Challenges of *in vivo* studies to support pre-clinical to clinical translation

Carina Vingsbo Lundberg Statens Serum Institut, Copenhagen, Denmark On behalf of the COMBINE Consortium





AMR Accelerator: Public-Private collaboration with the shared goal of progressing the development of new medicines to treat or prevent resistant bacterial infections (www.amr-accelerator.eu)







COMBINE: Collaboration for prevention and treatment of MDR bacterial infections

Scientific goals:

- optimise and standardise animal infection models to advance translation of non-clinical efficacy data to clinical trial outcomes
- improve statistical and pharmacometric analyses of clinical data
- develop optimized clinical trial designs





Universities, research organisations, public bodies, non-profit groups:

- Uppsala University (UU) Sweden
 Coordinator
- Paul-Ehrilch-Institut (PEI) Germany
- Fraunhofer Gesellschaft (FRAUNHOFER) Germany
- Statens Serum Institut (SSI) Denmark
- BEAM Alliance (BA) France

SMEs:

- Asclepia (AC) Belgium
- GRIT42 (G42) Denmark
- BIOCOM (BC) Germany

EFPIA companies:

- GSK United Kingdom Project Lead
- Evotec (EVT) Germany
- Janssen (JNJ) Belgium



https://amr-accelerator.eu/project/combine

Improve understanding of animal infection model reproducibility and translation to clinical efficacy

Problem:

- Animal infection models are excellent tools, yet translational gaps remain
- Methods used for study conduct & analyses impact results
- Lack of standardization hinders interpretation & comparison

Goals:

- Develop standardised animal infection model protocol
- Benchmark standard model using relevant control compounds
- Establish in vivo reference strain bank supported by data from the model
- Provide framework for PK/PD analysis & mathematical modelling
- Improve understanding of preclinical-to-clinical translation





Three main activities

Validate a standardized infection model

- Select what model to standardize
- Generate efficacy data for control antibiotics using candidate strains

Establish Reference Strain Bank

- Identify strains that can be made available to the AMR community
- Select candidate strains that perform well in a standard model across labs

Improve Preclinical-to-Clinical Translation

- Demonstrate how to best interpret and use the data for PK/PD modeling
- Investigate how response in our standard model translates to the clinic





