



U.S. Food and Drug Administration

Notice: Archived Document

The content in this document is provided on the FDA's website for reference purposes only. It was current when produced, but is no longer maintained and may be outdated.

Minimizing Procoagulant Impurities in IGV Products Baxter's Approach

**Risk Mitigation Strategies to Address Procoagulant Activity
in Immune Globulin Products**

May 17-18, 2011

Gaithersburg, Maryland

Peter L. Turecek, PhD

Senior Director

Global Preclinical R&D

Baxter BioScience, Vienna, Austria

Agenda

- Background
- Tests established at Baxter to detect procoagulant impurities in IgG products
 - Product comparison
- In vivo Thrombogenicity of FXIa
- Removal of FXI(a) during commercial Cohn fractionation
 - Pharmacovigilance (PV)/ Safety Assessment
 - Conclusions

Background

- “On August 20, 2010, in the interest of patient safety, Octapharma USA Inc. initiated a voluntary market withdrawal of selected lots of Octagam® [Immune Globulin Intravenous (human)] 5% Liquid Preparation]. This was performed as a result of an increased number of reported thromboembolic events, some of which were serious”¹.
- Globally, Octapharma received 30 thromboembolic event reports (spontaneous reporting) during Q3, 2010 compared to 18 throughout 2009².
- “This increase is thought to be related to problems with the medicine’s manufacturing process”³.
- Other products followed
 - The Omrix IgG product Omr-IgG-am was voluntarily recalled on Nov 7, 2011⁴
 - Warning letter issued for Vivaglobin, CSL Behring, an s.c. immune globulin on March 11, 2011⁵
- Coagulation factors of the contact activation pathway were considered to play a a major role as procoagulant impurities of IgG products.
 - Focus on Factor XIa
- **Although Baxter has seen no similar signal, Baxter proactively initiated a preliminary assessment to evaluate the thromboembolic potential of IgG IV products.**

Accessed May 6, 2011

1. <http://www.fda.gov/BiologicsBloodVaccines/SafetyAvailability/Recalls/ucm227133.htm>
2. <http://www.afssaps.fr/Infos-de-securite/Autres-mesures-de-securite/Octagam-50-mg-ml-solution-pour-perfusion-Octapharma-France-Mise-en-quarantaine-de-tous-les-lots>
3. http://www.ema.europa.eu/ema/index.jsp?curl=pages/medicines/human/public_health_alerts/2010/09/human_pha_detail_000021.jsp&murl=menus/medicines/medicines.jsp&mid&jsearch=true
4. <http://www.omrix.com/IVIg%20HepB%20Combined%20Voluntary%20Recall%20Dr%20Doctor%20FINAL.pdf>
5. <http://www.cslbehring-us.com/docs/499/498/Dear%20Dr%20Letter%20Vivaglobin%2011Mar11.pdf>

Test Methods established at Baxter

Tests Established at Baxter to Detect Procoagulant Impurities in IgG Products

- NAPTT - Non-activated Partial Thromboplastin Time
 - In normal and FXI deficient plasma
- Prekallikrein activator assay (PKA)
- Protein and protease profiling
 - ELISA method with specific antibodies (incl. FXI ELISA)
 - Proteolytical activity using different chromogenic and fluorogenic substrates
- Thrombin Generation Assay - TGA
 - Variation of the Calibrated Automated Thrombograph (CAT)
- FXIa activity assay
 - Details see next slide

	FIX based assay
FXIa	HFXIa 1111a (Enzyme Research Laboratories)
Method	Indirect FXIa incubated with FIX, FVIII, FX, PL, Ca →the generated FXa, which depends on the FXIa concentration is measured by a FXa-specific chromogenic substrate
Substrate	FIX amount of FXa cleaved by the activated FIX is measured by FXa-1 + αNAPAP-chromogenic substrate
Measurement	Endpoint (405 nm)
Reader	Benchmark, BioRad
Control	* Control 1: for FIXa (an d/or FXa)-like activity ** Control 2: for FXa-li ke activity

* Highest sample concentration tested without addition of FIX to exclude FIXa (and/or FXa)-like activities

** Highest sample concentration tested with buffer only to verify the absence of any FXa like-activity in the samples

Most Relevant *in vitro* Methods for Assessment of the Thromboembolic Potential of IGIV Products

