

**Food and Drug Administration  
Center for Drug Evaluation and Research**

**Final Summary Minutes of the Oncologic Drugs Advisory Committee Meeting  
April 27-29, 2021**

**Location:** Please note that due to the impact of the COVID-19 pandemic, all meeting participants joined this advisory committee meeting via an online teleconferencing platform.

**Topic:** The committee heard updates on certain supplemental biologics license applications (sBLAs) approved under 21 CFR 601.40 (subpart E, accelerated approval regulations) with confirmatory trial(s) that have not verified clinical benefit. These updates provided information on: (1) the status and results of confirmatory clinical studies for a given indication; and (2) any ongoing and planned trials. Confirmatory studies are post-marketing studies to verify and describe the clinical benefit of a drug after it receives accelerated approval. Based on the updates provided, the committee had a general discussion focused on next steps for each product including whether the indications should remain on the market while additional trial(s) are conducted.

On April 27, 2021, the committee received updates on the following product: BLA 761034/S-018, for TECENTRIQ (atezolizumab), submitted by Genentech, Inc., indicated in combination with paclitaxel protein-bound for the treatment of adult patients with unresectable locally advanced or metastatic triple-negative breast cancer (TNBC) whose tumors express PD-L1 (PD-L1 stained tumor-infiltrating immune cells (IC) of any intensity covering  $\geq 1\%$  of the tumor area), as determined by an FDA-approved test.

On April 28, 2021, the committee received updates on the following products: (1) BLA 125514/S-017, trade name KEYTRUDA (pembrolizumab), submitted by Merck Sharp & Dohme Corp., indicated for the treatment of patients with locally advanced or metastatic urothelial carcinoma who are not eligible for cisplatin-containing chemotherapy; and (2) BLA 761034/S-001, trade name TECENTRIQ (atezolizumab), submitted by Genentech, Inc., indicated for patients with locally advanced or metastatic urothelial carcinoma who are not eligible for cisplatin-containing chemotherapy.

On April 29, 2021, the committee received updates on the following products: (1) BLA 125514/S-024, trade name KEYTRUDA (pembrolizumab), submitted by Merck Sharp & Dohme Corp., indicated for the treatment of patients with recurrent locally advanced or metastatic gastric or gastroesophageal junction adenocarcinoma whose tumors express PD-L1 [Combined Positive Score (CPS)  $\geq 1$ ] as determined by an FDA-approved test, with disease progression on or after two or more prior lines of therapy including fluoropyrimidine- and platinum-containing chemotherapy and if appropriate, HER2/neu-targeted therapy; (2) BLA 125514/S-042, trade name KEYTRUDA (pembrolizumab), submitted by Merck Sharp & Dohme Corp., indicated for the treatment of patients with hepatocellular carcinoma (HCC) who have been previously treated with sorafenib; and (3) BLA 125554/S-041, trade name OPDIVO (nivolumab), submitted by Bristol-Myers Squibb Company, indicated as a single agent for the treatment of patients with hepatocellular carcinoma (HCC) who have been previously treated with sorafenib.

These summary minutes for the April 27-29, 2021 meeting of Oncologic Drugs Advisory Committee (ODAC) of the Food and Drug Administration were approved on July 8, 2021.

I certify that I attended the April 27-29, 2021 meeting of the ODAC meeting of the Food and Drug Administration and that these minutes accurately reflect what transpired.

\_\_\_\_\_  
/s/  
Joyce Yu, PharmD  
Acting Designated Federal Officer, ODAC  
(April 27 and 28, 2021 Only)

\_\_\_\_\_  
/s/  
Philip C. Hoffman, MD  
Chairperson, ODAC

\_\_\_\_\_  
/s/  
Takyiah Stevenson, PharmD  
Acting Designated Federal Officer, ODAC  
(April 29, 2021 Only)

\_\_\_\_\_  
/s/  
Diane Reidy-Lagunes, MD  
Acting Chairperson, ODAC  
(Topic 1 on April 29, 2021 Only)

