BLA 761202/S-006

SUPPLEMENT APPROVAL

Samsung Bioepis Co., Ltd.
c/o: Cardinal Health 127, Inc
Attention: Brian Cudney
Cardinal Health Regulatory Sciences
7400 West 110th Street, Suite 300
Overland Park, Kansas 66210

Dear Brian Cudney:

Please refer to your supplemental biologics license application (sBLA), dated and received July 12, 2022, and your amendments, submitted under section 351(k) of the Public Health Service Act for Byooviz (ranibizumab-nuna) injection 0.5 mg (10 mg/mL) for intravitreal injection. The corresponding reference product is US-licensed Lucentis (ranibizumab injection) 0.5 mg (10 mg/mL) for intravitreal injection (BLA 125156).

We acknowledge receipt of your amendment dated June 26, 2023, which constituted a request for approval following our May 10, 2023, provisional determination letter. This Prior Approval supplemental biologics license application proposes BYOOVIZ (ranibizumab-nuna) injection 0.5 mg (10 mg/mL) for intravitreal injection in a single dose vial to be interchangeable with the corresponding presentation of LUCENTIS (ranibizumab injection) 0.5 mg (10 mg/mL) for intravitreal injection, for the following indications:

- Neovascular (Wet) Age-Related Macular Degeneration (AMD)
- Macular Edema Following Retinal Vein Occlusion (RVO)
- Myopic Choroidal Neovascularization (mCNV)

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 with minor editorial revisions reflected in the enclosed 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,[1] that is identical to the enclosed labeling (text for the Prescribing Information)

and include the labeling changes proposed in any pending “Changes Being Effected” (CBE) supplements.

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. 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).

CARTON AND CONTAINER LABELING
Submit final printed carton and container labeling that are identical to the enclosed carton and container labeling as soon as they are available, but no more than 30 days after they are printed. Please submit these 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 761202/S-006.” Approval of this submission by FDA is not required before the labeling is used.

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.

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.
POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitments:

4108-1 Provide bioburden test method suitability data for in-process samples from at least one additional lot of SB11 drug substance.

4108-2 Perform real-time drug product commercial container closure system leachate studies using appropriate test methods to identify and quantify volatile organic compounds (VOC), semi-VOC, non-VOC, and trace metals at regular intervals through the end of shelf life. The study results will be updated annually in the BLA Annual Report. The final results of this study and the toxicology risk evaluation for the levels of leachates detected in the drug product will be provided in the final study report to the BLA.

The timetable you submitted on July 13, 2021, states that you will conduct these studies and submit the Final Report results by **December 31, 2024**. 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.*

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. Information and Instructions for completing the form can be found at FDA.gov.

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3 For the most recent version of a guidance, check the FDA guidance web page at [https://www.fda.gov/media/128163/download](https://www.fda.gov/media/128163/download).


U.S. Food and Drug Administration
Silver Spring, MD 20993
[www.fda.gov](http://www.fda.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). 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 Lois Almoza, MS, Senior Regulatory Health Project Manager, at (240) 402-5146.

Sincerely,

{See appended electronic signature page}

Wiley A. Chambers, MD
Director
Division of Ophthalmology
Office of Specialty Medicine
Center for Drug Evaluation and Research

ENCLOSURES:
- Content of Labeling
  - Prescribing Information
- Carton and Container Labeling
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/

WILEY A CHAMBERS
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