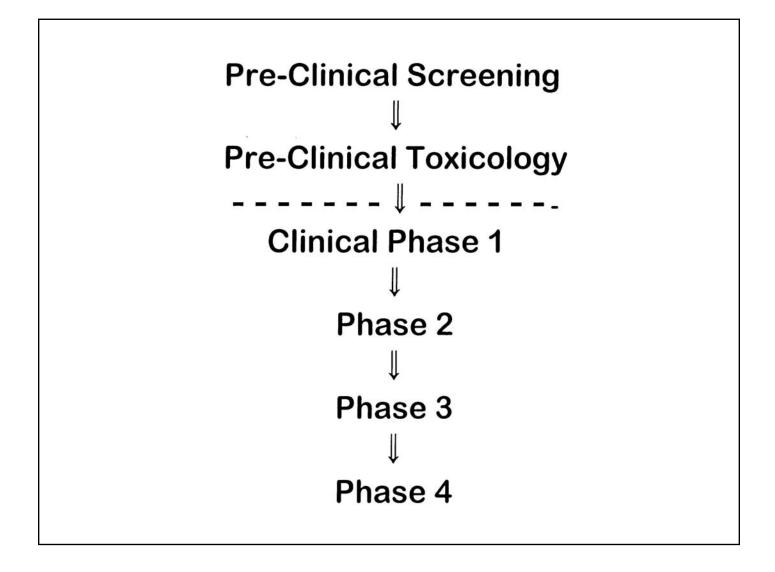
Phase 1 Clinical Studies First-In-Human (FIH)

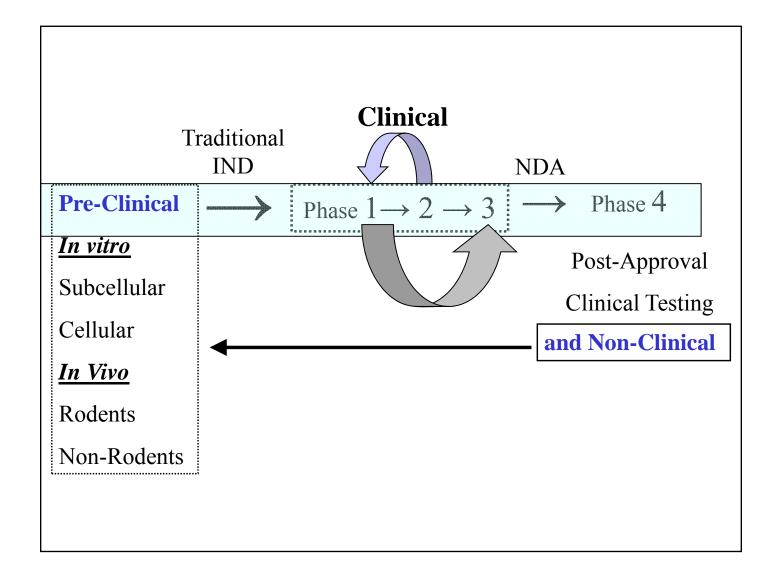
<Chapter 31>
Pharmacologically-Guided
Dose Escalation

Jerry M. Collins, Ph.D.

Developmental Therapeutics Program

Division of Cancer Treatment and Diagnosis, NCI April 1, 2010





//nihroadmap.nih.gov



- <u>▶ Overview</u>
- ► NIH Roadmap Initiatives
- ► Grants and Funding Opportunities
- ► Frequently Asked Questions
- ▶ Press Release
- ▶ Press Briefina Video
- ► <u>Science Magazine</u> Article
- ► Subscribe to the NIH Roadmap E-mail list

New Pathways to Discovery

- ▶ Building Blocks, Biological Pathways, and Networks
- ▶ Molecular Libraries and Imaging
- ▶ Structural Biology
- ▶ <u>Bioinformatics and Computational</u> <u>Biology</u>
- ▶ Nanomedicine

Research Teams of the Future

- ► High-Risk Research
- ▶ Interdisciplinary Research
- Dublic Drivato Dartnorchine

Re-engineering the Clinical Research Enterprise

Re-engineering the Cililical Research Enterprise

What's New

- ► Meeting: Nanomedicine Project Launch and Planning — Mav 4
- ► <u>Meeting: NIH Roadmap</u> Briefing
- ▶ NIH Director's Pioneer Award
- ▶ Addendum to RFA-RM-04-005, "National Technology Centers for Networks and Pathways" Page Limits and Budget Pages
- ▶ RFTOP-RM-169, Inventory and Evaluation of Clinical Research Networks 🔼
- ► Meeting: Chemistry and Biology: Partners in Decoding the Genome

