



A CRO perspective of the Pharma-CRO relationship

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- **Background**
- **Focus on crucial steps**
 - **Actors & information**
 - **Samples**
 - **Method**
- **Case studies**

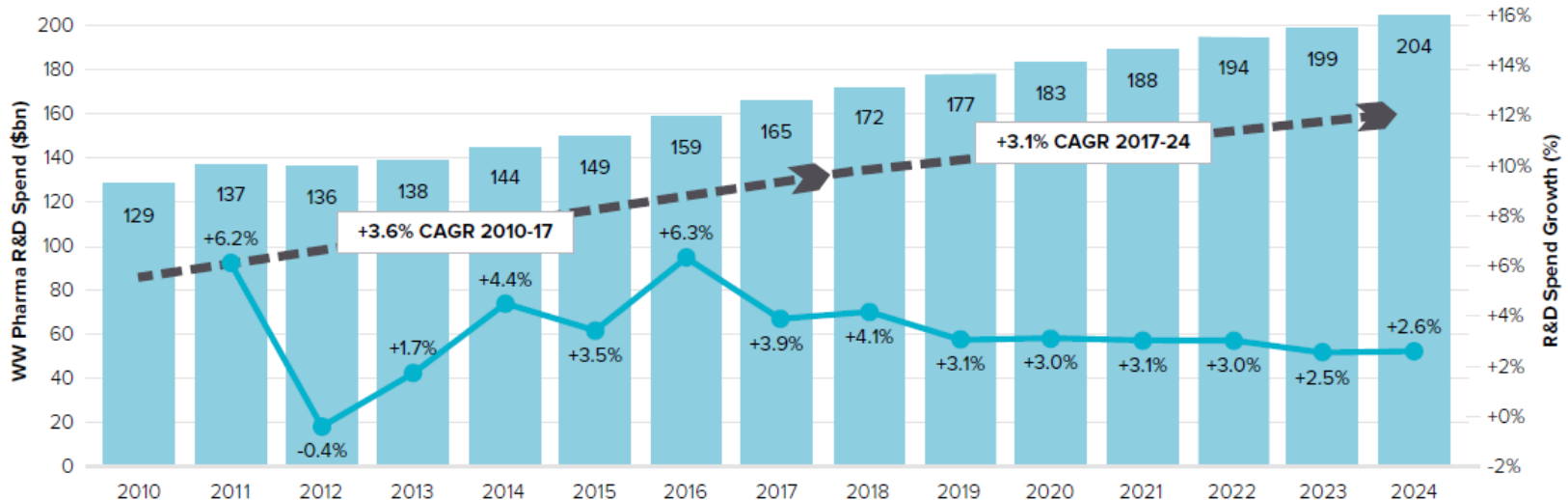
Pharma R&D Spend



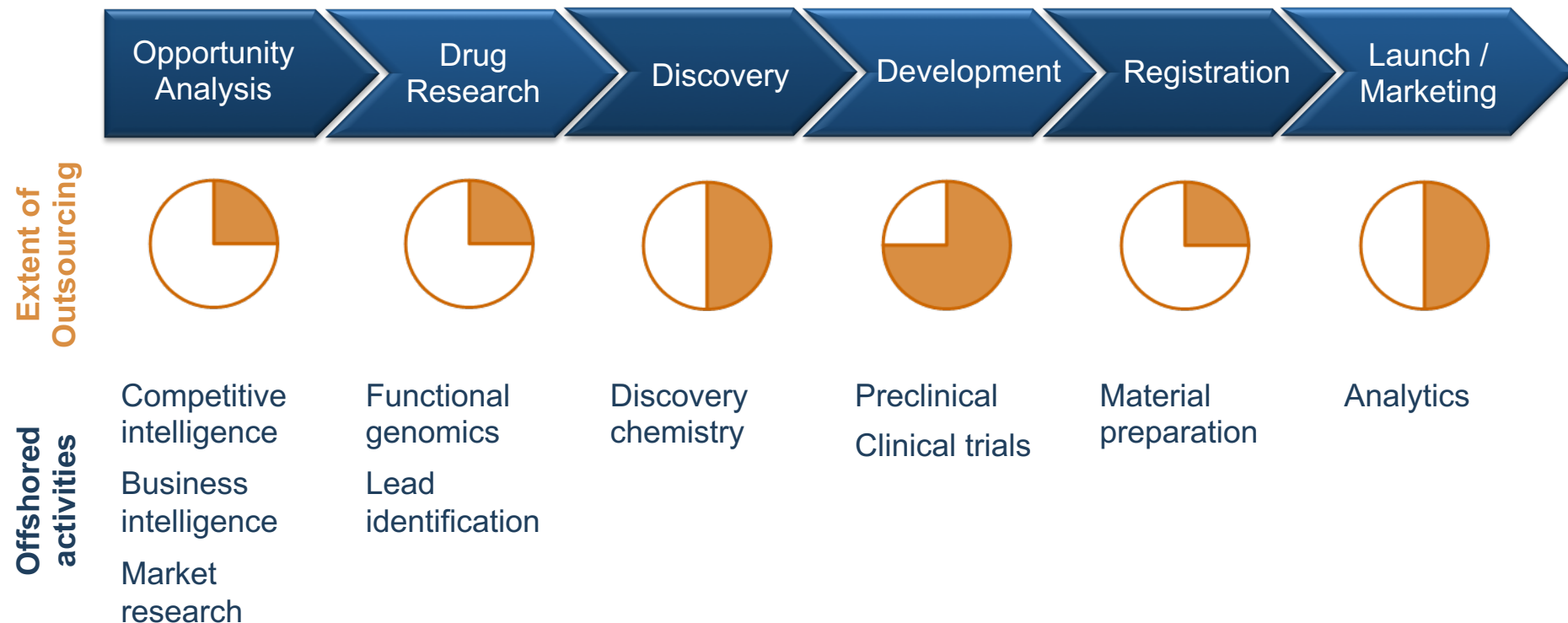
- Average forecast R&D spend to pharmaceutical revenue: 19.5% btw 2010 and 2017, 18.9% in 2024
- Need of improving R&D efficiencies

