



NDA 204275/S-017

SUPPLEMENT APPROVAL

GlaxoSmithKline
Five More Drive
P. O. Box 13398
Research Triangle Park, NC 27709

Attention: Patrick D. Wire, Pharm. D.
Senior Director, Regulatory Affairs

Dear Dr. Wire:

Please refer to your Supplemental New Drug Application (sNDA) dated June 27, 2018 and your amendment, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Breo Ellipta (fluticasone furoate/vilanterol inhalation powder), 100/25 mcg and 200/205 mcg.

This Prior Approval supplemental new drug application proposes to update section 5.14 of the WARNINGS AND PRECAUTIONS part of the labeling with information regarding referral of those patients who develop ocular symptoms to an ophthalmologist. The Patient Information Leaflet was also revised accordingly.

APPROVAL & LABELING

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

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content of labeling must be identical to the enclosed labeling text for the Prescribing Information, Patient Information Leaflet, and Instructions for Use with the addition of any labeling changes in pending "Changes Being Effected" (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

Information on submitting SPL files using eList may be found in the guidance for industry titled “SPL Standard for Content of Labeling Technical Qs and As” at <http://www.fda.gov/downloads/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that include labeling changes for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] 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 in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because none of these criteria apply to your application, you are exempt from this requirement.

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 Carol F. Hill, Senior Regulatory Health Project Manager for Safety, at 301-796-1226.

Sincerely,

{See appended electronic signature page}

Sally Seymour, MD
Acting Director
Division of Pulmonary, Allergy, and Rheumatology
Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

ENCLOSURES:

Content of Labeling

Prescribing Information

Patient Information Leaflet

Instructions for Use

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.

/s/

BANU A KARIMI SHAH

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signing with the delegated authority of Dr. Sally Seymour, Acting Division Director, DPARP