



Establishment & Implementation of the Process Control Strategy: The Unique Challenges for Cell Therapy Products

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The Knowledge Doubling Curve "Before the 20th century, human knowledge doubled every century. By the 1950s, it doubled every 25 years. Today, it is doubling about every 13 months."





• Source: Thoughts on the future of human knowledge and machine intelligence - London School of Economics and Political Science





Brief Intro to Cell Therapies (ATMPs)

Define Process Validation Lifecycle

Risk-Based Approach to Development

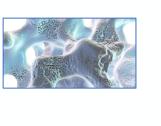
Unique Challenges for Cell Therapies



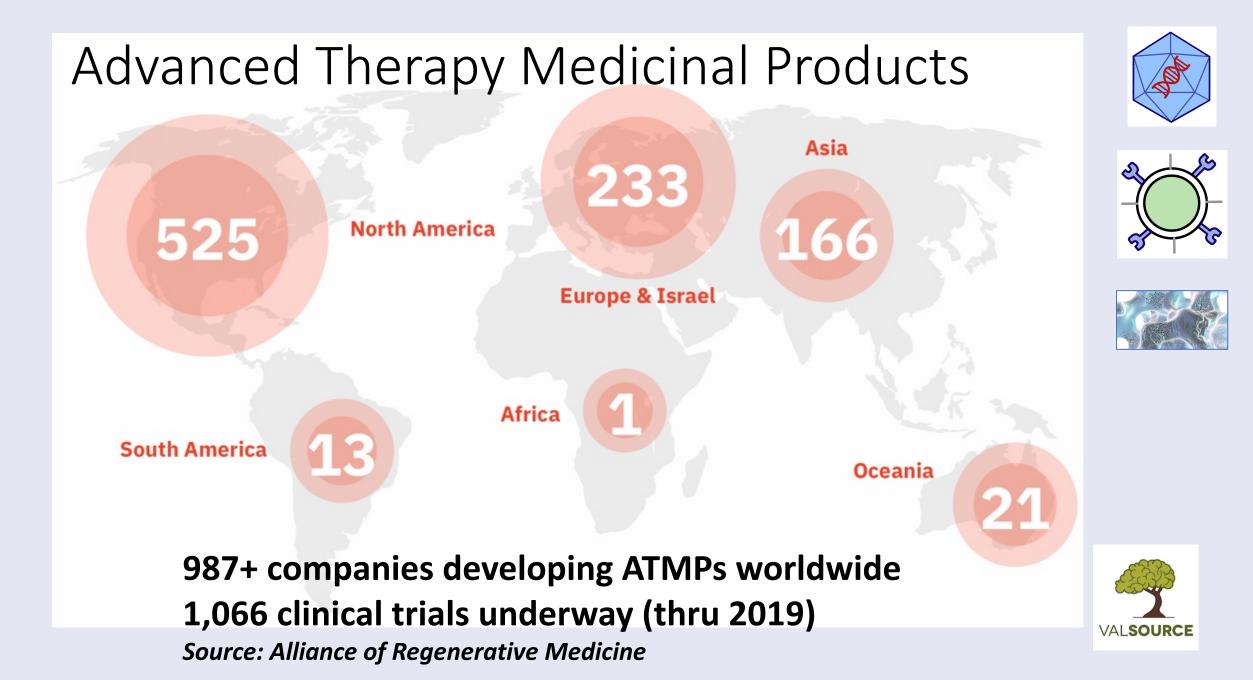


- Vector Based Gene Therapy Medicinal Products: healthy gene is packaged within a delivery system (a "vector") that is administered to patient leading to a therapeutic, prophylactic, or diagnostic effect.
- Cell Based Advanced Therapy Medicinal Products: contain cells that have been manipulated to change their biological characteristics or cells not intended to be used for the same essential functions in the body.
- Tissue-engineered products: contain cells or tissues that have been modified so they can be used to repair, regenerate, or replace human tissue

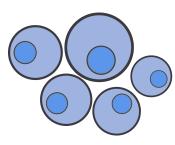




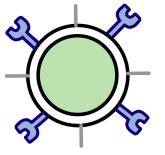




Advanced Therapy Medicinal Products



Cell-based therapies are **autologous**, **allogeneic**, **or xenogeneic** cells that have been propagated, expanded, selected, pharmacologically treated, or otherwise altered in biological characteristics *ex vivo* to be administered to humans and applicable to the prevention, cure, diagnosis, or mitigation of disease or injuries.



