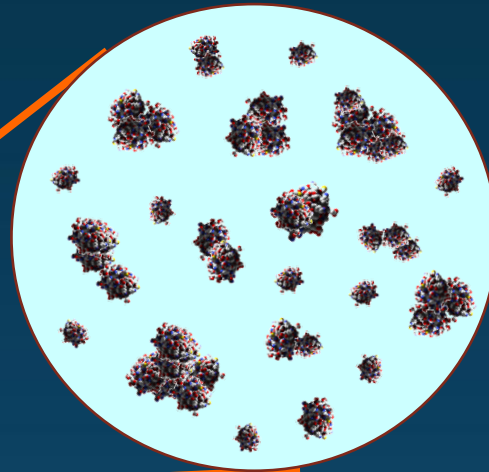


Protein Aggregates and Subvisible Particles

What are they and what is their clinical impact?



Wim Jiskoot

Division of Drug Delivery Technology
Leiden Academic Centre for Drug Research (LACDR)

EIP meeting
Munich
27 February 2013

All protein therapeutics contain
(higher or lower levels of)
aggregates and particles

Most of these products
are immunogenic

Is there a link???

When does protein aggregation occur?

Processing steps

Fermentation/expression



Purification



Formulation



Filling



Handling and storage of final product

Transport



Storage



Administration



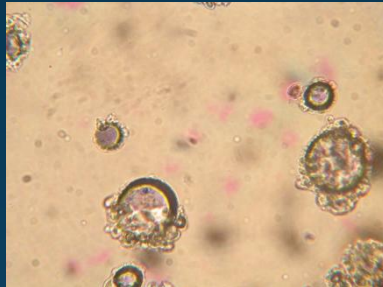
Some of the factors influencing protein aggregation

Environmental factors

Temperature



Interfaces



Freeze-thaw

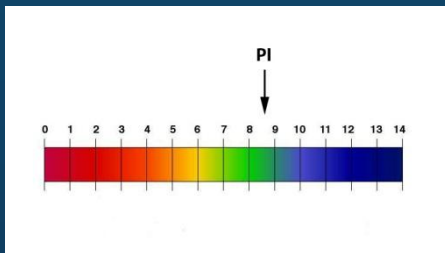


Container



Solution factors (formulation)

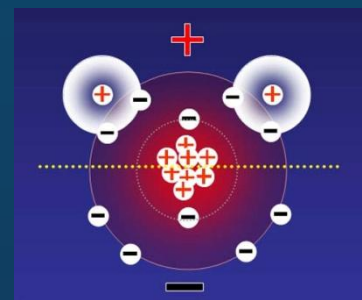
pH



Excipients



Ionic strength



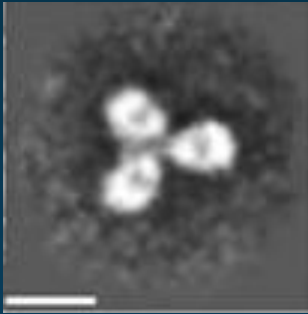
Concentration



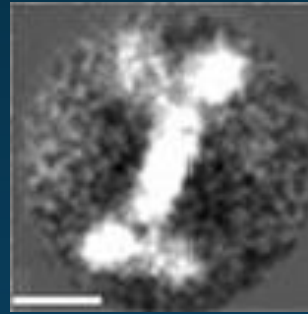
Protein aggregates: definition and categories

- Protein aggregates = assemblies of protein molecules
- Protein aggregates are heterogeneous regarding (Narhi et al., J Pharm Sci 101, 493-498):
 - Size
 - Reversibility
 - Protein conformation
 - Covalent modification
 - Morphology
- So, the question “which aggregates do matter?” is difficult to answer

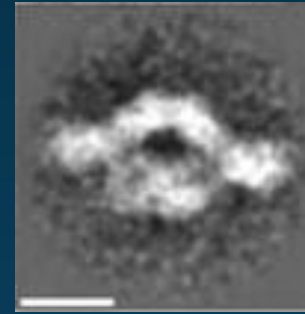
Example: even a simple aggregate such as a dimer can adopt various shapes and characteristics



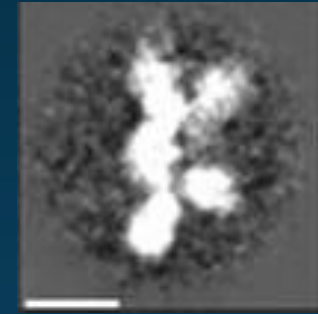
monomer



process stress
dimer



pH stress
dimer



light stress
dimer



Covalent
Aggreg.

no

no

no

yes

Hydroph-
obicity

low

low

high

heterogeneous

Relative
Potency

100%

$62 \pm 3\%$

$101 \pm 4\%$

$21 \pm 17\%$

Size categories

Definitions by size (all are aggregates)

* Oligomers: $< 100 \text{ nm}$

* Particles:

