

News from the EMEA

Activities of the CHMP

During its meeting from 20-23 September 2010 the Committee for Human Medicinal Products (CHMP) adopted:

- **five positive opinions** for the granting of a marketing authorisation for:

- **Aflunov and Prepandemic influenza vaccine (H5N1) Novartis** prepandemic Influenza, from Novartis, intended for the immunisation against H5N1 subtype of influenza A virus. The Aflunov application was a resubmission of an application that was withdrawn by the applicant on 13 June 2008, because at that time the company could not meet the Committee's request for additional clinical data, as required by the prepandemic guideline. This review began on 23 December 2009 with an active review time of 210 days.
- **Brilique and Possia** (ticagrelor) from AstraZeneca, intended in co-administration with acetylsalicylic acid, for the prevention of atherothrombotic events in adult patients with acute coronary syndromes. The review for Brilique began on 18 November 2009 with an active review time of 206 days. The review for Possia began on 26 May 2010 with an active review time of 86 days.
- **TOBI Podhaler** (tobramycin), an orphan medicine from Novartis, intended for the suppressive therapy of chronic pulmonary infection due to *Pseudomonas aeruginosa* in adults and children aged 6 years and older with cystic fibrosis. The review for TOBI Podhaler began on 23 December 2009 with an active review time of 210 days.

- **a negative opinion** for:

- **Movectro** (cladribine), from MerckSerono. Movectro was intended for the treatment of multiple sclerosis.

- **a positive opinion** for the following generic medicine:

- **Leflunomide ratiopharm** for the treatment of adult patients with active rheumatoid arthritis (generic of Arava from Sanofi Aventis)

- **positive opinions** for extensions of indications for:

- **Mabthera** (rituximab), from Roche, to include the treatment of follicular lymphoma patients responding to induction therapy.
- **Tasigna** (nilotinib), from Novartis, to include the treatment of adult patients with newly diagnosed Philadelphia chromosome-positive chronic myelogenous leukaemia in the chronic phase.

Pharmacovigilance:

Suspension of Avandia, Avandamet and Avaglim recommended: The CHMP finalised the review of the rosiglitazone-containing antidiabetes medicines **Avandia** (rosiglitazone), **Avaglim** (rosiglitazone/glimepiride) and **Avandamet** (rosiglitazone/metformin hydrochloride), from SKB, and recommended the **suspension of their marketing authorizations**. Patients are advised not to stop their medication and should make an appointment with their doctor to discuss suitable alternative treatments.

Suspension of Octagam recommended: Finalising a review of **Octagam** (human normal immunoglobulin), from Octapharma, the CHMP recommended the **suspension of the marketing authorisations, and a recall of Octagam** currently on the market in Europe. As the medicine will no longer be available, the Agency recommended that doctors should stop using Octagam and should switch their patients to the most appropriate alternative treatment. The review was initiated following an unexpected increase in reports of thromboembolic reactions, including stroke, myocardial infarction and pulmonary embolism in patients receiving the medicine. This increase is thought to be related to problems with the medicine's manufacturing process.

Update on the review of Pandemrix: The CHMP reviewed all available data on the suspected link between narcolepsy and **Pandemrix**, an H1N1 influenza vaccine, from GSK Biologicals and concluded that the available evidence is insufficient to determine whether there is any link between Pandemrix and reports of narcolepsy, and that further studies are necessary to fully understand this issue. At present, the **benefit-risk balance** of Pandemrix **continues to be positive** and there is no need for Europe-wide restrictions on use.

Update on the review of RotaTeq: The CHMP finalised a review of the oral vaccine **Rotateq**, from Sanofi Pasteur MSD, following the detection of porcine circovirus (PCV) DNA fragments in the vaccine. Conclusion: **The vaccine continues to have a positive benefit-risk balance**; the presence of a very low levels of viral DNA fragments does not present a risk to public health.

Arbitrations concluded: The CHMP completed the following arbitration procedures:

- **Galantamine Stada** (galantamine), from Alfred E. Tiefenbacher GmbH & Co KG for the symptomatic treatment of mild to moderately severe dementia of the Alzheimer type. This procedure was initiated because of concerns that this medicine was not bioequivalent to the reference product, and that this could result in suboptimal dosing. Conclusion: Bioequivalence with the reference product has not been shown: Therefore the benefit-risk balance of this medicine is negative; **marketing authorisations should not be granted**.
- **Prevora** (chlorhexidine diacetate), from CHX Technologies Europe Ltd. This procedure was initiated because of concerns that the results from the main study with Prevora were not sufficient to support the proposed indication. Conclusion: Based on evaluation of the newly available data from a Phase IIIB controlled study, the benefit-risk balance of this medicine in the prevention of coronal and root caries in adult patients at high-risk of dental caries was positive; **marketing authorisations should be granted**.

Harmonisation referral concluded: The CHMP recommended the EU-wide harmonisation of the prescribing information for **Lipitor** and associated names (atorvastatin), from Pfizer and associated companies. This medicine is authorised to treat hypercholesterolaemia and to prevent cardiovascular disease.

Review of benefits and risks of Avastin started: The CHMP has started a review of the benefits and risks of **Avastin** (bevacizumab), in view of the results of a study conducted by Roche. This study was submitted in support of an application of Avastin in the treatment of breast cancer in combination with anthracycline-based or capecitabine cytotoxic chemotherapy. In comparison to results of previous studies, this study points to inconsistencies between different trials relevant for the currently approved breast cancer indication, particularly in terms of efficacy. The review of Avastin has been initiated to assess the new data and their impact on the benefit-risk balance of Avastin as regards the indication 'combination treatment with paclitaxel or docetaxel as first line treatment of patients with metastatic breast cancer'.

Review of bisphosphonates started: The CHMP has begun looking at the possible increased risk of atypical stress fractures in patients taking **bisphosphonate-containing medicines** for the treatment and prevention of bone disorders. This follows the review of published literature and post-marketing reports, suggesting that atypical stress fractures may be a class effect of bisphosphonates. A warning about atypical stress fractures of the proximal femoral shaft has been included in the product information for alendronate-containing medicines across Europe, since a review in 2008. The CHMP will now review all available data, to clarify whether atypical stress fractures are a class effect of bisphosphonates, and will assess their impact on the balance of risks and benefits of these medicines.

Date of the next CHMP meeting: 18–21 October 2010.

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Guide to Drug Regulatory Affairs • www.drugregulatoryaffairs.eu

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