



NDA 217379

COMPLETE RESPONSE

Nanocopoeia, LLC
Attention: Jennifer Pilate
Director, Regulatory Affairs
639 Campus Drive
New Brighton, MN 55112

Dear Jennifer Pilate:

Please refer to your new drug application (NDA) (b) (4)
(b) (4) for (b) (4) (nilotinib) orally disintegrating
tablets.

We also acknowledge receipt of your amendment dated (b) (4), which was not reviewed for this action. You may incorporate applicable sections of the amendment by specific reference as part of your response to the deficiencies cited in this letter.

We have completed our review of this application, as amended, and have determined that we cannot approve this application in its present form. We have described our reasons for this action below and, where possible, our recommendations to address these issues.

CLINICAL PHARMACOLOGY

- (1) The results from the pivotal BE study, NC9015-001, failed to demonstrate BE between your proposed nilotinib ODT 80 mg and your relied-upon listed drug (LD), Tasigna 200 mg, due to a 34% higher geometric mean C_{max} with nilotinib ODT following a single dose administration under fasted conditions. In addition, two healthy subjects in the BE study experienced QT prolongation after taking nilotinib ODT but none of the healthy subjects experienced QT prolongation when administered the LD. Given the known QT prolongation risk due to higher nilotinib C_{max}, there are safety concerns with the higher C_{max} of nilotinib ODT compared to the LD. The clinical pharmacology information submitted in this NDA is inadequate to characterize the QT prolongation risk associated with nilotinib ODT. You should conduct a study that supports the BE of your proposed nilotinib ODT compared to the LD and adequately characterize the QT prolongation potential of the nilotinib ODT to address safety concerns.

PRESCRIBING INFORMATION

- (2) We reserve comment on the proposed labeling until the application is otherwise adequate. We encourage you to review the labeling review resources on the Prescription Drug Labeling Resources¹ and Pregnancy and Lactation Labeling Final Rule² websites, including regulations and related guidance documents and the Selected Requirements for Prescribing Information (SRPI) – a checklist of important format items from labeling regulations and guidances.

If you revise labeling, use the SRPI checklist to ensure that the Prescribing Information conforms with format items in regulations and guidances. Your response must include updated content of labeling [21 CFR 314.50(l)(1)(i)] in structured product labeling (SPL) format as described at FDA.gov.³

CARTON AND CONTAINER LABELING

- (3) We reserve comment on the proposed labeling until the application is otherwise adequate.

MEDICATION GUIDE

- (4) Add the following bolded statement or appropriate alternative to the carton and container labeling per 21 CFR 208.24(d): **"ATTENTION PHARMACIST: Each patient is required to receive the enclosed Medication Guide."**

PROPRIETARY NAME

- (5) Please refer to correspondence dated, (b) (4), which addresses the proposed proprietary name, (b) (4). This name was found conditionally acceptable pending approval of the application in the current review cycle. Please resubmit the proposed proprietary name when you respond to all of the application deficiencies that have been identified in this letter.

FACILITY INSPECTIONS

- (6) Following a pre-approval inspection of (b) (4), listed in this application, FDA conveyed deficiencies to the representative of the facility. The facility should provide satisfactory responses to these deficiencies indicated on the FDA 483 to the FDA office prior to your complete response to your application. Your complete response should include

¹ <https://www.fda.gov/drugs/laws-acts-and-rules/prescription-drug-labeling-resources>

² <https://www.fda.gov/drugs/labeling-information-drug-products/pregnancy-and-lactation-labeling-drugs-final-rule>

³ <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

the dates of the facility's response to the FDA Form 483. The assessment of application approvability and the resolution of inspection deficiencies would be evaluated upon receipt of the complete response and may include re-inspection of the facility. Please work with the facility in resolving the related deficiencies.

SAFETY UPDATE

When you respond to the above deficiencies, include a safety update as described at 21 CFR 314.50(d)(5)(vi)(b). The safety update should include data from all nonclinical and clinical studies/trials of the drug under consideration regardless of indication, dosage form, or dose level.

- (1) Describe in detail any significant changes or findings in the safety profile.
- (2) When assembling the sections describing discontinuations due to adverse events, serious adverse events, and common adverse events, incorporate new safety data as follows:
 - Present new safety data from the studies/clinical trials for the proposed indication using the same format as in the original submission.
 - Present tabulations of the new safety data combined with the original application data.
 - Include tables that compare frequencies of adverse events in the original application with the retabulated frequencies described in the bullet above.
 - For indications other than the proposed indication, provide separate tables for the frequencies of adverse events occurring in clinical trials.
- (3) Present a retabulation of the reasons for premature trial discontinuation by incorporating the drop-outs from the newly completed trials. Describe any new trends or patterns identified.
- (4) Provide case report forms and narrative summaries for each subject who died during a clinical trial or who did not complete a trial because of an adverse event. In addition, provide narrative summaries for serious adverse events.
- (5) Describe any information that suggests a substantial change in the incidence of common, but less serious, adverse events between the new data and the original application data.
- (6) Provide updated exposure information for the clinical studies/trials (e.g., number of subjects, person time).

(7) Provide a summary of worldwide experience on the safety of this drug. Include an updated estimate of use for drug marketed in other countries.

(8) Provide English translations of current approved foreign labeling not previously submitted.

OTHER

Within one year after the date of this letter, you are required to resubmit or take other actions available under 21 CFR 314.110. If you do not take one of these actions, we may consider your lack of response a request to withdraw the application under 21 CFR 314.65. You may also request an extension of time in which to resubmit the application.

A resubmission must fully address all the deficiencies listed in this letter and should be clearly marked with "**RESUBMISSION**" in large font, bolded type at the beginning of the cover letter of the submission. The cover letter should clearly state that you consider this resubmission a complete response to the deficiencies outlined in this letter. A partial response to this letter will not be processed as a resubmission and will not start a new review cycle.

You may request a meeting or teleconference with us to discuss what steps you need to take before the application may be approved. If you wish to have such a meeting, submit your meeting request as described in the draft guidance for industry *Formal Meetings Between the FDA and Sponsors or Applicants of PDUFA Products*.

The product may not be legally marketed until you have been notified in writing that this application is approved.

If you have any questions, call

(b) (4)

Sincerely,

{See appended electronic signature page}

(b) (4)

Center for Drug Evaluation and Research

This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

(b) (4)

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