

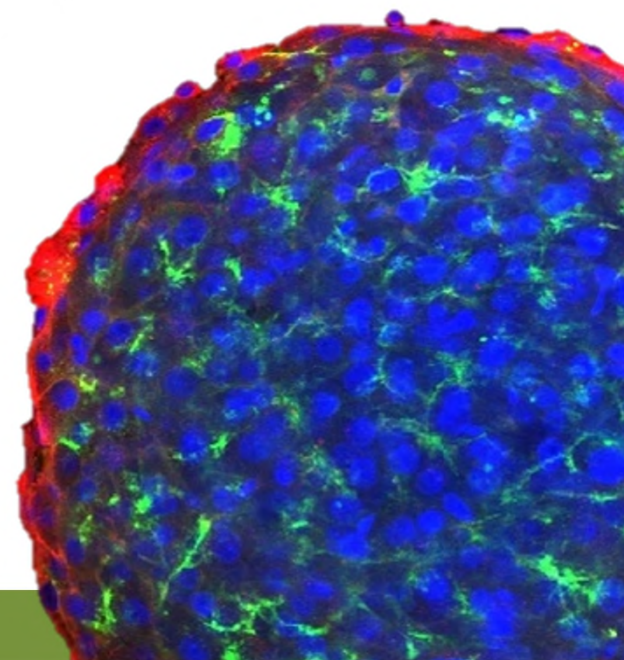
Advancing the toxicology toolbox using predictive, human in-vitro 3D models