Selection of murine infection model to standardize

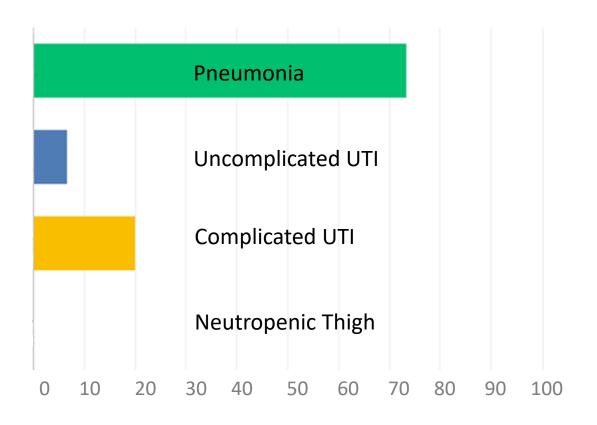


18 November 2020 3-4 pm CET

Animal infection models to study antibiotics against gram-negative bacteria



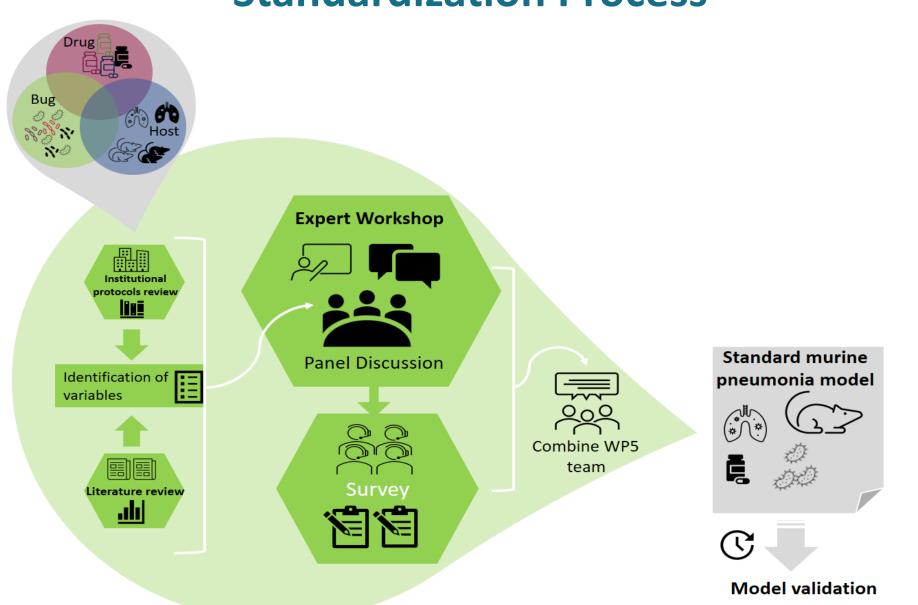
- Presentations on models to study antibiotics vs. Gram-negative pathogens
- Survey among participants to identify greatest need for model improvement



Model with greatest translational gap (% of survey participants)











ation

AMR

Accelerator Tackling antibiotic resistance together



Assessment of methods for acute pneumonia models with Klebsiella pneumoniae, Pseudomonas aeruginosa and Acinetobacter baumannii

- Literature Review
- Review of institutional protocols

Substantial differences in study methods

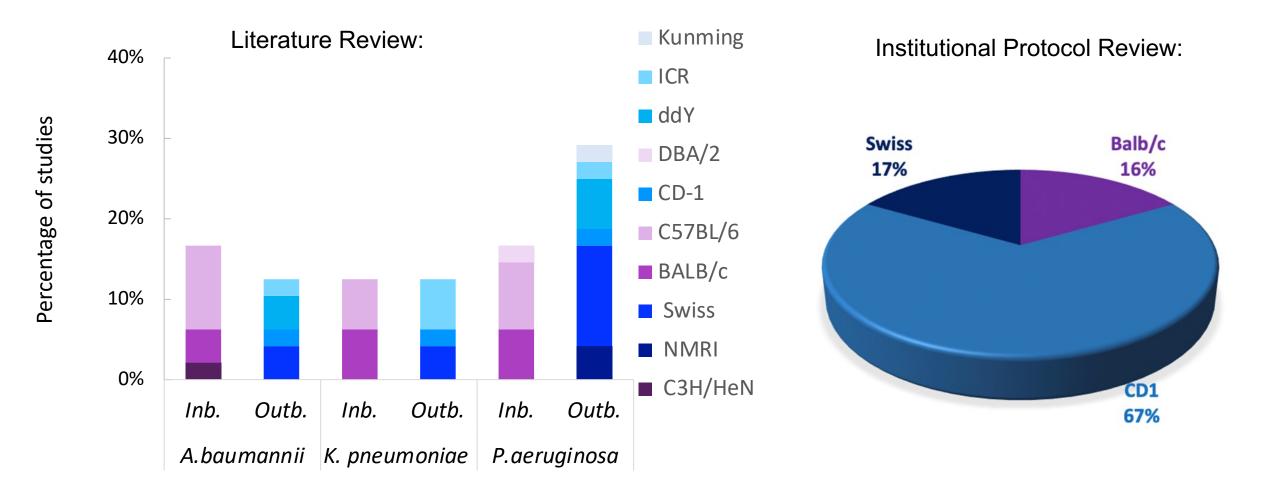
Mouse strain Sex Age Number animals/group Others Infection Inoculum procedure Immunosuppression Source of bacteria Anesthesia Panel Culture media Infection route discussion Growth stage Infection volume Inoculum preparation Inoculum concentration Treatment 02020020 and endpoint Start of treatment **Baseline CFU** Bacterial growth in mice Length of study ē, ē Primary endpoint Sample processing

methods



Rakel Arrazuria et.al. Variability of murine bacterial pneumonia models used to evaluate antimicrobial agents

