

October 27, 2022

Pfizer, Inc.  
Attention: Karen Baker  
Director, Global Regulatory Affairs  
235 East 42<sup>nd</sup> Street  
New York, NY 10017-5755

RE: Emergency Use Authorization 105

Dear Ms. Baker:

This letter is in response to Pfizer, Inc.'s (Pfizer) request that the Food and Drug Administration (FDA or Agency) issue an Emergency Use Authorization (EUA) for the emergency use of PAXLOVID (nirmatrelvir co-packaged with ritonavir) for the treatment of mild-to-moderate coronavirus disease 2019 (COVID-19) in certain adults and pediatric patients pursuant to Section 564 of the Federal Food, Drug, and Cosmetic Act (the Act) (21 U.S.C. §360bbb-3).

On February 4, 2020, pursuant to Section 564(b)(1)(C) of the Act, the Secretary of the Department of Health and Human Services (HHS) determined that there is a public health emergency that has a significant potential to affect national security or the health and security of United States citizens living abroad, and that involves the virus that causes coronavirus disease 2019 (COVID-19).<sup>1</sup> On the basis of such determination, the Secretary of HHS on March 27, 2020, declared that circumstances exist justifying the authorization of emergency use of drugs and biological products during the COVID-19 pandemic, pursuant to Section 564 of the Act (21 U.S.C. 360bbb-3), subject to terms of any authorization issued under that section.<sup>2</sup>

On December 22, 2021, the FDA issued an EUA for emergency use of PAXLOVID for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death.

PAXLOVID is comprised of nirmatrelvir, a SARS-CoV-2 main protease inhibitor (Mpro: also referred to as 3CLpro or nsp5 protease), co-packaged with ritonavir, an HIV-1 protease inhibitor and CYP3A inhibitor. Ritonavir, which has no activity against SARS-CoV-2 on its own, is included to inhibit the CYP3A-mediated metabolism of nirmatrelvir and consequently increase

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<sup>1</sup> U.S. Department of Health and Human Services, *Determination of a Public Health Emergency and Declaration that Circumstances Exist Justifying Authorizations Pursuant to Section 564(b) of the Federal Food, Drug, and Cosmetic Act*, 21 U.S.C. § 360bbb-3. February 4, 2020.

<sup>2</sup> U.S. Department of Health and Human Services, *Declaration that Circumstances Exist Justifying Authorizations Pursuant to Section 564(b) of the Federal Food, Drug, and Cosmetic Act*, 21 U.S.C. § 360bbb-3, 85 FR 18250 (April 1, 2020).

nirmatrelvir plasma concentrations to levels anticipated to inhibit SARS-CoV-2 replication. PAXLOVID is not approved for any use, including treatment of COVID-19.

FDA subsequently reissued the Letter of Authorization (LOA) on March 17, 2022<sup>3</sup>, April 14, 2022<sup>4</sup>, July 6, 2022<sup>5</sup>, and August 5, 2022.<sup>6</sup>

On October 27, 2022, having concluded that revising this EUA is appropriate to protect the public health or safety under Section 564(g)(2) of the Act, FDA is reissuing the August 5, 2022 letter in its entirety, to incorporate clarifying revisions to Condition X of this letter. Condition W was also revised to require that all printed matter, advertising and promotional materials relating to the use of PAXLOVID under this authorization be submitted to FDA for consideration at least 14 calendar days prior to initial dissemination or first use.

Based on the totality of scientific evidence available to FDA, including data from the clinical trial EPIC-HR (NCT04960202), a Phase 2/3 randomized, double blind, placebo-controlled clinical trial, it is reasonable to believe that PAXLOVID may be effective for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death, as described in the Scope of Authorization (Section II), and when used under the conditions described in this authorization, the known and potential benefits of PAXLOVID outweigh the known and potential risks of such product.

