

FDA's Role In Building the ID NGS Diagnostic Toolkit

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CDRH/OIR



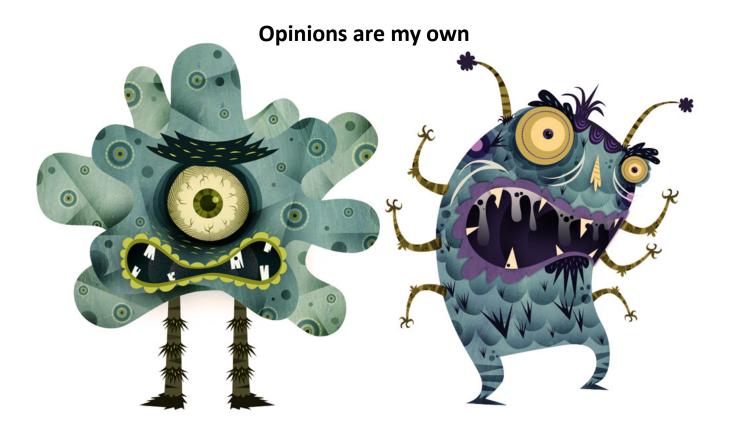
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Disclaimer



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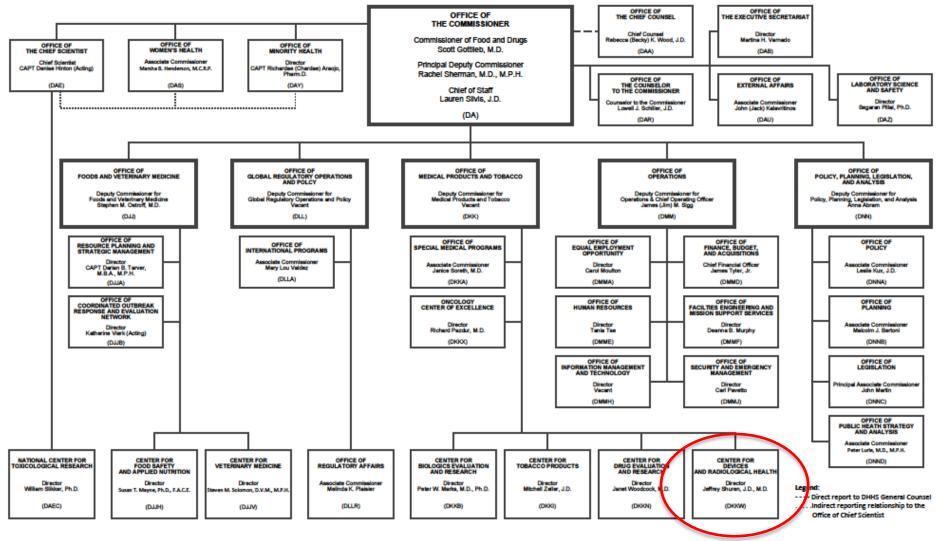


Organizational Chart

FDA

FOOD AND DRUG ADMINISTRATION

Approved by the FDA Reorganization Coordinator & Principal Delegation Control Officer 25 September 2017



FDA White Oak Campus





Resources For You





In Vitro Diagnostic Devices



Definition:

Reagents, instruments, and systems intended for use in the diagnosis of disease or other conditions, including a determination of the state of health, in order to cure, mitigate, treat, or prevent disease or its sequelae. ... for use in the collection, preparation, and examination of specimens from the human body. [21 CFR 809.3]

US FDA Regulated Uses:

- Detection and Diagnosis
- Screening
- First Response
- Not Environmental Screening

