CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

218158Orig1s000

OTHER REVIEW(S)

MEMORANDUM

REVIEW OF REVISED LABEL AND LABELING
Division of Medication Error Prevention and Analysis 1 (DMEPA 1)
Office of Medication Error Prevention and Risk Management (OMEPRM)
Office of Surveillance and Epidemiology (OSE)
Center for Drug Evaluation and Research (CDER)

Date of This Memorandum:	February 27, 2024
Requesting Office or Division:	Division of Ophthalmology (DO)
Application Type and Number:	NDA 218158
Product Name, Dosage Form, and Strength:	clobetasol propionate ophthalmic suspension, 0.05%
Applicant/Sponsor Name:	Formosa Pharmaceuticals, Inc. (Formosa)
TTT ID #:	2023-4692-2
DMEPA 1 Safety Evaluator:	Deborah Myers, RPh, MBA
DMEPA 1 Team Leader:	Valerie S. Vaughan, PharmD

1 PURPOSE OF MEMORANDUM

The Applicant submitted their final container label and carton labeling received on February 26, 2024 for clobetasol propionate ophthalmic suspension. The Division of Ophthalmology (DO) requested that we review the final container label and carton labeling for clobetasol propionate (Appendix A) to determine if they are acceptable from a medication error perspective.

2 BACKGROUND AND REGULATORY HISTORY

We previously found the container label and carton labeling for clobetasol propionate ophthalmic suspension (NDA 218158) acceptable from a medication error perspective.[a]

On February 15, 2024, the Agency sent an email communication to the Applicant asking about the inclusion of the instructions (b) (4) on their proposed container label and carton labeling (see Appendix B). The Applicant subsequently confirmed that this statement was included in error and will be removed from their revised container label and carton labeling when submitted.

[a] Myers, D. Label and Labeling Review for clobetasol propionate (NDA 218158). Silver Spring (MD): FDA, CDER, OSE, DMEPA 1 (US); 2024 FEB 12. TTT ID No.: 2023-4692-1.

Following a teleconference with the Division held on February 23, 2023, the Applicant submitted their final container label and carton labeling on February 26, 2024.[b]

3 CONCLUSION

Our review of the Applicant's final container label and carton labeling finds them to be acceptable from a medication error perspective, provided the national drug code (NDC) is updated once the final NDC is determined. Thus, we have no additional recommendations at this time.

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[b] Cover Letter: Submission of the Final Labeling for PI, Carton and Container Agreed with the Division During a Teleconference Held on February 23, 2024 for Clobetasol Propionate Ophthalmic Suspension 0.05% (NDA 218158). Taipei (Taiwan, Republic of China (R.O.C.)): Formosa Pharmaceuticals, Inc.; 2024 FEB 26. Available at: \\CDSESUB1\EVSPROD\nda218158\0020\m1\us\12-cover-letter\cover-letter-0020.pdf.

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/s/

DEBORAH E MYERS
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FOOD AND DRUG ADMINISTRATION
Center for Drug Evaluation and Research
Office of Prescription Drug Promotion

****Pre-decisional Agency Information****

Memorandum

Date: February 14, 2024

To: Kalesha Grayson, Regulatory Project Manager
Office of Regulatory Operations
Division of Ophthalmology

From: Carrie Newcomer, Regulatory Review Officer
Office of Prescription Drug Promotion (OPDP)

CC: James Dvorsky, Team Leader, OPDP

Subject: OPDP Labeling Comments for TRADENAME (clobetasol propionate ophthalmic suspension) 0.05%, for topical ophthalmic use

NDA: 218158

Background:
In response to the Division of Ophthalmology's consult request dated July 7, 2023, OPDP has reviewed the proposed Prescribing Information (PI) and carton and container labeling for the original NDA submission for TRADENAME (clobetasol propionate ophthalmic suspension) 0.05%, for topical ophthalmic use.

PI:
OPDP's review of the proposed PI is based on the draft labeling accessed from SharePoint on February 14, 2024, and our comments are provided below.

Carton and Container Labeling:
OPDP's review of the proposed carton and container labeling is based on the draft labeling accessed from SharePoint on February 13, 2024, and we do not have any comments at this time.

