



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

21-23 May 2014

Opinions on paediatric investigation plans

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

- Vigabatrin, from Targeon SAS, for the treatment of epilepsy;
- Obeticholic Acid (6 alpha-ethylchenodeoxycholic acid), from Intercept Italia s.r.l., for the treatment of primary biliary cirrhosis and treatment of biliary atresia;
- Dupilumab, from Sanofi-Aventis Recherche & Développement, for the treatment of asthma;
- Tasimelteon, from Vanda Pharmaceuticals Ltd., for the treatment of Non-24-Hour sleep-wake Disorders in blind people with no light perception.

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.

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:

- Aflibercept, from Bayer Pharma AG, for the treatment of branch retinal vein occlusion and treatment of choroidal neovascularisation secondary to pathologic myopia.

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 to change(s), for the following products:

- Mepolizumab, from GSK Trading Services Limited, for the treatment of asthma;
- Adalimumab, from AbbVie Limited, for the treatment of ulcerative colitis;
- Insulin detemir, from Novo Nordisk A/S, for the treatment of type I diabetes mellitus and treatment of type II diabetes mellitus;
- Insulin degludec, from Novo Nordisk A/S, for the treatment of type I diabetes mellitus and treatment of type II diabetes mellitus;
- Perampanel, from Eisai Europe Limited, for the treatment of treatment-resistant epilepsies;
- Sitagliptin, from Merck Sharp and Dohme (Europe), Inc., for the treatment of type 2 diabetes mellitus;
- Linagliptin, from Boehringer Ingelheim International GmbH, for the treatment of type 2 diabetes mellitus;
- Apremilast, from Celgene Europe Limited, for the treatment of chronic idiopathic arthritis (including rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis and juvenile idiopathic arthritis);
- Ozenoxacin, from Ferrer Internacional S.A., for the treatment of impetigo;
- Insulin peglispro, from Eli Lilly and Company, for the treatment of type 1 diabetes mellitus and treatment of type 2 diabetes mellitus;
- rdESAT-6 / rCFP-10, from Statens Serum Institut, for the diagnosis of tuberculosis;
- Tafluprost, from Merck Sharp & Dohme (Europe), Inc., for the treatment of glaucoma.

Opinions on compliance check

The PDCO adopted positive opinions on (full) compliance check for:

- Insulin degludec, from Novo Nordisk A/S, for the treatment of type I diabetes mellitus and treatment of type II diabetes mellitus;
- Travoprost, from Alcon Laboratories (UK) Ltd., for the treatment of glaucoma;
- Human normal immunoglobulin, from LFB Biotechnologies, for the treatment of primary immunodeficiency (PID) and treatment of idiopathic thrombocytopenic purpura (ITP).

A compliance check is performed to verify that all the measures agreed in a PIP and reflected in the Agency's decision have been conducted in accordance with the decision, including the agreed timelines. Full compliance with all studies/measures contained in the PIP is one of several prerequisites for obtaining the rewards and incentives provided for in Articles 36 to 38 of the Paediatric Regulation.

Before the submission of a request for a compliance check, applicants are encouraged to consult the [Agency's Procedural advice](#) for validation of a new marketing authorisation application or extension/variation application and compliance check with an agreed PIP.

Withdrawals

The PDCO noted that 1 application was withdrawn during the late stages of the evaluation (30 days or less before opinion).

Gaucher disease – a Strategic Collaborative Approach from EMA and FDA

The European Medicines Agency (EMA) and the United States [Food and Drug Administration](#) (FDA) have released a [draft joint proposal](#) to facilitate the clinical investigation of new medicines for the treatment of Gaucher disease in children. The document is released for public consultation until 31 August 2014.

The aim of the proposal is not only to facilitate a rapid and smooth agreement of an EMA Paediatric Investigation Plan and FDA Pediatric Study Plan, but also to address the feasibility of developing multiple medicines for a rare disease in a reduced timeframe and in a limited number of patients.

Additional information on this topic can be found on the [EMA public website](#).

Other matters

The PDCO welcomed Grigorios Melas in his new role as member and Stefanos Mantagos in his new role as alternate, nominated to represent Greece.

The next meeting of the PDCO will be held on 18-20 June 2014.

– 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>

Enquiries to: [AskEMA](#)

(http://www.ema.europa.eu/ema/index.jsp?curl=pages/about_us/landing/ask_ema_landing_page.jsp&mid=)

Annex of the May 2014 PDCO meeting report

	2012 (January to December)	2013 (January to December)	2014 (January to current month)	Cumulative total (2007 to present)
Total number of validated PIP/waiver applications	178	198	69	1589 ¹
Applications submitted for a product not yet authorised (<i>Article 7²</i>)	149	176	63	1238 (78%)
Applications submitted for a product already authorised and still under patent, in view of a submission of a variation/extension for a new indication, pharmaceutical form or route of administration (<i>Article 8²</i>)	28	22	5	323 (20%)
Applications submitted for an off-patent product developed specifically for children with an age-appropriate formulation (<i>Article 30²</i>)	1	0	1	28 (2%)
PIPs and full waiver indications covered by these applications	218	225	77	2104

Number of Paediatric Committee (PDCO) opinions	2012	2013	2014	Cumulative total (2007 to present)
Positive on full waiver	47	52	23	343
Positive on PIP, including potential deferral	87	97	39	736
Negative opinions adopted	3	4	0	34
Positive opinions adopted on modification of a PIP	165	186	85	751
Negative opinions adopted on modification of a PIP	1	3	0	9
Positive opinions on compliance with a PIP	4	16	6	60
Negative opinions on compliance check with a PIP	0	1	0	2
Opinions adopted under Art. 14.2	0	0	0	2

¹ Of which 420 have been requests for a full waiver.

² Applications submitted in accordance with the referenced article of Regulation (EC) No 1901/2006, as amended.

Areas covered by PIPs/waiver applications	2012 (Number of areas covered) *	2013 (Number of areas covered) *	2014 (Number of areas covered) *
Neurology	11	13	5
Uro-nephrology	5	9	1
Gastroenterology-hepatology	8	17	5
Pneumology-allergology	9	10	9
Infectious diseases	19	20	13
Cardiovascular diseases	34	21	8
Diagnostics	3	3	0
Endocrinology-gynaecology-fertility-metabolism	27	32	8
Neonatology-paediatric intensive care	2	3	0
Immunology-rheumatology-transplantation	15	11	3
Psychiatry	0	9	0
Pain	9	6	1
Haematology-haemostaseology	9	14	0
Otorhinolaryngology	1	3	1
Oncology	19	27	6
Dermatology	14	12	6
Vaccines	2	5	3
Ophthalmology	5	6	2
Anaesthesiology	2	0	0
Nutrition	0	0	0
Other	16	11	3

* One PIP can cover several therapeutic areas