

“Fit for Purpose” for Organotypic Models in Environmental Health Protection

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R832720	Carolina Environmental Bioinformatics Center (co-Investigator)	2005-2010
R833825	Carolina Center for Computational Toxicology	2008-2012
R835166	Carolina Center for Computational Toxicology: Assays, models and tools for NextGen safety assessments	2012-2016
R835612	Toxicogenetics of tetrachloroethylene metabolism and toxicity	2014-2017
R835802	Cardiotoxicity Adverse Outcome Pathway	2015-2021
RD840032	Integrating tissue chips, rapid untargeted analytical methods and molecular modeling for toxicokinetic screening	2020-2023

US EPA/ORD/NCEA Faculty Fellow (ORISE): 2011-2013

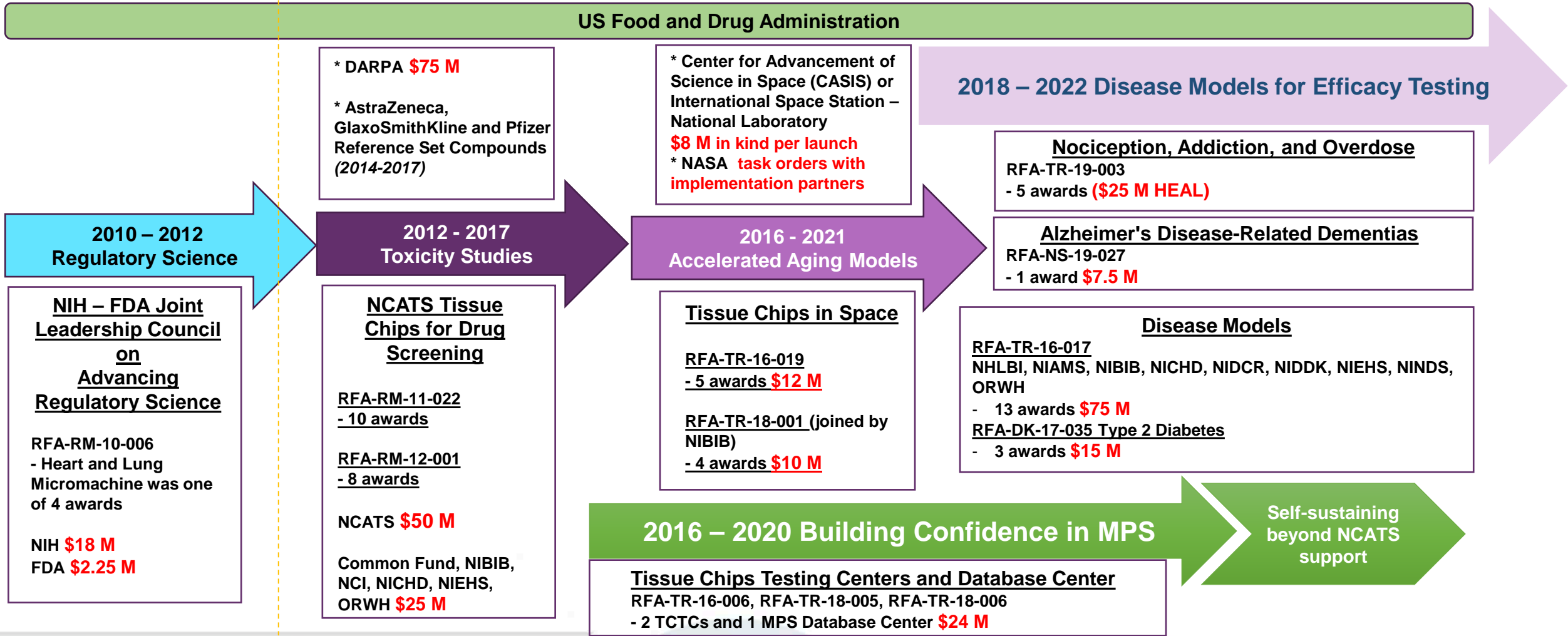
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Tissue Chips Landscape (NCATS perspective)

Establishment of NCATS
December 2011

IQ Consortium MPS Affiliate: AbbVie, Alnylam, Amgen, Astellas, AstraZeneca, Biogen, Bristol-Myers Squibb, Company, Celgene, Eisai, Eli Lilly, Genentech, GlaxoSmithKline, Janssen Pharmaceuticals, Merck & Co., Merck KGaA, Mitsubishi Tanabe, Novartis, Pfizer, Sanofi, Seattle Genetics, Takeda, Theravance, Vertex



Slide courtesy of Danilo Tagle (NIH/NCATS)



Tissue Chips are *already* in use for internal portfolio decision-making by Pharma

MPS-based organ/tissue model	No. of cases	Area of use (drug development phase)	MPS-supplier	End user	Reference (if available)
Blood vessel, vasculature	5	Target identification, validation and compound selection	AIST	Daiichi-Sankyo	Satoh et al., 2016
		Discovery (scRNA-seq)	Mimetas	Galapagos	–
		Systems toxicology for consumer products	Mimetas	Philip Morris	Poussin et al., 2020
		Pharmacokinetics and pharmacology	Mimetas	undisclosed	–
		Target identification and validation	Mimetas	NovoNordisk	–
Bone marrow	4	Preclinical safety	TissUse	AstraZeneca	Sieber et al., 2018
		Preclinical safety	Emulate	AstraZeneca	Chou et al., 2018
		Preclinical safety	TissUse	Roche	–
		Preclinical safety	TissUse	Bayer	–
Gut epithelium	4	Discovery (inflammatory bowel disease)	Mimetas	Galapagos	Beaurivage et al., 2019
		Discovery	Mimetas	Roche	–
		Clinical development	Mimetas	Roche	–
		Preclinical safety	Emulate	Roche	–
Lung	3	Discovery (alveolus)	Wyss	undisclosed	Huh et al., 2012
		Drug efficacy (epithelium)	Wyss	Pfizer, Merck USA	Benam et al., 2016b
		Preclinical safety	Emulate	Roche	–
Liver	2	Pharmacological and toxicological effects	Emulate	AstraZeneca	Foster et al., 2019
		Preclinical safety / assessment of species (rat, dog & human)	Emulate	J&J, AstraZeneca	Jang et al., 2019
Ocular compartment	1	Discovery	Fh IGB / EKUT	Roche	Achberger et al., 2019
Kidney epithelium	1	Pharmacokinetics and pharmacology	Mimetas	undisclosed	Vormann et al., 2018
Liver-Pancreas	1	Target validation / identification	TissUse	AstraZeneca	Bauer et al., 2017
Liver-Thyroid	1	Preclinical safety – assessment of species-specificity (rat and human)	TissUse	Bayer	Kühnlitz et al., 2019
Skin-Tumor	1	Preclinical safety & efficacy	TissUse	Bayer	Hübner et al., 2019

Target identification

Lead optimization

PK/TK

Preclinical safety

Preclinical efficacy

US FDA Office of Chief Scientist, Office of Commissioner:

Alternative Methods Working Group <https://www.fda.gov/science-research/about-science-research-fda/advancing-alternative-methods-fda>