Thank you for your consult. If you have any questions, please contact Carrie Newcomer at carrie.newcomer@fda.hhs.gov.

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NDA 218158 – Clobetasol Propionate Ophthalmic Suspension 0.05%
Carton and Container Comments

FDA Comments

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CARRIE A NEWCOMER
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MEMORANDUM

REVIEW OF REVISED LABEL AND LABELING

Division of Medication Error Prevention and Analysis 1 (DMEPA 1)

Office of Medication Error Prevention and Risk Management (OMEPRM)

Office of Surveillance and Epidemiology (OSE)

Center for Drug Evaluation and Research (CDER)

Date of This Memorandum:	February 12, 2024
Requesting Office or Division:	Division of Ophthalmology (DO)
Application Type and Number:	NDA 218158
Product Name, Dosage Form, and Strength:	clobetasol propionate, 0.05%
Applicant/Sponsor Name:	Formosa Pharmaceuticals, Inc. (Formosa)
TTT ID #:	2023-4692-1
DMEPA 1 Safety Evaluator:	Deborah Myers, RPh, MBA
DMEPA 1 Team Leader:	Valerie S. Vaughan, PharmD

1 PURPOSE OF MEMORANDUM

The Applicant submitted revised container label and carton labeling received on February 9, 2024, for clobetasol propionate ophthalmic suspension. The Division of Ophthalmology (DO) requested that we review the revised container label and carton labeling for clobetasol propionate ophthalmic suspension (Appendix A) to determine if they are acceptable from a medication error perspective. The revisions are in response to recommendations that we made during a previous label and labeling review.[a]

2 BACKGROUND/REGULATORY HISTORY

We note that Formosa submitted their revised container label and carton labeling including both the established name, "clobetasol propionate ophthalmic suspension," and their proposed proprietary name, (b) (4) ***." However, the proposed proprietary name, (b) (4) ***, was found to be unacceptable due to orthographic and phonetic similarities with the proprietary name, (b) (4), under NDA 218158 and IND 128133 on July 31, 2023.[b]

[a] Myers, D. Label and Labeling Review for clobetasol propionate Ophthalmic Nanosuspension (NDA 218158). Silver Spring (MD): FDA, CDER, OSE, DMEPA 1 (US); 2023 AUG 16. TTT ID No.: 2023-4692.

[b] Getahun, S. Proprietary Name Review for (b) (4) *** (NDA 218158 and IND128133). Silver Spring (MD): FDA, CDER, OSE, DMEPA1 (US); 2023 JUL 31. PNR ID No. 2023-1044725130 and 2022-1044724595.

Following the aforementioned unacceptable decision for their proposed proprietary name, Formosa Pharma submitted a request for proposed proprietary name reconsideration on August 15, 2023. However, on October 16, 2023, Formosa submitted a withdrawal request for the reconsideration of the proposed proprietary name, [(b) (4)] and simultaneously submitted a request for review of the proposed proprietary name [(b) (4)]***. On January 8, 2024[c], we found the name [(b) (4)]*** unacceptable due to misbranding concerns.

Subsequently, Formosa resubmitted the proposed proprietary name, [(b) (4)]***, for reconsideration on January 19, 2024, under NDA 218158. Our review concluded that the reconsideration information submitted by Formosa Pharma did not address FDA's concerns. Therefore, we maintained that the proposed proprietary name, [(b) (4)]***, is unacceptable.[d]

Thus, considering that the proposed proprietary name, [(b) (4)]***, has been found unacceptable, this review only considered the revised container label and carton labeling submitted that includes the established name, "clobetasol propionate ophthalmic suspension."

3 CONCLUSION

The Applicant implemented all of our recommendations and we have no additional recommendations at this time.

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[c] Getahun, S. Proprietary Name Review for [(b) (4)]*** (NDA 218158). Silver Spring (MD): FDA, CDER, OSE, DMEPA1 (US); 2024 JAN 09. PNR ID No. 2023-1044725409.

