

1 **OLUXTM**_{Foam, 0.05%}

2 (clobetasol propionate)

3

4 Rx Only

5 For Dermatologic Use Only

6 Not for Ophthalmic Use

7

8

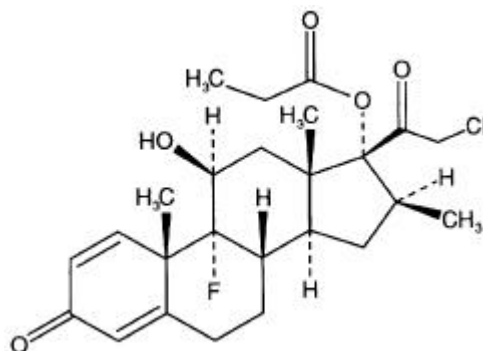
DESCRIPTION

9 OLUX Foam contains clobetasol propionate, USP, a synthetic corticosteroid, for topical
10 dermatologic use. Clobetasol, an analog of prednisolone, has a high degree of
11 glucocorticoid activity and a slight degree of mineralocorticoid activity.

12

13 Clobetasol propionate is (11 β ,16 β)-21-chloro-9-fluoro-11-hydroxy-16-methyl-17 (1-
14 oxopropoxy)-pregna-1,4-diene-3,20-dione, with the empirical formula C₂₅H₃₂ClFO₅, a
15 molecular weight of 466.98 (CAS Registry Number 25122-46-7).

16 The following is the chemical structure:



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18

19

Clobetasol propionate

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21 Clobetasol propionate is a white or almost white, odorless, crystalline powder and is
22 insoluble in water.

23

24 Each gram of OLUX Foam contains 0.5 mg clobetasol propionate, USP, in a
25 thermolabile foam, which consists of ethanol (60%), purified water, propylene glycol,
26 cetyl alcohol, stearyl alcohol, polysorbate 60, citric acid, and potassium citrate. OLUX
27 Foam is dispensed from an aluminum can pressurized with a hydrocarbon propellant
28 (propane/butane).

29

CLINICAL PHARMACOLOGY

31 Like other topical corticosteroids, clobetasol propionate foam has anti-inflammatory,
32 antipruritic, and vasoconstrictive properties. The precise mechanism of the anti-
33 inflammatory activity of topical steroids in the treatment of steroid-responsive
34 dermatoses, in general, is uncertain. However, corticosteroids are thought to act by the
35 induction of phospholipase A₂ inhibitory proteins, collectively called lipocortins. It is
36 postulated that these proteins control the biosynthesis of potent mediators of
37 inflammation such as prostaglandins and leukotrienes by inhibiting the release of their

38 common precursor arachidonic acid. Arachidonic acid is released from membrane
39 phospholipids by phospholipase A₂.

40

41 **Pharmacokinetics:**

42 Topical corticosteroids can be absorbed from intact healthy skin. The extent of
43 percutaneous absorption of topical corticosteroids is determined by many factors,
44 including the vehicle and the integrity of the epidermal barrier. Occlusion, inflammation
45 and/or other disease processes in the skin may also increase percutaneous absorption.

46

47 Once absorbed through the skin, topical corticosteroids are handled through
48 pharmacokinetic pathways similar to systemically administered corticosteroids. Due to
49 the fact that circulating levels are well below the level of detection, the use of
50 pharmacodynamic endpoints for assessing the systemic exposure of topical
51 corticosteroids is necessary. They are metabolized, primarily in the liver, and are then
52 excreted by the kidneys. In addition, some corticosteroids and their metabolites are also
53 excreted in the bile.

54

55 **CLINICAL STUDIES**

56 The safety and efficacy of OLUX Foam has been demonstrated in an adequate and well-
57 controlled clinical trial conducted in 188 patients with moderate to severe scalp psoriasis.
58 Patients were treated twice daily for 2 weeks with OLUX Foam, vehicle foam, a
59 commercially available clobetasol propionate solution (Temovate[®] Scalp Application), or
60 Vehicle solution. After 2 weeks of treatment, study results of the 188 patients
61 demonstrated that the efficacy of OLUX Foam in treating scalp psoriasis was superior to
62 that of vehicle (foam and solution), and was comparable to that of Temovate Scalp
63 Application (see Table below).

