

FDA's Efforts to Facilitate the Development of Cell and Gene Therapies

Peter Marks, MD, PhD CASSS Meeting on Cell and Gene Therapy Products June 8, 2022

Disclosures



 I am a full-time employee of the United States government and have no relevant relationships with commercial interests to disclose

Overview



- Discuss FDA's efforts to facilitate development of cell and gene therapies
- Describe the importance of manufacturing
- Review the applicable regulatory framework
- Provide some resources for product developers



Bottom Line Up Front

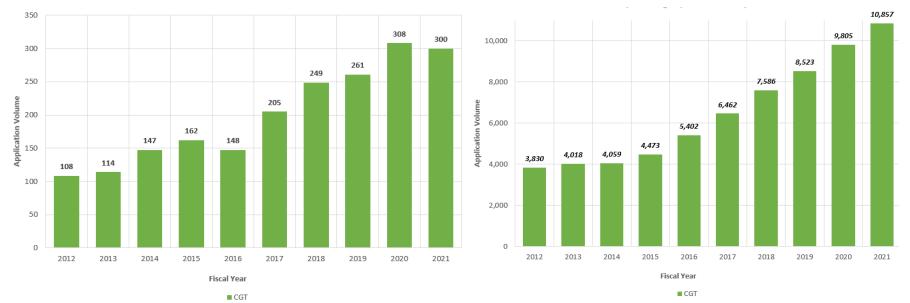
- FDA is committed to advancing the development of cell and gene therapies for populations of all sizes
 - Helping to individualize product development
 - Providing input and collaboration on novel endpoints
 - Encouraging innovative clinical trial designs



Growth in Cell and Gene Therapy

Original Investigational New Drug Applications (INDs)

IND Amendments



Excluding expanded access requests

Including expanded access requests



U.S. Approved Gene Therapies

- Kymriah (2017)
- Yescarta (2017)
- Luxturna (2017)
- Zolgensma (2019)

- Tecartus (2020)
- Breyanzi (2021)
- Abecma (2021)
- Carvykti (2022)



Cell-Based Gene Therapy

Potential Advantages to Use of Genetically-Modified Cellular Therapies

- Appropriate methods can be used to address the issue of location of genomic integration
 - Ability to select appropriately transduced cells for administration to recipients
 - Use of newer technologies such as CRISPR possible
 - Control of effector function is possible, if necessary
- Possibility to provide therapeutic benefit with an extended duration of effect

CAR-T Cell Therapies

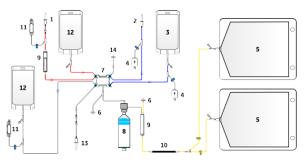
- Transition from pilot scale to commercial manufacturing can be challenging
 - Centralized versus distributed manufacturing
- Need novel approaches to clinical development
 - Use of complex and innovative clinical trial designs
 - Advanced planning for clinical trials seamlessly transitioning from phase 1 to pivotal (licensure) trial



CAR-T Manufacturing Systems







www.fda.gov



CAR-T Cells for Solid Tumors

- Several challenges have hindered the development of CAR-T cells for solid tumors
 - Targeting of the CAR-T cell to the tumor's location
 - Overcoming immunosuppressive microenvironment
 - Achieving optimal CAR-T cell function over time
 - Relative paucity of highly specific tumor antigens

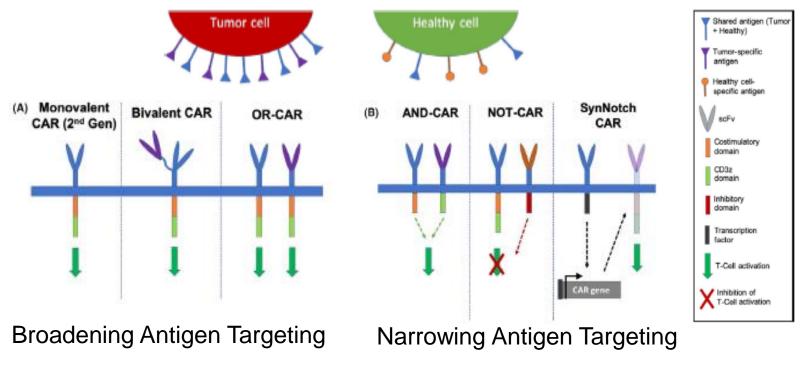


Allogeneic CAR-T Cells

- Molecular biology, including genome editing, allows the development of cells deficient in MHC class I molecules (multiple methods)
- Potentially facilitates off the shelf product
 - Promotes manufacturing consistency
 - Available immediately for those in need
 - May ultimately reduce cost of therapy



Novel CAR-T Cell Constructs



Adapted from: Walsh Z, Yang Y, Kohler ME. Immunological Reviews 2019;290:100-113

www.fda.gov



Directly-Administered Gene Therapy

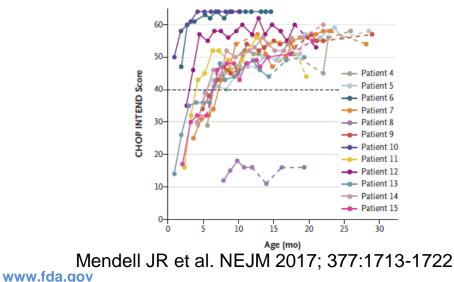
FDA Approved Systemic Directly-Administered Gene Therapy