[d] Getahun, S. Proprietary Name Reconsideration Review for [(b) (4)]** (NDA 218158). Silver Spring (MD): FDA, CDER, OSE, DMEPA1 (US); 2024 FEB 09. PNR ID No. 2024-1044725580.

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/s/

DEBORAH E MYERS
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Clinical Inspection Summary

Date	December 20, 2023
From	Roy Blay, Ph.D. Michele Fedowitz, M.D. Jenn Sellers, M.D., Ph.D. Good Clinical Practice Assessment Branch (GCPAB) Division of Clinical Compliance Evaluation (DCCE) Office of Scientific Investigations (OSI)
To	William Boyd, M.D., Deputy Division Director Rhea Lloyd, M.D., Clinical Team Leader Sonal Wadhwa, M.D., Reviewing M.O. Kalesha Grayson, P.M. Division of Ophthalmology
NDA	218158
Applicant	Formosa Pharmaceuticals Inc.
Drug	(b) (4) (clobetasol propionate ophthalmic suspension 0.05%)
NME	No
Therapeutic Classification	Corticosteroid
Proposed Indication(s)	Treatment of post-operative inflammation and pain following ocular surgery
Consultation Request Date	13 Jun 2023
Summary Goal Date	9 Feb 2024
Action Goal Date	4 Mar 2024
PDUFA Date	4 Mar 2024

I. OVERALL ASSESSMENT OF FINDINGS AND RECOMMENDATIONS

Clinical data from Protocols CPN-301 and CPN-302 were submitted to the Agency in support of NDA 218158 for the use of (b) (4) (clobetasol propionate ophthalmic suspension 0.05%) for the treatment of post-operative inflammation and pain following ocular surgery. Three clinical investigators, Drs. Korenfeld, Levenson, and Sadri, were inspected in support of this NDA.

Based on the results of these inspections, Protocols CPN-301 and CPN-302 appear to have been conducted adequately and the data generated by these sites appear acceptable in support of the respective indication.

II. BACKGROUND

The Applicant submitted this NDA to support the use of (b) (4) (clobetasol propionate ophthalmic suspension 0.05%), a corticosteroid, for the treatment of post-operative inflammation and pain following ocular surgery.

Inspections were requested of the following protocols in support of this application:

Protocol Numbers and Titles:

Protocol CPN-301: A Multicenter, Randomized, Double-Masked, Placebo-Controlled, Parallel-Group Study to Evaluate the Efficacy and Safety of APP13007 for the Treatment of Inflammation and Pain After Cataract Surgery,

and

Protocol CPN-302: A Multicenter, Randomized, Double-Masked, Placebo-Controlled, Parallel-Group Study to Evaluate the Efficacy and Safety of APP13007 for the Treatment of Inflammation and Pain After Cataract Surgery, Including a Corneal Endothelial Cell Sub-study.

Protocol CPN-301

This protocol was a multicenter, randomized, double-masked, placebo-controlled, parallel-group Phase 3 trial whose primary efficacy objective was to investigate the efficacy of APP13007 (b) (4), clobetasol propionate ophthalmic nanosuspension, 0.05%) versus matching vehicle placebo for the treatment of inflammation and pain through postoperative day (POD) 15 in subjects undergoing routine uncomplicated cataract surgery in the study eye.

The study consisted of seven clinic visits over a period of three to seven weeks. Eligible subjects experiencing post-operative inflammation at Visit 2 (POD1) were randomized in a 1:1 ratio to either 1 drop APP13007 twice daily (BID) for 14 days instilled to the operated study eye or 1 drop matching vehicle placebo BID for 14 days instilled to the operated study eye. Subjects were ophthalmically assessed at all follow up visits in either both eyes or the study eye alone.

The primary efficacy endpoints were the proportion of subjects with an Anterior Chamber Cell (ACC) Count = 0 [ACC Grade = 0] at POD8, maintained through POD15 and the proportion of subjects with Ocular Pain Grade = 0 at POD4, maintained through POD 15.

This study was initiated at 35 domestic sites with 27 sites contributing subjects to the study. The first subject's first visit was on (b) (6), with the first subject randomized on (b) (6). The last subject's last visit was on (b) (6) A total of 378 subjects were randomized to study drug and treated with at least 1 dose of study drug.

