

P020014/R21 CJ

Conceptus

June 13, 2008

PMA Document Mail Center (HFZ-401)
Center for Devices and Radiological Health
Food and Drug Administration
9200 Corporate Blvd.
Rockville, MD 20850

RE: **ESS305 Post-Approval Study: 12 month interim report**
PMA P020014, Report #21
Essure® System for Permanent Birth Control ESS305

To Whom It May Concern:

In accordance with 21 CFR 822, Conceptus is submitting three copies of the 12-month interim report on the ESS305 Post-Approval Study.

The information contained in this 12-month interim report on the ESS305 Post-Approval Study is considered confidential and Conceptus therefore requests protection of this information in accordance with 18 USC 1905, 21 USC 331(I), 5 USC 552.

Please let me know if you have any questions or need additional information. I can be reached by phone at (650) 962-4078, by fax at (650) 962-5194, or by email at rachelle_acuna-narvaez@conceptus.com.

Sincerely,



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Regulatory Affairs Associate

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P020004/R21 C1

Conceptus.

ESS305 POST-APPROVAL STUDY
12-Month Interim Report

FDA CDRH DMC

JUN 17 2008

Received

Data current to May 31, 2008

ESS305 POST-APPROVAL STUDY

12-Month Interim Report

Table of Contents

Section 1: General Information..... 1-1

 Sponsor Information..... 1-1

 Product Information..... 1-1

Section 2: Submission Information..... 2-1

Section 3: Study Information..... 3-1

 Purpose of the Study..... 3-1

 Investigator Enrollment..... 3-1

 Patient Population..... 3-2

 Original Timeline..... 3-2

 Revised Timeline..... 3-3

 Study Schedule..... 3-5

 Summary Data and Interpretation..... 3-6

 Unanticipated Device Effects..... 3-6

 Adverse Events..... 3-6

 Protocol Deviations..... 3-6

**SECTION 1
GENERAL INFORMATION**

Sponsor Information

Name: Conceptus, Inc.
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Establishment Registration Number: 2951250

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Product Information

Product Name: Essure Permanent Birth Control System
Model Number: ESS305
Application Number: P020014 – S012
Date of PMA approval: 06/15/2007

SECTION 2
SUBMISSION INFORMATION

Date of Submission: June 13, 2007

Data included in this submission: Clinical Study Data

Type of Submission: Twelve Month Interim Post-Approval Study Status Report

Post-Approval Study Status: Study Over-Due

SECTION 3 STUDY INFORMATION

Purpose of the Study

The Essure System is comprised of a micro-insert attached to a delivery wire, held in the wound down position by a release catheter. The entire assembly is sheathed within a delivery catheter. This system is attached to a handle that facilitates micro-insert delivery and deployment. The Essure System was initially approved by the Food and Drug Administration ("FDA") for commercial use on November 4, 2002 under Pre-Market Application P020014.

Conceptus made several modifications to the ESS205 Essure System to improve usability of the delivery system. The ESS305 System has been subjected to bench testing to demonstrate its comparability to the existing ESS205 System. The results of this bench testing were used to support a Pre-Market Application Supplement (#P020014/S12) and submitted to the FDA. As a Condition of Approval, FDA requested that Conceptus conduct a post-approval clinical study to evaluate bilateral placement rates of the micro-insert for newly trained and experienced physicians.

The objectives of this post-approval clinical study are to determine the following:

- Bilateral placement of the ESS305 micro-insert at first attempt;
- Comparison of bilateral placement success between Newly Trained physicians and Experienced physicians;
- Identification of factors predictive of failure to achieve bilateral placement of the ESS305 micro-insert at first attempt;
- Evaluation of aspects of the ESS305 design that may impact bilateral placement rate;
- Hysteroscopy time to perform the procedure;
- Adverse device effects; and
- Adverse procedure events.

The data will be used to evaluate training procedures and update labeling as required.

Investigator Enrollment

In order to determine the effectiveness of the ESS305 physician training, awareness, training materials, and labeling, the study will compare bilateral placement rates in (b)(4) newly trained physicians with (b)(4) physicians experienced in Essure micro-insert placement (i.e., experienced using the previous ESS205 device).

