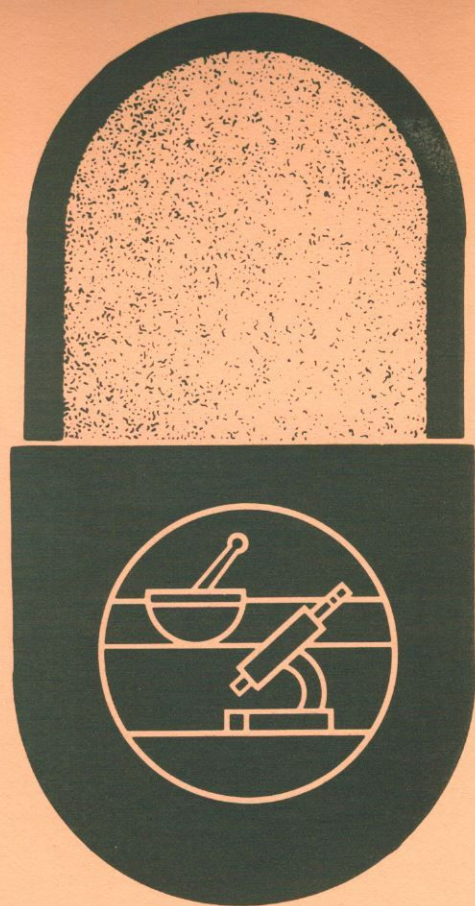


**CUMULATIVE
SUPPLEMENT 4
JAN'90-APR'90**



APPROVED DRUG PRODUCTS

**WITH
THERAPEUTIC EQUIVALENCE EVALUATIONS**

10TH EDITION

ST. LOUIS COLLEGE OF PHARMACY LIBRARY

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION**

Prepared By
Division of Drug Information Resources
Office of Management
Center for Drug Evaluation and Research, FDA

APPROVED DRUG PRODUCTS
with
THERAPEUTIC EQUIVALENCE EVALUATIONS
10TH EDITION

CUMULATIVE SUPPLEMENT 4

APRIL 1990

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APPROVED DRUG PRODUCTS
with
THERAPEUTIC EQUIVALENCE EVALUATIONS
10th EDITION
CUMULATIVE SUPPLEMENT 4
APRIL 1990

1.0 INTRODUCTION

1.1 HOW TO USE THE CUMULATIVE SUPPLEMENT

This Cumulative Supplement is one of a series of monthly updates to the Approved Drug Products with Therapeutic Equivalence Evaluations, 10th Edition (the List). The List is composed of four parts: approved prescription drug products with therapeutic equivalence evaluations, over-the-counter (OTC) drug products that require approved applications as a condition of marketing, drug products with Approval under Section 505 of the Act administered by the Division of Blood and Blood Products and products discontinued from marketing or products which have had their approval withdrawn for other than safety or efficacy reasons.

The Cumulative Supplement provides, among other things, information on newly approved drugs and, if necessary, revised therapeutic equivalence evaluations and updated patent and exclusivity data. The Addendum contains appropriate drug patent and exclusivity information required of the Agency by the "Drug Price Competition and Patent Term Restoration Act of 1984" for the Prescription, OTC, and Drug Products with Approval under Section 505 of the Act Administered by the Division of Blood and Blood Products lists.

The Patent and Exclusivity Lists are arranged in alphabetical order by active ingredient name. For those products with multiple active ingredients, only the first active ingredient (in alphabetical sort) will appear. In addition, the trade name will be displayed to the right of the active ingredient name for each product, along with the application number and product number (FDA's internal file number). All patents with their expiration dates are displayed for each application number. Use patents are indicated with the symbol "U" followed by a number representing a specific use. Exclusivity information for a specific drug is indicated by an abbreviation followed by the date upon which the exclusivity expires. Refer to the Exclusivity Terms section in the Patent and Exclusivity Information Addendum for an explanation of all codes and abbreviations.

Because all parts of the publication are subject to changes, additions, or deletions, the List must be used in conjunction with the most current Cumulative Supplement. Users may wish to place an asterisk (*) to the left of the ingredient(s) in the List to indicate that changes to that entry appear in the Cumulative Supplement.

Drug product information is provided in each Cumulative Supplement for completeness to assist in locating the proper place in the List for the revision. [Strength(s) which already exist in the List will not be repeated for context.] The effective date for the approved drug product (the earliest date a product may be marketed) appears, when appropriate, to the left of the approval date.

The presence of any therapeutic equivalence code indicates that the drug product is multisource; the deletion of a therapeutic equivalence code indicates that the drug product has become single source. (An infrequent exception exists when a therapeutic equivalence code is revised. In that case the deletion of the therapeutic equivalence code is followed immediately by the addition of the revised one.)

Additions new to the Prescription Drug Product List, OTC Drug Product List, Drug Products with Approval under Section 505 of the Act Administered by the Division of Blood and Blood Products List and the Patent and Exclusivity Data are indicated by the symbol >ADD> to the left of the line on which new information exists. The >ADD> symbol is then dropped in subsequent Cumulative Supplements for that item. A newly approved product is also identified by a lozenge (◊) to the right of its strength which remains throughout all Cumulative Supplements for this edition.

Deletions new to the Prescription Drug Product List, OTC Drug Product List, Drug Products with Approval under Section 505 of the Act Administered by the Division of Blood and Blood Products List and the Patent and Exclusivity Data are indicated by the symbol >DLT> (DELETE) to the left of the line containing overstruck print. The >DLT> symbol is dropped in subsequent Cumulative Supplements for that item. The overstruck print will remain in the Prescription Drug Product List and OTC Drug Product Lists in all Cumulative Supplements for this edition. However, the overstruck print in the Drug Products with Approval under Section 505 of the Act Administered by the Division of Blood and Blood Products List and the Patent and Exclusivity Data will be dropped in subsequent Cumulative Supplements.

Products discontinued from marketing or products which have had their approval withdrawn for other than safety or effectiveness reasons, will be flagged in this Cumulative Supplement with the "a" symbol to designate their non-marketed status. All products having a "a" symbol in the 12th Cumulative Supplement of the 10th Edition List will then be added to the "Discontinued Drug Product List" appearing in the 11th Edition.

1.2 PRODUCTS REQUIRING REVISED LABELING FOR FULL APPROVAL

Drug products in this category (1) initially received approval only on the basis of safety before effectiveness studies were required, or (2) were conditionally approved under the temporary exemption that allowed these products to be marketed while effectiveness studies were being conducted. Listed below are those drugs which are now required to revise their labeling and provide additional information necessary for full approval on the basis of requirements listed in the Federal Register. As approval is granted by the Agency for a specific product, based on additional information submitted by the applicant, the product will be included in the appropriate Drug Product List.

<u>Products</u>	<u>Federal Register Reference</u>
Nitroglycerin (capsule, controlled release;oral)	SEP 7, 1984 (49 FR 35428)
Nitroglycerin (tablet, controlled release;oral)	SEP 7, 1984 (49 FR 35428)
Nitroglycerin (tablet, controlled release;buccal)	JUL 5, 1985 (50 FR 27688)
Tranylcypromine Sulfate	MAR 22, 1984 (49 FR 10708)

1.3 APPLICANT (NAME) CHANGES

Because it is not practical to identify in the Cumulative Supplement each and every product involved when an applicant transfers its entire line of approved drug products to another applicant, or when an applicant changes its name, the cumulation of these transfers and name changes will be identified in this section only. Where only partial approved product lines are transferred between applicants, each approved product involved will appear as an applicant name change in the Cumulative Supplement.

