

Disruptive Innovation for Next Generation Biomanufacturing

Govind Rao
Workshop on Innovations in Biomanufacturing
Feb 27, 2020

Col: IP



Center for Advanced Sensor Technology





Disruptive Innovations not there in 2000

- ▶ iPhone
- ▶ iPad
- ▶ Facebook
- ▶ 4G
- ▶ Uber
- ▶ Airbnb
- ▶ Android
- ▶ Film>>Digital
- ▶ Tesla
- ▶ Netflix (streaming)
- ▶ Instagram
- ▶ Snapchat
- ▶ WhatsApp
- ▶ AWS
- ▶ Google, Cloud
meant something
else!

WHERE IS UMBC?



Low-Cost Microbioreactor for High-Throughput Bioprocessing

Yordan Kostov, Peter Harms, Lisa Randers-Eichhorn, Govind Rao

Department of Chemical and Biochemical Engineering, University of Maryland Baltimore County, Baltimore, Maryland 21250; telephone: (410) 455-3415; fax: (410) 455-1049; E-mail: grao@umbc.edu and Medical Biotechnology Center, University of Maryland Biotechnology Institute, Baltimore, Maryland 21201-1503

Received 1 July 2000; accepted 17 October 2000

Abstract: The design of a microbioreactor is described. An optical sensing system was used for continuous measurements of pH, dissolved oxygen, and optical density in a 2 mL working volume. The $K_L a$ of the microbioreactor was evaluated under different conditions. An *Escherichia coli* fermentation in both the microbioreactor and a standard 1 L bioreactor showed similar pH, dissolved oxygen, and optical density profiles.

The low cost of the microbioreactor, detection system, and the small volume of the fermentation broth provide a basis for development of a multiple-bioreactor system for high-throughput bioprocess optimization. © 2001 John Wiley & Sons, Inc. *Biotechnol Bioeng* 72: 346–352, 2001.

Keywords: microbioreactor; optical sensing; fermentation

of operational/nutritional parameters on cell growth and product formation in a systematic and statistically significant manner. Currently available instrumented bioreactors are expensive and bulky, thus making bioprocess development inefficient as large numbers of simultaneous experiments simply cannot be conducted. Recent advances in optical sensor technology provide a possible solution.

Traditionally, bioprocess technology has been critical to the development and availability of new drugs and vaccines. Additionally, bioprocesses are important in a wide variety of industries besides pharmaceuticals—food industry, ecology, water treatment, etc. (Arroyo et al., 2000; Bakoyianis



CAST Core Competence: Innovative Sensor Technologies

What? Disruptive Innovation leading to Paradigm Shifting Practices

Why? Reduce Healthcare Costs

How? Low-cost Integrated Opto-electro-bio-mechanical Devices

MLK: Life's most persistent and urgent question is, 'What are you doing for others?'



Center for Advanced Sensor Technology

UMBC

AN HONORS UNIVERSITY IN MARYLAND

Norm Augustine, Author of Augustine's laws



Per capita health spending is now >\$12,000, or \$3.85 trillion in 2018, almost certain to cross **\$4 trillion** for 2019.

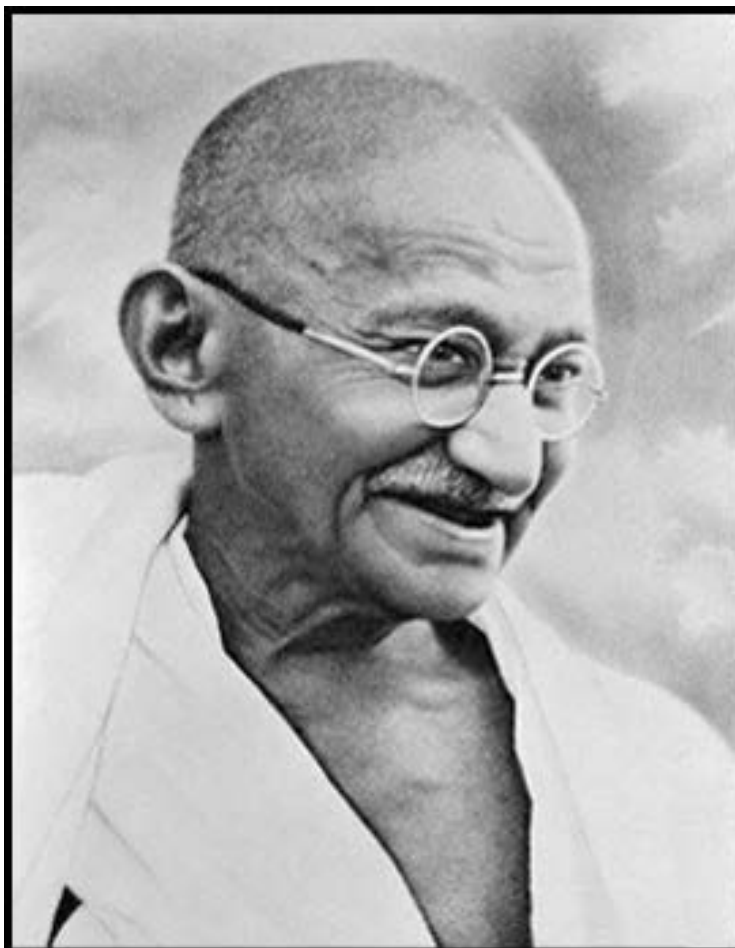
- Of the **\$3.3 trillion** spent on healthcare in 2016, **\$450 billion** was spent on pharmaceuticals, including rebates*
- Biologics: **2%** of all US prescriptions but **37%** of net drug spending and over **90%** of net growth in drug spending*
- 1 in 4 patients report difficulty in affording their medicine**
- Patients can pay thousands of dollars out of pocket for specialty tier drugs, even with insurance coverage

*2017, IQVIA

**2019 KFF Health Tracking Poll

Augustine Equation: Cost, as a fraction of GDP (in percent) = $0.25 Y - 487$, where Y is the calendar year of interest. In 2018, 18.5% of GDP was spent on healthcare

WE CAN AND MUST FIX THIS HERE AND NOW!



GANDHIJI'S TALISMAN

"I will give you a talisman. Whenever you are in doubt or when the self becomes too much with you, apply the following test :

Recall the face of the poorest and the weakest man whom you may have seen and ask yourself if the step you contemplate is going to be of any use to him. Will he gain anything by it ? Will it restore him to a control over his own life and destiny ? In other words, will it lead to Swaraj for the hungry and spiritually starving millions ?

Then you will find your doubts and your self melting away."

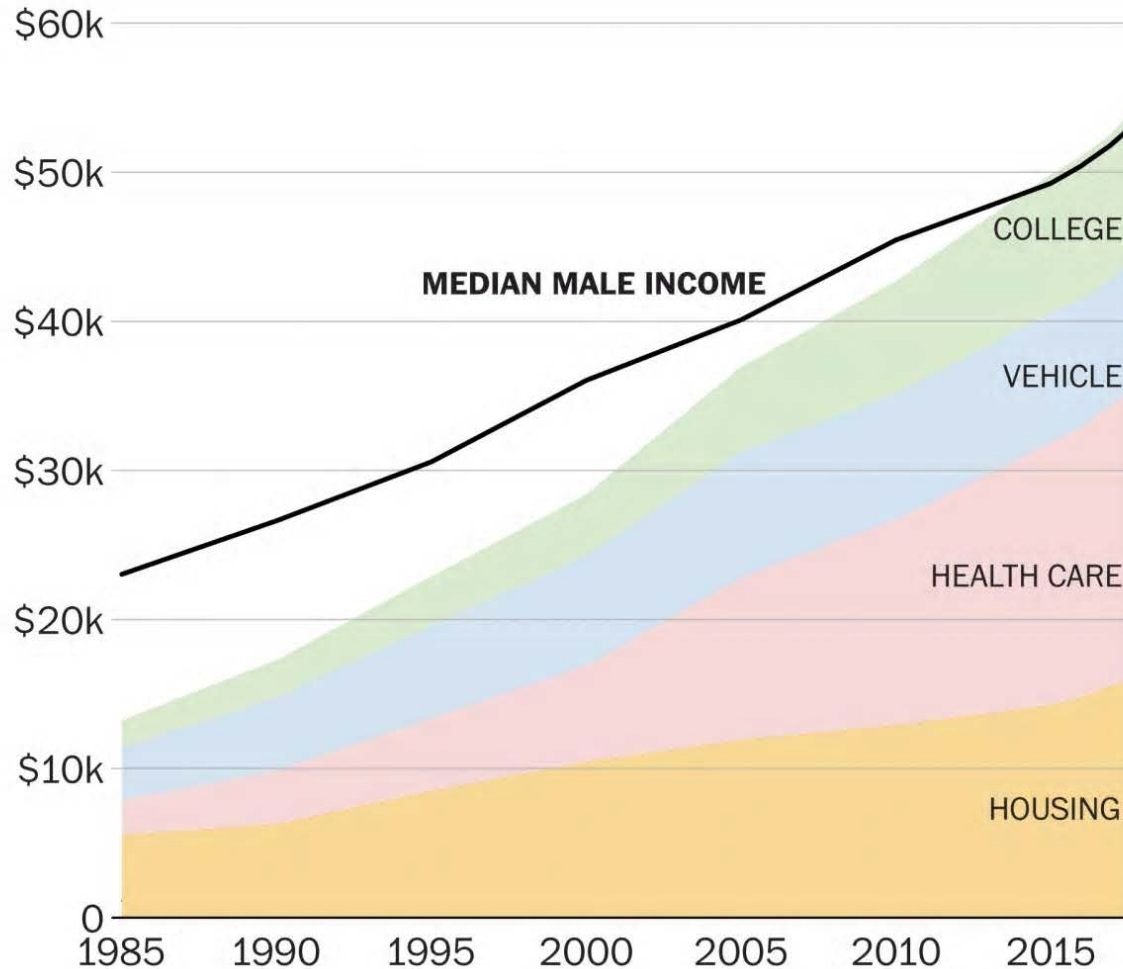
M.K. Gandhi

A year of wages no longer covers a year of family expenses

US healthcare

Major annual household expenditures for a family of four vs. median male income, 1985–2018

Michael Sainato
Thu 14 Nov 2019 02:00 EST



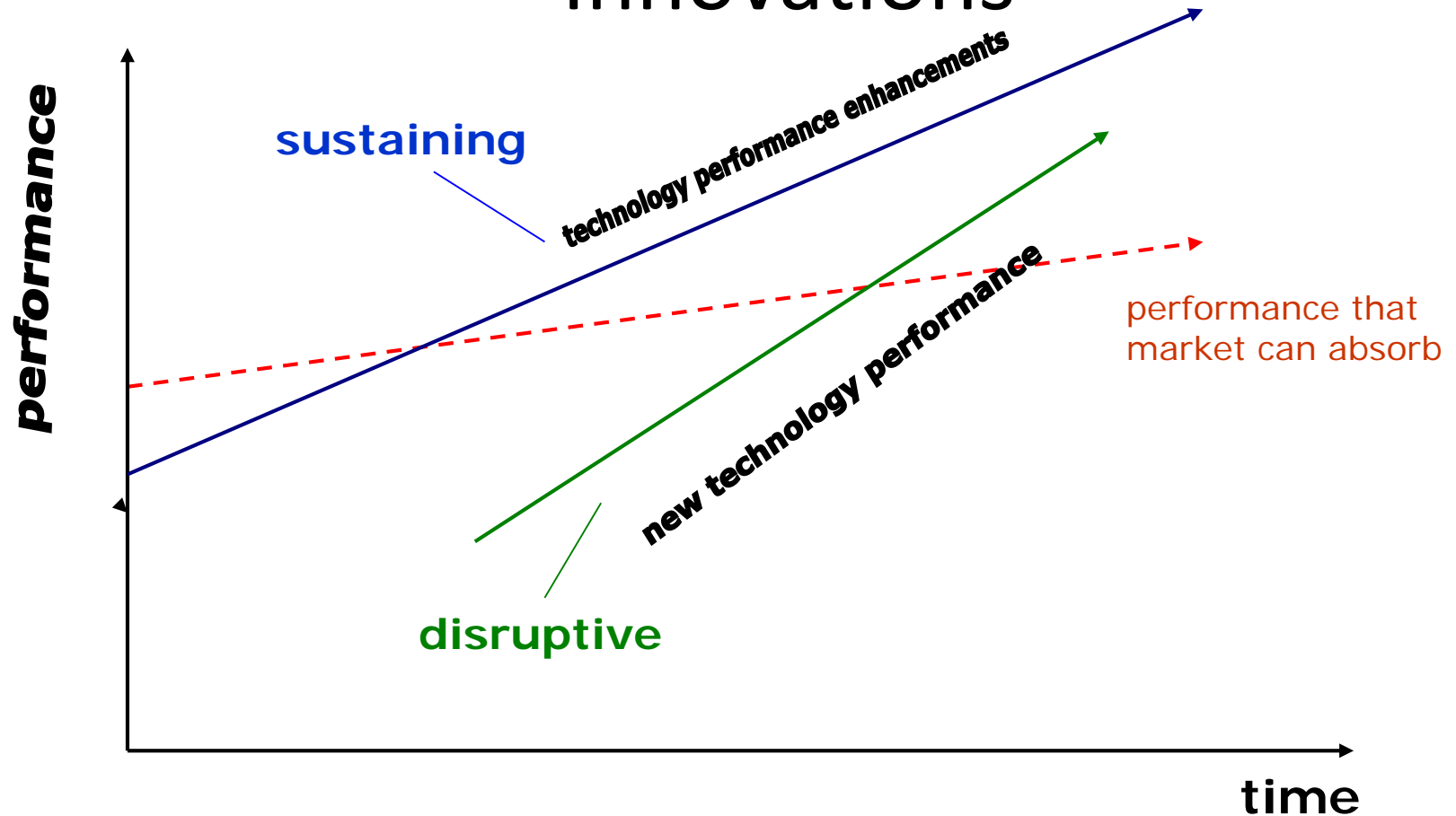
Source: The Cost-of-Thriving Index

THE WASHINGTON POST

The Weekly

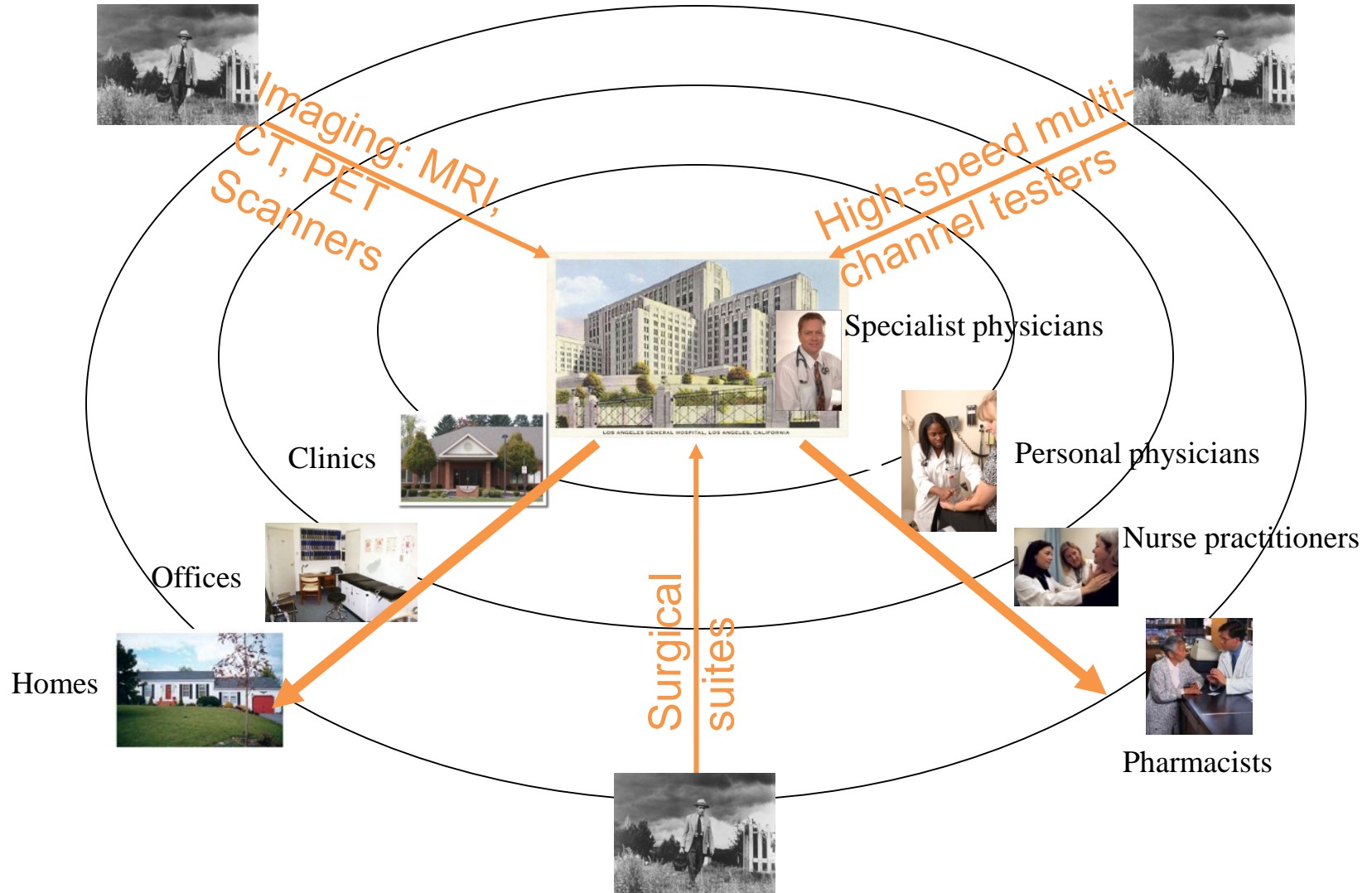
Try 6 issues for \$6

Markets and Technology Innovations



Adapted from *The Innovator's Dilemma*, Clayton Christensen

The decentralization that follows centralization is only beginning in healthcare



UMBC Bio-MOD Platform

Developed from DARPA funding, part of DARPA's Battlefield Medicine Program

Compact and robust system, designed for the automated manufacture of biologics at the point-of-care.