Predictive Toxicology Roadmap Hearing

Jan Lichtenberg, CEO and Co-Founder

jan.lichtenberg@insphero.com

September 12, 2018



In-vitro liver models: State of the art

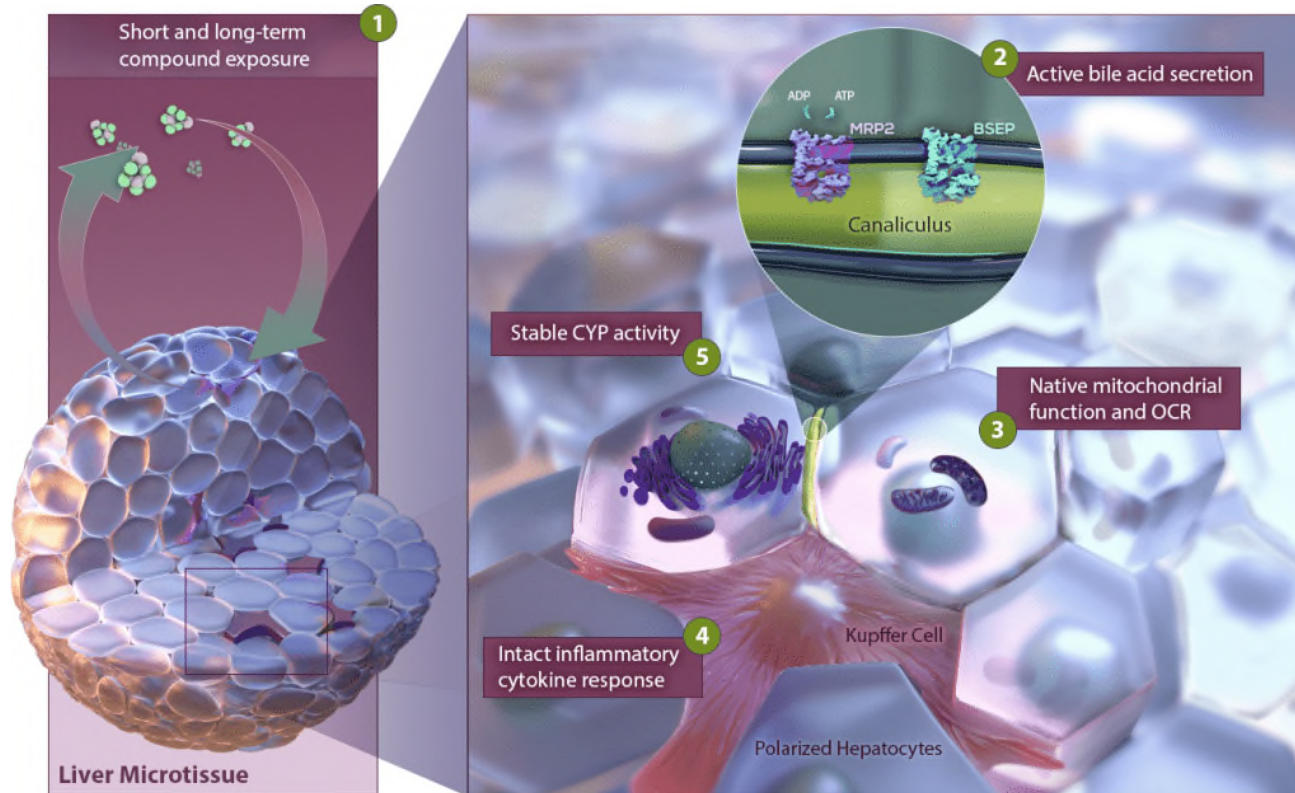


- Wide variety of technologies
 - Scaffold-free and gel-based 3D liver microtissues
 - Co-cultures (multiple donors, non-parenchymal cells)
 - Primary cells, IPS cells
 - Scalable up to 384-well format
- Substantial achievements
 - 2x improvement of sensitivity for liver-toxic compounds
 - No compromise on specificity
 - Long-term, multiple dose treatments
 - Toxic effect on diseased liver microtissues (inflammation, steatosis)

Industry-grade, robust and validated liver toxicology models are readily available



InSphero's 3D InSight™ Liver Microtissues



Substantial validation:

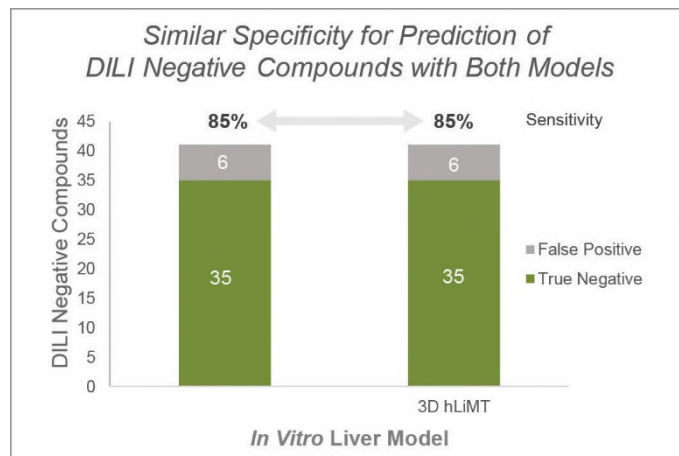
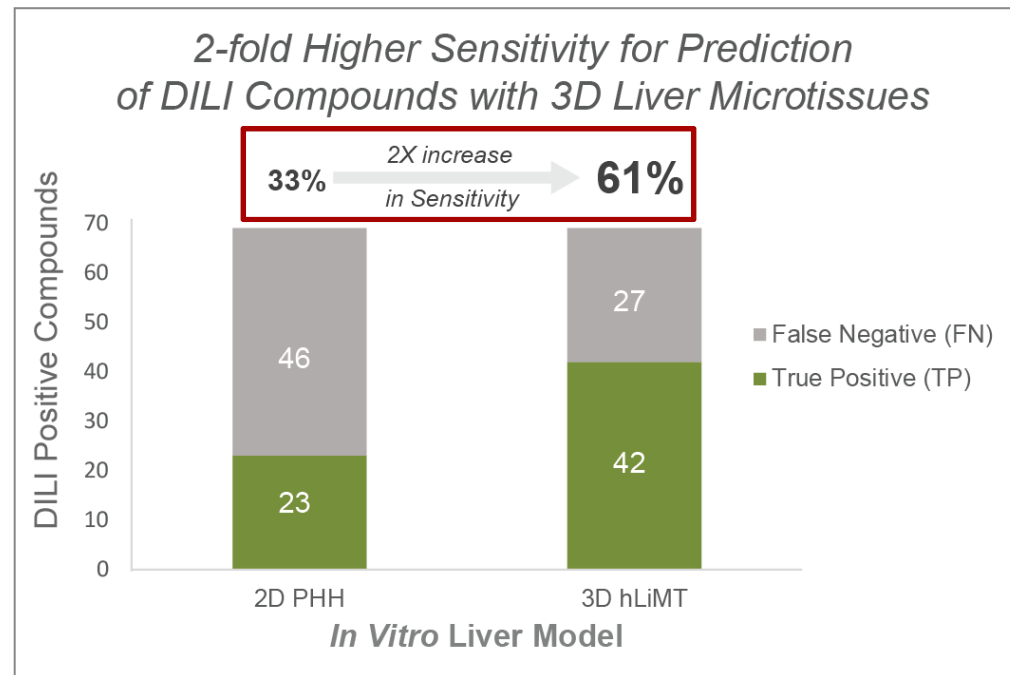
- **DILI prediction**
Proctor et al (2017) Arch Toxicol
- **Mechanistic toxicology**
Paech et al (2017) Arch Toxicol
- **Nanotoxicology**
Kermanizadeh et al (2014) PFT

