



NDA 18-498-S008

Fujisawa Healthcare, Inc.
Attention: Donald R. Peckels
Associate Director, Regulatory Affairs
Parkway North Center, Three Parkway North
Deerfield, Illinois 60015-2548

Dear Mr. Peckels:

Please refer to your supplemental new drug application S008, dated January 27, 1995, received February 2, 1995, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Cyclocort (amcinonide) Ointment, 0.1%.

We also acknowledge receipt of your correspondence dated October 5, 2001.

Supplemental new drug application S008 provides for revision in the DESCRIPTION section of the label that deletes the words, (b)-----”, that followed benzyl alcohol. This deletion is supported by supplement S007 which was approved August 9, 1995.

We have completed the review of this supplemental application, 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 enclosed labeling text for the DESCRIPTION section of Cyclocort (amcinonide) Ointment, 0.1%. Accordingly, this supplemental application is approved effective on the date of this letter.

The final printed labeling (FPL) must be identical to the enclosed labeling text (package insert). Please submit the copies of final printed labeling (FPL) electronically according to the guidance for industry titled *Provide 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 supplements NDA 18-498/S008”.

Approval of this submission by the FDA is not required before the labeling is used.

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

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 Margo Owens, Project Manager, at (301) 827-2020.

Sincerely,

{See appended electronic signature page}

Jonathan K. Wilkin, M.D.
Director
Division of Dermatologic and Dental Drug Products,
Office of Drug Evaluation V
Center for Drug Evaluation and Research

Enclosure

**This is a representation of an electronic record that was signed electronically and
this page is the manifestation of the electronic signature.**

/s/

Jonathan Wilkin
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