

22 October 2015 EMA/CAT/816010/2015 Procedure Management and Committees Support Division

### Committee for Advanced Therapies (CAT)

Minutes of the meeting on 15-16 October 2015

Chair: Paula Salmikangas - Vice-chair: Martina Schüßler-Lenz

15 October 2015, 09:00 – 18:30, room 02-F 16 October 2015, 09:00 – 15:00, room 02-F

#### **Disclaimers**

Some of the information contained in this set of minutes is considered commercially confidential or sensitive and therefore not disclosed. With regard to intended therapeutic indications or procedure scopes listed against products, it must be noted that these may not reflect the full wording proposed by applicants and may also vary during the course of the review. Additional details on some of these procedures will be published in the CAT meeting reports once the procedures are finalised and start of referrals will also be available.

Of note, this set of minutes is a working document primarily designed for CAT members and the work the Committee undertakes.

Further information with relevant explanatory notes can be found at the end of this document.

#### Note on access to documents

Some documents mentioned in the minutes cannot be released at present following a request for access to documents within the framework of Regulation (EC) No 1049/2001 as they are subject to on-going procedures for which a final decision has not yet been adopted. They will become public when adopted or considered public according to the principles stated in the Agency policy on access to documents (EMA/127362/2006).



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#### 1. Introduction

# 1.1. Welcome and declarations of interest of members, alternates and experts

In accordance with the Agency's policy on handling of declarations of interests of scientific committees' members and experts, based on the declarations of interest submitted by the Committee members, alternates and experts and based on the topics in the agenda of the current meeting, the Committee Secretariat announced that no restriction in the involvement of meeting participants in upcoming discussions was identified.

Participants in this meeting were asked to declare any changes, omissions or errors to their declared interests and/or additional restrictions concerning the matters for discussion. No new or additional interests or restrictions were declared.

Discussions, deliberations and voting took place in full respect of the restricted involvement of Committee members and experts in line with the relevant provisions of the Rules of Procedure and as included in the list of participants. All decisions taken at this meeting were made in the presence of a quorum of members (i.e. 22 or more members were present in the room). All decisions, recommendations and advice were agreed by consensus, unless otherwise specified.

#### 1.2. Adoption of agenda

The CAT agenda of the October 2015 was adopted.

#### 1.3. Adoption of the minutes

CAT minutes of the 17-18 September 2015 meeting were adopted.

#### 2. Evaluation of ATMPs

#### 2.1. Opinions

#### 2.1.1. Talimogene laherparepvec; EMA/H/C/0002771

Treatment of adults with melanoma that is regionally or distantly metastatic

Scope: Opinion

Action: for adoption

Documents:

Scientific Advice Group (SAG) revised report

Draft CAT AR Draft Opinion

**Draft Product Information** 

Note:

Inter-committee SAG-O follow-up meeting: 09.10.15 Classification as a GTMP adopted in July 2012 SAs provided by SAWP in 2008 and 2013

The Rapporteurs presented the assessment of the responses to the second list of outstanding issues. The vice-chair from the SAG Oncology presented the revised SAG report. CAT discussed the CAT assessment report, the post-authorisation measures and the Product Information (especially section 4.1 (inclusion of the disease stages to increase the clarity of the indication), section 4.4 and section 5.5 of the SmPC).

The Committee adopted a positive draft opinion by majority recommending the granting of a marketing authorisation (22 positive out of 23 votes), together with the CAT assessment report.

The divergent position was appended to the opinion.

The Norwegian Member was in agreement with the CAT recommendation.

The final documents (assessment report, draft CAT opinion, product information) will be provided to CAT before transmission to CHMP.

#### 2.2. Oral explanations

None

#### 2.3. D180 List of outstanding issues (LoOIs)

None

### 2.4. D120 Lists of questions (LoQs)

None

#### 2.5. Day 80 assessment reports

None

# 2.6. Re-examination procedure (new applications) under Article 9(2) of Regulation No. 726/2004

#### 2.6.1. Heparesc - Allogeneic human heterologous liver cells; Orphan; EMA/H/C/003750

Cytonet GmbH & Co. KG; Treatment of urea cycle disorders (UCD)Scope: Opinion and report from the ad-hoc expert group's Chairs. Oral Explanation to take place on 15<sup>th</sup> October 2015 at 10:00hrs

Action: for adoption

Documents:

**Draft Assessment Report** 

Draft Opinion

Ad-hoc expert group report

The ad hoc expert group meeting took place on 6 October 2015.

Note:

The CHMP adopted in June 2015 a negative Opinion.

The CAT adopted in April 2015 a negative draft Opinion.