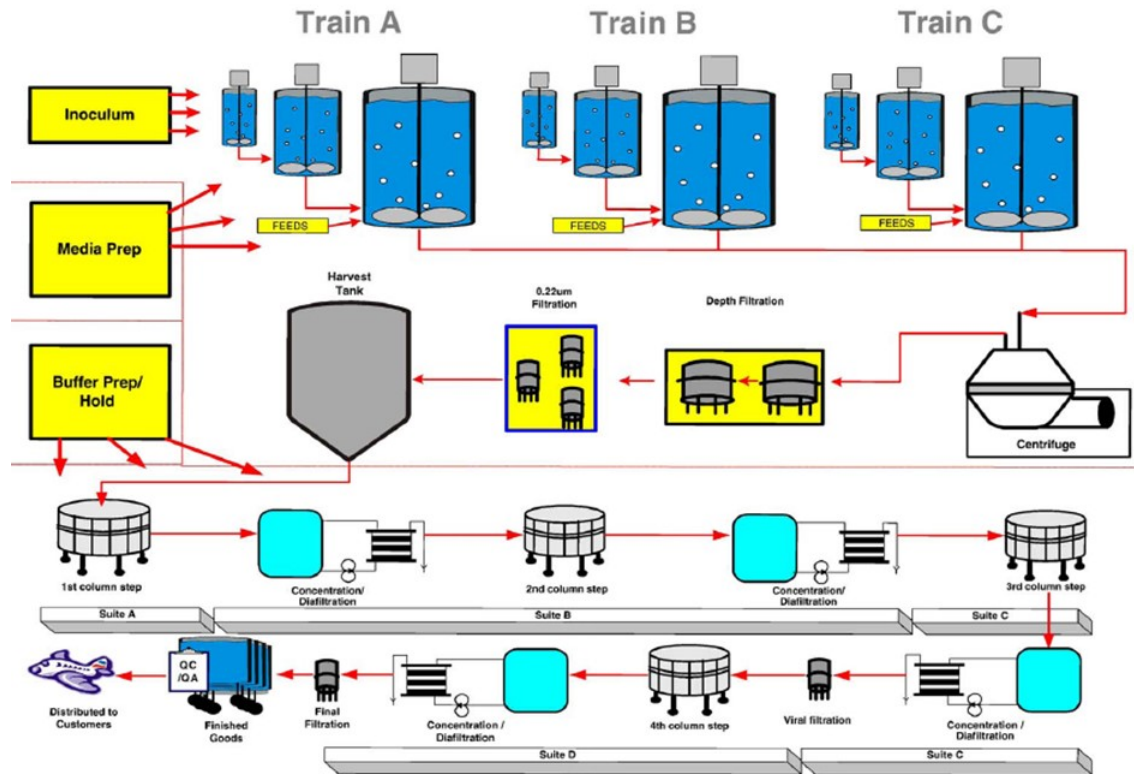
Includes end-to-end manufacturing chain (including downstream processing) in continuous flow within a microfluidics-based platform

- built in expression, purification and onboard quality control capabilities.

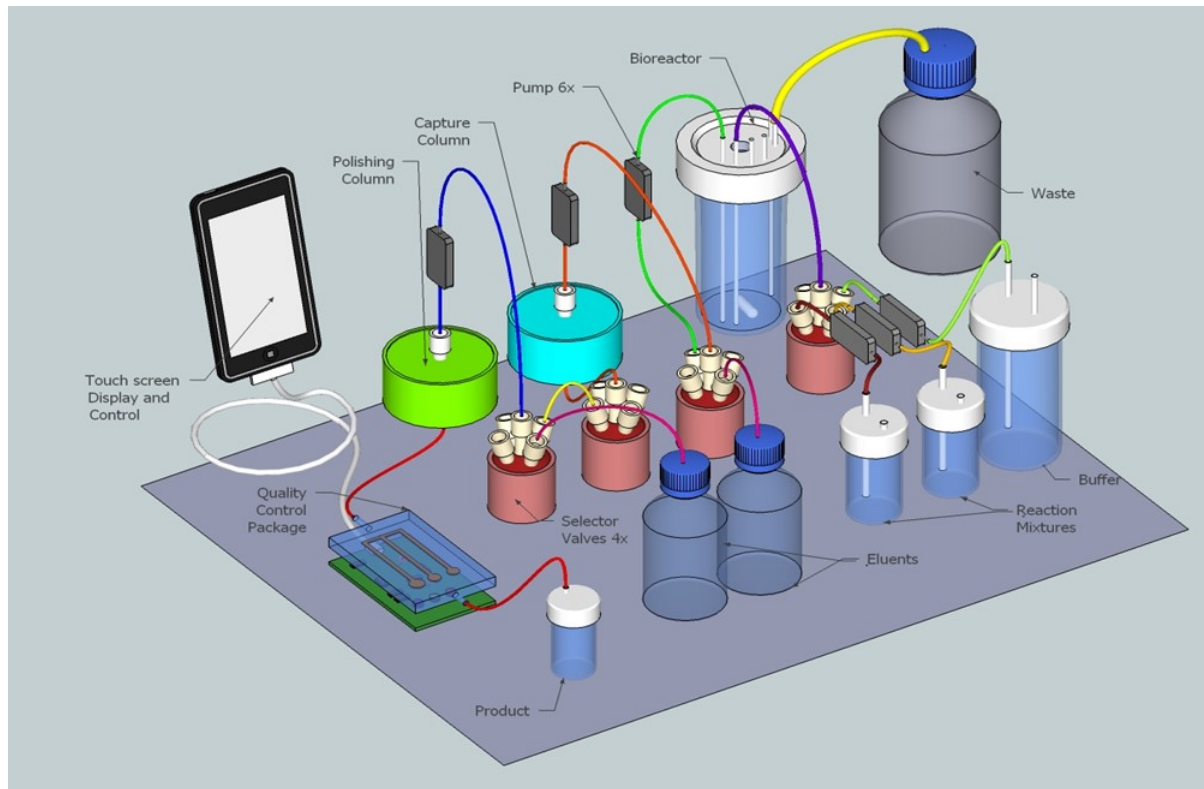
Designed for operational rigor and reproducible protein production within a few hours.

Successfully demonstrated POC with several target proteins, including relevant molecules of interest to the military and biodefense communities.

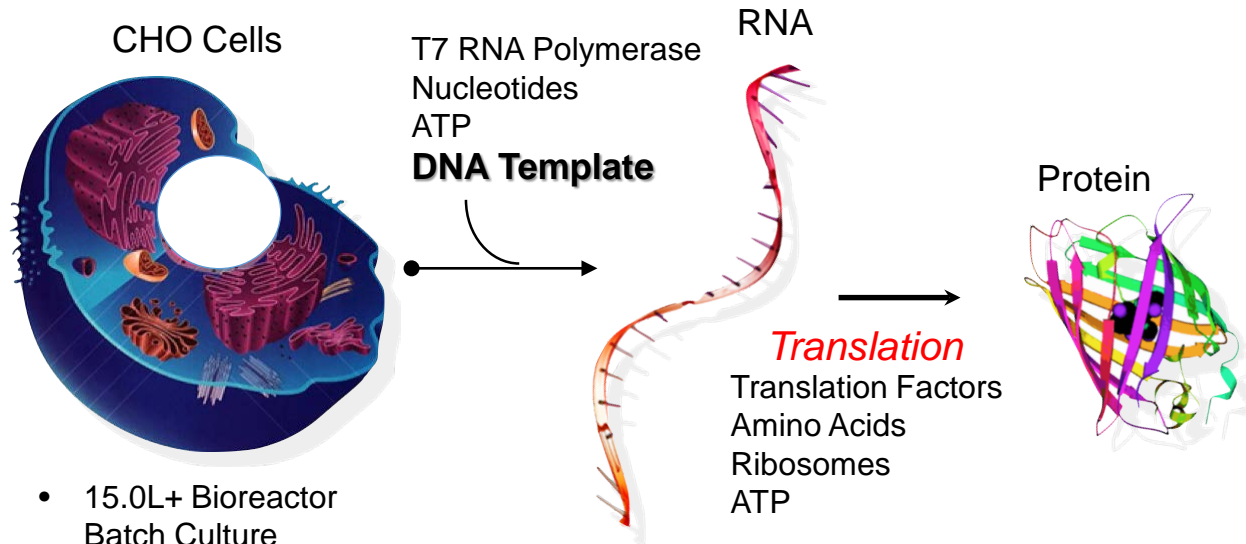
GOAL: Replace this...



Modular, Disposable, GMP Capable Biologics *on Demand*



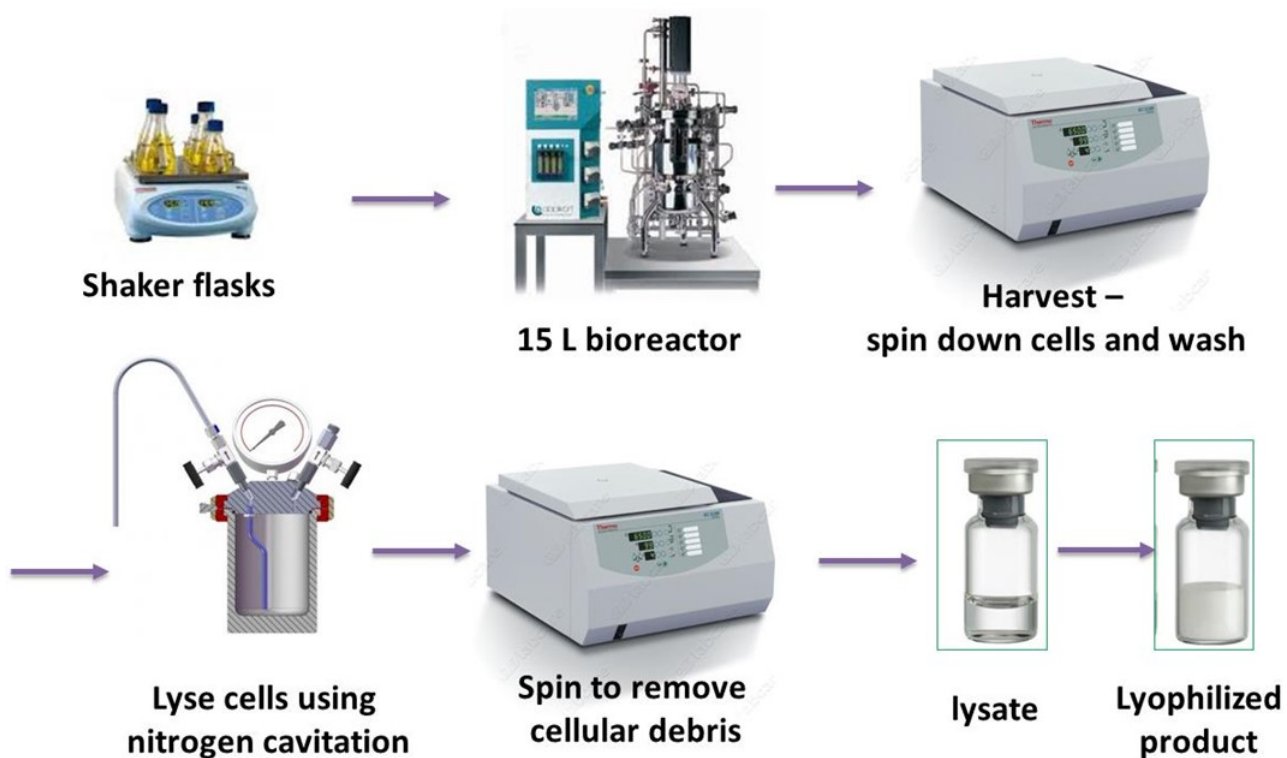
Rapid Expression via *in vitro* Translation (IVT)



- 15.0L+ Bioreactor Batch Culture
- Lysis (Cavitation)
- Differential centrifugation to isolate critical organelles
- Lyophilized

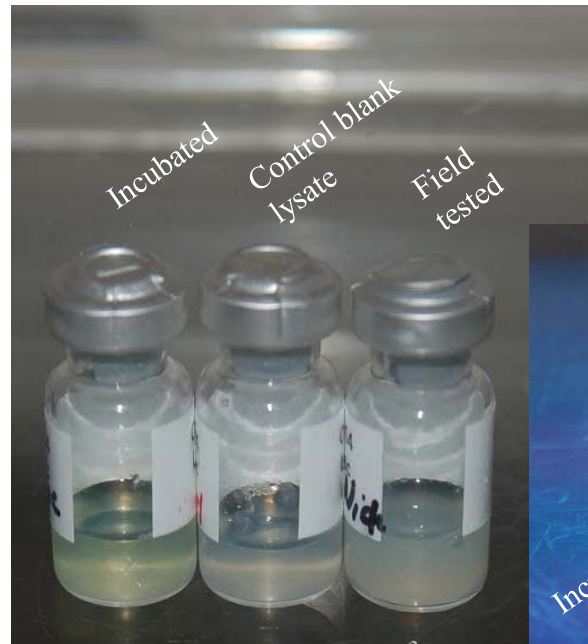
- Advantages of *in vitro* translation (IVT):
 - No cell line development
 - No seed train, passaging, or transfection
 - All live culture scale-up done off line in **generic** single batches

