

EMA/365808/2022

European Medicines Agency decision P/0208/2022

of 10 June 2022

on the acceptance of a modification of an agreed paediatric investigation plan for canagliflozin (Invokana), (EMA-001030-PIP01-10-M10) 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 Union procedures for the authorisation and supervision of medicinal products for human use and establishing a European Medicines Agency²,

Having regard to the European Medicines Agency's decision P/164/2011 issued on 4 July 2011, the decision P/0108/2013 issued on 30 April 2013, the decision P/0119/2014 issued on 7 May 2014, the decision P/0066/2015 issued on 1 April 2015, the decision P/0212/2015 issued on 2 October 2015, the decision P/0019/2016 issued on 29 January 2016, the decision P/0205/2017 issued on 9 August 2017, the decision P/0464/2020 issued on 1 December 2020 and the decision P/0268/2021 issued on 9 July 2021,

Having regard to the application submitted by Janssen-Cilag International NV on 24 January 2022 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 22 April 2022, 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, as amended.

² OJ L 136, 30.4.2004, p. 1, as amended.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for canagliflozin (Invokana), film-coated tablet, 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 Janssen-Cilag International NV, Turnhoutseweg 30, BE-2340 – Beerse, Belgium.



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/52687/2022
Amsterdam, 22 April 2022

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-001030-PIP01-10-M10

Scope of the application

Active substance(s):

Canagliflozin

Invented name:

Invokana

Condition(s):

Treatment of type 2 diabetes mellitus

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Film-coated tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Janssen-Cilag International NV

Information about the authorised medicinal product:

See Annex II

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Janssen-Cilag International NV submitted to the European Medicines Agency on 24 January 2022 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/164/2011 issued on 4 July 2011, the decision P/0108/2013 issued on 30 April 2013, the decision P/0119/2014 issued on 7 May 2014, the decision P/0066/2015 issued on 1 April



2015, the decision P/0212/2015 issued on 2 October 2015, the decision P/0019/2016 issued on 29 January 2016, the decision P/0205/2017 issued on 9 August 2017, the decision P/0464/2020 issued on 1 December 2020 and the decision P/0268/2021 issued on 9 July 2021.

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

The procedure started on 21 February 2022.

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 Paediatric Committee member Norway 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 type 2 diabetes mellitus

The waiver applies to:

- the paediatric population from birth to less than 10 years of age;
- film-coated tablet, oral use;
- on the grounds that the disease or condition for which the specific medicinal product is intended does not occur in the specified paediatric subset(s).

2. Paediatric investigation plan

2.1. Condition:

Treatment of type 2 diabetes mellitus

2.1.1. Indication(s) targeted by the PIP

Treatment of type 2 diabetes mellitus

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

From 10 years to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Film-coated tablet

2.1.4. Measures

Area	Description
Quality-related studies	Study 1 deleted during procedure EMEA-001030-PIP01-10-M09 Study 2 deleted during procedure EMEA-001030-PIP01-10-M09
Non-clinical studies	Not applicable
Clinical studies	Study 3 Open-label, multicentre trial to evaluate the multiple dose pharmacokinetics (PK), pharmacodynamics (PD), and safety of Canagliflozin in children from 10 years to less than 18 years of age with type 2 diabetes mellitus Study 4 Double-blind, randomized, multicentre, parallel-group, placebo-controlled trial to evaluate the efficacy and safety/tolerability of the addition of Canagliflozin to the treatment of children from 10 years

	and to less than 18 years of age with type 2 diabetes mellitus who have inadequate glycaemic control on diet and exercise with or without metformin with or without insulin after 26 weeks of therapy, followed by a 26-week placebo-controlled, double-blind extension period
Extrapolation, modelling and simulation studies	Not applicable
Other studies	Not applicable
Other measures	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 type 2 diabetes mellitus

Authorised indication(s):

- Invokana is indicated in adults aged 18 years and older with type 2 diabetes mellitus to improve glycaemic control as:

Monotherapy

- When diet and exercise alone do not provide adequate glycaemic control in patients for whom the use of metformin is considered inappropriate due to intolerance or contraindications.

Add-on therapy

- Add-on therapy with other glucose-lowering medicinal products including insulin, when these, together with diet and exercise, do not provide adequate glycaemic control

Authorised pharmaceutical form(s):

Film-coated tablet

Authorised route(s) of administration:

Oral use