

# Developing Drugs and Testing Platforms for Pain, Addiction and Overdose in Collaboration with NCATS

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*Scientific Director*



# NCATS pre-clinical HEAL initiatives involve both extramural opportunities and intramural collaborations

- Extramural funding opportunities
  - RFA-TR-19-005: HEAL Initiative: Biofabricated 3D Tissue Models of Nociception, Opioid Use Disorder and Overdose for Drug Screening
  - RFA-TR-19-003: HEAL Initiative: Tissue Chips to Model Nociception, Addiction, and Overdose
  - NOT-TR-18-031: HEAL Initiative: Announcement of the NCATS ASPIRE Design Challenges to Develop Innovative and Catalytic Approaches Towards Solving the Opioid Crisis
  - See <https://ncats.nih.gov/heal> for a full list of NCATS HEAL-Related Funding Opportunities
- Intramural collaborations with NCATS – to enable development of new experimental therapeutics
  - **Not an extramural grant – no funding provided to collaborator’s institution**
  - Team-based: You (who have existing data, disease knowledge and novel therapeutic hypothesis) + NCATS (preclinical drug development expertise and laboratory capabilities)
  - Efficiency: state of the art technology and milestone-driven collaboration plans

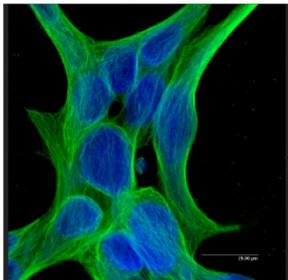


# The Preclinical Translation Process

*(using small molecule drugs as an example)*



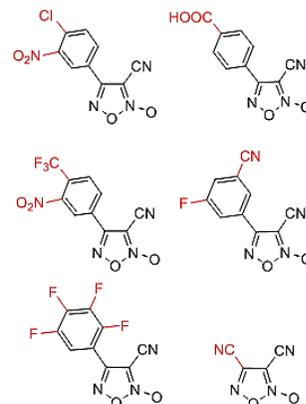
Basic Research



Assay Development



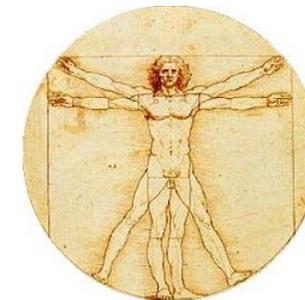
Screening



Medicinal Chemistry



Preclinical Development



Clinical Development



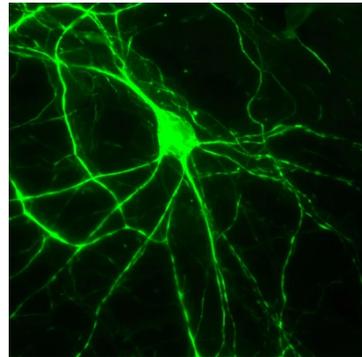
***NCATS Division of Preclinical Innovation***



# Stem Cell Translation Laboratory

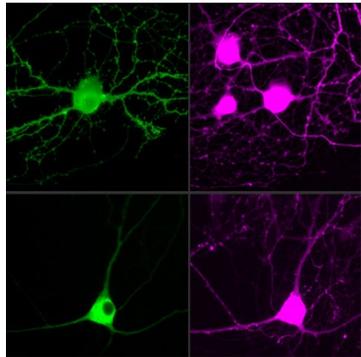
Collaborators can work with the SCTL to develop iPSC-derived cellular platforms for improved prediction of *in vivo* human effects of lead compounds

## Capabilities



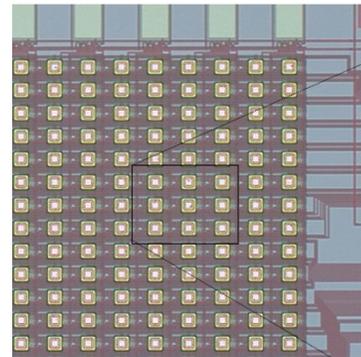
Access to relevant human cell types

*Sensory neurons (nociceptors) and other neuronal subtypes*



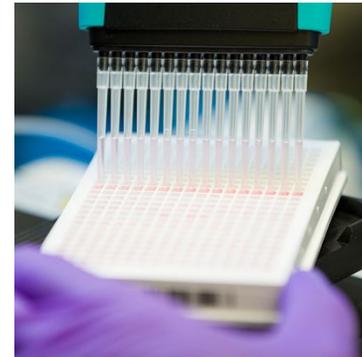
Advanced imaging technologies for functional cell characterization

*High-content confocal, calcium imaging, optogenetics*



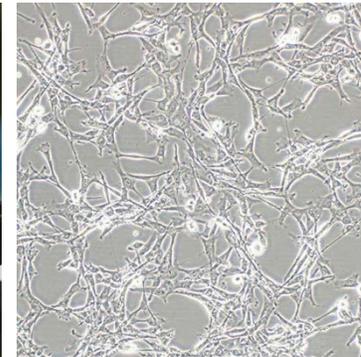
High-throughput electrophysiology methods

*High-density multi-electrode arrays  
26,400 electrodes/well*



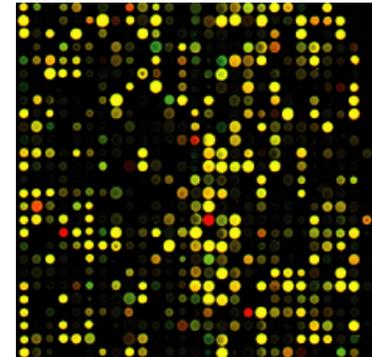
Measurement of signaling pathways, metabolism & specific targets

*Cyclic AMP, PKA activity, CREB phosphorylation, energy metabolism*



Longitudinal tracking of cell behavior

*Multiple measurements over days, weeks or months*



Combined single-cell transcriptomic & proteomic analyses

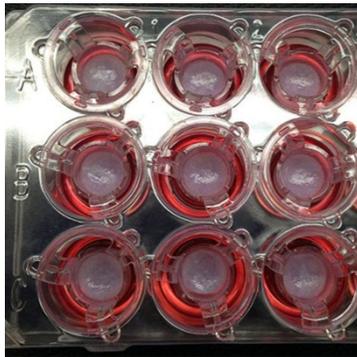
*Drug response in individual nociceptors and other neuronal phenotypes*



# 3-D Tissue Biofabrication Laboratory

Collaborators can work with the 3-D Laboratory to biofabricate multicellular functional tissues using human primary or iPSC-derived cells that are better models of human disease state and response to new drugs

