

# Potency Assays for ATMPs – Selection of Assay Platforms and Data Processing Methods are Key Aspects for Successful Control Strategies

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Part 1:

**PCR, immunoassays, and flow cytometry  
as key components to the control  
strategies of ATMPs**

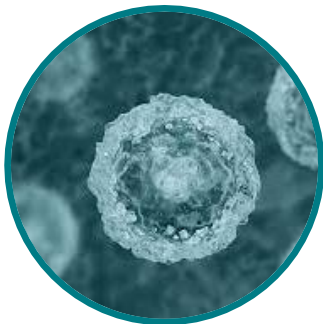


# Learning Objectives

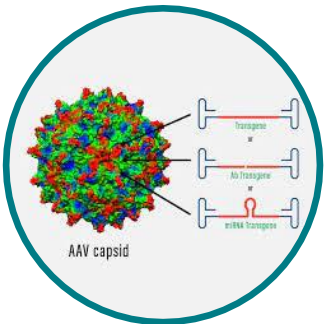
## Summary

- Understand the analytical control strategy for ATMPs
- Discuss techniques applied to the control of ATMPs and how they are utilized; flow cytometry, ddPCR, qPCR, and immunoassays (including ELISA and MSD)
- Phase appropriate considerations for method utilization and qualification
- Understand the significance of potency assays in control strategies and the regulatory expectations for gene therapies
- Discuss example case studies to demonstrate the analytical technologies and approaches applied to potency assay development for gene therapies

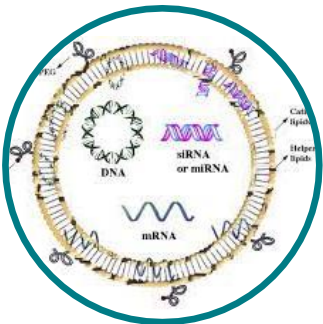
# Advanced Therapy Medicinal Products (ATMPs): *Gene and Cell Therapies (GCT)*



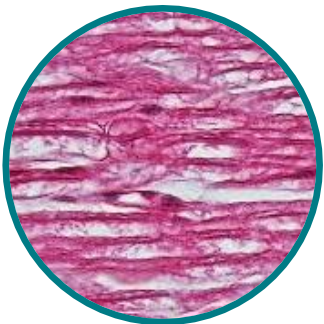
Stem Cells



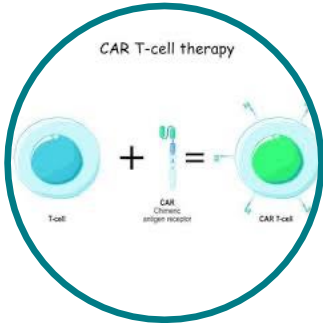
AAV



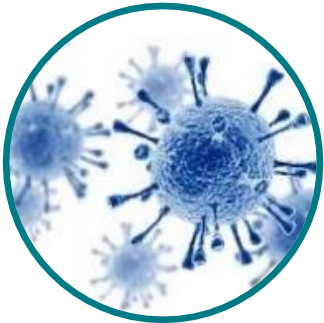
Lipid Nanoparticles



Tissue Products



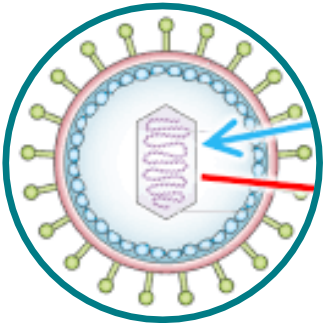
CAR T



Lentivirus



Naked or Paired  
Nucleic Acid



Engineered  
Oncolytic Virus

# What is a CMC Analytical Control Strategy?

## CMC – Chemistry, Manufacturing and Controls

- Section of regulatory filing: analytical testing is the controls aspects
- Characterization, tests and specifications designed to assure SISPQ (Safety, Identity, Strength, Purity and Quality) for a product or substance
- Addresses and monitors CQAs (critical quality attributes)
- Contains “control strategy” which is typically 10’s of tests driven by: required safety, manufacturing process, formulation and matrix, drug properties, and development data
  - A combination of GMP and characterization assays, combination of PAT and release tests

# What Drives a Control Strategy?

Development Phase, CQAs, and SISQP

## Clinical Phase of Development

The phase of development will affect the rigor and demands of the assays and the dimensions of the control strategy as the processes, methods, and product evolve

## SISQP: Safety, Identity, Strength, Purity and Quality

The guiding principles and foundation of the cGMP control and monitoring of a drug substance/API or drug product

## CQA: Critical Quality Attribute

"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 Guideline Pharmaceutical Development Q8(R2)

# Challenges to CMC from ATMPs

## Complex and Multiple MOAs

- Matrix approach (multiple assays)
- Functional assay (close as possible to the MOAs)
- Required to be quantitative and stability indicating
- MOA characterization (does not need to be GMP as not part of the control system)

## Complex Assay Procedure

- Additional procedural steps and additional critical reagents
- Larger specifications on target titer/co

## Reference Standard

- Well-characterized, qualified and stored appropriately

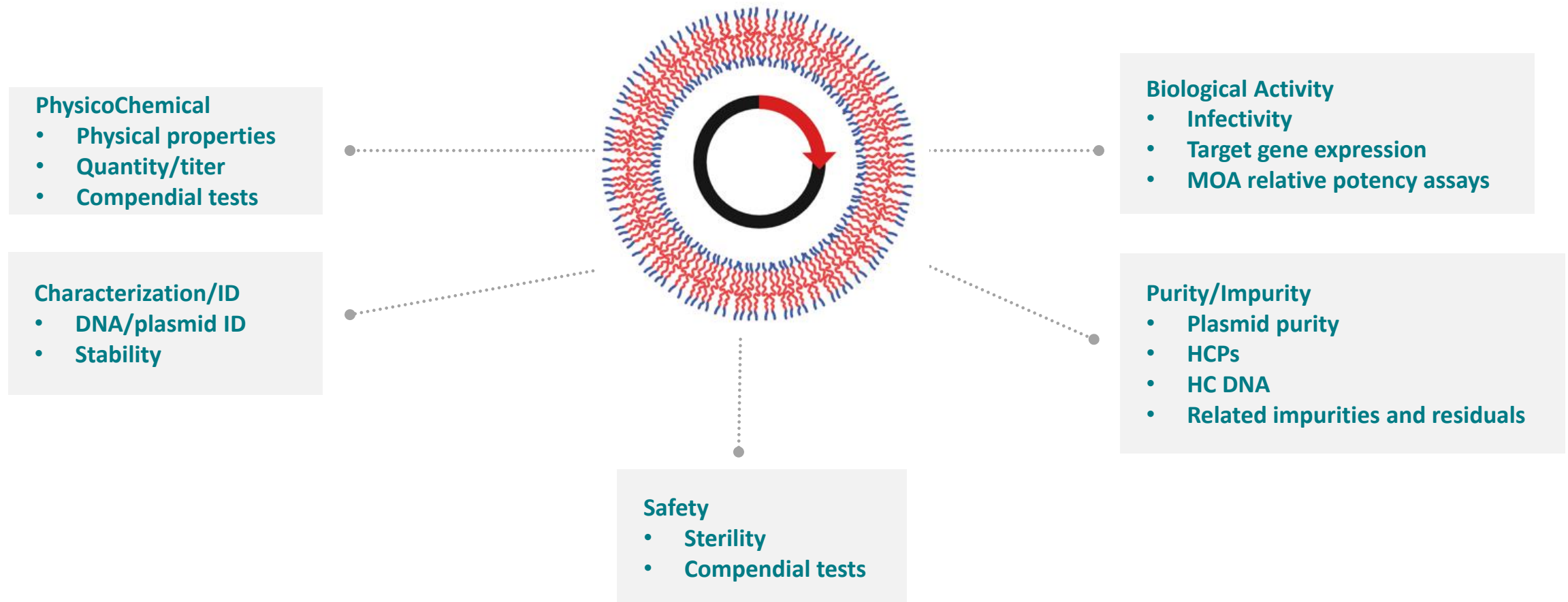
## High Degree of Variability Between Batches

- Changes in process, scale-up, raw materials, plasmid, promoter, vector, etc.

## Limited Lot Size/Limited Material for Testing – Small Batches

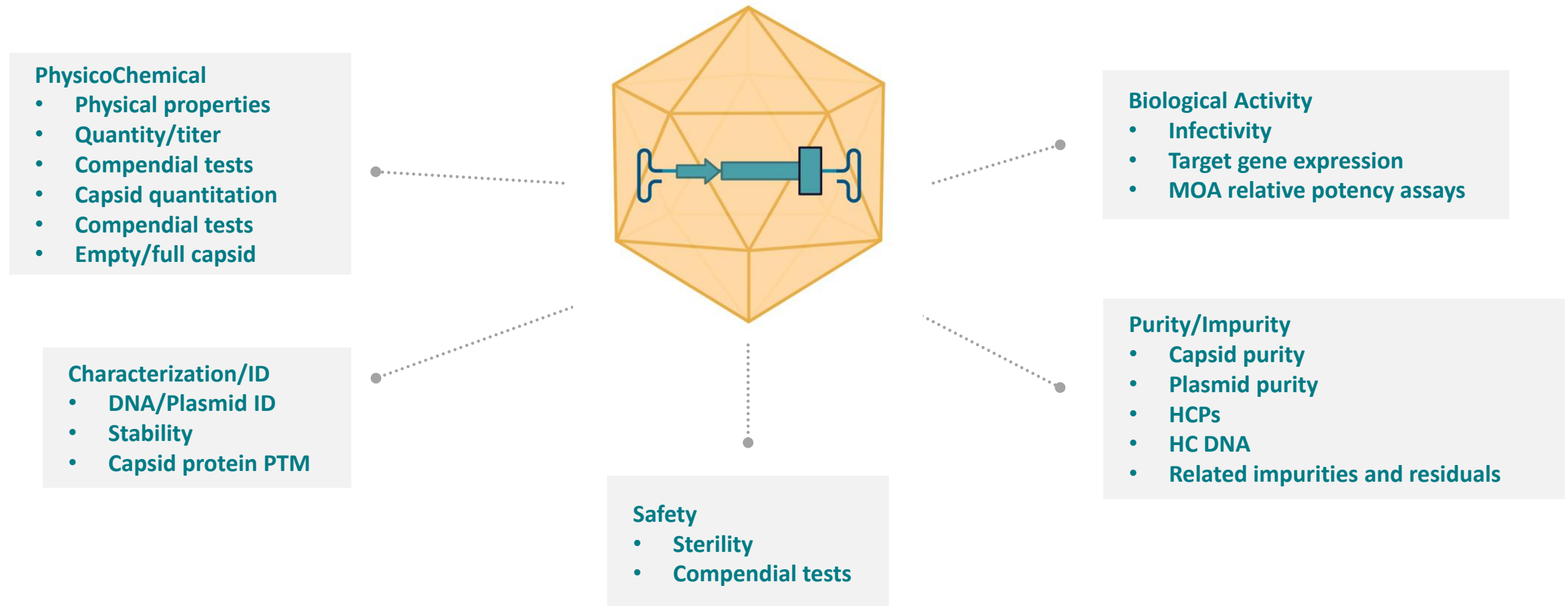
- Variability in starting batches
- Limited lot size/lack of appropriate reference materials
- Increase in comparability studies

# Control Strategy for a pDNA or mRNA (LNP) Product





# Control Strategy for an AAV



# What Might be in a Control Strategy for an AAV (“SISPQ”)

	<u>Test</u>		<u>Test</u>
Strength	Vector Titer	Potency	Infectious Titer
Identity	GOI Sequence	Potency	Particle to infectivity ratio
Strength	Gene expression	Potency	Transgene Expression
Identity	Pro-viral Sequencing (DNA sequencing)	Potency	Enzymatic Activity; Relative Potency
Strength	Virus/Capsid titer	Potency	Stability (long term; short term)
Physical	Capsid Occupancy or Empty/Full Evaluation	Potency	Relative Potency (cell culture/vector transduction / ELISA)
Physical	Osmolality	Potency	Relative %CAR Expression (cell culture/vector transduction/flow cytometry)
Physical	pH	Potency	Infectious Titer (transduction/cell culture/qPCR)
Physical	Aggregates		
Physical	Appearance		
		Safety	Replication-Competent Virus
Purity	Process-related impurities: Benzonase, Resins, etc.	Safety	Adventitious Viruses
Purity	Plasmid Purity	Safety	Endotoxins
Purity	Expressed Purity	Safety	Mycoplasma
Purity	Residual Plasmid DNA	Safety	Adventitious Viruses: Adeno-Associated Virus (qPCR)
Purity	Residual HC-DNA (SV40 T-Ag, E1A)	Safety	Replication Competent Lentivirus
Purity	Residual HCP	Safety	RCL (EOP) End of Product
Purity	Other Residual Proteins/DNA	Safety	Adventitious Viruses: In Vitro Adventitious Agents (cell culture)
Purity	Residual Genomic DNA (qPCR)	Safety	Viral Safety Testing (Cell therapies)
Purity	p24 Concentration (ELISA)	Safety	Bovine Polyoma virus
Purity	Pluronic, Tween, Triton	Safety	Bovine viral contaminants
Purity	Residual Benzonase		

