

# Center for Drug Evaluation and Research (CDER) Perspective

National Center for Toxicological Research (NCTR) Scientific Advisory Board

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# CDER-Office of New Drugs Pharm/Tox Staff: Role in Regulatory Drug Development

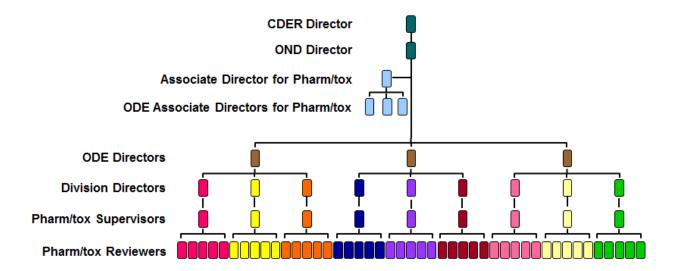
NCTR Science Advisory Board November 2016

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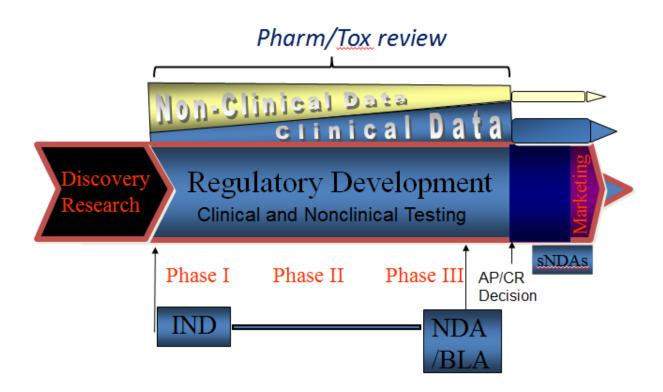
ODE Associate Director, Pharmacology/Toxicology

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# CDER Organizational Chart (focus on pharm/tox group)



# OND Pharm/Tox: Place in Regulatory Drug Development



## Use of Pharm/Tox data

- Identify reasonably safe dose range to explore in clinical trials
- Identify clinical monitoring needed beyond 'standard' safety assessments
- Identify or predict risks that are not captured in human trials
   (e.g., carcinogenicity, teratogenicity)

# What is the intent and use of pharm/tox in NEW drug development?

- Establish pharmacological properties of compound
- Understand toxicological profile (target organs, exposure/response, reversibility)

Is submitted data sufficient to conclude that proposed clinical investigation is reasonably safe?

# Scope of "complete" Pharm/Tox information

### Pharmacology

- Cellular & Molecular mechanism of action,
   Specificity
- o 'Proof of Concept' in vitro/in vivo studies
- Safety Pharmacology (CNS, Respiratory, Cardiovascular

### Pharmacokinetics

ADME: Absorption, Distribution, Metabolism, & Excretion

 From animal species & human metabolism

## General Toxicology

- o Two species, 1 rodent, 1 non-rodent
- In-life & necropsy evaluations
- Acute & chronic administration of drug + recovery periods

# Scope of "complete" Pharm/Tox information

## Genetic Toxicology

In vitro & in vivo assessments

## Carcinogenicity

e.g., from weight-of-evidence paper to 2 yr rodent studies

## Reproductive Toxicology

**Fertility** 

Teratogenicity & embryofetal development Peri- & post-natal development

# Product specific assessments

e.g., Juvenile animal studies, pancreatic safety studies, etc...

