



BLA 761364

**BLA APPROVAL**

Accord BioPharma, Inc.  
Attention: Sabita Nair  
VP Regulatory Affairs  
8041 Acro Corporate Drive Suite 200  
Raleigh, NC 27617

Dear Sabita Nair:

Please refer to your biologics license application (BLA) dated October 9, 2023, received October 10, 2023, submitted under section 351(k) of the Public Health Service Act for Imuldosa (ustekinumab-srlf) injection.

BLA 761364 seeks licensure of:

- Imuldosa (ustekinumab-srlf) injection 45 mg/0.5 mL single dose prefilled syringe for subcutaneous use as a biosimilar to Stelara (ustekinumab) injection 45 mg/0.5 mL single-dose prefilled syringe for subcutaneous use
- Imuldosa (ustekinumab-srlf) injection 90 mg/mL single dose prefilled syringe for subcutaneous use as a biosimilar to Stelara (ustekinumab) injection 90 mg/mL single-dose prefilled syringe for subcutaneous use
- Imuldosa (ustekinumab-srlf) injection 130 mg/26 mL single-dose vial for intravenous use as biosimilar to Stelara (ustekinumab) injection 130 mg/26 mL single-dose vial for intravenous use

## **LICENSING**

We have approved the products in your BLA for Imuldosa (ustekinumab-srlf) as biosimilar products effective this date. You are hereby authorized to introduce or deliver for introduction into interstate commerce, Imuldosa under your existing Department of Health and Human Services U.S. License No. 2105. Imuldosa is indicated for the treatment of :

Adult patients with:

- moderate to severe plaque psoriasis (Ps) who are candidates for phototherapy or systemic therapy
- active psoriatic arthritis (PsA)
- moderately to severely active Crohn's disease (CD)

- moderately to severely active Ulcerative Colitis (UC)

Pediatric patients 6 years and older with:

- moderate to severe plaque psoriasis (Ps) who are candidates for phototherapy or systemic therapy
- active psoriatic arthritis (PsA)

### **MANUFACTURING LOCATIONS**

Under this license, you are approved to manufacture ustekinumab-sr1f drug substance at (b) (4). The final formulated drug product in the pre-filled syringe (PFS) presentation will be manufactured, filled, labeled, and packaged at (b) (4). secondary packaging will be performed at Accord Healthcare Ltd, in the United Kingdom (FEI: 3026277693). The final formulated drug product in the vial presentation will be manufactured, filled, labeled, and packaged at (b) (4). You may label your product with the proprietary name, Imuldosa, and market it in 45 mg/0.5 mL PFS; 90 mg/mL PFS; and 130 mg/26 mL vial presentations.

### **DATING PERIOD**

The dating period for Imuldosa PFS presentation shall be 36 months from the date of manufacture when stored at  $5 \pm 3^{\circ}\text{C}$ . The dating period for Imuldosa vial presentation shall be 24 months from the date of manufacture when stored at  $5 \pm 3^{\circ}\text{C}$ . 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 when stored at (b) (4).

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 Imuldosa 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 Imuldosa, or in the manufacturing facilities, will require the submission of information to your BLA for our review and written approval, consistent with 21 CFR 601.12.

**U.S. Food and Drug Administration**  
Silver Spring, MD 20993  
[www.fda.gov](http://www.fda.gov)

## **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.

## **WAIVER OF ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS**

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.<sup>1</sup> Content of labeling must be identical to the enclosed labeling (text for the Prescribing Information, Instructions for Use, and Medication Guide). Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As (October 2009)*.<sup>2</sup>

The SPL will be accessible via publicly available labeling repositories.

## **CARTON AND CONTAINER LABELING**

Submit final printed carton and container labeling that are identical to the carton and container labeling submitted on September 30, 2024, as soon as they are available, but no more than 30 days after they are printed. Please submit these labeling electronically according to the guidance for industry *SPL Standard for Content of Labeling Technical Qs & As*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for approved BLA 761364.**” Approval of this submission by FDA is not required before the labeling is used.

## **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

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<sup>1</sup> See <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

<sup>2</sup> We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database at <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

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.

### **Plaque psoriasis and Psoriatic Arthritis**

At this time, we have determined that, with respect to plaque psoriasis and psoriatic arthritis in pediatric patients 0 to less than 6 years of age, no pediatric studies will be required under PREA for your BLA.

You have provided a pediatric assessment for plaque psoriasis and psoriatic arthritis in pediatric patients 6 years of age and older, and nothing further is required at this time.

