

# Factors Influencing Plume Characteristics of Metered Dose Inhalers (MDIs) Following Passage through Bio-relevant Mouth-Throat Models

**Sneha Dhapare<sup>1</sup>; Bryan Newman<sup>1</sup>; Mårten Svensson<sup>2</sup>; Peter Elfman<sup>2</sup>; Dennis Sandell<sup>3,#</sup>; Larry Winner<sup>4</sup>; Jürgen Bulitta<sup>5</sup>; Günther Hochhaus<sup>5</sup>**

<sup>1</sup> Office of Research and Standards, Office of Generic Drugs, Center for Drug Evaluation and Research, Food and Drug Administration, Silver Spring, MD, USA

<sup>2</sup> Emmace Consulting AB, Medicon Village, SE-223 81 Lund, Sweden

<sup>3</sup> S5 Consulting, Ekvägen 8, SE-275 62 Blentarp, Sweden; # In Memoriam, October 29, 2020

<sup>4</sup> Department of Statistics, College of Liberal Arts and Sciences, University of Florida, Gainesville, FL, USA

<sup>5</sup> Department of Pharmaceutics, College of Pharmacy, University of Florida, Gainesville, FL, USA

**RDD 2021  
May 4-7, 2021**



# Disclaimer



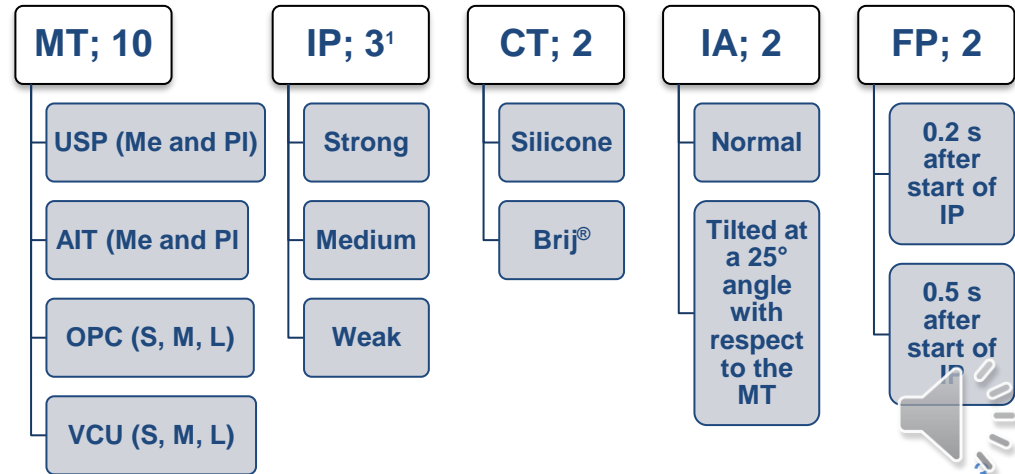
- *This presentation reflects the views of the author and should not be construed to represent FDA's views or policies.*
- *Funding for this work was made possible, in part, by the U.S. Food and Drug Administration through contract 75F40119C10154.*



# Introduction

- The goal of this Generic Drug User Fee Amendments (GDUFA)-funded research (75F40119C10154) is to understand how the **droplet size distribution (DSD)** of a MDI's emitted aerosol may change after passage through the mouth-throat in a realistic in vitro set-up.
- A systematic analysis of the effects of the following **factors** on the DSD of 3 **commercial MDIs** was performed using a reduced factorial design:

- Realistic Mouth-Throat (MT) Models**
- Inhalation Profiles (IP)**
- MT Model Coating Types (CT)**
- MT Model Insertion Angles (IA)**
- MDI Firing Points (FP)**



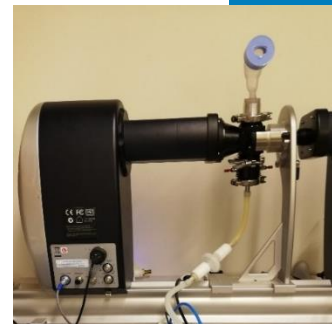
USP: United States Pharmacopeia induction port; AIT: Alberta Idealized Throat; OPC: Oropharyngeal Consortium; VCU: Virginia Commonwealth University; Me: Metal; PI: Plastic; S: small; M: medium; L: large

<sup>1</sup>Delvadia et al. *J Aerosol Med Pulm Drug Deliv* 2016, 29: 196–206.

