

Postcards from the Edge: Regulatory Reflections

"There is no point at which you can say, 'Well, I'm successful now. I might as well take a nap.'" Carrie Fischer

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Outline

- Postcard 1: Potency reference material qualification
- Postcard 2: Measuring things that change
- Postcard 3: Do you know what you are measuring
- Postcard 4: Staying in control
- Postcard 5: PMCs





Postcard 1: In for the long haul – potency reference material qualification.

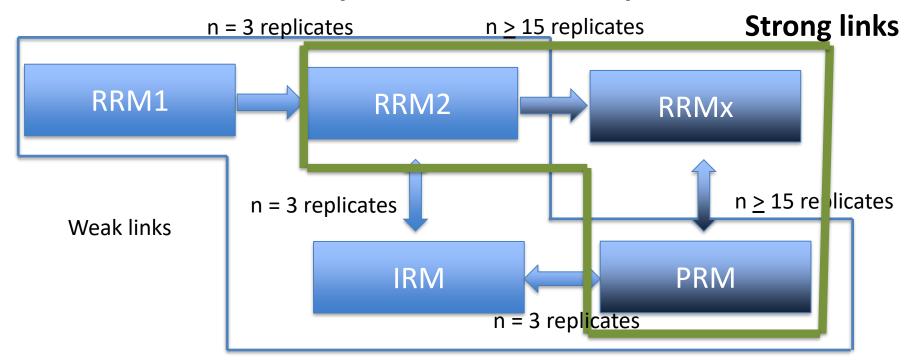
Colorado

www.fda.gov



- Reference material (RM) potency for multiple RMs initially established using 3 replicates
- FDA communicated that would not be sufficient to maintain a link between the potency of material used in clinical and analytical studies and the commercial RM
- Conclusion: The Sponsor shifted to qualifying RM using 15 replicates thereby maintaining a link between development data and commercial RM





RRS – research reference material

IRM – interim reference material

PRM – primary reference material for commercial product



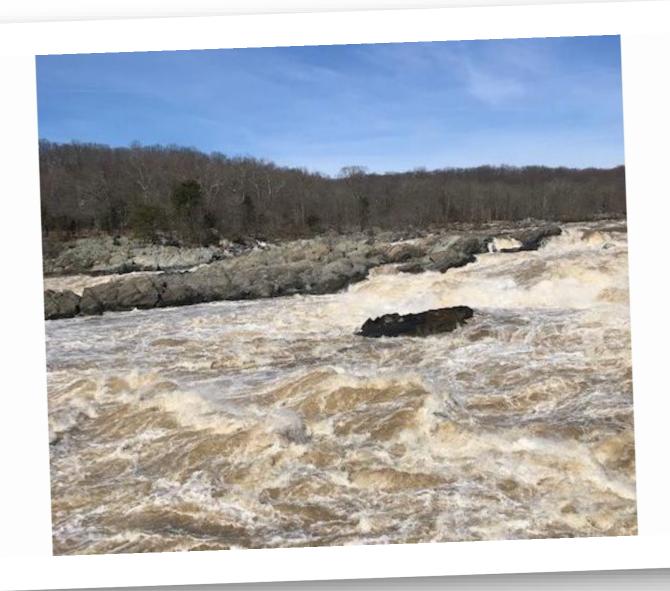
- Potency qualified for 2 clinical RM and the proposed commercial RM using a single independent dilution of RM tested on 4 plates
- RM1=104% relative potency; RM2=112% relative potency; RM3=80% relative potency
- Is the potency of the 3 reference materials the same or different?



- During the BLA review cycle the Sponsor was asked to requalify the reference materials and then recalculate the potency of the clinical lots
- RM1, RM2, and RM3 were each tested a minimum of 9 times.

- RM1 activity was designated to be 100% because it was used in the clinical trials.
- RM3 (commercial) had a relative potency of 112% against RM1.
- RM2 (clinical not used) had a relative potency of 124% against RM1.
- Conclusion: The Sponsor updated their RM qualification program to include at least 9 independent assessments of potency and the potency of RM3 was established as 112%

Postcard 2: A trip down the river – measuring things that change



Great Falls National Park, MD



- Prodrug protein chemically conjugated to 4 8 small molecule inhibitors
- Inhibitors are designed to be released nonenzymatically in the blood over time, T1/2 = 20 h
- Prodrug is inactive
- Complexity the inhibitors are released over time during the potency assay. Therefore, product potency is constantly changing during the assay.



