



BLA 761174/S-003
BLA 761174/S-004

SUPPLEMENT APPROVAL

GlaxoSmithKine LLC (GSK)
Attention: Sean Caltabiano, PharmD
Associate Director, Global Regulatory Affairs
1000 Winter Street, Suite 3300
Waltham, MA 02451

Dear Dr. Caltabiano:

Please refer to your supplemental biologics license applications (sBLAs), dated May 13, 2022, received May 13, 2022, and your amendments, submitted under section 351(a) of the Public Health Service Act for Jemperli (dostarlimab-gxly) 500 mg/10 mL intravenous injection.

Prior Approval supplemental biologics license application S-003 provides for regular approval of Jemperli as monotherapy for the treatment of adult patients with recurrent or advanced mismatch repair deficient (dMMR) endometrial cancer, as determined by an FDA-approved test, that has progressed on or following prior treatment with a platinum-containing regimen.

Prior Approval supplemental biologics license application S-004 provides for revision of the above indication to the following:

Jemperli is indicated as monotherapy for the treatment of adult patients with recurrent or advanced mismatch repair deficient (dMMR) endometrial cancer, as determined by an FDA-approved test, that has progressed on or following prior treatment with a platinum-containing regimen in any setting and are not candidates for curative surgery or radiation.

The S-004 labeling supersedes the S-003 labeling and is the final approved labeling attached to this letter.

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.

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 (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.

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).

SUBPART E FULFILLED

We approved this BLA under the regulations at 21 CFR 601 Subpart E for Accelerated Approval of Biological Products for Serious or Life-Threatening Illnesses. Approval of this supplement fulfills your commitments made under 21 CFR 601.41.

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 none of these criteria apply to your application, you are exempt from this requirement.

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>.

FULFILLMENT OF POSTMARKETING REQUIREMENT

We have received your submission dated May 13, 2022, containing the final report for the following postmarketing requirement listed in the April 22, 2021, approval letter for BLA 761174.

- 3909-1 Submit the final report and datasets from a clinical trial evaluating overall response rate, and duration of response, to verify and describe the clinical benefit of dostarlimab in patients with mismatch repair deficient (dMMR), recurrent or advanced endometrial cancer (EC) that has progressed on or following prior treatment with a platinum-containing regimen, in a sufficient number of patients. In order to characterize response rate and duration of response, patients will be followed for at least 12 months from the onset of response.

Alternatively, submit the final report and datasets from a randomized, phase 3 clinical trial that verifies and describes the clinical benefit of dostarlimab in patients with recurrent or primary advanced endometrial cancer. Patients should be randomized to receive chemotherapy with or without dostarlimab. The primary endpoint should be progression-free survival, with secondary endpoints that include overall survival and objective response rate.

We have reviewed your submission and conclude that the above requirement was fulfilled.

We remind you that there is a postmarketing commitment listed in the April 22, 2021, approval letter that is still open.

POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitment **for BLA 761174/S-004**:

- 4404-1 Conduct an integrated analysis containing data from clinical trials and other data sources such as post-marketing reports, real-world evidence and other sources to further characterize the efficacy and safety of dostarlimab in patients with dMMR endometrial cancer from racial and ethnic minority groups. The analyses should support comparative efficacy and safety analyses between the aforementioned populations and White patients.

The timetable you submitted on February 3, 2023, states that you will conduct this study according to the following schedule:

Draft Protocol Submission:	06/2023
Final Protocol Submission:	12/2023
Interim Report Submission:	12/2024
Study Completion:	06/2026
Final Report Submission:	12/2026

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 126472 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this BLA. 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 this BLA. 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

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

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).

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

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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If you have any questions, contact Alice Lee, Senior Regulatory Project Manager, at (301) 796-8881 or at Alice.Lee@fda.hhs.gov.

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

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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