STN 125742/0 CBER Received Date May 18, 2021 PDUFA Goal Date Division / Office OVRR Committee Chair Project Manager Project Manager Mike Smith and Laura Gottschalk Priority Review Yes Xinyu Tang Review Completion Date / Stamped Date Concurrence Lei Huang, Concurring Reviewer, VEB, DB, OBE Concurrence Tsai-Lien Lin, Branch Chief, VEB, DB, OBE Simplicant John A. Scott, Director, DB, OBE Applicant Simplicant Simplification Simplification including Adjuvants, etc. Posage Form and Route of Administration Dosing Regimen Indication and Intended Population Indication and Intended Population Tivision VRR May 18, 2021 Samuary 16, 2022 OVRR Ramachandra Naik Xiao Wang Mike Smith and Laura Gottschalk Yes Xinyu Tang BioNTech Manufacturing Reviewer, VEB, DB, OBE Simblification Adjuvants, etc. COVID-19 Vaccine, mRNA COMIRNATY® Vaccine After preparation, each 0.3 mL dose contains 30 μg modified mRNA encoding SARS-CoV-2 spike glycoprotein Injectable Suspension, Intramuscular Active immunization to prevent coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)	A 1' 4' TD	O : : 1 DI A
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Indication and Intended Population Active immunization to prevent coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)	Administration	
Indication and Intended Population 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)	Dosing Regimen	•
in individuals 16 years of age and older	Indication and Intended Population	2019 (COVID-19) caused by severe acute

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GLOSSARY

BLA biologics license application

CI confidence interval

COVID-19 Coronavirus Disease 2019

DL detection limit

dLIA direct Luminex assay

DP drug product

DPC drug product control
DS drug substance
GMT geometric mean titer
IR information request

LLOQ lower limit of quantitation

IM intramuscular

IND Investigational New Drug application

LNP lipid nanoparticle LOD limit of detection

(b) (4)

mRNA messenger RNA

RSD relative standard deviation

SARS-CoV-2 severe acute respiratory syndrome coronavirus-2

SARS-CoV-2 mNG NT SARS-CoV-2 mNeonGreen virus microneutralization assay

S/N signal-to-noise

TDV Titer Determining Value
ULOQ upper limit of quantitation
VCA variance components analysis

1. Executive Summary

BioNTech and Pfizer submitted an original Biologics License Application (BLA) on May 18, 2021 for BNT162b2. BNT162b2 is a prophylactic vaccine that prevents Coronavirus Disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2). The proposed indication is active immunization to prevent COVID-19 caused by SARS-CoV-2 in individuals \geq 16 years of age. The proposed dosage is 30 µg via intramuscular (IM) injection following a dosing regimen of two 0.3-mL doses given three weeks apart.

This review memo focuses on the statistical review of the non-clinical aspects of this submission, including the validation of the clinical immunogenicity assay as well as the in-vitro potency assay. Specifically, this review memo covers:

- the validation of the SARS-CoV-2 mNeonGreen virus microneutralization assay (SARS-CoV-2 mNG NT) for the detection of serum antibodies capable of neutralizing SARS-CoV-2 (VR-MVR-10083), and
- the validation of Test Method TM100010380 v5.0 for determination of the (b) (4) of PF-07302048 (BNT162b2 construct, Drug Product) by (b) (4) (VAL100147509)

based on the validation reports submitted in Module 5.3.1.4 of BLA125742/0.0 and Module 3.2.R of BLA125741/0.19, which have not been reviewed previously.

With respect to the validation of the SARS-CoV-2 mNG NT assay, results from the validation study suggest acceptable accuracy and precision. The limit of detection (LOD), lower limit of quantitation (LLOQ), and upper limit of quantitation (ULOQ) were determined to be (b) (4) , respectively. The LOD study demonstrated an acceptable false positive rate but did not evaluate the false negative rate at the LOD. Because this assay was not used in the determination of serostatus in clinical studies included in this BLA submission, the unknown false negative rate does not impact the approval of this BLA. However, the false negative rate may be a concern in the future, depending on future use of this assay.

