

## 1. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 24.03.2012:-

The NDAC (Ophthalmology) deliberated the proposals on 24.03.2012 and recommended the following:-

AGENDA NO.	NAME OF DRUG		RECOMMENDATIONS
<b>New Drug</b>			
1	<b>Alcaftadine 0.25% solution</b>		<p>Although the drug is approved in USA, however, the allergic conditions in India are different to that of Europe or USA. There is no clinical experience of the drug in India. Moreover, there is no unmet need for the drug in India. Further, itching associated with allergic conjunctivitis is more prevalent in children than in adults.</p> <p>Committee recommended that clinical trial should be conducted in adolescents and then in pediatric population in India. Report of such trial should be submitted to the office of DCG (I) which will be evaluated by the committee for further consideration.</p>
<b>Fixed dose Combination</b>			
2	<b>Brimonidine Tartrate 0.2 % + Dorzolamide Hydrochloride 2.0% + Timolol 0.5%</b>		<p>FDC of both drugs are not available anywhere in the world. Dorzolamide &amp; Brimonidine are known to have more side effects. Further the approved dose regimen of individual drugs does not match with the proposed FDC.</p> <p>In view of above, the committee considered the FDC as irrational and did not recommend for marketing approval in the country.</p>
3	<b>Gatifloxacin 0.3% + Nepafenac 0.1%</b>		<p>Committee deliberated the proposal and opined that the role of topical antibiotics is not only in the post operative period but as a standard of care; topical antibiotics are used for 2-3 days preoperatively to minimize/eliminate the bacterial flora from the conjunctival sac. Use of Nepafenac for 2-3 days before surgery has no known benefits but may have unknown adverse effects. Moreover, there is no data on the bioavailability of two drugs when used as</p>

			FDC. The committee opined that the proposed FDC is not rational and cannot be approved for marketing in the country.
4	<b>Besifloxacin 0.6% + Difluprednate 0.05%</b>		<p>The firm proposed the FDC with indication as treatment of steroid responsive inflammatory ocular conditions for which a corticosteroid is indicated and where bacterial infection or a risk of bacterial ocular infections exists whose incidence is very rare.</p> <p>The Committed stated that rate of infection are very low in Refractive laser surgery or post operative patients. The FDC increase the chances of unwarranted use of Dilluprednate. Therefore, the committee opined that the FDC is irrational and cannot be recommended for approval</p>
<b>Global Clinical Trial</b>			
5	<b>CF 101</b>		<p>Committee in principle agreed for approval of the study subject to the following conditions:-</p> <p>i) Proof of concept study report in larger animals (eg. monkeys) demonstrating efficacy (lowering of intraocular pressure) should be submitted to the office of DCG(I).</p> <p>ii) Physical examination and ECG should be conducted at every patient visit.</p> <p>iii) 50% of the sites should be multispecialty hospitals.</p> <p>iv) Co-investigator should be MD in medicine.</p>
6	<b>Moxifloxacin Punctum</b>		<p>Committee deliberated the proposal and opined that use of placebo in patients with acute bacterial conjunctivitis is unethical. Committee recommended the following:-</p> <p>i) The study drug should be compared with conventional standard treatment instead of placebo.</p> <p>ii) 50% of the sites should be multispecialty hospitals.</p> <p>iii) The study should be conducted only</p>

			<p>on adult subjects.</p> <ul style="list-style-type: none"> <li>i) The study should be conducted in at least two countries.</li> <li>ii) the local ethics committees should approve the proposal of every investigator</li> </ul> <p>Revised protocol including the above points should be submitted to the office of DCG (I) for further consideration.</p>
7	<b>FST 100</b>		<p>Committee deliberated the proposal and opined that five days vehicle arm in patients with acute adenoviral conjunctivitis is justified. Committee recommended for approval of the study subject to the following conditions:-</p> <ul style="list-style-type: none"> <li>i) 50% of the sites should be multispecialty hospitals.</li> <li>ii) Photo documentation of the corneal involvement of subjects should be maintained.</li> </ul>
8	<b>Travoprost 0.003% Ophthalmic Solution</b>		<p>Firm has withdrawn their proposal as per the directions of the Sponsor. The firm was advised to give in writing the reason for withdrawal of the trial.</p> <p>Committee recommended for closure of the case.</p>
9	<b>Brinzolamide 1% &amp; Brimonidine 0.2% Ophthalmic suspension</b>		<p>Committee recommended for approval of the study with the condition that the local ethics committees should approve the proposal of every investigator and 50% of the sites should be multispecialty hospitals.</p>

## 2. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 24.08.2012:-

The NDAC (Ophthalmology) deliberated the proposals on 24.08.2012 and recommended the following:-

