

Food and Drug Administration Silver Spring MD 20993

BLA 761041

BLA APPROVAL

Genentech, Inc. Attention: Nitzan Sternheim, PhD Regulatory Program Management 1 DNA Way, MS# 241 South San Francisco, CA 94080-4990

Dear Dr. Sternheim:

Please refer to your Biologics License Application (BLA) dated February 19, 2016, received February 19, 2016, and your amendments, submitted under section 351 of the Public Health Service Act for Tecentriq[®] (atezolizumab) Injection, 1200 mg/20 mL.

LICENSING

We have approved your BLA for Tecentriq[®] (atezolizumab) effective this date. You are hereby authorized to introduce or deliver for introduction into interstate commerce, Tecentriq[®] (atezolizumab) under your existing Department of Health and Human Services U.S. License No. 1048. Tecentriq[®] is indicated for patients with metastatic non-small cell lung cancer who have disease progression during or following platinum-containing chemotherapy. Patients with EGFR or ALK genomic tumor aberrations should have disease progression on FDA-approved therapy for these aberrations prior to receiving Tecentriq[®].

MANUFACTURING LOCATIONS

Under this license, you are approved to manufacture atezolizumab drug substance at the

The final formulated product will be manufactured and filled at formulated product will be labeled and packaged at Genentech, Inc. in Hillsboro, Oregon and F. Hoffmann-La Roche Ltd in Kaiseraugst, Switzerland. You may label your product with the proprietary name Tecentriq and will market it in 1200 mg/20 mL Injection in single-dose vials.

DATING PERIOD

The dating period for Tecentriq shall be 24 months from the date of manufacture when stored at 2-8° C. The date of manufacture shall be defined as the date of final sterile filtration of the formulated drug product. The dating period for your drug substance shall be months from the date of manufacture when stored at of C.

FDA LOT RELEASE

You are not currently required to submit samples of future lots of Tecentriq to the Center for Drug Evaluation and Research (CDER) for release by the Director, CDER, under 21 CFR 610.2. We will continue to monitor compliance with 21 CFR 610.1, requiring completion of tests for conformity with standards applicable to each product prior to release of each lot.

Any changes in the manufacturing, testing, packaging, or labeling of Tecentriq, or in the manufacturing facilities, will require the submission of information to your biologics license application for our review and written approval, consistent with 21 CFR 601.12.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling text.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit, via the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 601.14(b)] in structured product labeling (SPL) format, as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. Content of labeling must be identical to the enclosed labeling (text for the package insert and Medication Guide). Information on submitting SPL files using eLIST may be found in the guidance for industry titled "SPL Standard for Content of Labeling Technical Qs and As" at http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible via publicly available labeling repositories.

In addition, within 14 days of the date of this letter, amend any pending supplement that includes labeling changes for BLA 761034 with content of labeling in SPL format to include the changes approved in this supplement.

CARTON AND IMMEDIATE CONTAINER LABELS

We acknowledge your July 8, 2016, submission containing final printed carton and container labels.

ADVISORY COMMITTEE

Your application for Tecentriq[®] (atezolizumab) was not referred to an FDA advisory committee because the application did not raise significant safety or efficacy issues that were unexpected for a biologic of this class.

REQUIRED PEDIATRIC ASSESSMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric study requirement for this application because necessary studies are impossible or highly impracticable because non-small cell lung cancer is rare in the pediatric population.

POSTMARKETING REQUIREMENTS UNDER 505(o)

Section 505(o)(3) of the Federal Food, Drug, and Cosmetic Act (FDCA) authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to assess a known serious risk of immune-mediated adverse reactions, including immune-mediated pneumonitis.

Furthermore, the new pharmacovigilance system that FDA is required to establish under section 505(k)(3) of the FDCA will not be sufficient to assess this serious risk.

Finally, we have determined that only a clinical trial (rather than a nonclinical or observational study) will be sufficient to assess a known serious risk of immune-mediated adverse reactions, including immune-mediated pneumonitis.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following:

Conduct a randomized trial that will characterize the incidence, severity and response to treatment of Tecentriq[®] induced immune-mediated adverse reactions, including immune-mediated pneumonitis.

The timetable you submitted on October 5, 2016, states that you will conduct this trial according to the following schedule:

Final Report Submission: 03/2017

Submit the protocol(s) to your IND 117296, with a cross-reference letter to BLA 761034. Submit all final report(s) to your BLA 761034. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate: "Required Postmarketing Protocol Under 505(o)," "Required Postmarketing Final Report Under 505(o)," "Required Postmarketing Correspondence Under 505(o)."

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR 601.70 requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 601.70 to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 601.70. We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

<u>POSTMARKETING COMMITMENTS SUBJECT TO THE REPORTING</u> REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitments:

Submit the final report and datasets for clinical trial entitled "A Phase III, Open-Label, Multicenter, Randomized Study to Investigate the Efficacy and Safety of Atezolizumab (Anti-PD-L1 Antibody) Compared with Docetaxel in Patients with Non-Small Cell Lung Cancer after Failure with Platinum-Containing Chemotherapy" [OAK (GO28915)].

