

NDA 83-483

Sidmak Laboratories, Inc.
Attention: Satish Patel, Ph.D.
17 West Street
P.O. Box 371
East Hanover, NJ 07936

Gentlemen:

Reference is made to your abbreviated new drug application submitted pursuant to Section 505(b) of the Federal Food, Drug, and Cosmetic Act for Disulfiram Tablets, 500 mg.

Reference is also made to your communication dated December 2, 1983.

We have completed the review of this abbreviated new drug application and have concluded that the drug is safe and effective for use as recommended in the submitted labeling. Accordingly, the application is approved.

Any significant change in the conditions outlined in this abbreviated new drug application requires an approved supplemental application before the change may be made, except for changes made in conformance with other provisions of Section 314.8 of the new drug regulations.

This Administration should be advised of any change in the marketing status of this drug.

The requirement for adequate data to assure the biologic availability is being deferred at the present time. However, our action in approving this application is based upon an understanding that if this requirement is reinstated you will perform the appropriate procedures.

For Initial Campaigns: We request that you submit, in duplicate, any proposed advertising or promotional copy which you intend to use in your immediate advertising or promotional campaigns. Please submit all proposed materials in draft or mock-up form, not final print. Submit both copies together with a copy of the proposed or final printed labeling to the Division of Drug Advertising and Labeling (HFN-240). Also, please do not use Form FD-2253 for this submission.

For Subsequent Campaigns: We call your attention to Regulation 21 CFR 310.300(b)(3) which requires that all material for any subsequent advertising or promotional campaigns at the time of their initial use be submitted to our Division of Drug Advertising and Labeling (HFN-240) with a completed Form FD-2253. A copy of Form FD-2253 is enclosed for your convenience.

The enclosures summarize the conditions relating to the approval of this application.

Sincerely yours,
Marvin Seife 12/8/83
Marvin Seife, M.D.
Director
Division of Generic Drugs
Office of Drug Standards
National Center for Drugs and Biologics

Enclosures:
Conditions of Approval of a New Drug Application
Records & Reports Requirements
Form FD 2253

cc: NWK-DO
HFN-530
HFN-5
HFN-313
HFN-616
KJohnson/JMeyer/CChanr
R/D INITIAL JMeyer/MSeife
mm:12/7/83 (3437c)
Approval

12/7/83

12-7-83

Sm

12-7-83

DEC 8 1982
NDC 50111-332-01

**Disulfiram Tablets
USP 500mg**

Each tablet contains:
Disulfiram USP 500mg.

CAUTION: Federal (USA) law prohibits
dispensing without prescription

100 Tablets

Usual dosage and complete prescribing information: See accompanying literature.

Store at controlled room temperature 15° to 30°C (59° to 86°F).

This is a bulk package. Dispense contents with child-resistant closure (as required) and in tight, light resistant container as defined in the USP/NF.

Keep tightly closed.

Keep this and all medication out of the reach of children.



Control No:
Exp. Date:

DEC 5 1983
NDC 50111-332-02

**Disulfiram Tablets
USP 500mg**

Each tablet contains:
Disulfiram USP 500mg.

CAUTION: Federal (USA) law prohibits
dispensing without prescription

500 Tablets

5° to 30°C

Usual dosage and complete prescribing information: See accompanying literature.

Store at controlled room temperature 15° to 30°C (59° to 86°F).

This is a bulk package. Dispense contents with child-resistant closure (as required) and in tight, light resistant container as defined in the USP/NF.

Keep tightly closed.

Keep this and all medication out of the reach of children.



Control No:
Exp. Date:

50111-331
50111-332

DISULFIRAM TABLETS USP

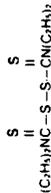
CAUTION: Federal law prohibits dispensing without prescription.

WARNING: Disulfiram should never be administered to a patient when he is in a state of alcohol intoxication or without his full knowledge.
The physician should instruct relatives accordingly.

DEC 8 1983

APPROVED

DESCRIPTION: CHEMICAL NAME: bis(dithiolthiocarbamoyl) disulfide
STRUCTURAL FORMULA:



Disulfiram occurs as a white to offwhite, odorless, and almost tasteless powder, soluble in water to the extent of about 20 mg in 100 ml, and in alcohol to the extent of about 3.8 Gm. in 100 ml

ACTION: Disulfiram produces a sensitivity to alcohol which results in a highly unpleasant reaction when the patient under treatment ingests even small amounts of alcohol.

Disulfiram blocks the oxidation of alcohol at the acetaldehyde stage. During alcohol metabolism after Disulfiram intake, the concentration of acetaldehyde occurring in the blood may be 5 to 10 times higher than that found during metabolism of the same amount of alcohol alone.

Accumulation of acetaldehyde in the blood produces the complex of highly unpleasant symptoms referred to hereinafter as the Disulfiram-alcohol reaction. This reaction which is proportional to the dosage of both Disulfiram and alcohol, will persist as long as alcohol is being metabolized. Disulfiram does not appear to influence the rate of alcohol elimination from the body.

Disulfiram is slowly absorbed from the gastrointestinal tract and is slowly eliminated from the body. One (or even two) weeks after a patient has taken his last dose of Disulfiram, ingestion of alcohol may produce unpleasant symptoms. Prolonged administration of Disulfiram does not produce tolerance; the longer a patient remains on therapy, the more exquisitely sensitive he becomes to alcohol.

INDICATIONS: Disulfiram is an aid in the management of selected chronic alcohol patients who want to remain in a state of enforced sobriety so that supportive and psychotherapeutic treatment may be applied to best advantage. (Used alone without proper motivation and without supportive therapy, Disulfiram is not a cure for alcoholism, and it is unlikely that it will have more than a brief effect on the drinking pattern of the chronic alcoholic.)

DURATION OF THERAPY: The daily, uninterrupted administration of Disulfiram must be continued until the patient is fully recovered socially and a basis for permanent self-control is established. Depending on the individual patient, maintenance therapy may be required for months or even years.

TRIAL WITH ALCOHOL: During early experience with Disulfiram, it was thought advisable for each patient to have at least one supervised alcohol-drug reaction. More recently, the test reaction has been largely abandoned. Furthermore, it should never be administered to a patient over 50 years of age. A clear, detailed, and convincing description of the reaction is felt to be sufficient in most cases.

However, where a test reaction is deemed necessary, the suggested procedure is as follows:
After the first one to two weeks therapy with 500 mg. daily, a drink of 15 cc (1/2 oz.) of 100 proof whiskey or equivalent is taken slowly. This test dose of alcoholic beverage may be repeated once only so that the total dose does not exceed 30 cc (1 oz.) of whiskey. Once a reaction develops, no more alcohol should be consumed. Such tests should be carried out only when the patient is hospitalized, or comparable supervision of facilities, including oxygen, are available.

MANAGEMENT OF DISULFIRAM-ALCOHOL REACTION: In severe reactions, whether caused by an excessive test dose or by the patient's unsupervised ingestion of alcohol, supportive measures to restore blood pressure and treat shock should be instituted. Other recommendations include: oxygen, carbogen (95 per cent oxygen and 5 per cent carbon dioxide), vitamin C intravenously in massive doses (1 Gm.) and ephedrine sulfate. Antihistamines have also been used intravenously. Potassium levels should be monitored particularly in patients on digitalis since hypokalemia has been reported.