Protocol CPN-302

This protocol is very similar in design to Protocol CPN-301 with both intended to assess the efficacy and safety of APP13007 in subjects experiencing ocular inflammation and pain following routine cataract surgery without complications. Both studies shared the same efficacy objectives, treatment schedules, and subject qualification criteria. CPN-302 differed from CPN - 301 primarily in the addition of a corneal endothelial cell sub-study at the end of the initial study.

This study was initiated at 34 domestic sites with 29 sites contributing subjects to the study. The first subject's first visit was on (b) (6), with the first subject randomized on (b) (6). The last subject's last visit was on (b) (6). A total of 370 subjects were randomized to the study drug.

III. RESULTS

1. **Michael Korenfeld, M.D.**
   901 East Third Street
   Washington, MO 63090

   Site: 112: Protocol CPN-301
   Inspection Dates: 29 Sep-3 Oct 2023

   Dr. Korenfeld was inspected for the conduct of Protocol CPN-301. This was the second inspection of Dr. Korenfeld: the first inspection was in 2008 and did not yield significant findings. At this site, 38 subjects were screened, 36 subjects were enrolled, with one screen failure, one randomization failure, and 20 subjects completed the study. A total of 16 subjects were placed on rescue medication.

   The study files of all screened subjects were reviewed, including the verification of the primary and secondary efficacy endpoints, and the reporting of adverse events. Subject records reviewed included study eligibility, informed consent, randomization, dosing diaries, protocol deviations, discontinuations, and concomitant medications.

   Study related documents reviewed included the Form 1572, IRB, sponsor, and monitor correspondence, training documentation, delegation logs, investigational product (IP) receipt, storage, accountability, and dispensation records, electronic records including access controls and audit trails, and financial disclosures.

   The inspection compared the source documents and electronic case report forms (eCRFs) with the data listings, and no significant discrepancies were observed. Adherence to the regulations and the investigational plan appeared adequate.

2. **Jeffrey Levenson, M.D.**
   751 Oak Street
   Suite 200
   Jacksonville, FL 32204

   Site: 157: Protocol CPN-302
   Inspection Dates: 18-19 Sep 2023

   Dr. Levenson was inspected for the conduct of Protocol CPN-302. This was the fourth inspection of Dr. Levenson; his first inspection in 2000 yielded serious observations while the following two inspections in 2013 and 2015 yielded no observations of significant discrepancies. At this site, 62 subjects were consented, 49 subjects were enrolled, 48 subjects

were randomized, 47 subjects completed the study, 11 subjects were screen failures, and 13 subjects received rescue medication.

The study files of the 62 screened subjects were reviewed, including primary efficacy endpoint and adverse event reporting. Subject records reviewed included study eligibility, medical histories, informed consent, protocol deviations, and concomitant medications.

Study related documents reviewed included Form 1572s, IRB correspondence and approvals, training documentation, delegation logs, IP shipment, storage, accountability, and dispensation records, sponsor and monitor correspondence, electronic records, and financial disclosures.

The inspection compared the source records with the data listings and no significant discrepancies were observed. Adherence to the regulations and the investigational plan appeared adequate.

3. Ehsan Sadri, M.D.
361 Hospital Road
Suite 324
Newport Beach, CA 92663

Site: 167: Protocol CPN-302
Inspection Dates: 11-15 Oct 2023

Dr. Sadri was inspected for the conduct of Protocol CPN-302. This was the first inspection of Dr. Sadri. At this site, 36 subjects were screened, 29 subjects were enrolled, and seven subjects were screen failures. There were 16 subjects completing the trial with 13 requiring rescue medication; of these 13 subjects, 12 were on placebo and one on the investigational product (IP).

The study files of all 29 randomized subjects were reviewed, including the primary efficacy endpoint and adverse event reporting. Subject records reviewed included eligibility criteria, informed consent, demographics, protocol deviations, laboratory findings, and concomitant medications.

Study related documents reviewed included Form 1572s, IRB correspondence and approvals, training documentation and delegation logs, records of IP shipment, receipt, storage, and disposition, sponsor and monitor correspondence, and financial disclosures.

