

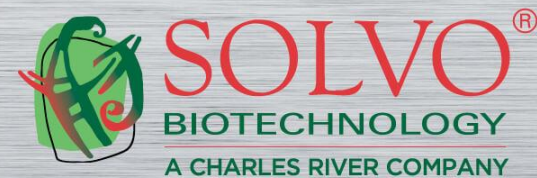


# **Solutions by SOLVO to support your ADME-Tox research**

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Business Development Manager

SOLVO Biotechnology | A Charles River Company



# Who is SOLVO?

charles river

2019

Joined  
Charles  
River

2018  
Joined  
Citoxlab Group

2017  
San  
Francisco  
Office

2015  
Seattle  
Office

2012  
Boston  
Office

1999  
SOLVO

The first transporter CRO





# About SOLVO

## – The Transporter Company

- ~100 employees, of which 60 scientists - 20 in R&D
- Over 500 clients worldwide, from Virtual Companies to Big Pharma
- 2 main facilities, beside small US offices:

### Budapest, Capital, Central Hungary

Research and Development lab  
Automation lab  
Contract Research Services, incl.  
on-site bioanalytics  
Business Development



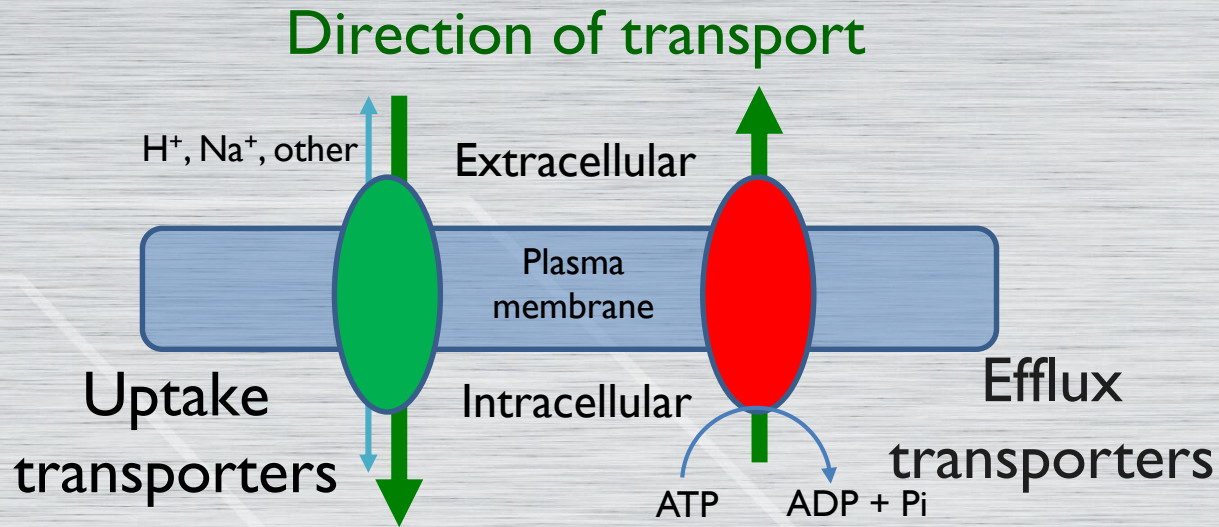
### Szeged, South Hungary

Contract Research Services  
lab, incl. on-site bioanalytics  
Production lab  
Metabolism lab  
Backoffice





# Types of Transporters



- Cell membrane forms hydrophobic barrier limiting passive diffusion of non-lipophilic molecules
- Transporters required to move these substances into (**uptake**) or out of (**efflux**) cells
- Estimated **10%** of human genome transporter-related (~2,000 genes; Hediger et al., 2013 Mol.Aspects. Med.)

## Uptake (SLC) transporters

Mediate active transport of compounds across cell membranes

Energy source differs per family of transporters (sodium gradient, proton gradient, etc)

Transport wide variety of molecules: peptides, organic anions and cations, bile acids, amino acids, fatty acids, etc.

OATPs, OATs, OCTs, OCTNs, MATE, etc

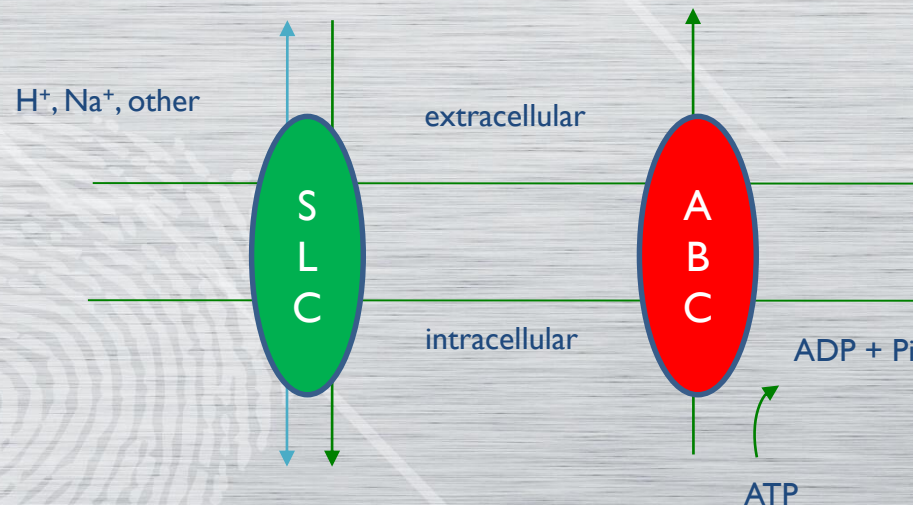
## Efflux (ABC) transporters

>1,000 different transporters in the family (49 human)

Energy source: ATP

Alter pharmacokinetics of drugs, nutrients and other molecules

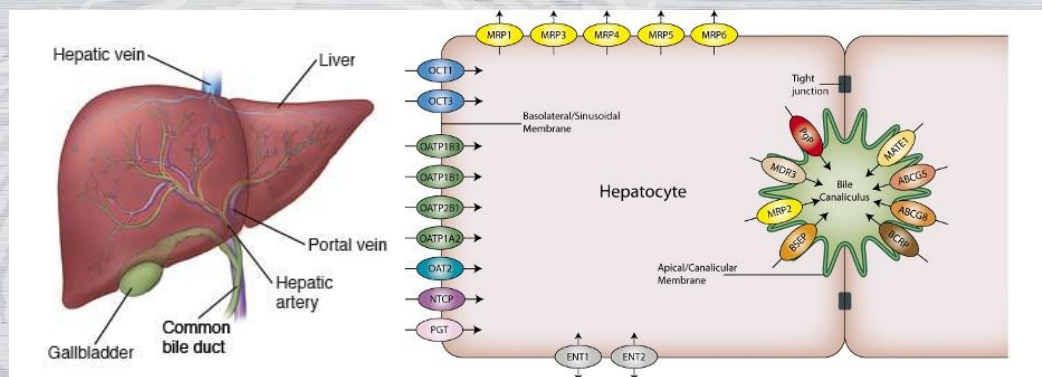
MDR1 (P-gp), BCRP, MRPs, BSEP etc





- Efficacy
- Side effects
- Toxicity
- DDIs

## Interaction with transporters



- **Transporters can limit tissue distribution**  
regulation of entry/accumulation to/in CNS by MDR1
- **Transporters can mediate drug clearance**  
Penicillin G too rapid renal elimination  
+ Probenecid  $\Rightarrow$  3.3 fold increase
- **Effect on tissue may not show in plasma**  
Metformin (type2 diabetes)  
Site of action: liver  
Excreted in urine (OCTs, MATEs)  
OCT1 (-/-) mice: no metformin plasma AUC change  
While ~90% reduction in liver distribution
- **Transporters as targets**  
Sodium-glucose cotransporters, Uric acid transporter
- **Multiple transporters shown to mediate clinical DDIs**
- **Natural product-drug interactions**



# When to study transporters?

- **Discovery to First Time In Human Clinical Strategy**  
therapeutic area, comedications, product profile, development plan, physicochemical properties
- **First Time In Human to Proof Of Concept Understanding**  
Non-clinical in vitro and in vivo studies  
Clinical studies for pharmacokinetics, safety
- **Proof Of Concept to New Drug Application / Marketing Translation**  
Drug labeling, Non-clinical mechanistic or investigative studies  
Clinical studies