(b)(4) alternates) newly trained physicians in (b)(4) in the United States who complete the (b)(4) of the training program and (b)(4) have been or will be asked to participate in

this study. (b)(4) newly trained physicians have agreed to participate thus far. (b)(4) of these newly trained physicians are still awaiting IRB approval. (b)(4) other newly trained physicians have not yet submitted all of the materials necessary to become an investigator. (b)(4) more newly trained physicians may be recruited to the study.

(b)(4) experienced physicians in (b)(4) in the United States who have previously completed the Essure training program and (b)(4) with at least (b)(4) have agreed to participate in the study. (b)(4) of those experienced physicians is still awaiting IRB approval. (b)(4) more experienced physicians may be recruited as alternates to the study.

Investigator enrollment in this study is limited to no more than (b)(4) physicians from any (b)(4) and no more than (b)(4) newly trained physicians and/or (b)(4) experienced physicians from any (b)(4). In addition, no more than (b)(4) of the physicians will represent (b)(4)

Patient Population

The patient population will consist of a maximum of 860 women who agree to undergo the Essure Procedure prior to enrollment in the study. Once a woman who is scheduled to undergo the Essure Procedure consents to participate in the study, the investigator will collect demographic and micro-insert placement data. An adjusted placement rate will be calculated for those women in whom an Essure System is placed through the operating channel of the hysteroscope.

Original Timeline

As noted in Table 2(a) below, the original timeline anticipated initial site enrollment starting in July 2007. Table 2(b) below shows the original estimate of patient and investigator enrollment.

Table 2(a): Estimated timeline of post approval study

Clinical Study Milestone	Expected Completion Date
Initial Site Enrollment with IRB approval:	July 2007
Initial Patient Enrollment:	August 2007
86th Site Enrolled with IRB approval (~6 months):	January 2008
860th Patient Enrolled (~7 months):	August 2008
Final report prepared:	November 2008
Final report submitted to FDA:	December 2008

Table 2(b): Expected number of Investigators and study subjects enrolled by month

Enrollment Milestone Date	# of Investigators enrolled (cumulative)	# of Patients enrolled (cumulative)	
2007			
July			
August			
September			
October			
November			
December			
2008			
January		(b)(4)	
February			
March			
April			
May			
June			
July			

