

# **Regulatory Considerations for Analytical Development of Gene Therapy Products**

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CBER/FDA

Cell & Gene Therapy Products (CGTP): Manufacturing, Quality and  
Regulatory Considerations  
June 10, 2019

# Human Gene Therapy (GT) Products



*“mediate their effects by transcription or translation of transferred genetic material, or by specifically altering host genetic sequences”*

- Viral vectors
- Bacterial vectors
- Oncolytic viruses and bacteria
- Plasmid DNA, mRNA
- Human genome editing products
- Ex vivo genetically modified cells

# GT Product Approvals by FDA



## **Oncolytic herpes simplex virus (HSV)**

### **Imlygic (talimogene laherparepvec)**

- Treatment of patients with melanoma (local treatment of unresectable cutaneous and nodal lesions).

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## **CD19-directed genetically modified autologous T cell immunotherapy**

### **Kymriah (tisagenlecleucel)**

- Treatment of patients up to 25 years of age with B-cell precursor acute lymphoblastic leukemia (ALL) that is refractory or in second or later relapse.
- Adult patients with relapsed or refractory (r/r) large B-cell lymphoma after two or more lines of systemic therapy including diffuse large B-cell lymphoma (DLBCL) not otherwise specified, high grade B-cell lymphoma and DLBCL arising from follicular lymphoma.

### **Yescarta (axicabtagene ciloleucel)**

- Treatment of adult patients with relapsed or refractory large B-cell lymphoma (DLBCL) not otherwise specified, primary mediastinal large B-cell lymphoma, high grade B-cell lymphoma, and DLBCL arising from follicular lymphoma.

# GT Product Approvals by FDA



## **Adeno-associated virus (AAV) vector-based**

### **Luxturna (voretigene neparvovec)**

- Treatment of patients with confirmed biallelic RPE65 mutation-associated retinal dystrophy.

### **Zolgensma (onasemnogene abeparvovec)**

- Treatment of children less than 2 years old with spinal muscular atrophy.

## **Oncolytic herpes simplex virus (HSV)**

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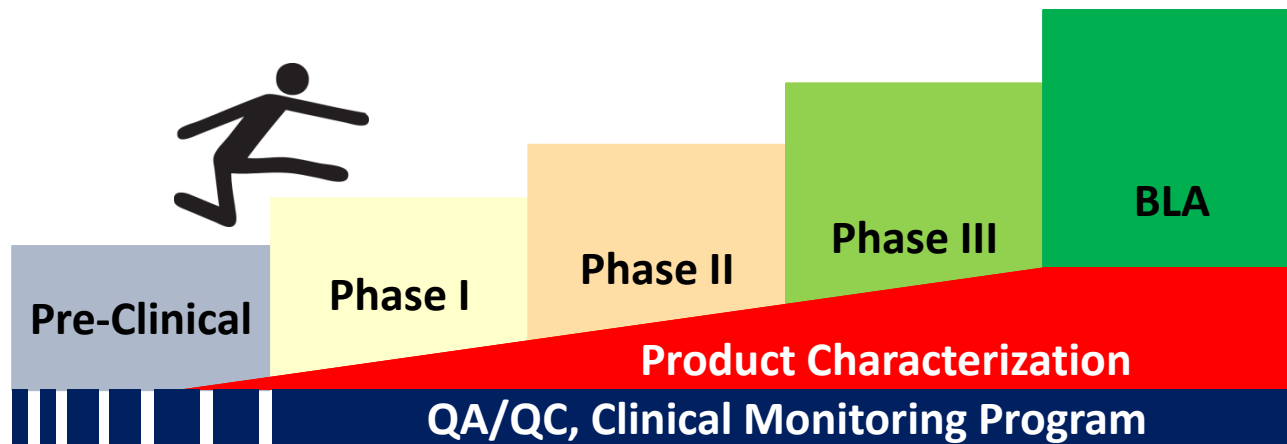
“...In contrast to traditional drug review, some of the more **challenging questions when it comes to gene therapy relate to product manufacturing and quality**, or questions about the durability of response which often can’t be fully answered in any reasonably sized pre-market trial..”