AGENDA NO.	NAME OF DRUG		RECOMMENDATIONS
1	<b>Tranilast Eye Drop 0.5% w/v</b>		Committee opined that the data submitted by the firm is not adequate and the firm should carry out a statistically powered clinical trial in sites geographically distributed across the country preferably medical colleges including Govt institutions. Accordingly, firm should submit protocol etc. which should be submitted to DCGI for his approval. Clinical trial data so generated should be placed before the committee for further consideration.
2	<b>Moxifloxacin HCl Ophthalmic Solution 0.5%w/v</b>		Committee recommended that the firm should submit details of the formulation whether it is injectable or topical along with names of countries where the product is used as a drug along with copy of package insert etc.
3	<b>Propylene glycol Lubricant Eye drops</b>		Committee opined that as the drug is already approved by EMEA and the firm has already conducted clinical study on 50 patients in India as a part of global clinical trial, therefore recommended for manufacturing and marketing of the drug with change of composition.
4	<b>Propylene glycol Lubricant Eye drops</b>		Committee discussed the safety, efficacy and essentiality of the drug and recommended that the firm should carry out a Phase III multicentric study on 200 Indian patients with minimum 3 months duration of treatment in sites geographically distributed across the country preferably medical colleges including Govt institutions. Accordingly, firm should submit protocol etc. which should be submitted to DCGI for his approval. Clinical trial data so generated should be placed before the committee for further consideration.

5	<b>Dexamethasone Intravitreal Implant</b>		Based on the data presented, committee recommended for the additional indication- treatment of non-infectious uveitis affecting the posterior segment of the eye. However it should not be used when there is gap in posterior capsule.
6	<b>Bimatoprost +Brimonidine Tartrate + Timolol Ophthalmic Solution</b>		Committee opined that the proposed combination is not approved anywhere in the world and no published study is available. Moreover Bimatoprost is given once a day whereas the firm has proposed to give it twice a day. Further dose compatibility is a problem with the FDC. Therefore committee did not recommend the FDC.
7	<b>Besifloxacin + LoteprednolEtab onate Suspension</b>		Committee opined that the proposed combination is not approved anywhere in the world and there are chances of misuse of the FDC. Moreover Besifloxacin will provide emergence of drug resistance. Therefore committee did not recommend the FDC.
8	<b>Sodium Hyaluronate +Polyethylene Glycol + Essential Electrolytes + Vitamins B12 ophthalmic solution.</b>		Committee recommended that proper justification for adding Vitamin B12 in the FDC along with supportive literature should be submitted for examination by the committee.
9	<b>Latanoprost + Timolol ophthalmic solution.</b>		The trial is already ongoing with the drug. When completed, the clinical trial report should be submitted to the committee for evaluation. As regards to the additional 3 centers, committee recommended that than only the center at PGIMER, Chandigarh should be permitted.
10	<b>Brinzolamide + Timolol Eye drops</b>		The combination of dorzolamide and timolol is already approved and available in the country. The committee recommended that the firm should carry out a Phase III multicentric study on 200 Indian patients with minimum 3 months duration of treatment in sites geographically distributed across the country preferably medical colleges

			<p>including Govt institutions. Accordingly, firm should submit protocol etc. which should be submitted to DCGI for his approval. Clinical trial data so generated should be placed before the committee for further consideration.</p>
11	<b>Tobramycin/Dexamethasone</b>		<p>The proposed combination of Tobramycin and Dexamethasone is already approved and marketed in the country. As per the protocol, the ophthalmic suspension will be administered before the cataract surgery. However administration of steroid before surgery or normal cataract is unethical as it may cause endophthalmitis. Therefore committee recommended approval of the study subject to the following conditions:-</p> <ul style="list-style-type: none"> <li>i) Only subjects with uveitis should be included in the study.</li> <li>ii) Subjects aged 18 to 65 years should be included in the study.</li> </ul> <p>Accordingly revised protocol should be submitted to DCGI for further evaluation.</p>
12	<b>AR-12286</b>		<p>The firm has proposed to enroll 120 subjects from India in the study.</p> <p>Committee recommended for giving permission to conduct the study subject to the following conditions:-</p> <ul style="list-style-type: none"> <li>i) The firm should not enroll more than 60 subjects from India out of the proposed 120 subjects and the remaining 50% of subjects should be enrolled in some other country/countries.</li> <li>ii) Subjects aged 18 to 65 years should be included in the study.</li> </ul>
13	<b>AR-12286</b>		<p>The firm has proposed to enroll 194 subjects from India in the study.</p> <p>Committee recommended for giving permission to conduct the study subject to the following conditions:-</p> <ul style="list-style-type: none"> <li>i) The firm should not enroll more than 97 subjects from India out of the proposed 195 subjects and the remaining 50% of subjects should be enrolled in some other country/countries.</li> </ul>

			ii) Subjects aged 18 to 65 years should be included in the study.
14	<b>Brinzolamide Ophthalmic Solution</b>		Brinzolamide Ophthalmic Solution is already approved and available in the country. The firm has proposed for a therapeutic equivalence study for generation of data for submission to foreign regulatory authority. The proposed study is not required by the Indian Regulatory authority. Therefore committee did not recommend for giving permission to conduct the study.
15	<b>NVC-422</b>		Committee recommended for giving permission to conduct the study subject to the following conditions:- i)Subjects aged 18 to 65 years should be included in the study. ii) 50% of the sites should be in Govt medical colleges/hospitals.
16	<b>DE 109</b>		The proposed amendment is already approved by US FDA and countries of European Union. Committee recommended for giving permission to the proposed amendment.