Other models:
 Ascendance (Hepregen)
 CN Bio
 Organovo
 Hurel

Success study: Genentech and AstraZeneca



- **3D InSight™ Liver Tissues were 2-fold more sensitive** in identifying known hepatotoxicants in comparison to 2D
- **Specificity for prediction of non-DILI drugs remained very high (>85%),** even after 14 days of compound exposure



Arch Toxicol
DOI 10.1007/s00204-017-2002-1

IN VITRO SYSTEMS

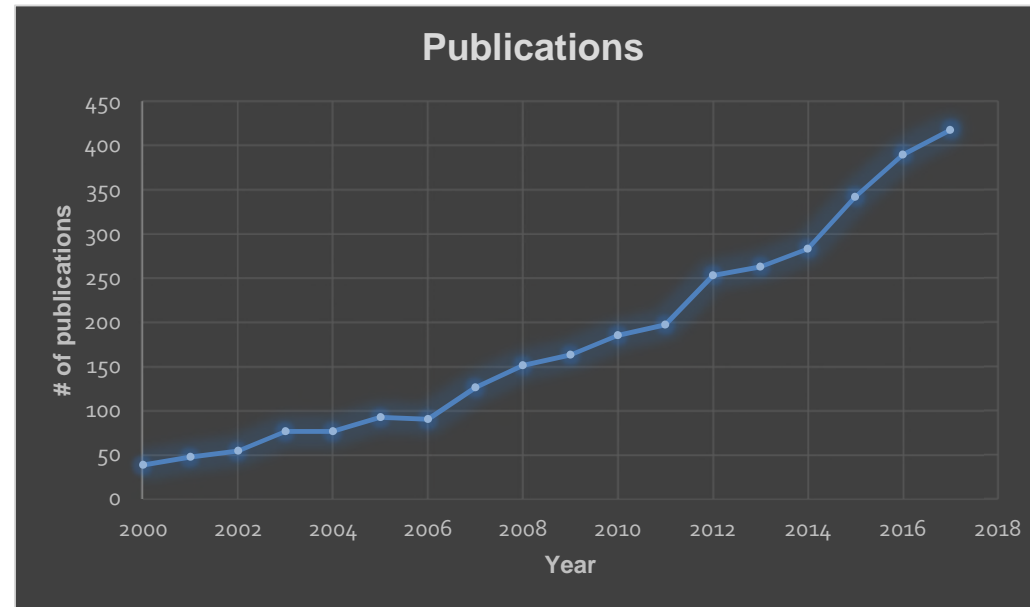
Utility of spherical human liver microtissues for prediction of clinical drug-induced liver injury

William R. Proctor¹ · Alison J. Foster^{2,4} · Jennifer Vogt¹ · Claire Summers^{2,4} · Brian Middleton^{3,4} · Mark A. Pilling^{3,4} · Daniel Shienson⁵ · Monika Kijanska⁶ · Simon Ströbel⁶ · Jens M. Kelm⁶ · Paul Morgan^{2,4} · Simon Messner⁶ · Dominic Williams^{2,4}

