The EU Paediatric Regulation

Children: a neglected population

Problems:

- 20% of the EU population, i.e. 100 million, is aged less than 16 years ⇒ premature neonate, term neonate, infant, child, adolescent
- 50-90% of medicines used in children have not been tested and evaluated
- Age appropriate formulations are often missing

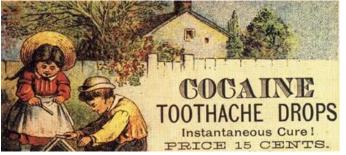
Risks:

- adverse effects (overdosing)
- inefficacy (underdosing)
- improper formulation
- delay in access to innovative medicines

Bayer's Heroin. Between 1890 and 1910 heroin was also used to treat children with strong cough.



Cocaine drops for toothache Very popular for children in 1885.



Evidence of harm from off-label or unlicensed medicines in children http://www.ema.europa.eu/pdfs/human/paediatrics/12632704en.pdf

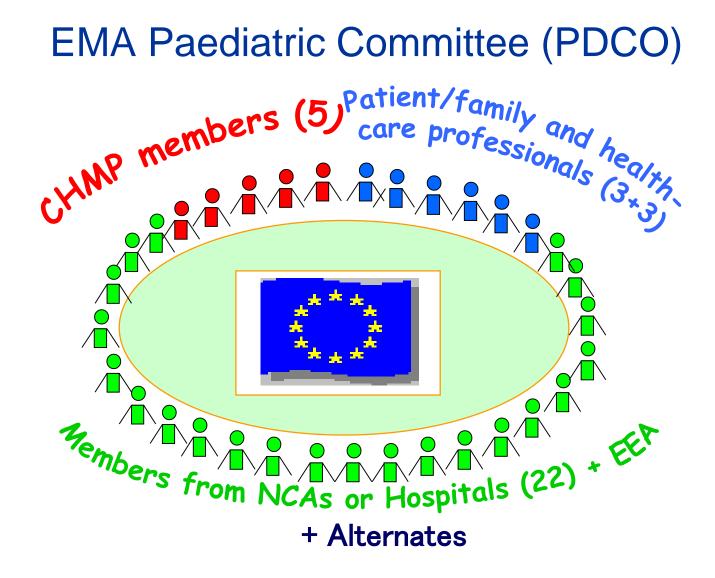
Objectives of the EU Paediatric Regulation

- Improve the health of children:
 - Increase high quality, ethical research into medicines for children
 - Increase **availability** of authorised medicines for children
 - Increase **information** on medicines
- Achieve the above:
 - Without unnecessary studies in children
 - Without delaying authorization for adults

Pillars of the Paediatric Regulation

- EMA and its Paediatric Committee (PDCO)
- Paediatric Investigation Plan (PIP)

-> system of OBLIGATIONS and REWARDS



Main role:

agree development plans of medicinal products in children (PIPs)

What is a Paediatric Investigation Plan (PIP)

Research and development programme

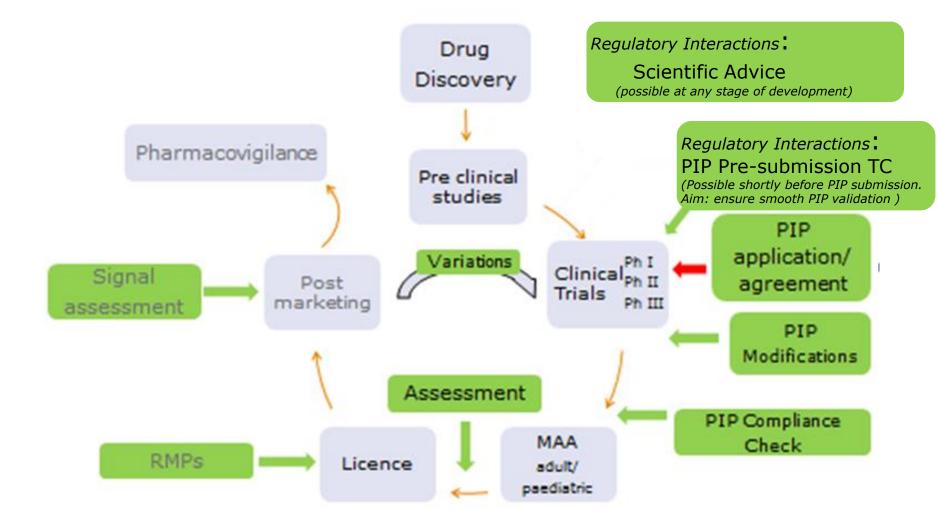
details timing & measures for paediatric indication



