EMA/683839/2011

European Medicines Agency decision

P/216/2011

of 9 September 2011

on the agreement of a paediatric investigation plan and on the granting of a deferral and on the granting of a waiver for deferasirox (Exjade) (EMEA-001103-PIP01-10) 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 726/2004[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 application submitted by Novartis Europharm Limited on 10 December 2010 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 12 August 2011, 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 deferasirox (Exjade), dispersible 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 deferasirox (Exjade), dispersible 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 deferasirox (Exjade), dispersible 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 Novartis Europharm Limited, Wimblehurst Road, RH12 5AB Horsham, West Sussex, United Kingdom.

Done at London, 9 September 2011

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

EMA/PDCO/498174/2011

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

EMEA-001103-PIP01-10

Scope of the application

Active substance(s):

Deferasirox

Invented name:

Exjade

Condition(s):

Treatment of chronic iron overload requiring chelation therapy

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Dispersible tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Novartis Europharm Limited

Information about the authorised medicinal product:

See Annex II

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Basis for opinion

Pursuant to Article 16(1) of Regulation (EC) No 1901/2006 as amended, Novartis Europharm Limited submitted for agreement to the European Medicines Agency on 10 December 2010 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 19 January 2011.

Supplementary information was provided by the applicant on 30 May 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,
   - 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 Icelandic and the Norwegian Paediatric Committee members agree 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(es) and appendix.

London, 12 August 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 chronic iron overload requiring chelation therapy

The waiver applies to:

- All subsets of the paediatric population from birth to less than 2 years of age;
- for dispersible tablets, oral use;
- on the grounds that clinical studies cannot be expected to be of significant therapeutic benefit to or fulfil a therapeutic need of the paediatric population.

2. Paediatric Investigation Plan

2.1. Condition: Treatment of chronic iron overload requiring chelation therapy

2.1.1. Indication(s) targeted by the PIP

- Treatment of chronic transfusional iron overload in patients with beta thalassaemia major.
- Treatment of chronic iron overload in patients with non-transfusion-dependent thalassaemia.
- Treatment of chronic iron overload due to blood transfusions when deferoxamine therapy is contraindicated or inadequate in patients with other anaemias.

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)

Dispersible tablet (125 mg, 250 mg, 500 mg)

2.1.4. Studies

Area	Number of studies	Description
Quality	1	Study 1: Analysis of the palatability of the currently approved posology of deferasirox in paediatric patients 3 to 10 years of age with transfusional haemosiderosis
Non-clinical	0	Not applicable.
Clinical	3	Study 2: Double-blind, randomised, multicentre, placebo-controlled study of the efficacy and safety of deferasirox in paediatric and adult patients (10 years of age and older) with non-transfusion dependent thalassaemia syndromes

Area	Number of studies	Description
		Study 3: Open-label, multicentre 5-year observational study (registry) in children from 2 to less than 6 years of age at enrolment with transfusional haemosiderosis treated with deferasirox Study 4: Quantitative assessment (meta-analysis) of safety and efficacy profiles by age, blood intake rate, iron burden and average dose groups from six long-term clinical trials of deferasirox in paediatric and adult patients from 2 years of age with β-thalassaemias and transfusional iron overload

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 June 2015
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 chronic iron overload requiring chelation therapy

   Authorised indications:

   EXJADE is indicated for the treatment of chronic iron overload due to frequent blood transfusions (≥7 ml/kg/month of packed red blood cells) in patients with beta thalassaemia major aged 6 years and older.

   EXJADE is also indicated for the treatment of chronic iron overload due to blood transfusions when deferoxamine therapy is contraindicated or inadequate in the following patient groups:

   - in patients with beta thalassaemia major with iron overload due to frequent blood transfusions (≥ 7 ml/kg/month of packed red blood cells) aged 2 to 5 years,
   - in patients with beta thalassaemia major with iron overload due to infrequent blood transfusions (<7 ml/kg/month of packed red blood cells) aged 2 years and older,
   - in patients with other anaemias aged 2 years and older.

EU Number	Invented name	Strength	Pharmaceutical Form	Route of Administration	Packaging	Package size
EU/1/06/356/001	Exjade	125 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	28 tablets
EU/1/06/356/002	Exjade	125 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	84 tablets
EU/1/06/356/003	Exjade	250 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	28 tablets
EU/1/06/356/004	Exjade	250 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	84 tablets
EU/1/06/356/005	Exjade	500 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	28 tablets
EU/1/06/356/006	Exjade	500 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	84 tablets
EU/1/06/356/007	Exjade	125 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	252 tablets
EU/1/06/356/008	Exjade	250 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	252 tablets
EU/1/06/356/009	Exjade	500 mg	Dispersible tablet	Oral use	blister (PVC/PE/PVDC/alu)	252 tablets