

Challenge #1:
Model-Integrated Evidence for Generic Drug Development

Community Trust in M&S
(Modelling & Simulation)

The Move from Scientific Curiosity
to
Ingrained Industrial Applications

Amin Rostami, PharmD, PhD., FCP, FJSSX, FAAPS, FBPS

Professor of Systems Pharmacology
Director of Centre for Applied Pharmacokinetics Research, University of Manchester, UK

Senior Vice-President of R&D and Chief Scientific Officer,
Certara, Princeton, USA



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 Merck, GSK, Eli Lilly, Genentech, J&J, AbbVie, EMD Serono, Takeda) in addition to grants from non-for-profit organizations or government 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 personal capacity as a scientist engaged with pharmaceutical science for over 30 years. The opinions expressed herein are my own and do not reflect the views, policies, strategies of any of the organisations I am affiliated with.



Topic for the Next 7 Minutes

True:

“M&S Has Matured Enough!”

False:

**“M&S Is Ingrained in Pharmaceutical
Drug Development!”**

**VERTICAL vs LATERAL
Development of M&S**

Different Kind of Cars! ; Different Kind of Drivers!



‘Scaling’ M&S Requires Less than Racing Cars & Racing Car Drivers!

Bespoke/Hand-Made vs Mass Produced

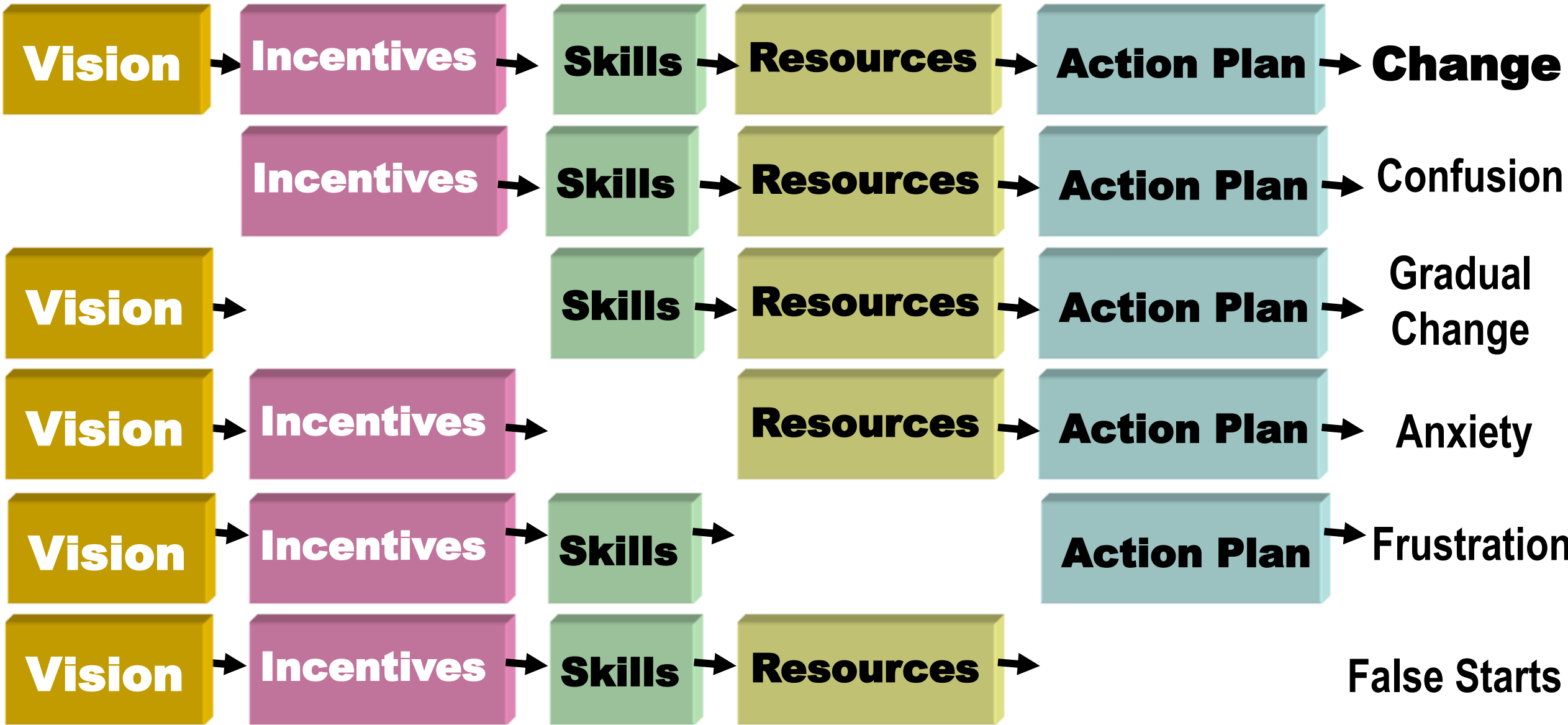
‘Toys for Big Boys’ vs ‘Modelling for All’

‘The Role of Professional M&S Tool Developers’?

**“It is *Undeniable* Fact”
that:**

User-Friendly (non-open-source/commercial) tools, with large database of systems parameters, and dedicated resources to educational needs of users, have played a ‘*significant*’ role in expansion of Mechanistic Model Applications in NDA and IND procedures in drug development.


Management Issue & Not Just Science: Ingraining Translational M&S in Pharmaceutical Development

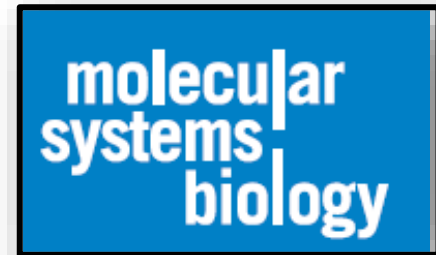


Courtesy of Dr Mark Holbrook (Senior Advisor, QSTS Team, Certara)

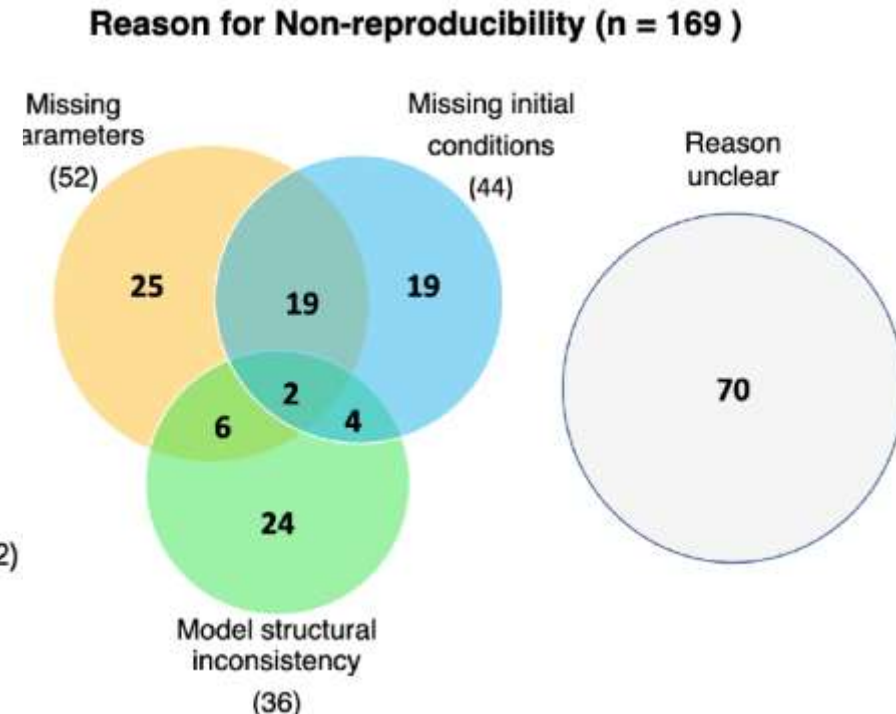
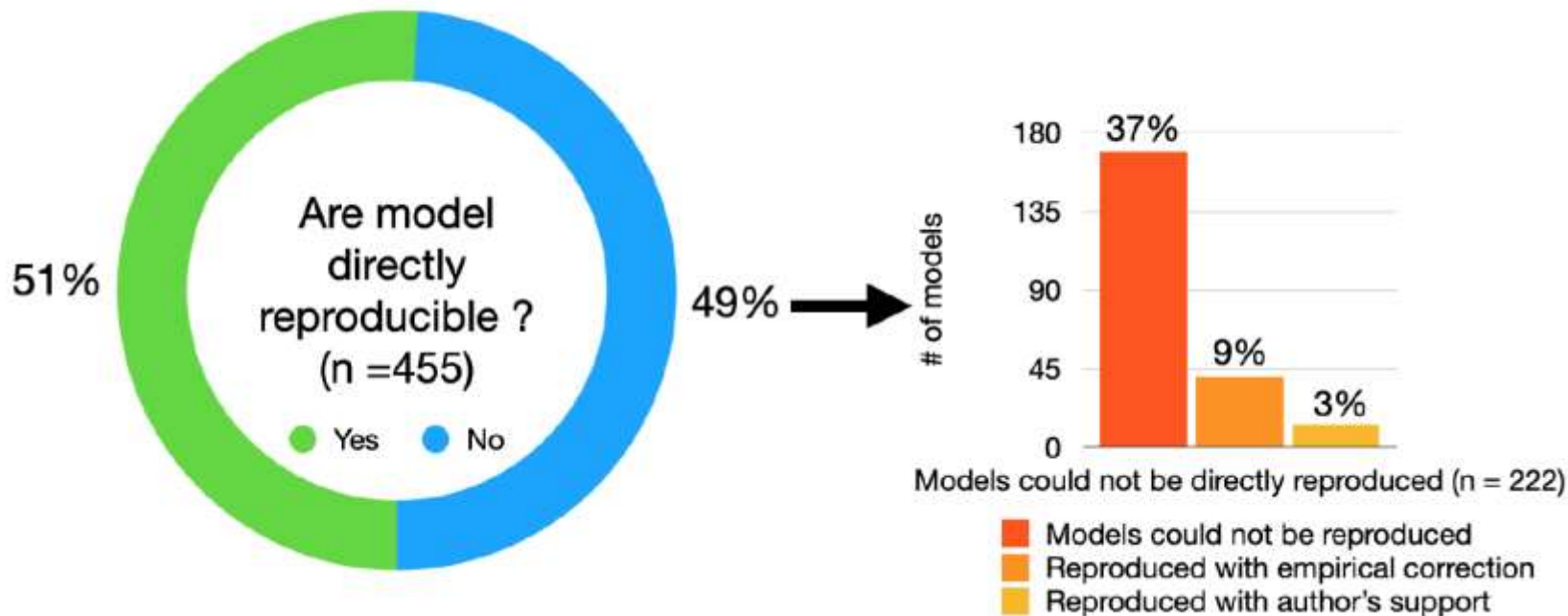
Altruistic but Naïve for Scaled Operations: Open Source-Code

Reproducibility in systems biology modelling

Krishna Tiwari^{1,2}, Sarubini Kananathan¹, Matthew G Roberts¹, Johannes P Meyer¹,
Mohammad Umer Sharif Shohan¹, Ashley Xavier¹, Matthieu Maire¹, Ahmad Zyoud¹, Jinghao Men¹,
Szeyi Ng¹, Tung V N Nguyen¹, Mihai Glont¹, Henning Hermjakob^{1,3,*} & Rahuman S Malik-Sheriff^{1,**} 



