



ANDA 203730

ANDA APPROVAL

Amneal Pharmaceuticals
85 Adams Avenue
Hauppauge, NY 11788
Attention: Alpesh Patel
Vice President - Global Regulatory Affairs

Dear Sir:

This is in reference to your abbreviated new drug application (ANDA) dated December 24, 2011, submitted pursuant to section 505(j) of the Federal Food, Drug, and Cosmetic Act (the Act), for Divalproex Sodium Extended-release Tablets USP, 250 mg and 500 mg.

Reference is also made the Complete Response letter issued by this office on June 4, 2014, and to your amendments dated August 5, September 17, December 8, 2014; January 9, January 22, March 30, and April 28, 2015.

We have completed the review of this ANDA and have concluded that adequate information has been presented to demonstrate that the drug is safe and effective for use as recommended in the submitted labeling. **Accordingly the ANDA is approved**, effective on the date of this letter. The Division of Bioequivalence has determined your Divalproex Sodium Extended-release Tablets USP, 250 mg and 500 mg, to be bioequivalent and, therefore, therapeutically equivalent to the reference listed drug (RLD), Depakote® ER (Divalproex Sodium Extended-release Tablets), 250 mg and 500 mg of AbbVie, Inc. (AbbVie).

Your dissolution testing should be incorporated into the stability and quality control program using the same method proposed in your ANDA. The “interim” dissolution specifications are as follows:

Dissolution Testing should be conducted in

Medium:	0.1 N HCl for 45 minutes followed by 0.05 M Phosphate Buffer with 75 mM SDS, pH 5.5
Apparatus:	II (Paddle)
Speed:	100 rpm (both stages)
Temperature:	37 °C ± 0.5 °C
Volume:	500 mL (Acid stage); 900 mL (Buffer stage)
Specifications	
Acid Stage:	Not More Than (NMT) 10% dissolved in 45 minutes

Buffer stage:

3 hours: 15%-40%

9 hours: 40%-70%

15 hours: Not Less Than (NLT) 85%

The “interim” dissolution test(s) and tolerances should be finalized by submitting dissolution data for the first three production size batches. Data should be submitted as a Special Supplement – Changes Being Effected when there are no revisions to the “interim” specifications or when the final specifications are tighter than the “interim” specifications. In all other instances, the information should be submitted in the form of a Prior Approval Supplement.

The RLD upon which you have based your ANDA, AbbVie’s Depakote® (Divalproex Sodium) ER Tablets, 250 mg and 500 mg, is subject to periods of patent protection. The following patents and their expiration dates (with pediatric exclusivity added) are currently listed in the Agency’s publication titled Approved Drug Products with Therapeutic Equivalence Evaluations (the “Orange Book”):

<u>U.S. Patent Number</u>	<u>Expiration Date</u>
6,511,678*PED (the '678 patent)	June 18, 2019
6,528,090*PED (the '090 patent)	June 18, 2019
6,713,086*PED (the '086 patent)	June 18, 2019
6,720,004*PED (the '004 patent)	June 18, 2019
6,419,953*PED (the '953 patent)	June 18, 2019*
6,528,091*PED (the '091 patent)	June 18, 2019*
	*listed for the 500 mg strength only

Your ANDA contains paragraph IV certifications under section 505(j)(2)(A)(vii)(IV) of the Act stating that the each of these patents is invalid, unenforceable, or will not be infringed by your manufacture, use, or sale of Divalproex Sodium Extended-release Tablets USP, 250 mg and 500 mg, under this ANDA. You have notified the Agency that Amneal Pharmaceuticals (Amneal) complied with the requirements of section 505(j)(2)(B) of the Act, and that no action for infringement was brought against Amneal within the statutory 45-day period.

Under section 506A of the Act, certain changes in the conditions described in this ANDA require an approved supplemental application before the change may be made.

Please note that if FDA requires a Risk Evaluation & Mitigation Strategy (REMS) for a listed drug, an ANDA citing that listed drug also will be required to have a REMS. See section 505-1(i) of the Act.

Postmarketing reporting requirements for this ANDA are set forth in 21 CFR 314.80-81 and 314.98. The Office of Generic Drugs should be advised of any change in the marketing status of this drug.

Promotional materials may be submitted to FDA for comment prior to publication or dissemination. Please note that these submissions are voluntary. If you desire comments on

proposed launch promotional materials with respect to compliance with applicable regulatory requirements, we recommend you submit, in draft or mock-up form, two copies of both the promotional materials and package insert(s) directly to:

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Prescription Drug Promotion
5901-B Ammendale Road
Beltsville, MD 20705

We call your attention to 21 CFR 314.81(b)(3) which requires that all promotional materials be submitted to the Office of Prescription Drug Promotion with a completed Form FDA 2253 at the time of their initial use.

The Generic Drug User Fee Amendments of 2012 (GDUFA) (Public Law 112-144, Title III) established certain provisions with respect to self-identification of facilities and payment of annual facility fees. Your ANDA identifies at least one facility that is subject to the self-identification requirement and payment of an annual facility fee. Self-identification must occur by June 1 of each year for the next fiscal year. Facility fees must be paid each year by the date specified in the Federal Register notice announcing facility fee amounts. All finished dosage forms (FDFs) or active pharmaceutical ingredients (APIs) manufactured in a facility that has not met its obligations to self-identify or to pay fees when they are due will be deemed misbranded. This means that it will be a violation of federal law to ship these products in interstate commerce or to import them into the United States. Such violations can result in prosecution of those responsible, injunctions, or seizures of misbranded products. Products misbranded because of failure to self-identify or pay facility fees are subject to being denied entry into the United States.

As soon as possible, but no later than 14 days from the date of this letter, submit, using the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format, as described at <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>, that is identical in content to the approved labeling (including the package insert, and any patient package insert and/or Medication Guide that may be required). Information on submitting SPL files using eLIST may be found in the guidance for industry titled “SPL Standard for Content of Labeling Technical Qs and As” at

<http://www.fda.gov/downloads/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>. The SPL will be accessible via publicly available labeling repositories.

Sincerely yours,

Carol A. Holquist, RPh
Acting Deputy Director
Office of Regulatory Operations
Office of Generic Drugs
Center for Drug Evaluation and Research