

Dissolution Methodologies

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Properties important for Lung Delivery Performance

- Pulmonary deposited dose
- Regional deposition (central to peripheral)
- Pulmonary residence time

Factors important for long Residence Time

Dissolution/Interaction with Lung tissue

- Low Permeability/Interaction with membranes
- Lysosome trapping,
- Ester formation
- **Dissolution rate**

} Not formulation dependent

Dissolution rate is relevant for defined **lipophilic drugs** for which **dissolution is affecting absorption rate**

(Fluticasone propionate, mometasone furoate/propionate, budesonide,)

Methods

1: Sample Preparation

- DUSA (full range of particles),
- Sedimentation approach: Dry powder Chamber (Vitrocell)
- Cascade Impactor (defined stage(s))
- **Fine Particle Dose**
 - Modified Cascade impactors (Price)
 - Abbreviated systems (May, Sakagami)
- **Anatomical Throat** (ex-throat dose)
 - FPD and ex-throat approach is the most relevant

2: Dissolution Test

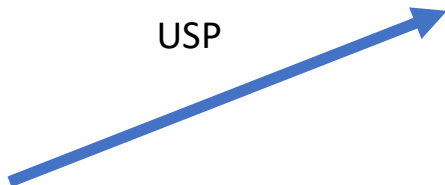
- Systems without controlled membrane diffusion
 - USP II and IV, V
- Systems Including diffusion step(biomimetic)
 - Transwell system/Franz cell (
 - Dissolve it[®] system (Gerde et al., ASSAY and Drug Develop. Technol., 2017)

Method Overview

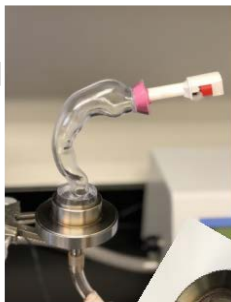
NGI



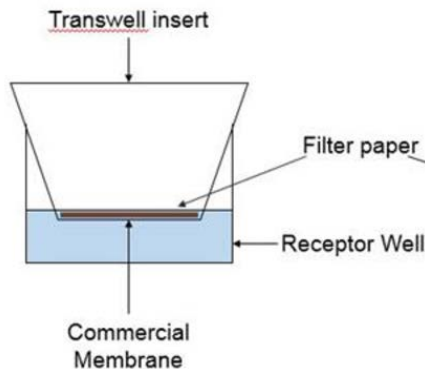
USP



Anatomical
Throat
(VCU)



Transwell®
Volume limited



Two step process

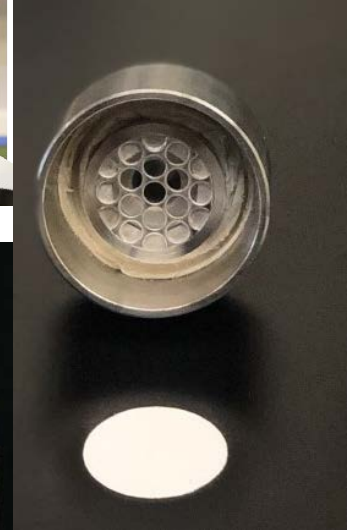
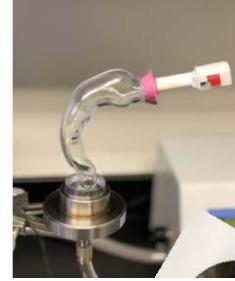
Solvent strength?
Volumes?

- Donor,
- Receptor
- Sampling?

