CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

ANDA 76-652

***Name*:** GlycoLax (Polyethylene Glycol 3350 Powder for Oral Solution)

***Sponsor*:** Schwarz Pharma, Inc.

***Approval Date*:** July 2, 2004

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

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CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

APPROVAL LETTER

ANDA 76-652

JUL 2 2004

Schwarz Pharma, Inc.
Attention: Donna K. Multhauf
P.O. Box 2038
Milwaukee, WI 53201

Dear Madam:

This is in reference to your abbreviated new drug application (ANDA) dated January 30, 2003, submitted pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act (the Act), for GlycoLax (Polyethylene Glycol 3350 Powder for Oral Solution).

Reference is made to your amendments dated December 23, 2003; and April 12, May 25, May 28, and June 7, 2004. Reference is also made to the Tentative Approval letter issue by this office on December 23, 2003.

The listed drug product (RLD) referenced in your application, MiraLax Powder for Oral Solution of Braintree Laboratories, Inc. (Braintree), is subject to periods of patent protection. As noted in the agency's publication entitled Approved Drug Products with Therapeutic Equivalence Evaluations, the "Orange Book", U.S. Patent No. 5,710,183 (the '183 patent) is scheduled to expire on July 14, 2015, and U.S. Patent No. 6,048,901 (the '901 patent) is scheduled to expire April 20, 2019. Your application contains paragraph IV certifications to each patent under Section 505(j)(2)(A)(vii)(IV) of the Act stating that these patents will not be infringed by your manufacture, use, or sale of GlycoLax under this ANDA. Section 505(j)(5)(B)(iii) of the Act provides that approval of an ANDA shall be made effective immediately, unless an action is brought against Schwarz Pharma, Inc. (Schwarz) for infringement of either of the patents which were the subject of the paragraph IV certifications. This action must be brought against Schwarz prior to the expiration of forty-five (45) days from the date the notice you provided under paragraph (2)(B)(i) was received by both the NDA and patent holder. You have informed the agency the Schwarz complied with the requirements of Section 505(j)

(2)(B) of the Act. As a result, Schwarz was sued for infringement of the '183 patent in the United States District Court for the District of Delaware (Braintree Laboratories, Inc. v. Schwarz Pharma, Inc., Civil Action No. 03-477-SLR).

On June 7, 2004, you notified the agency that Braintree and Schwarz Pharma, Inc. entered into a Stipulated Order of Dismissal on June 3, 2004, in which Braintree Laboratories, Inc.'s complaint for infringement of the '183 patent was dismissed with prejudice. In addition, under the terms of the Stipulated Orders of Dismissal, Braintree waived any remaining portion of the 30-month stay ('183 patent) applying to this ANDA.

We have completed the review of this abbreviated application and have concluded that the drug is safe and effective for use as recommended in the submitted labeling. Accordingly, the application is approved. The Division of Bioequivalence has determined your GlycoLax (Polyethylene Glycol 3350 Powder for Oral Solution) to be bioequivalent and, therefore, therapeutically equivalent to the listed drug, Miralax Powder for Oral Solution of Braintree Laboratories, Inc.

Under Section 506A of the Act, certain changes in the conditions described in this abbreviated application require an approved supplemental application before the change may be made.

Post-marketing reporting requirements for this abbreviated application are set forth in 21 CFR 314.80-81 and 314.98. The Office of Generic Drugs should be advised of any change in the marketing status of this drug.

Promotional materials may be submitted to FDA for comment prior to publication or dissemination. Please note that these submissions are voluntary. If you desire comments on proposed launch promotional materials with respect to compliance with applicable regulatory requirements, we recommend you submit, in draft or mock-up form, two copies of both the promotional materials and package insert(s) directly to:

Food and Drug Administration
Division of Drug Marketing, Advertising, and Communications, HFD-42
5600 Fishers Lane
Rockville, MD 20857

We call your attention to 21 CFR 314.81(b)(3) which requires that all promotional materials be submitted to the Division of Drug Marketing, Advertising, and Communications (HFD-42) with a completed Form FDA 2253 at the time of their initial use.

Sincerely yours,

Gary Buehler 7/2/04
Director
Office of Generic Drugs
Center for Drug Evaluation and Research

APPEARS THIS WAY
ON ORIGINAL

cc: ANDA 76-652
Division File
Field Copy
HFD-610/R. West
HFD-330
HFD-205
HFD-610/Orange Book Staff
HFD-600/C. Parise
HFD-604/D. Hare

Robert Lyet 7/2/2004

HFD-647/N.Samaan/ Vahed H 6-28-04
HFD-647/U.Venkataram/ U.V. Venkataram 6/28/2004.
HFD-617/S.Shepperson/ [signature] 6/28/04
HFD-613/A.Vezza/ A Vezza 6/28/04
HFD-613/L.Golson/ [signature] 6/28/04

[signature] 7/1/04

V:\\CDSNAS\OGDS11\FIRMSnz//schwarz//LTRS&REV//76652.AP.DOC
F/T by

APPROVAL

APPEARS THIS WAY
ON ORIGINAL

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

TENTATIVE APPROVAL LETTER

ANDA 76-652

DEC 23 2003

Schwarz Pharma, Inc.
Attention: Donna K. Multhauf
6140 W. Executive Drive
Mequon, WI 53092

Dear Madam:

This is in reference to your abbreviated new drug application (ANDA) dated January 30, 2003, submitted pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act (the Act), for Polyethylene Glycol 3350 Powder for Oral Solution, 17 g/Scoopful.

Reference is also made to your amendments dated August 18, and October 17, 2003. We acknowledge receipt of your communications dated April 14, and September 10, 2003, addressing the patent issues noted below.

We have completed the review of this abbreviated application, and based upon the information you have presented to date we have concluded that the drug is safe and effective for use as recommended in the submitted labeling. Although we are unable to grant final approval at this time due to the patent issues summarized below, the application is **tentatively approved.** This determination is based upon information available to the agency at this time (i.e., information in your application and the status of current good manufacturing practices (cGMPs) of the facilities used in the manufacture and testing of the drug product) and is therefore subject to change on the basis of new information that may come to our attention. This letter does not address notice issues related to the 180-day exclusivity provisions under section 505(j)(5)(B)(iv) of the Act.

The listed drug product (RLD) referenced in your application, MiraLax Powder for Solution of Braintree Laboratories, Inc., is subject to periods of patent protection. As noted in the agency's publication entitled Approved Drug Products with Therapeutic Equivalence Evaluations, the "Orange Book", U.S. Patent 5,710,183 (the '183 patent) is scheduled to expire on

July 14, 2015, and U.S. Patent 6,048,901 (the '901 patent) is scheduled to expire on April 20, 2019. Your application contains paragraph IV certification to both the '183 and '901 patents under Section 505(j)(2)(A)(vii)(IV) of the Act stating that the '183 and '901 patents will not be infringed by your manufacture, use, or sale of Polyethylene Glycol 3350 Powder for Oral Solution as provided for in this ANDA. Section 505(j)(5)(B)(iii) of the Act provides that approval of an ANDA shall be made effective immediately, unless an action is brought against Schwarz Pharma, Inc. (Schwarz) for infringement of either of the patents which were the subjects of the paragraph IV certifications. This action must be brought against Schwarz prior to the expiration of forty-five (45) days from the date the notice you provided under paragraph (2)(B)(i) was received by the NDA/patent holder. You have notified that agency that Schwarz complied with the requirements of Section 505(j)(2)(B) of the Act and that litigation is currently underway in the United States District Court for the District of Delaware (Braintree Laboratories, Inc. v. Schwarz Pharma, Inc., Civil Action No. 03-477-SLR). Therefore, final approval cannot be granted until:

1. a. the expiration of the 30-month period (currently October 7, 2005) provided for in section 505(j)(5)(B)(iii) since the date of receipt of the 45-day notice required under section 505(j)(2)(B)(i), unless the court has extended or reduced the period because of the failure of either party to reasonably cooperate in expediting the action, or,

   b. the date of court decision [505(j)(5)(B)(iii)(I), (II), or (III)], finding that Schwarz does not infringe the patents or,

   c. both the '183 and '901 patents have expired, and

2. The agency is assured there is no new information that would affect whether final approval should be granted.

In order to reactivate your application prior to final approval, please submit a "MINOR AMENDMENT - FINAL APPROVAL REQUESTED" 90 days prior to the date you believe your application will be eligible for final approval. This amendment should provide an explanation for the reason(s) you believe the ANDA is eligible

for final approval including a copy of a court order, settlement agreement between the parties, licensing agreement, or any other relevant information as applicable. The amendment should also identify changes, if any, in the conditions under which the ANDA was tentatively approved, i.e., updated information such as final-printed labeling, chemistry, manufacturing, and controls data as appropriate. Alternatively, a statement that no such changes have been made to the application since the date of tentative approval may be provided.

In addition to the amendment requested above, the agency may request at any time prior to the final date of approval that you submit an additional amendment containing the requested information. Failure to submit either or, if requested, both amendments may result in rescission of the tentative approval status of your application, or may result in a delay in the issuance of the final approval letter.

Any significant changes in the conditions outlined in this ANDA as well as changes in the status of the manufacturing and testing facilities' compliance with current good manufacturing practices (cGMPs) are subject to agency review before final approval of the application will be made. Such changes should be categorized as representing either "major" or "minor" changes, and they will be reviewed according to OGD policy in effect at the time of receipt. The submission of multiple amendments prior to final approval may also result in a delay in the issuance of the final approval letter.

This drug product may not be marketed without final agency approval under section 505 of the Act. The introduction or delivery for introduction into interstate commerce of this drug before the effective final approval date is prohibited under section 501 of the Act and 21 U.S.C. 331(d). Also, until the agency issues the final approval letter, this drug product will not be deemed approved for marketing under 21 U.S.C. 355, and will not be listed in the "Orange Book".

For further information on the status of this application, or prior to submitting any additional amendments, please contact Stanley Shepperson, Project Manager, at (301) 827-5798, for further instructions.

Sincerely yours,

Gary Buehler 12/23/03
Director
Office of Generic Drugs
Center for Drug Evaluation and Research

APPEARS THIS WAY
ON ORIGINAL

cc: ANDA 76-652
Division File
Field Copy
HFD-610/R. West
HFD-330
HFD-205
HFD-610/Orange Book Staff

Endorsements:
HFD-647/N.Samaan/ 12-15-03
HFD-647/U.Venkataram/ U.V. Venkataram 12/16/2003
HFD-617/S.Shepperson/ 12/16/03
HFD-613/A.Vezza/ 12/16/03
HFD-613/L.Golson/ 12/16/03

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F/T by rad12/12/03

TENTATIVE APPROVAL

12/23/2003

APPEARS THIS WAY
ON ORIGINAL

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

LABELING

CR4557A

Glycolax™
(Polyethylene Glycol 3350
Powder for Oral Solution)

K-U

PATIENT INFORMATION

GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a prescription only laxative which has been prescribed by your physician to treat constipation. This product should only be used by the person for whom it was prescribed.

How to take
The dose is 17 grams each day or as directed by physician. It should always be taken by mouth. Stir and dissolve the contents of one packet (17 grams) in a glass (8 oz) of water, juice, soda, coffee, or tea. Taking more than the prescribed dose may cause loss of fluid due to severe diarrhea.

How will it work
GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. Your first bowel movement will usually happen in **two to four days**, although results may vary for individual patients.

How long should I take it
GlycoLax™ achieves its best results when used between one and two weeks. You may discontinue taking the drug after you have had several satisfactory bowel movements. Should unusual cramps, bloating, or diarrhea occur, consult your physician. GlycoLax™ is intended for up to a two week course of therapy. You should not use for a longer time unless directed by your physician.

Next Steps
After successfully completing the GlycoLax™ therapy (usually between one and two weeks), please discuss with your physician lifestyle changes which may produce more regular bowel habits (adequate dietary and fluid intake, regular exercise).

Who Should NOT take GlycoLax™
GlycoLax™ should not be used by children. It should not be used by pregnant women unless prescribed by a physician.

Side Effects/Drug Reactions
Occasionally, GlycoLax™ may cause nausea, stomach fullness, cramping, diarrhea and/or gas. Do not take if you have symptoms such as nausea, vomiting, abdominal pain or distention, which may be due to bowel obstruction. On rare occasions, hives and skin rashes have been reported which are suggestive of an allergic reaction. If you get an allergic reaction, you should discontinue the medication and call your physician.

If you are allergic to polyethylene glycol, do not use this drug product.

Kremers Urban, LLC
Mequon, WI 53092, USA

CR4557A
Rev. 03/04

3 62175 44214 7

NO ACRYLIC COATING IN THIS AREA

Control No.
Exp. Date

Laboratory Tests: No clinically significant effects on laboratory tests have been demonstrated

Drug Interactions. No specific drug interactions have been demonstrated.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Long-term carcinogenicity studies, genetic toxicity studies and reproductive toxicity studies in animals have not been performed with GlycoLax™.

Pregnancy: Category C Animal reproductive studies have not been performed with GlycoLax™. It is also not known whether GlycoLax™ can cause fetal harm when administered to a pregnant woman, or can affect reproductive capacity. GlycoLax™ should only be administered to a pregnant woman if clearly needed

Pediatric Use: Safety and effectiveness in pediatric patients has not been established.

Geriatric Use: There is no evidence for special considerations when GlycoLax™ is administered to elderly patients.

In geriatric nursing home patients, a higher incidence of diarrhea occurred at the recommended 17 gram dose. If diarrhea occurs, GlycoLax™ should be discontinued.

ADVERSE REACTIONS
Nausea, abdominal bloating, cramping and flatulence may occur. High doses may produce diarrhea and excessive stool frequency, particularly in elderly nursing home patients.

Patients taking other medications containing polyethylene glycol have occasionally developed urticaria suggestive of an allergic reaction.

OVERDOSAGE
There have been no reports of accidental overdosage. In the event of overdosage, diarrhea would be the expected major event. If an overdose of drug occurred without concomitant ingestion of fluid, dehydration due to diarrhea may result. Medication should be terminated and free water administered. The oral LD_{50} is >50 gm/kg in mice, rats and rabbits

DOSAGE AND ADMINISTRATION
The usual dose is 17 grams (about 1 heaping tablespoonful) of powder per day (or as directed by physician) in 8 ounces of water, juice, soda, coffee, or tea. Each bottle of GlycoLax™ is supplied with a dosing cup marked to contain 17 grams of laxative powder when filled to the indicated line.

Two to 4 days (48 to 96 hours) may be required to produce a bowel movement.

HOW SUPPLIED
In powdered form, for oral administration after dissolution in water, juice, soda, coffee, or tea. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is available in three package sizes: a 16 oz. container of 255 grams of laxative powder (NDC 62175-442-15), a 24 oz. container of 527 grams of laxative powder (NDC 62175-442-31), and a carton of 14 individual packets containing a single 17 gram dose (NDC 62175-442-14)

The dosing cup supplied with each bottle is marked with a measuring line and may be used to measure a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoonful).

Each individual packet contains a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoonful)

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature]

Kremers Urban, LLC
Mequon, WI 53092, USA

NDC 62175-442-14

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350 Powder for Oral Solution)

This carton contains 14 single-dose packets (7 units - 2 packets each).

Each packet contains
17 grams of polyethylene glycol 3350, NF powder.

Rx Only

K-U

GlycoLax™
(Polyethylene Glycol 3350 Powder for Oral Solution)
Rx Only

DESCRIPTION
A white powder for reconstitution. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is not less than 90.0 percent and not greater than 110.0 percent of the nominal value. The chemical formula is $HO(C_2H_4O)_nH$ in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. GlycoLax™ is an osmotic agent for the treatment of constipation.

CLINICAL PHARMACOLOGY
Pharmacology: GlycoLax™ is an osmotic agent which causes water to be retained with the stool. Essentially, complete recovery of GlycoLax™ was shown in normal subjects without constipation. Attempts at recovery of GlycoLax™ in constipated patients resulted in incomplete and highly variable recovery. In vitro study showed indirectly that GlycoLax™ was not fermented into hydrogen or methane by the colonic microflora in human feces. GlycoLax™ appears to have no effect on the active absorption or secretion of glucose or electrolytes. There is no evidence of tachyphylaxis.

CLINICAL TRIALS
In one study, patients with less than 3 bowel movements per week were randomized to GlycoLax™, 17 grams, or placebo for 14 days. An increase in bowel movement frequency was observed for both treatment groups during the first week of treatment. GlycoLax™ was statistically superior to placebo during the second week of treatment.

In another study, patients with 3 bowel movements or less per week and/or less than 200 grams of stool per week were randomized to 2 dose levels of GlycoLax™ or placebo for 10 days each. Success was defined by an increase in both bowel movement frequency and daily stool weight. For both parameters, superiority of the 17 gram dose of GlycoLax™ over placebo was demonstrated.

INDICATIONS AND USAGE
For the treatment of occasional constipation. This product should be used for 2 weeks or less or as directed by a physician

CONTRAINDICATIONS
GlycoLax™ is contraindicated in patients with known or suspected bowel obstruction and patients known to be allergic to polyethylene glycol.

WARNINGS
Patients with symptoms suggestive of bowel obstruction (nausea, vomiting, abdominal pain or distention) should be evaluated to rule out this condition before initiating GlycoLax™ therapy

PRECAUTIONS
General: Patients persistently with complaints of constipation should have a thorough medical history and physical examination to detect associated metabolic, endocrine and neurogenic conditions and medications. A diagnostic evaluation should include a structural examination of the colon. Patients should be educated about good defecatory and eating habits (such as high fiber diets) and lifestyle changes (adequate dietary fiber and fluid intake, regular exercise) which may produce more regular bowel habits.

GlycoLax™ should be administered after being dissolved in approximately 8 ounces of water, juice, soda, coffee, or tea.

Information for Patients GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. It should always be taken by mouth after being dissolved in 8 ounces of water, juice, soda, coffee, or tea. Should unusual cramps, bloating, or diarrhea occur, consult your physician.

Two to 4 days may be required to produce a bowel movement. This product should be used for 2 weeks or less or as directed by a physician. Prolonged, frequent or excessive use of GlycoLax™ may result in electrolyte imbalance and dependence on laxatives.

To Open:
Fold and tear open at slit.

GlycoLax™

(Polyethylene Glycol 3350
Powder for Oral Solution)

DIRECTIONS

1. Separate attached packets.
2. Fold and tear open packet at slit.
3. Daily dose is one packet (17 grams) per day or as directed by physician.
4. Pour contents of one packet (17 grams) into an 8 oz. glass of water, juice, soda, coffee, or tea.
5. Stir until powder is completely dissolved.
6. Drink the solution.
7. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

L4556A Rev. 03/04

To Open:
Fold and tear open at slit.

GlycoLax™

(Polyethylene Glycol 3350
Powder for Oral Solution)

DIRECTIONS

1. Separate attached packets.
2. Fold and tear open packet at slit.
3. Daily dose is one packet (17 grams) per day or as directed by physician.
4. Pour contents of one packet (17 grams) into an 8 oz. glass of water, juice, soda, coffee, or tea.
5. Stir until powder is completely dissolved.
6. Drink the solution.
7. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

L4556A Rev. 03/04

To Open:
Fold and tear open at slit.

NDC 62175-442-14

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350
Powder for Oral Solution)

This packet contains
17 grams of
polyethylene glycol 3350, NF powder

Rx Only

Single
Dose

To Open:
Fold and tear open at slit.

NDC 62175-442-14

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350
Powder for Oral Solution)

This packet contains
17 grams of
polyethylene glycol 3350, NF powder

Rx Only

Single
Dose

Schwarz Pharma L4556A Glycolax Powder Pouch 2.5" x 6" BLACK PMS 2597 DIELINE DOES NOT PRINT

NDC 62175-442-15

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350 Powder for Oral Solution)

This bottle contains
255 grams of polyethylene glycol 3350 powder

Rx Only

Kremers Urban, Inc.

PCL4554

N 3 62175 44215 4

Control No.
Exp. Date

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoon) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, Inc.
Mequon, WI 53092, USA

PCL4554 Rev. 10/02

Schwarz Pharma PCL4554 base 100% 8.0625" x 3" BLACK PMS 2597 PMS 877

PATIENT INFORMATION

GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a prescription only laxative which has been prescribed by your physician to treat constipation. This product should only be used by the person for whom it was prescribed.

How to take
The dose is 17 grams each day or as directed by physician. It should always be taken by mouth. Measure the dose using the dosing cup (or use one heaping tablespoon of powder), stir and dissolve in a glass (8 oz) of water, juice, soda, coffee, or tea. Taking more than the prescribed dose may cause loss of fluid due to severe diarrhea.

How will it work
GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. Your first bowel movement will usually happen in **two to four days**, although results may vary for individual patients.

How long should I take it
GlycoLax™ achieves its best results when used between one and two weeks. You may discontinue taking the drug after you have had several satisfactory bowel movements. Should unusual cramps, bloating, or diarrhea occur, consult your physician. GlycoLax™ is intended for up to a two week course of therapy. You should not use for a longer time unless directed by your physician.

Next Steps
After successfully completing the GlycoLax™ therapy (usually between one and two weeks), please discuss with your physician lifestyle changes which may produce more regular bowel habits (adequate dietary and fluid intake, regular exercise).

Who Should NOT take GlycoLax™
GlycoLax™ should not be used by children. It should not be used by pregnant women unless prescribed by a physician.