CHO cell-free Lysate Manufacturing Process

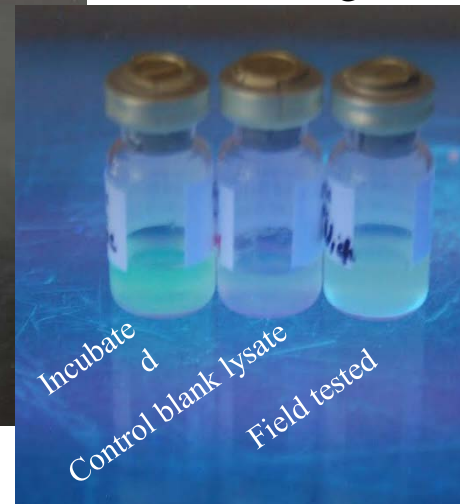


Lyophilized and reconstituted lysate, CHO GFP expression

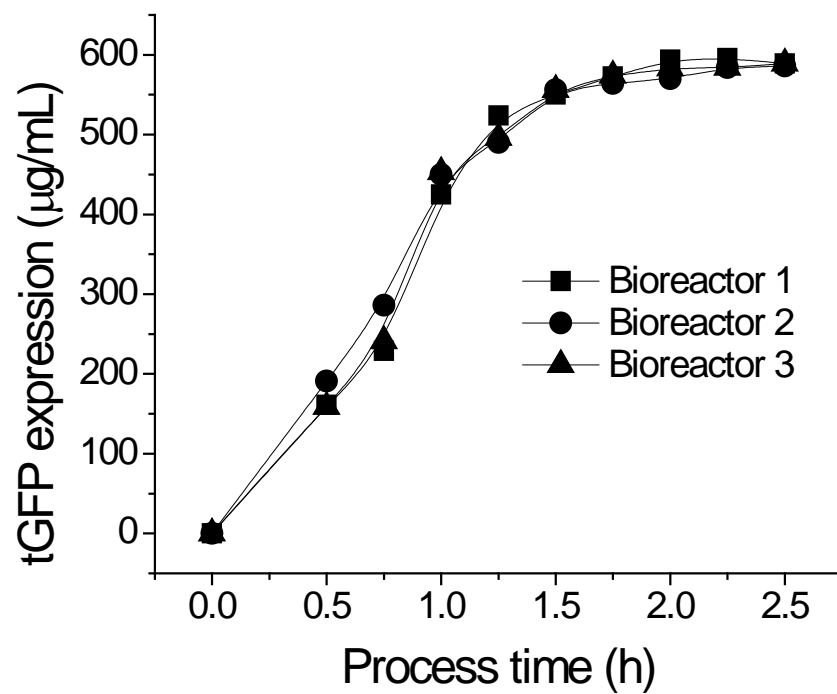
Under normal light

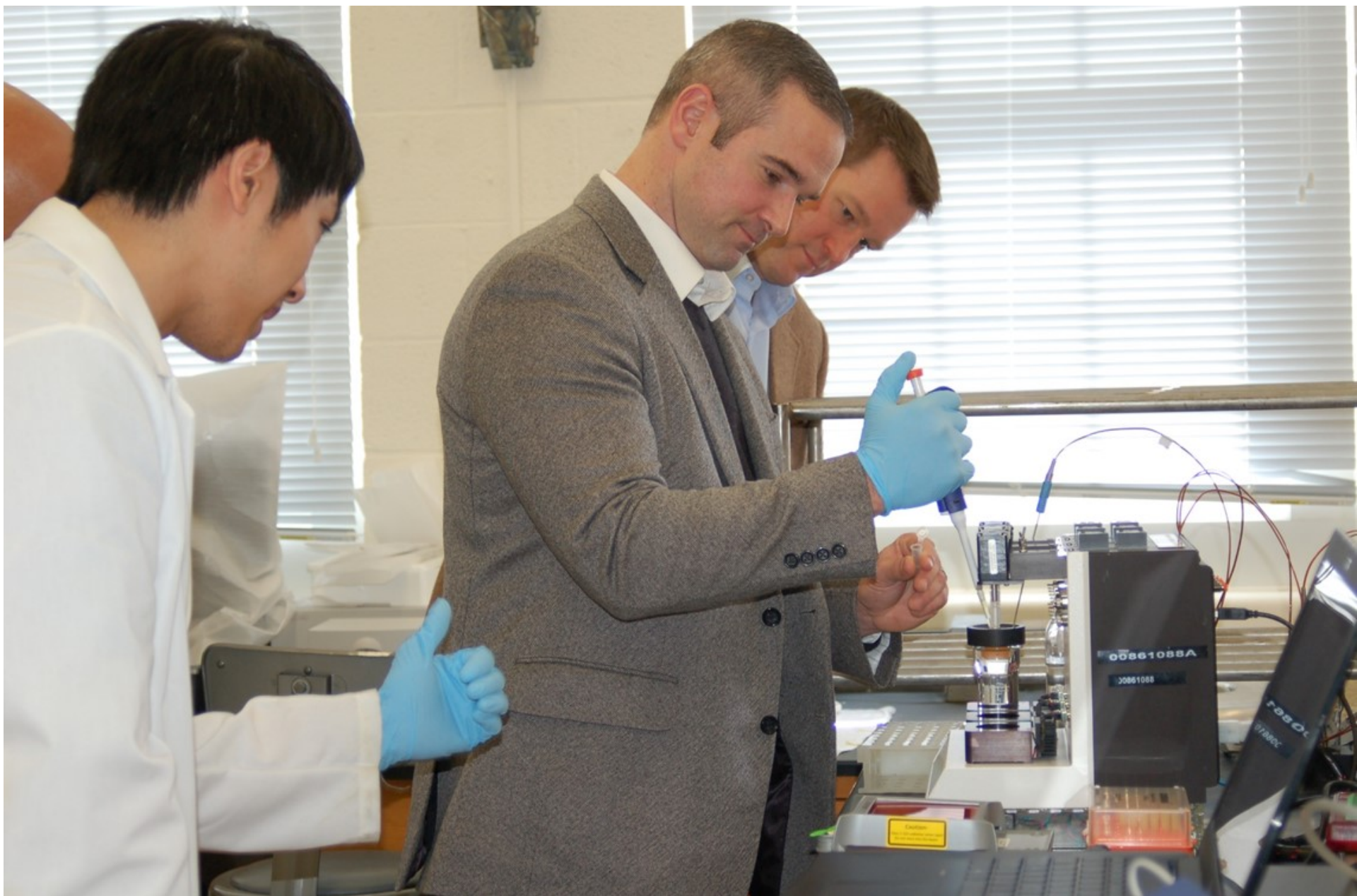


Under UV light



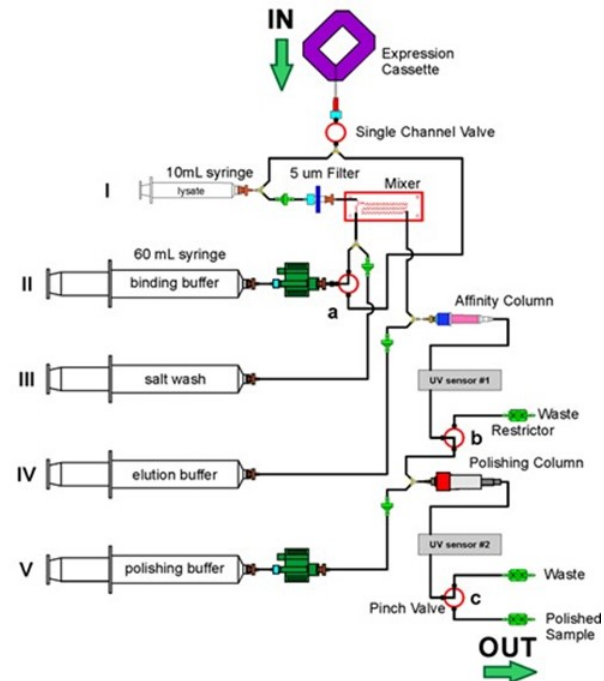
Experiment 192k14

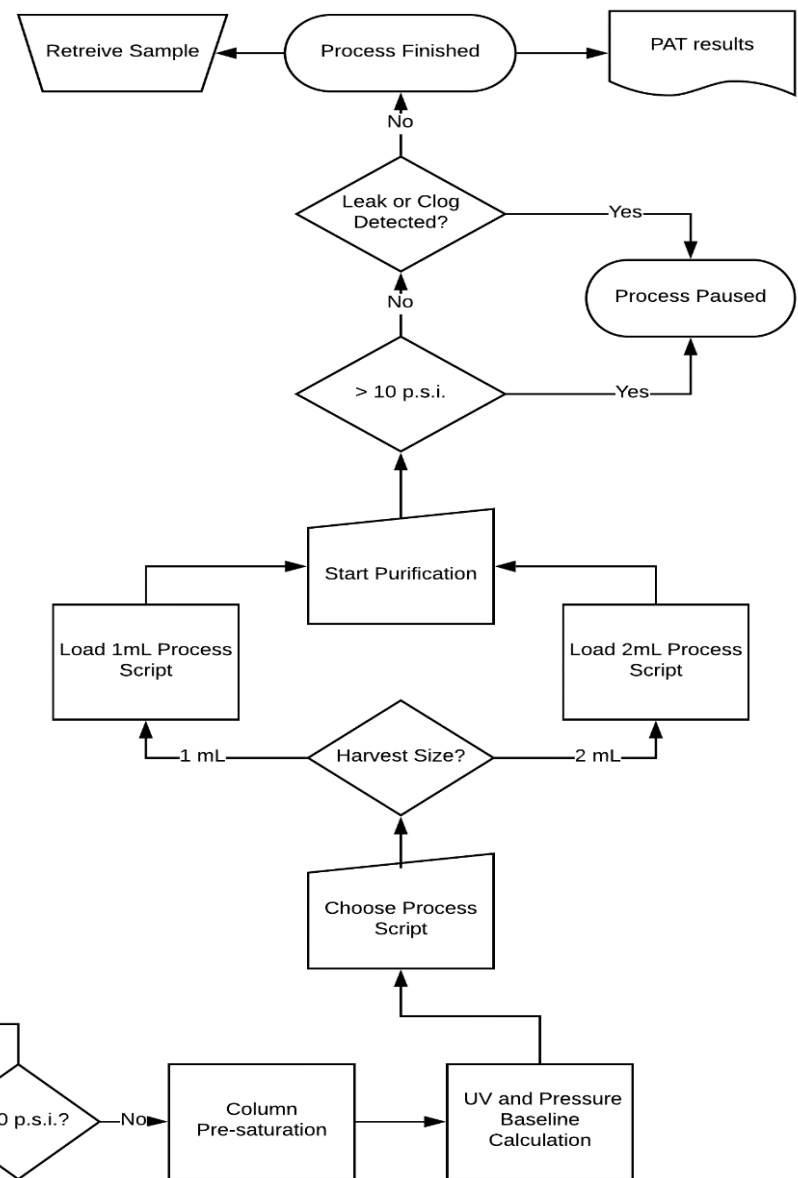
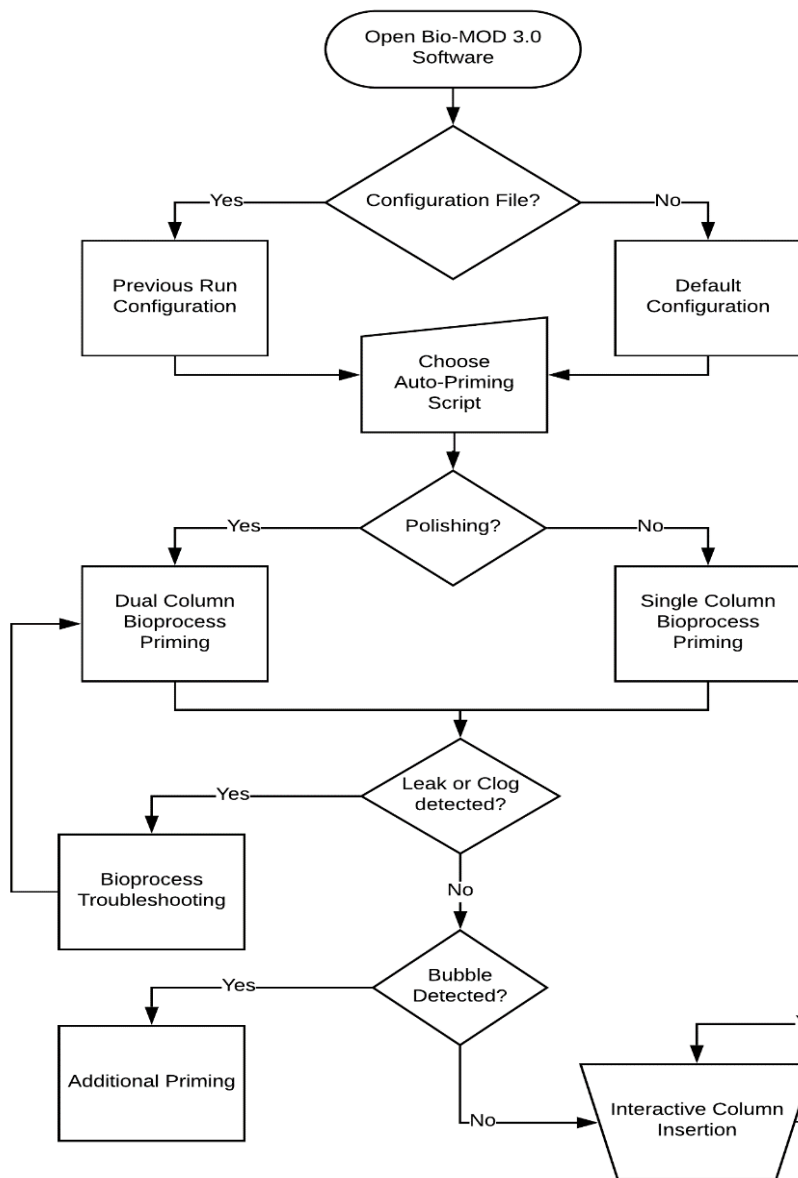




2nd Generation

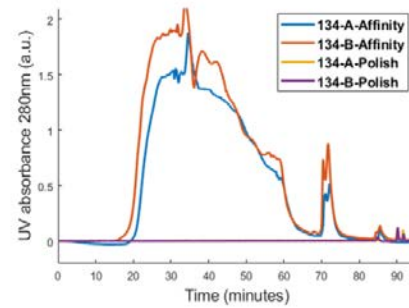
- Adds polishing step
- Second UV detector



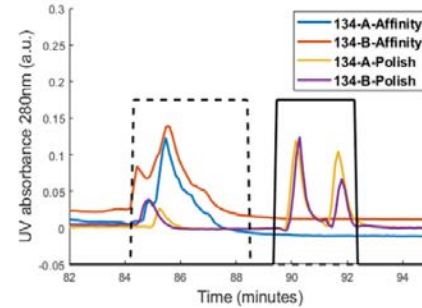


Real-time UV
(280 nm) and
pressure traces
of the affinity
column
purification of
various His-
tagged proteins

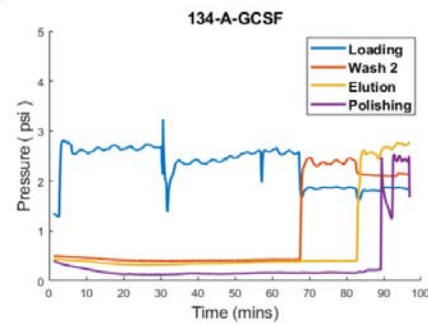
A



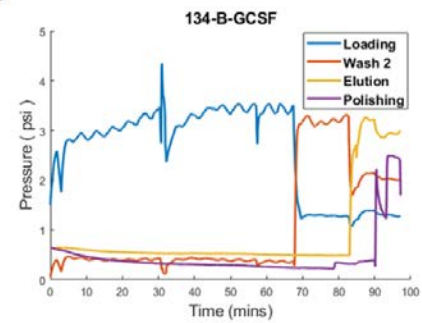
B



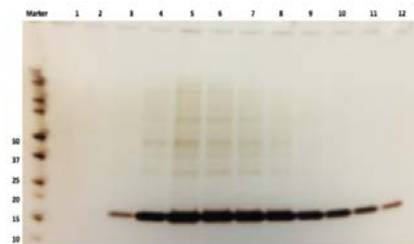
C



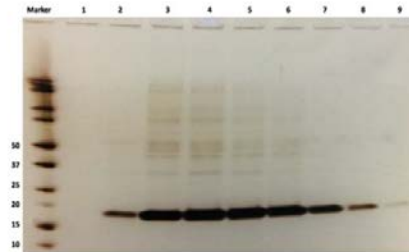
D



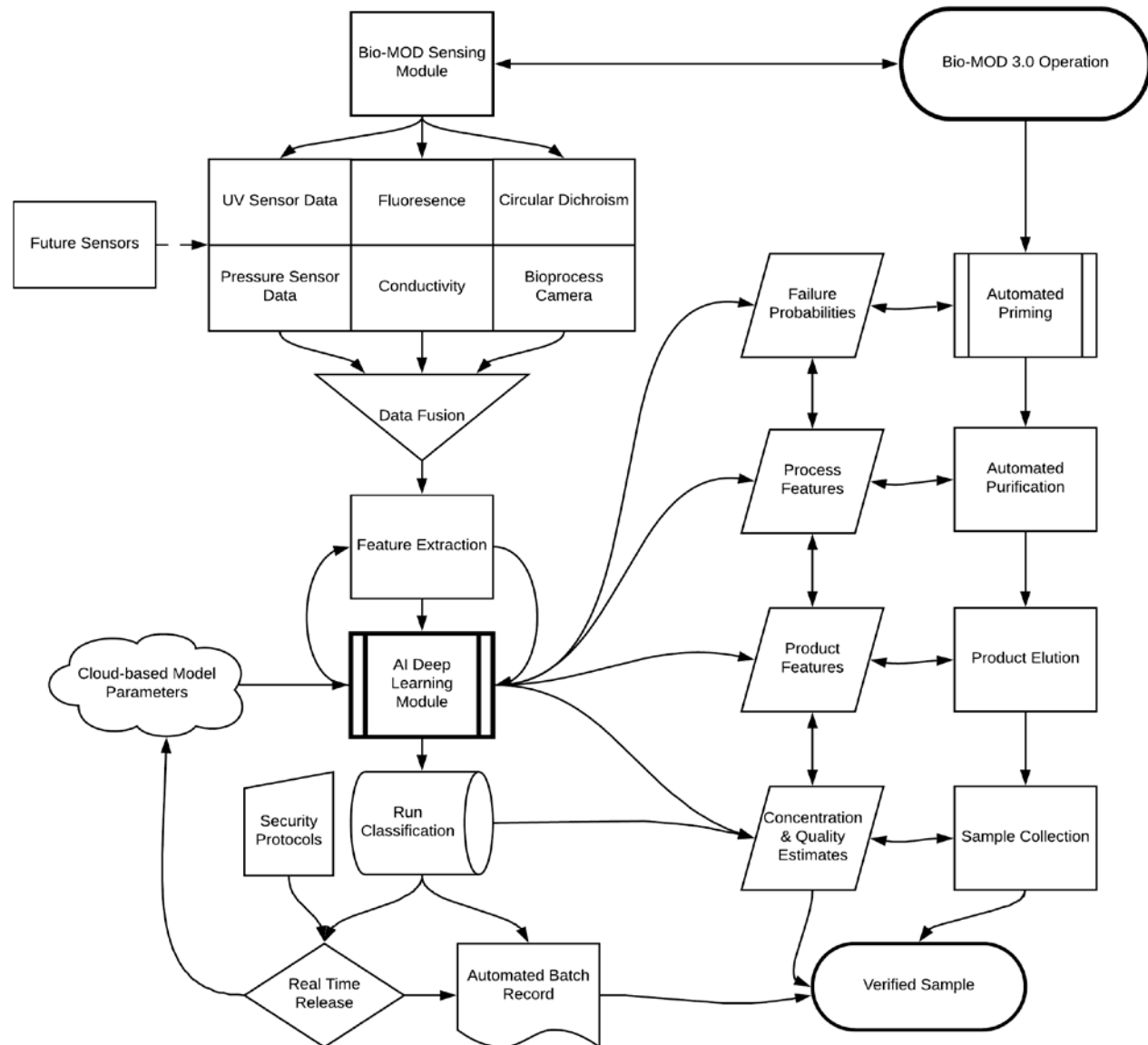
E



F



Towards 4.0
Automation
and RT
Release





Emerging Infectious Diseases - Zika

Mosquito born Zika outbreak is rapidly spreading in Americas...



