



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/195513/2016

European Medicines Agency decision

P/0094/2016

of 18 March 2016

on the acceptance of a modification of an agreed paediatric investigation plan for adalimumab (Humira), (EMEA-000366-PIP05-12-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/0094/2016

of 18 March 2016

on the acceptance of a modification of an agreed paediatric investigation plan for adalimumab (Humira), (EMA-000366-PIP05-12-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 726/2004¹,

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/0070/2014 issued on 18 March 2014,

Having regard to the application submitted by AbbVie Ltd. on 4 December 2015 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 26 February 2016, 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.

² OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for adalimumab (Humira), (EMA-000366-PIP05-12-M01), solution for injection, subcutaneous 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 AbbVie Limited, AbbVie House, Vanwall Business Park, Vanwall Road, SL6 4UB – Maidenhead, United Kingdom.

Done at London, 18 March 2016

For the European Medicines Agency
Zaïde Frias
Head of Division
Human Medicines Research and Development Support
(Signature on file)



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/854576/2015
London, 26 February 2016

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-000366-PIP05-12-M01

Scope of the application

Active substance(s):

Adalimumab

Invented name:

Humira

Condition(s):

Treatment of non-infectious uveitis

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Solution for injection

Route(s) of administration:

Subcutaneous use

Name / corporate name of the PIP applicant:

AbbVie Ltd.

Information about the authorised medicinal product:

See Annex II



Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, AbbVie Ltd. submitted to the European Medicines Agency on 4 December 2015 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/0070/2014 issued on 18 March 2014.

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

The procedure started on 4 January 2016.

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 to 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 non-infectious uveitis

The waiver applies to:

- the paediatric population from birth to less than 2 years;
- for solution for injection for subcutaneous 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 non-infectious uveitis

2.1.1. Indication(s) targeted by the PIP

Treatment of non-infectious uveitis

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

From 2 to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Solution for injection

2.1.4. Measures

Area	Number of studies	Description
Quality-related studies	0	Not applicable.
Non-clinical studies	0	Not applicable.
Clinical studies	1	Study 1 Multicentre, randomised, double-blind, placebo-controlled study to evaluate clinical effectiveness and safety of adalimumab in children from 2 to less than 18 years old with refractory uveitis associated with juvenile idiopathic arthritis (JIA).
Extrapolation, modelling and simulation studies	1	Study 2 Population pharmacokinetic modelling study of adalimumab for paediatric patients.
Other studies	0	Not applicable.
Other measures	0	Not applicable.

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 October 2016
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. Rheumatoid arthritis

Authorised indication(s):

Humira in combination with methotrexate, is indicated for:

- the treatment of moderate to severe, active rheumatoid arthritis in adult patients when the response to disease-modifying antirheumatic drugs including methotrexate has been inadequate;
- the treatment of severe, active and progressive rheumatoid arthritis in adults not previously treated with methotrexate.

Humira can be given as monotherapy in case of intolerance to methotrexate or when continued treatment with methotrexate is inappropriate.

Humira has been shown to reduce the rate of progression of joint damage as measured by X-ray and to improve physical function, when given in combination with methotrexate.

2. Juvenile idiopathic arthritis

Polyarticular juvenile idiopathic arthritis

Authorised indication(s):

Humira in combination with methotrexate is indicated for the treatment of active polyarticular juvenile idiopathic arthritis, in children and adolescents aged 2 to 17 years who have had an inadequate response to one or more disease-modifying antirheumatic drugs (DMARDs). Humira can be given as monotherapy in case of intolerance to methotrexate or when continued treatment with methotrexate is inappropriate (for the efficacy in monotherapy see section 5.1). Humira has not been studied in children aged less than 2 years.

Enthesitis-related arthritis

Authorised indication(s):

Humira is indicated for the treatment of active enthesitis-related arthritis in patients, 6 years of age and older, who have had an inadequate response to, or who are intolerant of, conventional therapy.

3. Axial spondyloarthritis

Ankylosing spondylitis

Authorised indication(s):

Humira is indicated for the treatment of adults with severe active AS who have had an inadequate response to conventional therapy.

Axial spondyloarthritis without radiographic evidence of AS

Authorised indication(s):

Humira is indicated for the treatment of adults with severe axial spondyloarthritis without radiographic evidence of AS but with objective signs of inflammation by elevated C-reactive protein and / or magnetic resonance imaging, who have had an inadequate response to, or are intolerant to non-steroidal anti-inflammatory drugs.

4. Psoriatic arthritis

Authorised indication(s):

Humira is indicated for the treatment of active and progressive psoriatic arthritis in adults when the response to previous disease-modifying antirheumatic drug therapy has been inadequate. Humira has been shown to reduce the rate of progression of peripheral joint damage as measured by X-ray in patients with polyarticular symmetrical subtypes of the disease (see section 5.1) and to improve physical function.

5. Psoriasis

Authorised indication(s):

Humira is indicated for the treatment of moderate to severe chronic plaque psoriasis in adult patients who failed to respond to or who have a contraindication to, or are intolerant to other systemic therapy including cyclosporine, methotrexate or psoralen ultraviolet-A (PUVA).

6. Paediatric plaque psoriasis

Authorised indication(s):

Humira is indicated for the treatment of severe chronic plaque psoriasis in children and adolescents from 4 years of age who have had an inadequate response to or are inappropriate candidates for topical therapy and phototherapies.

7. Hidradenitis suppurativa (HS)

Authorised indication(s):

Humira is indicated for the treatment of active moderate to severe hidradenitis suppurativa (acne inversa) in adult patients with an inadequate response to conventional systemic HS therapy.

8. Crohn's disease

Authorised indication(s):

Humira is indicated for treatment of moderately to severely active Crohn's disease, in adult patients who have not responded despite a full and adequate course of therapy with a corticosteroid and / or an immunosuppressant; or who are intolerant to or have medical contraindications for such therapies.

9. Paediatric Crohn's disease

Authorised indication(s):

Humira is indicated for the treatment of severe active Crohn's disease in paediatric patients (6 to 17 years of age) who have had an inadequate response to conventional therapy including primary nutrition therapy, a corticosteroid, and an immunomodulator, or who are intolerant to or have contraindications for such therapies.

10. Ulcerative colitis

Authorised indication(s):

Humira is indicated for treatment of moderately to severely active ulcerative colitis in adult patients who have had an inadequate response to conventional therapy including corticosteroids and 6-mercaptopurine (6-MP) or azathioprine (AZA), or who are intolerant to or have medical contraindications for such therapies.

Authorised pharmaceutical form(s):

Solution for injection

Authorised route(s) of administration:

Subcutaneous use