

# Preclinical Assessment of Cell and Gene Therapy Products to Support an IND

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# Learning Objectives



- Introduction to CBER / OTAT – regulated products including immunotherapies and preclinical regulatory review principles
- Gain familiarity with regulations governing preclinical testing
- Understand the preclinical expectations for early phase trials
- Identify safety concerns for cell and gene therapy products
- Preclinical considerations for CAR T cell therapies
- Identify potential pitfalls / regulatory issues
- Decide when to have early interactions with the FDA
- Bookmark FDA Guidance documents and other online resources



**CENTER FOR BIOLOGICS EVALUATION & RESEARCH (CBER)**  
**OFFICE OF TISSUES & ADVANCED THERAPIES (OTAT)**

# Diversity of OTAT-Regulated Products

- **Gene therapies (GT)**

- Ex vivo genetically modified cells
- Non-viral vectors (e.g., plasmids)
- Replication-deficient viral vectors (e.g., adenovirus, adeno-associated virus, lentivirus)
- Replication-competent viral vectors (e.g., measles, adenovirus, vaccinia)
- Microbial vectors (e.g., Listeria, Salmonella)

- **Stem cells/stem cell-derived**

- Adult (e.g., hematopoietic, neural, cardiac, adipose, mesenchymal)
- Perinatal (e.g., placental, umbilical cord blood)
- Fetal (e.g., neural)
- Embryonic
- Induced pluripotent stem cells (iPSCs)

- **Products for xenotransplantation**

- **Functionally mature/differentiated cells** (e.g., retinal pigment epithelial cells, pancreatic islets, chondrocytes, keratinocytes)
- **Therapeutic vaccines and other antigen-specific active immunotherapies**
- **Blood- and Plasma-derived products**
  - Coagulation factors
  - Fibrin sealants
  - Fibrinogen
  - Thrombin
  - Plasminogen
  - Immune globulins
  - Anti-toxins
  - Snake venom antisera
- **Combination products**
  - Engineered tissues/organs
- **Devices**
- **Tissues**

# Examples of Cell-based Immunotherapy Products Regulated in OTAT

- Chimeric Antigen Receptor (CAR) T cells
- TCR transgenic (Tg) T cells
- Non-T cell CARs (B cell, NK cell, etc.)
- Regulatory T cells (Tregs)
- “Mesenchymal Stem Cells” (MSCs, ASCs, etc.)
- Cell-based Therapeutic Vaccines (e.g., dendritic cells, irradiated tumor cells, etc.)

# **PRECLINICAL TESTING (PHARMACOLOGY-TOXICOLOGY)**

**REGULATIONS**

**LIFE CYCLE OF DRUG DEVELOPMENT**

**INVESTIGATIONAL NEW DRUG (IND) APPLICATION**

**CBER REVIEW PROCESS**

# What Regulations Govern Preclinical Testing?

## Pharmacology & Toxicology Studies

“...adequate information about the pharmacological and toxicological studies...on the basis of which the sponsor has concluded that it is reasonably safe to conduct the proposed clinical investigations. **The kind, duration, and scope of animal and other tests required varies with the duration and nature of the proposed clinical investigations.**”

*IND Regulations [21 CFR 312.23 (a)(8) - Pharmacology and Toxicology]*



# Final Guidance

## Guidance for Industry

### Preclinical Assessment of Investigational Cellular and Gene Therapy Products

Additional copies of this guidance are available from the Office of Communication, Outreach and Development (OCOD), (HFM-40), 1401 Rockville Pike, Suite 200N, Rockville, MD 20852-1448, or by calling 1-800-835-4709 or 301-827-1800, or e-mail [ocod@fda.hhs.gov](mailto:ocod@fda.hhs.gov), or from the Internet at <http://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation/Guidances/default.htm>.

