EUROPEAN BIOANALYSIS FORUM -YOUNG SCIENTIST SYMPOSIUM

Evaluation of Multiple ADA Assay Formats for Achieving Highest Drug Tolerance

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Agenda

- Understanding the importance of drug tolerance testing in ADA assays
- Addressing the current challenges of immunoassays
- Comparison of multiple ADA methods to demonstrate best achievable drug tolerance vs assay sensitivity
 - Cost of reagents, assay time and complexity of analytical procedure
- Providing the method development team with a potential guide/solution in terms of drug tolerance discussions with clients during initial assay setup stages



Considerations with immunogenicity testing

Overestimation and underestimation of ADA

Effect of acid and heat denaturation

Presence of free drug can result in decrease of assay sensitivity

Matrix interference



Drug tolerance (DT)

What is it and why is it important?

- Drug tolerance of an assay is defined as the measure of the maximum concentration of drug that can be present in a sample and not prevent a positive sample from being detected
 - Assesses if an assay is adversely influenced by the presence of high levels of drug
- Increasingly important in the rise of biologics with longer half-lives as samples contain higher concentrations of drug at numerous time points
 - Within clinical dosing, the C(trough) is considered the minimum required DT level
 - Misinterpretation can have dangerous consequences
- FDA recommendation that antibodies should be evaluated down to 100 ng/mL for human samples and 250-500 ng/mL for nonclinical testing
 - For those that reach low DT, optimisation required to ensure false-negatives are not produced during screening





$Trastuzumab - Herceptin^{\mathbb{R}}$

- Humanised IgG1 kappa monoclonal antibody
- Targets and binds to the extracellular domain of the human epidermal growth factor (HER2)
- HER2 is responsible for the mediating of cell signalling, proliferation and differentiation
- Trastuzumab binds to HER2:
 - Inhibiting HER homo-dimerisation and cells undergo arrest in the G1 phase
 - Prevention of PI3K and MAPK pathways
 - Stimulates platelet-activating factors, resulting in antibody dependent cytotoxicity and leading to death of cells that express HER2
- Average C(trough) in clinical studies is 47 μg/mL



(DrugBank, 2022)



Method development process





Heat dissociation



Independent of the incubation times, the achieved Drug tolerance was 0 µg/mL at the recommended sensitivity for clinical studies of 100 ng/mL.



Assay type		Level of Trastuzumab in matrix (µg/mL)				
		0	1	10	50	100
Positive control level (100 ng/mL)	Heat Dissociation (1 hour)	+	-	-	-	-
	Heat Dissociation (4 hours)	+	_	-	-	-
	Heat Dissociation (24 hours)	+	-	-	-	-

The highlighted boxes represent signals above the positive cut point.



Acid dissociation

Evaluation of acid





Acid dissociation

Level of Trastuzumab	Signal : Noise Ratio at Positive Control Level (100 ng/mL)				
in Matrix (μg/mL)	Elution buffer pH 2.0	Elution buffer pH 2.8	Acetic Acid 300M	Acetic Acid 600M	Glycine 0.5M
0.00	4.092	4.809	4.554	4.586	4.000
1.00	3.154	2.279	2.189	2.608	3.354
10.00	1.508	1.206	1.216	1.392	1.769
50.00	1.092	1.000	0.946	1.000	1.092
100.00	0.985	0.941	0.919	0.959	1.031

The highlighted boxes represent signals above the positive cut point.



Acid dissociation

Evaluation into effect of pH change



Level of Trastuzumab (µg/mL) at 100ng/mL sensitivity

The highlighted boxes represent signals above the positive cut point.



HISDA High ionic salt dissociation assay

Level of Trastuzumab in	P/N Ratio at Positive Control Level (ng/mL)			
Matrix (μg/mL)	100.00	250.00	500.00	
0.00	1.549	2.305	3.793	
1.00	1.280	1.744	2.037	
10.00	1.110	1.329	1.500	
50.00	1.134	1.171	1.073	



The highlighted boxes represent signals above the positive cut point.

Drug Tolerance Not optimal reaching only 1 μg/mL at 100 ng/mL with 62°C heat Assay Time & Complexity Utilises the simple standard bridging assay with MgCl Total procedure can take around 2 hours

Cost of Reagents Assay only uses MgCl which is £62 for a 1kg so is inexpensive Optimisation Rationale Checkerboard approach with changes to dilutions of samples in MgCl and Mastermix Future Optimisation Work Trialling different temperatures for the dissociation of ADA as the initial incubation was not effectively dissociating

Increasing agitation speed



ACE Affinity capture elution

Level of Trastuzumab in Matrix (ua/ml)	P/N Ratio at Positive Control Level (100 ng/mL)			
	Format 1	Format 2	Format 3	
0.00	8.000	6.476	1.947	
1.00	1.604	2.679	1.213	
10.00	1.743	1.155	1.067	
50.00	1.109	0.810	1.000	
100.00	0.782	0.774	0.973	

The highlighted boxes represent signals above the positive cut point of 1.25.



