DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
Rockville, MD 20857

NDA 021880/S-013

SUPPLEMENT APPROVAL
RELEASE FROM POSTMARKETING COMMITMENTS

Celgene Corporation
Attention: Michael B. Faletto
Director, Regulatory Affairs
86 Morris Avenue
Summit, NJ 07901

Dear Mr. Faletto:

Please refer to your supplemental new drug application (sNDA) dated September 19, 2008, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Revlimid® (lenalidomide) 5, 10, 15 and 25 milligram Capsules.

This supplemental application contains a proposed risk evaluation and mitigation strategy (REMS) for Revlimid® (lenalidomide) and was submitted in accordance with section 909(b)(1) of the Food and Drug Administration Amendments Act of 2007 (FDAAA). We note that NDA 021880 was approved under the provisions of 21 CFR 314.520 (Subpart H). Under section 909(b)(1) of FDAAA, we identified Revlimid® (lenalidomide) as a product deemed to have in effect an approved REMS because there were in effect on the effective date of FDAAA, March 25, 2008, elements to assure safe use required under 21 CFR 314.520.

We also refer to your submissions dated September 29, 2008, March 30, June 16, August 14, October 9, 2009 and July 28, 2010.

In accordance with section 505-1 of the FDCA, we have determined that a REMS is necessary for Revlimid® (lenalidomide) to ensure the benefits of the drug outweigh the risk of teratogenicity. Your proposed REMS, submitted on September 19, 2008, as amended and appended to this letter, is approved. The REMS consists of a Medication Guide, elements to assure safe use, an implementation system, and the timetable for submission of assessments of the REMS. We remind you that section 505-1(f)(8) of FDCA prohibits holders of an approved covered application with elements to assure safe use from using any element to block or delay approval of an application under section 505(b)(2) or (j). A violation of this provision in 505-1(f) could result in enforcement action.

The REMS assessment plan should include, but is not limited to, the following information:

1. A report on periodic assessments of the distribution and dispensing of the Medication Guide in accordance with 21 CFR 208.24.

2. A summary of the RevAssist® program that includes the number of patients, pharmacies, and prescribers registered in the program and an overall summary of the patient, pharmacy, and prescriber compliance with the RevAssist® program.

3. Patient registrations and demographics summary that includes the total number of registered patients, a summary of the patient demographics, and summaries of registered patients by risk category and diagnoses.

4. An assessment of healthcare provider and patient understanding regarding the safe-use of Revlimid® (lenalidomide) (i.e., the results of surveys administered to healthcare providers and patients).

5. Patient compliance - Information regarding the total number of completed mandatory patient surveys testing patient knowledge of risks and benefits as described in the product labeling or Medication Guide, the number of patient surveys with discrepancies, and the number of surveys with discrepancies by risk category. Discuss the types of discrepancies identified, conduct sub-analyses by high risk and low risk categories of patients, and address deviations from the RevAssist® program. Include information regarding the voluntary patient survey that assesses patients' knowledge and compliance with risk reduction behaviors and birth control methods.

6. Summary of positive (and false positive) beta human chorionic gonadotrophin and/or urine pregnancy tests – A case summary of abnormal pregnancy test results, any reports of pregnancy, and the follow-up information. For each case, include the root cause analysis as to why the RevAssist® program was unsuccessful.

7. Prescriber compliance – Discuss prescriber compliance with the prescriber survey, pregnancy testing, and patient counseling.

8. Pharmacy procedures – Include an overview of pharmacy activity in terms of amount of drug dispensed, deviations from the RevAssist® program dispensing requirements, any pharmacy that is de-activated due to non-compliance, and a compliance assessment of the pharmacy component of the RevAssist® program.

9. Interventions – Provide a summary of the corrective actions developed and de-registrations, as well as a summary of the RevAssist® program complaints received and actions taken to address the complaints.

The requirements for assessments of an approved REMS under section 505-1(g)(3) include, in section 505-1(g)(3)(A), an assessment of the extent to which the elements to assure safe use are meeting the goal or goals to mitigate a specific serious risk listed in the labeling of the drug, or whether the goal or goals or such elements should be modified.