# Common Techniques for CMC Testing of AAV (GCT/ATMP)



**Protein Simple Maurice**

- Empty/Full Capsid
- Glycoform Analysis
- Protein Purity
- Reagent Characterization



**Bio-Rad QX200 and QXOne Droplet Digital PCR Systems**

- Vector Copy Number
- Relative Potency
- Gene Expression
- Residual Plasmid
- Host Cell DNA
- MOA Identification



Flow Cytometry

- Cell attributes
- Gene Expression
- Cell activity
- Receptor binding/expression
- Multi-parameter analysis
- Reagent Characterization



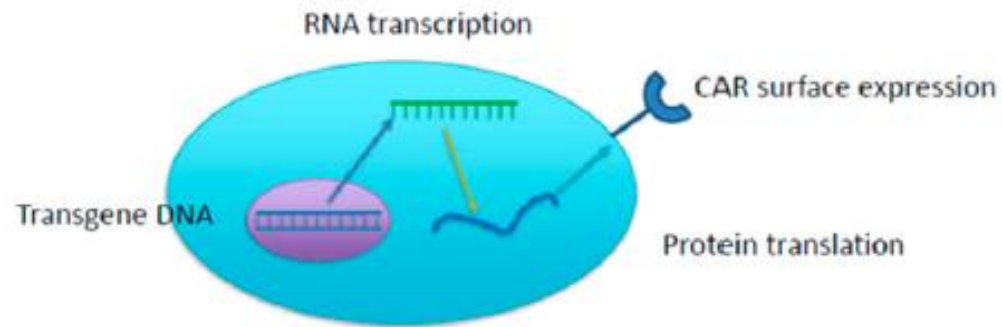
**Thermo Scientific Orbitrap Exploris**

- LCMS Peptide Map
- Glycoform and PTM Characterization
- Impurity ID and Identity
- Capsid Characterization
- Reagent Characterization
- Potency Readout

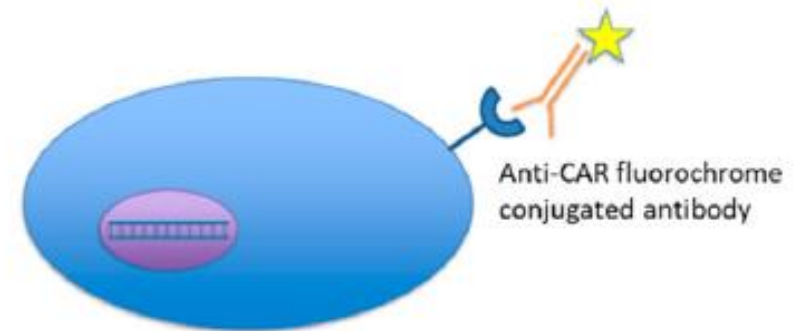
# Quantitative Strategy for Cell Therapies

Cellular Kinetics, Persistence

**Quantitative PCR**  
CAR-T concentration is inferred from the level of transgene DNA



**Flow Cytometry**  
direct measure of the CAR-T therapeutic agent

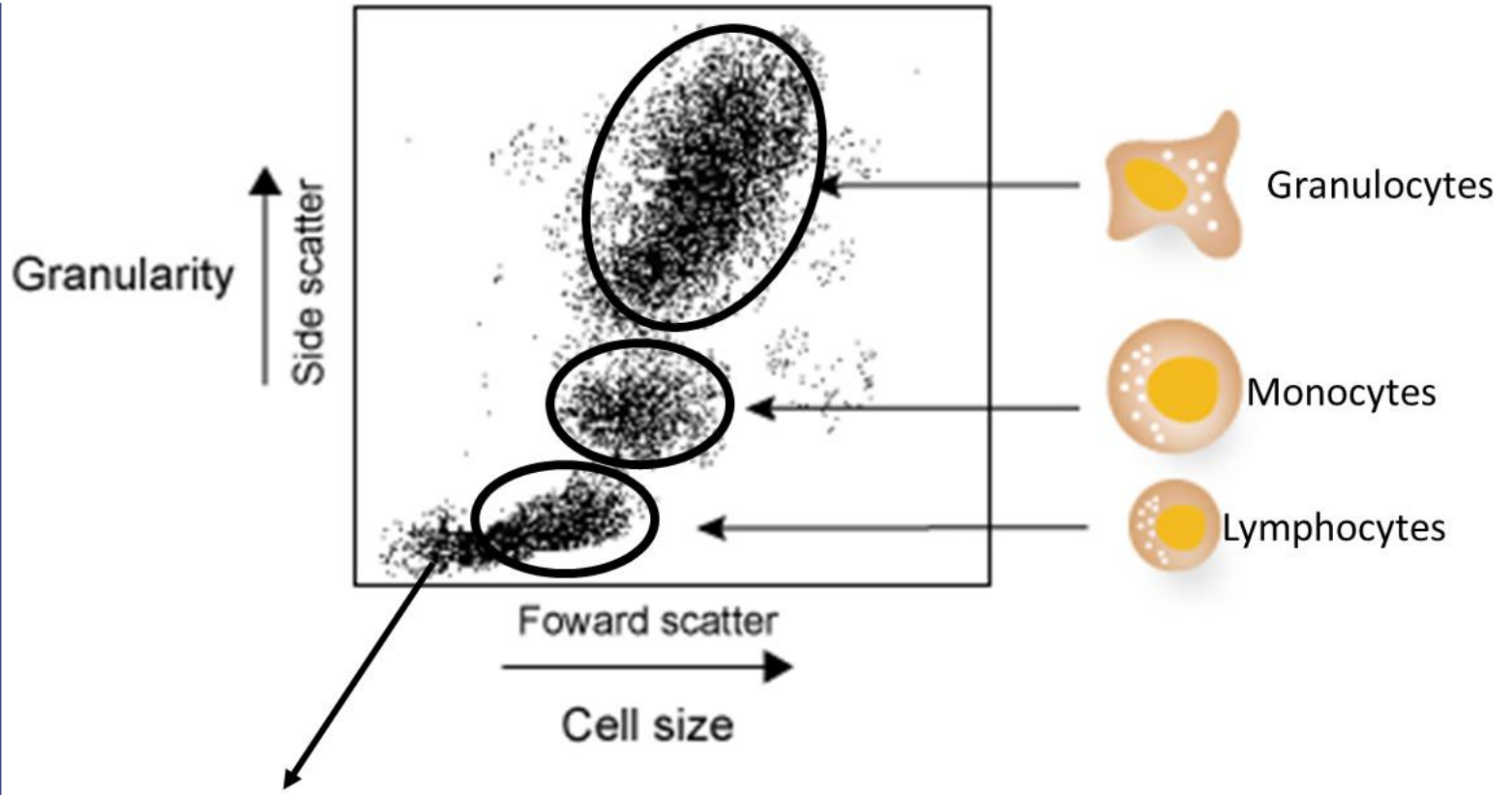
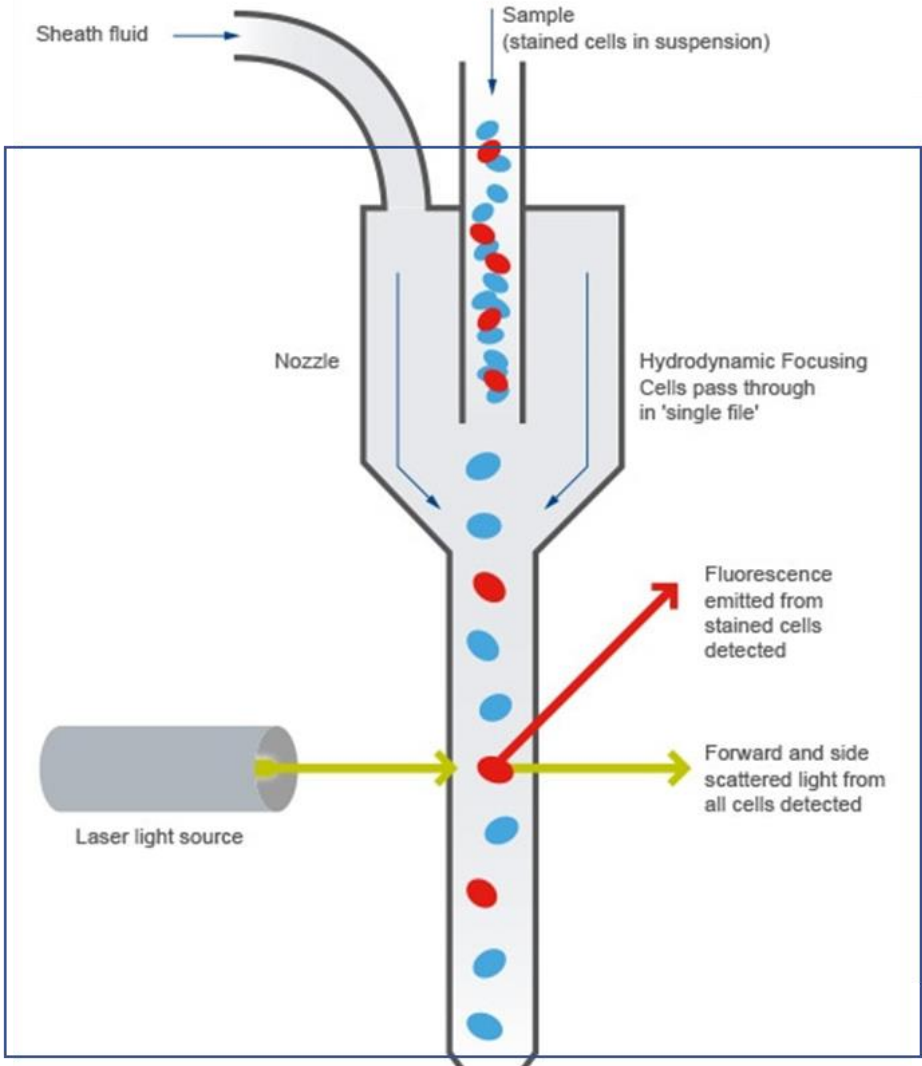


Hays et al. Int. J. Mol. Sci. 2023; 24, 695.



# Flow Cytometry

# Flow Cytometry – Platform Basics



<https://www.creative-diagnostics.com/flow-cytometry-guide.htm>

# Advantages of Flow Cytometry Over Cell-based Assays

- 1. High-Throughput:** Flow cytometry allows for the rapid analysis of a large number of cells
- 2. Multiparametric Analysis:** Flow cytometry allows for the simultaneous measurement of multiple parameters in a single experiment and provides a more comprehensive understanding of cellular characteristics compared to some cell-based assays
- 3. Quantitative Measurements:** Flow cytometry provides quantitative data for multiple attributes.
- 4. Cell Sorting Capability:** Flow cytometers equipped with cell sorting capabilities can isolate specific cell populations based on their characteristics.
- 5. Single-Cell Analysis:** Flow cytometry can analyze and sort individual cells, enabling the study of cellular heterogeneity within a population
- 6. Real-Time Analysis:** Flow cytometry provides real-time data acquisition allowing analysis of fast kinetics, transient changes, or dynamic interactions within a cell population.
- 7. Automated Data Analysis:** Flow cytometry data analysis can be automated, facilitating the handling of large datasets using a range of software tools.
- 8. Transferability:** The movement or transfer of experiments between instruments or even between platforms is relatively robust.
- 9. Flexibility:** All the above attributes makes flow a highly flexible and adaptable technique amenable to cell-based determination.

