



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

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Paediatric Committee (PDCO)

PDCO monthly report of opinions on paediatric investigation plans and other activities

18-20 March 2015

Opinions on paediatric investigation plans

The Paediatric Committee (PDCO) adopted opinions agreeing paediatric investigation plans (PIPs) for the following medicines:

- Semaglutide, from Novo Nordisk A/S, for the treatment of type 2 diabetes mellitus;
- Simtuzumab, from Gilead Sciences International Ltd, for the treatment of hepatic fibrosis and treatment of hepatic cirrhosis;
- Human recombinant interleukin-2, from Iltoo Pharma, for the treatment of type 1 diabetes mellitus;
- 1-(2,2-difluoro-1,3-benzodioxol-5-yl)-N-{1-[(2R)-2,3-dihydroxypropyl]-6-fluoro-2-(1-hydroxy-2-methylpropan-2-yl)-1H-indol-5-yl}cyclopropanecarboxamide (VX-661) / ivacaftor, from Vertex Pharmaceuticals (Europe) Ltd., for the treatment of cystic fibrosis;
- Sofosbuvir / a derivative of (S)-methyl (2-(2-(1H-imidazol-2-yl)pyrrolidin-1-yl)-2-oxoethyl)carbamate (GS-5816), from Gilead Sciences International Ltd., for the treatment of chronic hepatitis C;
- Recombinant human N-acetylglucosaminidase (rhNAGLU), from Synageva BioPharma Ltd., for the treatment of mucopolysaccharidosis IIIB (Sanfilippo B);
- Autologous T cells transduced with lentiviral vector containing a chimeric antigen receptor directed against CD19 (CTL019), from Novartis Europharm Limited, for the treatment of B lymphoblastic leukaemia/lymphoma;
- Ibodutant, from Menarini Ricerche S.p.A., for the treatment of diarrhoea-predominant irritable bowel Syndrome.



The PDCO adopted an opinion on the **refusal** of a PIP¹, for Masitinib (mesylate), from AB Science SA, for the treatment of mastocytosis.

The PDCO subsequently granted on its own motion a product-specific waiver for this medicine for all subsets of the paediatric population in the specified condition, on the grounds that clinical studies with the specific medicinal product cannot be expected to be of significant therapeutic benefit to or fulfil a therapeutic need of the specified paediatric subset(s).

A PIP sets out a programme for the development of a medicine in the paediatric population. The PIP aims to generate the necessary quality, safety and efficacy data through studies to support the authorisation of the medicine for use in children of all ages. These data have to be submitted to the European Medicines Agency, or national competent authorities, as part of an application for a marketing authorisation for a new medicine, or for one covered by a patent. In some cases, a PIP may include a waiver of the studies in one or more paediatric subsets, or a deferral.

Adoption of an opinion following re-examination

The PDCO adopted opinions for the following product:

- Following the re-examination of the positive opinion on a modification to an agreed PIP adopted on 16 January 2015 for recombinant human N-acetylgalactosamine-6-sulfatase (BMN110), from BioMarin Europe Limited, for the treatment of mucopolysaccharidosis, type IVA (Morquio A Syndrome), the PDCO recommended to maintain its opinion and to agree to the changes regarding the measures and the timelines of the paediatric investigation plan and the timelines of the deferral in the scope set out in the Annex I of the opinion.

A re-examination of the opinion can be requested by the applicant within 30 days following receipt of the opinion of the PDCO. The grounds for the re-examination should be based only on the original information and scientific data provided in the application that were previously available to the PDCO and on which the initial opinion was based. This may include new analysis of the same data or minor protocol amendments to a previously proposed study. Significant changes to the previous plan cannot be part of the re-examination process.

Opinions on product-specific waivers

The PDCO adopted positive opinions for product-specific waivers, recommending that the obligation to submit data obtained through clinical studies with children be waived in all subsets of the paediatric population, for the following medicines:

- Human normal immunoglobulin, from Baxter Innovations GmbH, for the treatment of inflammatory polyneuropathy as model for immunomodulation;
- Ezetimibe / Atorvastatin (calcium trihydrate), from Merck Sharp & Dohme Ltd, for the prevention of coronary artery disease;
- Reparixin, from Dompé farmaceutici SpA, for the prevention of graft rejection;
- L-Pyr-L-Glu-L-Gln-L-Leu-L-Glu-L-Arg-L-Ala-L-Leu-L-Asn-L-Ser-L-Ser, from ARAIM PHARMA EUROPE LTD., for the treatment of sarcoidosis.

The PDCO adopted 1 opinion on the **refusal** of a request for waiver for:

- Tanezumab, from Pfizer Limited, for the treatment of chronic pain;

¹ Deleted text 'including a deferral'

Waivers can be issued if there is evidence that the medicine concerned is likely to be ineffective or unsafe in the paediatric population, or that the disease or condition targeted occurs only in adult populations, or that the medicine, or the performance of trials, does not represent a significant therapeutic benefit over existing treatments for paediatric patients.

