Eisai Inc. Medical Affairs

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NCCN Guidelines Panel: Kidney Cancer

On behalf of Eisai Inc., I respectfully request the *NCCN Kidney Panel* to review and consider the enclosed data for Lenvima (lenvatinib) capsules for the treatment of metastatic renal cell carcinoma (mRCC).

<u>Specific Changes:</u> Inclusion of lenvatinib as a treatment option for subsequent therapy in combination with everolimus for relapse or for surgically unresectable Stage IV disease with predominant clear cell histology.

<u>FDA Clearance</u>: The FDA has not approved lenvatinib for the treatment of mRCC. Please refer to the enclosed prescribing information for the FDA-approved indication and safety information.

Rationale: Results from a randomized, phase 2, open-label, multicenter, three-arm study (N=153) demonstrated the efficacy and safety of lennvatinib + everolimus in patients with mRCC with radiographic evidence of disease progression within 9 months of stopping prior therapy, with one prior disease progression on or after VEGF-targeted therapy. This trial met its primary outcome measure of progression-free survival (PFS) in which patients taking lenvatinib + everolimus experienced a statistically significant prolonged median PFS of 14.6 months compared with a median PFS of 5.5 months in patients taking everolimus alone (HR, 0.40; 95% CI 0.24-0.68; p<0.001). An improvement in median overall survival (OS) was observed with lenvatinib + everolimus compared with everolimus alone (25.5 vs 17.5 months, p=0.062); this reached significance (p=0.024) in an updated analysis. The most common treatment-emergent adverse events (TEAEs) that occurred in the lenvatinib + everolimus arm were diarrhea (84%), fatigue/asthenia (59%), and decreased appetite (51%). In patients who received everolimus alone, the most common TEAEs (all grades) were stomatitis (42%), fatigue/asthenia (38%), and diarrhea (34%). Grade 3 or 4 events occurred more frequently in the lenvatinib + everolimus arm (71%) compared with the everolimus arm alone (50%). (Motzer 2015).

The above clinical trial conducted by Motzer et al. has been accepted for publication and is currently in press with Lancet Oncology. A copy of the full manuscript will be provided when published. We would like to acknowledge the contributions of NCCN panel members who are also co-authors or co-contributors of this publication.

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- 1. LENVIMA (lenvatinib) full prescribing information. Woodcliff Lake, NJ: Eisai Inc., 02/2015.
- 2. Motzer RJ, Hutson TE, Glen H, et al. Randomized phase 2 three-arm trial of lenvatinib, everolimus, and the combination in patients with metastatic renal cell carcinoma. *Lancet Oncology*. 2015; Accepted for publication.

Sincerely,

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