# Adeno-Associated Virus (AAV)

**MOA:** AAV3 Capsid that contains a single-stranded DNA genome carrying a gene

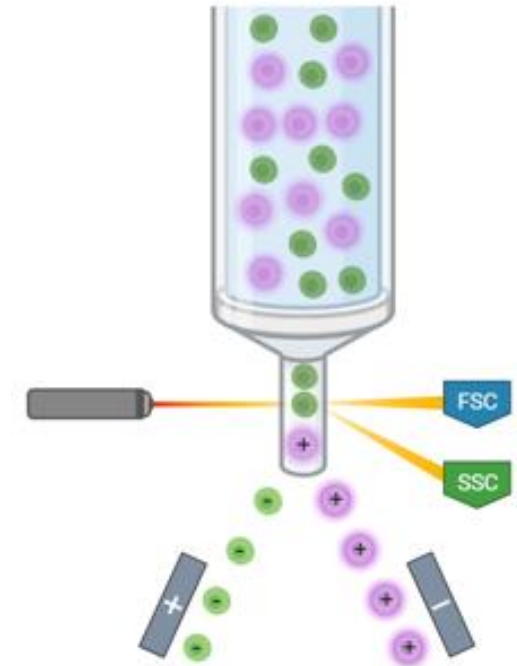
- Protein replacement therapy

## Functional Flow Cytometry Assay:

- Flow cytometry provides quantitative data, allowing for accurate measurements of cellular features, such as protein expression levels, cell cycle distribution, and apoptosis. This is particularly useful when precise quantification is required for experimental analysis.
- Assay development/Optimization challenges:
  - Sourcing critical reagents
  - KO vs WT cells
  - Custom antibodies

## Assay Lifecycle Challenges:

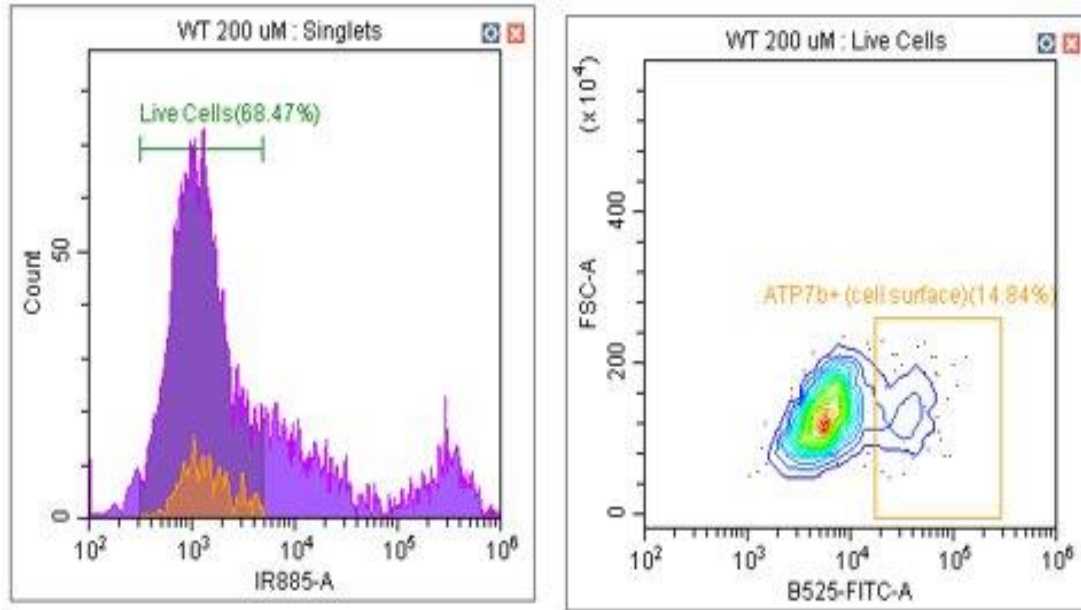
- Long-term stability of custom critical reagents
- Bridging of new lots of critical reagents



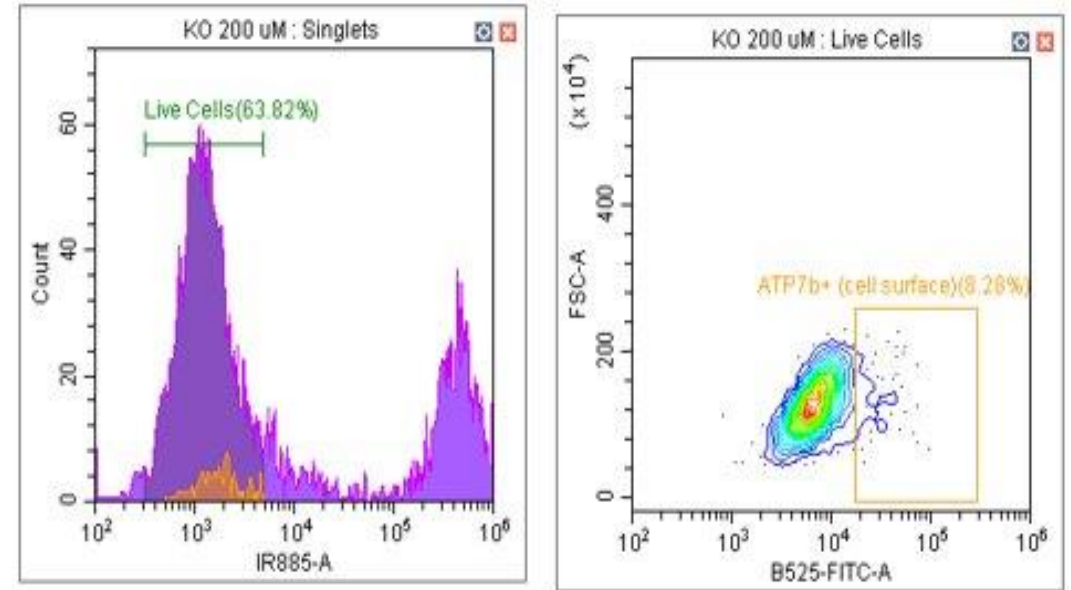


# Representative Data

WT Cells, 200 uM Stimulant X



KO Cells, 200 uM Stimulant X



Note – Begin with 8-point curve for practical reasons... not optimal... end with 12

# Snapshot for Assay (Phase I) - CAR-NK

## Background:

Modality – Irradiated uAPC cells (CAR-NK therapy)

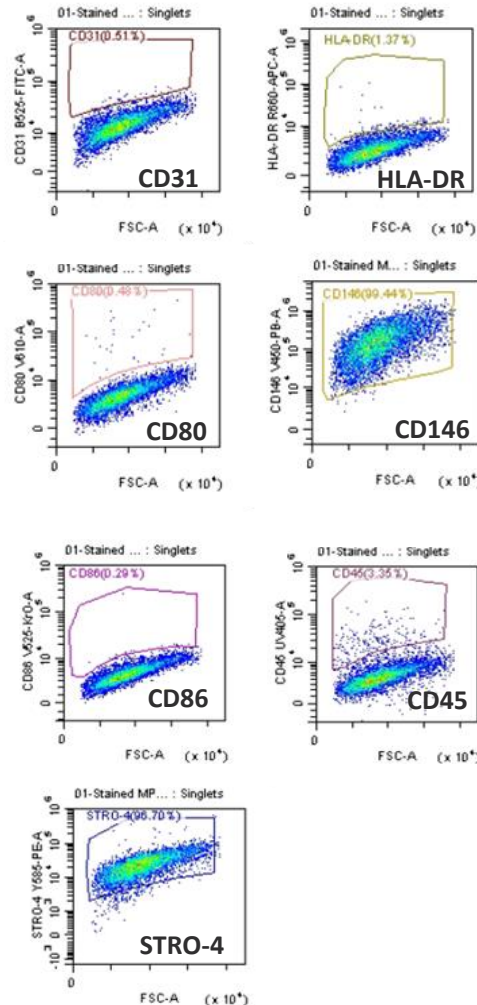
MOA – Ki67 is absent in resting cells (G0) but present in all active phases of the cell cycle.

Cells – irradiated uAPC and non-irradiated K562

Readout – Flow cytometry to demonstrate the lack of proliferation in irradiated uAPC cells over time

## Description of Assay:

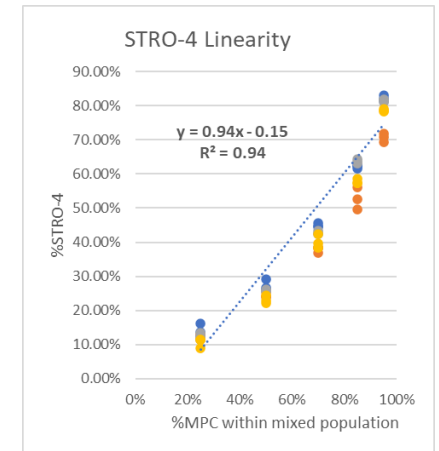
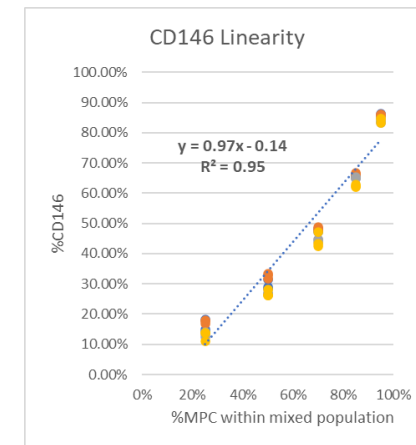
This procedure demonstrates the lack of Ki67 staining in the nucleus of irradiated uAPC cells compared to the control non-irradiated K562 cells cultured simultaneously over a period of 21 days.



Representative data from assay

GMP Phase I Qualification:

Assay Performance Characteristics:



Specificity: STRO-4 and CD146 isotype antibodies generated a response similar to unstained cells demonstrating specificity

# Snapshot for Assay (Phase I) - MPC

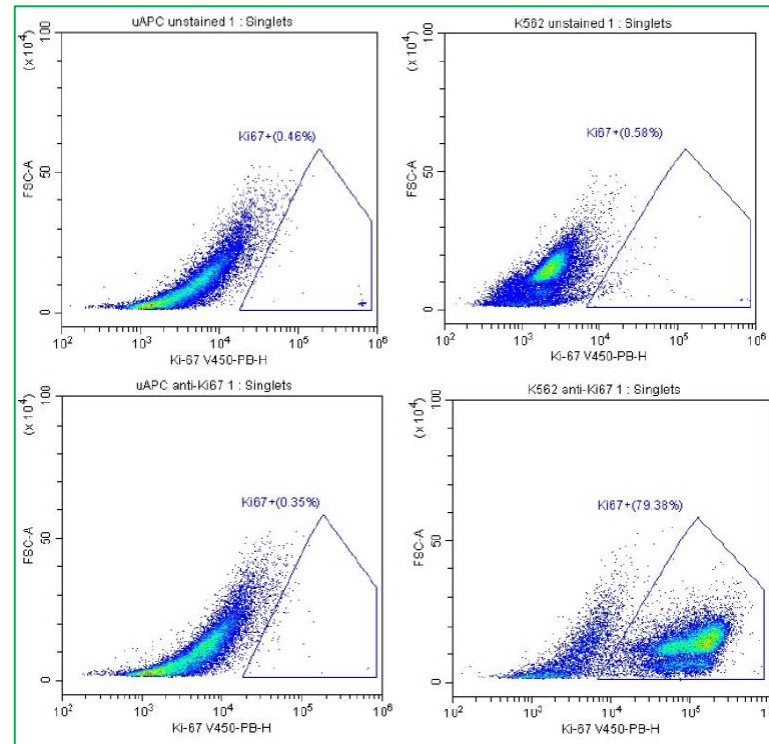
## Background:

Modality – Mesenchymal Precursor cells (MPC)  
Cells – Bone marrow derived MPC

Readout – **Flow cytometry** to demonstrate positive STRO4 and CD146 expression, with low CD31, CD45, CD80, CD85, HLA-DR expression.

## Description of Assay:

This procedure demonstrates the high expression of positive markers STRO4 and CD146 on MPC cells while control Jurkat cells display high expression of CD31 and CD45 and control Raji cells express CD45, CD80, CD86, and HLA-DR, which are all negative markers for MPC cells.

