

***MATRICS Mandate:
Treatment Development for Cognition in
Schizophrenia***

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NIMH: Mission

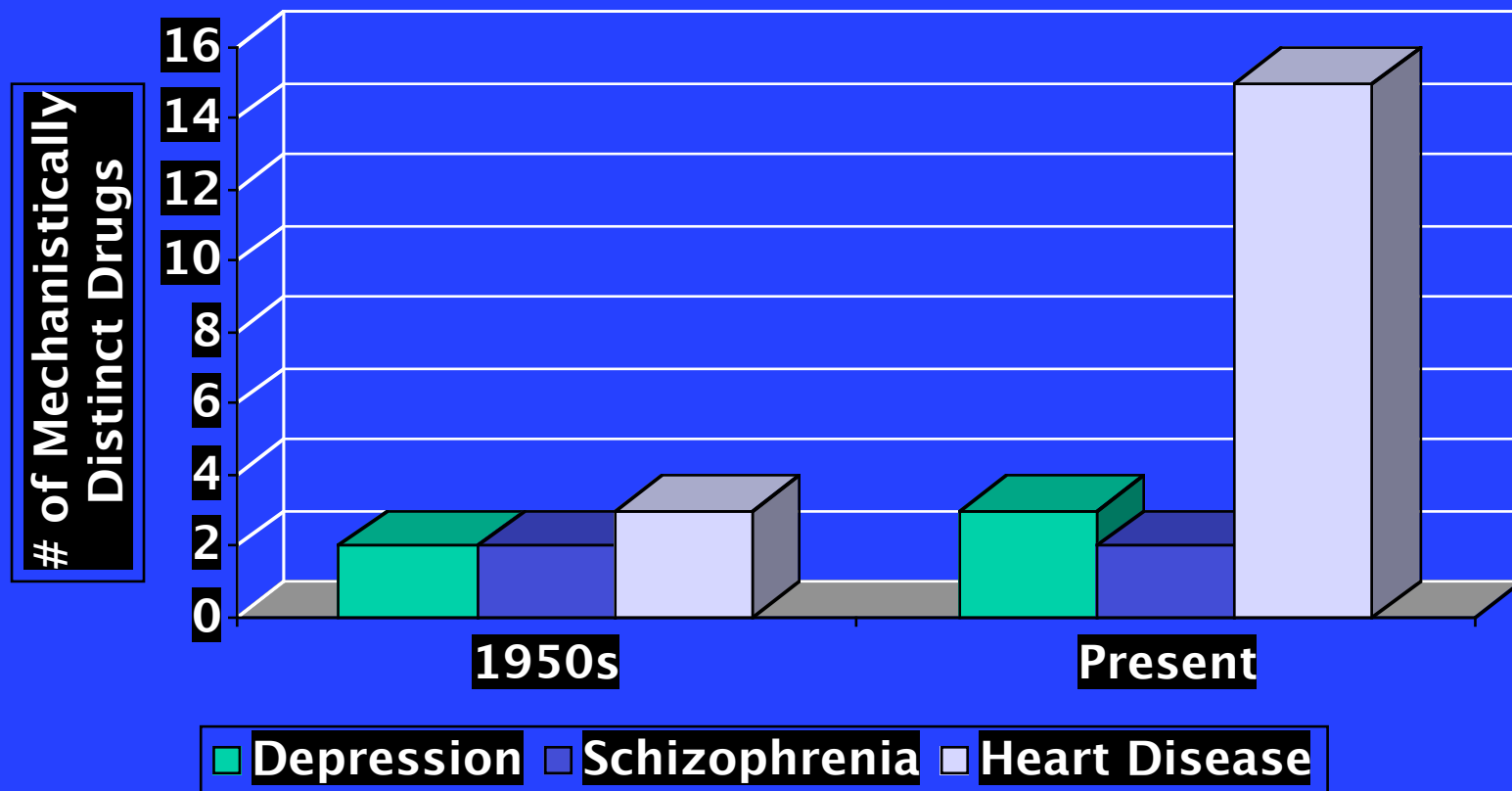
- To reduce the burden of mental illness through research on mind, brain, and behavior.
- Priorities:
 - Scientific Opportunity
 - Public Health Importance
- **Schizophrenia:** Public Health Imperative.

