Food and Drug Administration
Center for Drug Evaluation and Research

SUMMARY MINUTES OF THE DERMATOLOGIC & OPHTHALMIC DRUGS ADVISORY COMMITTEE

Ophthalmic Drugs Subcommittee of the Dermatologic & Ophthalmic Drugs Advisory Committee

November 17, 1999

Holiday Inn, Bethesda, MD

NDA 21-119 Visudyne™ (verteporfin for injection, QLT Therapeutics, Inc.), for treatment of age-related macular degeneration (AMD) in patients with predominantly classic subfoveal choroidal neovascularization.

Members Present

Donald S. Fong, M.D., MPH (Chair)
George (Jack) A. Cioffi, M.D.
Leon W. Herndon, Jr., M.D.
Johanna M. Seddon, M.D.
Jacquelyn L. Goldberg, J.D.
(Consumer Representative)

Members Not Present

Lynn Drake, M.D.
Robert Jordon, M.D.
Henry Lim, M.D.
O. Fred Miller, III, M.D.
Robert Stern, M.D.
Eva Simmons-O'Brien, M.D.

FDA Consultant

S. James Kilpatrick, Jr., Ph.D.

FDA Participants

Robert DeLap, M.D.
Karen Midthun, M.D.
Wiley A. Chambers, M.D.
Lori Gorski, Project Manager

Executive Secretary

Tracy Riley

These summary minutes for the November 17, 1999, Meeting of the Ophthalmic Drugs Subcommittee of the Dermatologic and Ophthalmic Drugs Advisory Committee were approved on 3/7/00.

I certify that I attended the November 17, 1999, Committee meeting and that these minutes accurately reflect what transpired.

Tracy Riley
Executive Secretary

Donald S. Fong, M.D., MPH
Chairman

A meeting of the Center for Drug Evaluation and Research Ophthalmic Drugs Subcommittee of the Dermatologic and Ophthalmic Drugs Advisory Committee was held at the Holiday Inn in Bethesda, Maryland, on November 17, 1999. The topic of the meeting was NDA 21-119 Visudyne™ (verteporfin for injection, QLT Therapeutics, Inc.), for treatment of age-related macular degeneration (AMD) in patients with predominantly classic subfoveal choroidal neovascularization. Approximately 250 persons attended the meeting.

After the Call to Order & Welcome by Donald S. Fong, M.D., M.P.H., Chair of the Subcommittee, the Conflict of Interest Statement was read by Tracy Riley, the Executive Secretary. An overview of the Issues by Wiley A. Chambers, M.D., was followed by the Open Public Hearing.

During the hearing, Mr. George Blankenship, a patient in a Visudyne treatment IND program, spoke of his condition and how the product has helped him. Mr. Charles Thompson, a patient not treated with the product, spoke about how he discovered he had macular degeneration and presented an extensive description of the effects of the condition upon his life and work. Mr. Robert Gray, CEO of the Foundation Fighting Blindness, described how his organization provides support for research in this condition. Additionally, he described how those who have this condition suffer, especially from losses of the capability to read and to drive an automobile.

Scientific presentations of the open session began once the last open hearing participant spoke. The first presenter for the Sponsor was an introduction by Lawrence D. Mandt, VP Regulatory Affairs, QLT PhotoTherapeutics, Inc. Then background information on age-related macular degeneration was presented by Philip J. Rosenfeld, M.D., Ph.D., Assistant Professor, Ophthalmology, University Of Miami School of Medicine; this was followed by the Phase I/II Clinical Results by H. Andrew Strong, Ph.D., Senior Director, Clinical Research, QLT PhotoTherapeutics, Inc. Neil M. Bressler, M.D., Professor of Ophthalmology, Johns Hopkins University School of Medicine, discussed the Phase III Clinical Results, followed by an Overview of Safety & Risk/Benefit Analysis by Mohammad Azab, M.D., M.Sc., VP Clinical Research, QLT PhotoTherapeutics, Inc. Mr. Mandt then offered some concluding remarks.

After some clarifying questions from the Committee, the FDA presentation by Dr. Chambers commenced; he then framed the Issues for the Committee and the discussions proceeded.

After lunch, there being no speakers for the second open public hearing session, the committee continued its discussions of the issues and questions. After the conclusion of the discussions, the Chair and Dr. Chambers thanked all the participants for their contributions. The Chair adjourned the meeting at 2:40 p.m.

ISSUES FOR THE ADVISORY COMMITTEE MEETING

1. All patients continue to lose best corrected visual acuity.

2. Lesions demonstrate leakage within 3 months after treatment.

3. Repeat treatments have not been studied beyond 24 months (only 12-month data submitted to agency).

4. Repeat treatments have not been studied at intervals less than 3 months.

5. Bilateral treatments have not been adequately studied.

6. Discrepancies existed between the reading center and the treatment centers (reading center more sensitive).

7. Photosensitivity - 48 hour precautions were not sufficient.

8. Potential for anemia and creatinine increases.

QUESTIONS FOR THE COMMITTEE

1. How can the subgroups for which Visudyne demonstrated a visual acuity benefit be best described?

   Presently, the group of patients with classic/well-defined subfoveal choroidal neovascularization appears to be the patient subpopulation that demonstrated the greatest benefit from the treatment.

2. Has the safety profile/risks been adequately addressed?
3. Has the safety profile/risks been adequately labeled?

   The committee recommended that there be careful patient and provider education in plain language, including a patient instructional brochure and bracelet. Issues of photosensitivity, including recommending protection from sunlight for at least 1 week, and potential hepatic dysfunction should be clearly delineated.

4. Is additional testing beyond 2 years recommended?

   Yes = 4 No= 1 Abstain= 0

Although the committee did not recommend that testing for longer than two years be required before the FDA should consider approval, they stated that they were very desirous of seeing the 2-year data once the sponsor sends it to the Agency.

5. What additional clinical studies would be helpful in further evaluating the potential benefits and/or risks of Visudyne therapy?

   The Committee recommended that studies be performed in study populations powered to identify particular subpopulations who benefit most; to investigate other treatment intervals; the effects of repeated treatments in terms of risks vs. benefits and of any chronic effects upon the retinal vasculature.

6. Additional recommendations/comments?

   The committee consensus was that although the demonstrated treatment effects were modest, Visudyne may be helpful in aiding patients afflicted with a devastating condition without any reliably useful treatments. They recommended an emphasis in the labeling of limiting treatment to appropriate subgroups of patients and clearly stating proper safeguards against adverse events. Overall, their opinion was favorable to approval of this product by FDA.

Transcripts should be available within 30 days and will be made available at the following website: http://www.fda.gov/ohrms/dockets/ac/acmenu.htm. This website is also an important source for public meeting information and meeting day slides, when available.