

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

213736Orig1s000

Trade Name: Pemazyre tablets 4.5 mg, 9 mg, and 13.5 mg

Generic or Proper Name: pemigatinib

Sponsor: Incyte Corporation

Approval Date: April 17, 2020

Indication: For the treatment of adults with previously treated, unresectable locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or other rearrangement as detected by an FDA-approved test.

CENTER FOR DRUG EVALUATION AND RESEARCH

213736Orig1s000

CONTENTS

Reviews / Information Included in this NDA Review.

Approval Letter	X
Other Action Letters	
Labeling	X
REMS	
Officer/Employee List	X
Multidiscipline Review(s) <ul style="list-style-type: none">• Summary Review• Office Director• Cross Discipline Team Leader• Clinical• Non-Clinical• Statistical• Clinical Pharmacology	X
Product Quality Review(s)	X
Clinical Microbiology / Virology Review(s)	
Other Reviews	X
Risk Assessment and Risk Mitigation Review(s)	X
Proprietary Name Review(s)	X
Administrative/Correspondence Document(s)	X

**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

213736Orig1s000

APPROVAL LETTER



NDA 213736

ACCELERATED APPROVAL

Incyte Corporation
Attention: Aaron Packman, MBA
Executive Director, Global Regulatory Affairs
1801 Augustine Cut-Off
Wilmington, DE 19803

Dear Mr. Packman:

Please refer to your new drug application (NDA) dated September 30, 2019, received September 30, 2019, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Pemazyre (pemigatinib) tablets, 4.5 mg, 9 mg, and 13.5 mg, for oral use.

This new drug application provides for the use of Pemazyre (pemigatinib) tablets, 4.5 mg, 9 mg, and 13.5 mg, for oral use, for the treatment of adults with previously treated, unresectable locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or other rearrangement as detected by an FDA-approved test.

This indication is approved under accelerated approval based on durable tumor response rate. Continued approval for this indication may be contingent upon verification and description of clinical benefit in confirmatory trials.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved under the provisions of accelerated approval regulations (21 CFR 314.500), effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling text.

Marketing of this drug product and related activities must adhere to the substance and procedures of the referenced accelerated approval regulations.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at FDA.gov.¹ Content of labeling must be identical to the enclosed labeling (text for the

¹ <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

Prescribing Information, and Patient Package Insert). Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*.²

The SPL will be accessible via publicly available labeling repositories.

CARTON AND CONTAINER LABELING

Submit final printed carton and container labeling that are identical to the enclosed carton and container labeling and carton and container labeling submitted on April 16, 2020, as soon as they are available, but no more than 30 days after they are printed. Please submit these labeling electronically according to the guidance for industry titled *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (April 2018, Revision 5)*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for approved NDA 213736.**” Approval of this submission by FDA is not required before the labeling is used.

ADVISORY COMMITTEE

Your application for Pemazyre was not referred to an FDA advisory committee because the clinical trial design is similar to that previously used to support accelerated approval, the evaluation of the application did not raise significant safety or efficacy issues in the intended population, and there were no controversial issues that would benefit from an advisory committee discussion.

ACCELERATED APPROVAL REQUIREMENTS

Products approved under the accelerated approval regulations, 21 CFR 314.510, require further adequate and well-controlled clinical trials to verify and describe clinical benefit. You are required to conduct such clinical trials with due diligence. If postmarketing clinical trials fail to verify clinical benefit or are not conducted with due diligence, we may, following a hearing in accordance with 21 CFR 314.530, withdraw this approval. We remind you of your postmarketing requirement specified in your submissions dated March 5, 2020, April 9, 2020, and April 13, 2020. This requirement, along with required completion dates, is listed below.

3801-1 Submit the results of a randomized trial demonstrating improvement of progression-free survival or overall survival in patients with unresectable locally advanced or metastatic cholangiocarcinoma with a fibroblast

² We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

growth receptor 2 (*FGFR2*) gene fusion or rearrangement, to confirm clinical benefit of pemigatinib.

The timetable you submitted on March 5, 2020, states that you will conduct this trial according to the following schedule:

Final Protocol Submission: 11/2018 (completed)
Trial Completion: 06/2026
Final Report Submission: 12/2026

Submit clinical protocols to your IND 138179 for this product. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each requirement in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial.

Submit final reports to this NDA as a supplemental application. For administrative purposes, all submissions relating to this postmarketing requirement must be clearly designated “**Subpart H Postmarketing Requirement(s).**”

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because Pemazyre (pemigatinib) has orphan drug designation for this indication, you are exempt from this requirement.