Having concluded that the criteria for issuance of this authorization under Section 564(c) of the Act are met, I am authorizing the emergency use of PAXLOVID for the treatment of mild-to-moderate COVID-19 in certain adults and pediatric patients, as described in the Scope of Authorization section of this letter (Section II) and subject to the terms of this authorization.

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<sup>3</sup> In its March 17, 2022 revision, FDA revised the LOA to add a new condition of authorization regarding registration and listing. Condition H in the LOA was also revised to require Pfizer to recall distributed product, upon request by FDA, in the event a significant quality problem is identified that impacts already distributed PAXLOVID.

<sup>4</sup> In its April 14, 2022 revision, FDA revised the LOA to authorize an additional dose pack presentation of PAXLOVID with appropriate dosing for patients within the scope of this authorization with moderate renal impairment. Corresponding revisions were also incorporated into the “How Supplied” section of the Fact Sheet for Healthcare Providers.

<sup>5</sup> In its July 6, 2022 revision, FDA authorized state-licensed pharmacists to prescribe PAXLOVID subject to certain conditions detailed in Section II (Scope of Authorization) of this LOA. Corresponding revisions were also incorporated into the Fact Sheet for Healthcare Providers. Updates were also incorporated to certain post-authorization requirements detailed in Condition O of this letter.

<sup>6</sup> In its August 5, 2022 revision, FDA revised the LOA to add new post-authorization requirements in Condition O of this letter for Pfizer to conduct a clinical trial in patients with “COVID-19 rebound” and a clinical trial evaluating different durations of treatment in immunocompromised patients with mild-to-moderate COVID-19. The Fact Sheet for Patients, Parents, and Caregivers was also revised to include additional clarifying information on how to take PAXLOVID, which included pictures of packaging and tablets for both dosing presentations.

## **I. Criteria for Issuance of Authorization**

I have concluded that the emergency use of PAXLOVID for the treatment of COVID-19, when administered as described in the Scope of Authorization (Section II), meets the criteria for issuance of an authorization under Section 564(c) of the Act, because:

1. SARS-CoV-2 can cause a serious or life-threatening disease or condition, including severe respiratory illness, to humans infected by this virus;
2. Based on the totality of scientific evidence available to FDA, it is reasonable to believe that PAXLOVID may be effective for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death, as described in the Scope of Authorization (Section II), and that, when used under the conditions described in this authorization, the known and potential benefits of PAXLOVID outweigh the known and potential risks of such product; and
3. There is no adequate, approved, and available alternative to the emergency use of PAXLOVID for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death.<sup>7</sup>

## **II. Scope of Authorization**

I have concluded, pursuant to Section 564(d)(1) of the Act, that the scope of this authorization is limited as follows:

- Distribution of the authorized PAXLOVID will be controlled by the United States (U.S.) Government for use consistent with the terms and conditions of this EUA. Pfizer will supply PAXLOVID to authorized distributor(s)<sup>8</sup>, who will distribute to healthcare facilities or healthcare providers as directed by the U.S. Government, in collaboration with state and local government authorities as needed;
- PAXLOVID may only be used by healthcare providers to treat mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk<sup>9</sup> for progression to severe COVID-19, including hospitalization or death;

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<sup>7</sup> No other criteria of issuance have been prescribed by regulation under Section 564(c)(4) of the Act.

<sup>8</sup> “Authorized Distributor(s)” are identified by Pfizer as an entity or entities allowed to distribute authorized PAXLOVID.

<sup>9</sup> For information on medical conditions and factors associated with increased risk for progression to severe COVID-19, see the Centers for Disease Control and Prevention (CDC) website: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/underlyingconditions.html>

### Limitations on Authorized Use

- PAXLOVID is not authorized for initiation of treatment in patients requiring hospitalization due to severe or critical COVID-19.<sup>10</sup>
- PAXLOVID is not authorized for use as pre-exposure or as post-exposure prophylaxis for prevention of COVID-19.
- PAXLOVID is not authorized for use for longer than 5 consecutive days.
  