- Onasemnogene abeparvovec-xioi (Zolgensma): for the treatment of patients less than two years of age with spinal muscular atrophy (SMA) with confirmed biallelic mutations in the *survival motor neuron 1* (*SMN1*) gene
 - SMA Type 1 commonly presents with muscle weakness that is evident at birth or within the first few months of life

https://www.fda.gov/news-events/press-announcements/fda-approves-innovativegene-therapy-treat-pediatric-patients-spinal-muscular-atrophy-rare-disease

Onasemnogene Clinical Results

Clinical trial results: patients with infantileonset SMA that are untreated do not develop a CHOP INTEND score (a test for neuromuscular disorders) greater than 40





Evelyn with documented SMA1 treated with onasemnogene, now age 3 running around, something never seen in untreated children

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Importance of Therapies for Disorders that are Very Rare

- Out of thousands of rare hereditary and acquired diseases there are hundreds of disorders affecting one to a few dozen per year that could be addressed with novel therapies
 - Addressing molecular defects may reduce some more common diseases to very rare diseases



Personalized medicine Finding the right drug on the shelf to treat the patient versus Individualized medicine Creating the right drug to treat the patient





Ready to Wear







Made to Measure



Individualized medicine Creating the right drug to treat the patient

Customized Products Same indication Same mode of action

Example:

Personalized vaccine for pancreatic cancer using dendritic cells pulsed with an individualized peptide mixture

Created Products Different indication Different mode of action

Example:

Gene therapies for two different hemoglobin mutations using same vector back bone

Challenges of Individualized Therapies

- Manufacturing
- Nonclinical development
- Clinical development
- Product access

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Manufacturing





Leveraging validated processes can potentially facilitate the development of new products

Approximate Treatment Population Per Year

1-100 >100-10,000 >10,000

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Manufacturing

Will the gene therapy manufacturing platform of the future be a device?



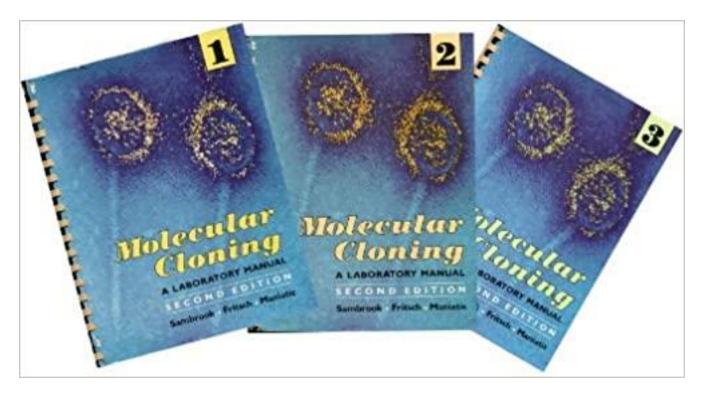
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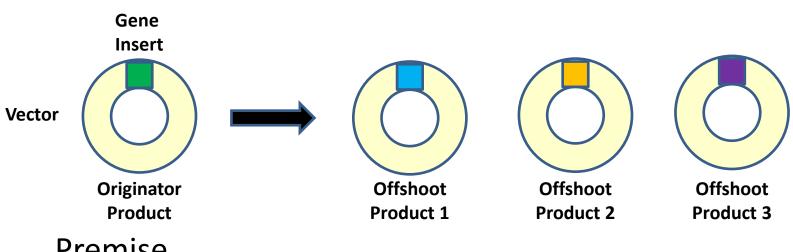
Concepts in Development

- "Cookbook" for the development and manufacturing of bespoke therapeutics
- Leveraging of nonclinical and manufacturing data from one application to another
 - Concept of originator and offshoot products leveraging information on file and focusing on distinguishing attributes of offshoot products





Bespoke Therapies



- <u>Premise</u>
- In appropriate situations, non-clinical data and manufacturing information from one product may be able to be leveraged to another

FDA **Bespoke Gene Therapy Consortium** Foundation for the National Institutes of Health (FNIH) Non-profit umbrella organization FDA streamlining of regulatory requirements: master files/templates Manufacture Clinical ability to Vector generation of therapeutic treat patients Standard Standard Standard Idea for Therapies delivery menu vector menu process menu Gene for patients Therapy Target All results from treatments are reported back to the consortium for iterative learning

