



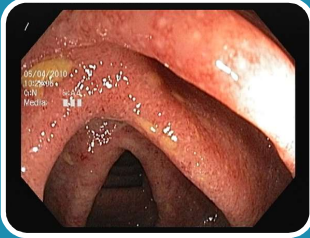
# How to monitor and mitigate immunotoxicity during early phase clinical trials in inflammatory diseases?

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# Inflammatory diseases



## Inflammatory bowel diseases (IBD)

- Crohn's disease
- Ulcerative colitis



## Rheumatological diseases

- Spondyloarthritis
- Rheumatoid arthritis
- Psoriatic arthritis



## Dermatological diseases

- Plaque psoriasis

# Inflammatory diseases

## **Concept:**

elevated Tumor Necrosis Factor alpha (TNF) concentrations at the sites of inflammation drive disease pathology



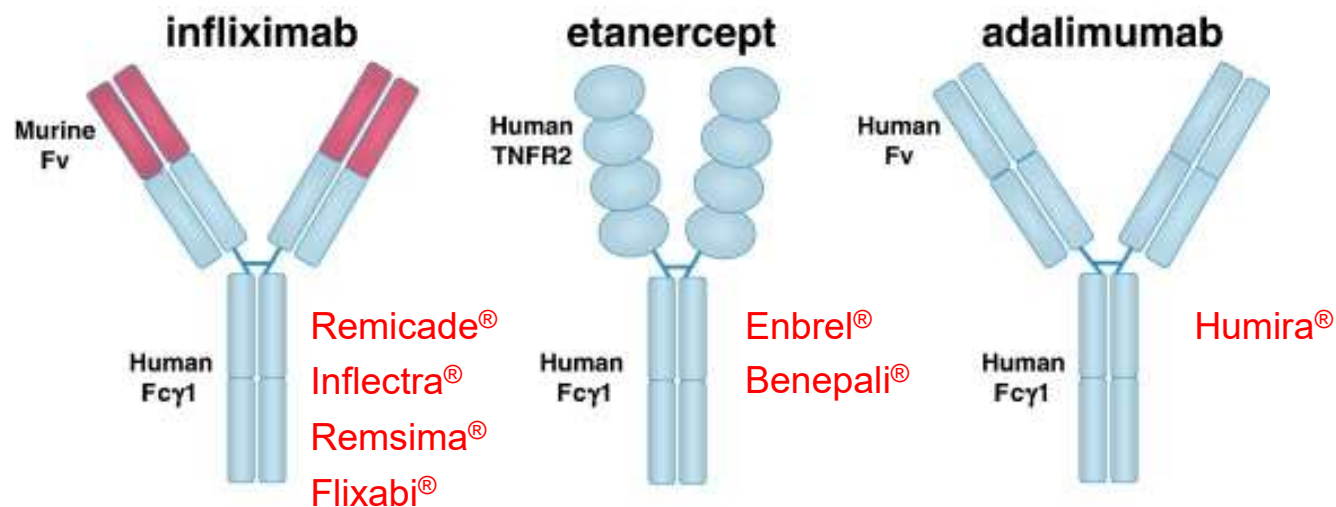
## **Therapeutic goal:**

removal of excess TNF from sites of inflammation



## **Development of anti-TNF biologics**

# anti-TNF biologicals

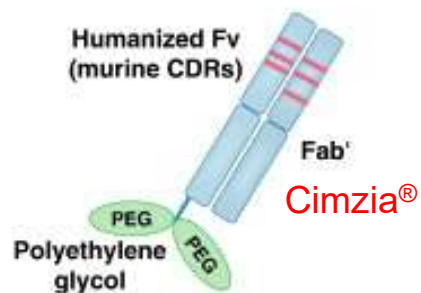


Approved for treatment of IBD in Europe

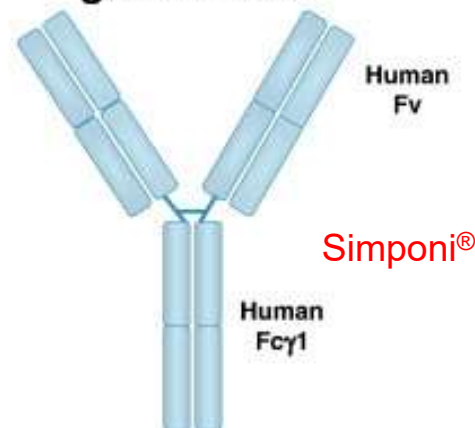
Induction followed by maintenance therapy

