



**U.S. FOOD & DRUG**  
ADMINISTRATION

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## Memorandum

**Date:** June 14, 2023

**To:** Rommel Maglalang  
CBER/OTP/ORMRR/DRMRR2/RMSB2

Sukhanya Jayachandra, PhD  
CBER/OTAT/DCGT/CTB

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**From:** Michael Brony, Pharm.D.  
CBER/OCBQ/DCM/APLB

**Through:** Lisa L. Stockbridge, Ph.D.  
CBER/OCBQ/DCM/APLB

**Subject:** Labeling Review  
**LANTIDRA (donislecel-jujn) Suspension for Intraportal Infusion**  
**STN # 125734/0**

**Sponsor:** CellTrans, Inc.

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**Background:** The sponsor submitted:

☒ New Approval  
☐ Changes Being Effected (CBE) supplement  
☐ Prior Approval Supplement (PAS) Amendment  
☐ Major Amendment

Submission contains:

☒ Prescribing Information (PI)  
☐ Patient Package Insert (PPI)  
☐ Package and/or container labels  
☐ Other (Medication Guide)

Submission Date: December 22, 2022

Action Due Date: June 28, 2023

## APLB Comments/Recommendations

CellTrans Inc. submitted a Biologics License Application (BLA) for LANTIDRA (donislecel -jujn) seeking approval for the treatment for Brittle Type 1 Diabetes (labile diabetes) in adults whose symptoms are not well controlled despite intensive insulin therapy.

Recognizing that the labeling requires significant revision to bring it in line with 21 CFR §201.57, APLB offers the following general comments from a promotional and comprehension perspective:

### Overall

- Use command language or active voice wherever possible.
  - Only bold for regulatory headings and regulatory wording.
  - Section and subsection headings do not have a period between the number and the heading.
  - There are no tertiary headings (sub-subheadings) allowed. Only use the regulatory headings.
  - Ensure that each regulatory section contains the correct content for that section. (See 21 CFR §201.57)
  - Do not include information that would be considered practice of medicine.
  - This labeling must comport with 21 CFR §201.57. In the absence of a REMS, the Elements To Assure Safe Use (ETASU) do not belong in the content of labeling. The Patient Package Insert (also known as Patient Information) is patient labeling that may be part of the FDA-approved prescription drug labeling to fulfill the brief summary requirement for Direct-to-Consumer printed advertising. The format follows that of 21 CFR § 208.20 (Medication Guides), but it is not considered a Medication Guide, patient pamphlet, or any other ETASU element.
  - Contact information should appear immediately following section 17. Contact information is not a section. Therefore, it does not get a number and does not have a regulatory heading.
  - Any reference in HIGHLIGHTS to information appearing in the FULL PRESCRIBING INFORMATION must be accompanied only by the identifying section or subsection number in parentheses. Do not include the name of the section or subsection. (See 21 CFR §201.56)
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- For the **FULL PRESCRIBING INFORMATION**, the preferred presentation for cross-referencing is the section (not subsection) heading, in title case, followed by the numerical identifier. The entire cross-reference is italicized and enclosed within brackets.

*[see Warnings and Precautions (5.2)]*

## **HIGHLIGHTS**

- Do not bullet the route of administration statement directly beneath the **DOSAGE AND ADMINISTRATION** heading.
- The **ADVERSE REACTIONS** section is too dense to be readable. Consider using a different cut-off frequency for common adverse reactions in this part of the **HIGHLIGHTS**.
- Since this is a new application, please remove *Revised: [date]*.

## **FULL PRESCRIBING INFORMATION: CONTENTS**

- Remove the bolded warning in the **FULL PRESCRIBING INFORMATION: CONTENTS** section. It is not a boxed warning, and it is not in the format of a boxed warning if one did exist.
- Ensure that the table of contents reflects the regulatory sections and subsections of the **FULL PRESCRIBING INFORMATION**. This includes the correct numbering for the regulatory sections and subsections.

## **FULL PRESCRIBING INFORMATION (FPI)**

### **2 DOSAGE AND ADMINISTRATION**

- The only bolded statement that belongs beneath this section heading is the route of administration sentence. The other directives do not belong here and serve to reduce the readability of the route of administration directive.
  - The **DOSAGE AND ADMINISTRATION** section must include regulatory subsections (e.g., Dose, Preparation, Administration) in a logical order. Tertiary sub-subsections are not permitted.
  - Subsections beyond 2.3 may be dropped in a non-FDA stylesheet, so it is important to place the necessary information for safe and effective use within the first three or four subsections.
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- Please include the following verbatim statement:

“Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit.”

## 6 ADVERSE REACTIONS

- Directly beneath the section heading restate the most common adverse reactions, along with a cut-off frequency. This should mirror what is found in the **HIGHLIGHTS**. It is not necessary to restate warnings in **6 ADVERSE REACTIONS**.
- Any event associated or potentially associated with LANTIDRA is an *adverse reaction*. Subsection 6.1 should not include anything other than adverse reactions. Therefore, there should not be any Serious Adverse Events. (See 21 CFR §201.57(c)(7) and *Guidance for Industry: Adverse Reactions Sections of Labeling for Human Prescription Drug and Biological Products – Content and Format*)

## PATIENT INFORMATION

The Patient Information should be written so it can be understood easily by the lay public (consumer-friendly language). It should not have dense clinical information. The best way to ensure this is to follow the content and format of a Medication Guide (21 CFR § 208.20).

## PACKAGE/CONTAINER LABELS

Package and container labels must comport with ISBT 128, requiring chain of identity and chain of custody labeling, as well as unique NDC codes for various parts of the dosing kit. Ensure that important labeling text, like the product title and precaution statements, are not impacted by the label size or placement.

If you have any questions regarding this review please contact Michael Brony, Pharm.D. at 240-402-8898.

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Firm name: **CellTrans, Inc**

History

Prepared:	M. Brony	05/24/23
Concur w/rev:	L. Stockbridge	06/14/23
Final:	M. Brony	06/14/23