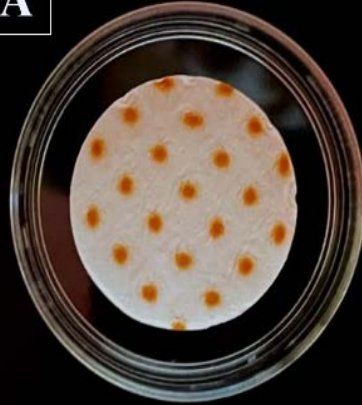
Challenge: Dose Effect



Sample Preparation



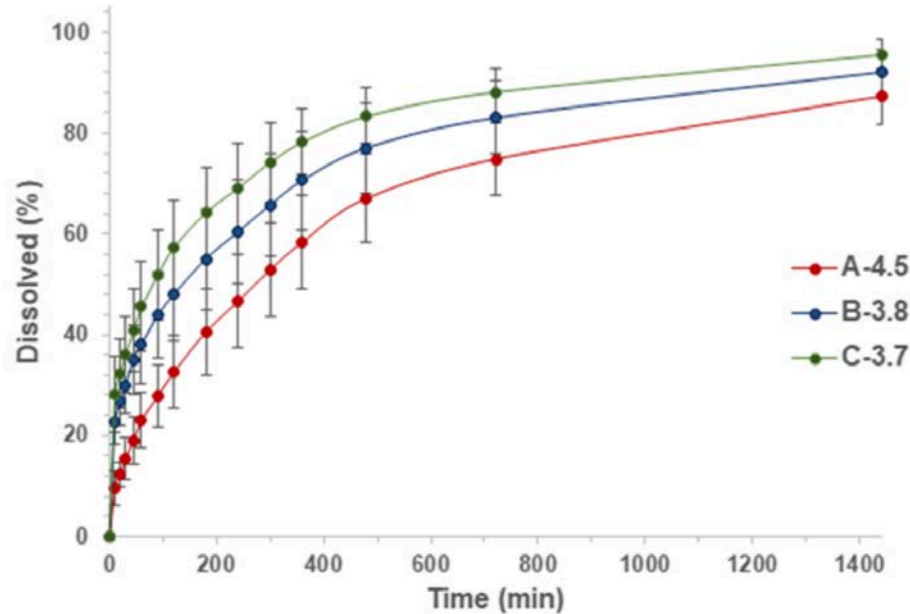
A



B



Result: FP-DPI formulation



0.5% Tween[®]

Donor volume: 0.58 ml

Receptor volume: 1.5 ml

Sampling volume: 0.5 ml

Optimum Conditions?

Simulations for further Optimizing System

- Cascade impactor data for particle size distribution
- Nernst-Brunner equation for dissolution

$$\frac{dX(i)}{dt} = \frac{-D * SA_i t}{r_i t} * (C_s - \frac{X_d}{V_d})$$

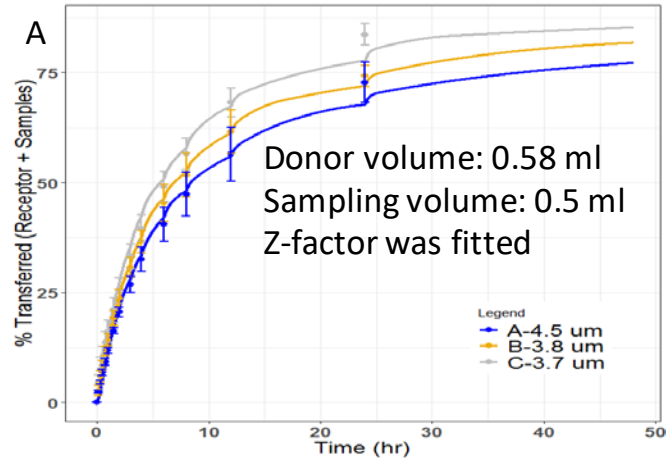
- Fick's law for dissolution

$$\frac{dXd}{dt} = -P * SM * \left(\frac{X_d}{V_d} - \frac{Y}{V_r} \right)$$

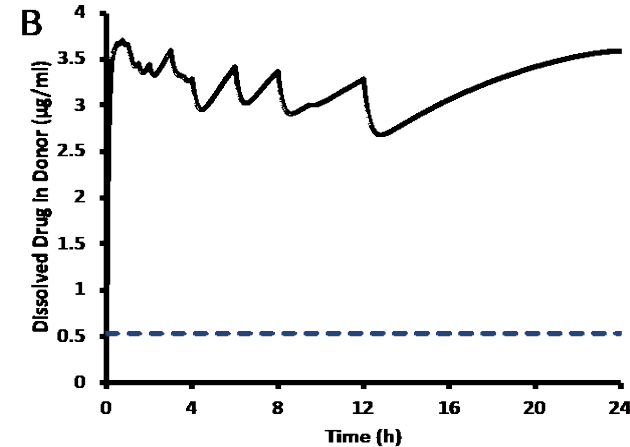
- Considering donor, receptor, sampling volume

