OPDP Update on Oversight of Prescription Drug Promotion

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Topics

- Policy and Guidance Development
- Enforcement Overview and Analysis

Guidance Development

- Seven draft guidances published since January 2014
  - 2 on the distribution of scientific and medical publications
  - 3 on social media
  - 1 on consumer brief summaries
  - 1 on electronic submissions

- Follows Good Guidance Practices (GGPs)
  - Comments submitted to docket of draft guidances
  - Comments are reviewed and considered and may lead to revisions to draft guidances as they are is being finalized and published as final or draft

Distributing Scientific and Medical Publications on Unapproved New Uses – Recommended Practices

- Previous guidance (2009) addressed recommended practices for firms when they distribute certain scientific and medical publications that discuss unapproved new uses (off-label)
  - Scientific and medical journal articles
  - Reference texts
- Questions and comments received
  - Suggestions for more clarity about the distinction between practices for distribution of scientific/medical journal articles and reference texts
  - Suggestions to include clinical practice guidelines

Distributing Scientific and Medical Publications on Unapproved New Uses – Recommended Practices

- Responds to stakeholder comments by revising guidance
- Clarifies position on firms' distribution of reference texts
  - Based on differences between journal articles and reference texts
- Adds new section on clinical practice guidelines

Distributing Scientific and Medical Publications on Risk Information for Approved Drugs and Licensed Biological Products-Recommended Practices

- Focuses on distribution of scientific and medical journal articles that discuss new risk information for approved uses of approved drugs and biological products

- Addresses questions from our stakeholders
  - Regarding FDA's position on firms' dissemination of new scientific or medical information about the safety of approved uses of approved drugs
    - Independent of information on unapproved new uses

Distributing Scientific and Medical Publications on Risk Information for Approved Drugs and Licensed Biological Products-Recommended Practices

- Safety profile of a drug evolves throughout its lifecycle as the extent of exposure to the product increases
- Important that healthcare professionals receive new risk information
- Nothing in draft guidance is intended to change a firm's existing obligation under the FD&C Act, PHS Act, and implementing regulations to update the approved labeling of its products, to accurately reflect what is known about the safety profile of the drug, to ensure that the labeling is not false or misleading

Fulfilling Regulatory Requirements for Postmarketing Submissions of Interactive Promotional Media for Prescription Human and Animal Drugs and Biologics

- Factors taken into consideration to determine if product communications using interactive technologies are subject to FDA's postmarketing submission requirements

- FDA's recommendations for submitting interactive promotional materials

Factors in Determining Postmarketing Submission Requirements for Interactive Promotional Media

- Agency considers whether the firm, or anyone acting on its behalf, is influencing or controlling the promotional activity or communication
  - Responsible for product promotional communications on sites that are owned, controlled, created, influenced, or operated by, or on behalf of, the firm
  - Responsible if the firm collaborates on or has editorial, preview, or review privilege over the content

Submission of Sites for Which a Firm is Responsible

- At the time of initial display, submit in the site for which a firm is responsible on Form FDA 2253
- After the initial submission, if the site is non-restricted and remains unchanged other than displaying real-time information, the firm can submit a monthly updated listing of the site

Submission of Third-Party Sites in Which a Firm's Participation is Limited to Interactive Communications

- Submit the home page of the third-party site, along with the interactive page within the third-party site and the firm's first communication at the time of initial display
- After the initial submission, if the firm remains an active participant on the third-party site, and that site is non-restricted, the firm can submit a monthly updated listing of the site

Recommendations for Monthly Updates for Non-Restricted Sites

- Include a separate document for each site which includes:
  - Site name
  - URL
  - Date range
  - Cross-reference to the date of the most recent submission of the site

Internet/Social Media Platforms: Correcting Independent Third-Party Misinformation About Prescription Drugs and Medical Devices

Describes FDA's current thinking about how firms that voluntarily choose to correct misinformation related to their products should respond when that misinformation is created or disseminated by independent third parties on Internet/social media platforms

Within scope of guidance

- Communications that a firm is *not* responsible for
  - User-generated content (UGC) on a third-party site
  - UGC on a firm's own forum

