CBG MEB

Public Assessment Report

Scientific discussion

Cinacalcet CF 30 mg, 60 mg and 90 mg, film-coated tablets

(cinacalcet hydrochloride)

NL/H/3916/001-003/DC

Date: 20 February 2018

This module reflects the scientific discussion for the non-approval of Cinacalcet CF 30 mg, 60 mg and 90 mg, film-coated tablets. The procedure was finalised at 8 November 2017.

I. INTRODUCTION

Based on the review of the quality, safety and efficacy data, the Member States have refused granting a marketing authorisation for Cinacalcet CF 30 mg, 60 mg and 90 mg, film-coated tablets.

The indications applied for concerns*:*

- The treatment of secondary hyperparathyroidism (HPT) in patients with end-stage renal disease (ESRD) on maintenance dialysis therapy.
- Cinacalcet may be used as part of a therapeutic regimen including phosphate binders and/or Vitamin D sterols, as appropriate.
- Reduction of hypercalcaemia in patients with:
    - parathyroid carcinoma.
    - primary HPT for whom parathyroidectomy would be indicated on the basis of serum calcium levels (as defined by relevant treatment guidelines), but in whom parathyroidectomy is not clinically appropriate or is contraindicated.

The marketing authorisation was applied pursuant to Article 10(1) of Directive 2001/83/EC.

The concerned member states in this procedure were Austria, Germany, Denmark, Spain, Finland, France, Ireland, Italy and Sweden.

II. OVERALL CONCLUSION, BENEFIT/RISK ASSESSMENT AND RECOMMENDATION

The marketing authorisation could not be granted due to a potential serious risk to public health as defined in the Guideline on the definition of a potential serious risk to public health in the context of Article 29(1) and (2) of Directive 2001/83/EC — March 2006 (2006/C 133/05).

Pharmacokinetics

Adequate proof for bioequivalence demonstrated by generic medicinal products to the reference medicinal product is lacking. Bioequivalence has not been demonstrated, as one subject was excluded due to the lack of measurable cinacalcet plasma concentrations after administration of the test formulation.

The submitted root cause investigation was considered not sufficient to justify the exclusion of the data from this subject. In accordance with the EMAs Guideline on the investigation of Bioequivalence (page 14/17), exclusion based on the observation of lacking measurable concentrations or only very low plasma concentrations is only acceptable if this occurs after administration of the reference product. Therefore the exclusion of subject data for the test product based upon lack of measurable cinacalcet plasma concentrations is not acceptable as it is impossible to distinguish the formulation effects from other effects influencing the pharmacokinetics. The data of the subject concerned after administration of the test formulation should be taken into account. Because no cinacalcet plasma concentrations were observed after administration of the test formulation in this subject, bioequivalence cannot be proven.

Therefore, the Board concluded that the marketing authorisation for Cinacalcet CF 30 mg, 60 mg and 90 mg, film-coated tablets cannot be granted. Agreement on this conclusion was reached with the concerned member states. The decentralised procedure was finalised with a negative outcome on 8 November 2017.