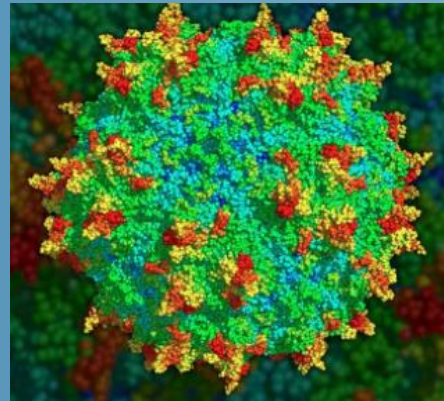


Accelerating Medicines Partnership Bespoke Gene Therapy Consortium (BGTC)



Steve Hoffmann

Director, Inflammation and Immunity

Foundation for the National Institutes of Health

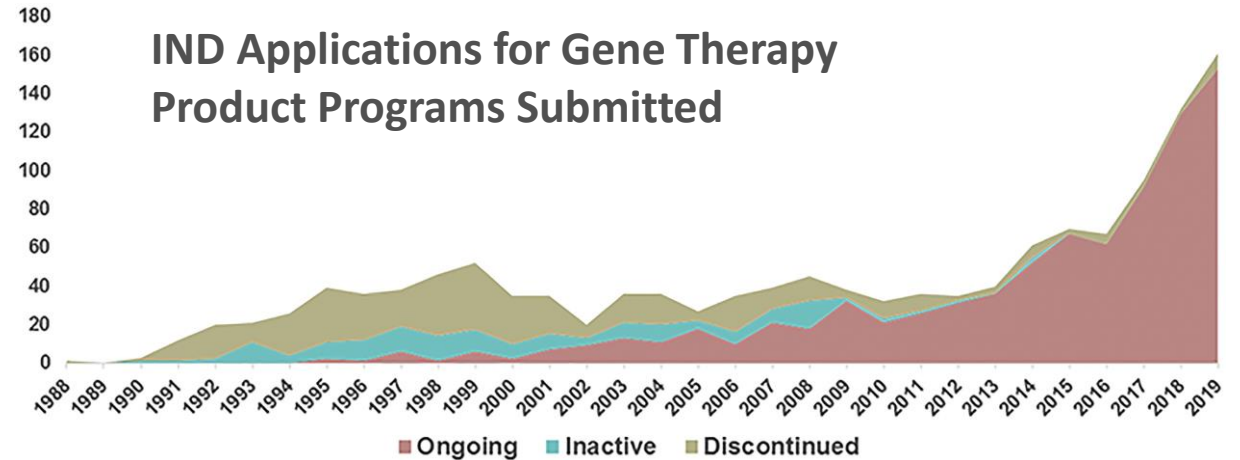
Cell & Gene Therapy Products: Manufacturing, Quality and Regulatory Considerations

June 2021

Why the Bespoke Gene Therapy Consortium (BGTC)?

Cross-Sector Expertise Needed to Address Challenges in:

- Manufacturing
- Nonclinical development
- Clinical development
- Product access



- Medical need present in thousands of rare genetic diseases → Hundreds of diseases could potentially be addressed now 



Immediate - of the Bespoke approach to rare disease patients

Medium-term - to entire rare disease community → financially sustainable model for gene therapy production

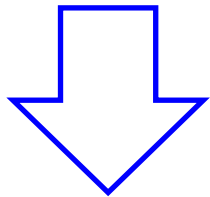
Long-term - to larger gene therapy ecosystem through advancement of technology and the regulatory framework

Engaged Partnership with Key Expertise and Experience

| | | | |
|------------|--------|----------|-------------|
| Novartis | Sanofi | NCATS | CDMOs |
| BMS | Roche | NHLBI | Biotech |
| Pfizer | Bayer | NINDS | Advocacy |
| Ultragenyx | UCB | NIMH | Foundations |
| BI | Lilly | FDA/CBER | KOLs |

| | | |
|------------|---------------|--------------|
| Novartis | J&J | NORD |
| Pfizer | Spark | ASGCT |
| Takeda | Taysha | CureDuchenne |
| Ultragenyx | Thermo Fisher | ARM |
| REGENXBIO | Health Canada | |
| NIH | FDA/CBER | |