# Complete pharm/tox information not expected immediately

 Timing depends on scope of proposed clinical trial & type of product

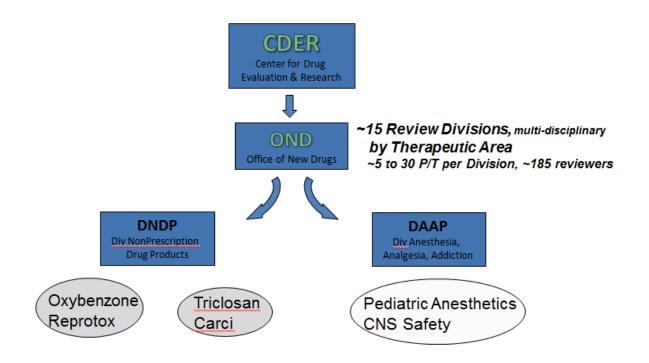
o ICH M3(R2): Small molecules

o ICH S6: Biologics

o ICH S9: Anti-Cancer Pharmaceuticals

- All pharm/tox topics considered important safety issues
- Expectation is that all nonclinical topics be addressed, appropriate for the scope of the clinical program

# CDER/OND Pharm/Tox & NCTR Connections: Examples



# **Pharm/Tox & NCTR Connections**

- ~ 70 current CDER-NCTR collaborations
- Some current collaborations include:
  - Assess critical gaps in safety assessment of widely used and/or widely available drug substances
    - Increasingly important collaboration with innovations to Nonprescription Drug Products monograph review process
      - Laboratory research; Review of submissions
    - Serve as co-PI on various projects including research on
      - drug-induced cardiotoxicity
      - Genotoxicity
    - On-site laboratory training in neurotoxicity methods

# Potential collaboration on nonclinical programs for NEW drug approvals?

How do we better extrapolate relevance of nonclinical toxicology findings to humans, and translate those findings to human risk?

- Genetic toxicology
- Carcinogenicity
- Reproduction & Development

How do we better identify and evaluate alternatives/ refinements to current testing strategies intended to improve prediction of human risk?

- In vitro developmental assays (e.g. mEST, zebrafish)
- Microphysiological approaches (tissue/organ/human on a chip)

# Applied Regulatory Science, Clinical Pharmacology and Translational Sciences Perspective

NCTR Science Advisory Board November 2016

David Strauss, MD, PhD

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Center for Drug Evaluation and Research

## What We Do ...

#### Office of Translational Sciences

- Promote innovation in drug regulatory review
- Assure the validity of clinical trial design and analysis
- Develop and apply quantitative approaches
- Promote scientific collaboration
- Ensure alignment of CDER research with CDER goals

#### Office of Clinical Pharmacology

- Evaluate pharmacokinetics and pharmacodynamics
- Understand inter-patient variabilities
- Optimize dose and dose regimen to balance benefit and risk
- Conduct research to advance clinical pharmacology and better evaluate benefit and risk

# Division of Applied Regulatory Science (DARS)

#### Vision

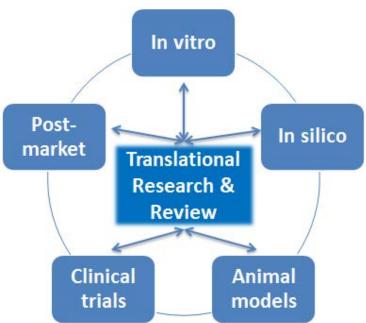
 To move new science into the CDER review process and close the gap between scientific innovation and product review

#### What does DARS do?

- Perform mission-critical applied research to develop and evaluate tools, standards and approaches to assess the safety, efficacy, quality and performance of drugs
- Perform expert regulatory review consultations for immediate regulatory needs, such as mechanistic evaluation and biological plausibility of new safety signals

## **DARS Priorities**

- Translational regulatory science
- Collaboration and interdisciplinary team approaches
- Implementation of new regulatory review methods and programs



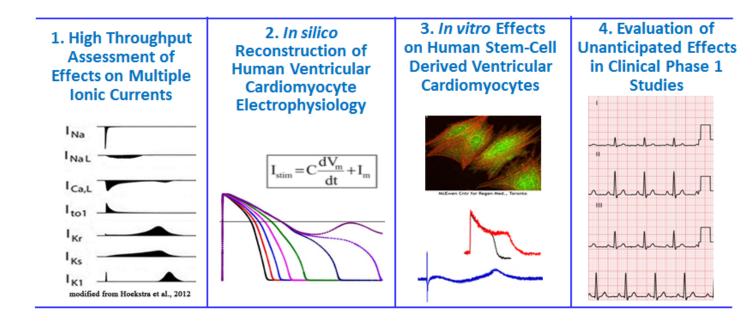
### **Broad, multidisciplinary expertise:**