Schizophrenia

Therapeutics: Why Are We Stuck?

- **Static Molecular Targets: monoamine receptors.**
- **Static Clinical targets: Positive Symptoms.**

Mechanistically Distinct Drugs

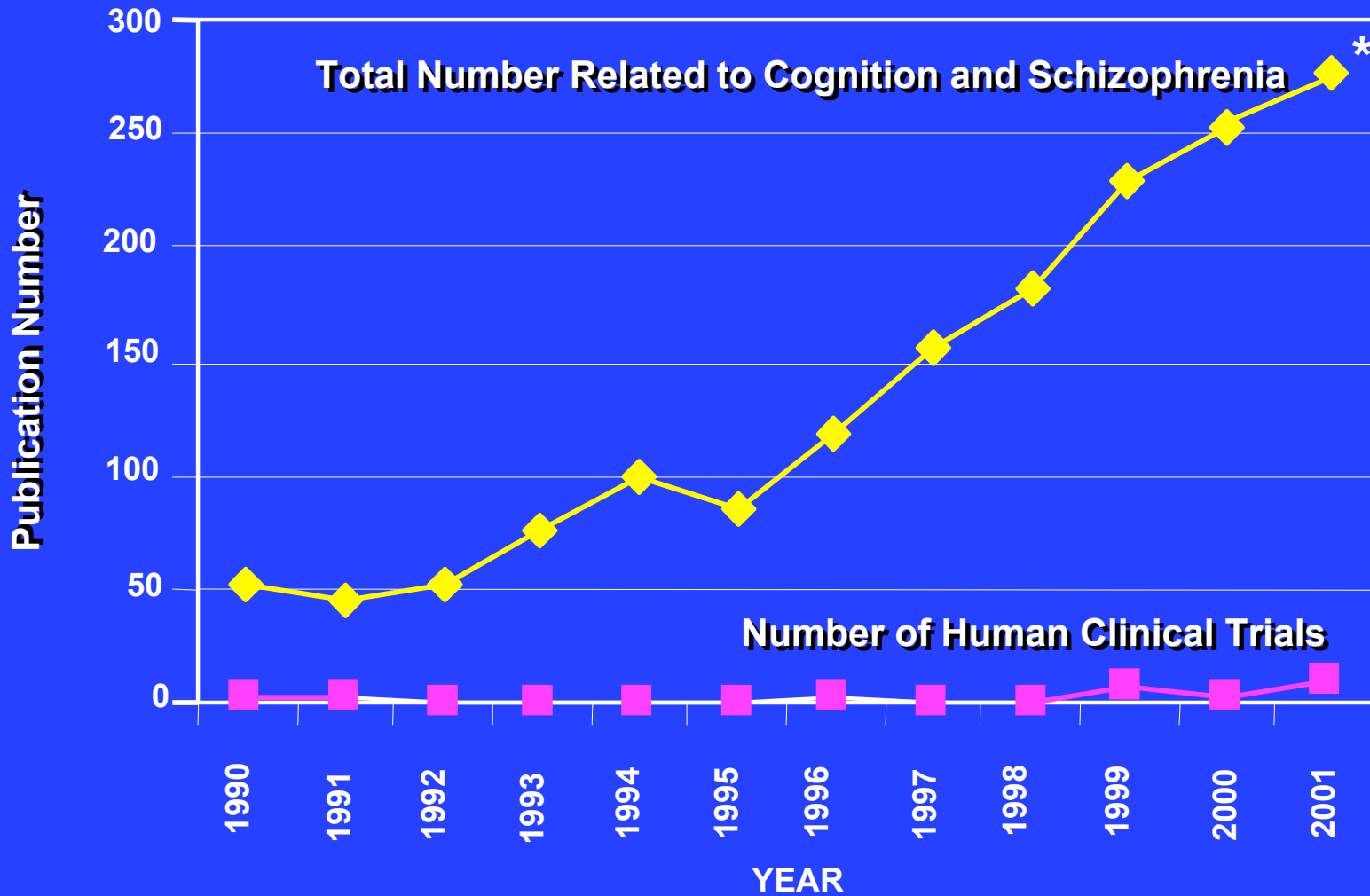


Schizophrenia: Cognition, not Positive Symptoms Predicts Long-term Disability

Clinical Dimension	Correlation with Functional Outcome
Delusions	- 0.08
Hallucinations	- 0.09
Thought Disorder	- 0.22 *
Cognitive Impairment (Immediate verbal memory)	- 0.40 **