64

	OLUX Foam n (%)	Vehicle Foam n (%)
Subjects with Scalp Psoriasis Parameter Clear at Endpoint		
Scaling	42 (68)	3 (10)
Erythema	27 (44)	2 (6)
Plaque Thickness	41 (66)	3 (10)
Treatment Successes*	39 (63)	1 (3)
Total number of patients	62	31

65 *Defined as an Investigator's Global Assessment of "completely clear" or "almost clear," and a plaque thickness
66 score of 0, an erythema score of 0 or 1, and a scaling score of 0 or 1 at Endpoint, scored on a severity scale of 0-4.
67

68 **INDICATIONS AND USAGE**

69 OLUX Foam is a super-potent topical corticosteroid indicated for short-term topical
70 treatment of the inflammatory and pruritic manifestations of moderate to severe
71 corticosteroid-responsive dermatoses of the scalp.

72

73 In a controlled pharmacokinetic study 3 of 13 patients experienced reversible
74 suppression of the adrenal following 14 days of OLUX Foam therapy.
75 Treatment beyond 2 consecutive weeks is not recommended, and the total dosage
76 should not exceed 50 g per week because of the potential for the drug to suppress the

77 hypothalamic-pituitary-adrenal (HPA) axis. Use in children under 12 years of age is not
78 recommended.

79

80 **CONTRAINDICATIONS**

81 OLUX Foam is contraindicated in patients who are hypersensitive to clobetasol
82 propionate, to other corticosteroids, or to any ingredient in this preparation.

83

84 **PRECAUTIONS**

85 **General: Clobetasol propionate is a super potent topical corticosteroid that has**
86 **been shown to suppress the adrenal at 7.0 g of OLUX Foam per day. Lesser**
87 **amounts of OLUX Foam were not studied.** Systemic absorption of topical
88 corticosteroids has caused reversible adrenal suppression with the potential for
89 glucocorticosteroid insufficiency after withdrawal of treatment. Manifestations of
90 Cushing's syndrome, hyperglycemia, and glucosuria can also be produced in some
91 patients by systemic absorption of topical corticosteroids while on treatment.

92

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

96

97 Therefore, patients applying a topical steroid to a large surface area or to areas under
98 occlusion should be evaluated periodically for evidence of adrenal suppression. If
99 adrenal suppression is noted, an attempt should be made to withdraw the drug, to
100 reduce the frequency of application, or to substitute a less potent steroid.

101

102 Recovery of HPA axis function is generally prompt upon discontinuation of topical
103 corticosteroids. Infrequently, signs and symptoms of glucocorticosteroid insufficiency
104 may occur requiring supplemental systemic corticosteroids. For information on systemic
105 supplementation, see prescribing information for those products.

106

107 Pediatric patients may be more susceptible to systemic toxicity from equivalent doses
108 due to their larger skin surface to body mass ratios. (See **PRECAUTIONS-Pediatric**
109 **Use**.)

110

111 If irritation develops, OLUX Foam should be discontinued and appropriate therapy
112 instituted. Allergic contact dermatitis with corticosteroids is usually diagnosed by
113 observing a failure to heal rather than noting a clinical exacerbation, as with most topical
114 products not containing corticosteroids. Such an observation should be corroborated
115 with appropriate diagnostic patch testing.

116

117 In the presence of dermatological infections, the use of an appropriate antifungal or
118 antibacterial agent should be instituted. If a favorable response does not occur
119 promptly, use of OLUX Foam should be discontinued until the infection has been
120 adequately controlled.

121

122 **Information for Patients:** Patients using topical corticosteroids should receive the
123 following information and instructions:

124

- 125 1. This medication is to be used as directed by the physician and should not be used
126 longer than the prescribed time period. It is for external use only. Avoid contact with
127 the eyes.
- 128 2. This medication should not be used for any disorder other than that for which it was
129 prescribed.
- 130 3. The treated scalp area should not be bandaged or otherwise covered or wrapped so
131 as to be occlusive unless directed by the physician.
- 132 4. Patients should report to their physician any signs of local adverse reactions.

