CY 2017 CDER New Molecular Entity (NME) Drug & Original BLA Calendar Year Approvals

As of December 31, 2017

This report reflects the data shown as it is identified in the database.

Selection Criteria:

User Response: Start Date: 1/1/2017 End Date: 12/31/2017

Sort Order: Approval Date

New Molecular I	Entity Application (NME) Approv	als:				
APPLICATION NUMBER	PROPRIETARY NAME	ESTABLISHED NAME	APPLICANT	REVIEW CLASSIFICATION	APPROVAL DATE	INDICATION
NDA 208745	TRULANCE	PLECANATIDE	SYNERGY PHARMACEUTICALS INC	S	1/19/2017	FOR THE TREATMENT OF CHRONIC IDIOPATHIC CONSTIPATION (CIC) IN ADULTS
NDA 200745	TROLANCE	PLECANATIDE	STNERGT PHARMACEUTICALS INC	5	1/19/2017	FOR THE USE OF PARSABIV
NDA 208325	PARSABIV	ETELCALCETIDE	KAI PHARMACEUTICALS INC A WHOLLY OWNED SUBSIDIARY OF AMGEN INC	S	2/7/2017	(ETELCALCETIDE) INJECTION FOR SECONDARY HYPERPARATHYROIDISM (HPT) IN ADULT PATIENTS WITH CHRONIC KIDNEY DISEASE (CKD) ON HEMODIALYSIS FOR THE TREATMENT OF DUCHENNE
						MUSCULAR DYSTROPHY IN PATIENTS 5
NDA 208684	EMFLAZA	DEFLAZACORT	MARATHON PHARMACEUTICALS LLC	P,O	2/9/2017	YEARS OF AGE AND OLDER
NDA 208794	XERMELO	TELOTRISTAT ETHYL	LEXICON PHARMACEUTICALS INC	P,O	2/28/2017	FOR THE TREATMENT OF CARCINOID SYNDROME DIARRHEA IN COMBINATION WITH SOMATOSTATIN ANALOG (SSA) THERAPY IN ADULTS INADEQUATELY CONTROLLED BY SSA THERAPY
NDA 209092	KISQALI	RIBOCICLIB	NOVARTIS PHARMACEUTICALS CORP	P	3/13/2017	FOR THE TREATMENT OF POSTMENOPAUSAL WOMEN WITH HORMONE RECEPTOR (HR)-POSITIVE, HUMAN EPIDERMAL GROWTH FACTOR RECEPTOR 2 (HER2)-NEGATIVE ADVANCED OR METASTATIC BREAST CANCER
NDA 207145	XADAGO	SAFINAMIDE	NEWRON PHARMACEUTICALS US INC	S	3/21/2017	FOR ADJUNCTIVE TREATMENT TO LEVODOPA/CARBIDOPA IN PATIENTS WITH PARKINSON'S DISEASE EXPERIENCING "OFF" EPISODES.
NDA 208854	SYMPROIC	NALDEMEDINE	SHIONOGI INC	s	3/23/2017	FOR THE TREATMENT OF OPIOID-INDUCED CONSTIPATION (OIC) IN ADULT PATIENTS WITH CHRONIC NON-CANCER PAIN
NDA 208447	ZEJULA	NIRAPARIB	TESARO INC	P,O	3/27/2017	FOR THE MAINTENANCE TREATMENT OF ADULT PATIENTS WITH RECURRENT EPITHELIAL OVARIAN, FALLOPIAN TUBE, OR PRIMARY PERITONEAL CANCER WHO ARE IN A COMPLETE OR PARTIAL RESPONSE TO PLATINUM-BASED CHEMOTHERAPY
NDA 208082	AUSTEDO	DEUTETRABENAZINE	TEVA BRANDED PHARMACEUTICAL PRODUCTS R AND D INC	S,O	4/3/2017	FOR THE TREATMENT OF CHOREA ASSOCIATED WITH HUNTINGTON'S DISEASE
NDA 208082 NDA 209241	INGREZZA	VALBENAZINE	NEUROCRINE BIOSCIENCES INC	P 9,0	4/11/2017	FOR THE TREATMENT OF TARDIVE DYSKINESIA