- Global assays
 - A non-activated partial thromboplastin time (NAPTT) assay with factor XI-deficient plasma in the past had been used routinely in Baxter QC to assess thrombogenic potential of IGIV products*
 - Thrombin generation assays are established and routinely used in Baxter R&D for research, preclinical/clinical studies and for product support (incl. regulatory submissions; e.g. FEIBA, ADVATE)
- Specific assay
 - “...we suggest that factor XIa present in some IGIV preparations could contribute to the *in vivo* risk of thrombosis after IGIV therapy.”
(Wolberg et al., Am J Hematol 2000; 65(1):30-34)
FXIa can be determined with a highly sensitive activity assay by Baxter
- ✓ **Distributed IGIV products have been tested with the above three methods and the results have been compared**

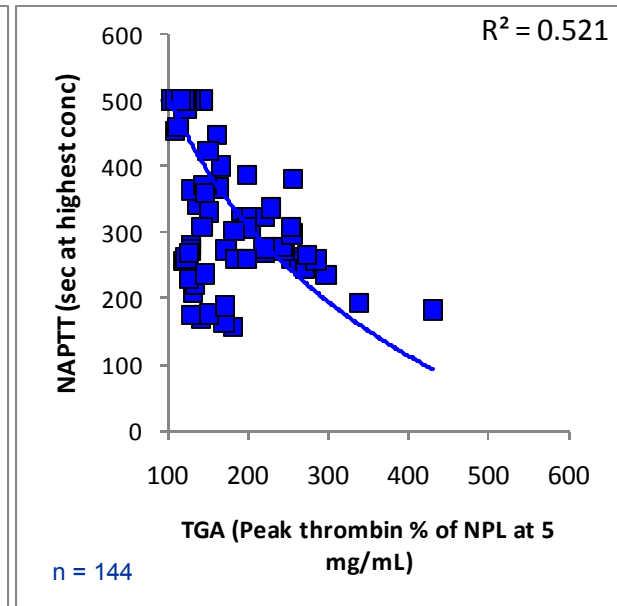
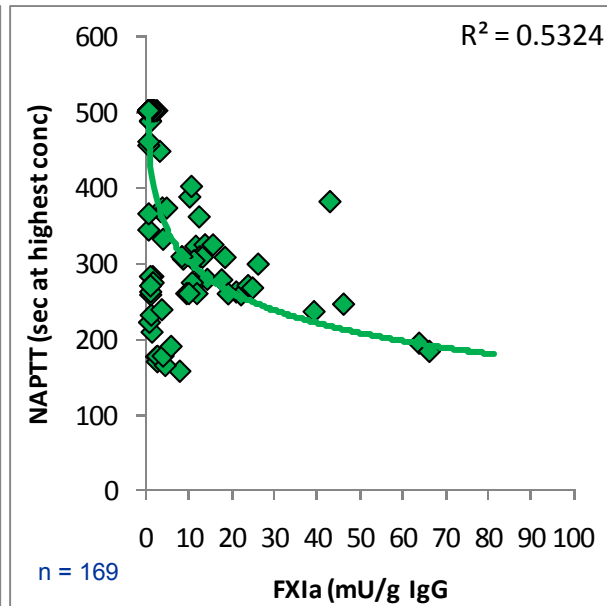
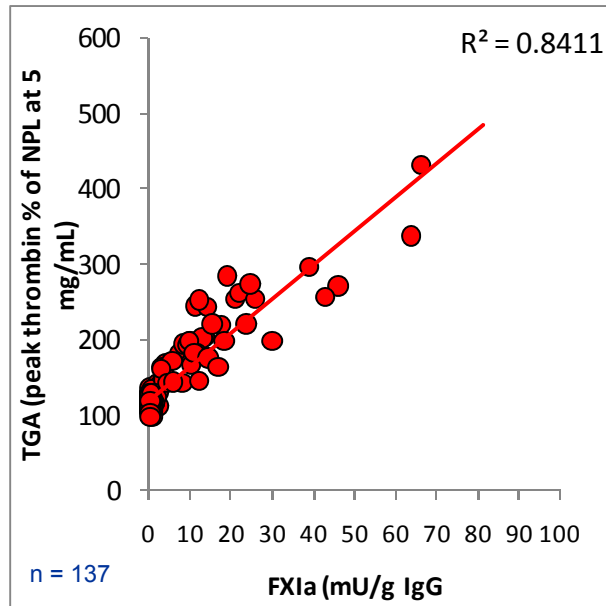
*Limit for evaluation depends on the clotting time of the reference plasma

