DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Food and Drug Administration
Silver Spring, MD 20993

STN: sBLA 103772/5258

SUPPLEMENTAL APPROVAL
November 18, 2009

Centocor, Inc.
200 Great Valley Parkway
Malvern, PA 19355

Attention: Barbara Rake
Associate Director, Worldwide Regulatory Affairs

Dear Ms. Rake:

Please refer to your supplemental biologics license application dated and received September 3, 2009, submitted under section 351 of the Public Health Service Act for Remicade (infliximab).

We acknowledge receipt of your submissions dated June 16, September 3 and 24, October 30, and November 5 and 6, 2009.

Reference is also made to an FDA letter dated August 4, 2009 notifying you, under Section 505(o)(4) of the Federal Food, Drug, and Cosmetic Act (FDCA), of new safety information that we believe should be included in the labeling for Remicade (infliximab). This information pertains to the risk of malignancies in pediatric patients, leukemia in adults, and psoriasis-like lesions associated with use of products within the class of TNF-blockers.

SAFETY LABELING CHANGES

Your supplemental biologics license application provides for revisions to the labeling for Remicade (infliximab) consistent with our August 4, 2009, letter, and correspondences dated September 22, October 16, 26, and 28, and November 2, 2009.

We have completed our review of this supplemental application, as amended, and 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 601.14(b)] in structured product labeling (SPL) format as described at http://www.fda.gov/oc/datacouncil/spl.html that is identical to the attached labeling (text for package insert, Medication Guide). For administrative purposes, please designate this submission, "**SPL for approved BLA 103772/5258**." In addition, within 21 days of the date of

this letter, amend any pending supplement(s) for this BLA with content of labeling in SPL format to include the changes approved in this supplement.

We request that the revised labeling approved today be available on your website within 10 days of receipt of this letter.

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

RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS

Section 505-1 of the FDCA authorizes FDA to require the submission of a REMS if FDA becomes aware of new safety information and makes a determination that such a strategy is necessary to ensure that the benefits of the drug outweigh the risks (section 505-1(a)).

Your proposed REMS, submitted on November 6, 2009, and appended to this letter, is approved. The REMS consists of a Medication Guide, a communication plan, and a timetable for submission of assessments of the REMS.

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

a. Patients' and providers' understanding (i.e. surveys) of the serious risks of Remicade (infliximab).
b. Specification of measures that would be taken to increase awareness if surveys of healthcare providers indicate that provider awareness is not adequate.
c. Periodic summaries of adverse reporting of histoplasmosis and other invasive fungal infections including an analysis of deaths and whether appropriate antifungal therapy was instituted promptly.
d. Based on the information reported, an assessment of and conclusion of whether the REMS is meeting its goals, and whether modifications to the REMS are needed.

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 601.70 and including any updates to the status information since the annual report was prepared. Failure to comply with the REMS assessments provisions in section 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 future submissions containing the REMS assessment or proposed REMS modification with the following appropriate wording in bold capital letters at the top of the first page of the submission:

BLA 103772 REMS ASSESSMENT

NEW SUPPLEMENT FOR BLA 103772
PROPOSED REMS MODIFICATION
REMS ASSESSMENT

NEW SUPPLEMENT (NEW INDICATION FOR USE)
FOR BLA 103772
REMS ASSESSMENT
PROPOSED REMS MODIFICATION (if included)

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

LETTER TO HEALTH CARE PROFESSIONALS

If you issue a letter communicating important information about this drug product (i.e., a "Dear Health Care Professional" letter), we request that you submit a copy of the letter to this BLA and a copy to the following address:

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

Please refer to http://www.fda.gov/cder/biologics/default.htm for information regarding therapeutic biological products, including the addresses for submissions.

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

If you have any questions, please contact Sharon Turner-Rinehardt, Regulatory Health Project Manager, at (301) 796-2254.

Sincerely,

/Larissa Lapteva/

Larissa Lapteva, M.D., M.H.S.
Deputy Director for Director
Division of Anesthesia, Analgesia
and Rheumatology Products
Office of Drug Evaluation II
Center for Drug Evaluation and Research

Enclosures (2): Package Insert
REMS