

EMA/23718/2020

# European Medicines Agency decision P/0052/2020

of 29 January 2020

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for asciminib (EMEA-002347-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 726/20041,

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 Agency<sup>2</sup>,

Having regard to the application submitted by Novartis Europharm Limited on 20 April 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 11 December 2019, 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>2</sup> OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

### Article 1

A paediatric investigation plan for asciminib, age-appropriate oral solid dosage form, film-coated 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 asciminib, age-appropriate oral solid dosage form, film-coated 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 asciminib, age-appropriate oral solid dosage form, film-coated 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 Novartis Europharm Limited, Vista Building, Elm Park, Merrion Road, 4 - Dublin, Ireland.



EMA/PDCO/547145/2019 Amsterdam, 11 December 2019

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

EMEA-002347-PIP01-18

# Scope of the application

Active substance(s):

Asciminib

Condition(s):

Treatment of chronic myeloid leukaemia

Pharmaceutical form(s):

Age-appropriate oral solid dosage form

Film-coated tablet

Route(s) of administration:

Oral 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 20 April 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 29 May 2018.

Supplementary information was provided by the applicant on 6 September 2019. The applicant proposed modifications to the paediatric investigation plan and to the deferral and to the waiver.



# **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)(b) of said Regulation, on the grounds that the disease or condition for which the specific medicinal product is intended does not occur in the specified subset(s) of the paediatric population.

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 chronic myeloid leukaemia (CML)

The waiver applies to:

- the paediatric population from birth to less than 3 years of age;
- age-appropriate oral solid dosage form, film-coated tablet, oral use;
- on the grounds that the disease or condition for which the specific medicinal product is intended does not occur in the specified paediatric subset(s).

# 2. Paediatric investigation plan

## 2.1. Condition:

Treatment of chronic myeloid leukaemia (CML).

# 2.1.1. Indication(s) targeted by the PIP

Treatment of Philadelphia chromosome-positive chronic myelogenous leukaemia in chronic phase (Ph+CML-CP) previously treated with one or more tyrosine kinase inhibitors (TKIs).

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

From 3 to less than 18 years of age.

# 2.1.3. Pharmaceutical form(s)

Age-appropriate oral solid dosage form, film-coated tablet.

# 2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	1	Study 1  Development of an age appropriate oral formulation.
Non-clinical studies	0	Not applicable.
Clinical studies	1	Study 2  Open-label, multiple dose trial to evaluate pharmacokinetics, safety, activity, acceptability/palatability of asciminib in children from 3 to less than 18 years of age with Philadelphia chromosome-positive chronic myelogenous leukaemia in chronic phase (Ph+ CML-CP) previously treated with one or more tyrosine kinase inhibitors (TKIs).

Extrapolation, modelling and simulation studies	3	Physiologically based PK (PBPK)study to predict the initial dose of asciminib for study 2 in children from 3 to less than 18 years of age with Philadelphia chromosome-positive chronic myelogenous leukaemia in chronic phase (Ph+ CML-CP) previously treated with one or more tyrosine kinase inhibitors (TKIs).  Study 4  Population-PK/PD model of nilotinib adult data to predict paediatric nilotinib response in order to further support the applicability of efficacy extrapolation for TKIs, such as asciminib in children from 3 to less than 18 years of age with Philadelphia chromosome-positive
		chronic myelogenous leukaemia in chronic phase (Ph+ CML-CP) previously treated with one or more tyrosine kinase inhibitors (TKIs).  Study 5
		Extrapolation study to support the use of asciminib in paediatric patients from 3 to less than 18 years of age with Philadelphia chromosome-positive chronic myelogenous leukaemia in chronic phase (Ph+ CML-CP) previously treated with one or more tyrosine kinase inhibitors (TKIs).
Other studies	1	Study 6
		Systematic review of the literature to assess the similarity of response to TKIs (dasatinib, imatinib and nilotinib) between adult and paediatric patients with CML when treated with the same BCR-ABL1 TKI at a comparable exposure.
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 March 2026
Deferral for one or more measures contained in the paediatric investigation plan:	Yes