

The NIH Microphysiological Systems Program: Tissue Chips for Drug Safety and Efficacy Studies

Scientific Advisory Committee on Alternative Toxicological Methods Meeting
Sept 20th 2019

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Outline:

- National Center for Advancing Translational Sciences (NCATS), NIH
- Microphysiological Systems/Tissue Chips
- NIH Tissue Chips Consortium
- Building confidence and evolving MPS technology
- Building Partnerships
- Future Initiatives and Summary



National Center for Advancing Translational Sciences



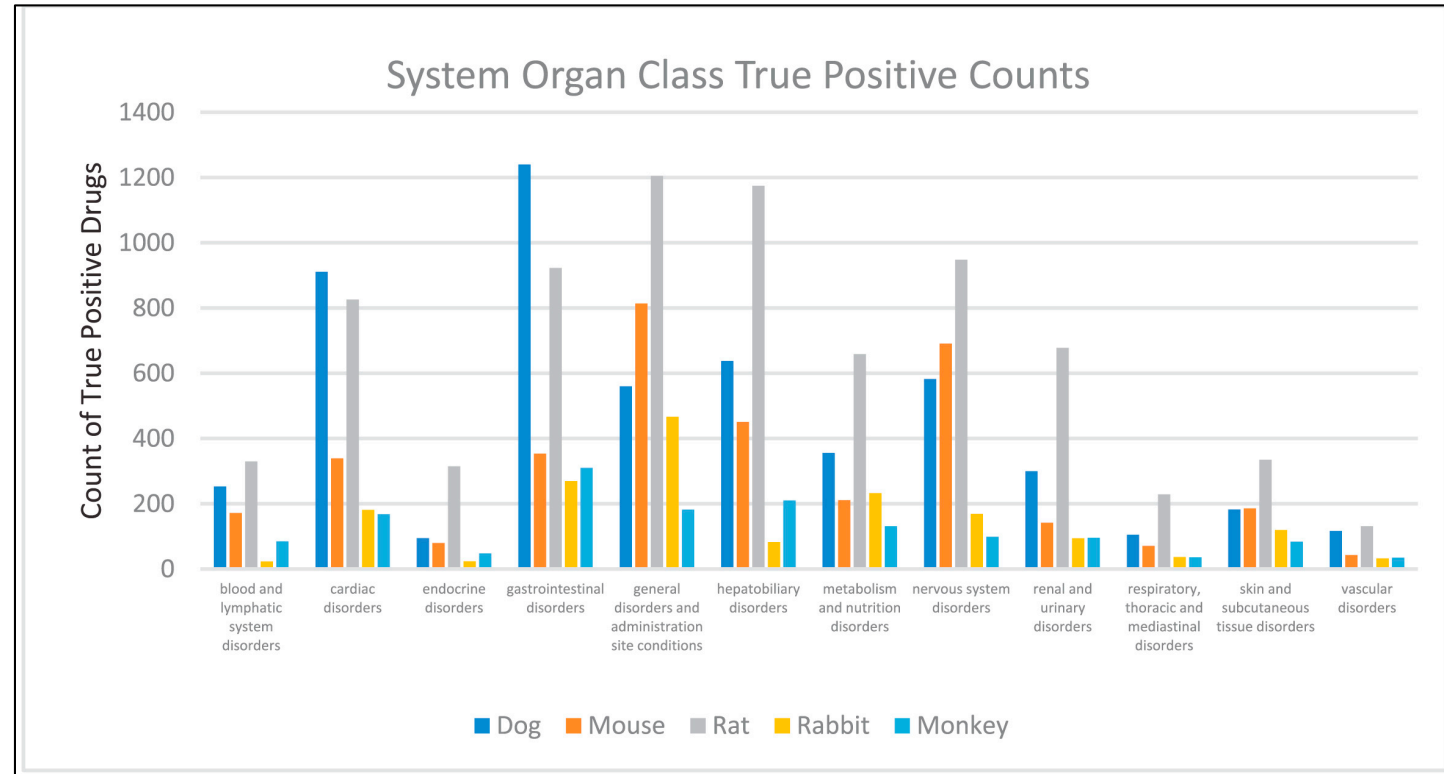
Mission: To catalyze the generation of **innovative methods and technologies** that will enhance the development, testing and implementation of diagnostics and therapeutics across a wide range of human diseases and conditions.

- NCATS focuses on the **scientific** and **organizational** problems in translation, **e.g. tools for predictive safety and efficacy**

Current Challenges in Drug Development

- ❑ Average time to develop (and bring it to market) a drug **10-15 years**
- ❑ Average cost to develop a drug to market, including cost of failures, **\$2.6 billion**
(*phRMA, Biopharmaceutical Research Industry Profile, 2016*)
- ❑ The current drug discovery paradigm has a **failure rate of 90%**:
 - **55% due to lack of efficacy**
 - **28% due to toxic effects in humans**
- ❑ Clinical trials of homogenous and small sample sizes are used to predict the outcomes on diverse populations

The highest rates of true positives (36%) in animal-human translation is observed for dogs (cardiac & GI) and rats (renal & respiratory)



Arrowsmith and Miller, Nature Reviews Drug Discovery, Volume 12, 569 (2013)

Cook et al., Nature Reviews Drug Discovery, Volume 13, 419 (2014)

Clark and Steger-Hartmann, Regulatory Toxicology and Pharmacology, Volume 96, 94 (2018)

3,290 approved drugs
1,637,449 adverse events
70 years

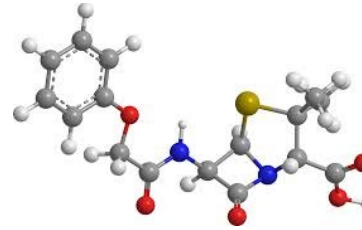
Most animal models are poor predictors of human response



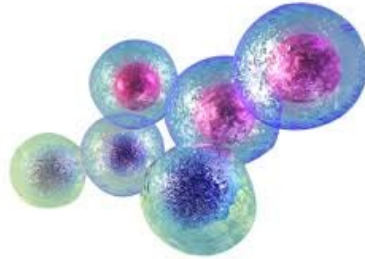
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Translational Sciences

Therapeutic Modalities are Increasingly Human-specific and Personalized

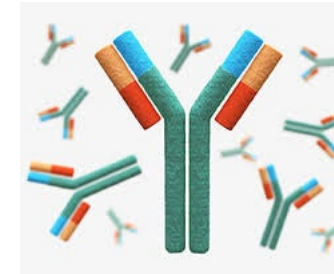
SMALL MOLECULES



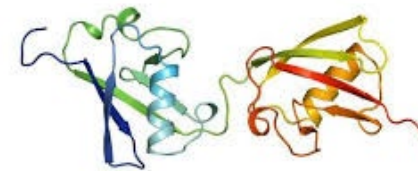
CELL THERAPIES



ANTIBODIES



PROTEIN THERAPIES



GENE THERAPIES

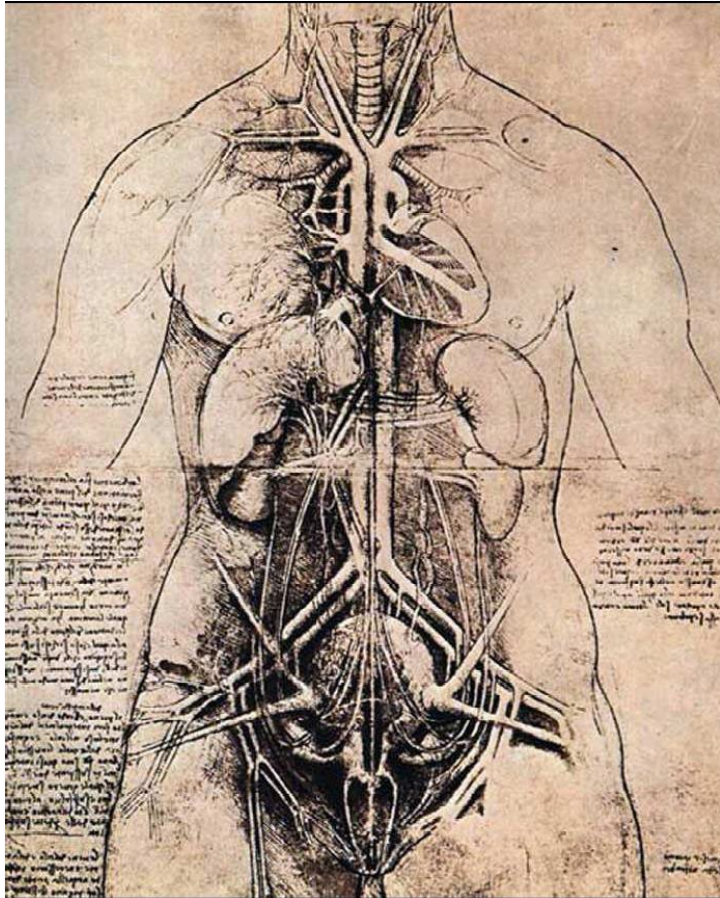


ANTISENSE



Microphysiological Systems Program: Tissue Chips for Drug Screening

GOAL: Develop an *in vitro* platform that uses human cells and tissues, and combine with advances in stem cell biology, microfluidics and bioengineering to evaluate the efficacy, safety and toxicity of promising therapies.



