

VIA UNITED PARCEL SERVICE AND E-MAIL

Aerpio Therapeutics
Attention: Barbara Withers
9987 Carver Road
Cincinnati, Ohio 45242

Re: Submission of Clinical Trial Results Information Pursuant to 42 U.S.C. 282(j)
FDA Reference Number: CDER-2022-117
NCT03197870, NCT04405245, and NCT04511650

Dear Ms. Withers:

Based on an initial review of Food and Drug Administration (FDA) records, information from the ClinicalTrials.gov data bank operated by the National Library of Medicine (a part of the National Institutes of Health), and any available public information, it appears that Aerpio Therapeutics is the “responsible party”¹ for the above-identified clinical trials, which appear to be “applicable clinical trials”² subject to the requirements of section 801 of the Food and Drug Administration Amendments Act of 2007, including its implementing regulations in 42 CFR part 11. A responsible party for an applicable clinical trial is required to submit to the ClinicalTrials.gov data bank certain results information for the clinical trial; such results information generally must be submitted no later than one year after the primary completion date³ of the applicable clinical trial, unless the responsible party has submitted a timely certification of delay, a request for an extension for good cause, or a request for a waiver of the requirements for submission of results information.⁴

¹ See section 402(j)(1)(A)(ix) of the Public Health Service Act (PHS Act) (42 U.S.C. 282(j)(1)(A)(ix)) and 42 CFR 11.10 for the definition of “responsible party.”

² See section 402(j)(1)(A)(i)-(iii) of the PHS Act (42 U.S.C. 282(j)(1)(A)(i)-(iii)) and 42 CFR 11.10 for the definition of “applicable clinical trial.”

³ See 42 CFR 11.10 for the definition of “primary completion date.” See also section 402(j)(1)(A)(v) of the PHS Act (42 U.S.C. 282(j)(1)(A)(v)), which defines “completion date.” As reflected in 42 CFR 11.10, the terms “primary completion date” and “completion date” are synonymous for the purposes of 42 CFR part 11.

⁴ See section 402(j)(3)(E) and (H) of the PHS Act (42 U.S.C. 282(j)(3)(E) and (H)) and 42 CFR part 11, subpart C for results information submission requirements.

FDA has identified potential noncompliance related to each of the clinical trials identified below:

- AKB-9778-CI-5001, “Phase 2 Double-Masked, Placebo-Controlled Study to Assess the Safety and Efficacy of Subcutaneously Administered AKB-9778 15mg Once Daily or 15mg Twice Daily for 12 Months in Patients With Moderate to Severe Non-Proliferative Diabetic Retinopathy,” evaluating the safety and efficacy of AKB-9778 in subjects with moderate to severe non-proliferative diabetic retinopathy
- AKB-9778-CI-OS-2001, “Phase 2 Multi-Center, Double-Masked, Randomized, 28-Day Study to Assess the Efficacy, Safety and Tolerability of Single or Twice Daily Doses of AKB-9778 Ophthalmic Solution as an Adjunct to Latanoprost in Patients With Ocular Hypertension (OHT) or Open Angle Glaucoma (OAG),” assessing the safety, tolerability, and ocular hypotensive efficacy of AKB-9778 Ophthalmic Solution as an adjunctive therapy to latanoprost ophthalmic solution in subjects with elevated intraocular pressure (IOP) due to OHT or OAG
- AKB-9778-CI-6001, “A Phase 2, Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, Multicenter, Dose Escalation and Proof-of-Concept Study to Evaluate the Safety and Efficacy of Razuprotafib in Hospitalized Subjects With Moderate to Severe Coronavirus Disease 2019 (COVID-19) (RESCUE Study),” a dose escalation and proof-of-concept study evaluating the safety and efficacy of razuprotafib administered subcutaneously three times daily (TID) in hospitalized subjects with moderate to severe COVID-19

It appears that results information for the referenced applicable clinical trials has not been submitted to the ClinicalTrials.gov data bank. Your company should review its records of these clinical trials and determine whether your company submitted all required results information. If your company determines that results information is required and due for these clinical trials, please submit the results information promptly.