Worldwide Total Pharmaceutical R&D Spend in 2010-2024

Source: Evaluate, May 2018

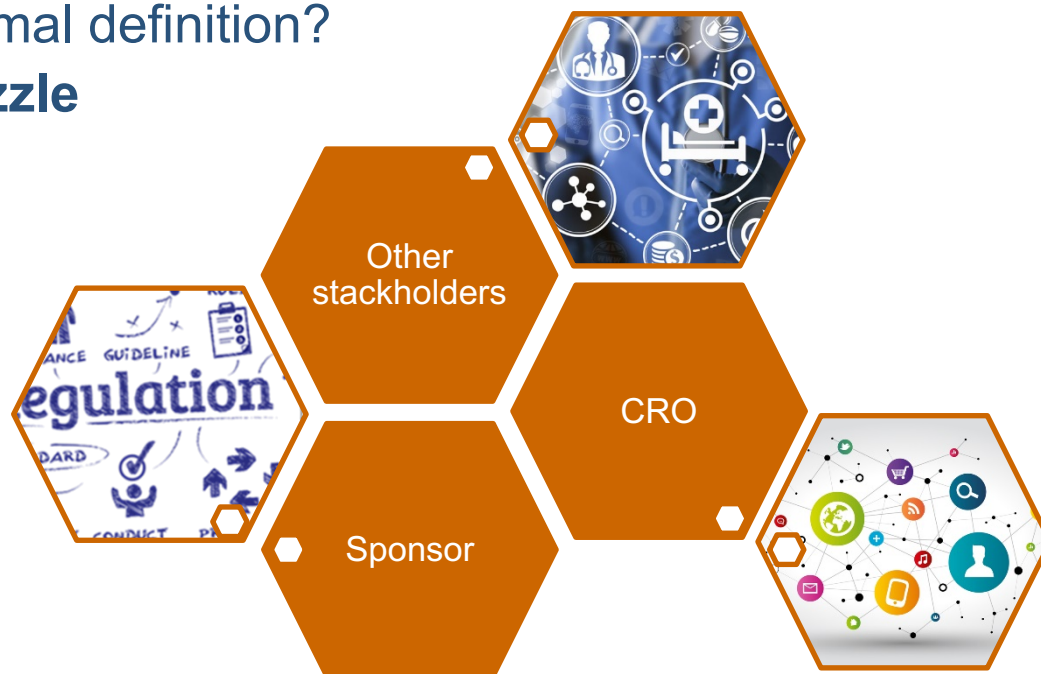


Pharma R&D Outsourcing





- Definition on Google:
Obtain (goods or a service) by contract from an outside supplier
- What is beyond this formal definition?
Putting together a puzzle





PROJECT MANAGEMENT

Communication
Planning
Resources
Equipment
Timelines
Budget
Flexibility
KPIs

TECHNICAL

Expertise
Study design
Development
Validation
State of the art
Sample management
Data transfer
Reporting

