

Graham, David J

From: Graham, David J
Sent: Friday, August 13, 2004 5:12 PM
To: Seligman, Paul
Subject: RE: COX2 Poster at ISPE

Paul,

Thanks for forwarding John's email. I've gone about as far as I can without compromising my deeply-held conclusions about this safety question. I've also shared with you the perspectives of my co-authors and I think it's safe to say they share these same conclusions. The *a priori* reason for our doing this study was not that we reach a conclusion consistent with FDA's handling of the issue in labeling. You know my views about the effectiveness of labeling and if Duract taught us anything, it's that you can't restrict their use to a limited duration of time. Also, physicians aren't computers that can optimize a therapeutic decision balancing pain against risk of AMI or SCD. Most of rofecoxib high dose use is for more than 5 days, and is more often measured in months. The company's RCTs show no added efficacy for the 50 mg dose above that with the 25 mg dose in treating chronic OA.

Dave

---Original Message---

From: Seligman, Paul
Sent: Friday, August 13, 2004 4:46 PM
To: Graham, David J
Subject: FW: COX2 Poster at ISPE

I shared your revised conclusion with John and Jonca. John provided feedback below for your consideration.

Paul

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

From: Jenkins, John K
Sent: Friday, August 13, 2004 1:23 PM
To: Seligman, Paul; Bull, Jonca
Subject: RE: COX2 Poster at ISPE

I still think this is pretty strong language since to my knowledge FDA is not contemplating such a warning for labeling. I think something like "This and other studies suggest an increased risk of AMI with rofecoxib use and should be considered by prescribers when making individual treatment decisions." This is more in line with what I think we have done with the labeling.

John