Approval Package for:

APPLICATION NUMBER:

201517Orig1s000

Trade Name: Morphine Sulfate Oral Solution

Generic Name: Morphine Sulfate Oral Solution

Sponsor: Lannett Holdings, Inc.

Approval Date: 06/23/11

Indications: Management of Moderate to Severe Acute and Chronic Pain in Opioid-Tolerant Patients.
**Contents**

Reviews / Information Included in this NDA Review.

<table>
<thead>
<tr>
<th>Review / Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Approval Letter</td>
<td>X</td>
</tr>
<tr>
<td>Other Action Letters</td>
<td>X</td>
</tr>
<tr>
<td>Labeling</td>
<td>X</td>
</tr>
<tr>
<td>REMS</td>
<td></td>
</tr>
<tr>
<td>Summary Review</td>
<td>X</td>
</tr>
<tr>
<td>Officer/Employee List</td>
<td>X</td>
</tr>
<tr>
<td>Office Director Memo</td>
<td></td>
</tr>
<tr>
<td>Cross Discipline Team Leader Review</td>
<td></td>
</tr>
<tr>
<td>Medical Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Chemistry Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Environmental Assessment</td>
<td></td>
</tr>
<tr>
<td>Pharmacology Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Statistical Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Microbiology Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Clinical Pharmacology/Biopharmaceutics Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Other Reviews</td>
<td>X</td>
</tr>
<tr>
<td>Risk Assessment and Risk Mitigation Review(s)</td>
<td>X</td>
</tr>
<tr>
<td>Proprietary Name Review(s)</td>
<td></td>
</tr>
<tr>
<td>Administrative/Correspondence Document(s)</td>
<td>X</td>
</tr>
</tbody>
</table>
CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:
201517Orig1s000

APPROVAL LETTER
Dear Mr. Sabo:

Please refer to your New Drug Application (NDA) dated February 26, 2010, received March 1, 2010, pursuant to section 505(b)(2) of the Federal Food, Drug, and Cosmetic Act for Morphine Sulfate Oral Solution, 100 mg per 5 mL (20 mg per mL).

We acknowledge receipt of your amendments dated March 26, April 29, June 23, July 1, 9, 15, 16 and 20, August 18, October 1 and 25, November 12 and 17, December 7 and 23, 2010, and April 7 and 19, and May 2, 13 and 27, 2011.


This new drug application provides for the use of Morphine Sulfate Oral Solution, 100 mg per 5 mL (20 mg per mL) for the management of moderate to severe acute and chronic pain in opioid-tolerant patients.

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling text.
CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. Content of labeling must be identical to the enclosed labeling text for the package insert and Medication Guide. Information on submitting SPL files using eLIST may be found in the guidance for industry titled “SPL Standard for Content of Labeling Technical Qs and As” at http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND IMMEDIATE CONTAINER LABELS

Submit final printed carton and container labels that are identical to the enclosed carton and immediate container labels as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry titled “Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008).” Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission “Final Printed Carton and Container Labels for approved NDA 201517.” Approval of this submission by FDA is not required before the labeling is used.

Marketing the product(s) with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

PROPRIETARY NAME

If you intend to have a proprietary name for this product, the name and its use in the labels must conform to the specifications under 21 CFR 201.10 and 201.15. We recommend that you submit a request for a proposed proprietary name review. (See the guidance for industry titled, “Contents of a Complete Submission for the Evaluation of Proprietary Names”, at http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/ucm075068.pdf and “PDUFA Reauthorization Performance Goals and Procedures Fiscal Years 2008 through 2012”.)
REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because none of these criteria apply to your application, you are exempt from this requirement.

RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS

We acknowledge receipt of your submission dated March 1, 2010, amended on March 26, 2010, and November 17, 2010, of a proposed risk evaluation and mitigation strategy (REMS). We have determined that, at this time, a REMS is not necessary for Morphine Sulfate Oral Solution, 100 mg per 5 mL (20 mg per mL), to ensure that its benefits outweigh its risks. We will notify you if we become aware of new safety information and make a determination that a REMS is necessary.

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the package insert to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Drug Marketing, Advertising, and Communications
5901-B Ammendale Road
Beltsville, MD 20705-1266

As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the package insert, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. For instruction on completing the Form FDA 2253, see page 2 of the Form. For more information about submission of promotional materials to the Division of Drug Marketing, Advertising, and Communications (DDMAC), see http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm.

EXPIRATION DATE

An expiration dating period of 18 months is granted to Morphine Sulfate Oral Solution 100 mg per 5 mL (20 mg per mL) in the 30, 120, and 240 mL bottle configurations, at 20°-25°C (68°-77°F); excursions permitted between 15°-30°C (59°-86°F).
REPORTING REQUIREMENTS

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

If you have any questions, call Diana L. Walker, Ph.D., Regulatory Health Project Manager, at (301) 796-4029.

Sincerely,

{See appended electronic signature page}

Sharon H. Hertz, M.D.
Deputy Director
Division of Anesthesia, Analgesia, and Addiction Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

ENCLOSURES:
Package Insert
Medication Guide
Carton and Container Labeling
This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

SHARON H HERTZ
06/23/2011