Cognition in Schizophrenia: Scientific Opportunity

- Glutamatergic modulators (d-serine, cycloserine, glycine)
- Dopamine D1 receptor agonists
- Serotonin 5-HT_{2A} Receptor Antagonists
- λ alpha-2 Noradrenergic agonists
- λ Cholinesterase inhibitors
- λ Muscarinic agonists
- λ Nicotinic agonists



Total Publication Number in 2001 Based upon 9 Months of Data

Targeting Cognition in Schizophrenia: Why the Bottleneck?

- Lack of consensus regarding cognitive targets.
- No widely accepted endpoint.
- Ambiguity regarding optimal clinical trial design.
- Unclear path to FDA approval and labeling.
- Barriers to compound acquisition for testing.

Clinical Psychopathology: FDA Processes Focus Industry Efforts

- FDA registration often targets DSM disorders
- “No fundamental objection to syndrome-based clinical targets (fever, pain, agitation)”
- **“We will not accept a new clinical endpoint for the convenience of any drug company”**
- NIMH can use its convening authority as independent scientific entity to define new and valid clinical endpoints.

Cognition in Schizophrenia: NIMH Initiatives

- **MATRICES**: Measurement and Treatment Research to Improve Cognition in Schizophrenia
- **PASS**: Psychometric and Standardization Study
- **TURN**S: Treatment Units for Research on Neurocognition and Schizophrenia

MATRICS: Measurement and Treatment Research to Improve Cognition in Schizophrenia

Steve Marder, M.D., Co-P.I.

Michael Green, Ph.D., Co-P.I.

www.matrics.ucla.edu

MATRICES RFP-0006: Deliverables

- **Consensus- Oriented Conferences & Papers to address obstacles to discovery.**
- **Validate & Publish “Standard” Cognition Battery.**
- **Database of potential lead compounds.**
- **Guidelines for clinical trial design.**

