



8027.4

Lilly Research Laboratories
A Division of Eli Lilly and Company

Lilly Corporate Center
Indianapolis, Indiana 46285
(317) 276-2000

November 18, 1998

Food and Drug Administration
Center for Drug Evaluation and Research
Division of Oncologic Drug Products, HFD-150
Attn: Ms. Linda McCollum, CSO
1451 Rockville Pike
Rockville, Maryland 20852-1448

IND # 40,061 - LY231514 Serial No.: 137
End-of-Phase 2 Meeting Minutes
Compound LY231514 (MTA, Multitargeted Antifolate)

Enclosed are Lilly's minutes for the End-of-Phase 2 meetings held on September 23 (Biopharmaceutics) and September 25 (Clinical) 1998 to discuss LY231514 with members of the Division of Oncologic Drug Products. We sincerely appreciate the willingness of the Division members to meet with us and to offer advice regarding the development of this investigational drug.

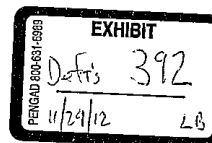
We respectfully request a copy of the Division's meeting minutes when they are available.

Please call Mr. John Worzalla at (317) 276-5052 or me at (317) 277-3799 if there are any questions. Thank you for your continued cooperation and assistance.

Sincerely,

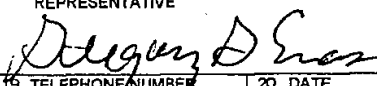
ELI LILLY AND COMPANY

Gregory T. Brophy, Ph.D.
Director
U.S. Regulatory Affairs



CONFIDENTIAL
ELAP00008700

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION INVESTIGATIONAL NEW DRUG APPLICATION (IND) <i>(TITLE 21, CODE OF FEDERAL REGULATIONS (CFR) PART 312)</i>		Form Approved: OMB No. 0810-0014. Expiration Date: December 31, 1999 See OMB Statement on Reverse.
1. NAME OF SPONSOR ELI LILLY AND COMPANY		2. DATE OF SUBMISSION November 18, 1998
3. ADDRESS (Number, Street, City, State and Zip Code) Lilly Corporate Center Indianapolis, IN 46285		4. TELEPHONE NUMBER <i>(Include Area Code)</i> (317) 276-2000
5. NAME(S) OF DRUG (include all available names: Trade, Generic, Chemical, Code) Compound LY231514 Disodium (MTA)		6. IND NUMBER (if previously assigned) IND 40,061
7. INDICATION(S) (Covered by this submission) Cancer		
8. PHASE(S) OF CLINICAL INVESTIGATION TO BE CONDUCTED: <input type="checkbox"/> PHASE 1 <input type="checkbox"/> PHASE 2 <input type="checkbox"/> PHASE 3 <input type="checkbox"/> OTHER _____ <i>(Specify)</i>		
9. LIST NUMBERS OF ALL INVESTIGATIONAL NEW DRUG APPLICATIONS (21 CFR Part 312), NEW DRUG OR ANTIBIOTIC APPLICATIONS (21 CFR Part 314), DRUG MASTER FILES (21 CFR Part 314.420), AND PRODUCT LICENSE APPLICATIONS (21 CFR Part 601) REFERRED TO IN THIS APPLICATION. NA		
10. IND submission should be consecutively numbered. The initial IND should be numbered "Serial number: 000." The next submission (e.g., amendment, report, or correspondence) should be numbered "Serial Number: 001." Subsequent submission should be numbered consecutively in the order in which they are submitted.		SERIAL NUMBER 137
11. THIS SUBMISSION CONTAINS THE FOLLOWING: (Check all that apply) <input type="checkbox"/> INITIAL INVESTIGATIONAL NEW DRUG APPLICATION (IND) <input type="checkbox"/> RESPONSE TO CLINICAL HOLD PROTOCOL AMENDMENT(S): <input type="checkbox"/> NEW PROTOCOL <input type="checkbox"/> CHANGE IN PROTOCOL <input type="checkbox"/> NEW INVESTIGATOR INFORMATION AMENDMENT(S): <input type="checkbox"/> CHEMISTRY/MICROBIOLOGY <input type="checkbox"/> PHARMACOLOGY/TOXICOLOGY <input type="checkbox"/> CLINICAL IND SAFETY REPORT(S): <input type="checkbox"/> INITIAL WRITTEN REPORT <input type="checkbox"/> FOLLOW-UP TO A WRITTEN REPORT <input type="checkbox"/> RESPONSE TO FDA REQUEST FOR INFORMATION <input type="checkbox"/> ANNUAL REPORT <input checked="" type="checkbox"/> GENERAL CORRESPONDENCE <input type="checkbox"/> REQUEST FOR REINSTATEMENT OF IND THAT IS WITHDRAWN, INACTIVATED, TERMINATED OR DISCONTINUED <input type="checkbox"/> OTHER _____ <i>(Specify)</i>		
CHECK ONLY IF APPLICABLE		
JUSTIFICATION STATEMENT MUST BE SUBMITTED WITH APPLICATION FOR ANY CHECKED BELOW. REFER TO THE CITED CFR SECTION FOR FURTHER INFORMATION. <input type="checkbox"/> TREATMENT IND 21 CFR 312.35(b) <input type="checkbox"/> TREATMENT PROTOCOL 21 CFR 312.35(a) <input type="checkbox"/> CHANGE REQUEST/ MODIFICATION 21 CFR 312.71(a)		
FOR FDA USE ONLY		
CDR/DBIND/DGD RECEIPT STAMP	DDR RECEIPT STAMP	IND NUMBER ASSIGNED:
		DIVISION ASSIGNMENT:

12. CONTENTS OF APPLICATION This application contains the following items: (Check all that apply)		
<input type="checkbox"/> 1. Form FDA 1571 [21 CFR 312.23(a)(1)] <input type="checkbox"/> 2. Table of Contents [21 CFR 312.23(a)(2)] <input type="checkbox"/> 3. Introductory statement [21 CFR 312.23(a)(3)] <input type="checkbox"/> 4. General Investigational plan [21 CFR 312.23(a)(3)] <input type="checkbox"/> 5. Investigator's brochure [21 CFR 312.23(a)(5)] <input type="checkbox"/> 6. Protocol(s) [21 CFR 312.23(a)(6)] <input type="checkbox"/> a. Study protocol(s) [21 CFR 312.23(a)(6)] <input type="checkbox"/> b. Investigator data [21 CFR 312.23(a)(6)(iii)(b)] or completed Form(s) FDA 1572 <input type="checkbox"/> c. Facilities data [21 CFR 312.23(a)(6)(iii)(b)] or completed Form(s) FDA 1572 <input type="checkbox"/> d. Institutional Review Board data [21 CFR 312.23(a)(6)(iii)(b)] or completed Form(s) FDA 1572 <input type="checkbox"/> 7. Chemistry, manufacturing, and control data [21 CFR 312.23(a)(7)] <input type="checkbox"/> <input type="checkbox"/> Environmental assessment or claim for exclusion [21 CFR 312.23(a)(7)(iv)(e)] <input type="checkbox"/> 8. Pharmacology and toxicology data [21 CFR 312.23(a)(8)] <input type="checkbox"/> 9. Previous human experience [21 CFR 312.23(a)(9)] <input type="checkbox"/> 10. Additional information [21 CFR 312.23(a)(10)]		
13. IS ANY PART OF THE CLINICAL STUDY TO BE CONDUCTED BY A CONTRACT RESEARCH ORGANIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO <div style="text-align: right;">NA</div> IF YES, WILL ANY SPONSOR OBLIGATIONS BE TRANSFERRED TO THE CONTRACT RESEARCH ORGANIZATION? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, ATTACH A STATEMENT CONTAINING THE NAME AND ADDRESS OF THE CONTRACT RESEARCH ORGANIZATION, IDENTIFICATION OF THE CLINICAL STUDY, AND A LISTING OF THE OBLIGATIONS TRANSFERRED.		
14. NAME AND TITLE OF THE PERSON RESPONSIBLE FOR MONITORING THE CONDUCT AND PROGRESS OF THE CLINICAL INVESTIGATIONS Steven J. Nicol, M.D.		
15. NAME(S) AND TITLE(S) OF THE PERSON(S) RESPONSIBLE FOR REVIEW AND EVALUATION OF INFORMATION RELEVANT TO THE SAFETY OF THE DRUG Same as #14 Above		
I agree not to begin clinical investigations until 30 days after FDA's receipt of the IND unless I receive earlier notification by FDA that the studies may begin. I also agree not to begin or continue clinical investigations covered by the IND if those studies are placed on clinical hold. I agree that an Institutional Review Board (IRB) that complies with the requirements set forth in 21 CFR Part 66 will be responsible for initial and continuing review and approval of each of the studies in the proposed clinical investigation. I agree to conduct the investigation in accordance with all other applicable regulatory requirements.		
16. NAME OF SPONSOR OR SPONSOR'S AUTHORIZED REPRESENTATIVE Gregory T. Brophy, Ph.D., Director U.S. Regulatory Affairs	17. SIGNATURE OF SPONSOR OR SPONSOR'S AUTHORIZED REPRESENTATIVE 	
18. ADDRESS (Number, Street, City, State and Zip Code) Eli Lilly and Company Lilly Corporate Center Indianapolis, IN 46285	19. TELEPHONE NUMBER (Include Area Code) (317) 277-3799	20. DATE 11/18/98
(WARNING: A willfully false statement is a criminal offense. U.S.C. Title 18, Sec. 1001.) Public reporting burden for this collection of information is estimated to average 100 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: DHHS Reports Clearance Officer Paperwork Reduction Project 0910-0014 Hubert H. Humphrey Building, Room 631-H 200 Independence Avenue, S.W. Washington, DC 20201		
"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number."		
Please DO NOT RETURN this application to this address.		

