1. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 17.12.2011:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 17.12.2011and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
Global Clinical Trials			
1	**Rufinamide**		The drug has not yet been studied / approved in the country in adults. The tools to assess the cognitive affects are also not included in the protocol except CBCL (child behaviours check list) which is not adequate. In view of above, the proposal to conduct the study in children 1 to 4 years of age was not recommended. DEFFREED
2	**Lurasidone HCl**		Recommended for granting permission for the conduct of proposed study subject to following conditions: • That subject from extension study 01050256 should only be rolled over to the proposed study. • Patients aged 18 to 65 years only should be included in the study.
3	**OPC-34712**		Since the study involves use of placebo without rescue medication in one arm in patients with acute schizophrenia, the proposal was not recommended for grant of permission.
4	**OPC-34712**		Since the study involves use of placebo without rescue medication in one arm in patients with acute schizophrenia, the proposal was not recommended for grant of permission.
5	**BMS-820836**		Recommended for granting permission for the conduct of proposed study. Patients aged 18 to 65 years only should be included in the study.
6	**BMS-820836**		Recommended for granting permission for the conduct of proposed study. Patients aged 18 to 65 years only should be included in the study.
7	**LuAA21004**		There were earlier studies conducted in USA which had failed as there was no statistically significant effect of the study drug at dose level of 5, 10 mg per day over placebo. Similarly, there are also other studies which were considered failed in different dose level. Further there were report of six deaths in earlier clinical trials and the firm's representative clarified that in one case of

			the death was considered to be possibly related to the study drug by the investigator. In view of above the proposal was not recommended for granting permission this Phase III b study.
	Topiramate		The firm had also applied for an open label extension study (Protocol No-P09-005) along with the parent study. Details of that proposal were also forwarded before the committee along with the proposed core study (P09004). The placebo arm was considered accepted because of proper exclusion and withdrawal criteria included in the protocol for status epileptus and patients will be on 1 to 3 AED (anti epileptic drug). Recommended for granting permission to conduct both the above mentioned core as well as extension study subject to condition that subjects aged 18 to 65 years should be included in the core study.
New Drugs			
9.	**Fingolimod**		Recommended for approval for manufacture and marketing the drug in the country subject to condition that the single dose BE study is carried out and product is proven to be bio equivalent with the innovator product and after approval of the drug, the Phase IV clinical trial should be conducted on 100 subjects within a period of 2 years. The protocol for the phase IV study should be submitted within 1 month of approval of the drug to DCGI for approval. The Recruitment shall be initiated within one month of approval of protocol and status should be submitted to the office of DCGI on monthly basis. Recruitment of subjects should be at least at the rate of 25% of the total subjects quarterly. The interim analysis of the data shall be carried out every six month after 1st recruitment of the patient and submitted to the office of DCG (I).
10.	**Blonanserin**		Recommended for approval for manufacture and marketing the drug in the country subject to condition that phase IV clinical trial should be conducted on 500 subjects within a period of 6 months. The protocol for the phase IV study should be submitted within 1 month of approval of the drug to DCGI for approval. In the indication the firm shall not claim it as a first line treatment.

11.	**Maprotiline HCl**		Recommended that a comparative clinical trial with Selective serotonin reuptake inhibitors (SSRIs) should be conducted on 200 subjects. Accordingly revised clinical trial protocol should be submitted.

2. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 04.02.2012:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 04.02.2012 and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1	**Rotigotine Transdermal Patch**		The firm presented the interim results of ongoing phase III global clinical trial with the drug in which 150 Indian subjects were enrolled. However complete report of the study has not been submitted. Therefore the committee opined that no decision can be taken on the request of the firm for waiver of further clinical trial on Indian subjects. The firm also stated that they have modified the formulation due to crystalization of some batches of the earlier formulation. Committee recommended that the firm may submit the final report of the above mentioned study along with report of equivalence study of the new formulation vis-à-vis the earlier formulation.
2	**Lacosamide + Methylcobalamin**		Committee stated that there is no compelling evidence to recommend the intake of B12 together with lacosamide either in diabetic or other painful peripheral neuropathies or in partial seizures. Further there is no rationale of combining Lacosamide and methylcobalamin. In view of above, the committee did not recommend for marketing approval of the proposed FDC.
3	**OPC-34712**		The proposed clinical trial under protocol no. 331-10-237 includes roll over subjects from double blind phase 3 clinical trials under protocol nos. 331-10-230 and 331-10-231 and de novo subjects who did not participate in the double blind phase 3 trials. Since the core studies under protocol nos 331-10-230 and 331-10-231 were not considered by the committee earlier, the proposed clinical trial can be considered with condition that de novo subjects only will be included in the study. It was also advised by the committee that 50% of the sites should be multispecialty hospitals.

4	**YKP3089**		As per the protocol the subjects must be taking 1-3 concomitant anti-epileptic drugs (AEDs) which they will continue to take as prescribed throughout the study. As regards to psychiatry evaluation in the study, it was noted that the protocol includes such evaluation. The study is already ongoing in USA and Korea. In view of above, the committee recommended for approval of the study.
5	**Cariprazine**		As per the protocol, all anti-depressant medications will need to be discontinued before enrollment in the proposed study. Secondly being a placebo control trial no concomitant mood stabilizer can be used during the trial period of 8 weeks of double blind treatment. The patients with bipolar depression are often on mood stabilizers which will also be discontinued. The risk of the trial is hence considerably enhanced. If the mood stabilizer or continuing medications are stopped risk of deepening depression, and risk of suicide may increase. In view of above, the committee did not recommended for approval of the proposed study.
6	**Cariprazine**		The firm submitted detailed justification and risk management in support of use of placebo in the proposed study. One of the justification is that the relapse criteria are designed to detect signs of deterioration early-before full relapse occurs-in order to limit exposure to ineffective treatment (investigational drug or placebo) and to allow that adequate treatment be initiated immediately when necessary. In view of above, the committee recommended for approval of the study.
7	**Aripiprazole**		Aripiprazole once daily tablet formulation is approved in Korea. Tourette's Disorder is a disease in children and adolescents. Use of placebo in Tourette's disorder does not impact the course of illness for this disease. Committee recommended for approval subject to submission of following to the

			office of DCG(I). i) Copy of approval of the drug in Korea for Tourette's Disorder. ii) Details of Phase 1 data generated in paediatric patients. iii) Details of pharmacokinetic data of the once weekly formulation vis-à-vis conventional formulation. iv) Copy of notification of the study to US FDA.
8	**Aripiprazole**		Aripiprazole once daily tablet formulation is approved in Korea. Tourette's Disorder is a disease in children and adolescents. Committee recommended for approval subject to submission of following to the office of DCG(I). i) Copy of approval of the drug in Korea for Tourette's Disorder. ii) Details of Phase 1 data generated in paediatric patients. iii) Details of pharmacokinetic data of the once weekly formulation vis-à-vis conventional formulation. iv) Copy of notification of the study to US FDA.
9	**Perampanel**		The firm presented justification for the use of placebo. The subjects will receive one to two marketed anti-epileptic drugs as per inclusion and exclusion criteria. The firm also presented the detailed clinical data including reports of 3 studies - E2007-G000-305, E2007-G000-304 and J81-233. After deliberation the committee recommended for the study subject to condition that upper age limit of the subjects should be ≤ 65 yrs.
10	**Armodafinil**		Committee recommended for approval