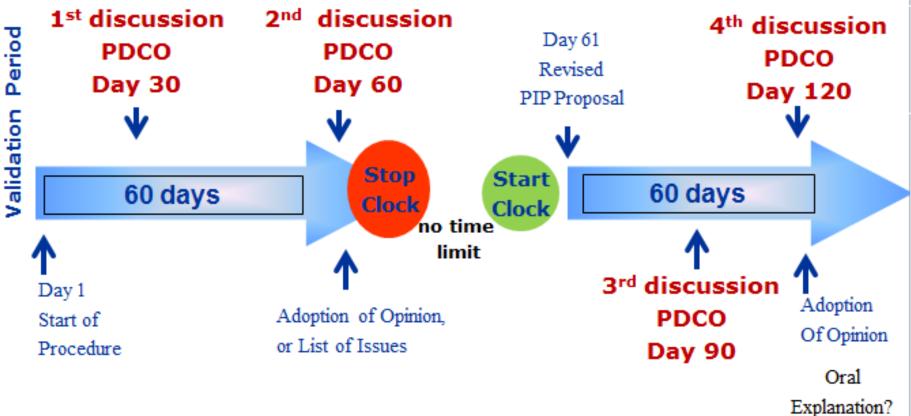


Binding upon company!

Paediatric drug development within the overall drug lifecycle



Overview PIP Procedure



Waiver in children for all or some age groups

- a) Medicinal product likely ineffective or unsafe
- b) Disease does not occur
- c) Medicinal product does <u>not represent a significant</u> <u>therapeutic benefit</u> over existing treatments

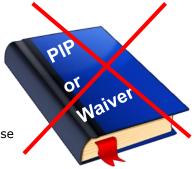
PIP or Waiver **NOT** needed:

Off-patent products already authorised in

the EU (if company is Marketing Authorisation Holder).

New medicinal products in group:

- Generic products (Art 10 (1), Directive 2001/83)
- Hybrid products (Art 10 (3), Directive 2001/83)
- Biosimilar products (Art 10(4), Directive 2001/83)
- Well Established Use (Art 10a, Directive 2001/83)
- Homeopathic products (Art 13, Directive 2001/83)
- Traditional herbal medicinal products (Art 16a-i, "traditional-use registration", Directive 2001/83)





WAIVER (e.g. T2D: 0-10 years)

PIP (e.g. T2D: 10-18 years)

- Quality,
- Pre-clinical,
- Clinical
 - -> Timelines
 - -> Deferral

PIP Modifications

What is it?

Regulatory Procedure to change any of the details (Key Elements) in a PIP Opinion/Decision.

When is it needed?

If Paediatric Plan is <u>unworkable</u> or <u>no longer appropriate</u> and if necessary changes affect the Key Elements of PIP Opinion/Decision.

How long is the procedure?

It is a 60 day procedure.

Who performs the PIP Modifications?

The PDCO will review the Modification Requests and adopt new PIP Opinions.

