

# Uncertainty quantification

**EMA workshop on qualification and reporting of physiologically-based pharmacokinetic (PBPK) modelling and simulation**

**Session III**

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# Uncertainty quantification

How do the various sources of uncertainty feed into uncertainty in the model prediction for the outcome(s) of interest?

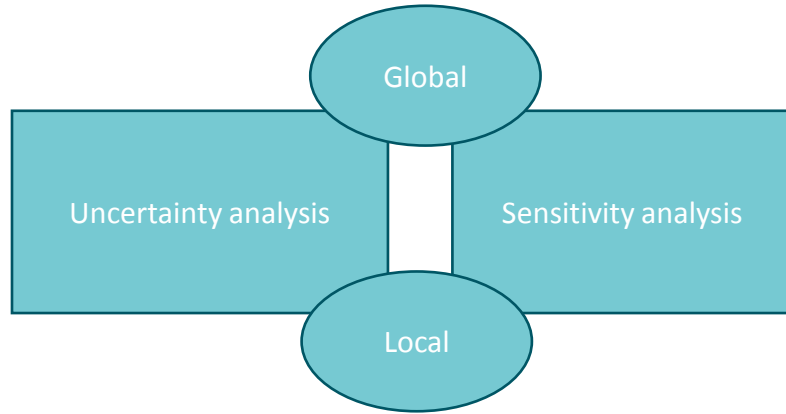
## Alleatory

- variability, stochastic uncertainty or irreducible uncertainty
- the physical variability present in the system being analysed or its environment
- normally characterized using probabilistic approaches

## Epistemic

- reducible uncertainty
- potential deficiency due to lack of knowledge, can arise from inputs, assumptions, approximations etc
- not necessarily well characterized by probabilistic approaches

# Aims and approaches



## When to perform?

- Based on suspicion – ie lack of fit?
- Depending on the purpose of use and the regulatory impact?
- As standard?

- Explore the model properties
- Explore the appropriateness of the model
- How much do the outcome(s) of interest depend on a specific parameter or submodel?
- How much do the outcome(s) of interest vary according to uncertainty in the parameters, assumptions or other model aspects?

# Uncertainty analysis

Scenario analysis to identify sources of uncertainty

The need depends on the purpose of use and the regulatory impact

- relevant for consideration
  - parameters
  - assumptions
  - model structures; ie processes and associated mathematical choices
  - computational methods, approximations
- define the perceived boundaries
  - of parameters
  - or alternative setups (processes/mathematical and computational choices)

# Case example I - drug model

**Ibrutinib** is an anticancer drug, CYP3A4 substrate (minimal 2D6)

**Model:** PBPK

**Purpose of use:** information in SmPC on CYP3A strong, medium and mild inhibition

**Regulatory impact:** high

**Qualification:** within procedure

**UQ:** regulatory request for local sensitivity analysis based on fitting characteristics for absorption phase

- absorption parameters
- $f_{u,gut}$

Sensitivity Analysis on the Effect of Ibrutinib  $f_{u,gut}$  on Simulated AUC and  $C_{max}$  of Oral Single Dose of 120 mg Ibrutinib in Healthy Subjects under Fasted Conditions

$F_{u,gut}$	$C_{max}$ (ng/ml)	AUC (ng.h/ml)	$F_g$
0.07	26.9	87.1	0.55
0.09	24.0	78.4	0.50
0.11	21.7	71.4	0.47
0.13	19.8	66.7	0.41
0.15	18.3	60.9	0.38
0.17	17.0	56.8	0.35

Sensitivity Analysis on the Effect of Ibrutinib  $f_{u,gut}$  on Simulated  $C_{max}$  Ratio and AUC<sub>ratio</sub> of Ketoconazole-ibrutinib Drug-drug Interaction

$F_{u,gut}$	$C_{max}$ ratio (Substrate)	AUC ratio (Substrate)
0.07	14.9	22.5
0.09	17.1	25.1
0.11	19.0	27.7
0.13	21.0	30.4
0.15	22.9	33.0
0.17	24.2	35.8

# Case example I - drug model

**Ibrutinib** is an anticancer drug,  
CYP3A4 substrate (minimal 2D6)

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**UQ:** regulatory request for local  
sensitivity analysis based on fitting  
characteristics for absorption phase

- absorption parameters
- fugut

**Table.** The effect of reducing the rate of absorption on ibrutinib FG and on the AUC and Cmax ratios obtained upon co-administration with ketoconazole.