HOW SUPPLIED: As white, round, unscored, compressed tablet, impressed with SL 331, containing 250 mg. of Disulfiram, in bottles of 100 and 1000 tablets.

NDC #50111-331-01, bottle of 100 tablets
NDC #50111-331-02, bottle of 500 tablets

As white, round, unscored, compressed tablet, impressed with SL 332, containing 500 mg. of Disulfiram, in bottles of 100 and 500 tablets.

NDC #50111-332-01, bottle of 100 tablets
NDC #50111-332-03, bottle of 1000 tablets

Manufactured by
SIDMAK LABORATORIES, INC.
17 West St.
East Hanover, N. J. 07936

Revised: 11/83

CONTRAINDICATIONS: Patients who are receiving or have recently received metronidazole, paraldehyde, alcohol, or alcohol-containing preparations, e.g. cough syrups, tonics, and the like should not be given Disulfiram. Disulfiram is contraindicated in the presence of severe myocardial disease or coronary occlusion, psychoses, or hypersensitivity.

WARNINGS:

Disulfiram should never be administered to a patient when he is in a state of alcohol intoxication or without his full knowledge.
The physicians should instruct relatives accordingly.

The patient must be fully informed of the Disulfiram-alcohol reaction. He must be strongly cautioned against surreptitious drinking while taking the drug, and he must be fully aware of possible consequences. He should be warned to avoid possible consequences. He should be warned to avoid alcohol in disguised forms, i.e. in sauces, vinegars, cough mixtures, and even after shave lotions and back rubs. He should also be warned that reactions may occur with alcohol up to 14 days after ingesting Disulfiram.

THE DISULFIRAM-ALCOHOL REACTION: Disulfiram plus alcohol, even small amounts, produces flushing, throbbing in head and neck, throbbing headache, respiratory difficulty, nausea, copious vomiting, sweating, thirst, chest pain, palpitation, dyspnea, hyperventilation, tachycardia, hypotension, syncope, marked uneasiness, weakness, vertigo, blurred vision, and confusion. In severe reactions there may be respiratory depression, cardiovascular collapse, arrhythmias, myocardial infarction, acute congestive heart failure, unconsciousness, convulsions, and death.

The intensity of the reaction varies with each individual, but is generally proportional to the amounts of Disulfiram and alcohol ingested. Mild reactions may occur in the sensitive individual when the blood alcohol concentration is increased to as little as 5 to 10 mg per 100 cc. Symptoms are fully developed at 50 mg per 100 cc., and unconsciousness usually results when the blood alcohol level reaches 125 to 150 mg.

The duration of the reaction varies from 30 to 60 minutes to several hours in the more severe cases, or as long as there is alcohol in the blood.

DRUG INTERACTIONS: Disulfiram appears to decrease the rate at which certain drugs are metabolized and so may increase blood levels and the possibility of clinical toxicity of drugs given concomitantly.

Disulfiram should be used with caution in those patients receiving diphenhydramine and its congeners, since toxic levels of these antiepileptic agents have been reported during concomitant disulfiram therapy.
It may be necessary to adjust the dosage of oral anticoagulants upon beginning or stopping disulfiram, since disulfiram may prolong prothrombin time.

Patients taking isoniazid when disulfiram is given should be observed for the appearance of unsteady gait or marked changes in mental status and the disulfiram discontinued if such signs appear.

CONCOMITANT CONDITIONS: Because of the possibility of an accidental Disulfiram-alcohol reaction, Disulfiram should be used with extreme caution in patients with any of the following conditions: diabetes mellitus, hypothyroidism, epilepsy, cerebral damage, chronic and acute nephritis, hepatic cirrhosis or insufficiency.

USAGE IN PREGNANCY: The safe use of this drug in pregnancy has not been established. Therefore, Disulfiram should be used during pregnancy only when, in the judgement of the physician, the probable benefits outweigh the possible risks.

PRECAUTIONS: It is suggested that every patient under treatment carry an Identification Card, stating that he is receiving Disulfiram and describing the symptoms most likely to occur as a result of the Disulfiram-alcohol reaction. In addition, this card should indicate the physician or institution to be contacted in emergency.

Alcoholism may accompany or be followed by dependence on narcotics or sedatives. Barbiturates have been administered concurrently with Disulfiram without untoward effects, but the possibility of initiating a new abuse should be considered.

Base line and follow-up transaminases tests (10-14 days) are suggested to detect any hepatic dysfunction that may result with Disulfiram therapy.

ADVERSE REACTIONS: (See Contraindications, Warnings, and Precautions.)

Occasional skin eruptions are, as a rule, readily controlled by concomitant administration of an antihistaminic drug. In a small number of patients, a transient mild drowsiness, fatigue, impotence, headache, acneiform eruptions, allergic dermatitis, or a metallic or garlic-like alteration may be experienced during the first two weeks of therapy. These complaints usually disappear spontaneously with the continuation of therapy or with reduced dosage.

Psychotic reactions have been noted, attributable in most cases to high dosage, combined toxicity (with metronidazole or isomnid), or to the unmasking of underlying psychoses in patients stressed by the withdrawal of alcohol.

There have been reports of polyneuritis and peripheral neuritis, and rare instances of optic neuritis. One case of cholestatic hepatitis has been reported, but its relationship to Disulfiram has not been unequivocally established.

DOSAGE AND ADMINISTRATION: Disulfiram should never be administered until the patient has abstained from alcohol for at least 12 hours.

INITIAL DOSAGE SCHEDULE: In the first phase of treatment, a maximum of 500 mg. daily is given in a single dose for one to two weeks. Although usually taken in the morning, Disulfiram may be taken on retiring by patients who experience a sedative effect. Alternatively, to minimize, or eliminate, the sedative effect, dosage may be adjusted downward, once a sedative effect.

MAINTENANCE REGIMEN: The average maintenance dose is 250 mg. daily (range, 125 to 500 mg.), it should not exceed 500 mg. daily.

NOTE: Occasional patients, while seemingly on adequate maintenance doses of Disulfiram, report that they are able to drink alcoholic beverages with impunity and without any symptomatology. All appearances to the contrary, such patients must be presumed to be disposing of their tablets in some manner without actually taking them. Until such patients have been observed reliably taking their daily Disulfiram tablets (preferably crushed and well mixed with liquid), it cannot be concluded that Disulfiram is ineffective.

NOTICE OF APPROVAL
NEW DRUG APPLICATION OR SUPPLEMENT

NDA NUMBER

88-483

DATE APPROVAL LETTER ISSUED

DEC 8 '88

TO:

Press Relations Staff (HFI-40)

FROM:

Bureau of Drugs

Bureau of Veterinary Medicine

ATTENTION

Forward original of this form for publication only after approval letter has been issued and the date of approval has been entered above.

TYPE OF APPLICATION

ORIGINAL NDA SUPPLEMENT TO NDA ABBREVIATED ORIGINAL NDA SUPPLEMENT TO ANDA

CATEGORY

HUMAN VETERINARY

TRADE NAME (or other designated name) AND ESTABLISHED OR NONPROPRIETARY NAME (if any) OF DRUG.

