

## ASPR 2018 - New Directions and Opportunities Assistant Secretary for Preparedness and Response

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# 21<sup>st</sup> Century: An Increasingly Complex & Dangerous World





# **ASPR's Purpose: Unity of Command**

The Goldwater-Nichols Department of Defense Reorganization Act of 1986: An Interim Assessment Christopher A. Yuknis Note: This is not the actual book cover





## **ASPR's Mission**

**Save Lives** and Protect **Americans** from 21st **Century Health Security Threats** 



# ASPR Priorities for Building Readiness for 21st Century Threats





# **Past Ebola Virus Outbreaks Since 1976**



#### **Current Outbreak in DRC**

- 38 Confirmed, 15 Probable, 29 dead
- CFR = 55%
- Locations: Iboko, Bikoro, Mbandaka
- Five healthcare workers (2 dead)
- Last detected case on 2
   June
- Can be declared over after 42 days from last case
- Use of the rVSV-Ebola vaccine for ring vaccination for 1706 contacts, vaccine given to 3330 overall.



# Other biodefense in the news

Global Biodefense Market Growing Threat of Bioterrorism global biodefense market to grow at a CAGR of

5.41% during the period 2017-2021. http://www.sbwire.com/press-releases/

The Synthesis of Horsepox Virus and the Failure of Dual-Use Research Oversight

This mock, bioengineered pandemic killed 150 million people. Next time it might not be a drill



**ASPR** 

# **But New Advances As Well**

CBS/AP July 16, 2018, 5:34 PM

# FDA approves first drug to treat smallpox, in case of terror attack



Cancular of the drun TPOYY If was annound by the FDA in July 2019 as the first treatment for smallner a disease



# 21<sup>st</sup> Century: An Increasingly Complex & Dangerous World







Saving Lives. Protecting Americans.

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# **Medical Countermeasures Enterprise**





#### Acronyms

 

 PHEMCE: Public Health Emergency Medical Countermeasures Enterprise

 DHS: Department of Homeland Security

 DoD: Department of Defense

 USDA: U.S. Department of Agriculture

 VA: Department of Veterans Affairs

 HHS: Department of Health and Human Services

 ASPR: Assistant Secretary for Preparedness and Response

 BARDA: Biomedical Advanced Research & Development Authority

 CDC: Centers for Disease Control and Prevention

 FDA: Food and Drug Administration

 NIH: National Institutes of Health



#### Anthrax





#### **Smallpox**



# **ASPR / BARDA Has Had a Successful Decade**



Formed strong partnerships with over 190 industry partners



Supported 27 different projects under Project BioShield,14 products added to the Strategic National Stockpile, 7 FDA licensures

Significantly

expanded

domestic vaccine

production

capacity: 60 M

doses to 600 M

antigen doses for

influenza



Accelerated antibacterial product development to address critical vulnerabilities



# **BARDA Priorities**

- Sustainment of products developed under PBS and re-establishing the market guarantee provided under the original SRF
- CBRN ARD addressing gaps in preparedness; chemical agents, Sudan, Marburg, drug resistant pathogens
- CARB-X to address all threats, CBRN, PI, and public health
- Better, faster, flu vaccines
- Maintaining and expanding domestic manufacturing capacity for non-egg based influenza vaccines (seasonal and pre-pandemic)
- Launch DRIVe



# **FDA Approvals, Licensures, and Clearances**



ASPR



# **The BARDA Model**

BARDA develops and makes available medical countermeasures (MCMs) by forming unique public-private partnerships with industry partners



# **Our Industry Partners**





# **Our Government Partners**





# **Project BioShield**







#### **Project BioShield Successes Smallpox**

Anthrax **Antitoxins** 

**Anthrax Vaccines** 





ST-246 Antivira

#### **Burn Products – Nuclear, Radiation**





# **BARDA Pandemic Influenza Preparedness**



#### Early Detection --> Early Response --> Saving Lives



# Best, Faster Flu Vaccines Now: Strategy

- Expand domestic capacity of cell and recombinant vaccines;
- Enhance their effectiveness, with the addition of adjuvants and higher doses;
- Conduct clinical trials to expand their use in all ages; and,
- Modernize vaccine production for speed and flexibility.



