

## **Declaration of Conflict of Interest**

As the Director of CAPKR (Centre for Applied Pharmacokinetics Research my research is sponsored by a group of pharmaceutical companies (currently AbbVie, Amgen, Eli Lily, EMD Serono, Genentech, GSK, J&J, Servier, Takeda) in addition to grants from non-for-profit organizations, governments and research councils.

As the Chief Scientific Officer and SVP of R&D at Certara, I have been involved in overseeing the development of software tools which are used by a large group of pharmaceutical companies during drug discovery and development; particularly in the area of physiologically-based pharmacokinetics (PBPK) and quantitative systems pharmacology (QSP).



## **Disclaimer**

This presentation is prepared in my <u>personal capacity</u> as a scientist engaged with clinical pharmacology and pharmaceutical science for over 30 years. The opinions expressed herein are my own and do not reflect the views, policies, and strategies of any of the organisations I am affiliated with.

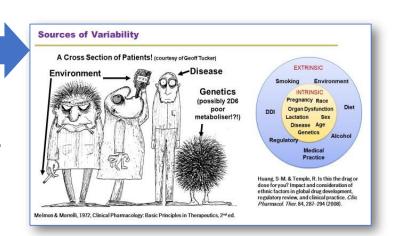
## Reality of Special Populations in Clinic

100 Years Old Problem

Known within Modern Medicine.

Sir William Osler (1849-1919)

Professor of Medicine Oxford, England





*"Variability is the law of life*, and as no two faces are the same, so no two bodies are alike, and no individuals react alike and behave alike under the abnormal conditions which we know as disease"

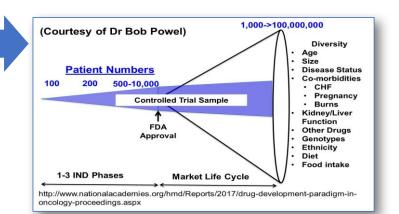
3

### Issues with Current Drug Development

- Regulators,
- Professional Associations, and
- Patient Advocacy Groups

### Are asking for more diversity in the clinical drug trials.

Diversity Plans to Improve Enrollment of Participants from Underrepresented Racial and Ethnic Populations in Clinical Trials Guidance for Industry



### **FDA Guidance for Industry**

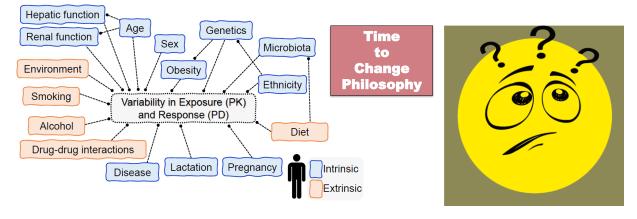
Center for Drug Evaluation and Research (CDER) Center for Biologics Evaluation and Research (CBER)

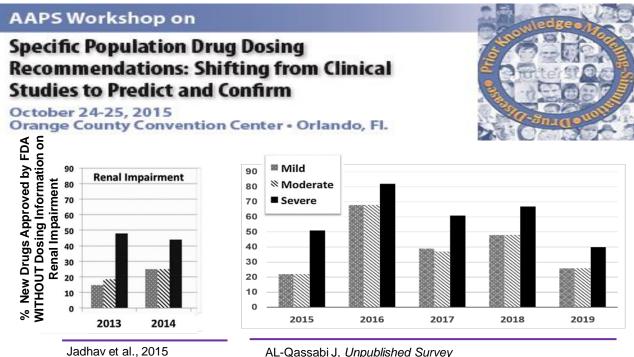
> Clinical/Medical November 2020 April 2022

**Book Chapter:** 

A Rostami-Hodjegan and B Achour, in "Advances in Pharmacokinetics and Pharmacodynamics" by P Macheras, Springer 2023

