DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA 205836/S-005
NDA 205837/S-004
NDA 205838/S-003

SUPPLEMENT APPROVAL
FULFILLMENT OF POSTMARKETING REQUIREMENTS
RELEASE FROM POSTMARKETING REQUIREMENT
NEW POSTMARKETING REQUIREMENT

UCB, Inc.
1950 Lake Park Drive
Smyrna, Georgia 30080
Attention: Kristen Piatak, RAC
Associate Director, Regulatory Affairs

Dear Ms. Piatak:

Please refer to your Supplemental New Drug Applications (sNDAs) submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for the following:

Application	Product Name	Submitted & received on:
NDA 205836/S-005	Briviact (brivaracetam) oral tablets, 10 mg, 20 mg, 50 mg, 75 mg, 100 mg	July 7, 2017
NDA 205838/S-003	Briviact (brivaracetam) oral solution, 10 mg/mL	
These supplements provide for:		
The expansion of the use of Briviact (brivaracetam) tablets and oral solution for the treatment of partial onset seizures (POS) to include patients 4 years to less than 16 years of age.		

Application	Product Name	Submitted & received on:
NDA 205837/S-004	Briviact (brivaracetam) injection 50 mg/5 mL	May 10, 2018
This supplement provides for:		
The incorporation (by reference) of the labeling revisions provided for in NDA 205836/S-005 and NDA 205838/S-003 into the Briviact (brivaracetam) injection labeling, as the approved product labeling for all three NDAs is contained within the same Full Prescribing Information.		

Please also refer to our February 18, 2016, NDA approval letter for Briviact (brivaracetam) oral tablets (NDA 205836), 10 mg, 20 mg, 50 mg, 75 mg, 100 mg; injection (NDA 205837) 50mg/5 mL; and oral solution (NDA 205838), 10 mg/mL.

APPROVAL & LABELING

We have completed our review of these supplemental applications, as amended. They are 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 and Medication Guide), with the addition of any labeling changes in pending "Changes Being Effected" (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

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.

Also within 14 days, amend all pending supplemental applications that include labeling changes for these NDAs, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in MS Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes and annotate each change. To facilitate review of your submission, provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

FULFILLMENT OF POSTMARKETING REQUIREMENT

We have received your submission dated July 7, 2017, reporting on the following postmarketing requirement listed in our February 18, 2016, approval letter:

3042-1	A pharmacokinetic analysis to determine a dosing regimen in children from 4 years to less than 16 years of age that provides drug exposure that is similar to the exposure that is effective in adult patients with partial onset seizures. This analysis will require pharmacokinetic data from studies of both adult and pediatric patients. These studies have already been performed.

We have reviewed your submission and have concluded that the above requirement has been fulfilled.

Please note that all of your pediatric assessments required under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c) have not yet been fulfilled. Additional labeling changes may be deferred until results from your required pediatric clinical safety and efficacy studies have been reviewed.

RELEASE FROM POSTMARKETING REQUIREMENT

We have received your submission dated July 7, 2017, reporting on the following postmarketing requirement listed in our February 18, 2016, approval letter:

3042-4	Long-term safety study of brivaracetam in the adjunctive treatment of partial onset seizures in children from 1 month to less than 16 years of age. Routine safety measures should be monitored. Behavioral and cognitive endpoints should be included. A total of at least 200 patients must be enrolled. Subjects should be balanced among age cohorts.

We have reviewed your supplemental applications and have determined that you are released from the above postmarketing requirement for the following reason:

> This Pediatric Research Equity Act (PREA) postmarketing requirement has been partially addressed by studies conducted with Briviact tablet and oral solution in the age group of 4 up to 16 years and will be reissued for the age group of at least 1 month to less than 4 years.

The above postmarketing requirements are being replaced by the new postmarketing requirement described below for the age group of at least 1 month to less than 4 years. Additionally, with the approval of these supplements (NDA 205836/S-005 and 205838/S-003), Briviact tablets and oral solution are appropriately labeled for use in pediatric patients ages 4 to 16 years.

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), 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 in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Your deferred pediatric studies required under section 505B(a) of the FDCA are required postmarketing studies. The status of these postmarketing studies must be reported annually

according to 21 CFR 314.81 and section 505B(a)(3)(C) of the FDCA. These required studies are listed below.

3042-5	Long-term safety study of brivaracetam in the treatment of partial onset seizures in children from 1 month to less than 4 years of age. Routine safety measures should be monitored. Behavioral and cognitive endpoints should be included. Final Protocol Submission: 03/11 (completed) Study/Trial Completion: 02/22 Final Report Submission: 08/22

Reports of these required pediatric postmarketing studies must be submitted as a new drug application (NDA) or as a supplement to your approved NDA with the proposed labeling changes you believe are warranted based on the data derived from these studies. When submitting the reports, please clearly mark your submission "SUBMISSION OF REQUIRED PEDIATRIC ASSESSMENTS" in large font, bolded type at the beginning of the cover letter of the submission.

We remind you that there are postmarketing requirements listed in the February 18, 2016, approval letter that are still open.

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) the package insert(s) to:

OPDP Regulatory Project Manager
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Prescription Drug Promotion (OPDP)
5901-B Ammendale Road
Beltsville, MD 20705-1266

Alternatively, you may submit a request for advisory comments electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft Guidance for Industry (available at: http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM443702.pdf).

You must submit final promotional materials and package insert(s), accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. 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

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, call Heather Bullock, Regulatory Project Manager, at (301) 796-1126.

Sincerely,

{See appended electronic signature page}

Billy Dunn, MD
Director
Division of Neurology Products
Office of Drug Evaluation I
Center for Drug Evaluation and Research

ENCLOSURE:
Content of Labeling

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

/s/

WILLIAM H Dunn
05/10/2018