						TREATMENT OF ADULT PATIENTS WITH
						NEWLY DIAGNOSED ACUTE MYELOID
						LEUKEMIA (AML) THAT IS FLT3 MUTATION-
						POSITIVE AS DETECTED BY AN FDA-
						APPROVED TEST, IN COMBINATION WITH STANDARD CYTARABINE AND
						DAUNORUBICIN INDUCTION AND
NDA 207997	RYDAPT	MIDOSTAURIN	NOVARTIS PHARMACEUTICALS CORF	P,O	4/28/2017	CYTARABINE CONSOLIDATION
						FOR THE TREATMENT OF
						POSTMENOPAUSAL WOMEN WITH
ND 4 000=40	TV# # 00	ADAL ODADATIDE	- A - B - W - B - W - B - W - B - W - B - B	•	1/00/0047	OSTEOPOROSIS AT HIGH RISK FOR
NDA 208743	TYMLOS	ABALOPARATIDE	RADIUS HEALTH INC	S	4/28/2017	FRACTURE
						FOR TREATMENT OF PATIENTS WITH ANAPLASTIC LYMPHOMA KINASE (ALK)-
						POSITIVE METASTATIC NON-SMALL CELL
						LUNG CANCER (NSCLC) WHO HAVE
						PROGRESSED ON OR ARE INTOLERANT TO
NDA 208772	ALUNBRIG	BRIGATINIB	ARIAD PHARMACEUTICALS INC	P,O	4/28/2017	CRIZOTINIB
						FOR THE TREATMENT OF AMYOTROPHIC
NDA 209176	RADICAVA	EDARAVONE	MITSUBISHI TANABE PHARMA CORP	S,O	5/5/2017	LATERAL SCLEROSIS (ALS)
						FOR TREATMENT OF ACUTE BACTERIAL
						SKIN AND SKIN STRUCTURE INFECTIONS
NDA 208610	BAXDELA	DELAFLOXACIN	MELINTA THERAPEUTICS INC	Р	6/19/2017	(ABSSSI)
						FOR THE PROPHYLAXIS OF VENOUS
						THROMBOEMBOLISM (VTE) IN ADULT
						PATIENTS HOSPITALIZED FOR AN ACUTE
						MEDICAL ILLNESS WHO ARE AT RISK FOR THROMBOEMBOLIC COMPLICATIONS DUE
						TO MODERATE OR SEVERE RESTRICTED
						MOBILITY AND OTHER RISK FACTORS FOR
NDA 208383	BEVYXXA	BETRIXABAN	PORTOLA PHARMACEUTICALS INC	Р	6/23/2017	VTE
						FOR EXTENDED ADJUVANT TREATMENT OF
						ADULT PATIENTS WITH EARLY STAGE HER2-
						OVEREXPRESSED/AMPLIFIED BREAST CANCER, TO FOLLOW ADJUVANT
NDA 208051	NERLYNX	NERATINIB MALEATE	PUMA BIOTECHNOLOGY INC	S	7/17/2017	TRASTUZUMAB BASED THERAPY
				-		VOSEVI IS INDICATED FOR THE TREATMENT
						OF ADULT PATIENTS WITH CHRONIC
						HEPATITIS C VIRUS (HCV)□
						INFECTION WITHOUT CIRRHOSIS OR WITH
						COMPENSATED CIRRHOSIS WHO HAVE:
						-GENOTYPE 1, 2, 3, 4, 5 OR 6 INFECTION
						AND HAVE PREVIOUSLY BEEN TREATED WITH AN HCV REGIMEN CONTAINING AN
						NS5A INHIBITOR.
						-GENOTYPE 1A OR 3 INFECTION AND HAVE
						PREVIOUSLY BEEN TREATED WITH AN
		SOFOSBUVIR, VELPATASVIR,				HCV□
NDA 209195	VOSEVI	AND VOXILAPREVIR	GILEAD SCIENCES INC	Р	7/18/2017	REGIMEN CONTAINING SOFOSBUVIR
			5.22. IS GOIE! (GEG III G	•		FOR THE TREATMENT OF ADULT PATIENTS
						WITH RELAPSED OR REFRACTORY ACUTE
						MYELOID LEUKEMIA (AML) WITH AN
						ISOCITRATE DEHYDROGENASE-2 (IDH2)
NDA 000000	IDI IIEA	ENIAGIDENTO	CEL CENE CODE		0/4/004=	MUTATION AS DETECTED BY AN FDA-
NDA 209606	IDHIFA	ENASIDENIB	CELGENE CORP	P,O	8/1/2017	APPROVED TEST