Comparison of Immunoglobulin Products for FXIa Content, NAPTT and TGA

Product	Protein (%)	TGA (% of normal plasma control at 5% protein)	FXIa specific (mU/mL)	NAPTT (mg at 180 sec)
Product A	10	106.79	<0.04	>10
Product B	12	97.23	<0.04	>10
Product C	10	108.64	<0.04	>10
Product D	5	124.72	<0.04	>5
Product E	5	124.82	<0.04	>5
Product F	5	120.67	<0.04	>5
Product G	5	124.65	<0.04	>5
Product H	5	268.95	<0.04	>5
Product I	10	194.37	1.95	>10
Product J	5	451.05	4.06	1.44
Product K	5	115.64	<0.04	>5
Product L	5	110.13	<0.04	>5
Gammagard Liquid Baxter Lot # 1	10	106.28	<0.04	>10
Gammagard Liquid Baxter Lot # 2	10	113.29	<0.04	>10
Gammagard Liquid Baxter Lot # 3	10	112.34	<0.04	>10
Gammagard Liquid Baxter Lot # 4	10	110.35	<0.04	>10

FXIa levels determined with a specific FXIa assay correlate well with results of TGA and NAPTT

Correlation Between FXIa, TGA and NAPTT Levels in Various Immunoglobulin Products



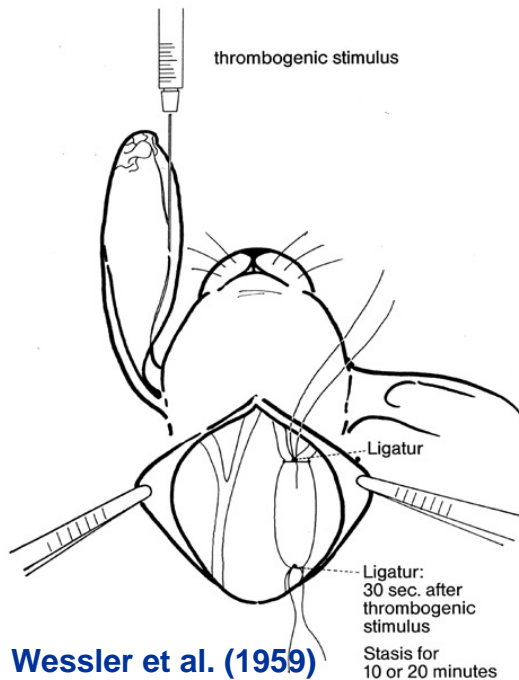
A good correlation has been observed between FXIa and TGA
Both NAPTT and TGA-CAT are sensitive to FXIa levels.

FXIa

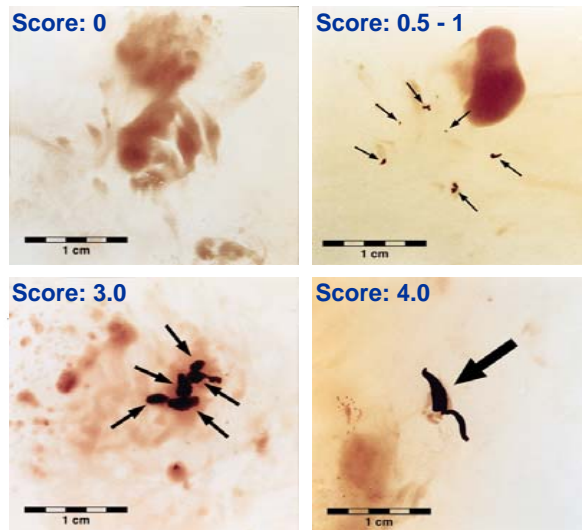
In vivo Thrombogenicity

In vivo Thrombogenicity of IGIV Spiked with FXIa Rabbit Wessler Stasis Model

- Study design:
 - Two lots of a Baxter IGIV product were spiked with purified FXIa
 - 5% IgG solution spiked with FXIa to reach a similar concentration as found in samples A and G of EMA-FDA Blood Cluster CS 469 on Thrombogenicity Tests for IGIV, April/Mai 2011: ~ 30 mU FXIa/mL IgG solution ~600 mU/g IgG
 - Treatment dose: Volume: 10 mL/kg; Protein: 500mg/kg



Wessler et al. (1959)
Fareed et al. (1985)
Thomas et al. (1989)

