

Oct. 10, 2023

Lemrey "Al" Carter, MS, PharmD, RPh Executive Director/Secretary National Association of Boards of Pharmacy 1600 Feehanville Dr. Mount Prospect, IL 60056

Dear Dr. Carter:

The purpose of this letter is to bring to the attention of the National Association of Boards of Pharmacy information related to compounded drug products containing semaglutide or semaglutide salts (e.g., semaglutide acetate or semaglutide sodium).

Semaglutide is a glucagon-like peptide-1 (GLP-1) receptor agonist and the active ingredient in several FDA-approved drug products: Rybelsus (semaglutide) tablets, indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus; Ozempic (semaglutide) injection, indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus and to reduce the risk of major adverse cardiovascular events (cardiovascular death, non-fatal myocardial infarction or non-fatal stroke) in adults with type 2 diabetes mellitus and established cardiovascular disease; and Wegovy (semaglutide) injection, indicated as an adjunct to a reduced calorie diet and increased physical activity for chronic weight management in certain adult and pediatric patients.

FDA is aware of increased interest in compounded semaglutide drug products. In some cases, compounded drugs can serve an important role for patients whose medical needs cannot be met by an FDA-approved drug product. However, compounded drugs, including compounded semaglutide drug products, are not FDA-approved and do not receive premarketing review for safety, efficacy, and quality. Ozempic and Wegovy currently appear on FDA's drug shortage list. When a drug is in shortage, compounders may be able to prepare a compounded version of that drug if they meet certain conditions in the Federal Food, Drug, and Cosmetic Act (FD&C Act). FDA has received adverse event reports and complaints concerning these compounded drug products.

There are currently no FDA-approved products containing a semaglutide salt (e.g., semaglutide acetate or semaglutide sodium) as an active ingredient. Although FDA has carefully evaluated the chemical and pharmacologic properties of semaglutide in the context of the approved drug products, FDA is not aware of information regarding the chemical and pharmacologic properties of the semaglutide salts (e.g., semaglutide sodium or semaglutide acetate) or whether the semaglutide salts have the same safety or efficacy profile as semaglutide.



Compounded Drug Products Containing Semaglutide Salts

FDA is not aware of any basis in the FD&C Act for compounding a drug using semaglutide salts such as semaglutide sodium and semaglutide acetate.

Sections 503A and 503B of the FD&C Act describe the conditions that must be satisfied for compounded human drug products to be exempt from certain sections of the FD&C Act, including the requirements of premarket approval and labeling with adequate directions for use. Among the conditions of sections 503A and 503B are restrictions on the bulk drug substances (active pharmaceutical ingredients or APIs) that may be used to compound human drug products.

Specifically, under section 503A (which applies to drugs products compounded outside an outsourcing facility registered by FDA, e.g., by licensed pharmacists in a State licensed pharmacy or a Federal facility, or by licensed physicians), the drug product must be compounded using bulk drug substances that (1) comply with the standards of an applicable United States Pharmacopeia (USP) or National Formulary (NF) monograph, if a monograph exists, and the USP chapter on pharmacy compounding; (2) if such a monograph does not exist, are components of drugs approved by FDA; or (3) if such a monograph does not exist and the bulk drug substances are not components of a drug approved by FDA, appear on a list developed by FDA through regulations (the 503A Bulks List). Semaglutide salts are not the subject of an applicable USP or NF monograph, are not components of an FDA-approved drug product, and do not appear on the 503A Bulks List.

For compounded drug products to qualify for the exemptions under section 503B, they must be compounded in an outsourcing facility that does not compound drugs using bulk drug substances unless the bulk drug substance (1) appears on a list established by FDA identifying bulk drug substances for which there is a clinical need (the 503B Bulks List), or (2) the drug compounded from such bulk drug substances appears on FDA's drug shortage list at the time of compounding, distribution and dispensing. Semaglutide salts do not appear on the 503B Bulks List, nor do products containing semaglutide salts appear on FDA's drug shortage list.

Compounded Drug Products Containing Semaglutide

Semaglutide is a component of an FDA-approved drug product and appears on FDA's drug shortage list. Therefore, compounded drug products containing this API are potentially eligible for the exemptions under sections 503A or 503B of the FD&C Act, provided they meet all of the conditions in those sections. These sections describe the conditions that must be satisfied for compounded human drug products to be exempt from certain sections of the FD&C Act, including the requirements of premarket approval and labeling with adequate directions for use.

While compounded drug products containing semaglutide may be lawfully marketed under federal law, please be advised that FDA does not evaluate the safety, effectiveness, or quality of compounded drug products before such drugs are marketed. As stated, FDA has received an increased number of adverse event reports and complaints concerning these compounded drug



products.

We are also sending this letter to the Federation of State Medical Boards to facilitate communication among associations with shared goals regarding these matters.

We encourage you to share the information in this letter with your members. We look forward to continuing to work with you on matters related to drug compounding. If you have questions, please contact the Office of Compounding Quality and Compliance at compounding@fda.hhs.gov.

Sincerely,

F. Gail Bormel, RPh, JD Director CDER Office of Compounding Quality and Compliance