The Re-examination rapporteurs presented their assessment of the three grounds for re-examination. Both Rapporteurs concluded that the data are not sufficient to demonstrate the efficacy of Heparesc. For two issues, there were different views between the Rapporteur and CoRapporteur: the Rapporteur considers that the urogenesis assay was fully validated and indicated that the Committee should reflect on an approval under exceptional circumstances

in view of the rarity of the disease (for which the rapporteur considers that there might be a positive-benefit risk).

The outcome of the discussions at the ad-hoc expert group was presented: the experts addressed the questions posed to them as identified by the CAT/CHMP and concluded that the data are not sufficient for approval, but show a trend towards efficacy. During the oral explanation, the applicant presented their responses to the grounds for refusal.

The CAT adopted a negative opinion by consensus recommending not to grant marketing authorisation for Heparesc because the efficacy has not been demonstrated. This results in a negative benefit risk profile for Heparesc. CAT adopted the CAT draft opinion and CAT assessment report, which are forwarded to the CHMP for information.

#### 2.7. Withdrawal of initial full application

None

#### 2.8. Ongoing initial full application

None

#### 2.9. New applications

#### 2.10. GMP and GCP inspections requests

None

#### 2.11. Type II variations

#### 2.11.1. Glybera – Alipogene tiparvovec; Orphan; EMA/H/C/002145/II/47

UniQure Biopharma B.V.

Rapporteur: Christiane Niederlaender; CHMP Coordinators: Greg Markey

Scope: quality:

Action: for adoption

Document: RSI

The Rapporteur presented the assessment of this quality variation. CAT adopted an RSI and the response timetable.

#### 2.11.2. Glybera – Alipogene tiparvovec; Orphan; EMA/H/C/002145/II/48

UniQure Biopharma B.V.

Rapporteur: Christiane Niederlaender; CHMP Coordinators: Greg Markey

Scope: quality:

Action: for adoption

Document:

RSI

The Rapporteur presented the assessment of this quality variation. CAT adopted an RSI and the response timetable.

#### 2.12. Other post-authorisation activities

## 2.12.1. Holoclar – *Ex vivo* expanded autologous human corneal epithelial cells containing stem cells; *Orphan*; EMA/H/C/002450/R/0001

Chiesi Farmaceutici S.p.A.; treatment of adult patients with moderate to severe limbal stem cell deficiency

Rapporteur: Egbert Flory, CAT Co-Rapporteur: Paolo Gasparini; CHMP Coordinator: Jan

Müller-Berghaus

Scope: Conditional Renewal. Opinion

Action: for adoption

Documents:

**CAT revised Assessment Report** 

**CAT draft Opinion** 

Note: conditional MA adopted in December 2014

CAT adopted the opinion for the renewal of the conditional marketing authorisation of Holoclar.

## 2.12.2. ChondroCelect – Characterised viable autologous cartilage cells expanded in vivo expressing specific marker proteins; EMA/H/C/00878/MEA 16.4., 18.4

TiGenix N.V.

Rapporteur: Egbert Flory; Co-rapporteur: Tiina Palomäki; CHMP Coordinators: Jan Müller-Berghaus

Scope 16.4: Randomised control trial protocol TIG/ACT/04/2009

Scope 18.4: Non-interventional registry of ChondroCelect, study TGX001-2011 & randomised controlled study in small lesions using microfracture as comparator

Oral Explanation to take place on 15th October 2015 at 16:30hrs

Action: for discussion

The issue was presented by the Rapporteur: the MAH cannot conduct the randomised controlled trial (RCT), which is included in the RMP. They propose to enlarge the ongoing non-interventional study to include patients with large lesions.

The MAH explained their position during an oral explanation.

CAT discussed if data of the non-interventional study could replace the RCT. In accordance with the rapporteurs assessment CAT agreed that the originally planned RCT could potentially be replaced by other studies, but questioned a replacement by the (enlarged) non-interventional study alone, taking into account the limitations of the data collected so far. CAT considered that a prospectively planned uncontrolled trial in patient with large lesions would be more appropriate to collect data in this patient group. CAT questioned also the feasibility analysis conducted by the MAH with regard to the recruitment rate, but acknowledged that it will take time before the final report of this study in large lesions is available. No amendments to the rapporteur's assessment report were proposed. The MAH will now submit their written response to the open issues as raised in the assessment report by 3<sup>rd</sup> November for written assessment by the Rapporteur. In view of the position taken by the CAT and the written response, the Rapporteur will finalise the assessment of the Post authorisation measures 16.4 and 18.4 and take position on the approach presented by the company.