			subject to condition that during the follow-up period, there should be visits weekly and post treatment follow-up of patients should be done for at least 1month to assess the dependence potential since the drug has abuse potential.
11	**Armodafinil**		Committee recommended for approval subject to condition that during the follow-up period, there should be visits fortnightly and post treatment follow-up of patients should be done for at least 3 months to assess the dependence potential since the drug has abuse potential.
12	**Sodium Valproate**		The proposed use of valproate through Intra-Cerebroventricular (ICV) delivery has been discovered in USA. Although the study is proposed to be conducted in India and Mexico, it is a first in human study with Intra-Cerebroventricular (ICV) delivery of valproate in subjects with focal seizures with or without secondary generalization. In view of lack of phase 1 clinical trial data with such product, the committee did not recommend for approval of the proposed study.
13	**EMA401**		Since the study is proposed to be conducted only in India, the committee did not recommend for approval of the study at this stage. If the applicant proposes to conduct the study in multiple countries, they may submit their proposal accordingly for further consideration.

3. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 27.04.2012:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 27.04.2012 and recommended the following:

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1	**Levetiracetam 100 mg/ml Injection.**		Committee recommended for giving permission to conduct the study subject to the following conditions:- i) Children aged 2-4 years should be included in the study. ii) Cognitive assessments should be done.
2	**Amitriptyline HCl+Capsaicin+ Lidocaine HCl**		The committee did not find clinical trial data submitted for marketing in the country convincing due to the following reasons:- i) There was no control arm to control bias. ii) There was no proof of efficacy/safety of the combination in comparison to the individual components. In view of above, the committee recommended for submission of well designed powered study to prove safety and efficacy of the proposed combination over the individual components.
3	**R04917838**		Recommended for giving permission to conduct the study subject to the following conditions:- i) Upper age limit of patients to be included in the study should be 65 years. ii)50% of the trial sites should be multispecialty hospitals.
4	**R04917838**		Recommended for giving permission to conduct the study subject to the following conditions:- i) Upper age limit of patients to be included in the study should be 65 years. ii)50% of the trial sites should be multispecialty hospitals.
5	**PF-03049423**		Recommended for giving permission to conduct the study subject to condition that only part 2 of the study should be conducted in India.
6	**Preladenant**		The present proposal is a roll over study of an already ongoing trial in the country (Study P04938). Committee recommended for giving permission to conduct the study.

7	**Buspirone**		The drug is already approved in India and available in the Indian market since many years and there is no concern for its safety and efficacy. Committee recommended for giving permission to conduct the study subject to condition that 50% of the trial sites should be multispecialty hospitals and the sites should be geographically distributed in the country.
8	**RP5063**		The proposed study has a placebo arm. Committee opined that the use of placebo in patients with an acute exacerbation of schizophrenia or schizoaffective disorder is not justified. Therefore committee did not recommend for giving permission to conduct the study.
9	**GTR**		The proposed study has a placebo arm. Committee opined that the use of placebo in patients with relapsing remitting multiple sclerosis for 9 months is not justified. Therefore committee did not recommend for giving permission to conduct the study.
10	**Valacyclovir**		Committee recommended for giving permission to conduct the study subject to condition that DSMB report should be submitted to the office of DCG (I) annually.
11	**NT 201**		Currently there is no alternative therapy for the treatment of post-stroke spasticity of upper limb. Committee stated that the most widely used treatment for post-stroke spasticity is physiotherapy. The use of placebo arm in the study is justified due to the use of concomitant medications. Committee recommended for giving permission to conduct the study.
12	**Daclizumab**		The present study is an extension study of an already ongoing trial in the country (Study 205MS202). Committee recommended for giving permission to conduct the study subject to condition that data of the core study should be submitted to the office of DCG(I) within one year of approval of the study.
13	**Fampridine**		The drug has a narrow therapeutic index and is to be used as long term therapy. Committee did not agree to the request of the applicant for local clinical trial waiver and recommended for conducting a clinical trial with the drug in India. Accordingly protocol etc should be submitted to DCG(I) for evaluation.
14	**NU100**		The proposed study has a placebo arm. Committee opined that the use of placebo in

			patients with multiple sclerosis is not justified. Therefore committee did not recommend for giving permission to conduct the study.

4. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 9.08.2012:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 09.08.2012 and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1	**Vardenafil Tablet 10/20 mg**		Committee recommended that the firm should submit the detail report of clinical trial conducted in India with detailed analysis considering all factor including number of tablet consumed by the individual patients Vs improvement which should be circulated to the members of the committee for examination.
2	**Almotriptan 6.25mg & 12.5 mg Tablet**		Committee recommended for approval of the drug with condition that Post marketing (Phase-IV) trial should be conducted on 500 patients within a period of one years after getting protocols, etc approval by DCG(I). The study should have safety and efficacy as primary objective. After 1 year the marketing approval will be reviewed based on the Post marketing trial data generated.
3	**Agomelatine 25 mg Tablet**		Earlier Clinical Trial permission was granted by office of DCG(I) for this drug to M/s Sun Pharma as well as M/s Precise Pharma. Committee considered the clinical trial data generated with the drug by M/s Sun Pharma (on 252 patients) and M/s Precise Pharma (on 211 patients). After detail deliberation the committee recommended for approval of the drug with following condition:- 1. The drug should be used only in patients aged 18-65 years only with normal liver functions. 2. Post marketing (Phase-IV) trial should be conducted on 500 patients by each firm within a

			period of two years after getting protocols, etc approval by DCG(I). The study should have safety as primary objective with a minimum of 6 months duration of therapy. After 2 year the marketing approval will be reviewed based on the Post marketing trial data generated.
4	**Fasudil Hydrochloride Injection 30mg/2 ml**		Committee opined that the safety and efficacy data available so far on the drug is not adequate for the approval. Therefore the committee recommended that the applicant should generate adequate clinical data of safety and efficacy of drug on Indian population before considering the proposal for approval.
5	**Tandospirone Citrate Capsule**		The committee recommended for double-blind, comparative statistically powered clinical trial of Tandospirone V/s Buspirone with 12 weeks duration of therapy. The trial sites should be multispecialty hospitals geographically distributed in the country. Accordingly the firms should submit revised protocol etc for approval of DCG(I). Bioequivalence study should also be conducted. Clinical data & Bioequivalence data so generated should be placed before the committee for examination.
6	**Lacosamide Injection 200 mg/ 20ml**		Lacosamide tablet & syrup is already approved in the country.Lacosamide is 100% bioavailable by both oral & i.v. route. Lacosamideinjection is recommended in certain condition for patients of partial onset of seizures when oral Lacosamide is not feasible. It is not for routine use in such patients. Lacosamide injection already approved in USA & EU. Therefore clinical trial data generated on 60 patients in considered adequately. Committee recommended for approval of Lacosamide injection with condition that Post marketing (Phase-IV) trial should be conducted on 200 patients within a period

