

**CENTER FOR DRUG EVALUATION AND  
RESEARCH**

*APPLICATION NUMBER:*

**208352Orig1s000**

**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 13, 2020
<b>Application Type and Number:</b>	IND 109300 and NDA 208352
<b>Product Name and Strength:</b>	Phexxi (L-lactic acid, citric acid and potassium bitartrate) Vaginal Gel, 1.8%/1%/0.4%
<b>Product Type:</b>	Multiple Ingredient Combination Product (Drug/Device)
<b>Rx or OTC:</b>	Prescription (Rx)
<b>Applicant/Sponsor Name:</b>	Evofem, Inc. (Evofem)
<b>Panorama #:</b>	2019-34178331 and 2019-36060561
<b>DMEPA Safety Evaluator:</b>	Beverly Weitzman, PharmD
<b>DMEPA Team Leader:</b>	Briana Rider, PharmD, CPPS

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## 1 INTRODUCTION

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

### 1.1 REGULATORY HISTORY

Evofem previously submitted the proposed proprietary name, Amphora\*\*\* under IND 109300 and NDA 208352. Amphora\*\*\* was found to be conditionally acceptable on August 24, 2015.<sup>a</sup> However, NDA 208352 received a Complete Response (CR) on April 28, 2016. The CR letter instructed Evofem to resubmit the proposed proprietary name in response to the application deficiencies. On February 14, 2019, Evofem resubmitted the name, Amphora\*\*\*, for review under IND 109300 in advance of the resubmission of NDA 208352. However, we found the name Amphora\*\*\* unacceptable due to its similarity in spelling, pronunciation and overlapping product characteristics with the marketed product, Ampyra on August 9, 2019.<sup>b</sup>

Thus, the Sponsor submitted the proposed proprietary name, Phexxi for review under IND 109300 and NDA 208352 on September 3, 2019 and November 26, 2019, respectively.

### 1.2 PRODUCT INFORMATION

The following product information is provided in the proprietary name submission received on November 26, 2019.

- Intended Pronunciation: fex' ee
- Active Ingredient: L-lactic acid, citric acid and potassium bitartrate)
- Indication of Use: Prevention of pregnancy in women who choose to use on demand methods for their contraceptive needs.
- Route of Administration: Vaginal
- Dosage Form: Vaginal Gel
- Strength: 1.8%/1%/0.4%
- Dose and Frequency: Self-administered one pre-filled single-dose applicator (5 grams) intravaginally 1 hour before each episode of vaginal intercourse.
- How Supplied: Box of 12 individually wrapped 5 grams pre-filled single-dose applicators.
- Storage: Store in the original foil pack at room temperature 20°C to 25°C (68°F to 77°F); excursion permitted to 15°C to 30°C (59°F to 86°F) [see USP Controlled Room Temperature].

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<sup>a</sup> Baugh, D. Proprietary Name Review for Amphora\*\*\* (NDA 208352 and IND 109300). Silver Spring (MD): FDA, CDER, OSE, DMEPA (US); 2015 AUG 24. Panorama No. 2015-904258 and 2015-51071.

<sup>b</sup> Karpow, C. Proprietary Name Review for Amphora\*\*\* (IND 109300). Silver Spring (MD): FDA, CDER, OSE, DMEPA (US); 2019 AUG 09. Panorama No. 2019-29387659.

- Reference Listed Drug/Reference Product: N/A

## 2 RESULTS

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

### 2.1 MISBRANDING ASSESSMENT

The Office of Prescription Drug Promotion (OPDP) determined that Phexxi would not misbrand the proposed product. The Division of Medication Error Prevention and Analysis (DMEPA) and the Division of Bone, Reproductive and Urologic Products (DBRUP) concurred with the findings of OPDP's assessment for Phexxi.

### 2.2 SAFETY ASSESSMENT

The following aspects were considered in the safety evaluation of the proposed proprietary name, Phexxi.

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

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

#### 2.2.2 *Components of the Proposed Proprietary Name*

Evoform did not provide a derivation or intended meaning for the proposed proprietary name, Phexxi, in their submission. This proprietary name is comprised of a word that does not contain any components (i.e. a modifier, route of administration, dosage form, etc.) that are misleading or can contribute to medication error.

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

In response to the OSE, December 17, 2019 e-mail, the Division of Bone, Reproductive and Urologic Products (DBRUP) did not forward any comments or concerns relating to Phexxi at the initial phase of the review.

#### 2.2.4 *FDA Name Simulation Studies*

One-hundred practitioners participated in DMEPA's prescription studies for Phexxi.

Eighteen respondents in the voice study interpreted the proposed proprietary name as (b) (4) \*\*\*. In addition, seventeen respondents in the voice study interpreted the proposed proprietary name as close variations to (b) (4) \*\*\*. We evaluated the name pair, Phexxi and (b) (4) \*\*\*, (b) (4) \*\*\*.

Thus, we find no risk of name confusion for this name pair (See Appendix G).

Additionally, 37 respondents in the voice study, misinterpreted the onset of the first syllable 'Ph' as an 'F'.

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<sup>c</sup> USAN stem search conducted on September 6, 2019.

Appendix B contains the results from the prescription simulation studies.

### ***2.2.5 Phonetic and Orthographic Computer Analysis (POCA) Search Results***

Our POCA search<sup>d</sup> identified thirty-eight names with a combined phonetic and orthographic score of  $\geq 55\%$  or an individual phonetic or orthographic score  $\geq 70\%$ . These names are included in Table 1 below.

### ***2.2.6 Names Retrieved for Review Organized by Name Pair Similarity***

Table 1 lists the number of names retrieved from our POCA search. These name pairs are organized as highly similar, moderately similar or low similarity for further evaluation.

<b>Table 1. Names Retrieved for Review Organized by Name Pair Similarity</b>	
<b>Similarity Category</b>	<b>Number of Names</b>
Highly similar name pair: combined match percentage score $\geq 70\%$	1
Moderately similar name pair: combined match percentage score $\geq 55\%$ to $\leq 69\%$	36
Low similarity name pair: combined match percentage score $\leq 54\%$	1

### ***2.2.7 Safety Analysis of Names with Potential Orthographic, Spelling, and Phonetic Similarities***

Our analysis of the thirty-eight names contained in Table 1 determined none of the names will pose a risk for confusion with Phexxi as described in Appendices C through H.

### ***2.2.8 Communication of DMEPA's Analysis at Midpoint of Review***

DMEPA communicated our findings to the Division of Bone, Reproductive and Urologic Products (DBRUP) via e-mail on February 12, 2020. At that time, we also requested additional information or concerns that could inform our review. Per e-mail correspondence from the Division of Bone, Reproductive and Urologic Products (DBRUP) on February 13, 2020, they stated no additional concerns with the proposed proprietary name, Phexxi.

## **3 CONCLUSION**

The proposed proprietary name, Phexxi, is acceptable.

If you have any questions or need clarifications, please contact Mammah Borbor, OSE project manager, at 301-796-7731.

### **3.1 COMMENTS TO EVOFEM, INC.**

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<sup>d</sup> POCA search conducted on September 6, 2019 in version 4.3.

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

If any of the proposed product characteristics as stated in your submission, received on November 26, 2019, are altered prior to approval of the marketing application, the name must be resubmitted for review.

## 4 REFERENCES

### 1. *USAN Stems* (<https://www.ama-assn.org/about/united-states-adopted-names-approved-stems>)

USAN Stems List contains all the recognized USAN stems.

