



**U.S. FOOD & DRUG**  
ADMINISTRATION

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## Memorandum

**DATE:** July 18, 2017

**TO:** Xiaobin (Victor) Lu, Ph.D., Chairperson  
CBER/OTAT/DCGT/GTB

Erica Giordano, RPM  
CBER/OTAT/DRPM/RPMBI

**FROM:** Dana C. Jones, CSO  
CBER / OCBQ/DCM/APLB

**THROUGH:** Lisa L. Stockbridge, Ph.D.  
CBER / OCBQ/DCM/APLB

**SUBJECT:** Labeling Review  
**KYMRIAH (tisagenlecleucel)**  
**BLA 125646/0**  
Sponsor: Novartis Pharmaceuticals Corp.

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**Background:** The sponsor submitted:

☒ New Approval  
☐ Changes Being Effected (CBE) supplement  
☐ Prior Approval Supplement (PAS) Amendment  
☐ Major Amendment

Submission contains:

☒ Prescribing Information (PI)  
☐ Patient Package Insert (PPI)  
☒ Package and/or container labels  
☒ Other (Medication Guide)

Submission Date: February 2, 2017

PDUFA Action Date: October 3, 2017

## APLB Comments/Recommendations

On February 2, 2017, Novartis Pharmaceuticals Corporation submitted an original Biologics License Application (BLA) for KYMRIA<sup>®</sup> (tisagenlecleucel) a CD19-directed genetically-modified autologous immunotherapy indicated in combination with lymphodepleting chemotherapy for the treatment of pediatric and young adult patients 3-25 years of age with relapse or refractory B-cell pre-cursor acute lymphoblastic leukemia (ALL).

On April 13, 2017, APLB recommended that the proposed proprietary name, KYMRIA<sup>®</sup>, be found acceptable.

APLB concurs with the revisions made by the review team. The following comments and recommendations are in addition to all changes already made from a promotional and comprehension perspective.

### GENERAL

- Upon approval ensure that the 4-digit year is entered for the “Initial U.S. Approval.”
- Use active voice when possible.
- Use command language for instructions when possible.
- Provide full text with the first use of an acronym.
- Avoid use of bold print unless required by regulation.
- Avoid overuse of bullets, as it desensitizes the reader to important information and reduces readability. Only bullet when there are two or more disparate concepts.
- Remove date from the end of the Full Prescribing Information (FPI). The date is required at the end of the **HIGHLIGHTS** section, and should not appear in both places.

### HIGHLIGHTS

- The **HIGHLIGHTS** should not exceed ½ page. Use command language and summary statements throughout, especially in **WARNINGS AND PRECAUTIONS**, which will remedy this concern.
- The **DOSAGE AND ADMINISTRATION** section should include the route of administration with a bolded, sentence case phrase placed directly beneath the section heading. Please add the following route of administration:

#### **For intravenous infusion only.**

- Please provide the full text for the acronym CAR 19 upon first use.
- Please correct the following typographical error:

Verify the patient's ~~identify~~ identity prior to infusion (2.1)

- The **WARNINGS AND PRECAUTIONS** should be listed in decreasing order of severity and public health significance.
- The warning concerning fetal risk belongs under **USE IN SPECIFIC POPULATIONS**.

## **TABLE OF CONTENTS (TOC)**

Ensure that the **TOC** aligns with the section headings of the **FULL PRESCRIBING INFORMATION (FPI)** and has the correct numbering. Note that not every subsection is hyperlinked from the TOC. (See 21 CFR §201.56(d)(1)):

<b>BOXED WARNING</b>
<b>1 INDICATIONS AND USAGE</b>
<b>2 DOSAGE AND ADMINISTRATION</b>
<b>3 DOSAGE FORMS AND STRENGTHS</b>
<b>4 CONTRAINDICATIONS</b>
<b>5 WARNINGS AND PRECAUTIONS</b>
<b>6 ADVERSE REACTIONS</b>
<b>8 USE IN SPECIFIC POPULATIONS</b>
8.1 Pregnancy
8.2 Lactation
8.3 Females and Males of Reproductive Potential
8.4 Pediatric Use
8.5 Geriatric Use
<b>11 DESCRIPTION</b>
<b>12 CLINICAL PHARMACOLOGY</b>
12.1 Mechanism of Action
12.2 Pharmacodynamics
12.3 Pharmacokinetics
12.4 Microbiology
12.5 Pharmacogenomics
<b>13 NONCLINICAL TOXICOLOGY</b>
13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility
13.2 Animal Toxicology and/or Pharmacology
<b>14 CLINICAL STUDIES</b>
<b>16 HOW SUPPLIED/STORAGE AND HANDLING</b>
<b>17 PATIENT COUNSELING INFORMATION</b>

- Please remove the paragraph under 2.2 Administration. The **TABLE OF CONTENTS** should contain only the headings of sections (and some required subsections) within the FPI. All other text should be removed.

