

Individual Medicine



Back ground

- Birgitte Søgaard, Divisional Director, H. Lundbeck A/S
- 27 years within industry
 - Therapeutic areas, autoimmune diseases, cancer, diabetes and CNS
- Worked with sales and marketing
- Assay development
- Clinical research phase 1-4
- Translational Medicine



Personalised medicine - perspective for mental disorders

■ Personalised medicine

- General concept and background
- Within mental disorders
- Exemplified with treatment of major depressive disorder
 - Diagnosis and clinical treatments
 - Various approaches to improve through personalisation
 - Results
 - Future perspectives



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Definition

Biological Marker (Biomarker):

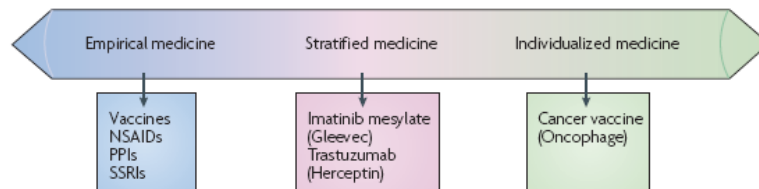
A characteristic that is objectively measured and evaluated as an indicator of normal biological processes, pathogenic processes, or pharmacological responses to a therapeutic intervention

Biomarkers Definition Working Group: Clin Pharmacol Ther 2001; 69: 89-95



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Treatment paradigms

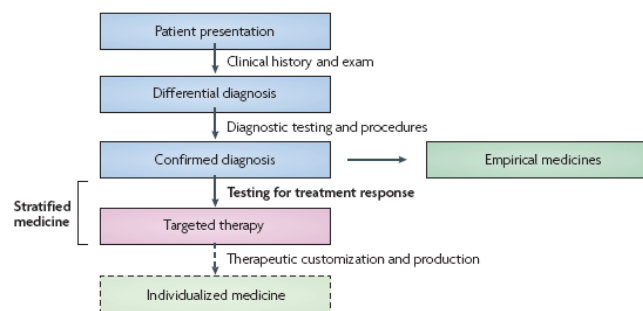


Source: Mark R. Trusheim *et al.*, *Nature Reviews*, Volume 6, April 2007



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Decision Flow



Source: Mark R. Trusheim *et al.*, *Nature Reviews*, Volume 6, April 2007



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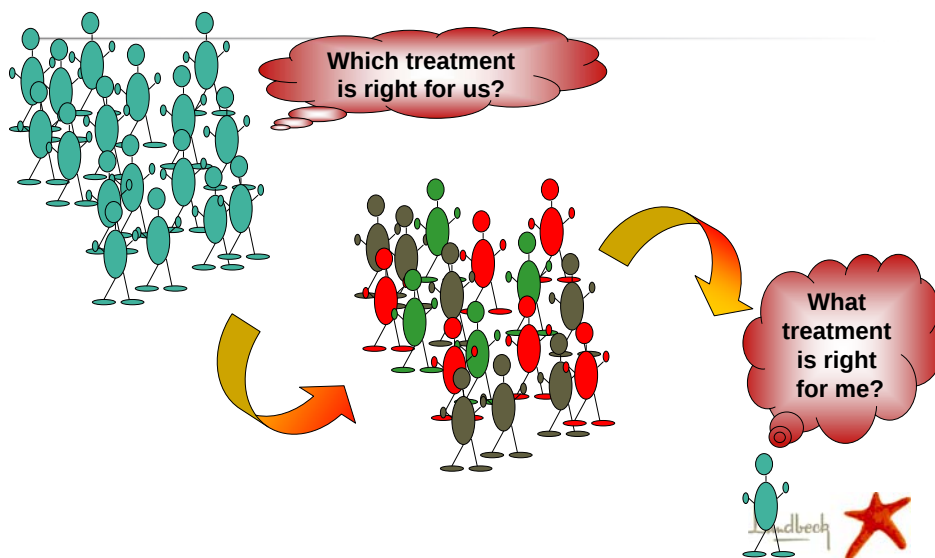
Diseases biological undefined

- Most diseases are multifactorial diseases
- Most diseases are not phenotypically well described
 - Clinical description is based on subjectivity



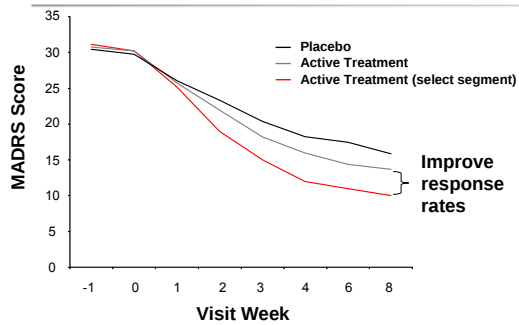
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Predicting Treatment Response

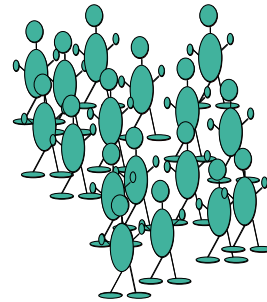


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Expected Benefits



Improve
response
rates



Expected Benefits

- Enriched groups
- Improved efficacy
- Enlarge therapeutic window?



