MevacorTM Daily 20 mg Tablets Rx-to-OTC Switch

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Overview

- Important aspects of an actual use study
- Actual use issues to address for Mevacor OTC
- Actual Use Study # 084 (CUSTOM)
 - Results of consumer behavior
 - Differences in data analysis

Important Aspects of an Actual Use Study

- Simulate OTC use
 - Recruitment through mass media
 - Site locations in pharmacies or grocery stores
- Have few exclusion criteria

Important Aspects of an Actual Use Study

- Objectives depend on the specific product and concerns related to that product:
 - Self-diagnosis
 - Self-selection
 - De-selection
 - Compliance, dosing, duration of use
 - Off-label use
 - Safety and efficacy in OTC population

Actual Use Issues to Address for Mevacor OTC

- Are consumers able to:
 - Self-diagnose hypercholesterolemia
 - Know their cholesterol values
 - Understand serum cholesterol values
 - Identify risk factors for CHD
 - Self-select based on the label eligibility criteria and the contraindications for use

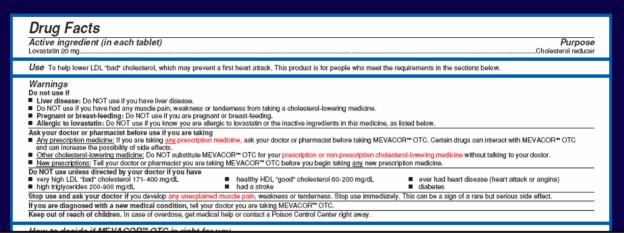
Actual Use Issues to Address for Mevacor OTC

- Are consumers able to self-treat:
 - Follow label directions
 - for dosing and duration of use
 - for follow-up cholesterol test
 - when to see a physician
 - Understand the treatment goal
 - De-selection
 - Identify risks during therapy with Mevacor

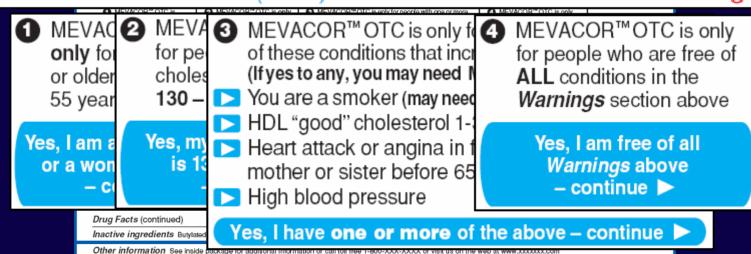
Study #084

Consumer Use Study of OTC MEVACORTM (CUSTOM)

Label Criteria



You must have YES (blue) answers to all 4 of the following.



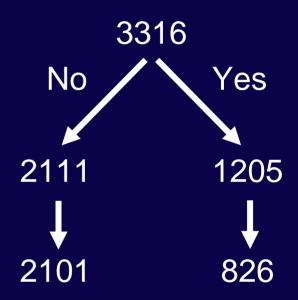
CUSTOM: Decision to Purchase

Participated in purchase decision

Purchased Mevacor OTC

Needed more information

- To obtain cholesterol
- To talk to a doctor
- Personal health information
- Study related information



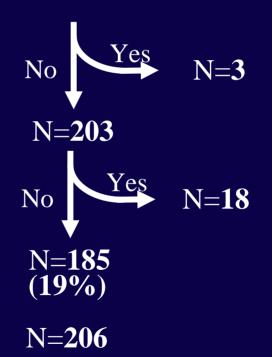
Self-Selection of Users Based on the Label Criteria

Total Users **→** 2 excluded N=1061 met age criteria? N=797LDL-C 130-170 mg/dL? N=281≥1 risk factor for CHD? N=206(26%)

Self-Selection of Users Based on the Label Criteria

liver disease?

history of statin induced muscle weakness or pain?



Self-Selection of Users Based on the Label Criteria

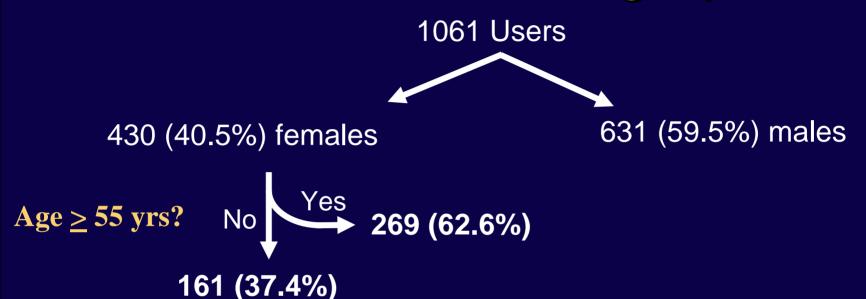
≥1 risk factor + HDL-C <60 mg/dL?

triglycerides < 200 mg/dL?

$$\begin{array}{c|c}
N=163 \\
Yes & N=53 \\
N=189 \\
N=185
\end{array}$$

10% of all Users fit the label criteria

Self-Selection Demographics

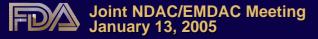


< 40 years: 23 (5.4%)

40-44 years: 24 (5.6%)

45-49 years: 45(10.5%)

50-54 years: 69 (16.1%)



Use of Mevacor in Women under 50

- 21.5% of all women Users were < 50 years
 - Many of these women are likely of child bearing potential
- Because during the first trimester of pregnancy women may not realize that they are pregnant, it is important to understand the risk to the fetus if women of child bearing potential are going to use the product in the OTC setting

Did Users Know Their Cholesterol Values?

