COLLEGE TER BEOORDELING VAN GENEESMIDDELEN

Public Assessment Report

Scientific discussion

Macitentan Devatis 10 mg, film-coated tablets (macitentan)

NL/H/6090/001/DC

Date: 17 June 2026

This module reflects the scientific discussion for the approval of Macitentan Devatis 10 mg, film-coated tablets. The procedure was finalised on 4 June 2025. For information on changes after this date please refer to the 'steps taken after finalisation' at the end of this PAR.

List of abbreviations

ASMF	Active Substance Master File
CEP	Certificate of Suitability to the monographs of the European Pharmacopoeia
CHMP	Committee for Medicinal Products for Human Use
CMD(h)	Coordination group for Mutual recognition and Decentralised procedure for human medicinal products
CMS	Concerned Member State
EDMF	European Drug Master File
EDQM	European Directorate for the Quality of Medicines
EEA	European Economic Area
EMA	European Medicines Agency
ERA	Environmental Risk Assessment
ICH	International Conference of Harmonisation
MAH	Marketing Authorisation Holder
Ph.Eur.	European Pharmacopoeia
PL	Package Leaflet
RH	Relative Humidity
RMP	Risk Management Plan
RMS	Reference Member State
SmPC	Summary of Product Characteristics
TSE	Transmissible Spongiform Encephalopathy

I. INTRODUCTION

Based on the review of the quality, safety and efficacy data, the Member States have granted a marketing authorisation for Macitentan Devatis 10 mg, film-coated tablets, from Devatis GmbH.

The product is indicated:
Adults
as monotherapy or in combination, for the long-term treatment of pulmonary arterial hypertension (PAH) in adult patients of WHO Functional Class (FC) II to III (see section 5.1 of the SmPC).

Paediatric population
as monotherapy or in combination, for the long-term treatment of pulmonary arterial hypertension (PAH) in paediatric patients aged less than 18 years and bodyweight ≥40 kg with WHO Functional Class (FC) II to III (see section 5.1 of the SmPC).

A comprehensive description of the up-to-date indications and posology is given in the SmPC.

The marketing authorisation has been granted pursuant to Article 10(1) of Directive 2001/83/EC, which concerns a generic application.

In this decentralised procedure, essential similarity is proven between the new product and the innovator product Opsumit 10 mg, film-coated tablet, which has been registered by Janssen-Cilag International NV in the EEA via a centralised procedure (EU/1/13/893) since 20 December 2013.

The concerned member states (CMS) involved in this procedure were Austria, Denmark, Finland, Germany, Norway and Sweden.

Similarity assessment
According to Article 8(1) of Regulation (EC) No 141/2000, no marketing authorisation can be granted for a product similar to an orphan medicinal product for a period of ten years, when this concerns a similar medicinal product with the same therapeutic indication. A similarity assessment has been performed between Macitentan Devatis and Winrevair, which obtained orphan market exclusivity on 27 August 2024, based on designation EU/3/20/2369. The similarity assessment report was completed in 2024, concluding that the two products were not similar based on mechanism of action and principal molecular structural features, and that with reference to Article 8 of Regulation (EC) No. 141/2000, the existence of any market exclusivity for Winrevair in the treatment of pulmonary arterial hypertension, does not prevent the granting of the marketing authorisation of Macitentan Devatis 10 mg, film-coated tablets.

II. QUALITY ASPECTS

II.1 Introduction

Macitentan Devatis is a white to off-white, round, biconvex film-coated tablet. Each tablet contains 10 mg of macitentan as active substance.

The excipients are:
Tablet core: lactose monohydrate, microcrystalline cellulose, povidone K30, polysorbate 80, croscarmellose sodium, and magnesium stearate.
Film-coating: poly(vinyl alcohol), talc, titanium dioxide (E171), glycerol monocaprylocaprate (type I) and sodium lauryl sulphate.

The film-coated tablets are packed in polyvinyl chloride/ polychlorotrifluoroethylene-Aluminium (PVC/PCTFE-Al) blisters.

II.2 Drug Substance

The active substance is macitentan, an established active substance not described in the European Pharmacopoeia (Ph.Eur.). The active substance is a white to off-white powder and is insoluble in water. Macitentan shows polymorphism. For this product, the polymorphic form is routinely controlled in the active substance specification.

