Radiation Dose Is More Than A Number Workshop 15-16 September 2011

Bert W. Maidment, Ph.D.

Associate Director, Radiation/Nuclear
Countermeasures Program
Division of Allergy, Immunology, and Transplantation
National Institute of Allergy and Infectious Diseases
National Institutes of Health

15 September, 2011

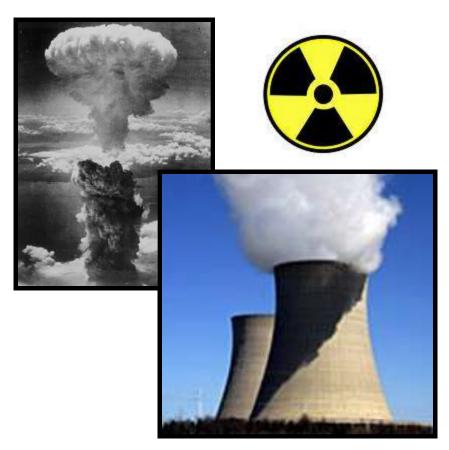






Types of Radiation Exposure

- Radiological terrorist events
 - RDD (Dirty Bombs)
 - RED
 - Food or Water
 Contamination
- Nuclear detonation
- Accident
 - Power Plant Release
 - Sealed radiological sources









NIAID Radiation/Nuclear Medical Countermeasures Development Program

- HHS assigned NIH/NIAID with the responsibility to identify, characterize and develop new medical countermeasure products against radiological and nuclear attacks that may cause a public health emergency.
- Research priority areas of the program are to develop:
 - Drugs to treat or mitigate radiation injury
 - Drugs to remove radioactive materials from the body
 - Biodosimetry tools to determine levels of radiation exposure received by an individual

Radiation Countermeasure Mission Space

ARS/DEARE

- Hematopoietic ARS:
 - Neutropenia
 - Thrombocytopenia
 - Anemia
 - Lymphopenia
- GI ARS
- CNS Injury
- Cutaneous Injury
- Lung Injury
- Kidney Injury
- Combined Radiation Injury
- Biodosimetry Methods and Devices

Radionuclide Threats

- Am-241
- Co-60
- Cs-137
- I-131
- Ir-192
- Po-210
- Pu-238/239
- Sr-90
- U-235

Late Effects

- Carcinogenesis
- Cardiovascular Disease
- Cataractogenesis

NIH Strategic Plan and Research Agenda for Medical Countermeasures Against Chemical Threats



05.2005

NIH Strategic Plan and Research Agenda for Medical Countermeasures Against Radiological and Nuclear Threats



Department of Health and Human Services National Institute of Health National Institute of Allegy and Infectious Disease MIT Publication No. 05-5008







Components of NIH Strategic Plan and Research Agenda

- Basic & Translational Research
- Radiation Biodosimetry
- Focused Product Development
- Infrastructure for Research & Product Development







NIAID's Radiation/Nuclear Medical Countermeasures Program



Build Infrastructure and Research Capacity



Basic Research and Discovery



ARS Treatments and Radionuclide Decorporation Agents Development







Biodosimetry



Radiation/Nuclear Medical Countermeasure Program Goals

- Support R&D on mechanisms of radiation injury and protection/mitigation
- Identify new radiation medical countermeasures
- Facilitate candidate medical countermeasures product development under the Animal Rule (21 CFR 314 and 601)
- Obtain licensure for radiation emergencies
- Increase the number of safe and effective radiation medical countermeasures available for Strategic National Stockpile procurement

Radiation/Nuclear Medical Countermeasure Development Programs

Cooperative Agreements

 Centers for Medical Countermeasures against Radiation

Specific Tissue Injury Grants

- Immune reconstitution
- Oral Decorporation Agents
- Mechanisms, Diagnostics, and Medical Countermeasures (MCMs)
- Gastrointestinal MCMs
- Lung MCMs
- Skin MCMs
- Combined Injury MCMs

SBIR

- Medical Countermeasure Development
- NIAID Omnibus

Contracts

- -Oral Forms of DTPA (2)
- -RERF
- Product Development Support Services

■Inter/intra Agency Agreements

- -NCI
- -NIA
- -NIDDK
- -NIH RAID
- -AFRRI

Company Collaborations

- –Contacts and presentations
- -Candidate efficacy screen
- –Candidate Optimization
- -Candidate Development

