

EMA/556402/2015

# European Medicines Agency decision P/0186/2015

of 27 August 2015

on the acceptance of a modification of an agreed paediatric investigation plan for human normal immunoglobulin (HyQvia) (EMEA-000872-PIP01-10-M03) in accordance with Regulation (EC) No 1901/2006 of the European Parliament and of the Council

#### Disclaimer

This Decision does not constitute entitlement to the rewards and incentives referred to in Title V of Regulation (EC) No 1901/2006.

#### Only the English text is authentic.



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The European Medicines Agency,

Having regard to the Treaty on the Functioning of the European Union,

Having regard to Regulation (EC) No 1901/2006 of the European Parliament and of the Council of 12 December 2006 on medicinal products for paediatric use and amending Regulation (EEC) No. 1768/92, Directive 2001/20/EC, Directive 2001/83/EC and Regulation (EC) No 726/2004<sup>1</sup>,

Having regard to Regulation (EC) No 726/2004 of the European Parliament and of the Council of 31 March 2004 laying down Community procedures for the authorisation and supervision of medicinal products for human and veterinary use and establishing a European Medicines Agency<sup>2</sup>,

Having regard to the European Medicines Agency's decision P/306/2010 issued on 22 December 2010, the decision P/0172/2012 issued on 27 July 2012, and the decision P/0278/2014 issued on 30 October 2014,

Having regard to the application submitted by Baxalta Innovations GmbH on 22 April 2015 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a deferral and a waiver,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 4 August 2015, in accordance with Article 22 of Regulation (EC) No 1901/2006,

Having regard to Article 25 of Regulation (EC) No 1901/2006,

Whereas:

- (1) The Paediatric Committee of the European Medicines Agency has given an opinion on the acceptance of changes to the agreed paediatric investigation plan.
- (2) It is therefore appropriate to adopt a decision on the acceptance of changes to the agreed paediatric investigation plan.

<sup>2</sup> OJ L 136, 30.4.2004, p. 1.

<sup>&</sup>lt;sup>1</sup> OJ L 378, 27.12.2006, p.1.

Has adopted this decision:

#### Article 1

Changes to the agreed paediatric investigation plan for human normal immunoglobulin (HyQvia), solution for infusion, subcutaneous use, are hereby accepted in the scope set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices.

#### Article 2

This decision is addressed to Baxalta Innovations GmbH, Industriestrasse 67, A-1221 – Vienna, Austria.

Done at London, 27 August 2015

For the European Medicines Agency Jordi Llinares Garcia Head of Division (ad interim) Human Medicines Research and Development Support (Signature on file)



EMA/PDCO/315933/2015 Rev London, 4 August 2015

# Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMEA-000872-PIP01-10-M03

#### Scope of the application

#### Active substance(s):

Human normal immunoglobulin

#### Invented name:

HyQvia

#### Condition(s):

Treatment of primary immunodeficiency (PID) as model for replacement therapy

#### Authorised indication(s):

See Annex II

#### Pharmaceutical form(s):

Solution for infusion

#### Route(s) of administration:

Subcutaneous use

#### Name/corporate name of the PIP applicant:

Baxalta Innovations GmbH

#### Information about the authorised medicinal product:

See Annex II





#### Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Baxalta Innovations GmbH submitted to the European Medicines Agency on 22 April 2015 an application for modification of the agreed paediatric investigation plan with a deferral and a waiver as set out in the European Medicines Agency's decision P/306/2010 issued on 22 December 2010, the decision P/0172/2012 issued on 27 July 2012, and the decision P/0278/2014 issued on 30 October 2014.

The application for modification proposed changes to the agreed paediatric investigation plan.

The procedure started on 19 May 2015.

#### Scope of the modification

Some measures of the Paediatric Investigation Plan have been modified.

#### Opinion

- The Paediatric Committee, having assessed the application in accordance with Article 22 of Regulation (EC) No 1901/2006 as amended, recommends as set out in the appended summary report:
  - to agree to changes to the paediatric investigation plan in the scope set out in the Annex I of this opinion.

The Norwegian Paediatric Committee member agrees with the above-mentioned recommendation of the Paediatric Committee.

2. The measures and timelines of the paediatric investigation plan and the subset(s) of the paediatric population and condition(s) covered by the waiver are set out in the Annex I.

