

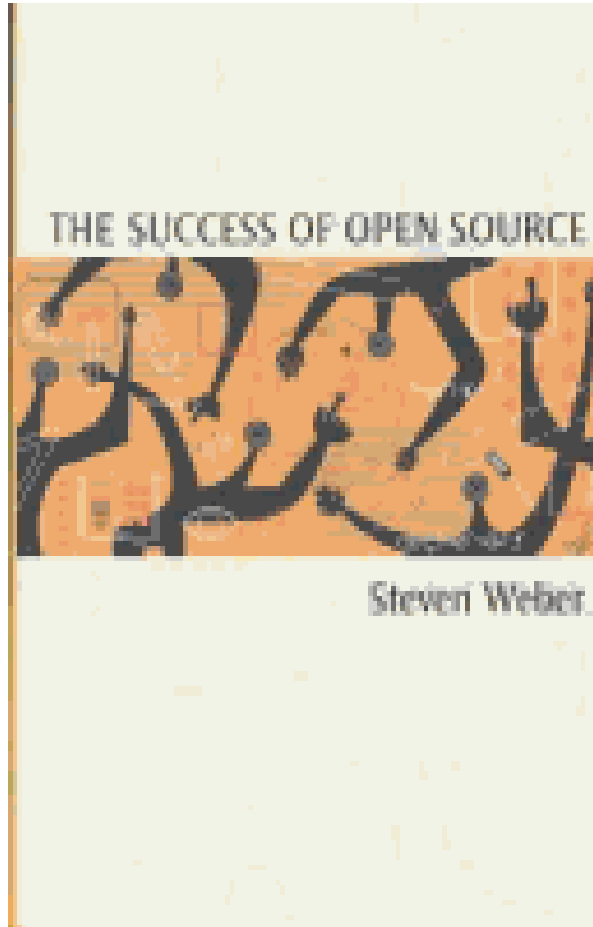


FNIH Biomarkers Consortium Adiponectin Project

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Precompetitive collaboration



- “Competitors share early stages of research that benefit all”
- Precompetitive collaboration is increasingly recognized as a driver for enhanced efficiency, while simultaneously increasing our grasp of heightened complexity



