



NDA 203585/S-003

SUPPLEMENT APPROVAL

Teva Branded Pharmaceuticals Products R&D, Inc.
US Agent for IVAX Pharmaceuticals GmbH
Attention: Michael J. McGraw, PharmD, MS
Director, Regulatory Affairs
41 Moores Road, P.O. Box 4011
Frazer, PA 19355

Dear Dr. McGraw:

Please refer to your Supplemental New Drug Application (sNDA) dated November 1, 2013, received November 1, 2013, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for SYNRIBO[®] (omacetaxine mepesuccinate) for injection, lyophilized powder for injection, 3.5 mg/vial.

We acknowledge receipt of your amendments dated December 18, 2013; February 14, March 11, April 17, April 23, April 28, and April 30, 2014.

This "Prior Approval" supplemental new drug application proposes revisions to the SYNRIBO Package Insert (PI) to allow for home administration and provides for a new Medication Guide and Instructions for Use. The labeling was revised to include updated information to Section 2, Dosage and Administration regarding storage times and conditions after reconstitution and home administration, and updates to Section 17, Patient Counseling Information for guidance on self-administration.

APPROVAL & LABELING

We have completed our review of this supplemental application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed, agreed-upon labeling text.

We note that your April 28, 2014, submission includes final printed labeling (FPL) for your Package Insert, Medication Guide, and Instructions for Use. We have not reviewed this FPL. You are responsible for assuring that the wording in this printed labeling is identical to that of the approved content of labeling in the structured product labeling (SPL) format.

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 <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content of labeling must be identical to the enclosed labeling (text for the package insert, Medication Guide/Instructions for Use), with the addition of any labeling changes in pending “Changes Being Effectuated” (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

Information on submitting SPL files using eList may be found in the guidance for industry titled “SPL Standard for Content of Labeling Technical Qs and As at <http://www.fda.gov/downloads/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that includes labeling changes for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in MS Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes and annotate each change. To facilitate review of your submission, provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, 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(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because none of these criteria apply to your application, 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.

Since Synribo was approved on October 26, 2012, we have become aware of a signal of serious adverse events that could result from incorrect home administration of the drug. The risks of

incorrect home administration include serious adverse events that result from incorrect patient selection for appropriateness for home administration, incorrect transportation, storage, and administration of reconstituted product, and incorrect safe disposal practices.

We consider this information to be “new safety information” as defined in section 505-1(b)(3) of the FDCA.

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 assess the signal of a serious risk of incorrect home administration of the drug, .

Furthermore, the new pharmacovigilance system that FDA is required to establish under section 505(k)(3) of the FDCA will not be sufficient to assess this serious risk.

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

- 2150-1 Collect and analyze data related to the home administration of Synribo in order to assess the potential for the serious safety risks of incorrect dose administration and serious adverse events potentially arising from improper distribution, transport, storage, and handling in clinical practice. Identify all potentially correctable system failures and propose remedial measures. Sponsor agrees to submit a protocol acceptable to the Agency that details the process for collection of this data to assess safe use for home administration.

The timetable you submitted on April 30, 2014 states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	08/2014
Final Protocol Submission:	10/2014
Interim report:	01/2015
Interim report:	07/2015
Interim report:	01/2016
Interim report:	07/2016
Interim report:	01/2017
Study Completion:	05/2017
Final Report Submission:	07/2017

REQUIRED POSTMARKETING CORRESPONDENCE UNDER 505(o)

Submit the protocol(s) to your IND 62384, with a cross-reference letter to this NDA. Submit all interim and 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

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) the package insert(s) to:

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

You must submit final promotional materials and package insert(s), accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. Form FDA 2253 is available at <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>. Information and Instructions for completing the form can be found at <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>.

All promotional materials that include representations about your drug product must be promptly revised to be consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 314.70(a)(4)]. The revisions in your promotional materials should include prominent disclosure of the important new safety information that appears in the revised package labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 314.70(a)(4) to the address above or by fax to 301-847-8444.

REPORTING REQUIREMENTS

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

If you have any questions, call Theresa Carioti, Regulatory Project Manager, at (301) 796-2848.

Sincerely,

{See appended electronic signature page}

Robert C. Kane, MD
Deputy Director of Safety
Division of Hematology Products
Office of Hematology and Oncology Products
Center for Drug Evaluation and Research

ENCLOSURE:
Content of Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

ROBERT C KANE
05/01/2014