The inspection compared the source records and eCRFs with the data listings. Adherence to the regulations and the investigational plan appeared adequate.

Note: The inspection of Dr. James Fox of Grand Junction, CO, one of the four sites identified for inspection in the amended inspection assignment dated 08/28/23, was canceled after multiple extensions to the due date of the inspection report resulting from human resource limitations in ORA.

{See appended electronic signature page}

Roy Blay, Ph.D.
Good Clinical Practice Assessment Branch
Division of Clinical Compliance Evaluation
Office of Scientific Investigations

CONCURRENCE: {See appended electronic signature page}

Michele Fedowitz, M.D.
Team Leader,
Good Clinical Practice Assessment Branch
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Jenn Sellers, M.D., Ph.D.
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Central Doc. Rm.
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DO/Deputy Director/William Boyd
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DO/MO/Sonal Wadhwa
DO/Project Manager/Kalesha Grayson
OSI/Office Director/David Burrow
OSI/Deputy Director/Laurie Muldowney
OSI/DCCE/Division Director/Kassa Ayalew
OSI/DCCE/GCPAB/Branch Chief/Jenn Sellers
OSI/DCCE/GCPAB/Team Leader/Michele Fedowitz
OSI/DCCE/GCPAB Reviewer/Roy Blay
OSI/DCCE/GCPAB/Program Analyst/Yolanda Patague

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LABEL AND LABELING REVIEW
Division of Medication Error Prevention and Analysis 1 (DMEPA 1)
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***

Date of This Review:	August 16, 2023
Requesting Office or Division:	Division of Ophthalmology (DO)
Application Type and Number:	NDA 218158
Product Name, Dosage Form, and Strength:	clobetasol propionate Ophthalmic Nanosuspension,[a] 0.05%
Product Type:	Combination Product (Drug-Device)
Rx or OTC:	Prescription (Rx)
Applicant/Sponsor Name:	Formosa Pharmaceuticals, Inc. (Formosa)
FDA Received Date:	May 4, 2023
TTT ID #:	2023-4692
DMEPA 1 Safety Evaluator:	Deborah Myers, RPh, MBA
DMEPA 1 Team Leader:	Valerie S. Vaughan, PharmD

[a] The Applicant provided the dosage form (b) (4) throughout their proposed labeling. The Office of Pharmaceutical Quality (OPQ) will make a final determination of the dosage form during the NDA review.

1 REASON FOR REVIEW

As part of the approval process for clobetasol propionate Ophthalmic Nanosuspension, the Division of Ophthalmology (DO) requested that we review the proposed clobetasol propionate prescribing information (PI), container label, and carton labeling for areas of vulnerability that may lead to medication errors.

1.1 REGULATORY HISTORY

NDA 218158 is a 505(b)(2) NDA and the listed drug product is Temovate, NDAs 019322 and 019323.

2 MATERIALS REVIEWED

Table 1. Materials Considered for this Label and Labeling Review

Material Reviewed	Appendix Section (for Methods and Results)
Product Information/Prescribing Information	A
Previous DMEPA Reviews	B
ISMP Newsletters*	C – N/A
FDA Adverse Event Reporting System (FAERS)*	D – N/A
Other	E – N/A
Label and Labeling	F

N/A=not applicable for this review
*We do not typically search FAERS or ISMP Newsletters for our label and labeling reviews unless we are aware of medication errors through our routine postmarket safety surveillance

3 CONCLUSION AND RECOMMENDATIONS

The proposed prescribing information (PI), container label, and carton labeling may be improved to promote the safe use of this product from a medication error perspective. We provide the identified medication error issues, our rationale for concern, and our proposed recommendations to minimize the risk for medication error in Section 4 for the Division and in Section 5 for Formosa Pharmaceuticals, Inc.