The Active Substance Master File (ASMF) procedure is used for the active substance. The main objective of the ASMF procedure, commonly known as the European Drug Master File (EDMF) procedure, is to allow valuable confidential intellectual property or 'know-how' of the manufacturer of the active substance (ASM) to be protected, while at the same time allowing the applicant or marketing authorisation holder (MAH) to take full responsibility for the medicinal product, the quality and quality control of the active substance. Competent Authorities/EMA thus have access to the complete information that is necessary to evaluate the suitability of the use of the active substance in the medicinal product.

Manufacturing process
The manufacturing process consists of three linear chemical stages with three chemical transformations as defined in ICH Q11, as well as a final purification stage. Adequate specifications have been adopted for starting materials, solvents and reagents. The active substance has been adequately characterised and the manufacturing process is described in sufficient detail.

Quality control of drug substance
The active substance specification has been established in-house by the MAH, with additional requirements for polymorphism, particle size distribution and microbiology. The specification

is considered adequate to control the quality and meets the requirements of various European guidelines.
Batch analytical data demonstrating compliance with this specification have been provided for three batches.

Stability of drug substance
Stability data on the active substance have been provided for three batches in accordance with applicable European guidelines. Based on the data submitted, a retest period could be granted of 60 months when stored under the stated conditions.

II.3 Medicinal Product

Pharmaceutical development
The product is an established pharmaceutical form and its development is adequately described, the choice of excipients is justified and their functions explained in accordance with the relevant European guidelines. Comparative dissolution at 3 pHs has been studied in support of bioequivalence. The QC dissolution method has been sufficiently justified. The dissolution profiles are considered similar on basis of the rapid dissolution (>85% for pH 6.8) or high f2 value (pH 4.5 and 1.2). The optimal composition and manufacturing process parameters have been adequately investigated. The pharmaceutical development of the product has been adequately performed.

Manufacturing process
The product is manufactured by a wet granulation process which consists of blending, granulation, lubrication, compression and film-coating. The manufacturing process has been validated according to relevant European/ICH guidelines. Process validation data on the product have been presented for three full-scaled batches in accordance with the relevant European guidelines.

Control of excipients
The excipients comply with Ph.Eur. and in-house (for film-coating solution) requirements. These specifications are acceptable.

Quality control of drug product
The finished product specifications are adequate to control the relevant parameters for the dosage form. The specification includes tests for description, dimensions, identity, hardness, water, assay, dissolution, content uniformity, degradation products and microbiology. Limits in the specification have been justified and are considered appropriate for adequate quality control of the product. An adequate nitrosamines risk evaluation report has been provided. No risk for presence of nitrosamines in the drug product was identified.

Satisfactory validation data for the analytical methods have been provided.

Batch analytical data from three batches from the proposed production site have been provided, demonstrating compliance with the specification.

Stability of drug product
Stability data on the product have been provided from three batches stored at 25°C/ 60% RH (18 months) and 40°C/75% RH (6 months) in accordance with applicable European guidelines. Photostability studies showed that the product is photostable. On basis of the data submitted, a shelf life was granted of 30 months. No specific storage conditions needed to be included in the SmPC or on the label.

Specific measures concerning the prevention of the transmission of animal spongiform encephalopathies
Scientific data and/or certificates of suitability issued by the EDQM for lactose monohydrate have been provided and compliance with the Note for Guidance on Minimising the Risk of Transmitting Animal Spongiform Encephalopathy Agents via medicinal products has been satisfactorily demonstrated.

II.4 Discussion on chemical, pharmaceutical and biological aspects

Based on the submitted dossier, the member states consider that Macitentan Devatis has a proven chemical-pharmaceutical quality. Sufficient controls have been laid down for the active substance and finished product.

No post-approval commitments were made.

III. NON-CLINICAL ASPECTS

III.1 Ecotoxicity/environmental risk assessment (ERA)

At the time of submission of this application, before 1st of September 2024, the revised ERA guideline (EMEA/CHMP/SWP/4447/00 Rev. 1- Corr.*) was not yet applicable. At the time of approval the conclusion for this medicinal product was:
Since Macitentan Devatis is intended for genericsubstitution, this will not lead to an increased exposure to the environment. An environmental risk assessment was therefore not deemed necessary.

