



# Bioassays: The Superstars of Drug Development

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**Bioassays: Scientific Approaches & Regulatory Strategies**

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## Disclosure of potential conflicts of interest

Helena Madden is a Sr. Director of Regulatory CMC at bluebird bio, Inc. and owns equity in the company.

This presentation reflects the views of the author.

# Remember Me?



**BIOAAYS**

SCIENTIFIC APPROACHES AND REGULATORY STRATEGIES

10 YEAR ANNIVERSARY · 2009-2019

- 
- In the beginning.....
  - Scientific Approaches
  - Regulatory Strategies
- } **Not a static subject matter**
- The objective and the secret sauce = **conversation**
  - We are all humming the same tune
  - Thank you



# agenda

- Bioassay Basics
- Bioassay Challenges
- What Can Bioassays Tell Us?
- Words of ~~Wisdom~~ Experience

# Bioassay Basics

# Bioassays Have Been Around For A Long Time

A bioassay shows that a drug candidate “does something” and “has an activity” in a living system



Early ancestors chewed a berry, smoked a leaf, drank tea, or made a paste from plant parts and watched for a medicinal effect



## 1894 - Paul Ehrlich

- Animal bioassays
- Test vs Standard Preparation
- Defined Unit of Activity based on activity of a specific mass of the Standard Preparation



## Today

Bioassays play a role in many industries and in everyday life



# In Biological Drug Development Bioassays Can Be Used To:

- Measure an *in vivo* or *in vitro* response in a drug discovery or research setting
- Determine product activity in animal models of disease
- Select drug candidates, drug targets, and production clones
- Show pharmacokinetics (PK) and bioavailability
- Evaluate immunogenicity
- Influence design of clinical trials
- Demonstrate understanding of a therapeutic biological pathway or mechanism of action
- Characterize and control a drug manufacturing process
- Test a drug in a QC lab for assurance of biological function and molecule stability
- Show the function of a transgene
- Evaluate biosimilarity
- Evaluate the use of a product for a new indication or new Mechanism of Action (MoA)

# Why Do We Need Bioassays?

**All Health Authorities** have expectations and requirements for assurance of identity, purity, **POTENCY**, and stability of biotherapeutic drug substances and drug products used through all phases of clinical development

## ICH Q6B - Specifications, 2.1.2 Biological Activity

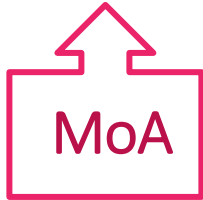
- Assessment of the biological properties constitutes an equally **essential step** in establishing a complete characterization profile.
- A valid biological assay to measure the biological activity should be provided by the manufacturer. A **relevant, validated potency assay** should be part of the specifications for a biotechnological and biological drug substance and/or drug product.

