Attachment 7

DEC 21 2001

K013054

510(k) Summary

September 1, 2001

1. Submission Applicant & Correspondent:

Name:

Sinclair Pharmaceuticals, Ltd.

Address:

Borough Road Godalming Surrey GU7 2AB United Kingdom

Phone No.: +44 1483 428 611

Contact Person:

Denise Swift, Director of Regulatory Affairs

2. Name of Device:

Gelclair® CONCENTRATED ORAL GEL

Trade/Proprietary/Model Name:

Gelclair® Concentrated Oral Gel

Common or Usual Name:

Dressing, Wound & Burn, Hydrogel w/Drug or

Biologic

Classification Names:

Dressing, Wound & Burn, Hydrogel w/Drug or

Biologic

3. Devices to Which New Device is Substantially Equivalent:

Carrington Laboratories Radiacare™ Oral Wound Rinse.

4. Device Description:

Sinclair Pharmaceuticals, Ltd. Gelclair® CONCENTRATED ORAL GEL is a viscous gel formulation, which is presented in a sachet of 15ml for mixing with 40ml of water. This combination of substances, when washed around the mouth, forms a protective layer over the oral mucosa.

5. Intended Use of the Device:

Sinclair Gelclair® Concentrated Oral Gel, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, and traumatic ulcers caused by braces or ill fitting dentures, or disease. Also indicated also for diffuse aphthous ulcers.

6. Summary of Technological Characteristics of the Device Compared to the Predicate Devices:

The Gelclair® CONCENTRATED ORAL GEL has the same intended/indications for use as the predicate Carrington Laboratories Radiacare™ Oral Wound Rinse.

Product Name	Sinclair Pharmaceuticals Gelclair®	Carrington Labs RadiaCare ™		
Ingredients	Purified Water, Propylene Glycol, Polyvinylpyrrolidone, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethylcellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid	Acemannan hydrogel, Aspartame, Flavor, Fructose, Maltodextrin, Polyvinylpyrrolidone, Potassium Sorbate, Sodium Benzoate		
Method of Use	Mix with water	Mix with water		
Number of applications per day	Take as needed	Take as needed		
Claim	Management and relief of pain, does not sting, nonirritating, safe if swallowed	Management and relief of pain, does not sting, nonirritating, safe if swallowed		
Area of Use	Oral Mucosa	Oral Mucosa		
Disease State	Oral Mucositis/Stomatitis/Oral Lesions	Oral Mucositis/Stomatitis/Oral Lesions		
Type of Product	Concentrate for dilution	Concentrate for dilution		
Presentation	Non Sterile	Non Sterile		

7. Tests and Conclusions:

Extensive functional and performance testing were conducted to assess the safety and effectiveness of Gelclair® CONCENTRATED ORAL GEL. All results are satisfactory.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Sinclair Pharmaceuticals, Incorporated Ms. Priscilla Cox Director, RA/QA Otterbrook Engineering 1 Alder Brook Chinley, High Peak, UNITED KINGDOM

DEC 21 2001

Re: K013056

Trade/Device Name: Gelclair Concentrated Oral Gel

Regulation Number: None Regulation Name: None

Regulatory Class: Unclassified

Product Code: MGQ Dated: December 10, 2001 Received: December 11, 2001

Dear Ms. Cox:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Page 2 – Ms. Cox

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4613. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Policie Cicente ffe Timothy A. Ulatowski

Director

Division of Dental, Infection Control and General Hospital Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure

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Indications for Use Statement

510(k) Number (if known)

Device Name

Sinclair Gelclair® CONCENTRATED ORAL GEL

Indications for Use

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery and traumatic ulcers caused by braces or ill fitting dentures or disease. Also indicated also for diffuse aphthous ulcers.

PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER **PAGE IF NEEDED**

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use	OR	Over-The Counter Use
(per 21 CFR 801.109)		·

ma Cucuk for flumer (Division Sign-Off)

Division of Dental, Infection Control.

and General Hospital Devices

510(k) Number <u>1.0/3056</u>

DEPARTMENT OF HEALTH & HUMAN SERVICES Public Health Service Food and Drug Administration Memorandum JUL 1 2 2002 Date: From: DMC (HFZ-401) Subject: Premarket Notification Number(s): KO/3056/P/ Division Director: DE/DAGIO To: The attached information has been received by the 510(k) DMC on the above referenced 510(k) submission(s). Since a final decision has been rendered, this record is officially closed. Please review the attached document and return it to the DMC, with one of the statements checked below. Information does not change the status of the 510(k); no other action required by the DMC; please add to image file. (Prepare K-25) THIS DOES NOT APPLY TO TRANSFER OF OWNERSHIP. PLEASE BRING ANY TRANSFER OF OWNERSHIP TO POS. Additional information requires a new 510(k); however, the information submitted is incomplete; (Noitify company to submit a new 510(k); [Prepare the K30 Letter on the LAN] Additional information requires a new 510(k); please process [This information will be made into a new 510(k) No response necessary (e.g., hard copy of fax for the truthful and accuracy statement, 510(k) statement, change of address, phone number, or fax number). CLIA CATEGORIZATION refers to laboratory test system devices reviewed by the Division of Clinical Laboratory Devices (HFZ-440 Information requires a CLIA CATEGORIZATION; the complexity may remain the same as the original 510(k) or may change as a result of the additional information (Prepare a CAT letter) Additional information requires a CLIA CATEGORIZATION; however, the information submitted is incomplete; (call or fax firm) No response necessary This information should be returned to the DMC within 10 working days from the date of this

Questions? Contact FDA/CDRH/OCE/DID at CDRH-FOISTATUS@fda.hhs.gov or call 301-796-8118

memorandum.

Draft #2: 9/8/99 Draft #3: 1/3/00



Food and Drug Administration, Center for Devices and Radiological Health (CDRH), Office of Device Evaluation, 9200 Corporate Boulevard, Rockville MD 20850. USA.

10th July 2002.

RE: KO13056

Trade/Device Name: Gelclair Concentrated Oral Gel

Subject: Request for Reclassification.

Dear Sir/Madam,

The substantial equivalence letter dated December 21st 2001 that we received from the FDA, stated that the above product is Unclassified, MGQ.

As Gelclair Concentrated Oral Gel does not contain a drug/biologic we believe that the product code MGQ is possibly not applicable and that we may have miscoded our original application. Gelclair is a hydrogel wound dressing without drug/biologic (Product Code NAE).

We would therefore respectfully request that you reconsider the Regulatory Class of this product to a Class I.

Yours faithfully,

[DR GEOFFFEY FILL, C. O.O.)

Denise Swift

Director of Regulatory Affairs

SKG

Sinclair Pharmaceuticals Limited Borough Road, Godalming, Surrey, UK, GU7 2AB

Tel: +44 (0)1483 426644 Fax: +44 (0)1483 860927 Web: www.sinclairpharma.com Email: info@sinclairpharma.com

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service Food and Drug Administration

	Memorandum
e:	8/1/02
m:	DMC (HFZ-401)
oject	:: Premarket Notification Number(s): $\frac{10/3056/h}{2}$
	Division Director: DE/DAGID
	The attached information has been received by the 510(k) DMC on the above referenced 510(k) submission(s). Since a final decision has been rendered, this record is officially closed.
	Please review the attached document and return it to the DMC, with one of the statements checked below.
	Information does not change the status of the 510(k); no other action required by the DMC; please add to image file. (Prepare K-25) THIS DOES NOT APPLY TO TRANSFER OF OWNERSHIP. PLEASE BRING ANY TRANSFER OF OWNERSHIP TO POS.
	Additional information requires a new 510(k); however, the information submitted is incomplete; (Noitify company to submit a new 510(k); [Prepare the K30 Letter on the LAN]
	Additional information requires a new 510(k); please process [This information will be made into a new 510(k)
	made into a new 510(k) No response necessary (e.g., hard copy of fax for the truthful and accuracy statement, 510(k) statement, change of address, phone number, or fax number). CLIA CATEGORIZATION refers to laboratory test system devices reviewed by the
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	Information requires a CLIA CATEGORIZATION; the complexity may remain the same as the original 510(k) or may change as a result of the additional information (Prepare a CAT letter)
	Additional information requires a CLIA CATEGORIZATION; however, the information submitted is incomplete; (call or fax firm)
	No response necessary
	This information should be returned to the DMC within 10 working days from the date of this memorandum.
	Reviewed by: Charles Blackwell Date: 8/15/02
	Draft #2 : 9/8/99 Draft #3: 1/3/00

Questions? Contact FDA/CDRH/OCE/DID at CDRH-FOISTATUS@fda.hhs.gov or call 301-796-81 8.

SINCLAIR

Ms Angela Blackwell Document Mail Center (HFZ-401) Food and Drug Administration (FDA) Center for Devices and Radiological Health (CDRH) Office of Device Evaluation 9200 Corporate Blvd. Rockville, MD 20850

29th July 2002

Subject: K013056

Device name: Gelclair Concentrated Oral Gel

Dear Ms Blackwell

Thank you for your telephone call of 16th July 2002 and for the informatio concerning the classification of devices of this type. I have now had the opportunity to discuss further the classification issue within the company.

We understand that the MGQ code is considered by the FDA to apply to the above product because it is considered to be resorbable. However, since the product is an oral rinse and dwell time in the mouth is short lived, we are of the opinion that the amount of uptake through the mucosa is minimal. Although a thin film of the product remains inside the mouth, this exposure is transient due to the normal friction of tongue, teeth, gums and saliva.

Additionally, all ingredients used in the product are GRAS listed with the exception of the sodium hyaluronate and this has well-established internal uses ranging from ocular surgery to orthopaedic surgery with other medical devices. Therefore given the miniscule amounts possibly swallowed, Gelclair does not pose a safety risk to the patient.

On this basis of a demonstrated low risk device, we wish to raise again with the FDA our belief that this product is a Class I hydrogel wound dressing without drug/biologic (Product code NAE) and respectfully request that this petition for a change in the product classification be reconsidered.

If it is considered appropriate, we would be pleased to meet with FDA representatives to discuss the above issues.

Yours sincerely

Denise Swift

Director of Regulatory Affairs

Derince Ruth

2

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Services Food and Drug Administration

	Memorandum
Date:	10-8-08
From: E	OMC (HFZ-401) 1(013056/43
Subject:	Premarket Notification Number(s):
To:	Premarket Notification Number(s): Division Director: DE/DAGID
	The attached information has been received by the 510(k) DMC on the above referenced 510(k) submission(s). Since a final decision has been rendered, this record is officially closed.
	Please review the attached document and return it to the DMC, with one of the statements checked below.
	Information does not change the status of the 510(k); no other action required by the DMC; please add to image file. (Prepare K-25) THIS DOES NOT APPLY TO TRANSFER OF OWNERSHIP. PLEASE BRING ANY TRANSFER OF OWNERSHIP TO POS.
	Additional information requires a new 510(k); however, the information submitted is incomplete; (Notify company to submit a new 510(k); [Prepare the K30 Letter on the LAN]
	No response necessary (e.g., hard copy of fax for the truthful and accuracy statement, 510(k) statement, change of address, phone number, or fax number).
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	Information requires a CLIA CATEGORIZATION; the complexity may remain the same as the original 510(k) or may change as a result of the additional information (Prepare a CAT letter)
	Additional information requires a CLIA CATEGORIZATION; however, the information submitted is incomplete; (call or fax firm)
	No response necessary
	This information should be returned to the DMC within 10 working days from the date of this Memorandum.
	Reviewed by:
	Date: 10/9/05

(nmb)

Records processed under FOIA Request #2016-3977; Released by CDRH on 08-29-2016

016.013056/A3

Research & Development



Food and Drug Administration (FDA)

Center for Devices and Radiological Health (CDRH) Office of Device Evaluation 9200 Corporate Blvd. Rockville, MD 20850

October, I 2008

Re: Gelclair - Annual Report

Dear Sirs/Madame:

Pursuant to Section 510(k) of the Federal Food, Drug, and Cosmetic Act we hereby submit the Annual Report for the MEDICAL DEVICE referenced above.

This report covers the period from 1st January 1 2007- 31st December 2007.

No adverse events have been reported on the Devices in the territory of United States.

No other changes requiring notification of FDA are anticipated.

If you have any questions or comments, please do not hesitate to contact me at 011-41-91-985 21 21 in Lugano, Switzerland or our US agent Mike Killeen, Phone +1 972-478-4380 or Fax +1 972-478-4416.

Sincerely,

FDA CDRH DMC

HELSINN HEALTHEARE'S

Marco Elli, M. Pharm.

Manager Corporate Regulatory Affairs

OCT 8 2008

Received



DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Sinclair Pharmaceuticals, Incorporated Ms. Priscilla Cox Director, RA/QA Otterbrook Engineering 1 Alder Brook Chinley, High Peak, UNITED KINGDOM

DEC 21 2001

Re: K013056

Trade/Device Name: Gelclair Concentrated Oral Gel

Regulation Number: None Regulation Name: None

Regulatory Class: Unclassified

Product Code: MGQ
Dated: December 10, 2001
Received: December 11, 2001

Dear Ms. Cox:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

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Page 2 – Ms. Cox

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Sincerely yours,

Timothy A. Ulatowski

Director

Division of Dental, Infection Control and General Hospital Devices Office of Device Evaluation

futurea Cucento/for

Center for Devices and Radiological Health

Enclosure

Attachment 3

Indications for Use Statement

510(k) Number (if known)

Device Name

Sinclair Gelclair® CONCENTRATED ORAL GEL

Indications for Use

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery and traumatic ulcers caused by braces or ill fitting dentures or disease. Also indicated also for diffuse aphthous ulcers.

PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER PAGE IF NEEDED

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (per 21 CFR 801.109)

OR

Over-The Counter Use

(Division Sign-Off)

Division of Dental, Infection Control,

and General Hospital Devices

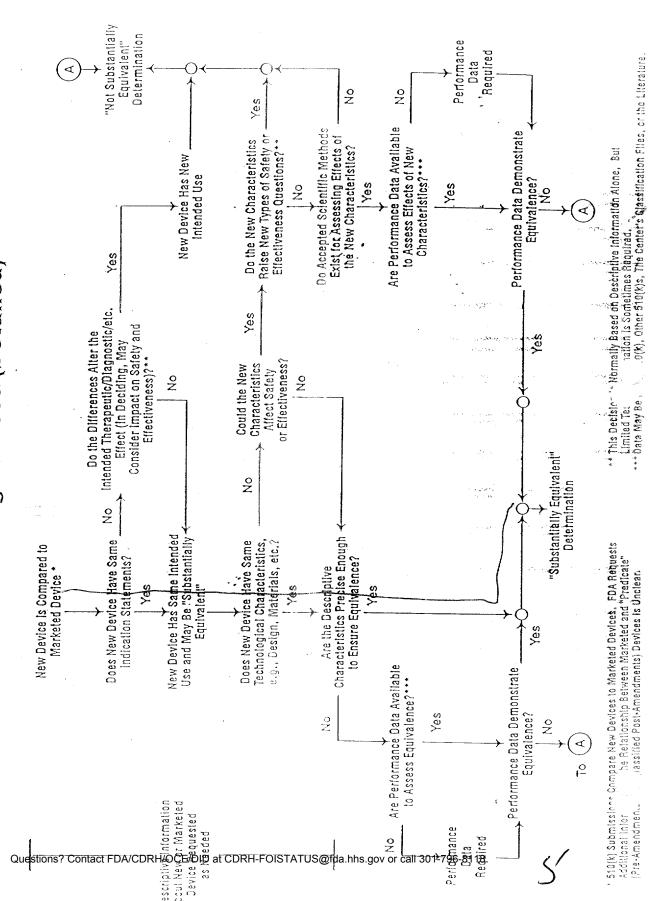
Questions? Contact FDA/CDRH/OCE/DID at CDRH-FOISTATUS@tda.nns.gov or call 301-796-8118.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service Food and Drug Administration

	Reviewer(s) - Name(s) Angela Blackwell [CO13057/5]	Memorandum
From:	Reviewer(s) - Name(s) Ungla Diathwed	
Subject:	510(k) Number 100/300 (P	
То:	The Record - It is my recommendation that the subject 510(L) Notification:	•
Is V V	s this device subject to the Tracking Regulation. Vas clinical data necessary to support the review of this 510(k)? So this a prescription device? Vas this 510(k) reviewed by a Third Party?	YES NO YES INO YES NO YES NO YES NO YES NO
	Material of Biological Origin Tyes WNO	
☐ No (The submitter requests under 21 CFR 807.95 (doesn't apply for SEs): Confidentiality	lity exceeding 90 days
I	Predicate Product Code with class: Additional Product Code(s) with	n panel (optional):
-	MGQ unclassified Review falticese (exceptle for 5.12 entrer (Branch Chief) Final Review flatticese (exceptle for TAME (Division Director)	12/21/0/
	Final Review / Milece (seemble Jest THML (Division Director)	12/21/01 Date)

Decision-Making Process (Detailed 510(k) "Substantial Equivalence"



*** Data May Be,

he Relationship Between Markeled and "Predicate" lassified Post-Amendments) Devices is Unclear.