Autologous: cells derived from the same individual (same donor and recipient)

Allogeneic: cells derived from a donor intended for use in another person (different donor and recipient)

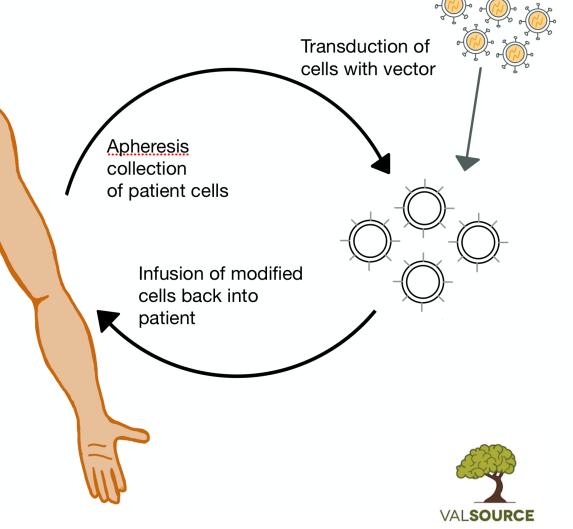
Xenogeneic: cells derived from an animal source



Engineered Cell-Based Therapies

Ex-vivo Autologous Cell-Based Therapies

- T cells obtained from patient by apheresis
- Ex vivo transduction with a vector carrying gene to equip the new T cell receptor
- Cells are then expanded to target a dose and then re-infused back into the same patient.
- Choose an optimal target for each patient's tumor and distinct types of T cells to engineer to further personalize to the individual.



Engineered Cell-Based Therapies

Ex-vivo Autologous Cell Therapy products approved by the FDA:

Kymriah (tisagenlecleucel) – Novartis Approved in 2017 by FDA Treatment of patients up to 25 years age for r/r B-cell acute lymphoblastic leukemia

Yescarta (axicabtagene ciloleucel) – Kite Pharma (Gilead) Approved in 2017 by FDA Treatment for adult patients with relapsed, refractory diffuse large B-cell lymphoma (DLBCL) and primary mediastinal large B-cell lymphoma

Zynteglo (Autologous CD34+ cells encoding B^{A-T87Q}-globin gene) – Bluebird bio -- Approved in 2019 by FDA Treatment for B-thalassaemia (TDT) = patients cannot make enough haemoglobin thus are anemic (patient age: 12 years and older)



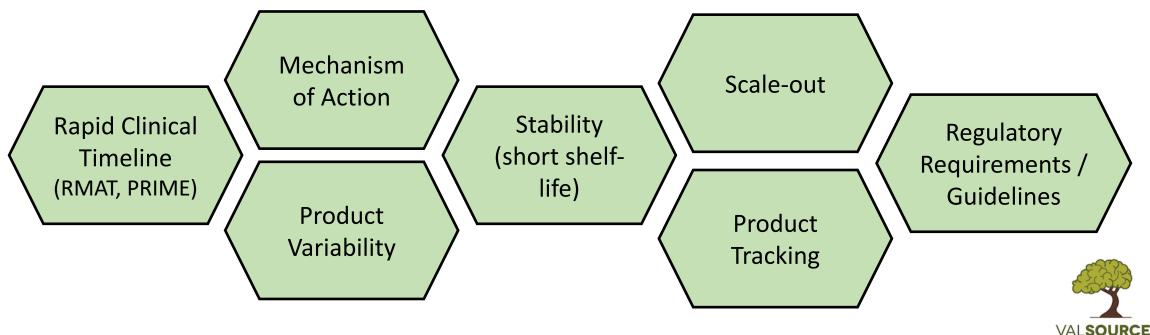


(autologous CD34⁺ cells encoding β^{A-TB70} -globin ge VALSOURCE

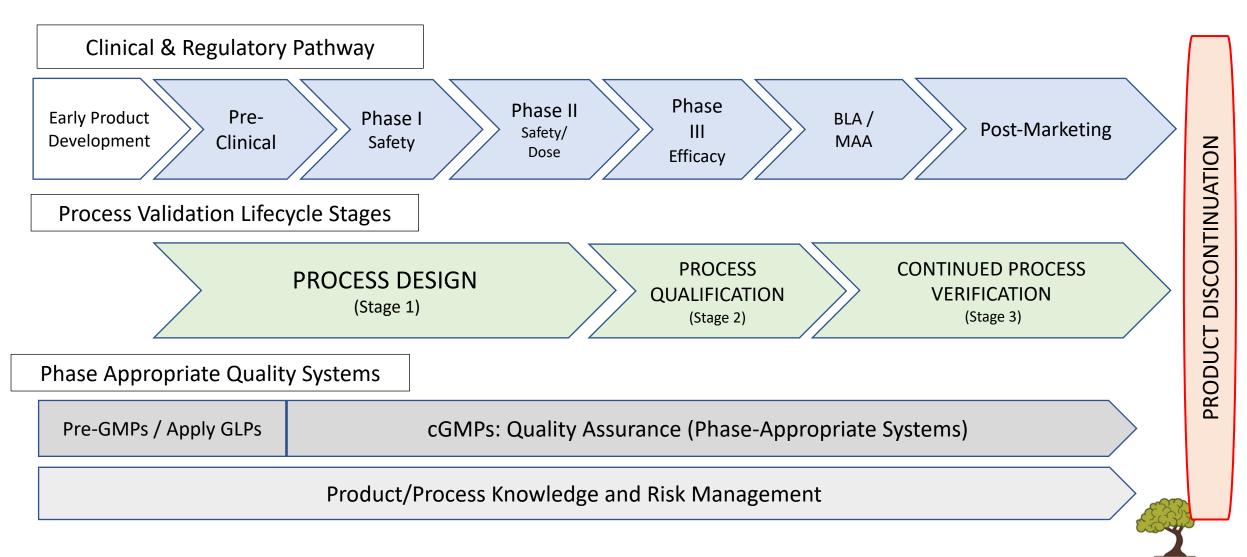
Engineered Cell-Based Therapies

Unique Challenges for Development of Cell Therapies

"In manufacturing, they need to focus on producing quality products by design in scalable processes, so that if early clinical trials are promising, they can advance development rapidly." -- Peter Marks, Director CBER at US FDA



The Product & Process Lifecycle



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Product & Process Lifecycle Approach



<u>Stage #1: Process Design</u> Process and product knowledge are explored to establish a control strategy for manufacture. The product control strategy is defined. Stage #2: Process Qualification Stage 2A is the qualification of GMP manufacturing systems (facility/utilities/equipment); Stage 2B is the Process Performance Qualification (PPQ) based on the process control strategy.