Opinion adopted: positive even if only one of the modifications requested has been accepted

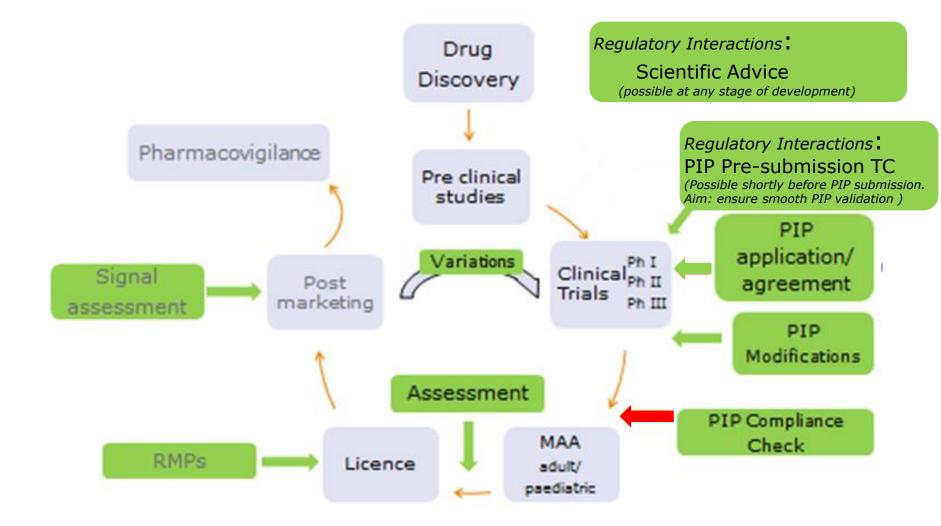
New opinion replaces previous opinion and contains all key binding elements, not just those modified

Opinion and decision process is the same as for original opinion

PIP Opinion/Decision



PIP Compliance Check



Obligations vs Reward

Type of MP	Obligation	Reward	Comments
New Medicinal Product <i>Article 7</i>	PIP (or Waiver)	6 months Extension of SPC (patent)*	A reward for a PIP can only be given <u>once</u> for any medicinal product (GMA concept).
Authorized Medicine, On-patent Article 8	PIP (or Waiver)	6 months Extension of SPC (patent)*	 New indication, New route of admin., New pharm. form
Authorized Medicine, Off-patent <i>Article 7</i> <i>Article 30</i>	 <u>non</u>-MAH: PIP (or Waiver) MAH: No Obligation Voluntary PIP!! 	PUMA: 8+2 years Data/Marketing Protection*	Research funds may be available through European Commission Paediatric Use Marketing Authorization (PUMA) is a possibility
Orphan Medicine	PIP (or Waiver)	2 additional years of Market Exclusivity*	In addition to 10 years Market Exclusivity already given to Orphans

MAH: Marketing Authorization Holder * Please see next slide

COVID-19 treatments and vaccines

-> accelerated procedures possible

- No pre-specified PIP submission deadlines;
- PIP review min. of 20 days (from 120 days), exact timelines case by case (*considering: complexity of PIP, response time to questions, TL MAA*)
- EMA decision following a review is reduced to 2 days (from 10 days);
- Focused scientific documentation, agreed on case-by-case basis;
- Compliance check can be reduced to 4 days.
- Joint procedural information on PIP and iPSP from EMA and US FDA (efficient simultaneous submissions: compare requirements + focus information)

Key message: regulatory flexibility for COVID-19 treatments and vaccines

Enpr-EMA European network of paediatric research at EMA

An umbrella network of research networks, investigators and centres with recognised expertise in performing paediatric clinical trials in Europe

Contact: <u>enprema@ema.europa.eu</u> Web: <u>https://www.ema.europa.eu/en/partners-networks/networks/european-</u> <u>network-paediatric-research-european-medicines-agency-enpr-ema</u>

