



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

European Medicines Agency decision

P/0103/2020

of 20 March 2020

on the acceptance of a modification of an agreed paediatric investigation plan for avacopan (EMA-002023-PIP01-16-M04) 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/0082/2017 issued on 22 May 2017, the decision P/0268/2017 issued on 7 September 2017, the decision P/0344/2017 issued on 23 November 2017 and the decision P/0360/2019 issued on 4 November 2019,

Having regard to the application submitted by ChemoCentryx Ireland Ltd. on 28 October 2019 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 31 January 2020, 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 avacopan, capsule, hard, age-appropriate oral solid dosage form, age-appropriate oral liquid dosage form, oral 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 ChemoCentryx Ireland Ltd., 70 Sir John Rogerson's Quay, Dublin 2 - Dublin, Ireland.



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/601055/2019
Amsterdam, 31 January 2020

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-002023-PIP01-16-M04

Scope of the application

Active substance(s):

Avacopan

Condition(s):

Treatment of antineutrophil cytoplasmic antibody (ANCA)-associated vasculitis

Pharmaceutical form(s):

Capsule, hard

Age-appropriate oral solid dosage form

Age-appropriate oral liquid dosage form

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

ChemoCentryx Ireland Ltd.

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, ChemoCentryx Ireland Ltd. submitted to the European Medicines Agency on 28 October 2019 an application for modification of the agreed paediatric investigation plan with a deferral as set out in the European Medicines Agency's decision P/0082/2017 issued on 22 May 2017, the decision P/0268/2017 issued on 7 September 2017, the decision P/0344/2017 issued on 23 November 2017 and the decision P/0360/2019 issued on 4 November 2019.

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

The procedure started on 3 December 2019.



Scope of the modification

Some 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 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

Treatment of antineutrophil cytoplasmic antibody (ANCA)-associated vasculitis

2.1.1. Indication(s) targeted by the PIP

Treatment of patients with microscopic polyangiitis (MPA)

Treatment of patients with granulomatosis with polyangiitis (GPA)

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)

Capsule, hard

Age-appropriate oral solid dosage form

Age-appropriate oral liquid dosage form

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	2	Study 1 Development of age-appropriate oral solid dosage form for use in the paediatric population from 2 to less than 12 years of age and of an appropriate dispensing device for granules. Study 2 Development of age-appropriate oral liquid dosage form for use in the paediatric population from birth to less than 12 years of age and of an administration device with suitable graduation for the liquid formulation.
Non-clinical studies	3	Study 3 44 week nasogastric / oral toxicity study in cyno monkeys with 6-week recovery. Study 4 Determination of PK parameters of the age-appropriate oral solid dosage form and the age-appropriate oral liquid dosage form in dogs.

		Study 5 13-week oral toxicity study in juvenile hamsters with 4-week recovery phase.
Clinical studies	4	Study 6 Double-blind, double-dummy, randomised, placebo-controlled trial to evaluate safety and efficacy of avacopan as add-on to standard of care compared to prednisone in children from 12 to less than 18 years of age (and adults) with active anti-neutrophil cytoplasmic antibody (ANCA) associated vasculitis. Study 7 Open-label, 3-period, 3-way, crossover, single-dose bioavailability study in adult healthy volunteers to evaluate the PK profile of paediatric formulations. Study 8 Open label, uncontrolled trial to evaluate pharmacokinetics, safety and activity of a single dose of avacopan, followed by multiple doses in children from 6 to less than 12 years of age with active ANCA-associated vasculitis. Study 9 Open label, uncontrolled trial to evaluate pharmacokinetics, safety and activity of a single dose of avacopan, followed by multiple doses in children from birth to less than 6 years of age with active ANCA-associated vasculitis.
Extrapolation, modelling and simulation studies	4	Study 10 Population PK modelling to support dosing in adolescents from 12 to less than 18 years of age. Study 11 Population PK modelling to support dosing in children from 6 to less than 12 years of age. Study 12 Population PK modelling to support dosing in adolescents from birth to less than 6 years of age. Study 13 Extrapolation study to provide efficacy assumptions in the paediatric population from birth to less than 12 years of age with active ANCA-associated vasculitis based on extrapolation from adult and adolescent 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/efficacy issues in relation to paediatric use:	Yes
Date of completion of the paediatric investigation plan:	By December 2025
Deferral for one or more measures contained in the paediatric investigation plan:	Yes