Pros and Cons of Different Approaches to ADA Domain Specificity Characterisation

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Agenda

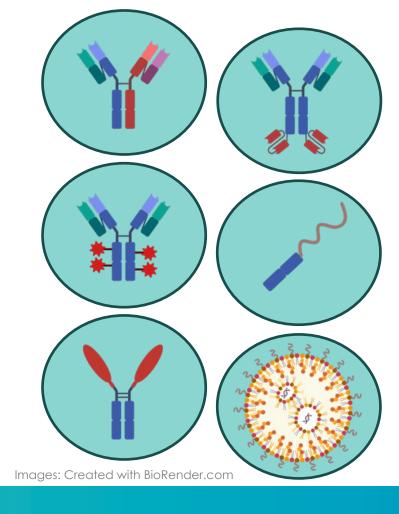
- Introduction to multi-domain therapeutics
- Approaches for domain specificity assessment
- Pros & cons of different approaches
- Concluding remarks



Multi-domain therapeutics

What are they?

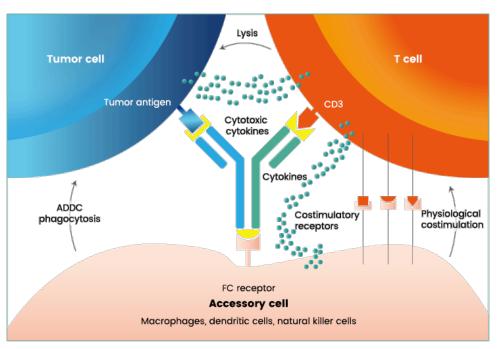
- Therapeutics which contain 2 or more structural domains or components
- Each with a distinct function relevant to the mechanism of action (MoA)
- Domains linked together through genetic/protein engineering or chemical conjugation
- Examples include:
 - Bi-specific & tri-specific antibodies
 - Antibody-drug conjugates (ADCs)
 - PEGylated proteins/peptides & fusion proteins
 - Lipid nanoparticle (LNP) encapsulated RNA/DNA



Multi-domain therapeutics

What are the benefits?

- Enhanced efficacy
- Targeted delivery
- Reduced side effects
- Versatility
- Improved pharmacokinetics
- Cost-effective



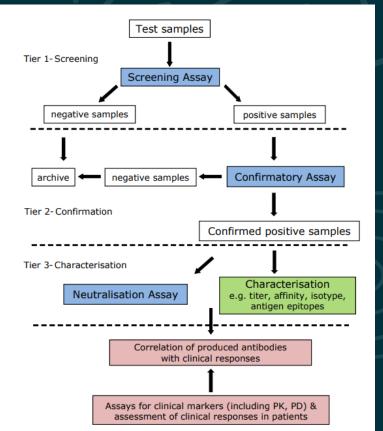
Images: https://www.sinobiological.com



Evaluating the immunogenicity of therapeutic proteins

- Clinical immunogenicity assessment typically follows a multi-tiered approach
 - Screening
 - Confirmation
 - Characterisation

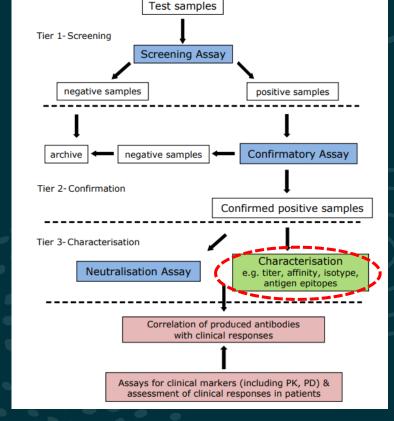




Evaluating the immunogenicity of therapeutic proteins

- For a 'typical' biotherapeutic, characterisation usually consists of:
 - Titer
 - Neutralising antibodies (NAb) for later clinical studies
- For multi-domain therapeutics, characterisation may also require the elucidation of the domain specificity of the immune response

Image: EMA Guideline on Immunogenicity Assessment of Therapeutic Proteins EMEA/CHMP/BMWP/14327/2006 Rev 1





