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ONE HUNDRED TENTH CONGRESS

**U.S. House of Representatives**  
**Committee on Energy and Commerce**  
**Washington, DC 20515-6115**

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November 26, 2007

DENNIS B. FITZGIBBONS, CHIEF OF STAFF  
GREGG A. ROTHSCHILD, CHIEF COUNSEL

The Honorable Andrew C. von Eschenbach, M.D.  
Commissioner  
U.S. Food and Drug Administration  
5600 Fishers Lane  
Rockville, MD 20857

Dear Dr. von Eschenbach:

Under Rules X and XI of the Rules of the United States House of Representatives, the Committee on Energy and Commerce and its Subcommittee on Oversight and Investigations are investigating the ability of the Food and Drug Administration (FDA) to protect the American public from excessive risks associated with prescription drugs. As part of this inquiry, we are increasingly concerned to learn about study reports linking Trasyolol, a drug used to control bleeding during heart surgery, to increased risk of renal failure and mortality.

Bayer's Trasyolol was approved as an orphan drug in 1993. In January 2006, an article in the *New England Journal of Medicine* warned that the drug might be linked to a doubled risk of kidney failure, as well as increased risk of heart attacks, heart failure, and strokes. FDA responded with a February 8, 2006, public advisory urging physicians to closely monitor patients using the drug. Nevertheless, on September 21, 2006, FDA's Cardiovascular and Renal Drugs Advisory Committee voted to recommend continued use of the drug, citing lack of conclusive data demonstrating its danger.

Shortly afterwards, Bayer admitted that it "mistakenly" did not share certain data with the advisory committee from an observational study commissioned by the company, indicating that use of Trasyolol may increase the chance of serious kidney damage, congestive heart failure, strokes, and death. Despite this additional evidence of Trasyolol's dubious safety profile, on September 12, 2007, a joint meeting of FDA's Cardiovascular and Renal Drugs and Drug Safety and Risk Management Advisory Committees recommended that the drug remain on the market.

On October 19, 2007, however, the Drug Safety Monitoring Board for the BART study (Blood conservation using antifibrinolytics: A randomized trial in a cardiac surgery population) stopped enrolling patients when it noticed higher fatality rates for those patients treated with Trasylol compared to patients on competing drugs.

We applaud the agency's request that Bayer suspend U.S. marketing for the drug based upon interim data from BART showing increased mortality in patients treated with Trasylol. On November 5, 2007, Bayer announced a worldwide suspension of marketing the drug. At the same time, FDA pledged to work with Bayer and the study's researchers at the Ottawa Health Research Institute to perform a revised risk/benefit analysis on the full study data.

To further the Committee's continuing oversight of this matter, the Committee wishes to know when FDA is likely to complete its revised analysis of the BART study data. Once the analysis is complete, we would appreciate a briefing by FDA to explain its findings.

In the meantime, please provide to the Committee the following documents relating to Trasylol:

- 1) Any and all records reflecting communications between FDA and Bayer relating to the decision by the BART safety-monitoring board to stop enrolling patients into the BART study;
- 2) Any and all records reflecting communications between FDA and Health Canada relating to the decision by the BART safety-monitoring board to stop enrolling patients into the BART study; and
- 3) Any and all records reflecting communications between FDA and the German drug regulatory authority—the Federal Institute for Drugs and Medical Devices—relating to the decision by the BART safety-monitoring board to stop enrolling patients into the BART study.

We appreciate your assistance with this investigation. Please deliver copies of the requested records to the Subcommittee on Oversight and Investigations of the Committee on Energy and Commerce, Room 316, Ford House Office Building, no later than 14 days from the date of this letter. Please note that for the purpose of responding to this request, the terms "records" and "relating" should be interpreted in accordance with the attachment to this letter. After review of the records, we may require additional records and/or staff interviews with FDA personnel.

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Should you have any questions regarding these requests, please contact us or have your staff contact Ms. Joanne Royce or Dr. Paul Jung with Committee staff at (202) 226-2424.

Sincerely,



John D. Dingell  
Chairman



Bart Stupak  
Chairman  
Subcommittee on Oversight and Investigations

Attachment

cc: The Honorable Joe Barton, Ranking Member  
Committee on Energy and Commerce

The Honorable Ed Whitfield, Ranking Member  
Subcommittee on Oversight and Investigations

## ATTACHMENT

1. The term "records" is to be construed in the broadest sense and shall mean any written or graphic material, however produced or reproduced, of any kind or description, consisting of the original and any non-identical copy (whether different from the original because of notes made on or attached to such copy or otherwise) and drafts and both sides thereof, whether printed or recorded electronically or magnetically or stored in any type of data bank, including, but not limited to, the following: correspondence, memoranda, records, summaries of personal conversations or interviews, minutes or records of meetings or conferences, opinions or reports of consultants, projections, statistical statements, drafts, contracts, agreements, purchase orders, invoices, confirmations, telegraphs, telexes, agendas, books, notes, pamphlets, periodicals, reports, studies, evaluations, opinions, logs, diaries, desk calendars, appointment books, tape recordings, video recordings, e-mails, voice mails, computer tapes, or other computer stored matter, magnetic tapes, microfilm, microfiche, punch cards, all other records kept by electronic, photographic, or mechanical means, charts, photographs, notebooks, drawings, plans, inter-office communications, intra-office and intra-departmental communications, transcripts, checks and canceled checks, bank statements, ledgers, books, records or statements of accounts, and papers and things similar to any of the foregoing, however denominated.
2. The terms "relating," or "relate" as to any given subject means anything that constitutes, contains, embodies, identifies, deals with, or is in any manner whatsoever pertinent to that subject, including but not limited to records concerning the preparation of other records.