

# Myth Busters

What you think you know about the FDA  
may not be true

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# Audience Participation

- Please respond to the questions that follow using the Slido Application on your cell phone (or computer)
- Audience responses (from in the room and remotely participating) will be displayed after each question.



# Question #1

FDA's OHOP requires two randomized trials for approval of a new product.

1 OR 2?

# Question #1: Two Trials

- Two trial requirement
  - One trial may be allowed in the following settings\*:
    - High unmet medical need
    - Serious, life-threatening illnesses
    - Difficult to repeat a positive trial

\* FDAMA 1997

## Question #2

FDA's OHOP requires that trials use overall survival as the primary endpoint for approval of a new product

# Question # 2: Endpoints

| Endpoint Used for First Approval (in OHOP) | Percent |
|--------------------------------------------|---------|
| Response Rate                              | 60%     |
| Progression Free Survival                  | 20%     |
| Overall Survival                           | 13%     |
| Other                                      | 7%      |

## Question #3

- FDA's OHOP requires that trials to support approvals only enroll patient in the U.S.



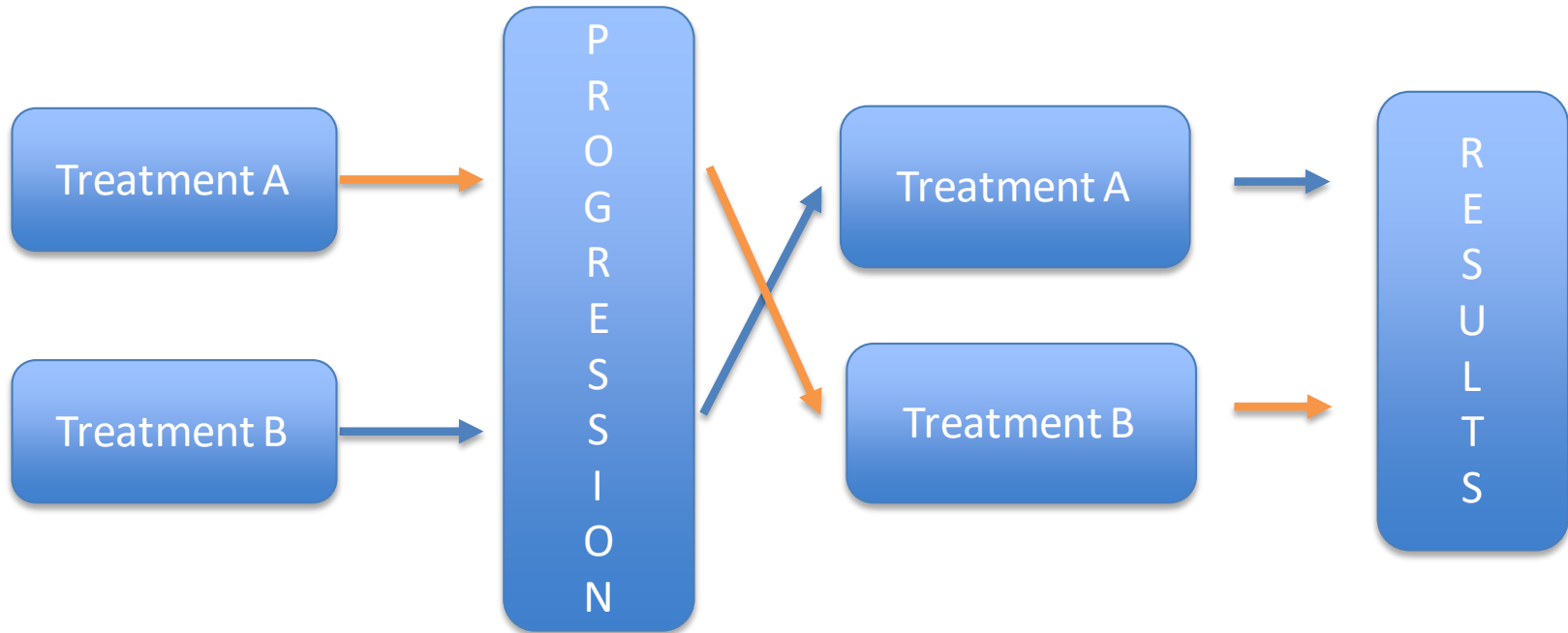
## Question # 3: U.S. Enrollment

- Trials are not required to be limited to the U.S. population, or even mostly in a U.S. population...
- However, the results should be relevant to the U.S. population:
  - Patient population
  - Control arm
  - Biomarker data
  - Supportive care measures
  - Available prior/subsequent therapy



# Question # 4

FDA's OHOP permits crossover in trials



## Question # 4: Crossover

- Recent approvals where crossover was permitted at time of progression
  - Dabrafenib and trametinib in metastatic melanoma
  - Erlotinib in non-small cell lung cancer
  - Afatinib in non-small cell lung cancer
  - Crizotinib in non-small cell lung cancer

## Question # 5

FDA advisory committees, such as the ODAC (Oncologic Drug Advisory Committee), are the final decision makers in drug approval.



## Question # 5: Advisory Committee

- Advisory committees provide opinions based upon their clinical and scientific expertise.
- FDA generally follows an AC's recommendation, but is not bound to do so.

# Question # 6

FDA staff lack scientific and clinical expertise.



# Question # 6: Expertise

- FDA Review Multidisciplinary Team
  - Clinical
  - Biostatistics
  - Clinical Pharmacology
  - Chemistry and Manufacturing
  - Pharmacology/Toxicology

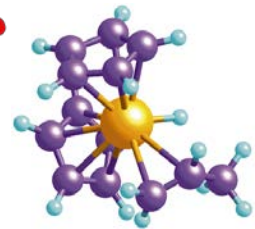


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# Question # 7

- FDA permits access to investigational drugs (e.g., compassionate use)



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# Question # 7: Compassionate Use

- FDA has an expanded access program for clinicians to obtain access to investigational drugs for individual patients.

Stay tuned for more on this later from Aviva Krauss





## Question # 8

- FDA determines the cost of drugs/biological products



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# Question # 8: Drug Cost

- No legal authority over drug costs
- Cost savings with generics and biosimilar products
- Reduced drug development expenses
- Sources of assistance:
  - Drug manufacturer patient assistance programs
  - Ask your health-care provider if your drugs are available in a generic form

# Question # 9

FDA takes the patient experience into account in approval decisions and encourages the assessment of clinical outcomes such as symptoms and physical function in clinical trials.



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# Question # 9: Patient Experience

- Advisory Committee: Patient Representative
- 2009 Patient-Reported Outcomes (PRO) Guidance
- Patient Representative Program
- PROs in Labeling: Hycela and Imbruvica
- Patient Focused Drug Development Meetings

## Question # 10

FDA may publish its reasons for non-approval of a drug

**NOT APPROVED**



# Question # 10: Negative Reviews

- By law, FDA is NOT permitted to post reviews or letters to the Applicant for products that do not receive approval
- Reviews and approval letters for approvals ARE posted.

# Acknowledgments

- Amy McKee
- Paul Kluetz

