



NDA 219042

## **ACCELERATED APPROVAL**

Boehringer Ingelheim Pharmaceuticals, Inc.  
Attention: Missiratch Biable, MS  
Director, US Product Group Regulatory Affairs  
PO Box 368  
Ridgefield, CT 06877

Dear Missiratch Biable:

Please refer to your new drug application (NDA) dated December 16, 2024, received December 16, 2024, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Hernexeos (zongertinib) tablets.

This NDA provides for the use of Hernexeos (zongertinib) tablets for the treatment of adult patients with unresectable or metastatic non-squamous non-small cell lung cancer (NSCLC) whose tumors have HER2 (ERBB2) tyrosine kinase domain activating mutations, as detected by an FDA-approved test, and who have received prior systemic therapy.

### **APPROVAL & LABELING**

We have completed our review of this application, as amended. It is approved under accelerated approval pursuant to section 506(c) of the Federal Food, Drug, and Cosmetic Act (FDCA) and 21 CFR 314.510, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling.

Marketing of this drug product and related activities must adhere to the substance and procedures of the accelerated approval statutory provisions and regulations.

### **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 [FDA.gov](http://www.fda.gov).<sup>1</sup> Content of labeling must be identical to the enclosed labeling (Prescribing Information, and Patient Package Insert). Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling*

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<sup>1</sup> <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>

*Technical Qs and As.*<sup>2</sup>

The SPL will be accessible via publicly available labeling repositories.

### **CARTON AND CONTAINER LABELING**

Submit final printed carton and container labeling that are identical to the enclosed carton and container labeling as soon as they are available, but no more than 30 days after they are printed. Please submit these labeling electronically according to the guidance for industry titled *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (April 2018, Revision 5)*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labeling for Approved NDA 219042.**” Approval of this submission by FDA is not required before the labeling is used.

### **DATING PERIOD**

Based on the stability data submitted to date, the expiry dating period for Hernexeos (zongertinib) tablets shall be 24-months from the date of manufacture when stored at 20°C to 25°C (68°F to 77°F), excursions permitted to 15°C to 30°C (59°F to 86°F) [see USP Controlled Room Temperature]. Results of ongoing stability studies should be submitted throughout the dating period in your annual report as they become available, including the results of stability studies from the first three production lots.

### **ADVISORY COMMITTEE**

Your application for Hernexeos was not referred to an FDA advisory committee because the application did not raise significant public health questions on the role of the drug in the diagnosis, cure, mitigation, treatment, or prevention of a disease.

### **ACCELERATED APPROVAL REQUIREMENTS**

Pursuant to section 506(c) of the FDCA and 21 CFR 314.510 you are required to conduct further adequate and well-controlled clinical trials intended to verify and describe clinical benefit. You are required to conduct such clinical trials with due diligence. If required postmarketing clinical trials fail to verify clinical benefit or are not conducted with due diligence, including with respect to the conditions set forth below, we may withdraw this approval. We remind you of your postmarketing requirement specified in your submission dated July 25, 2025. This requirement is listed below.

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<sup>2</sup> We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database <https://www.fda.gov/RegulatoryInformation/Guidances/default.htm>.

- 4881-1 Complete the ongoing multicenter, randomized clinical trial, Study Beamion LUNG-2, intended to verify and describe the clinical benefit of zongertinib in adult patients with advanced, unresectable or metastatic non-squamous non-small cell lung cancer whose tumors have HER2 (ERBB2) tyrosine kinase domain activating mutations.

The timetable you submitted on July 25, 2025, states that you will conduct this trial according to the following schedule:

Trial Completion: 07/2029

Final Report Submission: 11/2029

Submit clinical protocols to your IND 149842 for this product. FDA considers the term *final* to mean that the applicant has submitted a protocol, the FDA review team has sent comments to the applicant, and the protocol has been revised as needed to meet the goal of the study or clinical trial.

You must submit status reports of the progress of each clinical trial required under section 506(c) (listed above) to the NDA 180 days after the date of approval of this NDA and approximately every 180 days thereafter (see section 506B(a)(2) of the FDCA) (hereinafter “180-day reports”).

You are required to submit two 180-day reports per year for each open study or clinical trial required under section 506(c). The initial report will be a standalone submission and the subsequent report will be combined with your application’s annual status report (ASR) required under section 506B(a)(1) of the FDCA and 21 CFR 314.81(b)(2). The standalone 180-day report will be due 180 days after the date of approval (with a 60-day grace period). Submit the subsequent 180-day report with your application’s ASR. Submit both of these 180-day reports each year until the final report for the corresponding study or clinical trial is submitted<sup>3</sup>.