In-vitro liver models: Adoption



- Rapid increase of PubMed publication on 3D liver models



- But: Adoption in the pharmaceutical/biotech environment is still low
 - An estimated 20% of the top 50 pharmaceutical companies used 3D liver models for toxicology testing routinely

Obstacles: Characterization/validation



- Characterization not comparable between models
- No agreed validation guidelines
 - Compound sets
 - End points
 - Exposure times
 - Clinical reference frame
- Acceptance and rejection criteria for truly predictive models remain undefined



Obstacles: Uncertain assay parameters



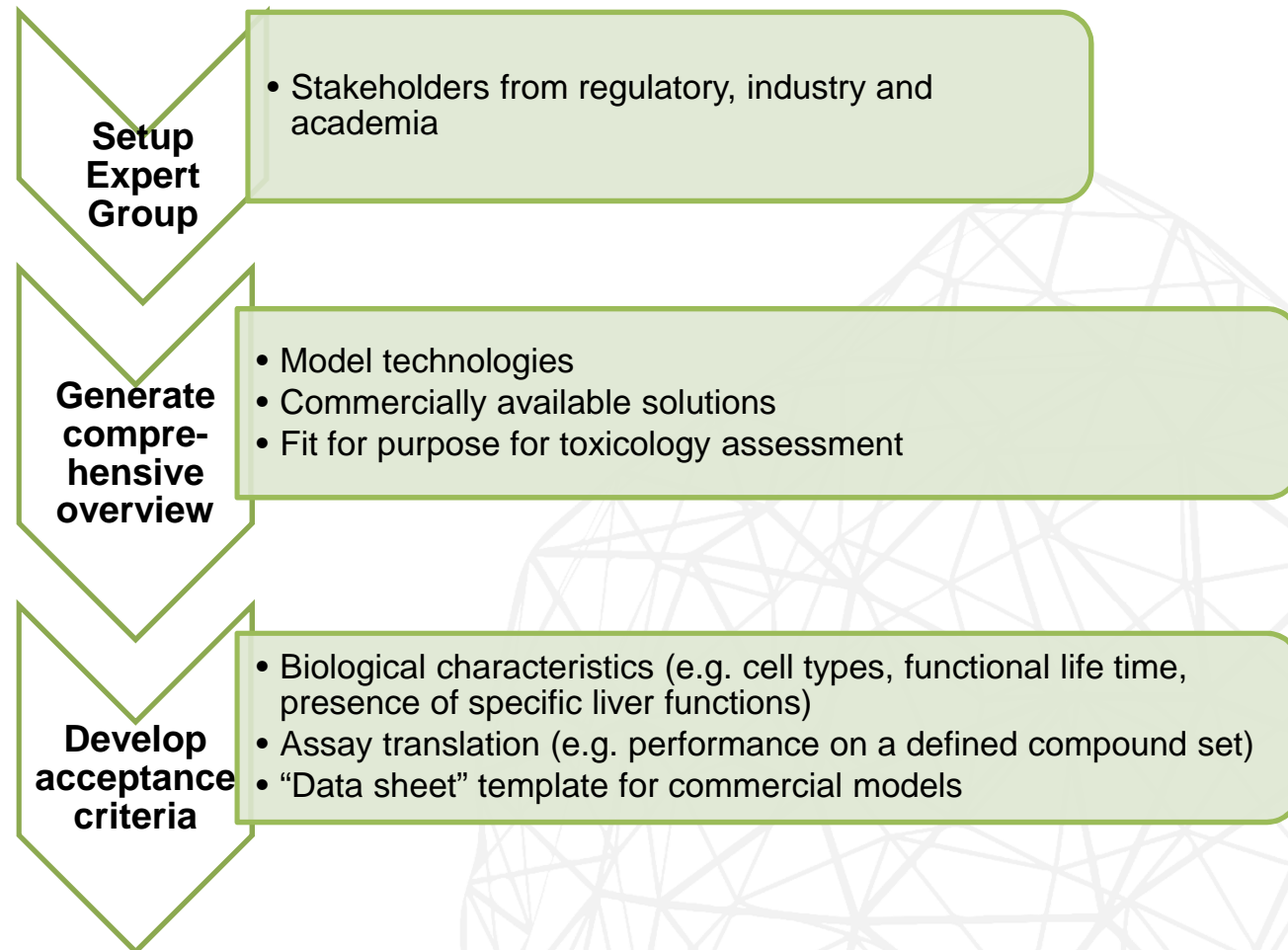
- Advanced models require agreement on more assay parameters than classical tools
 - Cell types
 - Tissue size
 - Medium conditions
 - Exposure time
 - Number of medium exchanges and re-dosings
 - Read outs and end points
 - Controls
 - Reference compounds



