



July 24, 2020

Dockets Management Staff (HFA-305)  
Food and Drug Administration  
5630 Fishers Lane, Room 1061  
Rockville, MD 20852

***Re: Docket No. FDA-2019-D-5392 “Interpreting Sameness of Gene Therapy Products Under the Orphan Drug Regulations; Draft Guidance for Industry”***

Dear Sir or Madam,

CSL Behring appreciates the opportunity to submit comments on the Food and Drug Administration (FDA) Draft Guidance for Industry titled, “Interpreting Sameness of Gene Therapy Products Under the Orphan Drug Regulations,” and we are evaluating the Agency’s Draft Guidance through the lens of CSL Behring’s mission to save and improve the lives of people with rare and serious diseases. CSL Behring is strongly committed to bringing valuable, innovative products to market so patients can lead healthy and productive lives. Our strong R&D pipeline utilizes its expertise in plasma fractionation, recombinant technology, and cell and gene therapy to develop and deliver innovative medicines that address unmet medical needs or enhance current treatments.

CSL Behring appreciates the FDA’s efforts to develop guidance that provides the Agency’s current thinking of how the regulatory “sameness” criteria applies to human gene therapy products and the inclusion of additional features of the final gene therapy product that FDA generally intends to consider when determining sameness for gene therapy products. This is particularly helpful to sponsors who may seek orphan-drug designation and orphan-drug exclusivity in the development of gene therapies for rare diseases.

Our assessment of the Draft Guidance finds that the FDA provides clarity on the orphan drug “sameness” definition in regard to: 1) differentiating factors when two gene therapy orphan medicinal products are under development for the same target indication, and 2) that the FDA generally intends to consider certain key features, such as transgenes and/or vectors, to be “principal molecular structural features” for determining sameness of gene therapy orphan medicinal products. However, in addition to FDA’s consideration of differences in principal molecular structural features, we would ask the Agency to include the transfer system and manufacturing technology as “additional features,” which could be differentiating factors for determining sameness of gene therapy orphan medicinal products.

CSL Behring is appreciative of the concise scenarios and description for which FDA does not intend to consider two gene therapy products to be different drugs based solely on minor differences between their transgenes and/or vectors. Further, we find that the guidance provides an appropriate degree of regulatory flexibility enabling sponsors to continue developmental activities towards innovative therapies in the gene therapy space.

As the science and regulatory landscape continues to evolve around gene therapy products, we suggest the Agency consider utilizing effective and timely mechanisms for updating all stakeholders as the FDA gains more experience by sharing information, metrics and generalized non-competitive criteria/rationale for making determinations of “sameness” in the context of two or more gene therapy products. CSL Behring suggests that the Agency consider utilizing the same mechanism and level of detail as currently employed in sharing information around the Center for Biologics Evaluation and Research (CBER) Regenerative Medicine Advanced Therapy (RMAT) Designation(s). FDA could also host a public meeting with prior release of a discussion guide in order to solicit input from and facilitate meaningful dialogue with stakeholders as suggested by the Biotechnology Innovation Organization (BIO) in their June 23, 2020 letter to the Agency.

Lastly, CSL Behring urges the FDA to continue engagement with other health authorities, particularly the European Medicines Agency (EMA), and discussions within international forums, such as ICH and WHO, in order to align or seek convergence in development of the regulatory frameworks applicable to gene therapy-related topics. Global harmonization to the extent possible can enhance development of these innovative products and their availability to patients globally.

CSL Behring again thanks the FDA for the opportunity to review the Draft Guidance and provide comments for the Agency’s consideration before it begins work on the final version of this document for implementation. We would be happy to discuss our points of view in more detail. Should there be any questions, please feel free to contact me at 610-878-4600 or [Stephanie.Kelly@cslbehring.com](mailto:Stephanie.Kelly@cslbehring.com) to discuss further.

Sincerely,

/S/

Stephanie Sabatino Kelly  
Associate Director, North America Regulatory Intelligence & Policy  
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CSL Behring