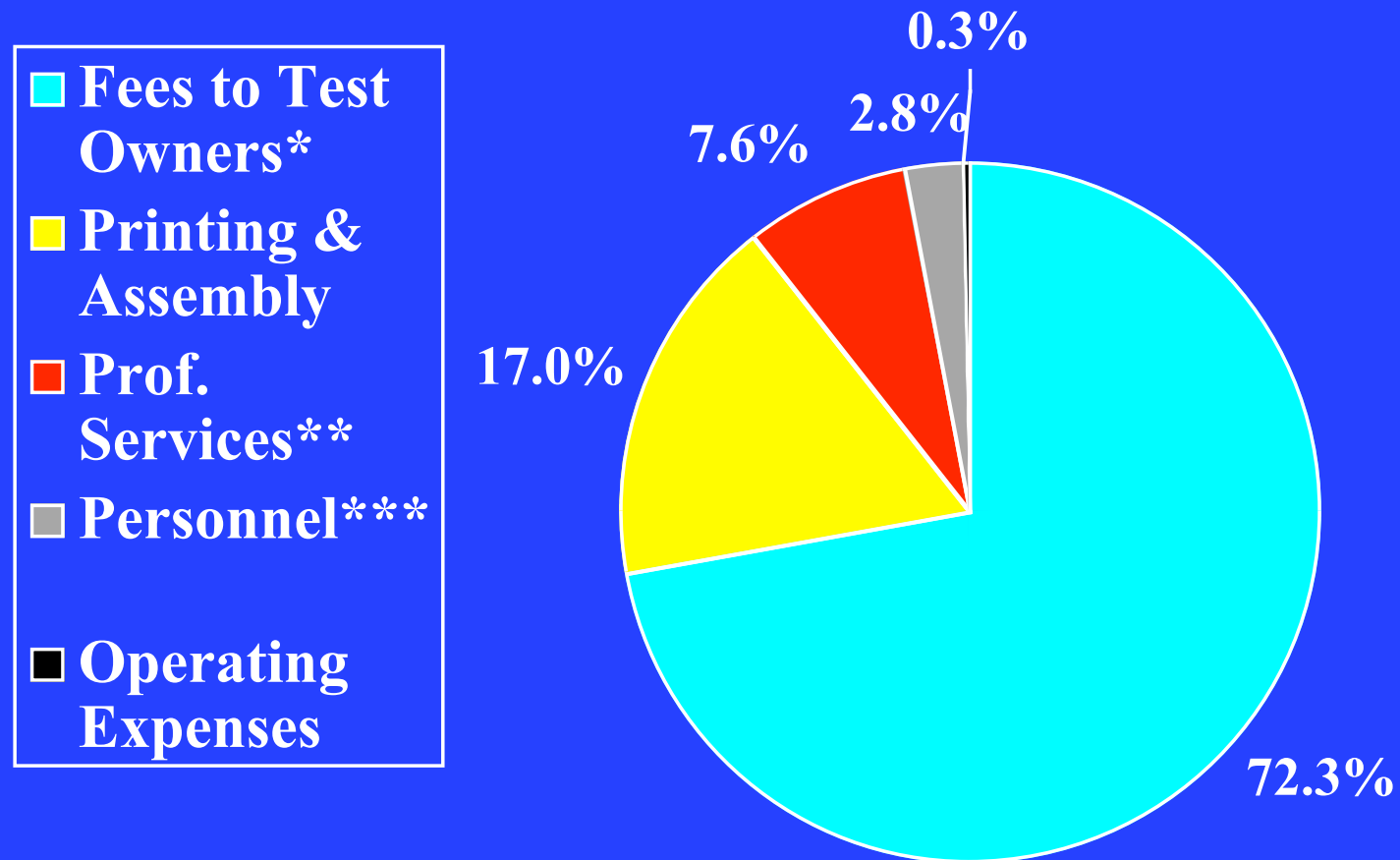
MATRICS Consensus Cognitive Battery (MCCB)

- **Ten Tests – Seven Cognitive Domains.**
- **Evidence-based Consensus Approach.**
- **Evaluated in PASS Study.**
- **Reviewed and Approved By National Mental Health Advisory Council (NMHAC) May, 2005.**
- **Executive Summary Including Guidance for Trial Design Submitted by NIMH Director to FDA June, 2005.**

MATRICS Consensus Cognitive Battery (MCCB)

- Five tests owned by large publishing companies.
 - The Psychological Corporation
 - Multi-Health systems
 - Psychological Assessment Resources, Inc.
- Creation of non-profit required.
- **MATRICS, INC**

Distribution of Costs for Battery for MATRICS Assessment, Inc.



