MEDICAL SYSTEMS

April 4, 2007

Advanced Planning Briefing to Industry

COL DAVID WILLIAMS
JPM CBMS
Joint Program Executive Office for Chemical and Biological Defense
dave.williams2@amedd.army.mil

LTC CALVIN CARPENTER
Deputy Division Chief, Medical S&T
Joint Science and Technology Office for Chemical and Biological Defense
calvin.carpenter@dtra.mil
Outline

• Overview

• S&T and Warfighter Needs

• Technical Challenges

• Acquisition Strategy / Funding / Schedule

• Upcoming Business Opportunities

• Contacts
Science & Technology (S&T) Overview

- Develop Pre-treatments and Therapeutics for Protection Against Chemical and Biological Agents and Radiological Exposure; Develop, Assess and Validate Diagnostic Assays for Chemical and Biological Agents

- Utilize New Biotechnologies to Develop Broad-spectrum Countermeasures Against Conventional, Emerging, and Engineered Biological Threats

- Transition FDA-Approvable Vaccines, Drugs and Diagnostic Assays / Devices to Advanced Development
Program Overview

Chemical Biological Medical Systems (CBMS)

Develop, Procure, Field, and Sustain Premier **FDA Approved** Medical Protection, Treatment and Diagnostic Capabilities Against Chemical, Biological, Radiological, and Nuclear (CBRN) Warfare Agents
S&T Needs

• Rapid, Broad-Spectrum Chemical Warfare Agent (CWA) and Biological Warfare Agent (BWA) Protection

• Multi-agent BWA Prophylaxis

• Early Indicators of Exposure / Infection

• Effective Countermeasures Against Novel Chemical and Genetically Modified Biological Threats

• FDA Approval of Medical Countermeasures and Diagnostics

• Radiological Countermeasures
Warfighter Needs

• CBMS Products are Integrated into the DoD “System of Systems” Approach by Providing Prophylactic, Therapeutic, and Diagnostic Capabilities to Protect and Treat Service Members From the Effects of CBRN Agents
  – Medical Identification & Treatment Systems (CBMS - MITS)
    • Develop and Acquire Safe, Effective, and FDA Approved Products for Prophylaxis, Treatment, and Diagnosis of Chemical, Biological, Radiological and Nuclear Warfare Agent Exposure
  – Joint Vaccine Acquisition Program (CBMS - JVAP)
    • Develop, Produce, & Stockpile FDA Licensed Vaccine Systems to Protect the Warfighter from Biological Agents
Warfighter Needs (Cont’d)

• Post-Exposure Requirement: Provide the Capability to Treat Service Members for the Effects of CBRN Agents After the Appearance of Symptoms
  – Advanced Anticonvulsant System (AAS) Will Replace Convulsant Antidote Nerve Agent (CANA) System
    • Intramuscular Auto-injection of Drug (Midazolam) for Enhanced Control of Seizures Effective Against Broader Spectrum of Nerve Agents
  – Bioscavenger will Prevent Incapacitation and Death from Exposure to Nerve Agents
  – Improved Nerve Agent Treatment System (INATS) Active Ingredient will Replace and Provide Better Protection Than Current Oxime, 2-PAM in Current Delivery System
    • System Approach Will Also Develop Broader Indications for Pretreatment Pyridostigmine Bromide
  – Medical Radiation Countermeasures will Enhance Survivability After Exposure to Ionizing Radiation
  – Critical Reagents Program (CRP) Provides Biological Threat Agent and Genomic Reference Material
Warfighter Needs (Cont’d)

• Diagnostics Requirement: Provide a Reusable, Portable, Modifiable Biological Agent Identification and Diagnostic System Capable of Simultaneous Reliable Identification of Multiple Biological Warfare Agents and Other Biological Agents of Operational Significance
  – Joint Biological Agent Identification and Diagnostic System (JBAIDS) Will Provide Portable Diagnostic Capability to Warfighter. Evolutionary Approach:
    • JBAIDS Increment I: System Capable of Identifying 10 Biological Warfare Agents (BWAs)
    • JBAIDS Increment 3, Next Generation Diagnostic System: Capability will be fully automated and integrated with on-board sample preparation, analysis and identification, and reporting. Increment 3 will be a smaller and less complex system that will minimize the need for consumables and extensive laboratory items of support equipment. It will be interoperable with the global information grid and will be FDA-cleared for use as a diagnostic device.
Warfighter Needs (Cont’d)