- *Scott Gottlieb, M.D., Commissioner of FDA  
on FDA’s efforts to advance development of gene therapies  
July 11, 2018*

# Product Lifecycle Approach to Analytical Development



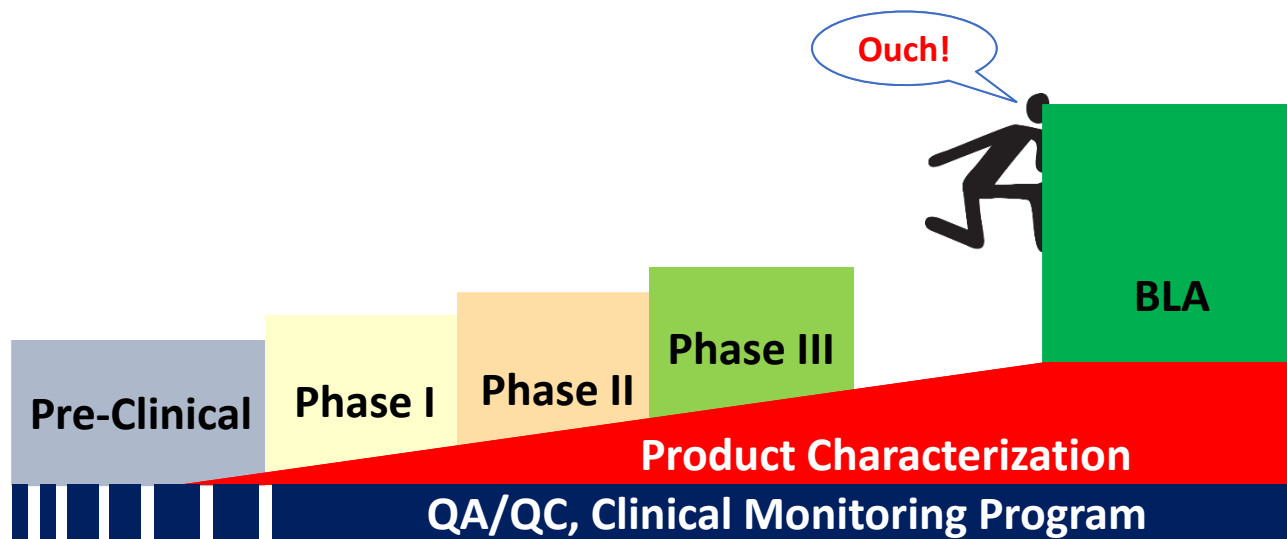
- Stepwise assay development
  - Investigation of biological activity
  - Development of relevant assay



# Expedited Development Does Not Change Regulatory Requirements

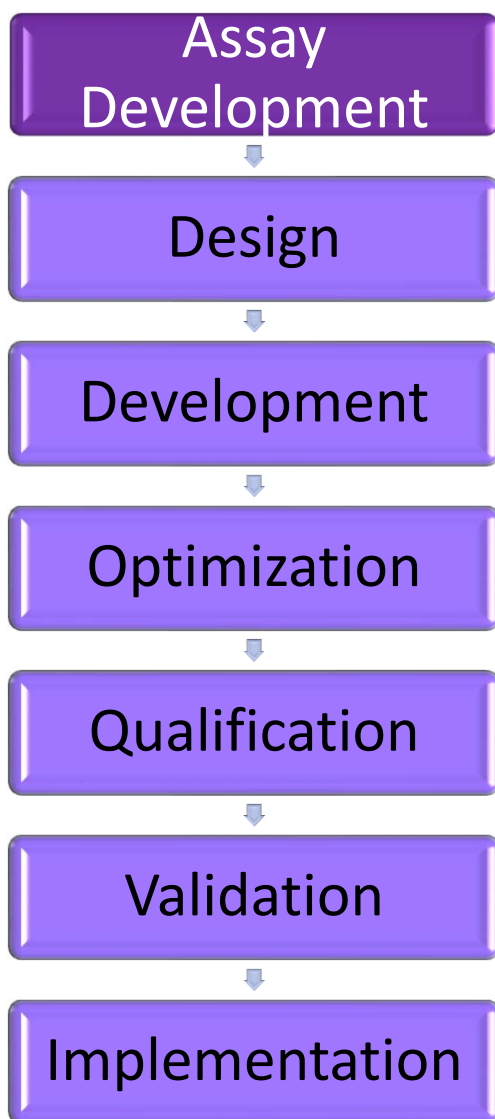


- Validated before clinical studies to support safety and efficacy for licensure





# Align Assay & Product Lifecycle



## Plan assay development timelines carefully

- Consider overall product lifecycle
- Consider regulatory program

# Challenges Affecting GTPs on Expedited Programs



- Limited manufacturing experience:
  - Not enough retention or test samples available
- Limited in-process testing:
  - process variables and critical process parameters (CPP) not known
- Limited product characterization:
  - Critical Quality Attributes (CQAs) not known
- Limited knowledge of product- and process-related impurities
- Limited product stability data collected
- Limited assay development (potency, purity):
  - assays not qualified
  - reference standards not established or adequately characterized