Predictive Toxicology Roadmap Suggestions I



- Developing model- and vendor-independent acceptance criteria




Roadmap parts D and E, plus C

“Data sheet” for liver models




- Objective: Provide comparative performance data in a standardized, easy-to-use document
- Comparable to electronic components


BC546/547/548/549/550

BC546/547/548/549/550

Switching and Applications

- High Voltage: BC546, $V_{CE0}=65V$
- Low Noise: BC549, BC550
- Complement to BC556 ... BC560



TO-92
1. Collector 2. Base 3. Emitter

NPN Epitaxial Silicon Transistor

Absolute Maximum Ratings $T_a=25^{\circ}C$ unless otherwise noted

Symbol	Parameter	Value	Units
V_{CB0}	Collector-Base Voltage : BC546	80	V
	: BC547/550	50	V
	: BC548/549	30	V
V_{CE0}	Collector-Emitter Voltage : BC546	65	V
	: BC547/550	45	V
	: BC548/549	30	V
V_{EB0}	Emitter-Base Voltage : BC546/547	6	V
	: BC548/549/550	5	V
I_C	Collector Current (DC)	100	mA
P_C	Collector Power Dissipation	500	mW
T_J	Junction Temperature	150	$^{\circ}C$
T_{STG}	Storage Temperature	-65 - 150	$^{\circ}C$

Electrical Characteristics $T_a=25^{\circ}C$ unless otherwise noted

Symbol	Parameter	Test Condition	Min.	Typ.	Max.	Units	
I_{C0}	Collector Cut-off Current	$V_{CE}=30V, I_B=0$			15	nA	
h_{FE}	DC Current Gain	$V_{CE}=5V, I_C=2mA$	110		800		
$V_{CE(sat)}$	Collector-Emitter Saturation Voltage	$I_C=10mA, I_B=0.5mA$		90	250	mV	
		$I_C=100mA, I_B=5mA$		200	600	mV	
$V_{BE(sat)}$	Base-Emitter Saturation Voltage	$I_C=10mA, I_B=0.5mA$		700		mV	
		$I_C=100mA, I_B=5mA$		900		mV	
$V_{BE(on)}$	Base-Emitter On Voltage	$V_{CE}=5V, I_C=2mA$	580	660	700	mV	
		$V_{CE}=5V, I_C=10mA$			720	mV	
f_T	Current Gain Bandwidth Product	$V_{CE}=5V, I_C=10mA, f=100MHz$		300		MHz	
C_{ob}	Output Capacitance	$V_{CE}=10V, I_C=0, f=1MHz$		3.5	6	pF	
C_{ib}	Input Capacitance	$V_{BE}=0.5V, I_C=0, f=1MHz$		9		pF	
NF	Noise Figure	: BC546/547/548	$V_{CE}=5V, I_C=200\mu A$		2	10	dB
		: BC549/550	$f=1KHz, R_G=2K\Omega$		1.2	4	dB
		: BC549	$V_{CE}=5V, I_C=200\mu A$		1.4	4	dB
		: BC550	$R_G=2K\Omega, f=30-15000MHz$		1.4	3	dB