Side Effects/Drug Reactions
Occasionally, GlycoLax™ may cause nausea, stomach fullness, cramping, diarrhea and/or gas. Do not take if you have symptoms such as nausea, vomiting, abdominal pain or distention, which may be due to bowel obstruction. On rare occasions, hives and skin rashes have been reported which are suggestive of an allergic reaction. If you get an allergic reaction, you should discontinue the medication and call your physician.

If you are allergic to polyethylene glycol, do not use this drug.

Kremers Urban, Inc.
Mequon, WI 53092, USA

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoon) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, Inc.
Mequon, WI 53092, USA

PCL4554 Rev. 10/02

GlycoLax™
(Polyethylene Glycol 3350 Powder for Oral Solution)

Rx Only

DESCRIPTION
A white powder for reconstitution. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is not less than 90.0 percent and not greater than 110.0 percent of the nominal value. The chemical formula is $HO(C_2H_4O)_nH$ in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. GlycoLax™ is an osmotic agent for the treatment of constipation.

CLINICAL PHARMACOLOGY
Pharmacology: GlycoLax™ is an osmotic agent which causes water to be retained with the stool. Essentially, complete recovery of GlycoLax™ was shown in normal subjects without constipation. Attempts at recovery of GlycoLax™ in constipated patients resulted in incomplete and highly variable recovery. *In vitro* study showed indirectly that GlycoLax™ was not fermented into hydrogen or methane by the colonic microflora in human feces. GlycoLax™ appears to have no effect on the active absorption or secretion of glucose or electrolytes. There is no evidence of tachyphylaxis.

CLINICAL TRIALS
In one study, patients with less than 3 bowel movements per week were randomized to GlycoLax™, 17 grams, or placebo for 14 days. An increase in bowel movement frequency was observed for both treatment groups during the first week of treatment. GlycoLax™ was statistically superior to placebo during the second week of treatment.

In another study, patients with 3 bowel movements or less per week and/or less than 300 grams of stool per week were randomized to 2 dose levels of GlycoLax™ or placebo for 10 days each. Success was defined by an increase in both bowel movement frequency and daily stool weight. For both parameters, superiority of the 17 gram dose of GlycoLax™ over placebo was demonstrated.

INDICATIONS AND USAGE
For the treatment of occasional constipation. This product should be used for 2 weeks or less or as directed by a physician.

CONTRAINDICATIONS
GlycoLax™ is contraindicated in patients with known or suspected bowel obstruction and patients known to be allergic to polyethylene glycol.

WARNINGS
Patients with symptoms suggestive of bowel obstruction (nausea, vomiting, abdominal pain or distention) should be evaluated to rule out this condition before initiating GlycoLax™ therapy.

PRECAUTIONS
General: Patients presenting with complaints of constipation should have a thorough medical history and physical examination to detect associated metabolic, endocrine and neurogenic conditions, and medications. A diagnostic evaluation should include a structural examination of the colon. Patients should be educated about good defecatory and eating habits (such as high fiber diets) and lifestyle changes (adequate dietary fiber and fluid intake, regular exercise) which may produce more regular bowel habits.

GlycoLax™ should be administered after being dissolved in approximately 8 ounces of water, juice, soda, coffee, or tea.

Information for Patients: GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. It should always be taken by mouth after being dissolved in 8 ounces of water, juice, soda, coffee, or tea. Should unusual cramps, bloating, or diarrhea occur, consult your physician.

Two to 4 days may be required to produce a bowel movement. This product should be used for 2 weeks or less or as directed by a physician. Prolonged, frequent or excessive use of GlycoLax™ may result in electrolyte imbalance and dependence on laxatives.

Laboratory Tests: No clinically significant effects on laboratory tests have been demonstrated.

Drug Interactions: No specific drug interactions have been demonstrated.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Long-term carcinogenicity studies, genetic toxicity studies and reproductive toxicity studies in animals have not been performed with GlycoLax™.

Pregnancy: Category C. Animal reproductive studies have not been performed with GlycoLax™. It is also not known whether GlycoLax™ can cause fetal harm when administered to a pregnant woman, or can affect reproductive capacity. GlycoLax™ should only be administered to a pregnant woman if clearly needed.

Pediatric Use: Safety and effectiveness in pediatric patients has not been established.

Geriatric Use: There is no evidence for special considerations when GlycoLax™ is administered to elderly patients.

In geriatric nursing home patients, a higher incidence of diarrhea occurred at the recommended 17 gram dose. If diarrhea occurs, GlycoLax™ should be discontinued.

ADVERSE REACTIONS
Nausea, abdominal bloating, cramping and flatulence may occur. High doses may produce diarrhea and excessive stool frequency, particularly in elderly nursing home patients.

Patients taking other medications containing polyethylene glycol have occasionally developed urticaria suggestive of an allergic reaction.

OVERDOSAGE
There have been no reports of accidental overdosage. In the event of overdosage, diarrhea would be the expected major event. If an overdose of drug occurred without concomitant ingestion of fluid, dehydration due to diarrhea may result. Medication should be terminated and free water administered. The oral LD_{50} is >50 gm/kg in mice, rats and rabbits.

DOSAGE AND ADMINISTRATION
The usual dose is 17 grams (about 1 heaping tablespoon) of powder per day (or as directed by physician) in 8 ounces of water, juice, soda, coffee, or tea. Each bottle of GlycoLax™ is supplied with a dosing cup marked to contain 17 grams of laxative powder when filled to the indicated line.

Two to 4 days (48 to 96 hours) may be required to produce a bowel movement.

HOW SUPPLIED
In powdered form, for oral administration after dissolution in water, juice, soda, coffee, or tea. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is available in three package sizes: a 16 oz. container of 255 grams of laxative powder (NDC 62175-442-15), a 24 oz. container of 527 grams of laxative powder (NDC 62175-442-31), and a carton of 14 individual packets containing a single 17 gram dose (NDC 62175-442-14).

The dosing cup supplied with each bottle is marked with a measuring line and may be used to measure a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoon).

Each individual packet contains a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoon).

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, Inc.
Mequon, WI 53092, USA

PCL4554
Rev. 10/02

NDC 62175-442-15

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350 Powder for Oral Solution)

Control No. Exp. Date

This bottle contains
255 grams of polyethylene glycol 3350 powder

Rx Only

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoonful) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

PCL4554A Rev. 03/04

Schwarz Pharma PCL4554A Base 100% 8.0625" x 3" BLACK PMS 2597 PMS 877

PATIENT INFORMATION

GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a prescription only laxative which has been prescribed by your physician to treat constipation. This product should only be used by the person for whom it was prescribed.

How to take
The dose is 17 grams each day or as directed by physician. It should always be taken by mouth. Measure the dose using the dosing cup (or use one heaping tablespoonful of powder), stir and dissolve in a glass (8 oz) of water, juice, soda, coffee, or tea. Taking more than the prescribed dose may cause loss of fluid due to severe diarrhea.

How will it work
GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. Your first bowel movement will usually happen in **two to four days**, although results may vary for individual patients.

How long should I take it
GlycoLax™ achieves its best results when used between one and two weeks. You may discontinue taking the drug after you have had several satisfactory bowel movements. Should unusual cramps, bloating, or diarrhea occur, consult your physician. GlycoLax™ is intended for up to a two week course of therapy. You should not use for a longer time unless directed by your physician.

Next Steps
After successfully completing the GlycoLax™ therapy (usually between one and two weeks), please discuss with your physician lifestyle changes which may produce more regular bowel habits (adequate dietary and fluid intake, regular exercise).

Who Should NOT take GlycoLax™
GlycoLax™ should not be used by children. It should not be used by pregnant women unless prescribed by a physician.

Side Effects/Drug Reactions
Occasionally, GlycoLax™ may cause nausea, stomach fullness, cramping, diarrhea and/or gas. Do not take if you have symptoms such as nausea, vomiting, abdominal pain or distention, which may be due to bowel obstruction. On rare occasions, hives and skin rashes have been reported which are suggestive of an allergic reaction. If you get an allergic reaction, you should discontinue the medication and call your physician.

If you are allergic to polyethylene glycol, do not use this drug product.

Kremers Urban, LLC
Mequon, WI 53092, USA

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoonful) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

PCL4554A Rev. 03/04

GlycoLax™
(Polyethylene Glycol 3350 Powder for Oral Solution)

Rx Only

DESCRIPTION
A white powder for reconstitution. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is not less than 90.0 percent and not greater than 110.0 percent of the nominal value. The chemical formula is $HO(C_2H_4O)_nH$ in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. GlycoLax™ is an osmotic agent for the treatment of constipation.

CLINICAL PHARMACOLOGY
Pharmacology: GlycoLax™ is an osmotic agent which causes water to be retained with the stool. Essentially, complete recovery of GlycoLax™ was shown in normal subjects without constipation. Attempts at recovery of GlycoLax™ in constipated patients resulted in incomplete and highly variable recovery. *In vitro* study showed indirectly that GlycoLax™ was not fermented into hydrogen or methane by the colonic microflora in human feces. GlycoLax™ appears to have no effect on the active absorption or secretion of glucose or electrolytes. There is no evidence of tachyphylaxis.

CLINICAL TRIALS
In one study, patients with less than 3 bowel movements per week were randomized to GlycoLax™, 17 grams, or placebo for 14 days. An increase in bowel movement frequency was observed for both treatment groups during the first week of treatment. GlycoLax™ was statistically superior to placebo during the second week of treatment.

In another study, patients with 3 bowel movements or less per week and/or less than 300 grams of stool per week were randomized to 2 dose levels of GlycoLax™ or placebo for 10 days each. Success was defined by an increase in both bowel movement frequency and daily stool weight. For both parameters, superiority of the 17 gram dose of GlycoLax™ over placebo was demonstrated.

INDICATIONS AND USAGE
For the treatment of occasional constipation. This product should be used for 2 weeks or less or as directed by a physician.

CONTRAINDICATIONS
GlycoLax™ is contraindicated in patients with known or suspected bowel obstruction and patients known to be allergic to polyethylene glycol.

WARNINGS
Patients with symptoms suggestive of bowel obstruction (nausea, vomiting, abdominal pain or distention) should be evaluated to rule out this condition before initiating GlycoLax™ therapy.

PRECAUTIONS
General: Patients presenting with complaints of constipation should have a thorough medical history and physical examination to detect associated metabolic, endocrine and neurogenic conditions, and medications. A diagnostic evaluation should include a structural examination of the colon. Patients should be educated about good defecatory and eating habits (such as high fiber diets) and lifestyle changes (adequate dietary fiber and fluid intake, regular exercise) which may produce more regular bowel habits.

GlycoLax™ should be administered after being dissolved in approximately 8 ounces of water, juice, soda, coffee, or tea.

Information for Patients: GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. It should always be taken by mouth after being dissolved in 8 ounces of water, juice, soda, coffee, or tea. Should unusual cramps, bloating, or diarrhea occur, consult your physician.

Two to 4 days may be required to produce a bowel movement. This product should be used for 2 weeks or less or as directed by a physician. Prolonged, frequent or excessive use of GlycoLax™ may result in electrolyte imbalance and dependence on laxatives.

Laboratory Tests: No clinically significant effects on laboratory tests have been demonstrated.

Drug Interactions: No specific drug interactions have been demonstrated.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Long-term carcinogenicity studies, genetic toxicity studies and reproductive toxicity studies in animals have not been performed with GlycoLax™.

Pregnancy: Category C. Animal reproductive studies have not been performed with GlycoLax™. It is also not known whether GlycoLax™ can cause fetal harm when administered to a pregnant woman, or can affect reproductive capacity. GlycoLax™ should only be administered to a pregnant woman if clearly needed.

Pediatric Use: Safety and effectiveness in pediatric patients has not been established.

Geriatric Use: There is no evidence for special considerations when GlycoLax™ is administered to elderly patients.

In geriatric nursing home patients, a higher incidence of diarrhea occurred at the recommended 17 gram dose. If diarrhea occurs, GlycoLax™ should be discontinued.

ADVERSE REACTIONS
Nausea, abdominal bloating, cramping and flatulence may occur. High doses may produce diarrhea and excessive stool frequency, particularly in elderly nursing home patients.

Patients taking other medications containing polyethylene glycol have occasionally developed urticaria suggestive of an allergic reaction.

OVERDOSAGE
There have been no reports of accidental overdosage. In the event of overdosage, diarrhea would be the expected major event. If an overdose of drug occurred without concomitant ingestion of fluid, dehydration due to diarrhea may result. Medication should be terminated and free water administered. The oral LD_{50} is >50 gm/kg in mice, rats and rabbits.

DOSAGE AND ADMINISTRATION
The usual dose is 17 grams (about 1 heaping tablespoonful) of powder per day (or as directed by physician) in 8 ounces of water, juice, soda, coffee, or tea. Each bottle of GlycoLax™ is supplied with a dosing cup marked to contain 17 grams of laxative powder when filled to the indicated line.

Two to 4 days (48 to 96 hours) may be required to produce a bowel movement.

HOW SUPPLIED
In powdered form, for oral administration after dissolution in water, juice, soda, coffee, or tea. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is available in three package sizes: a 16 oz. container of 255 grams of laxative powder (NDC 62175-442-15), a 24 oz. container of 527 grams of laxative powder (NDC 62175-442-31), and a carton of 14 individual packets containing a single 17 gram dose (NDC 62175-442-14).

The dosing cup supplied with each bottle is marked with a measuring line and may be used to measure a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoonful).

Each individual packet contains a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoonful).

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

PCL4554A
Rev. 03/04

NDC 62175-442-31

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350 Powder for Oral Solution)

This bottle contains
527 grams of polyethylene glycol 3350 powder

Rx Only

Kremers Urban, Inc.

PCL4555

Control No.
Exp. Date

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoon) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20°- 25°C (68°- 77°F); excursions permitted between 15°- 30°C (59°- 86°F) [See USP Controlled Room Temperature].

Kremers Urban, Inc.
Mequon, WI 53092, USA

PCL4555 Rev. 10/02

Schwarz Pharma PCL4555 base 100% 8.0625" x 4" BLACK PMS 2597 PMS 877

PATIENT INFORMATION

GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a prescription only laxative which has been prescribed by your physician to treat constipation. This product should only be used by the person for whom it was prescribed.

How to take
The dose is 17 grams each day or as directed by physician. It should always be taken by mouth. Measure the dose using the dosing cup (or use one heaping tablespoon of powder), stir and dissolve in a glass (8 oz) of water, juice, soda, coffee, or tea. Taking more than the prescribed dose may cause loss of fluid due to severe diarrhea.

How will it work
GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. Your first bowel movement will usually happen in **two to four days**, although results may vary for individual patients.

How long should I take it
GlycoLax™ achieves its best results when used between one and two weeks. You may discontinue taking the drug after you have had several satisfactory bowel movements. Should unusual cramps, bloating, or diarrhea occur, consult your physician. GlycoLax™ is intended for up to a two week course of therapy. You should not use for a longer time unless directed by your physician.

Next Steps
After successfully completing the GlycoLax™ therapy (usually between one and two weeks), please discuss with your physician lifestyle changes which may produce more regular bowel habits (adequate dietary and fluid intake, regular exercise).

Who Should NOT take GlycoLax™
GlycoLax™ should not be used by children. It should not be used by pregnant women unless prescribed by a physician.

Side Effects/Drug Reactions
Occasionally, GlycoLax™ may cause nausea, stomach fullness, cramping, diarrhea and/or gas. Do not take if you have symptoms such as nausea, vomiting, abdominal pain or distention, which may be due to bowel obstruction. On rare occasions, hives and skin rashes have been reported which are suggestive of an allergic reaction. If you get an allergic reaction, you should discontinue the medication and call your physician.

If you are allergic to polyethylene glycol, do not use this drug.

Kremers Urban, Inc.
Mequon, WI 53092, USA

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoon) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, Inc.
Mequon, WI 53092, USA

PCL4555 Rev. 10/02

GlycoLax™
(Polyethylene Glycol 3350 Powder for Oral Solution)

Rx Only

DESCRIPTION
A white powder for reconstitution. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is not less than 90.0 percent and not greater than 110.0 percent of the nominal value. The chemical formula is $HO(C_2H_4O)_nH$ in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. GlycoLax™ is an osmotic agent for the treatment of constipation.

CLINICAL PHARMACOLOGY
Pharmacology: GlycoLax™ is an osmotic agent which causes water to be retained with the stool. Essentially, complete recovery of GlycoLax™ was shown in normal subjects without constipation. Attempts at recovery of GlycoLax™ in constipated patients resulted in incomplete and highly variable recovery. *In vitro* study showed indirectly that GlycoLax™ was not fermented into hydrogen or methane by the colonic microflora in human feces. GlycoLax™ appears to have no effect on the active absorption or secretion of glucose or electrolytes. There is no evidence of tachyphylaxis.

CLINICAL TRIALS
In one study, patients with less than 3 bowel movements per week were randomized to GlycoLax™, 17 grams, or placebo for 14 days. An increase in bowel movement frequency was observed for both treatment groups during the first week of treatment. GlycoLax™ was statistically superior to placebo during the second week of treatment.

In another study, patients with 3 bowel movements or less per week and/or less than 300 grams of stool per week were randomized to 2 dose levels of GlycoLax™ or placebo for 10 days each. Success was defined by an increase in both bowel movement frequency and daily stool weight. For both parameters, superiority of the 17 gram dose of GlycoLax™ over placebo was demonstrated.

INDICATIONS AND USAGE
For the treatment of occasional constipation. This product should be used for 2 weeks or less or as directed by a physician.

CONTRAINDICATIONS
GlycoLax™ is contraindicated in patients with known or suspected bowel obstruction and patients known to be allergic to polyethylene glycol.

WARNINGS
Patients with symptoms suggestive of bowel obstruction (nausea, vomiting, abdominal pain or distention) should be evaluated to rule out this condition before initiating GlycoLax™ therapy.

PRECAUTIONS
General: Patients presenting with complaints of constipation should have a thorough medical history and physical examination to detect associated metabolic, endocrine and neurogenic conditions, and medications. A diagnostic evaluation should include a structural examination of the colon. Patients should be educated about good defecatory and eating habits (such as high fiber diets) and lifestyle changes (adequate dietary fiber and fluid intake, regular exercise) which may produce more regular bowel habits.

GlycoLax™ should be administered after being dissolved in approximately 8 ounces of water, juice, soda, coffee, or tea.

Information for Patients: GlycoLax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. It should always be taken by mouth after being dissolved in 8 ounces of water, juice, soda, coffee, or tea. Should unusual cramps, bloating, or diarrhea occur, consult your physician.

Two to 4 days may be required to produce a bowel movement. This product should be used for 2 weeks or less or as directed by a physician. Prolonged, frequent or excessive use of GlycoLax™ may result in electrolyte imbalance and dependence on laxatives.

Laboratory Tests: No clinically significant effects on laboratory tests have been demonstrated.

Drug Interactions: No specific drug interactions have been demonstrated.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Long-term carcinogenicity studies, genetic toxicity studies and reproductive toxicity studies in animals have not been performed with GlycoLax™.

Pregnancy: Category C. Animal reproductive studies have not been performed with GlycoLax™. It is also not known whether GlycoLax™ can cause fetal harm when administered to a pregnant woman, or can affect reproductive capacity. GlycoLax™ should only be administered to a pregnant woman if clearly needed.

Pediatric Use: Safety and effectiveness in pediatric patients has not been established.

Geriatric Use: There is no evidence for special considerations when GlycoLax™ is administered to elderly patients.

In geriatric nursing home patients, a higher incidence of diarrhea occurred at the recommended 17 gram dose. If diarrhea occurs, GlycoLax™ should be discontinued.

ADVERSE REACTIONS
Nausea, abdominal bloating, cramping and flatulence may occur. High doses may produce diarrhea and excessive stool frequency, particularly in elderly nursing home patients.

Patients taking other medications containing polyethylene glycol have occasionally developed urticaria suggestive of an allergic reaction.

OVERDOSAGE
There have been no reports of accidental overdosage. In the event of overdosage, diarrhea would be the expected major event. If an overdose of drug occurred without concomitant ingestion of fluid, dehydration due to diarrhea may result. Medication should be terminated and free water administered. The oral LD_{50} is >50 gm/kg in mice, rats and rabbits.

DOSAGE AND ADMINISTRATION
The usual dose is 17 grams (about 1 heaping tablespoon) of powder per day (or as directed by physician) in 8 ounces of water, juice, soda, coffee, or tea. Each bottle of GlycoLax™ is supplied with a dosing cup marked to contain 17 grams of laxative powder when filled to the indicated line.

Two to 4 days (48 to 96 hours) may be required to produce a bowel movement.

HOW SUPPLIED
In powdered form, for oral administration after dissolution in water, juice, soda, coffee, or tea. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is available in three package sizes: a 16 oz. container of 255 grams of laxative powder (NDC 62175-442-15), a 24 oz. container of 527 grams of laxative powder (NDC 62175-442-31), and a carton of 14 individual packets containing a single 17 gram dose (NDC 62175-442-14).

The dosing cup supplied with each bottle is marked with a measuring line and may be used to measure a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoon).

Each individual packet contains a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoon).