#### 3. Certification of ATMPs

#### 3.1. New applications

None

#### 3.2. Day 60 evaluation reports

None

#### 3.3. Opinions

None

#### 4. Scientific Recommendation on Classification of ATMPs

#### 4.1. New requests – appointment of CAT Co-ordinators

#### 4.1.1. Allogeneic pro-inflammatory monocyte-derived dendritic cells

Treatment of metastatic renal cell carcinoma (mRCC)

Scope: Timetable and appointment of CAT Co-ordinator

Action: for adoption

Document:

Request received 30<sup>th</sup> September 2015

Nominations were received. The CAT member was appointed as CAT coordinator for this procedure.

#### 4.1.2. Autologous peripheral blood-derived total nucleated cells

Treatment of critical limb ischemia

Scope: Timetable and appointment of CAT Co-ordinator

Action: for adoption

Document:

Request received 1st October 2015

Nominations were received. The CAT member was appointed as CAT coordinator for this procedure.

#### 4.1.3. Autologous bone marrow derived non-haematopoietic stem cells

Treatments of: rheumatoid arthritis; patients after ischemic stroke; patients after myocardial infarction; type I diabetes; type II diabetes.

Scope: Timetable and appointment of CAT Co-ordinator

Action: for adoption

Document:

Request received 01st October 2015

Nominations were received. The CAT member was appointed as CAT coordinator for this procedure

#### 4.1.4. Autologous adipose derived regenerative cells encapsulated in hyaluronic acid

Treatment of articular cartilage and bone defects

Scope: Timetable and appointment of CAT Co-ordinator

Action: for adoption

Document:

Request received 01st October 2015

Nominations were received. The CAT member was appointed as CAT coordinator for this procedure.

#### 4.2. Day 30 Co-ordinators' first reports

#### 4.2.1. Allogeneic mesenchymal precursor cells

Treatment of chronic lumbar back pain

Action: for adoption

Document:

Classification report

CAT discussed the ATMP classification report. CAT adopted by consensus the ATMP classification report. CAT secretariat to send the draft scientific recommendation to the Commission, for comments by 30 October 2015.

The CAT recommendation will be considered final if no comments are received from the Commission. The final report will be sent thereafter to the applicant.

#### 4.2.2. *In vitro* expanded autologous articular chondrocytes

Treatment of articular cartilage defect

Action: for adoption

Document:

Classification report

CAT discussed the ATMP classification report. CAT adopted by consensus the ATMP classification report. CAT secretariat to send the draft scientific recommendation to the Commission, for comments by 30 October 2015.

The CAT recommendation will be considered final if no comments are received from the Commission. The final report will be sent thereafter to the applicant.

#### 4.2.3. Autologous cells of stromal vascular fraction (SVF) of adipose tissue

Treatment of 1. cosmetic lipofiling; 2. treatment for non-healing wounds and scared tissue;

3. treatment of osteoarthritis in the knee

Action: for adoption

Document:

Classification report

CAT discussed the ATMP classification report and decided to request some additional information from the applicant prior to concluding on this classification request.

#### 4.2.4. Decellularised trachea seeded with autologous expanded MSCs

Treatment of reconstruction of trachea subsequent to damage or stenosis due to cancer, injury, infection or congenital deformities

Action: for adoption

Document:

Classification report

CAT discussed the ATMP classification report. CAT adopted by consensus the ATMP classification report. CAT secretariat to send the draft scientific recommendation to the Commission, for comments by 30 October 2015.

The CAT recommendation will be considered final if no comments are received from the Commission. The final report will be sent thereafter to the applicant.

## 4.2.5. Autologous mesenchymal stem cells isolated from bone marrow or adipose tissue; allogeneic mesenchymal stem cells from umbilical cord

Treatment of Amyotrophic Lateral Sclerosis

Action: for adoption

Document:

Classification report

CAT discussed the ATMP classification report. CAT adopted by consensus the ATMP classification report. As this classification relates to 3 different products (different starting materials for the manufacturing of the mesenchymal stem cells), it was agreed to make 3 separate classification reports. CAT secretariat to send the draft scientific recommendation to the Commission, for comments by 30 October 2015.

The CAT recommendation will be considered final if no comments are received from the Commission. The final report will be sent thereafter to the applicant.

#### 4.3. Day 60 Co-ordinators' revised reports following List of Questions

#### 4.3.1. hESC-derived Hepatocyte like cells

Treatment of inborn errors of liver metabolism diseases and liver acute failure.

Action: for adoption

Documents:

**Revised ATMP Classification report** 

Response to the LoQs received on 29.09.15.

