Dear Dr. Ying:

Please refer to your Supplemental Biologics License Applications (sBLAs), dated February 28, 2017 (S-113), and July 28, 2017 (S-118), and your amendments, submitted under section 351(a) of the Public Health Service Act for Perjeta® (pertuzumab), 20 ml vial containing 420 mg, intravenous injection.

Prior Approval Supplemental Biologics Application 113 (S-113) provides for the fulfillment of Postmarketing Requirement (PMR) #2446-2 and Postmarketing Commitment (PMC) #2446-4, as listed in the Accelerated Approval letter for BLA 125409/S-051 dated September 30, 2013.

Prior Approval Supplemental Biologics Application 118 (S-118) provides for a new indication for Perjeta® for the adjuvant treatment of patients with HER2-positive early breast cancer at high risk of recurrence. This prior approval supplement also provides for fulfillment of PMR #2446-1, as listed in the Accelerated Approval letter for BLA 125409/S-051 dated September 30, 2013.

**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, text for the patient package insert, 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.

CARTON AND IMMEDIATE CONTAINER LABELS

Submit final printed carton and container labels that are identical to the carton and immediate container labels submitted on November 14, 2017, 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 — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (May 2015, Revision 3). For administrative purposes, designate this submission “Product Correspondence – Final Printed Carton and Container Labels for approved BLA 125409/S-113 and S-118.” Approval of this submission by FDA is not required before the labeling is used.

SUBPART E FULFILLED

We approved this BLA under the regulations at 21 CFR 601 Subpart E for Accelerated Approval of Biological Products for Serious or Life-Threatening Illnesses. Approval of this supplement fulfills your commitments made under 21 CFR 601.41 for the following postmarketing requirement:

2446-1 Submit the final efficacy (disease-free survival) and safety results from Trial BO25126 (APHINITY) as defined in your protocol and Statistical Analysis Plan (SAP).
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(ies) requirement for this application because necessary studies are impossible or highly impracticable.

FULFILLMENT OF POSTMARKETING REQUIREMENT(S)/COMMITMENT(S)

We have received your submission dated February 28, 2017, containing the final reports for the following postmarketing requirement and commitment listed in the September 30, 2013, approval letter for BLA 125409/S-051.

2446-2 Conduct a clinical trial to further assess the cardiac safety of neoadjuvant anthracycline/taxane-based chemotherapy regimens when administered in combination with neoadjuvant pertuzumab and trastuzumab in patients with locally advanced, inflammatory, or early stage HER2-positive breast cancer.

2446-4 Conduct a study of pre-treatment molecular sub-typing of tumors from patients treated in the post-marketing cardiac safety trial (PMR 2) and submit an exploratory analysis of the relationship of pathological complete response with the different tumor sub-types.

We have reviewed your submission and conclude that the above requirement and commitment were fulfilled.

This completes all of your postmarketing requirements and postmarketing commitments acknowledged in our September 30, 2013, supplemental approval letter.

POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitment:

3312-1 Submit the overall survival (OS) data and analysis with a final report from the clinical trial APHINITY BIG 4-11/BO25126/TOC4939g clinical trial entitled “A randomized multicenter, double-blind, placebo-controlled comparison of chemotherapy plus trastuzumab plus placebo versus chemotherapy plus trastuzumab plus pertuzumab as adjuvant therapy in patients with operable HER2-positive primary breast cancer.”
The timetable you submitted on December 6, 2017, states that you will conduct this study according to the following schedule:

- Draft Protocol Submission: 06/2011
- Final Protocol Submission: 02/2015
- Trial Completion: 12/2023
- Final Report Submission: 06/2024

Submit clinical protocols to your IND 9900 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and 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 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](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](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](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 Kim J. Robertson, Regulatory Health Project Manager, at (301) 796-1441.

Sincerely,

{See appended electronic signature page}

Julia Beaver, MD
Director
Division of Oncology Products 1
Office of Hematology and Oncology Products
Center for Drug Evaluation and Research

ENCLOSURE(S):
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/

JULIA A BEAVER
12/20/2017

Reference ID: 4198338