COVID-19 Vaccine Development: The Role of the NIH

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National Institutes of Health October 22, 2020





Vaccines and Related Biological Products Advisory Committee October 22, 2020 Meeting Presentation

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Moving From Preparedness to Response

Evaluating Safety and Efficacy – Harmonized Clinical Trials

Key Priorities and Future Directions

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Science

NEWS

Chinese Researchers Reveal Draft Genome of Virus Implicated in Wuhan Pneumonia Outbreak

Jon Cohen

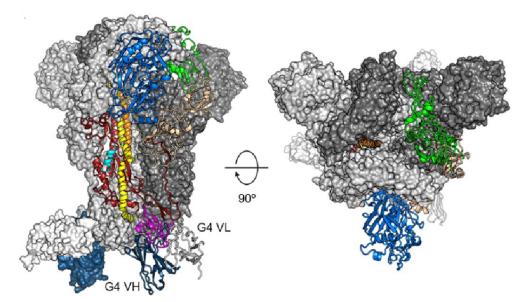
August 29, 2017 vol. 114 no. 35 PILAS

Proceedings of the National Academy of Sciences of the United States of America

RESEARCH ARTICLE

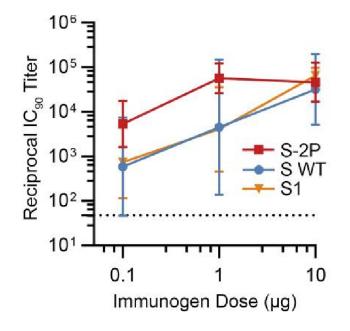
Immunogenicity and Structures of a Rationally Designed Prefusion MERS-CoV Spike Antigen

J Pallesen, JS McLellan et al.



Spike with stabilizing mutations bound to MERS-CoV neutralizing Ab G4

Stabilized Spike
Elicits More
Neutralization than
WT Spike or S1
Monomer in Mice





SARS-CoV-2 mRNA Vaccine Design Enabled by Prototype Pathogen Preparedness

KS Corbett, BS Graham et al.

Using established immunogen design, the release of SARS-CoV-2 sequences triggered immediate rapid manufacturing of an mRNA vaccine expressing the prefusion-stabilized SARS-CoV-2 spike trimer.

COVID-19 Vaccines in Operation Warp Speed Development



BIONTECH Pfizer



mRNA





mRNA: rapid manufacturing facilitating efficient move to clinic, highly immunogenic





Adenovirus vector

Adenovirus vector



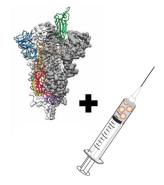
Adenovirus: rapid manufacturing facilitating efficient move to clinic, vaccine using this platform is approved in Europe





Recombinant protein + adjuvant

Recombinant protein + adjuvant



Adjuvanted recombinant protein: not as fast to manufacture but scalable, several approved vaccines use this approach

COVID-19 Vaccines in Operation Warp Speed Development



mRNA



mRNA



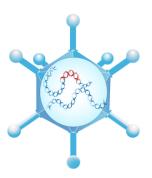
Initial COVID phase 1 trials launched in March 2020

Initial evaluation for safety

and immune responses in



Adenovirus vector



Phase 1 and 2 trials

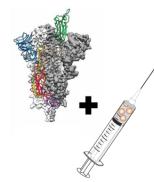


Adenovirus vector

To date, COVID vaccines are immunogenic and well tolerated overall



Recombinant protein + adjuvant



Recombinant protein + adjuvant



Binding antibody and viral neutralization titers comparable to human convalescent sera Moving From Preparedness to Response

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Published online May 11, 2020

Science

A Strategic Approach to COVID-19 Vaccine R&D

L Corey, JR Mascola, AS Fauci & FS Collins

The full development pathway for an effective vaccine for SARS-CoV2 will require that industry, government, and academia collaborate in unprecedented ways, each adding their individual strengths. . . . We further discuss a collaborative platform for conducting harmonized, randomized controlled vaccine efficacy trials. This mechanism aims to generate essential safety and efficacy data for several candidate vaccines in parallel, so as to accelerate the licensure and distribution of multiple vaccine platforms and vaccines to protect against COVID-19