133

134 **Laboratory Tests:** The following tests may be helpful in evaluating patients for adrenal
135 suppression:

136

- 137 ACTH stimulation test
- 138 A.M. plasma cortisol test
- 139 Urinary free cortisol test

140

141 **Carcinogenesis, Mutagenesis, and Impairment of Fertility:** Long-term animal studies
142 have not been performed to evaluate the carcinogenic potential of clobetasol propionate.

143

144 Clobetasol propionate was non-mutagenic in three different test systems: the Ames test,
145 the *Saccharomyces cerevisiae* gene conversion assay, and the *E. coli* B WP2 fluctuation
146 test.

147

148 Studies in the rat following subcutaneous administration of clobetasol propionate at
149 dosage levels up to 0.05 mg/kg per day revealed that the females exhibited an increase
150 in the number of resorbed embryos and a decrease in the number of living fetuses at the
151 highest dose.

152

153 **Pregnancy: Teratogenic Effects: Pregnancy Category C:** Corticosteroids have been
154 shown to be teratogenic in laboratory animals when administered systemically at
155 relatively low dosage levels. Some corticosteroids have been shown to be teratogenic
156 after dermal application to laboratory animals.

157

158 Clobetasol propionate has not been tested for teratogenicity by the topical route;
159 however, it is absorbed percutaneously, and when administered subcutaneously, it was
160 a significant teratogen in both the rabbit and the mouse. Clobetasol propionate has
161 greater teratogenic potential than steroids that are less potent.

162

163 Teratogenicity studies in mice using the subcutaneous route resulted in fetotoxicity at the
164 highest dose tested (1 mg/kg) and teratogenicity at all dose levels tested down to 0.03
165 mg/kg. These doses are approximately 1.4 and 0.04 times, respectively, the human
166 topical dose of OLUX based on body surface area comparisons. Abnormalities seen
167 included cleft palate and skeletal abnormalities.

168

169 In rabbits, clobetasol propionate was teratogenic at doses of 0.003 and 0.01 mg/kg.
170 These doses are approximately 0.02 and 0.05 times, respectively, the human topical
171 dose of OLUX based on body surface area comparisons. Abnormalities seen included
172 cleft palate, cranioschisis, and other skeletal abnormalities.
173

174 There are no adequate and well-controlled studies of the teratogenic potential of
175 clobetasol propionate in pregnant women. OLUX Foam should be used during
176 pregnancy only if the potential benefit justifies the potential risk to the fetus.
177

178 **Drugs of this class should not be used extensively on pregnant patients, in large**
179 **amounts, or for prolonged periods of time.**

180 ***Nursing Mothers:*** Systemically administered corticosteroids appear in human milk and
181 could suppress growth, interfere with endogenous corticosteroid production, or cause
182 other untoward effects. It is not known whether topical administration of corticosteroids
183 could result in sufficient systemic absorption to produce detectable quantities in breast
184 milk. Because many drugs are excreted in human milk, caution should be exercised
185 when OLUX Foam is administered to a nursing woman.
186

187 ***Pediatric Use:*** Safety and effectiveness of OLUX Foam in pediatric patients have not
188 been established; therefore, use in children under 12 years of age is not recommended.
189 Because of a higher ratio of skin surface area to body mass, pediatric patients are at a
190 greater risk than adults of adrenal suppression and Cushing's syndrome when they are
191 treated with topical corticosteroids. They are therefore at greater risk of adrenal
192 insufficiency during and/or after withdrawal of treatment. Adverse effects including striae
193 have been reported with inappropriate use of topical corticosteroids in infants and
194 children.
195

196 ***Adrenal suppression, Cushing's syndrome, linear growth retardation, delayed weight***
197 ***gain, and intracranial hypertension have been reported in children receiving topical***
198 ***corticosteroids. Manifestations of adrenal suppression in children include low plasma***
199 ***cortisol levels and an absence of response to ACTH stimulation. Manifestations of***
200 ***intracranial hypertension include bulging fontanelles, headaches, and bilateral***
201 ***papilledema.***
202

