



# EMA/PDCO Paediatric Formulation Working Group Experience

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## Disclaimer and Declaration of Interests

- All opinions are my own, and cannot be considered to be the opinion of any Competent Authority or Regulatory Body
- No actual or potential interests to declare



## The problem

- Medicines for children have historically not been appropriately made or tested in that population
- Several parallel legislative attempts to resolve this
- Paediatric Regulation 1901 of 2006
- Condition in adults, similar condition in children
- Paediatric Investigation Plan agreed with EMA



## Paediatric Committee - PDCO

- 5 members/alternates appointed by CHMP
- 1 member/alternate from other EEA States
- 3 members/alternates representing HCPs
- 3 members/alternates representing patients
- Assessment supported by specialist Working Groups
  - Formulations, Non-Clinical, Modelling & Extrapolation, etc,



## Formulations Working Group

- Currently 12-15 national experts
  - Pharmacy (industrial, academic and clinical)
  - Regulatory
  - Clinical
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- Help the PDCO with the review of the formulation proposals of the applicant



# Paediatric Formulation guidelines



European Medicines Agency  
*Pre-authorisation Evaluation of Medicines for Human Use*

London, 28 July 2006  
EMA/CHMP/PEG/194810/2005

**COMMITTEE FOR MEDICINAL PRODUCTS FOR HUMAN USE  
(CHMP)**

**REFLECTION PAPER: FORMULATIONS OF CHOICE FOR THE  
PAEDIATRIC POPULATION**



# Paediatric Formulation guidelines



EUROPEAN MEDICINES AGENCY  
SCIENCE MEDICINES HEALTH

1 August 2013  
EMA/CHMP/QWP/805880/2012 Rev. 2  
Committee for Medicinal Products for Human Use (CHMP)  
Paediatric Committee (PDCO)

Guideline on pharmaceutical development of medicines  
for paediatric use



## Problem #1 – Industry

- Applicants to come with PIP proposals following completion of adult Phase 1
- Adult form already developed by this stage
- Paediatric development seen as an add-on
- Reformulation to account for paediatric needs time-consuming and costly
- Reluctance / resistance
- Investment vs Reward





## Problem #2 – Regulators

- Specific information often lacking or inadequate, esp. in younger age cohorts
- Uncertainties on how best to fill these gaps
- “Precautionary Principle” vs. innovation
- ? Inappropriately detailed assessment & requirements
- ? Lack of confidence that formulation will ultimately be developed



## Problem #3 – Innovation

- New chemical entities
- New “excipients”
- “Inactive” substance
- Anything which is not an active substance
- “Active” excipients – a contradiction?



## My hopes for this meeting

- ; Earlier appreciation of a “whole life” paradigm by industry
- Greater acceptance of uncertainty by regulators
- Development of methods for addressing knowledge gaps



# Thank you