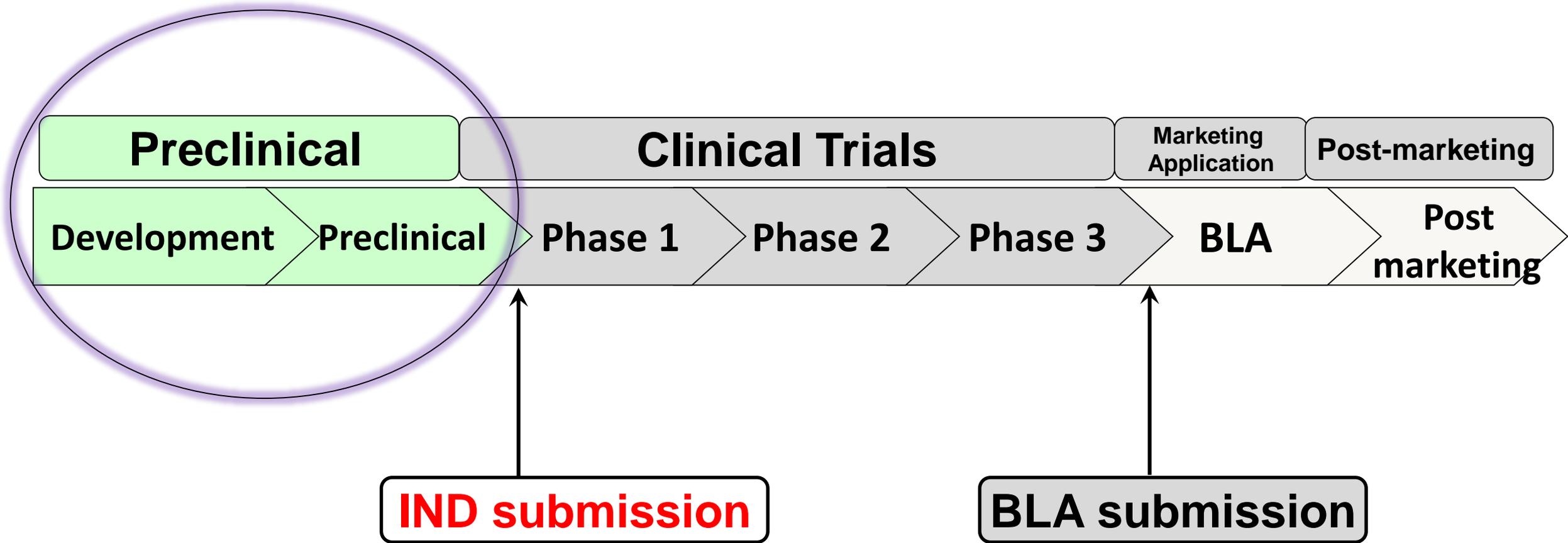
For questions on the content of this guidance, contact OCOD at the phone numbers or e-mail address listed above.

U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Biologics Evaluation and Research  
November 2013

- Current thinking of the Agency on this topic
- First comprehensive FDA guidance on preclinical assessment of cell and gene therapy (CGT) Products
- Explicitly incorporates 3 R's: recommendations to reduce, refine, and replace animal use in a preclinical program