Stage #3: Continued Process Verification

On-going monitoring of the process control strategy through the manufacture of commercial product lots. Continual process improvement based on monitoring.



Stage 1: Key Output is the "Process Control Strategy"

Product & Process Lifecycle Approach Benefits include...

- Organize important information for purposes of internal and regulatory communications
- Focus development, characterization and robustness studies.
- Understanding which process steps and systems are critical and the scope of subsequent qualification activities for commercialization.
- Understand Regulatory requirements (FDA, EMA, RoW).
- Manufacturing tech transfer to CMOs and support process changes.
- Clear understanding of raw materials impact on product quality.

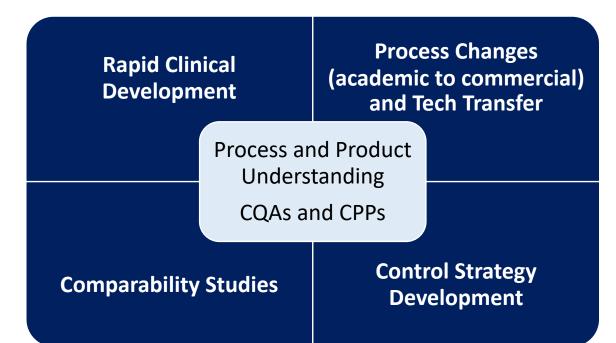


Product & Process Lifecycle Approach LIFECYCLE APPROACH TO PRODUCT AND PROCESS UNDERSTANDING Correlative Analysis of Utilize key information from Research Patient each stage of product Samples development to better inform CMC decisions Understand the desired characteristics of the product (e.g., phenotypic, functional) GMP **Product & Process** Link those characteristics to Manufacturing Understanding process parameters and enable a robust control strategy to deliver them consistently Process VAI **Source** Development

Product & Process Lifeycle Approach

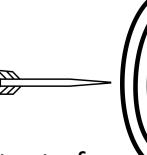
KEY CHALLENGES & CONSIDERATIONS FOR CELL THERAPIES:

- Rapid clinical development and multiple process changes drive the requirement for enhanced process and product understanding
- Multi-functional teams required (Process and Analytical Development, Manufacturing, QA, Regulatory, Research, Clinical, Pre-clinical, etc...)





Target Product Profile (TPP)



- A strategic development tool that provides a statement of the overall intent of the drug development program, and gives information about the drug at a particular time in development [FDA Draft Guidance 2007]
- Used to facilitate a common vision across all disciplines in order to guide the development, conduct, and analysis of clinical trials by focusing on strategic product label claims and to maximize the efficiency of the development program.
- The TPP should be developed at the initiation of product development by a cross-functional team and changes as knowledge of the drug increases.
 - The TPP embodies the notion of "beginning with the goal in mind"



Target Product Profile (TPP)

Examples of the various aspects of a TPP and considerations for Cell Therapies

Product Aspect	General considerations
Therapeutic Indication	Identify the therapeutic indication (e.g., genetic blood disorder, neurodegenerative, cancer)
Target Patient Population	Determine the patient population, population size, and clinical trial design
Product Classification	Establish type of regenerative therapy (in-vivo viral vector, ex vivo transduced cells) and
	consider potential GMO regulatory implications
Cell Source	Identify the source of the cells that constitute the final product (e.g., leukapheresis, tissue
	biopsy)
Dosage Form	Form of the dose that the patient receives (e.g., liquid suspension, frozen, cryo-frozen)
Mode of Action	Identify the biochemical interaction through which the drug produces a pharmacological
	effect
Route of Administration	How the patient receives the product (e.g., IV infusion, injectable, implantation)
Dosage and Regimen	Measure of the product received by the patient, (e,g, mass, volume) and frequency of dosage
	(e.g., single administration, weekly, monthly) – dose escalation studies
Market Scale & Demographics	Understand the scale of the market and what geographical market or patient population will
	be targeted

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Quality Target Product Profile (QTPP)

- A prospective summary of the quality characteristics of a drug product that ideally will be achieved to ensure the desired quality, taking into account safety and efficacy. [ICH Q8(R2)]
- Tactical implementation of the strategic vision outlined in the TPP. Modified throughout the product lifecycle as knowledge of the drug increases.
- The QTPP describes the design criteria for the product.

