
Promotional Labeling and Advertising Considerations for Prescription Biological Reference and Biosimilar Products Questions and Answers Guidance for Industry

DRAFT GUIDANCE

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**U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)**

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Advertising**

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TABLE OF CONTENTS

I.	INTRODUCTION.....	1
II.	BACKGROUND	2
III.	QUESTIONS AND ANSWERS.....	3

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1 **Promotional Labeling and Advertising Considerations for**
2 **Prescription Biological Reference and Biosimilar Products**
3 **Questions and Answers**
4 **Guidance for Industry¹**
5

6
7 This draft guidance, when finalized, will represent the current thinking of the Food and Drug
8 Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not
9 binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the
10 applicable statutes and regulations. To discuss an alternative approach, contact the FDA staff responsible
11 for this guidance as listed on the title page.
12

13
14
15 **I. INTRODUCTION**
16

17 This guidance addresses questions firms² may have when developing FDA-regulated
18 promotional labeling and advertisements (promotional materials)^{3,4} for prescription reference
19 products⁵ licensed under 351(a) of the Public Health Service Act (PHS Act) (42 U.S.C. 262(a))

¹ This guidance has been prepared by the Office of Prescription Drug Promotion in consultation with the Office of Therapeutic Biologics and Biosimilars in the Center for Drug Evaluation and Research in cooperation with the Center for Biologics Evaluation and Research at the Food and Drug Administration.

² In this guidance, the term *firms* refers to manufacturers, packers, and distributors, including representatives of these entities, of biological products licensed under section 351(a) or (k) of the Public Health Service Act (PHS Act) (42 U.S.C. 262(a) or (k)).

³ Under the Federal Food, Drug, and Cosmetic Act (FD&C Act), FDA’s authority includes provisions addressing labeling for all drugs and advertisements for prescription drugs. See, e.g., section 502(a), (f), and (n) (21 U.S.C. 352(a), (f), and (n)); see also section 201(m) (21 U.S.C. 321(m) (defining *labeling*). If a biological product meets the definition of *drug* under section 201(g) of the FD&C Act (21 U.S.C. 321), it is subject to these provisions to the same extent as any other drug. See section 351(j) of the PHS Act (42 U.S.C. 262(j)).

⁴ Promotional labeling is generally any labeling other than FDA-required labeling that is devised for promotion of the product. Promotional labeling may also have other functions in addition to promotion. Such promotional labeling can include printed, audio, or visual matter descriptive of a drug for which the labeling is disseminated by or on behalf of a drug’s manufacturer, packer, or distributor (21 CFR 202.1(l)(2)). The FD&C Act does not define what constitutes an *advertisement* for a prescription drug, but FDA regulations provide several examples, including “advertisements in published journals, magazines, other periodicals, and newspapers, and advertisements broadcast through media such as radio, television, and telephone communication systems” (21 CFR 202.1(l)(1)).

⁵ The term *reference product* means the single biological product licensed under section 351(a) of the PHS Act against which a biological product is evaluated in an application submitted under section 351(k) of the PHS Act (section 351(i)(4) of the PHS Act (42 U.S.C. 262(i)(4))).

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20 and prescription biosimilar products⁶ licensed under section 351(k) of the PHS Act (42 U.S.C.
21 262(k)). The guidance discusses considerations for presenting data and information about
22 reference or biosimilar products in these promotional materials in a truthful and non-misleading
23 way. Although the guidance covers promotional issues involving both reference and biosimilar
24 products, some questions and answers are focused on only biosimilar product promotional
25 materials. This guidance does not discuss considerations unique to promotional materials for
26 interchangeable biosimilars.⁷

27
28 In general, FDA’s guidance documents do not establish legally enforceable responsibilities.
29 Instead, guidances describe the Agency’s current thinking on a topic and should be viewed only
30 as recommendations, unless specific regulatory or statutory requirements are cited. The use of
31 the word *should* in Agency guidances means that something is suggested or recommended, but
32 not required.

