EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

24 September 2010
EMA/PDCO/534094/2010 – Corr. 1
Human Medicines Development and Evaluation

Meeting highlights from the Paediatric Committee (PDCO)

08-10 September 2010

Opinions on paediatric investigation plans

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

- Riociguat, from Bayer Schering Pharma AG, in the therapeutic area of cardiovascular diseases;
- Prucalopride succinate, from Movetis NV, in the therapeutic area of gastroenterology-hepatology;
- Everolimus, from Novartis Europharm Limited, in the therapeutic area of immunology-rheumatology-transplantation;
- Eculizumab, from Alexion Europe SAS, in the therapeutic area of immunology-rheumatology-transplantation;
- Pagibaximab, from Biosynexus, Incorporated, in the therapeutic area of neonatology - paediatric intensive care;
- L-asparaginase encapsulated in erythrocytes, from ERYtech Pharma, in the therapeutic area of oncology;
- 12 Grass Pollen Extract and Cultivated Rye Pollen Extract (oromucosal solution), from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- 12 Grass Pollen Extract and Cultivated Rye Pollen Extract (suspension for injection), from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Dermatophagoides farinae and Dermatophagoides pteronyssinus extracts (oromucosal solution), from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Dermatophagoides farinae and Dermatophagoides pteronyssinus extracts (suspension for injection), from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Birch, hazel and alder pollen extracts, from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;

7 Westferry Circus • Canary Wharf • London E14 4HB • United Kingdom
Telephone +44 (0)20 7418 8400 **Facsimile** +44 (0)2 7418 8613
E-mail info@ema.europa.eu **Website** www.ema.europa.eu

- Birch pollen extract, from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Birch / alder / hazel pollen extract, from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Grass pollen extract, cultivated rye pollen extract and birch pollen extract, from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Grass pollen extract, cultivated rye pollen extract and birch / alder / hazel pollen extract, from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology;
- Grass pollen extract, cultivated rye pollen extract and mugwort pollen extract, from Allergy Therapeutics (UK) Ltd, in the therapeutic area of pneumology – allergology.

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:

- Ingenol mebutate, from LEO Pharma A/S, in the therapeutic area of dermatology / oncology;
- Tropicamide, Phenylephrine hydrochloride, Lidocaine hydrochloride, from Laboratoires THEA, in the therapeutic area of ophthalmology;
- 1H-Indole-6-carboxylic acid, 2,3-dihydro-3-[[[4-[methyl[(4-methyl-1-piperazinyl)acetyl] amino]phenyl]amino]phenylmethylene]-2-oxo-, methyl ester, (3Z)-, monoethanesulfonate, from Boehringer Ingelheim International GmbH, in the therapeutic area of pneumology – allergology;
- Phentermine/topiramate, from Vivus BV, in the therapeutic area of endocrinology-gynaecology-fertility-metabolism;
- Dronabinol, from Bionorica AG, in the therapeutic area of pain;
- Fampridine, from Acorda Therapeutics Inc, in the therapeutic area of neurology;
- Derivative of 4,4'-(1-methylene)-bisbenzonitrile, from Novartis Europharm Limited, in the therapeutic area of endocrinology-gynaecology-fertility-metabolism.

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.

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.

Withdrawals

The PDCO noted that 3 applications were withdrawn during the late stages of the evaluation (30 days or less before opinion).

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. Two experts were invited to the September meeting. With a clinical expert in paediatric HIV, the PDCO discussed the potential need, utility and safety of a new integrase inhibitor and a novel pharmacoenhancer for the treatment of HIV infection; and with a clinical expert in nuclear medicine, the PDCO discussed the potential need, utility and safety of a new radionuclide generator for diagnostic use in paediatric cardiology.

Cooperation with FDA

At the September meeting, the PDCO welcomed two representative(s) of the US Food and Drug Administration (FDA), who attended within the framework of the 'Principles of interaction between the Agency and FDA paediatric therapeutics'. According to the terms of these principles, the Agency's staff may attend the FDA's Pediatric Implementation Team meetings and FDA staff may attend the Agency's Paediatric Committee meetings, to enable regulators from either agency to observe operational activities, and to optimise mechanisms and timing of information exchanges.

The objective of the cooperation between the Agency and FDA in the field of paediatric medicines is to facilitate the framework for global paediatric development plans, compatible for both agencies, with the aim of avoiding exposing children to unnecessary trials.

Election Chair and Co-Chair of the PDCO

On 8 September, the Committee elected Dr Daniel Brasseur as its Chair for a second term of three years, and Dr Dirk Mentzer as Vice-Chair.

Other issues

The PDCO thanked Dr Hugo Devlieger for his intense work and active participation over his 3-year mandate as Belgium member as he resigned from the Committee. The PDCO also thanked Prof Gerard Pons, who completed his term as Vice-Chair, for his valuable contribution.

The next meeting of the PDCO will be held on 06-08 October 2010.

– 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/htms/human/paediatrics/decisions.htm
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 'Medicines for children' section of the Agency's website.
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

Enquiries only to: paediatrics@ema.europa.eu

Annex of the September 2010 PDCO meeting report

	2008 (January to December)	2009 (January to December)	2010 (January to September)	Cumulative total (2007 to 2010)
Total number of validated PIP/waiver applications	271	273	282	912[1]
Applications submitted for a product not yet authorised *(Article 7[2])*	186	191	244	660 *(72%)*
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])*	75	72	37	229 *(25%)*
Applications submitted for an off-patent product developed specifically for children with an age-appropriate formulation *(Article 30[2])*	10	10	2	23 *(3%)*
PIPs and full waiver indications covered by these applications	395	395	329	1290

Number of Paediatric Committee (PDCO) opinions	2008	2009	2010	Cumulative total
Positive on full waiver	48	67	44	168
Positive on PIP, including potential deferral	81	122	80	285
Negative opinions adopted	4	13	5	22
Positive opinions adopted on modification of a PIP	8	51	81	140
Negative opinions adopted on modification of a PIP	0	0	4	4
Positive opinions on compliance with a PIP	5	8	7	20
Negative opinions on compliance check with a PIP	0	1	0	1

[1] Of which 199 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	2008 (%)	2009 (%)	2010 (%)
Neurology	6	4	4
Uro-nephrology	3	5	1
Gastroenterology-hepatology	3	2	1
Pneumology-allergology	6	6	45
Infectious diseases	8	9	4
Cardiovascular diseases	14	9	8
Diagnostics	1	1	1
Endocrinology-gynaecology-fertility-metabolism	15	16	5
Neonatology-paediatric intensive care	1	2	0
Immunology-rheumatology-transplantation	6	6	4
Psychiatry	3	3	2
Pain	3	6	1
Haematology-haemostaseology	5	6	3
Otorhinolaryngology	1	1	3
Oncology	12	11	8
Dermatology	3	6	3
Vaccines	6	4	2
Ophthalmology	2	2	4
Anaesthesiology	1	1	1
Nutrition	1	0	0