

# The Effect of Excipients on Intestinal Drug Transporters

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UCSF

USP-FDA Workshop: Critical Importance of Excipients  
2017

# Biopharmaceutical Classification System Class 3 Biowaivers

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Waiver of In Vivo  
Bioavailability and  
Bioequivalence Studies for  
Immediate-Release Solid Oral  
Dosage Forms Based on a  
Biopharmaceutics Classification  
System  
Guidance for Industry

***DRAFT GUIDANCE***

This guidance document is being distributed for comment purposes only.

Comments and suggestions regarding this draft document should be submitted within 60 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <http://www.regulations.gov>. Submit written comments to the Division of Dockets Management (HFA-305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number listed in the notice of availability that publishes in the *Federal Register*.

For questions regarding this draft document contact (CDER) Mehul Mehta 301-796-1573.

U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Drug Evaluation and Research (CDER)

May 2015  
Biopharmaceutics

Revision 1

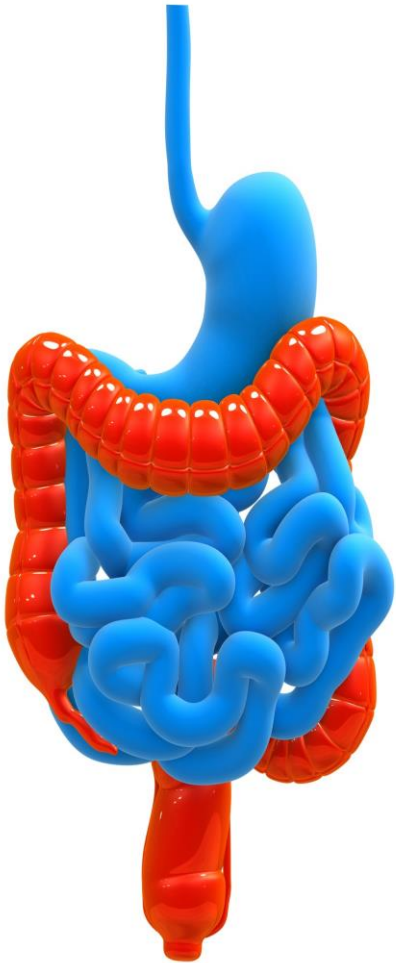
## **BCS Class 3 Drugs**

Low Permeability/  
High Solubility Drugs

e.g., cimetidine, metformin,  
acyclovir, fexofenadine

**Influx Transporters**

# Intestinal Drug Transporters



## ABC Superfamily

- P-glycoprotein (ABCB1)
- BCRP (ABCG2)

**Efflux**

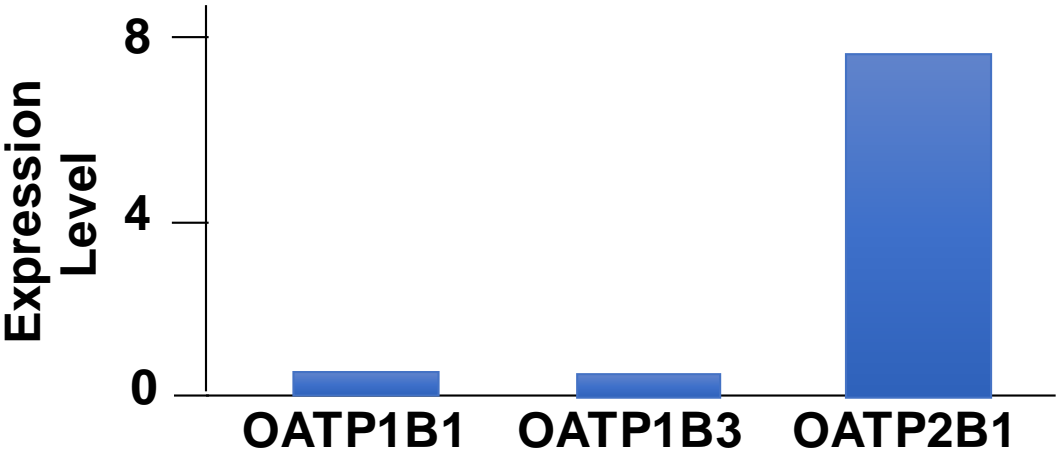
## SLC Superfamily (Solute Carrier Superfamily)

- PEPT1 (SLC15A1)
- **OATP2B1 (SLCO2B1)**
- THTR2 (SLC19A3)