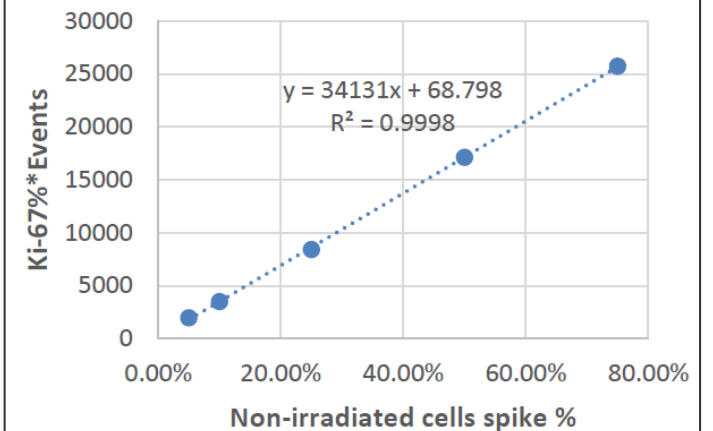


Representative data from assay

GMP Phase I Qualification:

Assay Performance Characteristics:

Ki-67 Linearity Average of Runs



# ddPCR and qPCR



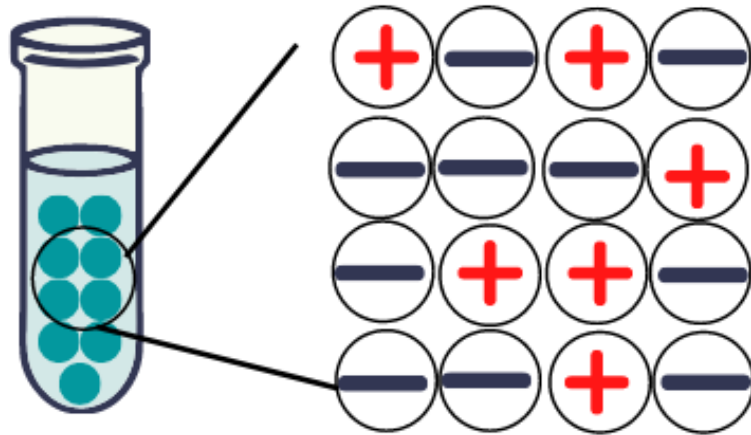
# The Technology Platforms

	dPCR	qPCR
Quantitative (with standard curve)	+	+
Absolute quantitation	+	-
Susceptible to interferences/inhibitors	low	variable/high
Multiplex capable	+ / ++	++
Sensitivity	++	++
Precision for rare events	++	+
Reverse transcriptase-incorporated workflow	+	+
Cost of instrumentation	\$\$\$	\$/\$\$
Cost of reagents/consumables	\$\$\$	\$\$
Average run throughput	5h	1.5h
Reactions per plate	96	96/384



# ddPCR vs qPCR

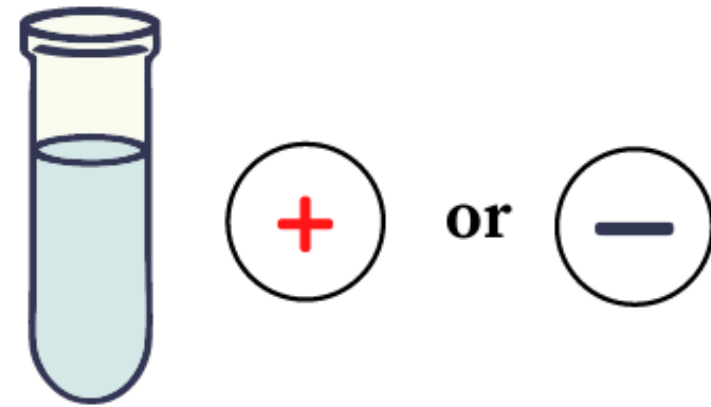
## Digital PCR (ddPCR)



Aliquot partitioned into droplets with PCR occurring in each. Many opportunities to detect target DNA.

VS.

## qPCR



Aliquot has one PCR performed. One opportunity to detect target DNA.

# Molecular Applications in Cell Therapy Drug Development

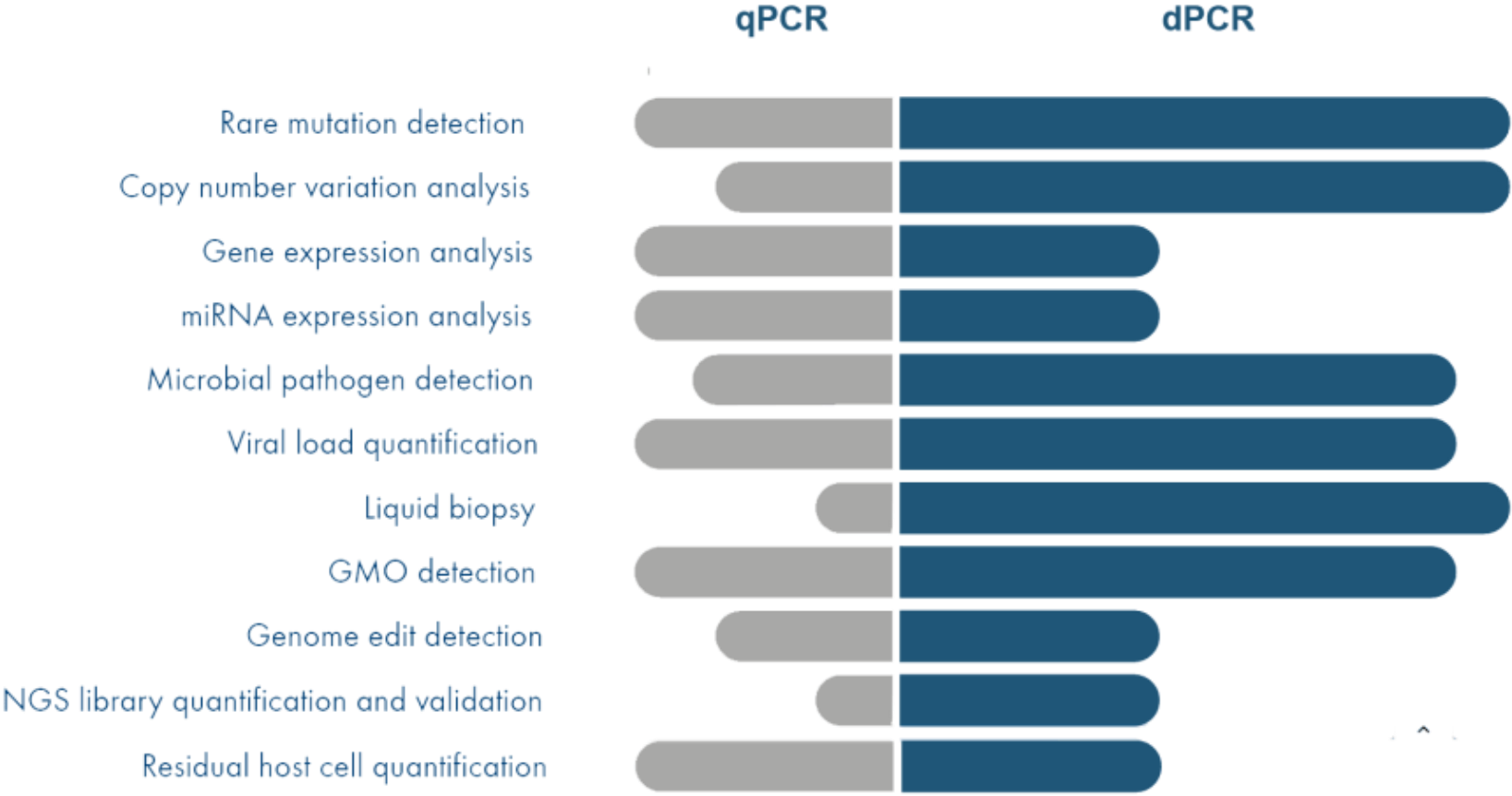


## Chemistry, Manufacturing, and Controls (CMC)

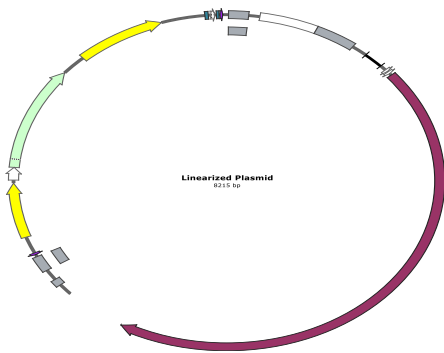
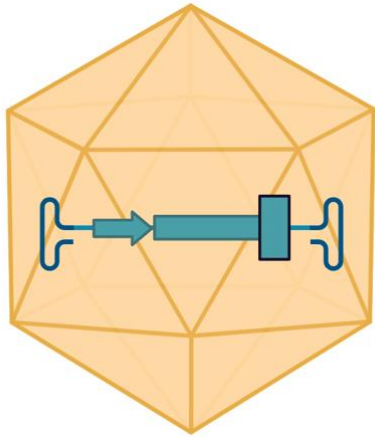
- Vector Copy Number (VCN)
- Replication Competent Lenti/Retrovirus (RCL/RCR)
- Adventitious agents
- Residual plasmid
- Host cell DNA
- Potency

Currently >30 potency or other assays at various stages of development

# Applications of ddPCR vs qPCR



# Vector Copy Number Determination



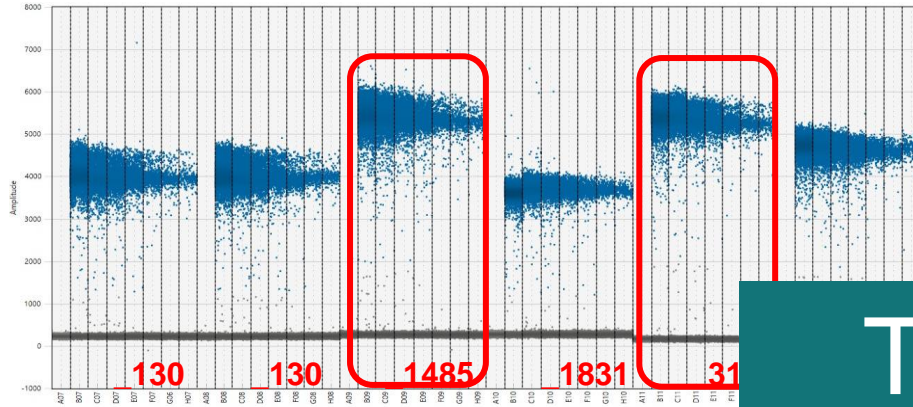
Linearized Plasmid xxx

- How many copies of plasmid in the viral vector?
- Are all active genes balanced?
- How is this determined?
- Design and optimize primer/probe sets
- Test with naked plasmid and then AAV viral vector

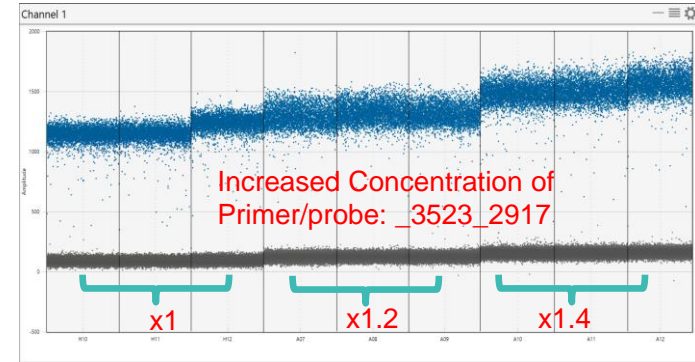


# Vector Copy Number Determination

Create primer/probe sets and screen

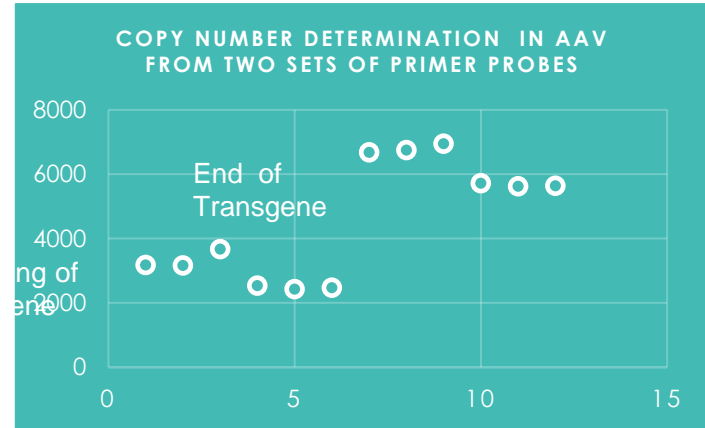
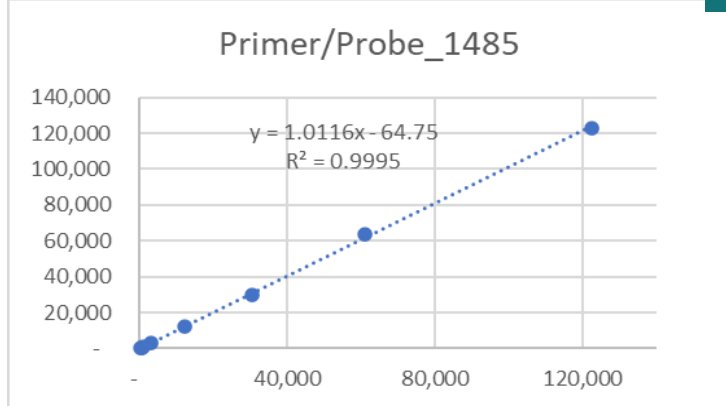