Strategies for assessing ADA domain specificity

Strategies for ADA domain specificity characterisation

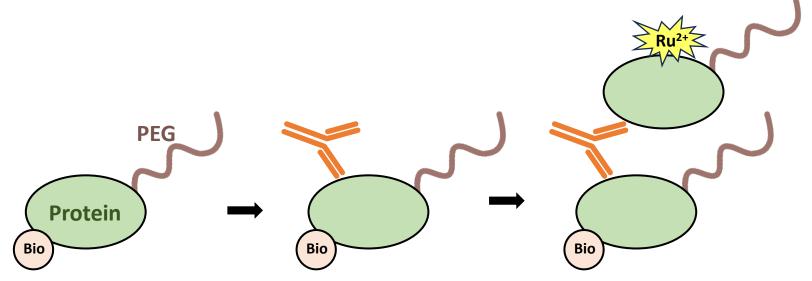
- Characterisation of the ADA domain specificity can be achieved by a number of approaches, typically:
 - Domain competition (usually based on the confirmatory assay)
 - Separate assays with each domain, and a positive control to that domain



ADA domain specificity characterisation

Example: PEGylated peptide/protein

Total ADA: **Screening** assay



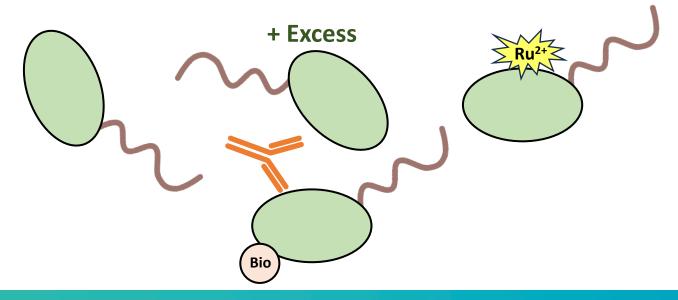


ADA domain specificity characterisation

Example: PEGylated peptide/protein

Total ADA: **Confirmation** assay

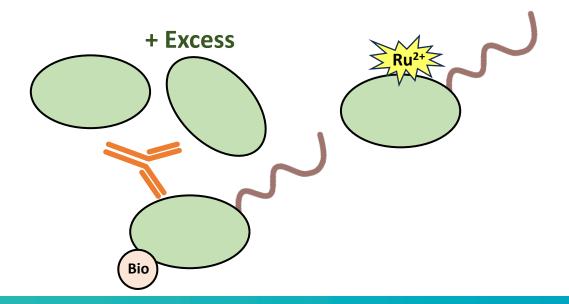
Compete with whole molecule



ADA specificity determination: Protein domain

Example: PEGylated peptide/protein

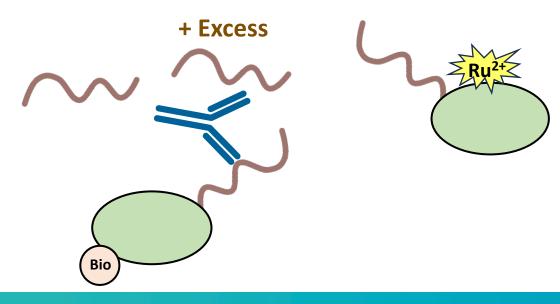
Compete with protein lacking PEG



ADA specificity determination: PEG domain

Example: PEGylated peptide/protein

- Compete with excess PEG
 - Requires an anti-PEG PC



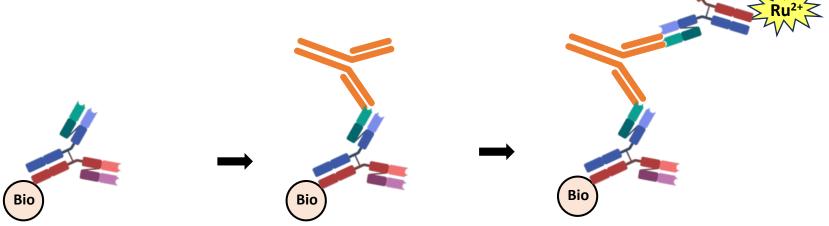


ADA domain specificity characterisation

Example: Bispecific antibody

Total ADA: **Screening** assay

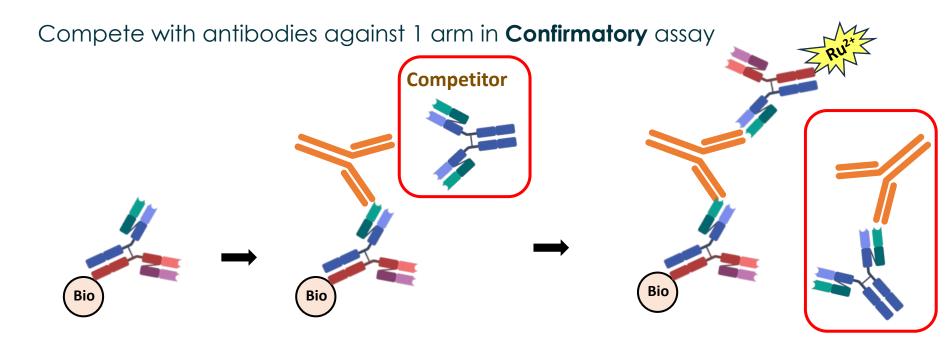
 PC may be against 1 arm, or a mix of antibodies against both arms





ADA domain specificity characterisation

Example: Bispecific antibody





Pros & cons of the domain competition approach

Requirements

- Requires individual domains for the competition assays and (ideally) domainspecific positive control (PC) antibodies