Candidate COVID-19 vaccines

Platform 1

Platform 2 Platform 3

Platform 4

Platform 5

Harmonized efficacy trials Collaborating clinical trials networks

Collaborating labs

- 1) Distinguishing SARS-CoV-2 infection from vaccination
- 2) Quantitative immune responses to spike and spike epitopes
- 3) T-cell responses

Data and Safety Monitoring Board

Between-trial statistical group for correlates of protection

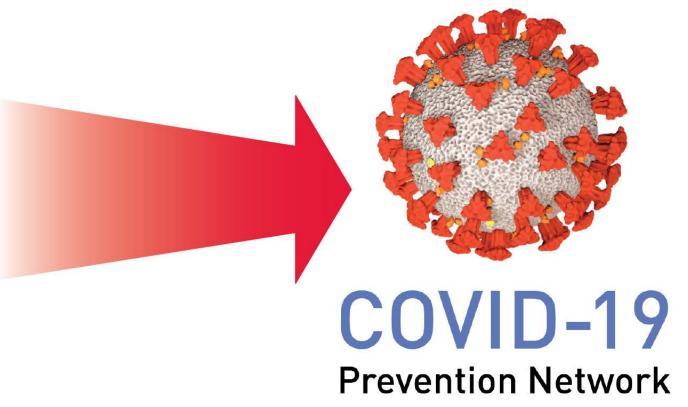
NIH/COVID Network-supported infrastructure



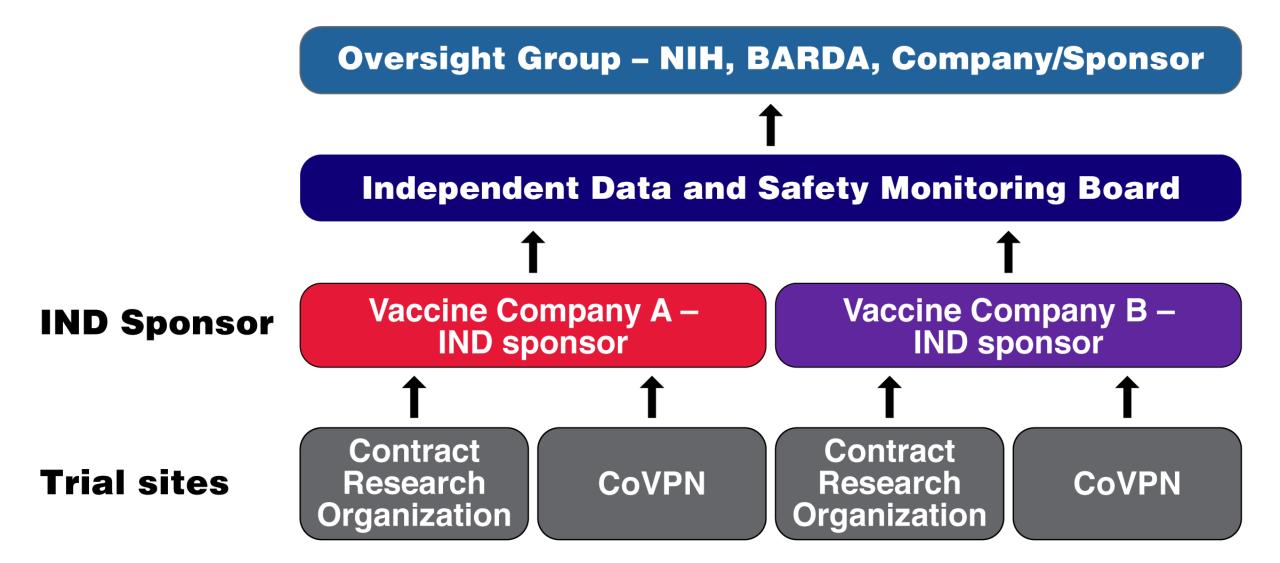








Operation Warp Speed/NIH Trial Oversight Structure



Trial Oversight Structure: The NIH Role

- The company is the regulatory sponsor under 21 CFR 312 and holds the IND for the trials
- Phase 3 trials are designed in collaboration with the NIH-led ACTIV Partnership, OWS, CoVPN and conform to FDA guidance*
- Trials are overseen by an independent Data and Safety Monitoring Board, for which NIH serves as the secretariat**
- NIH CoVPN trial sites support all OWS Phase 3 trials; network investigators are Co-PIs
- NIH, BARDA and the company all participate in the trial Oversight Group (which receives all recommendations from the DSMB)

