



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

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Refusal of a change to the marketing authorisation for Pemazyre (pemigatinib)

The European Medicines Agency has recommended the refusal of a change to the marketing authorisation for Pemazyre to extend its use to the treatment of myeloid/lymphoid neoplasms with fibroblast growth factor receptor 1 (*FGFR1*) rearrangement (changes in the *FGFR1* gene that produce an abnormal form of a protein called FGFR1). Myeloid/lymphoid neoplasms are very rare cancers that affect the bone marrow and white blood cells.

The Agency issued this opinion on 27 March 2025.

The company that applied for the change to the authorisation, Incyte Biosciences Distribution B.V., may ask for re-examination of the opinion within 15 days of receiving the opinion.

What is Pemazyre and what is it used for?

Pemazyre is a cancer medicine used to treat adults with cholangiocarcinoma (biliary tract cancer or cancer of the bile ducts) when the cancer cells have an abnormal form of a receptor called FGFR2 on their surface. Pemazyre is used when the cancer has spread to other parts of the body or cannot be removed by surgery and has worsened after treatment with at least one cancer medicine.

Pemazyre has been authorised in the EU since March 2021 under a conditional marketing authorisation. It contains the active substance pemigatinib and is available as tablets to be taken by mouth.

Further information on Pemazyre's uses can be found on the Agency's website:

ema.europa.eu/en/medicines/human/EPAR/pemazyre

What change had the company applied for?

The company applied to extend the use of Pemazyre to the treatment of adults with myeloid/lymphoid neoplasms when the cancer cells have an abnormal form of a receptor called FGFR1 on their surface.

Pemazyre was designated an 'orphan medicine' (a medicine used in rare diseases) on 17 October 2019 for the treatment of myeloid/lymphoid neoplasms with eosinophilia and rearrangements or fusion in the genes for some proteins called receptor tyrosine kinases (*PDGFRA*, *PDGFRB*, *FGFR1* and *PCM1*-

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JAK2). Further information on the orphan designation can be found on the Agency's website: ema.europa.eu/medicines/human/orphan-designations/EU3192216.

How does Pemazyre work?

The active substance in Pemazyre, pemigatinib, belongs to a group of medicines called protein kinase inhibitors. It works by blocking the activity of tyrosine kinase receptors, such as FGFR receptors. Abnormal FGFR receptors are found on the surface of cancer cells and are involved in the growth and spread of the cancer. By blocking their activity, Pemazyre slows the progression of the cancer.

What did the company present to support its application?

The company submitted data from a study in 45 adults with myeloid/lymphoid neoplasms with *FGFR1* rearrangement. Patients received Pemazyre for 6 months and the main measure of effectiveness was the number of patients whose disease responded to treatment. The study did not compare Pemazyre with another medicine or placebo (a dummy treatment).

What were the main reasons for refusing the change to the marketing authorisation?

EMA considered that the data were not sufficiently comprehensive, meaning that there were remaining uncertainties about the benefits and risks of the medicine. The study did not compare Pemazyre with another treatment or placebo and included a small number of patients, reflecting a limited range of the different forms of the disease. This, in addition to changes that were made in the design of study while it was carried out could have affected the validity of the results.

The company was requested to generate additional data after authorisation on the benefits and risks of Pemazyre in myeloid/lymphoid neoplasms with *FGFR1* rearrangement to address the remaining uncertainties. The agency asked the company to set up a registry-based study to provide further data, but the company considered that it would not be possible to provide the required data.

Therefore, although there is a need for better treatment options in patients with myeloid/lymphoid neoplasms, the results provided by the company so far are not considered sufficient to support an authorisation without a commitment to generate new data and further inform the benefit-risk profile of Pemazyre in this new use. The fact that the company would not be able to generate additional data to address the remaining uncertainties on the benefits and risks of Pemazyre meant that a conditional marketing authorisation could not be granted for Pemazyre in the treatment of myeloid/lymphoid neoplasms with *FGFR1* rearrangement. The Agency therefore recommended refusing the conditional marketing authorisation for this use.

Does this refusal affect patients in clinical trials?

The company informed the Agency that there are no consequences for patients who are receiving Pemazyre for myeloid/lymphoid neoplasms with *FGFR1* rearrangement in clinical trials or in compassionate use programmes.

If you are in a clinical trial or compassionate use programme and need more information about your treatment, speak with your clinical trial doctor.

What is happening with Pemazyre for treatment in cholangiocarcinoma?

There are no consequences for Pemazyre in its authorised use.