- Pharmacologists, toxicologists, physiologists, pharmacokineticists
- Physicians, veterinarians, pharmacists
- Immunologists, microbiologists, molecular/cell biologists
- Biochemists, inorganic chemists, pharmaceutical scientists
- Computational biologists, engineers, bio-physicists, mathematicians

# Highlighted Applied Research and Regulatory Review Areas

- Modernizing toxicology/safety pharmacology with humanized assays and genomics
  - Comprehensive in vitro Proarrhythmia
     Assay (CiPA) initiative
  - Humanized mouse models (immune and liver)
  - Genomic (microRNA) biomarkers for tissue injury
- 2. Bioanalytical, pharmacokinetics and drugdrug interactions
- 3. Informatics tools for mechanistic safety and regulatory review consults
  - Chemical informatics
  - Biomedical informatics
  - Mechanistic safety and pharmacology consults

# Comprehensive *in vitro* Proarrythmia Assay (CiPA): Four Components



**Goal:** Develop a new in vitro paradigm for cardiac safety evaluation of new drugs that provides a more accurate and comprehensive mechanistic-based assessment of proarrhythmic potential

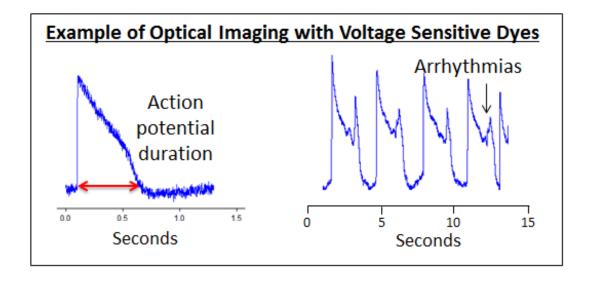
 DARS is leading applied research across all four components to develop and validate this novel regulatory paradigm in collaboration with all major global drug regulatory agencies, multiple publicprivate partnerships, industry and academia

## **CDER-CDRH-NCTR Collaboration**

# Comprehensive Translational Assessment of Human Induced Pluripotent Stem Cell Derived Cardiomyocytes for Evaluating Drug-Induced Arrhythmias

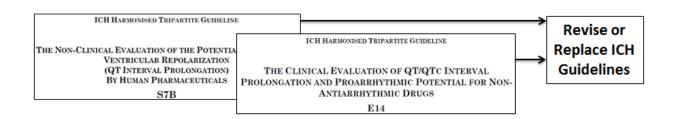
Ksenia Blinova, Jayna Stohlman, Jose Vicente, Dulciana Chan, Lars Johannesen, Maria P. Hortigon-Vinagre, Victor Zamora, Godfrey Smith, William J. Crumb, Li Pang, Beverly Lyn-Cook, James Ross, Mathew Brock, Stacie Chvatal, Daniel Millard, Loriano Galeotti, Norman Stockbridge, David G. Strauss

Toxicological Sciences (2016) in press - doi: 10.1093/toxsci/kfw200

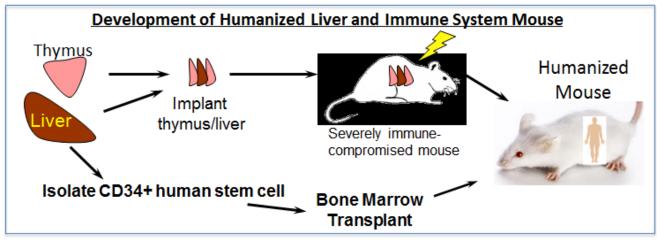


## **CiPA Progress & Expected Outcomes**

- Standardized, mechanistic-based studies that can be applied early in drug development to aid in compound selection
- Drugs that may be dropped from development under current paradigm could have a clearer path to advance
- QT prolonging drugs on the market that are not proarrhythmic could have labeling updated to reflect this
- Model for mechanistic-based approaches to be applied to other drug safety areas
- Qualification studies to be completed and presented to International Conference on Harmonization (ICH) by December 2017



