

Food and Drug Administration Silver Spring MD 20993

BLA 761029/S-005

SUPPLEMENT APPROVAL

Biogen Inc. Attention: Trevor Mill, Senior Vice President, Regulatory Affairs

14 Cambridge Center Cambridge, MA 02142

Dear Mr. Mill:

Please refer to your Supplemental Biologics License Application (sBLA) dated and received May 5, 2017, and your amendments, submitted under section 351(a) of the Public Health Service Act for Zinbryta (daclizumab) injection 150 mg/ml.

We also refer to our *Supplement Approval/REMS Modification Notification letter* dated August 28, 2017, notifying you to conform the approved risk evaluation and mitigation strategy (REMS) to the safety labeling changes pertaining to the risks of hepatic injury and immune-mediated reactions. The safety labeling changes were also approved in the August 28, 2017 letter.

This Prior Approval supplemental biologics application proposes modifications to the approved Zinbryta (daclizumab) REMS.

We have completed our review of this supplemental application, as amended. It is approved effective on the date of this letter.

## RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS

The REMS for Zinbryta (daclizumab) was originally approved on May 27, 2016. The REMS consists of a communication plan, elements to assure safe use, an implementation system, and a timetable for submission of assessments of the REMS. Your proposed modifications to the REMS consist of a secured web-based tool to complete prescriber certification and enrollment and patient enrollment and monitoring online, and editorial changes to the REMS document. In addition, in order to ensure the benefits of Zinbryta outweigh its risks, we determined that you were required to make the following REMS modifications: changes to the REMS materials to conform to the safety labeling changes pertaining to the risks of hepatic injury and immunemediated reactions that were approved on August 28, 2017.

Your proposed modified REMS, submitted on November 1, 2017, amended and appended to this letter, is approved.

The timetable for submission of assessments of the REMS remains the same as that approved on May 27, 2016.

There are no changes to the REMS assessment plan described in our May 27, 2016, 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 of 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 the 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:

BLA 761029 REMS CORRESPONDENCE (insert concise description of content in bold capital letters, e.g., UPDATE TO REMS SUPPORTING DOCUMENT - ASSESSMENT METHODOLOGY)

Prominently identify any 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:

**BLA 761029 REMS ASSESSMENT** 

NEW SUPPLEMENT FOR BLA 761029/S-000 CHANGES BEING EFFECTED IN 30 DAYS PROPOSED MINOR REMS MODIFICATION

or

NEW SUPPLEMENT FOR BLA 761029/S-000 PRIOR APPROVAL SUPPLEMENT PROPOSED MAJOR REMS MODIFICATION

or

NEW SUPPLEMENT FOR BLA 761029/S-000
PRIOR APPROVAL SUPPLEMENT
PROPOSED REMS MODIFICATIONS DUE TO SAFETY LABEL CHANGES
SUBMITTED IN SUPPLEMENT XXX

or

NEW SUPPLEMENT (NEW INDICATION FOR USE) FOR BLA 761029/S-000 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 BLA 761029** 

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.

## SUBMISSION OF REMS DOCUMENT IN SPL FORMAT

FDA can accept the REMS document in Structured Product Labeling (SPL) format. If you intend to submit the REMS document in SPL format, as soon as possible, but no later than 14 days from the date of this letter, submit the REMS document in SPL format using the FDA automated drug registration and listing system (eLIST).

For more information on submitting REMS in SPL format, please email REMS\_Website@fda.hhs.gov.

## **REPORTING REQUIREMENTS**

We remind you that you must comply with reporting requirements for an approved BLA (in 21 CFR 600.80 and in 21 CFR 600.81).

If you have any questions, contact Laurie Kelley, Regulatory Project Manager, at laurie.kelley@fda.hhs.gov.

Sincerely,

{See appended electronic signature page}

Alice Hughes, M.D.
Deputy Director for Safety
Division of Neurology Products
Office of Drug Evaluation I
Center for Drug Evaluation and Research

ENCLOSURE: REMS

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.
/s/
ALICE HUGHES 11/01/2017