

# Targeted Polymeric Nanotherapeutics

Jeff Hrkach

2008 U.S. Frontiers of Engineering Symposium

September 18, 2008

*Dramatically improving lives with breakthrough targeted therapies*

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# Outline

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- Background on drug delivery systems and products
- Starting up a drug delivery start-up
- Transferring and translating academic innovation from technology platform to specific product candidates
- The pathway to drug approval

# Drug delivery systems

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- Systems designed and engineered to administer drugs in a controlled fashion so that an optimum amount of drug reaches the target site in an optimum timeframe
- Accomplished by changing drug formulation or route of delivery to improve drug performance (efficacy and/or safety)

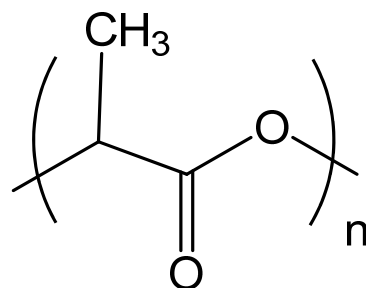
# Drug delivery systems - examples

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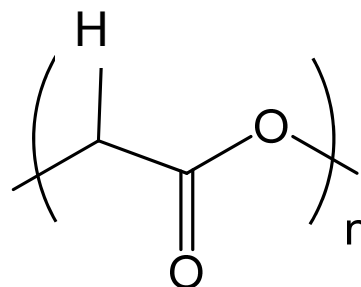
- Oral controlled release
  - Sinemet CR ®
- Transdermal
  - Scopolamine
- Injectable particles
  - Risperdal consta ®
  - Doxil ®
- Insulin
  - fast onset (LisPro), medium-acting (NPH), long-acting (glargine)
  - Inhaled insulin

# Degradable polyesters – PLA and PLGA

Lactide/lactic acid



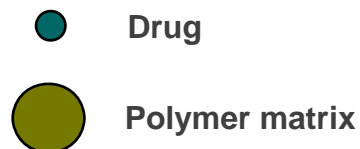
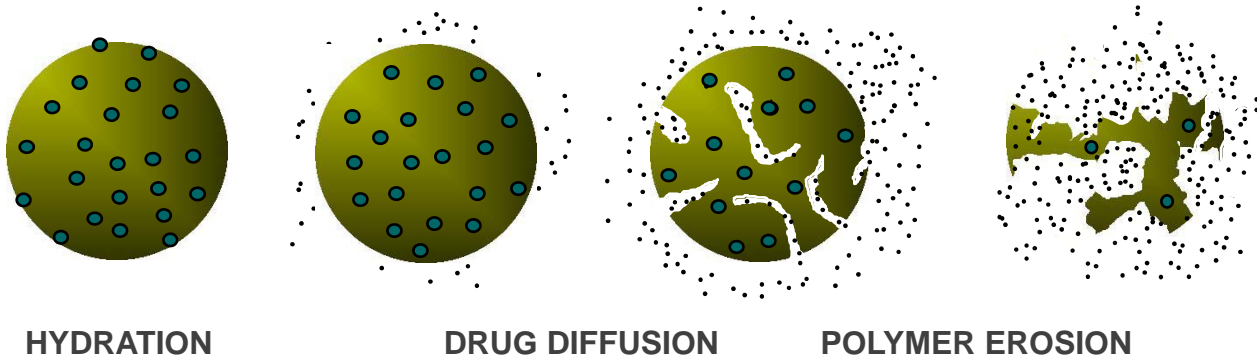
Glycolide/glycolic acid



- Commonly used biocompatible and biodegradable medical polymers
  - **Surgical/Implantable Use**  
Sutures, orthopedics, bone plates
  - **Extended Release Applications**

Zoladex®	(AstraZeneca)
Lupron Depot®	(TAP)
RISPERDAL® CONSTA®	(Janssen/Alkermes)
VIVITROL®	(Alkermes / Cephalon)

# Mechanism of Drug Release



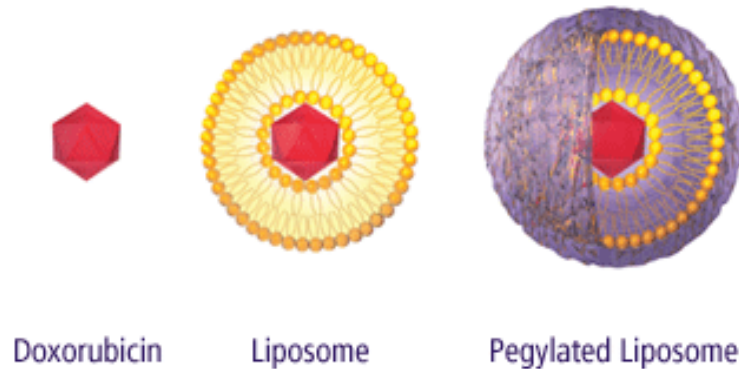
# RISPERDAL® CONSTA®



- First and only long-acting atypical antipsychotic
  - IM injection every two weeks versus daily treatment
  - Approved for schizophrenia
- Manufactured by Alkermes; marketed by Johnson & Johnson