<https://www.fda.gov/media/87564/download>

# Product Lifecycle for Biologics: Focus on the Preclinical Phase

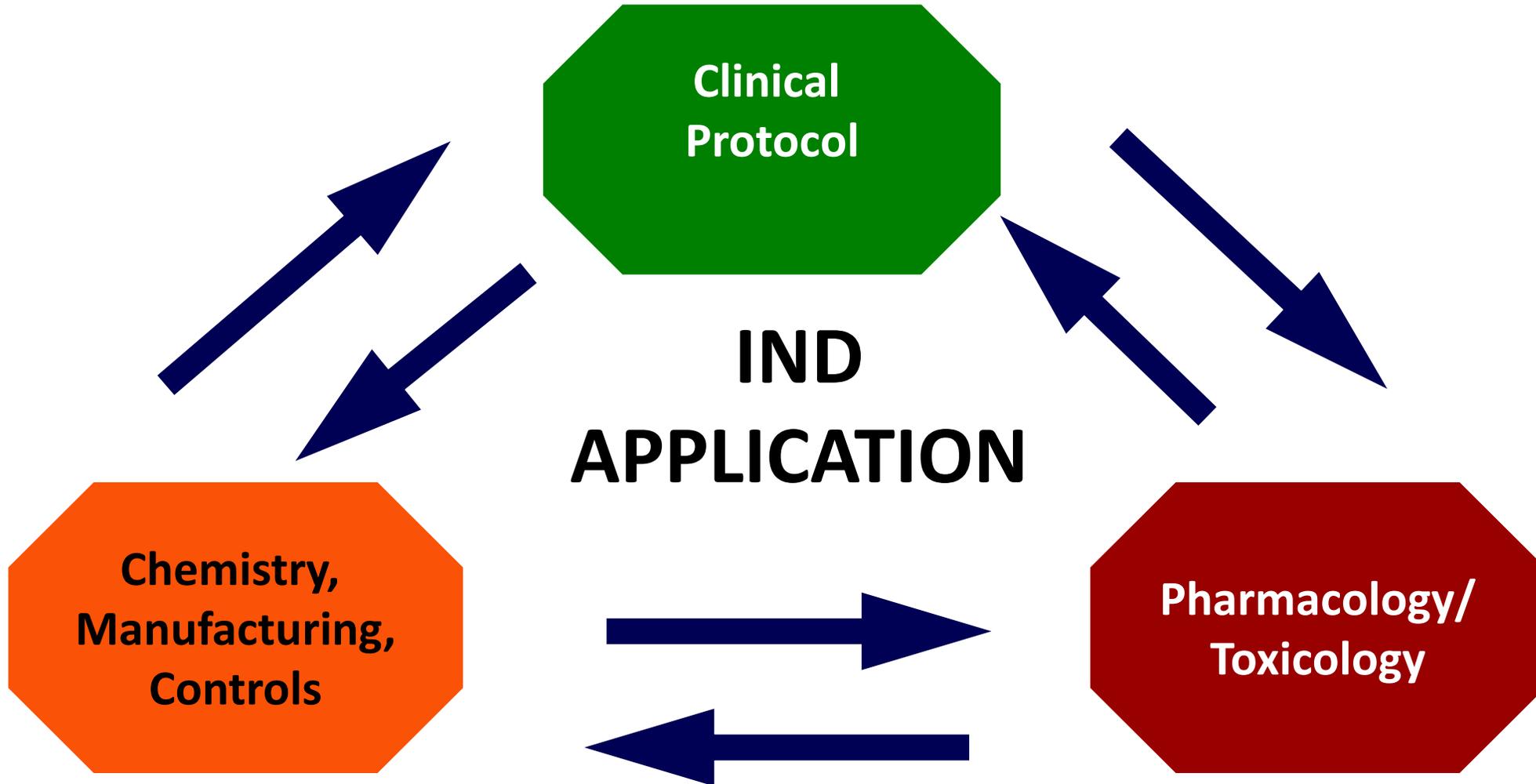


# 21 CFR 312.20 Subpart B: IND Application

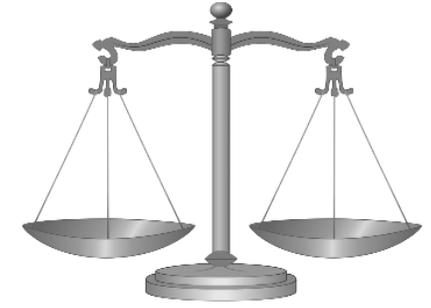


<input type="checkbox"/>	Form FDA 1571	<i>21 CFR 312.23(a)(1)</i>
<input type="checkbox"/>	Table of Contents	<i>21 CFR 312.23(a)(2)</i>
<input type="checkbox"/>	Introductory statement and general investigational plan	<i>21 CFR 312.23(a)(3)</i>
<input type="checkbox"/>	Investigator's brochure	<i>21 CFR 312.23(a)(5)</i>
<input type="checkbox"/>	Protocols	<i>21 CFR 312.23(a)(6)</i>
<input type="checkbox"/>	Chemistry, manufacturing, and control data (including environmental assessment)	<i>21 CFR 312.23(a)(7)</i>
<input checked="" type="checkbox"/>	<b>Pharmacology and toxicology data</b>	<i>21 CFR 312.23(a)(8)</i>
<input type="checkbox"/>	Previous human experience	<i>21 CFR 312.23(a)(9)</i>
<input type="checkbox"/>	Additional information	<i>21 CFR 312.23(a)(10)</i>
<input type="checkbox"/>	Biosimilar User Fee Cover Sheet	<i>Form FDA 3792</i>
<input type="checkbox"/>	Clinical Trials Certification of Compliance	<i>Form FDA 3674</i>

# Key Elements of the IND Submission



# CBER Review: Product-Based



- No “one-size fits all” regulatory approach
- Data necessary to support development depends on the characteristics of the product
- Preclinical studies are designed to support use of a specific product for a specific clinical indication.
- Review approach is based on balancing risk and benefit.

**PRECLINICAL TESTING (PHARMACOLOGY-TOXICOLOGY)**  
**CONSIDERATIONS & EXPECTATIONS**  
**SOURCES OF DATA TO SUPPORT IND**

# Expectations from Preclinical Data

- To support a [rationale](#) for the first-in-human clinical trial
  - For cell and gene therapy products, the trial is usually conducted in the disease population, not in healthy volunteers
- To make [recommendations](#) regarding the proposed clinical trial
  - Initial safe starting dose, dose-escalation scheme, dosing schedule, clinical monitoring
- To meet [regulatory requirements](#)
  - 21 CFR 312.23 (a)(8)
  - 21 CFR 58 (Good Laboratory Practice (GLP) compliance)

# Sources of Data to Support an IND

- GLP-compliant toxicology studies conducted by a certified testing facility
