CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

022544Orig1s000

OTHER REVIEW(S)

RPM FILING REVIEW

(Including Memo of Filing Meeting)

To be completed for all new NDAs, BLAs, and Efficacy Supplements (except SE8 and SE9)

Application Information		
NDA # 022544 BLA#	NDA Supplement #:S- BLA STN #	Efficacy Supplement Type SE-
Proprietary Name: Gralise Established/Proper Name: Gabapentin Dosage Form: (b) (4) Strengths: 300 and 600 mg/mL		
Applicant: Abbott Products, Inc. Agent for Applicant (if applicable): N/A		
Date of Application: March 30, 2010 Date of Receipt: March 30, 2010 Date clock started after UN: N/A		
PDUFA Goal Date: January 30, 2011	Action Goal Date (if different): January 29, 2011	
Filing Date: May 28, 2010	Date of Filing Meeting: May 4, 2010	
Chemical Classification: (1,2,3 etc.) (original NDAs only) **3**		
Proposed indication(s)/Proposed change(s): management of postherpetic neuralgia		

Type of Original NDA: AND (if applicable) Type of NDA Supplement: ***If 505(b)(2): Draft the "505(b)(2) Assessment" form found at:*** ***http://inside.fda.gov:9003/CDER/OfficeofNewDrugs/ImmediateOffice/ucm027499.html*** ***and refer to Appendix A for further information.***	☐ 505(b)(1) ☒ 505(b)(2) ☐ 505(b)(1) ☐ 505(b)(2)
Review Classification: ***If the application includes a complete response to pediatric WR, review classification is Priority.*** ***If a tropical disease priority review voucher was submitted, review classification is Priority.***	☒ Standard ☐ Priority ☐ Tropical Disease Priority Review Voucher submitted
Resubmission after withdrawal? ☐	Resubmission after refuse to file? ☐
Part 3 Combination Product? ☐ ***If yes, contact the Office of Combination Products (OCP) and copy them on all Inter-Center consults***	☐ Drug/Biologic ☐ Drug/Device ☐ Biologic/Device
☐ Fast Track ☐ Rolling Review ☐ Orphan Designation ☐ Rx-to-OTC switch, Full ☐ Rx-to-OTC switch, Partial ☐ Direct-to-OTC Other:	☐ PMC response ☐ PMR response: ☐ FDAAA [505(o)] ☐ PREA deferred pediatric studies [21 CFR 314.55(b)/21 CFR 601.27(b)] ☐ Accelerated approval confirmatory studies (21 CFR 314.510/21 CFR 601.41) ☐ Animal rule postmarketing studies to verify clinical benefit and safety (21 CFR 314.610/21 CFR 601.42)

Collaborative Review Division (*if OTC product*):				
List referenced IND Number(s): 071439				
Goal Dates/Names/Classification Properties	**YES**	**NO**	**NA**	**Comment**
PDUFA and Action Goal dates correct in tracking system? ***If not, ask the document room staff to correct them immediately. These are the dates used for calculating inspection dates.***	XX			
Are the proprietary, established/proper, and applicant names correct in tracking system? ***If not, ask the document room staff to make the corrections. Also, ask the document room staff to add the established/proper name to the supporting IND(s) if not already entered into tracking system.***	XX			
Are all classification properties [e.g., orphan drug, 505(b)(2)] entered into tracking system? ***If not, ask the document room staff to make the appropriate entries.***	XX			
Application Integrity Policy	**YES**	**NO**	**NA**	**Comment**
Is the application affected by the Application Integrity Policy (AIP)? ***Check the AIP list at: http://www.fda.gov/ICECI/EnforcementActions/ApplicationIntegrityPolicy/default.htm***		XX		
If yes, explain in comment column.				
If affected by AIP, has OC/DMPQ been notified of the submission? **If yes,** date notified:				
User Fees	**YES**	**NO**	**NA**	**Comment**
Is Form 3397 (User Fee Cover Sheet) included with authorized signature?	XX			

User Fee Status ***If a user fee is required and it has not been paid (and it is not exempted or waived), the application is unacceptable for filing following a 5-day grace period. Review stops. Send UN letter and contact user fee staff.***	Payment for this application: ☒ Paid ☐ Exempt (orphan, government) ☐ Waived (e.g., small business, public health) ☐ Not required
If the firm is in arrears for other fees (regardless of whether a user fee has been paid for this application), the application is unacceptable for filing (5-day grace period does not apply). Review stops. Send UN letter and contact the user fee staff.	Payment of other user fees: ☒ Not in arrears ☐ In arrears
Note: *505(b)(2) applications are no longer exempt from user fees pursuant to the passage of FDAAA. All 505(b) applications, whether 505(b)(1) or 505(b)(2), require user fees unless otherwise waived or exempted (e.g., small business waiver, orphan exemption).*	

505(b)(2) (NDAs/NDA Efficacy Supplements only)	YES	NO	NA	Comment
Is the application for a duplicate of a listed drug and eligible for approval under section 505(j) as an ANDA?		XX		
Is the application for a duplicate of a listed drug whose only difference is that the extent to which the active ingredient(s) is absorbed or otherwise made available to the site of action less than that of the reference listed drug (RLD)? (see 21 CFR 314.54(b)(1)).		XX		
Is the application for a duplicate of a listed drug whose only difference is that the rate at which the proposed product's active ingredient(s) is absorbed or made available to the site of action is unintentionally less than that of the listed drug (see 21 CFR 314.54(b)(2))? ***Note:*** *If you answered yes to any of the above questions, the application may be refused for filing under 21 CFR 314.101(d)(9).*		XX		
Is there unexpired exclusivity on the active moiety (e.g., 5-year, 3-year, orphan or pediatric exclusivity)? ***Check the Electronic Orange Book at:*** ***http://www.fda.gov/cder/ob/default.htm*** **If yes**, please list below:		XX		

Application No.	Drug Name	Exclusivity Code	Exclusivity Expiration

If there is unexpired, 5-year exclusivity remaining on the active moiety for the proposed drug product, a 505(b)(2) application cannot be submitted until the period of exclusivity expires (unless the applicant provides paragraph IV patent certification; then an application can be submitted four years after the date of approval.) Pediatric exclusivity will extend both of the timeframes in this provision by 6 months. 21 CFR 108(b)(2).Unexpired, 3-year exclusivity will only block the approval, not the submission of a 505(b)(2) application.