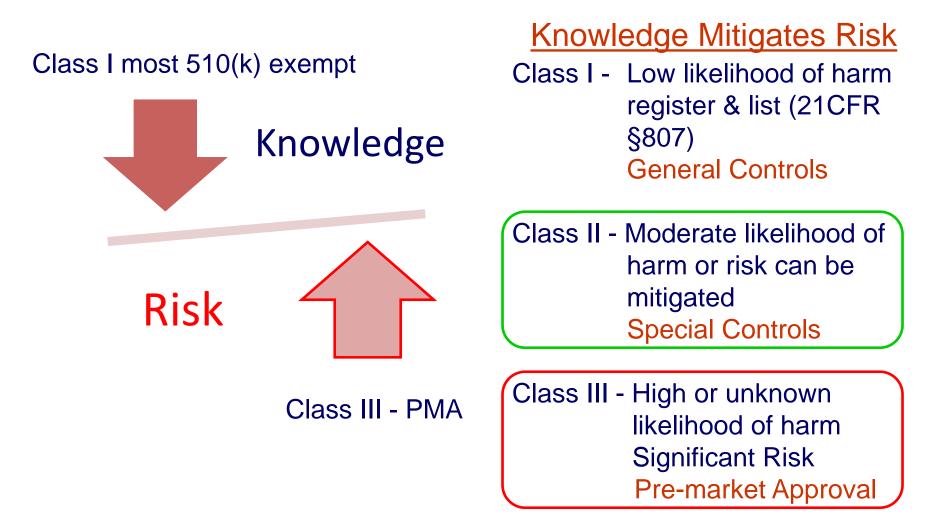
Device Classification



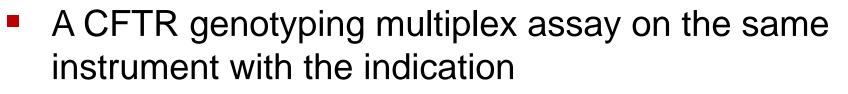
A device should be placed in the lowest class whose level of control will provide reasonable assurance of safety and effectiveness.

Risk Based Regulation of IVDs





Risk Dependent on Intended Use Different Use, Same Test



✓ for aid in diagnosis →510(k)

✓ for fetal screening →PMA

A breast cancer assay to be used
 ✓ for screening, diagnosis →PMA
 ✓ for prognosis in already diagnosed patients →510(k)

FDA

ID NGS Draft Guidance



There is no FDA cleared NGS system for sequencing of microbial genomic DNA for identification of microbial targets or detection of virulence or resistance genes.



https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/UCM500441.pdf

FDA Current Thinking



NGS Technologies

Targeted (amplicon, bioinformatics)

- Scope limited to defined regions that target a specific organism(s), gene(s) or marker(s).
- Targets are selected *a priori* by any lab or bioinformatics method (e.g., amplicon sequencing or a k-mer signature database) based on the diagnostic devices intended use.

Hypothesis-Free (whole genome, shotgun)

- No *a priori* knowledge of targets.
- Generally can identify all constituents (e.g., organism(s), gene(s) or marker(s), microbiota, human background, and contaminants) in a sample.

Sample Applications

Single Target (Pathogen, Gene, Marker)

Pathogen/Marker Panel

Gene Panel (16S)

Metagenomics

Novel and Emerging Pathogens

De Novo Regulatory Pathway



The De Novo process provides a pathway to classify novel medical devices for which <u>general controls</u> alone, or general and <u>special controls</u>, provide reasonable assurance of safety and effectiveness for the intended use, but for which there is no legally marketed <u>predicate device</u>. De Novo classification is a risk-based classification process.

There are two options for when a sponsor can submit a De Novo request for the FDA to make a **risk-based evaluation for classification of the device into class I or II.**

- Option 1: After receiving a high-level not substantially equivalent (NSE) determination (i.e., new intended use and/or different technological characteristics that raise different questions of safety and effectiveness) in response to a 510(k) submission.
- Option 2: Upon the sponsor's determination that there is no legally marketed device upon which to base a determination of substantial equivalence (therefore without first submitting a 510(k) and receiving a high-level NSE determination).

