



BLA 125514/S-030

ACCELERATED APPROVAL

Merck Sharp & Dohme Corp., a subsidiary of Merck & Co., Inc.
Attention: Jeffrey Stuart, PhD, RAC
Director, Global Regulatory Affairs
126 E. Lincoln Avenue
P.O. Box 2000, RY34-B293
Rahway, NJ 07065-0900

Dear Dr. Stuart:

Please refer to your Supplemental Biologics License Application (sBLA), dated October 3, 2017, received October 3, 2017, and your amendments, submitted under section 351 of the Public Health Service Act for Keytruda[®] (pembrolizumab) for injection, 50 mg; and Keytruda[®] (pembrolizumab) injection, 100 mg/4 mL (25 mg/mL).

We acknowledge receipt of your major amendment dated March 21, 2018, which extended the goal date by three months.

This Prior Approval supplemental biologics application provides for a new indication for the treatment of adult and pediatric patients with refractory primary mediastinal large B-cell lymphoma (PMBCL), or who have relapsed after 2 or more prior lines of therapy.

APPROVAL & LABELING

We have completed our review of this supplemental application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed, agreed-upon labeling text.

WAIVER OF HIGHLIGHTS SECTION

Please note that we have previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information.

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 <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>, that is identical to the enclosed labeling (text for the prescribing information and Medication Guide) and include the labeling changes proposed in any pending “Changes Being Effected” (CBE) supplements. Information on submitting SPL files using eLIST may be found in the guidance for industry titled “*SPL Standard for Content of Labeling Technical Qs and As*” at <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

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 Effected” (CBE) supplements, for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 601.12(f)] in MS Word format that includes the changes approved in this supplemental application.

ACCELERATED APPROVAL REQUIREMENTS

Products approved under the accelerated approval regulations, 21 CFR 601.41, require further adequate and well-controlled studies/clinical trials to verify and describe clinical benefit. You are required to conduct such studies/clinical trials with due diligence. If postmarketing studies/clinical trials fail to verify clinical benefit or are not conducted with due diligence, we may, following a hearing in accordance with 21 CFR 601.43(b), withdraw this approval. We remind you of your postmarketing requirement specified in your submission dated May 3, 2018. This requirement, along with required completion dates, is listed below.

This postmarketing clinical trial is subject to the reporting requirements of 21 CFR 601.70:

PMR 3389-1 Complete the trial and submit the final report and data to verify and describe the clinical benefit of pembrolizumab, including efficacy and safety, from Trial KN204, a Phase 3 randomized, open-label, active-controlled trial comparing pembrolizumab to brentuximab vedotin for the treatment of patients with relapsed or refractory classical Hodgkin lymphoma. Enroll approximately 300 patients. The primary endpoint should include progression-free survival.

Interim PFS Analysis:	03/2019
Final PFS Analysis:	09/2019
Trial Completion:	11/2020
Final Report Submission:	04/2021

Submit clinical protocols to your IND 118604 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 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 entered into each study/trial.

Submit final reports to this BLA as a supplemental application. For administrative purposes, all submissions relating to this postmarketing requirement must be clearly designated “**Subpart E 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(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.

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.

Since Keytruda was approved on September 4, 2014, we have become aware of insufficient duration of patient exposure to treatment in clinical trial KEYNOTE-170 to adequately identify later-onset immune-mediated toxicities. We consider this information to be “new safety information” as defined in section 505-1(b)(3) of the FDCA.

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 this signal.

Furthermore, the new pharmacovigilance system that FDA is required to establish under section 505(k)(3) of the FDCA will not be sufficient to assess this serious risk.

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess a signal of serious risks of later-onset immune-mediated toxicities.

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

PMR 3389-2 Characterize the safety of long-term use in patients with primary mediastinal large B-cell lymphoma. Submit a final report and data sets with safety and efficacy outcomes of trial KEYNOTE-170 with at least 3 years of follow-up data.

The timetable you submitted on May 3, 2018 states that you will conduct this study according to the following schedule:

Trial Completion:	05/2020
Final Report Submission:	11/2020

Submit the protocol(s) to your IND 118604, with a cross-reference letter to this BLA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing 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)”**.

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.

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 (PI)/Medication Guide/patient PI (as applicable).

Send each submission directly to:

OPDP Regulatory Project Manager
Food and Drug Administration
Center for Drug Evaluation and Research
Office of Prescription Drug Promotions (OPDP)
5901-B Ammendale Road
Beltsville, MD 20705-1266

Alternatively, you may submit promotional materials for accelerated approval products electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft Guidance for Industry (available at: <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM443702.pdf>).

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 Kimberly Scott, Regulatory Project Manager, at (240) 402-4560.

Sincerely,

{See appended electronic signature page}

R. Angelo de Claro, MD
Deputy Director (Acting)
Division of Hematology Products
Office of Hematology and Oncology Products
Center for Drug Evaluation and Research

ENCLOSURE:

Content of Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

ROMEO A DE CLARO
06/13/2018