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, Inc.
Mequon, WI 53092, USA

PCL4555
Rev. 10/02

NDC 62175-442-31

PRESCRIPTION LAXATIVE

GlycoLax™

(Polyethylene Glycol 3350 Powder for Oral Solution)

Control No. Exp. Date

This bottle contains
527 grams of polyethylene glycol 3350 powder

Rx Only

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoonful) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

PCL4555A Rev. 03/04

Schwarz Pharma PCL4555A Base 100% 8.0625" x 4" BLACK PMS 2597 PMS 877

PharmaLabel PCL4555A 100% 4" x 16.8125" (folded size 3.4375" x 4") BLACK PMS 2597 PMS 877

PATIENT INFORMATION

Glycolax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a prescription only laxative which has been prescribed by your physician to treat constipation. This product should only be used by the person for whom it was prescribed.

How to take

The dose is 17 grams each day or as directed by physician. It should always be taken by mouth. Measure the dose using the dosing cup (or use one heaping tablespoonful of powder), stir and dissolve in a glass (8 oz) of water, juice, soda, coffee, or tea. Taking more than the prescribed dose may cause loss of fluid due to severe diarrhea.

How will it work

Glycolax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. Your first bowel movement will usually happen in **two to four days**, although results may vary for individual patients.

How long should I take it

Glycolax™ achieves its best results when used between one and two weeks. You may discontinue taking the drug after you have had several satisfactory bowel movements. Should unusual cramps, bloating, or diarrhea occur, consult your physician. Glycolax™ is intended for up to a two week course of therapy. You should not use for a longer time unless directed by your physician.

Next Steps

After successfully completing the Glycolax™ therapy (usually between one and two weeks), please discuss with your physician lifestyle changes which may produce more regular bowel habits (adequate dietary and fluid intake, regular exercise).

Who Should NOT take Glycolax™

Glycolax™ should not be used by children. It should not be used by pregnant women unless prescribed by a physician.

Side Effects/Drug Reactions

Occasionally, Glycolax™ may cause nausea, stomach fullness, cramping, diarrhea and/or gas. Do not take if you have symptoms such as nausea, vomiting, abdominal pain or distention, which may be due to bowel obstruction. On rare occasions, hives and skin rashes have been reported which are suggestive of an allergic reaction. If you get an allergic reaction, you should discontinue the medication and call your physician.

If you are allergic to polyethylene glycol, do not use this drug product.

Kremers Urban, LLC
Mequon, WI 53092, USA

Glycolax™
(Polyethylene Glycol 3350 Powder for Oral Solution)

Rx Only

DESCRIPTION

A white powder for reconstitution. Glycolax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is not less than 90.0 percent and not greater than 110.0 percent of the nominal value. The chemical formula is $HO(C_2H_4O)_nH$ in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. Glycolax™ is an osmotic agent for the treatment of constipation.

CLINICAL PHARMACOLOGY

Pharmacology: Glycolax™ is an osmotic agent which causes water to be retained with the stool. Essentially, complete recovery of Glycolax™ was shown in normal subjects without constipation. Attempts at recovery of Glycolax™ in constipated patients resulted in incomplete and highly variable recovery. *In vitro* study showed indirectly that Glycolax™ was not fermented into hydrogen or methane by the colonic microflora in human feces. Glycolax™ appears to have no effect on the active absorption or secretion of glucose or electrolytes. There is no evidence of tachyphylaxis.

CLINICAL TRIALS

In one study, patients with less than 3 bowel movements per week were randomized to Glycolax™, 17 grams, or placebo for 14 days. An increase in bowel movement frequency was observed for both treatment groups during the first week of treatment. Glycolax™ was statistically superior to placebo during the second week of treatment.

In another study, patients with 3 bowel movements or less per week and/or less than 300 grams of stool per week were randomized to 2 dose levels of Glycolax™ or placebo for 10 days each. Success was defined by an increase in both bowel movement frequency and daily stool weight. For both parameters, superiority of the 17 gram dose of Glycolax™ over placebo was demonstrated.

INDICATIONS AND USAGE

For the treatment of occasional constipation. This product should be used for 2 weeks or less or as directed by a physician.

CONTRAINDICATIONS

Glycolax™ is contraindicated in patients with known or suspected bowel obstruction and patients known to be allergic to polyethylene glycol.

WARNINGS

Patients with symptoms suggestive of bowel obstruction (nausea, vomiting, abdominal pain or distention) should be evaluated to rule out this condition before initiating Glycolax™ therapy.

PRECAUTIONS

General: Patients presenting with complaints of constipation should have a thorough medical history and physical examination to detect associated metabolic, endocrine and neurogenic conditions, and medications. A diagnostic evaluation should include a structural examination of the colon. Patients should be educated about good defecatory and eating habits (such as high fiber diets) and lifestyle changes (adequate dietary fiber and fluid intake, regular exercise) which may produce more regular bowel habits.

Glycolax™ should be administered after being dissolved in approximately 8 ounces of water, juice, soda, coffee, or tea.

Information for Patients: Glycolax™ softens the stool and increases the frequency of bowel movements by retaining water in the stool. It should always be taken by mouth after being dissolved in 8 ounces of water, juice, soda, coffee, or tea. Should unusual cramps, bloating, or diarrhea occur, consult your physician.

Two to 4 days may be required to produce a bowel movement. This product should be used for 2 weeks or less or as directed by a physician. Prolonged, frequent or excessive use of Glycolax™ may result in electrolyte imbalance and dependence on laxatives.

Laboratory Tests: No clinically significant effects on laboratory tests have been demonstrated.

Drug Interactions: No specific drug interactions have been demonstrated.

Carcinogenesis, Mutagenesis, Impairment of Fertility: Long-term carcinogenicity studies, genetic toxicity studies and reproductive toxicity studies in animals have not been performed with GlycoLax™.

Pregnancy: Category C. Animal reproductive studies have not been performed with GlycoLax™. It is also not known whether GlycoLax™ can cause fetal harm when administered to a pregnant woman, or can affect reproductive capacity. GlycoLax™ should only be administered to a pregnant woman if clearly needed.

Pediatric Use: Safety and effectiveness in pediatric patients has not been established.

Geriatric Use: There is no evidence for special considerations when GlycoLax™ is administered to elderly patients.

In geriatric nursing home patients, a higher incidence of diarrhea occurred at the recommended 17 gram dose. If diarrhea occurs, GlycoLax™ should be discontinued.

ADVERSE REACTIONS

Nausea, abdominal bloating, cramping and flatulence may occur. High doses may produce diarrhea and excessive stool frequency, particularly in elderly nursing home patients.

Patients taking other medications containing polyethylene glycol have occasionally developed urticaria suggestive of an allergic reaction.

OVERDOSAGE

There have been no reports of accidental overdosage. In the event of overdosage, diarrhea would be the expected major event. If an overdose of drug occurred without concomitant ingestion of fluid, dehydration due to diarrhea may result. Medication should be terminated and free water administered. The oral LD_{50} is >50 gm/kg in mice, rats and rabbits.

DOSAGE AND ADMINISTRATION

The usual dose is 17 grams (about 1 heaping tablespoonful) of powder per day (or as directed by physician) in 8 ounces of water, juice, soda, coffee, or tea. Each bottle of GlycoLax™ is supplied with a dosing cup marked to contain 17 grams of laxative powder when filled to the indicated line.

Two to 4 days (48 to 96 hours) may be required to produce a bowel movement.

HOW SUPPLIED

In powdered form, for oral administration after dissolution in water, juice, soda, coffee, or tea. GlycoLax™ (Polyethylene Glycol 3350 Powder for Oral Solution) is available in three package sizes: a 16 oz. container of 255 grams of laxative powder (NDC 62175-442-15), a 24 oz. container of 527 grams of laxative powder (NDC 62175-442-31), and a carton of 14 individual packets containing a single 17 gram dose (NDC 62175-442-14).

The dosing cup supplied with each bottle is marked with a measuring line and may be used to measure a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoonful).

Each individual packet contains a single GlycoLax™ dose of 17 grams (about 1 heaping tablespoonful).

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

PCL4555A
Rev. 03/04

DIRECTIONS

1. NOTE: This product is supplied with a dosing cup marked to contain 17 grams of powder when filled to the indicated line.
2. Daily dose is 17 grams per day or as directed by physician.
3. Pour 17 grams (about 1 heaping tablespoonful) of powder into the dosing cup.
4. Stir the powder in a cup (8 oz.) of water, juice, soda, coffee, or tea until completely dissolved.
5. Drink the solution.
6. Treatment for **2 to 4 days** may be required to produce a bowel movement.

Keep this and other drugs out of reach of children.

Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30°C (59° - 86°F) [See USP Controlled Room Temperature].

Kremers Urban, LLC
Mequon, WI 53092, USA

PCL4555A Rev. 03/04

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

LABELING REVIEWS

REVIEW OF PROFESSIONAL LABELING
DIVISION OF LABELING AND PROGRAM SUPPORT
LABELING REVIEW BRANCH

ANDA Number: **76-652** Date of Submission: **January 30, 2003**

Applicant's Name: **Schwarz Pharma, Inc.**

Established Name: **Polyethylene Glycol 3350 Powder for Oral Solution, 17 g/scoopful**

Labeling Deficiencies:

1. GENERAL COMMENTS

   a. Your proposed proprietary name, "GlycoLax", has been submitted to the Division of Medication Errors and Technical Support (DMETS) for their review and comments. We will inform you of their findings when they become available. We will not request labels and labeling in final print until resolution of the acceptability of the proposed proprietary name.

   b. The established name for this drug product is "Polyethylene Glycol 3350 Powder for Oral Solution". Revise your labels and labeling accordingly.

   c. Revise your storage temperature recommendation throughout your labels and labeling as follows:

      Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30° C (59° - 86° F) [See USP Controlled Room Temperature].

2. CONTAINER 255 gram and 527 gram bottles

   a. Please describe how the professional prescribing information and the patient information will accompany the drug product.

   b. See GENERAL COMMENTS above.

   c. Delete ——.

   d. Please note that when final printed labeling is submitted it must be true size, color and text as it will appear in the marketplace.

3. PACKET 17 gram

   See GENERAL COMMENTS above.

4. CARTON 14s (7 x 2s)

   a. You have submitted carton labeling which does not include the text that will appear on it. Please submit. We refer you to the second sentence of comment (2) (a) under CONTAINER above.

   b. See GENERAL COMMENTS above.

c. Delete ——.

d. Include the company address in association with the company name somewhere on the carton labeling.

5. PROFESSIONAL INSERT

a. See GENERAL COMMENTS above.

b. DESCRIPTION

First line

i. Delete ——.

ii. "... powder for oral solution) ..."

c. CLINICAL PHARMACOLOGY

i. Fourth sentence - "*In vitro*" [*italics*]

ii. "CLINICAL TRIALS" is a section heading and should be of the same prominence as the other section headings.

d. HOW SUPPLIED

Include the established name in association with the proprietary name in this section.

6. PATIENT INFORMATION

a. First paragraph, first line - "... 3350 powder for oral solution) is ..."

b. Include the company name and address.

Please revise your labels and labeling, as instructed above, and submit 4 draft copies of each labeling piece. We will not request labels and labeling in final print until resolution of the proprietary name issue. If draft labeling is provided, please be advised that you will be required to submit 12 final printed copies of all labels and labeling at least 60 days prior to full approval of this application. In addition, you should be aware that color and other factors (print size, prominence, etc.) in final printed labeling could be found unacceptable and that further changes might be requested prior to approval.

Prior to approval, it may be necessary to revise your labeling subsequent to approved changes for the reference listed drug. In order to keep ANDA labeling current, we suggest that you subscribe to the daily or weekly updates of new documents posted on the CDER web site at the following address -

http://www.fda.gov/cder/cdernew/listserv.html

To facilitate review of your next submission, please provide a side-by-side comparison of your proposed labeling with your last submission with all differences annotated and explained.

Wm. Peter Rickman
Director
Division of Labeling and Program Support
Office of Generic Drugs
Center for Drug Evaluation and Research

BASIS OF APPROVAL:

APPROVAL SUMMARY (List the package size, strength(s), and date of submission for approval):
Do you have 12 Final Printed Labels and Labeling? Yes No If no, list why:
Container Labels: 255 grams and 527 grams
Packet Labels: 17 grams
Carton labeling: 14s (7 x 2s - 17 grams each)
Professional Package Insert Labeling:
Revisions needed post-approval:

BASIS OF APPROVAL:
Was this approval based upon a petition? NO
What is the RLD on the 356(h) form: MiraLax
NDA Number: 20-698
NDA Drug Name: Polyethylen Glycol 3350 Powder for Oral Solution
NDA Firm: Braintree Laboratories, Inc.
Date of Approval of NDA Insert and supplement #: 6-20-01 (S-003)
Has this been verified by the MIS system for the NDA? YES
Was this approval based upon an OGD labeling guidance? NO
Basis of Approval for the Container Labels: side-by-sides
Basis of Approval for the Carton Labeling: side-by-sides
Other Comments

REVIEW OF PROFESSIONAL LABELING CHECK LIST

Established Name	Yes	No	N.A.
Different name than on acceptance to file letter?	X		
Is this product a USP item? If so, USP supplement in which verification was assured.		X	
Is this name different than that used in the Orange Book?	X		
If not USP, has the product name been proposed in the PF?		X	
Error Prevention Analysis			
Has the firm proposed a proprietary name? YES.	X		
Do you find the name objectionable? List reasons in FTR, if so. Consider: Misleading? Sounds or looks like another name? USAN stem present? Prefix or Suffix present?		X	
Has the name been forwarded to the Labeling and Nomenclature Committee? If so, what were the recommendations? If the name was unacceptable, has the firm been notified?	X		
Packaging			
Is this a new packaging configuration, never been approved by an ANDA or NDA? If yes, describe in FTR.	X		
Is this package size mismatched with the recommended dosage? If yes, the Poison Prevention Act may require a CRC.		X	
Does the package proposed have any safety and/or regulatory concerns?		X	

Conflict between the DOSAGE AND ADMINISTRATION and INDICATIONS sections and the packaging configuration?		X	
Is the strength and/or concentration of the product unsupported by the insert labeling?		X	
Is the color of the container (i.e. the color of the cap of a mydriatic ophthalmic) or cap incorrect?			X
Individual cartons required? Issues for FTR: Innovator individually cartoned? Light sensitive product which might require cartoning? Must the package insert accompany the product?		X	
Are there any other safety concerns?		X	
Labeling			
Is the name of the drug unclear in print or lacking in prominence? (Name should be the most prominent information on the label).		X	
Has applicant failed to clearly differentiate multiple product strengths?			X
Is the corporate logo larger than 1/3 container label? (No regulation - see ASHP guidelines)		X	
Does RLD make special differentiation for this label? (i.e., Pediatric strength vs Adult; Oral Solution vs Concentrate, Warning Statements that might be in red for the NDA)		X	
Is the Manufactured by/Distributor statement incorrect or falsely inconsistent between labels and labeling? Is "Jointly Manufactured by...", statement needed?	X		
Failure to describe solid oral dosage form identifying markings in HOW SUPPLIED?			X
Has the firm failed to adequately support compatibility or stability claims which appear in the insert labeling? Note: Chemist should confirm the data has been adequately supported.		X	
Inactive Ingredients: (FTR: List page # in application where inactives are listed)			
Does the product contain alcohol? If so, has the accuracy of the statement been confirmed?		X	
Do any of the inactives differ in concentration for this route of administration?			X
Any adverse effects anticipated from inactives (i.e., benzyl alcohol in neonates)?			X
Is there a discrepancy in inactives between DESCRIPTION and the composition statement?			X
Has the term "other ingredients" been used to protect a trade secret? If so, is claim supported?			X
USP Issues: (FTR: List USP/NDA/ANDA dispensing/storage recommendations)			
Do container recommendations fail to meet or exceed USP/NDA recommendations? If so, are the recommendations supported and is the difference acceptable?		X	
Because of proposed packaging configuration or for any other reason, does this applicant meet fail to meet all of the unprotected conditions of use of referenced by the RLD?		X	
Does USP have labeling recommendations? If any, does ANDA meet them?			X
Is the product light sensitive? If so, is NDA and/or ANDA in a light resistant container?		X	
Failure of DESCRIPTION to meet USP Description and Solubility information? If so, USP information should be used. However, only include solvents appearing in innovator labeling.		X	
Bioequivalence Issues: (Compare bioequivalency values: insert to study. List Cmax, Tmax, T 1/2 and date study acceptable)			
Insert labeling references a food effect or a no-effect? If so, was a food study done?		X	
Has CLINICAL PHARMACOLOGY been modified? If so, briefly detail where/why.		X	
Patent/Exclusivity Issues?: FTR: Check the Orange Book edition or cumulative supplement for verification of the latest Patent or Exclusivity. List expiration date for all patents, exclusivities, etc. or if none, please state.			

NOTES/QUESTIONS TO THE CHEMIST:

I have asked the firm to remove '

FOR THE RECORD:

1. Review based on the labeling of MiraLax [NDA 20-698/S-003, revised 6-01; approved 6-20-01.

2. Patent/ Exclusivities

Patent Data – 20-698

No	Expiration	Use Code	Use	File
5,710,183	7-14-15		Laxative/antidiarrheal composition comprising PEG & fiber bulking agent	IV
6,048,901	4-20-19	U-343	Method of reducing of intestinal gas, cramping & anorectal irritation.	IV

Exclusivity Data - 20-698

Code/sup		Use	Description		Labeling Impact

	Expiration	Code			
None			There is no unexpired exclusivity for this product		

3. Storage Conditions:
NDA - CONTAINER -- Store at 25°C (77°F); [See USP Controlled Room Temperature]
INSERT -- Store at 25°C (77°F); excursions permitted to 15-30°C (59-86°F). See USP "Controlled Room Temperature."
ANDA - Store at controlled room temperature 20°-25°C (68°-77°F); excursions permitted between 15°-30°C (59°-86°F). I have asked the firm to revise to: Store at 20°-25°C (68°-77°F); excursions permitted between 15°-30°C (59°-86°F). [See USP Controlled Room Temperature].
USP - not USP

4. Product Line:
The innovator markets their product in bottles containing 255 grams and 527 grams of powder and in cartons of 12 x 17 gram packets.
The applicant proposes to market their product in bottles containing 255 grams and 527 grams of powder and in cartons of 14 x 17 gram packets.

5. THIS IS A FIRST GENERIC.

6. Schwarz Pharma is the manufacturer [see p 138 vol B 1.1 section IX].

7. There are no inactive ingredients [p 113 vol B 1.1 section VII].

Date of Review: 7-25-03 Date of Submission: 1-30-03

Primary Reviewer: Adolph Vezza Date: 8/8/03

Team Leader: Lillie Golson Date: 8/8/03

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cc: ANDA: 76-762
DUP/DIVISION FILE
HFD-613/AVezza/LGolson (no cc)
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Review

TENTATIVE APPROVAL SUMMARY
REVIEW OF PROFESSIONAL LABELING
DIVISION OF LABELING AND PROGRAM SUPPORT
LABELING REVIEW BRANCH

ANDA Number: **76-652** Date of Submission: **October 17, 2003**

Applicant's Name: **Schwarz Pharma, Inc.**

Proprietary Name: **GlycoLax**

Established Name: **Polyethylene Glycol 3350 Powder for Oral Solution, 17 g/scoopful**

BASIS OF APPROVAL:

APPROVAL SUMMARY (List the package size, strength(s), and date of submission for approval):
Do you have 12 Final Printed Labels and Labeling? No - IN DRAFT
Container Labels: 255 grams and 527 grams
Packet Labels: 17 grams
Carton labeling: 14s (7 x 2s - 17 grams each)
Professional Package Insert Labeling/Patient Package Information:
Revisions needed post-approval: PI - HOW SUPPLIED - "tablespoonful" --- PPI - last sentence - "... drug product."

