EMA/598791/2020

European Medicines Agency decision

P/0486/2020

of 22 December 2020

on the agreement of a paediatric investigation plan and on the granting of a waiver for fully human IgG1 RB-1 YTE anti-RSV F monoclonal antibody (MK-1654) (EMEA-002755-PIP01-19) 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[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 application submitted by Merck Sharp & Dohme (Europe), Inc. on 21 February 2020 under Article 16(1) of Regulation (EC) No 1901/2006 also requesting a waiver under Article 13 of said Regulation,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 13 November 2020, in accordance with Article 17 of Regulation (EC) No 1901/2006 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 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 waiver.

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

Has adopted this decision:

Article 1

A paediatric investigation plan for fully human IgG1 RB-1 YTE anti-RSV F monoclonal antibody (MK-1654), solution for injection, intramuscular 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 waiver for fully human IgG1 RB-1 YTE anti-RSV F monoclonal antibody (MK-1654), solution for injection, intramuscular 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

This decision is addressed to Merck Sharp & Dohme (Europe), Inc., Clos du Lynx 5, 1200 – Brussels, Belgium.

EMA/PDCO/485363/2020
Amsterdam, 13 November 2020

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

EMEA-002755-PIP01-19

Scope of the application

Active substance(s):

Fully human IgG1 RB-1 YTE anti-RSV F monoclonal antibody (MK-1654)

Condition(s):

Prevention of lower respiratory tract infection caused by respiratory syncytial virus

Pharmaceutical form(s):

Solution for injection

Route(s) of administration:

Intramuscular use

Name/corporate name of the PIP applicant:

Merck Sharp & Dohme (Europe), Inc.

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Merck Sharp & Dohme (Europe), Inc. submitted for agreement to the European Medicines Agency on 21 February 2020 an application for a paediatric investigation plan for the above-mentioned medicinal product and a waiver under Article 13 of said Regulation.

The procedure started on 31 March 2020.

Supplementary information was provided by the applicant on 10 August 2020. 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 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)

1. Waiver

1.1. Condition:

Prevention of lower respiratory tract infection caused by respiratory syncytial virus (RSV)

The request for the waiver applied to:

- the paediatric population from 2 years to less than 18 years of age;
- solution for injection, intramuscular use;
- on the grounds that the specific medicinal product does not represent a significant therapeutic benefit over existing treatments.

2. Paediatric investigation plan

2.1. Condition:

Prevention of lower respiratory tract infection caused by respiratory syncytial virus

2.1.1. Indication(s) targeted by the PIP

Prevention of medically attended lower respiratory tract infection (MALRI) caused by respiratory syncytial virus

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

Birth to less than 2 years of age.

2.1.3. Pharmaceutical form(s)

Solution for injection

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	0	Not applicable.
Non-clinical studies	0	Not applicable.

Area	Number of measures	Description
Clinical studies	3	**Study 1 (PN002)** Safety, tolerability, and pharmacokinetic study of MK-1654 in pre-term (born at 29 to 35 weeks gestational age) and late pre-term and full-term infants (born at over 35 weeks gestational age) for prevention of lower respiratory tract infection caused by respiratory syncytial virus (RSV). **Study 2 (PN004)** Double-blind, randomized, placebo-controlled study to evaluate the efficacy and safety of MK-1654 in healthy pre-term (born at 29 to 35 weeks gestational age) and late pre-term and full-term infants (born at over 35 weeks gestational age) for prevention of lower respiratory tract infection caused by RSV. **Study 3** Multicentre, randomized, partially blinded, palivizumab-controlled study to evaluate the safety, efficacy, and pharmacokinetics of MK-1654 in infants and children at increased risk for severe RSV disease for prevention of lower respiratory tract infection caused by RSV.
Extrapolation, modelling and simulation studies	4	**Study 4** Paediatric population PK Model of MK-1654 serum concentrations **Study 5** Paediatric population PK/PD Model relating the MK-1654 serum concentrations with Serum Neutralizing (SN) Antibody titer **Study 6** A model-based meta-analysis (MBMA) for RSV and clinical trial simulations (CTS) to inform dose selection of the palivizumab-controlled Studies **Study 7** Partial extrapolation of efficacy based on evaluating similarity of MK-1654 PK

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 March 2026
Deferral for one or more measures contained in the paediatric investigation plan:	No