



NDA 020427/S-026  
NDA 022006/S-027

## SUPPLEMENT APPROVAL

Lundbeck Pharmaceuticals LLC  
Attention: Nancy Aiello  
Director, US Regulatory Affairs  
Six Parkway North Suite 400  
Deerfield, IL 60015

Dear Ms. Aiello:

Please refer to your supplemental new drug applications (sNDAs) dated and received June 2, 2022, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Sabril (vigabatrin).

These Prior Approval sNDAs provide for proposed modifications to the approved Vigabatrin shared system (SS) risk evaluation and mitigation strategy (REMS). This supplement is in response to our March 29, 2022, REMS Modification Notification letter.

We have completed our review of these supplemental applications, as amended. They are approved, effective on the date of this letter.

### **RISK EVALUATION AND MITIGATION STRATEGY (REMS) REQUIREMENTS**

The SS REMS for vigabatrin products, of which Sabril (vigabatrin) is a member, was originally approved on April 27, 2017, and the most recent REMS modification was approved on October 2, 2020. The SS REMS consists of elements to assure safe use, an implementation system, and a timetable for submission of assessments of the REMS.

In order to ensure the benefits of vigabatrin outweigh its risks and to minimize the burden on the healthcare delivery system of complying with the REMS, we determined that you were required to make the REMS modifications outlined in our REMS Modification Notification letter dated March 29, 2022.

Your proposed modified REMS, submitted to Drug Master File (DMF) (b) (4) on May 27, 2022, amended and appended to this letter, is approved.

This shared system REMS, known as the Vigabatrin SS REMS, currently includes products listed on the FDA REMS website.<sup>1</sup>

Other products may be added in the future if additional NDAs or ANDAs are approved.

The timetable for submission of assessments of the REMS has been revised to submit REMS assessments every two years beginning on April 27, 2022. Based on this change, the next assessment is due on April 27, 2024.

There are no changes to the REMS assessment plan described in our March 29, 2022, letter.

We remind you that in addition to the REMS assessments submitted according to the timetable in the approved REMS, you must include an adequate rationale to support a proposed REMS modification for the addition, modification, or removal of any goal or element of the REMS, as described in section 505-1(g)(4) of the FDCA.

We also remind you that you must submit a REMS assessment when you submit a supplemental application for a new indication for use, as described in section 505-1(g)(2)(A) of the FDCA. This assessment should include:

- a) An evaluation of how the benefit-risk profile will or will not change with the new indication;
- b) A determination of the implications of a change in the benefit-risk profile for the current REMS;
- c) *If the new indication for use introduces unexpected risks:* A description of those risks and an evaluation of whether those risks can be appropriately managed with the currently approved REMS.
- d) *If a REMS assessment was submitted in the 18 months prior to submission of the supplemental application for a new indication for use:* A statement about whether the REMS was meeting its goals at the time of that last assessment and if any modifications of the REMS have been proposed since that assessment.
- e) *If a REMS assessment has not been submitted in the 18 months prior to submission of the supplemental application for a new indication for use:* Provision of as many of the currently listed assessment plan items as is feasible.

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<sup>1</sup> <https://www.accessdata.fda.gov/scripts/cder/remis/index.cfm>

- f) *If you propose a REMS modification based on a change in the benefit-risk profile or because of the new indication of use, submit an adequate rationale to support the modification, including:* Provision of the reason(s) why the proposed REMS modification is necessary, the potential effect on the serious risk(s) for which the REMS was required, on patient access to the drug, and/or on the burden on the health care delivery system; and other appropriate evidence or data to support the proposed change. Additionally, include any changes to the assessment plan necessary to assess the proposed modified REMS. *If you are not proposing REMS modifications, provide a rationale for why the REMS does not need to be modified.*

If the assessment instruments and methodology for your REMS assessments are not included in the REMS supporting document, or if you propose changes to the submitted assessment instruments or methodology, you should update the REMS supporting document to include specific assessment instrument and methodology information at least 90 days before the assessments will be conducted. Updates to the REMS supporting document may be included in a new document that references previous REMS supporting document submission(s) for unchanged portions. Alternatively, updates may be made by modifying the complete previous REMS supporting document, with all changes marked and highlighted.