## **Final Summary Minutes of the Oncologic Drugs Advisory Committee Meeting April 27-29, 2021**

The Oncologic Drugs Advisory Committee (ODAC) of the Food and Drug Administration, Center for Drug Evaluation and Research met on April 27-29, 2021. The meeting presentations were heard, viewed, captioned, and recorded through an online teleconferencing platform. Prior to the meeting, the members and temporary voting members were provided the briefing materials from the FDA and Applicants (Genentech, Inc., Merck Sharp & Dohme Corp., and Bristol-Myers Squibb Company). On April 27<sup>th</sup>, 28<sup>th</sup>, and for topics 2 and 3 on April 29<sup>th</sup>, the meeting was called to order by Philip C. Hoffman, MD (Chairperson). For topic 1 on April 29<sup>th</sup>, the meeting was called to order by Diane Reidy-Lagunes, MD (Acting Chairperson). The conflict of interest statement was read into the record by Joyce Yu, PharmD (Acting Designated Federal Officer) on April 27<sup>th</sup> and April 28<sup>th</sup>, and by Takyiah Stevenson, PharmD (Acting Designated Federal Officer) on April 29<sup>th</sup>. There were approximately 1850 people online on April 27<sup>th</sup>, 1350 people online on April 28<sup>th</sup>, and 1100 people online on April 29<sup>th</sup>. On April 27<sup>th</sup>, there were 4 Open Public Hearing (OPH) speaker presentations. On April 28<sup>th</sup>, there were 6 OPH speaker presentations for topic 1 and 2 OPH speaker presentations for topic 2. On April 29<sup>th</sup>, there were 5 OPH speaker presentations for topic 1, 4 OPH speaker presentations for topic 2, and 6 OPH speaker presentations for topic 3.

A verbatim transcript will be available, in most instances, at approximately ten to twelve weeks following the meeting date.

**Agenda:** The committee heard updates on certain supplemental biologics license applications (sBLAs) approved under 21 CFR 601.40 (subpart E, accelerated approval regulations) with confirmatory trial(s) that have not verified clinical benefit. These updates provided information on: (1) the status and results of confirmatory clinical studies for a given indication; and (2) any ongoing and planned trials. Confirmatory studies are post-marketing studies to verify and describe the clinical benefit of a drug after it receives accelerated approval. Based on the updates provided, the committee had a general discussion focused on next steps for each product including whether the indications should remain on the market while additional trial(s) are conducted.

On April 27, 2021, the committee received updates on the following product: BLA 761034/S-018, for TECENTRIQ (atezolizumab), submitted by Genentech, Inc., indicated in combination with paclitaxel protein-bound for the treatment of adult patients with unresectable locally advanced or metastatic triple-negative breast cancer (TNBC) whose tumors express PD-L1 (PD-L1 stained tumor-infiltrating immune cells (IC) of any intensity covering  $\geq 1\%$  of the tumor area), as determined by an FDA-approved test.

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patients with locally advanced or metastatic urothelial carcinoma who are not eligible for cisplatin-containing chemotherapy.

On April 29, 2021, the committee received updates on the following products: (1) BLA 125514/S-024, trade name KEYTRUDA (pembrolizumab), submitted by Merck Sharp & Dohme Corp., indicated for the treatment of patients with recurrent locally advanced or metastatic gastric or gastroesophageal junction adenocarcinoma whose tumors express PD-L1 [Combined Positive Score (CPS)  $\geq 1$ ] as determined by an FDA-approved test, with disease progression on or after two or more prior lines of therapy including fluoropyrimidine- and platinum-containing chemotherapy and if appropriate, HER2/neu-targeted therapy; (2) BLA 125514/S-042, trade name KEYTRUDA (pembrolizumab), submitted by Merck Sharp & Dohme Corp., indicated for the treatment of patients with hepatocellular carcinoma (HCC) who have been previously treated with sorafenib; and (3) BLA 125554/S-041, trade name OPDIVO (nivolumab), submitted by Bristol-Myers Squibb Company, indicated as a single agent for the treatment of patients with hepatocellular carcinoma (HCC) who have been previously treated with sorafenib.

