS TO BE PROVIDED TO THE APPLICANT

ANDA: 79-205

APPLICANT: Marksans Pharma Limited

DRUG PRODUCT: Ibuprofen (Liquid Filled) Capsules, 200 mg

The deficiencies presented below represent MINOR deficiencies.

A. Deficiencies:

1. DMF (b) (4) for Ibuprofen USP is deficient. Please do not respond to your deficiencies until the DMF holder has informed you that they have responded to their deficiencies.

B. In addition to responding to the deficiencies presented above, please note and acknowledge the following comments in your response:

1. The bioequivalence information which you have provided has been found to be deficient. The deficiencies were sent to you under separate cover. Please respond to them as soon as possible.
2. The firms referenced in your ANDA application relative to the manufacturing and testing of the product must be in compliance with cGMP's at the time of approval. We have requested an evaluation from the Division of Manufacturing and Product Quality.
3. To facilitate the review process, all changes (chemistry/manufacturing/controls, labeling, bioequivalence, etc.) should be identified and itemized in your cover letter.

Sincerely yours,

*{See appended electronic signature page}*

Rashmikant M. Patel, Ph.D.  
Director  
Division of Chemistry I  
Office of Generic Drugs  
Center for Drug Evaluation and Research

-----  
**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

-----  
Albert Mueller

9/5/2008 01:27:47 PM

# BIOEQUIVALENCY AMENDMENT

ANDA 79-205

OFFICE OF GENERIC DRUGS, CDER, FDA  
Document Control Room, Metro Park North II  
7500 Standish Place, Room 150  
Rockville, MD 20855-2773 (240-276-9327)



APPLICANT: Marksans Pharma Ltd.

TEL: 631-656-9753

ATTN: Nikanth J. Patel

FAX: 631-656-9754

FROM: Beth Fabian-Fritsch

FDA CONTACT PHONE: (240) 276-8782

Dear Sir:

This facsimile is in reference to the bioequivalency data submitted on August 30, 2007, pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act for Ibuprofen Capsules (Liquid Filled), 200 mg.

Reference is also made to the amendments dated February 14, 2008 and April 11, 2008.

The Division of Bioequivalence has completed its review of the submission(s) referenced above and has identified deficiencies which are presented on the attached 1 page. This facsimile is to be regarded as an official FDA communication and unless requested, a hard-copy will not be mailed.

You should submit a response to these deficiencies in accord with 21 CFR 314.96. Your amendment should respond to all the deficiencies listed. **Facsimiles or partial replies will not be considered for review**, nor will the review clock be reactivated until all deficiencies have been addressed. Your cover letter should clearly indicate that the response is a "Bioequivalency Amendment" and clearly identify any new studies (i.e., fasting, fed, multiple dose, dissolution data, waiver or dissolution waiver) that might be included for each strength. We also request that you include a copy of this communication with your response. **Please submit a copy of your amendment in both an archival (blue) and a review (orange) jacket.** Please direct any questions concerning this communication to the project manager identified above.

## **SPECIAL INSTRUCTIONS:**

**Please submit your response in electronic format.**

**This will improve document availability to review staff.**

**THIS DOCUMENT IS INTENDED ONLY FOR THE USE OF THE PARTY TO WHOM IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, OR PROTECTED FROM DISCLOSURE UNDER APPLICABLE LAW.**

If received by someone other than the addressee or a person authorized to deliver this document to the addressee, you are hereby notified that any disclosure, dissemination, copying, or other action to the content of this communication is not authorized. If you have received this document in error, please immediately notify us by telephone and return it to us by mail at the above address.

BIOEQUIVALENCE DEFICIENCIES

ANDA: 79-205

APPLICANT: Marksans Pharma Ltd.

DRUG PRODUCT: Ibuprofen (Liquid Filled) Capsules, 200 mg (OTC)

The Division of Bioequivalence (DBE) has completed its review of your submission acknowledged on the cover sheet. The following deficiencies have been identified:

1. The data submitted for the fed bioequivalence (BE) study are not consistent between the electronic and paper copies. The plasma concentration data in the paper copy correspond with the **concentration data** submitted in the SAS files; however, in the SAS files, the **treatment variable** does not correspond to the sequence or period for the following subjects: 3,5,7,10,12,13,16,17,19,21,23 in the paper copy. The SAS files show these subjects receiving the reference product in both period 1 and period 2. Please explain this discrepancy and resubmit the data for the fed BE study, US/07/024, with correct treatment, period, and sequence information.
2. The data submitted for the fasted BE study are not consistent between the electronic and paper copies. The plasma concentration data in the paper copy do not correspond with the plasma concentration data submitted in the SAS files. Please explain this discrepancy and resubmit the data for the fasted BE study, US/07/023 distinguishing the correct plasma concentration data for the test and reference product.

Sincerely yours,

{See appended electronic signature page}

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

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/s/

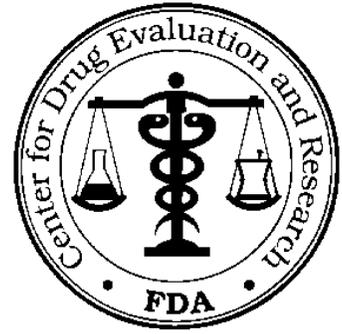
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Dale Conner

9/3/2008 11:21:53 AM

# BIOEQUIVALENCY AMENDMENT

ANDA 79-205

OFFICE OF GENERIC DRUGS, CDER, FDA  
Document Control Room, Metro Park North II  
7500 Standish Place, Room 150  
Rockville, MD 20855-2773 (240-276-9327)



APPLICANT: Marksans Pharma Ltd.

