



International Childhood
Cancer Awareness Day



Creating a brighter future for young people with cancer



International Childhood Cancer Awareness Day 2016

Development of paediatric cancer medicines

'Speeding up Innovation, Saving Lives'

Hosted by MEP Glenis Willmott (S&D, UK)

Wednesday 27 January 2016

**Academic perspectives on current
status and ways forward
Gilles Vassal, Gustave Roussy**

New oncology drug development for children and adolescents

- Status in 2015
 - A significant change of the environment, thanks to the EU pediatric regulation (2007)
80 PIPs for a malignant indication
 - But we are very far from addressing the needs:
 - ≈ Less than 1 in 10 children with a non curable relapsed malignancy has access to an innovative therapy in Europe

Cancer = 1st cause of death by disease >1 year

Multistakeholder Paediatric Oncology Platform

December 2013



Creating a unique, multi-stakeholder Paediatric Oncology Platform to improve drug development for children and adolescents with cancer

[Eur J Cancer 2015;51:218.](#)



Gilles Vassal^{a,*}, Raphaël Rousseau^b, Patricia Blanc^c, Lucas Moreno^d, Gerlind Bode^e, Stefan Schwoch^f, Martin Schrappe^g, Jeffrey Skolnik^h, Lothar Bergmanⁱ, Mary Brigid Bradley-Garelik^j, Vaskar Saha^k, Andy Pearson^l, Heinz Zwierzina^m

- **Goal:** to improve oncology drug development for children and adolescents
- **Principle: ALL stakeholders**
 - Academia, Industry, Parents, Regulatory



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Imagine for Margo Children without CANCER

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CDDF Cancer Drug Development Forum

ITCC Innovative Therapies for Children with Cancer European consortium

SOP3 SIOP Europe the European Society for Paediatric Oncology



Why?

- **There are unjustified Class waivers**
 - The adult condition does not exist in children
 - June 2012 – June 2015
 - 214 class waivers discussed by PDCO
 - 72% in oncology - 89 oncology drugs class waived

Example – Crizotinib was class waived

- Lung cancer does not exist in children,
- but ALK (crizotinib target) is present in neuroblastoma, lymphoma, sarcoma in children



Why?

- There are still major delays

Example – PD1 inhibitors

		2008	2009	2010	2011	2012	2013	2014	2015	
Nivolumab	Adults	[Yellow bar]							●	●
	Children							★	[Blue bar]	
Pembrolizumab	Adults				[Yellow bar]			●	●	
	Children							★	[Blue bar]	

- Marketing autorisation in melanoma US
- Marketing autorisation in melanoma EU
- ★ Approved Pediatric Investigation Plan

Pediatric developments started after first market approvals in adults

Why?

- **There are unfeasible PIPs**

- **Example : Vemurafenib PIP EMA/193393/2011**

Clinical	1	Study 2 Open-label, multicentre, single-arm trial to evaluate the recommended dose, safety, pharmacokinetics and response of RO5185426 in paediatric patients from 12 to less than 18 years old with BRAF V600 mutation positive unresectable stage IIIC or stage IV melanoma.
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Trial Start – January 2011

26 investigating sites, 10 countries, 4 continents

As of December 2015, 6 adolescents in trial



Proposals

1. Pediatric development should be based on drug **mechanism of action** instead of adult indication
2. **Prioritisation** should be set up to choose compounds to be evaluated or not in children
 - Based on MOA, needs, feasibility
 - Using stonger biological and preclinical data
 - Done through multistakeholder forum
3. **New incentives and rewards**



Conclusion

- Changes in the Regulation
- Change mindset
- Incentivise work together
- Move pediatric oncology drug development from regulatory compliance only to R&D

GOAL – **Accelerate** new oncology drug development for children and adolescents



Back up slides

Lancet Oncol. 2015 Sep;16(9):e425-6. doi: 10.1016/S1470-2045(15)00233-8.

Will the revised class waiver list make it?

Vassal G¹, Blanc P², Copland C³, Pearson A⁴.

Panel: Class waivers for medicines for the treatment of lung cancer

- In the current class waiver list: treatment of lung carcinoma (small cell and non-small-cell carcinoma)
- In the revised class waiver list: the class of first-generation taxoid and thymidylate synthase inhibitor and pyrimidine-analogue-containing and pyrimidine-analogue-containing and first-generation and second-generation platinum-containing medicinal products for the treatment of lung malignancies

Applied in 2018