Pre-Amendmen.

"SUBSTANTIAL EQUIVALENCE" (SE) DECISION MAKING DOCUMENTATION

K013056

Reviewer: Angela Blackwell

Division/Branch: DDIGD/ DEDB

Device Name: Gelclair Concentrated Oral Gel

Company: Sinclair Pharmaceuticals Ltd.

Product To Which Compared (510(K) Number If Known): K983182

YES NO

1.	Is Product A Device	Х	If NO = Stop
2.	Is Device Subject To 510(k)?	х	If NO = Stop
3.	Same Indication Statement?	x	If YES = Go To 5
4.	Do Differences Alter The Effect Or Raise New Issues of Safety Or Effectiveness?		If YES = Stop NE
5.	Same Technological Characteristics?	х	If YES = Go To 7
6.	Could The New Characteristics Affect: Safety Or Effectiveness?		If YES = Go To 8
7.	Descriptive Characteristics Precise Enough?	х	If NO = Go To 10 If YES = Stop SE
8.	New Types Of Safety Or Effectiveness Questions?		If YES = Stop NE
9.	Accepted Scientific Methods Exist?		If NO = Stop NE
	Performance Data Available?		If NO = Request Data
11.	Data Demonstrate Equivalence?		Final Decision: SE

- 1. Intended Use: Sinclair Gelclair concentrated oral gel has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: oral mucositis/stomatitis (may be cause by chemotherapy or radiotherapy), irritation due to oral surgery, and traumatic ulcers caused by braces or ill fitting dentures, or disease. Also indicated for diffuse aphthous ulcers.
- 2. Device Description: Provide a statement of how the device is either similar to and/or different from other marketed devices, plus data (if necessary) to support the statement. Is the device life-supporting or life sustaining? Is the device implanted short-term or long-term)? Does the device design use software? Is the device sterile? Is the device for single use? Is the device for home use or prescription use? Does the device contain drug or biological product as a component? Is this device a kit? Provide a summary about the devices design, materials, physical properties and toxicology profile if important.

The device is similar to Radiacare in indicateon.

Memorandum

To: K013056

Device: Gelclair Concentrated Oral Gel Company: Sinclair Pharmaceuticals

From: Angela Blackwell Date: December 7, 2001

Background

The device is similar to the predicate device Radiacare Oral Wound Rinse. Both rinses are gels. Radiacare is particulates in a bottle to which water is added and Gelclair is a concentrated gel in a packet which you add to a glass of water.

Composition Comparison Ingredients Purified water	Gelclair	Function diluent	CFR	Radiacare 88.65 0.30
Acemannan hydrogel Hydroxyethylcellulose Benzalkonium chloride Polyvinylpyrrolidone Potassium Sorbate Sodium Benzoate Maltodextrin Fructose Vanilla Flavor Aspartame Propylene Glycol PEG-40 Hydrogenated	(b)(4) (b)(4) (b)(4) (b)(4) (b)(4) (b)(4)	thickener preservative thickener preservative preservative thickener sweetener flavoring sweetener solvent stabilizer	172.874 310.545 173.55 182.3640 184.1733 184.1444	5.00 0.05 0.05 4.50 1.25 0.20
Castor Oil Licorice Flavor Disodium Edetate Sodium Hyaluronate Saccharin Sodium Glycyrrhetinic Acid	(b)(4) (b)(4) (b)(4) (b)(4)	flavering antickidant film-ferming agent sweetener flavoring/ sweetener	582.10 172.135 180.37 582.10	

All the ingredients of Gelclair have a CFR reference for use in non-device products except for the sodium hyaluronate. Sodium Hyaluronate is the main ingredient of two PMA products for joint lubricant/repair products. (b)(4) Confid

None of the ingredients are present in quantities above that allowed in the CFR. Gelolair appears to be as safe as Radicare.

Preclinical Testing

The level of exposure is considered to be the quantity of substance, expressed in mg/kg, completely absorbed by the user of the product. Level of exposure calculations for adults and children show that the gel is innocuous if ingested and suitable for pediatric use. Children are not excluded in the labeling but they are not included either. Their use of the product is implied because many braces wearers are children.



Indications

The indications are the same as the predicate device.

Conclusions

The labeling is clear and correct for prescription use. The reviewer finds the device substantially equivalent to legally marketed devices.

angela Blackwell 12/20/01

Food and Drug Administration Center for Devices and Radiological Health Office of Device Evaluation Document Mail Center (HFZ-401) 9200 Corporate Blvd. Rockville, Maryland 20850

December 11, 2001

SINCLAIR PHARMACEUTICALS, LTD.
C/O OTTERBROOK ENGINEERING
1 ALDER BROOK
CHINLEY, HIGH PEAK,
UNITED KINGDOM
ATTN: PRISCILLA COX

510(k) Number: K013056 Product: GELCLAIR CONCENTRAT

CONCENTRATED
ORAL GEL

The additional information you have submitted has been received.

We will notify you when the processing of this submission has been completed or if any additional information is required. Please remember that all correspondence concerning your submission MUST be sent to the Document Mail Center (HFZ-401) at the above letterhead address. Correspondence sent to any address other than the one above will not be considered as part of your official premarket notification submission. Because of equipment and personnel limitations we cannot accept telefaxed material as part of your official premarket notification submission, unless specifically requested of you by an FDA official.

The Safe Medical Devices Act of 1990, signed on November 28, states that you may not place this device into commercial distribution until you receive a letter from FDA allowing you to do so. As in the past, we intend to complete our review as quickly as possible. Generally we do so 90 days. However, the complexity of a submission or a requirement for additional information may occasionally cause the review to extend beyond 90 days. Thus, if you have not received a written decision or been contacted within 90 days of our receipt date you may want to check with FDA to determine the status of your submission.

If you have procedural or policy questions, please contact the Division of Small Manufacturers International and Consumer Assistance (DSMICA) at (301) 443-6597 or at their toll-free number (800) 638-2041, or contact me at (301) 594-1190.

Sincerely yours,

Marjorie Shulman Supervisory Consumer Safety Officer Premarket Notification Section Office of Device Evaluation Center for Devices and Radiological Health



December 10, 2001

Document Mail Center (HFZ-401) Food and Drug Administration (FDA) Center for Devices and Radiological Health (CDRH) Office of Device Evaluation 9200 Corporate Blvd. Rockville, MD 20850

Additional Information K013056 Subject:

Dear Ms. Blackwell,

In accordance with Section 510(k) of the Federal Food, Drug, and Cosmetic Act, and 21 CFR 807.87, Sinclair Pharmaceuticals, Ltd. is submitting, in duplicate, additional information as requested for Premarket Notification 510(k) K013056 Sinclair Pharmaceuticals, Ltd. Gelclair® Concentrated Oral Gel. The following pages (attached) have been amended to remove the words ageing and medication:

Section G Indication from labeling Page 6

Section VI Labeling and Intended Use Page 9

Label Copy Page 13

Instructions for Use Page 16

Attachment 3 Indications for Use Page 19 Attachment 7 510(k) Summary Page 36

Confidentiality

We regard our intent to market this product as confidential. The existence of this 510(k) has not been revealed to anyone other than our employees. Therefore we request that the Agency not disclose this intent until the 510(k) clearance is granted.

All items marked "Confidential" may be trade secret, confidential commercial or financial information as defined in 21 CFR 20.61. We request that the Agency not make public disclosure of this information without prior consultation with Sinclair Pharmaceuticals, Ltd. as provided by 21 CFR 20.45.

We would appreciate your earliest attention to this 510(k) and we trust that the information provided will enable the Agency to reach a substantial equivalence determination. Should you have any further questions, please contact me via phone at 011 44 1663 750 410, fax at 011 44 1663 751 449, or email at otterbrookeng@aol.com

Sincerely,

Priscilla Cox Director RA/QA Otterbrook Engineering

Attn: Angela Blackwell

MINGRAN

510(k) #K013056 Additional Information

CONFIDENTIAL

		Property of the Party of the Pa			
INGREDIENT	% NEAT	% DILUTED	FUNCTION	CFR 21 REFERENCE	LEGALLY MARKETED PRODUCTS
PURIFIED WATER				AN	ABREVA ® COLD SORE MEDICINE / GLAXOSMITHKLINE
POLYVINYLPYRROLIDONE				173.55	RADIACARE TM ORAL RINSE / K96482 / CARRINGTON LABS
MALTODEXTRIN				184.1444	MULTIDEX® GEL WOUND DRESSING / K961085 /DEROYAL
PROPYLENE GLYCOL				184.1666	ABREVA ® COLD SORE MEDICINE / GLAXOSMITHKLINE
PEG-40 HYDROGENATED				178.3280	THERA BREATH ORAL RINSE / FRESH START, LLC
HYDROXYETHYLCELLULOSE				172.874	VIRACTIN® COLD SORE & FEVER BLISTER MEDICATION / J.B.
					WILLIAMS
POTASSIUM SORBATE	ation			182.3640	K96482 / CARRINGTON LABS
SODIUM BENZOATE	nform			184.1733	BIOTENE MOUTHWASH / LACLEDE INC.
BENZALKONIUM CHLORIDE	tary li			310.545	VISINE® ADVANCED RELIEF EYE DROPS / PRIZER
FLAVOUR (LICORICE)	roprie			172.515	ADVANCE BREATH CARE ORAL RINSE / ARM & HAMMER
DISODIUM EDETATE	and P			172.135	VISINE® ADVANCED RELIEF EYE DROPS / PFIZER
SODIUM HYALURONATE	dential a			Z,	*STAARVISC II / P000046 / ANIKA THERAPEUTICS & P8100125 / BAUSCH & LOMB
SACCHARIN SODIUM	Confi			180.37	ACT® FLUORIDE ORAL RINSE /
GLYCYRRHETINIC ACID	(b)(4)			582.10	CHEWABLE LICORICE TABLET / RX VITAMINS INC

^{*} Staarvisc II is 12 mg per ml of high molecular weight (> 1MM Daltons) sodium hyaluronate. P000046 references P8100125. It is supplied sterile, non pyrogenic, viscoelastic, highly purified and dissolved in physiologic saline. The device is indicated for use during surgery in the anterior and posterior segments of the human eye. Gelclair sodium hyaluronate is .00027 mg per ml of Gelclair at label indication.

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				The second second		
Product codes of devices to which substantial equivalence is claimed:			Summary of, or statement concerning, safety and effectiveness data:			
1 FRO	2 MGQ			☑ 510(k) summary attached ☐ 510(k) statement		
5	6	7	8		ement	
Information or	n devices to wh	ich substantial	equivalence is	claimed:	-4	
510(k) Number		Trade or proprietary or model name		Manuic		
1 K964852		Radiacare™ Oral Wound Carrington Labs Rinse		IDS		
2		duct intomation Applicable to all Applications				
/8	edior F. Prod		i Applicable to	iali Ajapiteatio		
Common or u	sual or classific	ation name:				
Dressing, Wound & Burn, Hydrogel w/Drug or Biologic			Lag L. I Niverban			
Trade or proprietary or model name		A CONTRACTOR OF STREET	Model Number			
Gelclair® Concentrated Oral Gel NA						
PDA document numbers of all prior related submissions (re		11	rema); papa			
FDA docume	nt numbers of a	all prior related submissions (re		egardiess of our	come). none_	
1	2	3	4	5	12	
7	8	9	10	11		
Data included	l in submission	☑ Laboratory	testing □ Anın	nal trials 🔲 Hu	man ulais	
Sec	dion Gr Produ	ar Chasainean	II) = Wilbligs his	To all Habitests	(PILE)	
Product Code: C.F.R. section 878.4022		Device Class: ☑ Class I ☐ Class III Unclassified	☑ Class II			
Classification	panel: Genera	I & Plastic Surg	ery			
Indications (fr Gelclair® Col management mouth, sooth (may be caus traumatic ulce	Classification panel: General & Plastic Surgery Indications (from labeling): Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, and traumatic ulcers caused by braces or ill fitting dentures, or disease. Also indicated also for diffuse aphthous ulcers.					

From Page 6 of Original Document

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VI. Labeling and Intended Use

A draft, preprinted product pouch, carton and the package insert (which contains Instructions for Use) can be found in Attachment 1.

Intended Use

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery and traumatic ulcers caused by braces or ill fitting dentures, or disease. Also indicated also for diffuse aphthous ulcers.

The Indications for Use statement is included in Attachment 3.

From Page 9 of Original Document

VII. Device Description

Sinclair Gelclair® CONCENTRATED ORAL GEL is a viscous gel comprised of Purified Water, Propylene Glycol, Polyvinylpyrrolidone, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethylcellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid.

Gelclair® CONCENTRATED ORAL GEL has a mechanical action which provides pain relief by adhering to the mucosal surface of the mouth, soothing mouth lesions.

The gel concentrate is provided in a single use 15 ml foil pouches ready to be mixed with 40ml of water for use. The pouch is preprinted with instructions for use.

Gelclair 510(k) #K013056 Label Copy



Gelclair®, has a mechanical action indicated for the management of pain and relief of pain, by achering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, and traumatic ulcers caused by braces or ill fitting dentures, or disease. Also indicated also for diffuse aprithous ulcers.

Directions for use: Pour the entire contents of the single-dose Gelclair* sachet into a glass and add 40 ml of water. Stir mixture well and use at once. Rinse around the mouth for at least one minute or as long as possible to coat tongue, palate, throat, inside of cheeks and all oral tissue thoroughly. Gargle and spit out. Use 3 times a day or as needed. Do not eat or drink for at least one hour following, treatment. If swallowed accidentally no adverse effects are anticipated.

Best Befo

5

Manufactured by:

Sinclair Pharmaceuticals Ltd - Borough Road Godalming - Surrey GU7 2AB - England, UK

(€ Medical Device Class I

AP121701/1

From Page 13 of Original Document



Gelclair® Concentrated Oral Gel

Ingredients: Purified Water, Maltodextrin, Propylene Glycol, PVP, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethyl cellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid.

Patient use form: Concentrated oral gel.

Contents: 15 ml per single-dose sachet. 1 Box contains 21 single dose sachets.

Therapeutic group or type of activity: Oral Gel for the relief of pain.

Indications: Gelclair®, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, traumatic ulcers caused by braces or ill fitting dentures or disease. Also indicated also for diffuse aphthous ulcers.

Contra-indications: The administration of Gelclair® is contra-indicated in any patient with a known history of hypersensitivity to any of the ingredients.

Special Precautions for use: Avoid eating or drinking for at least one hour after use Do not use any sachet that is not intact (torn, split or otherwise damaged in any way). If no improvement is noticed after 7 days, consult a physician.