REGULATORY & QUALITY

GLP
GCP
GMP
EMA
FDA
PMDA
ANVISA
Guidelines
Data integrity

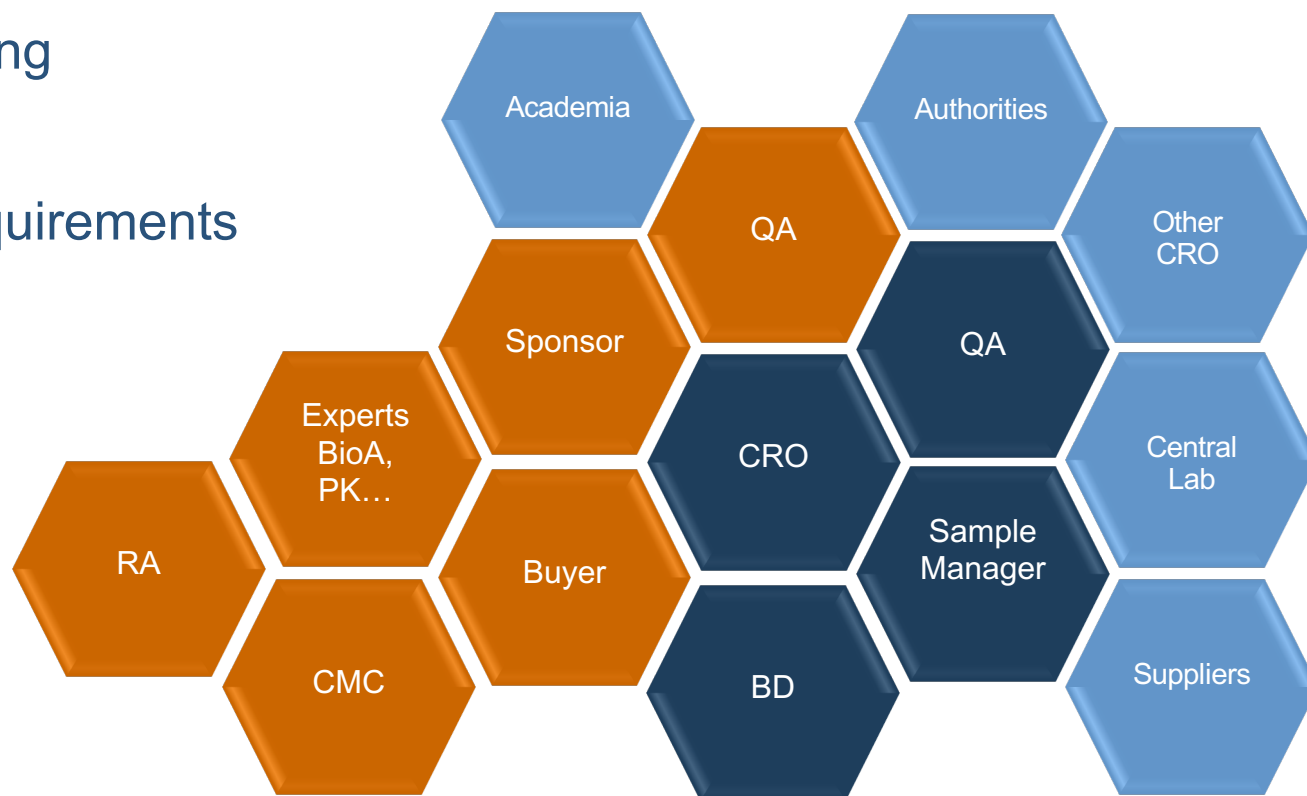


- **Building a strong relationship** is the key for outsourcing projects
- Relationship based on:
 - Teamwork and trust
 - Shared vision
 - Open communication
 - Good personal relationship
 - Understanding perspective
 - Mutual respect
 - Common commitment





- Method requirements
- Analytical standards & CoA
- Sample handling
- Stability data
- Regulatory requirements
- ...



Initiation of the partnership

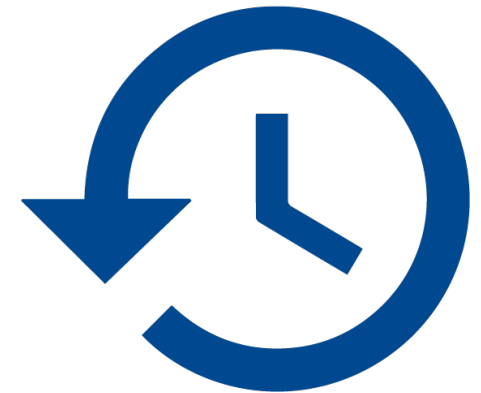


- Partnership starts with a request
- Often managed by BD/commercial team, supported by experts
- Establishment of a contract corresponding to the request
- Need to speak the same language
- Setup the communication tools
 - E-mail communication
 - F2F meetings
 - TC, webex





- Management and respect of timelines are the crux of any projects
 - Dedicated project manager and team
 - Updates at predefined frequency
 - Use of project management tools (Gantt...)
 - Communication of any issues and delays
 - Knowledge of the whole project pipeline to prioritize outsourced activities





- Collection specifications and precautions are not always clearly defined at the initiation of a pre-clinical/clinical study
- Implement an open communication as soon as possible during protocol drafting
- Practical limitations have to be considered during method development
 - Materials (tubes, pipettes, centrifuges, freezers...),
