



July 2011

RE: ABRAXANE® for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) (albumin-bound) is fully available through established distribution channels

Dear State Society,

Recently, several sizes of generic paclitaxel injection (6mg/ml) distributed by various manufacturers have been added to the American Society of Health Systems Pharmacists Drug Shortage list.

We would like to inform you that the shortage of paclitaxel injection has **NOT** affected the supply of ABRAXANE® for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) (albumin-bound). ABRAXANE remains fully available through established distribution channels.

Abraxane for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) is indicated for the treatment of breast cancer after failure of combination chemotherapy for metastatic disease or relapse within 6 months of adjuvant chemotherapy. Prior therapy should have included an anthracycline unless clinically contraindicated.

Note: An albumin form of paclitaxel may substantially affect a drug's functional properties relative to those of drug in solution. DO NOT SUBSTITUTE FOR OR WITH OTHER PACLITAXEL FORMULATIONS.

Below is product and shipping/ordering information which can assist you in ordering Abraxane.

Product Information

| Product | NDC # | J Code | How Supplied | Storage |
|----------|--------------|--------|---|------------------------------|
| ABRAXANE | 68817-134-50 | J9264 | 100 mg of paclitaxel in single-use vial | 20°C to 25°C 68°F to 77°F |

Shipping and Ordering Information

| | Carton | Case |
|-------------------|----------|-----------|
| Quantity | 1 | 50 |
| Weight | 0.216 lb | 12 lb |
| Dimensions | | |
| Width | 2.5 in | 12.25 in |
| Length | 2.5 in | 13.375 in |
| Height | 4.0 in | 8.375 in |

To order: Send purchase order information to your wholesaler or specialty distributor.

Further Information

If you have any questions or require further information, please contact the following:

- Celgene Medical Information at 1-888-771-0141 for clinical or medical questions regarding Abraxane
- Celgene Patient Support® at 1-800-931-8691 for questions related to patient access to Abraxane

Please see Important Safety Information below and attached full Prescribing Information, including BOXED WARNINGS, CONTRAINDICATIONS, WARNINGS AND PRECAUTIONS, and ADVERSE REACTIONS.

ABRAXANE® for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) is indicated for the treatment of breast cancer after failure of combination chemotherapy for metastatic disease or relapse within 6 months of adjuvant chemotherapy. Prior therapy should have included an anthracycline unless clinically contraindicated.

Important Safety Information

WARNING

ABRAXANE for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) should be administered under the supervision of a physician experienced in the use of cancer chemotherapeutic agents. Appropriate management of complications is possible only when adequate diagnostic and treatment facilities are readily available.

ABRAXANE therapy should not be administered to patients with metastatic breast cancer who have baseline neutrophil counts of less than 1,500 cells/mm³. In order to monitor the occurrence of bone marrow suppression, primarily neutropenia, which may be severe and result in infection, it is recommended that frequent peripheral blood cell counts be performed on all patients receiving ABRAXANE.

Note: An albumin form of paclitaxel may substantially affect a drug's functional properties relative to those of drug in solution. DO NOT SUBSTITUTE FOR OR WITH OTHER PACLITAXEL FORMULATIONS.

ADDITIONAL WARNINGS

- The use of ABRAXANE has not been studied in patients with renal dysfunction. In the randomized controlled trial, patients were excluded for baseline serum bilirubin >1.5 mg/dL or baseline serum creatinine >2 mg/dL

Pregnancy-Teratogenic Effects: Pregnancy Category D

- ABRAXANE can cause fetal harm when administered to a pregnant woman
- If this drug is used during pregnancy, or if the patient becomes pregnant while receiving this drug, the patient should be apprised of the potential hazard to the fetus
- Women of childbearing potential should be advised to avoid becoming pregnant while receiving treatment with ABRAXANE

Use in Males:

- Men should be advised to not father a child while receiving treatment with ABRAXANE

Albumin (human):