Applying Simulations to three experimental DPI Formulations

Dissolution profile



Drug Concentration in Donor for formulation B-3.8 μm

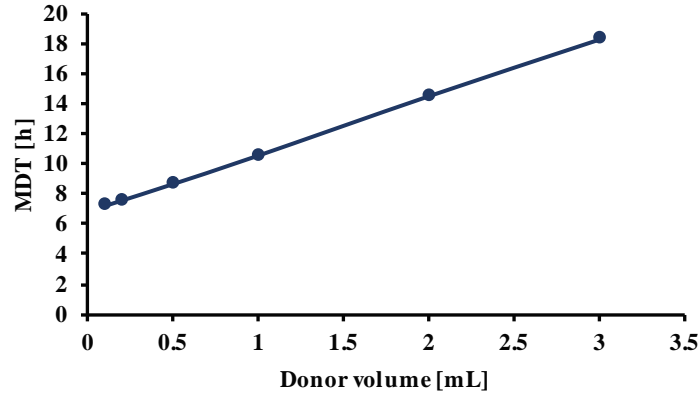


Rel. Diameter: 1 : 1.2 : 1.5

Rel. MMAD: 1 : 1.0 : 1.2

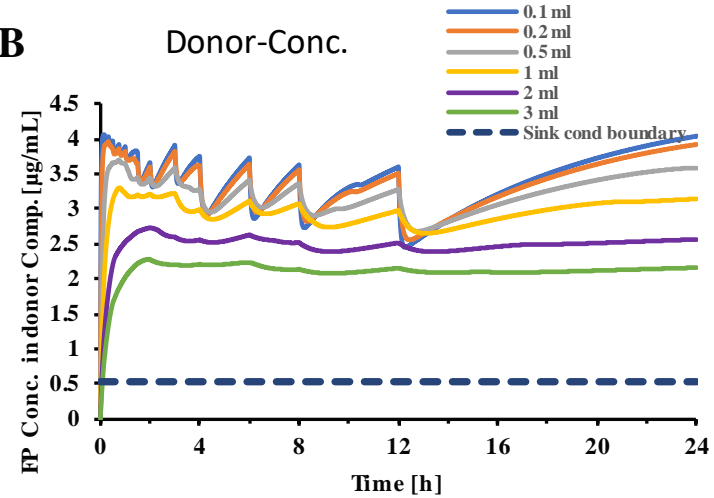
Simulations: Donor Volume

A

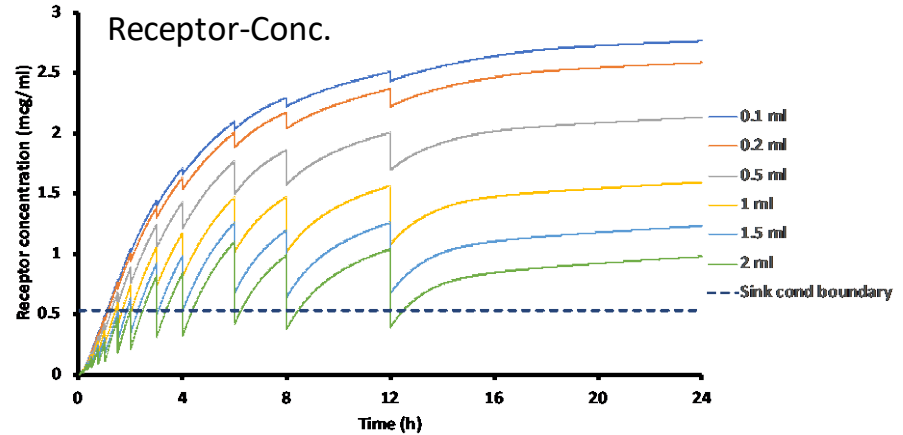


Donor volume increase: slight decrease in donor conc.
Increase in MDT because of reduced conc. Gradient

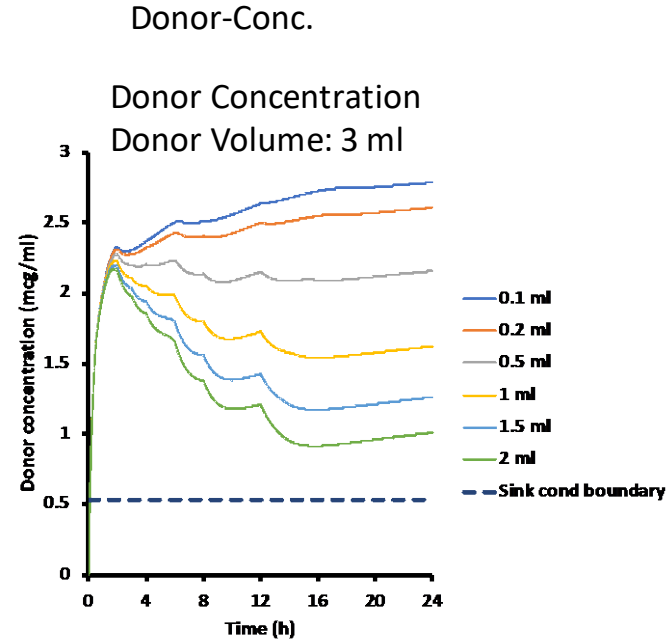
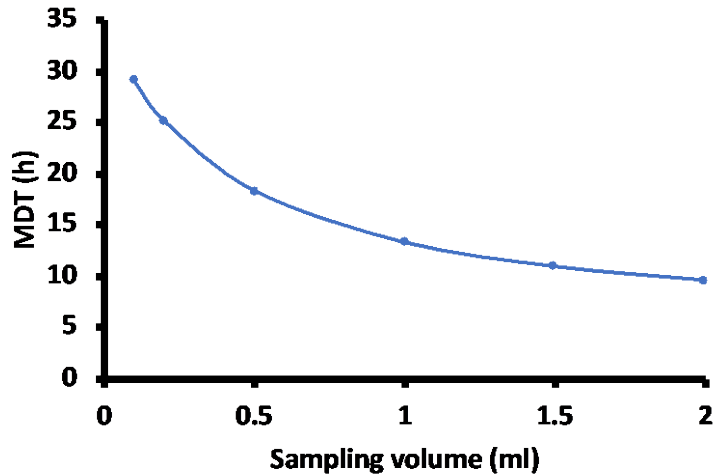
B