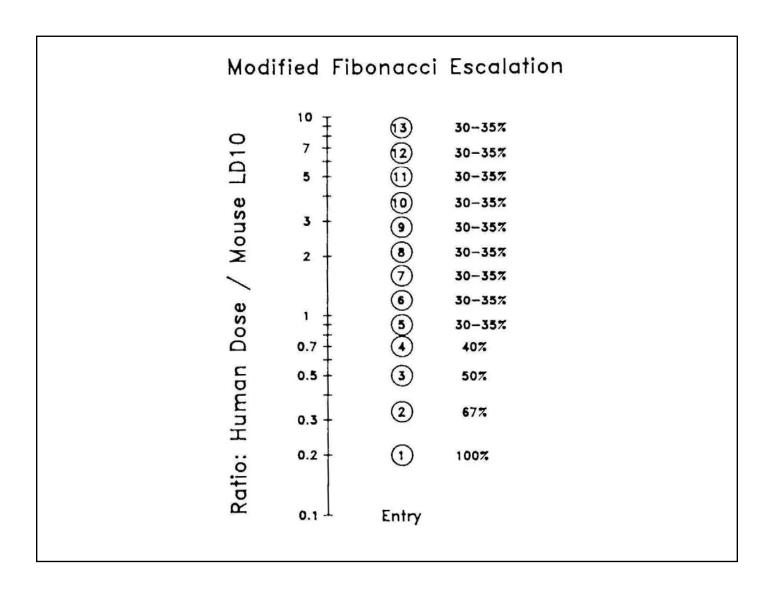
Re-Engineering Phase I (FIH) Trials

- 1. Pipeline/Funnel Pressure: combinatorial/HTS, new Sponsors
- 2. To Phase I Faster, Less Preclinical Work
- 3. Fewer patients, homeopathic doses
- 4. More patients "near-Phase 2" doses
- 5. "Value-Added" factors
 - PK only: variability, metabolism/pharmacogenetics
 - PD: Decisions to Drop/Continue

Design of Phase 1 (FIH) Trial

- Starting Dose
- Escalation Scheme

For Both Elements, Conflict Between Caution/Safety vs. Efficiency/Efficacy



BIBLIOGRAPHY / COLLINS / PHASE 1

J.M.Collins, D.S.Zaharko, R.L.Dedrick, B.A.Chabner. Potential roles for preclinical pharmacology in Phase I trials. Cancer Treat. Rep. 70:73-80, 1986.

- ** Message: we do a lot of preclinical pharm studies;
 - - what do we learn?
 - - how is it used?
- ** Initial proposal for customized dose escalation.
- J.M. Collins, C.K. Grieshaber, B.A. Chabner. Pharmacologically-guided Phase I trials based upon preclinical development.
- J. Natl. Cancer Inst. 82:1321-1326, 1990.
 - ** Note that title does not say "PK"

 Intended as an overall platform

 Summarizes mostly retrospectively

PK-PD Hypothesis:

When Comparing
Animal and Human Doses,
Expect Equal Toxicity for
Equal Drug Exposure

Concentration of Drug as a Biomarker or Endpoint

Bridges Between Preclinical and Clinical Development

Preclinical

Pharm/Tox

Mouse MTD



Blood Levels



Clinical

Phase 1 Trials

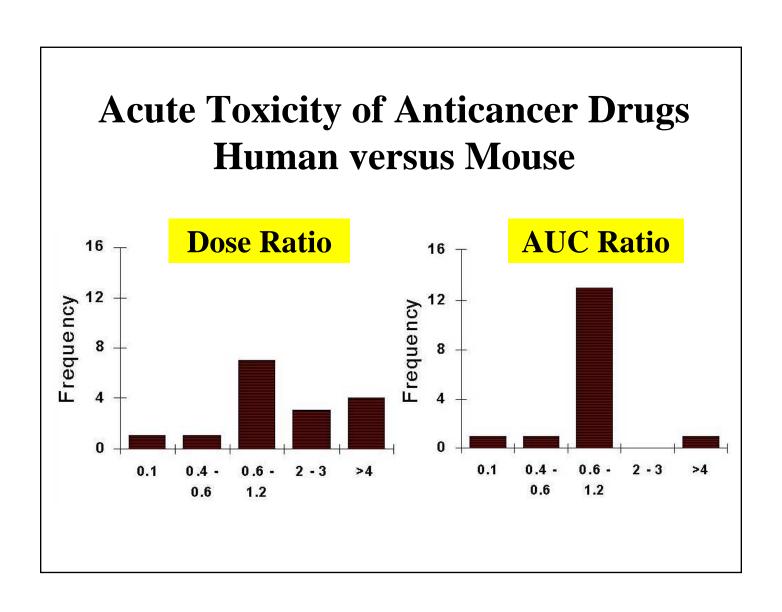
Starting Dose



Blood Levels



Escalation Strategy



Conclusion: Hypothesis has merit.