## Capabilities



**Tissue engineering technologies**

*Development of tissues-in-a-well*



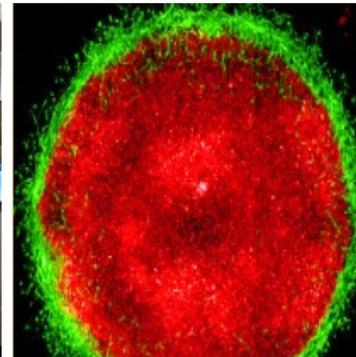
**Automated production of iPSC cell-derived cells**

*To reproducibly scale up production of human tissue relevant cells*

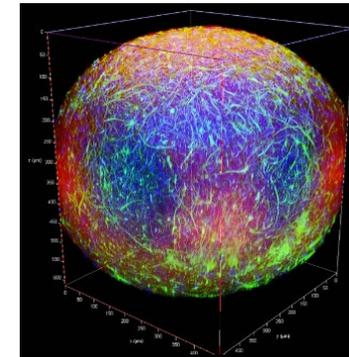


**3D bioprinters**

*To create spatial cellular patterns in tissues, eg, neuronal circuits, neurovascular unit, innervated tissues*

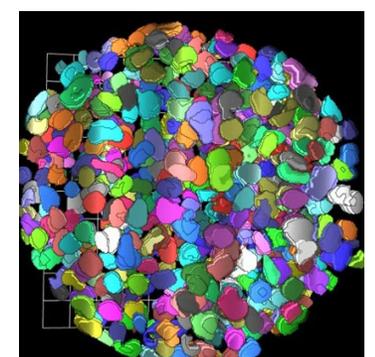


**Spatially defined and physiologically relevant tissue models**



**Validation of 3D organoid cultures**

*Neural spheroids for compound screening*



**Assays using 3D tissue models**

*High-content confocal, calcium imaging, optogenetics, multielectrode arrays, neurotransmitters biosensors*



# Pharmacological Probe Development

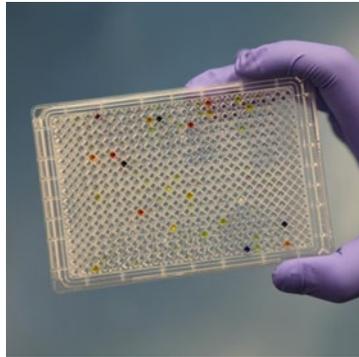
Use assay development and quantitative high-throughput screening to identify promising compounds to modulate novel targets; optimize compound properties to probe novel targets.

## Capabilities



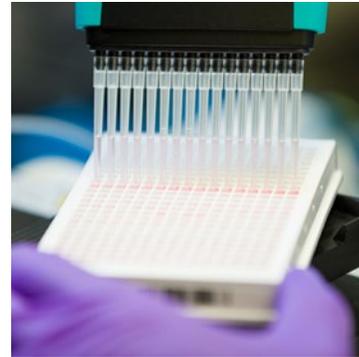
**HTS assay adaptation, development**

*GPCR and ion channel assays and high-content image-based assays*

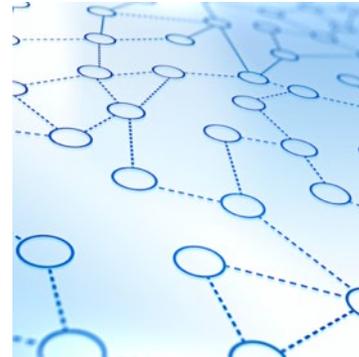


**Drug repurposing libraries**

*All FDA approved compounds (>2,400), as well as >150,000 in annotated/diversity collections*



**Counterscreen & confirmatory assays**



**Cheminformatics platforms**

*Molecular modeling and docking, Machine learning, High content image analysis*



**Medicinal chemistry**

*Largest medicinal chemistry program at NIH, > 30 fume hoods, > 20,000 molecules made*



**ADMET Assays**

*Aqueous kinetic solubility, rodent & human liver microsomal stability & PAMPA permeability*

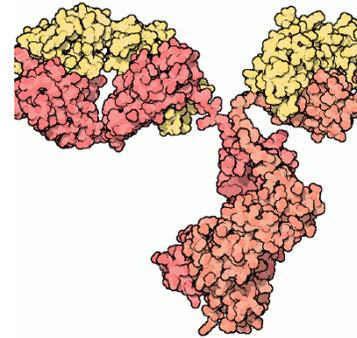
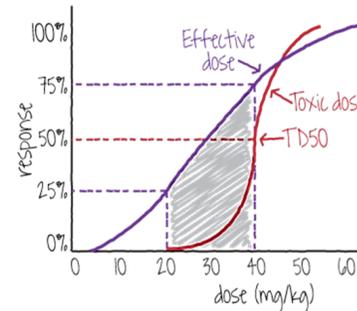
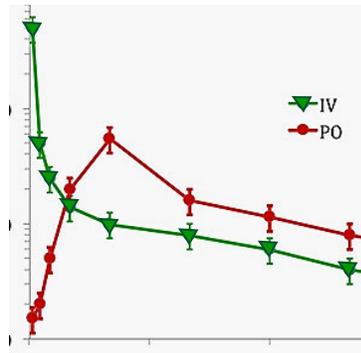
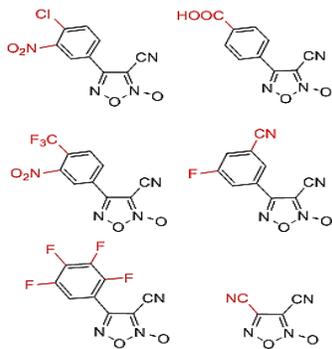


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# Enabling Investigational New Drug Applications

Joint project teams develop prototype therapeutics into IND-enabled small molecules, biologics, and gene and cell therapies ready for clinical testing