BASIS OF APPROVAL:
Was this approval based upon a petition? NO
What is the RLD on the 356(h) form: MiraLax
NDA Number: 20-698
NDA Drug Name: Polyethylene Glycol 3350 Powder for Oral Solution
NDA Firm: Braintree Laboratories, Inc.
Date of Approval of NDA Insert and supplement #: 6-20-01 (S-003)
Has this been verified by the MIS system for the NDA? YES
Was this approval based upon an OGD labeling guidance? NO
Basis of Approval for the Container Labels: side-by-sides
Basis of Approval for the Carton Labeling: side-by-sides
Other Comments

REVIEW OF PROFESSIONAL LABELING CHECK LIST

Established Name	Yes	No	N.A.
Different name than on acceptance to file letter? "17 g/scoopful" in acceptance letter	X		
Is this product a USP item? If so, USP supplement in which verification was assured. —		X	
Is this name different than that used in the Orange Book? Orange Book does not have "Powder" in the name	X		
If not USP, has the product name been proposed in the PF?		X	
Error Prevention Analysis			
Has the firm proposed a proprietary name? YES.	X		
Do you find the name objectionable? List reasons in FTR, if so. Consider: Misleading? Sounds or looks like another name? USAN stem present? Prefix or Suffix present?		X	
Has the name been forwarded to the Labeling and Nomenclature Committee? If so, what were the recommendations? If the name was unacceptable, has the firm been notified? ODS has found the name acceptable	X		
Packaging			
Is this a new packaging configuration, never been approved by an ANDA or NDA? If yes, describe in FTR.	X		
Is this package size mismatched with the recommended dosage? If yes, the Poison Prevention Act may require a CRC.		X	
Does the package proposed have any safety and/or regulatory concerns?		X	
Conflict between the DOSAGE AND ADMINISTRATION and INDICATIONS sections and the packaging configuration?		X	
Is the strength and/or concentration of the product unsupported by the insert labeling?		X	

Is the color of the container (i.e. the color of the cap of a mydriatic ophthalmic) or cap incorrect?			X
Individual cartons required? Issues for FTR: Innovator individually cartoned? Light sensitive product which might require cartoning? Must the package insert accompany the product?		X	
Are there any other safety concerns?		X	
Labeling			
Is the name of the drug unclear in print or lacking in prominence? (Name should be the most prominent information on the label).		X	
Has applicant failed to clearly differentiate multiple product strengths?			X
Is the corporate logo larger than 1/3 container label? (No regulation - see ASHP guidelines)		X	
Does RLD make special differentiation for this label? (i.e., Pediatric strength vs Adult; Oral Solution vs Concentrate, Warning Statements that might be in red for the NDA)		X	
Is the Manufactured by/Distributor statement incorrect or falsely inconsistent between labels and labeling? Is "Jointly Manufactured by...", statement needed?		X	
Failure to describe solid oral dosage form identifying markings in HOW SUPPLIED?			X
Has the firm failed to adequately support compatibility or stability claims which appear in the insert labeling? Note: Chemist should confirm the data has been adequately supported.		X	
Inactive Ingredients: (FTR: List page # in application where inactives are listed)			
Does the product contain alcohol? If so, has the accuracy of the statement been confirmed?		X	
Do any of the inactives differ in concentration for this route of administration?			X
Any adverse effects anticipated from inactives (i.e., benzyl alcohol in neonates)?			X
Is there a discrepancy in inactives between DESCRIPTION and the composition statement?			X
Has the term "other ingredients" been used to protect a trade secret? If so, is claim supported?			X
USP Issues: (FTR: List USP/NDA/ANDA dispensing/storage recommendations)			
Do container recommendations fail to meet or exceed USP/NDA recommendations? If so, are the recommendations supported and is the difference acceptable?		X	
Because of proposed packaging configuration or for any other reason, does this applicant meet fail to meet all of the unprotected conditions of use of referenced by the RLD?		X	
Does USP have labeling recommendations? If any, does ANDA meet them?			X
Is the product light sensitive? If so, is NDA and/or ANDA in a light resistant container?		X	
Failure of DESCRIPTION to meet USP Description and Solubility information? If so, USP information should be used. However, only include solvents appearing in innovator labeling.		X	
Bioequivalence Issues: (Compare bioequivalency values: insert to study. List Cmax, Tmax, T 1/2 and date study acceptable)			
Insert labeling references a food effect or a no-effect? If so, was a food study done?		X	
Has CLINICAL PHARMACOLOGY been modified? If so, briefly detail where/why.		X	
Patent/Exclusivity Issues?: FTR: Check the Orange Book edition or cumulative supplement for verification of the latest Patent or Exclusivity. List expiration date for all patents, exclusivities, etc. or if none, please state.			

NOTES/QUESTIONS TO THE CHEMIST:

I asked the firm to remove ——————————————— and they have done so.

FOR THE RECORD: (portions taken from previous review)

1. Review based on the labeling of MiraLax [NDA 20-698/S-003, revised 6-01; approved 6-20-01.

2. Patent/ Exclusivities

Patent Data – 20-698

No	Expiration	Use Code	Use	File	Labeling Impact
5,710,183	7-14-15	U-265	Use as a laxative	IV	None
6,048,901	4-20-19	U-343	Method of reducing of intestinal gas, cramping & anorectal irritation.	IV	None

Exclusivity Data - 20-698

Code/sup	Expiration	Use Code	Description		Labeling Impact
None			There is no unexpired exclusivity for this product		

3. Storage Conditions:
NDA - CONTAINER -- Store at 25°C (77°F); [See USP Controlled Room Temperature]
INSERT -- Store at 25°C (77°F); excursions permitted to 15-30°C (59-86°F). See USP "Controlled Room Temperature."
ANDA - Store at 20°-25°C (68°-77°F); excursions permitted between 15°-30°C (59°-86°F). [See USP Controlled Room Temperature].
USP - not USP

4. Product Line:
The innovator markets their product in bottles containing 255 grams and 527 grams of powder and in cartons of 12 x 17 gram packets.
The applicant proposes to market their product in bottles containing 255 grams and 527 grams of powder and in cartons of 14 x 17 gram packets.

5. THIS IS A FIRST GENERIC.

6. Schwarz Pharma is the manufacturer [see p 138 vol B 1.1 section IX].

7. There are no inactive ingredients [p 113 vol B 1.1 section VII].

8. The firm will be notified of the acceptability of their proprietary name "GlycoLax" and of the minor labeling deficiencies and of the need to submit 12 copies of FPL of all labeling pieces for full approval of this ANDA by telephone (A. Vezza).

Date of Review: 12-2-03 Date of Submission: 10-17-03

Primary Reviewer: Adolph Vezza Date: 12/8/03

Team Leader: Lillie Golson Date: 12/8/03

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cc: ANDA: 76-762
DUP/DIVISION FILE
HFD-613/AVezza/LGolson (no cc)
aev12/2/03|V:\FIRMSNZ\SCHWARZ\LTRS&REV\76652.TAPL
Review

this AP summary superseded by the AP Summary on 5-28-04 submission

APPROVAL SUMMARY
REVIEW OF PROFESSIONAL LABELING
DIVISION OF LABELING AND PROGRAM SUPPORT
LABELING REVIEW BRANCH

ANDA Number: **76-652** Date of Submission: **December 23, 2003**

Applicant's Name: **Schwarz Pharma, Inc.**

Proprietary Name: **GlycoLax**

Established Name: **Polyethylene Glycol 3350 Powder for Oral Solution**

BASIS OF APPROVAL:

APPROVAL SUMMARY (List the package size, strength(s), and date of submission for approval):
Do you have 12 Final Printed Labels and Labeling? YES
Container Labels combined with Insert Labeling and Patient Package Information: 255 grams and 527 grams
Satisfactory in FPL as of December 23, 2003 submission [vol 2.1].
Packet Labels: 17 grams
Satisfactory in FPL as of December 23, 2003 submission [vol 2.1].
Carton Labeling combined with Insert Labeling and Patient Package Information: 14s (7 x 2 single dose packets - 17 grams each)
Satisfactory in FPL as of December 23, 2003 submission [vol 2.1].
Revisions needed post-approval: PI - DOSAGE AND ADMINISTRATION and HOW SUPPLIED - "tablespoonful" --- PPI - last sentence - "... drug product." These same changes to be made on the carton labeling as well --- The firm has stated that these changes will be made after approval

BASIS OF APPROVAL:
Was this approval based upon a petition? NO
What is the RLD on the 356(h) form: MiraLax
NDA Number: 20-698
NDA Drug Name: Polyethylene Glycol 3350 Powder for Oral Solution
NDA Firm: Braintree Laboratories, Inc.
Date of Approval of NDA Insert and supplement #: 6-20-01 (S-003)
Has this been verified by the MIS system for the NDA? YES
Was this approval based upon an OGD labeling guidance? NO
Basis of Approval for the Container Labels: side-by-sides
Basis of Approval for the Carton Labeling: side-by-sides
Other Comments

REVIEW OF PROFESSIONAL LABELING CHECK LIST

Established Name	Yes	No	N.A.
Different name than on acceptance to file letter? "17 g/scoopful" in acceptance letter	X		
Is this product a USP item? If so, USP supplement in which verification was assured.		X	
Is this name different than that used in the Orange Book? Orange Book does not have "Powder" in the name	X		
If not USP, has the product name been proposed in the PF?		X	
Error Prevention Analysis			
Has the firm proposed a proprietary name? YES.	X		
Do you find the name objectionable? List reasons in FTR, if so. Consider: Misleading? Sounds or looks like another name? USAN stem present? Prefix or Suffix present?		X	
Has the name been forwarded to the Labeling and Nomenclature Committee? If so, what were the recommendations? If the name was unacceptable, has the firm been notified? ODS has found the name acceptable	X		
Packaging			
Is this a new packaging configuration, never been approved by an ANDA or NDA? If yes, describe in FTR.	X		
Is this package size mismatched with the recommended dosage? If yes, the Poison Prevention Act may require a		X	

CRC.			
Does the package proposed have any safety and/or regulatory concerns?		X	
Conflict between the DOSAGE AND ADMINISTRATION and INDICATIONS sections and the packaging configuration?		X	
Is the strength and/or concentration of the product unsupported by the insert labeling?		X	
Is the color of the container (i.e. the color of the cap of a mydriatic ophthalmic) or cap incorrect?			X
Individual cartons required? Issues for FTR: Innovator individually cartoned? Light sensitive product which might require cartoning? Must the package insert accompany the product?		X	
Are there any other safety concerns?		X	
Labeling			
Is the name of the drug unclear in print or lacking in prominence? (Name should be the most prominent information on the label).		X	
Has applicant failed to clearly differentiate multiple product strengths?			X
Is the corporate logo larger than 1/3 container label? (No regulation - see ASHP guidelines)		X	
Does RLD make special differentiation for this label? (i.e., Pediatric strength vs Adult; Oral Solution vs Concentrate, Warning Statements that might be in red for the NDA)		X	
Is the Manufactured by/Distributor statement incorrect or falsely inconsistent between labels and labeling? Is "Jointly Manufactured by...", statement needed?		X	
Failure to describe solid oral dosage form identifying markings in HOW SUPPLIED?			X
Has the firm failed to adequately support compatibility or stability claims which appear in the insert labeling? Note: Chemist should confirm the data has been adequately supported.		X	
Inactive Ingredients: (FTR: List page # in application where inactives are listed)			
Does the product contain alcohol? If so, has the accuracy of the statement been confirmed?		X	
Do any of the inactives differ in concentration for this route of administration?			X
Any adverse effects anticipated from inactives (i.e., benzyl alcohol in neonates)?			X
Is there a discrepancy in inactives between DESCRIPTION and the composition statement?			X
Has the term "other ingredients" been used to protect a trade secret? If so, is claim supported?			X
USP Issues: (FTR: List USP/NDA/ANDA dispensing/storage recommendations)			
Do container recommendations fail to meet or exceed USP/NDA recommendations? If so, are the recommendations supported and is the difference acceptable?		X	
Because of proposed packaging configuration or for any other reason, does this applicant meet fail to meet all of the unprotected conditions of use of referenced by the RLD?		X	
Does USP have labeling recommendations? If any, does ANDA meet them?			X
Is the product light sensitive? If so, is NDA and/or ANDA in a light resistant container?		X	
Failure of DESCRIPTION to meet USP Description and Solubility information? If so, USP information should be used. However, only include solvents appearing in innovator labeling.		X	
Bioequivalence Issues: (Compare bioequivalency values: insert to study. List Cmax, Tmax, T 1/2 and date study acceptable)			
Insert labeling references a food effect or a no-effect? If so, was a food study done?		X	
Has CLINICAL PHARMACOLOGY been modified? If so, briefly detail where/why.		X	
Patent/Exclusivity Issues?: FTR: Check the Orange Book edition or cumulative supplement for verification of the latest Patent or Exclusivity. List expiration date for all patents, exclusivities, etc. or if none, please state.			

NOTES/QUESTIONS TO THE CHEMIST:

I asked the firm to remove [redacted] and they have done so.

FOR THE RECORD: (portions taken from previous review)

1. Review based on the labeling of MiraLax [NDA 20-698/S-003, revised 6-01; approved 6-20-01.

2. Patent/ Exclusivities

Patent Data – 20-698

No	Expiration	Use Code	Use	File	Labeling Impact
5,710,183	7-14-15	U-265	Use as a laxative	IV	None
6,048,901	4-20-19	U-343	Method of reducing of intestinal gas, cramping & anorectal irritation.	IV	None

Exclusivity Data - 20-698

Code/sup	Expiration	Use Code	Description		Labeling Impact
None			There is no unexpired exclusivity for this product		

3. Storage Conditions:
NDA - CONTAINER -- Store at 25°C (77°F); [See USP Controlled Room Temperature]
INSERT -- Store at 25°C (77°F); excursions permitted to 15-30°C (59-86°F). See USP "Controlled Room Temperature."
ANDA - Store at 20°-25°C (68°-77°F); excursions permitted between 15°-30°C (59°-86°F). [See USP Controlled Room Temperature].
USP - not USP

4. Product Line:
The innovator markets their product in bottles containing 255 grams and 527 grams of powder and in cartons of 12 x 17 gram packets.
The applicant proposes to market their product in bottles containing 255 grams and 527 grams of powder and in cartons of 14 x 17 gram packets.

5. THIS IS A FIRST GENERIC.

6. Schwarz Pharma is the manufacturer [see p 138 vol B 1.1 section IX].

7. There are no inactive ingredients [p 113 vol B 1.1 section VII].

8. The firm will be notified of the acceptability of their proprietary name "GlycoLax" and of the minor labeling deficiencies and of the need to submit 12 copies of FPL of all labeling pieces for full approval of this ANDA by telephone (A. Vezza). The firm has made the revisions requested and has successfully submitted 12 FPL of each labeling piece.

Date of Review: 1-7-04 Date of Submission: 12-23-03

Primary Reviewer: Adolph Vezza Date: 1/12/04

Team Leader: Captain Lillie Golson Date: 1/12/04

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cc: ANDA: 76-762
DUP/DIVISION FILE
HFD-613/AVezza/LGolson (no cc)
aev/1/7/04|V:\FIRMSNZ\SCHWARZ\LTRS&REV\76652.APL
Review

(this approval summary supersedes the approval summary dated 1-12-04)
APPROVAL SUMMARY
REVIEW OF PROFESSIONAL LABELING
DIVISION OF LABELING AND PROGRAM SUPPORT
LABELING REVIEW BRANCH

ANDA Number: **76-652** Date of Submission: **May 28, 2004**

Applicant's Name: **Schwarz Pharma, Inc.**

Proprietary Name: **GlycoLax**

Established Name: **Polyethylene Glycol 3350 Powder for Oral Solution**

BASIS OF APPROVAL:

APPROVAL SUMMARY (List the package size, strength(s), and date of submission for approval):
Do you have 12 Final Printed Labels and Labeling? ELECTRONIC SUBMISSION
Container Labels combined with Insert Labeling and Patient Package Information packaged at [redacted]:
255 grams and 527 grams
255 grams - *Satisfactory* [PATH - cdsesubogd1\n76652\N_000\2004-05-28\Labeling\pi255[redacted].pdf].
527 grams - *Satisfactory* [PATH - cdsesubogd1\n76652\N_000\2004-05-28\Labeling\pi527[redacted]pdf]
Container Labels combined with Insert Labeling and Patient Package Information packaged at SPMI:
255 grams and 527 grams
255 grams - *Satisfactory* [PATH - cdsesubogd1\n76652\N_000\2004-05-28\Labeling\pi255spmi.pdf].
527 grams - *Satisfactory* [PATH - cdsesubogd1\n76652\N_000\2004-05-28\Labeling\pi527spmi.pdf].
Packet Labels: 17 grams
Satisfactory [PATH - cdsesubogd1\n76652\N_000\2004-05-28\Labeling\packetlabel.pdf]
Carton Labeling combined with Insert Labeling and Patient Package Information: 14s (7 x 2 single dose packets - 17 grams each)
Satisfactory [PATH - cdsesubogd1\n76652\N_000\2004-05-28\Labeling\carton.pdf]
Revisions needed post-approval: PI - DOSAGE AND ADMINISTRATION and HOW SUPPLIED - "tablespoonful" --- PPI - last sentence - "... drug product." --- The firm has stated that these changes will be made after approval for the product packaged at [redacted] - they have already been made for those packaged at SPMI.

BASIS OF APPROVAL:
Was this approval based upon a petition? NO
What is the RLD on the 356(h) form: MiraLax
NDA Number: 20-698
NDA Drug Name: Polyethylene Glycol 3350 Powder for Oral Solution
NDA Firm: Braintree Laboratories, Inc.
Date of Approval of NDA Insert and supplement #: 6-20-01 (S-003)
Has this been verified by the MIS system for the NDA? YES
Was this approval based upon an OGD labeling guidance? NO
Basis of Approval for the Container Labels: side-by-sides
Basis of Approval for the Carton Labeling: side-by-sides
Other Comments

REVIEW OF PROFESSIONAL LABELING CHECK LIST

Established Name	Yes	No	N.A.
Different name than on acceptance to file letter? "17 g/scoopful" in acceptance letter	X		
Is this product a USP item? If so, USP supplement in which verification was assured. [redacted]		X	
Is this name different than that used in the Orange Book? Orange Book does not have "Powder" in the name	X		
If not USP, has the product name been proposed in the PF?		X	
Error Prevention Analysis			
Has the firm proposed a proprietary name? YES.	X		

Do you find the name objectionable? List reasons in FTR, if so. Consider: Misleading? Sounds or looks like another name? USAN stem present? Prefix or Suffix present?		X	
Has the name been forwarded to the Labeling and Nomenclature Committee? If so, what were the recommendations? If the name was unacceptable, has the firm been notified? ODS has found the name acceptable	X		
Packaging			
Is this a new packaging configuration, never been approved by an ANDA or NDA? If yes, describe in FTR.	X		
Is this package size mismatched with the recommended dosage? If yes, the Poison Prevention Act may require a CRC.		X	
Does the package proposed have any safety and/or regulatory concerns?		X	
Conflict between the DOSAGE AND ADMINISTRATION and INDICATIONS sections and the packaging configuration?		X	
Is the strength and/or con6 centration of the product unsupported by the insert labeling?		X	
Is the color of the container (i.e. the color of the cap of a mydriatic ophthalmic) or cap incorrect?			X
Individual cartons required? Issues for FTR: Innovator individually cartoned? Light sensitive product which might require cartoning? Must the package insert accompany the product?		X	
Are there any other safety concerns?		X	
Labeling			
Is the name of the drug unclear in print or lacking in prominence? (Name should be the most prominent information on the label).		X	
Has applicant failed to clearly differentiate multiple product strengths?			X
Is the corporate logo larger than 1/3 container label? (No regulation - see ASHP guidelines)		X	
Does RLD make special differentiation for this label? (i.e., Pediatric strength vs Adult; Oral Solution vs Concentrate, Warning Statements that might be in red for the NDA)		X	
Is the Manufactured by/Distributor statement incorrect or falsely inconsistent between labels and labeling? Is "Jointly Manufactured by...", statement needed?		X	
Failure to describe solid oral dosage form identifying markings in HOW SUPPLIED?			X
Has the firm failed to adequately support compatibility or stability claims which appear in the insert labeling? Note: Chemist should confirm the data has been adequately supported.		X	
Inactive Ingredients: (FTR: List page # in application where inactives are listed)			
Does the product contain alcohol? If so, has the accuracy of the statement been confirmed?		X	
Do any of the inactives differ in concentration for this route of administration?			X
Any adverse effects anticipated from inactives (i.e., benzyl alcohol in neonates)?			X
Is there a discrepancy in inactives between DESCRIPTION and the composition statement?			X
Has the term "other ingredients" been used to protect a trade secret? If so, is claim supported?			X
USP Issues: (FTR: List USP/NDA/ANDA dispensing/storage recommendations)			
Do container recommendations fail to meet or exceed USP/NDA recommendations? If so, are the recommendations supported and is the difference acceptable?		X	
Because of proposed packaging configuration or for any other reason, does this applicant meet fail to meet all of the unprotected conditions of use of referenced by the RLD?		X	
Does USP have labeling recommendations? If any, does ANDA meet them?			X
Is the product light sensitive? If so, is NDA and/or ANDA in a light resistant container?		X	
Failure of DESCRIPTION to meet USP Description and Solubility information? If so, USP information should be used. However, only include solvents appearing in innovator labeling.		X	
Bioequivalence Issues: (Compare bioequivalency values: insert to study. List Cmax, Tmax, T 1/2 and date study acceptable)			
Insert labeling references a food effect or a no-effect? If so, was a food study done?		X	
Has CLINICAL PHARMACOLOGY been modified? If so, briefly detail where/why.		X	
Patent/Exclusivity Issues?: FTR: Check the Orange Book edition or cumulative supplement for verification of the latest Patent or Exclusivity. List expiration date for all patents, exclusivities, etc. or if none, please state.			

NOTES/QUESTIONS TO THE CHEMIST:

I asked the firm to remove _____ and they have done so.

FOR THE RECORD: (portions taken from previous review)

1. Review based on the labeling of MiraLax [NDA 20-698/S-003, revised 6-01; approved 6-20-01.

2. Patent/ Exclusivities

Patent Data – 20-698

No	Expiration	Use Code	Use	File	Labeling Impact
5,710,183	7-14-15	U-265	Use as a laxative	IV	None
6,048,901	4-20-19	U-343	Method of reducing of intestinal gas, cramping & anorectal irritation.	IV	None

Exclusivity Data - 20-698

Code/sup	Expiration	Use Code	Description		Labeling Impact
None			There is no unexpired exclusivity for this product		

3. Storage Conditions:
NDA - CONTAINER -- Store at 25°C (77°F); [See USP Controlled Room Temperature]
INSERT -- Store at 25°C (77°F); excursions permitted to 15-30°C (59-86°F). See USP "Controlled Room Temperature."
ANDA - Store at 20°-25°C (68°-77°F); excursions permitted between 15°-30°C (59°-86°F). [See USP Controlled Room Temperature].
USP - not USP

4. Product Line:
The innovator markets their product in bottles containing 255 grams and 527 grams of powder and in cartons of 12 x 17 gram packets.
The applicant proposes to market their product in bottles containing 255 grams and 527 grams of powder and in cartons of 14 x 17 gram packets.

