

CENTER FOR DRUG EVALUATION AND RESEARCH

Approval Package for:

APPLICATION NUMBER:

208341Orig1s000

Trade Name: Epclusa Tablet, 400 mg/100 mg

Generic or Proper Name: sofosbuvir and velpatasvir

Sponsor: Gilead Sciences, Inc.

Approval Date: June 28, 2016

Indication: For the treatment of adult patients with chronic hepatitis C virus (HCV) genotypes 1, 2, 3, 4, 5, or 6 infection:

- Without cirrhosis or with compensated cirrhosis; and
- With decompensated cirrhosis for use in combination with ribavirin.

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APPROVAL LETTER



NDA 208341

NDA APPROVAL

Gilead Sciences, Inc.
Attention: Prachi Shah, MBS, RAC
Manger, Regulatory Affairs
333 Lakeside Drive
Foster City, CA 94404

Dear Ms. Shah:

Please refer to your New Drug Application (NDA) dated and received October 28, 2015, and your amendments submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for EPCLUSA[®] (sofosbuvir and velpatasvir) tablet, 400 mg/100 mg.

This new drug application provides for the use of EPCLUSA[®] (sofosbuvir and velpatasvir) tablet for the treatment of adult patients with chronic hepatitis C virus (HCV) genotypes 1, 2, 3, 4, 5, or 6 infection:

- without cirrhosis or with compensated cirrhosis; and
- with decompensated cirrhosis for use in combination with ribavirin.

We also acknowledge receipt of the information related to the EPCLUSA[®] (sofosbuvir and velpatasvir) tablet, 400 mg/100 mg, for the Gilead Access Program that was reviewed as a part of this application.

We have completed our review of this application, as amended. 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, text for the patient package insert, Medication Guide). 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*, available at <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>.

The SPL will be accessible via publicly available labeling repositories.

IMMEDIATE CONTAINER LABELS

Submit final printed immediate container labels that are identical to the enclosed immediate container labels submitted on May 18, 2016 as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry *Providing Regulatory Submissions in Electronic Format – Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (June 2008)*. Alternatively, you may submit 12 paper copies, with 6 of the copies individually mounted on heavy-weight paper or similar material. For administrative purposes, designate this submission “**Final Printed Container Labels for approved NDA 208341.**” Approval of this submission by FDA is not required before the labeling is used.

Marketing the product(s) with FPL that is not identical to the approved labeling text may render the product misbranded and an unapproved new drug.

MARKET PACKAGE

Please submit one market package of the drug product when it is available to the following address:

Linda C. Onaga, MPH
Food and Drug Administration
Center for Drug Evaluation and Research
White Oak Building 22, Room: 6360
10903 New Hampshire Avenue
Silver Spring, Maryland
*Use zip code **20903** if shipping via United States Postal Service (USPS).*
*Use zip code **20993** if sending via any carrier other than USPS (e.g., UPS, DHL, FedEx).*

ADVISORY COMMITTEE

Your application for EPCLUSA was not referred to an FDA advisory committee because the application did not raise significant safety or efficacy issues that were unexpected and outside expertise was not necessary as there were not significant issues that would benefit from an advisory committee discussion.

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.

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