DOI 10.15252/msb.20209982
Mol Syst Biol. (2021) 17: e9982



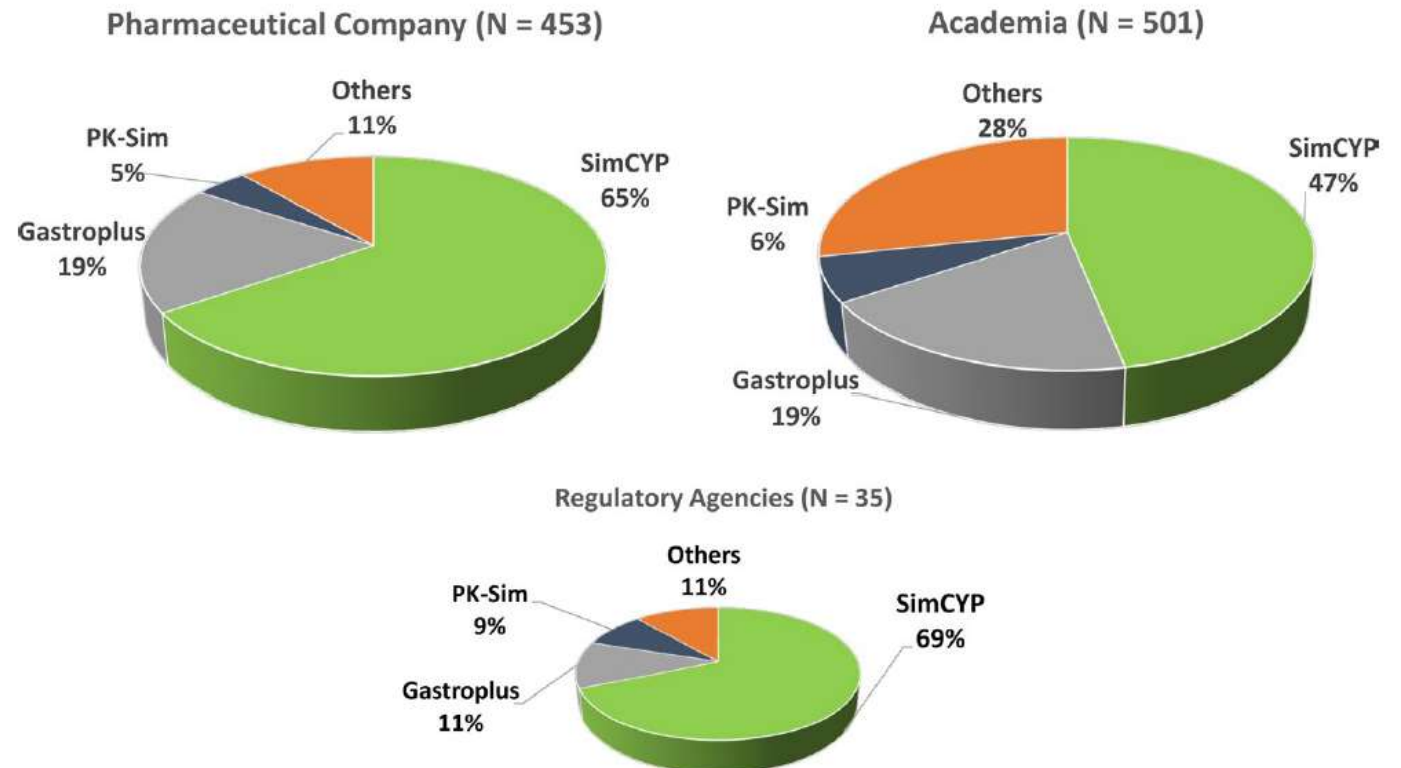
Opening a debate on open-source modeling tools: Pouring fuel on fire versus extinguishing the flare of a healthy debate

Amin Rostami-Hodjegan^{1,2} | Frederic Y. Bois²

CPT Pharmacometrics Syst.Pharmacol. 2021;00:1–8.

<https://doi.org/10.1002/psp4.12615>

- Software/platform
- Computing/Program Language
- Model
- Data
- Open source
- Commercial Software
- Open Science
- Sponsors and Beneficiaries



Assessing 1000's Lines of Program for Open Source-Code Models? “An Imposiible Task”

Alternative Option:

“GLASS BOX”

Full Transparency

via

Peer Review by Experts,
Scientific Publications,
Public Workshops,

& Full Implementation Documents which Are
Accessible to Regulators.

BUT,

Quality Assured

&

NOT EVERYONE CAN MODIFY THE CODE!

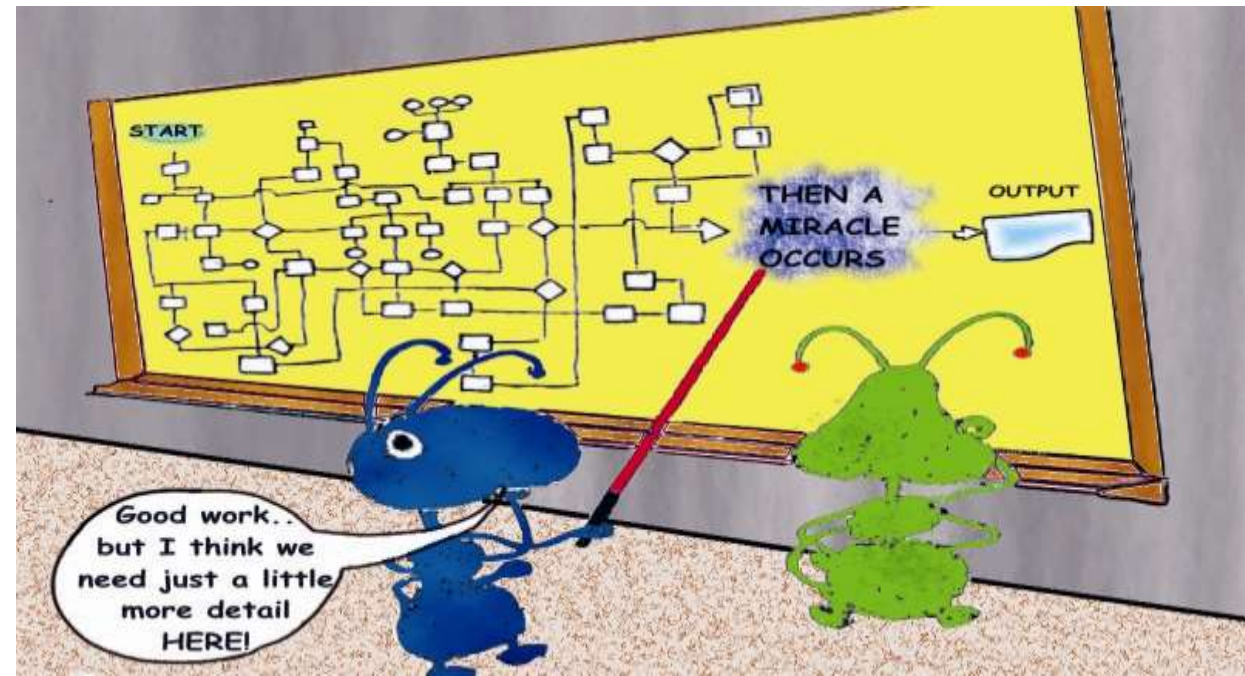
STATE OF THE ART

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

Amin Rostami-Hodjegan^{1,2}

CLINICAL PHARMACOLOGY & THERAPEUTICS | VOLUME 103 NUMBER 2 | FEBRUARY 2018

NO TO BLACK BOX

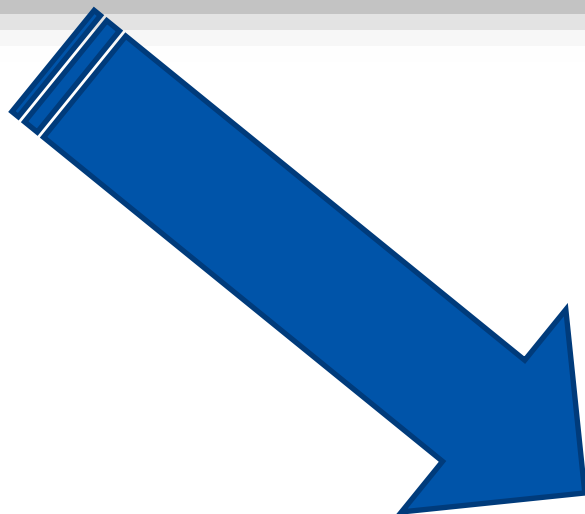


My Model? Your Model? His Model? Her Model? Whose Model?



So Many Comparisons

So Little Insight!



2002

2020

The Only *Blinded* Comparison

Approx n=3000 !

Simulation
output as
submitted by
contributors.



GLiSim



Simcyp
Simulator



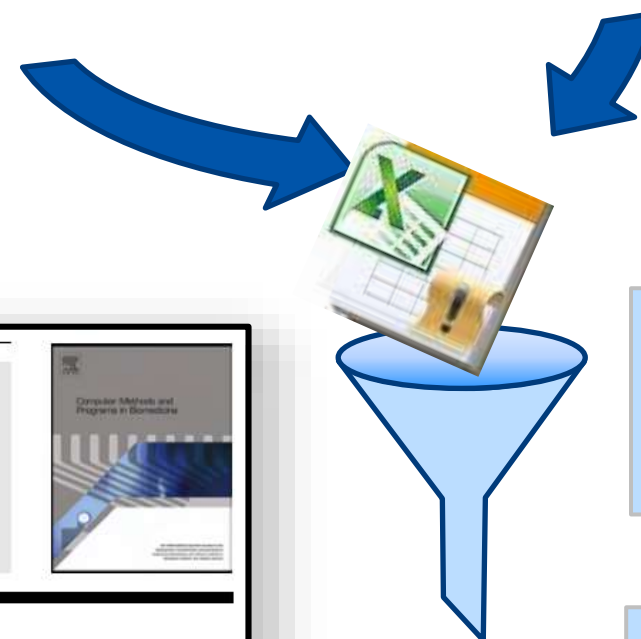
GastroPlus



orbito
Innovative Tools for Oral Biopharmaceutics

Extraction of API
parameters and
simulation output
into a summary
macro sheet.

OrBiTo API Data Files



Filtering and
grouping based
on parameters of
interest.

Allowing
statistical
analysis to be
carried out,
visualised and
automated.



ELSEVIER

Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

Computer Methods and Programs in Biomedicine

journal homepage: www.elsevier.com/locate/cmpb



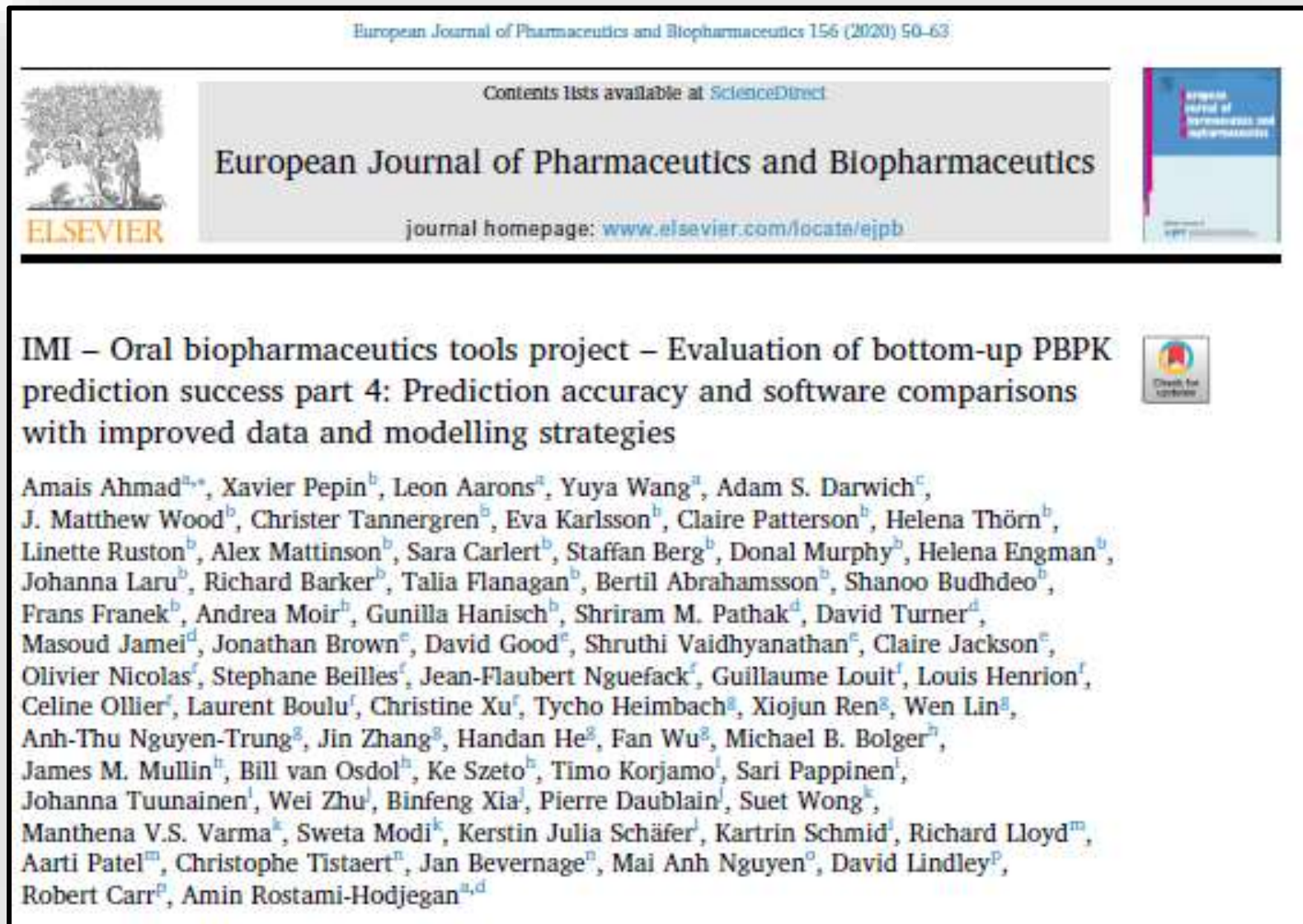
Biopharmaceutics data management system for **anonymised data**
sharing and curation: First application with orbito IMI project