Follow-Up:

What is underlying reason for interspecies differences?

S.Markey, 8-Nov-01, <not in current year's examples>

Additional Effects on Drug Metabolism Species Differences

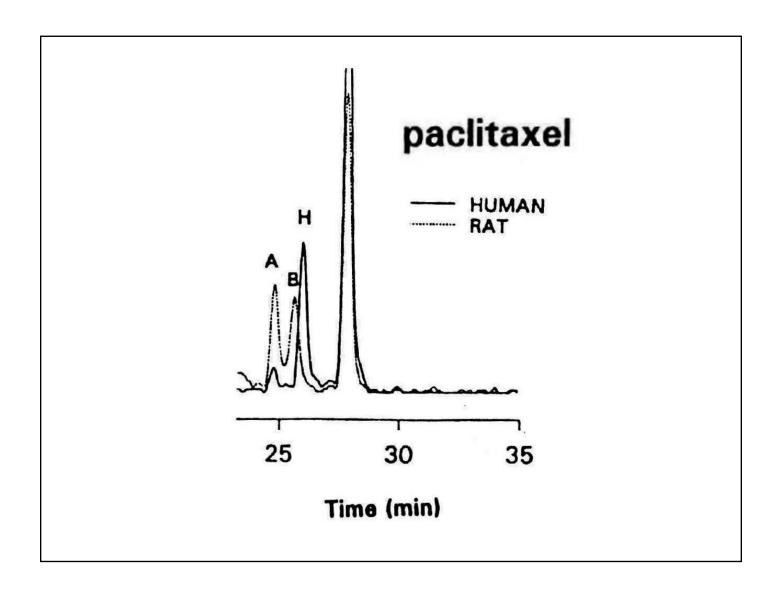
- <u>Major</u> differences in drug metabolism in different species have been recognized for many years both in gut microflora and CYP proteins
- Example: phenylbutazone half-life is:

3 h in rabbit

6 h in rat, guinea pig, dog

3 days in humans

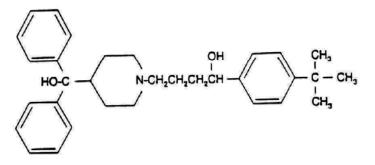
Metabolism as the Principal Confounding Factor for First-in-Human Trials

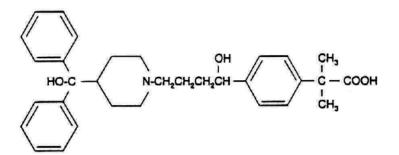


In Addition to Explaining Interspecies Differences, Other Applications for Metabolism Studies in Phase 1:

Learn/Confirm Major Pathways Learn/Confirm Active/Toxic Molecules

terfenadine/SELDANE®





fexofenadine/ALLEGRA®

Target-Guided Dose Escalation

Preclinical Pharm/Tox Clinical Phase 1 Trials

Safety Factor
Reference Animal Dose ↔ Starting Human Dose

Define Target Goal Assess Target Impact

Stop or Escalate?

Guidance for Industry, Investigators, Reviewers Exploratory IND Studies FDA January 2006

Categories of Studies Include:

- [1] Molecular Proof-of-Concept (pharmacologic concentrations)
- [2] Functional Imaging

FDA's Exploratory IND enables NCI's Phase Zero

"Historical" Phases of Human Evaluation

Phase 0: Mechanism of Action

Phase 1: Safety, early signs of activity

Phase 2: Is activity promising?

Phase 3: Improve current therapy?