A Precompetitive Collaboration



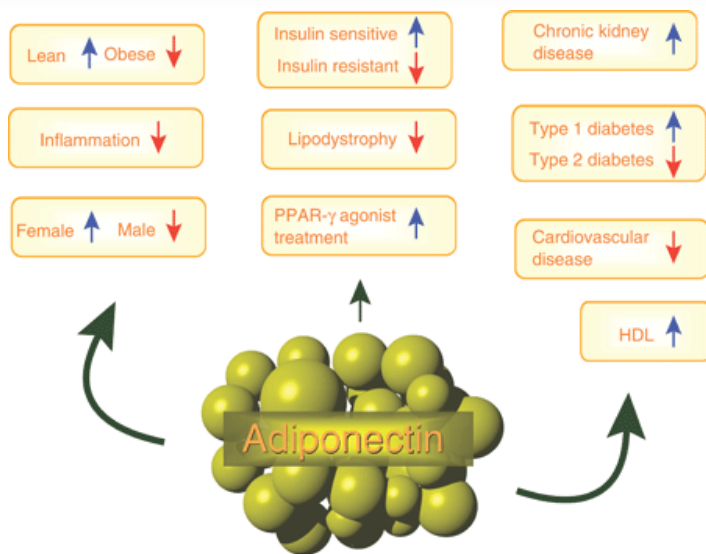


Goals of The Biomarkers Consortium

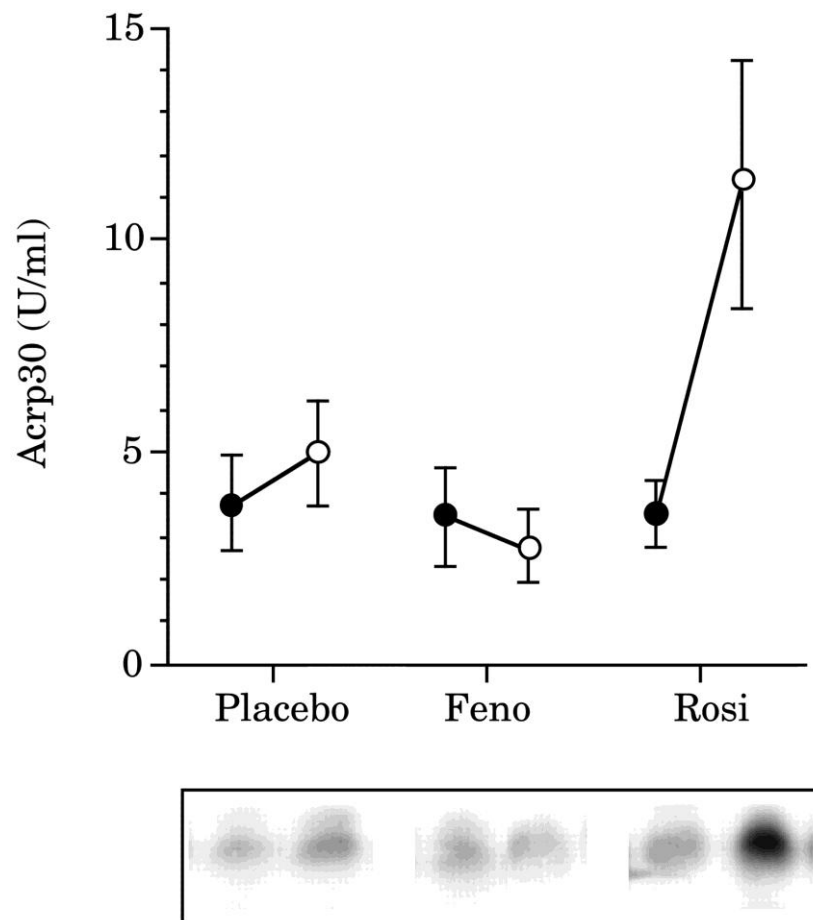
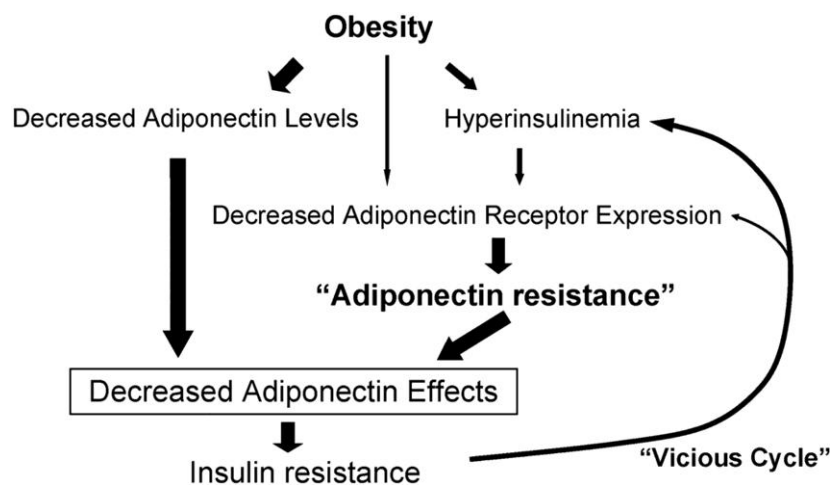
- Facilitate the development and validation of biomarkers using new and existing technologies
- Help qualify these biomarkers for specific applications in diagnosing disease, predicting therapeutic response, or improving clinical practice
- Generate information useful to inform regulatory decision-making
- Make consortium project results broadly available to the entire scientific community



