



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/84328/2023

European Medicines Agency decision P/0068/2023

of 10 March 2023

on the acceptance of a modification of an agreed paediatric investigation plan for budesonide / glycopyrronium bromide / formoterol (fumarate), (Trixeo Aerosphere), (EMA-002063-PIP01-16-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 726/2004¹,

Having regard to Regulation (EC) No 726/2004 of the European Parliament and of the Council of 31 March 2004 laying down Union procedures for the authorisation and supervision of medicinal products for human use and establishing a European Medicines Agency²,

Having regard to the European Medicines Agency's decision P/0384/2017 issued on 19 December 2017 and the decision P/0013/2022 issued on 31 January 2022,

Having regard to the application submitted by AstraZeneca AB on 30 September 2022 under Article 22 of Regulation (EC) No 1901/2006 proposing changes to the agreed paediatric investigation plan with a deferral and a waiver,

Having regard to the opinion of the Paediatric Committee of the European Medicines Agency, issued on 20 January 2023, 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, as amended.

² OJ L 136, 30.4.2004, p. 1, as amended.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for budesonide / glycopyrronium bromide / formoterol (fumarate), (Trixeo Aerosphere), pressurised inhalation, suspension, inhalation 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 AstraZeneca AB, SE-15185 – Södertälje, Sweden.



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

EMA/PDCO/888969/2022
Amsterdam, 20 January 2023

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-002063-PIP01-16-M02

Scope of the application

Active substance(s):

Budesonide / glycopyrronium bromide / formoterol (fumarate)

Invented name and authorisation status:

See Annex II

Condition(s):

Treatment of asthma

Pharmaceutical form(s):

Pressurised inhalation, suspension

Route(s) of administration:

Inhalation use

Name/corporate name of the PIP applicant:

AstraZeneca AB

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, AstraZeneca AB submitted to the European Medicines Agency on 30 September 2022 an application for modification of the agreed paediatric investigation plan with a deferral and a waiver as set out in the European Medicines Agency's decision P/0384/2017 issued on 19 December 2017 and the decision P/0013/2022 issued on 31 January 2022.

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

The procedure started on 21 November 2022.



Scope of the modification

Some measures 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 Paediatric Committee member of Norway 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 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

1.1. Condition:

Treatment of asthma

The waiver applies to:

- the paediatric population from birth to less than 4 years of age;
- pressurised inhalation, suspension; inhalation use;
- on the grounds that the specific medicinal product does not represent a significant therapeutic benefit over existing treatments.

2. Paediatric investigation plan

2.1. Condition:

Treatment of asthma

2.1.1. Indication(s) targeted by the PIP

For the regular treatment of asthma in children and adolescents 4 years to less than 18 years of age where use of a triple combination medicinal product is appropriate

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

From 4 years to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Pressurised inhalation, suspension

2.1.4. Measures

Area	Description
Quality-related studies	Not applicable
Non-clinical studies	Not applicable
Clinical studies	Study 1 Randomised, double-blind, parallel group, placebo controlled 6-month dose confirmation study to evaluate the efficacy and safety of 3 doses of glycopyrronium (GP) metered-dose inhaler (MDI) and open label Spiriva Respimat compared to placebo MDI in symptomatic adolescents from 12 years to less than 18 years (and adults) with asthma receiving low to high-dose inhaled corticosteroids (ICS)/long-acting beta agonists (LABA). (PT001102)

	<p>Study 2</p> <p>Randomised, double blind, double dummy, active controlled, parallel group study to assess the effects of budesonide, glycopyrronium and formoterol fumarate inhalation suspension [BGF metered dose inhaler (MDI)] relative to budesonide and formoterol fumarate inhalation suspension (BFF) and symbicort on lung function, moderate to severe exacerbation, symptoms and Quality of Life (QoL) over a 24-52 week variable length period in adolescents from 12 years to less than 18 years (and adults) with asthma and the steady state pharmacokinetics in a substudy. [PT010102 (D5982C00007) - KALOS]</p> <p>Study 3</p> <p>Randomised, double-blind, double dummy, active controlled, parallel group, 24-52- week, variable length study to assess the efficacy and safety of BGF MDI compared to BFF MDI and symbicort, as an active control, on lung function, asthma exacerbations, symptoms and Quality of Life (QoL) in adolescents from 12 years to less than 18 years (and adults)with asthma. [PT010103 (D598200008) - LOGOS]</p> <p>Study 4</p> <p>Randomised, double-blind, placebo-controlled, chronic dosing (3 weeks), 6-period crossover study comparing the efficacy and safety of 3 doses of glycopyrronium nhalation suspension (GP MDI) with placebo MDI in children from 4 years to less than 12 years of age with asthma</p> <p>Study 5</p> <p>Randomised, double-blind, parallel group, 24-52 week variable length study with an open label arm to assess the efficacy and safety of BGF MDI compared to BFF MDI on lung function and on moderate/severe asthma exacerbations in subjects from 4 years to less than 12 years of age with asthma</p> <p>Study 6</p> <p>Open-label, single-period, single-dose study to assess the pharmacokinetics (PK) of BGF MDI in children from 4 years to less than 12 years of age with asthma</p>
Extrapolation, modelling and simulation studies	Not applicable
Other studies	Not applicable
Other measures	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 June 2027
Deferral for one or more measures contained in the paediatric investigation plan:	Yes

Annex II

Information about the authorised medicinal product

Information provided by the applicant:

Condition(s) and authorised indication(s)

1. Treatment of chronic obstructive pulmonary disease (COPD)

Authorised indication(s):

- Triexo Aerosphere is indicated as a maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting beta2-agonist or combination of a long-acting beta2-agonist and a long-acting muscarinic antagonist (for effects on symptoms control and prevention of exacerbations see section 5.1).
 - Invented name(s): Triexo Aerosphere
 - Authorised pharmaceutical form(s): Pressurised inhalation, suspension
 - Authorised route(s) of administration: Inhalation use
 - Authorised via centralised procedure