**Influx**

# Organic Anion Transporting Polypeptide, OATP2B1- High Expression In Intestine

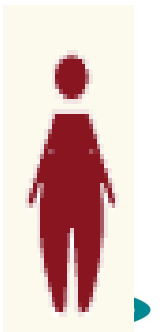
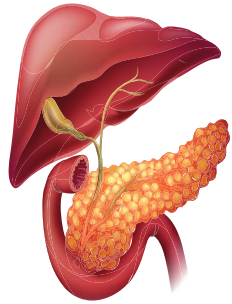
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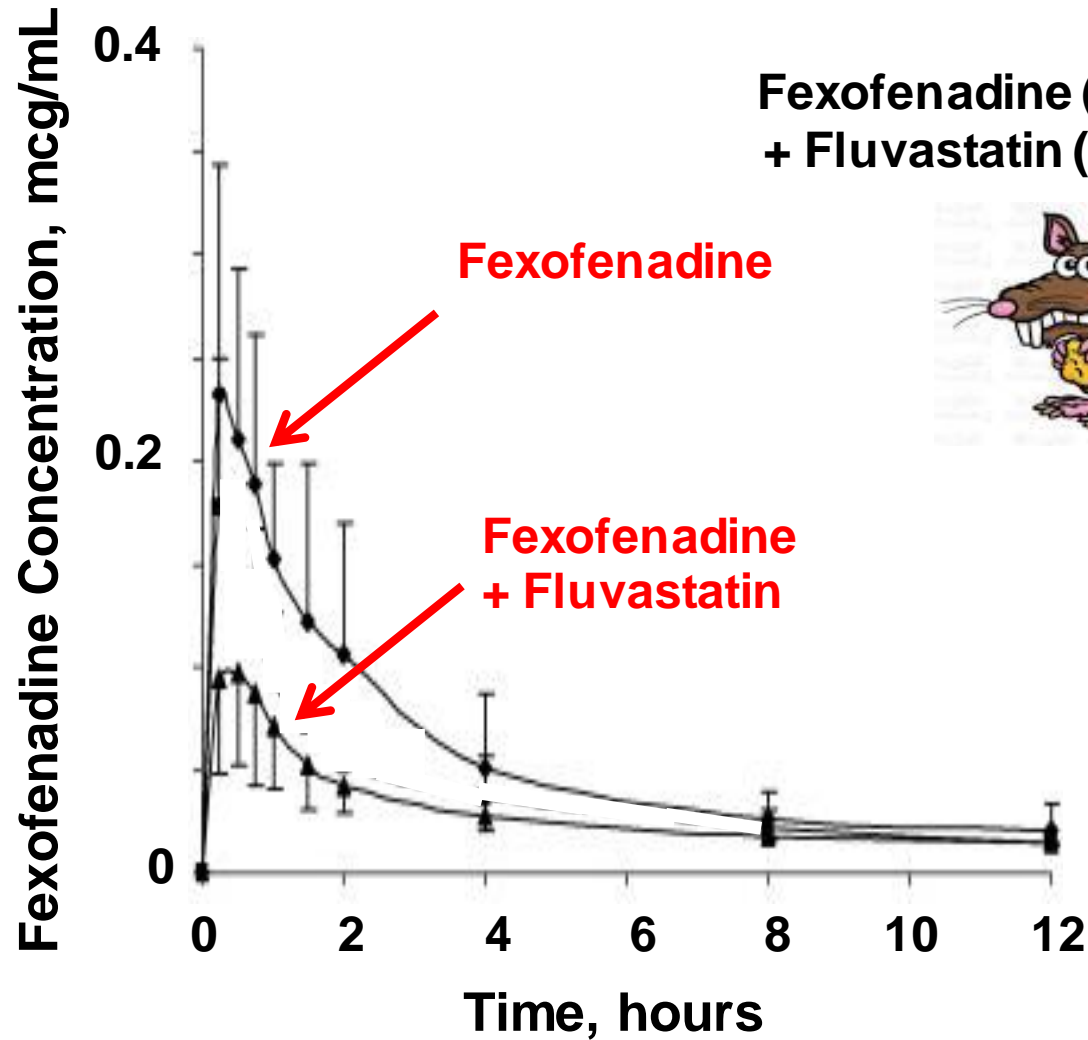
# OATP2B1 Interacts with Structurally Diverse Drugs

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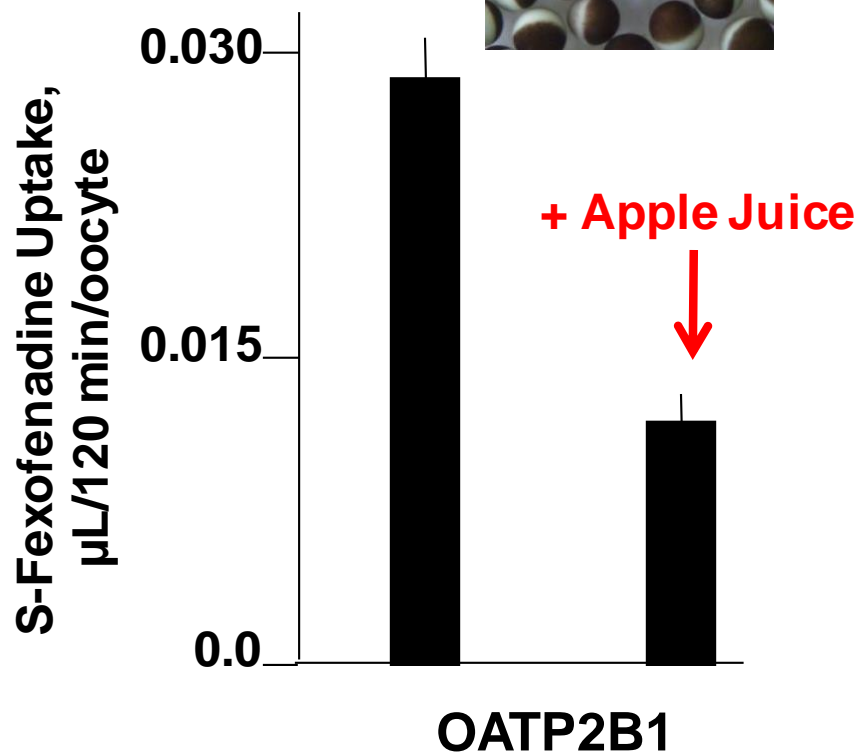
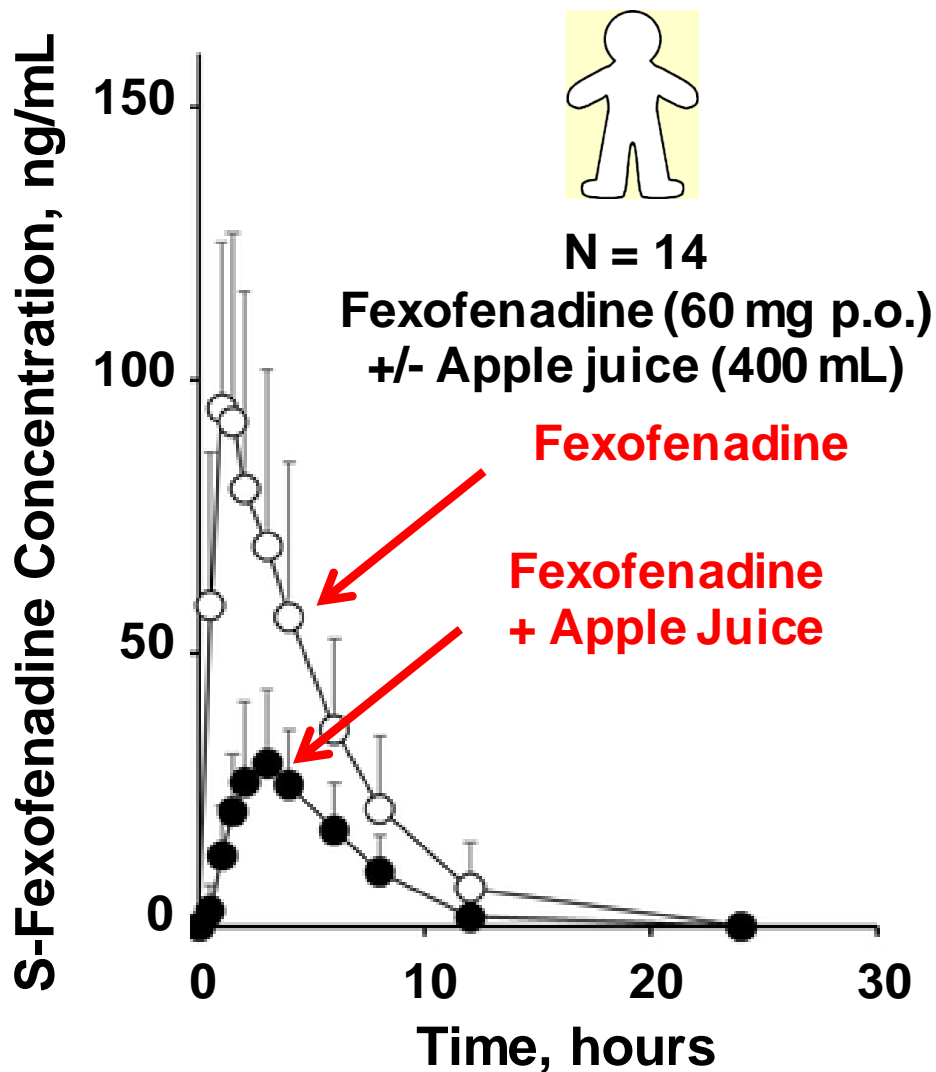
- Cardiovascular Drugs
  - Statins (fluvastatin, rosuvastatin)
  - Beta-adrenergic blocking agents (talinalol)
- Hormones (estrone-3-sulfate)
- Anti-diabetic agents (glyburide)
- Antihistamines (**fexofenadine**)



