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# Change Management and Comparability for Cellular & Gene Therapy Products

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# 2023 Draft Guidance

## Manufacturing changes and comparability



### Manufacturing Changes and Comparability for Human Cellular and Gene Therapy Products

#### Draft Guidance for Industry

This guidance document is for comment purposes only.

Submit one set of either electronic or written comments on this draft guidance by the date provided in the *Federal Register* notice announcing the availability of the draft guidance. Submit electronic comments to <http://www.regulations.gov>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. You should identify all comments with the docket number listed in the notice of availability that publishes in the *Federal Register*.

Additional copies of this guidance are available from the Office of Communication, Outreach and Development (OCOD), 10903 New Hampshire Ave., Bldg. 71, Rm. 3128, Silver Spring, MD 20993-0002, or by calling 1-800-835-4709 or 240-402-8010, or email [ocod@fda.hhs.gov](mailto:ocod@fda.hhs.gov), or from the Internet at <https://www.fda.gov/vaccines-blood-biologics/guidance-compliance-regulatory-information-biologics-guidances>.

For questions on the content of this guidance, contact OCOD at the phone numbers or email address listed above.

U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Biologics Evaluation and Research  
July 2023

## Provide advice for manufacturers of human cellular and gene therapy products regarding:

Managing manufacturing changes and reporting the changes to FDA

For both investigational and licensed products

Analytical comparability studies

Special considerations for cellular and gene therapies

Comparability study design and statistical approaches

*This draft guidance document is issued for comment purposes only*

*You can use an alternative approach if the approach satisfies the requirements of the applicable statutes and regulations*

# Broad themes and highlights

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**Risk management**

**Planning for future changes**

**Phase-dependent expectations**

**Comparability studies**

**Obtaining advice and feedback from FDA**

# OUTLINE

**Managing manufacturing changes**

**Reporting manufacturing changes to an IND or BLA**

**Assessing comparability**

# MANAGING MANUFACTURING CHANGES

# Common reasons for manufacturing changes

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**Improving product quality**

**Improving efficiency or reducing costs**

**Adjusting to changes in the availability of materials**

**Expanding product supply**

- Scale up

- Scale out

- New facility

# Risk management

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## **The risk of a significant manufacturing change can be high for cellular and gene therapies**

These are complex and novel products

Risk management relies on a clear understanding of critical aspects of the product and manufacturing process

## **Use a formal risk management strategy**

Will enable you to evaluate manufacturing changes effectively and efficiently

Will aid when deciding whether a comparability study is needed

And will guide how to design the comparability study

**We recommend *Q9(R1) Quality Risk Management* for advice on how to systematically manage risk**

# Manufacturing changes can pose risks to product quality

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**It is critical that manufacturing changes do not adversely affect product quality**

Changes cannot compromise the safety or effectiveness of the product

**Perform a risk assessment before making manufacturing changes**

Risk assessment plays a central role in quality risk management

**If a change has a potential to adversely affect product quality, determine the impact of the change**

Perform comparability studies to evaluate any adverse effects of the change on product quality



# Phase-dependent considerations when making manufacturing changes

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## **The extent of comparability data needed is highly dependent on:**

- The stage of clinical development

- The severity and likelihood that the change might adversely affect product quality

## **Comparability studies and statistical approaches should typically be more rigorous later in the product lifecycle**

- Changes in the middle of a pivotal study

- Changes right before a BLA submission

- Changes post-licensure

## **Best practices**

- Develop a thorough understanding of the product's quality attributes and how the manufacturing steps affect these attributes

- When possible, implement any extensive changes before initiating pivotal studies

# Challenges in managing manufacturing changes for cellular and gene therapy products

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## **Challenges when assessing risks**

Limited characterization of the product and the manufacturing process

Uncertain mechanisms of action and difficulty measuring potency

## **Challenges for comparability studies**

Variable cellular source material

Limited cellular source material

Limited number of lots

Small lot size or limited sample volume

Changes in assays

# Planning ahead for changes

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## **Plan ahead to reduce risks and disruptions from future manufacturing changes**