**Attendance:**

**ODAC Members Present (Voting):** Susan Halabi, PhD; Philip C. Hoffman, MD (Chairperson; April 27, 28, April 29 Topics 2 and 3 Only); Christopher H. Lieu, MD; David E. Mitchell (Consumer Representative; April 28 and 29 Only); Anthony D. Sung, MD (April 28 Topic 2 and April 29 Topic 3 Only)

**ODAC Members Not Present (Voting):** Jaffer A. Ajani, MD; Ranjana H. Advani, MD; Massimo Cristofanilli, MD, FACP; Jorge A. Garcia, MD; Alberto S. Pappo, MD

**ODAC Member Not Present (Non-Voting):** Jonathan D. Cheng, MD (Industry Representative)

**Acting Industry Representative to the Committee (Non-Voting):** Albert L. Kraus, PhD

**Temporary Members (Voting):** Andrea B. Apolo, MD (April 28 Only); Harold J. Burstein, MD, PhD (April 27 Only); Matthew J. Ellis, MD, PhD (April 27 Only); Sandra Finestone, PsyD (Acting Consumer Representative, April 27 Only); Julie N. Graff, MD (April 28 Topic 2 Only); James Randolph Hillard, MD (Patient Representative, April 29 Topic 1 Only); Karen R. Hoyt (Patient Representative, April 29 Topics 2 and 3 Only); Colette Johnston (Patient Representative, April 28 Only); Pamela L. Kunz, MD (April 29 Only); Mark A. Lewis, MD (April 29 Only); Stanley Lipkowitz, MD, PhD (April 27 Only); Ravi Madan, MD (April 28 Only); Alberto J. Montero, MD, MBA, CPHQ (April 27 Only); Diane Reidy-Lagunes, MD (Acting Chairperson, April 29 Topic 1 Only); Matthew Rettig, MD (April 28 Topic 2 Only); Mohummad M. Siddiqui, MD, FACS (April 28 Only); Jennifer M. Spotila, JD (Patient Representative, April 27 Only); Colin D. Weekes, MD, PhD, FASCO (April 29 Only)

**FDA Participants (Non-Voting):** Richard Pazdur, MD; Julia Beaver, MD; Laleh Amiri-Kordestani, MD (April 27 and 28 Only); Steven Lemery, MD, MHS (April 29 Only)

**Acting Designated Federal Officers (Non-Voting):** Joyce Yu, PharmD (April 27 and 28 only); Takyah Stevenson, PharmD (April 29 only)

### Open Public Hearing Speakers:

- April 27: Diana Zuckerman, PhD (National Center for Health Research); Ricki Fairley (TOUCH, The Black Breast Cancer Alliance); Michele Atlan (National Breast Cancer Coalition); Hayley Dinerman (Triple Negative Breast Cancer Foundation)
- April 28, Topic 1: Diana Zuckerman, PhD (National Center for Health Research); Ronac Mamtani MD, MSCE (University of Pennsylvania); Stephanie Chisolm, PhD (Bladder Cancer Advocacy Network); Steven G. Burtchell; Esteban Cordero and Wilma Cordero; Christopher J. Hoimes
- April 28, Topic 2: Sumanta K. Pal, MD (City of Hope Comprehensive Cancer Center); Stephanie Chisolm, PhD (Bladder Cancer Advocacy Network)
- April 29, Topic 1: Andrea Eidelman (Debbie's Dream Foundation: Curing Stomach Cancer); Theresa Germano; Diana Zuckerman, PhD (National Center for Health Research); Samuel J. Klempner, MD (Massachusetts General Hospital); David B Beal
- April 29, Topic 2: Andrea Wilson Woods (Blue Faery The Adrienne Wilson Liver Cancer Association); Neil Nagy; Milind Javle, MD; Cathy Eng, MD, FACP, FASCO
- April 29, Topic 3: Andrea Wilson Woods (Blue Faery The Adrienne Wilson Liver Cancer Association); Bonnie Pickard; Donna Cryer, JD (Global Liver Institute); Bassel F. El-Rayes, MD (Emory Winship Cancer Institute); Gary Schroeter; Robin K. ("Katie") Kelley, MD (Helen Diller Family Comprehensive Cancer Center)

### *The agenda was as follows:*

#### April 27, 2021

Call to Order

**Philip C. Hoffman, MD**  
Chairperson, ODAC

Introduction of Committee and Conflict of Interest Statement

**Joyce Yu, PharmD**  
Acting Designated Federal Officer, ODAC

FDA Introductory Comments on Accelerated Approval for Oncology Drug Products: Regulatory Overview

