



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/144931/2021

European Medicines Agency decision P/0076/2021

of 17 March 2021

on the acceptance of a modification of an agreed paediatric investigation plan for larotrectinib (Vitrakvi), (EMA-001971-PIP02-16-M03) 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 European Medicines Agency's decision P/0179/2017 issued on 3 July 2017, the decision P/0182/2018 issued on 15 June 2018 and the decision P/0318/2019 issued on 11 September 2019,

Having regard to the application submitted by Bayer AG on 21 October 2020 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a deferral,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 29 January 2021, 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 and to the deferral.
- (2) It is therefore appropriate to adopt a decision on the acceptance of changes to the agreed paediatric investigation plan, including changes to the 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

Changes to the agreed paediatric investigation plan for larotrectinib (Vitrakvi), capsule, hard, oral solution, oral use, gastric use, including changes to the deferral, 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, 51373 - Leverkusen, Germany.



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/579755/2020
Amsterdam, 29 January 2021

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-001971-PIP02-16-M03

Scope of the application

Active substance(s):

Larotrectinib

Invented name:

Vitrakvi

Condition(s):

Treatment of all conditions included in the category of malignant neoplasms (except central nervous system tumours, haematopoietic and lymphoid tissue neoplasms)

Authorised indication(s):

See Annex II

Pharmaceutical form(s):

Capsule, hard

Oral solution

Route(s) of administration:

Oral use

Gastric use

Name/corporate name of the PIP applicant:

Bayer AG

Information about the authorised medicinal product:

See Annex II



Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Bayer AG submitted to the European Medicines Agency on 21 October 2020 an application for modification of the agreed paediatric investigation plan with a deferral as set out in the European Medicines Agency's decision P/0179/2017 issued on 3 July 2017, the decision P/0182/2018 issued on 15 June 2018 and the decision P/0318/2019 issued on 11 September 2019.

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

The procedure started on 1 December 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 and to the deferral 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 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

Not applicable

2. Paediatric investigation plan

2.1. Condition:

Treatment of all conditions included in the category of malignant neoplasms (except central nervous system tumours, haematopoietic and lymphoid tissue neoplasms)

2.1.1. Indication(s) targeted by the PIP

Treatment of paediatric patients from birth to less than 18 years of age with advanced solid tumours harbouring an NTRK fusion

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)

Capsule, hard

Oral solution

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	2	Study 1 Development of an oral solution (not containing ORA-SWEET) Study 2 Assessment of the administration of the oral solution (not containing ORA-SWEET) via nasal gastric tube
Non-clinical studies	2	Study 3 Dose range finding toxicity study in juvenile Sprague Dawley rats Study 4 Juvenile toxicity study in Sprague Dawley rats
Clinical studies	1	Study 5 Open-label trial to evaluate the pharmacokinetic and safety of larotrectinib in paediatric patients with advanced solid or primary central nervous system tumours from birth to less than 18 years of age (and young adults of less than 22 years of age) (part 1-dose escalation) and to evaluate the anti-cancer activity of larotrectinib in

Area	Number of measures	Description
		an expansion cohort of paediatric patients from birth to less than 18 years of age (and young adults of less than 22 years of age) with tumours harbouring NTRK fusions (part 2) (LOXO-TRK-15003)
Extrapolation, modelling and simulation studies	1	Study 6 Modelling and simulation study to evaluate the use and support dosing regimen of larotrectinib in paediatric patients from birth to less than 18 years of age with tumours harbouring an NTRK fusion (LOXO-101-DMPK-052).
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 September 2021
Deferral for one or more measures contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

Condition(s) and authorised indication(s):

1. Treatment of all conditions included in the category of malignant neoplasms (except central nervous system tumours, haematopoietic and lymphoid tissue neoplasms)
2. Treatment of malignant neoplasms of the central nervous system

Authorised indication(s):

VITRAKVI as monotherapy is indicated for the treatment of adult and paediatric patients with solid tumours that display a Neurotrophic Tyrosine Receptor Kinase (NTRK) gene fusion,

- who have a disease that is locally advanced, metastatic or where surgical resection is likely to result in severe morbidity, and
- who have no satisfactory treatment options.

Authorised pharmaceutical form(s):

Capsule, hard

Oral solution

Authorised route(s) of administration:

Oral use.