5. THIS IS A FIRST GENERIC.

6. Schwarz Pharma is the manufacturer [see p 138 vol B 1.1 section IX].

7. There are no inactive ingredients [p 113 vol B 1.1 section VII].

8. The firm will be notified of the acceptability of their proprietary name "GlycoLax" and of the minor labeling deficiencies and of the need to submit 12 copies of FPL of all labeling pieces for full approval of this ANDA by telephone (A. Vezza). The firm has made the revisions requested and has successfully submitted 12 FPL of each labeling piece. Electronic labeling submitted 5-28-04 some of which incorporated the revisions after approval [see above]

Date of Review: 6-23-04 Date of Submission: 5-28-04

Primary Reviewer: Adolph Vezza Date: 6/25/04

Team Leader: Captain Lillie Golson Date: 6/25/04

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cc: ANDA: 76-762
DUP/DIVISION FILE
HFD-613/AVezza/LGolson (no cc)
aev/6/23/04|V:\FIRMSNZ\SCHWARZ\LTRS&REV\76652.APL2
Review

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

CHEMISTRY REVIEWS

#1

CHEMISTRY REVIEW

ANDA # 76-652

Drug Name

Polyethylene Glycol 3350 — Powder for Solution
(First Generic)

Firm Name
Schwarz Pharma, Inc.

Chemistry Reviewer's Name
Nashed I. Samaan, Ph.D.

Chemistry Division Name
Chemistry Division II
Office of Generic Drugs

Table of Contents

Chemistry Review Data Sheet

1. ANDA #: **76-652**

2. REVIEW #: **1**

3. REVIEW DATE: 06-30-03

4. REVIEWER: Nashed I. Samaan, Ph.D.

5. PREVIOUS DOCUMENTS:

Previous Documents	Document Date
Firm	**Firm**
Original Submission	01-30-03
Amendment 001(Revised certification)	04-14-03
FDA	
Acknowledgement	03-27-03

6. SUBMISSION(S) BEING REVIEWED:

Submission(s) Reviewed	Document Date
Original submission	01-30-03

7. **NAME & ADDRESS OF APPLICANT:**

Name:	Schwarz Pharma, Inc.
Address:	6140 W. Executive Drive, Mequon, WI 53092-4467
Representative:	Donna K. Multhauf
Telephone:	(262) 238-9994, (800)-558-5114, Fax (262)-238-0311

8. DRUG PRODUCT NAME/CODE/TYPE:

A. Proprietary Name: **GlycoLax™**

B. Non-Proprietary Name (USAN):

Polyethylene Glycol 3350 – powder for Solution

Chemistry Review Data Sheet

9. LEGAL BASIS FOR SUBMISSION:

The basis for **Schwarz**'s ANDA 76-652 for **GlycoLax**™ (Polyethylene Glycol 3350 — powder for Solution) is the approved, reference listed drug MiraLax™, the subject of NDA # 20-698 held by Brantree Laboratory, Inc.

10. PHARMACOL. CATEGORY:

Laxatives (Code # 8031200)

11. DOSAGE FORM: Oral Solution

12. STRENGTH/POTENCY: 225g (16oz), 527g (24oz) and 17 g packets

13. ROUTE OF ADMINISTRATION: Oral

14. Rx/OTC DISPENSED: _XX__Rx ___OTC

15. SPOTS (SPECIAL PRODUCTS ON-LINE TRACKING SYSTEM):

_____SPOTS product – Form Completed
__X___Not a SPOTS product

16. CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOLECULAR WEIGHT:

Polyethylene Glycol 3350 NF (Powder).

APPEARS THIS WAY ON ORIGINAL

17. RELATED/SUPPORTING DOCUMENTS:

A. DMFs: Authorization letters on pp. 340 – 349 Satisfactory

DMF #	TYPE	HOLDER	ITEM REFERENCED	CODE[1]	STATUS[2]	DATE REVIEW COMPLETED	COMMENTS
	II (p.340)			3	Adequate	06-18-03	Reviewed by R. Frankewich
	III			4			
	III (p.344)			4			
	III (p.346)			4			

[1] Action codes for DMF Table:
1 – DMF Reviewed.
Other codes indicate why the DMF was not reviewed, as follows:
2 –Type 1 DMF
3 – Reviewed previously and no revision since last review
4 – Sufficient information in application
5 – Authority to reference not granted
6 – DMF not available
7 – Other (explain under "Comments")

[2] Adequate, Inadequate, or N/A (There is enough data in the application, therefore the DMF did not need to be reviewed)

B. Other Documents:

DOCUMENT	APPLICATION NUMBER	DESCRIPTION

APPEARS THIS WAY
ON ORIGINAL

Chemistry Review Data Sheet

18. STATUS:

CONSULTS/ CMC RELATED REVIEWS	RECOMMENDATION	DATE	REVIEWER
Chemistry	Deficient, Minor	6-30-03	N. Samaan
Labeling	Pending	6-30-03	
Bioequivalence	Waiver meets statutory requirements, Final review is pending	6-30-03	S. Pradhan
Microbiology	N/A		
EES	Acceptable	6-24-03	DAMBROGIOJ
Methods Validation	Not required (The same methods used in approved NDA # 18-983 and pending ANDA # 76-491. A copy of the validation report is included		
EA	N/A		
Radiopharmaceutical	N/A		

19. ORDER OF REVIEW

The application submission(s) covered by this review was taken in the date order of receipt. ____ Yes __X__ No If no, explain reason(s) below:

Reassignment from team # 10 due to review of sister ANDA in team 8

APPEARS THIS WAY
ON ORIGINAL

The Chemistry Review for ANDA # 76-652

The Executive Summary

I. Recommendations

A. Recommendation and Conclusion on Approvability

Chemistry : Not Approvable, MINOR
Labeling : Pending
Bioequivalence: Pending
Microbiology : N/A
EES : Acceptable

B. Recommendation on Phase 4 (Post-Marketing) Commitments, Agreements, and/or Risk Management Steps, if Approvable

II. Summary of Chemistry Assessments

A. Description of the Drug Product(s) and Drug Substance(s)

1. **Drug Substance:**

The active ingredient used in the production of GlycoLax® (polyethylene glycol 3350, NF powder) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is between 90.0% - 110.0% of the nominal value. The chemical formula is HO(C2H4O)n H in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. The manufacturers of the API is ——————. This API has USP/NF monographs.

2. Drug product:

This drug product is the first generic for the RLD MiraLax™ manufactured by Braintree NDA 20-698. GlycoLax® is an osmotic agent for the treatment of occasional constipation. It is a white powder for reconstitution. Polyethylene glycol 3350 is the only component in this proposed drug product. There is no manufacturing for this product but simply the filling of the active ingredient, PEG 3350. The filling operations are performed by —— located in ——————
GlycoLax™ is available in three package sizes: a 16 oz container of 255 grams of laxative powder, a 24 oz container of 527 grams of laxative powder and a carton of 14 single foil packets each containing 17 gram PEG 3350.

B. Description of How the Drug Product is Intended to be Used

i. Schwarz's GlycoLax® (Polyethylene glycol 3350 — powder for solution) supplied in powdered form for oral administration after dissolution in about 8 oz of water, juice, soda, coffee or tea.. The application was submitted based on the approved reference listed drug MiraLax™, the subject of NDA # 20-698 held by Brantree Laboratory, Inc. The proposed expiration date is 24 month based on six month accelerated stability data for the packets and three months for the HDPE bottles

ii. Storage conditions: store at controlled room temperature 20°–25°C (68°–77°F) ; excursions permitted between 15°–30°C (59°–86° F).

C. Basis for Approvability or Not-Approval Recommendation

This application is not approvable because:

Chemistry : Not Approvable, MINOR
Labeling : Pending
Bioequivalence: Pending
Microbiology : N/A.
EES : Acceptable

III. Administrative

A. Reviewer's Signature: Nashed I. Samaan, Ph.D

Nashed 7-17-03

B. Endorsement Block

HFD-647/Nashed I. Samaan Ph.D./ 06-30-03;7.10.03 (revised) Nashed 7-17-03
HFD-647/U.V. Venkataram Ph.D./ 7.7.03;7.15.03 (revised)
HFD-617/ S. Shepperson /7.16.03

C. CC Block

Redacted 12 page(s)

of trade secret and/or

confidential commercial

information from

CHEMISTRY REVIEW #1

2. The bioequivalency review is pending. We may request additional revisions and data upon completion of this review.

Sincerely yours,

for Florence S. Fang 7/21/03.
Director
Division of Chemistry II
Office of Generic Drugs
Center for Drug Evaluation and Research

APPEARS THIS WAY
ON ORIGINAL

cc: **ANDA : 76-652**
ANDA DUP
DIV FILE
Field Copy

Endorsements:
HFD-647/Nashed I. Samaan, Ph.D./ 06-30-03 revised 7-9 & 7-15-03 7-17-03
HFD-647/U.V. Venkataram, Ph.D./7.15.03 U.V. Venkataram
HFD-617/ S. Shepperson /7.16.2003 7/17/03 7/17/03

F/T by rad7/17/03

V:\FIRMSNZ\SCHWARZ\LTRS&REV\76-652 N01_RNS

TYPE OF LETTER: NOT APPROVABLE , MINOR

APPEARS THIS WAY
ON ORIGINAL

#2

CHEMISTRY REVIEW

ANDA # 76-652

Drug Name

Polyethylene Glycol 3350 —— Powder for Solution
(First Generic)

Schwarz Pharma, Inc.

Nashed I. Samaan, Ph.D.
Chemistry Division II
Office of Generic Drugs

Table of Contents

Chemistry Review Data Sheet

1. ANDA #: **76-652**

2. REVIEW #: **2**

3. REVIEW DATE: 10-20-03

4. REVIEWER: Nashed I. Samaan, Ph.D.

5. PREVIOUS DOCUMENTS:

Previous Documents	Document Date
Firm	**Firm**
Original Submission	01-30-03
Amendment 001(Revised certification)	04-14-03
Labeling amendment	10-17-2003
FDA	
Acknowledgement	03-27-03
Deficiency letter	07-21-03

6. SUBMISSION(S) BEING REVIEWED:

Submission(s) Reviewed	Document Date
Original amendment	08-18-03 **(subject of this review)**

7. **NAME & ADDRESS OF APPLICANT:**

Name:	Schwarz Pharma, Inc.
Address:	6140 W. Executive Drive, Mequon, WI 53092-4467
Representative:	Donna K. Multhauf
Telephone:	(262) 238-9994, (800)-558-5114, Fax (262)-238-0311

8. DRUG PRODUCT NAME/CODE/TYPE:

A. Proprietary Name: **GlycoLax™**

B. Non-Proprietary Name (USAN):

Polyethylene Glycol 3350 — powder for Solution

Chemistry Review Data Sheet

9. LEGAL BASIS FOR SUBMISSION:

The basis for **Schwarz**'s ANDA 76-652 for **GlycoLax™** (Polyethylene Glycol 3350 – powder for Solution) is the approved, reference listed drug MiraLax™, the subject of NDA # 20-698 held by Brantree Laboratory, Inc.

10. PHARMACOL. CATEGORY:

Laxatives (Code # 8031200)

11. DOSAGE FORM: Powder for Oral Solution

12. STRENGTH/POTENCY: 225g (16oz), 527g (24oz) and 17 g packets

13. ROUTE OF ADMINISTRATION: Oral

14. Rx/OTC DISPENSED: _XX__Rx ___OTC

15. SPOTS (SPECIAL PRODUCTS ON-LINE TRACKING SYSTEM):

_____SPOTS product – Form Completed
__X___Not a SPOTS product

16. CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOLECULAR WEIGHT:
Polyethylene Glycol 3350 NF (Powder).

APPEARS THIS WAY
ON ORIGINAL

17. RELATED/SUPPORTING DOCUMENTS:

A. DMFs: Authorization letters on pp. 340 – 349 Satisfactory

DMF #	TYPE	HOLDER	ITEM REFERENCED	CODE[1]	STATUS[2]	DATE REVIEW COMPLETED	COMMENTS
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	III (p.344)			4			
	III (p.346)			4			
	III Suppl. (p.23)			4			

[1] Action codes for DMF Table:
1 – DMF Reviewed.
Other codes indicate why the DMF was not reviewed, as follows:
2 –Type 1 DMF
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6 – DMF not available
7 – Other (explain under "Comments")

[2] Adequate, Inadequate, or N/A (There is enough data in the application, therefore the DMF did not need to be reviewed)

B. Other Documents:

DOCUMENT	APPLICATION NUMBER	DESCRIPTION

Chemistry Review Data Sheet

18. STATUS:

CONSULTS/ CMC RELATED REVIEWS	RECOMMENDATION	DATE	REVIEWER
Chemistry	Recommend approval	10-20-03	N. Samaan
Labeling	Acceptable	12-08-03	A. Vezza
Bioequivalence	Acceptable	10-01-03	H. Nguyen
Microbiology	N/A		
EES	Acceptable	12-12-03	DAMBROGIOJ
Methods Validation	Not required (The same methods used in approved NDA # 18-983 and pending ANDA # 76-491. A copy of the validation report is included		
EA	N/A		
Radiopharmaceutical	N/A		

19. ORDER OF REVIEW

The application submission(s) covered by this review was taken in the date order of receipt. ____ Yes __X__ No If no, explain reason(s) below:

Reassignment from team # 10 due to review of sister ANDA in team 8

APPEARS THIS WAY
ON ORIGINAL

The Chemistry Review for ANDA # 76-652

The Executive Summary

I. Recommendations

A. Recommendation and Conclusion on Approvability

Chemistry : Recommend approval.
Labeling : Acceptable by A.Vezza on 12-08-03
Bioequivalence: Acceptable by H. Nguyen on 10-01-03
Microbiology : N/A
EES : Acceptable 12-12-03.

B. Recommendation on Phase 4 (Post-Marketing) Commitments, Agreements, and/or Risk Management Steps, if Approvable

II. Summary of Chemistry Assessments

A. Description of the Drug Product(s) and Drug Substance(s)

1. **Drug Substance:**

The active ingredient used in the production of GlycoLax® (polyethylene glycol 3350, NF powder) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is between 90.0% - 110.0% of the nominal value. The chemical formula is HO(C2H4O)n H in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. The manufacturers of the API is ——————— This API has USP/NF monographs.

2. Drug product:

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GlycoLax™ is available in three package sizes: a 16 oz container of 255 grams of laxative powder, a 24 oz container of 527 grams of laxative powder and a carton of 14 single foil packets each containing 17 gram PEG 3350.

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ii. Storage conditions: store at controlled room temperature 20°–25°C (68°–77°F) ; excursions permitted between 15°–30°C (59°–86° F).

C. Basis for Approvability or Not-Approval Recommendation

This application is approvable.~~contingent labeling approval~~

APPEARS THIS WAY ON ORIGINAL

Chemistry : Recommend approval ~~contingent labeling approval~~
Labeling : Acceptable by A.Vezza on 12-08-03
Bioequivalence: Acceptable by H. Nguyen on 10-01-03
Microbiology : N/A.
EES : Acceptable on 12-12-03.

III. Administrative

A. Reviewer's Signature: Nashed I. Samaan, Ph.D Nashed I. 12-15-03

B. Endorsement Block

HFD-647/Nashed I. Samaan Ph.D./ 10-20-03 (revised 11-10-03) Nashed I. 12-15-03
HFD-647/U.V. Venkataram Ph.D./ 11-07-03 (revised 12-11-03)
HFD-617/ S. Shepperson /12.12.03 U.V. Venkataram 12.16.03

C. CC Block

Redacted 13 page(s)

of trade secret and/or

confidential commercial

information from

CHEMISTRY REVIEW #2

cc: **ANDA : 76-652**
ANDA DUP
DIV FILE
Field Copy

Endorsements:
HFD-647/Nashed I. Samaan, Ph.D./ 10-20-03 (revised 11-10-03) 12-15-03
HFD-647/U.V. Venkataram, Ph.D./ 11-7-03 (revised 12-11-03) U.V. Venkataram 12.16.03
HFD-617/ S. Shepperson /12.12.03 S Shepperson 12-15-03

F/T by rad12/12/03

V:\FIRMSNZ\SCHWARZ\LTRS&REV\76-652 N02_RNS

TYPE OF LETTER: Approvable

APPEARS THIS WAY
ON ORIGINAL

ANDA # 76-652

Drug Name

Polyethylene Glycol 3350 — Powder for Oral Solution

Schwarz Pharma, Inc.

Nashed I. Samaan, Ph.D.
Chemistry Division II
Office of Generic Drugs

Table of Contents

Chemistry Review Data Sheet

1. ANDA #: **76-652**

2. REVIEW #: **3**

3. REVIEW DATE: 06-14-04

4. REVIEWER: Nashed I. Samaan, Ph.D.

5. PREVIOUS DOCUMENTS:

Previous Documents	Document Date
Firm	**Firm**
Original Submission	01-30-03
Amendment (Revised certification)	04-14-03
Patent correspondence	05-29-03
Labeling amendment	10-17-03
Amendment (response to DL on rev. 1)	08-18-03
Patent amendment	09-10-03
Labeling amendment	10-17-03
Labeling amendment	12-23-03
Minor amendment	04-12-04
Minor amendment	05-25-04 & 05-28-04
Patent correspondence	06-07-04
FDA	
Acknowledgement	03-27-03
Deficiency letter	07-21-03
TA letter	12-23-03

6. SUBMISSION(S) BEING REVIEWED:

Submission(s) Reviewed	Document Date
Amendment (Add alternate packaging site)	04-12-04 (subject of this review)
Amendment (Packaging batch records)	05-25-04 (subject of this review)
Amendment (Final Approval Requested)	05-28-04 (subject of this review)

7. **NAME & ADDRESS OF APPLICANT:**

CHEMISTRY REVIEW

Executive Summary Section

Name:	Schwarz Pharma, Inc.
Address:	6140 W. Executive Drive, Mequon, WI 53092-4467
Representative:	Donna K. Multhauf
Telephone:	(262) 238-9994, (800)-558-5114, Fax (262)-238-0311

8. DRUG PRODUCT NAME/CODE/TYPE:

A. Proprietary Name: **GlycoLax™**

B. Non-Proprietary Name (USAN):

Polyethylene Glycol 3350 — powder for Solution

9. LEGAL BASIS FOR SUBMISSION:

The basis for **Schwarz**'s ANDA 76-652 for **GlycoLax™** (Polyethylene Glycol 3350 — powder for Solution) is the approved, reference listed drug MiraLax™, the subject of NDA # 20-698 held by Braintree Laboratories Inc.

10. PHARMACOL. CATEGORY:

Laxatives (Code # 8031200)

11. DOSAGE FORM: Powder for Oral Solution

12. STRENGTH/POTENCY: 225g (16oz), 527g (24oz) and 17 g packets

13. ROUTE OF ADMINISTRATION: Oral

14. Rx/OTC DISPENSED: _XX__Rx ___OTC

15. SPOTS (SPECIAL PRODUCTS ON-LINE TRACKING SYSTEM):

_____SPOTS product – Form Completed
__X___Not a SPOTS product

16. CHEMICAL NAME, STRUCTURAL FORMULA, MOLECULAR FORMULA, MOLECULAR WEIGHT:

Polyethylene Glycol 3350 NF (Powder).

17. RELATED/SUPPORTING DOCUMENTS:

A. DMFs: Authorization letters on pp. 340 – 349 Satisfactory

DMF #	TYPE	HOLDER	ITEM REFERENCED	CODE[1]	STATUS[2]	DATE REVIEW COMPLETED	COMMENTS
	II (p.340)			3	Adequate	06-18-03	Reviewed by R. Frankewich
	III			4			
	III (p.344)			4			
	III (p.346)			4			
	III Suppl. (p.23)			4			

[1] Action codes for DMF Table:
1 – DMF Reviewed.
Other codes indicate why the DMF was not reviewed, as follows:
2 –Type 1 DMF
3 – Reviewed previously and no revision since last review
4 – Sufficient information in application
5 – Authority to reference not granted
6 – DMF not available
7 – Other (explain under "Comments")

[2] Adequate, Inadequate, or N/A (There is enough data in the application, therefore the DMF did not need to be reviewed)

B. Other Documents:

DOCUMENT	APPLICATION NUMBER	DESCRIPTION

APPEARS THIS WAY ON ORIGINAL

18. STATUS:

Executive Summary Section

CONSULTS/ CMC RELATED REVIEWS	RECOMMENDATION	DATE	REVIEWER
Chemistry	Recommend Full approval	06-14-04	N. Samaan
Labeling	Acceptable	06-24-04	
Bioequivalence	Acceptable	10-01-03	H. Nguyen
Microbiology	N/A		
EES	Acceptable	04-19-04	DAMBROGIOJ
Methods Validation	Not required (The same methods used in approved NDA # 18-983 and pending ANDA # 76-491. A copy of the validation report is included		
EA	N/A		
Radiopharmaceutical	N/A		

19. ORDER OF REVIEW

The application submission(s) covered by this review was taken in the date order of receipt. _____ Yes __X__ No If no, explain reason(s) below:

APPEARS THIS WAY
ON ORIGINAL

The Chemistry Review for ANDA # 76-652

The Executive Summary

I. Recommendations

A. Recommendation and Conclusion on Approvability

Chemistry : Recommend full approval.
Labeling : Acceptable, June 25, 2004.
Bioequivalence: Acceptable by H. Nguyen on 10-01-03
Microbiology : N/A
EES : Acceptable 04-19-04

B. Recommendation on Phase 4 (Post-Marketing) Commitments, Agreements, and/or Risk Management Steps, if Approvable

II. Summary of Chemistry Assessments

A. Description of the Drug Product(s) and Drug Substance(s)

1. **Drug Substance:**

The active ingredient used in the production of GlycoLax® (polyethylene glycol 3350, NF powder) is a synthetic polyglycol having an average molecular weight of 3350. The actual molecular weight is between 90.0% - 110.0% of the nominal value. The chemical formula is HO(C2H4O)n H in which n represents the average number of oxyethylene groups. Below 55°C, it is a free flowing white powder freely soluble in water. The manufacturers of the API is [redacted] This API has USP/NF monographs.