### ➤ **Examples include:**

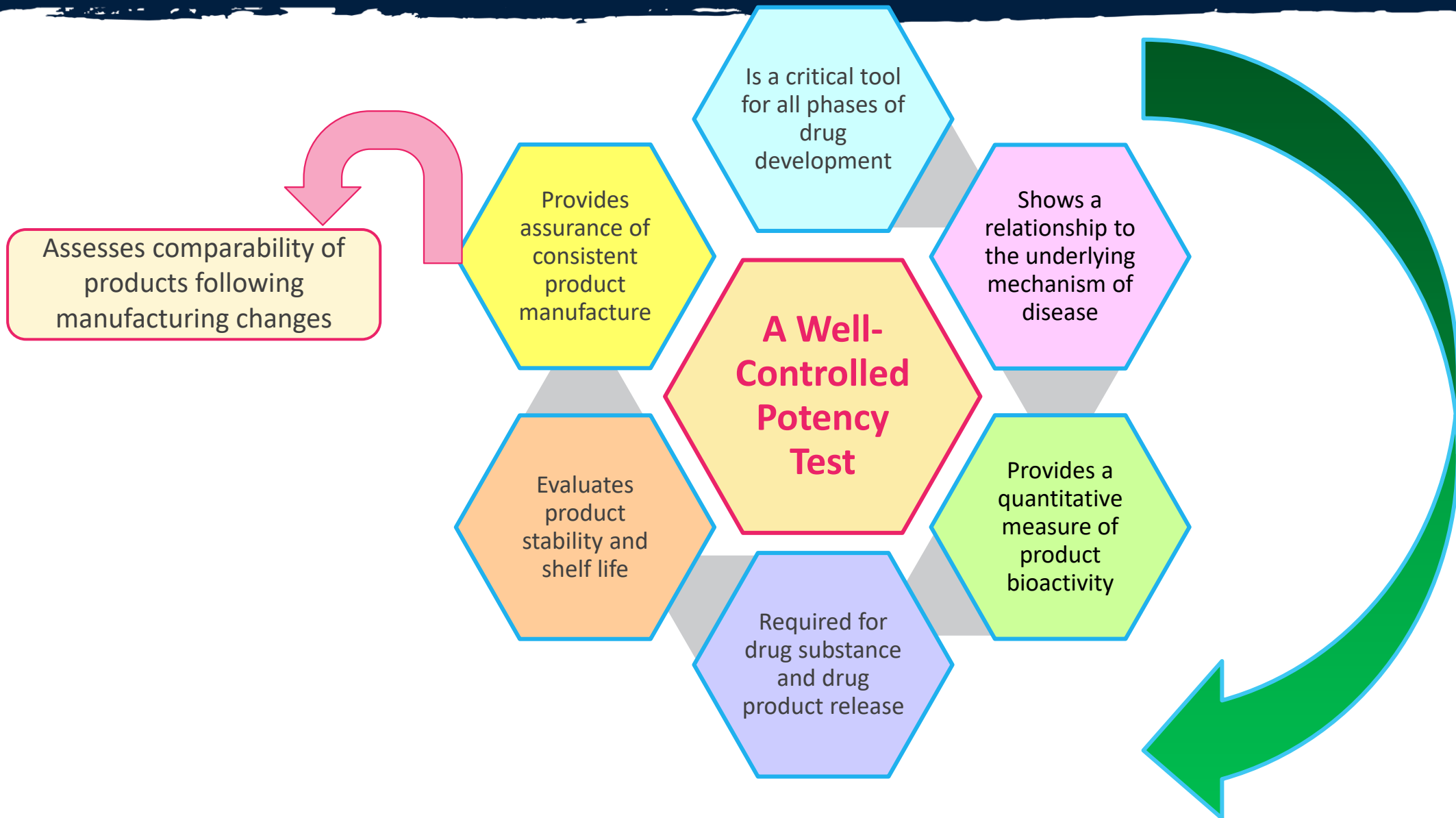
- Animal-based biological assays
- Cell culture-based biological assays
- Biochemical assays (enzymatic reaction rates or biological responses induced by immunological interactions)
- Other procedures, such as ligand and receptor binding assays, may be acceptable



# Definitions of Potency

- **ICH Q6B: Potency** is the **quantitative measure of biological activity** based on the **attribute** of the product, which is **linked to the relevant biological properties**.
  - The **assay** demonstrating the biological activity should be **based on the intended biological effect** which should ideally **be related to the clinical response**.
- 
- **21 CFR 600.3(s):** The word **potency** is interpreted to mean **the specific ability or capacity of the product, as indicated by appropriate laboratory tests** or by adequately controlled clinical data obtained through the administration of the product in the manner intended, **to effect a given result**.
  - **21 CFR 610.10: Tests for potency** shall consist of either **in vitro or in vivo** tests, or both, which have been **specifically designed for each product** so as to indicate its potency in a manner adequate to satisfy the interpretation of potency given by the definition in §600.3(s) of this chapter.