Warning: Federal law restricts this device to sale by or on the order of a physician or properly licensed practitioner.

Interactions with other medicinal products and other forms of interaction: There are no known interactions with medicinal or other products.

Directions for use: Pour the entire contents of the single-dose Gelclair®, sachet into a glass and add 40ml or 4 tablespoonfuls of water. Stir mixture well and use at once. Rinse around the mouth for at least one minute or as long as possible to coat tongue, palate, throat, inside of cheeks and all oral tissue thoroughly. Gargle and spit out. Use 3 times a day or as needed. Do not eat or drink for least one hour following treatment. If Gelclair® is swallowed accidentally no adverse effects are anticipated. In the unlikely event that water is not available, the product may be used undiluted.

Side effects: At the time of producing this leaflet there have been no reported side effects with Gelclair®, however the product is not recommended for use in patients with a known or suspected allergy to any of the product's ingredients.

Store at room temperature, out of direct sunlight. Do not refrigerate.

KEEP OUT OF THE REACH OF CHILDREN.

Please note: The gel may become a little darker and thicker over time, but this does not affect its efficacy or safety. Do not use after the 'Best Before' date shown on the box.

Overdose: At the time of producing this leaflet no cases of overdose have been reported. However, no serious adverse effects should be expected from ingestion of several sachets of Gelclair®.

Manufactured by:

Sinclair PharmaceuticalsLtd -Borough Road -Godalming -Surrey GU7 2AB -England, UK.

Date of Revision: December 2001

From Page 16 of Original Document

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Attachment 3

Indications for Use Statement

510(k) Number (if known)

Device Name

Sinclair Gelclair® CONCENTRATED ORAL GEL

Indications for Use

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery and traumatic ulcers caused by braces or ill fitting dentures or disease. Also indicated also for diffuse aphthous ulcers.

PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER PAGE IF NEEDED

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use	OR	Over-The Counter Use
(per 21 CFR 801 109)		

From Page 19 of Original Document

Attachment 7

510(k) Summary

September 1, 2001

1. Submission Applicant & Correspondent:

Name:

Sinclair Pharmaceuticals, Ltd.

Address:

Borough Road Godalming Surrey GU7 2AB **United Kingdom**

Phone No.: +44 1483 428 611

Contact Person:

Denise Swift, Director of Regulatory Affairs

Gelclair® Concentrated Oral Gel 2. Name of Device: Gelclair® CONCENTRATED ORAL GEL

Trade/Proprietary/Model Name: Common or Usual Name:

Dressing, Wound & Burn, Hydrogel w/Drug or

Biologic

Dressing, Wound & Burn, Hydrogel w/Drug or Classification Names:

Biologic

3. Devices to Which New Device is Substantially Equivalent:

Carrington Laboratories Radiacare™ Oral Wound Rinse.

4. Device Description:

Sinclair Pharmaceuticals, Ltd. Gelclair® CONCENTRATED ORAL GEL is a viscous gel formulation, which is presented in a sachet of 15ml for mixing with 40ml of water. This combination of substances, when washed around the mouth, forms a protective layer over the oral mucosa.

5. Intended Use of the Device:

Sinclair Gelclair® Concentrated Oral Gel, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, and traumatic ulcers caused by braces or ill fitting dentures, or disease. Also indicated also for diffuse aphthous ulcers.

From Page 36 of Original Document

Food and Drug Administration Center for Devices and Radiological Health Office of Device Evaluation Document Mail Center (HFZ-401) 9200 Corporate Blvd. Rockville, Maryland 20850

December 10, 2001

SINCLAIR PHARMACEUTICALS, LTD.
C/O OTTERBROOK ENGINEERING
1 ALDER BROOK
CHINLEY, HIGH PEAK,
UNITED KINGDOM
ATTN: PRISCILLA COX

510(k) Number: K013056
Product: GELCLAIR
CONCENTRATED
ORAL GEL

We are holding your above-referenced Premarket Notification (510(k)) for 30 days pending receipt of the additional information that was requested by the Office of Device Evaluation. Please remember that all correspondence concerning your submission MUST cite your 510(k) number and be sent in duplicate to the Document Mail Center (HFZ-401) at the above letterhead address. Correspondence sent to any address other than the one above will not be considered as part of your official premarket notification submission. Because of equipment and personnel limitations, we cannot accept telefax material as part of your official premarket notification submission unless specifically requested of you by an FDA official.

The deficiencies identified represent the issues that we believe need to be resolved before our review of your 510(k) submission can be successfully completed. In developing the deficiencies, we carefully considered the statutory criteria as defined in Section 513(i) of the Federal Food, Drug, and Cosmetic Act for determining substantial equivalence of your device. We also considered the burden that may be incurred in your attempt to respond to the deficiencies. We believe that we have considered the least burdensome approach to resolving these issues. If, however, you believe that information is being requested that is not relevant to the regulatory decision or that there is a less burdensome way to resolve the issues, you should follow the procedures outlined in the "A Suggested Approach to Resolving Least Burdensome Issues" document. It is available on our Genter web page at: http://www.fda.gov/cdrh/modact/leastburdensome.html

If after 30 days the requested information, or a request for an extension of time, is not received, we will discontinue review of your submission and proceed to delete your file from our review system. Pursuant to 21 CFR 20.29, a copy of your 510(k) submission will remain in the Office of Device Evaluation. If you then wish to resubmit this 510(k) notification, a new number will be assigned and your submission will be considered a new premarket notification submission.

Please remember that the Safe Medical Devices Act of 1990 states that you may not place this device into commercial distribution until you receive a decision letter from FDA allowing you to do so.

If you have procedural or policy questions, please contact the Division of Small Manufacturers International and Consumer Assistance (DSMICA) at (301) 443-6597 or at their toll-free number (800) 638-2041, or contact me at (301) 594-1190.

Sincerely yours

Marjorie Shulman Supervisor Consumer Safety Officer Premarket Notification Section Office of Device Evaluation Center for Devices and Radiological Health

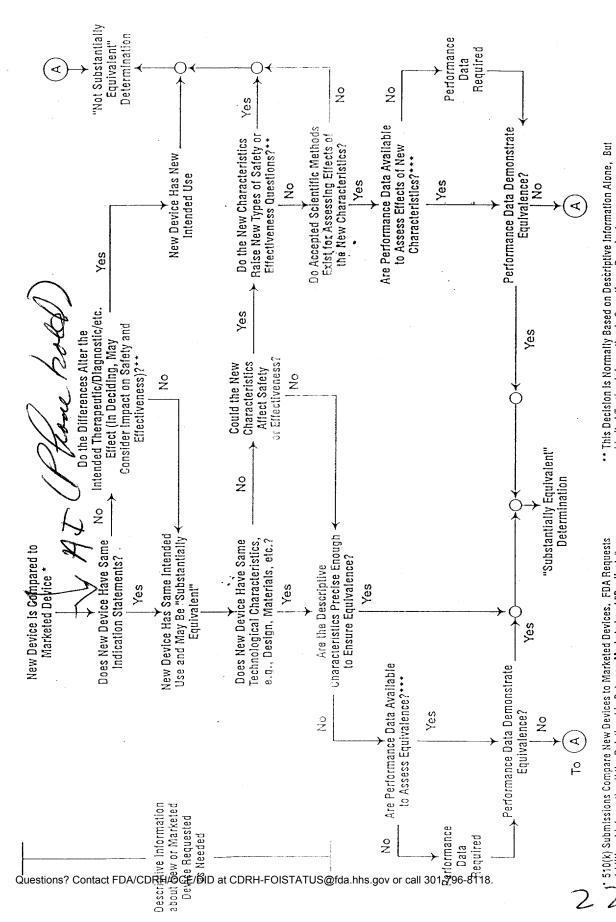
Records processed under FOIA Request #2016-3977; Released by CDRH on 08-29-2016.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service Food and Drug Administration

<u>_</u>	Reviewer(s) - Name(s) angla Blackwell	2	Memorandum
From:	Reviewer(s) - Name(s)		
Subject:	510(k) Number / 0/50 > 6		
To:	The Record - It is my recommendation that the subject 510(k) Notifi	cation:	
	☐ Refused to accept. ☐ Requires additional information (other than refuse to accept). ☐ Is substantially equivalent to marketed devices. ☐ NOT substantially equivalent to marketed devices.	. telef	hore hole
	De Novo Classification Candidate?	YES \Box	l no
	Other (e.g., exempt by regulation, not a device, duplicate, etc).)	
Is V Is V	s this device subject to Postmarket Surveillance? s this device subject to the Tracking Regulation? Vas clinical data necessary to support the review of this 510(k)? s this a prescription device? Vas this 510(k) reviewed by a Third Party? special 510(k)? Abbreviated 510(k)? Please fill out form on H Drive 510k/boilers This 510(k) contains: Truthful and Accurate Statement Requested Enclosed (required for originals received 3-14-95 and after) A 510(k) summary OR A 510(k) statement The required certification and summary for class III devices The indication for use form (required for originals received)	YES YES YES YES YES YES YES YES YES	NO
	Material of Biological Origin UYES UNO		
□ No C	The submitter requests under 21 CFR 807.95 (doesn't apply for SEs): Confidentiality Confidentiality Confidentiality Confidentiality for 90 days Continued Conf	identiality ex	ceeding 90 days
I	Predicate Product Code with class: Additional Product Code	(s) with panel	l (optional):
_	MGQ un classified		ď
I	Review: Robert DOS for De Rumba DEDB (Branch Code)	(Date)	-0/
·	Final Review:	(Date)	

510(k) "Substantial Equivalence" Decision-Making Process (Detailed)



** This Decision is Normally Based on Deskriptive Information Alone, But Limited To " *q Information is Sometimes Required.
*** Data May , the 510(k), Other 510(k)s, The Center's Classification Files, or the Literature.

"on if the Relationship Between Marketed and "Predicate" or Reclassified Post-Amendments) Devices is Unclear.

Additional Infe

(Pre-Amendm

Telephone Memorandum

Call To: Priscilla Cox

Company: Otterbrook Engineering for Sinclair Pharmaceuticals

Document: K013056

Device: Gelclair Concentrated Gel

Call From: Angela Blackwell QSB

Date: December 10, 2001

I am putting your document on hold. I have not received the new indications for use form I requested on Friday by email. It was too late in the day to call you. If you have questions you can reach me at 301-827-5283 x119.

Questions? contact/FDA/CDRH/OCE/DID at CDRH-FOISTATUS@fda.hhs.gov or call 301-796-8118.

Blackwell, Angela

From:

Blackwell, Angela

Sent:

Friday, December 07, 2001 3:24 PM

To:

'Otterbrookeng@aol.com'

Subject:

k013056

Ms. Cox:

Your indications for use statement needs to be changed to remove the reference to ageing and the reference to medication. These are not indications of the predicate device. Please send this ASAP since the document is due Monday. Please make sure a paper copy of everything you have sent by fax or email is sent in (I don't have to have the paper copy to close the file but I must know that it is on it's way).

Angela Blackwell

Dragon's Lair, 1 Alder Brook, Chinley, High Peak SK23 6DN Tel: +44 (0) 1663 750 410 Fax: +44 (0) 1663 751 449

Email: otterbrookeng@aol.com





То:	Angela Blackwell	From:	Priscilla Cox	
Fax:	001 301 480 3002	Pages:	2	
Phone:	001 301 827 5283 ext 119	Date:	12/03/01	
Re:	K013056	CC:		
□ Urge	nt 🗵 For Review	☐ Please Comment	☐ Please Reply	☐ Please Recycle
Ms. Blackwell,				
Thank you for your fax regarding K013056, Gelclair Concentrated Oral Gel. The information sent yesterday had some errors in the percentages. Please find the corrected version following. If you will send your email address I can send an electronic copy. Other wise a hard copy will be sent by mail. If you have any further questions, please contact me at your earliest convenience.				
Regards,				
Priscill	a Cox			
For Sinclair Pharmaceuticals				
Surrey, England				

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INGREDIENT	% NEAT	% DILUTED	FUNCTION	CFR 21 REFERENCE	LEGALLY MARKETED PRODUCTS
PURIFIED WATER				N _P	ABREVA ® COLD SORE MEDICINE / GLAXOSMITHKLINE
POLYVINYLPYRROLIDONE (PVP)				173.55	RADIACARE™ ORAL RINSE / 5 K96482 / CARRINGTON LABS \$
MALTODEXTRIN				184.1444	MULTIDEX® GEL WOUND DRESSING / K961085 / DEROYAL
PROPYLENE GLYCOL				184.1666	~
PEG-40 HYDROGENATED CASTOR OIL				178.3280	THERA BREATH ORAL RINSE / FRESH START, LLC
HYDROXYETHYLCELLULOSE				172.874	VIRACTIN® COLD SORE & FEVER BLISTER MEDICATION / J.B.
POTASSIUM SORBATE	on			182.3640	RETM ORAL RINSE / CARRINGTON LABS
SODIUM BENZOATE	ormati			184.1733	EDE
BENZALKONIUM CHLORIDE	ary Inf			310.545	VISINE® ADVANCED RELIEF EYE DROPS / PFIZER
FLAVOUR (LICORICE)	oprieta			172.515	ADVANCE BREATH CARE ORAL RINSE / ARM & HAMMER
DISODIUM EDETATE	nd Pro			172.135	VISINE® ADVANCED RELIEF EYE DROPS / PFIZER
SODIUM HYALURONATE	dential a			NA	*STAARVISC II / P000046 / ANIKA THERAPEUTICS & P8100125 / BAUSCH & LOMB
SACCHARIN SODIUM	Confi			180.37	ACT® FLUORIDE ORAL RINSE /
GLYCYRRHETINIC ACID	(b)(4)			582.10	CHEWABLE LICORICE TABLET / A RX VITAMINS INC

^{*} Staarvisc II is 12 mg per ml of high molecular weight (> 1MM Daltons) sodium hyaluronate. P000046 references P8100125. It is supplied sterile, non pyrogenic, viscoelastic, highly purified and dissolved in physiologic saline. The device is indicated for use during surgery in the anterior and posterior segments of the human eye. Gelclair sodium hyaluronate is .00027 mg per ml of Gelclair at label indication.

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510(k) #K013056 Additional Information

INGREDIENT	% NEAT	% DILUTED	FUNCTION	CFR 21 REFERENCE	LEGALLY MARKETED PRODUCTS
PURIFIED WATER				NA	ABREVA ® COLD SORE MEDICINE GLAXOSMITHKLINE
POLYVINYLPYRROLIDONE (PVP)				(dd) 1.273.55	RADIACARETM ORAL RINSE / K96482 / CARRINGTON LABS
MALTODEXTRIN					MULTIDEX® GEL WOUND DRESSING / K961085 / DEROYAL
DROBY ENE GLYCOL	,				ABREVA ® COLD SORE MEDICINE
FROFTLENE GLYCOL				٠,	GLAXOSMITHKLINE
PEG-40 HYDROGENATED				178 33	THERA BREATH TM ORAL RINSE
CASTOR OIL				food contact exticle	FRESH START, LLC
				1 marin	VIRACTIN® COLD SORE & FEVER
HYDROXYETHYLCELLULOSE				172.874	BLISTER MEDICATION / J.B.
				Thirtemer Assert	WILLIAMS
DOTASSI M SOBBATE	1			182 3640	RADIACARETM ORAL RINSE /
	tior			CKHS CE. SOTO	K96482 / CARRINGTON LABS
SODIUM BENZOATE	orma			2,1% 184.1733 food	BIOTENE MOUTHWASH / LACLEDE INC.
RENZAL KONILIM CHI ORIDE	/ Int			gandry divis	VISINE® ADVANCED RELIEF EYE
	tar			(7)	DROPS / PFIZER
FLAVOUR (LICORICE)	oprie			172.515 2 2 2 2 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2	ADVANCE BREATH CARE ORAL RINSE / ARM & HAMMER
DISODIUM EDETATE	nd Pr			172.135	VISINE® ADVANCED RELIEF EYE
	al a				*STAARVISC II / P000046 / ANIKA
SODIUM HYALURONATE	enti			NA	THERAPEUTICS & P8100125 /
	fide				BAUSCH & LOMB
SACCHARIN SODIUM) Con			allowed 180.37 Food	ACT® FLUORIDE ORAL RINSE
GLYCYRRHETINIC ACID	(b)(4			582.10	CHEWABLE LICORICE TABLET / RX VITAMINS INC
6/4czrrhiza	GRAS		rhiza GRAS		

* Staarvisc II is 12 mg per ml of high molecular weight (> 1MM Daltons) sodium hyaluronate. P000046 references P8100125. It is supplied sterile, non pyrogenic, viscoelastic, highly purified and dissolved in physiologic saline. The device is indicated for use during surgery in the anterior and posterior

segments of the human eye. Gelclair sodium hyaluronate is .00027 mg per ml of Gelclair at label indication.