- All 10 human physiological systems will be functionally represented by human tissue constructs:
 - Circulatory
 - Endocrine
 - Gastrointestinal
 - Immune
 - Skin
 - Musculoskeletal
 - Nervous
 - Reproductive
 - Respiratory
 - Urinary
- Physiologically relevant, genetically diverse, and pathologically meaningful
- Modular, reconfigurable platform
- Tissue viability for at least 4 weeks
- Community-wide access
- Collaboration between NIH, FDA and DARPA and other stakeholders



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Tissue Chips

- a multi-channel 3-D microfluidic cell culture chip that simulates the activities, mechanics and physiological response of entire organs and organ systems



Scaffold

Cells

Structure

Spatial and Temporal Patterning

Perfusion

Bioreactor

Innervation

Host Response

Functional Readout

Computational Design

- purified ECM , synthetic polymers, composites
- human-derived primary or iPSCs;
- porosity, topography, stiffness
- controlled release of cytokine and hormone gradients
- microfluidic cell culture devices, vasculature
- biomechanical properties
- signal propagation, coordinated response
- generalized inflammation, specific immunity
- real-time, label-free, non-destructive sensing, imaging
- systems integration
- multi-scale modeling

Representing relevant biology on bioengineered chips



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Microphysiological Systems Program: Tissue Chips 1.0 for Safety and Toxicity Testing

AstraZeneca



National Institutes
of Health



2012-13

2013-14

2014-15

2015-16

2016-17



National Institutes
of Health

\$75 M over 5 years – cell source, platform development, validation and integration (NCATS, CF, NIBIB, NIEHS, NICHD, ORWH, NCI)



\$75 M over 5 years - development of 10-organ platforms



**FDA provides insight and expertise throughout the program



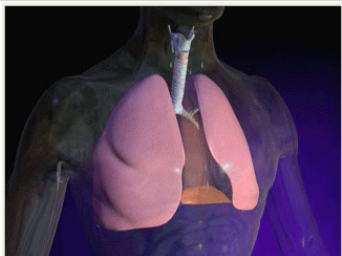
GOALS:

- Develop single organ and Multi-organ chips
- Functional and physiological validation
- Compound testing
- Partnerships

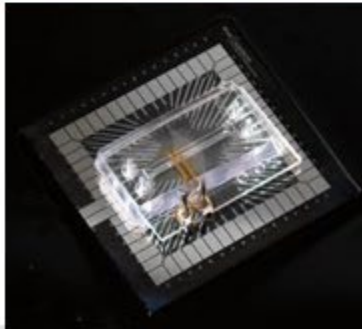
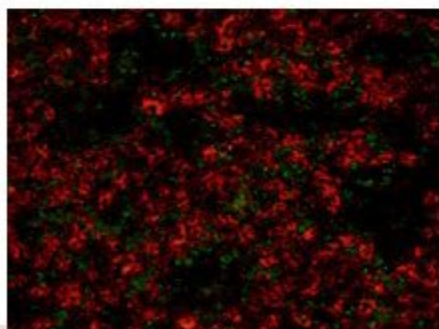
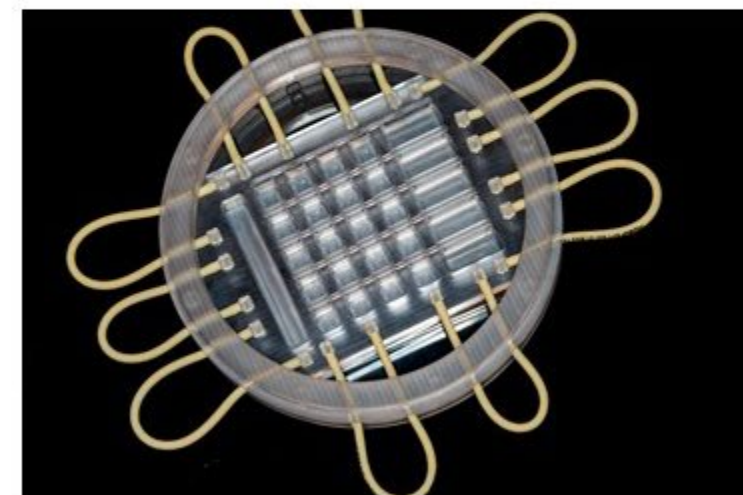
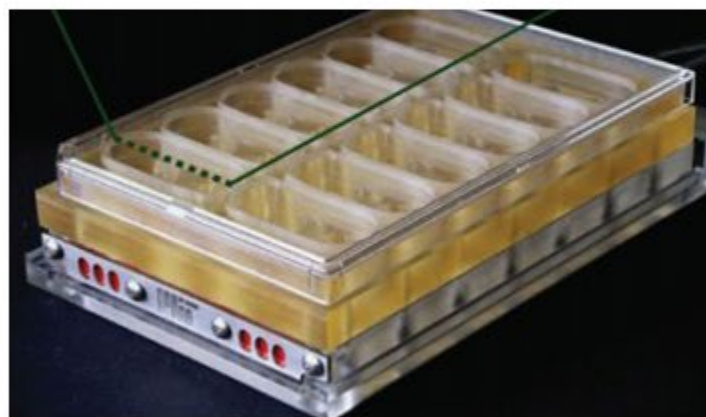
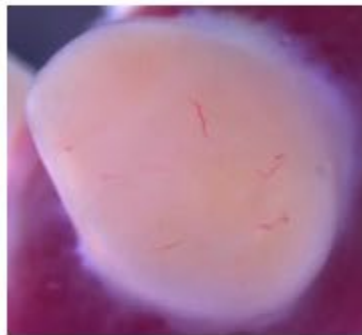
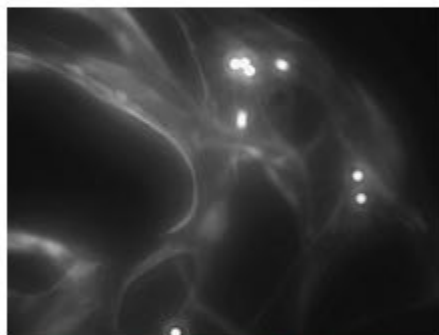
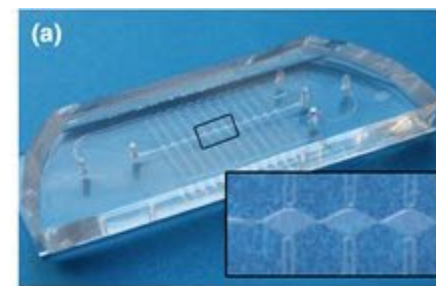
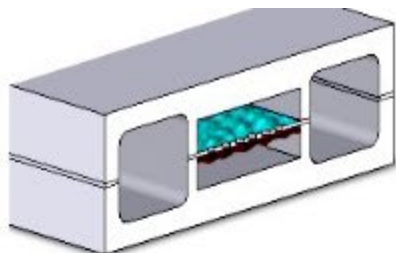
Phased award and milestone-driven



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Microphysiological Systems: *In Vitro* Mimics of Human Organ Function



Tissue Chips 1.0 to Predict Drug Safety (2012-2017)

- James A. Thomson; Morgridge Institute for Research at the University of Wisconsin-Madison
Human induced pluripotent stem cell and embryonic stem cell-based models for predictive neural toxicity and teratogenicity

- John P. Wikswo; Vanderbilt University
Neurovascular unit on a chip: Chemical communication, drug and toxin responses

- Steven C. George; University of California, Irvine
An integrated in vitro model of perfused tumor and cardiac tissue

- D. Lansing Taylor; University of Pittsburgh
A 3-D biomimetic liver sinusoid construct for predicting physiology and toxicity

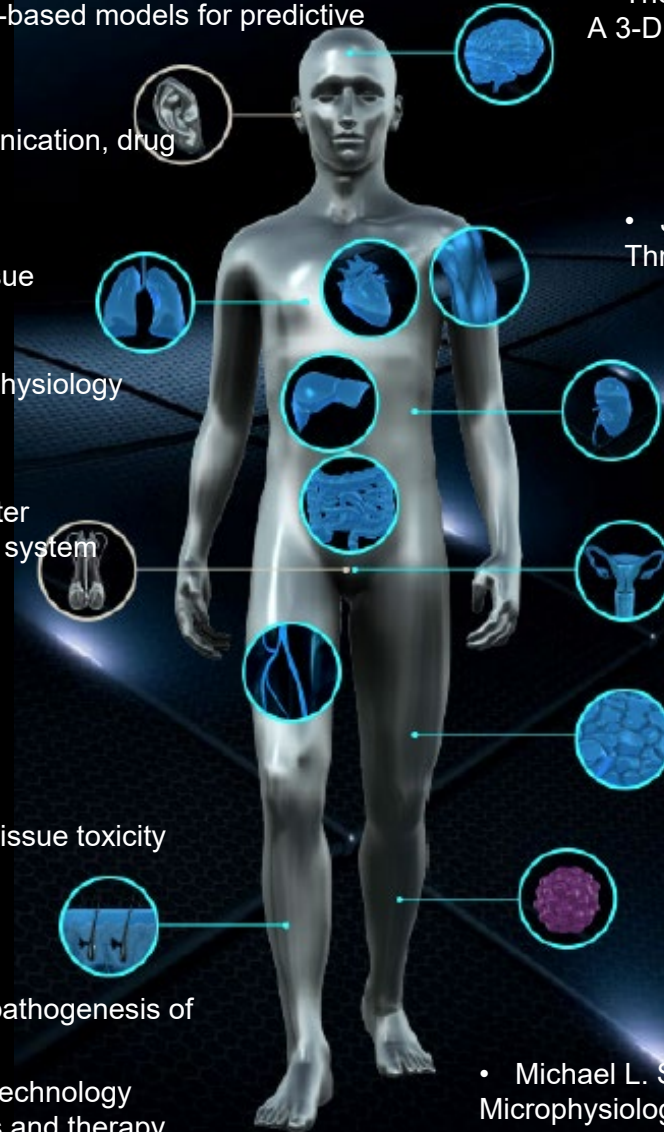
- James M. Wells; Cincinnati Children's Hospital Medical Center
Generating human intestinal organoids with an enteric nervous system

- John P. Lynch; University of Pennsylvania
Modeling oxidative stress and DNA damage using a gastrointestinal organotypic culture system

- George A. Truskey; Duke University
Circulatory system and integrated muscle tissue for drug and tissue toxicity

- Rocky S. Tuan; University of Pittsburgh
Three-dimensional osteochondral micro-tissue to model pathogenesis of osteoarthritis

- Linda Griffith; Massachusetts Institute of Technology
All-human microphysical model of metastasis and therapy



- Thomas Hartung; Johns Hopkins University
A 3-D model of human brain development for studying gene/environment interactions

- Kevin K. Parker; Harvard University
Human cardio-pulmonary system on a chip

- Joan E. Nichols; The University of Texas Medical Branch at Galveston
Three-dimensional human lung model to study lung disease and formation of fibrosis

- Mark Donowitz; Johns Hopkins University, Baltimore
Human intestinal organoids: Pre-clinical models of non-inflammatory diarrhea

- **Teresa Woodruff; Northwestern University**
Ex Vivo Female Reproductive Tract Integration in a 3-D Microphysiological

- Jonathan Himmelfarb; University of Washington, Seattle
A tissue-engineered human kidney microphysiological system

- Gordana Vunjak-Novakovic; Columbia University Health Sciences
Integrated Heart-Liver-Vascular Systems for Drug Testing in Human Health and Disease

