



BLA 125514/S-132

**SUPPLEMENT APPROVAL/
& FULFILLMENT OF POSTMARKETING REQUIREMENTS**

Merck Sharp & Dohme Corp., a subsidiary of Merck & Co., Inc.
Attention: Geet Mankad, PharmD
Senior Director, Global Regulatory Affairs
126 East Lincoln Avenue, RY34-B2133
Rahway, NJ 07065

Dear Dr. Mankad:

Please refer to your supplemental biologics license application (sBLA), dated May 31, 2022, and your amendments, submitted under section 351(a) of the Public Health Service Act for Keytruda (pembrolizumab).

This Prior Approval supplemental biologics license application provides for updates to the Keytruda (pembrolizumab) Prescribing Information and Medication Guide to include data supporting the fulfillment of postmarketing requirements PMR 3213-1 and PMR 3213-2 intended to verify clinical benefit and, to characterize safety in children with primary central nervous system malignancies, respectively.

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 HIGHLIGHTS 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, 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 FDA.gov,¹ that is identical to the enclosed labeling (text for the Prescribing Information,

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

and 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 *SPL Standard for Content of Labeling Technical Qs and As*.²

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 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).

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 (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(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

This product is appropriately labeled for use in all relevant pediatric populations. Therefore, no additional pediatric studies are needed at this time.

FULFILLMENT OF POSTMARKETING REQUIREMENTS

We have received your submission dated May 31, 2022, containing the final reports for the following postmarketing requirements listed in the May 23, 2017, approval letter for BLA 125514/S-014.

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>.

- 3213-1 Submit the final report, including datasets, from trials conducted to verify and describe the clinical benefit of pembrolizumab 200 mg intravenously every three weeks in patients with microsatellite instability high or mismatch repair deficient tumors including at least 124 patients with colorectal cancer enrolled in Merck initiated trials; at least 300 patients with non-colorectal cancer, including a sufficient number of patients with prostate cancer, thyroid cancer, small cell lung cancer; and ovarian cancer; and 25 children. In order to characterize response rate and duration, patients will be followed for at least 12 months from the onset of response.
- 3213-2 Conduct a trial that will characterize the safety of pembrolizumab administered intravenously at 2 mg/kg up to a maximum of 200 mg intravenously every three weeks or to determine a reasonably safe dosage regimen in an adequate number of children with primary central nervous system malignancies that are mismatch repair deficient or microsatellite instability high. Submit a final report and datasets for pediatric patients with primary CNS malignancies.

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

This completes all of your postmarketing requirements and postmarketing commitments acknowledged in our May 23, 2017, letter. You are not required to report on the status of closed (released or fulfilled) PMRs in your annual report required under 21 CFR 601.70 of the FD&CA.

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. For information about submitting promotional materials, see the final 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 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 FDA.gov.⁴ Information and Instructions for completing the form can be found at FDA.gov.⁵

³ For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/media/128163/download>.

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

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

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-related information [21 CFR 601.12(a)(4)].

The revisions to your promotional materials should include prominent disclosure of the important new safety-related 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 601.12(a)(4).

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 Gina Davis, Senior Regulatory Health Project Manager, at (301) 796-0704.

Sincerely,

{See appended electronic signature page}

Steven Lemery, MD
Director
Division of Oncology 3
Office of Oncologic Diseases
Office of New Drugs
Center for Drug Evaluation and Research

ENCLOSURES:

- 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/

IBILOLA A FASHOYIN-AJE on behalf of STEVEN J LEMERY
03/28/2023 05:24:47 PM