### **Crohn's Disease and Ulcerative Colitis**

At this time, we have determined that, with respect to pediatric patients 0 to 17 years of age with moderately to severely active Crohn's disease despite conventional therapy and with moderately to severely active ulcerative Colitis, no pediatric studies will be required under PREA for your BLA.

### **Age Appropriate Presentation**

We are deferring the required pediatric assessment for patients < 60 kg. See Deferred Pediatric Assessment below.

### **Deferred Pediatric Assessment**

Your deferred pediatric study required under section 505B(a) of the Federal Food, Drug, and Cosmetic Act is required postmarketing study. The status of this postmarketing study must be reported annually according to 21 CFR 601.28 and section 505B(a)(4)(C) of the Federal Food, Drug, and Cosmetic Act. This required study is listed below.

- 4700-1    Develop a presentation that can be used to accurately administer Imuldosa (ustekinumab-srlf) to pediatric patients who weigh less than 60 kg.

Final Report Submission:        04/2025

Reports of this required pediatric postmarketing study must be submitted as a biologics license application (BLA) or as a supplement to your approved BLA with the proposed labeling changes you believe are warranted based on the data derived from this study. 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.

**POSTMARKETING COMMITMENTS NOT SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B**

We remind you of your postmarketing commitments:

- 4700-2 Perform real-world shipping study(ies) to support the commercial shipping conditions of the commercial pre-filled syringe drug product from the secondary packaging site (Accord Biopharma Inc., UK) to the distribution center(s) in the US. The shipping study(ies) should cover worst-case shipping conditions (i.e., routes and modes of transportation, distance, duration, temperature, packing configuration, and shipping containers employed) on the final packaged pre-filled syringe drug product in the proposed container closure system to ensure there is no impact to product quality and sterility of the drug product (i.e., comparison of pre-shipment to post-shipment data, assessed against pre-defined acceptance criteria).

The timetable you submitted on September 26, 2024, states that you will conduct this study according to the following schedule:

Final Report Submission: 05/2026

- 4700-3 Perform real-world shipping study(ies) to support the commercial shipping conditions of the commercial vial drug product from the manufacturing and packaging site ( (b) (4) ) to the distribution center(s) in the US. The study should cover worst-case shipping conditions (i.e., routes and modes of transportation, distance, duration, temperature, packing configuration, and shipping containers employed) on the final packaged drug product in the proposed container closure system to ensure there is no impact to product quality and sterility of the drug product (i.e., comparison of pre-shipment to post-shipment data, assessed against pre-defined acceptance criteria).

The timetable you submitted on September 26, 2024, states that you will conduct this study according to the following schedule:

Final Report Submission: 05/2026

- 4700-4 Perform a study using the worst-case headspace size to confirm that stopper placement height specifications would not result in stopper movement that would exceed the sterile boundary under low-pressure conditions.

The timetable you submitted on September 24, 2024, states that you will conduct this study according to the following schedule:

Final Report Submission: 05/2025

### **PROMOTIONAL MATERIALS**

You may request advisory comments on proposed introductory advertising and promotional labeling. For information about submitting promotional materials, see the final guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs*.<sup>3</sup>

You must submit final promotional materials and Prescribing Information, 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 [FDA.gov](http://FDA.gov).<sup>4</sup> Information and Instructions for completing the form can be found at [FDA.gov](http://FDA.gov).<sup>5</sup>

### **REPORTING REQUIREMENTS**

You must submit adverse experience reports under the adverse experience reporting requirements at 21 CFR 600.80.

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

You must submit distribution reports under the distribution reporting requirements at 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

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<sup>3</sup> For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/media/128163/download>.

<sup>4</sup> <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>

<sup>5</sup> <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>

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 4207  
Silver Spring, MD 20903

Your product is a Part 3 combination product (21 CFR 3.2(e)); therefore, you must also comply with postmarketing safety reporting requirements for an approved combination product (21 CFR 4, Subpart B). Additional information on combination product postmarketing safety reporting is available at [FDA.gov](http://FDA.gov).

If you have any questions, contact Sascha Randolph, Regulatory Project Manager, at [Sascha.Randolph@fda.hhs.gov](mailto:Sascha.Randolph@fda.hhs.gov) or at (301) 796-8546.

Sincerely,

*{See appended electronic signature page}*

Tatiana Oussova, MD, MPH  
Deputy Director for Safety  
Division of Dermatology and Dentistry  
Office of Immunology and Inflammation  
Office of New Drugs  
Center for Drug Evaluation and Research

ENCLOSURE(S):

- Content of Labeling
  - Prescribing Information
  - Medication Guide
  - Instructions for Use
- Carton and Container Labeling

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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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TATIANA OUSSOVA  
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