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**Monthly report**

# Paediatric Committee (PDCO)

09-11 November 2011

## Opinions on paediatric investigation plans

The Paediatric Committee (PDCO) adopted opinions agreeing paediatric investigation plans (PIPs) for the following medicines:

- Deferiprone, from Consorzio per Valutazioni Biologiche e Farmacologiche (CVBF), in the therapeutic area of Haematology-Hemostaseology;
- Nonacog alfa (recombinant coagulation factor IX), from Baxter Innovations GmbH, in the therapeutic area of Haematology-Hemostaseology;
- Human monoclonal antibody against IL-6 (CNTO 136), from Janssen-Cilag International NV, in the therapeutic area of Immunology-Rheumatology-Transplantation;
- Macitentan, from Actelion Registration Ltd, in the therapeutic area of Immunology-Rheumatology-Transplantation / Cardiovascular Diseases / Pneumology - Allergology;
- Purified antigen fractions of inactivated split virion Influenza manufactured in the Dresden plant: A/H1N1 A/H3N2 B/Victoria B/Yamagata, from GlaxoSmithKline Biologicals S.A., in the therapeutic area of Vaccines;
- Lomitapide, from Aegerion Pharmaceuticals, in the therapeutic area of Endocrinology-Gynaecology-Fertility-Metabolism;
- (1-(3-chloro-5-{[4-(4-chloro-2-thienyl)-5-(4-cyclohexylpiperazin-1-yl)-1,3-thiazol-2-yl]carbamoyl}-2-pyridyl)piperidine-4-carboxylic acid monomaleate), from Eisai Limited, in the therapeutic area of Haematology-Hemostaseology;
- Chimeric monoclonal anti-Shiga toxin (Stx) antibodies cαStx1 and cαStx2, from LFB Biotechnologies, in the therapeutic area of Infectious Diseases;

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- Recombinant human granulocyte colony stimulating factor coupled with recombinant human albumin fusion protein, from Teva GmbH, in the therapeutic area of Oncology / Haematology-Hemostaseology;
- Afamelanotide, from Clinuvel (UK) Limited, in the therapeutic area of dermatology.

A PIP sets out a programme for the development of a medicine in the paediatric population. The PIP aims to generate the necessary quality, safety and efficacy data through studies to support the authorisation of the medicine for use in children of all ages. These data have to be submitted to the European Medicines Agency, or national competent authorities, as part of an application for a marketing authorisation for a new medicine, or for one covered by a patent. In some cases, a PIP may include a waiver of the studies in one or more paediatric subsets, or a deferral.

## Opinions on product-specific waivers

The PDCO adopted positive opinions for product-specific waivers, recommending that the obligation to submit data obtained through clinical studies with children be waived in all subsets of the paediatric population, for the following medicines:

- Liraglutide / Insulin degludec, from Novo Nordisk A/S, in the therapeutic area of Endocrinology-Gynaecology-Fertility-Metabolism;
- Esketamine , from Auris Medical Limited, in the therapeutic area of oto-rhino-laryngology;

Waivers can be issued if there is evidence that the medicine concerned is likely to be ineffective or unsafe in the paediatric population, or that the disease or condition targeted occurs only in adult populations, or that the medicine, or the performance of trials, does not represent a significant therapeutic benefit over existing treatments for paediatric patients.

## Class waivers

The PDCO adopted an opinion on the confirmation of the current list of class waivers for conditions that do not affect children, or for classes of medicinal products to be used in specific conditions, and for which the requirement to submit a PIP can therefore be waived. The list of waivers is updated at least once a year by the PDCO.

## Opinions on modifications to an agreed PIP

The PDCO also adopts, every month, opinions on modifications to an agreed PIP, which can be requested by the applicant when the plan is no longer appropriate or when there are difficulties that render the plan unworkable.

## Opinion on compliance check

The PDCO adopted a positive opinion on compliance check for insulin glargine, from Sanofi-Aventis Deutschland GmbH, in the therapeutic area of endocrinology-gynaecology-fertility-metabolism.

A compliance check is performed to verify that all the measures agreed in a PIP and reflected in the Agency's decision have been conducted in accordance with the decision, including the agreed timelines. Compliance is one of several prerequisites for obtaining the rewards and incentives provided for in Articles 36 to 38 of the Paediatric Regulation.

Before the submission of a request for a compliance check, applicants are encouraged to consult the Agency's Procedural advice for validation of a new marketing authorisation application or extension/variation application and compliance check with an agreed PIP.

## Withdrawals

The PDCO noted that 1 application was withdrawn during the late stages of the evaluation (30 days or less before opinion).

The PDCO noted that a request for modification of an agreed PIP was withdrawn before the EMA decision.