What did Consumers Think Their LDL-C	LDL-C (mg/dL) Measured at Purchase Visit				
Level Was	Missing	<130	130 to 170	>170	Total
Missing	15	0	10	2	27
Unknown	66	55	103	94	318
< 130 mg/dL	10	87	16	9	122
130 -170 mg/dL	19	54	250	44	367
> 170 mg/dL	18	13	26	168	225
Total	128	209	405	317	1059

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Summary of the Users' Knowledge of Their LDL-C Values at the Initial Visit

- 30% (318/1059) did not know their LDL-C
- 47.7% (505/1059) correctly identified their LDL-C value
- 71% of Users who correctly identified their LDL-C <130 mg/dL chose to use Mevacor OTC
- 75% of Users who correctly identified their LDL-C >170 mg/dL chose to use Mevacor OTC

Did Users Meet the Label CHD Risk Factor Criteria?

Risk Factors for CHD:

- Smoking
- Age
 - ≥ 45 years men
 - ≥ 55 years women
- Family history of CHD
- Hypertension
- Low HDL-C

Users with ≥ 2 risk factors (Age + ≥ 1 risk factor)

57.3%

Users with < 2 risk factors 42.7%

Sponsor's Definitions of Correct Self-Selection

Original Definitions

- AL: According to Label
 - entirely consistent with label
- NAL-MASM: Not According to Label, Medically Acceptable for Self-Management; i.e., a favorable benefit to risk ratio (achieve LDL-C goal at 6 weeks)

Modified Definition (a physician override)

- AL-MASM: According to Label, Medically Acceptable for Self-Management
 - AL and
 - not AL but consulted with a doctor

Sponsor's Additional Analyses of Correct Self-Selection

Closely adhered to the label (post-hoc definition)

- Outside age criteria
- Absence of label risk factors
- LDL-C < 130 mg/dL
- LDL-C > 170 mg/dL
- HDL-C ≥ 60 mg/dL

But:

- Knew their lipid profile
- Did not have elevated triglycerides
- Did not substitute Mevacor OTC for a prescription lipid lowering medication, and
- Did not have diabetes, heart disease or stroke

Sponsor's Additional Analyses of Correct Self-Selection (cont.)

Failed to Closely Adhere to Label Benefit Criteria But Eligible for Statin Therapy (post-hoc definition)

- –Did not know their lipid profile
- -Had elevated triglycerides > 200 mg/dL
- -Substituted Mevacor OTC for their Rx medication
- -Had diabetes, heart disease, or stroke

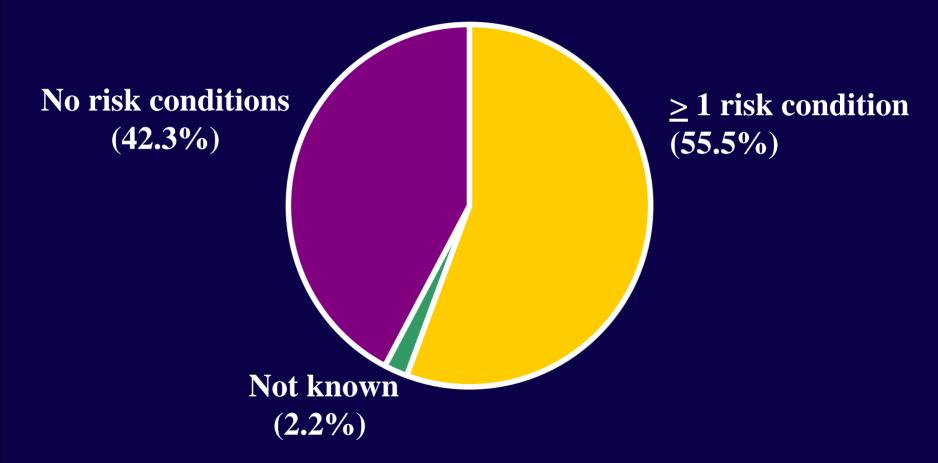
But:

–were eligible for statin therapy by ATP III based on calculated > 10% 10-year risk for myocardial infarction or coronary death

Sponsor's Results: Correct Self-Selection

Self-selected AL-MASM		484
Without physician override (AL)	68	
 With physician override (MASM) 	416	
Closely adhered to label		202
Did not adhere to label benefit criteria	357	
 Eligible for statin therapy 		258
	Total	944