### 2. *Phonetic and Orthographic Computer Analysis (POCA)*

POCA is a system that FDA designed. As part of the name similarity assessment, POCA is used to evaluate proposed names via a phonetic and orthographic algorithm. The proposed proprietary name is converted into its phonemic representation before it runs through the phonetic algorithm. Likewise, an orthographic algorithm exists that operates in a similar fashion. POCA is publicly accessible.

### *Drugs@FDA*

Drugs@FDA is an FDA Web site that contains most of the drug products approved in the United States since 1939. The majority of labels, approval letters, reviews, and other information are available for drug products approved from 1998 to the present. Drugs@FDA contains official information about FDA-approved *brand name* and *generic drugs*; *therapeutic biological products*, *prescription* and *over-the-counter* human drugs; and *discontinued drugs* (see Drugs @ FDA Glossary of Terms, available at [http://www.fda.gov/Drugs/InformationOnDrugs/ucm079436.htm#ther\\_biological](http://www.fda.gov/Drugs/InformationOnDrugs/ucm079436.htm#ther_biological)).

### *RxNorm*

RxNorm contains the names of prescription and many OTC drugs available in the United States. RxNorm includes generic and branded:

- Clinical drugs – pharmaceutical products given to (or taken by) a patient with therapeutic or diagnostic intent
- Drug packs – packs that contain multiple drugs, or drugs designed to be administered in a specified sequence

Radiopharmaceuticals, contrast media, food, dietary supplements, and medical devices, such as bandages and crutches, are all out of scope for RxNorm

(<http://www.nlm.nih.gov/research/umls/rxnorm/overview.html>).

### *Division of Medication Errors Prevention and Analysis proprietary name consultation requests*

This is a list of proposed and pending names that is generated by the Division of Medication Error Prevention and Analysis from the Access database/tracking system.

## 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 DNDP. OPDP or DNDP 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 DNDP 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>°</sup>

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

**\*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 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)).
<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. Phonetic and Orthographic Computer Analysis (POCA): Following the preliminary screening of the proposed proprietary name, DMEPA staff evaluates the proposed name against potentially similar names. In order to identify names with potential similarity to the proposed proprietary name, DMEPA enters the proposed proprietary name in POCA and queries the name against the following drug reference databases, Drugs@fda, CernerRxNorm, and names in the review pipeline using a 55% threshold in POCA. DMEPA reviews the combined orthographic and phonetic matches and group the names into one of the following three categories:
- Highly similar pair: combined match percentage score  $\geq 70\%$ .
  - Moderately similar pair: combined match percentage score  $\geq 55\%$  to  $\leq 69\%$ .

- Low similarity: combined match percentage score  $\leq 54\%$ .

Using the criteria outlined in the check list (Table 3-5) that corresponds to each of the three categories (highly similar pair, moderately similar pair, and low similarity), DMEPA evaluates the name pairs to determine the acceptability or non-acceptability of a proposed proprietary name. The intent of these checklists is to increase the transparency and predictability of the safety determination of whether a proposed name is vulnerable to confusion from a look-alike or sound-alike perspective. Each bullet below corresponds to the name similarity category cross-references the respective table that addresses criteria that DMEPA uses to determine whether a name presents a safety concern from a look-alike or sound-alike perspective.

- For highly similar names, differences in product characteristics often cannot mitigate the risk of a medication error, including product differences such as strength and dose. Thus, proposed proprietary names that have a combined score of  $\geq 70$  percent are at risk for a look-alike sound-alike confusion which is an area of concern (See Table 3).
- Moderately similar names are further evaluated to identify the presence of attributes that are known to cause name confusion.
  - Name attributes: We note that the beginning of the drug name plays a significant role in contributing to confusion. Additionally, drug name pairs that start with the same first letter and contain a shared letter string of at least 3 letters in both names are major contributing factor in the confusion of drug names<sup>f</sup>. We evaluate all moderately similar names retrieved from POCA to identify the above attributes. These names are further evaluated to identify overlapping or similar strengths or doses.
  - Product attributes: Moderately similar names of products that have overlapping or similar strengths or doses represent an area for concern for FDA. The dose and strength information is often located in close proximity to the drug name itself on prescriptions and medication orders, and the information can be an important factor that either increases or decreases the potential for confusion between similarly named drug pairs. The ability of other product characteristics to mitigate confusion (e.g., route, frequency, dosage form) may be limited when the strength or dose overlaps. DMEPA reviews such names further, to determine whether sufficient differences exist to prevent confusion. (See Table 4).
- Names with low similarity that have no overlap or similarity in strength and dose are generally acceptable (See Table 5) unless there are data to suggest that the name might be vulnerable to confusion (e.g., prescription simulation study suggests that the name is likely to be misinterpreted as a marketed product). In these instances, we would reassign

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<sup>f</sup> Shah, M, Merchant, L, Characteristics That May Help in the Identification of Potentially Confusing Proprietary Drug Names. Therapeutic Innovation & Regulatory Science, September 2016

a low similarity name to the moderate similarity category and review according to the moderately similar name pair checklist.

- c. FDA Prescription Simulation Studies: DMEPA staff also conducts a prescription simulation studies using FDA health care professionals.

Four separate studies are conducted within the Centers of the FDA for the proposed proprietary name to determine the degree of confusion of the proposed proprietary name with marketed U.S. drug names (proprietary and established) due to similarity in visual appearance with handwritten prescriptions, verbal pronunciation of the drug name or during computerized provider order entry. The studies employ healthcare professionals (pharmacists, physicians, and nurses), and attempts to simulate the prescription ordering process. The primary Safety Evaluator uses the results to identify vulnerability of the proposed name to be misinterpreted by healthcare practitioners during written, verbal, or electronic prescribing.

In order to evaluate the potential for misinterpretation of the proposed proprietary name during written, verbal, or electronic prescribing of the name, written inpatient medication orders, written outpatient prescriptions, verbal orders, and electronic orders are simulated, each consisting of a combination of marketed and unapproved drug products, including the proposed name.

- d. 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.

**Table 3. Highly Similar Name Pair Checklist (i.e., combined Orthographic and Phonetic score is  $\geq 70\%$ ).**

<p>Answer the questions in the checklist below. Affirmative answers to some of these questions suggest that the pattern of orthographic or phonetic differences in the names may render the names less likely to confusion, provided that the pair does not share a common strength or dose.</p>			
<u>Orthographic Checklist</u>		<u>Phonetic Checklist</u>	
<b>Y/N</b>	<p>Do the names begin with different first letters?</p> <p><i>Note that even when names begin with different first letters, certain letters may be confused with each other when scripted.</i></p>	<b>Y/N</b>	<p>Do the names have different number of syllables?</p>
<b>Y/N</b>	<p>Are the lengths of the names dissimilar* when scripted?</p> <p><i>*FDA considers the length of names different if the names differ by two or more letters.</i></p>	<b>Y/N</b>	<p>Do the names have different syllabic stresses?</p>
<b>Y/N</b>	<p>Considering variations in scripting of some letters (such as z and f), is there a different number or placement of upstroke/downstroke letters present in the names?</p>	<b>Y/N</b>	<p>Do the syllables have different phonologic processes, such as vowel reduction, assimilation, or deletion?</p>
<b>Y/N</b>	<p>Is there different number or placement of cross-stroke or dotted letters present in the names?</p>	<b>Y/N</b>	<p>Across a range of dialects, are the names consistently pronounced differently?</p>
<b>Y/N</b>	<p>Do the infixes of the name appear dissimilar when scripted?</p>		
<b>Y/N</b>	<p>Do the suffixes of the names appear dissimilar when scripted?</p>		

