



# Challenges of inflammatory biomarker assay development and validation

**Stéphanie TEIXEIRA**

**Novimmune SA**

Geneva, Switzerland

# Outline

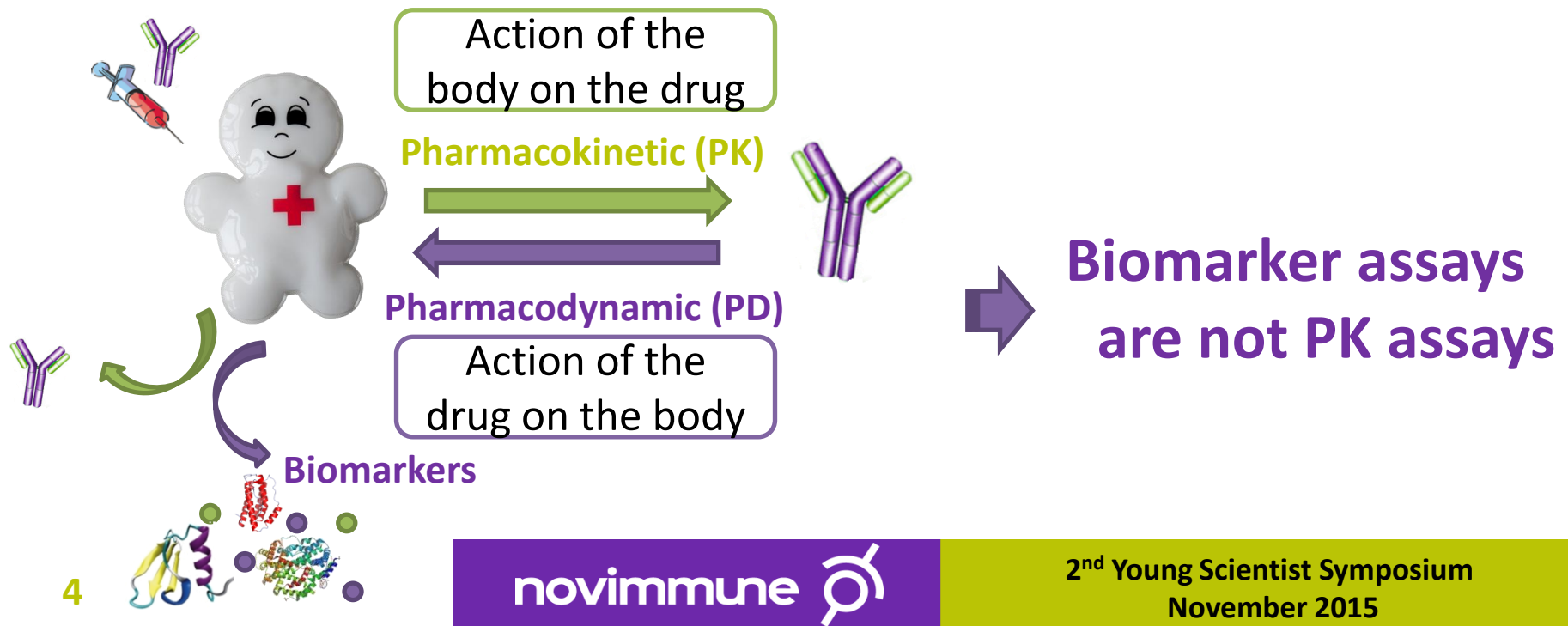
- Background
  - Biomarker utility
  - Biomarker strategy
  - Bioanalytical assay strategy
- Bioanalytical assay development challenges
  - Standard generation
    - Surrogate matrix
    - Recombinant protein
  - Parallelism
  - Endogenous QCs
- Conclusion

# Outline

- Background
  - Biomarker utility
  - Biomarker strategy
  - Bioanalytical assay strategy
- Bioanalytical assay development challenges
  - Standard generation
    - Surrogate matrix
    - Recombinant protein
  - Parallelism
  - Endogenous QCs
- Conclusion