• Pre-Treatment Requirement: Provide the Capability to Protect Service Members From the Effects of Biological Agents Before the Appearance of Symptoms
  
  – CBMS - JVAP Uses the Prime Systems Contractor Approach with DynPort Vaccine Company (DVC) to Meet DoD Biological Defense Vaccine Requirements for Vaccines Currently in Development
    
    • DVC Obtains and Maintains FDA Licenses
  
  – Recombinant Botulinum A/B Vaccine Program (rBV A/B) will Provide Protection From Aerosol Exposure to Botulinum Toxin A/B
  
  – Plague Vaccine Program will Provide Protection from Aerosol Exposure to Yersinia Pestis
S&T Technical Challenges

• Pre-treatments
  – Understand Immune Responses to Vaccination
  – Exploit DNA-based or Genetic Immunization Platforms for Rapid Vaccine Development
  – Develop Broad-spectrum, Multi-agent Vaccines to Counter Emerging Threats
  – Develop a Catalytic Nerve Agent Bioscavenger

• Therapeutics
  – Develop Broad-spectrum Therapeutics for BWA
  – Develop Surrogate Efficacy Measures and Animal Models for FDA Approval of Countermeasures
  – Develop Effective Countermeasures Against Toxins and Chemical Agents
  – Minimize Systemic, Neurologic, Ocular, and Cutaneous Injury by CWA
S&T Technical Challenges (Cont’d)

• Diagnostics
  – Provide S&T Support to Advanced Developer in the Development/ Assessment of an Integrated Nucleic Acid and Immunodiagnostic Platform (JBAIDS Increment 3, Next Generation Diagnostic)
  – Exploit Systems Biology Tools to Develop Novel Biomarkers as Targets for Assay Development
  – Identify Presymptomatic Diagnostic Signatures
  – Simplify Sample Processing
  – Assay Improvement/ Expansion

• Medical Radiological Defense
  – Develop Effective Pre- and Post-exposure Radioprotectants
  – Reconstitute or Facilitate Repair of Radiogenic Damage to Hematologic, Immunologic, Gastrointestinal, and Neurological Systems
S&T Technical Challenges (Cont’d)

• Transformational Medical Technologies Initiative (TMTI)

• Program Goals
  – Two (2) Platform Technologies to Identify Unknowns and Rapidly Develop Threat Countermeasures
  – Genetic Sequences for Pertinent Threats
  – Two (2) Broad Spectrum Countermeasures
    • One (1) Viruses (Especially Hemorrhagic Fever Viruses)
    • One (1) Intracellular Pathogens

• Two Investigational New Drugs (INDs) Within Five (5) Years Leading to Fielding FDA Licensed Products
Program Technical Challenges (Cont’d)

• CBMS
  – Evolving FDA Guidance
  – Animal Rule
  – Manufacturing Scale Up
  – Industrial Base Sustainment
  – Biosurety Requirements for BSL 3/4 Commercial Facilities

• CBMS - JVAP
  – Plague Vaccine Program
    • Animal Model
    • Correlate of Protection
  – Recombinant Botulinum A/B Program
    • Assays to Measure Protein Concentration
Program Technical Challenges

• CBMS - MITS
  – Improved Nerve Agent Treatment System (INATS)
    • Active Ingredient is New Active Pharmaceutical Ingredient (API) in U.S.
      – Stability of the Formulation or Toxicology Problems with Candidate Oxime
      – Compatibility and Stability of Candidate Oxime in an Autoinjector System
  – JBAIDS – Next Generation Diagnostic System
    • FDA Approval of Device and Multiple Assays
    • Miniaturization & Interoperability
    • Automation and Integration of Sample Preparation
    • 2 Years or More Stability of Consumables
S&T Capability Strategy

• Place Greater Emphasis on Developing **Broad-Spectrum Medical Countermeasures**