# **New Therapeutics**

- Only one class of antivirals currently approved in the US
  - Significant public health risk if resistance develops
- Multiple BARDA funded clinical trials of new therapeutics ongoing
- Antiviral with novel mechanism of action recently approved in Japan
  - BARDA discussing how to support US licensure







# Addressing the Continuum of Care from Exposure to Recovery



## Novel antibiotics ensure that no patient is left behind



# **BARDA's Antibiotic AR&D Portfolio**

Sponsor	Antibacterial	Development Phase	Biodefense Profile	Commercial Indication
Medicines Company	Vabomere	Approved	Burkholderia	cUTI, CRE
Achaogen	Plazomicin	NDA Submitted	Plague, Tularemia, Anthrax	cUTI, CRE
CUBRC/Tetraphase	Eravacycline	NDA Submitted	Plague, Tularemia, Anthrax	cIAI, MDR bacteria
Basilea	Ceftobiprole	Phase 3	Plague, Tularemia	ABSSSI, SAB, CABP
Summit	Ridinilazole	Phase 3	Anthrax (adjunct)	C. diff
Pfizer	Aztreonam-Avibactam	Phase 3	Burkholderia, Plague	cIAI, HABP/VABP, cUTI, BSI
GlaxoSmithKline	Gepotidacin	Phase 3	Plague, Tularemia, Anthrax	CABP, GC, cUTI
GlaxoSmithKline	GSK680	Phase 1	TBD	TBD
Hoffman-La Roche	RG6080	Phase 3	Burkholderia	cUTI, cIAI, HABP/VABP
Achaogen	C-Scape	Phase 3	Plague, Tularemia	cUTI



## CARB-X Progress – 2 Years In

#### By the numbers:

- 28 projects targeting MDR bacteria
- \$76.3M invested to date
- 7 countries
- 8 new classes of antibiotics
- 11 new molecular targets
- 10 non traditional candidates
- 4 rapid diagnostics
- 1 vaccine
- 5 candidates advanced into clinic
- For every \$1 CARB-X invested, \$7.2 secured from private sector
- For every \$1 BARDA invested, \$11.9 secured from private sector
   As of April, 2018

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# BARDA Division of Research, Innovation, and Ventures (DRIVe)

## **DRIVe Mission: Transforming Health Security**

Accelerate the research, development, and availability of transformative countermeasures to protect Americans from natural and intentional health security threats.





DRIVe-Ready

CAPTURE

Set targets & research agenda Coordinate with "deep thinkers" across USG, academia, industry, and other stakeholders.

SOLUTION MAPPING Establish Integrated Solutions for Intelligent Acceleration

DRIVe-X

ACCELERATE Investors: BARDA, DoD

DRIVe-Launch

INITIAL SUSTAINMENT (1-18 Months) Investors: BARDA, MCIP



STRATEGIC SUSTAINMENT

Corporate Venture Capital Model Investment in Products

PHEMCE 2.0 Industry DoD



# **Response Framework**

Situational Awareness/Recognize Design Administration Produce How do we know something is How do we stop the spread of everyone who needs X On demand is provided X Opioids, Solving Sepsis happening, an agent has entered the disease? Drugs, vaccines, manufacturing of X PPE, social distancing? UniRx the community ENACT, Opioids PoD 57 101 Identification/Characterize Validate What is it, is it drug resistant, are certain Methods under design are evaluated, novel ways to get subpopulations more susceptible, will it clinical trials, non-clinical trials, product/information to those become an epidemic? ENACT, Opioids epidemiology, surveillance eRAT who need it. PoD



# DRIVe-Ready

### Capture

- Sets research agenda
- Coordinates across USG, academia, industry and other stakeholders

## **Solution Mapping**

 Accelerator network across the US has been awarded

## US Hubs of Innovation





# **DRIVe-X**

#### **Initial Emphasis:**

- Prevent illness from infectious exposures through early identification and action
- Save lives by solving sepsis





#### **Future Areas:**

- Create universal treatment options for broad classes of pathogens
- Ensure access to life-saving medical countermeasures for all Americans
- Transform the process by which medical countermeasures are developed (non-animal testing)



- Viral
- BacterialFungal

MEDBO





# **The General Problem**

Enormous healthcare impact to the US public and growing each year...