# Biomarker utility

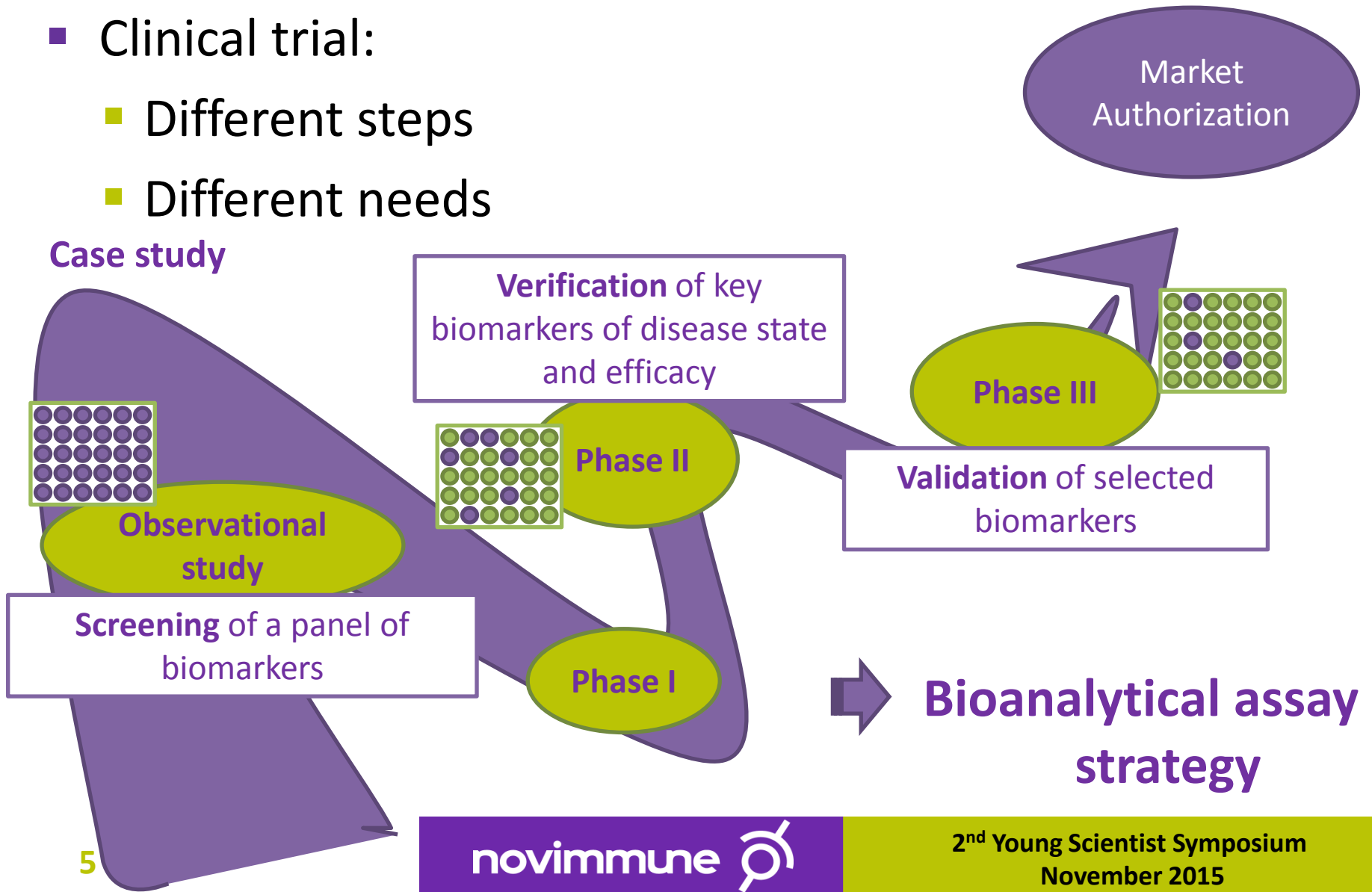
- **Why** do we need to measure biomarkers?
  - High attrition rate of new therapeutics
  - Need better translational models and **tools** to determine drug exposure, efficacy and safety