III.2 Discussion on the non-clinical aspects

This product is a generic formulation of Opsumit which is available on the European market. Reference was made to the preclinical data obtained with the innovator product. A non-clinical overview on the pharmacology, pharmacokinetics and toxicology has been provided, which was based on up-to-date and adequate scientific literature. The overview justifies why there is no need to generate additional non-clinical pharmacology, pharmacokinetics and toxicology data. Therefore, the member states agreed that no further non-clinical studies are required.

IV. CLINICAL ASPECTS

IV.1 Introduction

Macitentan is a well-known active substance with established efficacy and tolerability. A clinical overview has been provided, which is based on scientific literature. The member states agreed that no further clinical studies are required, besides one bioequivalence study, which is discussed below.

IV.2 Pharmacokinetics

The MAH conducted a bioequivalence study in which the pharmacokinetic profile of the test product Macitentan Devatis 10 mg, film-coated tablets (Devatis GmbH, Germany) was compared with the pharmacokinetic profile of the reference product Opsumit 10 mg, film-coated tablets (Janssen-Cilag International NV, Belgium).

The choice of the reference product in the bioequivalence study has been justified by comparison of dissolution study results and composition. The formula and preparation of the bioequivalence batch was identical to the formula proposed for marketing.

The dissolution was investigated according to the EMA Bioequivalence guideline. The calculated f_2 similarity factor values were within criteria (>50%). An f_2 value between 50 and 100% suggests that the two dissolution profiles are similar.

Bioequivalence study C1B02624

Design

A balanced, open label, single-dose, randomised, two-period, two-treatment, two-sequence, crossover bioequivalence study was carried out under fasted conditions in 28 healthy male subjects, aged 19-44 years. Each subject received a single dose (10 mg) of one of the two macitentan formulations. The tablet was orally administered with 240 ml water after an overnight fasting of at least 8 hours. There were two dosing periods, separated by a washout period of 7 days.

Blood samples were collected pre-dose and at 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 16, 20, 24, 30, 36, 48, 72 and 96 hours after administration of the products.

The design of the study is acceptable.

Macitentan may be taken without reference to food intake. From the literature it is known that food does not interact with the absorption of macitentan. Therefore, a food interaction study is not deemed necessary. The bioequivalence study under fasting conditions is in accordance with CPMP/EWP/QWP/1401/98 Note for Guidance on the investigation of bioavailability and bioequivalence.

Analytical/statistical methods
The analytical method has been adequately validated and is considered acceptable for analysis of the plasma samples. The methods used in this study for the pharmacokinetic calculations and statistical evaluation are considered acceptable.

Results
One subject was withdrawn of the study due to protocol violation (positive for drugs of abuse) and one subject was withdrawn due to a mild adverse event (vomiting) after reference treatment. A total of 26 subjects completed the study and were eligible for pharmacokinetic analysis.

Table 1. Pharmacokinetic parameters (non-transformed values; arithmetic mean ± SD, t_{max} (median, range)) of macitentan, 10 mg under fasting conditions.

Treatment N=26	**AUC_{0-t} (ng.h/ml)**	**$AUC_{0-\infty}$ (ng.h/ml)**	**C_{max} (ng/ml)**	**t_{max} (h)**
Test	5398 ± 2132	5805 ± 2591	180 ± 53	13.0 (4.0 – 14.0)
Reference	4921 ± 2230	5283 ± 2589	160 ± 55	13.0 (4.0 – 13.0)
***Ratio (90% CI)**	1.12 (1.06 – 1.18)	-	1.14 (1.06 – 1.22)	-

$AUC_{0-\infty}$	Area under the plasma concentration-time curve from time zero to infinity
AUC_{0-t}	Area under the plasma concentration-time curve from time zero to t = 96 hours
C_{max}	Maximum plasma concentration
t_{max}	Time after administration when maximum plasma concentration occurs
CI	Confidence interval

**ln-transformed values*

Conclusion on bioequivalence study:
The 90% confidence intervals calculated for AUC_{0-t}, $AUC_{0-\infty}$ and C_{max} are within the bioequivalence acceptance range of 0.80 – 1.25. Based on the submitted bioequivalence study Macitentan Devatis is considered bioequivalent with Opsumit.