33
34

35 **II. BACKGROUND**

36
37 Section 351(k) of the PHS Act, added by the Biologics Price Competition and Innovation Act of
38 2009 (BPCI Act), outlines an abbreviated licensure pathway for biological products shown to be
39 biosimilar to or interchangeable with an FDA-licensed reference product. A biosimilar is a
40 biological product that is highly similar to the reference product notwithstanding minor
41 differences in clinically inactive components and for which there are no clinically meaningful
42 differences between the biological product and the reference product in terms of safety, purity, or
43 potency.^{8,9}

44
45 To meet the standard for interchangeability, an applicant must (1) provide sufficient information
46 to demonstrate biosimilarity to the reference product and (2) demonstrate that the biological
47 product can be expected to produce the same clinical result as the reference product in any given
48 patient and, if the biological product is administered more than once to an individual, the risk in
49 terms of safety or diminished efficacy of alternating or switching between the use of the
50 biological product and the reference product is not greater than the risk of using the reference
51 product without such alternation or switch.¹⁰

52

⁶ In this guidance, the terms *biosimilar* and *biosimilar product* refer to a biological product that FDA has licensed as biosimilar to a reference product (see sections 351(i)(2) and (k)(2) of the PHS Act (42 U.S.C. 262(i)(2) and (k)(2))).

⁷ In this guidance, the terms *interchangeable biosimilar* and *interchangeable product* refer to a biosimilar product that FDA has determined to be interchangeable with the reference product (see sections 351(i)(3) and (k)(4) of the PHS Act (42 U.S.C. 262(i)(3) and (k)(4))).

⁸ See section 351(i)(2) of the PHS Act (42 U.S.C. 262(i)(2)).

⁹ See 21 CFR 600.3(s). The standard for licensure of a biological product as potent under section 351(a) of the PHS Act has long been interpreted to include effectiveness.

¹⁰ See section 351(k)(4) of the PHS Act (42 U.S.C. 262(k)(4)).

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53 Once FDA licenses a biosimilar or interchangeable product, providers and patients can be
54 assured of the safety and effectiveness of a biosimilar or an interchangeable product, just as they
55 would be for the reference product.

56
57 As the number of licensed biosimilar products increases, FDA expects an increase in promotion
58 involving reference and biosimilar products. FDA is providing this guidance to address
59 questions firms may have when developing FDA-regulated promotional materials for reference
60 products or biosimilar products. The guidance discusses considerations for presenting data and
61 information about reference or biosimilar products in these promotional materials to help ensure
62 that they are accurate, truthful, and non-misleading as required under the Federal Food, Drug,
63 and Cosmetic (FD&C) Act and FDA's implementing regulations.¹¹

64
65

66 **III. QUESTIONS AND ANSWERS**

67

68 **Q1. What are the general requirements for the content of FDA-regulated promotional** 69 **materials for reference products and biosimilar products?**

70

71 Prescription drugs, including those that are reference products or biosimilar products, are subject
72 to the FD&C Act and FDA's implementing regulations, including misbranding provisions that
73 address advertisements and promotional labeling for prescription drugs issued by or on behalf of
74 manufacturers, packers, or distributors.

75

76 Under the FD&C Act and FDA's implementing regulations, prescription drug promotional
77 labeling and advertising must be truthful and non-misleading, convey information about a drug's
78 efficacy and its risks in a balanced manner, and reveal material facts about the drug.¹² Whether a
79 promotional presentation is truthful and non-misleading involves a fact-specific determination
80 that takes into account such factors as how the information is presented, the type and quality of
81 the data relied on to support the presentation, and contextual and disclosure considerations. FDA
82 regulations also require that firms promptly revise promotional labeling and advertising for their
83 biological products upon certain labeling changes, including labeling changes to risk
84 information.¹³

85

86 **Q2. How should firms identify reference products and biosimilar products in** 87 **promotional materials?**

88

89 Depending on the context, biological products, including reference and biosimilar products, may
90 be identified by their proprietary name, nonproprietary or proper name, or core name. As used in

¹¹ See sections 201(n) and 502(a) and (n) of the FD&C Act (21 U.S.C. 321(n), 352(a) and (n)); 21 CFR 1.21(a) and 202.1(e)(5).

¹² Ibid.

¹³ 21 CFR 601.12(a)(4).