# Encourage Early Product Characterization



***A Critical Quality Attribute (CQA) is a physical, chemical, biological, or microbiological property or characteristic that should be within an appropriate limit, range, or distribution to ensure the desired product quality. - ICH Q8 (R2)***

- Explore many CQAs during early development
  - Report results early in development
  - Choose relevant tests for late phase studies
- Evaluate multiple measures of CQAs, especially potency
  - Matrix of assays
  - Orthogonal methods
  - Stability indicating
- Support comparability studies

# Concurrent & Early Assay Development



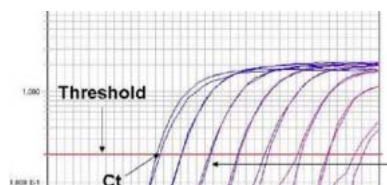
**Example:** AAV

**Product attribute:** Potency

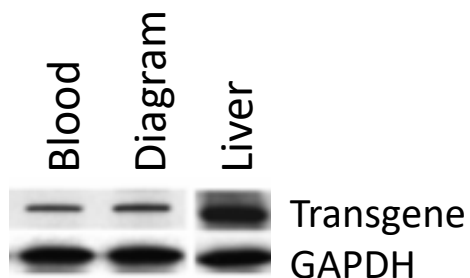
Evaluating a variety of methods during development supports:

- Product characterization and stability
- Understanding effects of manufacturing changes
- Choice of potency assay and relationship to clinical outcome for licensure

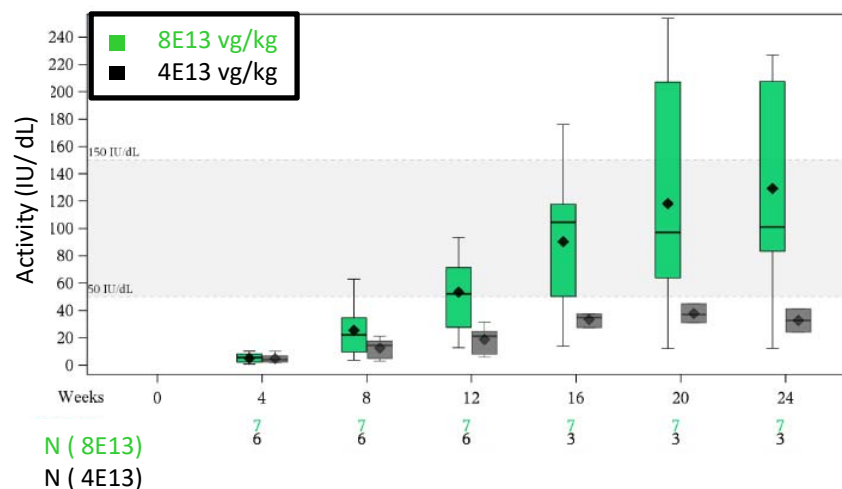
TCID 50  
With qPCR detection



Transgene expression



Biological activity



Dose response  
Curve

# Evaluate Current Technologies to Characterize Product Attributes

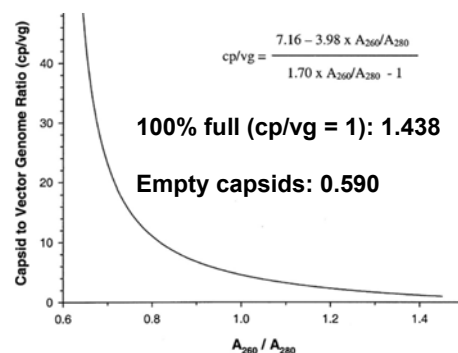


Example: AAV gene therapy vector

Product attribute: Particle content (empty-to-full ratio); measure of purity

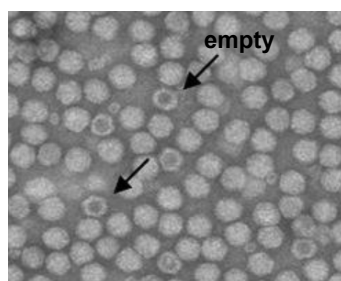
*Are the assays sensitive, specific, quantitative, and well-controlled?*