# OATPs Are Targets for Drug Drug Interactions

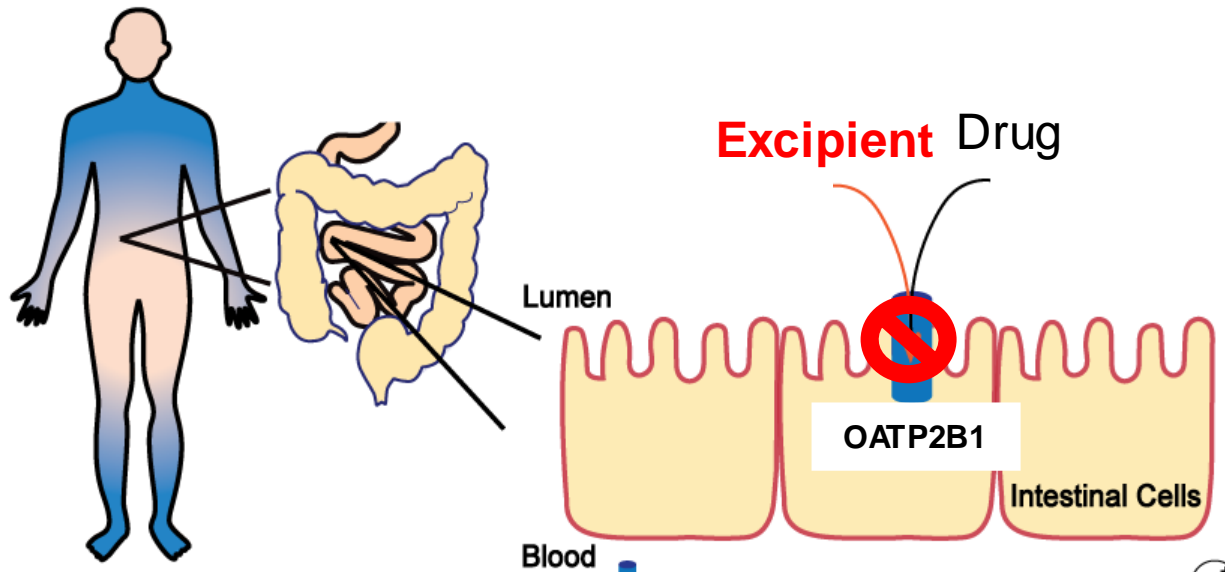


# Influence of Apple Juice on Fexofenadine Absorption



Apple Juice: phloridzin, phloretin, hesperidin, quercetin

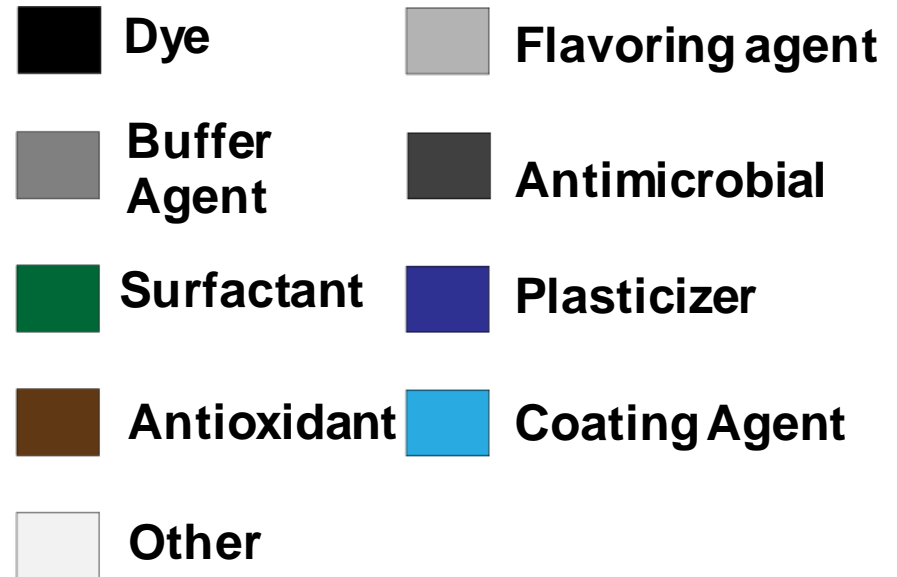
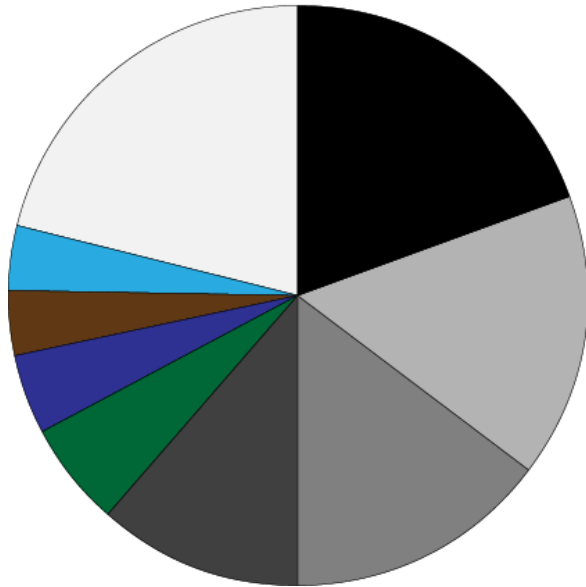
**Goal:** To determine whether **excipients** used in oral drug products can inhibit OATP2B1





