

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

217899Orig1s000

Trade Name: Livdelzi capsule, 10 mg

Generic or Proper Name: (seladelpar)

Sponsor: CymaBay Therapeutics, Inc

Approval Date: August 14, 2024

Indication: Provides for the use of Livdelzi (seladelpar) capsules for the treatment of primary biliary cholangitis (PBC) in combination with ursodeoxycholic acid (UDCA) in adults who have an inadequate response to UDCA, or as monotherapy in patients unable to tolerate UDCA.

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CONTENTS

Reviews / Information Included in this NDA Review.

Approval Letter	X
Other Action Letters	
Labeling	X
REMS	
Officer/Employee List	X
Integrated Review(s)	X
Product Quality Review(s)	X
Other Reviews	X
Risk Assessment and Risk Mitigation Review(s)	X
Proprietary Name Review(s)	X
Administrative/Correspondence Document(s)	X

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APPROVAL LETTER



NDA 217899

ACCELERATED APPROVAL

CymaBay Therapeutics, Inc.
Attention: Crystal Browning
Vice President Regulatory Affairs
7601 Dumbarton Circle
Fremont, CA 94555

Dear Crystal Browning:

Please refer to your new drug application (NDA) dated and received December 14, 2023, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Livdelzi (seladelpar) capsules.

This NDA provides for the use of Livdelzi (seladelpar) capsules for the treatment of primary biliary cholangitis (PBC) in combination with ursodeoxycholic acid (UDCA) in adults who have an inadequate response to UDCA, or as monotherapy in patients unable to tolerate UDCA.

APPROVAL & LABELING

We have completed our review of this application. It is approved under accelerated approval pursuant to section 506(c) of the Federal Food, Drug, and Cosmetic Act (FDCA) and 21 CFR 314.510, 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 accelerated approval statutory provisions and 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 Information, Container). 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.

CONTAINER LABELING

Submit final printed container labeling that are identical to the enclosed container labeling **and** container labeling submitted on July 30, 2024, 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 titled *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (April 2018, Revision 5)*. For administrative purposes, designate this submission “**Final Printed Container Labeling for approved NDA 217899.**” Approval of this submission by FDA is not required before the labeling is used.

DATING PERIOD

Based on the stability data submitted to date, the expiry dating period for Livdelzi (seladelpar) capsules shall be 48 months from the date of manufacture when stored at 20°C-25°C (68°F-77°F).

ADVISORY COMMITTEE

Your application for Livdelzi (seladelpar) was not referred to an FDA advisory committee because the application did not raise significant safety or efficacy issues that were unexpected in the intended population. Outside expertise was not necessary; there were no controversial issues that would benefit from advisory committee discussion.

ACCELERATED APPROVAL REQUIREMENTS

Pursuant to section 506(c) of the FDCA and 21 CFR 314.510 you are required to conduct further adequate and well-controlled clinical trials intended to verify and describe clinical benefit. You are required to conduct such clinical trials with due diligence. If required postmarketing clinical trials fail to verify clinical benefit or are not conducted with due diligence, including with respect to the conditions set forth below, we may withdraw this approval. We remind you of your postmarketing requirement specified in your submission dated July 1, 2024. This requirement is listed below.

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>.

4645-1 Complete Trial CB8025-41837, a randomized, double-blind, placebo-controlled trial to evaluate the effect of seladelpar on clinical outcomes in subjects with primary biliary cholangitis (PBC) and compensated cirrhosis. Efficacy must be demonstrated using a composite endpoint of mortality, liver transplant, MELD ≥ 15 , ascites requiring treatment, and hospitalization for hepatic decompensation (e.g., variceal bleeding, hepatic encephalopathy, and spontaneous bacterial peritonitis).

The timetable you submitted on July 1, 2024, states that you will conduct this trial according to the following schedule:

Final Protocol Submission:	05/2024 (submitted)
Completion of Trial Enrollment:	08/2026
Trial Completion:	08/2029
Final Report Submission:	02/2030

Submit clinical protocols to your IND 125795 for this product. FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.

You must submit status reports of the progress of each clinical trial required under section 506(c) (listed above) to the NDA 180 days after the date of approval of this NDA and approximately every 180 days thereafter (see section 506B(a)(2) of the FDCA) (hereinafter “180-day reports”).

