

NDA 210797

NDA APPROVAL

Clinuvel Inc.
Attention: Linda Teng
Director, Clinical Compliance
2419 Sharon Oaks Dr.
Menlo Park, CA 94025

Dear Ms. Teng:

Please refer to your new drug application (NDA) dated and received November 8, 2018, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Scenesse (afamelanotide) implant, 16 mg, for subcutaneous use.

We acknowledge receipt of your major amendment dated May 10, 2019, which extended the goal date by three months.

This new drug application provides for the use of Scenesse (afamelanotide) implant, 16 mg to increase pain-free light exposure in adult patients with a history of phototoxic reactions from erythropoietic protoporphyria (EPP).

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.

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) 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

¹ <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

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>.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND CONTAINER LABELING

Submit final printed carton and container labeling that are identical to the carton and container labeling submitted on October 3, 2019, as soon as they are available, but no more than 30 days after they are printed. Please submit these labeling electronically according to the guidance for industry *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for approved NDA 210797.**” Approval of this submission by FDA is not required before the labeling is used.

ADVISORY COMMITTEE

Your application for Scenesse was not referred to an FDA advisory committee because the application did not raise significant safety or efficacy issues in the intended population

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.

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.

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 an unexpected serious risk of skin cancer and implant site 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 these serious risks.

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

- 3726-1 Conduct a thorough QT clinical study to adequately characterize the effect of afamelanotide on cardiac repolarization.

The timetable you submitted on September 30, 2019, states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	10/2020
Final Protocol Submission:	01/2021
Study Completion:	11/2021
Final Report Submission:	02/2022

- 3726-2 Conduct a prospective, longitudinal, registry based observational exposure cohort study to collect information on long-term safety of afamelanotide in patients with erythropoietic protoporphyria (EPP) in the United States. Patients will be followed for a minimum of eight years from initiation of treatment with afamelanotide.

The primary adverse events of interest are:

- skin cancer (melanomas and non-melanomas)
- administration/injection/implant site reactions

Secondary adverse events of interest are:

- changes in pigmentary expressions
- pregnancy outcomes (including major birth defects and other adverse pregnancy outcomes such as spontaneous abortions, stillbirths, preterm deliveries, and small for gestational age)
- exposure during lactation and adverse reactions in breastfed infants
- implantation device malfunction or failure.

The timetable you submitted on October 7, 2019, states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	10/2019
Final Protocol Submission:	02/2020
Study Completion:	06/2030
Interim Report Submissions:	06/2022, 06/2024, 06/2026, 06/2028
Final Report Submission:	03/2031

Submit clinical protocol(s) to your IND 103131 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:

U.S. Food and Drug Administration
Silver Spring, MD 20993
www.fda.gov

Required Postmarketing Protocol Under 505(o), Required Postmarketing Final Report Under 505(o), Required Postmarketing Correspondence Under 505(o).

Submission of the protocol(s) for required postmarketing observational studies to your IND is for purposes of administrative tracking only. These studies do not constitute clinical investigations pursuant to 21 CFR 312.3(b) and therefore are not subject to the IND requirements under 21 CFR part 312 or FDA's regulations under 21 CFR parts 50 (Protection of Human Subjects) and 56 (Institutional Review Boards).

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 Package Insert (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 *Providing Regulatory Submissions in Electronic and*

*Non-Electronic Format—Promotional Labeling and Advertising Materials for Human Prescription Drugs.*³

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 FDA.gov.⁴ Information and Instructions for completing the form can be found at FDA.gov.⁵ For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see FDA.gov.⁶

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 FDA.gov.⁷

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biological products 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.

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>.

⁴ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>

⁵ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>

⁶ <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>

⁷ <http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm>

If you have any questions, call Cristina Attinello, Senior Regulatory Project Manager, at 301-796-3986.

Sincerely,

{See appended electronic signature page}

Julie G. Beitz, MD
Director
Office of Drug Evaluation III
Center for Drug Evaluation and Research

ENCLOSURES:

- Content of Labeling
 - Prescribing Information

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/

KENDALL A MARCUS
10/08/2019 11:50:38 AM
Signing for Dr. Julie Beitz