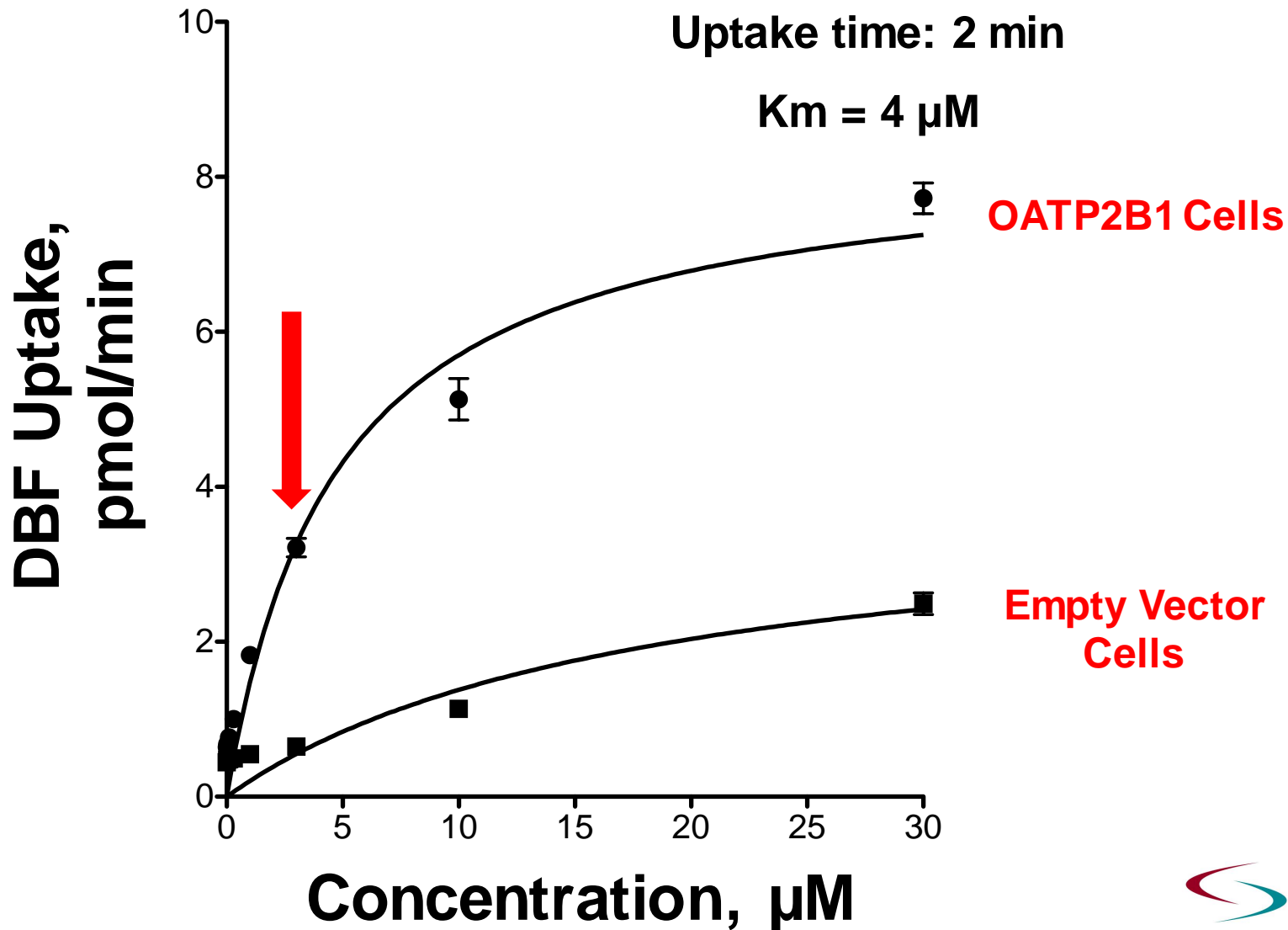
# Classification of 138 Oral Molecular Excipients

N = 138



CERSI Excipient Browser: <http://excipients.ucsf.bkslab.org/>

# Characterization of OATP2B1-mediated Dibromofluorescein Uptake



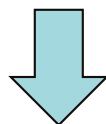
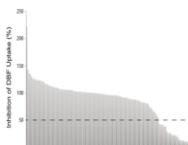
# Screen of Oral Excipients for OATP2B1 Inhibitors