# Regulatory aspects

## Guidance for Industry

### Drug Interaction Studies — Study Design, Data Analysis, and Implications for Dosing and Labeling

**2006:** FDA Draft Guidance (P-gp)

**2007:** Formation of International Transporter Consortium (ITC)

## REVIEWS

**2010:** ITC Transporter White Paper (P-gp, BCRP, OATPIBI, OATPIB3, OCT2, OAT1, OAT3)

**2010:** EMA Draft Guidance (P-gp, BCRP, OATPIBI, OATPIB3, OCT2, OAT1, OAT3, BSEP, OCT1)

**2012:** Revised FDA Draft Guidance (P-gp, BCRP, OATPIBI, OATPIB3, OCT2, OAT1, OAT3, BSEP, MATEs, MRPs)

**2013:** Seven ITC Whitepapers Published

**2013:** Final EMA Guidance (more detailed)

**2014:** PMDA Guidance published

**2017:** PMDA Draft Guidance Updated

**2017:** EMA Concept Paper on Guidance Update Released

**2017:** Revised FDA Draft Guidance Released



This guide provides information on the development of drug interaction studies, including the design, data analysis, and implications for dosing and labeling. It is intended for use by drug developers and regulatory agencies.

Comments and suggestions for improvement should be submitted to the EMA/CHMP/EPWP/125211/2010 Committee for Human Medicinal Products (CHMP).

For questions regarding the guidance, please contact the EMA/CHMP/EPWP/125211/2010 Committee for Human Medicinal Products (CHMP).

**Guidance for Industry**  
**Drug Interaction Studies —**  
**Study Design, Data Analysis,**  
**Implications for Dosing, and Labeling**  
**Recommendations**

**European Medicines Agency**  
SCIENCE MEDICINES HEALTH

21 June 2012  
CHMP/EPWP/560/95/Rev. 1  
Committee for Human Medicinal Products (CHMP)

**Guideline on the Investigation of Drug Interactions**  
Final

Discussion in the Efficacy Working Party (EWP)	June/October 1996
Transmission to the CHMP	February 1997
Transmission to interested parties	March 1997
Deadline for comments	September 1997
Re-submission to the EWP	December 1997
Approval by the CHMP	December 1997
Date for coming into operation	June 1998
Draft Rev. 1 Agreed by the EWP	April 2010
Adoption Rev. 1 by CHMP for release for consultation	22 April 2010
End of consultation Rev. 1 (deadline for comments)	31 October 2010
Agreed by Pharmacokinetics Working Party	February 2012
Adopted by CHMP	21 June 2012
Date for coming into effect	1 January 2013

This guideline replaces guideline CHMP/EPWP/560/95.

**Keywords** Interaction, guideline, metabolism, inhibition, induction, transport, enzyme, transport protein, transporter, absorption, food, distribution, BSEP, BCRP, OAT1, OAT3.

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# Latest FDA Draft guidance

Oct 2017

- 1. MATE1 and MATE2-K to be studied
- 2. (Time Dependent Inhibition) Potentiation of Transporter Inhibition by Preincubation
- 3. Calibration of in vitro systems –  
generate cut-off values for inhibition studies
- 4. More emphasis on study design:
  - Solubility limits
  - Non-specific binding
  - Probe substrate concentrations - below  $K_M$
  - Choice of probe substrate



# Current Regulatory Requirements

		INHIBITION STUDIES		SUBSTRATE STUDIES	
Transporter		EMA	FDA	EMA	FDA
EFFLUX	P-gp	yes	yes	consider	yes
	BCRP	yes	yes	consider	yes
	BSEP	prefer	no	consider	no
	MRPs	no	no	consider	no
UPTAKE	OAT1	yes	yes	consider	≥25% of elimination is active renal
	OAT3	yes	yes	consider	
	OATP1B1	yes	yes	≥25% of elimination hepatic	≥25% of elim. hepatic or biliary
	OATP1B3	yes	yes		
	OCT1	consider	no	consider	no
	OCT2	yes	yes	consider	≥25% of elimination is active renal
	MATE1	consider	yes	consider	
	MATE2-K	consider	yes	consider	

	Assay	EMA	FDA
Supportive	Solubility	yes	yes
	Non-specific binding	yes	yes

- **Supportive experiments** should be included as well
- Core panel of transporters but other transporters to be considered
- **BSEP**: role in hepatotoxicity (cholestasis/DILI), while limited role in biliary clearance
- **OCT**: interactions exist *in vitro*, but to date no clinical DDI can be attributed solely to OCT1
- **Tailored study design supported by expert scientists to fit best to the actual needs**
- **Importance of scientific discussion!**



# Appendix of guidance

- FDA 2017 guidance describes technical details of test systems and considerations.
- All SOLVO assays are compatible, and take these considerations into account

**Table 1. Examples of In Vitro Systems to Investigate Transporter-Mediated Drug Interactions**

Transporter	In Vitro Systems
<i>ABC Transporters</i>	
BCRP, P-gp	Caco-2 cells, commercial or in-house membrane vesicles, knock-out/down cells, transfected cells (MDCK, LLC-PK <sub>1</sub> , etc.)
<i>Solute Carrier (SLC) Transporters</i>	
OATPs	Hepatocytes, transfected cells (CHO, HEK293, MDCK, etc.)
OATs, OCTs	Transfected cells (CHO, HEK293, MDCK, etc.)
MATEs*	Commercial or in-house membrane vesicles, transfected cells (CHO, HEK293, MDCK)

CHO: Chinese hamster ovary cell

HEK293: human embryonic kidney 293 cell

LLC-PK1: Lewis-lung cancer porcine kidney 1 cell

MDCK: Madin-Darby canine kidney cell

\*The function of MATEs depends on the driving force from oppositely directed proton gradient; therefore, the appropriate pH of MATE assay system should be employed.

# What does SOLVO offer?

SOLVO is a leading provider of products and services for *in vitro* testing of transporter, metabolism and mechanistical toxicology studies.

## Discovery

- Custom transporter assays development

- Permeability studies

- Metabolism

- Transporters to target specific tissues

## Safety

- Regulatory DDI studies

- Transporters in drug disposition

- Transporters in toxicity

- Holistic models for toxicity testing



# >200 Transporter Products and Services

- Efflux transporter services
- Uptake transporter assays
- Custom assay development
- LC/MS-MS quantification of transporter proteins
- qPCR gene expression analysis
- Drug metabolism services
- LC/MS-MS analytics
- Aqueous solubility services
- Protein binding/Non-specific binding
- Rat brain endothelial cell monolayer assay
- Caco-2 and KO monolayer assay
- Hepatocyte uptake , sandwich-culture (B-CLEAR™), and micropatterned co-culture (HepatoPac™) assays
- aProximate™ renal proximal tubule cell assay

# Snapshot of SOLVO's portfolio

	Individual Transporters		Cellular Barrier Models
	Human	Other species	
Liver	OATPs, MRPs, BSEP, NTCP, OCT1, MDRI, BCRP	Rat: Oatps, Mdr1a, Bcrp and Mrps, Bsep Mouse: mBcrp1, mBsep Cyno-monkey: Oatps and Ntcp	Hepatocyte uptake assay, B-CLEAR <sup>®</sup> HepatoPac <sup>®</sup>
Kidney	OATs, OCTs, MATEs, MRPs, MDRI, BCRP	Rat: Mdr1a, Bcrp1, rOat1, rOatn2 Mouse: mBcrp1	MDCKII-OAT1/BCRP, Proximal Tubule Cell Monolayer
Absorption	MDRI, BCRP	rMdr1b, rBcrp1, rMrp2	Caco-2 Caco-2 KO
Blood-Brain Barrier	MDRI, BCRP, OATP2B1, OATP1A2, MRP4, MRP5	rMdr1a, rBcrp1, cyno OATPs, rat OATPs	RBEC, MBEC, MDCKII-MDR1