## **On the Verge of Impossibility: Caring for All Permutations of Comorbidities Influencing the Fate of Drugs**





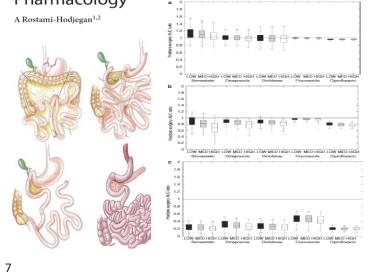
AL-Qassabi J, Unpublished Survey

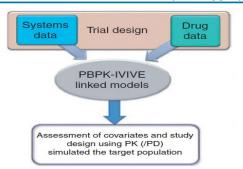
## STATE OF THE ART

Clin Pharm Ther 2012 - 92 (1): 50-61

nature publishing group

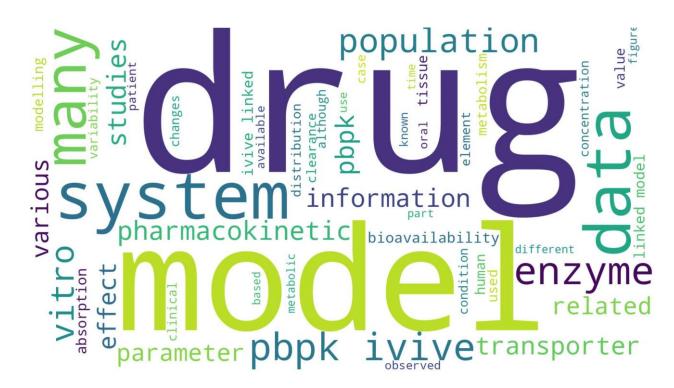
#### Physiologically Based Pharmacokinetics Joined With *In Vitro–In Vivo* Extrapolation of ADME: A Marriage Under the Arch of Systems Pharmacology

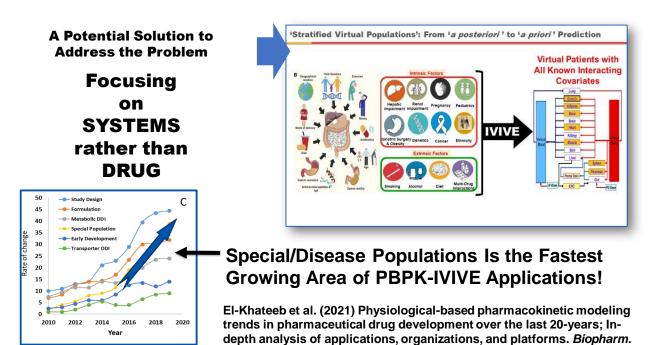




Simulated postsurgical/presurgical AUC ratio over <u>a</u> <u>range of selected drugs</u> at LOW, MED, and HIGH therapeutic doses: Simvastatin Immediate Release (IR), Omeprazole Enteric Coated (EC), Diclofenac EC, Fluconazole IR, and Ciprofloxacin IR for :

- (a) Roux-en-Y gastric bypass surgery (RY)
- (b) Biliopancreatic Diversion with Duodenal Switch (BDDS)
- (c) Jejunoileal Bypass (JI-B)





Drug Dispos. 42:107-117.

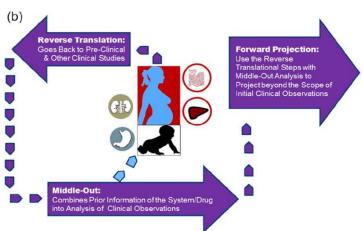
9



Clin Pharm Ther 2018 - 103 (2): 224-232

Reverse Translation in PBPK and QSP: Going Backwards in Order to Go Forward With Confidence

Amin Rostami-Hodjegan<sup>1,2</sup>

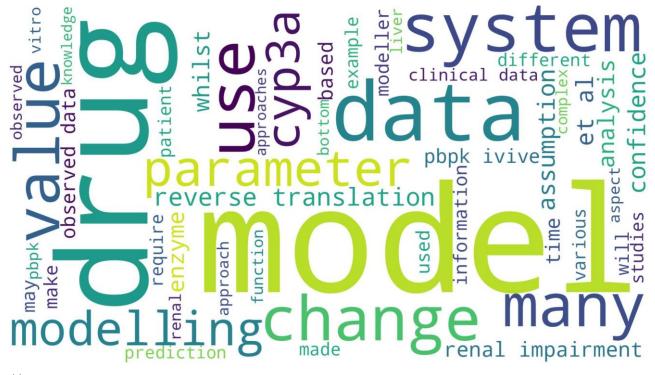


Combining the 'bottom up' and 'top down' approaches in pharmacokinetic modelling: fitting PBPK models to observed clinical data

