DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA 202343/S-005 and S-007

SUPPLEMENT APPROVAL

Merck Sharp & Dohme Corp.
Attention: Lou Ann Eader, Ph.D.
Director, Regulatory Affairs
P.O. Box 1000, UG2C-50
North Wales, PA 19454-1099

Dear Dr. Eader:

Please refer to your Supplemental New Drug Application (sNDA) dated and received July 18, 2012 (S-005) and September 21, 2012 (S-007), submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Juvisync (sitagliptin/simvastatin) Tablets.

We acknowledge receipt of your amendments dated October 2 (S-005), October 15 (S-005 and S-007), and October 22 (S-005 and S-007), 2012.

Supplemental new drug application, S-005, provides information regarding the concomitant use of Juvisync and dronedarone, the co-administration of Juvisync with voriconazole, and updated information on the concomitant use of grapefruit juice to the package insert for Juvisync. This was submitted in response to our Prior Approval Supplement Request letter for Zocor (simvastatin) dated June 5, 2012.

We also refer to our letter dated August 22, 2012, notifying you, under Section 505(o)(4) of the FDCA, of new safety information that we believe should be included in the labeling for Juvisync. This information pertains to the risk of immune-mediated necrotizing myopathy (IMNM).

Supplemental new drug application, S-007, provides for revisions to the labeling for Juvisync. The agreed upon changes to the language included in our August 22, 2012, letter are as follows (additions are noted by underline and deletions are noted by ~~strikethrough~~).

In the Full Prescribing Information, under **WARNINGS AND PRECAUTIONS, 5.2 Myopathy/Rhabdomyolysis:**

There have been rare reports of ~~i~~immune-mediated necrotizing myopathy (IMNM), an autoimmune myopathy, associated with [redacted] statin [redacted] use. [redacted] IMNM [redacted] is characterized by: proximal muscle weakness and elevated serum creatine kinase, which persist despite discontinuation of statin treatment; muscle biopsy showing necrotizing myopathy without significant inflammation; improvement with immunosuppressive agents.

[redacted]

In the Full Prescribing Information, under **ADVERSE REACTIONS, 6.2 Postmarketing Experience**:

Anemia; depression; headache; dizziness; paresthesia; peripheral neuropathy; interstitial lung disease; pancreatitis; acute pancreatitis, including fatal and non-fatal hemorrhagic and necrotizing pancreatitis *[see Indications and Usage (1.3); Warnings and Precautions (5.1)]*; constipation; vomiting; hepatitis/jaundice; fatal and non-fatal hepatic failure; hepatic enzyme elevations; pruritus; alopecia; a variety of skin changes (e.g., nodules, discoloration, dryness of skin/mucous membranes, changes to hair/nails); muscle cramps; myalgia; rhabdomyolysis [redacted] worsening renal function, including acute renal failure (sometimes requiring dialysis); erectile dysfunction.

There have been rare reports of immune-mediated necrotizing myopathy associated with statin use [see *Warnings and Precautions (5.2).*

In the Medication Guide, under **What are the possible side effects of JUVISYNC?**, **Serious side effects have happened in people taking JUVISYNC., myopathy (muscle weakness) and rhabdomyolysis (muscle breakdown):**

[redacted] If you have muscle problems that do not go away even after your doctor has advised you to stop [redacted] taking JUVISYNC, notify your doctor. Your doctor may do further tests to diagnose the cause of your muscle problems.

We have completed our review of these supplemental applications, as amended. They are approved, effective on the date of this letter, for use as recommended in the enclosed, agreed-upon labeling text.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. Content of labeling must be identical to the enclosed labeling (text for the package insert and Medication Guide), with the addition of any labeling changes in pending "Changes Being Effected" (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

Information on submitting SPL files using eLIST may be found in the guidance for industry titled "SPL Standard for Content of Labeling Technical Qs and As" at http://www.fda.gov/downloads/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in MS Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes and annotate each change. To facilitate review of your submission, provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) the package insert(s) to:

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Prescription Drug Promotion (OPDP)
5901-B Ammendale Road
Beltsville, MD 20705-1266

You must submit final promotional materials and package insert(s), accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. Form FDA 2253 is available at http://www.fda.gov/opacom/morechoices/fdaforms/cder.html; instructions are provided on page 2 of the form. For more information about submission of

promotional materials to the Office of Prescription Drug Promotion (OPDP), see http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm.
All promotional materials that include representations about your drug product must be promptly revised to be consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 314.70(a)(4)]. The revisions in your promotional materials should include prominent disclosure of the important new safety information that appears in the revised package labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 314.70(a)(4) to the address above or by fax to 301-847-8444.

REPORTING REQUIREMENTS

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

If you have any questions, call Raymond Chiang, Regulatory Project Manager, at (301) 796-1940.

Sincerely,

{See appended electronic signature page}

Amy G. Egan, M.D., M.P.H.
Deputy Director for Safety
Division of Metabolism and Endocrinology Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

ENCLOSURES:
Package Insert
Medication Guide

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

AMY G EGAN
10/31/2012