TEL: 631-656-9753

ATTN: Nikanth J. Patel

FAX: 631-656-9754

FROM: Aaron Sigler

PROJECT MANAGER: (240) 276-8782

Dear Sir:

This facsimile is in reference to the bioequivalency data submitted on August 30, 2007, pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act for Ibuprofen Capsules (Liquid Filled), 200 mg.

Reference is also made to your amendment dated February 14, 2008.

The Division of Bioequivalence has completed its review of the submission(s) referenced above and has identified deficiencies which are presented on the attached page. This facsimile is to be regarded as an official FDA communication and unless requested, a hard-copy will not be mailed.

You should submit a response to these deficiencies in accord with 21 CFR 314.96. Your amendment should respond to all the deficiencies listed. **Facsimiles or partial replies will not be considered for review**, nor will the review clock be reactivated until all deficiencies have been addressed. Your cover letter should clearly indicate that the response is a "Bioequivalency Amendment" and clearly identify any new studies (i.e., fasting, fed, multiple dose, dissolution data, waiver or dissolution waiver) that might be included for each strength. We also request that you include a copy of this communication with your response. **Please submit a copy of your amendment in both an archival (blue) and a review (orange) jacket.** Please direct any questions concerning this communication to the project manager identified above.

## **SPECIAL INSTRUCTIONS:**

**Please submit your response in electronic format.**

**This will improve document availability to review staff.**

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BIOEQUIVALENCE DEFICIENCY

ANDA: 79-205

APPLICANT: Marksans Pharma Ltd.

DRUG PRODUCT: Ibuprofen Capsules (Liquid Filled), 200 mg

The Division of Bioequivalence has completed its review of only the dissolution testing portion of your submission(s) acknowledged on the cover sheet. The review of the bioequivalence (BE) studies will be conducted later. The following deficiencies have been identified:

Based on the dissolution testing data submitted for your Ibuprofen Capsules (Liquid Filled), your proposed specification of not less than (NLT) (b)(4)% Q in (b)(4) minutes is not acceptable. Please provide your acknowledgment and acceptance of the following FDA-recommended dissolution method and specification:

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
Temperature:	37°C ± 0.5°C
USP Apparatus:	I (Basket)
Rotational Speed:	150 rpm
Sampling times:	5, 10, 15, 20, 30 and 45 minutes

The test product should meet the following specification:

**NLT** (b)(4)% (Q) of the labeled amount of ibuprofen in the dosage form should be dissolved in **20 minutes**.

Sincerely yours,

*{See appended electronic signature page}*

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

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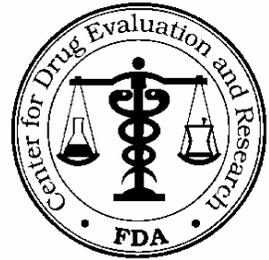
/s/

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Barbara Davit  
3/18/2008 06:10:16 PM  
Signing for Dale P Conner

## MINOR AMENDMENT

ANDA 79-205

OFFICE OF GENERIC DRUGS, CDER, FDA  
Document Control Room, Metro Park North II  
7500 Standish Place, Room 150  
Rockville, MD 20855-2773 (240-276-9327)



APPLICANT: Marksans Pharma Ltd.

TEL: 631-656-9753

ATTN: Nikanth J. Patel

FAX: 631-656-9754

FROM: Dat Doan

PROJECT MANAGER: (240) 276-8573

Dear Sir:

This facsimile is in reference to your abbreviated new drug application dated August 30, 2007, submitted pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act for Ibuprofen Capsules (Liquid Filled), 200 mg.

**SPECIAL INSTRUCTIONS:** please see attached

**Please submit your response in electronic format.**

**This will improve document availability to review staff.**

The application is deficient and, therefore, Not Approvable under Section 505 of the Act for the reasons provided in the attachment (1 page). This facsimile is to be regarded as an official FDA communication and unless requested, a hard copy will not be mailed.

The file on this application is now closed. You are required to take an action described under 21 CFR 314.120 which will either amend or withdraw the application. Your amendment should respond to all of the deficiencies listed. Facsimiles or partial replies will not be considered for review, nor will the review clock be reactivated until all deficiencies have been addressed. The response to this facsimile will be considered to represent a MINOR AMENDMENT and will be reviewed according to current OGD policies and procedures. The designation as a MINOR AMENDMENT should appear prominently in your cover letter. You have been/will be notified in a separate communication from our Division of Bioequivalence of any deficiencies identified during our review of your bioequivalence data. If you have substantial disagreement with our reasons for not approving this application, you may request an opportunity for a hearing.

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## CHEMISTRY COMMENTS TO BE PROVIDED TO THE APPLICANT

ANDA: 79-205

APPLICANT: Marksans Pharma Limited

DRUG PRODUCT: Ibuprofen (Liquid Filled) Capsules, 200 mg

The deficiencies presented below represent MINOR deficiencies.