Records processed under FOIA Request #2016-3977; Released by CDRH on 08-29-2016.

Dragon's Lair, 1 Alder Brook, Chinley, High Peak SK23 6DN Tel: +44 (0) 1663 750 410 Fax +44 (0) 1663 751 449 Email: otterbrookeng@aoi.com

Otter Brook Engineering



□ Urge	ent 🗵 For Review	☐ Please Comment	☐ Please Reply	☐ Please Recycle
Re:	K013056	CC:		
Phone:	001 301 827 5283 ext 1	9 Date:	30/11/01	
Fax:	001 301 480 3002			
		Pages:	2	
To:	Angela Blackwell	From:	Priscilla Cox	
			am to all a Case	

Ms. Blackwell,

Thank you for your fax regarding K013056, Gelclair Concentrated Oral Gel. The information sent yesterday had some errors in the percentages. Please find the corrected version following. If you will send your email address I can send an electronic copy. Other wise a hard copy will be sent by mail. If you have any further questions, please contact me at your earliest convenience.

Regards,

Priscilla Cox

For Sinclair Pharmaceuticals

Surrey, England

Additional Information

510(k) #K013056

Attn: Angela Blackwell

	PA MEAT	% DII LITED	FUNCTION	CFR 21 REFERENCE	LEGALLY MARKETED PRODUCTS
NGREDIENT	% NCAI	A DEGLE			ABBEVA @ COLD SORE MEDICINE /
			J)(4	¥ 2	GLAXOSMITHKLINE
PURIFIED WATER					RADIACARETM ORAL RINSE /
POLYVINYLPYRROLIDONE			OH	1/3.55	K96482 / CARRINGTON LABS
(PVP)			lue		MULTIDEX® GEL WOUND
MALTODEXTRIN			Hud	104. 1444	DRESSING / K961085 / DEKOYAL
ואשרו סמבע וואיי			al c		ABREVA @ COLD SORE MEDICINE /
LOOK IS BUSINESS			ario	184.1000	GLAXOSMITHKLINE
TROPI LEINE GLICOL			1151		THERA BREATH TM ORAL RINSE /
PEG-40 HYDROGENATED			ЮР	178.3280	FRESH START, LLC
CASTOR OIL					VIRACTIN® COLD SORE & FEVER
			ary	172.874	BLISTER MEDICATION / J.B.
HYDROXYETHYLCELLULOSE			/ 111		WILLIAMS
			IIOI		RADIACARETM ORAL RINSE /
TIVODO O MI HOO A TOO			IIIa	182.3640	K96482 / CARRINGTON LABS
PO (Assign) sons			HIO	10 10 to 10 10 10	BIOTENE MOUTHWASH / LACLEDE
SOUL IN BENZOATE				184.1/33	INC.
SOUICINI DENZONIE				L C C C	VISINE® ADVANCED RELIEF EYE
BENZALKONII IM CHI OBIDE				g	DROPS / PFIZER
DENCAL NOW ON THE COMPANY					ADVANCE BREATH CARE ORAL
Et Ayou to (Licobice)				1/2.515	RINSE / ARM & HAMMER
PLAVOOR (FIGUROF)				470 40E	VISINE® ADVANCED RELIEF EYE
DISODILIM EDETATE				172.133	DROPS / PFIZER
					*STAARVISC II / P000046 / ANIKA
				N N	THERAPEUTICS & P8100125 /
SODIUM HYALURONATE					BAUSCH & LOMB
				75 081	ACT® FLUORIDE ORAL RINSE /
SACCHARIN SODIUM				20.00	J&J
				582 10	CHEWABLE LICORICE 1 ABLE!
GI YCYRRHETINIC ACID					KX VITAMINS INC

* Staarvisc II is 12 mg per ml of high molecular weight (> 1MM Daltons) sodium hyaluronate. P000046 references P8100125. It is supplied sterile, non pyrogenic, viscoelastic, highly purified and dissolved in physiologic saline. The device is indicated for use during surgery in the anterior and posterior segments of the human eye. Gelclair sodium hyaluronate is ,00027 mg per ml of Gelclair at label indication.

30 Nov 01 13:39 Priscilla Cox Records processed under FOIA Request #2016-3977; Released by CDRH on 08-29-2016.

Dragon's Lair, 1 Alder Brook, Chinley, High Peak SK23 6DN Tel: +44 (0) 1663 750 410 Fax: +44 (0) 1663 751 449 Email: otterbrookeng@aol.com





To:	Ange	la Blackwell	From:	Priscilla Cox	
Fax:	001 3	301 480 3002	Pages:	2	
Phone:	001 3	301 827 5283 ext 11	9 Date:	30/11/01	
Re:	K013	056	CCı		
☐ Urge	ent		☐ Please Comment	☐ Please Reply	☐ Please Recycle
			and the second s	Topic dist.	

Ms. Blackwell,

Thank you for your fax regarding K013056, Gelclair Concentrated Oral Gel. The information sent vesterday had some errors in the percentages. Please find the

Records processed under FOIA Request #2016-3977; Released by CDRH on 08-29-2016.

Dragon's Lair, 1 Alder Brook, Chinley, High Peak SK23 6DN Tel: +44 (0) 1663 750 410 Fax: +44 (0) 1663 751 449 Email: otterbrookeng@aol.com

Otter Brook Engineering



To:	Ange	ela Blackwell	From	Priscilla Cox	
Fax:	001	301 480 3002	Pages:	2	
Phone:	001	301 827 5283 ext 11	9 Date:	29/11/01	
Re:	K013	3056	CC:	et (40 weges	
□ Urge	ent	☑ For Review	☐ Please Comment	☐ Please Reply	☐ Please Recycle
			and the second s		

Ms. Blackwell,

Thank you for your fax regarding K013056, Gelclair Concentrated Oral Gel. The information you requested is following. If you will send your email address I can send an electronic copy. If you have any further questions, please contact me at your earliest convenience.

Regards,

For Sinclair Pharmaceuticals

Surrey, England

Additional Information

510(k) #K013056

Attn: Angela Blackwell

		;	CONFIDENTIAL		
INGREDIENT	% NEAT	% DILUTED	FUNCTION	CFR 21 REFERENCE	LEGALLY MARKETED PRODUCTS
PURIFIED WATER				ΨN	ABREVA ® COLD SORE MEDICINE A GLAXOSMITHKLINE
POLYVINYLPYRROLIDONE			, 00	173.55	RADIACARETM ORAL RINSE / K96482 / CARRINGTON LABS
(PVP)				184.1444	MULTIDEX® GEL WOUND DRESSING / K961085 /DEROYAL
PROPYLENE GLYCOL			a. a.i.a	184.1666	ABREVA ® COLD SORE MEDICINE / GLAXOSMITHKLINE
PEG-40 HYDROGENATED				178.3280	THERA BREATH™ ORAL RINSE / FRESH START, LLC
CASTOR OIL HYDROXYETHYLCELLULOSE			.o.u.,	172.874	VIRACTING COLD SORE & FEVER BLISTER MEDICATION / J.B.
POTASSIUM SORBATE				182.3640	RADIACARETM ORAL RINSE / K96482 / CARRINGTON LABS
Sonium Benzoate				184.1733	BIOTENE MOUTHWASH / LACLEDE INC.
BENZAL KONIUM CHLORIDE	and the second s			310.545	VISINE® ADVANCED RELIEF EYE DROPS / PFIZER
FLAVOUR (LICORICE)				172.515	ADVANCE BREATH CARE ORAL RINSE / ARM & HAMMER
DISODIUM EDETATE				172.135	VISINE® ADVANCED RELIEF EYE DROPS / PRIZER
SODIUM HYALURONATE				Ą Z	*STAARVISC II / P000046 / ANIKA THERAPEUTICS & P8100125 / BAUSCH & LOMB
SACCHARIN SODIUM				180.37	ACT® FLUORIDE ORAL RINSE. J&J
GI VOYRRHETINIC ACID				582.10	CHEWABLE LICORICE TABLET / RX VITAMINS INC

* Staarvisc II is 12 mg per ml of high molecular weight (> 1MM Daltons) sodium hyaluronate. P000046 references P8100125. It is supplied sterile, non pyrogenic, viscoelastic, highly purified and dissolved in physiologic saline. The device is indicated for use during surgery in the anterior and posterior segments of the human eye. Gelclair sodium hyaluronate is ,00027 mg per ml of Gelclair at label indication.

Records processed under FOIA Request #2016-3977; Released by CDRH on 08-29-2016.

TX REPURT HORE *****

TRANSMISSION OK

TX/RX NO

CONNECTION TEL

SUBADDRESS

CONNECTION ID

ST. TIME

USAGE T PGS.

RESULT

1182

9011441663751449

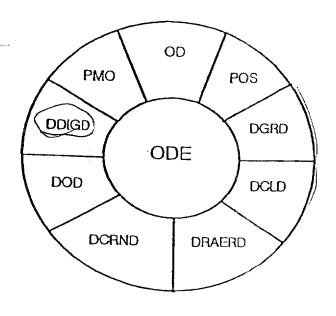
11/28 02:24

00'41

2

OK

DHHS/PHS/FDA/CDRH DIVISION OF DENTAL, INFECTION CONTROL, AND GENERAL HOSPITAL DEVICES 9200 CORPORATE BOULEVARD, HFZ-480 ROCKVILLE, MARYLAND 20850



DATE: 11/28 /2001

FROM: Angela Blackwell

NO. OF PAGES:

PHONE NO: 301-443-8879

FAX NO: 301-480-3002

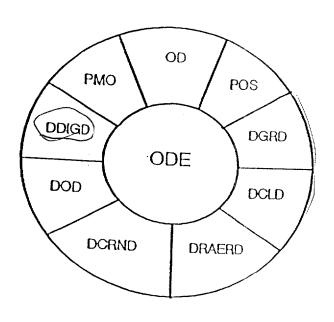
TO: Priscilla Cox

FAX NO: 9 011 44 1663 751 449

SUBJECTuestions? Comactifly And CE/DID at CDRH-FOISTATUS@fda.hhs.gov or call 301-796-8118.

Records processed IDHH Solves Pars Pars From Adv CDB 8 29-2016.

DIVISION OF DENTAL, INFECTION CONTROL, AND GENERAL HOSPITAL DEVICES 9200 CORPORATE BOULEVARD, HFZ-480 ROCKVILLE, MARYLAND 20850



DATE: 11/28 /2001

FROM: Angela Blackwell

NO. OF PAGES: 2

PHONE NO: 301-443-8879

FAX NO: 301-480-3002

TO: Priscilla Cox

FAX NO: 9 011 44 1663 751 449

SUBJECT: K0/3056

ADDITIONAL COMMENTS:

THIS DOCUMENT IS INTENDED ONLY FOR THE USE OF THE PARTY TO WHOM IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND PROTECTED FROM DISCLOSURE UNDER APPLICABLE LAW. If you are not the addressee, or a person authorized to deliver the document to the addressee, you are hereby notified that any review, disclosure, dissemination or other action based on the content of the communication is not authorized. If you have received this document in error, please immediately notify us by telephone and return it to us at the above address by mail. Thank you.

Fax Memorandum

To: Priscilla Cox

Company: Sinclair Pharmaceuticals

Document No.: K013056

Device: Gelclair Concentrated Oral Gel

From: Angela Blackwell Date: November 28, 2001

Ms. Cox,

I am reviewing your 510(k) for Gelclair. My email is down today so I must fax instead. I need to know the complete chemical composition of the gel, including the percentage of each component. For each component I need information on another product marketed legally in the U.S. which contains the same ingredient. If there is a U.S. code of federal regulations (cfr) reference allowing the use of the component in drug, foods, cosmetics, etc. then please give me the reference.

Thank you, Angela Blackwell Biomedical Engineer Dental Devices Branch (301) 827-5283 ext 119 **Screening Checklist**

For all Premarket Notification	510	(K)	DANI	111221	OHS	3-30-01
Device Name: Lel Clair Concentrated (hal	H			KOL	3056
Submitter (Company): Silaw Marma	cent	ical	De ,	(JC	<u>d </u>	
Items which should be included (circle missing & needed information)	S P E C I A L	NO	B B R E V I A T E D		R A D I I O N A L YES NO	✓ IF ITEM IS NEEDED AND IS MISSING
 1. Cover Letter clearly identifies Submission as: a) "Special 510(k): Device Modification" b) "Abbreviated 510(k)" c) Traditional 510(k) 	60 ТО # 2,3		GO TO # 2,4,5	ego e ego e e e e e e e e e e e e e e e e e e e	GO TO #2, 5	,,,,,,
						/ IF ITEM IS
2. GENERAL INFORMATION: REQUIRED IN ALL 510(K) SU Financial Certification or Disclosure Statement for 510(k)s with a Clinical Study 807.87(i) including forms 3454 and/or 3455	SPEC		YE		NO TRADITIONAL	NEEDED AND IS
	YES	NO	YES	NO	YES NO	MISSING
a) trade name, classification name, establishment registration						
number device class	FDA-n	nav be	a classi	fication	request; see	coordinator
b) OR a statement that the device is not yet classified	N					
c) identification of legally marketed equivalent device	N					
d) compliance with Section 514 - performance standards						
e) address of manufacturer						
f) Truthful and Accurate Statement	-					
g) Indications for Use enclosure	<u> </u>					
h) SMDA Summary or Statement (FOR ALL DEVICE CLASSES)				1		
i) Class III Certification & Summary (FOR ALL CLASS III DEVICES)	<u> </u>			1		
Description of device (or modification) including diagrams,	Ì					
engineering drawings, photographs, service manuals	-					
k) Proposed Labeling:	-					Facilities and Facilities
i) package labeling (user info)						
ii) statement of intended use iii) advertisements or promotional materials						
control (if a aim od)						
- Information (cimilarities and differences) to flamed					1 /	
legally marketed equivalent device (table preferred) should include:	 	-			1 4	
i) Labeling				1		
ii) intended use	+					
iii) physical characteristics	1					
iv) anatomical sites of use v) performance (bench, animal, clinical) testing	N	IA.				
vi) performance (benich, aritmar, climear) to vi) safety characteristics	1	ĮA.	<u> </u>	-		
and the state of t			<u> </u>		VED 01 100 1	DEVICE
3 "SPECIALS" - ONLY FOR MODIFICATIONS TO MANUFACTURER'S	OWN C	LASS I	, III OR	RESER	VED CLASS I	DEVICE
a) Name & 510(k) number of legally marketed						
(unmodified) predicate device						
b) STATEMENT - INTENDED USE AND INDICATIONS FOR USE OF MODIFIED DEVICE AS DESCRIBED IN ITS			* If no	- STOP n	ot a special	
Questions? Contact FDA/CDRH/OCE/DID at CDRH-FOISTATUS@fda.	nhs.gov	or call 3	01-796-	3118		Page 1

	LABELING HAVE NOT CHANGED*	* If no - STOP not a special	
c)	SELECT SUMPAMENTAL SCIENTIFIC		
	TECHNOLOGY OF THE MODIFIED DEVICE HAS NOT		
	CHANGED*		
d)	Design Control Activities Summary		
	1 Identification of Risk Analysis method(s) used to		
	impact of the modification of the		
ŀ	device and its components, and the results of the		
l	-naturaio		
	ii) Based on the Risk Analysis, an identification of		* :
	the verification and/or validation activities		
	required, including methods or tests used and	· 	
Ì	acceptance criteria to be applied		
	iii) A doctaration of conformity with design controls.		
	The declaration of conformity should include.		
	1) A statement signed by the individual		
l	responsible that as required by the non		
1	analysis all verification and validation		
1	activities were performed by the designated		
	individual(s) and the results demonstrated	*	
1	that the predetermined acceptance criteria		
	were met		
1	2) A statement signed by the individual		
	recognition that manufacturing facility is in		
	conformance with design control procedure		
1	Poquirements as specified in 21 CFR 620.30		
	and the records are available for review.		

