DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
Rockville, MD 20857

NDA 50-705/S-006

Sanofi-aventis U.S. LLC
Attention: Jo Beth Crimmins
Specialist, Heritage Product Support
US Regulatory Affairs Marketed Products
55 Corporate Drive
Bridgewater, NJ 08807

Dear Ms. Crimmins:

Please refer to your supplemental new drug application dated June 26, 2008, received June 27, 2008, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Rifater® (rifampin, isoniazid and pyrazinamide) Tablets, 120 mg/50 mg/300 mg respectively.

This "Changes Being Effected" supplemental new drug application provides the following changes to the package insert (~~strikethrough~~ = deleted text, underlined = added text):

1. The **WARNINGS/Rifampin** subsection has been revised to read**:**

> **Rifampin.** Rifampin has been shown to produce liver dysfunction. Fatalities associated with jaundice have occurred in patients with liver disease and in patients taking rifampin with other hepatotoxic agents. Because RIFATER contains both rifampin and isoniazid, it should only be given with caution and under strict medical supervision to patients with impaired liver function. In these patients, careful monitoring of liver function, especially serum glutamic pyruvic transaminase (SGPT) and serum glutamic oxaloacetic transaminase (SGOT) should be carried out prior to therapy and then every 2 to 4 weeks during therapy. If signs of hepatocellular damage occur, RIFATER should be withdrawn.

2. The **ADVERSE REACTIONS/Adverse Reactions Reported for Individual Components/Other** subsection has been revised to read as follows:

> **Other:** Mild arthralgia and myalgia have been reported frequently. Hypersensitivity reactions including rashes, urticaria, ~~and~~ pruritus, and erythema have been reported. Angioedema has been reported rarely. Fever, acne, photosensitivity, porphyria, dysuria, and interstitial nephritis have been reported rarely.

We have completed our review of this application. This application is approved, effective on the date of this letter, for use as recommended in the agreed-upon labeling submitted June 26, 2008..

If you issue a letter communicating important information about this drug product (i.e., a "Dear Health Care Professional" letter), we request that you submit a copy of the letter to this NDA and a copy to the following address:

MEDWATCH
Food and Drug Administration
Suite 12B05
5600 Fishers Lane
Rockville, MD 20857

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 Hyun Son, Pharm.D., Regulatory Project Manager, at (301) 796-1600.

Sincerely,

{See appended electronic signature page}

Renata Albrecht, M.D.
Director
Division of Special Pathogen and Transplant Products
Office of Antimicrobial Products
Center for Drug Evaluation and Research

Enclosure: Package Insert

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

/s/

Renata Albrecht

12/18/2008 11:02:44 AM