CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

210795Orig1s000

Trade Name:	KRINTAFEL
Generic or Proper Name:	tafenoquine
Sponsor:	GlaxoSmithKline Intellectual Property Development Ltd.
Approval Date:	July 20, 2018
Indication:	For the radical cure (prevention of relapse) of *Plasmodium vivax* malaria in patients aged 16 years and older who are receiving appropriate antimalarial therapy for acute *P. vivax* infection.

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APPLICATION NUMBER:

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APPROVAL LETTER

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA 210795

NDA APPROVAL

GlaxoSmithKline Intellectual Property Development Ltd. England
c/o GlaxoSmithKline Research & Development
Attention: Christian Baumann, Ph.D.
Director, Global Regulatory Affairs
1250 S. Collegeville Road, UP4300
Collegeville, PA 19426

Dear Dr. Baumann:

Please refer to your New Drug Application (NDA) dated November 22, 2017, received November 22, 2017, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for KRINTAFEL (tafenoquine) tablets, 150 mg.

This new drug application provides for the use of KRINTAFEL (tafenoquine) tablets for the radical cure (prevention of relapse) of *Plasmodium vivax* malaria in patients aged 16 years and older who are receiving appropriate antimalarial therapy for acute *P. vivax* infection.

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. Content of labeling must be identical to the enclosed labeling (text for the prescribing information, text for the patient package insert). 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

The SPL will be accessible via publicly available labeling repositories.

IMMEDIATE CONTAINER LABELS

Submit final printed immediate container labels that are identical to the enclosed 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 Container Labels for approved NDA 210795**." Approval of this submission by FDA is not required before the labeling is used.

TROPICAL DISEASE PRIORITY REVIEW VOUCHER

We also inform you that you have been granted a tropical disease priority review voucher, as provided under section 524 of the FDCA. This voucher entitles you to designate a single human drug application submitted under section 505(b)(l) of the FDCA or a single biologic application submitted under section 351 of the Public Health Service Act as qualifying for a priority review. Such an application would not have to meet any other requirements for a priority review. This priority review voucher may be transferred by you to another sponsor of a human drug or biologic application. When redeeming this priority review voucher, you should refer to this letter as an official record of the voucher. If the voucher is transferred, the sponsor to whom the voucher has been transferred should include a copy of this letter (which will be posted on our Web site as are all approval letters) and proof that the voucher was transferred. In addition, this priority review voucher has been assigned a tracking number, PRV 210795. All correspondences related to this voucher should refer to this tracking number. For additional information regarding the priority review voucher, see FDA's guidance, *Tropical Disease Priority Review Vouchers*, at http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM080599.pdf.

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).*

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 assess a signal of the serious risks of hypersensitivity, neuropsychiatric, and hematologic adverse 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 study:

3436-1 Conduct an active pharmacovigilance study to evaluate safety, including hypersensitivity, neuropsychiatric, and hematologic adverse reactions, in patients taking KRINTAFEL (tafenoquine) for the radical cure of *P. vivax* malaria.

The timetable you submitted on July 18, 2018, states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	10/2018
Final Protocol Submission:	04/2019
Interim Report Submission:	09/2020
	09/2021
	09/2022
	09/2023
	09/2024
Study Completion:	12/2024
Final Report Submission:	09/2025

Submit clinical protocol(s) to your IND 101471 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: http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM443702.pdf).

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.

METHODS VALIDATION

We have not completed validation of the regulatory methods. However, we expect your continued cooperation to resolve any problems that may be identified.

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
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
07/20/2018