*Purchases, licenses, royalties

**Business insurance, accountant, auditor

***Office manager, financial officer

FY:2004:
Trials Network for Cognition
RFP No. NIMH-03-DM-0003

**Treatment Units for Research on
Neurocognition and Schizophrenia
(TURNS)**

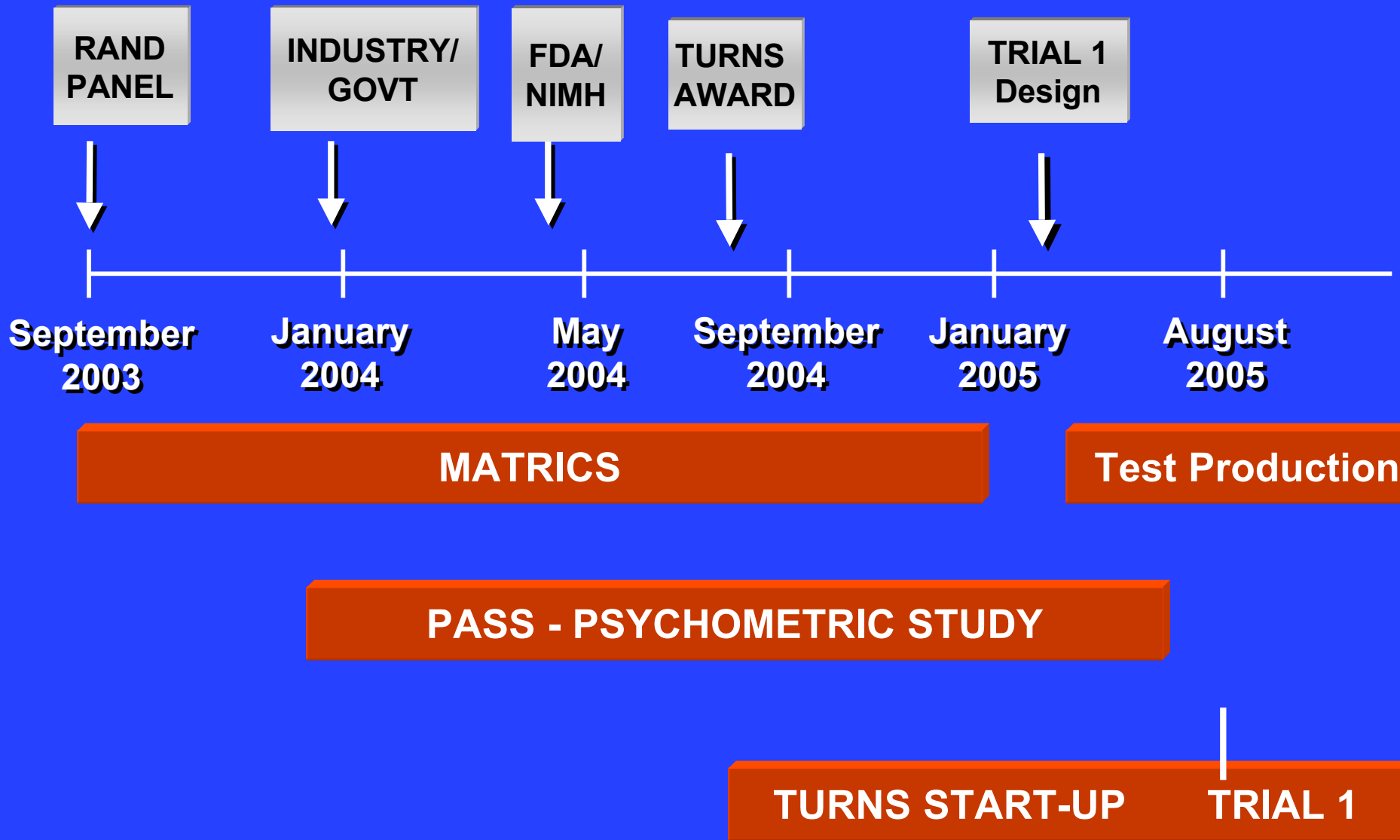
<http://www.nimh.nih.gov>

Treatment Units for Research on Neurocognition and Schizophrenia (TURNS)

- UCLA
- Columbia
- Washington University/St. Louis
- Nathan Klein Institute
- Mass General/Harvard
- Maryland Psychiatric Research Center
- Duke University

Treatment Units for Research on Neurocognition and Schizophrenia (TURNS)

- Academic Performance Sites
- Chief Psychopharmacologist
- Chief Neuropsychologist
- Capacity for Proof of Concept & pK/pD
- Capacity for Biomarkers
 - Psychophysiology - PET
 - fMRI - MRS