# Human Transporter Models

## Regulatory

MDR1  
BCRP  
BSEP  
OATP1B1  
OATP1B3  
OAT1  
OAT3  
OCT1  
OCT2  
MATE1  
MATE2-K

ASBT  
CNT1  
CNT2  
CNT3  
ENT1  
ENT2  
ENT4  
HPT1  
MRP1  
MRP2  
MRP3

MRP4  
MRP5  
NTCP  
OAT2(v1)  
OAT4  
OATP1A2  
OATP2A1  
OATP2B1  
OCT3  
OCTN1  
OCTN2

OST $\alpha/\beta$   
PEPT1  
PEPT2  
SGLT1  
SGLT2  
SGLT5  
SGLT6  
URAT1

# Preclinical Animal Transporter Models

## Mouse

Bcrp

Bsep

Mdr1a

Sglt2

## Rat

Bsep

Mdr1b

Mrp2

Mrp3

Asbt

Ntcp

Oat1

Oatp1a1

Oatp1a4

Oatp1b2

Octn2

Osta/ $\beta$

## Dog

Bsep

Sglt2

## Cyno

Mdr1

Bcrp

Bsep

Ntcp

Oatp1b1

Oatp1b3

Oatp2b1



# Key Considerations of study design

## Physicochemical characteristics of Test Article

- End point (Radiolabel, LC/MS, fluorescence)
- Passive permeability (assay suitability)
- Non-specific binding (add serum protein?)
- Solubility (solvent tolerance of assay)
- Cytotoxicity (duration of assay, or alternative use of vesicles)

## Experimental conditions

- Linear transport rate conditions
- Effect of preincubation with inhibitor
- Recovery of Test Article (mass balance)
- Substrate-dependent inhibition

# Assay selection

Available budget

Physicochemical properties of compound

Regulatory or mechanistic?

Barrier/Tissue of interest

Downstream application (ie. PBPK modeling)

Cross-species comparison



# Assays used to study transporters

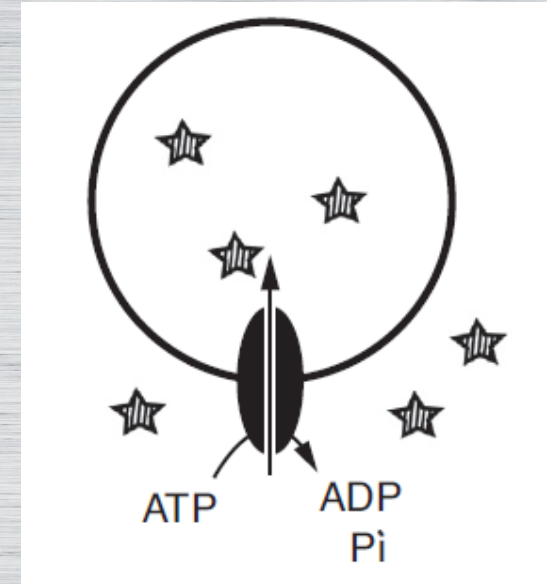
## Individual transporter models

- Vesicular transport
- Cell monolayer
- Cellular uptake



# Vesicular Transport Assay

- ✓ Quick, simple, and high throughput
- ✓ Flexible readout (LSC, Fluor, LC/MS)
- ✓ Inhibition assays: works with high, medium, or low permeability compounds
- ✓ Mammalian membrane vesicles available, providing more physiologically relevant system
- ✓ All membrane vesicles required are generated in-house at SOLVO
- ✗ Substrate assays: only for low permeability compounds





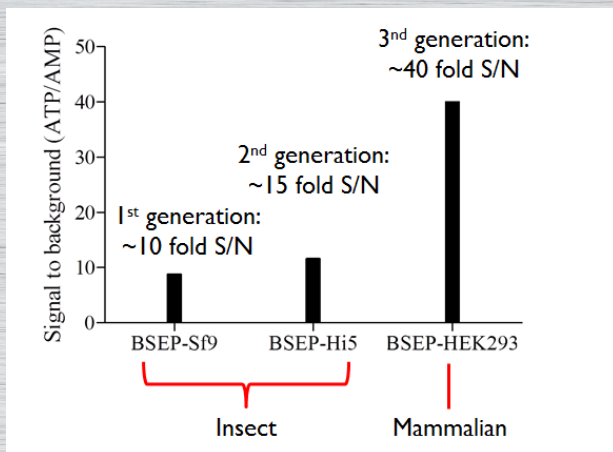
## VT - Substrate assay

- Study accumulation using ATP vs. AMP in both transporter overexpressing and non-expressing vesicles in the absence and presence of specific reference inhibitor.
- Further enzyme kinetics can be studied (determination of  $K_m$  and  $V_{max}$  ).

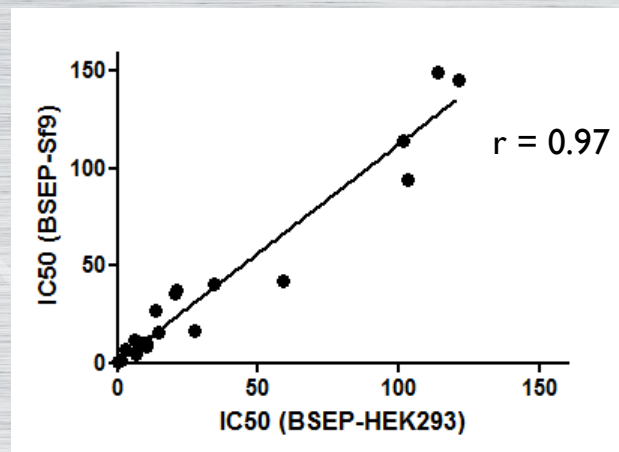
## VT - Inhibition assay

- Study inhibition of a known probe substrate in vesicles overexpressing a selected transporter.
- Use two or seven concentrations of the compound which is tested as inhibitor.
- An  $IC_{50}$  value can be determined (at seven concentrations).
- Alternatively, determine the  $K_i$  value.

# Why use HEK293 vesicles?



~40-fold dynamic range using BSEP-HEK293 vesicles, compared to ~10-fold using traditional Sf9 insect membranes.



Comparison study using 31 reference compounds show no difference in IC<sub>50</sub> values using BSEP-Sf9 or BSEP-HEK293 vesicles.

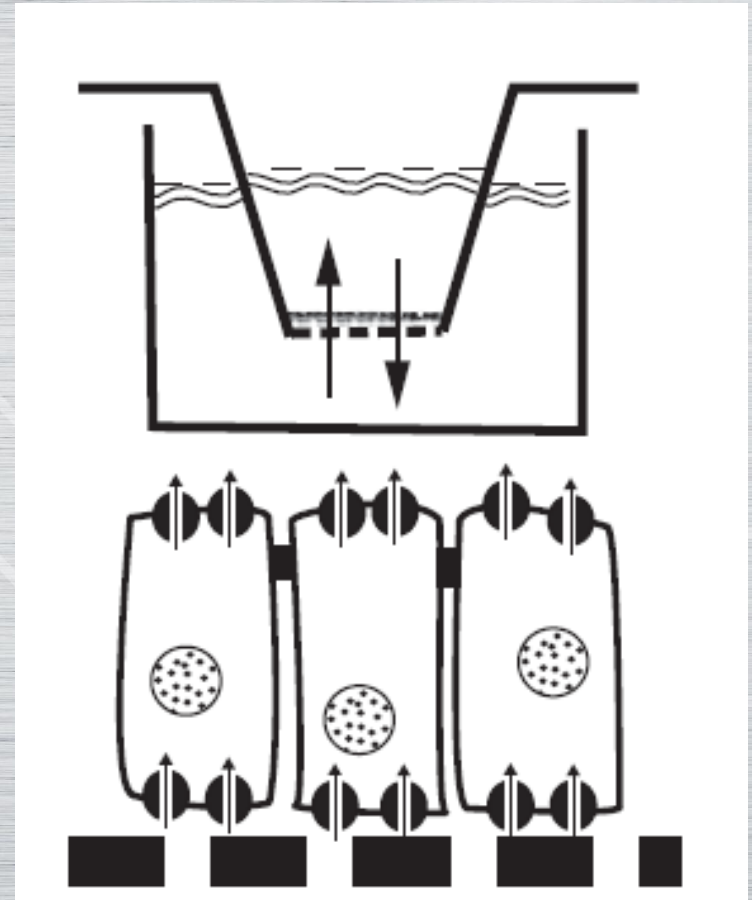
IC<sub>50</sub> values correlate well between BSEP-Sf9 and BSEP-HEK293, however HEK293 have a **superior activity** and assay performance.