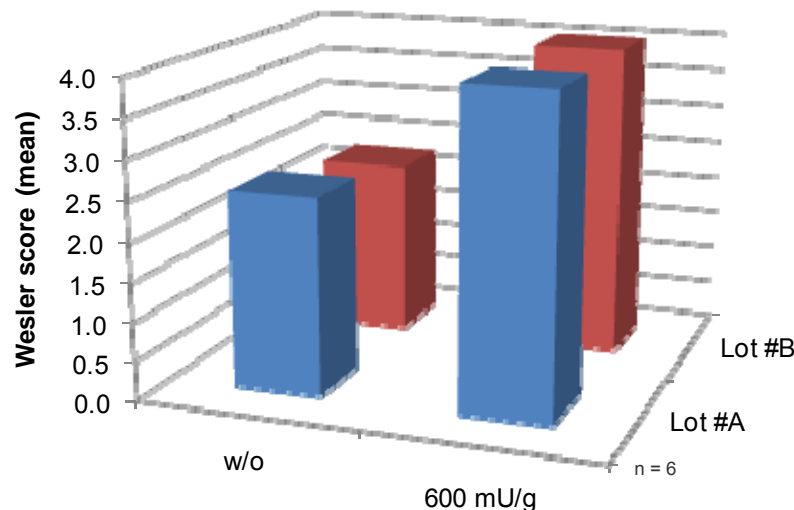


QUANTITATIVE EVALUATION OF THROMBOGENICITY	SCORE
no clot	0
few macroscopic strands of fibrin	0.5 - 1
several small thrombi	2
two or more large thrombi	3
several large thrombi	3.5
single thrombus forming a complete clot in vein segment	4

In vivo Thrombogenicity of IGIV Spiked with FXIa Rabbit Wessler Stasis Model

- Results:

- Mean thrombogenicity score of IGIV w/o FXIa spiking as expected from rabbits treated with high dose of a human IgG_{pr} product with low numbers of spontaneous TE reports
 - Results show variability of model
- An amount of 600 mU FXIa/g protein results in complete clots in the rabbit thrombogenicity model



	Wessler scores IGIV lot #A (after addition of FXIa)		Wessler scores IGIV lot #B (after addition of FXIa)	
Animal no#	w/o	600 mU XIa/g	w/o	600 mU XIa/g
1	4.0	4.0	3.0	4.0
2	2.0	4.0	2.0	4.0
3	2.0	4.0	3.5	4.0
4	3.0	4.0	1.0	4.0
5	2.0	4.0	2.0	4.0
6	2.0	4.0	2.0	4.0
Mean	2.50	4.00	2.25	4.00
SD	0.84	0.00	0.88	0.00

Removal of FXI(a) by Gammagard Liquid/Kiovig Cold Alcohol Fractionation

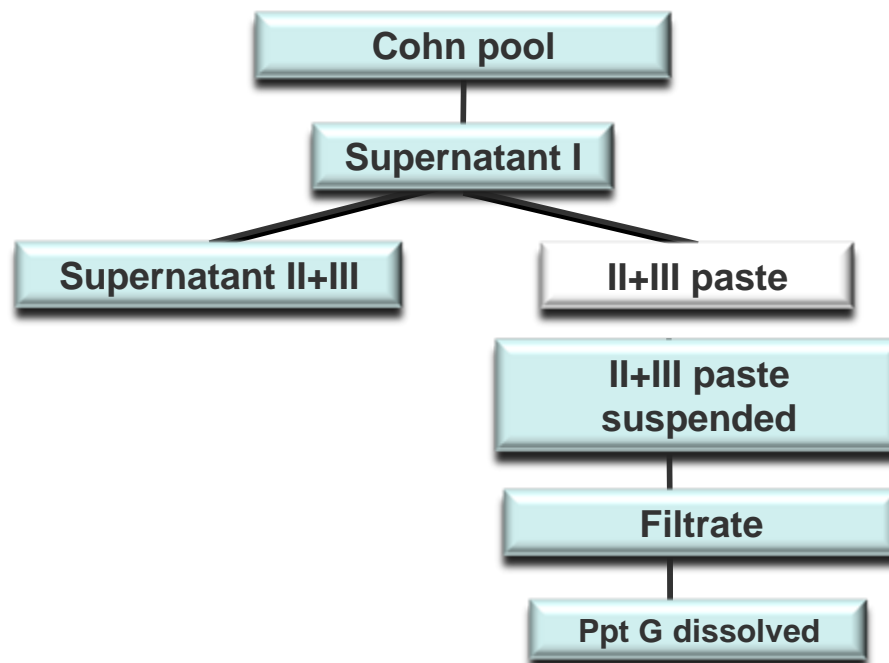
Gammagard Liquid Upstream Investigation

Scope

- Determine partitioning of FXI zymogen in the Gammagard Liquid (Kiovig) upstream process from Cohn pool to Precipitate G