- Submicron

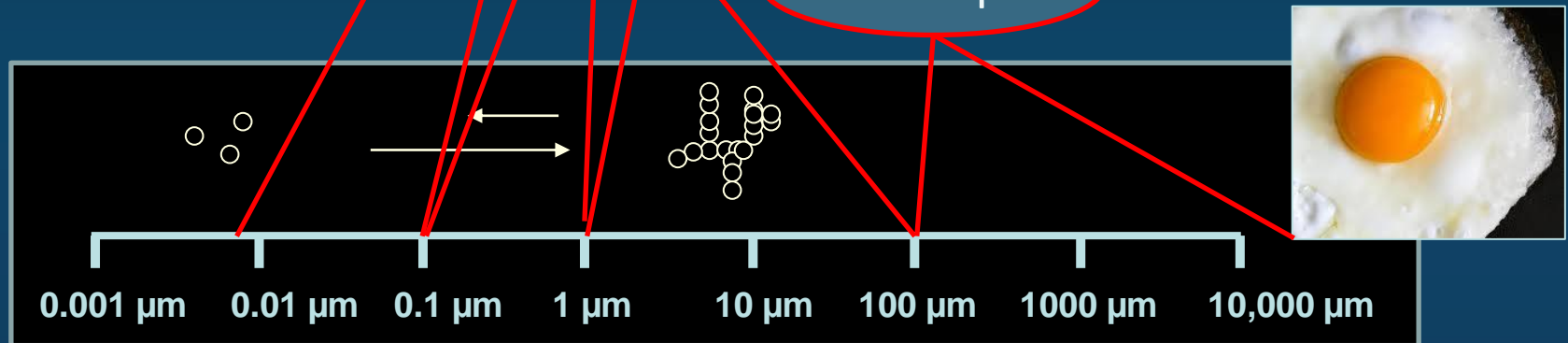
$0.1 - 1 \mu\text{m}$

- Micron

$1 - 100 \mu\text{m}$

- Visible

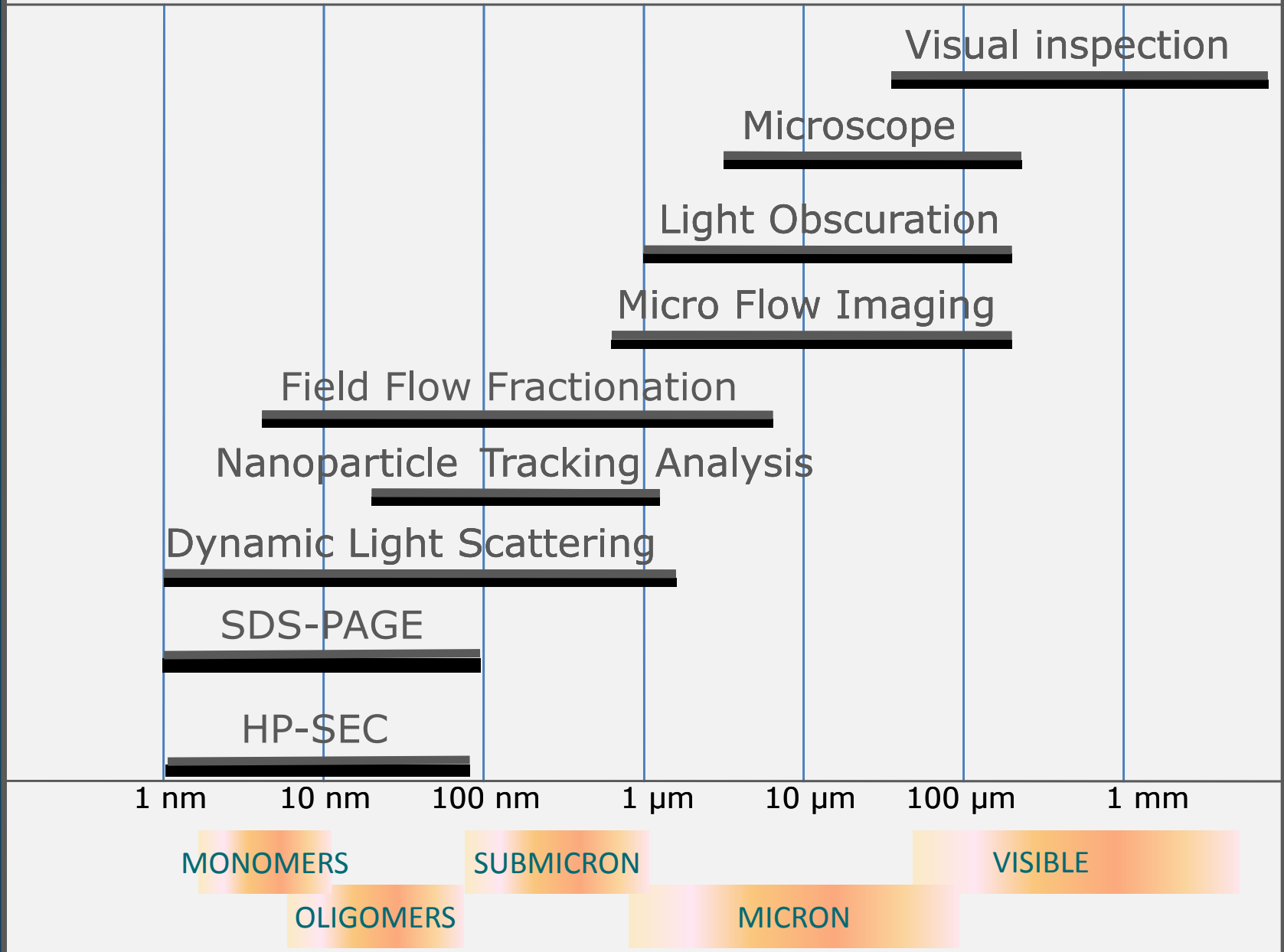
$\geq 100 \mu\text{m}$



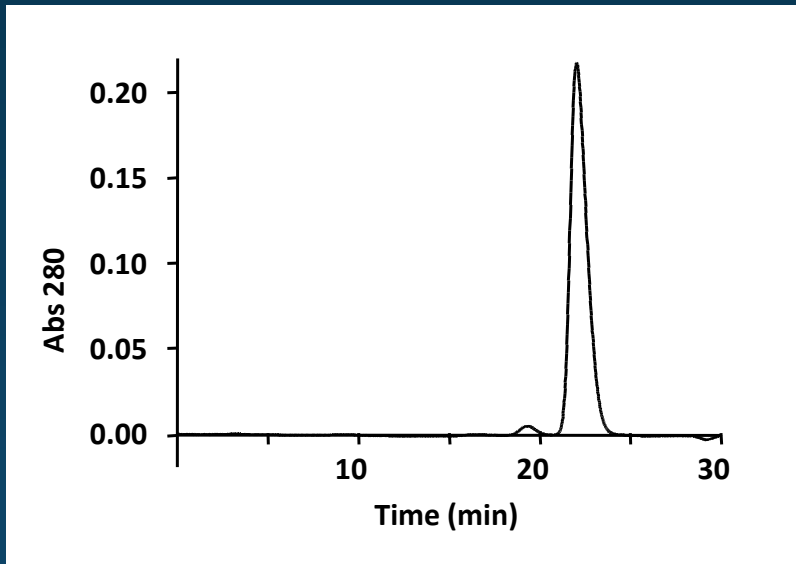
subvisible

visible

Complementary analytics needed to cover the size range



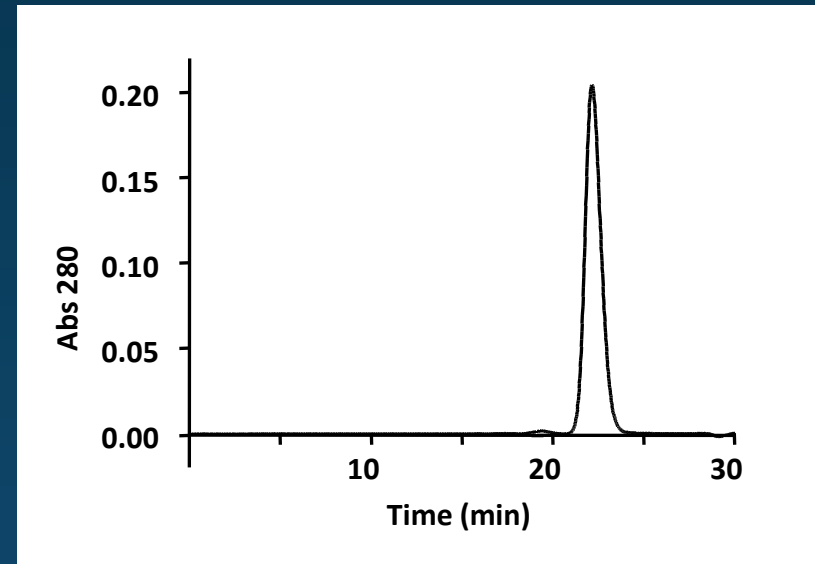
Size-exclusion chromatography results do not predict particle levels



