Dear Ms. Bertelsen:

Please refer to your New Drug Application (NDA) dated February 3, 2014, received February 3, 2014, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Lynparza (olaparib), 50 mg capsules.

We acknowledge receipt of your amendments dated February 6, 19, and 27, 2014; March 13, 24, 25, 26, and 28, 2014; April 7, 10, 15(2), 18, 21, and 25 (2), 2014; May 2, 5, 6, 8, 9 (2), 15 (2), 21, 27, and 30, 2014; June 2, 6 (2), 11, and 20, 2014; July 21 and 24, 2014; August 1, 4, 15, 22, and 28, 2014; September 5 and 18, 2014; October 1, 6, 8, 16, 20, and 30, 2014; November 3, 4, 5, 7, 10, 13, 20, 25; and December 4, 9, and 10, 2014.

This new drug application provides for the use of Lynparza (olaparib) as monotherapy for patients with deleterious or suspected deleterious germline BRCA mutated (as detected by an FDA-approved test) advanced ovarian cancer who have been treated with three or more prior lines of chemotherapy.

**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.

The drug product is granted an eighteen (18) month expiry when stored at USP controlled room temperature 20-25°C (68-77°F); excursions permitted to 15-30°C (59-86°F).

**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

The SPL will be accessible via publicly available labeling repositories.

**CARTON AND IMMEDIATE CONTAINER LABELS**

Submit final printed carton and container labels that are identical to the enclosed carton and immediate container labels as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry titled “Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008).” Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission “Final Printed Carton and Container Labels for approved NDA 206162.” Approval of this submission by FDA is not required before the labeling is used.

Marketing the product with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

**ACCELERATED APPROVAL REQUIREMENTS**

Products approved under the accelerated approval regulations, 21 CFR 314.510, require further adequate and well-controlled studies/clinical trials to verify and describe clinical benefit. You are required to conduct such studies/clinical trials with due diligence. If postmarketing studies/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 requirements specified in your submission dated November 13, 2014. These requirements, along with required completion dates, are listed below.

**2824-1**

Submit the progression-free survival (PFS) and overall survival (OS) analyses with datasets from clinical trial D0818C00002, SOLO-2, the ongoing randomized double-blind, placebo-controlled, multi-center trial to assess the efficacy of olaparib maintenance monotherapy in relapsed high grade serous ovarian cancer (HGSOC) patients (including patients with primary peritoneal and/or fallopian tube cancer) or high grade endometrioid cancer with BRCA mutations (documented mutation in BRCA1 or BRCA2 that is predicted to be deleterious or suspected deleterious (known or predicted to be detrimental/lead to loss of function)) who have responded following platinum-based chemotherapy.

- Interim Report (PFS analysis) 02/2016
- Trial Completion Date 12/2018
Submit the progression-free survival (PFS) and overall survival (OS) analyses with datasets from clinical trial D0816C00010, a randomized trial establishing the superiority of olaparib over physician’s choice single-agent chemotherapy in the treatment of platinum sensitive relapsed ovarian cancer in patients carrying deleterious or suspected deleterious germline BRCA1/2 mutations.

Interim report (PFS analysis) 06/2018
Trial Completion Date 03/2020
Final report submission (OS analysis) 06/2020

Submit final reports to this NDA as a supplemental application. For administrative purposes, all submissions relating to these postmarketing requirements 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, 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.

We are waiving the pediatric study requirement for this application because necessary studies are impossible or highly impracticable since ovarian cancer does not occur in children.

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 assess a known serious risk of acute myelogenous leukemia/myelodysplastic syndrome.

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:

Collect and analyze all cases of acute myelogenous leukemia/myelodysplastic syndrome identified in patients treated with Lynparza (olaparib) on an annual basis. These interim reports should summarize all cases identified up until that reporting date (new cases and those reported in previous years), and should include patients
treated with Lynparza on clinical trials and outside of clinical trials (including spontaneous safety reports) to provide an accurate assessment of the long-term incidence and risk of AML/MDS.