Optimize the concentration of primer/probe



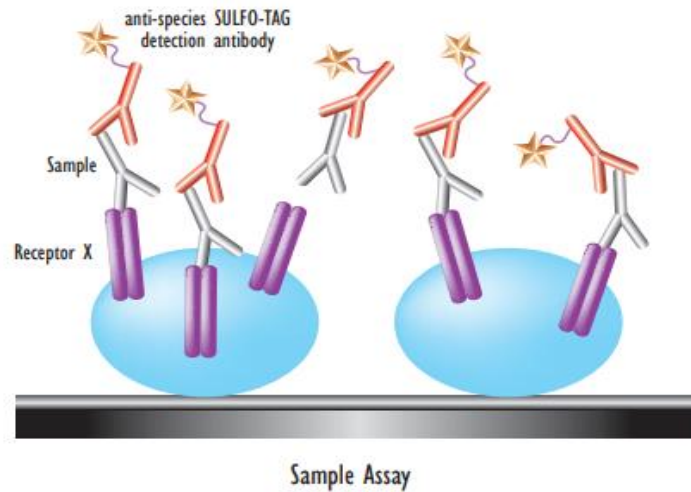
The Story Continues

Evaluate linearity of response to plasmid



# Trace Analysis and Immunoassays

# MSD (Meso Scale Discovery)



## How do we leverage MSD capabilities?

- Sensitivity
- Dynamic range
- Custom compatibilities
- Multiplex capabilities
- Off-the-shelf “Plex” panels (developed for biomarkers but useful to CMC applications)



MSD-ECL Imager 600

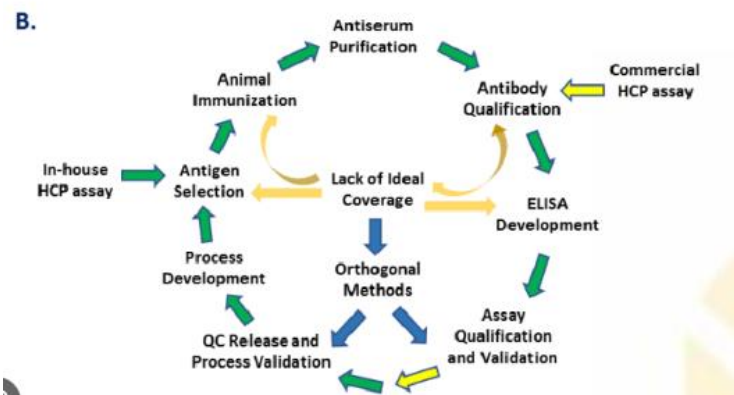
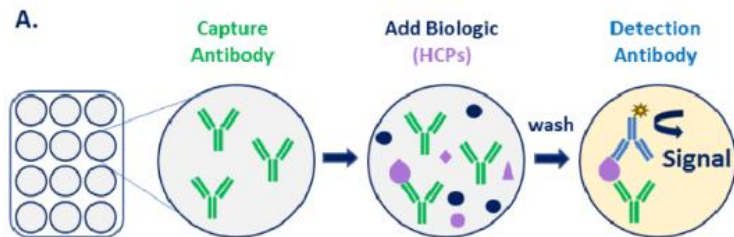


MSD SQ120 Quickplex

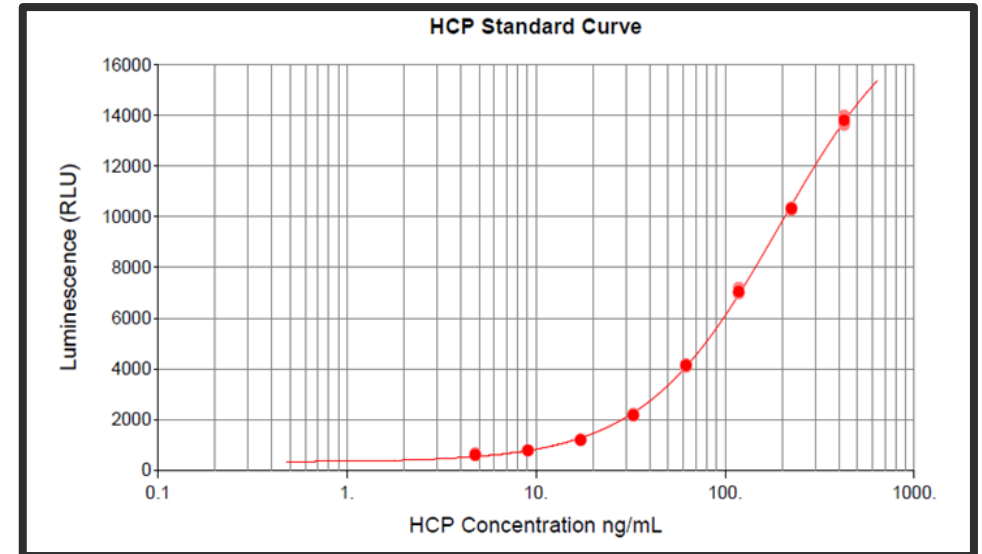
# MSD Utilization in HCP Analysis

Modality – fusion protein  
 MOA (drug) – toxin fragments are delivered to cells to inhibit protein synthesis  
 Readout – MSD ELISA measuring the amount of process related impurities (Host Cell Proteins, HCP) present in samples, measured by luminescence

## ELISA Approach to HCP Detection



Representative Data



Advantages of MSD approach:

- Broad dynamic range (perform fewer dilutions)
- High sensitivity to preserve material (low volumes available here)
- Robust method (Phase III validated)

Limitations:

- Uniquely MSD



# Summary

## Reviewed tools used in the control of ATMPs:

- Flow Cytometry
- PCR – ddPCR and qPCR
- Immunoassays by MSD

**Some are familiar tools from protein biopharmaceuticals applied to the control of ATMPs**

**Tools from other analytical disciplines (molecular) are becoming common and powerful in CMC control strategies**

**They have their strengths and opportunities**



Part 2:

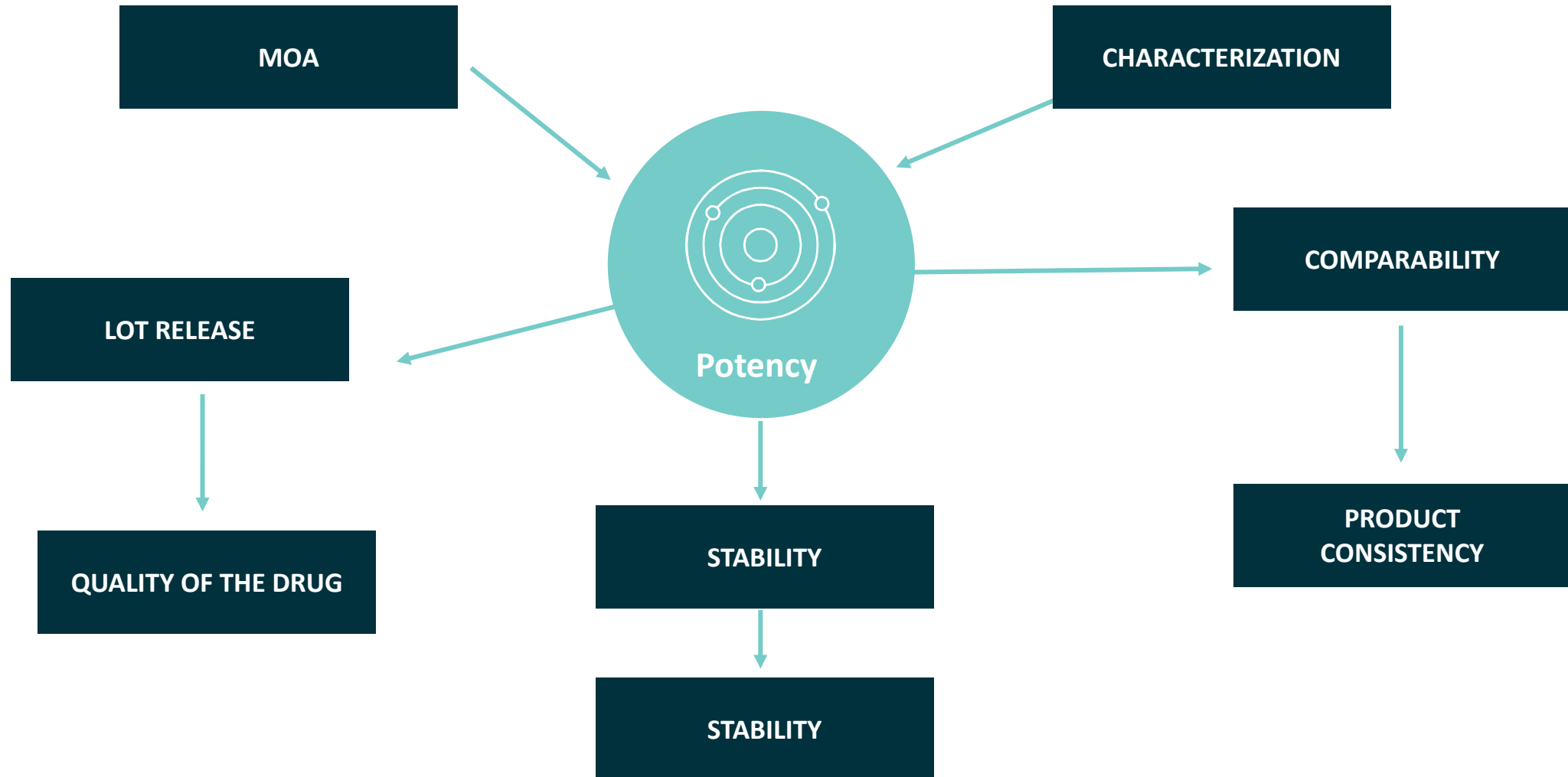
# Potency assays for ATMPs – effectiveness as part of your control strategy

# Learning Objectives

## Summary

- Understand how potency assays fit in the control strategy and regulatory expectations for gene therapies
- Review the different analytical technologies needed to assess the potency of gene therapies
- Discuss example case studies of potency assay development for gene therapies

# Potency Assays for Gene Therapy



# Potency Assay Expectations

Key takeaways from regulatory guidance

Reflective of MOAs,  
activity, and/or  
intended biological  
effect

Quantitative, and  
feasible for a QC  
laboratory

Meet pre-defined  
acceptance and/or  
rejection criteria

Demonstrate lot to lot  
consistency and  
stability

Include appropriate  
reference material,  
standards/controls

Validated for  
linearity/range,  
accuracy, precision,  
specificity, sensitivity,  
and robustness

# ATMP “Potency” Assays: Matrix Approach

## **A single assay is not achievable:**

- There are multiple therapeutic genes involved (delivered in one or more vectors).
- There are multiple pathways affected by a therapeutic gene and each pathway is **UNIQUELY** required by the MOA.

## **Monitoring multiple attributes is needed:**

- For a single therapeutic gene, if a single assay could not meet all expectations for potency test, multiple attributes of this single therapeutic gene need to be monitored (esp in early phases).