2. **Drug product**:

This drug product is the first generic for the RLD MiraLax™ manufactured by Braintree NDA 20-698. GlycoLax® is an osmotic agent for the treatment of occasional constipation. It is a white powder for reconstitution. Polyethylene glycol 3350 is the only component in this proposed drug product. There is no manufacturing for this product but simply the filling of the active ingredient, PEG 3350. The filling operations are performed by [redacted] located in [redacted]
GlycoLax™ is available in three package sizes: a 16 oz container of 255 grams of laxative powder, a 24 oz container of 527 grams of laxative powder and a carton of 14 single foil packets each containing 17 gram PEG 3350.

B. Description of How the Drug Product is Intended to be Used

i. Schwarz's GlycoLax® (Polyethylene glycol 3350 — ' powder for solution) supplied in powdered form for oral administration after dissolution in about 8 oz of water, juice, soda, coffee or tea.. The application was submitted based on the approved reference listed drug MiraLax™, the subject of NDA # 20-698 held by Brantree Laboratory, Inc. The proposed expiration date is 24 month based on six month accelerated stability data for the packets and three months for the HDPE bottles

ii. Storage conditions: store at controlled room temperature 20°–25°C (68°–77°F) ; excursions permitted between 15°–30°C (59°–86° F).

C. Basis for Approvability or Not-Approval Recommendation

This application is approvable contingent labeling approval

Chemistry : Recommend full approval contingent labeling final sign off.
Labeling : Satisfactory, June 25, 2004.
Bioequivalence: Acceptable by H. Nguyen on 10-01-03
Microbiology : N/A
EES : Acceptable on 04-19-04

III. Administrative

A. Reviewer's Signature: Nashed I. Samaan, Ph.D

B. Endorsement Block

HFD-647/Nashed I. Samaan Ph.D./ 06-14-04 Nashed I. 6-28-04
HFD-647/U.V. Venkataram Ph.D./ 6.18.04 U.V. Venkataram
HFD-617/ S. Shepperson /6-25-04 6/28/04

C. CC Block

Redacted 3 page(s)

of trade secret and/or

confidential commercial

information from

CHEMISTRY REVIEW #3

CHEMISTRY REVIEW

Chemistry Assessment Section

Amendment dated May 28, 2004
(Final Approval Requested)

Final Approval Requested for the above referenced ANDA (first-time generic).

Per the Agency's tentative approval letter, the sponsor has identified minor changes that occurred in CMC information after the tentative approval letter. These changes are:

1. New amendments:

   On April 12, 2004, SPInc submitted Amendment 006 which provided for an Alternate Packaging/Filling Site. On May 25, 2004, SPInc submitted an amendment to Amendment 006 which provided master packaging batch records to supply further information for the review of the packaging site change.

   These two amendments are reviewed in this review cycle and they are approvable

2. Stability

   As the stability protocol has passed another stability time-point between the tentative approval and this request for final approval, the following stability time-points are herein included:

   a. 18 month CRT foil pouches packaged at ———
   b. 18 month CRT for both bottle sizes packaged at ———

   The test results demonstrated the stability of the product in the proposed packaging container/ closure system.

3. Labeling: Acceptable.

   Final printed labeling (FPL) is being submitted in electronic format directly to the Office of Generic Drugs on 5/28/04. The final sign-off of review of these labeling is acceptable.

cc: **ANDA : 76-652**
ANDA DUP
DIV FILE
Field Copy

Endorsements:
HFD-647/Nashed I. Samaan, Ph.D./ 6-14-04 Nashed I. Samaan 6-28-04
HFD-647/U.V. Venkataram, Ph.D./ 6.18.04 U.V. Venkataram 6/28/04
HFD-617/ S. Shepperson /6-25-04

F/T by sms 6-25-04

V:\FIRMSNZ\SCHWARZ\LTRS&REV\76652 N03_RNS

TYPE OF LETTER:

Recommend full Approval

APPEARS THIS WAY
ON ORIGINAL

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

BIOEQUIVALENCE REVIEW

DIVISION OF BIOEQUIVALENCE REVIEW

ANDA No.	76-652
Drug Product Name	Polyethylene Glycol 3350 — Powder for Solution
Strength	17 gm/scoop (255 gm and 527 gm Bottles; 17 gm packets)
Applicant Name	Schwarz Pharma
Address	Mequon, WI
Submission Date(s)	January 30, 2003
Amendment Date(s)	N/A
Reviewer	Hoainhon Nguyen
First Generic	No
File Location	**V:\firmsnz\schwarz\ltrs&rev\76652w0103.doc**

I. Executive Summary

The firm has requested a waiver of *in vivo* bioequivalence requirements for its Polyethylene Glycol 3350 — Powder for Solution in 255 gm/bottle, 527 gm/bottle and 17 gm/packets. The firm has submitted comparative formulations of the test and RLD products in support of the biowaiver request. The test and reference formulations are identical in respective strengths/bottle/packet sizes. The biowaiver requests for the test products are granted in accordance with 21CFR 320.22(b)(3). The applications are acceptable with no deficiencies. This is a **First Generic** product.

II. Table of Contents

III. Submission Summary

A. Drug Product Information

Test Product	GlycoLax™ (polyethylene glycol 3350 — powder for solution)
Reference Product	MiraLax™ (polyethylene glycol 3350 NF powder for solution)
RLD Manufacturer	Braintree Laboratories, Inc.
NDA No.	20-698
RLD Approval Date	02/18/99
Indication	For the treatment of occasional constipation

B. PK/PD Information

Bioavailability	No absorption
Food Effect	N/A
Tmax	N/A
Metabolism	N/A
Excretion	Cleared as bowel fluid in approximately 3.5 hours.
Half-life	N/A
Relevant OGD or DBE History	ANDA #76-491: Polyethylene Glycol 3350 with Potassium Chloride, Sodium Bicarbonate and Sodium Chloride Oral Solution (Schwarz Pharma; 09/06/02). The biowaiver request for this ANDA was granted per 21 CFR 320.22(b)(3).
Agency Guidance	None
Drug Specific Issues (if any)	None

C. Contents of Submission

Study Types	Yes/No?	How many?
Single-dose fasting	No	
Single-dose fed	No	
Steady-state	No	
In vitro dissolution	No	
Waiver requests	Yes	1
BCS Waivers	No	
Vasoconstrictor Studies	No	
Clinical Endpoints	No	
Failed Studies	No	
Amendments	No	

D. Pre-Study Bioanalytical Method Validation N/A

E. In Vivo Studies N/A

1. Single-dose Fasting Bioequivalence Study N/A

2. Single-dose Fed Bioequivalence Study N/A

F. Formulation

Location in appendix	Section B, Page 5
Inactive ingredients within IIG Limits (yes or no)	N/A There is no inactive ingredient.
If no, list ingredients outside of limits	N/A
Formulation is acceptable (yes or no)	Yes
If not acceptable, why?	

G. In Vitro Dissolution N/A

H. Waiver Request(s)

Strengths for which waivers requested	17 gm/scoopful
Regulation cited	21 CFR 320.22 (b)(3)
Proportional to strength tested in vivo (yes or no)	N/A
Dissolution is acceptable (yes or no)	N/A
Waiver granted (yes or no)	Yes

I. Deficiency Comments None

J. Recommendations

The Division of Bioequivalence agrees that the information submitted by Schwarz Pharma demonstrates that its Polyethylene Glycol 3350 — Powder for Solution, 17 gm/scoopful falls under 21 CFR 320.22 (b) (3) of the Bioavailability/Bioequivalence Regulations. The biowaiver request for the test product is granted. The test product, Polyethylene Glycol 3350 — (GlycoLax™) Powder for Solution, 17 gm/scoopful, is deemed bioequivalent to the currently approved MiraLax™ Polyethylene Glycol 3350 NF Powder for Solution, 17 gm/scoopful, manufactured by Braintree Laboratories.

9/30/03

Hoainhon Nguyen, Review Branch I, Date

9/30/2003

Yih Chain Huang, Team Leader, Review Branch I, Date

9/30/03

for Dale P. Conner, Pharm. D.
Director, Division of Bioequivalence
Office of Generic Drugs

Hnguyen/09-04-03/v:\firmsnz\schwarz\ltrs&rev\76652w0103.doc

All pages are accounted for in this document.
A pagination error occurred.

IV. Appendix

A. Individual Study Reviews N/A

B. Formulation Data

Ingredients	Test	Reference
Polyethylene Glycol 3350 NF	255 gm or 527 gm/bottle, or 17 gm/packet	255 gm or 527 gm/bottle, or 17 gm/packet

C. Dissolution Data N/A

D. Consult Reviews N/A

E. SAS Output N/A

F. Additional Attachments N/A

APPEARS THIS WAY
ON ORIGINAL

BIOEQUIVALENCY COMMENTS

ANDA: 76-652 APPLICANT: Schwarz Pharma

DRUG PRODUCT: Polyethylene Glycol 3350 — Powder for Solution, 17 gm/scoop (in 255 gm and 527 gm bottles and 17 gm packets)

The Division of Bioequivalence has completed its review and has no further questions at this time.

Please note that the bioequivalence comments provided in this communication are preliminary. These comments are subject to revision after review of the entire application, upon consideration of the chemistry, manufacturing and controls, microbiology, labeling, or other scientific or regulatory issues. Please be advised that these reviews may result in the need for additional bioequivalence information and/or studies, or may result in a conclusion that the proposed formulation is not approvable.

Sincerely yours,

for Barbara K. Davis

Dale P. Conner, Pharm. D.
Director, Division of Bioequivalence
Office of Generic Drugs
Center for Drug Evaluation and Research

CC: ANDA 76-652
ANDA DUPLICATE
DIVISION FILE
HFD-652/ Bio Secretary - Bio Drug File
HFD-652/ HNguyen

V:\firmsnz\schwarz\ltrs&rev\76652w0103.doc
Printed in final on / /00

Endorsements: (Final with Dates)
HFD-652/ HNguyen
HFD-652/ YHuang 9/30/2003
HFD-617/A. Sigler
HFD-650/ D. Conner 10/1/03

BIOEQUIVALENCY - ACCEPTABLE Submission Date: 01-20-03

1. WAIVER (WAI) Strength: 17 gm/scoop (225 gm & 527 gm bottles and 17 gm packets)
Outcome: AC

Outcome Decisions:
AC - Acceptable

APPEARS THIS WAY
ON ORIGINAL

OCT 1 2003

8

OFFICE OF GENERIC DRUGS
DIVISION OF BIOEQUIVALENCE

ANDA #: 76-652 SPONSOR: Schwarz Pharma
DRUG AND DOSAGE FORM: Polyethylene Glycol 3350 – Powder for Solution
STRENGTH(S): 17 gm/scoop (in 255 gm and 527 gm bottles and 17 gm packets)
TYPES OF STUDIES: N/A
CINICAL STUDY SITE(S): N/A
ANALYTICAL SITE(S): N/A

STUDY SUMMARY: N/A
DISSOLUTION: N/A
WAIVER REQUEST: Acceptable

DSI INSPECTION STATUS

Inspection needed: NO	Inspection status:	Inspection results:
First Generic Yes	Inspection requested: (date)	
New facility ____	Inspection completed: (date)	
For cause ____		
Other ____		

PRIMARY REVIEWER: Hoainhon Nguyen BRANCH: I
INITIAL : HNC DATE : 9/30/03

TEAM LEADER: Yih-Chain Huang BRANCH: I
INITIAL : YCH DATE : 9/30/2003

for DIRECTOR, DIVISION OF BIOEQUIVALENCE : DALE P. CONNER, Pharm. D.
INITIAL : Barbara M Davit DATE : 10/1/03

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

ADMINISTRATIVE DOCUMENTS

M E M O R A N D U M

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION
CENTER FOR DRUG EVALUATION AND RESEARCH

DATE : February 24, 2003

TO : Director
Division of Bioequivalence (HFD-650)

FROM : Chief, Regulatory Support Branch
Office of Generic Drugs (HFD-615)

24-FEB-2003

SUBJECT: Examination of the bioequivalence request for waiver submitted with an ANDA for Polyethylene Glycol 3350 for oral solution, 17 g/scoopful to determine if the application is substantially complete for filing and/or granting exclusivity pursuant to USC 355 (j)(5)(B)(iv).

Schwartz Pharma, Inc. has submitted ANDA 76-652 for Polyethylene Glycol 3350 for oral solution, 17 g/scoopful. The ANDA contains a certification pursuant to 21 USC 355 (j)(2)(A)(vii)(iv) stating that patent(s) for the reference listed drug will not be infringed by the manufacturing or sale of the proposed product. Also it is a first generic. In order to accept an ANDA that contains a first generic, the Agency must formally review and make a determination that the application is substantially complete. Included in this review is a determination that the bioequivalence request for waiver is complete, and could establish that the product is bioequivalent.

Please evaluate whether the request for waiver submitted by Schwartz on January 30, 2003 for its Polyethylene Glycol 3350 product satisfies the statutory requirements of "completeness" so that the ANDA may be filed.

A "complete" bioavailability or bioequivalence study is defined as one that conforms with an appropriate FDA guidance or is reasonable in design and purports to demonstrate that the proposed drug is bioequivalent to the "listed drug".

MAR 13 2003

BIOEQUIVALENCE CHECKLIST FOR APPLICATION COMPLETENESS
First Generic ANDA

ANDA# 76-652 FIRM NAME Schwarz Pharma, Inc.

DRUG NAME Polyethylene glycol 3350

DOSAGE FORM Oral; For Solution powder for solution

Requested by: [signature]
Chief, Regulatory Support Team, (HFD-615)

Summary of Findings by Division of Bioequivalence

☐ **Study meets statutory requirements**

☐ **Study does NOT meet statutory requirements**
Reason: This is the reason the study does not meet the requirements, they didn't send us anything!

☑ **Waiver meets statutory requirements**

☐ **Waiver does NOT meet statutory requirements**
Reason: This is the reason the waiver does not meet the requirements: they didn't send us anything either!!

RECOMMENDATION: ☑ COMPLETE ☐ INCOMPLETE

Reviewed by:

Sikta Badhan Date: 2/25/03
Reviewer

[signature] Date: 2/25/2003
Team Leader

Barbara M. Davit Date: 3/13/03
for Director, Division of Bioequivalence

Item Verified:	Yes	No	Required Amount	Amount Sent	Comments
Protocol					
Assay Methodology					
Procedure SOP					
Methods Validation					
Study Results Ln/Lin					
Adverse Events					N/A
IRB Approval					
Dissolution Data					
Pre-screening of Patients					
Chromatograms					
Consent Forms					
Composition	✓				
Summary of Study					
Individual Data & Graphs, Linear & Ln					
PK/PD Data Disk (or Elec Subm)					
Randomization Schedule					
Protocol Deviations					
Clinical Site					N/A
Analytical Site					
Study Investigators					
Medical Records					
Clinical Raw Data					
Test Article Inventory					

BIO Batch Size					
Assay of Active Content Drug					
Content Uniformity					
Date of Manufacture					N/A
Exp. Date of RLD					
BioStudy Lot Numbers					
Statistics					
Summary results provided by the firm indicate studies pass BE criteria					
Waiver requests for other strengths / supporting data	✓				

Additional Comments regarding the ANDA:

The RLD is Miralax Brand free® (NDA 20-698)
17 gm / Scoopful

Created PDF Form:BIO CHKLST.PDF 05/15/02

RECORD OF TELEPHONE CONVERSATION

S.Shepperson called Schwarz Pharma to confirm that labeling deficiencies faxed on August 8, 2003 were received by the firm. Per Sherry Golden, the 3 page fax was received by the firm.

APPEARS THIS WAY
ON ORIGINAL

DATE:	15-Oct-03
ANDA NUMBER	76-652
TELECON INITIATED BY AGENCY	
PRODUCT NAME:	Glycolax
FIRM NAME:	Schwarz Pharma
FIRM REPRESENTATIVES:	Sherry Golden
TELEPHONE NUMBER:	262-238-5233
FDA REPRESENTATIVES	S.Shepperson
SIGNATURES:	S. Shepperson 10/15/03

Orig: ANDA 76-652
~~Cc: Division File~~
~~Chem. II Telecon Binder~~
V:\firmsnz\schwarz\telecons\76652Oct15

OGD APPROVAL ROUTING SUMMARY

ANDA # 76-652 Applicant Schwarz Pharma, Inc.
Drug PEG 3350 Powder for Oral Solution Strength(s) 17g/scoopful

PROVAL (TENTATIVE APPROVAL) SUPPLEMENTAL APPROVAL (NEW STRENGTH) OTHER

REVIEWER:	DRAFT Package	FINAL Package
1. Martin Shimer Chief, Reg. Support Branch	Date 12/9/03 Initials MMS	Date Initials

Contains GDEA certification: (Yes) No (required if sub after 6/1/92)
Determ. of Involvement? Yes No
Pediatric Exclusivity System
RLD = NDA#
Patent/Exclusivity Certification: (Yes) No
Date Checked 12/22/03
If Para. IV Certification- did applicant
Nothing Submitted (X)
Notify patent holder/NDA holder (Yes) No
Written request issued
Was applicant sued w/in 45 days (Yes) No
Study Submitted
Has case been settled: Yes (No) Date settled:
Is applicant eligible for 180 day
Generic Drugs Exclusivity for each strength: (Yes) No (only Applicant to submit ANDA for this drug product)
Type of Letter: TA
Comments:
30 month stay = 10/7/2005

2. Project Manager, Stanley Shepperson Team 8 Review Support Branch	Date 12/19/03 Initials SS	Date Initials

Original Rec'd date 1-30-03
Date Acceptable for Filing 1-31-03
Patent Certification (type) Para 4
Date Patent/Exclus.expires 7-14-15 & 4-20-19
Citizens' Petition/Legal Case (Yes) No
(If YES, attach email from PM to CP coord)
First Generic (Yes) No
Acceptable Bio reviews tabbed (Yes) No
EER Status Pending (Acceptable) OAI
Date of EER Status 12-12-03
Date of Office Bio Review 10-1-03
Date of Labeling Approv. Sum 12-8-03
Date of Sterility Assur. App. N/A
Methods Val. Samples Pending Yes (No)
MV Commitment Rcd. from Firm Yes (No) N/A
Modified-release dosage form: Yes (No)
Interim Dissol. Specs in AP Ltr: Yes
Previously reviewed and tentatively approved Date
Previously reviewed and CGMP def./NA Minor issued Date
Comments:

3. Gregg Davis Deputy Dir., DLPS	Date 22 Dec 2003 Initials	Date 22 Dec 2003 Initials

P IV to '183 + '901 - sued on '183 only, 30 mos exp. 10/7/05

OK for TA

4. Div. Dir./Deputy Dir. Chemistry Div. I or II Comments:	12/22/03	Date Initials

D = MiraLax 17g/Scoopful
Braintree Laboratories, Inc.
NDA 20-698 (001)

REVIEWER: **FINAL ACTION**

5. Frank Holcombe **First Generics Only** Date_____
Assoc. Dir. For Chemistry Initials_____
Comments: (First generic drug review)
NA Drug product meets compendial standards. Product consists of PEG 3350, there are no inactives. This active ingredient is a component of multiple approved ANDAs.

6. Peter Rickman Date 12/23/03
Director, DLPS Initials
Para.IV Patent Cert: Yes No ; Pending Legal Action: Yes No ; Petition: Yes No
Comments: Acceptable EES dated 12/1/03 (rec'd 12/22/03). No OAI. Labels noted by reviewer dated 10/1/03. Labeling found acceptable for tentative approval 12/8/03. CMC found acceptable 12/16/03. Methods validation was not requested for this ANDA. Methods for drug product are the same as those used for NDA 18983 (Colyte®) by Schwarz. Bioequivalence waiver granted under 21 CFR 320.22(b)(3). Office-level

6. Robert L. West Date 12/23/03
~~Acting~~ Deputy Director, OGD Initials
Para.IV Patent Cert: Yes No ; Pending Legal Action: Yes No ; Petition: Yes No
Comments: Schwarz Pharma made paragraph IV certifications to both the '183 (7/14/15) and '901 (4/20/19) patents. Schwarz was sued over the '183 patent only. Currently, there is no unexpired exclusivity. According to the labeling review, Schwarz's proposed proprietary name, Glycolax®, is acceptable to DMETS.

This ANDA is recommended for tentative approval. Patent infringement litigation is ongoing – 30-month period expires on 10/1/05 ('183 patent).

7. Gary Buehler Date 12/23/03
Director, OGD Initials GB
Comments:
First Generic Approval PD or Clinical for BE Special Scientific or Reg.Issue

8. Project Manager, Team Stan Shepperson Date_____
Review Support Branch Initials _____
NA Date PETS checked for first generic drug (just prior to notification to firm)
Applicant notification:
9 am Time notified of approval by phone 9:20 am Time approval letter faxed
FDA Notification:
12/23/03 Date e-mail message sent to "CDER-OGDAPPROVALS" distribution list.
12/23/03 Date Approval letter copied to \\CDS014\DRUGAPP\ directory.