# Bidirectional transport assay in polarized cells

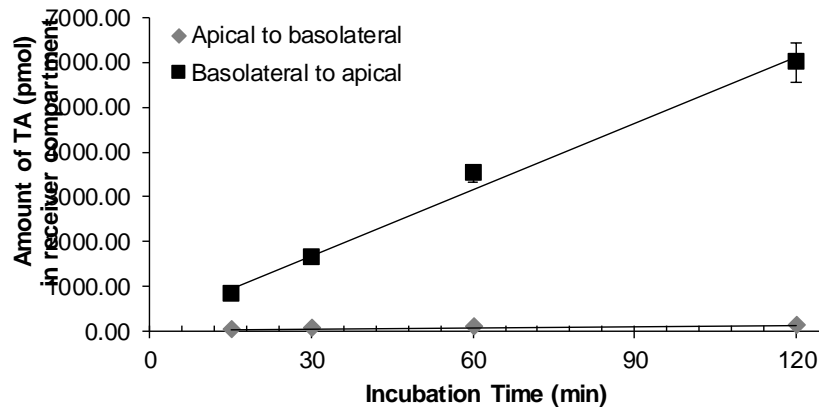
Monolayer assay cells contain ATPase Binding Cassette (ABC) or efflux transporters, several formats available (MDCKII, LLC-PK1, or Caco-2), the cells form a tight barrier, separating two compartments (apical and basolateral).

- ✓ Permeation (or flux) of a compound across the cell monolayer can be measured.
- ✓ Gold standard for modeling permeability
- ✓ Addresses active transport Vs passive diffusion
- ✗ May not be suitable for low permeability compounds
- ✗ Cell culturing conditions can be challenging, leading to inter-lab variability



# Monolayer assay – substrate testing

TA at 20  $\mu$ M in MDCKII-MDR1 monolayers

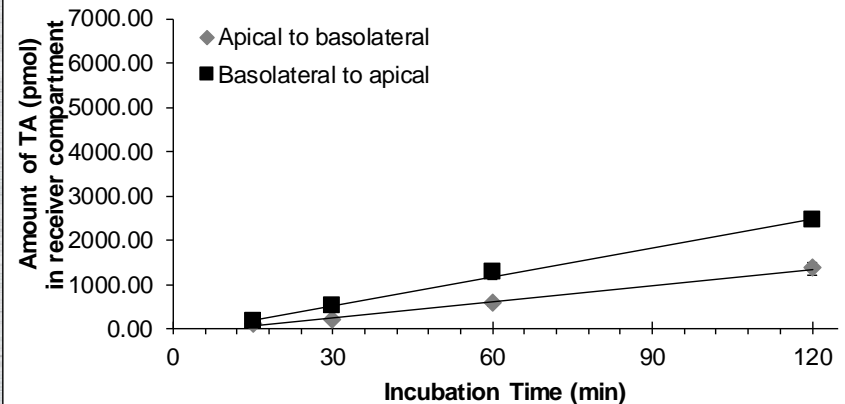


$$P_{app,BA} = 61$$

$$P_{app,AB} = 1.4$$

ER = 44, thus a substrate in the MDR1 expressing monolayer

TA at 20  $\mu$ M in MDCKII monolayers



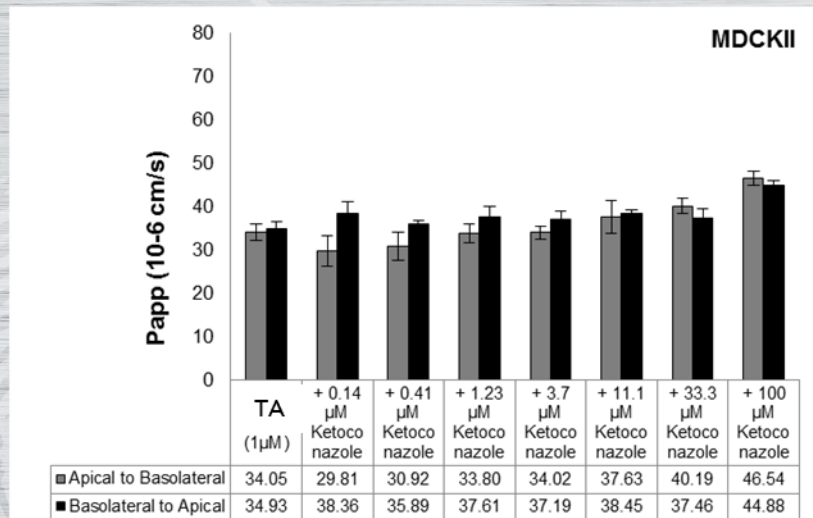
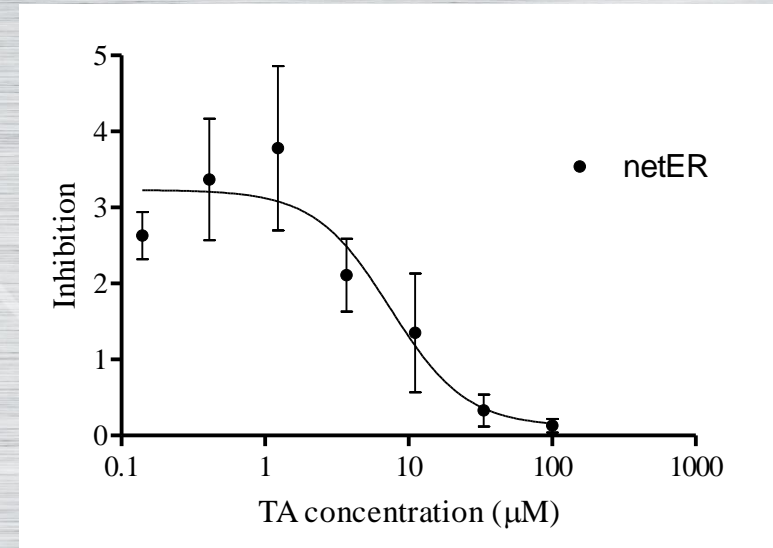
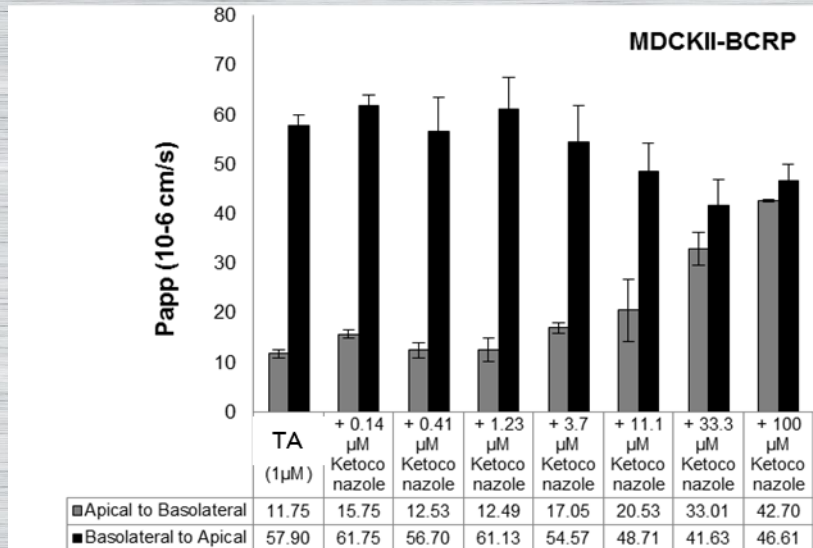
$$P_{app,BA} = 24$$

$$P_{app,AB} = 13$$

ER = 1.8, thus minimal substrate activity of endogenous transporters.



