

10 November 2016 EMA/726248/2016 Committee for Medicinal Products for Human Use (CHMP)

Assessment report for paediatric studies submitted according to Article 46 of the Regulation (EC) No 1901/2006

## **Synagis**

palivizumab

Procedure no: EMEA/H/C/000257/P46/046

### Note

Assessment report as adopted by the CHMP with all information of a commercially confidential nature deleted.



## Table of contents

1. Introduction	3
2. Scientific discussion	3
2.1. Information on the development program	3
2.2. Information on the pharmaceutical formulation used in the study	
2.3. Clinical aspects	3
2.3.1. Introduction	3
2.3.2. Clinical study	3
3. Rapporteur's overall conclusion and recommendation	4
Fulfilled:	

## 1. Introduction

On 10 August 2016, the MAH submitted a completed paediatric study for Synagis (palivizumab), in accordance with Article 46 of Regulation (EC) No1901/2006, as amended.

A short critical expert overview has also been provided.

## 2. Scientific discussion

### 2.1. Information on the development program

The MAH stated that P13-203 (a Post-Marketing Surveilliance study of Synagis in Korean Pediatric Patients under the New Drug Re-Examination) is a standalone study.

## 2.2. Information on the pharmaceutical formulation used in the study

The originally approved medicinal product in the EU was the lyophilized formulation of palivizumab (50 mg and 100 mg). The liquid solution for injection formulation of palivizumab has since been approved in the EU in August of 2014. The lyophilized formulation of palivizumab is currently the only formulation approved in the Republic of Korea.

#### 2.3. Clinical aspects

#### 2.3.1. Introduction

The MAH submitted a final report for:

 P13-203 (a Post-Marketing Surveilliance study of Synagis in Korean Pediatric Patients under the New Drug Re-Examination)

### 2.3.2. Clinical study

In accordance with the EMA regulation, the MAH (Abbvie) has submitted the postmarketing surveillance study P13-203, in which adverse events related to the use of palivizumab (Syangis) in routine medical practice in the Republic of Korea from March 2011 through March 2015 was evaluated.

In Korea, the approved indication for palivizumab is for the prevention of serious lower respiratory tract disease requiring hospitalization caused by respiratory syncytial virus in children at high risk for Respiratory Syncytial Virus (RSV) disease:

- -Children born at 35 weeks of gestation or less and less than 6 months of age at the onset of the RSV season.
- -Children less than 2 years of age and requiring treatment for bronchopulmonary dysplasia (BPD) within the last 6 months.
- -Children less than 2 years of age and with hemodynamically significant congenital heart disease (CHD).

#### Methods

Observational prospective, multi-center study from 29 clinical sites in Korea.

The primary objective was to evaluate SAEs and AEs in relation to the use of palivizumab in the setting of routine medical practice in the Republic of Korea.

The study was done from March 30, 2011 through March 29, 2015.

#### Results

#### Subject and Treatment Description

618 subjects were enrolled from March 2011 to March 2015. One participant was a duplicate enrollment and the duplicate data was excluded from the analysis. Mean (SD) age at enrollment was 3.38 (3.39) months. Mean (SD) gestational age was 31.46 (4.91) weeks, and mean (SD) birth weight was 1.68 (0.89) kg.

Of the 617 infants, 73% were premature births (<35 weeks gestation) and 55% were male.

The most common indication for palivizumab administration was preterm newborn infants or infants born at 35 weeks of gestation or less, and less than 6 months of age at the onset of RSV season (347/617, 56%). The other indications for palivizumab administration were infants or children with BPD (21%), and with CHD (32%).

380 subjects received 4 (8%) or 5 (53%) doses of palivizumab and 237 (38%) subjects received less than 4 doses of Synagis.

#### Safety

In a total of126 subjects, 213 adverse events and 3 AEs related to palivizumab (ADRs) were reported.

#### ΑE

Infections and infestations were reported as 114 AEs in 82 [13%] of the subjects.

The main AEs were upper respiratory infection (32/617, 5%), pyrexia (16/617, 3%), bronchiolitis (13/617, 2%), respiratory syncytial virus infection (11/617, 2%), and diarrhea (8/617, 1%).

#### SAE

In 46 subjects (46/617, 7%) SAEs were observed.

The most common SAEs were infections and infestations (38 SAEs in 31 subjects [5%]). In 11 cases these were RSV infections.

In total, 99 cases of unexpected AEs (i.e., AEs not described in the Korean label) from 67 subjects were reported. According to the study investigators, none of these AEs were related to palivizumab. Death occurred in five subjects, none of the deaths was considered related to the drug.

# 3. Rapporteur's overall conclusion and recommendation

In the submitted study P13-203, the safety profile of pavalizumab was in agreement with the known AE profile.

Overall, the incidence and types of AEs reflected the serious underlying conditions of the pediatric subjects receiving palivizumab. In this study, no new safety signals were observed.

The results from study P13-203 submitted in accordance with article 46 of the Pediatric Regulation are in agreement with the currently approved SmPC and no further regulatory action is deemed necessary.

## **Visit Fulfilled:**

No regulatory action required.