APPLICANT (NAME) CHANGES

<u>FORMER APPLICANT (NAME)</u>	<u>NEW APPLICANT (NAME)</u>	<u>ABBREVIATED NAME</u>
BOOTS COMPANY USA INC	BOOTS PHARMS INC	BOOTS PHARM
MERRELL DOW PHARMACEUTICALS INC SUB DOW CHEMICAL CO	MERRRELL DOW PHARMS INC SUB MARION MERRELL DOW INC	MERRELL DOW PHARMS
MARION LABORATORIES INC	MARION MERRELL DOW INC	MARION MERRELL DOW
NORDISK INSULIN LABORATORIUM	NOVO NORDISK PHARMS INC	NOVO NORDISK PHARMS
NORDISK USA	NOVO NORDISK PHARMS INC	NOVO NORDISK PHARMS

APPLICANT (NAME) CHANGES

FORMER APPLICANT (NAME)

NEW APPLICANT (NAME)

ABBREVIATED NAME

PACO RESEARCH & DEVELOPMENT

PACO RESEARCH CORP

PACO RES

SQUIBB NOVO INC

NOVO NORDISK PHARMS INC

NOVO NORDISK PHARMS

TAKEDA-ABBOTT RESEARCH
& DEVELOPMENT

TAP PHARMS INC

TAP PHARMS

1.4 REPORT OF COUNTS FOR THE PRESCRIPTION DRUG PRODUCT LIST

DESCRIPTION OF REPORT

This report provides summary counts derived from the product information in the Prescription Drug Product List and the current Cumulative Supplement. Products included in the counts are domestically marketed drug products approved for both safety and effectiveness under sections 505 and 507 of the Federal Food, Drug, and Cosmetic Act. Excluded are approved drug products marketed by distributors; those marketed solely abroad; and those now regarded as medical devices, biologics or foods.

The baseline column (Dec 1989) refers to the products in the Prescription Drug Product List. For each three-month period, a column of quarterly data is added which incorporates counts of product activity from the previous quarter(s) with those in the baseline count.

DEFINITIONS

Drug Product

For this report, a drug product is the representation in the Prescription Drug Product List of an active moiety (molecular entity and its salts, esters and derivatives) either as a single ingredient or as a combination product, provided in a specific dosage form and strength for a given route of administration with approval for marketing by a firm under a particular generic or trade name.

New Molecular Entity

A new molecular entity is considered an active moiety that has not previously been approved (either as the parent compound or as a salt, ester or derivative of the parent compound) in the United States for use in a drug product either as a single ingredient or as part of a combination.

REPORT OF COUNTS FOR THE PRESCRIPTION DRUG PRODUCT LIST

COUNTS CUMULATIVE BY QUARTER

<u>CATEGORIES COUNTED</u>	<u>DEC 1989</u>	<u>MAR 1990</u>	<u>JUN 1990</u>	<u>SEP 1990</u>
DRUG PRODUCTS LISTED	10123	10095		
SINGLE SOURCE	2030 (20.1%)	2039 (20.2%)		
MULTISOURCE	8093 (79.9%)	8056 (79.8%)		
THERAPEUTICALLY EQUIVALENT	7222 (71.3%)	7213 (71.5%)		
NOT THERAPEUTICALLY EQUIVALENT	752 (7.4%)	723 (7.1%)		
EXCEPTIONS ¹	119 (1.2%)	120 (1.2%)		
NEW MOLECULAR ENTITIES APPROVED	--	3		
NUMBER OF APPLICANTS	400	406		

¹ Amino acid-containing products of varying composition (see Introduction, page 1-8 of the List).

PRESCRIPTION DRUG PRODUCT LIST
10TH EDITION
CUMULATIVE SUPPLEMENT NUMBER 4 / JAN '90 - APR '90

ACETAMINOPHEN; HYDROCODONE BITARTRATE

TABLET; ORAL

AA / AA / PBI / 500MG; 5MG

3 PBI 500MG; 5MG

NORCET

AA ABANA PHARMS

500MG; 5MG

AA / AA / HOLLANDAY PHARMS

500MG; 5MG

> ADD >
> ADD >
> DLT >
> DLT >

/N89496/001/
/MAY/29/1987/
N89290 001
MAY 29, 1987

N88871 001
MAY 15, 1986
/N88871/001/
/MAY/15/1986/

ACETYLCYSTEINE

SOLUTION; INHALATION

AN / AN / QUAD PHARMS

10% /

20% /

AN / AN / MUCOSOL-10

10% /

AN / AN / MUCOSOL-20

20% /

/N71740/001/
/AUG/11/1987/
/N71741/001/
/AUG/11/1987/

/N70575/001/
/OCT/14/1986/

/N70576/001/
/OCT/14/1986/

SOLUTION; INHALATION, ORAL

ACETYLCYSTEINE

AN QUAD PHARMS

10% /

20% /

MUCOSOL-10

AN DEY LABS

10% /

MUCOSOL-20

AN DEY LABS

20% /

N71740 001
AUG 11, 1987
N71741 001
AUG 11, 1987

N70575 001
OCT 14, 1986

N70576 001
OCT 14, 1986

ALBUTEROL SULFATE

TABLET; ORAL

AB / AB / LEMON

EQ 2MG BASEM

EQ 4MG BASEM

N72938 001
MAR 30, 1990
N72939 001
MAR 30, 1990

ALBUTEROL SULFATE

TABLET; ORAL

AB / AB / WARNER CHILCOTT

EQ 2MG BASEM

EQ 4MG BASEM

N72817 001
JAN 09, 1990
N72818 001
JAN 09, 1990

AMILORIDE HYDROCHLORIDE; HYDROCHLOROTHIAZIDE

TABLET; ORAL

AB / AB / BARR LABS

5MG; 50MG

5MG; 50MG

5MG; 50MG

AB BARR LABS

/N71111/001/
/MAR/02/1987/
N71111 001
MAY 10, 1988

AMITRIPTYLINE HYDROCHLORIDE; PERPHENAZINE

TABLET; ORAL

AB / AB / CHELSEA LABS

50MG; 4MG

50MG; 4MG

50MG; 4MG

BX CHELSEA LABS

/N71558/001/
/MAR/02/1987/
N71558 001
MAR 02, 1987

> ADD > ANTAZOLINE PHOSPHATE; NAPHAZOLINE HYDROCHLORIDE

> ADD > SOLUTION/DROPS; OPHTHALMIC

> ADD > VASOCON-A

> ADD > IOLAB PHARM

0.5%; 0.05%M

N18746 001
APR 30, 1990

ASPIRIN; CAFFEINE; ORPHENADRINE CITRATE

TABLET; ORAL

BX / BX / ORPHENADRINE/COMPOND

365MG; 30MG; 25MG

365MG; 30MG; 25MG

3 VITARINE

385MG; 30MG; 25MG

385MG; 30MG; 25MG

3 VITARINE

385MG; 30MG; 25MG

/N71564/001/
/JUN/23/1988/
N71564 001
JUN 23, 1988

/N71565/001/
/JUN/23/1988/
N71565 001
JUN 23, 1988

RX DRUG PRODUCT LIST / CUMULATIVE SUPPLEMENT NUMBER 4 / JAN'90 - APR'90

ATENOLOL

TABLET; ORAL
TENORMIN
ICI PHARM

25MG

N18240 004
APR 09, 1990

EQ 5GM BASE/VIAL
EQ 10GM BASE/VIAL

N63018 001
MAR 05, 1990
N63018 002
MAR 05, 1990

CEFAZOLIN SODIUM

INJECTABLE; INJECTION
CEFAZOLIN SODIUM

AP LEMON

BACLOFEN

TABLET; ORAL
BACLOFEN
/BX/ /VITARINE/

10MG

N71901 001
APR 13, 1988
N71902 001
APR 13, 1988

CEPHALEXIN

CAPSULE; ORAL
CEPHALEXIN MONOHYDRATE
/BX/ /VITARINE/

EQ 250MG BASE
EQ 500MG BASE

N62159 001
N62159 002

POWDER FOR RECONSTITUTION; ORAL

CEPHALEXIN
/BX/ /VITARINE/

EQ 125MG BASE/5ML
EQ 250MG BASE/5ML

N62779 001
DEC 22, 1987
N62781 001
DEC 22, 1987

BETAMETHASONE DIPROPIONATE

CREAM; TOPICAL

BETAMETHASONE DIPROPIONATE

EQ 0.05% BASE

N72536 001
JAN 31, 1990

LOTION; TOPICAL

BETAMETHASONE DIPROPIONATE

EQ 0.05% BASE

N72538 001
JAN 31, 1990

ointment; TOPICAL

BETAMETHASONE DIPROPIONATE

EQ 0.05% BASE

N72526 001
JAN 31, 1990

TABLET; ORAL
CEPHALEXIN
/BX/ /VITARINE/

EQ 250MG BASE
EQ 500MG BASE
EQ 1GM BASE

N62863 001
AUG 11, 1988
N62863 002
AUG 11, 1988
N62863 003
AUG 11, 1988

CALCIUM CHLORIDE; DEXTROSE; POTASSIUM CHLORIDE; SODIUM CHLORIDE; SODIUM LACTATE

INJECTABLE; INJECTION

DEXTROSE 5% IN LACTATED RINGER'S IN PLASTIC CONTAINER
/CUTTER/BIOL/

20MG/100ML; 50MG/100ML; 30MG/100ML;
600MG/100ML;
310MG/100ML;
/N18499/001/
20MG/100ML; 50MG/100ML; 30MG/100ML;
600MG/100ML;
310MG/100ML
N18499 001

