

EMA/384173/2023

European Medicines Agency decision P/0371/2023

of 8 September 2023

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for dextramipexole (dihydrochloride monohydrate) (EMA-003328-PIP01-22) 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 application submitted by Areteia Therapeutics on 12 September 2022 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 21 July 2023, in accordance with Article 17 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, as amended.

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

Has adopted this decision:

Article 1

A paediatric investigation plan for dexpramipexole (dihydrochloride monohydrate), tablet, oral 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 dexpramipexole (dihydrochloride monohydrate), tablet, oral 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 dexpramipexole (dihydrochloride monohydrate), tablet, oral 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 Areteia Therapeutics, 101 Glen Lennox Drive, 27517 - Chapel Hill, United States.

EMA/PDCO/198738/2023
Amsterdam, 21 July 2023

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

EMA-003328-PIP01-22

Scope of the application

Active substance(s):

Dexpramipexole (dihydrochloride monohydrate)

Invented name and authorisation status:

See Annex II

Condition(s):

Treatment of asthma

Pharmaceutical form(s):

Tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Areteia Therapeutics

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Areteia Therapeutics submitted for agreement to the European Medicines Agency on 12 September 2022 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 17 October 2022.

Supplementary information was provided by the applicant on 24 April 2023. 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 17(1) 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 Paediatric Committee member of Norway 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 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 asthma

The waiver applies to:

- the paediatric population from birth to less than 1 year of age;
- tablet, oral 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 asthma

2.1.1. Indication(s) targeted by the PIP

Add-on maintenance treatment for severe eosinophilic asthma in adolescents and children aged 1 year and older

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

From 1 year to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Tablet

2.1.4. Measures

Area	Description
Quality-related studies	Not applicable
Non-clinical studies	Study 1 Generation of additional pharmacodynamic data to define the molecular target and the mode of action of dexamipexole Study 2 Definitive toxicity study in juvenile rats
Clinical studies	Study 3 (AR-DEX-22-01, EXHALE-2) Double-blind, randomised, placebo-controlled trial to evaluate safety and efficacy of dexamipexole as add-on to standard of care in reducing severe asthma exacerbations in adolescents from 12 years to

	less than 18 years of age (and in adults) with severe eosinophilic asthma Study 4 (AR-DEX-22-02, EXHALE-3) Double-blind, randomised, placebo-controlled trial to evaluate safety and efficacy of dexpramipexole as add-on to standard of care in reducing severe asthma exacerbations in adolescents from 12 years to less than 18 years of age (and in adults) with severe eosinophilic asthma Study 5 (AR-DEX-22-03, EXHALE-4) Double-blind, randomised, placebo-controlled trial to evaluate safety and efficacy of dexpramipexole in improving pulmonary function as add-on to standard of care in adolescents from 12 years to less than 18 years of age (and in adults) with severe eosinophilic asthma Study 6 Open-label, uncontrolled trial to characterise the pharmacokinetics (PK) and pharmacodynamics (PD) of dexpramipexole as add-on to standard of care in children from 6 years to less than 12 years of age with severe eosinophilic asthma Study 7 Double-blind, randomised, placebo-controlled trial to evaluate efficacy and safety of dexpramipexole in improving pulmonary function as add-on to standard of care in children from 6 years to less than 12 years of age with severe eosinophilic asthma Study 8 Efficacy and safety study in children from 1 year to less than 6 years of age with asthma Study 9 Double-blind, randomised, placebo-controlled trial to evaluate safety and efficacy of dexpramipexole in improving pulmonary function as add-on to standard of care in adolescents from 12 years to less than 18 years of age with eosinophilic asthma Study 10 Double-blind, randomised, placebo-controlled trial to evaluate safety and efficacy of dexpramipexole in improving pulmonary function as add-on to standard of care in children from 6 years to less than 12 years of age with eosinophilic asthma
Modelling and simulation studies	Study 11 Modelling and simulation study to evaluate the use of dexpramipexole in children from 1 year to less than 12 years of age with eosinophilic asthma

Other studies	Not applicable
Extrapolation plan	Study 6 and Study 8 are a part of the extrapolation plan covering the paediatric population from 1 year to less than 12 years of age, as agreed by the PDCO.

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 July 2035
Deferral for one or more measures contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

Information provided by the applicant:

The product is not authorised anywhere in the European Community.