• **Exploit Cutting Edge Technologies** to Improve Medical Countermeasures

• **Accelerate Development Cycle** (Rapid Vaccine and Drug Development)

• **Leverage Existing Capabilities** Found in Other Federal Agencies, Industry, and International Partners

• **Sustain Long-term Investment** in Developing Candidates for Capability Gaps

• **Ensure Knowledge Base** to Support Future Technology Development
Transformational Medical Technologies Initiative Strategy

Scientific Thrust Areas
- Genomic Identification
- Small Molecule Discovery
- Protein Based Therapeutics
- Nucleotide Therapeutics
- Human Immune Enhancement

Integrated Cross-Cutting Technologies
- Systems Sciences
- Life Sciences
- Systems Biology
- Data Analysis
- Genetic Modification
- Hypothesis Synthesis
- Modeling Concept
- Visualization
- Quantitative Measurement

Deliverables
- BROAD SPECTRUM TREATMENTS
  - Hemorrhagic Fever Viruses
  - Intracellular Bacterial Pathogens
- GENETIC ID AND ANALYSIS
  - Microarray Technology
  - Bioinformatics
  - Proteomics
  - Genomics
  - siRNA

An Innovative Approach Using Revolutionary Technologies to Expedite the Development of Products to Counter Emerging Biological Threats
Program Acquisition Strategy

- **Partnering**: Occurs through collaboration with industry, academia, other government agencies, and international partners to meet the needs of the warfighter.

- **Regulatory Compliance**: Essential since FDA approval is a key performance parameter (KPP) for acceptable medical countermeasure material solution.

- **Lifecycle Management**: Important to ensure that the medical countermeasure material solutions are sustained and thus readily available to the warfighter.
  - Manages product line within available resources.
    - Funds product development efforts to minimize schedules.
    - Expands or contracts product line based on available funding.

- **Planning for the Future**: Imperative to meet existing and future threats.
  - Addresses user requirements based on capabilities needed and joint staff priorities.
## S&T Program Schedule / Transition to CBMS - JVAP

<table>
<thead>
<tr>
<th>Product</th>
<th>FY04</th>
<th>FY05</th>
<th>FY06</th>
<th>FY07</th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>Proposed Transition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ricin Vaccine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2008</td>
</tr>
<tr>
<td>SE Vaccine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2008</td>
</tr>
<tr>
<td>WEE/EEE Vaccine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2009</td>
</tr>
<tr>
<td>Filovirus Vaccine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Recombinant BOT (C,F)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2010</td>
</tr>
<tr>
<td>Multiagent Vaccine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>BOT mAb Therapeutic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
</tbody>
</table>

**LEGEND:**
- Technology Transition Agreement (TTA)
- Transition Opportunity

FY04  FY05  FY06  FY07  FY08  FY09  FY10  FY11  Proposed Transition

- Ricin Vaccine: 2008
- SE Vaccine: 2008
- WEE/EEE Vaccine: 2009
- Filovirus Vaccine: 2010
- Recombinant BOT (C,F): 2010
- Multiagent Vaccine: TBD
- BOT mAb Therapeutic: TBD
S&T Program Schedule / Transition to CBMS - MITS

<table>
<thead>
<tr>
<th>FY04</th>
<th>FY05</th>
<th>FY06</th>
<th>FY07</th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>Proposed Transition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catalytic Bioscavenger Increment III</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>Orthopox Therapeutic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2008</td>
</tr>
<tr>
<td>Filovirus Therapeutic (Nucleic Acid Based)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2008</td>
</tr>
<tr>
<td>BOT Therapeutics (Small Compounds)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>Next Generation (Diagnostics)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2010</td>
</tr>
</tbody>
</table>

LEGEND: ▲ Technology Transition Agreement (TTA) □ Transition Opportunity
# TMTI Program Transition Schedule

<table>
<thead>
<tr>
<th>FY06</th>
<th>FY07</th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>Proposed Transition</th>
</tr>
</thead>
</table>

**LEGEND:**
- ▲ Technology Transition Agreement (TTA)
- ● Transition Opportunity
CBMS: Current Business Opportunities

**LEGEND:**
- Milestone
- IND Submission
- Initiate Phase 1 Clinical Trial
- Initiate Phase 2 Clinical Trial
- Initiate Phase 3 Clinical Trial
- NDA Submission
- BLA Submission
- Licensure

### CBMS - MITS
- **Improved Nerve Agent Treatment System**
- **JBAIDS Increment 3 Next Generation Diagnostics**

### CBMS - JVAP
- **Recombinant Botulinum (A/B)**
- **Plague Vaccine (US)**

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>FY06</th>
<th>FY07</th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>FY12</th>
<th>FY13</th>
<th>Projected FDA Approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBMS - MITS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2013</td>
</tr>
<tr>
<td>Improved Nerve Agent Treatment System</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2013</td>
</tr>
<tr>
<td>JBAIDS Increment 3 Next Generation Diagnostics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2013</td>
</tr>
<tr>
<td>CBMS - JVAP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2013</td>
</tr>
<tr>
<td>Recombinant Botulinum (A/B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2013</td>
</tr>
<tr>
<td>Plague Vaccine (US)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2011</td>
</tr>
</tbody>
</table>
## S&T Funding

<table>
<thead>
<tr>
<th>$M</th>
<th>FY07</th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>FY12</th>
<th>FY13</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 Research (Core Program)</td>
<td>31.7</td>
<td>24.7</td>
<td>24.6</td>
<td>23.6</td>
<td>22.6</td>
<td>23.2</td>
<td>22.8</td>
<td>173.1</td>
</tr>
<tr>
<td>6.1 TMTI</td>
<td>33</td>
<td>23</td>
<td>10.2</td>
<td>7.5</td>
<td>7.3</td>
<td>6.6</td>
<td>5.9</td>
<td>111.9</td>
</tr>
<tr>
<td>6.2 Research (Core Program)</td>
<td>68.6</td>
<td>77.6</td>
<td>76.7</td>
<td>72.5</td>
<td>72</td>
<td>80.5</td>
<td>82.2</td>
<td>530</td>
</tr>
<tr>
<td>6.2 TMTI</td>
<td>49.1</td>
<td>113</td>
<td>26.2</td>
<td>16.1</td>
<td>14</td>
<td>12.8</td>
<td>11.4</td>
<td>302.2</td>
</tr>
<tr>
<td>6.3 Research (Core Program)</td>
<td>52.8</td>
<td>66</td>
<td>68</td>
<td>73.5</td>
<td>68.8</td>
<td>70</td>
<td>70.8</td>
<td>469.8</td>
</tr>
<tr>
<td>6.3 TMTI</td>
<td>41.4</td>
<td>111.7</td>
<td>264.9</td>
<td>187.5</td>
<td>92.4</td>
<td>84.1</td>
<td>75.2</td>
<td>880.8</td>
</tr>
<tr>
<td>TOTAL</td>
<td>378.2</td>
<td>416</td>
<td>470.5</td>
<td>380.7</td>
<td>277</td>
<td>277.1</td>
<td>268.2</td>
<td>2467.8</td>
</tr>
</tbody>
</table>
Program Funding*

<table>
<thead>
<tr>
<th></th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>FY12</th>
<th>FY13</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBMS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BA4/5</td>
<td>22.0</td>
<td>33.9</td>
<td>47.8</td>
<td>33.2</td>
<td>9.3</td>
<td>2.2</td>
<td>148.4</td>
</tr>
<tr>
<td>PROC</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
<td>2.0</td>
<td>12.0</td>
</tr>
<tr>
<td>Total</td>
<td>24.0</td>
<td>35.9</td>
<td>49.8</td>
<td>35.2</td>
<td>11.3</td>
<td>4.2</td>
<td>160.4</td>
</tr>
</tbody>
</table>

BA4 = Pre - Milestone B
BA5 = Post - Milestone B

*Program funding estimates are notional based on historical data*
## S&T Upcoming Business Opportunities