# DOXIL®

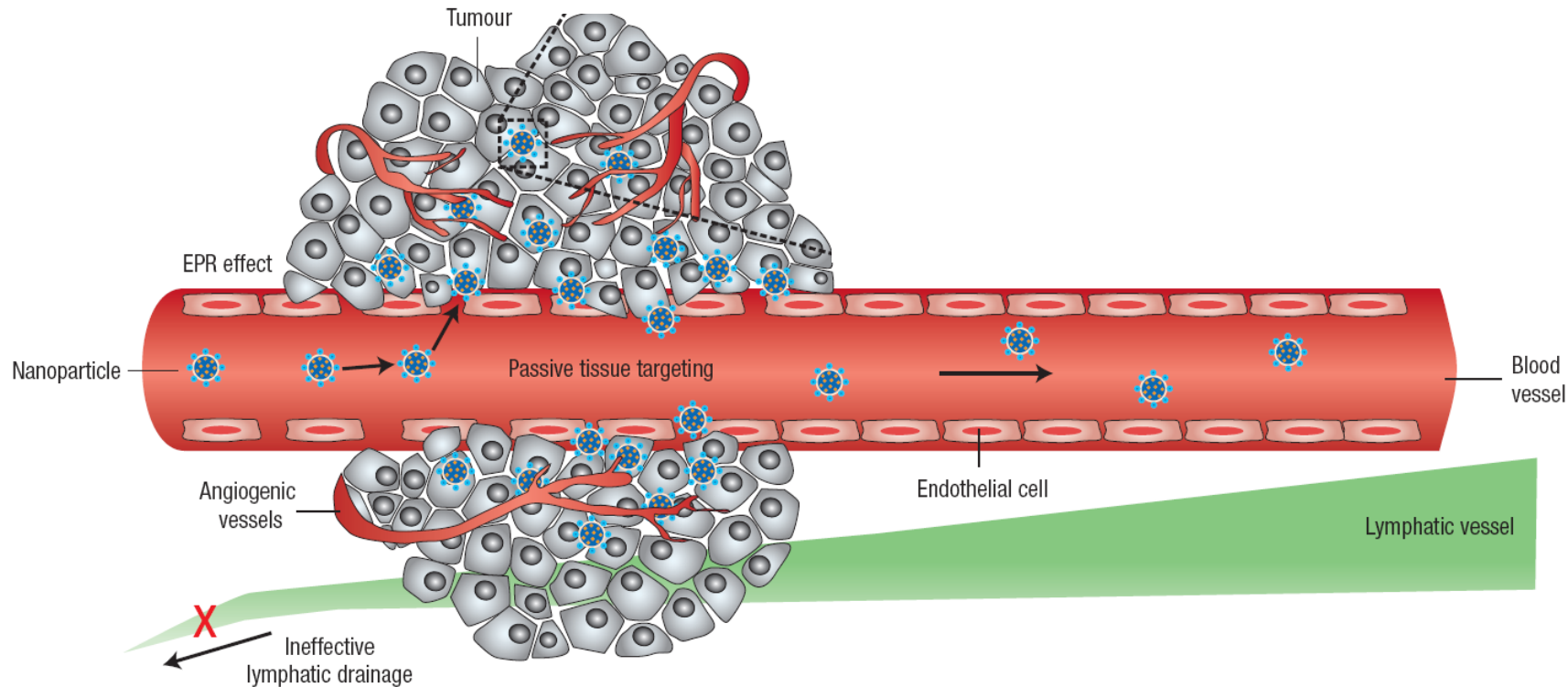
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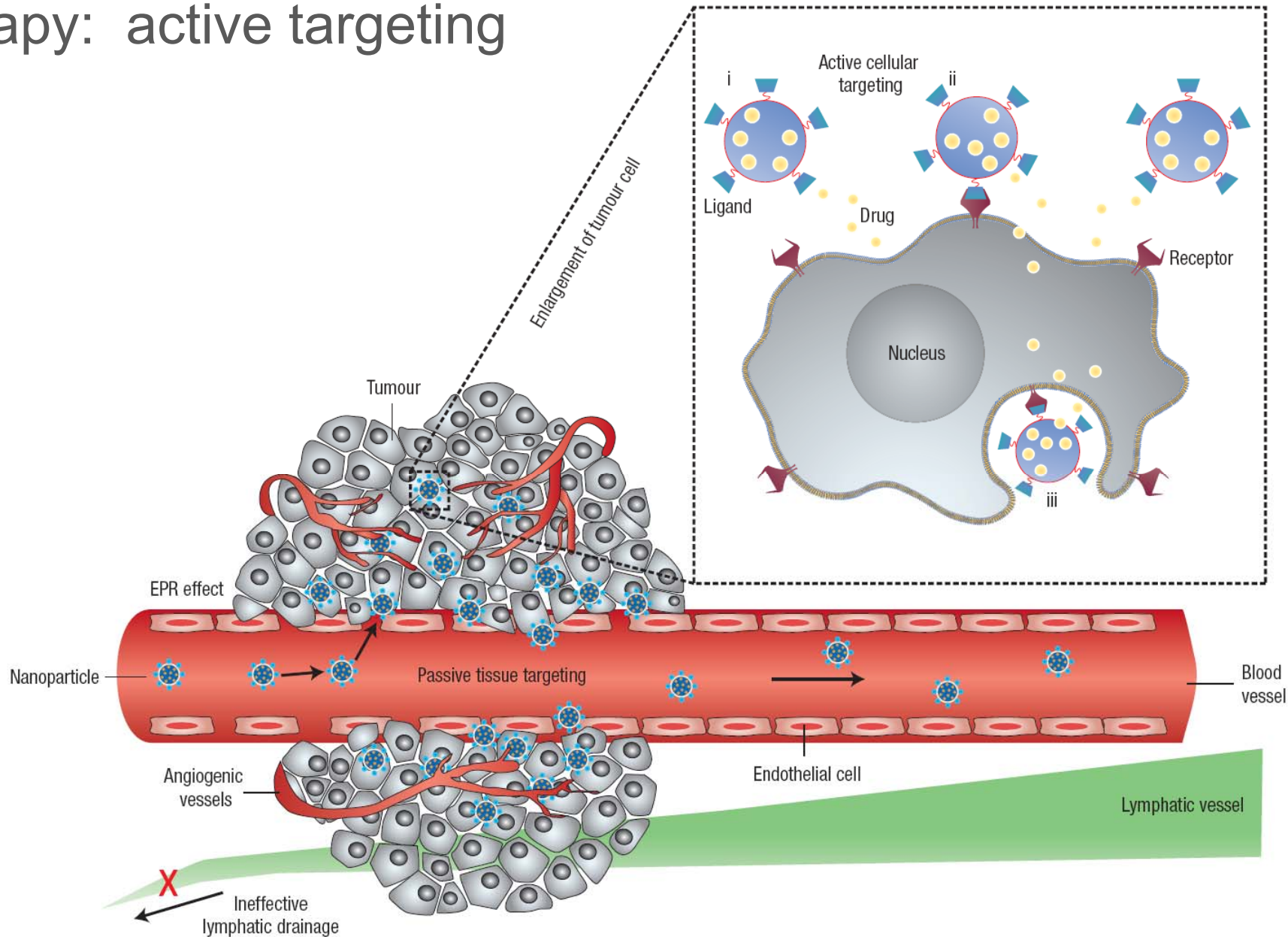
- Liposomal nanoparticle doxorubicin formulation prescribed for ovarian cancer, AIDS-related Kaposi's Sarcoma and multiple myeloma
- Administered as IV infusion once every four weeks
- Long-circulating liposomes allow more time for drug to reach tumor



