



NDA 22-110/S-013

**SUPPLEMENT APPROVAL**

Theravance Biopharma Antibiotics, Inc.  
Attention: Rebecca Coleman, PharmD  
Vice President, Regulatory Affairs and Quality  
901 Gateway Boulevard  
South San Francisco, CA 94080

Dear Dr. Coleman:

Please refer to your Supplemental New Drug Application (sNDA) dated September 28, 2015, received September 29, 2015, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Vibativ (telavancin) for Injection, 250 mg and 750 mg.

This "Prior Approval" supplemental new drug application provides for modifications to the REMS approved on November 12, 2014. These modifications were proposed in response to an FDA form 483, issued as a result of an inspection of Theravance Biopharma US, Inc., the week of June 22, 2015.

**RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS**

The REMS for Vibativ (telavancin) for Injection was originally approved on September 11, 2009, and the most recent modification was approved on November 12, 2014. The REMS consists of a Medication Guide, a communication plan, and a timetable for submission of assessments of the REMS. Your proposed modification to the REMS consists of changing the communication plan to add one more distribution of the *Dear Healthcare Provider (DHCP) Letter* to healthcare providers. In addition, the requirement for professional societies to distribute the DHCP letter has been removed from the communication plan.

Your proposed modified REMS, submitted on September 29, 2015, amended on March 16, 2016, and appended to this letter, is approved.

The timetable for submission of assessments of the REMS will remain the same as that approved on June 21, 2013.

There are no changes to the REMS assessment plan described in our June 21, 2013, letter.

We remind you that in addition to the REMS assessments submitted according to the timetable in the approved REMS, you must include an adequate rationale to support a proposed REMS modification for the addition, modification, or removal of any goal or element of the REMS, as described in section 505-1(g)(4) of the FDCA.

We also remind you that you must submit a REMS assessment when you submit a supplemental application for a new indication for use as described in section 505-1(g)(2)(A) of the FDCA. This assessment should include:

- a) An evaluation of how the benefit-risk profile will or will not change with the new indication;
- b) A determination of the implications of a change in the benefit-risk profile for the current REMS;
- c) *If the new indication for use introduces unexpected risks:* A description of those risks and an evaluation of whether those risks can be appropriately managed with the currently approved REMS.
- d) *If a REMS assessment was submitted in the 18 months prior to submission of the supplemental application for a new indication for use:* A statement about whether the REMS was meeting its goals at the time of that last assessment and if any modifications of the REMS have been proposed since that assessment.
- e) *If a REMS assessment has not been submitted in the 18 months prior to submission of the supplemental application for a new indication for use:* Provision of as many of the currently listed assessment plan items as is feasible.
- f) *If you propose a REMS modification based on a change in the benefit-risk profile or because of the new indication of use, submit an adequate rationale to support the modification, including:* Provision of the reason(s) why the proposed REMS modification is necessary; the potential effect on the serious risk(s) for which the REMS was required, on patient access to the drug, and/or on the burden on the health care delivery system; and other appropriate evidence or data to support the proposed change. Additionally, include any changes to the assessment plan necessary to assess the proposed modified REMS. *If you are not proposing REMS modifications, provide a rationale for why the REMS does not need to be modified.*

If the assessment instruments and methodology for your REMS assessments are not included in the REMS supporting document, or if you propose changes to the submitted assessment instruments or methodology, you should update the REMS supporting document to include specific assessment instrument and methodology information at least 90 days before the assessments will be conducted. Updates to the REMS supporting document may be included in a new document that references previous REMS supporting document submission(s) for unchanged portions. Alternatively, updates may be made by modifying the complete previous REMS supporting document, with all changes marked and highlighted.

Prominently identify the submission containing the assessment instruments and methodology with the following wording in bold capital letters at the top of the first page of the submission:

**NDA 22-110 REMS CORRESPONDENCE  
(insert concise description of content in bold capital letters, e.g.,  
UPDATE TO REMS SUPPORTING DOCUMENT - ASSESSMENT  
METHODOLOGY)**

An authorized generic drug under this NDA must have an approved REMS prior to marketing. Should you decide to market, sell, or distribute an authorized generic drug under this NDA, contact us to discuss what will be required in the authorized generic drug REMS submission.

Prominently identify the submission containing the REMS assessments or proposed modifications of the REMS with the following wording in bold capital letters at the top of the first page of the submission as appropriate:

**NDA 22110 REMS ASSESSMENT**

**NEW SUPPLEMENT FOR NDA 22110  
CHANGES BEING EFFECTED IN 30 DAYS  
PROPOSED MINOR REMS MODIFICATION**

*or*

**NEW SUPPLEMENT FOR NDA 22110  
PRIOR APPROVAL SUPPLEMENT  
PROPOSED MAJOR REMS MODIFICATION**

*or*

**NEW SUPPLEMENT FOR NDA  
PRIOR APPROVAL SUPPLEMENT  
PROPOSED REMS MODIFICATIONS DUE TO SAFETY LABEL CHANGES  
SUBMITTED IN SUPPLEMENT XXX**

*or*

**NEW SUPPLEMENT (NEW INDICATION FOR USE)  
FOR NDA 22110  
REMS ASSESSMENT  
PROPOSED REMS MODIFICATION (if included)**

Should you choose to submit a REMS revision, prominently identify the submission containing the REMS revisions with the following wording in bold capital letters at the top of the first page of the submission:

**REMS REVISIONS FOR NDA 22110**

To facilitate review of your submission, we request that you submit your proposed modified REMS and other REMS-related materials in Microsoft Word format. If certain documents, such as enrollment forms, are only in PDF format, they may be submitted as such, but the preference is to include as many as possible in Word format.

If you do not submit electronically, please send 5 copies of REMS-related submissions.

**REPORTING REQUIREMENTS**

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

If you have any questions, call J. Christopher Davi, MS, Senior Regulatory Project Manager, at (301) 796-0702.

Sincerely,

*{See appended electronic signature page}*

Joseph G. Toerner, MD, MPH  
Deputy Director for Safety  
Division of Anti-Infective Products  
Office of Antimicrobial Products  
Center for Drug Evaluation and Research

ENCLOSURE: REMS

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**This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.**  
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/s/  
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JOSEPH G TOERNER  
03/23/2016