C



Simulations: Sampling Volume

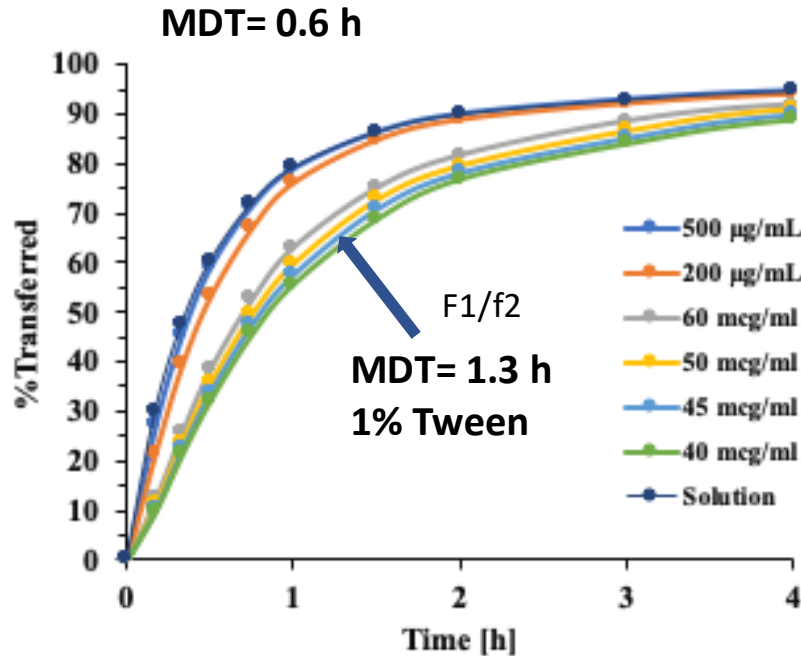


Sampling volume: Decrease in MDT, because of more pronounced concentration gradient
Further **decrease in donor concentrations**.

Increase in donor volume (**3 ml vs 0.58 ml**) and sampling volume (**2 ml vs 0.5 ml**) provide **close to sink conditions**.

Dissolution Medium? –

1: Compare: API (FP) in solution vs particles (4 μm):



For FP:
1% SDS
5% Tween

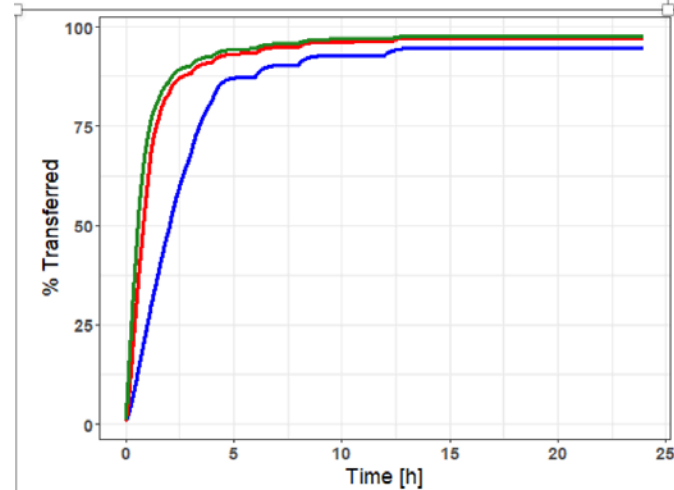
For Budesonide:
PBS, no surfactant

Dissolution Medium: Size Resolution

2. NGI stages: 2 ($8\ \mu\text{m}$), 4 ($1.66\ \mu\text{m}$), 6 ($0.55\ \mu\text{m}$)

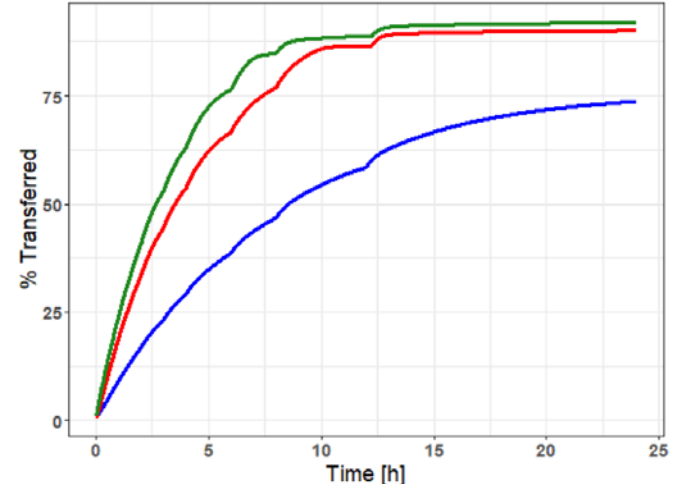
Stage 2, 4, and 6 (NGI)

Solubility: $20\ \mu\text{g}/\text{ml}$ - 0.5% SDS



Stage 2, 4, and 6 (NGI)

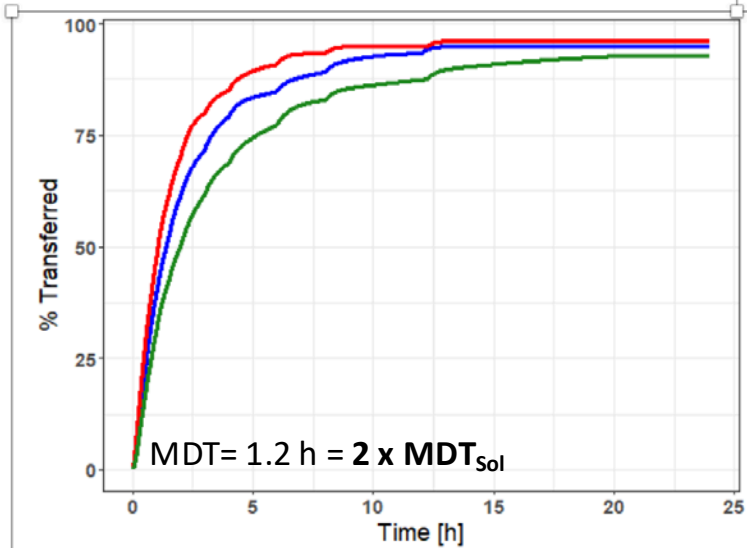
Solubility: $5\ \mu\text{g}/\text{ml}$ - 0.5% Tween