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Perspectives for treatment of mental disorders

■ Personalised treatment

- Relevant for treatments where
 - Underlying disease variability reflecting multiple aetiology or
 - Indistinguishable clinical presentation for biologically distinct conditions
 - Multiple relevant targets for intervention
 - Different ADME characteristics, toxicity or tolerability of therapeutic regimens
 - Adaptiveness of disease leading to treatment resistance
 - Multiple treatment options with heterogeneous responses
 - A logistically and medically acceptable clinical biomarker (to be identified)
- Extent of individualisation
 - Per individual
 - Per (sub) population sharing a feature in common
 - Per diagnosis + one or more specific marker (e.g. genotype)



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Depression as an example

■ Diagnosed based on the following symptoms

- Depression is a common mental disorder:
 - Sadness, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy and poor concentration.
- May be chronic or recurrent
 - Substantially impairing an individual's ability to cope with daily life
 - At its most severe, depression can lead to suicide (DSM IV)

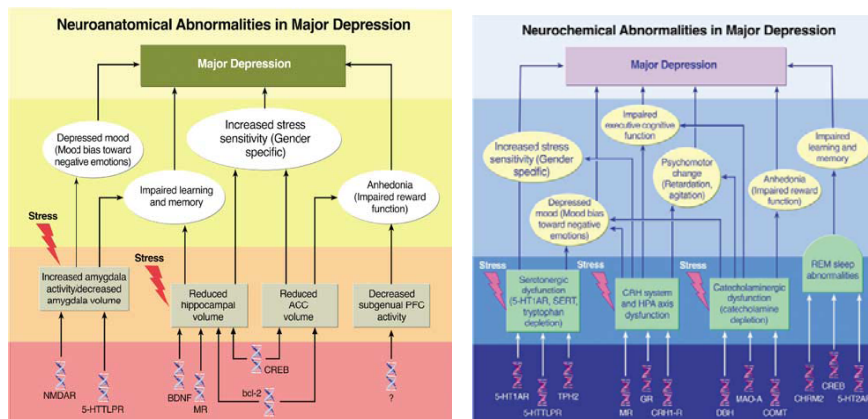
■ Social consequences

- Disability
 - Leading cause measured by YLDs
 - The 4th leading contributor to the global burden of disease (DALYs) in 2000
 - By the year 2020, projected to reach 2nd place of the ranking of DALYs calculated for all ages, both sexes
- Treatment
 - Antidepressant medications and some forms of psychotherapy are effective for approx. 60 %
 - Side effects relatively common
 - Relapse common



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Endophenotypes for Major Depression



Hasler, Neuropsychopharmacol 2004



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Potential biomarkers within depression

- **Genotype**
 - 5HT* transporter, 5HT1A
- **Gene expression**
 - CREB, IL1, IL6, arrestine.....
- **Neuro-endocrine markers/responses**
 - Cortisol, CRH, ...
- **Metabonomics**
 - Neurotransmitter pattern
- **Neuronal**
 - Imaging: PET, fMRI, MRI-volumetric (hippocampus)
 - EEG

* 5HT= serotonin



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Perspectives for depression

- **Diagnostic**
 - Identify patient population that is more homogeneous
 - Identify patient population that obtain better response with specific treatment
 - No one biomarker believed to be sufficient, but set of markers supplemented with clinical observations
- **Treatment optimisation**
 - Predict which pharmacological treatment optimal for individual / subsegment of depressed population
 - Predict alternative and better treatment if first line not optimal
- **Translational medicine**
 - Use identified markers to identify new drug target or predictive animal models

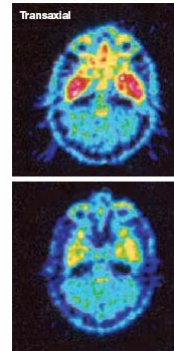


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Research and Development at Lundbeck

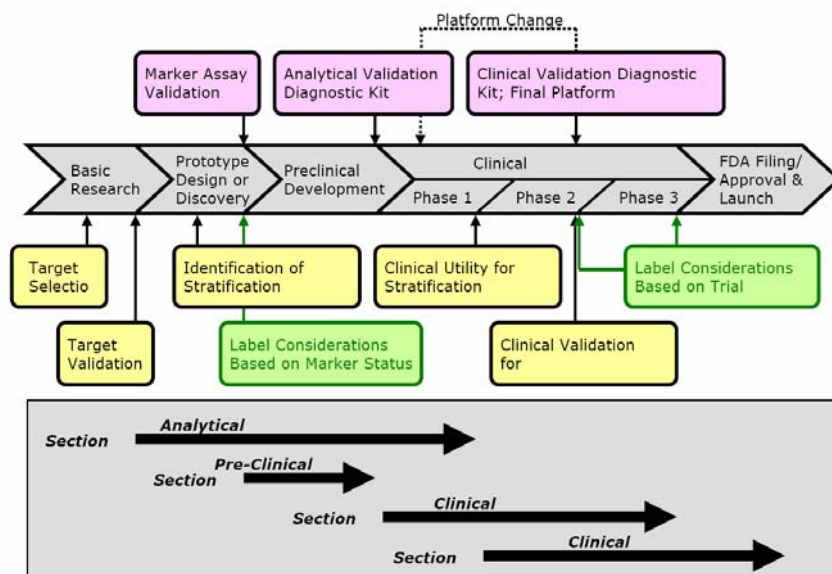
■ Several approaches across various studies

