

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

022150Orig1s000

Trade Name: Firazyr Injection, 30 mg/3 mL.

Generic Name: icatibant acetate

Sponsor: Shire Orphan Therapies.

Approval Date: August 24, 2011

Indications: Treatment of acute attacks of hereditary angioedema
in adults 18 years of age and older.

CENTER FOR DRUG EVALUATION AND RESEARCH

022150Orig1s000

CONTENTS

Reviews / Information Included in this NDA Review.

Approval Letter	X
Other Action Letters	X
Labeling	X
REMS	
Summary Review	X
Officer/Employee List	X
Office Director Memo	X
Cross Discipline Team Leader Review	X
Medical Review(s)	X
Chemistry Review(s)	X
Environmental Assessment	
Pharmacology Review(s)	X
Statistical Review(s)	X
Microbiology Review(s)	X
Clinical Pharmacology/Biopharmaceutics Review(s)	X
Other Reviews	X
Risk Assessment and Risk Mitigation Review(s)	
Proprietary Name Review(s)	X
Administrative/Correspondence Document(s)	X

**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

022150Orig1s000

APPROVAL LETTER



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring, MD 20993

NDA 022150

NDA APPROVAL

Shire Orphan Therapies
300 Shire Way
Lexington MA 02421

Attention: Thomas Class, RAC
Group Director, Regulatory Affairs

Dear Mr. Class:

Please refer to your New Drug Application (NDA) dated October 22, 2007, received October 26, 2007, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Firazyr (icatibant acetate) Injection, 30 mg/3 mL.

We acknowledge receipt of your amendments dated April 1, 14, and 30, May 15 and 29, October 21, and November 6, 7, and 20, 2008, December 1, 2010, and February 25, April 4, May 9, 19, and 20, June 7 (2), 14, and 30, July 1, 12, 15, 19, 20, 21, 26, 28, and 29, and August 2, 4, 8, 10, 12, 17, and 24, 2011.

The February 25, 2011, submission constituted a complete response to our April 23, 2008, action letter.

This new drug application provides for the use of Firazyr (icatibant) Injection for the treatment of acute attacks of hereditary angioedema in adults 18 years of age and older.

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 text.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content of labeling must be identical to the enclosed labeling (text for the package insert, text for the patient package insert). Information on submitting SPL files using eLIST may be found in the guidance for industry titled *SPL Standard for Content of Labeling Technical Qs and As*, at <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND IMMEDIATE-CONTAINER LABELS

Submit final printed carton and container labels that are identical to the enclosed carton and immediate-container labels, as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry titled *Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission “**Final Printed Carton and Container Labels for approved NDA 022150.**” Approval of this submission by FDA is not required before the labeling is used.

Marketing the product with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

MARKET PACKAGE

Please submit one market package of the drug product when it is available.

If sending via USPS, please send to:

Eunice Chung-Davies
Food and Drug Administration
Center for Drug Evaluation and
Research
White Oak Building 22, Room 3343
10903 New Hampshire Avenue
Silver Spring, Maryland 20993

If sending via any carrier other than USPS
(e.g., UPS, DHL), please send to:

Eunice Chung-Davies
Food and Drug Administration
Center for Drug Evaluation and
Research
White Oak Building 22, Room 3343
10903 New Hampshire Avenue
Silver Spring, Maryland 20903

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, 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 any unexpected serious risk of carcinogenic potential of Firazyr (icatibant acetate) Injection .

Furthermore, the new pharmacovigilance system that FDA is required to establish 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:

1810-1 Submit the results of your ongoing 104-week mouse carcinogenicity study of icatibant acetate injection.

The timetable you submitted on July 28, 2011, states that you will conduct this study according to the following schedule:

Study Completion: March 2014
Final Report Submission: December 2014

1810-2 Submit the results of your ongoing 104-week rat carcinogenicity study of icatibant acetate injection.

The timetable you submitted on July 28, 2011, states that you will conduct this study according to the following schedule:

Study Completion: August 2011
Final Report Submission: March 2012

Submit all protocols to your IND 068214, with a cross-reference letter to this NDA 022150. Submit all final reports to this NDA 022150. Prominently identify submissions 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)

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 314.81(b)(2)(vii), 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 314.81(b)(2)(vii) 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 314.81(b)(2)(vii). 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:

1810-3 Provide the following information to identify and characterize impurities in your drug product: the structures for all the unspecified impurities observed at (b) (4) in your drug product stability studies, the structures or at least "minimal structural information" for all the unspecified impurities observed at (b) (4) in the drug product stability studies, and include suitable criteria for what constitutes "minimal structural information."

The timetable you submitted on July 28, 2011, states that you will conduct this study according to the following schedule:

Study Completion: August 2012
Final Report Submission: September 2012

Submit chemistry, manufacturing, and controls protocols and all study final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, and any changes in plans since the last annual report. All submissions, including supplements, relating to this postmarketing commitment 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. To do so, submit, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the package insert to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Drug Marketing, Advertising, and Communications
5901-B Ammendale Road
Beltsville, MD 20705-1266

As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the package insert, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. For instruction on completing the Form FDA 2253, see page 2 of the Form. For more information about submission of promotional materials to the Division of Drug Marketing, Advertising, and Communications (DDMAC), see <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>.

METHODS VALIDATION

We have not completed validation of the regulatory methods. However, we expect your continued cooperation to resolve any problems that may be identified.

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

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

POST-ACTION FEEDBACK MEETING

New molecular entities and new biologics qualify for a post-action 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.

If you have any questions, call Eunice Chung-Davies, Regulatory Project Manager, at (301) 796-4006.

Sincerely,

{See appended electronic signature page}

Curtis J. Rosebraugh, M.D., M.P.H.
Director
Office of Drug Evaluation II
Office of New Drugs
Center for Drug Evaluation and Research

Enclosures:

Content of Labeling (physician and patient)
Carton and Container Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

CURTIS J ROSEBRAUGH
08/25/2011