- ABRAXANE contains albumin (human), a derivative of human blood

PRECAUTIONS**Drug Interactions:**

- No drug interaction studies have been conducted with ABRAXANE
- Caution should be exercised when administering ABRAXANE concomitantly with medicines known to inhibit or induce either CYP2C8 or CYP3A4

Hematology:

- ABRAXANE therapy should not be administered to patients with baseline neutrophil counts of less than 1,500 cells/mm³
- It is recommended that frequent peripheral blood cell counts be performed on all patients receiving ABRAXANE
- Patients should not be retreated with subsequent cycles of ABRAXANE until neutrophils recover to a level >1,500 cells/mm³ and platelets recover to >100,000 cells/mm³
- In the case of severe neutropenia (<500 cells/mm³ for 7 days or more), during a course of ABRAXANE therapy, a dose reduction for subsequent courses of therapy is recommended

Nervous System:

- Sensory neuropathy occurs frequently with ABRAXANE
- The occurrence of grade 1 or 2 sensory neuropathy does not generally require dose modification
- If grade 3 sensory neuropathy develops, treatment should be withheld until resolution to grade 1 or 2 followed by a dose reduction for all subsequent courses of ABRAXANE

Hepatic Impairment:

- Because the exposure and toxicity of paclitaxel can be increased with hepatic impairment, administration of ABRAXANE in patients with hepatic impairment should be performed with caution
- The starting dose should be reduced for patients with moderate and severe hepatic impairment

Injection Site Reaction:

- Injection site reactions occur infrequently with ABRAXANE and were mild in the randomized clinical trial
- Given the possibility of extravasation, it is advisable to closely monitor the infusion site for possible infiltration during drug administration

Nursing Mothers:

- It is not known whether paclitaxel is excreted in human milk
- Because many drugs are excreted in human milk and because of the potential for serious adverse reactions in nursing infants, it is recommended that nursing be discontinued when receiving ABRAXANE therapy

Ability to Drive and Use Machines:

- Adverse events such as fatigue, lethargy, and malaise may affect the ability to drive and use machines

ADVERSE EVENTS

- Severe cardiovascular events possibly related to single-agent ABRAXANE occurred in approximately 3% of patients in the randomized trial
- These events included chest pain, cardiac arrest, supraventricular tachycardia, edema, thrombosis, pulmonary thromboembolism, pulmonary emboli, and hypertension

- Cases of cerebrovascular attacks (strokes) and transient ischemic attacks have been reported rarely
- During postmarketing surveillance, rare reports of congestive heart failure and left ventricular dysfunction were observed, primarily among individuals with underlying cardiac history or prior exposure to cardiotoxic drugs

In the randomized metastatic breast cancer study, the most important adverse events included alopecia (90%), neutropenia (all cases 80%; severe 9%), sensory neuropathy (any symptoms 71%; severe 10%), asthenia (any 47%; severe 8%), myalgia/arthralgia (any 44%; severe 8%), anemia (all 33%; severe 1%), nausea (any 30%; severe 3%), diarrhea (any 27%; severe <1%) infections (24%), vomiting (any 18%; severe 4%), and mucositis (any 7%; severe <1%).

Other adverse reactions have included ocular/visual disturbances (any 13%; severe 1%), renal dysfunction (any 11%; severe 1%), fluid retention (any 10%; severe 0%), hepatic dysfunction (elevations in bilirubin 7%, alkaline phosphatase 36%, AST [SGOT] 39%), hypersensitivity reactions (any 4%; severe 0%), cardiovascular reactions (severe 3%), thrombocytopenia (any 2%; severe <1%), and injection site reactions (<1%). In clinical trials and during postmarketing surveillance, dehydration was common and pyrexia was very common. Rare occurrences of severe hypersensitivity reactions have also been reported during postmarketing surveillance.

Please see full Prescribing Information, including Boxed WARNINGS, CONTRAINDICATIONS, WARNINGS AND PRECAUTIONS, and ADVERSE REACTIONS.

Sincerely,



Shawn C. Tomasello
Corporate Vice President and General Manager, US Hematology and Oncology
Celgene Corporation