



NDA 206947

**NDA APPROVAL**

Eisai, Inc.  
Attention: Susan Mayer  
Director, Regulatory Affairs  
155 Tice Blvd.  
Woodcliff Lake, NJ 07677

Dear Ms. Mayer:

Please refer to your New Drug Application (NDA) dated August 14, 2014, received August 14, 2014, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for LENVIMA (lenvatinib) capsules, 4 mg and 10 mg.

We also refer to our approval letter dated February 13, 2015, which contained the following error: the “postmarketing commitment not subject to the reporting requirements under section 506B” was noted as having a set number of 2685-2 when the correct set number is 2865-2.

This replacement approval letter incorporates the correction of the error. The effective approval date will remain February 13, 2015, the date of the original approval letter.

We acknowledge receipt of your amendments dated August 28, September 4, September 8, September 10, September 16, October 10, October 28, October 29 (2), October 30, November 5, November 6, November 13 (2), November 17, November 26, December 1, December 5, December 8, December 12, and December 19, 2014; January 6, January 8, January 12, January 13, January 14, January 22, January 29 (2), February 9, February 11 (2), and February 12, 2015.

This new drug application provides for the use of LENVIMA (lenvatinib) capsules for the treatment of patients with locally recurrent or metastatic, progressive, radioactive iodine-refractory differentiated thyroid cancer.

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

**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 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*, available at <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

The SPL will be accessible via publicly available labeling repositories.

### **CARTON AND IMMEDIATE CONTAINER LABELS**

Submit final printed carton and immediate container labels that are identical to the enclosed carton and immediate container labels submitted on January 22, 2015, 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 *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 206947.**” Approval of this submission by FDA is not required before the labeling is used.

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

### **CHEMISTRY, MANUFACTURING, AND CONTROLS**

A 36 month expiration dating period is granted for the 4 mg and 10 mg tablets when stored at 15°C to 30°C (59°F to 86°F).

### **MARKET PACKAGE**

Please submit one market package of the drug product when it is available to the following address:

Deanne Varney  
Food and Drug Administration  
Center for Drug Evaluation and Research  
White Oak Building 22, Room: 2326  
10903 New Hampshire Avenue  
Silver Spring, Maryland  
*Use zip code **20903** if shipping via United States Postal Service (USPS).*  
*Use zip code **20993** if sending via any carrier other than USPS (e.g., UPS, DHL, FedEx).*

### **ADVISORY COMMITTEE**

Your application for LENVIMA (lenvatinib) was not referred to an FDA advisory committee because:

- the safety profile is acceptable for the treatment of patients with locally recurrent or metastatic, progressive, radioactive iodine-refractory differentiated thyroid cancer;
- the clinical trial design is acceptable;
- the application did not raise significant safety or efficacy issues that were unexpected for a drug of this class;
- the application did not raise significant public health questions on the role of the drug in the diagnosis, cure, mitigation, treatment, or prevention of a disease; and,
- there were no controversial issues that would benefit from advisory committee discussion.

### **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 this drug product for this indication has an orphan drug designation, 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 assess a known serious risk, including the incidence of severe (i.e.,  $\geq$  Grade 3) and serious adverse reactions occurring with lower doses of LENVIMA (lenvatinib). These severe and serious adverse reactions include hypertension, decreased weight, fatigue, proteinuria, diarrhea, decreased appetite, stomatitis and arthralgia/myalgia.

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 these known serious risks.

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess the known serious risks of serious adverse reactions as described above.

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

- 2865-1 Conduct a clinical trial to evaluate the incidence of serious and severe (i.e.  $\geq$  Grade 3) adverse reactions of an oral starting dose of 20 mg or of 14 mg daily compared to the 24 mg starting dose, with a comparable objective response rate. Safety assessments will include evaluations for all severe or life-threatening ( $\geq$  Grade 3) and serious adverse reactions and should also include assessments of all adverse reactions.

The timetable you submitted on January 12, 2015, states that you will conduct this trial according to the following schedule:

Final Protocol Submission:	July 31, 2015
Trial Completion:	July 31, 2019
Final Report Submission:	July 31, 2020

Submit the protocol to your IND 113656, 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:

2865-2 Submit a prior approval supplement (PAS) with a request to sunset the test and acceptance criterion based on the submitted data with the following information:

- A limit test for the level (b)(4) of the drug substance in the drug product including the analytical method and its validation.
- Supporting data for the limits.

The timetable you submitted on January 13, 2015, states that you will conduct this study according to the following schedule:

PAS Submission: June 2015

Submit clinical protocols to your IND 113656 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**

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

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

As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the package insert, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. 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>.

### **METHODS VALIDATION**

We have not completed validation of the regulatory methods. However, we expect your continued cooperation to resolve any problems that may be identified.

### **REPORTING REQUIREMENTS**

We remind you that you must comply with 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 <http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm>.

### **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 within two weeks of receipt of this communication.

### **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 Deanne Varney, Senior Regulatory Project Manager, at (301) 796-0297.

Sincerely,

*{See appended electronic signature page}*

Richard Pazdur, M.D.  
Director  
Office of Hematology and Oncology Products  
Center for Drug Evaluation and Research

Enclosures:

Content of Labeling  
Carton and Container Labeling

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**This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.**  
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/s/  
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RICHARD PAZDUR  
02/13/2015