Food and Drug Administration
Center for Drug Evaluation and Research

Summary Minutes of the Anesthetic and Analgesic Drug Products Advisory Committee and the Drug Safety and Risk Management Advisory Committee Joint Meeting
April 5, 2017

Location: Tommy Douglas Conference Center, 10000 New Hampshire Avenue, Silver Spring, Maryland.

Topic: On April 5, 2017, the committees discussed new drug application (NDA) 209777, for oxycodone hydrochloride immediate-release oral tablets, submitted by Inspirion Delivery Sciences, LLC., with the proposed indication of management of moderate to severe pain where the use of an opioid analgesic is appropriate. The product has been formulated with properties intended to deter abuse, and the applicant has submitted data to support these abuse-deterrent properties for this product. The committees discussed the overall risk-benefit profile of the product, and whether the applicant has demonstrated abuse-deterrent properties for their product that would support labeling.

These summary minutes for the April 5, 2017, joint meeting of the Anesthetic and Analgesic Drug Products Advisory Committee and the Drug Safety and Risk Management Advisory Committee of the Food and Drug Administration were approved on April 19, 2017.

I certify that I attended the April 5, 2017, joint meeting of the Anesthetic and Analgesic Drug Products Advisory Committee and the Drug Safety and Risk Management Advisory Committee of the Food and Drug Administration and that these minutes accurately reflect what transpired.

/s/
Stephanie L. Begansky, PharmD
Designated Federal Officer, AADPAC

/s/
Raeford E. Brown, Jr., MD, FAAP
Chairperson, AADPAC
Summary Minutes of the Anesthetic and Analgesic Drug Products Advisory Committee and the Drug Safety and Risk Management Advisory Committee Joint Meeting
April 5, 2017

The following is the final report of the joint meeting of the Anesthetic and Analgesic Drug Products Advisory Committee and the Drug Safety and Risk Management Advisory Committee, held on April 5, 2017. A verbatim transcript will be available in approximately six weeks, sent to the Division of Analgesia, Anesthesia and Addiction Products and the Office of Surveillance and Epidemiology, and posted on the FDA website at:
http://www.fda.gov/AdvisoryCommittees/CommitteesMeetingMaterials/Drugs/AnestheticAndAnalgesicDrugProductsAdvisoryCommittee/ucm486848.htm and

All external requests for the meeting transcript should be submitted to the CDER Freedom of Information Office.

The Anesthetic and Analgesic Drug Products Advisory Committee and the Drug Safety and Risk Management Advisory Committee of the Food and Drug Administration, Center for Drug Evaluation and Research, met on April 5, 2017, at the Tommy Douglas Conference Center, 10000 New Hampshire Avenue, Silver Spring, Maryland. Prior to the meeting, the members and temporary voting members were provided the briefing materials from the FDA and Inspirion Delivery Services, LLC. The meeting was called to order by Raeford E. Brown, Jr., MD, FAAP (Chairperson). The conflict of interest statement was read into the record by Stephanie Begansky, PharmD (Designated Federal Officer). There were approximately 150 people in attendance. There were eight Open Public Hearing (OPH) speaker presentations.

Issue: The committees discussed new drug application (NDA) 209777, for oxycodone hydrochloride immediate-release oral tablets, submitted by Inspirion Delivery Sciences, LLC., with the proposed indication of management of moderate to severe pain where the use of an opioid analgesic is appropriate. The product has been formulated with properties intended to deter abuse, and the applicant has submitted data to support these abuse-deterrent properties for this product. The committees discussed the overall risk-benefit profile of the product, and whether the applicant has demonstrated abuse-deterrent properties for their product that would support labeling.

