TMDD model development GUIDELINES



DO I NEED A TMDD MODEL?

- Type of molecule: biologics such as monoclonal anti-bodies, cytokines, growth factors, fusion proteins, antibody-small molecule drug conjugates or hormones
- NCA shows Vd, Cl, AUC/Dose or Cmax/Dose vary for different dose amounts or between first and subsequent doses
- Shape of the concentration-time curve .
- Parameters of linear mixed-effect model vary with dose amount



B) The free drug and the total receptor have been measured

The shape of the total receptor concentration indicates if models assuming Rtot constant can be used. If not, it indicates if kint is larger or smaller than kdeg.



HOW TO SET THE INITIAL VALUES?

Best order to find the initial values using the "Check initial estimates": $V \Rightarrow CI \Rightarrow Q (\approx CI)$ and $V2 (\approx V) \Rightarrow RO (\approx CO) \Rightarrow ksyn or Vm \Rightarrow KD or Km$

Parameter	Typical value	Parameter	Typical value
Dose	10-3000 nmol	kon	1-100 /nM/day
CI, Q	0.24-1.4 L/day	koff	0.1-100 /day
V, V2	3-6 L	κ _D	1-100 nM
ka	0.2-1.5 /day	ksyn	1-2 nM/day
kint (soluble target)	0.01-0.2 /day	kdeg	1-150 /day
kint (membrane target)	5-100 /day	Ro	0.001-10 nM

HOW TO DIAGNOSE THE MODEL?

A) Examples of hints that the model is too simple

MM model has been fitted on a data set that requires a QE model.



Tip: encode the dose group as categorical covariates in the data set to be able to split/color/filter by dose group

B) Examples of hints that the model is too complex

QE model has been fitted on a data set that requires a MM model.



Tip: reduce the model complexity:

use a simpler TMDD model

- remove the inter-individual variability on the parameters difficult to estimate
- fix the unidentifiable parameters

AVAILABLE ONLINE

- Full case study with downloadable material
- Detailed description of all TMDD models



S+ SimulationsPlus

Library of TMDD models for the MonolixSuite

St SimulationsPlus