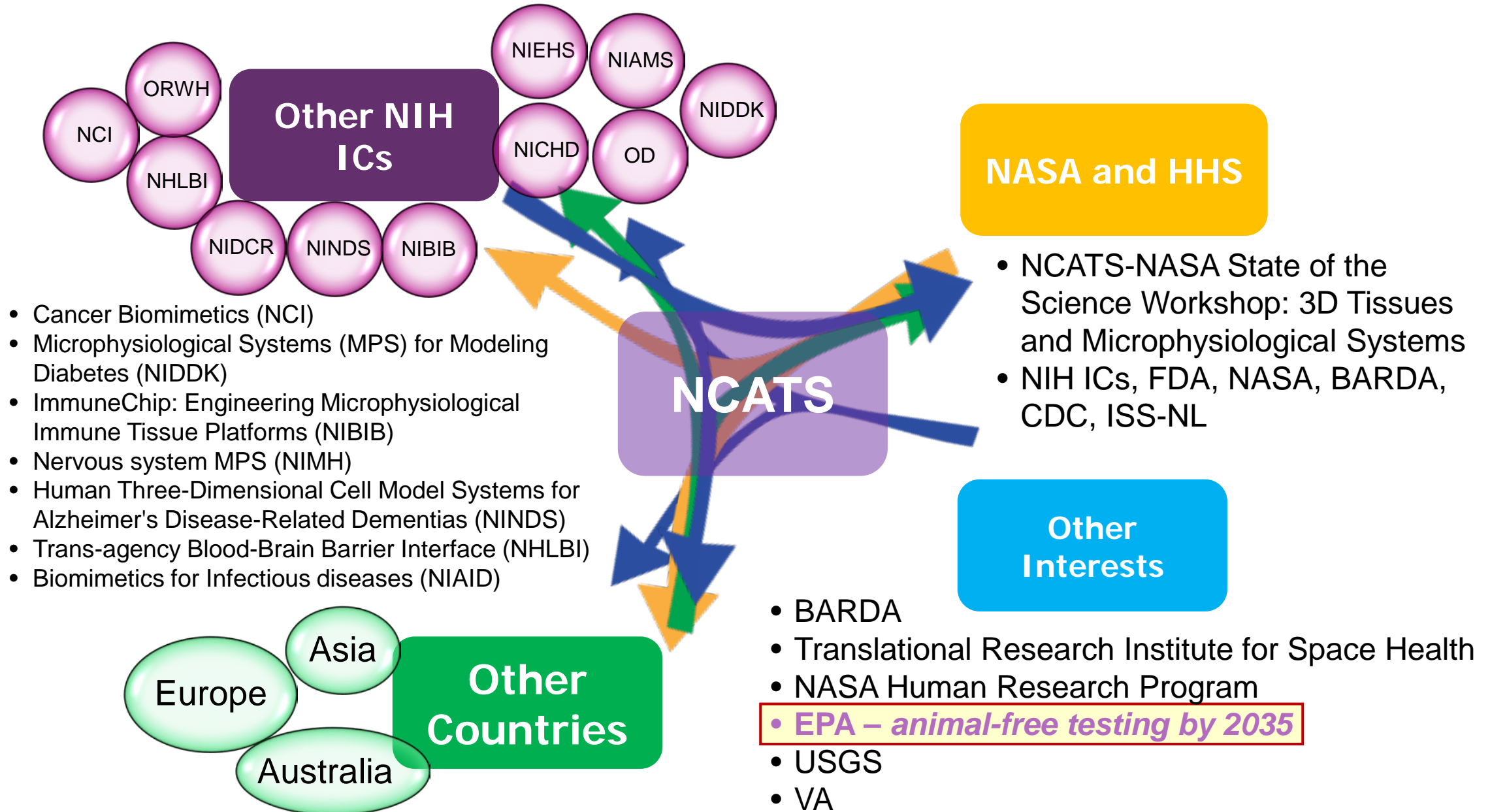
Objectives of FDA's Alternative Methods Working Group

- Discuss FDA-wide new in vitro, in vivo, and in silico methods, including research, training, and communication.
- Interact with U.S. Federal partners and other global stakeholders to facilitate discussion and development of draft performance criteria for such assays.
- Establish a dialogue and develop partnerships with FDA stakeholders to explore regulatory science applications for such technologies.
- Identify the performance criteria of microphysiological systems by engaging with FDA experts and FDA stakeholders through public-private partnerships.

Research projects using “tissue chips” at US FDA (examples):

- CDER: Division of Applied Regulatory Science – testing commercial **liver, heart, liver-heart** platforms
- CBER: Developing/improving test methods for **cell-based product** characterization (safety and effectiveness)
- CTP: Using organo-mimetic human **lung airway**-on-a-chip to test various tobacco and related products

Growing Partnerships and Investments in MPS beyond NCATS



Slide courtesy of Danilo Tagle (NIH/NCATS)

US EPA “Safer Chemicals Research Grants”

Organotypic Culture Models for Predictive Toxicology Center (2013) - \$18 million

R835736	Vanderbilt - Pittsburgh resource for organotypic models for predictive toxicology	University of Pittsburgh Vanderbilt University	2014-2019
R835737	Human models for analysis of pathways (H-MAPs) center	University of Wisconsin - Madison	2014-2019
R835738	Predictive toxicology center for organotypic cultures and assessment of AOPs for engineered nanomaterials	University of Washington	2014-2020
R835802	Cardiotoxicity adverse outcome pathway	Texas A&M University North Carolina State University	2015-2021

Advancing Actionable Alternatives to Vertebrate Animal Testing for Chemical Safety Assessment (2018) - \$4.25 million

R839501	Instrumenting phenotypic immunological responses to toxicants that threaten human reproduction	Vanderbilt University	2019-2022
R839502	Skeletal teratogenicity of industrial and environmental chemicals predicted with human pluripotent stem cells <i>in vitro</i>	University of California - Riverside	2019-2022
R839503	Reducing the reliance on early-life stage testing with relevance to euryhaline fishes	Oregon State University Louisiana State University	2019-2022
R839504	A Neurovascular Unit on Chip for reducing animals in organophosphate neurotoxicology	Vanderbilt University	2019-2020
R839505	Multiplexed human BrainSphere developmental neurotoxicity test for 6 key events of neural development	The Johns Hopkins University	2019-2022

What is “Fit for Purpose” for Organotypic Models at EPA?



- “Most of the statutes and regulations surveyed include statements such as the necessity of upholding scientific standards and using **“the best available science,”** which may include NAMs” – **Animal tests used by the EPA are NOT always required!**
- “The authority for EPA’s research programs arising from these statutes is broadly written and does not constrain the Agency from developing or advancing the use of NAMs” – **Non-animal tests that are “the best available science” CAN be used!**
- “The Administrator’s directive and similar text in section 4(h)(1) of TSCA note the need for information of “equivalent or better” scientific quality and relevance to animal test-based results” – **The comparator for NAMs at EPA is ANIMAL data!**
- Need to “Develop a scientific confidence framework to evaluate the quality, reliability, and relevance of NAMs” – **How do we know it is “best available science”?**

Table 2. Initial Selection of On-Going EPA Case Studies for Potential Incorporation into Work Plan

Title	Description
Refining Inhalation Risk Assessment with NAMs	Refine inhalation risk assessment for point of contact toxicity using a three-dimensional <i>in vitro</i> test system of human respiratory tissues to derive a point of departure, in conjunction with computational fluid dynamic modeling.
Integrating <i>In Vitro</i> Assay and Toxicokinetic Data in Read Across	Use of <i>in vitro</i> toxicity and toxicokinetic testing to refine/support read across categories for per- and polyfluoroalkyl substances (PFAS).
Application of <i>In Vitro</i> Bioactivity for Screening-Level Risk Decisions	Use of bioactivity from <i>in vitro</i> assays and <i>in vitro</i> toxicokinetics to prioritize chemical contaminants in biosolids.
Application of NAMs for Chronic and Carcinogenicity Testing	Integration of NAMs to identify chronic toxicity and non-genotoxic carcinogenicity modes-of-action and quantitative points-of-departure for regulatory decisions