203 ***Geriatric Use:*** Clinical studies of OLUX Foam did not include sufficient numbers of
204 subjects aged 65 and over to determine whether they respond differently from younger
205 subjects. Other reported clinical experience has not identified differences in responses
206 between the elderly and younger patients. In general, dose selection for an elderly
207 patient should be cautious, usually starting at the low end of the dosing range, reflecting
208 the greater frequency of decreased hepatic, renal or cardiac function, and of
209 concomitant disease or other drug therapy.
210

211 **ADVERSE REACTIONS**

212 In a controlled trial (188 patients) with OLUX Foam, the only reported adverse reactions
213 were one case each of dry skin, eczema, and skin hypertrophy. In larger controlled trials
214 with other clobetasol propionate formulations, the most frequently reported adverse
215 reactions have included burning, stinging, irritation, pruritus, erythema, folliculitis,
216

217 cracking and fissuring of the skin, numbness of the fingers, skin atrophy, and
218 telangiectasia (all less than 2%).

219

220 The following additional local adverse reactions have been reported with topical
221 corticosteroids, but they may occur more frequently with the use of occlusive dressings
222 and higher potency corticosteroids such as OLUX Foam. These reactions are listed in
223 an approximate decreasing order of occurrence: irritation, dryness, folliculitis, acneiform
224 eruptions, hypopigmentation, perioral dermatitis, allergic contact dermatitis, secondary
225 infection, skin atrophy, striae, and miliaria.

226

227 Systemic absorption of topical corticosteroids has produced reversible adrenal
228 suppression, manifestations of Cushing's syndrome, hyperglycemia, and glucosuria in
229 some patients.

230

231 **OVERDOSAGE**

232 Topically applied OLUX Foam can be absorbed in sufficient amounts to produce
233 systemic effects. (See **PRECAUTIONS**.)

234

235 **DOSAGE AND ADMINISTRATION**

236 Note: For proper dispensing of foam, hold the can upside down and depress the
237 actuator.

238

239 OLUX Foam should be applied to the affected scalp area twice daily, once in the
240 morning and once at night. Invert the can and dispense a small amount of OLUX Foam
241 (up to a maximum of a golf-ball-size dollop) into the cap of the can, onto a saucer or
242 other cool surface, or directly on the lesion, taking care to avoid contact with the eyes.
243 Dispensing directly onto hands is not recommended, as the foam will begin to melt
244 immediately upon contact with warm skin. Move the hair away from the affected area of
245 the scalp so that the foam can be applied to each affected area. Gently massage into
246 affected scalp area until the foam disappears. Repeat until entire affected scalp area is
247 treated.

248

249 OLUX Foam is a super-high-potency topical corticosteroid; therefore, treatment should
250 be limited to 2 consecutive weeks and amounts greater than 50 g/week should not be
251 used. Use in pediatric patients under 12 years of age is not recommended.

252

253 Unless directed by a physician, OLUX Foam should not be used with occlusive
254 dressings.

255

256 **HOW SUPPLIED**

257 OLUX Foam is supplied in a 100-gram aluminum can; box of one (NDC 63032-031-00).

258

259 Store at controlled room temperature 68-77°F (20-25°C).

260

261 **WARNING**

262 **FLAMMABLE. AVOID FIRE, FLAME OR SMOKING DURING AND IMMEDIATELY**
263 **FOLLOWING APPLICATION.** Keep out of reach of children. Contents under pressure.

264 Do not puncture or incinerate container. Do not expose to heat or store at temperatures
265 above 120°F (49°C).

266

267 Manufactured for:
268 Connetics Corporation
269 Palo Alto, CA 94303
270 USA

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282 By:
283 CCL Pharmaceuticals
284 Runcorn WA7 1NU
285 United Kingdom

286

287 LB-0190/L00702 May 26, 2000

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PATIENT INFORMATION

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About OLUX™ Foam

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Your doctor has prescribed OLUX Foam for the relief of dermatoses of the scalp, such as psoriasis. OLUX Foam works because its active ingredient is clobetasol propionate, 0.05%. Clobetasol propionate belongs to a group of medicines known as topical corticosteroids. These agents are used to reduce the inflammation, redness, swelling, itching, and tenderness associated with dermatologic conditions.