Exclusivity	YES	NO	NA	Comment
Does another product have orphan exclusivity for the same indication? ***Check the Electronic Orange Book at:*** ***http://www.fda.gov/cder/ob/default.htm***		xx		
If another product has orphan exclusivity, is the product considered to be the same product according to the orphan drug definition of sameness [21 CFR 316.3(b)(13)]? ***If yes, consult the Director, Division of Regulatory Policy II, Office of Regulatory Policy (HFD-007)***		xx		
Has the applicant requested 5-year or 3-year Waxman-Hatch exclusivity? ***(NDAs/NDA efficacy supplements only)*** **If yes**, # years requested: 3 ***Note:*** *An applicant can receive exclusivity without requesting it; therefore, requesting exclusivity is not required.*	xx			

Is the proposed product a single enantiomer of a racemic drug previously approved for a different therapeutic use (***NDAs only***)?		XX		
If yes, did the applicant: (a) elect to have the single enantiomer (contained as an active ingredient) not be considered the same active ingredient as that contained in an already approved racemic drug, and/or (b): request exclusivity pursuant to section 505(u) of the Act (per FDAAA Section 1113)? ***If yes, contact Mary Ann Holovac, Director of Drug Information, OGD/DLPS/LRB.***			XX	

Format and Content				
Do not check mixed submission if the only electronic component is the content of labeling (COL).	☐ All paper (except for COL) ☒ All electronic ☐ Mixed (paper/electronic) ☒ CTD ☐ Non-CTD ☐ Mixed (CTD/non-CTD)			
If mixed (paper/electronic) submission, which parts of the application are submitted in electronic format?				
Overall Format/Content	**YES**	**NO**	**NA**	**Comment**
If electronic submission, does it follow the eCTD guidance[1]? **If not,** explain (e.g., waiver granted).	XX			
Index: Does the submission contain an accurate comprehensive index?	XX			
Is the submission complete as required under 21 CFR 314.50 (*NDAs/NDA efficacy supplements*) or under 21 CFR 601.2 (*BLAs/BLA efficacy supplements*) including: ☒ legible ☒ English (or translated into English) ☒ pagination ☒ navigable hyperlinks (electronic submissions only) **If no**, explain.	XX			
Controlled substance/Product with abuse potential: Is an Abuse Liability Assessment, including a proposal for scheduling, submitted? ***If yes,*** *date consult sent to the Controlled Substance Staff:* **March 18, 2010**		**XX**		
BLAs only: Companion application received if a shared or divided manufacturing arrangement? **If yes**, BLA #				

Forms and Certifications				
Electronic *forms and certifications with electronic signatures (scanned, digital, or electronic – similar to DARRTS, e.g., /s/) are acceptable. Otherwise,* ***paper*** *forms and certifications with hand-written signatures must be included.* ***Forms*** *include: user fee cover sheet (3397), application form (356h), patent information (3542a), financial disclosure (3454/3455), and clinical trials (3674);* ***Certifications*** *include: debarment certification, patent certification(s), field copy certification, and pediatric certification.*				
Application Form	**YES**	**NO**	**NA**	**Comment**
Is form FDA 356h included with authorized signature? ***If foreign applicant, <u>both</u> the applicant and the U.S. agent must sign the form.***	XX			
Are all establishments and their registration numbers listed on the form/attached to the form?	XX			
Patent Information **(NDAs/NDA efficacy supplements only)**	**YES**	**NO**	**NA**	**Comment**
Is patent information submitted on form FDA 3542a?	xx			
Financial Disclosure	**YES**	**NO**	**NA**	**Comment**
Are financial disclosure forms FDA 3454 and/or 3455 included with authorized signature? ***Forms must be signed by the APPLICANT, not an Agent.*** ***Note:*** *Financial disclosure is required for bioequivalence studies that are the basis for approval.*	XX			
Clinical Trials Database	**YES**	**NO**	**NA**	**Comment**
Is form FDA 3674 included with authorized signature?	XX			
Debarment Certification	**YES**	**NO**	**NA**	**Comment**
Is a correctly worded Debarment Certification included with authorized signature? ***(Certification is not required for supplements if submitted in the original application)*** ***If foreign applicant, <u>both</u> the applicant and the U.S. Agent must sign the certification.*** ***Note:*** *Debarment Certification should use wording in FD&C Act section 306(k)(l) i.e.,"[Name of applicant] hereby certifies that it did not and will not use in any capacity the services of any person debarred under section 306 of the Federal Food, Drug, and Cosmetic Act in connection with this application." Applicant may not use wording such as, "To the best of my knowledge…"*	XX			

Field Copy Certification (NDAs/NDA efficacy supplements only)	YES	NO	NA	Comment
For paper submissions only: Is a Field Copy Certification (that it is a true copy of the CMC technical section) included? ***Field Copy Certification is not needed if there is no CMC technical section or if this is an electronic submission (the Field Office has access to the EDR)*** ***If maroon field copy jackets from foreign applicants are received, return them to CDR for delivery to the appropriate field office.***			XX	

Pediatrics	YES	NO	NA	Comment
PREA Does the application trigger PREA? ***If yes, notify PeRC RPM (PeRC meeting is required)*** ***Note****: NDAs/BLAs/efficacy supplements for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration trigger PREA. All waiver & deferral requests, pediatric plans, and pediatric assessment studies must be reviewed by PeRC prior to approval of the application/supplement.*	xx			A full waiver is requested due to treated population.
If the application triggers PREA, are the required pediatric assessment studies or a full waiver of pediatric studies included?	xx			
If studies or full waiver not included, is a request for full waiver of pediatric studies OR a request for partial waiver and/or deferral with a pediatric plan included? ***If no, request in 74-day letter***	XX			
If a request for full waiver/partial waiver/deferral is included, does the application contain the certification(s) required under 21 CFR 314.55(b)(1), (c)(2), (c)(3)/21 CFR 601.27(b)(1), (c)(2), (c)(3) ***If no, request in 74-day letter***	XX			
BPCA (NDAs/NDA efficacy supplements only): Is this submission a complete response to a pediatric Written Request? ***If yes, notify Pediatric Exclusivity Board RPM (pediatric exclusivity determination is required)***		XX		

