

EMA/565652/2017

European Medicines Agency decision

P/0293/2017

of 4 October 2017

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for enasidenib (EMEA-001798-PIP02-16) 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 Celgene Europe Ltd on 28 November 2016 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 18 August 2017, 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 enasidenib, film-coated tablet, age-appropriate oral solid dosage form, oral use, gastric 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 enasidenib, film-coated tablet, age-appropriate oral solid dosage form, oral use, gastric 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 enasidenib, film-coated tablet, age-appropriate oral solid dosage form, oral use, gastric 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 Celgene Europe Ltd, 1 Longwalk Road, Stockely Park, UB11 1DB – Uxbridge, United Kingdom.

EMA/PDCO/353824/2017
London, 18 August 2017

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

EMA-001798-PIP02-16

Scope of the application

Active substance(s):

Enasidenib

Condition(s):

Treatment of acute myeloid leukaemia

Pharmaceutical form(s):

Film-coated tablet

Age-appropriate oral solid dosage form

Route(s) of administration:

Oral use

Gastric use

Name / corporate name of the PIP applicant:

Celgene Europe Ltd

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Celgene Europe Ltd submitted for agreement to the European Medicines Agency on 28 November 2016 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 3 January 2017.

Supplementary information was provided by the applicant on 24 May 2017. 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 Norwegian Paediatric Committee member agrees 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.

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 acute myeloid leukaemia

The request for the waiver applied to:

- the paediatric population from birth to less than 2 years of age;
- film-coated tablet, age-appropriate oral solid dosage form, oral use, gastric use;
- on the grounds that clinical studies with the specific medicinal product cannot be expected to be of significant therapeutic benefit to or fulfil a therapeutic need of the specified paediatric subset(s).

2. Paediatric investigation plan

2.1. Condition

Treatment of acute myeloid leukaemia

2.1.1. Indication(s) targeted by the PIP

Treatment of patients from 2 to less than 18 years of age with IDH2-mutated acute myeloid leukaemia

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

From 2 to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Film-coated tablet

Age-appropriate oral solid dosage form

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	1	Study 1 Development of an age-appropriate formulation, consisting of blend granulates filled into an appropriate unit dose (e.g., capsule or sachet) to produce an oral sprinkle dosage form.
Non-clinical studies	0	Not applicable.

Area	Number of measures	Description
Clinical studies	2	Study 2 Multicentre, single-arm, open label study to evaluate the safety, antitumor activity, and pharmacokinetic of enasidenib in relapsed or refractory acute myeloid leukaemia paediatric patients with isocitrate dehydrogenase 2 (IDH2) mutation (after at least 2 induction attempts) from 2 to less than 18 years of age (and adults). Study 3 Multicentre, open label study to evaluate efficacy and safety of enasidenib in combination with standard of care anti-cancer therapy in acute myeloid leukaemia paediatric patients with isocitrate dehydrogenase 2 (IDH2) mutation from 2 to less than 18 years of age (and adults).
Extrapolation, modelling and simulation studies	2	Study 4 Modelling and simulation study: population PK model/simulation and exposure response (safety) analysis Study 5 Analysis of existing and emerging data of enasidenib to support full extrapolation of efficacy from adult to paediatric patients with acute myeloid leukaemia with an IDH2 mutation
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 June 2026
Deferral for one or more measures contained in the paediatric investigation plan:	Yes