OWS Phase 3 Design Overview

- Randomized, Placebo-Controlled Efficacy Trial: 1:1 or 2:1
- Sample size: 30,000 to 60,000 volunteers
 - A primary efficacy endpoint point estimate of ≥60%
 - The lower bound of the confidence interval >30%
- Study Population: age ≥ 18 years, at risk of acquisition, targeting subset at higher risk of severe disease, diverse populations
 - The Pfizer trial, which is independently conducted, is now enrolling down to age 12
- Primary Endpoint: Prevention of symptomatic COVID-19 disease (PCR confirmed)
 - All identified cases are assessed for severity and followed to resolution
 - Unblinded clinical case data are submitted to shared biostatistical group

Safety Considerations

Primary Safety Objective: evaluate safety and reactogenicity

Safety endpoints:

- Solicited local/systemic adverse reactions through 7 days
- Unsolicited adverse events through 28 days
- Medically attended adverse events, adverse events of special interest and severe adverse events any time (2 yr follow up)

All adverse events are reviewed by a dedicated safety team and reviewed in an unblinded fashion by DSMB; for severe AEs, a thorough review is conducted by DSMB.

DSMB also reviews for imbalances in severe COVID cases between study arms.

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Safeguarding volunteers:

Developing Vaccines in a Public **Health Emergency - Financial** Risks are Taken (e.g., with respect to manufacturing), Scientific Integrity and Volunteer Safety Are Not Compromised

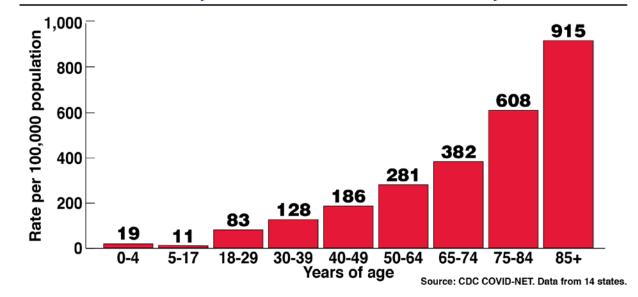
Safety Pauses and Holds

- Adverse events (AE):
 - Occur in both vaccine and placebo groups in clinical trials
 - Monitored and graded by severity using standard procedures
 - Regularly reviewed by study clinicians, monitors and protocol safety teams to ensure proper interpretation and reporting if needed
- There are multiple layers of safety oversight, including company pharmacovigilance, the NIH-led Protocol Safety Review Team, the DSMB itself and the FDA. <u>These are in</u> <u>place to protect volunteers.</u>
- The recent regulatory hold for AstraZeneca and the clinical pause for Janssen are signs that the system is working as expected

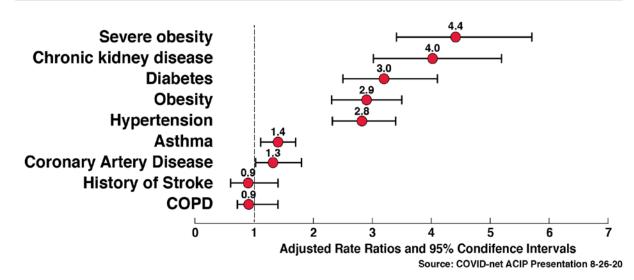
Enrolling those at highest risk of infection and severe disease:

It is critical that we assess safety and efficacy in those hardest hit by the pandemic.

