

CENTER FOR DRUG EVALUATION & RESEARCH OFFICE OF CLINICAL PHARMACOLOGY

Regulatory Perspective on Clinical Pharmacology Considerations for Antifungal Drug Development

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Disclaimer



The opinions contained in this presentation are my own and do not necessarily represent the views of the FDA.

Objectives



- To establish framework for further discussion
- To discuss high-level clinical pharmacology considerations relevant for antifungals
 - Animal Models
 - Formulation Development
 - Exposure-Response Analyses
 - Drug-Drug Interactions

Animal Model Utility



- Animal models are potentially useful to demonstrate proof of concept
- Challenges remain in use of animal models to establish clinical effectiveness
 - Selection of appropriate animal model

Example: Micafungin



- Difficulty in establishing effectiveness of micafungin in pediatric patients <4 months
 - Dissimilar disease presentation from adults and older pediatric patients
- Rabbit model of hematogenous Candida meningoencephalitis supported dosing for clinical trial and labeling information
- Section 8.4 Use in Special Populations Pediatric Use "[A] dose regimen of approximately 10 to 25 mg/kg once daily may be necessary to lower fungal burden in the CNS in pediatric patients younger than 4 months of age."

Hope WW, Mickiene D, Petraitis V, et al. The pharmacokinetics and pharmacodynamics of micafungin in experimental hematogenous Candida meningoencephalitis: implications for echinocandin therapy in neonates. J Infect Dis. 2008;197(1):163-71. Petraitiene R, Petraitis V, Hope WW, et al. Cerebrospinal fluid and plasma (1-->3)-beta-D-glucan as surrogate markers for detection and monitoring of therapeutic response in experimental hematogenous Candida meningoencephalitis. Antimicrob Agents Chemother. 2008;52(11):4121-9.

Formulation Development

- Beneficial to have both IV and PO formulations available
 - Wide range of fungal infection severity
 - Step-down therapy (IV->PO) with same antifungal agent
- Concerns with antifungal formulations
 - Echinocandins are only available IV
 - Issues with PO formulation for azole antifungals



Exposure-Response (E-R) Analyses

- Important to evaluate E-R relationships to support efficacy and safety in clinical trials
 - Inform dose regimen selection
 - May indicate need for therapeutic drug monitoring (TDM)
- Some antifungal drugs include E-R data in labeling
 - E.g., posaconazole, micafungin, voriconazole
- Although not included in labeling, TDM is often used clinically for azole antifungals
 - 2016 IDSA guidelines recommend TDM with use of azoles (posaconazole, voriconazole, itraconazole) for treatment or prophylaxis of invasive aspergillosis

Drug-Drug Interactions (DDI)

- Some antifungals have significant DDI liability
 - Azole antifungals are CYP substrates and inhibitors
 - Voriconazole and itraconazole have 30+ listed DDIs in labeling
- Patients with invasive fungal infections often have severe comorbidities
- Many concomitant medications in target patient population
 - Transplant recipients: Sirolimus, Everolimus, Tacrolimus, Cyclosporine
 - Patients with HIV: Protease Inhibitors
- DDI potential must be evaluated in vitro and in vivo, as applicable

Example: Posaconazole



- Formulation Development
 - Oral Suspension (2006)
 - Delayed-Release Tablet (2013)
 - IV Solution (2014)
- DDIs
 - CYP 3A4 substrates/modulators
 - Drugs affecting GI motility or pH

- E-R Relationship
 - Assessed for oral suspension
 - Increase in efficacy with increase in C_{avg}
 - Opportunity to optimize prophylaxis despite variable absorption using TDM
 - TDM used clinically

Other Important Clinical Pharmacology Studies

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- In Vitro CYP Metabolism/Transporter
- Single- and Multiple-Ascending Dose PK
- Food-Effect
- Bioequivalence/Bioavailability
- Mass Balance/ADME
- Hepatic/Renal Impairment
- Thorough QT

Summary



- Clinical pharmacology drug development for antifungals is similar to other disease states
- Several areas that may require special consideration relative to other therapeutic areas
 - Animal Model Utility
 - Formulation Development
 - E-R Analysis/TDM
 - DDI Characterization

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