



BLA 125158/58

REMS RELEASE

Sanofi Pasteur Biologics, LLC.
Attention: Michael F. Stirr
Senior Director, Regulatory Affairs North America
and Authorized Official
38 Sidney Street
Cambridge, MA 02139

August 24, 2015

Dear Mr. Stirr:

Please refer to your supplement to your biologics license application (BLA), 125158/58 dated September 19, 2008, submitted under section 351 of the Public Health Service Act for ACAM2000[®] [Smallpox (Vaccinia) Vaccine, Live].

We acknowledge receipt of your submission dated September 19, 2008, of a proposed risk evaluation and mitigation strategy (REMS).

RISK EVALUATION AND MITIGATION STRATEGY REQUIREMENTS

The Food and Drug Administration Amendments Act of 2007 (FDAAA) contains REMS requirements for drug and biological products approved before the effective date of the REMS provisions, March 25, 2008. Section 909(b)(1) of FDAAA specifies that a drug that was approved before this effective date is deemed to have in effect an approved REMS under section 505-1 of the Food, Drug, and Cosmetic Act if there were in effect on this date, elements to assure safe use, either required under section 314.520 or section 601.42 of title 21, Code of Federal Regulations or otherwise agreed to by the applicant and the FDA for such drug.

On March 27, 2008, the FDA issued a Federal Register (FR) Notice identifying drug and biological products that FDA determined were deemed to have in effect an approved REMS (73 FR 16313). ACAM2000 was identified as a product deemed to have REMS because it was approved with a Risk Minimization Action Plan (RiskMAP) containing restrictions to assure safe use under the provisions of 21 CFR 601.42 (Subpart E). The RiskMAP included requirements for the education of healthcare providers administering ACAM2000 in order to achieve safe and effective administration, to inform vaccinees of risks and benefits, and to minimize risks of vaccinia transmission, including autoinoculation. Section 909(b)(3) of FDAAA required sponsors with products deemed to have a REMS to submit a proposed REMS by September 21, 2008.

During the review of your proposed REMS as described in your September 19, 2008, January 19, 2009, March 29, 2012, and December 12, 2013, correspondence we determined that a REMS is no longer necessary to ensure the benefits of the vaccine outweigh the risks. Based on our

review of post-marketing safety data on ACAM2000, we have determined that the limited distribution of ACAM2000, under the control of the U.S. government, and the detailed use information in both the Prescribing Information and Medication Guide are sufficient to ensure that the benefits outweigh the risks of vaccination. Thus, we are releasing you from the requirement to have a REMS.

You should submit an amendment withdrawing your supplemental biologics license application (125158/58) as the proposed REMS is no longer required.

Prominently identify your subsequent submission related to the proposed REMS with the following wording in bold capital letters at the top of the first page of the submission.

PROPOSED REMS – AMENDMENT for BLA 125158/58

We remind you of the requirement under 21 CFR 600.80(c)(2), as stated in the August 31, 2007, approval letter, to submit reports of the following to FDA as 15-day reports: autoinoculation, cardiomyopathy, central nervous system disease, contact transmission of vaccinia, death, eczema vaccinatum, fetal vaccinia, generalized vaccinia, ischemic heart disease, ocular vaccinia, potential myocarditis and pericarditis, progressive vaccinia, Stevens-Johnson Syndrome, and superinfection of vaccination site.

If you have any questions regarding the above, please contact the Regulatory Project Manager, CDR Edward Wolfgang, at 301-796-2640.

Sincerely,

Marion F. Gruber, Ph.D.
Director
Office of Vaccines
Research and Review
Center for Biologics
Evaluation and Research