 - Ready-to-use commercial tubes or preparation,
 - Toxicity of stabilizer...

Sample management



- Define, in the protocol, SOP or separate document (e.g. lab manual), the sample collection and identification details:
 - Collection tube and anticoagulant,
 - Labelling and information,
 - Number and volume of aliquots,
 - Sample process,
 - Collection precautions (temperature, duration) according to stability data,
 - ...



Sample management



- Ensure storage conditions at each step, from sampling to long-term storage, including shipment and analysis
 - Sampling files
 - Shipment data logger
 - Bioanalysis data
 - Freezer monitoring
- Ask for import permise
- Check compliance of sample tube identification and files provided along with samples, to ensure data integrity





- Same language, same guidelines... but own practices
- Method transfer from Pharma to CRO (or between CROs) should be anticipated to ensure:
 - Project timelines,
 - Data reliability,
 - Sample and data integrity
- Smooth method transfer can be achieved when detailed instructions are shared (analytical procedure and overlooked details)
 - Avoid interpretation of the method
 - Clarify any points



- Define the transfer procedure:
 - Has the method been modified?
 - What do guidelines state?
 - Which tests have to be included?
- Method transfer allows to assess the robustness of the method
- Slight differences may have a significant impact on the method performances and robustness:
 - Environment conditions,
 - Process,
 - Materials,
 - Instruments...