Disulfiram

DOSAGE FORM

Tablets

ORIGINAL ABBREVIATED

HOW DISPENSED

RX OTC

ACTIVE INGREDIENT(S) (as declared on label. List by established or nonproprietary name(s) and include amount(s), if amount is declared on label.)

Disulfiram 500 mg

NAME OF APPLICANT (Include City and State)

Sidmak Laboratories, Inc.
East Hanover, NJ 07936

PRINCIPAL INDICATION OR PHARMACOLOGICAL CATEGORY

Alcohol deterrent, antabuse

COMPLETE FOR VETERINARY ONLY

ANIMAL SPECIES FOR WHICH APPROVED

COMPLETE FOR SUPPLEMENT ONLY

CHANGE APPROVED TO PROVIDE FOR

FORM PREPARED BY

NAME

C. Chang

DATE

12-7-85

FORM APPROVED BY

NAME

J. Meyer

DATE

CHEMIST'S REVIEW FOR
ABBREVIATED NEW DRUG APPLICATION
OR SUPPLEMENT

STATEMENT DATE:

NDA NUMBER:

DES:7888

88-483

NAME AND ADDRESS OF APPLICANT

S. J. ... Laboratories, Inc.
East Hanover, NJ 07936

PURPOSE OF AMENDMENT

ORIGINAL
AMENDMENT
SUPPLEMENT
RESUBMISSION X
CORRESPONDENCE
REPORT
OTHER

DATE(S) OF SUBMISSION(S)

As per letter

HOW DISPENSED

RX X OTC

RELATED IND/NDA/DMF

88-483 500 mg

88-482 250 mg

Labeling information

PHARMACOLOGICAL CATEGORY

NAME OF DRUG

Alcohol deterrent

Antabuse

Disulfiram

DOSAGE FORM(S)

POTENCY(IES)

Tablets

500 mg

STERILIZATION

SAMPLES

N/A

LABELING

N/A (USP)

Satisfactory per K. Johnson

PHYSIOLOGIC AVAILABILITY

Speed dissolution per Dr. Dighe on 9-6-83

ESTABLISHMENT INSPECTION

Requested

COMPONENTS, COMPOSITION, MANUFACTURING, CONTROLS

See issued letter

PACKAGING

Store in light opaque H.D. polyethylene bottles and metal cap, inner form seal

STABILITY

Protocol: See issued letter

Exp. Date: Firm requests for 2 years

REMARKS AND

CONCLUSIONS: Approvable

C. Chang

2-78 }

NDA 88-483

Sidmak Laboratories, Inc.
Attention: Satish Patel, Ph.D.
17 West Street
P.O. Box 371
East Hanover, NJ 07936

Gentlemen:

Please refer to your new drug application submitted pursuant to Section 505(b) of the Federal Food, Drug, and Cosmetic Act for Disulfiram Tablets, 500 mg.

Reference is also made to your communication dated November 14, 1983.

The application is deficient and therefore not approvable under Section 505(b) of the Act as follows:

It fails to include 12 copies of the final printed labeling identical in content to the draft copies.

The file is now closed. If you wish to reopen it, the submission should be in the form of an amendment to this application, adequately organized, which represents the information necessary to remove all deficiencies we have outlined.

If you do not agree with our conclusions, you may make a written request to file the application over protest, as authorized by 21 CFR 314.110(d). If you do so, the application shall be re-evaluated and within 90 days of the date of receipt of such request (or additional period as we may agree upon), the application shall be approved or you shall be given a written notice of opportunity for a hearing on the question of whether the application is approvable.

Sincerely yours,

FOR 11-29-83
Marvin Seife, M.D.
Director
Division of Generic Drugs
Office of Drug Standards
National Center for Drugs and Biologics

cc: NWK-DO
HFN-536
JMeyer/CCChanc
R/D INITIAL umeyer/MSeife
mm:11/22/83 (3006c)
Not Approvable

11/25/83

11/28/83

CHEMIST'S REVIEW FOR
ABBREVIATED NEW DRUG APPLICATION
OR SUPPLEMENT

STATEMENT DATE:

DES:7888

NDA NUMBER:

88-483

NAME AND ADDRESS OF APPLICANT

Sidmak Laboratories, Inc.
East Hanover, NJ 07936

ORIGINAL
AMENDMENT
SUPPLEMENT
RESUBMISSION X
CORRESPONDENCE
REPORT
OTHER

PURPOSE OF AMENDMENT

DATE(S) OF SUBMISSION(S)

As per letter

HOW DISPENSED

RX X OTC

RELATED IND/NDA/DMF

88-483 500 mg

88-482 250 mg

Control and labeling information

RHARMACOLOGICAL CATEGORY

NAME OF DRUG

Alcohol deterrent

Antabuse

Disulfiram

DOSAGE FORM(S)

POTENCY(IES)

Tablets

500 mg

STERILIZATION

SAMPLES

N/A

N/A (USP)

LABELING

Satisfactory per K. Johnson, need FPL.

BIOLOGIC AVAILABILITY

Need dissolution per Dr. Dighe on 9-6-83

ESTABLISHMENT INSPECTION

Requested

COMPONENTS, COMPOSITION, MANUFACTURING, CONTROLS

See issued letter

PACKAGING

White opaque H.D. polyethylene bottles and metal cap, inner form seal

STABILITY

Protocol: See issued letter

Exp. Date: Firm requests for 2 years

REMARKS AND

CONCLUSIONS: Not approvable.

C. Chang

11-28-83

NOV 10 1983

NDA 83-483

Sidmak Laboratories, Inc.
Attention: Satish P. Patel, Ph.D.
P.O. Box 371
East Hanover, NJ 07936

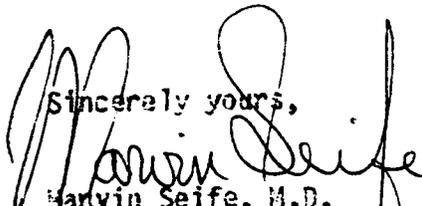
Gentlemen:

Reference is made to the dissolution data you submitted on October 25, 1983 for Disulfiram Tablets, 500 mg.

The data have been reviewed by our Division of Biopharmaceutics and they have the following comments:

"Due to the low solubility of disulfiram, the Division of Biopharmaceutics has deferred the in vitro dissolution requirements for this product. When an appropriate dissolution methodology becomes available, the firm will be expected to comply with requirements."

Sincerely yours,

 11/10/83
Marvin Seife, M.D.
Director
Division of Generic Drugs
Office of Drug Standards
National Center for Drugs & Biologics

cc:
NWK-DO
HFN-530/DUP
HFN-522 (Rm 15-42)
MSeife/cjl:11-10-83
BIO

Generic Name: Disulfiram
Trade Name: _____
Dosage: 500 mg Tablets
ANDA #: 88-483
Reviewer: L.A. Ouderkirk

Firm Name: Sidmak Laboratories, Inc.
Firm Location: East Hanover, New Jersey
Submission Date: October 25, 1983
NOV - 9 1983
Wang # 2690

REVIEW OF DISSOLUTION DATA

Objective of Submission: Comparative dissolution data in three media was submitted for ANDA approval.