# Biomarker strategy

- Clinical trial:
  - Different steps
  - Different needs

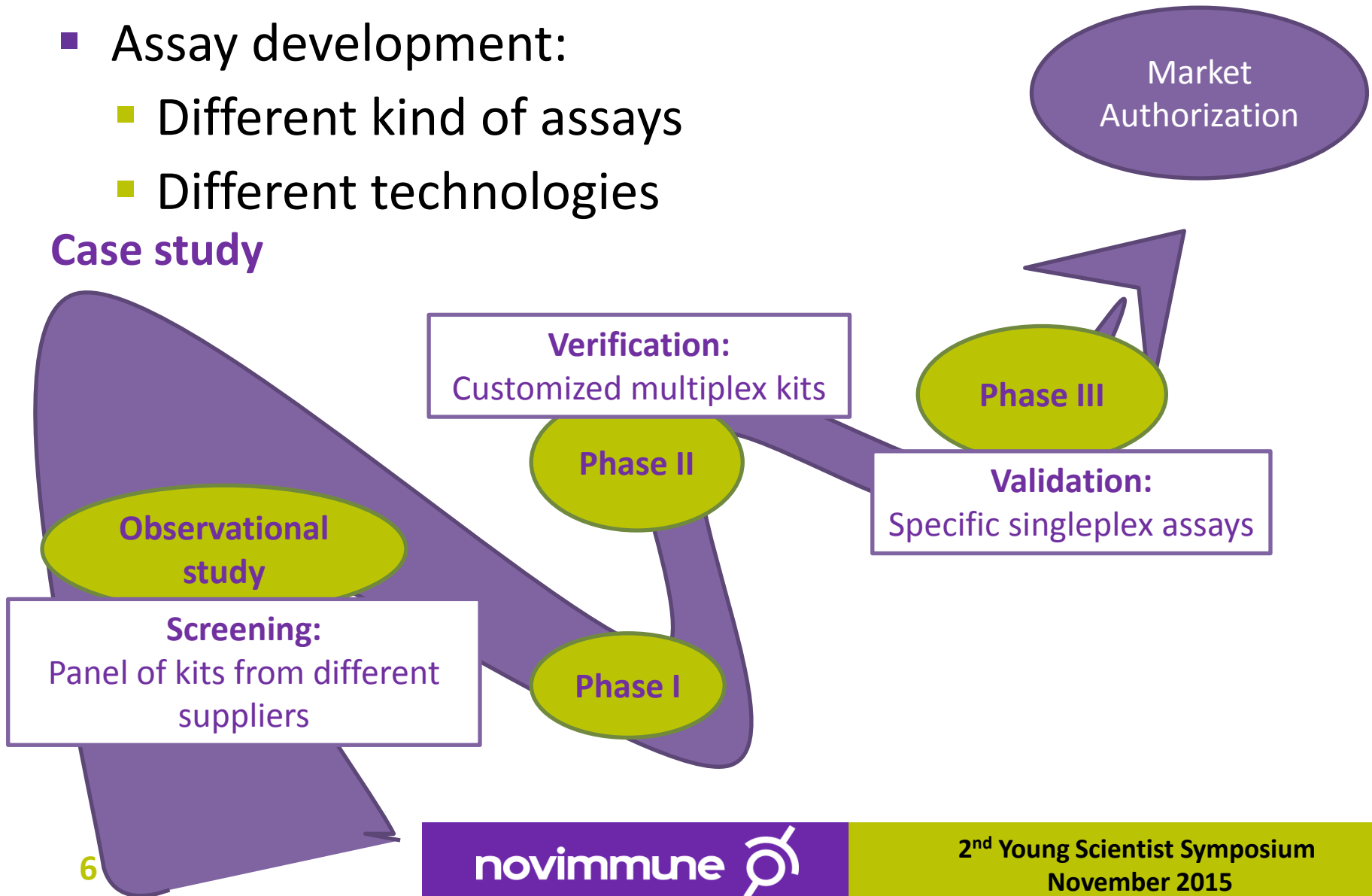
## Case study



# Bioanalytical assay strategy

- Assay development:
  - Different kind of assays
  - Different technologies

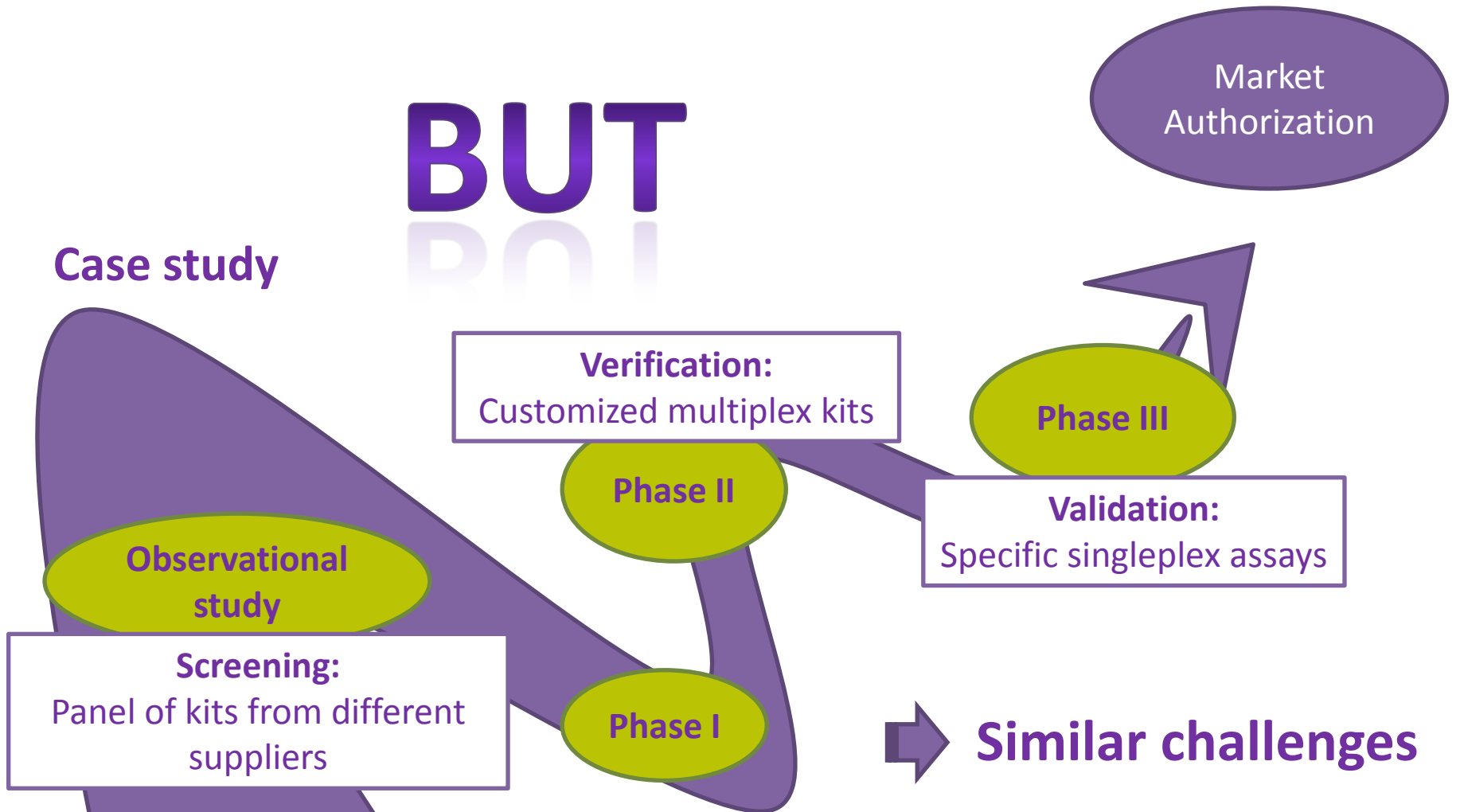
## Case study



# Bioanalytical assay strategy

# BUT

Case study



Similar challenges

# Outline

- Background
  - Biomarker utility
  - Biomarker strategy
  - Bioanalytical assay strategy
- Bioanalytical assay development challenges
  - Standard generation
    - Surrogate matrix
    - Recombinant protein
  - Parallelism
  - Endogenous QCs
- Conclusion



