EMA/192380/2021

European Medicines Agency decision

P/0169/2021

of 14 April 2021

on the acceptance of a modification of an agreed paediatric investigation plan for dienogest / ethinyl estradiol (EMEA-002229-PIP01-17-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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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/0017/2018 issued on 30 January 2018 and the decision P/0053/2019 issued on 29 January 2019,

Having regard to the application submitted by Chemo Research on 27 November 2020 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a waiver,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 26 February 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.

(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 dienogest / ethinyl estradiol, prolonged-release tablet, oral 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 Chemo Research, C/ Manuel Pombo Angulo 28, 3rd Floor, 28050 – Madrid, Spain.

EMA/PDCO/657179/2020
Amsterdam, 26 February 2021

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

EMEA-002229-PIP01-17-M02

Scope of the application

Active substance(s):

Dienogest / ethinyl estradiol

Condition(s):

Prevention of pregnancy

Pharmaceutical form(s):

Prolonged-release tablet

Route(s) of administration:

Oral use

Name/corporate name of the PIP applicant:

Chemo Research

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Chemo Research submitted to the European Medicines Agency on 27 November 2020 an application for modification of the agreed paediatric investigation plan with a waiver as set out in the European Medicines Agency's decision P/0017/2018 issued on 30 January 2018 and the decision P/0053/2019 issued on 29 January 2019.

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

The procedure started on 4 January 2021.

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

Prevention of pregnancy

The waiver applies to:

- males: all subsets of the paediatric population from birth to less than 18 years of age;
- females: girls from birth to age at menarche;
- prolonged-release tablet, oral use;
- on the grounds that the disease or condition for which the specific medicinal product is intended does not occur in the specified paediatric subset(s).

2. Paediatric investigation plan

2.1. Condition

Prevention of pregnancy

2.1.1. Indication(s) targeted by the PIP

Prevention of pregnancy

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

Female adolescents after menarche

2.1.3. Pharmaceutical form(s)

Prolonged-release tablet

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	0	Not applicable
Non-clinical studies	0	Not applicable

Clinical studies	1	**Study 1** Open-label, single arm, trial to evaluate safety, efficacy and pharmacokinetics of LPRI-424 (Dienogest 2.00 mg / Ethinyl Estradiol 0.02 mg) in healthy female adolescents after menarche (and in adults) during 13 Cycles of 28 days
Extrapolation, modelling and simulation studies	0	Not applicable
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:	No
Date of completion of the paediatric investigation plan:	By May 2022
Deferral for one or more measures contained in the paediatric investigation plan:	No