Dear Dr. Carter:

Please refer to your Supplemental Biologics License Applications (sBLAs), dated December 24, 2015, received December 24, 2015, (S-8) and dated June 24, 2016, received June 24, 2016, (S-12) and your amendments, submitted under section 351(a) of the Public Health Service Act for Keytruda (pembrolizumab).

Prior Approval supplemental biologics application S-8 provides for modifications of the approved indication for the treatment of patients with metastatic non-small cell lung cancer (NSCLC) whose tumors express PD-L1 [Tumor Proportion Score (TPS) \( \geq 1\% \)] as determined by an FDA-approved test, with disease progression on or after platinum-containing chemotherapy approved on October 2, 2015, under the provisions of 21 CFR 601.70, to remove the following language (italicized) that This indication is approved under accelerated approval based on tumor response rate and durability of response. An improvement in survival or disease-related symptoms has not yet been established. Continued approval for this indication may be contingent upon verification and description of clinical benefit in the confirmatory trials.

Prior Approval supplemental biologics application S-12 provides for an expansion of the metastatic NSCLC indication to include first-line treatment of patients whose tumors have high PD-L1 expression (TPS \( \geq 50\% \)) as determined by an FDA approved test, with no EGFR or ALK genomic tumor aberrations.

**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.
WAIVER OF HIGHLIGHTS SECTION

Please note that we have previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit, via the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 601.14(b)] in structured product labeling (SPL) format, as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm, that is identical to the enclosed labeling (text for the package insert and Medication Guide) and include the labeling changes proposed in any pending “Changes Being Effected” (CBE) supplements. 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/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible via publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that include labeling changes for this BLA, including pending “Changes Being Effected” (CBE) supplements, for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 601.12(f)] in MS Word format that includes the changes approved in this supplemental application.

SUBPART E FULFILLED/ FULFILLMENT OF POSTMARKETING REQUIREMENT

We approved sBLA 125514/S-5 on October 2, 2015, under the regulations at 21 CFR 601 Subpart E for Accelerated Approval of Biological Products for Serious or Life-Threatening Illnesses. Approval of Supplement #8 (S-8) fulfills the below postmarketing requirement (PMR #2952-1) made under 21 CFR 601.41.

2952-1 Conduct and submit the results of a multicenter, randomized clinical trial establishing the superiority of Keytruda over available therapy in patients with metastatic, PD-L1-positive NSCLC who have been previously treated with platinum-containing chemotherapy.

You are no longer required to report on this requirement.

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 because non-small cell lung cancer does not occur in children.

**POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B**

We remind you of your postmarketing commitments:

3127-1  Submit the final report and efficacy datasets for Keynote-024, entitled “A Randomized, Open-Label, Phase 3 Trial of MK-3475 versus Platinum-Based Chemotherapy in 1L Subjects with PD-L1 Strong, Metastatic Non-Small Cell Lung Cancer” to update the label with mature overall survival data.

The timetable you submitted on September 14, 2016, states that you will submit the final clinical report and datasets according to the following schedule:

   Final Report Submission: June 2018


The timetable you submitted on September 19, 2016, states that you will submit the final clinical report and datasets according to the following schedule:

   Final Report Submission: December 2018

Submit all postmarketing final reports to this BLA. In addition, under 21 CFR 601.70 you should include a status summary of each commitment in your annual progress report of postmarketing studies to this BLA. 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(s) to:

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

Alternatively, you may submit a request for advisory comments electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft Guidance for Industry (available at: http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM443702.pdf).

As required under 21 CFR 601.12(f)(4), you must submit final promotional materials, and the package insert(s), 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.

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved BLA (in 21 CFR 600.80 and in 21 CFR 600.81).

If you have any questions, please call Ms. Sharon Sickafuse, Senior Regulatory Health Project Manager, at (301) 796-2320.

Sincerely,

{See appended electronic signature page}

Patricia Keegan, M.D.  
Director  
Division of Oncology Products 2  
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/

PATRICIA KEEGAN
10/24/2016