COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE
OPINION FOLLOWING AN ARTICLE 31 REFERRAL

ATOMOXETINE, CITALOPRAM, ESCITALOPRAM, FLUOXETINE, FLUVOXAMINE,
MIANSERINE, MILNACIPRAN, MIRTAZAPINE, PAROXETINE, REBOXETINE,
SERTRALINE AND VENLAFAXINE

BACKGROUND INFORMATION*

Most of the above mentioned medicinal products are approved for the treatment of depression and anxiety in adults, but are not licensed Europe-wide for the treatment of these conditions in children or adolescents. Only some of these medicines are authorised for the treatment of obsessive-compulsive disorder (OCD) in children and adolescents and atomoxetine is authorised for the treatment of attention deficit/hyperactivity disorder (ADHD) in children and adolescents.

On 17 December 2004 the European Commission referred the matter to the EMEA under Article 31 of Directive 2001/83/EC, as amended, for medicinal products containing atomoxetine, citalopram, escitalopram, fluoxetine, fluvoxamine, mianserine, milnacipran, mirtazapine, paroxetine, reboxetine, sertraline and venlafaxine. The reasons for referral concerned the risk of suicidal behaviour, including suicide attempts and suicidal ideation and/or related behaviour like self-harm, hostility and mood lability in children and adolescents treated with the above mentioned active substances.

The referral procedure started on 20 January 2005. Dr Barbara van Zwieten-Boot was appointed Rapporteur and Dr Gonzalo Calvo Rojas, Dr Eric Abadie, Dr Karl Broich and Dr Julia Dunne were appointed Co-Rapporteurs. Written explanations were provided by the Marketing Authorisation Holders by 22 February 2005.

Based on the evaluation of the available data and the Rapporteurs’ assessment reports, the CHMP adopted and opinion on 21 April 2005. This Opinion recommended the maintenance of the Marketing Authorisations in accordance with the amendments to the relevant sections of the Summaries of Product Characteristics and Package Leaflets as set out in Annexes III and IV.

The list of product names concerned is given in the Annex I. The scientific conclusions are provided in the Annex II.

The final opinion was converted into a Decision by the European Commission on 19 August 2005.

Notes: The information given in this document and Annexes reflect only the CHMP Opinion dated 21 April 2005.

Following the adoption of the CHMP, further data have become available on Atomoxetine. These data have been evaluated by the Reference Member State (MHRA) and has identified an increased risk of suicidal thoughts and behaviour in children treated with Atomoxetine. Updated warnings will be put on the Product Information for Atomoxetine about the risk of suicidal thoughts and behaviour. For more information see:


The Member States competent authorities will continue to keep the product under regular review.