## Capabilities



Target validation  
and lead  
optimization

Pharmacokinetics/  
pharmacodynamics

GLP safety  
evaluation and  
toxicology

Therapeutic  
modality expertise

GMP  
manufacturing  
and formulation

Repurposing of  
approved therapies

*To finalize declaration  
of clinical candidates*

*Including small  
molecules, biologics  
and gene and cell  
therapies*

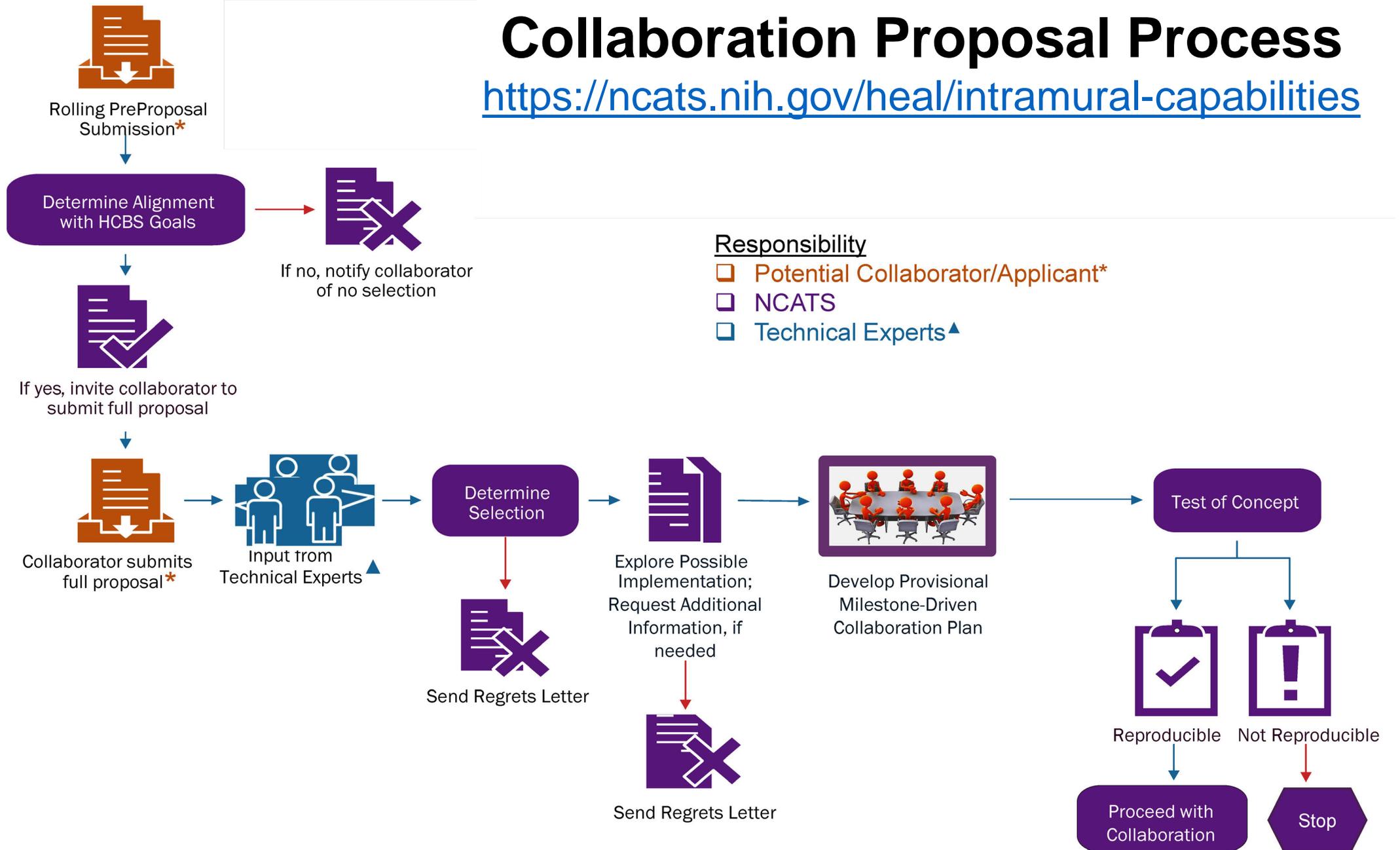
*To scale up the  
production of the  
compound for clinical  
testing*



