

# The Comet Assay

## Tails of the (Un)expected

Use of the in vivo comet assay in pharmaceutical development

Bas-jan van der Leede

Janssen R&D – Johnson & Johnson Pharmaceutical Companies

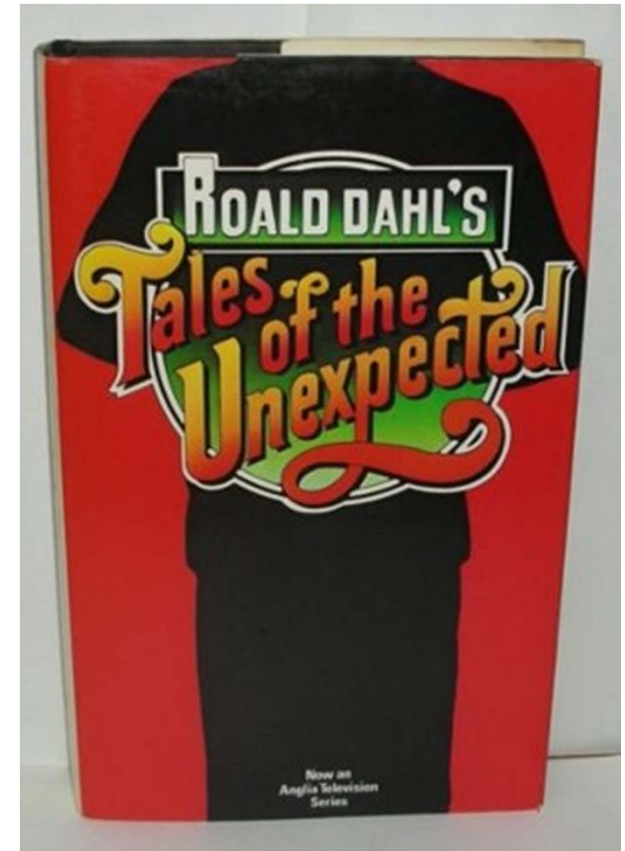
Discovery Sciences – Genetic Toxicology



ICAW 2015 – BEMS satellite meeting – 1 sep 2015

# Content

- Pharmaceutical development
- Guidelines
- Janssen R&D Genotox strategy
- Study designs aspects
- JaCVAM validation
- EFPIA survey
- Conclusions





