

EMA/91301/2017

European Medicines Agency decision

P/0044/2017

of 17 February 2017

on the acceptance of a modification of an agreed paediatric investigation plan for naldemedine (tosylate) (EMEA-001893-PIP01-15-M01) 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 726/2004¹,

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 Agency²,

Having regard to the European Medicines Agency's decision P/0312/2016 issued on 11 November 2016,

Having regard to the application submitted by Shionogi Limited on 8 December 2016 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 27 January 2017, 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.

² OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for naldemedine (tosylate), tablet, granules, 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 Shionogi Limited, 33 Kingsway, WC2B 6UF – London, United Kingdom.

EMA/PDCO/873351/2016 **Corr**

London, 27 January 2017

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-001893-PIP01-15-M01

Scope of the application

Active substance(s):

Naldemedine (tosylate)

Condition(s):

Treatment of opioid-induced constipation (OIC)

Pharmaceutical form(s):

Tablet

Granules

Route(s) of administration:

Oral use

Name / corporate name of the PIP applicant:

Shionogi Limited

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Shionogi Limited submitted to the European Medicines Agency on 8 December 2016 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/0312/2016 issued on 11 November 2016.

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

The procedure started on 3 January 2017.

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 Norwegian Paediatric Committee member agrees 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 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 opioid induced constipation (OIC)

The waiver applies to:

- the paediatric population from birth to less than 6 month of age;
- for tablet, oral use; granules, oral use;
- on the grounds that the specific medicinal product is likely to be unsafe.

2. Paediatric investigation plan

2.1. Condition

Treatment of opioid induced constipation (OIC)

2.1.1. Indication(s) targeted by the PIP

Treatment of opioid induced constipation (OIC)

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

From 6 months 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 an age appropriate granules formulation for oral use.
Non-clinical studies	2	Study 2 Dose range-finding juvenile toxicity study. Study 3 Definitive juvenile toxicity study.
Clinical studies	1	Study 4 Open-label study to assess the pharmacokinetics, safety, and tolerability of naldemedine in paediatric patients who are receiving or who are about to receive treatment with opioids from 6 months of age to less than 18 years old (V921F).

Extrapolation, modelling and simulation studies	2	Study 5 Population pharmacokinetic modeling and simulation study. Study 6 Extrapolation of efficacy of naldemedine from adults to the paediatric population.
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 2022
Deferral for one or more measures contained in the paediatric investigation plan:	Yes