DEPARTMENT OF HEALTH & HUMAN SERVICES



Food and Drug Administration Rockville MD 20857

September 6, 2000

Dear Pregnancy Labeling Subcommittee Members and Guests:

Enclosed please find a second mailing of materials for the **September 12, 2000** morning meeting of the Pregnancy Labeling Subcommittee. The meeting will convene at 10:00 am at the Hyatt Regency Bethesda.

The following additional documents are included in this package:

- Federal Register Notice announcing the meeting
- Draft meeting Agenda
- Background and Discussion Questions for the Subcommittee
- List of Pregnancy "Category D" products from the current on-line PDR

I wanted to also let you know that if you are staying at the Bethesda Holiday Inn the evening before the meeting, we will have a shuttle bus available in the morning to take you to the Hyatt Regency Bethesda for the meeting. Alternatively, the Hyatt is a five (5) block walk south down Wisconsin Avenue from the Holiday Inn. This shuttle will leave the Holiday Inn at 9:30am. Please meet at the Holiday Inn front desk no later than 9:25 a.m. I would advise that you check out of the hotel at that time and bring your luggage with you because there will not be time during the noon lunch hour to do so.

Please do not hesitate to contact me if you have any general meeting questions. You should have already received meeting travel documents from this office. Questions specifically about travel can be directed to Rebecca Diaz. Our general telephone number is (301) 827-7001.

I look forward to a very interesting meeting.

Sincerely,

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Jayne E. Peterson, R.Ph., J.D. Health Science Administrator/Subcommittee Executive Secretary Advisors and Consultants Staff Center for Drug Evaluation and Research (CDER) Food and Drug Administration (301) 827-7001 (301) 827-6776 (fax)

Enclosures

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Advisory Committee for Reproductive Health Drugs; Pregnancy Labeling Subcommittee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

<u>Name of Committee</u>: Advisory Committee for Reproductive Health Drugs; Pregnancy Labeling Subcommittee.

<u>General Function of the Committee</u>: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on September 12, 2000, 10 a.m. to 12m.

Location: Hyatt Regency, One Bethesda Metro Center, Bethesda, MD.

Contact Person: Jayne E. Peterson, R.Ph., J.D., Center for Drug Evaluation and Research (HFD-21), Food and Drug Administration, 5630 Fishers Lane, Rockville, MD 20857, 301-827-7001, or by e-mail at PETERSONJ@CDER.FDA.GOV, or FDA Advisory Committee Information Line, 1-800-741-8138 (301-443-0572 in the Washington, DC area), code 12537. Please call the Information Line for up-to-date information on this meeting. Agenda: The Subcommittee will meet to identify and discuss those drug and biologic products for which improved pregnancy labeling is critical for (1) effective prescribing during pregnancy, or (2) proper counseling of pregnant women who have been inadvertently exposed.

Procedure: Interested persons may present data, information, or views, orally or in writing on issues pending before the subcommittee. Written submissions may be made to the contact person by September 6, 2000. Oral presentations from the public will be scheduled between approximately 11 a.m. and 12m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before September 6, 2000, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated August 4, 2000

Jayne Peterson, R.Ph., J.D. Executive Secretary

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Food and Drug Administration Center for Drug Evaluation and Research

Pregnancy Labeling Subcommittee of the Advisory Committee for Reproductive Health Drugs

Hyatt Regency, One Metro Center, Bethesda, Maryland

DRAFT AGENDA

Tuesday, September 12, 2000, 10:00 a.m. - 12:00 noon

Issue: Identification and discussion of those drug and biologic products for which improved pregnancy labeling is critical for (1) effective prescribing during pregnancy, or (2) proper counseling of pregnant women who have been inadvertently exposed

10:00 a.m.Call to Order/IntroductionsMichael Greene, M.D., Chair, Pregnancy Labeling Subcommittee

Conflict of Interest Statement

Jayne Peterson, R.Ph., J.D., Executive Secretary Pregnancy Labeling Subcommittee, FDA

