

The Mitochondrial Medicine Company

Goal Attainment Scaling in Drug Development

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Topics



Introduction

Mitochondrial disorders

Use of goal attainment scaling

Use of endpoints in different stages of development

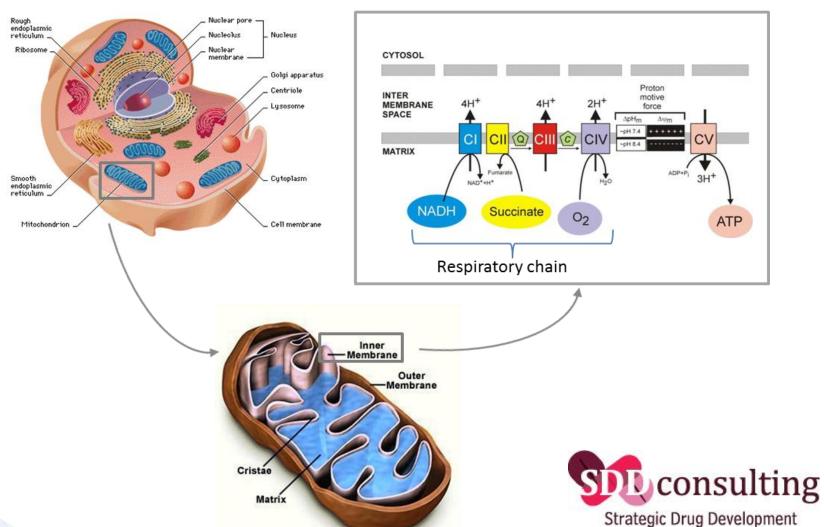




Mitochondrial disorders

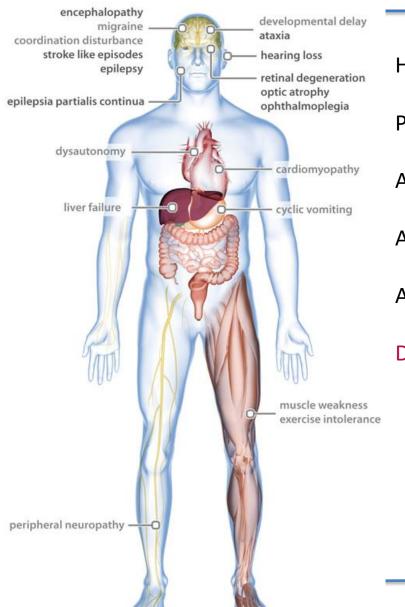


OXPHOS system



Mitochondrial disorders





Heterogeneous multisystem disorder

Prevalence 1 : 10.000

Any organ or tissue

Any mode of inheritance

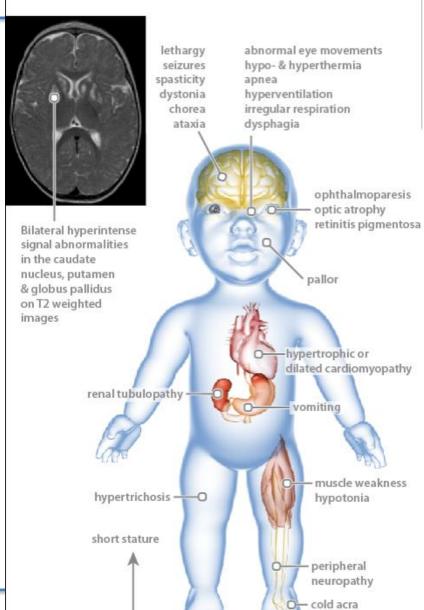
Any Age

Devastating, often early fatal



Mitochondrial disorders







Very heterogeneous



Leigh, MELAS, MIDD, NARP, Kearns-Sayre, Alpers-Huhenlocher, Pearson, Fatal infantyl Lactic Acidosis, mitochondrial myopathies, mitochondrial encephalopathies, ...