NDA 208254	RHOPRESSA	NETARSUDIL OPHTHALMIC SOLUTION	AERIE PHARMACEUTICALS INC	S	12/18/2017	INTRAOCULAR PRESSURE IN PATIENTS WITH OPEN-ANGLE GLAUCOMA OR OCULAR HYPERTENSION
NDA 208945	XEPI	OZENOXACIN	FERRER INTERNACIONAL SA	S	12/11/2017	FOR THE TOPICAL TREATMENT OF IMPETIGO IN ADULTS, ADOLESCENTS AND CHILDREN 2 MONTHS AND OLDER FOR THE REDUCTION OF ELEVATED
NDA 209637	OZEMPIC	SEMAGLUTIDE	NOVO NORDISK INC	S	12/5/2017	AS AN ADJUNCT TO DIET AND EXERCISE TO IMPROVE GLYCEMIC CONTROL IN ADULTS WITH TYPE 2 DIABETES MELLITUS.
NDA 209939	PREVYMIS	LETERMOVIR	MERCK SHARP AND DOHME CORP	P,O	11/8/2017	FOR PROPHYLAXIS OF CYTOMEGALOVIRUS (CMV) INFECTION AND DISEASE IN ADULT CMVSEROPOSITIVE RECIPIENTS [R+] OF AN ALLOGENEIC HEMATOPOIETIC STEM CELL TRANSPLANT (HSCT)
NDA 207795	VYZULTA	LATANOPROSTENE BUNOD OPHTHALMIC SOLUTION	BAUSCH AND LOMB INC	S	11/2/2017	FOR REDUCTION OF INTRAOCULAR PRESSURE IN PATIENTS WITH OPEN-ANGLE GLAUCOMA OR OCULAR HYPERTENSION
NDA 210259	CALQUENCE	ACALABRUTINIB	ASTRAZENECA UK LTD	P,O	10/31/2017	FOR THE TREATMENT OF ADULT PATIENTS WITH MANTLE CELL LYMPHOMA (MCL) WHO HAVE RECEIVED AT LEAST ONE PRIOR THERAPY
NDA 208716	VERZENIO	ABEMACICLIB	ELI LILLY AND CO	P	9/28/2017	IN COMBINATION WITH FULVESTRANT FOR THE TREATMENT OF WOMEN WITH HORMONE RECEPTOR (HR)-POSITIVE, HUMAN EPIDERMAL GROWTH FACTOR RECEPTOR 2 (HER2)-NEGATIVE ADVANCED OR METASTATIC BREAST CANCER WITH DISEASE PROGRESSION FOLLOWING ENDOCRINE THERAPY; AND AS MONOTHERAPY FOR THE TREATMENT OF ADULT PATIENTS WITH HR-POSITIVE, HER2-NEGATIVE ADVANCED OR METASTATIC BREAST CANCER WITH DISEASE PROGRESSION FOLLOWING ENDOCRINE THERAPY AND PRIOR CHEMOTHERAPY IN THE METASTATIC SETTING.
NDA 209363	SOLOSEC	SECNIDAZOLE	LUPIN INC	Р	9/15/2017	FOR THE TREATMENT OF BACTERIAL VAGINOSIS IN ADULT WOMEN
NDA 209936	ALIQOPA	COPANLISIB	BAYER HEALTHCARE PHARMACEUTI	P,O	9/14/2017	FOR THE TREATMENT OF ADULT PATIENTS WITH RELAPSED FOLLICULAR LYMPHOMA (FL) WHO HAVE RECEIVED AT LEAST TWO PRIOR SYSTEMIC THERAPIES
NDA 209776	VABOMERE	MEROPENEM AND VABORBACTAM	REMPEX PHARMACEUTICALS A WHO	P	8/29/2017	FOR TREATMENT OF PATIENTS 18 YEARS OF AGE AND OLDER WITH COMPLICATED URINARY TRACT INFECTIONS (CUTI), INCLUDING PYELONEPHRITIS
NDA 209570		BENZNIDAZOLE	CHEMO RESEARCH SL	P,O	8/29/2017	FOR THE TREATMENT OF CHAGAS DISEASE (AMERICAN TRYPANOSOMIASIS), CAUSED BY TRYPANOSOMA CRUZI, IN PEDIATRIC PATIENTS 2 TO 12 YEARS OF AGE
NDA 209394	MAVYRET	GLECAPREVIR AND PIBRENTASVIR	ABBVIE INC	P	8/3/2017	FOR PATIENTS WITH CHRONIC HEPATITIS C VIRUS (HCV) GENOTYPE (GT) 1, 2, 3, 4, 5 OR 6 INFECTION WITHOUT CIRRHOSIS OR WITH COMPENSATED CIRRHOSIS; AND ALSO FOR PATIENTS WITH HCV GT1 INFECTION WHO PREVIOUSLY HAVE BEEN TREATED WITH A REGIMEN CONTAINING AN HCV NS5A INHIBITOR OR AN NS3/4A PROTEASE INHIBITOR, BUT NOT BOTH

