Dear Dr. Pitt:

Please refer to your biologics license application (BLA) dated and received June 11, 2019, and your amendments, submitted under section 351(a) of the Public Health Service Act for Uplizna (inebilizumab-cdon) injection, for intravenous use.

**LICENSING**

We are issuing Department of Health and Human Services U.S. License No. 2129 to Viela Bio, Gaithersburg, Maryland, under the provisions of section 351(a) of the Public Health Service Act controlling the manufacture and sale of biological products. The license authorizes you to introduce or deliver for introduction into interstate commerce, those products for which your company has demonstrated compliance with establishment and product standards.

Under this license, you are authorized to manufacture the product Uplizna (inebilizumab-cdon). Uplizna is indicated for the treatment of neuromyelitis optica spectrum disorder (NMOSD) in adult patients who are anti-aquaporin-4 (AQP4) antibody positive.

**MANUFACTURING LOCATIONS**

Under this license, you are approved to manufacture inebilizumab-cdon drug substance. The final formulated drug product will be manufactured, and filled at . The drug product vials will be labeled and packaged at . You may label your product with the proprietary name, Uplizna, and market it in a 100 mg/10mL (10 mg/mL concentration) single-dose vial, injection.

Reference ID: 4623153
DATING PERIOD

The dating period for Uplizna shall be 36 months from the date of manufacture when stored at 2°C to 8°C. The date of manufacture shall be defined as the date of final sterile filtration of the formulated drug product. The dating period for your drug substance shall be 36 months from the date of manufacture when stored at 2°C to 8°C.

We have approved the stability protocol in your license application for the purpose of extending the expiration dating period of your drug substance and drug product under 21 CFR 601.12.

FDA LOT RELEASE

You are not currently required to submit samples of future lots of Uplizna to the Center for Drug Evaluation and Research (CDER) for release by the Director, CDER, under 21 CFR 610.2. We will continue to monitor compliance with 21 CFR 610.1, requiring completion of tests for conformity with standards applicable to each product prior to release of each lot.

Any changes in the manufacturing, testing, packaging, or labeling of Uplizna, or in the manufacturing facilities, will require the submission of information to your biologics license application for our review and written approval, consistent with 21 CFR 601.12.

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.

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. Content of labeling must be identical to the enclosed labeling (text for the Prescribing Information and Medication Guide). 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.

1 http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm
2 We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database at https://www.fda.gov/RegulatoryInformation/Guidances/default.htm.

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The SPL will be accessible via publicly available labeling repositories.

**CARTON AND CONTAINER LABELING**

Submit final printed carton and container labeling that are identical to the carton and container labeling submitted on March 3, 2020, as soon as they are available, but no more than 30 days after they are printed. Please submit labeling electronically according to the guidance for industry *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. For administrative purposes, designate this submission “Final Printed Carton and Container Labeling for approved BLA 761142”. Approval of this submission by FDA is not required before the labeling is used.

**ADVISORY COMMITTEE**

Your application for Uplizna was not referred to an FDA advisory committee because the safety profile is acceptable for NMOSD in adult patients who are anti-AQP4 antibody positive, the clinical trial design is acceptable, the efficacy findings are clear, and outside expertise was not necessary; there were no controversial issues that would benefit from advisory committee discussion.

**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.

Because this drug product for this indication has an orphan drug designation, you are exempt from this requirement.

**POSTMARKETING REQUIREMENTS UNDER 505(o)**

Section 505(o)(3) of the FDCA authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to identify an unexpected serious risk of adverse maternal, fetal, and infant outcomes resulting from the use of Uplizna (inebilizumab-cdon) during pregnancy.

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Furthermore, the active postmarket risk identification and analysis system as available under section 505(k)(3) of the FDCA will not be sufficient to assess this serious risk. Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following study:

3869-1 A worldwide single-arm pregnancy safety study to collect and analyze information for a minimum of 10 years on pregnancy complications and birth outcomes in women exposed to UPLIZNA (inebilizumab-cdon) during pregnancy in patients with neuromyelitis optica spectrum disorder (NMOSD). Provide a complete protocol which includes details regarding how you plan to encourage patients and providers to report pregnancy exposures (e.g., telephone contact number and/or website in prescribing information), measures to ensure complete data capture regarding pregnancy outcomes and any adverse effects in offspring, and plans for comprehensive data analysis and yearly reporting.

