

EMA/887308/2018

# European Medicines Agency decision P/0041/2019

of 29 January 2019

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for ianalumab (EMEA-002338-PIP01-18) 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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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<sup>1</sup>,

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<sup>2</sup>,

Having regard to the application submitted by Novartis Europharm Limited on 26 February 2018 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 14 December 2018, 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.

<sup>&</sup>lt;sup>1</sup> OJ L 378, 27.12.2006, p.1.

<sup>&</sup>lt;sup>2</sup> OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

## Article 1

A paediatric investigation plan for ianalumab, solution for injection, subcutaneous 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 ianalumab, solution for injection, subcutaneous 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 ianalumab, solution for injection, subcutaneous 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 Novartis Europharm Limited, Vista building, Elm Park, Merrion Road, 4 - Dublin, Ireland.



EMA/PDCO/658840/2018 London, 14 December 2018

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

EMEA-002338-PIP01-18

# Scope of the application

Active substance(s):

Ianalumab

Condition(s):

Treatment of autoimmune hepatitis

Pharmaceutical form(s):

Solution for injection

Route(s) of administration:

Subcutaneous use

Name/corporate name of the PIP applicant:

Novartis Europharm Limited

## **Basis for opinion**

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Novartis Europharm Limited submitted for agreement to the European Medicines Agency on 26 February 2018 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 3 April 2018.

Supplementary information was provided by the applicant on 10 September 2018. 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 autoimmune hepatitis (AIH)

The waiver applies to:

- the paediatric population from birth to less than 8 years;
- solution for injection, subcutaneous 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 autoimmune hepatitis (AIH)

# 2.1.1. Indication(s) targeted by the PIP

Treatment of autoimmune hepatitis in patients aged 8 years to less than 18 years in whom steroids and/or azathioprine are contraindicated, are not tolerated, or do not provide an adequate response.

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

From 8 years to less than 18 years of age.

# 2.1.3. Pharmaceutical form(s)

Solution for injection

# 2.1.4. Measures

| Area                    | Number<br>of<br>measures | Description  |
|-------------------------|--------------------------|--|
| Quality-related studies | 0                        | Not applicable.  |
| Non-clinical studies    | 0                        | Not applicable.  |
| Clinical studies        | 1                        | Study 1 Single arm, multicentre, open-label study to assess the pharmacokinetics (PK), pharmacodynamics (PD), safety and efficacy of ianalumab (VAY736) in paediatric autoimmune hepatitis (AIH) patients aged from 8 to less than 18 years with incomplete response to or intolerance of standard therapy |

| Area   | Number<br>of<br>measures | Description   |
|--|--------------------------|---|
| Extrapolation,<br>modelling and<br>simulation<br>studies | 2                        | Study 2  Modelling and simulation study to establish the dose(s) of ianalumab in Clinical Study 1  Study 3  Extrapolation analysis to synthesize pharmacokinetics (PK) / pharmacodynamics (PD) and biochemical response from Clinical Study 1 |
| 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 June 2029 |
| Deferral for one or more measures contained in the paediatric investigation plan:     | Yes          |