Condition for Dissolution Testing

USP XX Apparatus Paddle X Basket _____ RPM 50
Medium: H₂O; 0.1N HCl; SIF Volume 900 ml
Number of Tab/Capsules Tested: 12
Reference Drug: Antabuse^R 500 mg Tablets (Ayerst)

Assay Methodology

Dissolution Requirement

USP Final _____

FDA Standard _____

Comparative X _____

USP Proposed _____

FDA Bioequivalence Standard _____

Individual _____

Results

Time (Min.)

Sidmak
Test Product
Lot No. 83-049-T
Mean % Range, (CV)

Antabuse^R (Ayerst)
Reference Product
Lot No. 1 FBF
Mean % Range, (CV)

Dissolved
0.77 (3.6)

Dissolved
0.92 (32.7)

Water

15
30

1.13 (2.4)

1.32 (2.8)

45

1.23 (2.3)

1.35 (1.9)

60

1.30 (2.7)

1.37 (1.6)

0.1N HCl

15

0.56 (20.7)

1.22 (6.1)

30

0.88 (6.7)

1.39 (1.4)

45

1.16 (13.4)

1.41 (1.4)

60

1.24 (4.5)

1.40 (4.3)

SIF

15

0.63 (3.9)

0.95 (5.5)

30

0.92 (2.1)

1.04 (3.0)

45

1.01 (1.0)

1.05 (3.0)

60

0.99 (0.8)

1.03 (3.0)

Comments:

1. Due to the low solubility of disulfiram, the Division of Biopharmaceutics has deferred the in vitro dissolution requirements for this product. When an appropriate dissolution methodology becomes available, the firm will be expected to comply with requirements.

Recommendation:

1. The firm should be informed of comment #1, above.
2. From the biopharmaceutics point of view, the application is approvable.

11-8-83
Larry A. Ouder Kirk, Biologist
Biopharmaceutics Review Branch

Initialed by C.M. Ise

cc: ANDA #88-483 orig., HFN-530 (4), HFN-522 (Ouder Kirk, Ise-2), HFN-503 (Hare), Chron File, Drug File, Review File, Division File

LAO/dea/#2690e/

NOV 3 1983

NDA 88-483

Sidmak Laboratories, Inc.
Attention: Satish Patel, Ph.D.
17 West Street
P.O. Box 371
East Hanover, New Jersey 07936

Gentlemen:

Please refer to your new drug application submitted pursuant to Section 505(b) of the Federal Food, Drug, and Cosmetic Act for Disulfiram Tablets, 500 mg.

Reference is also made to your communication dated October 25, 1983, for ANDA 88-483.

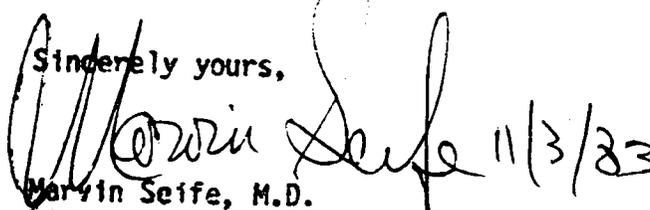
The application is deficient and therefore not approvable under Section 505(b) of the Act as follows:

1. Other information requested per our letter of October 24, 1983.
2. The submitted dissolution data for ANDA 88-483 has been referred to our Division of Biopharmaceutics. We will correspond with you further when their results become available.

The file is now closed. If you wish to reopen it, the submission should be in the form of an amendment to this application, adequately organized, which represents the information necessary to remove all deficiencies we have outlined.

If you do not agree with our conclusions, you may make a written request to file the application over protest, as authorized by 21 CFR 314.110(d). If you do so, the application shall be re-evaluated and within 90 days of the date of receipt of such request (or additional period as we may agree upon), the application shall be approved or you shall be given a written notice of opportunity for a hearing on the question of whether the application is approvable.

Sincerely yours,



Marvin Seife, M.D.
Director
Division of Generic Drugs
Office of Drug Standards
National Center for Drugs and Biologics

cc: NWK-DO
HFN-530
JMeyer/CCchang / 11-2-83
R/D INITIAL JMeyer/MSeife
mm:11/2/83 (2414c)
Not approvable

11/2/83

ABBREVIATED NEW DRUG APPLICATION
OR SUPPLEMENT

Statement Date:

NDA #

DES: 7888

88-483

NAME AND ADDRESS OF APPLICANT:

Sidmak Laboratories, Inc.
t Hanover, NJ 07936

ORIGINAL
AMENDMENT
SUPPLEMENT
RESUBMISSION X
CORRESPONDENCE
REPORT
OTHER

PURPOSE OF AMENDMENT/SUPPLEMENT

Dissolution data

DATE(s) OF SUBMISSION(S)

PHARMACOLOGICAL CATEGORY

NAME OF DRUG

As per letter

Alcohol deterrent

Disulfiram

HOW DISPENSED

Antabuse

DOSEAGE FORM

POTENCY(IES)

RX X OTC

Tablets

500 mg

RELATED IND/NDA/DMF

STERILIZATION

SAMPLES

88-483 500 mg

NA

88-482 250 mg

LABELING

NA (BSP)

Unsatisfactory per K. Johnson

BIOLOGIC AVAILABILITY

Need dissolution per Dr. Dighe on 9-6-83

ESTABLISHMENT INSPECTION

Requested

COMPONENTS, COMPOSITION, MANUFACTURING, CONTROLS

See issued letter

PACKAGING

White opaque H.D. polyethylene bottles and metal cap, inner form seal

STABILITY

Protocol: See issued letter

Exp. Date: Firm requests for 2 years

MARKS & CONCLUSION:

Approvable

C. Chang

1.1-2-83

OCT 13 1983

NDA 88-483

Sidmak Laboratories, Inc.
Attention: Satish Patel, Ph.D.
17 West Street, P.O. Box 371
East Hanover, NJ 07936

Gentlemen:

Please refer to your new drug application dated August 22, 1983 submitted pursuant to Section 505(b) of the Federal Food, Drug, and Cosmetic Act for Disulfiram Tablets, 500 mg.

The application is deficient and therefore not approvable under Section 505(b) of the Act as follows:

(1) It fails to perform the adequate dissolution studies. In this regard:

Our Division of Biopharmaceutics is developing dissolution specifications and tests for disulfiram dosage forms. In accord with this development we are requesting comparative dissolution profiles for a minimum of 12 individual tablets - dosage form vs. the appropriate reference product as per the following conditions:

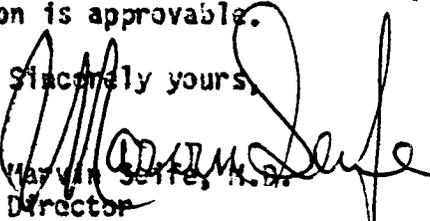
- a. 900 ml water, 37°C, paddle, 50 rpm at 15, 30, 45 and 60 minute intervals.
- b. 900 ml 0.1 N HCl, 37°C, paddle, 50 rpm at 15, 30, 45 and 60 minute intervals.
- c. 900 ml simulated intestinal fluid without enzyme, paddle, 50 rpm at 15, 30, 45 and 60 minute intervals.