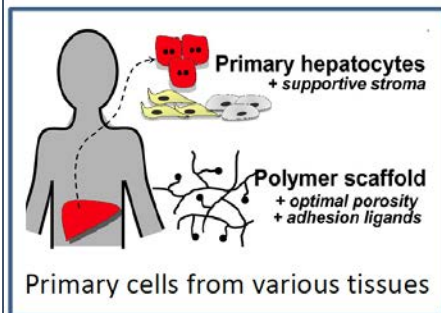
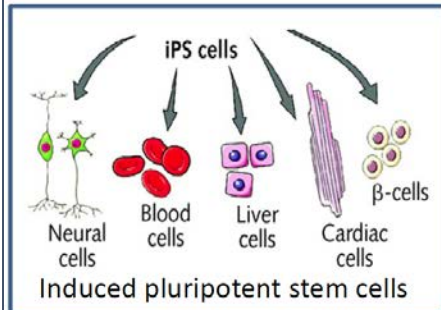


The Potential of the Tissue Chip for Environmental Health Studies

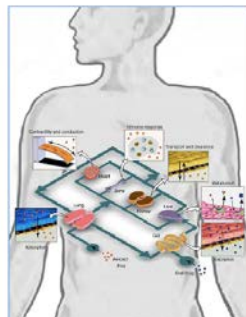
JULY 21-22*, 2014 ■ MONDAY ~8:30-5:00, TUESDAY 8:30-NOON

NATIONAL ACADEMY OF SCIENCES, ROOM 120 ■ 2101 CONSTITUTION AVENUE, NW ■ WASHINGTON, DC

The “biology”



The “plumbing”



The “nails”



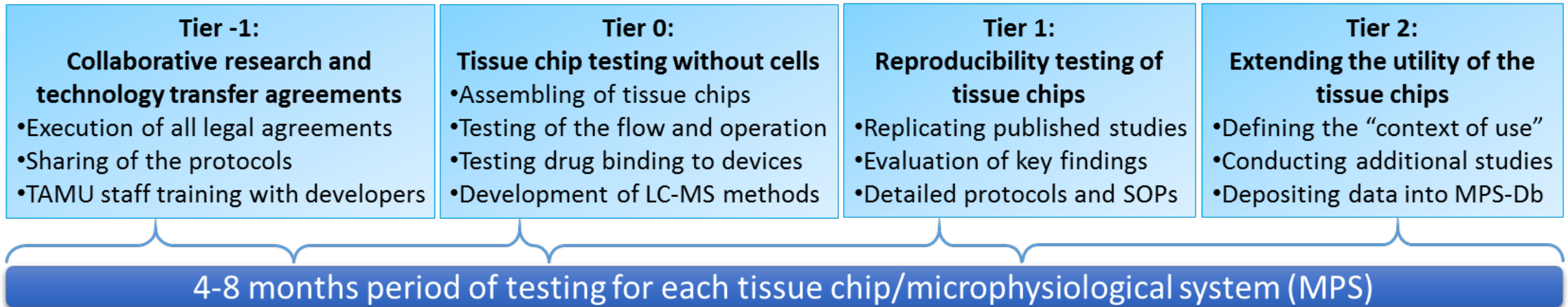
Human health
assessment of
chemicals

“Tissue Chips will not be used in isolation, just like any other piece of evidence in regulatory decision-making is not being used in isolation to arrive at the ultimate decision”

Moving forward (“convince me!”)

- Validation/qualification of the tissue chip systems
- Making tissue chips widely available so that the database is broad and robust
- The research and application of these models has to be transparent even though this area is in a “highly competitive state”
- Tissue chip technologies should be evaluated collectively so that the technology does not fall individually
- Inter-species extrapolation and exploiting of the animal to *in vitro* to human extrapolations

Texas A&M University Tissue Chip TESTING Center (TEX-VAL)



Oct. 2016 – Sept. 2019 (TEX-VAL 1.0)

Proximal kidney tubule	Himmelfarb/Kelly (Univ. Washington)
Neurovascular unit (BBB)	Wikswow (Vanderbilt)
Bone +/- tumor	Vunjak-Novakovic (Columbia)
Gut enteroid	Donowitz/Estes (JHU/BCM)
Skin from iPS cells	Christiano (Columbia)
Heart	Healy (UC-Berkeley)
Vasculature +/- tumor	Hughes (UC-Irvine)/George (UC-Davis)
Skeletal muscle	Truskey (Duke)
Liver (multi-cell)	Taylor (University of Pittsburgh)
Liver	Healy (UC-Berkeley)
White fat	Healy (UC-Berkeley)

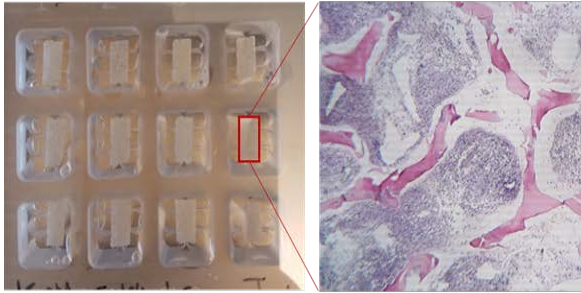
Oct. 2018 – Sept. 2021 (TEX-VAL2.0)

Arteriole-scale vessel	Truskey (Duke)
Salivary gland	Benoit (U-Rochester)
Vascularized kidney	Himmelfarb/Kelly (Univ. Washington)
Atria on a chip	George (UC-Davis)
Bone joint & cartilage	Tuan (University of Pittsburgh)
Small Airway	Huh (University of Pennsylvania)
Vascularized Liver (vLAMPS)	Taylor (University of Pittsburgh)
Vascularized micro-Liver	Hughes (UC-Irvine)

TEX-VAL Tissue Chip Testing: Diversity of experience with MPS

Static cultures

Columbia Univ.: Bone +/- Tumor Model

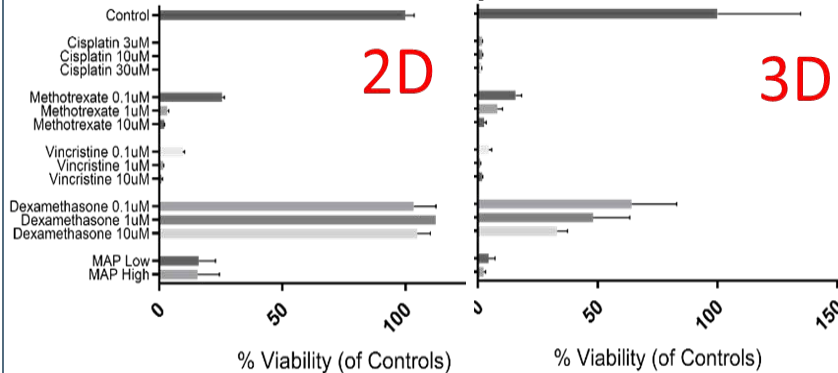


- De-cellularized bovine trabecular bone
- Human osteoblasts and Ewing's sarcoma cells

Simulating cancer treatments *in vitro* (3D and 2D)

