



BLA 125276/S-114

## SUPPLEMENT APPROVAL

Genentech, Inc.  
Attention: John Bergan  
Global Regulatory Leader  
1 DNA Way  
San Francisco, CA 94080

Dear Mr. Bergan:

Please refer to your Supplemental Biologics License Application (sBLA), dated June 1, 2017, received June 1, 2017, and your amendments, submitted under section 351(a) of the Public Health Service Act for ACTEMRA<sup>®</sup> (tocilizumab).

This Prior Approval supplemental biologics application provides for updates to the US Prescribing Information (USPI) with a new indication for ACTEMRA<sup>®</sup> for the treatment of chimeric antigen receptor (CAR) T cell-induced severe or life-threatening cytokine release syndrome (CRS) in adults and pediatric patients 2 years of age and older.

### **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 prescribing information 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.

### **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 Federal Food, Drug, and Cosmetic Act (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 ACTEMRA<sup>®</sup> (tocilizumab) was approved on January 8, 2010, we have become aware of the lack of prospectively collected safety data when ACTEMRA is used in patients with chimeric antigen receptor T cell-induced cytokine release syndrome. The following potential risks were identified during review of the Application: infusion reactions, neurologic toxicities, prolonged neutropenia, and infections. 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 or identify the unexpected serious risks of infusion reactions, neurologic toxicities, prolonged neutropenia, and infections.

Furthermore, the new pharmacovigilance system that FDA is required to establish under section 505(k)(3) of the FDA will not be sufficient to assess these serious risks or identify unexpected serious risks.

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

PMR 3262-1 Further characterize the safety of tocilizumab in the treatment of patients with chimeric antigen receptor (CAR) T cell-induced cytokine release syndrome including the collection of data on the timing of tocilizumab administration relative to the nature and onset of adverse events. Submit the final data report and data set.

The timetable you submitted on August 28, 2017, states that you will conduct this study according to the following schedule:

Draft Data Collection Plan: 06/2018  
Final Data Collection Plan: 12/2018  
Data Collection Completion: 12/2022  
Final Report Submission: 12/2023

#### **REQUIRED POSTMARKETING CORRESPONDENCE UNDER 505(o)**

Postmarketing requirement (PMR) protocols and protocol related correspondence are submitted to an active IND for tracking purposes and, for PMRs involving applicable clinical trials, in accordance with the regulatory requirements under 21 CFR 312. Since our records indicate that you do not have an active IND for the product referenced in this letter, we request that you submit a new IND to your existing pre-investigational new drug application (PIND) file 125952, to facilitate your submissions. This IND will need to be opened to identify and track all applicable protocol submissions for these PMRs. The IND should include a cover letter that cross references your BLA. You may cross reference information from your BLA to fulfill any applicable requirements for your new IND.

Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final report(s) to your BLA. 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 601.70 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 601.70 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 601.70. 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, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the prescribing information 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 prescribing information, 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>.

All promotional materials for your drug product that include representations about your drug product must be promptly revised to make it consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 601.12(a)(4)]. The revisions to 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 601.12(a)(4) to the address above, by fax to 301-847-8444, or 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>).

**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, call Natasha Kormanik, Regulatory Project Manager, at (240) 402-4227.

Sincerely,

*{See appended electronic signature page}*

Ann T. Farrell, MD  
Director  
Division of Hematology Products  
Office of Hematology and Oncology Products  
Center for Drug Evaluation and Research

ENCLOSURE:  
Content of 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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ANN T FARRELL  
08/30/2017