National Center  
for Advancing  
Translational Sciences

# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

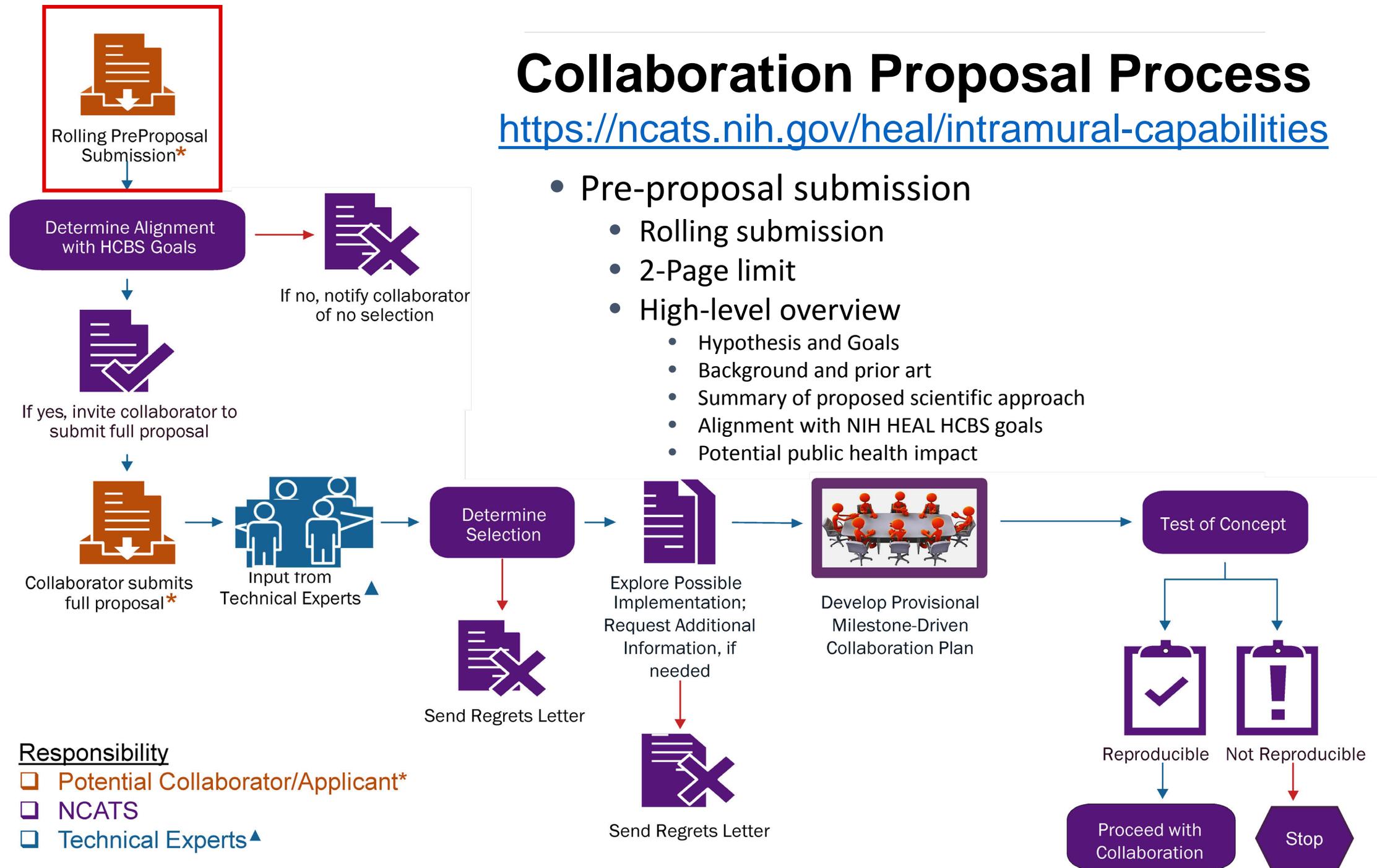


# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

- Pre-proposal submission

- Rolling submission
- 2-Page limit
- High-level overview
  - Hypothesis and Goals
  - Background and prior art
  - Summary of proposed scientific approach
  - Alignment with NIH HEAL HCBS goals
  - Potential public health impact



## Responsibility

- Potential Collaborator/Applicant\*
- NCATS
- Technical Experts▲

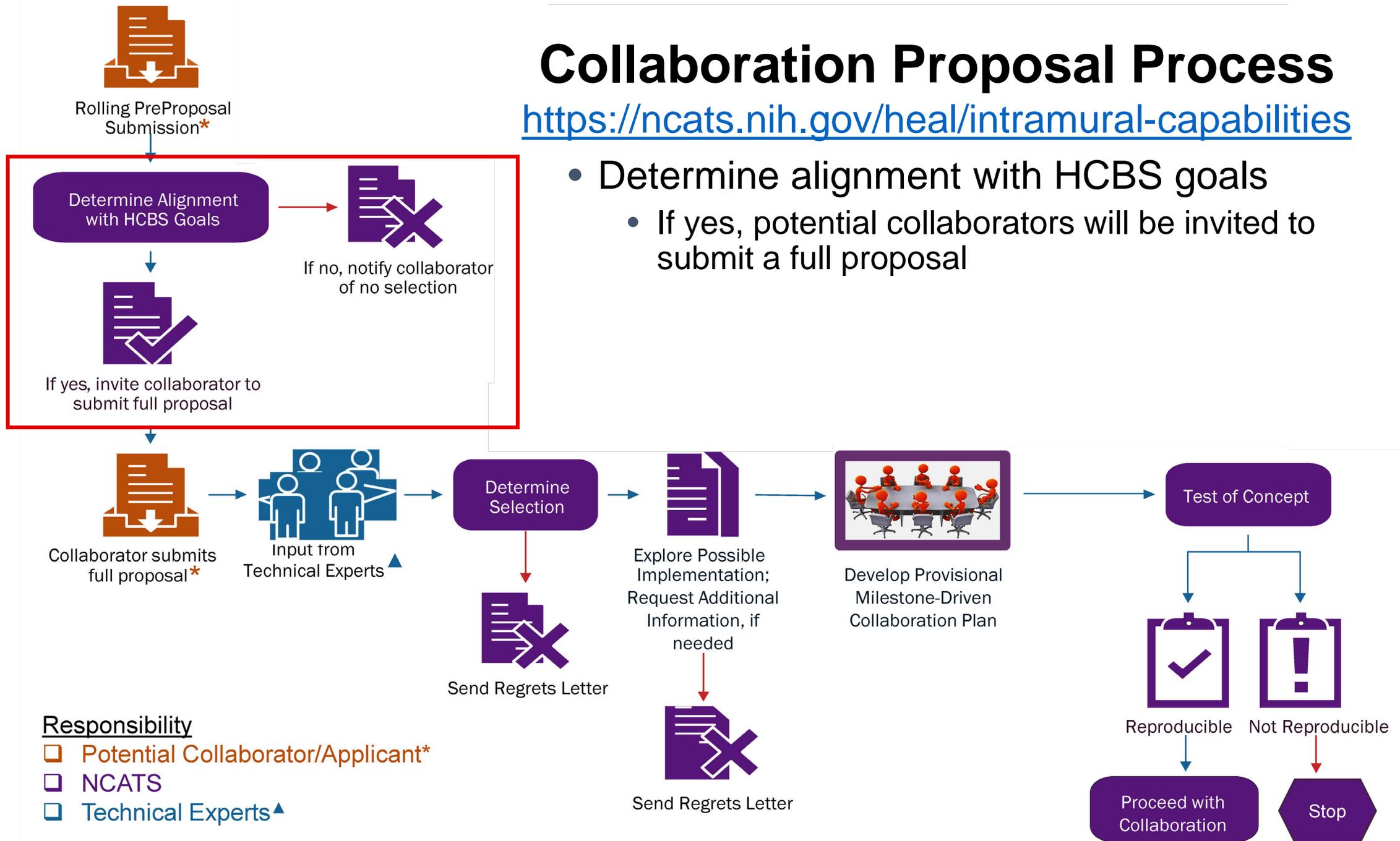


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# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

- Determine alignment with HCBS goals
  - If yes, potential collaborators will be invited to submit a full proposal



## Responsibility

□ Potential Collaborator/Applicant\*

□ NCATS

□ Technical Experts▲



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# Collaboration Proposal Process