CUTTER BIOL

CEPHAPIRIN SODIUM

INJECTABLE; INJECTION
CEPHAPIRIN SODIUM
 /AP/ /LYPHONED/

/EQ 20GM BASE/VIAL/
 EQ 20GM BASE/VIAL

/N62723/005/
 /NOV/17/1986/
 N62723 005
 NOV 17, 1986

TABLET; ORAL

> DLT > /AA/
 > ADD > /4MG/
CHLORPHENIRAMINE MALEATE
 /ROXANE/LABS/
 a ROXANE LABS

/N80626/001/
 N80626 001

CHLORPHENIRAMINE MALEATE

CEPHRADINE

CAPSULE; ORAL
 CEPHRADINE
 /BX/ /VITARINE/

/250MG/
 /500MG/

a VITARINE

250MG
 500MG

/N62813/001/
 /FEB/25/1988/
 /N62813/002/
 /FEB/25/1988/
 N62813 001
 FEB 25, 1988
 N62813 002
 FEB 25, 1988

INJECTABLE; INJECTION
 TAGAMET HCL IN SODIUM CHLORIDE 0.9% IN PLASTIC CONTAINER
 SK&F LABS

/TAGAMET/IN/SODIUM/CHLORIDE/0.9%/IN/PLASTIC/CONTAINER/
 /SK&F/LABS/
 /EQ/6MG/BASE/ML/
 OCT 31, 1985
 N19434 001

CIMEITIDINE HYDROCHLORIDE

CLINDAMYCIN HYDROCHLORIDE

CAPSULE; ORAL

CLINDAMYCIN HCL

/BX/ /VITARINE/
 /BX/ /EQ/75MG/BASE/
 /EQ/150MG/BASE/

/N62910/001/
 /JUL/05/1988/
 /N62910/002/
 /JUL/05/1988/
 N62910 001
 JUL 05, 1988
 N62910 002
 JUL 05, 1988

/CHLORDIAZEPOXIDE; ESTROGENS; CONJUGATED/

/TABLET; ORAL/
 /MENRIUM/10-4/
 /ROCHE/
 /MENRIUM/5-2/
 /ROCHE/
 /MENRIUM/5-4/
 /ROCHE/

/10MG;0.4MG/
 /5MG;0.2MG/
 /5MG;0.4MG/

CHLORDIAZEPOXIDE; ESTROGENS, ESTERIFIED

TABLET; ORAL
 MENRIUM 10-4
 ROCHE
 MENRIUM 5-2
 ROCHE
 MENRIUM 5-4
 ROCHE

10MG;0.4MG
 5MG;0.2MG
 5MG;0.4MG

CLINDAMYCIN PHOSPHATE

INJECTABLE; INJECTION

CLINDAMYCIN PHOSPHATE

AP LEMMON

EQ 150MG BASE/ML

N63079 001
 MAR 05, 1990

CLOBETASOL PROPIONATE

SOLUTION; TOPICAL
 TEMOVATE
 GLAXO

0.05/M

N19966 001
 FEB 22, 1990

CHLORPHENIRAMINE MALEATE

TABLET; ORAL

CHLORPHENIRAMINE MALEATE
 /PUREPAC/PHARM/
 a PUREPAC PHARM

/N86306/001/
 N86306 001

CYCLOSPORINE

CAPSULE; ORAL
SANDIMMUNE
SANDOZ PHARMS

25MG
100MG

N50625 001
MAR 02, 1990
N50625 002
MAR 02, 1990

DEXTROSE; SODIUM CHLORIDE

INJECTABLE; INJECTION
DEXTROSE 3.3% AND SODIUM CHLORIDE 0.3% IN PLASTIC
CONTAINER

KENDALL MCGAM
3.3GM/100ML
300MG/100ML

N19631 016
JAN 19, 1990

DESIPRAMINE HYDROCHLORIDE

TABLET; ORAL
DESIPRAMINE HCL
/BX/ /VITARINE/

/10MG/
/25MG/
/50MG/
/75MG/
/100MG/
/150MG/

/N72167/001/
/FEB/03/1988/
/N71601/001/
/JUN/05/1987/
/N71588/001/
/JUN/05/1987/
/N71602/001/
/OCT/05/1987/
/N71766/001/
/OCT/05/1987/
/N72254/001/
/FEB/03/1988/

3 VITARINE

10MG
25MG
50MG
75MG
100MG
150MG

N72167 001
FEB 03, 1988
N71601 001
JUN 05, 1987
N71588 001
JUN 05, 1987
N71602 001
OCT 05, 1987
N71766 001
OCT 05, 1987
N72254 001
FEB 03, 1988