NDA 209803	STEGLATRO	ERTUGLIFLOZIN	MERCK SHARP AND DOHME CORP	S	AS AN ADJUNCT TO DIET AND EXERCISE TO IMPROVE GLYCEMIC CONTROL IN ADULTS WITH TYPE 2 DIABETES MELLITUS.
NDA 205598	MACRILEN	MACIMORELIN ACETATE	AETERNA ZENTARIS GMBH	S,O	FOR THE DIAGNOSIS OF ADULT GROWTH HORMONE DEFICIENCY
NDA 209360	GIAPREZA	ANGIOTENSIN II	LA JOLLA PHARMACEUTICAL CO	P	FOR INTRAVENOUS INFUSION TO INCREASE BLOOD PRESSURE IN ADULTS WITH SEPTIC OR OTHER DISTRIBUTIVE SHOCK

New Biologic License Application (BLA) Approvals:

BLA NUMBER	PROPRIETARY NAME	PROPER NAME	APPLICANT	REVIEW CLASSIFICATION	APPROVAL DATE	INDICATION
BLA 761032/0.0	SILIQ	BRODALUMAB	VALEANT PHARMACEUTICALS LUXEMBOU	0	2/15/2017	FOR THE TREATMENT OF MODERATE TO SEVERE PLAQUE PSORIASIS IN ADULT PATIENTS WHO ARCANDIDATES FOR SYSTEMIC THERAPY OR PHOTOTHERAPY AND HAVE FAILED TO RESPOND OR HAVE LOST RESPONSE TO OTHER SYSTEMIC THERAPIES
BLA 761049/0.0	BAVENCIO	AVELUMAB	EMD SERONO, INC.	P,O		FOR THE TREATMENT OF ADULTS AND PEDIATRIC PATIENTS 12 YEARS AND OLDER WITH METASTATIC MERKEL CELL CARCINOMA
BLA 761053/0.0	OCREVUS	OCRELIZUMAB	GENENTECH, INC.	Р	3/28/2017	FOR THE TREATMENT OF ADULT PATIENTS WITH RELAPSING OR PRIMARY PROGRESSIVE FORMS OF MULTIPLE SCLEROSIS
BLA 761055/0.0	DUPIXENT	DUPILUMAB	REGENERON PHARMACEUTICALS, INC.	P	3/28/2017	FOR THE TREATMENT OF ADULT PATIENTS WITH MODERATE TO SEVERE ATOPIC DERMATITIS WHOSE DISEASE IS NOT ADEQUATELY CONTROLLED WITH TOPICAL PRESCRIPTION THERAPIES OR WHEN THOSE THERAPIES ARE NOT ADVISABLE. DUPIXENT CAN BE USED WITH OR WITHOUT TOPICAL CORTICOSTEROIDS
BLA 761052/0.0	BRINEURA	CERLIPONASE ALFA	BIOMARIN PHARMACEUTICAL INC.	P,O	4/27/2017	INDICATED TO SLOW THE PROGRESSION OF LOSS OF AMBULATION IN SYMPTOMATIC PEDIATRIC PATIENTS 3 YEARS OF AGE AND OLDER WITH LATE INFANTILE NEURONAL CEROID LIPOFUSCINOSIS TYPE 2 (CLN2), ALSO KNOWN AS TRIPEPTIDYL PEPTIDASE 1 (TPP1) DEFICIENCY
BLA 761069/0.0	IMFINZI	DURVALUMAB	ASTRAZENECA UK LTD	P	5/1/2017	FOR THE TREATMENT OF PATIENTS WITH LOCALLY ADVANCED OR METASTATIC UROTHELIAL CARCINOMA WHO HAVE DISEASE PROGRESSION DURING OR FOLLOWING PLATINUM-CONTAINING CHEMOTHERAPY OR HAVE DISEASE PROGRESSION WITHIN 12 MONTHS OF NEOADJUVANT OR ADJUVANT TREATMENT WITH PLATINUM-CONTAINING CHEMOTHERAPY

