

Utilization of Human Based Microphysiological Systems and Complex In Vitro Models in Drug Discovery and Development: Perspectives from Pharmaceutical Industry

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COI disclosure:

Veronika Rozehnal is an employee of Daiichi Sankyo

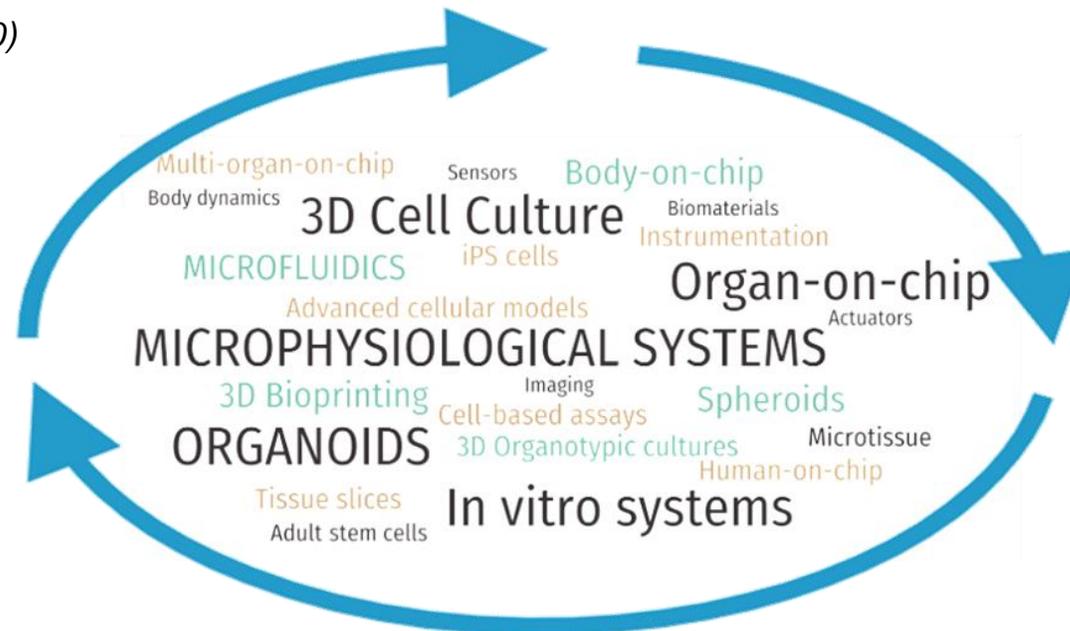
Outline

- Definition of CIVM and MPS
- Driving Forces for Alternatives to Animal Testing
- Daiichi Sankyo's Tissue and Cell Research Center Munich (TCRM)
- Human models in current and past application at TCRM
 - Human Tissue-derived Intestinal Organoids
 - Human Kidney Model
 - Viable Human Tissue Slices
- Perspectives of application of MPS/CIVM in pharmaceutical industry
- Conclusion

What are Complex In Vitro Models (CIVM) and Microphysiological Systems (MPS)

Microphysiological systems (MPS) comprise a number of bioengineering breakthroughs that reproduce organ architecture and function *in vitro*. Fueled by stem-cell technologies, a broad variety of especially human models and test systems have emerged, which make relevant experimental tools broadly available through international and multidisciplinary collaborations. *(Definition by International MPS Society)*

A broad definition of MPS includes the **Complex In Vitro Models (CIVM)**. CIVM can be defined as either spheroids, organoids, three-dimensional bioprinted tissue, organs-on-a-chip or MPS, or a multi-organ system or human body on a chip. *(Baran et al, 2022, Ekert et al. 2020)*



Driving Forces Supporting Alternatives to Animal Testing

The driving forces behind a shift towards alternatives to animal testing, including MPS/CIVM technologies, are **human relevance**, **cost reduction**, **ethical considerations** and **laws and regulations**.

FDA Modernization Act 2.0



- Eliminates the requirement of animal testing before initiation of clinical trials
- Provides opportunities to use alternatives to animal testing in drug discovery and development
- Those alternatives are in silico methods, in vitro methods, and MPS/CIVM technologies
- The Act does not eliminate animal testing and FDA's ability to require it when necessary

