



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/647363/2011

European Medicines Agency decision P/201/2011

of 30 August 2011

on the agreement of a paediatric investigation plan and on the granting of a deferral for cilengitide (EMA-000550-PIP02-10) 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 Merck KGaA on 1 July 2010 under Article 16(1) of Regulation (EC) No 1901/2006 also requesting a deferral under Article 20 of said Regulation,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 15 July 2011, in accordance with Article 18 of Regulation (EC) No 1901/2006, and Article 21 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.
- (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.

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 cilengitide, solution for infusion, intravenous 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 cilengitide, solution for infusion, intravenous 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

This decision is addressed to Merck KGaA, Frankfurter Strasse 250, 64293 – Darmstadt, Germany.

Done at London, 30 August 2011

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



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/356488/2011

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

EMA-000550-PIP02-10

Scope of the application

Active substance(s):

Cilengitide

Condition(s):

Treatment of high-grade glioma

Pharmaceutical form(s):

Solution for infusion

Route(s) of administration:

Intravenous use

Name/corporate name of the PIP applicant:

Merck KGaA

Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Merck KGaA submitted for agreement to the European Medicines Agency on 1 July 2010 an application for a paediatric investigation plan for the above mentioned medicinal product and a deferral under Article 20 of said Regulation.

The procedure started on 12 August 2010.

Supplementary information was provided by the applicant on 28 April 2011. 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.

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 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(es) and appendix.

London, 15 July 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

Not applicable

2. Paediatric Investigation Plan

2.1. Condition: Treatment of high-grade glioma

2.1.1. Indication(s) targeted by the PIP

Treatment of newly diagnosed and relapsed/progressive high-grade glioma

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

From birth to less than 18 years of age.

2.1.3. Pharmaceutical form(s)

Solution for infusion for intravenous use

2.1.4. Studies

Area	Number of studies	Description
Quality	0	Not applicable.
Non-clinical	1	Study 1 Repeat-dose toxicity study in juvenile rats to support the development in children below 3 years of age.
Clinical	4	Study 2 Open-label, non-randomized, non-controlled, multicentre study in children below 18 years of age and young adults to evaluate safety and tolerability of cilengitide monotherapy in children and adolescents with refractory primary brain tumors (PBTC-012). Study 3 Open-label, non-randomized, non-controlled, multicentre study in children below 18 years of age and young adults to evaluate the activity of cilengitide monotherapy in recurrent or progressive and refractory high grade gliomas of childhood (COG-ACNS0621). Study 4 Open-label, randomized, add-on, controlled, multicenter study evaluating the safety and efficacy of cilengitide in combination with temozolomide (TMZ) with concomitant radiationtherapy (RT) and TMZ maintenance treatment versus TMZ plus RT treatment followed by TMZ maintenance treatment alone in children from 3 years to less than 18 years of age with newly diagnosed

Area	Number of studies	Description
		high-grade glioma including diffuse intrinsic pontine glioma, (CiTRIC). Study 5 Open-label, randomized, controlled, multicenter study with a safety run-in, evaluating the safety and efficacy of cilengitide add-on to temozolomide (TMZ) and cisplatin (CP) versus TMZ and CP alone in children below 18 years of age with recurrent/progressive high-grade glioma (HGG) including diffuse intrinsic pontine glioma (DIPG) or newly diagnosed HGG (including DIPG) patients not scheduled for radiationtherapy, (CiTCIP).

3. Follow-up, completion and deferral of PIP

Concerns on potential long term safety and efficacy issues in relation to paediatric use:	Yes
Date of completion of the paediatric investigation plan:	By November 2018
Deferral for one or more studies contained in the paediatric investigation plan:	Yes