**Table 4: Moderately Similar Name Pair Checklist (i.e., combined score is  $\geq 55\%$  to  $\leq 69\%$ ).**

<p>Step 1</p>	<p>Review the DOSAGE AND ADMINISTRATION and HOW SUPPLIED/STORAGE AND HANDLING sections of the prescribing information (or for OTC drugs refer to the Drug Facts label) to determine if strengths and doses of the name pair overlap or are very similar. Different strengths and doses for products whose names are moderately similar may decrease the risk of confusion between the moderately similar name pairs. Name pairs that have overlapping or similar strengths or doses have a higher potential for confusion and should be evaluated further (see Step 2). Because the strength or dose could be used to express an order or prescription for a particular drug product, overlap in one or both of these components would be reason for further evaluation.</p> <p>For single strength products, also consider circumstances where the strength may not be expressed.</p> <p>For any i.e. drug products comprised of more than one active ingredient, consider whether the strength or dose may be expressed using only one of the components.</p> <p>To determine whether the strengths or doses are similar to your proposed product, consider the following list of factors that may increase confusion:</p> <ul style="list-style-type: none"> <li>• Alternative expressions of dose: 5 mL may be listed in the prescribing information, but the dose may be expressed in metric weight (e.g., 500 mg) or in non-metric units (e.g., 1 tsp, 1 tablet/capsule). Similarly, a strength or dose of 1000 mg may be expressed, in practice, as 1 g, or vice versa.</li> <li>• Trailing or deleting zeros: 10 mg is similar in appearance to 100 mg which may potentiate confusion between a name pair with moderate similarity.</li> <li>• Similar sounding doses: 15 mg is similar in sound to 50 mg</li> </ul>
<p>Step 2</p>	<p>Answer the questions in the checklist below. Affirmative answers to some of these questions suggest that the pattern of orthographic or phonetic differences in the names may reduce the likelihood of confusion for moderately similar names <b>with</b> overlapping or similar strengths or doses.</p>

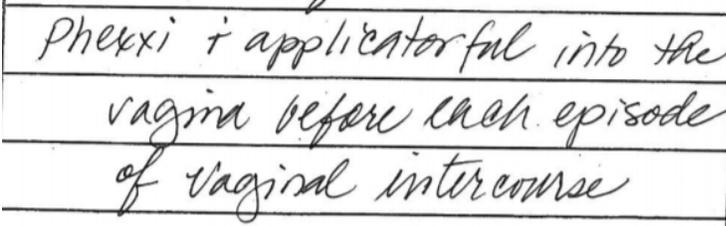
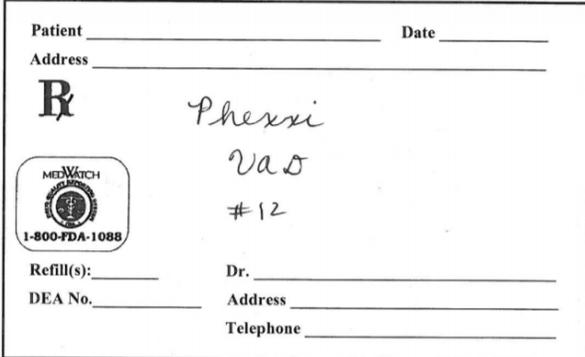
	<p>Orthographic Checklist (Y/N to each question)</p> <ul style="list-style-type: none"> <li>• Do the names begin with different first letters? Note that even when names begin with different first letters, certain letters may be confused with each other when scripted.</li> <li>• Are the lengths of the names dissimilar* when scripted? *FDA considers the length of names different if the names differ by two or more letters.</li> <li>• Considering variations in scripting of some letters (such as <i>z</i> and <i>f</i>), is there a different number or placement of upstroke/downstroke letters present in the names?</li> <li>• Is there different number or placement of cross-stroke or dotted letters present in the names?</li> <li>• Do the infixes of the name appear dissimilar when scripted?</li> <li>• Do the suffixes of the names appear dissimilar when scripted?</li> </ul>	<p>Phonetic Checklist (Y/N to each question)</p> <ul style="list-style-type: none"> <li>• Do the names have different number of syllables?</li> <li>• Do the names have different syllabic stresses?</li> <li>• Do the syllables have different phonologic processes, such as vowel reduction, assimilation, or deletion?</li> <li>• Across a range of dialects, are the names consistently pronounced differently?</li> </ul>
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**Table 5: Low Similarity Name Pair Checklist (i.e., combined score is ≤54%).**

Names with low similarity are generally acceptable unless there are data to suggest that the name might be vulnerable to confusion (e.g., prescription simulation study suggests that the name is likely to be misinterpreted as a marketed product). In these instances, we would reassign a low similarity name to the moderate similarity category and review according to the moderately similar name pair checklist.

**Appendix B: Prescription Simulation Samples and Results**

**Figure 1. Phexxi Study (Conducted on September 17, 2019)**

Handwritten Medication Order/Prescription	Verbal Prescription
<p>Medication Order:</p> 	<p>Phexxi Use as directed #12</p>
<p>Outpatient Prescription:</p> 	
<p><b>CPOE Study Sample (Font: sans-serif, 12 point, bold)</b></p>	
<p>Phexxi</p>	

**FDA Prescription Simulation Responses (Aggregate Report)**

	<p>214 People Received Study 100 People Responded</p> <p>Study Name: Phexxi</p>				
<p><b>Total</b></p>	<p><b>21</b></p>	<p><b>19</b></p>	<p><b>40</b></p>	<p><b>20</b></p>	<p><b>100</b></p>
<p><b>INTERPRETATION</b></p>	<p><b>OUTPATIENT</b></p>	<p><b>CPOE</b></p>	<p><b>VOICE</b></p>	<p><b>INPATIENT</b></p>	<p><b>TOTAL</b></p>
<p>FAXEE</p>	<p>0</p>	<p>0</p>	<p>1</p>	<p>0</p>	<p>1</p>
<p>FEKCI</p>	<p>0</p>	<p>0</p>	<p>1</p>	<p>0</p>	<p>1</p>
<p>FEKSI</p>	<p>0</p>	<p>0</p>	<p>1</p>	<p>0</p>	<p>1</p>

FEKZI	0	0	1	0	1
FEQSI	0	0	1	0	1
FEXCI	0	0	1	0	1
FEXCIN	0	0	1	0	1
FEXCY	0	0	1	0	1
FEXI	0	0	18	0	18
FEXSE	0	0	1	0	1
FEXSY	0	0	1	0	1
FEXY	0	0	7	0	7
FEXZI	0	0	1	0	1
FEXZYE	0	0	1	0	1
PEXCY	0	0	1	0	1
PHEXI	0	0	0	1	1
PHEXXI	20	19	0	19	58
PHEXXI VAD	1	0	0	0	1
SEPCI	0	0	1	0	1
SUCEE	0	0	1	0	1

**Appendix C:** Highly Similar Names (e.g., combined POCA score is  $\geq 70\%$ )

No.	<b>Proposed name:</b> Phexxi <b>Established name:</b> L-lactic acid, citric acid and potassium bitartrate) <b>Dosage form:</b> Vaginal Gel <b>Strength(s):</b> 1.8%/1%/0.4% <b>Usual Dose:</b> One pre-filled single-dose applicator (5 grams) intravaginally before each episode of vaginal intercourse	POCA Score (%)	<b>Orthographic and/or phonetic differences in the names sufficient to prevent confusion</b>  <b>Other prevention of failure mode expected to minimize the risk of confusion between these two names.</b>
1.	Phexxi	100	Proposed proprietary name that is the subject of this review.

