

# Japanese Practices in Non-clinical Safety Assessment of Biopharmaceuticals

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# Agenda

- 1. Introduction
  - Benefits from ICH-S6
- 2. JPMA questionnaire survey
  - Implementation of ICH-S6
- 3. "Points-to-consider"
  - Species differences
  - Differences between biopharmaceuticals and NCEs
  - Types of biopharmaceuticals
- 4. ICH safety brainstorming about ICH-S6
- 5. Conclusion

# **Concerns/Questions prior to ICH-S6**

- Fewer toxicity observed in less responsive animals
- Decreased toxicity after repeated administration
- Value of genotoxicity studies
- Value of antigenicity studies
- Value of ADME studies with radiolabeled proteins



### **Historical Background**

#### ■ ICH-S6 (1997)

- Japanese translation of ICH-S6 (2000)
- JPMA questionnaire survey on ICH-S6 implementation (2000)
- Japanese "Points-to-consider" (2002)
- Update and English translation of Japanese "Points-to-consider" (2004)



# **Answers from ICH-S6**

- Species differences
  - Fewer toxicity observed in less responsive animals
- Antibody production
  - Decreased toxicity after repeated administration
- Genotoxicity sometimes not relevant
  - Value of genotoxicity studies
- Antigenicity not relevant
  - Value of antigenicity studies
- Use of radiolabeled proteins sometimes not relevant
  - Value of ADME studies with radiolabeled proteins



# **Principle of ICH-S6**

- Appropriate safety test for each product
  - Relevant animal selection
- Flexible description, not to be checklist
  - Decision making based on "case-by-case"
- Toxicity test based on biological activity/PK
  - 1) Predict testing scheme
  - 2) Testing doses based on biological response
  - 3) Testing doses based on clinical usage



### **Historical Background**

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# **Selection of Animal Species**





# **Genotoxicity and Antigenicity**

	Conducted	Intentionally not conducted
Genotoxicity	<b>16/34</b>	11/34
Antigenicity	12/34	15/34

Examined 34 biopharmaceuticals in total

# Compliance with ICH-S6 Concepts





Prior to ICH-S6

After ICH-S6



# **Benefits from ICH-S6**

- Better understanding of safety assessment of biopharmaceuticals
  - Decrease of inappropriate studies
  - Responsibility in establishing further relevant system

Further need to define what "relevancy" is



### **Historical Background**

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# Intention of "Points-to-Consider"

- Not government opinion
  - Iyakuken Hirinsyou Kenkyukai (Collaboration group among JPMA, PMDA and NIHS)
- Not requirement
  - Encouraging scientific discussion for scientists' better understanding of ICH-S6
- Not requesting a new study
  - Aligned with ICH-S6



# **Clarification of "Case-by-Case"**

- Species differences
  - Maximum dose, homologous proteins, transgenic animals
- Differences between biopharmaceuticals and NCEs
  - Genotoxicity, *in vitro* cardiac electrophysiology, neutralizing antibody, carcinogenicity, radio-labeled proteins for ADME studies
- New types of biopharmaceuticals
  - Bioconjugates and protein analogs with non-natural aminoacids
  - Therapeutic antibodies
  - Glycoprotein analogs



### **Species Differences**

#### Non-relevant animals would be

- Non-responsive
- Less responsive
- Over responsive
- Differently responsive
- Appropriate maximum dose
  - Results at a high dose do not always predict toxicity

Need to know how much relevant the test system used is



# Homologous Proteins and Transgenic Animals

- Useful alternatives
  - Provide helpful information when no relevant animals available
- Limitation
  - Not the final product (H)
  - Difficult to estimate the safety margin (H, T)
  - Few background data (T)



# **Genotxicity Studies**

#### Rationale for human type protein

- It is not expected that these substances would interact directly with DNA or other chromosomal material.
- The expected consequence of metabolism of biopharmaceuticals is the degradation to small peptides and individual amino acids.

#### Cause for concern

 The presence of an organic linker molecule in a conjugated protein product



# **Bioconjugates**

#### Fragment including organic linker



- How to ensure the safety of bioconjugate regarding genotoxicity and/or potential QT prolongation
  - Scientific rationale
  - Relevant test system



### **Therapeutic Antibodies**

- Novel mechanism of action
- Highly species-specific action value
  Action on immune system escrition

- Cytokine release syndrome - MABEL VI. See



### **Safety Brainstorming Session** (ICH Yokohama Meeting, June 2006)

The Steering Committee agreed to initiate a scientific discussion on this topic.

- During the October meeting of the SC, a plenary meeting should be held of all present nonclinical experts "to discuss in detail the way in which this scientific discussion should be held."
- Suggestions to be considered included a scientific discussion might be held in cooperation with other organisations such as SOT or DIA.



### JOINT S2/M3 Session (ICH Chicago Meeting, Oct 2006)

#### Regional meetings (2007)

- –USA DIA Annual Meeting (Jun)
- –Japan Drug Evaluation Forum (Aug)
- –EU Immunotox "summer school" (Oct)
- Central meeting (2008)
  - Discussion with results from regional meetings
  - A concept-paper as the outcome



### **Central Themes**

- Predictive value of the nonclinical studies, what is the clinical outcome experience?
- Data should be presented and discussed, *e.g.* TGN1412
- Where does the S6 guideline "work" and where not?
- <u>Focused</u> expertise



# **Potential topics for ICH-S6**

- Carcinogenicity testing. *E.g.* with hormonal growth factors. The need for *in vivo* studies, and the value of *in vitro* studies.
- Use of transgenic models and homologous products
- Timing and need for preclinical testing before the entry into humans (also contact M3), appropriate dose levels and starting dose
- Use for non-human primates in reproduction toxicology
- The risk assessment with monoclonal antibodies.
- In vitro cardiac testing
- Antisense nucleotides/ SiRNA
- What is the scope of biologics in development?



### **Conclusion**

- Safety assessment of biopharmaceuticals on the basis of "case-by-case" concept
  - Consider species differences
  - Consider differences between biopharmaceuticals and NCEs
  - Consider the type and nature of each biopharmaceutical

Be responsible for seeking relevant approach!

 New approaches will be discussed at Drug Evaluation Forum



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