"...the protection of the patient by managing the risk to quality should be considered of prime importance." [ICH Q9]



Quality Target Product Profile (QTPP)

Elements of the **QTPP** and corresponding general considerations for ATMPs

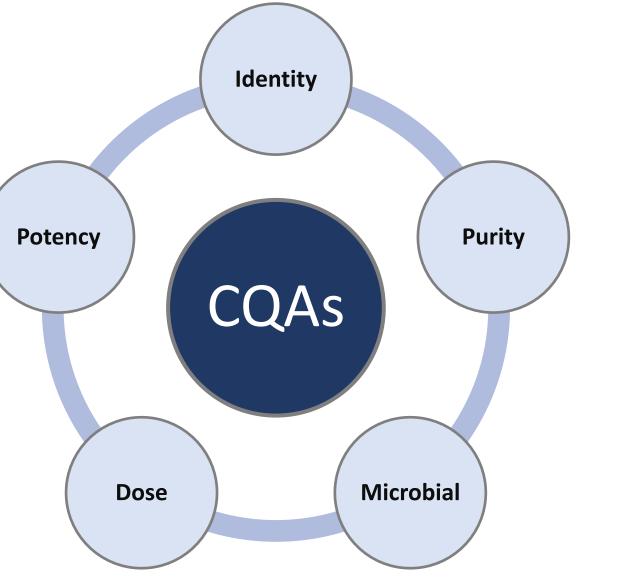
Aspect	General considerations
Dosage Form / Volume	Liquid suspension or tissue equivalent (i.e., delivered as mL product/kg patient weight).
per Dose	
Stability and storage	Description of the product storage conditions (e.g., temperature, equipment type) and maximum
conditions	duration (on-going stability studies). Many cell therapy products are cryopreserved.
Container Closure	Common primary containers for gene therapies may include vial, bag, sterile sealed container
Product attributes	Attributes related to the safety, efficacy, and quality of the product. These attributes are further assessed
	for level of criticality (determination of CQAs)
Safety	Microbial controls and testing based on the nature of the product (i.e., cell therapy products must be
	sterile for purposes of infusion)
Identity	Use of an analytical test to determine the chemical and biochemical identity of a material. (i.e.,
	phenotype, genotype, gene expression)
Dose / Content	Measure of the active product received by the patient, (i.e., viable cells or viable transduced cells)
Purity / Impurities	Tests to assess the purity of the product, considering the product (e.g., live cells, dead cells)



Critical Quality Attributes (CQA)

A **CQA** is a physical, chemical, biological, or microbiological property or characteristic that should be within an appropriate limit, range, or distribution to ensure the desired product **quality**.

What are the **CQAs** for a Cell Therapy Product???





Critical Quality Attributes (CQA)

Determination of the Criticality of a Product Attribute – Severity x Uncertainty

Assess the severity of harm and impact to patient of each attribute

Impact Assessment	Patient Safety / Immunogenecity	Efficacy / Potency
HIGH	Life threatening or irreversible adverse event	Significant potential to change the risk/benefit profile of the product
MEDIUM	Adverse event that can be managed by clinical treatment	Small potential for patient impact that does not change the overall risk/benefit profile for the product.
LOW	No patient harm	Marginal to no patient impact

Determine the current level of product knowledge for assigning criticality of each attribute

Uncertainty Assessment	Current level of product knowledge and clinical experience (uncertainty?)
HIGH	Limited scientific understanding of the attribute; limited in-house data and little to no clinical experience
MEDIUM	An understanding of the attribute based on scientific rationale with some in-house data available.
LOW	Extensive scientific literature and/or in-house data is available to clearly define the relation of the attribute to patient safety and efficiacy.



Critical Quality Attributes for ATMPs

Classification of product attributes using Impact x Uncertainty Matrix.

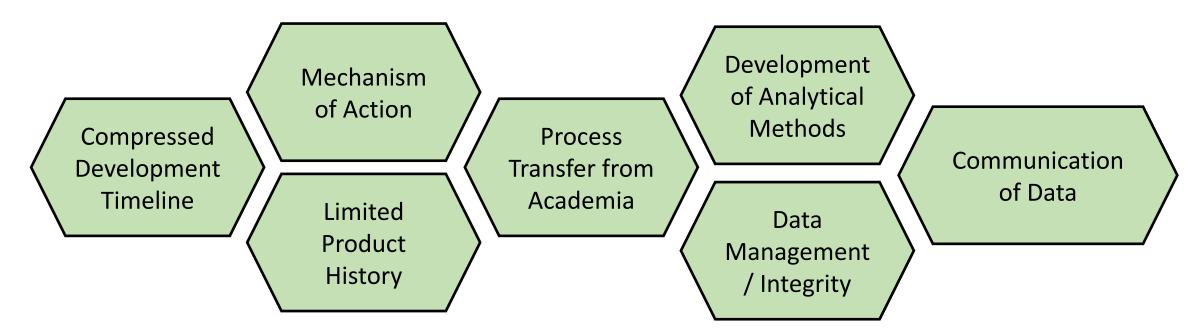
Impact (severity) and Uncertainty (level of product knowledge) are used to classify the criticality of the product attribute.