Revised Timeline

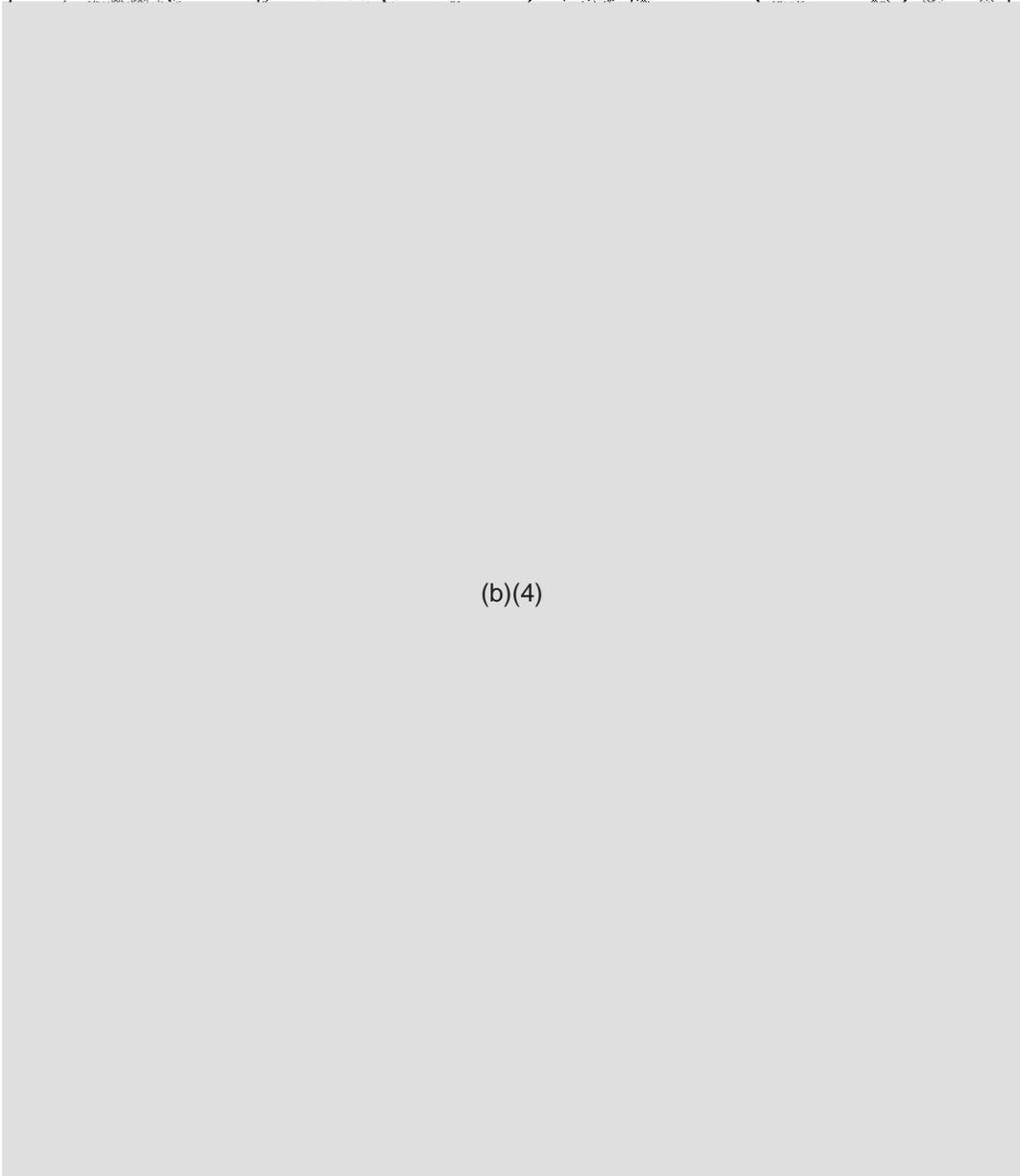
Conceptus submitted a revised timeline in PMA Report (b)(4) ESS305 Post Approval Study Protocol (b)(4). The timeline submitted in that amendment is shown again below for reference purposes.

Table 3(a): Revised timeline of post approval study

Clinical Study Milestone	Expected Completion Date
Initial Site Enrollment with IRB approval	August 2007
86th Site Enrolled with IRB approval	August 2008
Initial Patient Enrollment	September 2007
100th Patient Enrolled	December 2007
200th Patient Enrolled	February 2008
400th Patient Enrolled	May 2008
600th Patient Enrolled	December 2008
860th Patient Enrolled	October 2009
Final report prepared	November 2009
Final report submitted to FDA	December 2009