	<u>F<sub>G</sub></u>	<u>AUC ratio<sup>a</sup></u>	<u>Cmax ratio<sup>a</sup></u>
Observed data	NA	24	29
Original model	0.47	28	19
Scenario 1 <sup>b</sup>	0.49	25	19
Scenario 2 <sup>c</sup>	0.55	22	17

NA, not applicable; <sup>a</sup>geometric mean ratios; <sup>b</sup>absorption simulated to start in proximal jejunum; <sup>c</sup>absorption simulated to start in ileum.

# Case example II – drug model

**X** is an anticancer drug, CYP3A4 substrate

**Model:** PBPK

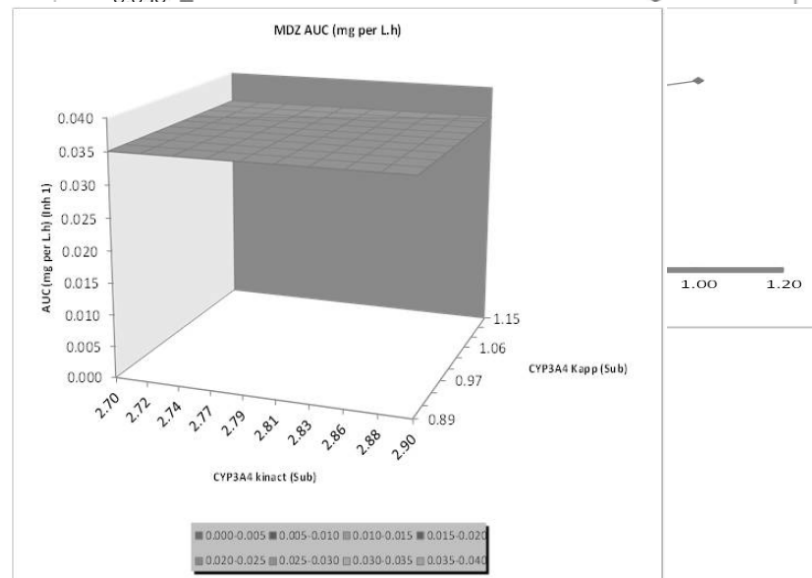
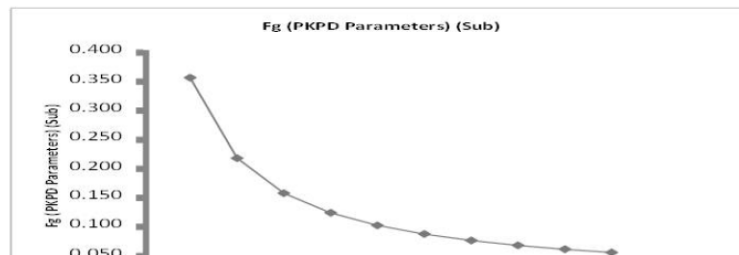
**Purpose of use:** inform DDI assessment of TDI and mixed inhibition/induction

**Regulatory impact:** low to moderate

**Qualification:** within procedure (not considered qualified)

**UQ:** AUC

- uncertainty analysis
  - rationale not described
- local sensitivity analysis
  - fa, fugut, Qgut on AUC ratio
  - TDI parameters (KI and kinact) and induction parameter EC50 on AUC ratio





# Case example III - system model

**X** is ..., Y substrate

**Model:** PBPK

**Purpose of use:** inform paediatric dose selection

**Regulatory impact:** moderate to high

**Qualification:** within procedure

**UQ:** for the outcome(s) of interest

- uncertainty analysis
- global sensitivity analysis

## Wish list for the uncertainty analysis

- sensitive parameters
- fraction metabolized
- maturation functions
- virtual patient population parameters
- other relevant assumptions
- ...

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