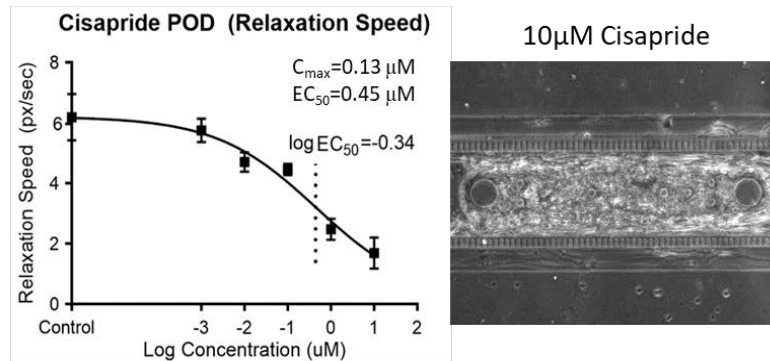
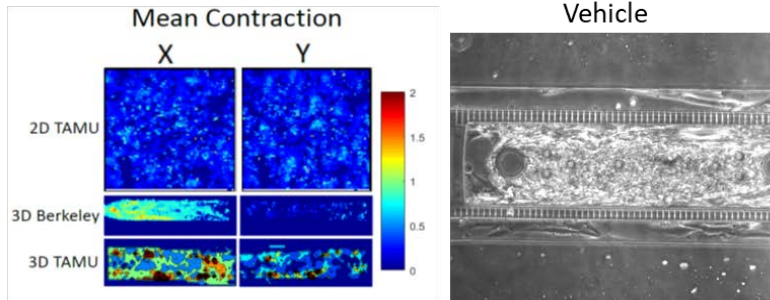
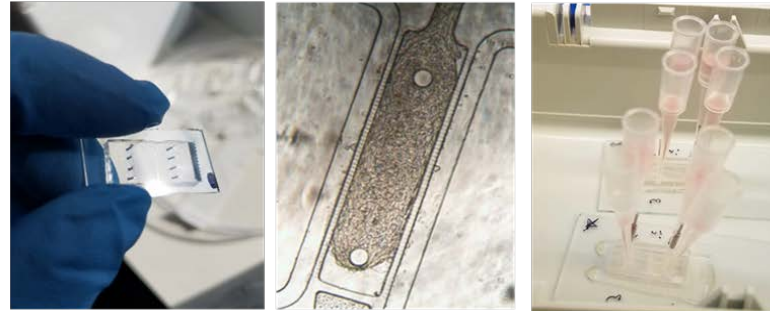
Day	1-7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25-38	
Control																				
Cisplatin																				
Methotrexate																				
Vincristine																				
Dexamethasone																				
MAP																				

Cancer cell viability after treatment



"Gravity Flow" cultures

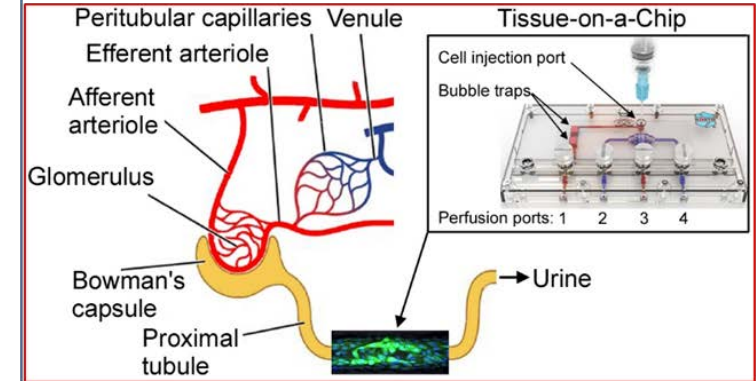
Univ. Cal.-Berkeley: Cardiac Model



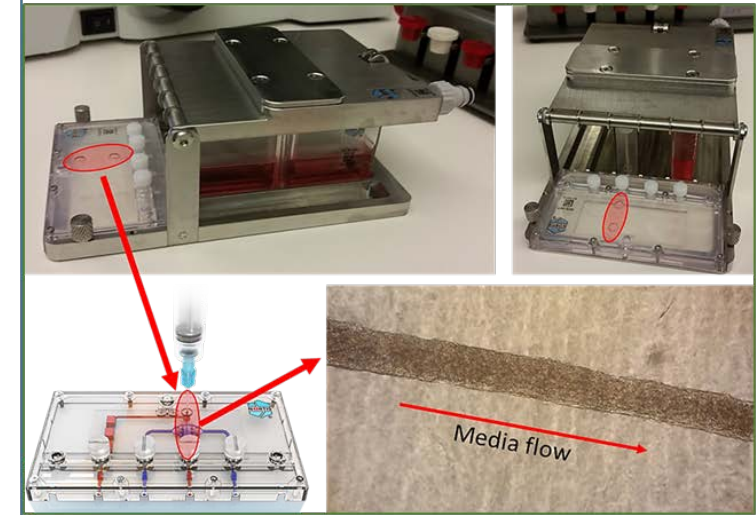
"Forced Flow" cultures

Univ. Wash.: Proximal Tubule

"Microphysiological" system



Bioengineer's "rendering"



TEX-VAL Status of Depositing Data to U-Pitt MPS Db (Oct. 2020)

<https://upddi.pitt.edu/microphysiology-systems-database/>

Tissue Chip Model	# Wells/Chips	
	2D	3D
Proximal Tubule, <i>U-Washington</i>	500	91
Blood-Brain Barrier, <i>Vanderbilt</i>	-	9
Bone/Tumor, <i>Columbia</i>	462	234
Skin, <i>Columbia</i>	-	224
Cardiac Tissue, <i>UC-Berkeley</i>	1091	141
Gut Enteroid, <i>Baylor College Med</i>	4,488	1,382
Vascularized Tumor, <i>UC-Irvine</i>	320	69
Liver, <i>UC-Berkeley</i>	90	81
Liver (multi-cell), <i>U-Pitt</i>	220	90
White Adipose, <i>UC-Berkeley</i>	626	104
Skeletal Muscle, <i>Duke</i>	-	192
Atrial Cardiomyocyte (2.0), <i>UC-Davis</i>	178	6
Kidney (2.0), <i>U-Washington</i>	-	21
TOTAL	7,975	2,638

TEX-VAL Tissue Chip Testing Consortium (2020 - ...)

Industry

Bristol-Myers
Squibb

Sanofi-Aventis

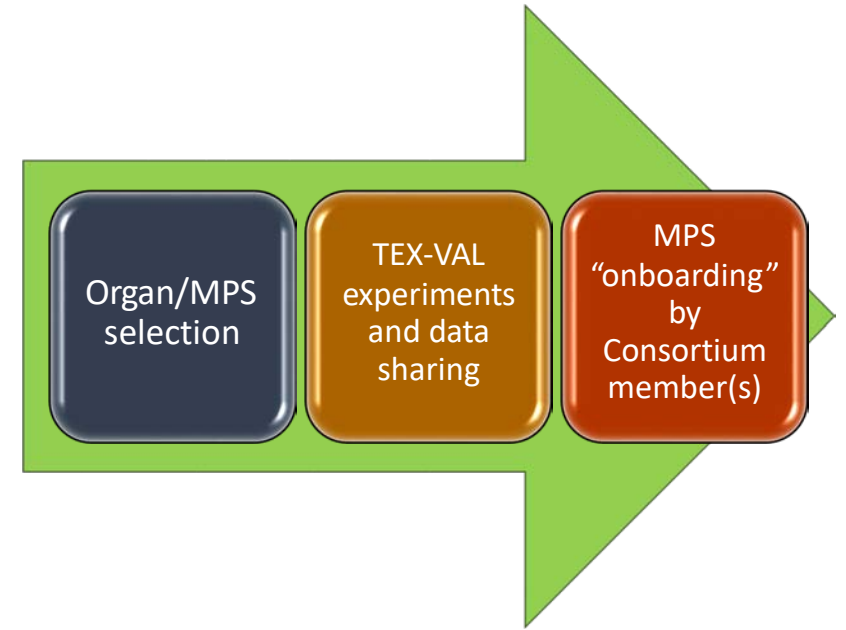
American
Chemistry Council

Government

NIH-NCATS

NIH-NIEHS-NTP

EPA-NCCTE



2020 Work Plan: (including the "fit for purpose")

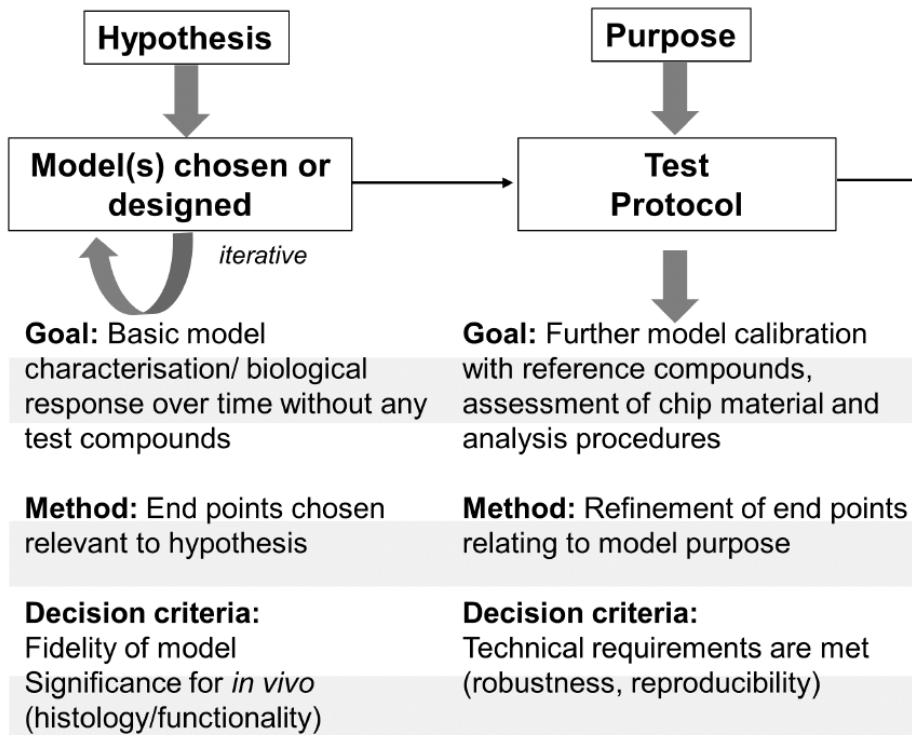
- Kidney (glomerulus and tubule)
- Liver (multicellular)
- Gut (different gut sections)
- Lung (air-liquid interface)

About that... “FIT FOR PURPOSE” again...

“Chemical _____
is NOT a hazard
for _____”

Replace animal test
_____ with
cell-based test _____

“Best available
science”?



PERFORMANCE STANDARDS

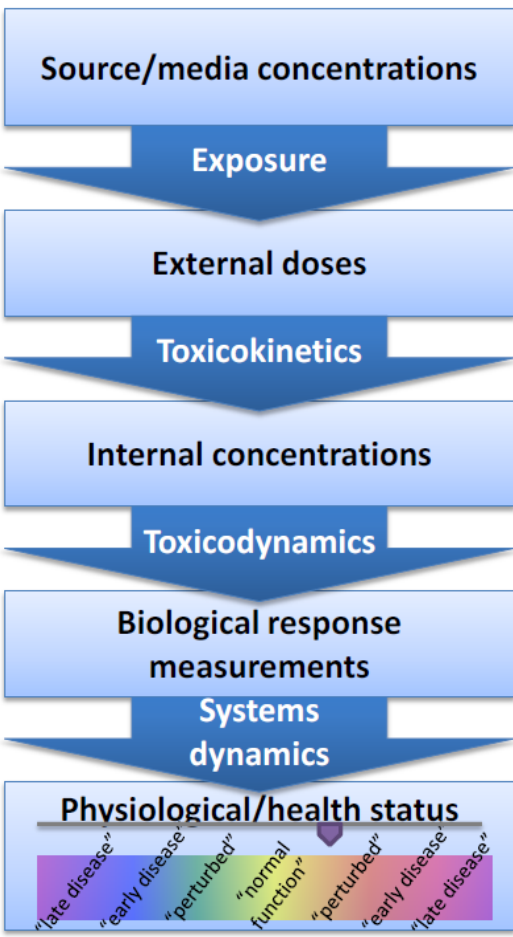
“Best available
science”?

Parameter	Explanation
Compounds	Commercially available compounds
Context of use	A clear definition of the relevance of the test method, where relevance describes the relationship of the test method to the effect of interest and whether it is meaningful and useful for a particular purpose (https://www.ema.europa.eu/en/documents/scientific-guideline/guideline-principles-regulatory-acceptance-3rs-replacement-reduction-refinement-testing-approaches_en.pdf). This includes the endpoints which are to be investigated with reference to the conventional animal or human endpoint, e.g. if the MPS is used to detect DILI, it needs to be specified whether it covers all kinds of liver damage (cholestasis, steatosis, inflammation, fibrosis, ...) and how these are specified (biomarkers, morphology, histopathology, ...).
Historical reference data	Data describing morphological and physiological outcome (e.g., histopathology, clinical chemistry) in MPS for defined reference compounds (positive and negative controls). Concentration ranges tested should be included. Endpoints measured in the MPS might include genomics markers, biomarker changes, etc.
Cell material & quality	Description of cell or tissue source, including potential quality checks (e.g., viability, functional performance tests, metabolic activity)
Specification of materials & media	Detailed description of materials with regard to biocompatibility, potential leachables, surface adsorption (drug binding), composition of media (protein content and source, growth factors included in the medium or added, flow rates, etc.)
Exposure	Drug stability data and determination of exposure (total/unbound, ideally also intracellular)
Exposure modeling	Description of the model that was used to compare exposure in the MPS with the <i>in vivo</i> situation (animal or human)
General documentation	Will Good Laboratory Practice (GLP) need to be met for such studies? A workshop on this topic, perhaps in partnership with the OECD, would be advisable as it will inform any decisions on performance standards. Alternatively, the regulatory agencies could brainstorm on what context of use situation would require these systems to be performed under GLP.
Robustness	Intra-assay (repeatability) and inter-laboratory comparative result data. The need for the latter may be decided on a case-by-case basis.

Prototypical Hazard ID and Dose-Response Assessment

Data, models, theories, concepts

Source-to-Outcome Continuum



Identify, evaluate, & integrate evidence

- Epidemiology
- Rodent bioassays
- Mechanistic data

Identify health effects, e.g.,

- Developmental effects
- Carcinogenicity

Estimate points of departure (PODs) from suitable studies, e.g.,

- LOAEL or NOAEL
- Benchmark dose at 10% response

Calculate toxicity values

- Reference dose = $POD / \text{Uncertainty factors}$
- Cancer slope factor = $10\% / POD$



????

How could Tissue Chips be used in each step?