SPECIALS ABBREVIATED TRADITIONAL NO YES NO MISSING									
4. ABBREVIATED 510(K): SPECIAL CONTROLS/CONFORMANCE TO RECOGNIZED STANDARDS - PLEASE FILL OUT THE STANDARDS ABBREVIATED FORM ON THE H DRIVE a) For a submission, which relies on a guidance document and/or special control(s), a summary report that describes how the guidance and/or special control(s) was used to address the risks associated with the particular device type b) If a manufacturer elects to use an alternate approach to address a particular risk, sufficient detail should be provided to justify that approach. c) For a submission, which relies on a recognized standard, a declaration of conformity to the standard. The declaration should include the following: i) An identification of the applicable recognized consensus standards that were met ii) A specification, for each consensus standard, that all requirements were met, except for inapplicable requirements or deviations noted below		30014				-			
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a) For a submission, which relies on a guidance document and/or special control(s), a summary report that describes how the guidance and/or special control(s) was used to address the risks associated with the particular device type b) If a manufacturer elects to use an alternate approach to address a particular risk, sufficient detail should be provided to justify that approach. c) For a submission, which relies on a recognized standard, a declaration of conformity to the standard. The declaration should include the following: i) An identification of the applicable recognized consensus standards that were met ii) A specification, for each consensus standard, that all requirements were met, except for inapplicable requirements or deviations noted below	4	ABBREVIATED 510(K): SPECIAL CONTROLS/CONFORMAL	NCE TO	O REC	OGNIZI	-D 217	MUAR	(D3 - F	LLAGE
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ii) A specification, for each consensus standard, that all requirements were met, except for inapplicable requirements or deviations noted below	l	consensus standards that were met]				4		
that all requirements were met, except for inapplicable requirements or deviations noted below		ii) A specification, for each consensus standard,			ļ				
inapplicable requirements or deviations noted below	1	that all requirements were met, except for							
below		inapplicable requirements or deviations noted					1		
							-		
			hba a=:	, or oc!!	204 700	0110			

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any way(s) in which the standard may have been adapted for application to the device under review, e.g., an identification of an alternative series of tests that were performed	
 iv) An identification, for each consensus standard, of any requirements that were not applicable to the device 	
 v) A specification of any deviations from each applicable standard that were applied 	
 vi) A specification of the differences that may exist, if any, between the tested device and the device to be marketed and a justification of the test results in these areas of difference 	
vii) Name/address of test laboratory/certification body involved in determining the conformance of the device with applicable consensus standards and a reference to any accreditations for those organizations	
 d) Data/information to address issues not covered by guidance documents, special controls, and/or recognized standards 	

5. Additional Considerations: (may be covered by De	sign Contro	ls)	
a) Biocompatibility data for all patient-contacting materials,			
OR certification of identical material/formulation:			
i) component & material			
ii) identify patient-contacting materials			
iii) biocompatibility of final sterilized product			
b) Sterilization and expiration dating information:			
i) sterilization method			
ii) SAL			
iii) packaging			
iv) specify pyrogen free			
v) ETO residues			
vi) radiation dose			
c) Software validation & verification:			
i) hazard analysis			
ii) level of concern			
iii) development documentation			
iv) certification			MARCIN RECURSOR

n the "Needed & Missing" column must b	or that type of submission. Circled items and items with checks be submitted before acceptance of the document.
Passed Screening YesNo Date:SEP_1 4	Reviewer:Concurrence by Review Branch:

REVISED: 3/14/95

THE 510(K) DOCUMENTATION FORMS ARE AVAILABLE ON THE LAN UNDER 510(K) BOILERPLATES TITLED "DOCUMENTATION" AND MUST BE FILLED OUT WITH EVERY FINAL DECISION (SE, NSE, NOT A DEVICE, ETC.).

"SUBSTANTIAL EQUIVALENCE" (SE) DECISION MAKING DOCUMENTATION

	. K		
Revie	ewer:		
Divis	sion/Branch:		
Devi	ce Name:		
Produ	act To Which Compared (510(K) Number If	Known):	
		YES NO	
1.	Is Product A Device		If NO = Stop
2.	Is Device Subject To 510(k)?		If NO = Stop
3.	Same Indication Statement?		If YES = Go To 5
4.	Do Differences Alter The Effect Or Raise New Issues of Safety Or Effectiveness?		If YES = Stop NE
5.	Same Technological Characteristics?		If YES = Go To 7
6.	Could The New Characteristics Affect Safety Or Effectiveness?		If YES = Go To 8
7.	Descriptive Characteristics Precise Enough?		If NO = Go To 10 If YES = Stop SE
8.	New Types Of Safety Or Effectiveness Questions?		If YES = Stop NE
9.	Accepted Scientific Methods Exist?		If NO = Stop NE
10.	Performance Data Available?		If NO = Request Data
11.	Data Demonstrate Equivalence?		Final Decision:

Note: In addition to completing the form on the LAN, "yes" responses to questions 4, 6, 8, and 11, and every "no" response requires an explanation.

- 1. Intended Use:
- 2. Device Description: Provide a statement of how the device is either similar to and/or different from other marketed devices, plus data (if necessary) to support the statement. Is the device life-supporting or life sustaining? Is the device implanted (short-term or long-term)? Does the device design use software? Is the device sterile? Is the device for single use? Is the device over-the-counter or prescription use? Does the device contain drug or biological product as a component? Is this device a kit? Provide a summary about the devices design, materials, physical properties and toxicology profile if important.

EXPLANATIONS TO "YES" AND "NO" ANSWERS TO QUESTIONS ON PAGE 1 AS NEEDED

- Explain why not a device:
- Explain why not subject to 510(k):
- 3. How does the new indication differ from the predicate device's indication:
- 4. Explain why there is or is not a new effect or safety or effectiveness issue:
- 5. Describe the new technological characteristics:
- 6. Explain how new characteristics could or could not affect safety or effectiveness:
- 7. Explain how descriptive characteristics are not precise enough:
- 8. Explain new types of safety or effectiveness questions raised or why the questions are not new:
- 9. Explain why existing scientific methods can not be used:
- 10. Explain what performance data is needed:
- 11. Explain how the performance data demonstrates that the device is or is not substantially equivalent:

ATTACH ADDITIONAL SUPPORTING INFORMATION

Internal Administrative Form

	YES	NO
the Aroutous?		Consession and the same of the
1. Did the firm request expedited review?		"Han market and a state of the
t and adited roughly		مانیات و در مانیدی است. معاون
 Did we grant expedited review: Have you verified that the Document is labeled Class III for GMP 		· Designation of the second
nurnoses?		%.15Apt***
4. If, not, has POS been notified?	 	
5 Lethe product a device?		Comment
6 Is the device exempt from 510(k) by regulation of policy.		
and the review by CDRH/	\vdash	
 Is the device subject to review by OBTATE Are you aware that this device has been the subject of a previous NSE 		
design?		Language
9. If yes, does this new 510(k) address the NSE issue(s), (e.g.,	İ	L. married
(sumanas data)?		
performance data)? 10. Are you aware of the submitter being the subject of an integrity		
10. Are you aware of the submitter being the say,		
investigation?		
11. If, yes, consult the ODE Integrity Officer.	1,000	
11. If, yes, consult the OBE integrity of the state of th		land.
review? (Blue Book Memo #I91-2 and Federal Register 90N0332,		
September 10, 1991.		- CONTRACTOR

Food and Drug Administration Center for Devices and Radiological Health Office of Device Evaluation Document Mail Center (HFZ-401) 9200 Corporate Blvd. Rockville, Maryland 20850

September 12, 2001

ATTN: PRISCILLA COX

SINCLAIR PHARMACEUTICALS, LTD.
C/O OTTERBROOK ENGINEERING
1 ALDER BROOK
CHINLEY, HIGH PEAK,
UNITED KINGDOM

510(k) Number: K013056
Received: 11-SEP-2001
Product: GELCLAIR

CONCENTRATED ORAL

GEL

The Center for Devices and Radiological Health (CDRH), Office of Device Evaluation (ODE), has received the Premarket Notification you submitted in accordance with Section 510(k) of the Federal Food, Drug, and Cosmetic Act (Act) for the above referenced product. We have assigned your submission a unique 510(k) number that is cited above. Please refer prominently to this 510(k) number in any future correspondence that relates to this submission. We will notify you when the processing of your premarket notification has been completed or if any additional information is required. YOU MAY NOT PLACE THIS DEVICE INTO COMMERCIAL DISTRIBUTION UNTIL YOU RECEIVE A LETTER FROM FDA ALLOWING YOU TO DO SO.

As a reminder, we would like to mention that FDA requires all 510(k) submitters to provide an indications for use statement on a separate page. If you have not included this indications for use statement in addition to your 510(k) summary (807.92), or a 510(k) statement (807.93), and your Truthful and Accurate statement, please do so as soon as possible. If the above mentioned requirements have been submitted, please do not submit them again. There may be other regulations or requirements affecting your device such as Postmarket Surveillance (Section 522(a)(1) of the Act) and the Device Tracking regulation (21 CFR Part 821). Please contact the Division of Small Manufacturers, International and Consumer Assistance (DSMICA) at the telephone or web site below for more information.

Please remember that all correspondence concerning your submission MUST be sent to the Document Mail Center (DMC)(HFZ-401) at the above letterhead address. Correspondence sent to any address other than the DMC will not be considered as part of your official premarket notification submission. Because of equipment and personnel limitations, we cannot accept telefaxed material as part of your official premarket notification submission, unless specifically requested of you by an FDA official. Any telefaxed material must be followed by a hard copy to the DMC (HFZ-401).

You should be familiar with the manual entitled, "Premarket Notification 510(k) Regulatory Requirements for Medical Devices" available from DSMICA. If you have other procedural or policy questions, or want information on how to check on the status of your submission (after 90 days from the receipt date), please contact DSMICA at (301) 443-6597 or its toll-free number (800) 638-2041, or at their Internet address http://www.fda.gov/cdrh/dsmamain.html or me at (301) 594-1190.

Sincerely yours,

Marjorie Shulman
Consumer Safety Officer
Premarket Notification Staff
Office of Device Evaluation
Questions? Contact FDA/CDRH/OCE/DID at CDRH-FOISTATUS@fda.hhs.gov or call 301-796-8118.





Sinclair Pharmaceuticals Limited Borough Road, Godalming, Surrey, UK, GU7 2AB

September 6, 2001

Document Mail Center (HFZ-401) Food and Drug Administration (FDA) Center for Devices and Radiological Health (CDRH) Office of Device Evaluation 9200 Corporate Blvd. Rockville, MD 20850

Subject:

510(k) Submission for Sinclair Pharmaceuticals, Ltd.

Gelclair® Concentrated Oral Gel

Dear 510(k) review staff.

In accordance with Section 510(k) of the Federal Food, Drug, and Cosmetic Act, and 21 CFR 807.87, Sinclair Pharmaceuticals, Ltd. is submitting, in duplicate, a Premarket Notification 510(k) for Sinclair Pharmaceuticals, Ltd. Gelclair® Concentrated Oral Gel.

Confidentiality

We regard our intent to market this product as confidential. The existence of this 510(k) has not been revealed to anyone other than our employees. Therefore we request that the Agency not disclose this intent until the 510(k) clearance is granted.

All items marked "Confidential" may be trade secret, confidential commercial or financial information as defined in 21 CFR 20.61. We request that the Agency not make public disclosure of this information without prior consultation with Sinclair Pharmaceuticals, Ltd. as provided by 21 CFR 20.45.

We would appreciate your earliest attention to this 510(k) and we trust that the information provided will enable the Agency to reach a substantial equivalence determination. Should you have any questions, please contact me via phone at 011 44 1663 750 410, fax at 011 44 1663 751 449, or email at pwcox@cwcom.net.

Sincerely.

Priscilla Cox

PWCox

Director RA/QA

Otterbrook Engineering

510(k) Submission for Sinclair Pharmaceuticals Gelclair® Concentrated Oral Gel Enclosure:

Sinclair Pharmaceuticals, Ltd

510(k) for Geldair Concentrated Oral Gel





510(k) Pre-market Notification

Sinclair Pharmaceuticals, Ltd Gelclair® Concentrated Oral Gel

Sinclair Pharmaceuticals, Ltd. Borough Road Godalming Surrey GU7 2AB United Kingdom

Tel: +44 01483 426 644 Fax: +44 01483 427 633

Sinclair Pharmaceuticals, Ltd

510(k) for Gelclair Concentrated Oral Gel



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I. CDRH Submission Cover Sheet

Date Of submission: September 6, 2001 FDA Document Number:							
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PMA	PMA	PDP	510(k)	Meeting			
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Submission	Regular	summary	Submission	☐ Pre-PDP			
☐ Modules	☐ Special	☐ Original PDP	☐ Traditional ☐ Abbreviated	☐ 180-day			
Submission	☐ Panel Track	☐ Notice of		meeting			
☐ Amendment	☐ 30-day	Intent to	☑ Special ☐ Additional	Other			
Report	Supplement	start clinical trials	information	(specify)			
☐ Report	☐ 135-day	☐ Intention to	☐ Traditional	(specify)			
Amendment	Supplement Real time	submit Notice	☐ Abbreviated				
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Division name (if a			Phone number: +44 01483 426 644				
Street Address: Bo		The state of the s	Fax number: +44 01483 427 633				
City: Godalming	Surrey GU7 2AB	State: NA	Country: UK				
Contact Name: De			T 1.1				
Contact Title: Dire	ector of Regulatory	Affairs	Contact e-mail address:				
	THE STATE OF THE S		dswift@sinclairpl				
Control of the state of the sta							
Company Name: Otterbrook Engineering			Establish registration				
Division name (if a		A CONTRACTOR OF THE PROPERTY O	Phone number: +44				
Street Address: 1 /		State: NA	Fax number: +44 1	003 /31 449			
	h Peak SK23 6DN	Country: UK					
Contact Name: Priscilla Cox							
Contact Title: Dire	ector QA/RA		Contact e-mail address:				
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Sinclair Pharmaceuticals, Ltd