DIATRIZOATE MEGIUMINE; DIATRIZOATE SODIUM

INJECTABLE; INJECTION

/HYPAQUE-M/
/STERLING DRUG/
HYPAQUE-M, 75%
STERLING DRUG

/50%;25%/
50%;25%

/N10220/003/
N10220 003

DICLOXACILLIN SODIUM

POWDER FOR RECONSTITUTION; ORAL

DYNAPEN

/AB/ /BRISTOL LABS/
3 BRISTOL LABS

/EQ 62.5MG BASE/5ML/
EQ 62.5MG BASE/5ML

/N50337/002/
N50337 002

DISOPYRAMIDE PHOSPHATE

CAPSULE; ORAL

DISOPYRAMIDE PHOSPHATE

/AB/ /CHELSEA LABS/

/AB/ /CHELSEA LABS/

BX CHELSEA LABS

BX

/EQ 100MG BASE/

/EQ 150MG BASE/

EQ 100MG BASE

EQ 150MG BASE

/N71020/001/
DEC 01, 1986
N71020 001
N71021 001
DEC 01, 1986

DEXAMETHASONE

TABLET; ORAL
DEXAMETHASONE
3 BARR LABS

0.5MG

N84766 001

CAPSULE; ORAL

ADAPIN
FISONS

EQ 10MG BASE
EQ 25MG BASE
EQ 50MG BASE
EQ 75MG BASE
EQ 100MG BASE
EQ 150MG BASE

N16987 001
N16987 002
N16987 003
N16987 006
N16987 004
N16987 007
APR 13, 1987

DOXEPTIN HYDROCHLORIDE

CAPSULE; ORAL

ADAPIN

/PENNACIT/

AB/
AB/
AB/
AB/
AB/
AB/
AB/

/EQ 10MG BASE/
/EQ 25MG BASE/
/EQ 50MG BASE/
/EQ 75MG BASE/
/EQ 100MG BASE/
/EQ 150MG BASE/

/N16987/001/
/N16987/002/
/N16987/003/
/N16987/004/
/N16987/005/
/N16987/006/
/N16987/007/
/N16987/008/
/APR/13/1987/

/AT/
/AT/

SOLUTION; TOPICAL

ERYTHROMYCIN

/BARRE/NATL/

/22/
/22/

/N62327/001/
/APR/13/1982/
/N62327/002/
/FEB/25/1982/
N62327 001
APR 19, 1982
N62342 001
FEB 25, 1982

2%

2%

DOXYCYCLINE HYCLATE

CAPSULE; ORAL

DOXYCYCLINE HYCLATE

/VITARINE/

AB/
AB/

/EQ 50MG BASE/
/EQ 100MG BASE/
EQ 50MG BASE

/N62780/001/
/APR/12/1988/
/N62780/002/
N62780 001
APR 12, 1988
N62227 001

EQ 100MG BASE

N62227 001

INJECTABLE; INJECTION

VIBRAMYCIN

PFIZER LABS

AP/
AP/

/EQ 100MG BASE/VIAL/
/EQ 200MG BASE/VIAL/
/EQ 100MG BASE/VIAL/
/EQ 200MG BASE/VIAL/

/N50442/002/
/N50442/001/
/N50442/002/
/N50442/001/

TABLET; ORAL

CONJUGATED ESTROGENS

/CHELSEA/LABS/

@ CHELSEA LABS

/0.625MG/
0.625MG

/N85860/001/
N85860 001

DYDROGESTERONE

TABLET; ORAL

GYNOREST

/NATL/PHAR/

AB/
AB/

/5MG/
/10MG/
5MG
10MG

/N17388/001/
/N17388/002/
N17388 001
N17388 002

TABLET; ORAL

FEMOGEN

/PRIVATE/FMLTNS/

@ PRIVATE FMLTNS

/1.25MG/
1.25MG

/N85008/001/
N85008 001

ETHYLESTRENOL

/ELIXIR/

/MAXIBOLIN/

/ORGANON/

@ ORGANON

/2MG/5ML/
2MG/5ML

/N14006/002/
N14006 002

ESTRADIOL VALERATE; TESTOSTERONE ENANTHATE

INJECTABLE; INJECTION

TESTOSTERONE ENANTHATE-ESTRADIOL VALERATE

/STERIS/LABS/

@ STERIS LABS

/8MG/ML;180MG/ML/
8MG/ML;180MG/ML

/N85860/001/
N85860 001

> DLT > /AD/

> ADD >

RX DRUG PRODUCT LIST / CUMULATIVE SUPPLEMENT NUMBER 4 / JAN '90 - APR '90

KANAMYCIN SULFATE

INJECTABLE; INJECTION

KANAMYCIN SULFATE

/WARNER/CHILCOTT/

/BX/ /VITARINE/

3 WARNER CHILCOTT

/EQ 1GM BASE/3ML/

EQ 1GM BASE/3ML

/N63092/001/

/OCT 11, 1989/

OCT 11, 1989

/N63092/001/

/OCT 11, 1989/

OCT 11, 1989

/d. 08MG; 1MG/

0.08MG; 1MG

/N16724/001/

N16724 001

MECLOFENAMATE SODIUM

CAPSULE; ORAL

MECLOFENAMATE SODIUM

/BX/ /VITARINE/

/BX/

3 VITARINE

3

/EQ 50MG BASE/

EQ 50MG BASE

/N71710/001/

/JUN 15, 1988/

/N71684/001/

/JUN 15, 1988/

N71710 001

JUN 15, 1988

N71684 001

JUN 15, 1988

10MG

20MG

N72519 001

MAR 30, 1990

N72520 001

MAR 30, 1990

MEFENAMIC ACID

CAPSULE; ORAL

MEFENAMIC ACID

/BX/ /VITARINE/

3 VITARINE

/250MG/

250MG

/N72179/001/

/APR 21, 1988/

N72179 001

APR 21, 1988

/N15034/003/

N15034 003

/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

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/AB/

/AB/

/AB/

/AB/

/AB/

/AB/

INJECTABLE; INJECTION

STAPHYLOCOCCUS

/BRISTOL LABS/

3 BRISTOL LABS

/EQ 900MG BASE/VIAL/

EQ 900MG BASE/VIAL

/N50117/001/

N50117 001

/N50117/002/

N50117 002

/N50117/003/

N50117 003

METHICILLIN SODIUM

INJECTABLE; INJECTION

STAPHYLOCOCCUS

/BRISTOL LABS/

3 BRISTOL LABS

/EQ 900MG BASE/VIAL/

EQ 900MG BASE/VIAL

/N50117/001/

N50117 001

/N50117/002/

N50117 002

/N50117/003/

N50117 003

METOCLOPRAMIDE HYDROCHLORIDE

INJECTABLE; INJECTION

REGAN

/AH/ROBINS/

3 AH ROBINS

/EQ 10MG BASE/ML/

EQ 10MG BASE/ML

/N17862/004/

N17862 004

/MAY 28, 1987/

MAY 28, 1987

TABLET; ORAL

METOCLOPRAMIDE HCL

CORD LABS

3 CORD LABS

/EQ 10MG BASE/

EQ 10MG BASE

/N72215 001

JAN 30, 1990

/N70598 001

FEB 02, 1987

/N70598/001/

/FEB/02, 1987/

/FEB/02, 1987/

/FEB/02, 1987/

/FEB/02, 1987/

/FEB/02, 1987/

/FEB/02, 1987/

/FEB/02, 1987/

MORPHINE SULFATE

TABLET, EXTENDED RELEASE; ORAL
MS CONTIN
PURDUE FRDRK 100MG

N19516 004
JAN 16, 1990

> DLT >
> DLT >
> ADD >
> ADD >
> DLT >
> DLT >
> ADD >
> ADD >
> DLT >
> DLT >
> ADD >
> ADD >

NAFARELIN ACETATE

SPRAY, METERED; NASAL
SYNAREL
SYNTEX LABS

N19886 001
FEB 13, 1990

> DLT >
> DLT >
> ADD >
> ADD >
> DLT >
> DLT >
> ADD >
> ADD >

NAPROXEN SODIUM

TABLET; ORAL
ANAPROX
/SYNTEX/PR/

/550MG/

N18164 003
SEP 30, 1987

> DLT >
> DLT >
> DLT >
> ADD >
> ADD >
> ADD >

ANAPROX DS
SYNTEX PR

550MG

N18164 003
SEP 30, 1987

> DLT >
> DLT >
> ADD >
> ADD >

NIFEDIPINE

CAPSULE; ORAL

NIFEDIPINE
/AD/ /PUREPAC/PHARM/

/20MG/

N17556 001
APR 28, 1989

20MG

SEP 20, 1990 : APR 28, 1989

> DLT >
> DLT >
> ADD >
> ADD >

NITROGLYCERIN

INJECTABLE; INJECTION

NITRO-BID
MARION MERRELL DOW

10MG/ML

N71159 001
FEB 28, 1990

> DLT >
> DLT >
> ADD >
> ADD >
> ADD >
> ADD >

OCTREOTIDE ACETATE

INJECTABLE; INJECTION
SANDOSTATIN
/SANDOZ/PHARMS/

SANDOZ PHARMS

/EQ/0.05MG/BASE/ML/

EQ 50UGM BASE/ML

N19667 001
OCT 21, 1988

/EQ/0.1MG/BASE/ML/

EQ 100UGM BASE/ML

N19667 002
OCT 21, 1988

/EQ/0.5MG/BASE/ML/

EQ 500UGM BASE/ML

N19667 003
OCT 21, 1988

OXAZEPAM

CAPSULE; ORAL

OXAZEPAM

/AD/ /CHELSEA/LABS/

/30MG/

N18164 003
SEP 30, 1987

SEP 30, 1987

> DLT >
> DLT >
> ADD >
> ADD >

BX CHELSEA LABS

30MG

N171663 001
MAR 02, 1988