4 RECOMMEDATIONS FOR DIVISION OF OPHTHALMOLOGY (DO)

Table 2. Identified Issues and Recommendations for Division of Ophthalmology (DO)			
	IDENTIFIED ISSUE	RATIONALE FOR CONCERN	RECOMMENDATION
Prescribing Information – General Issues			
1.	As currently presented, the numeric strength is presented in multiple units of measure (i.e., 0.05% *versus* 0.5 mg/mL) throughout the labeling.	Product strength designations should include a unit of measure and use that unit of measure consistently across all elements of the labels and labeling.	We recommend ensuring that the unit of measure for the strength (i.e., strength statement) is consistent throughout the labeling (e.g., "Highlights of Prescribing Information", Section 3 *Dosage Forms and Strengths*, and Section 16 *How Supplied/Storage and Handling*). See *Guidance for Industry: Safety Considerations for Product Design to Minimize Medication Errors (April 2016)*.
2.	As currently presented, the dosage form is not provided in Section 3 *Dosage Forms and Strengths* and Section 16 *How Supplied/Storage and Handling.*	The dosage form is required per 21 CFR 201.57(c)(4) and 21 CFR 201.57(c)(17).	Add the dosage form in Section 3 *Dosage Forms and Strengths* and Section 16 *How Supplied/Storage and Handling* in accordance with 21 CFR 201.57(c)(4) and 21 CFR 201.57 (c)(17), respectively. We defer to our Office of Pharmaceutical Quality (OPQ) colleagues to determine the appropriate dosage form for this proposed product. If a different dosage form than what the Applicant proposes is used, the container label and carton labeling will need to be revised accordingly.
Highlights of Prescribing Information			
1.	As currently presented, the dosage form is not provided under the	The dosage form is required per 21 CFR 201.57(c)(4).	Add the dosage form under the heading *Dosage Forms and Strengths*. We defer to our

Table 2. Identified Issues and Recommendations for Division of Ophthalmology (DO)			
	IDENTIFIED ISSUE	RATIONALE FOR CONCERN	RECOMMENDATION
	heading *Dosage Forms and Strengths*.		OPQ colleagues to determine the appropriate dosage form for this proposed product.
Full Prescribing Information – Section 16 *How Supplied/Storage and Handling*			
1.	As currently presented, the text "…plastic 5 mL eye-dropper bottle" and "…in 5 mL bottle…" is included.	Inclusion of the physical size of the bottle (i.e., "5 mL") may be misinterpreted as the volume of the drug product.	To minimize the potential for misinterpretation or confusion, remove both occurrence of the text "5 mL."
Full Prescribing Information – Section 17 *Patient Counseling*			
1.	(b) (4)	The Prescribing Information (PI) is intended for healthcare providers (HCPs) and not patients.	(b) (4) If the Applicant intends to provide separate approved patient labeling (e.g., PPI or Patient Information), then they would need to submit such proposed labeling for Agency review. (b) (4) (b) (4)

5 RECOMMENDATIONS FOR FORMOSA PHARMACEUTICALS, INC.

Table 3. Identified Issues and Recommendations for Formosa Pharmaceuticals, Inc. (entire table to be conveyed to Applicant)			
	IDENTIFIED ISSUE	RATIONALE FOR CONCERN	RECOMMENDATION
Container Label and Carton Labeling			
1.	As currently presented, the format for expiration date is defined as "MMDDYY." However, it is unclear how the month will be expressed.	Clearly defining the expiration date will minimize confusion and the risk for use of deteriorated drug medication errors. For example, presenting the month as 'MA' or 'JU' does not clearly communicate whether 'MA' or 'JU' is for the months of March or May and June or July, respectively.	Clarify how you intend to express the month within the expiration date statement. To minimize confusion and reduce the risk for deteriorated drug medication errors, FDA recommends that the human-readable expiration date on the drug package label include a year, month, and non-zero day. FDA recommends that the expiration date appear in YYYY-MM-DD format if only numerical characters are used or in YYYY-MMM-DD if alphabetical characters are used to represent the month. If there are space limitations on the drug package, the human-readable text may include only a year and month, to be expressed as: YYYY-MM if only numerical characters are used or YYYY-MMM if alphabetical characters are used to represent the month. FDA recommends that a hyphen or forward slash to separate the portions of the expiration date. *See Guidance for Industry: Product Identifiers under the Drug Supply Chain Security Act - Questions and Answers (June 2021).*