- Well-controlled studies conducted in-house
- Published data in peer-reviewed journals
- Cross-reference to similar products in previous submissions to FDA
- Detailed clinical study reports from clinical trials

# Preclinical Expectations for Early Phase Clinical Trials



- Gain understanding of potential mechanism of action (e.g., targeted killing, anti-tumor activity, tolerance induction)
- Establish pharmacologically effective dose(s)
- Optimize route of administration (ROA)
- Establish rationale for species / model selection

# Preclinical Expectations for Early Phase Clinical Trials



- Establish a dosing scheme / dosing regimen
- Potential target tissue(s) of toxicity / activity
- Parameters to monitor clinically

# Preclinical Study Designs

- Assess pharmacology / proof-of-concept (POC) / vector distribution / cell fate in relevant animal model(s) of disease / injury, as feasible
- Assess safety / toxicology (T) / vector distribution / cell fate in healthy animals
- Hybrid pharmacology-toxicology study design
  - POC + T + product fate – incorporate activity and safety endpoints in an animal model of disease / injury
  - Local microenvironment and pathophysiology status of the model may impact the safety / bioactivity of the product

# Considerations for Appropriate Animal Species / Model



- There is no 'default' to the use of:
  - nonhuman primates
  - both a rodent and a non-rodent species
  - multiple species
- Understand the limitations of the species / model(s) used
- Scientific justification should be provided for the animal species / model(s) used

**PRECLINICAL TESTING (PHARMACOLOGY-TOXICOLOGY)**  
**SAFETY CONSIDERATIONS**  
**ENGINEERED IMMUNE CELL PRODUCTS / CAR T CELL**

# Potential Safety Concerns for Engineered Immune Cell Products



- Risks of the delivery procedure
- *Ex vivo* manipulation (e.g., expansion, genetic modification, encapsulation, scaffold seeding)
- Potential inflammatory / immune response to the administered cellular product
- Inappropriate cell proliferation (i.e., tumor formation)
- Inappropriate cell differentiation (i.e., ectopic tissue formation)
- Product-mediated cytotoxicity against host tissues/organs (e.g., GVHD for allogeneic T cell products)