Kristin Lacy-Jones^{a,*}, Philip Hayward^a, Steve Andrews^a, Ian Gledhill^{a,1}, Mark McAllister^b,
Bertil Abrahamsson^c, Amin Rostami-Hodjegan^{a,d}, Xavier Pepin^e



Average **predictive performance did NOT clearly differ between software packages**.

Some APIs showed a high level of variability in predictive performance across different software packages. This variability could be related to several factors such as compound specific properties, the quality and availability of information, and errors in scaling from *in vitro* and preclinical *in vivo* data to human *in vivo* behaviour which will be explored further.



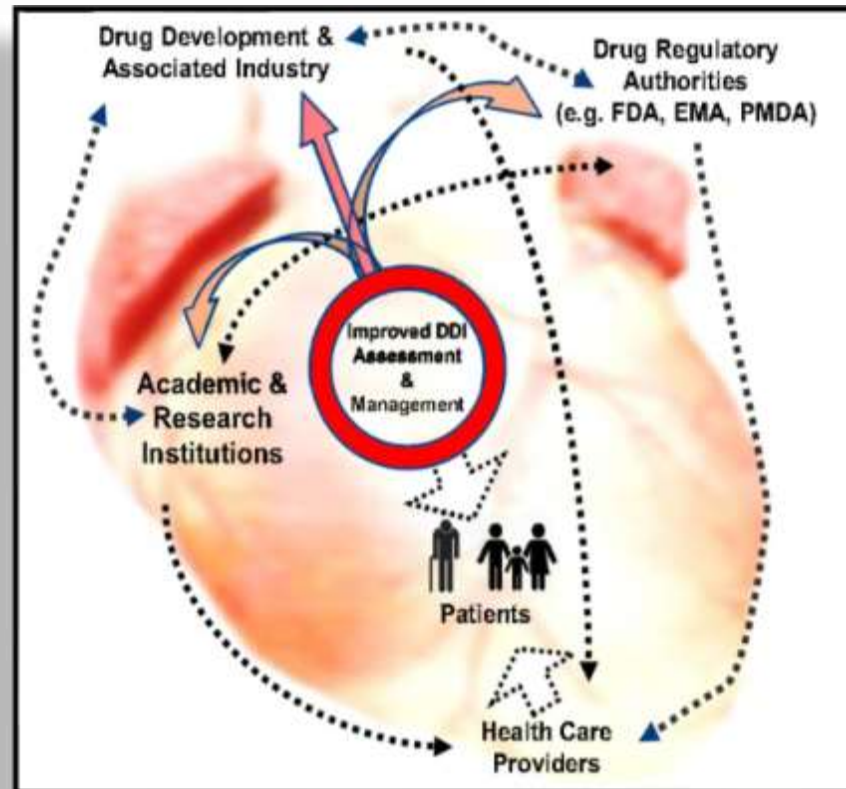
The Good, The Bad, and The Ugly
Model vs Data vs Modeller

Come Dance With Me: Transformative Changes in the Science and Practice of Drug-Drug Interactions

Karthik Venkatakrishnan^{1,*} and Amin Rostami-Hodjegan^{2,3}

How M&S Became Ingrained in Drug Development for Assessing Drug-Drug Interactions:

- **Collaboration** - Working together was at the heart of the matter
- **Integration** - Whole is more than sum of parts!



EDITORIAL

Clinical Pharmacology
& Therapeutics

Volume 90 (No. 5) July 2011

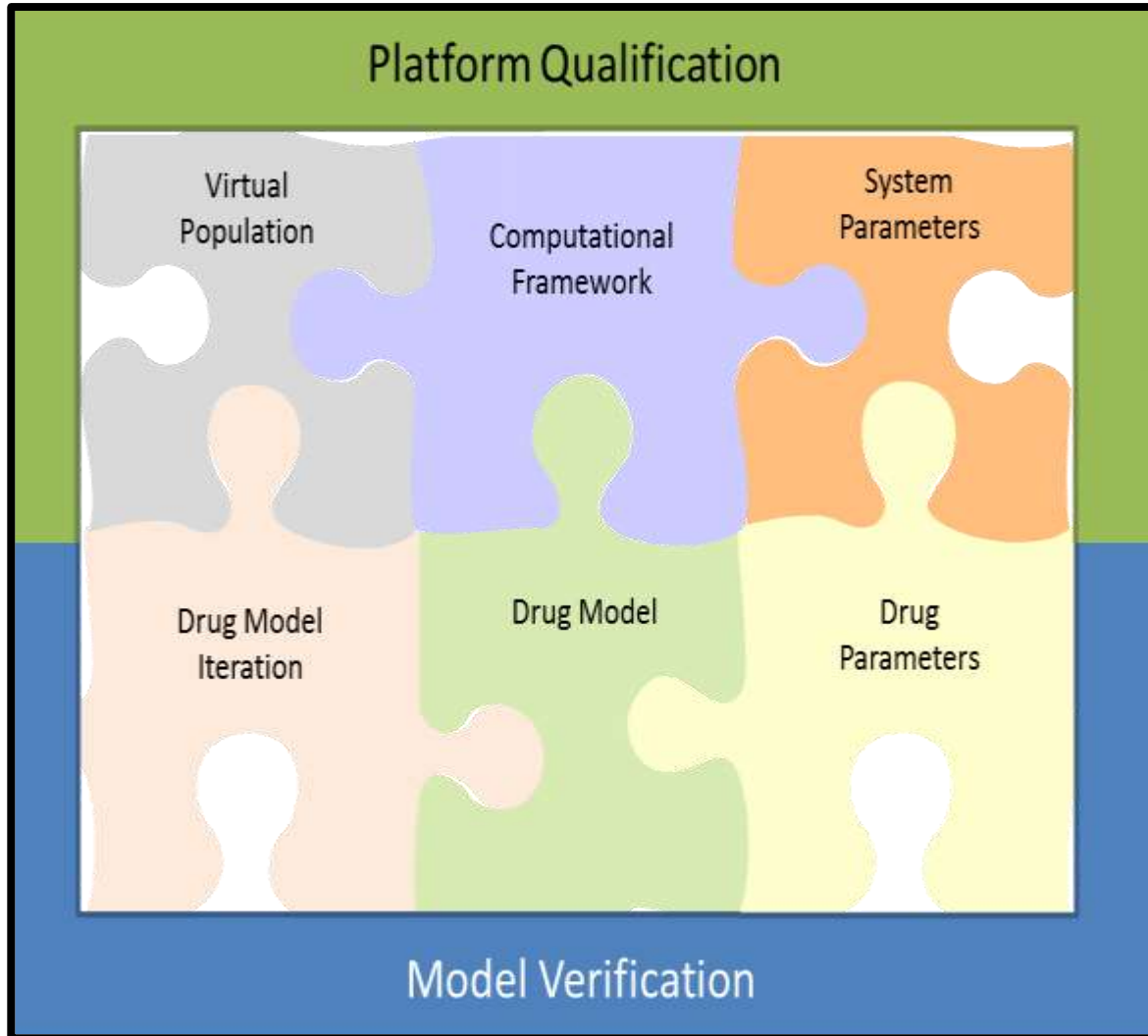
Published for the American Society for
Clinical Pharmacology and Therapeutics
by Wiley

Drug-Drug Interactions



A Consortium Approach:

Platform vs Model



Physiologically Based Pharmacokinetic Model Qualification and Reporting Procedures for Regulatory Submissions: A Consortium Perspective

Mohamad Shebley¹, Punam Sandhu², Arian Emami Riedmaier¹, Masoud Jamei³, Rangaraj Narayanan⁴, Aarti Patel⁵, Sheila Annie Peters⁶, Venkatesh Pilla Reddy⁷, Ming Zheng⁸, Loeckie de Zwart⁹, Maud Beneton¹⁰, Francois Bouzom¹¹, Jun Chen¹², Yuan Chen¹³, Yumi Cleary¹⁴, Christiane Collins¹⁵, Gemma L. Dickinson¹⁶, Nassim Djebli¹², Heidi J. Einolf¹⁷, Iain Gardner³, Felix Huth¹⁸, Faraz Kazmi⁹, Feras Khalil¹⁹, Jing Lin²⁰, Aleksandrs Odinecs²¹, Chirag Patel²², Haojing Rong²³, Edgar Schuck²⁴, Pradeep Sharma⁷, Shu-Pei Wu²⁵, Yang Xu²⁶, Shinji Yamazaki²⁷, Kenta Yoshida¹³ and Malcolm Rowland²⁸

General components of a **PBPK Analysis Package** for submission to regulatory health authorities.

Green Frame - The PBPK platform components that undergo qualification;

Blue Frame - The PBPK Component Files that undergo verification.

An abstract network diagram on the left side of the slide. It features a complex web of nodes (represented by circles of various sizes and colors: black, grey, yellow, and red) connected by thin black lines. A prominent blue, wavy, ribbon-like structure runs vertically through the center of the network, possibly representing a central theme or a specific path. The overall impression is one of interconnectedness and complexity.

