

# FOOD AND DRUG ADMINISTRATION

Center for Drug Evaluation and Research  
Oncologic Drugs Advisory Committee  
AGENDA

**March 3, 2005:**

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*The committee will discuss New Drug Application (NDA) 21-115 Combixen® (ferumoxtran-10) Advanced Magnetix, Incorporated, proposed indication for intravenous administration as a Magnetic Resonance Imaging (MRI) contrast agent to assist in the differentiation of metastatic and non-metastatic lymph nodes in patients with confirmed primary cancer who are at risk for lymph node metastases.*

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| 8:00 a.m. | Call to Order<br>Introduction of Committee               | Silvana Martino, D.O., Acting Chair, ODAC  |
|           | Conflict of Interest Statement                           | Johanna Clifford, M.S., RN,<br>Executive Secretary, ODAC   |
| 8:10 a.m. | Opening Remarks  | George Mills, M.D., Director<br>Division of Medical Imaging and Radiopharmaceutical<br>Drug Products, FDA            |
| 8:15 a.m. | <b><u>Sponsor Presentation</u></b>                       | <b>Advanced Magnetix, Inc.</b>   |
|           | Combixen, Introduction and Indication                    | Mark C. Roessel<br>Vice President Regulatory Affairs<br>Advanced Magnetix, Inc.                                      |
|           | Mechanism of Action, Combixen<br>Appearance on MR Images | Mukesh Harisinghani, M.D.<br>Department of Radiology<br>Massachusetts General Hospital                               |
|           | Efficacy Data from Phase III Clinical Studies            | William Goeckeler, Ph.D.<br>Senior Vice President Development<br>Cytogen Corporation                                 |
|           | Safety Data from Clinical Trial                          | Gerald Faich, M.D.<br>President Pharmaceutical Safety Associates   |
|           | Clinical Utility of Combixen and Various Cancers         | Jelle O. Barentsz, M.D.<br>Professor of Radiology<br>University Hospital Nijmegen, Netherlands                       |
| 9:00 a.m. | <b><u>FDA Presentation</u></b>                           |  |
|           | Efficacy & Safety of Combixen (NDA 21-115)               | Zili Li, M.D., MPH, Medical Team Leader<br>Division of Medical Imaging and Radiopharmaceutical Drug<br>Products, FDA |
| 9:45 a.m. | <i>Questions from the Committee</i>                      |  |
| 10:00     | Break  |  |

# FOOD AND DRUG ADMINISTRATION

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*(Agenda Continued)*

10:15 a.m. Open Public Hearing

10:45 a.m. *Committee Discussion*

12:00 p.m. *Lunch*

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*The committee will discuss prostate cancer endpoints as a follow up to the June 2004 FDA Workshop.*

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12:45 p.m. Call to Order

Maha Hussain, M.D., Acting Chair, ODAC

Conflict of Interest Statement

Johanna Clifford, MS, RN, Exec. Sec., ODAC

12:55 p.m. Opening Remarks

Richard Pazdur, M.D., Director  
Division of Oncology Drug Products, FDA

1:05 p.m. A Regulatory Perspective of End Points to  
Measure Safety and Efficacy of Drugs:  
Hormone Refractory Prostate Cancer

Bhupinder Mann, MBBS, Medical Officer  
Division of Oncology Drug Products, FDA

1:20 p.m. Towards a Consensus in Measuring Outcomes in  
New Agents for Prostate Cancer

Derek Raghavan, M.D., Ph.D.  
Chairman, Department of Hematology and Medical Oncology  
Cleveland Clinic Taussig Cancer Center

1:50 p.m. NCI Prostate Cancer Treatment Trial Portfolio

Alison Martin, M.D.  
Clinical Investigations Branch, Cancer Therapy Evaluation  
Program, Division of Cancer Treatment & Diagnosis,  
National Cancer Institute, National Institutes of Health

2:00 p.m. Toward an Endpoint for Accelerated Approval  
for Clinical Trials in Castration Resistant/Hormone  
Refractory Prostate Cancer

Howard Scher, M.D., Chief, Genitourinary Onc. Service  
Sidney Kimmel Center for Prostate and Urologic Cancers  
Memorial Sloan Kettering Cancer Center

2:30 p.m. Design of Clinical Trials for Select Patients With  
a Rising PSA Following Primary Therapy

Anthony D'Amico, M.D., Ph.D.  
Professor and Chair of Genitourinary Radiation Oncology  
Brigham & Women's Hospital, Dana Farber Cancer Institute  
Harvard Medical School