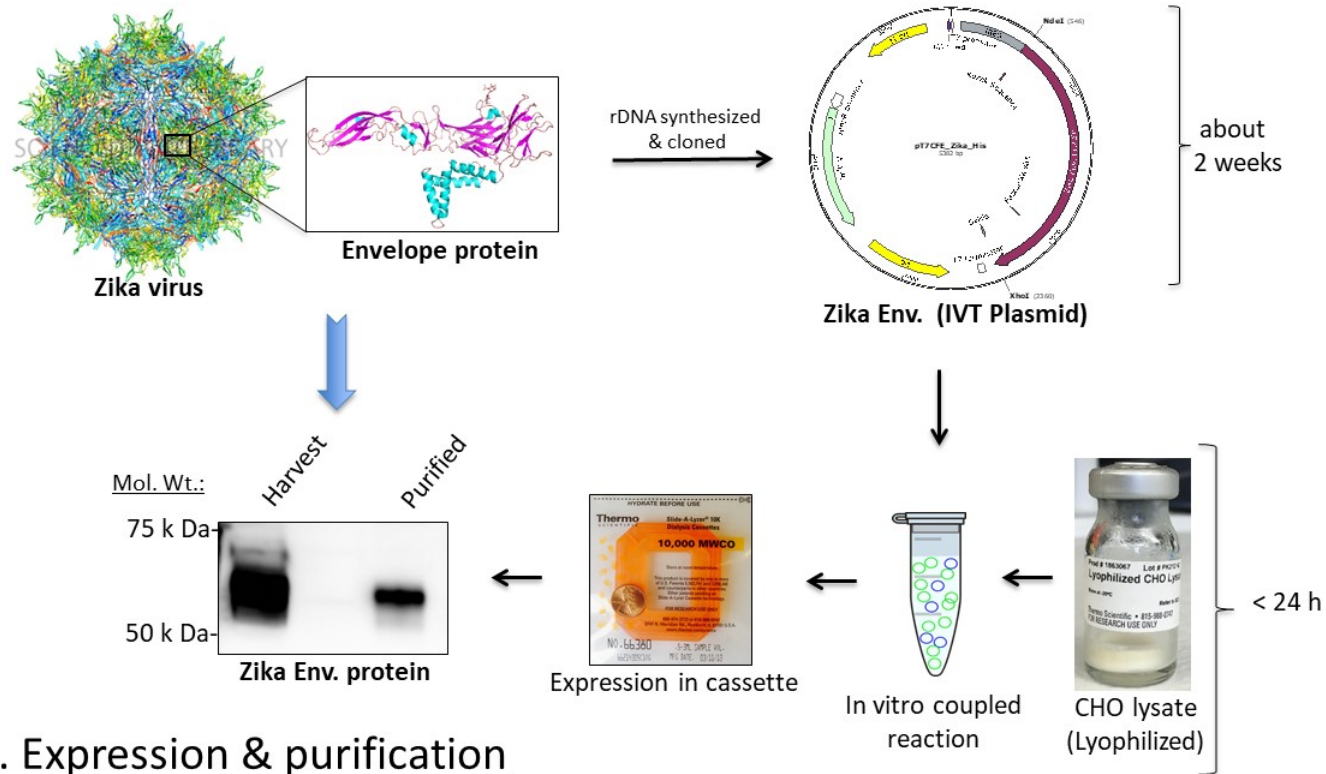
A quote from news:

“ The Centers for Disease Control in Atlanta, Georgia, warned last week there now are 107 travel-related cases of the Zika virus in 24 states and the District of Columbia.

It issued a travel advisory for pregnant women and others who are planning to attend the 2016 Summer Olympic Games in Rio de Janeiro, Brazil, from Aug. 5 to 21.”

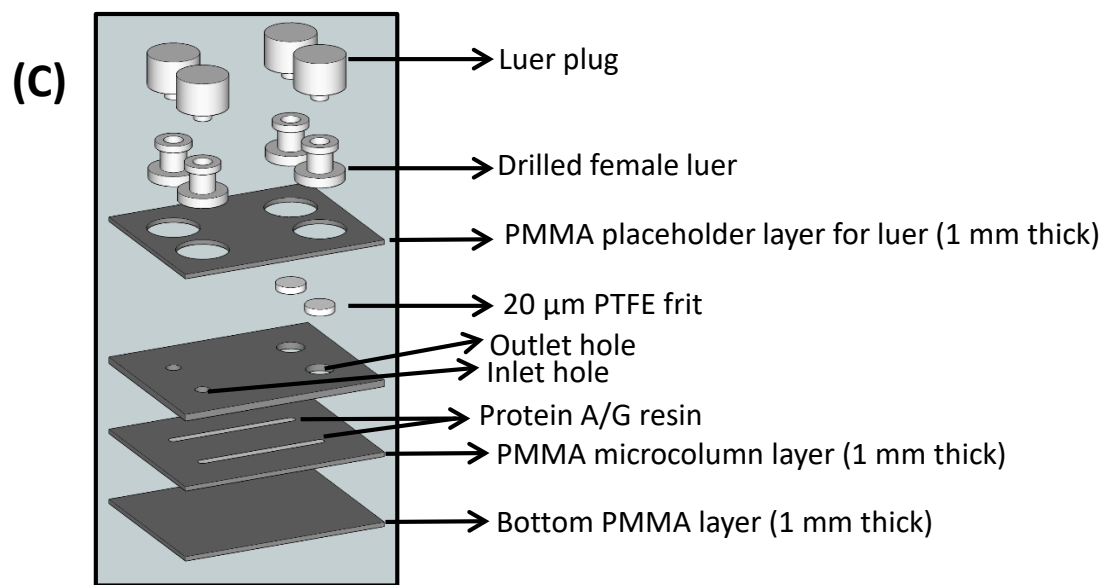
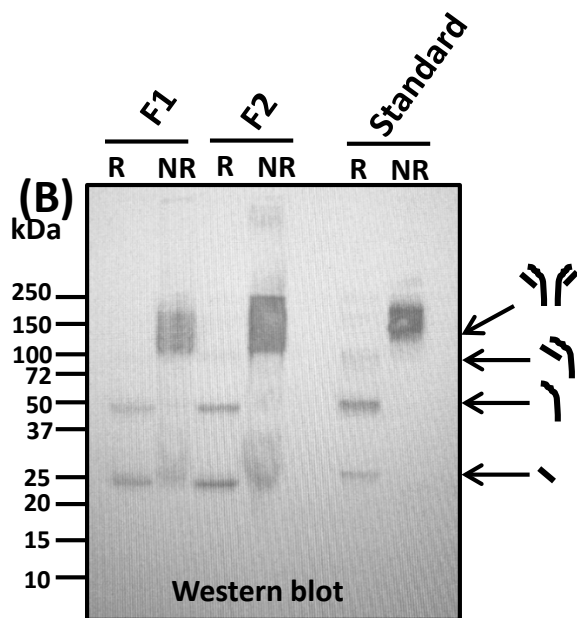
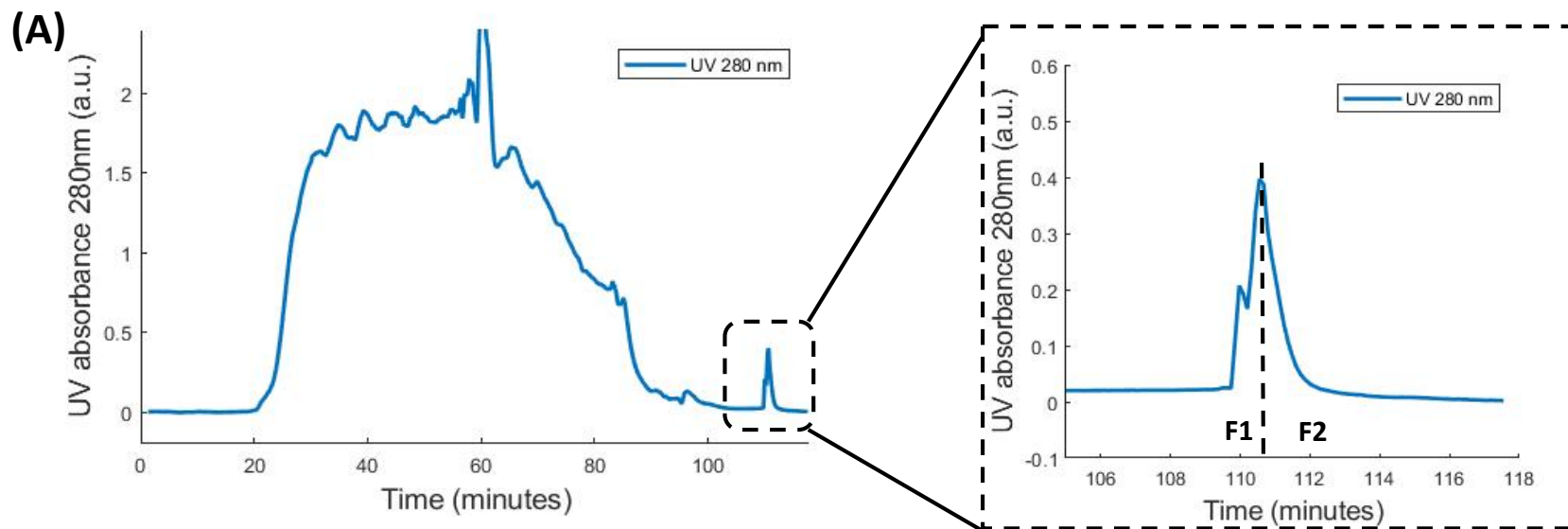
I. Synthesized the DNA for Zika envelope protein

Time line:

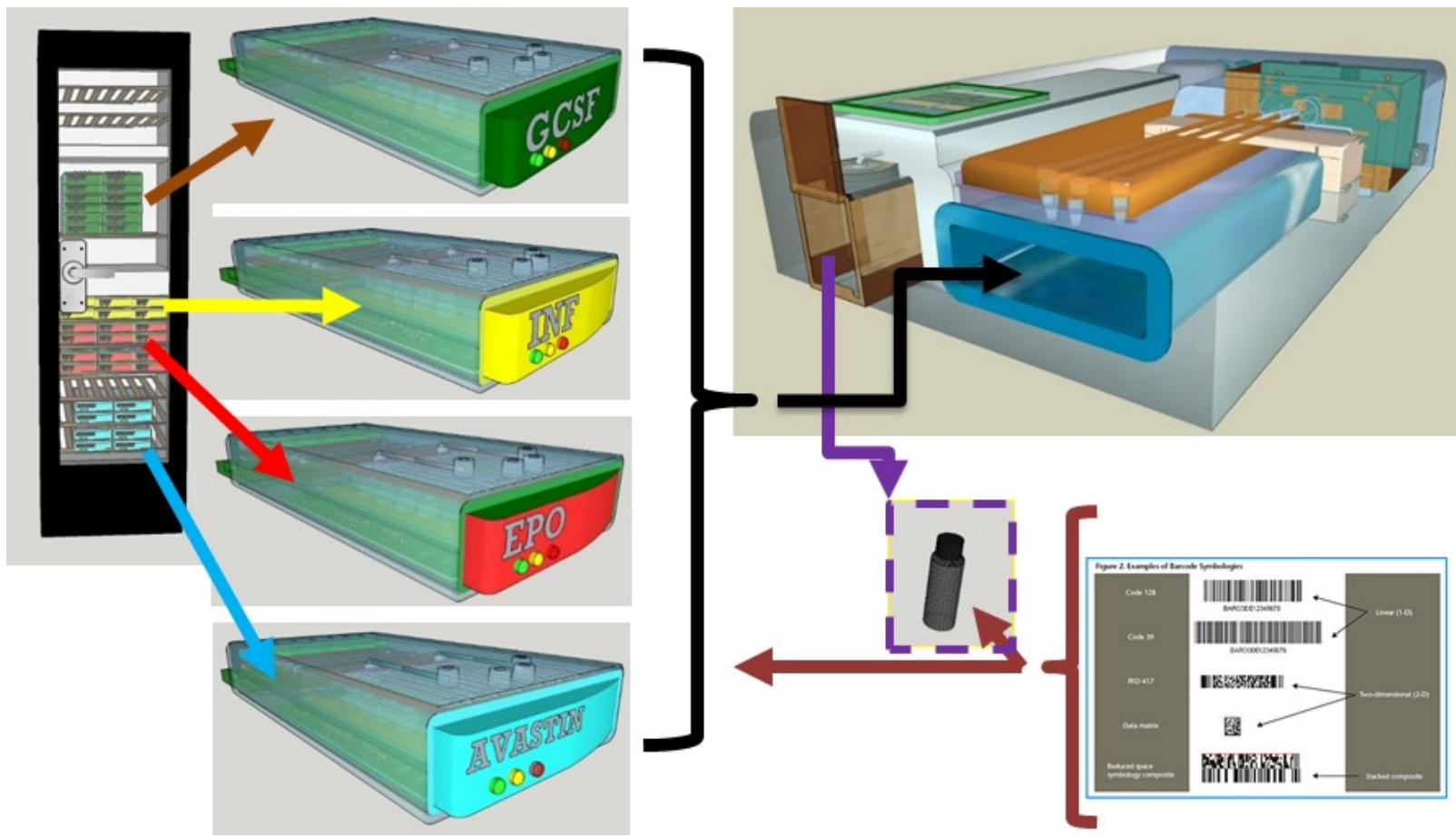


II. Expression & purification





Figure 5: Bio-MOD Purification of Humira mAb using Protein A/G μ column



Concept for Facility of the Future: JHU Focus Group Led Design



Point-of-care production of therapeutic proteins of good-manufacturing-practice quality

Rajani Adiga¹, Mustafa Al-adhami^{1,2}, Abhay Andar¹, Shayan Borhani^{1,3}, Sheniqua Brown^{1,3}, David Burgenson^{1,3}, Merideth A. Cooper ⁴, Sevda Deldari^{1,3}, Douglas D. Frey^{1,3}, Xudong Ge^{1,3}, Hui Guo^{1,3}, Chandrasekhar Gurramkonda ¹, Penny Jensen⁵, Yordan Kostov^{1,3}, William LaCourse ⁶, Yang Liu³, Antonio Moreira^{1,3}, KarunaSri Mupparapu¹, Chariz Peñalber-Johnstone¹, Manohar Pilli¹, Benjamin Punshon-Smith⁷, Aniruddha Rao^{1,6}, Govind Rao ^{1,3*}, Priyanka Rauniyar⁸, Sergei Snovida⁵, Kanika Taurani¹, Dagmawi Tilahun¹, Leah Tolosa^{1,3}, Michael Tolosa¹, Kevin Tran¹, Krishna Vatter⁵, Sudha Veeraraghavan^{9,10}, Brandon Wagner¹, Joshua Wilhide⁸, David W. Wood⁴ and Adil Zuber³