# Nanocarriers as emerging platform for cancer therapy: passive targeting



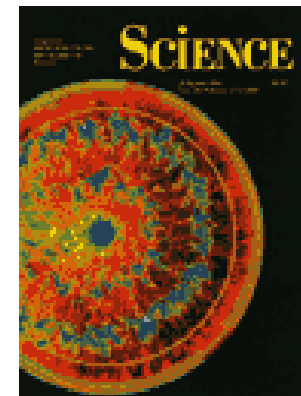
# Nanocarriers as emerging platform for cancer therapy: active targeting



# Biodegradable Long-Circulating Polymeric Nanospheres

Ruxandra Gref,\* Yoshiharu Minamitake,†  
Maria Teresa Peracchia,‡ Vladimir Trubetsky,§  
Vladimir Torchilin,§ Robert Langer||¶

SCIENCE • VOL. 263 • 18 MARCH 1994



Nanotechnology for biomaterials  
engineering: structural  
characterization of amphiphilic  
polymeric nanoparticles by  $^1\text{H}$  NMR  
spectroscopy

Jeffrey S. Hrkach, Maria Teresa Peracchia\*, Avi Domb†,  
Noah Lotan† and Robert Langer

*Biomaterials* 18 (1997) 27–30



## Drug delivery and targeting

Robert Langer

NATURE | VOL 392 | SUPP | 30 APRIL 1998



# Nanoparticle-Aptamer Bioconjugates: A New Approach for Targeting Prostate Cancer Cells

Omid C. Farokhzad,<sup>1,2</sup> Sangyong Jon,<sup>3</sup> Ali Khademhosseini,<sup>4</sup> Thanh-Nga T. Tran,<sup>2</sup> David A. LaVan,<sup>2</sup> and Robert Langer<sup>2,4,5,6</sup>

CANCER RESEARCH 64, 7668–7672, November 1, 2004

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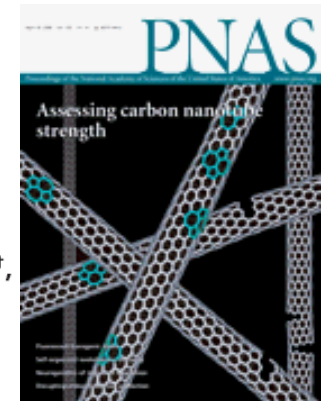


## Targeted nanoparticle-aptamer bioconjugates for cancer chemotherapy *in vivo*

Omid C. Farokhzad<sup>\*†‡§</sup>, Jianjun Cheng<sup>\*†||</sup>, Benjamin A. Teply<sup>\*†||</sup>, Ines Sherifi<sup>\*†||</sup>, Sangyong Jon<sup>\*\*</sup>, Philip W. Kantoff<sup>††</sup>, Jerome P. Richie<sup>††</sup>, and Robert Langer<sup>†§||</sup>

PNAS | April 18, 2006 | vol. 103 | no. 16 | 6315–6320

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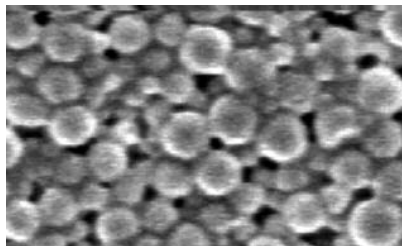
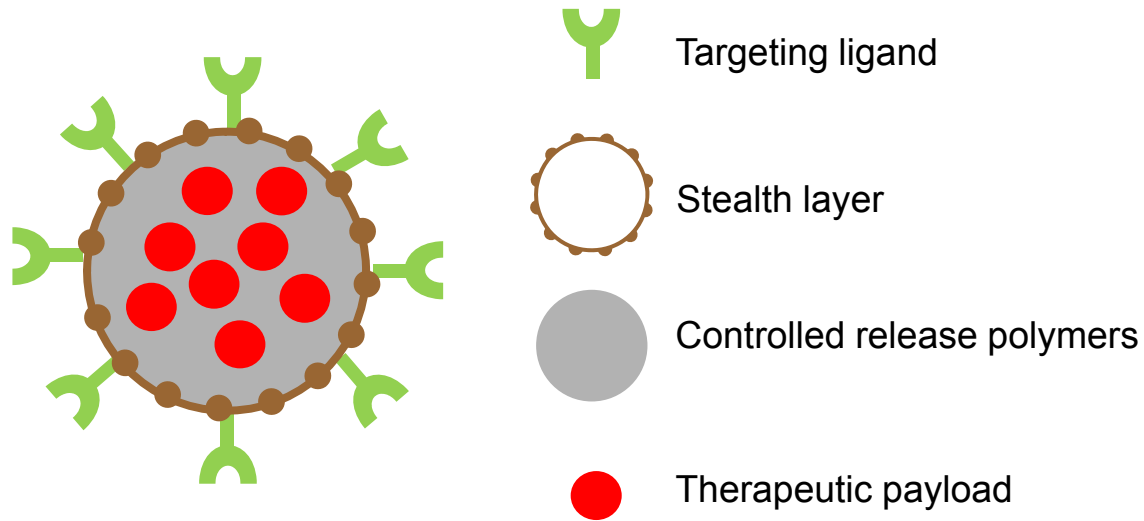
## Precise engineering of targeted nanoparticles by using self-assembled biointegrated block copolymers