- CQA
- Potential CQA
- Non-CQA

	Uncertainty							
Impact / Severity	Low	Medium	High					
Low	Non-CQA	Non-CQA	CQA					
Medium	Potential CQA	Potential CQA	Potential CQA					
High	CQA	CQA	CQA					
		SIFRIIIY	rocess-related					

Critical Quality Attributes for Cell Therapies

Unique Challenges in Developing Product Profiles & CQAs



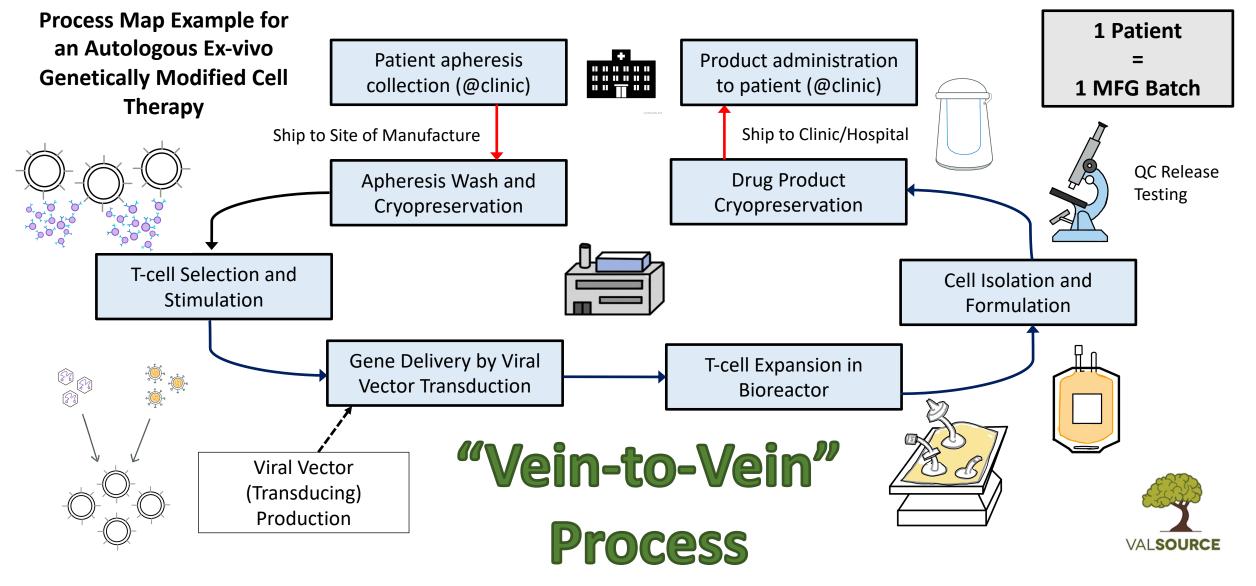
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Rapidly increasing Product Knowledge \rightarrow communication of process + analytical + clinical + translational data is so important!

Critical Quality Attributes (CQA) for ATMPs

Examples of Product Attributes that may be Critical for a Cell Therapy Product

ATTRIBUTE	DESCRIPTION
Dose/Strength	Based on number of transduced target cells (minimum percent transduction of cells)
Identity	Ensure the patient receives the correct drug product. Should include an assay to detect the presence of the intended genetic modification and an assay specific for the cell population
Appearance	Color, opalescence, visible foreign particulates (general safety concern for parenterals)
Potency (functional activity)	Activity of cell product based on cytotoxicity (target cell killing), secretion of cytokines / IFN-gamma (matrix of assays may be applied)
Cell viability (dead cells)	Low viability may be less efficacious, high number of dead cells may impact patient safety
Vector copy number (VCN)	High VCN has potential for oncogenesis (patient safety concern)
Replication competent retrovirus	Theoretical risk to patient safety due to replication of retroviruses
Product-related impurities	Other cell types, non-transduced cells, phenotypes, residual virus
Process-related impurities	Additives, selection agents, media components
Microbiological attributes (Safety)	Sterility, endotoxins, mycoplasma, adventitious viruses



List all **Process Variables** for each of the unit operations identified in the **Process Map.**

Categorize process variables as either:



Input variables: operational parameters that can be controlled or modified directly.

Identified as "Process parameters"



Output variables: dependent variables that are a result of the process.

 Identified as "Product quality attributes" or "Process performance attributes"



Assess the criticality of each of the Process Parameters

Critical or Not Critical???

- Define the link between the Process Parameter and the CQAs
- Ask how does the variability of the Process Parameter when operated within a range has the potential to impact a CQA?

IMPACT	CRITERIA
High potential	A small to moderate change in this process parameter has a significant impact on one or more CQAs
Moderate or unknown potential	A large change, or a small change in combination with other factors, could have a significant impact on a one or more CQAs
Low or negligible potential	The parameter has no impact any of the CQAs



Parameter Criticality Assessment for an Autologous Cell Therapy (Example)

Unit Operation – Cryopreservation of Cell Product [Initial Assessment]								
Parameter [Units]	CQA1 Gene Expression	CQA2 Potency	CQA3 Cell viability	CQA4 T cell composition	CQA5 Impurities (product- related)	CQA6 Impurities (process- related)	Criticality Classification	Rationale
Cell Concentration [x10 ⁹ viable cells/mL]							рСРР	Perform Process Character-
Cryoprotectant Concentration [%]							СРР	ization Studies and Determine
Exposure to Cryoprotectant [minutes]							СРР	Proven Acceptable range
Rate of Freeze [°C]							рСРР	

