

**FOOD AND DRUG ADMINISTRATION (FDA)**  
Center for Drug Evaluation and Research (CDER)

*Joint Meeting of the Psychopharmacologic Drugs Advisory Committee (PDAC) and the  
Drug Safety and Risk Management Advisory Committee (DSaRM)*  
FDA White Oak Campus, Building 31 Conference Center, the Great Room (Rm. 1503)  
10903 New Hampshire Avenue, Silver Spring, Maryland  
November 2, 2018

**QUESTIONS**

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1. **VOTE:** Has substantial evidence been presented by the Applicant to support a claim of effectiveness for brexanolone for the treatment of postpartum depression?
2. **VOTE:** Has the Applicant adequately characterized the safety profile of brexanolone for the treatment of postpartum depression? Do you believe the loss-of-consciousness events have been characterized sufficiently to enable safe use of brexanolone?
3. **DISCUSSION:** There is evidence that both a 60 µg/kg/h and a 90 µg/kg/h dose (after 24 hours) are effective. Please discuss, if approved, which dose should be the recommended dose.
  - Start at 90 µg/kg/h with the option to decrease the dose to 60 µg/kg/h based on tolerability
  - Start at 60 µg/kg/h with the option to increase the dose to 90 µg/kg/h based on response
4. **DISCUSSION:** Discuss whether the FDA's proposed REMS would ensure safe use of brexanolone. If no, please discuss what additional safeguards would be needed
5. **VOTE:** Given the efficacy as presented, and when used in a certified facility by qualified staff and as outlined in the FDA's proposed REMS, do the benefits outweigh the risks of brexanolone for the treatment of postpartum depression?
6. **DISCUSSION:** If approved, what additional data will be needed to support safe use of brexanolone at home and address outstanding issues?