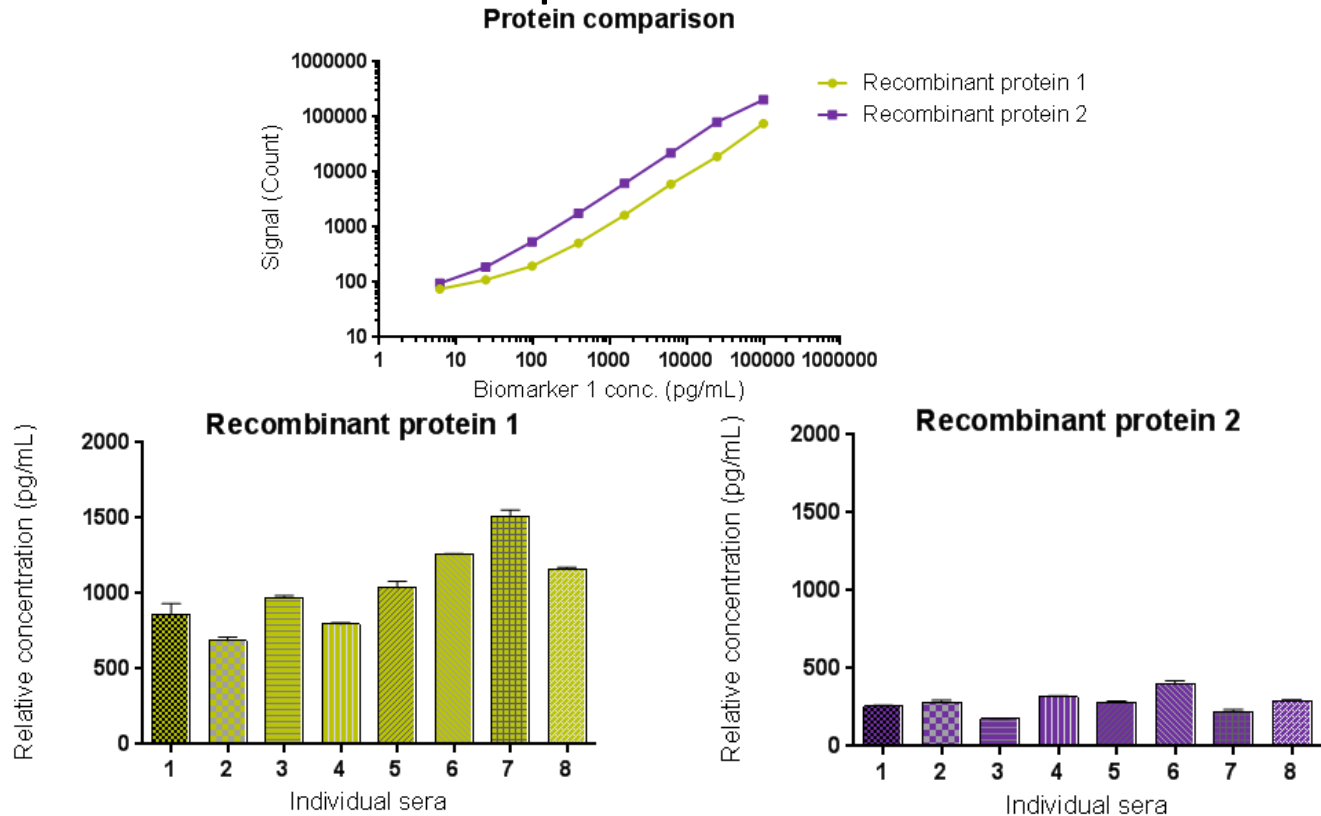
# Standard generation

- **Surrogate matrix:**
  - **Why ?** Mimic sample matrix without endogenous biomarker
  - **When ?** Used for calibration standard, sample dilution, (QCs)
- **Recombinant protein**
  - **Why ?** For *relative* biomarker quantification
  - **When ?** Used as calibration standard, (QCs)
- Need to be tested in the assay

# Standard generation

## ■ Case study

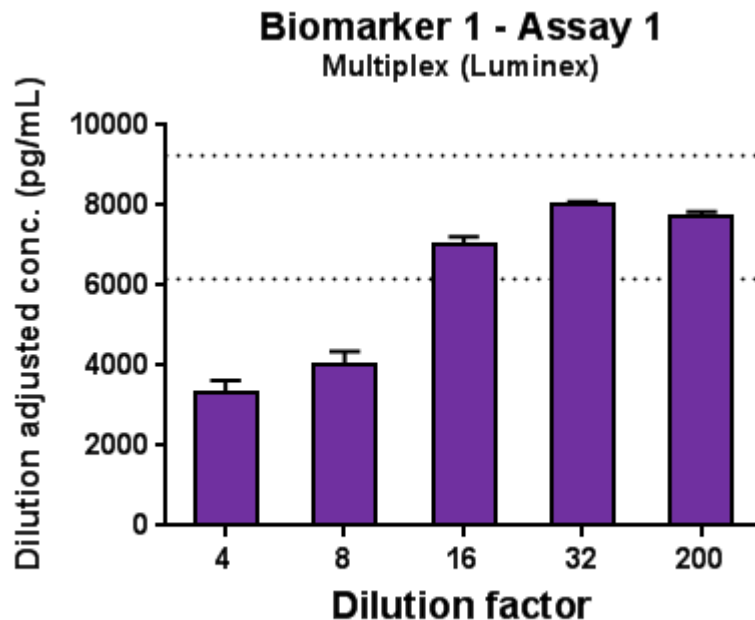
- 2 different recombinant proteins for the standard