PEGADEMASE BOVINE

INJECTABLE; INJECTION

ADAGEN

ENZON

250 UNITS/ML

N19818 001
MAR 21, 1990

PENBUTOLOL SULFATE

TABLET; ORAL

LEVATOL

/REED & CARNRICK/

/10MG/

N71159 001
FEB 28, 1990

> DLT >
> DLT >
> ADD >
> ADD >
> ADD >
> ADD >

3 REED & CARNRICK

10MG

N18976 001
DEC 30, 1987

20MG

N18976 004
JAN 05, 1989

RX DRUG PRODUCT LIST / CUMULATIVE SUPPLEMENT NUMBER 4 / JAN '90 - APR '90

PERPHENAZINE

TABLET; ORAL

PERPHENAZINE

/AB/ /CHELSEA LABS/

/8MG/

/N89700/001/

/DEC/23, 1987/

BX CHELSEA LABS

8MG

N89700 001

DEC 23, 1987

PHENYTOIN SODIUM

INJECTABLE; INJECTION

PHENYTOIN SODIUM

/WARNER/CHILCOTT/

/50MG/ML/

/N89900/001/

/MAR/30, 1990/

a WARNER CHILCOTT

50MG/ML

N89900 001

MAR 30, 1990

PHENYTOIN SODIUM, EXTENDED

CAPSULE; ORAL

EXTENDED PHENYTOIN SODIUM

/AB/ /SIDMAK LABS/

/100MG/

a SIDMAK LABS

100MG

N89441 001

DEC 18, 1986

PHENTEX

/AB/ /BOLAR PHARM/

/100MG/

BX BOLAR PHARM

100MG

N88711 001

DEC 21, 1984

PIPERAZINE CITRATE

SYRUP; ORAL

PIPERAZINE

/AA/ /STERLING/

/EQ 500MG BASE/5ML/

EQ 500MG BASE/5ML

N17796 001

N17796 001

POTASSIUM CHLORIDE

CAPSULE, EXTENDED RELEASE; ORAL

K-LEASE

/AB/ ADRIA LABS

10 MEQ

N72427 001

MAR 28, 1990

PROPRANOLOL HYDROCHLORIDE

TABLET; ORAL

INDERAL

/AB/ /MYETH AYERST LABS/

/50MG/

a MYETH AYERST LABS

90MG

N16418/010

OCT 18, 1982

PROPRANOLOL HCL

/AB/ /MYETH AYERST LABS/

/10MG/

a MYETH AYERST LABS

20MG

/AB/ /MYETH AYERST LABS/

/40MG/

a MYETH AYERST LABS

60MG

/AB/ /MYETH AYERST LABS/

/80MG/

a MYETH AYERST LABS

/10MG/

/AB/ /MYETH AYERST LABS/

/20MG/

/AB/ /MYETH AYERST LABS/

/40MG/

/AB/ /MYETH AYERST LABS/

/60MG/

/AB/ /MYETH AYERST LABS/

/80MG/

/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

/80MG/

/AB/ /MYETH AYERST LABS/

/10MG/

/AB/ /MYETH AYERST LABS/

/20MG/

/AB/ /MYETH AYERST LABS/

/40MG/

/AB/ /MYETH AYERST LABS/

/60MG/

/AB/ /MYETH AYERST LABS/

/80MG/

RX DRUG PRODUCT LIST / CUMULATIVE SUPPLEMENT NUMBER 4 / JAN '90 - APR '90

PERPHENAZINE

TABLET; ORAL

PERPHENAZINE

/AB/ /CHELSEA LABS/

/8MG/

/N89700/001/

/DEC/23, 1987/

BX CHELSEA LABS

8MG

N89700 001

DEC 23, 1987

PHENYTOIN SODIUM

INJECTABLE; INJECTION

PHENYTOIN SODIUM

/WARNER/CHILCOTT/

/50MG/ML/

/N89900/001/

/MAR/30, 1990/

a WARNER CHILCOTT

50MG/ML

N89900 001

MAR 30, 1990

PHENYTOIN SODIUM, EXTENDED

CAPSULE; ORAL

EXTENDED PHENYTOIN SODIUM

/AB/ /SIDMAK LABS/

/100MG/

a SIDMAK LABS

100MG

N89441 001

DEC 18, 1986

PHENTEX

/AB/ /BOLAR PHARM/

/100MG/

BX BOLAR PHARM

100MG

N88711 001

DEC 21, 1984

PIPERAZINE CITRATE

SYRUP; ORAL

PIPERAZINE

/AA/ /STERLING/

/EQ 500MG BASE/5ML/

EQ 500MG BASE/5ML

N17796 001

N17796 001

POTASSIUM CHLORIDE

CAPSULE, EXTENDED RELEASE; ORAL

K-LEASE

/AB/ ADRIA LABS

10 MEQ

N72427 001

MAR 28, 1990

PROPRANOLOL HYDROCHLORIDE

TABLET; ORAL

INDERAL

/AB/ /MYETH AYERST LABS/

/50MG/

a MYETH AYERST LABS

90MG

N16418/010

OCT 18, 1982

PROPRANOLOL HCL

/AB/ /MYETH AYERST LABS/

/10MG/

a MYETH AYERST LABS

20MG

/AB/ /MYETH AYERST LABS/

/40MG/

a MYETH AYERST LABS

60MG

/AB/ /MYETH AYERST LABS/

/80MG/

/AB/ /MYETH AYERST LABS/

/10MG/

/AB/ /MYETH AYERST LABS/

/20MG/

/AB/ /MYETH AYERST LABS/

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/AB/ /MYETH AYERST LABS/

/10MG/

/AB/ /MYETH AYERST LABS/

/20MG/

/AB/ /MYETH AYERST LABS/

/40MG/

/AB/ /MYETH AYERST LABS/

/60MG/

/AB/ /MYETH AYERST LABS/

/80MG/

IRISULFAPYRIMIDINES

SUSPENSION; ORAL
/TRIPLE SULFA/
/BARD/NATL/
3 BARRE NATL

/500MG/5ML/
500MG/5ML

/N80280/001/
N80280 001

UREA

INJECTABLE; INJECTION

/STERILE UREA/
/ABBOTT LABS/
3 ABBOTT LABS

/40GM/VIAL/
40GM/VIAL

/N17698/001/
N17698 001

UREAPHIL

/ABBOTT LABS/
ABBOTT LABS

/40GM/VIAL/
40GM/VIAL

/N12154/001/
N12154 001

VERAPAMIL HYDROCHLORIDE

TABLET; ORAL

VERAPAMIL HCL
/CHELSEA LABS/
/AB/

/80MG/
80MG

/N70421/001/
/SEP/17, 1986/
N70421 001
SEP 17, 1986

BX CHELSEA LABS

WARFARIN SODIUM

TABLET; ORAL

COUMADIN
DUPONT PHARMS

1MG

N09218 022
MAR 01, 1990

ZIDOVUDINE

INJECTABLE; INJECTION

RETROVIR
BURROUGHS WELLC

10MG/ML

N19951 001
FEB 02, 1990

OTC DRUG PRODUCT LIST/CUMULATIVE SUPPLEMENT NUMBER 4/ JAN'90 - APR'90

NO APRIL 1990 APPROVALS

NO APRIL 1990 APPROVALS

卷一百一十五	卷一百一十六	卷一百一十七	卷一百一十八	卷一百一十九	卷一百二十	卷一百二十一	卷一百二十二	卷一百二十三	卷一百二十四	卷一百二十五	卷一百二十六	卷一百二十七	卷一百二十八	卷一百二十九	卷一百三十	卷一百三十一	卷一百三十二	卷一百三十三	卷一百三十四	卷一百三十五	卷一百三十六	卷一百三十七	卷一百三十八	卷一百三十九	卷一百四十	卷一百四十一	卷一百四十二	卷一百四十三	卷一百四十四	卷一百四十五	卷一百四十六	卷一百四十七	卷一百四十八	卷一百四十九	卷一百五十	卷一百五十一	卷一百五十二	卷一百五十三	卷一百五十四	卷一百五十五	卷一百五十六	卷一百五十七	卷一百五十八	卷一百五十九	卷一百六十	卷一百六十一	卷一百六十二	卷一百六十三	卷一百六十四	卷一百六十五	卷一百六十六	卷一百六十七	卷一百六十八	卷一百六十九	卷一百七十	卷一百七十一	卷一百七十二	卷一百七十三	卷一百七十四	卷一百七十五	卷一百七十六	卷一百七十七	卷一百七十八	卷一百七十九	卷一百八十	卷一百八十一	卷一百八十二	卷一百八十三	卷一百八十四	卷一百八十五	卷一百八十六	卷一百八十七	卷一百八十八	卷一百八十九	卷一百九十	卷一百九十一	卷一百九十二	卷一百九十三	卷一百九十四	卷一百九十五	卷一百九十六	卷一百九十七	卷一百九十八	卷一百九十九	卷二百
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ORPHAN DRUG PRODUCT DESIGNATIONS

SECTION 526 OF THE FEDERAL FOOD, DRUG, AND COSMETIC ACT CONTAINS PROVISIONS WHEREBY FDA MAY DESIGNATE A SPONSOR'S DRUG, ANTIBIOTIC, OR BIOLOGICAL PRODUCT AS A "DESIGNATED ORPHAN DRUG." SECTION 527 OF THE ACT ESTABLISHES A PROCESS WHEREBY A SPONSOR MAY RECEIVE SEVEN YEARS OF EXCLUSIVE APPROVAL STATUS IF THAT SPONSOR IS THE FIRST TO ACHIEVE NEW DRUG, ANTIBIOTIC, OR BIOLOGICAL PRODUCT APPROVAL FOR A DESIGNATED ORPHAN DRUG FOR THE DESIGNATED INDICATION(S). THE EXCLUSIVE APPROVAL MAY BE REVOKED BY WRITTEN CONSENT OF THE SPONSOR OR BY FDA ACTION AFTER FINDING THAT THE SPONSOR HOLDING EXCLUSIVE APPROVAL CANNOT ASSURE THE AVAILABILITY OF SUFFICIENT QUANTITIES OF THE DRUG TO MEET THE NEEDS OF PATIENTS WITH THE DESIGNATED ORPHAN INDICATION(S).