## Absorption: OD<sub>260:280</sub> ratio



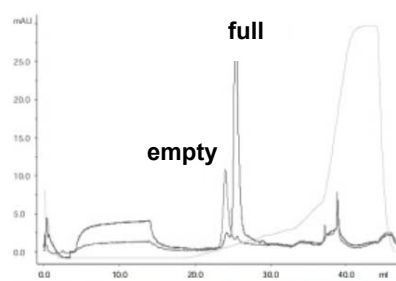
Sommer et al., 2003

## Transmission Electron Microscopy

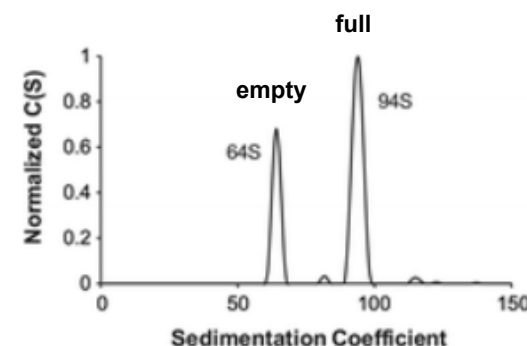


Lock et al., 2012

## Ion Exchange Chromatography

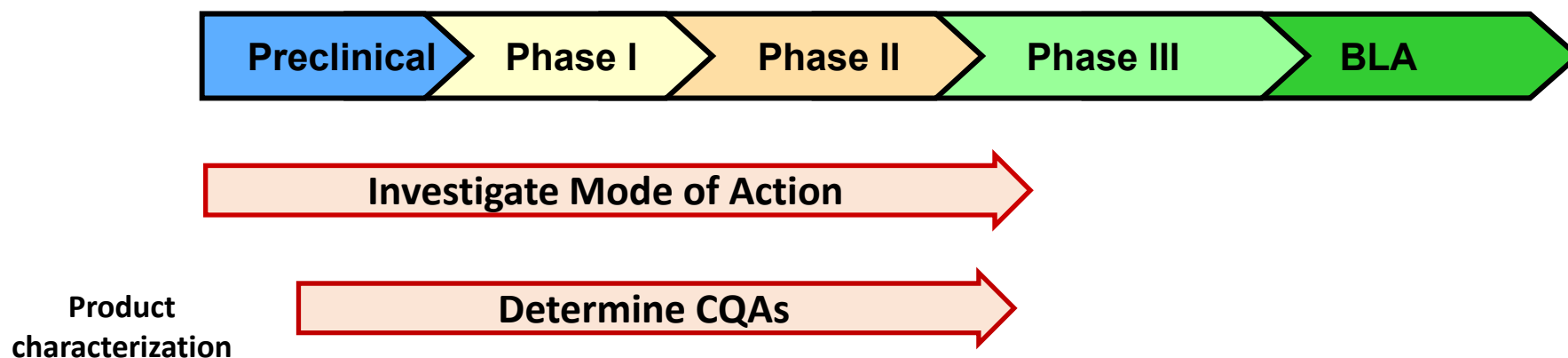


## Analytical Ultracentrifugation



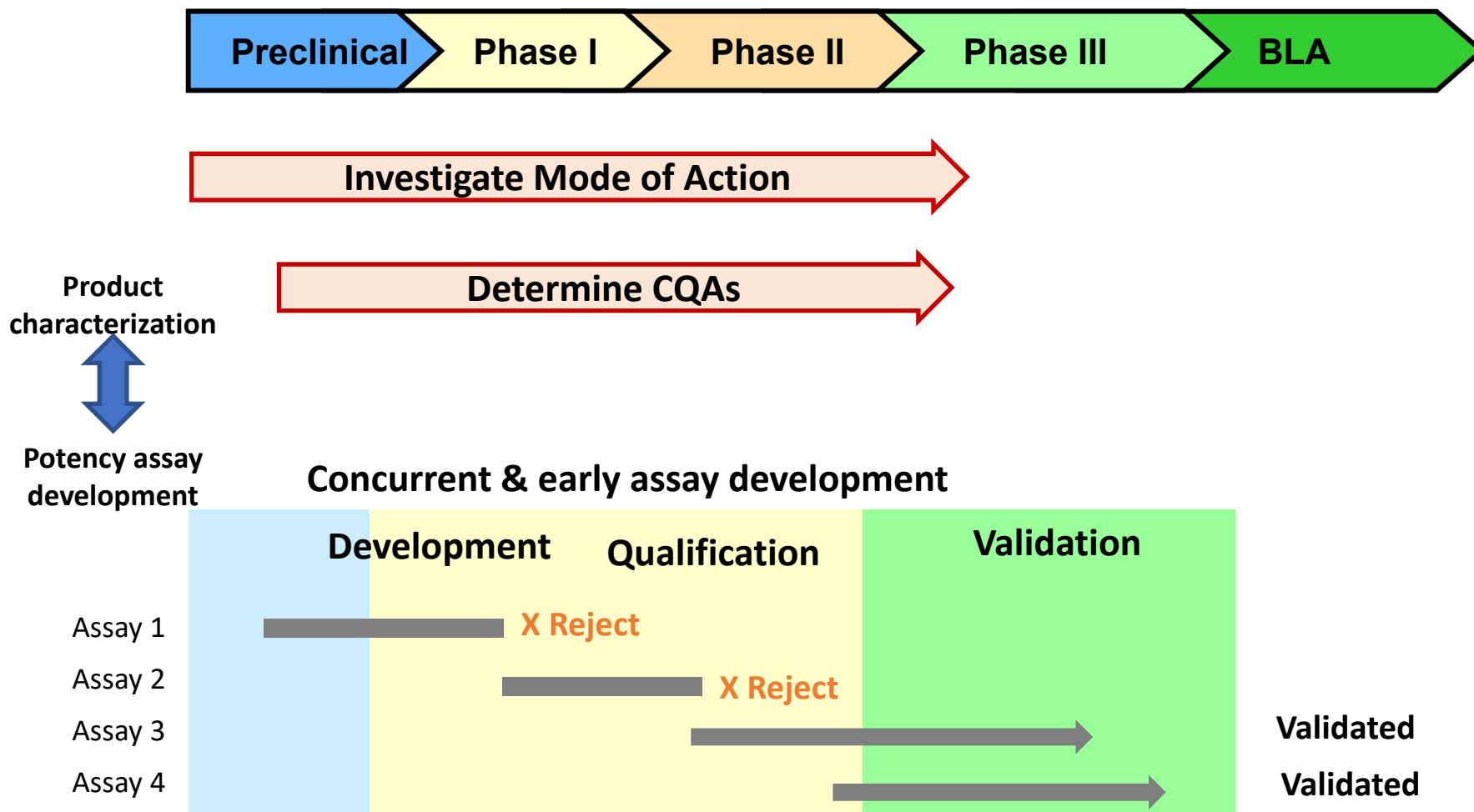
Burnham et al., 2015

# Assay Development Timeline



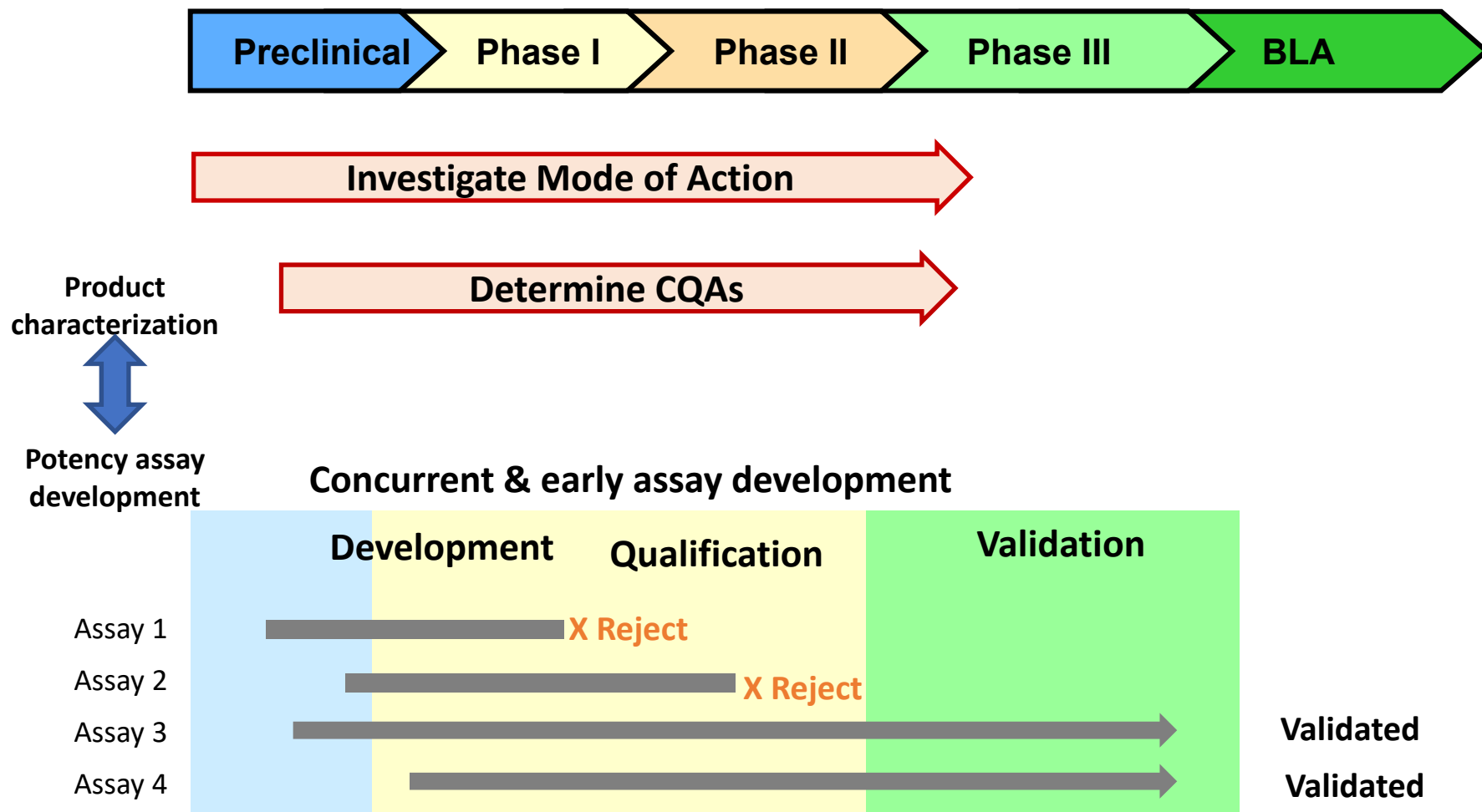