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Parameter Criticality Assessment for an Autologous Cell Therapy (Example)

Unit Operation -	– Cryop	reserva	ation of	f Cell Proc	duct [Fina	al Assess	ment]	
Parameter [Units]	CQA1 Gene Expression	CQA2 Potency	CQA3 Cell viability	CQA4 T cell composition	CQA5 Impurities (product- related)	CQA6 Impurities (process- related)	Criticality Classification	Rationale
Cell Concentration [x10 ⁹ viable cells/mL]							Non-CPP	Process Studies Support
Cryoprotectant Concentration [%]							СРР	Parameter Classification and PARs for
Exposure to Cryoprotectant [minutes]							СРР	Control Strategy
Rate of Freeze [°C]							Non-CPP	

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Process Capability Assessment

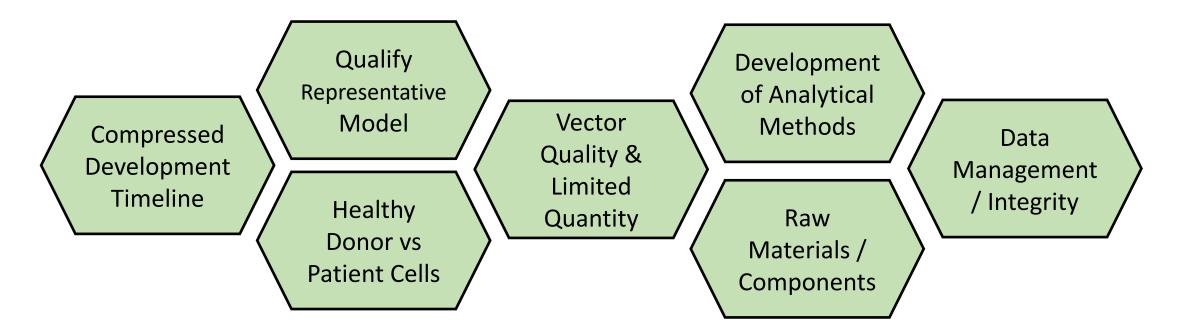
- Evaluate the ability to control and detect out-of-range process parameters.
- Determine how well the parameter is controlled Focus development/optimization

Occurrence	Rating (Score)		CRITERIA
(Likelihood) Scoring	Frequently	10	Parameter exceeding the acceptable range is likely to happen frequently. Manual activities with high error rates.
	Fairly frequently	7	Parameter exceeding the range fairly frequently; manual activities with moderate error rates,
	Fairly infrequently	4	Parameter exceeds range fairly infrequently; manual operations with low error rates
	Infrequently	1	Parameter not likely to exceed range; Negligible error rates
Detection	Rating (Score)		CRITERIA
	Rating (Score)		CRITERIA
Scoring	Impossible	10	Parameter out of range not detected prior to drug administration to patient
	Moderate	7	Parameter out of range can be detected during batch release
	Likely	4	Parameter out of range detected downstream / prior to final unit operation
	Highly Certain	1	Parameter out of range detected at step where remediation is possible

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SEVERITY x OCCURRENCE x DETECTION = Risk Priority Number

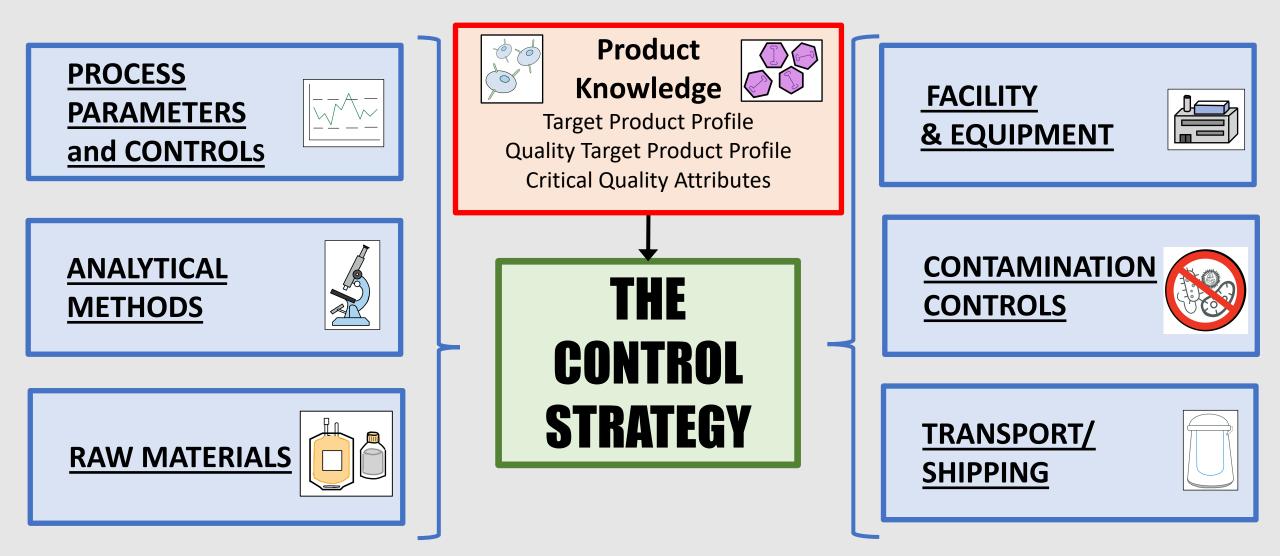
Unique Challenges for Development of the Process Control Strategy