Batch X

Optically clear

$$OD_{350} = 0.002$$



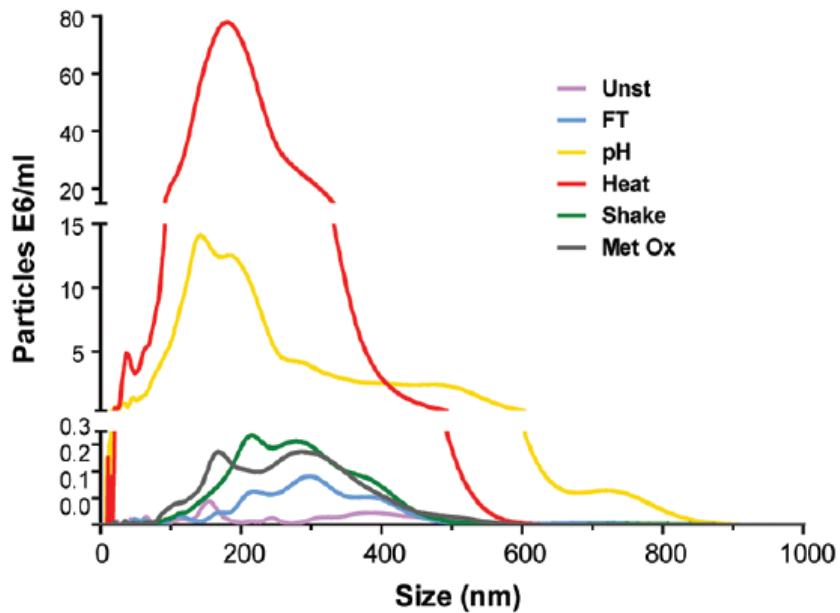
Batch Y

Visible aggregates

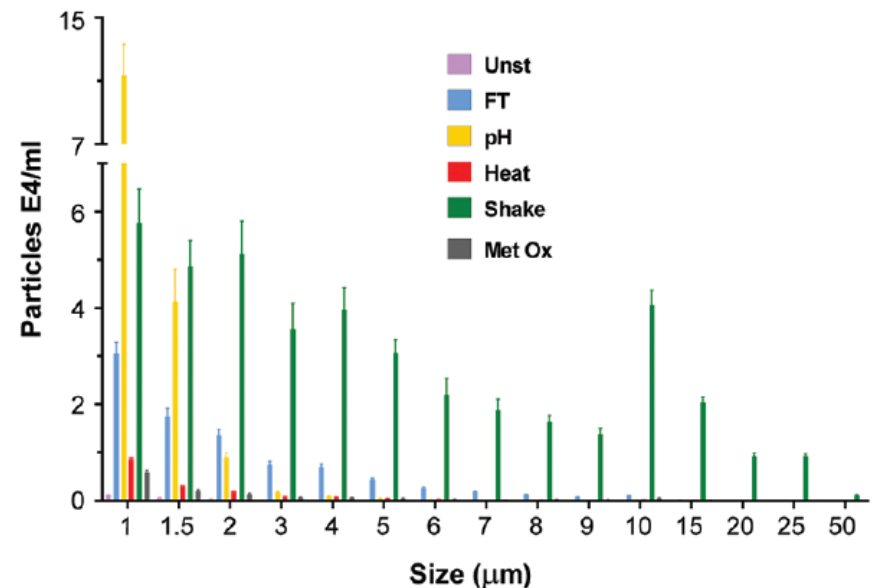
$$OD_{350} = 0.1$$

Submicron-sized particle counts do not predict micron-sized particle counts, vice versa

Nanoparticle tracking analysis
(submicron particles)

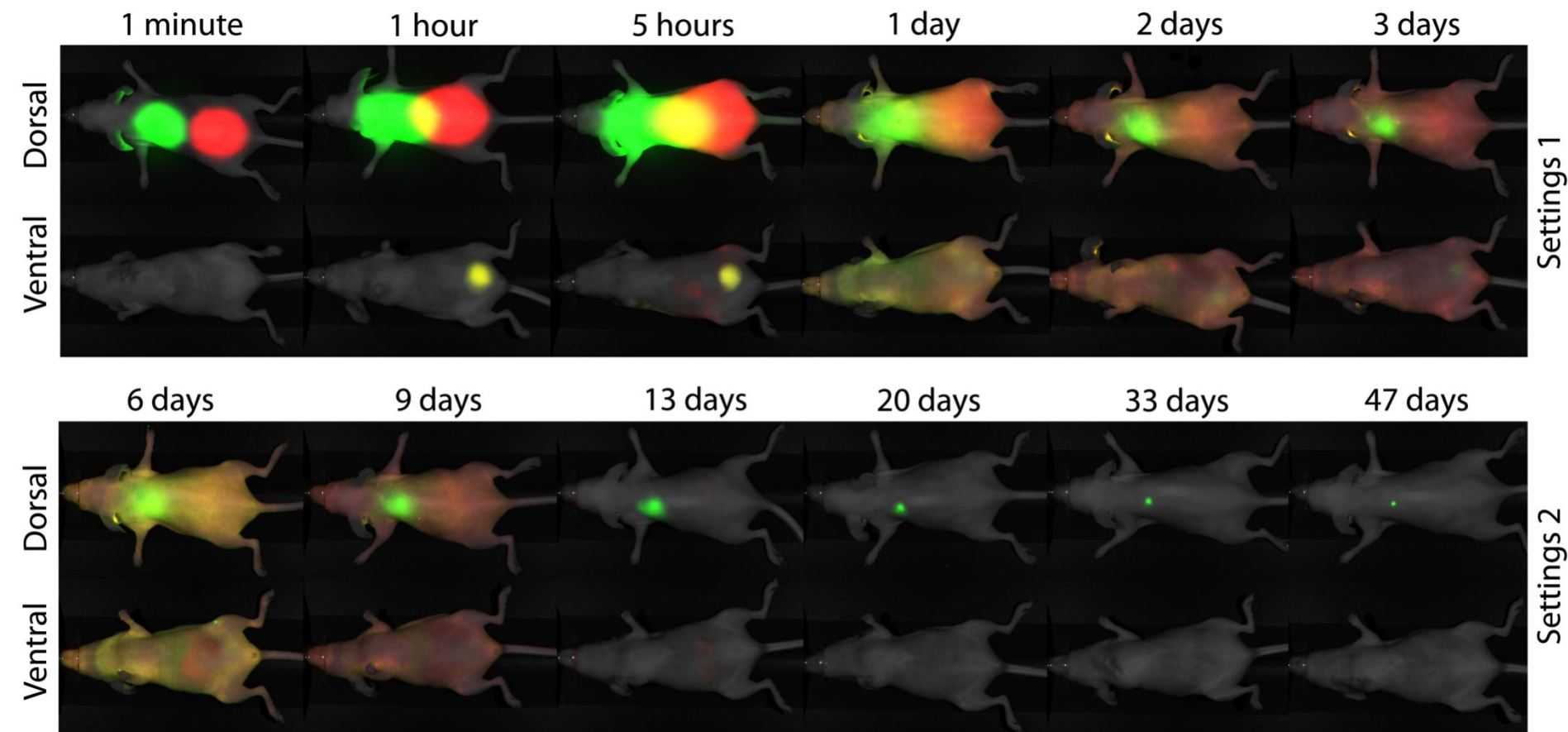


Light obscuration
(micron particles)



