EMA/421332/2018

European Medicines Agency decision

P/0205/2018

of 19 July 2018

on the acceptance of a modification of an agreed paediatric investigation plan for Ticagrelor (Brilique), (EMEA-000480-PIP01-08-M11) 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.

30 Churchill Place ● Canary Wharf ● London E14 5EU ● United Kingdom
Telephone +44 (0)20 3660 6000 **Facsimile** +44 (0)20 3660 5555
Contact EMA www.ema.europa.eu/contact

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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[1],

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[2],

Having regard to the European Medicines Agency's decision P/199/2009, issued on 2 October 2009, the decision P/30/2011 issued on 28 January 2011, the decision P/239/2011 issued on 30 September 2011, the decision P/0020/2012 issued on 27 January 2012, the decision P/0255/2012 issued on 26 October 2012 and the decision P/0295/2014 issued on 30 October 2014, the decision P/0298/2015 issued on 21 December 2015 and the decision P/0170/2017 issued on 3 July 2017,

Having regard to the application submitted by AstraZeneca AB on 9 March 2018 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a deferral,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 1 June 2018, 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 and to the deferral.

(2) It is therefore appropriate to adopt a decision on the acceptance of changes to the agreed paediatric investigation plan, including changes to the deferral.

[1] OJ L 378, 27.12.2006, p.1.
[2] OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for ticagrelor (Brilique), film-coated tablet, granules for oral suspension, tablet, orodispersible tablet, age-appropriate oral dosage form, oral use, including changes to the deferral, 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 AstraZeneca AB, SE-151 85 – Södertalje - Sweden

EMA/PDCO/169390/2018
London, 1 June 2018

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan

EMEA-000480-PIP01-08-M11

Scope of the application

Active substance(s):

Ticagrelor

Invented name:

Brilique

Condition(s):

Prevention of thromboembolic events

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Film-coated tablet

Granules for oral suspension

Tablet

Orodispersible tablet

Age-appropriate oral dosage form

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

AstraZeneca AB

Information about the authorised medicinal product:

See Annex II

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Telephone +44 (0)20 3660 6000 **Facsimile** +44 (0)20 3660 5555
Send a question via our website www.ema.europa.eu/contact

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, AstraZeneca AB submitted to the European Medicines Agency on 9 March 2018 an application for modification of the agreed paediatric investigation plan with a deferral as set out in the European Medicines Agency's decision P/199/2009 issued on 2 October 2009, the decision P/30/2011 issued on 28 January 2011, the decision P/239/2011 issued on 30 September 2011, the decision P/0020/2012 issued on 27 January 2012, the decision P/0255/2012 issued on 26 October 2012 and the decision P/0295/2014 issued on 30 October 2014, the decision P/0298/2015 issued on 21 December 2015 and the decision P/0170/2017 issued on 3 July 2017.

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

The procedure started on 3 April 2018.

Scope of the modification

Some measures and timelines of the Paediatric Investigation Plan have been modified.

Opinion

1. 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 and to the deferral 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 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

Not applicable

2. Paediatric Investigation Plan

2.1. Condition

Prevention of thromboembolic events

2.1.1. Indication(s) targeted by the PIP

Prevention of vaso-occlusive crises in paediatric patients with sickle cell disease

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

From birth to less than 18 years

2.1.3. Pharmaceutical form(s)

Film-coated tablet

Granules for oral suspension

Tablet

Orodispersible tablet

Age-appropriate oral dosage form

2.1.4. Measures

Area	Number of studies	Description
Quality	3	**Study 1** Study deleted in procedure EMEA-000480-PIP01-08-M11 **Study 11** Development of tablet at strengths and size supporting appropriate dosing for oral use for paediatric patients from 2 years to less than 18 years **Study 16** Development of an age-appropriate dosage form for the age range from birth to less than 24 months
Non-clinical	4	**Study 2** Dose Range-Finding Study in Suckling Rats **Study 3** Definitive study in Suckling Rats

		Study 4 Definitive Study in Weaning Rats **Study 5** Suckling rat lung function study
Clinical	4	**Study 12** A two part study with part A multi-centre, open-label, randomised, PK and PD dose-ranging study to determine dose and part B double-blind, parallel-group, placebo-controlled, 4-week extension in patients with sickle cell disease from 2 to less than 18 years of age. (D5136C00007) **Study 13** Multi-centre, double-blind, randomised, placebo-controlled study to compare the effect of ticagrelor versus placebo for the reduction of vaso-occlusive crises (which is the composite of painful crisis and/or acute chest syndrome) in paediatric patients with sickle cell disease.from 2 to less than 18 years of age. (D5136C00009) **Study 14** Multi-centre, open label, single dose study to investigate the pharmacokinetics of ticagrelor in paediatric patients from birth to less than 24 months of age with sickle cell disease. (D5136C00010) **Study 15** Open-label, randomised, 4-period, 4-treatment, crossover, single-centre, single-dose study to assess the relative bioavailability of ticagrelor in different formulations in healthy adult subjects

Annex II

Information about the authorised medicinal product

Condition(s) and authorised indication(s):

1. Prevention of thromboembolic events

Authorised indication(s):

- Brilique, co administered with acetylsalicylic acid (ASA), is indicated for the prevention of atherothrombotic events in adult patients with
  - acute coronary syndromes (ACS) or
  - a history of myocardial infarction (MI) and a high risk of developing an atherothrombotic event.

Authorised pharmaceutical form(s):

Film-coated tablet

Orodispersible tablet

Authorised route(s) of administration:

Oral use