

NDA 021366/S-046

## SUPPLEMENT APPROVAL

AstraZeneca UK Limited  
C/O: AstraZeneca Pharmaceuticals LP  
Attention: Sally Walsh  
Senior Regulatory Affairs Director  
One MedImmune Way  
Gaithersburg, MD 20878

Dear Sally Walsh:

Please refer to your supplemental new drug application (sNDA) dated and received May 10, 2024, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Crestor (rosuvastatin calcium) tablets.

This Prior Approval sNDA provides for the following updates to the Crestor Prescribing Information and the Patient Package Insert:

- Revised the indication statement in Section 1 *Indications and Usage* to better describe the overall effect of the composite endpoint and to provide consistency in labeling major adverse cardiovascular events (MACE) endpoints:
  - From: To reduce the risk of stroke, myocardial infarction, and arterial revascularization procedures in adults without established coronary heart disease who are at increased risk of cardiovascular (CV) disease based on age, hsCRP  $\geq 2$  mg/L, and at least one additional CV risk factor.
  - To: To reduce the risk of major adverse cardiovascular (CV) events (CV death, nonfatal myocardial infarction, nonfatal stroke, or an arterial revascularization procedure) in adults without established coronary heart disease who are at increased risk of CV disease based on age, high-sensitivity C-reactive protein (hsCRP)  $\geq 2$  mg/L, and at least one additional CV risk factor.
- Minor revisions were made to Sections 2.1 *General Dosage and Administration Information* and 2.6 *Dosage Modifications Due to Drug Interactions*.
- Modified Table 5 in Section 7.1 *Drug Interactions that Increase the Risk of Myopathy and Rhabdomyolysis with CRESTOR* to include drug interaction information with ticagrelor.
- Updated America's Poison Centers in Section 10 *Overdosage* to current name that removes the term "control."

- Revised the Patient Package Insert for consistency with the full Prescribing Information. Additional revisions were made to reduce redundancy, to make patient information more consistent and concise, and to include the information necessary for patients to safely take their medication.

### **APPROVAL & LABELING**

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 enclosed agreed-upon labeling with minor editorial revisions listed below and reflected in the enclosed labeling.

- Revision dates in the Highlights of Prescribing Information and Patient Package Insert were updated to reflect supplement approval.

### **WAIVER OF ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS**

Please note that we have previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of Prescribing Information.

### **CONTENT OF LABELING**

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at FDA.gov.<sup>1</sup> Content of labeling must be identical to the enclosed labeling (text for the Prescribing Information and Patient Package Insert), with the addition of any labeling changes in pending “Changes Being Effected” (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

Information on submitting SPL files using eList may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*.<sup>2</sup>

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that include labeling changes for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in Microsoft Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes. To facilitate review of your submission(s), provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft

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<sup>1</sup> <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

<sup>2</sup> We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

### **REQUIRED PEDIATRIC ASSESSMENTS**

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), 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 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.

### **PATENT LISTING REQUIREMENTS**

Pursuant to 21 CFR 314.53(d)(2) and 314.70(f), certain changes to an approved NDA submitted in a supplement require you to submit patent information for listing in the Orange Book upon approval of the supplement. You must submit the patent information required by 21 CFR 314.53(d)(2)(i)(A) through (C) and 314.53(d)(2)(ii)(A) and (C), as applicable, to FDA on Form FDA 3542 within 30 days after the date of approval of the supplement for the patent information to be timely filed (see 21 CFR 314.53(c)(2)(ii)). You also must ensure that any changes to your approved NDA that require the submission of a request to remove patent information from the Orange Book are submitted to FDA at the time of approval of the supplement pursuant to 21 CFR 314.53(d)(2)(ii)(B) and 314.53(f)(2)(iv).

### **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, contact Martin White, MS, Regulatory Project Manager, at 240-402-6018.

Sincerely,

*{See appended electronic signature page}*

John Sharretts, M.D.  
Director  
Division of Diabetes, Lipid Disorders, and Obesity  
Office of Cardiology, Hematology,  
Endocrinology, and Nephrology  
Office of New Drugs  
Center for Drug Evaluation and Research

ENCLOSURES:

- Content of Labeling
  - Prescribing Information
  - Patient Package Insert

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**This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.**  
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/s/  
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JOHN M SHARRETTS  
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