# Company info

*Johnson & Johnson*

Pharmaceuticals

Consumer Health

Medical Devices & Diagnostics

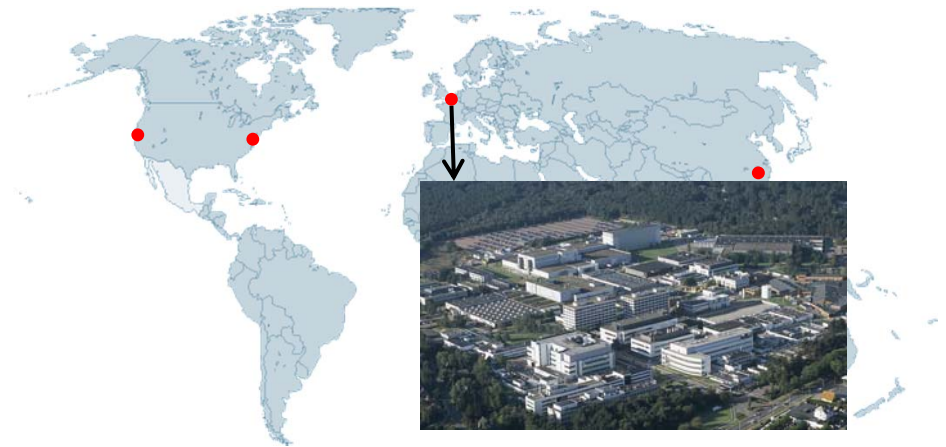


## Discovery Sciences

Small molecules

Large molecules

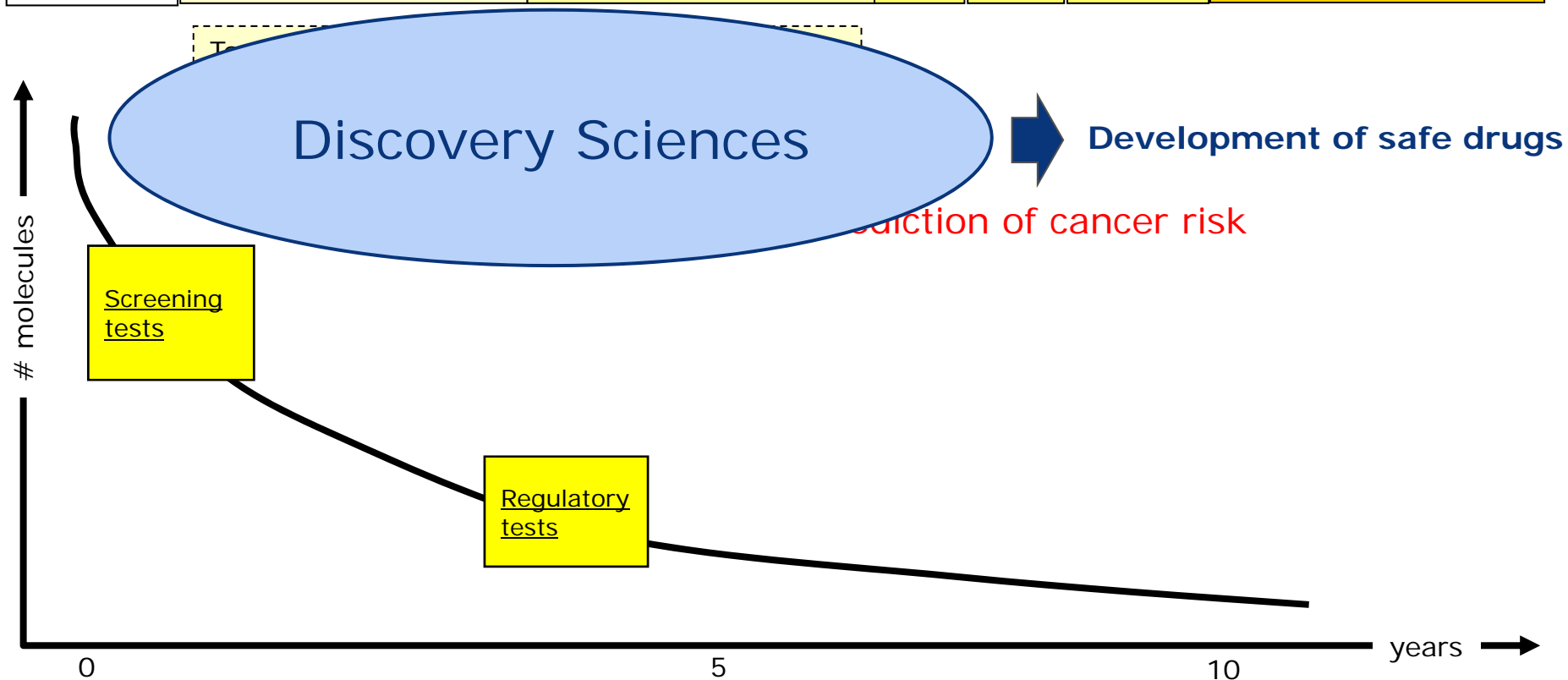
Vaccines



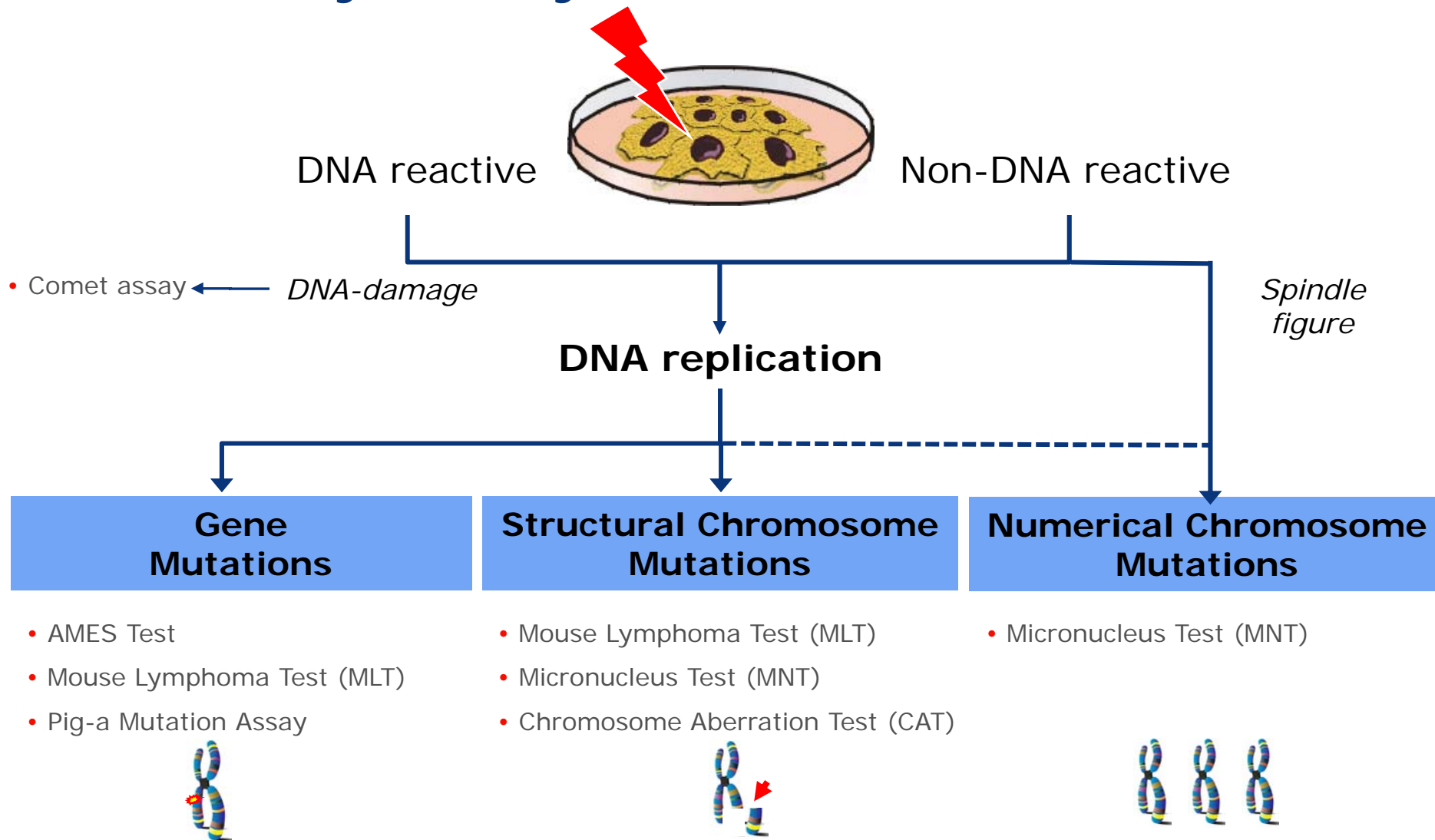
*Genetic Toxicology  
Beerse (BELGIUM)*