- Innovation is fundamental to improve R&D, initiated by need or new idea (Pharma, CRO, academia, supplier)
 - Process innovations: sample and data management, scientific validation approach, automation...
 - New technologies to save time and/or improve data quality
 - Driving innovations: patient (sample volume, sampling techniques), regulatory...
- Risk is part of innovation, and this risk has to be known and shared by all involved parties
- Regulators have to be involved in innovation, to accept it and implement guidelines



Case study #1



- Transfer of a validated method for the assay of a drug and its metabolites in human plasma
- Analytical standards provided as free base according to CoA
- Review of the protocol of dose escalation study in human
 - Same batch administered to subjects
 - Identified as a chlorhydrate salt
- Confirmation by the Sponsor of the salt form of the API (also used as analytical standard)
 - Request for a statement or an updated (and corrected) CoA
 - Correction of all validation data (reprocess and update of the SOP)

Case study #2



- Development and validation of a semi-automated method for the assay of one drug in human plasma
- Requirement of use of 2D-barcoded 96-format cryotubes
- Review of lab manual for implementation of the tubes
- Reception of first plasma samples to be assayed:
 - Samples stored in labelled 2D-barcoded 96-format cryotubes, stored in 10-mL PP tubes
 - Samples identified with 3 different codes
- Samples to be rearranged to be compatible with 2D-barcode reader and automate
- Risk of thawing and data integrity



Case study #3



- Transfer of a validated method for the assay of lidocaine in mini-pig plasma, to support pre-clinical PK studies
- Assay of PK samples: Concentrations found to be 10 times lower than for a previous PK study
- Investigation:
 - Validation and transfer data
 - Procedures applied for blood sampling
 - Materials used for in-life phases
- Tests of adsorption in blood and plasma using the different tubes and stoppers
 - Results due to adsorption of lidocaine into collection tubes used for storage of plasma samples

Case study #4



- Development and scientific validation of a method to assay letrozole in rat plasma to support pre-clinical studies (BA, formulation screening), with a LLOQ of 0.1 ng/mL (Sponsor requirement)
- In-life phase in rat: several formulations, doses and administration routes
- Assays with calibration range of 0.1 to 50 ng/mL:
 - Group 1 (IV): all samples within range
 - Groups 3 to 8 (SC): more than 75% of samples higher than the ULOQ, up to 500 times ULOQ
- Options: Dilution vs. high range validation
- Re-validation of the method for High range for ethical and scientific reasons



Case study #5



- With a strong partnership, early PK studies can be managed efficiently, for the screening of drug substances or formulation
 - Quick communication
 - Reliable results
 - Quick turnaround time
 - Cost optimization



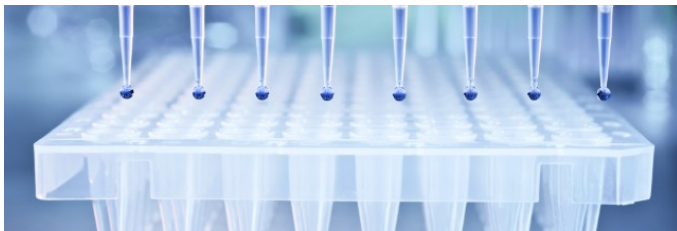
Conclusion



- A good communication is fundamental for a meaningful partnership between Sponsor and CROs
- Communication tools have to be adapted to each project, depending on needs of involved actors
- Bioanalysis is not always a smooth journey, but what is better than working together for managing and solving analytical issues?
- Keep communicating, communicating, communicating...



Thanks for your attention



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