<table>
<thead>
<tr>
<th>Program</th>
<th>Estimated Target BAA Release</th>
<th>Target Funding Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transformational Medical Technologies Initiative – RFP</td>
<td>4QFY07 and TBD</td>
<td>FY07 – FY11</td>
</tr>
<tr>
<td>CB Defense Medical S&amp;T Program – Tech Base</td>
<td>1QFY08</td>
<td>FY09</td>
</tr>
<tr>
<td>Small Business Innovation Research (SBIR) – Tech Base</td>
<td>1QFY08</td>
<td>FY07</td>
</tr>
<tr>
<td>Chem-Bio Defense Program (S&amp;T) – BAA</td>
<td>1QFY08</td>
<td>FY08</td>
</tr>
</tbody>
</table>
## Program Upcoming Business Opportunities

<table>
<thead>
<tr>
<th>Program</th>
<th>Description</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CBMS - MITS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>JBAIDS</td>
<td>Develop Increment 3: Next Generation Diagnostic System</td>
<td>FY11-12</td>
</tr>
<tr>
<td>Improved Nerve Agent Treatment System (INATS)</td>
<td>Conduct post Milestone B to FDA approval activities</td>
<td>FY08-13</td>
</tr>
<tr>
<td><strong>CBMS - JVAP</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>rBot A/B Vaccine Program</td>
<td>Conduct Phase 3 clinical trial</td>
<td>FY08-12</td>
</tr>
<tr>
<td>rBot A/B Vaccine Program</td>
<td>Conduct large scale fill/finish</td>
<td>FY08-13</td>
</tr>
<tr>
<td>Plague Vaccine Program*</td>
<td>Conduct Phase 3 clinical trial</td>
<td>FY08-11</td>
</tr>
<tr>
<td>Plague Vaccine Program*</td>
<td>Conduct large scale fill/finish</td>
<td>FY08-11</td>
</tr>
<tr>
<td>CBMS - JVAP</td>
<td>Storage, testing, and maintenance of IND and legacy stockpile</td>
<td>FY08-13</td>
</tr>
</tbody>
</table>

*DVC Candidate
S&T Points of Contact

• Director, Medical S&T; Senior Manager, Diagnostics
  – Col Patricia Reilly
  – (703) 767-3405
  – patricia.reilly@dtra.mil

• Deputy, Medical S&T
  – LTC Calvin Carpenter
  – (703) 767-3370
  – calvin.carpenter@dtra.mil
Advanced Development
Points of Contact

• Joint Project Manager, Chemical Biological Medical Systems (CBMS)
  – COL David Williams
  – 301-619-7681
  – dave.williams2@amedd.army.mil

• Deputy Joint Project Manager, Chemical Biological Medical Systems (CBMS)
  – Dr. Ron Clawson
  – 301-619-2016
  – ronald.clawson@amedd.army.mil
BACK UP
## Total Program Funding*

<table>
<thead>
<tr>
<th></th>
<th>FY08</th>
<th>FY09</th>
<th>FY10</th>
<th>FY11</th>
<th>FY12</th>
<th>FY13</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CBMS</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BA4</td>
<td>21.6</td>
<td>7.8</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
<td>29.4</td>
</tr>
<tr>
<td>BA5</td>
<td>90.4</td>
<td>99.4</td>
<td>82.4</td>
<td>75.2</td>
<td>57.0</td>
<td>47.7</td>
<td>452.1</td>
</tr>
<tr>
<td>PROC</td>
<td>56.0</td>
<td>47.6</td>
<td>54.8</td>
<td>54.6</td>
<td>60.5</td>
<td>61.0</td>
<td>334.5</td>
</tr>
<tr>
<td>Total</td>
<td>168.0</td>
<td>154.8</td>
<td>137.2</td>
<td>129.8</td>
<td>117.5</td>
<td>108.7</td>
<td>816.0</td>
</tr>
</tbody>
</table>

|       |       |       |      |      |      |      |       |
| **TMTI** |       |       |      |      |      |      |       |
| BA4   | 0.0   | 0.0   | 122.6| 139.8| 133.9| 134.0| 530.3 |
| BA5   | 0.0   | 0.0   | 0.0  | 114.1| 109.3| 109.4| 332.8 |
| RDTE  | 0.0   | 0.0   | 122.6| 253.9| 243.2| 243.4| 863.1 |

BA4 = Pre - Milestone B  
BA5 = Post - Milestone B  
*FY08-13 BES Funding as of January 23, 2007