Format 1: 2-day assay with overnight neutralisation on high bind MSD

Format 3: 2-day assay with master mix concentration on Strep MSD plate

Format 2: 1 day assay on a high bind MSD

Drug Tolerance Format 1 achieved highest

Assay Time and Complexity Dependent on format For highest DT, 2 day assay required More technically complex due to the use of two acid dissociation steps

Cost of Reagents

Difference within MSD plates with formats High bind plates retail slightly more than Streptiviidin MSD plates Format 3 has the additional use of Biotin

BEADs Biotin-extraction and acid dissociation

Level of Trastuzumab in Matrix (ug/mL)	P/N Ratio at Positive Control Level (ng/mL)			
(µg)	100	250	500	
0.00	4.811	11.774	20.151	
1.00	2.377	4.283	8.283	
10.00	1.604	2.151	3.717	
50.00	1.113	1.528	1.811	
100.00	1.075	1.302	1.547	
500.00	1.038	1.000	1.113	
1000.00	0.943	1.038	1.094	

The highlighted boxes represent signals above the positive cut point.



 $\label{eq:Drug Tolerance} \ensuremath{\mathsf{Drug Tolerance}} \ensuremath{\mathsf{The recommended sensitivity}} \ensuremath{\mathsf{by the FDA}}\xspace is 100 \ensuremath{\mathsf{ng/mL}}\xspace$ and at that level, the achieved DT was 10 $\mu\text{g/mL}$

Assay Time and Complexity 1 day assay Requires training as it is a complex assay that requires use of magnetic wash programmes

Cost of Reagents High Use of NanoLink Streptavidin Magnetic Beads which retail £2400 for 10mL Around £100 for one plate



BEHDs Biotin-extraction and heat dissociation

Level of Trastuzumab in Matrix (ua/mL)	P/N Ratio at Positive Control Level (ng/mL)			
(p.g)	100	250	500	
0.00	7.361	14.213	35.738	
1.00	2.344	4.066	7.689	
10.00	1.672	3.016	4.475	
50.00	1.295	1.738	3.210	
100.00	1.180	1.656	2.279	
500.00	0.984	1.016	1.295	
1000.00	0.934	1.000	1.016	

The highlighted boxes represent signals above the positive cut point.

Drug tolerance

DT reached $50\mu g/mL$ at the required 100 ng/mL Above the C(trough) level, which is comparable to Glycine at pH 2.0

Assay Time and Complexity

1 day assay Requires 62°C heat dissociation step as an alternate for acid for the dissociation of ADA: drug complexes

Cost of Reagents

High Use of NanoLink Streptavidin Magnetic Beads



SPEAD Solid phase extraction and acid dissociation

Level of Trastuzumah in	P/N Ratio at Positive Control Level (ng/mL)			
Matrix (μg/mL)	100	250	500	
0.00	1.317	3.756	2.817	
1.00	1.390	2.659	4.732	
10.00	1.598	3.622	4.890	
50.00	1.841	3.122	3.317	
100.00	1.427	2.085	3.524	
500.00	1.146	1.220	1.768	
1000.00	1.061	1.244	1.598	
2000.00	0.976	1.110	1.256	

Drug Tolerance Achieving 100 µg/mL at 100 ng/mL Above C(trough) level for Herceptin

Assay Time and Complexity

Similar design to ACE with 2 day assay and overnight neutralisation

> **Cost of Reagents** Low due to use of standard reagents



PANDA Precipitation and Acid Dissociation

Level of		P/N Ratio at Positive Control Level (ng/mL)			
in Matrix (μg/mL)	0	100	250	500	
0.00	1.000	1.364	2.333	4.515	
1.00	1.015	1.455	2.288	3.773	
10.00	0.970	1.409	2.061	3.076	
50.00	0.955	1.379	2.091	3.403	
100.00	1.045	1.591	2.333	3.621	
500.00	0.970	1.652	2.682	3.697	
1000.00	1.030	1.682	2.606	4.303	
2000.00	0.985	1.788	2.652	4.348	
3000.00	0.985	1.742	3.030	5.242	
4000.00	0.985	2.015	2.985	5.909	
5000.00	0.985	2.061	3.448	5.955	

The highlighted boxes represent signals above the positive cut point.

This assay was able to produce the highest DT level of 5 mg/mL



Assay time Assay is split over two days with an overnight incubation with PEG

Cost of Reagents

Polyethylene glycol is quoted at £105 per kg - Around £1 for PEG buffers Assay requires use of excess drug during coating of plate so higher cost of drug

Assay Complexity

Requires multiple optimisations Concentrations of PEG have to be optimal for drug to ensure both sensitivity and specificity are balanced Not a one size fits all method



Format comparison



Drug Development

■ 100 ng/mL ■ 250 ng/mL ■ 500 ng/mL

Conclusions

Methods that achieved above the clinical C(trough) level at 100 ng/mL sensitivity

- Acid dissociation with glycine (pH2.0)
- Biotin-extraction and heat dissociation
 - Precipitation and acid dissociation
- Solid-phase extraction and acid dissociation

Need for a simple, robust and not overly complex method to allow for high through-put when scaling up



Additional research with other monoclonal antibodies would aid in the development of a guide that can be used for initial assay development





Thank you for listening!

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