Treatment cost: 8.000-15.000€/year

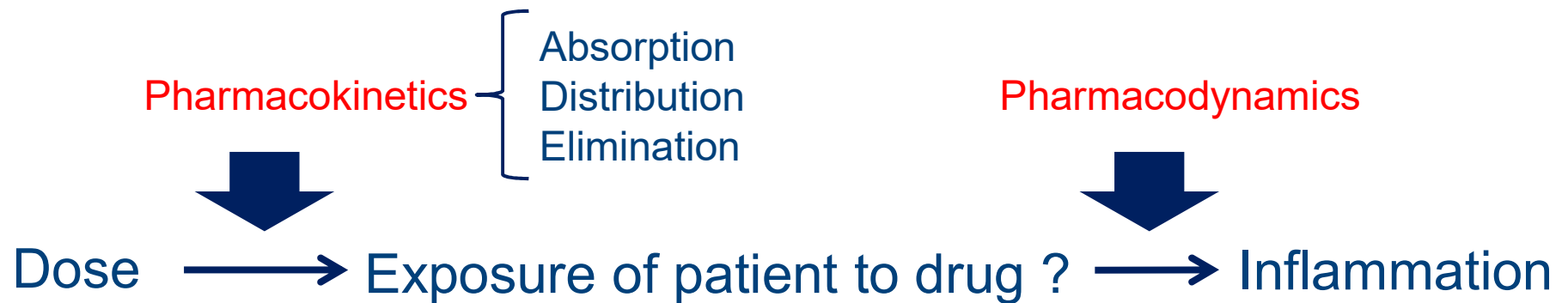
## certolizumab pegol



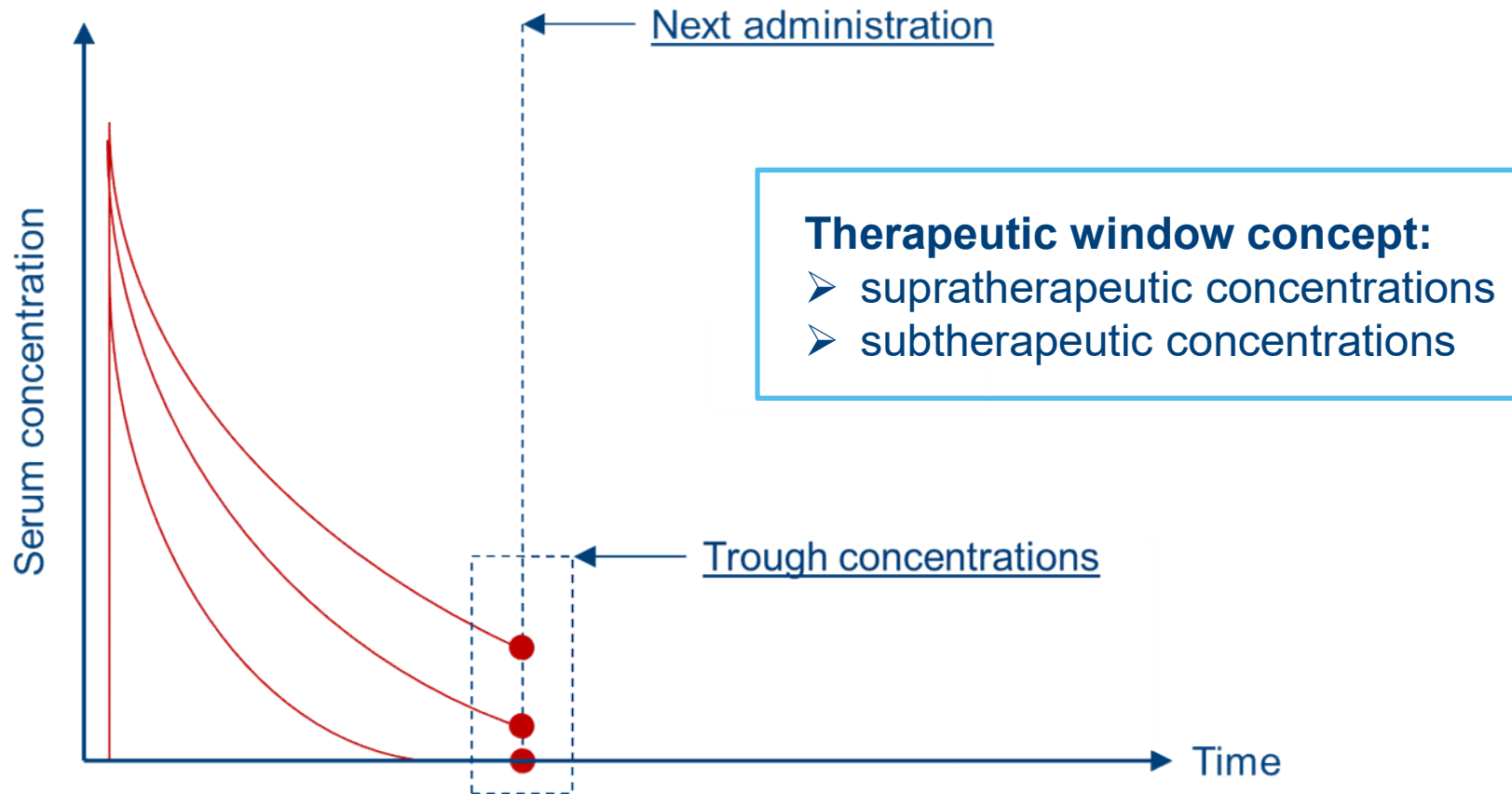
## golimumab



# Pharmacokinetics/Pharmacodynamics

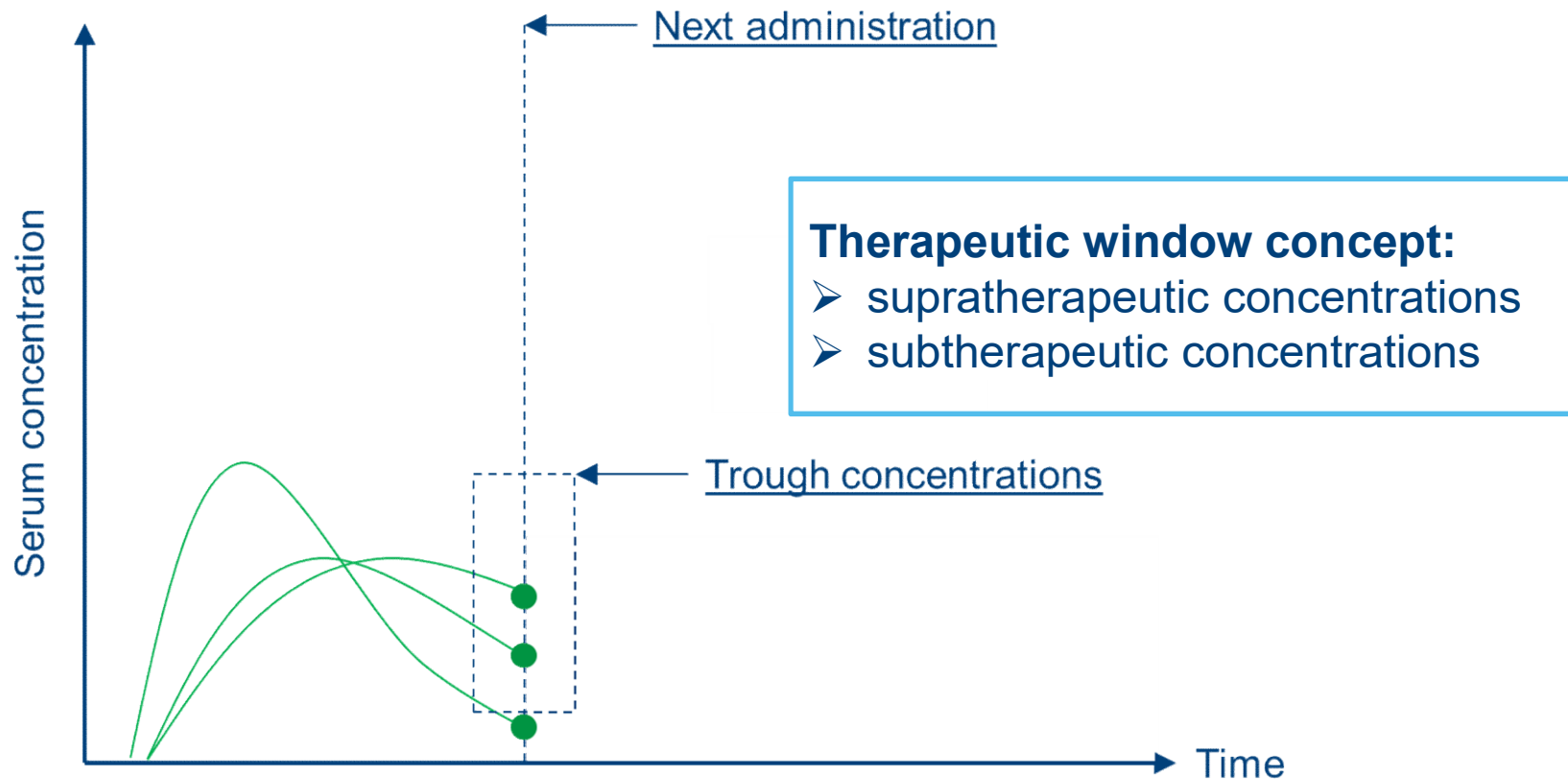


# Pharmacokinetic variability-IV drug



PLHUM170113

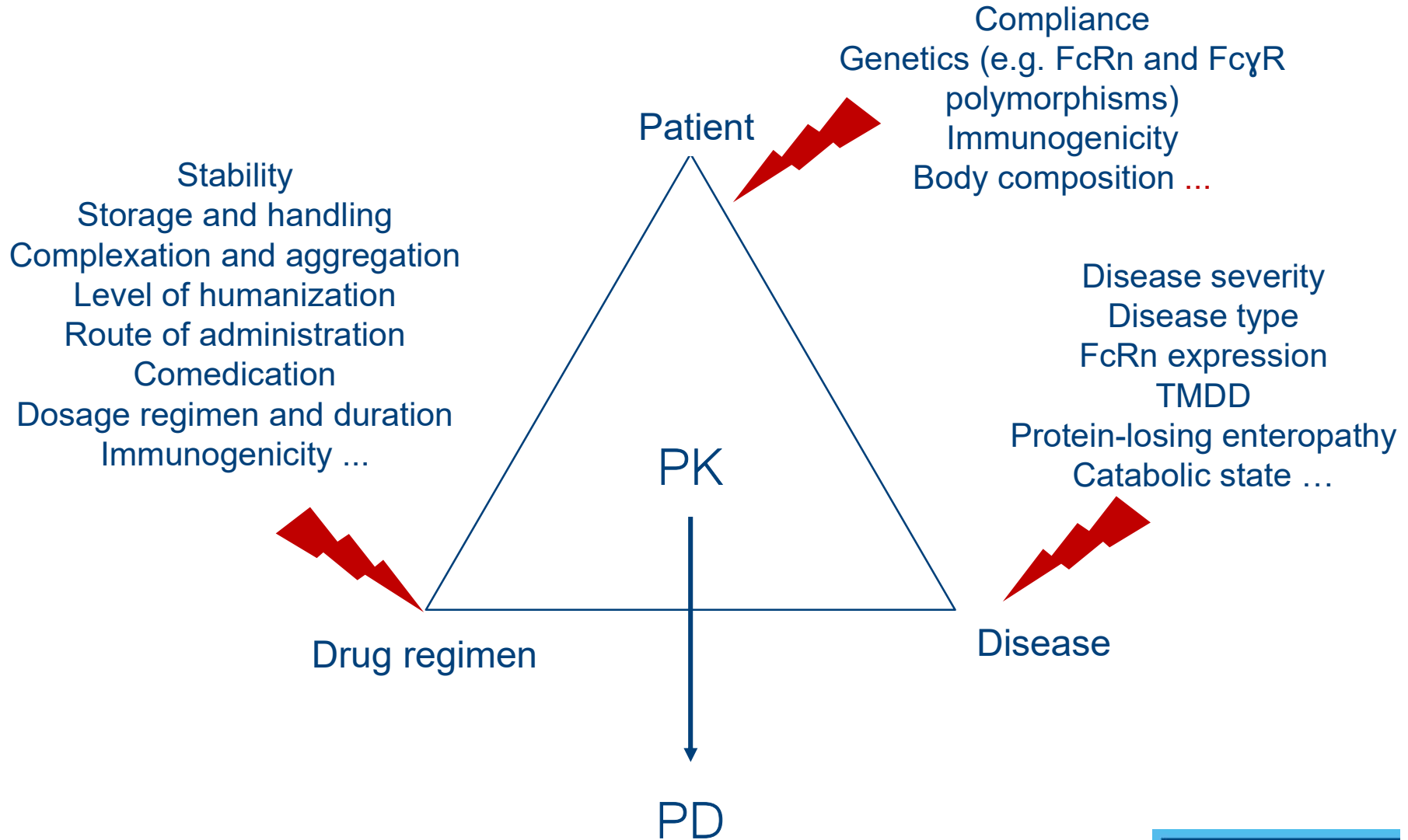
# Pharmacokinetic variability-SC drug



PLHUM170113

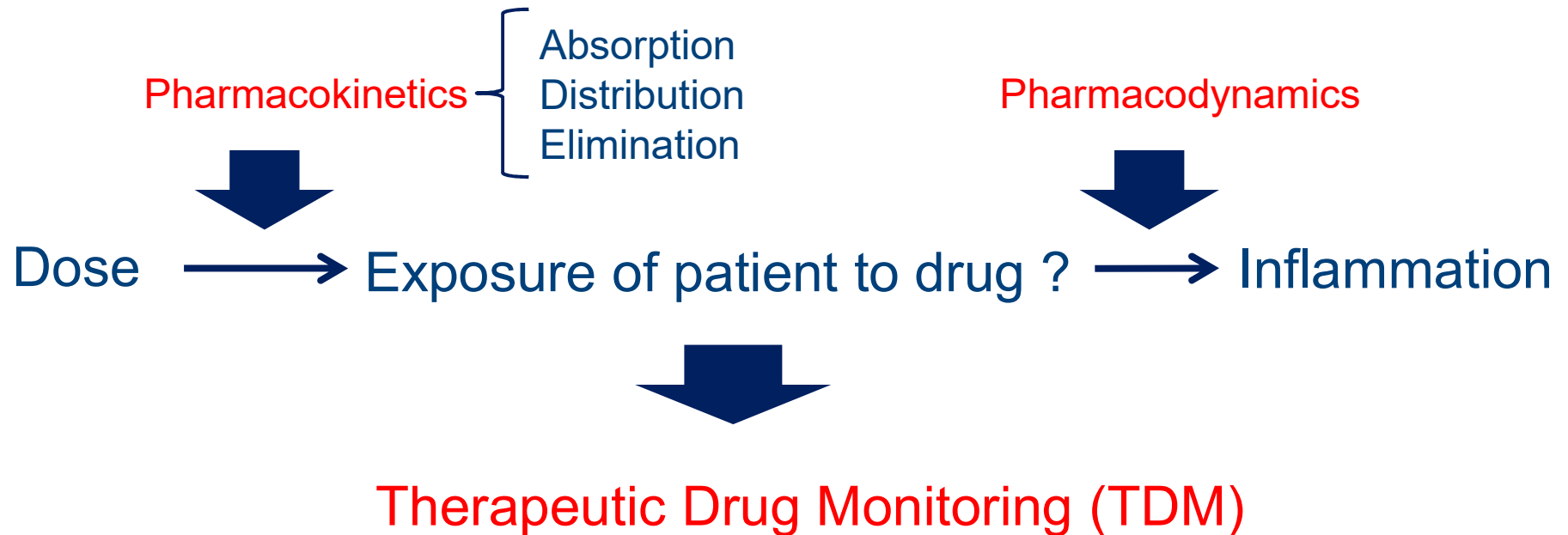
**KU LEUVEN**

# What causes PK variability?



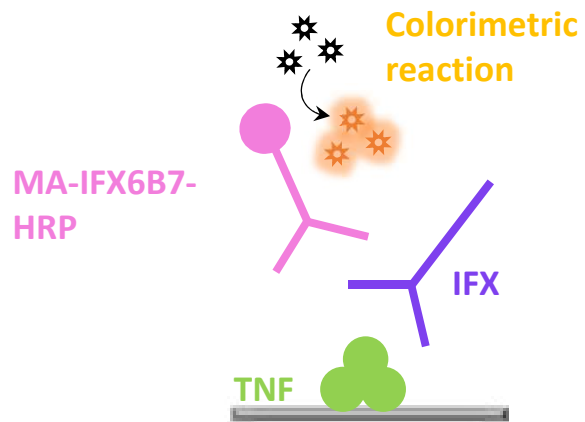


# Pharmacokinetics/Pharmacodynamics

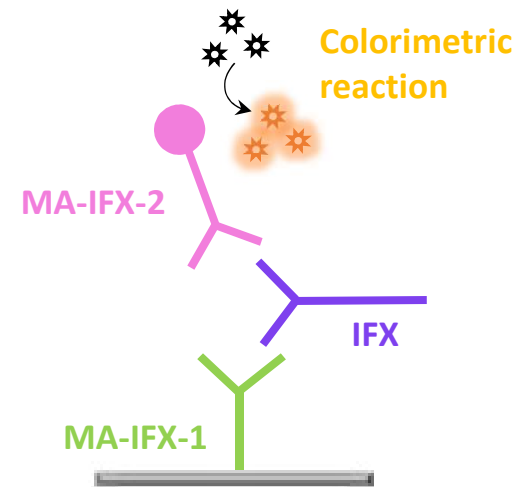


# TDM: How to measure? ELISA

TNF coated