Proprietary Name	**YES**	**NO**	**NA**	**Comment**
Is a proposed proprietary name submitted? ***If yes, ensure that it is submitted as a separate document and routed directly to OSE/DMEPA for review.***	XX			
Prescription Labeling	☐ **Not applicable**			
Check all types of labeling submitted.	☒ Package Insert (PI) ☐ Patient Package Insert (PPI) ☐ Instructions for Use (IFU) ☒ Medication Guide (MedGuide) ☒ Carton labels ☒ Immediate container labels ☐ Diluent ☐ Other (specify)			
	YES	**NO**	**NA**	**Comment**
Is Electronic Content of Labeling (COL) submitted in SPL format? ***If no, request in 74-day letter.***	XX			
Is the PI submitted in PLR format?	XX			
If PI not submitted in PLR format, was a waiver or deferral requested before the application was received or in the submission? **If requested before application was submitted**, what is the status of the request? ***If no waiver or deferral, request PLR format in 74-day letter.***			XX	
All labeling (PI, PPI, MedGuide, IFU, carton and immediate container labels) consulted to DDMAC?	XX			
MedGuide, PPI, IFU (plus PI) consulted to OSE/DRISK? (*send WORD version if available*)	xx			
REMS consulted to OSE/DRISK?	xx			
Carton and immediate container labels, PI, PPI sent to OSE/DMEPA?	XX			
OTC Labeling	☒ **Not Applicable**			
Check all types of labeling submitted.	☐ Outer carton label ☐ Immediate container label ☐ Blister card ☐ Blister backing label ☐ Consumer Information Leaflet (CIL) ☐ Physician sample ☐ Consumer sample ☐ Other (specify)			
	YES	**NO**	**NA**	**Comment**
Is electronic content of labeling (COL) submitted? ***If no, request in 74-day letter.***				

Are annotated specifications submitted for all stock keeping units (SKUs)? ***If no, request in 74-day letter.***				
If representative labeling is submitted, are all represented SKUs defined? ***If no, request in 74-day letter.***				
All labeling/packaging, and current approved Rx PI (if switch) sent to OSE/DMEPA?				
Consults	**YES**	**NO**	**NA**	**Comment**
Are additional consults needed? (e.g., IFU to CDRH; QT study report to QT Interdisciplinary Review Team) ***If yes, specify consult(s) and date(s) sent:***				

Meeting Minutes/SPAs	**YES**	**NO**	**NA**	**Comment**
End-of Phase 2 meeting(s)? **Date(s):** ***If yes, distribute minutes before filing meeting***	xx			
Pre-NDA/Pre-BLA/Pre-Supplement meeting(s)? **Date(s):** August 24, 2007 ***If yes, distribute minutes before filing meeting***	XX			
Any Special Protocol Assessments (SPAs)? **Date(s):** ***If yes, distribute letter and/or relevant minutes before filing meeting***		XX		

[1] http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/ucm072349.pdf

ATTACHMENT

MEMO OF FILING MEETING

DATE: May 4, 2010

BLA/NDA/Supp #: 22544

PROPRIETARY NAME: Gralise

ESTABLISHED/PROPER NAME: Gabapentin Tablets

DOSAGE FORM/STRENGTH: 300 and 600 mg

APPLICANT: Abbott Products

PROPOSED INDICATION(S)/PROPOSED CHANGE(S): management of postherpetic neuralgia

BACKGROUND: This is a 505(b)(2) application. This is a standard application.

REVIEW TEAM:

Discipline/Organization	Names		Present at filing meeting? (Y or N)
Regulatory Project Management	RPM:	Allison Meyer	Y
	CPMS/TL:	Parinda Jani	N
Cross-Discipline Team Leader (CDTL)	Ellen Fields		Y
Clinical	Reviewer:	Tim Jiang	Y
	TL:	Ellen Fields	
Social Scientist Review (*for OTC products*)	Reviewer:	N/A	
	TL:	N/A	
OTC Labeling Review (*for OTC products*)	Reviewer:	N/A	
	TL:	N/A	
Clinical Microbiology (*for antimicrobial products*)	Reviewer:	N/A	

Clinical Pharmacology	Reviewer:	Suresh Naraharansetti	Y
	TL:	Suresh Doddapaneni	N
Biostatistics	Reviewer:	Yongman Kim	Y
	TL:	Dionne Price	Y
Nonclinical (Pharmacology/Toxicology)	Reviewer:	Armaghan Emami	Y
	TL:	Adam Wasserman	Y
Statistics (carcinogenicity)	Reviewer:	N/A	
	TL:	N/A	
Immunogenicity (assay/assay validation) *(for BLAs/BLA efficacy supplements)*	Reviewer:	N/A	
	TL:	N/A	
Product Quality (CMC)	Reviewer:	Yong Hu	Y
	TL:	Danae Christodoulou	Y
Quality Microbiology *(for sterile products)*	Reviewer:	N/A	Y
	TL:	N/A	
CMC Labeling Review *(for BLAs/BLA supplements)*	Reviewer:	N/A	
	TL:	N/A	
Facility Review/Inspection	Reviewer:	TBD	N
	TL:	TBD	N
OSE/DMEPA (Carton & Container)	Reviewer:	Carlos Mena-Grillaska	N
	TL:	Carol Holquist	N
OSE/DRISK (REMS)	Reviewer:	Shawna Hutchins	N
	TL:	N/A	N
Bioresearch Monitoring (DSI)	Reviewer:	N/A	
	TL:	N/A	

Other reviewers	Patrick Marroum, Biopharm Sandra Suarez, Biopharm Marty Pollock	N Y
Other attendees	Cherye Millburn	Y

FILING MEETING DISCUSSION:

GENERAL • 505(b)(2) filing issues? **If yes,** list issues:	☐ Not Applicable ☐ YES ☒ NO
• Per reviewers, are all parts in English or English translation? **If no**, explain:	☒ YES ☐ NO
• Electronic Submission comments **List comments**:	☒ Not Applicable
CLINICAL **Comments**:	☐ Not Applicable ☒ FILE ☐ REFUSE TO FILE ☒ Review issues for 74-day letter
• Clinical study site(s) inspections(s) needed? **If no,** explain:	☒ YES ☐ NO

• If the application is affected by the AIP, has the division made a recommendation regarding whether or not an exception to the AIP should be granted to permit review based on medical necessity or public health significance? **Comments**:	☒ Not Applicable ☐ YES ☐ NO
CLINICAL MICROBIOLOGY **Comments**:	☒ Not Applicable ☐ FILE ☐ REFUSE TO FILE ☐ Review issues for 74-day letter
CLINICAL PHARMACOLOGY **Comments**:	☐ Not Applicable ☒ FILE ☐ REFUSE TO FILE ☒ Review issues for 74-day letter
• Clinical pharmacology study site(s) inspections(s) needed?	☐ YES ☒ NO
BIOSTATISTICS **Comments**:	☐ Not Applicable ☒ FILE ☐ REFUSE TO FILE ☐ Review issues for 74-day letter
NONCLINICAL (PHARMACOLOGY/TOXICOLOGY) **Comments**:	☐ Not Applicable ☒ FILE ☐ REFUSE TO FILE ☒ Review issues for 74-day letter
IMMUNOGENICITY (BLAs/BLA efficacy supplements only) **Comments**:	☒ Not Applicable ☐ FILE ☐ REFUSE TO FILE ☐ Review issues for 74-day letter
PRODUCT QUALITY (CMC) **Comments**:	☐ Not Applicable ☒ FILE ☐ REFUSE TO FILE ☒ Review issues for 74-day letter