Frank Gu<sup>\*†</sup>, Liangfang Zhang<sup>\*</sup>, Benjamin A. Teply<sup>\*\*</sup>, Nina Mann<sup>\*</sup>, Andrew Wang<sup>††</sup>, Aleksandar F. Radovic-Moreno<sup>\*†</sup>, Robert Langer<sup>\*†§</sup>, and Omid C. Farokhzad<sup>†§</sup>

2586–2591 | PNAS | February 19, 2008 | vol. 105 | no. 7



# Targeted nanoparticles





# BIND overview

Founded in 2006



**Robert Langer, ScD**  
Institute Professor, MIT



**Omid Farokhzad, MD**  
Assistant Professor, Harvard

Raised \$18.5M venture funding 2007



- ▶ Large IP portfolio from MIT/Harvard
- ▶ 22 employees
- ▶ 11,000 SQF lab/office facility
- ▶ \$2.1M in NIST ATP & SBIR grants

## **Oncology program**

- ▶ File IND mid-2009

## **CV Program**

- ▶ Pharma collaboration

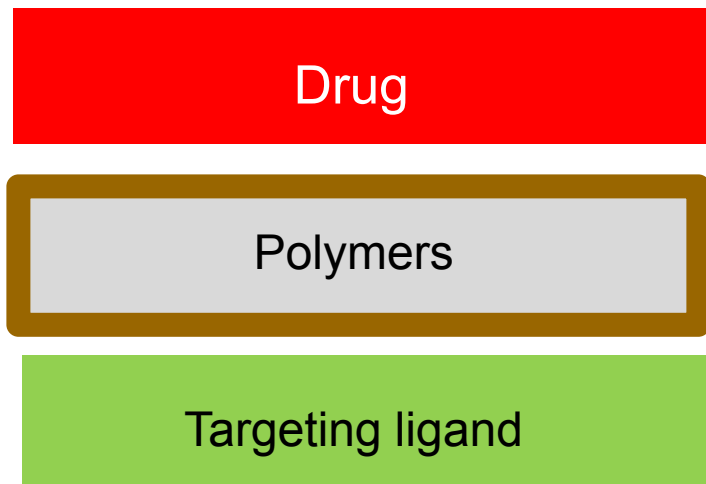
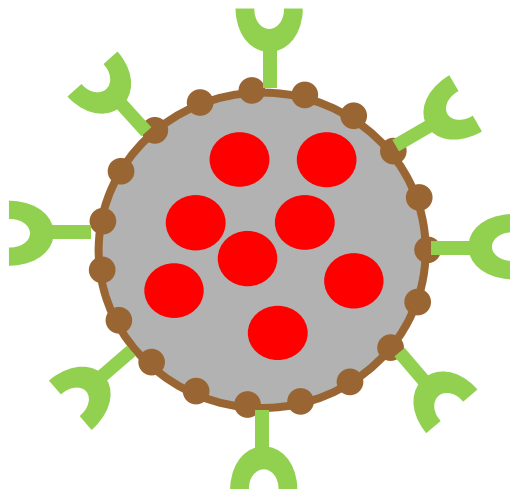
# Product candidate opportunities

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- Several cancers have highly expressed molecules on their cell surfaces that can be selectively targeted
- Targeting will significantly increase drug exposure at the tumor site
- Targeted nanotherapeutics will be better tolerated and may allow more frequent dosing
- Sustained high levels of drug within tumor cells will inhibit the development of resistance and may overcome resistance

# Targeted cancer nanotherapeutics

- Goals
  - Optimally engineer nanoparticles to maximize drug targeting to tumors
  - Significantly improve quality of life and increase survival for cancer patients





# Key steps to translating academic innovation into clinical drug development

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## ● CMC

- Formulation development and optimization
- Process development and optimization
- Analytical method development and qualification
- Scale-up
- Toxicology study materials manufacturing
- cGMP clinical study materials manufacturing