Outside scope of guidance

- Communications that a firm *is* responsible for
  - A firm's own advertising or promotional labeling

"Appropriate corrective information"

- Relevant and responsive to the misinformation
- Limited and tailored to the misinformation
- Non-promotional in nature, tone, and presentation
- Accurate
- Consistent with the FDA approved labeling
- Supported by sufficient evidence
- Posted in conjunction with the misinformation
- Disclose that the person providing the corrective information is affiliated with the firm

Correcting a *Clearly Defined Portion* of a Forum

- A firm should
  - Describe the location or the nature of the misinformation that is being corrected
  - Define the portion of the forum it is correcting
  - Correct all the misinformation in the clearly defined portion

- A firm should not
  - Choose to correct only misinformation that portrays its product in a negative light
  - Define a portion so it only has to respond to negative misinformation

Other Options for Correcting Misinformation

- Contact the author of the misinformation
  - Provide corrective information to the author
  - Request the misinformation be removed
  - Ask the author to allow comments to be posted
- Contact the site administrator
  - Request the misinformation be removed
  - Ask the site administrator to allow comments to be posted

Internet/Social Media Platforms with Character Space Limitations – Presenting Risk and Benefit Information for Prescription Drugs and Medical Devices

Describes FDA's current thinking about how firms that choose to present benefit information should present both benefit and risk information within promotion on Internet/social media platforms with ***character*** space limitations

Within scope of guidance

- Online microblog messaging (e.g., Twitter)
- Online paid search (e.g., Google/Yahoo "sponsored links")
- Future ***character-space-limited*** Internet/social media platforms (long-term applicability)

Outside scope of guidance

- Product websites
- Webpages on social media networking platforms (e.g., individual product webpages on Facebook, YouTube)
- Online web banners

Communication of Risk Information

- Be presented together with benefit information within each individual message
- Include the most serious risks associated with the product
- Provide a mechanism, such as a hyperlink, to allow direct access to a more complete discussion of risk information about the product

Brief Summary and Adequate Directions for Use: Disclosing Risk Information in Consumer-Directed Print Advertisements and Promotional Labeling for Human Prescription Drugs

- Drafts published February 2015 and August 2015

- Responds to stakeholder requests for clarification for consumer brief summary
  - Clarifies risk information that should be included
  - Recommends formatting options

- Recommends the “consumer brief summary” be used in place of:
  - The traditional brief summary (risk portions of the PI) for consumer-directed print advertisements
  - The full PI for consumer-directed print promotional labeling

Recommendations regarding the "Consumer Brief Summary"

- Format # 1 – Prescription Drugs Facts Box
  - Similar to OTC Drug Facts Box
    - Standardized headings, e.g. Uses, Warning,
- Format #2 – Question and Answer
  - Present information in Q&A format

Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs

- Describes the various types of submissions of promotional materials and general considerations for submissions submitted in paper or electronic (eCTD) format
- Describes specific aspects of submission of promotional materials using module 1 of eCTD using version 3.3 or higher of the *us-regional-backbone file*

What is Required and When?

- What types of submissions are required?
  - Promotional materials submitted in fulfillment of the postmarketing reporting requirements (i.e. Form FDA 2253 submissions)
  - Presubmission of promotional materials for accelerated approval products

- When are they required?
  - 24 months after the issuance of ***this*** guidance in ***final*** form, firms will be required to submit all promotional submissions that fall within section 745A(a) electronically (e.g., in eCTD format)
  - Firms may—and are strongly encouraged to—submit electronically other types of promotional material submissions

How to contact us

- To begin the process of submitting a sample (as well as other technical questions), email the Electronic Submission Support Team at ESUB@fda.hhs.gov
- Email address for questions regarding the draft guidance or eCTD submissions to OPDP
  - OPDPeCTD@fda.hhs.gov
- Email address for general submission questions for OPDP
  - CDER-OPDP-RPM@fda.hhs.gov
- OPDP Phone number
  - 301-796-1200
- Submission address

  Food and Drug Administration
  Center for Drug Evaluation and Research
  5901-B Ammendale Road
  Beltsville, MD 20705-1266