OGD APPROVAL ROUTING SUMMARY

ANDA # 76-652 Applicant Schwarz Pharma, Inc
Drug Colyte Strength(s) 17g/scoopful

APPROVAL ☒ TENTATIVE APPROVAL ☐ SUPPLEMENTAL APPROVAL (NEW STRENGTH) ☐ OTHER ☐

REVIEWER:	DRAFT Package	FINAL Package
1. Martin Shimer Chief, Reg. Support Branch	Date 24 Nov 2004 Initials MMS	Date 7/2/04 for Initials

Contains GDEA certification: Yes ☑ No ☐ (required if sub after 6/1/92)
Determ. of Involvement? Yes ☐ No ☒
Pediatric Exclusivity System
RLD = NDA#
Patent/Exclusivity Certification: Yes ☑ No ☐
Date Checked
If Para. IV Certification- did applicant
Nothing Submitted ☐
Notify patent holder/NDA holder Yes ☑ No ☐
Written request issued ☐
Was applicant sued w/in 45 days: Yes ☑ No ☐
Study Submitted ☐
Has case been settled: Yes ☑ No ☐ Date settled:
Is applicant eligible for 180 day
Generic Drugs Exclusivity for each strength: Yes ☑ No ☐
Type of Letter: PIV to 1831-901. Sued on 1883. Suit dismissed by District court @ Braintree's
Comments: Request & waiver of 30 month stay. Schwarz's counterclaims dismissed as moot.

2. Project Manager, Stanley Shepperson Team 8 Review Support Branch	Date 6-21-04 Initials	Date Initials

Original Rec'd date 1-30-03
EER Status Pending ☐ Acceptable ☑ OAI ☐
Date Acceptable for Filing 1-31-03
Date of EER Status 4-19-04
Patent Certification (type) Para 4
Date of Office Bio Review 10-01-03
Date Patent/Exclus.expires 7-19-15/4-20-19
Date of Labeling Approv. Sum 6-25-04
Citizens' Petition/Legal Case Yes ☑ No ☐ Date of Sterility Assur. App. N/A
(If YES, attach email from PM to CP coord) Methods Val. Samples Pending Yes ☐ No ☑
First Generic Yes ☐ No ☒ MV Commitment Rcd. from Firm Yes ☑ No ☐
Acceptable Bio reviews tabbed Yes ☑ No ☐ Modified-release dosage form: Yes ☐ No ☑
Suitability Petition/Pediatric Waiver Interim Dissol. Specs in AP Ltr: Yes ☐ N/A
Pediatric Waiver Request Accepted ☐ Rejected ☐ Pending ☐

Previously reviewed and tentatively approved ☑ Date 12/23/03
Previously reviewed and CGMP def. /NA Minor issued ☐ Date
Comments:

3. David Read **(PP IVs Only)** Pre-MMA Language included ☐ NA OGD Regulatory Counsel, Post-MMA Language Included ☐ Comments: See MUBIMS		Date 6/28/04 Initials DTR

4. Div. Dir./Deputy Dir. Chemistry Div. I II OR III Comments:		Date 7/1/04 Initials

REVIEWER: **FINAL ACTION**

5. Frank Holcombe **First Generics Only** Date____________
Assoc. Dir. For Chemistry Initials________
Comments: (First generic drug review)
N/A. This ANDA was tentatively approved on 12/23/03

6. Vacant RLD= MiraLax 17g/scoopful NDA 20-698(001) Date____________
Deputy Dir., DLPS Braintree Laboratories, Inc. Initials________

7. Peter Rickman Date 7/2/04
Director, DLPS Initials [initials] for
Para.IV Patent Cert: Yes ☐ No ☐; Pending Legal Action: Yes ☐ No ☐; Petition: Yes☐ No☐
Comments: Acceptable EER dated 4/13/04 (Verified 7/2/04). No OAI Alerts noted. Refer to the administrative sign-off form completed at the time of the tentative approval issued 12/23/03. Since then, Schwarz has amended the ANDA to provide for an additional packaging site for the drug product and to submit FPL. Schwarz has also requested final approval for the ANDA based upon a licensing agreement with the NDA holder and dismissal of the '183 patent litigation. FPL found acceptable for approval 6/25/04. CMC found acceptable 6/28/04. Methods validation was not requested - same as methods used in approved NDA 18-983.

8. Robert L. West Date 7/2/2004
Deputy Director, OGD Initials [signature]
Para.IV Patent Cert: Yes☐ No☐; Pending Legal Action: Yes☐ No☐; Petition: Yes☐ No☐
Comments: Schwarz made paragraph IV certifications to both the '183 and '901 patents. Schwarz was sued only on the '183 patent. On 5/28/04 Schwarz informed the agency that Schwarz and Braintree entered into a licensing agreement with respect to the ongoing patent litigation. On 6/7/04 Schwarz provided documentation of a final, signed Stipulated Order of Dismissal and waiver by Braintree of any remaining portion of the 30-month stay. This ANDA is recommended for final approval.

9. Gary Buehler Date 7/2/04
Director, OGD Initials GB
Comments:
First Generic Approval ☒ PD or Clinical for BE ☐ Special Scientific or Reg.Issue ☐

10. Project Manager, Team Stan Shepperson Date 7-2-04
Review Support Branch Initials [initials]
N/A Date PETS checked for first generic drug (just prior to notification to firm)
Applicant notification:
1030 AM Time notified of approval by phone 10:45 am Time approval letter faxed
FDA Notification:
7/2/04 Date e-mail message sent to "CDER-OGDAPPROVALS" distribution list.
7/2/04 Date Approval letter copied to \\CDS014\DRUGAPP\ directory.

File V:/division/dlps/approvrou8.doc

CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

ANDA 76-652

CORRESPONDENCE

SCHWARZ

January 30, 2003

505(j)(2)(A)(i)
24-MAR-2003

Gary Buehler, Director
Office of Generic Drugs
CDER, FDA
Metro Park North II
7500 Standish Place, Room 150
Rockville, MD 20855-2773

RE: Original Abbreviated New Drug Application
polyethylene glycol 3350 — powder for solution

Dear Mr. Buehler:

Pursuant to 21 CFR § 314.94, Schwarz Pharma, Inc. (SPInc) herein submits an original ANDA for a generic version of Braintree Laboratories' NDA 20-698, MiraLax™ (polyethylene glycol 3350, NF powder for solution).

This submission consists of one volume and has been organized and provided in color-coded binders according to the Guidance for Industry, *Organization of an ANDA*, dated February 1999. Included is an archival copy (in a blue folder) that contains all required information and a technical review copy (in a red folder) which contains all the information in the archival copy with the exception of the Bioequivalence section (VI). A separate review copy of Sections I – VII is provided in an orange folder as bioavailability/bioequivalence information. The Bioequivalence section consists of a request for a biowaiver.

The applicant would like to request approval of the brand name "**GlycoLax™**" for the proposed drug product. The applicant requests OGD's assistance in forwarding this proposal to the Office of Postmarketing Drug Risk Assessment for consideration.

Two additional separately bound copies of Analytical Methods sections are included with this application. The applicant herein commits to resolve any issues identified in the methods validation process after approval.

This statement will certify that a full and complete copy of the technical sections of this application has been forwarded to the Detroit District Office of the Food and Drug Administration. If there are any questions regarding this submission, please contact Elizabeth Weil, Regulatory Affairs Manager, Schwarz Pharma, Inc., at 262-238-5225 (phone) or 262-238-0957 (fax).

Sincerely,

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs and Quality Assurance

RECEIVED
JAN 31 2003
OGD / CDER

ANDA 76-652

Schwarz Pharma, Inc.
Attention: Donna K. Multhauf
6140 W. Executive Drive
Mequon, WI 53092

MAR 27 2003

Dear Madam:

We acknowledge the receipt of your abbreviated new drug application submitted pursuant to Section 505(j) of the Federal Food, Drug and Cosmetic Act.

NAME OF DRUG: Polyethylene Glycol 3350 Powder for Oral Solution, 17 g\scoopful

DATE OF APPLICATION: January 30, 2003

DATE (RECEIVED) ACCEPTABLE FOR FILING: January 31, 2003

You have filed a Paragraph IV patent certification, in accordance with 21 CFR 314.94(a)(12)(i)(A)(4) and Section 505(j)(2)(A)(vii)(IV) of the Act. Please be aware that you need to comply with the notice requirements, as outlined below. In order to facilitate review of this application, we suggest that you follow the outlined procedures below:

CONTENTS OF THE NOTICE

You must cite section 505(j)(2)(B)(ii) of the Act in the notice and should include, but not be limited to, the information as described in 21 CFR 314.95(c).

SENDING THE NOTICE

In accordance with 21 CFR 314.95(a):

- Send notice by U.S. registered or certified mail with return receipt requested to each of the following:

  1) Each owner of the patent or the representative designated by the owner to receive the notice;

2) The holder of the approved application under section 505(b) of the Act for the listed drug claimed by the patent and for which the applicant is seeking approval.

3) An applicant may rely on another form of documentation only if FDA has agreed to such documentation in advance.

DOCUMENTATION OF NOTIFICATION/RECEIPT OF NOTICE

You must submit an amendment to this application with the following:

- In accordance with 21 CFR 314.95(b), provide a statement certifying that the notice has been provided to each person identified under 314.95(a) and that notice met the content requirements under 314.95(c).

- In accordance with 21 CFR 314.95(e), provide documentation of receipt of notice by providing a copy of the return receipt or a letter acknowledging receipt by each person provided the notice.

- A designation on the exterior of the envelope and above the body of the cover letter should clearly state "PATENT AMENDMENT". This amendment should be submitted to your application as soon as documentation of receipt by the patent owner and patent holder is received.

DOCUMENTATION OF LITIGATION/SETTLEMENT OUTCOME

You are requested to submit an amendment to this application that is plainly marked on the cover sheet "PATENT AMENDMENT" with the following:

- If litigation occurs within the 45-day period as provided for in section 505(j)(4)(B)(iii) of the Act, we ask that you provide a copy of the pertinent notification.

- Although 21 CFR 314.95(f) states that the FDA will presume the notice to be complete and sufficient, we ask that if you are not sued within the 45-day period, that you provide a letter immediately after the 45 day period elapses, stating that no legal action was taken by each person provided notice.

- You must submit a copy of a copy of a court order or judgement or a settlement agreement between the parties, whichever is applicable, or a licensing agreement between you and the patent holder, or any other relevant information. We ask that this information be submitted promptly to the application.

If you have further questions you may contact Gregory Davis, Chief, Regulatory Support Branch, at (301)827-5862.

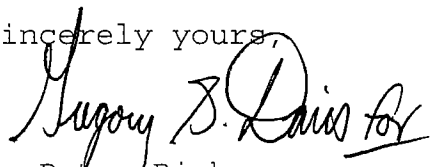
We will correspond with you further after we have had the opportunity to review the application.

Please identify any communications concerning this application with the ANDA number shown above.

Should you have questions concerning this application, contact:

Thomas Hinchliffe
Project Manager
(301) 827-5849

Sincerely yours,



Wm Peter Rickman
Director
Division of Labeling and Program Support
Office of Generic Drugs
Center for Drug Evaluation and Research

cc: ANDA 76-652
DUP/Jacket
Division File
Field Copy
HFD-610/R.West
HFD-610/P.Rickman
HFD-92
HFD-615/M.Bennett
HFD-600/

Endorsement: HFD-615/GDavis, Chief, RSB _____ date 24-MAR-2003
HFD-615/PPatel, CSO _____ date 3/24/03
Word File V:\Firmshz\Schwartz\ltrs&rev\76652.ACK
FT/EEH 03/24/03
ANDA Acknowledgment Letter!

APPEARS THIS WAY
ON ORIGINAL

SCHWARZ
PHARMA

April 14, 2003

Office of Generic Drugs
CDER, FDA
Metro Park North II
7500 Standish Place, Room 150
Rockville, MD 20855-2773

NEW CORRESP

RE: Amendment 001 to ANDA 76-652; GlycoLax™
polyethylene glycol 3350 — powder for solution

PATENT AMENDMENT

Dear Sir or Madam:

Please refer to our Abbreviated New Drug Application, dated January 30, 2003, for the above referenced product. In accordance with 21 CFR § 314.95(b), Schwarz Pharma Inc. (SPInc.) herein submits Amendment 001 to certify that the required notice of certification was provided to Braintree Laboratories, Inc. (Braintree), the sponsor of NDA 20-698, for MiraLax, the reference listed drug product, and the owner of U.S. patents No.5,710,183 and 6,048,901. Furthermore, the content of the notice met the requirements established in 21 CFR § 314.95(c). The certification letter was originally sent to Braintree on April 1, 2003.

Enclosed is a copy of the notice of certification with the attachment sent to Braintree. The attachment consists of the statement of the factual and legal basis of SPInc.'s opinion. Along with the certification is a copy of the mailing label and return receipt verifying that the delivery was received through the U.S. Postal Service for Braintree.

If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

SCHWARZ PHARMA, INC.

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs and Quality Assurance

RECEIVED
APR 15 2003
OGD / CDER

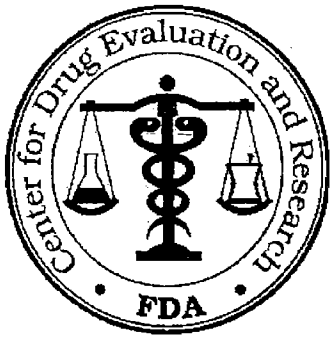
Mail P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone 262-238-9994 • Toll Free 800-558-5114 • Fax 262-238-0311
www.schwarzusa.com

MINOR AMENDMENT

ANDA 76-652

OFFICE OF GENERIC DRUGS, CDER, FDA
Document Control Room, Metro Park North II
7500 Standish Place, Room 150
Rockville, MD 20855-2773 (301-594-0320)

JUL 21 2003



APPLICANT: Schwarz Pharma, Inc. TEL: (262) 238-~~0957~~ 5225

ATTN: Donna K. Multhauf \ Elizabeth Wei \ FAX: (262) 238-0957

FROM: Stanley Shepperson PROJECT MANAGER: 301-827-5849

Dear Madam:

This facsimile is in reference to your abbreviated new drug application dated January 30, 2003, submitted pursuant to Section 505(j) of the Federal Food, Drug, and Cosmetic Act for Polyethylene Glycol 3350. — Powder for Oral Solution.

The application is deficient and, therefore, Not Approvable under Section 505 of the Act for the reasons provided in the attachments (2 pages). This facsimile is to be regarded as an official FDA communication and unless requested, a hard copy will not be mailed.

The file on this application is now closed. You are required to take an action described under 21 CFR 314.120 which will either amend or withdraw the application. Your amendment should respond to all of the deficiencies listed. Facsimiles or partial replies will not be considered for review, nor will the review clock be reactivated until all deficiencies have been addressed. The response to this facsimile will be considered to represent a MINOR AMENDMENT and will be reviewed according to current OGD policies and procedures. The designation as a MINOR AMENDMENT should appear prominently in your cover letter. You have been/will be notified in a separate communication from our Division of Bioequivalence of any deficiencies identified during our review of your bioequivalence data. If you have substantial disagreement with our reasons for not approving this application, you may request an opportunity for a hearing.

SPECIAL INSTRUCTIONS:
CMC comments included.

THIS DOCUMENT IS INTENDED ONLY FOR THE USE OF THE PARTY TO WHOM IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL, OR PROTECTED FROM DISCLOSURE UNDER APPLICABLE LAW.
If received by someone other than the addressee or a person authorized to deliver this document to the addressee, you are hereby notified that any disclosure, dissemination, copying, or other action to the content of this communication is not authorized. If you have received this document in error, please immediately notify us by telephone and return it to us by mail at the above address.

AD 7/21/03

JUL 21 2003

36. CHEMISTRY COMMENTS TO BE PROVIDED TO THE APPLICANT

ANDA#: 76-652
APPLICANT: Schwarz Pharma, Inc.
DRUG PRODUCT: Polyethylene Glycol 3350 — Powder for Oral Solution

The deficiencies presented below represent MINOR deficiencies.

A. Chemistry Deficiencies:

1.

2.

3.

B. In addition to responding to the deficiencies presented above, please note and acknowledge the following comments in your response:

1. Please submit available long-term stability data.

2. The bioequivalency review is pending. We may request additional revisions and data upon completion of this review.

Sincerely yours,

Florence S. Fang
Director
Division of Chemistry II
Office of Generic Drugs
Center for Drug Evaluation and Research

APPEARS THIS WAY
ON ORIGINAL

SCHWARZ
PHARMA

NEW CORRESP

(DC)

July 22, 2003

Office of Generic Drugs
CDER, FDA
Metro Park North II
7500 Standish Place, Room 150
Rockville, MD 20855-2773

RE: ANDA 76-652; GlycoLax™
polyethylene glycol 3350 — powder for solution

INTENT TO AMEND

Dear Sir/Madam:

Reference is made to the Agency not approvable letter dated July 21, 2003 regarding the above-referenced ANDA and received by Schwarz Pharma, Inc. (SPInc) on July 22, 2003. Pursuant to 21 CFR §314.120, SPInc hereby notifies the Agency of its intent to amend the application by providing a full response to all deficiencies addressed in the letter.

If you have any questions regarding this correspondence, please contact Elizabeth Weil, Manager, Regulatory Affairs, at (262) 238-5225.

Sincerely,

SCHWARZ PHARMA, INC.

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs and Quality Assurance

RECEIVED
JUL 24 2003
OGD/CDER

Schwarz Pharma, Inc.
Mail: P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone: 262 238-9994 • Toll Free: 800 558-5114 • Fax: 262 238-0311 • www.schwarzusa.com

SCHWARZ
PHARMA

August 18, 2003

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Generic Drugs (HFD-600)
Metro Park North II
Document Control Room 150
7500 Standish Place
Rockville, MD 20855-2773

ORIG AMENDMENT
N / AM

RE: Amendment 002 to ANDA 76-652; GlycoLax™
(Polyethylene Glycol 3350, Powder for Oral Solution)

MINOR AMENDMENT
Response to CMC Deficiency Letter

Dear Sir/Madam:

Reference is made to ANDA 76-652, submitted January 30, 2003, and to the Agency's Minor Deficiency letter dated July 21, 2003.

SPInc herein submits a full and complete response to all items listed in the deficiency letter. To assist in the review of this submission, all Agency comments are reprinted in full and in bold type, with the sponsor's point-by-point responses following. For additional reference, a copy of the Agency's Minor Deficiency letter, dated July 21, 2003, is included.

Additionally, since the submission date, some minor CMC changes have taken place to one general method and one packaging material specification. The CMC change to the general method occurred because other application products share that same general method; these changes were deemed annually reportable for the marketed products. The packaging material specification was revised to reflect ——— ——————————. These documents are also included in this submission.

This statement will verify that a full and complete copy of this submission has been provided to the Detroit District Office of the FDA. If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs

RECEIVED
AUG 19 2003
OGD/CDER

Schwarz Pharma, Inc.
Mail: P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone: 262 238-9994 • Toll Free: 800 558-5114 • Fax: 262 238-0311 • www.schwarzusa.com

SCHWARZ
PHARMA

NEW CORRESP
NC

September 10, 2003

Office of Generic Drugs
CDER, FDA
Metro Park North II
7500 Standish Place, Room 150
Rockville, MD 20855-2773

RE: Amendment 003 to ANDA 76-652; GlycoLax™
(Polyethylene Glycol 3350 Powder for Oral Solution)

PATENT AMENDMENT

Dear Sir or Madam:

Reference is made to ANDA 76-652, submitted January 30, 2003 and to Amendment 001 submitted April 14, 2003, to certify that the required notice of certification was provided to Braintree Laboratories, Inc. (Braintree), the sponsor of NDA 20-698, for MiraLax, the reference listed drug product, and the owner of U.S. patents No. 5,710,183 and 6,048,901.

Schwarz Pharma Inc. (SPInc) herein submits Amendment 003 to provide notice that SPInc was served a Summons (Attachment 1) by Braintree for patent infringement of U.S. patent No. 5,710,183 on September 8, 2003.

If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

SCHWARZ PHARMA, INC.

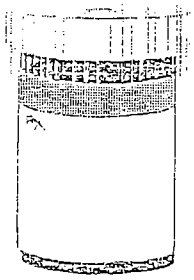
Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs

RECEIVED
SEP 11 2003
OGD/OGDER

Schwarz Pharma, Inc.
Mail: P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone: 262.238.9994 • Toll Free: 800.558.5114 • Fax: 262.238.0311 • www.schwarzusa.com

FAX COVER SHEET



Department of Health and Human Services
Public Health Service
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Generic Drugs
Rockville, Maryland

Date: October 17, 2003

TO: Sherry Godin - Schwarz

Phone: 262-238-5233 Fax: 262-238-0957

From: Adolph Vezza - Labeling Review Branch

Phone: (301) 827-5846 Fax: (301) 443-3847

Number of Pages: 3
(Including Cover Sheet)

Comments: refaxed to firm 10/17/03 per firm's request

This document is intended only for the use of the party to whom it is addressed and may contain information that is privileged, confidential, and protected from disclosure under applicable law. If you are not the addressee, or a person authorized to deliver the document to the addressee, this communication is not authorized. If you have received this document in error, please immediately notify us by telephone and return it to us at the above address by mail. Thank you.