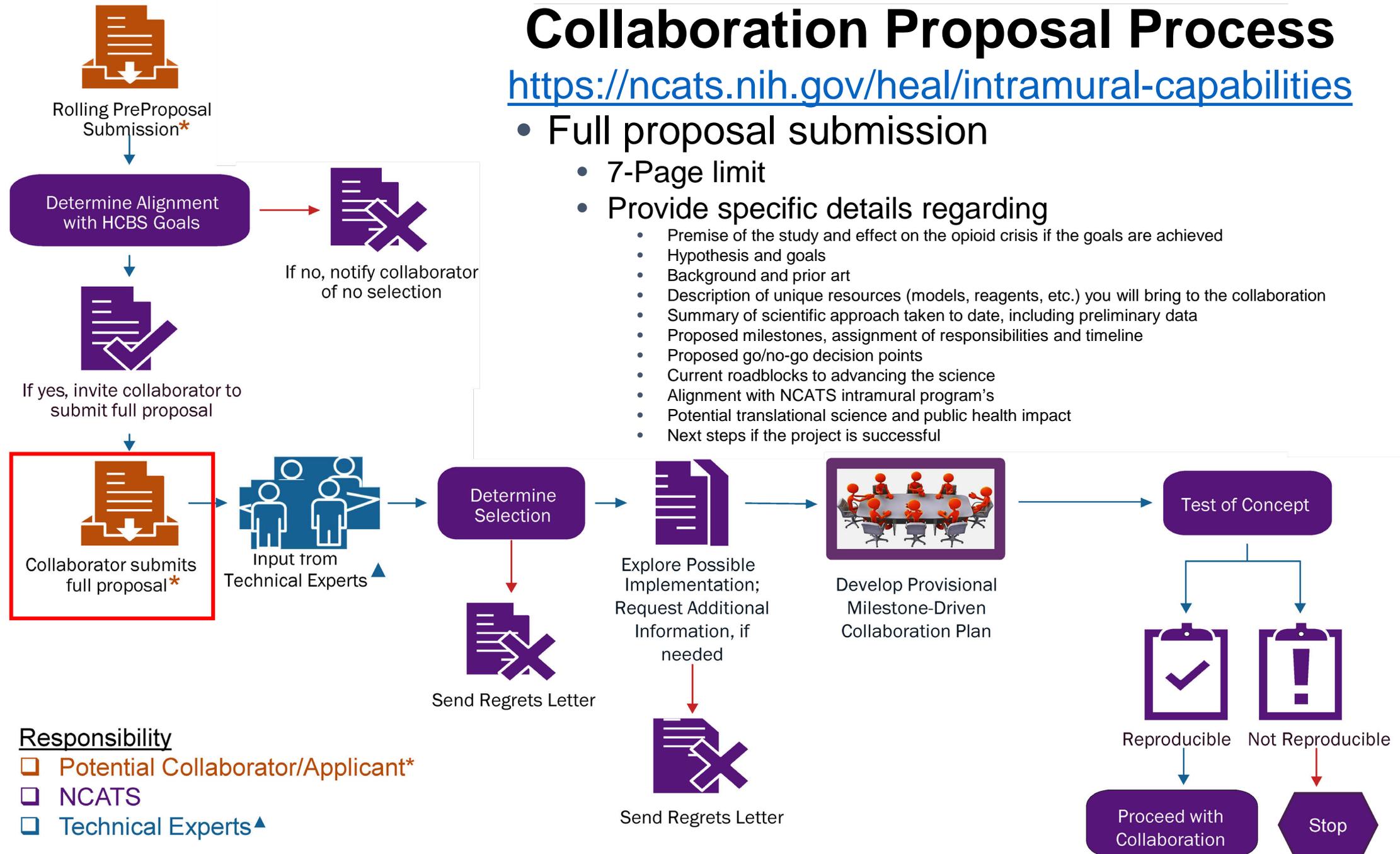
<https://ncats.nih.gov/heal/intramural-capabilities>

- Full proposal submission

- 7-Page limit

- Provide specific details regarding

- Premise of the study and effect on the opioid crisis if the goals are achieved
- Hypothesis and goals
- Background and prior art
- Description of unique resources (models, reagents, etc.) you will bring to the collaboration
- Summary of scientific approach taken to date, including preliminary data
- Proposed milestones, assignment of responsibilities and timeline
- Proposed go/no-go decision points
- Current roadblocks to advancing the science
- Alignment with NCATS intramural program's
- Potential translational science and public health impact
- Next steps if the project is successful



## Responsibility

  Potential Collaborator/Applicant\*

  NCATS

  Technical Experts▲



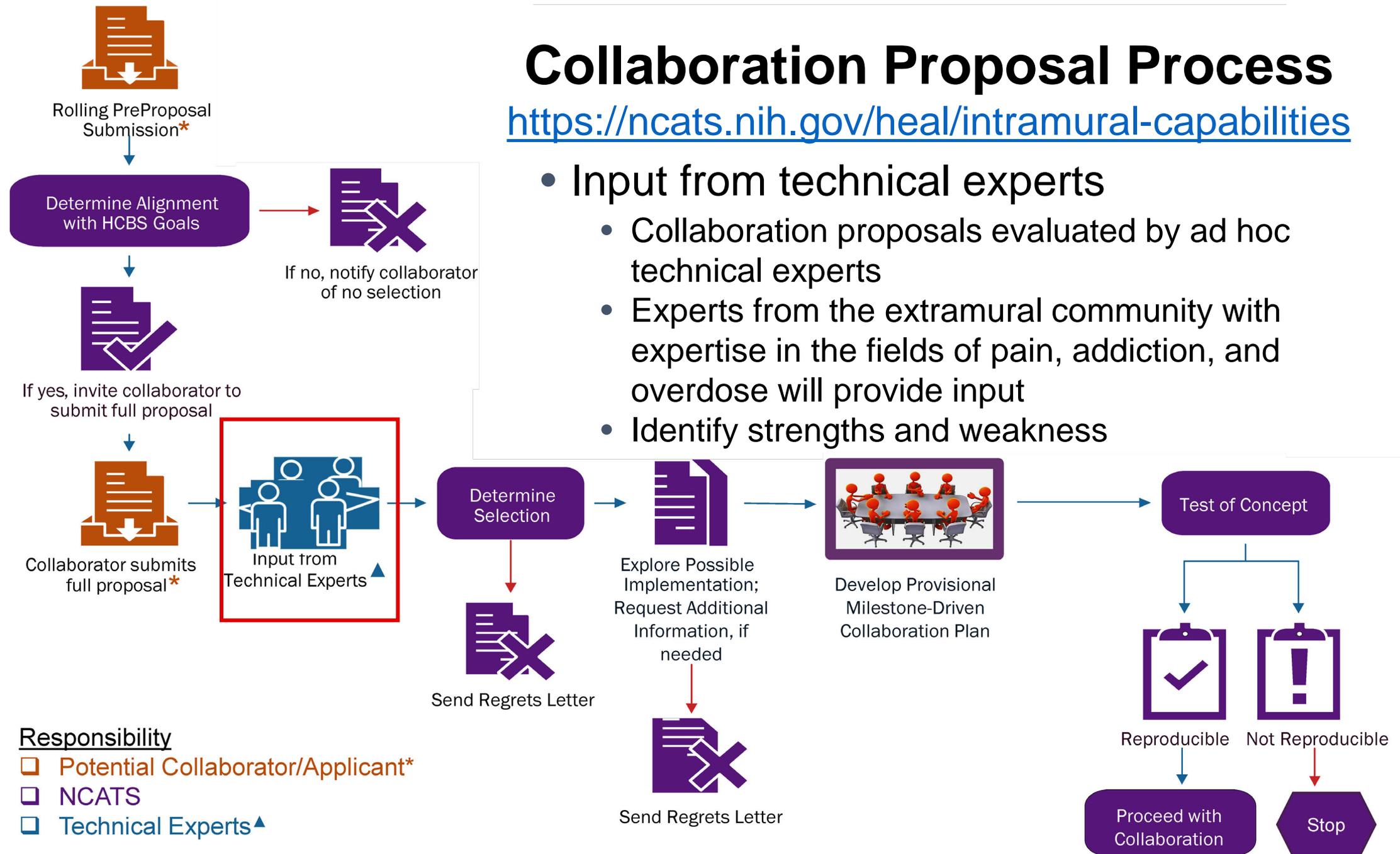
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# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