"Mature" Process Control Strategy for successful PPQ / Commercial

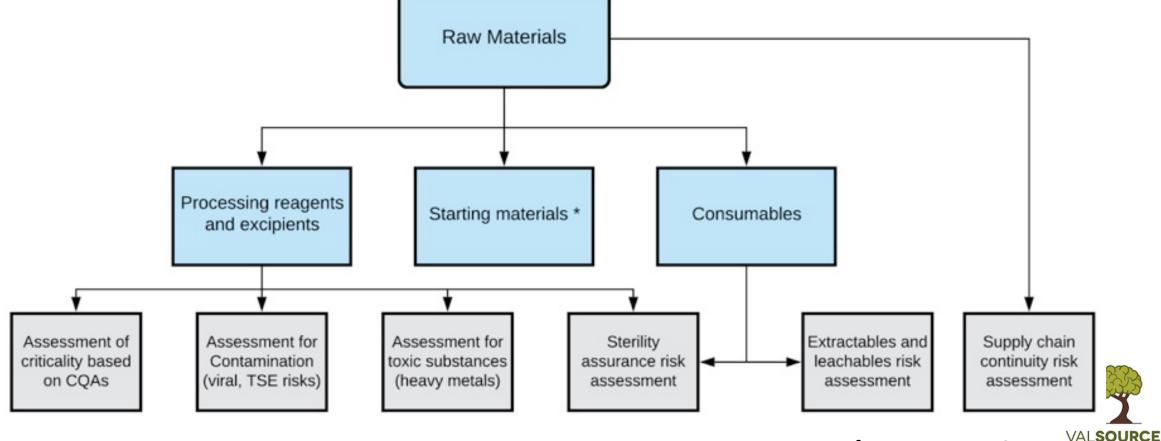


Elements of the Overall Control Strategy



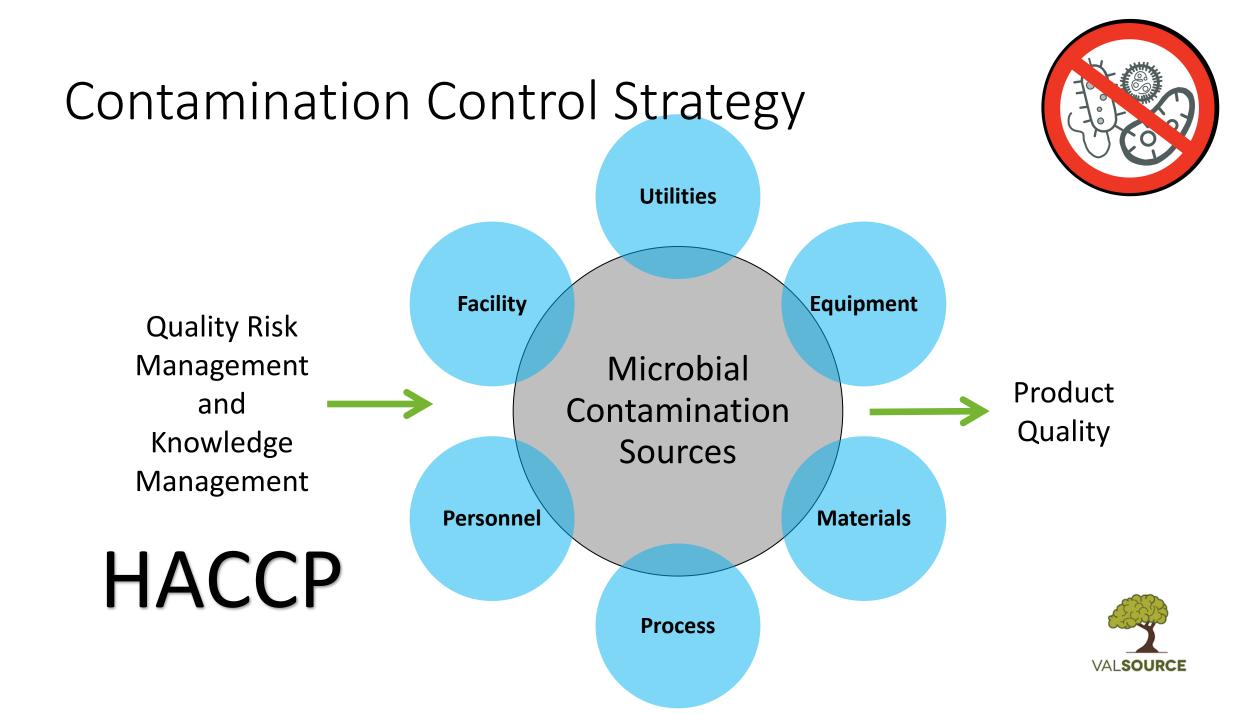
Raw Materials Control Strategy

Risk assessment is key to develop robust control and testing of raw materials used in the process!