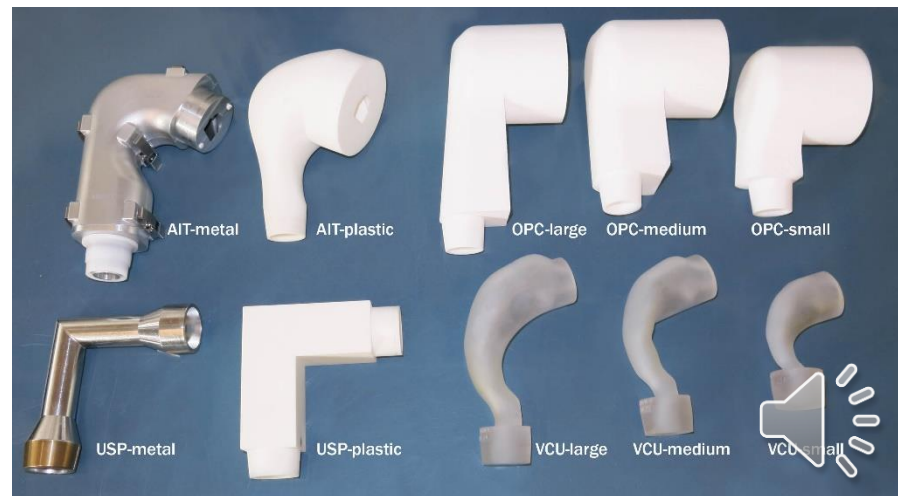


# Methods

- Volumetric diameters ( $\mu\text{m}$ ), **Dv10**, **Dv50**, **Dv90** and average transmission (**AT**, %) of the emitted aerosol were measured using a **Spraytec system** (Malvern Panalytical) with the inhalation cell connected to a breath simulator.
- Measurements were made at the exit of the inhaler actuator mouthpiece (i.e., **before the MT**) and again at the exit of the coated anatomical throat (i.e., **after the MT**).
- MDI products studied:



Product	API(s)	Formulation
<b>Flovent<sup>®</sup> HFA</b>	Fluticasone Propionate	Suspension
<b>Symbicort<sup>®</sup></b>	Budesonide, Formoterol Fumarate Dihydrate	Suspension
<b>Atrovent<sup>®</sup> HFA</b>	Ipratropium Bromide	Solution

