

EMA/485708/2020

European Medicines Agency decision

P/0402/2020

of 22 October 2020

on the acceptance of a modification of an agreed paediatric investigation plan for copanlisib (EMA-001757-PIP02-15-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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on the acceptance of a modification of an agreed paediatric investigation plan for copanlisib (EMA-001757-PIP02-15-M02) in accordance with Regulation (EC) No 1901/2006 of the European Parliament and of the Council

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/0262/2016 issued on 5 October 2016 and the decision P/0133/2020 issued on 15 April 2020,

Having regard to the application submitted by Bayer AG on 4 June 2020 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 4 September 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.
- (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.

² OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for copanlisib, powder for solution for infusion, intravenous 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 Bayer AG, Kaiser-Wilhelm-Allee 1, 51368 - Leverkusen, Germany.

EMA/PDCO/321964/2020
Amsterdam, 4 September 2020

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-001757-PIP02-15-M02

Scope of the application

Active substance(s):

Copanlisib

Condition(s):

Treatment of all conditions included in the category of malignant neoplasms (except haematopoietic and lymphoid tissue)

Treatment of mature B-cell neoplasms

Pharmaceutical form(s):

Powder for solution for infusion

Route(s) of administration:

Intravenous use

Name/corporate name of the PIP applicant:

Bayer AG

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Bayer AG submitted to the European Medicines Agency on 4 June 2020 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/0262/2016 issued on 5 October 2016 and the decision P/0133/2020 issued on 15 April 2020.

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

The procedure started on 6 July 2020.

Scope of the modification

Some measures and 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 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 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 all conditions included in the category of malignant neoplasms (except haematopoietic and lymphoid tissue)

The waiver applies to:

- the paediatric population from birth to less than 6 months of age;
- powder for solution for infusion, intravenous 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).

1.2. Condition:

Treatment of mature B-cell neoplasms

The waiver applies to:

- all subsets of the paediatric population from birth to less than 18 years of age;
- powder for solution for infusion, intravenous 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 all conditions included in the category of malignant neoplasms (except haematopoietic and lymphoid tissue)

2.1.1. Indication(s) targeted by the PIP

Treatment of children with a relapsed or refractory neuroblastoma, Ewing sarcoma, osteosarcoma or rhabdomyosarcoma including at first relapse, in combination with chemotherapy.

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

From 6 months to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Powder for solution for infusion, intravenous use

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	0	Not applicable.
Non-clinical studies	4	Study 1 Non-clinical <i>in vitro</i> pharmacology testing (single-agent) Study 2 Non-clinical <i>in vivo</i> pharmacology testing (single-agent) Study 3 Non-clinical <i>in vitro</i> pharmacology testing (combination) Study 4 Non-clinical tolerability study for combination therapy
Clinical studies	2	Study 5 Open-label, non-controlled, dose escalating trial to evaluate the pharmacokinetics, pharmacodynamics, safety and activity of copanlisib in children from 6 months to less than 18 years of age (and young adults) with a relapsed or refractory solid malignant tumour or a lymphoma and an extension phase in children from 6 months to less than 18 years of age (and young adults) with a relapsed or refractory neuroblastoma, osteosarcoma, rhabdomyosarcoma or Ewing sarcoma Study 6 Randomized, controlled trial to evaluate the safety and efficacy of copanlisib in combination with anti-cancer therapy in paediatric patients from 6 months to less than 18 years of age (and young adults) with a relapsed or refractory neuroblastoma, osteosarcoma, rhabdomyosarcoma or Ewing sarcoma
Extrapolation, modelling and simulation studies	2	Study 7 Physiology-based pharmacokinetic (PBPK) study to predict PK properties in paediatric patients Study 8 Population PK model for estimating the PK parameters of copanlisib in paediatric patients
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 2027
Deferral for one or more measures contained in the paediatric investigation plan:	Yes