# The Bioassay Bottom Line



# Bioassay Challenges

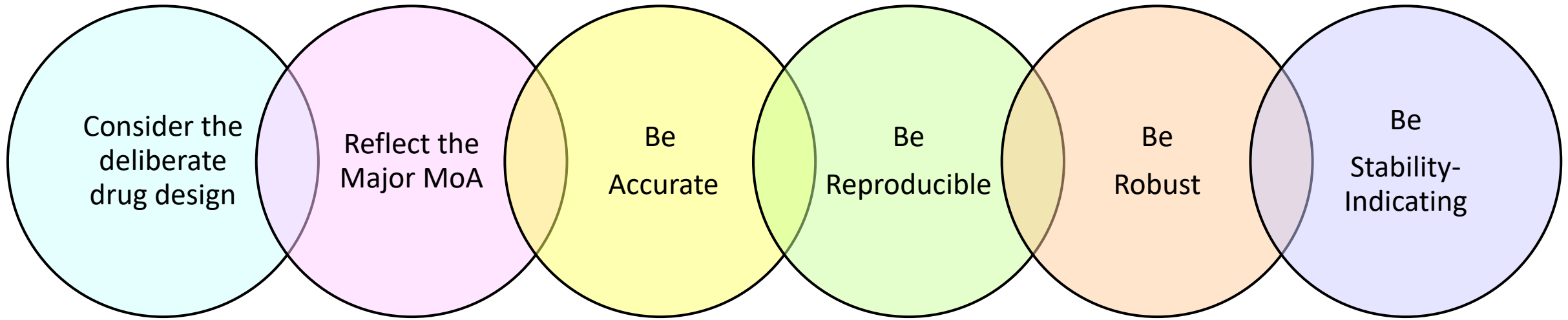
# Bioassays are Unique Analytical Tests

- Bioassays and potency tests are specifically designed for **each product or target**
- Should represent the mechanism(s) of action for a specific product
  - Delivery or binding to cell and uptake into cell could be pivotal functions, **but is there more?**
  - **Clinical (Primary) MoA:** – **product binds and then what?** → blocks, activates, expresses, kills, etc.?
  - **Secondary MoA:** *example* - **Fc Effector Function** – product binds to specific Fcγ receptors on effector cells → ADCC (antibody-dependent cellular cytotoxicity, ADCP (antibody-dependent cellular phagocytosis), binds receptor C1q → CDC (complement- dependent cytotoxicity) **NOTE: Fc effector function could be a primary MoA**
  - **Work with your Research Group to verify that the *in-vitro* format of the bioassay is relevant to the MoA**
- **Multiple methods may be needed to define potency**
  - More than 1 MoA
  - When effector function cannot be eliminated as a MoA, need assays to monitor effector function
  - Clinical MoA unknown
  - Bioassay to control manufacturing process → **often same as release bioassay, run in a different format**
  - Bioassay for DS/DP lot release → **assay performance is key, more replicates and fewer samples per run**
  - Bioassay(s) for molecule characterization → **provides useful information; use for specific situations**

