

# Pharmacology/Toxicology in the Investigator Brochure

Brenda J. Gehrke, Ph.D. Office of New Drugs/CDER/FDA

FDA Clinical Investigator Training Course November 14, 2018

## **Abbreviations**



- **ADME**: Absorption, distribution, metabolism, excretion
- **IB**: Investigator Brochure
- ICH: International Council for Harmonisation
- IGFR: Insulin-like growth factor receptor
- IND: Investigational New Drug application
- **MOA**: Mechanism of action
- **mTOR**: Mammalian target of rapamycin
- **PNH**: Paroxysmal nocturnal hemoglobinuria

## **Objectives**



- An overview of Pharmacology/Toxicology (nonclinical) information
  - Pharmacology
  - Safety Pharmacology
  - Toxicology
    - General toxicology
    - Genetic toxicology
    - Other toxicology studies: Reproductive toxicity
- Examples of toxicity data

Nonclinical information included in the Investigator Brochure (IB)

- Pharmacology
- Safety Pharmacology
- Toxicology
  - General toxicology
  - Genetic toxicology
  - Other toxicology studies
- Pharmacokinetics

FDA



## Pharmacology

# FDA

## Pharmacology

- Used to define intended and unintended targets/ effects
- Amount of information varies
  - Type of molecule (e.g. small molecule vs biologic)
  - Stage of drug development
  - Indication



# How much attention to pay to the pharmacology?

- Drug not the first in class? Better idea of toxicities
- For biologics (e.g. an antibody): Which species best predicts toxicities in humans?
- Can explain some toxicities seen in animals: Exaggerated pharmacologic effects



## **Safety Pharmacology**



## **Safety Pharmacology**

- Cardiovascular
  - In vitro
  - In animals (dogs or monkeys)
- CNS (usually rodents)
- Respiratory (usually rodents)



### **General Toxicology**

## **General toxicology**

- Toxicology studies with the same route and schedule of administration as proposed in subjects:
  - Duration of nonclinical studies relative to clinical development described in ICH guidance M3R2
  - Anticancer pharmaceuticals follow ICH S9



### **Purpose of these studies**

- Determine whether it is safe to put drug candidate into humans
- Determine an initial safe dose for human clinical trials
- Help determine a safe stopping dose (if necessary)
- Identify dose limiting toxicities (what should be monitored in clinical trials)
- Assess potential toxicities that cannot be identified in clinical trials



### Which Species to Test

- Regulatory guidelines accept data from a variety of species
- In practice, only a small number of rodent and nonrodent species are consistently chosen
- Species are chosen because they have been used before, and studied extensively



## **Species Commonly Used**

- Rodents
  - Rats
  - Mice

- Non Rodents
  - Beagle dogs
  - Cynomolgus and Rhesus monkeys
  - Rabbits



## **Species in toxicology studies**

- For biotech derived products, e.g. an antibody, the species should be pharmacologically relevant
- Toxicology studies in a second species may be waived if no other relevant species has been identified

- Indication: Treatment of systemic amyloidosis
- Target: Amyloid fibrils
- Drug: Humanized IgG1 monoclonal antibody
- Target not present in healthy animals (pivotal toxicology studies are conducted in healthy animals)
- How is toxicity assessed in the absence of a relevant species? What to monitor in patients?

# FDA

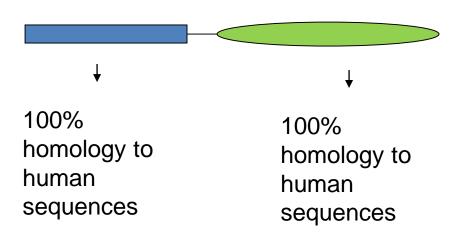
- Drug/Indication: Microtubule inhibitor being developed for treatment of advanced solid tumors
- Produced irreversible optic nerve degeneration at mid and high doses in rat repeat-dose toxicology study
- Based on concerns monitoring was increased (optic exams and imaging), and information was added to the protocol and informed consent



- Drug class/Indication: Epigenetic targeting drugs being developed for treatment of solid tumors and hematologic malignancies
- Produced malignancies (lymphoma) in rat 3-month repeat-dose toxicology studies
- Secondary malignancy has also been observed in a clinical trial with one drug
- Based on concerns, patient populations being studied were considered and information was added to the IB and informed consent

- Antibody-drug conjugate (Indication: Cancer)
- Cynomolgus monkey was the relevant species
- Findings in monkeys: Mainly myelosuppression
- Findings in rats: Myelosuppression, also severe hepatotoxicity (necrosis, increased liver enzymes)
- How much to worry about hepatotoxicity?