# Potential Safety Concerns for Engineered Immune Cell Products (Cont'd)



- Cell migration to non-target areas / tissues
- Interactions with concomitant therapies
- For vector transduced cells
  - Vector insertion/integration/transformation (e.g., gene disruptions)
  - Unintended immune responses to vector or transgene
  - Transgene effects

# Example 1: Safety Concerns for Genetically-Modified T-cell Products



- Vector concerns – Insertional mutagenesis, transformation
- “On-target, off-tumor” toxicity
- “Off-target” toxicity
- Novel suicide genes – Effects of expressed gene + novel drug inducer
- Cytokine release, tumor lysis, macrophage activation syndromes

# Example 1: Safety Concerns for Genetically-Engineered T-cell Products (cont'd)

- Addition of novel drugs, devices, and/or biologics – safety of individual components and combination
- Effects of other genetic modifications:
  - multiple chimeric antigen receptors (CARs)
  - Lentivirus, AAV, or other gene transfer vectors
  - RNA interference (RNAi)
  - CRISPR-Cas9, and other gene editing technologies

## Example 2: Data Used to Support a CAR T Cell Product Using a Single-Chain Variable Fragment (scFv)



- Expression profile of target (e.g., in silico analysis, RT-PCR, immunohistochemistry, flow cytometry, etc.)
- Product on- and off-target testing against various cell lines, primary cells, iPSC-derived 3D cell cultures from various tissue sources
- On-target activation/killing using final CAR T cell product
  - Cytokine release assays (e.g., IFN- $\gamma$ )
  - Cytolysis of target cells
  - Antigen-dependent T cell proliferation in vitro

## Example 2: Data Used to Support a CAR T Cell Product Using a Single-Chain Variable Fragment (scFv)



- Antitumor response in immunocompromised xenograft animal models
- POC / Tox studies in appropriate animal models
- Studies using homologous CAR T cells in animal models
- Any additional product- and indication-specific testing (e.g., novel suicide gene, combined with drug, etc.)

## Example 2: Data Used to Support a CAR T Cell Product Using a Single-Chain Variable Fragment (scFv)



- Previous clinical experience with similar CAR T cell products (e.g., same scFv)
- Previous experience with investigational or approved monoclonal antibody with identical specificity
- Published experience with the same target
- Vector insertional mutagenesis testing (case-by-case)
- Replication-competent retrovirus/lentivirus (RCR/RCL) testing

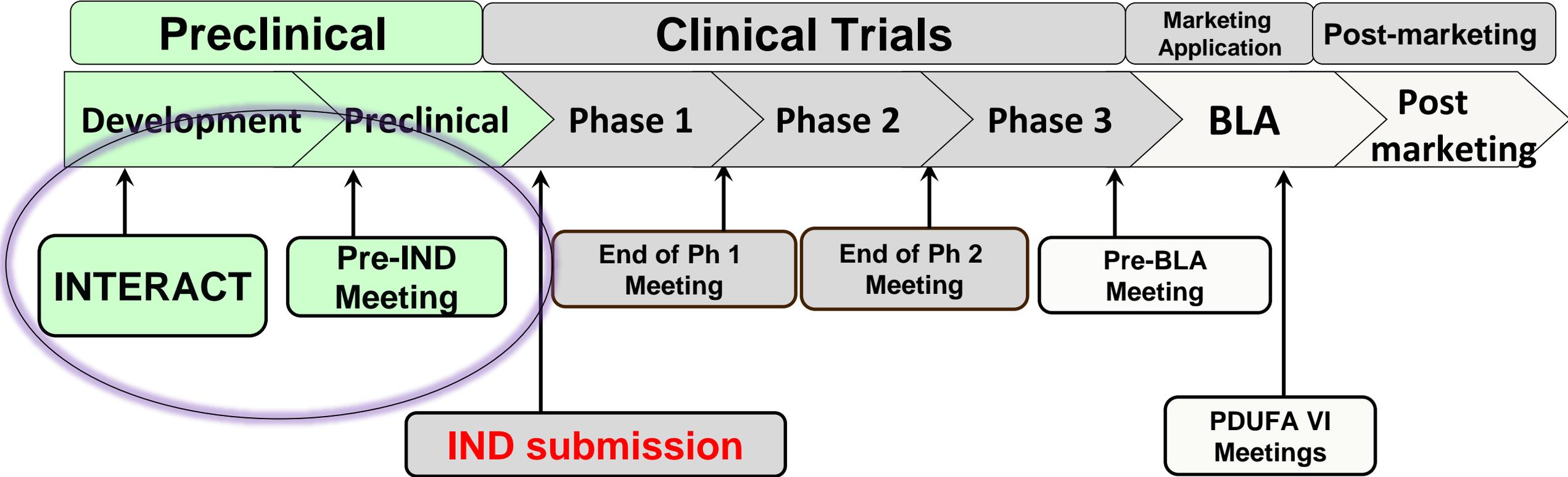
# Potential Preclinical Pitfalls When Submitting an IND



