



Santiago, 7 de marzo de 2025

Ref. 0019/24

**A quien corresponda**

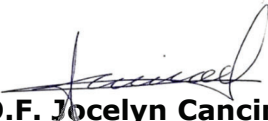
Estimados

Mediante la presente, informamos a Uds. que el siguiente producto: **OZEMPIC**  
**OZEMPIC SOLUCIÓN INYECTABLE 4 mg/3 mL (SEMAGLUTIDA)** se encuentran aprobado desde el 12 de mayo del 2017 por la FDA (adjuntamos carta de aprobación).

Esta información se encuentra disponible para su revisión en la siguiente páginas web:

<https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=BasicSearch.process>

Sin otro particular,  
Le saluda atentamente a Ud.

  
**Q.F. Jocelyn Cancino S.**  
**Directora Técnica**  
**Novo Nordisk Farmacéutica Ltda**

**EJCS**  
Digitally  
signed by EJCS  
Date:  
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NDA 209637

**NDA APPROVAL**

Novo Nordisk Inc.  
Attention: Stephanie DeChiaro  
Director Regulatory Affairs  
P.O. Box 846  
800 Scudders Mill Road  
Plainsboro, NJ 08536

Dear Ms. DeChiaro:

Please refer to your New Drug Application (NDA) dated and received December 5, 2016, and your amendments, submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act (FDCA) for Ozempic (semaglutide) injection.

This new drug application provides for the use of Ozempic (semaglutide) injection as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling text.

**WAIVER OF HIGHLIGHTS SECTION**

We are waiving the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of prescribing information. This waiver applies to all future supplements containing revised labeling unless we notify you otherwise.

**CONTENT OF LABELING**

As soon as possible, but no later than 14 days from the date of this letter, submit the content of labeling [21 CFR 314.50(l)] in structured product labeling (SPL) format using the FDA automated drug registration and listing system (eLIST), as described at <http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm>. Content of labeling must be identical to the enclosed labeling (text for the package insert, Medication Guide, and instructions for use). Information on submitting SPL files using eLIST may be found in the guidance for industry *SPL Standard for Content of Labeling Technical Qs and As*, available at <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf>

The SPL will be accessible via publicly available labeling repositories.

### **CARTON AND IMMEDIATE CONTAINER LABELS**

Submit final printed carton and immediate container labels that are identical to the enclosed carton and immediate container labels as soon as they are available, but no more than 30 days after they are printed. Please submit these labels electronically according to the guidance for industry titled *Providing Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications (May 2015, Revision 3)*. For administrative purposes, designate this submission “**Final Printed Carton and Container Labels for approved NDA 209637.**” Approval of this submission by FDA is not required before the labeling is used.

### **EXPIRATION DATING PERIOD**

The shelf life of the drug product is 36 months at 5°C, and the in-use shelf life is 56 days at 5°C to 30°C after initial use.

### **REQUIRED PEDIATRIC ASSESSMENTS**

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

We are waiving the pediatric study requirement for ages 0 through 9 years (inclusive) because necessary studies are impossible or highly impracticable. This is because there are too few children in this age range with type 2 diabetes mellitus to study.

We are deferring submission of your pediatric study for ages 10 to 17 years (inclusive) for this application because this product is ready for approval for use in adults and the pediatric study has not been completed.

Your deferred pediatric study required under section 505B(a) of the FDCA is a required postmarketing study. The status of this postmarketing study must be reported annually according to 21 CFR 314.81 and section 505B(a)(3)(C) of the FDCA. This required study is listed below.

- 3294-1 Conduct a 26-week, randomized, double-blind, placebo-controlled parallel group study of the safety and efficacy of Ozempic (semaglutide) for the treatment of type 2 diabetes mellitus in pediatric patients ages 10 to 17 years (inclusive), followed by a 26-week open-label, controlled extension. Background therapy will consist of either metformin, insulin, or metformin plus insulin.

Draft Protocol Submission: March 2018  
Final Protocol Submission: January 2019  
Study Completion: December 2026  
Final Report Submission: October 2027

Submit the protocol to your IND 079754, with a cross-reference letter to this NDA.

Reports of this required pediatric postmarketing study must be submitted as a new drug application (NDA) or as a supplement to your approved NDA with the proposed labeling changes you believe are warranted based on the data derived from these studies. When submitting the reports, please clearly mark your submission "**SUBMISSION OF REQUIRED PEDIATRIC ASSESSMENTS**" in large font, bolded type at the beginning of the cover letter of the submission.

#### **POSTMARKETING REQUIREMENTS UNDER 505(o)**

Section 505(o)(3) of the FDCA authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute.

We have determined that an analysis of spontaneous postmarketing adverse events reported under subsection 505(k)(1) of the FDCA will not be sufficient to assess a signal of a serious risk of medullary thyroid carcinoma associated with Ozempic (semaglutide).

Furthermore, the new pharmacovigilance system that FDA is required to establish under section 505(k)(3) of the FDCA will not be sufficient to assess this serious risk.

Therefore, based on appropriate scientific data, FDA has determined that you are required to conduct the following study:

- 3294-2 Conduct a medullary thyroid carcinoma registry-based case series of at least 15 years duration to systematically monitor the annual incidence of medullary thyroid carcinoma in the United States and to identify any increase related to the introduction of Ozempic (semaglutide) into the marketplace. This study will also establish a registry of incident cases of medullary thyroid carcinoma and characterize their medical histories related to diabetes and use of Ozempic (semaglutide).