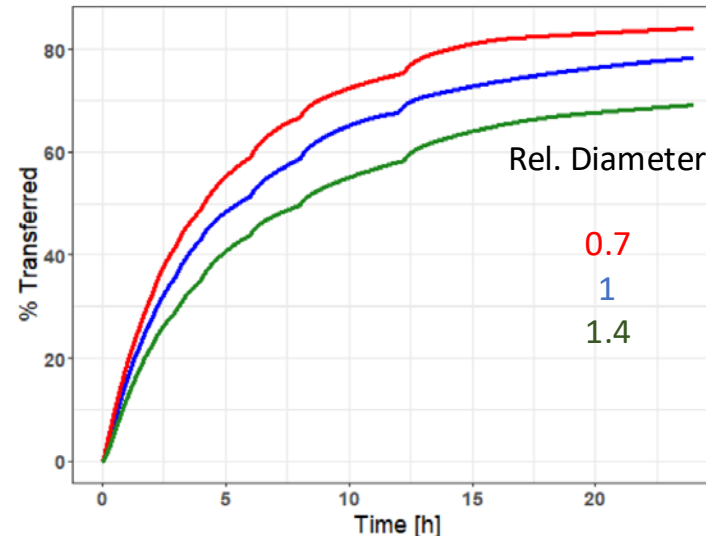
$\text{MDT} = 5\ \text{h} \approx 10 \times \text{MDT}_{\text{sol}}$ Sol: $5\ \mu\text{g}/\text{ml}$

Simulations: Size resolution

Solubility: 20 $\mu\text{g/ml}$ - 0.5% SDS

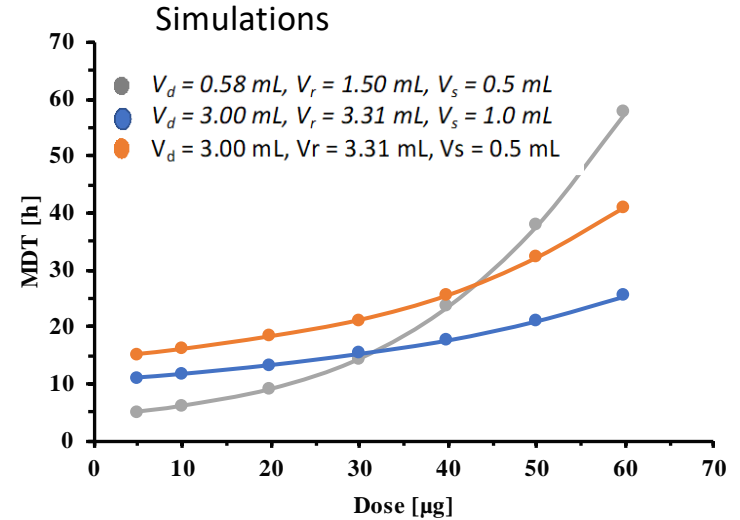
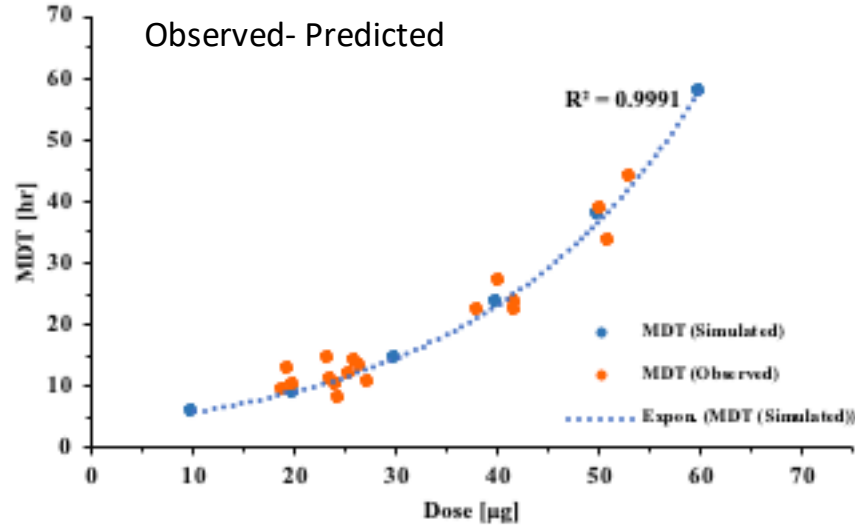