Attendance:

Anesthetic and Analgesic Drug Products Advisory Committee Members Present (Voting):
Brian T. Bateman, MD, MSc; Raeford E. Brown, Jr., MD, FAAP (Chairperson); David S. Craig, PharmD; Jeffrey L. Galinkin, MD, FAAP; Anita Gupta, DO, PharmD; Jennifer G. Higgins, PhD (Consumer Representative); Ronald S. Litman, DO; Mary Ellen McCann, MD, MPH; Abigail B. Shoben, PhD; Kevin L. Zacharoff, MD, FACIP, FACPE, FAAP

Anesthetic and Analgesic Drug Products Advisory Committee Member Present (Non-Voting): W. Joseph Herring, MD, PhD (Industry Representative)
Drug Safety and Risk Management Advisory Committee Members Present (Voting):
Niteesh K. Choudhry, MD, PhD; Christopher H. Schmid, PhD; Terri L. Warholak, PhD, RPh, FAPhA

Drug Safety and Risk Management Advisory Committee Members Not Present (Voting):
Kelly Besco, PharmD, FISMP, CPPS; Tobias Gerhard, PhD, RPh; Suzanne B. Robotti (Consumer Representative); Anne-Michelle Ruha, MD, FACMT; Andy S. Stergachis, PhD, RPh; Til Sturmer, MD, MPH, PhD; Linda Tyler, PharmD, FASHP; Almut Winterstein, RPh, PhD, FISPE

Drug Safety and Risk Management Advisory Committee Member Present (Non-Voting):
Linda Scarazzini, MD, RPh (Industry Representative)

Temporary Members (Voting): Gregory E. Amidon, PhD; Charles W. Emala, Sr., MS, MD; Alan D. Kaye, MD, PhD; Arthur H. Kibbe, RPh, PhD; Elaine H. Morrato, DrPH, MPH; Joseph O’Brien, MBA (Patient Representative); Sharon L. Walsh, PhD

FDA Participants (Non-Voting): Sharon Hertz, MD; Ellen Fields, MD, MPH; Judy Staffa, PhD, RPh; Joshua Lloyd, MD

Designated Federal Officer (Non-Voting): Stephanie Begansky, PharmD

Open Public Hearing Speakers: Michael Mandale (Solstice Counseling and Wellness Center); Dan Cohen (Abuse Deterrent Coalition); Charlie Cichon (National Association of Drug Diversion Investigators); Megan Polanin, PhD (National Center for Health Research Cancer Prevention and Treatment Fund); Fred Wells Brason II (Project Lazarus); Edwin R. Thompson (Pharmaceutical Manufacturing Research Services, Inc.); Wendy Foster (US Pain Foundation); Shruti Kulkarni (Center for Lawful Access and Abuse Deterrence)

The agenda was as follows:

Call to Order and Introduction of Committee

Raeford E. Brown, Jr., MD, FAAP
Chairperson, AADPAC

Conflict of Interest Statement

Stephanie L. Begansky, PharmD
Designated Federal Officer, AADPAC

FDA Introductory Remarks

Sharon Hertz, MD
Director
Division of Anesthesia, Analgesia, and Addiction Products (DAAAP)
Office of Drug Evaluation II (ODE-II)
Office of New Drugs (OND), CDER, FDA
**APPLICANT PRESENTATIONS**

**Inspirion Delivery Sciences, LLC**

**Introduction**
Stefan Aigner, MD  
Co-founder/Chief Executive Officer  
Inspirion Delivery Sciences, LLC

**Public Health Need for Abuse-deterring Immediate-Release Opioid Analgesics**
Richard C. Dart, MD, PhD  
Director, Rocky Mountain Poison and Drug Center  
Professor of Emergency Medicine  
University of Colorado School of Medicine  
Executive Director, RADARS System

**In vitro Physical Manipulation and Chemical Extraction Studies**
Robert Bianchi  
President and Chief of Scientific and Technical Affairs Prescription Drug Research Center

**Intranasal Human Abuse Potential Study**
Lynn Webster, MD  
Vice President, Scientific Affairs  
PRA Health Sciences

**Clinical Perspective**
Jeffrey Gudin, MD  
Director, Pain Management and Palliative Care  
Englewood Hospital and Medical Center

**Clarifying Questions**

**BREAK**

**FDA PRESENTATION**

Drug Utilization Patterns for Oxycodone-Containing Analgesics, 2009-2016
Tracy Minh Pham, PharmD  
Drug Utilization Data Analyst  
Division of Epidemiology II (DEPI-II)  
Office of Pharmacovigilance and Epidemiology  
Office of Surveillance and Epidemiology (OSE)  
CDER, FDA

**Clarifying Questions**

**LUNCH**

Open Public Hearing

**Charge to the Committee**
Sharon Hertz, MD
Questions to the Committee/
Committee Discussion

BREAK

Questions to the Committee/
Committee Discussion (cont.)

