DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

Our STN: BLA 103951

ENFORCEMENT DISCRETION
June 2, 2011

Amgen, Incorporated
Attention: Elizabeth Williams, MS, RAC
Manager, Regulatory Affairs
One Amgen Center Drive
Mail Stop: 17-2-B
Thousand Oaks, CA 91320-1799

Dear Ms. Williams:

This letter is in reference to the Risk Evaluation and Mitigation Strategy (REMS) approved on February 16, 2010, under Section 505-1 of Federal Food, Drug, and Cosmetic Act (FDCA), for Aranesp (darbepoetin alpha). Aranesp is one of a class of drugs collectively referred to as Erythropoeisis Stimulating Agents, or "ESAs". One element of the approved REMS for the ESAs requires the distribution of a Medication Guide in accordance with the requirements of Part 208 of our regulations (21CFR Part 208).

FDA approved Medication Guides for the ESA products on November 19, 2008. On December 18, 2008, we issued a letter which outlined our intent to exercise enforcement discretion with respect to the frequency of the distribution of the Medication Guides in physicians' offices, and in certain inpatient or clinical settings, under specified conditions. When the Medication Guide was approved as part of a REMS under section 505-1 of the FDCA, we informed you of our intent to continue to exercise enforcement discretion as outlined in our letter dated March 12, 2010.

Since the issuance of the enforcement discretion letter we have changed our thinking about our intent to exercise enforcement discretion with respect to the frequency of Medication Guide distribution in certain situations and specified conditions. We now intend to exercise enforcement discretion in the following circumstances.

When ESAs are administered by a healthcare provider (e.g., in a physician's office, clinic, hospital inpatient setting, or dialysis center) to patients who do not have cancer, we intend to exercise enforcement discretion with respect to the requirements of 21 CFR 208.24(e) as long as the Medication Guide is provided to each patient or patient caregiver at the initiation of therapy and again if the Medication Guide is materially revised or updated.

When ESAs are administered by a healthcare provider (e.g., in a physician's office, clinic, hospital inpatient setting, or dialysis center) to patients with cancer, we intend to exercise enforcement discretion with respect to the requirements of 21 CFR 208.24(e) as long as the Medication Guide is provided to each patient or patient caregiver at the initiation of therapy; once a month during regular office visits — or, if regular office visits occur less frequently than

once a month, at the next regularly scheduled office visit — for as long as treatment continues; and again if the Medication Guide is materially revised or updated.

Amgen remains obligated to ensure that healthcare providers, clinics, and hospitals are notified and provided with updated Medication Guides if they are materially revised.

Please be advised that the policy reflected in this letter may be revoked at any time upon appropriate notice, and may also be superseded in the event FDA subsequently promulgates regulations or issues guidance relating to the issues addressed.

If you have any questions, call Tamika White, Project Management Officer, at (301) 796-0310.

Sincerely,

/H. Gregg Claycamp, Ph.D./
H. Gregg Claycamp, Ph.D.
Director
Division of Compliance Risk Management and Surveillance
Office of Compliance
Center for Drug Evaluation and Research