FOOD AND DRUG ADMINISTRATION
Center for Drug Evaluation and Research

Psychopharmacologic Drugs Advisory Committee (PDAC) Meeting
Marriott Inn and Conference Center
University of Maryland University College (UMUC), Adelphi, MD
December 12, 2011

DRAFT Questions to the Committee

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1) Adasuve is intended to be a rapidly acting antipsychotic for use in treating agitation. There are, however, no direct comparisons of Adasuve with other products approved for the treatment of agitation in patients with schizophrenia or bipolar mania.

a. Is it possible to make valid comparisons of the onset of effect for Adasuve and other drugs in the class in the absence of head-to-head studies? **(DISCUSSION)**
b. If yes, how does time of onset of this product compare with that of other products approved for this indication? Is this difference a substantial advantage? **(DISCUSSION)**
c. Would comparative studies with currently approved intramuscular products be needed to demonstrate an advantage(s) for this product? **(DISCUSSION)**

2) Adasuve clearly can cause bronchospasm, a particular concern for patients with asthma. There is uncertainty as to whether agitated patients can be properly assessed for an asthma history. Do you think the sponsor's proposed Risk Evaluation and Mitigation Strategy (REMS) would ensure that the benefits of Adasuve outweigh its risks? **(DISCUSSION)**

a. If yes, could the REMS be less burdensome and still accomplish the level of safety necessary to ensure safe use of this product? **(DISCUSSION)**
b. If no, would strengthening the REMS ensure that the benefits of Adasuve outweigh its risks? How should the REMS be strengthened? **(DISCUSSION)**
c. Would additional steps, beyond strengthening REMS, be needed? **(DISCUSSION)**

3) Does the committee have any recommendations regarding the proposed post-marketing observational study? Should an observational study be considered a preapproval requirement, or would it be sufficient to conduct such a study post-approval? **(DISCUSSION)**

4) Does the committee conclude that Adasuve (loxapine) inhalation powder has been shown to be effective as a treatment for agitation in patients with schizophrenia or bipolar mania? **(VOTE: Yes/No/Abstain)**

5) Does the committee conclude that Adasuve (loxapine) inhalation powder has been shown to be acceptably safe for use as a treatment for agitation in patients with schizophrenia or bipolar mania:

a. When used in conjunction with the REMS proposed by the sponsor? **(VOTE: Yes/No/Abstain)**
b. When used in conjunction with the REMS proposed by FDA? **(VOTE: Yes/No/Abstain)**

6) Does the committee conclude that Adasuve (loxapine) inhalation powder should be approved for use as a treatment for agitation in patients with schizophrenia or bipolar mania? **(VOTE: Yes/No/Abstain)**

7) Is a REMS necessary to ensure that the benefits of Adasuve outweigh the risks? **(VOTE: Yes/No/Abstain)**