Drugmakers Support FDA’s Expanded Trial Eligibility Plan, GAO Says

By Colin Stoecker

Drug manufacturers are making progress toward the FDA’s goal of increasing access to investigational drugs outside clinical trials, the GAO says in a report released last week.

Of 29 manufacturers GAO surveyed, 23 companies reported having an expanded access policy and only four stated they would not consider expanded access requests.

One of the four sponsors said it wanted to ensure its investigational drugs were administered to patients only through clinical trials where safety could be closely monitored. Another cited limited resources, stating that the company chose to focus resources solely on conducting clinical trials.

Among the 19 manufacturers willing to consider requests for investigational drugs outside of clinical trials, 18 stated that patients must have a serious or life-threatening disease or condition with no comparable therapies available and have been ineligible for a clinical trial of the requested drug.

Seventeen stated that the treating physician must determine for the patient seeking access that the risk of taking the investigational drug is not greater than the anticipated benefit. Ten sponsors stated that supply of investigational drugs was a consideration.

Five sponsors referenced specific drugs they would consider providing, including three investigational drugs for bladder cancer, influenza and HIV from one manufacturer.

Ask the Expert: Protocol Deviations and Publishing Case Studies

This monthly feature presents a variety of questions from clinical trial professionals with answers from WCG Clinical’s expert staff. To ask a question of WCG’s experts, click here: https://bit.ly/2XB9f6R.

Question:
In case of an unscheduled visit, or a serious adverse event that occurred and was treated outside the study site, should a protocol deviation be created if not all tests are done per protocol? — Clinical team at large biopharma company

Answer:
The determination of what should be considered a protocol deviation, “violation,” or “minor/major” deviation, etc., is usually based on a policy or SOP from the study sponsor, or sometimes from the study site. Tracking protocol deviations can be useful for explaining missing or out-of-window data, for identifying parts of the protocol that are difficult and may need revision, for identifying instances of non-compliance of study site teams that need to be addressed and for identifying events that may require prompt reporting to the IRB.

Some protocols define procedures to be completed if the participant must have an unscheduled study visit — perhaps for the assessment or treatment of an adverse event during the study. If the protocol does define procedures for that type of visit, and the procedures were not completed, that seems like it would meet the definition of a protocol.
Biogen and Eisai End Three More Alzheimer’s Studies

Biogen and Eisai announced this week that they are pulling the plug on three additional phase 3 Alzheimer’s trials of investigational oral beta amloid therapies (BACE inhibitors) over safety concerns.

The companies previously had halted two phase 3 trials of anti-beta amloid drug aducanumab after a data safety monitoring board (DSMB) review of interim data concluded the treatments were unlikely to benefit patients (CenterWatch Weekly, April 29, 2019).

The most recent trials, of BACE inhibitor elenbecestat, were cancelled after the DSMB judged the treatments being tested to have an unfavorable risk-benefit ratio.

The studies had enrolled more than 2,000 patients globally with mild cognitive impairment with confirmed amloid pathology in the brain. Investigators will contact study participants to discontinue the treatment.

The cancellation of the elenbecestat trials will not impact the companies’ study of the anti-amloid beta protofibril monoclonal antibody BAN2401, Biogen says.

Amgen Announces Clinical Hold of One Trial, Voluntary Suspension of Another

In the wake of a clinical hold placed on one of its oncology trials by the FDA, Amgen has decided voluntarily to halt recruitment for a similar study.

Amgen’s phase 1 dose-escalation trial of AMG 397 carried a risk of cardiac toxicity in patients, the FDA said, and should be halted.

The company determined a second oncology drug, AMG 176, was too similar in mechanism of action to AMG 397 to risk treating patients in the first-in-human trial for which it had started recruiting.

The AMG 397 trial began recruiting in August 2018 and had enrolled 24 subjects globally, with a completion target of August 2020. The AMG 176 study was a global phase 1 trial initiated in June 2016 and expected to be completed in April 2024.

Janssen Using Voice Tech to Gather Patient Data

Janssen has developed a voice-enabled software tool that allows clinical trial participants to respond to and ask questions using an app on their smartphone.

The voice-enabled technology collects information from patients using questions — such as whether they are experiencing pain — programmed to inquire at certain times during the trial. These questions are then answered verbally by the patient and the answers are recorded.

An algorithm then decides whether to provide an immediate personal follow-up or capture the recording for future analysis.

The software can provide patients with real-time answers to questions regarding their disease state, about the trial generally, or about scheduled visits.

The application is being tested by a group of patients receiving treatment for chronic conditions at Brigham and Women’s Hospital in Boston

Janssen expects to initiate another study in early 2020, with the goal of providing the technology for broad use in clinical trials by the end of the year.

Maine Provider Network to Launch $5.1 Million Cancer Clinical Trial Center

NIH has granted healthcare provider MaineHealth $5.1 million to create a clinical research center that will give cancer patients in the state access to clinical trials closer to home.

The MaineHealth Cancer Care Network Lifespan Program will allow MaineHealth, the state’s largest provider network, to serve a minimum of 85 patients initially with the potential to serve hundreds over its six-year term.

The program will be the only oncology program in northern New England to enroll patients — including children — in clinical trials at every stage of the cancer continuum.

WCG CEO Donald Deieso Named to PharmaVOICE Top 100

PharmaVOICE has named Donald Deieso, executive chairman and chief executive officer of WCG Clinical, as one of the life science industry’s top 100 most inspiring leaders of 2019.

Deieso, who also received the honor in 2016, was commended by PharmaVOICE for his “never-wavering integrity and human-centric approach to problem-solving.”

Since taking over as CEO in 2012, Deieso has grown WCG to 15 times its original size, with 28 locations in eight different countries.
This feature highlights changes in clinical research organizations’ personnel.

**AbCellera**
AbCellera Biologics Inc. has appointed Andrew Booth chief financial officer. Previously, Booth was vice president of instrumentation, chief financial officer and chief commercial officer at STEMCELL Technologies.

**Alpha Tau Medical**
Alpha Tau Medical has named Robert Den chief medical officer. Den is currently an associate professor of radiation oncology, cancer biology and urology at Thomas Jefferson University.

**Altasciences**
Lynne LeSauteur was named vice president of immunochemistry and immunology at Altasciences. LeSauteur most recently was director of downstream processing and analytics as well as program leader of biologics and biomanufacturing for the Human Health Therapeutics Research Center at the National Research Council of Canada.

**Aprecia**
Aprecia, the 3DP Pharmaceutical Company, named Kirk Donaldson vice president of business development and alliance management. Donaldson most recently served as associate director of account management at MEDPACE.

**Auris Medical Holding**
Elmar Scharli has been named chief financial officer at Auris Medical Holding Ltd. Scharli was the founder and chief executive officer of Ante Treuhand AG, a Swiss fiduciary company.

**Azelis**
Azelis has appointed Ron Rosenberg as its first ever group technical innovation director. Rosenberg was the technical director of the Americas with Azelis since 2014.

**Bacteri, ** Stefan Grass has been named chief medical and technology officer at Bactiguard. Grass previously served as the medical affairs manager for the Nordic region at CSL Behring.

**Bionik Laboratories**
Bionik Laboratories Corp. has appointed Loren Wass as chief commercial officer. Wass was most recently vice president of sales and reimbursement at ReWalk Robotic.

**Cala Health**
Renee Ryan has been named chief executive officer at Cala Health. Previously, Ryan served as the head of venture investments at Johnson & Johnson.

**Crescendo Biologics**
Crescendo Biologics Ltd. has named Stewart Kay chief business officer. Previously, Kay served as senior director of transactions in the world-wide business development group at GlaxoSmithKline.

**Click Therapeutics**
Ross Muken has been named chief financial officer at Click Therapeutics, Inc. Muken most recently served as senior managing director and partner at Evercore ISI.

**Farcast Biosciences**
Farcast Biosciences has appointed Maneesh Arora as president and chief executive officer. Previously, Arora served as the chief operating officer and director at Exact Sciences.

**gvk bioSciences**
India-based gvk bioSciences has appointed Sudhir Singh chief operating officer. Singh held the position of executive vice president, discovery services at the company since 2013.

**Innoblative Designs**
Kelly Londy has been named chief executive officer at Innoblative Designs. Londy was previously CEO and executive officer at Luminex.

**Inscripta**
Jim Lalonde has been named lead strategic business and portfolio developer for Inscripta, Inc. Lalonde’s most recently appointment was with Codexis, where he was senior vice president of research and development.

**Kallyope**
Juha Lauren has been appointed chief business officer at Kallyope. Lauren was a senior director of business development and research and development strategy at Regeneron Pharmaceuticals.

**Kintai**
Mark Nuttall has been named chief business officer at Kintai Therapeutics. Nuttall previously was the chief business officer at Kymera Therapeutics.

**Locana**
Locana has named Kathie Bishop chief science officer. Bishop was most recently chief science officer at Otonomy.

**Medispend**
Medispend has named Craig Hauben chief executive officer. Hauben most recently served as the executive vice president of coding business at Ciox Health.

**Northwest Biotherapies**
Kevin Duffy has been named vice president of medical affairs and external collaborations at Maryland-based Northwest Biotherapies. Duffy most recently served as the research scientific director in the Keytruda program at Merck.

**ObsEva**
ObsEva has added to its executive committee with Elizabeth Garner named chief medical
officer. Garner most recently owned and was the president of KNI Health Consultants in addition to her role as chief medical officer at Agile Therapeutics.

**Orchestra BioMed**

Dennis Donohoe was named chief medical officer of Orchestra BioMed. Previously, Donohoe was the part-time chief medical officer for Orchestra BioMed’s focal therapies group and its predecessor, Caliber Therapeutics.

**Prometheus Biosciences, Inc.**

Previously known as Precision IBD, Prometheus Biosciences, Inc. has changed its name and appointed Mark McKenna as chief executive officer. McKenna previously served as president of Salix Pharmaceuticals.

**Robocath**

Robocath has appointed Lucien Goffart as chief executive officer. Previously, Goffart was business unit manager for France at Boston Scientific.

**Seven Bridges**

Brian Castagna was named chief information officer at Boston-based Seven Bridges. Previously Castagna served as the director of information security at Oracle.

**Solgenix**

Jonathan Guarino has been named chief financial officer at Solgenix. Guarino was previously corporate controller for Hepion Pharmaceuticals.

**Somatus**

Somatus has appointed Jon Kunkle chief financial officer. Previously, Kunkle was head of finance and chief financial officer at Kaiser Permanente.

**Stealth**

Stealth BioTherapeutics has appointed Robert Weiskopf chief financial officer. Weiskopf most recently served as chief financial officer and treasurer at ArQule.

**Step Pharma**

Step Pharma has appointed Andrew Parker as chief executive officer. Previously, Parker served as executive vice president and chief science officer at Zealand Pharma.

**Synlogic**

Synlogic has named Richard Riese chief medical officer and Michael Slater head of regulatory affairs. Previously, Riese served as the vice president of clinical development at Alnylam and Slater served as the head of regulatory affairs and development operations at Merrimack Pharmaceuticals.

**TMRW**

Lori Batta has been named chief commercial officer at TMRW. Batta was most recently chief commercial officer at next generation women’s health company Celmatix.

**VenatoRx Pharmaceuticals**

Joseph Larsen has been named vice president of strategic portfolio development at VenatoRx Pharmaceuticals. Larsen was previously senior vice president of life sciences at Strategic Marketing Innovations.

**Verge Genomics**

Verge Genomics has appointed Jane Rhodes chief business officer. Rhodes was most recently vice president of business development and corporate strategy at FORMA Therapeutics.

**Xellia Pharmaceuticals**

Peter Baker was named chief commercial officer at Xellia Pharmaceuticals. Baker previously was the national accounts lead for Xellia North America.
Drugmakers Support
continued from page 1

Reaction was mixed among drugmakers to the agency’s plan to broaden trial eligibility. Most reported taking steps to open trials to wider populations, as recommended in four draft guidances the FDA issued in March (CenterWatch Weekly, March 18, 2019).

But some respondents expressed concern that broadening eligibility could adversely affect a study’s ability to identify the effects of a drug. According to four drugmakers responding to GAO, “Broader criteria must be carefully balanced with the need to collect evidence from a well-defined population,” the report says.

Another objection raised, GAO reports, is that “removing standard exclusion criteria, such as excluding patients who use other medications, could interfere with the success of their clinical trial if those medications make it difficult to identify the effects of the studied drug.”

But two sponsors said they agree that broader eligibility criteria will allow more patients access to investigational drugs through clinical trial participation and said they would follow the agency’s lead because “it will facilitate the drug approval process.”

Most manufacturers did not report efforts to broaden eligibility criteria specifically, but many said they were taking other steps to increase inclusion in trials, such as covering patients’ travel costs, and establishing decentralized trial locations convenient to patients.

One sponsor said it completed a pilot clinical trial on diabetes this year that decentralized trial locations across three states. Yet another manufacturer is planning to conduct a clinical trial that is fully remote in the next two years.

Manufacturers also are planning to better involve historically underrepresented groups in clinical trials, with one manufacturer conducting workshops to train minority investigators. Sponsors also are considering locating trial sites in areas with minority populations of more than 25 percent.

Read the full report here: https://bit.ly/2lMrwFO.

---

Using IT to Improve Data Integrity
Optimizing Your Compliance Joint IT/QA Programs

Friday, Sept. 27, 2019 • 11:00 a.m. – 12:30 p.m. EDT

Mark your calendar for a 90-minute crash course with consultant Israel Heskiel on integrating IT into the overall data-integrity compliance effort. For more than 20 years, Mr. Heskiel has focused on easing companies like yours into the new world of IT data integrity. In this session he will pinpoint compliance with the FDA’s Data Integrity Title 21 Part 11, and the Final Guidance on Data Integrity and Compliance with Drug cGMP.

Webinar Takeaways:

- Communicating with IT leaders
- Establishing SOPs
- IT, quality management and regulatory affairs

- Mock FDA data integrity audit
- Creating an “FDA audit IT SWAT team”

Visit https://www.fdanews.com/cwitdataintegrity

REGISTER TODAY!
deviation, although the applicable policy should be consulted.

However, if an adverse event/serious adverse event occurs and the participant is seen and treated at a facility that is not participating in the clinical study, the providers there will presumably perform clinically appropriate testing. They may not complete every test that is defined in the protocol to be completed at a scheduled or unscheduled study visit. But they are not a study site, and they don’t have the protocol to follow. So it doesn’t seem to be useful or productive to document that there was a “deviation from the protocol,” when the providers didn’t have a protocol to follow. — Lindsay McNair, chief medical officer, WCG Clinical

Question:
Is IRB review required for publication of a single-patient case study from a case that occurred several years ago? — Physician at a private practice with a university faculty appointment

Answer:
Research is defined by federal regulations as systematic investigation designed to contribute to generalizable knowledge. The retrospective analysis of the experience of a single patient’s experience with standard treatments would not likely meet an IRB’s definition of research and would not require review or exemption by the IRB.

Many IRB policies state that the analysis of a case series, which is more than three cases, meets the definition of human research and requires the submission and review by the IRB.

Note that some journals may require acknowledgement from the IRB that review of a case study is not required. You may want to check with the specific journal on its requirements. If you are trying to publish in a journal that is asking for evidence of IRB review, it can be difficult when IRB review was not prospectively obtained, even if the reason that it was not obtained is that it was not actually required.

Some IRBs will look at the project and provide letters that state that, had the project been submitted to them prospectively, they would have found that it did not require IRB review, and that documentation is satisfactory to the journal. However, we have heard of situations in which journals refused to accept this kind of retrospective letter. — Yvonne Higgins, QA advisor, WIRB-Copernicus Group
Setting you Up for Success from the Start.

At WCG, we use our evidence-based insights to help set you up for success from the start. From strategic site selection to accelerating enrollment, our solutions empower you to anticipate problems, make better decisions and gain greater control over the key elements of your clinical study startup.
## Drug & Device Pipeline News

<table>
<thead>
<tr>
<th>Company</th>
<th>Drug/Device</th>
<th>Medical Condition</th>
<th>Status</th>
<th>Sponsor Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selvita</td>
<td>SEL120</td>
<td>acute myeloid leukemia (AML) or high-risk myelodysplastic syndrome (HR-MDS)</td>
<td>Phase 1b trial initiated enrolling subjects at sites across the U.S.</td>
<td>selvita.com</td>
</tr>
<tr>
<td>VBI Vaccines Inc.</td>
<td>VBI-1901 in combination with GlaxoSmithKline’s proprietary AS01B adjuvant system</td>
<td>recurrent glioblastoma (GBM)</td>
<td>Phase 2a trial initiated enrolling 20 subjects with first-recurrent GBM only</td>
<td>vbivaccines.com</td>
</tr>
<tr>
<td>Recardio, Inc.</td>
<td>dutogliptin in combination with filgrastim</td>
<td>post-myocardial infarction</td>
<td>Phase 2 trial initiated enrolling 140 subjects at specialized cardiology centers located throughout Europe and the U.S.</td>
<td>recardo.eu</td>
</tr>
<tr>
<td>Alector, Inc.</td>
<td>AL001</td>
<td>frontotemporal dementia (FTD) with specific genetic mutations, including the granulin gene (FTD-GRN)</td>
<td>Phase 2 trial initiated enrolling 32 subjects with FTD-GRN and an additional cohort of FTD subjects with a C9orf72 mutation (FTD-C9orf72)</td>
<td>alector.com</td>
</tr>
<tr>
<td>Biohaven Pharma Holding Company Ltd.</td>
<td>Vazegepant</td>
<td>acute treatment of migraine</td>
<td>Phase 2/3 trial initiated</td>
<td>biohavenpharma.com</td>
</tr>
<tr>
<td>Lipidar AB</td>
<td>Calcipotriol/AKVANO 50 µg/g cutaneous solution (AKP01)</td>
<td>mild to moderate psoriasis</td>
<td>Phase 3 study initiated enrolling 277 subjects at 14 clinics across India</td>
<td>lipidor.se</td>
</tr>
<tr>
<td>Functional Neuromodulation</td>
<td>fornix (DBS-f)</td>
<td>mild Alzheimer's Disease</td>
<td>Phase 3 study initiated enrolling 210 people 65 years or older with mild Alzheimer's disease at 14 study sites in the U.S., Canada and Germany</td>
<td>fxneuromod.com</td>
</tr>
<tr>
<td>EMD Serono</td>
<td>Evobrutinib</td>
<td>relapsing multiple sclerosis (RMS)</td>
<td>Two phase 3 studies initiated enrolling 1,900 adult subjects</td>
<td>emdserono.com</td>
</tr>
<tr>
<td>Nevakar Inc.</td>
<td>NVK-002</td>
<td>slow the progression of myopia in children</td>
<td>Phase 3 study initiated enrolling 576 child subjects aged 3 to 17 years in Asia, the U.S. and Europe</td>
<td>nevakar.com</td>
</tr>
<tr>
<td>Netech</td>
<td>Delta 3300</td>
<td>arrhythmia</td>
<td>510(k) approval granted by the FDA</td>
<td>netechcorp.us</td>
</tr>
<tr>
<td>Merck KGaA</td>
<td>Tepotinib</td>
<td>metastatic non-small cell lung cancer (NSCLC)</td>
<td>Breakthrough Therapy Designation granted by the FDA</td>
<td>emdgroup.com/en</td>
</tr>
<tr>
<td>Horizon Therapeutics plc</td>
<td>Teprotumumab</td>
<td>active thyroid eye disease (TED)</td>
<td>Priority Review granted by the FDA</td>
<td>horizontherapeutics.com</td>
</tr>
<tr>
<td>Almirall LLC</td>
<td>Aczone 7.5% topical gel</td>
<td>acne vulgaris</td>
<td>Approval granted by the FDA</td>
<td>aczone.com</td>
</tr>
<tr>
<td>Jenkins Eye Care</td>
<td>AcrySof IQ PanOptix Trifocal Intraocular Lens (IOL)</td>
<td>cataract</td>
<td>Approval granted by the FDA</td>
<td>jenkinseyecare.com</td>
</tr>
<tr>
<td>Axonics Modulation Technologies, Inc.</td>
<td>Implantable rechargeable sacral neuromodulation (“SNM”) device</td>
<td>urinary and bowel dysfunction</td>
<td>Approval granted by the FDA</td>
<td>axonicsmodulation.com</td>
</tr>
<tr>
<td>Boehringer Ingelheim Pharmaceuticals</td>
<td>Ofev (nintedanib) capsules</td>
<td>interstitial lung disease associated with systemic sclerosis or scleroderma (SSc-ILD)</td>
<td>Approval granted by the FDA</td>
<td>boehringer-ingelheim.com</td>
</tr>
</tbody>
</table>

For news on trial results, FDA approvals and drugs in development, Join the LinkedIn Drug Research Updates group!
Upcoming Event Highlights

Conferences

SEPTEMBER 27-29, 2019
Society of Clinical Research Associates 2019 Annual Conference
San Antonio, TX

OCTOBER 7, 2019
Be The Site of Choice
Philadelphia, PA

OCTOBER 23, 2019
WCG's Fall 2019 Patient Advocacy Forum
Washington, DC

OCTOBER 23-25, 2019
FDA Inspections Summit
Bethesda, MD

OCTOBER 27-30, 2019
MAGI Clinical Research Conference 2019 West
Las Vegas, NV

OCTOBER 31-NOVEMBER 3, 2019
CNS Summit 2019
Boca Raton, FL

Webinars

SEPTEMBER 19, 2019
Clarity on Clinical Investigations: What You Need to Know About EU-MDR and ISO/DIS 14155:2018

SEPTEMBER 27, 2019
Using IT to Improve Data Integrity: Optimizing Your Compliance Joint IT/QA Programs

OCTOBER 9, 2019
Regulatory Binders: Your Path to Paperless