Design Phase
= Concept



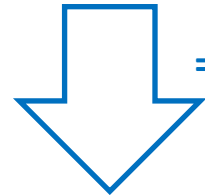
Working
Groups



Construct Phase
= Project Plan



NCATS, NINDS
NIMH, Brain Initiative
3+ additional ICs



Proposed Launch
Aug 1



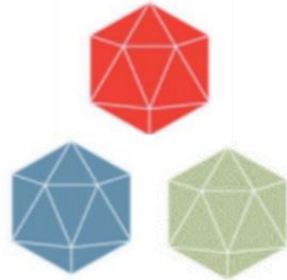
Program Development Team Identified Major Challenges to Effective Access to Gene Therapy



- **Lack of understanding of the viral life cycle and efficiency in the molecular steps associated with the generation and delivery of gene therapies**
 - Building more manufacturing facilities is a short-sighted answer – Need to advance the science and get better!
- **Gene therapy approaches currently employed do not allow for easy scalability, reproducibility, or regulatory generalizability and result in ‘one-offs’ that reinvent non-clinical and CMC processes**
 - Developing a regulatory program that allows leveraging non-clinical and manufacturing data from one application for another can facilitate product development and access

AMP Bespoke Gene Therapy Consortium

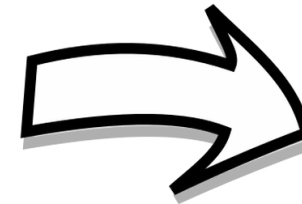
1 AAV BASIC BIOLOGY TRANSLATIONAL IMPLICATIONS



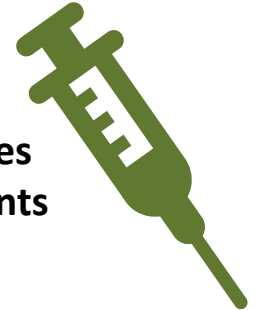
ENHANCING VECTOR GENERATION
ENHANCING THERAPEUTIC GENE EXPRESSION



Goal: Increase efficiency by orders of magnitude.



Therapies for patients



Goal: Standardized, faster, reduced \$



2 ADVANCING ACCESS TO AAV TECHNOLOGIES AND VECTORS FOR BESPOKE CLINICAL APPLICATIONS



Gene therapy target for rare disease



CREATE & BUILD > CAPACITY

Vector generation

Standard vector menu:

- Instructions for use
- Tropism
- Ease of use for gene type
- Non-proprietary tools
- **Provide facilities for vector generation**

HARMONIZE BEST PRACTICES

Manufacture of therapeutic

Standard process menu:

- Known safety database
- Facilitate preclinical testing
- **Leverage existing and novel expertise in manufacturing processes and protocols**

STREAMLINE REGULATORY PATHS

Clinical ability to treat patients

Standard delivery menu:

- Standard clinical and delivery protocols
- **Establish Master File(s) for std vectors & facilitate out-licensing if appropriate**

Advancing the Understanding of AAV Biology

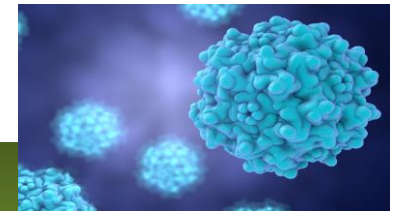
A. ENHANCING VECTOR GENERATION

1. **Viral genome replication and processing for virion packaging**
2. **Capsid production and assembly**
3. **Packaging of viral genome to generate productive viruses**
4. **Transport and release of virus**
5. **Host factors that influence the process of viral generation**