A. Deficiencies:

1. Please establish a specification for the relative amounts of ibuprofen potassium salt and free ibuprofen in your drug product. Please include the validated methods with data for these two new tests.
2. Please revise the limits for “Any Individual Impurity” and for (b) (4) in the API to comply with the ICH Q3A(R) recommended limits for a maximum daily dose of 1200 mg. Also please reduce your API total impurities limit to reflect your test results.
3. Please revise your drug product release and stability (b) (4) to NMT (b) (4) % to comply with the ICH Q3B(R) recommended limit for a maximum daily dose of 1200 mg for the drug product.

B. In addition to responding to the deficiencies presented above, please note and acknowledge the following comments in your response:

1. The bioequivalence information which you have provided is under review. After this review is completed, any deficiencies found will be communicated to you under a separate cover.
2. The firms referenced in your ANDA application relative to the manufacturing and testing of the product must be in compliance with cGMP's at the time of approval. We have requested an evaluation from the Division of Manufacturing and Product Quality.
3. The labeling portion of your application is currently under review. The Division of Labeling and Program Support will notify you, under separate cover, of all labeling deficiencies.
4. To facilitate the review process, all changes (chemistry/manufacturing/controls, labeling, bioequivalence, etc.) should be identified and itemized in your cover letter.

Sincerely yours,

*{See appended electronic signature page}*

Rashmikant M. Patel, Ph.D.  
Director  
Division of Chemistry I  
Office of Generic Drugs  
Center for Drug Evaluation and Research

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/s/

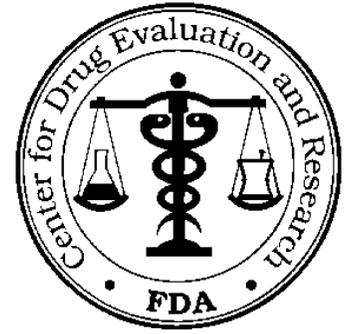
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Albert Mueller

2/14/2008 02:03:59 PM

# BIOEQUIVALENCY AMENDMENT

ANDA 79-205

OFFICE OF GENERIC DRUGS, CDER, FDA  
Document Control Room, Metro Park North II  
7500 Standish Place, Room 150  
Rockville, MD 20855-2773 (240-276-9327)



APPLICANT: Marksans Pharma Ltd.

TEL: 631-656-9753

ATTN: Nikanth J. Patel

FAX: 631-656-9754

FROM: Aaron Sigler

PROJECT MANAGER: (240) 276-8782

Dear Sir:

This facsimile is in reference to the bioequivalency data submitted on August 30, 2007, pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act for Ibuprofen Capsules (Liquid Filled), 200 mg.

The Division of Bioequivalence has completed its review of the submission(s) referenced above and has identified deficiencies which are presented on the attached 2 pages. This facsimile is to be regarded as an official FDA communication and unless requested, a hard-copy will not be mailed.

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## **SPECIAL INSTRUCTIONS:**

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BIOEQUIVALENCE DEFICIENCIES

ANDA: 79-205

APPLICANT: Marksans Pharma Ltd.

DRUG PRODUCT: Ibuprofen Capsules (Liquid Filled), 200 mg

The Division of Bioequivalence has completed its review of only the dissolution testing portion of your submission(s) acknowledged on the cover sheet. The review of the bioequivalence (BE) studies will be conducted later. The following deficiencies have been identified:

1. Your dissolution testing is incomplete. Please submit dissolution testing on twelve (12) dosage units of each test and reference product using the following FDA-recommended method:

Medium:	Phosphate buffer, pH 7.2
Volume:	900 mL
Temperature:	37°C ± 0.5°C
USP Apparatus:	I (Basket)
Rotational Speed:	150 rpm
Sampling times:	5, 10, 15, 20, 30 and 45 minutes

Please submit the comparative dissolution results which should include the individual capsule data as well as the mean, range, %CV at each time point for the 12 capsules tested and dates of dissolution testing. Also, please resubmit the dissolution testing data summary table with the above data.

2. The long-term stability data you provided is not sufficient to cover the storage period of the study samples for the BE studies you submitted. Please provide the data to support the long-term storage stability of ibuprofen in frozen study samples for the period equal to the time from the first sample collection to the day the last sample was analyzed which was at least 46 days.

Sincerely yours,

*{See appended electronic signature page}*

Dale P. Conner, Pharm.D.  
Director, Division of Bioequivalence  
Office of Generic Drugs  
Center for Drug Evaluation and Research

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/s/

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Barbara Davit  
2/1/2008 06:11:29 PM  
Signing for Dale P Conner

# ANDA CHECKLIST FOR CTD or eCTD FORMAT FOR COMPLETENESS and ACCEPTABILITY of an APPLICATION FOR FILING

For More Information on Submission of an ANDA in Electronic Common Technical Document (eCTD)

Format please go to: <http://www.fda.gov/cder/regulatory/ersr/ectd.htm>

\*For a Comprehensive Table of Contents Headings and Hierarchy please go to:

<http://www.fda.gov/cder/regulatory/ersr/5640CTOC-v1.2.pdf>

\*\* For more CTD and eCTD informational links see the final page of the ANDA Checklist

\*\*\* A model Quality Overall Summary for an immediate release tablet and an extended release capsule can be found on the OGD webpage <http://www.fda.gov/cder/ogd/> \*\*\*

ANDA #: 79-205

FIRM NAME: MARKSANS PHARMA LIMITED (NEW FIRM)

PIV: NO

Electronic or Paper Submission: PAPER (CTD FORMAT)

RELATED APPLICATION(S):