Biomarker: Adiponectin

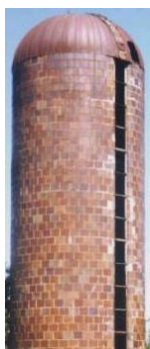


Kusminski, Scherer, CPT 2009;86 6, 592–595





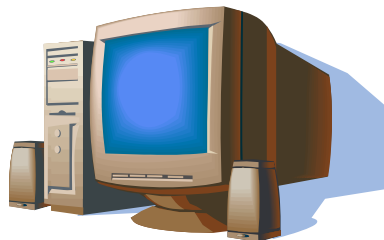
Adiponectin Project



GSK



Lilly



Merck

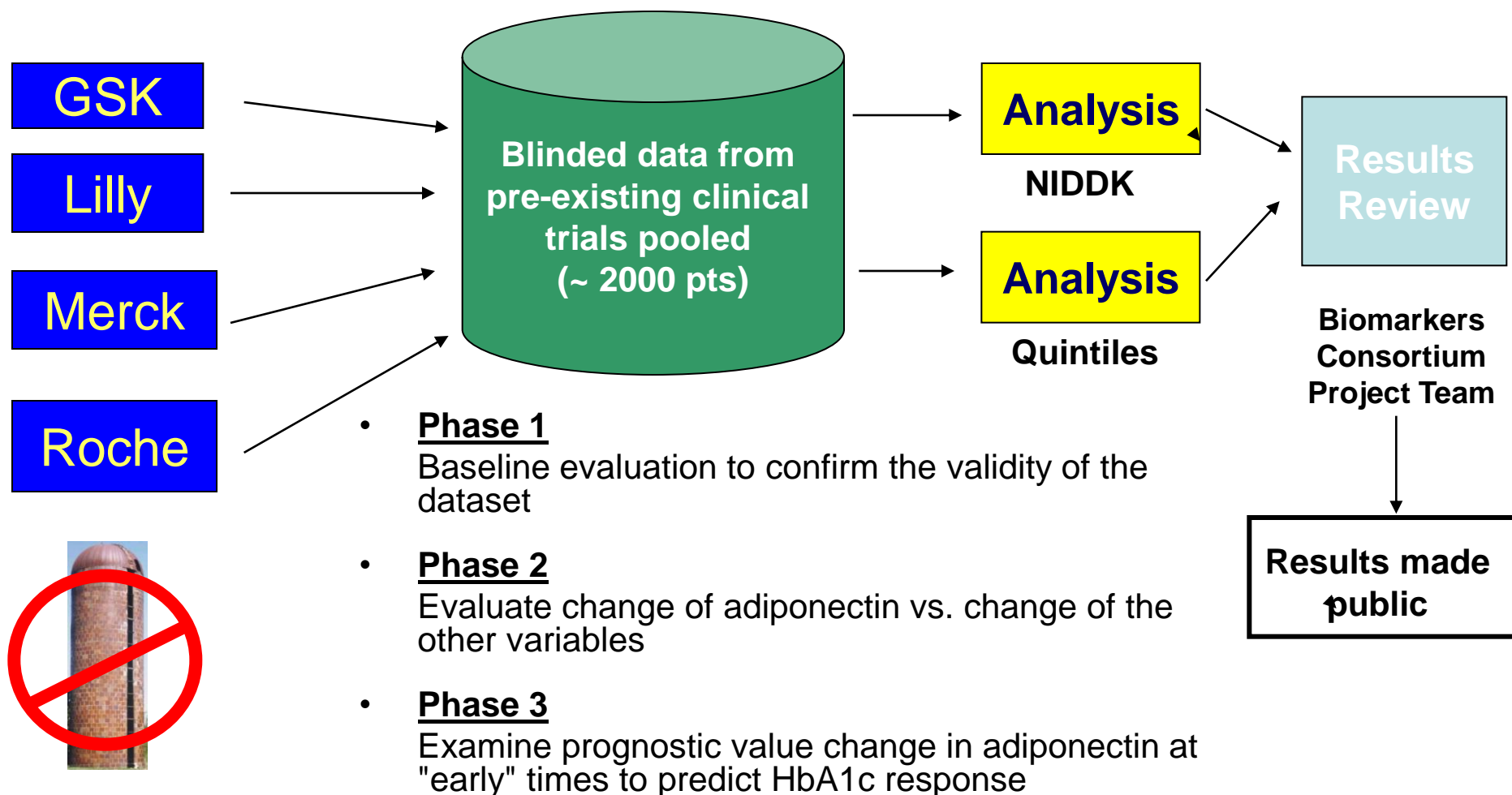


Roche

- Can adiponectin predict HbA1c response in patients with type 2 diabetes?
- Patient segmentation may drive more effective PPAR use
- A number of pharmaceutical companies have conducted PPAR research
 - Isolated datasets in individual companies
 - Relatively sparse publications
- Could the biomarkers consortium be used to facilitate a cross-company, pre-competitive collaboration to answer the research question?



Adiponectin as a Biomarker Predictive of Glycemic Efficacy





Adiponectin Project: Results

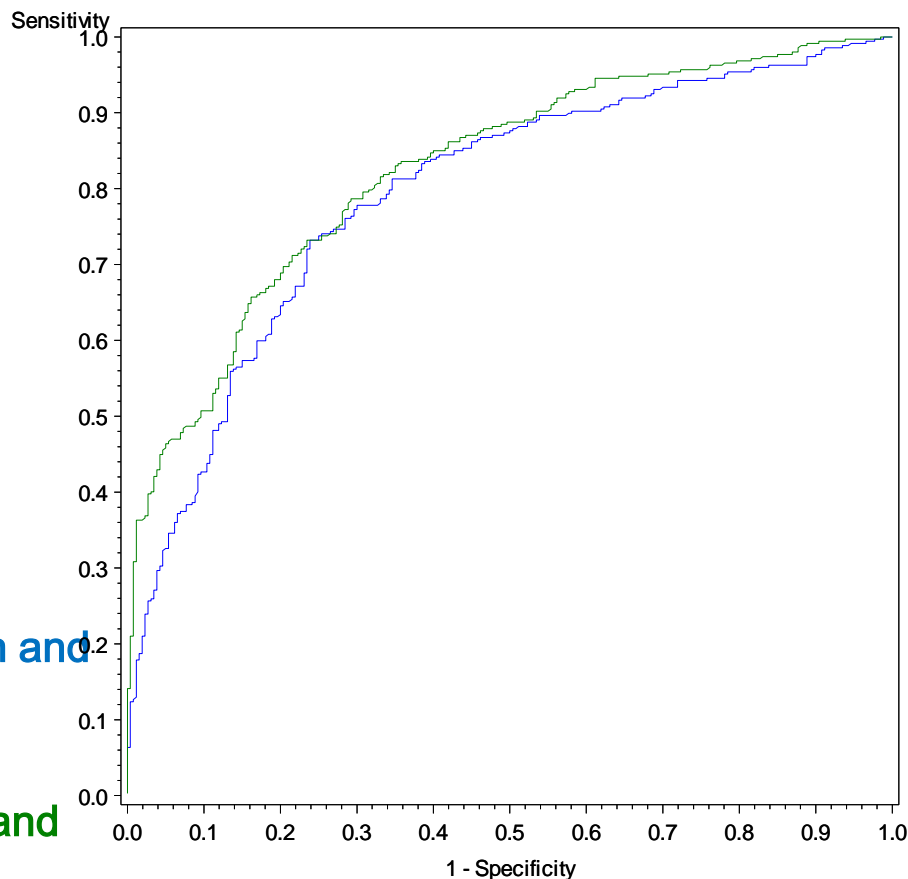
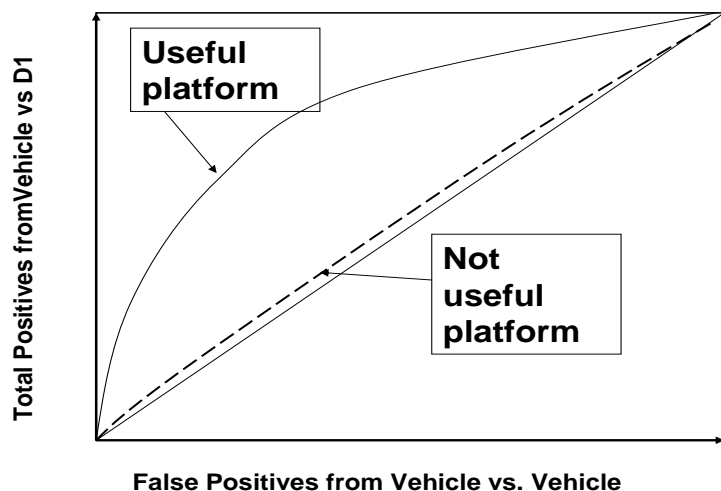
**Phase 3: Examine prognostic value change in adiponectin at
"early" times to predict HbA1c response
follow-up correlations of change in adiponectin and glucose at 6-8
weeks with change in HbA1c at 24-52 weeks**