# Monolayer assay – inhibition testing

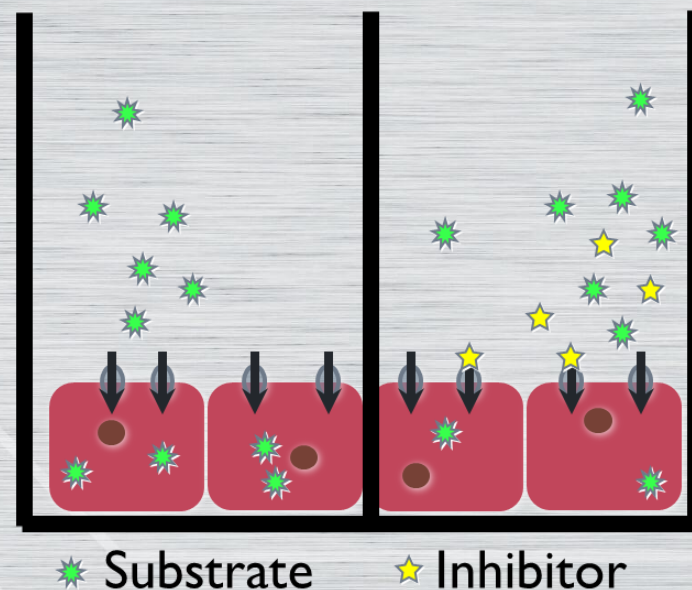


- Inhibition of a probe substrate (prazosin) transport (by BCRP)  

$$= nER_i / nER_{max}$$

# Cellular Uptake Assay

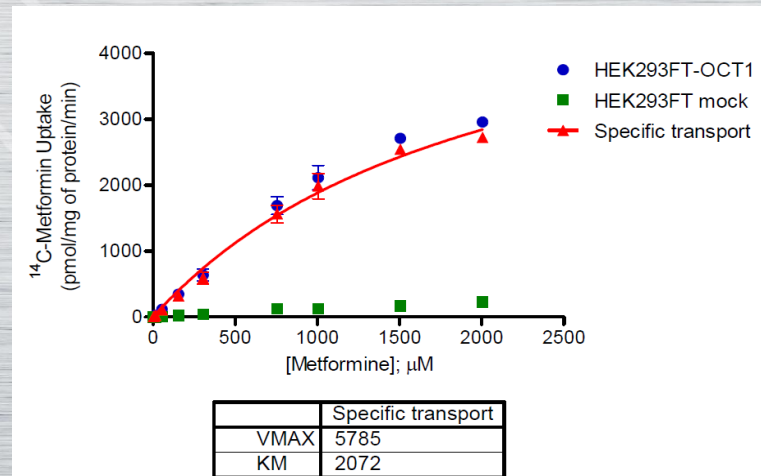
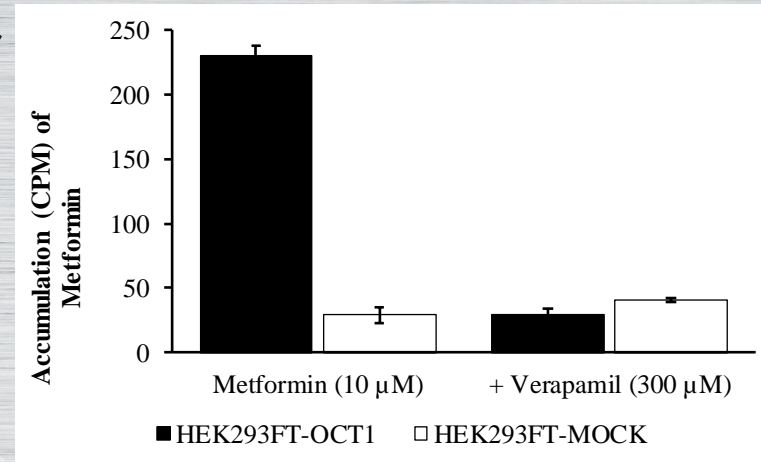
- ✓ Quick, simple, and high throughput
- ✓ Flexible readout (LSC, Fluor, LC/MS)
- ✓ Inhibition assays: works with high, medium, or low permeability compounds
- ✓ Many cell backgrounds available
- ✓ Stable cell lines are generated in-house at SOLVO
- ✗ Substrate assays: high permeability compounds may be challenging





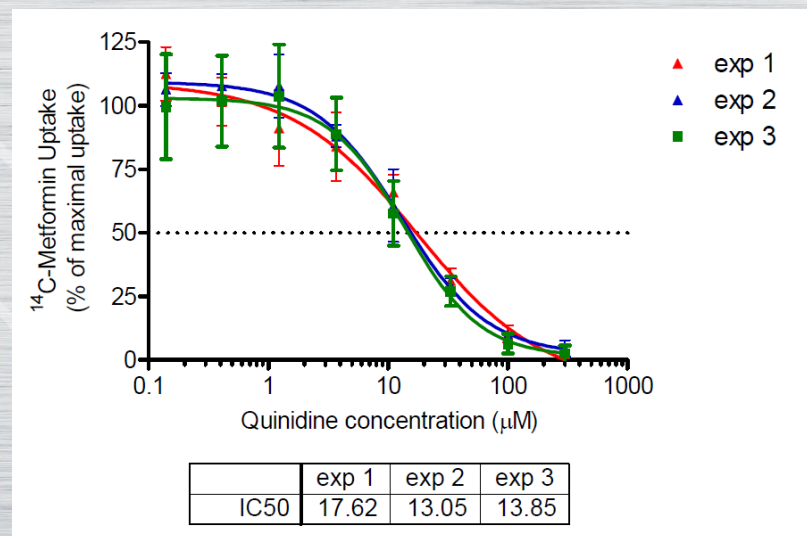
# Uptake substrate assay

- Study accumulation in transporter expressing and non-transporter expressing cells (mock or parental) in the presence and absence of a specific reference inhibitor
- Further enzyme kinetics can be studied (determination of  $K_m$  and  $V_{max}$  ).



# Uptake inhibition assay

- Study inhibition of a known probe substrate in transporter overexpressing and mock/parental cells.
- Use two or seven concentrations of the compound which is tested as inhibitor.
- An  $IC_{50}$  value can be determined (at seven concentrations).
- Alternatively, determine the  $K_i$  value.





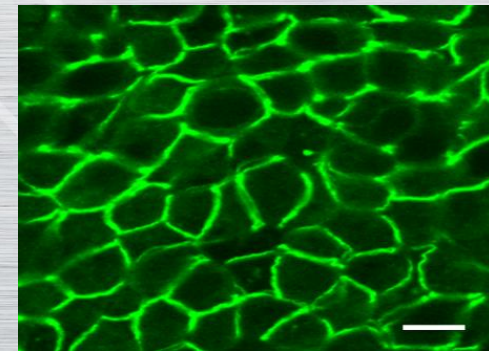
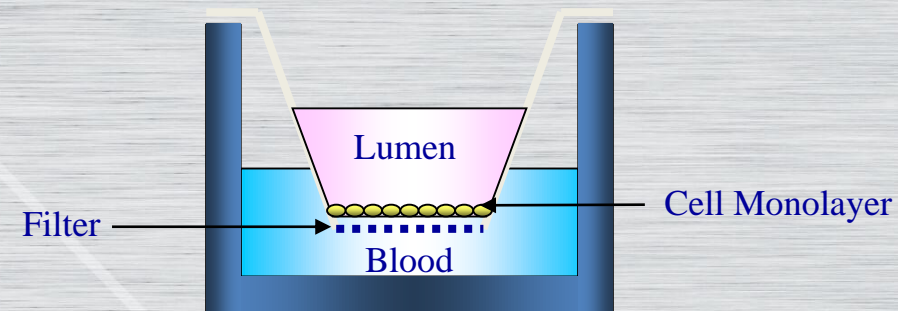
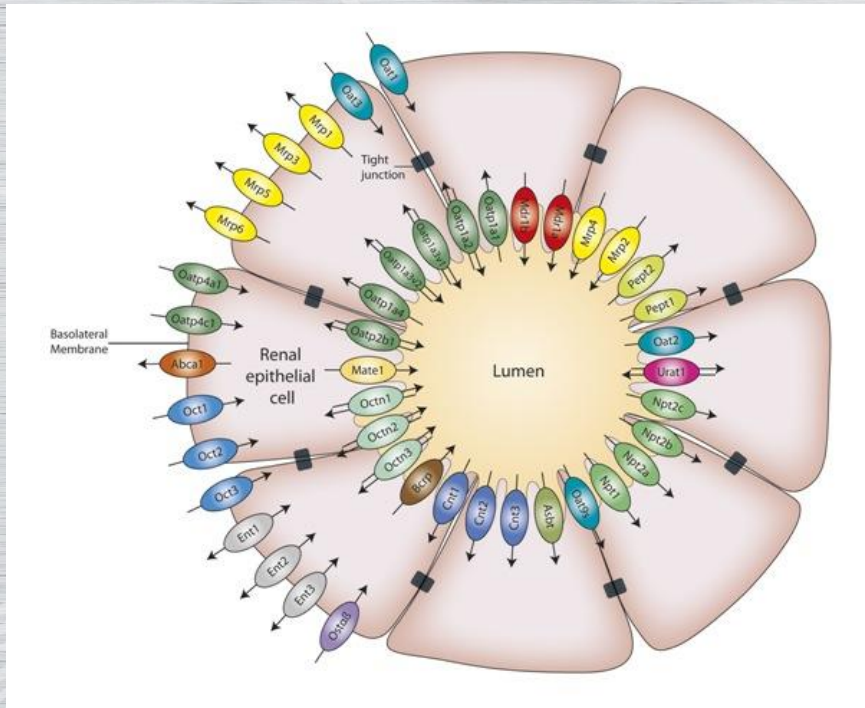
# Assays used to study transporters