NCI is working to re-engineer its pipeline of new candidate molecules in the context of Exploratory IND

Chronology of First-in-Human Study Designs			
<u>Era</u>	Primary	Secondary	Correlative
1960s	Toxicity	Activity	(None)
1980s	Toxicity	Activity	PK
1980s	Toxicity	Activity	
	PK-guided		
1990s	Toxicity	Activity	PK-PD/Biomarkers
2000s	PD	PK	Toxicity, Activity
Phase Zero		(not expected)	

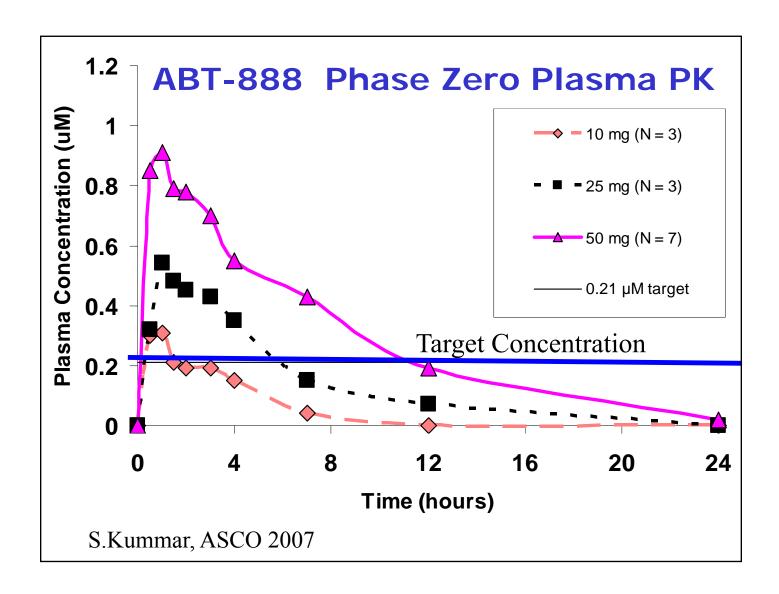
Role Reversal as Discovery Continues

Articulate and Answer the Key Question

Key question can be as simple as whether drug candidate is absorbed from GI tract

⇒ Readily Answered

Key Question for Phase Zero PARP Project: Can DNA Repair Enzyme Be Inhibited? (Need Tumor Sample and Suitable Assay!)



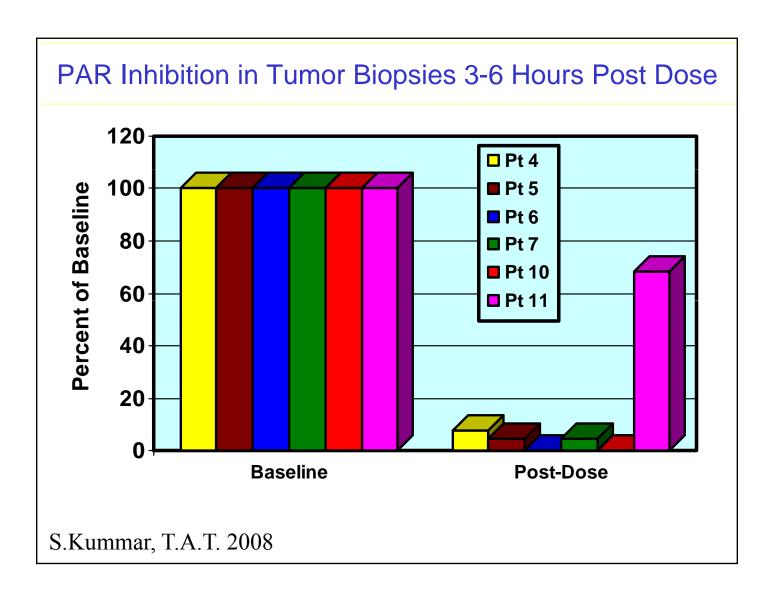
First NCI Phase Zero Project PARP enzyme inhibitor

Goals

Can Target Plasma Concentration Be Achieved Orally? **Outcomes**

YES

Can Tumor Biopsy Provide Definitive Results?



First NCI Phase Zero Project PARP enzyme inhibitor Goals Can Target Plasma Concentration Be Achieved Orally? Can Tumor Biopsy Provide Definitive Results? Inhibition by dose and time

Functional Imaging via PET: Biomarkers for Treatment Evaluation

- Does treatment impact the desired target?
- What is the minimum/maximum dose?
- How to select interval between courses?

CONTEXT:

Individual Patient, or New Agent Development

MAO-B Inhibition by Lazabamide baseline 25 mg bid J.Fowler,BNL Neurology(93)50 mg bid 36 hrs later

First-In-Human Trials Identity Crisis?

What is Inherent in First-In-Human Trials?

<surprise!>