Table 3. Identified Issues and Recommendations for Formosa Pharmaceuticals, Inc. (entire table to be conveyed to Applicant)			
	IDENTIFIED ISSUE	RATIONALE FOR CONCERN	RECOMMENDATION
2.	As currently presented, the storage statement "Store upright (b) (4) 15°-25°C (59-77°F) Do Not Freeze" is missing the units of temperature measurement following the first numbers of the temperature range (e.g., Centigrade symbol (C) and Fahrenheit symbol (F)), as well as the degree symbol following the number 59.	The presentation of the storage statement should be clearly stated to avoid storage errors. Additionally, when a hyphen is included in a range instead of the word "to," the hyphen can be overlooked.	To provide clarity, add the Centigrade symbol (C) following "15°" and degree and Fahrenheit symbols (°F) following "59" within the storage statement on both the container label and carton labeling. Additionally, we also recommend replacing the hyphen with its intended meaning "to." For example, "Store upright (b) (4) 15°C to 25°C (59°F to 77°F) Do Not Freeze."
3.	As currently presented, the manufacturer's name (i.e., Formosa Pharmaceuticals, Inc.) and logo competes in prominence with critical product information (e.g., proprietary name, established name, and strength) on the principal display panel (PDP).	Critical product information such as the proprietary name, established name, and product strength should appear as the most prominent information on the PDP in accordance with 21 CFR 201.15.	On the container label, we recommend moving the manufacturer's name and logo to the side panel so it does not compete with the prominence of important product information on the PDP. In the case of the proposed carton labeling, we recommend decreasing the prominence of the manufacturer's information and logo, for example, by increasing the prominence of the critical information and/or minimizing or relocating the manufacturer's name and logo to the bottom of the PDP.
4.	As currently presented, the route of administration "For topical application in the eye" is missing on the container label and is not present on the PDP of	Per 21 CFR 201.100(b)(3), the route of administration is required to appear on the container label. Additionally, the route of administration is	In accordance with 21 CFR 201.100(b)(3) add the route of administration "For topical application in the eye" to the container label.

Table 3. Identified Issues and Recommendations for Formosa Pharmaceuticals, Inc. (entire table to be conveyed to Applicant)			
	IDENTIFIED ISSUE	RATIONALE FOR CONCERN	RECOMMENDATION
	either the container label or carton labeling.	considered critical information that should appear on the PDP. See *Guidance for Industry: Safety Considerations for Container Labels and Carton Labeling Design to Minimize Medication Errors (May 2022)*.[b]	We recommend including the route of administration on the PDP of the container label and carton labeling.
5.	As currently presented, the terminology within the statement of dosage (i.e., (b) (4)) is inconsistent with the terminology in the Prescribing Information.	To ensure consistency with the terminology in the Prescribing Information.	We recommend revising the statement of dosage statement(s) to read, "Dosage: see Prescribing Information."
Carton Labeling			
1.	As currently presented, the machine-readable (2D data matrix barcode) is missing from the product identifier.	In June 2021, FDA finalized the Guidance for Industry on product identifiers required under the Drug Supply Chain Security Act (DSCSA). The Act requires manufacturers and re-packagers to affix or imprint a product identifier to each package and homogenous case of a product intended to be introduced in a transaction in(to) commerce. The product identifier includes the NDC,	We recommend that you add the machine-readable (2D data matrix barcode) to your current product identifier. See Guidance for Industry: Product Identifiers under the Drug Supply Chain Security Act - Questions and Answers (June 2021).

[b] Guidance for Industry: Safety Considerations for Container Labels and Carton Labeling Design to Minimize Medication Errors. May 2022. Available from: https://www.fda.gov/regulatory-information/search-fda-guidance-documents/safety-considerations-container-labels-and-carton-labeling-design-minimize-medication-errors.

Table 3. Identified Issues and Recommendations for Formosa Pharmaceuticals, Inc. (entire table to be conveyed to Applicant)			
	IDENTIFIED ISSUE	RATIONALE FOR CONCERN	RECOMMENDATION
		serial number, lot number, and expiration date in both a human-readable form and machine-readable (2D data matrix barcode) format.	