Holistic barrier models

- Proximal tubule cells
- Hepatocytes

# aProximate Proximal Tubule Cell Model

Proximal tubule cells isolated and plated <18 hours ex vivo



ZO-1 Expression

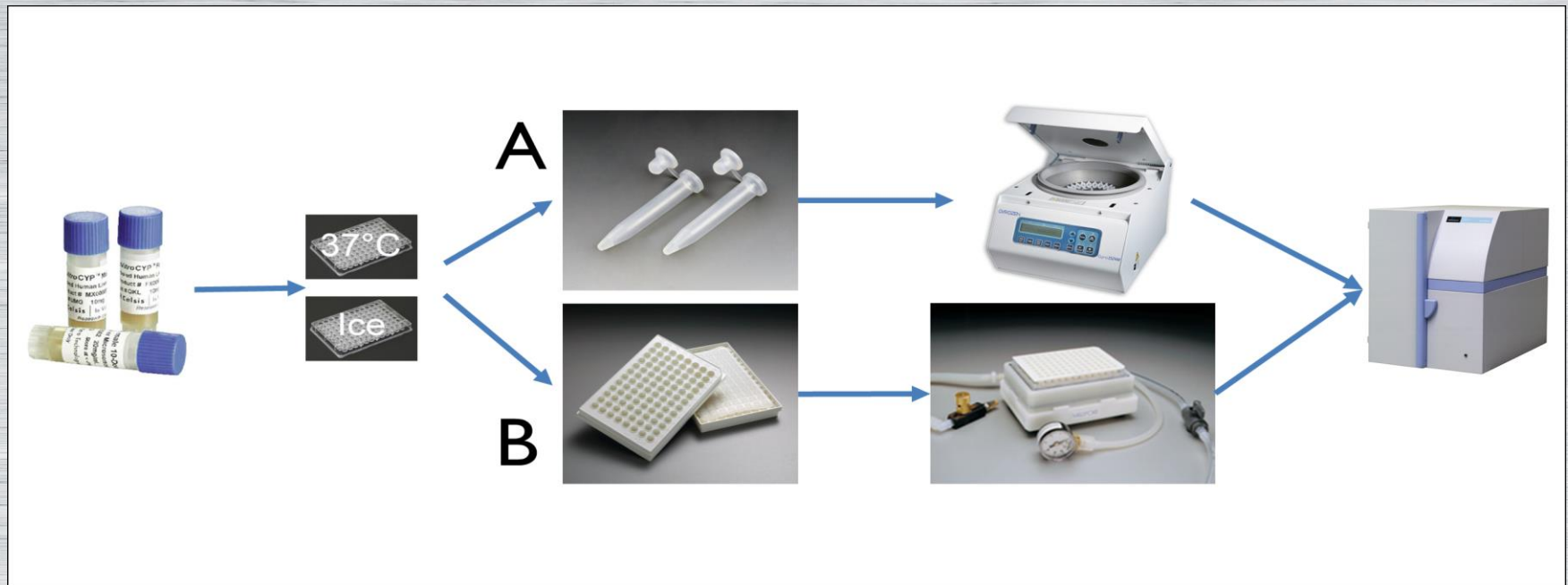
Offered in partnership with

Newcells  
BIOTECH

SOLVO<sup>®</sup>  
BIOTECHNOLOGY  
A CHARLES RIVER COMPANY



# Suspension hepatocyte uptake assay

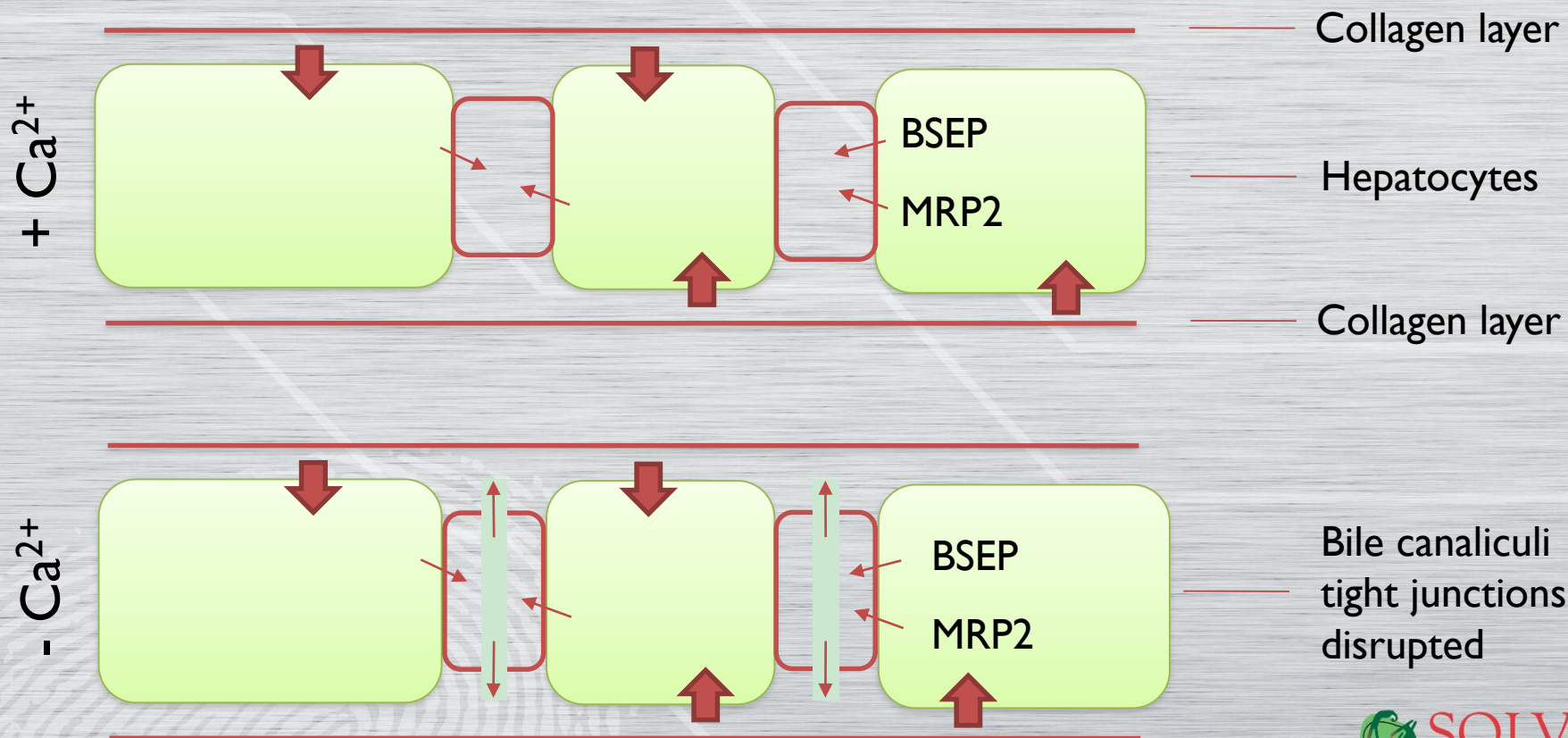


- ✓ Quick and easy assay
- ✓ Hepatocytes can be cryopreserved
- ✓ Good tools for identifying substrate of hepatic uptake transporters
- ✓ Assess the contribution of passive vs active processes
- ✗ Individual transporter can not be determined
- ✗ Not suitable for measuring canalicular efflux
- ✗ Differences between donors (pooled donors)