			of two years after getting protocols, etc approval by DCG(I). After 2 year the marketing approval will be reviewed based on the Post marketing trial data generated.
7	**Olanazapinepamoate PR Powder for suspension for IM Injection**		Committee examined the Bioavailability data & Clinical trial protocol etc and opined that clinical trial data when completed should be placed before the committee for examination. However at the end of trial there should be follow-up observation for 4-6 weeks after switching from injection to oral therapy.
8	**Alprazolam 0.5mg/1mg + Escitalopram10 mg Tablets**		The committee examined the proposal in details and opined that there is no scientific explanation for this combination, hazard of the drug is high with alprazolam. Therefore committee did not recommend for approval of this FDC.
9	**BenzhexolHCl + Paliperidone Capsules**		Committee deliberated the proposal in detail and opined that certain percentage of patients who experiences extra pyramidal syndrome require both Paliperidone and benzhexol. However available data is not adequate for approval of the FDC. Committee recommended that a well designed statistically powered clinical trial is required to be conducted before taking decision on approval of the FDC. Accordingly the applicant should submit protocol etc for clinical trial which should be placed before the committee for consideration.
10	**Clonazepam + Escitalopram Oxalate Mouth dissolving Tablets**		Conventional tablet of Clonazepam & Escitalopram is already marketed in the country. Committee recommended to give permission of proposed bioequivalence study.
11	**Donepezil HCl + MemantineHCl Tablets**		Committee opined that there is no data in support of use of the proposed higher strength of Donepezil 10 mg and Memantine 20 mg in FDC. Therefore the committee did not recommend for approval

			of the proposed strength of the FDC.
12	**Xprenor**		Committee recommended for giving permission to conduct the proposed study.
13	**Asenapine**		Committee recommended for giving permission to conduct the proposed study with the condition that the upper age limit of the subjects should be 65 years of age.
14	**R-TPR-004 (Reteplase Recombinant Tissu Plasminogen activator)**		Committee recommended for giving permission to conduct the proposed study with the condition that the study should be termed as Phase II study. Based on the data generated in the Phase II study, larger comparative Phase III clinical trial is required to be conducted before considering the marketing approval of the product for the proposed indication.
15	**THR-18**		Committee recommended for giving permission to conduct the proposed study.
16	**RP5063 (for reconsideration of NDAC)**		Committee noted that the applicant will provide guidance to investigators mentioning that they can use antipsychotic agents as and when required by any patients. And Ethics Committees of all the eight centres have already approved the protocol. The committee recommended giving permission subject to condition that the applicant will submit the report of DSMB at regular interval which should be placed before the committee.

5. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) DELIBERATED THE PROPOSALS ON 09.11.2012:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 09.11.2012 and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1	**Ibudilast SR Capsule**		The drug is reported to be approved in Japan for the treatment of bronchial asthma and improvement of dizziness secondary to chronic cerebral circulation impairment associated with sequelae of cerebral infarction. However the firm has proposed for a phase III clinical trial for the treatment of neuropathic pain. Committee opined that supporting data is not adequate to grant permission for phase III clinical trial in neuropathic pain, hence did not recommend for giving permission for the proposed trial.
2	**Lurasidone 40mg/80mg tablet**		The design of the protocol presented by the firm was not proper. One more arm with 80 mg strength should be included and dose of quetiapine as comparator changed as per the suitability of Indian patients shall also be reflected in the protocol very clearly. Inclusion and exclusion criteria are not clearly spelled out in the protocol. Further, justification for treatment duration of 42 days is also not clear. Therefore committee opined that the firm should revise the protocol and place it again before the committee for review.
3	**VilazodoneHCl Tablets 10mg/20mg/40mg**		Inclusion and exclusion criteria, laboratory investigations and examination are not very much elaborated in the protocol. Sites proposed by the firm are mostly clinics and do not include multispecialty hospitals as well as Govt. hospitals. Further dose titration to be carried out in the clinical trial as informed by the firm during presentation was also not reflected in the protocol. Committee recommended to revise the

			protocol and place it before the committee again for review.
4	**Retigabine Tablet 50mg/100mg/200mg/ 300mg**		Committee noticed that the proposed indication is not a rare or life threatening disease. Further, data from clinical trial in Indian population is also not available. In view of the above, committee did not consider for clinical trial waiver and recommended that firm should conduct Phase III clinical trial with the drug in Indian subjects. Protocols etc. for the Phase III clinical trial should be submitted to DCG(I) which will be examined by the committee before further consideration.
5	**CisatracuriumBesylate Injection**		Committee recommended for giving permission for the proposed clinical trial subject to the following conditions: 1. Serum electrolytes evaluation shall be included in safety parameters. 2. ICU patients shall be excluded from the study. Committee also recommended that results of the trial shall be placed before and reviewed by the committee prior to grant of market authorization the drug.
6	**Desvenlafaxine ER Tablets 150mg**		The data submitted in support of desvenlafaxine ER tablets 150mg is not scientifically adequate. Further, the proposed drug is not approved internationally in countries like USA, UK etc. and also there is a chance for misuse of the drug in Indian population. In view of above, committee did not recommend for the grant of permission for the drug.
7	**AmisulpirideOrodispersible Tablets 200 mg**		Committee recommended for giving permission to conduct proposed bioequivalence study subject to submission of an undertaking by the applicant that all the biochemical, hematological & clinical parameters of the volunteers will be assessed before enrolling them in the bioequivalence study.

			Above details etc. should be submitted to the DCG(I) for his approval of the study. The report of the bioequivalence study should be submitted to the committee for the examination.
8	**Betahistine SR Tablets 24/34/48 mg**		Committee recommended for giving permission for marketing the drug for peripheral vertigo.
9	**Levetiracetam SR Oral Suspension 100 mg/ml**		Committee recommended for giving permission for bioequivalence study. However, the committee also recommended that before permission to market the drug firm should conduct Phase III clinical trial with the drug comparing the proposed formulation vis-à-vis the conventional formulation. Accordingly, firm should submit protocol etc. for Phase III clinical trial which will be reviewed by the committee.
10	**Asenapine**		Committee noted that rational for using placebo in the study is not adequate. Further, justification submitted by the firm for using Lorazepam as rescue treatment is also not adequate. Hence committee did not recommend for giving permission to conduct the trial.
11	**Asenapine**		Committee noted that rational for using placebo in the study is not adequate. Further, justification submitted by the firm for using Lorazepam as rescue treatment is also not adequate. Hence committee did not recommend for giving permission to conduct the trial.
12	**CT/62/12 Asenapine**		Committee noted that rational for using placebo in the study is not adequate. Further, justification submitted by the firm for using Lorazepam as rescue treatment is also not adequate. Hence committee did not recommend for giving permission to conduct the trial.
13	**Asenapine**		Committee noted that rational for using placebo in the study is not adequate.