Environmental Assessment • Categorical exclusion for environmental assessment (EA) requested? **If no**, was a complete EA submitted? **If EA submitted**, consulted to EA officer (OPS)? **Comments**:	☐ Not Applicable ☒ YES ☐ NO ☐ YES ☐ NO ☐ YES ☐ NO
Quality Microbiology (for sterile products) • Was the Microbiology Team consulted for validation of sterilization? (**NDAs/NDA supplements only**) **Comments**: comments in 74-day letter	☒ Not Applicable ☐ YES ☐ NO
Facility Inspection • Establishment(s) ready for inspection? ▪ Establishment Evaluation Request (EER/TBP-EER) submitted to DMPQ? **Comments**:	☐ Not Applicable ☒ YES ☐ NO ☒ YES ☐ NO
Facility/Microbiology Review (BLAs only) **Comments**:	☒ Not Applicable ☐ FILE ☐ REFUSE TO FILE ☐ Review issues for 74-day letter
CMC Labeling Review (BLAs/BLA supplements only) **Comments**:	☒ Not Applicable ☐ Review issues for 74-day letter

REGULATORY PROJECT MANAGEMENT	
Signatory Authority: Bob Rappaport **21st Century Review Milestones** (optional): Mid-Cycle = August 26, 2010 Wrap-Up = November 30, 2010 Labeling Comments and PMRs due to Sponsor December 17, 2010 Action Goal Date = January 29, 2011 PDUFA Date = January 30, 2011	
REGULATORY CONCLUSIONS/DEFICIENCIES	
☐	The application is unsuitable for filing. Explain why:
☒	The application, on its face, appears to be suitable for filing. Review Issues: ☐ No review issues have been identified for the 74-day letter. ☒ Review issues have been identified for the 74-day letter. List (optional): CMC and Nonclinical Review Classification: ☒ Standard Review ☐ Priority Review
ACTIONS ITEMS	
☒	Ensure that the review and chemical classification properties, as well as any other pertinent properties (e.g., orphan, OTC) are correctly entered into tracking system.
☐	If RTF, notify everybody who already received a consult request, OSE PM, and Product Quality PM (to cancel EER/TBP-EER).
☐	If filed, and the application is under AIP, prepare a letter either granting (for signature by Center Director) or denying (for signature by ODE Director) an exception for review.
☐	BLA/BLA supplements: If filed, send 60-day filing letter
☐	If priority review: • notify sponsor in writing by day 60 (For BLAs/BLA supplements: include in 60-day filing letter; For NDAs/NDA supplements: see CST for choices) • notify DMPQ (so facility inspections can be scheduled earlier)
☒	Send review issues/no review issues by day 74 – To be sent by July 19, 2010
☒	Other – Request Dosing device samples from the Sponsor to go to CMC, DMEPA, and Clinical disciplines.

Appendix A (NDA and NDA Supplements only)

NOTE: The term "original application" or "original NDA" as used in this appendix denotes the NDA submitted. It does not refer to the reference drug product or "reference listed drug."

An original application is likely to be a 505(b)(2) application if:

(1) it relies on published literature to meet any of the approval requirements, and the applicant does not have a written right of reference to the underlying data. If published literature is cited in the NDA but is not necessary for approval, the inclusion of such literature will not, in itself, make the application a 505(b)(2) application,
(2) it relies for approval on the Agency's previous findings of safety and efficacy for a listed drug product and the applicant does not own or have right to reference the data supporting that approval, or
(3) it relies on what is "generally known" or "scientifically accepted" about a class of products to support the safety or effectiveness of the particular drug for which the applicant is seeking approval. (Note, however, that this does not mean *any* reference to general information or knowledge (e.g., about disease etiology, support for particular endpoints, methods of analysis) causes the application to be a 505(b)(2) application.)

Types of products for which 505(b)(2) applications are likely to be submitted include: fixed-dose combination drug products (e.g., heart drug and diuretic (hydrochlorothiazide) combinations); OTC monograph deviations (see 21 CFR 330.11); new dosage forms; new indications; and, new salts.

An efficacy supplement can be either a (b)(1) or a (b)(2) regardless of whether the original NDA was a (b)(1) or a (b)(2).

An efficacy supplement is a 505(b)(1) supplement if the supplement contains all of the information needed to support the approval of the change proposed in the supplement. For example, if the supplemental application is for a new indication, the supplement is a 505(b)(1) if:

(1) The applicant has conducted its own studies to support the new indication (or otherwise owns or has right of reference to the data/studies),

(2) No additional information beyond what is included in the supplement or was embodied in the finding of safety and effectiveness for the original application or previously approved supplements is needed to support the change. For example, this would likely be the case with respect to safety considerations if the dose(s) was/were the same as (or lower than) the original application, and.

(3) All other “criteria” are met (e.g., the applicant owns or has right of reference to the data relied upon for approval of the supplement, the application does not rely

for approval on published literature based on data to which the applicant does not have a right of reference).

An efficacy supplement is a 505(b)(2) supplement if:

(1) Approval of the change proposed in the supplemental application would require data beyond that needed to support our previous finding of safety and efficacy in the approval of the original application (or earlier supplement), and the applicant has not conducted all of its own studies for approval of the change, or obtained a right to reference studies it does not own. For example, if the change were for a new indication AND a higher dose, we would likely require clinical efficacy data and preclinical safety data to approve the higher dose. If the applicant provided the effectiveness data, but had to rely on a different listed drug, or a new aspect of a previously cited listed drug, to support the safety of the new dose, the supplement would be a 505(b)(2),

(2) The applicant relies for approval of the supplement on published literature that is based on data that the applicant does not own or have a right to reference. If published literature is cited in the supplement but is not necessary for approval, the inclusion of such literature will not, in itself, make the supplement a 505(b)(2) supplement, or

(3) The applicant is relying upon any data they do not own or to which they do not have right of reference.

If you have questions about whether an application is a 505(b)(1) or 505(b)(2) application, consult with your OND ADRA or OND IO.