# Development of a new drug ...

Research	Preclinical Development		Clinical			Registration/Market
	Early	Late	I	II	III	



# Genotoxicity Test Systems

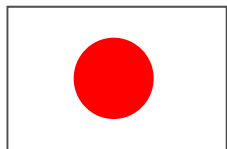


# The International Conference on Harmonisation

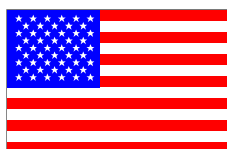
... of Technical Requirements for the Registration of **Pharmaceuticals** for Human Use (ICH)



European Union (**EU**)



US Food and Drug Administration (**FDA**)

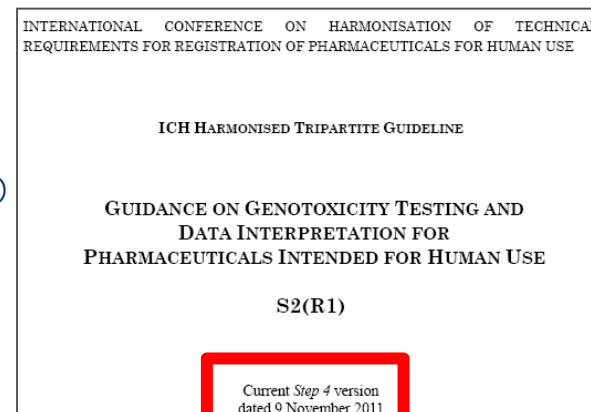


Japanese Ministry of Health, Labour and Welfare (**MHLW**)

European Federation of Pharmaceutical Industries and Associations (**EFPIA**)

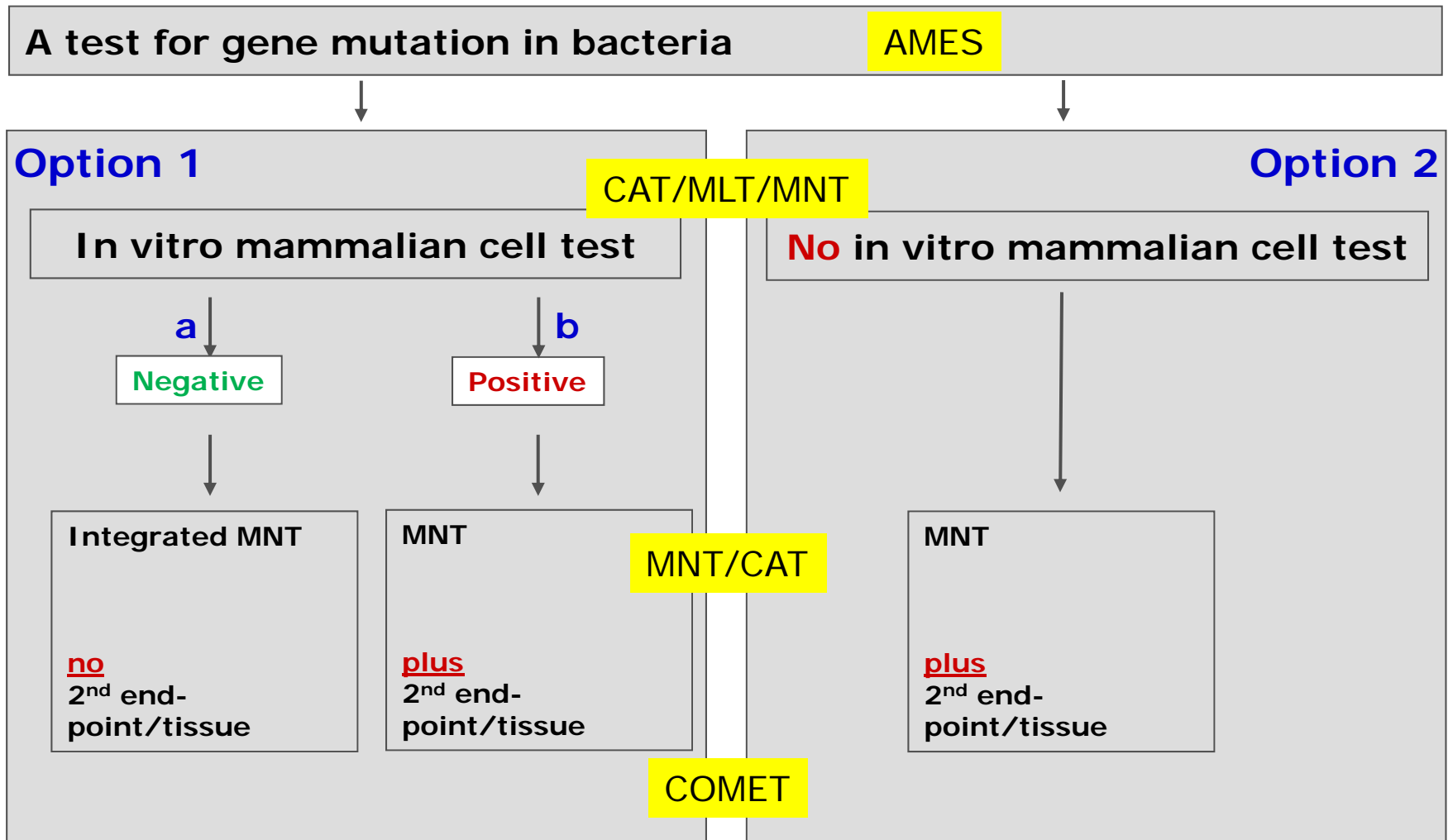
Japan Pharmaceutical Manufacturers Association (**JPMA**)