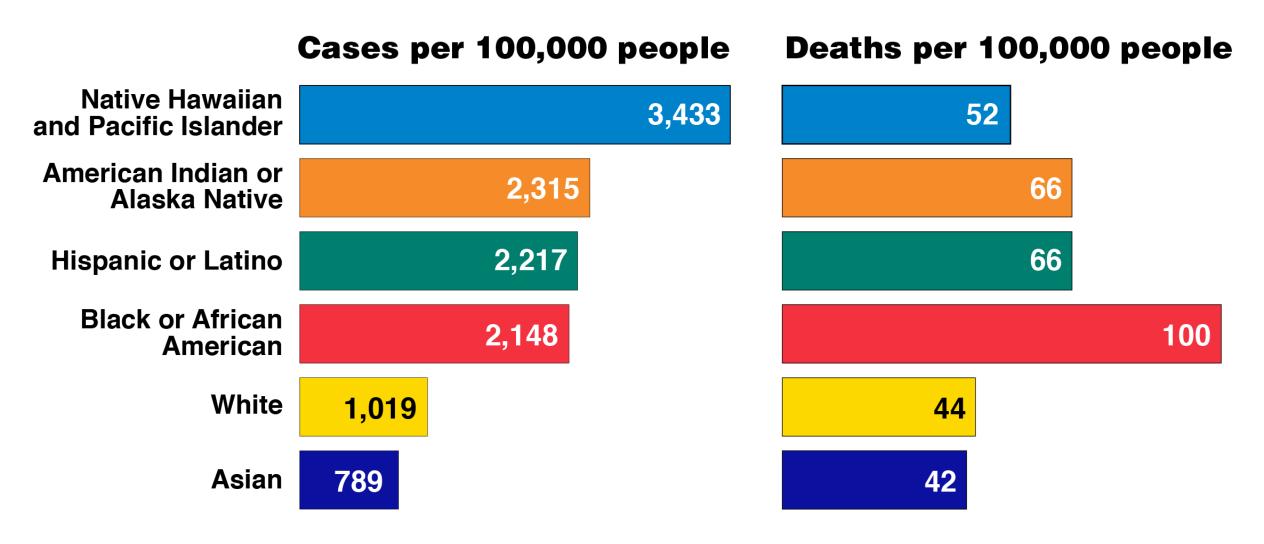
Cumulative Rates of Laboratory-Confirmed COVID-19-Associated Hospitalizations by Age, United States, March 1 – October 10, 2020



Individuals with Underlying Medical Conditions Are at Increased Risk for Severe COVID-19



COVID-19 Cases and Deaths by Race/Ethnicity, United States, 2020



Source: COVID Tracking Project. Data through 10/16/2020.

- Trials have explicit parameters for enrollment of volunteers with individual risk factors (e.g., ≥65 years of age, comorbidities) and race/ethnicity
- Proactive community engagement activities, especially with underserved minorities, are a top priority for NIH and partners

These measures are critical to the success of the trials themselves.

They will allow assessment of safety and efficacy populations at highest risk, supporting future acceptability

Community Engagement Alliance (CEAL) Team



CoVPN Community Engagement Working Group

Pan-NIH entity leveraging longstanding clinical trial network community engagement

CoVPN-led group building on HIV trial expertise; led by health equity experts

Community Outreach and Partnership

- Expert Advisory Panels: Scientists from and working with priority populations
 - Modeled after NIH review committees
 - Convene and discuss each protocol
- Convening Community Working Groups with research familiarity
- Stakeholder Outreach national organizations, local town halls, faith-based and grassroots organizations

Generating and maintaining trust in the trials and in the products (if successful):

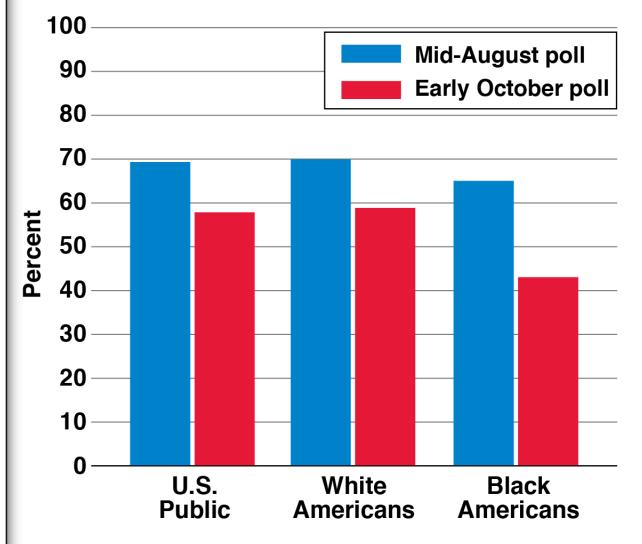
Vaccines can only be effective if uptake is widespread.

