

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

125544Orig1s000

Trade Name: Inflectra Injection, 100 mg per vial

Generic Name: Infliximab-dyyb

Sponsor: Celltrion, Inc.

Approval Date: April 5, 2016

Indication: Under this license, you are authorized to manufacture the product Inflectra (infliximab-dyyb).

Inflectra is indicated for:

1) Crohn's Disease:

- reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active Crohn's disease who have had an inadequate response to conventional therapy.
- reducing the number of draining enterocutaneous and rectovaginal fistulas and maintaining fistula closure in adult patients with fistulizing Crohn's disease.

2) Pediatric Crohn's Disease:

- reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients 6 years of age and older with moderately to severely active Crohn's disease who have had an inadequate response to conventional therapy

3) Ulcerative Colitis:

- reducing signs and symptoms, inducing and maintaining clinical remission and mucosal healing, and eliminating corticosteroid use in adult patients with moderately to severely active ulcerative colitis who have had an inadequate response to conventional therapy.

4) Rheumatoid Arthritis :

- in combination with methotrexate, reducing signs and symptoms, inhibiting the progression of structural damage, and improving physical function in patients with moderately to severely active rheumatoid arthritis.

5) Ankylosing Spondylitis:

- reducing signs and symptoms in patients with active ankylosing spondylitis

6) Psoriatic Arthritis:

- reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function in patients with psoriatic arthritis.

7) Plaque Psoriasis:

- treatment of adult patients with chronic severe (i.e., extensive and/or disabling) plaque psoriasis who are candidates for systemic therapy and when other systemic therapies are medically less appropriate.

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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	
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 / Virology Review(s)	
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

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APPROVAL LETTER



BLA 125544

BLA APPROVAL

Celltrion, Inc.
c/o Parexel International
4600 East-West Highway, Suite 350
Bethesda, MD 20814

Attention: Sally Choe, PhD
Senior Director, Parexel International

Dear Dr. Choe:

Please refer to your Biologics License Application (BLA) dated August 8, 2014, received August 8, 2014, and your amendments, submitted under section 351(k) of the Public Health Service Act for Inflectra (infliximab-dyyb) for injection, 100 mg per vial.

We acknowledge receipt of your resubmission dated October 5, 2015, responding to our June 8, 2015, action letter.

LICENSING

We are issuing Department of Health and Human Services U.S. License No. 1996 to Celltrion, Inc., Incheon, Republic of Korea, under the provisions of section 351(k) of the Public Health Service Act controlling the manufacture and sale of biological products. The license authorizes you to introduce or deliver for introduction into interstate commerce, those products for which your company has demonstrated compliance with establishment and product standards.

Under this license, you are authorized to manufacture the product Inflectra (infliximab-dyyb). Inflectra is indicated for:

- 1) Crohn's Disease:
 - reducing signs and symptoms and inducing and maintaining clinical remission in adult patients with moderately to severely active Crohn's disease who have had an inadequate response to conventional therapy.
 - reducing the number of draining enterocutaneous and rectovaginal fistulas and maintaining fistula closure in adult patients with fistulizing Crohn's disease.
- 2) Pediatric Crohn's Disease:
 - reducing signs and symptoms and inducing and maintaining clinical remission in pediatric patients 6 years of age and older with moderately to severely active Crohn's disease who have had an inadequate response to conventional therapy.

- 3) Ulcerative Colitis:
 - reducing signs and symptoms, inducing and maintaining clinical remission and mucosal healing, and eliminating corticosteroid use in adult patients with moderately to severely active ulcerative colitis who have had an inadequate response to conventional therapy.
- 4) Rheumatoid Arthritis :
 - in combination with methotrexate, reducing signs and symptoms, inhibiting the progression of structural damage, and improving physical function in patients with moderately to severely active rheumatoid arthritis.
- 5) Ankylosing Spondylitis:
 - reducing signs and symptoms in patients with active ankylosing spondylitis
- 6) Psoriatic Arthritis:
 - reducing signs and symptoms of active arthritis, inhibiting the progression of structural damage, and improving physical function in patients with psoriatic arthritis.
- 7) Plaque Psoriasis:
 - treatment of adult patients with chronic severe (i.e., extensive and/or disabling) plaque psoriasis who are candidates for systemic therapy and when other systemic therapies are medically less appropriate.

MANUFACTURING LOCATIONS

Under this license, you are approved to manufacture infliximab-dyyb at your drug substance and drug product facilities in Incheon, Republic of Korea. You may label your product with the proprietary name, Inflectra, and market it in cartons of single-use vials of 100 mg per vial for injection.

