

EMA/132147/2020

European Medicines Agency decision

P/0132/2020

of 15 April 2020

on the acceptance of a modification of an agreed paediatric investigation plan for axicabtagene ciloleucel (YESCARTA), (EMEA-002010-PIP01-16-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/0237/2017 issued on 9 August 2017 and the decision P/0004/2019 issued on 3 January 2019,

Having regard to the application submitted by Kite Pharma EU B.V. on 27 November 2019 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 28 February 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 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 axicabtagene ciloleucel (YESCARTA), dispersion for infusion, intravenous 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 Kite Pharma EU B.V., Science Park 408, LS1 5AB, 1098 XH – Amsterdam, The Netherlands.



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/691899/2019
Amsterdam, 28 February 2020

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-002010-PIP01-16-M02

Scope of the application

Active substance(s):

Axicabtagene ciloleucel

Invented name:

YESCARTA

Condition(s):

Treatment of mature B-cell neoplasms

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Dispersion for infusion

Route(s) of administration:

Intravenous use

Name/corporate name of the PIP applicant:

Kite Pharma EU B.V.

Information about the authorised medicinal product:

See Annex II



Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Kite Pharma EU B.V. submitted to the European Medicines Agency on 27 November 2019 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/0237/2017 issued on 9 August 2017 and the decision P/0004/2019 issued on 3 January 2019.

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

The procedure started on 6 January 2020.

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 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 mature B-cell neoplasms

The waiver applies to:

- the paediatric population weighing less than 6 kg;
- dispersion for infusion, intravenous use;
- on the grounds that the specific medicinal product does not represent a significant therapeutic benefit as clinical studies(s) are not feasible.

2. Paediatric investigation plan

2.1. Condition:

Treatment of mature B-cell neoplasms

2.1.1. Indication(s) targeted by the PIP

Treatment of patients with relapsed or refractory aggressive B-cell non-Hodgkin lymphoma (NHL) who are ineligible for autologous stem cell transplant (ASCT)

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

Less than 18 years of age and weighing at least 6 kg

2.1.3. Pharmaceutical form(s)

Dispersion for infusion

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	1	Study 1 Development of a formulation of autologous peripheral blood T cells CD4 and CD8 selected and CD3 and CD28 activated transduced with retroviral vector expressing anti CD19 CD28/CD3-zeta chimeric antigen receptor and cultured (KTE-X19) suitable for administration to paediatric patients with a minimum weight of 6 kg.
Non-clinical studies	0	Not applicable.

Clinical studies	1	Study 2 Open-label, single arm, 2-phase trial to evaluate safety and activity, of (KTE-X19) in children weighing at least 6 kg with B-cell acute lymphoblastic leukaemia (cohort 1) or with B-cell non-Hodgkin lymphoma (cohort 2) whose disease is refractory to a standard chemotherapy regimen, relapsed after stem cell transplantation (SCT).
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:	Yes
Date of completion of the paediatric investigation plan:	By December 2023
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. Treatment of mature B-cell neoplasms

Authorised indication(s):

- Treatment of adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) and primary mediastinal large B-cell lymphoma (PMBCL), after two or more lines of systemic therapy

Authorised pharmaceutical form(s):

Dispersion for infusion

Authorised route(s) of administration:

Intravenous use