Further to the receipt of the additional information, the revised CAT coordinator's report was discussed. CAT adopted by consensus the ATMP classification report. CAT secretariat to send the draft scientific recommendation to the Commission, for comments by 30 October 2015. The CAT recommendation will be considered final if no comments are received from the Commission. The final report will be sent thereafter to the applicant.

# 4.3.2. Allogeneic hematopoietic progenitor cells (HPC–CD34+) accompanied by facilitating cells (FC– CD8+/ $\alpha\beta$ TCR-) and $\alpha\beta$ T cells, prepared from mobilized peripheral blood mononuclear cells.

Treatment of prophylaxis of organ rejection in adult patients receiving living donor kidney transplantation

Action: for adoption

Documents:

**Revised Classification report** 

Response to the LoQs received on 01.10.15.

Further to the receipt of the additional information, the revised CAT coordinator's report was discussed. The classification report was updated after the discussion. CAT adopted by consensus the updated revised ATMP classification report. CAT secretariat to send the draft scientific recommendation to the Commission, .

The CAT recommendation will be considered final if no comments are received from the Commission. The final report will be sent thereafter to the applicant.

#### 4.4. Finalisation of procedures

### 4.4.1. Life-attenuated, double-delete Listeria monocytogenes expressing human mesothelin

Treatment of malignant pleural mesothelioma

Action: for information

Document:

ATMP classification report

Note:

The European Commission raised no comments.

See also 5.4.2.

The information was noted.

# 4.4.2. Encapsulated allogeneic cells genetically modified to secrete GM-CSF and irradiated autologous tumour cells

Treatment of advanced solid tumours

Action: for information

Document:

ATMP classification report

Note:

The European Commission raised no comments.

The information was noted

#### 4.5. Follow-ups and guidance

# 4.5.1. Functional apoptosis-based selection process to deplete haematopoietic cell transplants of GvHD effector T-cells

The process is for the reduction of GvHD during stem cell transplants

Action: for discussion

Only a limited discussion took place on the regulatory status of such products as the information provided was too limited for in-depth discussion. A lot will depend on the fate of the cells after the treatment with apoptosis inducing agents. It was proposed to ask the applicant to submit a formal ATMP classification request.

#### 5. Scientific Advice

Disclosure of information related to this section cannot be released at the present time as it is deemed to contain commercially confidential information.

- 5.1. New scientific advices appointment of CAT Rapporteur
- 5.2. CAT Rapporteurs' reports
- 5.3. Lists of issues

None

#### 5.4. Finalisation of Scientific Advice procedures

#### 6. Pre-Authorisation Activities

Disclosure of information related to this section cannot be released at the present time as it is deemed to contain commercially confidential information.

- 6.1. Paediatric investigation plans (PIP)
- 6.2. ITF briefing meetings in the field of ATMPs

None

### 7. Organisational, regulatory and methodological matters

#### 7.1. Mandate and organisation of the CAT

#### 7.1.1. Strategic Review & Learning meetings

Scope: updated documents on organisational aspects

Action: for information

Documents:

Principles for organisation of NCA-hosted meetings Responsibilities for confidentiality in NCA-hosted meetings

CAT noted both documents.

## 7.1.2. Call for Expression of Interest from Civil Societies for the position of Member of the Committee for Advanced Therapies (CAT)

Scope: the European Commission has extended the deadline by two weeks to 18 October 2015.

Action: for information

Commission's website

link: http://ec.europa.eu/health/documents/public\_call/call\_index\_en.htm#fragment2

Note:

- -the term of office of the current members expires on 30 June 2016;
- -the Commission will appoint the new members after consultation with the European Parliament

CAT noted the extension of the deadline for nomination of civil societies as CAT members.

#### 7.2. Coordination with EMA Scientific Committees

#### 7.2.1. Committee for Medicinal Products for Human Use (CHMP)

Summary of Outcomes (SoO) for the September 2015 meeting

**Action**: for information

The information was noted.

# 7.3. Coordination with EMA Working Parties/Working Groups/Drafting Groups

#### 7.3.1. Good Laboratory Practice (GLP) requirements of non-clinical studies for ATMPs

CAT drafting group: U. Riekstina, T. Palomäki, E. Flory, C. Herberts (Netherlands), I. Vieira (Portugal)

Scope: CAT expectations and experience on GLP requirements for ATMPs

Action: for discussion

Document:

Written comments from the Drafting group members

The discussion was postponed due to time constraints. It was agreed to set up a virtual meeting with the CAT drafting group members in advance of the November 2015 CAT meeting to develop a proposal for discussion and agreement at the November CAT meeting. The European Commission representative informed the CAT that agreement has been reached with the competent authorities to develop a Question and Answer (Q&A) on GLP requirements for non-clinical studies of ATMPs. This Q&A will be based on the CAT proposal. It was mentioned that the GLP statement in the Guideline for GTMP (see 7.3.5) will need to be aligned to the CAT GLP proposal.