### 3. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 27.04.2013

The NDAC (Ophthalmology) deliberated the proposals on 27.04.2013 and recommended the following:-

AGENDA NO.	NAME OF DRUG		RECOMMENDATIONS
1	<b>Bepotastin Besilate</b>		<p>Committee recommended for giving permission to the proposed clinical trial subject to the following conditions:-</p> <ul style="list-style-type: none"><li>i) Subjects with dry eyes should be excluded from the study.</li><li>ii) Subjects with schirmer &lt; 10 should be excluded from the study</li><li>iii) ECG, IOP and schirmer should be done before enrollment as well as post treatment</li><li>iv) The sites should be multispeciality hospitals/medical colleges or well established eye Institutes, with at least 50% Govt. sites and the sites should be geographically distributed at north, south, east and west across the country. Since conjunctivitis is more common in children, subjects aged 10 years and above should also be included in the study.</li></ul>
2	<b>Bibrocathol</b>		<p>The drug was approved in Germany in 1967. The firm has applied for grant of permission to import and market the finished formulation of Bibrocathol 2% eye ointment, based on data generated abroad. The firm has not proposed for local clinical trial in India. Committee opined that the safety and efficacy data submitted is not adequate to approve the drug in India without any local clinical trial. Therefore the committee did not recommend for approval of the drug</p>

			based on the data submitted.
3	<b>Vitamin A eye Ointment (VitA-POS)</b>		The product is available in countries like UK, Germany, Finland, Sweden etc. as medical device. No clinical trial data generated with the product has been submitted by the firm. The firm has not proposed for local clinical trial in India. Committee opined that the safety and efficacy data submitted is not adequate to approve the drug in India without any local clinical trial. Therefore the committee did not recommend for approval of the product.
4	<b>(Pt-Piramal) Carboxymethylcellulose Eye Drops 0.5%</b>		Carboxymethyl cellulose 0.5% w/v eye drops (multi dose with preservatives) is already approved for marketing in the country. Firm has now proposed to market the Carboxymethyl cellulose sodium lubricant eye drops 0.5% in a unit dose pack without preservative.  Committee recommended for grant of marketing approval for Carboxymethyl cellulose sodium lubricant eye drops 0.5% w/v unit dose pack without preservative.
5	<b>Tacrolimus Suspension 0.1%w/v</b>		Committee opined that the clinical data generated is not adequate for approval of the product. Therefore the committee recommended for conducting the same study in 200 more subjects at sites which should be multispeciality hospitals/medical colleges or well established eye Institutes with at least 50% Govt. sites and the sites should be geographically distributed at north, south, east and west across the country.
6	<b>Sod. Hyaluronate Ophthalmic Solution 0.2%</b>		In India, sodium hyaluronate eye drops is already available in 0.1% and 0.18% strengths. It seems there will be any significant superiority of the proposed 0.2% & 0.24% strength of the product

	<b>and 0.24% w/v</b>		over the existing 0.18%. Therefore, the committee recommended that unless superiority of proposed product of 0.2% & 0.24% strength over existing 0.18% strength is established, proposal to market the product cannot be considered.
7	<b>Sodium Hyaluronate 2mg/ml Eye Drops</b>		In India, sodium hyaluronate eye drops is already available in 0.1% and 0.18% strengths. It seems there will be any significant superiority of the proposed 0.2% strength of the product over the existing 0.18%. Therefore, the committee recommended that unless superiority of proposed product of 0.2% strength over existing 0.18% strength is established, proposal to market the product cannot be considered.
8	<b>Sodium Carboxy Methylcellulose 1% Ophthalmic Solution</b>		Firm has withdrawn the proposal.
9	<b>Nepafenac</b>		The committee recommended for the study.
10	<b>(Pt-MSD) Dorzolamide Hydrochloride + Timolol Maleate</b>		The committee recommended for giving permission to import and market in unit dosage form of the drug.
11	<b>(Pt. Alcon) Travoprost + Timolol</b>		Committee opined that the safety assessment of the strength of the new preservative should be submitted for evaluation to the committee before considering the proposal.
12	<b>Tafluprost + Timolol</b>		The firm presented the supporting data along with clinical trial protocol. The committee recommended that the trial should be double blind study. Patients with cataract should be excluded from the

