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RESEARCH**

APPLICATION NUMBER:

22-301

LABELING

HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use APRISO safely and effectively. See full prescribing information for APRISO.

APRISO™ (mesalamine) extended-release capsules
Initial U.S. Approval: 1987

-----INDICATIONS AND USAGE-----

- APRISO is a locally-acting aminosalicilate indicated for the maintenance of remission of ulcerative colitis in adults (1)

-----DOSAGE AND ADMINISTRATION-----

- Four APRISO capsules once daily (1.5 g/day) in the morning with or without food. Do not co-administer with antacids (2)

----DOSAGE FORMS AND STRENGTHS----

- Extended-release capsules: 0.375 g (3)

-----CONTRAINDICATIONS-----

- Hypersensitivity to salicylates, aminosalicilates, or any component of APRISO capsules (4)

-----WARNINGS AND PRECAUTIONS-----

- Renal impairment may occur. Assess renal function at the beginning of treatment and periodically during therapy (5.1)
- Acute exacerbation of colitis symptoms can occur (5.2)
- Use caution with pre-existing liver disease (5.4)

-----ADVERSE REACTIONS-----

- The most common adverse reactions (incidence $\geq 3\%$) are headache, diarrhea, upper abdominal pain, nausea, nasopharyngitis, flu or flu-like illness, sinusitis (6.1)

To report SUSPECTED ADVERSE REACTIONS, contact Salix Pharmaceuticals, Inc. at 1-800-508-0024 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

-----DRUG INTERACTIONS-----

- Do not co-administer with antacids (7.1)

-----USE IN SPECIFIC POPULATIONS-----

- Use with caution in patients with renal disease (5.1)
- Monitor blood cell counts in geriatric patients (8.5)
- Advise patients with phenylketonuria that APRISO contains aspartame (17.1)

See 17 for PATIENT COUNSELING INFORMATION

Revised: 10/2008

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* Sections or subsections omitted from the full prescribing information are not listed

1 **FULL PRESCRIBING INFORMATION**

2
3 **1 INDICATIONS AND USAGE**

4 APRISO capsules are indicated for the maintenance of remission of ulcerative colitis in
5 patients 18 years of age and older.
6

7 **2 DOSAGE AND ADMINISTRATION**

8 The recommended dose for maintenance of remission of ulcerative colitis in adult
9 patients is 1.5 g (four APRISO capsules) orally once daily in the morning. APRISO
10 may be taken without regard to meals. APRISO should not be co-administered with
11 antacids. An evaluation of renal function is recommended before initiating therapy
12 with APRISO.
13

14 **3 DOSAGE FORMS AND STRENGTHS**

15 Extended-release capsules containing 0.375 g mesalamine.
16

17 **4 CONTRAINDICATIONS**

18 APRISO is contraindicated in patients with hypersensitivity to salicylates or aminosaliclates
19 or to any of the components of APRISO capsules.
20

21 **5 WARNINGS AND PRECAUTIONS**

22 **5.1 Renal Impairment**

23 Renal impairment, including minimal change nephropathy, acute and chronic interstitial
24 nephritis, and, rarely, renal failure, has been reported in patients given products such as
25 APRISO that contain mesalamine or are converted to mesalamine.
26

27 It is recommended that patients have an evaluation of renal function prior to initiation of
28 APRISO therapy and periodically while on therapy. Exercise caution when using APRISO
29 in patients with known renal dysfunction or a history of renal disease.
30

31 In animal studies, the kidney was the principal organ for toxicity [*See Nonclinical Toxicology*
32 (*13.2*)]
33

34 **5.2 Mesalamine-Induced Acute Intolerance Syndrome**

35 Mesalamine has been associated with an acute intolerance syndrome that may be difficult to
36 distinguish from a flare of inflammatory bowel disease. Although the exact frequency of
37 occurrence has not been determined, it has occurred in 3% of patients in controlled clinical
38 trials of mesalamine or sulfasalazine. Symptoms include cramping, acute abdominal pain
39 and bloody diarrhea, sometimes fever, headache, and rash. If acute intolerance syndrome is
40 suspected, promptly discontinue treatment with APRISO.
41

42 **5.3 Hypersensitivity**

43 Some patients who have experienced a hypersensitivity reaction to sulfasalazine may have a
44 similar reaction to APRISO capsules or to other compounds that contain or are converted to
45 mesalamine.