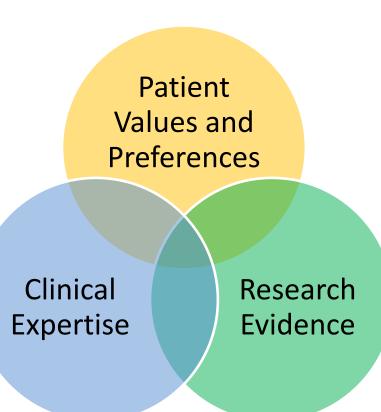
Prior to submitting a De Novo request, it is recommended that you consider submitting a <u>pre-submission (pre-sub)</u>to obtain feedback from the appropriate premarket review division.

<u>De Novo Classification Process (Evaluation of Automatic Class III Designation) - Guidance</u> for Industry and Food and Drug Administration Staff (PDF - 139KB)



Risk-Based Evaluation

- Real clinical samples where feasible
 - Prevalence of analyte is low?
 Consult with FDA about alternative sample types
- Prospective or retrospective evaluation
 - Comparison to a reference method
 - Comparison to a predicate device
 - Comparison to a clinical outcome
- In-Silico evaluation
 - FDA-ARGOS Reference-Grade Genomes (Bioproject 231221)
 - Mixed Microbial Reference Material



ID NGS Diagnostic Toolkit Needs



- ID NGS Diagnostic Assay
- Tools to support regulatory review
 - <u>FDA-ARGOS Reference-Grade Genomes</u> for regulatory use to enable sponsor to perform in-silico validation of claims
 - Mixed Microbial Reference Materials that sufficiently challenge the entire ID NGS Diagnostic Assay workflow
 - Ideally cell-based
 - Performance for assay's intended use

FDA Tools for ID NGS Dx



FDA-ARGOS Database

:microbial reference genomes for regulatory use

- ✓ More flexible regulatory pathway
 - Enable In-silico analytical and clinical validation
 - Reduce testing burden
- ✓ Reference database

Interagency ID NGS SME Working Group

- : team of NGS agency-wide subject matter experts
- ✓ ID NGS Dx Advisory Board
- ✓ <u>Consensus</u> FDA-ARGOS genome vetting
- ✓ Keep current on state of the art
- ✓ Tackle open questions (i.e. sens/spec)
- NGS Reference Material

Reference Genomes For Regulatory Use



Support in-silico analytical and clinical validation

- A. Identified by orthogonal reference method
- B. Sequenced and de-novo assembled using 2 sequencing methodologies
- C. High depth of sequencing coverage
- D. Minimum of 20X over 95 percent of the assembled and polished core genome
- E. Taxonomy-specific ANI thresholds that are sufficient for identification
- F. Placed within a pre-established phylogenetic tree
- G. Sample specific metadata, raw reads, assemblies, annotation and details of the bioinformatics pipeline are available



FDA dAtabase for Reference Grade micrObial Sequences (FDA-ARGOS)

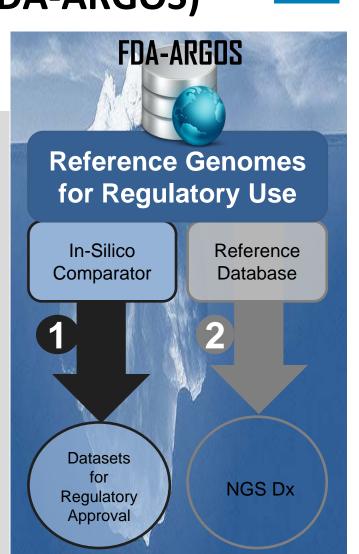




UNIVERSITY of MARYLAND SCHOOL OF MEDICINE INSTITUTE FOR GENOME SCIENCES

Government-Academic-Clinical Partnership

- In May 2014, the FDA and collaborators established FDA-ARGOS (<u>www.fda.gov/argos</u>)
- With funding support from FDA's Office of Counterterrorism and Emerging Threats (OCET) and DoD, the FDA-ARGOS team are initially collecting and sequencing 2000 microbes that include biothreat microorganisms, common clinical pathogens and closely related species.
- Currently, FDA-ARGOS microbial genomes are generated in 3 phases.
 - Phase 1 entails collection of a previously identified microbe and nucleic acid extraction from government, academic and clinical collaborators (>30).
 - Phase 2, the microbial nucleic acids are sequenced and de novo assembled using Illumina and Pac Bio sequencing platforms at the Institute for Genome Sciences at the University of Maryland (UMD-IGS).
 - Phase 3, the assembled genomes are vetted by an ID-NGS subject matter expert working group consisting of FDA personnel and collaborators and the data are deposited in **NCBI** databases.