- Fusion protein to inhibit the complement pathway (immune system)
- Indication: PNH



FDA

#### Continued



- 60% homology to protein sequences in rat
- 90% homology to protein sequences in Cyno
- Deaths in rats and monkeys, due to
  - Immunogenicity
- Is immunogenicity relevant to humans?

# General toxicology used to define the starting dose in humans

#### Should I worry about the starting dose?

- The review team reviewed the IND package and agreed on the starting dose
- Be aware of toxicities
- Understand what the nonclinical data mean and how relevant they are



# In general, animals are good predictors of toxicities in humans

- Signal transduction pathways, e.g. IGFR/mTOR inhibition and hyperglycemia
- Infusion reaction in monkeys to antisense oligonucleotide
  - Cmax-related: Slower infusion reduces infusion reaction
- Hematologic toxicities of cytotoxic drugs predicted by animal studies



### **Genetic Toxicology**

## Genotoxicity



- Data from genotoxicity studies are used as a surrogate for carcinogenicity during clinical trials.
- Results from carcinogenicity studies are generally not available until the time of product approval. Many people, including healthy volunteers, will have been exposed to pharmacologically active doses before carcinogenicity data are available.

# Types of genotoxicity assays



- In vitro
  - An assay in bacteria to detect mutations in a target gene
    - Ames Test Salmonella and E.coli
  - An assay in mammalian cells to detect chromosomal damage
    - Chinese Hamster Ovary (CHO) cells
    - Mouse lymphoma cells
- In vivo
  - An assay in a rodent species to detect chromosomal damage to hematopoietic cells
- Other genotoxicity assays are available and may be conducted

## Timing



- Timing of genetic toxicology studies relative to clinical development
  - Gene mutation assay for single dose clinical studies
  - Add chromosomal damage study for multiple dose clinical studies
  - Complete battery conducted prior to phase 2
  - Submit with marketing application for anticancer drugs

# Worried about results of genetic toxicity studies?

- Review team made a decision that the trial is reasonably safe to proceed
  - Negative results in genotoxic assays
  - Positive or likely/possibly to be positive (based on MOA, other drugs in the same class, equivocal results)
    - Life-threatening indication/ cancer? Genotox studies not needed until marketing application; short life-expectancy
    - Serious condition and no other therapy?
    - A single, small/sub-therapeutic dose in humans?

FDA



# Other toxicity studies: Reproductive toxicology

# Teratogenicity

- Thalidomide is a well-known example
- Prescribed to pregnant women for nausea and insomnia
- Resulted in over 10,000 births with severe limb malformations
- Link between exposure and adverse effects was possible because of the potency of the drug and relatively short time period between exposure and manifestation of effects

#### **Thalidomide-induced birth defects**





## **Reproduction Toxicity Testing**

- For small molecules
  - Protocols are standard
  - Covers fertility, embryo-fetal, and pre- and post-natal periods
  - Follow ICH S5
- For biotechnology derived pharmaceuticals
  - More case-by-case
  - Study designs evolving based on revisions to ICH S6

FDA

# In general, animals are good predictors of toxicities in humans

- Thalidomide-like limb abnormalities in monkeys are induced by thalidomide analogs
- Hormonal agents (e.g. estrogen receptor agonists) and loss of pregnancy

## FDA

#### **Reproduction Toxicity Testing**

- Follow ICH M3R2
- There are different requirements depending on the specific patient population:
  - Women of child bearing potential
  - Pregnant women
  - Males
  - People not of childbearing potential (i.e., permanently sterilized, postmenopausal)



#### References

### **ICH Guidances and Guidelines**

- fda.gov/cder/guidance or ich.org
  - S1 Carcinogenicity Studies
  - S2 Genotoxicity Studies
  - S3 Toxicokinetics and Pharmacokinetics
  - S4 Toxicity Testing
  - S5 Reproductive Toxicology
  - S6 Biotechnological Products
  - S7 Safety Pharmacology Studies
  - S8 Immunotoxicology Studies
  - S9 Nonclinical Evaluation for Anticancer Pharmaceuticals
  - M3 Nonclinical Safety Studies for the conduct of Human Clinical Trials
  - Other guidances available from fda.gov



#### **Thank You**