- PAXLOVID may be prescribed for an individual patient by physicians, advanced practice registered nurses, and physician assistants that are licensed or authorized under state law to prescribe drugs.<sup>11</sup>
- PAXLOVID may also be prescribed for an individual patient by a state-licensed pharmacist under the following conditions:
  - Sufficient information is available, such as through access to health records less than 12 months old or consultation with a health care provider in an established provider-patient relationship with the individual patient, to assess renal and hepatic function; and
  - Sufficient information is available, such as through access to health records, patient reporting of medical history, or consultation with a health care provider in an established provider-patient relationship with the individual patient, to obtain a comprehensive list of medications (prescribed and non-prescribed) that the patient is taking to assess for potential drug interaction.
  
- The use of PAXLOVID covered by this authorization must be in accordance with the authorized Fact Sheets.

### **Product Description**

PAXLOVID consists of 150 mg tablets of nirmatrelvir that are co-packaged with 100 mg tablet ritonavir.

PAXLOVID is authorized to be distributed in the following dose pack presentations, which are distinguishable by the specific amount of active ingredient per treatment course:

- *300 mg nirmatrelvir; 100 mg ritonavir*: Each carton contains 30 tablets divided in 5 daily-dose blister cards. Each blister card contains 4 nirmatrelvir tablets (150 mg each) and 2 ritonavir tablets (100 mg each). Nirmatrelvir tablets and ritonavir tablets are supplied in separate blister cavities within the same child-resistant blister card.

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<sup>10</sup> Patients requiring hospitalization due to severe or critical COVID-19 after starting treatment with PAXLOVID may complete the full 5-day treatment course per the healthcare provider's discretion.

<sup>11</sup> The term "State" includes any State or Territory of the United States, the District of Columbia, and the Commonwealth of Puerto Rico. See Section 201(a)(1) of the Act.

- *150 mg nirmatrelvir; 100 mg ritonavir*<sup>12</sup>: Each carton contains 20 tablets divided in 5 daily-dose blister cards. Each blister card contains 2 nirmatrelvir tablets (150 mg each) and 2 ritonavir tablets (100 mg each). Nirmatrelvir tablets and ritonavir tablets are supplied in separate blister cavities within the same child-resistant blister card.

The authorized storage and handling information for PAXLOVID is included in the authorized Fact Sheet for Healthcare Providers.

PAXLOVID is authorized for emergency use with the following product-specific information required to be made available to healthcare providers and to patients, parents, and caregivers, respectively, through Pfizer’s website [www.COVID19oralRX.com](http://www.COVID19oralRX.com) (referred to as the “authorized labeling”):

- Fact Sheet for Healthcare Providers: Emergency Use Authorization (EUA) for PAXLOVID
- Fact Sheet for Patients, Parents and Caregivers: Emergency Use Authorization (EUA) of PAXLOVID for Coronavirus Disease 2019 (COVID-19)

I have concluded, pursuant to Section 564(d)(2) of the Act, that it is reasonable to believe that the known and potential benefits of PAXLOVID, when used for the treatment of COVID-19 and used in accordance with this Scope of Authorization (Section II), outweigh the known and potential risks.

I have concluded, pursuant to Section 564(d)(3) of the Act, based on the totality of scientific evidence available to FDA, that it is reasonable to believe that PAXLOVID may be effective for the treatment of COVID-19 when used in accordance with this Scope of Authorization (Section II), pursuant to Section 564(c)(2)(A) of the Act.

Having reviewed the scientific information available to FDA, including the information supporting the conclusions described in Section I above, I have concluded that PAXLOVID (as described in this Scope of Authorization (Section II)) meets the criteria set forth in Section 564(c) of the Act concerning safety and potential effectiveness.

