BLA 761034
S-033, S-034, S-035, S-036, S-037, S-038

SUPPLEMENT APPROVAL

Genentech, Inc.
Attention: Sili Liu, PhD
Regulatory Program Management
1 DNA Way
South San Francisco, CA 94080-4990

Dear Dr. Liu:

Please refer to your supplemental biologics license applications (sBLAs) dated and received October 15, 2020 (S-033 through S-038), and your amendments, submitted under section 351(a) of the Public Health Service Act for Tecentriq (atezolizumab) injection.

These Prior Approval supplemental biologics applications provide for updates to the Dosage and Administration in the Full Prescribing Information to include the addition of two new dosages regimens based on pharmacokinetic (PK) modeling and simulation and clinical safety in the following combination settings:

- S-033: Tecentriq in combination with bevacizumab, is indicated for the treatment of unresectable or metastatic hepatocellular carcinoma (HCC) who have no received prior systemic therapy

- S-034: Tecentriq in combination with bevacizumab, paclitaxel, and carboplatin, is indicated for the first line treatment of adult patients with metastatic non-squamous NSCLC with no EGFR or ALK genomic tumor aberrations

- S-035: Tecentriq in combination with carboplatin and etoposide, is indicated for the first-line treatment of adult patients with extensive-stage small cell lung cancer

- S-036: Tecentriq in combination with cobimetinib and vemurafenib, is indicated for the treatment of patients with BRAF V600 mutation-positive unresectable or metastatic melanoma

- S-037: Tecentriq in combination with paclitaxel protein-bound and carboplatin, indicated for the first-line treatment of adult patients with metastatic non-squamous NSCLC with no EGFR or ALK genomic tumor aberrations

- S-038: Tecentriq in combination with paclitaxel protein-bound, indicated for the treatment of adult patients with unresectable locally advanced or metastatic TNBC whose tumors express PD-L1 as determined by an FDA approved test.

The recommended dosages for Tecentriq (atezolizumab) with the approval of these 6 supplemental applications are:

- 840 mg every 2 weeks or
- 1200 mg every 3 weeks or
- 1680 every 4 weeks

Administered as an intravenous infusion over 60 minutes until disease progression or unacceptable toxicity.

APPROVAL & LABELING

We have completed our review of these applications, as amended. They are approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling.

WAIVER OF HIGHLIGHTS ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS

Please note that we have previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of Prescribing Information.

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 FDA.gov,[1] that is identical to the enclosed labeling (text for the Prescribing Information and Medication Guide) and include the labeling changes proposed in any pending "Changes Being Effected" (CBE) supplements.

Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*.[2]

The SPL will be accessible via publicly available labeling repositories.

[1] http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm

[2] 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.

Also, within 14 days, amend all pending supplemental applications that include labeling changes for this BLA, including pending "Changes Being Effected" (CBE) supplements, for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 601.12(f)] in Microsoft Word format that includes the changes approved in this supplemental application, as well as annual reportable changes. To facilitate review of your submission(s), 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 (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(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because this drug product for unresectable or metastatic BRAF V600 mutation positive melanoma has orphan drug designation, you are exempt from this requirement for the unresectable or metastatic BRAF V600 mutation positive melanoma cancer portion of the indication.

We are waiving the pediatric studies requirement for the following indications because necessary studies are impossible or highly impracticable:

- Hepatocellular carcinoma
- Non-squamous non-small cell lung cancer
- Small cell lung cancer
- Non-small cell lung cancer
- Triple-negative breast cancer

PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. 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.*[3]

[3] For the most recent version of a guidance, check the FDA guidance web page at https://www.fda.gov/media/128163/download.

As required under 21 CFR 601.12(f)(4), you must submit final promotional materials, and the Prescribing Information, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at FDA.gov.[4] Information and Instructions for completing the form can be found at FDA.gov.[5]

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved BLA (in 21 CFR 600.80 and in 21 CFR 600.81).

If you have any questions, contact Fatima Rizvi, PharmD, Regulatory Project Manager, at 240-402-7426.

Sincerely,

{See appended electronic signature page}

Laleh Amiri-Kordestani, MD
Director
Division of Oncology 1
Office of Oncologic Diseases
Center for Drug Evaluation and Research

ENCLOSURE(S):
- Content of Labeling
  - Prescribing Information
  - Medication Guide

[4] http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf
[5] http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf

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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.

/s/

LALEH AMIRI KORDESTANI
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