Topic for the Next 7 Minutes

The Elements of VERTICAL Growth:

1. Identifying Unmet Needs

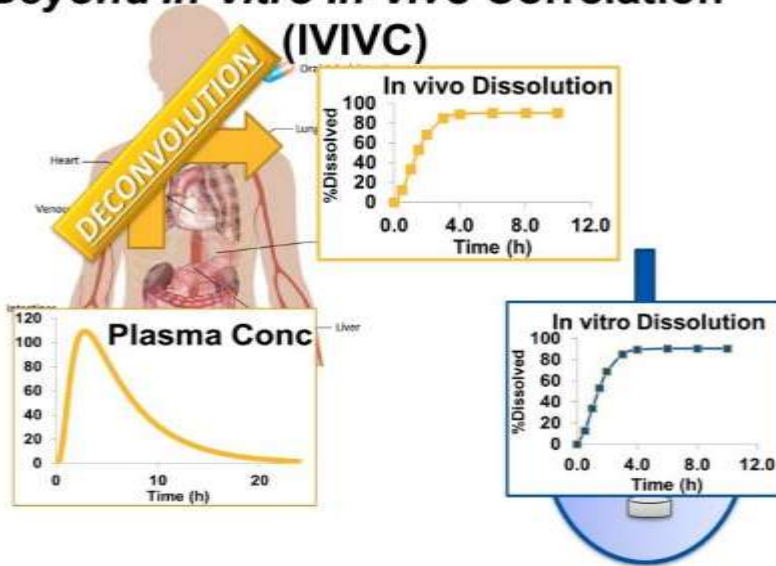
2. Thinking Outside the Box

3. Addressing Technical Issues

**But, Do Not Forget That Someone Should
Integrate All These of Pieces!**

IVIVE

Beyond In Vitro In Vivo Correlation (IVIVC)



Public Workshop Summary Report on Fiscal Year 2021 Generic Drug Regulatory Science Initiatives: Data Analysis and Model-Based Bioequivalence

Framework & Vision

Jieon Lee¹, Yuqing Gong¹, Sid Bhoopathy², Charles E. DiLiberti³, Andrew C. Hooker⁴, Amin Rostami-Hodjegan^{5,6}, Stephan Schmidt⁷, Sandra Suarez-Sharp⁸, Viera Lukacova⁸, Lanyan Fang¹ and Liang Zhao^{1,*}

The AAPS Journal (2021) 23:31
DOI: 10.1208/s12248-021-00564-2

Records on Progress

Commentary

Biopharmaceutics Applications of Physiologically Based Pharmacokinetic Absorption Modeling and Simulation in Regulatory Submissions to the U.S. Food and Drug Administration for New Drugs

Fang Wu,^{1,2,9} Heta Shah,³ Min Li,¹ Peng Duan,³ Ping Zhao,^{4,5} Sandra Suarez,³ Kimberly Raines,¹ Yang Zhao,^{1,6} Meng Wang,^{1,7} Ho-pi Lin,¹ John Duan,³ Lawrence Yu,⁸ and Paul Seo^{1,9}

Biopharmaceutics & Drug Disposition



INVITED REVIEW

Scientific Considerations to Move Towards Biowaiver for BCS Class III Drugs: How Modeling and Simulation Can Help?

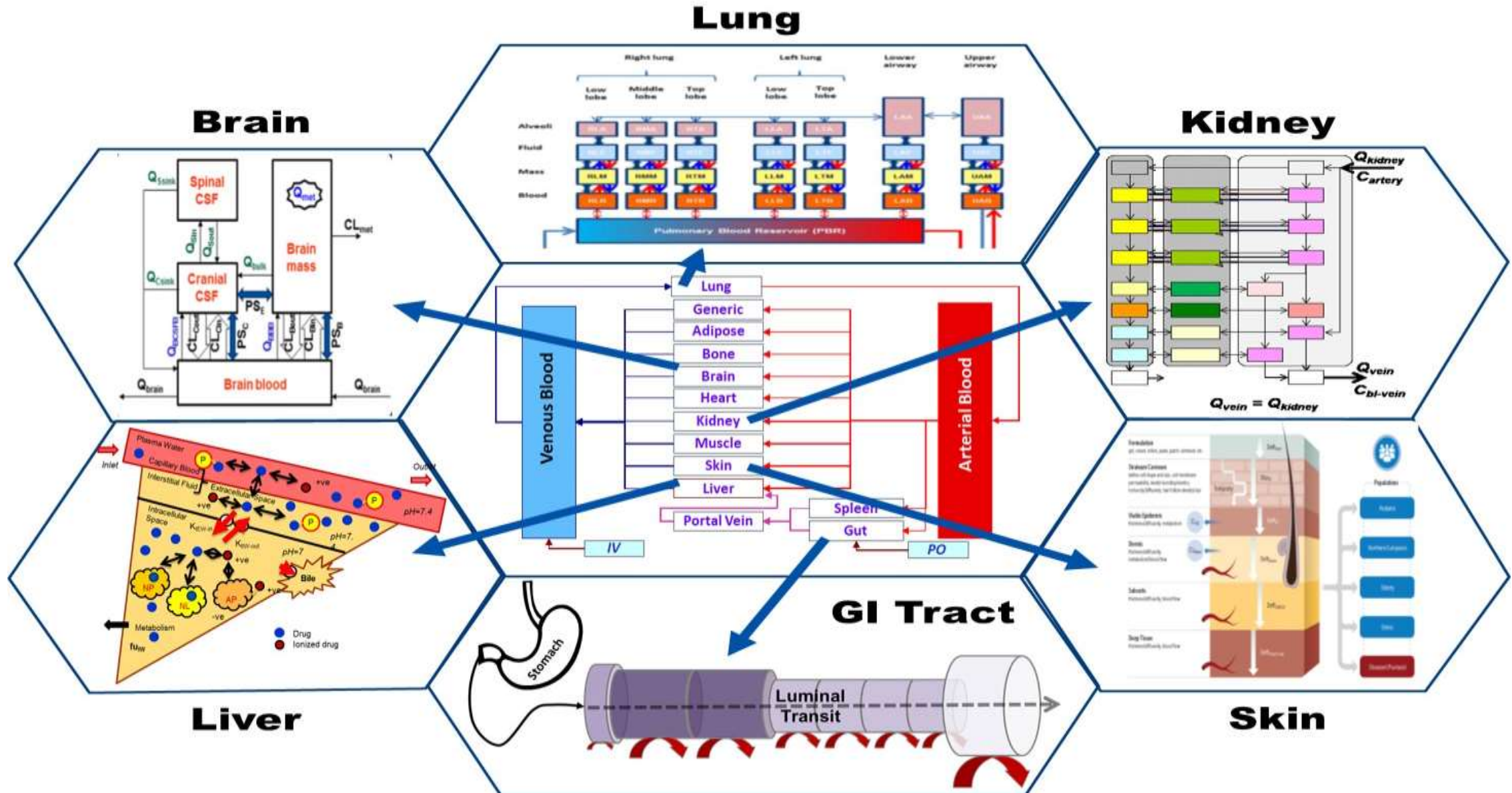
Fang Wu, Rodrigo Cristofolletti, Liang Zhao✉, Amin Rostami-Hodjegan

First published: 23 March 2021 | <https://doi.org/10.1002/bdd.2274>

Vertical Dive (Example from Specific Areas)

More Mechanistic Sub-Models of Organs

Modern PBPK Models Can Contain Many Routes of Administration and Specifications for Each Organ:



PBPK/IVIVE: Breaking Down the Information to Enable Rebuilding Virtual Clinical Studies

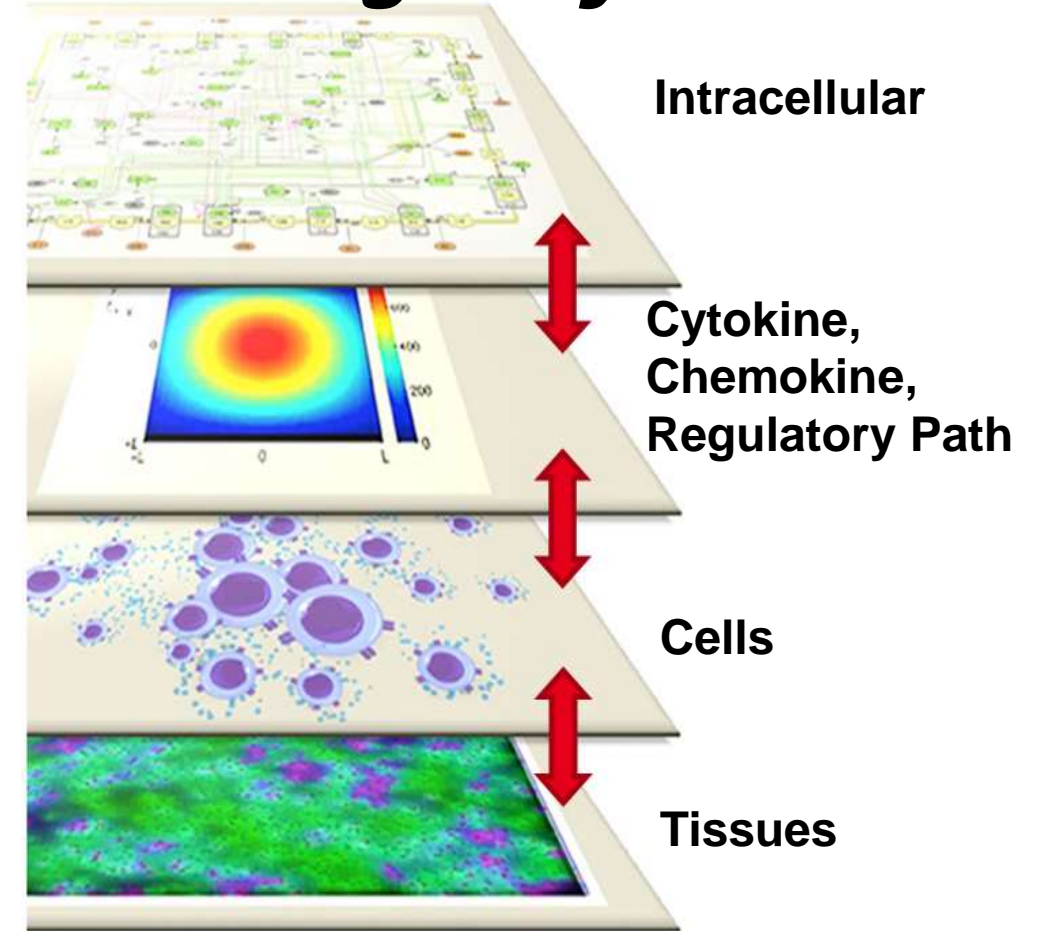
STATE OF THE ART

nature publishing group

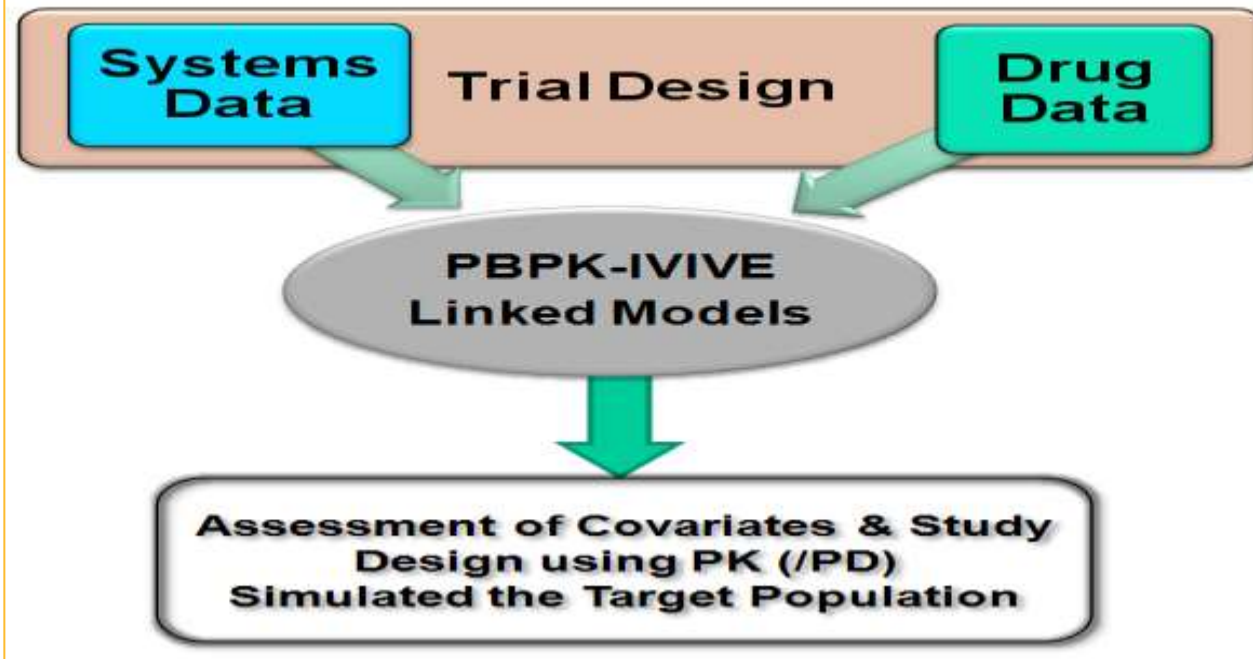
Physiologically Based Pharmacokinetics
Joined With *In Vitro*–*In Vivo* Extrapolation of
ADME: A Marriage Under the Arch of Systems
Pharmacology