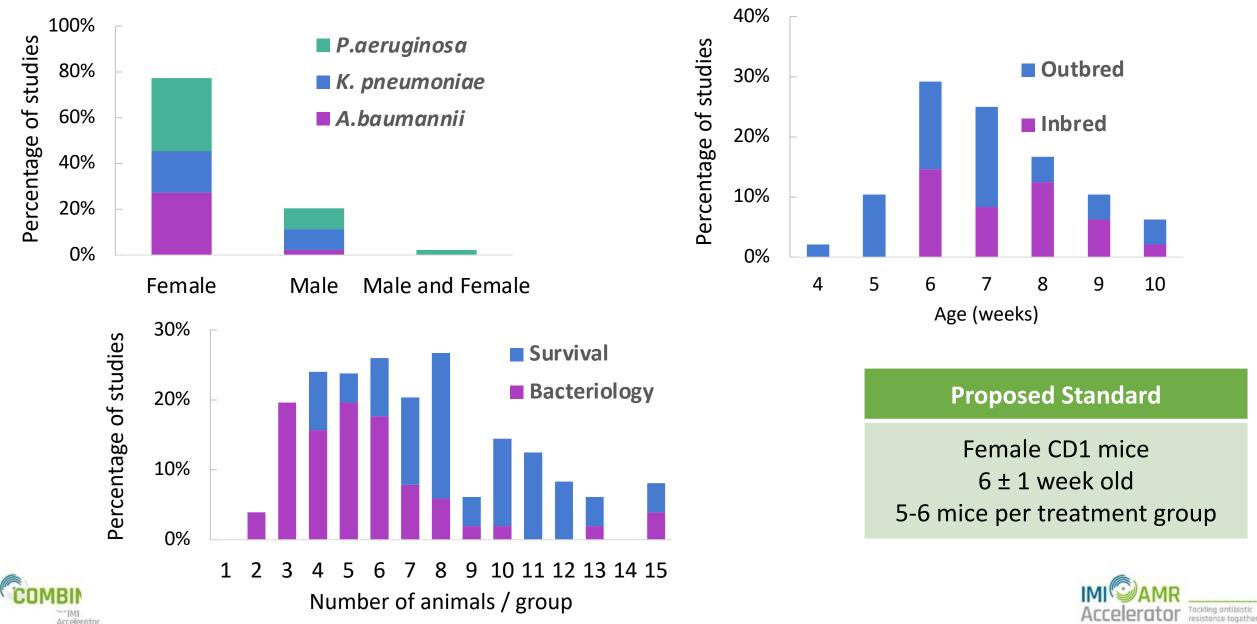
Identification of key variables: Mice



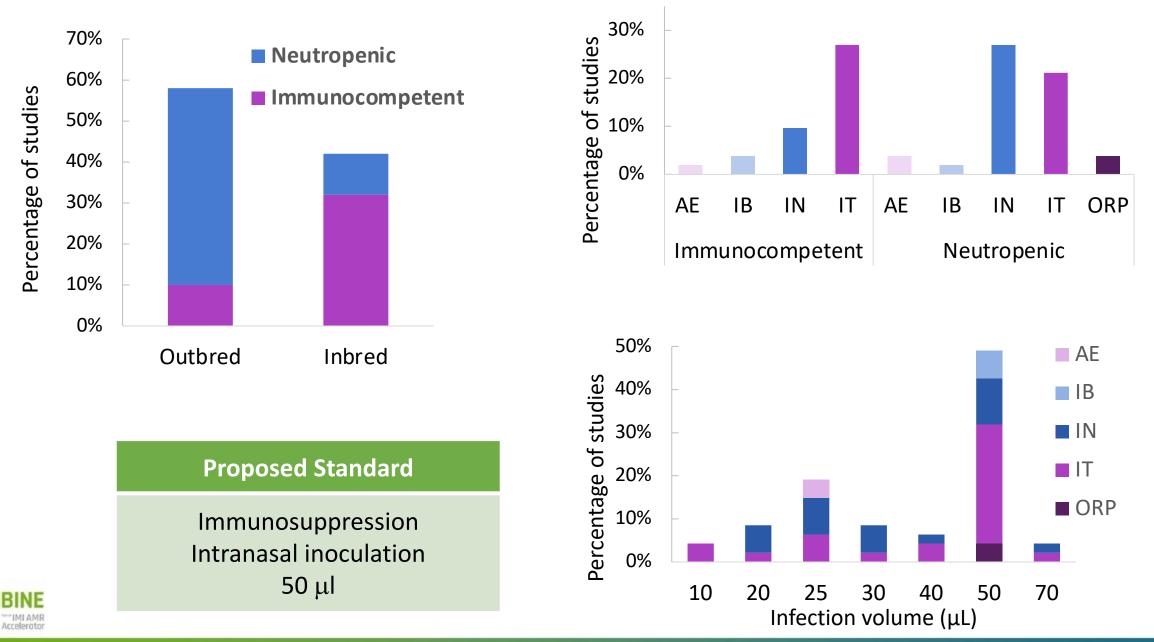




Identification of key variables: Mice

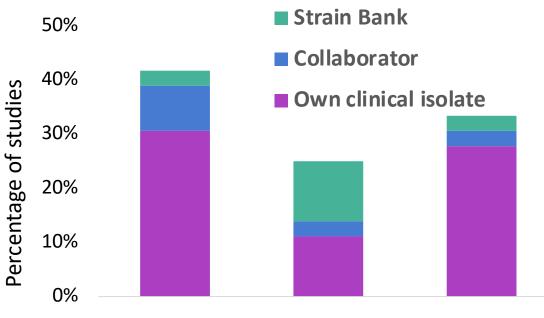


Identification of key variables: Inoculation



antibiotic ce togethe