(2) We will correspond with you further after we have had the opportunity to review the labeling and other parts of this application.

The file is now closed. If you wish to reopen it, the submission should be in the form of an amendment to this application, adequately organized, which represents the information necessary to remove all deficiencies we have outlined.

If you do not agree with our conclusions, you may make a written request to file the application over protest, as authorized by 21 CFR 314.110(d). If you do so, the application shall be re-evaluated and within 90 days of the date of receipt of such request (or additional period as we may agree upon), the application shall be approved or you shall be given a written notice of opportunity for a hearing on the question of whether the application is approvable.

Sincerely yours,


Marvin Seife, M.D.

Director

Division of Generic Drug Monographs
Office of the Associate Director for
Drug Monographs
Office of Drugs
National Center for Drugs & Biologics

10/13/83

cc:
NWK-DO
HFN-530
JLMeyer/CChang
R/DinitJMeyer/MSeife
ft/cj1/10-12-83
not approvable

10-12-83

10/12/83

NOV 8 1983

Disulfiram
500 mg Tablets
ANDA # 88-483
Reviewer: L.A. Ouder Kirk
Wang # 2655e

Sidmak Laboratories, Inc.
East Hanover, New Jersey
Submission Date:
August 22, 1983

NOV 8 1983

Review of a Submission

This submission contains only disintegration testing data for the firm's 500 mg disulfiram tablets. No dissolution testing data was submitted.

The firm has subsequently submitted dissolution testing data for this product in their submission dated October 25, 1983.

Recommendation:

1. The Division of Biopharmaceutics need not to review this submission, because the firm has submitted additional dissolution data.
2. The Division of Biopharmaceutics will review the dissolution data included in the firm's October 25, 1983 submission.

11-7-83
Larry A. Ouder Kirk, Biologist
Biopharmaceutics Review Branch

Initialed by C.M. Ise

cc: ANDA # 88-483 orig., HFN-530 (4), HFN-522 (Ouder Kirk, Ise - 2),
HFN-503 (Hare), Chron File, Drug File, Review File, Division File

LAO/dea/Wang # 2655e

OCT 24 1983

NDA 88-483

Sidmak Laboratories, Inc.
Attention: Satish Patel, Ph.D.
17 West Street, P.O. Box 371
East Hanover, New Jersey 07936

Gentlemen:

Please refer to your abbreviated new drug application dated August 22, 1983, submitted pursuant to Section 505(b) of the Federal Food, Drug, and Cosmetic Act for Disulfiram Tablets, 500 mg.

The application is deficient and therefore not approvable under Section 505(b) of the Act as follows:

1. It fails to include a satisfactory package insert. In this regard:
 - a) How supplied: Note scored or unscored for each strength.
 - b) Also: Issued, month/year.
2. It fails to include an appropriate Drug Master File referral from
3. It fails to submit adequate information with respect to the test methods employed for the container, closure, or other component parts of the drug package upon receiving to assure their suitability for the intended use.
4. It fails to include an outline of manufacturing procedures for this specific drug expanded to include the operation procedures and precautions necessitated by the light sensitivity of active ingredient and dosage form.
5. It fails to submit the adequate stability information. In this regard:
 - a) Cite/describe methodology (stability indicating assay) and test conditions: procedures for detecting the presence of degradation product(s).
 - b) Include the proposed schedule of testing at controlled room temperature. It is recommended that the studies be performed at initial, 3, 6, 12, 18, and 24 months and yearly thereafter in the container/closure system in which the drug is to be marketed at controlled room temperature.

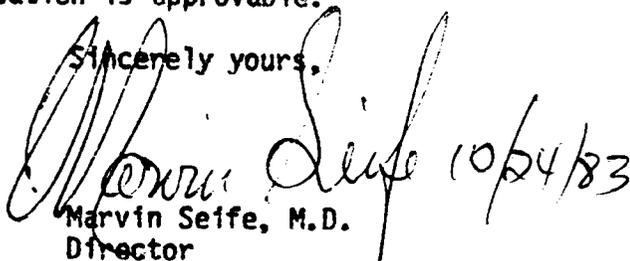
- c) Two year expiration dating: We are unable to reach any conclusion based on the limited data submitted. It is recommended that data be obtained for production lots at challenge conditions for three months to justify the proposed expiration dating prior to approval.
- d) Samples Placed on Stability:
 - 1) The first three production lots of the product should be placed on stability. In the case where more than one package size is marketed, the first 3 production lots of the smallest and the largest size (e.g., 3 lots of 100 tablet bottles and 3 lots of 500 tablet bottles) should be placed on stability. Also, if more than one container/ closure system is used for a particular size, stability data in each container/ closure system is necessary.
 - 2) Yearly thereafter, 1 production batch should be added to the stability program.

6. It fails to respond to our letter of October 13, 1983.

The file is now closed. If you wish to reopen it, the submission should be in the form of an amendment to this application, adequately organized, which represents the information necessary to remove all deficiencies we have outlined.

If you do not agree with our conclusions, you may make a written request to file the application over protest, as authorized by 21 CFR 314.110(d). If you do so, the application shall be re-evaluated and within 90 days of the date of receipt of such request (or additional period as we may agree upon), the application shall be approved or you shall be given a written notice of opportunity for a hearing on the question of whether the application is approvable.

Sincerely yours,



10/24/83

Marvin Seife, M.D.
 Director
 Division of Generic Drugs
 Office of Drug Standards
 National Center for Drugs and Biologics

cc: NWK-DO

HFN-530
 JMeyer/CChang
 R/D INITIAL JMeyer/MSeife
 mmorgan: 10/21/83 (2089c)
 Not approvable

10-21-83

10/21/83

REVIEW OF PROFESSIONAL LABELING

ANDA - DRAFT

DATE OF REVIEW: 10-17-83

NAME OF FIRM: Sidmak Labs., Inc.

ANDA #: 88-482 (250 mg)
88-483 (500 mg)

NAME OF DRUG: Generic: Disulfiram

DATE OF SUBMISSION: 8-22-83

COMMENTS:

Container: satisfactory

100s, 500s (500 mg)

100s, 1000s (250 mg)

Insert: Not satisfactory.

a) HOW SUPPLIED: Note scored or unscored for each strength

b) Also: Issued, Month/Year

RECOMMENDATIONS:

1. Inform firm of the above comments.
2. Request FPL container labels.
3. Request they make minor revisions on insert labeling, then prepare and submit FPL.