Reference: PDA TR 81

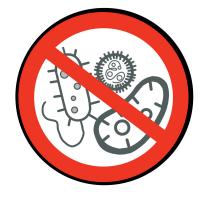




Contamination Control Strategy

Unique Challenges for Cell Therapy Products

- No terminal sterilization for cell-based products
- Aseptic manipulation of the product throughout the entirety of the manufacturing process
- Lack of dedicated viral inactivation / reduction steps
- Product segregation multiple products / patient lots / viral vectors concurrently manufactured
- One lot per one patient (autologous therapies) thus risk of a contaminated batch is higher severity for risk assessment







Analytical Methods Control Strategy

Lifecycle approach also applies to analytical procedures through method development, qualification/validation, and continued monitoring.

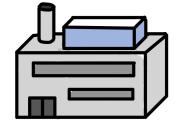
Analytical Development Challenges for an Autologous Cell Therapy

- Complexity, variability, and stability of living cell products
- Fast turnaround for release testing in order to meet individual patient needs
- Limited material (product in 1° containers) for analysis/retain/retest
- Product Comparability

CQA	Analytical Test
Safety	Replication competent virus, vector copy number, adventitious agents
Identity	Cell type/phenotype (Flow cytometry)
Dose	Cell concentration, transduced cell numbers
Purity	Other cell sub-populations, residual host cell DNA, percentage of dead cells
Potency	Cytokine profile, bioactivity, cell killing

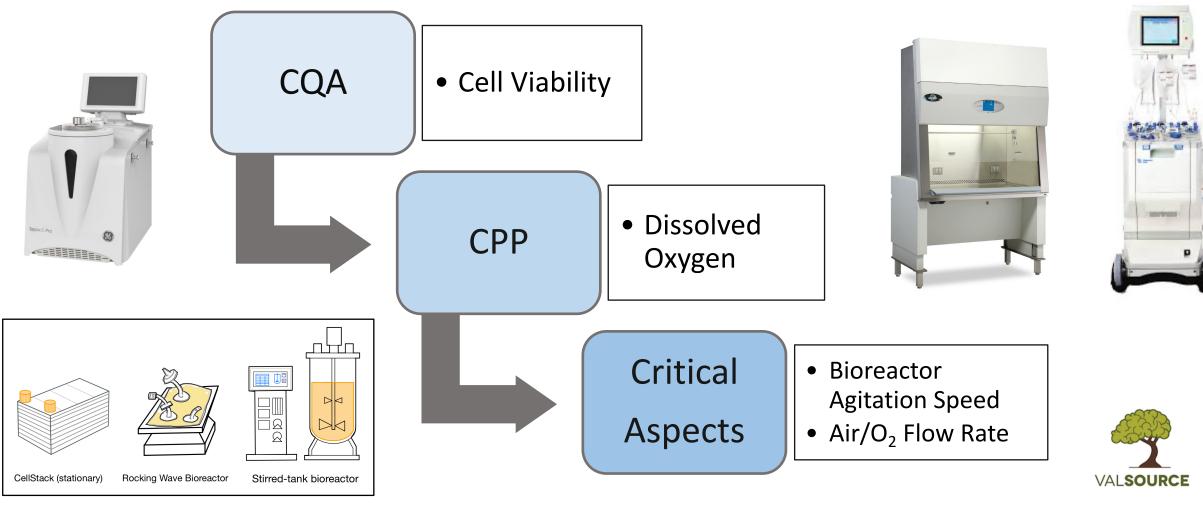


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Facilities/Utilities/Equipment

Defining specifications and qualification strategy using risk-based approach



Product Shipping/Transport Control Strategy



Unique Challenges for Cell Therapy Products – Contamination Controls Risk Assessment is crucial for developing a robust "Shipping Control Strategy"

- Vein to vein (for individualized autologous therapies)
- Maintain product quality throughout (ask what CQAs are potentially impacted?) – risk assess both apheresis and drug product transport
- Developing technologies:
 - Physical shipping conditions and monitoring devices
 - Product tracking: Col / CoC

Get to know and better control your process and product!



IN SUMMARY

A risk-based approach can be applied to the establishment of the Process Control Strategy as part of the overall Lifecycle Approach to Process Validation

This approach has many benefits including (though not limited to)...

- ORGANIZE the rapidly increasing product and process knowledge
- FOCUS on critical elements of product and process
- IDENTIFY what you do not know (uncertainty) and how to address
- COMMUNICATE new learnings across multiple disciplines
- DEFINE roles & responsibilities of business units
- READY organization ultimately for successful commercialization





WHEN: 11:00 a.m. ET every Tuesday and Thursday in June

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Additional Resources of Interest



Recent articles on managing risk and uncertainty

Making Decisions In A COVID-19 World: How To Combat Stress With Quality Risk Management <u>https://www.pharmaceuticalonline.com/doc/making-decisions-in-a-covid-world-how-to-combat-stress-</u>

with-quality-risk-management-0001

- How Military Thinking Can Improve Pharma Decision Making Under Stressful Conditions https://www.bioprocessonline.com/doc/how-military-thinking-can-improve-pharma-decision-makingunder-stressful-conditions-0001
- High Absenteeism & The Production Of Medically Necessary Drugs During COVID-19 <u>https://www.pharmaceuticalonline.com/doc/high-absenteeism-the-production-of-medically-necessary-drugs-during-covid-0001</u>





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