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

/s/

ALLISON MEYER
01/25/2011

MEMORANDUM

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Food and Drug Administration
Center for Drug Evaluation and Research
Division of Drug Marketing, Advertising, and Communications

****PRE-DECISIONAL AGENCY MEMO****

Date: January 14, 2011

To: Allison Meyer – Senior Regulatory Health Project Manager
Division of Anesthesia, and Analgesia Products (DAAP)

From: Mathilda Fienkeng – Regulatory Review Officer
Kathleen Klemm – Regulatory Review Officer
Division of Drug Marketing, Advertising, and Communications (DDMAC)

CC: Lisa Hubbard – Professional Group Leader
Shefali Doshi – DTC Group Leader
Twyla Thompson – Regulatory Review Officer
DDMAC

Subject: **DDMAC draft labeling comments**
NDA 022544 GRALISE (gabapentin) tablets

DDMAC has reviewed the proposed product labeling (PI) for GRALISE (gapapentin) tablets (Gralise) submitted for DDMAC review on May 11, 2010.

The following comments are provided using the updated proposed PI sent via email on January 13, 2011, by Allison Meyer. DDMAC's comments on the proposed medication guide will be provided under separate cover. If you have any questions about DDMAC's comments, please do not hesitate to contact us.

17 Pages of Draft Labeling have been Withheld in Full as b4 (CCI/TS) immediately following this page.

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/s/

KATHLEEN KLEMM
01/14/2011

MATHILDA K FIENKENG
01/14/2011

MEMORANDUM

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Food and Drug Administration
Center for Drug Evaluation and Research
Division of Drug Marketing, Advertising, and Communications

PRE-DECISIONAL AGENCY MEMO

Date: January 14, 2011

To: Allison Meyer – Regulatory Project Manager
Division of Anesthesia and Analgesia Products
(DAAP)

From: Twyla Thompson – Regulatory Review Officer
Division of Drug Marketing, Advertising, and
Communications (DDMAC)

Subject: **DDMAC Draft Medication Guide Comments**
NDA 022544 GRALISE (gabapentin) tablets

DDMAC has reviewed the proposed Medication Guide for GRALISE (gabapentin) tablets, submitted for consult on May 11, 2010.

The following comments are provided using the updated Medication Guide sent via email on January 13, 2011 by Allison Meyer. DDMAC's comments on the proposed product labeling (PI) will be issued under separate cover. If you have any questions about DDMAC's comments, please do not hesitate to contact us.

4 Pages of Draft Labeling have been Withheld in Full as b4 (CCI/TS) immediately following this page.

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/s/

TWYLA N THOMPSON
01/14/2011

Department of Health and Human Services

Public Health Service

Food and Drug Administration

Center for Drug Evaluation and Research

Office of Surveillance and Epidemiology

Date:	January 7, 2011
Application Type/Number:	NDA 022544
To:	Bob Rappaport, MD, Director Division of Anesthesia and Analgesia Products
Thru:	Carlos M. Mena-Grillasca, RPh., Team Leader Denise Toyer, PharmD, Deputy Director Carol Holquist, Director Division of Medication Error Prevention and Analysis (DMEPA)
From:	Judy Park, PharmD, Safety Evaluator Division of Medication Error Prevention and Analysis (DMEPA)
Subject:	Label and Labeling Review
Drug Name(s):	Gralise (Gabapentin) Tablets 300 mg and 600 mg
Applicant/Applicant:	Abbott
OSE RCM #:	2010-847

1 INTRODUCTION

This review responds to a request from the Division of Anesthesia and Analgesia Products for DMEPA's review of the blister and container labels, carton and insert labeling for the proposed Gralise (Gabapentin) tablets to identify areas that could lead to medication errors.

The actual proprietary name was not included in the labels and labeling, therefore, we will not comment on the presentation of the proprietary name until the final version of the labels and labeling with the proprietary name is submitted for review. Also, we note that during the review of the application it was determined that the tablets do not meet the criteria for the extended release dosage form designation.

2 METHODS AND MATERIALS

Using Failure Mode and Effects Analysis,[1] the Division of Medication Error Prevention and Analysis (DMEPA) evaluated the labels and labeling submitted on March 30, 2010 to identify vulnerabilities that could lead to medication errors (see Appendices A through E).

3 CONCLUSION AND RECOMMENDATIONS

Our evaluation of the proposed blister and container labels, carton and insert labeling noted areas of needed improvement in order to minimize the potential for medication errors. We provide recommendations for the insert labeling in Section 3.1 for discussion during the review team's labeling meetings. We request the recommendations for the blister and container labels and carton labeling in Section 3.2 be communicated to the Applicant prior to approval.

Please copy the Division of Medication Error Prevention and Analysis on any communication to the Applicant with regard to this review. If you have further questions or need clarifications on this review, please contact the OSE Regulatory Project Manager, Cherye Milburn at 301-796-2084.

3.1 COMMENTS TO THE DIVISION

A. General Comment

Revise all relevant sections of the package insert labeling to indicate that the dosage form designation for this product is "tablet", (b) (4)

B. Insert Labeling

1. Under *Dosage and Administration* section in Highlights, include the dosing information that is included under the Full Prescribing Information as the first bullet (e.g. Gralise should be titrated to an 1800 mg dose taken orally once daily with the evening meal).
2. Under *Dosage and Administration* sections in Highlights and Full Prescribing Information, and Patient Counseling Information, revise the statement (b) (4) to "Gralise tablets should be swallowed whole. Do not crush, split or chew the tablets."
3. Under *Dosage and Administration* sections in Highlights and Full Prescribing Information, include the statement "Do not use Gralise interchangeably with other gabapentin products (b) (4)

[1] Institute for Healthcare Improvement (IHI). Failure Modes and Effects Analysis. Boston. IHI:2004.

4. Under *How Supplied* section, include the total number of tablets in the carton under the description of the unit-dose blisters.

5. In the Medication Guide, Under *How Should I take Gralise?* section, revise the statement [redacted] to "Gralise tablets should be swallowed whole. Do not crush, split or chew the tablets."

3.2 COMMENTS TO THE APPLICANT

A. General Comments

1. The actual proprietary name was not included in the labels and labeling, therefore, we will not comment on the presentation of the proprietary name until the final version of the labels and labeling with the proprietary names are submitted for review.

2. Per 21 CFR 201.10(g)(2), ensure that the established name is at least half the size of the proprietary name and have the prominence commensurate with the prominence of the proprietary name, taking into account all pertinent factors, including typography, layout, contrast, and other printing features

3. Remove all [redacted] dosage form references. The dosage form designation for Gralise is "tablets".

4. Increase the prominence of the strength (i.e. font size). Also, consider revising the font type used, the curren [redacted] font used is difficult to read.