Pharmaceutical Research and Manufacturers of America (**PhRMA**)



- ❑ Strategies for avoiding in vitro false-positives (In vitro mammalian assay)
  - top concentration: 1 mM (or 500 µg/ml)
  - the maximum concentration should be the lowest concentration at which minimal precipitate is visible in cultures, even if toxicity occurs above the solubility limit (*Aardema et al., 2011*)
- ❑ In vitro MN test as 3rd option for mammalian cell tests
- ❑ Integration of in vivo MN test in repeat-dose toxicity studies
- ❑ Use of rat blood for micronucleus test (flow cytometric analysis of rat peripheral blood reticulocytes)
- ❑ Confirmatory testing in the case of clearly negative or positive in vitro test results is not usually warranted.

# The revised ICH S2 guideline (2011)



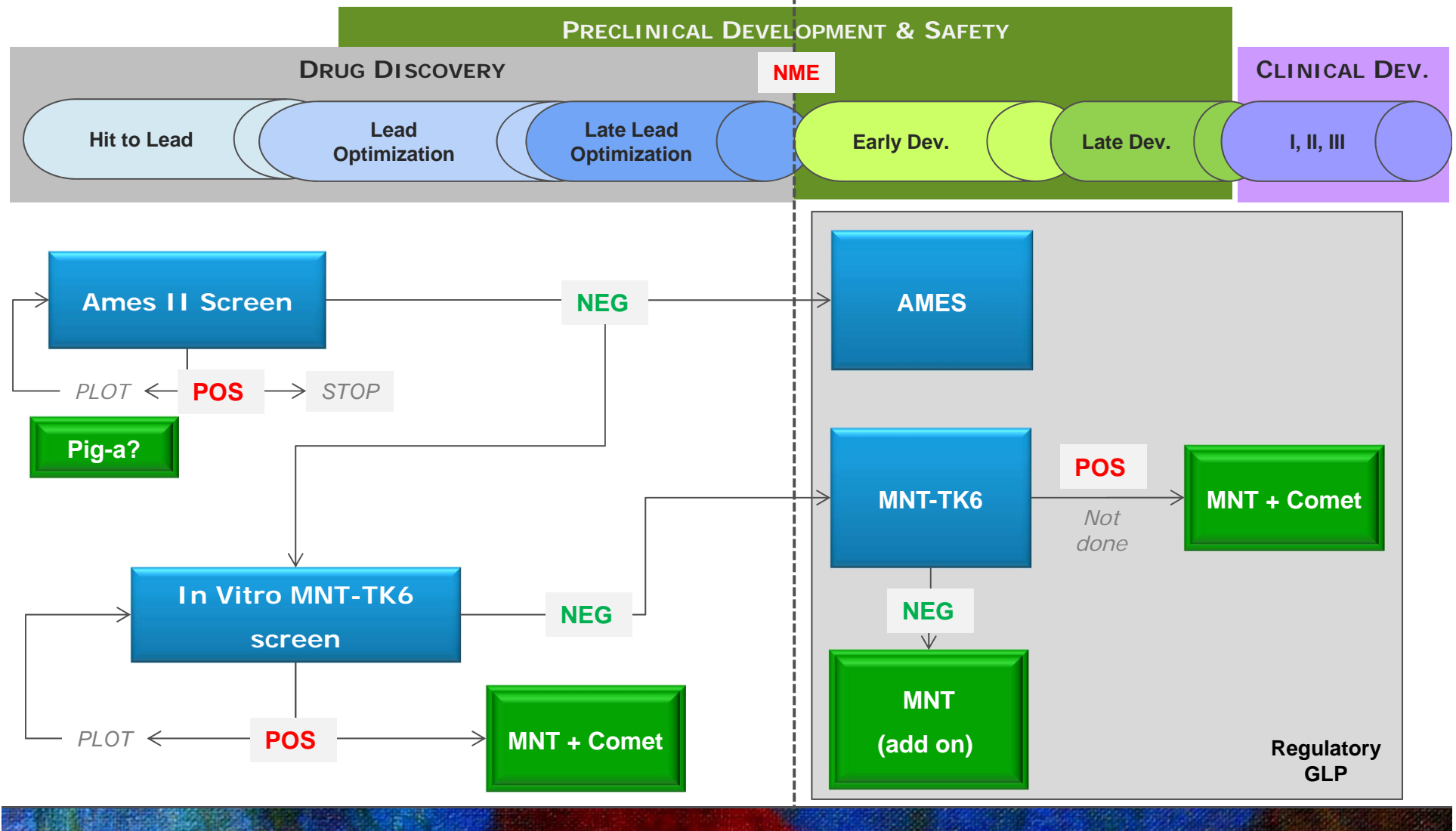
# OECD Test Guidelines

Organisation for Economic Co-operation and Development

- Bacterial Reverse Mutation (Ames) Test: OECD **471**
- In vitro Mammalian Chromosome Aberration Test: OECD **473**
- In vitro Mammalian Cell Gene Mutation Test (e.g. Mouse Lymphoma Test): OECD **476**
- In vitro Mammalian Cell Micronucleus Test: OECD **487**
- In vivo Mammalian Erythrocyte Micronucleus Test: OECD **474**
- In vivo Mammalian Bone Marrow Chromosome Aberration Test: OECD **475**
- In vivo Mammalian Alkaline Comet Assay: OECD **489**



# Genotoxicity testing strategy – Janssen R&D

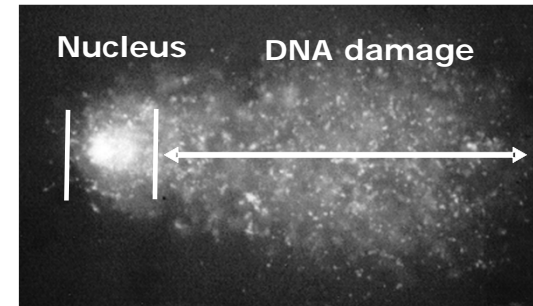


# Genotoxicity testing strategy – Janssen R&D

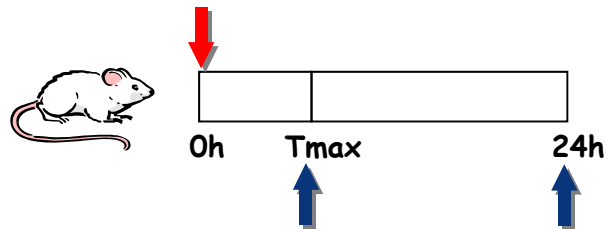
- Regulatory GLP studies outsourced
  - High investment to stay in compliance with GLP regulations versus the no. of studies conducted
- Screening studies conducted in-house
  - Short cycling-times
  - Testing multiple cpds in parallel in medium-throughput assays
  - Limited cpd shipment logistics
  - No method transfer (e.g. formulation, bioanalysis)

# Study Design Aspects - In Vivo Comet Assay

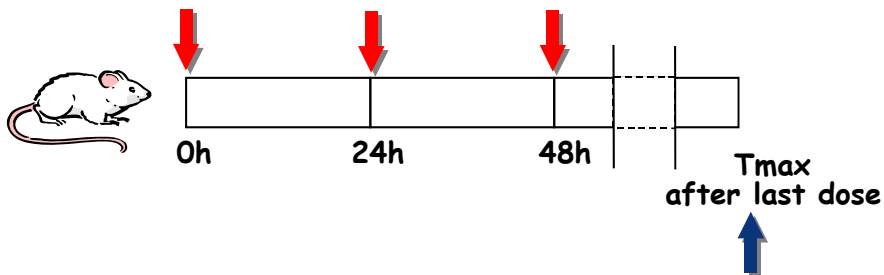
Detection of compounds inducing DNA damage in cells of various tissues by means of alkaline comet assay



