

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

761121Orig1s008

Trade Name: POLIVY for injection

Generic or Proper Name: polatuzumab vedotin-piiq

Sponsor: Genentech, Inc.

Approval Date: April 19, 2023

Indication: POLIVY in combination with a rituximab product, cyclophosphamide, doxorubicin, and prednisone (R-CHP) for the treatment of adult patients who have previously untreated diffuse large B-cell lymphoma (DLBCL), not otherwise specified (NOS) or high-grade B-cell lymphoma (HGBL) and who have an International Prognostic Index score of 2 or greater.

This application also provides for conversion to regular approval for the following indication:

- POLIVY in combination with bendamustine and a rituximab product for the treatment of adult patients with relapsed or refractory DLBCL, NOS, after at least two prior therapies.

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APPROVAL LETTER



BLA 761121/S-008

**SUPPLEMENT APPROVAL/
FULFILLMENT OF POSTMARKETING REQUIREMENT/
RELEASE FROM POSTMARKETING REQUIREMENT**

Genentech, Inc.
c/o Hoffmann-La Roche Inc.
Attention: Kendra Seckinger, PhD
Regulatory Program Management
1 DNA Way
South San Francisco, CA 94080

Dear Dr. Seckinger:

Please refer to your supplemental biologics license application (sBLA), dated and received June 2, 2022, and your amendments, submitted under section 351(a) of the Public Health Service Act for POLIVY (polatuzumab vedotin-piiq) for injection.

This Prior Approval supplemental biologics license application provides for the following indication:

- POLIVY in combination with a rituximab product, cyclophosphamide, doxorubicin, and prednisone (R-CHP) for the treatment of adult patients who have previously untreated diffuse large B-cell lymphoma (DLBCL), not otherwise specified (NOS) or high-grade B-cell lymphoma (HGBL) and who have an International Prognostic Index score of 2 or greater.

This application also provides for conversion to regular approval for the following indication:

- POLIVY in combination with bendamustine and a rituximab product for the treatment of adult patients with relapsed or refractory DLBCL, NOS, after at least two prior therapies.

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 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, 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) and include the labeling changes proposed in any pending “Changes Being Effectuated” (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 Effectuated” (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).

CARTON AND CONTAINER LABELING

Submit final printed carton and container labeling that are identical to the enclosed carton and container labeling submitted on April 17, 2023, 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 *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for approved BLA 761121/S-008.**” Approval of this submission by FDA is not required before the labeling is used.

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>.

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.

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

FULFILLMENT OF POSTMARKETING REQUIREMENT

We have received your submission dated June 2, 2022, containing the final report for the following postmarketing requirement listed in the June 10, 2019, approval letter for BLA 761121.

- 3630-1 Complete Study GO39942, a randomized, double-blind, placebo-controlled trial that evaluates polatuzumab vedotin-piiq in combination with R-CHP (rituximab, cyclophosphamide, doxorubicin, prednisone) versus R-CHOP in patients with previously untreated diffuse large B-cell lymphoma. The primary endpoint would be progression-free survival. Key secondary endpoints would include complete remission rate per independent review committee and overall survival.

We have reviewed your submission and conclude that the above requirement was fulfilled.

RELEASE FROM POSTMARKETING REQUIREMENT

We have received your submission dated June 2, 2022, related to the following postmarketing requirement listed in our June 10, 2019, approval letter:

- 3630-2 Complete Study MO40598, a randomized clinical trial that evaluates polatuzumab vedotin-piiq in combination with rituximab, gemcitabine, and oxaliplatin (R-GemOx) versus R-GemOx alone in patients with relapsed or refractory large B-cell lymphoma. The primary endpoint would be overall survival. Key secondary endpoints would include progression-free survival and complete remission rate.

Final Protocol Submission:	09/2019
Trial Completion:	12/2023
Final Report Submission:	06/2024

We have reviewed your submission and have determined that you are released from the above requirement as it is no longer needed because clinical benefit was verified through PMR 3630-1.

This completes all of your postmarketing requirements and postmarketing commitments acknowledged in our June 10, 2019, letter. You are not required to report on the status of closed (released or fulfilled) PMRs/PMC in your annual report required under 21 CFR 601.70 of the FD&CA.

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 known serious risks of infections and fatal adverse events.

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 risks.

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess these serious risks.

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

- 4430-1 Conduct an analysis of patients enrolled in Study GO39942 (POLARIX) to further characterize the serious risks, including infections and fatal adverse events, with extended follow-up in patients receiving polatuzumab vedotin in combination with R-CHP (rituximab, cyclophosphamide, doxorubicin, and prednisone) as first-line treatment for large B-cell lymphoma. Include evaluation of overall survival in each treatment arm in POLARIX, with a minimum of 2 additional years of follow-up, and include

causes of death and narratives for death in the absence of treated disease progression.

The timetable you submitted on April 12, 2023, states that you will conduct this trial according to the following schedule:

Trial Completion: 06/2024

Final Report Submission: 12/2024

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.³

Submit clinical protocol(s) to your IND 109409 with a cross-reference letter to this BLA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all final report(s) to your BLA. 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 601.70 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 601.70 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 601.70. 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.

³ 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>.

POSTMARKETING COMMITMENT SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitment:

- 4430-2 Complete Study MO40598 (POLARGO), a randomized clinical trial evaluating polatuzumab vedotin in combination with rituximab, gemcitabine, and oxaliplatin (R-GemOx) versus R-GemOx alone in patients with relapsed or refractory large B-cell lymphoma, with a primary endpoint of overall survival.

The timetable you submitted on April 12, 2023, states that you will conduct this study according to the following schedule:

Final Protocol Submission (Analysis Plan):	11/2024
Trial Completion:	12/2024
Final Report Submission:	06/2025

A final submitted protocol is one that the FDA has reviewed and commented upon, and you have revised as needed to meet the goal of the study or clinical trial.

Submit clinical protocols to your IND 109409 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this BLA. In addition, under 21 CFR 601.70 you should include a status summary of each commitment in your annual progress report of postmarketing studies to this BLA. 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/subjects entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled “**Postmarketing Commitment Protocol**,” “**Postmarketing Commitment Final Report**,” or “**Postmarketing Commitment Correspondence**.”

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*.⁴

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,

⁴ For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/media/128163/download>.

accompanied by a Form FDA 2253. Form FDA 2253 is available at FDA.gov.⁵ Information and Instructions for completing the form can be found at FDA.gov.⁶

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 Laura Wall, Senior Regulatory Project Manager, at 301-796-2237.

Sincerely,

{See appended electronic signature page}

Nicole Gormley, MD
Director
Division of Hematologic Malignancies II
Office of Oncologic Diseases
Center for Drug Evaluation and Research

ENCLOSURES:

- Content of Labeling
 - Prescribing Information
- Carton and Container Labeling

⁵ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>

⁶ <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>

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/

NICOLE J GORMLEY
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