April 07, 2026

Merz North America, Inc
% Daniel Connell
Senior Manager, Regulatory Affairs
Merz North America, Inc.
6501 Six Forks Rd.
Raleigh, North Carolina 27615

Re: P050052/S162
Trade/Device Name: RADIESSE® Injectable Implant
Product Code: LMH
Filed: May 22, 2024
Amended: August 13, 2025, August 15, 2025, October 16, 2025, March 06, 2026

Dear Daniel Connell:

The Center for Devices and Radiological Health (CDRH) of the Food and Drug Administration (FDA) has completed its review of your premarket approval application (PMA) supplement for the RADIESSE® Injectable Implant for expanding the indications for the correction of décolleté wrinkles. The device is indicated for subdermal implantation for the correction of moderate to severe facial wrinkles and folds, such as nasolabial folds. This device is indicated for hand augmentation to correct volume loss in the dorsum of the hands. It is also indicated for restoration and/or correction of the signs of facial fat loss (lipoatrophy) in people with human immunodeficiency virus. Radiesse Injectable Implant diluted 1:2 with 0.9% sterile saline solution is indicated for subdermal implantation for the correction of décolleté wrinkles in patients 22 years of age and older.

Based upon the information submitted, the PMA supplement is approved. You may begin commercial distribution of the device in accordance with the conditions of approval described below. Although this letter refers to your product as a device, please be aware that some approved products may instead be combination products. The Premarket Approval Database available at https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMA/pma.cfm identifies combination product submissions.

The sale and distribution of this device are restricted to prescription use in accordance with 21 CFR 801.109 and under section 515(d)(1)(B)(ii) of the Federal Food, Drug, and Cosmetic Act (the act). The device is further restricted under section 515(d)(1)(B)(ii) of the act insofar as the labeling must specify the specific training or experience practitioners need in order to use the device. FDA has determined that these restrictions on sale and distribution are necessary to provide reasonable assurance of the safety and

effectiveness of the device. Your device is therefore a restricted device subject to the requirements in sections 502(q) and (r) of the act, in addition to all other applicable requirements, including those governing the manufacture, distribution, and marketing of devices.

Expiration dating for this device has been established and approved at three years at a controlled room temperature between 15°C and 32°C (59°F and 90°F).

Continued approval of the PMA is contingent upon the submission of periodic reports, required under 21 CFR 814.84, at intervals of one year (unless otherwise specified) from the date of approval of the original PMA. This report, identified as "Annual Report" and bearing the applicable PMA reference number, should be submitted to the address below. The Annual Report should indicate the beginning and ending date of the period covered by the report and must include the information required by 21 CFR 814.84.

In addition to the above, and in order to provide continued reasonable assurance of the safety and effectiveness of the PMA device, under 21 CFR 814.82(a)(9), the Annual Report must include, separately for each model number (if applicable), the number of devices sold and distributed during the reporting period, including those distributed to distributors. The distribution data will serve as a denominator and provide necessary context for FDA to ascertain the frequency and prevalence of adverse events, as FDA evaluates the continued safety and effectiveness of the device.

You have agreed to provide the following non-clinical information, which may be followed by a PMA supplement where applicable.

I. Device-Specific Use Training Program

This approval is being granted on the condition that:

1. The device manufacturer must develop, maintain, and update as necessary, a device-specific use training program that ensures proper training in décolleté anatomy and vasculature, safe injection techniques, and identification and management of potential adverse events, including intravascular complications.

2. The device-specific use training program is submitted, as a supplement, within 30 days from the date of this letter and approved by FDA prior to implementation.

3. The device-specific use training program is implemented within 6 months from the date of this letter. A report must be submitted to FDA within 30 days of implementation to notify FDA of this milestone.

4. The device manufacturer may only distribute the device to providers that implement the device-specific use training program and ensure that providers have completed the device-specific training program.

5. The device manufacturer must submit a report to the FDA annually on the anniversary of initial marketing authorization for the device, until such time as FDA may terminate such reporting, including an assessment of the success of the device-specific training based on quantitative metrics, the number of providers who have completed the training, and any changes to the training program since the last report.

6. The device manufacturer should develop a method by which the public could verify that a provider has successfully completed the aforementioned required training program.

7. Please include in the labeling:

    a. A description of the training program and a recommendation that device usage be reserved for qualified providers with expertise in dermal filler injection.

    b. A statement regarding how the device is only for distribution to providers that have taken and successfully completed device-specific use training program.