The timetable you submitted on November 13, 2014, states that you will conduct this study according to the following schedule:

<table>
<thead>
<tr>
<th>Interim Report #</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>12/2015</td>
</tr>
<tr>
<td>#2</td>
<td>12/2016</td>
</tr>
<tr>
<td>#3</td>
<td>12/2017</td>
</tr>
<tr>
<td>#4</td>
<td>12/2018</td>
</tr>
<tr>
<td>#5</td>
<td>12/2019</td>
</tr>
<tr>
<td>Final Report Submission</td>
<td>06/2020</td>
</tr>
</tbody>
</table>

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess the signals of the serious risks of hepatic and renal impairment.

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

2824-4 Submit the final report for trial D0816C00006 entitled, “An Open-label, Non-randomized, Multicenter, Comparative, and Phase 1 Study of the Pharmacokinetics, Safety and Tolerability of Olaparib Following a Single Oral 300 mg Dose to Patients with Advanced Solid Tumors and Normal Renal Function or Renal Impairment.”

The timetable you submitted on November 13, 2014, states that you will conduct this trial according to the following schedule:

<table>
<thead>
<tr>
<th>Interim report (planned primary PK analysis)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>09/2015</td>
</tr>
<tr>
<td>Trial completion</td>
<td>08/2016</td>
</tr>
</tbody>
</table>

2824-5 Submit the final report for trial D0816C00005 entitled, “An Open-label, Non-randomized, Multicenter, Comparative, Phase 1 Study to Determine the Pharmacokinetics, Safety and Tolerability of Olaparib Following a Single Oral 300 mg Dose to Patients with Advanced Solid Tumors and Normal Hepatic Function or Mild or Moderate Hepatic Impairment.”

The timetable you submitted on November 13, 2014, states that you will conduct this trial according to the following schedule:

<table>
<thead>
<tr>
<th>Interim report (planned primary PK analysis)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>09/2015</td>
</tr>
<tr>
<td>Trial Completion date</td>
<td>08/2016</td>
</tr>
</tbody>
</table>
Submit the protocol(s) to your IND 075918, with a cross-reference letter to this NDA. Submit 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.

**POSTMARKETING COMMITMENTS NOT SUBJECT TO THE REPORTING REQUIREMENTS UNDER SECTION 506B**

We remind you of your postmarketing commitment:

**2824-6** Conduct a stability study with the process validation batches (minimum of 3): ICH primary stability testing to the submitted NDA specifications (acceptance criteria, analytical method) for the commercial product, including up to end of expiry.

The timetable you submitted on November 25, 2014, states that you will conduct this study according to the following schedule:

- **First Interim Report (includes 6 months of data):** 11/2015
- **Second Interim Report (includes 12 months of data):** 05/2016
- **Study Completion:** 02/2017
- **Final Report Submission:** 04/2017
Submit clinical protocols to your IND 075918 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment 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. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled “Postmarketing Commitment Protocol,” “Postmarketing Commitment Final Report,” or “Postmarketing Commitment Correspondence.”

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 (301) 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 package insert (PI)/Medication Guide/patient PI (as applicable).

Send each submission directly to:

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

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
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.

PDUFA V APPLICANT INTERVIEW

FDA has contracted with Eastern Research Group, Inc. (ERG) to conduct an independent interim and final assessment of the Program for Enhanced Review Transparency and Communication for NME NDAs and Original BLAs under PDUFA V (‘the Program’). The PDUFA V Commitment Letter states that these assessments will include interviews with applicants following FDA action on applications reviewed in the Program. For this purpose, first-cycle actions include approvals, complete responses, and withdrawals after filing. The purpose of the interview is to better understand applicant experiences with the Program and its ability to improve transparency and communication during FDA review.

ERG will contact you to schedule a PDUFA V applicant interview and provide specifics about the interview process. Your responses during the interview will be confidential with respect to the FDA review team. ERG has signed a non-disclosure agreement and will not disclose any identifying information to anyone outside their project team. They will report only anonymized results and findings in the interim and final assessments. Members of the FDA review team will be interviewed by ERG separately. While your participation in the interview is voluntary, your feedback will be helpful to these assessments.

If you have any questions, call Rajesh Venugopal, Regulatory Project Manager, at (301) 796-4730.

Sincerely,

{See appended electronic signature page}

Richard Pazdur, MD
Director
Office of Hematology and Oncology Products
Center for Drug Evaluation and Research

ENCLOSURE(S):
- Content of Labeling
- Carton and Container Labeling
This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

RICHARD PAZDUR
12/19/2014