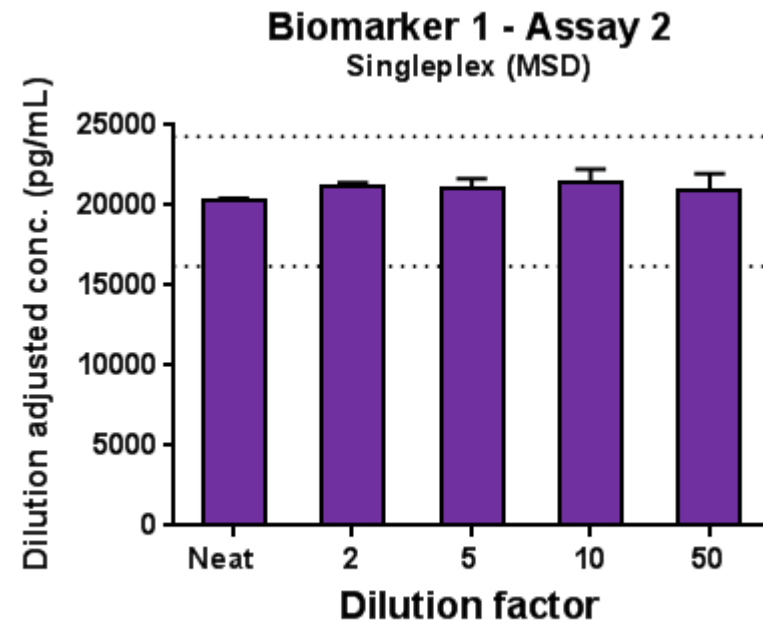
**Relative concentrations are different depending on the recombinant protein used**

# Parallelism

- Most important parameter
- Need to be tested for every assay, with multiple samples
- Could differ according to:
  - Assay:



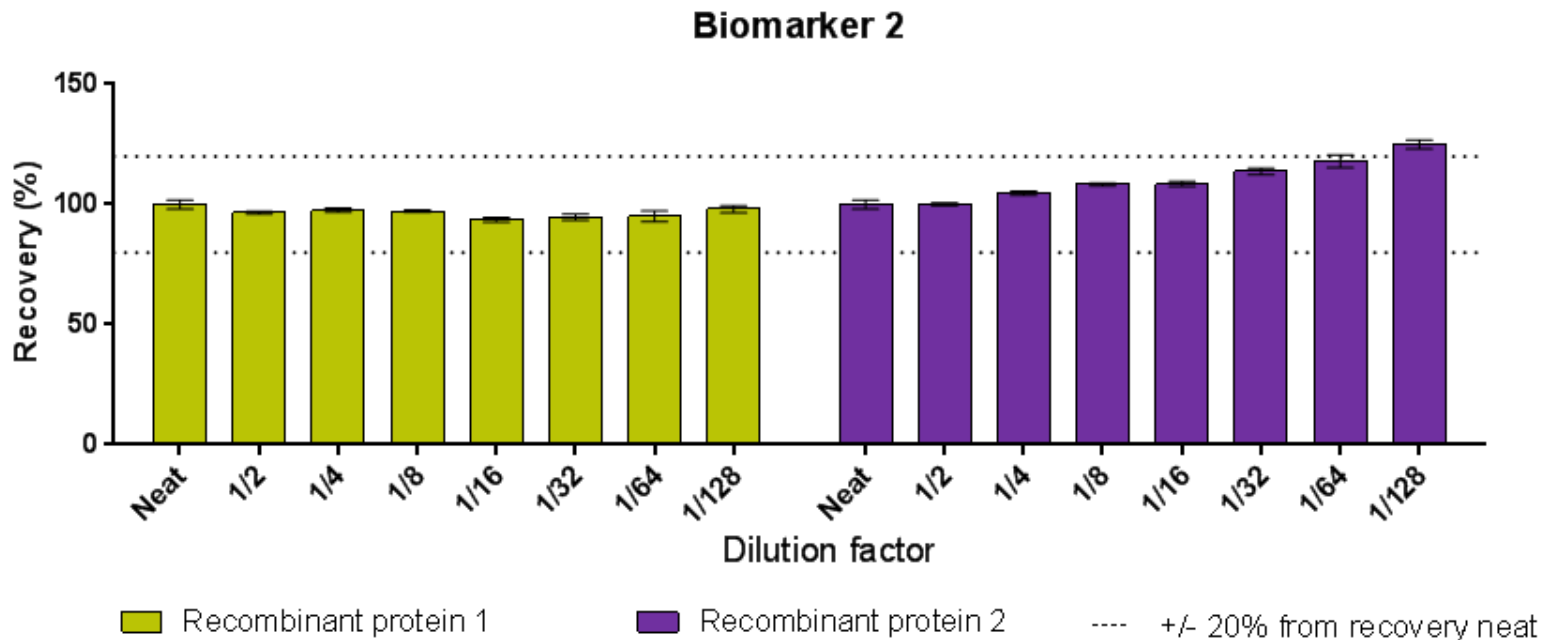
---- +/- 20% from dilution 1/200



---- +/- 20% from neat

# Parallelism

- Recombinant protein used as calibration standard:



**A good biomarker assay needs good parallelism between recombinant and endogenous protein**

# Endogenous QC

- **What ?**

- Non-spiked sample corresponding to the endogenous biomarker in the biological matrix

- **Why ?**

- To monitor the performance of the bioanalytical method
- Assess the integrity and validity of the results

- **How ?**

- Sample matrix or clinical sample (if possible)
- Healthy volunteer containing endogenous biomarker
- *Ex vivo* generation (e.g. whole blood activation)
- Recombinant protein in target matrix

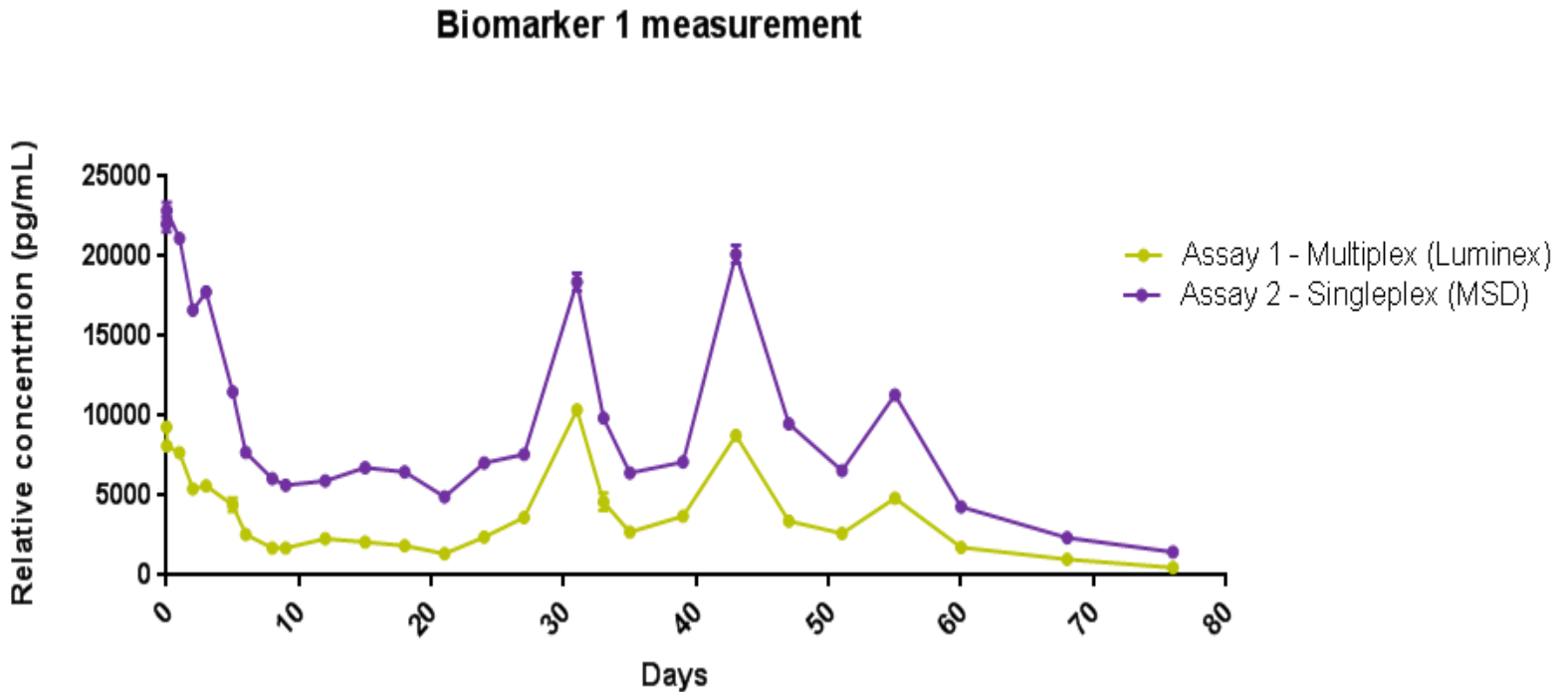
**Need endogenous biomarker to validate biomarker assays**