Identification of key variables: Inoculum



ccelerat

P.aeruginosa K. pneumoniae A.baumannii

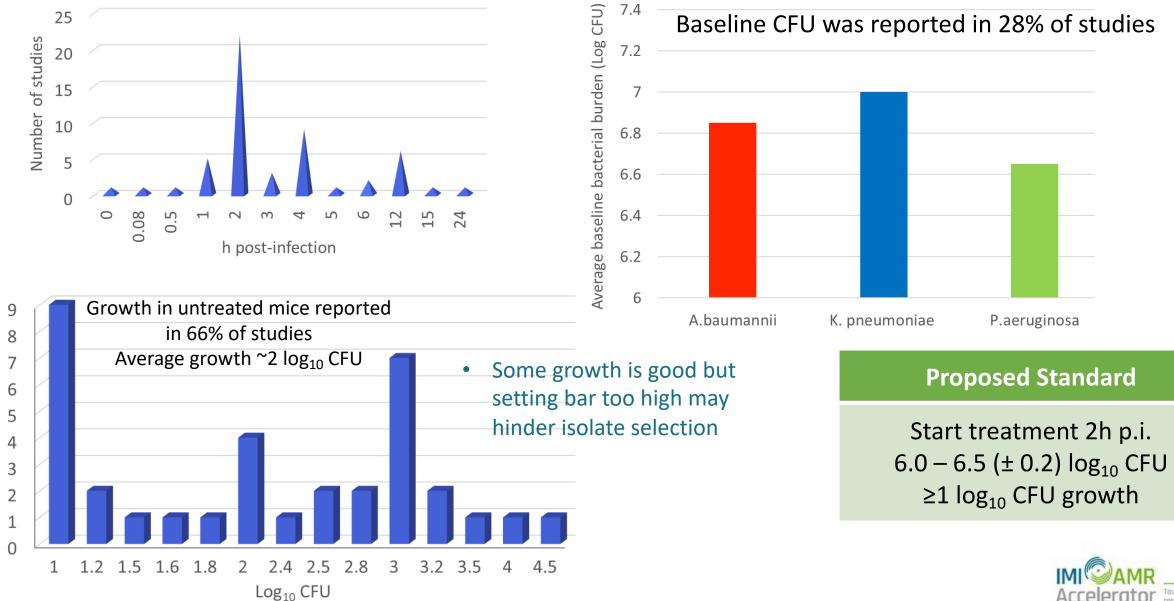
Culture stage	Number of studies	
Subcultured to log. phase	13	
Subcultured to early log. phase	4	
Frozen log. phase stock	2	
Subcultured to mid-log. phase	1	