**Julia Beaver, MD**  
Chief of Medical Oncology  
Oncology Center of Excellence (OCE)  
Deputy Director (acting)  
Office of Oncologic Diseases (OOD)  
Office of New Drugs (OND), CDER, FDA

#### **APPLICANT PRESENTATIONS**

**Genentech, Inc.**

Introduction

**Charles Fuchs, MD**  
Senior Vice President, Product Development Oncology  
Genentech, a Member of the Roche Group

Sponsor's Position on Maintaining the Accelerated Approval for Atezolizumab (Tecentriq®) in Combination with nab-Paclitaxel in PD-L1+ Metastatic Triple-Negative Breast Cancer

**Stephen Y. Chui, MD**  
Group Medical Director, Product Development Oncology  
Genentech

**FDA PRESENTATION**

Atezolizumab + Nab-Paclitaxel  
PDL-1 + Metastatic Triple Negative Breast Cancer  
(mTNBC)

**Laleh Amiri-Kordestani, MD**  
Director  
Division of Oncology 1 (DO1)  
OOD, OND, CDER, FDA

Clarifying Questions to Presenters

**BREAK**

**OPEN PUBLIC HEARING**

Questions to the Committee/Committee Discussion

**ADJOURNMENT**

**April 28, 2021 – Topic 1**

Call to Order

**Philip C. Hoffman, MD**  
Chairperson, ODAC

Introduction of Committee and Conflict of Interest  
Statement

**Joyce Yu, PharmD**  
Acting Designated Federal Officer, ODAC

FDA Introductory Comments on Accelerated Approval  
for Oncology Drug Products: Regulatory Overview

**Julia Beaver, MD**  
Chief of Medical Oncology, OCE  
Deputy Director (acting)  
OOD, OND, CDER, FDA

**APPLICANT PRESENTATIONS**

**Merck Sharp & Dohme Corp.**

KEYTRUDA in Urothelial Carcinoma

**Scot Ebbinghaus, MD**  
Vice President, Oncology Clinical Research  
Merck & Co., Inc.

Disease Background and Unmet Need

**Arjun Balar, MD**  
Associate Professor of Medicine  
Director, Genitourinary Medical Oncology Program  
Medical Director, Clinical Trials Office  
Laura and Isaac Perlmutter Cancer Center

Efficacy and Safety

**Peter Kang, MD**  
Vice President, Oncology Clinical Research  
Merck & Co., Inc.

Potential Options and Timing to Confirm the Benefit of  
Pembrolizumab and Fulfill the PMR

**Peter Kang, MD**

**FDA PRESENTATION**

Pembrolizumab  
1<sup>st</sup>-line Treatment of Cisplatin Ineligible Patients with  
Urothelial Cancer (UC)

**Laleh Amiri-Kordestani, MD**  
Director  
DO1, OOD, OND, CDER, FDA

Clarifying Questions to Presenters

April 27-29, 2021  
Oncologic Drugs Advisory Committee Meeting

**BREAK**

**OPEN PUBLIC HEARING**

Questions to the Committee/Committee Discussion

**LUNCH**

**April 28, 2021 – Topic 2**

Call to Order

**Philip C. Hoffman, MD**  
Chairperson, ODAC

Introduction of Committee and Conflict of Interest Statement

**Joyce Yu, PharmD**  
Acting Designated Federal Officer, ODAC

FDA Introductory Comments on Accelerated Approval for Oncology Drug Products: Regulatory Overview

**Julia Beaver, MD**  
Chief of Medical Oncology, OCE  
Deputy Director (acting)  
OOD, OND, CDER, FDA

**APPLICANT PRESENTATIONS**

**Genentech, Inc.**

Introduction

**Charles Fuchs, MD**  
Senior Vice President, Product Development Oncology  
Genentech, a Member of the Roche Group

Sponsor's Position on Maintaining the Accelerated Approval for Atezolizumab (Tecentriq®) in First Line Metastatic Urothelial Cancer

**Corey A. Carter, MD**  
Group Medical Director, Product Development Oncology  
Genentech

**FDA PRESENTATION**

Atezolizumab  
1<sup>st</sup>-line Treatment of Cisplatin Ineligible Patients with Urothelial Cancer (UC)