#### 7.3.2. Pharmacovigilance: GVP Module P.II Biologicals

Action: for discussion

Document:

Written comments by CAT

Note: this module is presented to committees for discussion and comments before a public consultation

There was a discussion if ATMP are in or out of the scope of the GVP module on Biologicals. It was clarified that ATMP are excluded, but that the communication section is currently not included in the specific guideline for Pharmacovigilance (PhVig) for ATMPs: the principles as explained in this GVP Module are also applicable to ATMPs. CAT will have to decide if they want to revise the ATMP PhVig. Guideline to include this chapter or to include a cross-reference to the GVP module.

As a general statement, CAT agreed that caution should be applied when imposing additional administrative requirements to the ATMP MAHs, which are often small and medium-size enterprises (SMEs). CAT noted that whereas in principle biosimilar of ATMPs can be developed (as ATMP are biologicals), it is in practice very unlikely they will emerge.

#### 7.3.3. Adaptive pathway approach (formerly known as adaptive licensing)

CAT resources: Hans Ovelgönne;

Scope: presentation of the procedure and experience with ATMPs under discussion in the

Adaptive Pathway pilot

Action: for information

Further information can be found

here: <a href="http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general\_con">http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general\_con</a>

tent\_000601.jsp&mid=WC0b01ac05807d58ce

Postponed to the November 2015 CAT meeting.

#### 7.3.4. Draft Scientific Guideline on Post-authorisation efficacy studies (PAES)

Scope: for public consultation

Action: for adoption

Document: Guidance

Note:

-the guideline was introduced to CAT in July 2015 for comments.

-the aim of this draft is to provide scientific guidance for MAHs and NCAs on the general need for such studies including within the scope of Delegated Regulation (EU) No 357/2014, on general methodological considerations, on specific situations and on study conduct. Following its adoption by the EMA Scientific Committees the draft guidance will be released for public consultation in Q4 2015.

CAT adopted this guideline for public consultation.

# 7.3.5. Guideline on quality, non-clinical and clinical aspects of gene therapy medicinal products

Overview of comments received during the external consultation

Scope: Re-appointment of drafting group members

Action: for discussion

Note: The external consultation ended in July 2015.

CAT was informed that 28 comments were received during the external consultation. CAT appointed following drafting group members to review the comments and finalise the revision of this guideline:

-Quality: S Ruiz, M Menezes-Ferreira, C Niederlaender

-Non-clinical: K Breen, B Sarkadi, M Renner (tbc)

-Clinical: N Ferry, B Klug (tbc).

### 7.3.6. PRIME - Enhanced early dialogue to foster development and facilitate accelerated assessment

Action: for information

Tabled document: -Reflection paper

Note:

As a follow-up to the presentation in July on PRIME (previously Pathfinder), EMA is now in the process of finalising the reflection paper which is planned to be adopted by the CHMP during its October meeting. After adoption, the reflection paper will be released for a 2-month public consultation, prior to a targeted launch in Q1 2016.

CAT noted the draft reflection paper. The CAT chair voiced concern of the fact that CAT was not sufficiently involved in the preparation of this new procedure, which will impact also on the review of ATMP applications by the CAT.

#### 7.4. Co-operation within the EU regulatory network

#### 7.4.1. Analysis of European Clinical Trials Database (EudraCT)

CAT drafting group: M. Menezes-Ferreira, I. Reischl, T. Boráň, P. Salmikangas, N. Ferry, R. Mačiulaitis, D. Śladowski, M. Lipucci di Paola, B. Gänsbacher

Scope: Analysis of EudraCT for trials with ATMPs

Action: for discussion

T Boran presented the first results of the EudraCT analysis. For the further analysis, CAT agreed to look at the period 2009-2014, to analyse the type of sponsors (commercial vs non-commercial), the type of ATMPs, the stage of the clinical trial (early vs late). CAT members were asked to provide comments on the analysis presented by 30 October 2015. A drafting group will be organised in December 2015 with the aim to finalise a first draft of a manuscript on these findings.