## Single dose/Multiple sampling



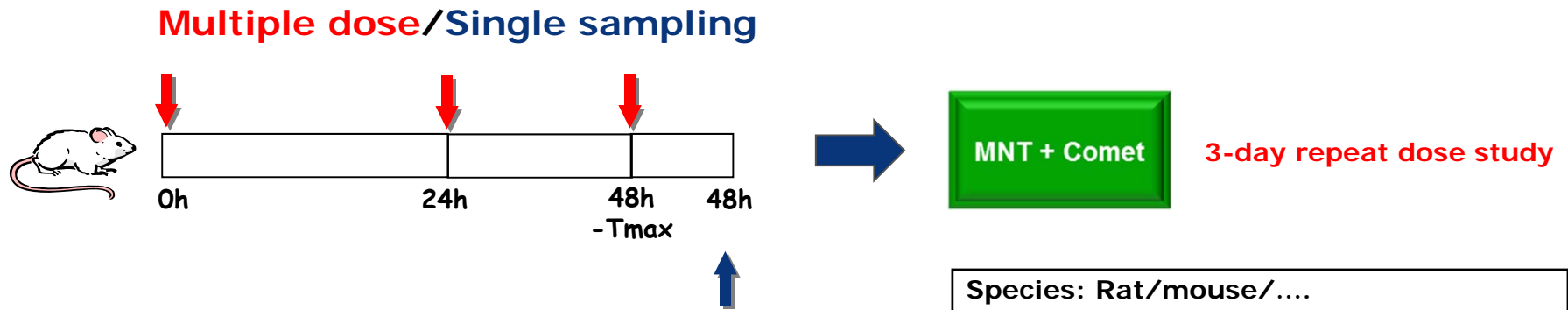
## Multiple dose/Single sampling



Species: Rat/mouse/....  
 Route: Oral/intravenous/....  
 Samples: Liver/duodenum/....  
 Dose groups: Vehicle Control  
 Low  
 Medium  
 High  
 Positive Control



# Study Design Aspects - In Vivo Comet Assay



- Formulation selection
- Top dose selection
- Tmax selection
- Tissue selection
- Single dose versus repeat dose

Species: Rat/mouse/....  
Route: Oral/intravenous/....  
Samples: Liver/duodenum/....  
Dose groups: Vehicle Control  
Low  
Medium  
High  
Positive Control

**Screening to predict  
Regulatory**

# Formulation selection

- Formulation development is ongoing in the drug discovery phase
- Pharmacokinetic studies are available in support of formulation development

Selection of the discovery formulation close to regulatory formulation can be crucial

## PK studies

Formulation	Dose (mg/kg)	Cmax (ng/mL)	AUC (ng.h/mL)
Discovery	200 SD	2670	31200
Regulatory	200 SD	7090	137000

3 to 4-fold higher exposure

## Comet assay

Formulation	Top dose (mg/kg)	Cmax (ng/mL)	Comet Response
Discovery	2000 3-day RD	5133	Negative
Regulatory	650 3-day RD	18700	Weak Positive

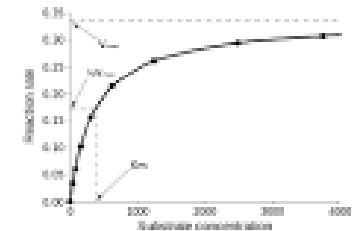
3 to 4-fold higher exposure



# Top dose selection

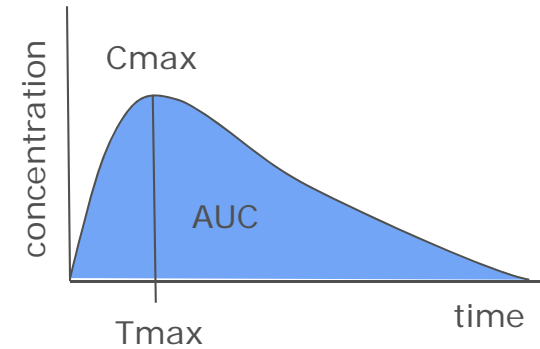
OECD TG 489

- Maximum tolerated dose
  - Toxicity studies (tolerability studies; SD and RD data)
- Maximum feasible dose
  - Formulation development data
- Maximum (limit) dose
  - Toxicity studies (non toxic); 2000 mg/kg
  - Exposure data (saturation)

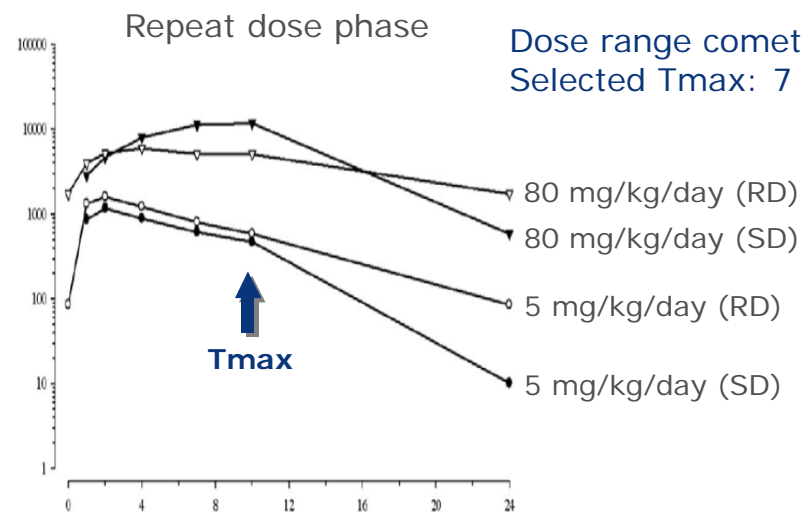
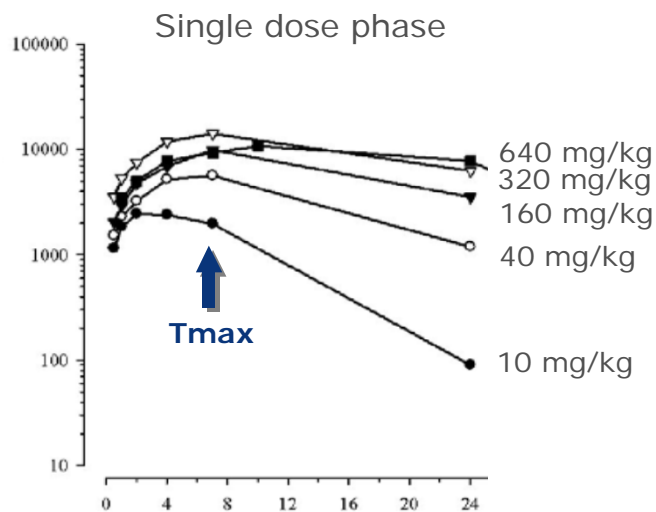


