Location: Please note that due to the impact of this COVID-19 pandemic, all meeting participants will be joining this advisory committee meeting via an online teleconferencing platform.

Topic: The committees discussed new drug application (NDA) 209257, proposed tradename, HYDEXOR, a fixed-dose combination oral tablet, submitted by Ólas Pharma, Inc., that contains hydrocodone, acetaminophen, and promethazine, for the short-term (not to exceed 3 days) management of acute post-operative pain severe enough to require an opioid analgesic and the prevention of opioid-induced nausea and vomiting in patients who are at risk for or have a history of nausea and vomiting.

These summary minutes for the November 2, 2020 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 December 3, 2020.

I certify that I attended the November 2, 2020 joint meeting of the Anesthetic and Analgesic Drug Products Advisory Committee (AADPAC) and the Drug Safety and Risk Management Advisory Committee (DSaRM) of the Food and Drug Administration and that these minutes accurately reflect what transpired.

/s/ Moon Hee V. Choi, PharmD
Designated Federal Officer, AADPAC

/s/ Brian T. Bateman, MD
Acting Chairperson, AADPAC
The Anesthetic and Analgesic Drug Products Advisory Committee (AADPAC) and the Drug Safety and Risk Management Advisory Committee (DSaRM) of the Food and Drug Administration, Center for Drug Evaluation and Research, met jointly on November 2, 2020. The meeting presentations were heard, viewed, captioned, and recorded through an online teleconferencing platform. Prior to the meeting, the members and temporary voting members were provided the briefing materials from the FDA and Ólas Pharma, Inc. The meeting was called to order by Brian T. Bateman, MD (Chairperson). The conflict of interest statement was read into the record by Moon Hee V. Choi, PharmD (Designated Federal Officer). There were approximately 115 people online. There were a total of five Open Public Hearing (OPH) speaker presentations.

A verbatim transcript will be available, in most instances, at approximately ten to twelve weeks following the meeting date.

Agenda:

The committees discussed new drug application (NDA) 209257, proposed tradename, HYDEXOR, a fixed-dose combination oral tablet, submitted by Ólas Pharma, Inc., that contains hydrocodone, acetaminophen, and promethazine, for the short-term (not to exceed 3 days) management of acute post-operative pain severe enough to require an opioid analgesic and the prevention of opioid-induced nausea and vomiting in patients who are at risk for or have a history of nausea and vomiting.

Attendance:

Anesthetic and Analgesic Drug Products Advisory Committee Members Present (Voting):
Basavana G. Goudra, MD, FRCA, FCARSCI; Jennifer Higgins, PhD (Consumer Representative); Maryam Jowza, MD; Maura S. McAuliffe, CRNA, MSN, MSNA, PhD, FAAN; Abigail B. Shoben, PhD; Michael Sprintz, DO, DFASAM; Sherif Zaafran, MD, FASA; Kevin L. Zacharoff, MD, FACIP, FACPE, FAAP

Anesthetic and Analgesic Drug Products Advisory Committee Members Not Present (Voting): Richard D. Urman, MD, MBA; Lonnie Zeltzer, MD

Anesthetic and Analgesic Drug Products Advisory Committee Member Present (Non-Voting): Jay Horrow, MD, MS, FACC (Industry Representative)

Drug Safety and Risk Management Advisory Committee Members Present (Voting):
Karim Anton Calis, PharmD, MPH, FASHP, FCCP; Laurel A. Habel, MPH, PhD; Sonia Hernandez-Diaz, MD, MPH, DrPH; Collin A. Hovinga, PharmD, MS, FCCP; Steven B. Meisel, PharmD, CPPS; Lewis S. Nelson, MD
The agenda was as follows:

Call to Order and Introduction of Committee

**Brian T. Bateman, MD**
Acting Chairperson, AADPAC

Conflict of Interest Statement

**Moon Hee V. Choi, PharmD**
Designated Federal Officer, AADPAC

FDA Opening Remarks

**Rigoberto Roca, MD**
Division Director
Division of Anesthesiology, Addiction Medicine and Pain Medicine, Office of Neuroscience
Office of New Drugs, CDER, FDA

**APPLICANT PRESENTATIONS**

Ölas Pharma, Inc.

Introduction: Today’s Purpose

**George A. Scott, Jr., JD, MBA**
Executive Vice President of Corporate Affairs & Chief Legal Officer
Ölas Pharma, Inc.
Jupiter, Florida

Clinical Efficacy and Safety

**Bernard P. Schachtel, MD**
Chief Scientific Officer
Ölas Pharma, Inc.
Jupiter, Florida
Question to the Committees:

1. VOTE: Based on the revised indication and proposed Risk Evaluation and Mitigation Strategy (REMS), which restricts the intended population and duration of use for Hydexor significantly from the originally submitted application, have the safety concerns been adequately addressed through labeling/REMS?

   a. If you voted “No,” please comment on what additional issues the Applicant needs to address.

   Vote Result: Yes: 7 No: 14 Abstain: 0

Committee Discussion: The majority of the committee members voted “No”, agreed that safety concerns were not adequately addressed through labeling/REMS based on the revised indication and proposed REMS, which restricts the intended population and duration of use for Hydexor significantly from the originally submitted application. Several of these Committee members who voted “No” agreed that the term “certified, medically supervised
healthcare setting” needed clarification as it is too broad, and expressed concerns that the term could potentially be misinterpreted and used in unintended settings. In addition, these Committee members made note that the population that these studies were done in (post-bunionectomy, post-oral surgery) are not likely situations where this medication would be used as specified in the REMS, and thus would not be applicable to real-world use. Some Committee members noted a lack of evidence and under-representation in the data of use by the elderly population that would have been beneficial as this population typically has a higher potential to be affected by the sedative side effects of Hydexor that puts them at an increased fall-risk. Other Committee members who voted “No” noted additional issues the Applicant needs to address such as methods to better identify high-risk patients requiring prophylactic anti-emetic therapy (to avoid unintended consequences of exposing patients to a CNS depressant without a clear benefit) and how to address rescue/breakthrough pain. The Committee members who voted “Yes” agreed that the Applicant has adequately addressed concerns from the originally submitted application based on the revised indication and proposed REMS. Please see the transcript for details of the Committees’ discussion.

The meeting was adjourned at approximately 1:08 p.m.