#### 7.4.2. GMP requirements for ATMPs

CAT drafting group members: I. Haunerova, M. Menezes-Ferreira, G. Panté, I. Reischl, P. Salmikangas, B. Sekkali, M. Timón, Jürgen Scherer, Marcel Hoefnagel, C Niederlaender

Scope: feedback from the discussion at the GMP Inspectors Working Group

Action: for information

http://ec.europa.eu/health/files/advtherapies/2015 pc/publ cons doc 2015.pdf

Note:

CAT September 2015: feedback was provided by the European Commission on the consultation document that was released for external consultation over the summer of 2015. Similar feedback was provided to the GMP Inspectors Working Group. Both groups will be involved in the latter part of 2015 / early 2016 in the finalisation of the GMP document.

A first joint drafting group will be meeting (virtually) on 16 November. This will be close to the end of the consultation period, so the aim of this teleconference call will be to agree on

the work method and the next steps. It was clarified that the final document will have to be ready before summer 2016: depending on the changes introduced in the document, there might be a need for a second public consultation.

#### 7.5. Co-operation with international regulators

#### 7.5.1. ATMP cluster teleconference with FDA and Health Canada

The teleconference will take place during the plenary meeting on Thursday 15<sup>th</sup> October from 14.00hrs – 15.00hrs

CAT resources: Paula Salmikangas

Action: for adoption

Document: Agenda

The agenda was adopted. During the ATMP cluster teleconference, the experience with CAR-T cells was discussed. Health Canada also presented their Guidance document: 'Preparation of clinical trial applications for use for cell therapy products in humans'.

#### 7.6. CAT Work Plan

#### 7.6.1. CAT Work Plan 2016

Scope: agreement of work plan topic, CAT lead /Rapporteurs and involved CAT members

Action: for discussion

Document: Workplan

CAT agreed with the Work Plan topics for 2016.

7.6.2. CAT- International Society for Cellular Therapy (ISCT) Joint Workshop: 'Challenges and Opportunities for the Successful Development and Approval of Advanced Therapy Medicinal Products', Seville (Spain), 25<sup>th</sup> September 2015

CAT resources: Paula Salmikangas

http://www.ema.europa.eu/ema/index.jsp?curl=pages/news\_and\_events/news/2015/06/news\_detail\_002357.jsp&mid=WC0b01ac058004d5c1

Action: for information

Documents: Presentations

The feedback was postponed to the November 2015 meeting.

#### 7.7. Planning and reporting

None

### 7.8. Others

### 8. Any other business

Date of next CAT meeting: Thursday 12<sup>th</sup> – Friday 13<sup>th</sup> November 2015, virtual

### 9. Explanatory notes

The Notes give a brief explanation of relevant agenda items and should be read in conjunction with the agenda.

#### Abbreviations / Acronyms

AR: Assessment report

ATMP: Advanced Therapy Medicinal Product

**BWP: Biologics Working Party** 

CAT: Committee for Advanced Therapies

CHMP: Committee for Medicinal Product for Human Use

COMP: Committee for Orphan Medicinal Products

DG: Drafting Group

EC: European Commission
GCP: Good Clinical Practice
GLP: Good Laboratory Practice

GMP: Good Manufacturing Practice

GVP: Good Pharmacovigilance Practice

ITF: Innovative Task Force

LoOI: List of outstanding issues

LoQ: List of questions

PDCO: Paediatric Committee
PIP: Paediatric Investigation Plan

PL: Package leaflet

PRAC: Pharmacovigilance and Risk Assessment Committee

RSI: Request for supplementary information

SA: Scientific Advice

SAG-O: Scientific Advisory Group Oncology SAWP: Scientific Advice Working Party SMEs: Small and Medium-size Enterprises SmPC: Summary of Products Characteristics

#### TT: Timetable Evaluation of ATMPs (section 2)

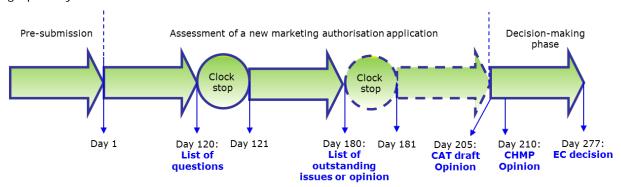
This section lists applications for marketing authorisations of new Advanced Therapy Medicinal Products (ATMPs) that are to be discussed by the Committee. It also lists any ATMP related inspection requests (section 2.9) and Post-authorisation activities (section 2.10).

#### New applications (sections 2.1. to 2.12.)

Section 2.1 is for ATMPs nearing the end of the evaluation and for which the CAT is expected to adopt a draft **opinion** at this meeting on whether marketing authorisation should be granted. Once adopted, the

CAT opinion is transmitted to the CHMP for final adoption. The CHMP opinion will be forwarded to the European Commission for a final legally binding decision valid throughout the EU. More information on the evaluation of ATMPs can be found here.