Results of monoclonal human IgG1 stressed under different conditions

Micron-sized IgG aggregates induced by shaking remain at SC injection site for longer than a month



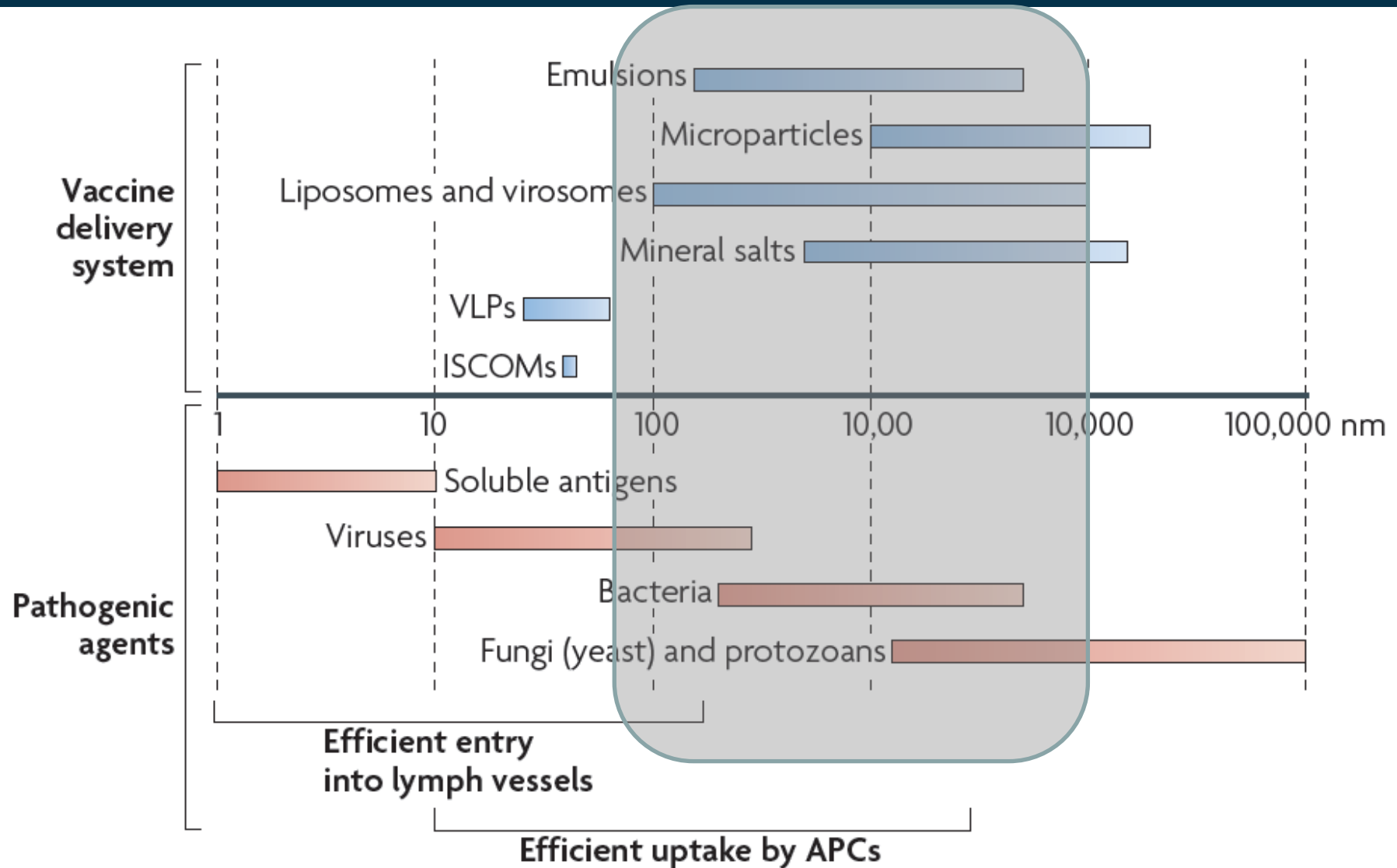
● Unstressed IgG-680CW

● Shaken IgG-800CW

Our vaccines are based on particles in the 'gap' range

Vaccine category	Examples	Particle category
Live bacteria	Salmonella	Micron (~ 1 μm)
Inactivated bacteria	Whole cell pertussis	Micron (~ 1 μm)
Live viruses	Oral polio Measles-mumps-rubella Nasal influenza	Submicron (~ 30-300 nm)
Inactivated viruses	Inactivated polio vaccine	< 100 nm
	Whole inactivated influenza vaccine	Submicron (~ 200 nm)
Virus like particles	Hepatitis B	< 100 nm
Split- and subunit vaccines	Influenza	Submicron (aggregates, ~ 300 nm)
Alum-adsorbed antigens	Diphtheria, tetanus	Micron (low μm range)
MF59 adjuvanted antigens	Influenza	Submicron (~200 nm)

Our vaccines are based on particles in the 'gap' range



New insights from quantifying subvisible particles

- Beyond potential immunogenicity, particle sizes and levels are important product quality attributes
- Mass of protein (e.g., < 0.1%) in particles may not be detectable as loss of monomer
- Subvisible particle analysis provides very sensitive early detection of protein aggregation and new insights into aggregation pathways, manufacturing & formulation development
- Even trace levels of particles can impact subsequent stability of protein solutions (see recent papers Carpenter and colleagues)

Beyond protein particles...

Nonproteinaceous particles (often in the 'gap' range)

- Glass particles from containers
- Glass cartridges and syringes are siliconized, and free silicone oil droplets can be generated
- In syringes, there may be tungsten particles and salts from needle insertion process
- Rubber or silicone particles can come from stoppers
- Stainless steel and other particles from filling pumps
- Particles shed from filters during pre-filling sterile filtration

Protein molecules can adsorb to these particles

This will create a “vaccine”

Subvisible particles and immunogenicity

Subvisible particles are in every therapeutic protein product and most of these products are immunogenic

Is there a link???

EXAMPLES

Aggregate/particle removal can induce tolerance

Already known in the 1960s!

