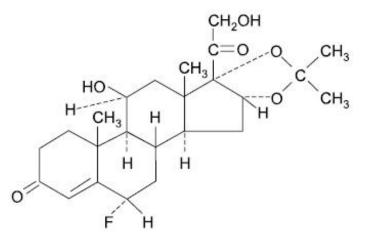
CORDRAN- flurandrenolide cream INA Pharmaceutics, Inc

Cordran® Cream Flurandrenolide, USP

DESCRIPTION

Cordran® (flurandrenolide, USP) is a potent corticosteroid intended for topical use. Flurandrenolide occurs as white to off-white, fluffy, crystalline powder and is odorless. Flurandrenolide is practically insoluble in water and in ether. One gram of flurandrenolide dissolves in 72 mL of alcohol and in 10 mL of chloroform. The molecular weight of flurandrenolide is 436.52.

The chemical name of flurandrenolide is Pregn-4-ene-3,20-dione, 6-fluoro-11,21dihydroxy- 16,17-[(1-methylethylidene)bis (oxy)]-, (6α , 11 β , 1 6α)-; its empirical formula is C ₂₄H ₃₃FO ₆. The structure is as follows:



Each gram of Cordran® Cream (flurandrenolide Cream, USP) contains 0.5 mg (1.145 µmol; 0.05%) flurandrenolide in an emulsified base composed of cetyl alcohol, citric acid, mineral oil, polyoxyl 40 stearate, propylene glycol, sodium citrate, stearic acid, and purified water.

CLINICAL PHARMACOLOGY

Cordran is primarily effective because of its anti-inflammatory, antipruritic, and vasoconstrictive actions.

The mechanism of the anti-inflammatory effect of topical corticosteroids is not completely understood. Corticosteroids with anti-inflammatory activity may stabilize cellular and lysosomal membranes. There is also the suggestion that the effect on the membranes of lysosomes prevents the release of proteolytic enzymes and, thus, plays a part in reducing inflammation.

Pharmacokinetics

The extent of percutaneous absorption of topical corticosteroids is determined by many

factors, including the vehicle, the integrity of the epidermal barrier, and the use of occlusive dressings.

Topical corticosteroids can be absorbed from normal intact skin. Inflammation and/or other disease processes in the skin increase percutaneous absorption.

Once absorbed through the skin, topical corticosteroids are handled through pharmacokinetic pathways similar to systemically administered corticosteroids. Corticosteroids are bound to plasma proteins in varying degrees. They are metabolized primarily in the liver and then excreted in the kidneys. Some of the topical corticosteroids and their metabolites are also excreted into the bile.

INDICATIONS AND USAGE

Cordran® (flurandrenolide, USP) is indicated for the relief of the inflammatory and pruritic manifestations of corticosteroid-responsive dermatoses.

CONTRAINDICATIONS

Topical corticosteroids are contraindicated in patients with a history of hypersensitivity to any of the components of these preparations.

PRECAUTIONS

General

Systemic absorption of topical corticosteroids has produced reversible hypothalamicpituitary-adrenal (HPA) axis suppression, manifestations of Cushing's syndrome, hyperglycemia, and glucosuria in some patients.

Conditions that augment systemic absorption include application of the more potent steroids, use over large surface areas, prolonged use, and the addition of occlusive dressings.

Therefore, patients receiving a large dose of a potent topical steroid applied to a large surface area or under an occlusive dressing should be evaluated periodically for evidence of HPA axis suppression using urinary-free cortisol and ACTH stimulation tests. If HPA axis suppression is noted, an attempt should be made to withdraw the drug, to reduce the frequency of application, or to substitute a less potent steroid.

Recovery of HPA axis function is generally prompt and complete upon discontinuation of the drug. Infrequently, signs and symptoms of steroid withdrawal may occur, so that supplemental systemic corticosteroids are required.

Pediatric patients may absorb proportionately larger amounts of topical corticosteroids and thus be more susceptible to systemic toxicity (see Pediatric Use under PRECAUTIONS).

If irritation develops, topical corticosteroids should be discontinued and appropriate therapy instituted.

In the presence of dermatologic infections, the use of an appropriate antifungal or antibacterial agent should be instituted. If a favorable response does not occur promptly, Flurandrenolide cream should be discontinued until the infection has been adequately controlled.