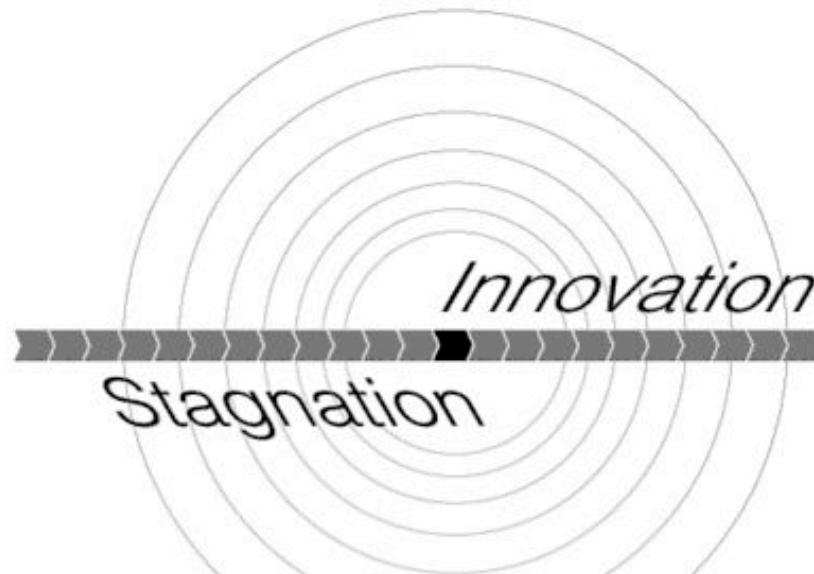


MATRICES: Evolving Issues

- Translation of Battery
- Computerization
 - Scientific Standards
 - Proprietary Considerations
- Cognitive Neuroscience-based Measures
- Negative Symptoms
- Continued Federal Role

Evolving Issues

- MATRICS Development
- FDA Critical Path Initiative
- Models for Government-Industry Collaboration



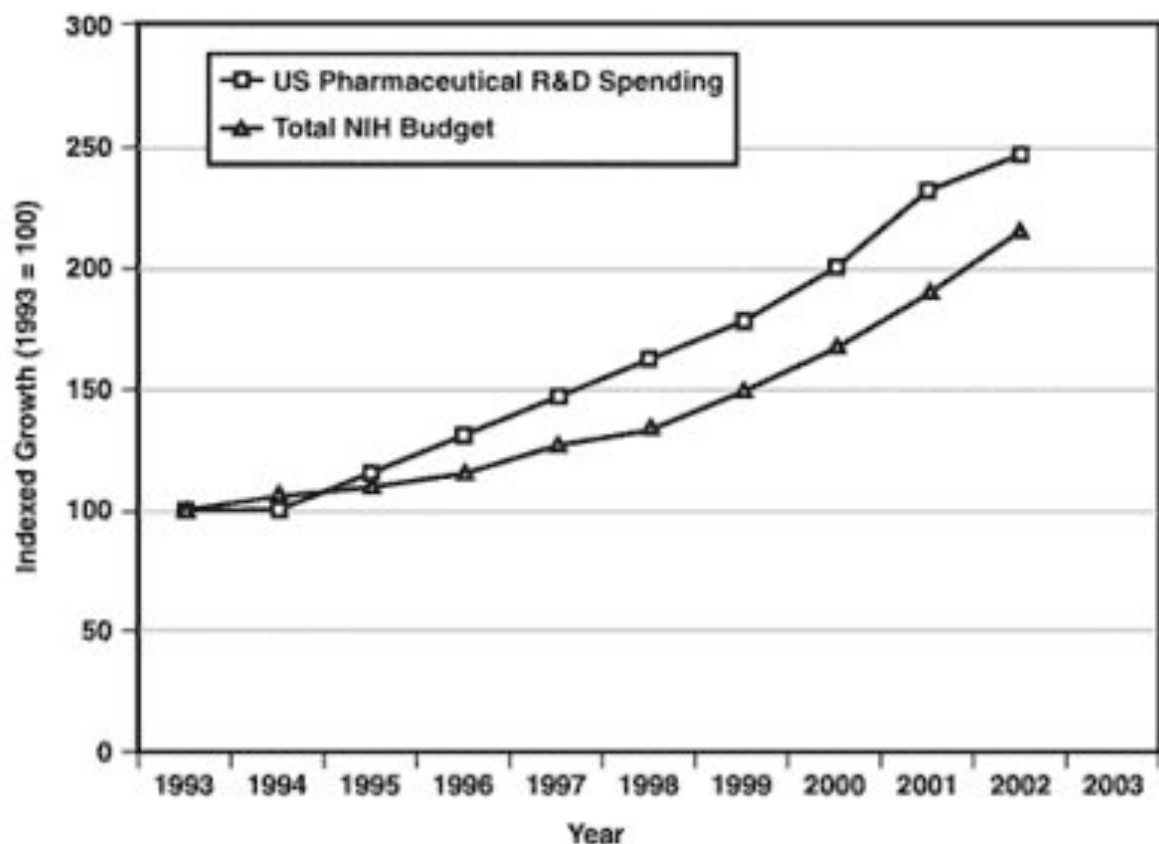
**Challenge and Opportunity
on the Critical Path
to New Medical
Products**