DATING PERIOD

The dating period for Inflectra shall be 51 months from the date of manufacture when stored at 2°C to 8°C. The date of manufacture shall be defined as the date of final sterile filtration of the formulated drug product. The dating period for your drug substance shall be (b)(4) months from the date of manufacture (b)(4) when stored at (b)(4)°C or (b)(4) months at (b)(4)°C.

We have approved the stability protocols in your license application for the purpose of extending the expiration dating period of your drug substance and drug product under 21 CFR 601.12.

FDA LOT RELEASE

You are not currently required to submit samples of future lots of Inflectra to the Center for Drug Evaluation and Research (CDER) for release by the Director, CDER, under 21 CFR 610.2. We will continue to monitor compliance with 21 CFR 610.1, requiring completion of tests for conformity with standards applicable to each product prior to release of each lot.

Any changes in the manufacturing, testing, packaging, or labeling of Inflectra, or in the manufacturing facilities, will require the submission of information to your biologics license application for our review and written approval, consistent with 21 CFR 601.12.

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 text.

WAIVER OF HIGHLIGHTS SECTION

We are waiving the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information. This waiver applies to all future supplements containing revised labeling unless we notify you otherwise.

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 <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content of labeling must be identical to the enclosed labeling (text for the package insert, Medication Guide). 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 – Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (May 2015)*”. 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 BLA 125544.**” Approval of this submission by FDA is not required before the labeling is used.

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

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.

The following comments pertain to Rheumatoid Arthritis indication:

We are waiving the pediatric study requirement for pediatric patients ages 2 through 4 years of age because this product does not represent a meaningful therapeutic benefit over existing therapies for pediatric patients and is not likely to be used in a substantial number of pediatric patients.

We are also waiving the pediatric study requirements for pediatric patients less than 2 years of age because necessary studies are impossible or highly impracticable given that the disease is rarely diagnosed in this population.

The following comment pertains to Ankylosing Spondylitis indication:

We are waiving the pediatric study requirements for pediatric patients ages 0 to 17 years for this indication because necessary studies are impossible or highly impracticable.

The following comment pertains to Psoriatic Arthritis indication:

We are waiving the pediatric study requirements for pediatric patients ages 0 to 17 years for this indication because necessary studies are impossible or highly impracticable.

The following comment pertains to Plaque Psoriasis indication:

We are waiving the pediatric study requirements for pediatric patients ages 0 to 17 years old for this indication because evidence strongly suggests this product would be unsafe in this age group.

The following comment pertains to Crohn's disease indication:

We are waiving the pediatric study requirements for pediatric patients less than 6 years of age because necessary studies for this product (i.e., dedicated studies limited to pediatric patients 2 to less than 6 years of age) are impossible or highly impracticable. Additionally, this condition is rare in patients less than 2 years of age.

(b) (4)

(b) (4)

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
Office of Prescription Drug Promotion
5901-B Ammendale Road
Beltsville, MD 20705-1266

As required under 21 CFR 601.12(f)(4), you must submit final promotional materials, and the package insert, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at

<http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>.

Information and Instructions for completing the form can be found at

<http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>.

REPORTING REQUIREMENTS

You must submit adverse experience reports under the adverse experience reporting requirements for licensed biological products (21 CFR 600.80). You should submit postmarketing adverse experience reports to:

Food and Drug Administration
Center for Drug Evaluation and Research
Central Document Room
5901-B Ammendale Road
Beltsville, MD 20705-1266

Prominently identify all adverse experience reports as described in 21 CFR 600.80.

You must submit distribution reports under the distribution reporting requirements for licensed biological products (21 CFR 600.81).

You must submit reports of biological product deviations under 21 CFR 600.14. You should promptly identify and investigate all manufacturing deviations, including those associated with processing, testing, packing, labeling, storage, holding and distribution. If the deviation involves a distributed product, may affect the safety, purity, or potency of the product, and meets the other criteria in the regulation, you must submit a report on Form FDA-3486 to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Compliance Risk Management and Surveillance
5901-B Ammendale Road
Beltsville, MD 20705-1266

Biological product deviations, sent by courier or overnight mail, should be addressed to:

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Compliance Risk Management and Surveillance
10903 New Hampshire Avenue, Bldg. 51, Room 4206
Silver Spring, MD 20903

If you have any questions, call Nina Ton, Senior Regulatory Project Manager, at (301) 796-1648.

Sincerely,

{See appended electronic signature page}

Badrul A. Chowdhury, MD, PhD
Director
Division of Pulmonary, Allergy, and Rheumatology Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

ENCLOSURES:

Content of Labeling
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/

BADRUL A CHOWDHURY
04/05/2016