- Input from technical experts

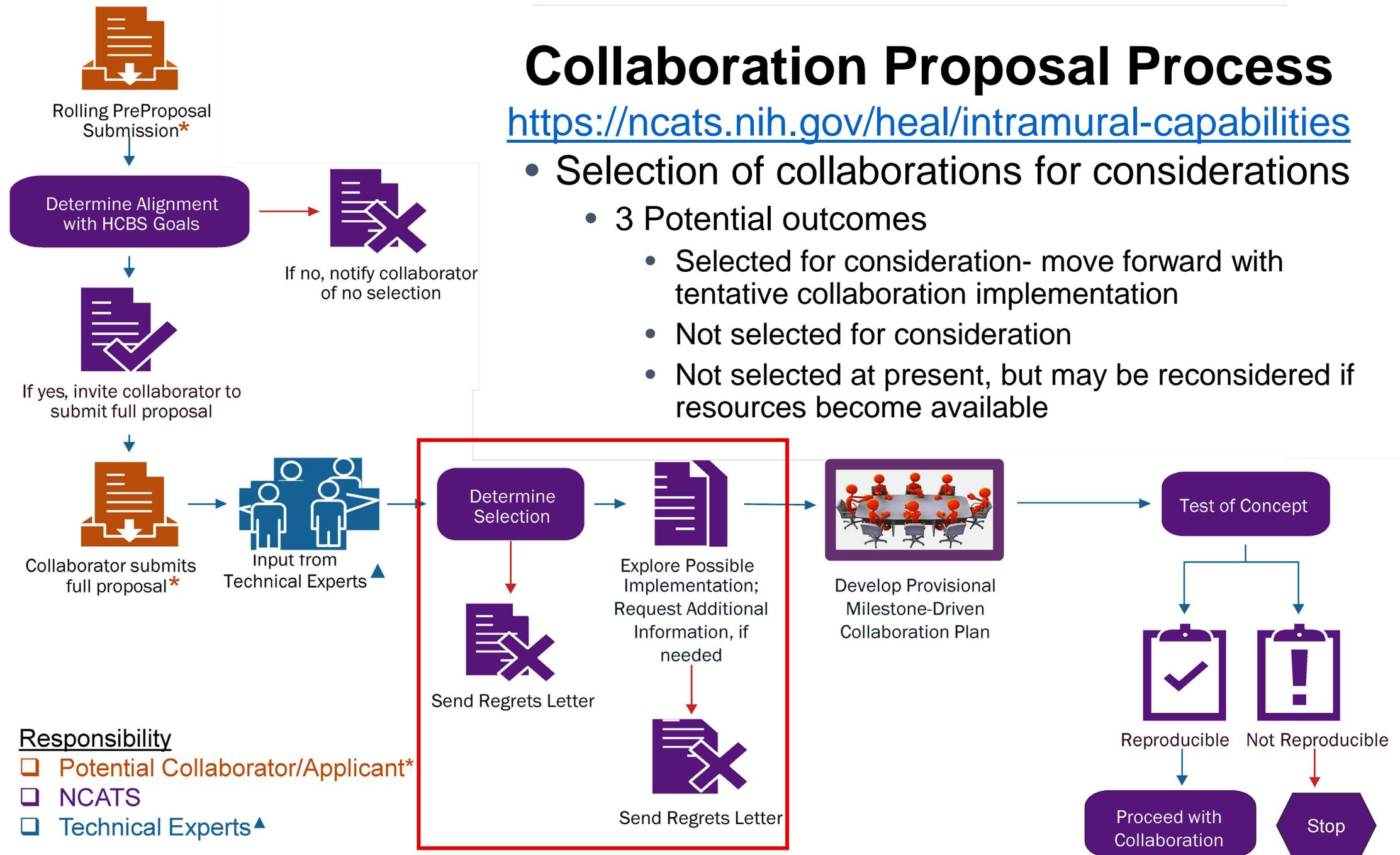
- Collaboration proposals evaluated by ad hoc technical experts
- Experts from the extramural community with expertise in the fields of pain, addiction, and overdose will provide input
- Identify strengths and weakness



# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

- Selection of collaborations for considerations
  - 3 Potential outcomes
    - Selected for consideration- move forward with tentative collaboration implementation
    - Not selected for consideration
    - Not selected at present, but may be reconsidered if resources become available