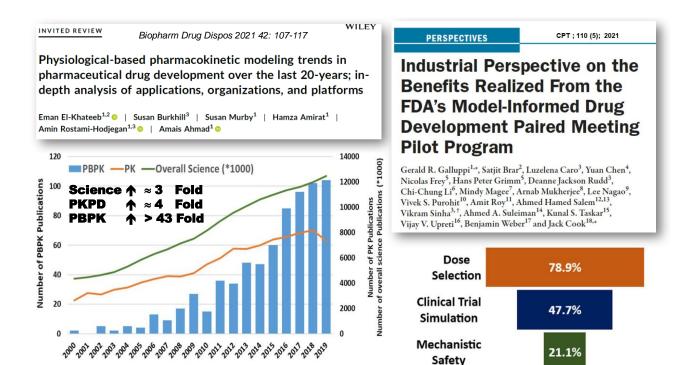
Nikolaos Tsamandouras,' Amin Rostami-Hodjegan'<sup>1,2</sup> & Leon Aarons

Br J Clin Pharmacol 2014 -79 (1): 48-55

Clarifying Common Philosophical Misconceptions



11



Year



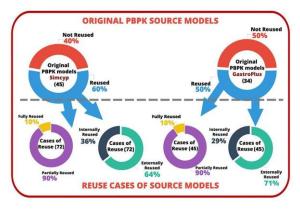
Biopharm Drug Dispos 2023 – UNDER REVIEW

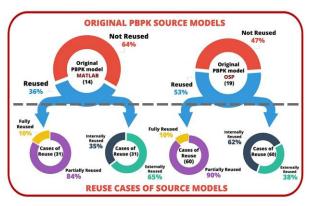
In-Depth Analysis of Patterns in Selection of Different Physiologically-Based Pharmacokinetic Modeling Tools:

## Another Philosophical Change

Part I - Applications and Rationale Behind the Use of Open Source-Code Software

#### Part II - Assessment of Model Reusability and Comparison Between Open and Non-Open Source-Code Software





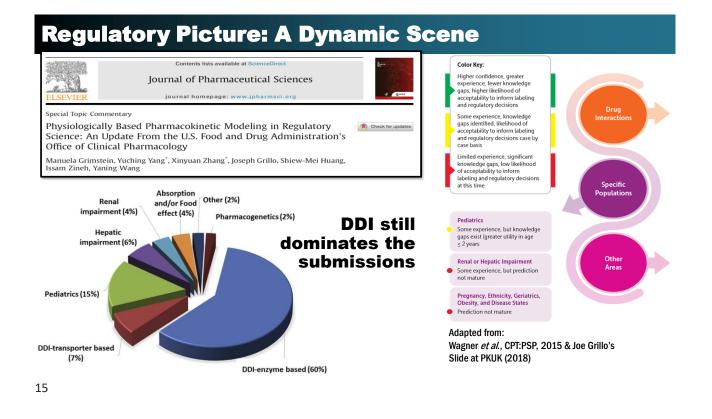
13

## **Reusability Concept for Models**

A computational model is considered **entirely reusable** if it may be **utilised** as a simulation component **within other mathematical models**, with its physical scope being the sole constraint

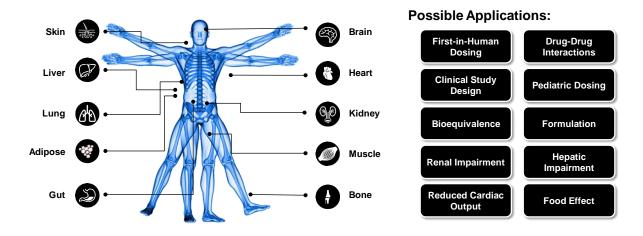
Rodrigues Matos T, *et al.* (2013) On a reusable and multilevel methodology for modeling and simulation of pharmacokinetic-physiological systems: a preliminary study. *Comput Biol Med.* 43(10):1512-22.

Term	Definition
Reusability	The reutilisation of (I) the model in its entirety, (II) the systems components, (III) the drug- dependent components, (IV) the modelling strategy, or (V) Leveraging the aforementioned
Partial Reusability	(II), (III), (IV) or (V) above
Full Reusability	(I) above
External Reusability	Reusability by researchers outside the organisations affiliated to original model development
Internal Reusability	Reusability of involving researchers from the same institution involved in the development of original model