**Often phase-selective**

**Often directed by discussion with the Agency**

**Always dictated by Safety and Science**



# Potency – Matrix Approach

ASSAY	DEMONSTRATES	EXAMPLE ASSAY FORMATS
<b>Infectivity</b>	Demonstrate that there is successful delivery of the transgene to the target cells	Viral Titer, Infectious Titer, qPCR/ddPCR, Flow Cytometry
<b>Expression</b>	Demonstrate the presence of expressed genes and proteins	qPCR, ddPCR, Western Blot, ELISA, MSD, Flow Cytometry, LCMS
<b>Activity/Functional</b>	Demonstrate that the genes and/or proteins expression are functional and generate the intended response	Highly dependent on the functionality of transgene product and final readout. Enzymatic, Cytotoxicity Assay, Proliferation Assay, ELISA, Flow Cytometry

**Case Study #1**

**Oncolytic Virus - Early Phase**

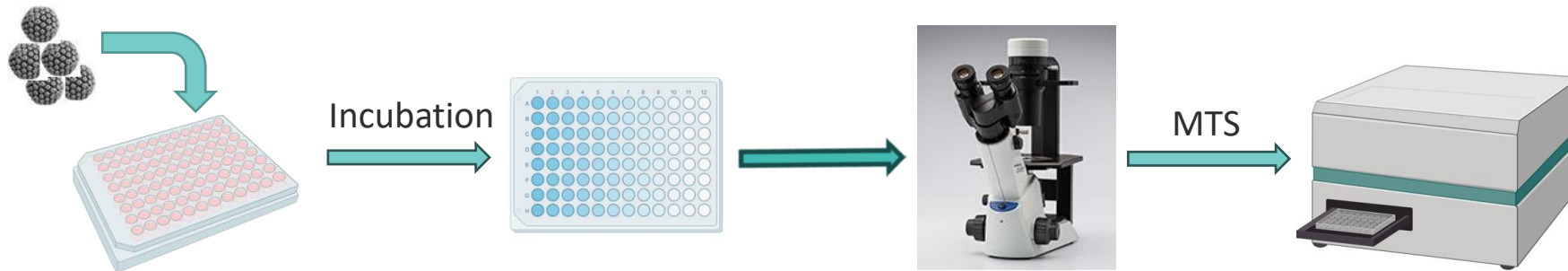
## CASE STUDY 1

# Background Information

MOA: Oncolytic Virus, lysis of cancer cells and upregulation of immune response

### Infectivity and Potency (EC50) Assay:

- Infectious Titer, TCID50 – cytopathic effects
- EC50 by cell viability - absorbance readout
- Assay development/optimization challenges:
  - Subjective
  - No quantitative control
  - High variability



## CASE STUDY 1

# Product Change

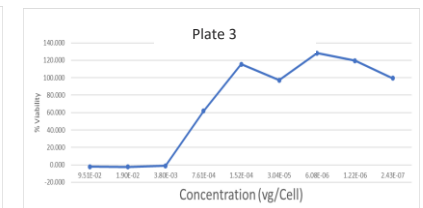
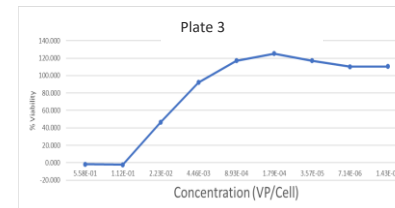
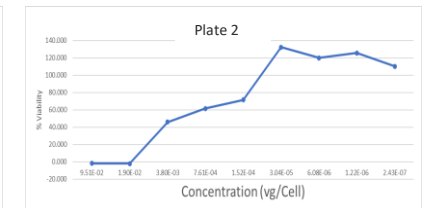
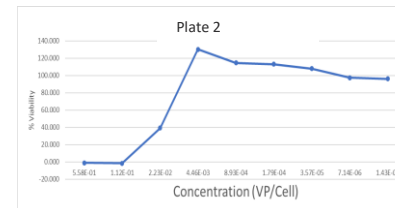
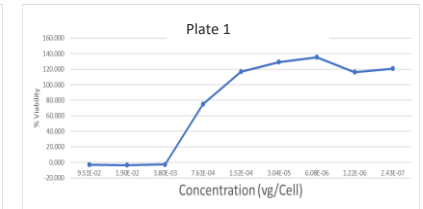
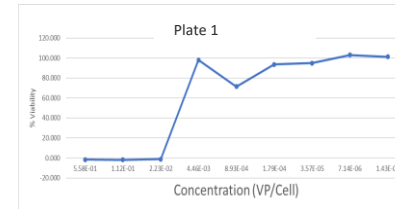
The drug product (still in preclinical/Phase I) was modified after initial method development to be at 1/30 of the effective concentration.

### Resulted in:

- Minor changes in TCID50/EC50 assay (sample prep; see results right)
- Changes to sample prep for identity/strength assay
- In addition to changes to assays there were also adjustments to acceptance criteria and preliminary specifications to be considered.

### Summary:

- Simple assays for very early (IND) phase
- High variability for most
- Adapted for formulation/product change



Before change

After change



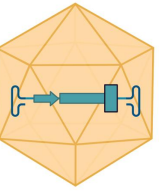
## **Case Study #2**

# **AAV - Progression into Phase II**

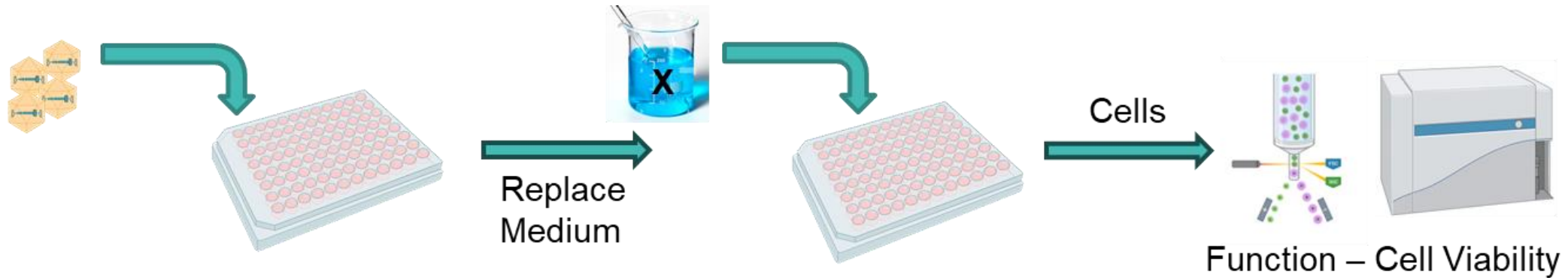


## CASE STUDY 2

# Functional Assay Using Flow Cytometry



MOA: AAV carrying one transgene. Protein Replacement Therapy.

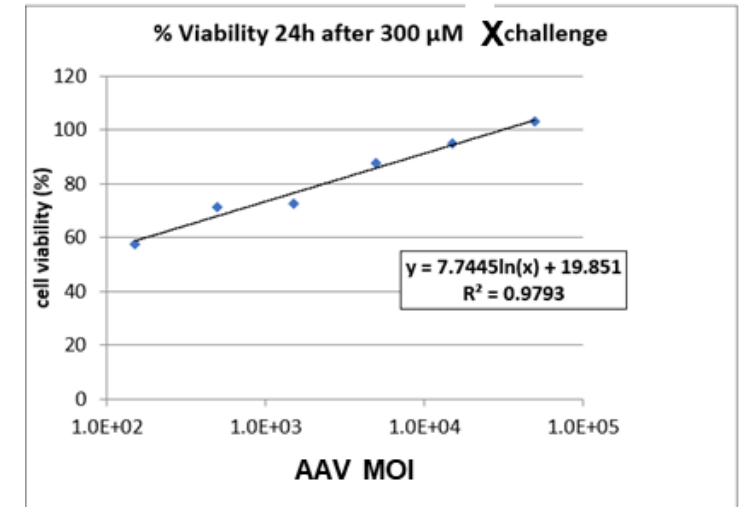
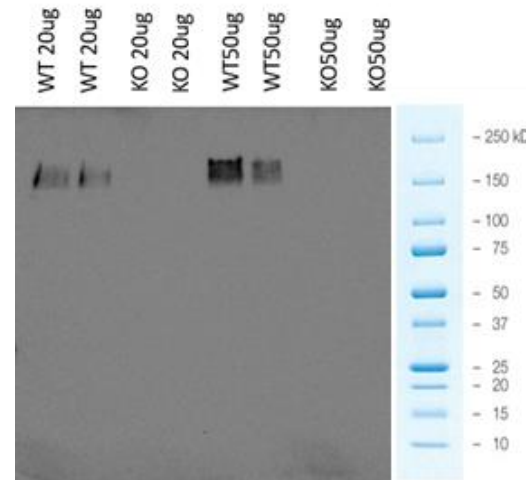


### Potency Assay Matrix:

- Expression at mRNA level (qPCR)
- Expression at protein Level (Western Blot)
- Functional Assay (Flow Cytometry)

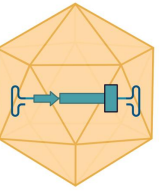
### Assay Challenges:

- KO vs WT cells
- Critical reagents

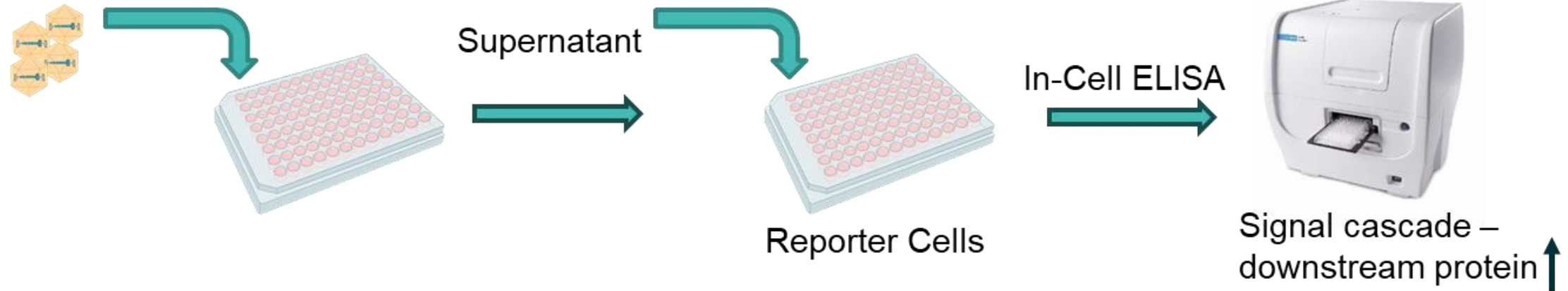


## CASE STUDY 2

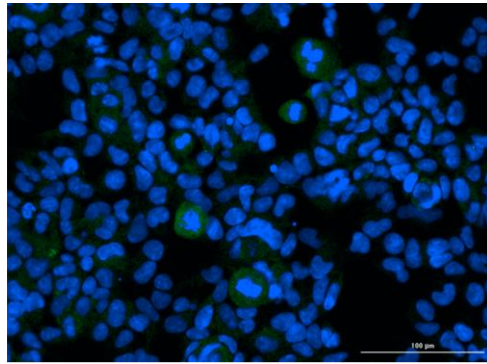
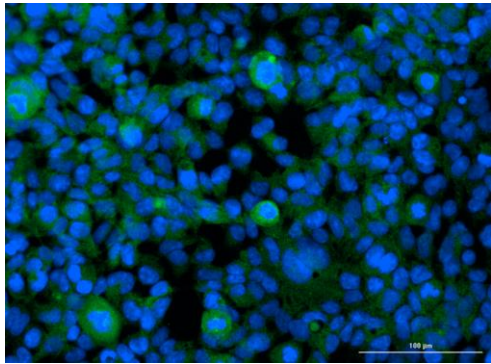
# Functional Assay Using In-Cell ELISA



MOA: AAV carrying one transgene. Protein Replacement Therapy.