With respect to the validation of Test Method TM100010380 v5.0 (referred to as the assay hereafter), results from the validation study suggest acceptable specificity and robustness to (b) (4)

The detection limit (DL) was determined to be (b) (4)

The repeatability and reproducibility of the assay were estimated to be (b) (4)

relative standard deviation (RSD), respectively. Since the (b) (4)

assay was validated as a limit test, the repeatability and reproducibility results were evaluated for information only.

In conclusion, I consider both the SARS-CoV-2 mNG NT and (b) (4) assays adequate for their intended uses in support of this BLA.

2. Regulatory Background

The Investigational New Drug Application (IND19736) for BNT162b2 was submitted on April 29, 2020. Fast Track Designation was granted on July 7, 2020 for individuals 18 years of age and older. On December 11, 2020, Emergency Use Authorization (EUA 27034) of BNT162b2 for active immunization to prevent COVID-19 in individuals 16 years of age and older was granted (EUA product identified as Pfizer-BioNTech COVID-19 Vaccine). BioNTech and Pfizer submitted this BLA on May 18, 2021 for BNT162b2.

The following documents regarding clinical assays were submitted in Module 5.3.1.4 of BLA125741/0.0:

- Report on Method Validation of a Cepheid Xpert® Xpress PCR Assay to Detect SARS-CoV-2 (VR-MVR-10080, Version 3.0),
- Method Validation Report for the Elecsys Anti-SARS-CoV-2 Assay (VR-MVR-10081, Version 2.0),
- Qualification Report for a (b) (4) Direct Luminex Assay (dLIA) for Quantitation of IgG Antibodies to SARS-CoV-2 S1 Protein in Human Sera (VR-MQR-10211, Version 2.0),
- Qualification Report for a (b) (4) Direct Luminex Assay (dLIA) for Quantitation of IgG Antibodies to SARS-CoV-2 RBD Protein in Human Sera (VR-MQR-10212, Version 2.0),

- Qualification of the SARS-CoV-2 mNeonGreen Virus Microneutralization Assay (VR-MQR-10214, Version 2.0), and
- Method Validation of the SARS-CoV-2 mNeonGreen Virus Microneutralization Assay (VR-MVR-10083, Version 1.0).

All these qualification and validation reports have been reviewed during the IND stage, except for the validation report for the SARS-CoV-2 mNG NT assay, which is covered in this review memo.

The following document regarding the potency assay was submitted in Module 3.2.R of BLA125741/0.19:

• Report for Co-Validation of Test Method TM100010380 – Determination of the of PF-07302048 (BNT162b2 Construct, Drug Product) by (VAL100147509, Version 1.0).

This validation report has not been previously reviewed during the IND stage and is covered in this review memo as well.

3. Sources of Data and Other Information Considered in the Review

The following documents submitted to the BLA are reviewed:

- Method Validation of the SARS-CoV-2 mNeonGreen virus microneutralization assay used for the detection of serum antibodies capable of neutralizing SARS-CoV-2 (VR-MVR-10083, Version 1.0) (BLA125742/0.0, dated February 9, 2021, received May 6, 2021),
- Report for Co-Validation of Test Method TM100010380 Determination of the of PF-07302048 (BNT162b2 Construct, Drug Product) by (b) (4) (VAL100147509, Version 1.0) (BLA125742/0.19, Module 3.2.R, dated July 16, 2021, received July 28, 2021).
- Response to 04 Aug 2021 FDA Information Request (IR) (BLA125742/0.34, Module 1.11.1, dated August 6, 2021, received August 6, 2021), and
- Validation of Analytical Procedure (b) (4) (BLA125742/0.34, Module 3.2.P.5.3, dated August 6, 2021, received August 6, 2021).