Solubility: 5 $\mu\text{g/ml}$ 0.5% Tween



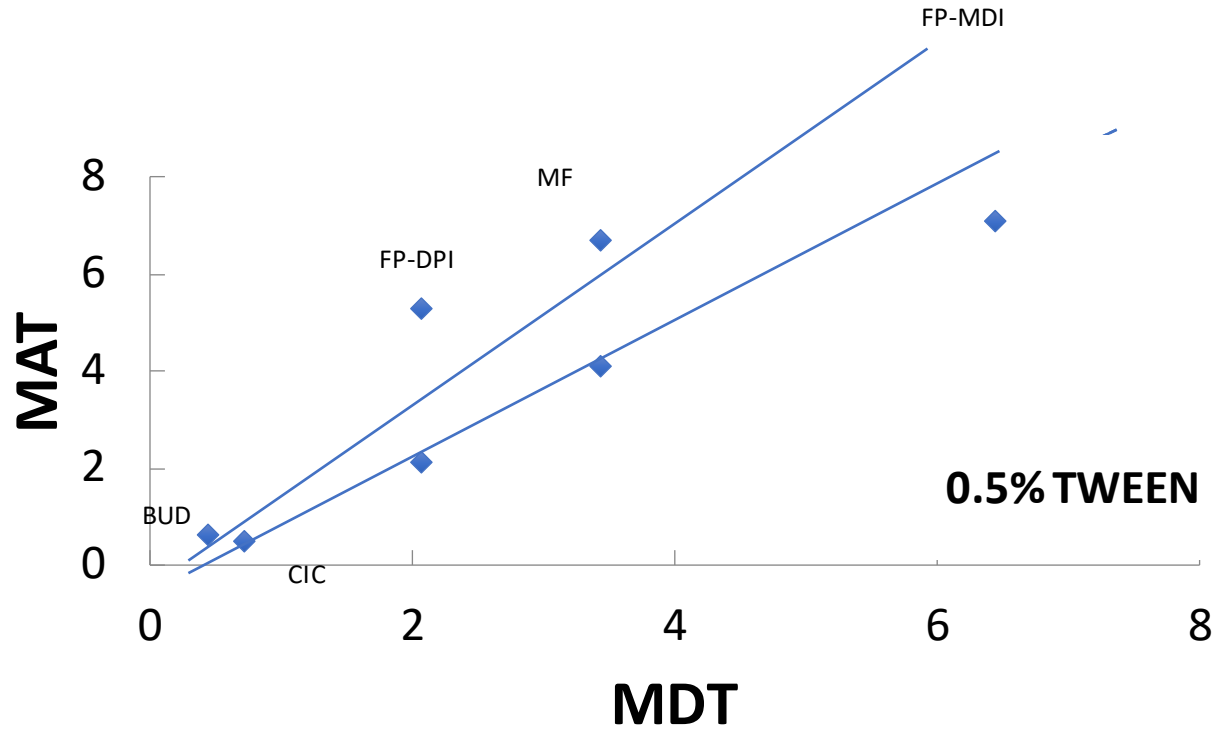
MDT = 7h = 10 x MDT_{Sol}; Solubility : 5 $\mu\text{g/ml}$

