EMA/141028/2018

European Medicines Agency decision

P/0101/2018

of 15 March 2018

on the acceptance of a modification of an agreed paediatric investigation plan for crisaborole (EMEA-002065-PIP01-16-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.

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on the acceptance of a modification of an agreed paediatric investigation plan for crisaborole (EMEA-002065-PIP01-16-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 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/0338/2017 issued on 10 November 2017,

Having regard to the application submitted by Pfizer Ltd on 11 December 2017 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 23 February 2018, 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 crisaborole, ointment, topical 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 Pfizer Ltd, Ramsgate Road, CT13 9NJ - Sandwich, United Kingdom.

EMA/PDCO/830638/2017
London, 23 February 2018

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

EMEA-002065-PIP01-16-M01

Scope of the application

Active substance(s):

Crisaborole

Condition(s):

Treatment of atopic dermatitis

Pharmaceutical form(s):

Ointment

Route(s) of administration:

Topical use

Name/corporate name of the PIP applicant:

Pfizer Ltd

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Pfizer Ltd submitted to the European Medicines Agency on 11 December 2017 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/0338/2017 issued on 10 November 2017.

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

The procedure started on 3 January 2018.

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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 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.

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 atopic dermatitis

The waiver applies to:

- all subsets of the paediatric population from birth to less than 1 month of age;
- ointment, topical 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 atopic dermatitis

2.1.1. Indication(s) targeted by the PIP

Treatment of mild to moderate atopic dermatitis in patients 1 month of age and older

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)

Ointment

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	0	Not applicable.
Non-clinical studies	3	**Study 1** 4-week definitive juvenile toxicity study in rats with a 1-week recovery period to evaluate food consumption, sexual maturation, functional observational battery, motor activity, acoustic startle response, clinical pathology, necropsy findings, organ weights and histopathology **Study 2** 4-week definitive juvenile dermal toxicity study in Gottingen minipigs with a 1-week recovery period to evaluate clinical signs, body weight, food consumption, growth rate, clinical pathology, ECG and ophthalmoscopy

		Study 3 4-week definitive juvenile toxicity study in rats with a 2-week recovery period to evaluate systemic safety, body weight, food consumption, motor activity, acoustic startle habituation, clinical pathology, including haematology and clinical chemistry, macroscopic and microscopic pathology
Clinical studies	5	**Study 4** Double-blind, randomised, vehicle-controlled trial to evaluate safety and efficacy of crisaborole ointment, 2% compared to vehicle in children from 2 to less than 18 years of age (and adults) with mild-to-moderate atopic dermatitis. **Study 5** Double-blind, randomised, vehicle-controlled trial to evaluate safety and efficacy of crisaborole ointment, 2% compared to vehicle in children from 2 to less than 18 years of age (and adults) with mild-to-moderate atopic dermatitis. **Study 6** Open-label, uncontrolled, extension study to evaluate long-term safety of crisaborole ointment, 2% in children from 2 to less than 18 years of age (and adults) with mild-to-moderate atopic dermatitis. **Study 7** Double-blind, randomised, vehicle-controlled trial to evaluate safety and efficacy of crisaborole ointment, 2% compared to vehicle in children from 1 month to less than 24 months of age with mild-to-moderate atopic dermatitis. **Study 8** Assessor-blind, randomised, active- and vehicle -controlled study to evaluate efficacy and safety of crisaborole ointment, 2% compared to topical corticosteroid (TCS), topical calcineurin inhibitor (TCI) and vehicle in children from 2 to less than 18 years of age (and adults) with mild to moderate atopic dermatitis.
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:	No
Date of completion of the paediatric investigation plan:	By August 2021
Deferral for one or more measures contained in the paediatric investigation plan:	Yes