Assessments of an approved REMS must also include, under section 505-1(g)(3)(B) and (C), information on the status of any postapproval study or clinical trial required under section 505(o) or otherwise undertaken to investigate a safety issue. You can satisfy these requirements in your REMS assessments by referring to relevant information included in the most recent annual report required under section 506B and 21 CFR 314.81(b)(2)(vii) and including any updates to the status information since the annual report was prepared. Failure to comply with the REMS assessments provisions in 505-1(g) could result in enforcement action.

We remind you that in addition to the assessments submitted according to the timetable included in the approved REMS, you must submit a REMS assessment and may propose a modification to the

approved REMS when you submit a supplemental application for a new indication for use as described in Section 505-1(g)(2)(A) of FDCA.

Prominently identify the amendment containing the REMS assessments or proposed modifications with the following wording in bold capital letters at the top of the first page of the submission:

NDA 021880 REMS ASSESSMENT

NEW SUPPLEMENT FOR NDA 021880
PROPOSED REMS MODIFICATION
REMS ASSESSMENT

NEW SUPPLEMENT (NEW INDICATION FOR USE)
FOR NDA 021880
REMS ASSESSMENT
PROPOSED REMS MODIFICATION (if included)

If you do not submit electronically, please send 5 copies of REMS-related submissions.

POSTMARKETING COMMITMENTS

The approval letter dated December 27, 2005, listed the following postmarketing commitments:

#4 You have agreed to submit a Pregnancy Exposure follow-up plan which will document your plan to follow-up pregnancy exposures to their outcome. This plan may be submitted as a post-marketing commitment.

#5 You have agreed to submit an Evaluation Plan of RevAssist to FDA within 3 to 6 months of approval. Please include, at a minimum, plans to study the Pharmacy Audit Plan, Outcomes of Pregnancy Exposures, and the Knowledge Surveys of physicians, nurses, and patients.

Because the requirement to develop a pregnancy exposure follow-up plan has been incorporated into the REMS, and you are now required to report all exposed pregnancies under section 505(k)(1) as described above, you are hereby released from PMC numbers 4 and 5.

DEAR HEALTHCARE PROFESSIONAL LETTER

If you decide to issue a letter communicating important safety-related information about this drug product (i.e., a "Dear Health Care Professional" letter), we request that you submit, at least 24 hours prior to issuing the letter, an electronic copy of the letter to this <NDA, BLA, or ANDA>, to CDERMedWatchSafetyAlerts@fda.hhs.gov, and to the following address:

MedWatch
Food and Drug Administration
Suite 12B-05
5600 Fishers Lane
Rockville, MD 20857

LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit, using the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format, as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm, that is identical to the enclosed labeling (text for the package insert and text for the 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/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible from publicly available labeling repositories.

REPORTING REQUIREMENTS

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

As part of the approval under Subpart H, as required by 21 CFR 314.550, you must submit all promotional labeling as well as advertisements at least 30 days before the intended time of initial distribution of the labeling or initial publication of the advertisement. Send one copy to the Division of Drug Oncology Products and two copies of the promotional materials and the package insert directly to:

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

If you have any questions, please call Amy Baird, Regulatory Project Manager, at (301)796-2313.

Sincerely,

{See appended electronic signature page}

Robert Justice, M.D., M.S.
Director
Division of Drug Oncology Products
Office of Oncology Drug Products
Center for Drug Evaluation and Research

Enclosures:

- Approved REMS
- Medication Guide
- Educational materials
- RevAssist Enrollment forms
- Final product labeling

Application Type/Number	Submission Type/Number	Submitter Name	Product Name
NDA-21880	SUPPL-13	CELGENE CORP	REVLIMID(LENALIDOMIDE)
NDA-21880	PMR/PMC-1	CELGENE CORP	REVLIMID(LENALIDOMIDE)

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/s/

ROBERT L JUSTICE
08/03/2010