Failure to submit clinical trial information⁵ required under section 402(j) of the Public Health Service Act (PHS Act) (42 U.S.C. 282(j)), including information required under the regulations found in 42 CFR part 11, is a prohibited act under section 301(jj)(2) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 331(jj)(2)). Beginning 30 calendar days after you

⁵ See section 402(j)(1)(A)(iv) of the PHS Act (42 U.S.C. 282(j)(1)(A)(iv)) and 42 CFR 11.10 for the definition of “clinical trial information.”

receive this letter, FDA intends to further review and assess the above-identified clinical trials. If FDA determines that your company has failed to submit any clinical trial information required under section 402(j) of the PHS Act (42 U.S.C. 282(j)), including its implementing regulations in 42 CFR part 11, your company may receive from FDA a Notice of Noncompliance,⁶ and FDA may thereafter initiate an administrative action seeking a civil money penalty.⁷ In addition to civil money penalties, violations of section 301(jj) of the FD&C Act (21 U.S.C. 331(jj)) could result in other regulatory action, such as injunction and/or criminal prosecution.

As requested, please review your company's clinical trial records and submit any required results information to the ClinicalTrials.gov data bank. You can access the ClinicalTrials.gov website at <https://register.clinicaltrials.gov>. If you have any questions about this letter, you may call Miah Jung, Pharm.D., M.S., at (240) 402-3728. Please have the FDA reference number provided at the top of this letter available when you call. Alternatively, you may e-mail FDA at CDER-OSI-Advisory@fda.hhs.gov. Please include the FDA reference number with any e-mail communications.

We request that you submit a written response to FDA within 30 calendar days after you receive this letter, stating the actions you have taken in response to this letter. If you believe that your company has complied with applicable requirements, please provide us with your reasoning and include any supporting information for our consideration.

⁶ See section 402(j)(5)(C)(ii) of the PHS Act (42 U.S.C. 282(j)(5)(C)(ii)).

⁷ Pursuant to section 303(f)(3)(A) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 333(f)(3)(A)), "[a]ny person who violates section 301(jj) [of the FD&C Act (21 U.S.C. 331(jj))] shall be subject to a civil monetary penalty of not more than \$10,000 for all violations adjudicated in a single proceeding." Moreover, section 303(f)(3)(B) of the FD&C Act (21 U.S.C. 333(f)(3)(B)) provides that "[i]f a violation of section 301(jj) [of the FD&C Act (21 U.S.C. 331(jj))] is not corrected within the 30-day period following notification under section 402(j)(5)(C)(ii) [of the PHS Act (42 U.S.C. 282(j)(5)(C)(ii))], the person shall, in addition to any penalty under subparagraph (A), be subject to a civil monetary penalty of not more than \$10,000 for each day of the violation after such period until the violation is corrected." These civil money penalty amounts reflect the amounts found in the statute. These amounts are updated annually to reflect inflation, as required by the Federal Civil Penalties Inflation Adjustment Act of 1990 (Pub. L. No. 101-410, 104 Stat. 890 (1990)) (codified as amended at 28 U.S.C. 2461, note 2(a)), as amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015 (Sec. 701 of the Bipartisan Budget Act of 2015, Pub. L. No. 114-74, November 2, 2015). For the most up-to-date amounts, please see 45 CFR 102.3.

Please direct your response to the address below and include the FDA reference number in all correspondence relating to this matter.

Miah Jung, Pharm.D., M.S.
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Office of Compliance
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Sincerely yours,

{See appended electronic signature page}

Laurie Muldowney, M.D.
Deputy Director
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Cc: John Weet, Ph.D., Senior Vice President, Regulatory Affairs
EyePoint Pharmaceuticals, Inc.

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/s/

LAURIE B MULDOWNEY
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