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FDA dAtabase for Reference Grade micrObial Sequences (FDA-ARGOS)





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Landing page for FDA-ARGOS information directly from GenBank and also linked to from our FDA website. <u>https://www.ncbi.nlm.nih.gov/bioproject/?term=FDA-ARGOS</u> (NCBI BioProject **231221**) >> To get all associated genbank entries, select the Nucleotide database and enter this search term: '231221[BioProject]'

GenBank records (annotations, not RefSeq):

https://www.ncbi.nlm.nih.go v/nuccore?term=231221%5B BioProject%5D

BioSamples:

https://www.ncbi.nlm.nih.go v/biosample?Db=biosample &DbFrom=bioproject&Cmd= Link&LinkName=bioproject biosample&LinkReadableNa me=BioSample&ordinalpos= 1&ldsFromResult=231221

Assemblies:

https://www.ncbi.nlm.nih.go v/assembly?LinkName=biopr oject assembly_all&from_ui d=231221

Raw reads:

https://www.ncbi.nlm.nih.go v/sra?linkname=bioproject_s ra_all&from_uid=231221

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	 US Food and Drug Administration University of Maryland School of Med 	icine institute for Genome	Sciences (IGB) - sequencing center			
NCBI Links	NCBI Pathogen Detection				Related Resources	
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- American Type Culture Collection/ BEI
- Bernard Nocht Institute for Tropical Medicine, Germany
- Biodefense and Emerging Infections Research Repository
- British Columbia Centre for Disease Control (BCCDC)
- Children's National Medical Center
- Defense Threat Reduction Agency (DTRA)
- George Washington University
- Joint Program Executive Office for Chemical and Biological Defense (JPEO-CBD)
- Lawrence Livermore National Lab (LLNL)
 - Los Alamos National Lab (LANL)
- Mayo Clinic

- National Biodefense Analysis and Countermeasures Center
- National Institute of Allergy and Infectious Diseases (NIH-NIAID)
- New York State Wadsworth Laboratories
- Public Health Agency Canada (PHAC)
- Public Health England (PHE)
- Rockefeller University
- Rutgers University
- Stanford University Medical Center
- University of California, San Francisco (UCSF)
- University of Colorado Denver
- University of Ibadan, Nigeria
- University of Louisville
- University of Michigan
- University of North Carolina at Chapel Hill
- University of Texas Medical Branch (UTMB)
- □ University of Washington School of Medicine
- U.S. Army Edgewood Chemical Biological Center (ECBC)
- U.S. Army Medical Research Institute for Infectious Diseases (USAMRIID)
- U.S. Food and Drug Administration
 - Weill Cornell Medicine

In-Silico Comparator Example



DoD/USAMRIID Collaboration

- Sequencing-based diagnostic device
- Generate FDA-ARGOS
 Reference Genomes
- Datasets for Regulatory Approval

> Enable In-Silico Data Analysis

Endemic African Diseases

Chikungunya virus Crimean-Congo hemorrhagic fever virus dengue virus serotype 1 dengue virus serotype 2 dengue virus serotype 3 dengue virus serotype 4 Ebola virus Lassa virus Marburg virus (Angola) Marburg virus (Ci67) Plasmodium falciparum **Rift Valley fever virus** West Nile virus Yellow fever virus Zika virus

FDA-ARGOS Pipeline



FDA-ARGOS microbial genomes are generated in 3 phases:

- Phase 1- collection of a previously identified microbe and nucleic acid extraction
- Phase 2- sequencing and de novo assembly at UMD
- Phase 3- Vetting and data deposit in NCBI databases

FDA-ARGOS Reference Genome Characteristics:

- A. Identified by orthogonal reference method
- B. Sequenced and de-novo assembled using 2 sequencing methodologies
- C. High depth of sequencing coverage
- D. Minimum of 20X over 95 percent of the assembled and polished core genome
- E. Taxonomy-specific ANI thresholds that are sufficient for identification
- F. Placed within a pre-established phylogenetic tree.
- G. Sample specific metadata, raw reads, assemblies, annotation and details of the bioinformatics pipeline are available.