# Assay Development Timeline

Poorly designed example



# Assay Development Timeline

Well designed example





# Consider Development Plan



- Consider analytic platform approaches
  - A single assay can be used to support more than one CQA
  - A assay matrix may be required to assess a single CQA
- Cross reference new submissions to original submissions that utilize the same assay
- Assay Timing
  - Not all tests are required on DS and DP
  - Conduct adventitious agent tests at stage most likely to detect contamination



# Required Tests

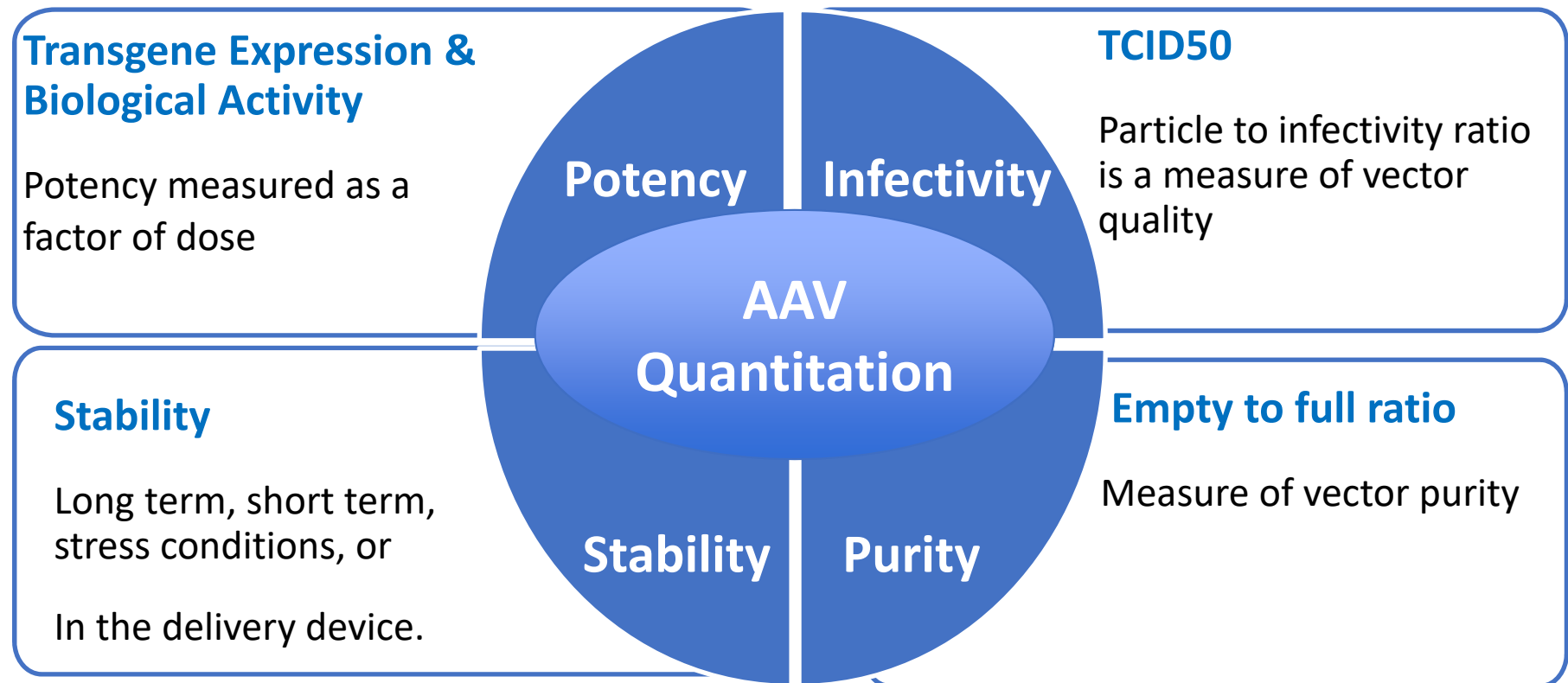
- Safety tests
  - Well controlled for early studies
  - Provide justification and supporting data for non compendial and rapid methods
- Other Required tests
  - Identity, Purity, Potency
  - Removal of process related impurities
  - Animal derived reagent testing
- Characterization
  - Acceptance criteria may have wide ranges for early studies