APPENDICES: METHODS & RESULTS FOR EACH MATERIAL REVIEWED

APPENDIX A. PRODUCT INFORMATION/PRESCRIBING INFORMATION

Table 4 presents relevant product information for clobetasol propionate that Formosa Pharmaceuticals, Inc. submitted on May 4, 2023, and the Temovate.[c]

Table 4. Relevant Product Information for Listed Drug and clobetasol propionate		
Product Name	Temovate	clobetasol propionate
Application Type and Number (Applicant)	NDAs 019322 and NDA 019323 (Fougera Pharmaceuticals, Inc.)	NDA 218158 (Formosa Pharmaceuticals, Inc.)
Initial Approval Date	12/27/1985	N/A
Active Ingredient	clobetasol propionate	
Indication	For the relief of the inflammatory and pruritic manifestations of corticosteroid-responsive dermatoses.	For the treatment of post-operative inflammation and pain following ocular surgery.
Route of Administration	topical	
Dosage Form	Cream (NDA 019322) Ointment (NDA 019323)	Ophthalmic (b) (4)
Strength	0.05%	0.05% (0.5 mg/mL)
Dose and Frequency	Apply a thin layer to the affected skin areas twice daily and rub in gently and completely. Treatment should be limited to 2 consecutive weeks and amounts greater than 50 g/week should not be used.	Instill one drop into the affected eye twice daily beginning the day after surgery and continuing throughout the first 2 weeks of the post-operative period.
How Supplied	15 g, 30 g, 45 g, and 60 g tubes	3.5 mL
Storage	Store between 15° and 30°C (59° and 86°F). TEMOVATE cream should not be refrigerated.	Store upright at 15°C to 25°C (59°F to 77°F). Do not freeze.
Container Closure	1 tube in 1 carton	Supplied in a multi-dose white (b) (4) low-density polyethylene (LDPE) plastic

[c] Temovate (clobetasol propionate) Cream and Ointment, 0.05% [Prescribing Information]. Drugs@FDA. U.S. Food and Drug Administration. JUL 2000 [Cited 2023 JUN 21]. Available from: https://www.accessdata.fda.gov/drugsatfda_docs/label/2003/019322s018lbl.pdf.

		5 mL eye-dropper bottle with a (b) (4) LDPE white tip (b) (4) and (b) (4) a high-density polyethylene (HDPE) pink cap with a tamper-proof ring at the bottom of the cap.

APPENDIX B. PREVIOUS DMEPA REVIEWS

On June 22, 2023, we searched for previous DMEPA reviews relevant to this current review using the term, "clobetasol propionate" and including the same intended route of administration, ophthalmic. Our search identified one previous reviews[d], and we considered our previous recommendations to see if they are applicable for this current review.

[d] Getahun, S. Label and Labeling Review for (b) (4) Silver Spring (MD): FDA, CDER, OSE, DMEPA 1 (US); (b) (4)

APPENDIX F. LABELS AND LABELING

F.1 List of Labels and Labeling Reviewed

Using the principles of human factors and Failure Mode and Effects Analysis,[e] along with postmarket medication error data, we reviewed the following clobetasol propionate labels and labeling submitted by Formosa Pharmaceuticals, Inc.

- Container label received on May 4, 2023
- Carton labeling received on May 4, 2023
- Prescribing Information (PI) (Images not shown) received on May 4, 2023
    - Cleaned proposed (Draft) PI available at the following link: \\CDSESUB1\EVSPROD\nda218158\0001\m1\us\114-labeling\114a-draft-label\proposed-uspi-label.doc.
    - Annotated PI comparison with the listed drug available at the following link: \\CDSESUB1\EVSPROD\nda218158\0001\m1\us\114-labeling\114c-list-drug-label\annotated-draft-labeling.pdf.
    - Approved PI for listed drug available at the following link: \\CDSESUB1\EVSPROD\nda218158\0001\m1\us\114-labeling\114c-list-drug-label\temovate-pi-2000.pdf.

F.2 Label and Labeling Images

Container label

(b) (4)

1 Page of Draft Labeling has been Withheld in Full as b4 (CCI/TS) immediately following this page

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

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