- 10:10 a.m. Background Information and Overview Sandra L. Kweder, M.D., Acting Director, Office of Drug Evaluation IV, and Co-Chair, Pregnancy Labeling Task Force, FDA
- 10:15 a.m. Setting Priorities for Implementing the Pregnancy Labeling Rule Dianne L. Kennedy, R.Ph., M.P.H Pregnancy Labeling Initiative, FDA
- 10:40 a.m. Subcommittee Discussion of Issues
- 11:00 a.m. Open Public Hearing (**60 minutes allocated unless public participation does not last that long.)
- 11:55 a.m. Closing Remarks Sandra Kweder, M.D.
- 12:00 noon Adjourn

Food and Drug Administration Center for Drug Evaluation and Research

Pregnancy Labeling Subcommittee of the Advisory Committee for Reproductive Health Drugs

Hyatt Regency, One Metro Center, Bethesda, Maryland

Tuesday, September 12, 2000, 10am – 12pm

BACKGROUND & DRAFT QUESTIONS TO THE SUBCOMMITTEE

BACKGROUND

General Implementation Plan to Revise Pregnancy Labeling : The agency is currently in the process of changing the general format of labeling for all prescription drugs. Because of anticipated resource demands on industry to develop revised labeling and on the agency to review and approve revised labeling, the implementation plan will phase in the new format requirement over a period of several years. Under the plan that will be proposed, when drugs have to have revised labeling will be determined based on date of approval. The rule would apply to newer drugs first, starting with those yet to be approved. Fairly old drugs would not have revised labeling for many years, if at all. For the rule to revise pregnancy labeling, the tentative plan is to require that, for most products, revisions to pregnancy labeling occur at the same time as revisions to the general format.

Accelerated Implementation Plan for Products Considered to be High Priority: The agency is also considering an accelerated implementation plan for certain products for which it would be important to have improved pregnancy labeling as soon as possible—products for which it would not be reasonable to wait for many years to have more informative labeling. Our preliminary thinking is that there are two general categories of products (with considerable overlap) that might benefit from an accelerated implementation plan to improve pregnancy labeling: (1) drugs to which women are likely to be inadvertently exposed during pregnancy and (2) drugs for which there is a pressing therapeutic need during pregnancy.

The agency is seeking advisory subcommittee input on whether it is worthwhile to pursue an accelerated implementation for products for which improved pregnancy labeling would seem to be a high priority and, if so, how to identify and rank products that should be high priority.

QUESTIONS

- (1) In general, is an accelerated implementation plan for certain high priority products a worthwhile endeavor from a public health perspective?
- (2) If so, what criteria should we use to identify priority (or non-priority) products?
- (3) How would you suggest identifying specific products that meet these criteria?

Pregnancy Labeling Category D (CFR 201.57(f)(6)(d))

If there is positive evidence of human fetal risk based on adverse reaction data from investigational or marketing experience of studies in humans, but the potential benefits from the use of the drug is pregnant women may be acceptable despite its potential risks (for example, if the drug is needed in a life-threatening situation or serious disease for which safer drugs cannot be used or are ineffective). The labeling shall state:

"Pregnancy Category D. See 'Warnings' section."

Under the "Warnings" section, the labeling states:

"(Name of drug) can cause fetal harm when administered to a pregnant women. (Describe the human data and any pertinent animal data.) If this drug is used during pregnancy, or if the patient becomes pregnant while taking this drug, the patient should be apprised of the potential hazard to the fetus."

CATEGORY D PRODUCTS (SOURCE: On-line PDR 9/1/00)

Drug Name

Adriamycin PFS/RDF Injection Aggrenox Capsules Alkeran for Injection Alkeran Tablets Amikacin Sulfate Injection, USP Arimidex Tablets Aromasin Tablets Ativan Injection BICNU Blenoxane Camptosar Injection Carbatrol Capsules **CeeNU** Capsules **Cerebyx Injection** Cerubidine for Injection Cordarone Intravenous **Cordarone Tablets** Cytosar-U Sterile Powder Cytoxan for Injection DaunoXome Injection **Depacon Injection Depakene** Capsules Depakote Sprinkle Capsules **Depakote Tablets** DepoCyt Injection **Diastat Rectal Delivery System Doxil Injection Droxia Capsules Dynacin Capsules Ellence** Injection **Etopophos for Injection Eulexin Capsules Fareston Tablets** Fludara for Injection Gemzar for Injection Gliadel Wafer Hexalen Capsules Hycamtin for Injection Idamycin PFS Injection Ifex for Injection Imuran Injection **Klonopin Tablets** Leukeran Tablets Leustatin Injection Lithium Carbonate Capsules & Tablets Lithobid Slow-Release Tablets Matulane Capsules Mebaral Tablets **Megace Tablets Minocin Pellet-Filled Capsules**

