



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

EMA/709307/2022

## European Medicines Agency decision P/0397/2022

of 9 September 2022

on the acceptance of a modification of an agreed paediatric investigation plan for rilpivirine (Rekambys), (EMA-000317-PIP02-18-M01) 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.**



# European Medicines Agency decision

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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<sup>1</sup>,

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 Agency<sup>2</sup>,

Having regard to the European Medicines Agency's decision P/0039/2019 issued on 29 January 2019,

Having regard to the application submitted by Janssen-Cilag International N.V. on 25 April 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 22 July 2022, 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 and to the deferral.
- (2) It is therefore appropriate to adopt a decision on the acceptance of changes to the agreed paediatric investigation plan, including changes to the deferral.

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<sup>1</sup> OJ L 378, 27.12.2006, p.1, as amended.

<sup>2</sup> OJ L 136, 30.4.2004, p. 1, as amended.

Has adopted this decision:

**Article 1**

Changes to the agreed paediatric investigation plan for rilpivirine (Rekambys), prolonged release suspension for injection, intramuscular use, including changes to the deferral, 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 covers all conditions, indications, pharmaceutical forms, routes of administration, measures, timelines, waivers and deferrals, as agreed in the decision P/144/2009 issued on 17 July 2009, including subsequent modifications thereof.

**Article 3**

This decision is addressed to Janssen-Cilag International NV, Turnhoutseweg 30, 2340 – Beerse, Belgium.



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

EMA/PDCO/250632/2022  
Amsterdam, 22 July 2022

## Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan EMA-000317-PIP02-18-M01

### Scope of the application

**Active substance(s):**

Rilpivirine

**Invented name:**

Rekambys

**Condition(s):**

Treatment of human immunodeficiency virus (HIV-1) infection

**Authorised indication(s):**

See Annex II

**Pharmaceutical form(s):**

Prolonged release suspension for injection

**Route(s) of administration:**

Intramuscular use

**Name/corporate name of the PIP applicant:**

Janssen-Cilag International N.V.

**Information about the authorised medicinal product:**

See Annex II



## **Basis for opinion**

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, Janssen-Cilag International N.V. submitted to the European Medicines Agency on 25 April 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/0039/2019 issued on 29 January 2019.

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

The procedure started on 23 May 2022.

## **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 and to the deferral 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 human immunodeficiency virus (HIV-1) infection

The waiver applies to:

- the paediatric population from birth to less than 2 years of age;
- prolonged release suspension for injection, intramuscular 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 human immunodeficiency virus (HIV-1) infection

### 2.1.1. Indication(s) targeted by the PIP

Treatment of human immunodeficiency virus (HIV-1) infection, in combination with long-acting cabotegravir

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

From 2 years to less than 18 years of age

### 2.1.3. Pharmaceutical form(s)

Prolonged release suspension for injection

### 2.1.4. Measures

Area	Description
Quality-related studies	Not applicable
Non-clinical studies	Not applicable
Clinical studies	<b>Study 1</b> Multi-centre, open-label, non-comparative trial to evaluate the pharmacokinetics, safety, tolerability and acceptability of oral and long-acting (LA) formulations of rilpivirine and cabotegravir in virologically suppressed adolescents from 12 years to less than 18 years of age with HIV-1 infection.

	<p><i>This study is the same as study 3 of the cabotegravir PIP EMEA-001418-PIP01-13-M01 and subsequent modifications thereof.</i></p> <p><b>Study 2</b></p> <p>Multi-centre open-label, non-comparative study to evaluate pharmacokinetics (PK), safety and tolerability of cabotegravir and rilpivirine [oral and long acting (LA) formulations] in children from 2 years to less than 12 years of age with HIV-1 infection.</p> <p><i>This study is the same as study 6 of the cabotegravir PIP EMEA-001418-PIP01-13-M04 and subsequent modifications thereof.</i></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:	Yes
Date of completion of the paediatric investigation plan:	By September 2025
Deferral for one or more measures contained in the paediatric investigation plan:	Yes



## **Annex II**

### **Information about the authorised medicinal product**

## **Condition(s) and authorised indication(s):**

1. Treatment of human immunodeficiency virus (HIV-1) infection

Authorised indication(s):

- Edurant, in combination with other antiretroviral medicinal products, is indicated for the treatment of human immunodeficiency virus type 1 (HIV-1) infection in antiretroviral treatment-naïve patients 12 years of age and older with a viral load  $\leq 100,000$  HIV-1 RNA copies/ml. Genotypic resistance testing should guide the use of Edurant.
- Rekambys is indicated, in combination with cabotegravir injection, for the treatment of human immunodeficiency virus type 1 (HIV-1) infection in adults who are virologically suppressed (HIV-1 RNA  $< 50$  copies/mL) on a stable antiretroviral regimen without present or past evidence of viral resistance to, and no prior virological failure with, agents of the NNRTI and INI class.

## **Authorised pharmaceutical form(s):**

Film-coated tablet

Prolonged-release suspension for injection

## **Authorised route(s) of administration:**

Oral use

Intramuscular use