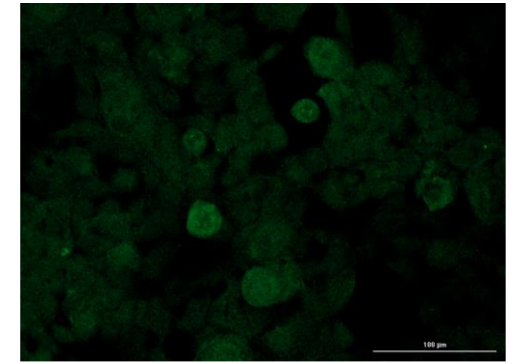
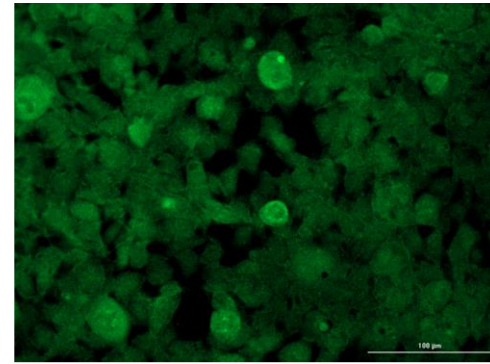


Alexa 488/Hoechst



Target Protein and Cells

Alexa 488



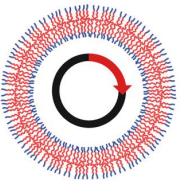
Target Protein

## **Case Study #3**

# **Nanoparticle Containing Plasmid DNA - Moving to Phase III**



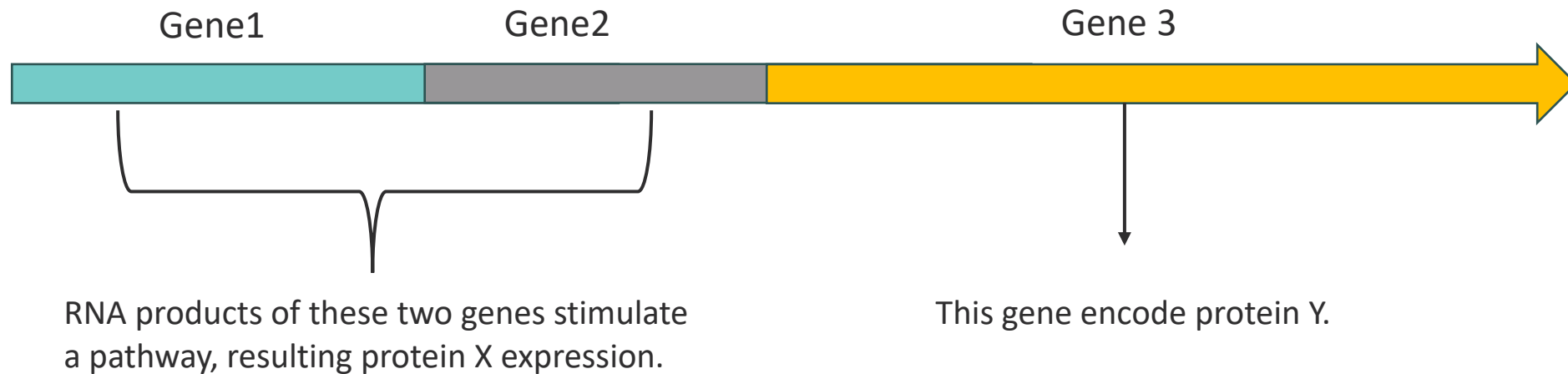
# Background Information



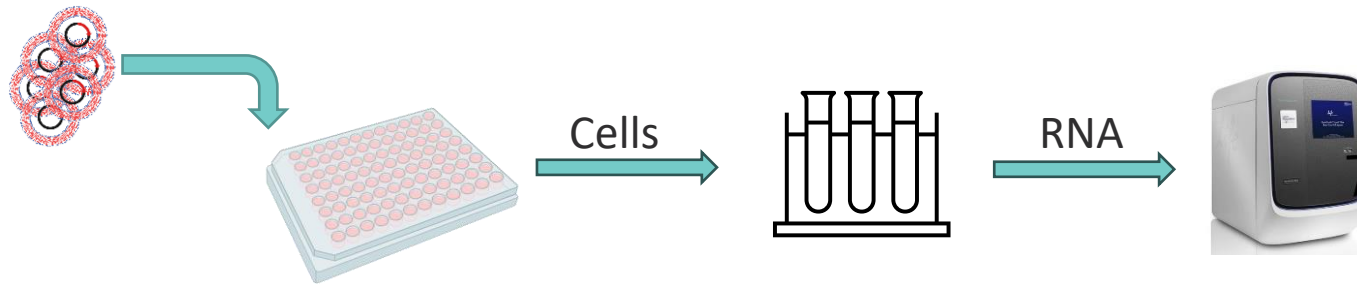
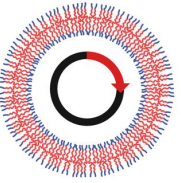
MOA:

**DS: plasmid DNA carrying three genes**

**DP: nanoparticles of a polymer excipient and DNA plasmid API, and further coated with a copolymer**



# Potency Matrix\_Phase 1



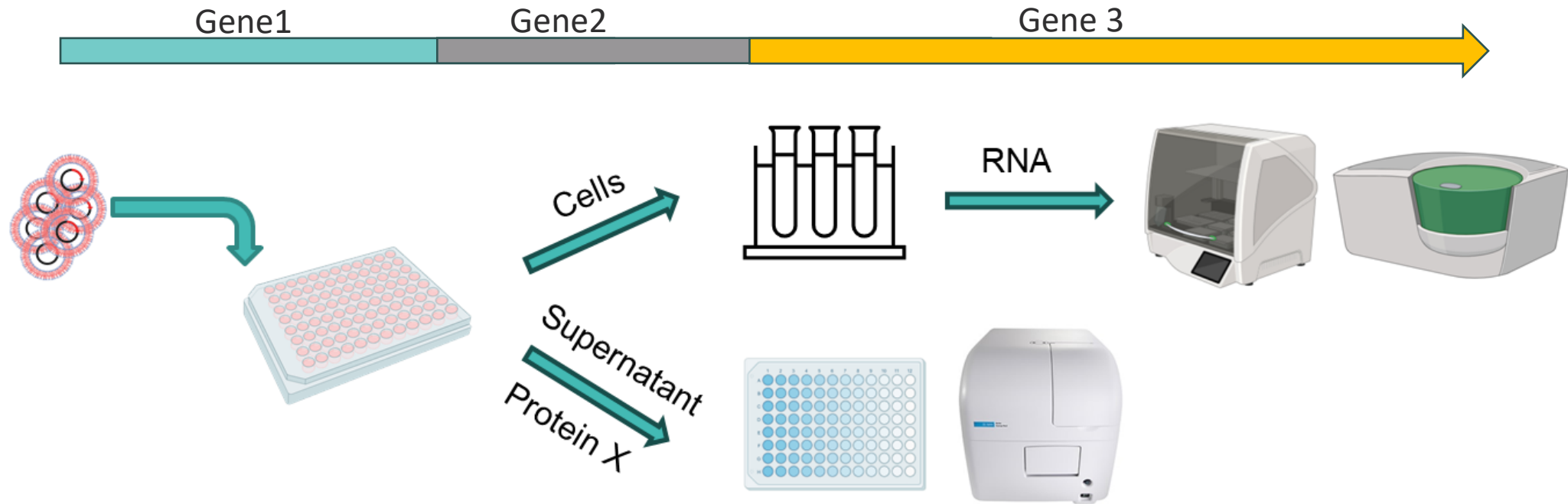
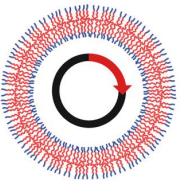
Gene 1 and 2: Expression (RT-qPCR, 2 methods)



Gene 3: Expression (MSD)



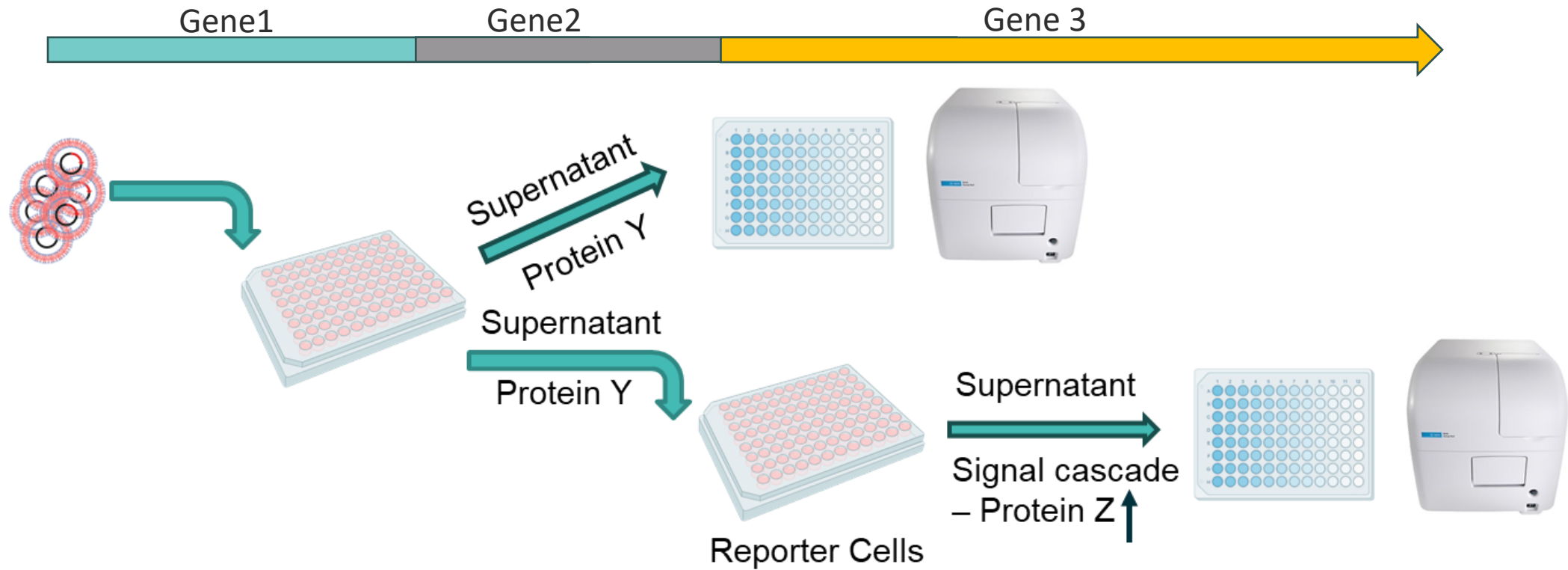
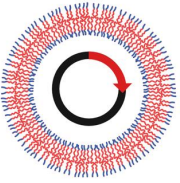
# Potency Matrix\_Phase 2



### For Gene 1 and 2:

- Expression (RT-ddPCR, duplex method, 2 reportable results)
- Functional (ELISA, for Protein X)

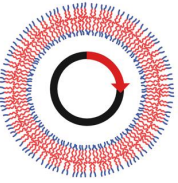
# Potency Matrix\_Phase 2



### For Gene 3:

- Expression (ELISA, for Protein Y)
- Functional (Colorimetric enzyme assay, for protein Z)

# Potency Matrix\_Phase 2



## SUMMARY:

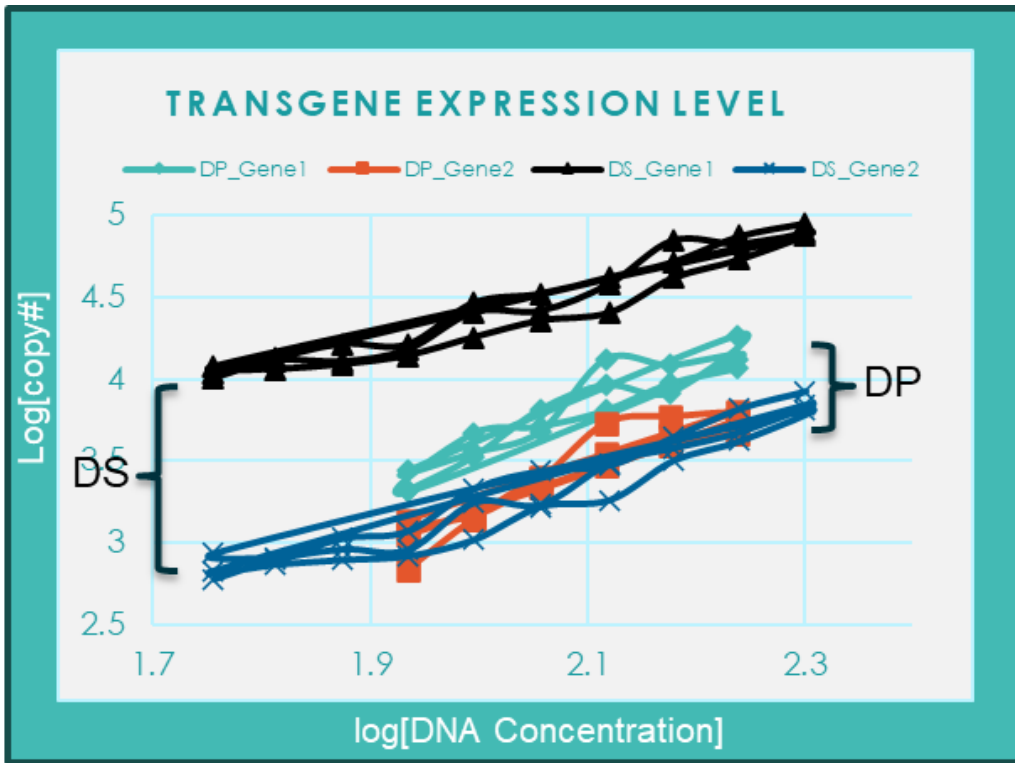
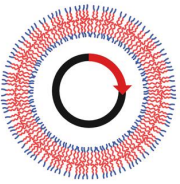
- 3 Transgenes
- 2 Expression Assays (3 results)
- 2 Functional Assays
- 3 Cell Lines
- DS transductions are different procedurally than DP transduction.

