EMA/108910/2015

European Medicines Agency decision

P/0066/2015

of 1 April 2015

on the refusal of a modification of an agreed paediatric investigation plan for canagliflozin (Invokana) (EMEA-001030-PIP01-10-M03) 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 Community procedures for the authorisation and supervision of medicinal products for human and veterinary use and establishing a European Medicines Agency[2],

Having regard to the European Medicines Agency's decision P/164/2011 issued on 4 July 2011, the decision P/0108/2013 issued on 30 April 2013, and the decision P/0119/2014 issued on 7 May 2014,

Having regard to the application submitted by Janssen-Cilag International N.V. on 24 November 2014 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 13 February 2015, 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 refusal of changes to the agreed paediatric investigation plan and to the deferral.

(2) It is therefore appropriate to adopt a decision on the refusal 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 canagliflozin (Invokana), tablet, oral use, including changes to the deferral 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, are hereby refused.

Article 2

This decision is addressed to Janssen-Cilag International N.V., Turnhoutsweg 30, BE-2340 – Beerse, Belgium.

Done at London, 1 April 2015

For the European Medicines Agency
Jordi Llinares Garcia
Head of Division (ad interim)
Human Medicines Research and Development Support
(Signature on file)

EMA/PDCO/750399/2014

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

EMEA-001030-PIP01-10-M03

Scope of the application

Active substance(s):

Canagliflozin

Invented name:

Invokana

Condition(s):

Treatment of type 2 diabetes mellitus

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Janssen-Cilag International N.V.

Information about the authorised medicinal product:

See Annex II

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Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Janssen-Cilag International N.V. submitted to the European Medicines Agency on 24 November 2014 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/164/2011 issued on 4 July 2011, the decision P/0108/2013 issued on 30 April 2013, and the decision P/0119/2014 issued on 7 May 2014.

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

The procedure started on 16 December 2014.

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 refuse the changes proposed by the applicant regarding the paediatric investigation plan and the deferral.

   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 remain unchanged and are set out in the Annex I.

3. The scientific conclusions and the grounds for refusal are set out in the summary report appended to this opinion.

This opinion is forwarded to the applicant and the Executive Director of the European Medicines Agency, together with its annexes and appendix.

London, 13 February 2015

On behalf of the Paediatric Committee
Dr Dirk Mentzer, Chairman
(Signature on file)

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 type 2 diabetes mellitus

The waiver applies to:

- the paediatric population from birth to less than 10 years of age;
- for 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 type 2 diabetes mellitus.

2.1.1. Indication(s) targeted by the PIP

Treatment of type 2 diabetes mellitus.

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

From 10 years to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Tablet

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	2	**Study 1:** Development of a lower strength appropriate for the paediatric population. **Study 2:** Development of a smaller tablet appropriate for the paediatric population.
Non-clinical studies	0	Not applicable.

Area	Number of measures	Description
Clinical studies	2	**Study 3:** Open-label, multicentre trial to evaluate the multiple dose pharmacokinetics (PK), pharmacodynamics (PD), and safety of Canagliflozin in children from 10 years to less than 18 years of age with type 2 diabetes mellitus on a background of metformin. **Study 4:** Double-blind, randomized, multicentre, placebo-controlled trial to evaluate the efficacy, safety/tolerability and acceptability of the addition of Canagliflozin to the treatment of children from 10 years and to less than 18 years of age with type 2 diabetes mellitus with inadequate glycaemic control on a background of metformin.
Extrapolation, modelling and simulation studies	0	Not applicable.
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:	Yes
Date of completion of the paediatric investigation plan:	By June 2020
Deferral for one or more measures contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

Condition(s) and authorised indication(s):

1. Treatment of type 2 diabetes mellitus

Authorised indication(s):

Invokana is indicated in adults aged 18 years and older with type 2 diabetes mellitus to improve glycaemic control as:

Monotherapy

When diet and exercise alone do not provide adequate glycaemic control in patients for whom the use of metformin is considered inappropriate due to intolerance or contraindications.

Add-on therapy

Add-on therapy with other glucose-lowering medicinal products including insulin, when these, together with diet and exercise, do not provide adequate glycaemic control

Authorised pharmaceutical form(s):

Film-coated tablet

Authorised route(s) of administration:

Oral use