



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

EMA/384669/2021

## European Medicines Agency decision P/0280/2021

of 16 July 2021

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for bardoxolone (methyl) (EMEA-002488-PIP01-18) 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 application submitted by Reata Pharmaceuticals Inc. on 26 October 2020 under Article 16(1) of Regulation (EC) No 1901/2006 also requesting a deferral under Article 20 of said regulation and a waiver under Article 13 of said Regulation,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 25 June 2021, in accordance with Article 17 of Regulation (EC) No 1901/2006 and Article 21 of said Regulation and Article 13 of said Regulation,

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 agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver.
- (2) It is therefore appropriate to adopt a decision agreeing a paediatric investigation plan.
- (3) It is therefore appropriate to adopt a decision granting a deferral.
- (4) It is therefore appropriate to adopt a decision granting a waiver.

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

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

Has adopted this decision:

**Article 1**

A paediatric investigation plan for bardoxolone (methyl), capsule, hard, oral use, the details of which are set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices, is hereby agreed.

**Article 2**

A deferral for bardoxolone (methyl), capsule, hard, oral use, the details of which are set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices, is hereby granted.

**Article 3**

A waiver for bardoxolone (methyl), capsule, hard, oral use, the details of which are set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices, is hereby granted.

**Article 4**

This decision is addressed to Reata Pharmaceuticals Inc., 5320 Legacy Drive, 75024 – Plano, United States.



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

EMA/PDCO/191209/2021  
Amsterdam, 25 June 2021

## Opinion of the Paediatric Committee on the agreement of a Paediatric Investigation Plan and a deferral and a waiver

EMA-002488-PIP01-18

### Scope of the application

**Active substance(s):**

Bardoxolone (methyl)

**Condition(s):**

Treatment of Alport syndrome

**Pharmaceutical form(s):**

Capsule, hard

**Route(s) of administration:**

Oral use

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

Reata Pharmaceuticals Inc.

### Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Reata Pharmaceuticals Inc. submitted for agreement to the European Medicines Agency on 26 October 2020 an application for a paediatric investigation plan for the above mentioned medicinal product and a deferral under Article 20 of said Regulation and a waiver under Article 13 of said Regulation.

The procedure started on 1 December 2020.

Supplementary information was provided by the applicant on 19 March 2021. The applicant proposed modifications to the paediatric investigation plan.



## Opinion

1. The Paediatric Committee, having assessed the proposed paediatric investigation plan in accordance with Article 17 of Regulation (EC) No 1901/2006 as amended, recommends as set out in the appended summary report:

- to agree the paediatric investigation plan in accordance with Article 17(1) of said Regulation;
- to grant a deferral in accordance with Article 21 of said Regulation;
- to grant a waiver for one or more subsets of the paediatric population in accordance with Article 13 of said Regulation and concluded in accordance with Article 11(1)(c) of said Regulation, on the grounds that the specific medicinal product does not represent a significant therapeutic benefit over existing treatments for paediatric patients.

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

2. The measures and timelines of the agreed 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 annex 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)**

# Waiver

## 1.1. Condition:

Treatment of Alport syndrome

The waiver applies to:

- the paediatric population from birth to less than 8 years of age;
- capsule, hard, oral use;
- on the grounds that the specific medicinal product does not represent a significant therapeutic benefit as clinical studies(s) are not feasible.

## 2. Paediatric investigation plan

### 2.1. Condition:

Treatment of Alport syndrome

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

Treatment of Alport syndrome

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

From 8 to less than 18 years of age.

#### 2.1.3. Pharmaceutical form(s)

Capsule, hard

#### 2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	1	<b>Study 1</b> Generation of data on alternative methods for administration of the capsule formulation for dosing children from 8 years of age.
Non-clinical studies	0	Not applicable.
Clinical studies	3	<b>Study 2 (402-C-1603 Phase 2)</b> Open-label, multi-centre study to evaluate safety and efficacy of bardoxolone (methyl) in adolescents from 12 to less than 18 years of age (and adults) with Alport syndrome. <b>Study 3 (402-C-1603 Phase 3)</b>

		<p>Double-blind, randomised, placebo-controlled study to evaluate safety and efficacy, of bardoloxone (methyl) compared to placebo in adolescents from 12 to less than 18 years of age (and adults) with Alport syndrome.</p> <p><b>Study 4 (402-C-2001)</b></p> <p>Open-label, multi-centre study to evaluate pharmacokinetics, safety and efficacy of bardoloxone (methyl) in children from 8 years to less than 17 years of age with Alport syndrome.</p>
Extrapolation, modelling and simulation studies	2	<p><b>Study 5</b></p> <p>Modelling and simulation study to derive dosing of bardoloxone (methyl) for use in children from 8 years to less than 12 years of age with Alport syndrome.</p> <p><b>Study 6</b></p> <p>Modelling and simulation study to support the use of bardoloxone (methyl) in children from 8 years to less than 12 years of age with Alport syndrome.</p>
Other studies	0	Not applicable
Other measures	0	Not applicable

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

Concerns on potential long term safety/efficacy issues in relation to paediatric use:	No
Date of completion of the paediatric investigation plan:	By June 2027
Deferral for one or more measures contained in the paediatric investigation plan:	Yes