First Generic Product Received? NO

DRUG NAME: IBUPROFEN

DOSAGE FORM: CAPSULES, 200 MG  
(LIPUID FILLED)

<b>Bio Assignments:</b>		<input type="checkbox"/> <b>Micro Review (No)</b>
<input checked="" type="checkbox"/> <b>BPH</b>	<input type="checkbox"/> <b>BCE</b>	
<input type="checkbox"/> <b>BST</b>	<input checked="" type="checkbox"/> <b>BDI</b>	

Random Queue: 1

Chem Team Leader: Mueller, Albert PM: Dat Doan Labeling Reviewer: James Barlow

<b>Letter Date:</b> AUGUST 30, 2007	<b>Received Date:</b> SEPTEMBER 4, 2007
<b>Comments:</b> EC - 1 YES	<b>On Cards:</b> YES
<b>Therapeutic Code:</b> 5030300 ACUTE PAIN, NON-OPIOID	
<b>Archival copy:</b> PAPER (CTD FORMAT)	<b>Sections</b> I
<b>Review copy:</b> YES	E-Media Disposition: YES SENT TO EDR
Not applicable to electronic sections	
PART 3 Combination Product Category N Not a Part3 Combo Product	
(Must be completed for ALL Original Applications) Refer to the Part 3 Combination Algorithm	

<p><b>Reviewing CSO/CST</b>    <b>Rebekah Granger</b></p> <p><b>Date</b>    11/14/2007</p>	<p><b>Recommendation:</b></p> <p style="text-align: center;"><input type="checkbox"/> <b>FILE</b>      <input type="checkbox"/> <b>REFUSE to RECEIVE</b></p>
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**ADDITIONAL COMMENTS REGARDING THE ANDA:**

**MODULE 1  
ADMINISTRATIVE**

ACCEPTABLE

<p><b>1.1</b></p>	<p><b>1.1.2 Signed and Completed Application Form (356h) (original signature) YES</b> (Check Rx/OTC Status) OTC YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>1.2</b></p>	<p><b>Cover Letter</b> Dated: AUGUST 30, 2007 YES</p>	<p><input checked="" type="checkbox"/></p>
<p>*</p>	<p><b>Table of Contents (paper submission only) YES</b></p>	<p><input checked="" type="checkbox"/></p>
<p><b>1.3.2</b></p>	<p><b>Field Copy Certification (original signature) YES</b> (N/A for E-Submissions)</p>	<p><input checked="" type="checkbox"/></p>
<p><b>1.3.3</b></p>	<p><b>Debarment Certification-GDEA (Generic Drug Enforcement Act)/Other:</b> 1. Debarment Certification (original signature) YES 2. List of Convictions statement (original signature)</p>	<p><input checked="" type="checkbox"/></p>
<p><b>1.3.4</b></p>	<p><b>Financial Certifications</b> Bioavailability/Bioequivalence Financial Certification (Form FDA 3454) or Disclosure Statement (Form FDA 3455) YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>1.3.5</b></p>	<p><b>1.3.5.1 Patent Information</b> Patents listed for the RLD in the Electronic Orange Book Approved Drug Products with Therapeutic Equivalence Evaluations</p> <p><b>1.3.5.2 Patent Certification</b> 1. Patent number(s) 2. Paragraph: (Check all certifications that apply) MOU <input type="checkbox"/> PI <input checked="" type="checkbox"/> PII <input type="checkbox"/> PIII <input type="checkbox"/> PIV <input type="checkbox"/> (Statement of Notification) 3. Expiration of Patent(s): N/A a. Pediatric exclusivity submitted? b. Expiration of Pediatric Exclusivity? 4. Exclusivity Statement: YES</p> <p><b>Patent and Exclusivity Search Results from query on Appl No 020402 Product 001 in the OB_OTC list.</b></p> <hr/> <p><b>Patent Data</b></p> <p><b>There are no unexpired patents for this product in the Orange Book Database.</b></p> <p>[Note: Title I of the 1984 Amendments does not apply to drug products submitted or approved under the former Section 507 of the Federal Food, Drug and Cosmetic Act (antibiotic products). Drug products of this category will not have patents listed.]</p> <p><b>Exclusivity Data</b></p> <p><b>There is no unexpired exclusivity for this product.</b></p>	<p><input checked="" type="checkbox"/></p>

1.4.1	<b>References</b> Letters of Authorization <ol style="list-style-type: none"> <li>1. DMF letters of authorization <ol style="list-style-type: none"> <li>a. Type II DMF authorization letter(s) or synthesis for Active Pharmaceutical Ingredient YES</li> <li>b. Type III DMF authorization letter(s) for container closure YES</li> </ol> </li> <li>2. US Agent Letter of Authorization (U.S. Agent [if needed, countersignature on 356h]) YES</li> </ol>	☒
1.12.11	<b>Basis for Submission</b> NDA#: 20-402 Ref Listed Drug: ADVIL LIQUI-GELS Firm: WYETH CONSUMER HEALTHCARE ANDA suitability petition required? NA If Yes, then is change subject to PREA (change in dosage form, route or active ingredient) see section 1.9.1	☒