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Other ingredients in OLUX Foam include ethanol, purified water, propylene glycol, cetyl alcohol, stearyl alcohol, polysorbate 60, citric acid, and potassium citrate. The foam is dispensed from an aluminum can that is pressurized by a hydrocarbon propellant (propane and butane).

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If you answer YES to one or more of the following questions, tell your doctor (or pharmacist) before using this medicine, so you can get advice about what to do.

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- Are you allergic to any of the ingredients contained in OLUX Foam?
- Are you pregnant? Planning on becoming pregnant while using OLUX Foam? Or are you breastfeeding?
- Do you think you have an infection on your scalp?

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How to apply OLUX Foam

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Turn the can upside down and dispense a small amount of OLUX Foam into the cap of the can, onto a clean saucer or other cool, clean surface, or directly onto the lesion, taking care to avoid contact with the eyes. Dispensing directly onto hands is not recommended, as the foam will begin to melt immediately upon contact with warm skin.

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Move the hair away from the affected area of your scalp so that the foam can be applied to each affected area. Gently massage into the affected scalp area until the foam disappears. Repeat until entire affected scalp area is treated.

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Apply twice daily, once in the morning and once at night. Use only enough to cover the affected areas.

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Wash your hands after applying OLUX Foam and discard any unused dispensed medication.

336
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Do not wash or rinse the treated areas immediately after applying OLUX Foam.

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- Use this medication only for the condition for which it was prescribed. OLUX Foam should not be applied to the face, groin, or armpits.
- **OLUX Foam is for external use only.**

- 343
- 344
- 345
- 346
- **Keep the foam away from your eyes,** as it will sting. If the foam gets into your eyes, rinse well with cold water. If the stinging continues, contact your doctor immediately.

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PATIENT INFORMATION

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WHAT YOU SHOULD KNOW ABOUT OLUX FOAM:

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What to do if you miss an application

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If you forget to apply OLUX Foam at the scheduled time, use it as soon as you remember, and then go back to your regular schedule. If you remember at or about the time of your next daily application, apply that dose and continue with your normal application schedule. If you miss several doses, tell your doctor.

361
362

About side effects

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As with all medications, there may be some side effects. The most frequent side effects associated with the use of clobetasol propionate formulations include mild burning, stinging, or itching at the site of application. These side effects typically disappear shortly after application.

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Let your doctor know if you notice any of the following:

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- Any unusual effects that you do not understand.
- Affected areas that do not seem to be healing after 2 weeks of using the foam.

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Important safety notes

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- The treated areas should not be bandaged or covered unless directed by your doctor.
- Keep this and all medicines out of the reach of children.
- Treatment should be limited to 2 consecutive weeks.
- Treatment should be limited to no more than 50 g of medication per week.
- Use in patients under 12 years of age is not recommended.
- Keep the foam away from your eyes.

- 386 • Store the can at controlled room temperature, 68-77°F (20-25°C), and protect it from direct
387 sunlight, as this is a pressurized container.
388
- 389 • **Keep away from and do not spray near fire, open flame, or direct heat—this product is**
390 **flammable.** Do not smoke while using or holding the can. Keep the can away from all
391 sources of ignition. Do not pierce or burn the can, and never throw the can in a fire, even if
392 empty.
393
- 394 • When you have finished your treatment, dispose of the can safely. A completely empty can
395 is recyclable.
396
- 397 • Do not use the foam after the expiration date shown on the bottom of the can.
398
- 399 • Do not give OLUX Foam to anyone else. Your doctor has prescribed this
400 medicine for your use only.
401
402

403 *This pamphlet has been designed to provide you with important information*
404 *about OLUX Foam, but does not address every aspect of the foam. If, after*
405 *reading this pamphlet, you have any questions or concerns, please speak with*
406 *your doctor or pharmacist.*
407

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