**Screen 138 Oral  
Molecular Excipients**



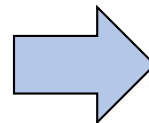
**Identified 27 Inhibitors (> 50%)**



**Conduct Aggregation Tests**

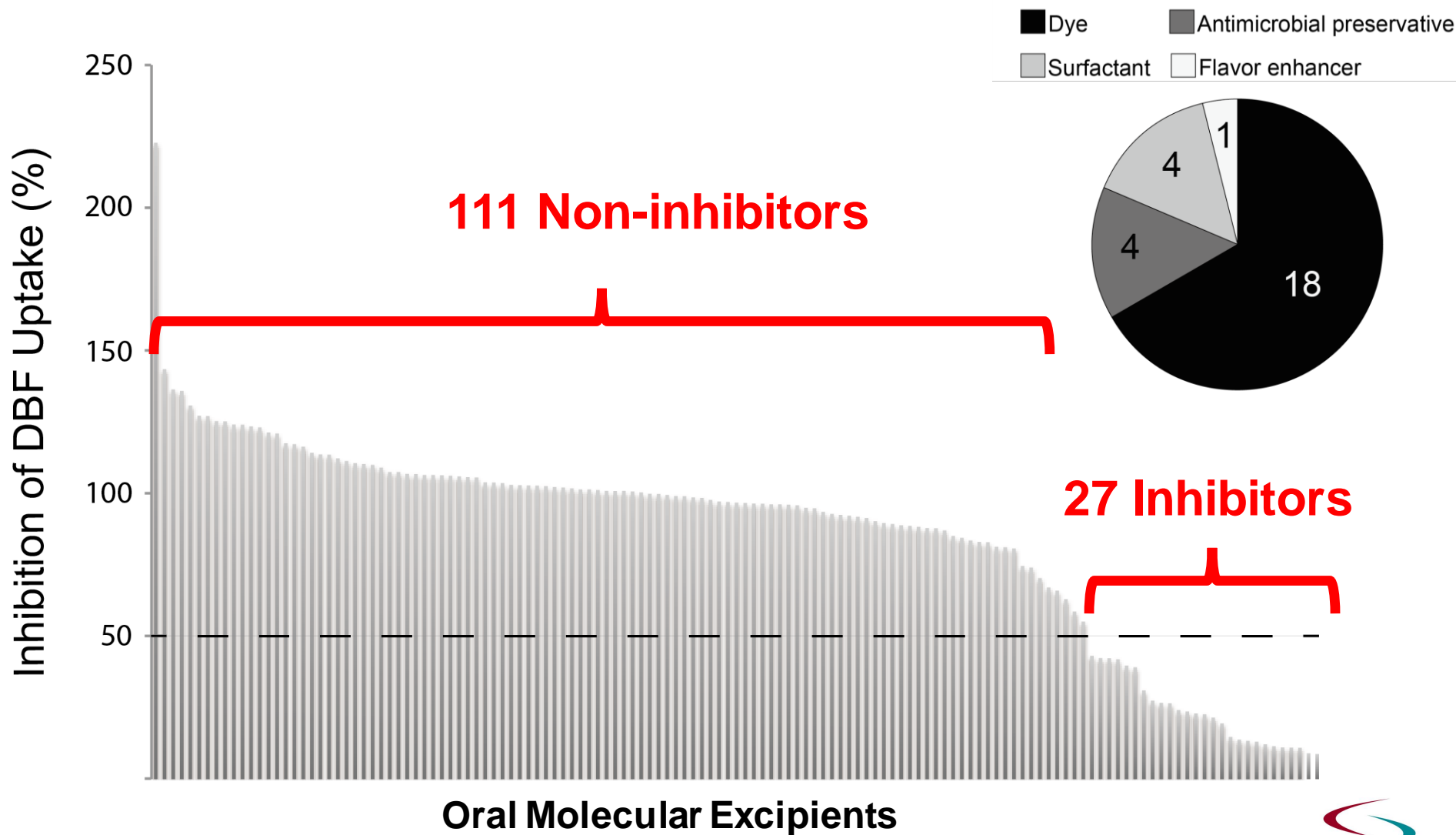


**Conduct IC<sub>50</sub> Studies**



**Potential Clinical  
Relevance**

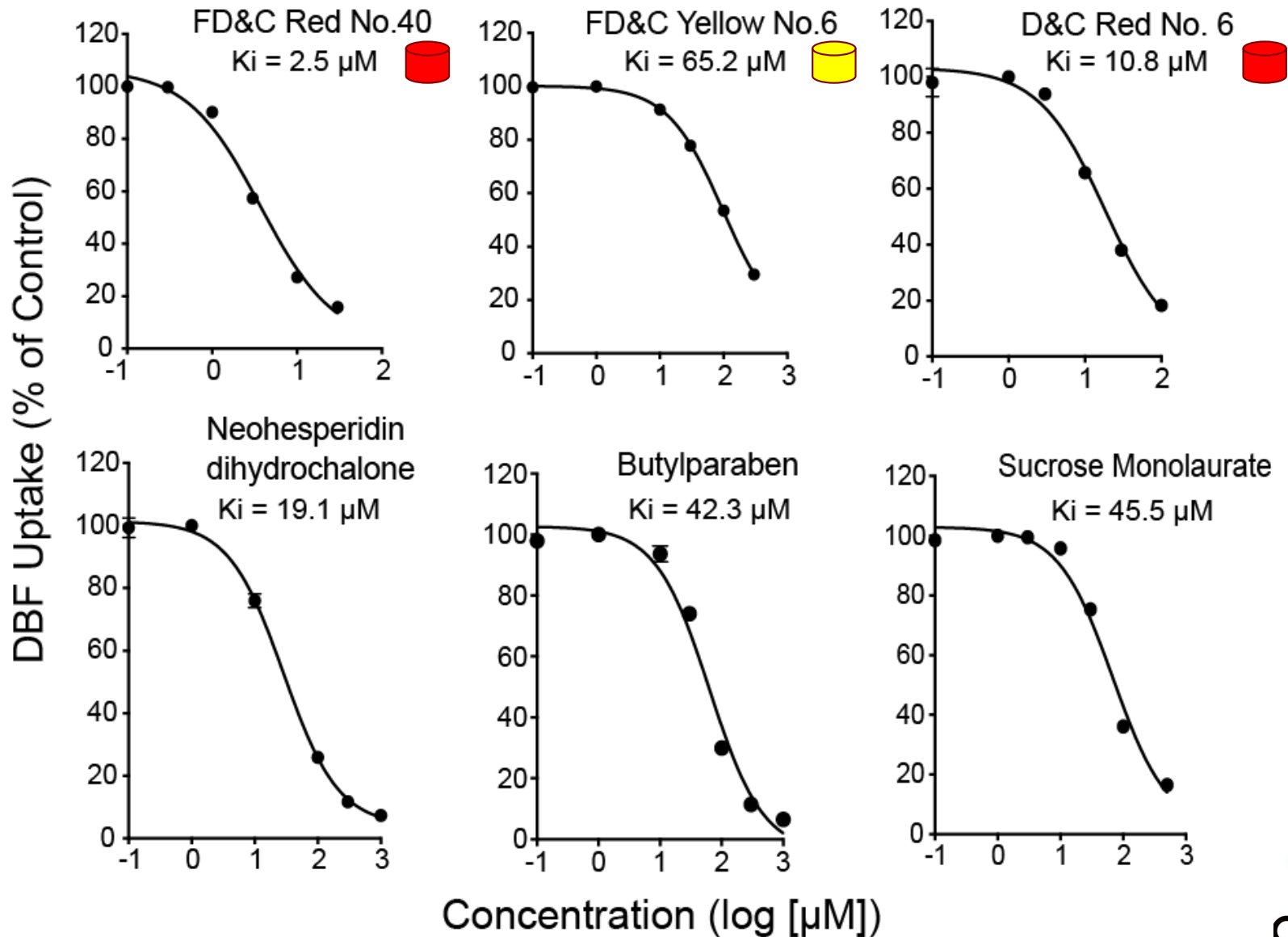
# Summary of the Inhibitory Effect of 138 Oral Molecular Excipients



