

Characterizing and Controlling Modes of Action

Critical Requirements for Potency Assays

Markus B. TOMEK

BASG – Austrian Federal Office for Safety in Health Care

Overview of this talk

- My background
 - PhD/Post-Doc in Biotechnology
 - Quality assessor for biological medicinal products (with focus on therapeutic recombinant proteins) since 12/2021
 - Centralised Procedures & Life Cycle
 - National and European Scientific Advice procedures

- The following presentation will discuss
 - Complexity of Potency Assays - Examples
 - Method validation
 - Regulatory requirements

Definition

Potency

- Potency (expressed in units) is the quantitative measure of **biological activity** based on the attribute of the product which is linked to the relevant biological properties. (ICH Q6B, EMA/CHMP/BWP/532517/2008)
- The measure of the **biological activity** using a suitably quantitative biological assay (also called potency assay or bioassay), based on the attribute of the product, which is linked to the relevant biological properties. (EMA/CHMP/BWP/271475/2006 rev.1)
- Potency is a measure of a drug's **biological activity** expressed in terms of the dose required to produce a pharmacological effect of given intensity. (Wikipedia)

Description

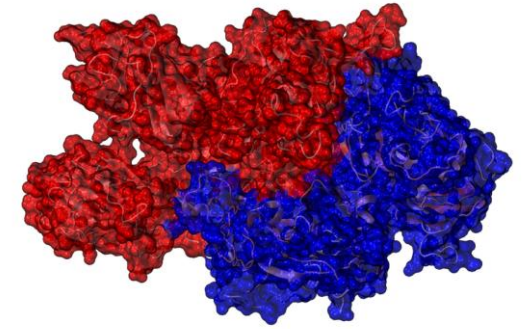
Potency Assay

- **Parameters of an optimal assay**
 - Reflective of the (complete) mechanism(s) of action (MoAs) of the product
 - Sensitive to structural changes that impact product safety and efficacy
 - Stability indicating
 - Well controlled (low CV, tight precision, etc.)
 - Usable as a QC release assay

- **Why so important?**
 - Active substance understanding
 - Bridging product activity over development
(Comparability of batches for clinical study and commercial material)

Case Study 1- Factor VIII

Enzyme based potency assay



pdb 3CDZ

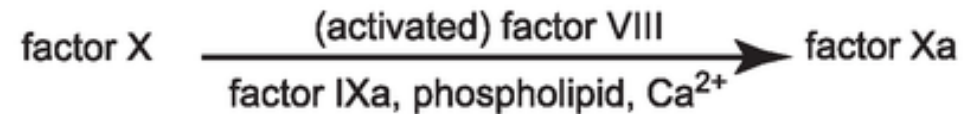
■ Mechanism of Action

- 1) Interplay of F-VIII together with phospholipids, Ca^{2+} and F-IX
- 2) Assembly of Tenase complex on surface of thrombocytes
- 3) Activated Tenase complex activates F-X – active blood clotting cascade

■ Assay

- Ph. Eur. 2.7.4
- (One-stage clotting assay)

Step 1



Step 2



Case Study 2 – Bevacizumab

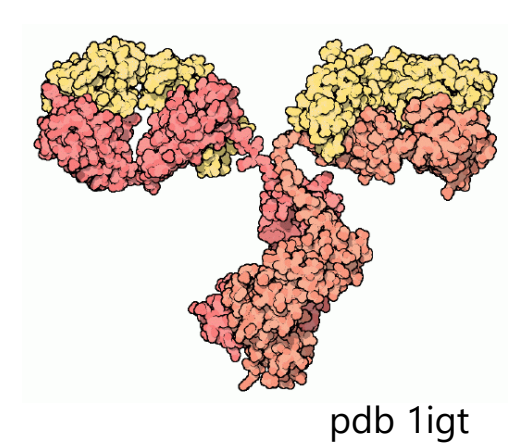
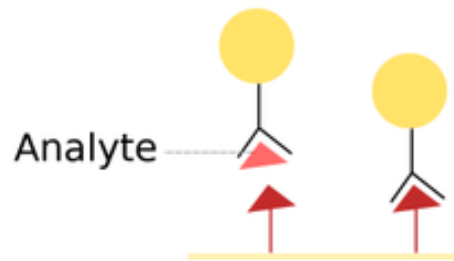
Target binding

- Mechanism of Action

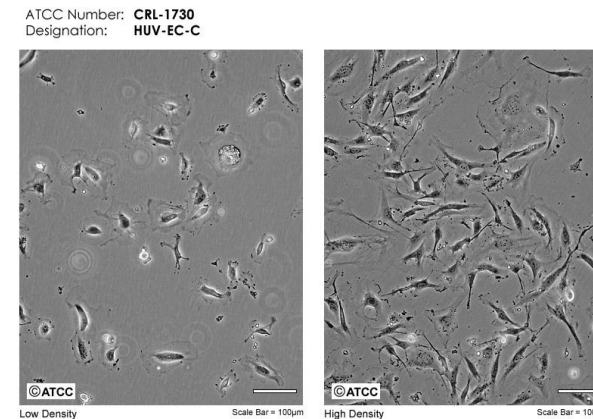
- 1) Binding of mAB (IgG1) to VEGF A
- 2) Inhibition of VEGFR dimerization
- 3) Cell proliferation/angiogenesis is blocked – treatment of cancer

