

**CENTER FOR DRUG EVALUATION AND  
RESEARCH**

*APPLICATION NUMBER:*

**207917Orig1s000**

**PROPRIETARY NAME REVIEW(S)**

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### **PROPRIETARY NAME REVIEW**

Division of Medication Error Prevention and Analysis (DMEPA)  
Office of Medication Error Prevention and Risk Management (OMEPRM)  
Office of Surveillance and Epidemiology (OSE)  
Center for Drug Evaluation and Research (CDER)

**\*\*\* This document contains proprietary information that cannot be released to the public\*\*\***

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<b>Date of This Review:</b>	February 3, 2015
<b>Application Type and Number:</b>	NDA 207917
<b>Product Name and Strength:</b>	Epiduo Forte (adapalene and benzoyl peroxide) Gel, 0.3%/2.5%
<b>Product Type:</b>	Multi-Ingredient Product
<b>Rx or OTC:</b>	Rx
<b>Applicant/Sponsor Name:</b>	Galderma
<b>Submission Date:</b>	November 25, 2014
<b>Panorama #:</b>	2014-44064
<b>DMEPA Primary Reviewer:</b>	Carlos M Mena-Grillasca, RPh
<b>DMEPA Team Leader:</b>	Kendra Worthy, PharmD
<b>DMEPA Associate Director:</b>	Lubna Merchant, MS, PharmD

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## 1 INTRODUCTION

This review evaluates the proposed proprietary name, Epiduo Forte, from a safety and misbranding perspective. The sources and methods used to evaluate the proposed name are outlined in the reference section and Appendix A respectively. The Applicant did not submit an external name study for this proposed proprietary name.

### 1.1 REGULATORY HISTORY

Epiduo (adapalene and benzoyl peroxide) Gel, 0.1%/2.5% (NDA 022320) was approved on December 8, 2008. The proposed proprietary name Epiduo Forte is currently under review for NDA 207917.

### 1.2 PRODUCT INFORMATION

The following product information is provided in the November 25, 2014 proprietary name submission.

Product Name	Epiduo	Epiduo Forte (Proposed)
Initial Approval Date	December 8, 2008	NDA currently under review
Intended Pronunciation	Ep-E-Do-Oh	Ep-E-Do-Oh
Active Ingredient	Adapalene and Benzoyl Peroxide	Adapalene and Benzoyl Peroxide
Indication	Topical treatment of acne vulgaris in patients 9 years of age and older	Topical treatment of acne vulgaris (b) (4)
Route of Administration	Topical	Topical
Dosage Form	Gel	Gel
Strength	0.1%/2.5%	0.3%/2.5%
Dose and Frequency	Apply a thin film to affected areas of the face and/or trunk once daily.	Apply a thin film to affected areas of the face and/or trunk once daily.
How Supplied	45 g tubes and 45 g pumps	2 g and 5 g tubes physician samples; 15 g, 30 g, 45 g, 60 g, and 70 g (b) (4) pumps (b) (4)

Product Name	Epiduo	Epiduo Forte (Proposed)
		(b) (4)
Storage	25°C; excursions permitted to 15° – 30°C (59° – 86°F)	20° – 25°C (68° – 77°F); with excursions permitted to 15° – 30°C (59° – 86°F)
Container Closure	n/a	n/a

## 2 RESULTS

The following sections provide information obtained and considered in the overall evaluation of the proposed proprietary name.

### 2.1 MISBRANDING ASSESSMENT

The Office of Prescription Drug Promotion (OPDP) determined that the proposed name would not misbrand the proposed product. DMEPA concurred with the findings of OPDP's assessment of the proposed name. However, the Division of Dermatology and Dental Products (DDDP) had concerns with the use of the modifier Forte. DDDP's concerns and DMEPA's evaluation are discussed in section 2.2.3.

### 2.2 SAFETY ASSESSMENT

The following aspects were considered in the safety evaluation of the name.

#### 2.2.1 United States Adopted Names (USAN) Search

There is no USAN stem present in the proprietary name<sup>1</sup>.

#### 2.2.2 Components of the Proposed Proprietary Name

This proprietary name is comprised of multiple words; the root name 'Epiduo' and the modifier 'Forte'. The root name, Epiduo, is the approved proprietary name for adapalene and benzoyl peroxide gel 0.1%/2.5%, which is currently marketed. No issues were identified with the root name, Epiduo, in the FAERS search. The applicant is proposing a new formulation for a higher strength (adapalene and benzoyl peroxide gel 0.3%/2.5%). The applicant indicated in their submission that the proposed name, Epiduo Forte, is derived from the currently marketed product Epiduo and the modifier Forte which has been "previously approved by FDA for numerous other drug products that have a formulation based on a previously approved drug and differ only in strength

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<sup>1</sup>USAN stem search conducted on January 19, 2015.

of active or other modifications of the formulation (e.g. FML and FML Forte, Pamine and Pamine Forte, Phrenilin and Phrenilin Forte)”.