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91 this guidance, a biological product’s proprietary name means the trademark or brand name.¹⁴ A
92 biological product’s proper name is the nonproprietary name designated by FDA in the license
93 for a biological product licensed under the PHS Act.^{15,16} A biological product’s core name is the
94 component shared among a reference product and any related biological product, biosimilar
95 product, or interchangeable product as part of the proper names of those products.¹⁷

96
97 Firms should carefully evaluate the information presented in promotional materials for reference
98 products or biosimilar products to ensure that in each instance where the promotional materials
99 address a product or products, the materials correctly and specifically identify the product or
100 products to which the information applies (e.g., the reference product, the biosimilar product, or
101 both the reference product and the biosimilar).¹⁸ For instance, if a biosimilar product’s FDA-
102 approved labeling uses the core name of the reference product followed by the word “products”
103 to convey that a risk applies to both the biosimilar and the reference product,¹⁹ it would also be
104 appropriate for similar presentations about this risk in promotional materials for the biosimilar to
105 use this nomenclature. Firms should also ensure that if promotional materials describe studies in
106 which non-U.S.-licensed comparator biological products were used (or if promotional materials
107 otherwise mention such products), the promotional materials accurately identify the non-U.S.-
108 licensed comparator biological products.

109
110 Clearly and correctly identifying the relevant biological product or products in promotional
111 materials can help prevent presentations that are inaccurate because they attribute data or
112 information to the wrong product. It can also help the audience identify which product or
113 products are the subject of a particular promotional presentation.

114

¹⁴ See the guidance for industry *Nonproprietary Naming of Biological Products* (January 2017). We update guidances periodically. For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents>.

¹⁵ See section 351(a)(1)(B)(i) of the PHS Act (42 U.S.C. 262(a)(1)(B)(i)) and 21 CFR 600.3(k).

¹⁶ See the guidance for industry *Nonproprietary Naming of Biological Products*.

¹⁷ *Ibid.*

¹⁸ Firms should also consider the requirements related to the placement, size, prominence, and frequency of the proprietary name and established name in prescription drug labeling and advertisements (see 21 CFR 201.10(g); 202.1(b) through (d)). For biological products, these requirements pertain to the placement, size, prominence, and frequency of the proprietary name and proper name of the product.

¹⁹ See the guidance for industry *Labeling for Biosimilar Products* (July 2018). The guidance recommends that in labeling sections where the risk applies to both the biosimilar product and the reference product, it would be appropriate to use the core name of the reference product followed by the word “products” to convey, for instance, that a risk or other information necessary for the safe use of the product applies to both the biosimilar product and the reference product. The guidance also explains, among other things, that the biosimilar product’s proprietary name (or if a proprietary name is not available, the biosimilar product’s proper name) should be used when providing directive statements and recommendations for preventing, monitoring, managing, or mitigating risks.

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115 **Q3. When developing promotional materials for biosimilars, what should firms consider**
116 **if presenting information from the studies conducted to support licensure of the**
117 **reference product when the information is included in the FDA-approved labeling**
118 **of both the reference and the biosimilar products?**
119

120 When developing promotional materials for a biosimilar product that include information from
121 the studies conducted to support licensure of the reference product that are reflected in both the
122 reference product's FDA-approved labeling and the biosimilar's FDA-approved labeling, firms
123 should refer to the biosimilar product's FDA-approved labeling. FDA has recommended that a
124 biosimilar product's FDA-approved labeling incorporate relevant data and information from the
125 reference product's FDA-approved labeling, including clinical data that supported FDA's finding
126 of safety and effectiveness of the reference product.²⁰
127

128 For instance, if a biosimilar product is licensed for fewer than all conditions of use for which the
129 reference product is licensed, the biosimilar's FDA-approved labeling generally contains the data
130 and information from the reference product's FDA-approved labeling that is relevant to the
131 licensed conditions of use of the biosimilar product.²¹ In general, a biosimilar product's FDA-
132 approved labeling contains data and information from the CLINICAL STUDIES section of the
133 reference product's FDA-approved labeling for the conditions of use for which the biosimilar
134 product is licensed and also generally includes data from the reference product's FDA-approved
135 labeling regarding clinical pharmacology studies, immunogenicity, and toxicity, among other
136 information.
137

138 **Q4. When developing promotional materials for biosimilars, what should firms consider**
139 **if presenting data or information from studies conducted to support a**
140 **demonstration of biosimilarity when the data or information is not included in the**
141 **FDA-approved labeling for their biosimilar product?**
142

143 If biosimilar promotional materials present data and information from studies that were
144 conducted to support a demonstration of biosimilarity between the biosimilar product and the
145 reference product but are not included in the biosimilar product's FDA-approved labeling, those
146 presentations should be consistent with the biosimilar's FDA-approved labeling and be truthful
147 and non-misleading, as described in the guidance for industry *Medical Product Communications*
148 *That Are Consistent With the FDA-Required Labeling — Questions and Answers* (June 2018)
149 (CFL guidance).
150

151 FDA has recommended that the FDA-approved labeling for a biosimilar product generally not
152 include data and information from studies conducted to support a demonstration of biosimilarity

²⁰ See the guidance for industry *Labeling for Biosimilar Products*.