Proposed Standard

Exponential growth phase Media and source as appropriate

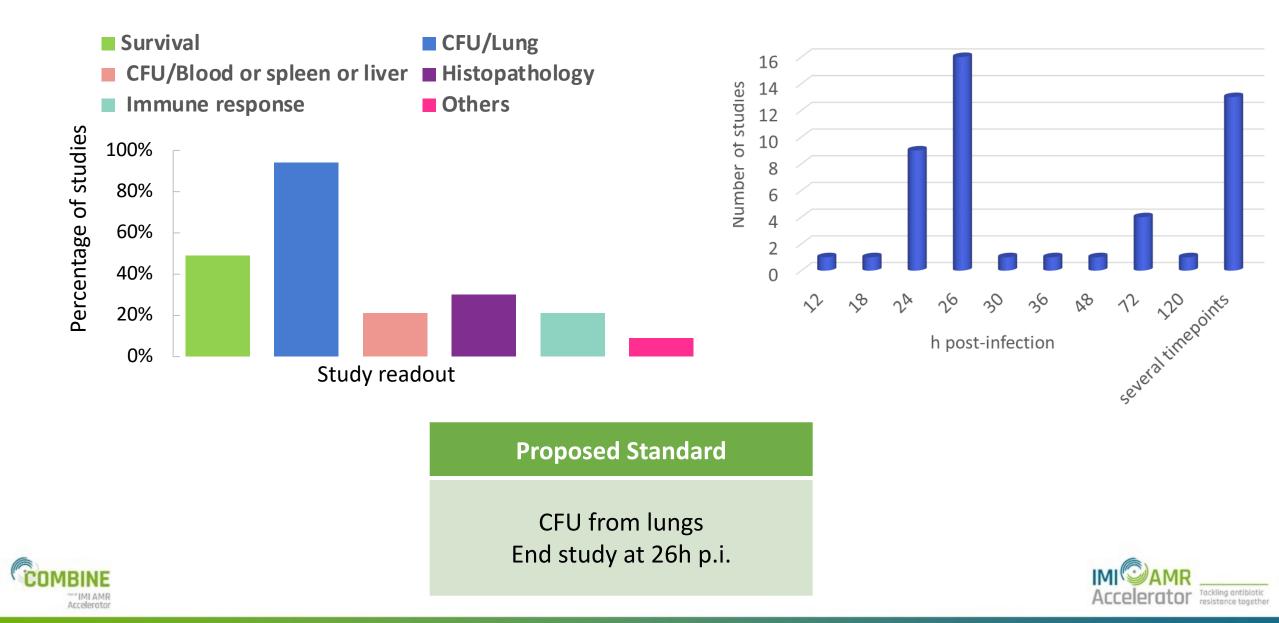


Identification of key variables: Treatment start



Number of studies

Identification of key variables: Endpoints



EXPERT WORKSHOP: Develop standardized murine model to evaluate treatments for AMR lung infections

Day 1 (Tuesday, April 27th 2021): 15:00-19:00 CEST

Developing a standardized murine pneumonia model to characterize PK/PD of antibiotics