# Tmax selection

- Concentration/time curves
  - Pharmacokinetic studies
  - Toxicity studies



## Exposure data in relevant dose range



Dose range comet assay: 40-320 mg/kg/day  
Selected Tmax: 7 hours

# Tissue selection

- PK/TK data
  - Absorption, clearance and metabolism data
  - Tissue distribution data are very limited in the drug discovery phase
  - PBPK modeling and simulation
- In vitro mammalian assay positive in absence or presence of metabolic activation system

Liver selected as standard tissue, occasionally additional tissue included in comet assay

Liver



Stomach  
Duodenum



Colon



Kidney



# SD versus RD

- Repeat dose
  - Standard design (comet assay; combined MNT/comet assay)
- Single dose
  - Bone marrow toxicity (combined MNT/comet assay)
  - Tissue toxicity (comet assay)

# SD versus RD

## Aflatoxin B1

- 3-day repeat dose comet assay in male rats
- Oral gavage: 0.25, 0.5, 1 mg/kg/day
- 1 mg/kg/day was MTD
- Liver sampling:  
3 h after final administration

Increase in %TI  
concomitant with  
tissue toxicity:  
**Inconclusive**

Treatment	N	% Tail intensity		Histopathology
		Mean	± SD	
<b>Vehicle control</b> 0 mg/kg/day	5	0.31	± 0.15	
<b>Aflatoxin B1</b> 0.25 mg/kg/day	5	0.46	± 0.32	Single cell necrosis (grade 1) Acute inflammation (grade 1)
<b>Aflatoxin B1</b> 0.5 mg/kg/day	5	0.95	± 0.56	* Single cell necrosis (grade 1-3) Acute inflammation (grade 2-3)
<b>Aflatoxin B1</b> 1 mg/kg/day	5	3.30	± 1.42	** Single cell necrosis (grade 2-4) Acute inflammation (grade 2-4) Hemorrhage (grade 4)
<b>Positive control</b> 200 mg/kg/day EMS	3	22.93	± 2.47	°

Significance versus vehicle control by one-sided t-test: ° p < 0.0001

Significance versus vehicle control by one-sided Dunnett's test: \* p < 0.05, \*\* p < 0.0001

Significance by one-sided Jonckheere-Terpstra Trend test: † p < 0.0001



# SD versus RD

## Aflatoxin B1

- Single dose comet assay in male rats
- Oral gavage: 0.5, 1, 2, 4 mg/kg
- 4 mg/kg was MTD
- Liver sampling:  
3 and 24 h after administration

Increase in %TI  
not concomitant  
with tissue toxicity  
at 0.5 and 1 mg/kg:

**Positive**

Treatment	N	% Tail intensity		Histopathology
		Mean ± SD		
Vehicle control 0 mg/kg	5	0.37 ± 0.13	<sup>T</sup>	
Aflatoxin B1 0.5 mg/kg	5	0.63 ± 0.23	**	
Aflatoxin B1 1 mg/kg	5	4.68 ± 2.31	***	
Aflatoxin B1 2 mg/kg	5	10.94 ± 9.53	***	Single cell necrosis (grade 1) Eosinophilic dark hepatocyte (grade 1)
Aflatoxin B1 4 mg/kg	5	17.64 ± 5.15	***	Single cell necrosis (grade 1) Eosinophilic dark hepatocyte (grade 1)
Positive control 200 mg/kg EMS	3	37.47 ± 8.53	°	