Your 180-day reports must include the information listed in 21 CFR 314.81(b)(2)(vii)(a). FDA recommends that you use FORM FDA 3989, *PMR/PMC Annual Status Report for Drugs and Biologics*, to submit your 180-day reports.<sup>4</sup>

180-day reports must be clearly designated “**NDA 219042 180-Day AA PMR Progress Report.**”

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<sup>3</sup> You are required to submit information related to your confirmatory trial as part of your annual reporting requirement under section 506B(a)(1) until the FDA notifies you, in writing, that the Agency concurs that the study requirement has been fulfilled or that the study either is no longer feasible or would no longer provide useful information.

<sup>4</sup> FORM FDA 3989, along with instructions for completing this form, is available on the FDA Forms web page at <https://www.fda.gov/about-fda/reports-manuals-forms/forms>.

FDA will consider the submission of your application's ASR under section 506B(a)(1) and 21 CFR 314.81(b)(2), in addition to the submission of reports 180 days after the date of approval each year (subject to a 60-day grace period), to satisfy the periodic reporting requirement under section 506B(a)(2).

Submit final reports to this NDA as a supplemental application. For administrative purposes, the cover page of all submissions relating to this postmarketing requirement must be clearly designated "**Subpart H Postmarketing Requirement(s)**."

### **REQUIRED PEDIATRIC ASSESSMENTS**

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), 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 in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric studies requirement for this application because necessary studies are impossible or highly impracticable. The incidence of HER2-positive pediatric cancers is exceedingly rare.

### **POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B**

We remind you of your postmarketing commitment:

- 4881-2 Conduct a clinical drug-drug interaction study to evaluate the effects of a moderate CYP3A inducer on the pharmacokinetics of zongertinib. Collect pharmacokinetic information for zongertinib and utilize this information to determine the appropriate dose of zongertinib when co-administered with CYP3A inducers.

The timetable you submitted on July 25, 2025, states that you will conduct this study according to the following schedule:

Draft Protocol Submission: 09/2025  
Final Protocol Submission: 02/2026  
Trial Completion: 08/2026  
Final Report Submission: 02/2027

A final submitted protocol is one that the FDA has reviewed and commented upon, and you have revised as needed to meet the goal of the study or clinical trial.

Submit clinical protocols to your IND 149842 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment in your annual report to this NDA. 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/subjects 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**

Under 21 CFR 314.550, you are required to submit, during the application pre-approval review period, all promotional materials, including promotional labeling and advertisements, that you intend to use in the first 120 days following marketing approval (i.e., your launch campaign). If you have not already met this requirement, you must immediately contact the Office of Prescription Drug Promotion (OPDP) at (301) 796-1200. Please ask to speak to a regulatory project manager or the appropriate reviewer to discuss this issue.

As further required by 21 CFR 314.550, submit all promotional materials that you intend to use after the 120 days following marketing approval (i.e., your post-launch materials) at least 30 days before the intended time of initial dissemination of labeling or initial publication of the advertisement. We ask that each submission include a detailed cover letter together with three copies each of the promotional materials, annotated references, and approved Prescribing Information, Medication Guide, and Patient Package Insert (as applicable).

For information about submitting promotional materials, see the final guidance for industry *Providing Regulatory Submissions in Electronic and Non-Electronic Format-Promotional Labeling and Advertising Materials for Human Prescription Drugs*.<sup>5</sup>

### **REPORTING REQUIREMENTS**

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

### **POST APPROVAL FEEDBACK MEETING**

New molecular entities 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

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<sup>5</sup> <https://www.fda.gov/media/128163/download>

benefit from improvement. If you would like to have such a meeting with us, email the Regulatory Project Manager for this application.

### **COMPENDIAL STANDARDS**

A drug with a name recognized in the official United States Pharmacopeia or official National Formulary (USP-NF) generally must comply with the compendial standards for strength, quality, and purity, unless the difference in strength, quality, or purity is plainly stated on its label (see FD&C Act § 501(b), 21 USC 351(b)). FDA typically cannot share application-specific information contained in submitted regulatory filings with third parties, which includes USP-NF. To help ensure that a drug continues to comply with compendial standards, application holders may work directly with USP-NF to revise official USP monographs. More information on the USP-NF is available on USP's website<sup>6</sup>.

If you have any questions, contact Jeffrey Ingalls, Senior Regulatory Health Project Manager, at 301-796-4444 or via email at [Jeffrey.Ingalls@fda.hhs.gov](mailto:Jeffrey.Ingalls@fda.hhs.gov).

Sincerely,

*{See appended electronic signature page}*

R. Angelo de Claro, MD  
Deputy Director (Acting)  
Office of Oncologic Disease  
Office of New Drugs  
Center for Drug Evaluation and Research

#### ENCLOSURES:

- Content of Labeling
  - Prescribing Information
  - Patient Package Insert
- Carton and Container Labeling

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<sup>6</sup> <https://www.uspnf.com/>

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**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.**  
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/s/  
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