DBF concentration: 2  $\mu$ M

Uptake time: 3 min

# IC<sub>50</sub> Studies of Selected Excipients Identified as OATP2B1 Inhibitors



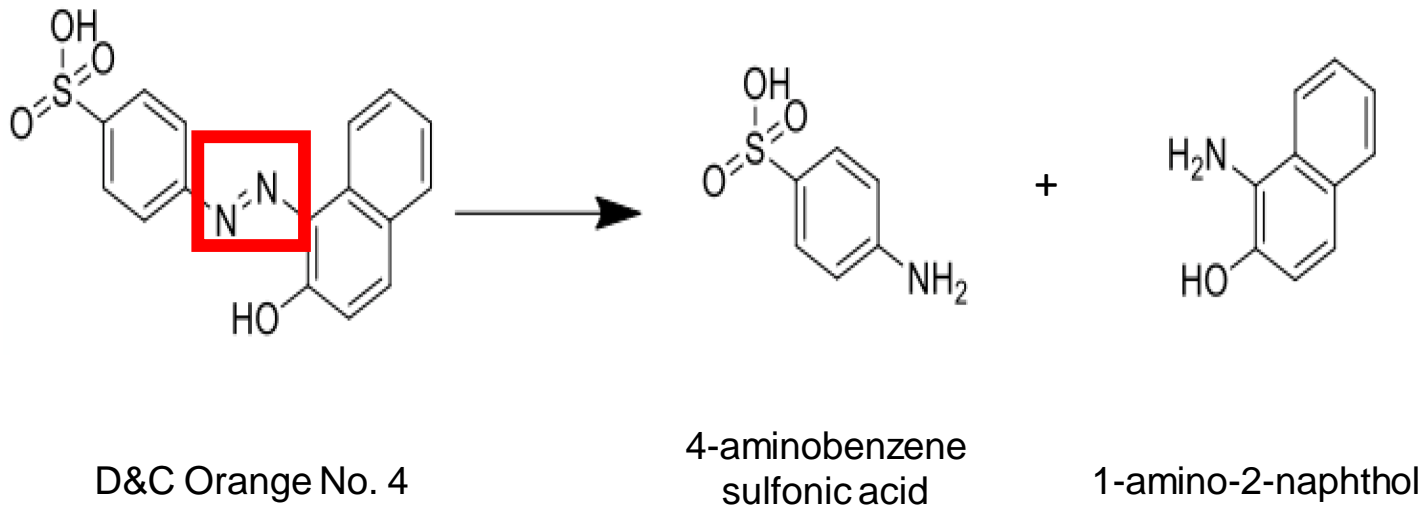
# OATP2B1 Inhibitory Potencies of Excipients:

## Dyes are most potent

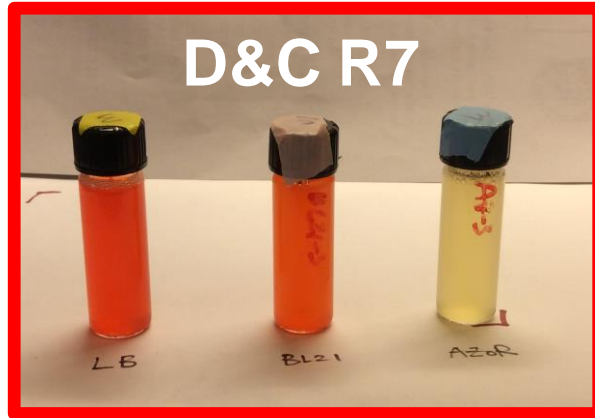
Excipient	Ki ( $\mu\text{M}$ )	Ki (95% Confidence Intervals)	Aggregation
FD&C Red No. 40	2.47	1.83 – 3.33	No Aggregation @ 500 $\mu\text{M}$
FD&C Orange No. 4	2.02	1.77 – 2.29	No Aggregation @ 100 $\mu\text{M}$
Sodium Lauryl Sulfate	1.88	1.31 – 2.72	No Aggregation @ 50 $\mu\text{M}$
FD&C Green No. 5	1.47	1.13 – 1.92	No Aggregation @ 5 $\mu\text{M}$
FD&C Red No. 28	0.96	0.62 – 1.5	No Aggregation @ 10 $\mu\text{M}$
FD&C Red No. 3	0.84	0.66 - 1.06	No Aggregation @ 500 $\mu\text{M}$
Light Green CF Yellowish	0.77	0.69 – 0.85	No Aggregation @ 200 $\mu\text{M}$
Guinea green b	0.73	0.61 – 0.87	No Aggregation @ 5 $\mu\text{M}$
D&C Red No. 27	0.73	0.43 - 1.25	No Aggregation @ 5 $\mu\text{M}$
Naphthol blue black	0.38	0.31 - 0.47	No Aggregation @ 5 $\mu\text{M}$