International Collaborations

Centers for Medical Countermeasures Against Radiation (CMCRs) 2010-2014

- 7 Centers awarded, 5-year cooperative agreements
- Awardees
 - Columbia University
 - Albert Einstein
 - University of Rochester
 - Dartmouth University
 - Duke University
 - UCLA
 - University of Pittsburgh

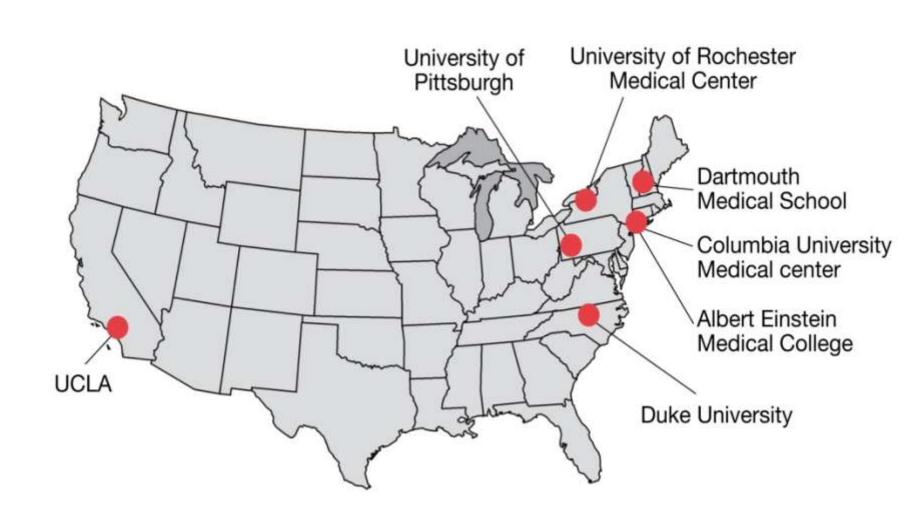
- D. Brenner
- C. Guha
- J. Williams
- H. Swartz
- N. Chao
- W. McBride
- J. Greenberger







Centers for Medical Countermeasures against Radiation – 2010-2014



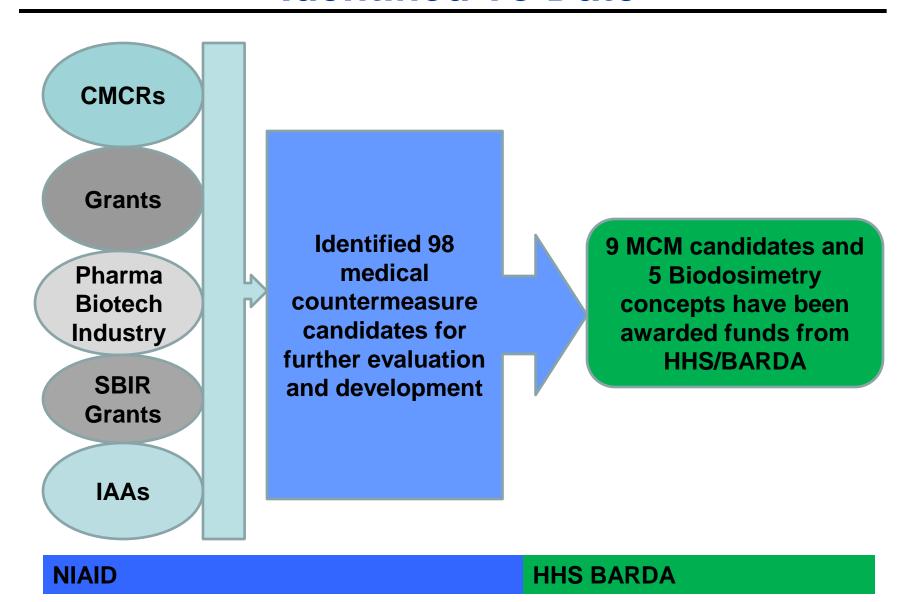
MCM Tissue Specific Injury Mitigation Grant Programs:

- Investigator-initiated awards (R01s); 11 grants through FY2012
- Radiation Combined Injury (R21/R33s); 11 grants through FY2012
- Thrombocytopenia; 7 grants through FY2010
- Lung Radiation Injury; 9 grants through FY2010
- Cutaneous Radiation Injury; 4 grants through FY2010
- RC2 GO Grants; 5 Gl and 1 Decorporation Agent through FY2010

Product Development Support Services Contractor Capabilities

- Evaluate efficacy of candidate countermeasures
 - Acute Radiation Syndrome
 - Rodent hematological and gastrointestinal models
 - NHP hematological models
 - Developing canine hematological model (Thrombocytopenia)
 - Developing NHP gastrointestinal model
 - Radionuclide Decorporation Agents
- cGMP manufacturing support and stability studies
- GLP toxicology and safety pharmacology studies
- GLP pivotal animal efficacy studies (Animal Rule)
 - NHP and rodent models for efficacy in ARS
- Phase I clinical safety and pharmacokinetic studies
- FDA submission support for p-IND

Medical Countermeasure Candidates Identified To Date



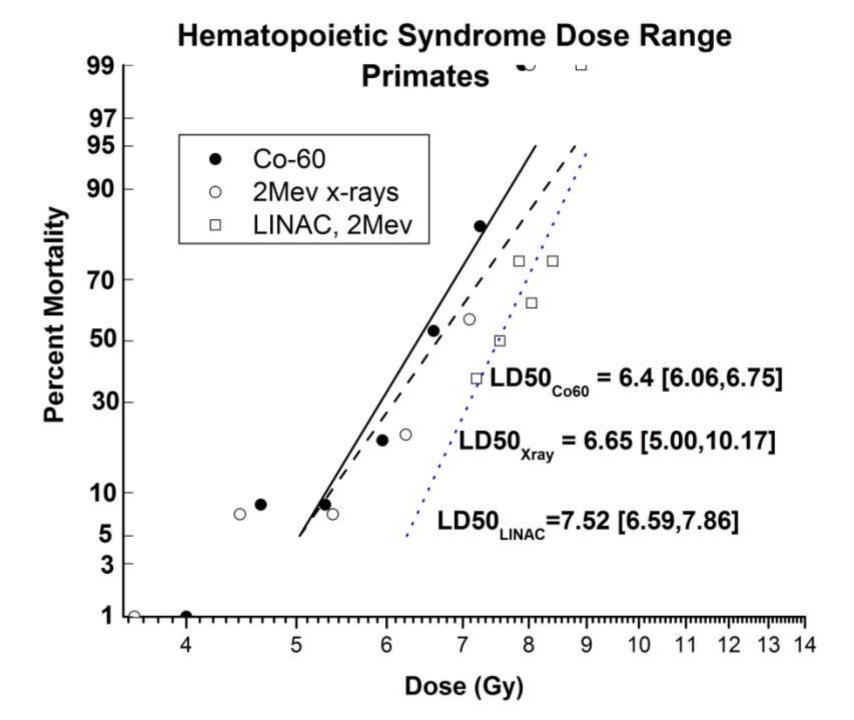
Radiation/Nuclear Medical Countermeasures

Mechanisms of Action

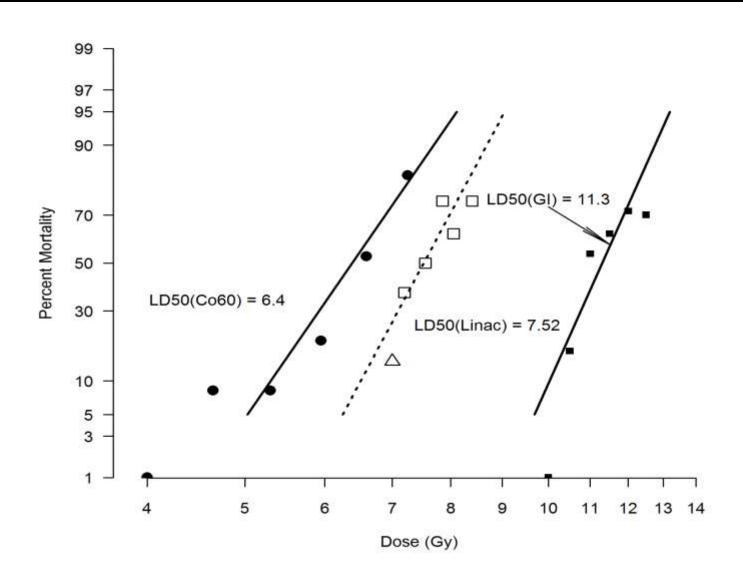
- Anti-oxidants
- Anti-inflammatories
- Anti-apoptotics
- Growth factors and cytokines
- Cell-based therapies
- Others

