

A large, abstract graphic on the right side of the slide. It consists of several overlapping, curved, and faceted shapes in various shades of blue and purple, creating a sense of depth and movement. The shapes appear to be part of a larger, complex structure that is partially visible.

Implementation of Patient Centric Microsampling to Support Paxlovid PK

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Clinical Bioanalytics, Clinical Pharmacology, Pfizer

Outline

Clinical Development Demands Tools to Support Decentralized Trials

- PK Strategy to Support Outpatient Studies
- Patient Centric Microsampling Brings Flexibility/Convenience to Special Populations with Reduced Patient Burden

Bioanalytical Support for Decentralized Trials

- Selection of Devices
- Method Dev and Validation
- Bridging Strategy and Results
- B/P Ratio

Implementation of Tasso M20 for PK

- Device Approval Status
- Central Lab Workflows
- Patient Facing Document and Site Training
- Patient Acceptance



Paxlovid Clinical Development for EUA

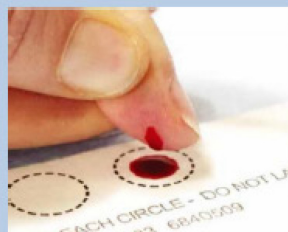
- COVID-19 pandemic requires expedited development of antiviral therapies to prevent disease progression and stop transmission. Nirmatrelvir (PF-07321332) is an orally bioavailable protease inhibitor with potent antiviral activity. It entered phase I clinical trial in March 2021.
- Out-patient studies were needed because of quarantine requirements for COVID-19 patients to reduce spread of the infection to site staff or other patients.
- With out-patient study design, PK sampling at-home using Tasso M20 device was implemented in three Phase 3 studies used to support the emergency use authorization (EUA).
- The at-home sampling complemented venous blood sampling procedures to enrich the PK dataset and to improve patients on-study experience by allowing different sampling approaches (e.g, home health visits, site visit, or self-collection).
- Paxlovid (Nirmatrelvir/ritonavir) was granted emergency use authorization in Dec 2021 by FDA and it has since received authorization/approval in several countries.

Enabling Technologies for At-home PK Sampling

Traditional Venous Collection



Fingerstick Collection



<https://cleancompetition.org/2016/05/11/whats-next-wednesday-dried-blood-spot-sampling/>



<https://www.neoteryx.com/mit-ra-cartridge-blood-sampling-device-dbs>



<https://www.trajanscimed.com/pages/hemapen>

Mobile Phlebotomy



www.sciencedirect.com/science/article/pii/S0167701217303287?via%3DIihub
ehp.niehs.nih.gov/doi/pdf/10.1289/ehp.6264

Capillary Collection



<https://www.tassoinc.com/>



<http://www.7sbio.com/>



<https://www.drawbridgehealth.com/>

Patient Centric Sampling: How the COVID-19 Pandemic is Shifting the Landscape, IQ CPLG/TALG PCS Working Group, 2021.

PK Assay Feasibility Evaluation with Different Devices

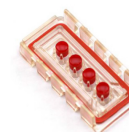
Parallel PK samples were collected at the same sampling time point from the same subject for comparison.



Venous Plasma



Tasso M20
Dried Blood



<100 μ L of blood



Tasso SST
Liquid Serum

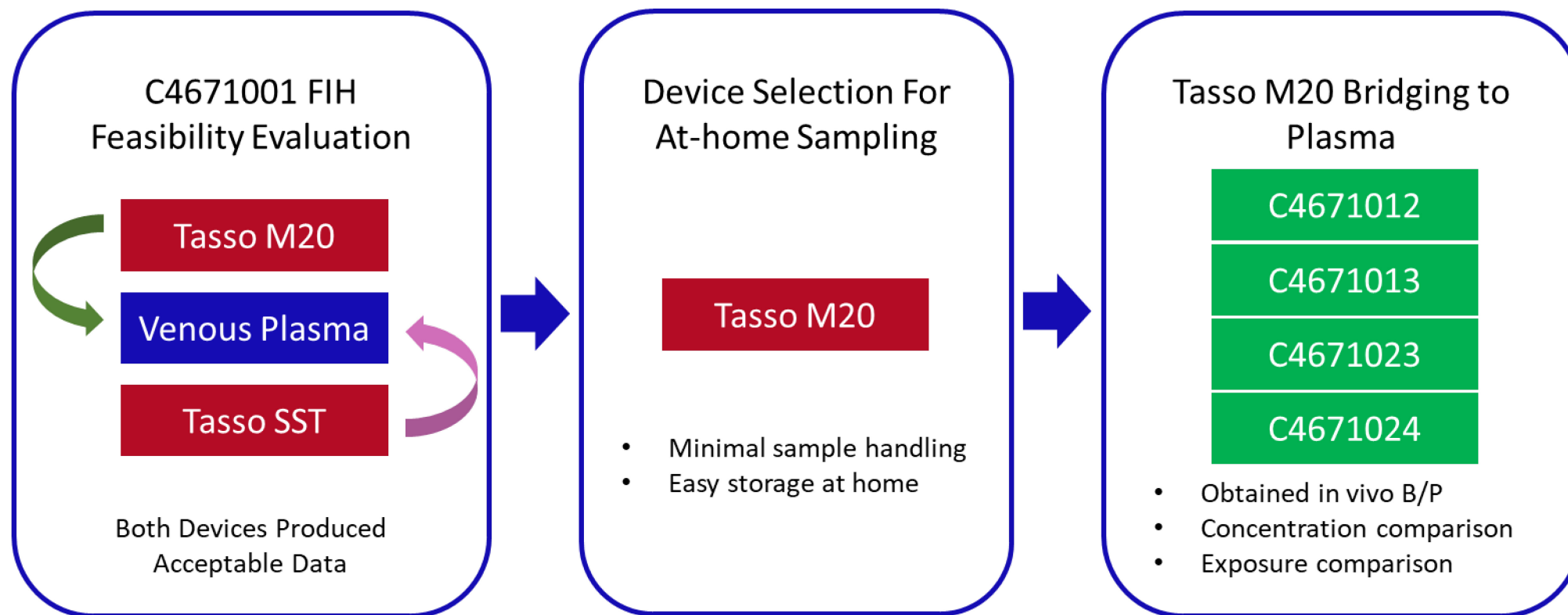


~ 100 μ L of serum

[Tasso M20 Video Link:](https://vimeo.com/409226805?embedded=true&source=vimeo_logo&owner=96725381)

https://vimeo.com/409226805?embedded=true&source=vimeo_logo&owner=96725381

Bioanalytical Bridging Strategy

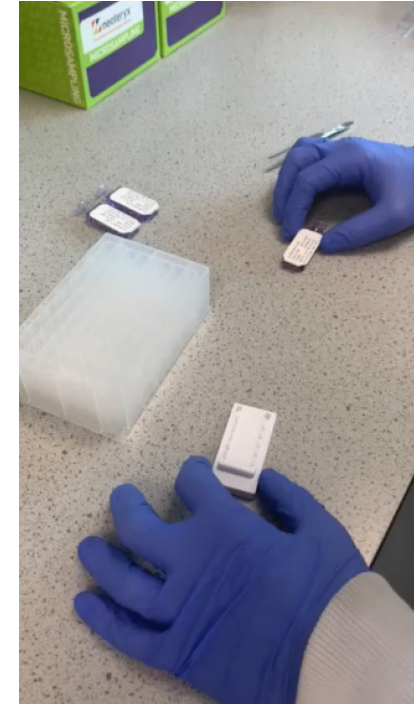


1. Enaksha R Wickremsinhe, Qin C. Ji, Carol R. Gleason, Melanie Anderson, and Brian P. Booth, Land O'Lakes Workshop on Microsampling: Enabling Broader Adoption, *AAPS J.* (2020) 22: 135.

Bioanalytical Method Validations

Three assays are needed:

- Plasma Assay
- Whole Blood Assay
- Dried Blood Assay (for the analysis of Tasso M20 samples)
 - Hematocrit impact to assay accuracy
 - Lot-to-Lot Variation
 - Comprehensive stability evaluations (including elevated humidity and temperature conditions) to cover the entire life cycle of a sample



Store ambient @
patient home until
pickup by Courier

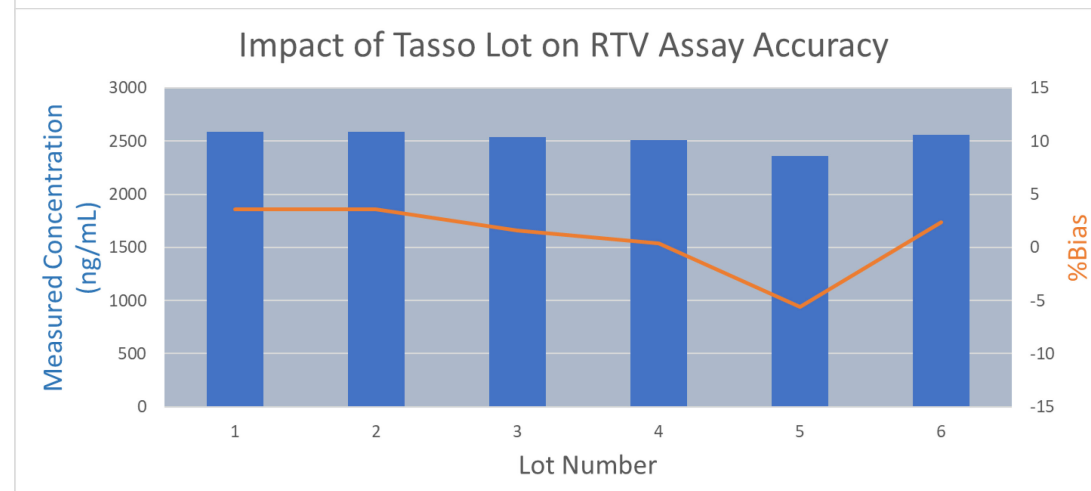
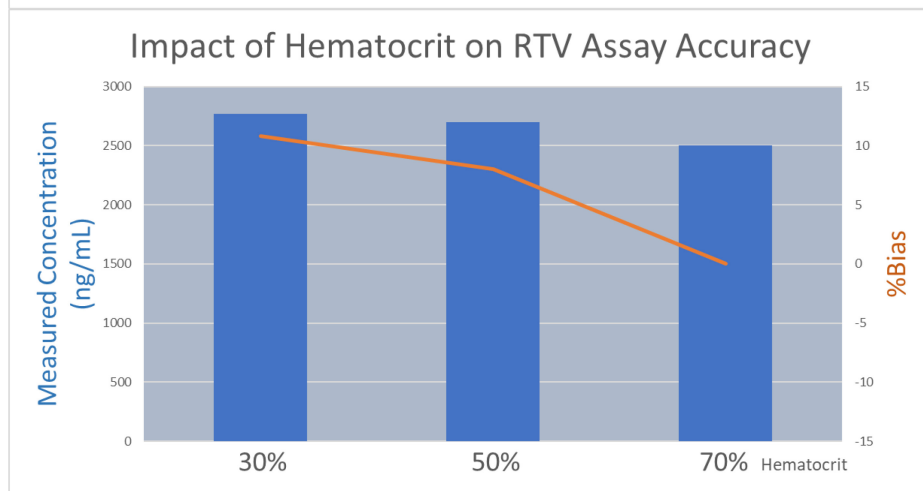
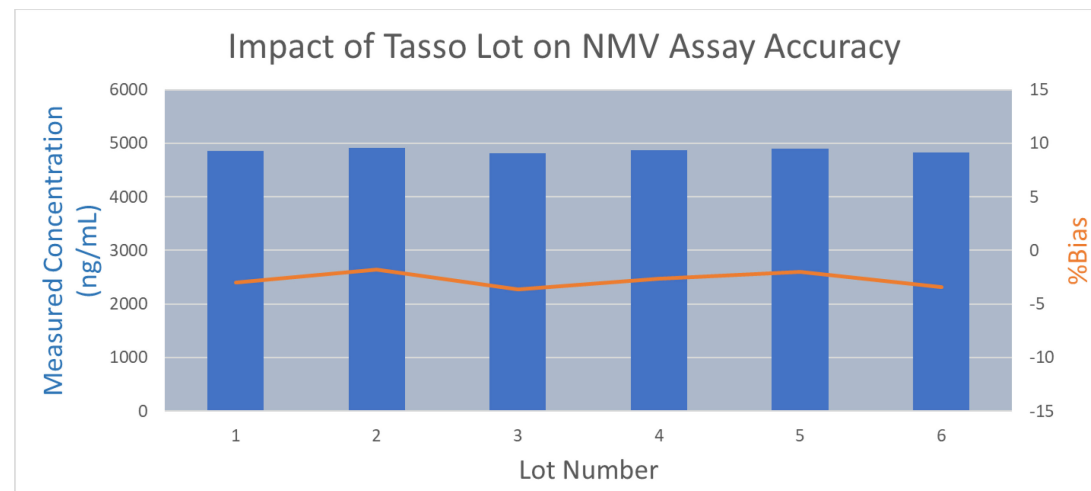
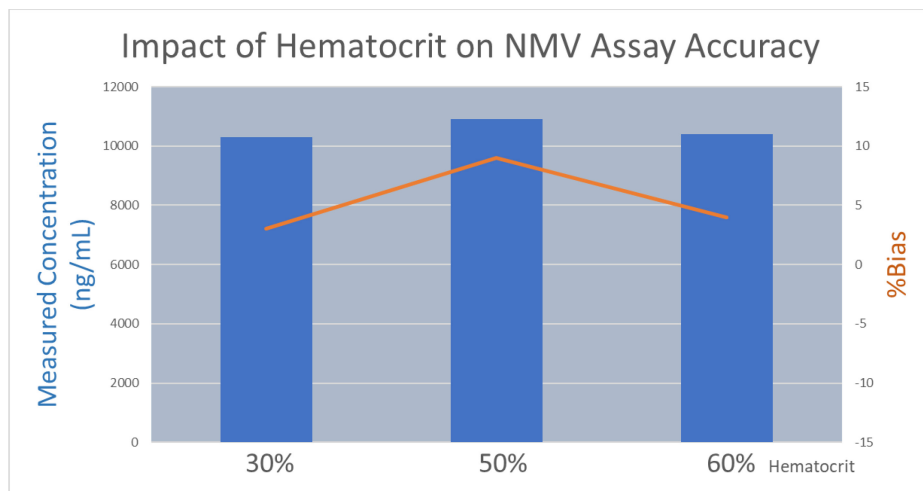
Dry Ice
or RT

Central Lab

Dry Ice
or RT

Analytical Lab

Paxlovid Assay: Hematocrit Levels and Lot-to-Lot Variations



Summary Bridging Results for NMV

- Dried blood concentrations measured from samples collected via Tasso M20 device were converted to equivalent plasma concentrations by applying B/P ratio.
- Tasso equivalent plasma concentrations and traditional venous plasma concentrations were paired up for concentration and exposure comparisons to establish assay concordance.

| Study | Number of Data Pairs | Concentration Comparison (% Passing)* | Bland-Altman Plot Bias (%) | Bland-Altman Plot SD of Bias | Correlation r | AUC within BE Criteria** | Cmax within BE Criteria** |
|----------|----------------------|---------------------------------------|----------------------------|------------------------------|---------------|--------------------------|---------------------------|
| C4671001 | 35 | 62.9% | -5.853 | 18.9 | 0.9557 | N/A | N/A |
| C4671012 | 138 | 79.7% | -7.947 | 17.75 | 0.8814 | 23/23 | 21/23 |
| C4671013 | 66 | 81.8% | 9.963 | 14.47 | 0.9539 | 10/10 | 8/10 |
| C4671023 | 132 | 87.1% | 6.190 | 12.37 | 0.9625 | 22/22 | 22/22 |
| C4671024 | 128 | 80.5% | 7.513 | 14.76 | 0.9430 | 22/22 | 18/22 |

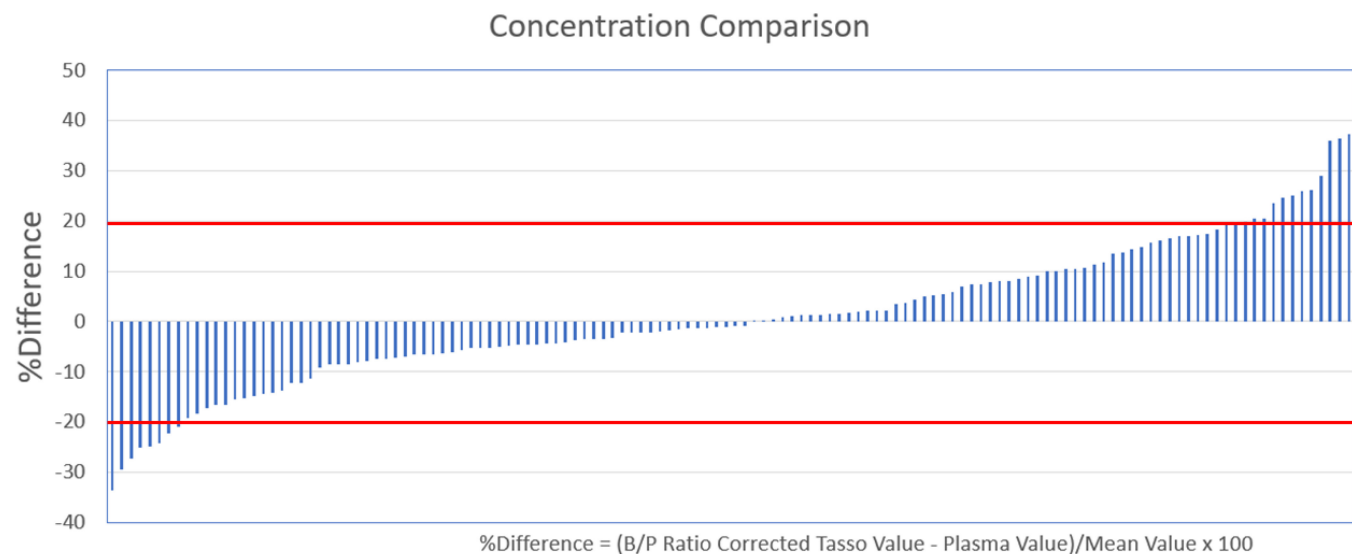
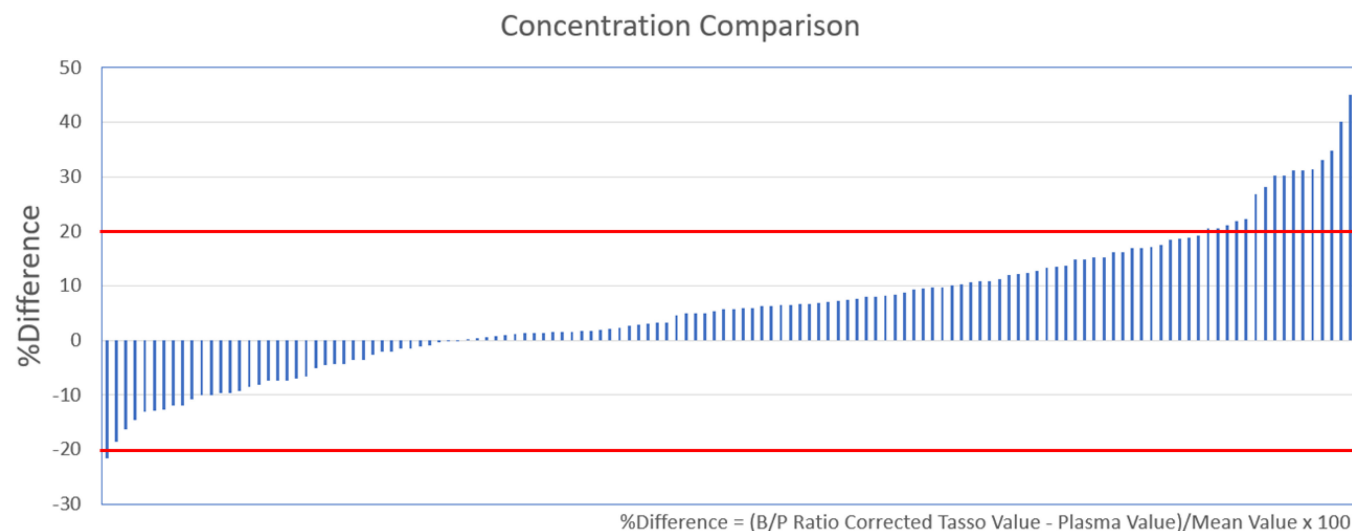
* Percent of data pairs where their difference is within +/- 20% of their mean

** Tasso/Plasma exposure ratio within 80-125%

Bridging Results In C4671023 – Waterfall Plot

NMV – %Diff from 115 out of 132 (87.1%) data pairs are within +/- 20% of their mean.

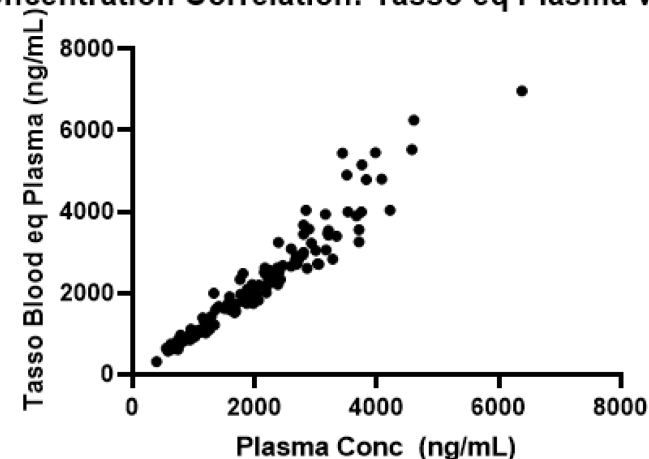
RTV – %Diff from 113 out of 132 (85.6%) data pairs are within +/- 20% of their mean.



Bridging Results In C4671023 – Correlation Analysis

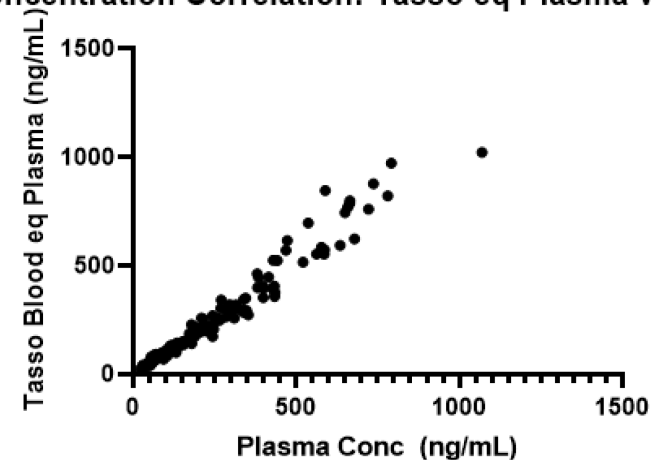
NMV
 $r = 0.9625$
 $P < 0.0001$

Concentration Correlation: Tasso eq Plasma vs Plasma



RTV
 $r = 0.9777$
 $P < 0.0001$

Concentration Correlation: Tasso eq Plasma vs Plasma

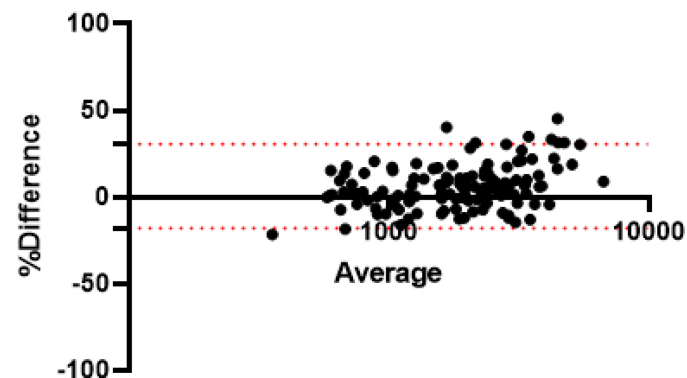


Bridging Results In C4671023 – Bland-Altman Plots

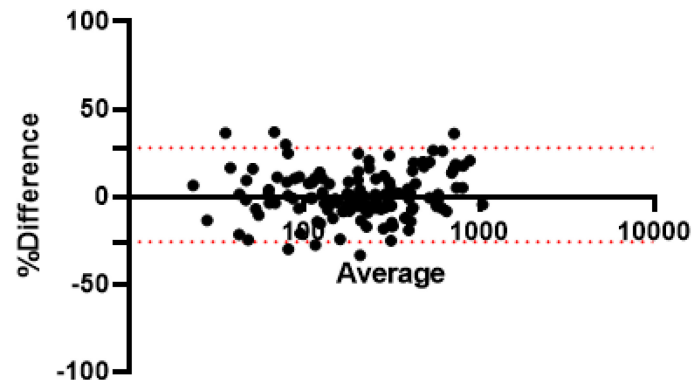
NMV
Bias = 6.190
SD of bias = 12.37

RTV
Bias = 1.002
SD of bias = 13.66

%Difference vs. average: Tasso Blood eq Plasma conc vs Plasma Conc



%Difference vs. average: Tasso Blood eq Plasma conc vs Plasma Conc

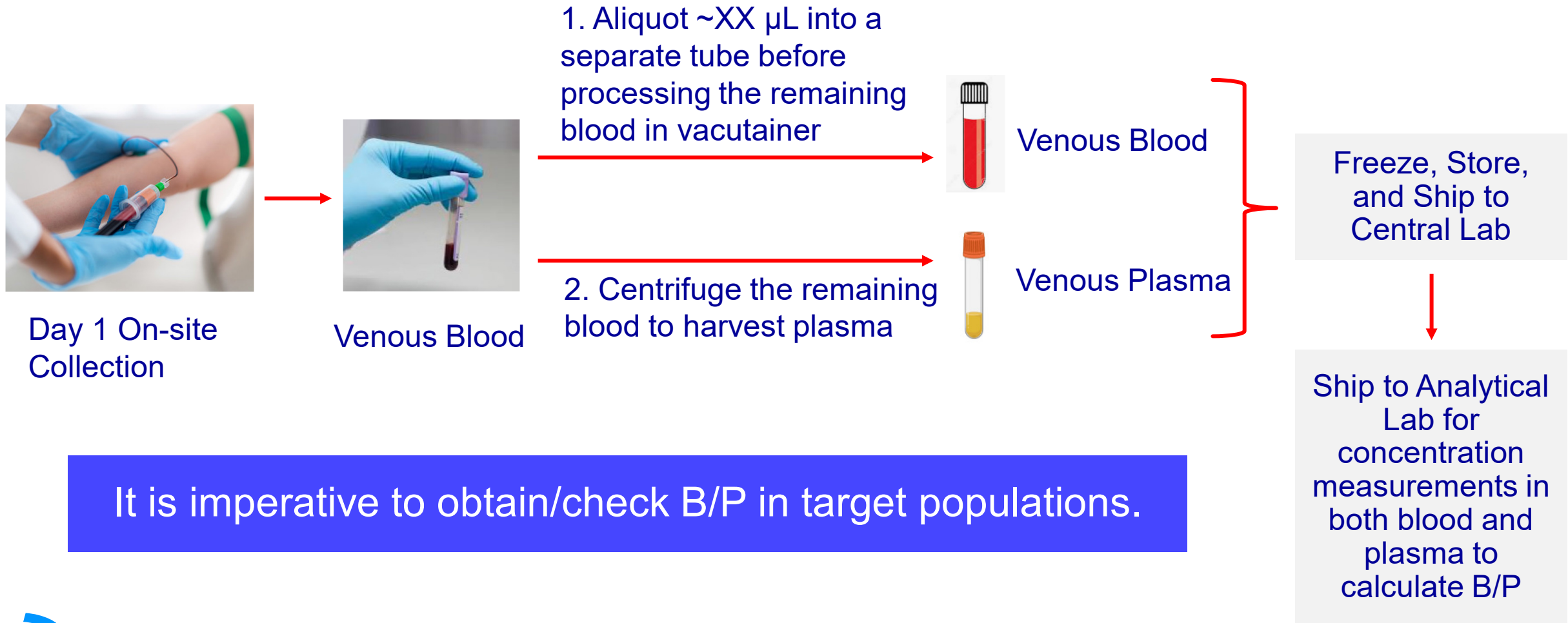


NMV Tasso M20 Assay Performance and Sample Quality

| Study | Study Title | Number of Samples Collected | Number of Results Not Reportable due to Sample Quality Issues | ISR Passing Rate | Run Passing Rate |
|----------|--|-----------------------------|---|------------------|------------------|
| C4671001 | A Phase 1 Single Ascending Dose and Multiple Ascending Dose Study of PF-07321332 in Healthy Adult Participants | 58 | 4 | 75.8% | 100% |
| C4671002 | A Phase 2/3 Efficacy and Safety Study of PF-07321332/Ritonavir in Nonhospitalized Low-Risk Adult Participants With COVID-19 | 31 | 2 (overfilled) | 50%* | 100% |
| C4671005 | A Phase 2/3 Efficacy and Safety Study of PF-07321332/Ritonavir in Nonhospitalized High Risk Adult Participants With COVID-19 | 102 | 0 | 82.6% | 100% |
| C4671006 | A Phase 2/3 Postexposure Prophylaxis Study of PF-07321332/Ritonavir in Adult Household Contacts of an Individual with Symptomatic COVID-19 | 293 | 11 (underfilled) | 90.5% | 54.5%** |
| C4671012 | A Phase 1 Study to Estimate the Effect of PF-07321332/Ritonavir and Ritonavir on the PK of Dabigatran in Healthy Participants | 138 | 0 | 100% | 100% |
| C4671013 | A Phase 1 Study to Estimate the Effect of PF-07321332/Ritonavir and Ritonavir on the PK of Midazolam in Healthy Participants | 66 | 0 | 95.2% | 100% |
| C4671023 | A Phase 1 Relative Bioavailability Study of Nirmatrelvir/Ritonavir 4 Different Fixed Dose Combination Tablets Relative to the Commercial Tablets in Healthy Participants | 132 | 0 | 100% | 100% |
| C4671024 | A Phase 1 Relative Bioavailability Study of PF-07321332/Ritonavir Oral Powder | 132 | 4 (overfilled) | 69.6% | 100% |

* Only 12 samples are eligible for ISR; ** MS detector saturation resulted in 2 run failures. Upon reinjection with reduced volume, the affected runs passed.

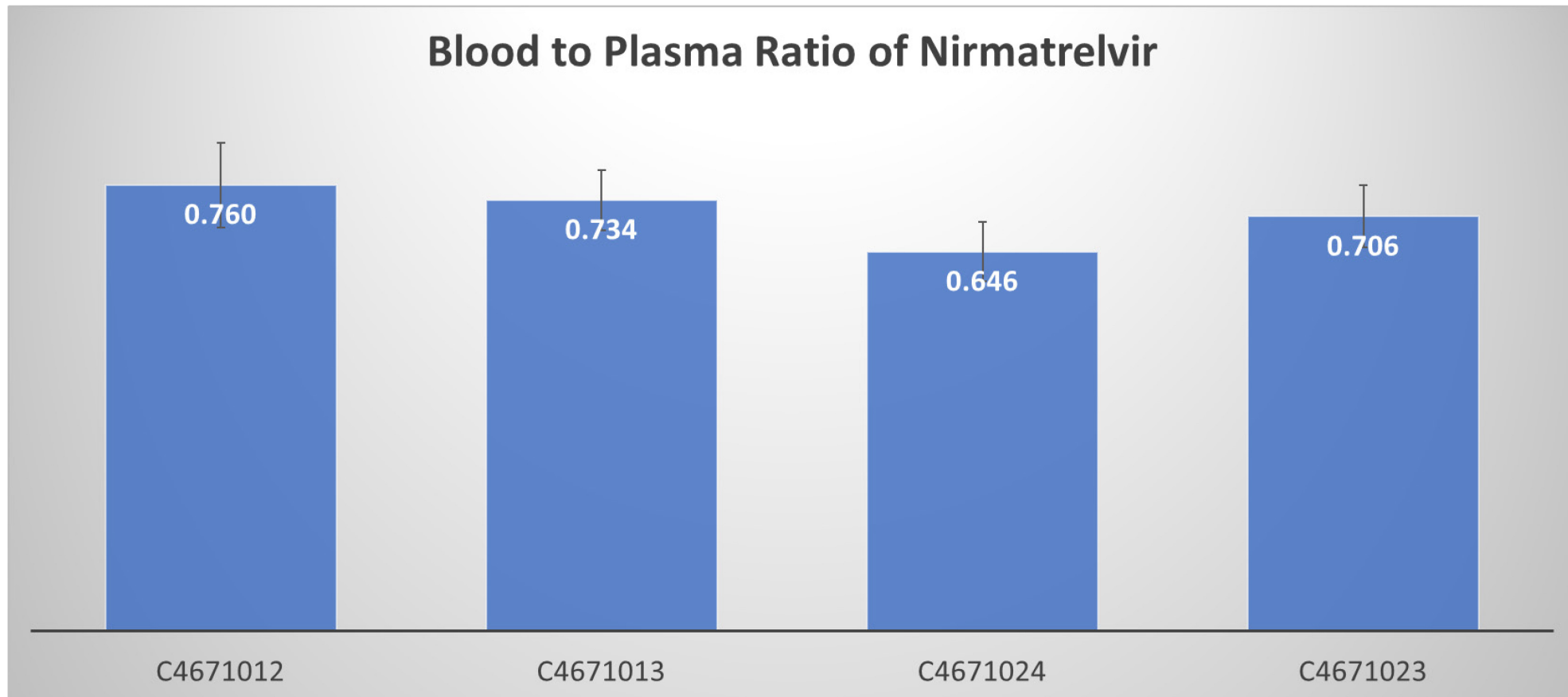
Blood to Plasma Ratio (B/P)