**Appendix D:** Moderately Similar Names (e.g., combined POCA score is  $\geq 55\%$  to  $\leq 69\%$ ) with no overlap or numerical similarity in Strength and/or Dose

No.	Name	POCA Score (%)
2.	Perloxx	57

**Appendix E:** Moderately Similar Names (e.g., combined POCA score is  $\geq 55\%$  to  $\leq 69\%$ ) with overlap or numerical similarity in Strength and/or Dose

No.	<b>Proposed name:</b> Phexxi <b>Established name:</b> L-lactic acid, citric acid and potassium bitartrate) <b>Dosage form:</b> Vaginal Gel <b>Strength(s):</b> 1.8%/1%/0.4% <b>Usual Dose:</b> One pre-filled single-dose applicator (5 grams) intravaginally before each episode of vaginal intercourse	POCA Score (%)	<b>Prevention of Failure Mode</b>  <b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b>
3.	Tpoxx	64	This name pair has sufficient orthographic and phonetic differences.
4.	Aciphex	62	This name pair has sufficient orthographic and phonetic differences.
5.	Photrex	60	This name pair has sufficient orthographic and phonetic differences.
6.	Imvexxy	59	This name pair has sufficient orthographic and phonetic differences.  Phonetically, the first syllables (fex versus ĩm) and second syllables (ee versus vex') sound different when

No.	<b>Proposed name:</b> Phexxi <b>Established name:</b> L-lactic acid, citric acid and potassium bitartrate) <b>Dosage form:</b> Vaginal Gel <b>Strength(s):</b> 1.8%/1%/0.4% <b>Usual Dose:</b> One pre-filled single-dose applicator (5 grams) intravaginally before each episode of vaginal intercourse	<b>POCA Score (%)</b>	<b>Prevention of Failure Mode</b>  <b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b>
			<p>spoken. Additionally, Phexxi has 2 syllables, whereas Imvexxy contains 3 syllables.</p> <p>Furthermore, the following product characteristics may provide additional differentiation, if included: Phexxi is available in one strength (1.8%/1%/0.4%), whereas Imvexxy is available in two strengths (4 mcg and 10 mcg) which must be specified on the prescription and the strengths do not overlap. Additionally, there is no direct overlap in dosage form (gel versus insert) or frequency of administration (before each episode of vaginal intercourse versus once daily or twice weekly).</p>
7.	Pexeva	58	This name pair has sufficient orthographic and phonetic differences.
8.	Phenytx	58	This name pair has sufficient orthographic and phonetic differences.
9.	Pacnex	57	This name pair has sufficient orthographic and phonetic differences.
10.	Euflexxa	56	This name pair has sufficient orthographic and phonetic differences.
11.	Gilphex	56	This name pair has sufficient orthographic and phonetic differences.
12.	Hiprex	56	This name pair has sufficient orthographic and phonetic differences.
13.	Pemfexy***	56	<p>This name pair has sufficient orthographic and phonetic differences.</p> <p>Additionally, the following product characteristics may provide additional differentiation, if included: There is no</p>

No.	<b>Proposed name:</b> Phexxi <b>Established name:</b> L-lactic acid, citric acid and potassium bitartrate) <b>Dosage form:</b> Vaginal Gel <b>Strength(s):</b> 1.8%/1%/0.4% <b>Usual Dose:</b> One pre-filled single-dose applicator (5 grams) intravaginally before each episode of vaginal intercourse	<b>POCA Score (%)</b>	<b>Prevention of Failure Mode</b>  <b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b>
			overlap in strength (1.8%/1%/0.4% versus 500 mg/20 mL [25 mg/mL]), route of administration (vaginal versus intravenous), dosage form (gel versus injection), or frequency of administration (before each episode of vaginal intercourse versus day 1 of each 21-day cycle [10-minute infusion]).
14.	Pentoxil	56	This name pair has sufficient orthographic and phonetic differences.
15.	Relexxii	56	<p>This name pair has sufficient orthographic and phonetic differences.</p> <p>Orthographically, the prefixes (Ph versus Rel) look sufficiently different and gives the names different shapes when scripted. Additionally, the lengths of the names (6 letters versus 8 letters) are dissimilar when scripted.</p> <p>Phonetically, the first syllables (fex' versus RE) and second syllables (ee versus LEX) in the name pair sound different. Additionally, Phexxi has 2 syllables, whereas Relexxii contains 3 syllables.</p> <p>The product characteristics between the name pairs are different, which may provide additional differentiation, if included. Specifically, there is no direct overlap in strength (1.8%/1%/0.4% versus 72 mg), dosage form (gel versus extended-release tablet), route of administration (vaginal</p>

No.	<b>Proposed name:</b> Phexxi <b>Established name:</b> L-lactic acid, citric acid and potassium bitartrate) <b>Dosage form:</b> Vaginal Gel <b>Strength(s):</b> 1.8%/1%/0.4% <b>Usual Dose:</b> One pre-filled single-dose applicator (5 grams) intravaginally before each episode of vaginal intercourse	<b>POCA Score (%)</b>	<b>Prevention of Failure Mode</b>  <b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b>
			versus oral), or frequency of administration (before each episode of vaginal intercourse versus once daily).
16.	Fexmid	55	This name pair has sufficient orthographic and phonetic differences.
17.	Poxi	55	This name pair has sufficient orthographic and product characteristic differences.  Orthographically, Phexxi contains the upstroke letter ‘h’, whereas Poxi doesn’t contain any upstroke letters, which gives the names different shapes when scripted. Additionally, the lengths of the names (6 letters versus 4 letters) are dissimilar when scripted. The product characteristics between the name pairs are different, which may provide additional differentiation, if included. There is no direct overlap in strength (1.8%/1%/0.4% versus 10 mg), dosage form (gel versus capsule), route of administration (vaginal versus oral), or frequency of administration (before each episode of vaginal intercourse versus two to four times a day). Additionally, Poxi is a controlled substance (CIV) and must include the product strength, directions for use and quantity to dispense on a prescription. <sup>§</sup> These differences in product

<sup>§</sup> Code of Federal Regulations. 21CFR Part 1306.05(a)

No.	<b>Proposed name:</b> Phexxi <b>Established name:</b> L-lactic acid, citric acid and potassium bitartrate) <b>Dosage form:</b> Vaginal Gel <b>Strength(s):</b> 1.8%/1%/0.4% <b>Usual Dose:</b> One pre-filled single-dose applicator (5 grams) intravaginally before each episode of vaginal intercourse	<b>POCA Score (%)</b>	<b>Prevention of Failure Mode</b>  <b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b>
			<p>characteristics can minimize the risk for confusion between the products.</p> <p>Furthermore, Poxi is a discontinued brand of chlordiazepoxide (10 mg) oral capsules that would likely be prescribed by the better-known brand name, Librium, or the established name, chlordiazepoxide.</p> <p>When all of the aforementioned mitigations are considered in totality, we find the risk of name confusion is minimal.</p>

**Appendix F:** Low Similarity Names (e.g., combined POCA score is ≤54%)

No.	Name	POCA Score (%)
18.	Perhexiline	44

**Appendix G:** Names not likely to be confused or not used in usual practice settings for the reasons described.

No.	Name	POCA Score (%)	Failure preventions
19.	Vioxx	61	Product withdrawn from the market due to safety concerns.
20.	(b) (4)***	60	(b) (4)