This opinion is forwarded to the applicant and the Executive Director of the European Medicines Agency, together with its annexes and appendix.

### Annex I

The subset(s) of the paediatric population and condition(s) covered by the waiver and the measures and timelines of the agreed paediatric investigation plan (PIP)

### 1. Waiver

#### 1.1. Condition

Treatment of primary immunodeficiency (PID) as model for replacement therapy

This covers:

- primary immunodeficiency syndrome such as, but not limited to congenital agammaglobulinaemia and hypogammaglobulinaemia, common variable immunodeficiency, severe combined immunodeficiency, IgG subclass deficiencies with recurrent infections;
- myeloma or chronic lymphocytic leukaemia with hypogammaglobulinaemia.

The waiver applies to:

- all subsets of the paediatric population from birth to less than 24 months of age;
- for solution for infusion for subcutaneous use;
- on the grounds that clinical studies cannot be expected to be of significant therapeutic benefit to or fulfil a therapeutic need of the paediatric population.

## 2. Paediatric Investigation Plan

#### 2.1. Condition

Treatment of primary immunodeficiency (PID) as model for replacement therapy

#### 2.1.1. Indication(s) targeted by the PIP

Treatment of congenital agammaglobulinaemia and hypogammaglobulinaemia

Treatment of common variable immunodeficiency

Treatment of severe combined immunodeficiency

Treatment of IgG subclass deficiencies with recurrent infections

Replacement therapy in myeloma or chronic lymphocytic leukaemia with severe secondary hypogamma-globulinaemia and recurrent infections

# 2.1.2. Subset(s) of the paediatric population concerned by the paediatric development

From 24 months to less than 18 years of age

#### 2.1.3. Pharmaceutical form(s)

Solution for infusion for subcutaneous use

#### 2.1.4. Measures

Area	Number of studies	Description
Quality-related studies	0	Not applicable
Non-clinical studies	3	Study 4 (12124)
		Pilot immunization study to assess the incidence, time course and magnitude of circulating anti-rHuPH20 antibodies after subcutaneous administration of recombinant human hyaluronidase
		Study 5 (12208)
		Male rabbit fertility and general reproduction study to support the relevance of the rabbit model for evaluating the potential effects of anti-rHuPH20 antibodies on male fertility
		Study 6 (12195)
		Fertility and embryofoetal development study with postnatal assessment in female rabbits
Clinical studies	3	Study 1 (160601)
		Open-label, multi-centre study to evaluate the tolerability and pharmacokinetics of 10% human normal immunoglobulin (IGIV, 10%) administered intravenously or subcutaneously in patients with primary immunodeficiency disease
		Study 2 (160603)
		Open-label, multi-centre study to evaluate efficacy, tolerability and pharmacokinetics of 10% immune globulin (IGIV, 10%) administered intravenously compared to IGIV, 10% administered subcutaneously following administration of recombinant human hyaluronidase (rHuPH20) in patients with primary immunodeficiency disease
		Study 3 (160902)
		Open-label study to evaluate the tolerability and safety of subcutaneous immune globulin solution administered following administration of recombinant human hyaluronidase (rHuPH20) in subjects with primary Immunodeficiency Diseases (PID)
Extrapolation, modelling and simulation studies	0	Not applicable
Other studies	0	Not applicable
Other measures	0	Not applicable

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# 3. Follow-up, completion and deferral of PIP

Concerns on potential long term safety issues in relation to paediatric use:	Yes
Date of completion of the paediatric investigation plan:	By October 2015
Deferral for one or more studies contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

#### Condition(s) and authorised indication(s):

1. Treatment of primary immunodeficiency (PID) as model for replacement therapy

Authorised indication(s):

- congenital agammaglobulinaemia and hypogammaglobulinaemia;
- common variable immunodeficiency;
- severe combined immunodeficiency;
- IgG subclass deficiencies with recurrent infections;
- replacement therapy in adults (> 18 years) in myeloma or chronic lymphocytic leukaemia with severe secondary hypogammaglobulinaemia and recurrent infections.

#### Authorised pharmaceutical form(s):

Solution for infusion

#### Authorised route(s) of administration:

Subcutaneous use