Administration of aggregate-free foreign protein induces immunological tolerance in animals and human patients

For instance:

Dresser, *Immunology* 5, 378 (1962)

Claman, *J Immunol* 91, 833-839 (1963)

Biro & Garcia, *Immunology* 8, 411-419 (1965)

Spiegelberg & Weigle, *Int Arch Allergy* 31, 559-567 (1967)

Cerottini et al., *J Exp Med* 130, 1093-1105 (1969)

Golub & Weigle, *J Immunol* 102, 389-396 (1969)

Weksler et al., *J Clin Invest* 49, 1589-1595 (1970)

Von Felten & Weigle, *Cellular Immunology* 18, 31-40 (1975)

Fujiwara et al., *Jpn J Microbiol* 20, 141-146 (1976)

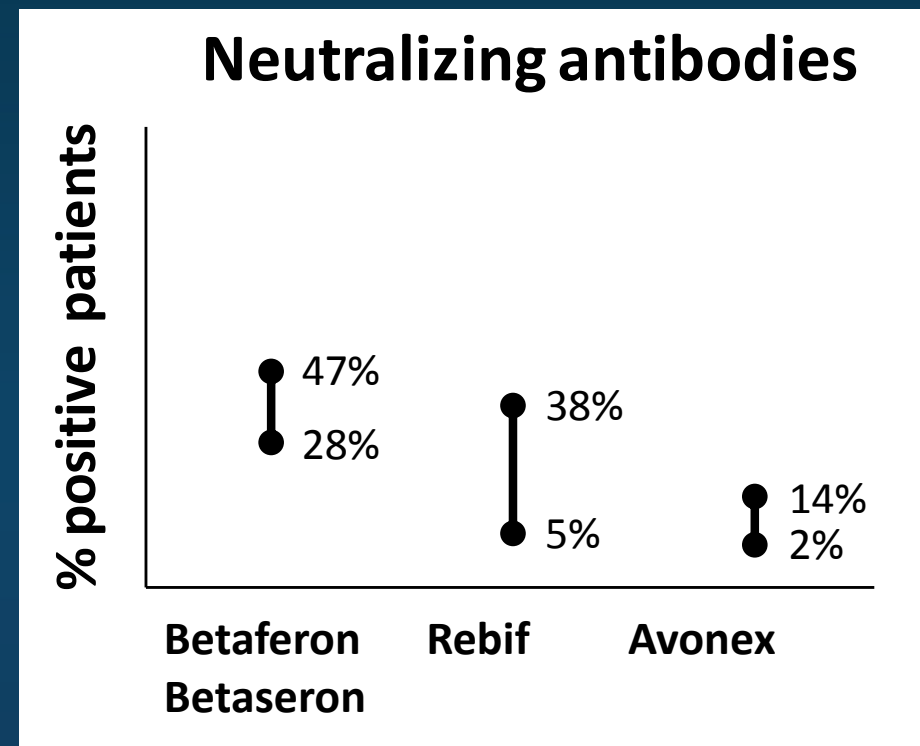
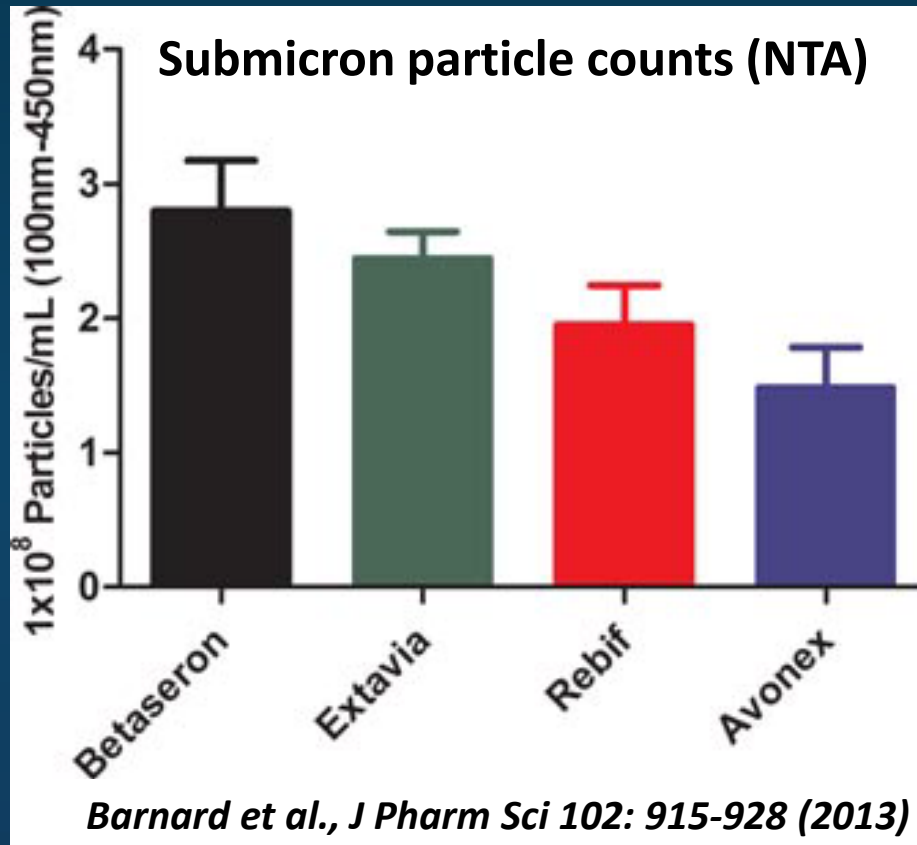
Aggregate/particle removal can induce tolerance

Already known in the 1960s!

- Anti-human lymphocyte IgG produced in horses
- Administration to organ transplant patients resulted in antibody response and consequently rapid drug clearance
- Administration of equine IgG in which aggregates / particles were removed by ultracentrifugation (133,500 x *g* for 1 h) resulted in no immune response and made the patients tolerant for equine IgG
- Co-medication: azathioprine + prednisolone

Commercial beta-interferon products: immunogenicity in patients

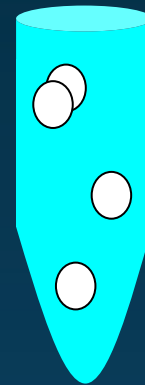
- Percentages of patients forming binding antibodies and neutralizing antibodies in various clinical studies (measured with various assays)



rhIFN β -1a with different aggregate levels

1. Bulk rhIFN β -1a

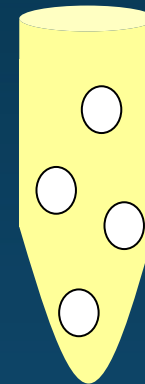
- Received as frozen bulk
- In PBS (!) pH 7.2



Medium aggregate content

2. Reformulated rhIFN β -1a

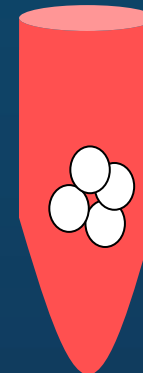
- Filtered and dialyzed bulk
- In NaAc pH 4.8
- Formulated with Tween 20 and ArgHCl