# Bioassays are Unique Analytical Tests

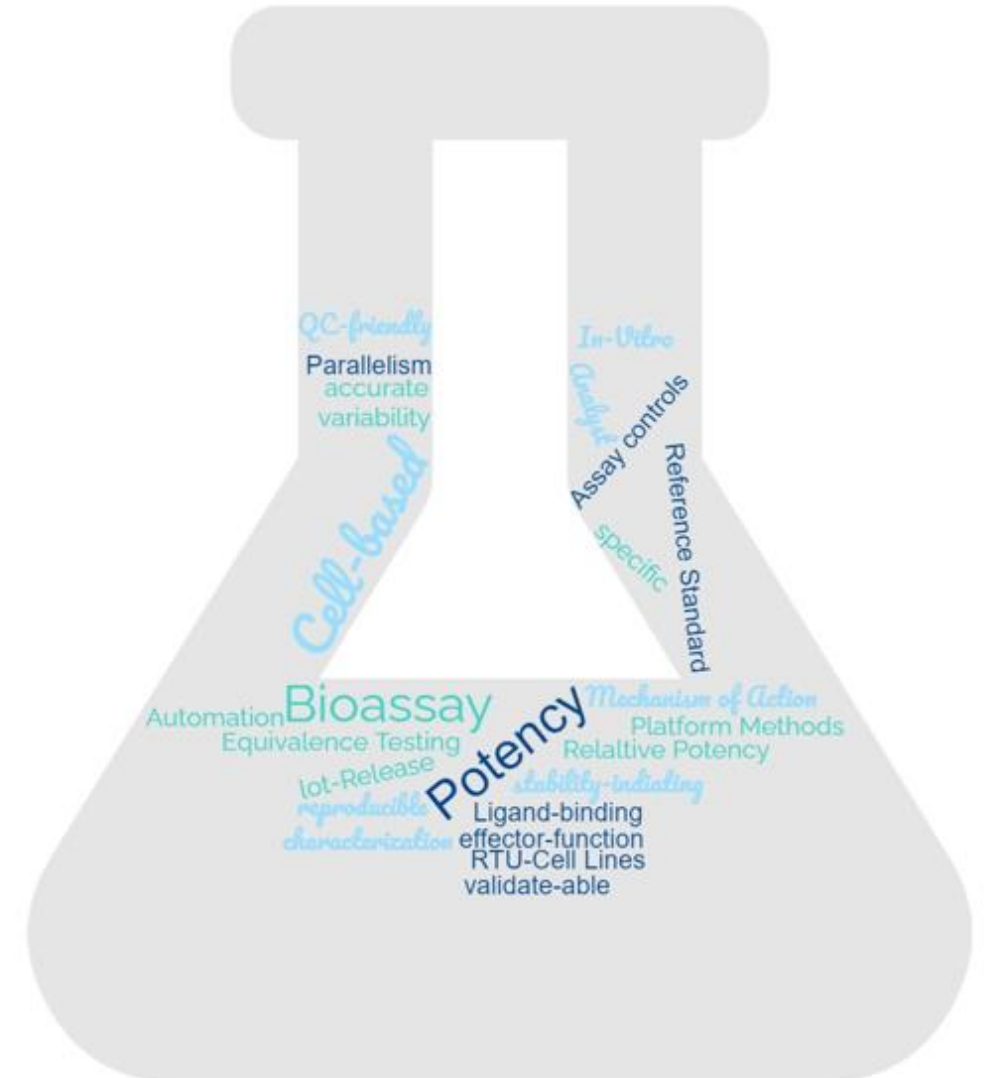
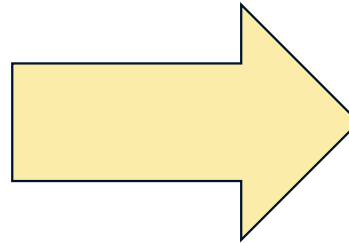
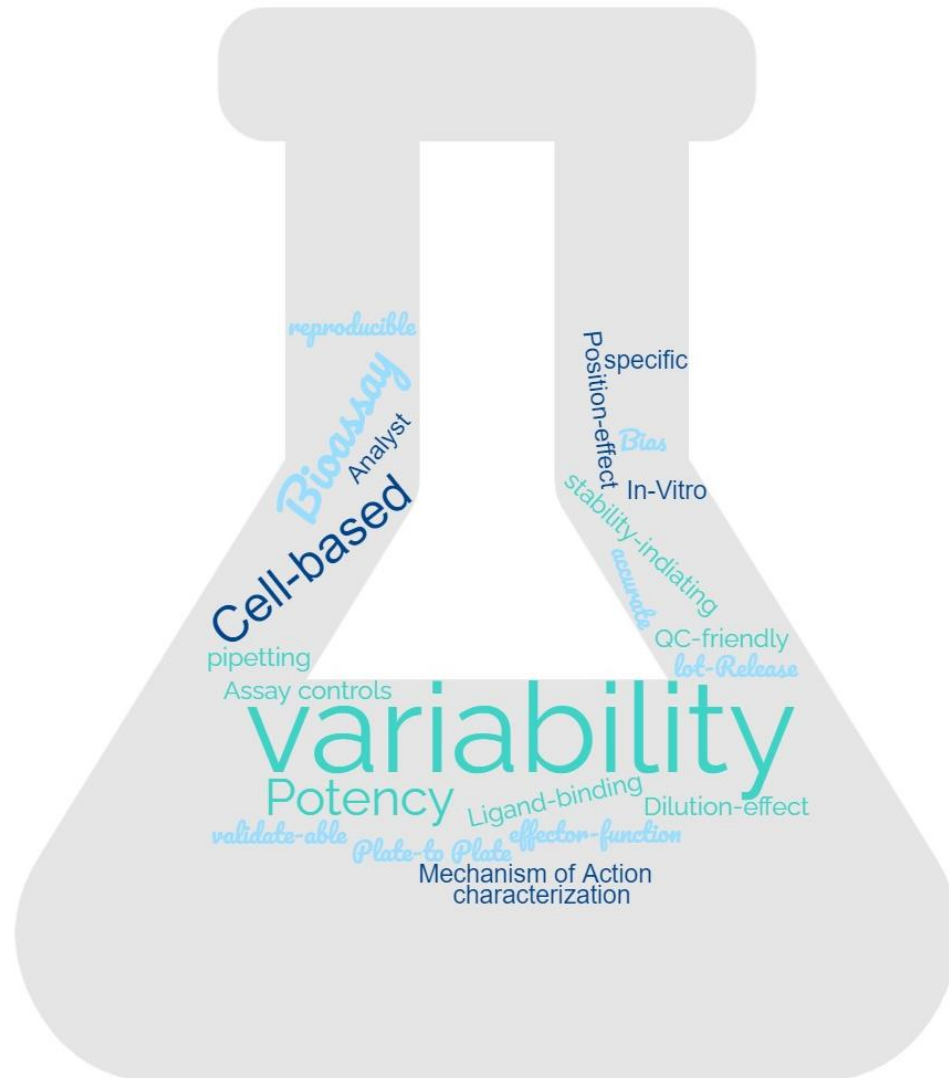
- **Complex products** are difficult to characterize therefore potency is a critical parameter
- A potency test or combination of tests can model the interactions of complex pathways in an in-vitro environment
- Potency test results show that **a consistently manufactured drug product** is administered during all phases of clinical investigation
- A Phase-based or incremental approach for development of a bioassays program is acceptable and advised (except for biosimilar development)
  - **Early Phase**: Target binding → qualified
  - **Late Phase**: Cell-based functional → validated by pivotal trial and Ph3 GMP campaign
    - **Develop as early as possible**
- Analytical information generated over the course of development using different assays must be bridged

