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{Part of Complete Approval Document 5204906A} Climara 0.025mg Transdermal System (Berlex Laboratories) 04/05/2001 Supplemental Approval [Severe Vasomotor Symptoms and Vulvar and Vaginal Atrophy]: S16 Approval Letter; Final Labeling

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Public Health Service



Food and Drug Administration Rockville MD 20857

NDA 20-375/S-016

Berlex Laboratories, Inc. Attention: Geoffrey Millington Manager, Drug Regulatory Affairs 340 Changebridge Road P.O. Box 1000 Montville, NJ 07450-1000

Dear Mr. Millington

Please refer to your supplemental new drug application dated June 2, 2000, received June 5, 2000, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Climara[®] (Estradiol transdermal System) 0.025, 0.05, 0.075, 0.1 mg/day.

We acknowledge receipt of your submissions dated July 31, August 4, 10, 17, 18, and September 15, 2000, January 5, February 13 and March 19, 21, 27, April 3 and April 4, 2001.

This supplemental new drug application provides for the use of the 0.025 mg/day Climara[®] (Estradiol transdermal System) for the treatment of moderate to severe vasomotor symptoms and vulvar and vaginal atrophy associated with the menopause.

We have completed the review of this supplemental application, as amended, and have concluded that adequate information has been presented to demonstrate that the drug product is safe and effective for use as recommended in the agreed upon labeling text. Accordingly, the supplemental application is approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the enclosed labeling (package insert submitted April 4, 2001 and patient package insert submitted April 4, 2001).

Please submit the copies of final printed labeling (FPL) electronically according to the guidance for industry titled *Providing Regulatory Submissions in Electronic Format - NDA* (January 1999). Alternatively, you may submit 20 paper copies of the FPL as soon as it is available but no more than 30 days after it is printed. Please individually mount ten of the copies on heavy-weight paper or similar material. For administrative purposes, this submission should be designated "FPL for approved supplement NDA 20-375/S-016." Approval of this submission by FDA is not required before the labeling is used.

Be advised that, as of April 1, 1999, all applications for new active ingredients, new dosage forms, new indications, new routes of administration, and new dosing regimens are required to contain an assessment of the safety and effectiveness of the product in pediatric patients unless this requirement is waived or deferred (63 FR 66632). We are waiving the pediatric study requirement for this action on this application.



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In addition, please submit three copies of the introductory promotional materials that you propose to use for this product. All proposed materials should be submitted in draft or mock-up form, not final print. Please submit one copy to this Division and two copies of both the promotional materials and the package insert directly to:

Division of Drug Marketing, Advertising, and Communications, HFD-42 Food and Drug Administration 5600 Fishers Lane Rockville, Maryland 20857

If a letter communicating important information about this drug product (i.e., a "Dear Health Care Professional" letter) is issued to physicians and others responsible for patient care, we request that you submit a copy of the letter to this NDA and a copy to the following address:

MEDWATCH, HF-2 FDA 5600 Fishers Lane Rockville, MD 20857

Please submit one market package of the drug product when it is available.

We remind you that you must comply with the requirements for an approved NDA set forth under 21 CFR 314.80 and 314.81.

If you have any questions, call Diane Moore, BS, Regulatory Project Manager, at (301) 827-4260.

Sincerely,

{See appended electronic signature page?

Susan Allen, M.D.

Director

Division of Reproductive and Urologic Drug Products

Office of Drug Evaluation III

Center for Drug Evaluation and Research



CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER: 20-375/S-016

FINAL PRINTED LABELING



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Rx Only

PRESCRIBING INFORMATION

Climara® estradiol transdermal system

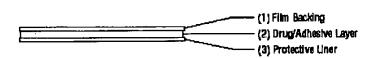
- ESTROGENS INCREASE THE RISK OF ENDOMETRIAL CANCER. Close clinical surveillance of all women taking estrogens is important. Adequate diagnostic measures, including endometrial sampling when indicated, should be undertaken to rule out malignancy in all cases of undiagnosed persistent or recurring abnormal vaginal bleeding. There is currently no evidence that the use of natural estrogens results in a different endometrial risk profile than synthetic estrogens of equivalent estrogen doses.
- There is no indication for estrogen therapy during pregnancy or during the immediate postpartum period. Estrogens are ineffective for the prevention or treatment of threatened or habitual abortion. Estrogens are not indicated for the prevention of postpartum breast engorgement.

DESCRIPTION

Climara[®], estradiol transdermal system, is designed to release 17β-estradiol continuously upon application to intact skin. Four (6.5, 12.5, 18.75 and 25.0 cm²) systems are available to provide nominal *in vivo* delivery of 0.025, 0.05, 0.075 or 0.1 mg respectively of estradiol per day. The period of use is 7 days. Each system has a contact surface area of either 6.5, 12.5, 18.75 or 25.0 cm², and contains 2.0, 3.8, 5.7 or 7.6 mg of estradiol USP respectively. The composition of the systems per unit area is identical.

Estradiol USP (17 β -estradiol) is a white, crystalline powder, chemically described as estra-1,3,5(10)-triene-3,17 β -diol. It has an empirical formula of C₁₈H₂₄O₂ and molecular weight of 272.37. The structural formula is:

The Climara® system comprises two layers. Proceeding from the visible surface toward the surface attached to the skin, these layers are (1) a translucent polyethylene film, and (2) an acrylate adhesive matrix containing estradiol USP. A protective liner (3) of siliconized or fluoropolymer-coated polyester film is attached to the adhesive surface and must be removed before the system can be used.





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