No.	Name	POCA Score (%)	Failure preventions
21.	Lexxel	60	Name identified in RxNorm database. Product is deactivated per Redbook and no generic equivalents are available.
22.	(b) (4)***	60	(b) (4)
23.	Phen-Lax	60	Name identified in RxNorm database. Product is deactivated per Redbook and no generic equivalents are available.
24.	T-hexx Dry	59	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
25.	Phisohex	58	Name identified in RxNorm database. Product is deactivated per Redbook and no generic equivalents are available.
26.	Hexidip	58	Veterinary product.
27.	Hexi-Dip	58	Veterinary product.
28.	Hexi-Dip 110	58	Veterinary product.
29.	Peditex	56	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
30.	Pendex	56	Name identified in RxNorm database. Product is deactivated per Redbook and no generic equivalents are available.
31.	Phentex LA	56	Name identified in RxNorm database. Product is deactivated per Redbook and no generic equivalents are available.

**Appendix H:** Names not likely to be confused due to absence of attributes that are known to cause name confusion<sup>h</sup>.

No.	Name	POCA Score (%)
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<sup>h</sup> Shah, M, Merchant, L, Chan, I, and Taylor, K. Characteristics That May Help in the Identification of Potentially Confusing Proprietary Drug Names. Therapeutic Innovation & Regulatory Science, September 2016

No.	Name	POCA Score (%)
32.	Hi Tex Pse	61
33.	Zephrex	59
34.	Ti-Plex	57
35.	Ex-Lax	56
36.	Histex Pse	56
37.	Histex	56
38.	Histex I/E	56

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**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.**  
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/s/  
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BEVERLY WEITZMAN  
02/13/2020 01:46:53 PM

BRIANA B RIDER  
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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>	August 24, 2015
<b>Application Type and Number:</b>	NDA 208352 (IND 109300)
<b>Product Name and Strength:</b>	Amphora (lactic acid , citric acid , and potassium bitartrate ) Vaginal Gel 1.76 %/1 %/0.4 %
<b>Product Type:</b>	Combination Product
<b>Rx or OTC:</b>	Rx
<b>Applicant/Sponsor Name:</b>	Evofem
<b>Panorama #:</b>	2015-904258 (2015-51071)
<b>DMEPA Primary Reviewer:</b>	Denise V. Baugh, PharmD, BCPS
<b>DMEPA Team Leader:</b>	Danielle Harris, PharmD, BCPS

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## 1 INTRODUCTION

This review evaluates the proposed proprietary name, Amphora, 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 PRODUCT INFORMATION

The following product information is provided in the July 2, 2015 proprietary name submission.

- Intended Pronunciation: Am-för-ə
- Active Ingredient: lactic acid, citric acid, potassium bitartrate
- Indication of Use: pregnancy prevention
- Route of Administration: vaginal
- Dosage Form: topical gel
- Strength: 1.76 %/1 %/0.4 %
- Dose and Frequency: a single 5 gram applicator inserted vaginally no earlier than one hour before each episode of vaginal intercourse
- How Supplied: 5 gram pre-filled vaginal applicator in individual overwraps; (b) (4)
- Storage: 20°C to 25°C (68°F to 77°F); excursion permitted to 15°C to 30°C (59°F to 86°F)

## 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 and the Division of Bone, Reproductive, and Urologic Products (DBRUP) concurred with the findings of OPDP's assessment of the proposed name.

### 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>.

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<sup>1</sup>USAN stem search conducted on July 17, 2015.

### **2.2.2 Components of the Proposed Proprietary Name**

The Applicant indicated in their submission that the proposed name, Amphora, is derived from the curvature of the female form. We considered whether the suffix, ora, suggests that this is a drug product which may be given orally. Though not the same dosage form, we are aware of another marketed product, Alora (estradiol), NDA 020655, which is a transdermal delivery system that contains the suffix “ora”. We are not aware of any wrong route of administration errors involving Alora. We have determined that the risk for wrong route of administration errors due to the suffix can be appropriately managed through labeling and is acceptable.

### **2.2.3 FDA Name Simulation Studies**

Ninety-four practitioners participated in DMEPA’s prescription studies. The responses did not overlap with any currently marketed products nor did the responses sound or look similar to any currently marketed products or any products in the pipeline. Appendix B contains the results from the verbal and written prescription studies.

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

In response to the OSE, March 31, 2015 e-mail, the Division of Bone, Reproductive, and Urologic Products (DBRUP) did not forward any comments or concerns relating to the proposed proprietary name at the initial phase of the review.

### **2.2.5 Phonetic and Orthographic Computer Analysis (POCA) Search Results**

Table 1 lists the number of names with the combined orthographic and phonetic score of  $\geq 50\%$  retrieved from our POCA search<sup>2</sup> organized as highly similar, moderately similar or low similarity for further evaluation.

<b>Table 1. POCA Search Results</b>	<b>Number of Names</b>
Highly similar name pair: combined match percentage score $\geq 70\%$	5
Moderately similar name pair: combined match percentage score $\geq 50\%$ to $\leq 69\%$	103
Low similarity name pair: combined match percentage score $\leq 49\%$	0

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<sup>2</sup> POCA search conducted on July 17, 2015.

### ***2.2.6 Safety Analysis of Names with Potential Orthographic, Spelling, and Phonetic Similarities***

Our analysis of the 108 names contained in Table 1 determined all 108 names will not pose a risk for confusion as described in Appendices C through H.

### ***2.2.7 Communication of DMEPA's Analysis at Midpoint of Review***

DMEPA communicated our findings to the Division of Bone, Reproductive, and Urologic Products (DBRUP) via e-mail on August 5, 2015. At that time we also requested additional information or concerns that could inform our review. Per e-mail correspondence from DBRUP on August 5, 2015 they stated no additional concerns with the proposed proprietary name, Amphora.

## **3 CONCLUSIONS**

The proposed proprietary name is acceptable.

If you have any questions or need clarifications, please contact Shawnetta Jackson, OSE Project Manager, at 301-796-4952.

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

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

If any of the proposed product characteristics as stated in your July 2, 2015 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>)

USAN Stems List contains all the recognized USAN stems.

2. **Phonetic and Orthographic Computer Analysis (POCA)**

POCA is a system that FDA designed. As part of the name similarity assessment, POCA is used to evaluate proposed names via a phonetic and orthographic algorithm. The proposed proprietary name is converted into its phonemic representation before it runs through the phonetic algorithm. Likewise, an orthographic algorithm exists that operates in a similar fashion. POCA is publicly accessible.

### ***Drugs@FDA***

Drugs@FDA is an FDA Web site that contains most of the drug products approved in the United States since 1939. The majority of labels, approval letters, reviews, and other information are available for drug products approved from 1998 to the present. Drugs@FDA contains official information about FDA-approved *brand name* and *generic drugs*; *therapeutic biological products*, *prescription* and *over-the-counter* human drugs; and *discontinued drugs* (see Drugs @ FDA Glossary of Terms, available at [http://www.fda.gov/Drugs/InformationOnDrugs/ucm079436.htm#ther\\_biological](http://www.fda.gov/Drugs/InformationOnDrugs/ucm079436.htm#ther_biological)).