The other items in the section are listed depending on the stage of the evaluation, which is shown graphically below:



The assessment of an application for a new medicine takes up to 210 'active' days. This active evaluation time is interrupted by at least one 'clock-stop' during which time the applicant prepares the answers to questions from the CAT. The clock stop happens after day 120 and may also happen after day 180, when the CAT has adopted respectively a **Day 120 list of questions** (section 2.3) or a List of outstanding issues to be addressed by the company, which is listed in the agenda under sections 2.7 (**Ongoing evaluation procedures**). Section 2.7 also includes the CAT discussions at any other timepoint of the evaluation procedure of new applications.

#### Oral explanation (section 2.2.)

Prior to adoption of the CAT opinion, marketing authorisation applicants are normally invited to the CAT plenary meeting to address questions raised by the Committee.

Oral explanations normally relate to ongoing applications, but they can also relate to any other issue for which the CAT would like to discuss with company representatives in person.

# Re-examination procedures (new applications) under article 9(2) of regulation no 726/2004 (section 2.6.)

This section lists applications for new marketing authorisation for ATMPs for which the applicant has requested a re-examination of the opinion previously issued by the CHMP. Similar to the initial evaluation of a marketing authorisation of an ATMP, CAT will adopt a draft re-examination opinion, which is transmitted to the CHMP for final adoption.

#### Withdrawal of applications (section 2.7.)

This section includes information on marketing authorisation applications that are withdrawn by the applicant. Applicants may decide to withdraw applications at any stage during the assessment and a CAT opinion will therefore not be issued. Withdrawals are included in the agenda for information or discussion, as necessary.

#### New applications (section 2.9.)

In this section, information is included on upcoming marketing authorisation applications for ATMPs, as well as information on appointment of Rapporteurs for new ATMP applications.

#### GMP and GCP Inspections Issues (section 2.10.)

This section lists inspections that are undertaken for ATMPs. Inspections are carried out by regulatory agencies to ensure that marketing authorisation holders comply with their obligations. Inspection can relate to good manufacturing practice (GMP), good clinical practice (GCP), good laboratory practice (GLP) or good pharmacovigilance practice (GVP).

#### Post-authorisation activities (section 2.12.)

This section lists type II variations, extension application according to Annex I of Reg. 1234/2008, re-examination procedures for type II variations (including extension of indication applications) for which the applicant has requested re-examination of the opinion previously issued by the CHMP and other issues concerning authorised medicines that are not covered elsewhere in the agenda such as annual reassessments, 5-year renewals, supply shortages, qualify defects. Issues that have been discussed at the previous meeting of the PRAC, the EMA's committee responsible for evaluating and monitoring safety issues for medicines, will also be included here.

#### Certification of ATMPs (section 3)

This section includes the scientific evaluation by the CAT of quality and non-clinical data that small and medium-sized enterprises have generated at any stage of the ATMP development process. More information on the ATMP certification procedure can be found <a href="https://example.com/here">here</a>.

#### Scientific Recommendation on Classification of ATMPs (Section 4)

This section includes the scientific recommendation by the CAT on whether medicines based on genes, cells or tissues meet the scientific criteria that define ATMPs. More information on the ATMP classification procedure, including the outcomes of finalised classifications, can be found <a href="https://example.com/here-new-market

#### Scientific Advice (section 5)

This section includes all scientific advice given to companies during the development of an ATMP. Information related to the number of ATMP related scientific advices discussed by CAT can be found in the CAT Monthly reports. Further information on SAWP can be found <a href="https://example.com/here/bath/">https://example.com/here/bath/</a>

#### **Pre-Authorisation (section 6)**

#### Paediatric Investigation Plan (PIP)

This section includes the discussion of an ATMP before a formal application for marketing authorisation is submitted. These cases refer for example to requests for an accelerated assessment for medicines that are of major interest for public health or can be considered a therapeutic innovation: in case of an accelerated assessment the assessment timetable is reduced from 210 to 150 days.

CAT contributes to the evaluation of a Paediatric Investigation Plan (PIPs) for ATMPs by the Paediatric Committee. These PIPs are included in this section of the Agenda.

#### ITF Briefing meeting in the field of ATMPs

This section refers to briefing meetings of the Innovation Task Force and International co-operations activities of the CAT

The Innovation Task Force (ITF) is a body set up to encourage early dialogue with applicants developing innovative medicines. Minutes of meetings with applicants developing ATMPs and of other ITF meetings

of interest to the CAT are included in this section of the agenda. Further information on the ITF can be found <u>here</u>.