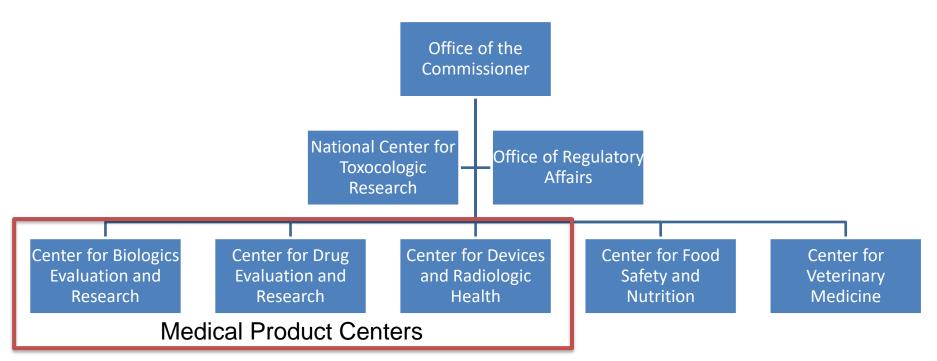
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FDA's Regulatory Role



FDA Organization





Regulatory Framework for Biologics

- Constitution
- Laws/Statutes
 - Public Health Service Act
 - Section 351
 - Section 361
 - Federal Food Drug and Cosmetic Act
- Regulations/Rules
- Guidance



Expedited Development Programs

- Fast Track
- Priority Review
- Accelerated Approval
- Breakthrough Therapy
- Regenerative Medicine Advanced Therapy

These programs may be applicable to drugs or biologics intended to treat serious conditions

Objectives of Suite of Regenerative Medicine Guidance Documents

- Clarify existing regulations to make it simpler for sponsors to determine if they need to obtain premarket authorization for their products
- Expedite the development and approval of safe and effective innovative regenerative medicine therapies and associated devices

Suite of Regenerative Medicine Final Guidance Documents



- 1. Same Surgical Procedure Exception under 21 CFR 1271.15(b): Questions and Answers Regarding the Scope of the Exception
- 2. Regulatory Considerations for Human Cell, Tissues, and Cellular and Tissue-Based Products: Minimal Manipulation and Homologous Use
- 3. Evaluation of Devices Used with Regenerative Medicine Advanced Therapies
- 4. Expedited Programs for Regenerative Medicine Therapies for Serious Conditions

Expedited Programs for Regenerative Medicine Therapies

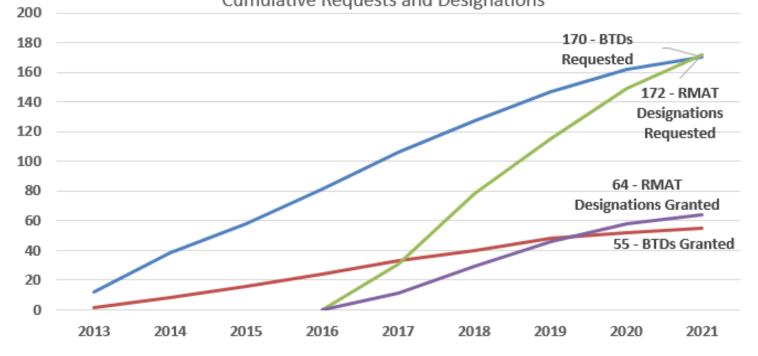
- Describes FDA's considerations for the Regenerative Medicine Advanced Therapy Designation (RMAT) to expedite product development and review
 - Applies to certain cell therapies, therapeutic tissue engineering products, human cell and tissue products, and combination products
 - Genetically modified cell therapies and gene therapies producing durable effects included

Regenerative Medicine Advanced Therapy Designation (RMAT)

- Products must be intended for serious or lifethreatening diseases or conditions
- Preliminary clinical evidence must indicate potential to address unmet medical needs
- FDA replies to designation requests with 60 days
- Designated products are eligible as appropriate for priority review and accelerated approval



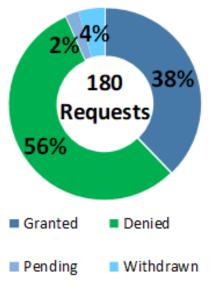
CBER Breakthrough Therapy Designation & Regenerative Medicine Advanced Therapy Designation-Cumulative Requests and Designations



RMAT Requests and Actions



CBER Has Granted 68 **RMAT Designations** Since Program Inception



- 96 of the 180 RMAT Requests are Cell Therapy products
- 32 of the 68 RMAT Granted products have Orphan Product designation
- 22 of the 68 RMAT Granted products have Fast Track designation

Data as of March 1, 2022



Recent Guidance – March 2022

- Considerations for the Development of Chimeric Antigen Receptor (CAR) T Cell Therapies; Draft Guidance for Industry
- Human Gene Therapy Products Incorporating Human Genome Editing; Draft Guidance for Industry

CATT Meetings



- Provides an interactive mechanism for discussion of advanced technologies or platforms needed for the development of CBER-regulated biologics products
- CATT allows access to early and ongoing interactions with CBER before filing of a regulatory submission https://www.fda.gov/vaccines-blood-biologics/industry-

biologics/cber-advanced-technologies-team-catt



INTERACT Program

INitial Targeted Engagement for Regulatory Advice on CBER producTs

• To further encourage early interaction with sponsors and replace the pre-pre-IND meeting process across the Center regarding preclinical, manufacturing and, clinical development plans

https://www.fda.gov/BiologicsBloodVaccines/ ResourcesforYou/Industry/ucm611501.htm

Summary



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