## Lives Lost

- Morbidity 1.5 Million people each year in US
- Mortality >250,000 people die each year
  - ~80,000 are discharged to hospice
- Management 1:3 patients who die in hospital have





## **Growing Cost**

Responsible for nearly \$24 billion annually (6.2% of hospital costs)

https://www.hcupus.ahrq.gov/reports/statbriefs/sb204-Most-Expensive-Hospital-Conditions.pdf (2016 report, 2013 data)



# **Solving Sepsis in Our Lifetime**

- **The problem:** The downstream effects of a Chemical, Biologic, Radiologic or Nuclear (CBRN) attack will create a major surge in sepsis cases overwhelming critical care centers and hospitals.
- **The solution:** Multi-disciplinary, comprehensive approach for a breakthrough in decreasing mortality and improving post-sepsis outcomes, including:



#### IT CAUSES A LOT OF DEATHS

#### **3rd Leading Cause of Death**

1. Heart disease 2. Cancer Sources: Elixhauser et al.; CDC.

Contributes to **1** in every **2 to 3** hospital deaths Source: Liu et al.



#### **IT CAN PROGRESS QUICKLY**



#### Septic shock:

7.6% drop in chance of survival each hour until antimicrobials are begun Source: Kumar et al.



# **Failure Points in Current Practices**





# DRIVe-Launch

- Model: Angel/Early Investor
  - Seed funding [3rd Party Entity]
  - Accelerator, Capture and Sprint
- Investment Horizon: 18 months to Next Phase

#### SEC. 3084. MEDICAL COUNTERMEASURES INNOVATION.

Section 319L(c)(4) of the Public Health Service Act (42 U.S.C. 247d–7e(c)(4)) is amended by adding at the end the following: "(E) MEDICAL COUNTERMEASURES INNOVATION PARTNER.—

H.R.34-110

the development of qualified countermeasures and qualified pandemic or epidemic products, including through the use of strategic venture capital practices and methods;

## MCIP

Medical Countermeasure Innovation Partnership



- **Model:** Product specific investments leveraging corporate venture practices
- Investment Horizon: Evolve to Evergreen
  - Re-prioritize and sustain investments across the BARDA portfolio in performance-based fashion;
  - Cull what does not make the cut and re-invest

#### What the future holds...







#### DRIVe-X

# Pharmacy on Demand (PoD)

- **The Problem:** Access to medicines requires visits to health care professionals, stocks of drugs in pharmacies, and delays in receiving therapies especially in events where healthcare infrastructure is limited or under peak demand (e.g., influenza outbreaks).
- **The Solution:** Medicines are available in areas frequented by all and/or can be shipped rapidly through emerging technologies. On demand production and supply.



Patient engagement via telehealth



Meds delivered to home



Booth that dispenses meds via smartphone eScript



## **CURRENT INVESTMENT MODELS IN INFECTIOUS DISEASES**





## **Example of the Interactome**

### Functional Human Host Domains Targeted by Diverse Viruses –





# Examples - Broad Spectrum Approaches (host-based and pathogen-based)

- Apoptosis Induction Domains
  - Rider et al 2011 Double Stranded RNA Activated Caspase Oligomerizer (NIAID funded)
- Innate Defense Regulator Peptides
  - Soligenix Dusquetide (anti-inflammatory)
- Sirtuins Host cell metabolic regulators
  - Forge Life Sciences
- Histidine Kinase Targets (fungal)
  - UW-Madison WARF
- Inflammasome Inhibitors
  - Olatec
- AR-12 antiviral, antifungal



# **2018 Priorities**







# **Find Us Online**

PHE.gov: <u>www.phe.gov</u> <u>www.Drive.hhs.gov</u>	f	Facebook: <u>www.facebook.com/phegov</u>
PHE.gov Newsroom: www.phe.gov/newsroom	YouTube	YouTube: <u>www.youtube.com/phegov</u>
Flickr: <u>www.flickr.com/phegov</u>		Twitter: <u>www.twitter.com/phegov</u>