A Rostami-Hodjegan^{1,2}

In Vitro Tools to Assess the Interplay of Drug & System



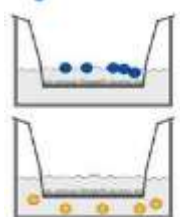
Schematic Representation of Workflow



Ability to Analyse Data and Obtain 'Intrinsic Parameters' (Dedicated In Vitro Data Analysis Tool are Required)

Say NO to Single Point Semi-Quantitative Measures

Influx – Sinusoidal (Passive and Active)
Efflux – Sinusoidal (Passive and Active)
Efflux – Canalicular



$$CL_{(t)} = -\frac{dM}{dt} \frac{1}{[S]_{(t)}}$$

Clearance

$$J_{(t)} = -\frac{dM}{dt}$$

Flux

$$P_{app} = -\frac{dM}{dt} \frac{1}{A [S]_{(t)}}$$



**Wave Goodbye to
A to B / B to A Ratio!**

Contents lists available at ScienceDirect

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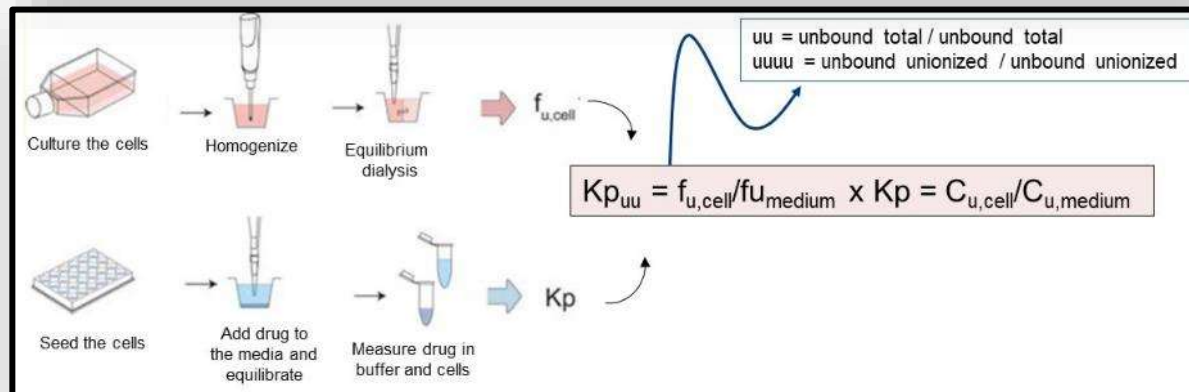
European Journal of Pharmaceutical Sciences

journal homepage: www.elsevier.com/locate/ejps

Examining P-gp efflux kinetics guided by the BDDCS – Rational selection of *in vitro* assay designs and mathematical models

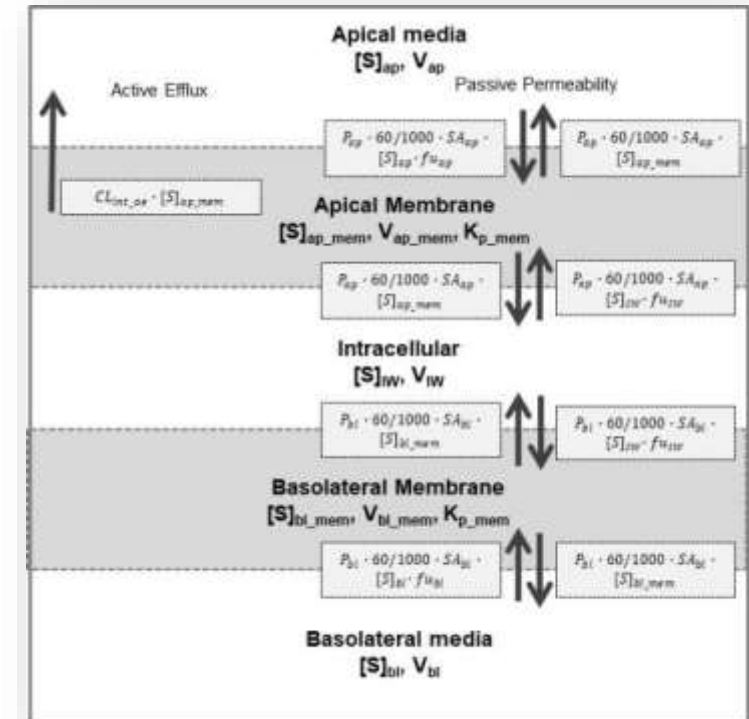
Julia Riede¹, Ken-Ichi Umehara¹, Patrick Schweigler, Felix Huth, Hilmar Schiller, Gian Camenisch, Birk Poller^{*}

¹Division of PK Sciences, Novartis Institutes for BioMedical Research, CH-4056 Basel, Switzerland



Green
=
Drug
Parameters

Blue
=
System
Parameters



Understanding the Interplay of Systems with the Excipients & Formulation

***in addition to
API
(Drug Itself)***



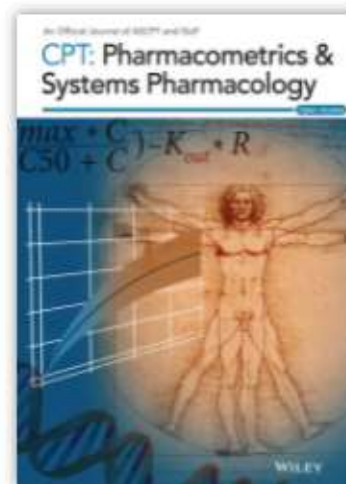
CPT: Pharmacometrics & Systems Pharmacology

ARTICLE | Open Access |

Excipient Knowledgebase: Development Of A Comprehensive Tool For Understanding The Disposition And Interaction Potential Of Common Excipients

Savannah J. McFeely, Jingjing Yu, Yan Wang, Cheryl Wu, Isabelle Ragueneau-Majlessi

First published: 08 June 2021 | <https://doi.org/10.1002/psp4.12668>



Accepted Articles

Accepted, unedited articles published online and citable. The final edited and typeset version of record will appear in the future.

Quantitative Proteomics of Clinically Relevant Drug-Metabolizing Enzymes and Drug Transporters and Their Intercorrelations in the Human Small Intestine^S

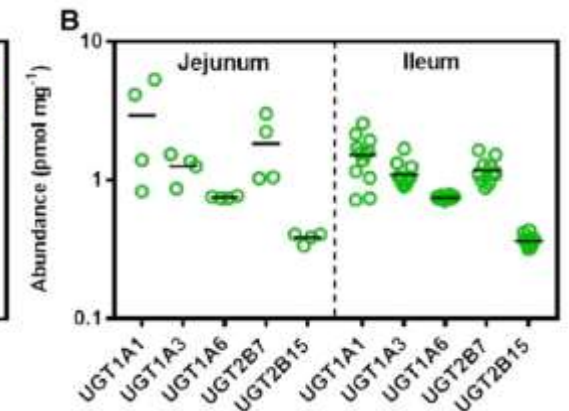
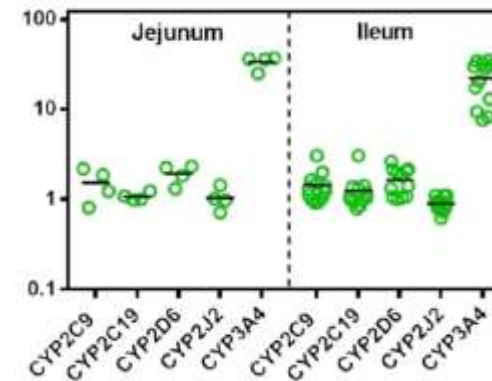
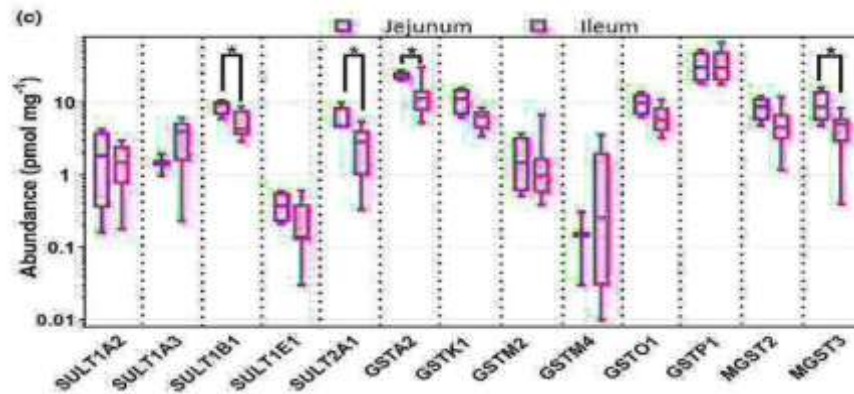
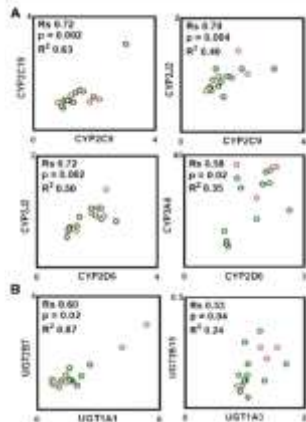
Narciso Couto, Zubida M. Al-Majdoub, Stephanie Gibson, Pamela J. Davies, Brahim Achour, Matthew D. Harwood, Gordon Carlson, Jill Barber, Amin Rostami-Hodjegan, and Geoffrey Warhurst

Drug Metabolism Disposition 2020

Quantification of Proteins Involved in Intestinal Epithelial Handling of Xenobiotics

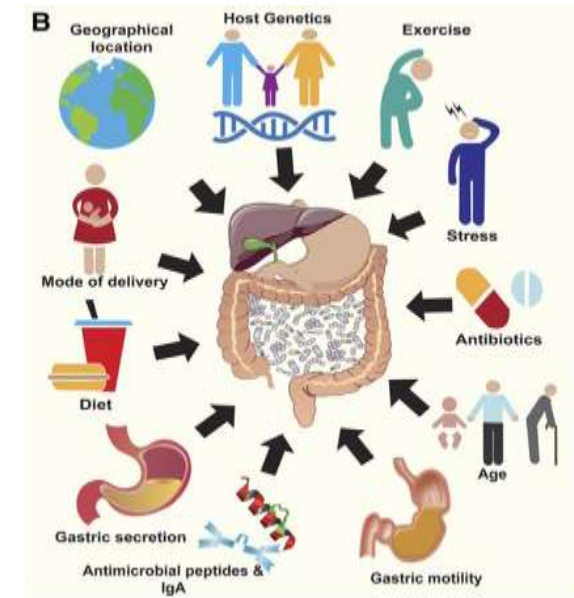
Zubida M. Al-Majdoub^{1*}, Narciso Couto¹, Brahim Achour¹, Matthew D. Harwood², Gordon Carlson³, Geoffrey Warhurst³, Jill Barber¹ and Amin Rostami-Hodjegan^{1,2}

Clin Pharmacol Ther 2020



Robust Mechanistic M&S Requires Systems Data!