Environmental Health Decisions

Screening and/or prioritization

Case example 1:
Setting levels of exposure concentrations or intakes

Case examples 2-3:
Population-level analyses

Risk-risk comparison

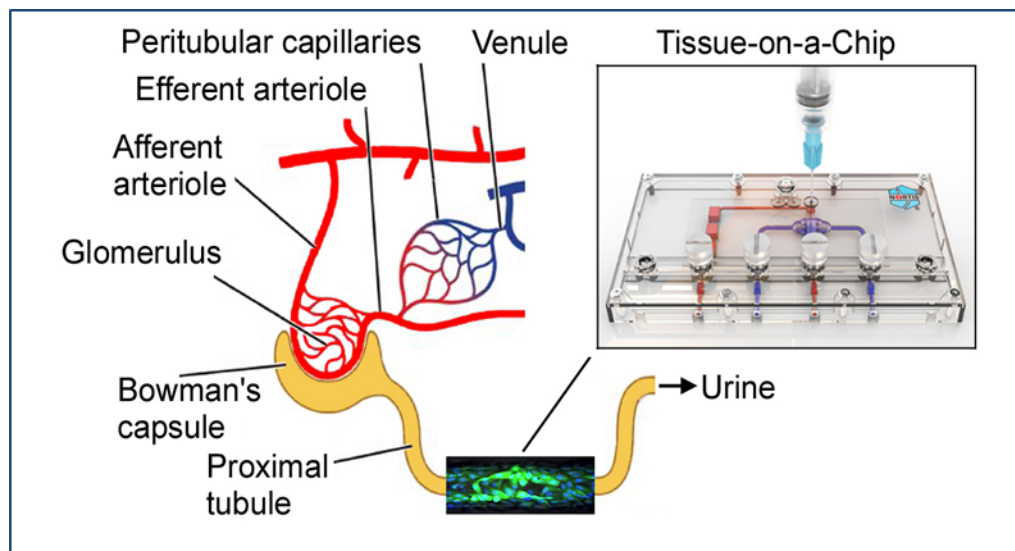
July 21, 2014

Weihshueh Chiu (EPA)

“Questions and Needs in Environmental Health and Risk Assessment Communities”

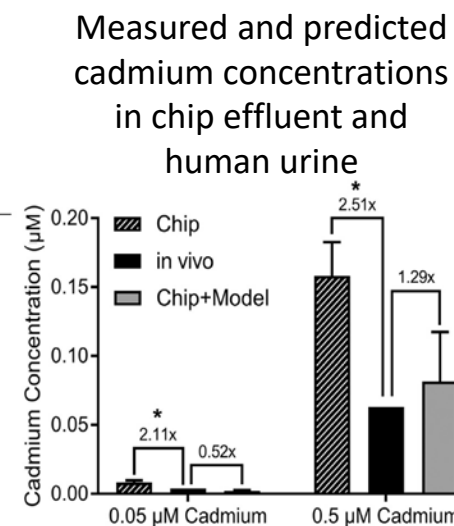
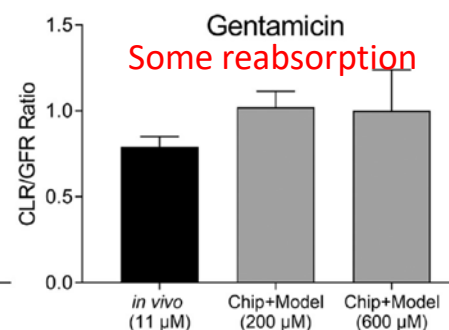
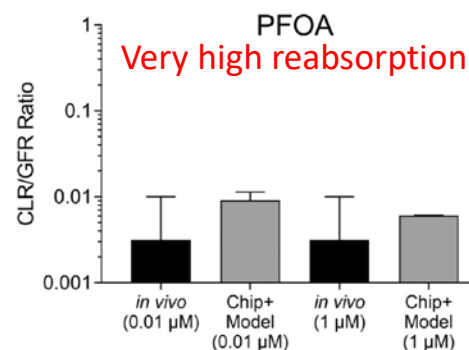
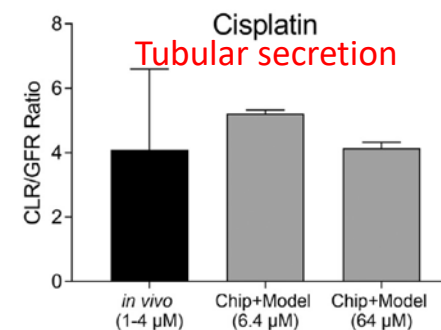
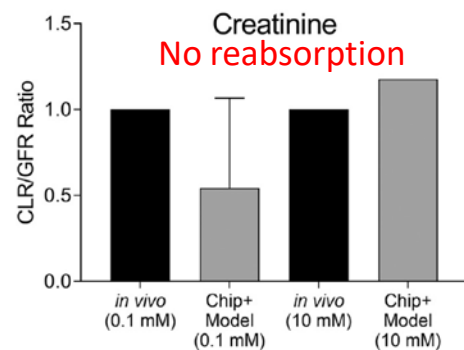
<https://youtu.be/byaodNMCjf8>

Case #1: Understanding kidney TK using *in vitro* NAM [reabsorption]



What is needed (experimental or from the literature):

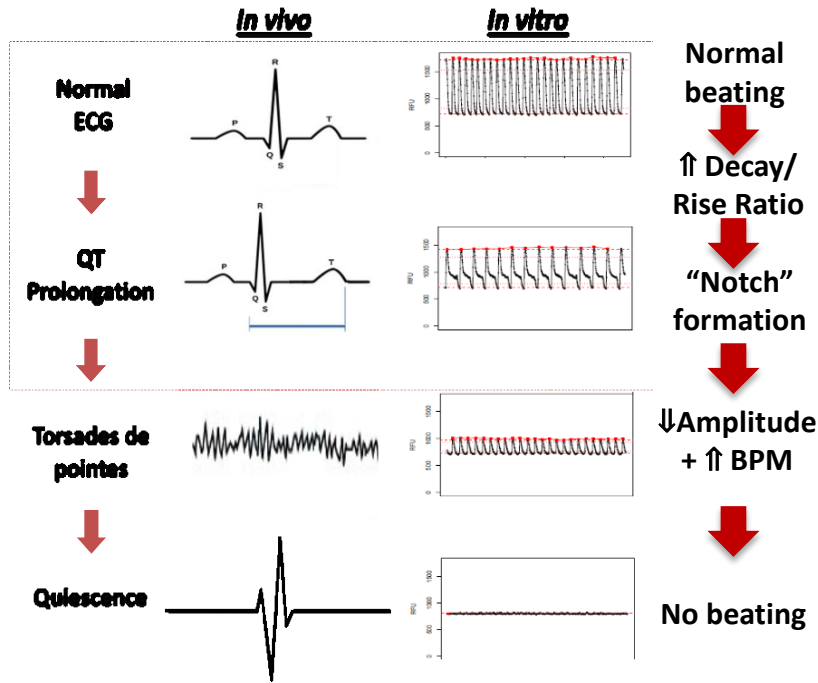
- Free fraction of tested compounds in buffer and cell media
- Recovery from proximal tubule devices seeded with RPTECs
- Recovery from blank tissue chips
- Chip-to-human extrapolation model (dimension and flow)
- Knowledge of human kinetics for tested compounds (f_u)



It's a tissue chip! Of only one part of one organ...
Plus, there is no vascular channel, only renal reabsorption and no tubular secretion...