Information for the Patient

Patients using topical corticosteroids should receive the following information and instructions:

- 1. This medication is to be used as directed by the physician. It is for external use only. Avoid contact with the eyes.
- 2. Patients should be advised not to use this medication for any disorder other than that for which it was prescribed.
- 3. The treated skin area should not be bandaged or otherwise covered or wrapped in order to be occlusive unless the patient is directed to do so by the physician.
- 4. Patients should report any signs of local adverse reactions, especially under occlusive dressing.
- 5. Parents of pediatric patients should be advised not to use tight-fitting diapers or plastic pants on a patient being treated in the diaper area, because these garments may constitute occlusive dressings.
- 6. Do not use Flurandrenolide cream on the face, underarms, or groin areas unless directed by your physician.
- 7. If no improvement is seen within 2 weeks, contact your physician.
- 8. Do not use other corticosteroid-containing products while using Cordran without first consulting your physician.

Laboratory Tests

The following tests may be helpful in evaluating the HPA axis suppression:

Urinary-free cortisol test ACTH stimulation test

Carcinogenesis, Mutagenesis, and Impairment of Fertility

Long-term animal studies have not been performed to evaluate the carcinogenic potential or the effect on fertility of topical corticosteroids.

Studies to determine mutagenicity with prednisolone and hydrocortisone have revealed negative results.

Usage in Pregnancy

Pregnancy Category C

Corticosteroids are generally teratogenic in laboratory animals when administered systemically at relatively low dosage levels. The more potent corticosteroids have been shown to be teratogenic after dermal application in laboratory animals. There are no adequate and well-controlled studies in pregnant women on teratogenic effects from topically applied corticosteroids. Therefore, topical corticosteroids should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus. Drugs of this class should not be used extensively for pregnant patients or in large amounts or for prolonged periods of time.

Nursing Mothers

It is not known whether topical administration of corticosteroids could result in sufficient systemic absorption to produce detectable quantities in breast milk. Systemically administered corticosteroids are secreted into breast milk in quantities *not*likely to have a deleterious effect on the infant. Nevertheless, caution should be exercised when topical corticosteroids are administered to a nursing woman.

Pediatric Use

Pediatric patients may demonstrate greater susceptibility to topical corticosteroidinduced HPA axis suppression and Cushing's syndrome than do mature patients because of a larger skin surface area to body weight ratio.

Hypothalamic-pituitary-adrenal (HPA) axis suppression, Cushing's syndrome, and intracranial hypertension have been reported in pediatric patients receiving topical corticosteroids. Manifestations of adrenal suppression in pediatric patients include linear growth retardation, delayed weight gain, low plasma cortisol levels, and absence of response to ACTH stimulation. Manifestations of intracranial hypertension include bulging fontanelles, headaches, and bilateral papilledema.

Administration of topical corticosteroids to pediatric patients should be limited to the least amount compatible with an effective therapeutic regimen. Chronic corticosteroid therapy may interfere with the growth and development of pediatric patients.

ADVERSE REACTIONS

The following local adverse reactions are reported infrequently with topical corticosteroids but may occur more frequently with the use of occlusive dressings. These reactions are listed in an approximate decreasing order of occurrence:

Burning Itching Irritation Dryness Folliculitis Hypertrichosis Acneform eruptions Hypopigmentation Perioral dermatitis Allergic contact dermatitis

The following may occur more frequently with occlusive dressings:

Maceration of the skin Secondary infection Skin atrophy Striae Miliaria

Postmarketing Adverse Reactions

The following adverse reactions have been identified during post approval use of

flurandrenolide, USP. Because these reactions are reported voluntarily from a population of uncertain size, it is not always possible to reliably estimate their frequency or establish a causal relationship to drug exposure.

Skin: skin striae, hypersensitivity, skin atrophy, contact dermatitis and skin discoloration.

OVERDOSAGE

Topically applied corticosteroids can be absorbed in sufficient amounts to produce systemic effects (see **PRECAUTIONS**).

DOSAGE AND ADMINISTRATION

For moist lesions, a small quantity of the cream should be rubbed gently into the affected areas 2 or 3 times a day.

Therapy should be discontinued when control is achieved. If no improvement is seen within 2 weeks, reassessment of the diagnosis may be necessary.

Cordran® (flurandrenolide, USP) should not be used with occlusive dressings unless directed by a physician. Tight-fitting diapers or plastic pants may constitute occlusive dressings.

HOW SUPPLIED

Cordran® Cream is supplied in aluminum tubes as follows:

Flurandrenolide Cream, USP 0.05%:

60 g (NDC 74157-180-60)

120 g (NDC 74157-130-07)

Keep out of reach of children.

Storage

Keep tightly closed.

Protect from light.

Store at 20° to 25°C (68° to 77°F) with excursions permitted to 15° to 30°C (59° to 86°F) [See USP controlled room temperature].

Rx Only

Revision: July 2025

INA Pharmaceutics, Inc.