**MODULE 1 (Continued)**  
**ADMINISTRATIVE**

ACCEPTABLE

1.12.12	<b>Comparison between Generic Drug and RLD-505(j)(2)(A)</b> 1. Conditions of use SAME 2. Active ingredients SAME 3. Inactive ingredients JUSTIFIED 4. Route of administration SAME 5. Dosage Form SAME 6. Strength SAME	☒
1.12.14	<b>Environmental Impact Analysis Statement</b> YES	☒
1.12.15	<b>Request for Waiver</b> Request for Waiver of In-Vivo BA/BE Study(ies): Paper, NA	☒
1.14.1	<b>Draft Labeling (Mult Copies N/A for E-Submissions)</b> <b>1.14.1.1</b> 4 copies of draft (each strength and container) YES <b>1.14.1.2</b> 1 side by side labeling comparison of containers and carton with all differences annotated and explained YES <b>1.14.1.3</b> 1 package insert (content of labeling) submitted electronically YES ***Was a proprietary name request submitted? NO (If yes, send email to Labeling Reviewer indicating such)  <b>HOW SUPPLIED:</b>  Bottles of 32 Capsules Bottles of 600 Capsules	☒
1.14.3	<b>Listed Drug Labeling</b> <b>1.14.3.1</b> 1 side by side labeling (package and patient insert) comparison with all differences annotated and explained YES <b>1.14.3.3</b> 1 RLD label and 1 RLD container label YES	☒



**MODULE 3**

**3.2.S DRUG SUBSTANCE**

ACCEPTABLE

<p><b>3.2.S.1</b></p>	<p><b>General Information</b>  <b>3.2.S.1.1 Nomenclature</b> YES  <b>3.2.S.1.2 Structure</b> YES  <b>3.2.S.1.3 General Properties</b> YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.S.2</b></p>	<p><b>Manufacturer</b>  <b>3.2.S.2.1</b>  <b>Manufacturer(s) (This section includes contract manufacturers and testing labs)</b>  <b>Drug Substance (Active Pharmaceutical Ingredient)</b>            1. Addresses of bulk manufacturers YES            2. Manufacturing Responsibilities YES            3. Type II DMF number for API YES – DMF (b) (4)            4. CFN or FEI numbers</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.S.3</b></p>	<p><b>Characterization</b> Refer to DMF (b) (4)</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.S.4</b></p>	<p><b>Control of Drug Substance (Active Pharmaceutical Ingredient)</b>  <b>3.2.S.4.1 Specification</b>            Testing specifications and data from drug substance manufacturer(s) YES  <b>3.2.S.4.2 Analytical Procedures</b> YES  <b>3.2.S.4.3 Validation of Analytical Procedures</b>            1. Spectra and chromatograms for reference standards and test samples YES            2. Samples-Statement of Availability and Identification of:                a. Drug Substance YES                b. Same lot number(s) YES  <b>3.2.S.4.4 Batch Analysis</b>            1. COA(s) specifications and test results from drug substance mfr(s) YES            2. Applicant certificate of analysis YES  <b>3.2.S.4.5 Justification of Specification</b> YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.S.5</b></p>	<p><b>Reference Standards or Materials</b> YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.S.6</b></p>	<p><b>Container Closure Systems</b> Refer to DMF (b) (4)</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.S.7</b></p>	<p><b>Stability</b> Refer to DMF (b) (4)</p>	<p><input checked="" type="checkbox"/></p>

**MODULE 3**

**3.2.P DRUG PRODUCT**

ACCEPTABLE

<p><b>3.2.P.1</b></p>	<p><b>Description and Composition of the Drug Product</b>                  1) Unit composition YES                  2) Inactive ingredients are appropriate per IIG YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.P.2</b></p>	<p><b>Pharmaceutical Development</b>                  Pharmaceutical Development Report YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.P.3</b></p>	<p><b>Manufacture</b>  <b>3.2.P.3.1 Manufacture(s)</b> (Finished Dosage Manufacturer and Outside Contract Testing Laboratories)                  1. Name and Full Address(es) of the Facility(ies) YES                  2. CGMP Certification: YES                  3. Function or Responsibility YES                  4. CFN or FEI numbers (b)(4)  <b>3.2.P.3.2 Batch Formula</b> YES  <b>3.2.P.3.3 Description of Manufacturing Process and Process Controls</b>                  1. Description of the Manufacturing Process YES                  2. Master Production Batch Record(s) for largest intended production runs (no more than 10x pilot batch) with equipment specified YES                  3. If sterile product: Aseptic fill / Terminal sterilization                  4. Reprocessing Statement YES  <b>3.2.P.3.4 Controls of Critical Steps and Intermediates</b> YES  <b>3.2.P.3.5 Process Validation and/or Evaluation</b> YES                  1. Microbiological sterilization validation                  2. Filter validation (if aseptic fill)                   PROPOSED COMMERCIAL BATCH SIZE: (b)(4) Capsules</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.P.4</b></p>	<p><b>Controls of Excipients (Inactive Ingredients)</b>                  Source of inactive ingredients identified YES  <b>3.2.P.4.1 Specifications</b>                  1. Testing specifications (including identification and characterization) YES                  2. Suppliers' COA (specifications and test results) YES  <b>3.2.P.4.2 Analytical Procedures</b> YES  <b>3.2.P.4.3 Validation of Analytical Procedures</b> YES  <b>3.2.P.4.4 Justification of Specifications</b>                  Applicant COA YES</p>	<p><input checked="" type="checkbox"/></p>