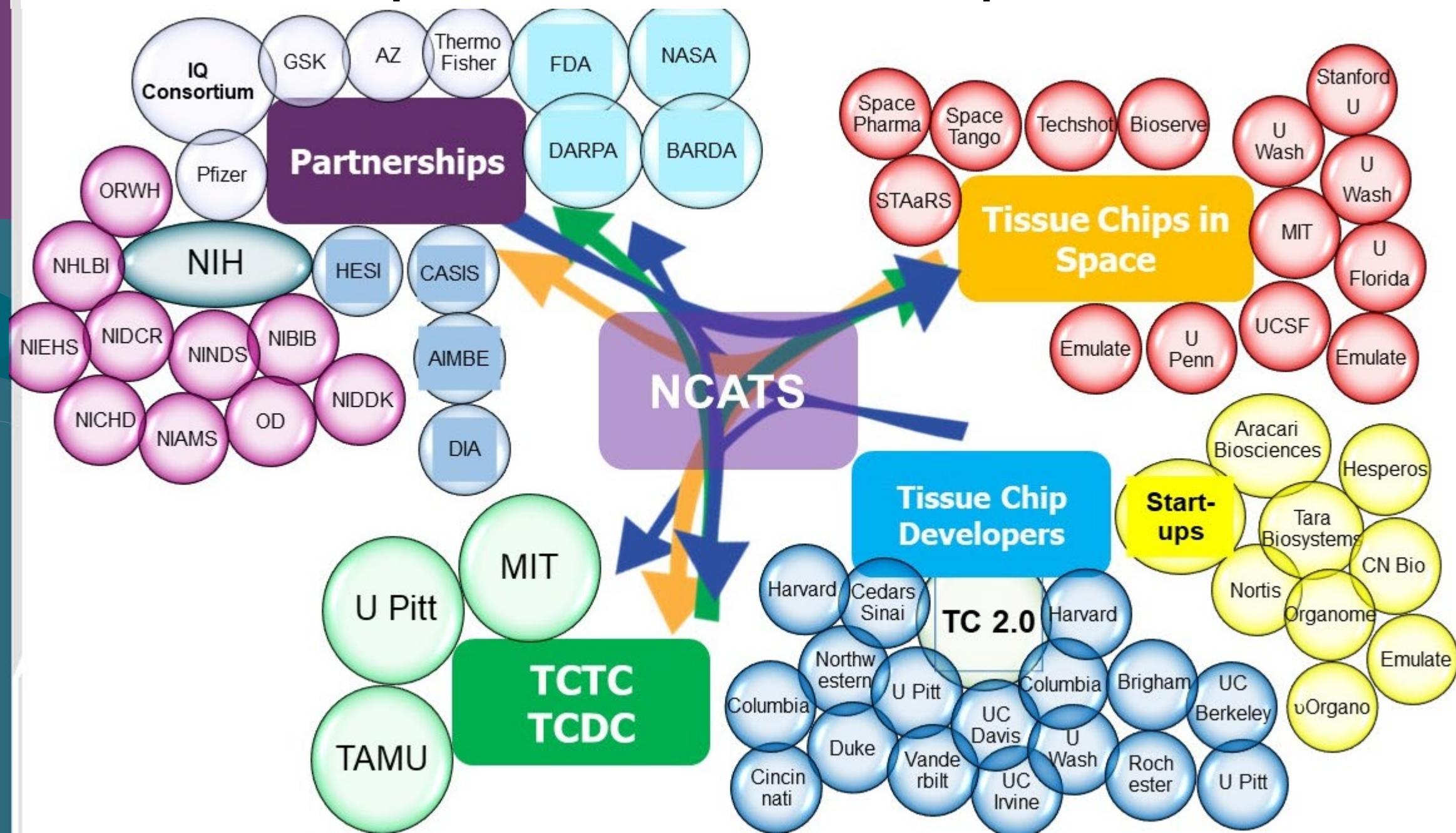
- Angela Christiano; Columbia University Health Sciences
Modeling complex disease using induced pluripotent stem cell-derived skin constructs

- **Kevin E. Healy; University of California, Berkeley**
Disease-specific integrated microphysiological human tissue models

- Michael L. Shuler; Cornell University
Microphysiological systems and low cost microfluidic platform with analytics



NIH Tissue Chips Consortium- Partnerships with Stakeholders



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Commercial Activities around Organ-on-chip Technologies

Body on-a-Chip

Hesperos®



Michael Shuler
James Hickman

Multi-Organ Chip
(2, 4 organs)
(5-10 organs)*

TISSUSE
Emulating Human Biology



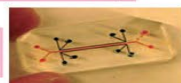
Uwe Marx

2-Organ-Chip (2-OC)
4-Organ-Chip (4-OC)
Human-on-a-Chip
(HoC)*

Tissue interface on-a-Chip



emulate



Donald Ingber

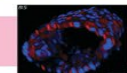
Lung on-a-Chip
Airway on-a-Chip
Gut on-a-Chip
Kidney on-a-Chip
Bone Marrow on-a-Chip

AlveoliX
In-vitro models inspired by nature



Olivier Guenat

Lung-on-a-chip array



Thomas Neumann

Kidney on-a-Chip
Vessel on-a-Chip

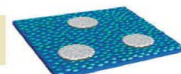


Axel Guenther

Artery on-a-Chip

Parenchymal tissue on-a-Chip

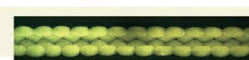
Hepregen



Sangeeta Bhatia

HepatoPac®
HepatoMune™

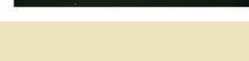
organovo™



Gabor Forgacs
Keith Murphy

ExVive3D™ Liver
ExVive3D™ Kidney*

Aspect
biosystems



Tamer Mohamed
Konrad Walus
Sam Wadsworth
Simon Beyer

Lab-on-a-Printer™
3DBioRing™ Airway

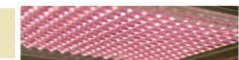
insphero



Jan Lichtenberg
Jens M. Kelm
Wolfgang Moritz

3D Insight™ Liver
3D Insight™ Islet
3D Insight™ Tumor

3D Biomatrix™
Three-Dimensional Cell Culture



Nicholas Kotov

PERFECTA3D®
HANGING DROP
PLATES

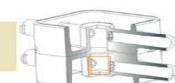
HµREL
CORPORATION



Greg Baxter
Robert Freedman

HµRELhuman™
HµRELflux™
HµRELTox™
HµRELflow™

KIYATEC®



Matthew R. Gevaert

3DKUBE™

VAXDESIGN

William L. Warren

MIMIC® Technology

cnBio
innovations



Linda G Griffith

LiverChip®
LiverChip® 36

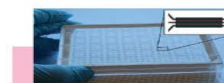
DRAPER



Joseph Charest

Microphysiological
Systems

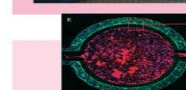
MIMETAS
the organ-on-a-chip company



Jos Joore
Paul Vulto
Thomas Hankemeier

OrganoPlates®

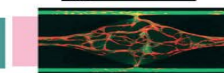
SYNVIVO



Kapil Pant
B. Prabhakar Pandian

SynTumor
SynBBB
SynRAM
SynTox

4DBio
4DESIGN BIOSCIENCES



G. Wesley Hatfield
Christopher Hughes
Steven George
Abraham Lee

Vascularized
micro-organ
(VMO) platform

AIM
BIOTECH
ADVANCED INTEGRATED MICROFLUIDICS



Roger Kamm

3D cell culture chips

TARA



Milica Radisic
Gordana Vunjak-Novakovic

Cardiac Biowire™ II
AngioChip*

µOrgano



Kevin Healy

µOrgano

EHT
Technologies



Thomas Eschenhagen

Engineered Heart
Tissue (EHT)

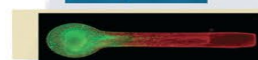
myriamed



Wolfram-Hubertus
Zimmermann

3D Cardiac Systems

AxoSim



Michael Moore

Nerve-on-a-Chip™

Xona
MICROFLUIDICS



Noo Li Jeon
Carl W. Cotman
Anne Taylor

Standard /
Triple Chamber
Neuron Device

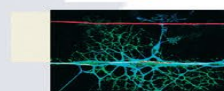
MicrBrain BT



Bernadette Bung

Neuronal Diode

Jananda™



Margaret Magdesian

Neuro Device



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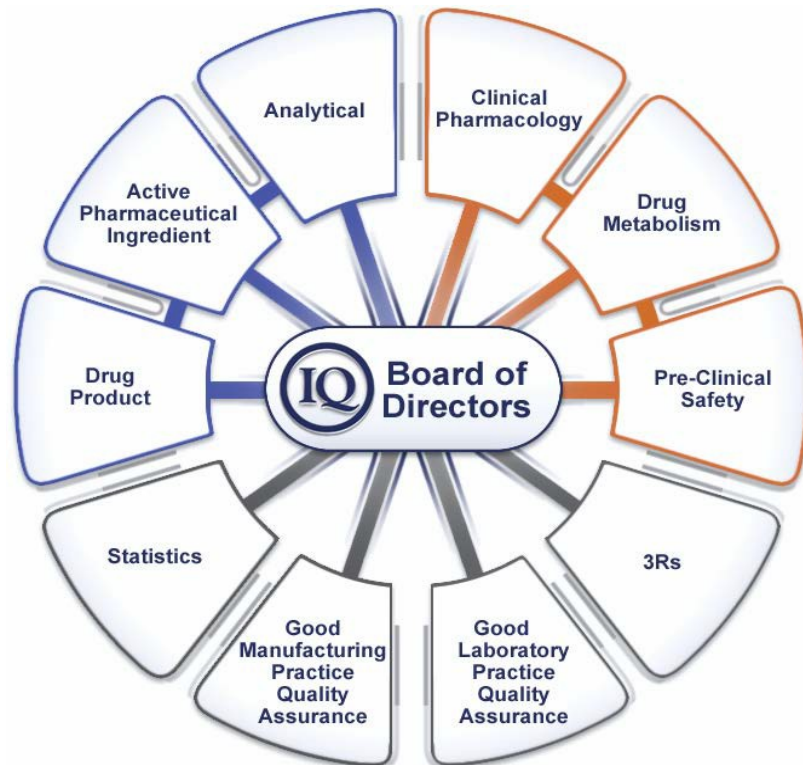
Working with Pharma:

IQ Microphysiological Systems Affiliate

Mission

To serve as a unified voice, advisory body and thought leader for both developers and stakeholder organizations in industry implementation and qualification of MPS models

AbbVie	BMS	GSK	Novartis	Theravance
Amgen	Celgene	Jansen	Pfizer	Vertex
Astellas	Eisai	Merck	Sanofi	
AstraZeneca	Eli Lilly	Merck KgA	Seattle Genetics	
Biogen	Genentech	Mitsubishi Tanabe	Takeda	



- Multi-disciplinary team of pharmaceutical scientists representing expertise and interests in drug metabolism and distribution, safety, and the 3Rs of animal use for research
- Ability to leverage existing legal framework and data sharing agreements between IQ member companies
- Provide a venue for cross-pharma collaboration and data sharing that facilitates expeditious uptake and impact of MPS
- Provide a focus of engagement with government (regulatory and non-regulatory) and academic stakeholders with interests and investment in MPS



Building Confidence: Tissue Chip Validation Framework

Comput Struct Biotechnol J.(2016) 14: 207–210.

