

**Clinical trial results:**

Post-marketing study of Amaryl® (Glimepiride) in patients with type 2 diabetes to investigate pediatric and adult population pharmacokinetics [multicenter, non-comparative, 12-28 weeks, non-blind titration (0.5-6 mg/day) study].

Summary

| | |
|--------------------------|----------------|
| EudraCT number | 2014-004643-12 |
| Trial protocol | Outside EU/EEA |
| Global end of trial date | 13 May 2008 |

Results information

| | |
|--------------------------------|---------------|
| Result version number | v1 (current) |
| This version publication date | 01 April 2016 |
| First version publication date | 18 July 2015 |

Trial information**Trial identification**

| | |
|-----------------------|---------|
| Sponsor protocol code | POP6739 |
|-----------------------|---------|

Additional study identifiers

| | |
|------------------------------------|---|
| ISRCTN number | - |
| ClinicalTrials.gov id (NCT number) | - |
| WHO universal trial number (UTN) | - |

Notes:

Sponsors

| | |
|------------------------------|--|
| Sponsor organisation name | Sanofi-aventis K.K. |
| Sponsor organisation address | Tokyo Opera City Tower, 3-20-2, Nishi Shinjuku, Shinjuku-ku, Tokyo, Japan, 163-1488 |
| Public contact | Trial Transparency Team, Sanofi aventis recherche & développement, Contact-US@sanofi.com |
| Scientific contact | Trial Transparency Team, Sanofi aventis recherche & développement, Contact-US@sanofi.com |

Notes:

Paediatric regulatory details

| | |
|--|-----|
| Is trial part of an agreed paediatric investigation plan (PIP) | No |
| Does article 45 of REGULATION (EC) No 1901/2006 apply to this trial? | No |
| Does article 46 of REGULATION (EC) No 1901/2006 apply to this trial? | Yes |

Notes:

Results analysis stage

| | |
|--|----------------|
| Analysis stage | Final |
| Date of interim/final analysis | 13 August 2008 |
| Is this the analysis of the primary completion data? | No |
| Global end of trial reached? | Yes |
| Global end of trial date | 13 May 2008 |
| Was the trial ended prematurely? | No |

Notes:

General information about the trial

Main objective of the trial:

To investigate the pharmacokinetics of Amaryl® in pediatric subjects (8 to 16 years of age) with type 2 diabetes in comparison with adults subjects (17 years or older of age) with type 2 diabetes under steady state

Protection of trial subjects:

For paediatric subjects, the parent(s) or guardian(s) as well as the children were fully informed of all pertinent aspects of the clinical trial as well as the possibility to discontinue at any time. In addition to the consent form for the parent(s)/guardian(s), an assent form in child-appropriate language was provided and explained to the child. Repeated invasive procedures were minimized. For the population with pharmacokinetic analysis a minimum number of blood sampling was performed. A topical anesthesia may have been used to minimize distress and discomfort.

Adult subjects: Subjects were fully informed of all pertinent aspects of the clinical trial as well as the possibility to discontinue at any time in language and terms appropriate for the subject and considering the local culture. During the course of the trial, subjects were provided with individual subject cards indicating the nature of the trial the subject is participating, contact details and any information needed in the event of a medical emergency.

Collected personal data and human biological samples were processed in compliance with the Sanofi-Aventis Group Personal Data Protection Charter ensuring that the Group abides by the laws governing personal data protection in force in all countries in which it operates.

Background therapy: -

Evidence for comparator: -

| | |
|---|--------------|
| Actual start date of recruitment | 19 July 2006 |
| Long term follow-up planned | No |
| Independent data monitoring committee (IDMC) involvement? | No |

Notes:

Population of trial subjects

Subjects enrolled per country

| | |
|--------------------------------------|------------|
| Country: Number of subjects enrolled | Japan: 141 |
| Worldwide total number of subjects | 141 |
| EEA total number of subjects | 0 |

Notes:

Subjects enrolled per age group

| | |
|---|---|
| In utero | 0 |
| Preterm newborn - gestational age < 37 wk | 0 |

| | |
|--|----|
| Newborns (0-27 days) | 0 |
| Infants and toddlers (28 days-23 months) | 0 |
| Children (2-11 years) | 4 |
| Adolescents (12-17 years) | 33 |
| Adults (18-64 years) | 61 |
| From 65 to 84 years | 42 |
| 85 years and over | 1 |

Subject disposition

Recruitment

Recruitment details:

The study was conducted at 34 sites in Japan. A total of 142 subjects were enrolled between 19 July 2006 and 07 November 2007.

Pre-assignment

Screening details:

Of 142 enrolled subjects, 141 subjects were treated.