B. ENHANCING THERAPEUTIC GENE EXPRESSION

1. **The endosomal state of the AAV virion**
2. **Trafficking to the nucleus**
3. **Uncoating in the nucleus**
4. **Second strand synthesis**
5. **Concatemerization of the viral genome**
6. **Post expression events**

- **Opportunity for a greater understanding of the viral life cycle and enable the field to overcome the limitations of AAV-based vectors**
- **Knowledge of AAV interactions with the host at the cellular level remains undefined. A more thorough understanding of AAV interactions with the host is key to efficient transduction**

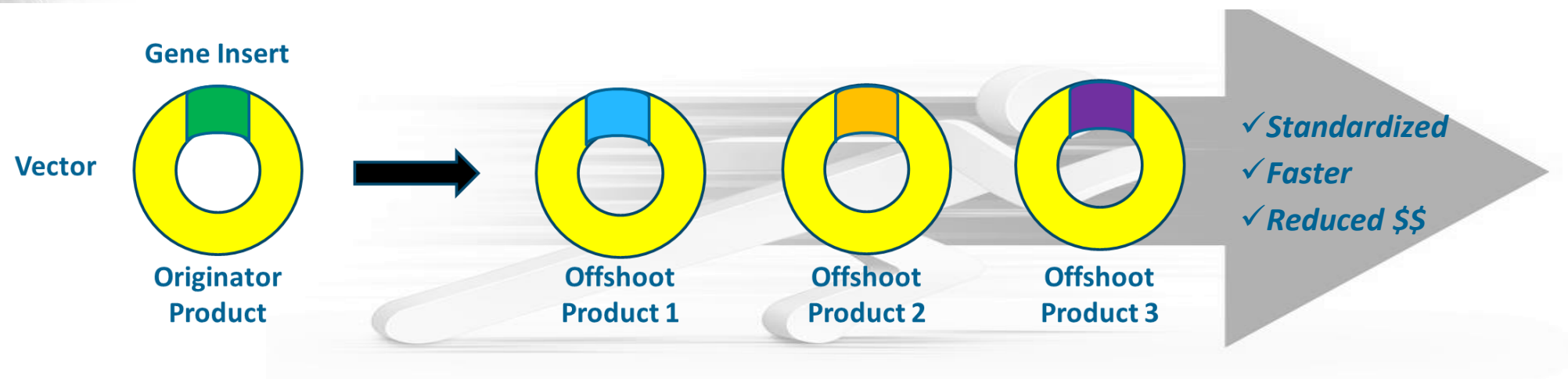


Generating a Streamlined Clinical and Regulatory Framework for Gene Therapy

- Currently, many gene therapies for rare disorders are produced as “one-offs”