Variable	Correlation
Adiponectin	-0.21 ($p < 0.0001$)
Fasting Glucose	0.49 ($p < 0.0001$)



ROC Curves for Prediction of HbA1c Response at 24 to 52 Weeks

Figure of Merit (ROC curves)



Responder: Decrease in HbA1c ≥ 0.7

BLUE – Model includes baseline adiponectin and change from baseline in adiponectin

AUC: 0.79

GREEN – Model includes baseline glucose and change from baseline in glucose

AUC: 0.82



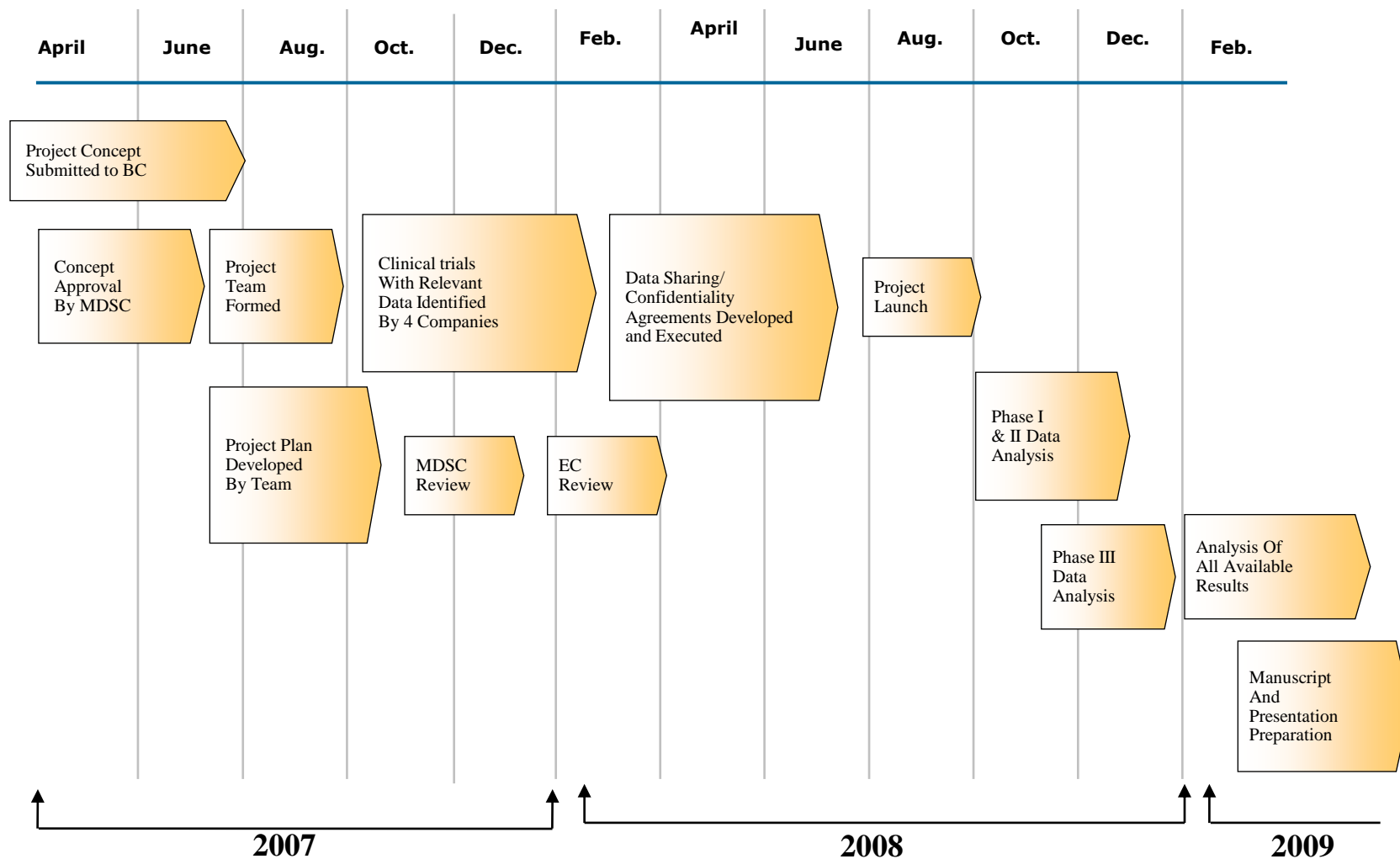
Adiponectin project highlights

- **Conclusions**

- Adiponectin is a robust predictor of glycemic response to PPAR agonists, but not non-PPAR drugs, in T2D patients
- Previous findings about the relationship between adiponectin levels and metabolic parameters (HbA1C, HDL, hematocrit) were confirmed by this analysis
- The potential utility of adiponectin across the spectrum of glucose tolerance was demonstrated
- This project established that cross-company collaboration was a robust, feasible and powerful approach to biomarker qualification



Lessons learned





Lessons learned

Issue	Lesson	Mitigation
Focus, organization and pace	Though ultimately successful, the overall project was lengthy	Robust project management with accountable leaders
Optimal collaboration	A lack of collaboration tools hampered the project	Collaboration web portal Regular meetings, face-to-face
Data-sharing principles and standards	A uniform, legally-appropriate data-sharing plan was difficult to negotiate Standard definitions were not always obvious and clearly important Limited institutional memory	Single accountable legal liaison Adequate time and resources The template for Biomarkers Consortium data-sharing plan and confidentiality is now available
Limitations of existing data	The retrospective dataset lacked time points earlier than 6 weeks of dosing, which limited the ability to make conclusions related to the prognostic value of the biomarker Blinded aggregated data is inherently limited, including in this case difficulties with specifying dose response Different biomarker assays	Acknowledge limitations Prospective follow-up when necessary



Lessons learned

- **Issues**

- ☐ Clarity of question defines the type of collaboration
- ☐ Key role of the neutral convener
- ☐ Dialogue with FDA early and often
- ☐ Behaviors driving / impeding precompetitive collaboration
- ☐ “Collaborations” often siloed, incomplete, or excessively transactional
- ☐ Motivations are similar and different across stakeholders sometimes creating real or potential conflicts, including intellectual property, conflict-of-interest, appropriate rewards, publications, and culture

