Dear Dr. Gawryl:

Please refer to your New Drug Application (NDA) dated December 28, 2017, received December 28, 2017, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for XERAVA (eravacycline) for injection, 50 mg per vial.

This new drug application provides for the use of XERAVA (eravacycline) for injection, 50 mg per vial, for the treatment of complicated intra-abdominal infections in patients 18 years of age and older.

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.

**WAIVER OF HIGHLIGHTS SECTION**

We are waiving the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information. This waiver applies to all future supplements containing revised labeling unless we notify you otherwise.

**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](http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm). Content of labeling must be identical to the enclosed labeling (text for the prescribing information). 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](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 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 “Final Printed Carton and Container Labels for approved NDA 211109.” Approval of this submission by FDA is not required before the labeling is used.

MARKET PACKAGE

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

Gregory DiBernardo  
Food and Drug Administration  
Center for Drug Evaluation and Research  
White Oak Building 22, Room: 6223  
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 XERAVA was not referred to an FDA advisory committee because outside expertise was not necessary; there were no 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 (which includes new salts and new fixed combinations), 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 in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric study requirement for ages 0 to < 8 years because there is nonclinical evidence strongly suggesting that eravacycline would be unsafe in this pediatric group due to the risk of tetracycline-associated permanent bone and tooth staining.
We are deferring submission of your pediatric studies for ages 8 to less than 18 years for this application because this product is ready for approval for use in adults and the pediatric studies have not been completed.

Your deferred pediatric studies required by section 505B(a) of the FDCA are required postmarketing studies. The status of these postmarketing studies must be reported annually according to 21 CFR 314.81 and section 505B(a)(3)(C) of the FDCA. These required studies are listed below.

3472-1 Conduct a study to evaluate the pharmacokinetics, safety, and tolerability of a single dose of intravenous XERAVA (eravacycline) in pediatric patients from 8 years to less than 18 years of age with suspected or confirmed bacterial infection.

The timetable you submitted on August 17, 2018 states that you will conduct this study according to the following schedule:

<table>
<thead>
<tr>
<th>Schedule</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draft Protocol Submission</td>
<td>September 2018</td>
</tr>
<tr>
<td>Final Protocol Submission</td>
<td>December 2018</td>
</tr>
<tr>
<td>Study Completion</td>
<td>December 2019</td>
</tr>
<tr>
<td>Final Report Submission</td>
<td>June 2020</td>
</tr>
</tbody>
</table>

3472-2 Conduct a randomized, multicenter, active-controlled trial to evaluate the safety and tolerability of intravenous XERAVA (eravacycline) in pediatric patients from 8 years to less than 18 years of age with complicated intra-abdominal infections. The dose for this study will be determined upon review of the data from the single-dose, non-comparative study assessing the pharmacokinetics of XERAVA (eravacycline) in pediatric patients from 8 years to less than 18 years of age.

The timetable you submitted on August 17, 2018 states that you will conduct this study according to the following schedule:

<table>
<thead>
<tr>
<th>Schedule</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draft Protocol Submission</td>
<td>January 2020</td>
</tr>
<tr>
<td>Final Protocol Submission</td>
<td>April 2020</td>
</tr>
<tr>
<td>Study Completion</td>
<td>July 2022</td>
</tr>
<tr>
<td>Final Report Submission</td>
<td>January 2023</td>
</tr>
</tbody>
</table>

Submit the protocol to your IND 104839, with a cross-reference letter to this NDA.

Reports of these required pediatric postmarketing studies must be submitted as a new drug application (NDA) or as a supplement to your approved NDA with the proposed labeling changes you believe are warranted based on the data derived from these studies. When submitting the reports, please clearly mark your submission "SUBMISSION OF REQUIRED PEDIATRIC ASSESSMENTS" in large font, bolded type at the beginning of the cover letter of the submission.
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 identify the serious risk of development of resistance to XERAVA (eravacycline) in microorganisms specific to the cIAI indication in the label.

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

3472-3 A United States surveillance study for 5 years from the date of marketing to determine if resistance to XERAVA (eravacycline) has developed in those organisms specific to the indication in the label.

The timetable you submitted on August 17, 2018 states that you will conduct this study according to the following schedule:

<table>
<thead>
<tr>
<th>Type of Submission</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draft Protocol Submission:</td>
<td>October 2018</td>
</tr>
<tr>
<td>Final Protocol Submission:</td>
<td>December 2018</td>
</tr>
<tr>
<td>First Interim Report:</td>
<td>December 2020</td>
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<tr>
<td>Second Interim Report:</td>
<td>December 2021</td>
</tr>
<tr>
<td>Third Interim Report:</td>
<td>December 2022</td>
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<tr>
<td>Fourth Interim Report:</td>
<td>December 2023</td>
</tr>
<tr>
<td>Fifth Interim Report:</td>
<td>December 2024</td>
</tr>
<tr>
<td>Study Completion:</td>
<td>December 2024</td>
</tr>
<tr>
<td>Final Report Submission:</td>
<td>February 2025</td>
</tr>
</tbody>
</table>

Submit the clinical protocol to your IND 104839 with a cross-reference letter to this NDA. Submit nonclinical and chemistry, manufacturing, and controls protocols and 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.

**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, Medication Guide, and patient PI (as applicable) 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:

As required under 21 CFR 314.81(b)(3)(i), 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.

**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.

If you have any questions, call Mr. Gregory DiBernardo, Regulatory Project Manager, at (301) 796-4063.

Sincerely,

{See appended electronic signature page}

Edward M. Cox, M.D., M.P.H.
Director
Office of Antimicrobial Products
Center for Drug Evaluation and Research

Enclosures:
   Content of Labeling
   Carton and Container Labeling
This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

EDWARD M COX
08/27/2018