



Waiver to Allow Participation in a Food and Drug Administration Advisory Committee

DATE: June 16, 2017

TO: Janice M. Soreth, M.D.
Associate Commissioner for Special Medical Programs
Office of Medical Products and Tobacco
Office of the Commissioner, FDA

THROUGH: Jeffrey Anderson, M.S., RAC
Director (Acting), Advisory Committee Oversight and Management Staff
Office of Special Medical Programs

FROM: Jayne E. Peterson, B.S.Pharm., J.D.
Director, Division of Advisory Committee and Consultant Management
Center for Drug Evaluation and Research

Name of Advisory Committee Member: Bruce Roth, M.D.

Committee: Oncologic Drugs Advisory Committee Meeting

Meeting date: July 13, 2017

Description of the Particular Matter to Which the Waiver Applies:

Dr. Roth is serving as voting Chair of the Oncologic Drugs Advisory Committee (ODAC). The Committee's function is to review and evaluate available data concerning the safety and effectiveness of marketed and investigational human drug products for use in the treatment of cancer and make appropriate recommendations to the Commissioner of Food and Drugs.

During the morning session of the July 13 meeting, the committee will discuss biologics license application (BLA) 761028 for ABP 215, a proposed biosimilar to Genentech/Roche's AVASTIN (bevacizumab), submitted by Amgen Inc. The proposed indications/uses for this product are:(1) For the first or second-line treatment of patients with metastatic carcinoma of the colon or rectum in combination with intravenous 5-fluorouracil-based chemotherapy; (2) in combination with fluoropyrimidine-irinotecan or fluoropyrimidine-oxaliplatin-based chemotherapy, for the second-line treatment of patients with metastatic colorectal cancer who have progressed on a first-line

ABP 215-containing regimen; (3) for the first-line treatment of unresectable, locally advanced, recurrent or metastatic non-squamous, non-small cell lung cancer in combination with carboplatin and paclitaxel; (4) for the treatment of glioblastoma with progressive disease in adult patients following prior therapy as a single agent; (5) for the treatment of metastatic renal cell carcinoma in combination with interferon alfa; and (6) in combination with paclitaxel and cisplatin or paclitaxel and topotecan for the treatment of persistent, recurrent, or metastatic carcinoma of the cervix. The topic of this meeting is a particular matter involving specific parties.

Type, Nature, and Magnitude of the Financial Interest:

Dr. Bruce Roth is Professor of Medicine, Division of Oncology, at Washington University School of Medicine in St. Louis, and Medical Director, Oncology Services, at the Siteman Cancer Center. He has not identified any personal financial interests that are likely to be affected by the particular matters to be discussed at the meeting. However, he has identified financial interests of his employer, which are imputed to him under the federal conflict of interest statute, 18 U.S.C. § 208.

Dr. Roth's employer, Washington University School of Medicine in St. Louis, was awarded a research contract by (b) (4), a competing firm, for a study of (b) (4). The study began April 18, 2016. Total funding to Dr. Roth's employer from (b) (4) for this study is between \$0-\$50,000. Dr. Roth is a Sub-Investigator for the study; he does not receive salary support or personal remuneration from this study.

Basis for Granting the Waiver:

Regulation of biosimilar products is new and is evolving through interpretation of the law and the published FDA guidances. Section 351(i) of the Public Health Service (PHS) Act defines biosimilarity to mean "that the biological product is highly similar to the reference product notwithstanding minor differences in clinically inactive components" and that "there are no clinically meaningful differences between the biological product and the reference product in terms of the safety, purity, and potency of the product."¹ Evaluation of clinical pharmacology data is critical in addressing "no clinically meaningful difference in safety, purity and potency" between the biosimilar and the US-reference product.

This is the first biosimilar product for US-licensed Avastin, a product with multiple indications for treatment of disparate cancers. Avastin is approved for the treatment of non-small cell lung cancer, metastatic colorectal cancer, cervical cancer, ovarian cancer, recurrent glioblastoma multiforme, and renal cell cancer. It is essential that the advice provided by practicing medical oncologists is not limited to one or two experts, but that it represents the scope of practice covered by the many indications, particularly given the large number of indications for US-licensed Avastin.

Adequate representation of medical oncologists who are familiar with the use of Avastin for the treatment of the variety of cancers for which Avastin is approved can be achieved by the inclusion of 5 or more oncologist on the ODAC panel for this meeting. The success of the biosimilar

¹ Section 7002(b)(3) of the Affordable Care Act, adding section 351(i)(2) of the PHS Act

program depends on acceptance of these drugs by the medical community as having no clinically meaningful differences. The participation of medical oncologists with expertise in various cancers would ensure that the community is adequately represented across the spectrum of cancers for which Avastin is indicated.

Dr. Roth has unique qualifications and specialized expertise needed for this particular matter.