			<p>study. In the study, perimetry and gonioscopy should be done and also fundus photo should be taken. Patients should be followed up at 1,2,3 and 6 weeks. Sites should be multispeciality hospitals/medical colleges or well established eye Institutes with at least 50% Govt. sites and the sites should be geographically distributed at north, south, east and west across the country.</p> <p>Accordingly, revised protocol and details of sites etc. should be submitted to DCGI for approval.</p>
13	<b>Latanoprost 0.005% w/v + Timolol Maleate 0.5% w/v Ophthalmic solution</b>		Based on the study results and since the proposed FDC is BKC free, the committee recommended for manufacturing and marketing of the proposed drug.
14	<b>Tobramycin/Dex omethasone</b>		Committee opined that the firm was not able to justify for the invasive procedure of aspirating the aqueous of the eye. Hence, the committee do not recommended the proposed study.
15	<b>Tobramycin/Dex omethasone</b>		Committee opined that the bilateral aspiration of the aqueous of eye for the estimation of the drug is not acceptable. However, if the firm amends the protocol to aspirate from the single eye, the firm should submit the revised protocol etc. to the committee for examination.
16	<b>Travoprost Ophthalmic Solution</b>		The firm could not produce the safety data with respect to the pediatric population. Also, the result of Phase II trial data was not produced by the firm. Hence, the committee did not recommend the proposed proposal by the firm.
17			The firm has withdrawn the proposal.

	<b>Travoprost Ophthalmic Solution</b>		
<b>18</b>	<b>Fluocinolone Acetonide</b>		Committee recommended for the proposed study subject to the condition that 1-2 government teaching hospitals should be included in the study.
<b>19</b>	<b>NOVA2207</b>		Committee recommended for the approval of the study. However, the study sites should be distributed geographically across the country.
<b>20</b>	<b>Ciprofloxacin + Dexamethosone</b>		Committee recommended for the approval of the proposed study.
<b>21</b>	<b>Ranibizumab</b>		The Committee recommended for giving permission to conduct the study subject to condition that the study will be assessor blind study and the safety assessment of the first dose will be observed on first day of first week before the second dose is given. The firm will also recruit few Govt. hospitals for carrying out the study.
<b>22</b>	<b>Brinzolamide ophthalmic solution Re-examination</b>		The committee recommended for the approval of the proposed proposal. However, the study period may be increased from 4 weeks to 3 months. Further, perimetry should be included in the study. Also, the study sites should be geographically across the country.
<b>23</b>	<b>Bimatoprost 0.01%</b>		The committee recommended for the approval of the proposal.
<b>24</b>	<b>Rebamipide</b>		Committee recommended for approval of the study subject to condition that follow up period should be 6 months instead of 4 months.

#### 4. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 10.10.2013

The NDAC (Ophthalmology) deliberated the proposals on 10.10.2013 and recommended the following:-

Agenda no.	Drug Name		Recommendations
1	<b>Sodium Hyaluronate solution (Pre-filled syringes and vial-12mg)</b>		The firm didn't turn up in the meeting hence the proposal is deferred for the next NDAC meeting.
2	<b>Bromfenac Sodium ophthalmic Solution 0.09% w/v</b>		The formulation Bromfenac Sodium ophthalmic Solution 0.09% w/v (twice daily) already approved in the country. The firm has proposed for change in dosage regimen from twice daily to once daily. The once daily dosage regimen is already approved by USFDA. The committee recommended for giving permission to market the product with the dosage regimen of once daily.
3	<b>Forskolin 0.15% w/v Ophthalmic Solution</b>		The applicant could not present any preclinical data or clinical data in support of Forskolin 0.15% w/v Ophthalmic Solution. The committee opined that firm should generate the non clinical data (ocular toxicity) for the proposed formulation and submit the same along with supportive clinical data to the committee for further evaluation.
4	<b>Polyethylene Glycol+Propylene Glycol (Ophthalmic Gel)</b>		The firm didn't turn up in the meeting hence the proposal is deferred for the NDAC meeting.

5	<b>Moxifloxacin+Nepafenac ( Ophthalmic suspension)</b>		The committee noted that individual ingredients present in the FDC are already approved as eye drops in the same strength as in the FDC. Antibiotic with NSAIDs are used concomitantly in clinical practice. There is a rationality in combining both the ingredients for the proposed indication. However firm did not present any preclinical/clinical data with respect to the said FDC. Firm should initially conduct ocular toxicity study as per Schedule Y of Drugs and Cosmetics Rules and submit the report before considering for clinical trial.
6	<b>Sodium Hyaluronate, Polyethylene Glycol (PEG), Essential Electrolytes And Vitamin B12</b>		The proposed FDC is approved as medical device in EU, UK, Italy etc. However this will fall under the category of drug in India. Committee observed that clinical data in Indian patients is not available. Firm should conduct a Phase 3 clinical trial in Indian patients and accordingly shall submit clinical trial protocol etc for placing before the committee.
7	<b>Lotepredinol</b>		The firm didn't turn up in the meeting hence the proposal is deferred for the NDAC meeting.
8	<b>Cyclosporine</b>		Cyclosporine is an approved drug in India. Committee recommended for giving permission to conduct the study subject to condition that 50% of the sites should be Govt hospitals/medical colleges having Institutional Ethics Committees registered with CDSCO. The firm shall also submit revised ICD and Sponsor's undertaking for compensation as per GSR 53(E).
9			Ranibizumab is already approved in the country. Committee recommended for giving permission to conduct the study in subjects