# Virtual Patients to Conduct In Silico Trials

### Biosimulation to predict how the attributes of body affect the drug fate in each population:



### Reusability for 25 Virtual Patient Populations & >100 Compound Files

# Areas of Significant Impact: PBPK-IVIVE Approach

**Clinical Trial Waivers** 





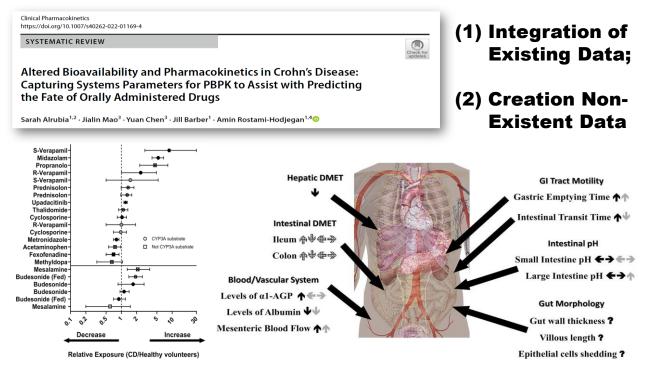
**Extrapolation to Special Populations** 

**Reduction in Study Patients** 



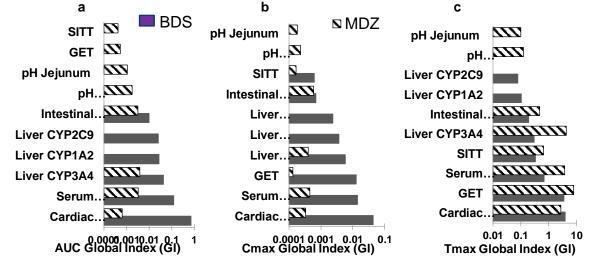






### Model Verification/Credibility Requires Multiple Drugs & Formulations





19

## What Does Validation Mean in This Context? e.g. DDI & RI

Effect of ketoconazole on the pharmacokinetics and safety of telithromycin and clarithromycin in older subjects with renal impairment Renal Impairment (Clinical Study)

J. Shi<sup>1</sup>, S. Chapel<sup>1</sup>, G. Montay<sup>2</sup>, P. Hardy<sup>2</sup>, J.S. Barrett<sup>1</sup>, D. Sica<sup>3</sup>, S.K. Swan<sup>4</sup>, R. Noveck<sup>5</sup>, B. Leroy<sup>1</sup> and V.O. Bhargava<sup>1</sup>

INT J CLIN PHARM THER 2005

Predicting Drug Interaction Potential With a Physiologically Based Pharmacokinetic Model: A Case Study of Telithromycin, a Time-Dependent CYP3A Inhibitor

MdLT Vieira<sup>1,2</sup>, P Zhao<sup>1</sup>, EG Berglund<sup>3,4</sup>, KS Reynolds<sup>1</sup>, L Zhang<sup>1</sup>, LJ Lesko<sup>1</sup> and S-M Huang<sup>1</sup>

Biopharm Drug Dispos 2012

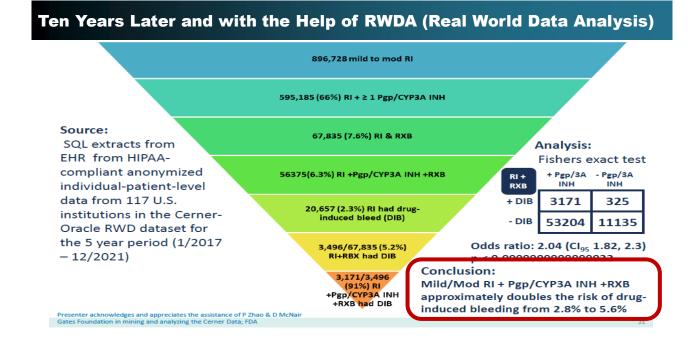
**Renal Impairment** 

(IVIVE/PBPK)

Utility of a physiologically–based pharmacokinetic (PBPK) modeling approach to quantitatively predict a complex drug– drug–disease interaction scenario for rivaroxaban during the drug review process: implications for clinical practice



Joseph A. Grillo<sup>a</sup>, Ping Zhao<sup>a,s</sup>, Julie Bullock<sup>a</sup>, Brian P. Booth<sup>a</sup>, Min Lu<sup>b</sup>, Kathy Robie-Suh<sup>b</sup>, Eva Gil Berglund<sup>c</sup>, K. Sandy Pang<sup>d</sup>, Atiqur Rahman<sup>a</sup>, Lei Zhang<sup>a</sup>, Lawrence J. Lesko<sup>a</sup>, and Shiew-Mei Huang<sup>a</sup>