## **FULL PRESCRIBING INFORMATION (FPI)**

### **BOX WARNING**

The BOX WARNING heading should be placed inside the box, centered and in uppercase letters. Please center the heading and include a section cross-reference for the third bulleted point. (e.g., CONTRAINDICATIONS or WARNINGS AND PRECAUTIONS).

## 2 DOSAGE AND ADMINISTRATION

- Please include the route of administration directly beneath the heading **DOSAGE AND ADMINISTRATION**, we recommend using the bolded statement:

**For intravenous infusion only.**

- Revise this section to a logical sequence of dose, preparation, administration, and managing expected adverse reactions specific to administration. Adverse reaction information should be cross referenced to **WARNINGS AND PRECAUTIONS**.
- Please change the **2.1 Recommended Dosage** subsection title to the following:

### **2.1 Dose**

- Provide basic dosing information first, followed by other information relevant to dosage calculation. The sequence of information should reflect the relative importance of the information presented.
- Please quantify the statement “until resolved.”
- For readability, presenting the information as numeric steps. For example:

**Step 1    Confirm Patient Identity**  
**Step 2    Inspect and Thaw Infusion Bag(s)**

## 3 DOSAGE FORMS AND STRENGTHS

Please include a statement indicating that the final dosage will be printed on the patient specific infusion bag(s).

## 4 CONTRAINDICATIONS

Please cross-reference section **11 DESCRIPTION** for the product components.

## 5 WARNINGS AND PRECAUTIONS

The warning concerning fetal risk belongs in **USE IN SPECIFIC POPULATIONS**.

## 6 ADVERSE REACTIONS

- Include the statement of the most common adverse reactions, with their cutoff frequency, directly beneath the heading of section **6 ADVERSE REACTIONS** section (before subsection 6.1).
- A hyperlink implies that there is greater detail elsewhere. For impact and readability, revise the phrase introducing the hyperlinks to the serious adverse reactions to:

Serious adverse reactions for KYMRIA<sup>®</sup> include the following:

## 7 DRUG INTERACTIONS

This section is not required and should be deleted when there are no data.

## 8 USE IN SPECIFIC POPULATIONS

- Revise subsections 8.1, 8.2, and 8.3 to conform to the new Pregnancy and Lactation Labeling Rule (PLLR). (See *Guidance for Industry: Pregnancy, Lactation, and Reproductive Potential: Labeling for Human Prescription Drug and Biological Products – Content and Format*)
- The first five subsections are reserved. Subsections 8.1, 8.2, 8.4, and 8.5 are required. Additional subsection topics must start at 8.6:

**8.1 Pregnancy**

**8.2 Lactation**

**8.3 Females and Males of Reproductive Potential**

**8.4 Pediatric Use**

**8.5 Geriatric Use**

**8.n [next specific population]**

- Do not include additional subsections when there are no data (e.g., Renal and Hepatic Impairment, Active CNS Leukemia).
- Please correct the font and spacing in this section.

## 10 OVERDOSAGE

This section is not required and should be deleted if no human data is available.

## 11 DESCRIPTION

Please include the product's proper name as well as the proprietary name in this section.

KYMRIA<sup>®</sup> (tisagenlecleucel)

## 12 CLINICAL PHARMACOLOGY

- Subsection **12.2 Pharmacodynamics** is a required section. Please include a description of any biochemical or physiologic pharmacologic effects of the cell therapy or active metabolites, with respect to its clinical effect or to its adverse reactions or toxicity, if available.
- To improve readability in subsections, consider using tables rather than lengthy paragraphs to organize information.

## 14 CLINICAL STUDIES

- It is not necessary to subsection this section.
- Refrain from research terminology, such as: *pivotal*, *Phase II*, and *primary endpoint*.
- Remove study numbers. (There only is one study in the PI at this time.).

## 16 HOW SUPPLIED/STORAGE AND HANDLING

- Overuse of bold font may lead to loss of readability.
- It is not necessary to use subheadings in a short section.
- Include the NDC code.
- Refrain from including practice of medicine.

## MEDICATION GUIDE

- The Medication Guide is a strictly formatted document with required regulatory language. Revise the proposed “Medication Guide” to be consistent with the regulations. (See 21 §CFR 208.20) In addition, please refer to the *Guidance: Medication Guides-Distribution Requirements and Inclusion in Risk Evaluation and Mitigation Strategies (REMS)* for more information on how to revise this section.
- Use active voice and plain language to enhance readability.
- Cross-referencing within the MedGuide is discouraged, as it reduces the readability and comprehension of the MedGuide.
- Throughout the Medication Guide the term *white blood cells* and *immune cells* are used interchangeably, for consistency and clarity, please use one term to describe the cells.

**CONTAINER LABEL**

- Include the correct proper named as well as proprietary name.

**KYMRIAH (tisagenlecleucel)**

- Verify the accuracy of the NDC number.
- Include the telephone number.

If you have any questions regarding this review please contact Dana C. Jones, Consumer Safety Officer at 240-402-9012.