			Further, justification submitted by the firm for using Lorazepam as rescue treatment is also not adequate. Hence committee did not recommend for giving permission to conduct the trial.
14	**CT/174/11 Lurasidone**		Committee recommended for the grant of permission to conduct the clinical trial subject to submission of the details of clinical trial sites etc. which should be multispecialty hospitals/medical colleges including government medical hospitals/institutions. The upper age limit of the subject should be 65. The above details etc. should be submitted to the DCG(I) for the approval of the clinical trial.
15	**LuAA21004**		Firm clarified about the issues raised during last meeting held on 17.12.2011 and committee recommended for the approval of the trial subject to condition that the trial should be conducted in multispecialty hospitals including government medical colleges/hospitals and should be distributed geographically in the country.
16	**BG00012 (Protocol Amendment)**		Committee recommended for the proposed extension of the clinical trial. Dr. Madhuri Behari, Prof & Head, Dept. of Neurology, AIIMS, New Delhi, did not take part in the deliberation and decision making procedure.
17	**Pregabalin**		Committee recommended that the firm should submit the report of the adult study of pregabalin in seizure being conducted/ ongoing in India before consideration of the proposed study by the committee.

6. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 01.03.2013:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 01.03.2013 and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
	Special Agenda 1 to 5		
1	**Natalizumab Intravenous Infusion**		The Committee was apprised that the Parliamentary Standing Committee (PSC) for the Ministry of Health & Family Welfare had presented its 59th report to the Parliament on 08.05.2012 on the functioning of the CDSCO. The report has made various recommendations and observation on various aspects such as approval of New Drugs, Pharmacovigilance, approval of clinical trials etc. The Ministry of Health & Family Welfare has submitted final action taken report on the observation/recommendations contained in the 59th report of the Hon'ble Parliamentary Standing Committee. As per the action taken report, it has been decided by the Ministry that 73 drugs including Fixed Dose Combinations, on approval of which the Hon'ble PSC has made various observations, would be referred to the NDACs for examination and review related to continued marketing of these drugs and updating of their product monographs in light of recent knowledge and regulatory changes overseas. Out of these 73 drugs, 5 drugs are in the category of Neurology and Psychiatry which are given below:- 1. Natalizumab intravenous infusion (Each vial 15ml contains: natalizumab-300mg), Lyophilized Powder 2. FDC of flupenthixol&melitracen (Deanxit) 3. Rasagiline 4. Paliperidone 5. Zotepine The NDAC (Neurology & Psychiatry)
2	**FDC of Flupenthixol & Melitracen (Deanxit)**		
3	**Rasagiline**		
4	**Paliperidone**		
5	**Zotepine**		

			discussed the issue and noted that Ministry of Health & Family Welfare has already constituted a Committee to formulate policy guidelines and SOPs for a) approval of new drugs. clinical trials, and banning of drugs under the Chairmanship of Dr. Ranjit Roy Chaudhury and b) for approval of the Fixed Dose Combinations under the Chairmanship Dr. C.K. Kokate. Therefore, the Committee opined that the above five drugs related to continued marketing and updating of the product monograph in the light of recent knowledge and regulatory changes overseas could be examined as per policies, guidelines and SOPs being prepared by the Dr. Ranjit Roy Chaudhury Committee and Dr. C.K. Kokate Committee. However, in the meantime the data/information on safety, efficacy of these five drugs including published data, PMS/PSUR, PSUR data especially on Indian patient required to be prepared in the Form of Dossier. Such data should be prepared from three different sources viz. i) by CDSCO ii) by PharmacovigilanceProgramme of India (PvPI) and iii) the firm concerned. The Dossier shall be circulated to all the experts of the NDAC (Neurology & Psychiatry) for their further review. If needed manufacturer may be requested to make their Presentation before the NDAC on safety and efficacy of the drugs.
6	**Kallikrein Injection**		Company has informed that they have completed the clinical trial and in the process of submitting the clinical trial report. Committee recommended that after submission of the clinical trial report by the company the matter will be examined by the committee and therefore the matter is deferredtill that time.
7	**Teriflunomide**		Company requested for waiver of local clinical trial based on the data generated globally. Committee opined that in the absence of safety and efficacy data in Indian

			population the CT waiver cannot be considered.
8	**Aripiprazole Tablets**		Due to unavailability of the technical team, company did not came for presentation and have requested to put the proposal for deliberation in next meeting.
9	**Lamotrigine ER Tablets**		Company proposed for import and market of Lamotrigine ER Tab. 300mg. At present, 100mg and 200mg ER formulations of Lamotirigine are already approved and available in the country. Committee opined that there is a strong need for 300mg ER formulation of the drug. However, firm should conduct Bioequivalence study of the proposed product on Indian subjects. Based on satisfactory data from BE study permission to market the drug can be granted by DCG(I).
10	**Clonazepam + Escitalopram**		The firm could not produce any clinical justification for the proposed strengths. Further, the proposed strengths is also not approved anywhere in the world. Therefore, committee did not recommend.
11	**Flupenthixol + Melitracen (Deanxit)**		Committee felt that rationality and essentiality of continues marketing of this FDC is questionable Melitracen is reported to be not efficacious as a single agent in depression. Flupenthixol use is associated with potentially serious neurologic side effects. Above points are more relevant today in view of the fact that various other more efficacious, safer and relatively inexpensive alternate antidepressants and anti-anxiety drugs are already available. However, committee reviewed the protocol opined as under: Primary and secondary objectives as mentioned in the protocol appears to be same and should be corrected appropriately. The protocol should identify safety, tolerability as primary objective and efficacy as secondary objective as

			recommended by the previous expert committee. In the inclusion criteria, DSM-IV should be used as the criteria for diagnosis of the disease. Rationality of sample size adequacy is not provided. Proposed clinical trial sites are not reputed government medical colleges / institutions. The duration of treatment is also 4 weeks which should be atleast 12 weeks. Are the exclusion criteria as mentioned in the protocol also included in package insert / prescribing information as contraindications.
12	**Risperidone**		Committee raised concerns on the following points: Inclusion and exclusion criteria as mentioned in the presentation are not adequate Justification for large sample size not given Consent form not submitted GCP training of all investigators not submitted Admission for only one day is not sufficient The Ethics Committees should review the consent process and the amount of compensation for participation.
13	**Tenecteplase**		The Committee agreed for giving permission to the protocol, provided that investigators list and clinical sites list is submitted to the office of CDSCO and that they shall use descriptive statistics as against using historical controls for comparison

7. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 11.05.2013:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 11.05.2013 and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1	**Clonazepam CR Tablets**		The committee stated that there is no rationale for approval of clonazepam CR 4mg tablets. Committee recommended to conduct single dose pharmacokinetic study in healthy volunteers in fasting and fed states. However the committee did not recommend for conducting multiple dose pharmacokinetic study. Committee recommended for conducting clinical study subject to the following conditions:- In inclusion criteria, age of patients should be revised to 18-55 years. Change of the study objectives to differentiate between controlled release and immediate release formulations.
2	**Brexpiprazole (OPC-34712)**		Committee recommended for giving permission to conduct the study subject to condition that the trial sites should have Institutional Ethics Committee and the sites should be geographically distributed across the country.
3	**RO4917838**		Committee recommended for giving permission to conduct the study with Protocol amendment version E submitted to DCGI on 24.12.12 subject to condition that the trial sites should have Institutional Ethics Committee and the sites should be geographically distributed across the country.
4	**RO4917838**		Committee recommended for giving permission to conduct the study with Protocol amendment version E submitted to DCGI on 24.12.12 subject to condition that the trial sites should have Institutional Ethics Committee and the sites should be geographically distributed across the country.
5			Committee recommended for approval of the proposed amendment subject to condition that the change in ICF - “allow

	YKP3089 **(Protocol Amendment)**		subjects under the care of guardians to participate in the study" cannot be considered.
6	**Perampanel** **(Protocol Amendment)**		Committee recommended for approval of the proposed protocol amendment.
7	**Perampanel** **(Protocol Amendment)**		Committee recommended for approval of the proposed protocol amendment.
8	**Interferon beta-1b**		The firm presented the PK/PD data generated with the product which was found satisfactory. However the firm should conduct phase III clinical trial with the product vs Innovator's product on Indian patients. Protocol etc. should be submitted to DCGI for approval.
9	**Bupronorphine + Naloxone** **Miscellaneous agenda**		After detailed deliberation, committee did not agree for allowing the sale of the drug by retail under prescription of RMP. The restriction on sale as stipulated will continue.
10	**FDC of Flupenthixol + Melitracen tablets (Deanxit)** **Miscellaneous agenda**		The committee opined that rationality and essentiality of continued marketing of this FDC is questionable. Melitracen is reported to be not efficacious as a single agent in depression. Flupenthixol use is associated with potentially serious neurologic side effects. Above points are more relevant today in view of the fact that various other more efficacious, safety and relatively inexpensive alternate antidepressants and anti-anxiety drugs are already available. Firm was asked to submit clarification in this regard and to make presentation before NDAC on 11.05.13; however the firm did not turn up. The committee recommended for suspension of the manufacturing and marketing of FDC of Flupenthixol + Melitracen tablets in the country. However the firm may generate data on safety, tolerability and efficacy of the

			drug for further consideration in the matter.
11	**Lurasidone 40mg/80mg Tablet** **Re-examination**		The firm presented the clarification/justification as desired by the committee in the last meeting. Committee recommended for giving permission to conduct clinical trial subject to the following conditions:- Only freshly diagnosed patients of acute schizophrenia should be enrolled in the study. Sample size should be calculated statistically so that power of the study is 80% and α level 5%. However the sites should be hospitals/medical colleges (50% government hospitals/colleges) having emergency facilities and Institutional ethics Committee registered with CDSCO and the sites should be geographically distributed across the country. Accordingly the details of such sites should be submitted to DCGI alongwith undertaking for compensation and ICD as per new Rules should be submitted before formal approval of the trial by DCGI.
12	**Vilazodone Hcl Tablet 10mg/20mg/40mg** **Re-examination**		The firm presented the clarification/justification as desired by the committee in the last meeting. Committee recommended for giving permission to conduct clinical trial subject to the following conditions:- Dose of the drug should be reduced by back titration. Sample size should be calculated statistically so that power of the study is 80% and α level 5%. However the sites should be hospitals/medical colleges (50% government hospitals/colleges) having emergency facilities and Institutional ethics Committee registered with CDSCO and the sites should be geographically distributed across the country. Accordingly the details of such sites should be submitted to DCGI alongwith undertaking for compensation and ICD as per new Rules should be submitted before formal approval of the trial by DCGI.

13	**Aripiprazole Tablets 2mg** **Re-examination**		The committee opined that this drug may be misused in children and adolescents if the same is approved without conducting a clinical trial. Hence the committee did not recommend for granting permission for the proposal.

8. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 24.09.2013:-

The NDAC (Neurology and Psychiatry) deliberated the proposals on 24.09.2013 and recommended the following:-

Agenda no.	Drug Name		Recommendations
1	**Perampanel 2/4/6/8/10/12 mg film coated tablet**		The Firm presented safety, efficacy data of Perampanel drug including the result of clinical trial conducted globally with India as participating country. In Phase-III global clinical trial no. of patients involved is 1400, out of which 80 patients were from India. Committee opined that no. of patients in clinical trial from India is not adequate for approval of the drug & recommended that BA/BE study and phase –III clinical trial is required to be conducted in India. Accordingly, protocol should be submitted for consideration by the Committee.
2	**Retigabine**		In case of M/s Hetero: Committee recommended for the proposed clinical trial, however the clinical trial should not include only patients with refractory partial seizures as add on therapy. All partial seizure patients should be enrolled in the study. Number of sample size should be recalculated and submitted to DCGI before initiation of that study. In case of M/s Cadila Healthcare & for other firms the Committee recommended that the study design should be as that of M/s Hetero & sample size should be statistically significant. Accordingly, revised protocol etc. is required to be submitted to DCGI for approval.
3	**Divalproex Sodium Oral Solution 500 mg/5ml**		Committee recommends for grant of approval for Divalproex Sodium Oral Solution 500 mg/5ml for monotherapy and adjunctive therapy in the treatment of patients with complex partial seizures that occur either in isolation or in association with other types of seizure **for adult patients only**.

4	**Everolimus 2mg, 3mg and 5mg Dispersible Tablets**		The Committee recommended that firm should submit the BA/BE study protocol etc. on Indian population for approval of DCGI and study results should be submitted to the Committee for review.
5	**Nicotine Transdermal Patch**		The Committee recommended that firm should conduct the Phase-III clinical trial on Indian population with statistically significant sample size among geographically distributed sites having at least 50% government institutions. Accordingly, firm should submit the Phase-III protocol for further review by the committee.
6	**Topiramate Modified Release Tablets 50mg/100mg**		The firm didn't turn up for the presentation so proposal deferred to next meeting.
7	**Amitryptyline HCl 50mg ER Tablet.**		The Committee opined that drug is generally prescribed as once a day because of longer half life of drug and there is no rationale for making extended release of tablet so permission for manufacture & marketing of Amitryptyline HCl 50mg ER Tablet is not granted.
8	**S-Bupivacaine Solution for Injection 7.5mg/ml (with preservative) and 5mg/ml (hyperbaric)**		The committee opined that the product S-Bupivacaine Solution for Injection 7.5mg/ml is an anaesthesia drug so the proposal should be referred to NDAC (Anaesthesia).
9	**Risperidone**		Committee recommended for grant of permission for deltoid as an additional site of intramuscular administration for Risperidone