²¹ In certain circumstances it may have been necessary to include information in the biosimilar product labeling relating to an indication(s) for which the biosimilar product is not licensed in order to help ensure safe use (e.g., when safety information in the reference product labeling is related to use of the product and is not specific to a particular licensed indication(s) or when information specific to only the biosimilar product's indication(s) cannot be easily extracted). See the guidance for industry *Labeling for Biosimilar Products*.

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153 between the reference product and the biosimilar product.²² However, firms developing
154 promotional materials for their biosimilar products have expressed interest in communicating
155 this information to health care providers or other interested parties. FDA encourages these firms
156 to apply the principles outlined in the CFL guidance if the promotional materials for their
157 biosimilar products include data or information from studies that supported the demonstration of
158 biosimilarity between the biosimilar and the reference product, which generally will not be
159 included in the biosimilar product's FDA-approved labeling.

160

161 **Q5. What should firms consider when comparing reference products and biosimilar** 162 **products in their promotional materials?**

163

164 FDA's licensure of a biosimilar product means that the Agency has determined that the
165 biosimilar is highly similar to the reference product notwithstanding minor differences in
166 clinically inactive components and that there are no clinically meaningful differences in terms of
167 safety purity, or potency. Although assessment of each promotional presentation involves a fact-
168 specific determination, representations or suggestions that create an impression that there are
169 clinically meaningful differences between the reference product and its biosimilar, such as
170 promotional presentations representing or suggesting that a reference product is safer or more
171 effective than its biosimilar product, or that a biosimilar is safer or more effective than its
172 reference product are likely to be false or misleading.²³ Similarly, representations or suggestions
173 that create an impression that a biosimilar is not highly similar to its reference product are likely
174 to be false or misleading.

175

176 Accordingly, FDA recommends that firms carefully evaluate presentations that compare a
177 reference product and a biosimilar product and avoid presentations that represent or suggest that
178 a licensed biosimilar is not highly similar to the reference product or that a clinically meaningful
179 difference in terms of safety, purity, or potency exists between the reference product and
180 biosimilar.

181

182 For example,²⁴ a firm generates promotional materials for a biosimilar product and the materials
183 present data and information on response rates in patients treated with the reference product
184 alone, response rates in patients initially started on the biosimilar product, and response rates in
185 patients transitioned from the reference product to the biosimilar product from a study supporting
186 a demonstration of biosimilarity. The presentation includes a header that the biosimilar is just as
187 effective as the reference product.

188

²² See footnote 20.

²³ False or misleading presentations about the safety or effectiveness of a prescription drug in its labeling or advertisements misbrand the product and thus cause its distribution in interstate commerce, among other actions, to be prohibited. See sections 201(n), 301(a), and 502(a) and (n) of the FD&C Act (21 U.S.C 321(n), 331(a), 352(a) and (n)); 21 CFR 1.21(a) and 202.1(e)(5).

²⁴ See the response for Q7 for additional explanation of the use of examples in this guidance.

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189 This presentation would not create a misleading impression that there is a clinically meaningful
190 difference between the reference product and the biosimilar so long as appropriate context is
191 provided in the presentation.^{25, 26} By contrast, the same data and information presented with a
192 header that claims greater efficacy for the biosimilar product would be misleading.

193
194 Similarly, representations or suggestions that a biosimilar product is superior to its reference
195 product based on a difference that is not clinically meaningful between the rates of occurrence of
196 a particular adverse reaction from a study that supported a demonstration of biosimilarity
197 between the reference product and biosimilar would be misleading. Representations or
198 suggestions that the reference product is less safe or less effective than its biosimilar based on
199 this study also would be misleading.

200
201 In some cases, individual statements of accurate information about a reference product or
202 about a biosimilar product could contribute to a misleading presentation when provided in a
203 comparative context. For example, presentations in promotional materials for a reference
204 product comparing the number of indications for which the reference product is licensed to the
205 number of indications for which the biosimilar is licensed in a manner that creates the net
206 impression that the biosimilar product is in general less safe or less effective than the reference
207 product simply because the biosimilar is licensed for fewer indications than the reference product
208 would be misleading.