Radionuclides

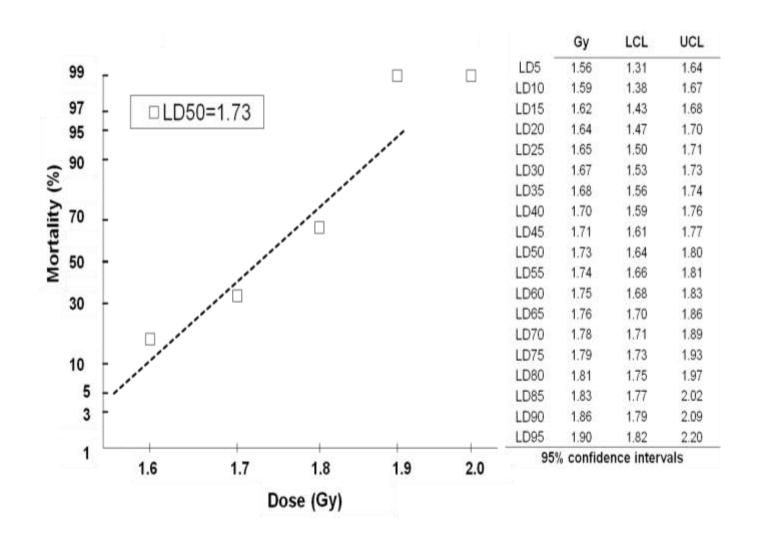
- Blocking agents
- Decorporation agents
- Enhancement of mucociliary clearance



Lethal Dose Response Curves for Hematopoietic and Gastrointestinal Acute Radiation Syndrome in NHPs

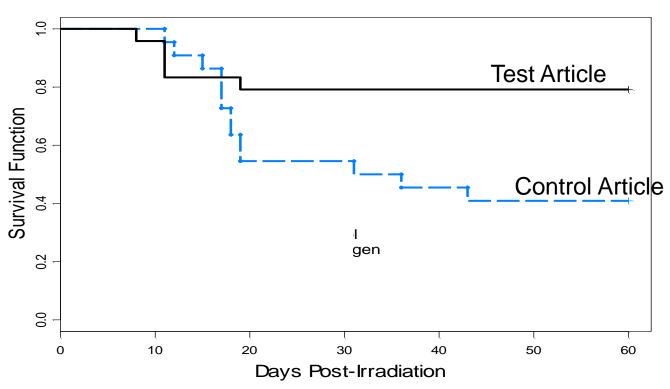


LD50/30 of Mini-pigs Exposed to 1.6 – 2 Gy Co-60 Radiation



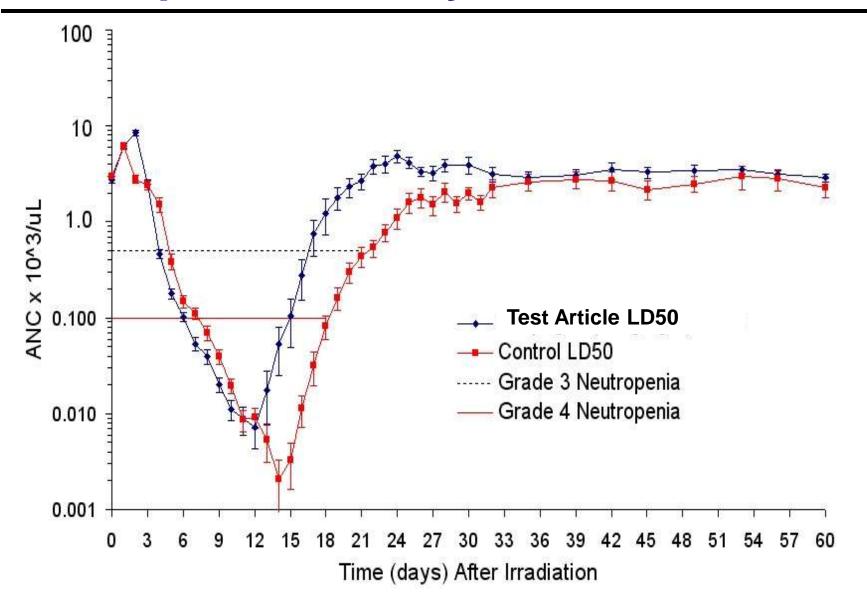
Hematopoietic Medical Countermeasure GLP Non-Pivotal Efficacy Study in NHPs