5. Remove the inactive ingredients list as this information is not required for oral products and crowds the label.

6. Revise the statement [redacted] to "See prescribing information…"

7. Provide adequate color differentiation between the 15 days sample pack and the 30 days starter pack. As currently presented they look almost identical and could be a source of confusion and selection error.

[redacted]

C. Sample Pack (15 days) and Starter Pack (30 days) Labels

1. Revise the color scheme used for the presentation of the days of the week and the "professional sample – not for resale" statements. As currently presented, the yellow font over an orange background color scheme is difficult to read.

2. Delete the list of inactive ingredients as this is not required for solid oral dosage forms. This will provide space for implementation of comments E.3., E.4., and E.5.

3. Add the trade name and established name as it appears on "Days 1 to 7" to the other cards (i.e. "Days 7 to 14", "Days 15 to 22", and "Days 23 to 30"). In case the cards get separated this will ensure that the product will remain labeled.

4. Include the statement "Do not use Gralise interchangeably with other gabapentin products [redacted]

[redacted] on the Principal Display Panel.

5. Delete the strength statement "300 mg & 600 mg" from the established name and place below the established name as presented in the following example:

This 15 days sample pack of Gralise includes the following:
[redacted] 300 mg tablets
Twenty-four 600 mg tablets

6. Place the strength next to each blister on the card so that every tablet is identified.

D. Container Label (300 mg and 600 mg; bottles of 90 and 300 tablets)

1. If space permits, include the statement "Do not use Gralise interchangeably with other gabapentin products [redacted]
At a minimum you should include the statement "Do not use Gralise interchangeably with other gabapentin products" on the Principal Display Panel.
2. Decrease the prominence and relocate the "Rx only" statements to the side panel. As currently presented it competes in prominence with other more important information such as the strength.
3. Include the statements, "Swallow table whole. Do not crush, split or chew the tablet."
4. Consider deleting the inactive ingredients information to allow for the implementation of comments C.1. and C.3.

E. Blister Labels

See general comments

F. Blister Carton Labeling (5 cards/10 tablets each)

1. Include the statement "Do not use Gralise interchangeably with other gabapentin products [redacted] on the Principal Display Panel.
2. Include a statement on the principal display panel for pharmacists to dispense Medication Guides with the product [redacted]. Also, make sure that enough Medication Guides are provided with each packaging presentation.
3. Include the statements, "Swallow tablet whole. Do not crush, split or chew the tablet."

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/s/

CARLOS M MENA-GRILLASCA
01/07/2011

CAROL A HOLQUIST on behalf of DENISE P TOYER
01/07/2011

CAROL A HOLQUIST
01/07/2011

Department of Health and Human Services
Public Health Service
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Surveillance and Epidemiology

PATIENT LABELING REVIEW

Date:	**December 17, 2010**
To:	Bob Rappaport, M.D., Director **Division of Anesthesia and Analgesia Products (DAAP)**
Through:	Sharon Mills, B,S.N., R.N., CCRP Senior Patient Labeling Reviewer **Division of Risk Management (DRISK)** Melissa Hulett, M.S.B.A., B.S.N., R.N. Patient Labeling Reviewer **Division of Risk Management (DRISK)**
From:	Shawna Hutchins, M.P.H., B.S.N., R.N. Patient Labeling Reviewer **Division of Risk Management (DRISK)**
Subject:	DRISK Review of Patient Labeling (Medication Guide)
Drug Name (established name):	TRADENAME (gabapentin extended release)
Dosage Form and Route:	Tablets
Application Type/Number:	NDA 22-544
Applicant:	Abbott Products Inc.
OSE RCM #:	2010-1008

1 INTRODUCTION

This review is written in response to a request by the Division of Anesthesia and Analgesia Products (DAAP) for the Division of Risk Management (DRISK) to review the Applicant's proposed Medication Guide (MG) for TRADENAME (gabapentin extended release) tablets. Abbott Products, Inc., submitted a New Drug Application, NDA 22-544, on March 30, 2010 for TRADENAME (gabapentin extended release) tablets. The proposed indication for TRADENAME (gabapentin extended release) tablets is in the management of postherpetic neuralgia. This application is submitted under section 505 (b)(2) of the FD&C Act. The applicant is relying on the Review Division's findings of safety and efficacy established for Neurontin (gabapentin).

The proposed REMS is being reviewed by DRISK and will be provided to DAAP under separate cover.

2 MATERIAL REVIEWED

- Draft TRADENAME (gabapentin extended release) tablets Medication Guide (MG), received on March 30, 2010 and sent to DRISK on December 13, 2010.
- Draft TRADENAME (gabapentin extended release) tablets prescribing information (PI), received March 30, 2010, revised by the Review Division throughout the current review cycle, and received by DRISK on December 13, 2010.
- Approved Neurontin (gabapentin) comparator labeling dated October 11, 2010.

3 REVIEW METHODS

In 2008 the American Society of Consultant Pharmacists Foundation (ASCP) in collaboration with the American Foundation for the Blind (AFB) published *Guidelines for Prescription Labeling and Consumer Medication Information for People with Vision Loss*. The ASCP and AFB recommended using fonts such as Verdana, Arial or APHont to make medical information more accessible for patients with vision loss. We have reformatted the MG document using the Verdana font, size 11.
In our review of the MG we have:

- simplified wording and clarified concepts where possible
- ensured that the MG is consistent with the prescribing information (PI)
- removed unnecessary or redundant information
- ensured that the MG meets the Regulations as specified in 21 CFR 208.20
- ensured that the MG meets the criteria as specified in FDA's Guidance for Useful Written Consumer Medication Information (published July 2006)

- ensured that the MG is consistent with the approved comparator labeling where applicable.

4 CONCLUSIONS

The MG is acceptable with our recommended changes.

5 RECOMMENDATIONS

- Please send these comments to the Applicant and copy DRISK on the correspondence.
- Our annotated versions of the MG are appended to this memo. Consult DRISK regarding any additional revisions made to the PI to determine if corresponding revisions need to be made to the MG.

Please let us know if you have any questions.

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/s/

SHAWNA L HUTCHINS
12/17/2010

SHARON R MILLS
12/17/2010
I concur

M E M O R A N D U M

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
CENTER FOR DRUG EVALUATION AND RESEARCH

CLINICAL INSPECTION SUMMARY

DATE: November 30, 2010

TO: Allison Meyer, Regulatory Project Manager
Timothy T. Jiang, Medical Officer
Division of Anesthesia and Analgesia Products (DAAP)

FROM: Susan Leibenhaut, M.D.
Good Clinical Practice Branch II
Division of Scientific Investigations

THROUGH: Tejashri Purohit-Sheth, M.D.
Branch Chief
Good Clinical Practice Branch II
Division of Scientific Investigations

SUBJECT: Evaluation of Clinical Inspections

NDA: 022544

APPLICANT: Abbott Products, Inc.