# A “Gold-Standard” Potency Assay Should:



- ✓ Simple Format
- ✓ Cell lines available & stable
- ✓ Critical reagents (e.g., commercial assays, antibodies) available & stable
- ✓ Lot to lot variability of critical reagents evaluated
- ✓ Reference Standards appropriate and available
- ✓ Instrumentation and equipment dependable, qualified / validated
- ✓ Clear methods for analyses and results reporting
- ✓ One control chart for all testing sites
- ✓ Retain samples for evaluation of future method changes

# Bioassays Then and Now



# Points to Consider: Reduction of Variability

## United States Pharmacopeia (USP)<1032> Design and Development of Biological Assays

*“Because of the inherent variability in biological test systems, an **absolute** measure of potency is more variable than a measure of activity **relative** to a Standard”*

*“Assuming that the **Standard** and **Test** materials are *biologically similar*, statistical similarity should be present, and the Test sample can be expected to behave like a *concentration or dilution* of the Standard.”*

- **Determine Relative Potency** → Tests for parallelism, equivalence, curve similarity, etc.
- Use **Platform** technologies (e.g., Luciferase reporter, FRET binding, etc.)
- Use **Platform** instrumentation
  - Equipment should be qualified and routinely calibrated
- **Standardize** cell culture systems
  - Use easy to culture cell lines
  - Create or buy Ready to Use (**RTU**) cells
  - Consistent cell number and cell age
  - Consistent culture conditions





## Points to Consider: Reduction of Variability, cont'd

- Sufficient **assay development** and **performance optimization**
  - Evaluate and optimize **every method step** including **data analysis**
  - **DoE approach** – repeat evaluations to confirm conclusions
  - Study and optimize plate-layout and plate-uniformity
  - Shorten incubation times and amplify signal
- Verify **sample concentrations** at time of assay
- **Automation** of method unit operations (liquid handling systems, pipetting, wash, detection, analysis)
- Develop meaningful
  - **System Suitability** Criteria: Is the assay valid?
  - **Sample Suitability** Criteria: Is the potency estimate for the test article valid?
- Analyst Training
- Well-designed **method transfers**
  - Co-validate methods (Transferring and Receiving groups)

# Points to Consider: Control Critical Reagents

## What reagents are critical?

- Cell lines, Abs, Ab conjugates, recombinant proteins, FBS, assay controls, Reference Standards, commercial assays, etc.

## Points to consider:

- In-house production vs commercially sourced
- Characterization
- Qualification
- Handling (aliquoting, freeze thaw, etc.)
- Storage and stability (expiry dating, re-testing)
- Documentation (SOPs, work instructions, CONTROL CHARTS, etc.)
- Changing critical reagents
  - Use pre-defined procedure and acceptance criteria for new reagent lots



# A Word about Reference Standards (RS)

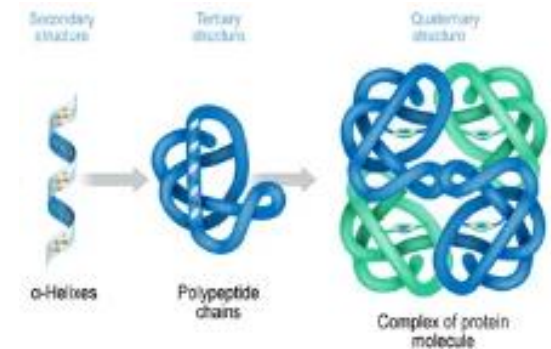
## ICH Q6B, 2.2.1 Reference Standards and Reference Materials

- At the time of submission, the manufacturer should have established appropriately characterized in-house primary reference material, prepared from lot(s) **representative of production and clinical materials**. In-house working reference material(s) used in the testing of production lots should be calibrated against this **primary reference material**.
- The potency of bioassays is typically expressed as percentage of potency in comparison to a RS (% RP)
- A link needs to be maintained between the **potency** of the RS used during clinical trials, in characterization studies, and in commercial release and stability tests
  - Use the appropriate number of replicates for qualification of RS potency
- **Acceptance criteria (AC) for RS potency qualification** should not include manufacturing variability. **Don't** use potency data from multiple lots to set AC; **DO** use multiple replicates (e.g., 9 independent runs) of a single lot