- Assays

- Competitive binding ELISA



- HUVEC proliferation inhibition bioassay



Case Study 3 – Trastuzumab

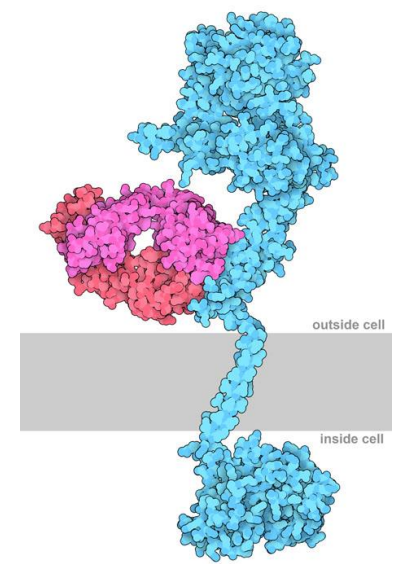
Target binding plus effector functions

■ Mechanism of Action

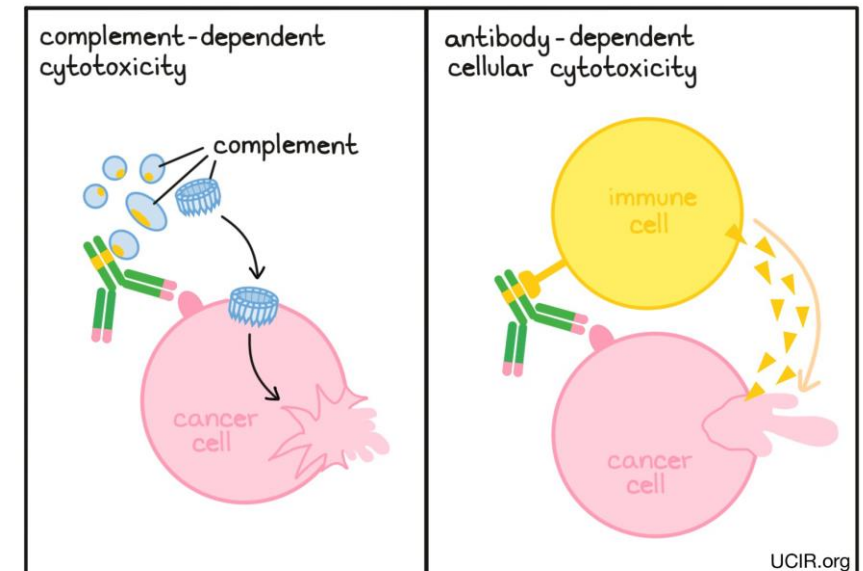
- 1) Binding of mAB (IgG1) to HER2 receptor
- 2) Dimerization of HER2 is blocked
- 3) Cell proliferation/survival/mobility is inhibited
- 4) Activation of ADCC and CDC
- 5) Tumor-cell lysis – treatment of cancer

■ Assays

- HER2 binding by ELISA
- Proliferation inhibition bioassay
- ADCC/CDC assay

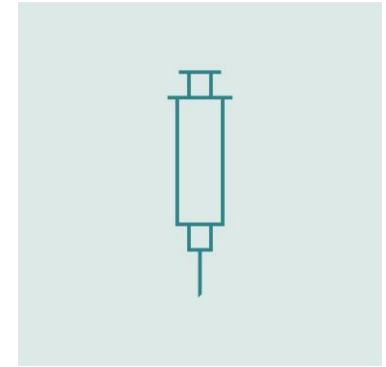


pdb 1n8z, 3pp0, 2ks1



Case Study 4 - Vaccines

Mechanism of Action - Formation of specific antibodies



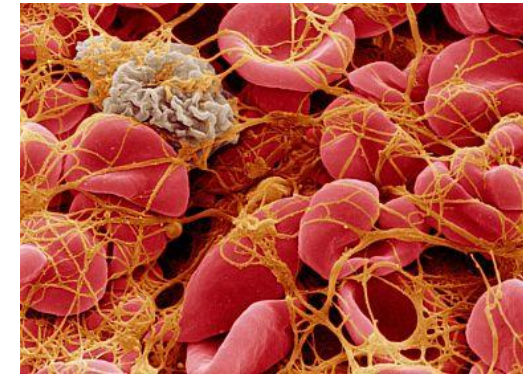
- **Plaque-forming units**
 - Smallpox vaccines Ph. Eur. 04/2022:0164
- **ELISA**
 - Antibody titer after immunisation of mice/guinea-pigs for Pertussis vaccine Ph. Eur. 2.7.16
- **Quantification of antigen**
 - Saccharide content for Pneumococcal polysaccharide vaccine Ph. Eur. 01/2019:2150
 - Haemagglutinin content for Influenza vaccine Ph. Eur. 07/2022:0869
- **Animal challenge assay**
 - Tick-borne encephalitis vaccine (mouse), Ph. Eur. 01/2019:1375
PD₅₀, high variability, 3 R's