WHEN A PRODUCT IS GRANTED ORPHAN DRUG DESIGNATION, IT WILL APPEAR IN THIS SECTION. ONCE A BIOLOGICAL OR DRUG PRODUCT IS LICENSED/APPROVED FOR MARKETING, IT WILL BE LISTED IN THIS SECTION AND ASTERISKED, AS APPROPRIATE, TO DENOTE MARKETING/EXCLUSIVE APPROVAL STATUS. IN ADDITION, THE EXCLUSIVITY EXPIRATION DATE WILL BE DISPLAYED FOLLOWING THE APPROVED DESIGNATED INDICATION(S).

THE FOLLOWING DRUGS AND BIOLOGICALS HAVE BEEN GRANTED ORPHAN DRUG DESIGNATION PURSUANT TO SECTION 526 OF THE FOOD, DRUG, AND COSMETIC ACT AS AMENDED BY THE ORPHAN DRUG ACT [PUBLIC LAW 97-414].

ORPHAN DRUG PRODUCT DESIGNATIONS

BIOLOGICAL DESIGNATIONS

NAME OF BIOLOGICAL

DESIGNATED USE [EXCLUSIVITY EXPIRATION DATE]

SPONSOR NAME AND ADDRESS

GENERIC: BOTULINUM A TOXIN
TRADE: OCULINUM**/**

TREATMENT OF STRABISMUS ASSOCIATED WITH DYSTONIA IN ADULTS (PATIENTS 12 YEARS OF AGE AND ABOVE).
TREATMENT OF BLEPHAROSPASM ASSOCIATED WITH DYSTONIA IN ADULTS (PATIENTS 12 YEARS OF AGE AND ABOVE)**/**. [DEC 29, 1996]

ALAN B. SCOTT, M.D.
2232 WEBSTER ST.
SAN FRANCISCO, CA 94115

GENERIC: CYTOMEGALOVIRUS IMMUNE GLOBULIN (HUMAN)
TRADE: NOT ESTABLISHED**/**

PREVENTION OR ATTENUATION OF PRIMARY CYTOMEGALOVIRUS DISEASE IN IMMUNOSUPPRESSED RECIPIENTS OF ORGAN TRANSPLANTS. [APR 17, 1997]

MASSACHUSETTS PUBLIC HEALTH
BIOLOGIC LABS
375 SOUTH ST., JAMAICA PLAIN
BOSTON, MA 02130

GENERIC: [INDIUM 111] MURINE ANTI-CEA MONOCLONAL ANTIBODY TYPE ZCE 025
(IN 111 MUROMONAB-CEA)
TRADE: CEAKER

FOR THE DETECTION OF SUSPECTED AND PREVIOUSLY UNIDENTIFIED TUMOR FOCI OF RECURRENT COLORECTAL CARCINOMA.

HYBRITECH, INC.
11095 TORREYANNA RD.
SAN DIEGO, CA 92121

GENERIC: INTERLEUKIN-2 POLYETHYLENE CONJUGATE;
RECOMBINANT E. COLI
TRADE: PEG-IL2

TREATMENT OF PRIMARY IMMUNODEFICIENCY DISEASE ASSOCIATED WITH T-CELL DEFECTS.

CETUS CORP.
1400 FIFTY-THIRD ST.
EMERYVILLE, CA 94608

GENERIC: MONOCLONAL ANTIBODIES PM-81 AND AML 2-23
TRADE: NOT ESTABLISHED

FOR EXOGENOUS DEPLETION OF CD14 AND CD15 POSITIVE ACUTE MYELOID LEUKEMIC BONE MARROW CELLS FROM PATIENTS UNDERGOING BONE MARROW TRANSPLANTATION.

MEDAREX, INC.
12 WEST COMMERCE AVE.
WEST LEBANON, NH 03784

GENERIC: ONCORAD OV103
TRADE: NOT ESTABLISHED

TREATMENT OF OVARIAN CARCINOMA.

CYTOGEN CORP.
600 COLLEGE RD. EAST
PRINCETON, NJ 08540

ORPHAN DRUG PRODUCT DESIGNATIONS

BIOLOGICAL DESIGNATIONS

NAME OF BIOLOGICAL	DESIGNATED USE [EXCLUSIVITY EXPIRATION DATE]	SPONSOR NAME AND ADDRESS
GENERIC: RICIN (BLOCKED) CONJUGATED MURINE MONOCLONAL ANTIBODY (ANTI-MY⁹) TO MYELOID CELLS (CD-33) TRADE: ANTI-MY⁹-BR	FOR USE IN THE EX VIVO TREATMENT OF AUTOLOGOUS BONE MARROW AND SUBSEQUENT REINFUSION IN PATIENTS WITH ACUTE MYELOGENOUS LEUKEMIA.	IMMUNOGEN, INC. 148 SIDNEY ST. CAMBRIDGE, MA 02139
GENERIC: TECELEUKIN TRADE: NOT ESTABLISHED	TREATMENT OF METASTATIC MALIGNANT MELANOMA.	HOFFMANN-LA ROCHE, INC. 340 KINGSLAND ST. NUTLEY, NJ 07110
GENERIC: TECELEUKIN TRADE: NOT ESTABLISHED	TREATMENT OF METASTATIC RENAL CELL CARCINOMA.	HOFFMANN-LA ROCHE, INC. 340 KINGSLAND ST. NUTLEY, NJ 07110

ORPHAN DRUG PRODUCT DESIGNATIONS

DRUG DESIGNATIONS

NAME OF DRUG	DESIGNATED USE [EXCLUSIVITY EXPIRATION DATE]	SPONSOR NAME AND ADDRESS
GENERIC: CROMOLYN SODIUM TRADE: GASTROCRON [®] /**	MASTOCYTOSIS. [DECEMBER 22, 1996]	FISONS CORP. 2 PRESTON CT. BEDFORD, MA 01730
GENERIC: DEHYDREX TRADE: NOT ESTABLISHED	TREATMENT OF RECURRENT CORNEAL EROSION UNRESPONSIVE TO CONVENTIONAL THERAPY.	HOLLES LABS, INC. 30 FOREST NOTCH COHASSET, MA 02025
GENERIC: DISACCHARIDE TRIPEPTIDE GLYCEROL DIPALMITOYL (DTP-GDP) TRADE: IMMITHER	TREATMENT OF PULMONARY AND HEPATIC METASTASES IN COLORECTAL ADENOCARCINOMA PATIENTS.	IMMUNOTHERAPEUTICS, INC. 509 25TH AVE. NORTH FARGO, ND 58102
GENERIC: DISODIUM CLODRONATE TETRAHYDRATE TRADE: BONEFOS	TREATMENT OF INCREASED BONE RESORPTION DUE TO MALIGNANCY.	LEIRAS PHARMACEUTICALS, INC. 2345 WAUKEGAN RD. SUITE N-135 BANNOCKBURN, IL 60015
GENERIC: DYNAMINE TRADE: NOT ESTABLISHED	TREATMENT OF LAMBERT-EATON MYASTHENIC SYNDROME.	MAYO FOUNDATION FOR MEDICAL EDUCATION AND RESEARCH MAYO CLINIC AND FOUNDATION 200 S.W. 1ST AVE. ROCHESTER, MN 55905
GENERIC: FLUOROURACIL	CONCOMITANT ADMINISTRATION WITH ROFERON-A FOR THE TREATMENT OF PATIENTS WITH ADVANCED COLORECTAL CANCER.	HOFFMANN-LA ROCHE, INC. 340 KINGSLAND ST. NUTLEY, NJ 07110

