23 June 2011
EMA/CHMP/494254/2011
Committee for Medicinal Products for Human Use (CHMP)

Summary of opinion¹ (post authorisation)

Vectibix
panitumumab

On 23 June 2011 the Committee for Medicinal Products for Human Use (CHMP) adopted a positive opinion recommending a variation to the terms of the marketing authorisation for the medicinal product Vectibix. The marketing authorisation holder for this medicinal product is Amgen Europe B.V. They may request a re-examination of the CHMP opinion, provided that they notify the European Medicines Agency in writing of their intention within 15 days of receipt of the opinion.

The CHMP adopted a new indication as follows:
“Vectibix is indicated for the treatment of patients with wild-type KRAS metastatic colorectal cancer (mCRC):

• in first-line in combination with FOLFOX
• in second-line in combination with FOLFIRI for patients who have received first-line fluoropyrimidine-based chemotherapy (excluding irinotecan)”.

Detailed conditions for the use of this product will be described in the updated summary of product characteristics (SmPC), which will be published in the revised European public assessment report (EPAR), and will be available in all official European Union languages after the variation to the marketing authorisation has been granted by the European Commission.

For information, the full indication for Vectibix will be as follows²:

Vectibix is indicated for the treatment of patients with wild-type KRAS metastatic colorectal cancer (mCRC):

• in first-line in combination with FOLFOX
• in second-line in combination with FOLFIRI for patients who have received first-line fluoropyrimidine-based chemotherapy (excluding irinotecan)

¹ Summaries of positive opinion are published without prejudice to the commission decision, which will normally be issued within 44 days (Type II variations) and 67 days (Annex II applications) from adoption of the opinion.
² The text in bold represents the new or the amended indication.
- as monotherapy after failure of fluoropyrimidine-, oxaliplatin-, and irinotecan-containing chemotherapy regimens