h_{FE} Classification

Classification	A	B	C
h_{FE}	110 - 220	200 - 450	420 - 800

60002 Fairchild Semiconductor Corporation
Rev. A0, August 2002

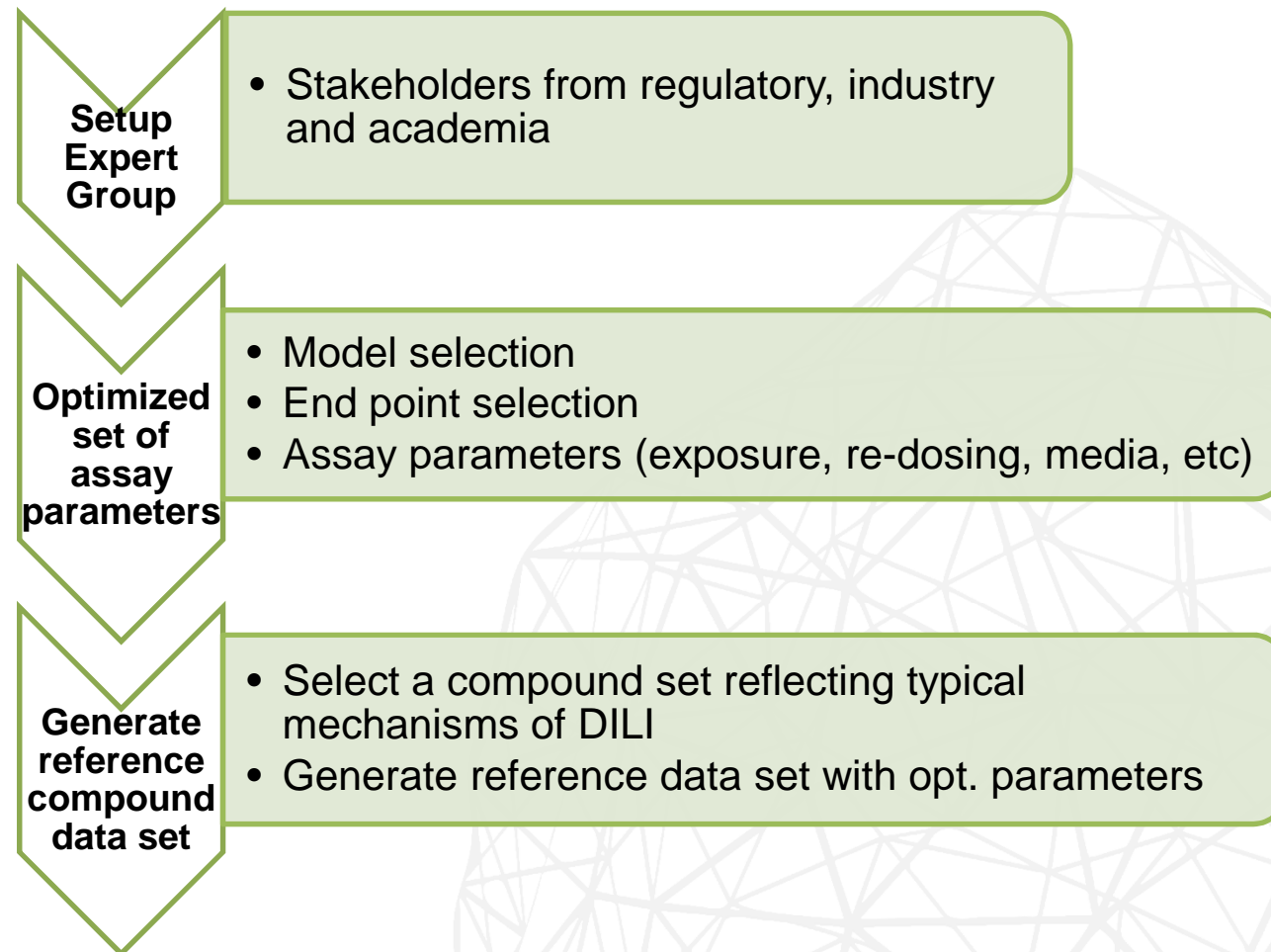
www.insphero.com | InSphero for FDA Hearing, Sep 12, 2018 | Copyright InSphero, Inc

9

Predictive Toxicology Roadmap Suggestions II



- Developing model-specific assay guidance



Roadmap parts D and E, plus C



Thank You