Day 2 (Wednesday, April 28th 2021): 15:00-19:00 CEST

Standard protocols for murine pneumonia models - beyond PK/PD

> **Expert Panel & Participant Survey** Selection of standardized variables

Animals CD1 (outbred) mice Female mice Minimum of 3 d of acclimatization 6-8 weeks old animals 00 5-6 animals per group Inoculum Infection procedure Include one in vivo Standard validated strain from an murine accessible strain bank pneumonia model Use bacteria in mg/kg at day -1 logarithmic phase of Intranasal growth infection route **Treatment and** Inoculum end point of 50 µl Treatment at 2 hour post infection • Baseline CFU of 6-7 log10 •Min. growth of 1 log10 CFU .Length of study 26 h post infection Endpoint readout CFU/lung





Rakel Arrazuria et.al. Expert Workshop Summary: Advancing towards a standardized murine model to evaluate treatments for AMR lung infections

• Use neutropenic mice Cyclophosphamide 150 mg/kg at day -4 and 100

Additional considerations

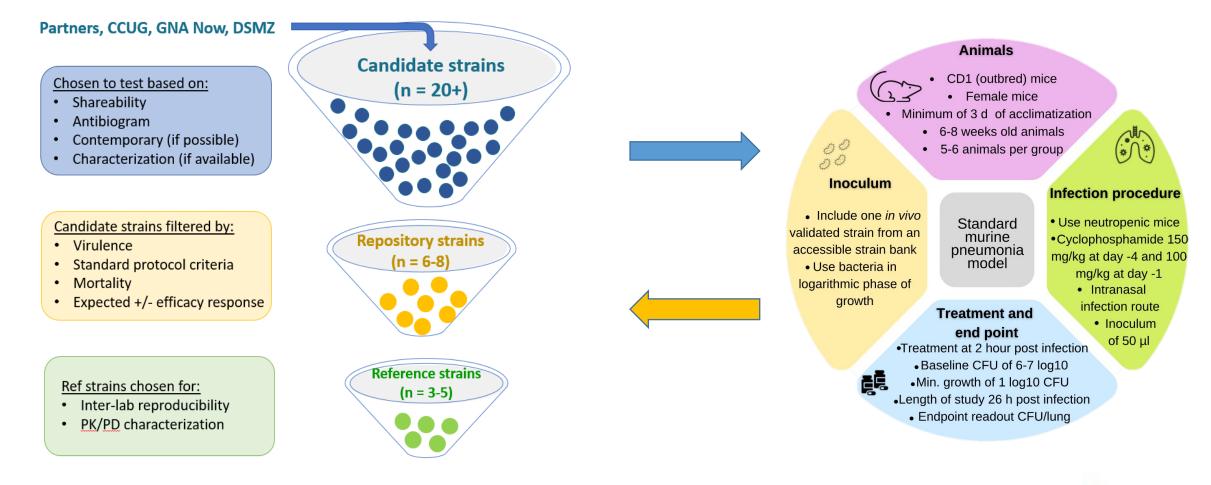
Animals	 Use animals of the same sex consistently in the same study. After preliminary study test the effect in the other gender. Use animals from the same vendor. Adjust the number of animals to the power analysis if necessary. Animal randomization is encouraged.
Inoculum ひひひ	 Time between inoculum preparation and its use in vivo should be short. Ensure inoculum viability and growth consistency in the whole experiment.
Infection procedure	 Anesthesia should be deep enough to allow the inoculum to settle in the lungs. IT route should be considered for less pathogenic strains. Inoculum > 20 μl should be used if lower inoculum volume is required.
Treatment and end	 If longer experimental endpoint (26 h) are needed for additional outputs (3-4 d), take several time points including 26 h. Blinding the CFU counts if possible.