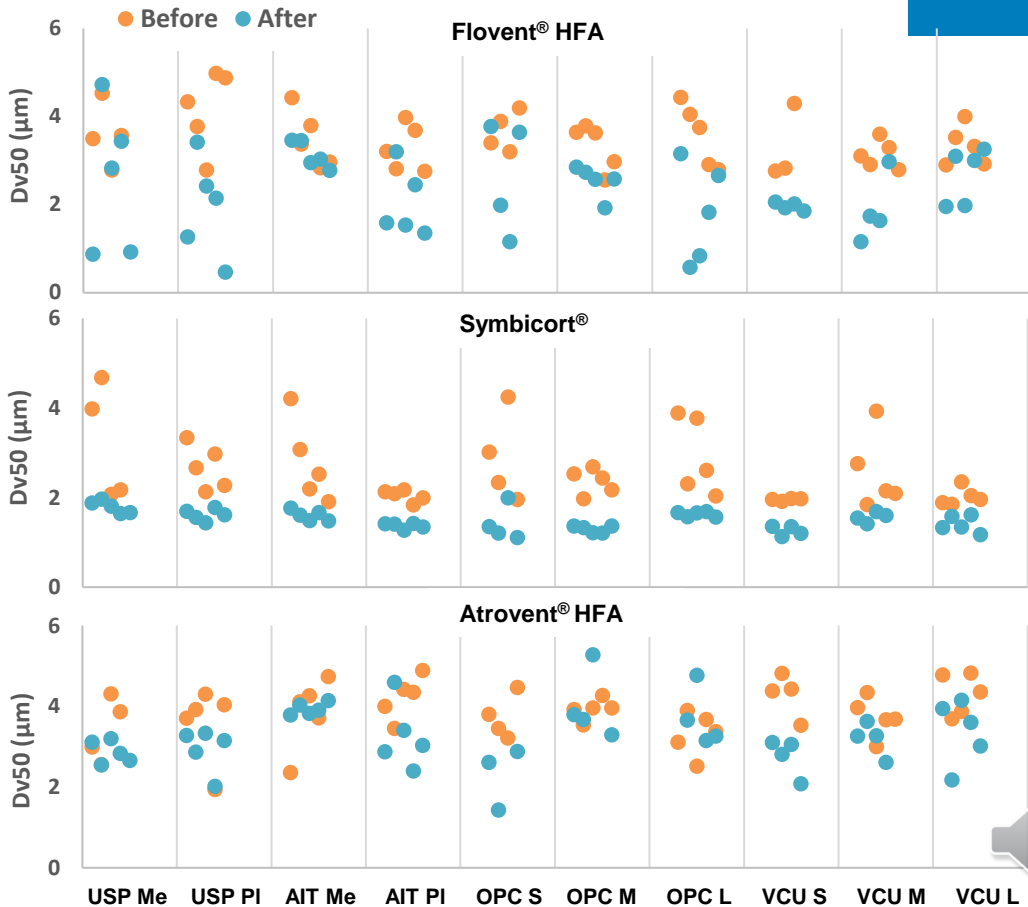


# Results: Before and After MT

- Dv50 generally **decreased** after passage through MT models by 1.2-3-fold.

