CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

208246Orig1s000

RISK ASSESSMENT and RISK MITIGATION REVIEW(S)

Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Surveillance and Epidemiology
Office of Medication Error Prevention and Risk Management

EVALUATION OF THE NEED FOR A RISK EVALUATION AND MITIGATION STRATEGY (REMS)

Date:	February 19, 2016
Reviewer:	Bob Pratt, Pharm.D. Risk Management Analyst Division of Risk Management (DRISK)
Acting Team Leader:	Jamie Wilkins Parker, Pharm.D., DRISK
Division Director:	Cynthia LaCivita, Pharm.D., DRISK
Drug Name(s):	Xeljanz (tofacitinib)
Therapeutic class:	Janus kinase inhibitor
Dosage forms:	11 mg XR (extended release) oral tablet
OND Review Division:	Division of Pulmonary, Allergy, and Rheumatology Products
Application Type/Number:	NDA 208246
Applicant/sponsor:	Pfizer, Inc.
OSE RCM #:	2015-1085

This memo is to provide the Division of Risk Management's (DRISK) evaluation of the need for a risk evaluation and mitigation strategy (REMS) for Xeljanz XR (tofacitinib), NDA 208246. Xeljanz 5 mg as an immediate release (IR) tablet formulation was approved with a communication plan REMS for the treatment of adult patients with moderately to severely active rheumatoid arthritis on November 6, 2012, under NDA 203214. The applicant submitted NDA 208246 to seek approval for once daily dosing using an 11 mg extended release (XR) tablet formulation for the approved indication. The 11mg XR NDA proposed a REMS modification to include mention of the new tablet strength and formulation. Clinical efficacy and safety studies were not assessed in the 11mg XR NDA submission, which cross-referenced the 5mg IR NDA for safety and efficacy of the active moiety.

The REMS for Xeljanz 5mg tablets was originally approved on November 6, 2012. The REMS was modified several times, to account for changes in ownership of the NDA; to align with various labeling changes; to remove the Medication Guide from the REMS; to revise goals of the REMS; and to revise the assessment plan. The most-recently approved version of the REMS consisted of a communication plan and a timetable for submission of assessments of the REMS.

On January 13, 2016, the Agency sent the applicant a REMS Modification Notification Letter, because it had been determined a communication plan was no longer necessary to include as an element of the approved REMS, because the communication plan has been completed and the most recent REMS assessment demonstrated that the communication plan met its goals. Therefore, because the communication plan was no longer necessary to ensure the benefits of the drug outweigh the risks, a REMS was no longer required for Xeljanz. The applicant submitted a REMS modification to the 5mg IR NDA on January 20, 2016, that proposed elimination of the requirement for a REMS, which was approved by the Agency on February 8, 2016.

In conclusion, there were no clincial safety studies required to support approval of the Xeljanz XR NDA, and the overall safety profile of the XR formulation is expected to be consistent with that of the IR formulation.[1] Therefore, the need for a REMS for the Xeljanz XR NDA has been obviated by the elimination of the Xeljanz IR REMS. At this time, based on the available data, a REMS is not necessary to ensure the benefits outweigh the risks of Xeljanz XR. If new safety information becomes available, please consult DRISK.

[1] Waheed, J. Division of Pulmonary, Allergy, and Rheumatology Products. Clinical Review for Xeljanz XR, NDA 208246, dated January 20, 2016.

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

ROBERT G PRATT
02/19/2016

CYNTHIA L LACIVITA
02/19/2016
Concur