The following document submitted to the IND is also referred to when reviewing the validation of the SARS-CoV-2 mNG NT assay:

- Validation Protocol for the SARS-CoV-2 mNeonGreen Virus Microneutralization Assay (VR-MVP-10074, Version 2.0) (IND19736/157, Module 5.3.1.4, dated December 2, 2020, received December 4, 2020).
- 4. REVIEW OF THE METHOD VALIDATION OF THE SARS-COV-2 MNEONGREEN VIRUS MICRONEUTRALIZATION ASSAY

4.1 Introduction

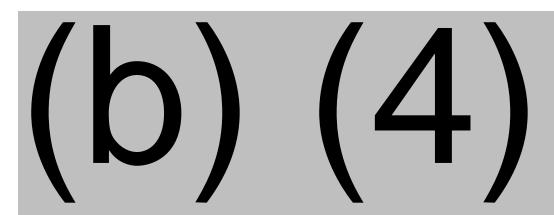
The SARS-CoV-2 mNG NT assay is a biofunctional assay that measures neutralizing antibodies against SARS-CoV-2. This assay is described in Test Method VR-TM-10298. Briefly, (b) (4)



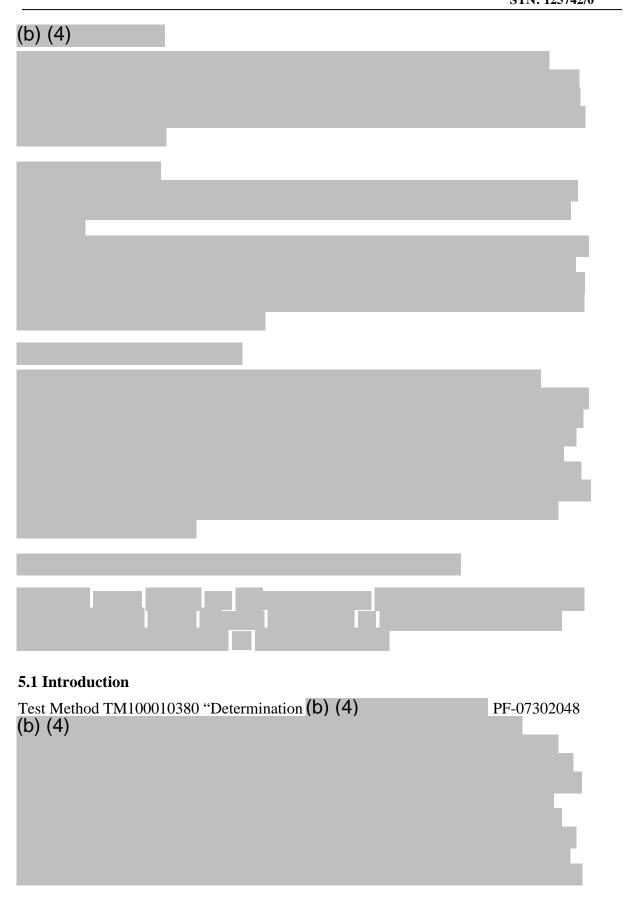
This validation study evaluated assay (b) (4) linearity, precision, limit of detection, and intermediate precision. The (b) (4) linearity and precision results were used to define the limits of quantitation and extravariability criterion.

4.2 Experimental Design

Validation of the SARS-CoV-2 mNG NT assay was performed as described in the validation protocol (VR-MVP-10074). (b) (4)









5.2 Validation Outline

This validation report contains the results of validation study conducted according to the following method validation protocols:

- VAL100138078, V1.0 Protocol for co-validation of test method TM100010380, which was the original method validation protocol to evaluate repeatability, reproducibility, specificity, and detection limit,
- INX100459445, V1.0 Amendment for protocol for co-validation of test method TM100010380, which was an amendment to original method validation protocol VAL100138078 to evaluate the robustness of (b) (4) during reproducibility studies.