3:00 p.m. *Break*

3:15 p.m. Open Public Hearing

3:45 p.m. Committee Discussion

5:00 p.m. Adjourn

# FOOD AND DRUG ADMINISTRATION

Center for Drug Evaluation and Research  
Oncologic Drugs Advisory Committee  
**AGENDA**

*March 4, 2005*

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*The committee will discuss the results of a confirmatory trial for NDA 21-399, IRESSA® (gefitinib) AstraZeneca Pharmaceuticals LP, for the treatment of patients with locally advanced or metastatic non-small cell lung cancer after failure of both platinum-based and docetaxel chemotherapies.*

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| 8:00 a.m.  | Call to Order<br>Introduction of Committee | Silvana Martino, D.O., Acting Chair, ODAC                                 |
|            | Conflict of Interest Statement             | Johanna Clifford, M.S., RN, Executive Secretary, ODAC                     |
| 8:10 a.m.  | Opening Remarks                            | Richard Pazdur, M.D., Director<br>Division of Oncology Drug Products, FDA |
| 8:20 a.m.  | <b><u>Sponsor Presentation</u></b>         | <b>Astra Zeneca L.P.</b>  |
|            | Introduction & Regulatory History          | Mark Scott, Ph.D.   |
|            | Trial 709                                  | Kevin Carroll, MSc  |
|            | Clinical Actions and Implications          | Judith Ochs, M.D.   |
|            | Summary                                    | Mark Scott, Ph.D.   |
| 9:00 a.m.  | Open Public Hearing                        |   |
| 9:15 a.m.  | Committee Discussion                       |   |
| 10:15 a.m. | Break                                      |   |

# FOOD AND DRUG ADMINISTRATION

Center for Drug Evaluation and Research  
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Agenda Continued

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*The committee will discuss safety concerns, specifically osteonecrosis of the jaw (ONJ), associated with two bisphosphonates, NDA 21-223, ZOMETA® (zoledronic acid) Injection and AREDIA®, NDA 20-036 (pamidronate disodium for injection), both from Novartis Pharmaceuticals Corp. Zometa is indicated for the treatment of patients with Multiple Myeloma and patients with documented bone metastases from solid tumors, in conjunction with standard antineoplastic therapy. Prostate cancer should have progressed with at least one hormonal therapy. It is also approved for hypercalcemia of malignancy. AREDIA is indicated, in conjunction with standard antineoplastic therapy, for the treatment of osteolytic bone metastases of breast cancer and osteolytic lesions of multiple myeloma. It is also indicated for the treatment of moderate or severe hypercalcemia associated with malignancy, and treatment of patients with moderate to severe Paget's disease of bone.*

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| 10:35 a.m. | Call to Order<br>Introduction of Committee  | Silvana Martino, D.O., Acting Chair, ODAC  |
|            | Conflict of Interest Statement  | Johanna Clifford, M.S., RN, Executive Secretary, ODAC  |
| 10:40 a.m. | Opening Remarks   | Richard Pazdur, M.D., Director<br>Division of Oncology Drug Products, FDA                                      |
|            | <b><u>FDA Presentation</u></b>  |  |
| 10:45 a.m. | Regulatory History of Zometa & Aredia   | Nancy Scher, M.D., Medical Officer<br>Division of Oncology Drug Products, FDA                                  |
| 11:00 a.m. | Post-Marketing Safety Assessment of<br>Osteonecrosis of the Jaw: Pamidronate and<br>Zoledronic Acid | Carol Pamer, R.Ph.<br>Office of Drug Safety, FDA   |
| 11:15 a.m. | Osteonecrosis of the Jaws in Myeloma:<br>Time Dependent Correlation with Zometa &<br>Zometa Use     | Brian Durie, M.D.<br>Hematology/Oncology<br>Cedars-Sinai Outpatient Cancer Center                              |
| 11:30 a.m. | <b><u>Sponsor Presentation</u></b>  | <b>Novartis Pharmaceuticals</b>  |
|            | ONJ Reported in Bisphosphonates Treated<br>Patients – An Overview                                   | Diane Young, M.D.<br>Vice President & Global Head<br>Clinical Development - Oncology                           |
|            | Clinical Benefit of Bisphosphonates in Cancer<br>Patients with Metastatic Bone Disease              | James Berenson, M.D.<br>Director, Multiple Myeloma and Bone Metastases Programs<br>Cedars-Sinai Medical Center |
| 12:00 p.m. | Open Public Hearing   |  |
| 12:15 p.m. | Committee Discussion  |  |
| 1:15 p.m.  | Adjourn   |  |