The MEB has been assured that the bioequivalence study has been conducted in accordance with acceptable standards of Good Clinical Practice (GCP, see Directive 2005/28/EC) and Good Laboratory Practice (GLP, see Directives 2004/9/EC and 2004/10/EC).

IV.3 Risk Management Plan

The MAH has submitted a risk management plan, in accordance with the requirements of Directive 2001/83/EC as amended, describing the pharmacovigilance activities and interventions designed to identify, characterise, prevent or minimise risks relating to Macitentan Devatis. At the time of approval, the most recent version of the RMP was version 0.2 dated 1 April 2025.

Table 2. Summary table of safety concerns as approved in RMP

Summary of safety concerns		FUQ/additional PhV	aRMM
Important identified risks	• Hepatotoxicity • Teratogenicity	• FUQ • -	• Patient Card • Patient Card
Important potential risks	None		
Missing information	None		

The member states agreed that routine pharmacovigilance activities are sufficient for the risks and areas of missing information.

At the time of approval of this product, it was considered that additional risk minimisation measures (including educational material) were necessary for the safe and effective use of the product.
The MAH shall ensure that in each Member State where Macitentan Devatis is marketed, all patients who are expected to use Macitentan Devatis are provided with the following educational material:

- Patient Card.

The Patient Card is aimed at increasing awareness about the identified risks of teratogenicity and hepatotoxicity during treatment with Macitentan Devatis.
The Patient Card for patients prescribed Macitentan Devatis should include the following key elements:

- That Macitentan Devatis is teratogenic in animals;
- That pregnant women must not take Macitentan Devatis;
- That women of childbearing potential must use reliable contraception;
- The need for monthly pregnancy tests;
- The need for regular monitoring of liver function because Macitentan Devatis has hepatotoxic potential.

The submitted patient card (part of the labelling) of Macitentan Devatis 10 mg is in line with the reference product Opsumit and is accepted. The summary of safety concerns are aligned to the innovator Opsumit. The RMP Macitentan Devatis 10 mg v0.2 with DLP and signed 2025-04-01 is in line with the reference product Opsumit and can be accepted.

IV.4 Discussion on the clinical aspects

For this authorisation, reference is made to the clinical studies and experience with the innovator product Opsumit. The MAH demonstrated through a bioequivalence study that the pharmacokinetic profile of the product is similar to the pharmacokinetic profile of this reference product. Risk management is adequately addressed. This generic medicinal product can be used instead of the reference product.

V. USER CONSULTATION

A user consultation with target patient groups on the package leaflet (PL) has been performed on the basis of a bridging report making reference to Opsumit 10 mg, film-coated tablets (EU/1/13/893) for content and Lenalidomide Devatis 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg and 25 mg hard capsules (NL/H/4989/001-007/DC) for layout. The bridging report submitted by the MAH has been found acceptable; bridging is justified for both content and layout of the leaflet.

VI. OVERALL CONCLUSION, BENEFIT/RISK ASSESSMENT AND RECOMMENDATION

Macitentan Devatis 10 mg, film-coated tablets have a proven chemical-pharmaceutical quality and is a generic form of Opsumit 10 mg, film-coated tablets. Opsumit is a well-known medicinal product with an established favourable efficacy and safety profile.

Bioequivalence has been shown to be in compliance with the requirements of European guidance documents.

The Board followed the advice of the assessors.

There was no discussion in the CMD(h). Agreement between member states was reached during a written procedure. The member states, on the basis of the data submitted, considered that essential similarity has been demonstrated for Macitentan Devatis with the reference product, and have therefore granted a marketing authorisation. The decentralised procedure was finalised with a positive outcome on 4 June 2025.

STEPS TAKEN AFTER THE FINALISATION OF THE INITIAL PROCEDURE - SUMMARY

Procedure number	Scope	Product Information affected	Date of end of procedure	Approval/ non approval	Summary/ Justification for refuse
NL/H/6090/001 /IB/001	Change in immediate packaging of the finished product - Change in qualitative and quantitative composition of an approved container - Solid pharmaceutical forms.	Yes	25-3-2026	Approved	N/A