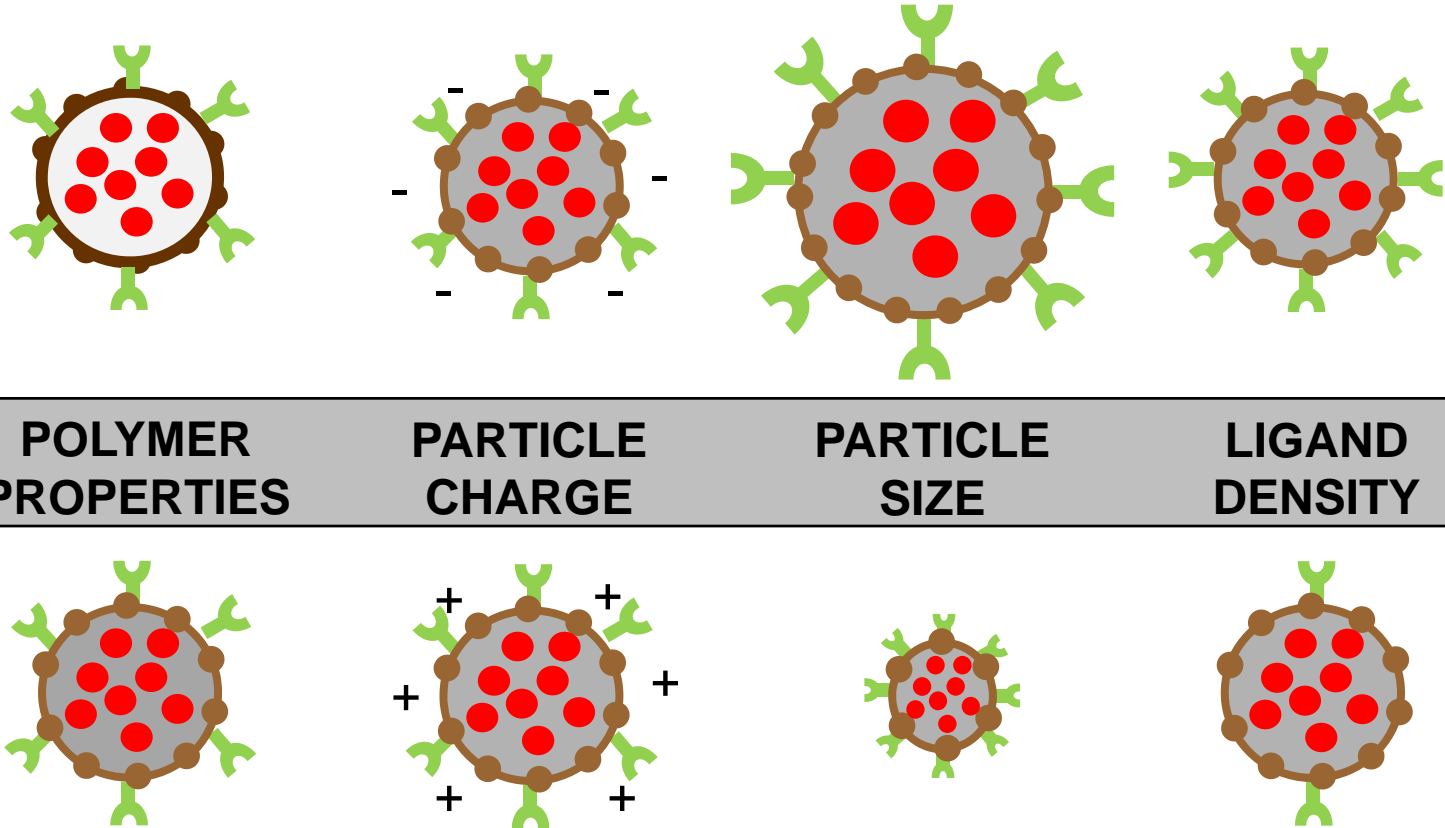
## ● Pre-clinical

- In vitro assay screening
- Non-GLP in vivo studies
  - Efficacy, PK, biodistribution
- GLP toxicology studies

## ● Clinical

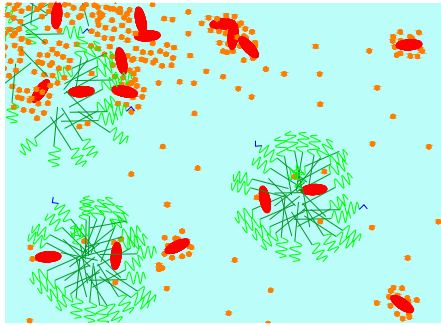
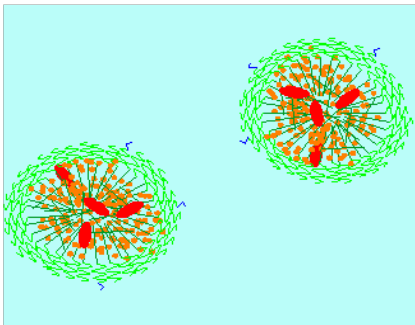
- Study design
  - Patient population
  - Dose
  - Dosing schedule