Protein Abundance & Inter-Correlations in Health & Disease



Yes, Robust Mechanistic M&S Requires Systems Data!
Protein Abundance & Inter-Correlations in Health & Disease
BUT

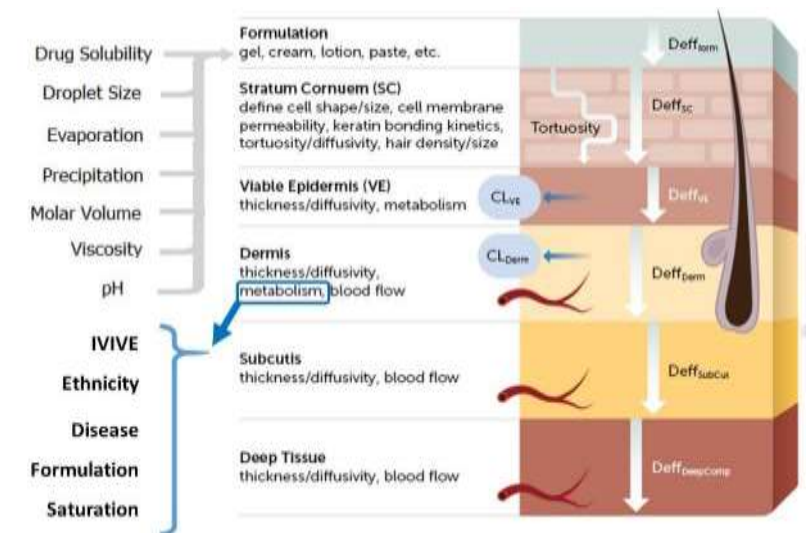
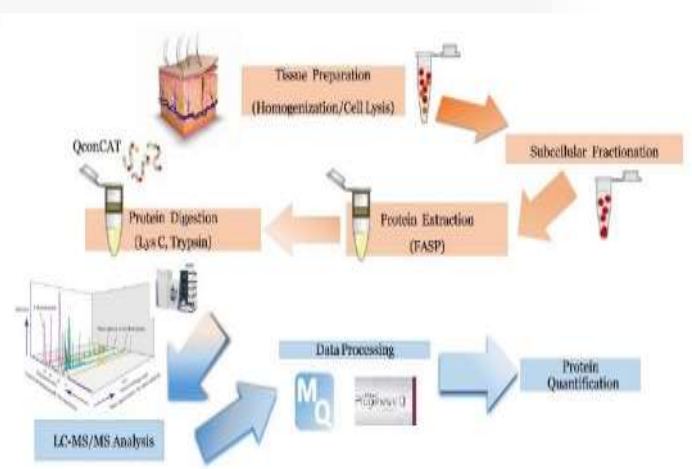
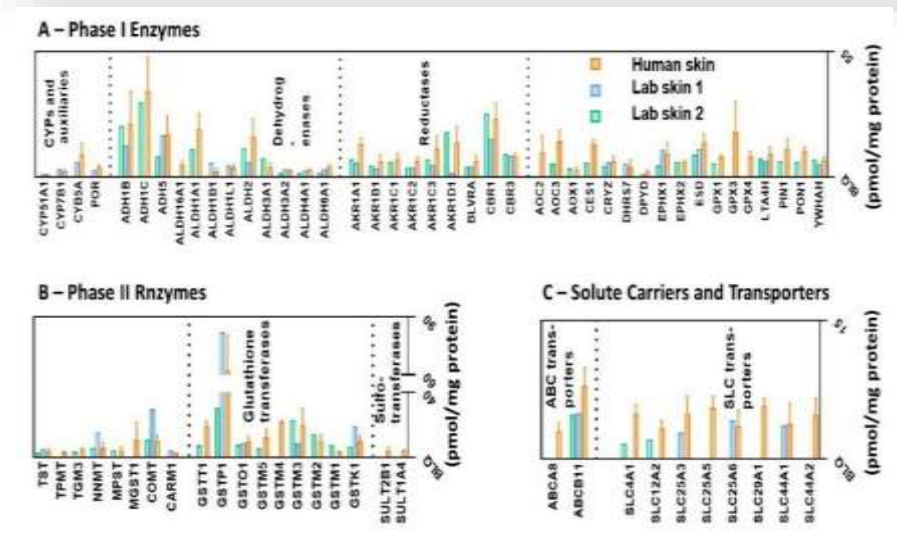
Such Details Are
SPARSE
for
Non-Oral Routes of
Administration

1521-009X/49/1/39-52\$35.00
DRUG METABOLISM AND DISPOSITION
Copyright © 2020 by The American Society for Pharmacology and Experimental Therapeutics

https://doi.org/10.1124/dmd.120.000168
Drug Metab Dispos 49:39-52, January 2021

Label-Free Quantitative Proteomics and Substrate-Based Mass Spectrometry Imaging of Xenobiotic Metabolizing Enzymes in Ex Vivo Human Skin and a Human Living Skin Equivalent Model

Narciso Couto, Jillian R.A. Newton, Cristina Russo, Esther Karunakaran, Brahim Achour, Zubida M. Al-Majdoub, James Sidaway, Amin Rostami-Hodjegan, Malcolm R. Clench, and Jill Barber





FY 2020 Generic Drug Regulatory Science Initiatives Public Workshop, May 4th 2020

**Physiologically-based pharmacokinetic modeling to support
bioequivalence and approval of generic products: A case for
diclofenac sodium topical gel, 1%**

Eleftheria Tsakalozou | Andrew Babiskin | Liang Zhao


CPT Pharmacometrics Syst. Pharmacol. 2021

On A More Positive Note:

***The Vision by the Regulatory Agency,
the Encouragement from Case
Examples, and a Similar Path to Novel
Ways for Establishing BE Are in Place:***

Welcome to the V-BE World!

Research Highlight



Physiologically-based pharmacokinetic modeling supported approval of a locally acting drug based on an efficient alternative bioequivalence approach.

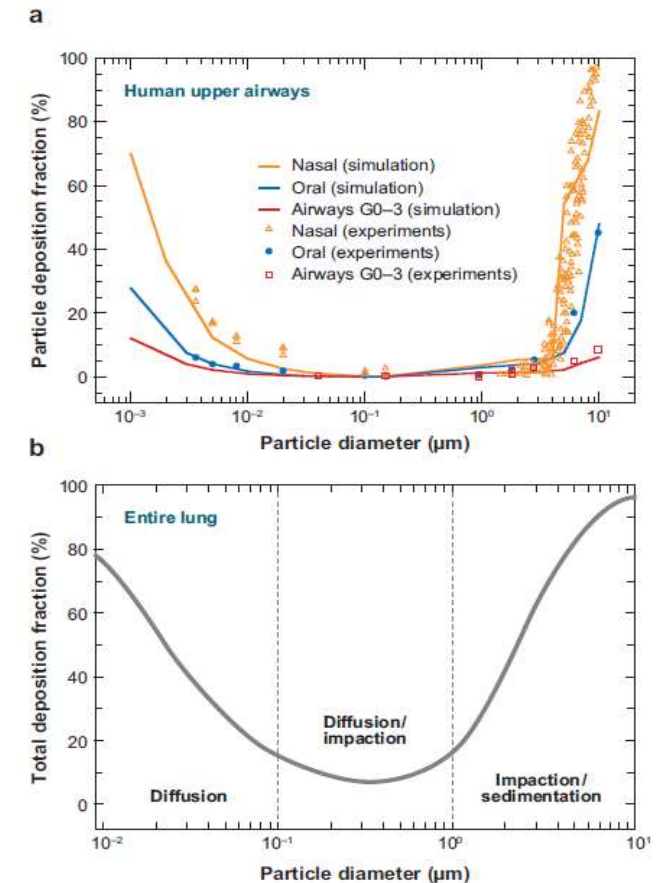
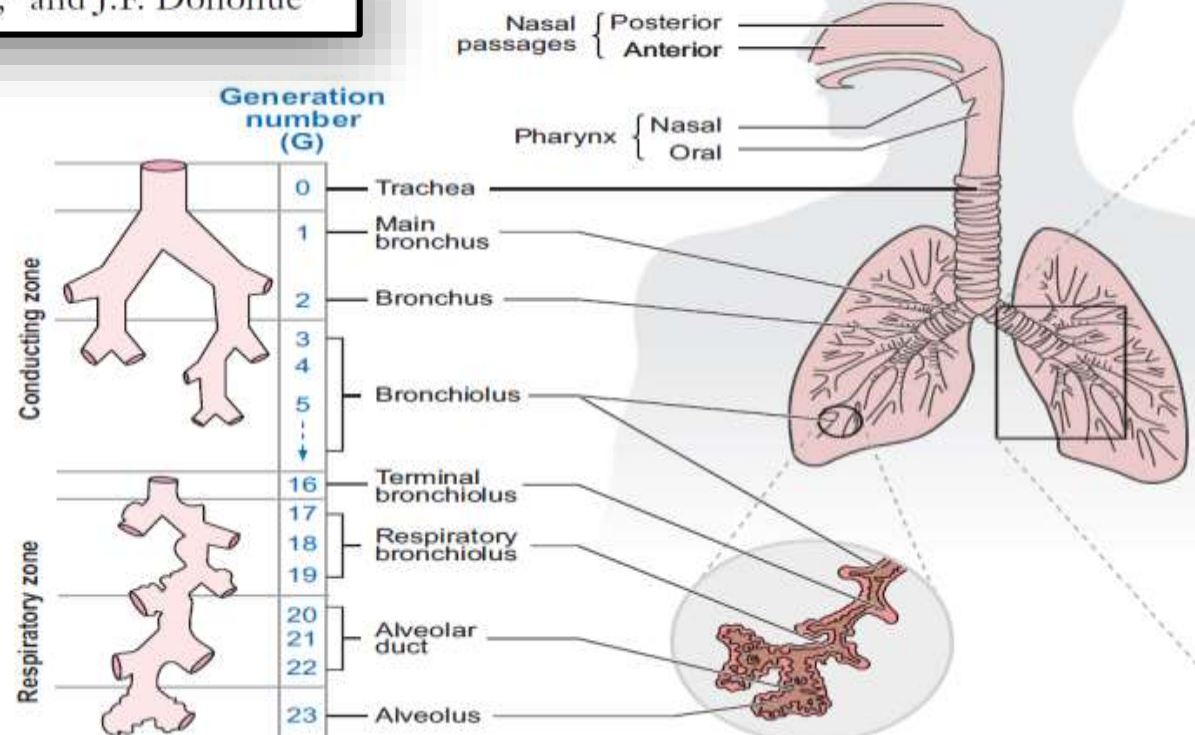
What About Other Routes of Administration:

NOT Short of Models: Well Established But

Targeted Drug-Aerosol Delivery in the Human Respiratory System

C. Kleinstreuer,¹ Z. Zhang,² and J.F. Donohue³

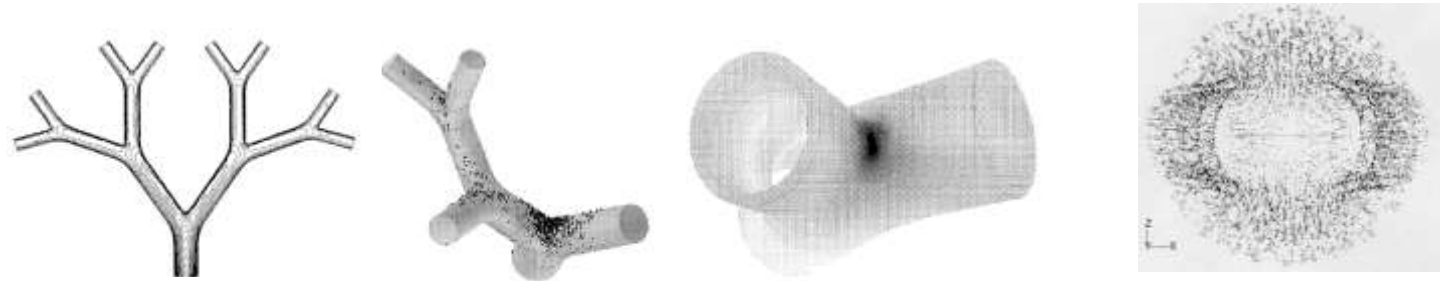
***Annul Rev.
Biomed. Eng.
(2008)
10:195–220***



..... Short of Systems Data (in Health & Disease)/ Integration/Verification/Consensus/User-Friendly Tool

Computational Fluid Dynamics (CFD) Models

There are many CFD models for pulmonary drug deposition of inhaled particles. However, there are not sets of agreed physiological parameters to go with such models.