Enpr-EMA: overview of all networks currently registered within the Enpr-EMA

Member networks by type & category

National	Oncology/ Haematologic Malignancies	Endocr metabolic	oetes/ inology/ : disorders/ ecology		enterology/ batology	In	llergology/ nmunology/ neumatology	Stem Cell /Organ Transplantation/ Haematology/Haemos taseology	Respiratory diseases /Cystic Fibrosis
DCRI	ІТСС	EUC	EUCADET		PLTN		PRINTO	EBMT PDWP	ECFS-CTN
NIHR-CRN	Newclastle-CLLG				PEDDCReN		SWG of PRES		SPACE
ScotCRN	I-BFM-SG		1 1			J	IA uveitis WG		
FinPedMed							PIBD-Net		
Pedmed-NL	EORTC CLG								
MICYRN	CEPOETA								
CICPed					•			•	
RIPPS	Category 1. Netv	vorks fulfilling al	l minimum cr	iteria for	membershin of	Ennr-l	FMΔ		
OKIDS	Category 1: Networks fulfilling all minimum criteria for membership of Enpr-EMA. Category 2: Networks potentially fulfilling all minimum criteria – but needing to clarify some issues before becoming a member of Enpr-EMA. Category 3: Networks currently not yet fulfilling minimum criteria.								
NorPedMed									
MCRN-Hungary									
IPCRN									
Futurenest CR	Category 4: Networks not performing clinical trials; e.g. methodology, infrastructure, etc.								
SwissPedNet				511	minus	li ucture, etc.			
					e 11		ITIES / AGE G	ROUPS	
RECLIP					e 11		-		
-	-	Infectious	Intens		SPECIAL AC		TIES / AGE G	special activities (Phv,	
RECLIP NCCHD-Japan c4c	Psychiatry/	Infectious	Care/Pa	ain/	SPECIAL AC		ITIES / AGE G	special activities (Phv, long term follow up,	Expertise in clinical
NCCHD-Japan	Psychiatry/ Neurology	diseases/	Care/Pa Anaesthesi	ain/ iology/	SPECIAL AC		European	special activities (Phv, long term follow up, community	Expertise in clinical trial methodology
NCCHD-Japan c4c HunPedNet NETSTAP			Care/Pa	ain/ iology/	SPECIAL AC		ITIES / AGE G	special activities (Phv, long term follow up,	
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NCCHD-Japan c4c HunPedNet NETSTAP PCIC-Belgium PEDSTART		diseases/	Care/Pa Anaesthesi	ain/ iology/	SPECIAL AC		European	special activities (Phv, long term follow up, community	
NCCHD-Japan c4c HunPedNet NETSTAP PCIC-Belgium	Neurology	diseases/ Vaccinology	Care/Pa Anaesthesi Surge	ain/ iology/	SPECIAL AC		European	special activities (Phv, long term follow up, community paediatricians)	trial methodology
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NCCHD-Japan c4c HunPedNet NETSTAP PCIC-Belgium PEDSTART STAND4Kids	Neurology EUNETHYDIS	diseases/ Vaccinology PENTA-ID	Care/Pa Anaesthesi Surge	ain/ iology/	SPECIAL AC	atal	European	special activities (Phv, long term follow up, community paediatricians)	trial methodology TEDDY eYPAGnet PedCRIN
NCCHD-Japan c4c HunPedNet NETSTAP PCIC-Belgium PEDSTART STAND4Kids	Neurology EUNETHYDIS	diseases/ Vaccinology PENTA-ID UKPVG	Care/Pa Anaesthesi Surge	ain/ iology/	SPECIAL AC	atal	European	special activities (Phv, long term follow up, community paediatricians)	trial methodology TEDDY eYPAGnet

Enpr-EMA:

working for patients with patients

- **Patient organisation representatives** are **members** of Enpr-EMA Coordinating Group.
- **Enpr-EMA reaches out** to patients and patient organisations (*e.g. public consultation on trial preparedness guidance*).
- Usually there is an **annual open Enpr-EMA workshop** where we would encourage patients and parents to take part and get involved.
- **Patient representatives** and **young persons' advisory groups** have been involved in various Enpr-EMA working groups (*e.g. consent/ assent guidance*).
- Patients can reach out to Enpr-EMA to suggest issues to tackle and/or get involved in, <u>enprema@ema.europa.eu</u>

Global Paediatric Development

Differences EU (Paediatric Regulation) / USA (BPCA-PREA-FDASIA)