The timetable you submitted on October 5, 2016, states that you will conduct this study according to the following schedule:

Final Report Submission: 03/2017

Submit clinical protocols to your IND 117296 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to BLA 761034. In addition, under 21 CFR 601.70 you should include a status summary of each commitment in your annual progress report of postmarketing studies to BLA 761034. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled "Postmarketing Commitment Protocol," "Postmarketing Commitment Final Report," or "Postmarketing Commitment Correspondence."

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the package insert to:

Food and Drug Administration Center for Drug Evaluation and Research Office of Prescription Drug Promotion 5901-B Ammendale Road Beltsville, MD 20705-1266

As required under 21 CFR 601.12(f)(4), you must submit final promotional materials, and the package insert, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at

http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf.
Information and Instructions for completing the form can be found at http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm.

REPORTING REQUIREMENTS

You must submit adverse experience reports under the adverse experience reporting requirements for licensed biological products (21 CFR 600.80). You should submit postmarketing adverse experience reports to:

Food and Drug Administration Center for Drug Evaluation and Research Central Document Room 5901-B Ammendale Road Beltsville, MD 20705-1266

Prominently identify all adverse experience reports as described in 21 CFR 600.80.

You must submit distribution reports under the distribution reporting requirements for licensed biological products (21 CFR 600.81).

You must submit reports of biological product deviations under 21 CFR 600.14. You should promptly identify and investigate all manufacturing deviations, including those associated with processing, testing, packing, labeling, storage, holding and distribution. If the deviation involves a distributed product, may affect the safety, purity, or potency of the product, and meets the other criteria in the regulation, you must submit a report on Form FDA-3486 to:

Food and Drug Administration Center for Drug Evaluation and Research Division of Compliance Risk Management and Surveillance 5901-B Ammendale Road Beltsville, MD 20705-1266

Biological product deviations, sent by courier or overnight mail, should be addressed to:

Food and Drug Administration Center for Drug Evaluation and Research Division of Compliance Risk Management and Surveillance 10903 New Hampshire Avenue, Bldg. 51, Room 4206 Silver Spring, MD 20903

We have now administratively closed this BLA. Therefore, all 15-day alert reports, periodic (including quarterly) adverse drug experience reports, field alerts, annual reports, supplements, promotional materials and other submissions should be addressed to the original **BLA 761034** for this drug product, not to this BLA. In the future, do not make submissions to this BLA except for the final printed labeling requested above.

MEDWATCH-TO-MANUFACTURER PROGRAM

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm.

POST APPROVAL FEEDBACK MEETING

New molecular entities and new biologics qualify for a post approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application.

PDUFA V APPLICANT INTERVIEW

FDA has contracted with Eastern Research Group, Inc. (ERG) to conduct an independent interim and final assessment of the Program for Enhanced Review Transparency and Communication for NME NDAs and Original BLAs under PDUFA V ('the Program'). The PDUFA V Commitment Letter states that these assessments will include interviews with applicants following FDA action on applications reviewed in the Program. For this purpose, first-cycle actions include approvals, complete responses, and withdrawals after filing. The purpose of the interview is to better understand applicant experiences with the Program and its ability to improve transparency and communication during FDA review.

ERG will contact you to schedule a PDUFA V applicant interview and provide specifics about the interview process. Your responses during the interview will be confidential with respect to the FDA review team. ERG has signed a non-disclosure agreement and will not disclose any identifying information to anyone outside their project team. They will report only anonymized results and findings in the interim and final assessments. Members of the FDA review team will be interviewed by ERG separately. While your participation in the interview is voluntary, your feedback will be helpful to these assessments.

FDA BENEFIT-RISK FRAMEWORK APPLICANT INTERVIEW

FDA has also contracted with Eastern Research Group, Inc. (ERG) to conduct an assessment of FDA's initial phase implementation of the Benefit-Risk Framework (BRF) in human drug review. A key element of this evaluation includes interviews with applicants following FDA approval of New Molecular Entity (NME) New Drug Applications (NDAs) and original Biologic License Applications (BLAs). The purpose of the interview is to assess the extent to which the BRF provides applicants with a clear understanding of the reasoning behind FDA's regulatory decisions for NME NDAs and original BLAs.

ERG will contact you to schedule a BRF applicant interview and provide specifics about the interview process. Your responses during the interview will be confidential with respect to the FDA review team. ERG has signed a non-disclosure agreement and will not disclose any identifying information to anyone outside their project team. They will report only anonymized results and findings in the interim and final reports. Members of the FDA review team will be interviewed by ERG separately. While your participation in the interview is voluntary, your feedback will be helpful to this evaluation.

If you have any questions, call Sakar Wahby, Regulatory Project Manager, at (240) 402-5364.

Sincerely,

{See appended electronic signature page}

Geoffrey Kim, MD Director Division of Oncology Products 1 Office of Hematology and Oncology Products Center for Drug Evaluation and Research

ENCLOSURE(S):

Content of Labeling
Carton and Container Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.
/s/
GEOFFREY S KIM 10/18/2016