ADJOURNMENT

Questions to the Committee:

1. **DISCUSSION**: Please discuss whether there are sufficient data to support a finding that RoxyBond (oxycodone hydrochloride immediate-release tablets) has properties that can be expected to deter abuse, commenting on support for abuse-deterrent effects for each of the following routes of abuse:

   a. Nasal
   b. Intravenous

**Committee Discussion**: The majority of the committee concurred that there is sufficient data to support a finding that RoxyBond has properties that can be expected to deter abuse by the intravenous and nasal routes. The committee agreed that the abuse-deterrent physiochemical properties designed to deter both nasal and intravenous abuse; the in vitro results demonstrating decreased potential for manipulation, extraction, and syringeability; and the results from the intranasal human abuse potential study demonstrating decreased drug liking and willingness to take the drug again supported this finding. Several committee members mentioned that they were concerned with the lack of data surrounding injury potential when injecting the excipients in this product and encouraged the Agency and the Applicant to consider this. Please see the transcript for details of the committee discussion.

2. **VOTE**: If approved, should RoxyBond be labeled as an abuse-deterrent product by the nasal route of abuse?

**Vote Result**: Yes: 19 No: 1 Abstain: 0

**Committee Discussion**: The majority of the committee voted “Yes,” agreeing that RoxyBond should be labeled as an abuse-deterrent product by the nasal route of abuse if approved. These committee members stated that, on the whole, the pharmacokinetic and pharmacodynamic data provided were compelling and showed that the product will make it more difficult for some people to abuse it. The committee member who voted “No” stated that the definition of abuse deterrence was unclear. Please see the transcript for details of the committee discussion.
3. **VOTE:** If approved, should RoxyBond be labeled as an abuse-deterrent product by the intravenous route of abuse?

   **Vote Result:**  
   Yes: 16  No: 4  Abstain: 0

   **Committee Discussion:** The majority of the committee voted “Yes,” agreeing that RoxyBond should be labeled as an abuse-deterrent product by the intravenous route of abuse if approved. These committee members stated that the in vitro data, drug dissolution data, gelling properties of the product, and large injection volume necessary were convincing factors in their vote. Many committee members stated that they would like to see a warning of some sort about the lack of knowledge surrounding possible outcomes of injecting the product’s excipients. One of the committee members who voted “No” stated that the intravenous abuse-deterrent steps were relatively easy to accomplish. Other committee members who voted “No” opined that they were worried about the unknown risks of injecting the product’s excipients. Please see the transcript for details of the committee discussion.

4. **VOTE:** Should RoxyBond be approved for the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate?

   **Vote Result:**  
   Yes: 19  No: 0  Abstain: 1

   **Committee Discussion:** The majority of the committee voted “Yes,” that RoxyBond should be approved for the management of pain severe enough to require an opioid analgesic and for which alternative treatments are inadequate. These committee members stated that this product shows an incremental advantage in abuse-deterrence and meets an important public health need. Some committee members stated that they support approval of this product with clear labeling describing the abuse-deterrent studies so that prescribers can decide who is a proper candidate for this abuse-deterrent formulation versus available non-abuse-deterrent formulations. Several committee members encouraged the Agency and Applicant to explore the use of this product in children. The committee member who abstained from voting stated that having another abuse-deterrent formulation on the market will just detract from addressing the opioid epidemic, even if RoxyBond isn’t labeled as an abuse-deterrent formulation, as it is still formulated as such. Please see the transcript for details of the committee discussion.

The meeting was adjourned at approximately 3:00 p.m.