# Several Dyes Have Azo Bonds that are Subject to Reduction by Intestinal Bacteria

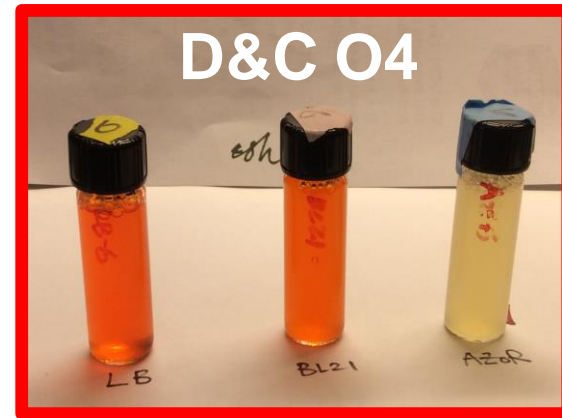
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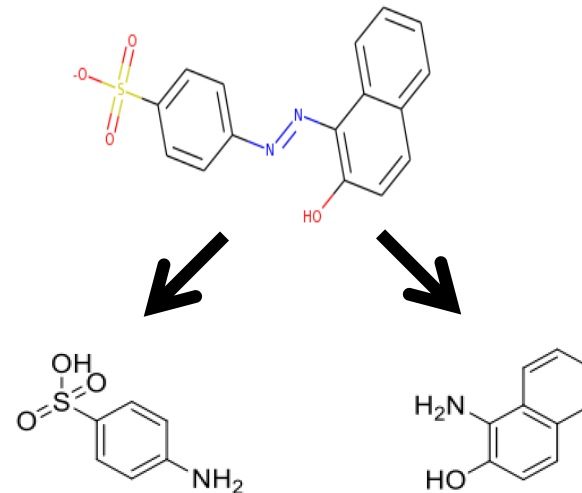
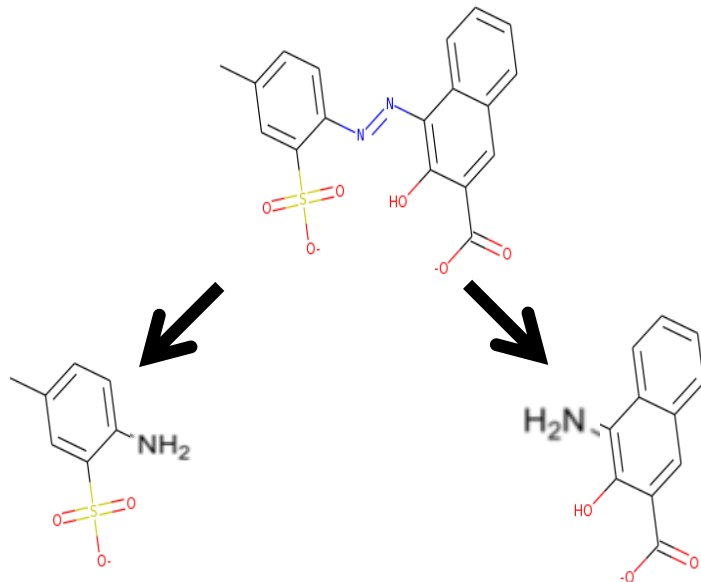
# E. Coli Transformed with *AzoR* Reduce Dyes 48 Hours After Incubation



Broth E.Coli E.Coli  
AzoR

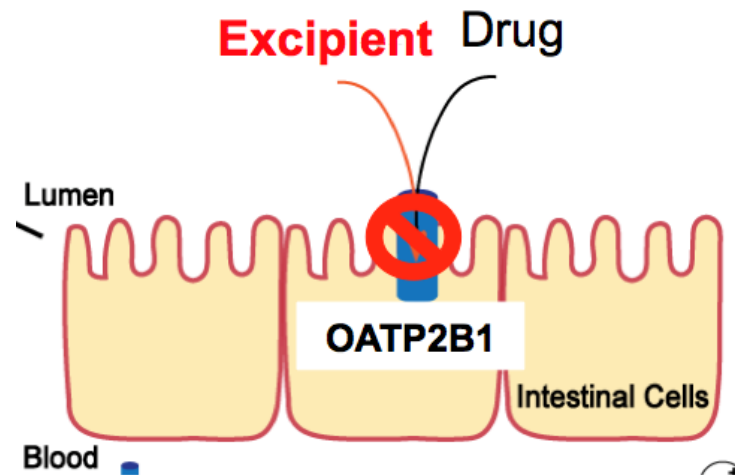


Broth E.Coli E.Coli  
AzoR

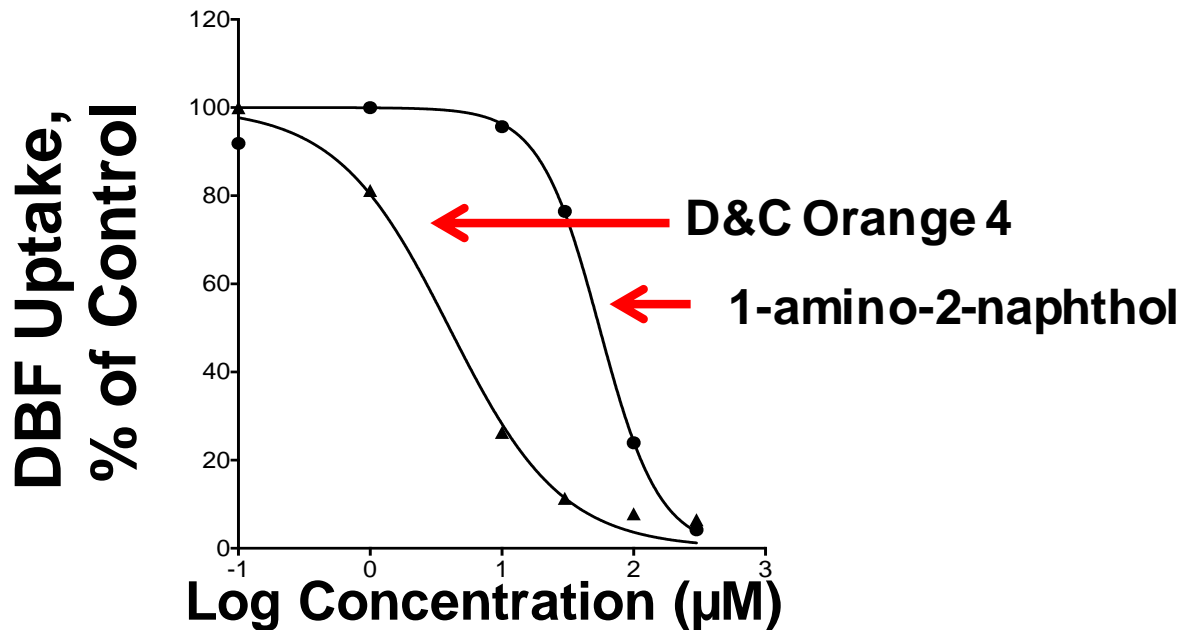
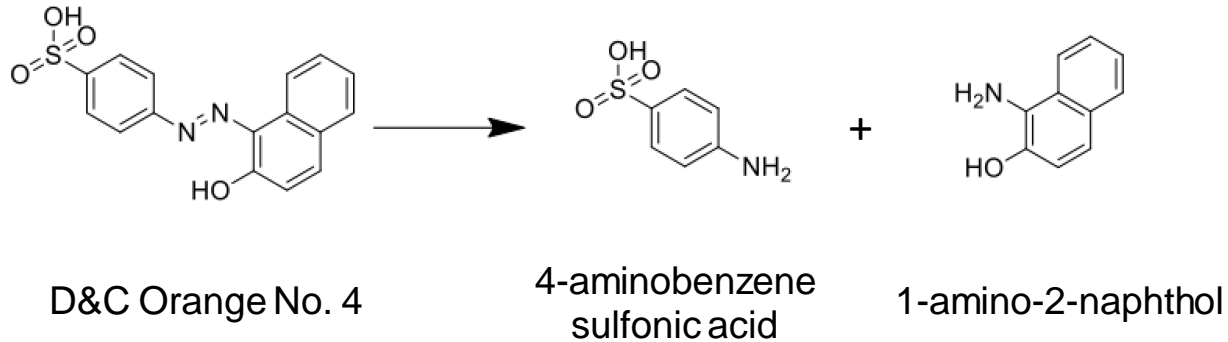