# Sandwich cultured hepatocytes

## B-Clear<sup>®</sup> Technology

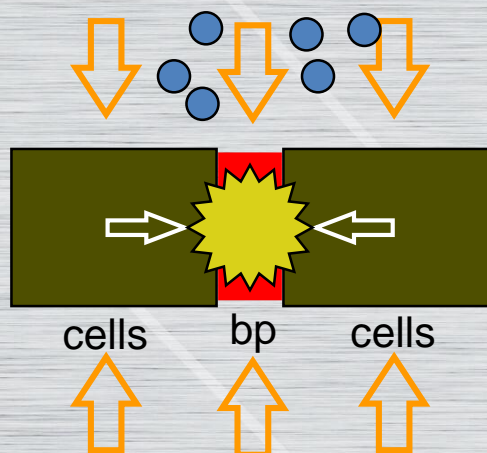
- Determine Biliary Efflux Rate by measuring in the presence and absence of  $\text{Ca}^{2+}$
- Measure hepatic uptake



Offered under license from BioIVT

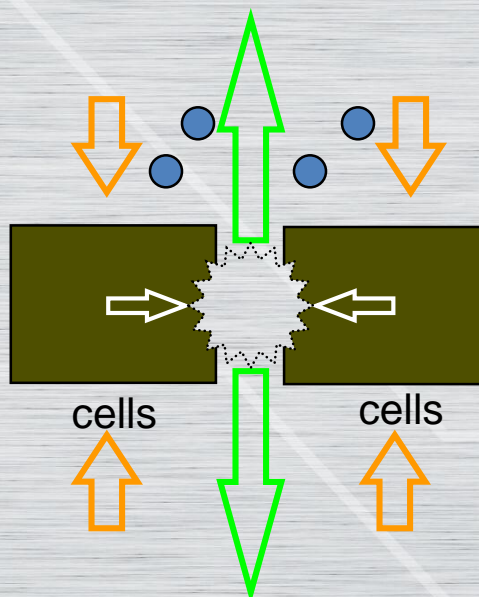


## Plus (+) Buffer (junctions tight)



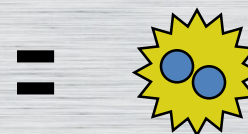
Measures compound inside hepatocytes **AND** in bile pockets, i.e. total taken up

## Minus (-) Buffer (junctions open)



Measures compound only inside hepatocytes, i.e. amount taken up but **NOT** excreted

## Difference

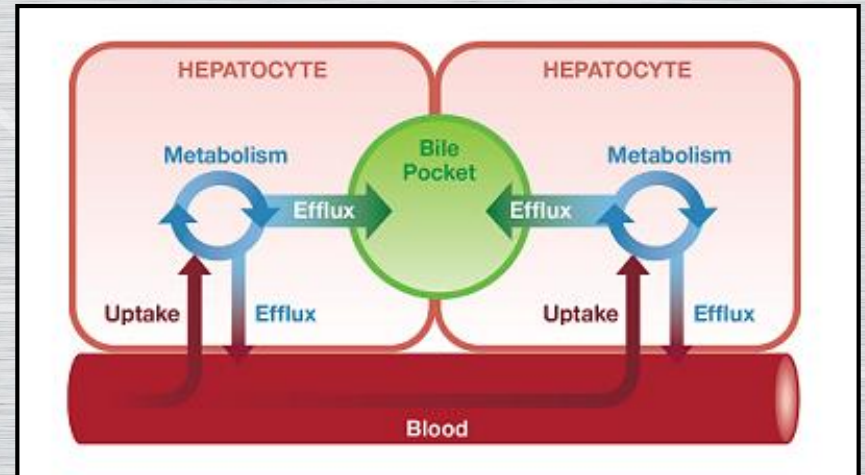


Subtraction – determine amount of compound excreted in bile

# Sandwich cultured hepatocytes

## B-Clear<sup>®</sup> Technology

- ✓ Can measure uptake and efflux (basolateral and canalicular)
- ✓ Cross-species comparison
- ✓ Transporter-metabolism interplay
- ✗ Relatively expensive, low throughput assay
- ✗ Difficult to measure low clearance compounds

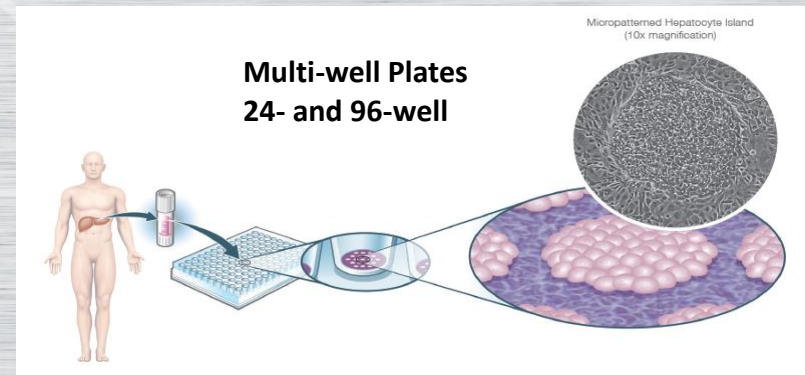




# *In vitro* liver models



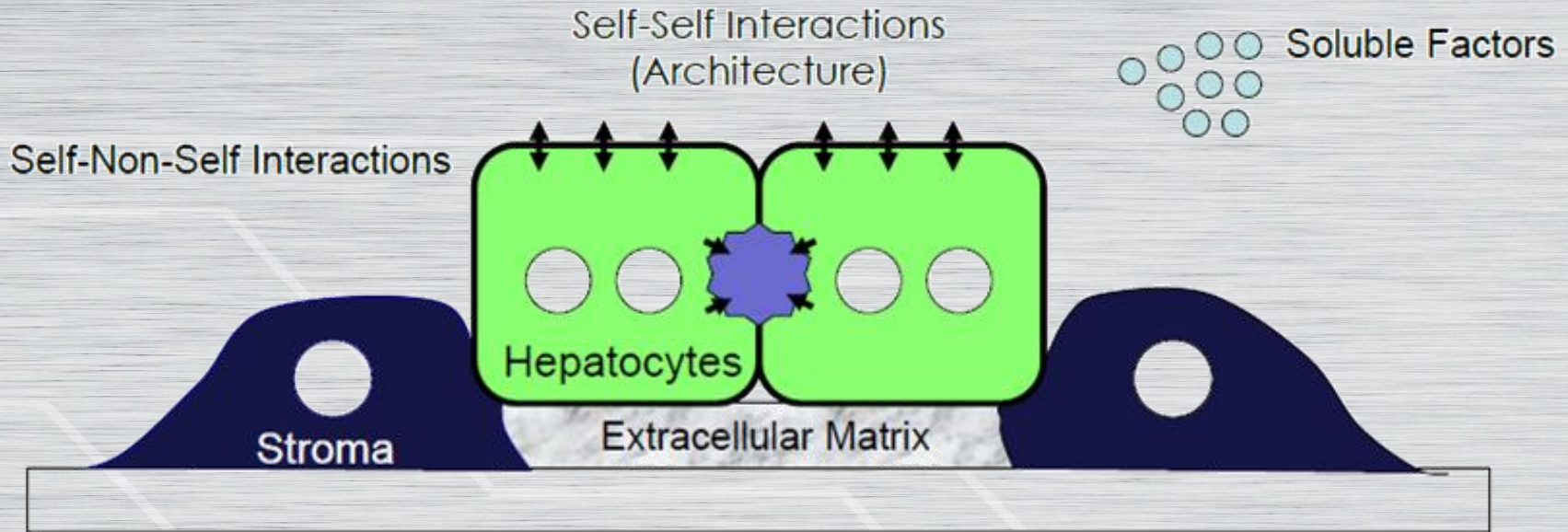
- HepatoPac<sup>®</sup> Micro-patterned Co-Cultures (MPCCs)
- Engineered to Deliver *In Vivo* Like Hepatic Performance
- Morphology and metabolic function remain steady for 28 days or longer



Khetani and Bhatia. Nature Biotech 26(1) 2008

Courtesy from Ascendence Biotechnology, Inc.