Low aggregate content

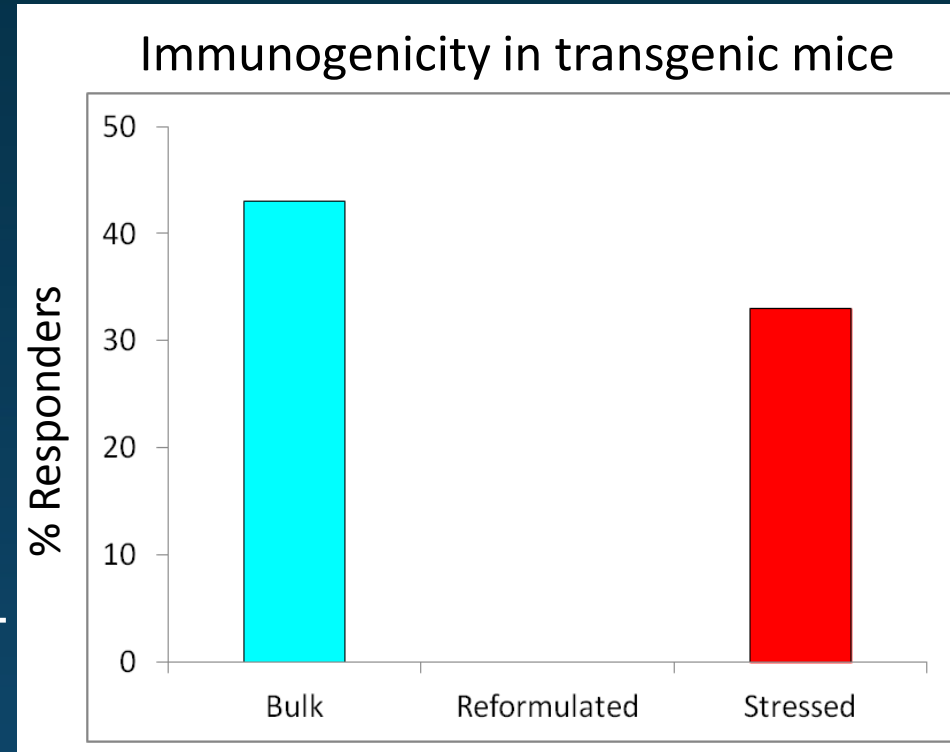
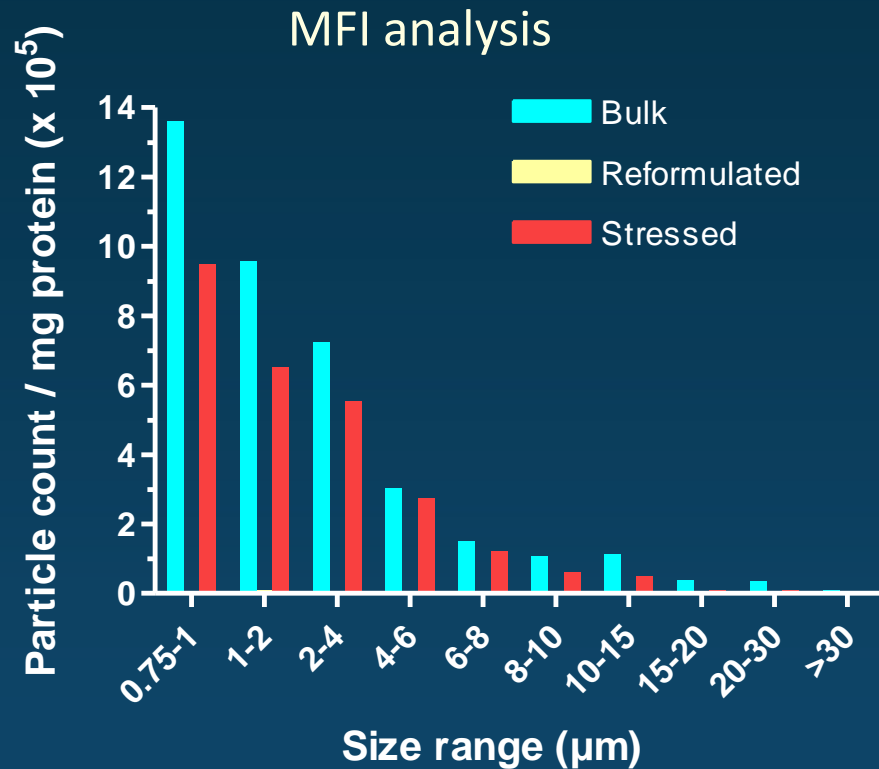
3. Stressed rhIFN β -1a

- Bulk incubated at pH 2 + 1 M NaCl
- Aggregates purified by SEC-HPLC
- In PBS pH 7.2



High aggregate content

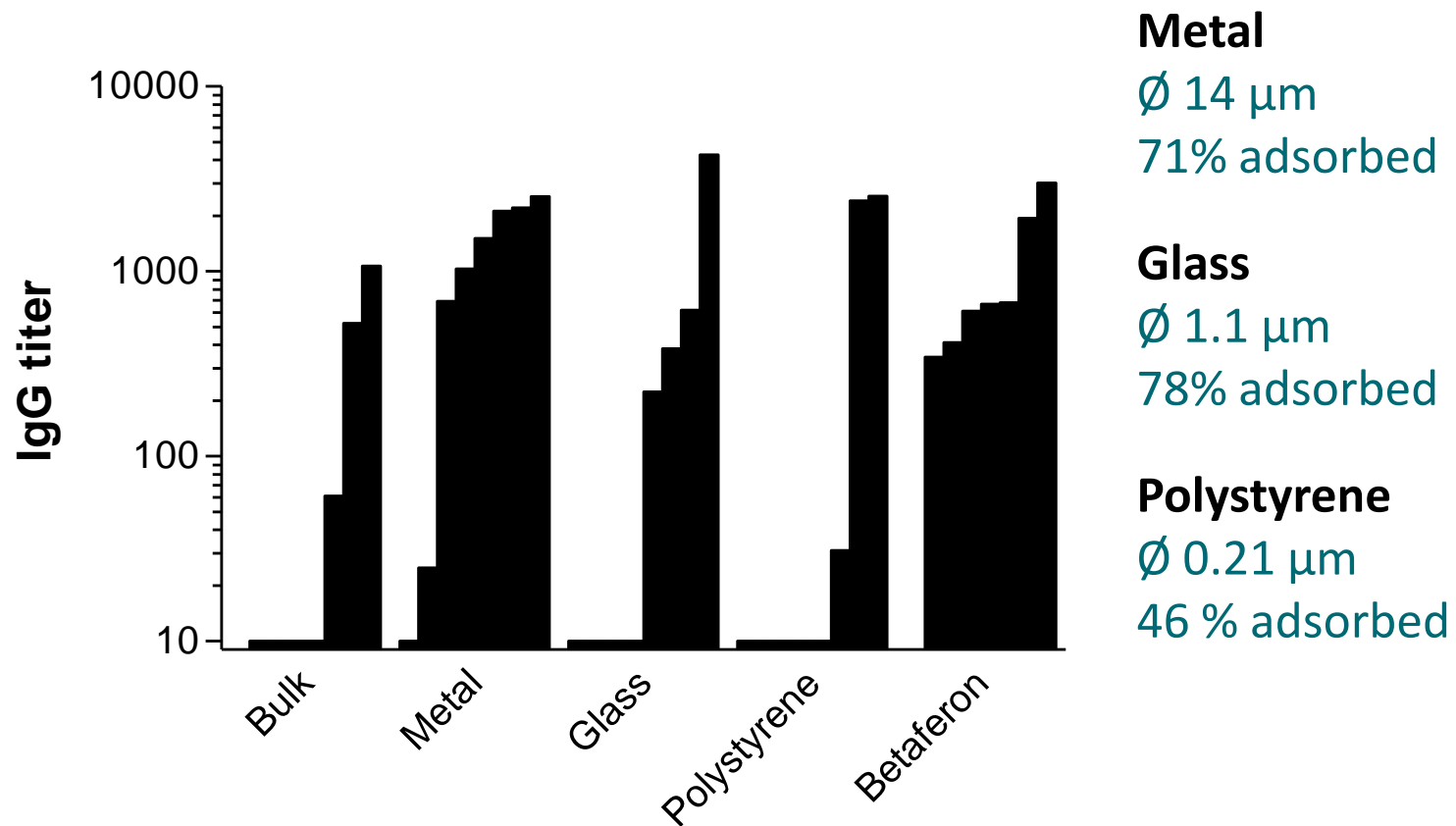
Subvisible particle counts and immunogenicity



- Hardly any particles in reformulated rhIFN β -1a
- Immunogenicity in transgenic immune tolerant mice correlates with subvisible particle counts (rather than total % aggregates)

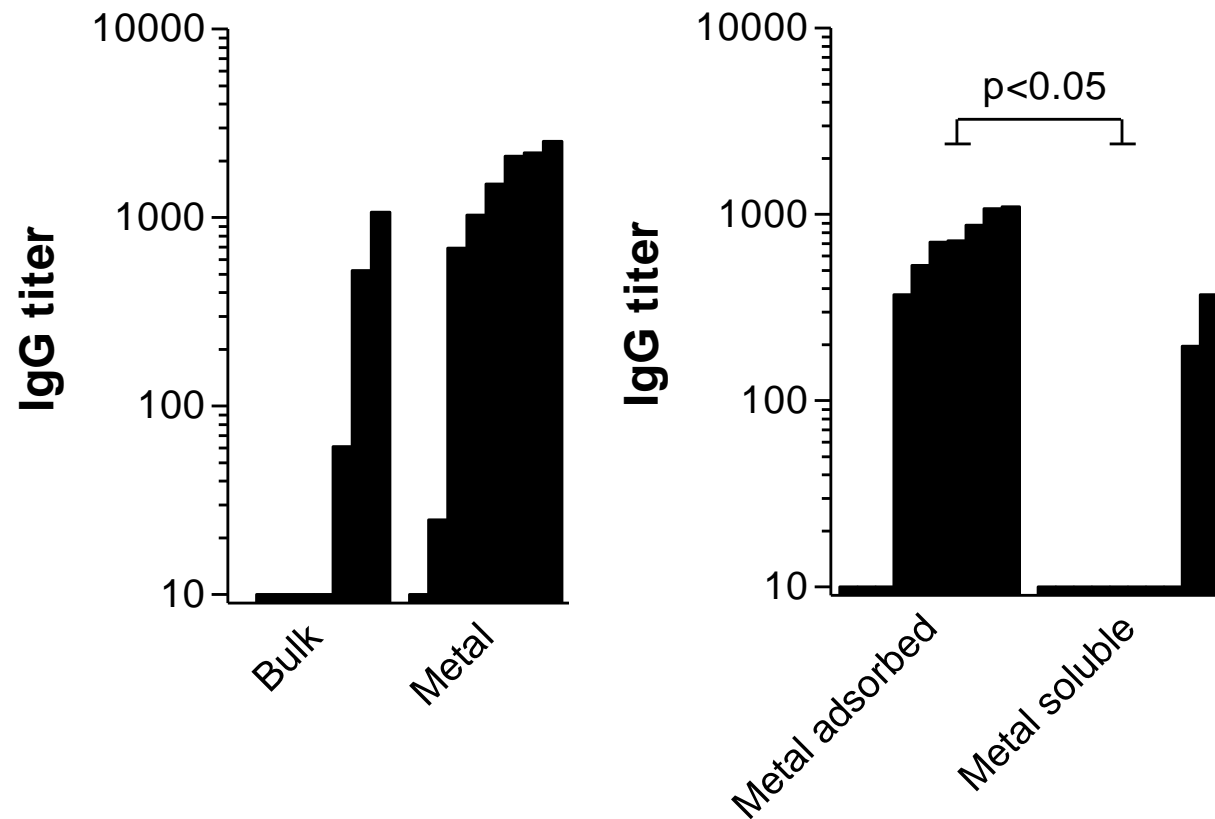
Adsorption of rhIFN β to metal (but not glass or polystyrene) beads enhances its immunogenicity in transgenic mice