Kaplan-Meier Survival Curves

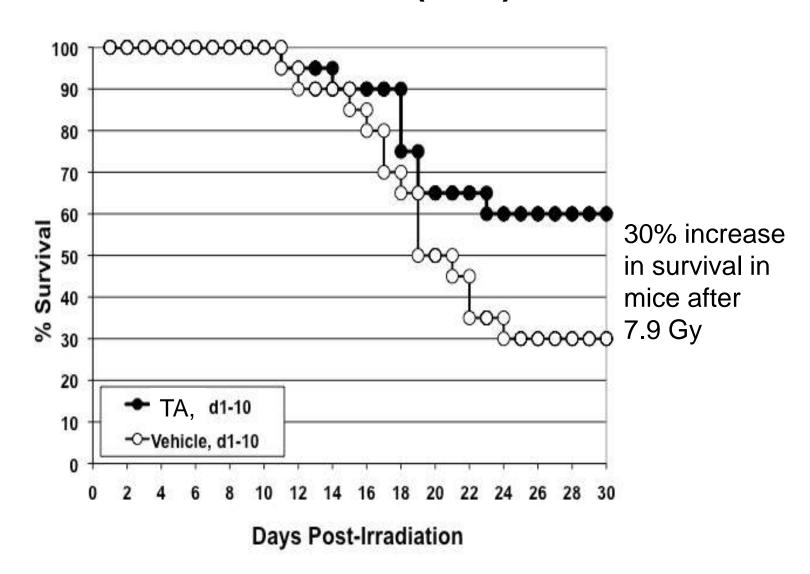


- Administered daily starting 24 hours after lethal irradiation (LD_{50/30})
- Increased survival (80%) vs. control (41%) (p=.004)
- Accelerated neutrophil recovery

Neutrophil Recovery in NHPs

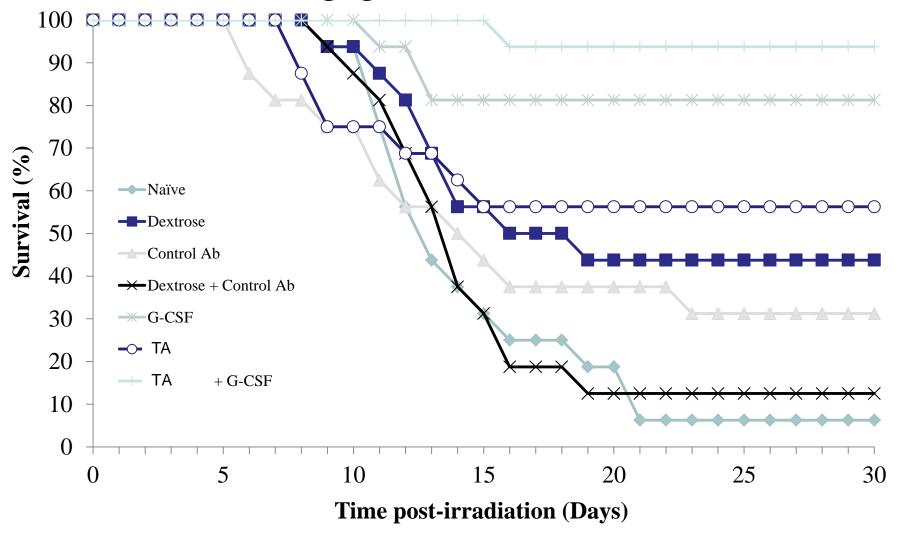


Hematopoietic Acute Radiation Syndrome MCM Candidate (TPO)