The emergency use of PAXLOVID under this EUA must be consistent with, and may not exceed, the terms of the Authorization, including the Scope of Authorization (Section II) and the Conditions of Authorization (Section III). Subject to the terms of this EUA and under the circumstances set forth in the Secretary of HHS's determination under Section 564(b)(1)(C) described above and the Secretary of HHS’s corresponding declaration under Section 564(b)(1), PAXLOVID is authorized for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high risk for progression to severe COVID-19, including hospitalization or death, as described in the Scope of Authorization (Section II) under this EUA, despite the fact that it does not meet certain requirements otherwise required by applicable federal law.

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<sup>12</sup> The 150 mg nirmatrelvir; 100 mg ritonavir dose pack presentation is designed to provide appropriate dosing for patients within the scope of this authorization with moderate renal impairment. See section 2.2 of the Fact Sheet for Healthcare Providers for more information.

### III. Conditions of Authorization

Pursuant to Section 564 of the Act, I am establishing the following conditions on this authorization:

#### Pfizer and Authorized Distributors<sup>13</sup>

- A. Pfizer and authorized distributor(s) will ensure that PAXLOVID is distributed and the authorized labeling (i.e., Fact Sheets) will be made available to healthcare facilities and/or healthcare providers as described in Section II of this Letter of Authorization.
- B. Pfizer and authorized distributor(s) will ensure that appropriate storage is maintained until the product is delivered to healthcare facilities and/or healthcare providers.
- C. Pfizer and authorized distributor(s) will ensure that the terms of this EUA are made available to all relevant stakeholders (e.g., U.S. government agencies, state and local government authorities, authorized distributors, healthcare facilities, healthcare providers) involved in distributing or receiving PAXLOVID. Pfizer will provide to all relevant stakeholders a copy of this Letter of Authorization and communicate any subsequent amendments that might be made to this Letter of Authorization and its authorized accompanying materials (i.e., Fact Sheets).
- D. Pfizer may request changes to this authorization, including to the authorized Fact Sheets for PAXLOVID. Any request for changes to this EUA must be submitted to the Office of Infectious Diseases/Office of New Drugs/Center for Drug Evaluation and Research. Such changes require appropriate authorization prior to implementation.<sup>14</sup>
- E. Pfizer may develop and disseminate instructional and educational materials (e.g., materials providing information on product administration and/or patient monitoring) that are consistent with the authorized emergency use of PAXLOVID as described in this Letter of Authorization and authorized labeling, without FDA's review and concurrence, when necessary to meet public health needs. Any instructional and educational materials that are inconsistent with the authorized labeling for PAXLOVID are prohibited. If the Agency notifies Pfizer that any instructional and educational materials are inconsistent with the authorized labeling, Pfizer must cease distribution of such instructional and educational materials. Furthermore, as part of its notification, the Agency may also require Pfizer to issue corrective communication(s).

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<sup>13</sup> Supra at Note 8.

<sup>14</sup> The following types of revisions may be authorized without reissuing this letter: (1) changes to the authorized labeling; (2) non-substantive editorial corrections to this letter; (3) new types of authorized labeling, including new fact sheets; (4) new carton/container labels; (5) expiration dating extensions; (6) changes to manufacturing processes, including tests or other authorized components of manufacturing; (7) new conditions of authorization to require data collection or study; (8) new strengths of the authorized product, new product sources (e.g., of active pharmaceutical ingredient) or of product components. For changes to the authorization, including the authorized labeling, of the type listed in (3), (6), (7), or (8), review and concurrence is required from the Counter-Terrorism and Emergency Coordination Staff/Office of the Center Director/CDER and the Office of Counterterrorism and Emerging Threats/Office of the Chief Scientist.

- F. Pfizer will report to FDA all serious adverse events and medication errors potentially related to PAXLOVID use that are reported to Pfizer using either of the following options.

Option 1: Submit reports through the Safety Reporting Portal (SRP) as described on the [FDA SRP](#) web page.

Option 2: Submit reports directly through the Electronic Submissions Gateway (ESG) as described on the [FAERS electronic submissions](#) web page.

