



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

European perspective on collaborations to accelerate global paediatric oncology drug developments

CDDF Annual Conference 2022

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Paediatric Medicines Office

An agency of the European Union



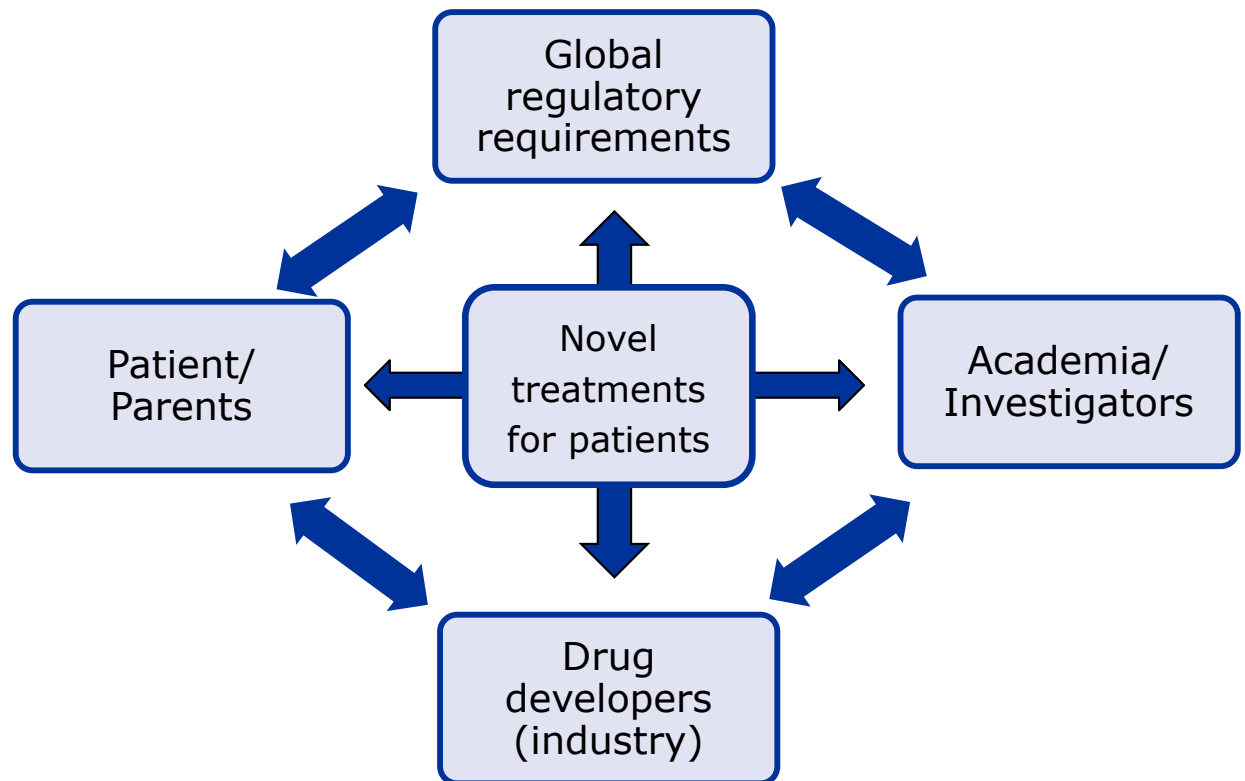


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Challenges with paediatric drug development

- Conceptually
 - Unmet medical need
 - Target population
 - Timing
- Content
 - Standard of care
 - Study design
- Operational
 - Different regulations



How to address these challenges in a global setting

Need for international cooperation and collaboration across/ between all stakeholders

1. Multi-stakeholder interaction

- To foster early, focused academia/ multi companies' collaboration and prioritisation and coordination discussions

2. International regulatory coordination

- Paediatric Cluster calls as platform for regulatory exchange to foster coordinated approach towards global development plans

1. Multi-stakeholder interaction – Paediatric oncology strategy forums

Meetings organized by ACCELERATE together with EMA and FDA participation created to:

- evaluate the current state of the science
- facilitate dialogue and provide an opportunity for constructive discussions between relevant stakeholders (patient advocates, clinicians, academics, biotechnology/pharmaceutical companies and regulators) on specific topics in an open forum
- assure development of medicines in the best interests of children and adolescents with cancer