“Dose Effect” for experimental FP-DPI



Dose effect can be reduced: Donor: 3 ml
Sampling: 1-2 ml

Correlation between MDT and MAT

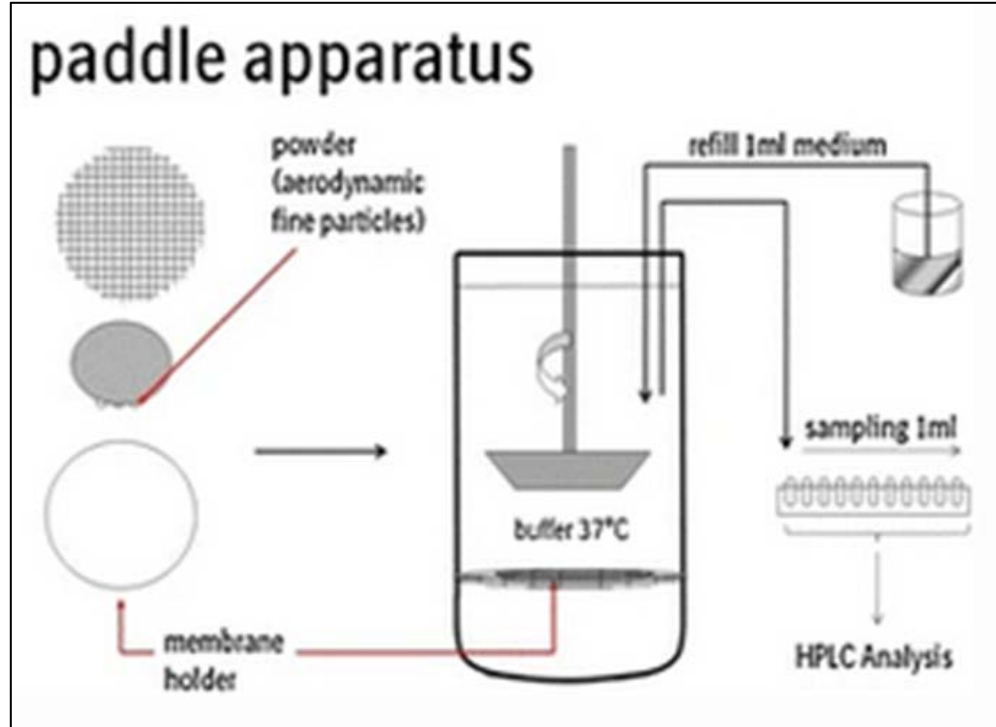


Correlation between MDT and MAT seems to exist

Summary: Transwell®

- More complex system
- Select solvent that provides MDT that is 2-**10** times longer than MTR of a solution (solubility of about 5 µg/ml)
- Use of a larger donor (3 ml) and sample volumes (2 ml) will provide close to sink conditions (FP)
- Under these conditions, “dose effect” is almost gone.

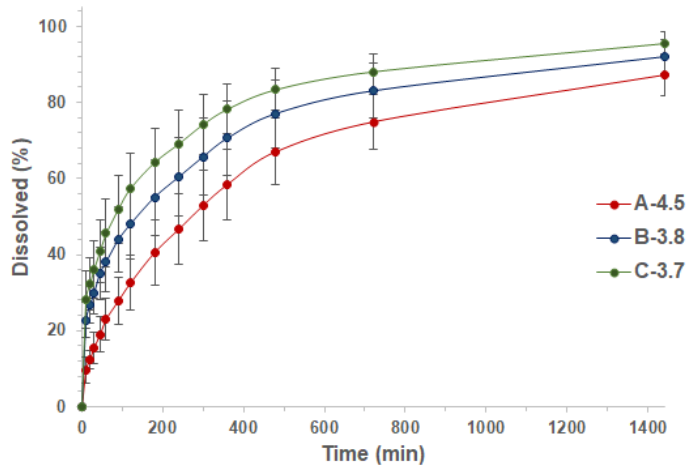
USP-Paddle over disc



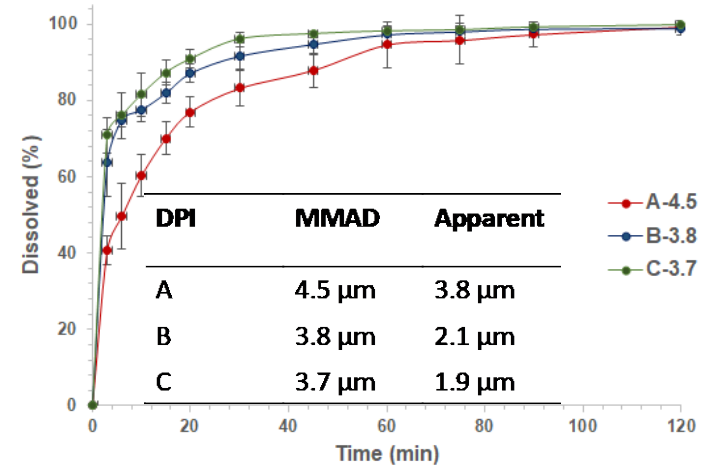
600 mL
0.5% Tween 80
80 RPM
37°C
2.5 cm

USP- Paddle over Disc vs Transwell®: 3 DPI formulations that only differ in lactose fines.

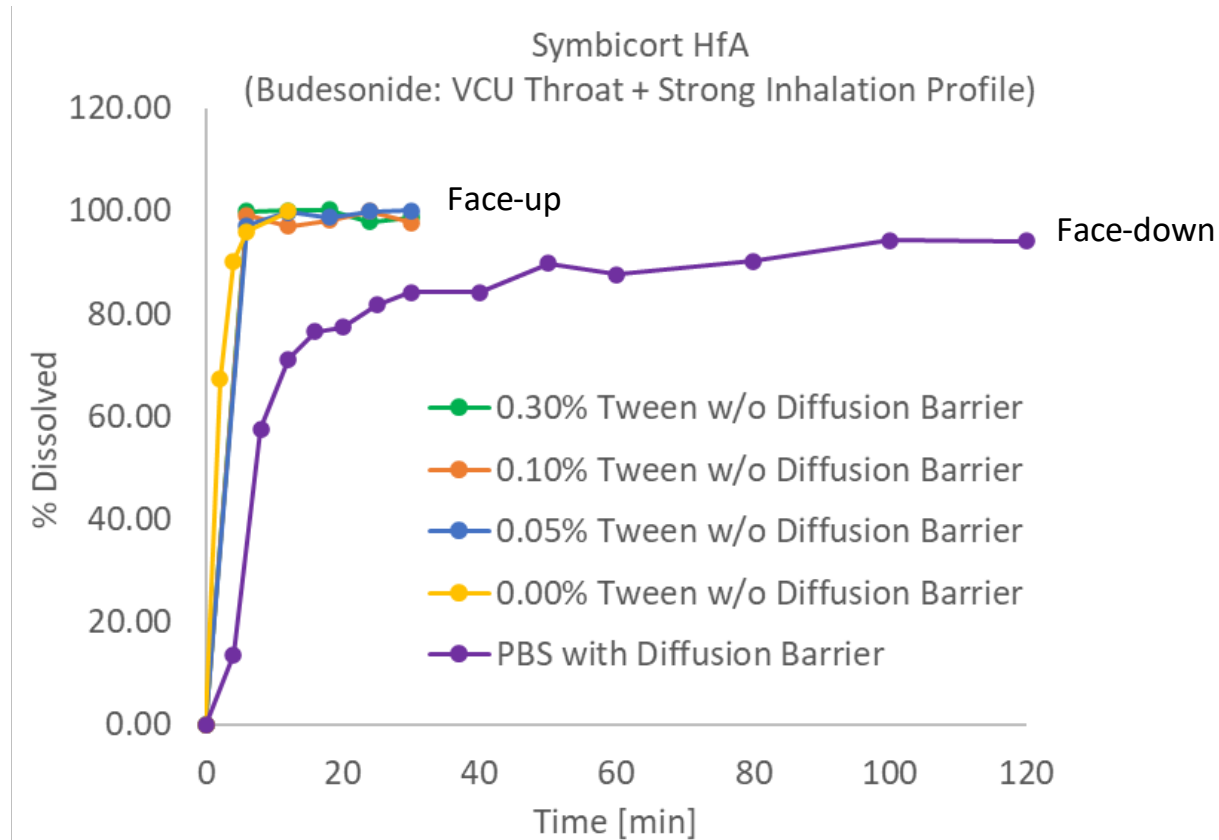
A: Transwell® System (0.5% Tween)