 - Domain reagents are readily available for some molecule formats, but can be extremely challenging to produce for other formats
 - May be possible to use a polyclonal PC which contains antibodies against each domain

PROs

 Relatively straightforward to set up, as the specificity assay(s) are based on the confirmation tier

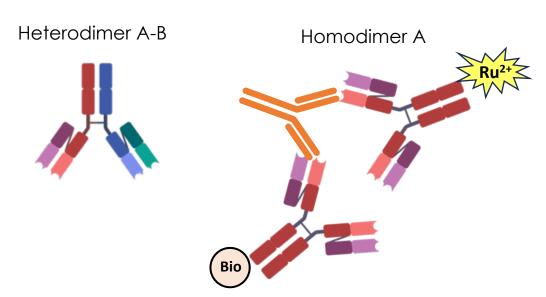
CONs

 The approach can lack sensitivity to detect low levels of domain specific antibodies, particularly if there is a high prevalence of ADA to the other domain



Example: Bispecific antibody

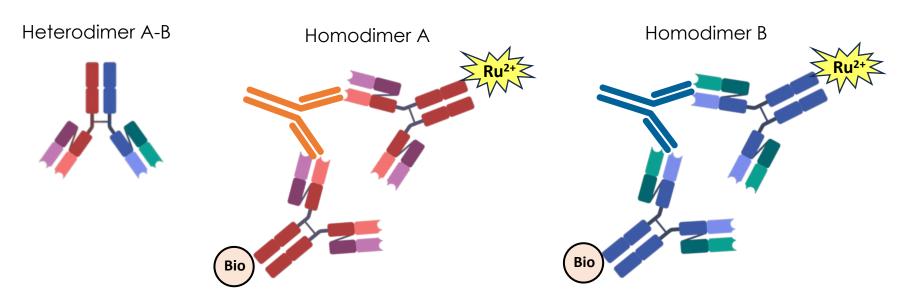
Separate assays with each homodimer can be used for specificity assessment





Example: Bispecific antibody

Separate assays with each homodimer can be used for specificity assessment





Pros & cons of the separate assay approach

Requirements

- Requires individual domains for the assay set-up and domain-specific PC
 - Domain reagents are readily available for some molecule formats, but can be extremely challenging to produce for other formats

PROs

- For simpler molecules like bispecifics, it can be relatively straightforward to set up, as the specificity assays are based on the screening assay conditions
 - Some optimisation may be required with the different domain capture/ detection and the different PCs
- Usually sensitive to detect domain-specific antibodies

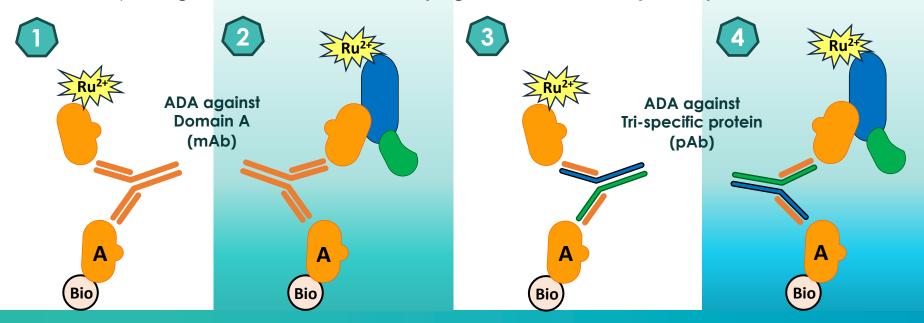
CONs

 For more complex multi-domain proteins, extensive assay set-up is required for each domain-specific assay

