EMA/104589/2022

European Medicines Agency decision

P/0093/2022

of 11 March 2022

on the acceptance of a modification of an agreed paediatric investigation plan for dinutuximab beta (Qarziba), (EMEA-001314-PIP01-12-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.

European Medicines Agency decision

P/0093/2022

of 11 March 2022

on the acceptance of a modification of an agreed paediatric investigation plan for dinutuximab beta (Qarziba), (EMEA-001314-PIP01-12-M01) 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 726/2004[1],

Having regard to Regulation (EC) No 726/2004 of the European Parliament and of the Council of 31 March 2004 laying down Union procedures for the authorisation and supervision of medicinal products for human use and establishing a European Medicines Agency[2],

Having regard to the European Medicines Agency's decision P/0094/2014 issued on 7 April 2014,

Having regard to the application submitted by EUSA Pharma (Netherlands) BV on 18 October 2021 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 21 January 2022, 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, as amended.
[2] OJ L 136, 30.4.2004, p. 1, as amended.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for dinutuximab beta (Qarziba), solution for infusion, concentrate for solution for infusion, powder and solvent for solution for injection, powder for solution for infusion , intravenous 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 EUSA Pharma (Netherlands) BV, Beechavenue 54, 1119 PW - Schiphol-Rijk, The Netherlands.

EMA/PDCO/603080/2021
Amsterdam, 21 January 2022

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

EMEA-001314-PIP01-12-M01

Scope of the application

Active substance(s):

Dinutuximab beta

Invented name:

Qarziba

Condition(s):

Treatment of neuroblastoma

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Solution for infusion

Concentrate for solution for infusion

Powder and solvent for solution for injection

Powder for solution for infusion

Route(s) of administration:

Intravenous use

Name/corporate name of the PIP applicant:

EUSA Pharma (Netherlands) BV

Information about the authorised medicinal product:

See Annex II

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, EUSA Pharma (Netherlands) BV submitted to the European Medicines Agency on 18 October 2021 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/0094/2014 issued on 7 April 2014.

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

The procedure started on 22 November 2021.

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 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 annexes 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 neuroblastoma

The waiver applies to:

- the paediatric population from birth to less than 28 days;
- for solution for infusion, concentrate for solution for infusion, powder and solvent for solution for injection, powder for solution for infusion; for intravenous use;
- on the grounds that clinical studies with the specific medicinal product cannot be expected to be of significant therapeutic benefit to or fulfil a therapeutic need of the specified paediatric subset(s).

2. Paediatric Investigation Plan

2.1. Condition: treatment of neuroblastoma

2.1.1. Indication(s) targeted by the PIP

Treatment of neuroblastoma in minimal residual disease in patients from 1 month of age onwards in combination with aldesleukin and isotretinoin by means of a pain-minimising ch14.18/CHO (APN311) administration schedule

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

From 1 month to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Solution for infusion for intravenous use

Concentrate for solution for infusion

Powder and solvent for solution for injection for intravenous use

Powder for solution for infusion for intravenous use

2.1.4. Measures

Area	Number of studies	Description
Quality-related studies	0	Not applicable
Non-clinical studies	1	**Study 1:** Repeat-dose juvenile toxicity study
Clinical studies	3	**Study 2:** Open-label, multi-centre, multiple-dose, single-arm trial to evaluate safety, toxicity and activity of APN311 in combination with aldesleukin in children from 1 month to less than 18 years of age (and young adults) with a neuroblastoma that is refractory to

		standard treatment or that has relapsed after high-dose therapy with allogeneic haploidentical stem cell transplantation **Study 3:** Open-label, multi-centre, dose-escalating/dose schedule-varying trial to evaluate pharmacokinetics, pharmacodynamics, safety, toxicity and activity of APN311 in combination with aldesleukin and isotretinoin in children from 1 year to less than 18 years of age (and young adults) with a neuroblastoma after at least one high-dose therapy with stem cell rescue **Study 4:** Open-label, multi-centre trial to evaluate pharmacokinetics, pharmacodynamics, safety, toxicity and activity of APN311 in children from 12 months to less than 18 years of age (and young adults) with a neuroblastoma that is refractory to standard therapy or that has relapsed or with a neuroblastoma that is refractory to or that has relapsed after at least one high-dose therapy with stem cell rescue

3. Follow-up, completion and deferral of PIP

Concerns on potential long term safety and efficacy issues in relation to paediatric use:	Yes
Date of completion of the paediatric investigation plan:	By April 2019
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 neuroblastoma

Authorised indication(s):

- Treatment of high-risk neuroblastoma in patients aged 12 months and above, who have previously received induction chemotherapy and achieved at least a partial response, followed by myeloablative therapy and stem cell transplantation, as well as patients with history of relapsed or refractory neuroblastoma, with or without residual disease. Prior to the treatment of relapsed neuroblastoma, any actively progressing disease should be stabilised by other suitable measures.

  In patients with a history of relapsed/refractory disease and in patients who have not achieved a complete response after first line therapy, Qarziba should be combined with interleukin-2 (IL-2).

Authorised pharmaceutical form(s):

Concentrate for solution for infusion

Authorised route(s) of administration:

Intravenous use