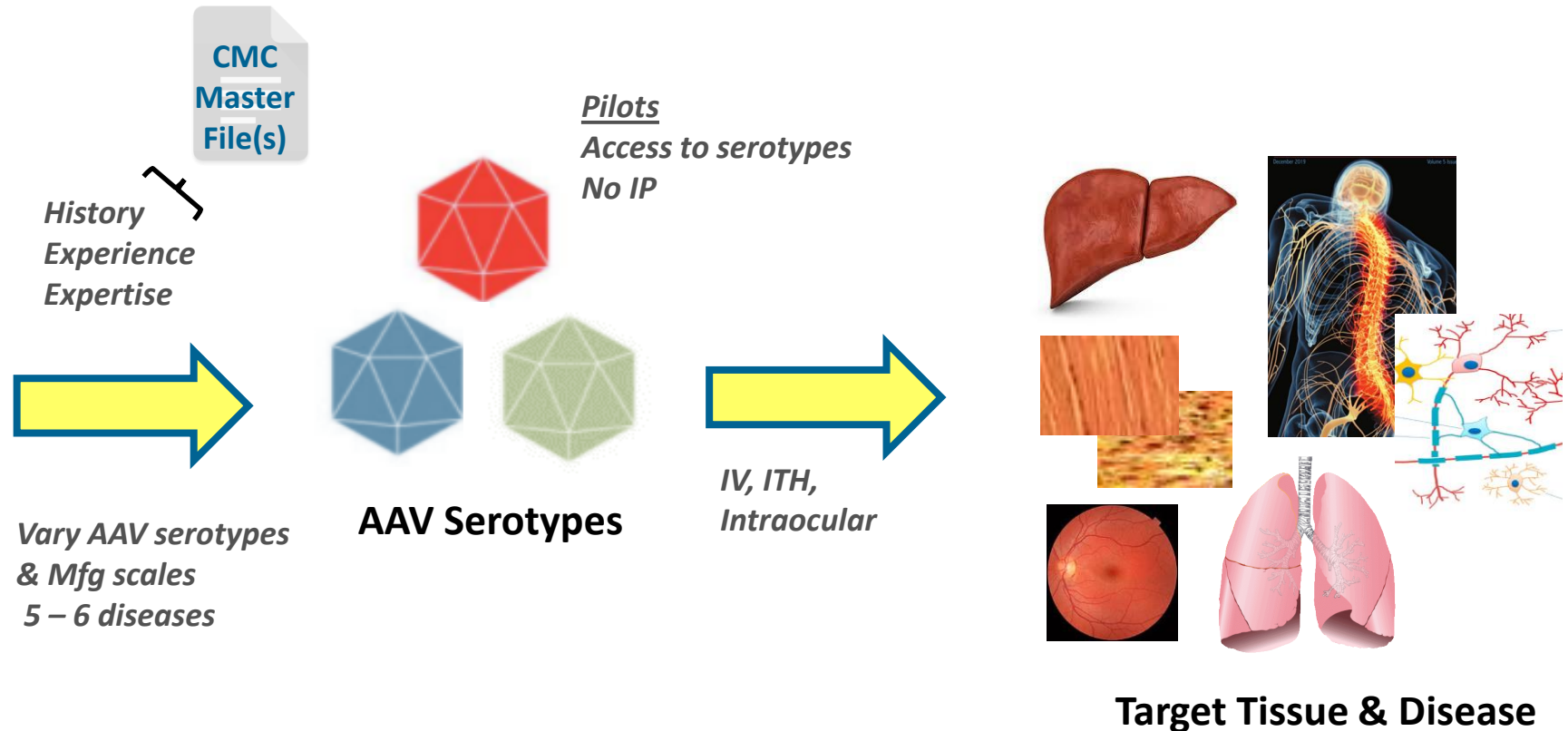
- Transformative approach developing regulatory innovations is needed to bridge the gap between science and technology
- Platforms and processes that leverage successful gene therapy products and knowledge in the setting of bespoke therapies



Strategy to Leverage Existing Expertise and Capacity to Manufacture Gene Therapy Product for the Pilots

Industry Vector
Manufacturers (n=3)

Academic Vector
Manufacturers (n=3)



GOAL: Transgene sequence is the only difference being introduced into an established manufacturing paradigm

Disease Selection for the Pilots Will Provide Real Data for Streamlining the Overall Process

Thousands of
Rare Diseases



RFP submission of potential study by:

- Academic centers
- Government investigators
- Patient groups
- Others....

5-6 Diseases Selected



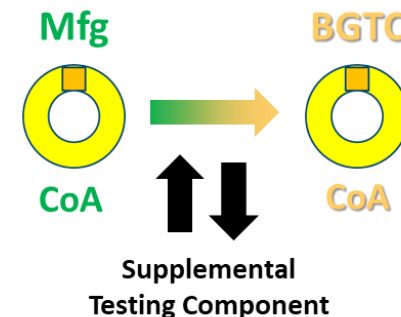
Characteristics:

- Clear monogenetic cause that is amenable to AAV
- No commercial business case
- Sufficient information to run a successful clinical trial
- Low trial requirements for testing and follow up (i.e., short trial)
- Currently assembled patient group
- Others....

