EMA/385694/2016

European Medicines Agency decision

P/0171/2016

of 17 June 2016

on the acceptance of a modification of an agreed paediatric investigation plan for atrasentan (hydrochloride) (EMEA-001666-PIP01-14-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.

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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[1],

Having regard to Regulation (EC) No 726/2004 of the European Parliament and of the Council of 31 March 2004 laying down Community procedures for the authorisation and supervision of medicinal products for human and veterinary use and establishing a European Medicines Agency[2],

Having regard to the European Medicines Agency's decision P/0175/2015 issued on 7 August 2015,

Having regard to the application submitted by AbbVie, Ltd on 8 February 2016 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 29 April 2016, 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.
[2] OJ L 136, 30.4.2004, p. 1.

Has adopted this decision:

Article 1

Changes to the agreed paediatric investigation plan for atrasentan (hydrochloride), age-appropriate oral liquid formulation, tablet, oral use, gastric 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 AbbVie, Ltd, Abbvie House, Vanwall Road, SL6 4UB - Maidenhead, United Kingdom.

Done at London, 17 June 2016

For the European Medicines Agency
Zaïde Frias
Head of Division
Human Medicines Research and Development Support
(Signature on file)

EMA/PDCO/130931/2016 Corr
London, 29 April 2016

Opinion of the Paediatric Committee on the acceptance of a modification of an agreed Paediatric Investigation Plan

EMEA-001666-PIP01-14-M01

Scope of the application

Active substance(s):

Atrasentan (hydrochloride)

Condition(s):

Treatment of nephropathy

Pharmaceutical form(s):

Age-appropriate oral liquid formulation

Tablet

Route(s) of administration:

Oral use

Gastric use

Name/corporate name of the PIP applicant:

AbbVie, Ltd

Basis for opinion

Pursuant to Article 22 of Regulation (EC) No 1901/2006 as amended, AbbVie, Ltd submitted to the European Medicines Agency on 8 February 2016 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/0175/2015 issued on 7 August 2015.

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

The procedure started on 1 March 2016.

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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 in the scope set out in the Annex I of this opinion.

   The Norwegian Paediatric Committee member 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 annex 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 nephropathy

The waiver applies to:

- the paediatric population from birth to less than 6 months;
- tablet, age-appropriate oral liquid formulation, oral use, gastric use;
- on the grounds that the specific medicinal product does not represent a significant therapeutic benefit as clinical studies(s) are not feasible.

2. Paediatric investigation plan

2.1. Condition

Treatment of nephropathy

2.1.1. Indication(s) targeted by the PIP

Treatment of multidrug-resistant nephrotic syndrome in paediatric patients

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

From 6 months to less than 18 years of age

2.1.3. Pharmaceutical form(s)

Tablet, age-appropriate oral liquid pharmaceutical formulation

2.1.4. Measures

Area	Number of measures	Description
Quality-related studies	1	**Study 1** Development of an age-appropriate oral liquid formulation.
Non-clinical studies	3	**Study 2** Dose range finding study in rats. **Study 3** Postembryonic and postnatal development study in rats. **Study 4** Definitive juvenile toxicity study in Sprague-Dawley rats from PND 7 to PND 90 of age.

		Study 10 Dose range-finding juvenile toxicity study in juvenile rats. **Study 11** Dose range-finding juvenile toxicity study in juvenile rats.
Clinical studies	4	**Study 5** Open label, single dose escalation study to evaluate safety, tolerability and pharmacokinetics of atrasentan in patients with multidrug-resistant nephrotic syndrome aged from 6 months to onset of puberty of age. (Part 1). **Study 6** Open label multiple dose study to evaluate pharmacokinetics/pharmacodynamics, safety, and tolerability, acceptability/palatability, of atrasentan in patients with multidrug-resistant nephrotic syndrome aged from 6 months to onset of puberty. (Part 2). **Study 7** Double blind, randomised, multicentre, placebo-controlled study to evaluate safety, efficacy, tolerability, and pharmacodynamics of atrasentan in patients with multidrug-resistant nephrotic syndrome from 6 months to onset of puberty. (Part 3). **Study 8** Long-term open label extension study to evaluate safety, efficacy, and tolerability of atrasentan in patients with multidrug-resistant nephrotic syndrome aged from 6 months to onset of puberty. (Part 4).
Extrapolation, modelling and simulation studies	1	**Study 9** Atrasentan PBPK model to inform the starting dose for study 1.
Other studies	0	Not applicable.
Other measures	0	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 December 2029
Deferral for one or more measures contained in the paediatric investigation plan:	Yes