**MODULE 3**  
**3.2.P DRUG PRODUCT**

ACCEPTABLE

<p><b>3.2.P.5</b></p>	<p><b>Controls of Drug Product</b>  <b>3.2.P.5.1 Specification(s)</b> YES  <b>3.2.P.5.2 Analytical Procedures</b> YES  <b>3.2.P.5.3 Validation of Analytical Procedures</b>  Samples - Statement of Availability and Identification of:  1. Finished Dosage Form YES  2. Same lot numbers YES  <b>3.2.P.5.4 Batch Analysis</b>  Certificate of Analysis for Finished Dosage Form YES  <b>3.2.P.5.5 Characterization of Impurities</b> YES  <b>3.2.P.5.6 Justification of Specifications</b> YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.P.7</b></p>	<p><b>Container Closure System</b>  1. Summary of Container/Closure System (if new resin, provide data) YES  2. Components Specification and Test Data YES  3. Packaging Configuration and Sizes YES  4. Container/Closure Testing YES  5. Source of supply and suppliers address YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>3.2.P.8</b></p>	<p><b>3.2.P.8.1 Stability (Finished Dosage Form)</b>  1. Stability Protocol submitted YES  2. Expiration Dating Period YES – 24 MONTHS  <b>3.2.P.8.2 Post-approval Stability and Conclusion</b>  Post Approval Stability Protocol and Commitments YES  <b>3.2.P.8.3 Stability Data</b>  1. 3 month accelerated stability data YES  2. Batch numbers on stability records the same as the test batch YES – Lot #FH7006</p>	<p><input checked="" type="checkbox"/></p>

**MODULE 3**

**3.2.R Regional Information**

ACCEPTABLE

<p><b>3.2.R</b>  <b>(Drug Substance)</b></p>	<p><b>3.2.R.1.S Executed Batch Records for drug substance (if available)</b> Refer to DMF (b) (4)  <b>3.2.R.2.S Comparability Protocols</b>  <b>3.2.R.3.S Methods Validation Package</b> YES  Methods Validation Package (3 copies) (Mult Copies N/A for E-Submissions)  (Required for Non-USP drugs)</p>	<p><input checked="" type="checkbox"/></p>
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**MODULE 3**

**3.2.R Regional Information**

ACCEPTABLE

<p><b>3.2.R (Drug Product)</b></p>	<p><b>3.2.R.1.P.1 Executed Batch Records</b> Copy of Executed Batch Record with Equipment Specified, including Packaging Records (Packaging and Labeling Procedures), Batch Reconciliation and Label Reconciliation YES – See Attached</p> <p><b>3.2.R.1.P.2 Information on Components</b> YES</p> <p><b>3.2.R.2.P Comparability Protocols</b> YES</p> <p><b>3.2.R.3.P Methods Validation Package</b> YES Methods Validation Package (3 copies) (Mult Copies N/A for E-Submissions) (Required for Non-USP drugs)</p>	<p><input checked="" type="checkbox"/></p>
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**MODULE 5**

**CLINICAL STUDY REPORTS**

ACCEPTABLE

<p><b>5.2</b></p>	<p><b>Tabular Listing of Clinical Studies</b> E-Submission: PDF YES Word Processed e.g., MS Word YES</p>	<p><input checked="" type="checkbox"/></p>
<p><b>5.3.1</b> (complete study data)</p>	<p><b>Bioavailability/Bioequivalence</b> <b>1. Formulation data same?</b> a. Comparison of all Strengths (check proportionality of multiple strengths) b. Parenterals, Ophthalmics, Otics and Topicals per 21 CFR 314.94 (a)(9)(iii)-(v) <b>2. Lot Numbers of Products used in BE Study(ies):</b> RLD: B98587 ANDA: FH7006 <b>3. Study Type: IN-VIVO PK STUDY(IES)</b> (Continue with the appropriate study type box below)</p>	<p><input checked="" type="checkbox"/></p>
	<p><b>5.3.1.2 Comparative BA/BE Study Reports</b> 1. Study(ies) meets BE criteria (90% CI of 80-125, C max, AUC) YES 2. Summary Bioequivalence tables: Table 10. Study Information YES Table 12. Dropout Information YES Table 13. Protocol Deviations YES <b>5.3.1.3 In Vitro-In-Vivo Correlation Study Reports</b> 1. Summary Bioequivalence tables: Table 11. Product Information YES Table 16. Composition of Meal Used in Fed Bioequivalence Study YES <b>5.3.1.4 Reports of Bioanalytical and Analytical Methods for Human Studies</b> 1. Summary Bioequivalence table: Table 9. Reanalysis of Study Samples YES Table 14. Summary of Standard Curve and QC Data for Bioequivalence Sample Analyses YES Table 15. SOPs Dealing with Bioanalytical Repeats of Study Samples YES <b>5.3.7 Case Report Forms and Individual Patient Listing</b></p>	<p><input checked="" type="checkbox"/></p>
<p><b>5.4</b></p>	<p><b>Literature References</b></p>	<p><input type="checkbox"/></p>

	<b>Possible Study Types:</b>	
Study Type	<b>IN-VIVO PK STUDY(IES)</b> (i.e., fasting/fed/sprinkle) FASTING AND FED ON 200 MG 1. Study(ies) meets BE criteria (90% CI of 80-125, C max, AUC) YES 2. EDR Email: Data Files Submitted: YES SENT TO EDR 3. In-Vitro Dissolution: YES	☒