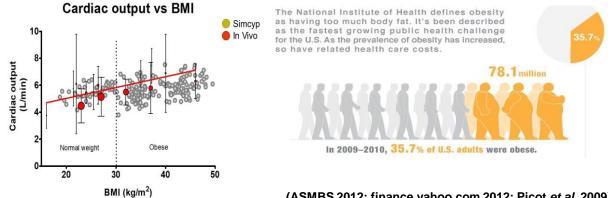


21

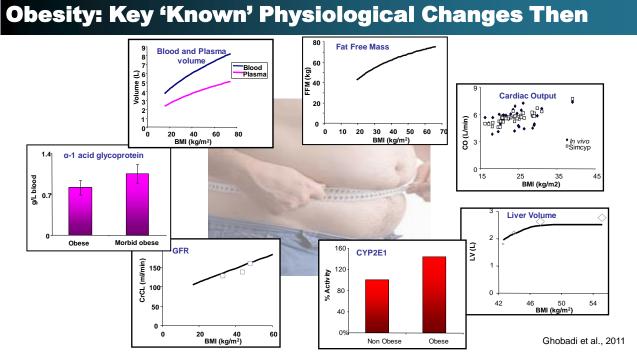
### Application of a Systems Approach to the Bottom-Up Assessment of Pharmacokinetics in Obese Patients Expected Variations in Clearance

#### Clin Pharmacokinet 2011; 50 (12): 809-822

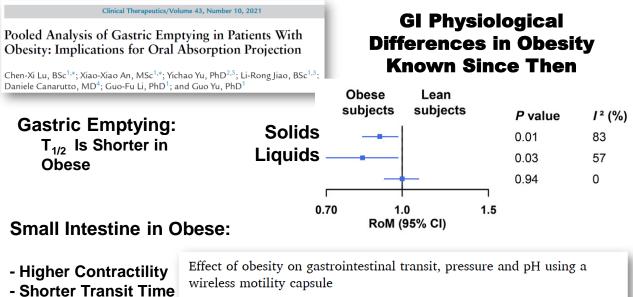
Cyrus Ghobadi,<sup>1</sup> Trevor N. Johnson,<sup>1</sup> Mohsen Aarabi,<sup>1</sup> Lisa M. Almond,<sup>1</sup> Aurel Constant Allabi,<sup>1</sup> Karen Rowland-Yeo,<sup>1</sup> Masoud Jamei<sup>1</sup> and Amin Rostami-Hodjegan<sup>1,2</sup>



(ASMBS 2012; finance.yahoo.com 2012; Picot et al. 2009)



#### 23



- Lower Median pH

N. Steenackers<sup>a</sup>, L. Wauters<sup>b</sup>, B. Van der Schueren<sup>a,c</sup>, P. Augustijns<sup>d</sup>, G. Falony<sup>e,f</sup>,

M. Koziolek<sup>g</sup>, M. Lannoo<sup>h</sup>, A. Mertens<sup>a, c</sup>, A. Meulemans<sup>a, c</sup>, J. Raes<sup>e, f</sup>, R. Vangoitsenhoven<sup>a, c</sup>, S. Vieira-Silva<sup>e, f</sup>, W. Weitschies<sup>g</sup>, C. Matthys<sup>a, c,\*</sup>, T. Vanuytsel<sup>b, i,\*, 1</sup>

## **Trends: Bariatric Surgery**

#### **Research** Paper A mechanistic pharmacokinetic model to assess modified oral drug bioavailability post bariatric surgery in morbidly obese patients: interplay between CYP3A gut wall metabolism, permeability and dissolution Adam S. Darwich<sup>a</sup>, Devendra Pade<sup>c</sup>, Basil J. Ammori<sup>b,d</sup>, Masoud Jamei<sup>c</sup>, Darren M. Ashcroft<sup>a</sup> and

Amin Rostami-Hodjegan<sup>a,</sup>

#### ORIGINAL ARTICLE

#### Citation: CPT: Pharmacometrics & Systems Pharmacology (2013) 2, e47; doi:10.1038/psp.2013.23 © 2013 ASCPT All rights reserved 2163-8306/12 Evaluation of an In Silico PBPK Post-Bariatric Surgery Model through Simulating Oral Drug Bioavailability of Atorvastatin and Cyclosporine

