



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/188023/2013

European Medicines Agency decision

P/0094/2013

of 29 April 2013

on the acceptance of a modification of an agreed paediatric investigation plan for rdESAT-6 / rCFP-10 (EMEA-001156-PIP01-11-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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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/0012/2012 issued on 24 January 2012,

Having regard to the application submitted by Statens Serum Institut on 17 December 2012 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a waiver,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 15 March 2013, 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 rdESAT-6 / rCFP-10, solution for injection, intradermal 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 Statens Serum Institut, 5 Artillerivej, 2300 - Copenhagen 5, Denmark.

Done at London, 29 April 2013

For the European Medicines Agency
Guido Rasi
Executive Director
(Signature on file)

EMA/PDCO/817566/2012

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

EMA-001156-PIP01-11-M02

Scope of the application

Active substance(s):

rdESAT-6 / rCFP-10

Condition(s):

Diagnosis of tuberculosis

Pharmaceutical form(s):

Solution for injection

Route(s) of administration:

Intradermal use

Name / corporate name of the PIP applicant:

Statens Serum Institut

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Statens Serum Institut submitted to the European Medicines Agency on 17 December 2012 an application for modification of the agreed paediatric investigation plan with a waiver as set out in the European Medicines Agency's decision P/0012/2012 issued on 24 January 2012.

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

The procedure started on 16 January 2013.

Scope of the modification

Some measures and/or 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 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.

London, 15 March 2013

On behalf of the Paediatric Committee
Dr Daniel Brasseur, 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

1. Waiver

1.1. Condition: diagnosis of tuberculosis

The waiver applies to:

- the paediatric population from birth to less than 28 days of age;
- for solution for injection, intradermal use;
- on the grounds that the specific medicinal product is likely to be ineffective.

2. Paediatric Investigation Plan

2.1. Condition: diagnosis of tuberculosis

2.1.1. Indication(s) targeted by the PIP

Diagnosis of patients suspected to be infected with Mycobacterium tuberculosis from 28 days of age.

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

From 28 days to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Solution for injection

2.1.4. Measures

Area	Number of measures	Description
Quality	0	Not applicable.
Non-clinical	0	Not applicable.
Clinical	2	Measure 1 Double blind, randomised, multicentre, single dose, active-controlled trial to evaluate the diagnostic outcome of rESAT-6 / rCFP-10 compared to QuantiFERON-TB Gold In-Tube and Tuberculin PPD tests in children from 28 days to less than 18 years of age, suspected to have tuberculosis. Measure 2 Double blind, randomised, multicentre, single dose, active-controlled contact tracing trial to evaluate the diagnostic outcome of rESAT-6 / rCFP-10 compared to QuantiFERON-TB Gold In-Tube and Tuberculin PPD tests in children from 6 weeks to less than 18 years of age, suspected to have tuberculosis.

3. Follow-up, completion and deferral of PIP

Concerns on potential long term safety and efficacy issues in relation to paediatric use:	No
Date of completion of the paediatric investigation plan:	By March 2014
Deferral for one or more measures contained in the paediatric investigation plan:	No