

EMA/586656/2013

European Medicines Agency decision

P/0271/2013

of 30 October 2013

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for quilizumab (EMEA-001395-PIP01-12) 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 application submitted by Roche Registration Limited on 10 December 2012 under Article 16(1) of Regulation (EC) No 1901/2006 also requesting a deferral under Article 20 of said Regulation and a waiver under Article 13 of said Regulation,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 13 September 2013, in accordance with Article 18 of Regulation (EC) No 1901/2006, and Article 21 of said Regulation and Article 13 of said Regulation,

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 agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver.
- (2) It is therefore appropriate to adopt a decision agreeing a paediatric investigation plan.
- (3) It is therefore appropriate to adopt a decision granting a deferral.
- (4) It is therefore appropriate to adopt a decision granting a waiver.

¹ OJ L 378, 27.12.2006, p.1.

² OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

Article 1

A paediatric investigation plan for quilizumab, solution for injection, subcutaneous use, the details of which are set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices, is hereby agreed.

Article 2

A deferral for quilizumab, solution for injection, subcutaneous use, the details of which are set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices, is hereby granted.

Article 3

A waiver for quilizumab, solution for injection, subcutaneous use, the details of which are set out in the opinion of the Paediatric Committee of the European Medicines Agency annexed hereto, together with its appendices, is hereby granted.

Article 4

This decision is addressed to Roche Registration Limited, Hexagon Place, 6 Falcon Way, Shire Park, AL7 1TW - Welwyn Garden City, United Kingdom.

Done at London, 30 October 2013

For the European Medicines Agency
Guido Rasi
Executive Director
(Signature on file)

EMA/PDCO/411241/2013

Opinion of the Paediatric Committee on the agreement of a Paediatric Investigation Plan and a deferral and a waiver

EMA-001395-PIP01-12

Scope of the application

Active substance(s):

Quilizumab

Condition(s):

Treatment of asthma

Pharmaceutical form(s):

Solution for injection

Route(s) of administration:

Subcutaneous use

Name / corporate name of the PIP applicant:

Roche Registration Limited

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Roche Registration Limited submitted for agreement to the European Medicines Agency on 10 December 2012 an application for a paediatric investigation plan for the above mentioned medicinal product and a deferral under Article 20 of said Regulation and a waiver under Article 13 of said Regulation.

The procedure started on 16 January 2013.

Supplementary information was provided by the applicant on 24 June 2013. The applicant proposed modifications to the paediatric investigation plan.

Opinion

1. The Paediatric Committee, having assessed the proposed paediatric investigation plan in accordance with Article 17 of Regulation (EC) No 1901/2006 as amended, recommends as set out in the appended summary report:

- to agree the paediatric investigation plan in accordance with Article 18 of said Regulation;
- to grant a deferral in accordance with Article 21 of said Regulation;
- to grant a waiver for one or more subsets of the paediatric population in accordance with Article 13 of said Regulation and concluded in accordance with Article 11(1)(c) of said Regulation, on the grounds that the specific medicinal product does not represent a significant therapeutic benefit over existing treatments for paediatric patients.

The Icelandic and the Norwegian Paediatric Committee members agree with the above-mentioned recommendation of the Paediatric Committee.

2. The measures and timelines of the agreed 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.

London, 13 September 2013

On behalf of the Paediatric Committee
Dr Dirk Mentzer, Chairman
(Signature on file)

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

1. Waiver

1.1. Condition: treatment of asthma

The waiver applies to:

- The paediatric population from birth to less than 6 years of age;
- for solution for injection, subcutaneous use;
- on the grounds that the specific medicinal product does not represent a significant therapeutic benefit over existing treatments.

2. Paediatric Investigation Plan

2.1. Condition: treatment of asthma

2.1.1. Indication(s) targeted by the PIP

Treatment of allergic asthma uncontrolled on inhaled corticosteroids and a second controller medication in patients 6 years and above.

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

From 6 to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Solution for injection.

2.1.4. Measures

Area	Number of measures	Description
Quality	1	Measure 1 Development of age-appropriate dosage form for parenteral use
Non-clinical	1	Measure 2 Enhanced pre- and post-natal development study to evaluate the impact of quilizumab on pregnant female monkeys during the post-implantation period of gestation to parturition, on prenatal development of foetus during pregnancy and on postnatal development of infant cynomolgus monkeys during lactation.
Clinical	4	Measure 3 Double-blind, randomised, multicentre, parallel-group, placebo-controlled trial to evaluate efficacy, safety and tolerability of quilizumab as add-on to best standard of care in children from 12 to less than 18 years of age (and adults) with severe asthma.

Area	Number of measures	Description
		Measure 4 Double-blind, randomised, multicentre, parallel-group, placebo-controlled trial to evaluate safety, tolerability and oral corticosteroid-sparing effect of quilizumab as add-on to best standard of care in children from 12 to less than 18 years of age (and adults) with severe asthma. Measure 5 Population PK Model Measure 6 Double-blind, randomised, multicentre, parallel-group, placebo-controlled trial to evaluate efficacy, safety, tolerability and pharmacodynamics of quilizumab as add-on to best standard of care in children from 6 to less than 12 years of age with severe asthma.

3. Follow-up, completion and deferral of PIP

Concerns on potential long term safety issues in relation to paediatric use:	Yes
Date of completion of the paediatric investigation plan:	By February 2025
Deferral for one or more measures contained in the paediatric investigation plan:	Yes