# Combinatorial optimization

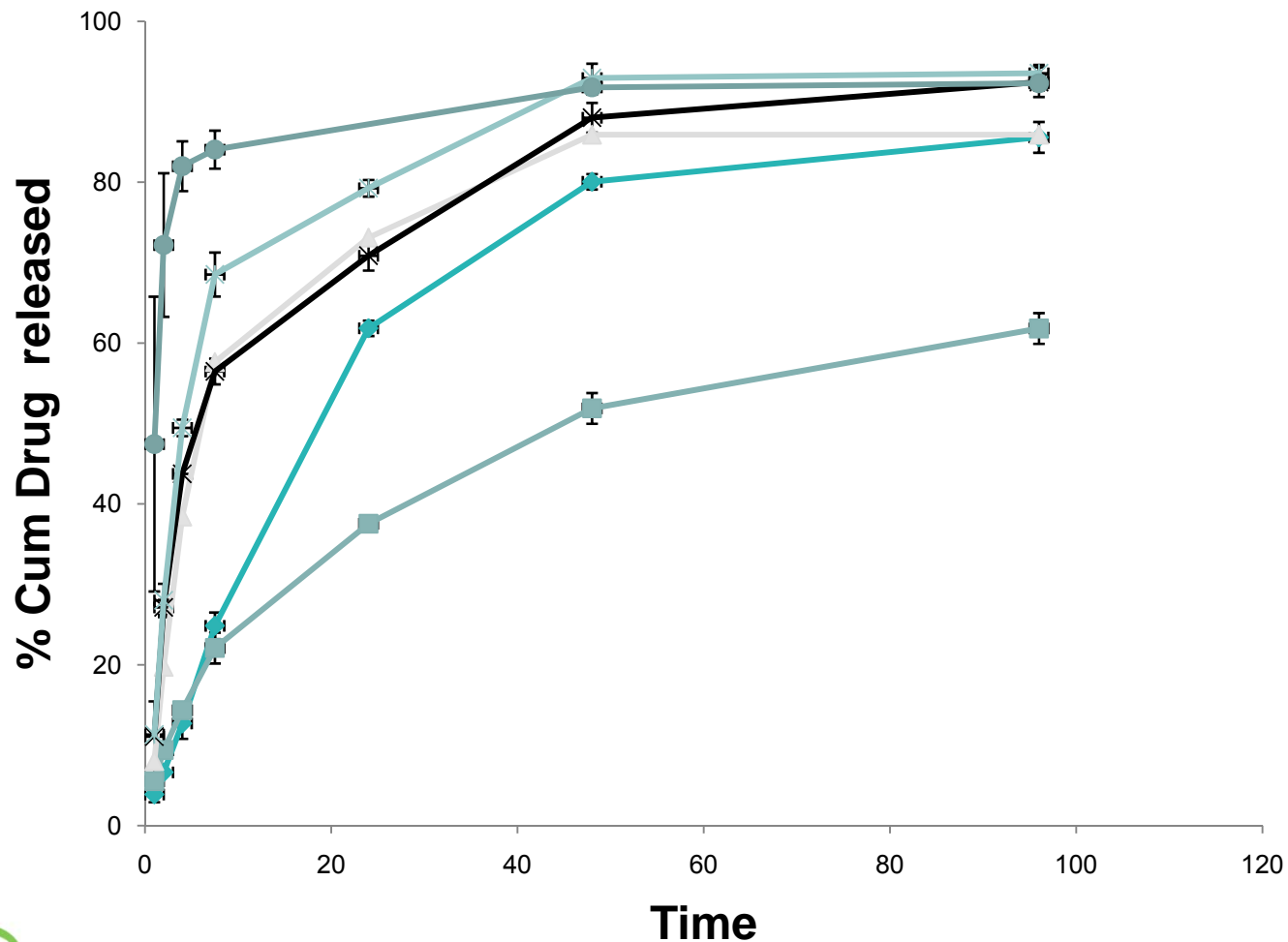


**BIND's combinatorial technology allows for precise and reproducible engineering of optimized nanoparticles**

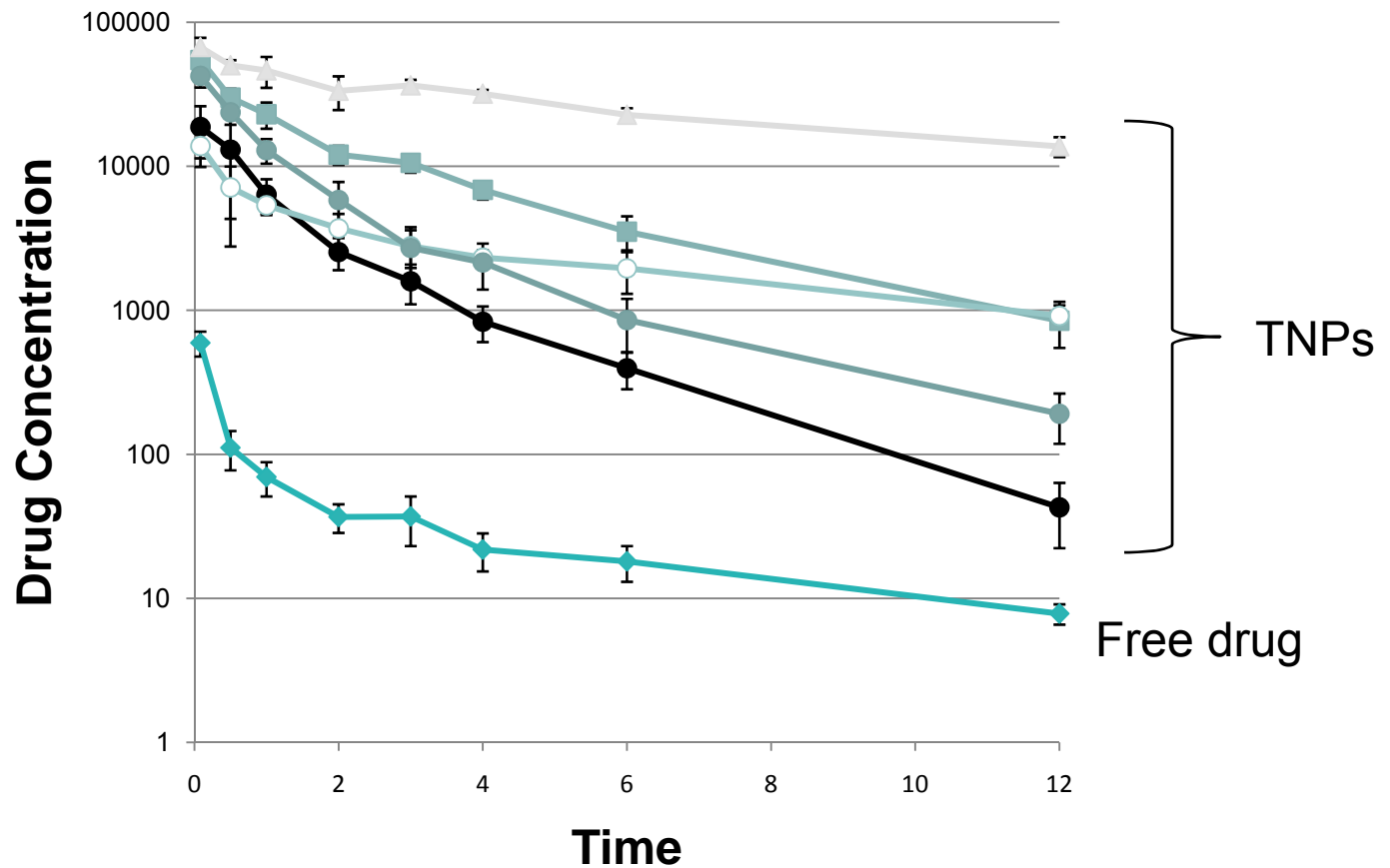
# Nanoparticle production process

	Academic	BIND
		
Scalability	?	✓
Particle Size	✓	✓
Particle Surface	?	✓
Drug Load	✗	✓

# In vitro drug release optimization



# TNP formulations demonstrate improved pharmacokinetic profiles over free drug



# Nanoparticle production scale-up

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Research	100 mg		
Pre-clinical	10 g		
Tox	1 kg		
Clinical	10 – 100 kg		
Commercial	100-1000 kg		

# Drug development and approval pathway

Development Stage	Clinical Study Design	FDA interactions
Research		
Pre-clinical		Pre-IND meeting
Tox		IND submission
Phase I clinical studies	Healthy volunteers: safety and tolerability	
Phase II clinical studies	Patients in controlled settings: safety, tolerability, activity	Post-Phase II FDA meeting
Phase III clinical studies	Patients in everyday use: safety and efficacy	NDA submission
FDA approval		
Product launch		

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