- Insufficient information to assess subject risk, including:
  - Insufficient characterization of product safety
  - Lack of preclinical safety data for intended product
  - Incomplete study reports

**EARLY COMMUNICATIONS WITH FDA/CBER**  
**INTERACT MEETING (PRE-PRE-IND)**  
**PRE-IND MEETING**

# Opportunities for Interaction - Preclinical Development



Product development is an iterative process that may involve multiple FDA and sponsor interactions

# INTERACT Meeting\*



- **IInitial Targeted Engagement for Regulatory Advice on CBER productIs**
- *a specific investigational product or product-derivation strategy should be selected by time of INTERACT meeting request*
- CBER recognizes that the development of innovative investigational products has unique challenges
  - Complex manufacturing technologies and issues
  - Unknown safety profiles
  - Use of cutting-edge testing methodologies
  - Incorporation of new devices/delivery systems
- **Goal:** *To obtain early feedback on a product development program for a novel investigational agent*



# INTERACT Meeting

- **Features:**

- Non-binding, informal scientific discussions with CBER/OTAT review disciplines
- Initial targeted discussion of specific issues (e.g., early product characterization, early POC studies, new delivery devices, general early-phase trial design elements)
- FDA will help identify critical issues or deficiencies early in development
- *Primary contact:* [INTERACT-CBER@fda.hhs.gov](mailto:INTERACT-CBER@fda.hhs.gov)

[\\*https://www.fda.gov/BiologicsBloodVaccines/ResourcesforYou/Industry/ucm611501.htm](https://www.fda.gov/BiologicsBloodVaccines/ResourcesforYou/Industry/ucm611501.htm)



# INTERACT Meeting – Pharmacology-Toxicology (P/T)



- Overall P/T advice related to the *design of proof-of-concept* or other *pilot safety/biodistribution studies* necessary to support administration of an investigational product in a First-in-human (FIH) trial
  - Adequacy of the selected animal species and animal models of disease/injury
  - Study designs (e.g., endpoints, dose levels, route of administration, dosing regimen)
  - Acceptability of innovative preclinical testing strategies, products and/or delivery modalities
  - Advice on modification of a preclinical program or study design, as applicable, to ensure judicious use of animals

# INTERACT Meeting: Out of Scope

- The sponsor has not decided between multiple product options or the investigational clinical product has not been identified
- The sponsor has previously received formal regulatory advice about a similar product and indication
- Questions / discussion regarding the adequacy and design of definitive toxicology studies
- Review of final study reports for completed proof-of-concept or toxicology studies
- Questions on a preclinical testing plan where no preliminary data from pilot studies are provided



# INTERACT Meeting (cont'd)

- To facilitate a future pre-IND meeting:
  - Include the FDA written INTERACT comments and your responses in your pre-IND meeting package
  - The advice from the INTERACT meeting should be considered when preparing your pre-IND meeting package and when preparing the protocols for the definitive preclinical studies
  
- Requests for INTERACT meetings:
 