- PET, fMRI
- QEEG
- Genotyping
- Mapping endophenotype (patient history)
- Gene expression



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Drug-Device Co-Development Process (FDA Concept Paper)



Example from Lundbeck's own research

■ Focus on gene expression

- Assessment of mRNA in peripheral leukocytes
- Methodology development (qPCR*)
- Sampling from healthy volunteers and patients diagnosed with MDD
 - "Diagnostic" approach
- Sub-segmentation of patients based on
 - Baseline characteristics (biomarkers and/or clinical symptoms)
 - Treatment response (according to treatment?)
 - Risk of relapses
- Identify new treatment approaches / targets
 - Based on gene expression pattern representing various (new) pathways
 - Generate new hypothesis for novel drug treatments

* quantitative Polymere Chain Reaction



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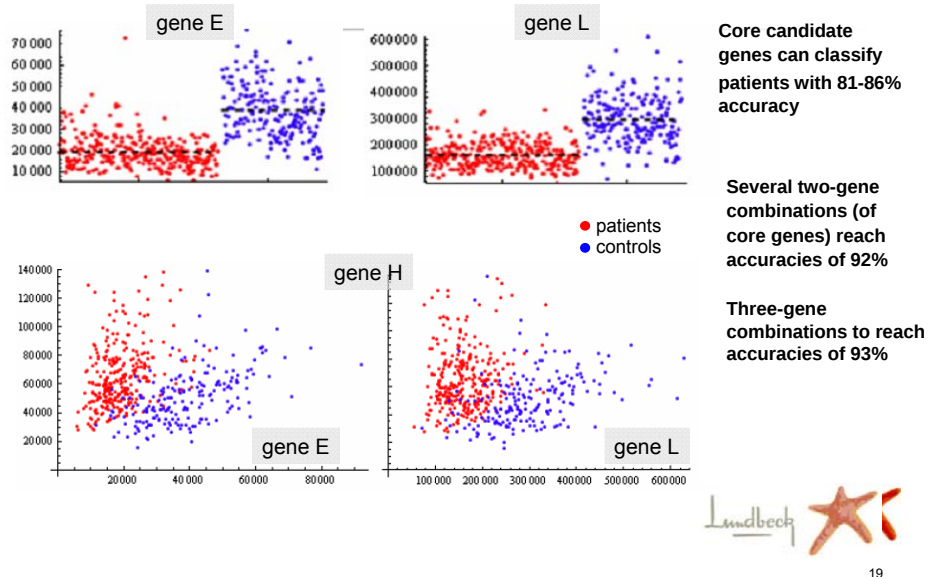
Focused Gene Panel as Blood Biomarkers

■ Selection of core genes

- Related to therapeutic area
- Reliably measurable by qPCR in human blood leukocytes

Gene	Pathway	In house	Literature vs in house
gene A	transmitter-related	up	✓
gene B	transmitter-related	up	✓
gene C	transmitter-related	down	∅
gene D	signaling	down	✓
gene E	signaling	down	✓
gene F	signaling	up	—
gene G	signaling	up	✓
gene H	signaling	up	✓
gene I	signaling	up	✓
gene J	signaling	down	✓
gene K	signaling	no change	✓
gene L	signaling	down	✓
gene M	signaling	down	∅
gene N	signaling	down	✓
gene O	signaling	up	✓
gene P	signaling	up	∅
gene Q	signaling	down	✓
gene R	signaling	up	—
gene S	signaling	up	✓
gene T	signaling	down	✓
gene U	metabolism	up	∅
gene V	metabolism	up	∅
gene W	metabolism	up	✓
gene X	metabolism	up	✓
gene Y	signaling	down	✓
gene Z	signaling	no change	∅
gene ZA	signaling	up	✓
gene ZB	signaling	up	✓
gene ZC	signaling	up	✓

Transcription classifying Depression Segment



Next steps

- **Extended pool of genes included**
- **Look for subsegmentation of patients**
 - Clinical symptomatology
 - Pathways involved
 - Treatment response
- **Back translation to animal models**
 - New targets identification
- **Translation – biomarker development**
 - Co-diagnostic
 - Surrogate marker?



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Reading

- ICH guidance no 17
- ICH Topic M 3 (R2)
Non-Clinical Safety Studies for the Conduct of Human Clinical Trials and Marketing Authorization for Pharmaceuticals
- FDA Critical Path Documents
- FDA and EMEA homepages



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