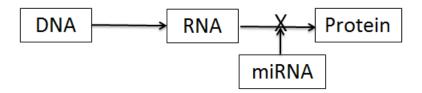
## **Humanized Mouse Models**



- DARS utilizes advanced 'humanized' mouse models that have either a human immune system, a human liver or both
- These models serve to better understand safety concerns for both small and large molecule drug products
- Are being used to assess biosimilar vs. originator biologics, toxicity, hypersensitivity, drug metabolism and drug-induced liver injury

# Novel MicroRNA Biomarkers: Application Pancreatic Injury

- Traditional serum biomarkers (amylase, lipase) of pancreatic injury have less than ideal sensitivity and specificity
- MicroRNAs (miRNAs) are short noncoding RNA molecules that bind to target mRNA causing gene silencing



- Tissue injury can rapidly release tissuespecific miRNAs that are very stable in biofluids = Biomarkers!
- Series of DARS studies in mice, rats and dogs
  - Equivalent or better sensitivity, more specific, larger range of response

### **Chemical Informatics Research**

### DARS Chemical Informatics Program performs research to

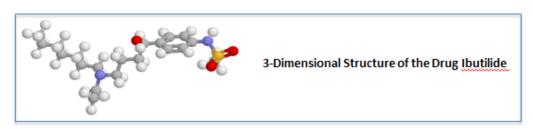
- Create chemical structure-linked toxicological and clinical effect databases
- Develop rules for quantifying in vitro, animal and human endpoint data
- Develop prediction models through collaborations

#### **Ongoing Research Projects**

- Develop (quantitative) structure activity relationship ((Q)SAR) models for bacterial mutation compliant with ICH M7
- Enhance (Q)SAR models for carcinogenicity and ICH S2 genetic toxicity endpoints

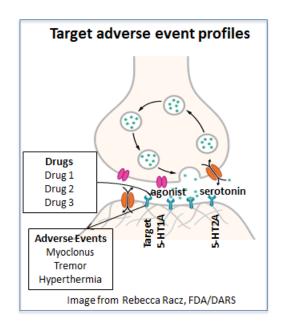
#### **Emerging areas**

 Evaluate (Q)SAR modeling for speeding development of drugs for severely debilitating and life threatening diseases



# **Bioinformatics Research**

- Clinical trials do not identify many serious adverse events that ultimately lead to safety label changes
- DARS performs research to advance and validate methods in biomedical informatics to enhance pharmaco- vigilance and inform drug labeling
  - DARS is evaluating the performance of software that generates target adverse event profiles; the set of adverse events associated with a pharmacological target



Slide adapted from Keith Burkhart, FDA/DARS

# **Regulatory Review Consults**

### **Chemical Informatics Consults**

- In FY16, performed 225 (Q)SAR consults for 492 drugs, drug impurities, metabolites and packaging leachables
  - Bacterial mutagenicity models in high demand due to ICH M7
  - Additional nonclinical (carcinogenicity, mutation, genetic toxicity, reproductive/developmental toxicity, phospholipidosis) and clinical (liver, cardiovascular, kidney/bladder effects) models
  - Consult distribution: 20% new drug products, 80% generics

# Biomedical Informatics and General Division Consults

 Consults start with review of existing data and literature, incorporate biomedical and chemical informatics analyses and sometimes extend to laboratory investigations

# **Moving Forward ...**

- We want to modernize pharmacology and toxicology to advance drug development!
- We want to move new science into the regulatory review process!
- Opportunities for advancing CDER-NCTR collaborations
  - Collaborate on research with experimental or computational work occurring at NCTR and CDER, tackling complementary aspects of a project
  - Further engage CDER scientists
  - Validate and translate laboratory and computational models into the CDER review process