3) Industrial

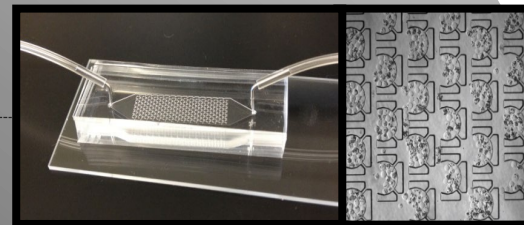
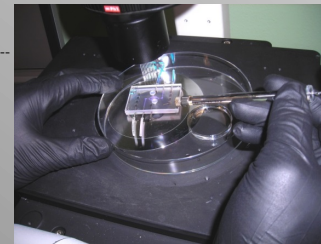
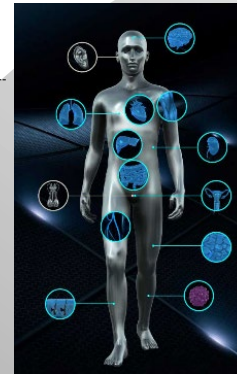
- Use by industry and regulatory agencies
- Proprietary set of compounds?
- **CRO-type environment**

2) Analytical

- Independent: testing for **robustness, reproducibility, reliability, relevance**
- Validation set of compounds, biomarkers, assays
- **TC Testing Centers**

1) Physiological

- Organ function and structure
- Training set of reference compounds
- **TC 1.0 developers**



Path to Adoption and Commercialization

- **Javelin Biotech**
 - Murat Cirit
- **Texas A&M Tissue Chip Testing Consortium**
 - Ivan Rusyn
- **MPS Database:** <https://mps.csb.pitt.edu/>
 - U Pittsburgh (Mark Schurdak)

- **Tissue Chip Testing Centers:**
 - MIT (Murat Cirit and Alan Grodzinsky)
 - TAMU (Ivan Rusyn)
- **MPS Database:** <https://mps.csb.pitt.edu/>
 - U Pittsburgh (Mark Schurdak)

Publications: (as of Oct 2017)

A total of 506 original and review articles (cited over 5600 times) published in top tier journals, including *Nature Medicine*, *Nature Communications*, *Nature Materials*, *PNAS*, *Science*, *Science Translational Medicine*, etc.



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Tissue Chip Testing Centers: Validating Microphysiological Systems

- Resource Centers (U24)
 - **GOAL:** Independent analytical validation of tissue chip platforms
 - Portability, reproducibility, sensitivity, specificity, dosing paradigm, cellular vs. organ toxicity, toxicity readouts, etc.
 - Reference set of validation compounds, assays, biomarkers with input from IQ consortium and FDA based on technical specifications of each platform from MPS developers
 - Partnerships among NCATS, FDA and IQ Consortium; adherence to OECD guidelines
 - NCATS support: **Initially awarded in 2016 for two years and renewed in 2018 for two more years**
 - **FDA and IQ Consortium** provide expert guidance on reference set of validation compounds, assays, biomarkers
 - **Testing Centers:**
 - MIT (Murat Cirit and Alan Grodzinsky)
 - TAMU (Ivan Rusyn)
 - **MPS Database:** <https://mps.csb.pitt.edu/>
 - U Pittsburgh (Mark Schurdak)
 - **Platforms tested during first two years:**
 - Kidney on chip
 - BBB on chip
 - Brain on chip
 - Bone/tumor on chip
 - Heart on chip
 - Gut on chip
 - Skeletal muscle on chip
 - Microvasculature on chip
 - White adipose tissue on chip
 - Liver on chip
 - Skin on chip
- Publications thus far:**
- Kidney on chip
 - **Nature Scientific Reports (2018) 8:14882**
 - **CPT Pharmacometrics Syst. Pharmacol. 2019, 8:316**
 - Brain on chip
 - **Front. Big Data 2019, doi: 10.3389/fdata.2019.00023.**



NextGen Testing Centers and Business Models for Self-Sustainability

MIT transitioned to **Javelin Biotech**

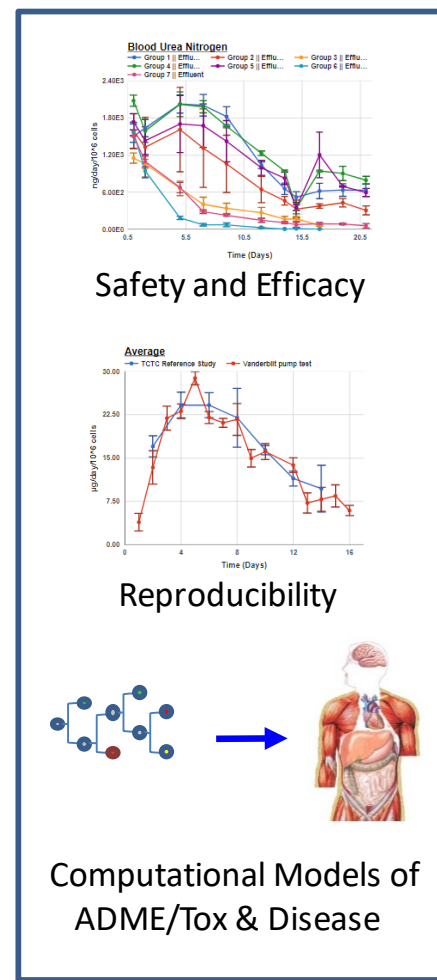
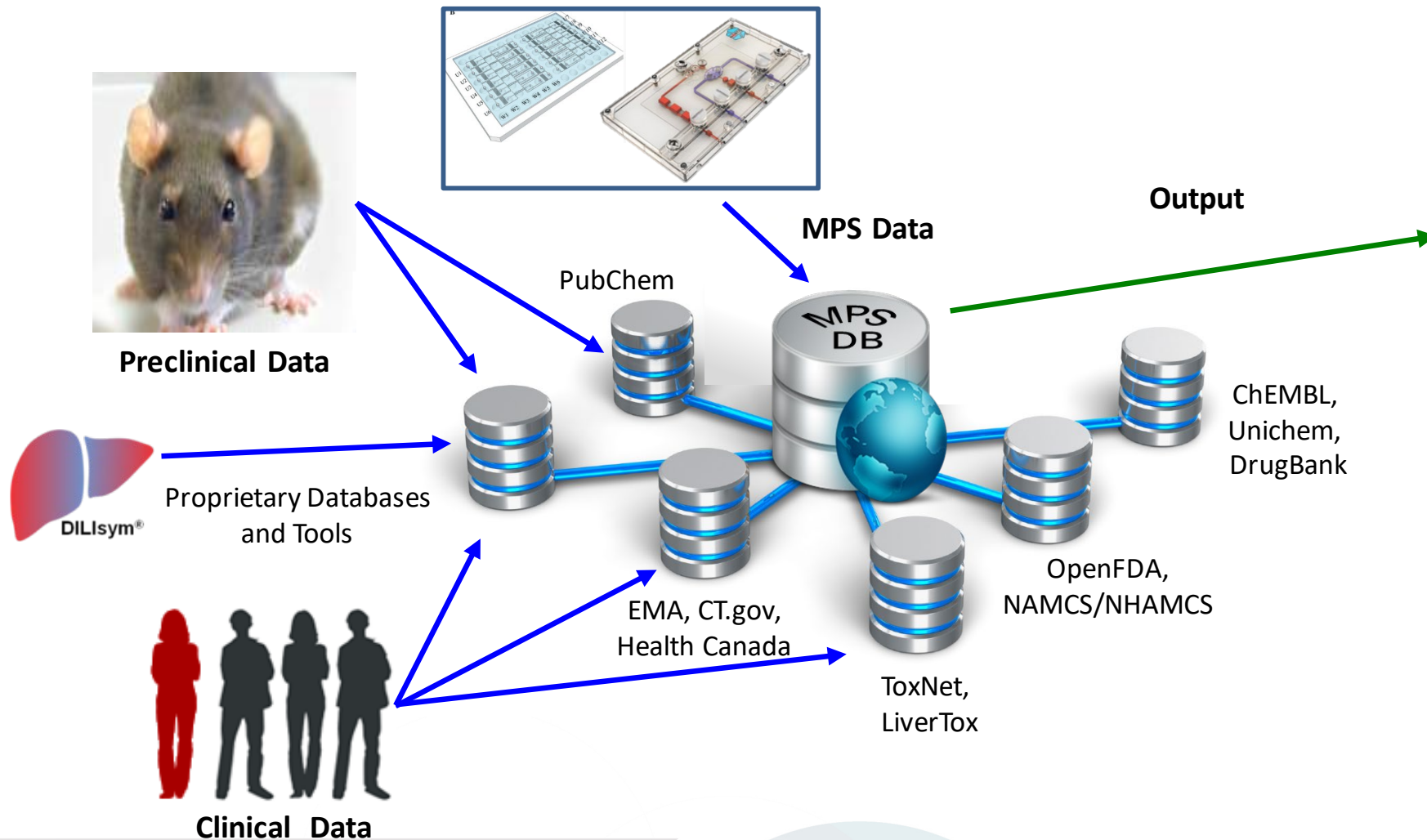
- CNBio Liver
- CNBio Liver-Tumor
- Nortis Kidney
- TissUse Bone marrow
- TissUse Pancreas-Liver
- Stemonix microBrain
- Stemonix microHeart
- Mimetas CNS
- Mimetas Liver

Texas A & M TC Testing Consortium

- Duke Arteriole blood vessel (Truskey)
- UC-Irvine Vascular malformations – Hereditary Hemorrhagic Telangiectasia, Port Wine disease and Sturge-Weber syndrome (Hughes)
- UC-Berkeley Vasculature with flow, Skeletal Muscle, Pancreatic islet (Healy)
- U-Pitt Vascularized Liver Acinus (Taylor)
- U-Pitt Osteochondrial unit and joint chip (Tuan)
- U-Washington iPSC-derived kidney organoids, vascularized kidney MPS (Himmelfarb)
- Columbia Cardiomyocyte, Liver, Integrated Heart-Liver-Skin-Bone-Tumor chip (Vunjak-Novakovic)
- U-Penn Airway and Bone Marrow (Huh)
- U-Rochester Salivary gland (Benoit)
- Harvard Stem cell-derived renal organoids (Bonventre)
- UC-Davis Atria on a chip (George)



The MPS DB Center is Key to Analyze and Model MPS Data Relative to Experimental Animal and Human Data



Mark Schurdak, Director of Operations and **Bert Gough**, Associate Professor
University of Pittsburgh Drug Discovery Institute



MPS DB Center Content and Tiered Review for Public Access

Current MPS-Db Content

MPS Experimental Models

- **58** models
- Covering **11** organs
- Developed at **14** Centers

Data

- **171** studies
- **133,675** data points
- **10,516** images
- **2,981** videos
- From **8** data providers

