DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA 20380/S-010

SUPPLEMENT APPROVAL

Galderma Laboratories, L.P.
Attention: Sean Griffin
Director, Regulatory Affairs
14501 North Freeway
Fort Worth, TX 76177

Dear Mr. Griffin:

Please refer to your Supplemental New Drug Application (sNDA) dated September 10, 2015, received September 10, 2015, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Differin Gel (adapalene), 0.1%.

This Prior Approval supplemental new drug application provides for the over-the-counter use of Differin Gel (adapalene), 0.1%, for the treatment of acne in adults and children ages 12 years and older. We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the agreed-upon labeling text.

We are approving the application for immediate containers (i.e., tubes) containing 2, 15, and 45 grams of Differin Gel (adapalene), 0.1%. We note that the 45 gram tube size is the size that you market in the United States as a prescription product and also the tube size used in the Juno trial, your actual use study that evaluated consumer behavior. Subjects in this trial were permitted to purchase up to two 45 gram tubes at one time. We also note that usage and exposure were key review issues in our evaluation of the potential risks of nonprescription marketing.

Research has shown that increased package sizing of products leads to increased usage among consumers.[1,2] Conversely, limiting package sizes has been shown to reduce overconsumption by limiting the immediate availability of drugs to the consumer.[3,4] In the future, if you are interested in marketing immediate containers containing more than 45 grams of Differin Gel or packaging sizes greater than two 45 gram tubes, justify in your submission why larger package sizes will not adversely impact the safety of the product. Consider requesting a pre-submission

[1] Wansink B, 1996, Can Package Size Accelerate Usage Volume? *J Mark*, 60(3): 1-14.
[2] Chandon P, B Wansink, 2002, When are Stockpiled Products Consumed Faster? A Convenience-salience Framework of Postpurchase Consumption Incidence and Quantity, *J Mark Res*, 39(3): 321-335.
[3] Hawton K, H Bergen, S Simkin, S Dodd, P Pocock, W Bernal, et al., 2013, Long Term Effect of Reduced Pack Sizes of Paracetamol on Poisoning Deaths and Liver Transplant Activity in England and Wales: Interrupted Time Series Analyses, *BMJ*, 346: f403 (doi: 10.1136/bmj f403).
[4] Weiss S, 2009, Compliance Packaging for Over-the-counter Drug Products, J Public Health, 17(2): 155-164.

meeting with us to discuss safety implications and your proposed justification to support a larger package size.

LABELING

Submit final printed labeling (FPL), as soon as they are available, but no more than 30 days after they are printed. The FPL must be identical to the enclosed labeling: 2 gram, 15 gram, and 45 gram immediate container (tube), 2 gram, 15 gram, and 45 gram outer container (carton), and consumer information leaflet, submitted July 6, 2016, and must be in the "Drug Facts" format (21 CFR 201.66), where applicable.

The FPL should be submitted electronically according to the guidance for industry titled "Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008)." Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission "**Final Printed Labeling for approved NDA 020380/S-010**." Approval of this submission by FDA is not required before the labeling is used.

DRUG REGISTRATION AND LISTING

All drug establishment registration and drug listing information is to be submitted to FDA electronically, via the FDA automated system for processing structured product labeling (SPL) files (eLIST). At the time that you submit your final printed labeling (FPL), the content of labeling (Drug Facts) should be submitted in SPL format as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. 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/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf. In addition, representative container or carton labeling, whichever includes Drug Facts, (where differences exist only in the quantity of contents statement) should be submitted as a JPG file.

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because none of these criteria apply to your application, you are exempt from this requirement.

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

If you have any questions, call Lara Akinsanya, Regulatory Project Manager, at (301) 796-9634.

Sincerely,

{See appended electronic signature page}

Lesley-Anne Furlong, MD
Deputy Director
Office of Drug Evaluation IV
Center for Drug Evaluation and Research

and

{See appended electronic signature page}

Julie Beitz, MD
Director
Office of Drug Evaluation III
Center for Drug Evaluation and Research

ENCLOSURES:
Carton and Container Labeling
Consumer Information Leaflet

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

/s/

JULIE G BEITZ
07/08/2016

LESLEYANNE FURLONG
07/08/2016