Be advised that failure to comply with any post-approval requirement constitutes grounds for FDA withdrawal of approval of the PMA in accordance with 21 CFR 814.82(c) and 814.46(a)(2).

II. Post-Approval Study

In addition to the Annual Report requirements, you must provide the following data in post-approval study (PAS) reports for each PAS listed below.

1. The Safety Study to Assess Radiographic Imaging is an open-label, multicenter, single-arm, uncontrolled safety study to assess radiographic imaging following treatment with RADIESSE® dilute in the décolleté in adult females in the United States.

    - **Study purpose/objectives:** To determine if treatment with Radiesse dilute in the décolleté interferes with radiographic imaging of the breast tissue and to assess the safety of Radiesse dilute in the décolleté.
    - **Study design:** Participants will receive three treatments spaced six weeks apart (Week 1, Week 7, and Week 13), with each consisting of injection of 1.5 mL Radiesse diluted 1:2 with sterile saline into the décolleté Imaging will be performed at baseline and 1 month after the third administration
    - **Total number of subjects:** 30 female participants between the ages of 40 and 65
    - **Length of follow-up and frequency of assessments:** Total participation 60 weeks; radiographic imaging of the breast (ultrasound and mammography) will be conducted at baseline and approximately 1 month following the third injection. Safety data (including adverse events and serious adverse events) will be collected through Week 60.
    - **Endpoint(s):** Any interference of Radiesse dilute in either breast observed in breast ultrasound or mammogram images at Week 17, as assessed by an adjudication committee composed of board-certified radiologists. Occurrence of adverse events (AEs) related to treatment with Radiesse dilute, as reported by the treating investigator throughout the study.
    - **Data analysis plan for the primary endpoints:** Radiographic images will be reviewed for interference and confirmed by the adjudication committee through the Radiology Adjudication Committee Questionnaire; AE will be monitored through the study duration.
    - **Reference to protocol:** G210275/S004 approved on May 9, 2025

PAS Progress Reports must be submitted every six (6) months for the first year and annually thereafter, from the date of the PMA approval letter, unless otherwise specified by FDA. The Final PAS Report should be submitted no later than three (3) months after study completion (i.e., last subject's last follow-up date.

Each PAS report should be submitted to the address below identified as a "PMA Post-Approval Study Report" in accordance with how the study is identified above and bearing the applicable PMA reference number.

Be advised that failure to comply with any post-approval requirement, including the reporting requirements outlined above, constitutes grounds for FDA withdrawal of approval of the PMA in accordance with 21 CFR 814.82(c) and 814.46(a)(2).

Be advised that the failure to conduct any such study in compliance with the good clinical laboratory practices in 21 CFR part 58 (if a non-clinical study subject to part 58) or the institutional review board regulations in 21 CFR part 56 and the informed consent regulations in 21 CFR part 50 (if a clinical study involving human subjects) may be grounds for FDA withdrawal of approval of the PMA in accordance with 21 CFR 814.46(a)(3)-(4).

Be advised that protocol information, interim and final results will be published on the Post-Approval Studies Program Database Webpage, available at https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMA/pma_pas.cfm.

In addition, the results from any post approval study should be included in the labeling as these data become available. Under 21 CFR 814.39, any updated labeling must be submitted to FDA in the form of a PMA Supplement. For more information on post-approval studies, see the FDA guidance document entitled, "Procedures for Handling Post-Approval Studies Imposed by Premarket Approval Application Order" (https://www.fda.gov/media/71327/download).

This is a reminder that as of September 24, 2014, class III devices are subject to certain provisions of the final Unique Device Identification (UDI) rule. These provisions include the requirement to provide a UDI on the device label and packages (21 CFR 801.20), format dates on the device label in accordance with 21 CFR 801.18, and submit data to the Global Unique Device Identification Database (GUDID) (21 CFR Part 830 Subpart E). Additionally, 21 CFR 814.84 (b)(4) requires PMA annual reports submitted after September 24, 2014, to identify each device identifier currently in use for the subject device, and the device identifiers for devices that have been discontinued since the previous periodic report. It is not necessary to identify any device identifier discontinued prior to December 23, 2013. Combination Products may also be subject to UDI requirements (see 21 CFR 801.30). For more information on these requirements, please see the UDI website available at https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/unique-device-identification-udi-system.