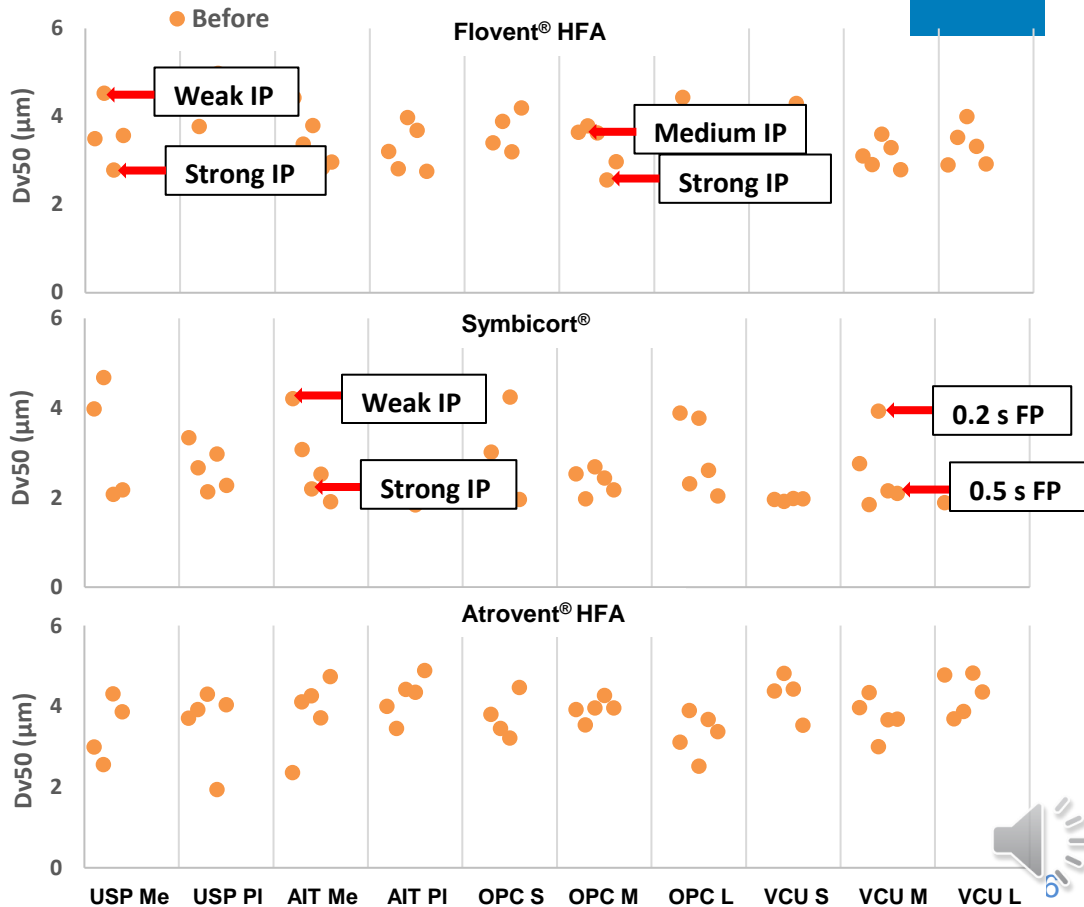


USP: United States Pharmacopeia induction port; AIT: Alberta Idealized Throat; OPC: Oropharyngeal Consortium; VCU: Virginia Commonwealth University; Me: Metal; PI: Plastic; S: small; M: medium; L: large