Data Release Progress	Studies	Data Points	Images	Videos
0. Data provider review	81	74,824	7,754	2,981
1. Tissue Chip Developer review	28	16,462	230	0
2. NCATS, FDA, IQ Consortium access	43	29,864	1,254	0
3. Public Access	19	12,525	1,278	0
Total	171	133,675	10,516	2,981

NIH Tissue Chips 2.0 for Disease Modeling and Efficacy Testing 2018 to 2022)

Kam Leong, Columbia U

Proteus Syndrome and DiGeorge Syndrome

Danielle Benoit, Lisa Delouise, Catherine Ovitt, U Rochester

Radiation-induced xerostomia

Kevin Kit Parker, William Pu, Harvard U

Barth syndrome, catecholaminergic polymorphic ventricular tachycardia, arrhythmogenic cardiomyopathy

Steven George, David Curiel, Stacey Rentschler, UC Davis and WashU

atrial fibrillation

Joseph Vincent Bonventre, Luke Lee, Brigham and Women's

autosomal dominant/recessive models of polycystic kidney disease, Focal segmental glomerulosclerosis

Christopher Hughes, UC Irvine

Hereditary hemorrhagic telangiectasia, Port Wine stain, Sturge-Weber syndrome

Rocky Tuan, U Pittsburgh

Osteoarthritis, inflammatory arthritis, adipose-mediated diabetic joint complications

Clive Svendsen, Cedars-Sinai

ALS; Parkinson's Disease

Aaron Bowman, Kevin Ess, John Wikswo, Vanderbilt U

tuberous sclerosis complex (TSC) epilepsy, DEPDC5-associated epilepsy, & associated cardiac dysfunction

Gordana Vunjak-Novakovic, Columbia U

Dox induced cardiomyopathy; multi-system pathologies involving heart, liver, skin, bone and vasculature

Donald Ingber, Harvard U

influenza infection, COPD

Jonathan Himmelfarb, U Washington

apolipoprotein L1 mediated kidney disease, drug induced and host-pathogen interaction induced renal thrombotic microangiopathies

Teresa Woodruff, Northwestern U

Polycystic Ovarian Syndrome

George Truskey, Duke U

rheumatoid arthritis, atherosclerosis

Type-2 Diabetes Mellitus

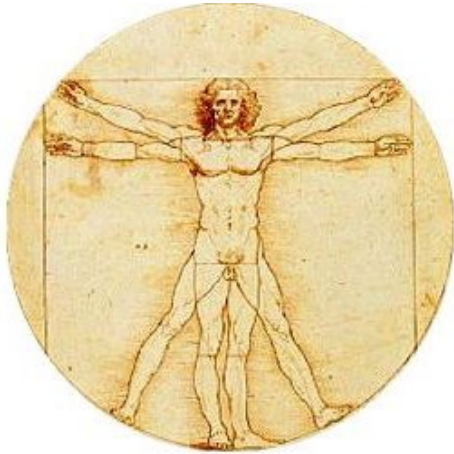
- Andreas Stahl, Kevin Healy, Matthias Hebrok, Edward Hsiao, Holger Willenbring, UC Berkeley - Pancreatic islet, liver, adipose
- Lansing Taylor, U Pittsburgh – Vascularized liver and pancreatic islets
- James Wells, Moo-Yeal Lee, Cincinnati Children's Hospital - Liver, pancreatic islet and intestine

NCATS, NHLBI, NIAMS, NIBIB, NICHD, NIDCR, NIDDK, NIEHS, NINDS, ORWH



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Physiological Changes under Prolonged Microgravity

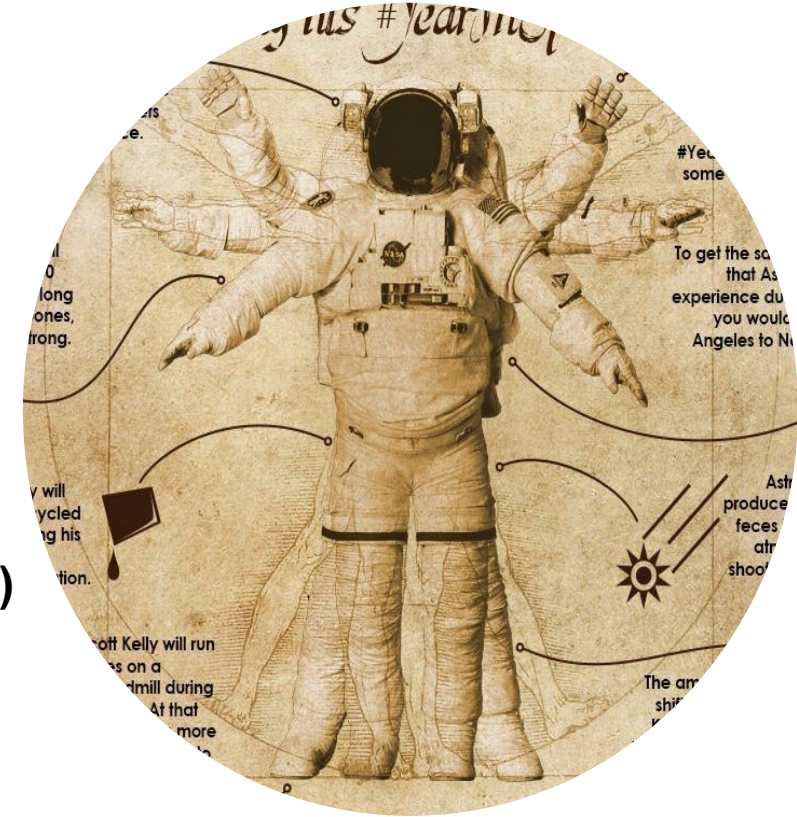


- **Early response (<3 weeks)**
 - Upper body fluid shift
 - Neurovestibular disturbances
 - Sleep disturbances
 - Bone demineralization
- **Intermediate (3 weeks to 6 months)**
 - Bone resorption
 - Muscle atrophy
 - Cardiovascular deconditioning
 - GI disturbances
 - Hematological changes



Long Duration (greater than 6 months)

- Muscle atrophy
- Cardiovascular deconditioning
- GI disturbances
- Hematological changes
- Declining immunity
- Renal stone formation
- **Reverts to normal on return to Earth**



Why send Tissue Chips to the ISS National Laboratory?

- The Chips in Space initiative seeks to better understand the role of microgravity on human health and disease and to **translate that understanding to improved human health on Earth**.
- Many of the changes in the human body caused by spaceflight **resemble the onset and progression of diseases associated with aging on Earth**, such as bone loss, muscle wasting, and immune dysfunction. But the space-related changes occur much faster. This means that scientists may be able to **use tissue chips in space to model changes that might take months, years or decades to happen on Earth**.
- The **automation and miniaturization** required for spaceflight has contributed to the commercialization opportunities of tissue chip technology, which advances validation and allows **broader adoption of the technology on Earth**.



NIH and ISS-NL Coordinated Program in Tissue Chip Systems Translational Research in Space



Immunosenescence



PI: Sonja Schrepfer

Post-traumatic osteoarthritis



PI: Al Grodzinsky

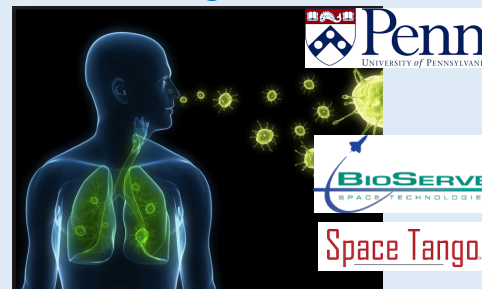
Drugs across blood-brain barrier

emulate



PI: Christopher Hinojosa

Lung infection

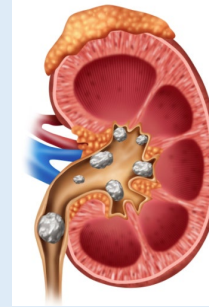


PI: Scott Worthen

Proteinuria and kidney stones formation

SCHOOL OF PHARMACY
UNIVERSITY of WASHINGTON

BioServe
SPACE TECHNOLOGIES



PI: Jonathan Himmelfarb



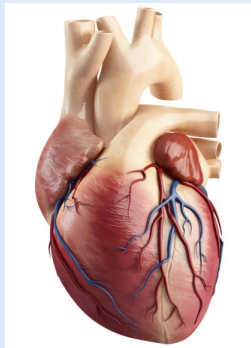
Cardiac dysfunction & engineered heart tissues

UNIVERSITY of
WASHINGTON

THE OHIO STATE
UNIVERSITY

BioServe
SPACE TECHNOLOGIES

PI: Deok-Ho Kim



Stanford
University

UCSB

BioServe
SPACE TECHNOLOGIES

PI: Joseph Wu

Muscle wasting (sarcopenia)



PI: Siobhan Malany

Gut inflammation

emulate

Space Tango



PI: Christopher Hinojosa

Improved biology: study human biology that otherwise would be difficult or take longer on earth



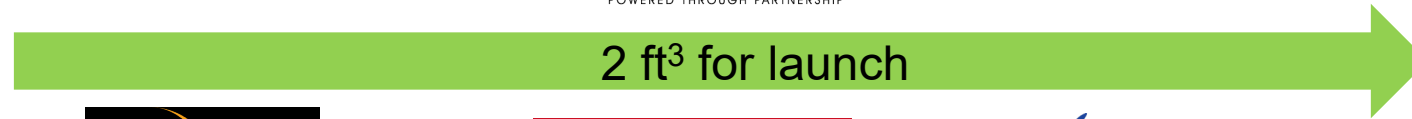
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for Advancing
Translational Sciences

NIH and ISS-NL Coordinated Program in Tissue Chip Systems Translational Research in Space

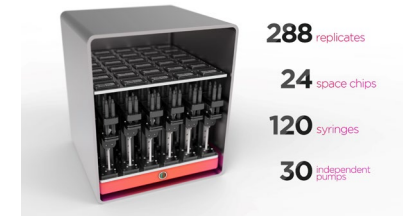
- **Technological improvements:** Organs on chip control systems are more complex than the chips – need for robust, automated, reduced footprint, turnkey (“astronaut/fighter pilot proof”); standardization, minimize variability



48 ft³n lab



1.6 ft³ for on orbit



288 replicates
24 space chips
120 syringes
30 independent pumps

Ground requirements for 24 Chips

- 72 samples preparations
- 8 syringe pumps
- 4 incubators (48 cubic feet)
- 216 small petri dishes for effluent
- 24 large petri dishes or 72 smaller for triplex chips
- 216 syringes for media and fixative
- ~216 feet of tubing

