Dear Dr. Lee:

Please refer to your supplemental new drug application (sNDA) dated and received on April 5, 2019, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for DESCOVY® (emtricitabine and tenofovir alafenamide) tablets, for oral use.

This Prior Approval supplemental new drug application provides for the following changes to the DESCOVY® US Prescribing Information (USPI):

- The use of DESCOVY® (emtricitabine and tenofovir alafenamide) tablets, in at-risk adults and adolescents weighing at least 35 kg for pre-exposure prophylaxis (PrEP) to reduce the risk of HIV-1 infection from sexual acquisition, excluding individuals at risk from receptive vaginal sex
- Addition of post-marketing adverse drug reactions (ADRs) of angioedema, urticaria and rash as supported by the cumulative safety review across tenofovir alafenamide (TAF)-containing products to section 6.2, Postmarketing Experience
- To make corresponding changes to the Medication Guide

**APPROVAL & LABELING**

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.

**WAIVER OF ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS**

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 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 FDA.gov.¹ Content of labeling must be identical to the enclosed labeling (text for the Prescribing Information and Medication Guide), with the addition of any labeling changes in pending “Changes Being Effected” (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

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.²

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that include labeling changes for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in Microsoft Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes. To facilitate review of your submission(s), provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

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(ies) requirement for ages birth to adolescents weighing less than 35 kg because necessary studies are impossible or highly impractical. This is because PrEP is intended to reduce the risk of sexually acquired HIV-1 infections, clinical trials of PrEP would be highly impracticable in a pediatric population who are not sexually mature and active or in whom the likelihood of sexual behavior is very low.

We note that you have fulfilled the pediatric study requirement for

² We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database [https://www.fda.gov/RegulatoryInformation/Guidances/default.htm](https://www.fda.gov/RegulatoryInformation/Guidances/default.htm).

U.S. Food and Drug Administration
Silver Spring, MD 20993
[www.fda.gov](http://www.fda.gov)
this application for at-risk adolescents (weighing at least 35 kg and less than 18 years of age) for pre-exposure prophylaxis (PrEP) to reduce the risk of HIV-1 infection from sexual acquisition, excluding individuals at risk from receptive vaginal sex.

POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitment:

3723-1 Conduct a randomized, comparative trial to evaluate the safety and efficacy of Descovy for pre-exposure prophylaxis (PrEP) in cisgender women and adolescent girls weighing at least 35 kg, who are at risk of sexually acquired HIV-1 infection. The trial should include a Truvada arm. The trial should employ two distinct methods to estimate the background HIV-1 incidence rate as external controls. HIV-1 incidence estimates should be based on current estimates from sites involved in recent clinical trials, cross-sectional HIV surveillance surveys, and from high quality local epidemiology data.

The timetable you submitted on September 27, 2019, states that you will conduct this clinical trial according to the following schedule:

- Draft Protocol Submission: 12/2019
- Final Protocol Submission: 05/2020
- Trial Completion: 12/2024
- Final Report Submission: 06/2025

A final submitted protocol is one that the FDA has reviewed and commented upon, and you have revised as needed to meet the goal of the clinical trial.

Submit clinical protocols to your IND 127728 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment in your annual report to this NDA. 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 the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) the Prescribing Information to:

OPDP Regulatory Project Manager
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Prescription Drug Promotion (OPDP)
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 Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs.³

³ When final, this guidance will represent the FDA’s current thinking on this topic. For the most recent version of a guidance, check the FDA guidance web page at https://www.fda.gov/RegulatoryInformation/Guidances/default.htm.
You must submit final promotional materials and Prescribing Information, accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. Form FDA 2253 is available at FDA.gov. Information and Instructions for completing the form can be found at FDA.gov. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see FDA.gov.

All promotional materials that include representations about your drug product must be promptly revised to be consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 314.70(a)(4)]. The revisions in your promotional materials should include prominent disclosure of the important new safety information that appears in the revised labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 314.70(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 Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs.

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

References:

6 [http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm](http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm)

U.S. Food and Drug Administration
Silver Spring, MD 20993
www.fda.gov
If you have any questions, call Alicia Moruf, PharmD, MPH, Regulatory Project Manager, at 301-796-3953.

Sincerely,

{See appended electronic signature page}

Debra Birnkrant, MD
Director
Division of Antiviral Products
Office of Antimicrobial Products
Center for Drug Evaluation and Research

ENCLOSURE(S):
- Content of Labeling
  - Prescribing Information
  - Medication Guide
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/

JEFFREY S MURRAY
10/03/2019 01:42:37 PM