The timetable you submitted on June 2, 2020, states that you will conduct this study according to the following schedule:

Draft Protocol Submission: 12/2020
Final Protocol Submission: 08/2021
Annual Interim Report Submissions: 08/2022
08/2023
08/2024
08/2025
08/2026
08/2027
08/2028
08/2029
08/2030
08/2031

Study Completion: 08/2032
Final Report Submission: 08/2033

FDA considers the term final to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.\(^3\)

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess a signal of a serious risk of diminished


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serum immunoglobulin levels and the potential for a resultant increased risk of infections, particularly opportunistic infections.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following trial:

3869-2 A safety trial to monitor serum immunoglobulin G and M levels in patients with neuromyelitis optica spectrum disorder (NMOSD) during treatment with UPLIZNA (inebilizumab-cdon) to establish the nadir in circulating immunoglobulins during chronic treatment, and to monitor patients after discontinuation of treatment with UPLIZNA (inebilizumab-cdon) in order to ascertain the time needed to ensure restoration of pre-treatment baseline circulating serum levels of immunoglobulins G and M. This trial also should be designed to capture rates of infections, especially opportunistic and recurrent infections associated with immune suppression, and there should be monitoring of B-cell counts throughout treatment and after discontinuation until repletion of immunoglobulin levels.

The timetable you submitted on June 2, 2020, states that you will conduct this trial according to the following schedule:

- Draft Protocol Submission: 12/2020
- Final Protocol Submission: 08/2021
- Trial Completion: 08/2027
- Final Report Submission: 08/2028

FDA considers the term final to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.

Submit clinical protocol(s) to your IND 117295 with a cross-reference letter to this BLA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all final report(s) to your BLA. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate: Required Postmarketing Protocol Under 505(o), Required Postmarketing Final Report Under 505(o), Required Postmarketing Correspondence Under 505(o).

Submission of the protocol(s) for required postmarketing observational studies to your IND is for purposes of administrative tracking only. These studies do not constitute clinical investigations pursuant to 21 CFR 312.3(b) and therefore are not subject to the

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4 See the guidance for Industry Postmarketing Studies and Clinical Trials—Implementation of Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act (October 2019).
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IND requirements under 21 CFR part 312 or FDA's regulations under 21 CFR parts 50 (Protection of Human Subjects) and 56 (Institutional Review Boards).

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR 601.70, requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 601.70 to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 601.70. We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

**POSTMARKETING COMMITMENTS NOT SUBJECT TO THE REPORTING REQUIREMENTS UNDER SECTION 506B**

We remind you of your postmarketing commitment:

3869-3  A shipping study to confirm stability of inebilizumab-cdon drug substance during shipping under conditions and through a route

The study will include monitoring of temperature during three shipments covering the drug substance bag fill range and testing of post-shipping materials for product quality against applicable approved drug substance release acceptance criteria.

The timetable you submitted on June 2, 2020, states that you will conduct this study according to the following schedule:

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draft Protocol Submission</td>
<td>12/2020</td>
</tr>
<tr>
<td>Final Protocol Submission</td>
<td>06/2021</td>
</tr>
<tr>
<td>Study/Trial Completion</td>
<td>06/2022</td>
</tr>
<tr>
<td>Final Report Submission</td>
<td>12/2022</td>
</tr>
</tbody>
</table>

A final submitted protocol is one that the FDA has reviewed and commented upon, and you have revised as needed to meet the goal of the study or clinical trial.
Submit clinical protocols to your IND 117295 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this BLA. In addition, under 21 CFR 601.70 you should include a status summary of each commitment in your annual progress report of postmarketing studies to this BLA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled “Postmarketing Commitment Protocol,” “Postmarketing Commitment Final Report,” or “Postmarketing Commitment Correspondence.”

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. For information about submitting promotional materials, see the final guidance for industry Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs.  

You must submit final promotional materials and Prescribing Information, accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. Form FDA 2253 is available at FDA.gov. Information and Instructions for completing the form can be found at FDA.gov.

REPORTING REQUIREMENTS

You must submit adverse experience reports under the adverse experience reporting requirements for licensed biological products (21 CFR 600.80).

Prominently identify all adverse experience reports as described in 21 CFR 600.80.

You must submit distribution reports under the distribution reporting requirements for licensed biological products (21 CFR 600.81).

You must submit reports of biological product deviations under 21 CFR 600.14. You should promptly identify and investigate all manufacturing deviations, including those associated with processing, testing, packing, labeling, storage, holding, and distribution. If the deviation involves a distributed product, may affect the safety, purity, or potency of the product, and meets the other criteria in the regulation, you must submit a report on Form FDA 3486 to:

5 For the most recent version of a guidance, check the FDA guidance web page at https://www.fda.gov/media/128163/download.
6 http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf
7 http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf

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MEDWATCH-TO-MANUFACTURER PROGRAM

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at FDA.gov.8

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biological products qualify for a post-approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application.

8 http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm

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If you have any questions, please call Sandra Folkendt, Regulatory Project Manager, at (240) 402-2804.

Sincerely,

{See appended electronic signature page}

Billy Dunn, MD
Director (Acting)
Office of Neuroscience
Center for Drug Evaluation and Research

ENCLOSURE(S):
  • Content of Labeling
    o Prescribing Information
    o Medication Guide
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/

WILLIAM H Dunn
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