



**Cardiovascular & Renal Drugs
Advisory Committee Meeting
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Diovan[®] (valsartan) Introduction

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Diovan[®]

Current Profile

- ◆ **Diovan is an angiotensin II antagonist**
 - **Acts on the AT₁ receptor subtype**
- ◆ **Approved for the treatment of hypertension in 1996**
 - **Now available in over 80 countries**
 - **Over 3.6 million patient-years experience worldwide**

Diovan®

Development Program in Heart Failure

Study 107 (Val-HeFT)

- ◆ Morbidity/mortality trial
- ◆ Approximately 5,000 patients

Studies 103, 104, 106, 110

- ◆ Hemodynamics
- ◆ Neurohormones
- ◆ Exercise tolerance
- ◆ QoL

Diovan[®] Regulatory History

- ◆ **Agreements with FDA on April 29, 1996**
 - **Val-HeFT may employ 2 primary endpoints**
 - **All-cause mortality**
 - **Combined endpoint of morbidity and mortality**
 - **Val-HeFT acceptable for stand alone registration**

Summary of Heart Failure Results

- ◆ **Diovan[®] improves morbidity**
 - **Reduces hospitalizations for heart failure**
 - **Slows progression of heart failure**
 - **Improves NYHA functional class and ejection fraction**
 - **Improves signs and symptoms of heart failure**
 - **Improves quality of life versus placebo**
- ◆ **Most common adverse experiences were dizziness and hypotension**

Proposed Indication

Diovan[®] (valsartan) is indicated for the treatment of heart failure (NYHA Class II – IV) in patients receiving usual therapy such as diuretics, digitalis, and either ACE inhibitors or beta-blockers; presence of all these standard therapies is not mandatory

Agenda

Introduction Mathias Hukkelhoven, PhD

Clinical Efficacy Data

Efficacy Subgroup Analyses Jay N. Cohn, MD

Safety Data Robert Glazer, MD

Benefit:Risk Discussion Jay N. Cohn, MD

Questions and Answers

Consultants

Peter E. Carson, MD Associate Professor
Georgetown University
Chairman, Endpoint
Committee

Lloyd Fisher, PhD Professor Emeritus
University of Washington