CENTER FOR DRUG EVALUATION AND RESEARCH

APPLICATION NUMBER:

761297Orig1s000

OTHER ACTION LETTERS

BLA 761297

COMPLETE RESPONSE

Checkpoint Therapeutics, Incorporated
Attention: Lauren Neighbours, PhD, RAC
Senior Vice President, Product Development and Regulatory Affairs
95 Sawyer Road
Suite 110
Waltham, MA 02453

Dear Dr. Neighbours:

Please refer to your biologics license application (BLA) dated January 3, 2023, submitted under section 351(a) of the Public Health Service Act for cosibelimab (CK-301).

We have completed our review of this application, as amended, and have determined that we cannot approve this application in its present form. We have described our reasons for this action below and, where possible, our recommendations to address these issues.

FACILITY INSPECTIONS

1. Following the pre-license inspection of Samsung Biologics Co., Ltd., Incheon, Korea (FEI 3010479596), for the drug substance and drug product manufacturing facility listed in this application, FDA conveyed deficiencies to the representative of the facility. FDA has reviewed the responses from the facility, and not all deficiencies have been satisfactorily resolved. Satisfactory responses to these deficiencies should be provided by the facility to the email address provided on the Form FDA 483 Inspectional Observations, prior to submitting your complete response. Your complete response should include the date of the facility's response to the Post-action Letter. The assessment of application approvability and the resolution of inspection deficiencies would be evaluated upon receipt of the complete response and may require re-inspection of the facility. Please work with the facility in resolving the related deficiencies.

2. Following evaluation of the inspection findings noted above, and the response to those findings, FDA has identified concerns regarding the reliability of data generated at Samsung Biologics in your BLA submission. The concerns impact data that support drug substance and drug product manufacturing process validation and process characterization. Therefore, the adequacy of the proposed cosibelimab manufacturing process and overall control strategy cannot be determined at this time to support the licensure of cosibelimab. If any impacted data are removed from the application and/or changes are made to the control

strategy to address the facility deficiencies, provide additional information and data (e.g., testing results from repeated studies) that are reliable and accurate to support that consistent process performance and product quality is achieved.

ADDITIONAL COMMENTS

We have the following comments/recommendations that are not approvability issues:

Product Quality

3. (b) (4)

4. (b) (4)

5.

4 Pages have been Withheld in Full as b4 (CCI/TS) immediately following this page

PRESCRIBING INFORMATION

We reserve comment on the proposed labeling until the application is otherwise adequate. We encourage you to review the labeling review resources on the Prescription Drug Labeling Resources[1] and Pregnancy and Lactation Labeling Final Rule[2] websites, including regulations and related guidance documents and the Selected Requirements for Prescribing Information (SRPI) − a checklist of important format items from labeling regulations and guidances.

CARTON AND CONTAINER LABELING

We reserve comment on the proposed labeling until the application is otherwise adequate.

MEDICATION GUIDE

Add the following bolded statement or appropriate alternative to the carton and container labeling per 21 CFR 208.24(d): "**ATTENTION PHARMACIST: Each patient is required to receive the enclosed Medication Guide**."

PROPRIETARY NAME

Please refer to correspondence dated, April 3, 2023, which addresses the proposed proprietary name, Unloxcyt. This name was found conditionally acceptable pending approval of the application in the current review cycle. Please resubmit the proposed proprietary name when you respond to all of the application deficiencies that have been identified in this letter.

SAFETY UPDATE

When you respond to the above deficiencies, include a safety update as described at 21 CFR 314.50(d)(5)(vi)(*b*). The safety update should include data from all nonclinical and clinical studies/trials of the drug under consideration regardless of indication, dosage form, or dose level.

a. Describe in detail any significant changes or findings in the safety profile.

b. When assembling the sections describing discontinuations due to adverse events, serious adverse events, and common adverse events, incorporate new safety data as follows:

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[1] https://www.fda.gov/drugs/laws-acts-and-rules/prescription-drug-labeling-resources
[2] https://www.fda.gov/drugs/labeling-information-drug-products/pregnancy-and-lactation-labeling-drugs-final-rule

- Present new safety data from the studies/clinical trials for the proposed indication using the same format as in the original submission.

- Present tabulations of the new safety data combined with the original application data.

- Include tables that compare frequencies of adverse events in the original application with the retabulated frequencies described in the bullet above.

- For indications other than the proposed indication, provide separate tables for the frequencies of adverse events occurring in clinical trials.

c. Present a retabulation of the reasons for premature trial discontinuation by incorporating the drop-outs from the newly completed trials. Describe any new trends or patterns identified.

d. Provide case report forms and narrative summaries for each subject who died during a clinical trial or who did not complete a trial because of an adverse event. In addition, provide narrative summaries for serious adverse events.

e. Describe any information that suggests a substantial change in the incidence of common, but less serious, adverse events between the new data and the original application data.

f. Provide updated exposure information for the clinical studies/trials (e.g., number of subjects, person time).

g. Provide a summary of worldwide experience on the safety of this drug. Include an updated estimate of use for drug marketed in other countries.

h. Provide English translations of current approved foreign labeling not previously submitted.

OTHER

Within one year after the date of this letter, you are required to resubmit or take other actions available under 21 CFR 601.3(b)). If you do not take one of these actions, we may consider your lack of response a request to withdraw the application under 21 CFR 601.3(c). You may also request an extension of time in which to resubmit the application.

A resubmission must fully address all the deficiencies listed in this letter and should be clearly marked with "**RESUBMISSION**" in large font, bolded type at the beginning of the cover letter of the submission. The cover letter should clearly state that you consider this resubmission a complete response to the deficiencies outlined in this letter. A partial response to this letter will not be processed as a resubmission and will not start a new review cycle.

You may request a meeting or teleconference with us to discuss what steps you need to take before the application may be approved. If you wish to have such a meeting, submit your meeting request as described in the draft guidance for industry *Formal Meetings Between the FDA and Sponsors or Applicants of PDUFA Products*.

The product may not be legally marketed until you have been notified in writing that this application is approved.

If you have any questions, call Haroon Vohra, Senior Regulatory Health Project Manager, at 240-402-4471.

Sincerely,

{See appended electronic signature page}

Paul G. Kluetz, MD
Supervisory Associate Director (Acting)
Office of Oncologic Diseases
Center for Drug Evaluation and Research

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/

PAUL G KLUETZ
12/15/2023 01:26:06 PM