					•	,
						FOR ADULT PATIENTS WITH MODERATELY
						TO SEVERELY ACTIVE RHEUMATOID
						ARTHRITIS WHO HAVE HAD AN
						INADEQUATE RESPONSE OR INTOLERANCE
DI A 704007/0 0	KE) (7.4.D.A	CARULINAAR	CANOFI AVENTIO I I O I I O		F/00/0047	TO ONE OR MORE DISEASE-MODIFYING
BLA 761037/0.0	KEVZARA	SARILUMAB	SANOFI-AVENTIS U.S. LLC	S	5/22/2017	ANTIRHEUMATIC DRUGS (DMARDS)
						FOR THE TREATMENT OF ADULT PATIENTS
						WITH MODERATE-TO-SEVERE PLAQUE
DI A 704004/0.0	TREMFYA	OLIOSI KUMAR	IANIOOFN BIOTEOU INO		7/40/0047	PSORIASIS WHO ARE CANDIDATES FOR
BLA 761061/0.0	TREIVIFTA	GUSELKUMAB	JANSSEN BIOTECH, INC.	Р	7/13/2017	SYSTEMIC THERAPY OR PHOTOTHERAPY
						FOR THE TREATMENT OF ADULTS WITH
						RELAPSED OR REFRACTORY B-CELL
						PRECURSOR ACUTE LYMPHOBLASTIC
BLA 761040/0.0	BESPONSA	INOTUZUMAB OZOGAMICIN	WYETH PHARMACEUTICALS INC.	P,O	8/17/2017	LEUKEMIA (ALL)
						FOR ADD-ON MAINTENANCE TREATMENT
						OF PATIENTS WITH SEVERE ASTHMA AGED
						12 YEARS AND OLDER, AND WITH AN
BLA 761070/0.0	FASENRA	BENRALIZUMAB	ASTRAZENECA AB	S	11/14/2017	EOSINOPHILIC PHENOTYPE
						FOR THE TREATMENT OF
						MUCOPOLYSACCHARIDOSIS TYPE VII (MPS
BLA 761047/0.0	MEPSEVII	VESTRONIDASE ALFA-VJBK	ULTRAGENYX PHARAMCEUTICAL INC.	P,O	11/15/2017	VII, SLY SYNDROME)
						FOR ROUTINE PROPHYLAXIS TO PREVENT
						OR REDUCE THE FREQUENCY OF
						BLEEDING EPISODES IN ADULT AND
						PEDIATRIC PATIENTS WITH HEMOPHILIA A
						(CONGENITAL FACTOR VIII DEFICIENCY)
BLA 761083/0.0	HEMLIBRA	EMICIZUMAB-KXWH	GENENTECH, INC.	P,O	11/16/2017	WITH FACTOR VIII INHIBITORS

Review Classification:

- P Priority Review Significant improvement compared to marketed products, in the treatment, diagnosis, or prevention of a disease.
- S Standard Review Products that do not qualify for priority review.
- O Orphan Designation Pursuant to Section 526 of the Orphan Drug Act (Public Law 97-414 as amended).