Updated 10/10/2006 C. Bina

Active Ingredient Search - Microsoft Internet Explorer

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<a href="#">020402</a>	Yes	IBUPROFEN	CAPSULE; ORAL	EQ 200MG FREE ACID AND POTASSIUM SALT	ADVIL LIQUI-GELS	WYETH COM
<a href="#">020603</a>	Yes	IBUPROFEN	SUSPENSION/DROPS; 40MG/ML ORAL		CHILDREN'S MOTRIN MCNEIL COM	
<a href="#">075217</a>	No	IBUPROFEN	SUSPENSION/DROPS; 40MG/ML ORAL		IBUPROFEN	PERRIGO
<a href="#">020812</a>	Yes	IBUPROFEN	SUSPENSION/DROPS; 100MG/2.5ML ORAL		PEDIATRIC ADVIL	WYETH COM
<a href="#">074916</a>	No	IBUPROFEN	SUSPENSION; ORAL	100MG/5ML	IBUPROFEN	ACTAVIS MII ATLANTIC
<a href="#">021604</a>	No	IBUPROFEN	SUSPENSION; ORAL	100MG/5ML	CHILDREN'S ELIXSURE	ALTERNAT-CHP LLC
<a href="#">020516</a>	Yes	IBUPROFEN	SUSPENSION; ORAL	100MG/5ML	CHILDREN'S MOTRIN MCNEIL	
<a href="#">074937</a>	No	IBUPROFEN	SUSPENSION; ORAL	100MG/5ML	CHILDREN'S IBUPROFEN	PERRIGO
<a href="#">020589</a>	No	IBUPROFEN	SUSPENSION; ORAL	100MG/5ML	CHILDREN'S ADVIL	WYETH COM

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**Search results from the "OB\_OTC" table for query on "020402."**

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Active Ingredient:	IBUPROFEN
Dosage Form;Route:	CAPSULE; ORAL
Proprietary Name:	ADVIL LIQUI-GELS
Applicant:	WYETH CONS
Strength:	EQ 200MG FREE ACID AND POTASSIUM SALT
Application Number:	020402
Product Number:	001
Approval Date:	Apr 20, 1995
Reference Listed Drug	Yes
RX/OTC/DISCN:	OTC
Patent and Exclusivity Info for this product:	<a href="#">View</a>

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Active Ingredient:	IBUPROFEN
Dosage Form;Route:	CAPSULE; ORAL
Proprietary Name:	ADVIL MIGRAINE LIQUI-GELS
Applicant:	WYETH CONS
Strength:	EQ 200MG FREE ACID AND POTASSIUM SALT
Application Number:	020402
Product Number:	002
Approval Date:	Mar 16, 2000
Reference Listed Drug	Yes

Done Local intranet

Patent and Exclusivity Search Results - Microsoft Internet Explorer

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Search the Web  Search Address <http://www.accessdata.fda.gov/scripts/cder/ob/dc/> Go Links

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**Patent and Exclusivity Search Results from query on Appl No 020402 Product 001 in the OB\_OTC list.**

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**Patent Data**

**There are no unexpired patents for this product in the Orange Book Database.**

[Note: Title I of the 1984 Amendments does not apply to drug products submitted or approved under the former Section 507 of the Federal Food, Drug and Cosmetic Act (antibiotic products). Drug products of this category will not have patents listed.]

**Exclusivity Data**

**There is no unexpired exclusivity for this product.**

[View a list of all patent use codes](#)  
[View a list of all exclusivity codes](#)

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FDA/Center for Drug Evaluation and Research  
Office of Generic Drugs  
Division of Labeling and Program Support

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Table 3 Statistical Summary of the Comparative Bioavailability Data

Ibuprofen Soft Gelatin Capsules 200 mg Dose (1x 200mg Capsule) Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals Fasting Bioequivalence Study (Study Code: US/07/023)				
Parameter	Test	Reference	Ratio	90% C.I.
AUC <sub>0-t</sub>	63.70	68.13	93.50	90.00-97.12
AUC <sub>∞</sub>	65.66	69.98	93.82	90.62-97.14
C <sub>max</sub>	24.93	26.47	94.19	86.85-102.15

Ibuprofen Soft Gelatin Capsules 200 mg Dose (1x 200mg Capsule) Least Squares Geometric Means, Ratio of Means, and 90% Confidence Intervals Fed Bioequivalence Study (Study Code: US/07/024)				
Parameter	Test	Reference	Ratio	90% C.I.
AUC <sub>0-t</sub>	52.71	54.85	96.10	92.90-99.41 %
AUC <sub>∞</sub>	56.13	58.09	96.63	93.24-100.14 %
C <sub>max</sub>	11.67	12.36	94.39	87.98-101.26 %

**Table 6 Formulation Data:**

**Ibuprofen Soft Gelatin Capsules, 200 mg:**

The quantitative composition and function of each component in the drug product is listed.