## Interaction with external experts

The PDCO has regular interactions with academic experts, with a view to bringing state-of-the-art knowledge to the PDCO scientific discussions. An expert was invited to the November meeting with a clinical expertise in paediatric field of insomnia.

**Other issues**

The next meeting of the PDCO will be held on 07-09 December 2011.

## – END –

# Notes:

1. PDCO opinions on PIPs and waivers are transformed into Agency's decisions within the timeframe laid down by the Paediatric Regulation (Regulation (EC) No 1901/2006, as amended). The decisions can be found on the Agency's website at: http://www.ema.europa.eu/ema/index.jsp?curl=pages/medicines/landing/pip_search.jsp&murl=menus/medicines/medicines.jsp&mid=WC0b01ac058001d129

2. As of 26 January 2009, pharmaceutical companies that submit an application for a marketing authorisation for a medicinal product, or those that submit an application for an extension of indication, a new route of administration, or a new pharmaceutical form of a medicinal product already authorised in the European Union, have to provide either the results of studies in children conducted in accordance with an approved PIP, or an Agency's decision on a waiver or on a deferral.

3. More information about the PDCO and the Paediatric Regulation is available in the Regulatory section of the Agency's website: http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general/general_content_000023.jsp&murl=menus/regulations/regulations.jsp&mid=WC0b01ac05800240cd

4. This meeting report, together with other information on the work of the Agency's, can be found on the Agency's website: http://www.ema.europa.eu

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# Annex of the November 2011 PDCO meeting report

| | 2009 (January to December) | 2010 (January to December) | 2011 (January to current month) | Cumulative total (2007 to 2011) |
|---|---|---|---|---|
| Total number of validated PIP/waiver applications | 273 | 326 | 170 | 1127[1] |
| Applications submitted for a product not yet authorised *(Article 7[2])* | 191 | 280 | 140 | 837 *(74%)* |
| Applications submitted for a product already authorised and still under patent, in view of a submission of a variation/extension for a new indication, pharmaceutical form or route of administration *(Article 8[2])* | 72 | 43 | 29 | 264 *(24%)* |
| Applications submitted for an off-patent product developed specifically for children with an age-appropriate formulation *(Article 30[2])* | 10 | 4 | 1 | 26 *(2%)* |
| PIPs and full waiver indications covered by these applications | 395 | 403 | 200 | 1564 |

| Number of Paediatric Committee (PDCO) opinions | 2009 | 2010 | 2011 | Cumulative total |
|---|---|---|---|---|
| Positive on full waiver | 67 | 52 | 42 | 218 |
| Positive on PIP, including potential deferral | 122 | 201 | 94 | 500 |
| Negative opinions adopted | 13 | 7 | 3 | 27 |
| Positive opinions adopted on modification of a PIP | 51 | 103 | 139 | 301 |
| Negative opinions adopted on modification of a PIP | 0 | 4 | 2 | 6 |
| Positive opinions on compliance with a PIP | 8 | 9 | 7 | 29 |
| Negative opinions on compliance check with a PIP | 1 | 0 | 0 | 1 |
| Opinions adopted under Art. 14.2 | 0 | 2 | 0 | 2 |

[1] Of which 268 have been requests for a full waiver.
[2] Applications submitted in accordance with the referenced article of Regulation (EC) No 1901/2006, as amended.

| Areas covered by PIPs/waiver applications | 2009 (%) | 2010 (%) | 2011 (Number of areas covered)* |
|---|---|---|---|
| Neurology | 4 | 3 | 10 |
| Uro-nephrology | 5 | 2 | 4 |
| Gastroenterology-hepatology | 2 | 1 | 9 |
| Pneumology-allergology | 6 | 41 | 8 |
| Infectious diseases | 9 | 4 | 14 |
| Cardiovascular diseases | 9 | 8 | 20 |
| Diagnostics | 1 | 1 | 5 |
| Endocrinology-gynaecology-fertility-metabolism | 16 | 6 | 26 |
| Neonatology-paediatric intensive care | 2 | 0 | 0 |
| Immunology-rheumatology-transplantation | 6 | 5 | 10 |
| Psychiatry | 3 | 1 | 8 |
| Pain | 6 | 1 | 2 |
| Haematology-haemostaseology | 6 | 4 | 17 |
| Otorhinolaryngology | 1 | 3 | 1 |
| Oncology | 11 | 9 | 18 |
| Dermatology | 6 | 1 | 7 |
| Vaccines | 4 | 2 | 12 |
| Ophthalmology | 2 | 4 | 6 |
| Anaesthesiology | 1 | 2 | 1 |
| Nutrition | 0 | 0 | 0 |
| | | | 6 |

** One PIP can cover several therapeutic areas*