

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

220711Orig1s000

Trade Name: Beqalzi tablets

Generic or Proper Name: sonrotoclax

Sponsor: BeOne Medicines USA, Inc.

Approval Date: May 13, 2026

Indication: For the treatment of adult patients with relapsed or refractory mantle cell lymphoma (MCL) after at least two lines of systemic therapy, including a Bruton's tyrosine kinase (BTK) inhibitor.

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APPLICATION NUMBER:

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APPROVAL LETTER



NDA 220711

ACCELERATED APPROVAL

BeOne Medicines USA, Inc.
Attention: Meghal Vakil, MS, CCRP, RAC
Director, Regulatory Affairs
311 Pennington-Rocky Hill Rd.
Bldg 51-Ste 1358
Pennington, NJ 08534

Dear Ms. Vakil:

Please refer to your new drug application (NDA) dated and received September 26, 2025, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Beqalzi (sonrotoclax) tablets.

This NDA provides for the use of Beqalzi (sonrotoclax) tablets for the treatment of adult patients with relapsed or refractory mantle cell lymphoma (MCL) after at least two lines of systemic therapy, including a Bruton's tyrosine kinase (BTK) inhibitor.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved under accelerated approval pursuant to section 506(c) of the 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.

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 and 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

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>.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND CONTAINER LABELING

Submit final printed carton and container labeling that are identical to the enclosed carton and container labeling 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 Carton and Container Labeling for approved NDA 220711.**” 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 Beqalzi (sonrotoclax) tablets shall be 24 months from the date of manufacture when stored at 20°C to 25°C (68°F to 77°F); excursions permitted between 15°C to 30°C (59°F to 86°F) [See USP Controlled Room Temperature].

ADVISORY COMMITTEE

Your application for Beqalzi was not referred to an FDA advisory committee because the application did not raise significant public health questions on the role of the drug in the diagnosis, cure, mitigation, treatment, or prevention of a disease.

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 May 1, 2026. This requirement is listed below.

- 4994-1 Complete a randomized clinical trial intended to verify and describe the clinical benefit of sonrotoclax in patients with mantle cell lymphoma. The trial should randomize patients with relapsed or refractory mantle cell lymphoma to receive sonrotoclax in combination with zanubrutinib or placebo in combination with zanubrutinib. The primary endpoint should be

progression-free survival as assessed by an independent review committee, with key secondary endpoints that include overall survival. The trial should include sufficient representation of racial and ethnic populations to reflect the U.S. patient population with mantle cell lymphoma and allow for interpretation of the results in these patient populations.

The timetable you submitted on May 1, 2026, states that you will conduct this trial according to the following schedule:

Final Protocol Submission:	11/2024 (Completed)
Trial Completion:	02/2030
Final Report Submission:	09/2030

Submit clinical protocols to your IND 161045 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). 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 220711 180-Day AA PMR Progress Report.**”

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.

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>.

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.

We are waiving the pediatric study requirement for ages 0 to less than 6 months because necessary studies are impossible or highly impracticable due to the rarity of relapsed and refractory acute lymphoblastic leukemia (ALL) and acute myeloid leukemia (AML) for this age group.

We are deferring submission of your pediatric study for ages ≥ 6 months to < 17 years for this application because this product is ready for approval for use in adults and the pediatric study has not been completed.

Your deferred pediatric study required by section 505B(a) of the FDCA is a required postmarketing study. The status of this postmarketing study must be reported annually according to 21 CFR 314.81 and section 505B(a)(4)(C) of the FDCA. This required study is listed below.

- 4994-2 Conduct a molecularly targeted pediatric cancer investigation using age appropriate formulations to assess the dosing, pharmacokinetics, safety, and preliminary efficacy of sonrotoclax as part of a combination regimen in pediatric patients 6 months of age or older with relapsed or refractory acute myeloid leukemia and relapsed or refractory acute lymphoblastic leukemia.

The timetable you submitted on May 1, 2026, states that you will conduct this study according to the following schedule:

Final Protocol Submission:	08/2026
Study Completion:	03/2032
Final Report Submission:	10/2032

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

Submit the protocol to your IND 161045, with a cross-reference letter to this NDA. Reports of this required pediatric postmarketing study must be submitted as an NDA or as a supplement to your approved NDA with the proposed labeling changes you believe are warranted based on the data derived from this study. When submitting the reports, please clearly mark your submission "**SUBMISSION OF REQUIRED PEDIATRIC ASSESSMENTS**" in large font, bolded type at the beginning of the cover letter of the submission.

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 an unexpected serious risk of increased serious adverse reactions in patients with severe hepatic impairment and to identify an unexpected serious risk of serious drug toxicity when sonrotoclax is coadministered with P-gp inhibitors or BCRP inhibitors.

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 clinical trials (rather than nonclinical or observational studies) will be sufficient to identify these unexpected serious risks.

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

- 4994-3 Conduct a clinical pharmacokinetic trial to evaluate the serious potential risk of increased serious adverse reactions due to elevated drug levels and to determine an appropriate dose of sonrotoclax in patients with severe hepatic impairment. Design and conduct the trial in accordance with the FDA Guidance for Industry entitled, "Pharmacokinetics in Patients

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>.

with Impaired Hepatic Function: Study Design, Data Analysis, and Impact on Dosing and Labeling.”

The timetable you submitted on May 1, 2026, states that you will conduct this trial according to the following schedule:

Draft Protocol Submission:	07/2026
Final Protocol Submission:	11/2026
Trial Completion:	12/2027
Final Report Submission:	04/2028

- 4994-4 Conduct a clinical pharmacokinetic trial to evaluate the effect of P-gp inhibitors on the pharmacokinetics of sonrotoclax to assess the serious potential risk of serious drug toxicity due to elevated drug levels. Design and conduct the trial in accordance with the FDA Guidance for Industry entitled, “M12 Drug Interaction Studies.”

The timetable you submitted on May 1, 2026, states that you will conduct this trial according to the following schedule:

Draft Protocol Submission:	07/2026
Final Protocol Submission:	11/2026
Trial Completion:	11/2027
Final Report Submission:	03/2028

- 4994-5 Conduct a clinical pharmacokinetic trial to evaluate the effect of BCRP inhibitors on the pharmacokinetics of sonrotoclax to assess the serious potential risk of serious drug toxicity due to elevated drug levels. Design and conduct the trial in accordance with the FDA Guidance for Industry entitled, “M12 Drug Interaction Studies.”

The timetable you submitted on May 1, 2026, states that you will conduct this trial according to the following schedule:

Draft Protocol Submission:	07/2026
Final Protocol Submission:	11/2026
Trial Completion:	11/2027
Final Report Submission:	03/2028

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.⁶

Submit clinical protocol(s) to your IND 161045 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(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

⁶ 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>.

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*.⁷

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 website⁸.

⁷ <https://www.fda.gov/media/128163/download>.

⁸ <https://www.uspnf.com/>

If you have any questions, please contact David Bak, Senior Regulatory Health Project Manager, at David.Bak@fda.hhs.gov.

Sincerely,

{See appended electronic signature page}

R. Angelo de Claro, MD
Director
Office of Oncologic Diseases
Office of New Drugs
Center for Drug Evaluation and Research

ENCLOSURE(S):

- Content of Labeling
 - Prescribing Information
 - Medication Guide
- Carton and 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/

ROMEO A DE CLARO
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