S. No.	Ingredients	Pharmacopoeial reference	mg / capsule	% per capsule	Function
MEDICAMENT					(b) (4)
01	Ibuprofen	USP	200.00		Active ingredient

(b) (4)



INACTIVE INGREDIENTS SEARCH FOR ANDA 79205

MARKSANS PHARMA LTD – IBUPROFEN CAPSULES, 200 MG

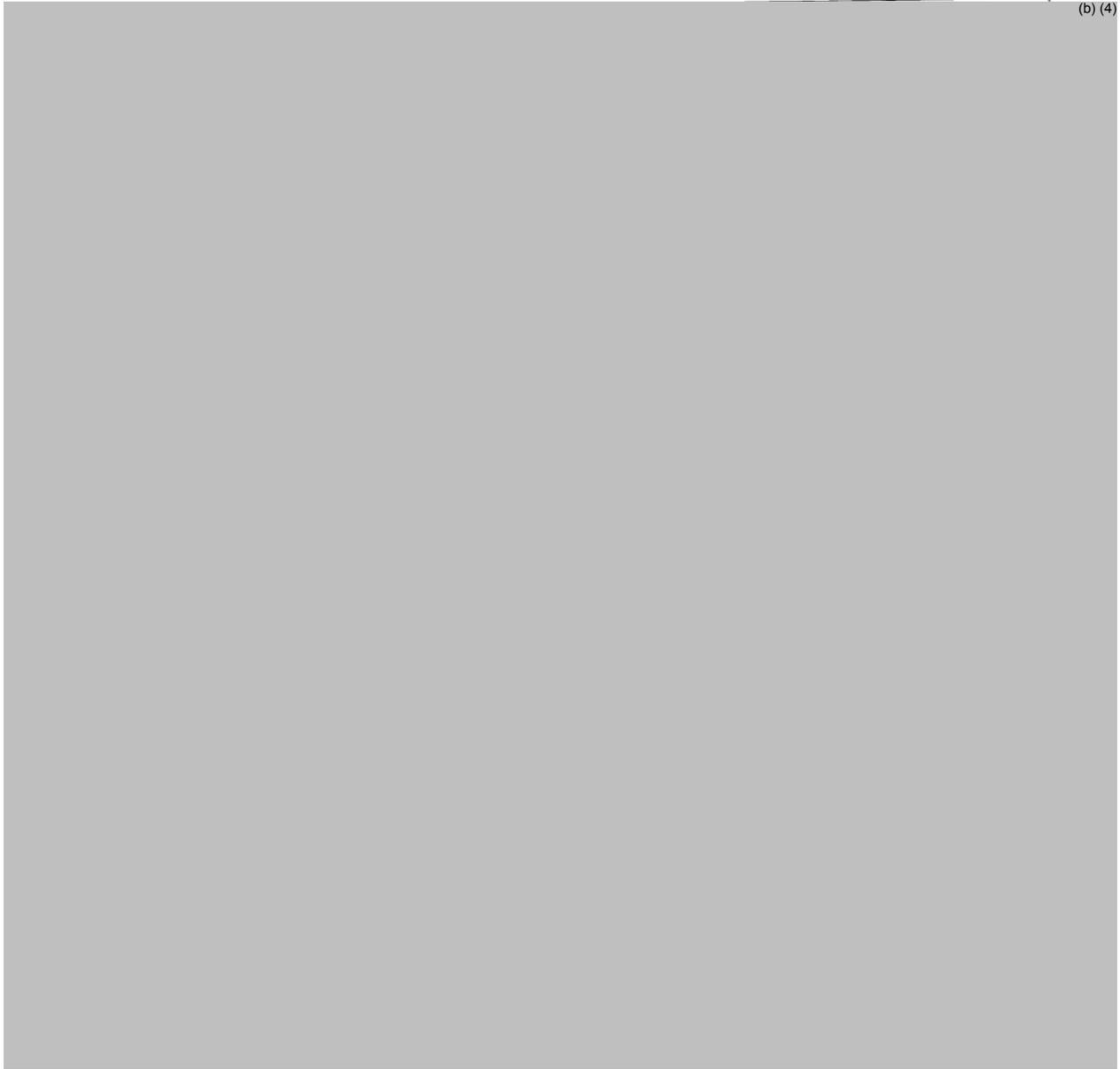


ANDA Original Submission  
Ibuprofen Capsules, 200 mg (liquid filled)  
Marksans Pharma Ltd.

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**3.2.R.1.P.1 Batch Reconciliation**

**Batch Reconciliation for Ibuprofen Capsules, 200 mg**



(b) (4)

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this page is the manifestation of the electronic signature.**  
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/s/

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Martin Shimer

11/16/2007 09:22:12 AM



DEPARTMENT OF HEALTH & HUMAN SERVICES

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Food and Drug Administration  
Rockville, MD 20857

ANDA 79-205

Pharmgen LLC  
US Agent for Marksans Pharma Limited  
Attention: Nilkanth J Patel  
1919 Middle Country Road  
Suite #206  
Centereach, NY 11720

Dear Sir:

We acknowledge the receipt of your abbreviated new drug application submitted pursuant to Section 505(j) of the Federal Food, Drug and Cosmetic Act.

NAME OF DRUG: Ibuprofen Capsules, 200 mg

DATE OF APPLICATION: August 30, 2007

DATE (RECEIVED) ACCEPTABLE FOR FILING: September 4, 2007

We will correspond with you further after we have had the opportunity to review the application.

Please identify any communications concerning this application with the ANDA number shown above.

Should you have questions concerning this application, contact:

Dat Doan  
Project Manager  
301-827-5807

Sincerely yours,

*{See appended electronic signature page}*

Wm Peter Rickman  
Director  
Division of Labeling and Program Support  
Office of Generic Drugs  
Center for Drug Evaluation and Research

-----  
**This is a representation of an electronic record that was signed electronically and  
this page is the manifestation of the electronic signature.**  
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/s/

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Martin Shimer  
11/16/2007 09:21:51 AM  
Signing for Wm Peter Rickman