	prolonged release suspension for injection 12.5 mg/ 25 mg/ 37.5 mg/ 50 mg per vial		prolonged release suspension for injection 12.5 mg/ 25 mg/ 37.5 mg/ 50 mg per vial.
10	**Methylcobalamine Nasal Spray 500mcg**		The Committee recommended for grant of approval of BA study of Methylcobalamine Nasal Spray 500mcg. However for clinical trial approval committee opined that the protocol should be referred to NDAC (Hematology) as in proposed protocol the patient with signs or symptoms of neurological involvement are excluded.
11	**Donepezil SR Tablet 23mg**		The Committee recommended for amendment in approved indication of Donepezil SR Tablet 23mg for the treatment of moderate to severe Alzheimer dementia instead of treatment of mild to moderate Alzheimer's dementia.
12	**Cerebrolysin solution for Injection 215.2 mg/ml**		The Committee opined that the firm should conduct the clinical trial to prove the safety & efficacy of Cerebrolysin solution for Injection 215.2 mg/ml. Accordingly, the firm should submit the clinical trial protocol etc. to CDSCO for further review.
13	**Itopride Hydrochloride 50mg + Chloridiazepoxide IP 5mg tablet-**		The Committee opined that the proposed FDC is irrational & the anxiety can't be dealt with low dose of Benzodiazepine & may cause dependency. Moreover there is no published data on proposed FDC for functional dyspepsia with anxiety. Hence the Committee didn't recommend for proposed FDC.
14	**Daclizumab sub-cutaneous Inj.(150 mg)**		The Committee recommended to conduct clinical trial in India as part of global clinical trial.
15	**Xprenor**		The Committee recommended to conduct clinical trial in India as part of global clinical trial.

16	**Tenecteplase (TNK-TPA)**		The Committee recommended to conduct clinical trial at reputed government Institutes having active stroke program with dedicated staff in neurology section preferably AIIMS, JIPMER, NIMHANS

9. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 26.11.2013:-

The Committee while evaluating the following proposals, the Committee kept in view three following aspects

1. Risk versus benefit to the patients
2. Innovation viz a viz existing therapies
3. Unmet need in Indian population.

The NDAC (Neurology & Psychiatry) deliberated the proposals on 26.11.2013 and recommended the following:-

Agenda no.	Drug name		Recommendations
1.	**Kallikrein Injection**		The firm presented the clinical trial data generated on 94 Indian subjects i.e. 48 in Kallikrein group and 46 in placebo group. The committee after detailed deliberation considered that number of sample size is not enough for approval of drug in the country. The committee recommended that firm should conduct study with adequate number of subjects and secondary objective of safety assessment including monitoring of BP 48Hrs post infusion of the drug and CT scan after drug administration. Accordingly clinical trial protocol etc. should be submitted to DCGI for taking further necessary action. Further the clinical trial should be conducted in multispecialty hospitals/medical colleges having emergency facilities and their own institutional ethics committee registered with CDSCO. The sites should be geographically distributed across the country and 50% of which should be from Govt. hospitals/Medical colleges.
2.	**Droxidopa 100mg/200 mg**		Droxidopa is a prodrug which has a structure similar to nonadrelanine but with a carboxyl group.

	Capsule		The proposed drug is approved in Japan. The firm proposed to conduct phase-III clinical trial with Droxidopa vs Midrodrine. After detailed deliberation, the committee recommended to conduct comparative clinical trial with Fludrocortisone and protocol should be modified as under • Upper age limit of the study subject to be enrolled should be increased up to 80 years. • Visit of subjects should be every 15 days. • Number of the centre should increased Accordingly, protocol etc. should be submitted to the committee for further review.
3.	**Dimethyl Fumarate**		The firm presented the safety and efficacy data including the results of two global clinical trials Viz. Study No. 109MS301 & Study No. 109MS302 in which India was also participating country. The no. of Indian patients enrolled in these two studied were 114 and 107 respectively. The safety and efficacy profile of the drug in Indian patients were consistent with the global data. The drug is reported to be approved in the year 2013 in U.S., Canada, and Australia. The committee after deliberation recommended for the import and marketing of the drug in the country subjected to the condition that Phase-IV study is required to conducted after protocol etc. duly approved by the committee.
4.	**Pregabalin 25mg Injection**		Pregabalin capsules 25mg/50mg/75 mg/150mg/200mg/300 mg, Pregabalin SR tablets 75/150/300 mg for Neuropathic pain and for management of fibromyalgia

			syndrome. Pregabalin injection IM/IV 25mg/ml is not approved internationally. Firm proposed phase-II clinical trial of proposed formulation. The committee opined that as there is no clinical trial data of Pregabalin administered IM/IV route. Hence, a comparative Pka data of Pregabalin IM/IV vs Pregabalin Oral formulation is required to be generate by firm on healthy subjects for considering the phase II clinical trial proposal. Further, the firm should also provide safety data for Pregabalin IM/IV administration.
5.	**Olanzapine Orally Dissolving Strips 2.5mg/5mg/7.5mg/10 mg**		Olanzapine oral films are approved in European Countries viz. Germany. It will be indicated for treatment of schizophrenia. Olanzapine as such is approved in India for the proposed indication. The committee has recommended for conduct of BE studies of the proposed film formulation with the similar formulation of Olanzapine Orally Dissolving Strips approved internationally.
6.	**Lorazepam Mouth Dissolving Tablets 2mg**		Lorazepam Mouth Dissolving Tablets are not approved internationally .The firm proposed Lorazepam Mouth dissolving tablet, firm has also proposed for BE study of proposed formulation. After deliberation committee recommoned following: 1) Name of formulation should be mentioned as Lorazepam orally disintegrating tablet. 2) Grant of BE study as proposed by the firm. 3) The report should be submitted to the

			committee for further review.
7.	**Topiramate Modified Release Tablets 50mg/100mg.**		Topiramate 25/50/100/200/300/400mg tablets for treatment of partial and generalised tonic-clonic seizures. Topiramate ER tablets 25/50/100/200/300/400 mg is approved & available in USA. The firm has proposed a BE study of the proposed formulation. After deliberation the committee recommended for grant of BE study of the Topiramate Modified Release tablet and the report should be submitted to the committee for further review.
8.	**Iloperidone tablets 1mg/ 2mg/ 4mg/ 6mg (Starter Kit)**		The committee after deliberation opined that need of the proposed drug will be differ from patients to patient from time to time and even in individual patient, the dose escalation shall not be same for one patient in comparison to other patients. Hence, the committee has not recommended for grant of the starter pack of the formulation.
9.	**Starter kit of Lamotrigine Dispersible tablets (25mg & 50 mg)**		The committee after deliberation opined that need of the proposed drug will be differ from patients to patient from time to time and even in individual patient, the dose escalation shall not be same for one patient in comparison to other patients. Hence, the committee has not recommended for grant of the starter pack of the formulation.
10.	**Risperidone Long acting injection (25**		The firm proposed the BE study of Risperidone Long Acting Injection (25 mg/vial). After deliberation the committee recommended for grant of BE study of proposd product with the conditions that the BE study should be conducted in Govt.

	mg/vial)-		Hospital or Medical college/ multi-speciality hospital having Institutional EC 50% of sites shall be Govt. hospital/medical college and 50% multi-speacialty hospital having emergency facilities. Further committee also opined that firm should submit an undertaking letter stating that the proposed drug is applied for the domestic market.

10. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 25.02.2014:-

The 10th NDAC meeting (Neurology and Psychiatry) deliberated the proposals on 25.02.2014 and recommended the following:-

Agenda no.	Drug Name		Recommendations
1	**Albendazole**		The Committee recommended for the conduct of the proposed study, subject to the condition that the subjects having age ≥ 2 years should be included.
2	**Rasagiline Mesylate**		The firm presented the safety data of Rasagiline in Indian subjects and worldwide marketing authorization status. The committee noted that 13947 patients have so far been exposed to the drug in India. After deliberation the Committee recommended for continued marketing of the drug in the country.
3	**Rotigotine Transdermal patch**		After detailed deliberation the committee recommended to conduct of BE study in Indian subjects comparing the New Formulation (storage at room temperature) Vs the old formulation (Cold storage). Accordingly firm is required to submit BE protocol and other documents of the O/o DCG(I).
4	**Zotepine**		The firm presented the safety data of Zotepine in Indian subjects and worldwide marketing authorization status. The committee noted that Zotepine was first launched in japan in 1982 and in other countries such as UK, South Korea, Germany Austria. 3535 patients have so far been exposed to the drug in India. However the current regulatory status of the drug in UK and other countries is not available. Further the safety data published in Indian subjects (Indian Psychiatry Journal 2010) were not presented. After deliberation the Committee recommended current regulatory status of Zotepine in other countries and full safety profile of the drug in Indian population required to be submitted for further review of the

			committee.
5	**Lacosamide Injection 10mg/ml**		The NDAC recommended for submission of revised protocol of phase IV including details of the inclusion and exclusion criteria, base line laboratory parameters etc. for further review by the committee.
6	**Tizanidine**		The Committee opined that the proposed study should be considered as pilot study and recommended for the conduct of the study. The committee also noted that the study is to be conducted under the supervision of a Pediatrician. Hence there is no need of opinion from any pediatrician.
7	**Dalfampridine**		The committee was informed that the proposal of other firm for waiver of local clinical trial in Indian patients was deliberated earlier in NDAC meeting held on 27.04.2012, and noted that drug has narrow therapeutic index and the drug is to be used as the long term therapy. The committee did not agree to the request for the local clinical trial waiver with the drug in India in 2012. Now M/S Sun Pharma has requested for waiver of local clinical trial in Indian patients. Firm made presentation before the committee The Committee after detailed deliberation recommended that clinical trial in Indian patients is required to be conducted .Accordingly clinical trial protocol etc should be submitted to committee
8	**Kalikrein injection**		The committee was informed that earlier the proposal was deliberated by NDAC (Neurology and Psychiatry) in its meeting held on 26.11.2013, and the Committee recommended that firm should conduct study with adequate number of subjects and secondary objective of safety assessment including monitoring of BP48 hrs post infusion of the drug and CT

			scan after drug administration. Now the firm has represented it's case for reconsideration. The committee deliberated the issue in detail. The committed again noted that the result of 90 days change in NIHSS scale score, Barthel Index, MR Score and mortality at 90 days does not show statistically significant change compared to placebo. The committee recommended that available data does not convincingly prove therapeutic efficacy. Hence the firm should conduct phase III study in larger number of subjects as recommended earlier.
9	**Pregabalin**		The applicant firm requests for permission for phase III (randomized, double blind, placebo controlled, parallel group) clinical trial to assess the efficacy and safety of Pregabalin as adjunctive therapy in paediatric and adult subjects with primary generalized tonic clonic seizures. The internationally approved indication of the drug includes epilepsy (as adjunct therapy in adults with or without generalizations of partial onset seizures), neuropathic pain (Diabatic peripheral / Post – Herpatic/ spinal cord injury), Fibromyalgia and Generalized anxiety disorder. However Pregabalin is approved in India for neuropathic pain and fibromyalgia. The study comprises of three arms (placebo, Pregabalin 5mg/kg/day and 10 mg/kg/day) in the cohort of 4 age groups (1-23mo, 2-6, 7-11 and 12-16 years). This study is consists of an 8 weeks baseline phase, a 12 weeks double blind assessment phase and a 1 week double blind taper phase. In India 45 patients shall be enrolled out of the global target of 168. This study is planned to be conducted in 17 countries i.e. USA, Austria, Bulgaria, Belgium, Czech Republic, France, Hungary,

			Italy, Netherland, Poland, Slovak Republic, Spain, UK, China, India, Russian Federation & Turkey. **The NDAC recommends for approval of the trial protocol.**
10	**E2007**		Proposal withdrawn by the firm
11	**E2007 (Perampanel)**		The applicant firm requests for permission for phase III (double blind, placebo controlled, parallel group, open label extension phase) clinical trial to evaluate the efficacy and safety of adjunctive Perampanel in primary generalized tonic-clonic seizures. This study was considered by the NDAC meeting held on 11-05-2013 and accordingly M/S PPD was permitted initially for 42 weeks of the said clinical trial. Now the firm want to extend the study by 52 weeks (as per added amendment-2) increasing the treatment duration up to 94 weeks or until perampanel is made commercially available for the treatment of PGTC seizures in patients of the age group 12-65 years on a sample size of 13 subjects distributed in 4 sites out of the globally recruited 164 patients in 78 sites. In India currently 10 subjects are ongoing in this trial while 3 subjects have already completed. **The NDAC recommends for the proposed trial protocol**
12	**Asenapine sublingual tablets.**		The firm approval of recruitment of Additional 33 subjects from India for this study. The firm has been already granted approval to enroll 57 subjects (79 screened) from 08 participating sites in India (out of 550 globally). This case was deliberated in NDAC meeting on