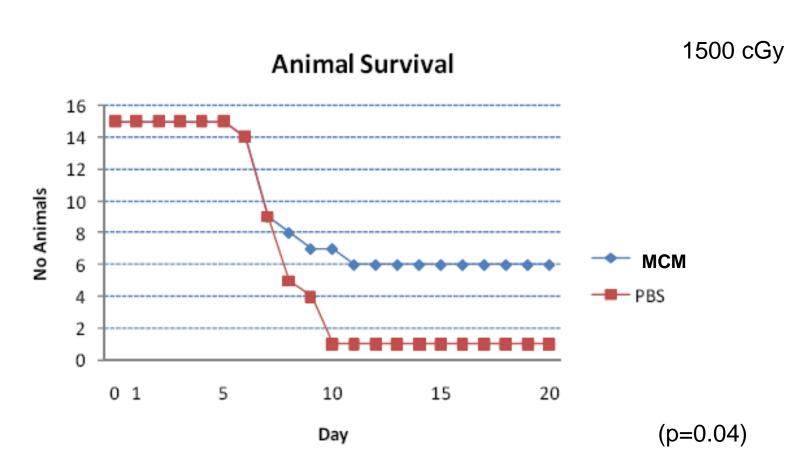


Combination with G-CSF and MCM

1 mg/kg MCM (+12 h, sc) and three once-daily doses of 0.34 mg/kg G-CSF (+6 to +48 h, sc)



Evaluation of Candidate MCM in GI-ARS Rodent Screen after 15 Gy

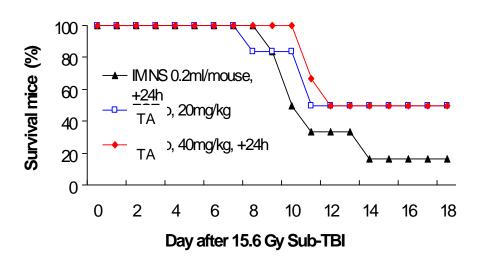


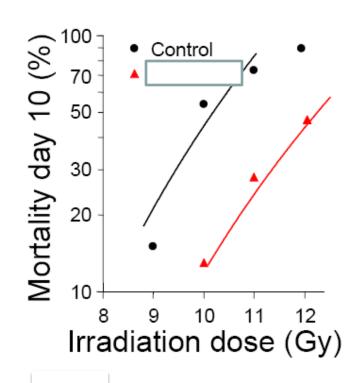
NIAID: EpiStem Ltd.

RC1 - GI Medical Countermeasures

TA mitigates GI death at +24 hours after IR

Effects of TA on survival of NIH-Swiss mice after 15.6 Gy Sub-TBI





shows a DMF of 1.2 when given +26 hours after IR

For Official Use Only

Radionuclide Medical Countermeasures Development Programs

Background

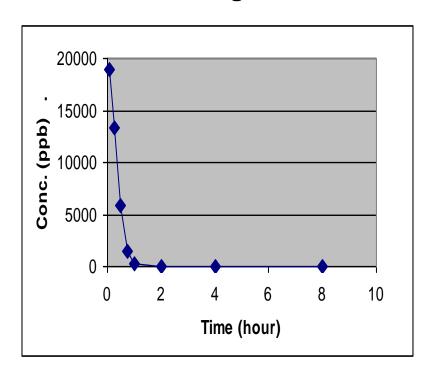
- Oral administration for mass casualty use
- Enhanced decorporation efficacy
- Increase range of radionuclides

Contract and Grant Programs

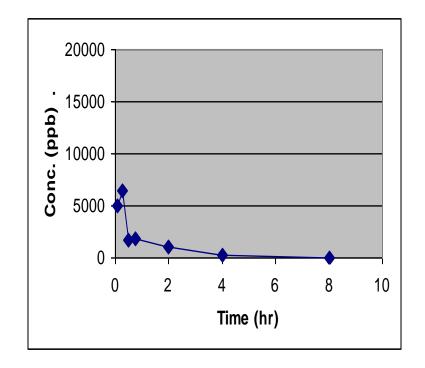
- Oral Form of Diethylenetriaminepentaacetate (DTPA)
- Oral Radionuclide Decorporation Agents