POSTMARKETING REQUIREMENTS UNDER 505(o)

Section 505(o)(3) of the FDCA authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to identify an unexpected serious risk of patients with hepatic and renal impairment.

Furthermore, the active postmarket risk identification and analysis system as available under section 505(k)(3) of the FDCA will not be sufficient to assess these serious risks.

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess these serious risks.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following trials:

3801-2 Submit the analysis and datasets with the final study report for an ongoing hepatic impairment clinical trial to evaluate the pharmacokinetics and safety of pemigatinib in patients with normal hepatic function and patients with hepatic impairment. Design and conduct the trial in accordance with the FDA Guidance for Industry titled, “*Pharmacokinetics in Patients with Impaired Hepatic Function: Study Design, Data Analysis, and Impact on Dosing and Labeling.*”

The timetable you submitted on March 5, 2020, states that you will conduct this trial according to the following schedule:

Final Protocol Submission: 01/2019 (completed)
Trial Completion: 02/2020
Final Report Submission: 08/2020

3801-3 Submit the analysis and datasets with the final study report for an ongoing renal impairment clinical trial to evaluate the pharmacokinetics and safety of pemigatinib in patients with normal renal function and patients with renal impairment. Design and conduct the trial in accordance with the FDA Guidance for Industry titled; “*Pharmacokinetics in Patients with Impaired Renal Function: Study Design, Data Analysis, and Impact on Dosing and Labeling.*”

The timetable you submitted on March 5, 2020, states that you will conduct this trial according to the following schedule:

Final Protocol Submission: 01/2019 (completed)
Trial Completion: 02/2020
Final Report Submission: 08/2020

FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.³

³ See the guidance for Industry *Postmarketing Studies and Clinical Trials—Implementation of Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act (October 2019)*.
<https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

Submit clinical protocol(s) to your IND 138179 with a cross-reference letter to this NDA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all final report(s) to your NDA. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate:

Required Postmarketing Protocol Under 505(o), Required Postmarketing Final Report Under 505(o), Required Postmarketing Correspondence Under 505(o).

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR 314.81(b)(2)(vii) requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 314.81(b)(2)(vii) to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 314.81(b)(2)(vii). We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

PROMOTIONAL MATERIALS

Under 21 CFR 314.550, you are required to submit, during the application pre-approval review period, all promotional materials, including promotional labeling and advertisements, that you intend to use in the first 120 days following marketing approval (i.e., your launch campaign). If you have not already met this requirement, you must immediately contact the Office of Prescription Drug Promotion (OPDP) at 796-1200. Please ask to speak to a regulatory project manager or the appropriate reviewer to discuss this issue.

As further required by 21 CFR 314.550, submit all promotional materials that you intend to use after the 120 days following marketing approval (i.e., your post-launch materials) at least 30 days before the intended time of initial dissemination of labeling or initial publication of the advertisement. We ask that each submission include a detailed cover letter together with three copies each of the promotional materials, annotated references, and approved Prescribing Information (PI)/Medication Guide/Patient Package Insert (as applicable).

Send each submission directly to:

OPDP Regulatory Project Manager
Food and Drug Administration

U.S. Food and Drug Administration
Silver Spring, MD 20993
www.fda.gov

Center for Drug Evaluation and Research
Office of Prescription Drug Promotions (OPDP)
5901-B Ammendale Road
Beltsville, MD 20705-1266

Alternatively, you may submit promotional materials for accelerated approval products electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format—Promotional Labeling and Advertising Materials for Human Prescription Drugs*.⁴

REPORTING REQUIREMENTS

We remind you that you must comply with the reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

MEDWATCH-TO-MANUFACTURER PROGRAM

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at FDA.gov.⁵

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biologics qualify for a post approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application.

⁴ When final, this guidance will represent the FDA's current thinking on this topic. For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

⁵ <http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm>

If you have any questions, call Stacie Woods, Pharm.D., Regulatory Health Project Manager, at 301-796-4803.

Sincerely,

{See appended electronic signature page}

Marc Theoret, M.D.
Deputy Director (Acting)
Office of Oncologic Diseases
Center for Drug Evaluation and Research

ENCLOSURE(S):

- Content of Labeling
 - Prescribing Information
 - Patient Package Insert
- Carton and Container Labeling

This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

MARC R THEORET
04/17/2020 05:57:44 PM