

EMA/206467/2018

European Medicines Agency decision

P/0130/2018

of 6 April 2018

on the acceptance of a modification of an agreed paediatric investigation plan for angiotensin II (LJPC-501) (EMA-001912-PIP02-16-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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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/0271/2017 issued on 4 October 2017,

Having regard to the application submitted by La Jolla Pharmaceutical II B.V. on 3 January 2018 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 23 March 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 angiotensin II (LJPC-501), solution for infusion, intravenous 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 La Jolla Pharmaceutical II B.V., Herengracht 500, 1017 CB - Amsterdam, The Netherlands.

EMA/PDCO/15464/2018
London, 23 March 2018

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-001912-PIP02-16-M01

Scope of the application

Active substance(s):

Angiotensin II (LJPC-501)

Condition(s):

Treatment of hypotension associated with distributive or vasodilatory shock

Pharmaceutical form(s):

Solution for infusion

Route(s) of administration:

Intravenous use

Name / corporate name of the PIP applicant:

La Jolla Pharmaceutical II B.V.

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, La Jolla Pharmaceutical II B.V. submitted to the European Medicines Agency on 3 January 2018 an application for modification of the agreed paediatric investigation plan with a deferral as set out in the European Medicines Agency's decision P/0271/2017 issued on 4 October 2017.

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

The procedure started on 23 January 2018.

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 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 hypotension associated with distributive or vasodilatory shock

2.1.1. Indication(s) targeted by the PIP

Treatment of hypotension associated with distributive or vasodilatory shock

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)

Solution for infusion

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	0	Not applicable
Non-clinical studies	1	Study 1 Definitive juvenile toxicity study in newborn lamb
Clinical studies	2	Study 2 Double-blind, randomised placebo controlled trial to evaluate efficacy and safety of LJPC-501 in paediatric patients from 2 to less than 18 years of age with distributive shock who remain hypotensive despite fluid therapy and vasopressor therapy. (LJ501-CRH03) Study 3 Double-blind, randomised placebo controlled trial to evaluate efficacy and safety of LJPC-501 in paediatric patients from birth to less than 2 years of age with distributive shock who remain hypotensive despite fluid therapy and vasopressor therapy. (LJ501-CRH04)
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 March 2024
Deferral for one or more measures contained in the paediatric investigation plan:	Yes