Jimmy Everest Center for Cancer and Blood Disorders in Children

William H. Meyer, M.D.
Ben Johnson Professor and Chief
Sheila M. Crow, M.A.
Heather C. Huszti, Ph.D.
Christa H. Johnson, Ph.D.
René Y. McNall, M.D.
Ruprecht Nitschke, M.D. (Emeritus)
Joan B. Parkhurst, M.D.
Charles L Sexauer, M.D.

1869 '03 APR -7 A9:11

April 3, 2003

Dockets Management Branch
Food and Drug Administration
Room 1-23
12420 Parklawn Dr
Rockville, MD 20857

Re: Docket #02P-0435 (Citizen Petition)

Dear Sirs,

I am the physician assistant at the Oklahoma Center for Bleeding Disorders. I have been here for 15 years and care for pediatric and adult patients. I am very concerned at the delay in the FDA awarding the Von Willebrand Disease-indication for Alphanate. I have extensive experience with this product in treating patients with Von Willebrand Disease and certain Factor VIII deficient-patients.

Our Von Willebrand patients range from 26-week preemies on a ventilator to obese adults over 50 years old. With this diversity of patients, it is critical to have a variety of factor vial sizes on hand. Humate-P has not been consistently available across the assay range– especially for pediatric patients. To titrate doses, we stock Alphanate and Humate-P. One of my responsibilities is monitoring the factor supply and assays in our hospital and clinic pharmacies. This allows very precise orders for patient treatment – reducing pharmacy errors (many similar products and vial ranges), minimizing patient cost, enhancing dose-response monitoring and plans for local care. The available vial size also affects the timing of bolus doses.

Although Alphanate is a standard treatment for Von Willebrand Disease, it is not labeled in Ristocetin Cofactor units. The RCof:Factor VIII ratio has improved impressively since we initially participated in the prospective surgery trials, but varies considerably between lots. For every vial size of Alphanate in our pharmacies, I must call the manufacturer to verify the Ristocetin Cofactor unit assay. In planning purchases for a surgery, the hospital supplier must learn the assay to match the planned treatment regimen. To arrange doses for home use, the local pharmacy must verify the RCof assay before shipment is approved.

Our center treats patients from a four-state area. When possible, families strongly prefer local procedures and hospitalization. We provide specific dose and schedule recommendations to the local physicians and institutions. The local provider must then obtain the factor. If an unfamiliar pharmacist or doctor treats

C1

HEMATOLOGY-ONCOLOGY SECTION • P.O. Box 26307 • Oklahoma City, Oklahoma 73126 • (405) 271-4412 • FAX: (405) 271-3265
Academic Office • (405) 271-5311 • FAX: (405) 271-3756

02P-0435

based on the Factor VIII units as labeled on Alphanate, the patient may be significantly under-treated, resulting in persistent or break-through bleeding. This may jeopardize the safety of a procedure, delay healing or increase the risk of infection in a surgical site. It can allow the development of progressive synovitis and bone degradation in a joint bleed. Over-dosing may cause the patient to become hyper-coagulable, which is particularly risky in my sedentary adults at risk for heart attack or stroke.

Due to lifetime insurance capitation, my families are very aware of the cost of treatment products. For many policies, the co-payment is a percentage rather than a flat charge for prescriptions. They know that unit-per-unit, Alphanate is much less expensive than Humate-P. With the previous hepatitis and HIV-contamination of factor products, they also prefer the multiple viral-inactivation methods of Alphanate.

From a safety standpoint alone, Alphanate needs to be given the FDA-approval for Von Willebrand Disease so that the medication may be appropriately labeled. Two competing products with the FDA-indication should also improve the price and availability of dose ranges. Please give this your intense consideration.

With respect,

Sarah M Hawk PA-C

Sarah M. Hawk, P.A.-C.
Physician Assistant - Certified
Oklahoma Center for Bleeding Disorders