#### Organisational, regulatory and methodological matters (section 7)

This section includes topics related to regulatory and procedural guidance, CAT workplan, CAT meeting organisation (including CAT membership), planning and reporting, co-ordination with other committees, working parties and scientific advisory groups.

Furthermore, this section refers to the activities of the CAT drafting groups developing scientific guidelines for gene therapy medicinal products and for cell-based medicinal products, cooperation within the EU regulatory network and international regulators as well as direct interaction with interested parties. It also includes topics of scientific interest for the Committee that are not directly related to the work of the CAT drafting groups or CAT associated working parties.

#### Any other business (section 8)

This section is populated with miscellaneous topics not suitable under the previous headings.

### 10. List of participants

including any restrictions with respect to involvement of members / alternates / experts following evaluation of declared interests for the 15-16 October meeting.

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-Dol	Topics on agenda for which restrictions apply
Paula Salmikangas	Chair	Finland	No interests declared	
Ilona Reischl	Member	Austria	No interests declared	
Claire Beuneu	Member	Belgium	No interests declared	
Rozalina Kulaksazova	Member	Bulgaria	No interests declared	
Ivica Malnar	Alternate	Croatia	No restrictions applicable to this meeting	
Tomáš Boráň	Member	Czech Republic	No interests declared	
Tarmo Tiido	Alternate	Estonia	No interests declared	
Tiina Palomäki	Member	Finland	No interests declared	
Olli Tenhunen	Alternate	Finland	No restrictions applicable to this meeting	
Nicolas Ferry	Member	France	No interests declared	
Violaine Closson	Alternate	France	No interests declared	
Martina Schüssler- Lenz	Member (Vice- Chair)	Germany	No interests declared	
Egbert Flory	Alternate	Germany	No interests declared	
Balázs Sarkadi	Alternate	Hungary	No interests declared	
Maeve Lally	Alternate	Ireland	No restrictions applicable to this meeting	
Luca Sangiorgi	Alternate	Italy	No interests declared	
Romaldas Mačiulaitis	Member (CHMP member)	Lithuania	No restrictions applicable to this meeting	
Anthony Samuel	Alternate (to CHMP represenative)	Malta	No interests declared	

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-Dol	Topics on agenda for which restrictions apply
Johannes Hendrikus Ovelgönne	Member	Netherlands	No interests declared	
Marit Hystad	Member	Norway	No interests declared	
Rune Kjeken	Alternate	Norway	No restrictions applicable to this meeting	
Dariusz Śladowski	Member	Poland		
Margarida Menezes- Ferreira	Alternate (to CHMP represenative)	Portugal	No interests declared	
Simona Badoi	Member	Romania	No interests declared	
Mikuláš Hrubiško	Member	Slovakia	No restrictions applicable to this meeting	
Metoda Lipnik- Stangelj	Member	Slovenia	No interests declared	
Sol Ruiz	Member (CHMP co-opted member)	Spain	No interests declared	
Lennart Åkerblom	Member	Sweden	No interests declared	
Björn Carlsson	Alternate	Sweden	No interests declared	
Christiane Niederlaende r	Member	United Kingdom	No interests declared	
James McBlane	Alternate	United Kingdom	No interests declared	
Bernd Gänsbacher	Member	Healthcare Professionals' Representative	No interests declared	
Ramadan Jashari	Alternate	Healthcare Professionals' Representative	No interests declared	
Michelino Lipucci di Paola	Member	Patients' Representative	No restrictions applicable to this meeting	
Kieran Breen	Member	Patients' Representative	No restrictions applicable to this meeting	
Guido Panté	Expert - in	Italy	No interests declared	

Name	Role	Member state or affiliation	Outcome restriction following evaluation of e-Dol	Topics on agenda for which restrictions apply
	person*			
Anja Schiel	Expert - in person*	Norway	No interests declared	
Christos Sotirelis	Expert - in person*	Expert recommended by EMA	No interests declared	
Wiebke Hop pensack	Expert - via telephone*	Germany	No restrictions applicable to this meeting	
Jonas Bergh	Expert - via telephone*	Sweden	No restrictions applicable to this meeting	
Louise Bisset	Expert - via telephone*	United Kingdom	No interests declared	
Taina Methuen	Expert - via telephone*	Finland	No interests declared	
Outi Mäki- Ikola	Expert - via telephone*	Finland	No interests declared	
Isabel Vieira	Expert - via telephone*	Portugal	No interests declared	
	ve from the European			

A representative from the European Commission attended the meeting Meeting run with support from relevant EMA staff

 $<sup>^{\</sup>star}$  Experts were only evaluated against the product(s) they have been invited to talk about.