



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/155523/2017

European Medicines Agency decision

P/0090/2017

of 11 April 2017

on the acceptance of a modification of an agreed paediatric investigation plan for Ietermovir (EMA-001631-PIP01-14-M02) 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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on the acceptance of a modification of an agreed paediatric investigation plan for Ietermovir (EMA-001631-PIP01-14-M02) 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 726/2004¹,

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/0155/2015 issued on 10 July 2015,

Having regard to the application submitted by Merck Sharp & Dohme (Europe), Inc. on 8 December 2016 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a deferral,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 24 February 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.
- (2) It is therefore appropriate to adopt a decision on the acceptance of changes to the agreed paediatric investigation plan.

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 letermovir, film-coated tablet, granules, concentrate for solution for infusion, oral use, intravenous use, 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 Merck Sharp & Dohme (Europe), Inc., Clos du Lynx, 5, B-1200 – Brussels, Belgium.

EMA/PDCO/859860/2016
London, 24 February 2017

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-001631-PIP01-14-M02

Scope of the application

Active substance(s):

Letermovir

Condition(s):

Prevention of cytomegalovirus infection

Pharmaceutical form(s):

Film-coated tablet

Granules

Concentrate for solution for infusion

Route(s) of administration:

Oral use

Intravenous use

Name / corporate name of the PIP applicant:

Merck Sharp & Dohme (Europe), Inc.

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Merck Sharp & Dohme (Europe), Inc. submitted to the European Medicines Agency on 8 December 2016 an application for modification of the agreed paediatric investigation plan with a deferral as set out in the European Medicines Agency's decision P/0155/2015 issued on 10 July 2015.

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

The procedure started on 3 January 2017.

Scope of the modification

Some measures 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 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 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

Not applicable.

2. Paediatric investigation plan

2.1. Condition

Prevention of cytomegalovirus infection

2.1.1. Indication(s) targeted by the PIP

Prevention of CMV viraemia and/or disease in at-risk patients having undergone an allogeneic haematopoietic stem cell transplant (HSCT) or solid organ transplant (SOT)

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

From birth to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Film-coated tablet

Granules

Concentrate for solution for infusion

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	2	Study 1 Deleted in EMEA-001631-PIP01-14-M02 Study 2 Development of granules. Study 3 Development of a concentrate for solution for infusion.
Non-clinical studies	0	Not applicable.
Clinical studies	2	Study 4 Open-label, single-arm trial to evaluate pharmacokinetics, safety and acceptability/palatability of letermovir in children from birth to less than 18 years of age who are at-risk of developing CMV infection and/or disease following allogeneic haematopoietic stem cell transplantation.

		Study 5 Open-label, randomised trial in healthy adult volunteers to determine the bioavailability of the letermovir paediatric formulation(s) relative to the adult film-coated tablet.
Extrapolation, modelling and simulation studies	2	Study 6 Modelling and Simulation study to support dose finding and the extrapolation of use of letermovir in children from birth to less than 18 years of age who are at-risk of developing CMV infection and/or disease following solid organ transplantation. Study 7 Extrapolation study to support the use of letermovir in children from birth to less than 18 years of age who are at-risk of developing CMV infection and/or disease following solid organ transplantation.
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 August 2023
Deferral for one or more measures contained in the paediatric investigation plan:	Yes