C.6	Delamanid – removal of age restriction – EML and EMLc		
Draft recommo	endation	☑ Recommended ☐ Not recommended Justification:	
Does the proposed medicine address a relevant public health need?		 ✓ Yes ☐ No ☐ Not applicable Comments: 	
Does adequate evidence exist for the efficacy/effectiveness of the medicine for the proposed indication? (this may be evidence included in the application, and/or additional evidence identified during the review process)		 Yes □ No □ Not applicable Comments: 	
safety/harms a proposed med (this may be evapplication, an	e evidence exist for the associated with the icine? Vidence included in the d/or additional evidence ing the review process)	☐ Yes ☑ No ☐ Not applicable Comments: Limited data suggesting possible harm	
	adverse effects of at may require special	 ✓ Yes ☐ No ☐ Not applicable Comments: Neuropsychiatric, possible QTc prolongation 	
the safe, effect of the medicine (e.g. laboratory	y diagnostic and/or ts, specialized training for	 ✓ Yes ☐ No ☐ Not applicable Comments: Adequate monitoring of adverse events 	

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Are there any issues regarding cost, cost- effectiveness, affordability and/or access for the medicine in different settings?	☐ Yes ☑ No ☐ Not applicable Comments:
Are there any issues regarding the registration of the medicine by national regulatory authorities? (e.g. accelerated approval, lack of regulatory approval, off-label indication)	☐ Yes ☑ No ☐ Not applicable Comments:
Is the proposed medicine recommended for use in a current WHO guideline? (refer to: https://www.who.int/publications/who-guidelines)	 Yes □ No □ Not applicable Comments: