

# Phase-Appropriate Implementation of a Domain Specificity Strategy

Matthias Reichel, MSc | 23 April 2024



# Agenda

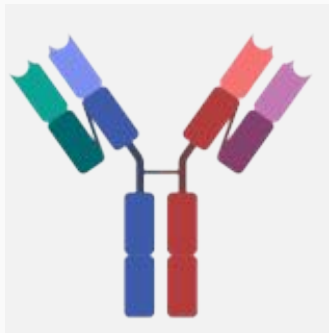
1. Introduction to Multi-Domain Therapeutics
2. Strategies for Assessing Domain Specificity
3. Domain Specificity – a Must-Have for Multi-Domain Therapeutics?

# Introduction to Multi-Domain Therapeutics

It's getting more complex

# Multi-Domain Therapeutics

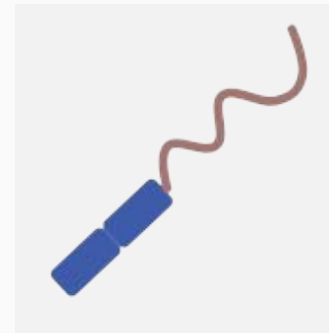
- Therapeutics which contain **2 or more** structural domains or components
- Each with distinct function and/or property relevant to the mechanism of action (MoA)
- Domains linked together through genetic/protein engineering, chemical conjugation or by self-assembly



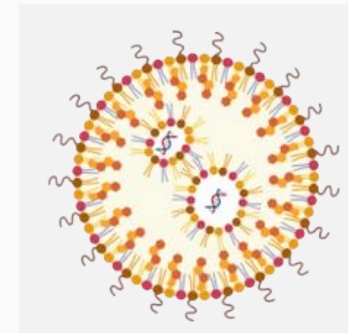
Multi-specific  
antibodies



Antibody-drug conjugates



PEGylated protein/peptides



Lipid nanoparticle  
(LNP) encapsulated  
RNA/DNA

# Multi Domain Therapeutics

## Benefits:

- Improved pharmacokinetics
- Enhanced efficacy
- Targeted delivery
- Delivery of unstable components
- Directing and inducing immune cells
- Induction of protein complexes
- Reduced side effects
- Versatility

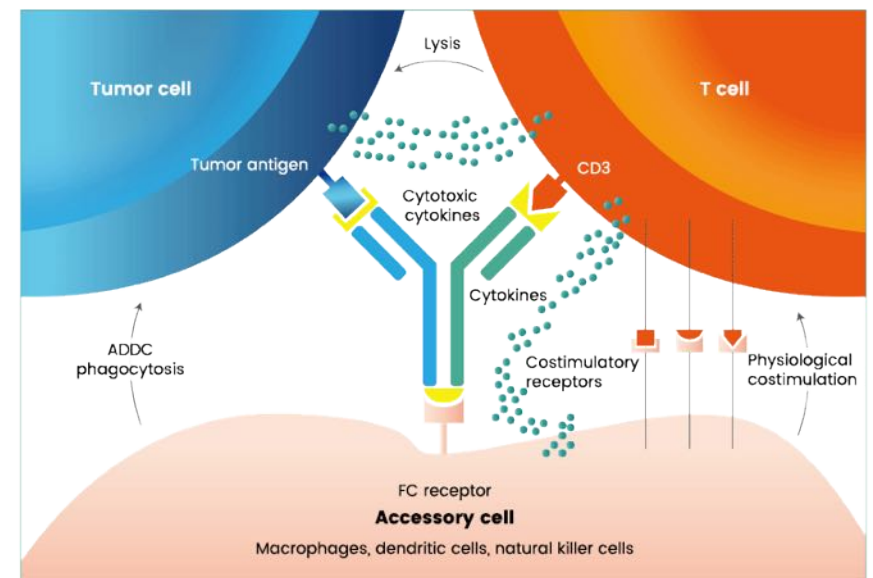
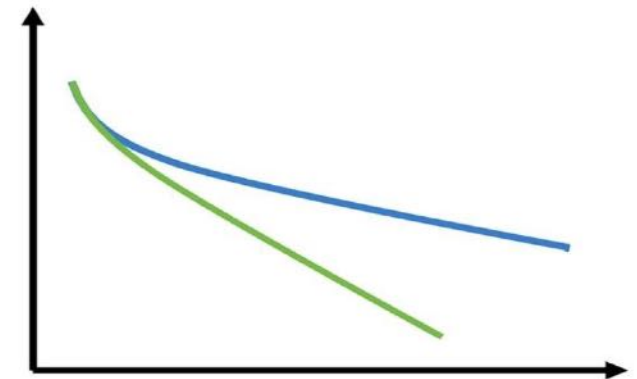


Image: <https://www.sinobiological.com>

# Immunogenicity Testing

- Clinical immunogenicity assessment typically follows a multi-tiered approach
- For a 'typical' biotherapeutic, characterization usually consists of:
  - Titer
  - Neutralizing antibodies (NAb)
- For multi-domain therapeutics, characterization may also require the elucidation of the domain specificity of the immune response

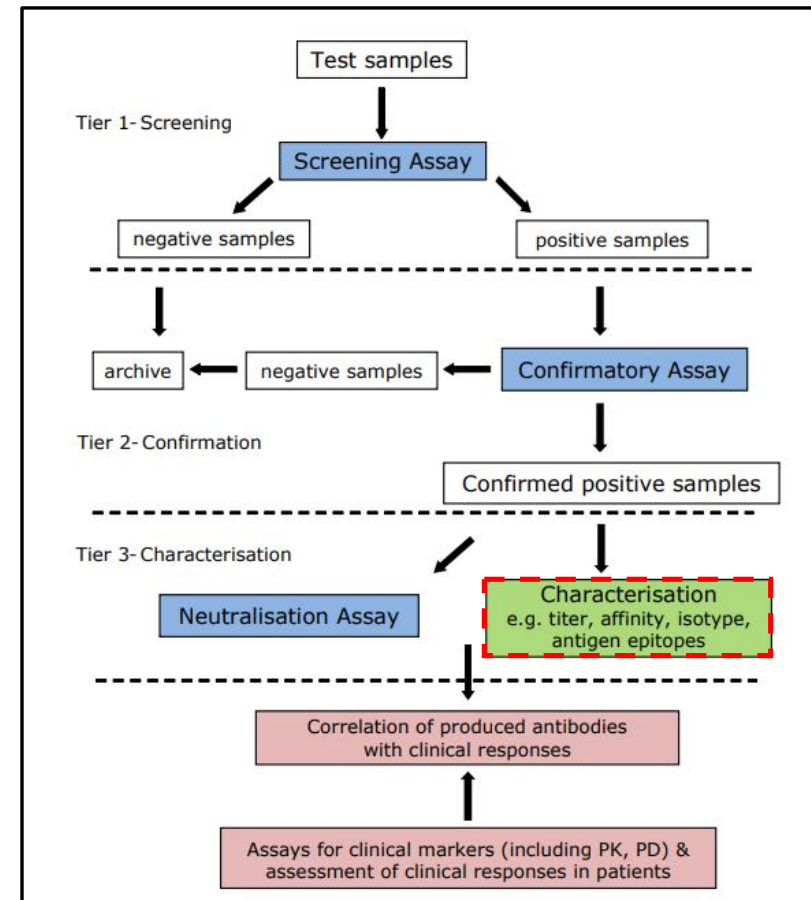


Image: EMA Guideline on Immunogenicity Assessment of Therapeutic Proteins  
EMA/CHMP/BMWP/14327/2006 Rev 1

# Immunogenicity Considerations

- Considerations for Multi-Domain Therapeutics:
  - immunogenic structural or linear epitopes
  - significant homology of a domain with endogenous protein
  - repetitive antigenic structures
  - neoepitopes or non-natural sequences due to molecule engineering
  - possibility of epitope spreading
  - hapten effect due to conjugation/fusion with larger protein
- No one-size fits all, but assessment based on molecular structure and mechanism(s) of action

Myler, H *et al.*, Anti-drug Antibody Validation Testing and Reporting Harmonization, AAPS J. 2022; 24:4  
Gorovits B, Peng K, Kromminga, A. Current Considerations on Characterization of Immune Response to Multi-Domain Biotherapeutics, BioDrugs. 2020 Feb; 34(1):39-54  
Gorovits B, Wakshull E, Pillutla R, Xu Y, Manning MS, Goyal J. Recommendations for the characterization of immunogenicity response to multiple domain biotherapeutics. J Immunol Methods. 2014;408:1-12.

# Strategies for Assessing Domain Specificity

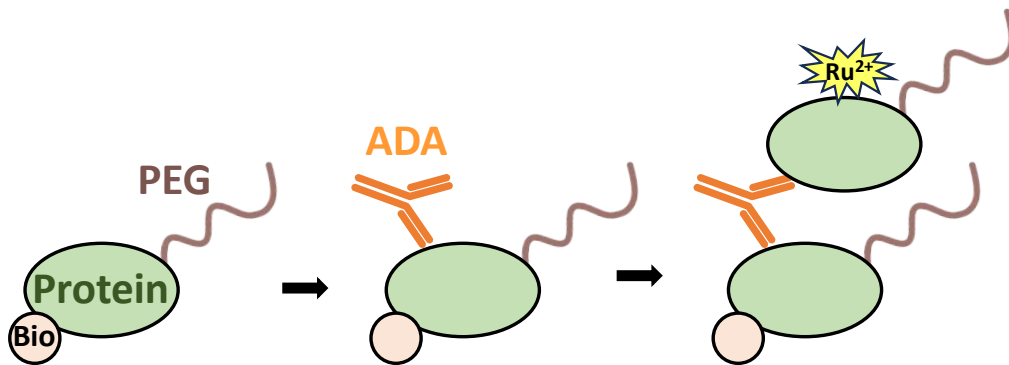
Choosing an assay format



# PEGylated Protein: Total ADA Assay

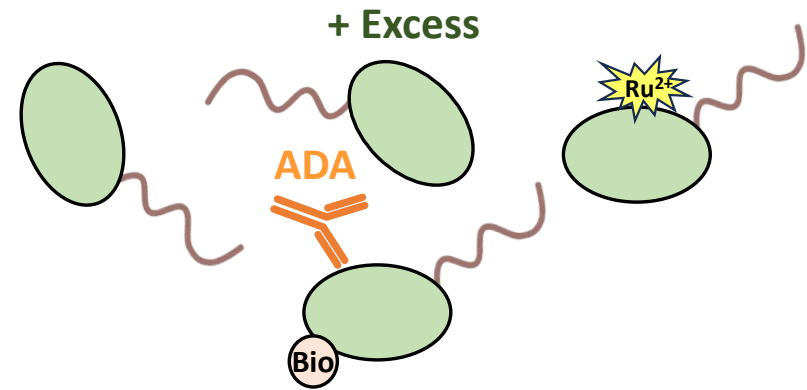
## Screening Assay

Whole molecule for bridging assay



## Confirmatory Assay

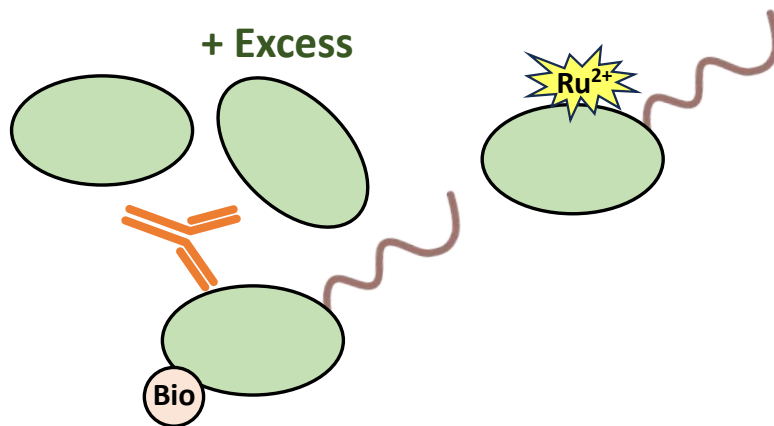
Competition with whole molecule



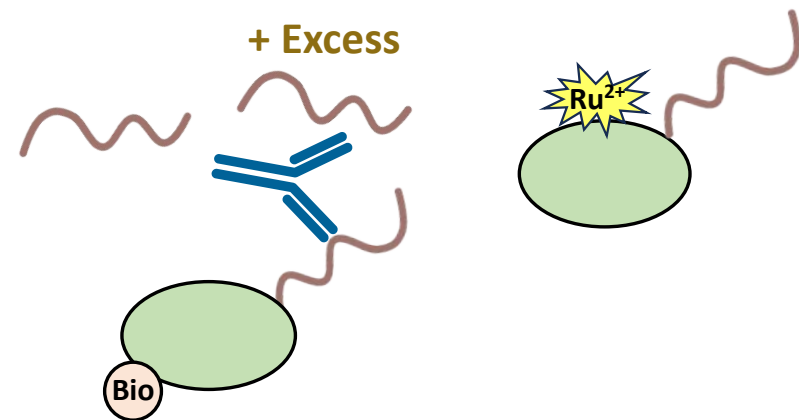
# PEGylated Protein: ADA Specificity Assay

## Domain Competition Confirmatory Assays

Competition with protein domain



Competition with PEG domain



A specific anti-PEG SPC has to be used.

# Domain Competition Confirmatory Assays

## Requirements

- Individual domains for the competition assays and (ideally) domain-specific 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 confirmatory tier (only one development)

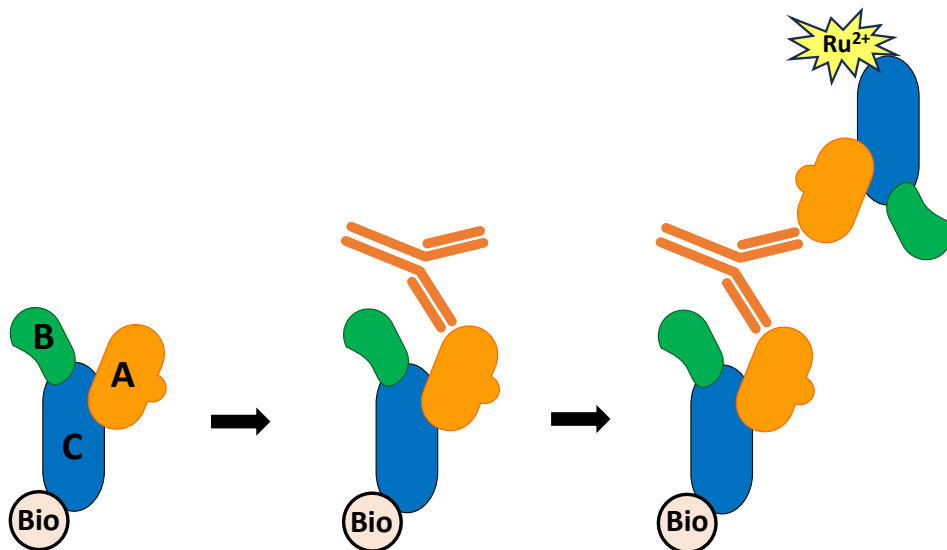
## CONs

- Only qualitative results possible (i.e. positive vs. negative for each domain)
- 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

# Tri-functional Protein: Total ADA Assay

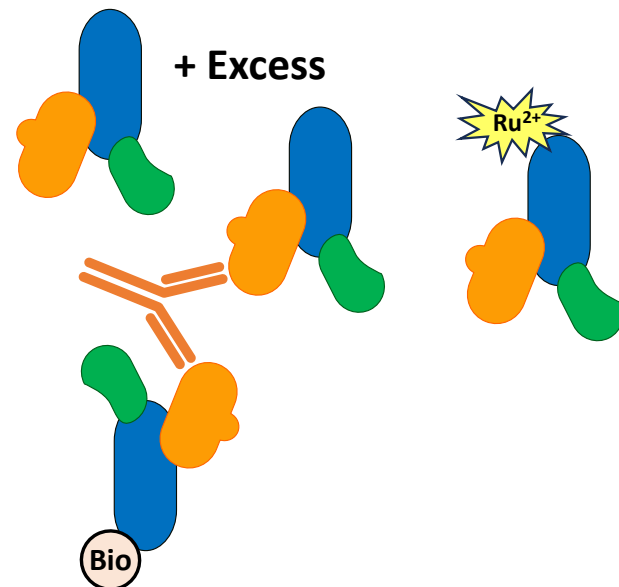
## Screening Assay

Whole molecule for bridging assay



## Confirmatory Assay

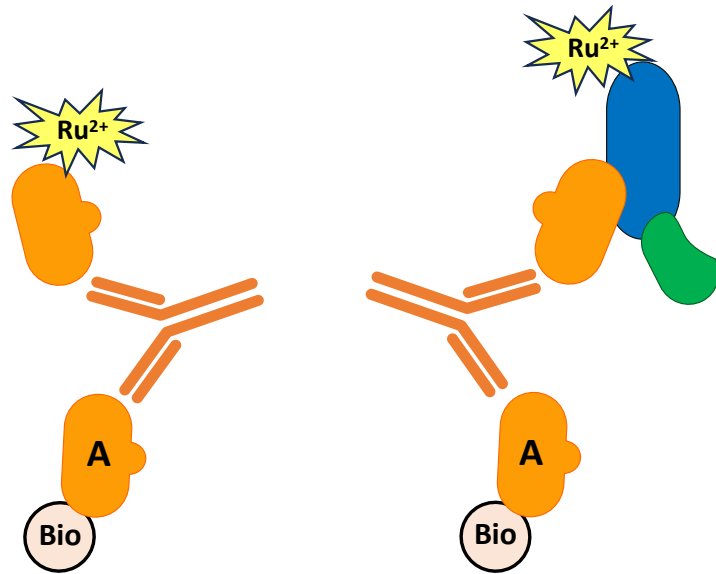
Competition with whole molecule



# Tri-functional Protein: ADA Specificity Assay

## Separate Screening Assays

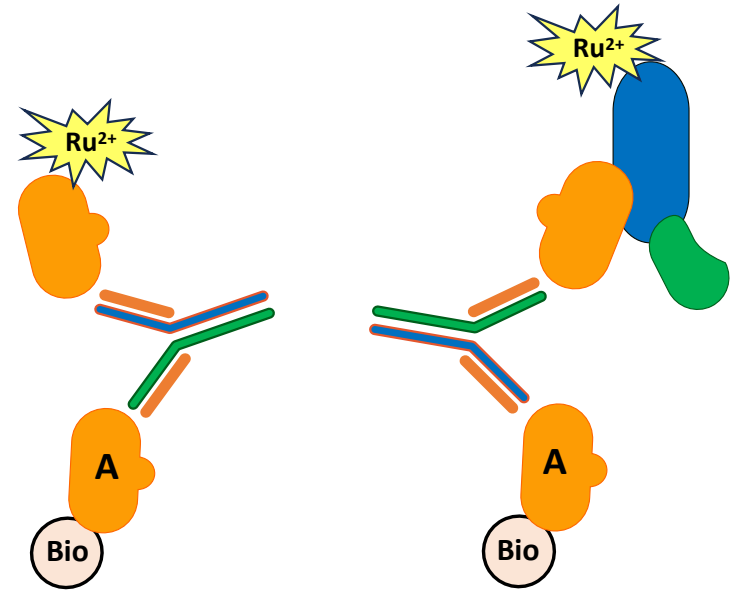
### Monoclonal SPC against Domain A



Option 1

Option 2

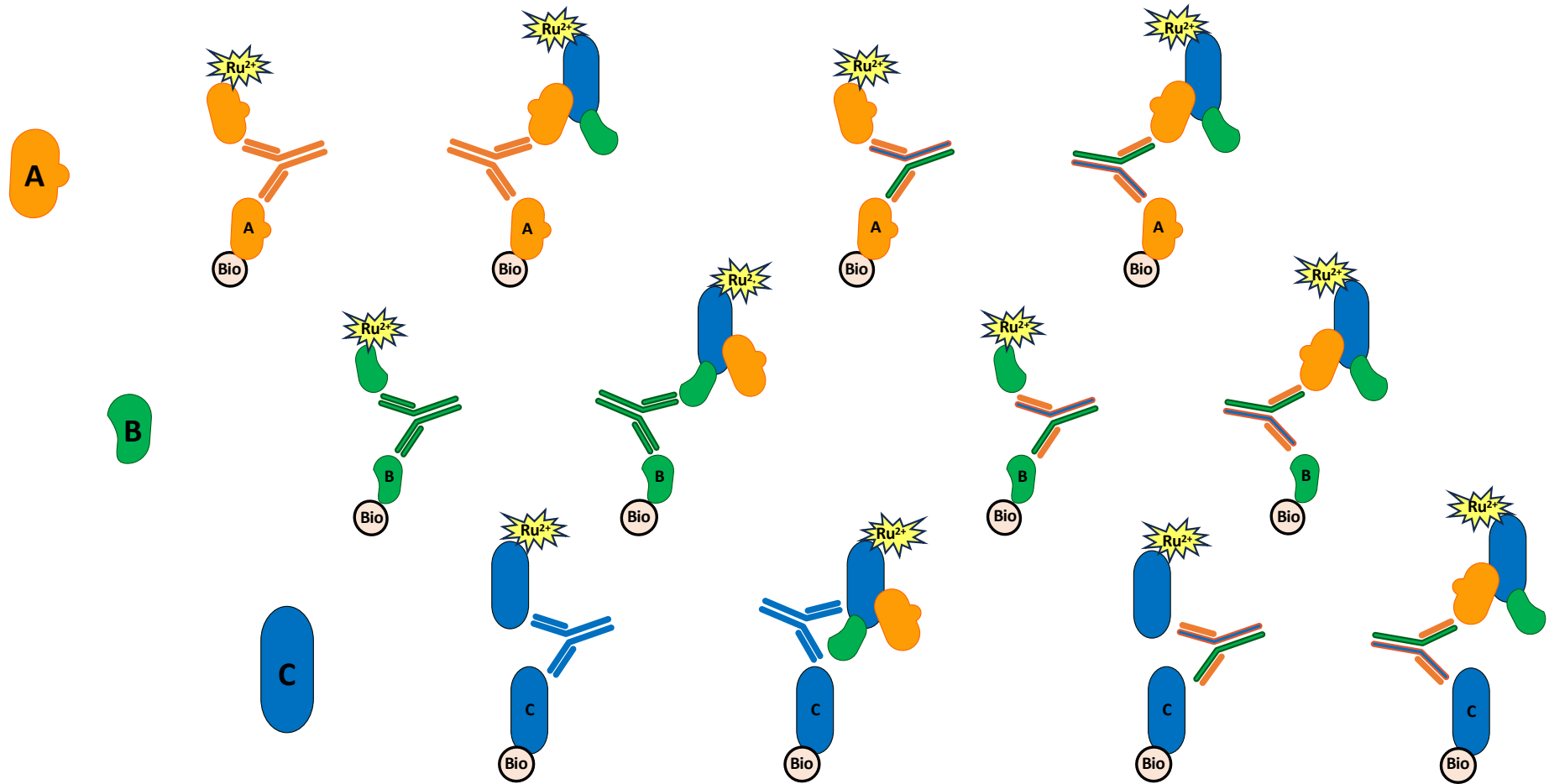
### Polyclonal SPC against Tri-functional Protein



Option 3

Option 4

# Tri-functional Protein: ADA Specificity Assay



# Separate Domain Screening Assays

## Requirements

- Individual domains for the assay set-up and domain-specific or polyclonal SPC
  - 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 optimization may be required with the different domain capture/ detection and the different PCs
- Usually sensitive to detect domain-specific antibodies
- Semi-quantitative readout possible (by titer or S/NC ratio)

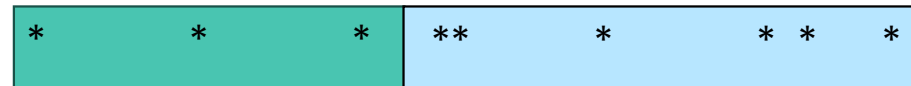
## CONS

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

# Fusion Protein with Endogenous Counterparts

## Therapeutic Fusion Protein

Domain A  
(sequence-optimized)



Domain B  
(sequence-optimized)

\* amino acid composition different to endogenous proteins

Cross-reactivity of potential  
immune response

- ADA
- NAb



Full-length endogenous protein A



Full-length endogenous protein B

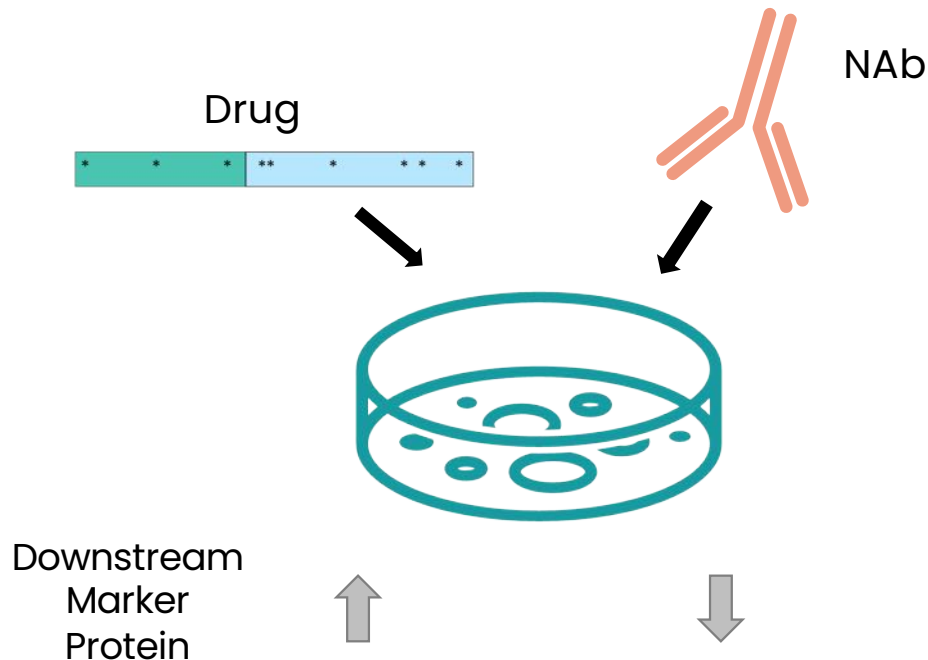
→ Domain Assays use the full-length endogenous proteins but not the sequence-optimized domains of the therapeutic



# Cell-based NAb Assay For Fusion Protein

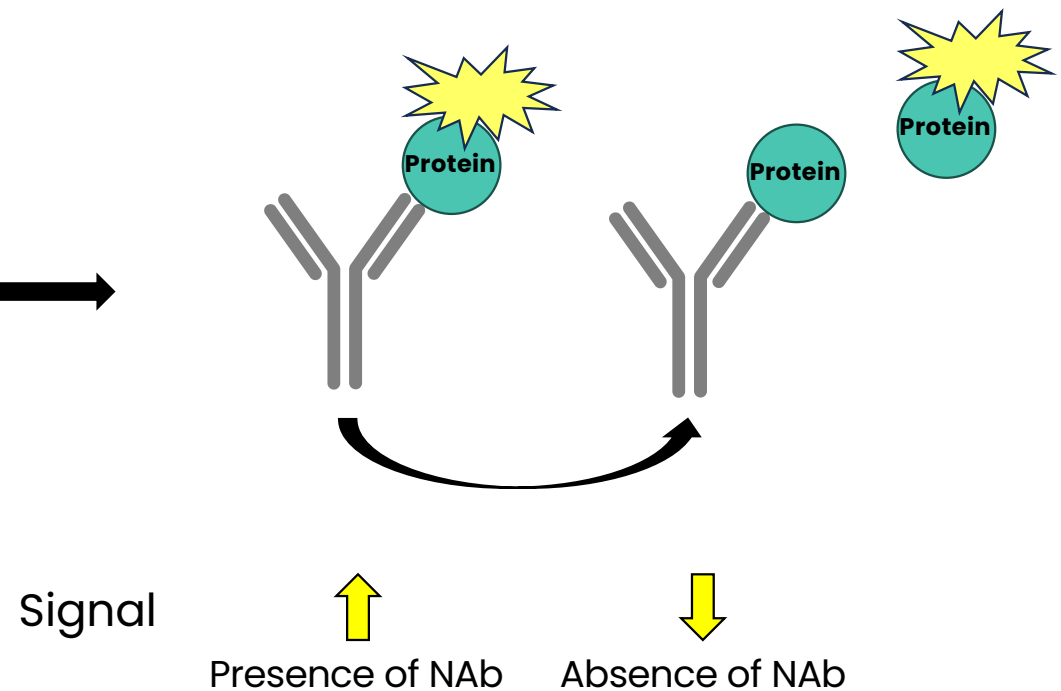
## Cell-based Assay

Based on Mechanism-of-Action



## Quantification of Marker Protein

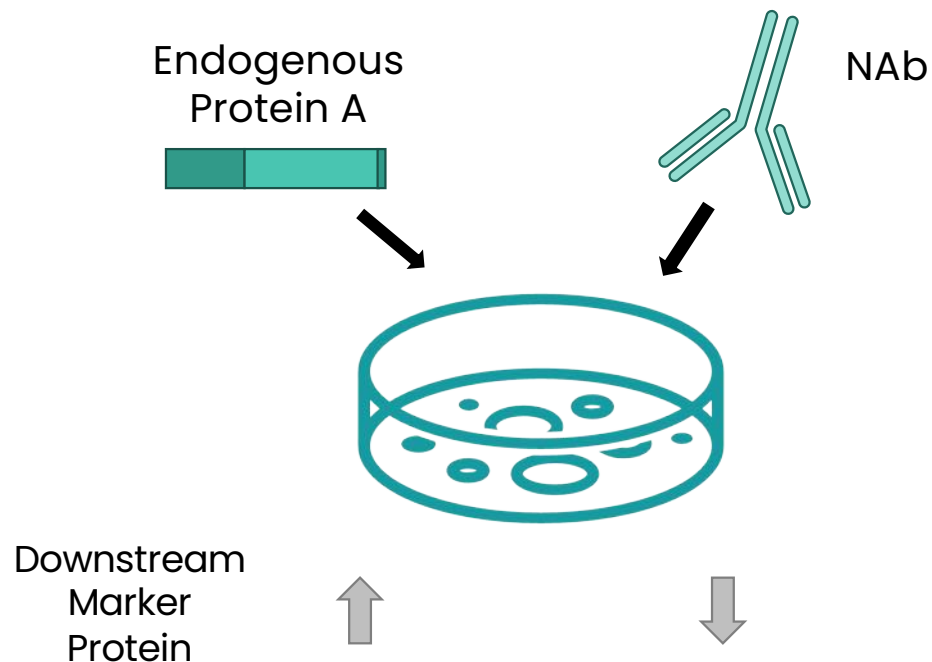
Commercial ELISA



# Cell-based NAb Assay For Endogenous Protein A

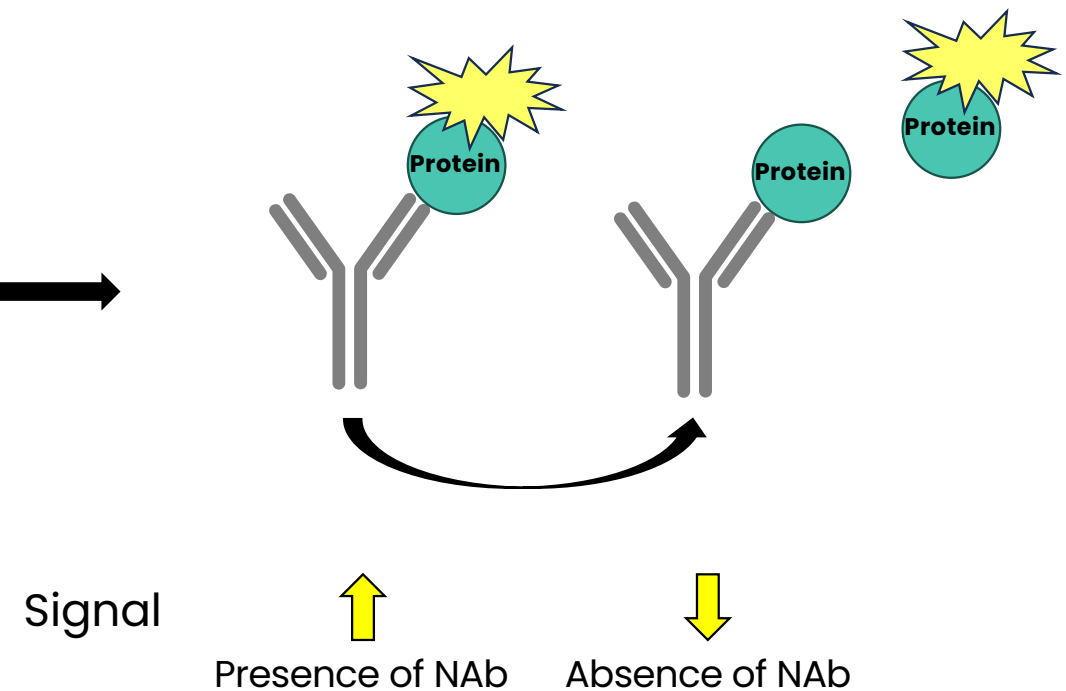
## Cell-based Assay

Based on Mechanism-of-Action



## Quantification of Marker Protein

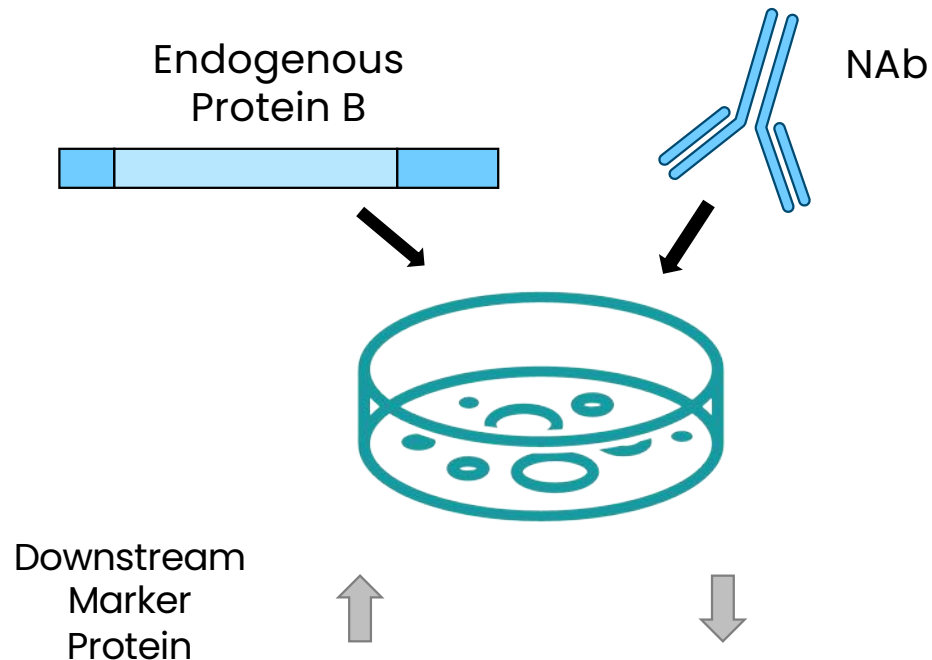
Commercial ELISA



# Cell-based NAb Assay For Endogenous Protein B

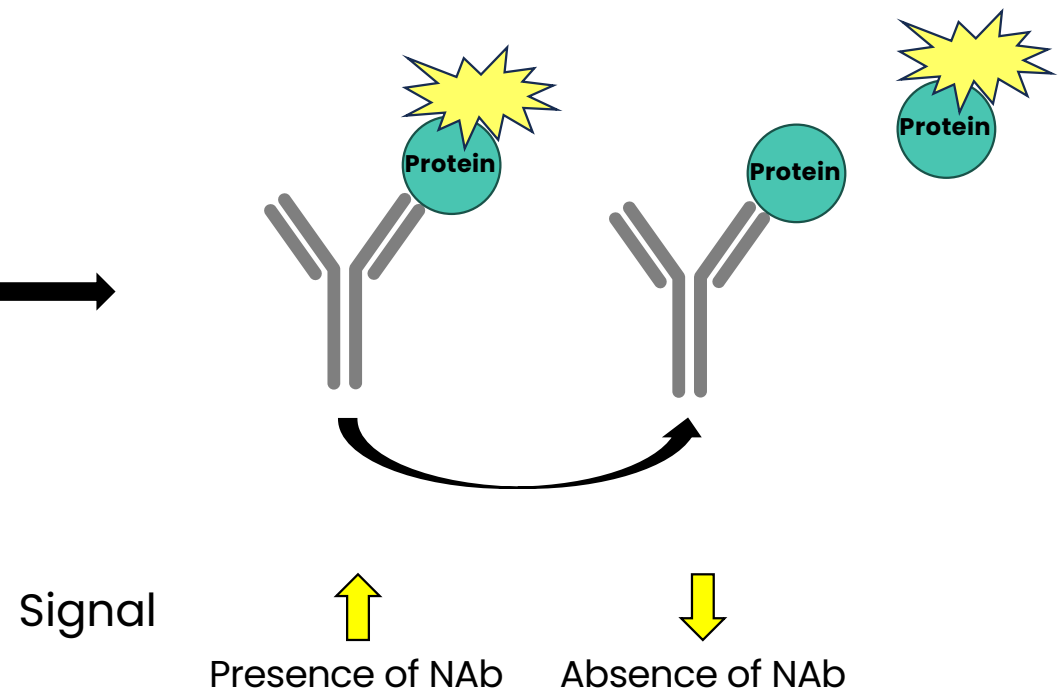
## Cell-based Assay

Based on Mechanism-of-Action



## Quantification of Marker Protein

Commercial ELISA



# Domain Specificity – A Must-Have for Multi-Domain Therapeutics?

Regulatory expectations, timing, advantages, and challenges

# Regulatory Expectations

## Immunogenicity Testing of Therapeutic Protein Products, FDA

### IV 3. Domain Specificity

- For multi-domain therapeutic protein products, the sponsor may need to investigate whether the ADA binds to specific **clinically relevant domains** in the protein.
- For example, to adequately understand the risk of ADA to subjects for therapeutic protein products with modifications such as pegylation, sponsors should **develop assays to determine the specificity of ADA for the protein component as well as the modification** to the therapeutic protein product (Gorovits *et al.* 2014).

## Guideline on Immunogenicity Assessment of Therapeutic Proteins, EMEA

### 7.5. Immunogenicity assessment of conjugated proteins and fusion proteins

- Elicitation of an antibody response with multiple specificities and variable affinity towards different epitopes resulting in **varying degrees of clinical impact** is expected for novel biotherapeutic molecules such as engineered fusion proteins and chemically conjugated proteins.
- The evaluation of this response, in particular, the characterization of the specificity of the induced antibodies is challenging and **may require multiple assays for measuring immune responses to various moieties.**

# Regulatory Expectations/ White Paper Recommendation

## Bispecific Antibody Development Programs, FDA

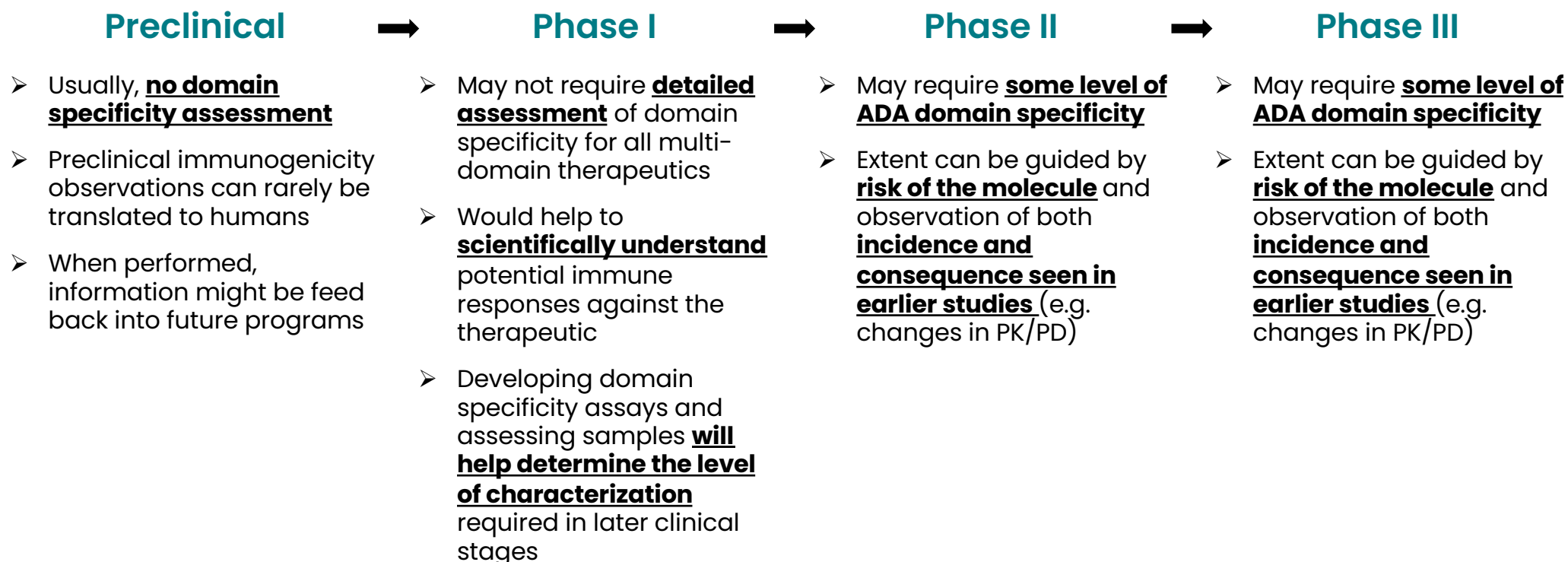
### C 1. Clinical Pharmacology Studies

- When examining immune responses to bispecific antibodies, **it may be appropriate to develop multiple assays to measure responses to different domains** of bispecific antibodies.

## ADA Validation Testing and Reporting Harmonization, Myler *et al.* 2022

- The immunogenicity assessment strategy is driven by the **molecule's risk assessment** and is a regulatory expectation
- For MDB, the regulatory expectations are clear; a sponsor should consider a **determination of immune response to** the entire molecule, **each of the domains** as well as to any neo epitopes to provide a thorough assessment of immunogenicity.
- Current industry practice is to do this evaluation in the standard tiered fashion in the **clinical phases, in particular earlier phases for MDB with limited clinical experience.**

# Timing of Domain Specificity Assessment



# Advantages of Domain Specificity Assessment

## Scientific Understanding of Therapeutic's Immunogenicity

- Identify the immunogenic domains of the therapeutic
- Allows for optimization/modification of therapeutic to reduce immunogenicity
- Might only apply to future programs again using the same domain



# Advantages of Domain Specificity Assessment

## Patient Safety and Therapeutic Efficacy

- Standard ADA assay detects the totality of ADA  
→ allows correlation with safety and efficacy-related aspects
- In case any of the domains has an **endogenous counterpart with high homology**, it might be critical to understand if the immune response is directed against this domain, as it might lead to a **loss of the endogenous activity**
- Some components are known to **activate specific immune responses** (e.g. Anti-PEG antibodies trigger complement activation by PEGylated lipid-based nanoparticles. *Senti ME et al. J Controlled Release (2022)*)

# Challenges of Domain Specificity Assessment

- **Technically challenging**: due to the **complexity of the biotherapeutic** and the potential for **cross-reactivity** between domains
- **Bioanalytical challenges**: require highly **specific** and **sensitive** assays as well as appropriate **critical reagents**
- **Effort vs. value**: **time-consuming** and **expensive** vs. **deeper understanding of immune response** and **additional correlations** with **PK/safety/efficacy**
- **Interpretation challenges**: presence of ADAs against one domain might influence the detection or binding of ADAs against another domain and **sensitivity** of each of the assays might be different

# Acknowledgements

## THANK YOU...

### BioAgilytix colleagues

GREAT COLLABORATION AROUND THE WORLD  
SUPPORTING THIS PRESENTATION

### Sponsors

INTERESTING PROJECTS  
GREAT SCIENTIFIC DISCUSSIONS

### EIP

ORGANIZING THE SYMPOSIUM  
PRESENTING OUR WORK

# Thank You

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