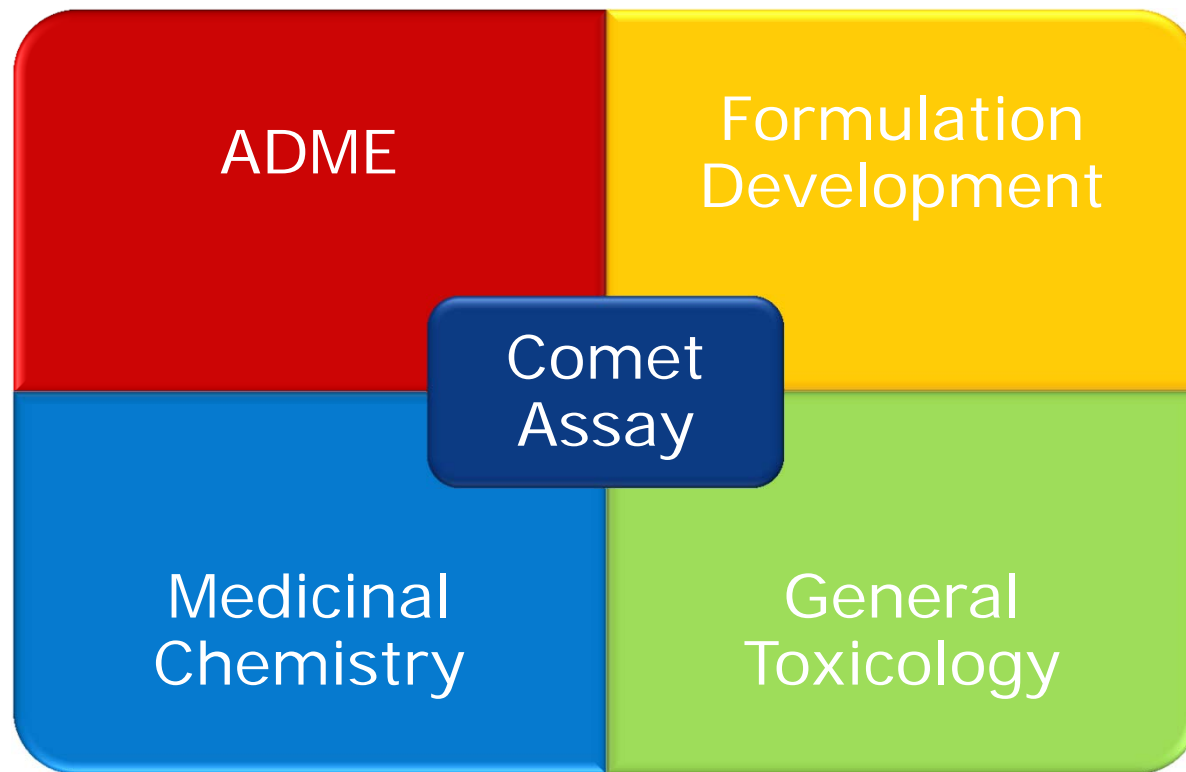
Significance versus vehicle control by one-sided t-test: ° p < 0.0001

Significance versus vehicle control by one-sided Dunnett's test: \* p < 0.05, \*\* p < 0.001, \*\*\* p < 0.0001

Significance by one-sided Jonckheere-Terpstra Trend test: <sup>T</sup> p < 0.0001

# Planning and communication

Many disciplines involved before study conduct



# JaCVAM Validation Trial

- Validation trial with standardized protocol.
  - Pre-validation phase to optimize protocol
  - Assay reproducibility was confirmed among 13 laboratories (including Janssen R&D)
- 40 coded compounds were evaluated.
  - Janssen R&D tested 3 compounds
- The assay is concluded to be highly capable of identifying genotoxic compounds.
- The OECD TG is based on the standardized protocol of the trial.



Editorial

The JaCVAM-organized international validation study of the *in vivo* rodent alkaline comet assay



# EFPIA Survey - Introduction

- Survey suggested by the EMA Safety Working Party and conducted by the EFPIA Preclinical Development Committee with the help of comet assay experts from different pharmaceutical companies.
- Investigation of the experience with the in vivo comet assay for regulatory purpose among European pharmaceutical companies with special attention to potential difficulties in interpretation of study data.
- The participating companies reported a total of 147 studies (conducted in-house or outsourced).

# EFPIA Survey - Conclusions

- Final conclusion on the response in the in vivo comet assay was available for 136 pharmaceutical compounds.
- Occurrence of difficulties with interpretation of comet assay results is low.
  - Equivocal response (1 study); inconclusive response (3 studies).
  - With additional information (e.g. repeat assay, circumstantial information) a final conclusion could most probably have been drawn.
- The number of studies with a positive response is relatively low.
  - 14 studies (10%)
  - Positive comet assay results are not related to cytotoxic effects of the compound in the tissue examined.



# EFPIA Survey - Conclusions

- The comet assay appears not over-sensitive.
  - Only 10% of the studies conducted as follow-up of a positive in vitro mammalian cell assay showed positive comet assay results.
  - No positive comet assay results with compounds having no genotoxic properties.
- The comet assay is considered an appropriate second in vivo genotoxicity assay as outlined in the ICH S2(R1) guidance.
  - 10 out of 12 compounds showed positive comet assay results are negative in the in vivo micronucleus assay.
- Regulatory acceptance of the ICH S2(R1) guidance to mitigate a positive in vitro mammalian cell assay with 2 negative in vivo assays (i.e. micronucleus and comet assay). All 46 cases accepted.

# Conclusions

- The predictivity of a screening in vivo comet assay is highly dependent on the information available in the drug discovery phase.
- Participation in the JaCVAM validation trial greatly contributed to Janssen R&D experience with the in vivo comet assay.
- The EFPIA survey results demonstrate the robustness of the in vivo comet assay and regulatory acceptance of the current ICH S2 guidance.



Thank you for your attention

Questions?