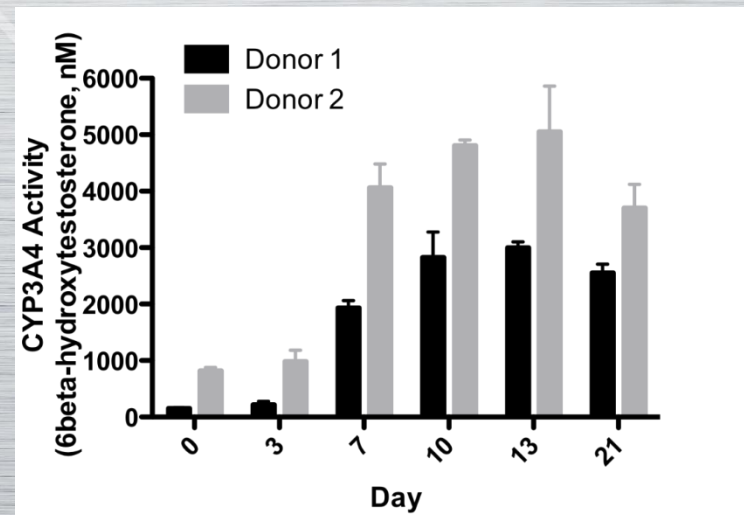
# Micropatterned co-cultures (HepatoPac™)



## Complex architecture of system leads to:

- Improved viability of cells
- Improved functionality of cells
- Robustness and reproducibility of the system

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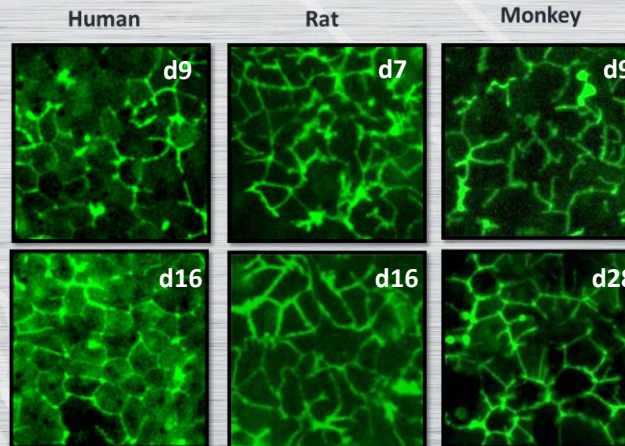
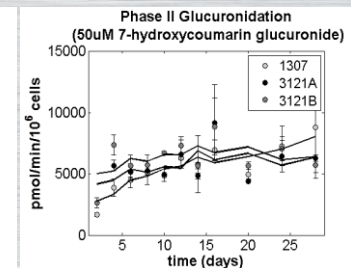
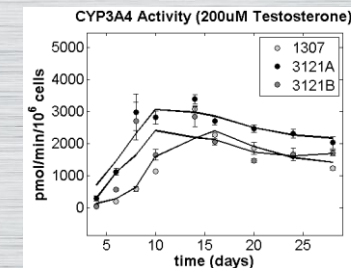
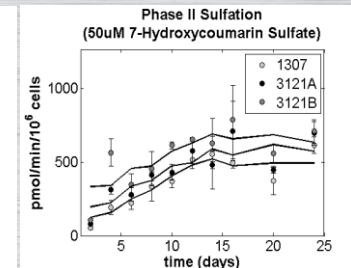
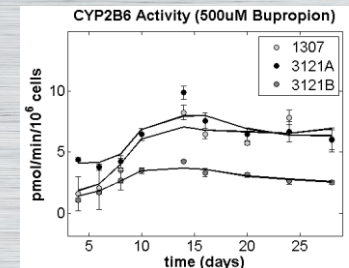




# HepatoPac

Complex *in vitro* systems such as HepatoPac (micropatterned hepatocytes):

- Express apical and basolateral transporters
- Have functional bile-pockets
- Show CYP450 and phase II metabolic activity
- Possess longevity of up to 4 weeks.
- Main uses for:
  - Low turnover clearance (metabolism)
  - MetID
  - Toxicity testing



Fluorescent MRP2 probe substrate CDCF accumulates in bile pockets of human, rat and monkey hepatocytes for up to 28 days in culture.

# Micropatterned co-cultures (HepatoPac™) - Applications

- ✓ Metabolite ID
- ✓ Clearance studies (esp. low clearance compounds)
- ✓ Cross-species comparison
- ✓ Toxicity (esp. long-term incubation)
- ✓ Inflammation (with Kupffer cells – HepatoMune™)
- ✗ Expensive assay system
- ✗ Limited hepatocyte number/plate can make transport experiments challenging



# Metabolism

- Under development at SOLVO:
  - Metabolic stability (Microsomes, S9)
  - CYP inhibition (Microsome, Bactosomes)
  - CYP induction (Hepatocytes)
- Allows running CYP and Transporter studies under one roof.

# SOLVO Advantage

- Deep understanding of transporters
  - 20 years of experience
  - First company to commercialize transporter assays
  - Dedicated R&D team, over 85 transporter publications
  - Flexibility in experimental set-up, from initial screening, through regulatory study design, to detailed kinetic characterization
- In-house reagent generation and assay development
  - Not dependent on external reagent suppliers
  - Thorough understanding of assays and experimental variables
  - Experience with custom assay development in multiple assay formats
  - Widest range of transporter products and services on market



# Science letters

## **UPTAKE TRANSPORTER PREINCUBATION -**

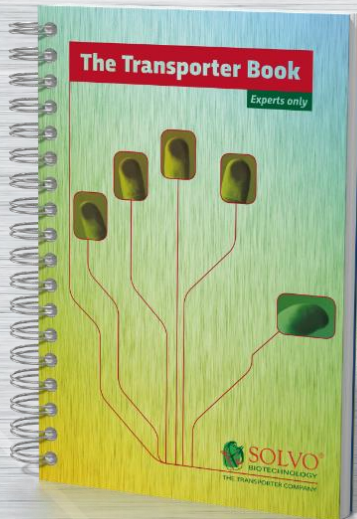
***why it is important and how it works***

### **INTRODUCTION**

Inhibition of a hepatic or renal uptake transporter by a drug (the “perpetrator”) may profoundly alter the pharmacokinetics (PK) of co-administered drugs (the “victims”) that depend on the affected transporter for target access and/or clearance. The classic example of transporter-mediated drug-drug interactions (DDIs) is the interference of cyclosporin A with the OATP-mediated uptake of statins into hepatocytes (Hirano et al., 2006). By inhibiting the active cellular uptake of statins, cyclosporin A restrains their access to their hepatic target and increases exposure of peripheral tissues; thus, it simultaneously limits the efficacy of statins and increases the potential for adverse effects [1].



# Transporter Book



- Why are transporters important?
- What are the expectations of regulatory agencies?
- How to study transporters?
- When should transporters be studied?
- Which transporters to study?

<http://www.solvobiotech.com/knowledge-center/transporter-book-login>



# SOLVO Webinars

Leveraging relationships with key opinion leaders, including:

- Caroline Lee
- Jash Unadkat
- Les Benet
- Gerry Kenna
- Maciej Zamek-Gliszczynski
- David Rodrigues
- Dhiren Thakker
- Oliver Langer
- Colin Brown
- Salman Khetani
- Birk Poller
- Mary Paine
- Ken Brouwer







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# Thank you for your attention!