Bacteria/Fungi/Eukaryote Pipeline

FDA

Collect samples /grow samples

Extract samples

Q/C extractions at IGS (>10ug cutoff)

Batch and library prep/sequence on Illumina – Megablast QC

Library prep/sequence on PacBio – Megablast QC

Assemble long/short raw reads

Annotate with in-house pipeline for Q/C

Data Analytics Q/C Pipeline at FDA

Register BioSamples and submit raw reads to SRA DB and assemblies to Assembly DB

NCBI annotates genomes

Viral Pipeline



Q/C extracted genomic material at IGS (25ng)

Library Prep/sequence on Illumina

- Shotgun
- Amplicon (may require primer set design Ebola, Zika)
 - Looking into WNV, Dengue Broad Institute
- RACE

Assemble raw reads

Data Analytics Q/C Pipeline at FDA

Register BioSamples and submit raw reads to SRA DB and assemblies to Assembly DB

FDA-ARGOS Sample Progress



23

- 970 Genomes sequenced
 - 872 bacterial
 - 95 genera
 - 85 viral
 - 9 viral types
 - Ebola, Zika, Dengue, WNV, etc.

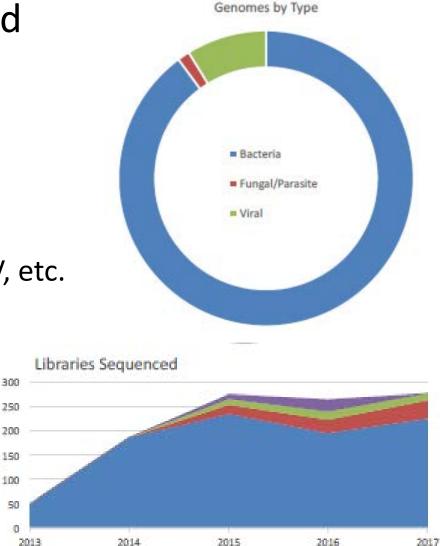
Viral RACE

Viral Amplicon

Viral Shotgun

Genomic

- 13 fungal/parasite
- 30+ collaborators



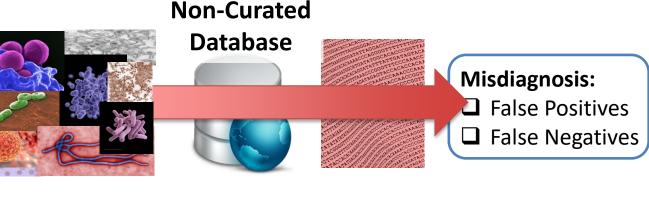
Reference Genome Gap: Ebola 🔤

Endemic African Diseases

Chikungunya virus Crimean-Congo Hemorrhagic Fever virus Dengue virus serotype 1 Dengue virus serotype 2 Dengue virus serotype 3 Dengue virus serotype 4

Ebola virus

Lassa virus Marburg virus (Angola) Marburg virus (Ci67) **Plasmodium falciparum** Rift Valley fever virus West Nile virus **Yellow fever virus Zika virus**