Period 1

| | |
|------------------------------|--------------------------------|
| Period 1 title | Overall Study (overall period) |
| Is this the baseline period? | Yes |
| Allocation method | Not applicable |
| Blinding used | Not blinded |

Arms

| | |
|------------------------------|--------------------|
| Are arms mutually exclusive? | Yes |
| Arm title | Amaryl - Pediatric |

Arm description:

Amaryl in children (8-16 years) for 12-28 weeks.

| | |
|--|--------------|
| Arm type | Experimental |
| Investigational medicinal product name | Glimepiride |
| Investigational medicinal product code | HOE490 |
| Other name | Amaryl ® |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

0.5 or 1 mg/day (once daily, before or after meal in morning) or 2 to 6 mg/day (once or twice daily, before or after meal in morning or morning and evening).

| | |
|------------------|----------------|
| Arm title | Amaryl - Adult |
|------------------|----------------|

Arm description:

Amaryl in adults (years ≥ 17) for 12-28 weeks.

| | |
|--|--------------|
| Arm type | Experimental |
| Investigational medicinal product name | Glimepiride |
| Investigational medicinal product code | HOE490 |
| Other name | Amaryl ® |
| Pharmaceutical forms | Tablet |
| Routes of administration | Oral use |

Dosage and administration details:

0.5 or 1 mg/day (once daily, before or after meal in morning) or 2 to 6 mg/day (once or twice daily, before or after meal in morning or morning and evening).

| Number of subjects in period 1 | Amaryl - Pediatric | Amaryl - Adult |
|---------------------------------------|--------------------|----------------|
| Started | 35 | 106 |
| Completed | 32 | 105 |
| Not completed | 3 | 1 |
| Poor treatment compliance | 1 | - |
| Subjects did not Wish to Continue | 2 | - |
| Adverse event | - | 1 |

Baseline characteristics

Reporting groups

| | |
|-----------------------|--------------------|
| Reporting group title | Amaryl - Pediatric |
|-----------------------|--------------------|

Reporting group description:

Amaryl in children (8-16 years) for 12-28 weeks.

| | |
|-----------------------|----------------|
| Reporting group title | Amaryl - Adult |
|-----------------------|----------------|

Reporting group description:

Amaryl in adults (years ≥ 17) for 12-28 weeks.

| Reporting group values | Amaryl - Pediatric | Amaryl - Adult | Total |
|------------------------------------|--------------------|----------------|-------|
| Number of subjects | 35 | 106 | 141 |
| Age categorical Units: Subjects | | | |

| | | | |
|---|-------------------|--------------------|----|
| Age continuous Units: years arithmetic mean standard deviation | 13.4 ± 1.8 | 62.1 ± 12.4 | - |
| Gender categorical Units: Subjects | | | |
| Female | 17 | 40 | 57 |
| Male | 18 | 66 | 84 |

End points

End points reporting groups

| | |
|------------------------------|--|
| Reporting group title | Amaryl - Pediatric |
| Reporting group description: | Amaryl in children (8-16 years) for 12-28 weeks. |
| Reporting group title | Amaryl - Adult |
| Reporting group description: | Amaryl in adults (years ≥ 17) for 12-28 weeks. |

Primary: Apparent Clearance (CL/F)

| | |
|------------------------|--|
| End point title | Apparent Clearance (CL/F) ^[1] |
| End point description: | Apparent clearance is a quantitative measure of the rate at which a drug substance is removed from the blood. Full analysis set/pharmacokinetic (FAS/PK) included all subjects (excluding 4 subjects in pediatric arm and 2 subjects in adult arm of the enrolled subjects) for whom pharmacokinetic parameters were analysed. |
| End point type | Primary |
| End point timeframe: | Visit 8 (or one of Visit 2-7) - up to 28 weeks |

Notes:

[1] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: This is a population PK analysis - Statistical analysis results are the estimates obtained from the one-compartment model as are provided in below table

| End point values | Amaryl - Pediatric | Amaryl - Adult | | |
|--------------------------------------|--------------------|--------------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 31 | 105 | | |
| Units: L/h | | | | |
| arithmetic mean (standard deviation) | 1.79 (\pm 0.77) | 1.64 (\pm 0.59) | | |

Statistical analyses

No statistical analyses for this end point

Primary: Apparent Volume of Distribution (V_{ss} /F)

| | |
|------------------------|---|
| End point title | Apparent Volume of Distribution (V _{ss} /F) ^[2] |
| End point description: | Volume of distribution is defined as the theoretical volume in which the total amount of drug would need to be uniformly distributed to produce the desired blood concentration of a study drug. Analysis was performed on FAS/PK population. |
| End point type | Primary |
| End point timeframe: | Visit 8 (or one of Visit 2-7) - up to 28 weeks |

Notes:

[2] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: This is a population PK analysis - Statistical analysis results are the estimates obtained from the one-compartment model as are provided in below table

| End point values | Amaryl - Pediatric | Amaryl - Adult | | |
|--------------------------------------|--------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 31 | 105 | | |
| Units: litre(s) | | | | |
| arithmetic mean (standard deviation) | 6.84 (± 0.09) | 6.83 (± 0.11) | | |

Statistical analyses

No statistical analyses for this end point

Primary: Half-Life (t1/2)

| | |
|-----------------|---------------------------------|
| End point title | Half-Life (t1/2) ^[3] |
|-----------------|---------------------------------|

End point description:

Half-life is the time measured for the plasma concentration of the drug to decrease by one half. Analysis was performed on FAS/PK population.

| | |
|----------------|---------|
| End point type | Primary |
|----------------|---------|

End point timeframe:

Visit 8 (or one of Visit 2-7) - up to 28 weeks

Notes:

[3] - No statistical analyses have been specified for this primary end point. It is expected there is at least one statistical analysis for each primary end point.

Justification: This is a population PK analysis - Statistical analysis results are the estimates obtained from the one-compartment model as are provided in below table

| End point values | Amaryl - Pediatric | Amaryl - Adult | | |
|--------------------------------------|--------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 31 | 105 | | |
| Units: hours | | | | |
| arithmetic mean (standard deviation) | 3.15 (± 1.38) | 3.3 (± 1.6) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline in Hemoglobin A1C (HbA1C) at Endpoints

| | |
|-----------------|---|
| End point title | Change from Baseline in Hemoglobin A1C (HbA1C) at Endpoints |
|-----------------|---|

End point description:

Intent-to-treat (ITT) population included all treated subjects.

| | |
|----------------|-----------|
| End point type | Secondary |
|----------------|-----------|

End point timeframe:

(Visit 1 -8) - from baseline up to last observation max of 28 weeks

| End point values | Amaryl - Pediatric | Amaryl - Adult | | |
|--------------------------------------|--------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 35 | 106 | | |
| Units: percentage of Hb | | | | |
| arithmetic mean (standard deviation) | | | | |
| Baseline (n= 35, 105) | 8.26 (± 1.98) | 8.7 (± 1.37) | | |
| Endpoint (n= 35, 106) | 7.85 (± 2.04) | 7.18 (± 0.85) | | |
| Change from baseline (n= 35, 105) | -0.41 (± 1.9) | -1.5 (± 1.08) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline in Fasting plasma glucose (FPG) at Endpoints

| | |
|---|---|
| End point title | Change from Baseline in Fasting plasma glucose (FPG) at Endpoints |
| End point description: | |
| Analysis was performed on ITT population. | |
| End point type | Secondary |
| End point timeframe: | |
| (Visit 1 -8) - from baseline up to last observation max of 28 weeks | |

| End point values | Amaryl - Pediatric | Amaryl - Adult | | |
|--------------------------------------|--------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 35 | 106 | | |
| Units: mg/dL | | | | |
| arithmetic mean (standard deviation) | | | | |
| Baseline | 159.6 (± 64) | 166.7 (± 37.2) | | |
| Endpoint | 155.9 (± 61.3) | 134.7 (± 22.6) | | |
| Change from baseline | -3.7 (± 60.6) | -32 (± 34.4) | | |

Statistical analyses

No statistical analyses for this end point

Secondary: Change from Baseline in Fasting Blood Glucose by Self-monitoring of Blood Glucose (SMBG) at Endpoints

| | |
|-----------------|---|
| End point title | Change from Baseline in Fasting Blood Glucose by Self-monitoring of Blood Glucose (SMBG) at Endpoints |
|-----------------|---|

End point description:

Analysis was performed on ITT population.

End point type Secondary

End point timeframe:

(Visit 1 -8) - from baseline up to last observation max of 28 weeks

| End point values | Amaryl - Pediatric | Amaryl - Adult | | |
|--------------------------------------|--------------------|-----------------|--|--|
| Subject group type | Reporting group | Reporting group | | |
| Number of subjects analysed | 35 | 106 | | |
| Units: mg/dL | | | | |
| arithmetic mean (standard deviation) | | | | |
| Baseline (n= 24, 63) | 158.9 (± 69) | 156.9 (± 44.4) | | |
| Endpoint (n= 26, 64) | 140.8 (± 50) | 123.8 (± 26.9) | | |
| Change from baseline (n= 24, 63) | -18.4 (± 70.5) | -32.8 (± 44.8) | | |

Statistical analyses

No statistical analyses for this end point

Adverse events

Adverse events information

Timeframe for reporting adverse events:

All Adverse Events (AE) were collected from signature of the informed consent form up to the final visit (Week 12-28) regardless of seriousness or relationship to investigational product.

