

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

212269Orig1s000

Trade Name: Ferriprox

Generic or Proper Name: deferiprone tablets

Sponsor: ApoPharma

Approval Date: May 19, 2020

Indication: for the treatment of patients with transfusional iron overload due to thalassemia syndromes when current chelation therapy is inadequate

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APPROVAL LETTER



NDA 212269

Chiesi USA, Inc.
Attention: Jessica Anderson
Senior Manager, Regulatory Affairs
175 Regency Woods Place, Suite 600
Cary, NC 27518

Dear Ms. Anderson:

Please refer to your new drug application (NDA) dated and received July 19, 2020, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for deferiprone 1000 mg.

We also refer to our approval letter dated May 19, 2020, which contained the following error: The PMR identified as 1828-1 was incorrectly numbered. The new assigned PMR set number for this NDA is 3873-1 (see below).

This replacement approval letter incorporates the correction of the error. The effective approval date will remain May 19, 2020, the date of the original approval letter.

This new drug application provides for the use of Ferriprox (deferiprone) tablets for the treatment of patients with transfusional iron overload due to thalassemia syndromes when current chelation therapy is inadequate.

Approval is based on a reduction in serum ferritin levels. There are no controlled trials demonstrating a direct treatment benefit, such as improvement in disease-related symptoms, functioning, or increased survival.

Limitations of Use

Safety and effectiveness have not been established for the treatment of transfusional iron overload in patients with other chronic anemias.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved under the provisions of accelerated approval regulations (21 CFR 314.500), effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling.

Marketing of this drug product and related activities must adhere to the substance and procedures of the referenced accelerated approval regulations.

WAIVER OF ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS

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 FDA.gov.¹ Content of labeling must be identical to the enclosed labeling (text for the Prescribing Information, text for the Patient Package Insert, Medication Guide). 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.

CARTON AND CONTAINER LABELING

We acknowledge your May 15, 2020, submission containing final printed carton and container labeling.

PROPRIETARY NAME

If you intend to have a proprietary name for this product, the name and its use in the labeling must conform to the specifications under 21 CFR 201.10 and 201.15. We recommend that you submit a request for a proposed proprietary name review. (See the guidance for industry *Contents of a Complete Submission for the Evaluation of Proprietary Names and PDUFA Reauthorization Performance Goals and Procedures Fiscal Years 2018 through 2022*.)

ACCELERATED APPROVAL

Products approved under the accelerated approval regulations, 21 CFR 314.510, require further adequate and well-controlled clinical trials to verify and describe clinical benefit. You are required to conduct such clinical trials with due diligence. If postmarketing clinical trials fail to verify clinical benefit or are not conducted with due diligence, we may, following a hearing in accordance with 21 CFR 314.530, withdraw this approval. We remind you of your postmarketing requirement specified in your submission dated October 14, 2011 to NDA 021825. This requirement, along with required completion dates, is listed below.

3873-1	Conduct a trial to determine the efficacy and safety of the use of deferiprone to treat iron overload in patients with sickle cell disease and transfusional hemosiderosis who have not been adequately treated with available chelating agents. Submit the protocol for review and concurrence prior to commencing. The trial will enroll a sufficient number
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of patients with sickle cell disease as described above, to provide sufficient evidence to assess the efficacy and safety in the sickle cell disease population described. The trial may enroll patients with other conditions who have developed transfusional iron overload. The trial will stratify for hematologic diagnosis for the randomization. The primary and secondary endpoints will measure changes in cardiac iron concentration and liver iron concentration.

Final Report Submission: 06/2020

Submit clinical protocols to your IND 045724 for this product. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each requirement 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.

Submit final reports to this NDA as a supplemental application. For administrative purposes, all submissions relating to this postmarketing requirement must be clearly designated "**Subpart H Postmarketing Requirement(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.

Because this drug product for this indication has an orphan drug designation, you are exempt from this requirement.

PROMOTIONAL MATERIALS

Under 21 CFR 601.45, you are required to submit, during the application pre-approval review period, all promotional materials, including promotional labeling and advertisements, that you intend to use in the first 120 days following marketing approval (i.e., your launch campaign). If you have not already met this requirement, you must immediately contact the Office of Prescription Drug Promotion (OPDP) at (301) 796-1200. Please ask to speak to a regulatory project manager or the appropriate reviewer to discuss this issue.

As further required by 21 CFR 601.45, submit all promotional materials that you intend to use after the 120 days following marketing approval (i.e., your post-launch materials) at least 30 days before the intended time of initial dissemination of labeling or initial

publication of the advertisement. We ask that each submission include a detailed cover letter together with three copies each of the promotional materials, annotated references, and approved Prescribing Information, Medication Guide, and Patient Package Insert (as applicable).

REPORTING REQUIREMENTS

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

If you have any questions, contact Alice Kacuba, Regulatory Project Manager, at 301-796-1381 or at alice.kacuba@fda.hhs.gov.

Sincerely,

{See appended electronic signature page}

Albert Deisseroth, MD
Associate Division Director
Division of Nonmalignant Hematology
Office of Cardiology, Hematology,
Endocrinology, and Nephrology
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/

ALBERT B DEISSEROTH
05/19/2020 12:00:00 AM