U.S. Department of Health and Human Services
Food and Drug Administration

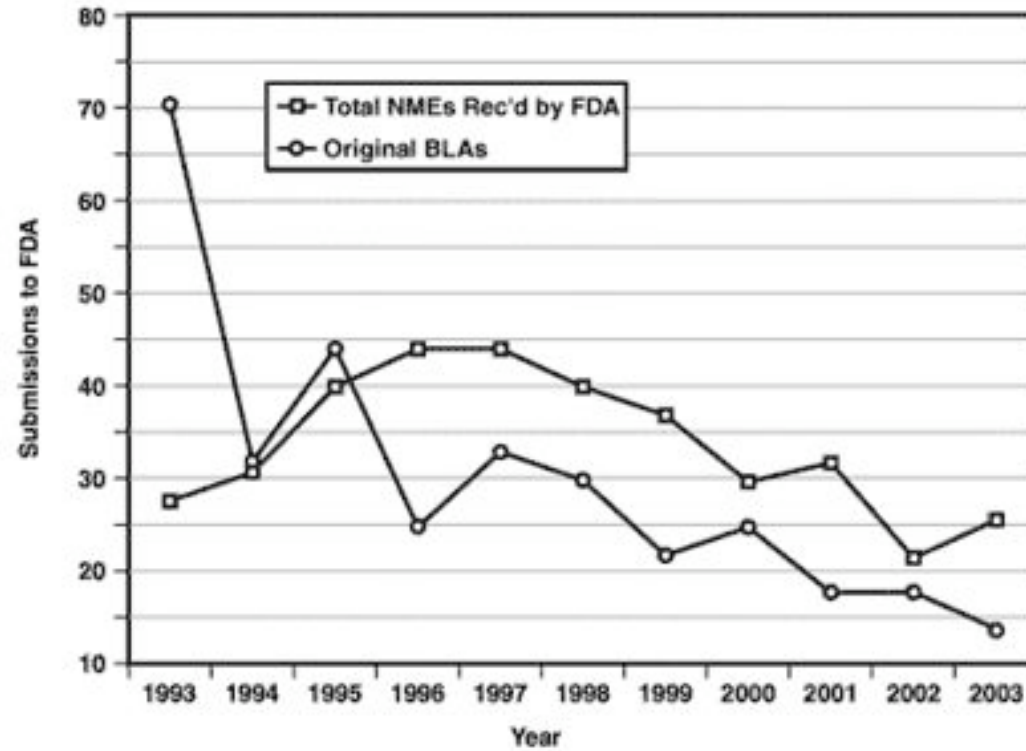
March 2004

Figure 1: 10-Year Trends in Biomedical Research Spending



The figure shows 10-year trends in biomedical research spending as reflected by the NIH budget (Budget of the United States Government, appendix, FY 1993-2003) and by pharmaceutical companies' research and development (R&D) investment (PAREXEL's Pharmaceutical R&D Statistical Sourcebook 2002/2003).

Figure 2: 10-Year Trends in Major Drug and Biological Product Submissions to FDA



The figure shows the number of submissions of new molecular entities (NMEs) — drugs with a novel chemical structure — and the number of biologics license application (BLA) submissions to FDA over a 10-year period. Similar trends have been observed at regulatory agencies worldwide.

Pipeline Stagnation: FDA View

- In FDA's view, the applied sciences needed for medical product development have not kept pace with the tremendous advances in basic sciences. The new science is not being used to guide the technology *development* process in the same way that it is accelerating the technology *discovery* process.
- In many cases developers have no choice but to use the tools and concepts of the last century to assess this century's candidates.

Critical Path or Development Science

- Better animal models and predictive pre-clinical screening methods.
- Biomarkers or surrogate endpoints for effectiveness: (H. pylori, CD4).
- Better paradigms for proof of concept trials in humans.
- Increase efficiency of clinical trials such as selection of patients based on genotype and Bayesian approaches to randomization.
- Methods for early prediction and detection of safety problems.
- Consensus regarding new meaningful clinical endpoints.
- Guidance for development pathway.