8 Assays, 10 reportable results

## Assay Challenges:

- Expression level of Gene 1 and 2 are different
- DS and DP have different behaviors (transduction)
- Variance is HIGHER with DP than DS in some assays
- Assays still require evolution including adaptation to final product and to reduce variance

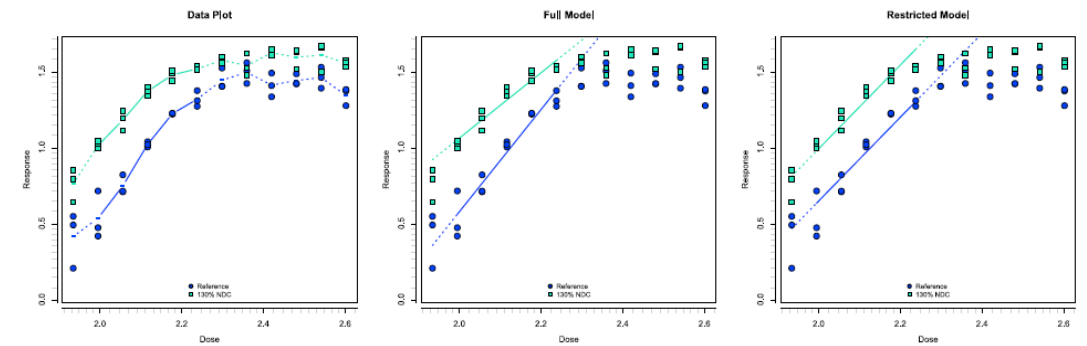
# Potency Matrix\_Phase 2



### Potency estimation

Relative potency	130% NDC	Reference
Potency ratio	1.33220	
95% Confidence interval	1.27144 - 1.40414	
Relative confidence interval	95.44% - 105.40% (9.96%)	
<b>EC 50</b>		
Estimated EC50 value	115.03345	129.51310

### Graphics



## **Case Study #4**

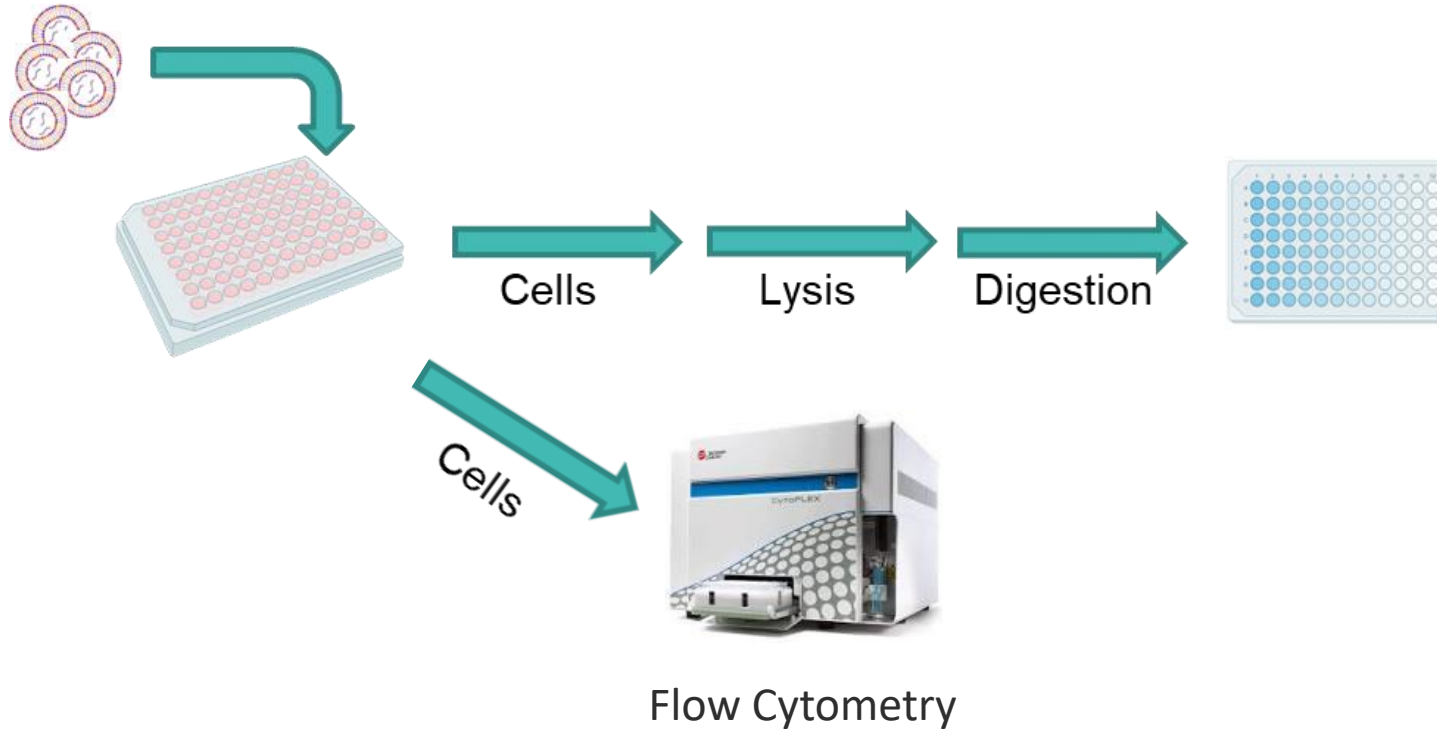
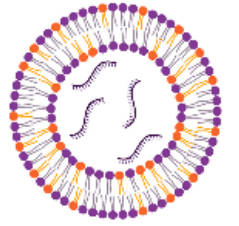
# **mRNA in LNP\_Early Phase Screening**



## CASE STUDY 4

# Vaccine Development

MOA: mRNA in Lipid Nanoparticles

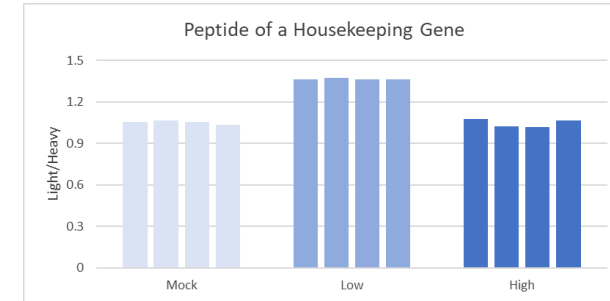
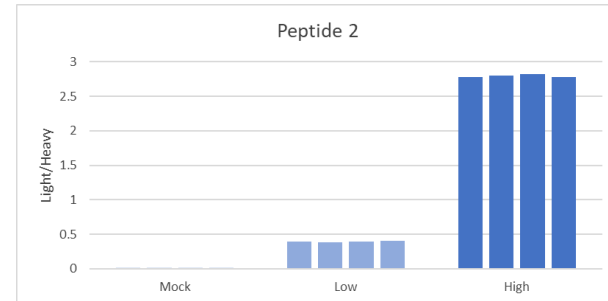
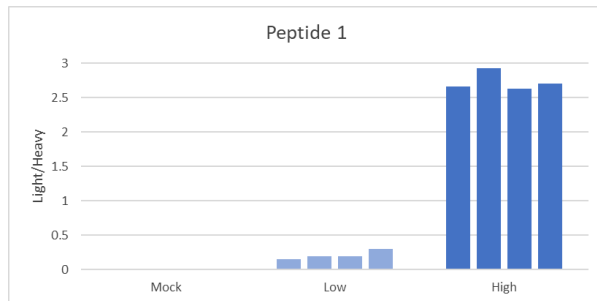
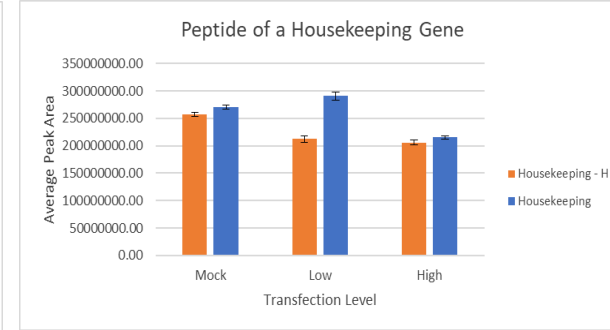
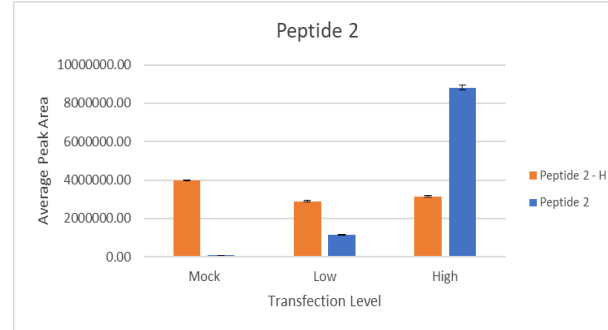
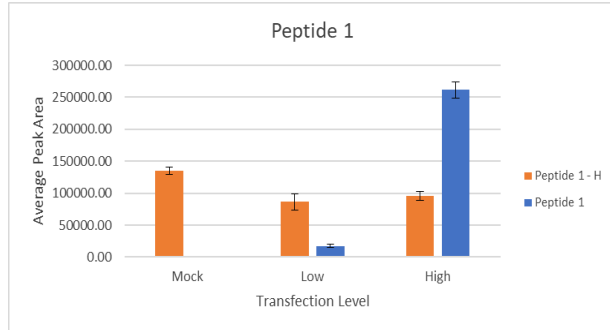
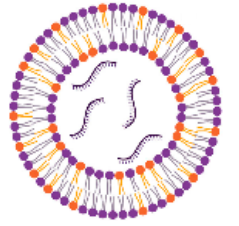


Detect expressed protein(s) by targeted LC-HRMS as their peptide surrogates

## CASE STUDY 4

# Pilot Study Results

MOA: mRNA in Lipid Nanoparticles



# Conclusions

Highlights and recommendations for gene therapy potency assay

Get started early  
and explore  
options

Leverage  
guidance  
documents and  
time with  
regulators

Select analytical  
technologies  
based on MOA

Matrix approach  
offers solutions  
but also  
challenges

Take phase  
appropriate  
approach

Changes will  
happen and  
assays must  
evolve

# Acknowledgements

- BioAgilytix CMC Bioanalytical Team
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- Neal Englert, PhD, Scientist
- Reema Davis, PhD, Manager
- Pam Prihoda, Scientist
- Lynn Kamen, PhD, Scientific Officer

**Questions?**



# Thank You!

**Jeff Patrick, PhD**

Sr Director Operations – CMC Bioanalytical, BioAgilytix

**Shiqian Zhu, PhD**

Director Operations – CMC Bioanalytical, BioAgilytix

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