Kent T. Johnson

cc:
dup
KTJ/c1/10-17-83

Chemist's Review For
ABBREVIATED NEW-DRUG APPLICATION
OR SUPPLEMENT

Statement Date:
DES: 7888

NDA #
88-483

NAME AND ADDRESS OF APPLICANT:

Sidmak Laboratories, Inc.
t Hanover, NJ 07936

ORIGINAL
AMENDMENT
SUPPLEMENT
RESUBMISSION
CORRESPONDENCE
REPORT
OTHER

PURPOSE OF AMENDMENT/SUPPLEMENT

DATE(s) of SUBMISSION(s)

PHARMACOLOGICAL CATEGORY

NAME OF DRUG

Alcohol deterrent
Antabuse

Disulfiram

As per letter

DOSE FORM

POTENCY(IES)

Tablets

500 mg

HOW DISPENSED

RX X OTC

STERILIZATION

SAMPLES

NA

NA-(USP)

RELATED IND/NDA/DMF

88-483 500 mg
88-482 250 mg

LABELING

Unsatisfactory per K. Johnson

BIOLOGIC AVAILABILITY

Need dissolution per Dr. Dighe on 9-6-83

ESTABLISHMENT INSPECTION

Requested

COMPONENTS, COMPOSITION, MANUFACTURING, CONTROLS

See issued letter

PACKAGING

White opaque H.D. polyethylene bottles and metal cap, inner form seal

STABILITY:

Protocol: See issued letter

Exp. Date: Firm requests for 2 years

REMARKS & CONCLUSION:

Not approvable

10-21-83

AUG 26 1983

NDA 88-483

Sidmak Laboratories, Inc.
Attention: Satish Patel, Ph.D.
17 West Street, P.O. Box 371
East Hanover, NJ 07936

Gentlemen:

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

NAME OF DRUG: Disulfiram Tablets, 500 mg.

DATE OF APPLICATION: August 22, 1983

DATE OF RECEIPT: August 24, 1983

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 NDA number shown above.

Sincerely yours,

For 8-26-83

Marvin Seife, M.D.
Director
Division of Generic Drug Monographs
Office of the Associate Director
for Drug Monographs
Office of Drugs
National Center for Drugs and Biologics

NWK-DO DUP HFN-530
JLMeyer/mlb/8-25-83
ack

9/20/83

ANDA ADMINISTRATIVE CONTROL RECORD

Applicant Sidmak Labs Inc

P No. _____

ANDA # 88-483

Trade Name Diseufuran RX OTC _____

Date Recd. 8-24-83

Generic Name/Dosage Form/Strength: Diseufuran Tablets 500mg

DESI Drug DESI No. _____ DESI Date(FR) _____

Similar or Related _____ Name of DESI Drug _____

Applicant Manufacturer: Yes No _____

If No: Name of Manufacturer _____

ANDA # _____ (Approved: _____ Pending _____ Same Formulation _____)

Application Complete (See Pg. 2): YES NO _____
Application Acceptable: YES NO _____

REMARKS:

Letter to Firm: Acknowledgement 2263P Not-acceptable _____ Date _____

CSO: DLR Margo Bennett Date 8/24/83

BIO Review Required: Yes NO _____ In Vitro In Vivo _____
Date Fwd: _____

Medical Officer Safe Review Completed _____ R.R. _____

Chemist brahm chang Review Completed _____ R.R. _____

Inspection Request to HFD 320(date): 8/29/83 Reply Rec.(date) _____

Letter to Firm: Labeling Review (date) _____ Response(date) _____

Chemistry: 1)(date) _____ Response _____
2)(date) _____ Response _____

Approvable Date _____

Withdrawal Date _____

Special Instructions/Actions:

88-483

1. Completeness of Submission

	<u>Yes</u>	<u>No</u>
Cover Letter	✓	
356H Signed	✓	
Table of Contents	✓	
Labeling	✓ draft	
Statement re Rx/OTC Status	✓	
Components & Composition (Unit Composition)	✓	
Manufacturing Controls	✓	
Batch Formulation	✓	
Certification of GMP	✓	
Description of Facilities		
Manufacturing Procedures (Batch Records)	✓	
Specs & Tests for Active Ingredient and Finished Dosage Form	✓	
Stability Profile Including Stability data (Use of Stability indicating methods)	✓	
Samples Statement Plus Data		
Bio Protocol (If Applicable)		
Dissolution Data (If Applicable)		
Environmental Impact Analysis	✓	

Bio Data protocol _____

Study: IN VIVO _____ IN VITRO _____

Reviewed Date _____ Approved _____

Deficiency Letter Sent, Date _____



DEPARTMENT OF HEALTH & HUMAN SERVICES

Memorandum

TO :Manufacturing Review Branch (HFN-322)
Division of Drug Quality Compliance

DATE: 8-25-83

FROM :Division of Generic Drugs
Requester's Name David Rosen PHONE: 443-4080

SUBJECT: ESTABLISHMENT EVALUATION REQUEST

NDA, ANDA, AND SUPPLEMENT NUMBER: 88-482 (250 mg) 88-483 (500 mg)

DRUG TRADE MARK (if any) _____

DRUG NONPROPRIETARY NAME: Disulfiram ~~TMXX~~ Tablets, 250 mg. 500 mg.

DOSAGE FORM AND STRENGTH(S): TCM

DRUG CLASSIFICATION: _____ PROFILE CLASS CODE: _____
(Priority) A or B 1C Other

APPLICANT'S NAME: Sidmak Laboratories, Inc.

ADDRESS: 17 West Street, P.O. Box 371, East Hanover, NJ 07936

FACILITIES TO BE EVALUATED: (Name, Full Address, DMF# (if any), and Responsibility)

1. applicant

COMMENTS: () Actual on-site inspection requested.

Reason: _____

FOR HFN-322 USE ONLY:

Request Rec'd: _____ Inspection Requested: _____
(if applicable)

Firm(s) are in Compliance With GMPs: _____

Basis for Decision: _____

Reviewing CSO: _____ Concurrence: _____

cc: HFN-_____
HFN-_____
LFW 222

CC: Darrow Rm. 12-87 HFO-503

MEMORANDUM

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service

TO : Dr. Marvin Seife
Director, Division of Generic Drug Products (HFD-530) DATE: February 20, 1981
THROUGH: Director, Division of Biopharmaceutics (HFD-520)
Chief, Biopharmaceutics Review Branch
Division of Biopharmaceutics (HFD-522) 2/20/81

FROM : Group Leader, ANDA Review,
Biopharmaceutics Review Branch, Division of Biopharmaceutics (HFD-522)

SUBJECT: Disulfiram Bioavailability

The Division of Biopharmaceutics has determined that in vivo bioavailability studies are not required for disulfiram tablets (Antabuse, Ayerst). Dissolution testing data for this drug product was requested of Danbury Laboratories as a basis of approval.

The firm conducted dissolution testing of the test and Ayerst drug products in water, simulated gastric fluid, and simulated intestinal fluid, and found very little of the active ingredient was soluble in aqueous media. The Division of Biopharmaceutics asked the firm to develop a dissolution profile for disulfiram over a pH range of 1.2 - 9.0 and also in 10% ethanol in water mixture. It was found that less than 10% of the pure disulfiram was soluble in 900 ml of any of the media. Further, studies by the firm demonstrated that the solubility of disulfiram in water containing 0.05 and 0.1 per cent Tween 80 (surfactant) was 20.6 and 29.5 per cent respectively.

The Division of Biopharmaceutics recommends that dissolution testing for Disulfiram Tablets, 250 and 500 mg tablets be deferred. The firms intending to market the drug product should, however, be informed that when appropriate dissolution methodology becomes available they will be required to conduct dissolution testing.

Charles M. Ise, Ph.D.