Submitted reports under both options must state: “PAXLOVID use for COVID-19 under Emergency Use Authorization (EUA).” For reports submitted under Option 1, include this language at the beginning of the question “Describe Event” for further analysis. For reports submitted under Option 2, include this language at the beginning of the “Case Narrative” field.

- G. All manufacturing, packaging, and testing sites for both drug substance and drug product will comply with current good manufacturing practice requirements of Section 501(a)(2)(B) of the Act.

- H. Pfizer will submit information to the Agency within three working days of receipt of any information concerning significant quality problems with distributed drug product of PAXLOVID that includes the following:

- Information concerning any incident that causes the drug product or its labeling to be mistaken for, or applied to, another article; or
- Information concerning any microbiological contamination, or any significant chemical, physical, or other change or deterioration in the distributed drug product, or any failure of one or more distributed batches of the product to meet the established specifications.

If a significant quality problem affects unreleased product and may also impact product(s) previously released and distributed, then information must be submitted for all potentially impacted lots.

Pfizer will include in its notification to the Agency whether the batch, or batches, in question will be recalled. If FDA requests that these, or any other batches, at any time, be recalled, Pfizer must recall them.

If not included in its initial notification, Pfizer must submit information confirming that Pfizer has identified the root cause of the significant quality problems, taken corrective action, and provide a justification confirming that the corrective action is appropriate and effective. Pfizer must submit this information as soon as possible but no later than 45 calendar days from the initial notification.

- I. Pfizer will manufacture PAXLOVID to meet all quality standards and per the manufacturing process and control strategy as detailed in Pfizer’s EUA request. Pfizer will

not implement any changes to the description of the product, manufacturing process, facilities and equipment, and elements of the associated control strategy that assure process performance and quality of the authorized product, without notification to and concurrence by the Agency as described under Condition D.

- J. Pfizer will list each presentation of PAXLOVID with a unique product NDC under the marketing category of Emergency Use Authorization. Further, the listing will include each establishment where manufacturing is performed for the drug and the type of operation performed at each such establishment.
- K. Through a process of inventory control, Pfizer and authorized distributor(s) will maintain records regarding distribution of PAXLOVID (i.e., lot numbers, quantity, receiving site, receipt date).
- L. Pfizer will establish a process for monitoring genomic database(s) for the emergence of global viral variants of SARS-CoV-2 and will provide reports to the Agency on a monthly basis summarizing any findings as a result of its monitoring activities and, as needed, any follow-up assessments planned or conducted. Updated data listings summarizing amino acid variability should be provided at least monthly for Mpro amino acid sequences, and at least every 2 months for Mpro cleavage site amino acid sequences. The data listings should include a cumulative list of amino acid polymorphisms detected in genomic database(s), highlighting changes/variants that are increasing in frequency from the previous month.
- M. FDA may require Pfizer to assess the activity of the authorized PAXLOVID against any global SARS-CoV-2 variant(s) of interest (e.g., variants that are prevalent or becoming prevalent that harbor substitutions in the target protein or in protein(s) that interact with the target protein). Pfizer will perform the required assessment in a manner and timeframe agreed upon by Pfizer and the Agency. Pfizer will submit to FDA a preliminary summary report immediately upon completion of its assessment followed by a detailed study report within 30 calendar days of study completion. Pfizer will submit any relevant proposal(s) to revise the authorized labeling based on the results of its assessment, as may be necessary or appropriate based on the foregoing assessment.
- N. Pfizer shall provide samples as requested of the authorized nirmatrelvir to HHS for evaluation of activity against emerging global viral variants of SARS-CoV-2, including specific amino acid substitution(s) of interest (e.g., variants that are highly prevalent or that harbor substitutions in the target protein(s) or target cleavage sites) within 5 business days of any request made by HHS. Analyses performed with the supplied quantity of authorized nirmatrelvir may include, but are not limited to, cell culture potency assays, biochemical assays, and in vivo efficacy assays.
- O. Pfizer must provide the following information to the Agency:



1. Pfizer must conduct cell culture phenotypic analyses of recombinant SARS-CoV-2 viruses or replicons carrying specific amino acid changes potentially associated with reduced nirmatrelvir susceptibility in nonclinical or clinical studies, or polymorphisms emerging in novel SARS-CoV-2 variants. Specific amino acid changes that should be characterized include the following:
  - amino acid changes associated with reduced nirmatrelvir susceptibility in biochemical assays,
  - natural amino acid polymorphisms in Mpro that come in contact with or in close proximity (<5 Å) to bound nirmatrelvir,
  - amino acid changes associated with nirmatrelvir/ritonavir treatment emergence, treatment failure, or prolonged virologic shedding or rebound in clinical trials, and
  - amino acid polymorphisms identified in resistance surveillance analyses.

Amino acid changes in both Mpro and Mpro cleavage sites should be considered in these analyses. Specific amino acid changes of interest for phenotypic characterization in cell culture assays currently include Mpro substitutions Y54A, E55L, F140A, S144A, E166A, H172Y, Q189K, and A260V. When warranted due to technical challenges, alternative approaches to the requested cell culture assays will be considered on a case-by-case basis. Pfizer must submit an updated summary report no later than July 31, 2022 for any currently ongoing studies, and at least every 6 months thereafter as additional data accumulate.

2. Pfizer must complete analyses of SARS-CoV-2 shedding and nucleotide sequencing from the EPIC-HR clinical trial. Viral sequencing analyses should be conducted for all clinical samples with sufficient viral RNA levels, including samples collected at baseline, on-treatment and post-treatment, to identify and characterize the potential emergence or persistence of amino acid changes associated with PAXLOVID treatment. Pfizer must submit preliminary reports of these analyses by July 31, 2022, and final reports, including complete SARS-CoV-2 RNA and infectivity analyses, NGS quality control assessments, analysis-ready datasets, and final raw fastq NGS datasets by December 31, 2022.
3. Pfizer will provide topline results from a safety and pharmacokinetic study evaluating PAXLOVID as treatment of mild-to-moderate COVID-19 in patients with severe renal impairment (for both patients requiring and not requiring hemodialysis) no later than February 28, 2023.
4. Pfizer will conduct a randomized placebo-controlled trial in patients with “COVID-19 rebound” following an initial treatment course of PAXLOVID to evaluate a subsequent 5-day treatment course of PAXLOVID. Pfizer will provide topline results by September 30, 2023.
5. Pfizer will conduct a randomized controlled trial to evaluate different durations of PAXLOVID treatment in immunocompromised patients with mild-to-moderate COVID-19. Pfizer will provide topline results by September 30, 2023.

- P. Pfizer and authorized distributor(s) will make available to FDA upon request any records maintained in connection with this EUA.

Healthcare Facilities to Whom PAXLOVID Is Distributed and Healthcare Providers Administering PAXLOVID

- Q. Healthcare facilities and healthcare providers will ensure that they are aware of the Letter of Authorization, and the terms herein, and that the authorized Fact Sheets are made available to healthcare providers and to patients, parents, and caregivers, respectively, through appropriate means, prior to administration of PAXLOVID.
- R. Healthcare facilities and healthcare providers receiving PAXLOVID will track all serious adverse events and medication errors that are considered to be potentially related to PAXLOVID use and must report these to FDA in accordance with the Fact Sheet for Healthcare Providers. Complete and submit a MedWatch form ([www.fda.gov/medwatch/report.htm](http://www.fda.gov/medwatch/report.htm)), or complete and submit FDA Form 3500 (health professional) by fax (1-800-FDA-0178) (these forms can be found via link above). Call [1-800-FDA-1088](tel:1-800-FDA-1088) for questions. Submitted reports must state, “PAXLOVID use for COVID-19 under Emergency Use Authorization” at the beginning of the question “Describe Event” for further analysis. A copy of the completed FDA Form 3500 must also be provided to Pfizer per the instructions in the authorized labeling.
- S. Healthcare facilities and healthcare providers will ensure that appropriate storage is maintained until the product is administered consistent with the terms of this letter and the authorized labeling.
- T. Through a process of inventory control, healthcare facilities will maintain records regarding the dispensing and administration of PAXLOVID for the use authorized in this letter (i.e., lot numbers, quantity, receiving site, receipt date), product storage, and maintain patient information (e.g., patient name, age, disease manifestation, number of doses administered per patient, other drugs administered).
- U. Healthcare facilities will ensure that any records associated with this EUA are maintained until notified by Pfizer and/or FDA. Such records will be made available to Pfizer, HHS, and FDA for inspection upon request.
- V. Healthcare facilities and providers will report therapeutics information and utilization data as directed by HHS.