### ***RxNorm***

RxNorm contains the names of prescription and many OTC drugs available in the United States. RxNorm includes generic and branded:

- Clinical drugs – pharmaceutical products given to (or taken by) a patient with therapeutic or diagnostic intent
- Drug packs – packs that contain multiple drugs, or drugs designed to be administered in a specified sequence

Radiopharmaceuticals, contrast media, food, dietary supplements, and medical devices, such as bandages and crutches, are all out of scope for RxNorm (<http://www.nlm.nih.gov/research/umls/rxnorm/overview.html#>).

### ***Division of Medication Errors Prevention and Analysis proprietary name consultation requests***

This is a list of proposed and pending names that is generated by the Division of Medication Error Prevention and Analysis from the Access database/tracking system.

## 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 DNDP. OPDP or DNDP 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 DNDP 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>

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

**\*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)).
<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. Phonetic and Orthographic Computer Analysis (POCA): Following the preliminary screening of the proposed proprietary name, DMEPA staff evaluates the proposed name against potentially similar names. In order to identify names with potential similarity to the proposed proprietary name, DMEPA enters the proposed proprietary name in POCA and queries the name against the following drug reference databases, Drugs@fda, CernerRxNorm, and names in the review pipeline using a 50% threshold in POCA. DMEPA reviews the combined orthographic and phonetic matches and group the names into one of the following three categories:

- Highly similar pair: combined match percentage score  $\geq 70\%$ .
- Moderately similar pair: combined match percentage score  $\geq 50\%$  to  $\leq 69\%$ .
- Low similarity: combined match percentage score  $\leq 49\%$ .

Using the criteria outlined in the check list (Table 3-5) that corresponds to each of the three categories (highly similar pair, moderately similar pair, and low similarity), DMEPA evaluates the name pairs to determine the acceptability or non-acceptability of a proposed proprietary name. The intent of these checklists is to increase the transparency and predictability of the safety determination of whether a proposed name is vulnerable to confusion from a look-alike or sound-alike perspective. Each bullet below corresponds to the name similarity category cross-references the respective table that addresses criteria that DMEPA uses to determine whether a name presents a safety concern from a look-alike or sound-alike perspective.

- For highly similar names, differences in product characteristics often cannot mitigate the risk of a medication error, including product differences such as strength and dose. Thus, proposed proprietary names that have a combined score of  $\geq 70$  percent are at risk for a look-alike sound-alike confusion which is an area of concern (See Table 3).
- Moderately similar names with overlapping or similar strengths or doses represent an area for concern for FDA. The dosage and strength information is often located in close proximity to the drug name itself on prescriptions and medication orders, and it can be an important factor that either increases or decreases the potential for confusion between similarly named drug pairs. The ability of other product characteristics to mitigate confusion (e.g., route, frequency, dosage form, etc.) may be limited when the strength or dose overlaps. We review such names further, to determine whether sufficient differences exist to prevent confusion. (See Table 4).
- Names with low similarity that have no overlap or similarity in strength and dose are generally acceptable (See Table 5) unless there are data to suggest that the name might be vulnerable to confusion (e.g., prescription simulation study suggests that the name is likely to be misinterpreted as a marketed product). In these instances, we would reassign a low similarity name to the moderate similarity category and review according to the moderately similar name pair checklist.

c. FDA Prescription Simulation Studies: DMEPA staff also conducts a prescription simulation studies using FDA health care professionals.

Three separate studies are conducted within the Centers of the FDA for the proposed proprietary name to determine the degree of confusion of the proposed proprietary name with marketed U.S. drug names (proprietary and established) due to similarity in visual appearance with handwritten prescriptions or verbal pronunciation of the drug name. The studies employ healthcare professionals (pharmacists, physicians, and nurses), and attempts to simulate the prescription ordering process. The primary Safety Evaluator uses the results to identify orthographic or phonetic vulnerability of the proposed name to be misinterpreted by healthcare practitioners.

In order to evaluate the potential for misinterpretation of the proposed proprietary name in handwriting and verbal communication of the name, inpatient medication orders and/or outpatient prescriptions are written, each consisting of a combination of marketed and unapproved drug products, including the proposed name. These orders are optically scanned and one prescription is delivered to a random sample of participating health professionals via e-mail. In addition, a verbal prescription is recorded on voice mail. The voice mail messages are then sent to a random sample of the participating health professionals for their interpretations and review. After receiving either the written or verbal prescription orders, the participants record their interpretations of the orders which are recorded electronically.

- d. 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.

**Table 3. Highly Similar Name Pair Checklist (i.e., combined Orthographic and Phonetic score is  $\geq 70\%$ ).**

Answer the questions in the checklist below. Affirmative answers to some of these questions suggest that the pattern of orthographic or phonetic differences in the names may render the names less likely to confusion, provided that the pair do not
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share a common strength or dose.			
<u>Orthographic Checklist</u>		<u>Phonetic Checklist</u>	
Y/N	Do the names begin with different first letters? <i>Note that even when names begin with different first letters, certain letters may be confused with each other when scripted.</i>	Y/N	Do the names have different number of syllables?
Y/N	Are the lengths of the names dissimilar* when scripted?  <i>*FDA considers the length of names different if the names differ by two or more letters.</i>	Y/N	Do the names have different syllabic stresses?
Y/N	Considering variations in scripting of some letters (such as z and f), is there a different number or placement of upstroke/downstroke letters present in the names?	Y/N	Do the syllables have different phonologic processes, such vowel reduction, assimilation, or deletion?
Y/N	Is there different number or placement of cross-stroke or dotted letters present in the names?	Y/N	Across a range of dialects, are the names consistently pronounced differently?
Y/N	Do the infixes of the name appear dissimilar when scripted?		
Y/N	Do the suffixes of the names appear dissimilar when scripted?		

**Table 4: Moderately Similar Name Pair Checklist (i.e., combined score is  $\geq 50\%$  to  $\leq 69\%$ ).**

Step 1	Review the DOSAGE AND ADMINISTRATION and HOW SUPPLIED/STORAGE AND HANDLING sections of the prescribing information (or for OTC drugs refer to the Drug Facts label) to determine if strengths and doses of the name pair overlap or are very similar. Different
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	<p>strengths and doses for products whose names are moderately similar may decrease the risk of confusion between the moderately similar name pairs. Name pairs that have overlapping or similar strengths or doses have a higher potential for confusion and should be evaluated further (see Step 2). Because the strength or dose could be used to express an order or prescription for a particular drug product, overlap in one or both of these components would be reason for further evaluation.</p> <p>For single strength products, also consider circumstances where the strength may not be expressed.</p> <p>For any i.e. drug products comprised of more than one active ingredient, consider whether the strength or dose may be expressed using only one of the components.</p> <p>To determine whether the strengths or doses are similar to your proposed product, consider the following list of factors that may increase confusion:</p> <ul style="list-style-type: none"> <li>○ Alternative expressions of dose: 5 mL may be listed in the prescribing information, but the dose may be expressed in metric weight (e.g., 500 mg) or in non-metric units (e.g., 1 tsp, 1 tablet/capsule). Similarly, a strength or dose of 1000 mg may be expressed, in practice, as 1 g, or vice versa.</li> <li>○ Trailing or deleting zeros: 10 mg is similar in appearance to 100 mg which may potentiate confusion between a name pair with moderate similarity.</li> <li>○ Similar sounding doses: 15 mg is similar in sound to 50 mg</li> </ul>
Step 2	<p>Answer the questions in the checklist below. Affirmative answers to some of these questions suggest that the pattern of orthographic or phonetic differences in the names may reduce the likelihood of confusion for moderately similar names <b><u>with</u></b> overlapping or similar strengths or doses.</p>

