Dear Mr. Votzmeyer:

Please refer to your supplemental biologics license application submitted and received April 26, 2007, for HUMIRA (adalimumab).

This supplemental biologics license application, which proposes to expand the indication to include the treatment of Juvenile Idiopathic Arthritis and add a 20mg pre-filled syringe, has been approved.

This supplement also fulfills your commitment to “Continue study DE038, A Multi-center, Randomized, Double-Blind, Placebo-Controlled Study of the Safety and Efficacy of Human Anti-TNF Monoclonal Antibody Adalimumab in Children with Polyarticular Juvenile Rheumatoid Arthritis” as stated in commitment number 5 and commitment number 1 of the December 31, 2002, and July 30, 2004, approval letters, respectively.

We release you from your commitment to “Evaluate the feasibility of conducting a study in patients’ age zero to less than 4 years, and if appropriate, submit a pediatric study plan or request a waiver by March 31, 2007,” as stated in commitment number 2 of the July 30, 2004, approval letter and your commitment for the “Deferred pediatric study under PREA to expand the indication to include recently diagnosed patients with moderately to severely active rheumatoid arthritis who have not received methotrexate in pediatric patients ages 0 to 4 until March 31, 2007,” as stated in commitment number 1 of the October 3, 2005, approval letter.

The final printed labeling (FPL) must be identical to the enclosed labeling for the package insert, Medication Guide and the carton and container labels. Marketing the product with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.
FDA previously approved a Medication Guide required for distribution with this product in accordance with 21 CFR Part 208. FDA hereby approves the revised draft Medication Guide you submitted on February 20, 2008.

Please note that:

- this Medication Guide must be reprinted immediately following the last section of labeling or, alternatively, accompany the prescription drug labeling [21 CFR 201.57(c)(18) or 21 CFR 201.80(f)(2)];

- you are responsible for ensuring that this Medication Guide is available for distribution to every patient who is dispensed a prescription for this product [21 CFR 208.24];

- the final printed Medication Guide distributed to patients must conform to all conditions described in 21 CFR 208.20, including a minimum of 10 point text; and

- you are responsible for ensuring that the label of each container or package includes a prominent and conspicuous instruction to authorized dispensers to provide a Medication Guide to each patient to whom the drug is dispensed, and states how the Medication Guide is provided [21 CFR 208.24(d)].

Within 21 days of the date of this letter, submit content of labeling [21 CFR 601.14(b)] in structured product labeling (SPL) format, as described at http://www.fda.gov/oc/datacouncil/spl.html, that is identical in content to the enclosed labeling text. Upon receipt, we will transmit that version to the National Library of Medicine for public dissemination. For administrative purposes, please designate this submission “Product Correspondence – Final SPL for approved STN BL 125057/114.” In addition, within 21 days of the date of this letter, amend any pending supplement(s) for this BLA with content of labeling in SPL format to include the changes approved in this supplement.

All applications for new active ingredients, new dosage forms, new indications, new routes of administration, and new dosing regimens are required to contain an assessment of the safety and effectiveness of the product in pediatric patients unless this requirement is waived or deferred. We are waiving the pediatric study requirement for ages 0 to less than 2 years for this application.

We acknowledge your written commitments to conduct the following postmarketing studies as described in your letter of February 20, 2008, as outlined below:

**Postmarketing Study Commitments subject to reporting requirements of 21 CFR 601.70.**

1. Conduct Study Protocol P10-262, an 800-patient observational study, with inclusion of a reference group, of pediatric patients 4 to 17 years of age with moderately to severely active polyarticular juvenile idiopathic arthritis (JIA). The proposed protocol will be submitted for the Division’s review by March 31, 2008. The final protocol will be

2. Conduct a compassionate use study in patients 2 to 4 years of age with moderately to severely active polyarticular juvenile idiopathic arthritis (JIA) to collect pharmacokinetic data in 6 to 20 patients and to collect safety data in 30 patients according to the safety assessment specified in postmarketing commitment number 1. The proposed protocol will be submitted for the Division’s review by March 31, 2008. The final protocol will be submitted by May 30, 2008. The study will be initiated by August 31, 2008. A 5-year interim study report will be submitted by June 30, 2014. The final study report will be submitted by December 31, 2021.

We request that you submit clinical protocols to your IND, with a cross-reference letter to this biologics license application (BLA), STN BL 125057. Submit nonclinical and chemistry, manufacturing, and controls protocols and all study final reports to your BLA STN BL 125057. Please use the following designators to label prominently all submissions, including supplements, relating to these postmarketing study commitments as appropriate:

- Postmarketing Study Commitment Protocol
- Postmarketing Study Commitment - Final Study Report
- Postmarketing Study Correspondence
- Annual Status Report of Postmarketing Study Commitments

For each postmarketing study subject to the reporting requirements of 21 CFR 601.70, you must describe the status in an annual report on postmarketing studies for this product. The status report for each study should include:

- information to identify and describe the postmarketing commitment,
- the original schedule for the commitment;
- the status of the commitment (i.e., pending, ongoing, delayed, terminated, or submitted);
- an explanation of the status including, for clinical studies, the patient accrual rate (i.e., number enrolled to date and the total planned enrollment); and
- a revised schedule if the study schedule has changed and an explanation of the basis for the revision.

As described in 21 CFR 601.70(e), we may publicly disclose information regarding these postmarketing studies on our Web site (http://www.fda.gov/cder/pmc/default.htm). Please refer to the February 2006 Guidance for Industry: Reports on the Status of Postmarketing Study Commitments - Implementation of Section 130 of the Food and Drug Administration Modernization Act of 1997 (see http://www.fda.gov/cder/guidance/5569fnl.htm) for further information.
We remind you of the waiver of the requirements of 21 CFR 201.57 (d)(8) regarding the length of the Highlights of Prescribing Information section documented in the approval letter dated February 27, 2007. Please note that this waiver applies to the labeling approved for sBLA 125057/114 and all future supplements containing revised labeling, including this supplemental application, unless we notify you otherwise.

You may submit draft copies of the proposed introductory advertising and promotional labeling with a cover letter requesting advisory comments to the Food and Drug Administration, Center for Drug Evaluation and Research, Division of Drug Marketing, Advertising and Communication, 5901-B Ammendale Road, Beltsville, MD 20705-1266. Final printed advertising and promotional labeling should be submitted at the time of initial dissemination, accompanied by a FDA Form 2253.

All promotional claims must be consistent with and not contrary to approved labeling. You should not make a comparative promotional claim or claim of superiority over other products unless you have substantial evidence to support that claim.

Please refer to http://www.fda.gov/cder/biologics/default.htm for information regarding therapeutic biological products, including the addresses for submissions.

This information will be included in your biologics license application file.

Sincerely,

Rigoberto Roca, MD
Deputy Director
Division of Anesthesia, Analgesia and Rheumatology Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research