Validate standard pneumonia model

Bacterial Strains Selection Strategy

Accelerate

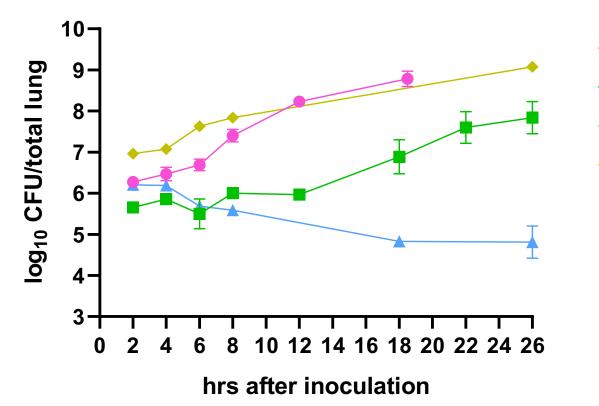




Confidential

Validate standard pneumonia model

K. pneumoniae



NCTC 13883
 NCTC 13443
 700603

151

No. of isolates tested	Increase in bact. Ioad < 1 log	Lethal <12hrs	Suitable strains identified
11	2	0	9

Poster: Jon Hansen et al

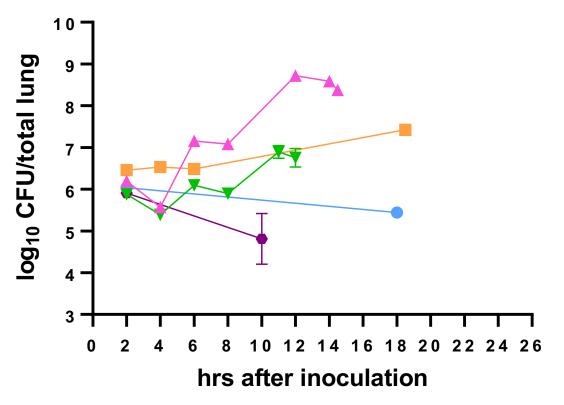
A standard protocol for the murine pneumonia model to evaluate treatments for AMR lung infections





Validate standard pneumonia model





	DSM 50071
	PA01
	89228
-	89268
	89399

No. of isolates tested	Increase in bact. Ioad < 1 log	Lethal <12hrs	Suitable strains identified
12	2	8	2

Poster: Jon Hansen et al

A standard protocol for the murine pneumonia model to evaluate treatments for AMR lung infections





Would you like to collaborate with COMBINE?



<u>Contact us:</u> IMI-COMBINE@pei.de

Share your preclinical pneumonia data

<u>Conduct</u> validation studies in your lab <u>Share</u> isolates for repository





Acknowledgement

COMBINE WP5 Members:

Rakel Arrazuria, Division of Microbiology, Paul-Ehrlich-Institut, Langen, Germany Bernhard Kerscher, Division of Microbiology, Paul-Ehrlich-Institut, Langen, Germany Karen E. Huber, Division of Microbiology, Paul-Ehrlich-Institut, Langen, Germany Jennifer L. Hoover, Infectious Diseases Research Unit, GSK, Collegeville, Pennsylvania, USA Jon Ulf Hansen⁻ Bacteria, Parasites & Fungi, Statens Serum Institut, Copenhagen, Denmark. Sylvie Sordello, Infectious Diseases, Evotec, Toulouse, France Stephane Renard, Infectious Diseases, Evotec, Toulouse, France Vincent Aranzana-Climent, Department of Pharmacy, Uppsala University, Uppsala, Sweden Diego Vera, Department of Pharmacy, Uppsala University, Uppsala, Sweden Diarmaid Hughes, Department of Medical Biochemistry and Microbiology, Uppsala University, Uppsala, Sweden Philip Gribbon, Fraunhofer Institute for Translational Medicine and Pharmacology ITMP, Discovery Research ScreeningPort, Hamburg, Germany Lena E. Friberg, Department of Pharmacy, Uppsala University, Uppsala, Sweden Isabelle Bekeredjian-Ding, Institute of Medical Microbiology, Immunology and Parasitology, University Hospital Bonn, Bonn, Germany, Division of Microbiology, Paul-Ehrlich-Institut, Langen, Germany

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SSI in vivo pharmacology team

Tina Skov Lundager Emile Due Jensen Carina Matias Jon Hansen Karen Juhl Frederikke Rosenborg Petersen Sandra Bondo Jensen



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