# Conclusion

- Biomarker assay is not a PK assay
- Select appropriate surrogate matrix and recombinant protein
- Need endogenous biomarker to develop and validate a biomarker assay:
  - At the beginning (endogenous in healthy and/or disease state subjects) or during the study (measured samples)
  - Parallelism and stability
  - Endogenous QCs

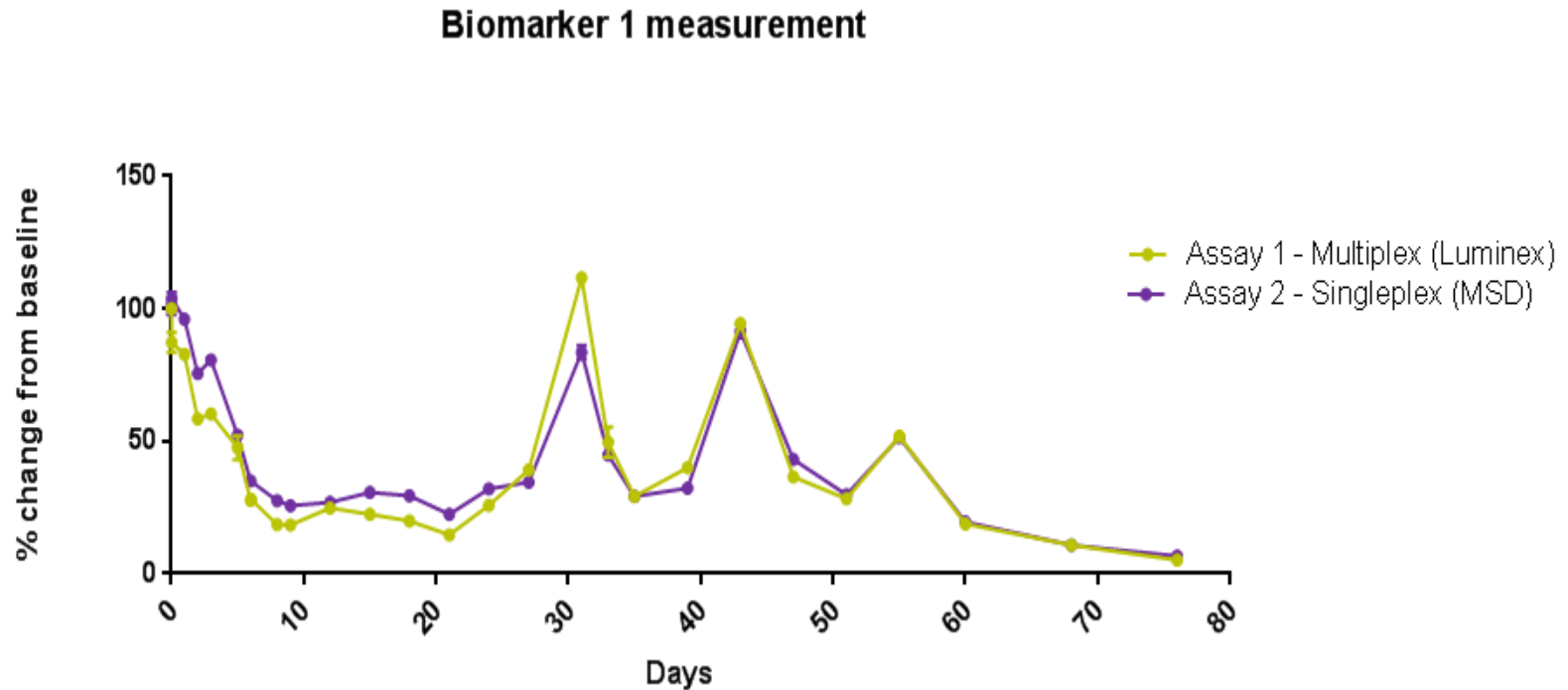
# Conclusion

- Case study



# Conclusion

- Case study



**A good biomarker assay allows the monitoring of the relative change of the biomarker which is an important information during the clinical trial**





# Thank you for your attention

[steixeira@novimmune.com](mailto:steixeira@novimmune.com)

[www.novimmune.com](http://www.novimmune.com)