

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

206966Orig1s000

Trade Name: Xeglyze Lotion, 0.74%.

Generic or Proper Name: abametapir

Sponsor: Dr. Reddy's Laboratories

Approval Date: July 24, 2020

Indication: For the treatment of head lice infestation in patients 6 months of age and older.

CENTER FOR DRUG EVALUATION AND RESEARCH

206966Orig1s000

CONTENTS

Reviews / Information Included in this NDA Review.

Approval Letter	X
Other Action Letters	X
Labeling	X
REMS	
Summary Review	X
Officer/Employee List	X
Office Director Memo	
Cross Discipline Team Leader Review	
Clinical Review(s)	X
Product Quality Review(s)	X
Non-Clinical Review(s)	X
Statistical Review(s)	X
Clinical Microbiology / Virology Review(s)	
Clinical Pharmacology Review(s)	X
Other Reviews	X
Risk Assessment and Risk Mitigation Review(s)	X
Proprietary Name Review(s)	X
Administrative/Correspondence Document(s)	X

**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

206966Orig1s000

APPROVAL LETTER

NDA 206966

NDA APPROVAL

Dr. Reddy's Laboratories
Attention: Hari Nagaradona, PhD
VP and Head of Regulatory Affairs
107 College Road East
Princeton, NJ 08540

Dear Dr. Nagaradona:

Please refer to your new drug application (NDA) dated September 14, 2015, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Xeglyze (abametapir) Lotion, 0.74%.

We acknowledge receipt of your amendment dated November 12, 2019, which constituted a complete response to our August 30, 2016, action letter.

We acknowledge receipt of your major amendment dated May 12, 2020, which extended the goal date by three months.

This new drug application provides for the use of Xeglyze (abametapir) Lotion, 0.74%, for the treatment of head lice infestation in patients 6 months of age and older.

APPROVAL & LABELING

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.

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 FDA.gov.¹ Content of labeling must be identical to the enclosed labeling as well as annual reportable changes not included in the enclosed labeling. Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*.²

¹ <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

² We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND CONTAINER LABELING

Submit final printed carton and container labeling that are identical to the carton and container labeling submitted on June 5, 2020, as soon as they are available, but no more than 30 days after they are printed. Please submit these labeling electronically according to the guidance for industry *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for approved NDA 206966.**” Approval of this submission by FDA is not required before the labeling is used.

ADVISORY COMMITTEE

Your application for Xeglyze was not referred to an FDA advisory committee because the application did not raise significant safety or efficacy issues that were unexpected for a drug of this class.

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), 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 in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric study requirement for ages 0 to 6 months of age because necessary studies are impossible or highly impracticable. This is because head lice infestation is not prevalent in patients 6 months of age and younger. In addition, the product does not represent a meaningful therapeutic benefit over existing therapies for pediatric patients in this age group and is not likely to be used in a substantial number of pediatric patients in this group. The drug product may not be used in a substantial number of patients in the 0 to 6 months age group which would cause studies to be impractical.

We note that you have fulfilled the pediatric studies requirement for ages 6 months and older for this application.

POSTMARKETING REQUIREMENTS UNDER 505(o)

Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act (FDCA) authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to identify an unexpected serious risk in infants with exposure to abametapir through breastmilk.

Furthermore, the active postmarket risk identification and analysis system as available under section 505(k)(3) of the FDCA will not be sufficient to assess these serious risk(s).

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following studies:

- 3898-1 A Clinical Lactation Study: A single dose, pharmacokinetic, open-label, clinical study in lactating women who require treatment with Xeglyze Lotion, 0.74%.

The timetable you submitted on June 19, 2020, states that you will conduct this study according to the following schedule:

Final Protocol Submission: 02/2021

Study Completion: 02/2023

Final Report Submission: 08/2023

FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.³

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to identify an unexpected serious risk of systemic safety in pediatric subjects.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following trials:

³ See the guidance for Industry *Postmarketing Studies and Clinical Trials—Implementation of Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act* (October 2019).

<https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

U.S. Food and Drug Administration

Silver Spring, MD 20993

www.fda.gov

- 3898-2 Conduct a maximal use pharmacokinetic trial of Xeglyze Lotion, 0.74% in 16 pediatric subjects 6 months to 3 years 11 months of age with head lice infestation to fully characterize the concentration time profile of abametapir and metabolite abametapir carboxyl.

The timetable you submitted on June 19, 2020, states that you will conduct this trial according to the following schedule:

Final Protocol Submission: 02/2021

Trial Completion: 02/2023

Final Report Submission: 08/2023

- 3898-3 Conduct a clinical trial in adult subjects to evaluate the potential for Xeglyze Lotion, 0.74% to inhibit the activity of cytochrome P450 3A4 at several time points post dosing. The systemic exposure of abametapir and abametapir carboxyl should be similar to those observed under maximal use conditions in pediatric subjects. Additional drug interaction trials may be needed depending on the results of this trial.

The timetable you submitted on June 19, 2020, states that you will conduct this trial according to the following schedule:

Final Protocol Submission: 08/2023

Trial Completion: 08/2024

Final Report Submission: 02/2025

FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.⁴

Submit clinical protocol(s) to your IND 077510 with a cross-reference letter to this NDA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all final report(s) to your NDA. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate:

Required Postmarketing Protocol Under 505(o), Required Postmarketing Final Report Under 505(o), Required Postmarketing Correspondence Under 505(o).

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR

⁴ See the guidance for Industry *Postmarketing Studies and Clinical Trials—Implementation of Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act* (October 2019).

<https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

U.S. Food and Drug Administration

Silver Spring, MD 20993

www.fda.gov

314.81(b)(2)(vii) requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 314.81(b)(2)(vii) to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 314.81(b)(2)(vii). We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitments:

- 3898-4 Conduct a study to evaluate the long-term storage stability of abametapir carboxyl in plasma stored at -80 °C for duration of at least 1,251 days.

The timetable you submitted on June 19, 2020, states that you will conduct this study according to the following schedule:

Study Completion: 11/2020
Final Report Submission: 02/2021

A final submitted protocol is one that the FDA has reviewed and commented upon, and you have revised as needed to meet the goal of the study or clinical trial.

Submit clinical protocols to your IND 077510 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled **“Postmarketing Commitment Protocol,” “Postmarketing Commitment Final Report,” or “Postmarketing Commitment Correspondence.”**

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. For information about submitting promotional materials, see the

final guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format—Promotional Labeling and Advertising Materials for Human Prescription Drugs*.⁵

As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the Prescribing Information, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at FDA.gov.⁶ Information and Instructions for completing the form can be found at FDA.gov.⁷

REPORTING REQUIREMENTS

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

MEDWATCH-TO-MANUFACTURER PROGRAM

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at FDA.gov.⁸

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biological products qualify for a post approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application.

⁵ For the most recent version of a guidance, check the FDA guidance web page at

<https://www.fda.gov/media/128163/download>.

⁶ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>

⁷ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>

⁸ <http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm>

If you have any questions, call Kimberle Searcy, Regulatory Project Manager, at 240-402-4454.

Sincerely,

{See appended electronic signature page}

Julie G. Beitz, MD
Director
Office of Immunology and Inflammation
Center for Drug Evaluation and Research

ENCLOSURE(S):

- Content of Labeling
 - o Prescribing Information
 - o Patient Package Insert
 - o Instructions for Use
- Carton and Container Labeling

75

This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

JULIE G BEITZ
07/24/2020 08:11:49 AM