Manufactured by DPT Laboratories, San Antonio, TX 78215

PRINCIPAL DISPLAY PANEL

NDC 74157-180-60





NDC 74157-130-07 120 g 120 g

NDC 74157-130-07

Cordran[®] Flurandrenolide Cream, USP 0.05% Rx only

FOR EXTERNAL USE ONLY-

NOT FOR USE IN THE EYES

USUAL DOSAGE: Apply to affected area 2 or 3 times a day. See package Insert.

Each gram contains: flurandrenolide 0.5 mg (0.05%), cetyl alcohol, citric acid, mineral oli, polyoxyl 40 stearate, propylene glycol, sodium citrate, stearic acid and purified water.

Store at 20° to 25°C (68° to 77°F) with excursions permitted to 15° to 30°C (59° to 86°F) [See USP controlled room temperature].

Keep Tightly Closed and Protect from Light.

IMPORTANT: Do not use if seal has been punctured or is not visible.

Cap is Not Child Resistant. Keep Away from Children.

See Crimp for Expiration Date and Lot No.





CORDRAN							
flurandrenolide cream							
Product Information							
Product Type	HUMAN PRESCRIPTION DRUG	Item Co	NDC:74157-130				
Route of Administration	TOPICAL						
Active Ingredient/Active Moiety							
Ingredient Name			Basis of Strength	Strength			
FLURANDRENOLIDE (UNII: 8EUL29 UNII:8EUL29XUQT)	XUQT) (FLURANDRENOLIDE -		FLURANDRENOLIDE	E 0.5 mg in 1			
Inactive Ingredients							
	Ingredient Name			Strength			
CETYL ALCOHOL (UNII: 936JST6JC	N)						
CITRIC ACID MONOHYDRATE (UN	III: 2968PHW8QP)						
MINERAL OIL (UNII: T5L8T28FGP)							

PROPYLENE GLYC	OL (UNII: 6DC90	(167V3)				
SODIUM CITRATE,	UNSPECIFIED	FORM (UNII: 1Q73	Q2JULR)			
STEARIC ACID (UN	II: 4ELV7Z65AP)					
WATER (UNII: 059Q	F0KO0R)					
Product Chara	storistics					
		white	Score			
Shape		white	Size			
Flavor			Size Imprint Code			
Contains				uc		
contains						
Packaging						
# Item Code	Pac	Package Description		Marketing Start Date	Marketing End Date	
1 NDC:74157-130- 07	1 in 1 CARTON	N		07/07/2025		
		E; Type 0: Not a Co	ombination			
Marketing						
Marketing Application Category		ion Number or Monograph Citation		Marketing Start Date	Marketing End Date	
NDA	NDA012806			07/07/2025		
CORDRAN						
lurandrenolide c	ream					
Product Infor	mation					
Product Type		HUMAN PRESCRIPT	TION DRUG	RUG Item Code (Source)		
Route of Admini	stration	TOPICAL				
Active Ingredi	ent/Active	Moiety				

Ingredient NameBasis of
StrengthStrengthFLURANDRENOLIDE (UNII: 8EUL29XUQT) (FLURANDRENOLIDE -
UNII:8EUL29XUQT)FLURANDRENOLIDE -
0.5 mg in 1 g

Inactive Ingredients				
Ingredient Name	Strength			
CETYL ALCOHOL (UNII: 936JST6JCN)				
CITRIC ACID MONOHYDRATE (UNII: 2968PHW8QP)				

МІ	NERAL OIL (UNII:	T5L8T28FGP)							
PC	DLYOXYL 40 STE	ARATE (UNII: 13	A4J4NH9I)						
PR	PROPYLENE GLYCOL (UNII: 6DC9Q167V3)								
SO	SODIUM CITRATE, UNSPECIFIED FORM (UNII: 1Q73Q2JULR)								
ST	STEARIC ACID (UNII: 4ELV7Z65AP)								
W	ATER (UNII: 059Q	F0KO0R)							
Pı	roduct Chara	cteristics							
Color		white	Score						
Shape			Size						
Flavor				Imprint Code					
Co	ontains								
Packaging									
#	ltem Code	Pack	Package Description		Marketing Start Date		Mar	keting End Date	
1	NDC:74157-180- 60	1 in 1 CARTON			07/0	07/2025			
1		60 g in 1 TUBE; Type 0: Not a Combination Product							
Marketing Information									
Marketing Application Number or Category Citation			Monograph		Marketing Start Date	Marketing End Date			
ND	A	NDA012806				07/07/2025			

Labeler - INA Pharmaceutics, Inc (117466866)

Revised: 7/2025

INA Pharmaceutics, Inc