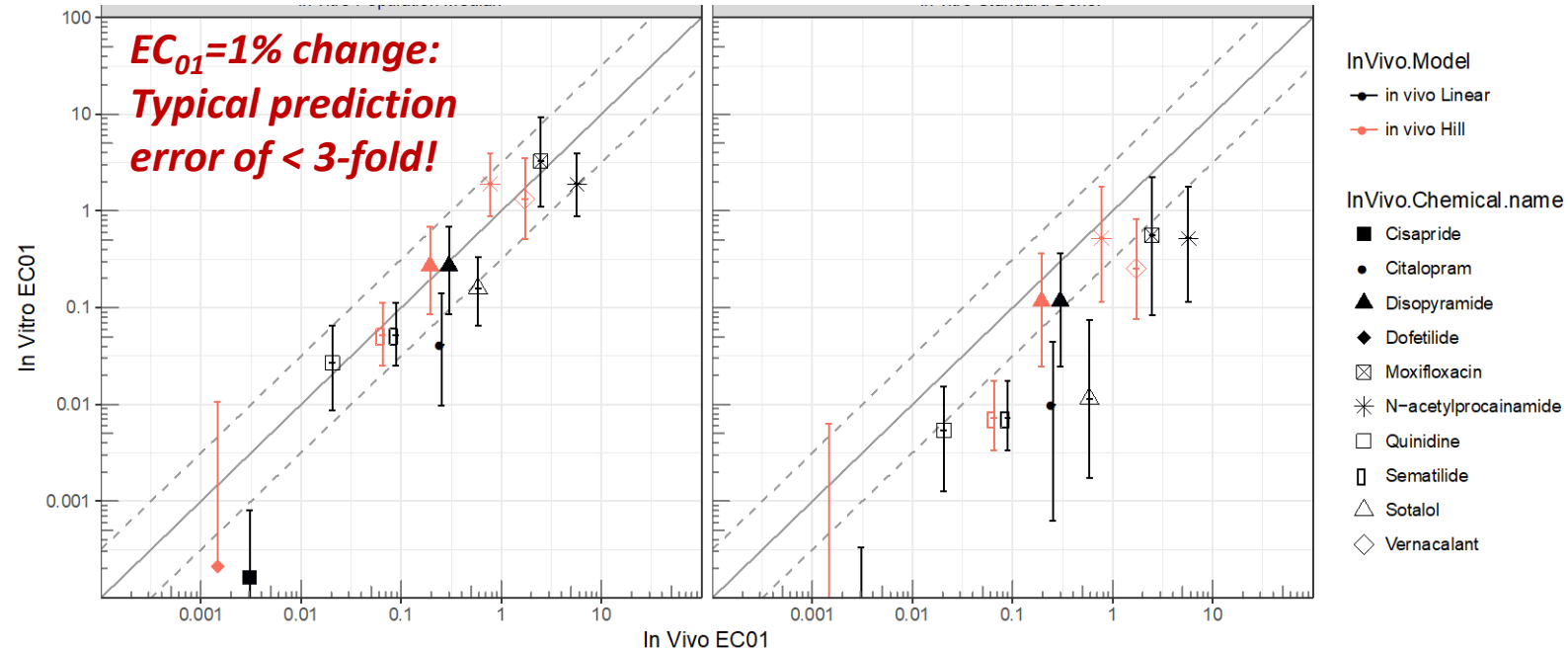
Case #2: Deriving a “safe dose” using NAMs [iPSC-CM, cardiac rhythm]

Qualitative Comparison:



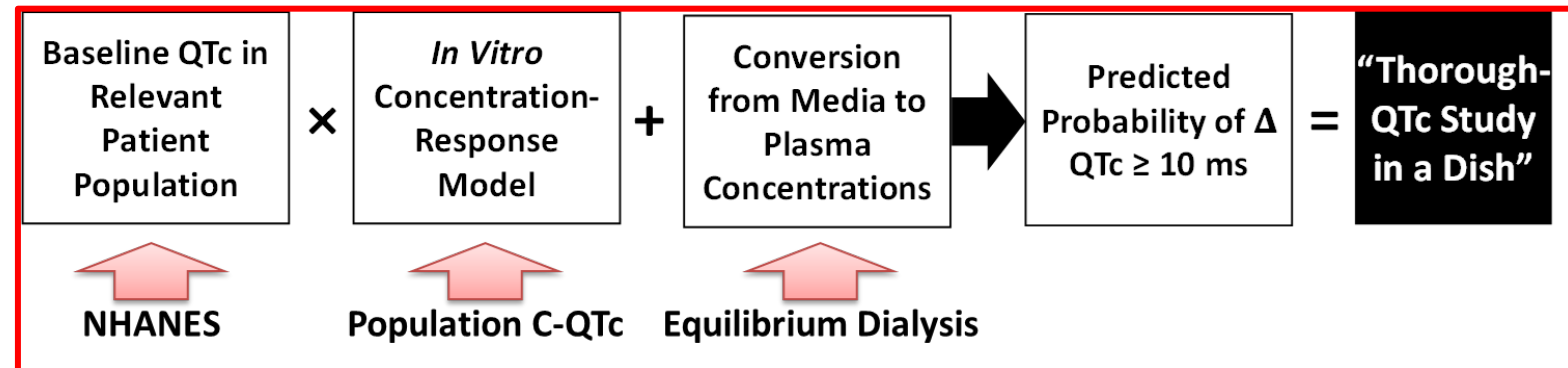
Clinical guidance: 95% for 10 ms change → Mean change of 5 ms → **1.2% change** from baseline (NHANES)

Population of iPSC-CM [27 donors] “Standard” donor iPSC-CM



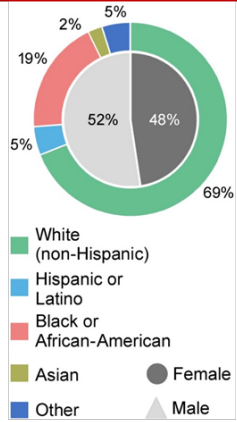
Quantitative Comparison:

- **In vivo**: use published PD modeling data for concentration-response relationships for QTc
- **In vitro**: conduct Bayesian population PD modeling (Chiu et al. 2017) of decay-rise ratio
- Compare **in vivo** and **in vitro** concentration-response relationships (e.g., median and CIs)



Case #3: Risk characterization (population variability) [cardiac rhythm]

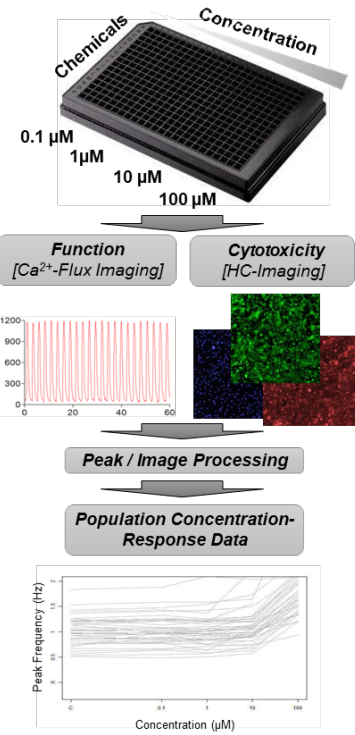
Population-Based iPSC-Derived Cardiomyocyte Model (n = 43 individuals)



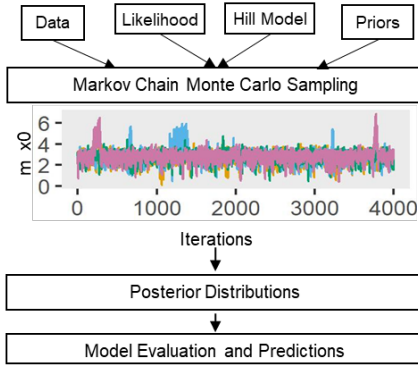
Compounds from Multiple Chemical Classes (n=136)

Chemical Class:	n
CiPA Pharmaceuticals	15
Other Pharmaceuticals	39
Environmental Chemicals (e.g., pesticides, PAHs, industrial chemicals, flame retardants)	82