The modifier ‘Forte’ is used in currently marketed products and consistently conveys a higher strength product when compared to the root name product alone, with the only exception being Citanest Forte Dental (epinephrine and prilocaine) vs. Citanest Plain Dental (prilocaine), where Forte implies an additional active ingredient (however, Citanest Plain Dental is discontinued). In addition, the definition of ‘Forte’ is ‘one’s strong point’ or ‘in a loud manner’<sup>2</sup>. ‘Forte’ is also used synonymously with strength; all of which is consistent with the use of the modifier Forte to convey a higher strength product. Since the proposed formulation is indeed for a higher strength, we find that the proposed name is not misleading and is consistent with the use of the modifier ‘forte’. Therefore, we consider the use of the modifier ‘Forte’ acceptable for this product.

### **2.2.3 Medication Error Data Selection of Cases**

We searched the FDA Adverse Event Reporting System (FAERS) database using the strategy listed in Table 2 (see Appendix A for a description of FAERS database) for name confusion errors involving Epiduo and various drugs that use the modifier Forte which would be relevant for this review.

<b>Table 2. FAERS Search Strategy</b>	
<b>Date</b>	January 20, 2015
<b>Drug Name(Product Name)</b>	Epiduo Citanest Forte FML Forte Lignospan Forte Norgesic Forte Pamine Forte Parafon Forte DSC Phrenilin Forte Pred Forte Robinul Forte Urso Forte
<b>MedDRA Event Search</b>	Medication Errors-HLGT Product Label Issues-HLT Product Packaging Issues-HLT Product Quality Issues NEC-HLT
<b>Time/Date Limits</b>	None

<sup>2</sup> Per merriam-webster.com website.

Each report was reviewed for relevancy and duplication. Duplicates were merged into a single case. The NCC MERP Taxonomy of Medication Errors was used to code the case outcome and error root causes when provided by the reporter.

After individual review, 39 reports were not included in the final analysis for the following reasons: off-label use, intentional overdoses, wrong dose, expired drug, similar packaging, generic drug ineffective, wrong frequency of administration, dose omission, wrong technique, accidental exposure, generic dispensed when DAW was indicated.

Following exclusions, the search yielded 4 relevant cases of drug name confusion:

- Two potential medication errors:
  - Profen Forte misread instead of Parafon Forte, no additional details provided,
  - Parafon Forte vs. Parafon Forte DSC similarity reported.
- One intercepted medication error where Durafon Forte was filled by the technician instead of Parafon Forte, but the pharmacist caught the error.
- One medication error where Ketorolac ophthalmic drops was administered instead of Pred Forte. The cause was attributed to home medications brought to the hospital and failures in checks.

We note that of the drugs mentioned above only Parafon Forte DSC, Pred Forte, and Ketorolac ophthalmic drops are currently marketed. In addition, none of the cases involved name confusion with Epiduo.

#### ***2.2.4 Comments from Other Review Disciplines at Initial Review***

In response to the OSE, December 12, 2014 e-mail, the Division of Dermatology and Dental Products (DDDP) indicated their concern that that the proposed name Epiduo Forte overstates the efficacy of the drug product and it suggests superiority of the drug product without substantiation. While the new product was statistically superior to vehicle, it was not statistically superior to the approved Epiduo 0.1%/2.5%.

We considered DDDP's concern in our evaluation of the modifier 'forte' and found that the modifier Forte is consistently used in other marketed products to convey a higher strength product. This is consistent with the use of the modifier 'forte' in the proposed name Epiduo Forte. Therefore, DMEPA does not object to the use of the modifier 'forte' in the proposed name. DMEPA's rationale was conveyed to DDDP and they did not provide additional comments or concerns.

### **3 CONCLUSIONS**

The proposed proprietary name is acceptable.

If you have further questions or need clarifications, please contact Janet Anderson, OSE project manager, at 301-796-0675.

### **3.1 COMMENTS TO THE APPLICANT**

We have completed our review of the proposed proprietary name, Epiduo Forte, and have concluded that this name is acceptable.

If any of the proposed product characteristics as stated in your November 25, 2014 submission are altered prior to approval of the marketing application, the name must be resubmitted for review.



## 4 REFERENCES

### 1. *USAN Stems*

[\(<http://www.ama-assn.org/ama/pub/physician-resources/medical-science/united-states-adopted-names-council/naming-guidelines/approved-stems.page>\)](http://www.ama-assn.org/ama/pub/physician-resources/medical-science/united-states-adopted-names-council/naming-guidelines/approved-stems.page)

USAN Stems List contains all the recognized USAN stems.