On-orbit operational requirements

- Support up to 10 days of automated perfusion
- 72 individual media or fixative channels and 72 effluent bags
- Downlink telemetry ISS to monitor operation while on orbit
- Payload development - Fit within **compact volumes**
 - **Stowage Locker – Launch:** (17.34”w x 20.32”L x 9.97”H) – 4 syringe pumps, one power module
 - **SABL – on orbit:** (11.1”w x 16.66”L x 7.75”H) – 2 syringe pumps, 2 SABLs

Improved Tissue Chip Technology: Automation and miniaturization of control systems

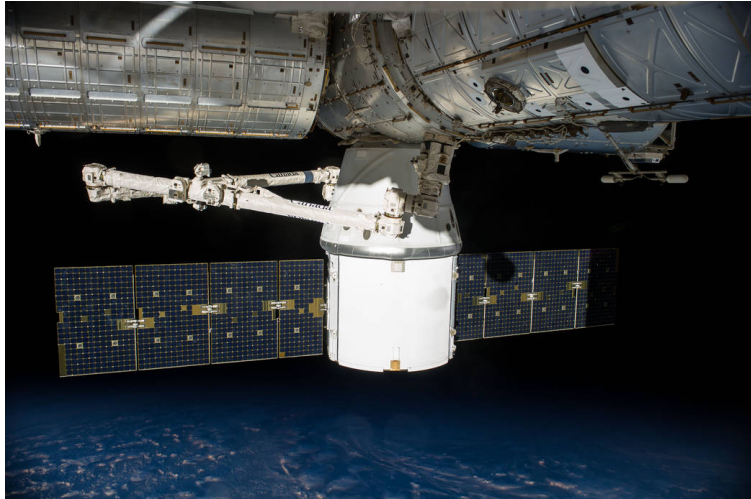


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- SpaceX CRS-16 Launch
 - Kennedy Space Center -
December 5, 2018
1:16 pm
 - Payload included
Immunosenescence on chip
project
- SpaceX CRS-17 Launch
 - Kennedy Space Center – May
4, 2019
2:48 am
 - Payload included tissue chip
projects:
 - Lung infection/bone
marrow
 - Proteinuria and kidney
stone formation
 - Osteoarthritis
 - BBB permeability



“NIH to rocket 3-D tissue chips into space to study diseases in microgravity”



- May 6, 2019 7:04 a.m. EDT, ISS crew members captured the Dragon spacecraft
- Berthed to the Harmony module on May 6, 2019 9:33 a.m. EDT
- Dragon capsule returned to Earth June 3, 2019 after approximately four-week stay at the ISS.

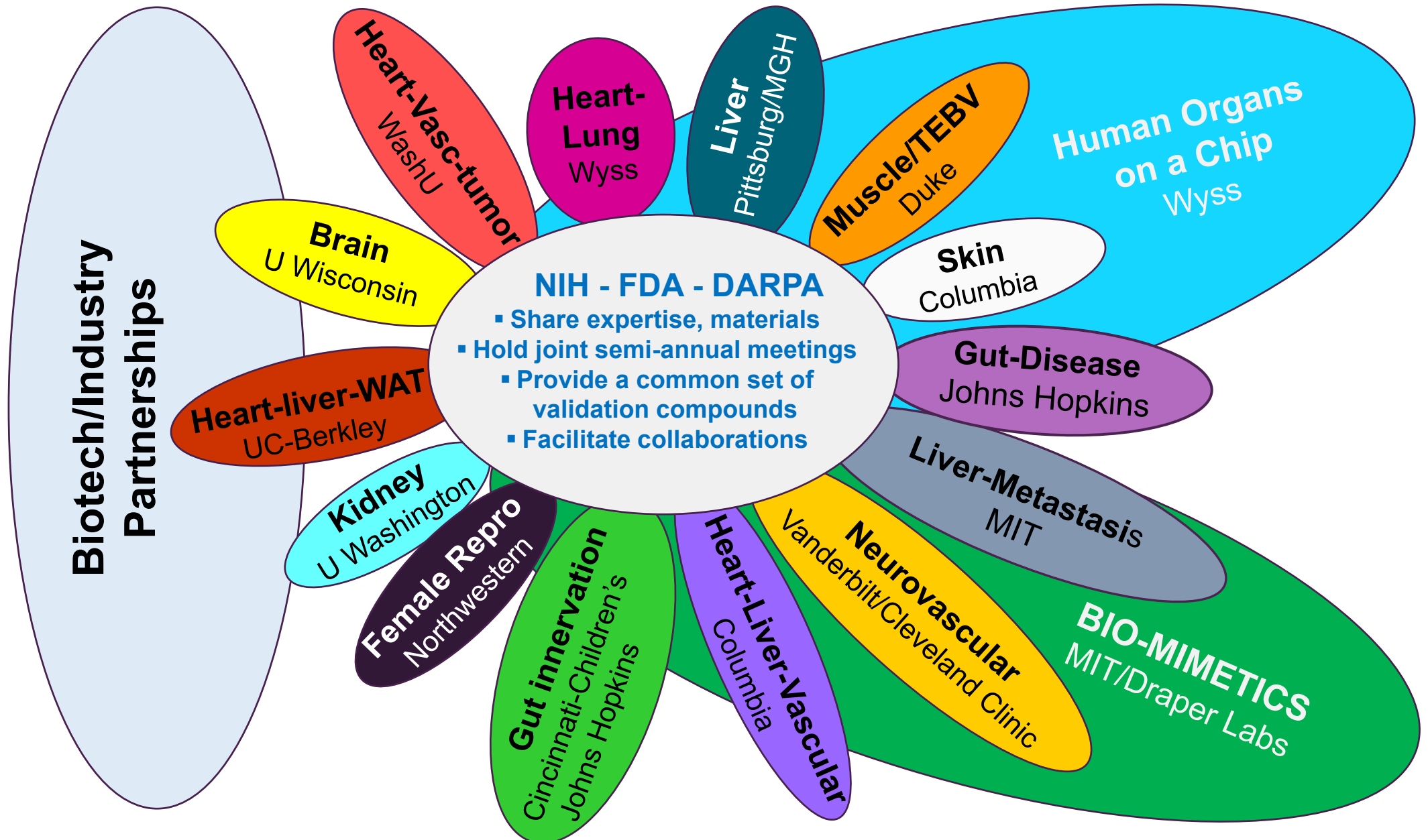


NASA astronaut Christina Koch works inside the Life Sciences Glovebox conducting tissue chips research

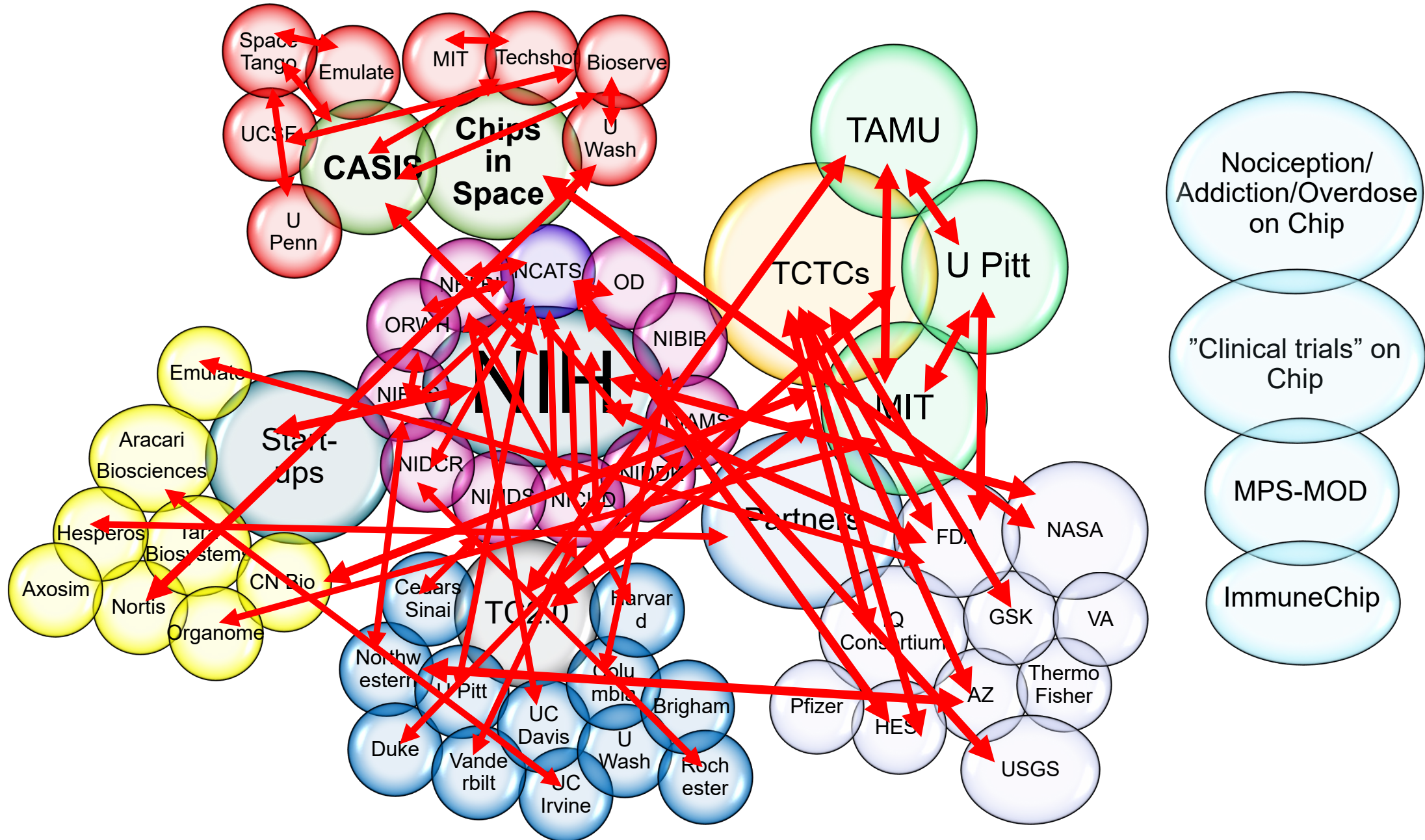
- Samples being analyzed
 - Biological – omics marker analysis (transcriptomics, metabolomics, epigenetic), histological, immunohistochemical
 - Technological – structural soundness of chips platform and instrumentation; experimental automation
- Testing of compounds on re-flight



