Food and Drug Administration Center for Drug Evaluation and Research

Summary Minutes of the Dermatologic and Ophthalmic Drugs Advisory Committee Meeting July 19, 2016

Location: FDA White Oak Campus, Building 31 Conference Center, the Great Room (Rm. 1503), 10903 New Hampshire Avenue, Silver Spring, Maryland

Topic: The committee discussed biologics license application (BLA) 761032, brodalumab injection, a human monoclonal antibody, submitted by Valeant Pharmaceuticals Luxembourg S.a.r.l., proposed for the treatment of moderate to severe plaque psoriasis in adult patients who are candidates for systemic therapy or phototherapy.

These summary minutes for the July 19, 2016 meeting of the Dermatologic and Ophthalmic Drugs Advisory Committee of the Food and Drug Administration were approved on August 16, 2016.

I certify that I attended the July 19, 2016 meeting of the Dermatologic and Ophthalmic Drugs Advisory Committee of the Food and Drug Administration and that these minutes accurately reflect what transpired.

/s/	/s/
Jennifer A. Shepherd, RPh	Michael Bigby, MD
Designated Federal Officer, DODAC	Chairperson, DODAC

Summary Minutes of the Dermatologic and Ophthalmic Drugs Advisory Committee Meeting July 19, 2016

The following is the final report of the Dermatologic and Ophthalmic Drugs Advisory Committee meeting held on July 19, 2016. A verbatim transcript will be available in approximately six weeks, sent to the Division of Dermatology and Dental Products and posted on the FDA website at:

http://www.fda.gov/AdvisoryCommittees/CommitteesMeetingMaterials/Drugs/DermatologicandOphthalmicDrugsAdvisoryCommittee/ucm431514.htm

All external requests for the meeting transcript should be submitted to the CDER Freedom of Information Office.

The Dermatologic and Ophthalmic Drugs Advisory Committee of the Food and Drug Administration, Center for Drug Evaluation and Research, met on July 19, 2016, at the FDA White Oak Campus, Building 31 Conference Center, the Great Room (Rm. 1503), 10903 New Hampshire Avenue, Silver Spring, Maryland. Prior to the meeting, the members and temporary voting members were provided the briefing materials from the FDA and Valeant Pharmaceuticals Luxembourg S.a.r.l. The meeting was called to order by Dr. Michael Bigby, MD (Chairperson). The conflict of interest statement was read into the record by Jennifer Shepherd, RPh (Designated Federal Officer). There were approximately 75 people in attendance. There was one Open Public Hearing speaker.

Issue: The committee discussed biologics license application (BLA) 761032, brodalumab injection, a human monoclonal antibody, submitted by Valeant Pharmaceuticals Luxembourg S.a.r.l., proposed for the treatment of moderate to severe plaque psoriasis in adult patients who are candidates for systemic therapy or phototherapy.

Attendance:

Dermatologic and Ophthalmic Drugs Advisory Committee Members Present (Voting): Michael Bigby, MD (Chairperson); Ken Katz, MD, MSc, MCSE

Dermatologic and Ophthalmic Drugs Advisory Committee Members Not Present (**Voting**): Richard M. Awdeh, MD (Chairperson); Geoffrey G. Emerson, MD, PhD; Mary E. Maloney, MD; Stephen S. Feman, MD, MPH, FACS; Mildred M.G. Olivier, MD; David K. Yoo, MD

Dermatologic and Ophthalmic Drugs Advisory Committee Member Present (Non-Voting): Marla B. Sultan, MD, MBA (Industry Representative)

Temporary Members (Voting): Bonnie H. Arkus, RN (*Acting Consumer Representative*); Warren B. Bilker, PhD; Michael J. Blaha, MD, MPH; Erica Brittain, PhD; John J. DiGiovanna, MD; Lynn A. Drake, MD; Michael R. Irwin, MD; Francis E. Lotrich, MD, PhD; Stephen R. Marder, MD; Elaine H. Morrato, DrPH, MPH; Matthew V. Rudorfer, MD; Elizabeth Smith (*Patient Representative*); Ming T. Tan, PhD; Consuelo Walss-Bass, PhD; David D. Waters, MD; Julie M. Zito, PhD

FDA Participants (Non-Voting): Amy G. Egan, MD, MPH; Kendall A. Marcus, MD; Gary Chiang, MD, MPH; Cynthia L. LaCivita, PharmD; Simone P. Pinheiro, ScD, MSc

Designated Federal Officer (Non-Voting): Jennifer Shepherd, RPh

Open Public Hearing Speaker: Tena Brown

The agenda proceeded as follows:

Call to Order and Introduction of

Committee

Michael Bigby, MD Chairperson, DODAC

Conflict of Interest Statement Jennifer Shepherd, RPh

Designated Federal Officer, DODAC

FDA Introductory Remarks Kendall A. Marcus, MD

Director

Division of Dermatology and Dental Products (DDDP)

Office of Drug Evaluation III (ODE III)
Office of New Drugs (OND), CDER, FDA

GUEST SPEAKER PRESENTATION Ebrahim Haroon, MD

Medical Director

Emory Behavioral Immunology Program Emory University, Assistant Professor

Department of Psychiatry and Behavioral Sciences

Emory School of Medicine

APPLICANT PRESENTATIONS Valeant Pharmaceuticals Luxembourg S.a.r.l.