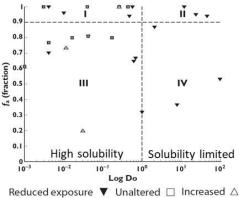
AS Darwich<sup>1</sup>, D Pade<sup>2</sup>, K Rowland-Yeo<sup>2</sup>, M Jamei<sup>2</sup>, A Åsberg<sup>3</sup>, H Christensen<sup>3</sup>, DM Ashcroft<sup>1</sup> and A Rostami-Hodjegan<sup>1,2</sup> BICP British Journal of Clinica

Trends in oral drug bioavailability following bariatric surgery: examining the variable extent of impact on exposure of different drug classes

BARIATRIC SURGICAL PRACTICE AND PATIENT CARE Volume 9, Number 2, 2014

Can We Rationalize Oral Drug Exposure Following Bariatric Surgery to Meet the Pharmacotherapeutic Needs of a Growing Patient Population? Commentary on: "Lithium Toxicity Following Roux-en-Y Gastric Bypass"

am S. Darwich, MPharm, MSc, PhD,<sup>1</sup> and Amin Rostami-Hodjegan, PharmD, PhD, FCP<sup>1,2</sup>

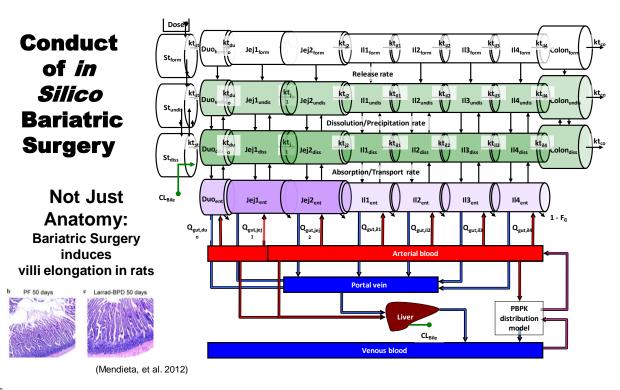


have bariatric surgery

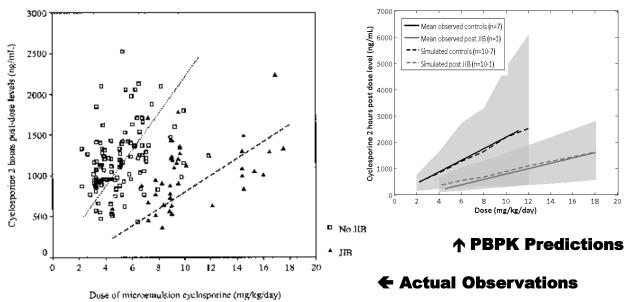
FROM: NEWS LIMITED NETWO SEPTEMBER 19, 2013 4:26PM



25



## Exposure/Dose Ratio 🕹 after JI-Bypass: Cyclosporine



(Chenhsu et al 2006)

A

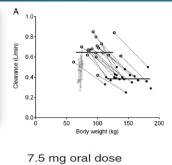
5 mg intravenous dose

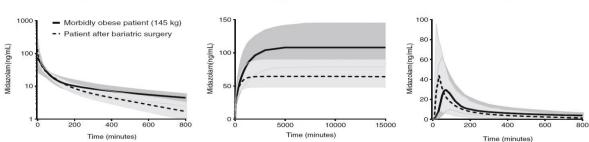
## Predicted ↑ AUC for MDZ but ... De-Supression of CL Post-Surgery?

### The Pharmacokinetics of the CYP3A Substrate Midazolam in Morbidly Obese Patients Before and One Year After Bariatric Surgery

Margreke J. Brill <sup>1,2</sup> • Anne van Rongen <sup>1,2</sup> • Eric P. van Dongen<sup>3</sup> • Bert van Ramshorst<sup>4</sup> • Eric J. Hazebroek<sup>4</sup> • Adam S. Darwich<sup>5</sup> • Amin Rostarni-Hodjegan<sup>5</sup> • Catherijne A. Knibbe<sup>1,2</sup>

В





2.5 mg/h continuous infusion

C

<sup>27</sup> 

#### LETTER TO THE EDITOR

Author's Reply to Reith: "Higher Midazolam Clearance in Obese Adolescents Compared with Morbidly Obese Adults"

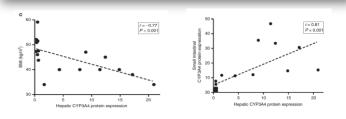
Anne van Rongen<sup>1</sup> · Johannes N. van den Anker<sup>2,3,4</sup> · Catherijne A. J. Knibbe<sup>5,6</sup>

