EMA/21182/2023

European Medicines Agency decision

P/0029/2023

of 31 January 2023

on the acceptance of a modification of an agreed paediatric investigation plan for darunavir / cobicistat / emtricitabine / tenofovir alafenamide (Symtuza), (EMEA-001825-PIP01-15-M04) 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 Union procedures for the authorisation and supervision of medicinal products for human use and establishing a European Medicines Agency[2],

Having regard to the European Medicines Agency's decision P/0123/2016 issued on 12 May 2016, the decision P/0253/2017 issued on 4 September 2017, the decision P/0310/2018 issued on 1 October 2018 and the decision P/0198/2021 issued on 10 May 2021,

Having regard to the application submitted by Janssen-Cilag International NV on 9 September 2022 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a deferral and a waiver,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 16 December 2022, in accordance with Article 22 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 acceptance of changes to the agreed paediatric investigation plan and to the deferral.

(2) It is therefore appropriate to adopt a decision on the acceptance of changes to the agreed paediatric investigation plan, including changes to the deferral.

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

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for darunavir / cobicistat / emtricitabine / tenofovir alafenamide(Symtuza), film-coated tablet, oral use, including changes to the deferral, are hereby accepted in the scope set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices.

Article 2

This decision is addressed to Janssen-Cilag International NV, Turnhoutseweg 30, 2340 – Beerse, Belgium.

EMA/PDCO/773918/2022
Amsterdam, 16 December 2022

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan

EMEA-001825-PIP01-15-M04

Scope of the application

Active substance(s):

Darunavir / cobicistat / emtricitabine / tenofovir alafenamide

Invented name and authorisation status:

See Annex II

Condition(s):

Treatment of human immunodeficiency virus type-1 (HIV-1) infection

Pharmaceutical form(s):

Film-coated tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Janssen-Cilag International NV

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Janssen-Cilag International NV submitted to the European Medicines Agency on 9 September 2022 an application for modification of the agreed paediatric investigation plan with a deferral and a waiver as set out in the European Medicines Agency's decision P/0123/2016 issued on 12 May 2016, the decision P/0253/2017 issued on 4 September 2017, the decision P/0310/2018 issued on 1 October 2018 and the decision P/0198/2021 issued on 10 May 2021.

The application for modification proposed changes to the agreed paediatric investigation plan and to the deferral.

The procedure started on 17 October 2022.

Scope of the modification

Some measures and timelines of the Paediatric Investigation Plan have been modified.

Opinion

1. The Paediatric Committee, having assessed the application in accordance with Article 22 of Regulation (EC) No 1901/2006 as amended, recommends as set out in the appended summary report:

   - to agree to changes to the paediatric investigation plan and to the deferral in the scope set out in the Annex I of this opinion.

   The Paediatric Committee members of Liechtenstein and Norway agree with the above-mentioned recommendation of the Paediatric Committee.

2. The measures and timelines of the 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 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

1.1. Condition

Treatment of human immunodeficiency virus (HIV-1) infection

The waiver applies to:

- the paediatric population below 6 years of age or weighing less than 25 kg;
- film-coated tablet, oral 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

Treatment of human immunodeficiency virus type-1 (HIV-1) infection

2.1.1. Indication(s) targeted by the PIP

Treatment of HIV-1 infection in paediatric subjects weighing 25 kg or more from 6 years of age

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

Subjects weighing 25 kg or more from 6 to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Film-coated tablet

2.1.4. Measures

Area	Description
Quality-related studies	**Study 1** Evaluation of the acceptability for paediatric patients between 12 to less than 18 year old of the adult tablet of the FDC of darunavir (D)/cobicistat (C)/emtricitabine (F)/tenofovir alafenamide (TAF). **Study 2** Development of a scored film-coated tablet of the FDC of D/C/F/TAF and evaluation of acceptability for patients aged at least 6 years old weighing at least 25 kg.
Non-clinical studies	Not applicable
Clinical studies	**Study 3** *Study deleted in EMEA-001825-PIP01-15-M02*

	Study 4 *Study deleted in EMEA-001825-PIP01-15-M04.* **Study 6** *Study added in EMEA-001825-PIP01-15-M04.* Open-label trial to evaluate pharmacokinetics, safety and efficacy of once-daily cobicistat-boosted darunavir administered as part of a combined antiretroviral regimen in HIV-1 infected, treatment-experienced children (GS-US-216-0128).
Modelling and simulation studies	**Study 5** Modelling and simulation study for cobicistat-boosted darunavir (D) doses in paediatric subjects weighing from 25 kg to less than 40 kg.
Other studies	Not applicable
Extrapolation plan	Studies 5 and 6 are part of an extrapolation plan covering the paediatric population from 6 years to less than 18 years of age, as agreed by the PDCO.

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 September 2024
Deferral for one or more measures contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

Information provided by the applicant:

Condition(s) and authorised indication(s)

1. Treatment of HIV

Authorised indication(s):

- Symtuza is indicated for the treatment of human immunodeficiency virus type 1 (HIV-1) infection in adults and adolescents (aged 12 years and older with body weight at least 40 kg). Genotypic testing should guide the use of Symtuza
- Invented name(s): Symtuza
- Authorised pharmaceutical form(s): film-coated tablet (tablet).
- Authorised route(s) of administration: oral use
- Authorised via centralised procedure