## Responsibility

- Potential Collaborator/Applicant\*
- NCATS
- Technical Experts▲

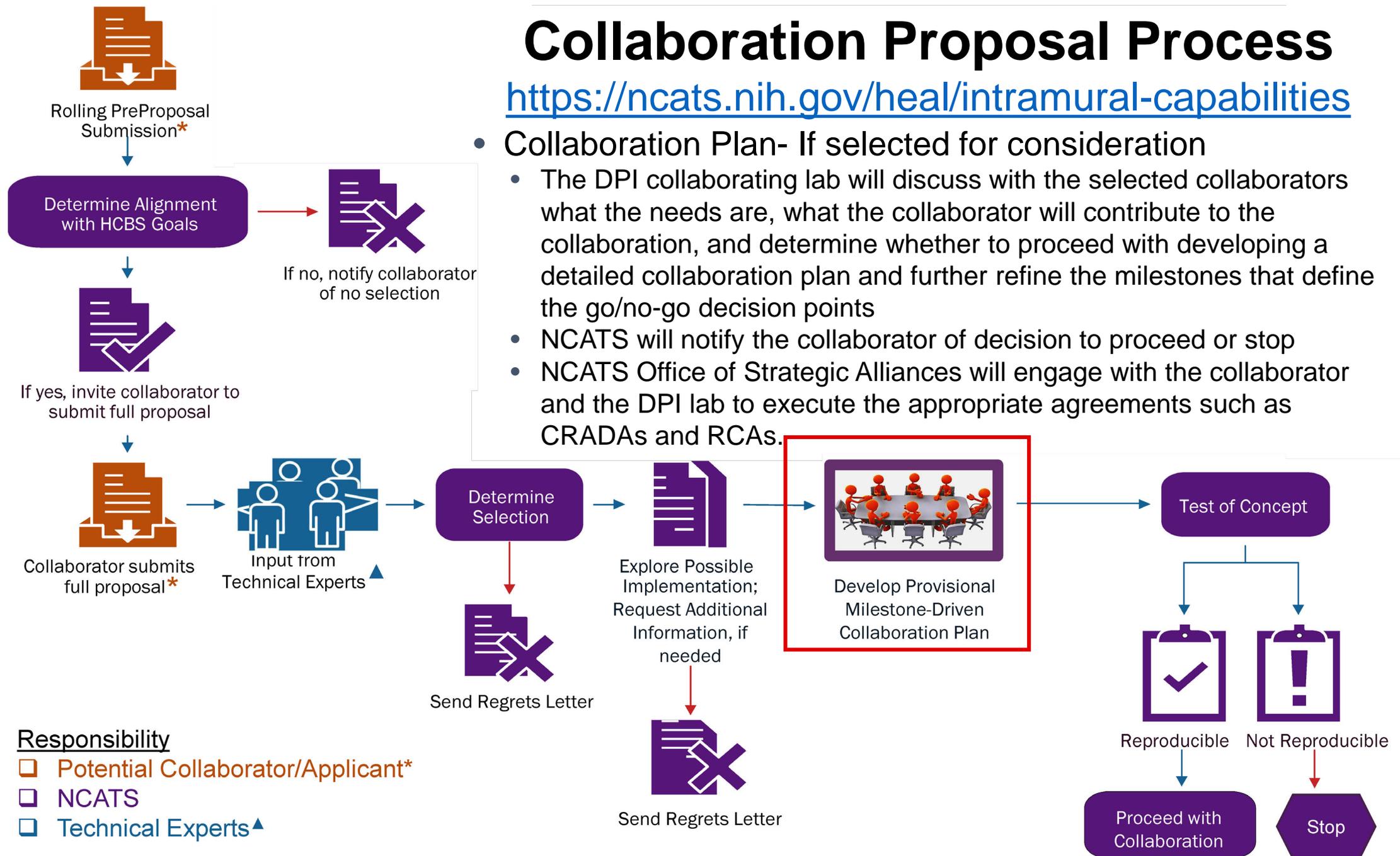


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# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

- Collaboration Plan- If selected for consideration
  - The DPI collaborating lab will discuss with the selected collaborators what the needs are, what the collaborator will contribute to the collaboration, and determine whether to proceed with developing a detailed collaboration plan and further refine the milestones that define the go/no-go decision points
  - NCATS will notify the collaborator of decision to proceed or stop
  - NCATS Office of Strategic Alliances will engage with the collaborator and the DPI lab to execute the appropriate agreements such as CRADAs and RCAs.