Study outline

- Samples were drawn in alcohol fractionation and analyzed
 - 0.45µm filtration was applied before analysis if samples were turbid (e.g. for II+III paste suspended)



Partitioning of FXI zymogen in the Gammagard Liquid (Kiovig) Upstream Process

Mean values of 3 large-scale manufacturing batches are shown

Sample	FXI zymogen	
	(U/mL)	(% of Cohn pool)
Cohn pool	1.25	100.0
Supernatant I	1.01	87.2
Supernatant II+II	0.21	19.1
II+III paste resuspended*	1.31	71.6
Filtrate	0.04	2.8
Ppt G dissolved	0.31	1.8

*II+III paste re-suspension sample was analyzed after 0.45 µm filtration

- **Precipitation I does not remove substantial amounts of Factor XI zymogen from the IgG**
- **Most of the FXI zymogen precipitates at the fractionation II+III**
- **The main removal step for Factor XI zymogen in the Gammagard Liquid process is the II+III paste resuspension and filtration step**
- **The Gammagard Liquid upstream process removes more than 98% of Factor XI zymogen present in the Cohn pool**
 - **Further removal of pro-coagulant impurities occurs during down-stream purification of the Gammagard Liquid process**

Kiovig / Gammagard Liquid Pharmacovigilance Experience 2005 - 2010

Postmarketing Reporting Frequencies of Thromboembolic Events

Methodology and Limitations

Methodology

- All spontaneous reports of Thromboembolic events (TEEs) included (i.e., reports received from healthcare professionals and from regulatory agencies)
- Solicited, clinical and literature reports are excluded
- Data presented separately for US and EU

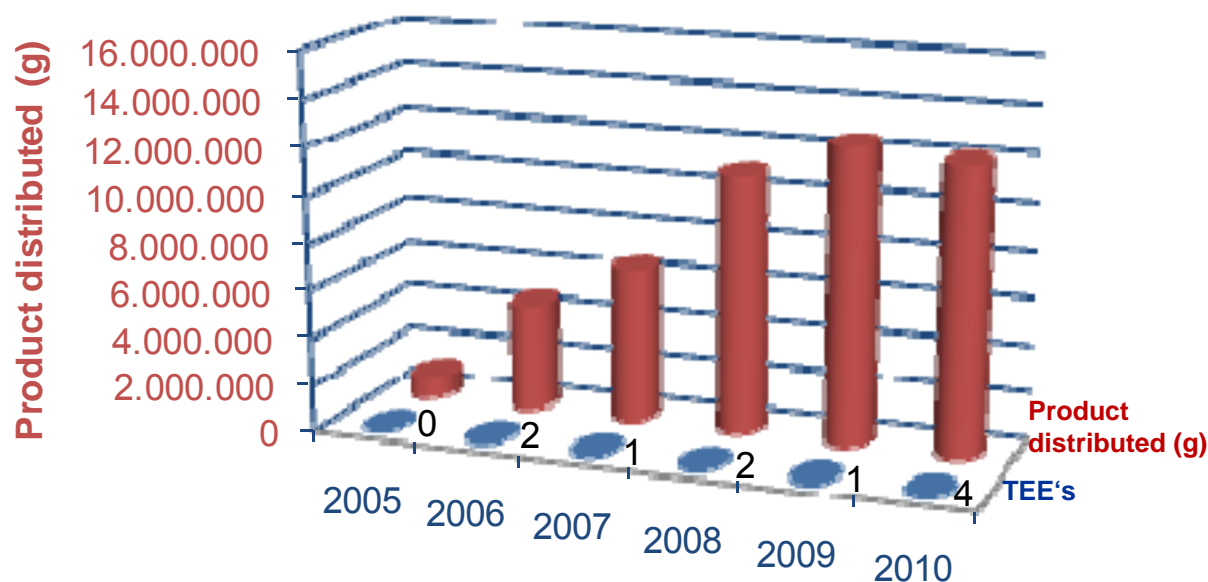
Limitations

- Underreporting in spontaneous reporting schemes occurs to an unknown extent
- Reporting frequencies do not represent incidence rates
- Due to missing denominator data no incidence rates can be calculated from spontaneous pharmacovigilance data
- Regionally different reporting cultures result in different reporting frequencies