Introduction Tage Ramakrishna, MD

Chief Medical Officer

President of Research and Development, Quality

Valeant Pharmaceuticals

Medical Landscape Mark Lebwohl, MD

Professor and Chairman

Kimberly and Eric J Waldman Department of Dermatology

Icahn School of Medicine at Mount Sinai

Efficacy RK Pillai, PhD

Vice President, Head of Dermatology

Valeant Pharmaceuticals

Safety Robert Israel, MD

Vice President, Clinical and Medical Affairs

Valeant Pharmaceuticals

APPLICANT PRESENTATIONS (CONT.)

Suicidal Ideation and Behavior (SIB) Lauren B. Marangell, MD

Psychiatrist and President Brain Health Consultants

IL-17 Signaling and Safety James B. Trager, PhD

Vice President, Research Valeant Pharmaceuticals

Risk Management Overview Tage Ramakrishna, MD

Benefit-Risk Kim A. Papp, MD, PhD, FRCPC

Founder and President Probity Medical Research

Closing Tage Ramakrishna, MD

Clarifying Questions

BREAK

FDA PRESENTATIONS

Clinical Pharmacology, Gary Chiang, MD, MPH

Efficacy Overview, and Medical Officer

Safety Assessment DDDP, ODE-III, OND, CDER, FDA

Biostatistical Analysis of SIB Ling Lan, PhD

Biostatistics Reviewer Division of Biostatistics VII Office of Biostatistics

Office of Translational Sciences, CDER, FDA

Division of Pharmacovigilance: Review of

SIB

Robert L. Levin, MD

Director

Division of Pharmacovigilance I (DPV-I)

Office of Pharmacovigilance and Epidemiology (OPE)

Office of Surveillance and Epidemiology (OSE)

CDER, FDA

Division of Epidemiology-I: Review of SIB Andrew Mosholder, MD, MPH

Medical Officer, Division of Epidemiology I (DEPI-I)

OPE, OSE, CDER, FDA

FDA PRESENTATIONS (CONT.)

Division of Psychiatric Products: Review of

SIB

Jean Kim, MD, MA

Medical Officer

Division of Psychiatry Products ODE-I, OND, CDER, FDA

Biostatistical Analysis of Major Adverse

Cardiovascular Events (MACE)

Gary Chiang, MD, MPH

Division of Epidemiology-I: Review of

MACE

Andrew Mosholder, MD, MPH

Risk Management Options for Brodalumab

Jasminder Kumar, PharmD

Risk Management Analyst

Division of Risk Management (DRISK)

Office of Medication Error Prevention and Risk

Management (OMEPRM)

OSE, CDER, FDA

Clarifying Questions

LUNCH

Open Public Hearing

Charge to the Committee

Kendall A. Marcus, MD

Questions to the Committee/Committee Discussion

BREAK

Questions to the Committee/Committee Discussion

ADJOURNMENT

Questions to the Committee:

- 1. **DISCUSSION:** Discuss the safety data for brodalumab.
 - A. **DISCUSSION:** Do the safety data for brodalumab suggest a signal for:
 - i. Suicide Ideation and Behavior (SIB)?
 - ii. Major Adverse Cardiovascular Events (MACE)?

B. **DISCUSSION:** If you believe there is a safety signal for SIB and/or MACE, comment on possible approaches to further evaluate these signals.

Committee Discussion: The committee did not believe that there was a safety signal for MACE. The committee acknowledged that the six completed suicides remain an unexplained issue and whether they are drug-related is subject to debate. There were varying opinions as to whether there was a safety signal for SIB; however, it was noted that clinicians and patients need to be made aware of the potential for SIB. The committee had differing opinions on requiring a registry to follow patients taking brodalumab. The committee discussed the difficulty in evaluating patients for increased suicide risk unless a clinician had expert psychiatric experience. The committee also debated as to whether or not the proposed enhanced safety communications are adequate to address the issue of six completed suicides. Please see the transcript for details of the committee discussion.

- 2. **VOTE:** Is the overall benefit/risk profile of brodalumab acceptable to support approval for the treatment of moderate to severe plaque psoriasis in adult patients who are candidates for systemic therapy or phototherapy.
 - A. Yes, with labeling alone to manage the risks
 - B. Yes, but only if certain risk management options for SIB beyond labeling are implemented
 - C. No

Please provide a rationale for your vote. If you voted for A, please describe the labeling you would recommend to manage the risks. If you voted for B, describe the interventions or tools you believe would help mitigate the risk of SIB, in addition to labeling.

Vote Result: A - 4 votes B - 14 votes C - 0 votes

Committee Discussion: The majority of the panel voted that the overall benefit/risk profile of brodalumab is acceptable to support approval for the treatment of moderate to severe plaque psoriasis in adult patients who are candidates for systemic therapy or phototherapy, but only if certain risk management options for SIB beyond labeling are implemented. Of those who voted for "B", the majority stated that they supported a registry or other post-marketing study of some type. Four committee members recommended a black box warning. Please see the transcript for details of the committee discussion.

3. **DISCUSSION:** If you voted for approval in question #2, please comment on post-marketing studies/trials that are needed to further define the safety of brodalumab, including, but not limited to, the need for long-term studies to evaluate suicidality and cardiovascular events.

Committee Discussion: Several committee members stated their concerns that a mandatory registry could be a barrier to drug access for some patients, but supported a voluntary registry. One committee member expressed concern that the clinical endpoints related to SIB that the applicant has proposed to collect in the ongoing psoriasis patient registry may not be rigorous enough. Another committee member stated that patients on brodalumab may need

additional clinician support, such as from a social worker or a psychologist. Please see the transcript for details of the committee discussion.

The meeting was adjourned at approximately 4:00 p.m.