	US BPCA	US PREA/**	EU
Scope	Active moiety (can expand to other indications than adult indication) -> OPTIONAL	Pediatric indication mirroring adult indication. ** All potential paediatric cancer indications for the active substance (MoA based)! -> MANDATORY	Scope determined by condition (broad disease entity based on adult indication) -> MANDATORY
Instrument	Written Request	Pediatric Study Plan (PSP)	Paediatric Investigation Plan (PIP)
Waivers	N/A	Yes (3 grounds) ** Yes (similar grounds as non-cancer drugs)	Yes (3 grounds)
Timing	End of phase 2	End of phase 2 -> deferral may be possible	End of phase 1 -> deferral may be possible
Reward	6 months exclusivity	None -> but paediatric studies can be incl in Written Request (Reward under BPCA)	Main: 6 months SPC extension (patent)
Orphan	Included	Excluded <pre>** Included</pre>	Included



**** US PREA-cancer (as of 19 August 2020) – RACE for Children Act** Incorporated as Title V of the FDA Reauthorization Act (FDARA), enacted August 18, 2017

FDA-EMA Interactions

- Monthly EMA/FDA "paediatric cluster" TCs (incl also HealthCanada, PMDA -Japan, TGA-Australia)
- Monthly EMA/FDA "rare disease cluster" TCs

Parallel EMA/FDA scientific advice

Summary (1)

- EMA is scientific EU Agency, coordinating & contributing to authorization of medicinal products (centralized procedure) & oversees their safety
- Many ways for regulatory/scientific interaction with EMA
- Committee for Human Medicinal Products (CHMP) issues opinions on safety & efficacy of new human medicinal products -> leading to their licensing (or not) in all EU counties at the same time
- Medicinal products developed for rare diseases can get incentives through obtaining an Orphan Designation

Summary (2)

- Objective of EU Paediatric Regulation: increase information & availability of authorised medicines in children
- **Paediatric Investigation Plans** (PIPs) are binding research and development plans that detail quality, non-clinical and clinical measures necessary for obtaining a paediatric indication, agreed with the Paediatric Committee (PDCO) at end of phase I studies in adults
- PIPs can be **modified**
- **Reward** is possible upon PIP completion

Summary (3)

- European network of paediatric research at EMA (Enpr-EMA)
 -> expertise in performing paediatric clinical trials
- Patient representatives are involved in the work of Enpr-EMA
- **Paediatric development** is **global**: paediatric legislations also in US, EMA & FDA regularly interact on paediatric developments

Thank you!

Further Reading

- 1. ICH E11: Clinical Investigation of Medicinal Products in the Paediatric Population
- 3. Ethical considerations for clinical trials on medicinal products conducted with the paediatric population http://ec.europa.eu/health//sites/health/files/files/eudralex/vol-10/ethical_considerations_en.pdf
- 5. EMA guideline on Pharmaceutical Development of Medicines for Paediatric Use
- 6. Non-clinical testing in juvenile animals
- 7. EMA Reflection paper on extrapolation of efficacy and safety in paediatric medicine development, Oct 2018 (final) <u>https://www.ema.europa.eu/en/documents/scientific-guideline/adopted-reflection-paper-use-extrapolation-development-medicines-paediatrics-revision-1_en.pdf</u>
- 8. General scientific guidelines on quality, nonclinical and clinical development:

http://tinyurl.com/EMAguidelines

9. Standard paediatric investigation plans:

http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general/general_content_000412.jsp&mid=WC0b01ac0580925cc8

10. EMA Paediatric Public Website:

http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general/general_content_000023.jsp&mid=WC0b01ac05800240cd

Further Reading

 Policy on the determination of the condition(s) for a Paediatric Investigation Plan/Waiver (scope of the PIP/waiver) -EMA/272931/2011

http://www.ema.europa.eu/docs/en_GB/document_library/Other/2012/09/WC500133065.pdf

12. Paediatric Expert Workshops organized at EMA:

http://www.ema.europa.eu/ema/index.jsp?curl=pages/regulation/general/general_content_000416.jsp&mid=WC0b01ac0580925cc6

13. Regulatory Interactions- Research and development support at EMA

https://www.ema.europa.eu/en/human-regulatory/research-development

14. Accelerated procedure for COVID-19 treatments and vaccines

https://www.ema.europa.eu/en/human-regulatory/research-development/paediatric-medicines/paediatricinvestigation-plans#accelerated-procedure-for-covid-19-treatments-and-vaccines-section