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Dockets Management Branch (HFA-305)
Food and Drug Administration
5630 Fishers Lane, Room 1061
Rockville, MD 20852

Re: Docket No. 2003D-0497, CDER 2003163. Draft Guidance for Industry on Pharmacogenomic Data Submissions.

Abbott Laboratories (Abbott) is very pleased to have the opportunity to comment on the Draft Guidance on Draft Guidance for Industry on Pharmacogenomic Data Submissions, published in the Federal Register on November 3, 2003.

While supporting, in general, the Pharmaceutical Research and Manufacturers of America's (PhRMA) position on this draft guidance, Abbott - as a manufacturer of drug, biologic, in vitro diagnostic and device products – would like to thank the Agency for their consideration of the following attached comments. Should you have any questions, please contact Ivone Takenaka, Ph.D. at (847) 935-9011 or by FAX at (847) 938-3346.

Sincerely,

Doug Sporn / jrs

Douglas L. Sporn

Abbott

February 2, 2004

Comments on the DRAFT GUIDANCE ON PHARMACOGENOMIC DATA SUBMISSIONS

Docket 03D-0497

GENERAL COMMENTS

Abbott welcomes the draft guidance document and sees it as a starting point for the establishment of a cooperative framework to advance the positive impact that pharmacogenomics may have on the drug discovery and development process. However, there are several concerns that need to be addressed regarding the definitions and processes suggested in this draft guidance document and the potential regulatory impact of the Genomic Data Submission in drug development.

We endorse the concept that the determination of whether data may be submitted voluntarily must be made by the sponsor, so that the disposition of the data will be known at the time the experiments are designed, and not after the data have been generated. For ambiguous situations we suggest that the FDA provide a mechanism to enable communication with the Agency.

Abbott believes that the FDA should take into consideration other regulations, such as the Privacy regulations (HIPAA and EU Data Privacy Directive) that may impede further genetic analysis of individual's samples without their appropriate consent. Thus, Abbott recommends that the guidance define the processes and systems in place to protect individual genetic information. The same concern applies to the protection of proprietary information and it should be addressed in more detail in the guidance.

Finally, the guidance should better delineate the review process of data submitted to the Interdisciplinary Pharmacogenomic Review Group, the structure and functional representatives that will constitute this group, and the feedback and interaction opportunities available to the sponsors.

SPECFIC COMMENTS

III. SUBMISSION POLICY

A. General Principles

Biomarkers

Abbott agrees with the FDA positioning of pharmacogenomics within the framework of biomarkers. This appropriately guides the reader to understand that established procedures for biomarkers also apply to pharmacogenomic markers. It is also strongly recommended that the guidance emphasize that the analytical laboratory conducting pharmacogenomic assays in clinical trials are under the same regulatory standards as for other clinical trial assays.

The distinction between known valid biomarkers and probable valid biomarkers sparked lively discussion at the FDA-DIA-PWG meeting in November 2003 and continues to do so within the pharmaceutical and in vitro diagnostic industry. Abbott believes that these distinctions, while important in the conduct of clinical investigations and diagnostic development, are not necessary in the draft guidance and detract from its message.

Abbott believes that the use of probable valid biomarker as a criterion for the submission of genomic data is unnecessary. If a biomarker is used for regulatory decision-making, to support claims, or in the conduct of a clinical trial, (e.g., sections III B 1, 2; IV A 1, 2) the data will be submitted in full, irrespective of the degree of validity. Under the draft guidance, data from probable valid biomarkers are differentially submitted only in the case of NDAs and BLAs, and the only consequence is whether the data are submitted as an abbreviated report or a synopsis. The difference in data content between an abbreviated report and a synopsis is small, and in the circumstances the difference has little practical effect. Therefore, for clarity in the document, Abbott recommends that the requirement for submission of data from biomarkers be limited to those biomarkers that have an established validity. We strongly support the proposal of PhRMA that valid biomarkers be limited to those in a published listing.

A future guidance on the <u>use</u> of biomarkers in drug development and evaluation, including more detailed consideration of validity, assay methodology, and relationship to clinical diagnostics, should be developed.

<u>Biomarkers for In Vitro Diagnostics (IVD) products</u>

This guidance on Pharmacogenomics Data Submission encompasses drugs, biologics, and IVDs, as interpreted by the FDA Centers involved (i.e., CDER, CBER, CDRH, etc.). Therefore, a careful assessment of the terms used in this guidance should be performed and clearer definitions should be provided, as the terminology used may have different meanings depending on the type of product. The following is an example of the impact of the terminology used.

<u>Lines 129-130</u>: The draft guidance states "... an analytical test system with *well established performance characteristics*..."

Comment:

> Per 21 CFR 809.10, products that have not been cleared/approved by the FDA, and are being shipped for product testing prior to full commercial marketing (for example, for use on specimens derived from humans to compare the usefulness of the product with other products or procedures which are in current use or recognized as useful), must be labeled ".... **The performance characteristics of this product have not been established.**" Given this requirement, Abbott recommends that the phrase "... an analytical test system with well established

performance characteristics...", in the draft guidance, be replaced by ***"a validated analytical test system."***

IV. SUBMISSION OF PHARMACOGENOMIC DATA

A. Submission of Pharmacogenomic Data During the IND Phase

Lines 284-285 and 651-652: The draft guidance states *"The test results will be used for decision making in any clinical trial, or in an animal trial used to support safety."*

Comment:

The phrase "decision making" in criterion #1 for whether pharmacogenomic data must be submitted to the IND needs clarification. Abbott suggests the following language (for lines 284-285 and 651-652): ***The test results will be: 1) from an animal safety study used to support a clinical trial, or 2) for the conduct or primary analysis of a clinical study."***