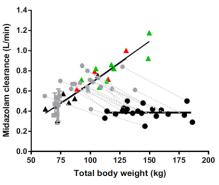
Suppression of CYP3Aactivity as a Result of Prolonged Inflammation and Prolonged Obesity in Adults (as opposed to Adolescents)

2018

Impact of OATP1B1, MDR1, and CYP3A4 2013 Expression in Liver and Intestine on Interpatient Pharmacokinetic Variability of Atorvastatin in **Obese Subjects** 

M Ulvestad<sup>1,2</sup>, IB Skottheim<sup>1</sup>, GS Jakobsen<sup>3</sup>, S Bremer<sup>4</sup>, E Molden<sup>1</sup>, A Åsberg<sup>1</sup>, J Hjelmesæth<sup>3</sup>, TB Andersson<sup>2</sup>, R Sandbu<sup>3</sup> and H Christensen<sup>1</sup>





Estimates MDZ CL of 19 Obese Adolescents (red triangles represent orthopedic surgery patients, green triangles represent bariatric/laparoscopic surgery patients, black triangles represent other patients, i.e. tonsillectomy) vs BW. CL MDZ CL are reported for 20 morbidly obese patients (black dots) and 18 of these 1 year after bariatric surgery (grey dots, with dotted lines for corresponding values and healthy volunteer studies (grey squares). Black lines represent population mean estimates.

10

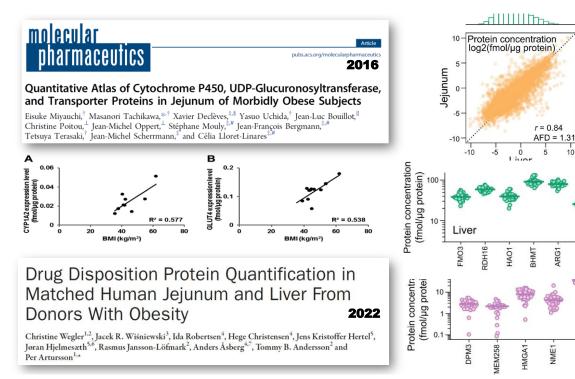
SLC27A5

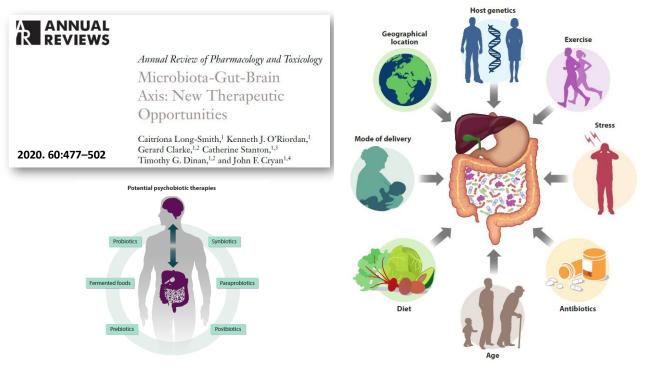
CLCA1

Jejunum

ŝ



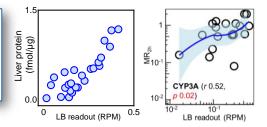




### 'Liquid Biopsy' for ADME: Abundance & Activity

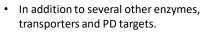
Liquid Biopsy Enables Quantification of the Abundance and Interindividual Variability of Hepatic Enzymes and Transporters

Brahim Achour<sup>1,\*</sup>, Zubida M. Al-Majdoub<sup>1</sup>, Agnieszka Grybos-Gajniak<sup>2</sup>, Kristi Lea<sup>3</sup>, Peter Kilford<sup>4</sup>, Mian Zhang<sup>4</sup>, David Knight<sup>5</sup>, Jill Barber<sup>1</sup>, Jeoffrey Schageman<sup>3</sup> and Amin Rostami-Hodjegan<sup>1,6</sup>



Liquid Biopsy for Patient Characterization in Cardiovascular Disease: Verification against Markers of Cytochrome P450 and P-Glycoprotein Activities