**Laleh Amiri-Kordestani, MD**  
Director  
DO1, OOD, OND, CDER, FDA

Clarifying Questions to Presenters

**BREAK**

**OPEN PUBLIC HEARING**

Questions to the Committee/Committee Discussion

**ADJOURNMENT**

**April 29, 2021 – Topic 1**

Call to Order

**Diane Reidy-Lagunes, MD**  
Acting Chairperson, ODAC

Introduction of Committee and Conflict of Interest Statement

**Takyiah Stevenson, PharmD**  
Acting Designated Federal Officer, ODAC

FDA Introductory Comments on Accelerated Approval  
for Oncology Drug Products: Regulatory Overview

**Julia Beaver, MD**  
Chief of Medical Oncology, OCE  
Deputy Director (acting)  
OOD, OND, CDER, FDA

**APPLICANT PRESENTATIONS**

**Merck Sharp & Dohme Corp.**

Introduction

**Nageatte Ibrahim, MD**  
Vice President, Oncology Clinical Research  
Merck & Co., Inc

Disease Background and Unmet Need in Gastric Cancer

**Peter Enzinger, MD**  
Associate Professor of Medicine  
Harvard Medical School and Dana-Farber Cancer  
Institute

Efficacy, Safety and Proposed Confirmatory Studies of  
Pembrolizumab in Gastric Cancer

**Pooja Bhagia, MD**  
Clinical Development Lead – GI Cancers  
Oncology Clinical Research  
Merck & Co., Inc

Concluding Remarks

**Nageatte Ibrahim, MD**

**FDA PRESENTATION**

Pembrolizumab  
Gastric/Gastroesophageal Junction (GEJ) Adenocarcinoma  
(PD-L1 CPS  $\geq$  1)

**Steven Lemery, MD, MHS**  
Acting Director  
Division of Oncology 3 (DO3)  
OOD, OND, CDER, FDA

Clarifying Questions to Presenters

**BREAK**

**OPEN PUBLIC HEARING**

Questions to the Committee/Committee Discussion

**LUNCH**

**April 29, 2021 – Topic 2**

Call to Order

**Philip C. Hoffman, MD**  
Chairperson, ODAC

Introduction of Committee and Conflict of Interest  
Statement

**Takyiah Stevenson, PharmD**  
Acting Designated Federal Officer, ODAC

FDA Introductory Comments on Accelerated Approval  
for Oncology Drug Products: Regulatory Overview

**Julia Beaver, MD**  
Chief of Medical Oncology, OCE  
Deputy Director (acting)  
OOD, OND, CDER, FDA

**APPLICANT PRESENTATIONS**

Introduction

**Merck Sharp & Dohme Corp.**

**Scot Ebbinghaus, MD**  
Vice President, Oncology Clinical Research  
Merck & Co., Inc.

Efficacy and Safety of Pembrolizumab in 2L HCC

**Abby Siegel, MD**  
Associate Vice President, Oncology Clinical  
Research  
Merck & Co., Inc

Clinical Perspectives

**Richard Finn, MD**  
Professor of Medicine, Geffen School of Medicine at  
UCLA in the Department of Medicine, Division of  
Hematology/Oncology

Conclusions

**Scot Ebbinghaus, MD**

**FDA PRESENTATION**

Pembrolizumab Hepatocellular Carcinoma (HCC)

**Steven Lemery, MD, MHS**  
Acting Director  
DO3, OOD, OND, CDER, FDA

Clarifying Questions to Presenters

**BREAK**

**OPEN PUBLIC HEARING**

Questions to the Committee/Committee Discussion

**BREAK**

**April 29, 2021 – Topic 3**

Call to Order

**Philip C. Hoffman, MD**  
Chairperson, ODAC

Introduction of Committee and Conflict of Interest  
Statement

**Takyiah Stevenson, PharmD**  
Acting Designated Federal Officer, ODAC

FDA Introductory Comments on Accelerated Approval  
for Oncology Drug Products: Regulatory Overview