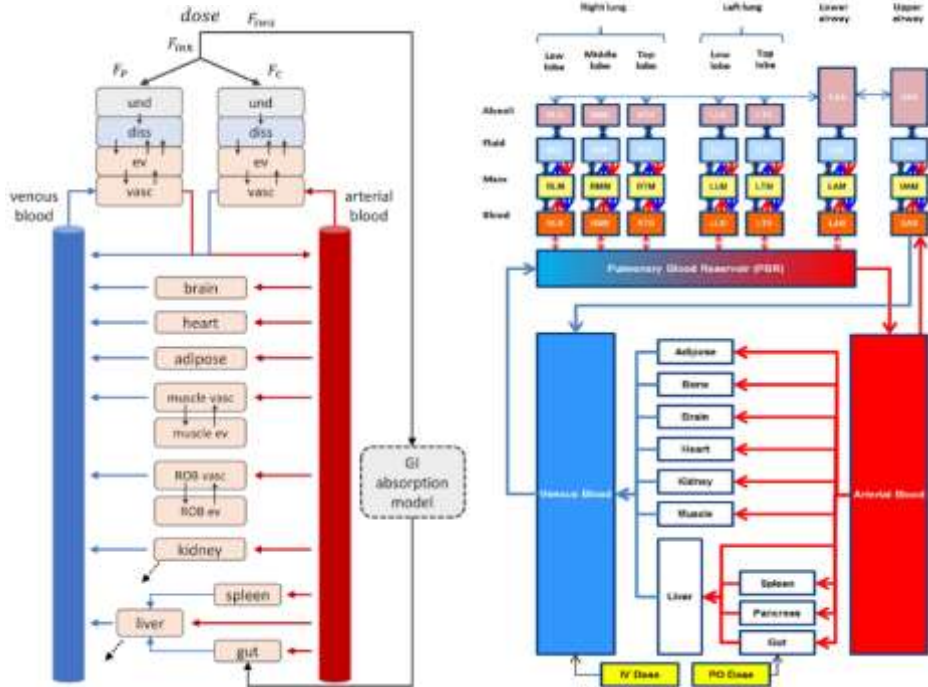
The FLUENT CFD Package (2003) Fluent Europe Co., Ltd Sheffield, UK

Bala'sha'zy et al. *Radiation Protection Dosimetry* 105 (1–4). 129–132 (2003)

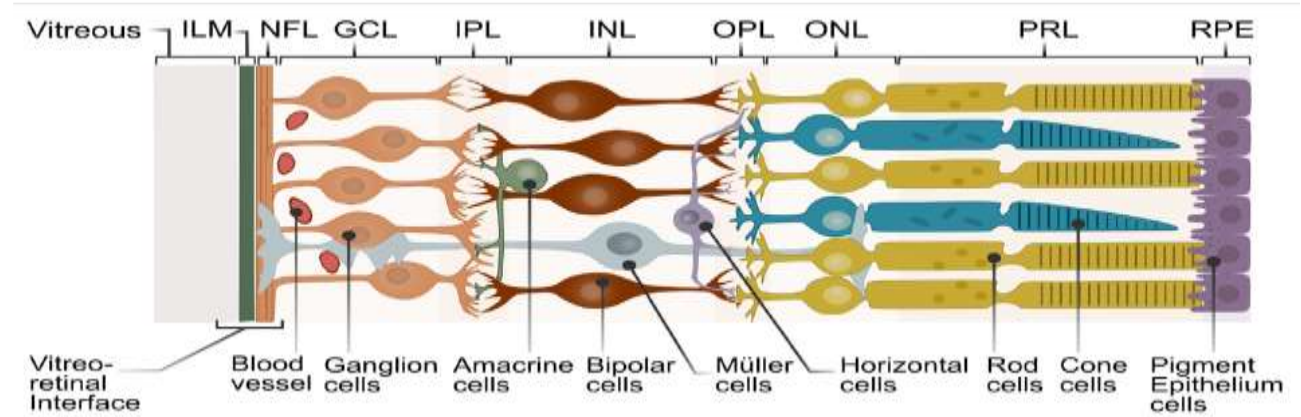
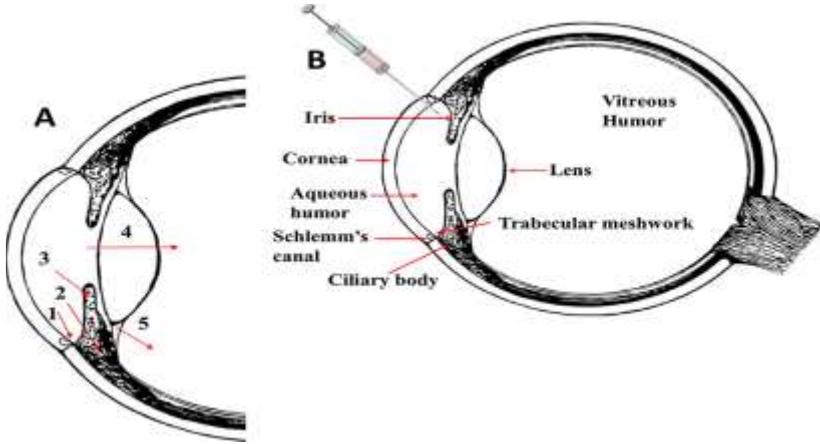
Integrating Pulmonary Drug Deposition with Local Drug Disposition

CFD Should Joins Forces with PBPK

PBPK models for pulmonary administration (e.g. Gaohua et al, 2015) consider the permeability-limited aspects where formulation effects can be accounted for. They also consider inter-correlations of system parameters to simulate true population variability better. However, biological values of human transporters and enzymes in the lung tissue are missing and CFD models are rarely integrated with PBPK models.



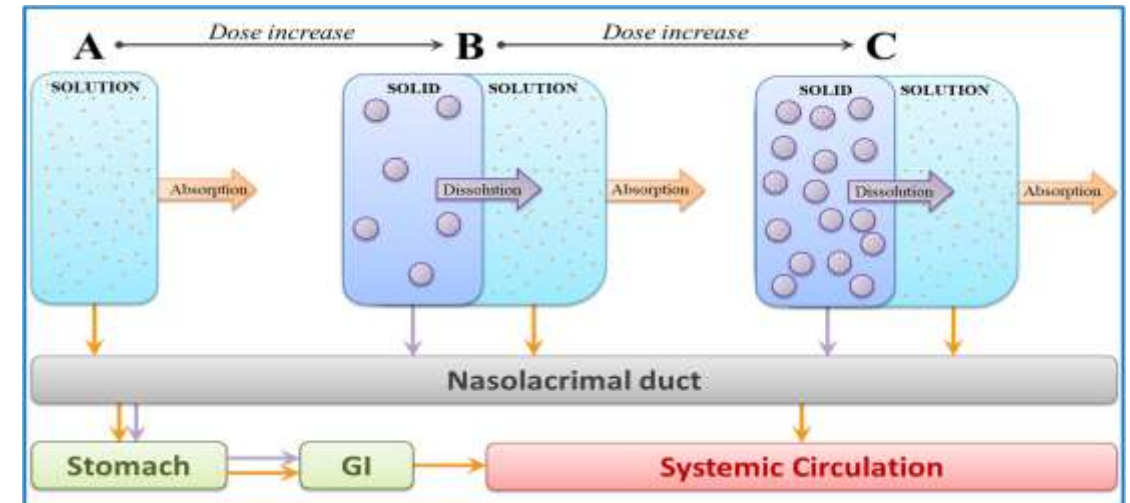
.... the Same Story: Short of Systems Data (in Health & Disease)/Integration/Verification/ Consensus/Options for User-Friendly Tool!



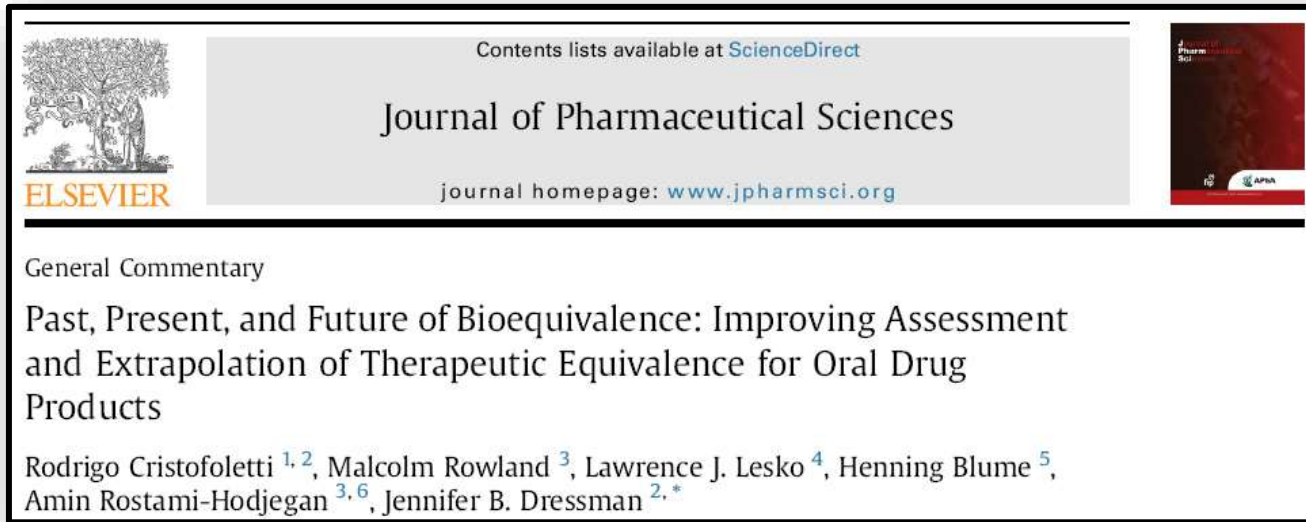
Ocular Drug Disposition

Intracameral injection involves multi-step clearance (Fayyaz et al, 2020), with vitreous and vitreoretinal barriers (Tavakoli et al 2020), all poorly understood.

Models for topical administration consider many non-linearity issues related to dose and rate of absorption (Le Merdy et al, 2020b). However, these models do not consider any local metabolism or transporter-mediated efflux or uptake and formulation impact on these.



Biopharmaceutics Work Bench: Last Stop for VBE

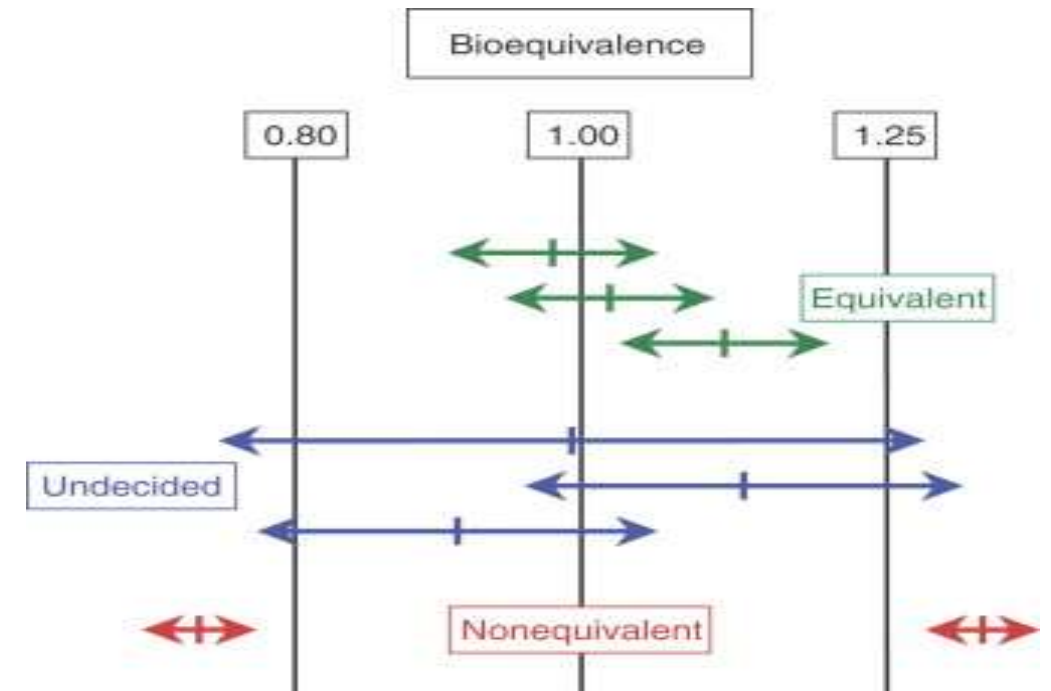


J Pharm Sci 2019



June 2021

Virtual Bioequivalence (VBE) & Inter-Occasion/Within-Subject (IOV/WSV)