### 2. *FAERS*

[\(<http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Surveillance/AdverseDrugEffects/default.htm>\)](http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Surveillance/AdverseDrugEffects/default.htm)

The FDA Adverse Event Reporting System (FAERS) is a database that contains information on adverse event and medication error reports submitted to FDA. The database is designed to support the FDA's postmarket safety surveillance program for drug and therapeutic biologic products. The informatic structure of the FAERS database adheres to the international safety reporting guidance issued by the International Conference on Harmonisation. FDA's Office of Surveillance and Epidemiology codes adverse events and medication errors to terms in the Medical Dictionary for Regulatory Activities (MedDRA) terminology. Product names are coded using the FAERS Product Dictionary.

## APPENDICES

### Appendix A

FDA's Proprietary Name Risk Assessment evaluates proposed proprietary names for misbranding and safety concerns.

1. **Misbranding Assessment:** For prescription drug products, OPDP assesses the name for misbranding concerns. . For over-the-counter (OTC) drug products, the misbranding assessment of the proposed name is conducted by DNCE. OPDP or DNCE evaluates proposed proprietary names to determine if the name is false or misleading, such as by making misrepresentations with respect to safety or efficacy. For example, a fanciful proprietary name may misbrand a product by suggesting that it has some unique effectiveness or composition when it does not (21 CFR 201.10(c)(3)). OPDP or DNCE provides their opinion to DMEPA for consideration in the overall acceptability of the proposed proprietary name.
2. **Safety Assessment:** The safety assessment is conducted by DMEPA, and includes the following:
  - a. Preliminary Assessment: We consider inclusion of USAN stems or other characteristics that when incorporated into a proprietary name may cause or contribute to medication errors (i.e., dosing interval, dosage form/route of administration, medical or product name abbreviations, names that include or suggest the composition of the drug product, etc.) See prescreening checklist below in Table 2\*. DMEPA defines a medication error as any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer.<sup>3</sup>

**\*Table 2- Prescreening Checklist for Proposed Proprietary Name**

	Answer the questions in the checklist below. Affirmative answers to any of these questions indicate a potential area of concern that should be carefully evaluated as described in this guidance.
<b>Y/N</b>	<b>Is the proposed name obviously similar in spelling and pronunciation to other names?</b>
	Proprietary names should not be similar in spelling or pronunciation to proprietary names, established names, or ingredients of other products.
<b>Y/N</b>	<b>Are there medical and/or coined abbreviations in the proprietary name?</b>
	Proprietary names should not incorporate medical abbreviations (e.g., QD, BID, or others commonly used for prescription communication) or coined abbreviations that have no established meaning.
<b>Y/N</b>	<b>Are there inert or inactive ingredients referenced in the proprietary name?</b>
	Proprietary names should not incorporate any reference to an inert or inactive ingredient in a way that might create an impression that the ingredient's value is greater than its true functional role in the formulation (21 CFR 201.10(c)(4)).
<b>Y/N</b>	<b>Does the proprietary name include combinations of active ingredients?</b>
	Proprietary names of fixed combination drug products should not include or suggest the name of one or more, but not all, of its active ingredients (see 21 CFR 201.6(b)).

<sup>3</sup> National Coordinating Council for Medication Error Reporting and Prevention.  
<http://www.nccmerp.org/about/MedErrors.html>. Last accessed 10/11/2007.

<b>Y/N</b>	<b>Is there a United States Adopted Name (USAN) stem in the proprietary name?</b>
	Proprietary names should not incorporate a USAN stem in the position that USAN designates for the stem.
<b>Y/N</b>	<b>Is this proprietary name used for another product that does not share at least one common active ingredient?</b>
	Drug products that do not contain at least one common active ingredient should not use the same (root) proprietary name.
<b>Y/N</b>	<b>Is this a proprietary name of a discontinued product?</b>
	Proprietary names should not use the proprietary name of a discontinued product if that discontinued drug product does not contain the same active ingredients.

- b. Comments from Other Review Disciplines: DMEPA requests the Office of New Drugs (OND) and/or Office of Generic Drugs (OGD), ONDQA or OBP for their comments or concerns with the proposed proprietary name, ask for any clinical issues that may impact the DMEPA review during the initial phase of the name review. Additionally, when applicable, at the same time DMEPA requests concurrence/non-concurrence with OPDP's decision on the name. The primary Safety Evaluator addresses any comments or concerns in the safety evaluator's assessment.

The OND/OGD Regulatory Division is contacted a second time following our analysis of the proposed proprietary name. At this point, DMEPA conveys their decision to accept or reject the name. The OND or OGD Regulatory Division is requested to provide any further information that might inform DMEPA's final decision on the proposed name.

Additionally, other review disciplines opinions such as ONDQA or OBP may be considered depending on the proposed proprietary name.

When provided, DMEPA considers external proprietary name studies conducted by or for the Applicant/Sponsor and incorporates the findings of these studies into the overall risk assessment.

The DMEPA primary reviewer assigned to evaluate the proposed proprietary name is responsible for considering the collective findings, and provides an overall risk assessment of the proposed proprietary name.

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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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CARLOS M MENA-GRILLASCA  
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