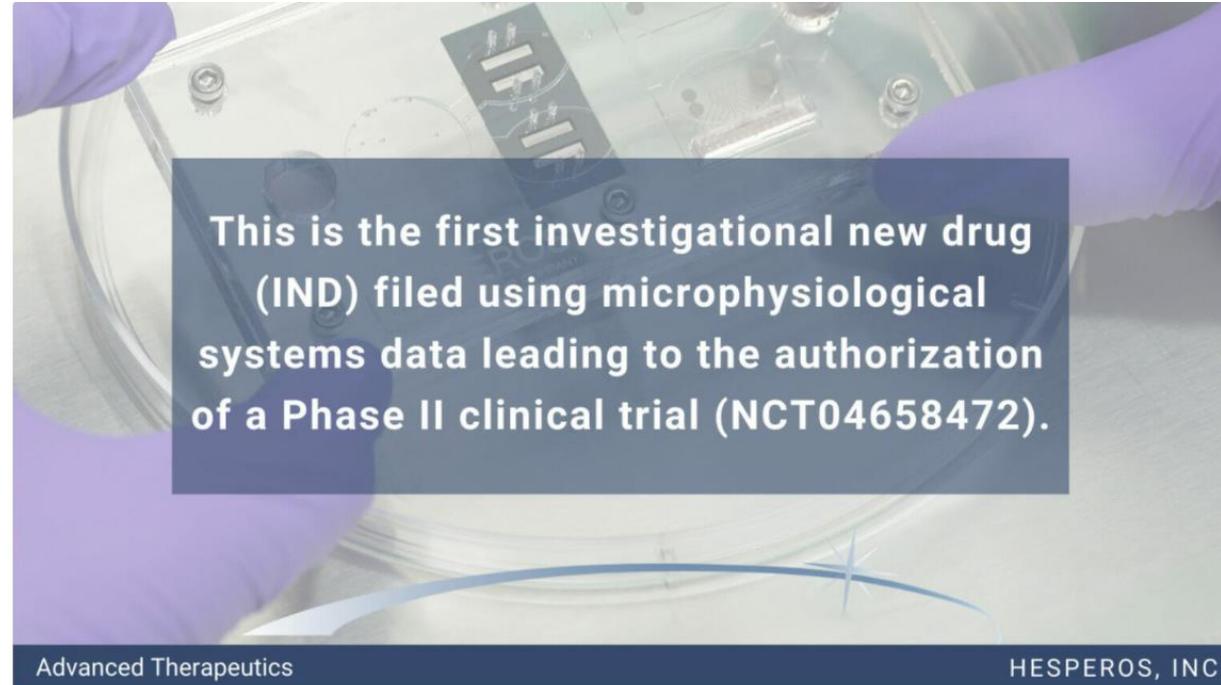
European Commission's Roadmap for Phasing-out Animal Testing



- Acknowledges animal welfare as an important concern of European citizens
- Proposes actions to further reduce animal testing (in addition to full ban on cosmetic testing in 2013)
- New roadmap with legislative and non-legislative actions towards an animal-free regulatory system
- Emphasis on modernization of science and strong support for research in developing alternatives

Break through in regulatory acceptance of MPS

HESPEROS
THE HUMAN-ON-A-CHIP COMPANY



- Hesperos showed potential to replace conventional animal efficacy studies for rare neuromuscular disorders
- Validated use of MPS system to mimic disease mechanisms of rare autoimmune neuropathies not replicable in animals
- Efficacy data from MPS system supported the authorization of a clinical study in 2021 through collaboration with Sanofi

Tissue and Cell Research Center Munich (TCRM)

The non-clinical research site of Daiichi Sankyo in Europe

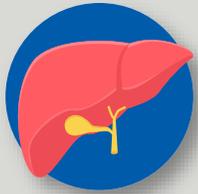
- Established in Germany in 1998, part of Daiichi Sankyo's global R&D
- Focusing on translational research using human biospecimens
- Works exclusively with human models as alternatives to animal testing
- Broad network of academic and commercial human tissue providers
- Initial focus: drug metabolism, drug absorption, drug-drug interaction
- Expanded focus: MoA, mechanistic investigation, biomarker research

Mission: Enhance the prediction accuracy of drug candidates' efficacy and safety by advancing the utilization of human models bridging the gap between experimental animals and clinical trials.



This presentation focuses on models applied at TCRM not Daiichi Sankyo Co. Ltd.

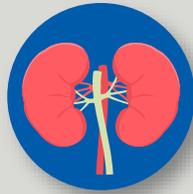
Acquisition of viable human tissue at TCRM



