

BLA 761118/S-007

## SUPPLEMENT APPROVAL

Pfizer Inc. 1 Burtt Road Andover, MA 01810

Attention: Christy Meng Director, Global Regulatory Affairs

Dear Christy Meng:

Please refer to your supplemental biologics license application (sBLA), dated and received December 14, 2021, and your amendments, submitted under section 351(k) of the Public Health Service Act for Abrilada (adalimumab-afzb) injection 10 mg/0.2 mL, 20 mg/0.4 mL, and 40 mg/0.8 mL for subcutaneous use. The corresponding reference products are US-licensed Humira (adalimumab) injection for subcutaneous use 10 mg/0.2 mL, 20 mg/0.4 mL, and 40 mg/0.8 mL, respectively.

We acknowledge receipt of your December 22, 2022, and July 20, 2023, submissions which constituted a response to our October 14, 2022, Provisional Determination action letter.

This Prior Approval supplemental biologics license application proposes the following change(s):

- the prefilled syringe presentation of Abrilada (adalimumab-afzb) injection for subcutaneous use,10 mg/0.2 mL and 20 mg/0.4 mL, as interchangeable with the corresponding presentation of US-licensed Humira (adalimumab) injection for subcutaneous use, 10 mg/0.2 mL and 20 mg/0.4 mL respectively, and
- the prefilled glass syringe, prefilled pen, and glass vial presentations of Abrilada (adalimumab-afzb) injection for subcutaneous use, 40 mg/0.8 mL, as interchangeable with the corresponding presentations of US-licensed Humira (adalimumab) injection for subcutaneous use, 40 mg/0.8 mL.

Abrilada is licensed for the following indications:

- Rheumatoid Arthritis (RA): reducing signs and symptoms, inducing major clinical response, inhibiting the progression of structural damage, and improving physical function in adult patients with moderately to severely active RA.
- Juvenile Idiopathic Arthritis (JIA): reducing signs and symptoms of moderately to severely active polyarticular JIA in patients 2 years of age and older.

- Psoriatic Arthritis (PsA): reducing signs and symptoms, inhibiting the progression of structural damage, and improving physical function in adult patients with active PsA.
- Ankylosing Spondylitis (AS): reducing signs and symptoms in adult patients with active AS.
- Crohn's Disease (CD): treatment of moderately to severely active Crohn's disease in adults and pediatric patients 6 years of age and older.
- Ulcerative Colitis (UC): treatment of moderately to severely active ulcerative colitis in adult patients.

Limitations of Use: Effectiveness has not been established in patients who have lost response to or were intolerant to TNF blockers.

- Plaque Psoriasis (Ps): treatment of adult patients with moderate to severe chronic plaque psoriasis who are candidates for systemic therapy or phototherapy, and when other systemic therapies are medically less appropriate.
- Hidradenitis Suppurativa (HS): treatment of moderate to severe hidradenitis suppurativa in adult patients.
- Uveitis (UV): treatment of non-infectious intermediate, posterior, and panuveitis in adult patients.

## **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 1/2 PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS

Please note that we have 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, Instructions for Use, and Medication Guide) and include the labeling changes proposed in any pending "Changes Being Effected" (CBE) supplements.

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

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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.

At this time, no pediatric studies are required under PREA for your BLA.

### **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*.<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> Information and Instructions for completing the form can be found at FDA.gov.<sup>5</sup>

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

<sup>&</sup>lt;sup>3</sup> For the most recent version of a guidance, check the FDA guidance web page at <u>https://www.fda.gov/media/128163/download.</u>

<sup>&</sup>lt;sup>4</sup> <u>http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf</u> <sup>5</sup> http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf

#### **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).

Your product is a Part 3 combination product (21 CFR 3.2(e)); therefore, you must also comply with postmarketing safety reporting requirements for an approved combination product (21 CFR 4, Subpart B). Additional information on combination product postmarketing safety reporting is available at FDA.gov.

If you have any questions, call Sadaf Nabavian, Sr. Regulatory Project Manager, at (301) 796-2777.

Sincerely,

{See appended electronic signature page}

Nikolay P. Nikolov, MD Acting Office Director Office of Immunology and Inflammation Office of New Drugs Center for Drug Evaluation and Research

ENCLOSURE(S):

Content of Labeling

- Prescribing Information
- Medication Guide
- Instructions for Use

U.S. Food and Drug Administration Silver Spring, MD 20993 www.fda.gov

(b)

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/

NIKOLAY P NIKOLOV 10/04/2023 01:04:06 PM