ORPHAN DRUG PRODUCT DESIGNATIONS

DRUG DESIGNATIONS

NAME OF DRUG	DESIGNATED USE [EXCLUSIVITY EXPIRATION DATE]	SPONSOR NAME AND ADDRESS
GENERIC: GLYCEROL, 10% TRADE: NOT ESTABLISHED	TO DECREASE INTRACRANIAL HYPERTENSION AND/OR ALLEVIATE CEREBRAL EDEMA IN PATIENTS WHO MAY BENEFIT FROM OSMOTHERAPY.	CHUGAI PHARMACEUTICAL CO., LTD. 1-9, KYOBASHI 2-CHOME CHUO-KU, TOKYO 104, JAPAN
GENERIC: GONADORELIN ACETATE TRADE: LUTREPULSE*/**	TREATMENT OF PRIMARY HYPOTHALAMIC AMENORRHEA. [OCT 10, 1996]	R.W. JOHNSON PHARMACEUTICAL RESEARCH INSTITUTE ROUTE 202, P.O. BOX 300 RARITAN, NJ 08869
GENERIC: N-ACETYL PROCAINAMIDE TRADE: NAPA	TO LOWER THE DEFIBRILLATION ENERGY REQUIREMENT SUFFICIENTLY TO ALLOW AUTOMATIC IMPLANTABLE CARDIOVERTER DEFIBRILLATOR (AICD) THERAPY IN THOSE PATIENTS WHO COULD OTHERWISE NOT USE THE DEVICE.	MEDCO RESEARCH, INC. 8733 BEVERLY BLVD., SUITE 404 LOS ANGELES, CA 90048
GENERIC: PEGADEMASE BOVINE TRADE: ADAGEN*/**	USE AS ENZYME REPLACEMENT THERAPY FOR ADENOSINE DEAMINASE (ADA) DEFICIENCY IN PATIENTS WITH SEVERE COMBINED IMMUNODEFICIENCY (SCID) WHO ARE NOT SUITABLE CANDIDATES FOR (OR WHO HAVE FAILED) BONE MARROW TRANSPLANTATION. [MAR 21, 1997]	ENZON, INC. 40 CRAGWOOD RD. SOUTH PLAINFIELD, NJ 07080
GENERIC: RHEOTHRIX TRADE: NOT ESTABLISHED	TREATMENT OF SEVERE BURNS IN HOSPITALIZED PATIENTS.	CYTRX CORP. 150 TECHNOLOGY PKWY. TECHNOLOGY PARK/ ATLANTA NORCROSS, GA 30092
GENERIC: SERMORELIN ACETATE [GRF(1-29)NH2] TRADE: GEREf	AS AN ADJUNCT TO GONADOTROPIN THERAPY IN THE INDUCTION OF OVULATION IN WOMEN WITH ANOVULATORY OR OLIGO-OVULATORY INFERTILITY WHO FAIL TO OVULATE IN RESPONSE TO ADEQUATE TREATMENT WITH CLOMIPHENE CITRATE ALONE AND GONADOTROPIN THERAPY ALONE.	SERONO LABS. 100 LONGWATER CIRCLE NORWELL, MA 02061

ORPHAN DRUG PRODUCT DESIGNATIONS

DRUG DESIGNATIONS

NAME OF DRUG	DESIGNATED USE [EXCLUSIVITY EXPIRATION DATE]	SPONSOR NAME AND ADDRESS
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ORPHAN DRUG PRODUCT DESIGNATIONS

DRUG DESIGNATIONS

NAME OF DRUG

DESIGNATED USE [EXCLUSIVITY EXPIRATION DATE]

SPONSOR NAME AND ADDRESS

GENERIC: SUCRALFATE
TRADE: NOT ESTABLISHED

TREATMENT OF ORAL COMPLICATIONS OF CHEMOTHERAPY
IN BONE MARROW TRANSPLANT RECIPIENTS.

NASKA PHARMACAL CO., INC.
55 PLANT AVE.
HAUPPAUGE, NY 11788

GENERIC: THALIDOMIDE
TRADE: NOT ESTABLISHED

TREATMENT OF GRAFT VERSUS HOST DISEASE (GVHD)
IN PATIENTS RECEIVING BONE MARROW TRANSPLANTATION
(BMT).
PREVENTION OF GVHD IN PATIENTS RECEIVING BMT.

ANDRULIS RESEARCH CORP.
4600 EAST-WEST HIGHWAY
SUITE 900
BETHESDA, MD 20814

DRUG PRODUCTS WHICH MUST DEMONSTRATE IN VIVO BIOAVAILABILITY
ONLY IF PRODUCT FAILS TO ACHIEVE ADEQUATE DISSOLUTION

NO APRIL 1990 ADDITIONS

BIOPHARMACEUTIC GUIDANCE AVAILABILITY

THE FOLLOWING IS A LIST OF GUIDANCES AVAILABLE FOR IN VIVO BIOEQUIVALENCE STUDIES AND IN VITRO DISSOLUTION TESTING AVAILABLE FROM THE DIVISION OF BIOEQUIVALENCE, HFD-650, ROOM 17B-06, 5600 FISHERS LANE, ROCKVILLE, MD 20857. COMMENTS AND SUGGESTIONS CONCERNING THESE GUIDANCES ARE ENCOURAGED AND SHOULD BE SENT TO THE DIVISION OF BIOEQUIVALENCE.

REFER BACK TO THE APPROVED DRUG PRODUCTS WITH THERAPEUTIC EQUIVALENCE EVALUATIONS, 10TH EDITION FOR A FULL LISTING OF BIOPHARMACEUTIC GUIDANCE AVAILABILITY DATA. ONLY NEW DATA WILL BE ADDED TO THE CUMULATIVE SUPPLEMENT.

DRUG NAME (DOSAGE FORM)

DATE

REVISED DATE

THEOPHYLLINE (CAPSULE AND TABLET)
 THEOPHYLLINE (CAPSULE, EXTENDED RELEASE AND
 TABLET, EXTENDED RELEASE)
 ONCE A DAY DOSING++SINGLE DOSE STUDY
 TWICE A DAY DOSING++SINGLE DOSE STUDY
 ONCE A DAY DOSING++MULTIPLE DOSE STUDY
 TWICE A DAY DOSING++MULTIPLE DOSE STUDY

SEP 07/ 1984

SEP 07/ 1984

ANDA SUITABILITY PETITIONS

THE FOLLOWING ARE TWO LISTS OF PETITIONS FILED UNDER SECTION 505(j)(2)(C) OF THE ACT WHERE THE AGENCY HAS DETERMINED THAT THE REFERENCED PRODUCT: (1) IS SUITABLE FOR SUBMISSION AS AN ANDA (PETITIONS APPROVED) OR (2) IS NOT SUITABLE FOR SUBMISSION AS AN ANDA (PETITIONS DENIED). THE DETERMINATION THAT AN ANDA WILL BE APPROVED IS NOT MADE UNTIL THE ANDA ITSELF IS SUBMITTED AND REVIEWED BY THE AGENCY. A COPY OF EACH PETITION IS LISTED BY DOCKET NUMBER ON PUBLIC DISPLAY IN FDA'S DOCKETS MANAGEMENT BRANCH, HFA-305, ROOM 4-62, 5600 FISHERS LANE, ROCKVILLE, MD 20857.

REFER BACK TO THE APPROVED DRUG PRODUCTS WITH THERAPEUTIC EQUIVALENCE EVALUATIONS, 10TH EDITION FOR A FULL LISTING OF ANDA SUITABILITY PETITIONS DATA. ONLY NEW DATA WILL BE ADDED TO THE CUMULATIVE SUPPLEMENT.