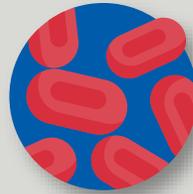
hepatocytes



intestine



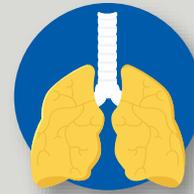
kidney



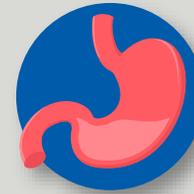
blood & plasma



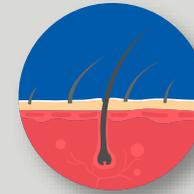
heart



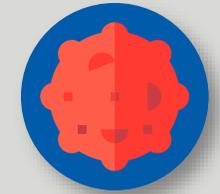
lung



stomach

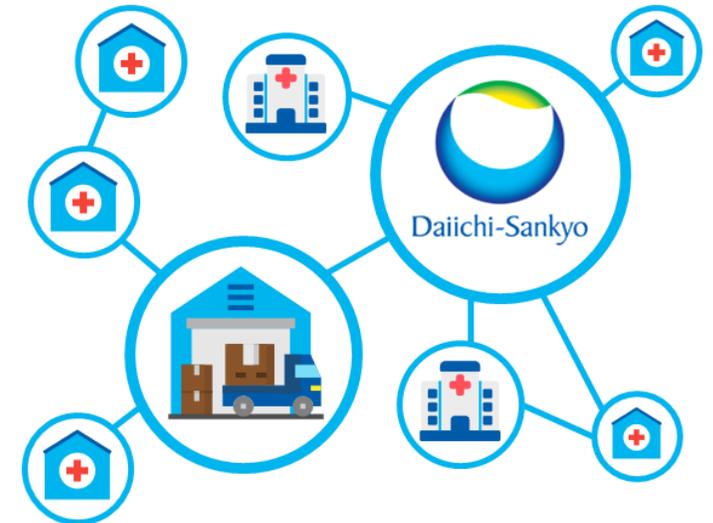


skin

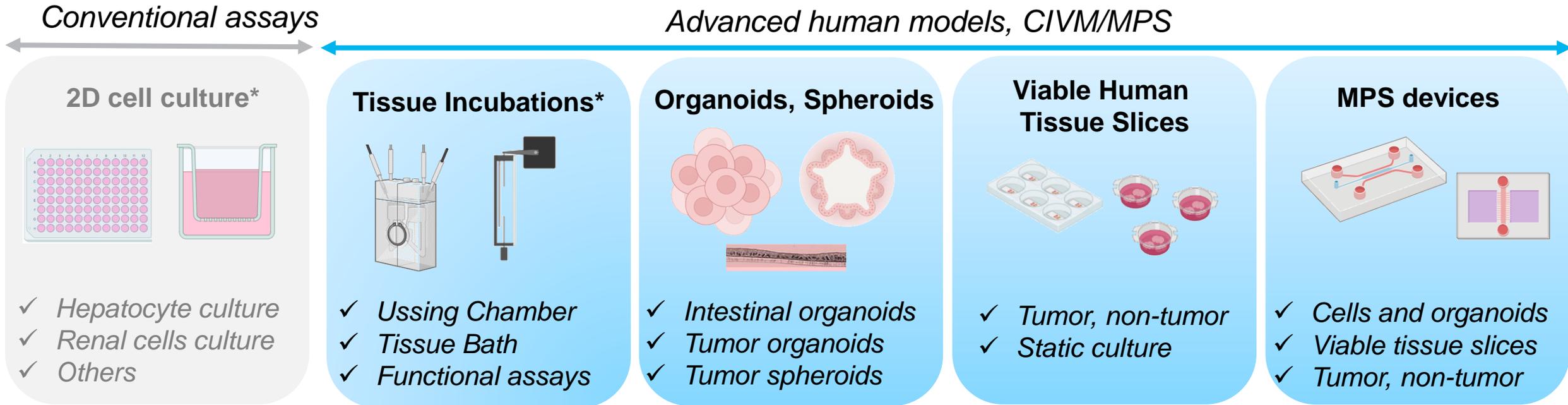


tumor

- Samples obtained from network of providers are from discarded surgical tissues
- Patients undergoing partial excision of organ, mostly due to cancer
- Written donor consent is given, no profit for patients, pseudonymised samples
- Donor information (e.g. age, gender, BMI, diagnosis, medication) available
- All samples tested negative for HIV, hepatitis B virus, hepatitis C virus
- Fresh tissues transferred to TCRM's laboratories immediately after surgery
- Collection of tissues approved by the local responsible Ethics Committee
- Research on basis of World Medical Association Declaration of Helsinki



Human models in current and past application at TCRM



Criteria for utilizing advanced human models:

- Clear advantage over conventional models
- Species differences or lack of suitable animal models
(e.g. human target specific drugs)

Examples of utilizing advanced human models:

- Mechanistic investigation in pharmacology / toxicity
- Evaluation of immunological mechanisms
- Disease models and Biomarker research

Human Tissue-derived Intestinal Organoids

Preparation: (Stemcell® Protocol)

- TCRM uses human small intestine and colon tissue for isolation of crypts

Application:

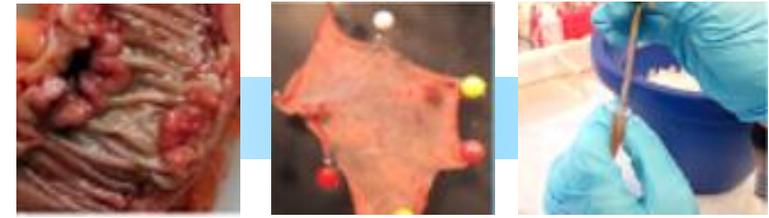
- Prediction of gut bioavailability ($F_a F_g$)
- Induction of intestinal CYP3A4 and P-gp (*ABCB1*)
- Assessment of intestinal safety of drugs

Advantages:

- Key intestinal features retained (crypts, villi, enzymatic activity)
- Inducibility of enzymes and drug transporters (CYP3A4 and P-gp)
- 3D configuration and 2D configuration in monolayer available
- Comparison between different intestinal segments possible

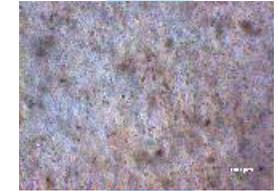
Limitations:

- Need further investigation on reproducibility and inter-donor variability
- Absence of vasculature and mechanical stimuli present *in vivo*
- Elevated costs of maintaining organoids in culture