Paediatric Oncology Strategy Forums



Paediatric Strategy Forums

2017	PSF - 1 ALK inhibition	2020	PSF - 5 Epigenetic modifiers	2022	PSF - 9 RAF and MEK inhibitors
	PSF - 2 Mature B-cell lymphoma		PSF Prioritisation BET inhibitors		PSF - 10 To be decided
2018	PSF - 3 CheckPoint Inhibitors	2021	PSF - 6 Second ALK inhibition		PSF - 11 To be decided
2019	PSF - 4 Acute Myeloid Leukemia		PSF - 7 CAR T cells		
	PSF Prioritisation Acute Myeloid Leukemia		PSF - 8 TKI in Sarcomas		

Continually evolving



Paediatric Oncology Strategy Forums' deliverables

- Publications of the outcome of the forums in peer reviewed journals (<https://www.accelerate-platform.org/publications-reference-documents/>)
- Follow-up activities
 - e.g. LLS PedAL/EUpAL initiative - platform for real-time matching of children with relapsed acute myeloid leukaemia to early-phase clinical trials (1)
 - GloBHNL platform- international clinical platform trial designed to study novel in children with relapsed or refractory B-cell Non-Hodgkin Lymphoma (2)
 - Follow-up meetings between academia and several industry partners to prioritise (3)

1. Eur J Cancer. 2020 Sep;136:116-129

2. <https://www.accelerate-platform.org/2020/09/10/glo-bnhlan-opportunity-pharma/>

3. Eur J Cancer. 2021; 146:115-124.

Multi Stakeholder interaction – oncology experience

- Call for early academia/ industry collaboration with objective to prioritise based on unmet needs (through follow up meetings)
- Development of 'living' prioritisation structure as proof of concept
- Calling for focused and sequential developments across compounds and companies
- Conclusions of Strategy Forums have supported regulatory decision making
 - Mature B cell malignancies – more focused PIPs (1)
 - Checkpoint inhibitors – more focused PIPs, more combination developments

7 1. <https://www.accelerate-platform.org/wp-content/uploads/sites>

Conclusions Part 1

Acknowledgment that regulatory decision making on mandated (global) paediatric developments cannot take place in isolation.

There is a shared responsibility to ensure development efforts address unmet medical needs and prioritise developments accordingly.

Multi-stakeholder engagement can support regulatory decision making (1)

2. Need for international regulatory coordination

- Paediatric cancer drug development is a global enterprise
- Sponsors need to satisfy different regulatory requirements globally (e.g. PIP/iPSP)
- Changing regulatory landscape (through RACE Act) underlined the need for further strengthening of international/global collaboration also in the regulatory field

Background on Paediatric Cluster calls

- Monthly meetings between regulatory agencies under confidentiality agreements
- Participants
 - EMA, FDA, TGA, PMDA, HC
- Platform for regulatory bodies to exchange and discuss
 - Regulatory submissions (PIPs/iPSP/ PPSR etc)
 - Design aspects of paediatric drug development
 - Ensuring mutual understanding of methodological concepts etc.

Paediatric Cluster calls

- Call for transparency on sponsors on plans to fulfil all regulatory requirements (PIPs and iPSP)
- Call for simultaneous PIP/iPSP submissions (co-authored by FDA/ EMA, Reaman G et al; JCO, Sept 2020)



Paediatric Cluster calls

- Publication of a generic common commentary by EMA/ FDA (March 2021) (1)
- Facilitates early focused discussions amongst regulators on key (design) issues at Paediatric cluster calls
- Allowing early regulatory coordination of global development plans (eg through common commentary)
- Differences in regulations can be overcome (2)



Additional international regulatory collaboration

- EMA participation to FDA Type F meetings as observers (subject to request and agreement of the sponsor)
- FDA participation as observers to PIP clarification TCs in case of simultaneous PIP/iPSP submissions and prior discussion of the product in a Paediatric cluster call

Conclusion Part II

Despite different regulatory processes and timelines, early coordinated discussions between regulatory agencies at Paediatric cluster calls on mandated paediatric development plans can assure timely initiation of early-phase studies and a coordinated approach to later phase developments.

Summary and lessons learnt

- Early academia-(multi)-company engagement followed by early involvement of regulators is key.
- Multi-stakeholder discussions can support identification of unmet medical needs and priorities.
- Transparency by industry to regulators on paediatric plans beyond EU is important.
- Simultaneous PIP/iPSP/PPSR submissions allow early and coordinated discussions between agencies at the monthly paediatric cluster calls.

Thank you very much

Acknowledgments:

Franca Ligas, Giovanni Lesa, Ralph Bax

FDA colleagues, particularly

Gregory Reaman, Sarah Zaidi, Suzanne Malli



Any questions?

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