<p>Orthographic Checklist (Y/N to each question)</p> <ul style="list-style-type: none"> <li>• Do the names begin with different first letters?</li> </ul> <p>Note that even when names begin with different first letters, certain letters may be confused with each other when scripted.</p> <ul style="list-style-type: none"> <li>• Are the lengths of the names dissimilar* when scripted?</li> </ul> <p>*FDA considers the length of names different if the names differ by two or more letters.</p> <ul style="list-style-type: none"> <li>• Considering variations in scripting of some letters (such as <i>z</i> and <i>f</i>), is there a different number or placement of upstroke/downstroke letters present in the names?</li> <li>• Is there different number or placement of cross-stroke or dotted letters present in the names?</li> <li>• Do the infixes of the name appear dissimilar when scripted?</li> <li>• Do the suffixes of the names appear dissimilar when scripted?</li> </ul>	<p>Phonetic Checklist (Y/N to each question)</p> <ul style="list-style-type: none"> <li>• Do the names have different number of syllables?</li> <li>• Do the names have different syllabic stresses?</li> <li>• Do the syllables have different phonologic processes, such as vowel reduction, assimilation, or deletion?</li> <li>• Across a range of dialects, are the names consistently pronounced differently?</li> </ul>
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**Table 5: Low Similarity Name Pair Checklist (i.e., combined score is  $\leq 49\%$ ).**

In most circumstances, these names are viewed as sufficiently different to minimize confusion. Exceptions to this would occur in circumstances where, for example, there are data that suggest a name with low similarity is nonetheless misinterpreted as a marketed product name in a prescription simulation study. In such instances, FDA would reassign a low similarity name to the moderate similarity category and review according to the moderately similar name pair checklist.

**Appendix B:** Prescription Simulation Samples and Results

**Figure 1. Amphora Study (Conducted on April 10, 2015)**

Handwritten Requisition Medication Order	Verbal Prescription
<p>Medication Order:</p> <p><i>Amphora - insert one applicator into the vagina prior to each episode of vaginal intercourse</i></p>	<p>“Amphora – Use as directed, Dispense # 1”</p>
<p>Outpatient Prescription:</p> <p><i>Amphora UAD #1</i></p>	

**FDA Prescription Simulation Responses (Aggregate 1 Rx Studies Report)**

247 People Received Study  
94 People Responded

Study Name: Amphora

OUTPATIENT	VOICE	INPATIENT
AMPHARA (1)	AMFORA (4)	AMMPHORA (1)
AMPHASA (1)	AMPHORA (20)	AMPHORA (30)
AMPHORA (27)	ANFORA (5)	ANPHORA (1)
AMPHORA UAD (1)	ANPHOA (1)	
AMPORA (1)	ANPHORA UAD #1 (1)	

**Appendix C:** Highly Similar Names (e.g., combined POCA score is  $\geq 70\%$ )

No.	<p><b>Proposed name:</b> Amphora</p> <p><b>Established name:</b> lactic acid, citric acid, potassium bitartrate</p> <p><b>Dosage form:</b> gel</p> <p><b>Strength(s):</b> 88 mg lactic acid (1.76 %), 50 mg citric acid (1 %), 20 mg potassium bitartrate (0.4 %) in each 5 gram dose</p> <p><b>Usual Dose:</b> one 5 gram applicatorful no earlier than 1 hour before every episode of vaginal intercourse</p>	POCA Score (%)	<p><b>Orthographic and/or phonetic differences in the names sufficient to prevent confusion</b></p> <p><b>Other prevention of failure mode expected to minimize the risk of confusion between these two names.</b></p>
1.	Amphora	100	Name is the focus of this review.
2.	Ampyra	80	<p>The infix of this name pair (pho vs pyr) has sufficient orthographic differences.</p> <p>The second syllable of this name pair sounds different.</p> <p>The strength/dose for this name pair do not overlap and are not numerically similar (5 g vs 10 mg or 20 mg).</p>
3.	Camphor	76	<p>The prefixes/suffixes of this name pair have sufficient orthographic differences (Amp vs Camp and ora vs or).</p> <p>The first syllables of this name pair sound different (Amp vs Camp), and the proposed name, Amphora contains an extra syllable.</p> <p>Camphor is available as crystals or a powder for compounding purposes making it unlikely this name pair will be confused.</p>
4.	Camphor, (-)-	76	<p>The prefixes/suffixes of this name pair (Amphora vs the root name Camphor) have sufficient orthographic differences (Amp vs Camp and ora vs or).</p> <p>The first syllables of this name pair sound different (Amp vs Camp), and the proposed name, Amphora contains an extra syllable.</p> <p>Camphor is available as crystals or a powder for compounding purposes making it unlikely this name pair will be confused.</p>

<b>No.</b>	<b>Proposed name:</b> Amphora <b>Established name:</b> lactic acid, citric acid, potassium bitartrate <b>Dosage form:</b> gel <b>Strength(s):</b> 88 mg lactic acid (1.76 %), 50 mg citric acid (1 %), 20 mg potassium bitartrate (0.4 %) in each 5 gram dose <b>Usual Dose:</b> one 5 gram applicatorful no earlier than 1 hour before every episode of vaginal intercourse	<b>POCA Score (%)</b>	<b>Orthographic and/or phonetic differences in the names sufficient to prevent confusion</b>  <b>Other prevention of failure mode expected to minimize the risk of confusion between these two names.</b>
5.	Antara	70	The prefixes/infixes (Ampho vs Anta) of this name pair have sufficient orthographic differences The first/second syllables (Am-phor vs An-tar) of this name pair sound different. There is no overlap or numerical similarity in strength and/or dose (5 gm vs 30 mg or 90mg).

**Appendix D:** Moderately Similar Names (e.g., combined POCA score is  $\geq 50\%$  to  $\leq 69\%$ ) with no overlap or numerical similarity in Strength and/or Dose

<b>No.</b>	<b>Name</b>	<b>POCA Score (%)</b>
1.	Amphotec	60
2.	Fentora	60
3.	Alora	59
4.	Absorica	57
5.	Adcirca	56
6.	Campral	56
7.	Apidra	54
8.	Aldara	52
9.	Amphadase	52
10.	Amvaz	52
11.	Arzerra	52

No.	Name	POCA Score (%)
12.	Amitiza	51
13.	Acthar	50
14.	Levora 0.15/30-21	50
15.	Levora 0.15/30-28	50
16.	Levora	50
17.	Ammonia	53
18.	Encora	67
19.	Almora	65
20.	Men-phor	62
21.	Amphocin	61
22.	Aftera	60
23.	Amphojel	60
24.	Apra	55
25.	Agoral	53
26.	Aquaphor	52
27.	Dermaphor	52
28.	Alera	51
29.	(b) (4) ***	63
30.	(u) (4) ***	51

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**Appendix E:** Moderately Similar Names (e.g., combined POCA score is  $\geq 50\%$  to  $\leq 69\%$ ) with overlap or numerical similarity in Strength and/or Dose

