OFFICE OF THE CENTER DIRECTOR

Consulting the Controlled Substance Staff on Abuse Liability, Drug Dependence, Risk Management, and Drug Scheduling

CONTENTS

PURPOSE

- This MAPP establishes responsibilities and procedures in the Center for Drug Evaluation and Research (CDER) for consulting the Controlled Substance Staff (CSS) regarding the evaluation of abuse liability, drug dependence, risk management, and drug scheduling. This MAPP also provides a general description of the CSS role in drug abuse assessment and drug scheduling in CDER.

BACKGROUND

- CSS provides expertise to FDA centers and CDER offices and divisions in assessing drugs for abuse liability. CSS fulfills this unique role within FDA under the authority of the Controlled Substances Act (CSA) of 1970, which requires the Secretary of the Department of Health and Human Services (DHHS) to notify the Attorney General through the Drug Enforcement Administration (DEA) if a "new-drug application is submitted for any drug having a stimulant, depressant, or hallucinogenic effect on the central nervous system," because it would then appear that the drug had abuse potential (21 U.S.C. 811(f)). DHHS has delegated this function to FDA and CDER, and the CSS performs this role for the Agency.

  CSS assesses preclinical, clinical, and epidemiological data to determine whether a drug under review requires abuse liability studies, scheduling under the CSA, or a risk management program (RMP) directed to reducing abuse, overdose, or diversion.

  In addition, international drug control treaties to which the United States is a signatory may affect the regulation of new drugs with abuse liability. CSS also assesses this aspect and notifies the appropriate government agencies.

REFERENCES

- Controlled Substances Act (CSA) of 1970, as amended
- 21 Code of Federal Regulations (CFR) parts 5.10, 200, 312, 314, and 1300
- February 16, 2000 memorandum from Janet Woodcock, M.D., outlining CSS responsibilities

RESPONSIBILITIES

The Controlled Substances Staff will:

- Serve as the FDA and CDER focal point for all activities related to the domestic and international control of drugs and substances with abuse potential. This includes responsibilities and functions in this area previously performed by the FDA Office of Health Affairs (OHA).
- Perform abuse liability evaluations
- Formulate recommendations for drug scheduling under the CSA
- As the official FDA and CDER liaison, serve as the focal point for all FDA and CDER interactions and communications with the DEA.

PROCEDURES

I. Preapproval Consultations with CSS

- **CDER Offices and Divisions will:**

1. Complete the consult request form (Form FDA 3291).
2. Attach the following supporting documents and forward to the CSS Coordinator:
   - Sections of the IND/NDA/ANDA related to abuse liability
   - Citations to pertinent electronic NDA sections
   - Letters from sponsors on abuse liability issues
   - Data from additional studies conducted at the request of CSS or any other information pertinent to the abuse liability of the drug
3. Notify CSS promptly when a consultation involves PDUFA time frames. Indicate whether a 30-day action is required for a new IND or clinical protocol. Provide the desired completion date, and provide justification for the date, including the user fee goal date, pertinent internal or industry meetings, Advisory Committee meetings, and meetings with other groups. CSS generally needs 30 days to prepare for industry meetings, to perform IND reviews, and to prepare for filing meetings. Consultations on NDAs, scheduling actions, and reviews of proposed risk management programs require longer preparation times.

4. Notify the IND sponsors that all information and communication related to abuse liability must be submitted to CSS through the review division.

5. Notify the NDA sponsors that they must organize and identify the pertinent sections related to abuse liability in a form that facilitates CSS review.

6. Coordinate meeting requests with CSS as soon as the meeting is requested.

7. Consult CSS for input, as appropriate, when drafting sections of sponsor communication in CSS area of expertise.

8. Notify CSS of final actions or sponsor communications through the Division Files System (DFS) or e-mail to "CDER CSS CONSULTS."

- **The CSS Coordinator will:**

1. Serve as the point of contact for project managers on assignment of reviewers, status of consult requests, and the CSS calendar.

2. Enter the appropriate information into and maintain the CSS consult database.

3. Forward a hard copy of the completed consult to the originator.

4. Ensure that the CSS reviewer enters completed consults into DFS.

5. Notify the DEA, as mandated by the CSA, if a new drug submitted under a NDA appears to have abuse liability.

6. Coordinate with the Office of Chief Counsel (OCC), CDER, FDA, and DHHS, and transmit recommendations to DEA.

- **The CSS Reviewer will:**

1. Analyze documents and respond to the consultation request under the supervision of the Director, CSS, or designated individual.

2. Attend meetings as requested by the division or CSS.

3. Contact requestor to clarify consultation questions.

4. Request abuse-related data from external sources, such as the Substance Abuse and Mental Health Services Administration (SAMHSA), National Institute on Drug Abuse (NIDA), and DEA.

5. Request prescription usage data through the Division of Surveillance, Research, and Communication Support (DSRCS).

6. Consult with the Office of Drug Safety (ODS) to obtain abuse and dependence adverse event reports data.

7. Participate in the review and discussions pertaining to proposed labeling and proposed risk management programs.

8. Advise the Office of New Drugs (OND) and other CDER offices on drug scheduling, proposed labeling, and proposed risk management programs.

9. Prepare scheduling recommendations, if necessary.

10. Enter the consultation review into DFS.

II. Postapproval Consultations with CSS

- **The CDER Offices and Divisions will:**

1. Notify and consult CSS if abuse and dependence are reported as postmarketing adverse events.

2. Notify and include CSS in meetings on abuse and dependence, risk management, or revised scheduling proposals.

3. Consult CSS on labeling revisions for drugs when abuse and dependence issues are identified.

4. Notify and consult CSS about communicating abuse and dependence risks to the public.

- **The Controlled Substance Staff (CSS) will:**

1. Provide advice on public communications related to abuse and dependence risks, labeling revisions, and scheduling actions.

2. Monitor data sources on emerging drug abuse trends.

3. Initiate investigations and consult with other CDER offices on emergent abuse of prescription drugs.

4. Advise and make recommendations to OND and other CDER offices on drug scheduling, labeling, and risk management programs.

5. Serve as the official FDA and CDER liaison and focal point for all CDER and FDA interactions and communications with the DEA.

EFFECTIVE DATE

This MAPP is effective upon date of publication.