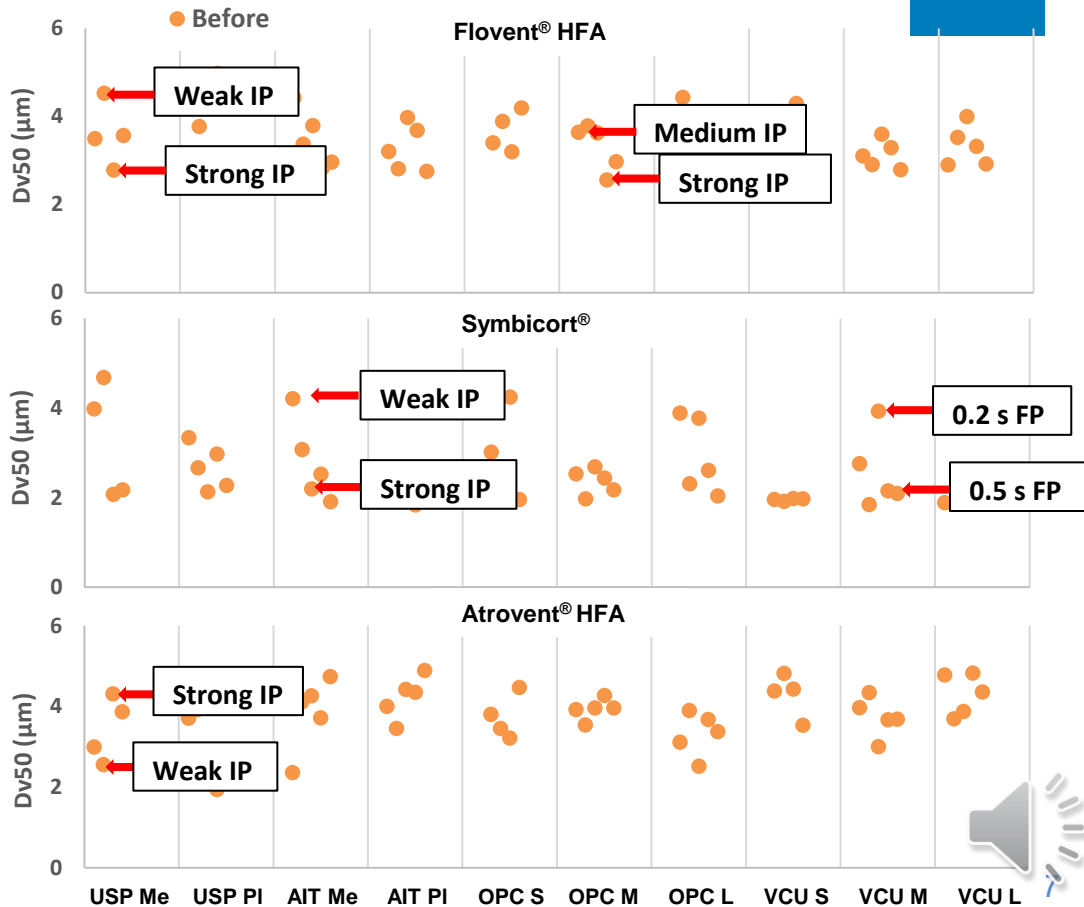
# Results: Before MT

- **IP** (weak, medium and strong) and **FP** (0.2 and 0.5 s after the start of IP) showed significant ( $p < 0.05$ ) effects on Dv50.
- **Decreasing trend** in Dv50 observed with weak, medium and strong IPs for Flovent<sup>®</sup> HFA and Symbicort<sup>®</sup>.



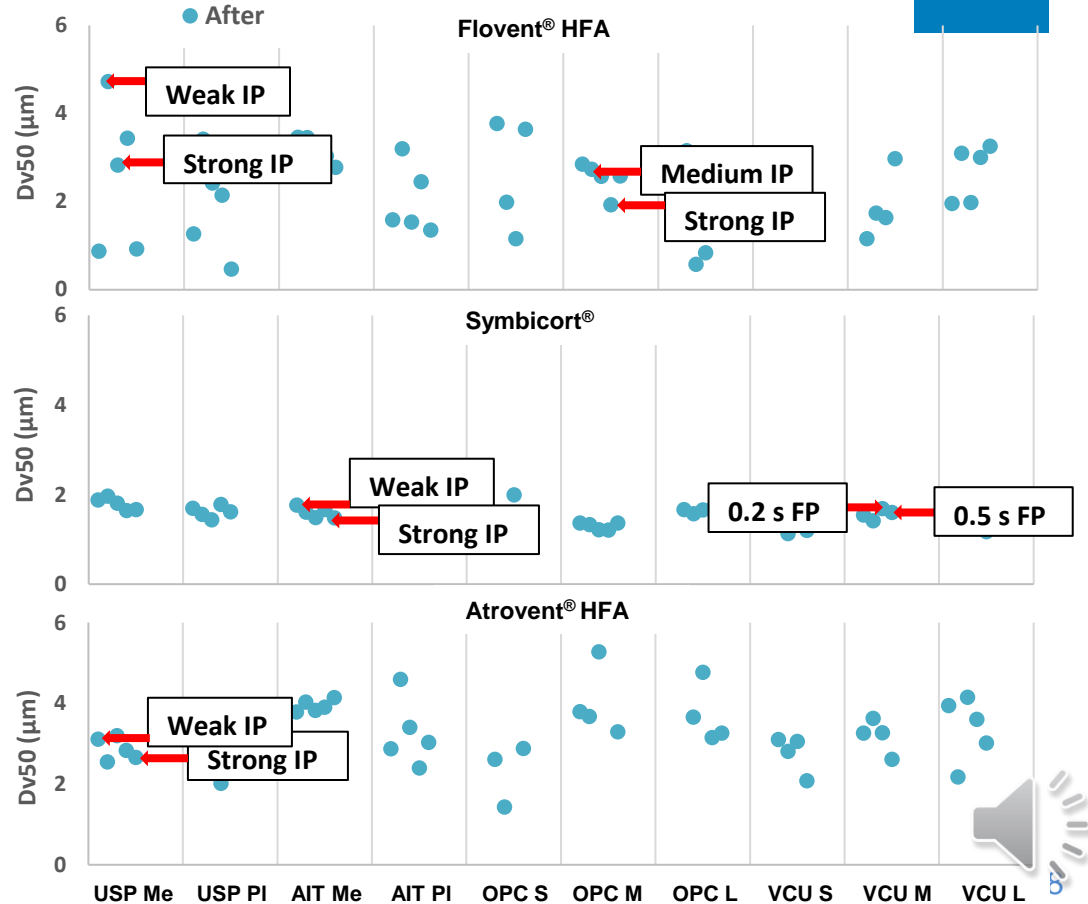
# Results: Before MT

- **IP** (weak, medium and strong) and **FP** (0.2 and 0.5 s after the start of IP) showed significant ( $p < 0.05$ ) effects on Dv50.
- **Decreasing trend** in Dv50 observed with weak, medium and strong IPs for Flovent<sup>®</sup> HFA and Symbicort<sup>®</sup>.
- **Increasing trend** in Dv50 observed with weak, medium and strong IPs for Atrovent<sup>®</sup> HFA.