Harmonize, Standardize and Simplify CMC Testing

Identify critical attributes that must be evaluated:

- Examples: Vg titer, purity, full:empty, potency, endotoxin & sterility → use existing Mfg processes
- Provide scientific rationale and justification for why these tests are most critical
- Leverage manufacturer's experience with the reference product, and whether reduced testing can be scientifically justified based on iterative experience/data → create Master files
- What other attributes may be reasonably assured via process history/ understanding and control → NIH will establish a centralized testing facility (contractor) to conduct supplemental testing and support product-specific testing (e.g., standardized vector copy #)
- Manufacturer will supply vials (NIH to provide final labelling) and certificate of analysis (C of A) → NIH will be IND holder for clinical trials in BGTC pilots



CMC Information

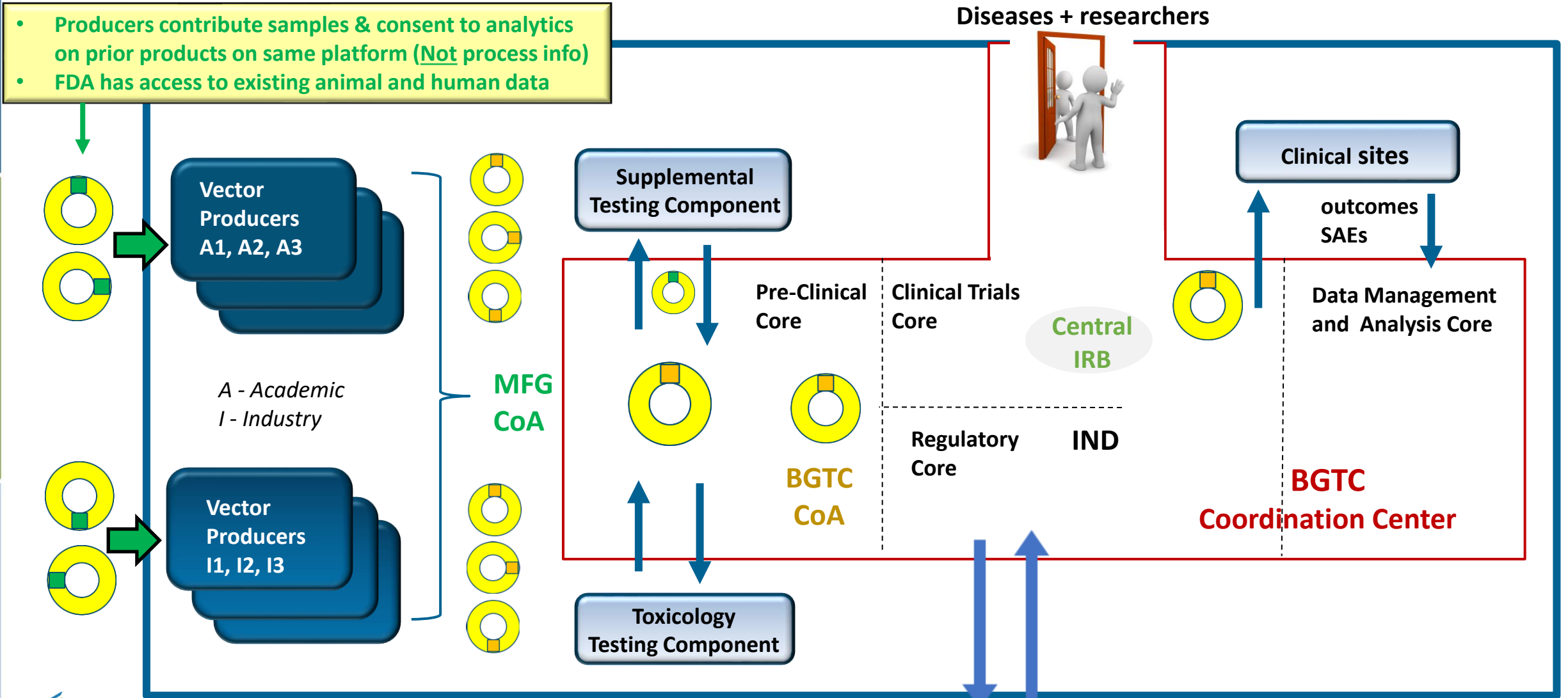
Provided to Sponsor (NIH) by Manufacturer