<https://rdcu.be/2Jk8>

November 12, 2018 and 2019





FDA Approves Radiation Medical Countermeasure

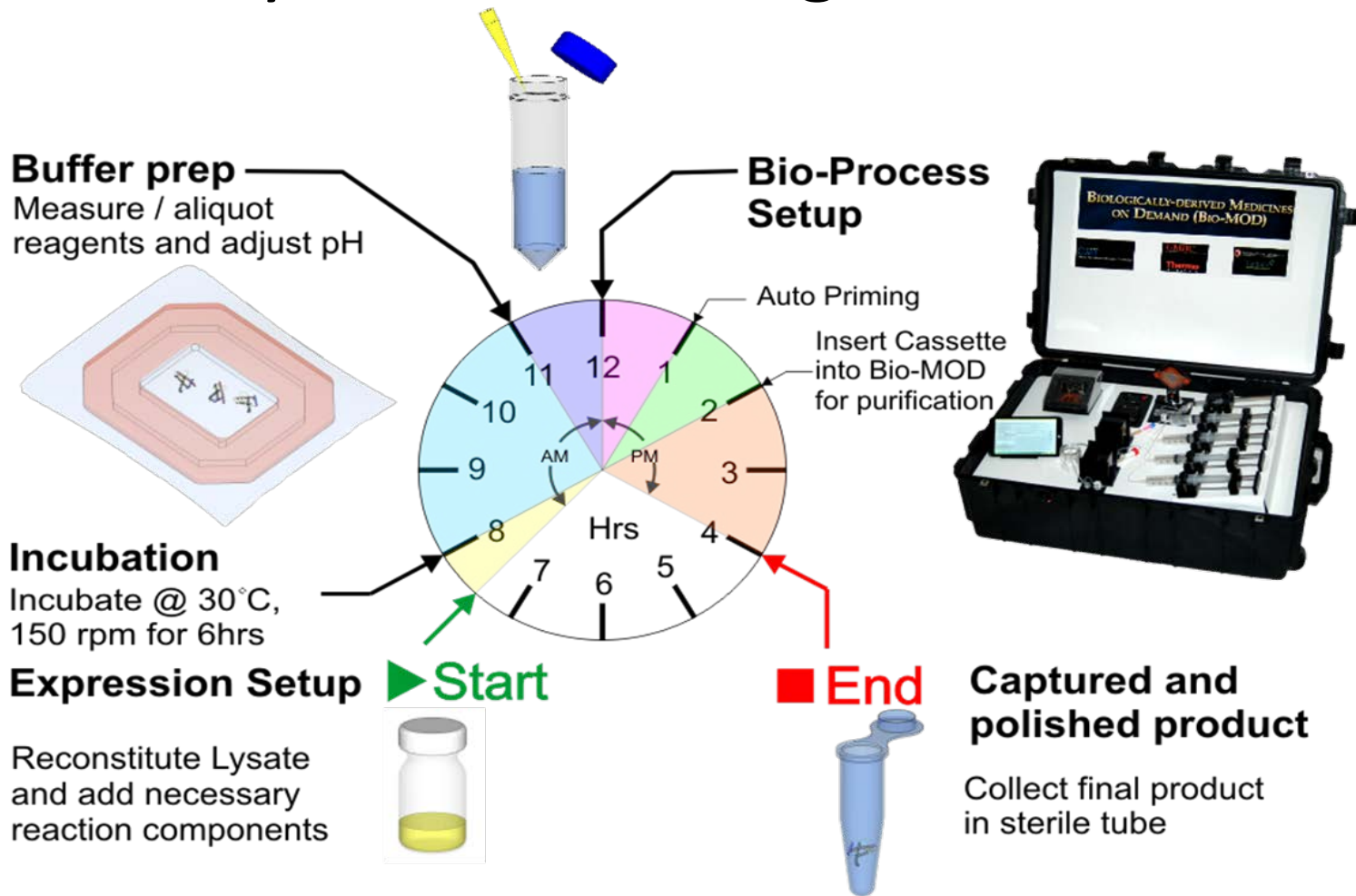
□ SHARE	□ TWEET	□ LINKEDIN	□ PIN IT	□ EMAIL	□ PRINT
---------	---------	------------	----------	---------	---------

[Acute Radiation Syndrome](#) | [Animal Rule Approval](#) | [Radiation Emergency Preparedness](#) | [Contacts](#)

FDA approves Neupogen for treatment of patients with radiation-induced myelosuppression following a radiological/nuclear incident

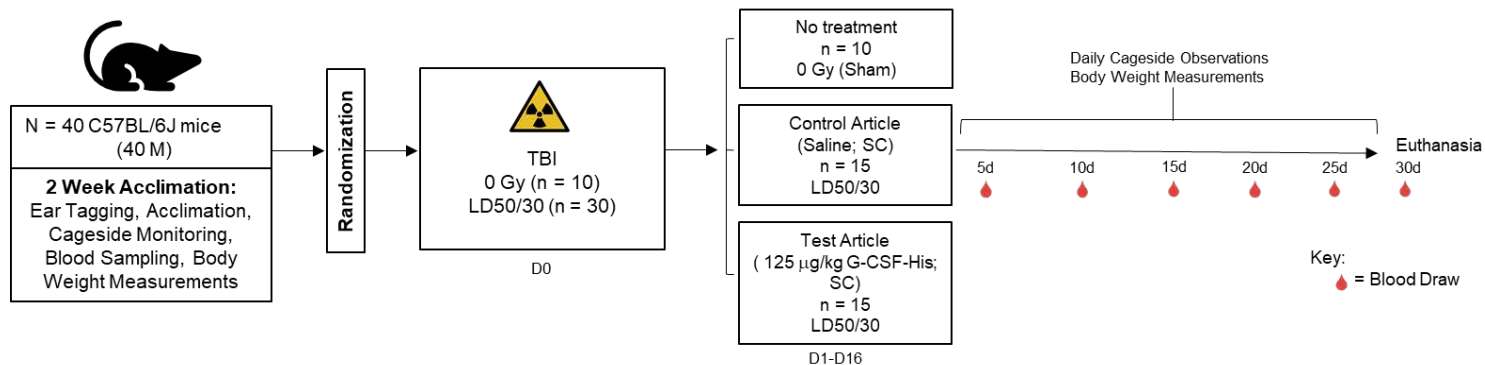
On March 30, 2015, FDA approved use of Neupogen (filgrastim) to treat adult and

Daily Manufacturing Schedule



Bio-MOD Process Clock

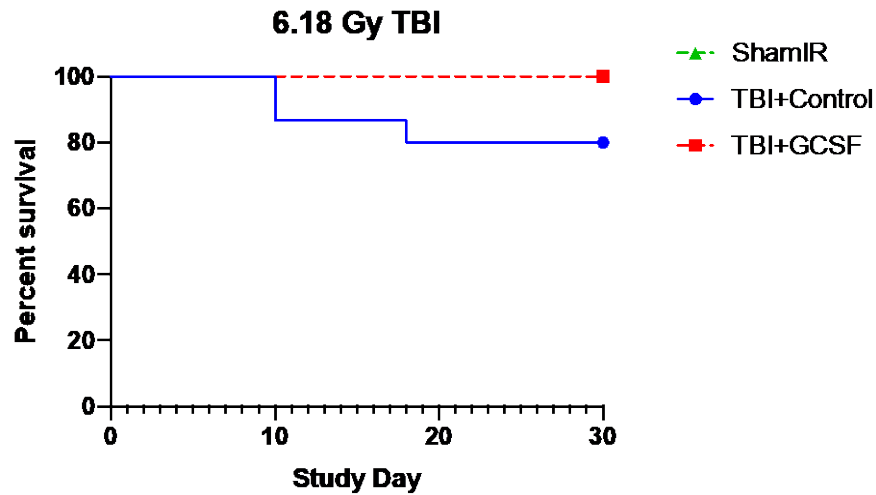
Study Design and Timeline



The study will enroll up to 40 animals exposed to sham or total body irradiation (TBI). Blood will be collected at baseline and at scheduled timepoints post-irradiation. Animals receiving test or control article will be treated beginning 24 ± 2 hours post-irradiation (D1) and treatment will continue daily until D16. Animals will be monitored for 30 days post-exposure.

Study Initiation	October 24, 2018
Receipt of Animals	November 14, 2018
Allocation of Animals	November 13, 2018
Irradiation (D0)	November 29, 2018
Treatment Initiation	November 30, 2018
Dosing Completion	December 15, 2018
Experimental (In-life) End	December 29, 2018

Kaplan-Meier curves for 30-day survival



Treatment (Tx) Group	Radiation Exposure	Radiation Dose (Gy)	Group Size	Number of Survivors at D30
No Tx	Sham	0	10	10
Saline	TBI	6.18	15	12
G-CSF-His	TBI	6.18	15	15

RESEARCH ARTICLE



Bioseparations and downstream processing

Manufacturing biological medicines on demand: Safety and efficacy of granulocyte colony-stimulating factor in a mouse model of total body irradiation

Rajani Adiga¹ | Abhay Andar¹ | Shayan Borhani¹ | David Burgenson¹ |
Sevda Deldari¹ | Douglas Frey¹ | Xudong Ge¹ | Chandrasekhar Gurramkonda¹ |
Erick Gutierrez¹ | Isabel L. Jackson² | Yordan Kostov¹ | Yang Liu¹ |
Diana Newman² | Joseph Piegols² | Benjamin Punshon-Smith¹ | Govind Rao¹ |
Leah Tolosa¹ | Mike Tolosa¹ | Zeljko Vujaskovic² | Chelsea Wagner² |
Lynn Wong¹ | Andrew Zodda²

This is now personal

Will-Call

Call your doctor for medical advice about side effects.
You may report side effects to the FDA at 1-800-FDA-1088.

PHARMACY

St.

AMOUNT	\$12263.07
YOU PAY	\$0.00
INS PAYS	\$12263.07

70

DOB:

Rx

11/12/18

Pr

2

NEULASTA 6 MG/0.6ML SOSY

NDC#

Days Supply 28

NABP

CVS CAREMARK

RPh:

CARE CARD

NDC Ref:

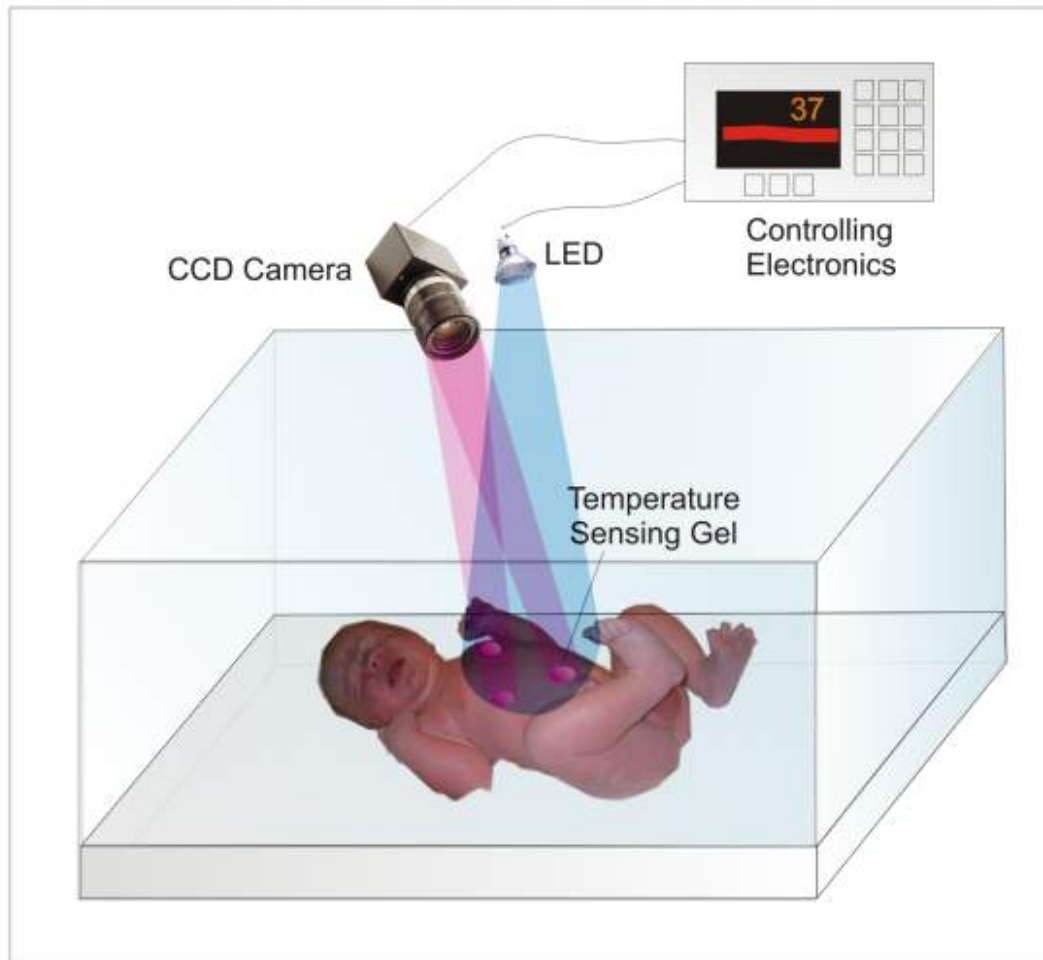
HIPAA

\$0.00

You
Pay



GE Healthcare Collaboration





Non-contact or non-invasive parameter sensing.



*Brings LIGHT
to
LIFE*



CAST
Center for Advanced Sensor Technology

The Eureka Moment!