US Experience

- Licensure of Gammagard Liquid: 27 April 2005

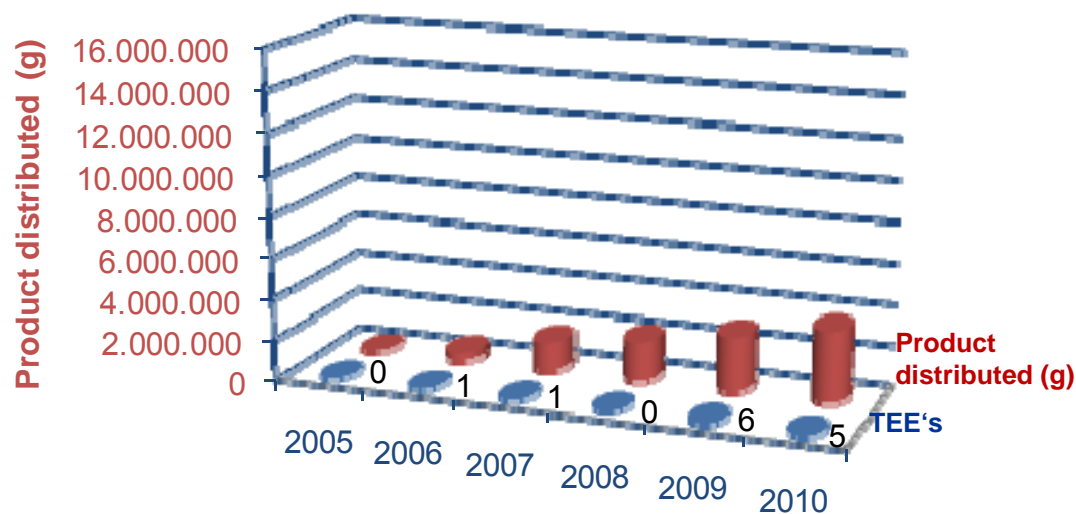
GGL US TEE Reporting Frequency
(cases/ product distributed)



EU Experience

- Kiovig was registered on 19 January 2006 through Centralized Procedure

Kiovig EU TEE Reporting Frequency (cases/ product distributed)



PV Field Safety Analysis and Conclusions

Summary:

- The absolute numbers of spontaneous TE reports are low for GGL during the reported data analyzed from 2005-2010
- The reporting frequencies of TEs for GGL have remained low and consistent during the reported data analyzed from 2005-2010
- Differences in reporting frequency of TEEs observed for US and Europe
- Non-product risk factors (i.e., patient risk profiles), as listed in the product insert, are also likely to play a major independent risk factor for the development of TE's

**Thromboembolic events are known and appropriately labeled AEs.
Risk-benefit in labeled indications is positive and remains
unchanged based on Baxter's field experience**

Summary & Conclusions

- Baxter has proactively evaluated IGIV products by *in vitro* methods indicative of thromboembolic potential
- FXIa was measured in different IgG products and a possible procoagulant effect of the product was assessed by two global tests (TGA in normal plasma pool and NAPTT in FXI deficient plasma)
- The three assays showed very good correlation, both global tests were dependent on the FXIa levels of the product
 - The specific FXIa test based on FIX as its natural substrate correlates well with the TGA
 - Historically, NAPTT* has been used by Baxter for IGIV product characterization (i.e.: support of conformance lots, process changes, exceptions)
 - Baxter's preferred method is the NAPTT assay because of its simplicity
- Spiking of an IVIG product with FXIa increases thrombogenicity in the Wessler stasis model
- A commercial Cohn fractionation process (Gammagard Liquid / Kiovig) removes more than 98% of Factor XI zymogen present in the Cohn pool
 - Further removal occurs during down-stream purification
- The number of spontaneous TE reports are low for Gammagard Liquid / Kiovig a widely used IGIV product
- Thromboembolic events are known and appropriately labeled AEs. Risk-benefit in labeled indications is positive and remains unchanged based on Baxter's field

* FXI deficient plasma

experience