46
47 **5.4 Hepatic Impairment**

48 There have been reports of hepatic failure in patients with pre-existing liver disease who have
49 been administered mesalamine. Caution should be exercised when administering APRISO to
50 patients with liver disease.

51

52 **6 ADVERSE REACTIONS**

53 **6.1 Clinical Studies Experience**

54 The data described below reflect exposure to APRISO in 557 patients, including 354 exposed
55 for at least 6 months and 250 exposed for greater than one year. APRISO was studied in two
56 placebo-controlled trials (n = 367 treated with APRISO) and in one open-label, long-term
57 study (n = 190 additional patients). The population consisted of patients with ulcerative
58 colitis; the mean age was 47 years, 54% were female, and 93% were white. Patients received
59 doses of APRISO 1.5 g administered orally once per day for six months in the placebo-
60 controlled trials and for up to 24 months in the open-label study.

61

62 Because clinical studies are conducted under widely varying conditions, adverse reaction
63 rates observed in the clinical trials of a drug cannot be directly compared to rates in the
64 clinical trials of another drug and may not reflect the rates observed in practice.

65

66 In the two placebo-controlled trials, 59% of APRISO-treated patients experienced an adverse
67 reaction compared with 64% of placebo patients. Most adverse reactions with APRISO were
68 mild or moderate in severity. Severe adverse reactions occurred in 6% of APRISO-treated
69 patients and 5% of placebo-treated patients. Discontinuations due to adverse reactions
70 occurred in 11% of APRISO-treated patients and 17% of placebo-treated patients; the most
71 common adverse reaction resulting in study discontinuation was recurrence of ulcerative
72 colitis (APRISO 6%, placebo 14%). The most common reactions reported with APRISO
73 ($\geq 3\%$) are shown in Table 1 below.

74

75
76
77

**Table 1: Treatment-Emergent Adverse Reactions during Clinical Trials
Occurring in at Least 3% of APRISO-Treated Patients
and at a Greater Rate than with Placebo**

MedDRA Preferred Term	APRISO 1.5 g/day N=367	Placebo N=185
Headache	11%	8%
Diarrhea	8%	7%
Abdominal Pain Upper	5%	3%
Nausea	4%	3%
Nasopharyngitis	4%	3%
Influenza & Influenza-like illness	4%	4%
Sinusitis	3%	3%

78

79 The following adverse reactions, presented by body system, were reported at a frequency less
80 than 3% in patients treated with APRISO for up to 24 months in controlled and open-label
81 trials.

82

83 Ear and Labyrinth Disorders: tinnitus, vertigo

84

85 Dermatological Disorder: alopecia

86

87 Gastrointestinal: abdominal pain lower, rectal hemorrhage

88

89 Laboratory Abnormalities: increased triglycerides, decreased hematocrit and hemoglobin

90

91 General Disorders and Administration Site Disorders: fatigue

92

93 Hepatic: hepatitis cholestatic, transaminases increased

94

95 Renal Disorders: creatinine clearance decreased, hematuria

96

97 Musculoskeletal: pain, arthralgia

98

99 Respiratory: dyspnea

100

101 6.2 Adverse Reaction Information from Other Sources

102 The following adverse reactions have been identified during clinical trials of a product
103 similar to APRISO and post approval use of other mesalamine-containing products such as
104 APRISO. Because many of these reactions are reported voluntarily from a population of
105 unknown size, it is not always possible to reliably estimate their frequency or establish a
106 causal relationship to drug exposure.

107

108 Body as a Whole: lupus-like syndrome, drug fever

109

Cardiovascular: pericarditis, pericardial effusion, myocarditis

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