**This document contains trade secrets, or
commercial or financial information,
privileged or confidential delivered
in confidence and reliance that such
information will not be made available
to the public without express written
consent of Eli Lilly and Company**

CONFIDENTIAL
ELAP00008703

**LY231514 (MTA) End of Phase 2 Meeting with the FDA
Biopharmaceutics Issues – Wed. Sept. 23, 1998 at FDA**

FDA Participants: Division of Oncology Drug Products

Robert White, M.D., Medical Reviewer
Atiq Rahman, Ph.D., Biopharm Team Leader
Liang Zhou, Ph.D., Chemistry Team Leader
Linda McCollum, Consumer Safety Officer

Lilly Participants:

Steven Hamburger, Ph.D., U.S. Regulatory Affairs
Robert D Johnson, Ph.D., Pharmacokineticist
Mary Pat Knadler, Ph.D., Drug Disposition
Clet Niyikiza, Ph.D., Statistician
David Seitz, M.D., Ph.D., Medical Advisor
Jackie Walling, Ph.D., Director of Science, MTA Team
John Worzalla, U.S. Regulatory Affairs

Lilly Consultant:

Sharyn Baker, Pharm.D., Cancer Therapy and Research Center, San Antonio
Cancer Institute

Meeting Request Submission Date: July 13, 1998
Briefing Document Submission Date: July 29, 1998
Additional Submission Dates: Sept. 8, 1998

Meeting Minutes:

Issue 4: MTA and NSAIDS

The FDA showed the following acetate:

“MTA and NSAIDS – Currently the Phase 2 studies and all registration directed studies have excluded those patients who have a need for chronic administration of NSAIDS or aspirin. Do you agree that if this study shows no pharmacokinetic interaction that this will be sufficient evidence to take the course of action outlined, i.e., remove the exclusion criterion, and to prevent this exclusion from being part of the label?”

4A NO. The decision to remove exclusion criterion for Ibuprofen will depend on the outcome of the study. Depending on the PK parameter variability, sample size of the proposed interactions study may be inadequate to rule out absence of interaction between MTA and Ibuprofen. Please submit a detailed protocol for Agency Review.

CONFIDENTIAL
ELAP00008704

Explore Litigation Insights

Docket Alarm provides insights to develop a more informed litigation strategy and the peace of mind of knowing you're on top of things.

Real-Time Litigation Alerts



Keep your litigation team up-to-date with **real-time alerts** and advanced team management tools built for the enterprise, all while greatly reducing PACER spend.

Our comprehensive service means we can handle Federal, State, and Administrative courts across the country.

Advanced Docket Research



With over 230 million records, Docket Alarm's cloud-native docket research platform finds what other services can't. Coverage includes Federal, State, plus PTAB, TTAB, ITC and NLRB decisions, all in one place.

Identify arguments that have been successful in the past with full text, pinpoint searching. Link to case law cited within any court document via Fastcase.

Analytics At Your Fingertips



Learn what happened the last time a particular judge, opposing counsel or company faced cases similar to yours.

Advanced out-of-the-box PTAB and TTAB analytics are always at your fingertips.

API

Docket Alarm offers a powerful API (application programming interface) to developers that want to integrate case filings into their apps.

LAW FIRMS

Build custom dashboards for your attorneys and clients with live data direct from the court.

Automate many repetitive legal tasks like conflict checks, document management, and marketing.

FINANCIAL INSTITUTIONS

Litigation and bankruptcy checks for companies and debtors.

E-DISCOVERY AND LEGAL VENDORS

Sync your system to PACER to automate legal marketing.