**Julia Beaver, MD**  
Chief of Medical Oncology, OCE  
Deputy Director (acting)  
OOD, OND, CDER, FDA

**APPLICANT PRESENTATIONS**

**Bristol-Myers Squibb Company**

Nivolumab (Opdivo®) Introduction

**Mathias Hukkelhoven, PhD**  
Senior Vice President, Global Regulatory and Safety  
Sciences  
Bristol Myers Squibb



**APPLICANT PRESENTATIONS (CONT.)**

Unmet Need in HCC

**Thomas Abrams, MD**  
Assistant Professor of Medicine  
Harvard Medical School  
Dana Farber Cancer Institute

Efficacy & Safety  
CheckMate-040 and -459

**Ashwin Sama, MD**  
Clinical Development Lead, HCC  
Bristol Myers Squibb

Nivolumab HCC Clinical Perspective

**Ian Waxman, MD**  
Vice President, GI Development Team Lead  
Bristol Myers Squibb

Nivolumab HCC Clinical Development Program

**Anthony El-Khoueiry, MD**  
Associate Professor of Clinical Medicine  
Keck School of Medicine  
CISO Chair, USC Norris Comprehensive Cancer  
Center  
University of Southern California

**FDA PRESENTATION**

Nivolumab Hepatocellular Carcinoma (HCC)

**Steven Lemery, MD, MHS**  
Acting Director  
DO3, OOD, OND, CDER, FDA

Clarifying Questions to Presenters

**BREAK**

**OPEN PUBLIC HEARING**

Questions to the Committee/Committee Discussion

**ADJOURNMENT**

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***Questions to the Committee:***

**April 27, 2021**

1. **VOTE:** Should the indication for the atezolizumab in combination with nab-paclitaxel for the treatment of adult patients with unresectable locally advanced or metastatic TNBC whose tumors are PDL-1+ be maintained on the market while additional trial(s) are conducted or completed?
  - a. If your answer is “yes”, please discuss after the vote, what ongoing or alternative trials may serve to confirm clinical benefit.

**Vote Result:      Yes: 7                  No: 2                  Abstain: 0**

**Committee Discussion:** A majority of members voted in favor of maintaining the indication for atezolizumab in combination with nab-paclitaxel for the treatment of unresectable locally advanced or metastatic TNBC. Several members were in agreement that conducting a randomized trial of nab-paclitaxel vs. nab-paclitaxel plus atezolizumab in the PDL-1+ setting would be the only trial to confirm the indication; however, it was noted that such a trial comes with logistical challenges. The committee members who voted in favor of maintaining the indication cited the overall survival (OS) benefit observed in IMpassion130 as their reason for supporting the indication, despite not being statistically significant. A few members considered whether IMpassion132 would be sufficient to confirm benefit. One member who voted “Yes” to maintain the indication commented that if benefit cannot be confirmed, then the indication should be withdrawn without further presentation to an ODAC meeting. A member who voted against maintaining the indication was uncertain if the selection of PFS as a primary endpoint in IMpassion131 would translate into meaningful clinical benefit. Another member also cited the negative survival result from IMpassion131 as their reason for voting against maintaining the indication. Please see the transcript for details of the Committee’s discussion.

### **April 28, 2021 – Topic 1**

1. **VOTE:** Should the indication for pembrolizumab for the first-line treatment of cisplatin-ineligible and carboplatin-ineligible patients with advanced/metastatic urothelial carcinoma be maintained pending conduct or completion of additional trial(s)?
  - a. If your answer is “yes”, please discuss after the vote, what trials may serve to confirm clinical benefit including KN-045.

**Vote Result:      Yes: 5              No: 3              Abstain: 0**

**Committee Discussion:** A slight majority of members voted in favor to maintain the indication for pembrolizumab for the first-line treatment of cisplatin-ineligible advanced/metastatic urothelial carcinoma, although several members noted that they would prefer the indication to include only patients who are unable to receive platinum-containing chemotherapy rather than patients who may receive carboplatin-based chemotherapy. Several members mentioned that single arm data from the pembrolizumab monotherapy arm of LEAP-011, though not ideal, may be the best option for an alternative confirmatory trial because it is in the same disease setting. Members who voted against maintaining the indication cited the negative results of the confirmatory trial KN-361. Overall, members agreed that there are few other options for patients who are unable to receive platinum-containing chemotherapy. Please see the transcript for details of the Committee’s discussion.