Before making any change affecting the safety or effectiveness of the PMA device, you must submit a PMA supplement or an alternate submission (30-day notice) in accordance with 21 CFR 814.39. All PMA supplements and alternate submissions (30-day notice) must comply with the applicable requirements in 21 CFR 814.39. Additional information about changes that may require a PMA supplement are provided in the FDA guidance document entitled, "Modifications to Devices Subject to Premarket Approval (PMA) - The PMA Supplement Decision-Making Process" https://www.fda.gov/media/81431/download.

Your device is also subject to, among other requirements, the Quality Management System Regulation (QMSR) (21 CFR Part 820), which includes, but is not limited to, ISO 13485 clause 7.3 (Design controls),

ISO 13485 clause 8.3 (Nonconforming product), and ISO 13485 clause 8.5 (Corrective and preventative action). Please note that regardless of whether a change requires premarket review, the QMSR requires device manufacturers to review and approve changes to device design and production and process controls (ISO 13485 clause 7.3 and 21 CFR 820.70) and document changes and approvals in the device master record (21 CFR 820.181).

You are reminded that many FDA requirements govern the manufacture, distribution, and marketing of devices. For example, in accordance with the Medical Device Reporting (MDR) regulation, 21 CFR 803.50 and 21 CFR 803.52 for devices or post-marketing safety reporting (21 CFR Part 4, Subpart B) for combination products, you are required to report adverse events for this device. Manufacturers of medical devices, including in vitro diagnostic devices, are required to report to FDA no later than 30 calendar days after the day they receive or otherwise becomes aware of information, from any source, that reasonably suggests that one of their marketed devices:

1. May have caused or contributed to a death or serious injury; or

2. Has malfunctioned and such device or similar device marketed by the manufacturer would be likely to cause or contribute to a death or serious injury if the malfunction were to recur.

Additional information on MDR, including how, when, and where to report, is available at https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems and on combination product post-marketing safety reporting is available at https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products.

In accordance with the recall requirements specified in 21 CFR 806.10 for devices or the post-marketing safety reporting requirements (21 CFR Part 4, Subpart B) for combination products, you are required to submit a written report to FDA of any correction or removal of this device initiated by you to: (1) reduce a risk to health posed by the device; or (2) remedy a violation of the act caused by the device which may present a risk to health, with certain exceptions specified in 21 CFR 806.10(a)(2). Additional information on recalls is available at https://www.fda.gov/safety/recalls-market-withdrawals-safety-alerts/industry-guidance-recalls.

CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading. CDRH will notify the public of its decision to approve your PMA by making available, among other information, a summary of the safety and effectiveness data upon which the approval is based. The information can be found at https://www.fda.gov/medical-devices/device-approvals-denials-and-clearances/pma-approvals. Written requests for this information can also be made to the Food and Drug Administration, Dockets Management Branch, (HFA-305), 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. The written request should include the PMA number or docket number. Within 30 days from the date that this information is placed on the Internet, any interested person may seek review of this decision by submitting a petition for review under section 515(g) of the act and requesting either a hearing or review by an independent advisory committee. FDA may, for good cause, extend this 30-day filing period.

Failure to comply with any post-approval requirement constitutes a ground for withdrawal of approval of a PMA. The introduction or delivery for introduction into interstate commerce of a device that is not in compliance with its conditions of approval is a violation of law.

You are reminded that, as soon as possible and before commercial distribution of your device, you must submit an amendment to this PMA submission with a copy of all final labeling. Final labeling that is identical to the labeling approved in draft form will not routinely be reviewed by FDA staff when accompanied by a cover letter stating that the final labeling is identical to the labeling approved in draft form. If the final labeling is not identical, any changes from the final draft labeling should be highlighted and explained in the amendment.

All required documents should be submitted to the CDRH Portal and should reference the above PMA number to facilitate processing. For more information on the CDRH Portal, please visit https://www.fda.gov/medical-devices/industry-medical-devices/send-and-track-medical-device-premarket-submissions-online-cdrh-portal.

If you have any questions concerning this approval order, please contact Meixia Bi at 240-402-2058 or Meixia.Bi@fda.hhs.gov.

Sincerely,

BLETA VUNIQI -S

Digitally signed by BLETA VUNIQI -S

Bleta Vuniqi Houtkamp
Acting Office Director
OHT4: Office of Surgical and Infection Control Devices
Office of Product Evaluation and Quality
Center for Devices and Radiological Health