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION

TO : Charles Y. Chang
Chemist, HFD-530

DATE: July 23, 1979

THROUGH: Director, Division of Biopharmaceutics, HFD-520

FROM : Acting Chief,
Biopharmaceutics Review Branch, HFD-522

SUBJECT: Bioavailability Requirement for Disulfiram (Antabuse)

1. DESI notice on Disulfiram states that an acceptable bioavailability study should be conducted by an applicant as a condition for approval of abbreviated new drug application. You have requested the Division of Biopharmaceutics to make a determination whether this requirement should be waived.
2. Disulfiram arrests the oxidation of ingested alcohol at acetaldehyde stage. The accumulation of acetaldehyde causes flushing, pounding of the heart and head, dyspnea and nausea. The reaction may be fatal. Distressing side effects of disulfiram are nausea, vomiting, impaired taste, bad breath, drowsiness and impotence. In view of the severity of action and toxic side effects, the Division of Biopharmaceutics recommends that the bioavailability requirement for Disulfiram be waived as a condition for approval of ANDA.
3. In order to assure adequate performance biologically the Division of Biopharmaceutics recommends that dissolution testing be conducted on Disulfiram tablets. Comparative dissolution testing should be conducted under the following conditions using Ayerst Antabuse tablets as the reference product:
 - a. 900 ml of simulated gastric fluid at 37°C; USP method II (paddle); paddle rotation speed 50 rpm.
 - b. 900 ml of simulated intestinal fluid at 37°C; USP Method II (paddle); paddle rotation speed 50 rpm.

Shrikant V. Dighe, Ph.D.

[DESI 7623]

DISULFIRAM**Drugs for Human Use; Drug Efficacy Study Implementation**

The Food and Drug Administration has evaluated a report received from the National Academy of Sciences-National Research Council, Drug Efficacy Study Group, on the following drug:

Antabuse Tablets (disulfiram 0.5 gram); marketed by Ayerst Laboratories, Division American Home Products Corp., 685 Third Avenue, New York, N.Y. 10017 (NDA 7-893).

The drug is regarded as a new drug (21 U.S.C. 321(p)). Supplemental new drug applications are required to revise the labeling in and to update previously approved applications providing for such drug. A new drug application is required from any person marketing such drug without approval.

The Food and Drug Administration is prepared to approve new drug applications and supplements to previously approved new drug applications under conditions described in this announcement.

A. Effectiveness classification. The Food and Drug Administration has considered the Academy report, as well as

other available evidence, and concludes that disulfiram is an effective adjunct in the management of selected chronic alcoholic patients.

B. Form of drug. Disulfiram preparations are in tablet form suitable for oral administration and contain per dosage unit an amount appropriate for administration in the dosage range described in the labeling conditions in this announcement.

C. Labeling conditions. 1. The label bears the statement "Caution: Federal law prohibits dispensing without prescription."

2. The drug is labeled to comply with all requirements of the Act and regulations and those parts of its labeling indicated below are substantially as follows: (Optional additional information, applicable to the drug, may be proposed under other appropriate paragraph headings and should follow the information set forth below.)

WARNING

Disulfiram should never be administered to a patient when he is in a state of alcohol intoxication or without his full knowledge.

The physician should instruct relatives accordingly.

DESCRIPTION

(Descriptive information to be included by the manufacturer or distributor should be confined to an appropriate description of the physical and chemical properties of the drug and the formulation.)

ACTION

Disulfiram alters the metabolism of ethyl alcohol so that acetaldehyde blood levels are 5 to 10 times higher than would otherwise occur; the result is a highly unpleasant reaction following the ingestion of alcohol.

INDICATION

Disulfiram is an aid in the management of selected chronic alcoholic patients; used alone, without proper motivation and without supportive therapy, it is not a cure for alcoholism, and it is unlikely that it will have more than a brief effect on the drinking pattern of the chronic alcoholic.

CONTRAINDICATIONS

Patients who are receiving or have recently received paraldehyde or alcohol-containing preparations, e.g. cough syrups, tonics, hypersensitivity.

WARNINGS

Disulfiram should be used with extreme caution in patients with any of the following conditions: diabetes mellitus, hypothyroidism, epilepsy, cerebral damage, chronic and acute nephritis, hepatic cirrhosis or insufficiency. The possibility of an accidental or intentional alcohol-disulfiram reaction, with its accompanying hypotension, presents significant risks.

Usage in pregnancy: The safe use of this drug in pregnancy has not been established. Therefore, disulfiram should be used during pregnancy only when, in the judgment of the physician, the probable benefits outweigh the possible risks.

The alcohol-disulfiram reaction: Disulfiram plus alcohol, even small amounts, produces flushing, throbbing in head and neck, throbbing headache, respiratory difficulty, nausea, copious vomiting, sweating, thirst, chest pain, palpitation, dyspnea, hyperantilation, tachycardia, hypotension, syncope,

marked uneasiness, weakness, vertigo, blurred vision and confusion. The blood pressure may fall to shock level. Duration of the reaction usually lasts from 30 minutes to several hours. Drowsiness and sleep follow. The intensity of the reaction varies with individuals but is generally proportional to the amounts of disulfiram and alcohol ingested.

In severe reactions there may be respiratory depression, cardiovascular collapse, arrhythmias, myocardial infarction, acute congestive heart failure, unconsciousness, convulsions, and death.

The patient must be fully informed of the alcohol-disulfiram reaction. He should also be warned to avoid alcohol in sauces, vinegars, cough mixtures, and even after-shave lotions and back rubs. It is important that the patient be strongly cautioned against surreptitious drinking while taking the drug and be fully aware of possible consequences. He should also be warned that reactions may occur with alcohol up to 14 days after ingesting disulfiram.

ALCOHOL-DISULFIRAM: TRIAL

During early experience with disulfiram it was thought advisable for each patient to have at least one supervised alcohol-drug reaction. These test reactions have now been largely abandoned. When deemed necessary, however, the following procedure is suggested:

After the first 2 to 3 weeks' therapy with 0.5 gm daily, a drink of 15 cc. of 100 proof whiskey or equivalent is taken slowly. This test dose of alcoholic beverage may be repeated once only so that the total dose does not exceed 30 cc. (1 oz.) of whiskey. Once a reaction develops no more alcohol should be consumed. Such tests should be carried out only when the patient is hospitalized or comparable supervision and facilities including oxygen are available. The test should never be administered to a patient over 60 years of age.

PRECAUTIONS

During initial treatment certain patients with a history of prolonged and heavy alcohol consumption may be able at first to take large quantities of alcohol without discomfort; in the majority of cases this tolerance disappears with continued use of the drug. The longer the patient remains on therapy the more sensitive he becomes to alcohol.

Alcoholism may accompany or be followed by dependence on narcotics or sedatives. Barbiturates have been administered concurrently with disulfiram, but the possibility of initiating a new abuse should be considered.

It is suggested that a patient receiving disulfiram carry an identification card stating that he is receiving disulfiram, describing the symptoms of the disulfiram-alcohol reaction, and indicating the physician or institution to be contacted in emergency.

Disulfiram should be used with caution in those patients receiving diphenhydramine or its congeners. Toxic levels of these anti-epileptic agents have been reported during concomitant disulfiram therapy.

Baseline and following transaminase tests (10-14 days) are suggested to detect any hepatic dysfunction that may result with disulfiram therapy.