No.	<p><b>Proposed name:</b> Amphora</p> <p><b>Established name:</b> lactic acid, citric acid, potassium bitartrate</p> <p><b>Dosage form:</b> gel</p> <p><b>Strength(s):</b> 88 mg lactic acid (1.76 %), 50 mg citric acid (1 %), 20 mg potassium bitartrate (0.4 %) in each 5 gram dose</p> <p><b>Usual Dose:</b> one 5 gram applicatorful no earlier than 1 hour before every episode of vaginal intercourse</p>	<p><b>POCA Score (%)</b></p>	<p><b>Prevention of Failure Mode</b></p> <p><b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b></p>
1.	Amicar	52	<p>The infixes/suffixes of this name pair have sufficient orthographic differences</p> <p>The second/third syllables of this name pair sound different.</p>
2.	Akpro	50	<p>The prefixes/suffixes of this name pair have sufficient orthographic differences</p> <p>The first/second syllables of this name pair sound different and the proposed name, Amphora contains an extra syllable.</p>
3.	Ak-pro	50	<p>The prefixes/suffixes of this name pair have sufficient orthographic differences</p> <p>The first/second syllables of this name pair sound different and the proposed name, Amphora contains an extra syllable.</p>
4.	Anoro	58	<p>The suffixes of this name pair have sufficient orthographic differences</p> <p>The second syllables of this name pair sound different.</p> <p>The name Anoro is approved with the modifier “Ellipta” which provides further differentiation, if included.</p>

No.	<p><b>Proposed name:</b> Amphora</p> <p><b>Established name:</b> lactic acid, citric acid, potassium bitartrate</p> <p><b>Dosage form:</b> gel</p> <p><b>Strength(s):</b> 88 mg lactic acid (1.76 %), 50 mg citric acid (1 %), 20 mg potassium bitartrate (0.4 %) in each 5 gram dose</p> <p><b>Usual Dose:</b> one 5 gram applicatorful no earlier than 1 hour before every episode of vaginal intercourse</p>	POCA Score (%)	<p><b>Prevention of Failure Mode</b></p> <p><b>In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names</b></p>
5.	Amcort	60	<p>The suffixes of this name pair have sufficient orthographic differences</p> <p>The second syllables of this name pair sound different, or the proposed name, Amphora contains an extra syllable.</p>
6.	Andro LA 200	53	<p>Comparing the root name, Andro, with the proposed name, Amphora:</p> <p>The prefixes/suffixes of this name pair have sufficient orthographic differences.</p> <p>The second syllables of this name pair sound different, and the proposed name, Amphora contains an extra syllable.</p>
7.	(b) (4) ***	50	<p>The prefixes/infixes/suffixes of this name pair have sufficient orthographic differences.</p> <p>The first/second/third syllables of this name pair sound different, and the proprietary name, (b) (4) *** contains an extra syllable.</p>

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**Appendix F:** Low Similarity Names (e.g., combined POCA score is  $\leq 49\%$ )

No.	Name	POCA Score (%)
1.	N/A	

**Appendix G:** Names not likely to be confused or not used in usual practice settings for the reasons described.

No.	Name	POCA Score (%)	Failure preventions
1.	Anspor	64	ANDA 061859 was discontinued in 2006 and there are no therapeutic equivalents; there is no overlap or numerical similarity in strength and/or dose.
2.	Amphicol	53	ANDA 060058 was discontinued 2001 and there are no therapeutic equivalents; there is no overlap or numerical similarity in strength and/or dose.
3.	Camphor Ice	58	Found name in RxNorm; no product characteristics found in external databases.
4.	Amoram	65	Found name in RxNorm; no product characteristics found in external databases.
5.	Amprid	62	Found name in RxNorm; no product characteristics found in external databases.
6.	Amprol	62	Found name in RxNorm; no product characteristics found in external databases.
7.	Amprol 128	62	Found name in RxNorm; no product characteristics found in external databases.
8.	Apara	62	Found name in RxNorm; no product characteristics found in external databases.
9.	Lampur	62	Found name in RxNorm; no product characteristics found in external databases.
10.	Amphocil	61	Found name in RxNorm; no product characteristics found in external databases.
11.	Amitraz	54	Found name in RxNorm; no product characteristics found in external databases.
12.	Andro LA	53	Found name in RxNorm; no product characteristics found in external databases.

No.	Name	POCA Score (%)	Failure preventions
13.	Ami-rax	52	Found name in RxNorm; no product characteristics found in external databases.
14.	Ampitrin	52	Found name in RxNorm; no product characteristics found in external databases.
15.	Anturol	51	Found name in RxNorm; no product characteristics found in external databases.
16.	Aloral	50	Found name in RxNorm; no product characteristics found in external databases.
17.	Binora	50	Found name in RxNorm; no product characteristics found in external databases.
18.	Amber	58	Found name in RxNorm; no product characteristics found in external databases.
19.	Am-thav	58	Found name in RxNorm; no product characteristics found in external databases.
20.	(b) (4) ***	58	Name entered by safety evaluator; product characteristics not found in internal databases.
21.	(b) (4) ***	57	Alternative proprietary name to (b) (4) *** which was found to be acceptable (b) (4)
22.	(b) (4) ***	54	Proprietary name found to be unacceptable (OSE Review # 2013-16332 dated April 15, 2014). ANDA 203038 was approved April 10, 2015 with the non-proprietary name.
23.	(b) (4) ***	54	Proprietary name found to be unacceptable (b) (4)
24.	(b) (4) ***	52	Proprietary name found to be unacceptable (OSE Review # 2008-1363 dated June 15, 2010 for IND 011709). BLA 125320 was approved June 1, 2010 with the proprietary name, Xgeva.
25.	(b) (4) ***	51	Proprietary name found to be acceptable (OSE Review # 2009-1262 dated August 3, 2009). However, the Applicant withdrew the name from consideration September 16, 2009 and submitted the alternative name, Ampyra for our review. NDA 22250 was approved January 22, 2010 with the proprietary name, Ampyra.

No.	Name	POCA Score (%)	Failure preventions
26.	(b) (4)***	51	Proprietary name entered by Safety Evaluator; This name (excluding the modifier, (b) (4)) was not formally submitted for review.
27.	(b) (4)***	50	Proprietary name entered by Safety Evaluator, but name not submitted to Agency for review. NDA 021412 was approved April 25, 2007 with the proprietary name, Tovalt ODT.

**Appendix H:** Names not likely to be confused due to notable spelling, orthographic and phonetic differences.

No.	Name	POCA Score (%)
1.	BIFERA	50
2.	COMPLERA***	54
3.	COMPRO	51
4.	DEMSER	52
5.	E PHEROL	50
6.	EMBEDA	50
7.	EMCOR	59
8.	EMPIRIN	56
9.	EMPRO	61
10.	EMVERM***	50
11.	FAMVIR	52
12.	FEMARA	52
13.	FERA	50
14.	HEPSERA	57
15.	HUMIRA	54
16.	(b) (4)***	52

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No.	Name	POCA Score (%)
17.	IMURAN	50
18.	INSpra	54
19.	(b) (4) ***	50
20.	METRA	50
21.	MIRCERA	50
22.	NATPARA ***	56
23.	OFORTA ***	55
24.	OMACOR	54
25.	(b) (4) ***	52
26.	ONSIOR	50
27.	ONZETRA ***	50
28.	OPCON-A	50
29.	(b) (4) ***	53
30.	SANCTURA	50
31.	SANTURA	58
32.	(b) (4) ***	52
33.	SUPHERA	54
34.	TEMPRA	61
35.	TEMPRA 1	61
36.	TEMPRA 2	61
37.	TEMPRA 3	61
38.	VANCOR	50
39.	(b) (4) ***	50

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/s/  
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08/24/2015

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08/25/2015