Opinions on modifications to an agreed PIP

The PDCO also adopts, every month, opinions on modifications to an agreed PIP, which can be requested by the applicant when the plan is no longer appropriate or when there are difficulties that render the plan unworkable. The PDCO adopted positive opinions, agreeing change(s), for the following products:

- Mepolizumab, from Glaxo Group Limited, for the treatment of hypereosinophilic syndrome;
- Cinacalcet hydrochloride, from Mimpara, for the treatment of parathyroid carcinoma, treatment of primary hyperparathyroidism and treatment of secondary hyperparathyroidism in patients with end-stage renal disease;
- Ipilimumab, from Bristol-Myers Squibb Pharma EEIG, for the treatment of all conditions included in the category of malignant neoplasms (except melanoma, nervous system, haematopoietic and lymphoid tissue);
- Liraglutide, from Novo Nordisk A/S, for the treatment of obesity;
- Belatacept, from Bristol-Myers Squibb Pharma EEIG, for the prevention of rejection of transplanted kidney;
- Purified antigen fractions of inactivated split virion Influenza A/Vietnam/1194/2004 (H5N1) like strain used (NIBRG-14) and purified antigen fractions of inactivated split virion Influenza A/Indonesia/05/2005 (H5N1) like strain used (PR8-IBCDC-RG2), from GlaxoSmithKline Biologicals S.A., for the prevention of influenza infection;
- Purified antigen fractions of inactivated split virion Influenza A/Indonesia/05/2005(H5N1) like strain used (PR8-IBCDC-RG2), from GlaxoSmithKline Biologicals S.A., for the prevention of influenza infection;
- Bilastine, from Faes Farma S.A., for the treatment of allergic rhinoconjunctivitis and treatment of urticaria;
- *N. meningitidis* serogroup A polysaccharide conjugated to tetanus toxoid / *N. meningitidis* serogroup C polysaccharide conjugated to tetanus toxoid / *N. meningitidis* serogroup W polysaccharide conjugated to tetanus toxoid / *N. meningitidis* serogroup Y polysaccharide conjugated to tetanus toxoid, from GlaxoSmithKline Biologicals s.a., for the prevention of meningococcal disease;
- Rivaroxaban, from Bayer Pharma AG, for the prevention of thromboembolic events and treatment of thromboembolic events;
- Anidulafungin, from Pfizer Limited, for the treatment of invasive candidiasis;
- Sildenafil, from Pfizer Limited, for the treatment of pulmonary arterial hypertension;
- Pixantrone (dimaleate), from CTI Life Sciences Limited, for the treatment of non-Hodgkin lymphoma;
- Zanamivir, from GlaxoSmithKline Trading Services Limited, for the prevention of influenza and treatment of influenza.

Withdrawals

The PDCO noted that 2 applications were withdrawn during the late stages of the evaluation (30 days or less before completion of the procedure).

Interaction with external experts

The PDCO has regular interactions with academic experts, with a view to bringing state-of-the-art knowledge to the PDCO scientific discussions. An expert was invited to the March 2015 meeting with a translational and clinical expertise in paediatric oncology, and the PDCO heard from the expert about the potential utility of a medicine for the treatment of a certain type of brain tumour.

Other matters

The PDCO welcomed Irene Pericleous in her new role as alternate, nominated to represent Cyprus.

The PDCO thanked Andreas Teloudes for his work at the end of his mandate as alternate from Cyprus.

The next meeting of the PDCO will be held on 15-17 April 2015.

– END –

Notes:

1. As of 26 January 2009, pharmaceutical companies that submit an application for a marketing authorisation for a medicinal product, or those that submit an application for an extension of indication, a new route of administration, or a new pharmaceutical form of a medicinal product already authorised in the European Union, have to provide either the results of studies in children conducted in accordance with an approved PIP, or an Agency's decision on a waiver or on a deferral.
2. PDCO opinions on PIPs and waivers are transformed into Agency's decisions within the timeframe laid down by the [Paediatric Regulation](#) (Regulation (EC) No 1901/2006, as amended). The decisions can be found on the Agency's website at:
http://www.ema.europa.eu/ema/index.jsp?curl=pages/medicines/landing/pip_search.jsp&murl=menus/medicines/medicines.jsp&mid=WC0b01ac058001d129
3. More information about the PDCO and the Paediatric Regulation is available in the Regulatory section of the Agency's website:
http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general/general_content_000023.jsp&murl=menus/regulations/regulations.jsp&mid=WC0b01ac05800240cd
4. This meeting report, together with other information on the work of the Agency's, can be found on the Agency's website: <http://www.ema.europa.eu>

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