### **April 28, 2021 – Topic 2**

1. **VOTE:** Should the indication for atezolizumab for the first-line treatment of cisplatin-ineligible patients with advanced/metastatic urothelial carcinoma be maintained pending final OS results from IMvigor130?

**Vote Result:      Yes: 10          No: 1          Abstain: 0**

**Committee Discussion:** A majority of members voted in favor of maintaining the indication for atezolizumab for the first-line treatment of cisplatin-ineligible patients with advanced/metastatic urothelial carcinoma pending final OS results from IMvigor130. These committee members believed the IMvigor130 interim analyses show a promising OS benefit. The member who voted against maintaining the indication expressed concern that while IMvigor130 showed statistical significance for PFS, there may not be a demonstrated clinically meaningful improvement. In general, members agreed that continued approval should be contingent upon results of the final analysis of IMvigor130. Please see the transcript for details of the Committee's discussion.

### **April 29, 2021 – Topic 1**

1. **VOTE:** Should the indication for the monotherapy use of pembrolizumab in PD-L1 CPS  $\geq$  1 gastric/GEJ adenocarcinoma (third-line or greater) be maintained pending conduct or completion of additional trials?

**Vote Result:      Yes: 2          No: 6          Abstain: 0**

**Committee Discussion:** A majority of members voted against maintaining the indication for pembrolizumab in PD-L1 CPS  $\geq$  1 gastric/GEJ adenocarcinoma (third-line or greater) pending conduct or completion of additional trials. The committee members acknowledged the unmet needs of patients in the third-line or greater setting; however, the committee members raised concerns over the data in the KN-061 and KN-062 trials that did not demonstrate benefit when pembrolizumab was compared to chemotherapy. The Committee also cited that the treatment landscape has changed with the recent approval of first-line use of a PD-1 inhibitor (nivolumab) combined with chemotherapy for advanced/metastatic gastric/GEJ carcinoma, based on an improvement in overall survival. To try to minimize adversely affecting patients, some committee members suggested that FDA consider delaying withdrawal of the approval for 6 to 12 months or to consider other mechanisms to facilitate access (e.g., expanded access). Please see the transcript for details of the Committee's discussion.

### **April 29, 2021 – Topic 2**

1. **VOTE:** Should the indication for the monotherapy use of pembrolizumab in patients previously treated with sorafenib be maintained pending conduct or completion of additional trials?

**Vote Result:      Yes: 8          No: 0          Abstain: 0**

**Committee Discussion:** The members voted unanimously for maintaining the indication for the monotherapy use of pembrolizumab in patients previously treated with sorafenib pending conduct or completion of additional trials. Specifically, the committee members considered that although KN-240 did not demonstrate benefit when pembrolizumab was compared to

*placebo, the Accelerated Approval (AA) should be maintained pending the results of KN-394. Please see the transcript for details of the Committee's discussion.*

**April 29, 2021 – Topic 3**

1. **VOTE:** Should the indication for the monotherapy use of nivolumab in patients previously treated with sorafenib be maintained pending conduct or completion of additional trial(s)?

**Vote Result:      Yes: 4              No: 5              Abstain: 0**

***Committee Discussion:** A slight majority of members voted against maintaining the indication for the monotherapy use of nivolumab in patients previously treated with sorafenib pending conduct or completion of additional trial(s). Nearly all the committee members stated this was a difficult vote due to being conflicted over the unmet need in this patient population vs the lack of confirmatory data of the CheckMate-459 trial. Those committee members who voted “Yes” mirrored concerns over the unmet need for 15 to 20% of patients with HCC who are not eligible to receive the atezolizumab/bevacizumab combination due to the increased risk of bleeding associated with bevacizumab. Several members who voted “No” stated that the data from CheckMate-459 did not prove statistical or clinical benefit. A few members mentioned that the additional confirmatory trials being conducted do not address the “risk-benefit calculus” of monotherapy with nivolumab in the second line setting. Two members were specifically concerned that the timing of the completion of these additional trials, which are due to take a few more years, do not warrant continued AA of this indication. Please see the transcript for details of the Committee's discussion.*

The meeting was adjourned at approximately 5:19 p.m. on April 27, 2021, at approximately 3:12 p.m. on April 28, 2021, and at approximately 6:09 p.m. on April 29, 2021.