# Do the reduced metabolites inhibit OATP2B1?



# D&C Orange No. 4 is a More Potent Inhibitor of OATP2B1 than Its Reduced Metabolites



# Ki Values for Inhibition of OATP2B1 is Much Higher for the Reduced Metabolites

Excipient	K <sub>i</sub> (μM)	K <sub>i</sub> (μM)	
		Metabolite 1	Metabolite 2
FD&C Yellow No. 6	65.2	> 200	> 200
D&C Red No. 33	55.4	> 50	> 200
D&C Red No.7	10.8	> 200	> 200
D&C Brown No.1	3.0	> 200	> 200
FD&C Red No.40	2.5	> 50	> 200
D&C Orange No. 4	2.0	> 200	62.5



**Bacteria in Intestine  
May Reduce the Dyes  
and**

**Inactivate Dyes as  
Inhibitors of OATP2B1**

# Potential *In Vivo* Relevance

$$\text{Estimated Maximum Intestinal Concentration} = \frac{\text{Maximum Allowable Amount}}{250 \text{ mL}}$$

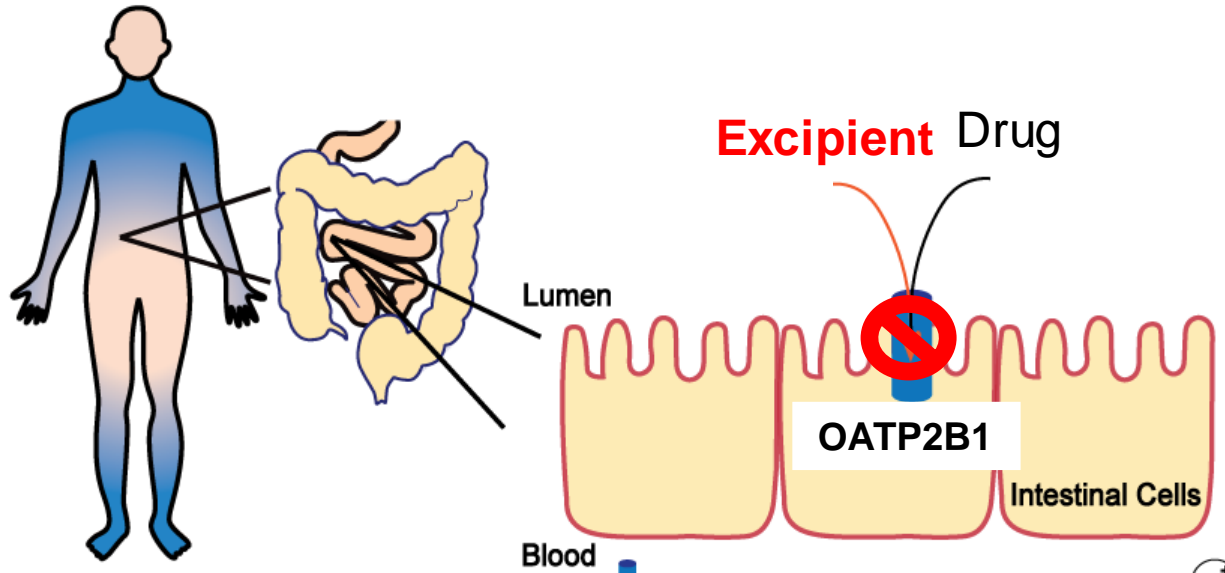
<b>Excipient</b>	<b>Max Amount</b>	<b>Predicted Max. Gut Con. (<math>\mu\text{M}</math>)</b>	<b><math>K_i</math> (<math>\mu\text{M}</math>)</b>
FD&C Red No. 40	7 mg*	3950	2.3

\* Acceptable Daily Intake (ADI), Data from WHO

# Max amount used as surfactant in beverage, CFR 21

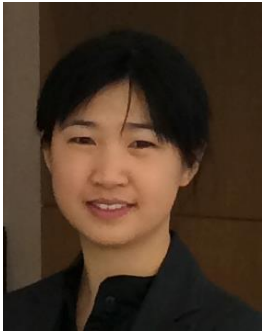
# Conclusions

- 27 excipients inhibit OATP2B1, and 111 were deemed “non-inhibitors.”
- Some excipients are predicted to inhibit OATP2B1 at allowable intestinal concentrations.
- Excipients with azo bonds may be reduced by intestinal bacteria and the reduced products are weaker inhibitors of OATP2B1.
- The  $K_i$  values of excipients will be posted on the CERSI Excipient Browser: <http://excipients.ucsf.bkslab.org/>.



# Acknowledgements

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