



BLA 125274/S-115

**SUPPLEMENT APPROVAL  
FULFILLMENT OF POSTMARKETING REQUIREMENTS**

Ipsen Biopharmaceuticals, Inc.  
Attention: James Sullivan  
Senior Director, Global Regulatory Affairs  
650 E. Kendall Street  
Cambridge, MA 02142

Dear Mr. Sullivan:

Please refer to your supplemental biologics license application (sBLA), dated March 25, 2019, received March 25, 2019, and your amendments, submitted under section 351(a) of the Public Health Service Act for Dysport (abobotulinumtoxinA).

This Prior Approval supplemental biologics application provides for the addition of the following indication: treatment of upper limb spasticity in pediatric patients 2 years of age and older, excluding spasticity caused by cerebral palsy.

**APPROVAL & LABELING**

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling.

**WAIVER OF HIGHLIGHTS ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS**

Please note that we previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of Prescribing Information.

**CONTENT OF LABELING**

As soon as possible, but no later than 14 days from the date of this letter, submit, via the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 601.14(b)] in structured product labeling (SPL) format, as described at FDA.gov,<sup>1</sup> that is identical to the enclosed labeling (text for the Prescribing Information and Medication Guide) and include the labeling changes proposed in any pending “Changes Being Effected” (CBE) supplements.

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<sup>1</sup> <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*.<sup>2</sup>

The SPL will be accessible via publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that include labeling changes for this BLA, including pending “Changes Being Effected” (CBE) supplements, for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 601.12(f)] in Microsoft Word format that includes the changes approved in this supplemental application, as well as annual reportable changes. To facilitate review of your submission(s), provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

### **REQUIRED PEDIATRIC ASSESSMENTS**

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We note that you have fulfilled the pediatric study requirement for all relevant pediatric age groups for this application.

### **FULFILLMENT OF POSTMARKETING REQUIREMENTS (PMRs) UNDER 505(o) and PREA**

Your March 25, 2019, submission contains the final report for the following PMR listed in the July 15, 2015, approval letter for BLA 125274/S-102.

PREA PMR 2933-2

A randomized, double-blind, adequately controlled, multiple fixed doses, parallel group clinical study of Dysport (abobotulinumtoxinA) in botulinum toxin-naïve children age 2-17 years with upper extremity spasticity. The minimum duration of the study is 12 weeks. The study should be submitted to the FDA for special protocol assessment.

Your March 25, 2019, submission contains the final report for the following PMR for BLA 125274.

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<sup>2</sup> We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

PMR 2564-5

Submit safety data assessing distant spread of toxin effects after multiple administrations of Dysport (abobotulinumtoxinA), during a minimum period of 12 months, collected in at least 100 pediatric patients (ages 2-17 years) (approximately half upper, and half lower extremity spasticity). In addition, submit data assessing the effects of Dysport (abobotulinumtoxinA) on blood glucose and alkaline phosphatase as a marker of bone metabolism. These safety data could come from open-label extensions of the clinical studies specified under #5-8 below, from separate long-term open-label safety studies, or from a long-term controlled safety and efficacy study. The doses evaluated must be at least as high as those shown effective in studies specified under #5-8 below, or those commonly used to treat spasticity.

We have reviewed your submission and conclude that the above postmarketing requirements were fulfilled.

### **PROMOTIONAL MATERIALS**

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the Prescribing Information to:

OPDP Regulatory Project Manager  
Food and Drug Administration  
Center for Drug Evaluation and Research  
Office of Prescription Drug Promotion  
5901-B Ammendale Road  
Beltsville, MD 20705-1266

Alternatively, you may submit a request for advisory comments electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format—Promotional Labeling and Advertising Materials for Human Prescription Drugs*.<sup>3</sup>

As required under 21 CFR 601.12(f)(4), you must submit final promotional materials, and the Prescribing Information, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at FDA.gov.<sup>4</sup>

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<sup>3</sup> When final, this guidance will represent the FDA's current thinking on this topic. For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

<sup>4</sup> <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>

Information and Instructions for completing the form can be found at FDA.gov.<sup>5</sup> For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see FDA.gov.<sup>6</sup>

### **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 Taura Holmes, PharmD, MS, GWCPM, Senior Regulatory Project Manager, at [Taura.Holmes@fda.hhs.gov](mailto:Taura.Holmes@fda.hhs.gov).

Sincerely,

*{See appended electronic signature page}*

Eric Bastings, MD  
Acting Director  
Division of Neurology Products  
Office of Drug Evaluation I  
Center for Drug Evaluation and Research

### ENCLOSURES:

- Content of Labeling
  - Prescribing Information
  - Medication Guide

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<sup>5</sup> <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>

<sup>6</sup> <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>

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**This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.**  
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/s/  
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ERIC P BASTINGS  
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