MA/MA combination



- infliximab, adalimumab, golimumab: both TNF coated and MA/MA ELISA have been developed. Van Stappen T *et al.*, TDM 2015; Bian S *et al.*, JBPA 2016, Detrez I *et al.*, JCC 2016
- TNF coated ELISA is used in CE-labelled kit (Ridascreen-R-biopharm)

# TDM: How to measure? rapid assays

## ELISA:

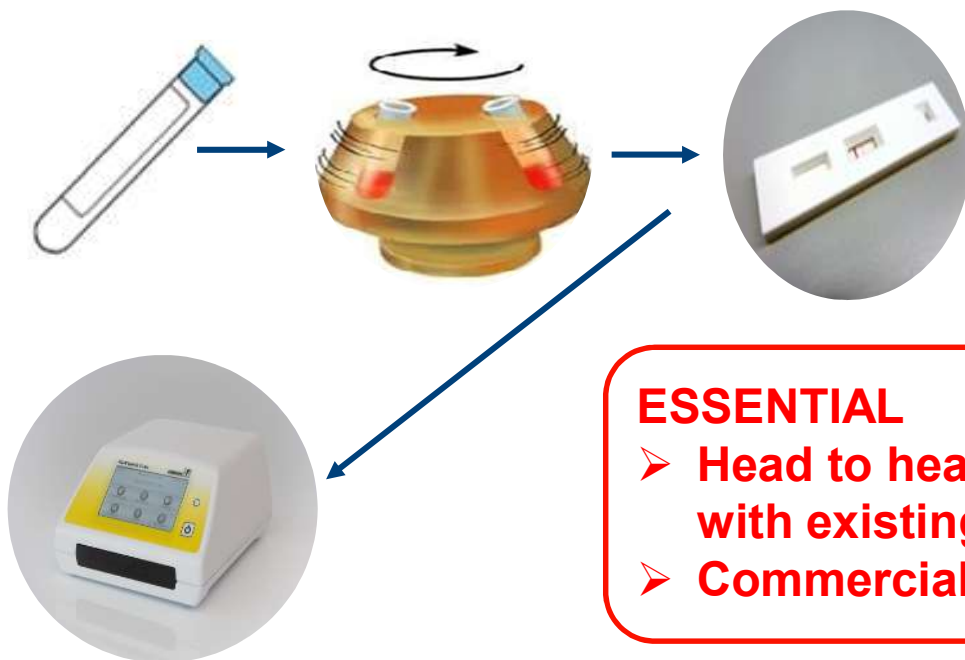
- Requires time : approximately 2h
- Requires laboratory equipment or transport to central laboratory
- Requires multiple samples in order to be cost-efficient
- Long time to result time

## Rapid assays:

- Lateral flow technology      Van Stappen T *et al.*, Clinical and Translational Gastroenterology 2017