ADVERSE REACTIONS

Acneiform eruptions, allergic dermatitis, drowsiness, fatigability, impotence, headache, metallic or garlic-like aftertaste.

Psychotic episodes, usually at higher doses. Polyneuropathy and peripheral neuritis.

Cholestatic hepatitis reported but causal relationship not clearly established.

Management of alcohol-disulfiram reaction: In severe reactions whether caused by an excessive test dose or by the patient's unsupervised ingestion of alcohol, supportive measures to restore blood pressure and treat shock should be instituted. Other recommendations include: oxygen, carbogen (95 percent oxygen and 5 percent carbon dioxide), vitamin C intravenously in massive doses (1 Gm.), and ephedrine sulphate. Antihistamines have also been used intravenously. Potassium levels should be monitored particularly in patients on digitalis since hypokalemia has been reported.

DOSAGE AND ADMINISTRATION

Disulfiram should never be initiated nor administered within 12 hours after the patient has consumed any quantity of alcohol.

The usual dose is 500 mg. in a single dose daily. Although usually taken in the morning, disulfiram may be taken on retiring by patients who experience a sedative effect. Maintenance dose may be reduced to 250 mg. daily (range 125 to 500 mg.); it should not exceed 500 mg./day. Maintenance therapy may be required up to several years.

D. Previously approved applications.

1. Each holder of a "deemed approved" new drug application (i.e., an application which became effective on the basis of safety prior to Oct. 10, 1962) for such drug is requested to bring the application up to date by submitting supplements containing:

a. Revised labeling, as needed to conform to the labeling conditions described herein for the drug.

b. Adequate data to assure the biologic availability of the drug in the formulation which is marketed; if such data are already included in the application, specific reference thereto may be made.

c. Updating information, as needed to make the application current in regard to items 6 (components), 7 (composition), and 8 (methods, facilities, and controls) of the new drug application form FD-356H to the extent described in the proposal for abbreviated new drug applications, § 130.4(f), published in the FEDERAL REGISTER February 27, 1969. (One supplement may contain all the information described in this paragraph.)

2. Such supplements should be submitted within the following time periods after the date of publication of this notice in the FEDERAL REGISTER:

a. 60 days for revised labeling. The supplement should be submitted under the provisions of § 130.9 (d) and (e) of the new drug regulations (21 CFR 130.9) which permit certain changes to be put into effect at the earliest possible time.

b. 180 days for biologic availability data.

c. 60 days for updating information.

3. Marketing of the drug may continue until the supplemental applications submitted in accord with the preceding subparagraphs 1 and 2 are acted upon, provided that within 60 days after the date of this publication, the labeling of the preparation shipped within the jurisdiction of the Act is in accord with the labeling conditions described in this announcement.

E. New applications. 1. Any other person who distributes or intends to distribute such drug which is intended for the conditions of use for which it has been shown to be effective, as described under A above, should submit an abbreviated new drug application meeting the conditions specified in the proposed regulation, § 130.4(f) (1), (2), and (3), published in the FEDERAL REGISTER of February 27, 1969. Such applications should include proposed labeling which is in accord with the labeling conditions described herein and adequate data to assure the biologic availability of the drug in the formulation which is marketed or proposed for marketing.

2. Distribution of any such preparation currently on the market without an approved new drug application may be continued provided that:

a. Within 60 days from the date of publication of this announcement in the FEDERAL REGISTER, the labeling of such preparation shipped within the jurisdiction of the Act is in accord with the labeling conditions described herein.

b. The manufacturer, packer, or distributor of such drug submits, within 180 days from the date of this publication, a new drug application to the Food and Drug Administration.

c. The applicant submits additional information that may be required for the approval of the application within a reasonable time as specified in a written communication from the Food and Drug Administration.

d. The application has not been ruled incomplete or unapprovable.

F. Unapproved use or form of drug.

1. If the article is labeled or advertised for use in any condition other than those provided for in this announcement, it may be regarded as an unapproved new drug subject to regulatory proceedings until such recommended use is approved in a new drug application or is otherwise in accord with this announcement.

2. If the article is proposed for marketing in another form or for a use other than the use provided for in this announcement, appropriate additional information as described in § 130.4 or § 130.9 of the regulations (21 CFR 130.4, 130.9) may be required, including results of animal and clinical tests intended to show whether the drug is safe and effective.

Representatives of the Administration are willing to meet with any interested person who desires to have a conference concerning proposed changes in the labeling set forth herein. Requests for such meetings should be made to the Office of Marketed Drugs (MD-300) at the address given below, within 30 days after the publication of this notice in the FEDERAL REGISTER.

A copy of the NAS-NRC report has been furnished to the firm referred to above. Any other interested person may obtain a copy by request to the appropriate office named below.

Communications forwarded in response to this announcement should be identified with the reference number, DCSI 7883, and be directed to the attention of the following appropriate office and addressed to the Food and Drug Administration, 200 C Street SW., Washington, D.C. 20264:

Requests for NAS-NRC report: Press Relations Office (CE-300).

Supplements (Identify with new drug application number): Office of Marketed Drugs (MD-300), Bureau of Medicine.

Original abbreviated new drug applications: Office of Marketed Drugs (MD-300), Bureau of Medicine.

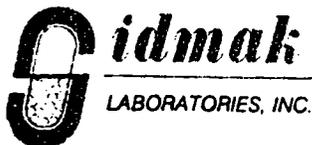
All other communications regarding this announcement: Special Assistant for Drug Efficacy Study Implementation (MD-16), Bureau of Medicine.

This notice is issued pursuant to the provisions of the Federal Food, Drug, and Cosmetic Act (secs. 502, 505, 52 Stat. 1050-53, as amended; 21 U.S.C. 352, 355) and under the authority delegated to the Commissioner of Food and Drugs (21 CFR 2.120).

Dated: September 4, 1969.

HERBERT L. LEY, Jr.,
Commissioner of Food and Drugs.

[P.R. Doc. 69-10376; Filed, Sept. 11, 1969;
8:46 a.m.]



17 WEST STREET • P.O. BOX 371 • EAST HANOVER, NJ 07936 • TELEPHONE: (201) 386-5566

CPY

August 22, 1983

Marvin Seife, M.D., Director
Division of Generic Drug Monographs
Office of the Associate Director for Drug Monographs
Office of Drugs
National Center for Drugs and Biologics
5600 Fishers Lane
Rockville, Maryland 20852

**ABBREVIATED
NEW DRUG APPLICATION**

Re: Abbreviated New Drug Application
Product: Disulfiram Tablets USP 500mg

DRAFT LABELING

Dear Dr. Seife:

Pursuant to section 505(b) of the Federal Food, Drug and Cosmetic Act, we are submitting herewith, in triplicate, an Abbreviated New Drug Application for the product mentioned above.

Included in this submission are:

1. Form 356-H
2. Volume No. 1 Copy No. 1 (Blue Folder)
3. Volume No. 1 Copy No. 2 (Red Folder)
4. Volume No. 1 Copy No. 3 (Yellow Folder)

Respectfully Submitted,

SIDMAK LABORATORIES, INC.

Satish Patel, Ph.D.
President

RECEIVED

AUG 24 1983

GENERIC DRUGS



THE PHARMACEUTICAL COMPANY