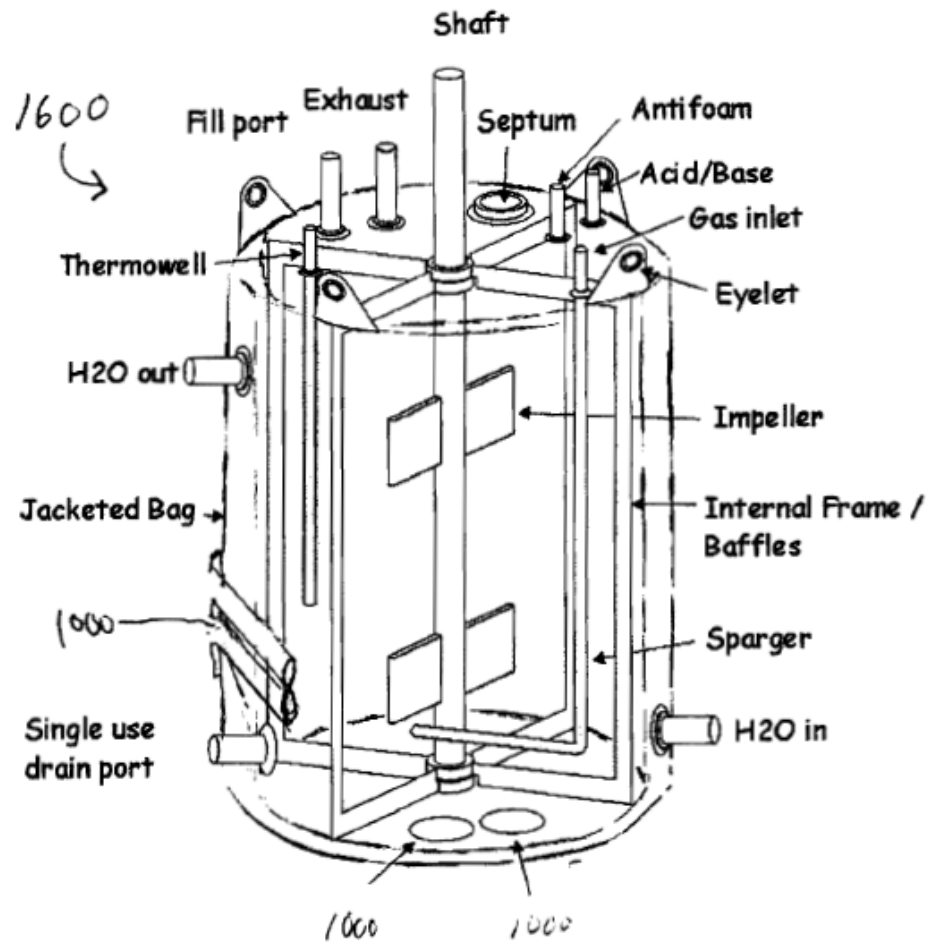
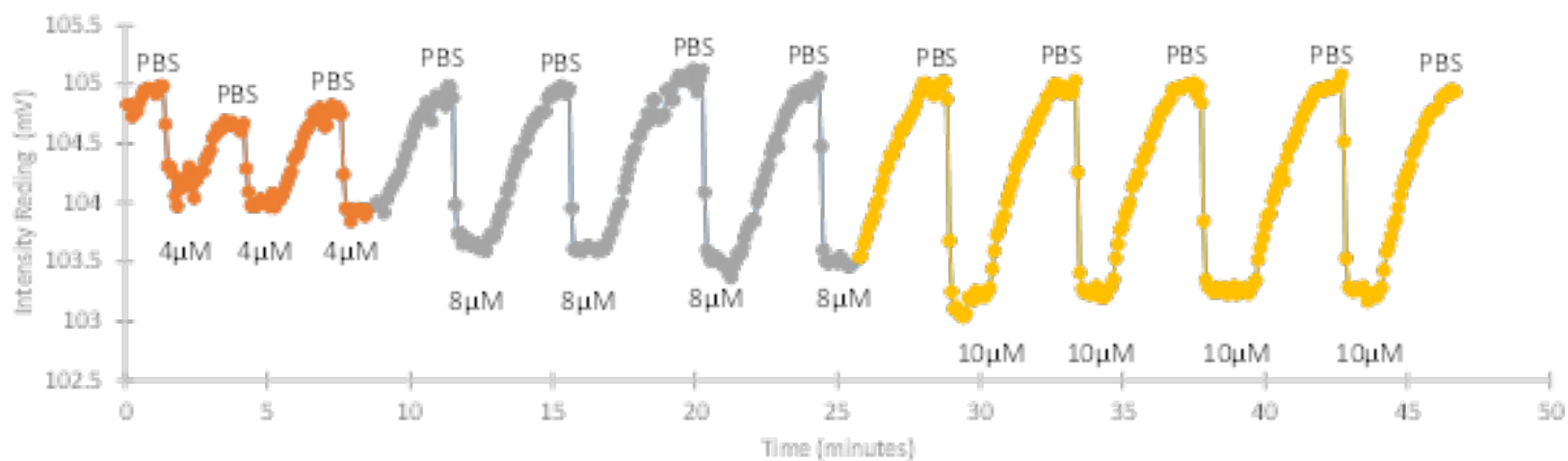
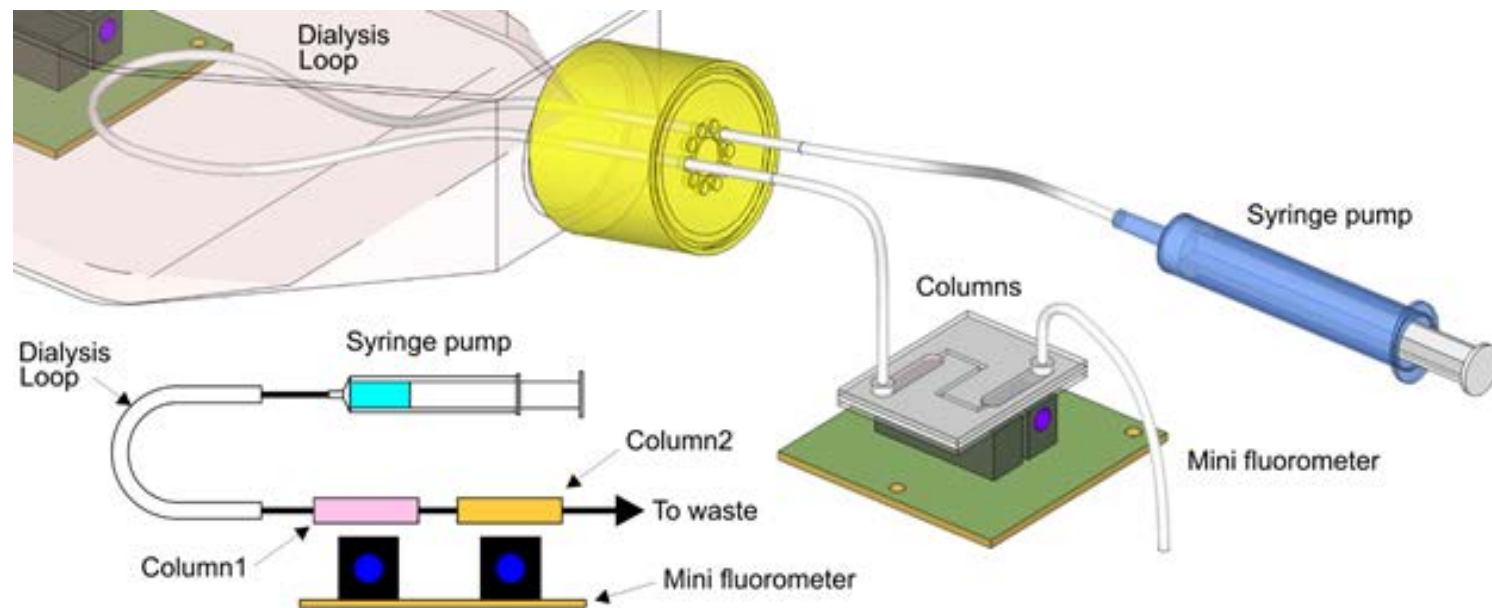
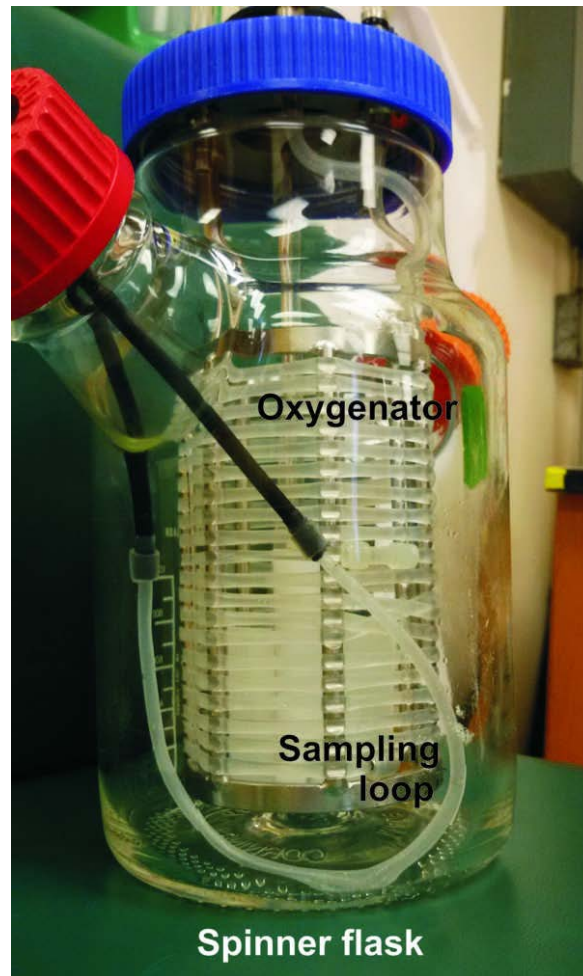
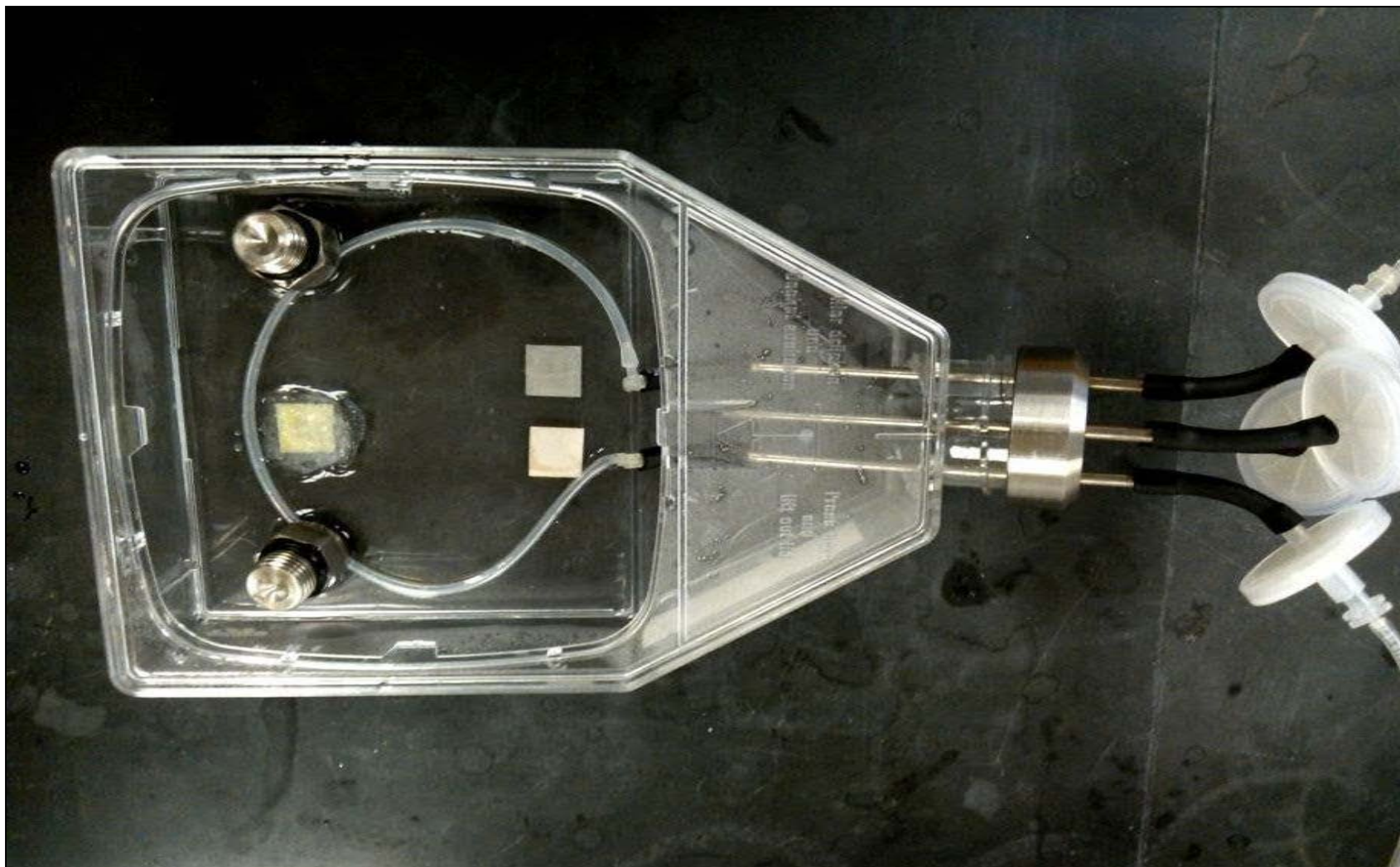


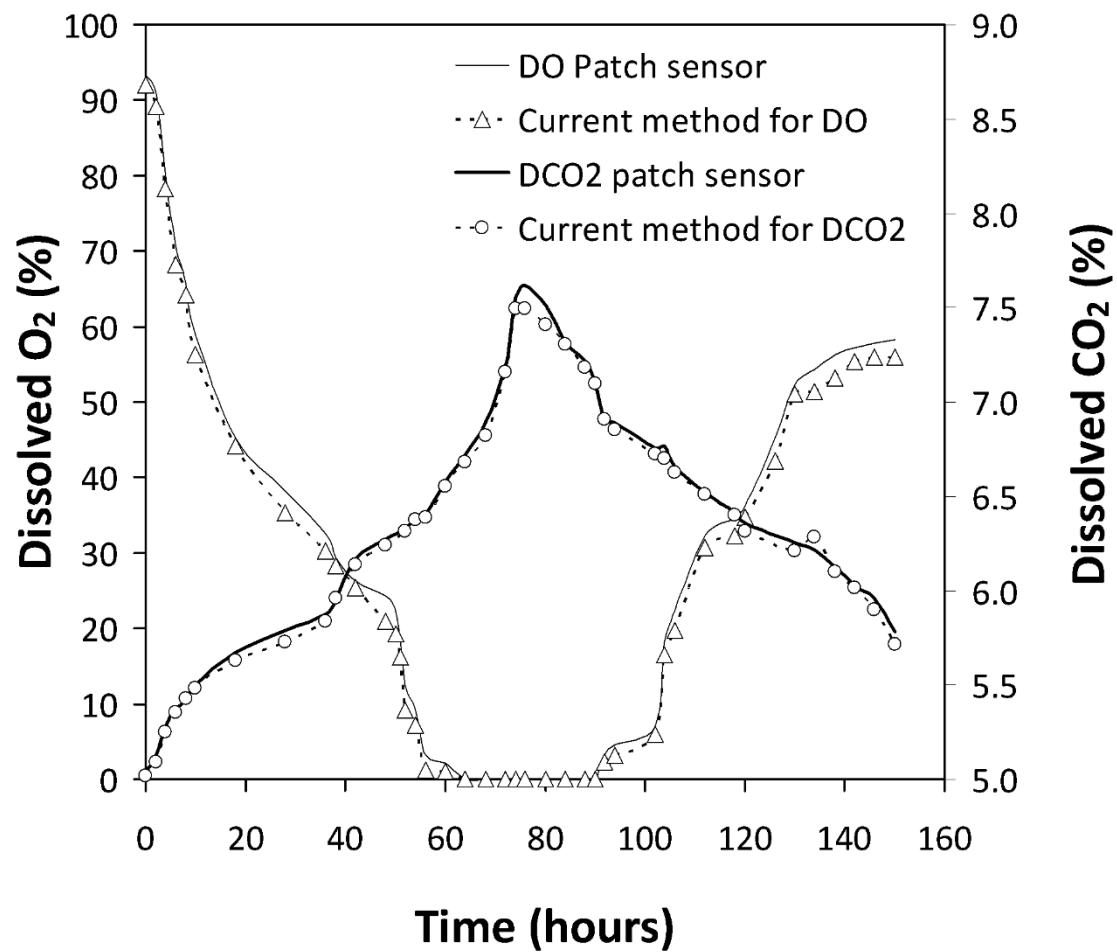
Fig 12



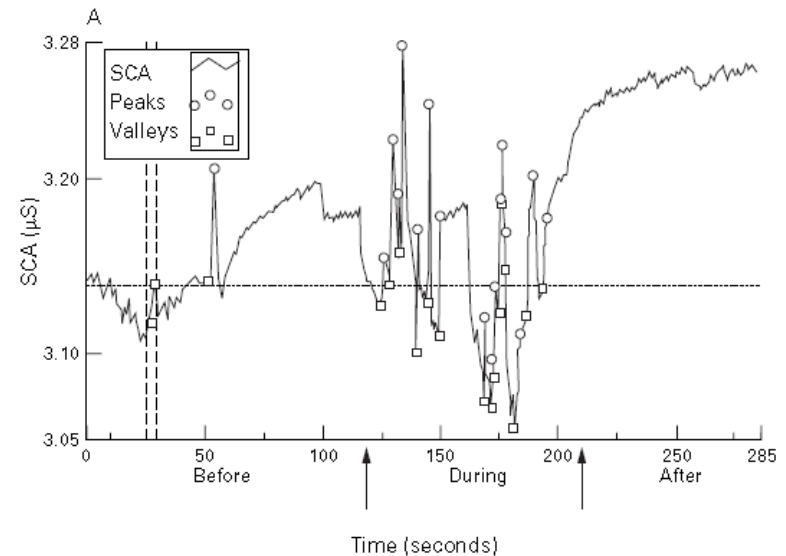


Top view





Current practice for blood glucose – collect blood by arterial/venous draw or a heel lance



Arch Dis Child Fetal Neonatal Ed 2000;83:F143–F147

Risks –

- Acquired infections
- Anemia
- May need transfusions

Causes pain and undue distress with short and long term consequences

Transdermal Glucose Monitoring Concept



Figure 1 Noninvasive glucose monitoring system for the neonatal intensive care unit: (left) Sample head for the noninvasive transdermal measurement of glucose on the thigh of the neonate; (right) the complete system showing the instrumentation.

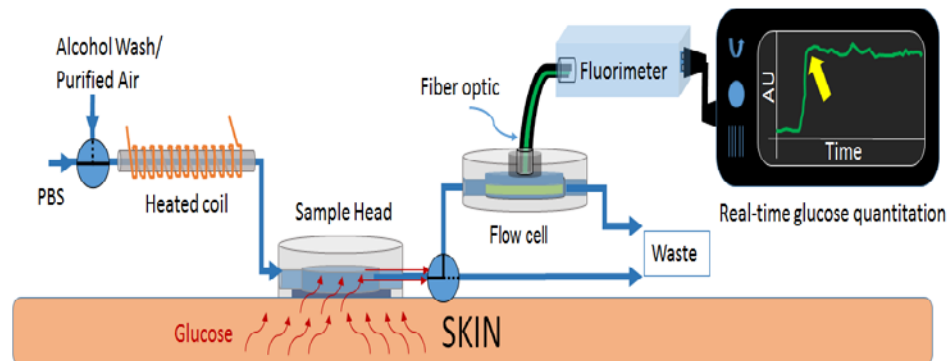


Figure 2 The noninvasive glucose monitoring system for neonates showing the fluidic system with the sample head affixed to the intact skin and the analytics system comprised of the fiber optic biosensor, fluorimeter and read out.