Case Study 5 – ATMP

Factor IX AAV gene therapy

- Mechanism of Action
 - 1) F-IX converted to its active form F-IXa by F-XIa
 - 2) together with phospholipids, Ca^{2+} and F-VIII
 - 3) build Tenase complex activating F-Xa (active form of F-X)
 - active blood clotting cascade

- Assay
 - expression assay
 - amount of F-Xa directly proportional to activity of F-IX expressed
 - amount of F-Xa determination through hydrolysis of chromogenic F-Xa substrate

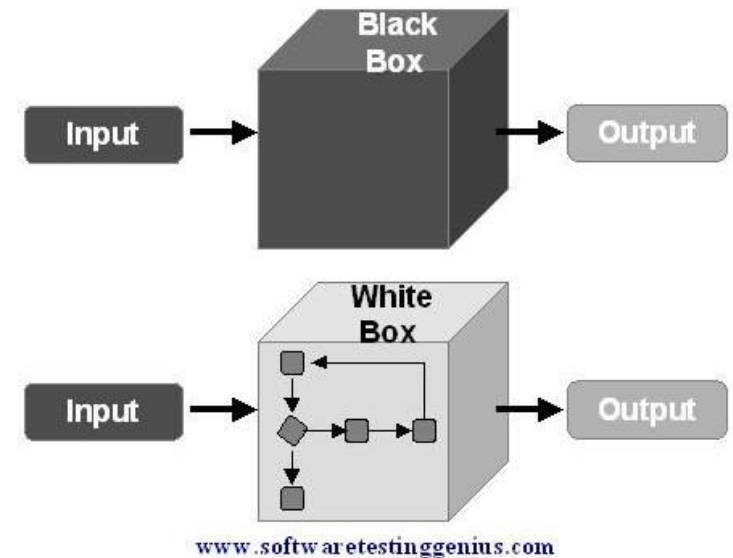
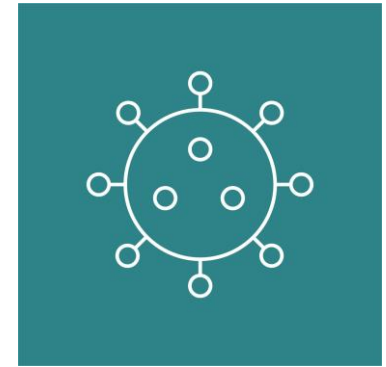


NIH, doi: 10.1038/nmat4066

Case Study 6 – ATMP

AAV gene therapy - unfavourable potency assay

- Usage of AAV product carrying gene needed for mitochondrial respiratory chain activity
- Assay
 - mRNA level, vg titer/infectious titer
(complete) mechanism(s) of action (MoAs) not reflected
 - Compromise for complex MoA via EMA-SA
 - Black box testing
oxygen consumption rate (mitochondrial respiration),
extracellular acidification rate (glycolysis)



Method validation

General guidance

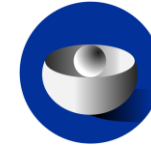
- **ICH Q2 (R2)** Validation of analytical procedures (under revision)
Validation principles covering a wider range of analytical procedures (spectroscopic/multivariate statistical analyses/biological products)
(EMA/CHMP/ICH/82072/2006)
- **ICH Q14** Analytical procedure development (under public consultation)
Science and risk-based approaches for developing and maintaining analytical procedures (EMA/CHMP/ICH/195040/2022)
- **ICH M10** Bioanalytical method validation
Focus on chromatography and ligand binding assay validation parameters
(EMA/CHMP/ICH/172948/2019)

Method validation

Considerations

- Qualification term not defined but used for instrument/facilities
- Early suitability needed
- Limited sample availability, sample stability
- ATMPs: often pivotal PhI/II clinical studies
- Acceptance criteria can be adjusted during development
- Broad acceptance criteria better than „report results“ for essential parameters
- Selection of Reference Standard

Regulatory requirements



- (Full) validation not mandatory for clinical trial approval (except methods related to safety)
→ sufficient product control required before start of clinical studies
- Validated functional assay required at time of MAA
- Comparability of (clinical) batches to intended commercially manufactured batches must be demonstrated
- ATMPs: “pivotal” PhI/II clinical studies - MAA considerations apply early (early interaction with regulatory agencies recommended)
- Stability data
- Comply with Ph. Eur. standard methods
- Characterisation/Establishment Reference standard system

Tack så mycket!



Austrian
Federal Office for
Safety in Health Care
BASG

Thank you!

Markus B. TOMEK, PhD

Assessor for Biologics

BASG -

Austrian Federal Office for Safety in Health Care

Traisengasse 5

1200 Vienna

T +43 (0) 50555 36831

markus.tomek@ages.at

www.basg.gv.at