Preparation of intestinal mucosa from fresh human intestinal tissue

Isolation of crypts

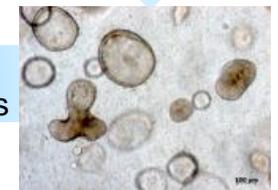


Cultivation of crypts/organoids in extracellular domes
10 – 14 days



3D Intestinal organoids

Minimum 2 passages

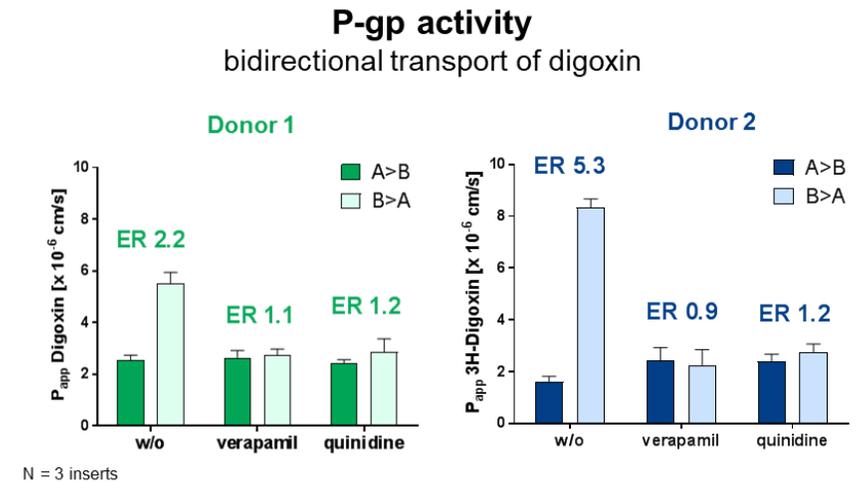
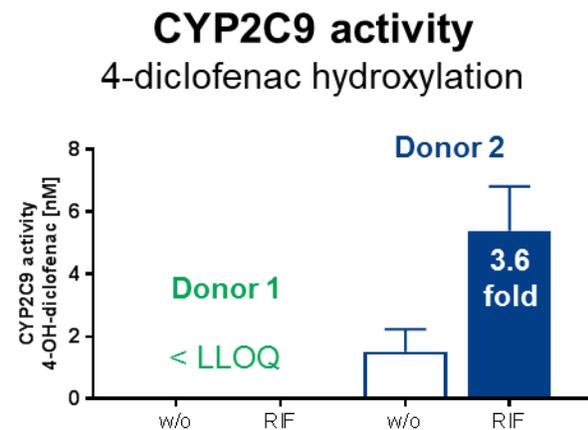
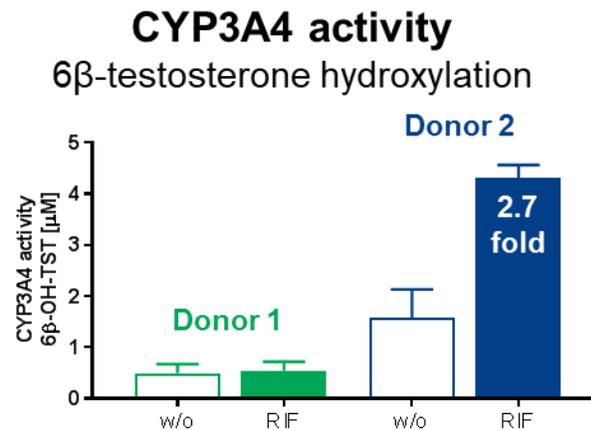
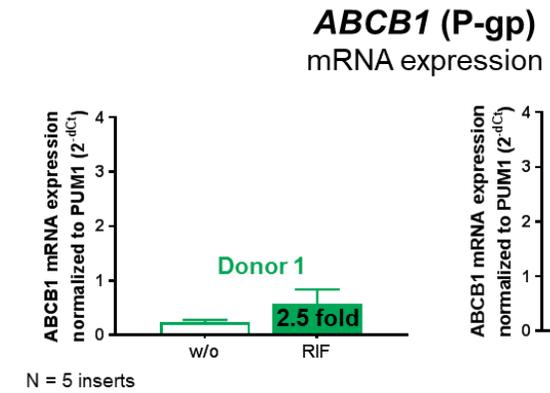
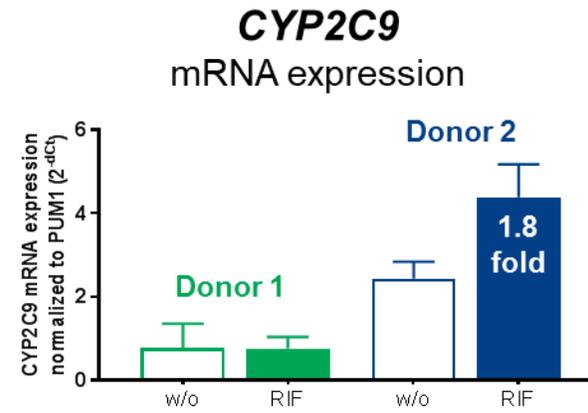
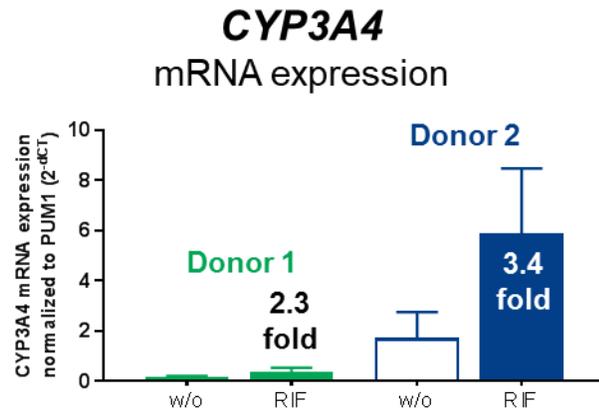