Adult data show good correlation between blood glucose and transdermal glucose

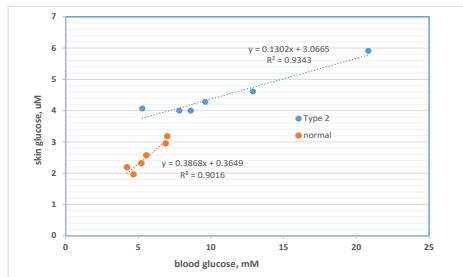
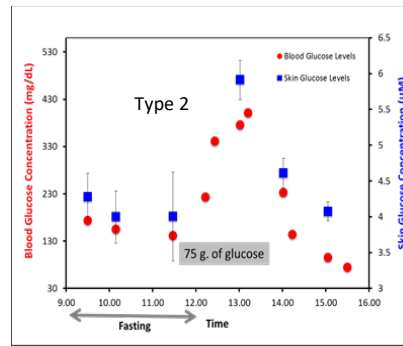
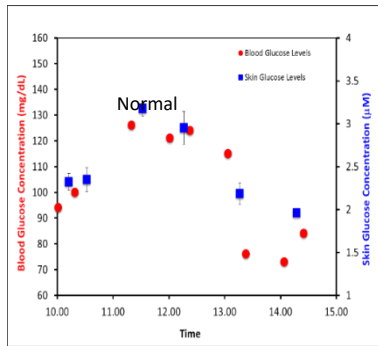
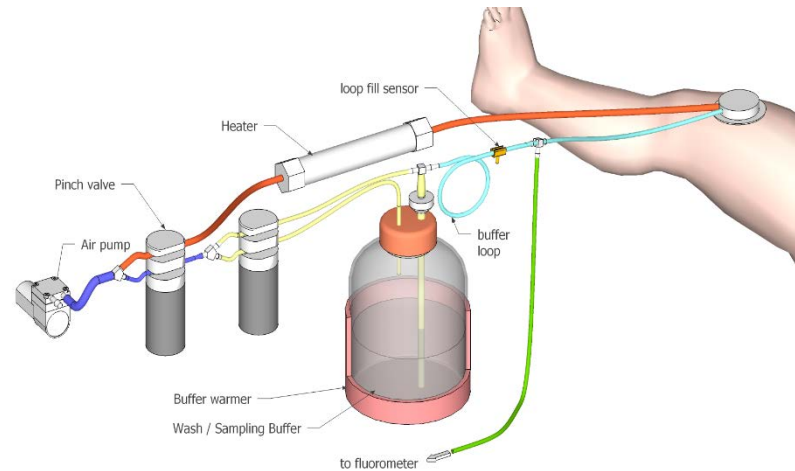
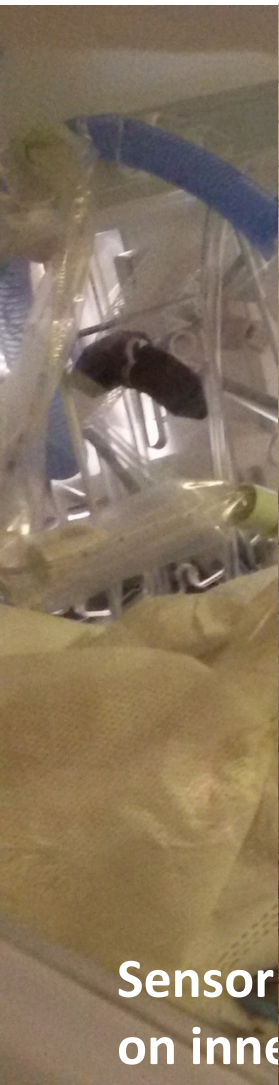
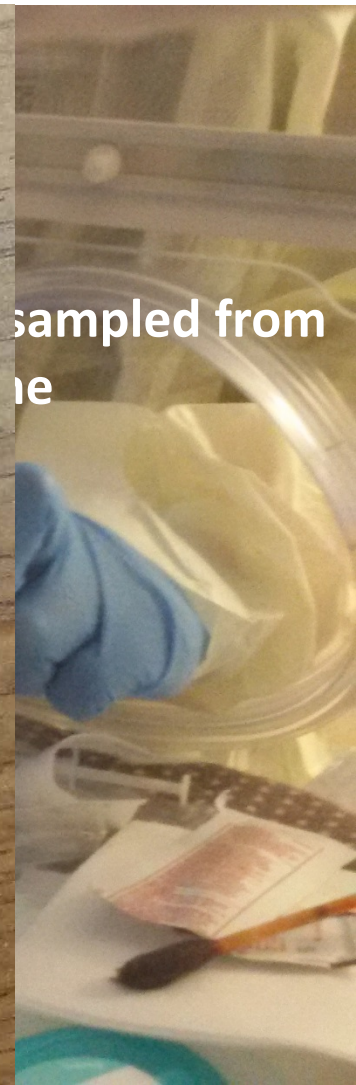
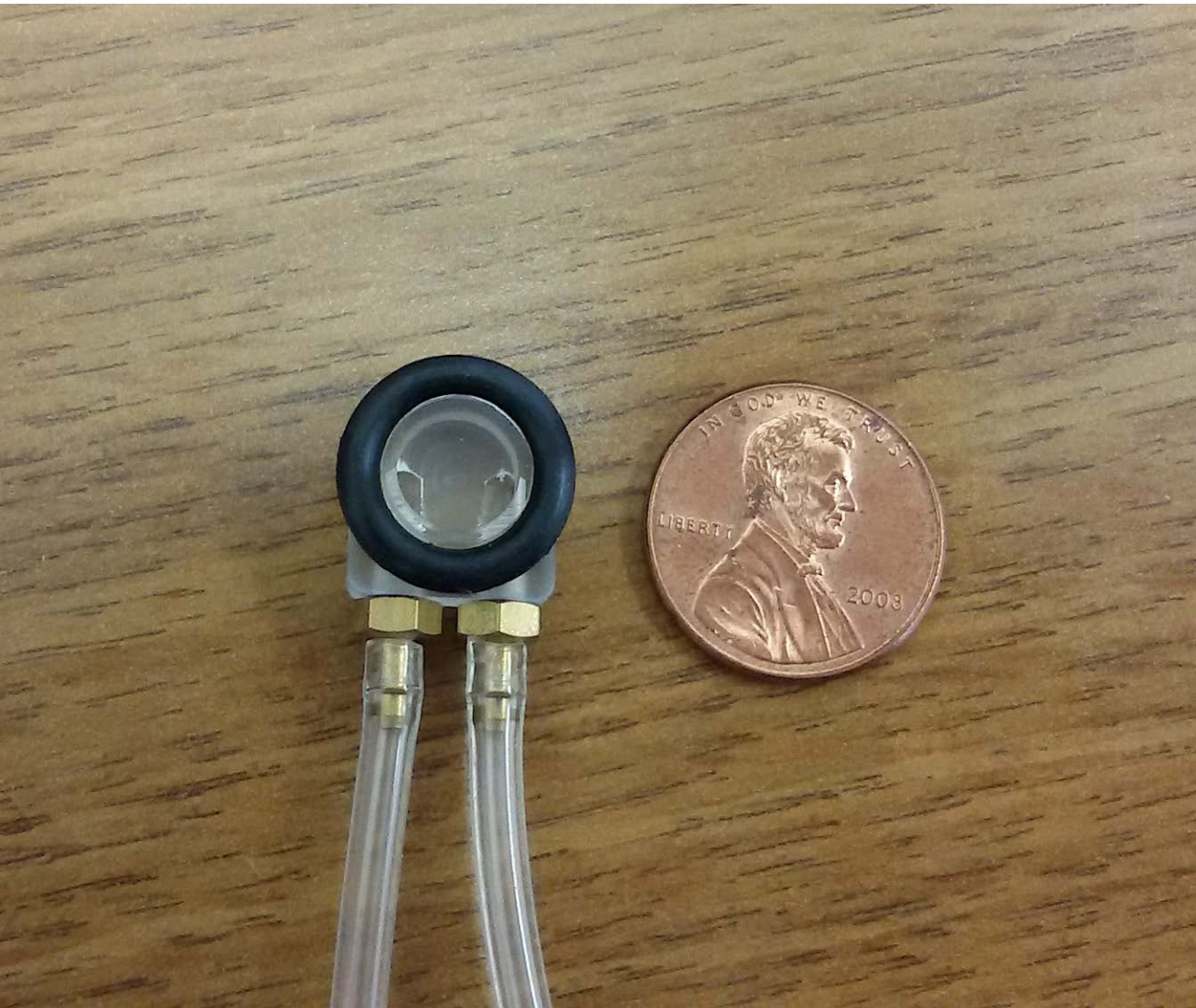


Figure 3 Goal is Lower cost noninvasive glucose sensing system.



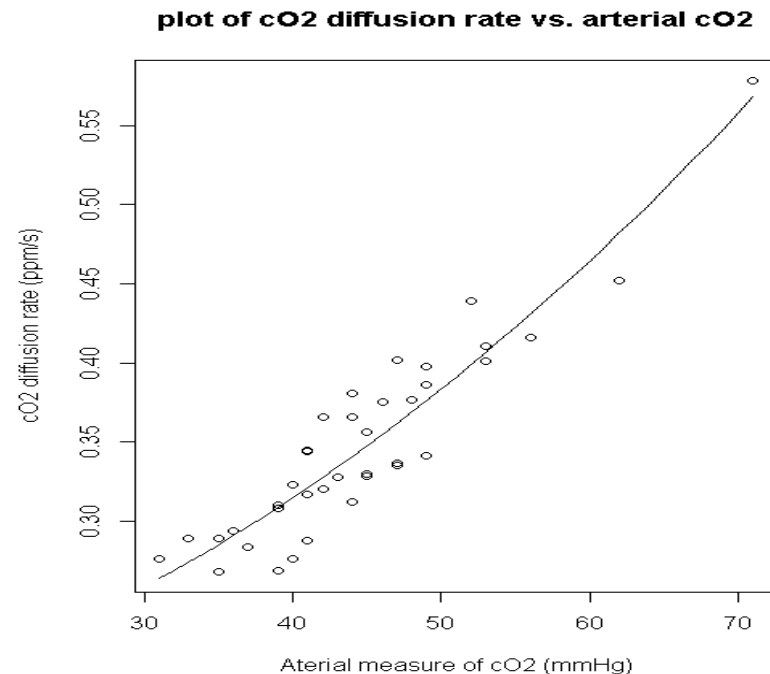
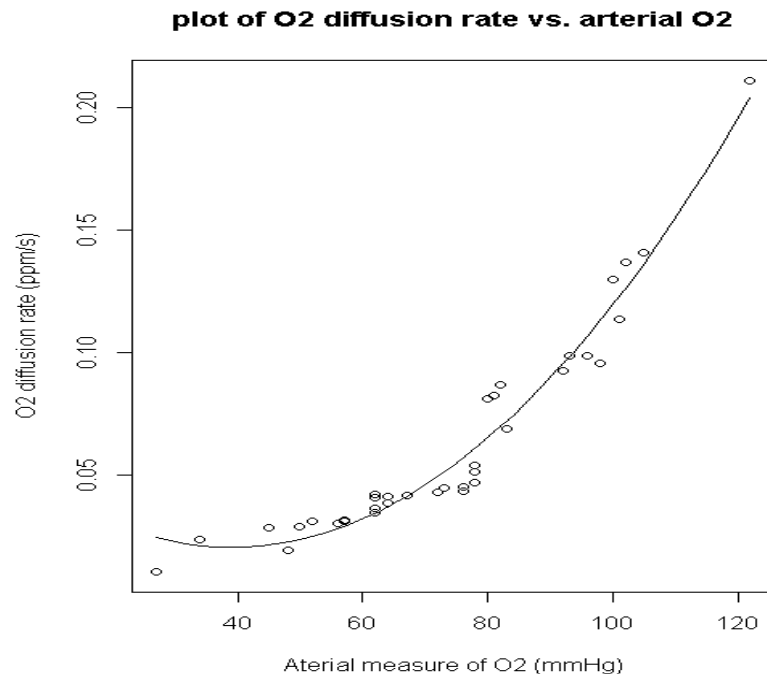


Sensor
on inner



sampled from
the

Correlation between the initial transcutaneous diffusion rates and their respective arterial blood partial pressures for 9 neonates with NO prior calibration!

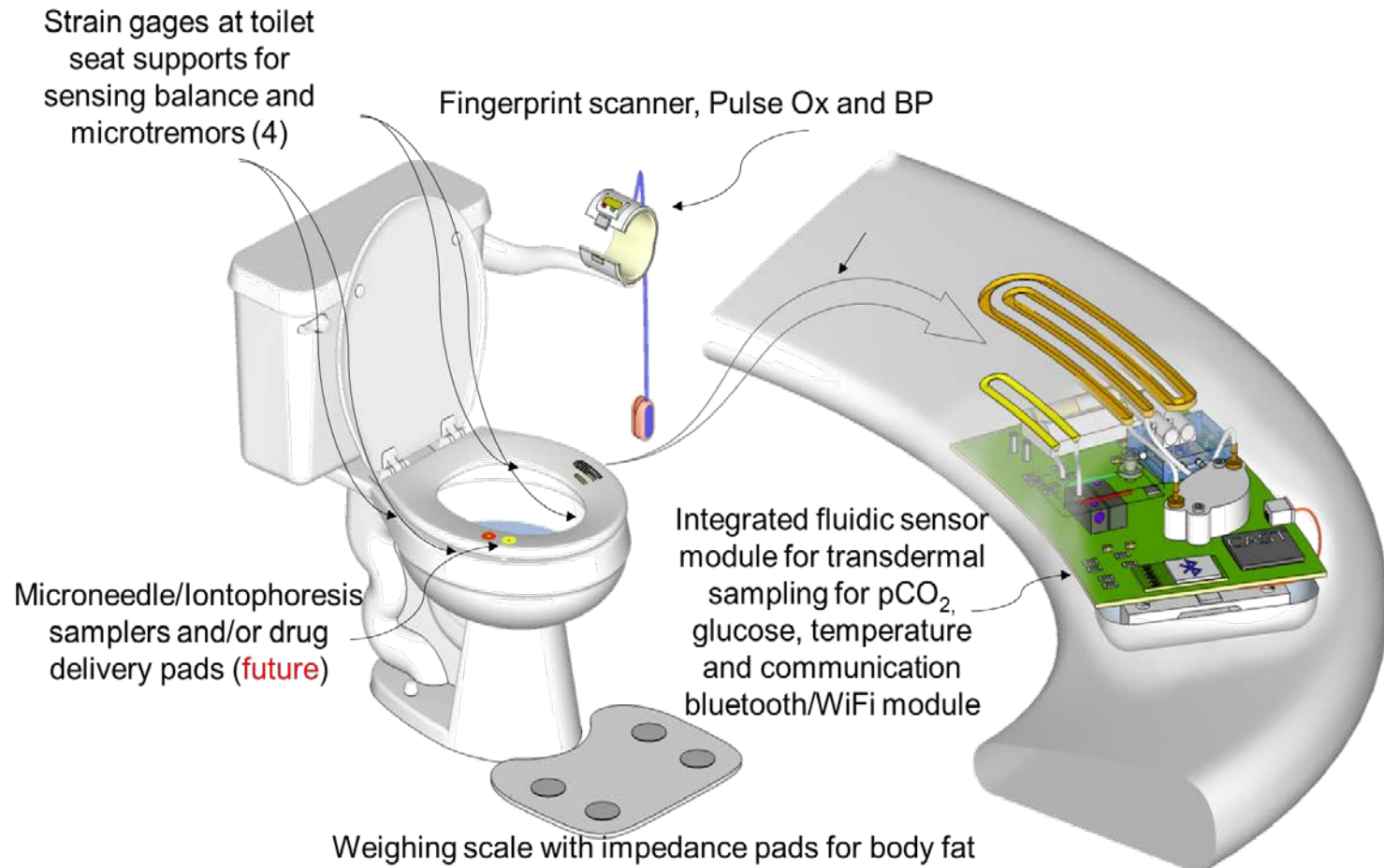


Plot of transcutaneous diffusion rates vs. arterial blood measures of O₂ and CO₂ along with a line fitted using a quadratic regression model. Normal paCO₂ range is 40- 50 mm Hg and hypocarbia is <35 mm Hg, hypercarbia is >55 mm Hg. The normal paO₂ range in adults is 80-100 mm Hg at sea level. For preterms, the risk for retinopathy of prematurity is when paO₂ >80 mm Hg.