# What Can Bioassays Tell Us?

# So How Does Your Product Work?

- **Continuously** learn from clinical trial results and **continuous** analytical characterization of your product
- Conducting clinical trials for evaluation of every product variant or manufacturing change is impractical
  - Time, Expense, Sensitivity
- **Bioassays can be used to correlate biological activity to structure and MoA → link to the clinical response**
- Relationships can be derived between bioactivity and protein structure
  - Higher Order Structure (HOS)
  - Posttranslational modifications (PTMs)
    - Phosphorylation → can influence cell cycle, growth, apoptosis, signal transduction
    - Glycosylation → absence, presence, type of carbohydrate can influence bioactivity
    - Product Variants – e.g., oxidized variants or clipped variants can result in the loss or gain of activity



**Characterize your product to understand what product attributes contribute to biological effects**

- Measurement of a PTM may be more sensitive than a method that measures bioactivity

# Is a Potency Assay Always a Biological Assay?

## ICH Q6B - Specifications, 4.1.4 Potency

- A relevant, validated potency assay should be part of the specifications for a biotechnological and biological drug substance and/or drug product. When an **appropriate potency assay is used for the drug substance**, an alternative method (physicochemical and/or biological) may suffice for quantitative assessment of the **drug product**. However, the rationale for such a choice should be provided.

## Justify your rationale using **supportive scientific data**

- A cell-free assay that reflects the MoA could be used to assess potency
- Examples
  - Receptor binding - microtiter plate-based
  - Receptor phosphorylation using a cell membrane preparation
  - Direct binding to a specific ligand

# Is a Potency Assay Always a Biological Assay?

- **Correlation to a cell-based bioassay is an expectation**
  - The cell-based assay is the link to the clinic effect
  - Is the cell-free assay superior? Show this using data!
  - Propose to use cell-based assay for comparability studies, qualification of a new Reference Standard, etc.
- **Surrogate analytical assays may be used to demonstrate potency if the following are shown:**
  - A solid understanding of product bioactivity and other critical product quality attributes
  - Correlation to relevant, product-specific bioassay results
  - Qualified or validated assays are used
  - Results are from multiple lots of appropriate (active, inactive, degraded, etc.) test articles and/or patient samples

**The amount and types of correlation data needed to justify your approach depends on product complexity**

**Correlations Are Powerful Friends**

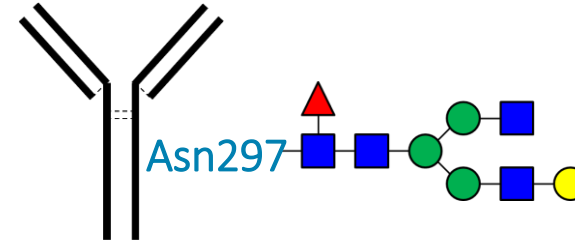
# The Role of Bioassays in Determining Relationships Between Structure and Function of a Biotherapeutic

- Technology advancements in the **analytical evaluation** of protein structure have been significant
  - Structure is necessary for bioactivity, but data from structural assays, **alone**, are not enough to assure molecule potency
  - Perturb the structure and investigate → does this structural change impact **bioactivity**?
- Bioassays can inform about a change in product chemistry or product structure
  - But **only if** that chemical or structural component plays a role in activity
  - Consider the **overall** impact of **intentional** structural change – did any **unintended** changes occur?
- Demonstrating linkages between the structure of a biotherapeutic and its function increases **product knowledge**; use product knowledge to your advantage
- **Orthogonal methods** that measure physiochemical and/or structural components of a product can serve as surrogate measures of potency, but don't necessarily replace potency assays in the overall assessment of pharmaceutical quality
  - MORE work is needed!! **A LOT of work** is needed to build scientific rationale for using surrogate tests



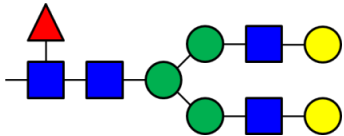
# Can Physicochemical Methods Replace Traditional Bioassays?

