Note



 These are excerpts from the discussion at JBF ICH-M10 workshop 2023. Please note that these do not represent the official position of JBF.



NA for LBA



- Did not discuss about these topic on JBF M10WS 2023
 - L3: Surrogate/rare/preclinical matrix for LBA
 - L4: Chrom requirements infecting LBA
 - PL-01: Tissues how are you interpreting the requirements?



L1: Dilutional Linearity & Parallelism



- Assess parallelism as a standard MV parameter? → No (almost all members)
- One sample is sufficient to assess parallelism? → No (all members)

Comments

- If selectivity using patient samples passes, parallelism for this population may be unnecessary.
- Parallelism of antibody drugs to soluble ligands may be unnecessary if the addition of ligands or ADA does not affect the measurement of antibody drugs.
- We are discussing that it may be a good idea to check whether the value changes by changing the dilution ratio using a study sample near Cmax.



L2: Singlicate vs duplicate analysis



- Was singlicate analysis as standard process before ICH-M10?

 No (almost all members)
- Is singlicate analysis as standard process after ICH-M10? → No
 - LBA is often highly variable.
 - To monitor the edge effect.
 - Cannot recognize abnormal value by singlicate analysis.
- What else is needed to make you move into singlicate analysis?
 - Cases where there is no problem with statistical interpretation even if there are outliers.
 - Example of singlicate analysis (e.g., trends in Europe and US)

Comments

- If small CV can be obtained by measuring a QC sample in duplicate, then it is possible to measure study samples by singlicate.
- Even if study samples are measured by singlicate, it should be considered that QC samples are measured by duplicate.
- When using Gyrolab, peak shape is an indicator of whether a singlicate can be adopted.



L5: Dilution QCs during sample analysis



 Do you include dilution QCs as standard in sample analysis runs? → Yes (minority) and No (majority)

 Are they solely to cover dilutions outside of the validated bracket of dilution factors? → Yes (some members [others did not respond])

Other topics of this theme were not covered in JBF M10 workshop.



PL-02: Blood stability and LBA



- Is it clear when blood stability is required? → Yes
 - For LBA, stability in whole blood is basically NOT necessary.
 - For antibody drugs which are not transferred to blood cells such as lymphocytes, whole blood stability assessment is NOT needed.
 - In some cases, whole blood stability cannot evaluate. (e.g., Antibody drugs targeting lymphocytes; they may be transferred to lymphocytes during whole blood stability assessment, and the plasma concentration of them may decrease.)