Prominently identify the submission containing the assessment instruments and methodology with the following wording in bold capital letters at the top of the first page of the submission:

**NDA 020427 and NDA 022006 REMS ASSESSMENT METHODOLOGY**  
(insert concise description of content in bold capital letters, e.g.,  
**ASSESSMENT METHODOLOGY, PROTOCOL, SURVEY METHODOLOGIES,**  
**AUDIT PLAN, DRUG USE STUDY)**

An authorized generic drug under these NDAs must have an approved REMS prior to marketing. Should you decide to market, sell, or distribute an authorized generic drug under these NDAs, contact us to discuss what will be required in the authorized generic drug REMS submission.

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.

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

**NDA 020427 and NDA 022006 REMS ASSESSMENT**

*or*

**NEW SUPPLEMENT FOR NDA 020427/S-000 and NDA 022006/S-000  
CHANGES BEING EFFECTED IN 30 DAYS  
PROPOSED MINOR REMS MODIFICATION**

*or*

**NEW SUPPLEMENT FOR NDA 020427/S-000 and NDA 022006/S-000  
PRIOR APPROVAL SUPPLEMENT  
PROPOSED MAJOR REMS MODIFICATION**

*or*

**NEW SUPPLEMENT FOR NDA 020427/S-000 and NDA 022006/S-000  
PRIOR APPROVAL SUPPLEMENT  
PROPOSED REMS MODIFICATIONS DUE TO SAFETY LABELING  
CHANGES SUBMITTED IN SUPPLEMENT XXX**

*or*

**NEW SUPPLEMENT (NEW INDICATION FOR USE)  
FOR NDA 020427/S-000 and NDA 022006/S-000  
REMS ASSESSMENT  
PROPOSED REMS MODIFICATION (if included)**

Should you choose to submit a REMS revision, prominently identify the submission containing the REMS revisions with the following wording in bold capital letters at the top of the first page of the submission:

**REMS REVISIONS FOR NDA 020427 and NDA 022006**

To facilitate review of your submission, we request that you submit your proposed modified REMS and other REMS-related materials in Microsoft Word format. If certain documents, such as enrollment forms, or website screenshots are only in PDF format, they may be submitted as such, but Word format is preferred.

**SUBMISSION OF REMS DOCUMENT IN SPL FORMAT**

FDA can accept the REMS document in Structured Product Labeling (SPL) format. If you intend to submit the REMS document in SPL format, as soon as possible, but no

later than 14 days from the date of this letter, submit the REMS document in SPL format using the FDA automated drug registration and listing system (eLIST).

For more information on submitting REMS in SPL format, please email [FDAREMSwebsite@fda.hhs.gov](mailto:FDAREMSwebsite@fda.hhs.gov).

### **PATENT LISTING REQUIREMENTS**

Pursuant to 21 CFR 314.53(d)(2) and 314.70(f), certain changes to an approved NDA submitted in a supplement require you to submit patent information for listing in the Orange Book upon approval of the supplement. You must submit the patent information required by 21 CFR 314.53(d)(2)(i)(A) through (C) and 314.53(d)(2)(ii)(A) and (C), as applicable, to FDA on Form FDA 3542 within 30 days after the date of approval of the supplement for the patent information to be timely filed (see 21 CFR 314.53(c)(2)(ii)). You also must ensure that any changes to your approved NDA that require the submission of a request to remove patent information from the Orange Book are submitted to FDA at the time of approval of the supplement pursuant to 21 CFR 314.53(d)(2)(ii)(B) and 314.53(f)(2)(iv).

### **REPORTING REQUIREMENTS**

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

If you have any questions, email Josephine Little, Regulatory Project Manager, at [Josephine.Little@fda.hhs.gov](mailto:Josephine.Little@fda.hhs.gov).

Sincerely,

*{See appended electronic signature page}*

Alice T.D. Hughes, MD  
Deputy Director for Safety  
Division of Neurology 2  
Office of Neuroscience  
Center for Drug Evaluation and Research

ENCLOSURE(S):

- REMS

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**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.**  
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/s/  
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ALICE HUGHES  
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