Tissue Chip Consortium 2012-2017



Microphysiological Systems Consortium 2018 -



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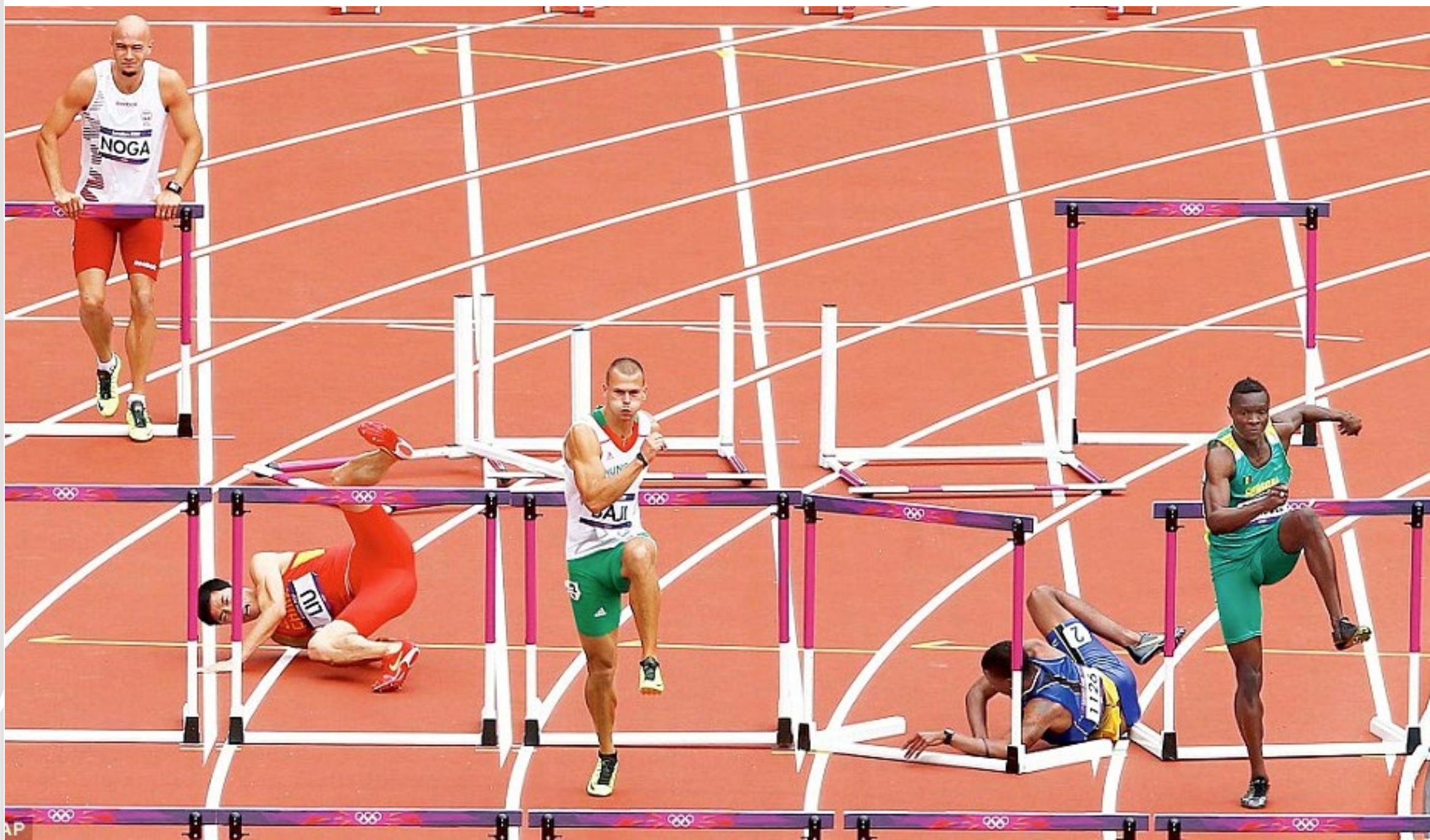
“Fundamental learnings from program evolution”

Brian Berridge

- Clearly identify gaps and opportunities
 - Create established supporting partnerships (e.g. government agencies)
 - Involvement of end-users from the start (e.g. FDA, pharma)
- Give researchers what they need to succeed
 - Establish a precompetitive environment
 - Supplemental funding
 - Consortium meetings for updates, group troubleshooting, and networking
 - Access to proprietary resources and/or information
 - Programmatic support and guidance
- Expect setbacks and failures
 - Build in procedures to avoid e.g. milestone-driven phased awards
 - Invite feedback to help guide progress



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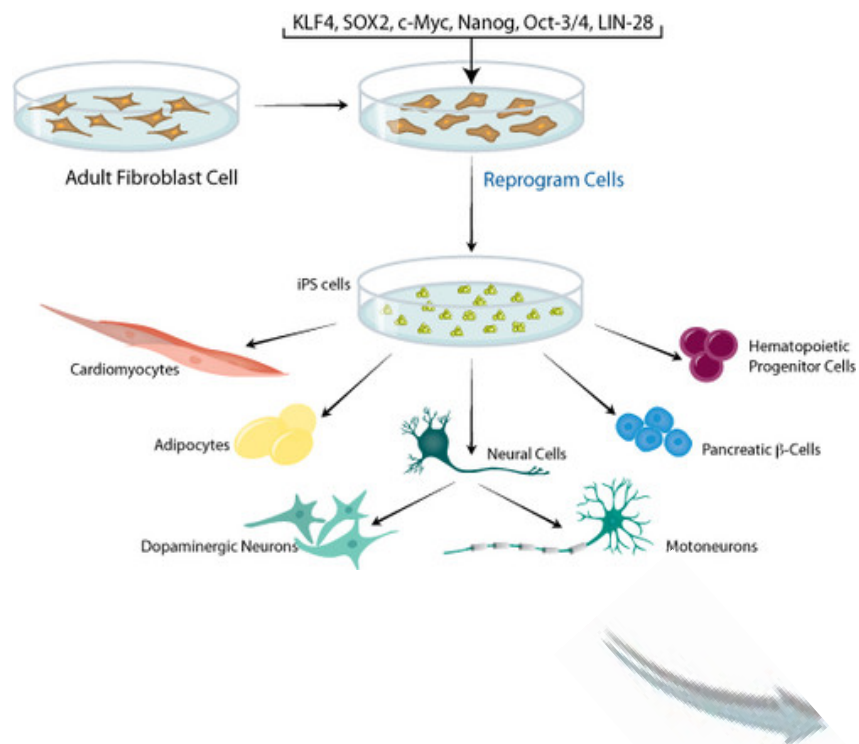


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Current NIH Initiatives for Tissue Chips



Human body on Chip

- Co-culture of many differentiated iPSC-derived cell types per tissue architecture and composition
- Integration of different tissue chips to form human body on chip
- Genome editing to introduce various polymorphisms on isogenic iPSC lines
- Developmental/pediatric response to drugs/toxins
- Rare diseases

- Clinical Trials-on-chips for Precision Medicine (You-on-chip) **RFA-TR-19-014** (October 9, 2019)
- BBB/interface on chip **RFA-HL-20-21** (December 2, 2019; October 19, 2020)



To be awarded:

- Nociception-on-chip **RFA-TR-19-003**
- Immune system-on chip **PAR-19-138**
- AD/HD on chip **RFA-NS-19-027**



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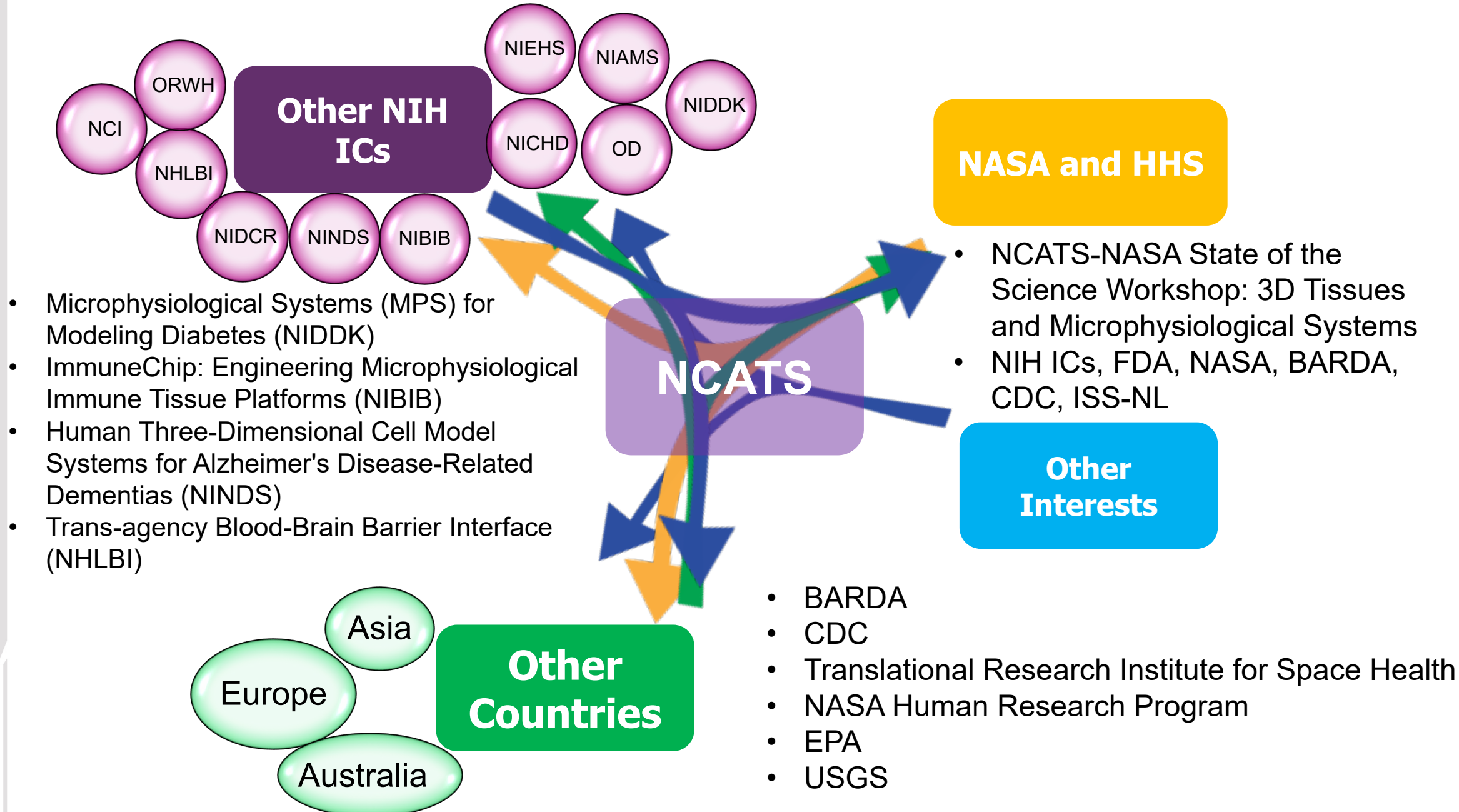
RFA-TR-19-014 "Clinical Trials" on a Chip: Tissue Chips to Inform Clinical Trial Design and Implementation in Precision Medicine