Anti-rhIFN β antibody titers after a 3-week injection protocol

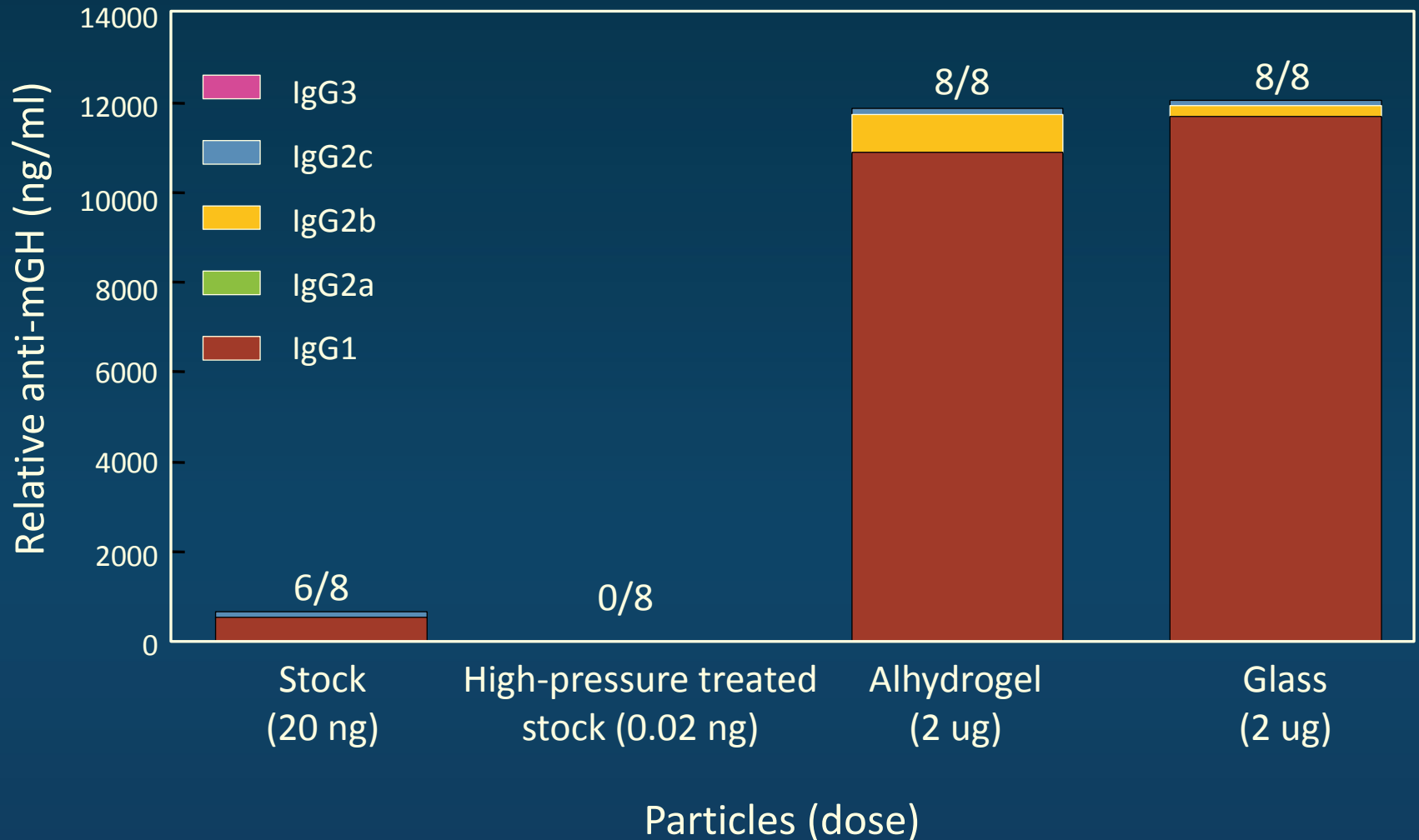


Adsorption of rhIFN β to metal (but not glass or polystyrene) beads enhances its immunogenicity in transgenic mice

Anti-rhIFN β antibody titers after a 3-week injection protocol



Subvisible particles break immune tolerance in mice to murine growth hormone



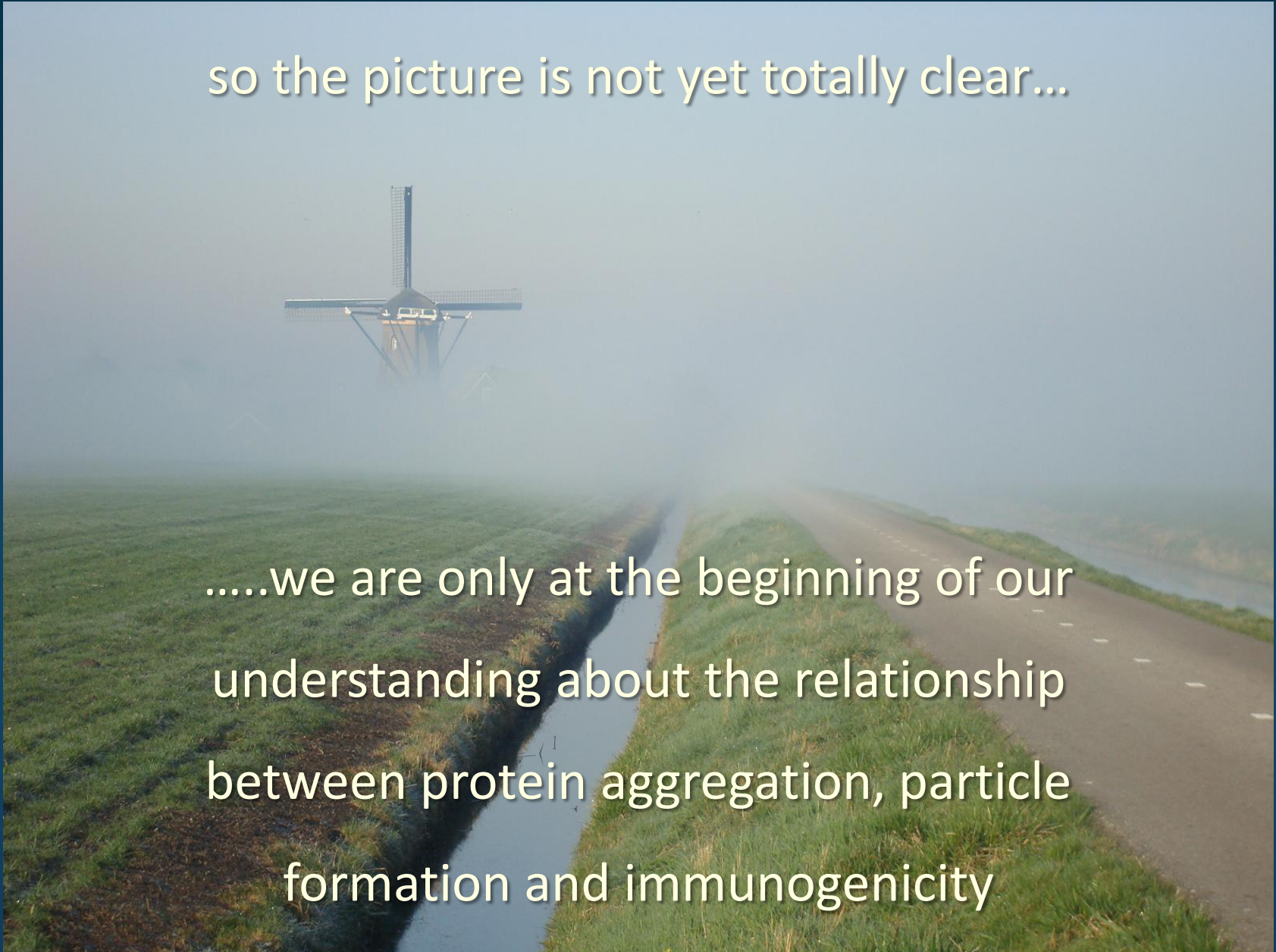
Conclusions

- Aggregates, including subvisible particles, are critical quality attributes
- Removal of aggregates & particles reduces protein immunogenicity
- Betaferon contains large amounts of aggregates & particles and is the most immunogenic rhIFN β product
- Adsorption of protein to non-proteinaceous subvisible particles may increase immunogenicity risk
- However, no general rules: rhIFN β adsorbed to glass particles was not very immunogenic, whereas mGH adsorbed to the same glass particles was

Conclusions

so the picture is not yet totally clear...

.....we are only at the beginning of our understanding about the relationship between protein aggregation, particle formation and immunogenicity



Acknowledgements

Leiden University

Miranda Van Beers, Vasco Filipe,
Riccardo Torosantucci, Andrea Hawe

Utrecht University

Huub Schellekens, Daan Crommelin,
Suzanne Hermeling, Melody Sauerborn,
Vera Brinks, Grzegorz Kijanka, Andhyk Halim

University of Colorado

Ted Randolph, John Carpenter,
Jared Bee

University Hospital San Luigi Gonzaga, Torino

Francesca Gill

Kansas University

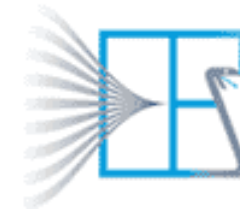
Christian Schoeneich et al.

Biogen Idec

Susan Goelz
Darren Baker

Antitope

Christine Bryson
Matthew Baker



Leiden /Amsterdam
Center for Drug Research

UIPS

*Utrecht Institute for
Pharmaceutical Sciences*



Neutralizing antibodies on Interferon beta in Multiple Sclerosis

NABINMS



Coriolis Pharma
Biopharmaceutical Research and Development Service

Thank you!



2012 © Wim Jiskoot