	<p><b>Ranibizumab/RFB002</b></p> <p><b>Protocol No –</b> <b>CRFB002G2301</b></p>		<p>aged 12 to 80 years and sites should be Govt hospitals/medical colleges having Institutional Ethics Committees registered with CDSCO. Additionally there should be close follow up of the trial participants following intravitreal procedure and preoperative antibiotics should be specified in the protocol. Also information regarding sham treatment (no medication) shall be mentioned clearly in the ICD. The firm shall also submit revised ICD and Sponsor's undertaking for compensation as per GSR 53(E).</p>
10	<p><b>Ranibizumab/RFB002</b></p> <p><b>Protocol No –</b> <b>CRFB002E2302</b></p>		<p>Ranibizumab is already approved in the country. Committee recommended for giving permission to conduct the study in subjects aged 18 to 80 years subject to condition that 50% of the sites should be Govt hospitals/medical colleges having Institutional Ethics Committees registered with CDSCO. Additionally there should be close follow up of the trial participants following intravitreal procedure and preoperative antibiotics should be specified in the protocol. Also information regarding sham treatment (no medication) shall be mentioned clearly in the ICD. The firm shall also submit revised ICD and Sponsor's undertaking for compensation as per GSR 53(E).</p>
11	<p><b>Ranibizumab/RFB002</b></p> <p><b>Protocol No –</b> <b>CRFB002F2302</b></p>		<p>Ranibizumab is already approved in the country. Committee recommended for giving permission to conduct the study in subjects aged 18 to 80 years. Additionally there should be close follow up of the trial participants following intravitreal procedure and preoperative antibiotics should be specified in the protocol. Also information regarding sham treatment (no medication) shall be mentioned clearly in the ICD. The firm shall also submit revised ICD and Sponsor's undertaking for compensation as per GSR 53(E).</p>

12	<b>Ranibizumab</b> <b>Protocol No –</b> <b>CRFB002DIN03</b>		<p>Ranibizumab is already approved in the country. Committee recommended for giving permission to conduct the study subject to condition that 50% of the sites should be Govt hospitals/medical colleges having Institutional Ethics Committees registered with CDSCO.</p> <p>The firm shall also submit revised ICD and Sponsor's undertaking for compensation as per GSR 53(E).</p>
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## 5. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 18.12.2013

The NDAC (Ophthalmology) deliberated the proposals on 18.12.2013 and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1.	<b>Sodium Hyaluronate solution (Pre-filled syringes and vial-12mg)</b>		Firm has not turned up and the matter is deferred to next NDAC meeting.
2.	<b>Brinzolamide 1%w/w</b>		<p>Brinzolamide 1% ophthalmic suspension formulation is approved by this office for the treatment of elevated intraocular pressure in patients with ocular hypertension or open angle glaucoma.</p> <p>Firm proposed Phase-III Clinical trial of Brinzolamide 1% ophthalmic suspension. After deliberation the committee recommended to grant permission for conducting clinical trial with a condition that 50% CT site should be of Govt. Hospital/Medical College and 50% multi-speciality hospitals with emergency facility.</p>
3.	<b>Travoprost + Timolol (FDC)</b>		<p>The proposed FDC is already approved in the same strength with benzalkonium chloride as preservative. Now the firm has proposed same FDC with polyquad as preservative. The travoprost with polyquad eye drop is already approved in the country. The proposed FDC with new preservative i.e., polyquad is also approved in many other countries like UK, Australia, Japan etc., Firm also presented the detailed safety assessment of preservative polyquad before the committee. The committee opined that the proposed FDC may be considered for import and marketing in the country.</p>
4.	<b>Polyethylene Glycol+Propylene</b>		<p>The proposed dosage form is in gel drop form. However, the FDC is approved as an eye drop. The committee opined that a</p>

	<b>Glycol (FDC)</b>		clinical trial is required to be conducted in the Indian patients before considering for import and marketing in the country. Accordingly, firm should submit clinical trial protocol which shall be placed before the committee.
5.	<b>Brimonidine Tartarate Ophthalmic Suspension 0.35% w/v</b>		The committee opined that the firm must submit the multiple dose animal toxicity & showing systemic sides effect in animals data and the same proposal to be represented in next NDAC meeting.
6.	<b>Presentation on drug: NT201 (Global Clinical Trail)</b>		<p>The firm has applied for the grant of permission of phase III clinical trial with NT 201 (Botulinum neurotoxin type A) in Botulinum toxin treatment-naïve subjects with blepharospasm. The study drug is approved in Argentina, Brazil, Canada, Republic of Korea, Mexico, Russia, Uruguay, USA, and 19 EEA countries. Total of 60 patients to be randomized globally and 30 patients from India in Subjects aged <math>\geq 18</math> and <math>\leq 80</math> years. The duration of study participation for the subject is up to 41 weeks consisting of two injection cycles with an observation period of up to 20 weeks each after a screening period of <math>7 \pm 3</math> days.</p> <p>The committee perused the information and presentation made by the applicant and recommended the conduct of the trial .</p>
7.	<b>Fluocinolone acetonide (Global Clinical Trail)</b>		<p>The firm has applied for the grant of permission of phase III clinical trial with Fluocinolone Acetonide Intravitreal Insert for the treatment of subjects with chronic non-infectious Uveitis. The drug is not approved for marketing for the proposed indication. Globally 120 subjects and from India 45 subjects are planned to be enrolled with age group of 18 years and above. The intended duration of treatment is 36 months.</p> <p>The committee perused the data presented and opined that the non-study eye should also receive ocular /topical steroid and that</p>

			the protocol is to be amended accordingly. Further, in the study protocol clause no. 9.10.2 (page 35) regarding the prohibited medication is also to be amended in line with the above recommendation.
8.	<b>Ranibizumab (Biologicas)</b>		The committee perused the information and presentation made by the applicant and recommended to conduct the phase IV trial of already approved indication (The treatment of macular edema following retinal vein occlusion -RVO).