Expansion Seeding in Transwell™



Confluent monolayer 10

Human Tissue-derived Small Intestinal Organoids for ADME



- ✓ mRNA expression of CYP450 metabolic enzymes and drug transporters shown
- ✓ Metabolic activity of CYP450 enzymes inducible after treatment with rifampicin (RIF, 30 μ M, 48 h)
- ✓ P-gp mediated transport of digoxin and its inhibition by verapamil (50 μ M) and quinidine (30 μ M) shown

Human Kidney Model (Static and MPS)

Used cells:

- Freshly isolated renal proximal tubule cells (RPTEC) in-house
- Commercially available cryopreserved primary or immortalized RPTEC

Goal:

- Prediction of human renal clearance and renal DDI
- Evaluate renal secretion and re-absorption simultaneously
- Assess inter-species differences in renal clearance

General observations:

- All types of RPTEC loosed transporter expression over time
- RPTEC in static culture might be suitable to evaluate OCT2 vs. MATE-driven DDI
- Cryopreserved and immortalized RPTEC show low initial transporter expression
- Freshly isolated RPTEC displayed different growth and attachment between donors

In the MPS device:

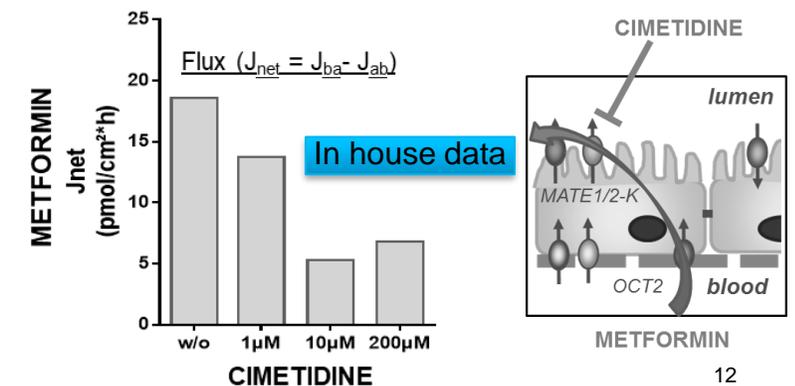
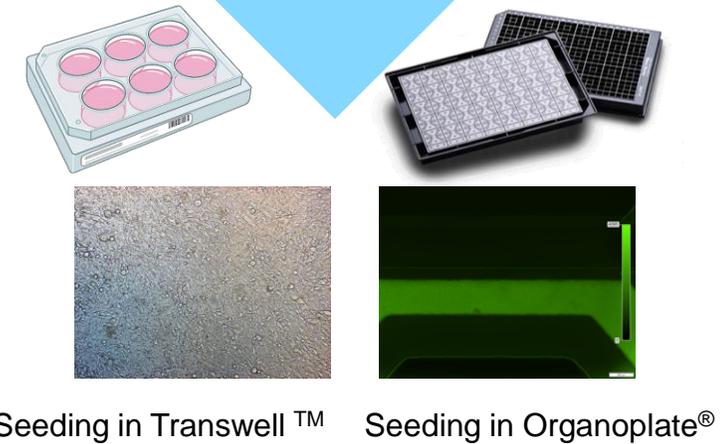
- Immortalized human RPTEC showed no organic anion/cation secretion
- Growing freshly isolated RPTEC in MPS device was very challenging

Conclusion:

- No functional differences between cells seeded in static model or MPS
- Transporter expression is decreased or lost in all cultures
- Kidney model discontinued

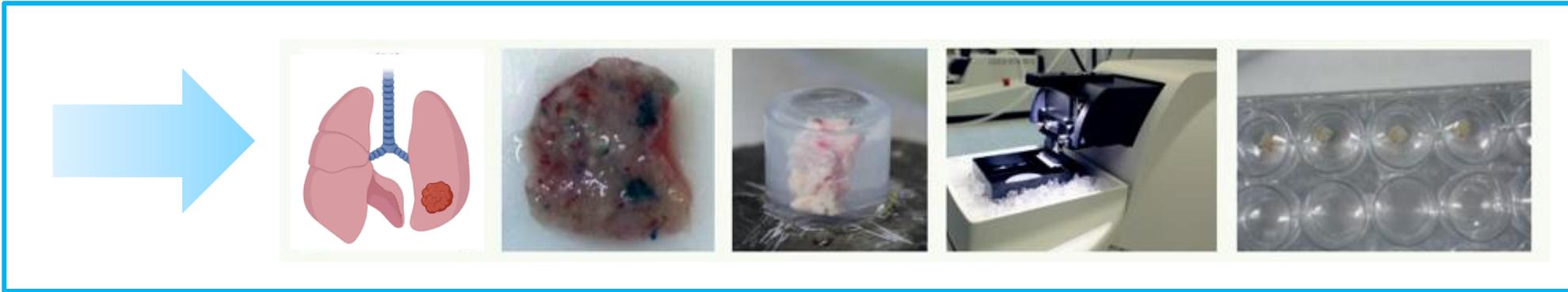


Fresh renal cortex minced and digested with collagenase.
RPTEC separated by density centrifugation