510(k) for Geldair Concentrated Oral Gel



		P. C. LOB
☐ New Device:	☐ Change in design,	☐ Location Change:
☐ Withdrawal	component, or specifications:	☐ Manufacturer
☐ Additional or expanded	☐ software	☐ Sterilizer
indications	☐ Color Additive	☐ Packager
☐ Licensing agreement	☐ Material	☐ Distributor
_ Elocation g uga comment	☐ Specifications	
	☐ Other (specify below)	
☐ Process Change:	☐ Labeling change:	Report Submissions:
☐ Manufacturing	☐ Indications	
☐ Sterilization	☐ Instructions	☐ Annual or periodic
☐ Packaging	☐ Performance	☐ Post-approval study
☐ Other (specify below)	characteristics	☐ Adverse reaction
	☐ Shelf life	☐ Device defect
	☐ Trade Name	☐ Amendment
	☐ Other (specify below)	
☐ Response to FDA correspond		☐ Change in ownership
☐ Request for applicant hold		☐ Change in correspondent
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☐ Request to remove or add	manufacturing site	
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☐ New device	☐ Change in:	☐ Response to FDA letter
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☐ Expand/Extend Study	☐ Design	☐ Conditional Approval
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☐ Expand/Extend Study ☐ IRB Certification ☐ Request hearing	☐ Design ☐ Informed Consent ☐ Manufacturer	☐ Conditional Approval☐ Deemed Approval☐ Deficient final report
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☐ Expand/Extend Study ☐ IRB Certification ☐ Request hearing ☐ Request waiver ☐ Termination of Study	☐ Design ☐ Informed Consent ☐ Manufacturer ☐ Manufacturing Process ☐ Protocol - Feasibility	☐ Conditional Approval ☐ Deemed Approval ☐ Deficient final report ☐ Deficient progress report
 □ Expand/Extend Study □ IRB Certification □ Request hearing □ Request waiver 	☐ Design ☐ Informed Consent ☐ Manufacturer ☐ Manufacturing Process ☐ Protocol - Feasibility ☐ Protocol - Other	☐ Conditional Approval ☐ Deemed Approval ☐ Deficient final report ☐ Deficient progress report ☐ Deficient investigator
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☐ Expand/Extend Study ☐ IRB Certification ☐ Request hearing ☐ Request waiver ☐ Termination of Study ☐ Withdrawal of Application ☐ Unanticipated Adverse Event	☐ Design ☐ Informed Consent ☐ Manufacturer ☐ Manufacturing Process ☐ Protocol - Feasibility ☐ Protocol - Other ☐ Sponsor ☐ Report Submission	☐ Conditional Approval ☐ Deemed Approval ☐ Deficient final report ☐ Deficient progress report ☐ Deficient investigator report ☐ Disapproval ☐ Request extension of
 □ Expand/Extend Study □ IRB Certification □ Request hearing □ Request waiver □ Termination of Study □ Withdrawal of Application □ Unanticipated Adverse Event □ Notification of Emergency 	☐ Design ☐ Informed Consent ☐ Manufacturer ☐ Manufacturing Process ☐ Protocol - Feasibility ☐ Protocol - Other ☐ Sponsor ☐ Report Submission ☐ Current Investigator	☐ Conditional Approval ☐ Deemed Approval ☐ Deficient final report ☐ Deficient progress report ☐ Deficient investigator report ☐ Disapproval ☐ Request extension of time to respond to FDA
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☐ Expand/Extend Study ☐ IRB Certification ☐ Request hearing ☐ Request waiver ☐ Termination of Study ☐ Withdrawal of Application ☐ Unanticipated Adverse Event ☐ Notification of Emergency Use ☐ Compassionate Use	☐ Design ☐ Informed Consent ☐ Manufacturer ☐ Manufacturing Process ☐ Protocol - Feasibility ☐ Protocol - Other ☐ Sponsor ☐ Report Submission ☐ Current Investigator ☐ Annual Progress ☐ Site waiver limit	☐ Conditional Approval ☐ Deemed Approval ☐ Deficient final report ☐ Deficient progress report ☐ Deficient investigator report ☐ Disapproval ☐ Request extension of time to respond to FDA
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□ Expand/Extend Study □ IRB Certification □ Request hearing □ Request waiver □ Termination of Study □ Withdrawal of Application □ Unanticipated Adverse □ Event □ Notification of Emergency Use □ Compassionate Use Request □ Treatment IDE □ Continually availability request □ Other reason (specify): □ New device □ Addition or expanded	☐ Design ☐ Informed Consent ☐ Manufacturer ☐ Manufacturing Process ☐ Protocol - Feasibility ☐ Protocol - Other ☐ Sponsor ☐ Report Submission ☐ Current Investigator ☐ Annual Progress ☐ Site waiver limit reached ☐ Final	☐ Conditional Approval ☐ Deemed Approval ☐ Deficient final report ☐ Deficient progress report ☐ Deficient investigator report ☐ Disapproval ☐ Request extension of time to respond to FDA ☐ Request meeting
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Sinclair Pharmaceuticals, Ltd

510(k) for Gelcleir Concentrated Oral Gel



Product codes of devices to which substantial equivalence is			Summary of, or statement		
claimed:			concerning, safety and		
1				effectiveness of	
1 FRO	2 MGQ	3	4		mary attached
5	6	7	8	☐ 510(k) stat	ement
Information on	devices to which	substantial equiv	alence is claimed	1:	
510(k)	Number		oprietary or name		ıfacturer
1 K964852		Radiacare™ (Rinse	Oral Wound	Carrington l	_abs
2					noone and a second
				dikriktation	
	ual or classification				
Dressing, Wo	und & Burn, Hy	drogel w/Drug	or Biologic		
	etary or model na		margier pandarkalistikkiskiskiskiskiskiskiskiskiskiskiskiski	Model Number	
Gelclair® Concentrated Oral Gel			NA		
2					
FDA document numbers of all prior related submissions (regardless of outcome): none			none		
1	2	3	4	5	6
7	8	9	10	11	12
Data included in submission: Laboratory testing Animal trials Human trials Section C: Product Classification Applicable to all Applications					
	Solion & Ten			and the second s	115
Product Code:		C.F.R. section		Device Class:	
MGQ		878.4022		☑ Class I	☑ Class II
	* 0.		Cappe Control of Contr	Class III	☐ Unclassified
Classification panel: General & Plastic Surgery					
Indications (from labeling):					
Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the					
management of pain and relief of pain, by adhering to the mucosal surface of the					
mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis					
(may be caused by chemotherapy or radiotherapy), irritation due to oral surgery,					
ageing and traumatic ulcers caused by braces or ill fitting dentures, medication, or					
disease. Also indicated also for diffuse aphthous ulcers.					
		Washington and the second of t	- Control (September 15 - 15 manus (15 mal) (16 pp province)		



	FDA Document Number:		
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FDA Establishment	☐ Manufacturer	☐ Contract	
Registration Number: NA	☐ Repackager / relabe	ler	
Company / Institution name: Biokosmes SRL		ntion Number:	
able) NA	Phone Number: 011 3	39 0341 36 81 21	
	Fax Number:		
		39 0341 36 81 52	
State:	Country: Italy	Zip Code: 22053	
uti			
Dr. Gianluca Braguti Contact title: Technical Director		:	
FDA Establishment	☐ Manufacturer	☐ Contract	
Registration Number:	☐ Contract Manufactt☐ Repackager / relabe		
Company / Institution name:		Establishment Registration Number:	
able) NA	Phone Number:		
Street Address:		Fax Number:	
State	Country: USA	Zip Code:	
Contact title:		Contact e-mail address:	
	FDA Establishment Registration Number: NA ame: able) NA State: uti FDA Establishment Registration Number: ame: able) NA	FDA Establishment Registration Number: NA ame: Bestablishment Registra NA Country: Italy Bestablishment Registration Number: Bestablishment Registration Number: Bestablishment Registration Number: Bestablishment Registration Number: Bestablishment Registra Bestablishment Registra Bestablishment Registra Bestablishment Regi	

II. Device Name

The device trade names and common/classifications names are:

Device Trade Name	Common/Classification Name
Gelclair® Concentrated Oral Gel	Dressing, Wound & Burn,
	Hydrogel w/Drug or Biologic

III. Address and Registration

The address and registration number of the manufacturer and sterilization sites for the devices are:

Manufacturer	Sterilization Site
Sinclair Pharmaceuticals, Ltd Borough Road Godalming, Surrey GU7 2AB United Kingdom	NA
FDA Registration pending	

IV. Device Class

Class I

V. Predicate Device Information

Trade Name	510(k) Number	SE Date
Radiacare Oral Wound Rinse	K964852	03/03/97



VI. Labeling and Intended Use

A draft, preprinted product pouch, carton and the package insert (which contains Instructions for Use) can be found in Attachment 1.

Intended Use

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, ageing and traumatic ulcers caused by braces or ill fitting dentures, medication, or disease. Also indicated also for diffuse aphthous ulcers.

The Indications for Use statement is included in Attachment 3.

VII. Device Description

Sinclair Gelclair® CONCENTRATED ORAL GEL is a viscous gel comprised of Purified Water, Propylene Glycol, Polyvinylpyrrolidone, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethylcellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid.

Gelclair® CONCENTRATED ORAL GEL has a mechanical action which provides pain relief by adhering to the mucosal surface of the mouth, soothing mouth lesions.

The gel concentrate is provided in a single use 15 ml foil pouches ready to be mixed with 40ml of water for use. The pouch is preprinted with instructions for use.



Equivalence

VIII. Substantial The Sinclair Pharmaceuticals, Ltd Gelclair® CONCENTRATED ORAL GEL is substantially equivalent to Carrington Laboratories Radiacare™ Oral Wound Rinse which is indicated for use for the management of pain associated with oral mucositis / stomatitis caused by radiation therapy and cancer chemotherapy. Predicate device labeling may be found in Attachment 2.

Product Name	Sinclair Pharmaceuticals Gelclair®	Carrington Labs RadiaCare™
Ingredients	Purified Water, Propylene Glycol, Polyvinylpyrrolidone, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethylcellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid	Acemannan hydrogel, Aspartame, Flavor, Fructose, Maltodextrin, Polyvinylpyrrolidone, Potassium Sorbate, Sodium Benzoate
Method of Use	Mix with water	Mix with water
Number of applications per day	Take as needed	Take as needed
Claim	Management and relief of pain, does not sting, nonimitating, safe if swallowed	Management and relief of pain, does not sting, nonirritating, safe if swallowed
Area of Use	Oral Mucosa	Oral Mucosa
Disease State	Oral Mucositis/Stomatitis/Oral Lesions	Oral Mucositis/Stomatitis/Oral Lesions
Type of Product	Concentrate for dilution	Concentrate for dilution
Presentation	Non Sterile	Non Sterile

In summary, the Sinclair Pharmaceuticals, Ltd. Gelclair® CONCENTRATED ORAL GEL described in this submission is, in our opinion, substantially equivalent to the predicate device Carrington Laboratories Radiacare™ Oral Wound Rinse

IX. 510(k) Statement or Summary

The 510(k) Summary is included in Attachment 7.

X. Truthful and Accuracy Certification

A certification of the truthfulness and accuracy of the Sinclair Gelclair® CONCENTRATED ORAL GEL information as described in this submission is included in Attachment 8.



Attachment 1

Labeling & Instructions For Use



For Pain Management and relief of pain caused by Oral Mucositis / Stomatitis which may be associated with chemotherapy or radiation therapy. Also suitable for other types of oral lesions.

Concentrated Oral Gel

15 ml.



Caution: Federal law restricts this device to sale by or on the order of a physician or properly licensed practitioner. Warning: As with all medications, keep out of the reach of children.





Gelclair®, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, ageing and traumatic ulcers caused by braces or ill fitting dentures, medication, or disease. Also indicated also for diffuse aphthous ulcers.

Directions for use: Pour the entire contents of the single-dose Gelclair* sachet into a glass and add 40 ml of water. Stir mixture well and use at once. Rinse around the mouth for at least one minute or as long as possible to coat tongue, palate, throat, inside of cheeks and all oral tissue thoroughly. Gargle and spit out. Use 3 times a day or as needed. Do not eat or drink for at least one hour following treatment. If swallowed accidentally no adverse effects are anticipated.

Best Befo

Manufactured by:

Sinclair Pharmaceuticals Ltd - Borough Road Godalming - Surrey GU7 2AB - England, UK.

CE Medical Device Class I

AP121701/1

= SINCLA!R





Indications and Directions for Use See enclosed leader.

Keep out of the reach of children.

Store at room tempe armed out of direct sunlight. Do not refrigerate.









Concentrated Oral Gel

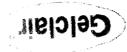
For Pain management and relief of pain caused by Oral Mucositis / Stomatitis which may be associated with chemotherapy or radiation therapy.

Also suitable for other types of oral lesions.

7x15ml Single-dose sachets



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Ingredients

Purified Water Malterlegain, Propytene Glycol, PAR. Sodicarra Hyaluronate. Potassi um Sorbale. Sodicum Benzoate. Hydroxyethykellalese. PEG-4O Hydrogenaid Castor Oil, Disorburs Edetate:, Benzalkon am Chloricle, Aroma, Scocharin Sodiuma, Olycymbolion Acid.



CE Medical Jesser Class I



Caution: Federal law restricts this device to sale by or on the order of a physician or properly licensed practitioner. Warning: As with all medication, keep out of

the reach of children.





Manufactured by:

Sinclary Physical conticals 1 td, Borough Road, Gestal non-Series, CU7-2AB, England, UK.

AP01 301







Gelclair® Concentrated Oral Gel

Ingredients: Purified Water, Maltodextrin, Propylene Glycol, PVP, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethylcellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid.

Patient use form: Concentrated oral gel.

Contents: 15 ml per single-dose sachet. 1 Box contains 21 single dose sachets.

Therapeutic group or type of activity: Oral Gel for the relief of pain.

Indications: Gelclair®, has a mechanical action which provides pain relief by adhering to the mucosal surface of the mouth, soothing mouth lesions caused by chemotherapy, medication, disease, radiotherapy, irritation due to oral surgery, ageing and traumatic ulcers caused by braces and ill fitting dentures. May be used to manage the pain from Oral Mucositis/Stomatitis. Also indicated also for diffuse aphthous ulcers.

Contra-indications: The administration of Gelclair® is contra-indicated in any patient with a known history of hypersensitivity to any of the ingredients.

Special Precautions for use: Avoid eating or drinking for at least one hour after use Do not use any sachet that is not intact (torn, split or otherwise damaged in any way). If no improvement is noticed after 7 days, consult a physician.

Warning: Federal law restricts this device to sale by or on the order of a physician or properly licensed practitioner.

Interactions with other medicinal products and other forms of interaction: There are no known interactions with medicinal or other products.

Directions for use: Pour the entire contents of the single-dose Gelclair®, sachet into a glass and add 40ml or 4 tablespoonfuls of water. Stir mixture well and use at once. Rinse around the mouth for at least one minute or as long as possible to coat tongue, palate, throat, inside of cheeks and all oral tissue thoroughly. Gargle and spit out. Use 3 times a day or as needed. Do not eat or drink for least one hour following treatment. If Gelclair® is swallowed accidentally no adverse effects are anticipated.

In the unlikely event that water is not available, the product may be used undiluted.

Side effects: At the time of producing this leaflet there have been no reported side effects with Gelclair®, however the product is not recommended for use in patients with a known or suspected allergy to any of the product's ingredients.

Store at room temperature, out of direct sunlight. Do not refrigerate.

KEEP OUT OF THE REACH OF CHILDREN.

Please note: The gel may become a little darker and thicker over time, but this does not affect its efficacy or safety. Do not use after the 'Best Before' date shown on the box.

Overdose: At the time of producing this leaflet no cases of overdose have been reported. However, no serious adverse effects should be expected from ingestion of several sachets of Gelclair®.

Manufactured by:

Sinclair Pharmaceuticals, Ltd -Borough Road -Godalming - Surrey GU7 2AB -England, UK.

Date of Revision: June 2001

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Attachment 2

Competitive Labeling

Radiacare ** Oral Wound Rinse

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Attachment 3

Indications for Use Statement

510(k) Number (if known)

Device Name

Sinclair Gelclair® CONCENTRATED ORAL GEL

Indications for Use

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, ageing and traumatic ulcers caused by braces or ill fitting dentures, medication, or disease. Also indicated also for diffuse aphthous ulcers.