			09.08.2012 and the committee recommended for giving permission to conduct the proposed study with the condition that the upper age limit of the subjects should be 65 years of age. **The NDAC recommends for increase in number of patients as proposed by the applicant**
13	**Rivastigmine Transdermal Patch 27mg/15cm^2**		The firm presented the proposal before the committee. The committee opined the product is already approved for mild to moderately severe dementia of the Alzheimer type, now the firm had requested for the treatment of severe dementia of the Alzheimer's type. USFDA had also approved the additional indication recently. Committee opined that the import and marketing of Rivastigmine Transdermal Patch 27mg/15cm^2 for the proposed additional indication. Committee also opined that a phase IV trial shall be conducted and accordingly protocol and other documents shall be placed before the committee within six months of the approval.
14	**Methylcobalamin 1500 mcg**		The firm had presented BE protocol before the committee and the committee had recommended for the BE study with the condition that the study should be conducted on 16+2 subjects including Male and Female as the drug is safe. It was observed that the firm has yet to submit the BE protocol to DCG(I) office. Firm may be advised to submit the revised protocol to DCG(I) office for review and approval for the BE study.
15	**Cerebrolysin for injection**		The firm presented the proposal before the committee and stated that crebrolysin hydrolysate is same as that of crebroprotien hydrolysate It was observed that O/o DCG(I) had already approved crebroprotien hydrolysate injection 1050mg/5ml and 2100 mg/10ml. Further the dose of 1050mg/5ml is equivalent to 215.2mg/ml. The committee also opined that dose of 215.2mg/ml is required for

			the purpose of titration depending on the bodyweight of the patients. Therefore the application of crebroprotien hydrolysate injection 215.2mg/ml may be considered for import and marketing for the already approved indication i.e “For amelioration of cranial injury, cerebrovascular pathological sequelae and aprosexia in dementia”.
16	**Intramuscular Risperidone Long Acting Injection (25 mg/vial)**		Proposal withdrawn by the firm
17	**Perampenel**		The proposal is for Protocol No. E2007-G000-307 (amendment –F).The proposal for closure of the study is approved by the NDAC. The proposal for provision of continued supply of study drug to the patient will be according to the discretion and responsibility of the treating physician.

11. RECOMMENDATIONS OF THE NDAC (NEUROLOGY AND PSYCHIATRY) HELD ON 29.05.2014:-

The Committee while evaluating the following proposals, the Committee kept in view three following aspects

1. Risk versus benefit to the patients
2. Innovation viz a viz existing therapies
3. Unmet need in Indian population.

The NDAC (Neurology & Psychiatry) deliberated the proposals on 29.05.2014 and recommended the following:-

Agenda no.	Drug name		Recommendations
1.	**Tranexamic Acid**		The applicant did not turn up for the presentation. However the protocol submitted by the firm was evaluated by the committee and the committee recommended for conducting the trail subject to the compliance of following conditions : 1. There is no mention about what standard care will be provided to the treatment and the control arms. standard care shall be clearly defined and shall be provided to all the patients in both the arms 2. The lower age limit of the pediatric population shall be defined. The committee also opined that the trial shall be initially conducted on Adults which may be followed by study in Pediatric population if found safe and efficacious. The proposal may be modified accordingly and resubmitted and based on above, DCG(I) office can issue approval for conducting the trial.

2	**Guanfacine HCL**		The Committee noted that the drug is not approved for use in the country for the proposed indication. The firm has applied for the conduct of Phase III study in adolescents and children in India. The drug was approved by US FDA in 2009 for the proposed indication. After detailed deliberation, the committee recommended that the firm initially should conduct Bio-Equivalence study in statistically significant number of subjects and submit report for its consideration. Further, the Committee recommended the following: 1. The design of the study should be revised to Double Blind. 2. Treatment Naïve patients should be enrolled in the study to avoid washout period. 3. The principal Investigator of the study should be experienced in the practice of pediatric psychiatry. 4. The clinical trial centers should be multi-specialty hospitals/institutions having emergency medical care facilities, Institutional ethics Committee registered with CDSCO and the centers should be geographically distributed across the country. 5. The institutional ethics committee should co-opt experts knowledgeable about pediatrics and psychological issue.
3.	**Pregabalin(protocol no:A0081041)**		NDAC recommends the conduct of the proposed clinical trial with Pregabalin in the age group 4-16 years, based on the data presented on the Pregabalin studies in adults so far subject to the condition that the Investigator of the study should be experienced in the practice of paediatric neurology. The institutional ethics committee should co-opt experts knowledgeable about paediatrics and neurological issues.
			The applicant applied for the grant of permission to conduct a clinical trial entitled

4.	**Escitalopram and bupropion XL with anti-manic medications.**		"Mood stabilizer plus anti-depressant versus mood stabilizer plus placebo in the maintenance treatment of bipolar disorder." The committee after detailed deliberation recommended for the conduct of proposed trial.
5.	**DAC HYP(Daclizumab high Yield Processed)**		The NDAC after detailed deliberation recommended for conduct of study with the proposed protocol amendment.
6.	**Pregabalin(protocol no A0081106)**		The firm has now presented extension study proposal for protocol no A0081041, A0081042, A0081105. However since protocol no A0081042, was never submitted to CDSCO, approval for its extension does not arise. Also the study with protocol no's A0081041 and A0081105 are yet to be initiated, hence the permission for this open label study is subject to the condition that the data generated from these two protocols are presented to CDSCO for further deliberation by the NDAC. Also the revised protocol has to be submitted with the altered title excluding the clause: paediatric subjects 1 month to 16 yrs. of age with partial onset seizures.
7.	**Beta -1b (Betaferon)**		The firm has presented the proposal for seeking additional indication for "Clinically Isolated Syndrome (CIS)- a single clinical event suggestive of multiple sclerosis (MS)" for already approved recombinant Interferon Beta -1b (Betaferon) with local clinical trial waiver. Since the drug is already approved for

			RRMS in India and since Betainterferon-1b is already approved for CIS by FDA, EMEA and other agencies, the Committee after detailed deliberation recommended for the proposed additional indication as proposed.
8.	**Natalizumab**		Committee after discussion recommended for marketing approval of subject drug with extension of the already approved indication i.e. Adult Patients aged 18 years and over with high disease activity despite treatment with a beta interferon or **Glatiramer acetate.**
9.	**Naltrexone tablet implant 765 mg**		Firm presented the proposal in detail. The committee opined that firm shall conduct a BA/BE trial as well as a well designed clinical trial in significant number of patients before considering for marketing approval. Firm shall submit the protocols for the review by the committee.
10.	**Clonazepam orally disintegrating strips0.5 mg/1mg/2mg**		Committee recommended for conducting the proposed BE Study and marketing approval can be granted by office of DCGI based on the results of BE Study. However whether the reference product i.e Clonazepam ODT to be used in the trial as proposed by the firm is approved by DCG(I) shall be checked and in case not approved , the Reference product may be replaced by conventional tablet of Clonazepam
11.	**Olanazapine pamoate PR Powder for Suspension for IM Injection**		The firm presented the results of pK study as well as clinical trial conducted by the firm. The results were found satisfactory and the committee recommended for manufacturing and marketing approval.
12.	**Amitriptyline+Ketamin**		The proposal was deferred as the firm did

	e+Lidocaine		not turn up for presentation.
13	**Aripiprazole+Escitalopram**		The committee opined that proposed FDC may be beneficial to the patients. Committee recommended for the proposed BE study first subject to the condition that the safety profile in healthy volunteers with 10 mg strength of Aripiprazole shall be submitted to CDSCO, otherwise the committee recommends conducting BE study with the lower strength based on which proposed clinical trial may be approved. Further, the reports of the trial shall be placed before the committee for review. Details of the investigators/sites along with their undertakings shall be submitted to the office of DCGI for consideration. The sites shall be distributed geographically across the country.