The timetable you submitted on November 7, 2017, states that you will conduct this study according to the following schedule:

|                             |                                                                                                                                                                                    |
|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Draft Protocol Submission:  | August 2018                                                                                                                                                                        |
| Final Protocol Submission:  | February 2019                                                                                                                                                                      |
| Interim Report Submissions: | March 2020, March 2021, March 2022,<br>March 2023, March 2024, March 2025,<br>March 2026, March 2027, March 2028,<br>March 2029, March 2030, March 2031,<br>March 2032, March 2033 |
| Study Completion:           | May 2034                                                                                                                                                                           |
| Final Report Submission:    | May 2035                                                                                                                                                                           |

Submit clinical protocols to your IND 079754, with a cross-reference letter to this NDA. Submit nonclinical and chemistry, manufacturing, and controls protocols and all final reports to your NDA. Prominently identify the submission with the following wording in bold capital letters at the top of the first page of the submission, as appropriate: **Required Postmarketing Protocol Under 505(o), Required Postmarketing Final Report Under 505(o), Required Postmarketing Correspondence Under 505(o).**

Submission of the protocols for required postmarketing observational studies to your IND is for purposes of administrative tracking only. These studies do not constitute clinical investigations pursuant to 21 CFR 312.3(b) and therefore are not subject to the IND requirements under 21 CFR part 312 or FDA's regulations under 21 CFR parts 50 (Protection of Human Subjects) and 56 (Institutional Review Boards).

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Section 506B of the FDCA, as well as 21 CFR 314.81(b)(2)(vii) requires you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

FDA will consider the submission of your annual report under section 506B and 21 CFR 314.81(b)(2)(vii) to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in 505(o) and 21 CFR 314.81(b)(2)(vii). We remind you that to comply with 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to

investigate a safety issue. Failure to submit an annual report for studies or clinical trials required under 505(o) on the date required will be considered a violation of FDCA section 505(o)(3)(E)(ii) and could result in enforcement action.

**POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B**

We remind you of your postmarketing commitments:

- 3294-3      Develop and validate a sensitive assay to assess the neutralizing activity of anti-semaglutide antibodies and its cross-neutralizing effect on native GLP-1.

The timetable you submitted on November 7, 2017, states that you will conduct this study according to the following schedule:

Final Report Submission:                      November 2018

- 3294-4      Conduct a study to assess the incidence of neutralizing antibodies to semaglutide and GLP-1 in subjects treated with semaglutide using the assays developed under PMC 3294-3. The samples may be derived from pre-existing clinical studies. Sample selection criteria will be submitted to and reviewed by the Agency prior to initiation of sample analysis.

The timetable you submitted on November 7, 2017, states that you will conduct this study according to the following schedule:

Final Protocol Submission:                      November 2018

Final Report Submission:                      May 2019

Submit clinical protocols to your IND 079754, for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this NDA. In addition, under 21 CFR 314.81(b)(2)(vii) and 314.81(b)(2)(viii) you should include a status summary of each commitment in your annual report to this NDA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled **“Postmarketing Commitment Protocol,” “Postmarketing Commitment Final Report,” or “Postmarketing Commitment Correspondence.”**

**RISK EVALUATION AND MITIGATION STRATEGY (REMS) REQUIREMENTS**

We acknowledge receipt of your submission dated December 5, 2016, of a proposed risk evaluation and mitigation strategy (REMS). We have determined that, at this time, a REMS is not necessary for Ozempic (semaglutide) injection to ensure that its benefits outweigh its risks.

We will notify you if we become aware of new safety information and make a determination that a REMS is necessary.

### **PROMOTIONAL MATERIALS**

You may request advisory comments on proposed introductory advertising and promotional labeling. To do so, submit, in triplicate, a cover letter requesting advisory comments, the proposed materials in draft or mock-up form with annotated references, and the package insert, Medication Guide, and patient PI (as applicable) to:

OPDP Regulatory Project Manager  
Food and Drug Administration  
Center for Drug Evaluation and Research  
Office of Prescription Drug Promotion  
5901-B Ammendale Road  
Beltsville, MD 20705-1266

Alternatively, you may submit a request for advisory comments electronically in eCTD format. For more information about submitting promotional materials in eCTD format, see the draft Guidance for Industry (available at: <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM443702.pdf> ).

As required under 21 CFR 314.81(b)(3)(i), you must submit final promotional materials, and the package insert, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf>. Information and Instructions for completing the form can be found at <http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf>. For more information about submission of promotional materials to the Office of Prescription Drug Promotion (OPDP), see <http://www.fda.gov/AboutFDA/CentersOffices/CDER/ucm090142.htm>.

### **REPORTING REQUIREMENTS**

We remind you that you must comply with reporting requirements for an approved NDA (21 CFR 314.80 and 314.81).

### **MEDWATCH-TO-MANUFACTURER PROGRAM**

The MedWatch-to-Manufacturer Program provides manufacturers with copies of serious adverse event reports that are received directly by the FDA. New molecular entities and important new biologics qualify for inclusion for three years after approval. Your firm is eligible to receive copies of reports for this product. To participate in the program, please see the enrollment instructions and program description details at <http://www.fda.gov/Safety/MedWatch/HowToReport/ucm166910.htm>.

### **POST APPROVAL FEEDBACK MEETING**

New molecular entities and new biologics qualify for a post approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, call the Regulatory Project Manager for this application. If you have any questions, call Peter Franks, Regulatory Project Manager, at 240 402-4197.

Sincerely,

*{See appended electronic signature page}*

Mary T. Thanh Hai, M.D.  
Deputy Director  
Office of Drug Evaluation II  
Office of New Drugs  
Center for Drug Evaluation and Research

Enclosures:

- Content of Labeling
- Prescribing Information
- Medication Guide
- Instructions for Use
- Carton and Container Labeling

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**This is a representation of an electronic record that was signed electronically and this page is the manifestation of the electronic signature.**  
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/s/  
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MARY T THANH HAI  
12/05/2017