You are required to submit two 180-day reports per year for each open study or clinical trial required under section 506(c). The initial report will be a standalone submission and the subsequent report will be combined with your application’s annual status report (ASR) required under section 506B(a)(1) of the FDCA and 21 CFR 314.81(b)(2). The standalone 180-day report will be due 180 days after the date of approval (with a 60-day grace period). Submit the subsequent 180-day report with your application’s ASR. Submit both of these 180-day reports each year until the final report for the corresponding study or clinical trial is submitted.³

Your 180-day reports must include the information listed in 21 CFR 314.81(b)(2)(vii)(a) and the following information:

- Number of activated trial sites
- Number of subjects screened and randomized
- Strategies for continued recruitment and retention of subjects

³ You are required to submit information related to your confirmatory trial as part of your annual reporting requirement under section 506B(a)(1) until the FDA notifies you, in writing, that the Agency concurs that the study requirement has been fulfilled or that the study either is no longer feasible or would no longer provide useful information.

- Number of events accrued (i.e., blinded events pooled across treatment arms)

FDA recommends that you use FORM FDA 3989, *PMR/PMC Annual Status Report for Drugs and Biologics*, to submit your 180-day reports.⁴

180-day reports must be clearly designated “**NDA 217899 180-Day AA PMR Progress Report.**”

FDA will consider the submission of your application’s ASR under section 506B(a)(1) and 21 CFR 314.81(b)(2), in addition to the submission of reports 180 days after the date of approval each year (subject to a 60-day grace period), to satisfy the periodic reporting requirement under section 506B(a)(2).

Submit final reports to this NDA as a supplemental application. For administrative purposes, the cover page of 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.

POSTMARKETING REQUIREMENTS UNDER 505(o)

Section 505(o)(3) of the 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 the following unexpected serious risks:

- Adverse maternal and fetal outcomes in women and their offspring exposed to seladelpar during pregnancy
- Infant exposure to seladelpar via breast milk

⁴ FORM FDA 3989, along with instructions for completing this form, is available on the FDA Forms web page at <https://www.fda.gov/about-fda/reports-manuals-forms/forms>.

Furthermore, the active postmarket risk identification and analysis system as available under section 505(k)(3) of the FDCA will not be sufficient to assess these serious risk(s).

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

- 4645-2 Conduct a ten-year worldwide descriptive study that collects prospective and retrospective data from women exposed to seladelpar during pregnancy and/or lactation to assess risk of pregnancy and maternal complications, adverse effects on the developing fetus and neonate, and adverse effects on the infant. Infant outcomes will be assessed through at least the first year of life. The minimum number of patients should be specified in the protocol.

The timetable you submitted on July 29, 2024, states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	02/2025
Final Protocol Submission:	11/2025
Interim Report Submission:	11/2030
Study Completion:	11/2035
Final Report Submission:	05/2038

- 4645-3 Perform a lactation study, milk only, in lactating women who have received seladelpar to measure concentrations of seladelpar in breast milk using a validated assay and to assess the effects on the breastfed infant.

The timetable you submitted on July 1, 2024, states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	02/2025
Final Protocol Submission:	08/2025
Study Completion:	02/2028
Final Report Submission:	08/2028

FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.⁵

⁵ See the guidance for Industry *Postmarketing Studies and Clinical Trials—Implementation of Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act* (October 2019).
<https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

Submit clinical protocol(s) to your IND 125795 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).

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.

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(a)(1) 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(a)(1) 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

Under 21 CFR 314.550, 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 314.550, 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).

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*.⁶

REPORTING REQUIREMENTS

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

POST APPROVAL FEEDBACK MEETING

New molecular entities 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.

COMPENDIAL STANDARDS

A drug with a name recognized in the official United States Pharmacopeia or official National Formulary (USP-NF) generally must comply with the compendial standards for strength, quality, and purity, unless the difference in strength, quality, or purity is plainly stated on its label (see FD&C Act § 501(b), 21 USC 351(b)). FDA typically cannot share application-specific information contained in submitted regulatory filings with third parties, which includes USP-NF. To help ensure that a drug continues to comply with compendial standards, application holders may work directly with USP-NF to revise official USP monographs. More information on the USP-NF is available on USP's website⁷.

⁶ <https://www.fda.gov/media/128163/download>

⁷ <https://www.uspnf.com/>

If you have any questions, contact Kirti Patel, Senior Regulatory Project Manager, at either Kirti.Patel@fda.hhs.gov or (301) 796-1082.

Sincerely,

{See appended electronic signature page}

Kathleen Donohue, MD
Acting Deputy Director
Office of Immunology and Inflammation (OI)
Office of New Drugs (OND)
Center for Drug Evaluation and Research

ENCLOSURE(S):

- Content of Labeling
 - Prescribing Information
 - Patient Information
- 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/

KATHLEEN M DONOHUE
08/14/2024 11:12:59 AM