Sample pre-treatment, drug tolerance and sensitivity in an antibody analysis assay

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Guideline Requirements for antibody assays

EMA 2017: Guideline on Immunogenicity assessment of biotechnology-derived therapeutic proteins:

• Screening assays should be **sensitive**. A low false positive rate is desirable but **false negative results are unacceptable**

<u>FDA 2016 Draft</u> Assay Development and Validation for Immunogenicity Testing of Therapeutic Protein Products - Guidance for Industry

• Assay sensitivity: FDA recommends that screening ADA assays achieve a **sensitivity of at least 100 nanograms per milliliter (ng/mL)**

<u>USP 1106 2017:</u> Immunogenicity Assays – Design and Validation of Immunoassays to Detect Anti-Drug Antibodies

• When products have long terminal half-lives scientists should develop ADA assays that are **capable of detecting ADA in the presence of product** levels that are expected to be **present in patient test samples**.



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ADA screening RIA method (original assay) -Parameter Result < 100 ng/ml ADA Sensitivity Insufficient Drug tolerance Judte Sensitivity in presence of drug



Consequences of insufficient drug tolerance

- Too much drug in sample
 - Risk of false negative samples during treatment
- Pre-treatment
 - Pre-treatment with PEG6000
 - Pre-treatment with PEG6000 + Glycine-HCl, pH 3





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 $# = PEG-6000/\gamma$ -globuline

Y = ADA

ADA radioimmuno assay - principle

🚝 = ¹²⁵I-labelled drug PEG 6000 Spin Discard S/N Precipitation of drug-Supernatant: Precipitate: All antibody complexes unbound drug antibodies bound - discarded to radioactive drug



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Sample containing antibodies binding to labelled drug

Careful handling of sample pre-treatment in an antibody analysis assay determines how drug tolerance and sensitivity may be improved

Pre-treatment protocol with glycine-HCl and

PEG6000

This work is based on the mAb which gave the best sensitivity in the original antibody RIA

Y = ADA #= PEG-6000/γ-globuline = Drug



Incubation with Glycine-HCI: time and non specific binding correlates positively

- Glycine-HCl, pH3
 - Mix with sample and incubate 5, 10, 15, 30, 60 mins
- Non specific Background:
 - Samples W/O ab
- Drug interference samples:
 - 40 nM, 4 nM, 0.4 nM, 0 nM
- Increased background with increased incubation time irrespective of drug levels





Increased incubation leads to lower signal/ background ratio

- In the presence of antibody the response is not increased to the same degree as the background
- Sensitivity will decrease due to higher background

• 5 minutes pre-treatment is preferable







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Pre-treatment does not alter sensitivity significantly

- Sensitivity samples
 - 2 fold titration of ab starting at 5 µg/ml
 - Cut point based on 20 individual sera
 - Sensitivity 5-20ng/ml



Sensitivity

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Pre-treatment with Glycine-HCl and PEG6000 increases drug tolerance

				30 .	Titrat	ion of du	ua in I	nresence
250ng/ml Ab		%B/T			inciac			
	No pre-	PEG6000	Acid+	25		01 2500	g/mrA	DA
Drug nM	treatment	alone	PEG6000	25	\frown			
100 nM	1.5	3.1	5.8					
50 nM	1.7	4.3	6.4	20	\frown			No
25 nM	1.8	4.2	6.8	⊢				pretreatment
12.5 nM	3.4	5.6	6.6					
6.3 nM	5.4	5.8	7.8	%				PEG 6000
3.1 nM	9.4	11.2	10.3	10				
1.6 nM	14.8	16.7	14.5	10				
0.78 nM	17.9	20.4	16.8					Glycine-HCL
0.39 nM	19.7	22.7	20.1	5 – –		$- \sim$		+ PEG 6000
0.20 nM	21	23.9	20.9					
0.10 nM	21.9	22.6	18.4	0				
0.05 nM	21.9	22.7	20.2	0,05	0,5	5	50	
0 nM	22.5	23	18.7		Log	nM drug		



Cut-point: Mean QC neg + NF

Vortexing important for sensitivity

- Short 'vortexing' at low speed leads to deterioration in sensitivity < 10 sec
- Longer 'vortexing' at max speed leads to improved sensitivity > 10-20 sec.
- Sensitivity Tech 1: 65ng/ml, Tech 2: 30 ng/ml



Careful handling of sample pre-treatment in an antibody analysis assay determines how drug tolerance and sensitivity may be improved

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Improved drug tolerance using pre-treatment with Glycine-HCI and PEG 6000

	Original assay	Assay with pre-treatment
Sensitivity in absence of drug	< 100 ng/ml	< 100 ng/ml
Sensitivity in presence of drug	5 nM: 120 ng/ml	5 nM: 170 ng/ml
	50 nM: 2100 ng/ml	25 nM: 250 ng/ml
		100 nM: 500 ng/ml



Careful handling of sample pre-treatment in an antibody analysis assay determines how drug tolerance and sensitivity may be improved

What has been achieved



Application of pre-treatment step to remove excess drug

Identification of important steps for sensitivity and drug tolerance

Sensitivity in absence of drug retained

Improved sensitivity in presence of steady state drug levels

Ensures valid Ab data during treatment



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