## biohaven



CHMP Chair, Dr. Bruno Sepodes European Medicines Agency Domenico Scarlattilaan 6 1083 HS Amsterdam The Netherlands

Date: 24 March 2025

Subject: Withdrawal of Dazluma™ (troriluzole hydrochloride) 89mg & 125mg hard capsules EMEA/H/C/006068/0000

Dear CHMP Chair, CHMP Co-Chair,

I would like to inform you that, at this point in time, Biohaven has taken the decision to withdraw the application for Marketing Authorisation of Dazluma™ (troriluzole hydrochloride) 89mg & 125mg hard capsules which is intended to be used for the treatment of adult patients with spinocerebellar ataxia (SCA).

This withdrawal decision is based upon the CHMP feedback indicating that the Committee will not be able to conclude on a new active status (NAS) for troriluzole due to insufficient data. NAS is an important designation recognizing and incentivizing development innovation, validating the differentiation of a new medicinal product for patients. Biohaven is committed to expeditiously providing appropriate data and/or argumentation to CHMP in accordance with the reflection paper EMA/651649/2010 given the evidence that warrants granting NAS, in the spirit in which the designation was intended. Biohaven reserves the right to pursue NAS in the EU, and we plan to generate data within 3 months to work with CHMP on steps towards marketing authorization for our patients.

Troriluzole is a novel, rationally designed third-generation tripeptide prodrug of riluzole, developed over 6 years of chemistry optimization to improve bioavailability, pharmacokinetics, safety, dosing, and the undesirable attributes that limit broader clinical application of riluzole. Troriluzole has predictable, consistent higher exposure levels, bypasses first pass metabolism reducing liver burden and allowing safe delivery of higher concentrations of the active metabolite. Troriluzole has no negative food effects and is administered orally as a once daily capsule with good oral palatability. The unique properties of troriluzole offer enhanced safety and a dosing regimen that provides ease of administration in a fragile SCA patient population that will require long term treatment. The novelty of troriluzole has been recognized by multiple issued patents globally.

SCA is a rare, autosomal-dominant, heterogenous neurodegenerative disease characterized primarily by atrophy of the cerebellum. The disease course varies across and within the multiple ultra rare genotypes that comprise SCA, and it is relentlessly progressive leading to clinical deterioration of motor function, dysarthria, gait imbalance with frequent falling and premature death. Additionally, patients experience a range of additional debilitating symptoms, including postural or kinetic tremor, cognitive impairment, dysphagia, and oculomotor dysfunction. There are no approved pharmacotherapies that have demonstrated efficacy in the treatment of patients with SCA.

The troriluzole clinical program represents the largest dataset in SCA and spans over 8 years of development to provide evidence of long-term treatment effectiveness on slowing disease progression in the context of a rare progressive disease population.

There are no consequences of the withdrawal on ongoing clinical trials or compassionate use programmes. Biohaven remains fully committed to a path forward for the development of troriluzole as a new active substance that is an effective, safe and well tolerated treatment option for patients with SCA.

We reserve the right to make further Marketing Authorisation Application submissions at a future date in this or other therapeutic indication(s). Biohaven remains committed to serving the best interest of our patients and will work towards Marketing Authorization as expeditiously as possible.

I agree for this letter to be published on the EMA website.

