

ACTOS™
(Pioglitazone Hydrochloride) Tablets

**Takeda America
Research and Development Center, Inc.
Princeton, New Jersey**

Introduction

Roberta L. Schneider, M.D.
Vice President, Drug Development
Takeda America R&D Center, Inc.

ACTOS™ (pioglitazone hydrochloride)

- Is an agent of the thiazolidinedione class
- Evaluated for the treatment of type 2 diabetes mellitus
 - Monotherapy
 - Combination with
 - Sulfonylurea (SU)
 - Metformin
 - Insulin
- Applications to market filed in U.S., Japan, and Europe
- Today's presentation will focus on the safety of ACTOS™

Agenda

- Introduction
 - Roberta L. Schneider, M.D.
- Preclinical Pharmacology and Toxicology
 - Frederick E. Reno, Ph.D.; Consultant
- Clinical Safety Assessment
 - Roberta L. Schneider, M.D.
 - James W. Freston, M.D., Ph.D.; Professor of Medicine and Clinical Pharmacology, Director, Office of Clinical Research, University of Connecticut Health Center
 - Neil Kaplowitz, M.D.; Professor of Medicine, Chief, Division of Gastrointestinal and Liver Diseases, University of Southern California School of Medicine
- Clinical Perspective
 - David E. Kelley, M.D.; Associate Professor of Endocrinology and Metabolism, University of Pittsburgh School of Medicine

Takeda America Research & Development Center, Inc. Representatives

- Drug Development
 - Roberta L. Schneider, M.D.
 - Cindy J. Rubin, M.D.
 - Vincent P. Houser, Ph.D.
 - M. Alyson Spedding
- Statistics and Data Management
 - Annette L. Mathisen, Ph.D.

Consultants Present

- Regulatory Affairs
 - Stephanie D. Rais
- Preclinical
 - Colleen Johnson, M.S., DABT, Toxicology
 - Frederick E. Reno, Ph.D., Toxicology
- Pharmacokinetics
 - Martha Charney, Ph.D.

Consultants Present

- James W. Freston, M.D., Ph.D.
 - Professor of Medicine and Clinical Pharmacology, Director, Office of Clinical Research, University of Connecticut Health Center
- Neil Kaplowitz, M.D.
 - Professor of Medicine, Chief, Division of Gastrointestinal and Liver Diseases, University of Southern California School of Medicine
- David E. Kelley, M.D.
 - Associate Professor of Endocrinology and Metabolism, University of Pittsburgh School of Medicine

Consultants Present

- Hyman J. Zimmerman, M.D.
 - Visiting Scientist, Armed Forces Institute of Pathology
Hepatic Department
- Roberto M. Lang, M.D., FACC
 - Professor of Medicine, Director, Noninvasive Cardiac
Imaging Laboratories, University of Chicago Medical Center
- Stephen L. Eck, M.D., Ph.D.
 - Assistant Professor of Medicine, University of Pennsylvania
School of Medicine
- Keith G. Tolman, M.D.
 - Professor of Medicine, Chief, Hepatology and Clinical
Pharmacology, University of Utah School of Medicine

Consultants Present

- Marietta M. Henry, M.S., M.D.
 - Vice President, Medical Affairs, Covance Central Laboratory Services, Inc.
- Samuel M. Cohen, M.D., Ph.D.
 - Professor and Chair, Department of Pathology and Microbiology, University of Nebraska Medical Center
- Michael D. Glant, M.D.
 - Medical Director, Diagnostic Cytology Laboratories

History of ACTOS™

- 1982 Takeda Chemical Industries, Ltd., Osaka, Japan identified the first thiazolidinedione, ciglitazone
- 1986 Takeda synthesized pioglitazone
- 1989 Pioglitazone was licensed to The Upjohn Company, IND submitted, and clinical development initiated
- 1991 Clinical studies began in Japan

History of ACTOS™

- 1995 Takeda assumed IND in U.S.
- 1996 Phase 2/3 clinical studies began in the U.S. and Europe
- 1999 Takeda submitted NDA No. 21-073 for ACTOS™ (pioglitazone hydrochloride) on January 15
- 1999 Registration dossier submitted in Europe on March 30

Today's Presentation for ACTOS™

- Preclinical pharmacology and toxicology
- Clinical trial safety data

Pioglitazone Preclinical Pharmacology and Toxicology

Frederick E. Reno, Ph.D.
Consultant in Toxicology

Preclinical Pharmacology

- Pioglitazone lowers glucose levels in obese/diabetic animals
- No hypoglycemic effect in normal animals
- Increases insulin dependent glucose disposal in skeletal muscle
- Decreases hepatic glucose output
- Lowers triglycerides in diabetic and normal animals
- Activates PPAR γ receptors

Preclinical Pharmacokinetics

- Rapid absorption with 81% to 94% bioavailability
- Six metabolites (three are active)
- No liver microsomal enzyme induction or inhibition
- Fecal elimination predominates (except in monkeys)
- Main cytochrome P450 isoforms CYP2C8 and CYP3A4

Cardiac Findings

- Identified in several animal models
- Consistent across thiazolidinedione class
- Threshold effect was primarily increased heart weight
- Threshold dose varied with species
- No change in cardiac function by echocardiography

Hematologic Findings

- Identified in several animal models
- Consistent across thiazolidinedione class
- Threshold effect was decreased RBC parameters
- Threshold dose varied with species
- Changes occurred during early phase of treatment and generally remained stable
- Animals considered physiologically normal

Liver Findings

- Identified in several animal models
- Threshold effect was increased liver weight or the histologic finding of cellular hypertrophy
- Effects consistent with adaptive response to increased metabolic work seen with many different classes of compounds
- Threshold dose varied with species

Threshold Doses for Liver Findings

Species	Dose (mg/kg/day)	Effect
Mouse	3.2	Hepatocellular hypertrophy
	32.0	↑ Liver weight
	320.0	↑ ALT in females
Rat	63.0	Periacinar hepatocytic hypertrophy
	100.0	↑ Liver weight
Dog	10.0	↑ Liver weight; ↑ ALT in males with no histologic changes up to one year
	100.0	Mild subacute hepatitis
	150.0	Atrophy and necrosis
Monkey	8.9	↑ Liver weight
	139.0	↑ Glycogen storage

Duration ≥ 13 weeks

Additional Studies

- Reproduction studies
- Carcinogenicity studies
 - Urinary bladder calculi
- Mutagenicity studies
- Serum lipid studies
- Hepatic microsomal enzyme studies

Reproduction Studies

- Fertility
 - No effect on reproductive performance at 40 mg/kg/day
 - Fetal effects at ≥ 10 mg/kg/day in one study
- Teratology
 - Not teratogenic in rabbits and rats
 - NOEL for fetal effects at 20 mg/kg/day in rats
 - NOEL for fetal effects at 80 mg/kg/day in rabbits
- Perinatal
 - Some delayed development at ≥ 10 mg/kg/day

Carcinogenicity Studies

- No evidence of carcinogenicity in mice
- Calculi-induced tumors of urinary bladder in male rats
- No tumors or preneoplastic lesions of urinary bladder in long-term (1 year) studies of monkey or dog

Preclinical Summary

- Blood glucose lowered in diabetic animals
- Insulin resistance decreased
- Minor hepatic changes, mostly adaptive
- Plasma volume expansion with dilution effects
- Cardiac enlargement in rodents and dogs, but, not monkeys

Preclinical Conclusions

- Metabolic benefits related to insulin resistance and glucose homeostasis
- Toxicity is generally consistent with other agents in the class
- No unique toxicity of clinical significance