- Fiber optic surface plasmon Resonance: FO-SPR      Lu J *et al.*, Biosens Bioelectron 2016  
Lu J *et al.*, Anal Chem 2017

# Increase the speed of TDM: rapid assays

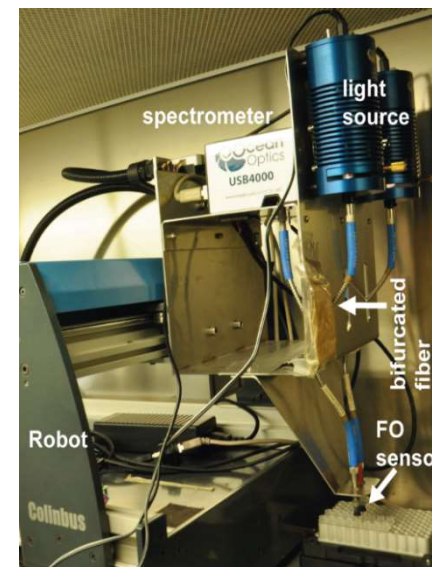
- **Lateral flow technology** (Van Stappen T *et al.*, Clin Transl Gastro 2017)



- **Fiber optic Surface Plasmon Resonance (FO-SPR)** (Lu J *et al.*, Biosens Bioelectron 2016; Lu J *et al.*, Anal Chem 2017)

## ESSENTIAL

- **Head to head comparisons with existing assays**
- **Commercially available**



Ridaquick infliximab monitoring (R-biopharm)

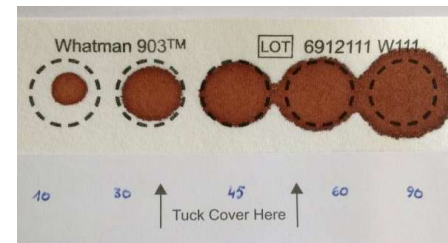
# Increase the speed of TDM: rapid assays