209
210 Where a biosimilar has not been directly studied in a particular indication (i.e., the biosimilar’s
211 licensure for the indication is based in part on extrapolation), representations or suggestions in
212 promotional materials for the reference product that the biosimilar is less safe or less effective
213 than the reference product in that indication because licensure for that indication was based in
214 part on extrapolation also would be misleading.

215 216 **Q6. What else should firms consider when developing promotional materials for** 217 **reference products or biosimilar products?**

218
219 Promotional presentations about a product’s licensure as biosimilar to a reference product should
220 accurately describe the biosimilar product. For instance, promotional materials for a biosimilar
221 product that FDA has not licensed as interchangeable with the reference product should avoid
222 creating an impression that the biosimilar has been licensed as interchangeable with the reference
223 product, because this would not be accurate. Also, promotional materials for a reference product
224 should avoid representing or suggesting that a biosimilar product is less safe or effective than its
225 reference product because it has not been licensed as interchangeable with the reference product.

226
227 FDA also reminds firms that a biosimilar product is not required to be identical to the reference
228 product in order to be licensed; rather, licensure means the biosimilar product has been found to

²⁵ For a discussion of contextual considerations, refer to the CFL guidance.

²⁶ See the guidance for industry *Scientific Considerations in Demonstrating Biosimilarity to a Reference Product* (April 2015) (explains that “[c]linically meaningful differences could include a difference in the expected range of safety, purity, or potency of the proposed product and the reference product. By contrast, slight differences in rates of occurrence of certain adverse reactions between the two products ordinarily would not be considered clinically meaningful differences”).

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229 be highly similar to the reference product notwithstanding minor differences in clinically inactive
230 components and that there are no clinically meaningful differences between the biosimilar and
231 the reference product in terms of safety, purity, and potency. Accordingly, promotional
232 materials for a biosimilar product that represent or suggest that a finding of biosimilarity means
233 that FDA determined that the reference product and biosimilar product are identical to one
234 another generally would not be accurate. Additionally, FDA recommends that promotional
235 materials for reference products avoid presentations that represent or suggest that the licensed
236 biosimilar is not as safe and as effective as the reference product because it is not or may not be
237 identical to the reference product.
238

239 **Q7. What are some examples of applying the considerations in this guidance to** 240 **promotional presentations?**

241
242 The following examples are intended to illustrate some of the general considerations outlined in
243 this guidance. The examples in this guidance contain hypothetical scenarios for illustrative
244 purposes only and focus on the topics addressed by this guidance; they do not describe every
245 aspect of the promotional material that would be necessary to satisfy all applicable requirements.
246 As noted in Q1, whether a promotional presentation is truthful and non-misleading involves a
247 fact-specific determination that takes into account such factors as how the information is
248 presented, the type and quality of the data relied on to support the presentation, and contextual
249 and disclosure considerations.
250

251 The examples that follow use a fictional reference product JUNEXANT (replicamab-hjxf) and a
252 fictional biosimilar to JUNEXANT, a product named NEXSYMEO (replicamab-cznm).
253

254 Examples 1 and 2 illustrate scenarios where FDA would *not* expect to object to the presentations
255 described.
256

257 **Example 1:** A firm is developing promotional materials for its biosimilar, NEXSYMEO.
258 In the materials, the firm includes the route of administration, dosage form, and strength
259 described in NEXSYMEO's labeling and a claim that NEXSYMEO has the same route
260 of administration, dosage form, and strength as JUNEXANT in the conditions of use for
261 which both products are licensed. The claim is supported by NEXSYMEO's licensure as
262 biosimilar to JUNEXANT given that NEXSYMEO's licensure is based, in part, on
263 information showing that the route of administration, dosage form, and strength of
264 NEXSYMEO are the same as those of JUNEXANT.²⁷
265

266 Additionally, the materials include a claim that NEXSYMEO can be considered for
267 patients who are new to replicamab product therapy for the treatment of a licensed
268 indication and for patients currently being treated with JUNEXANT for the same
269 indication. This claim is supported by data and information submitted as part of
270 NEXSYMEO's application for licensure as biosimilar to JUNEXANT, including data
271 from a comparative clinical study that included patients who underwent a single
272 transition from JUNEXANT to NEXSYMEO and patients who were new to replicamab

²⁷ See section 351(k)(2) of the PHS Act (42 U.S.C. 262(k)(2)).