Standardized Reference Database Orrect Diagnosis: True Positives

✓ Minimize Misdiagnosis

✓ Evolutionary Change

✓ Rapid Diagnostics 24

Sustainable Solution



https://www.fda.gov/argos



4 U.S. Department of Health and I	Human Services							
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	Currently, FDA-ARGOS microbial gen	omes are generated in	3 phases. Generally:	:				
	Phase 1 entails collection of a pre-							
	 Phase 2, the microbial nucleic acli Biosequencing platforms at the inst 			-				
	 Phase 3, the assembled genomes are vetted by an ID-NGS subject matter expert working gr of FDA personnel and collaborators and the data are deposited in NCBI databases. 							
	The FDA-ARGOS genomes meet the ARGOS reference genomes have bee within a pre-established phylogenetic 20X over 95 percent of the assemble assemblies, annotation and details o	I with high depth of ba Isolate in the databas emore, sample specif	e is coverage and place is is covered at a minir	ed num of				
		w FDA-ARGOS Will Assist Medical Davice Developers: anufactures interesting sequence-based test to identify infection-needs and/or to detect resistance or						
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	Contributing Genomes to FDA.ARGO Further population and curation of the adoption by the NGS community. The scientific community to assist in fillin are specifically searching for unique, pathogens, and clinically significant sequence information for a minimum	database will support FDA-ARGOS team op ing the gaps in this put hard to source microt bacterial, viral, fungal	penly invites additiona blic resource. The FD/ bes such as blothreat , and parasitic genom	al collaborators from the A-ARGOS and collabora organisms, emerging	ators			
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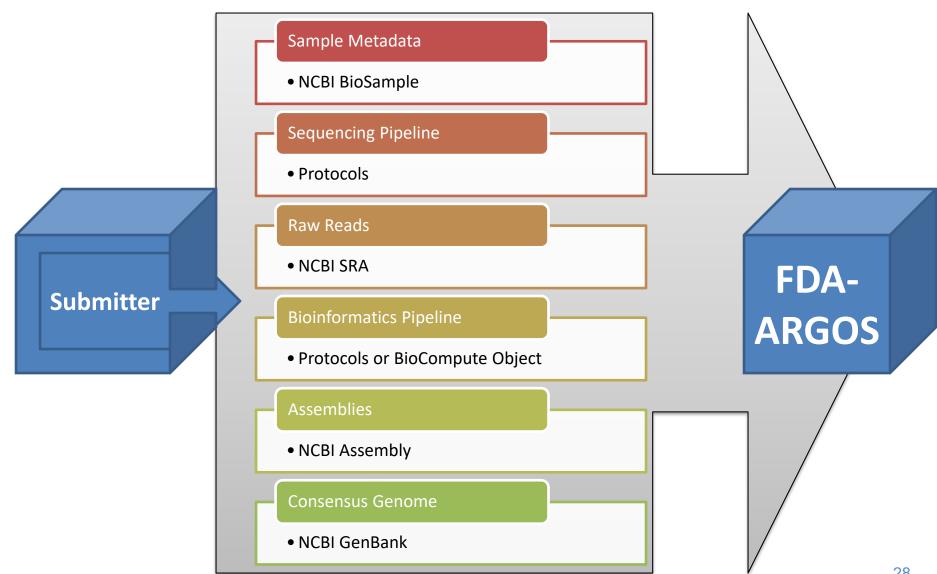
FDA

Contributing Genomes to FDA-ARGOS

- Further population and curation of the database will support the success of FDA-ARGOS and promote adoption by the community.
- The FDA-ARGOS team openly invites additional collaborators from the scientific community to assist in filling the gaps in this public resource.
- Specifically searching for unique, hard to source microbes such as biothreat organisms, emerging pathogens, and clinically significant bacterial, viral, fungal, and parasitic genomes.
- The goal is to collect sequence information for a minimum of 5 isolates per species.
- For more information about contributing samples for UMD-IGS sequencing as part of FDA-ARGOS efforts, or to qualify existing genomes by the FDA, please email <u>FDA-ARGOS@fda.hhs.gov</u>.