It is imperative to obtain/check B/P in target populations.

Consistent B/P Obtained for NMV

- B/P ratio samples were collected from different subjects at different time points. There is minimal subj-to-subj difference. There is no concentration/time point dependence.



Tasso M20 Implementation in Phase 2/3 Trials

- Device Approval Status

Tasso M20 is approved in US, EU, Switzerland and UK. For global studies in countries where M20 has not been approved, consider work with local RA team to obtain IUO (investigational use only) of Device as part of the CTA.

- Central Lab Workflow

Need to form a close partnership with central lab and device provider to map out the process

- 1) Supply sites with device, patient facing documents, label instructions
- 2) Coordinate courier pick-up service (from patient home) and timely identify missing samples

- Patient Facing Document and Other Assistance

- 1) Translation is needed for non-English speaking countries; device vendor can provide this.
- 2) Pictorial instructions and preferably video demos are provided
- 3) Help line is useful

- Site Training

- 1) Training sessions followed by Q&A were conducted for sites
- 2) Training slides and demo videos are made available to site staff
- 3) Site staff is encouraged to demo the process to consented patients on Day 1 when they are on-site

Beyond EUA: Continued Tasso M20 Implementation

Pfizer continued to implement Tasso M20 in Paxlovid program because patients demand and deserve “patient centric” experience on trial.

- Pediatric population – small blood volume, less invasive and almost painless collection given by caregiver



- Pregnant and lactation studies – minimize travel to site, flexible collection at the comfort of patient's home
- Severely renal impairment study – lessen patient's burden to travel

Conclusions

- Tools to collect PK samples outside clinical visit by patients, caregivers or home health service providers have enabled accurate quantitation of drugs in biological matrix.

Our journey with Paxlovid Program has demonstrated the current technology and infrastructure can be adapted to support at-home PK sampling to enrich PK dataset.

- Integration of digital health with patient centric sampling device is more likely to overcome some of the current challenges.
- At-home sampling will become the “new norm” and used broadly in clinical trials beyond just PK.





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Tasso, Inc.

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- Trish Kan Brown

Pfizer PCRU

- Kay Criswell
- Tracy M Orlinski



Questions?

AAPS Microsampling and Patient Centric subgroup (Part of AAPS Bioanalytical community)

Partnership with different organizations

- PCSIG
- NC3Rs
- European bioanalytical forum
- IQ consortium on patient centric sampling

Open Scientific discussion

- Foster awareness
- Share expertise across bioanalytical community
- Webinars

Team members includes

- Pharma
- CRO
- FDA
- EBF
- Consultants

Contact us

<https://community.aaps.org/communities/community-home>

Co-chairs

Shefali Patel- spatel31@its.jnj.com

Enaksha Wickremsinhe - enaksha@lilly.com

Patient Centric Sampling Interest Group



A not-for-profit organization that brings together a variety of interested parties who wish to develop & promote the use of patient centric blood sampling technologies for the advancement of human healthcare & well-being

- Clinical trial
 - Understand whether home vs in-clinic blood sampling has an impact on clinical trial recruitment & retention
- Diagnostics Working Group
 - Publications
 - Economic use cases
 - Summary of guidelines for bridging diagnostic test with PCS
 - Buyers guide
- Surveys
 - Clinician
 - Patient
- Education
 - Engaging key stakeholders at international conferences
 - PCSIG webinars
- Contact us
 - <https://www.pcsig.org/>
 - contact@pcsig.org