- Develop a scalable process

- Retain sufficient samples of all lots

- Manufacture a sufficient number of lots to support future comparability studies

- Understand how changes to assays might affect your ability to evaluate comparability

# **REPORTING MANUFACTURING CHANGES TO AN IND OR BLA**

# Reporting manufacturing changes to INDs

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## **Submit manufacturing changes that may affect product quality**

- Update CMC information using IND amendments

- Submit CMC information well in advance of implementing the change

  - To allow sufficient time for FDA review and feedback

- Also summarize any significant manufacturing changes in your IND's annual report

## **An IND may be placed on clinical hold if:**

- You make a manufacturing change with a potential adverse impact on safety or effectiveness, but you do not adequately evaluate the impact of the change

# Some changes may yield a different product

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## **Some changes fundamentally alter the design or nature of a product**

A fundamentally new product should be submitted in a new IND

These types of changes are not amenable to comparability studies

Please ask us if you are unsure

### **Examples:**

For a T cell therapy:

Change from CD4+ T cells to a mixture of CD4+ and CD8+ T cells

For a gene therapy vector:

Change to the vector capsid that alters vector tropism

For a genome editing product:

Different target gene

# Reporting manufacturing changes to BLAs

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**Assess the potential impact of all manufacturing changes**

**Report the change in a supplement:**

For manufacturing changes that have a substantial or moderate potential to have an adverse effect on product quality

**Annual report:**

For manufacturing changes that have a minimal potential to have an adverse effect on product quality

**Include data to evaluate the effect of the change on product quality**

**An approved comparability protocol may ease implementation of a change**

Submit your comparability protocol in a supplement, and we will review

# ASSESSING COMPARABILITY



# Obtaining advice on comparability studies

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**Involve a statistician when you design a comparability study**

## **Obtaining feedback from FDA**

Prospectively discuss significant manufacturing changes

Provide a detailed comparability protocol

If a change needs to be made but the product is not comparable, discuss proposed clinical studies with the post-change product

Mechanisms for obtaining feedback:

- Formal meeting request

- IND amendment

- BLA product correspondence

# Comparability studies, protocols and reports

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**Before conducting a comparability study, prospectively write a comparability protocol:**

- Describe the manufacturing change

- Assess the risk of the change

- Describe the study design in detail, including which lots will be used

- List test methods and acceptance criteria

- Describe how the data will be analyzed

**Submit the comparability report to your IND or BLA**

# Goals of an analytical comparability study

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## **Ensure that the safety and effectiveness of the product will not be compromised by the manufacturing change**

It is not necessary for product quality to be identical after a manufacturing change

Demonstrate that the change has no adverse effect on the safety or effectiveness of the product

## **Evaluate all attributes of the product that might be adversely affected by the change**

Changes to the manufacturing process can have higher risk than routine manufacturing

Lot release assays may not always be sufficient to evaluate comparability

Additional product characterization is often appropriate

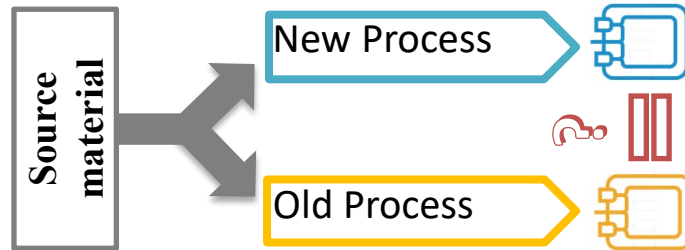
# Products derived from a variable cellular starting material

## Donor-derived cells are highly variable

This results in variable product attributes, which can make it difficult to evaluate how manufacturing changes affect product quality

## Split-source material study design and paired statistical analysis may help

This study design can minimize the effect of source material variability



## When manufacturing product for comparability studies:

Best to use the same type of source material as the clinical product

But may be able to use other material if justified  
(for example, cells from healthy donors)