## 6. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 24.02.2014

The 6<sup>th</sup> NDAC (ophthalmology) meeting deliberated the proposals on 24.02.2014 and recommended the following:-

Agenda no.	Drug Name		Recommendations
1.	<b>Bepotastine Ophthalmic (1.5% W/V)</b>		<p>The firm presented the revised Clinical trial protocol as per the recommendation of NDAC meeting held on 27/4/2013</p> <p><b>After deliberation the NDAC recommends for the proposed trial except one PI who is having MBBS degree only at Shaswat Hospital, Pune.</b></p>
2.	<b>Sodium Hyaluronate solution (Pre-filled syringes and vial-12mg)</b>		Firm had not turned up for presentation
3.	<b>Sodium Hyaluronate 2mg/ml</b>		<p>Firm claimed that the proposed strength (2.0%) is superior to 0.18% strength. Duration of action is prolonged due to higher viscosity.</p> <p><b>The committee recommended that Firm has to conduct Phase III clinical trial and accordingly submit the clinical trial protocol and other necessary documents shall be submitted before the committee.</b></p>
4.	<b>Tacrolimus Solution 0.1% w/v</b>		<p>Initially one trial was conducted on 200 patients for two weeks and now proposes for 4-weeks trial on additional 200 patients. This is comparative phase-III trial to compare in parallel groups of the test drug and Cyclosporin formulation in of Vernal Keratoconjunctivits</p> <p><b>The NDAC recommends that the study may be conducted in two phases, first by incorporating the patients of the age group 10</b></p>

			<p>-15 years and submit the interim analysis results and subsequently the study to be done on a total number more than 120 subjects of the age group of 6-10 years. The revised protocol should be submitted to the O/o DCG(I). The interim analysis reports should be submitted to the NDAC for examination and approval of the second phase of study.</p>
5.	<p><b>Brinzolamide Ophthalmic Suspension (1% w/v)</b></p>		<p>The proposal is for prospective, parallel group, double blinded, comparative, randomized, multicentric, study to compare safety &amp; efficacy of Brinzolamide 10mg / ml suspension of the applicant Vs that of M/s Alcon pharma Ltd, USA and placebo in patients of open angle glaucoma or ocular hypertension. Total 45 centers selected, out of which 15 sites are Govt. medical colleges / hospital.</p> <p><b>The NDAC recommends that the placebo group should be removed and the dose shall be administered in both eyes since it is a bilateral disease. The revised protocol should be submitted accordingly.</b></p>
6.	<p><b>Brimonidine Tartrate Ophthalmic Suspension 0.35% (Safety and pk study)</b></p>		<p>The applicant firm proposes to generate PK and safety parameters of the test drug Brimonidine 0.35 % once a day as sustained releases ophthalmic solution Vs. 0.1 % TID. Although the molecule as such is approved in India but the test drug is not approved internationally as well as in India.</p> <p><b>The NDAC recommends that hemodynamic and toxicological parameters need to be generated in at least two species of animals / literature data as per Drugs and Cosmetics Rules. Hence it is not recommended to carry out in healthy subjects.</b></p>

7.	<b>Fluocinolone Acetonide Intravitreal (FAI) insert of Polyamide</b>		<p>The applicant firm (a CRO) requests for permission for Phase-III trial with <b>Fluocinolone acetonide intravitreal (FAI) insert</b> which is sterilized by gamma radiation in subjects with <b>chronic non-infectious uveitis affecting the posterior segment of the eye</b> as per protocol No. 001 which is a supplement to protocol No. 005 with same design and the same was already approved by DCG(I). The drug is releasing at the rate of 0.1-0.2 mcg /day from the cylindrical insert of polyamide. The insert never dissolves but remain inside the vitreous. In India 45 out of globally proposed 120 subjects to be enrolled. The proposed study is planned to be conducted in 6 countries: United States of America, United Kingdom, Germany, Hungary, Israel and India. Trial drug is not approved yet for the proposed indication. Duration of treatment is 36 months.</p> <p><b>After deliberation by the firm's representative, the NDAC recommends that the proposed trial may be granted permission subject to the condition that the protocol should include systemic corticosteroid therapy as a part of standard of care in case of untreated eye.</b></p>
8.	<b>NT 201 (Clostridium Botulinum Neurotoxin Type-A)</b>		<p>The firm requests for the permission for Phase-III (randomized, placebo controlled, parallel group) trial for evaluation of efficacy and safety of two different doses of <b>NT 201 (Clostridium Botulinum Neurotoxin Type-A)</b> in Botulinum toxin treatment-naïve subjects with <b>benign essential blepharospasm</b>. All three arms will get the active medication. Out of the globally proposed 60 patients, 30 patients shall be recruited from India. NT 201 is approved in many countries including USA, Canada &amp; Brazil not in India. The duration of study participation for the subjects is up-to 41weeks consisting of two injection cycles with an observation period of up-to 20 weeks each after a screening period of 7±3 days.</p> <p><b>The NDAC recommends for exclusion of</b></p>