Goals of collaboration

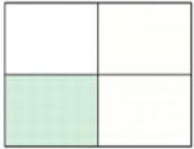
Develop standards/
tools

Generate/aggregate
data

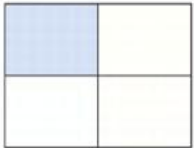
Create new
knowledge

Develop a
product

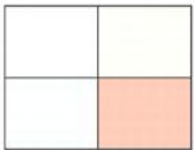
Contributors/
beneficiaries



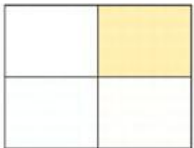
Open contribution
Open output



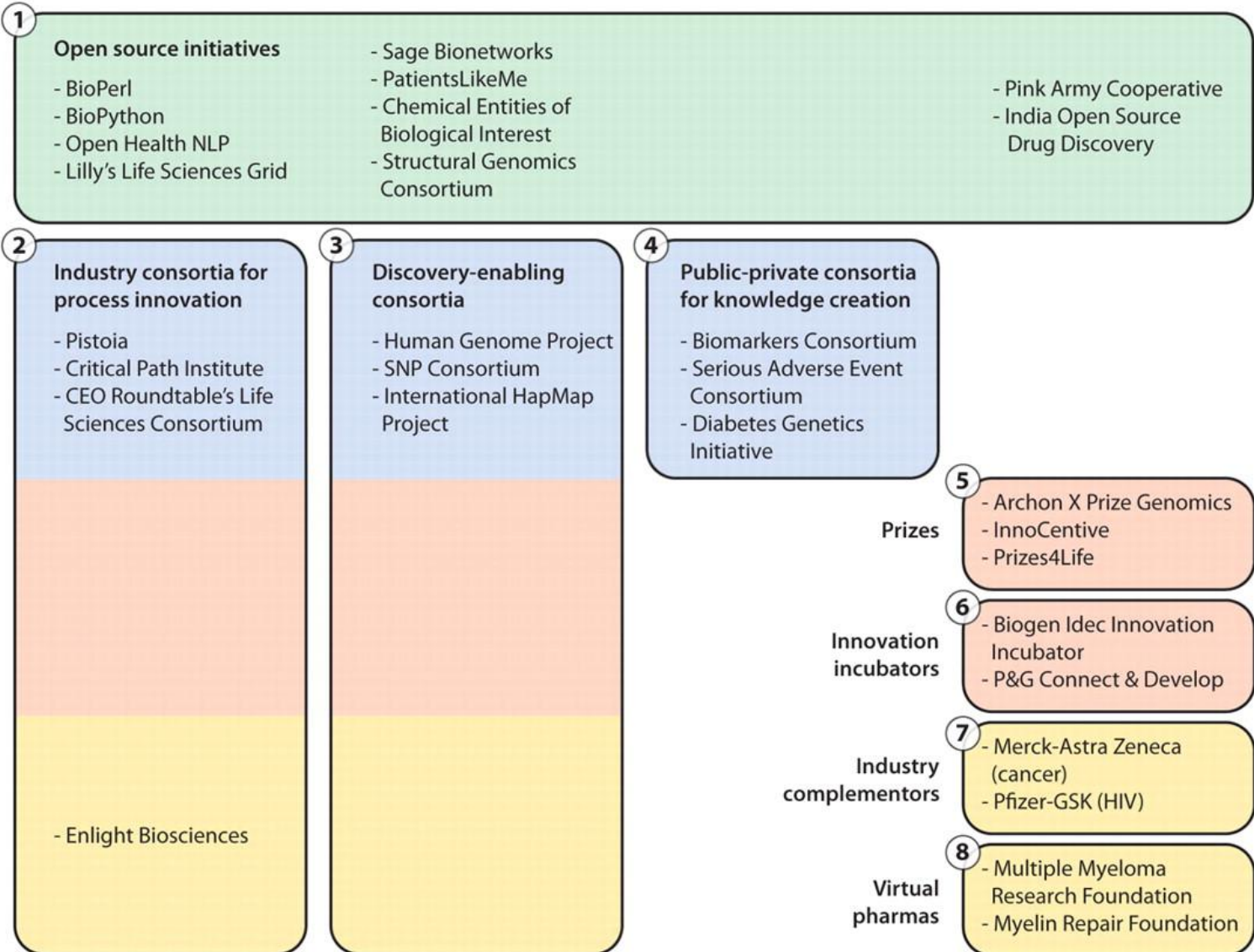
Restricted contribution
Open output



Open contribution
Restricted output



Restricted contribution
Restricted output





Lessons learned

- Progress

- ✓ Clarity of question defines the type of collaboration
- ✓ Key role of the neutral convener
- ✓ Dialogue with FDA early and often
- ❑ Behaviors driving / impeding precompetitive collaboration
 - Key role of trust, openness
 - Increase communication / transparency among collaborating partners
- ❑ “Collaborations” often siloed, incomplete, or excessively transactional
 - We can improve collaboration by recognizing our common goals and the unique value of each party
 - Collaborations cannot and should not be defined as providing unrestricted grant dollars
 - Defined and productive research relationships between industry and academia will emerge if both identify common goals
 - Need to strive for open inclusiveness in appropriate collaborations
- ❑ Motivations are similar and different across stakeholders
 - Better align stakeholder interest and rewards
 - “You get what you reward”



Acknowledgments

Adiponectin Project Team / Collaborators

Elizabeth Wright, NIDDK/NIH

Michele Ennis, Quintiles

Sujoy Ghosh, GSK

Jarema Kochan, Roche

Derek Nunez, GSK

Melvin Prince, Lilly

Bruce Schneider, CBER/FDA

John Wagner, Merck

Ming-Dauh Wang, Lilly

David Fryburg, Pfizer

Yu Chen, Merck

Brett Musser, Merck

Jose Velasquez, NIA/NIH

MDSC Scientific Program Manager

Maria Vassileva, FNIH

IOM Precompetitive Collaboration

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John Wagner, Merck