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273 product therapy, which supported a demonstration of no clinically meaningful differences
274 between NEXSYMEO and JUNEXANT in terms of safety, purity, and potency.
275

276 ***Example 2:*** As part of NEXSYMEO’s application for licensure as biosimilar to
277 JUNEXANT, FDA evaluated a comparative clinical study that included patients treated
278 with a non-U.S.-licensed comparator product to support a demonstration of no clinically
279 meaningful differences between NEXSYMEO and JUNEXANT.
280

281 NEXSYMEO’s firm wants to present data and information describing outcomes observed
282 in this study in promotional materials for NEXSYMEO. Data from this study is not
283 included in the FDA-approved labeling for NEXSYMEO.
284

285 The firm develops a presentation consistent with the CFL guidance, including the
286 recommendations in the CFL guidance regarding appropriate scientific and statistical
287 support for the outcome information presented. The firm clearly and prominently
288 provides contextual information about the study design and methodology, the role the
289 study played in the biosimilarity evaluation, relevant data from NEXSYMEO’s FDA-
290 approved labeling, and any material limitations of the data. The firm also accurately
291 describes the comparator used in the study as non-U.S.-licensed.
292

293 Example 3 illustrates promotional materials that FDA would consider misleading.
294

295 ***Example 3:*** Promotional materials for JUNEXANT state that in a clinical study, patients
296 on JUNEXANT experienced a numerically higher overall response rate than patients on
297 NEXSYMEO. The basis for the statement is a comparative clinical study that supported
298 a demonstration of no clinically meaningful differences in terms of safety, purity, and
299 potency between JUNEXANT and NEXSYMEO.
300

301 Although this statement accurately conveys the reference product’s higher numeric
302 overall response rates observed in the study, the materials do not disclose that this
303 difference in response rates was not statistically significant, and they do not describe the
304 study design or include other appropriate context. By focusing on the numerical
305 difference in response rates, which was not statistically significant, the presentation
306 misleadingly implies that JUNEXANT is superior to NEXSYMEO. It also misleadingly
307 implies that there is a clinically meaningful difference between the products when the
308 data presented in the promotional materials do not support this conclusion.
309

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310 **Q8. How can firms request FDA review of draft promotional materials for reference**
311 **products and biosimilar products before their dissemination?**
312

313 Firms voluntarily seeking FDA feedback on promotional materials for reference products or
314 biosimilar products before their dissemination should follow the current process for submitting
315 draft promotional materials for comment.²⁸
316

317 Furthermore, FDA reminds firms that they are subject to the postmarketing reporting
318 requirements for submitting promotional materials to FDA (Form FDA 2253 submissions for
319 prescription drugs and biologics).^{29, 30} In addition to the considerations specifically outlined in
320 this guidance, firms should ensure that their FDA-regulated promotional materials otherwise
321 satisfy the applicable requirements of the FD&C Act and FDA's implementing regulations.³¹
322 Firms should also ensure that they comply with the provisions obligating them to update the
323 FDA-approved labeling for their products to ensure that the labeling is not false or misleading or
324 for other reasons.³²
325

²⁸ See 21 CFR 202.1(j)(4). See also the guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format—Promotional Labeling and Advertising Materials for Human Prescription Drugs* (June 2019) and the draft guidance for industry *Fulfilling Regulatory Requirements for Postmarketing Submissions of Interactive Promotional Media for Prescription Human and Animal Drugs and Biologics* (July 2014). When final, this guidance will represent FDA's current thinking on this topic.

²⁹ See 21 CFR 601.12(f)(4), section 745A(a) of the FD&C Act (21 U.S.C. 379k-1).

³⁰ For additional guidance on electronic submission of these materials, see footnote 29.

³¹ See, e.g., sections 502(a) and (n) of the FD&C Act (21 U.S.C. 352(a) and (n)); 21 CFR 1.21(a) and 202.1(e)(5).

³² See, e.g., 21 CFR 201.56(a)(2) (referring to labeling updates in accordance with 21 CFR 601.12); sections 502(a), (f), and (j) (21 U.S.C. 352(a), (f), and (j)).