## Improvement possible?

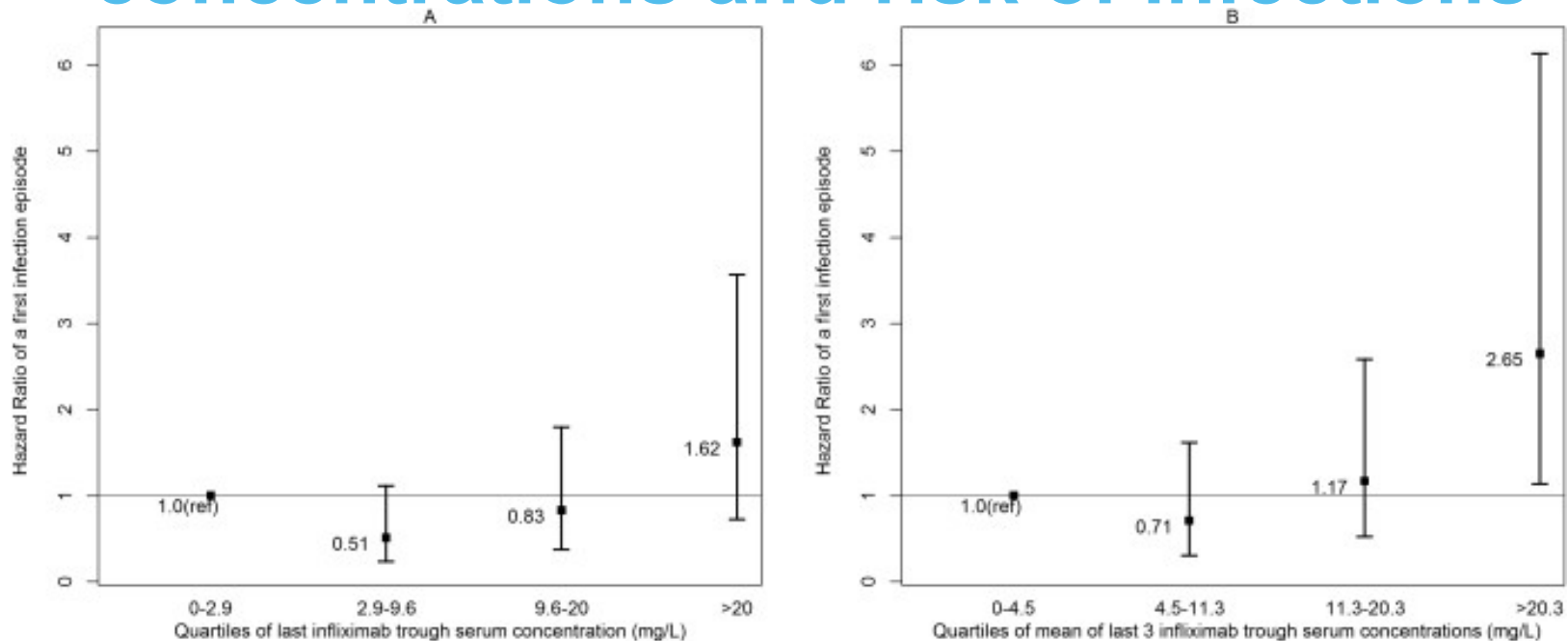
- **Full blood *versus* serum**
  - Validation with existing assays using serum

## Other alternative forms

- **Dry blood spots** collection followed by extraction: increases speed and accessibility of collecting samples
- **FO-SPR technology**: all matrices (full citrated blood, plasma, serum, dry blood spot extracts) validated (Lu J *et al.*, Anal Chem 2017)



# Relationship between **high** serum infliximab concentrations and risk of infections



Estimated hazard ratios and 95% confidence intervals for a first infection episode in spondyloarthritis patients in each quartile of trough serum IFX concentration (A) or mean of the last 3 trough serum concentrations (B) Bejan-Angoulvant T *et al.*, Arthritis & Rheumatology 2017

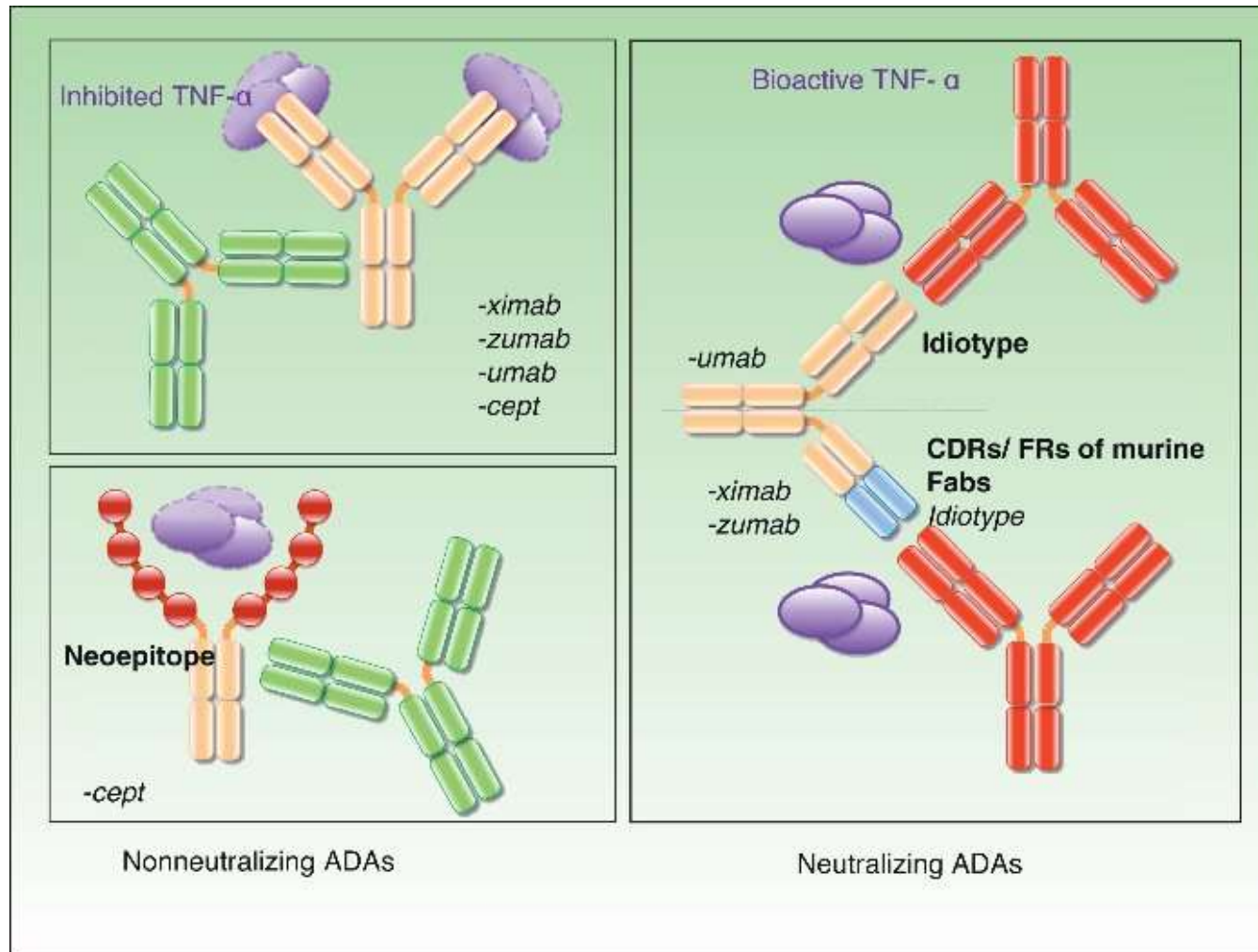
- High IFX concentration (>15-20 µg/ml) are correlated with a higher risk of first infection episode

