

Memorandum

DATE:	August 6, 2021
TO:	Ramachandran Naik, OMPT/CBER/OVRR/DVRPA Laura Montague, OMPT/CBER/OVRR/DVRPA Michael Smith, OMPT/CBER/OVRR/DVRPA Susan Wollersheim, Medical Officer, OMPT/CBER/OVRR/DVRPA
FROM:	Oluchi Elekwachi, Regulatory Reviewer OCBQ/DCM/APLB
THROUGH:	Lisa Stockbridge, Branch Chief OCBQ/DCM/APLB
SUBJECT:	COMIRNATY (COVID-19 vaccine, mRNA) Suspension for intramuscular injection BLA 125742/0
	Sponsor: Pfizer Inc.

The sponsor submitted:

Original Application
Major Amendment
Prior Approval Supplement (PAS)
Changes Being Effected (CBE) Supplement

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Submission contains:

\boxtimes	Prescribing Information (PI) – version submitted on August 2, 2021
	Patient Package Insert (PPI)
\square	Package and Container - labels - submitted May 18, 2021

BACKGROUND

On May 6, 2021, Pfizer initiated their rolling Biologics License Application (BLA 125742) for their COVID-19 vaccine. The proprietary name, COMIRNATY, was found acceptable on July 2, 2021. This decision was relayed to Pfizer in official correspondence dated July 6, 2021. The application was filed on July 15, 2021.

On July 28, 2021, FDA requested prescribing information revisions, excluding Section 6 (adverse reactions) and Section 14 (clinical studies) for which comments will be provided after this review. Pfizer submitted a revised Package Insert (PI) on August 2, 2021. APLB has reviewed the revised PI, as well as the package and container labels submitted to date. We offer the following comments from a promotional and comprehension perspective.

GENERAL

- Use active voice and command language whenever possible.
- Do not bullet when there only is one concept. Over-bulleting deemphasizes the importance of a concept and reduces readability.
- Avoid using research terms, such as "Phase I" or "Phase 3" studies.

HIGHLIGHTS

DOSAGE AND ADMINISTRATION

Include the following bolded statement directly beneath the section heading:

For intramuscular injection only.

FULL PRESCRIBING INFORMATION: CONTENTS

Ensure any changes in the table of contents are consistent with the FULL PRESCRIBING INFORMATION.

FULL PRESCRIBING INFORMATION

2 DOSAGE AND ADMINISTRATION

• Use the following standard bolded statement directly beneath the section heading:

For intramuscular injection only.

- To improve readability and comprehension, use active voice in the instructions.
- Delete references to diluents that are not recommended, as they may be read quickly as alternative diluents.
- In the panel entitled DILUTION, revise the 4th bullet as follows:

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Inject Add 1.8 mL of 0.9% Sodium Chloride Injection, USP into the vaccine vial.

6 ADVERSE REACTIONS

- A statement regarding the most common adverse reactions, along with a cut-off frequency, belongs directly beneath the section heading before **6.1 Clinical Trials Experience**. This usually is the same statement as in the **HIGHLIGHTS**.
- The description of the study population(s) is difficult to find in the dense paragraphs of this section. Consider pooling the safety data and providing an overarching description of the study populations. It is not necessary to separate data from study phases and using this terminology minimizes the comprehension and readability of this section.
- Use whole numbers when reporting adverse reactions.

11 DESCRIPTION

Consider listing the below statements as separate lines:

The product contains no preservatives.

The vaccine vial stopper is not made with natural rubber latex.

12 CLINICAL PHARMACOLOGY

- **12.2 Pharmacodynamics** is a required subsection. (see 21CFR 201.57(c)(13))
 - Describe any biochemical or physiologic pharmacologic effects of the product or active metabolites, with respect to its clinical effect or to its adverse reactions or toxicity.
 - Include data on exposure-response relationship (e.g., concentration-response, dose-response) and time course of response (including short term clinical response if known). If this is not known, include statement about lack of information.
 - May include pharmacodynamic effects outside of the approved dosage range for a complete understanding of the exposure-response relationship.
 - Cross-reference detailed pharmacodynamic information on dosing or monitoring that may appear in other sections of the PI. Do not repeat such information here.
- **12.2 Pharmacokinetics** is a required subsection. (see 21CFR 201.57(c)(13))
 - Describe clinically significant pharmacokinetics of the product or its active metabolites under the following headings in this subsection
 - Absorption
 - Distribution

- Metabolism
- Excretion
- Additional descriptive subheadings may be added (e.g., Specific Populations, Drug Interaction Studies, etc.).
- Cross-reference detailed pharmacokinetic information on dosing or monitoring that may appear in other sections of the PI. Do not repeat such information here.

14 CLINICAL STUDIES

- Do not subsection unless there is more than one subsection (e.g., more than one indication or indicated population).
- **14.1 Efficacy in Participants 16 Years of Age and Older** should include only data from those in age groups of approval.
- Ensure that pediatric data are included in 8.4 Pediatric Use.

16 HOW SUPPLIED/STORAGE AND HANDLING

• Dense paragraphs in this section reduce readability the entire section would benefit from subsectioning to

16.1 How Supplied 16.2 Storage and Handling

- A table with the product presentations identified by NDC numbers would improve the readability of **How Supplied** information.
- To improve overall readability, use active voice and bullet relevant tasks associated with storage and handling.

17 PATIENT COUNSELING INFORMATION

The intent of this section is to give the healthcare provider a list of topics to discuss with the patient, specifically what to expect and what to report. For readability, consider a parallel list structure. For example,

Inform the individual receiving the vaccine of the following:

- COMIRNATY vaccination requires two doses, three weeks apart.
- It is important that patients protect themselves from exposure to COVID-19, using masks and social distancing.
- Report any adverse reactions to their healthcare provider or to the Vaccine Adverse Event Reporting System at 1-800-822-7967 and www.vaers.hhs.gov.

PACKAGE AND CONTAINER LABELS

• To reduce the potential for medication error, revise 1.0 to 1 mL on both the package and container labels.

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- Include the lot number and expiration date on both package and container labels.
- Ensure that the proper name is consistent with that in the final PI.
- On the package, revise the bolded statement "**Inject intramuscularly**" to "For intramuscular use only." Similarly, on the container, replace the statement "Intramuscular Use" with the bolded statement, "For intramuscular use only."

If you have any questions regarding this review, please contact Oluchi Elekwachi, Regulatory Review Officer at 240-402-8930.

Firm: Pfizer Inc. STN: 125742

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Bcc: OElekwachi APLB Chronologic File APLB Historical File

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