DRUG: Gralise™ (gabapentin extended release)

NME: No

THERAPEUTIC CLASSIFICATION: Standard

INDICATION: Management of postherpetic neuralgia (PHN)

CONSULTATION REQUEST DATE: May 11, 2010

DIVISION ACTION GOAL DATE: January 30, 2010
PDUFA DATE: January 30, 2010

I. BACKGROUND:

Abbott Products, Inc. submitted NDA 022544, a 505(b)(2) application for the product Gabapentin Extended Release, a once-daily, sustained release formulation of gabapentin for the indication of management of postherpetic neuralgia (PHN). A single Phase 3 trial, Protocol 81-0062 entitled "A Phase 3 Multi-Center, Randomized, Double-Blind, Placebo-Controlled Study of the Safety and Efficacy of Once-Daily Gabapentin Extended Release (G-ER) Tablets in the Treatment of Patients with Postherpetic Neuralgia" demonstrated efficacy in support of this application. For this protocol, subjects entered pain scores, the primary endpoint, into an electronic diary provided by the CRO (b) (4). The primary endpoint data were verified by comparing the listings in the NDA with a CD of the electronic diary data provided by (b) (4) to the clinical site at the end of the study.

Three domestic clinical investigators were inspected in support of this application due to relatively high enrollment as well as large number of protocol violations.

II. RESULTS (by Site):

Name of CI, IRB, or Sponsor & Location	Protocol # and # of Subjects screened (s)/enrolled (e)/ Completed (c)	Inspection Date	Final Classification
CI #1 Shisuka Malhotra, M.D. Neuro-Behavioral Clinical Research 4825 Higbee Ave.NW, Suite 102 Canton, OH 44718	Protocol 81-0062 s 19/e 9/c 3	October 4 to 14, 2010	VAI
CI #2 Daniel Koontz, M.D. Palmetto Institute of Clinical Research, Inc. 323 Lebby Street Pelzer, SC 29669	Protocol 81-0062/ s 35/e 22/c 19	October 19 to 26, 2010	Pending (Preliminary classification NAI)
CI#3 Alan Rauba, M.D. Jefferson City Medical Group 1241 West Stadium Boulevard Jefferson City, MO 65109	Protocol 81-0062/ s 16/e 12/c 11	October 13 to 15, 2010	Pending (Preliminary classification NAI)

Key to Classifications
NAI = No deviation from regulations.
VAI = Deviation(s) from regulations.
OAI = Significant deviations from regulations.
Pending = Preliminary classification based on information in 483 or preliminary communication with the field; EIR has not been received from the field and complete review of EIR is pending.

1. Shisuka Malhotra, M.D. Neuro-Behavioral Clinical Research
4825 Higbee Ave.NW, Suite 102, Canton, OH 44718

a. **What was inspected**: At this site, 19 subjects were screened, 10 subjects were randomized to the double-blind portion of the study, and 3 subjects completed the entire study. An audit of the 10 randomized subjects' records was conducted, and the reasons for screen failure were verified for the 9 subjects that were not randomized. Source data consisted of office records, worksheets provided by the sponsor, copies of protocol specified test results and the CD of the electronic diary data provided by (b) (4) to the clinical site at the end of the study. Source data concerning eligibility, concomitant medications, adverse events, and study drug dosing were compared to the line listings and the case report forms.

b. **General observations/commentary**: The primary endpoint data were verified and there was no evidence of under-reporting of AEs. A Form FDA 483 was issued to Dr. Malhotra for the regulatory violation of failure to adhere to the protocol in the following instances:
   1. The protocol required that subjects have post herpetic neuralgia (PHN) for at least 6 months prior to study enrollment. Subject 052009 was enrolled after having only 5 months of PHN.
   2. Dose tapering medications were dispensed to Subject 052007 during the randomization visits and were taken during the second week of the study instead of at the end of the treatment period.
   3. The protocol required that subjects taking NSAIDs for co-morbid conditions be on stable doses of these medications for at least 30 days prior to enrollment. Subjects 052001 and 052003 were not on stable doses of the NSAID prior to enrollment.

   During the closeout meeting, Dr. Malhotra adequately responded to the inspection findings by presenting documents related to corrective actions that she implemented in the past 2 years, after Protocol 81-0062 was conducted, to help insure that the observations that are listed on the Form FDA 483 do not occur in the future.

c. **Assessment of data integrity**: The violations noted above are unlikely to impact data reliability as they do not appear to be systemic and are not widespread. The study appears to have been conducted adequately, and the data generated by this site may be used in support of the respective indication.

2. Daniel Koontz, M.D., Palmetto Institute of Clinical Research, Inc.
323 Lebby Street, Pelzer, SC 29669

Note: Observations noted for this site are based on communications with the FDA investigator. An inspection summary addendum will be generated if conclusions change

upon receipt and review of the establishment inspection report (EIR).

a. **What was inspected**: At this site, 35 subjects were screened, 22 subjects were enrolled, and 19 subjects completed the study. An audit of the 22 subjects' records was conducted. Source data consisted of office records, worksheets provided by the sponsor, copies of protocol specified test results and the CD of the electronic diary data provided by (b) (4) to the clinical site at the end of the study. Source data concerning eligibility, concomitant medications, adverse events, and study drug dosing were compared to the line listings and the case report forms.

b. **General observations/commentary**: The primary endpoint data were verified and there was no evidence of under-reporting of AEs. No significant violations were noted and a Form FDA 483 was not issued.

c. **Assessment of data integrity:** The study appears to have been conducted adequately, and the data generated by this site appear acceptable in support of the respective indication.

3. Alan Rauba, M.D., Jefferson City Medical Group
1241 West Stadium Boulevard, Jefferson City, MO 65109

Note: Observations noted for this site are based on communications with the FDA investigator. An inspection summary addendum will be generated if conclusions change upon receipt and review of the EIR.

a. **What was inspected**: At this site, 16 subjects were screened, 12 subjects were enrolled, and 11 subjects completed the study. An audit of the 12 subjects' records was conducted. Source data consisted of office records, worksheets provided by the sponsor, copies of protocol specified test results and the CD of the electronic diary data provided by (b) (4) to the clinical site at the end of the study. Source data concerning eligibility, concomitant medications, adverse events, and study drug dosing were compared to the line listings and the case report forms.

b. **General observations/commentary**: The primary endpoint data were verified and there was no evidence of under-reporting of AEs. No significant violations were noted and a Form FDA 483 was not issued.

c. **Assessment of data integrity:** The study appears to have been conducted adequately, and the data generated by this site appear acceptable in support of the respective indication.

