



BLA 125388/S-097

**SUPPLEMENT APPROVAL  
FULFILLMENT OF POSTMARKETING  
REQUIREMENT**

Seattle Genetics, Inc.  
Attention: Elaine Waller, PharmD, MBA  
Executive Vice President, Regulatory Affairs  
21823 30<sup>th</sup> Drive Southeast  
Bothell, WA 98021

Dear Dr. Waller:

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

This Prior Approval supplemental biologics application provides for the approval of a new indication for adult patients with previously untreated Stage III or IV classical Hodgkin lymphoma, in combination with chemotherapy.

In addition, the prescribing information recommends to administer G-CSF as primary prophylaxis beginning with cycle 1 for patients with previously untreated Stage III or IV classical Hodgkin lymphoma who are treated with ADCETRIS + doxorubicin, vinblastine, and dacarbazine.

**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 include the labeling changes proposed in any pending “Changes Being Effectuated” (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 Effectuated” (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**

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.

## **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.

## **FULFILLMENT OF POSTMARKETING REQUIREMENT**

We have received your submission dated November 1, 2017, containing the final report for the following postmarketing requirement listed in the August 19, 2011 approval letter for BLA 125388.

PMR 2521-2 A randomized phase 3 study of SGN-35 (brentuximab vedotin) in combination with AVD versus ABVD as frontline therapy in patients with advanced Hodgkin Lymphoma. Enrollment of at least 880 patients is expected with a primary endpoint of progression-free survival determined by an independent review facility. Overall survival is a key secondary endpoint.

Final Protocol Submission Date: 09/2012  
Trial Completion Date: 12/2018  
Final Report Submission Date: 06/2019

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

We also refer to the following postmarketing requirement listed in the August 19, 2011 approval letter for BLA 125388 and the statement that completion of either PMR 1 or PMR 2 could be considered to convert the accelerated approval to regular approval for both the Hodgkin lymphoma and sALCL indications.

PMR 2521-1 A randomized, Phase 3, double-blind, placebo-controlled trial of SGN-35 (brentuximab vedotin) in combination with CH-P versus CHOP as frontline therapy in patients with CD30-positive mature T- and NK-cell lymphomas including systemic ALCL (sALCL). Enrollment of approximately 300 patients is expected with a primary endpoint of progression free survival as determined by an independent blinded review facility. Overall survival is a key secondary endpoint.

Final Protocol Submission Date: 2/2013  
Trial Completion Date: 3/2019  
Final Report Submission Date: 9/2019

We conclude that the above requirement was fulfilled.

We remind you that there are postmarketing commitments listed in the August 19, 2011, approval letter that are still open.

### **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 ADCETRIS was approved on August 19, 2011, we have become aware of adverse events in the ECHELON-1 clinical trial. 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 a serious risks of secondary malignancies, permanent neuropathy, and cardiovascular adverse reactions.

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.

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess a known serious risk.

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

PMR 3356-1            Submit long-term safety follow-up for the ECHELON-1 clinical trial including the following events: (a) secondary malignancies, (b) treatment-related serious adverse events, (c) treatment-emergent neuropathy adverse events until resolution or study closure, and (d) deaths and cause of deaths. Submit an interim report and datasets with 60 months of safety follow-up. Submit the final report and datasets after minimum of 120 months of safety follow-up.

The timetable you submitted on March 5, 2018, states that you will conduct this study according to the following schedule:

Final Protocol Submission:	07/2018
Interim Report Submission:	08/2021
Trial Completion:	01/2026
Final Report Submission:	08/2026

Submit the protocol to IND 110636, with a cross-reference letter to this BLA. Submit nonclinical and chemistry, manufacturing, and controls protocols and the postmarketing final report 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 Thomas Iype, Regulatory Project Manager, at (240) 402-6861.

Sincerely,

*{See appended electronic signature page}*

R. Angelo de Claro, MD  
Acting Deputy 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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ROMEO A DE CLARO  
03/20/2018