Dr. Bruce Roth is Professor of Medicine, Division of Oncology, at Washington University School of Medicine in St. Louis, and Medical Director, Division of Oncology Services, at the Siteman Cancer Center. He received his medical degree from Saint Louis University, and completed his residency and fellowship in hematology and oncology at Indiana University Medical Center. Dr. Roth's research areas of interest include prostate cancer, urothelial carcinomas, testicular cancer, and cancers of the kidney. As an established clinical investigator and urologic oncologist, Dr. Roth will provide added expertise on the evaluation of targeted therapeutics in cancer and potential combinations with immune modifiers. Dr. Roth is a member of the ODAC and he is also the voting chair for the meeting. His leadership and participation in past ODAC meetings will be critical for the success of the meeting.

There is limited expertise available and it is difficult to locate similarly qualified individuals without a disqualifying financial interest.

There were a total of fourteen special government employees with expertise in medical oncology invited and six were unable to attend due to schedule conflicts. Dr. Roth is the only medical oncologist participating in this meeting who specializes in the treatment of genitourinary (GU) cancers, including renal cell cancer. Specifically, he has served as the Study Chairman for multiple clinical studies for various GU malignancies conducted by the Eastern Cooperative Oncology Group (ECOG). He brings a depth of experience to the panel, allowing for a diverse perspective and robust discussion of the topic before the committee.

The particular matter is sensitive.

The meeting topic is considered to be sensitive. The Division does expect that the meeting is likely to receive significant public interest and (non-trade) press interest because this will be the first biosimilar product for US-licensed Avastin, a product with multiple indications for treatment of disparate cancers, to be discussed at an ODAC meeting.

Dr. Roth's expertise in this particular matter is necessary in the interest of public health.

The Patient Protection and Affordable Care Act (Affordable Care Act), signed into law on March 23, 2010, amends the Public Health Service Act (PHS Act) to create an abbreviated licensure pathway for biological products that are demonstrated to be “biosimilar” to or “interchangeable” with an FDA-licensed biological product. This pathway is provided in the part of the law known as the Biologics Price Competition and Innovation Act (BPCI Act). Under the BPCI Act, a biological product may be demonstrated to be “biosimilar” if data show that, among other things, the product is “highly similar” to an already-approved biological product. A biosimilar product is a biological product that is approved based on a showing that it is highly similar to an FDA-

approved biological product, known as a reference product, and has no clinically meaningful differences in terms of safety, purity and potency from the reference product. Only minor differences in clinically inactive components are allowable in biosimilar products. Biosimilars can provide more treatment options for patients, and possibly lower treatment costs.

Dr. Roth is the only medical oncologist participating in this meeting who specializes in the treatment of genitourinary (GU) cancers, including renal cell cancer; renal cancer is one of the types of cancers for which Avastin is approved. It is necessary to have several medical oncologists at this meeting for a diversity of opinions. Dr. Roth's participation in this meeting will allow for a well-rounded discussion because he brings a specific expertise that will further the committee's discussion, resulting in a productive meeting in the interest of public health.

The dollar value of the potential gain or loss that may result from participation in the particular matter is small.

As noted above, total funding to Washington University from (b) (4) for this study is between \$0-\$50,000. Dr. Roth is a Sub-Investigator for the study. Dr. Roth does not receive salary support or personal remuneration from this study.

Dr. Roth has served effectively in the past ODAC meetings.

Dr. Roth is a member of the ODAC and he is also the voting chair for the meeting. Additionally, he has 3 years of experience serving on the ODAC; thus he has specific regulatory expertise, which is important for this meeting. His leadership and participation in past ODAC meetings will be critical for the success of the meeting.

Any potential for a conflict of interest is greatly outweighed by the strong need for Dr. Roth's expertise in this matter.

In the interest of public health, it is critical for the Agency to review biosimilar products shown to be highly similar to an FDA-approved biological product, and which have no clinically meaningful differences in terms of safety, purity and potency from the reference product. Biosimilars can provide more treatment options for patients, and possibly lower treatment costs. Dr. Roth's medical oncology expertise is critical for the assessment of the biosimilar product coming before the committee.

Accordingly, I recommend that you grant Dr. Bruce Roth, a voting member of the Oncologic Drugs Advisory Committee, a waiver from the conflict of interest prohibitions of 18 U.S.C. §208(a).

Certification:

 X The individual may participate, pursuant to 18 U.S.C. 208(b)(3) – The need for the individual's services outweighs the potential for a conflict of interest created by the financial interest involved.

Limitations on the Regular Government Employee’s or Special Government Employee’s Ability to Act:

_____ Non-voting

_____ Other (specify):

_____ Denied – The individual may not participate.

Janice M. Soreth -S

Digitally signed by Janice M. Soreth -S
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Janice M. Soreth, M.D.
Associate Commissioner for Special Medical Programs
Office of Medical Products and Tobacco
Office of the Commissioner, FDA

6.22.17

Date