# The comparability report

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## Introduction

- Description of the manufacturing changes

- Rationale and justification for the changes

- Justification of the comparability study design

- Timeline for implementing the changes

## Risk Assessment

- Determine quality attributes that are at risk from the change

- Select product attributes and process parameters to be evaluated

# The comparability report

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## **Comparability Study Design**

- List the lots included in the study, and sources of historical product data

- Describe the test methods

- List the acceptance criteria for comparability of each attribute

  - These should be based on understanding the relationship of the attribute to safety or effectiveness

- Refer to the draft guidance for some advice on specific situations

## **Results and conclusions**

- Include data in tabular format, along with summary statistics

- Describe the conclusions from the study

- Explain any changes or deviations from the comparability protocol

# Reaching a conclusion about comparability

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## **A comparability study should reach a definitive conclusion**

Is the post-change product comparable to the pre-change product?

## **Failing to detect differences is *not* the same as demonstrating equivalent product quality**

Some comparability studies are inconclusive because of:

- Lack of statistical power

- Imprecise assays

- Poor understanding of a product's quality attributes

- Lack of assays to measure a product attribute that may be affected by the change

A two-sample *t*-test is usually not an appropriate method

## **If a product is not analytically comparable after a change (or if the comparability study is inconclusive), then:**

Nonclinical or clinical studies may be needed to demonstrate the safety and/or effectiveness of the post-change product

# Conclusions

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- **Risk management should play a central role in managing manufacturing changes and designing comparability studies**
- **Plan ahead for future changes**
- **FDA can provide advice throughout the lifecycle (IND, BLA or post-approval)**



# CMC DEVELOPMENT AND READINESS PILOT PROGRAM (CDRP)

- CMC COMMITMENT DEVELOPED UNDER PDUFA VII -

- Interesting fact: PDUFA VII is first time CMC became part of PDUFA discussion since program inception in 1992

# CDRP-Federal Register Notice (FRN)

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA-2022-N-2396]

### Chemistry, Manufacturing, and Controls Development and Readiness Pilot Program; Program Announcement

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA or Agency) is announcing the opportunity for a limited number of applicants to participate in a Chemistry, Manufacturing, and Controls (CMC) Development and Readiness Pilot (CDRP) program, to facilitate the expedited CMC development of products under an investigational new drug (IND) application, where warranted, based upon the anticipated clinical benefit of earlier patient access to the products. FDA is implementing this pilot program to facilitate CMC readiness for selected Center for Biologics Evaluation and Research (CBER)- and Center for Drug Evaluation and Research (CDER)-regulated products with accelerated clinical development timelines. To accelerate CMC development and facilitate CMC readiness, the pilot features increased communication between FDA and sponsors and explores the use of science- and risk-based regulatory approaches, such as those described in FDA guidance, as applicable. This notice outlines the eligibility criteria and process for submitting a request to participate in the pilot.

**CDRP Start Date : April 1, 2023**

**Duration of CDRP: 2023-2027 (PDUFA VII Period)**

Sponsors of INDs with accelerated clinical development timelines are invited to apply to the CDRP

### CDRP aims to:

- Facilitate the expedited CMC development of products
- Increase communication between FDA and sponsors
- Provide patients with earlier access to these products
- A total of 9 INDs will be selected each year (6 CBER and 3 CDER)

[Chemistry, Manufacturing, and Controls Development and Readiness Pilot \(CDRP\) Program | FDA](#)

# CDRP Program: Anticipated benefits

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Increased communication between FDA and sponsors

Facilitate CMC readiness for products with expedited clinical designations

More complete BLA submissions facilitating regulatory review efficiency

Provide patients with earlier access to transformative therapies

# Acknowledgements!

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- Dr. Heather Lombard
- Dr. Andrew Byrnes
- And many others



# THANK YOU!