- MANY literature references show the impact of N-glycans on IgG1 Mab bioactivity, safety, and efficacy

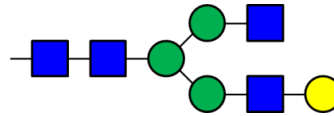


- For example:

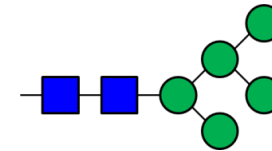
Increase Gal = ↑ CDC activity



Decrease Fuc = ↑ FcγRIIIa binding  
+ ADCC activity



High Man, No Fuc = ↑ FcγRIIIa binding  
+ ADCC activity



Fuc: Fucose, GlcNac: N-Acetylglucosamine, Man: Mannose, Gal: Galactose, ADCC: Antibody-Dependent Cellular Cytotoxicity, CDC: Complement-Dependent Cytotoxicity

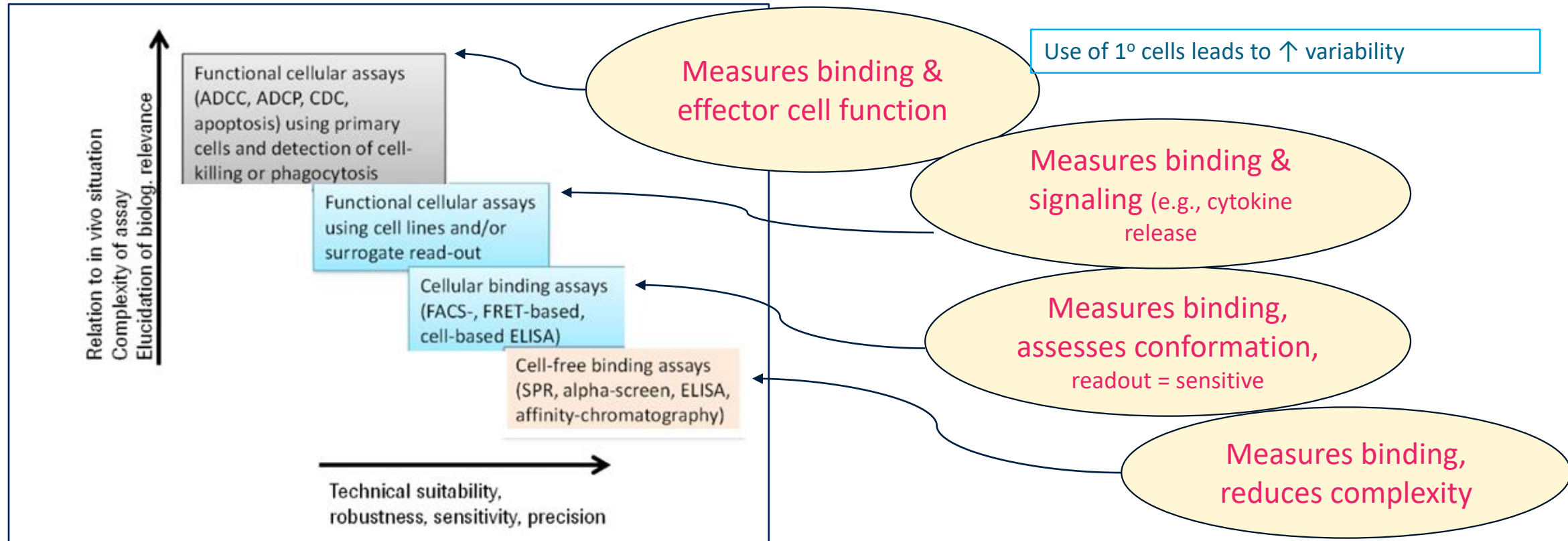
- Production of Mabs and Fc fusion proteins in mammalian cell culture systems results in heterogeneous N-glycan patterns
- N-glycans affect the conformation of antibodies
- N-glycans modulate interactions with Fc receptors on immune cells
- N-glycans can impact antibody effector function
- N-glycan composition may be a critical quality attribute; monitor to assure process and product consistency<sup>25</sup>

# Factors Needed for Successful Structure Activity Relationship Studies

- **Strong partnerships** between bioassay specialists, analytical chemists, and biophysicists
- **Resource planning** – *it takes more time and more people than you think*
- **Sample generation:** express Mab in a fucosyltransferase-deficient cell line, use enzymes, enzyme inhibitors, chromatography enrichment, etc. to create a library of variants on a Mab
  - De-glycosylated (mannose and/or galactose)
  - Hyper-glycosylated (mannose or galactose)
  - Hypo-glycosylated (mannose or galactose)
  - + / - sialic acid
  - + / - fucose
  - Mixtures
- Chromatographic separation and enrichment of each N-glycan variant type
- Characterize each variant:
  - Size exclusion chromatography (SEC) – aggregation? Capillary Electrophoresis methods – fragmented forms?
  - Mass Spectrometry – glycan structure, any modifications (oxidation, deamidation, etc.)?
  - Evaluate and consider variant stability
- Create mixtures containing various amounts of N-glycan variants

# Evaluate Bioactivity of Each Variant Using Well-understood Bioassays

## Analysis of N-glycan variants vs Reference Standard Using Potency Assay Matrix



Bioassays 2022, A Better Understanding of Bioassays, Florian Cymer, Hoffmann La Roche, Ltd.