Table 3(b): Expected number of study subjects and investigators by month

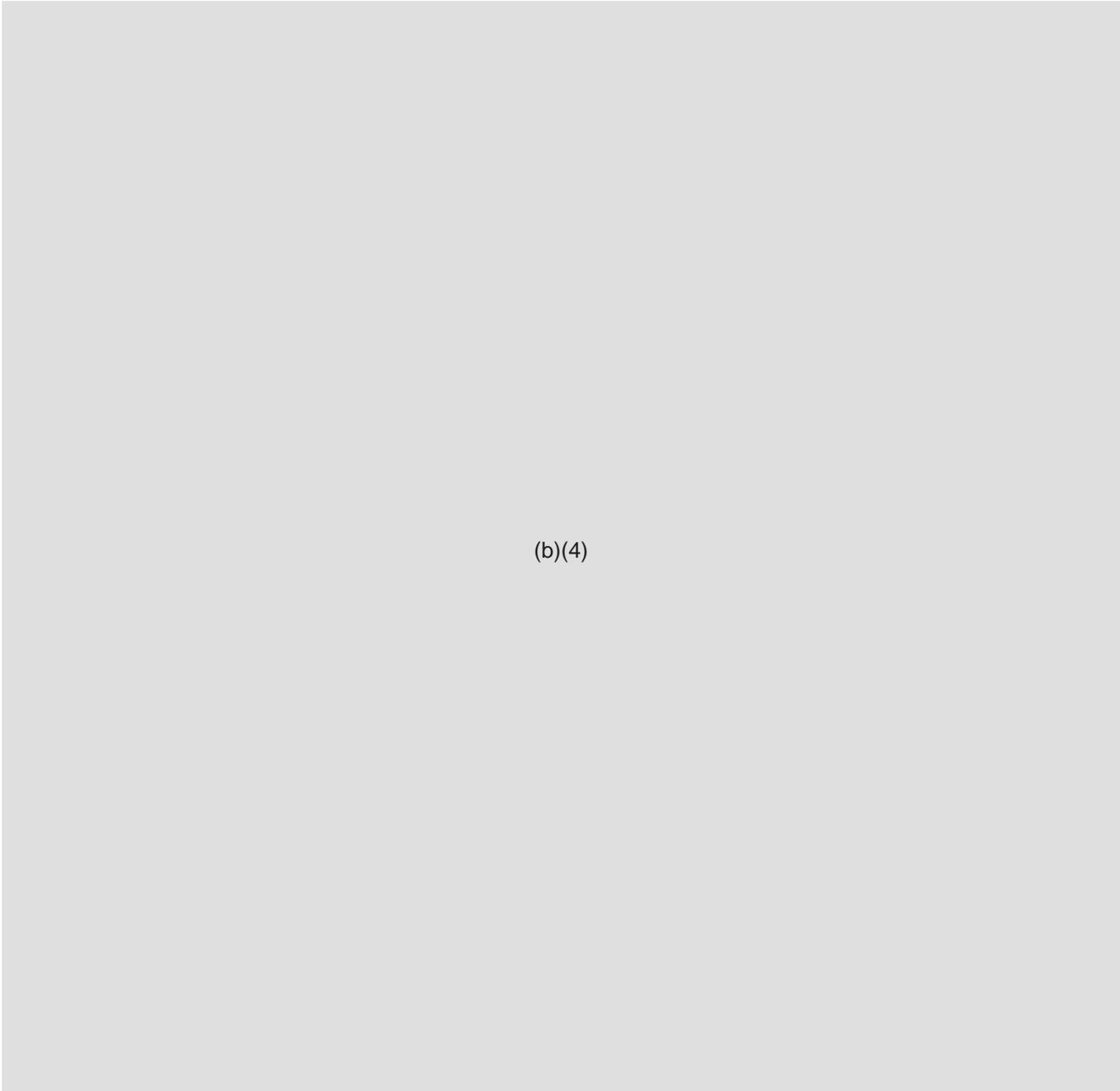
Date	Expected # of Investigators enrolled (cumulative)	Expected # of Patients enrolled (cumulative)
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(b)(4)

* Physician Enrollment Complete

** Patient Enrollment Complete

Study Schedule

(b)(4)

The delay in patient enrollment is partially tied to the delay in investigator enrollment. It may also be related to the fact that Essure sales were lower than expected in the first part of the year, and, clinical study enrollment is expected to follow commercial use of Essure. Physicians have postulated that the early slowness was due to a combination of a greater proliferation of higher deductible Health Care plans, resulting in patients delaying elective procedures until their deductibles are satisfied, and the broader economic challenges in the economy. Conceptus expects to see patient enrollment increase in the coming months when the remainder of the

(b)(4)

Unaudited Data

Number of patients enrolled	Number of successful bilateral placement procedures	Number of placement procedures resulting in unilateral placement	Number of unsuccessful placement procedures	Number of Non-attempts
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(b)(4)

Unanticipated Device Effects

No unanticipated device effects have been observed during the period from study initiation through May 31, 2008.

Adverse Events

Two adverse events have been reported during the period from study initiation through May 31, 2008. One patient suffered a vaso-vagal reaction during the procedure; the procedure was aborted and the patient treated, then rescheduled for another procedure. The second patient experienced vaginal bleeding starting on the day of her procedure and lasting for approximately a month, which the physician believed was related to Depo-Provera which was prescribed shortly prior to the procedure.

Protocol Deviations

Deviations to the study protocol included:

(b)(4)