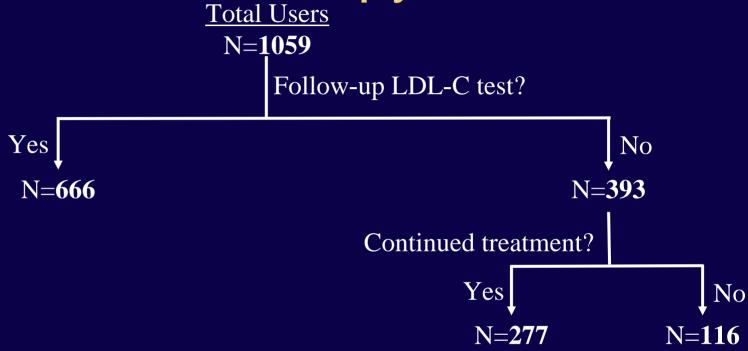
Users with Relative Contraindications for Using Mevacor OTC According to Label



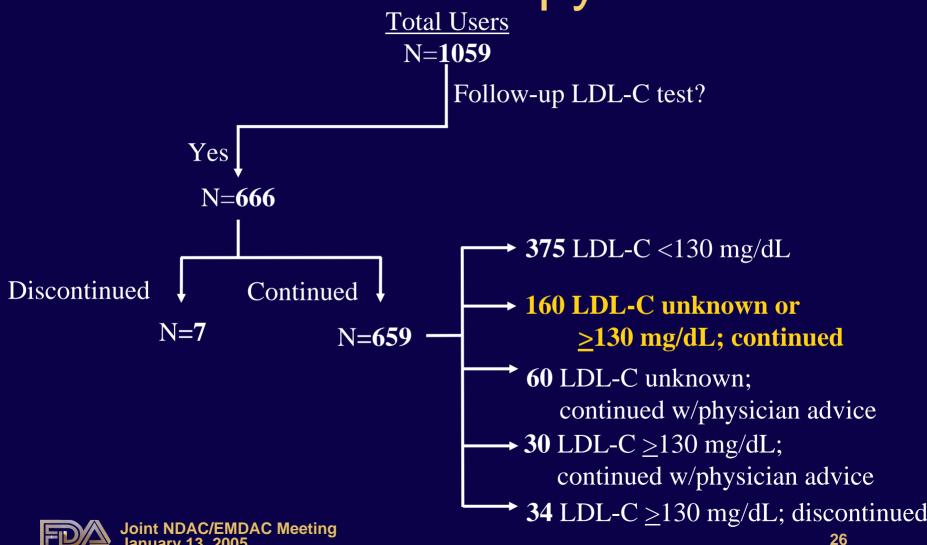
Users with Relative Contraindications Who Did Not Consult a Physician

<u>Condition</u>	<u>Total Users</u>	<u>Did Not</u> <u>Consult Doctor</u>
Substituted for prescription lipid lowering medicat	ions 165	62 (37.5%)
High LDL-C or TG	435	281 (64.5%)
Taking potentially interacting drugs	32	12 (37.5%)
Diabetes	73	30 (41%)
CHD	89	37 (41.5%)
History of stroke	31	16 (51.6%)
History of previous muscle pain while on statin	86	53 (61.6%)

Decisions Regarding Continuation of Therapy



Decisions Regarding Continuation of Therapy



Achievement of the LDL-C Goal at the End of the Study

- 548 of 878 Users with known LDL-C value had LDL-C < 130 mg/dL at the end of the study
 - 160 with LDL-C < 130 mg/dL at baseline
 - 39 LDL-C level at baseline unknown
 - 349 with LDL-C > 130 mg/dL at baseline

Safety Data

- 17% of Users had drug-related adverse events
 - 1 serious allergic reaction to lovastatin
 - no other serious drug-related adverse events

Summary (Cholesterol Knowledge)

 69% of Purchasers needed more information to make a purchase or use decision

47.7% correctly identified their LDL-C

33% of Users did not know their LDL-C at the initial visit

Summary (Self-Selection)

- 37% of women Users were < 55 years of age
- 26% of Users met the age and baseline LDL-C level 130-170 mg/dL
- 19% of Users met the age, LDL-C and risk factor for CHD criteria
- 10% of Users met all label eligibility criteria without a physician override

Summary (CHD risks and contraindications)

42.7% of Users had <2 CHD risk factors

 55.5% of Users had ≥1 relative contraindication according to the label for the use of Mevacor

Summary (Follow-up LDL-C)

- 63% of Users had a follow-up cholesterol test
- 35.6% of Users achieved the LDL-C goal on their followup testing
- Median reduction in LDL-C in the User population was 21%
- 548 (62%) of Users with known LDL-C value at the end of 6 months had an LDL-C <130 mg/dL
 - 199 Users started at an LDL-C <130 mg/dL or had missing baseline LDL-C

Summary

- No new serious safety signals during the study
- Based on the CUSTOM results, it is likely to be used by:
 - Women of childbearing age
 - Consumers with contraindicated conditions
 - Consumers with no risk or low risk for CHD
 - Consumers at high risk for CHD