Brahim Achour<sup>1,9,\*</sup>,† <sup>(10)</sup>, Pauline Gosselin<sup>2,3,4</sup>, Jean Terrier<sup>2,3,4</sup>, Yvonne Gloor<sup>4</sup>, Zubida M. Al-Majdoub<sup>1</sup>, Thomas M. Polasek<sup>5,6,7</sup> <sup>(10)</sup>, Youssef Daali<sup>3,4,8</sup>, Amin Rostami-Hodjegan<sup>1,5,4</sup> <sup>(2)</sup> and Jean-Luc Reny<sup>2,3,4</sup>



MR = metabolic ratio; LB = liquid biopsy; RPM = reads per million

### Liquid Biopsy: Quantitative Grade for Virtual Twins

Liquid Biopsy Enables Quantification of the Abundance and Interindividual Variability of Hepatic Enzymes and Transporters

Brahim Achour<sup>1,</sup>\*, Zubida M. Al-Majdoub<sup>1</sup>, Agnieszka Grybos-Gajniak<sup>2</sup>, Kristi Lea<sup>3</sup>, Peter Kilford<sup>1</sup>, Mian Zhang<sup>4</sup>, David Knight<sup>5</sup>, Jill Barber<sup>1</sup>, Jeoffrey Schageman<sup>3</sup> and Amin Rostami-Hodjegan<sup>1,6</sup>

Traditional cancer

diagnostic tests

No

Yes

Is the disease marker expressed?

Ability of a<sup>3</sup>, Peter Kilford<sup>4</sup>, hi-Hodjegan<sup>1,6</sup> Filt (dose) prediction Proposed liquid

biopsy use

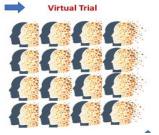
High expression

Low expression

Ū

Medium expression

Virtual Patient



**'Liquid Biopsy'** 

A Game Changer for Handling Variability

33

### Going Forward: PD Variability using Liquid Biopsy

**PK Variability** 

versus

**PD** Variability

- Can we address PD variability using liquid biopsy?
- 362 PD targets in plasma (23 as protein in liver), enzymes/receptors involved in inflammation, cancer, immune response and cirrhosis
- Established correlations for several PD targets: biomarkers of change in response to drugs & disease progression

The Link Between Pharmacodynamics and Physiologically Based Pharmacokinetic Models

V Perera<sup>1</sup>, MA Elmeliegy<sup>1</sup>, G Rao<sup>1</sup> and A Forrest<sup>1</sup>

Response to "The Link Between Pharmacodynamics and Physiologically Based Pharmacokinetic Models"

A Rostami-Hodjegan<sup>1,2</sup>

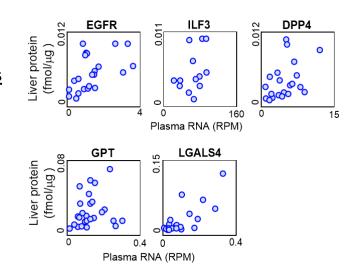
CLINICAL PHARMACOLOGY & THERAPEUTICS | VOLUME 93 NUMBER 2 | FEBRUARY 2013

## **Correlations with Tissue Expression**

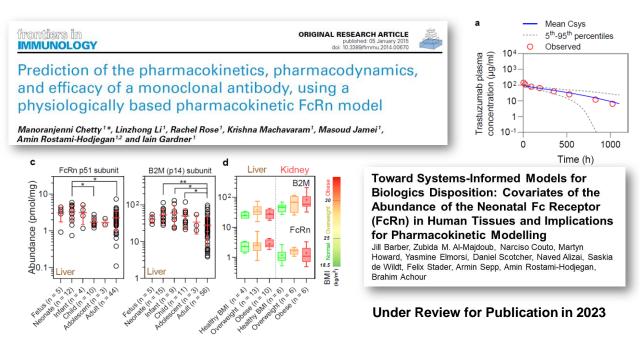
## **PD/Disease Targets**

□362 PD targets in plasma:

- <u>81 FDA-approved drug targets</u>
- 202 with established link with disease
- Examples: EGFR (drug target of anti-cancer TKIs and mABs); DPP4 (target of the antidiabetics gliptins); GPT (marker of liver function); LGALS4 (cancer prognosis marker)



35



Hepatic & Renal FcRn Expression in Overweight/Obese Donors > Donors with Normal BMI

# **Conclusion:**

Systems Approach Can Help with (a priori) Dose Adjustment in Obesity.

O.

.0

 However, Systems Data Are Required to Build Robust
Population Models and Apply to Large Sets of Verification Cases.

# **Thanks for Listening**

# **Questions?**