			<b>the patients having any organic disease to be confirmed by CT or MRI and Fundascopy and accordingly the revised trial protocol should be submitted to O/o DCG(I)</b>
9.	<b>Ranibizumab</b>  <b>(Trade name- Lucentis)</b>		<p>The applicant firm requests for permission to conduct a phase IIIb clinical trial to assess the efficacy and safety of Ranibizumab 0.5mg in treat and extend regimen compared to monthly regimen, in patients with neo-vascular age-related macular degeneration (TREND) . Globally 644 subjects and 100 subjects from India are planned to be enrolled. The study is planned to be conducted in 19 countries which include Italy, Germany, Belgium, Russia, United Kingdom and India. Drug is approved in India. Since AMD cases are found at upper ages range above 60 years the firm requests for increase of the upper age limit i.e 65 years.</p> <p>In this case NDAC recommends conduct of ECG, Lipid profiling and BTCT as additional criteria before enrollment to rule out any disposition of underlying cardiovascular incidence in patients above the age group of 65 years.</p>
10.	<b>Cyclosporine (0.05 %) ophthalmic emulsion</b>		<p>The firm requests for permission to conduct a bioequivalence study to assess efficacy and safety of <b>Cyclosporine (0.05 %) ophthalmic emulsion</b> in moderate to severe dry eye disease- kerato-conjunctivitis Sicca (group-I Test drug, Group-II: Restasis™ group III Refresh plus™/ Placebo) in 18-65 years patients to generate data for domestic &amp; Export purpose.The drug is reported to be preservative free.</p> <p>This proposal was deliberated in NDAC meeting dated 10/10/13 and Committee recommended for giving permission to conduct the study subject to condition that 50% of the sites should be Govt. hospitals/medical colleges having Institutional Ethics Committee registered with CDSCO and the firm shall also submit revised ICD and Sponsor's undertaking for compensation as per GSR 53 (E ). Drug is approved &amp; marketed in India since 2003. The</p>

			<p>proposed study is planned to be conducted only in India.</p> <p><b>The NDAC recommends the proposed trial as such.</b></p>
11.	<b>HealonR Endocoat 3%</b>		<p>In India the “Viscoat” Brand of Sodium hyaluronate (30 mg/ml) + Chondroitin sulphate (40 mg/ml) is available from M/s Alcon (USA) while the present brand “Healon” of M/s Abbott (USA) contains only Sodium Hyaluroante (30 mg/ml). Both brands are reported to be approved almost 10 years back in different cannula size (27 gauze) internationally. The present product in 25 gauze was approved in Canada and USA during 2011 and 2012 respectively and now proposes for approval in Indian market</p> <p>The NDAC recommends for conduct of a clinical trial in Indian subjects and accordingly the revised protocol should be submitted to the O/o DCG(I).</p>
12.	<b>Visthesia 1.0% and Visthesia 1.5%</b>		<p>The committee recommended that Phase III clinical trial is required to be conducted in indian patients. The Firm asked to submit the Phase III protocol to the DCGI for the further consideration by the committee.</p>
13.	<b>Ranibizumab (Lucentis) solution for injection 10mg/ml</b>		<p>The present application is forwarded by M/r Nova Healthcare Private Ltd. Mumbai, India regarding granting of permission to Manufacture and Market indigenously developed Ranibizumab solution injection 10mg/ml (brand name –Lucentis) additional indication i.e. treatment of vis impairment due to choroidal neovascularisation (CNV) secondary to pathologic myopia (PM).</p> <p><b>The NDAC recommends that the study may be permitted as such.</b></p>

14.	<b>Ranibizumab intravitreal injections (IVI)</b>		<b>The NDAC recommends approval of the proposed Phase-IV study in continuation to the comments of the earlier NDAC.</b>
15.	<b>Miscellaneous</b>		Earlier recommendations made by NDAC (Ophthalmology) committee held on 18.12.13 in respect of various proposals was circulated as the quorum was not met during the last meeting. The committee discussed the recommendations in details and approved the recommendations made by earlier members of the committee for further action by the office of DCGI.