# Relationship between immunogenicity and **low** concentrations of anti-TNF biologicals

- All biologicals can evoke an immune response
  - infliximab: chimeric
  - adalimumab & golimumab: fully human
- Resulting in a formation of anti-drug antibodies (ADA)
  - Infliximab: > 90% neutralizing ADA
  - Adalimumab: 97% neutralizing ADA

Van Schie K *et al.*, Ann Rheum Dis 2015

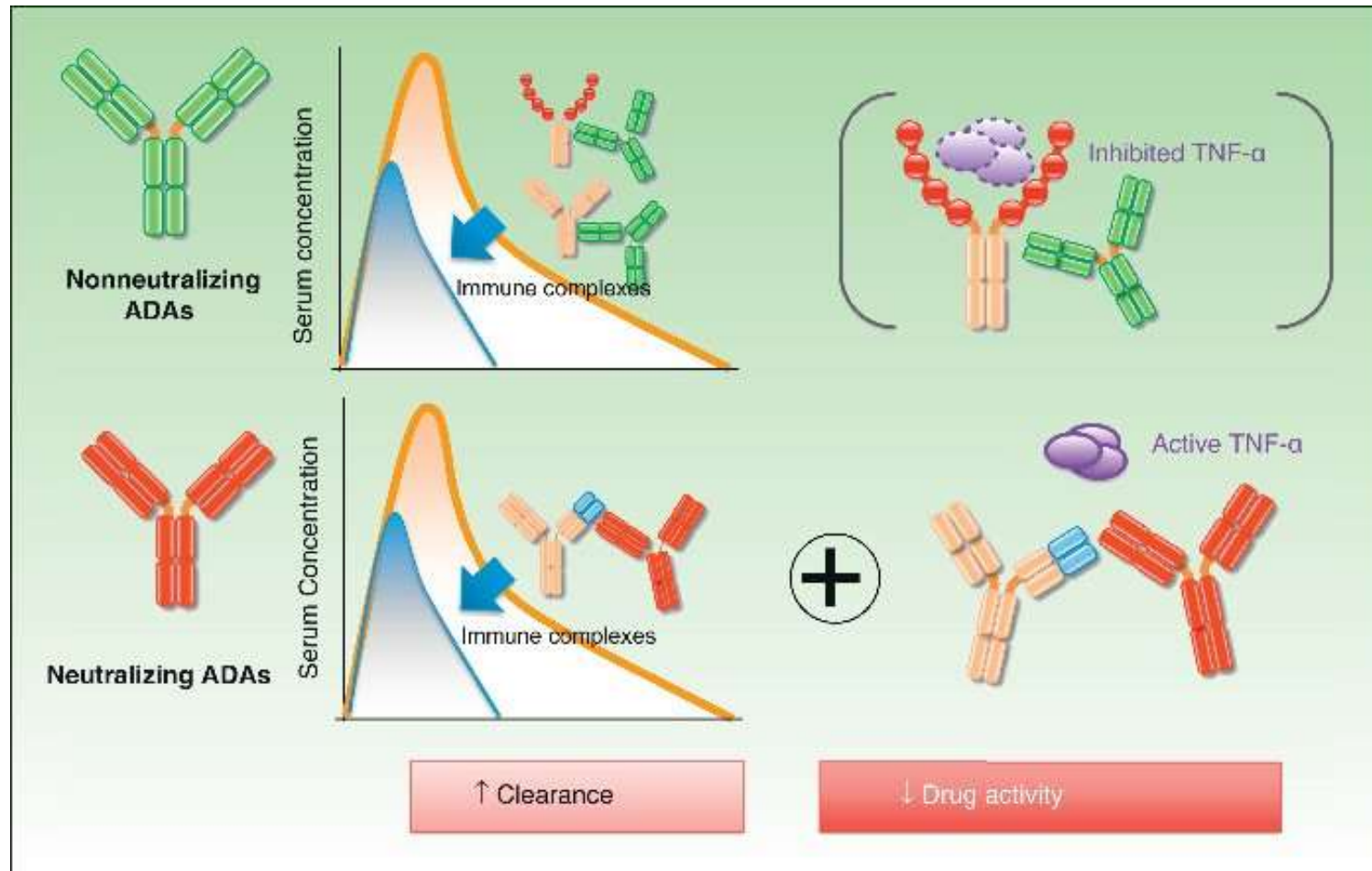
# nonneutralizing versus neutralizing ADA



Carrascosa JM, Actas dermisifiliogr. 2013



# The effect of (non)neutralizing ADA?



Carrascosa JM, Actas dermisifiliogr. 2013

# Relationship between immunogenicity and **low** concentrations of anti-TNF biologicals

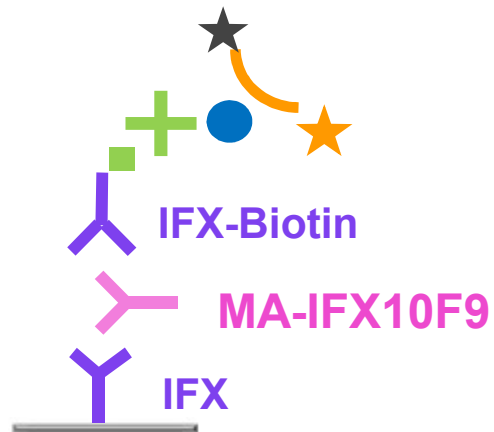
- Transient *versus* persistent ADA
  - persistent ADA are associated with loss of clinical response whereas transient ADA are not
- Size and titer of immune complexes
  - large immune complexes: favor further ADA induction through complement activation and larger uptake by antigen presenting cells: large immune complexes are found in patients with acute severe infusion reactions

Vande Casteele N *et al.*, Am J Gastroenterol 2013

Van Schouwenburg P *et al.*, Nat Rev Rheumatol 2013

# How to measure ADA : bridging ELISA

Van Stappen T *et al.*, IBD 2015

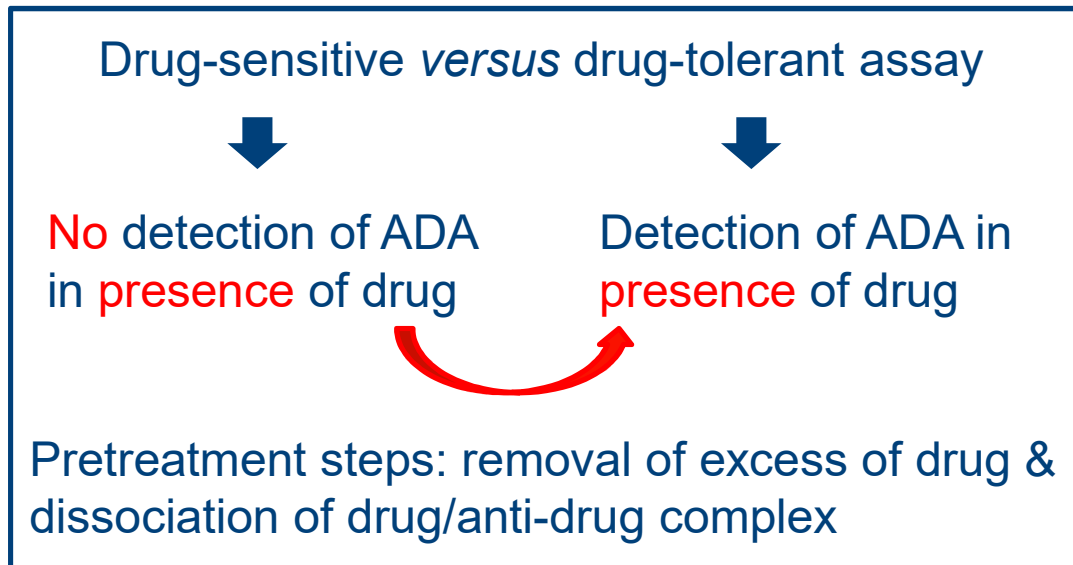


**Drug sensitive:** in presence of excess of IFX, ATI can not be detected  
➡ only determine ATI when IFX is below detection limit