External Genome Submission





Reference Materials



- Support analytical validation of entire ID NGS Diagnostic assay workflow
 - 1. Cell-based in clinical matrix (blood, urine, stool) to test from specimen collection to result
 - 2. Reference material organism panel should sufficiently capture ID NGS assay's claimed target characteristics (intended use)
 - Size of the genome, G/C content, DNA/RNA, Near neighbors, Repetitive content, Commensal, Extremes
 - Cross-platform comparison

NIST/FDA Reference Material Efforts

- Microbial Genomic DNA Reference Material
 - RM 8375 Microbial genomic DNA standards for sequencing performance assessment
 - 2 FDA-ARGOS strains/ 2 FDA-CFSAN strains
- Mixed Pathogen DNA Research Material
 - A mixture of <u>genomic DNA</u> from 25 clinically-relevant pathogens plus human genomic DNA.

Build Reference Genomes:

 PacBio/Illumina sequencing of microbial constituents as part of FDA-ARGOS project

Other Reference Material Efforts



- ZymoBIOMICS[™] Microbial Community Standards by Zymo Research
 - A mock microbial community consisting of eight bacterial and two fungal strains
- UCSF Control Material

Build Reference Genomes:

 PacBio/Illumina sequencing of microbial constituents as part of FDA-ARGOS project

Which of the following are characteristics of Reference-Grade Genomes for Regulatory Use?

- o HMW genomic material from unknown organism
- Sequenced and de-novo assembled using 2 sequencing methodologies
- High depth of sequencing coverage
- Minimum of 1X over 95 percent of the assembled and polished core genome
- o Generalized ANI threshold
- o Placed within a pre-established phylogenetic tree
- Sample specific metadata, raw reads, assemblies, annotation and details of the bioinformatics pipeline are available.



Which of the following are characteristics of Reference-Grade Genomes for Regulatory Use?

- ⊖ HMW genomic material from unknown organism
- Sequenced and de-novo assembled using 2 sequencing methodologies
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- ⊖ Generalized ANI threshold
- ✓ Placed within a pre-established phylogenetic tree
- ✓ Sample specific metadata, raw reads, assemblies, annotation and details of the bioinformatics pipeline are available.



REVIEW Characteristics of



Reference-Grade Genomes for Regulatory Use

- A. Identified by orthogonal reference method
- B. Sequenced and de-novo assembled using 2 sequencing methodologies
- C. High depth of sequencing coverage
- D. Minimum of 20X over 95 percent of the assembled and polished core genome
- E. Taxonomy-specific ANI thresholds that are sufficient for microbial organism identification
- F. Placed within a pre-established phylogenetic tree
- G. Sample specific metadata, raw reads, assemblies, annotation and details of the bioinformatics pipeline are available

Acknowledgements

FDA-ARGOS team members include representatives from the:

- U.S. Food and Drug Administration
- U.S. Department of Defense
- National Institutes of Health
- Institute for Genome Sciences at University of Maryland

Funding Agencies

FDA's Office of Counterterrorism and Emerging Threats Joint Program Executive Office for Chemical and Biological Defense (JPEO-CBD) American Type Culture Collection/ BEI Bernard Nocht Institute for Tropical Medicine, Germany Biodefense and Emerging Infections Research Resources Repository British Columbia Centre for Disease Control (BCCDC) Children's National Medical Center Defense Threat Reduction Agency (DTRA) George Washington University Joint Program Executive Office for Chemical and Biological Defense (JPEO-CBD) Lawrence Livermore National Lab (LLNL) Los Alamos National Lab (LANL) Mayo Clinic National Biodefense Analysis and Countermeasures Center National Institute of Allergy and Infectious Diseases (NIH-NIAID) New York State Wadsworth Laboratories Public Health Agency Canada (PHAC) Public Health England (PHE) Rockefeller University **Rutgers University** Stanford University Medical Center University of California, San Francisco (UCSF) University of Colorado Denver University of Ibadan, Nigeria University of Louisville University of Michigan University of North Carolina at Chapel Hill University of Texas Medical Branch (UTMB) University of Washington School of Medicine U.S. Army Edgewood Chemical Biological Center (ECBC) U.S. Army Medical Research Institute for Infectious Diseases (USAMRIID) U.S. Food and Drug Administration Weill Cornell Medicine