## 7. RECOMMENDATIONS OF THE NDAC (OPHTHALMOLOGY) HELD ON 17.06.2014

The 7<sup>th</sup> NDAC meeting (Ophthalmology) deliberated the proposals on 17-06-2014 (Tuesday) and recommended the following:-

AGENDA NO.	DRUG NAME		RECOMMENDATIONS
1	<b>Alcaftadine Ophthalmic solution 0.25%</b>		<p>The Committee was informed that the Committee in its earlier meeting recommended the following The Committee noted that although the drug is approved in USA, however, the allergic conditions in India are different to that of Europe or USA. There is no clinical experience of the drug in India. Moreover, there is no unmet need for the drug in India. Further, itching associated with allergic conjunctivitis is more prevalent in children than in adults. The Committee recommended that clinical trial should be conducted in adolescents and then in pediatric population in India.</p> <p>The firm has presented the revised clinical trial protocol etc. for conducting clinical trial to study the efficacy, safety and tolerability of Alcaftadine eye drops Vs Azelastine Hydrochloride eye drops. The Committee after detailed deliberation recommends for the grant of approval subject to the following conditions:</p> <p>The comparator should be changed from Azelastine to Olapatadine</p> <p>The design has to be revised from open label to double blind.</p> <p>Inclusion criteria should be revised to enroll patients between 10 to 60 years and in the I stage between 13 to 18 years</p> <p>Patients enrolled should be equally divided in both the stages</p> <p>Chemosis should be included as Secondary outcome.</p>

2	<b>Bepotastine Besilate ophthalmic solution 1.5% w/v</b>		The recommendation of the NDAC made in its meeting held on 24.02.2014 was placed before the pharmacologist. The pharmacologist also agreed to the recommendations of the Committee.
3	<b>Bepotastine Besilate ophthalmic solution 1.5% w/v</b>		The Committee recommended for conducting clinical trial with the condition that duration of the treatment shall be 21 days. The Committee also opined the Investigator shall be minimum MS ophthalmology with few index publications. Accordingly firm shall submit the details of the Investigators to CDSCO for further consideration
4	<b>Brinzolamide ophthalmic suspension 1% eye drops</b>  <b>(protocol No MA- CT-13-001; Date: 04- 04-2014)</b>		The firm presented the revised protocol as per the suggestions of the committee in its meeting held on 24.2.2014. However the committee opined that one more arm shall be included with bid dose as study has shown that bid and tid dose are equivalent in terms of efficiency. The committee recommended that if this additional arm is included, permission may be granted by DCG(I) for conducting clinical trial after submission of revised protocol to office of DCG(I).
5	<b>Brimonidine tartrate 0.1% Ophthalmic solution</b>		The Committee is of the opinion that there will be wastage of drug as unit pack is of 0.5ml which is equivalent to 8 drops and prescribed single use requires 1-2 drops only. Further firm also did not present any benefit of deleting preservative that is Purite from the conventional formulation. Committee also opined that there are chances of reuse of the remaining quantity since the quantity of solution in the proposed unit pack is higher than required. Hence, the Committee did not recommend.
6	<b>Rebamipide Ophthalmic</b>		The firm presented the revised protocol with increased follow up period i.e. from 4 months to

	<b>suspension 2% w/v</b>		6 months. The committee recommended for conducting clinical trial with the following conditions :  <ul style="list-style-type: none"> <li>a. Age of patient for including in the study shall be 18 to 65 years</li> <li>b. Anesthetized schirmer's test score shall be revised as 0 to 9.</li> <li>c. Block nasal duct patients shall be excluded from the study.</li> </ul>
7	<b>Brinzolamide 1% w/v +Brimonidine tartrate 0.2% w/v ophthalmic suspension</b>		The firm presented the detailed protocol. The committee recommended for conducting the clinical trial. The committee noted that presentation made by the firm also mentions "semi-blind review" during the study. The committee recommended for conducting clinical trial with the condition that the firm shall ensure that the study remains double blind study till the end of the study.
8	<b>Brinzolamide 10mg +Timolol 5mg per mL ophthalmic suspension</b>		The firm presented the detailed protocol. The committee recommended for conducting the clinical trial with the condition that under inclusion criteria, patients with history of discontinued carbonic anhydrase inhibitors of 4 months shall be reduced to 2 months.
9	<b>Bimatoprost 0.3mg + Timolol 5mg per mL Single dose eye drops</b>		The Committee is of the opinion that there will be wastage of drug as unit pack is of 0.4ml which is equivalent to 6 drops and prescribed single use requires 1-2 drops only. Further firm also did not present any benefit of deleting preservative from the conventional formulation. Committee also opined that there are chances of reuse of the remaining quantity since the quantity of solution in the proposed unit pack is higher than required. Hence, the Committee did not recommend.
10	<b>QPI-1007, Protocol No: QRK207 (Version 02)</b>		The application is for permission to conduct a Pivotal, Phase II/III with QPI-1007, which is an NCE.  The NDAC members opined that only

			<p>severe cases of NAION should be included in the study i.e. the subjects with visual acuity of finger counting close to face to 6/36, field defects on perimetry, retinal nerve fiber thinning on OCT machine and FFA changes. Before phase III is initiated the phase II trial data from all the centers should be submitted to CDSCO for further review by the experts. The committee opined that all the investigators must have MS Degree or an alternate such as DNB.</p>
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