EMA/9505/2022

European Medicines Agency decision

P/0036/2022

of 31 January 2022

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for tildacerfont (EMEA-002970-PIP01-21) 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.

European Medicines Agency decision

P/0036/2022

of 31 January 2022

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for tildacerfont (EMEA-002970-PIP01-21) 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 Union procedures for the authorisation and supervision of medicinal products for human use and establishing a European Medicines Agency[2],

Having regard to the application submitted by Spruce Biosciences, Inc. on 18 January 2021 under Article 16(1) of Regulation (EC) No 1901/2006 also requesting a deferral under Article 20 of said regulation and a waiver under Article 13 of said Regulation,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 17 December 2021, in accordance with Article 17 of Regulation (EC) No 1901/2006 and Article 21 of said Regulation 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 deferral 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 deferral.

(4) It is therefore appropriate to adopt a decision granting a waiver.

[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

A paediatric investigation plan for tildacerfont, granules, tablet, oral 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 deferral for tildacerfont, granules, tablet, oral 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

A waiver for tildacerfont, granules, tablet, oral 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 4

This decision is addressed to Spruce Biosciences, Inc., 2001 Junipero Serra Blvd, Suite 640, CA 94014 - Daly City, USA.

EMA/PDCO/541185/2021 Corr
Amsterdam, 17 December 2021

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

EMEA-002970-PIP01-21

Scope of the application

Active substance(s):

Tildacerfont

Condition(s):

Treatment of congenital adrenal hyperplasia

Pharmaceutical form(s):

Granules

Tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Spruce Biosciences, Inc.

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Spruce Biosciences, Inc. submitted for agreement to the European Medicines Agency on 18 January 2021 an application for a paediatric investigation plan for the above mentioned medicinal product and a deferral under Article 20 of said Regulation and a waiver under Article 13 of said Regulation.

The procedure started on 23 February 2021.

Supplementary information was provided by the applicant on 13 September 2021. 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 deferral in accordance with Article 21 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:

Treatment of congenital adrenal hyperplasia

The waiver applies to:

- the paediatric population from birth to less than 1 year of age;
- tablet, granules, 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 congenital adrenal hyperplasia

2.1.1. Indication(s) targeted by the PIP

Treatment of congenital adrenal hyperplasia

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

From 1 year to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Tablet

Granules

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	1	**Study 1** Development of a multiparticulate formulation (granules) appropriate for use in the paediatric population from 1 year of age

Non-clinical studies	1	**Study 2** Definitive juvenile toxicity study to assess the potential toxicity, and potential reversibility, of tildacerfont when administered orally for 6 weeks to juvenile rats (2618-016)
Clinical studies	2	**Study 3** Open-label, multiple dose, uncontrolled trial to evaluate pharmacokinetics (PK), safety, exploratory pharmacodynamics (PD) and acceptability/palatability of tildacerfont in children from 5 years to less than 18 years of age with classic congenital adrenal hyperplasia (CAH) secondary to 21-hydroxylase deficiency (SPR001-205) **Study 4** Randomised, double-blind, placebo controlled trial to evaluate efficacy, safety and acceptability/palatability of tildacerfont in children from 1 year to less than 18 years of age with classic CAH who are on supraphysiologic doses of glucocorticoid (GC) therapy (SPR001-301)
Extrapolation, modelling and simulation studies	2	**Study 5** Modelling and simulation study (population PK) to evaluate the use of tildacerfont in children from 1 year to less than 18 years of age with classic congenital adrenal hyperplasia **Study 6** Modelling and simulation study to identify the best model to integrate exposure-response (efficacy) data for use of tildacerfont in children from 1 year to less than 18 years of age with classic congenital adrenal hyperplasia
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:	No
Date of completion of the paediatric investigation plan:	By December 2027
Deferral for one or more measures contained in the paediatric investigation plan:	Yes