DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
Rockville, MD 20852

Our STN: BL 103000/5050

JUL 19 2004

Allergan, Incorporated
Attention: Adelbert L. Stagg, Ph.D.
Senior Director, Worldwide Regulatory Affairs
2525 Dupont Drive
Irvine, CA 92623-9534

Dear Dr. Stagg:

Your request to supplement your biologics license application for Botulinum Toxin Type A to include a new indication for primary axillary hyperhidrosis has been approved.

All applications for new active ingredients, new dosage forms, new indications, new routes of administration, and new dosing regimens are required to contain an assessment of the safety and effectiveness of the product in pediatric patients unless this requirement is waived or deferred.

Your supplement was submitted without studies in pediatric patients less than 11 years of age. We are waiving the pediatric study requirement for ages 11 years and below.

We acknowledge your written commitments to provide additional information on ongoing studies and to conduct postmarketing studies as described in your letter of July 7, 2004 as outlined below:

Postmarketing Studies subject to reporting requirements of 21 CFR 601.70.

1. To conduct an open-label, repeated treatment, pediatric study in 130 patients, 12-16 years of age with severe axillary hyperhidrosis that is inadequately managed with topical agents. The final study protocol will be submitted by May 31, 2005. Patient enrollment will be initiated by August 30, 2005 and the last patient will be enrolled by August 30, 2006. The last patient will leave the study by August 30, 2007, and the study will be completed by October 31, 2007. The final study report will be completed by February 28, 2008 and submitted to the Agency (including SAS data and revised labeling) by May 30, 2008.

2. To conduct an open-label, three-year safety study (USA) in at least 150 patients, 17 to 64 years of age with severe primary axillary hyperhidrosis. The final study protocol was submitted on December 21, 2001. Patient enrollment has been completed. The last patient will leave the study on December 31, 2005. The study will be completed by February 28, 2006. The final study report will be completed by June 30, 2006, and submitted to the Agency (including SAS data and revised labeling, if appropriate) by September 30, 2006.

3. To conduct an open-label, three-year safety study (non-USA) in at least 150 patients, 17 to 64 years of age with persistent severe primary hyperhidrosis of the axillae. The final study protocol was submitted on May 9, 2003. Patient enrollment has been completed. The last patient will leave the study on April 30, 2007. The study will be completed by June 30, 2007. The final study report will be completed by November 30, 2007, and submitted to the Agency (including SAS data and revised labeling, if appropriate) by September 30, 2008.

4. To conduct a double-blind, placebo-controlled, repeat treatment study in 300 patients, 12 to 75 years of age with severe primary palmar hyperhidrosis that is inadequately managed with topical agents, with onset at least one year prior to study enrollment. The final study protocol will be submitted by September 30, 2005. Patient enrollment will be initiated by November 30, 2005 and the last patient will be enrolled by August 30, 2006. The last patient will leave the study by August 30, 2007, and the study will be completed by October 31, 2007. The final study report will be completed by February 28, 2008 and submitted to the Agency (including SAS data and revised labeling) by May 30, 2008.

5. To include the text from the Warning Section on Hypersensitivity Reactions in the Botox Cosmetic label at the time of next printing in July, 2004 to be made available for production to use with product manufactured starting in July, 2004 and then distributed. This label will be submitted to the Agency as a Changes Being Effected (CBE) at printing by July 31, 2004.

We request that you submit clinical protocols to your IND, with a cross-reference letter to this biologics license application (BLA), STN BL 103000. Submit nonclinical and chemistry, manufacturing, and controls protocols and all study final reports to your BLA STN BL 103000. Please use the following designators to label prominently all submissions, including supplements, relating to these postmarketing study commitments as appropriate:

- Postmarketing Study Protocol
- Postmarketing Study Final Report
- Postmarketing Study Correspondence
- Annual Report on Postmarketing Studies

For each postmarketing study subject to the reporting requirements of 21 CFR 601.70, you must describe the status in an annual report on postmarketing studies for this product. The status report for each study should include:

- information to identify and describe the postmarketing commitment,
- the original schedule for the commitment,
- the status of the commitment (i.e. pending, ongoing, delayed, terminated, or submitted), and
- an explanation of the status including, for clinical studies, the patient accrual rate (i.e. number enrolled to date and the total planned enrollment).

As described in 21 CFR 601.70(e), we may publicly disclose information regarding these postmarketing studies on our Web site (http://www.fda.gov/cder/pmc/default.htm). Please refer to the April 2001 Draft Guidance for Industry: Reports on the Status of Postmarketing Studies - Implementation of Section 130 of the Food and Drug Administration Modernization Act of 1997 (see http://www.fda.gov/cber/gdlns/post040401.htm) for further information.

Please submit all final printed labeling at the time of use and include implementation information on FDA Form 356h. Please provide a PDF-format electronic copy as well as original paper copies (ten for circulars and five for other labels). In addition, you may wish to submit draft copies of the proposed introductory advertising and promotional labeling with a cover letter requesting advisory comments to the Division of Drug Marketing, Advertising and Communication (HFD-42), Center for Drug Evaluation and Research, 5600 Fishers Lane/Room 8B45, Rockville, MD 20857. Final printed advertising and promotional labeling should be submitted at the time of initial dissemination, accompanied by an FDA Form 2253.

All promotional claims must be consistent with and not contrary to approved labeling. You should not make a comparative promotional claim or claim of superiority over other products unless you have substantial evidence to support that claim.

The regulatory responsibility for review and continuing oversight for this product transferred from the Center for Biologics Evaluation and Research to the Center for Drug Evaluation and Research effective June 30, 2003. For further information about the transfer, please see http://www.fda.gov/cder/biologics/default.htm. Until further notice, however, all correspondence, except as provided elsewhere in this letter, should continue to be addressed to:

CBER Document Control Center
Attn: Office of Therapeutics Research and Review
Suite 200N (HFM-99)
1401 Rockville Pike
Rockville, Maryland 20852-1448

This information will be included in your biologics license application file.

Sincerely,

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Marc Walton, M.D., Ph.D.
Director
Division of Therapeutic Biological Internal Medicine Products
Office of Drug Evaluation VI
Center for Drug Evaluation and Research

Enclosures: Package Insert