[INTERACT-CBER@fda.hhs.gov](mailto:INTERACT-CBER@fda.hhs.gov)



# Pre-IND Meeting

- Non-binding, but formal meeting between FDA and sponsor (with meeting minutes generated)
- Meeting package should include summary data and sound scientific principles to support use of a specific product in a specific patient population
- Can be helpful in developing a strategy for drug development by obtaining feedback on studies that will support the initiation of clinical trials

# Pre-IND Meeting: Preclinical



- What to include in the preclinical section?
  - A comprehensive summary of all completed preclinical studies:
    - *in vitro* and *in vivo* studies
    - animal species/models
    - study designs
    - product manufacturing and formulation
    - resulting data and interpretation
  - Discussion of the planned preclinical program  
(e.g., animal species/models, product manufacturing and formulation, study designs, etc.)



# Do's for INTERACT and Pre-IND Meetings [Preclinical Perspective]



- Do read and understand FDA/ICH Guidances, regulations, etc. before meeting with FDA
- Do include the preclinical development plan
- Do specify similarities and differences between the preclinical and clinical products
- Do specify similarities and differences between the preclinical and clinical delivery devices/procedures
- Do include the design of your completed and proposed preclinical studies
- Do make the package reader-friendly



# Don'ts for INTERACT and Pre-IND Meetings

## [Preclinical Perspective]



- Don't conduct the definitive preclinical studies without seeking input from CBER/OTAT at the pre-IND meeting
- Don't forget to discuss the limitations for each test system used
- Don't forget to consider new *in vitro* and *in vivo* test models as the science and technology progress
- Don't forget that the preclinical testing program may need to be adapted to the specific cell and gene therapy product and level of risk

# Summary



- It is important to keep FDA/CBER/OTAT involved at an early phase of the product development program
- The preclinical study designs should be supported by scientific rationale / data
- Novel therapies mean novel testing paradigms, therefore, pre-submission interaction with FDA is encouraged

# Take-home message

What are the major objectives of a preclinical program for a CBER-regulated product?

- ✓ Establish scientific rationale to support a planned trial
- ✓ Provide recommendations for the conduct of the proposed clinical study
- ✓ To meet regulatory requirements

# Selected Guidance Documents



- Guidance for Industry: Preclinical Assessment of Investigational Cellular and Gene Therapy Products (November 2013)  
<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/preclinical-assessment-investigational-cellular-and-gene-therapy-products>
- Guidance for Industry: Considerations for the Design of Early-Phase Clinical Trials of Cellular and Gene Therapy Products (June 2017)  
<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/considerations-design-early-phase-clinical-trials-cellular-and-gene-therapy-products>
- Guidance for Industry: Long Term Follow-Up After Administration of Human Gene Therapy Products (July 2018)  
<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/long-term-follow-after-administration-human-gene-therapy-products>
- Guidance for Industry: Clinical Considerations for Therapeutic Cancer Vaccines (October 2011)  
<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/clinical-considerations-therapeutic-cancer-vaccines>

# Contact Information

- **Feorillo Galivo**

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- **Regulatory Questions:**

**OTAT Main Line – 240 402 8190**

Email: [OTATRPMS@fda.hhs.gov](mailto:OTATRPMS@fda.hhs.gov) and

[Lori.tull@fda.hhs.gov](mailto:Lori.tull@fda.hhs.gov)

- **OTAT Learn Webinar Series:**

<http://www.fda.gov/BiologicsBloodVaccines/NewsEvents/ucm232821.htm>

- **CBER website:** [www.fda.gov/BiologicsBloodVaccines/default.htm](http://www.fda.gov/BiologicsBloodVaccines/default.htm)

- **Phone:** 1-800-835-4709 or 240-402-8010

- **Consumer Affairs Branch:** [ocod@fda.hhs.gov](mailto:ocod@fda.hhs.gov)

- **Manufacturers Assistance and Technical Training Branch:** [industry.biologics@fda.hhs.gov](mailto:industry.biologics@fda.hhs.gov)

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