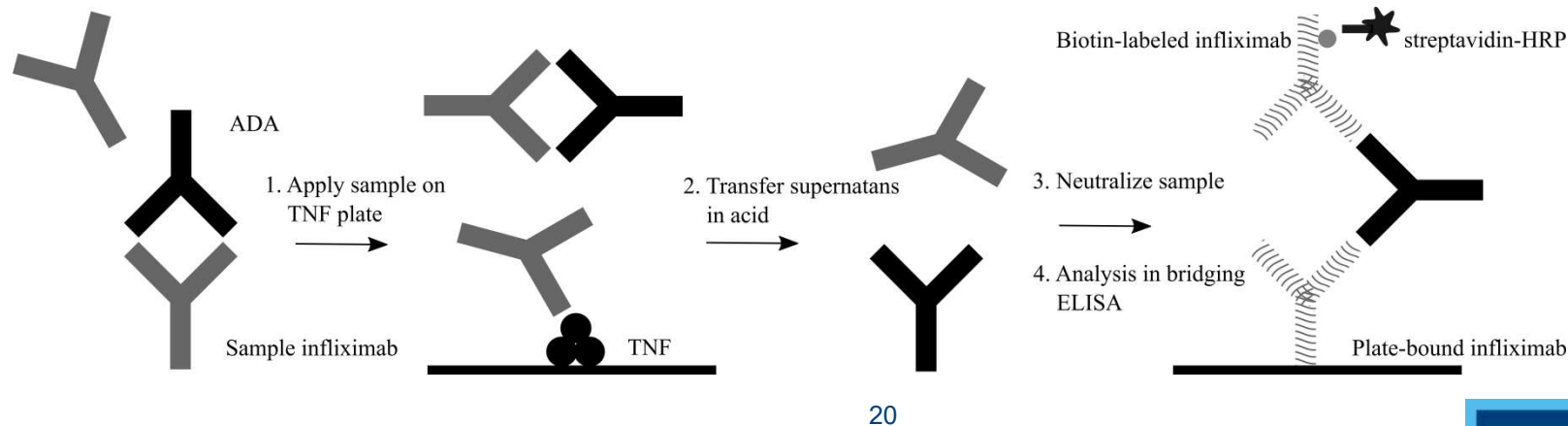
# ADA assays: bridging ELISA: drug tolerant?

Van Stappen T *et al.*, IBD 2015  
Van Stappen T *et al.*, DTA 2016



**Bridging assay**

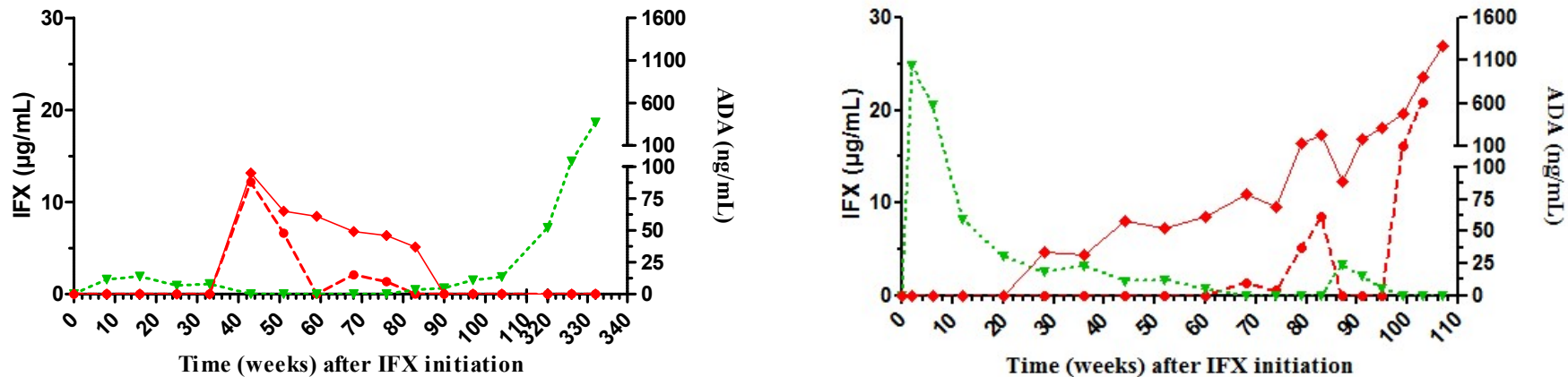
**Drug tolerant protocol**



# ADA assays: bridging ELISA: drug tolerant?

Van Stappen T *et al.*, DTA 2016

Comparison of the bridging ELISA with and without the sample pre-treatment protocol for the detection of anti-drug antibodies (ADA) in two patients treated with infliximab.