# Specific Challenges for AAV Vector Products

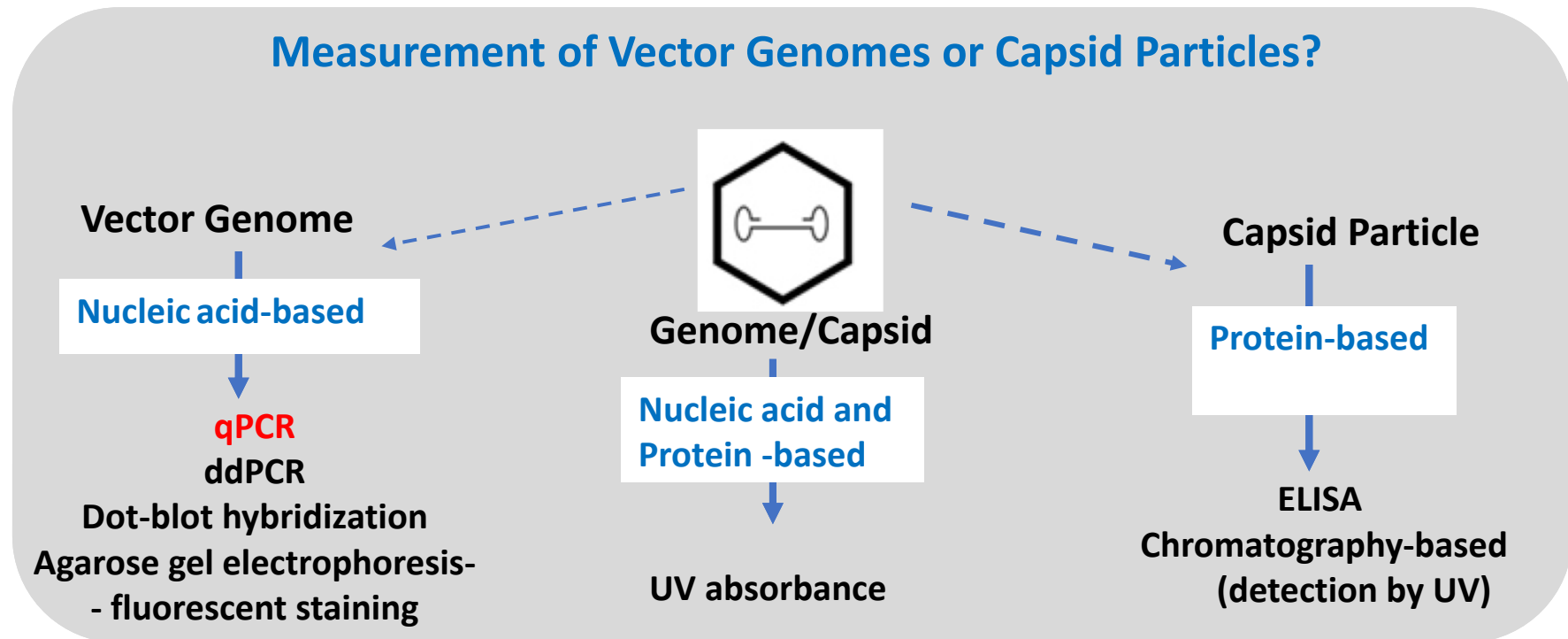


- Empty vs full capsids
- Host / plasmid DNA
- Purity of starting materials including plasmids
- Infectious titer
- Potency
- Dose determining assay
  - FDA workshop
    - <https://www.fda.gov/vaccines-blood-biologics/workshops-meetings-conferences-biologics/quantitation-aav-based-gene-therapy-products-12072018-12072018#event-information>

# AAV Quantitation Assay is Critical for Measuring Key Product Attributes



# Methods Used to Quantitate AAV Vectors



- Most commonly measured in terms of viral genomes using PCR-based assays.
- Many manufacturers are developing innovative methods to quantitate AAV vectors.