Adverse event reporting additional description:

Reported adverse events are treatment-emergent adverse events that is AEs that developed/worsened during the 'on treatment period' (the time between first and the last administration of the investigational product).

| | |
|-----------------|------------|
| Assessment type | Systematic |
|-----------------|------------|

Dictionary used

| | |
|-----------------|--------|
| Dictionary name | MedDRA |
|-----------------|--------|

| | |
|--------------------|------|
| Dictionary version | 11.0 |
|--------------------|------|

Reporting groups

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|-----------------------|--------------------|
| Reporting group title | Amaryl - Pediatric |
|-----------------------|--------------------|

Reporting group description:

Amaryl in children (8-16 years) for 12-28 weeks.

| | |
|-----------------------|----------------|
| Reporting group title | Amaryl - Adult |
|-----------------------|----------------|

Reporting group description:

Amaryl in adult (years >= 17) for 12-28 weeks.

| Serious adverse events | Amaryl - Pediatric | Amaryl - Adult | |
|---|--------------------|-----------------|--|
| Total subjects affected by serious adverse events | | | |
| subjects affected / exposed | 1 / 35 (2.86%) | 0 / 106 (0.00%) | |
| number of deaths (all causes) | 0 | 0 | |
| number of deaths resulting from adverse events | | | |
| Psychiatric disorders | | | |
| Mental Disorder | | | |
| subjects affected / exposed | 1 / 35 (2.86%) | 0 / 106 (0.00%) | |
| occurrences causally related to treatment / all | 0 / 1 | 0 / 0 | |
| deaths causally related to treatment / all | 0 / 0 | 0 / 0 | |

Frequency threshold for reporting non-serious adverse events: 5 %

| Non-serious adverse events | Amaryl - Pediatric | Amaryl - Adult | |
|---|--------------------|-------------------|--|
| Total subjects affected by non-serious adverse events | | | |
| subjects affected / exposed | 22 / 35 (62.86%) | 39 / 106 (36.79%) | |
| Investigations | | | |
| Blood Creatine Phosphokinase Increased | | | |

| | | | |
|---|---|---|--|
| subjects affected / exposed occurrences (all) | 3 / 35 (8.57%) 3 | 1 / 106 (0.94%) 1 | |
| Nervous system disorders Headache subjects affected / exposed occurrences (all) | 3 / 35 (8.57%) 3 | 0 / 106 (0.00%) 0 | |
| Eye disorders Conjunctivitis subjects affected / exposed occurrences (all) | 2 / 35 (5.71%) 2 | 0 / 106 (0.00%) 0 | |
| Gastrointestinal disorders Abdominal Pain subjects affected / exposed occurrences (all) | 2 / 35 (5.71%) 2 | 0 / 106 (0.00%) 0 | |
| Respiratory, thoracic and mediastinal disorders Rhinitis Allergic subjects affected / exposed occurrences (all) Upper Respiratory Tract Inflammation subjects affected / exposed occurrences (all) | 3 / 35 (8.57%) 3 6 / 35 (17.14%) 6 | 1 / 106 (0.94%) 1 5 / 106 (4.72%) 5 | |
| Skin and subcutaneous tissue disorders Eczema subjects affected / exposed occurrences (all) | 2 / 35 (5.71%) 2 | 4 / 106 (3.77%) 4 | |
| Renal and urinary disorders Proteinuria subjects affected / exposed occurrences (all) | 3 / 35 (8.57%) 3 | 0 / 106 (0.00%) 0 | |
| Infections and infestations Nasopharyngitis subjects affected / exposed occurrences (all) Influenza subjects affected / exposed occurrences (all) | 3 / 35 (8.57%) 4 2 / 35 (5.71%) 2 | 13 / 106 (12.26%) 17 1 / 106 (0.94%) 1 | |
| Metabolism and nutrition disorders | | | |

| | | | |
|---|---------------------|-------------------------|--|
| Hypoglycaemia subjects affected / exposed occurrences (all) | 3 / 35 (8.57%) 3 | 20 / 106 (18.87%) 60 | |
|---|---------------------|-------------------------|--|

More information

Substantial protocol amendments (globally)

Were there any global substantial amendments to the protocol? Yes

| Date | Amendment |
|----------------|---|
| 10 July 2007 | In this amendment the number of sites (35 sites) was changed to approximately 50 sites. |
| 10 August 2007 | Concomitant drugs with precaution to potentiate the hyperglycemic action was changed (that is Ciprofloxacin and Levofloxacin were added) due to amendment of the package insert. |
| 24 August 2007 | Minor administrative changes were made due to the changes on the administrative structure. |
| 10 April 2008 | Minor administrative changes and editorial changes were made due to the changes on the administrative structure. |

Notes:

Interruptions (globally)

Were there any global interruptions to the trial? No

Limitations and caveats

None reported