EMA/659463/2019

European Medicines Agency decision

P/0021/2020

of 6 January 2020

on the agreement of a paediatric investigation plan for abemaciclib (Verzenios), (EMEA-002342-PIP02-18) 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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on the agreement of a paediatric investigation plan for abemaciclib (Verzenios), (EMEA-002342-PIP02-18) in accordance with Regulation (EC) No 1901/2006 of the European Parliament and of the Council

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 Eli Lilly and Company Limited on 4 December 2018 under Article 16(1) of Regulation (EC) No 1901/2006,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 15 November 2019, in accordance with Article 17 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 agreement of a paediatric investigation plan.

(2) It is therefore appropriate to adopt a decision agreeing a paediatric investigation plan.

[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 abemaciclib (Verzenios), film-coated tablet, age-appropriate oral solid dosage form, oral use, gastric 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

This decision is addressed to Eli Lilly and Company Limited, Lilly Research Centre, Erl Wood Manor, Sunninghill Road, GU20 6PH – Windlesham, United Kingdom.

EMA/PDCO/476133/2019
Amsterdam, 15 November 2019

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

EMEA-002342-PIP02-18

Scope of the application

Active substance(s):

Abemaciclib

Invented name:

Verzenios

Condition(s):

Treatment of glioma

Treatment of neuroblastoma

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Film-coated tablet

Age-appropriate oral solid dosage form

Route(s) of administration:

Oral use

Gastric use

Name/corporate name of the PIP applicant:

Eli Lilly and Company Limited

Information about the authorised medicinal product:

See Annex II

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Eli Lilly and Company Limited submitted for agreement to the European Medicines Agency on 4 December 2018 an application for a paediatric investigation plan for the above mentioned medicinal product.

The procedure started on 29 January 2019.

Supplementary information was provided by the applicant on 1 August 2019. 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.

   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 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:

Treatment of glioma

2.1.1. Indication(s) targeted by the PIP

Treatment of newly diagnosed patients with high-grade glioma

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

From birth to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Film-coated tablet

Age-appropriate oral solid dosage form

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	2	**Study 1** Development of an age-appropriate film-coated tablet **Study 2** Development of an age-appropriate oral solid dosage form
Non-clinical studies	1	**Study 3** Juvenile toxicity study to assess potential brain and pancreas toxicity of abemaciclib following repeated dosing to juvenile rats. (Juvenile toxicity study)

Area	Number of measures	Description
Clinical studies	2	**Study 4** Open label, dose escalation trial to evaluate pharmacokinetics, safety and tolerability of abemaciclib in combination with irinotecan and temozolomide (triplet combination) and abemaciclib in combination with temozolomide (doublet combination) in children less than 18 years of age and weighing at least 10 kg and with BSA at least 0.5 m2 (and adults) with relapsed or refractory solid tumours. (Dose Escalation study) **Study 5** Open label, randomised, controlled study to evaluate safety and efficacy of abemaciclib in combination with temozolomide, compared to temozolomide monotherapy, in children from birth to less than 18 years of age (and adults) with newly diagnosed high-grade glioma (HGG). (Newly diagnosed HGG)
Extrapolation, modelling and simulation studies	1	**Study 6** Modelling and simulation study to develop a mechanistic population PK model to define PK parameters of the product in children from birth to less than 18 years of age.
Other studies	0	Not applicable.
Other measures	0	Not applicable.

2.2. Condition:

Treatment of neuroblastoma

2.2.1. Indication(s) targeted by the PIP

Treatment of relapsed/refractory neuroblastoma

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

From birth to less than 18 years of age

2.2.3. Pharmaceutical form(s)

Film-coated tablet

Age-appropriate oral solid dosage form

2.2.4. Measures

Area	Number of measures	Description
Quality-related studies	2	**Study 1** Same as for condition treatment of glioma **Study 2** Same as for condition Treatment of glioma
Non-clinical studies	1	**Study 3** Same as for condition treatment of glioma.
Clinical studies	2	**Study 4** Same as for condition treatment of glioma. **Study 7** Open label, randomised, controlled study to evaluate safety and efficacy of abemaciclib in combination with temozolomide, compared to temozolomide plus irinotecan, in children from birth to less than 18 years of age (and adults) with relapsed/refractory neuroblastoma (NBL). (Relapsed/refractory NBL)
Extrapolation, modelling and simulation studies	1	**Study 6** Same as for condition treatment of glioma.
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:	Yes
Date of completion of the paediatric investigation plan:	By June 2028
Deferral for one or more measures contained in the paediatric investigation plan:	No

Annex II

Information about the authorised medicinal product

Condition(s) and authorised indication(s):

1. Treatment of breast cancer

Authorised indication(s):

- Treatment of women with hormone receptor (HR) positive, human epidermal growth factor receptor 2 (HER2) negative locally advanced or metastatic breast cancer in combination with an aromatase inhibitor or fulvestrant as initial endocrine-based therapy, or in women who have received prior endocrine therapy. In pre- or perimenopausal women, the endocrine therapy should be combined with a luteinising hormone-releasing hormone (LHRH) agonist.

Authorised pharmaceutical form(s):

Film-coated tablet

Authorised route(s) of administration:

Oral use