Pro-Drug -- Plasma Levels of DTPA

IV Administration of DTPA 5 mg



Oral Administration of Pro-drug DTPA 7 mg (equivalent dose)



Biodosimetry Program

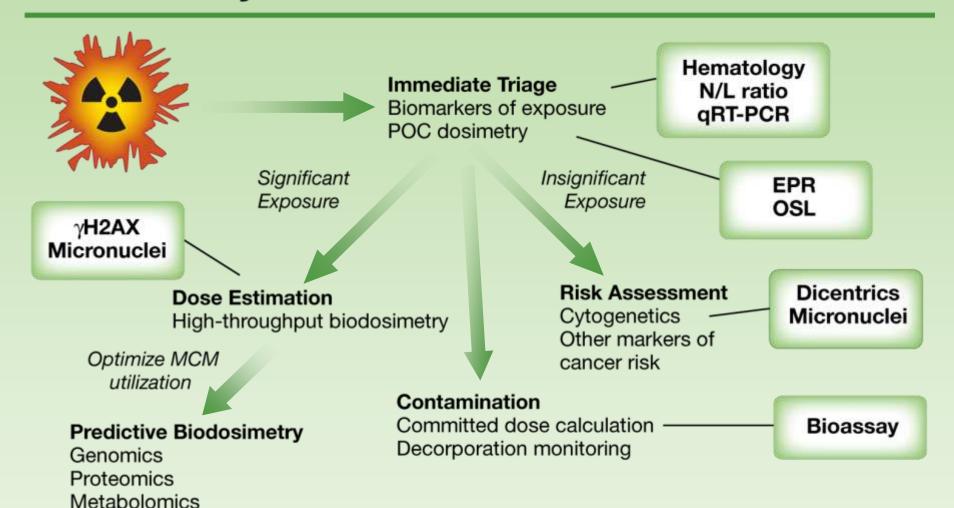
Technical Requirements of a Biodosimetry Architecture

- Capability for rapid screening of large populations
- Sufficiently accurate to guide clinical decision-making
- Sufficiently flexible to address different needs for different types of radiation exposures

Medical / Operational Impact

- Identification of patients requiring urgent medical assessment/triage
- Optimization of resource allocation
- Reassurance for anxious individuals
- Improved risk assessment for delayed or late effects of radiation exposure
- Identify specific tissue/organ injuries
- Monitoring of therapy (bioassays)

Biodosimetry Architecture



Bridging the Radiation/Nuclear Medical Countermeasure "Animal Rule Pathway"

Discovery, Research, and, Development



Licensure and Procurement

Government, Academia, Corporate Partnerships

Food and Drug Administration - CDER, CBER, and CDRH

National Institute of Allergy and Infectious Diseases

HHS/Biomedical Advanced Research and Development Authority

NIAID Radiation/Nuclear Medical Countermeasures Development Program Team

- Bert Maidment, Ph.D., Associate Director for Product Development
- Narayani Ramakrishnan, Ph.D., Program Officer
- Andrea DiCarlo, Ph.D., Program Officer
- David Cassatt, Ph.D., Program Officer
- Mai-Kim Norman, Health Specialist
- Francesca Macchiarini, Program Officer
- Erika Davies, Ph.D., AAAS Research Fellow
- Christine Czarniecki, Ph.D., Chief, Regulatory Affairs
- Jui Shah, Ph.D., Senior Regulatory Affairs Officer
- Lawrence Prograis, M.D., Special Programs and Bioethics

Radiation/Nuclear Medical Countermeasures Product Development Program

- Bert W. Madmen, PhD
 Associate Director, Radiation/Nuclear
 Countermeasures Program
 NIH/NIAID/DAIT
 6610 Rockledge Drive, Room 5321
 301-594-0641 (Voice)
 maidmentb@niaid.nih.gov
- http://www3.niaid.nih.gov/research/topics/radnuc/