Viable Human Tissue Slices (tumor and non-tumor tissue)

Concept: *Ex vivo* model for translational research and mechanistic evaluations in pharmacology and safety
Advancing TCRM`s capability to obtain fresh human tissue and perform functional studies



Workflow: Fresh tissue collection from the hospital, agarose embedding, cutting by tissue slicer, cultivation

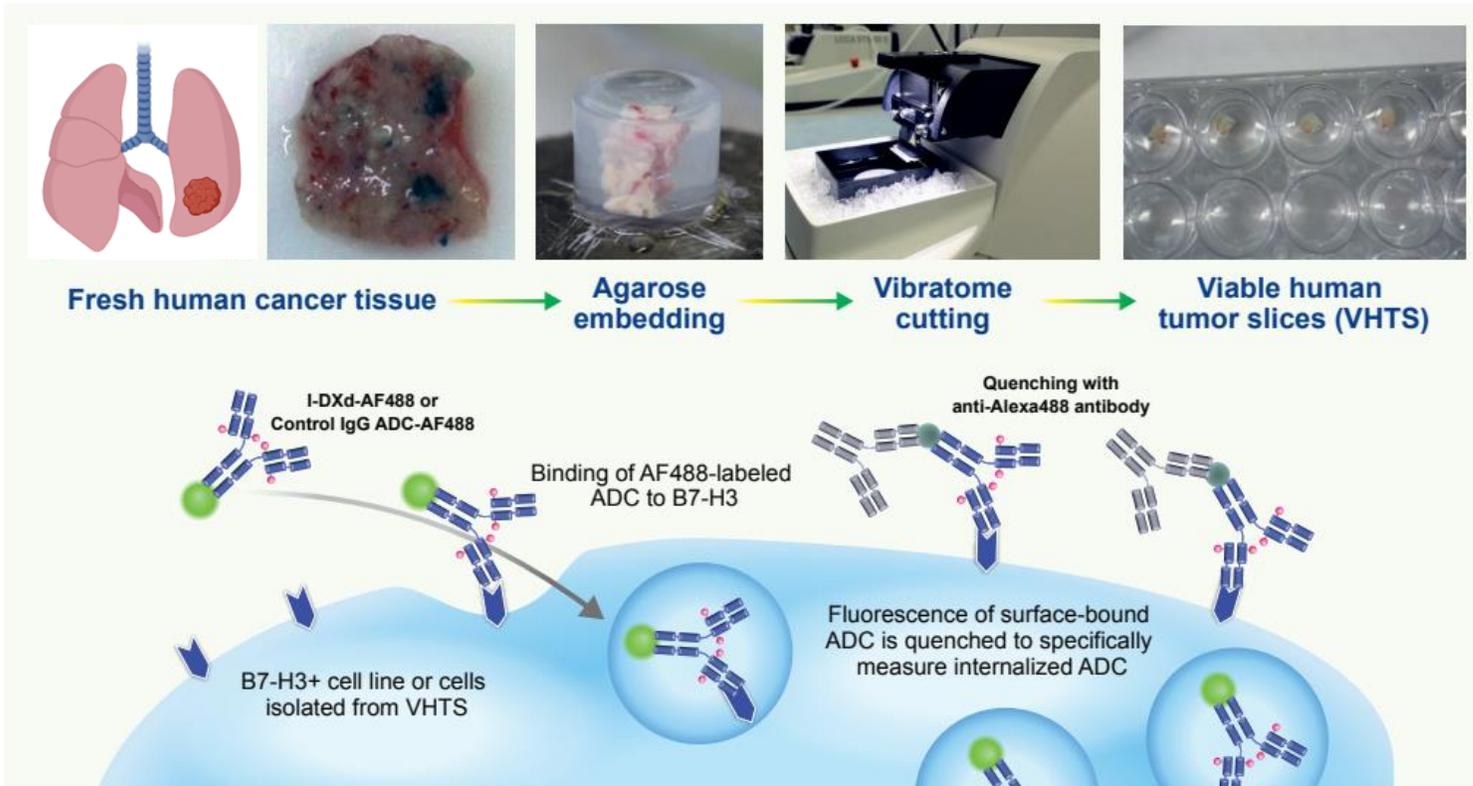
Advantages: Full spectrum of cell types with preserved cell interaction and function, histologically readable results

Read-outs: FCM, RNA sequencing, multiplex chemokine/cytokine analysis, histology, immunostaining, cytotoxicity

Objective: Effect on (non-)tumor cells, cell-type specific internalization, immune cell modulation, payload release, biomarker identification, target expression in (non-)tumor tissue, experiments with combination drugs