Government-Industry Collaborative Models

- NIA: Osteoarthritis Initiative
- NIH Molecular Libraries Project
- NIMH Collaborative Drug Development Groups (CDDG)
- NIMH Centers for Intervention Development and Applied Research (CIDAR)

NIA- Osteoarthritis Initiative (OAI)

- Today, 35 million people — 13 percent of the U.S. population—are 65 and older, and more than half of them have evidence of osteoarthritis in at least one joint.
- Drug development hindered by lack of standard measurement of disease progression.
- Goal: Define Biomarker for Progression of OA.
- Data and specimen repository will establish standards of disease progression against which potential biochemical and imaging markers can be evaluated

NIA- Osteoarthritis Initiative (OAI)

- Public/Private Partnership
 - NIH, FDA, GSK, Merck, Novartis, Pfizer
 - 8 million per year x 6 years
- Prospective radiological (X-ray, MRI) and biological assessment (blood, urine, DNA) of 5000 patients at risk for osteoarthritis progression.
- Finances managed by NIH Foundation.
- Enrollment March 2004.

NIH Roadmap: Molecular Libraries/Imaging

- *Goal: offer public sector biomedical researchers access to small organic molecules that can be used as chemical probes to study the functions of genes, cells, and biochemical pathways.*
- ***Molecular Libraries Screening Center Network (MLSCN).***
 - Accept Assays adapted to high throughput screening.
 - Establish library of 500,000 chemically diverse small molecules
 - Perform optimization chemistry to produce useful invitro chemical probes to study disease.

NIH Roadmap: Molecular Libraries/Imaging

- ***Cheminformatics***. A new and comprehensive database of chemical structures and their biological activities: PubChem
- ***Technology Development***.
 - **Chemical Diversity**: new synthetic methods
 - **Assay diversity**. novel assays for types of proteins and biological phenomena.
 - **Instrumentation**: new methods for high-throughput measurement of novel biological assays.
 - **Predictive ADME/Toxicology**: data sets and analysis methods to allow better prediction of ADME (absorption, distribution, metabolism, and excretion) and toxic properties of novel molecules.

Collaborative Models

- NIMH Collaborative Drug Development Groups (CDDG)
- NIMH Centers for Intervention Development and Applied Research (CIDAR)

www.nimh.nih.gov

Government-Industry Collaboration: January 22, 2004

Goal: Define non-redundant role for NIMH in hastening availability of new medicines for mental illness.

Process: Overview of Intramural and Extramural treatment development efforts.

Expert Panel: Including Research/CNS Directors from 14 leading pharmaceutical and biotech companies.

Government-Industry Collaboration: January 22, 2004

- 1. What useful and non-redundant role might NIMH play in hastening the availability of new treatments for mental illness ?**
- 2. Can large clinical trial networks be of utilized within a public-private partnership?**
- 3. What are major barriers to government-academic-industry collaboration and how might they be overcome?**

Government-Industry Collaboration: January 22, 2004

- 1. NIMH should maintain a strong basic research portfolio focused on elucidating pathophysiology of mental illness.**
- 2. Concerns were expressed regarding a molecular libraries project focused directly on human therapeutics. The molecular libraries project should focus on developing new ligands, radiotracers, and small molecule tools for pre-clinical research.**
- 3. NIMH research should focus on clarifying disease phenotypes both for genetic studies and to define new clinical targets for treatment development.**

Government-Industry Collaboration: January 22, 2004

- 4. The MATRICS process might be used as a paradigm for defining non-DSM clinical endpoints and refining measurement of psychopathology as dependent variables for treatment trials.**
- 5. The large clinical trial networks focus on important public health questions. Grafting longitudinal studies, studies of biomarkers, and pharmacogenetic studies onto large pragmatic trials may be a useful strategy for government-industry partnership.**
- 6. Some regular forum for communication between NIMH and industry might facilitate future collaboration.**

- [FDA Perspective on MATRICS.ppt](#)