PLEASE DO NOT WRITE BELOW THIS LINE- CONTINUE ON ANOTHER PAGE IF NEEDED

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use (per 21 CFR 801.109)	OR	Over-The Counter Use	
			Dago

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Attachment 4

RISK ANALYSIS

LEVELS OF EXPOSURE

The level of exposure is considered to be the quantity of substance, expressed in mg/Kg (milligrams per kilogram), completely absorbed by the user of the product. In the case of Sinclair **Gelclair®** Concentrated Oral Gel, the level of exposure was calculated on 3 daily rinses of 10ml each, working on the hypothesis of absorption equal to 100% of the product. Two sets of calculations were used, considering the weight of 60Kg for an adult subject and 10Kg for a child. The exposure expressed in mg/Kg of the substances that make up the mouthwash is compared with their DL50 set out in the single material safety data sheets.

CALCULATION OF THE LEVEL OF EXPOSURE

1) % of RM in FP x title of RM 100%

The result will give the effective percentage of finished product.

- 2) effective % of RM in FP x mg/application 100%
- 3) result of 2) x number of applications/day
- 4) result of 3) x % of absorption 100%
- 5) result of 4) 60Kg
- 6) result of 4) 10Kg

N.B.: RM = raw material: FP = finished product.

CONCLUSIONS:

On the basis of the calculations made on the level of exposure to the single substances employed in the formulation of **Gelclair®** Concentrated Oral Gel, it may be concluded that the product is:

- a) innocuous if ingested:
- b) suitable for pædiatric use.

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Attachment 5

Stability Test Data

5.1.1 – S	TABILITY AT +40°C, THE	RMOSTATICALLY CON	NTROLLED				
DERMASSIST™ ORAL GEL	30 DAYS	60 DAYS	90 DAYS				
APPEARANCE	GELIFIED, STRAW- COLOURED SOLUTION	DITTO	DITTO				
SMELL	CHARACTERISTIC	ОТПО	DITTO				
TASTE	CHARACTERISTIC, LIQUORICE, SLIGHTLY BITTER	DITTO	DITTO				
pH	5.8	5.9	6.01				
VISCOSITY	4050cps	39 60cps	3890cps				
TOTAL MICROBIAL COUNT	<100 CFU/g	<100 CFU/g	<100 CFU/g				
PATHOGENS	ABSENT	ABSENT	ABSENT				
5.1.2 - STABILITY AT +40°C AND +5°C, THERMOSTATICALLY CONTROLLED							
DERMASSIST™ ORAL GEL	30 DAYS	60 DAYS	90 DAYS				
APPEARANCE	GELIFIED, STRAW- COLOURED SOLUTION	DITTO	DITTO				
SMELL	CHARACTERISTIC	DITTO	DITTO				
TASTE	CHARACTERISTIC, LIQUORICE, SLIGHTLY BITTER	DITTO	DITTO				
pН	5.7	6.1	6.21				
VISCOSITY	3950cps	3700cps	368cps				
TOTAL MICROBIAL COUNT	<100 CFU/g	⊴100 CFU/g	<100 CFU/g				
PATHOGENS	ABSENT	ABSENT	ABSENT				
	5.1.3 - STABILITY AT F	ROOM TEMPERATURE					
DERMASSIST™ ORAL GEL	6 MONTHS	12 MONTHS	20 MONTHS				
APPEARANCE	GELIFIED, DARK STRAW-COLOURED SOLUTION	DITTO	DITTO				
SMELL	CHARACTERISTIC	DITTO	DITTO				
TASTE	CHARACTERISTIC, LIQUORICE, SLIGHTLY BITTER	DITTO	DITTO				
Ph	5.78	5.81	5.84				
VISCOSITY	4020cps	3970 cps	3910cps				
TOTAL MICROBIAL COUNT	<100 C.F.U./g	<100 C.F.U./g	<100 C.F.U./g				
PATHOGENS	ABSENT	ABSENT	ABSENT				

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Attachment 6

Efficacy of Gelclair® in Reducing Pain in Patients with Oral Lesions, Preliminary Findings From an Open Pilot Study

Dr Marcello Innocenti, University of Milan; Dr Giancarla Moscatelli and Dr Silvano Lopez, Hospice di Abbiategrasso, Milan, Italy

OBJECTIVE

To evaluate the effectiveness of Gelclair® Concentrated Oral Gel in reducing pain in patients with oral lesions.

DESIGN

A prospective, open, uncontrolled, pilot study using a hospital-based group of patients in Milan, Italy.

MATERIALS AND METHODS

Thirty patients between the ages of 30 and 60 with painful lesions of the mouth and oropharynx from various aetiologies received Gelclair® (15ml sachet mixed with 40ml of water) three-times daily for at least seven days. The patients were evaluated for short-term (5-7 hours) and medium-term effects (7-10 days) relative to the severity of pain on swallowing and eating. Pain assessment scores were recorded using a Visual Numerical Scale.

RESULTS

A statistically significant reduction in total and independent pain scores were observed both in the short-term at 5-7 hours following administration of Gelclair® (t = 42.3; df = 29; P < 0.005) and in the medium-term (t = 5.1; df = 29; P < 0.005) at between 7 and 10 days of continuous use, respectively.

CONCLUSIONS

These preliminary results indicate that Gelclair® rapidly and effectively reduces pain associated with oral lesions for up to 10 days with continued use, particularly in patients with oral mucositis. Controlled trials of Gelclair® are recommended to support the use of Gelclair® as a pain management option for patients with oral lesions.

Keywords: Gelclair[®], oral mucositis, stomatitis, oral lesions, oral pathologies, pain on eating and swallowing, oncology nutrition



Introduction

Oral soft tissue lesions are common problems of modern society (Miller et al, 2001) and can be caused by a number of medical conditions (Ben Slama, 2000; Garlick & Taichman, 1991; Plauth et al., 1991; Gillespie & Marino, 1993; Guggenheimer et al, 2000), drug treatments (Madinier et al, 2000; McCartan & McCreary, 1997) and radio/chemotherapies (Öhrn et al, 2001; Adamietz et al, 1998). In the past, recurrent aphthous ulceration or stomatitis was recognised as the most common oral mucosal disease, characterised by small, round, clearly defined, painful ulcers that heal in 10-14 days without scarring (Ship, 1996). Today, stomatitis is increasingly interchanged with the term mucositis. Despite this convention, technical differences between mucositis and stomatitis may arise from aetiology (ie chemotherapy versus ionising radiation) or the presence of infection. For the purposes of this study, oral mucositis refers to the inflammation and ulceration of the oral mucosa.

Oral mucositis is a common complication of high-dose radio/chemotherapies in head and neck cancer (Bernhoft & Skaug, 1985; Bundgaard *et al.*, 1993; Karlsson 1987; King *et al.*, 1985; Kuten *et al.*, 1986; Langius *et al.*, 1993); a complication of many chemotherapies, in particular that given for colorectal cancer (Jansman *et al.*, 2001) and high-dose regimens as administered prior to bone marrow transplantation (McGuire *et al* 1993), (Stiff 2001). Mucositis occurs in an estimated 40% of patients receiving standard-dose chemotherapy (Sonis, Sonis, & Lieberman, 1978) and occurs in about 75% of patients receiving high-dose regimens and undergoing stem cell transplantation (Woo *et al*, 1993; Pico *et al*, 1998; Bearman *et al*, 1988). Oral mucositis is also a common condition in patients with reduced immune response, such as HIV/AIDS patients.

Although radio- and chemotherapies have advanced over the past decade with improvements in side-effects such as myelosuppression (Karthaus, Rosenthal, Ganser, 1999), oral mucositis has emerged as a common toxicity, with no treatment that has been demonstrated to be uniformly efficacious (Jansman *et al*, 2001).

Course of Oral Mucositis

Oral mucositis usually starts with erythema of the oral mucosa, which develops into discrete pseudomembraneous lesions that can eventually become deeply ulcerated and necrotic. This is usually accompanied by oral discomfort, severe pain and dysphagia. Over 90% of ulceration is localised to non-keratinised mucosa (Woo *et al*, 1993); and mucositis may be limited or can involve more than 50% of the oral cavity (Overholser 1996). There are also differences in onset and resolution of oral mucositis in radiotherapy and chemotherapy treatment regimens.

Chemotherapy-induced mucositis usually starts between 5 and 7 days after chemotherapy is first administered, presenting with erythematous lesions in the soft palate (Karthaus *et al*, 1998), the buccal mucosa, the ventral surface of the tongue, and the floor of the mouth (Woo *et al* 1993). It may last for about five days after the treatment has finished, and longer if the oral mucosa is infected.

In radiotherapy-induced oral mucositis, symptoms start after 1-2 weeks of radiation, and continue for 1-3 weeks after the last dose if there are no complicating factors such as infection. In a similar sequence to chemotherapy-induced mucositis, the first symptom is erythema of the oral mucosa, which develops into ulceration.

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Mucositis is also associated with infection. The impaired mucosal barrier may become colonised by abnormal bacterial flora particularly in patients with reduced immune responses. Damage to the oral mucosa caused by infection may result in serious life-threatening complications during neutropenia (Hughes *et al.*, 1990; Dreizen *et al.*, 1981).

Oral mucositis and pain

Oral mucositis remains one of the most debilitating complications of intense anticancer treatments. Severe ulceration experienced by patients undergoing radiochemotherapy means that they are often unable to eat or drink because of treatment-induced pain. Problems of feeding and hydration may often lead to intravenous hydration and/or enteral (or sometimes parenteral) feeding. Mucositis pain is characterised as chronic, being exacerbated by activities such as mouth care, speaking, swallowing, vomiting, and sleeping as a result of mouth breathing (McGuire et al, 1993). In one study (Kolbinson et al., 1988), 70% of patients required intravenous narcotics to relieve oral pain following bone marrow transplantation. At present the most common forms of treatment include local anaesthetics, corticosteroids, systemic analgesics and systemic or topical anti-inflammatory drugs. In many patients, the severity of pain means that cancer therapy is reduced or stopped altogether (NIH monograph 9), potentially affecting the outcome of that patient's oncology therapy.

Chemotherapy-induced mucositis

Cytotoxic agents targeting tumours also affect other high-turnover cells such as the oral epithelium. Therefore oral mucositis is a significant toxic effect of many chemotherapeutic regimens. Oral mucositis occurs with an overall incidence of about 40% in standard-dose chemotherapeutic agents such as 5-fluorouracil with or without folinic acid, doxorubicin, etoposide, vinblastine, taxanes, and methotrexate (Symonds 1998; Karthus, Rosenthal, Ganser 1999), increasing further to an incidence of more than 50% with higher doses (Karthus, Rosenthal, and Ganser 1999). Patients receiving stem cell transplantation as part of dose-intensified treatment are at high risk, with about 75% developing oral mucositis (Woo et al, 1993; Pico et al, 1998; Bearman et al, 1988).

Radiotherapy-induced oral mucositis

lonising radiation to the head and neck can cause similar damage to the oral mucosa. When the treatment field includes the oral cavity, patients will almost certainly experience oral mucositis although the incidence of mucositis varies between studies (Bundgaard *et al*, 1993; Kuten *et al*, 1986; Posner 1985). Patients receiving concomitant chemotherapy will inevitably experience oral mucositis.

Gelclair® - a new solution to an old problem

Gelclair® is a concentrated oral gel that contains the barrier-forming ingredients polyvinylpyrrolidone and sodium hyaluronate. When rinsed around the oral cavity, it forms an adhesive barrier over the oral mucosa. This mechanism appears to offer good pain relief, by shielding the exposed or sensitised nerve endings in the mucosa from over stimulation. It also enables patients to eat and drink more easily thus aiding hydration and nutrition. Because it has a mechanical mode of action, the pain relief is universal whatever the cause of the oral lesion. It has offered pain relief to patients who have recently had oral surgery, and those with diffuse aphthous ulcers.

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Subjects, materials, and methods

Design

A prospective, descriptive, repeated-measures design for a single population group was used. Data were collected from self-recording on a Visual Numerical Scale (VNS), interviews with patients after patients had been diagnosed with a painful oral condition (either oral mucositis/stomatitis, pain due to oral surgery, diffuse aphthous ulcers). There was no placebo or control group in the design.

Subjects

A total of 30 patients were enrolled in the study. Subjects were selected on the basis of symptoms of oral pain as a result of oral lesions. Thirty patients of both genders were entered into the study aged between 30 and 60 years. All patients suffered from inflammatory/ulcerative pathologies of the oral cavity of varying aetiology including mucositis/stomatitis of the oropharynx (n = 21) (ten patients with presenting AIDS who were undergoing specific anti-retroviral therapy which had resulted in painful oral lesions, the remainder various aetiologies); severe diffuse aphthous lesions of the oral cavity from unknown cause (n = 4); and after-effects of surgery to the oral cavity (n = 5). Patients with allergic diatheses, those who had used steroids in the month preceding the study and those addicted to drugs or alcohol were excluded from the study. In addition, patients who had taken part in other studies of any kind in the two weeks prior to enrolment in this study were also excluded.

Instruments

Experiences of pain symptoms were rated on a Visual Numerical Scale (VNS) ranging from zero to 10 with the higher number related to worst pain experienced. Patients assessed pain on short-term effects and medium-term effects of Gelclair®. Short-term effect VNS total pain scores were recorded at baseline (prior to intervention) and at 5-7 hours following the intervention. Medium-term effect pain scores were recorded at baseline and then between 7 and 10 days following the intervention. For the medium-term effects, independent pain scores were recorded for six conditions including:

- A. Pain on swallowing saliva
- B. Pain on swallowing liquids only
- C. Pain on swallowing liquids and creams
- D. Pain on swallowing semisolid foods
- E. Pain on eating chopped food/rice/pasta
- F. Pain on eating a normal diet (ie 3-course meal)

Medical intervention

Gelclair Concentrated Oral Gel is presented as a concentrated gel solution in 15 ml sachets. It has a pleasant smell, is pale yellow, with a slightly bitter liquorice taste. Its pH value lies between 5.5 and 6.5 and it contains the film-forming agents polyvinylpyrrolidone (PVP) and sodium hyaluronate. Gelclair is administered as a 15ml dose diluted with 40ml water to make approximately two mouthfuls of oral solution. The resulting solution appears as a slightly viscous liquid, and is prone to creating a film. The solution is kept in the mouth for 2-3 minutes and then expelled. During this time it is rinsed around the mouth, to ensure even distribution over the surface of the oral mucosa. Patients are advised to use Gelclair three-times daily, and about one hour before a meal.

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Procedure

All patients who entered into the study gave their written consent and were assessed on the presence of pain due to oral lesions prior to the study. Assessment of pain was carried out by using VNS within a questionnaire administered by the attendant nurse or physician. Baseline VNS measurements were determined at the start of intervention with Gelclair® for both shortand medium-term effects. Patients were given 15ml sachets of Gelclair® (for mixing) and were asked to self-administer three times daily. Short-term effects were measured by asking patients to rate, on the VNS, the overall levels of oral pain experienced between 5 and 7 hours post intervention. Medium-term effects were measured 7-10 days after first intervention. The medium-term pain recordings were related to independent levels of oral pain during swallowing of saliva and fluid foods, and the eating of semi-solid food and a normal 3-course meal at both the start of the treatment period, and again at 7-10 days following constant Gelclair® use.

The effect of Gelclair® on patients' experiences of oral pain pre and post intervention was evaluated by the use of descriptive statistics and by within-group paired t-test analysis. These were performed between baseline and at a 5-7 hour period after first intervention (for shortterm effects), and at baseline and 7-10 days after continuous intervention (for medium-term effects). A \dot{P} -value of <0.05 was regarded as statistically significant.

In general, 57% of patients reported that the optimum effect of Gelclair® lasted more than three hours, and a further 40% reported that it lasted 2-3 hours. No patients reported side effects of Gelclair® and the taste, smell, texture, ease-of-use and handling were found acceptable.