Adherence (Active)/Compliance (Passive) Problems Increase Costs by \$350 Billion/yr

Unintentional Forgetting Shift work Confusion Work restrictions Mental illness Memory loss Lack of time	Intentional Mistrust Fear of side effects (actual or perceived) Cost Mental illness Lack of belief in benefit Fear of dependency Fear that medication is dangerous Lack of desire No apparent benefit
Table I. Behavioral factors responsible for patient lack of adherence to physician advice and/or compliance with treatment regimen. https://www.aafp.org/fpm/2013/0300/p25.html#fpm20130300p25-b2	

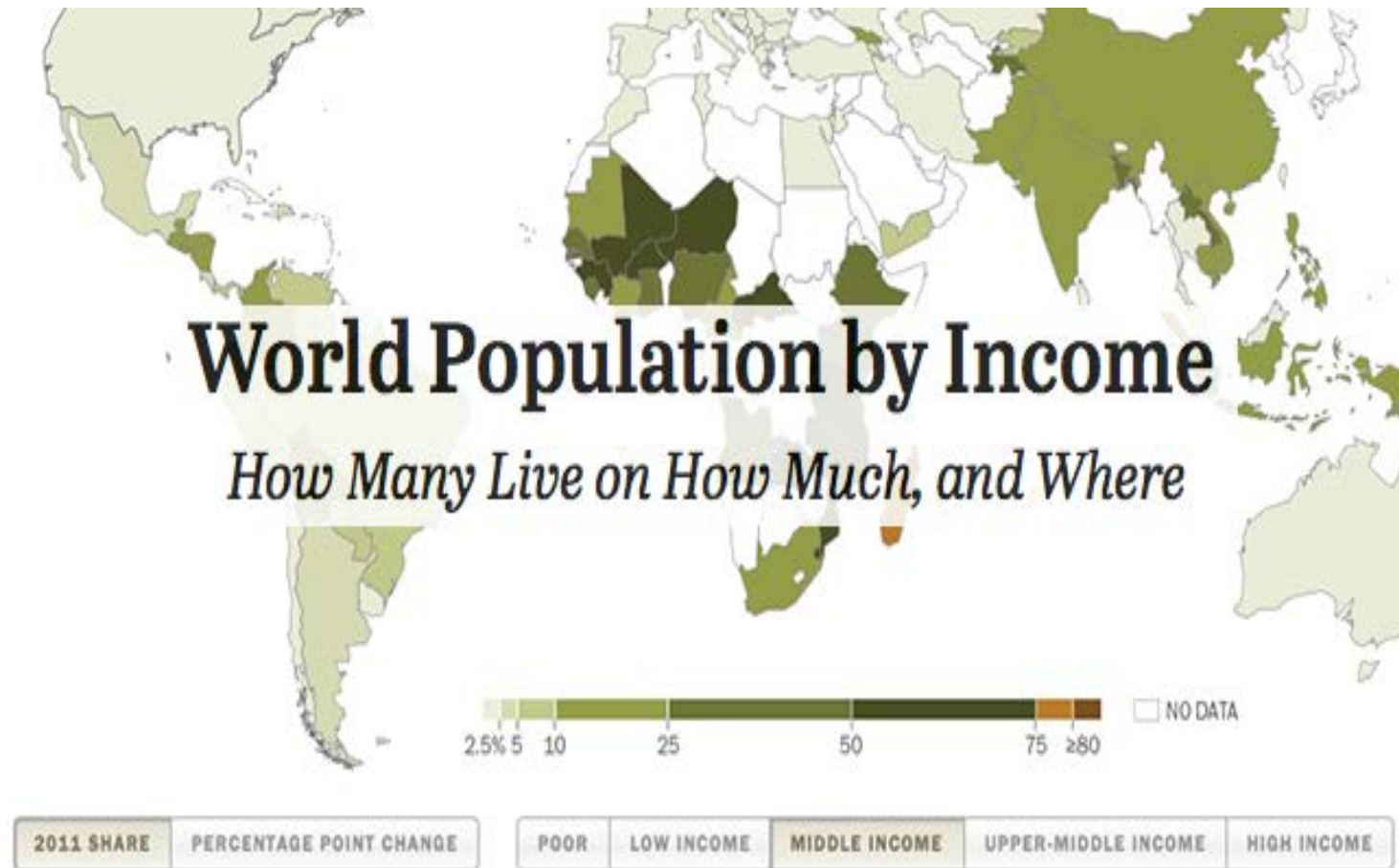
How to improve? Integrate Health Status Monitoring Into Daily Routine



Testing Underway!



Population living on <\$10/day or 71% of the World Population (5 Billion)
55.7% in US are High Income, defined as >\$50/day (NOT a typo, Pew Research!)
CURRENT PRICING FOR HEALTHCARE IS UNSUSTAINABLE AND IRRATIONAL

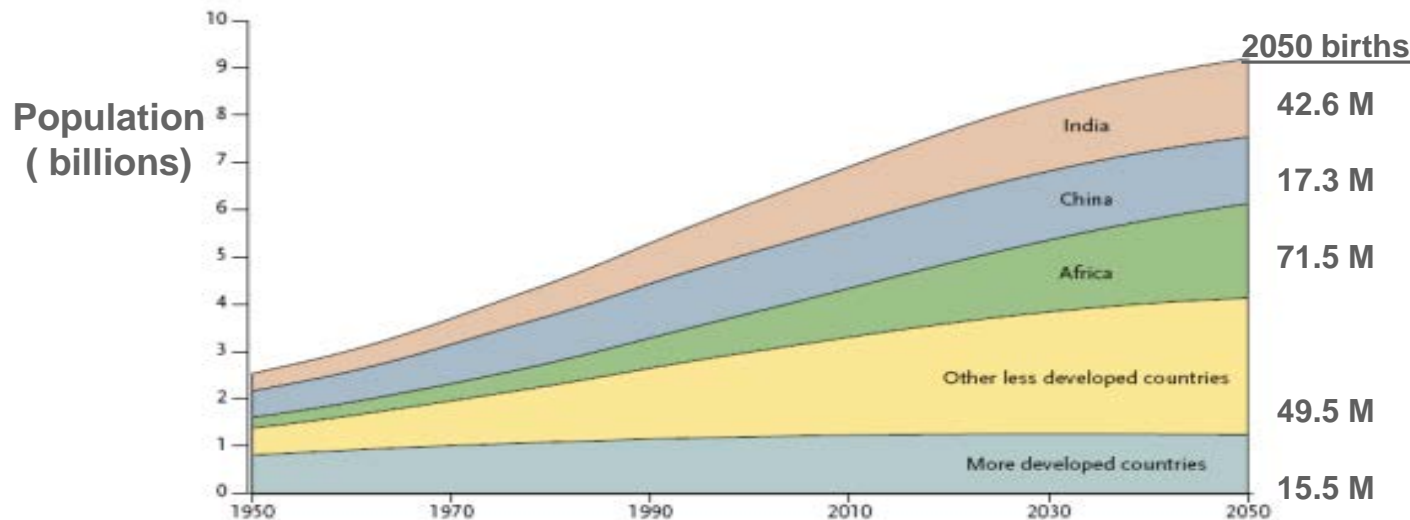


Maternal and infant care

Clinical & demographic drivers

2010 maternal & child health statistics*

- >350K mothers / yr die during pregnancy or childbirth
- 3.1M infants / yr die in neonatal period (1st 4 weeks of life), which doesn't include 3.3M stillborns
- 60-80% of newborn deaths occur in low birth weight babies
- Prematurity rate 10-12% worldwide**
- 66% of newborn deaths occur in South Asia & Africa



Top reasons for mortality

- Preterm births
 - Asphyxia
 - Maternal hemorrhage
- Infections for both

Aligned with MDG



Goal 4

Reduce Child Mortality



Goal 5

Improve Maternal Health

*Data: The Lancet, [Volume 375, Issue 9730](#), Pages 1988 - 2008, 5 June 2011

** WHO World Health Report – 2008: Mother & Child Health

Visiting Karuna Trust Primary Health Care Center



Physician expressing the need for low-cost incubator/warmer



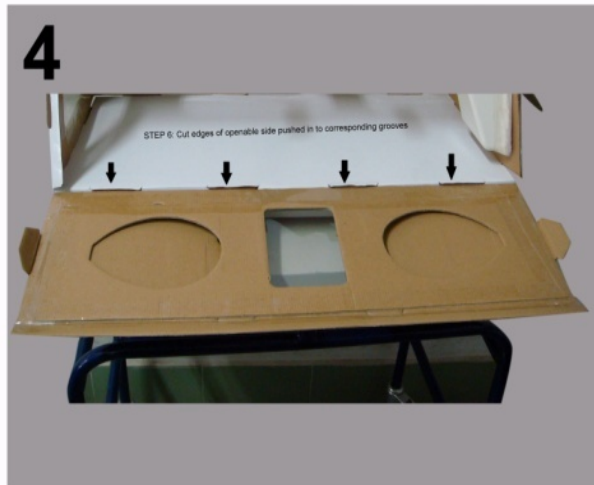
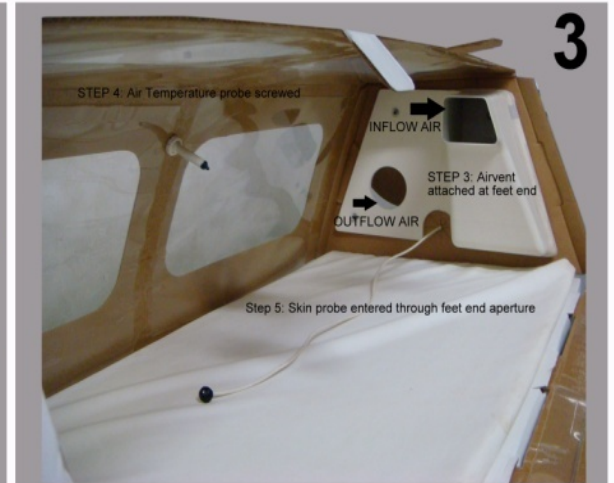
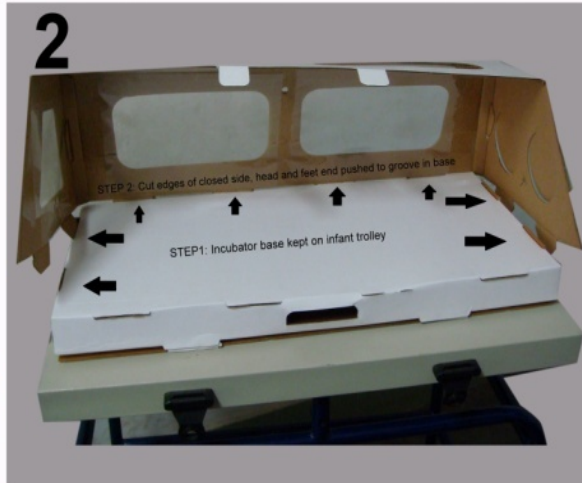
Interactive Survey With Healthcare workers- Idea for Home Use Born Here

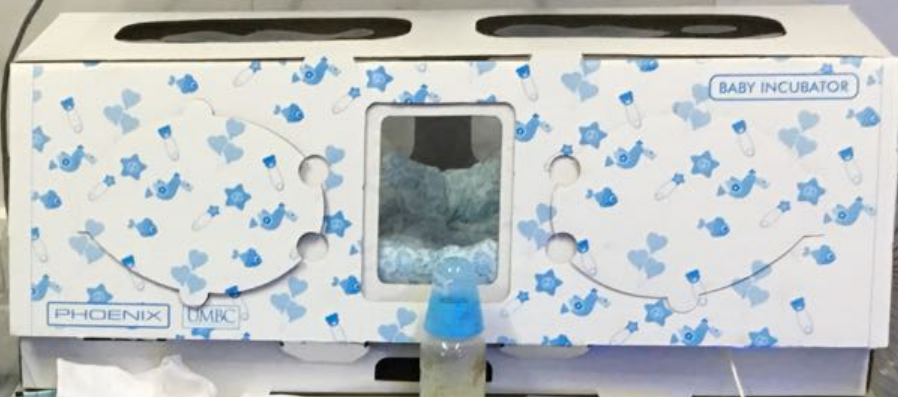


Phoenix Partnership Secured; 10% over Cost (Manufacturing/Sales/Distribution/Support)



Methods – Incubator Preparation





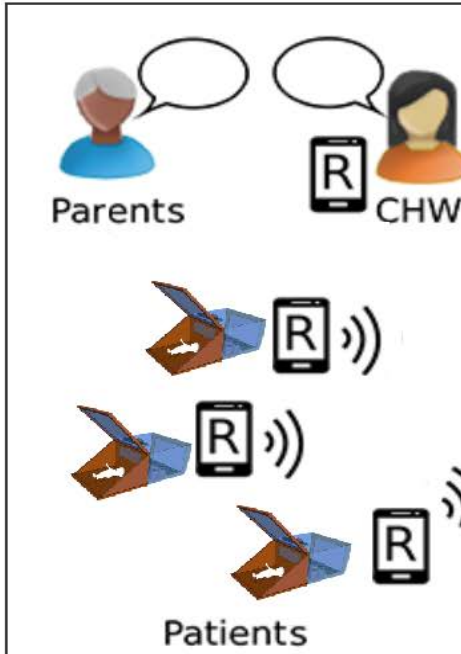
Ready to use
STUDY INCUBATOR
NO: 223 SW



Baby weight and image transmitted



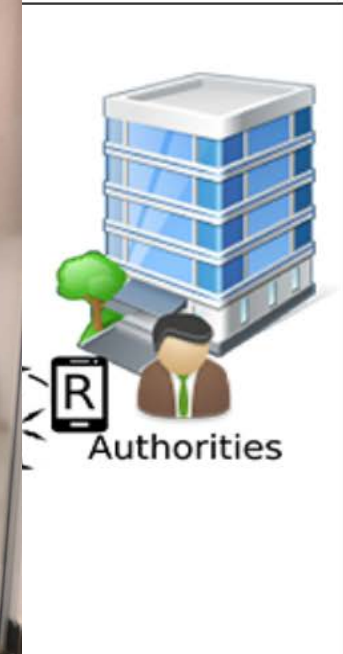
Evolution of design partnership with



Project concept. Low-cost smart
providers who monitor routinely
community health worker (CHW)
and better health outcome.



n- seek



and weight to health care
ected and reported back via
er mortality and malnutrition



Acknowledgements: Taxpayers!

Collaborators: Jose Remacle, Miral Dizdaroglu (NIST), Janice Lumpkin, Joseph Qualitz, James E. Bailey, William E. Bentley, Fow-sen Choa, Ray Chen, Doug Frey, Tim Barbari, Kesava Rao, Kyle Stump, Doug Frey, Mark Marten, Tony Moreira, Kurt Brorson, Jing Han, Bharat Joshi, Raj Puri, Indira Hewlett (Raghupathy, Setty), (FDA), Rik Wanninkhof, Rose Viscardi, David Woo, David Wood, Linda Bambrick, Peter Latham, Krishna Vattam (Thermo Fisher), Gary M. Carter, Geetha Ram, J. Sashidara Prasad, Jyoti Pande, Vinod Paul, Rajeev Seth, Tulika Seth, Arun Venkatesan, Sashi Kumar, Nachiket Mor, H. Sudarshan, Dharmapuri Vidyasagar, Ramya Gopinath, Balu Balasubramaniam, and Joseph R. Lakowicz. Anurag Rathore, James Swartz, Michael Jewett, Brad Bundy.

Lab: Eric L. Winter, Bing-Chun Chao, Lisa Eichhorn, Maria Patchan, Loc Trinh, Roscoe Bartlett, Simon Kwong, Marco Cacciuttolo, Joachim Buchholz, Guihua Cao, Rachel Maria Santos, Renee Albano, Jennifer Bixler, Jincal Li, Atul Gupta, Marwan Akar, Jingjin Harms, Peter Harms, Natraj Ram, Canghai Lu, Xudong Ge, Jiemin Hu, Kegang Chen, Abbey Kirumira, Elizabeth James, Steven Altman, Shabbir Bambot, Jeffery Sipior, Zakir Murtaza, Qing Chang, Leah Tolosa, Yordan Kostov, Haley Kermis, Jose Vallejos, Bhargavi Kondragunta, Shaunak Uplekar, Hong Shen, Mike Hanson, Kirit Chatterjee, Arun Ram, Joey French, Hung Lam, Derek Smith, Karuna Mupparapu, Sai Sathish, Priyanka Gupta, Ben Hasaday, Madhu Chatterjee, Kevin Tran, Dagmawi Tilahun, Aaron Gibson, Don Wong, Chandrashekar Gurramkonda, Karuna Mupparapu, Christina Dinkins, Chariz Penalber, Sunsanee Kanjananimmanont, Manohar Pilli, Nick Selock, Brandon Wagner, Mustafa Adami, Lynn Wong, Joel Tyson, Vida Ahmadenijad, David Burgenson, Ben Punshon-Smith, Sevda Deldari, Rahul Menon, Kentā Itani, Shayan Borhani, Abhay Andar

Agencies: NSF, NIH, JDFI, MIPS, ONR-NOPP, FDA, DARPA, BMGF

Companies: Artisan, DuPont, Fluorometrix, GE, Genentech, Grace, Merck, Pfizer, Sartorius-Stedim

DISCLAIMER: No endorsement by FDA/NIST/NOAA/DoD implied.

Q/C/C Welcome