Conditions Related to Printed Matter, Advertising, and Promotion

- W. All descriptive printed matter, advertising, and promotional materials relating to the use of PAXLOVID under this authorization shall be consistent with the authorized labeling, as well as the terms set forth in this EUA, and meet the requirements set forth in Section 502(a) and (n) of the Act, as applicable, and FDA implementing regulations. References to “approved labeling”, “permitted labeling”, or similar terms in these requirements shall be

understood to refer to the authorized labeling for the use of PAXLOVID under this authorization. In addition, such materials shall:

- Be tailored to the intended audience.
- Not take the form of reminder advertisements, as that term is described in 21 CFR 202.1(e)(2)(i), 21 CFR 200.200 and 21 CFR 201.100(f).
- Present the same risk information relating to the major side effects and contraindications concurrently in the audio and visual parts of the presentation for advertising and promotional materials in audio-visual format.
- Be accompanied by the authorized labeling, if the promotional materials are not subject to Section 502(n) of the Act.
- Be submitted to FDA accompanied by Form FDA-2253 for consideration at least 14 calendar days prior to initial dissemination or first use.

X. Pfizer may disseminate descriptive printed matter, advertising, and promotional materials relating to the emergency use of PAXLOVID that provide accurate descriptions of safety results and efficacy results on a clinical endpoint(s) from the clinical trial(s) summarized in the authorized labeling. Such materials must include any limitations of the clinical trial data as described in the authorized labeling. Pfizer may not imply that PAXLOVID is FDA-approved for its authorized use by making statements such as “PAXLOVID is safe and effective for the treatment of COVID-19.”

Y. All descriptive printed matter, advertising, and promotional material, relating to the use of PAXLOVID under this authorization clearly and conspicuously shall state that:

- PAXLOVID has not been approved, but has been authorized for emergency use by FDA under an EUA, for the treatment of mild-to-moderate COVID-19 in adults and pediatric patients (12 years of age and older weighing at least 40 kg) with positive results of direct SARS-CoV-2 viral testing, and who are at high-risk for progression to severe COVID-19, including hospitalization or death; and
- The emergency use of PAXLOVID is only authorized for the duration of the declaration that circumstances exist justifying the authorization of the emergency use of drugs and biological products during the COVID-19 pandemic under Section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the declaration is terminated or authorization revoked sooner.

If the Agency notifies Pfizer that any descriptive printed matter, advertising, or promotional materials do not meet the terms set forth in Conditions W through Y of this EUA, Pfizer must cease distribution of such descriptive printed matter, advertising, or promotional materials in accordance with the Agency’s notification. Furthermore, as part of its notification, the Agency may also require Pfizer to issue corrective communication(s).

#### **IV. Duration of Authorization**

This EUA will be effective until the declaration that circumstances exist justifying the authorization of the emergency use of drugs and biological products during the COVID-19 pandemic is terminated under Section 564(b)(2) of the Act or the EUA is revoked under Section 564(g) of the Act.

Sincerely,

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Patrizia Cavazzoni, M.D.  
Director  
Center for Drug Evaluation and Research  
U.S. Food and Drug Administration