BLA 761136/S-017

SUPPLEMENT APPROVAL

Celgene Corporation, a Bristol-Myers Squibb Company
Attention: Vaidehi Patel, PharmD, MBA, RPh
Senior Manager, Global Regulatory Strategy
PO Box 4000
Princeton, NJ 08543

Dear Dr. Patel:

Please refer to your supplemental biologics license application (sBLA) received April 20, 2026, and your amendments, submitted under section 351(a) of the Public Health Service Act for Reblozyl (luspatercept-aamt) for injection.

This Prior Approval sBLA provides for an update to the volume of administration (increasing the maximum volume of injection from 1.2 mL to 2.0 mL) and reconstitution in Section 2.3 (Preparation and Administration) of the Prescribing Information (PI).

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,[1] that is identical to the enclosed labeling (text for the Prescribing Information and Patient Package Insert) 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 guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*.[2]

The SPL will be accessible via publicly available labeling repositories.

[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 https://www.fda.gov/RegulatoryInformation/Guidances/default.htm.

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.

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

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 May Zuwannin, Regulatory Project Manager, at 301-796-7775 or May.Zuwannin@fda.hhs.gov.

Sincerely,

{See appended electronic signature page}

Tanya Wroblewski, MD
Director
Division of Nonmalignant Hematology
Office of Cardiology, Hematology,
Endocrinology, and Nephrology
Office of New Drugs
Center for Drug Evaluation and Research

ENCLOSURES:

- Content of Labeling
  - Prescribing Information
  - Patient Package Insert (Revised February 2026)

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/

TANYA M WROBLEWSKI
10/20/2026 03:07:45 PM