EMA/591812/2011

European Medicines Agency decision

P/192/2011

of 3 August 2011

on the acceptance of a modification of an agreed paediatric investigation plan for beclometasone dipropionate / formoterol fumarate dihydrate (Foster and associated names, Kantos and associated names, Inuvair and associated names, Kantos Master and associated names), (EMEA-000548-PIP01-09-M01) 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 726/2004[1],

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 Agency[2],

Having regard to the European Medicines Agency's decision P/88/2010 issued on 1 June 2010,

Having regard to the application submitted by Chiesi Farmaceutici S.p.A. on 4 April 2011 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 17 June 2011, 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 beclometasone dipropionate / formoterol fumarate dihydrate, pressurised inhalation, solution, inhalation powder, inhalation 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 Chiesi Farmaceutici S.p.A., via Palermo 26/A, 43122 - Parma, Italy.

Done at London, 3 August 2011

For the European Medicines Agency
Andreas Pott
Acting Executive Director
(Signature on file)

EMA/PDCO/277335/2011

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan

EMEA-000548-PIP01-09-M01

Scope of the application

Active substance(s):

Beclometasone dipropionate / formoterol fumarate dihydrate

Invented name:

Foster and associated names

Kantos and associated names

Inuvair and associated names

Kantos Master and associated names

Condition(s):

Treatment of asthma

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Pressurised inhalation, solution

Inhalation powder

Route(s) of administration:

Inhalation use

Name/corporate name of the PIP applicant:

Chiesi Farmaceutici S.p.A.

Information about the authorised medicinal product:

See Annex II

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Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Chiesi Farmaceutici S.p.A. submitted to the European Medicines Agency on 4 April 2011 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/88/2010 issued on 1 June 2010.

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

The procedure started on 20 April 2011.

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 annexes and appendix.

London, 17 June 2011

On behalf of the Paediatric Committee
Dr Daniel Brasseur, 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 5 years of age;
- for
  - pressurised inhalation, solution,
  - inhalation powder;
- 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

Maintenance therapy of asthma where use of a combination product (inhaled corticosteroid and long-acting beta2-agonist) is appropriate:

- patients not adequately controlled with inhaled corticosteroids and 'as needed' inhaled short-acting beta2-agonist or
- patients already adequately controlled on both inhaled corticosteroids and long-acting beta2-agonists.

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

From 5 years to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Pressurised inhalation, solution (pMDI)

Inhalation powder (DPI)

Beclometasone dipropionate plus formoterol fumarate dihydrate 50 µg + 6 µg per actuation, pMDI

Beclometasone dipropionate plus formoterol fumarate dihydrate 100 µg + 6 µg per actuation, pMDI

Beclometasone dipropionate plus formoterol fumarate dihydrate 50 µg + 6 µg per actuation, DPI

Beclometasone dipropionate plus formoterol fumarate dihydrate 100 µg + 6 µg per actuation, DPI

2.1.4. Studies

Area	Number of studies	Description
Quality	Total number of quality studies	Development of an age-appropriate strength: • Beclometasone dipropionate (BDP) plus formoterol fumarate dihydrate (FF) 50 + 6 µg per actuation, pMDI, • Beclometasone dipropionate plus formoterol fumarate dihydrate 50 µg + 6 µg per actuation, DPI.
Non-clinical	Total number of studies	Not applicable
Clinical	Total number of studies	1. Open, randomized, 2-way crossover, single dose PK study in asthmatic children aged 5 years to less than 12 years (Paed 1 – pMDI). 2. Multicentre, randomised, double blind, 12 week, active-controlled, 3-arm parallel group efficacy and safety study in asthmatic children aged 5 years to less than 12 years (Paed 2 – pMDI). 3. Multicentre, randomised, double blind, single dose, placebo and active controlled, 5-period cross-over study to evaluate the dose-related bronchodilator effect in asthmatic children aged 5 years to less than 12 years (Paed 3– pMDI). 4. Open, randomized, 2-way crossover, single dose PK study in asthmatic children aged 5 years to less than 12 years (Paed 4 – DPI). 5. Multicentre, randomised, double blind, 12 week, active-controlled, 3-arm parallel group efficacy and safety study in asthmatic children aged 5 years to less than 12 years (Paed 5 – DPI). 6. Multicentre, randomised, double blind, single dose, placebo and active controlled, 5-period cross-over study to evaluate the dose-related bronchodilator effect in asthmatic children aged 5 years to less than 12 years (Paed 6 – DPI). 7. Single-center, knemometry study in asthmatic children aged 5 years to less than 12 years (pMDI-50/6-KNE). 8. Single-center, knemometry study in asthmatic children aged 5 years to less than 12 years (DPI-50/6-KNE). 9. Open, randomized, 3-way crossover, single dose PK/PD study in asthmatic adolescents 12 to less than 18 years (and adults) (pMDI-100/6-ADO). 10. Open, randomized, 2-way crossover, single dose PK/PD study in Asthmatic adolescents 12 to less than 18 years (and adults) (DPI-100/6-ADO).

3. Follow-up, completion and deferral of PIP

Measures to address long-term follow-up of potential safety issues in relation to paediatric use:	Yes
Date of completion of the paediatric investigation plan:	By October 2014
Deferral for one or more studies contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

Condition(s) and authorised indication(s):

1. Treatment of Asthma

   Authorised indications:

   Regular treatment of asthma where use of a combination product (inhaled corticosteroid and long-acting beta2-agonist) is appropriate:

   - patients not adequately controlled with inhaled corticosteroids and 'as needed' inhaled short-acting beta2-agonist or

   - patients already adequately controlled on both inhaled corticosteroids and long-acting beta2-agonists.

   (Adults only)

EU Number	**Invented name** **Name**	**Strength**	**Pharmaceutical form**	**Route of administration**	**Packaging**	**Content (concentration)**	**Package size**
N/A	Foster and associated names Kantos and associated names Inuvair and associated names Kantos Master and associated names	100 µg + 6 µg per actuation	Pressurised inhalation, solution	Inhalation use			