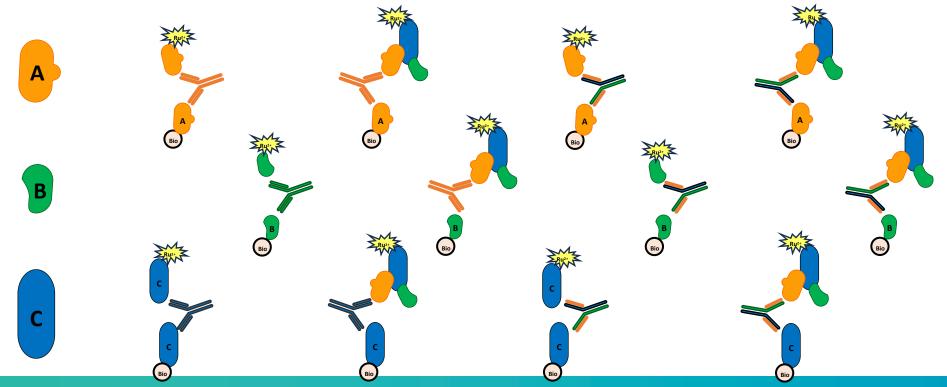


Example: Tri-specific protein (e.g. Protein A-B-C)

- Detection may be single domain or the whole tri-specific protein
- PC may be against 1 domain, or antibody against the whole tri-specific protein

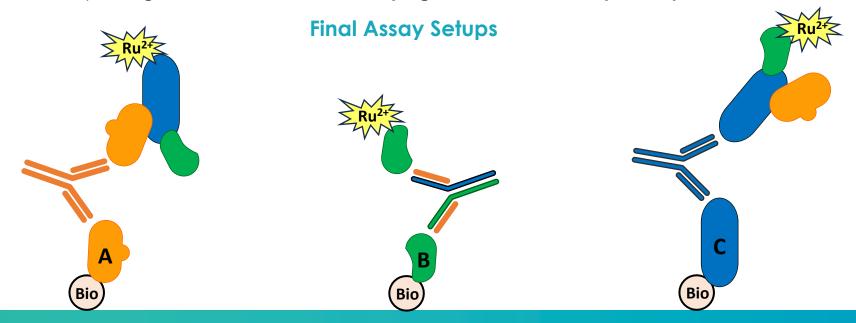


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Summary

Advantages of domain specificity characterisation

- Comprehensive understanding:
 - Crucial for understanding the overall immunogenicity of the therapeutic
 - Can design / modify to reduce immunogenicity
- Safety and efficacy: Help in predicting potential cross-reactivity with endogenous proteins
- Regulatory approval: Can provide comprehensive data that can support regulatory submissions

Summary

Challenges of domain specificity characterisation

- Technically challenging: due to the complexity of the biotherapeutic and the potential for cross-reactivity between domains
- Cost and time: time-consuming and expensive
- Interpretation challenges: The presence of ADAs against one domain might influence the detection or binding of ADAs against another domain
- Bioanalytical challenges: Require highly specific and sensitive assays

Concluding remarks

When is characterisation of ADA specificity required for multi-domain therapeutics?

 For each multi-domain therapeutic program, the timing and extent of ADA domain specificity assessment needs to be considered

Preclinical

- Domain specificity assessment is unusual in preclinical studies
- Where specificity is assessed, it is driven by project-specific reasons, e.g., de-risking domains within a molecule platform which could lead to loss of exposure in IND-enabling studies

Concluding remarks

When is characterisation of ADA specificity required for multi-domain therapeutics?

Clinical

- Early clinical studies may not require detailed assessment of domain specificity
 - Generation of reagents/tools that will be required for specificity assessments
 - Developing prototype specificity assays to prepare for later clinical stages
- Later clinical studies will likely require some level of ADA domain specificity
 - Extent can be guided by risk of the molecule and observation of both incidence and consequence (e.g., changes in PK, PD) seen in earlier studies

Acknowledgements

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Thank you

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