Clinical:

SIMILAR PHENOTYPE: DIFFERENT BIOCHEMISTRY SIMILAR PHENOTYPE: DIFFERENT GENE DEFECTS

SIMILAR PHENOTYPE: DIFFERENT DISEASE EXPRESSION

SIMILAR PHENOTYPE: DIFFERENT DISEASE COURSE

Biochemical

SIMILAR BIOCHEMISTRY: DIFFERENT PHENOTYPES SIMILAR BIOCHEMISTRY: DIFFERENT GENE DEFECTS

Genetic

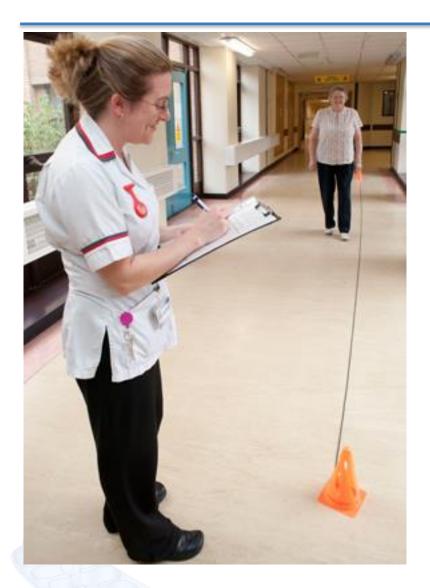
SIMILAR GENE DEFECT: DIFFERENT PHENOTYPE

SIMILAR GENE DEFECT: DIFFERENT BIOCHEMISTRY



Challenges: Endpoints in Clinical Trials





6 minutes walk test:

- regulatory reference
- Variable, slight motivation: 30 % difference
- Sensitive?
- Only for the ones that can walk!

Exercise testing

Muscle strength

Biochemical biomarkers

Disease scales (patient and investigator rated)

QoL scales

Cognitive testing

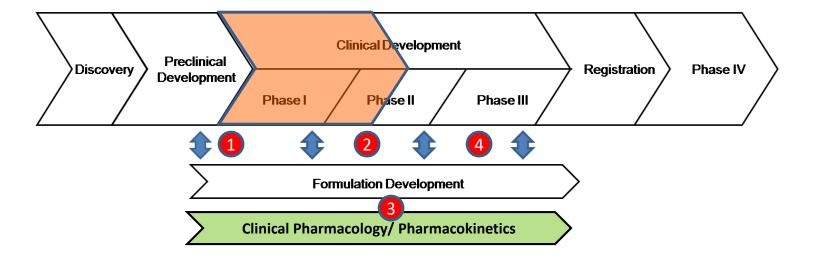
Specific organ functioning (eye, heart, etc)

....

Goal Attainment Scaling



Drug Development Overview: Exploratory Development

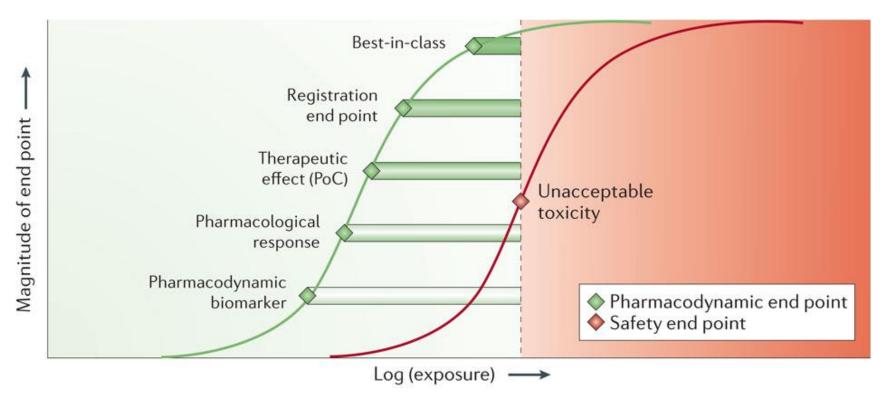


Orange: **Exploratory** Clinical Development;

From 'First in Man' (1) studies up to 'Proving the Concept' (2).

- 1. First-in-human study
- 2. Proof-of-concept study (POC)
- 3. Clinical pharmacology/PK studies (also regarded as "Phase I")
- 4. Pivotal Studies

Translational Considerations in exploratory development: Get the dose right!!



The therapeutic index in relation to the pharmacodynamic endpoint

Nature Reviews | Drug Discovery

Muller PY, Milton MN, Nat Rev Drug Discov. 2012 Oct;11(10):751-61

Needs in Exploratory Development:

Signal detection to justify large studies

Goal:

- Get the dose right
- Justification for large studies

Patient Population:

- Sensitive to treatment
- Measurable disease
- Homogeneous

Registration end point Therapeutic effect (PoC) Pharmacological response Pharmacodynamic biomarker Pharmacodynamic biomarker Log (exposure)

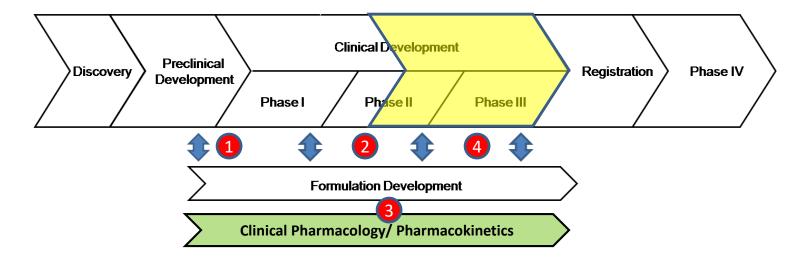
Nature Reviews | Drug Discovery

Endpoints:

Objectively Measurable endpoints
Sensitive endpoints
Quantifyable endpoints, both in positive and negative directions
Preferably wide range of response

Goal Attainment Scaling?? Maybe

Drug Development Overview: Confirmatory Development



Yellow: Confirmatory Development (4)

From 'Proving the concept' up to 'filing the dossier'.

Drug Development Overview: Confirmatory Development

Regulatory driven:

- 6 minutes walk test as anchor
- Other endpoints to be validated

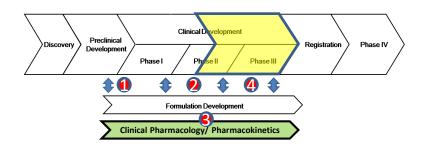
Endpoints:

- Clinically meaningfull
- Patient involvement
- QoL

Patient Population:

Representative for the intented population

Goal Attainment Scaling? Definately!



Yellow: Confirmatory Development (4)

From 'Proving the concept' up to 'filing the dossier'.

Questions?



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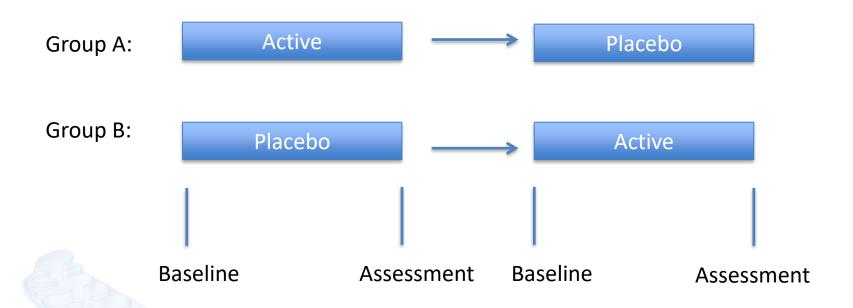




The KHENERGY study



An exploratory, double-blind, randomized, **placebo-controlled**, single-center, **two-way cross-over** study with KH176 in patients with the mitochondrial DNA tRNA^{Leu(UUR)} m.3243A>G mutation and clinical signs of mitochondrial disease



The KHENERGY study



Primary Objective

- To evaluate the effect of KH176 on gait (Gaitrite®) parameters: step-length and variability in step-time and step-width in patients with a m.3243A>G mutation

Secondary Objectives

- To explore the effect of KH176 on biomarkers of mitochondrial functioning in patients with an m.3243A>G mutation.
- To explore the effect of KH176 on functional clinical measures of mitochondrial disease in patients with an m.3243A>G mutation.
- To investigate the tolerability and safety of KH176 following 28 days of oral administration to patients with an m.3243A>G mutation.
- To investigate the multiple dose pharmacokinetics of KH176 following 28 days of oral administration in patients with an m.3243A>G mutation.



The KHENERGY study: study parameters



Safety parameters:

Change from baseline for vital signs (supine and standing blood pressure, and heart rate).

Change from baseline for ECG variables

Change from baseline for clinical laboratory variables

Treatment-emergent laboratory abnormalities up to Follow-up

Treatment-emergent ECG abnormalities up to Follow-up

Treatment-emergent abnormalities in cardiac monitoring (bedsite/Holter registration)

Treatment-emergent AEs up to Follow-up

Treatment-emergent AEs leading to discontinuation of study drug

Treatment-emergent SAEs up to 28 days after last study drug intake



The KHENERGY study: study parameters



Pharmacokinetics:

Blood/urine collection

Plasma concentrations to derive: C_{max} , t_{max} , and AUCtau, AUC $_{0-t}$ and time to reach steady state

Pharmacodynamics:

Blood/urine collection:

- bioanalysis of Glutathione (GSH/GSSG)
- bioanalysis of FGF21, GDF15 and PRDX1
- a whole metabolome analysis
- Oxidative stress platform analysis

Note:

- exact sampling time is mandatory
- Register: time of dosing (precisely) and sampling time (precisely)
- Urine volumes



The KHENERGY study: study parameters



Efficacy parameters:

Change from baseline (defined as the value measured at pre-dose Day -2 and -1) in:

Gait parameters: cadence, walking speed, right and left step and stride lengths, and times

NMDAS Score

Spirometric parameters: FVC, FEV1, PEF, MIP, MEP

30-Seconds sit – stand test: Number of standings

Handgrip dynamometry: Maximum grip strength

6 Minutes Chewing test: VAS pain, VAS tiredness, Rate of Mastication, quality of movement

6 Minutes Walk Test (part of the gait evaluation protocol): Distance and Distance/minute

RAND-SF36 score

Hospital Anxiety and Depression Scale (HAD), supplemented with a Beck Depression Index (BDI)

Checklist Individual Strenght (CIS)

Test of Attentional Performance (TAP): Alertness and Mental Flexibility

In addition:

an assessment of a Goal Attainment Scale (GAS)

a diary of Diet and Gastro-Intestinal Functioning

and a continuous registration of motor activity and sleeping pattern



Treatment A and B

Assessment			Treatment A and B							
	Screening	Training	Baseline (Day-2/-1)	Week 1 (Day 1-3)	Week 1 (Day 4-6)	Week 2	Week 3	Week 4 (up to day 26)	Week 4 Day 27/28	Follow
KH176 BID dosing				х	х	х	x	х	х	
Hospitalization (5)			x	x					х	
Ambulant visits (2)	х					х	х	х		x
Adverse events recording(6)	x	х	х	х	х	х	х	x	x	x
ECG recording(7)			х	х		х	х		х	х
Cardiac evaluation,	x									х
Safety evaluation block(1)			х	х		х	х	х		х
Holter registration			Continuous(8)							
Sampling for biomarker			х						х	

Hospitalization (5)			Х	Х					Х	
Ambulant visits (2)	x					х	х	х		x
Adverse events recording(6)	x	х	х	х	x	х	х	x	х	x
ECG recording(7)			х	х		х	х		х	х
Cardiac evaluation,	х									x
Safety evaluation block(1)			х	х		х	х	х		x
Holter registration			Continuous(8)							
Sampling for biomarker assessments (4)			х						х	
Questionnaires (home based)			х						х	
Clinical Evaluation		х	х						х	
Nutritional/ BMI/bio- impedance	x		x			х			x	x
Diary (diet)			х	х	х	х	х	х	х	
Accelerometer				x	x	х	х	x	x	
PK sampling (3)				x		х	х	х	х	