DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration
Silver Spring MD 20993

NDA 202834/S-005

SUPPLEMENT APPROVAL

Eisai Inc.
Attention: Heather Bradley, MPH
Director, Global Regulatory Affairs
155 Tice Boulevard
Woodcliff Lake, NJ 07677

Dear Ms. Bradley:

Please refer to your Supplemental New Drug Application (sNDA) dated August 19, 2014, received August 19, 2014, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for FYCOMPA (perampanel) Tablets 2mg, 4mg, 6mg, 8mg, 10mg, 12mg.

We acknowledge receipt of your amendments dated September 5, 2014; September 15, 2014(2); September 19, 2014; October 10, 2014; October 13, 2014; November 17, 2014; December 5, 2014; December 22, 2014; January 7, 2015; January 14, 2015; January 23, 2015; January 30, 2015; March 2, 2015; March 11, 2015; March 19, 2015; and April 24, 2015.

This "Prior Approval" supplemental new drug application proposes a new indication of adjunctive therapy for the treatment of primary generalized tonic-clonic (PGTC) seizures in patients with epilepsy 12 years of age and older.

APPROVAL & LABELING

We have completed our review of this supplemental application. 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 the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), 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), with the addition of any labeling changes in pending "Changes Being Effected" (CBE) supplements, as well as annual reportable changes not included in the enclosed labeling.

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/DrugsGuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible from publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that includes labeling changes for this NDA, including CBE supplements for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 314.50(l)(1)(i)] in MS Word format, that includes the changes approved in this supplemental application, as well as annual reportable changes and annotate each change. To facilitate review of your submission, provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

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 studies requirement for: (A) PGTC (not neonatal) seizures from birth to 1 month of age; and (B) PGTC seizures from older than 1 month to less than 24 months of age because necessary studies are impossible or highly impracticable. This is because PGTC seizures do not exist in pediatric age group (A) and PGTC seizures are extremely rare in pediatric age group (B).

We are deferring submission of your pediatric studies for patients with PGTC seizures from 2 years of age to less than 12 years of age for this application because this product is ready for approval for use in adults and the pediatric studies have not been completed.

Your deferred pediatric studies required by section 505B(a) of the FDCA are required postmarketing studies. The status of these postmarketing studies must be reported annually according to 21 CFR 314.81 and section 505B(a)(3)(B) of the FDCA. These required studies are listed below.

2922-1 Conduct a multiple-dose pharmacokinetic (PK) and tolerability study to explore the range of tolerated doses of Fycompa in patients from 2 to less than 12 years old with epilepsy. A sufficient proportion of subjects must be on background therapy that includes enzyme-inducing AEDs, such as carbamazepine, oxcarbazepine, or phenytoin, which are known to induce perampanel metabolism and decrease its plasma concentrations. PK data will be obtained using a sparse sampling approach. Sufficient PK and tolerability data must be generated from this study before conducting the efficacy and safety study, to inform the dose selection for that study. Sampling must be optimized to ensure adequate characterization of perampanel PK. Using information

from the PK study, conduct an adequately powered, controlled, and blinded trial that examines the efficacy and safety of Fycompa in the treatment of primary generalized tonic-clonic (PGTC) seizures in a pediatric population. Because PGTC seizures are less common in this age group, the study population may include the full range of pediatric patients (e.g., patients less than 17 years old). This study must include a minimum of 60% of patients that are 2 to 12 years of age. Information from the PK/tolerability part of this postmarketing requirement, and its resulting protocol-specified dosing, should be provided to the Division prior to the initiation of the efficacy trial, and agreements on dosing should be reached with the Division before the efficacy trial is initiated.

Final Protocol Submission (PK and tolerability study):	**11/2011**
Study Completion (PK and tolerability study):	**05/2015**
Final Report Submission (PK and tolerability study):	**06/2016**
Final Protocol Submission (Efficacy and safety study):	**09/2016**
Study Completion (Efficacy and safety study):	**09/2020**
Final Report Submission (Efficacy and safety study):	**03/2021**

Submit the protocol(s) to your IND 068368, with a cross-reference letter to this NDA.

Reports of these required pediatric postmarketing studies must be submitted as a new drug application (NDA) or as a supplement to your approved NDA with the proposed labeling changes you believe are warranted based on the data derived from these studies. When submitting the reports, please clearly mark your submission "**SUBMISSION OF REQUIRED PEDIATRIC ASSESSMENTS**" in large font, bolded type at the beginning of the cover letter of the submission.

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit the following, in triplicate, (1) a cover letter requesting advisory comments, (2) the proposed materials in draft or mock-up form with annotated references, and (3) the package insert(s) to:

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

You must submit final promotional materials and package insert(s), accompanied by a Form FDA 2253, at the time of initial dissemination or publication [21 CFR 314.81(b)(3)(i)]. 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

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

If you have any questions, call Stephanie N. Parncutt, M.H.A., Regulatory Health Project Manager, at (301) 796-4098.

Sincerely,

{See appended electronic signature page}

Billy Dunn, M.D.
Director
Division of Neurology Products
Office of Drug Evaluation I
Center for Drug Evaluation and Research

ENCLOSURE(S):
Content of Labeling

This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.

/s/

WILLIAM H Dunn
06/19/2015