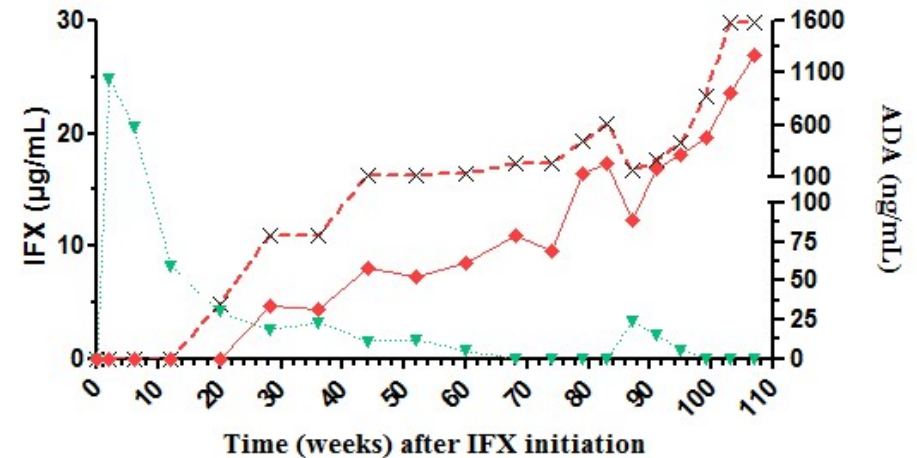
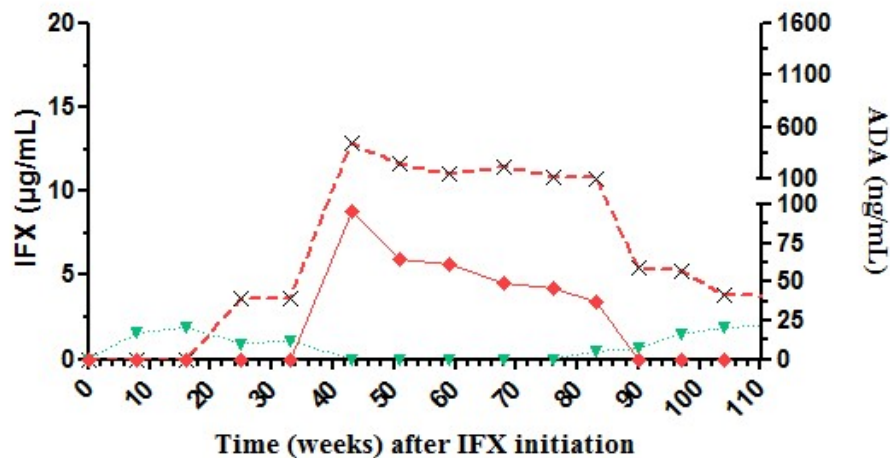
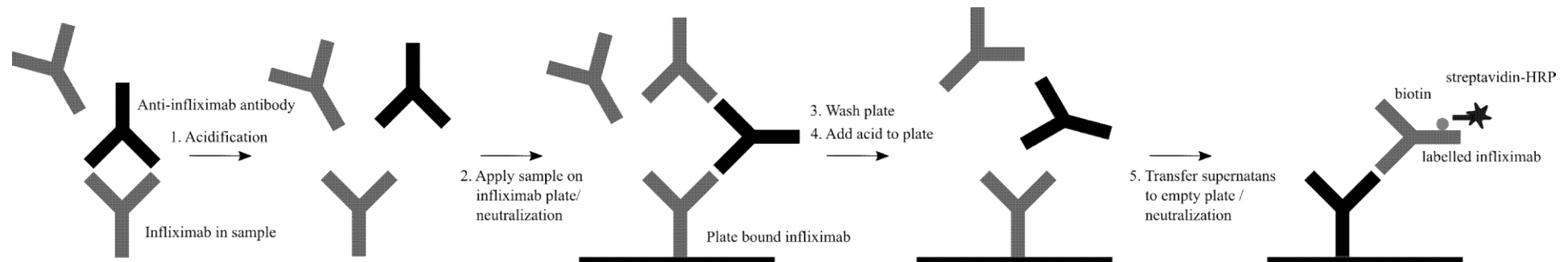


The infliximab concentration is presented as a dotted line with triangles indicating the date of infusion. ADA levels are represented with a dashed line (circles indicating the date of infusion) and a full line (diamonds indicating the date of infusion) for the bridging ELISA without and with the sample pretreatment protocol, respectively.

- predict formation of ADA providing opportunities for early treatment optimization

# ADA assays: Affinity Capture ELISA: increase drug tolerance

Van Stappen T *et al.*, Clin Transl Gastro 2017, Van Stappen T *et al.*, Gut 2017

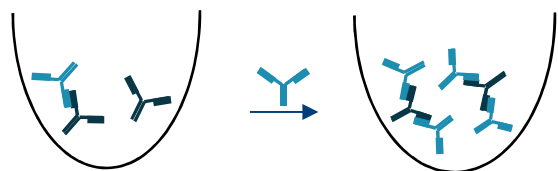


- No bridging format
- Increased drug tolerance

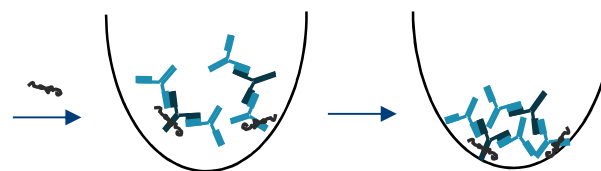
# ADA assays: drug resistant

Bian S *et al.*, AAPS 2017

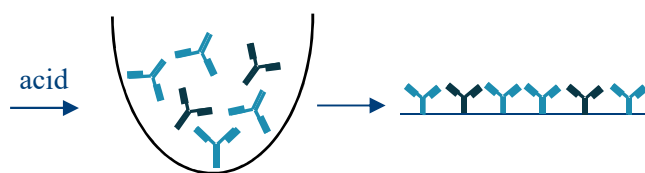
① Addition of excess adalimumab to form adalimumab/anti-adalimumab antibody complexes



② Precipitation using PEG to get total ADA to adalimumab; Spin and wash samples to get the pellets




③ Acid dissociation and coating of reconstituted pellets in an acidic solution on an empty plate



④ Specific detection of total ADA levels using adalimumab-biotin



 Anti-adalimumab antibody

 Adalimumab

 Polyethylene glycol

➤ **No bridging format**

➤ **Drug resistant assay**

# How to monitor ADA formation

## Drug-sensitive bridging assay

(Bian S *et al.*, J Pharm Biomed Anal 2016;  
Van Stappen T *et al.*, Inflamm Bowel Dis  
2016; Detrez I *et al.*, J Crohn Col 2016)

## Drug-tolerant bridging assay.

(Van Stappen T *et al.*, Drug Test Anal  
2016)

## Drug-tolerant ACE assay

(Detrez I *et al.*, JCC 2016; Van  
Stappent T *et al.*, Clin Transl Gastro  
2017, Van Stappen T *et al.*, Gut 2017)

## Drug-resistant PANDA assay

(Bian S *et al.*, AAPS 2016)

Increased incidence of anti-drug  
antibody detection

Occurrence of transient ↓  
and persistent ↑ antibodies

Detection of ADA is not always  
associated with loss of response



# How to mitigate ADA formation

- De-immunizing the molecule
  - Removing or masking or substitution known immunogenic epitopes *Jawa V et al., Clinical Immunol 2013*
- Avoid patients with high disease activity and comorbidities
  - In patients with acute bacterial infections or systemic inflammatory activity, dendritic cells may express higher levels of co-stimulatory molecules, decreasing threshold for T cell activation *Atzeni F et al., Autoimmunity reviews 2013*
- Add concomitant drugs
  - Methotrexaat reduces ADA due to immune suppressive nature or due to anti-inflammatory effect *Ungar B et al., AP&T 2017*

# How to mitigate ADA formation

- Adapt therapeutic regimen
  - tolerance induced by high dosing van der Maas A *et al.*, BMC Musculoskelet Disord 2012
- Desensitization or tolerance techniques
  - Gradually increasing doses to reach the full treatment dose over approximately 4 to 6 hours Mourad A *et al.*, 2015 Ann Allergy Asthma Immunol

# Acknowledgements

Laboratory for Therapeutic and Diagnostic Antibodies <http://pharm.kuleuven.be/biotech>  
Leuven IBD research group <http://www.ibd-kuleuven.com>



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