Enforcement

Surveillance and Monitoring

- Disseminated materials submitted to FDA
  - Post-marketing submission requirements (Form FDA 2253)
- Conference attendance
- Complaints
- Bad Ad Program
  - Healthcare Professional Outreach Initiative

Most Common Violations Cited in Regulatory Letters in FY 2015

- Omission and minimization of risk information
- Omission of material facts
- Unsubstantiated comparative claims
- Overstatement of efficacy claims

TussiCaps Warning Letter

- Professional sales aid
- Violations included
  - Omission of material facts
  - Omission of risk information
- Indication:
  - TussiCaps is indicated for relief of cough and upper respiratory symptoms associated with allergy or a cold **in adults and children 6 years of age and older**.
- Contraindicated in children less than 6 years of age
  - Due to the risk of fatal respiratory depression
- Also PI indicates that caution should be exercised when administering to pediatric patients 6 years of age and older.

TussiCaps®

Hydrocodone polistirex (III)
Chlorpheniramine polistirex
extended-release capsules

Full-Strength 10 mg/8 mg Half-Strength 5 mg/4 mg

For the relief of cough and upper respiratory symptoms associated with colds or allergies

TUSSICAPS provides powerful, sustained, and affordable cough and cold relief in a capsule

TussiCaps

Hydrocodone polistirex (CII)
Chlorpheniramine polistirex
extended-release capsules

Full-Strength 10 mg/8 mg Half-Strength 5 mg/4 mg

Powerful Relief

- Efficacious, safe, and proven combination of ingredients provide cough and cold symptom relief

Each extended-release TUSSICAPS capsule contains the equivalent of

	Full-Strength	Half-Strength
Hydrocodone bitartrate	10 mg	5 mg
Chlorpheniramine maleate	8 mg	4 mg

in a polistirex formulation that provides for twice-daily dosing

Decongestant-free, sugar-free

Sustained Relief

- Extended relief from uncontrolled coughs eliminates the need for middle of the night dosing
- TUSSICAPS is dosed every 12 hours

12 HOUR DOSAGE

TussiCaps Warning Letter

- Omission of material facts
  - Page 1: For the relief of cough and upper respiratory symptoms associated with colds or allergies
    - Omission of “in adults and children 6 years of age and older”
  - Page 2: Image of coughing young child
- Contraindicated in children less than 6 years of age
  - Due to the risk of fatal respiratory depression
- Also PI indicates that caution should be exercised when administering to pediatric patients 6 years of age and older.

TussiCaps Warning Letter

- Omission of Risk Information
  - Efficacy claims made for TussiCaps but failed to present:
    - Any of the contraindications
    - Warnings and precautions about respiratory depression, head injury and increased intracranial pressure, acute abdominal conditions, obstructive bowel disease, and pediatric use
    - Association with drug abuse and dependence
    - Adverse reactions such as nausea and vomiting, sedation, drowsiness, mental clouding, impairment of mental and physical performance, anxiety, fear, dizziness, mood changes

OPDP Web Resources

- OPDP home page
  - http://www.fda.gov/AboutFDA/CentersOffices/OfficeofMedicalProductsandTobacco/CDER/ucm090142.htm
- OPDP organization listing
  - http://www.fda.gov/AboutFDA/CentersOffices/OfficeofMedicalProductsandTobacco/CDER/ucm154886.htm
- OPDP guidances
  - http://www.fda.gov/AboutFDA/CentersOffices/OfficeofMedicalProductsandTobacco/CDER/ucm109905.htm#Guidances
- Warning and untitled letters
  - www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/EnforcementActivitiesbyFDA/WarningLettersandNoticeofViolationLetterstoPharmaceuticalCompanies/default.htm

OPDP Contact Information

- **Telephone Number**
  - 301-796-1200
- **Fax Numbers**
  - 301-847-8444
  - 301-847-8445
- **Submission Address**
  - Food and Drug Administration
    Center for Drug Evaluation and Research
    Office of Prescription Drug Promotion
    5901-B Ammendale Road
    Beltsville, MD 20705-1266

Thank You!