

PRODNO = MDL-FOREM0002742
CD_NAME = MDLDVD001
TREATMENT : CONFIDENTIAL
FROM : Heydorn, William
TO : NMitchner@bsmg. com (E-mail)
DATE = 10/24/2001
TIME : 03:28:22 PM
SUBJECT : FW: Notes from conference call Oct 4
FOLDER : Outlook Folders\Personal Folders\Sent Mail Oct - Dec 2001
SOURCE : William Heydorn
ATTACHMENT : \\bh-app1\ConcordanceData\Production 2012-05-05\EMAILS\Concordance
\Attachments\MDL-FOREM0002742\001.Citalopram peds study - notes from
conf call with pharmanet.doc
MESSAGEID : <2F54E33330409943BEFC912FC7DCB3EB28152B@MAIL-NYC>
BODY : Natasha,

Attached are my notes from the conference call with the CRO on the peds study

Hope they are useful

Bill

-----Original Message-----

From: Heydorn, William

Sent: Thursday, October 04, 2001 4:22 PM

To: Evelyn Kopke Ph. D. (E-mail); Gundula U. LaBadie PhD (E-mail)

Cc: Flicker, Charles; Jin, James; Wu, Jane

Subject: Notes from conference call Oct 4

Attached are my notes from our conference call today.

Please feel free to comment/modify or add to these notes if I missed any points

Bill Heydorn

Notes from conference call with Pharmanet Oct 4, 2001

Attendees: Forest: Charles Flicker, Bill Heydorn, James Jin, Jane Wu
Pharmanet Evelyn Kopke; Gundie LaBadie

Points of note in study report for CIT-MD-18:

- 1) A table is being prepared by Forest on the incidence of concurrent psychiatric illness at baseline. This will be forwarded to Pharmanet when ready. Based on results in this table, we may want to add a line to the demographic panel with this information. Alternatively, we may simply add wording to the study report. ADHD likely to be the concurrent condition seen most frequently.
- 2) Secondary responder analysis – the percent of patient showing $\geq 50\%$ decrease in the CDRS-R and K-SADS-P – if supportive, include in discussion of primary efficacy parameter. Add as text – no panel
- 3) General comment on panels – pool children and adolescent findings. For example – Panels 12 and 15 of the shell report – pool children and adolescents so that there is just a placebo column and a citalopram column
- 4) Emphasis in report – no age x treatment interaction, thus can add statements (as appropriate) in text that similar effects were seen in the child and adolescent subgroups. State differences in text as data warrant.
- 5) For demographics and disposition, separate children and adolescents
- 6) Want to emphasize point that the drug is safe in children. In discussion, compare overall ae incidence with that found in adults using the Package insert for citalopram. Emphasize the similarity with adults. Mention areas where adolescents or children look better than adults (dizziness, somnolence, sexual dysfunction) Message should be that no new or unexpected adverse events appeared in children or adolescents
- 7) Note that study was not powered to look at differences within the two subgroups (children and adolescents). The sample size was calculated based on the anticipated effect size for the primary efficacy variable.
- 8) The results from the CDRS-R looked strong at every visit. Emphasize the positive effect early on; also emphasize that the positive effect was seen early on with the 20 mg/day dose. Include only the figure from the primary endpoint; leave others as after text figures
- 9) For secondary efficacy measures – no significant difference at the week 8 LOCF analysis. There are some significant findings early on in treatment. Forest looking at individual patient listings to see if there are any clues as to why week 8 findings were not positive. For now, emphasize the positive findings at earlier time points for the secondary efficacy variables.
- 10) TEAEs (panel 15) cut off at $\geq 5\%$ and pool adolescents and children
- 11) Dosing error – some citalopram tables were not blinded. The 9 patients who received unblinded medication were included in the main analyses; a secondary “Post-hoc analysis of the ITT subpopulation” was done. Refer to these analyses briefly in methods and results and reference the reader to the appendix table.
- 12) Include plasma level data in the report.