DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration
Rockville MD 20857

FOI

DEC 21 1998

TRANSMITTED VIA FACSIMILE

Mary Jane Nehring
Director, Marketed Products Support
Worldwide Regulatory Affairs
Schering Corporation
2000 Galloping Hill Road
Kenilworth, NJ 07033

RE: NDA# 20-486
Vanceril 84 mcg Double Strength (beclomethasone dipropionate) Inhalation Aerosol
MACMIS ID# 7407

Dear Ms. Nehring:

As part of its monitoring and surveillance program, the Division of Drug Marketing, Advertising, and Communications (DDMAC) has reviewed promotional materials (e.g., VDM0199/22288601 visual aid 11/98) for Vanceril 84 mcg Double Strength (beclomethasone dipropionate) Inhalation Aerosol. DDMAC concluded that these materials contain various comparative and noncomparative promotional claims that are false, lacking in fair balance, or otherwise misleading and therefore violative of the Federal Food, Drug, and Cosmetic Act and implementing regulations.

Off-Label Use: Lung Damage Prevention Claim

On August 24, 1998, in various Vanceril 84 mcg promotional materials, DDMAC objected to various off-label use claims regarding prevention of irreversible lung damage. In its written response to DDMAC's letter, Schering stated among other things, that it had reviewed DDMAC's comments and "are prepared to make the modifications that we believe will address your concerns." Schering elected not to submit proposed revised Vanceril 84 mcg mockup materials for DDMAC comment.

In the currently disseminated sales aid on page 3, a similarly violative revised lung damage prevention claim is made, "Help control the inflammation that may cause long-term lung damage." Such an off-label use claim is false or misleading. Neither Vanceril product is indicated for prevention of irreversible lung damage and the theory that prevention of lung inflammation with inhaled corticosteroids results in the prevention of airway remodeling or irreversible lung damage has not yet been established in humans.

Lack of Fair Balance

The sales aid lacks fair balance and minimizes the risk information. On page 7, the presentation of side effects and contraindications is not presented with a prominence and readability reasonably comparable with the presentation of information relating to the effectiveness of the drug, taking into account all implementing factors. Furthermore, the safety claim "...the incidence of adverse events for Vanceril 42 mcg and Vanceril 84 mcg was similar to that reported for placebo" lacks qualification to disclose the percent incidence of adverse events for the two active drugs and placebo. Moreover, as previously discussed in Vanceril 84 mcg launch comments by DDMAC on January 24, 1997, it is misleading to apply various data and claims that are specific to Vanceril 42 mcg to imply a similar safety record for Vanceril 84 mcg.

Misleading Head-to-Head Bar Graph Comparison Between
Beclomethasone Dipropionate and Montelukast Sodium After 12 Weeks

On page 4, the bar graph comparison between a non-US formulation of beclomethasone dipropionate (BDP) and Singulair (montelukast sodium) after drug washout following 12 weeks of treatment is misleading. The presentation overstates the efficacy of BDP because the graph is not adjusted for placebo effect (i.e., through display of a placebo arm).

Misleading Selective Presentation of "Stepwise Approach for Managing Asthma"

On page 3, Schering has presented a misleading bar graph presentation of the "Stepwise Approach for Managing Asthma" adapted from the National Asthma Education and Prevention Program. Expert Panel Report 2. Guidelines for the Diagnosis and Management of Asthma. (National Heart, Lung, and Blood Institute. National Institutes of Health. Bethesda, Maryland: April 1997). The bar graph summarizes the treatment algorithm for asthma therapy. However, it is misleading because it selectively omits mention of leukotriene inhibitors as an alternative long-term controller therapy to oral inhaled corticosteroids or cromolyn/nedocromil for mild persistent asthma.

Schering should immediately cease its dissemination and use of all promotional materials for Vanceril 84 mcg that contain the same or similar violations. Schering should respond in writing no later than January 6, 1999, and should include a list of similarly violative materials and a description of its method of discontinuing its use. Schering's response should be directed to the undersigned by facsimile at (301) 594-6771, or at the Food and Drug Administration, Division of Drug Marketing, Advertising and Communications, HFD-40, Rm 17-B-20, 5600 Fishers Lane, Rockville, MD 20857. DDMAC reminds Schering that only written communications are considered official.

Mary Jane Nehring
Schering Corporation
NDA# 20-486

In all future correspondence regarding this particular matter, please refer to MACMIS ID# 7407 in addition to the NDA number.

Sincerely,

Joan Hankin, JD
Regulatory Review Officer
Division of Drug Marketing,
Advertising, and Communications