Manufacturer, Pharmacia & Upjohn Boehringer Ingelheim Glaxo Wellcome Glaxo Wellcome Elkins-Sinn AstraZeneca Pharmacia & Upjohn Wveth-Averst Bristol-Myers Squibb Oncology/Immunology Bristol-Myers Squibb Oncology/Immunology Pharmacia & Upiohn Shire Richwood Bristol-Myers Squibb Oncology/Immunology Parke-Davis Bedford Wyeth-Averst Wyeth-Ayerst Pharmacia & Upjohn Bristol-Myers Squibb Oncology/Immunology Gilead Abbott Abbott Abbott Abbott Chiron Elan Alza Bristol-Myers Squibb Oncology/Immunology Medicis Pharmacia & Upjohn Bristol-Myers Squibb Oncology/Immunology Schering SCHERING CORPORATION Berlex Lilly **Rhone-Poulenc Rorer** U.S. Bioscience SmithKline Beecham Pharmacia & Upjohn Bristol-Myers Squibb Oncology/Immunology Faro **Roche Laboratories** Glaxo Wellcome Ortho Biotech Roxane Solvay sigma-tau Sanofi Bristol-Myers Squibb Oncology/Immunology Lederle Consumer

Monodox Capsules Mustargen for Injection **Myleran Tablets** Navelbine Injection Nebcin Vials, Hyporets & ADD-Vantage Nembutal Sodium Capsules Nembutal Sodium Solution Nembutal Sodium Suppositories Neosporin G.U. Irrigant Sterile Netromycin Injection 100 mg/ml Neutrexin for Injection Nicotrol Inhaler Nicotrol Nasal Spray Nipent for Injection **Nolvadex Tablets** Novantrone for Injection **Oncovin Solution Vials** Pacerone Tablets Panretin Gel Paraplatin for Injection **Periostat Capsules** Platinol-AQ Injection **Purinethol Tablets** Rubex for Injection Sterile FUDR Streptomycin Sulfate Injection **Taxol Injection** Taxotere for Injection Concentrate **Tegretol Chewable Tablets Temodar Capsules Tenoretic Tablets** Tenormin I.V. Injection Thioguanine Tablets, Tabloid Brand Thioplex for Injection **TOBI Solution for Inhalation** Vectrin Capsules Velban Vials VePesid for Injection Versed Injection Versed Syrup Vesanoid Capsules Vibramycin Monohydrate for Oral Suspension Vumon for Injection Xanax Tablets Xeloda Tablets Zanosar Sterile Powder Zoladex

Oclassen Merck Glaxo Wellcome Glaxo Wellcome Lilly Abbott Abbott Abbott Monarch SCHERING CORPORATION U.S. Bioscience McNeil Consumer **McNeil Consumer** SuperGen AstraZeneca Immunex Lilly Upsher-Smith Ligand Bristol-Myers Squibb Oncology/Immunology CollaGenex Bristol-Myers Squibb Oncology/Immunology Glaxo Wellcome Bristol-Myers Squibb Oncology/Immunology Roche Laboratories Pfizer Bristol-Myers Squibb Oncology/Immunology **Aventis** Novartis Schering AstraZeneca AstraZeneca Glaxo Wellcome Immunex Pathogenesis Warner Chilcott Lilly Bristol-Myers Squibb Oncology/Immunology **Roche Laboratories Roche Laboratories Roche Laboratories** Pfizer Bristol-Myers Squibb Oncology/Immunology Pharmacia & Upjohn **Roche Laboratories** Pharmacia & Upjohn AstraZeneca