Phase 1 Assay

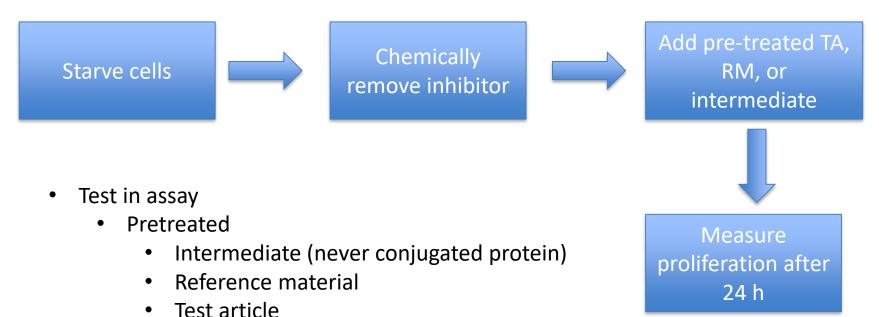


Prior to phase 3 the Sponsor proposed a new assay because they found the phase 1 assay lacked robustness and had high inter-assay variability

TA = Test article RM = Reference material



Proposed Phase 3 Assay





- Sponsor optimized the pretreatment process and characterized the extent of inhibitor removal by RP-HPLC, SDS-PAGE, peptide mapping, LC/MS, bioassay
- FDA questioned the relevance of this assay since the molecule was designed to lose the inhibitor over time and asked how the consistent release of inhibitor would be controlled



- Most recent communication from the Sponsor is that they further optimized the phase 1 assay and now have acceptable robustness and precision
- FDA hasn't seen the data yet
- To be continued....

Postcard 3: Do you know what you are measuring?



Mount Rainier, Washington



Do You Know What You Are Measuring?

- Drug is a biologic that is chemically conjugated to a payload.
- The biologic binds to a marker expressed on cancer cells
- The drug is designed to release the payload nonenzymatically both in the serum and in the cell for both targeted and by-stander killing
- Potency assay is a cytotoxicity assay using a cell line that expresses the marker



Do You Know What You Are Measuring?

- Oxidation of the protein significantly reduced binding to the marker in a binding assay but potency was not reduced in the cytotoxicity assay
- FDA expressed concerns that the cytotoxicity assay does not distinguish between targeted and bystander killing
- The Sponsor is developing a multi-assay control strategy
- To be continued...

Postcard 4: Staying in control



Hoover Dam, Nevada



Staying In Control

- Reference material unexpectedly failed EC50 acceptance criteria of 15 – 35 ng/ml during requalification
- EC50 acceptance criteria were set using EC50 data from multiple batches rather than multiple replicates of a single batch
- EC50 acceptance criteria were recalculated to be 14 25 ng/ml using data from hundreds of runs with the RM
- Results from 9 independent runs are sufficient for reference material requalification.
- Conclusion 1: RM EC50 acceptance criteria were not set correctly. RM potency acceptance criteria should not include manufacturing variability.



Staying In Control

- Reference material EC50 was 13 ng/ml at next requalification time point
- During routine assay performance EC50 is calculated from a single run and acceptance criteria range is 5 – 35 ng/ml
- After extensive investigation the Sponsor determined that the assay had changed but the reference material was acceptable



Staying In Control

- The Sponsor introduced an independent quality control to help ensure assay suitability
- Conclusion 2: The assay initially lacked a critical control



Postcard 5: Post marketing commitments



Post Marketing Commitments



- Reviewed PMCs for 29 BLAs approved between January 1, 2018 and April 30 2019
- Potency assay related PMCs:
 - Develop a control strategy for effector function (2 applications)
 - Assays to monitor effector function should be included in the product control strategy when effector function cannot be eliminated as a mechanism of efficacy for the drug
 - Confirm the suitability of the assay or acceptance criteria (2 applications)

Post Marketing Commitments



- Potency assay related PMCs continued:
 - Implement an independent quality control (1 application)
 - Explore alternative assays (3 applications)
 - Develop a non-animal based assay
 - Further evaluate structure function relationships to ensure all MOA were identified
 - Add a potency assay to monitor a secondary MOA

Conclusions



- Reference material potency should be established using a sufficient number of independent replicates to ensure accurate potency assessment
- RM potency acceptance criteria should not include manufacturing variability
- Potency assays should evaluate the mechanism of action of the drug
- Multiple assays may be needed when there are multiple mechanisms of action
- System suitability controls are critical for identifying changes to assay performance



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