Effects of Gelclair® on pain associated with oral lesions in the short term Total oral pain associated with oral lesions was significantly reduced in the 5-7-hour period following administration with Gelclair compared with baseline measurements (t = 42.3; df = 60) 29; P <0.005) (Table 1). Descriptive statistics are shown in Table 2.

Table 1: Mean, T-value and probability statistics of short-term effects of Gelclair® on pain related to oral lesions.

	Mean	T-value	P
Baseline	8.167	42.3	<0.005
5-7 Hour Post Intervention	0.633		

A line plot of the short-term effects of Gelclair® on pain are shown in Figures 1 and 2. The linearity of the scores shows the direct effect of Gelclair® in reducing overall after a period of 5-7 hours. Figure 1 shows individual pain scores (n = 30). whereas Figure 2 shows the mean scores for the two data sets.



Figure 1: Linear representation of individual pain scores (n = 30) related to oral lesions pre and post Gelclair[®] intervention.

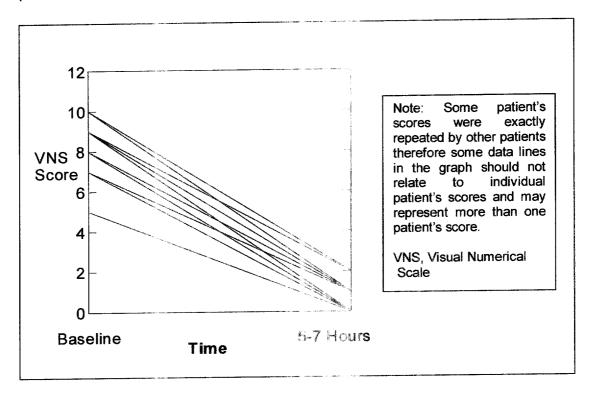


Figure 2: Mean scores of the reduction of pain related to oral lesions pre and post Gelclair® intervention.

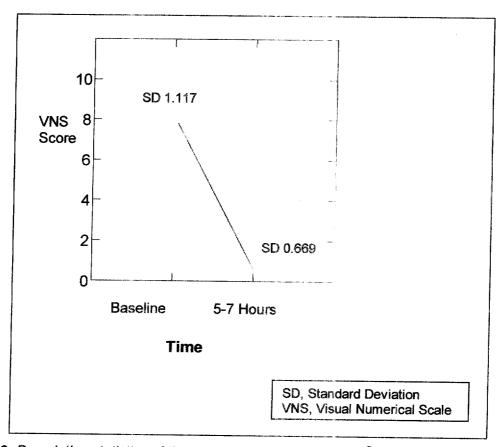


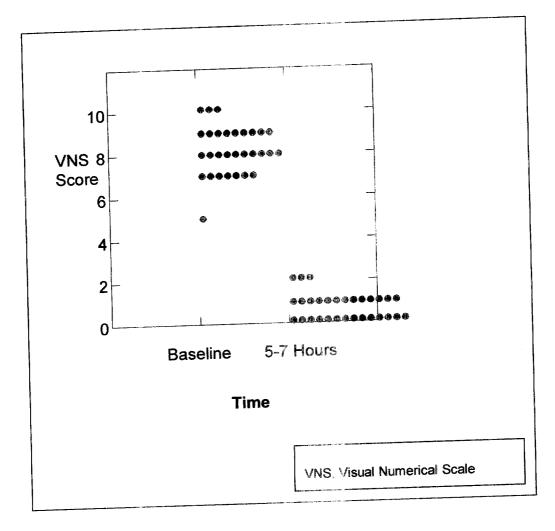
Table 2: Descriptive statistics of the short-term effect of Gelclair® on overall pain related to oral lesions at baseline and at 5-7 hours after intervention.

	BASELINE	5-7 HOURS
N	30	30
Lowest score	5	0.000
Highest score	10	2
Sum	245.0	19.0
Mean	8.167	0.633
CI 95% Upper	8.584	0.883
CI 95% Lower	7.750	0.384
SD Error	0.204	0.122
SD Deviation	1.117	0.669

A dot matrix plot (Figure 3) reveals the distribution of individual scores related to pain before and after intervention with Gelclair[®]. The data show that scores are clearly reduced in the 5-7-hour period following administration of Gelclair[®].



Figure 3: Dot matrix plot of the effects of Gelclair® on pain related to oral lesions before and between 5 and 7 hours after administration.



Effects of Gelclair® on pain associated with oral lesions in the medium term

In general, after one week of treatment with Gelclair[®], 87% of patients reported overall improvements from baseline scores related to pain on swallowing food, liquids and saliva. Statistical analysis reveal significant results across all six categories of VNS pain scoring compared with baseline results (Table 3). Also, collective analysis of all independent pain scores produces significant results relative to the effect of Gelclair[®] in reducing overall oral pain on swallowing, eating, and drinking at 7-10 days of continued use (n = 30; t = 5.1; df = 29; P < 0.005).

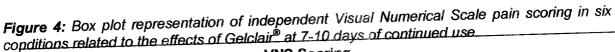
Table 3: Statistical data for six independent groups of pain scores plus total pain scores at baseline and at 7-10 days of continued use with Gelclair.

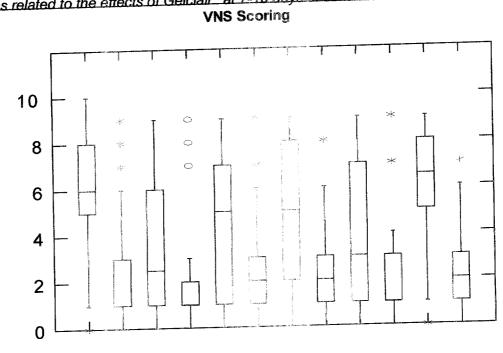
	N	Mean MD		95° U/L	95% CI U/L U/L		SD		P	
		В	AI		В	The second of th	В	Al		
Pain on swallowing saliva	30	6.0	2.7	3.3	7.0/5.0	3.6/1.9	2.6	2.3	6.9	<0.005
Pain on swallowing liquids only	30	3.4	2.0	1.4	4.5/2.3	2.9/1.0	3.0	2.5	2.07	0.053
Pain on swallowing liquids and creams	30	4.3	2.4	1.9	5.4/3.1	3.3/1.4	2.9	2.5	2.6	0.013
Pain on swallowing semisolid foods	30	4.8	2.5	2.2	5.9/3.6	3.4/1.6	3.1	2.4	3.1	0.004
Pain on swallowing chopped food/rice/pasta	30	4.1	2.0	2.0	5.2/2.9	2.9/1. 2	3.1	2.2	3.8	0.001
Pain on eating a normal diet (3-course meal)	30	5.5	2.3	3.2	6.6/4.4	3.0/1.5	2.9	2.1	5.8	<0.005
Total pain	30	28.3	14.0	14.2	33.6/22.9	17.9/10.1	14.3	10.5	5.1	<0.005

SD, standard deviation; B, baseline, Al, After intervention; MD, mean difference; U/L, upper/ lower

Interestingly, there appears to be no difference in the experience of pain dependant on the condition, as shown by the similarity of scores for the 'pain on swallowing' and scores for the 'pain on eating a normal diet' where the mean difference between the two data sets is 3.3 and 3.2, respectively (P < 0.005).

A box plot of independent VNS scores related to oral pain is shown in Figure 4. This shows the distribution of pain scores both prior to the intervention with Gelclair® and after continued use at 7-10 days. The data show obvious reduction in pain assessments at 7-10 days as a result of continued use of Gelclair®.





A1 A2 B1 B2 C1 C2 D1 D2 E1 E2 F1 F2

Condition Key

- A1 Pain on swallowing saliva (baseline)
- A2 Pain on swallowing saliva (at 7-10 days)
- B1 Pain on swallowing liquids (baseline)
- B2 Pain on swallowing liquids (at 7-10 days)
- C1 Pain on swallowing liquids and creams (at baseline)
- C2 Pain on swallowing liquids and creams (at 7-10 days)
- D1 Pain on swallowing semisolid foods (at baseline)
- D2 Pain on swallowing semisolid foods (at 7-10 days)
- E1 Pain on swallowing chopped food/rice/pasta (at baseline) E2 - Pain on swallowing chopped food/rice/pasta (at 7-10 days)
- F1 Pain on eating a normal diet i.e. 3-course meal (at baseline)

F2 - Pain on eating a normal diet i.e. 3-course meal (at 7-10 days)

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Overall data demonstrate that, in this small uncontrolled study of 30 patients with painful oral lesions, Gelclair® produces statistically significant reductions in pain assessment scores in the short-term (5-7 hours) and in the medium-term (at 7-10 days of continued use). This analysis suggests that Gelclair® is effective as an intervention option to manage the pain caused by oral mucositis and stomatitis, lesions from oral surgery, and ulcerative conditions of unknown origin.

Although these preliminary findings are optimistic, randomised, placebo-controlled trials of the effects of Gelclair® are needed to support the pain-reducing effects of Gelclair®. Drawbacks to the current study include a limited sample size, uncontrolled population sample, and a restrictive design. Within-group measurements are also confounded by lack of control over the restrictive design. Within-group measurements are also confounded by lack of control over the restrictive design. Within-group measurements could have improved, in the medium-course of oral lesions suggesting that pain assessments could have improved, in the medium-course of healing for the oral lesions. Despite these confounding variables, raw data from this study and previous anecdotal evidence strongly suggests that Gelclair® benefits patients by reducing pain severity associated with oral lesions in mucositis, stomatitis, post-operative surgery, and in ulcerative conditions of unknown origin. The mechanism of action of Gelclair® may also benefit the patient by creating a barrier to infectious organisms that cause life-threatening complications (Hughes *et al.*, 1990; Dreizen *et al.*, 1981), but this has yet to be determined.

As many as 400,000 citizens in the US alone, and hundreds of thousands elsewhere in the world diagnosed with cancer will develop oral complications from their treatments or their condition. These patients and their healthcare providers may benefit greatly from Gelclair particularly in relation to oral mucositis - which has been shown to significantly increase the burden of care in several studies. One study (Manzullo et al, 1998) showed that patients with standard-dose chemotherapy-induced mucositis were hospitalised 3-6 days longer per cycle of therapy compared with patients without mucositis (who often do not need hospitalisation); and another separate study (Sonis et al, 2001) found that in high-dose chemotherapy patients, a 1-another separate of mucositis was associated with one additional day of fever; a 2.1-fold point increase in grade of mucositis was associated with one additional day of fever; a 2.1-fold risk of additional infection; 2.7 days of additional TPN (total parenteral nutrition); 2.6 days of injectable narcotic therapy; and 2.6 additional days in hospital. In short, oral mucositis has a direct impact on duration of disease, remission, cure rates and long-term survival (Peterson 1999). This impact would be caused mainly by incidences where mucositis forces changes in a treatment plan.

Poor satisfaction with existing treatments for painful oral lesions of the mouth and oropharynx make oral mucositis a difficult condition to treat. However, Gelclair® may offer a unique management option for pain relief allowing partial or full restoration of normal eating and drinking in patients with painful oral lesions caused by a variety of aetiologies. The unusual mechanical mode of action of Gelclair® over pharmacological mechanisms offers the advantage of a non-systemic pain-relief device with added protection through barrier effects. In addition, the soothing effect remains for a sufficiently long time to give the patient effective relief, and helps to restore the ability to eat and drink more normally.

There is currently no gold-standard treatment for relieving the pain associated with such oral conditions (Jansman *et al*, 2001) and the ability to restore a satisfactory quality of life and provide symptomatic improvement is currently unattainable. However, in this study Gelclair improved pain levels and eating and drinking ability in patients with painful oral lesions.

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Gelclair® may therefore offer a solution to this unmet clinical need by improving the quality of life of patients with painful oral conditions such as oral mucositis. By improving eating and drinking patterns and pain tolerance levels, the dose-limiting aspect of mucositis may be reduced, and the protective barrier formed by Gelclair® may also convey protection of the oral mucosa from further damage due to mechanical stimulation. To support these preliminary findings, two UK controlled clinical trials are currently underway to investigate further the hypothesis that Gelclair® offers rapid and effective pain relief for chronic debilitating conditions such as oral mucositis, lesions caused by oral surgery, and persistent ulcerative lesions of unknown origin.

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Attachment 7

510((k) Summary

September 1, 2001

1. Submission Applicant & Correspondent:

Name:

Sinclair Pharmaceuticals, Ltd.

Address:

Borough Road Godalming Surrey **GU7 2AB** United Kingdom

Phone No.: +44 (0) 1483 428 611

Denise Swift, Director of Regulatory Affairs Contact Person:

Gelclair® CONCENTRATED ORAL GEL 2. Name of Device: Gelclair® CONCENTRATED ORAL GEL

Trade/Proprietary/Model Name: Dressing, Wound & Burn, Hydrogel w/Drug or Common or Usual Name:

Biologic

Dressing, Wound & Burn, Hydrogel w/Drug or Classification Names:

Biologic

3. Devices to Which New Device is Substantially Equivalent:

Carrington Laboratories Radiacare™ Oral Wound Rinse.

4. Device Description:

Sinclair Pharmaceuticals, Ltd. Gelclair® CONCENTRATED ORAL GEL is a viscous gel formulation, which is presented in a sachet of 15ml for mixing with 40ml of water. This combination of substances, when washed around the mouth, forms a protective layer over the oral mucosa.

5. Intended Use of the Device:

Sinclair Gelclair® CONCENTRATED ORAL GEL, has a mechanical action indicated for the management of pain and relief of pain, by adhering to the mucosal surface of the mouth, soothing oral lesions of various etiologies, including: Oral Mucositis/Stomatitis (may be caused by chemotherapy or radiotherapy), irritation due to oral surgery, ageing and traumatic ulcers caused by braces or ill fitting dentures, medication, or disease. Also indicated also for diffuse aphthous ulcers.

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6. Summary of Technological Characteristics of the Device Compared to the Predicate

The Gelclair® CONCENTRATED ORAL GEL has the same intended/indications for use as the predicate Carrington Laboratories Radiacare™ Oral Wound Rinse.

Product Name	Sinclair Pharmaceuticals Gelclair®	Acemannan hydrogel, Aspartame, Flavor, Fructose, Maltodextrin, Polyvinylpyrrolidone, Potassium Sorbate, Sodium Benzoate			
Ingredients	Purified Water, Propylene Glycol, Polyvinylpyrrolidone, Sodium Hyaluronate, Potassium Sorbate, Sodium Benzoate, Hydroxyethylcellulose, PEG-40 Hydrogenated Castor Oil, Disodium Edetate, Benzalkonium Chloride, Flavor, Saccharin Sodium, Glycyrrhetinic Acid				
	Mix with water	Mix with water			
Method of Use	Take as needed	Take as needed			
Number of applications per day	1	Management and relief			
Claim	Management and relief of pain, does not sting, nonirritating, safe if swallowed	of pain, does not sting, nonirritating, safe if swallowed			
	Oral Mucosa	Oral Mucosa			
Area of Use Disease State	Oral Mucositis/Stomatitis/Ora	LESIONS			
	Lesions Concentrate for dilution	Concentrate for dilution			
Type of Product		Non Sterile			
Presentation	Non Sterile				

Extensive functional and performance testing were conducted to assess the safety 7. Tests and Conclusions: and effectiveness of Gelclair® CONCENTRATED ORAL GEL. All results are satisfactory.

Attachment 8

Truthful and Accuracy Statement

The following statement is provided as required by 21 CFR 807.87 (j):

I certify that, in my capacity as Regulatory Consultant, I believe to the best of my knowledge, that all data and information submitted in this pre-market notification are truthful and accurate and that no material facts for a review of the substantial equivalence of this device have been knowingly omitted from this submission.

Director QA/RA

Otterbrook Engineering

Sep 6,2001