PETITIONS APPROVED

DRUG NAME DOSAGE FORM; ROUTE	STRENGTH (CONTAINER SIZE)	DOCKET NUMBER	PETITIONER	REASON FOR PETITION	STATUS
ALBUTEROL SULFATE SOLUTION; ORAL	2MG/5ML	89 P-0447/CP	BIOCRAFT LABS	NEW DOSAGE FORM	APPROVED MAR 15, 1990
HYDROCORTISONE SOLUTION; TOPICAL	2.5%	89 P-0175/CP	GENDERM	NEW STRENGTH	APPROVED JAN 11, 1990
NITROGLYCERIN IN DEXTROSE 5% (INJECTABLE; INJECTION)	0.05MG/ML (500ML/CONTAINER)	89 P-0422/CP	LYPHOMED	NEW STRENGTH	APPROVED APR 20, 1990
NITROGLYCERIN IN DEXTROSE 5% (INJECTABLE; INJECTION)	0.2MG/ML (500ML/CONTAINER)	89 P-0422/CP	LYPHOMED	NEW STRENGTH	APPROVED APR 20, 1990
PENTAMIDINE ISETHIONATE INJECTABLE; INJECTION	100MG/ML (3ML/VIAL)	89 P-0435/CP	ASTRA PHARM PRODS	NEW DOSAGE FORM	APPROVED JAN 18, 1990
VERAPAMIL HYDROCHLORIDE TABLET, EXTENDED-RELEASE; ORAL	120MG	89 P-0220/CP	LEDERLE LABS	NEW STRENGTH	APPROVED JAN 11, 1990

APPROVED
JAN 11, 1990

NEW STRENGTH

LEDERLE LABS

89 P-0220/CP

120MG

VERAPAMIL HYDROCHLORIDE
TABLET,
EXTENDED-RELEASE; ORAL

25

ANDA SUITABILITY PETITIONS

PETITIONS DENIED

DRUG NAME DOSAGE FORM; ROUTE	STRENGTH (CONTAINER SIZE)	DOCKET NUMBER	PETITIONER	REASON FOR PETITION	STATUS
CLONIDINE HYDROCHLORIDE CAPSULE, EXTENDED-RELEASE; ORAL	0.2MG	88 P-0365/CP	BOEHR INGEL	NEW DOSAGE FORM	DENIED JAN 11, 1990

EXCLUSIVITY TERMS

DUE TO SPACE LIMITATIONS IN THE EXCLUSIVITY COLUMN, ABBREVIATIONS AND REFERENCES HAVE BEEN DEVELOPED. REFER BACK TO THE APPROVED DRUG PRODUCTS WITH THERAPEUTIC EQUIVALENCE EVALUATIONS, 10TH EDITION FOR A FULL LISTING OF EXCLUSIVITY TERMS (ABBREVIATIONS, NEW DOSING SCHEDULE, NEW INDICATIONS AND PATENT USE CODES). ONLY NEW CODES WILL BE ADDED TO THE CUMULATIVE SUPPLEMENT.

REFERENCES
NEW INDICATION

I-41 MIGRAINE HEADACHE PROPHYLAXIS

PRESCRIPTION AND OTC DRUG PRODUCT
PATENT AND EXCLUSIVITY DATA

APPL/PROD NUMBER	INGREDIENT NAME; TRADE NAME	PATENT NUMBER	PATENT EXPIRES	USE CODE	EXCLUS CODE	EXCLUS EXPIRES
>ADD> >ADD> >ADD>	18240 004 ATENOLOL; TENORMIN	3934032	JAN 20, 1993	U-3		
		3836671	SEP 17, 1991	U-39	I-39	SEP 13, 1992
		3836671	SEP 17, 1991	U-8		
19845 001	BETAXOLOL HYDROCHLORIDE; BETOPTIC S	4311708	JAN 19, 1999		NDF	DEC 29, 1992
19880 001	CARBOPLATIN; PARAPLATIN	4140707	AUG 25, 1998			
19880 002	CARBOPLATIN; PARAPLATIN	4140707	AUG 25, 1998			
19880 003	CARBOPLATIN; PARAPLATIN	4140707	AUG 25, 1998			
19966 001	CLOBETASOL PROPIONATE; TENOVATE	3721687	MAR 20, 1992		NP	FEB 22, 1993
					NCE	DEC 27, 1990
19949 001	FLUCONAZOLE; DIFLUCAN	4416682	NOV 22, 2000		NCE	JAN 29, 1995
19949 002	FLUCONAZOLE; DIFLUCAN	4404216	SEP 13, 2000		NCE	JAN 29, 1995
19949 003	FLUCONAZOLE; DIFLUCAN	4416682	NOV 22, 2000		NCE	JAN 29, 1995
19950 001	FLUCONAZOLE; DIFLUCAN	4404216	SEP 13, 2000		NCE	JAN 29, 1995
		4416682	NOV 22, 2000		NCE	JAN 29, 1995
		4404216	SEP 13, 2000		NCE	JAN 29, 1995
18554 001	FLUTAMIDE; EULEXIN	4329364	MAY 11, 2001	U-23		
>ADD> >ADD> >ADD> >ADD>	17556 001 HALCINONIDE; HALOG	3892857	JUL 01, 1992			
	17818 001 HALCINONIDE; HALOG	3892857	JUL 01, 1992			
	17824 001 HALCINONIDE; HALOG	3892857	JUL 01, 1992			
	18234 001 HALCINONIDE; HALOG-E	3892856	JUL 01, 1992			
19693 001	INDECANIDE HYDROCHLORIDE; DECABID	4048310	SEP 13, 1994			
19693 002	INDECANIDE HYDROCHLORIDE; DECABID	4382093	MAY 03, 2000			
19693 003	INDECANIDE HYDROCHLORIDE; DECABID	4382093	MAY 03, 2000			
18956 002	IOHEXOL; OMNIPAQUE 240	4382093	MAY 03, 2000			
19907 001	METIPRANLOL HYDROCHLORIDE; METIPRANLOL HCL	4021481	MAY 03, 1994			
19786 001	METOPROLOL FUMARATE; LOPRESSOR	3916899	NOV 04, 1992		NCE	DEC 29, 1994
		3845770	NOV 05, 1991			
19786 002	METOPROLOL FUMARATE; LOPRESSOR	3916899	NOV 04, 1992			
19786 003	METOPROLOL FUMARATE; LOPRESSOR	3845770	NOV 05, 1991			
		4892739	JAN 09, 2007			
19786 004	METOPROLOL FUMARATE; LOPRESSOR	3916899	NOV 04, 1992			
		3845770	NOV 05, 1991			
		4892739	JAN 09, 2007			
19886 001	NAFARELIN ACETATE; SYNAREL	3916899	NOV 04, 1992			
		3845770	NOV 05, 1991			
		4234571	NOV 18, 1997		NCE	FEB 13, 1995

PRESCRIPTION AND OTC DRUG PRODUCT
PATENT AND EXCLUSIVITY DATA

>ADD>	19818 001	PEGADEMASE BOVINE; ADAGEN	4179337	DEC 18, 1996	NCE	MAR 21, 1995
>ADD>	87361 001	PROCAINAMIDE HYDROCHLORIDE; PRONESTYL-SR	4252786	FEB 24, 1998		
>ADD>	10929 001	SODIUM IODIDE, I-131; IODOTOPE	4349529	SEP 14, 1999		
>ADD>	10929 002	SODIUM IODIDE, I-131; IODOTOPE	4349529	SEP 14, 1999		
>ADD>	10929 003	SODIUM IODIDE, I-131; IODOTOPE	4349529	SEP 14, 1999		
>ADD>	18107 001	TECHNETIUM TC-99M MEDRONATE KIT; MDP-SQUIBB	4115541	SEP 19, 1995		
>ADD>	17339 001	TECHNETIUM TC-99M SODIUM PERTECHNETATE GENERATOR; MINITEC	4041317	AUG 09, 1994		
>ADD>			3920995	NOV 18, 1992		
	18017 001	TIMOLOL MALEATE; BLOCADREN			I-41	MAR 03, 1993
	18017 002	TIMOLOL MALEATE; BLOCADREN			I-41	MAR 03, 1993
	18017 004	TIMOLOL MALEATE; BLOCADREN			I-41	MAR 03, 1993
	19951 001	ZIDOVUDINE; RETROVIR			NCE	MAR 19, 1992
					ODE	MAR 19, 1994

**WITH
THERAPEUTIC EQUIVALENCE EVALUATIONS**

10TH EDITION

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