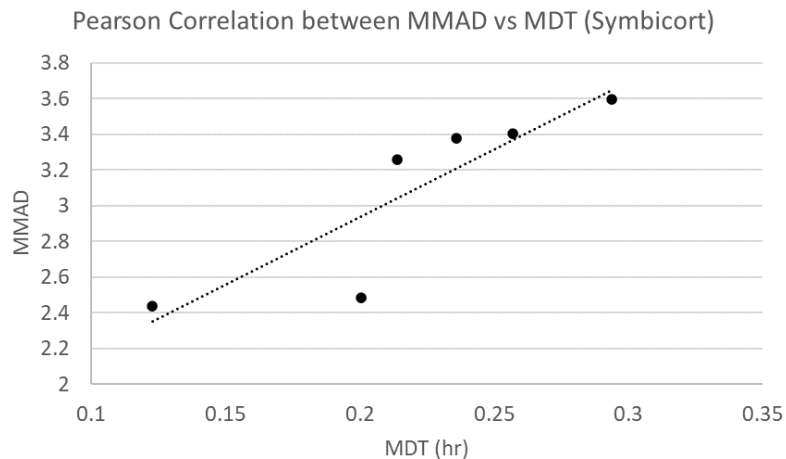
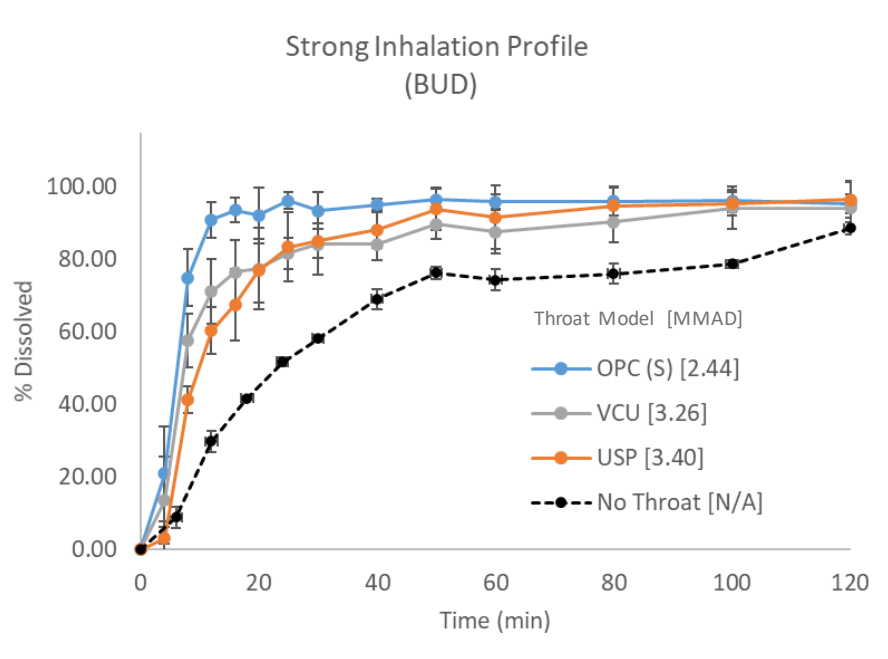
B: USP V Paddle Method (0.5% Tween), 600 ml



USP and Dissolution Media: Budesonide



Once optimized: high resolution power



Conclusion

- After proper optimization: USP and Transwell® system are robust and provide high resolution
- USP is less time consuming.
- Transwell® closer to in-vivo situation
- Good in vitro-in vivo correlation
- In vitro dissolution provides important information for PBPK.

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