# Results: After MT

- **Large range** of Dv50 as a result of different IP, CT, FP, and IA, particularly for Flovent<sup>®</sup> HFA and Atrovent<sup>®</sup> HFA.
- Less effect of experimental conditions on Symbicort<sup>®</sup>.
- Effect of **different sizes of MT** appear **product specific**, but more prominent for OPC than VCU.
- Significantly ( $p < 0.05$ ) higher (10-40 %) Dv50 for metal version of AIT (**AIT Me**) as compared to plastic (**AIT PI**).





# Results: After MT



- Choice of the **MT model** had the **strongest effect** on Dv10, Dv50, Dv90, and AT, followed by IP.
- Strong effect of **CT** on Dv50 of **Flovent**; silicone consistently resulted in a higher Dv50 as compared to Brij®.
- Much smaller effects for IA and FP.

Eta-square values for each factor. Eta-square = 0.06 indicates a medium effect and eta-square = 0.14 indicates a large effect. Values  $\geq 0.14$  are shown in red and values  $\geq 0.06$  are shown in blue.

MDI	Parameter	eta-square				
		MT	IP	CT	IA	FP
Flovent® HFA	Dv10	0.4336	0.0037	0.0830	0.0000	0.0065
	Dv50	0.1711	0.0311	0.1886	0.0237	0.0078
	Dv90	0.2210	0.0864	0.0569	0.0167	0.0025
	AT	0.2467	0.0039	0.1053	0.0000	0.0057
Symbicort®	Dv10	0.0320	0.2264	0.0051	0.0179	0.0957
	Dv50	0.3266	0.0867	0.0005	0.0084	0.0256
	Dv90	0.4611	0.0577	0.0011	0.0000	0.0262
	AT	0.3357	0.0183	0.0183	0.0097	0.0168
Atrovent® HFA	Dv10	0.1962	0.0416	0.0210	0.1244	0.0041
	Dv50	0.3888	0.0622	0.0220	0.0251	0.0019
	Dv90	0.2353	0.1063	0.0143	0.0285	0.0213
	AT	0.5191	0.0256	0.0232	0.0151	0.0004

# Conclusions



- **Inhalation profile** and **firing point** had strong effects on volumetric diameters before the mouth-throat (MT).
- The **mouth-throat geometry** had the strongest effect on plume properties after the MT of the investigated commercial MDIs, followed by **inhalation profile**.
- Overall, the effect of different factors on the droplet size distribution (DSD) was found to be **product specific** and was inconsistent within the **formulation type** (i.e., **suspension or solution**).
- Future studies are planned to explore the effect of these factors on aerodynamic particle size distribution (APSD) parameters and the correlation between DSD and APSD parameters.



# Acknowledgements

- FDA/CDER/OGD/ORS
  - Timothy Walbert
  - Denise Conti, PhD
  - Md Abdul Kaisar, PhD
  - Elizabeth Bielski, PhD
  - Liangfeng Han, MD, PhD
  - Susan Boc, PhD
  - Ross Walenga, PhD
  - Darby Kozak, PhD
  - Markham Luke, MD, PhD
  - Lei Zhang, PhD
  - Robert Lionberger, PhD
- FDA/CDER/OPQ/OTR/DCDA
  - Changning Guo, PhD
- University of Florida
  - Ann Ross
  - Elham Amini
  - Yufei Tang
  - Simon Berger

# Questions?

**Sneha Dhapare, PhD**

Pharmacologist

Division of Therapeutic Performance, Office of Research and Standards  
Office of Generic Drugs | CDER | U.S. FDA

[Sneha.Dhapare@fda.hhs.gov](mailto:Sneha.Dhapare@fda.hhs.gov)

<https://www.fda.gov/drugs/generic-drugs/science-research>





**U.S. FOOD & DRUG**  
ADMINISTRATION