Finding IOV/WSV Combinations of Physiological Parameters which are INCOMPATIBLE with Observed IOV/WSV of PK

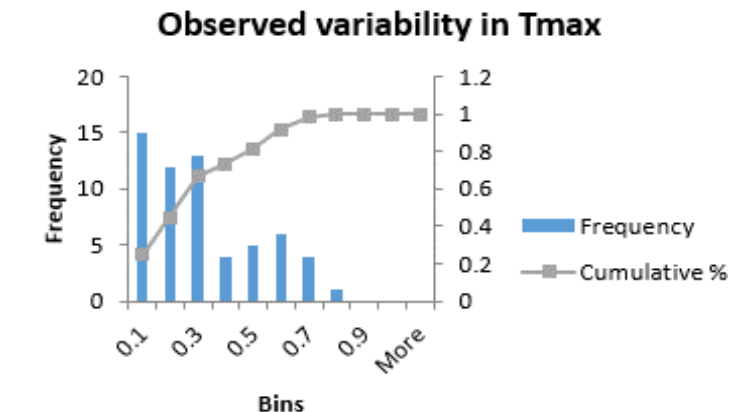
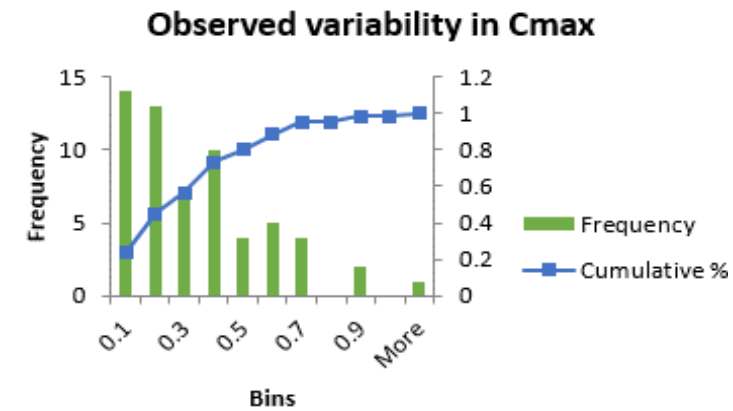
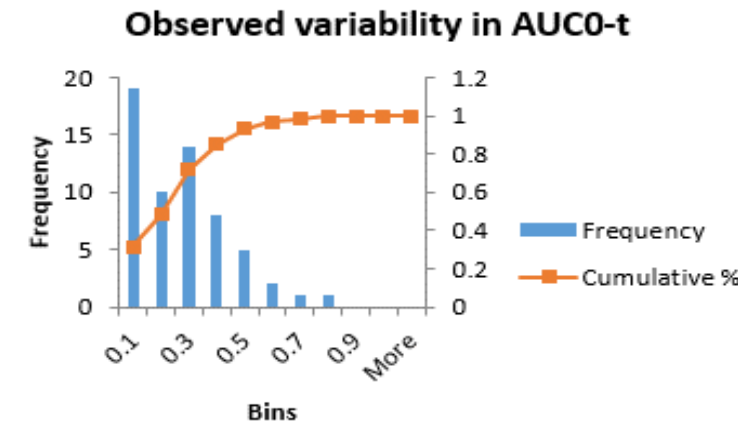
Parameters investigated/ Sensitive PK parameters	Cmax	Tmax	AUC
Initial volume of stomach fluid	Yes ↑	Yes ↓	Yes ↑
Stomach pH	No	No	No
Duodenum pH	Yes ↑	Yes ↓	Yes ↑
Jejunum I pH	Yes ↑	Yes ↓	Yes ↑
Jejunum II pH	Yes ↑	Yes ↓	Yes ↑
Stomach MRT	Yes ↓	Yes ↑	Yes ↓
Small intestine MRT	Yes ↑	Yes ↑	Yes ↑
Colon MRT*	No	No	Yes ↑
IMMC Cycle time	No	No	No
Duodenum bile salts level	No	No	No
Jejunum I bile salts level	Yes ↑	Yes ↓	Yes ↑
Jejunum II bile salts level	Yes ↑	Yes ↓	Yes ↑
Duodenum bicarbonate level	No	No	No
Jejunum I bicarbonate level	No	No	No
Jejunum II bicarbonate level	No	No	No

- slight changes in Cmax and Tmax, not deemed relevant

- Arrows show direction of change with an increase of the GI parameter value

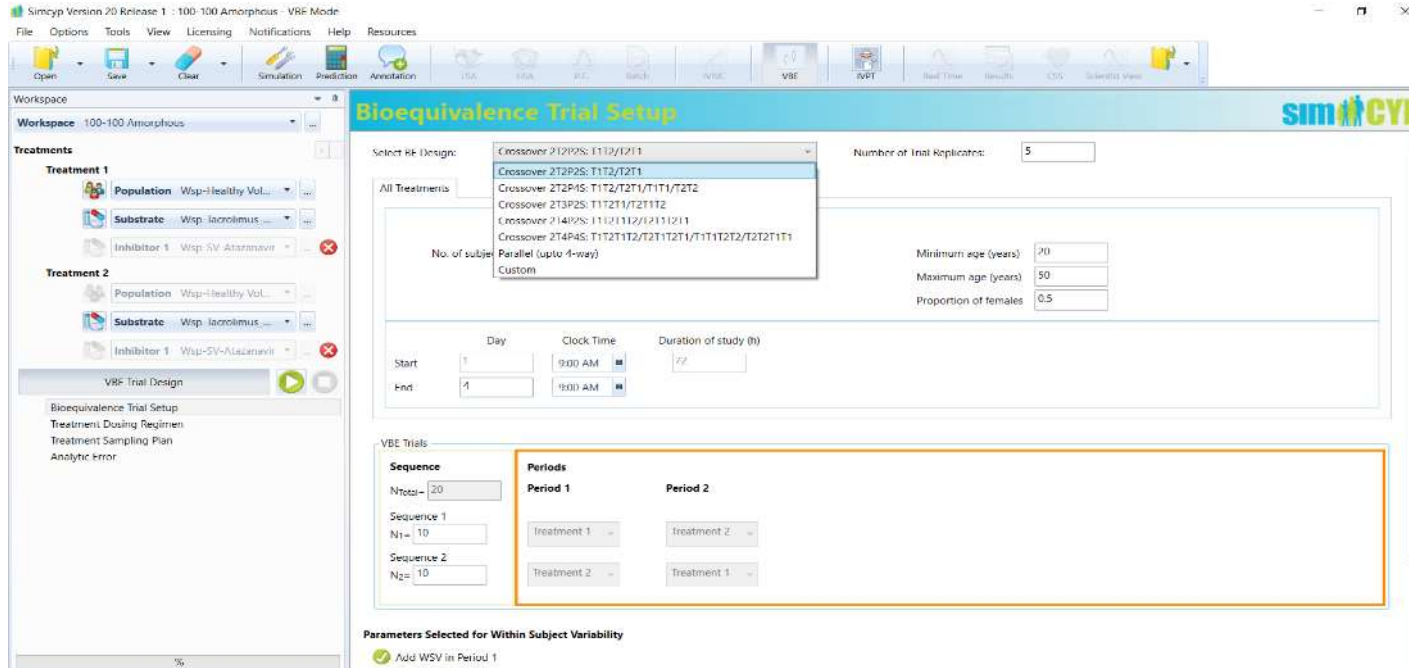
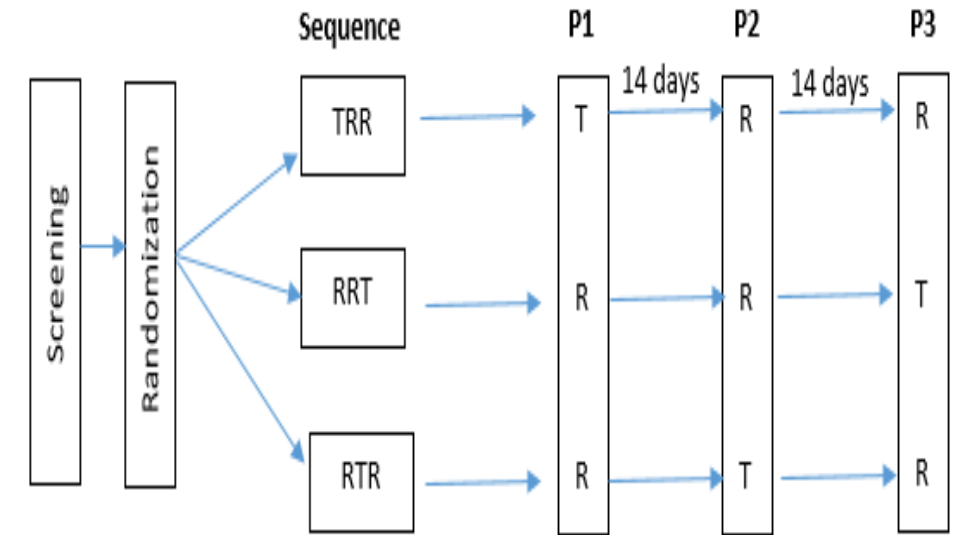
Observed vs Predicted Distributions (AUC, Cmax and Tmax) (Kolmogorov-Smirnov Test)						
COMB	D statistic AUC	Similarity (Y/N)	D statistic Cmax	Similarity (Y/N)	D statistic Tmax	Similarity (Y/N)
(default)	0.350	No	0.417	No	0.200	Yes
24-1	0.200	Yes	0.217	Yes	0.150	Yes
24-2	0.167	Yes	0.150	Yes	0.217	Yes
24-3	0.367	No	0.367	No	0.217	Yes
24-4	0.133	Yes	0.200	Yes	0.133	Yes
24-5	0.267	No	0.317	No	0.183	Yes
24-6	0.183	Yes	0.250	No	0.167	Yes
24-7	0.217	Yes	0.167	Yes	0.133	Yes
24-8	0.167	Yes	0.167	Yes	0.183	Yes
24-9	0.233	Yes	0.317	No	0.200	Yes
24-10	0.217	Yes	0.233	Yes	0.183	Yes
24-11	0.200	Yes	0.183	Yes	0.133	Yes
24-12	0.300	No	0.250	No	0.133	Yes
24-13	0.317	No	0.333	No	0.217	Yes
24-14	0.133	Yes	0.167	Yes	0.217	Yes

Two-sample KS:
 $p\text{-value} > 0.05$ = null hypothesis cannot be rejected (two samples follow the same distribution);
 $p\text{-value} < 0.05$ = null hypothesis should be rejected (the distributions of two samples are different);
Hence, highlighted cells – IOV Model Not Supported



The Gold Mine of RTR Studies (Reference-Test-Reference Cross-Over BE)

**FDA DATABASE OF VARIOUS DRUGS
and
VARIOUS FORMULATIONS
to
Gaining Insight into
DRUG- & FORMULATION-INDEPENDENT
IOV/WSV of the Physiology and Biology!**



**These Can be Incorporated
to
ANY User-Friendly
M&S Tools
Specifically Built
for
VBE
(Instead of Arbitrary IOV/WSV)**



Summary Points (in 1 Minute)

1. **CONSENSUS** on Existing Selection of Models for Scale Up and Routine Use
2. **INTEGRATION** of More Systems Data to Platforms from 'Open Data Initiatives'
3. **MODELLING** *In Vitro* Experimental Data & Taking the Outputs as Input for Quantitative VBE Models
4. **INCENTIVES** by Publicising Accepted Robust/Verified Models to Increase Wider Use and Show Reduced Risk
5. **REVERSE TRANSLATION** of Historic Clinical Data for Obtaining IOV/WSV of Physiology & Using Bayesian Fitting as Part of Common Mechanistic M&S VBE Tools
6. **ALLOW** Occasional Off-the-Main Road M&S by F1 Drivers Exploring Knowledge Gaps & New Limits
7. **DEFINE** Guides (SOP's) & Licences for Established M&S Tools by Drivers Who Are on the Main Road

Thanks for Listening

Questions?