In Vitro Concentration-Response Screening



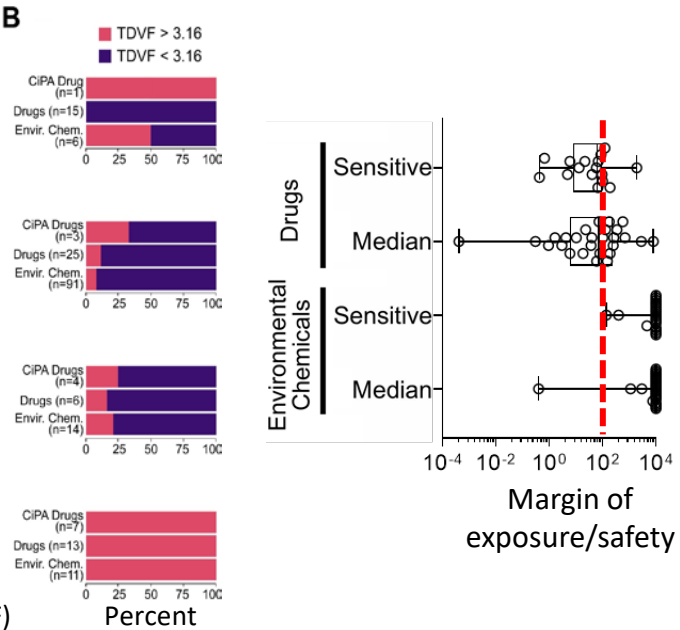
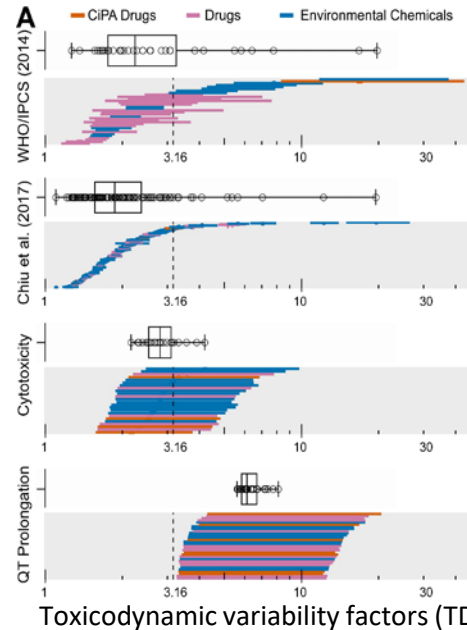
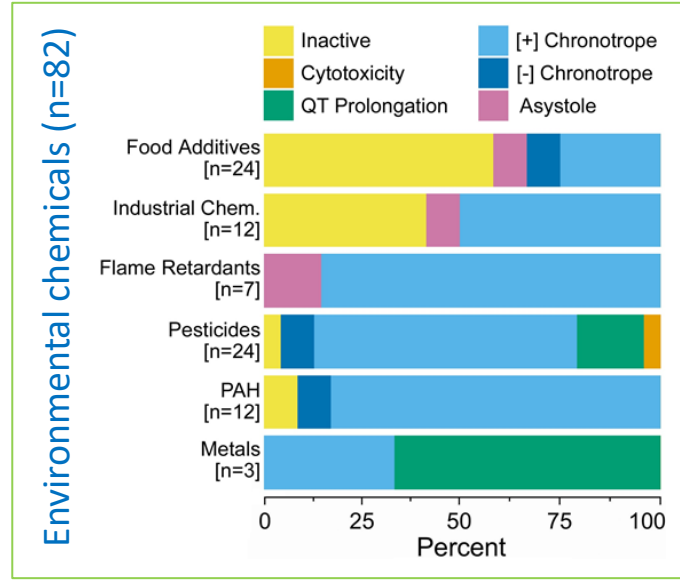
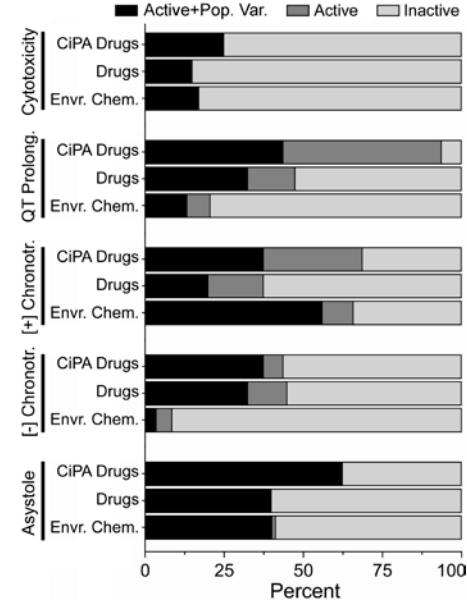
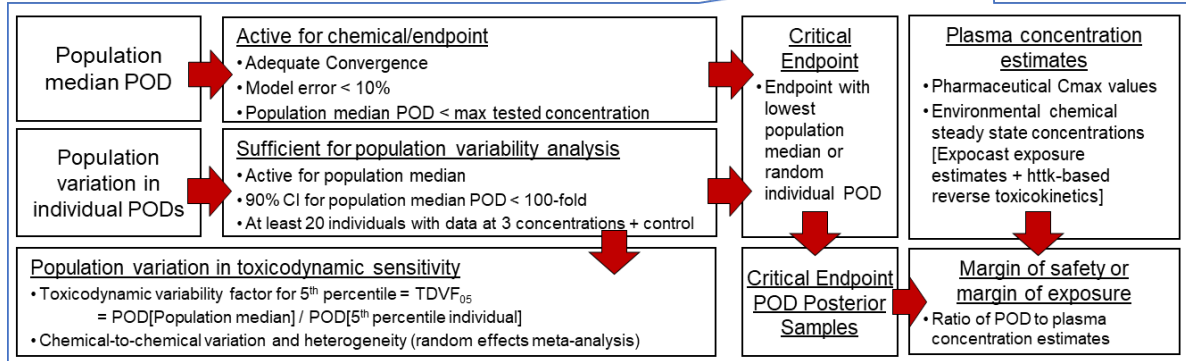
Bayesian Population Concentration-Response Modeling



Population-Based Hazard and Risk Characterization

- Hazard Characterization**
- Active/inactive for each chemical and endpoint
 - Critical endpoint for each chemical
 - Point of departure (POD) for each endpoint
 - Population variation in toxicodynamic sensitivity
- Risk Characterization**
- Margin of safety for pharmaceuticals
 - Margin of exposure for environmental chemicals
 - Separate estimates for population median and sensitive individual

See Burnett et al. (2019) for details



...Some academics also gave a note of caution. *"As a toxicologist who is passionate about replacement of animal testing with cell-based models, I welcome this announcement,"* said Ivan Rusyn, director of the Superfund Research Center at Texas A&M University. *"However, a clear plan and milestones for how this vision will be implemented by the agency is needed to ensure that solid foundation exist for **replacement of certain animal tests** with alternative methods and that **human health protection is not diluted by reducing the regulatory requirements on chemical safety**,"* he told Chemical Watch.

- Are we ready to stop using animals for evaluating safety of EPA-regulated chemicals? **NOT immediately**
- When will we be ready to stop using animals for evaluating safety of EPA-regulated chemicals? **NOT soon**
- Is there a promise for organotypic models as NAMs? **YES!! but EPA needs to define fit(s) for purpose**
- Why not use “human on a chip” to replace animal tests? **A combination of PBK modeling and organotypic model-derived hazard, mechanistic, TK and other data is likely to pave the way forward**
- How can Administrator’s directive to reduce/eliminate animal testing benefit from organotypic models? **The Agency shall continue supporting targeted research on the application of these models to EPA’s purpose(s) and to develop intramural capacity in the use of these new models**

Tissue Chip Testing Experiments:

Courtney Sakolish Leoncio Vergara
Yizhong Liu Clifford Stephan

Analytical Chemistry Experiments:

Yu-Syuan Luo Kyle Ferguson
Alan Valdiviezo

In Vitro Experiments & Modeling:

Fabian Grimm Sarah Burnett
Zunwei Chen Alex Blanchette
William Klaren Nan-Hung Hsieh

Faculty Collaborations:

Weihseh Chiu Fred Wright
Arum Han

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