## Responsibility

Potential Collaborator/Applicant\*

NCATS

Technical Experts▲

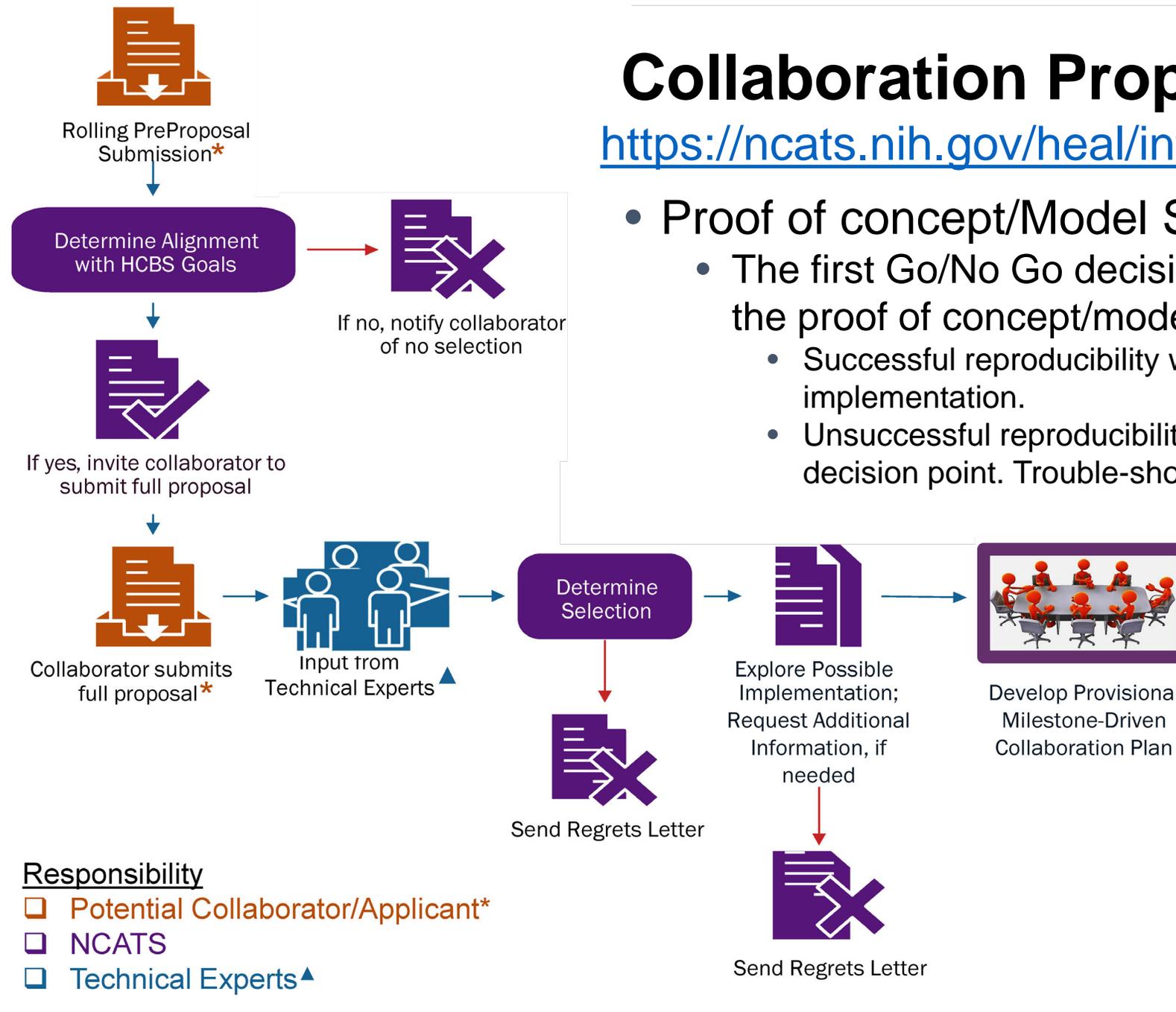


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# Collaboration Proposal Process

<https://ncats.nih.gov/heal/intramural-capabilities>

- Proof of concept/Model System Validation
  - The first Go/No Go decision will be reproducibility of the proof of concept/model system
    - Successful reproducibility will result in full study implementation.
    - Unsuccessful reproducibility will serve as the first no-go decision point. Trouble-shooting options will be discussed.



## Responsibility

- Potential Collaborator/Applicant\*
- NCATS
- Technical Experts▲

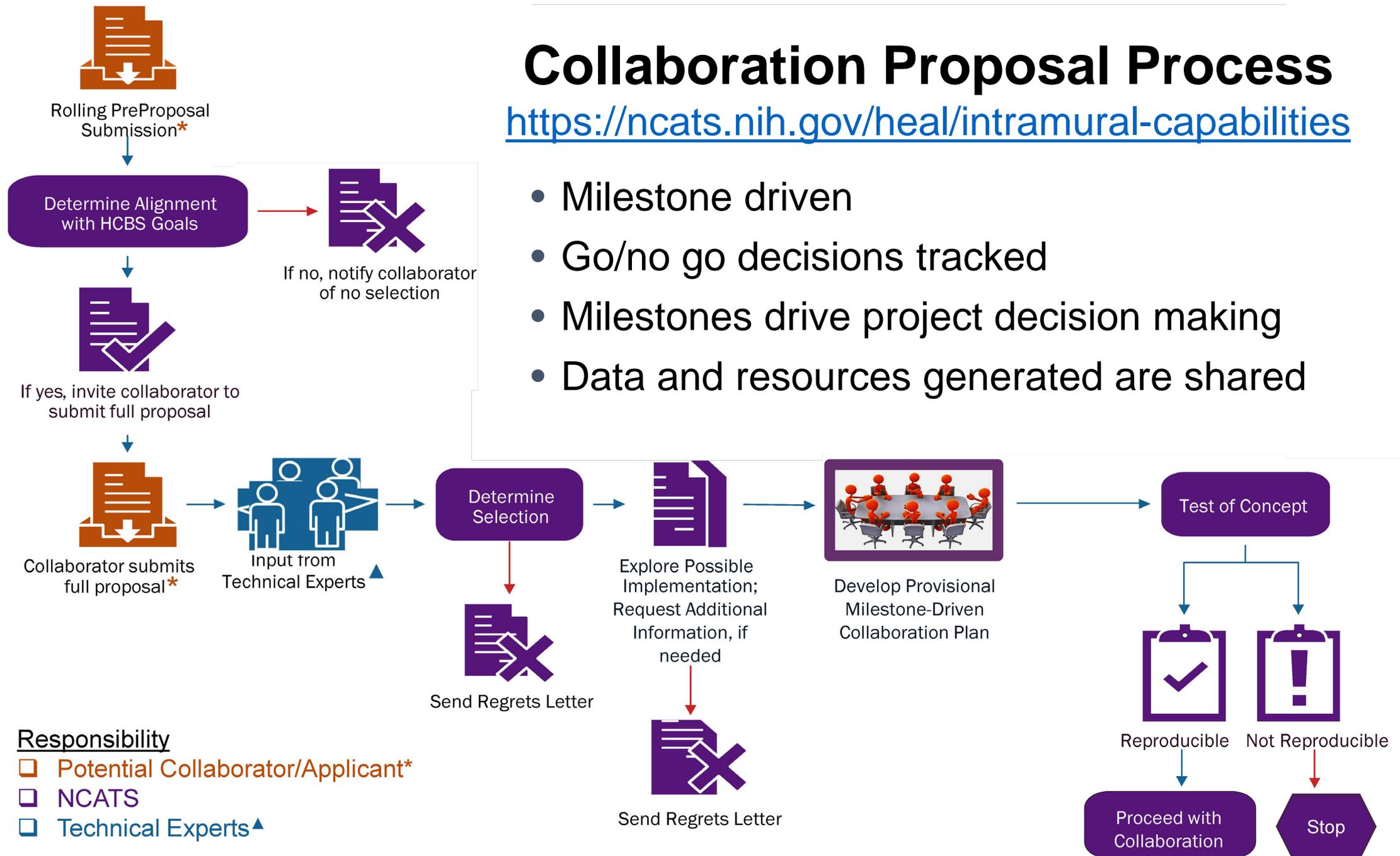


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# Collaboration Proposal Process

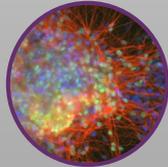
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- Milestone driven
- Go/no go decisions tracked
- Milestones drive project decision making
- Data and resources generated are shared

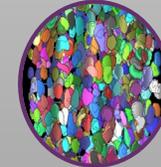


# Summary

**Human  
Cell-Based  
Platforms for  
testing new  
treatments**



iPSC-Derived Neurons for  
Pain and Reward Pathways



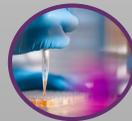
3-D Bioprinted Tissue  
Models

**Model Complexity**

**Cells**

**Multi-organ**

**Accelerating  
Translation of  
Novel Compounds  
for Clinical Testing**



Development of  
Pharmacological Probes for  
Novel Targets



Development of  
Investigational New Drugs  
for Clinical Testing

**Preclinical Development**

**Early**

**Late**

**Clinical  
Testing  
and  
Trials**

**More Information:**

[NCATSDPIHEALCollab@nih.gov](mailto:NCATSDPIHEALCollab@nih.gov)

<https://ncats.nih.gov/heal/intramural-capabilities>



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