- Bioassays are a critical tools to show how Mab structure influences bioactivity & potency
- Principles and learnings can be applied to other modalities

# Potency of Complex Products

- Antibody Cocktails, BiSpecific Abs, Antibody Drug Conjugates, Gene Therapies, Cell Therapies, etc.
- **Potency** is a **key parameter** for complex products which have unknowns & are difficult to characterize
- A **combination of multiple bioassay methods** may be needed to evaluate potency of complex product
  - During drug candidate development
  - For product characterization
  - To control DS and DP manufacture
  - For DS and DP release and stability testing
  - For comparability studies
- **Provide rationale** for bioassay application strategy: **what bioassay to use, for what purpose, and why**
- What analytical tests are performed? How do they compliment or strengthen bioassays results?

Combinations of all product quality attributes matter,  
but **Bioassays are the superstars**



# Drug Candidate Failures

- All fingers point to the bioassays
- Bioassay won't work?
  - The mechanism of action may not be fully known
- Do you understand your drug candidate?
  - Is effector function part of MOA? Other?
- Bioassay transfer to QC is difficult
- Bioassay validation fails
- Drug design or indication evolves → did you change your bioassay if needed?



**Listen  
to your  
Bioassay**

# Words of ~~Wisdom~~ Experience

# Words of ~~Wisdom~~ Experience

- Start potency assay development as **early** as possible
- **Understand** the product mode of action
  - Reflect the physiological situation as closely & as practical and possible in your potency assay
- Develop **multiple measures** of potency and **document** assay performance & suitability
- Potency assay development **should be continuous** throughout product development
- Use a product life cycle approach (e.g., simple binding → cell-based, functional)
  - Validation of your potency assay is needed for pivotal trial DP and for BLA submission
  - **Plan ahead for future comparability**
  - Measure potency in stability studies

# Words of ~~Wisdom~~ Experience

- **Test multiple** bioassay reagent lots, instruments, analysts; **evaluate method robustness**
- Understand what **product attributes contribute to the biological function**
  - Evaluate contribution of post translational modifications
  - Evaluate bioactivity when protein structure changes
- Talk to regulators about potency strategies, reference standards, and challenging issues
  - **Listen to regulators!!**

Remember that: Combinations of product attributes matter, **but**

***Bioassays are the superstar methods***

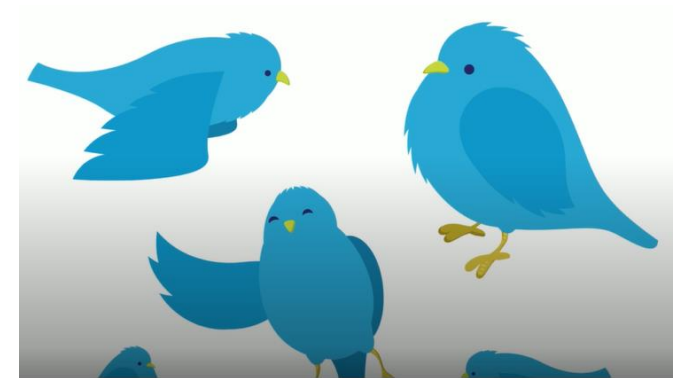


***Keep the conversations going between industry and regulators***



# Acknowledgements

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*THANK YOU!!!*

and a “*SHOUT OUT*”  
to

*EVERYONE* who  
thinks about  
Bioassays!!

# References

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- [FDA Guidance for Industry: Potency Tests for Cellular and Gene Therapy Products](#)
- [FDA Guidance for Industry: Bispecific Antibody Development Programs](#)
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- [EMA Scientific Guideline: Potency Testing of Cell-Based Immunotherapy Medicinal Products for the Treatment of Cancer](#)
- [EMA Guidelines Relevant for Advanced Therapy Medicinal Products](#)
- [Health Canada Guidance Document: Preparation of Clinical Trial Applications for use of Cell Therapy Products in Humans](#)
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