REVIEW OF PROFESSIONAL LABELING
DIVISION OF LABELING AND PROGRAM SUPPORT
LABELING REVIEW BRANCH

ANDA Number: **76-652** Date of Submission: **January 31, 2003**

Applicant's Name: **Schwarz Pharma, Inc.**

Established Name: **Polyethylene Glycol 3350 Powder for Oral Solution, 17 g/scoopful**

Labeling Deficiencies:

1. GENERAL COMMENTS

   a. Your proposed proprietary name, "GlycoLax", has been submitted to the Division of Medication Errors and Technical Support (DMETS) for their review and comments. We will inform you of their findings when they become available. We will not request labels and labeling in final print until resolution of the acceptability of the proposed proprietary name.

   b. The established name for this drug product is "Polyethylene Glycol 3350 Powder for Oral Solution". Revise your labels and labeling accordingly.

   c. Revise your storage temperature recommendation throughout your labels and labeling as follows:

      Store at 20° - 25°C (68° - 77°F); excursions permitted between 15° - 30° C (59° - 86° F) [See USP Controlled Room Temperature].

2. CONTAINER 255 gram and 527 gram bottles

   a. Please describe how the professional prescribing information and the patient information will accompany the drug product.

   b. See GENERAL COMMENTS above.

   c. Delete ———

   d. Please note that when final printed labeling is submitted it must be true size, color and text as it will appear in the marketplace.

3. PACKET 17 gram

   See GENERAL COMMENTS above.

4. CARTON 14s (7 x 2s)

   a. You have submitted carton labeling which does not include the text that will appear on it. Please submit. We refer you to the second sentence of comment (2) (a) under CONTAINER above.

   b. See GENERAL COMMENTS above.

   c. Delete ———

   d. Include the company address in association with the company name somewhere on the carton labeling.

5. PROFESSIONAL INSERT

a. See GENERAL COMMENTS above.

b. DESCRIPTION

First line

i. Delete —

ii. "... powder for oral solution) ..."

c. CLINICAL PHARMACOLOGY

i. Fourth sentence - "*In vitro*" [*italics*]

ii. "CLINICAL TRIALS" is a section heading and should be of the same prominence as the other section headings.

d. HOW SUPPLIED

Include the established name in association with the proprietary name in this section.

6. PATIENT INFORMATION

a. First paragraph, first line - "... 3350 powder for oral solution) is ..."

b. Include the company name and address.

Please revise your labels and labeling, as instructed above, and submit 4 draft copies of each labeling piece. We will not request labels and labeling in final print until resolution of the proprietary name issue. If draft labeling is provided, please be advised that you will be required to submit 12 final printed copies of all labels and labeling at least 60 days prior to full approval of this application. In addition, you should be aware that color and other factors (print size, prominence, etc.) in final printed labeling could be found unacceptable and that further changes might be requested prior to approval.

Prior to approval, it may be necessary to revise your labeling subsequent to approved changes for the reference listed drug. In order to keep ANDA labeling current, we suggest that you subscribe to the daily or weekly updates of new documents posted on the CDER web site at the following address -

http://www.fda.gov/cder/cdernew/listserv.html

To facilitate review of your next submission, please provide a side-by-side comparison of your proposed labeling with your last submission with all differences annotated and explained.

Wm. Peter Rickman
Director
Division of Labeling and Program Support
Office of Generic Drugs
Center for Drug Evaluation and Research

labeling review drafted 12/2/03 A. Vezza

SCHWARZ PHARMA

October 17, 2003

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Generic Drugs (HFD-600)
Metro Park North II
Document Control Room 150
7500 Standish Place
Rockville, MD 20855-2773

ORIG AMENDMENT
N/AF (DRAFT)

RE: Amendment 004 to ANDA 76-652; GlycoLax™
(Polyethylene Glycol 3350 Powder for Oral Solution)

MINOR AMENDMENT
Response to Labeling Deficiency Letter

Dear Sir/Madam:

Reference is made to the labeling deficiency letter faxed to Schwarz Pharma, Inc. (SPInc) on August 8, 2003, regarding the above-referenced ANDA. Reference is further made to the September 18 and September 23, 2003, telephone calls between Adolph Vezza, Labeling Reviewer, and Elizabeth Weil, Manager, Regulatory Affairs, SPInc. SPInc herein submits Amendment 004 to provide revised labeling incorporating the changes requested in the August 8, 2003, letter. For ease of review, a copy of the Agency letter that was originally faxed on August 8, 2003 is also included in this submission. Please note the letter contains the completed signature page that was faxed to SPInc on October 17, 2003.

Enclosed are 4 draft copies of each labeling piece. Also provided, to facilitate review, are side-by-side comparisons of proposed labeling with the last submitted labeling with all differences annotated and explained. The professional prescribing information and the patient information are in the form of a booklet label for the 255 g and 527 g bottles. The cartons that contain the 17 g packets have the same professional and patient information, but the information appears on the right and left carton panels. Please note that the company name has been changed from Schwarz Pharma to Kremers Urban, Inc. (KU). KU markets and sells SPInc's generic products. The label design and logo have changed to reflect the style of KU labeling. A desk copy is also being included for the labeling reviewer as requested in the August 8 fax.

SPInc is aware of the requirement to submit 12 final printed copies of all labels and labeling pieces at least 60 days prior to full approval of the application as outlined in the August 8 fax. On September 18, SPInc contacted the Agency with a request to submit printer's proofs in lieu of final printed labeling (FPL) for the booklet labels due to very long lead times. SPInc stated that they would submit FPL post-approval prior to launch. On September 23, 2003, the Agency agreed to accept final printer proofs as FPL provided they are an exact representation of the labeling pieces.

If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

Donna Multhauf

Donna K. Multhauf
Director
Regulatory Affairs

RECEIVED
OCT 20 2003
OGD/CDER

Schwarz Pharma, Inc.
Mail: P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone: 262 238 9994 • Toll Free: 800 558 5114 • Fax: 262 238 0311 • www.schwarzus2.com

SCHWARZ
PHARMA

Labeling review
Drafted 1/7/04
A. Vezza

December 23, 2003

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Generic Drugs (HFD-600)
Metro Park North II
Document Control Room 150
7500 Standish Place
Rockville, MD 20855-2773

RE: ANDA 76-652; GlycoLax™
(Polyethyleneglycol 3350 Powder for Oral Solution)

Amendment 005 – Final Printed Labeling
Submission of Printer's Proofs

Dear Sir/Madam:

Reference is made to the above-referenced ANDA and to the September 18, 2003, September 23, 2003, and December 2, 2003 telephone calls between Adolph Vezza, Labeling Reviewer, and Elizabeth Weil, Manager, Regulatory Affairs, SPInc.

On September 18, SPInc contacted the Agency with a request to submit printer's proofs in lieu of final printed labeling (FPL) for the booklet labels due to very long lead times. SPInc stated that they would submit FPL post-approval prior to launch. On September 23, 2003, the Agency agreed to accept final printer proofs as FPL provided they are an exact representation of the labeling pieces (exact in color, size, format, including being printed front and back). On December 2, 2003, the Agency further confirmed that printer's proofs would be acceptable for submission.

Therefore, SPInc herein submits Amendment 005 to provide printer's proofs of GlycoLax labeling. Enclosed please find 12 copies of each labeling piece:

- PCL 4554: Booklet label for 255 gram bottle;
- PCL 4555: Booklet label for 527 gram bottle;
- L4556: 17 gram packet label and
- CR4557: Carton label.

If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

SCHWARZ PHARMA, INC.

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs

RECEIVED
DEC 2 4 2003
OGD / CDER

Schwarz Pharma, Inc.
Mail: P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone: 262 238-9994 • Toll Free: 800 558-5114 • Fax: 262 238-0311 • www.schwarzusa.com

EER submitted
4/16/04
A Shepperson

SCHWARZ
PHARMA

April 12, 2004

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Generic Drugs (HFD-600)
Metro Park North II
Document Control Room 150
7500 Standish Place
Rockville, MD 20855-2773

ORIG AMENDMENT
N/am

RE: ANDA 76-652; GlycoLax™
(Polyethylene Glycol 3350, Powder for Oral Solution)

Minor Amendment
Alternate Packaging/Filling Site

Dear Sir/Madam:

Reference is made to ANDA 76-652; to the March 8, 2004, telephone conversation between Stan Shepperson, Project Manager, Office of Generic Drugs (OGD) and Elizabeth Weil, Regulatory Affairs Manger, Schwarz Pharma Inc. (SPInc.); and to the March 11, 2004, telephone communication between Adolph Vezza, Labeling Reviewer, OGD and Elizabeth Weil, Regulatory Affairs Manger, SPInc., regarding a change to the filling/packaging site for GlycoLax.

GlycoLax, ANDA 76-652, was tentatively approved December 23, 2003. It is a drug product consisting of one ingredient (drug substance), polyethylene glycol 3350 (PEG 3350). There is no further processing done to the drug substance prior to filling. The tentatively approved packaging site for the drug product under this application is ——in ——————————. —— fills the PEG 3350 into 16 ounce bottles containing 255 grams, 24 ounce bottles containing 527 grams and 17 gram packets (foil pouches). SPInc would like Schwarz Pharma Manufacturing, Inc. (SPMI), the tentatively approved analytical testing site, in Seymour, IN, to be added as a bottle packaging site. SPMI will not package the 17 gram foil pouches. —— will remain an alternate bottle packager and will continue to package the foil pouches.

SPInc discussed this packaging site change with the Agency in the aforementioned telephone conversation on March 8, 2004. SPInc proposed that stability data would not be necessary for this change. SPInc proposed a standard stability commitment of long-term stability studies in accordance with the approved stability protocol on the first production batch of drug product produced from a production batch of drug substance manufactured at the new site.[1] SPInc also proposed that the current tentatively approved expiration dating period would remain at 24 months.

[1] Stability draft guidance, pg. 88, Site Change for Drug Substance; per this guidance, a packaging site change for other than solid oral dosage form products is considered a manufacturing site change (Section IX.C.2).

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APR 13 2004
OGD / CDER

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Mail: P.O. Box 2038 • Milwaukee, WI 53201-2038 • 6140 West Executive Dr. • Mequon, WI 53092-4467
Telephone: 262 238-9994 • Toll Free: 800 558-5114 • Fax: 262 238-0311 • www.schwarzusa.com

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The Agency agreed that this proposal should be acceptable and requested that SPInc reference in the amendment where the stability data was previously submitted. The Agency further commented that the submission would be a minor amendment.

Per a previous discussion on September 23, 2003, permission was received to submit printer's proofs in lieu of final printed labeling (FPL); it was agreed that FPL could be submitted post-approval prior to launch. On December 23, 2003, printer's proofs were submitted to the Agency. The change of the packaging/manufacturing site to the SPMI facility necessitates minor editorial changes (no content changes) to the labeling. On March 11, 2004, SPInc contacted the Agency regarding the changes which are as follows:

- due to packaging equipment needs, the control number and expiration date are to be moved to an end on the label and
- the labeling has two barcodes, one UPC and one for the resource number; the barcode for the resource number would be removed because it is not needed.

The Agency responded that, as long as there is no substance change or changes in prominence, it would be acceptable to add these minor changes to the FPL. Therefore, no labeling would be required in this amendment.

Therefore, pursuant to 21 CFR § 314.96, SPInc submits this amendment to add SPMI, the tentatively approved analytical testing site, as a bottle packaging site. SPMI will not package the 17 gram foil pouches. —— will remain an alternate bottle packager and will continue to package the foil pouches.

This statement will certify that a true and complete copy of this supplement has been provided to the Detroit District Office of the FDA. If there are any questions regarding this correspondence, please contact Elizabeth Weil, Manager, Regulatory Affairs, at 262-238-5225 (FAX 262-238-0957).

Sincerely,

SCHWARZ PHARMA, INC.

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs

ORIGINAL

3.1

SCHWARZ PHARMA

May 25, 2004

Food and Drug Administration
Center for Drug Evaluation and Research
Office of Generic Drugs (HFD-600)
Metro Park North II
Document Control Room 150
7500 Standish Place
Rockville, MD 20855-2773

ORIG AMENDMENT
N/AM

RE: **ANDA 76-652; GlycoLax™**
(Polyethylene Glycol 3350, Powder for Oral Solution)

AMENDMENT 001 to AMENDMENT 006 (dated April 12, 2004)
Alternate Packaging/Filling Site

Dear Sir/Madam:

Reference is made to the above-listed ANDA 76-652 and to Amendment 006, the Alternate Packaging/Filling Site which was submitted on April 12, 2004. Reference is also made to a telephone call between Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. (SPInc) and Peter Chen, Project Manager, Office of Generic Drugs (OGD) on May 20, 2004, in which SPInc requested an update as to the review status of Amendment 006. SPInc was informed that review had not begun on the amendment but that it was estimated to be completed in 2-3 weeks from the date of the conversation, which was May 20, 2004. Therefore, SPInc herein submits the following packaging batch records to provide further information for the review of Amendment 006:

- GlycoLax, 255 g (15 doses), Document Number 442A15.00
- GlycoLax, 527 g (31 doses), Document Number 442A31.00

Please note that the packaging records indicate the customer name as Kremers Urban. Kremers Urban markets and sells SPInc's generic products.

This statement will certify that a true and complete copy of this amendment has been provided to the Detroit District Office of the FDA. If there are any questions regarding this correspondence, please contact Elizabeth Weil, Manager, Regulatory Affairs, at 262-238-5225 (FAX 262-238-0957).

Sincerely,

SCHWARZ PHARMA, INC.

Elizabeth Weil

Donna K. Multhauf
Director
Regulatory Affairs

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MAY 26 2004
OGD/CDER

Schwarz Pharma, Inc.
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May 28, 2004

ORIG AMENDMENT
N/AM

Office of Generic Drugs
Center for Drug Evaluation and Research
Food and Drug Administration
MPN2, HFD-600
7500 Standish Place, Room 150
Rockville, MD 20855

RE: **ANDA 76-652; GlycoLax™**
(Polyethylene Glycol 3350 Powder for Oral Solution)

Minor Amendment – Final Approval Requested

Dear Sir/Madam:

Reference is made to above-listed ANDA 76-652; to the **Tentative Approval** letter received December 23, 2003; to Amendment 005 submitted on December 23, 2003, wherein final printed labeling pieces were submitted; to Amendment 006, submitted on April 12, 2004, which provided for an additional bottle packaging site; and to a fax dated December 8, 2003, which indicated some minor labeling revisions to be added post-approval. A copy of the December 23, 2003 Tentative Approval letter and the December 8, 2003 fax is included in this submission as Attachment 1 and Attachment 2, respectively. Reference is further made to a March 11, 2004 telephone conversation between Adolph Vezza, Labeling Reviewer, Office of Generic Drugs (OGD) and Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. (SPInc), in which SPInc contacted the Agency regarding further minor editorial changes (no content changes) as a result of Amendment 006; to a May 20, 2004 telephone conversation between Peter Chen, Project Manager, OGD and Elizabeth Weil, Manager, Regulatory Affairs, SPInc, whereby SPInc requested an update as to the review status of Amendment 006; and to Amendment 001 to Amendment 006, submitted May 25, 2004, which provided master packaging batch records to Amendment 006.

Per the instructions in the Tentative Approval letter, the sponsor herein submits a Minor Amendment – Final Approval Requested with information required by the Agency before final approval can be granted. Specific items that need to be included are herein printed in bold, followed by SPInc's responses.

This amendment provides:

1. **An explanation for the reason(s) you believe the ANDA is eligible for final approval including a copy of a court order, settlement agreement between the parties, licensing agreement, or any other relevant information as applicable.**

   Response: As provided in Amendment 003 to ANDA 76-652 submitted on September 10, 2003, Braintree Laboratories, Inc. did not bring an infringement action against Schwarz Pharma, Inc. on the 6,048,901 patent within the 45-day period, or at any other time. Included in Attachment 3 hereto is a letter dated May 21, 2004, written

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by ——— , Braintree Laboratories' outside litigation counsel at ——— This letter extends a ——— license without condition under claim 33 of the '183 patent (which is the only claim and patent which is the subject of the pending suit) to Schwarz Pharma and confirms Braintree Laboratories' intention to file a motion to dismiss its claims of patent infringement with prejudice in Civil Action No. 03-477-SLR. Provided in Attachment 4 is a copy of Braintree Laboratories' Motion to Dismiss Civil Action No. 03-477-SLR filed on May 27, 2004. The final order granting this Motion to Dismiss is expected to be entered in approximately one week to ten days time. These documents confirm Braintree Laboratories' intention that Civil Action No. 03-477-SLR be dismissed with prejudice, thereby demonstrating that Braintree no longer contends that Schwarz Pharma infringes and thereby waiving any remaining portion of the 30 month stay applying to Schwarz Pharma ANDA 76-652, and allowing Schwarz Pharma to gain final approval thereof.

2. **The agency is assured there is no new information that would affect whether final approval should be granted.**

Response: Per the Agency's tentative approval letter, the sponsor has identified minor changes that occurred in CMC information and the following documents are provided as an update:

a) Final Printed Labeling

The final printed labeling listed below is being submitted in electronic format on one CD-ROM which is being sent directly to the Office of Generic Drugs; the electronic submission is virus free as Symantec AntiVirus Corporate Edition, 5/26/2004, rev. 21, was used to check the files for viruses:

Packaging at ———

- PCL 4554: Booklet label for 255 gram bottle
- PCL 4555: Booklet label for 527 gram bottle;
- L4556A: 17 gram packet label and
- CR4557A: Carton label.

Packaging at SPMI

- PCL 4554A: Booklet label for 255 gram bottle;
- PCL 4555A: Booklet label for 527 gram bottle.

Amendment 005 submitted on December 23, 2003, provided final printed labeling pieces, as printer's proofs. Amendment 006, submitted on April 12, 2004, provided for the addition of Schwarz Pharma Manufacturing, Inc. (SPMI) as an additional bottle packaging site. A December 8, 2003 fax from the labeling reviewer indicated the following minor revisions to be added post-approval:

- change "tablespoon" to "tablespoonful"
- Add to the last line of the Patient Information section "product" so that the sentence reads "If you are allergic to polyethylene glycol, do not use this drug product."

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The above revisions were added to both bottle label pieces for product that is filled at SPMI and to the carton (which holds the 17 gram packets that are filled at ——). The final printed labeling pieces for both bottle labels for product that is filled at —— are identical to the printer's proofs submitted in Amendment 005, i.e. without the December 8, 2003, changes. The minor post-approval changes per the December 8, 2003, fax will be made to these bottle labels the next time they are revised post-approval.

On March 11, 2004, SPInc contacted the Agency regarding further minor editorial changes (no content changes) as a result of Amendment 006:

- due to packaging equipment needs, the control number and expiration date are to be moved to an end on the label; and
- the labeling has two barcodes, one UPC and one for the resource number; the barcode for the resource number would be removed because it is not needed.

The Agency responded that, as long as there is no substance change or changes in prominence, it would be acceptable to add these minor changes to the FPL.

b) Stability

As the stability protocol has passed another stability time-point between the tentative approval and this request for final approval, the following stability time-points are herein included:

- 18M CRT foil pouches packaged at ——
- 18M CRT for both bottle sizes packaged at ——

As a reminder, on April 12, 2004, SPInc submitted Amendment 006 which provided for an Alternate Packaging/Filling Site. On May 25, 2004, SPInc submitted an amendment to Amendment 006 which provided master packaging batch records to supply further information for the review of the packaging site change.

This statement will verify that the CMC section of this submission has been provided to the Detroit District Office of the FDA. If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

SCHWARZ PHARMA, INC.

Donna K. Multhauf
Director
Regulatory Affairs

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Dismissal Letter of CA: 03-477-SLR

June 7, 2004

Office of Generic Drugs
Center for Drug Evaluation and Research
Food and Drug Administration
MPN2, HFD-600
7500 Standish Place, Room 150
Rockville, MD 20855

ORIG AMENDMENT
N/AM

RE: **ANDA 76-652; GlycoLax™**
(Polyethylene Glycol 3350 Powder for Oral Solution)

Minor Amendment – Additional Information for Final Approval Request

Dear Sir/Madam:

Reference is made to above-listed ANDA 76-652; to the **Tentative Approval** letter received December 23, 2003, and to the **Minor Amendment – Final Approval Requested** submitted May 28, 2004.

Provided in the May 28, 2004, minor amendment, Final Approval Requested, was a copy of Braintree Laboratories' Motion to Dismiss Civil Action No. 03-477-SLR filed on May 27, 2004. Schwarz Pharma, Inc. (SPInc) stated in that amendment that the final order granting this Motion to Dismiss was expected to be entered in approximately one week to ten days time. Included in this amendment is the final, signed Stipulated Order of Dismissal. This document dismisses Braintree Laboratories' Civil Action No. 03-477-SLR with prejudice, and notes that Braintree waives any remaining portion of the 30-month stay applying to SPInc's ANDA 76-652, thereby allowing SPInc to gain final approval.

If there are any questions regarding this submission, please contact Elizabeth Weil, Manager, Regulatory Affairs, Schwarz Pharma, Inc. at (262) 238-5225 or by fax at (262) 238-0957.

Sincerely,

SCHWARZ PHARMA, INC.

Elizabeth Weil for

Donna K. Multhauf
Director
Regulatory Affairs

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JUN 08 2004
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