



Meeting highlights from the Paediatric Committee, 1-3 April 2009

Opinions on paediatric investigation plans

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

- **Bilastine**, from Faes Farma S.A, in the therapeutic area of Pneumology-allergology;
- **Allerslit forte Grass Pollen Extract** from Allergopharma J. Ganzer KG, in the therapeutic area of Pneumology-Allergology;
- **Raltegravir**, from Merck Sharp & Dohme (Europe), Inc, in the therapeutic area of Infectious diseases;
- **Moxifloxacin hydrochloride**, from Bayer Schering Pharma AG, in the therapeutic area of Infectious diseases;
- **Rolofylline**, from Merck Sharp & Dohme (Europe), Inc, in the therapeutic area of Cardiovascular diseases;
- **Regadenoson**, from CV Therapeutics Europe Ltd, in the therapeutic area of Cardiovascular diseases;
- **Tapentadol hydrochloride** from Grünenthal GmbH, in the therapeutic area of Pain;
- **Alogliptin benzoate** from Takeda Global Research and Development Centre (Europe) Ltd, in the therapeutic area of Endocrinology-Gynaecology-Fertility-Metabolism;

The PDCO adopted an opinion on the **refusal** of a PIP for drospirenone / ethinylestradiol (as betadex clathrate) / L-5-methyltetrahydrofolic acid, calcium salt, from Bayer Schering Pharma AG, in the therapeutic area of Endocrinology/gynaecology/fertility/metabolism. The PDCO subsequently granted a product-specific waiver for this medicine for all subsets of the paediatric population in the specified conditions.

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 (EMA), 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 a positive opinion for a product-specific waiver, recommending that the obligation to submit data obtained through clinical studies with children be waived in all subsets of the paediatric population, for:

- **Simvastatin / fenofibrate**, from Fournier Laboratories Ireland Ltd, in the therapeutic area of Cardiovascular diseases;

The PDCO adopted an opinion on the **refusal** of a request for a waiver for:

- **Rubidium-82**, from Advanced Accelerator Applications, in the therapeutic areas of Diagnostics and Cardiovascular Diseases;

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.

Class waivers

The PDCO adopted an opinion to revoke a class waiver for medicinal products used in the treatment of menopausal and other perimenopausal disorders. The PDCO subsequently adopted a class waiver for medicinal products used in the 'treatment of climacteric symptoms associated with decreased estrogen levels, as occurring in menopause'. The Committee recommended that the requirement to submit clinical-trial data in all subsets of the paediatric population be waived for any medicine developed for this condition. This is because the condition does not occur in the paediatric populations.

The opinion will be transformed into an EMEA decision.

Opinions on modifications to an agreed PIP

The PDCO adopted three positive opinions on requests for modification of an agreed PIP.

The PDCO adopts 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.

Opinion on compliance check

The PDCO adopted two positive opinions on compliance check for:

- Anastrozole from AstraZeneca AB, in the therapeutic area of Endocrinology-Gynaecology-Fertility-Metabolism.
- Ustekinumab from Janssen-Cilag International NV, in the therapeutic area of dermatology.

A compliance check is performed to verify that all the measures agreed in a PIP and reflected in the EMEA decision have been conducted in accordance with the decision, including the agreed timelines. Compliance is one of several prerequisites for obtaining the rewards and incentives provided for in Articles 36 to 38 of the Paediatric Regulation.

Before the submission of a request for a compliance check, applicants are encouraged to consult the [EMEA Procedural advice](#) for validation of a new marketing authorisation application or extension/variation application and compliance check with an agreed PIP.

Withdrawals

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

PDCO interactions

The European Commission representatives for the Directorate General on Research and Technical Development attended the meeting, in order to exchange views with the PDCO in particular on the funding of studies into off-patent medicinal products.

The Chair of the CHMP's Efficacy Working Party (EWP) joined the meeting of the PDCO via teleconference to discuss interactions and to enhance the scientific collaboration between the two groups.

Other issues

The PDCO thanked Angeliki Roboti for her work as she has resigned from the Committee.

The next meeting of the PDCO will be held on 28-30 April 2009.

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Notes:

1. PDCO opinions on PIPs and waivers are transformed into EMEA decisions within the timeframe laid down by the [Paediatric Regulation](#) (Regulation (EC) No 1901/2006, as amended). The decisions can be found on the EMEA website at: <http://www.emea.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 EEA, have to provide either the results of studies in children conducted in accordance with an approved PIP, or an EMEA 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 EMEA website.
4. This meeting report, together with other information on the work of the EMEA, can be found on the EMEA website: <http://www.emea.europa.eu>

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Annex of the 1-3 April 2009 PDCO meeting report

	2007 (August to December)	2008 (January to December)	2009 (January to current month)	Cumulative total
Total number of validated PIP/waiver applications	85	271	73	429¹
Applications submitted for a product not yet authorised (<i>Article 7²</i>)	39	186	50	275 (64%)
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 (<i>Article 8²</i>)	45	75	20	140 (33%)
Applications submitted for an off-patent product developed specifically for children with an age-appropriate formulation (<i>Article 30²</i>)	1	10	3	14 (3%)
PIPs and full waiver indications covered by these applications	202	395	104	701

Number of Paediatric Committee (PDCO) opinions	2007	2008	2009	Cumulative total
Positive on full waiver	10	48	16	74
Positive on PIP, including potential deferral	2	81	51	134
Negative opinions adopted	0	4	7	11
Positive opinions adopted on modification of a PIP	0	8	7	15
Positive opinions on compliance with a PIP	0	5	2	7

¹ Of which 104 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	2007 (%)	2008 (%)	2009 (%)
Neurology	12	6	1
Uro-nephrology	-	3	4
Gastroenterology-hepatology	9	3	3
Pneumology-allergology	8	6	3
Infectious diseases	12	8	9
Cardiovascular diseases	12	14	7
Diagnostics	-	1	1
Endocrinology-gynaecology-fertility-metabolism	19	15	30
Neonatology-paediatric intensive care	-	1	1
Immunology-rheumatology-transplantation	5	6	7
Psychiatry	5	3	1
Pain	1	3	4
Haematology-haemostaseology	1	5	7
Otorhinolaryngology	-	1	-
Oncology	11	12	10
Dermatology	1	3	5
Vaccines	2	6	4
Ophthalmology	1	2	3
Anaesthesiology	-	1	-
Nutrition	1	1	-