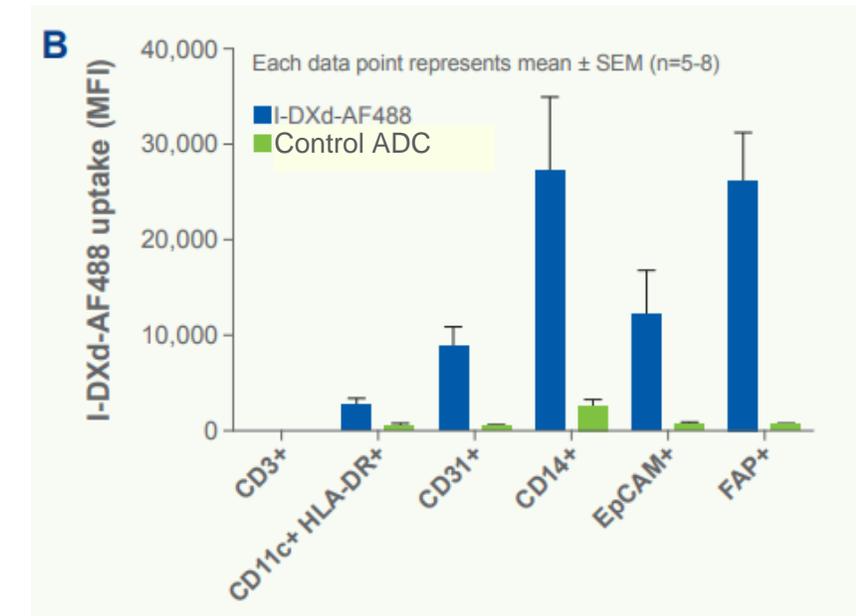
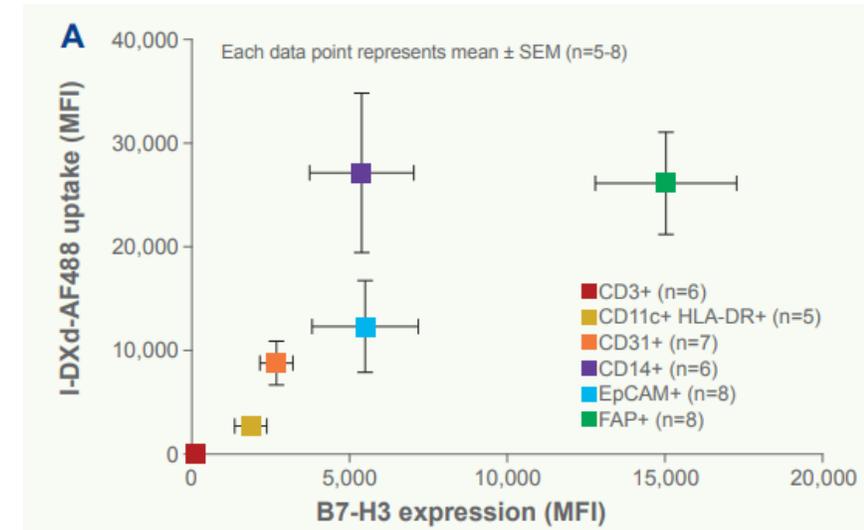
Viable human tumor slices for oncology research

Target-dependent internalization of I-DXd (I-DXd) deruxtecan (I-DXd)

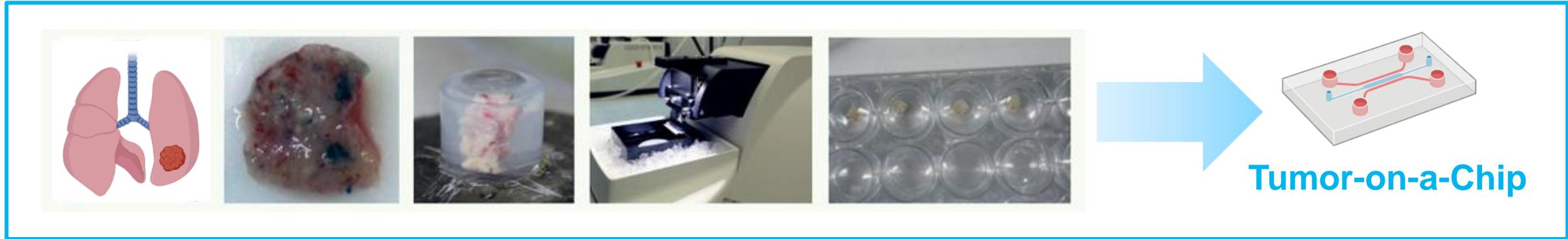


Tumor slices prepared from fresh human non-small cell lung cancer tissue from eight patients and incubated with fluorescently labeled I-DXd or Control ADC, afterwards enzymatically digested and analyzed by flow cytometry.

I-DXd internalization was shown into B7-H3-expressing tumor cells and other cell populations in the tumor microenvironment demonstrated efficient payload delivery in a target-dependent manner.