- **RFA Goal:** To demonstrate the utility of tissue chips in informing clinical trial framework and for precision medicine through trial design, establishing recruitment criteria and stratification of patient populations towards identifying the best responders to candidate therapeutics
- **Participating NIH ICs:** NCATS, NCI, NIAMS, NICHD, NIDCR, NINDS
- **Areas of interests:**
 - Use of tissue chip models that have the potential to substantially impact clinical trial design in terms of anticipated key outcomes (e.g., assessment of clinical benefit and risk, safety and tolerability profile, dosing regimen, population stratification to include the best responders, identification of surrogate clinical trial endpoints
 - Studies on mission-relevant diseases and disorders for the participating ICs
- **Application receipt date:** October 9, 2019



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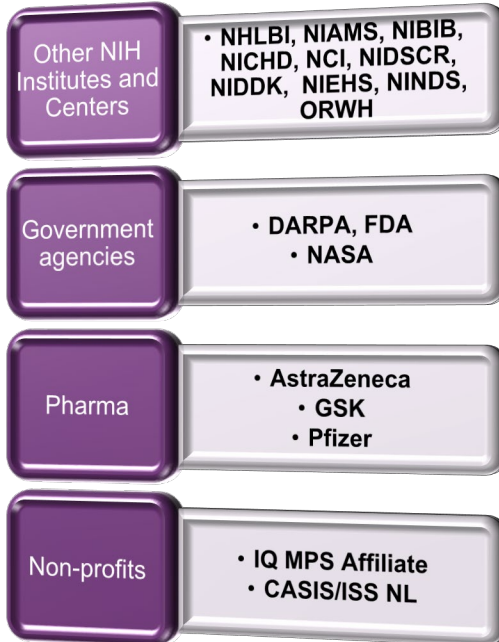
Growing Partnerships and Investments in MPS beyond NCATS



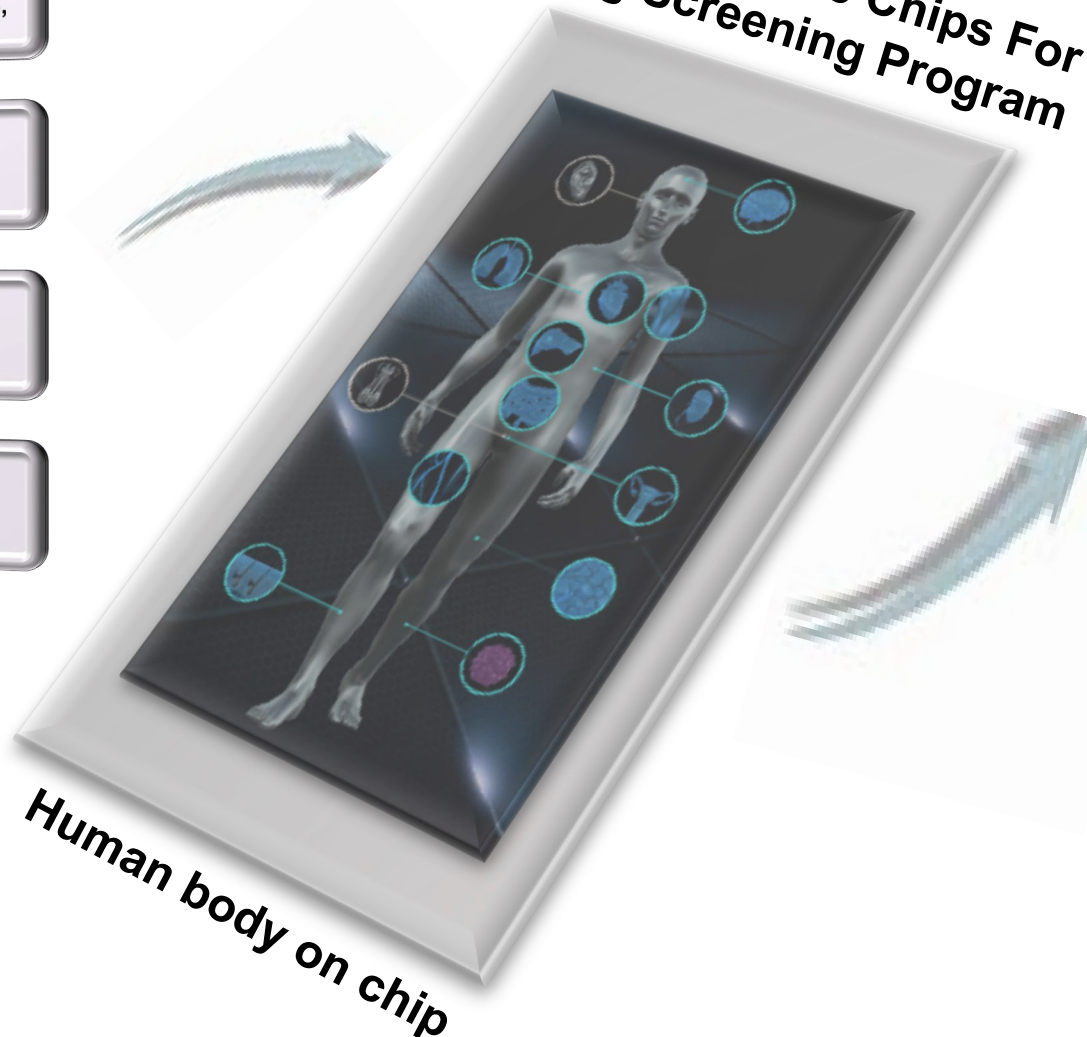
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Summary and Future Directions

Partnerships with NCATS



NCATS Tissue Chips For Drug Screening Program



Predictive toxicology



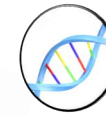
Disease models and efficacy studies



Microgravity and space radiation effects



Tools for clinical trials



Personalized chips and precision medicine



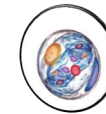
Microbiome



Environmental toxins and contaminants



Infectious agents



Countermeasures



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Tissue Chips Consortium Partners – Lead: Danilo A. Tagle

Program Manager: Lucie Low, Ph.D.

Trans-NIH Microphysiological Systems Working Group

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- Guillermo Arreaza-Rubin (NIDDK)
- David Balshaw (NIEHS)
- Steven Becker (NEI)
- Lisa Begg (OD)
- Bonnie Burgess-Beusse (NIDDK)
- Warren Casey (NIEHS)
- Preethi Chander (NIDCR)
- Ricardo Cibotti (NIAMS)
- Ki-Cha Flash (NCATS)
- Nancy Freeman (NIDCD)
- Daniel Gossett (NIDDK)
- Halonna Kelly (NIAID)
- Anthony Kirilusha (NIAMS)
- Lillian Kuo (NIAID)
- Timothy Lavaute (NINDS)
- Jennie Larkin (NIDDK)
- Sara Lin (NHLBI)
- Christine Livingston (NCATS)
- Lucie Low (NCATS)
- Nadya Lumelsky (NIDCR)
- Martha Lundberg (NHLBI)
- Su-Yau Mao (NIAMS)
- Elizabeth Maull (NIEHS)
- Glen Mcgugan (NIAID)
- Matthew McMahon (NHLBI)
- Leah Miller (OD)
- Melody Mills (NIAID)
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- Margaret Ochocinska (NHLBI)
- David Panchision (NIMH)
- Aaron Pawlyk (NIDDK)
- Mary Perry (OD)
- Leslie Reinlib (NIEHS)
- Dobрила Rudnicki (NCATS)
- Sheryl Sato (NIDDK)
- Seila Selimovic (NIBIB)
- Jose Serrano (NIDDK)
- Lillian Shum (NIDCR)
- Kentner Singleton (NIAID)
- Christine Sizemore (NIAID)
- Brian Sorg (NCI)
- Denise Stredrick (OD)
- Danilo Tagle (NCATS)
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- Dawn Walker (NCATS)
- Fei Wang (NIAMS)
- David Weinberg (NICHD)
- Vicky Whittemore (NINDS)
- Bradley Wise (NIA)
- Da-Yu Wu (NIDA)
- Nastaran Zahir (NCI)

FDA

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- Paul Brown, Ph.D., **CDER**
- Tracy Chen, Ph.D., DABT, **OC**
- Karen Davis-Bruno, Ph.D., **CDER**
- Suzanne Fitzpatrick, Ph.D., **CFSAN**
- Timothy McGovern, Ph.D., **CDER**
- Donna Mendrick, Ph.D., **NCTR**
- Thomas Papoian, Ph.D., DABT, **CDER**
- Alexandre Ribeiro, Ph.D., **CBER**
- James Weaver, Ph.D., **CDER**

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- Michael Roberts, Ph.D.
- Marc Giulianotti, Ph.D.
- Bill McLamb, Ph.D.
- Melissa Rhodes, Ph.D.

IQ MPS Affiliate

- IQ MPS Executive Committee (EC): IQ MPS Chair (**Will Proctor, Genentech**), Vice Chair (**Monica Otieno, Janssen**) and Vice Chair-Elect (**Terry van Vleet, AbbVie**); IQ-NCATS engagement workstream POC (**Jason Ekert GSK**)
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- Ananthsrinivas Chakilam, Ph.D., **Vertex**
- Yvonne Dragan, Ph.D., **Takeda**
- David Daignan, Ph.D., **AbbVie**
- Jeetendra Eswaraka, DVM, Ph.D., **Amgen**
- Jason Ekert, Ph.D., **GSK**
- Lorna Ewart, Ph.D., **AstraZeneca**
- Jinping Gan, Ph.D., **BMS**
- Peggy Guzzie-Peck, Ph.D., DABT, **J & J**
- Claire Jeong, Ph.D., **GSK**
- Douglas Keller, Ph.D., **Sanofi**
- Jonathan Phillips; Ph.D., **Boehringer Ingelheim**
- William Proctor, Ph.D., DABT, **Genentech**
- Terry Van Vleet, Ph.D., DABT, **AbbVie**
- Rahda Sura, Ph.D., **AbbVie**
- Matthew Wagoner, Ph.D., **Takeda**
- David Watson, Ph.D., **Eli Lilly**
- Yvonne Will, Ph.D., **Pfizer**



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NCATS Improving Health Through Smarter Science



- **Website:** <https://ncats.nih.gov/tissuechip>
- **Facebook:** facebook.com/ncats.nih.gov
- **Twitter:** twitter.com/ncats_nih_gov
- **YouTube:** youtube.com/user/ncatsmedia
- **E-Newsletter:** <https://ncats.nih.gov/enews>
- **Announce Listserv:** <https://bit.ly/1sdOI5w>

Thank you!

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