IV. OVERALL ASSESSMENT OF FINDINGS AND RECOMMENDATIONS

Three clinical investigator sites were inspected in support of this NDA. The primary endpoint data were verified and there was no evidence of underreporting of adverse events. Inspection of Dr. Malhotra's site noted violations that did not appear to be systemic or widespread and no significant violations were noted at the other two clinical sites. Although some regulatory violations were noted as per above, these are considered isolated occurrences and are unlikely to significantly impact the integrity of primary efficacy and safety data overall. The data are considered reliable in support of the application.

Note: The final classifications for the inspections of Drs. Koontz and Rauba are pending. An addendum to this clinical inspection summary will be forwarded to the review division if additional observations of clinical and regulatory significance are discovered after receipt and review of EIRs for these inspections.

{See appended electronic signature page}

Susan Leibenhaut, M. D.
Good Clinical Practice Branch II
Division of Scientific Investigations

CONCURRENCE:

{See appended electronic signature page}

Tejashri Purohit-Sheth, M.D.
Branch Chief
Good Clinical Practice Branch II
Division of Scientific Investigations

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/s/

SUSAN LEIBENHAUT
12/01/2010

TEJASHRI S PUROHIT-SHETH
12/01/2010

DSI CONSULT: Request for Clinical Inspections

Date: May 3, 2010

To: Constance Lewin, M.D., M.P.H, Branch Chief, GCP1
Tejashri Purohit-Sheth, M.D., Branch Chief (Acting), GCP2
Susan Leibenhaut, M.D.
Division of Scientific Investigations, HFD-45
Office of Compliance/CDER

Through: Timothy T. Jiang, M.D.
Medical Officer

Ellen Field, M.D., M.P.H.
Medical Team Leader

From: Allison Meyer
Division of Anesthesia and Analgesia Products

Subject: **Request for Clinical Site Inspections**

I. General Information

Application#: NDA-022544
Applicant/ Applicant contact information:
Michael F. Hare
Assistant Director, Regulatory Affairs
Abbott (formerly Solvay Pharmaceuticals, Inc.)
Marietta, GA 30062
T: 770-578-5620
C: 678-938-8942
E: michael.hare@solvay.com

Drug Proprietary Name: Gabapentin ER
NME or Original BLA: No
Review Priority: Standard

Study Population includes < 17 years of age: No
Is this for Pediatric Exclusivity: No

Proposed New Indication(s): Postherpetic neuralgia

PDUFA:
Action Goal Date: January 30, 2011
Inspection Summary Goal Date: November 30, 2010

II. Protocol/Site Identification

A Phase 3 Multi-Center, Randomized, Double-Blind, Placebo-Controlled Study of the Safety and Efficacy of Once-Daily Gabapentin Extended Release (G-ER) Tablets in the Treatment of Patients with Postherpetic Neuralgia

Site # (Name,Address, Phone number, email, fax#)	Protocol ID	Number of Subjects	Indication
013 (Craig Curtis Compass Research, LLC 100 West Gore Street, Suite 202 Orlando, FL 32806 T: (407) 590-9400 Fax: (407) 426-9290)	81-0062	Screened: 17 Patients Entered: 12 Completers: 8 Protocol Violations (Minor): 22 Protocol Violations (Major): 1	Postherpetic Neuralgia
024 (Alan Rauba Jefferson City Medical Group 1241 West Stadium Boulevard Jefferson City, MO 65109 T: (573) 556-7785 Fax: (573) 556-1785)	81-0062	Screened: 16 Patients Entered: 12 Completers: 11 Protocol Violations (Minor): 27 Protocol Violations (Major): 0	Postherpetic Neuralgia
052 (Shisuka Malhotra Neuro-Behavioral Clinical Research 4825 Higbee Ave. NW, Suite 102 Canton, OH 44718 T: (330) 493-1118 Fax: (330) 493-1154)	81-0062	Screened: 19 Patients Entered: 9 Completers: 3 Protocol Violations (Minor): 30 Protocol Violations (Major): 2	Postherpetic Neuralgia
056 (Daniel Koontz Palmetto Institute of Clinical Research, Inc 323 Lebby Street Pelzer, SC 29669 T: (864) 238-2268 Fax: (864) 947-9666)	81-0062	Screened: 35 Patients Entered: 22 Completers: 19 Protocol Violations (Minor): 81 Protocol Violations (Major): 0	Postherpetic Neuralgia

III. Site Selection/Rationale

We assessed investigators and study sites from the Sponsor's pivotal study (81-0062).
We selected the four investigators/study sites because they had both largest patient enrollment and number of protocol deviations.

Domestic Inspections:

Reasons for inspections (please check all that apply):

__X__ Enrollment of large numbers of study subjects
____ High treatment responders (specify):
____ Significant primary efficacy results pertinent to decision-making
____ There is a serious issue to resolve, e.g., suspicion of fraud, scientific misconduct, significant human subject protection violations or adverse event profiles.
____ Other (specify):

International Inspections:

Reasons for inspections (please check all that apply):

____ There are insufficient domestic data
____ Only foreign data are submitted to support an application
____ Domestic and foreign data show conflicting results pertinent to decision-making
____ There is a serious issue to resolve, e.g., suspicion of fraud, scientific misconduct, or significant human subject protection violations.
____ Other (specify) (Examples include: Enrollment of large numbers of study subjects and site specific protocol violations. This would be the first approval of this new drug and most of the limited experience with this drug has been at foreign sites, it would be desirable to include one foreign site in the DSI inspections to verify the quality of conduct of the study).

Five or More Inspection Sites *(delete this if it does not apply)*:
We have requested these sites for inspection (international and/or domestic) because of the following reasons: *state reason(s) and prioritize sites*.

Note: International inspection requests or requests for five or more inspections require sign-off by the OND Division Director and forwarding through the Director, DSI.

IV. Tables of Specific Data to be Verified (if applicable)

Should you require any additional information, please contact Allison Meyer at 301-796-1258 or Timothy Jiang at 301-796-5063.

Concurrence: (as needed)

Ellen Fields, M.D., Medical Team Leader
Timothy Jiang, M.D. Medical Reviewer
_____ Division Director (for foreign inspection requests or requests for 5 or more sites only

Application Type/Number	Submission Type/Number	Submitter Name	Product Name
NDA-22544	ORIG-1	ABBOTT PRODUCTS INC	GABAPENTIN E-R TABLETS

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/s/

ALLISON MEYER
05/11/2010