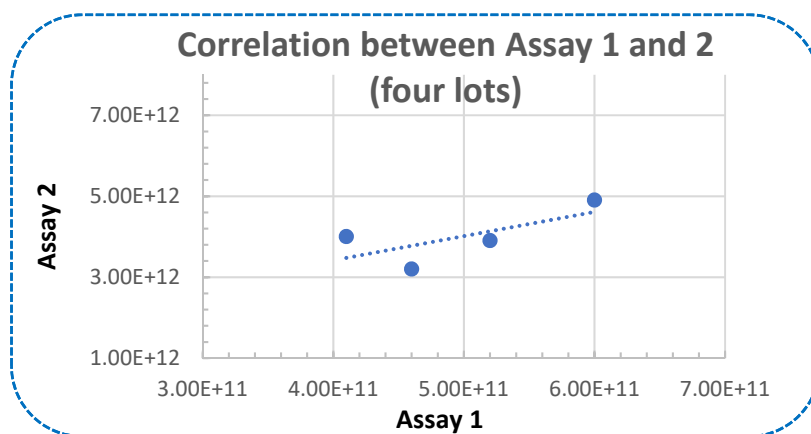
**Choose the most suitable technologies and methodologies for the product under study to develop a reliable, precise and accurate assay**

# Case Study 1

## Different assay used in preclinical studies than in clinical studies

Titer of multiple lots were compared with Assay 1 (preclinical assay) and Assay 2 (clinical assay) to show correlation.

### Example



Lots	Assay 1	Assay 2	Fold difference
Tox	$6 \times 10^{11}$	$4.9 \times 10^{12}$	8.2
Eng. 1	$4.1 \times 10^{11}$	$4.0 \times 10^{12}$	9.8
Eng. 2	$4.6 \times 10^{11}$	$3.2 \times 10^{12}$	7.0
Clinical	$5.2 \times 10^{11}$	$3.9 \times 10^{12}$	7.6
Average			8.1

**Best practices:** Plan early; use the same AAV quantitation assay in preclinical and clinical studies

# Case Study 2



## Assay is not reproducible

- When the assay has poor intermediate precision, subjects may not receive the dose as planned in the study

Example: Qualified PCR assay with a intermediate precision of  $\sim 50\%$  is not acceptable

- Degree of variability overlaps with the safety margin
  - Is the planned dose-escalation safe?

## Best practices:

- Understand assay variability and set up adequate controls.
- Precision of  $\leq 15\%$  CV is reasonable for early phase studies
- Select less variable and more sensitive AAV quantitation assays, and new assay technologies early in development

# Case Study 3

## Poor Operator training

- Variability, commonly at the step of sample preparation & serial dilution; inadequate controls.
- Procedures do not allow for additional dilutions when the vector concentration is higher than expected/planned for.
- Not enough replicates at each dilution of the test article sample
- As operator's experience grows, there is less assay variability

### Example

Initial assays performed by analyst 1 and 2

N= 59 Analyst 1	%CV 17.05
N=37 Analyst 2	%CV 20.60

Last 10 assays performed by analyst 1 and 2

N=10, Analyst 1	% CV 6.85%
N=10, Analyst 2	% CV 7.81%

**Protocol development and operator training are key to developing a well-controlled, reliable assay for AAV quantitation**



# Summary



- Align assay and product lifecycle development
  - Product type
  - Manufacturing plan
  - Regulatory timeline
- Begin assay development early in product life cycle
- Evaluate concurrent assays and consider current technologies
- Utilize analytical platforms
  - Single assay can be used to support more than one CQA
  - Matrix of assays may be used to define a single CQA
  - Method can be cross referenced for multiple products, but assay qualification may be needed for each specific product

# CDER Recruitment



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**Medical Officers/Physicians**

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**Biologists/Microbiologists**

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**Chemists**

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**Biomedical Engineers**

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**Pharmacologists**

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**Consumer Safety Officers**

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**General Health Scientists**

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**Program Analysts**

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**Program Support Specialists**

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**Toxicologists**

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[www.fda.gov](http://www.fda.gov)

<https://www.fda.gov/about-fda/center-biologics-evaluation-and-research-cber/jobs-center-biologics-evaluation-and-research-cber>

# Contact Information

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[Lori.Tull@fda.hhs.gov](mailto:Lori.Tull@fda.hhs.gov)



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