October 19, 2020

STAT

STAT-Harris Poll: The Share of **Americans** Interested in **Getting COVID-19** Vaccine as Soon as Possible is Dropping

How likely are you to get a COVID-19 vaccine as soon as it becomes available?



Source: The Harris Poll, STAT

Specific Efforts to Improve Confidence in Vaccine Trials

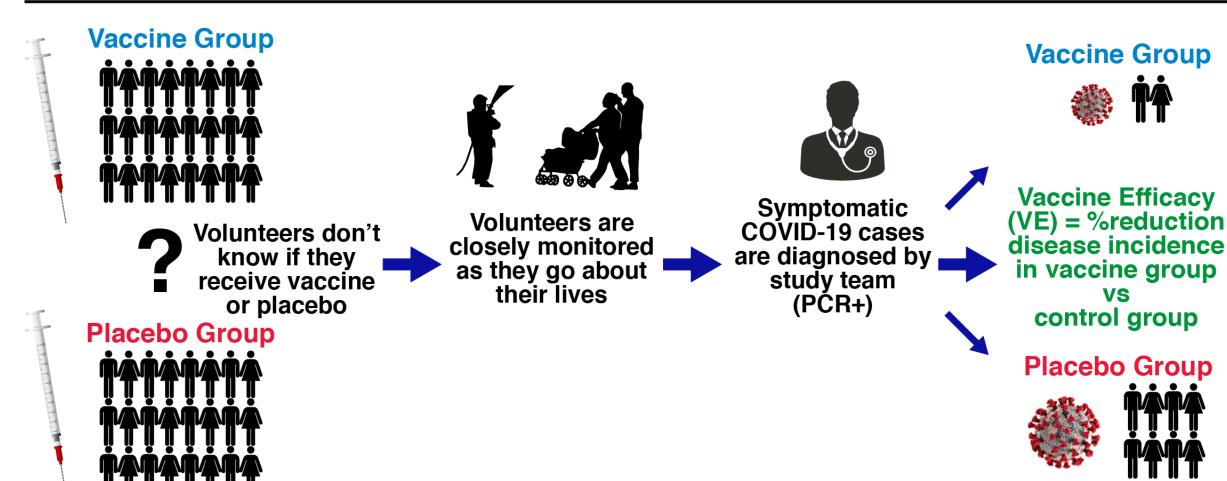
- Maintaining safeguards for volunteers and for study conduct
- Engaging directly with stakeholders including those from underserved minorities hardest hit by the pandemic
- Communicating the roles that entities like the NIH, oversight groups and regulatory bodies play (e.g., NIH and BARDA in oversight of trials, DSMB in monitoring unblinded data and adverse events)
- Committing to transparency companies have posted final protocols and shared enrollment data (including enrollment by race/ethnicity); prompt sharing of results will also be critical



www.preventcovid.org

BACKUP

Randomized, Placebo Controlled, Phase 3 COVID Vaccine Efficacy Trial Explained



Total number of volunteers range from 30,000 to 60,000 per trial

Asymptomatic COVID cases will be defined by retrospective analysis.

Comparison of Launched US Phase 3 Trials

	moderna	BIONTECH	AstraZeneca	Janssen PHARMACEUTICAL COMPANIES OF Johnson-Johnson
Туре	mRNA	mRNA	ChAdOx1	rAd26
n=	30,000 (1:1)	44,000 (1:1)	30,000 (2:1)	60,000 (1:1)
Opening and Status	July 2020 Enrolling	July 2020 Enrolling	Aug 2020 Enrolling (hold)	September 2020 Enrolling
Efficacy Target per Protocol (lower 95% CI Efficacy)	60% (30%)	60% (30%)	60% (30%)	60% (30%)
Target number of cases*	151	164	150	154



Projected to open Nov 2020

*defined as meeting primary endpoint, exact case definitions vary but all information captured in case report forms



SANOFI Projected to open Dec 2020

Nationwide Collaborative Network of COVID-19 Vaccine Clinical Trial Sites