Optimizing Viable Human Tumor Slices model : Tumor-on-a-Chip



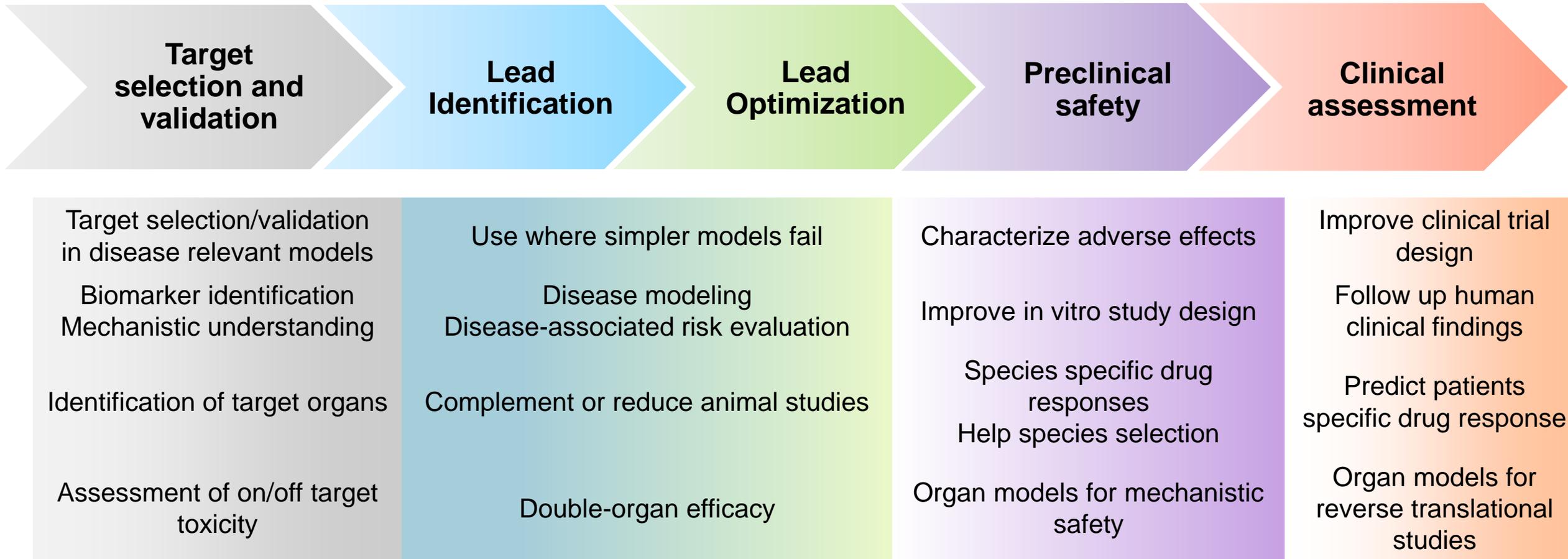
Limitations of the static model

- X** Restricted viability
- X** Limited longevity
- X** Insufficient complexity
- X** Co-cultures challenging

Improvement in MPS

- Tumor and its microenvironment (TME) in dynamic culture
- Prolongation of the survival of tissue slices culture
- Co-culture approach more feasible
- Evaluation of drug effect on TME and immune cells

Perspectives of application of MPS/CIVM in pharmaceutical industry



Conclusion CIVM/MPS

Opportunities:

- ✓ Are more predictive and physiologically relevant compared to traditional methods
- ✓ Can complement traditional models and make biomedical research more efficient and effective
- ✓ Are responsive to 3Rs principle of reducing, refining, and replacing the use of animals in nonclinical research

Challenges:

- The adoption by the pharmaceutical industry and regulators has been relatively slow
- Qualification for specific contexts of use (COU) supporting reproducibility and efficacy is necessary
- Disclosure of assay development for specific COU would be supportive but difficult in pharma

Needs:

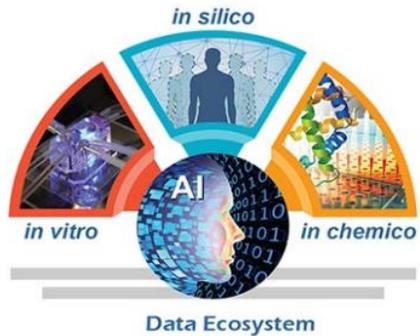
- Collaboration between consortia and regulatory bodies is essential to for integration of CIVM/MPS



On **January 25, 2024**, The National Institutes of Health (NIH) Council of Councils approved the concept of the new NIH Common Fund's Complement Animal Research In Experimentation (**Complement-ARIE**) Program to speed the development, standardization, validation, and use of human-based New Approach Methodologies (NAMs).

[Complement Animal Research In Experimentation \(Complement-ARIE\) Program | NIH Common Fund](#)

Complement-ARIE: Innovate, Integrate, Coordinate, and Transform



- **Innovate** understanding of human health and disease pathways across diverse populations
- **Integrate** innovative NAMs (*in vitro*, *in chemico*, and *in silico*) with AI and FAIR data ecosystems
- **Coordinate** with ICs, agencies, and public-private partnerships
- **Transform** the way we do basic, translational, and clinical sciences by leveraging the full scientific toolbox

Projected 10-Year Timeline and Budget

2025	2026	2027	2028	2029	2030	2031	2032	2033	2034
\$35M	\$35M	\$40M							
Technology development projects/centers - \$23 - 26M per year									
Data & NAM coordinating center - \$5 - 6M per year									
Validation network for regulatory implementation - \$3 - 4M per year									
Community engagement and training - \$3 - 4M per year									
Strategic engagement- \$1 - 2M per year									
RMS: NIH staff salary, travel - \$1M per year									

NIH National Institutes of Health
Office of Strategic Coordination - The Common Fund





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Acknowledgements

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- Medicinal Safety Research Laboratories
- Discovery Research Laboratories



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- Tissue and Cell Research Center Munich