- Full spectrum of AAV tests performed
- **Highlighted tests** proposed to be conducted by manufacturer (**use existing processes**)
- Other attributes may be reasonably assured via process history/ understanding and control → **NIH will establish a centralized testing facility (contractor) to conduct supplemental testing**, and also support product-specific testing (e.g., potency)
- Overall goal is to **standardize testing**, where possible - specific goal is to standardize testing for vector copy number



| Quality Attribute | Test Description |
|-----------------------------------|--|
| Potency | Vector genome titer |
| | Infectious titer (TCID ₅₀)/ ratio |
| | In vitro transgene expression |
| | In vivo potency |
| Identity | In vitro potency (activity) |
| | Capsid Identity (ELISA, Western blot, peptide map) |
| | Genome Identity (Sequence, qPCR, restriction map) |
| Physical/ Chemical | Appearance |
| | Osmolality |
| | pH |
| | Particulates / Light Scatter |
| | Extractable volume |
| Safety | Sterility |
| | Endotoxin |
| | rcAAV |
| | In vitro adventitious agents |
| | In vitro bovine adventitious agents |
| | Biodurden (DS) |
| | Purity Proteins : (Capillary Electrophoresis (CD-SDS), SDS-PAGE and HPLC) |
| % Full Capsids (particle Content) | |
| Purity | Aggregates |
| | Excipient components |
| | Residual affinity ligand |
| | Residual host cell DNA |
| | Residual host cell protein |
| | Residual helper DNA |

AMP BGTC Manufacturing and Analytics Process

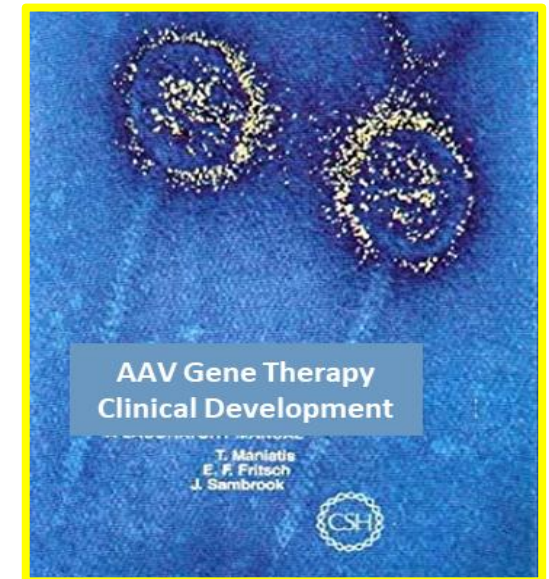


Manual for AAV Gene Therapy Clinical Development



- **Insights and learnings that facilitate success of future gene therapy**
- **Optimized lot release methods and assays**
 - Harmonized and validated sets of vector quality tests
- **An objective method and core criteria for disease selection**
 - Bespoke and rare diseases trials
- **Standardized regulatory submission package(s)**

Gene Therapy “Maniatis”



Acknowledgements

- **AMP BGTC Co-Chairs**

- Peter Marks, Director, FDA/CBER
- PJ Brooks, Program Director, Office of Rare Diseases Research, NIH/NCATS
- Seng Cheng, Senior Vice President & Chief Scientific Officer, Rare Disease, Pfizer

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- Gopa Raychaudhuri, Special Assistant, FDA/CBER
- Deanna Portero, Management Analyst, NIH/NCATS

Questions?

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