

# In-Vivo Flux: A Breakthrough in IVIVC of Topical Dermatological Formulations

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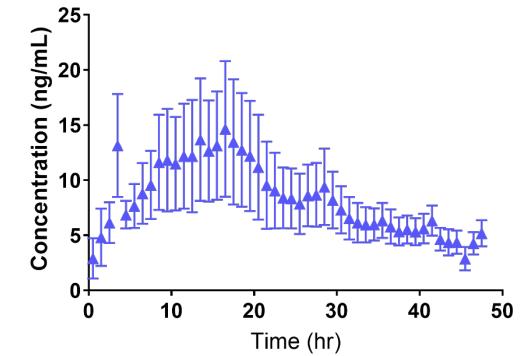
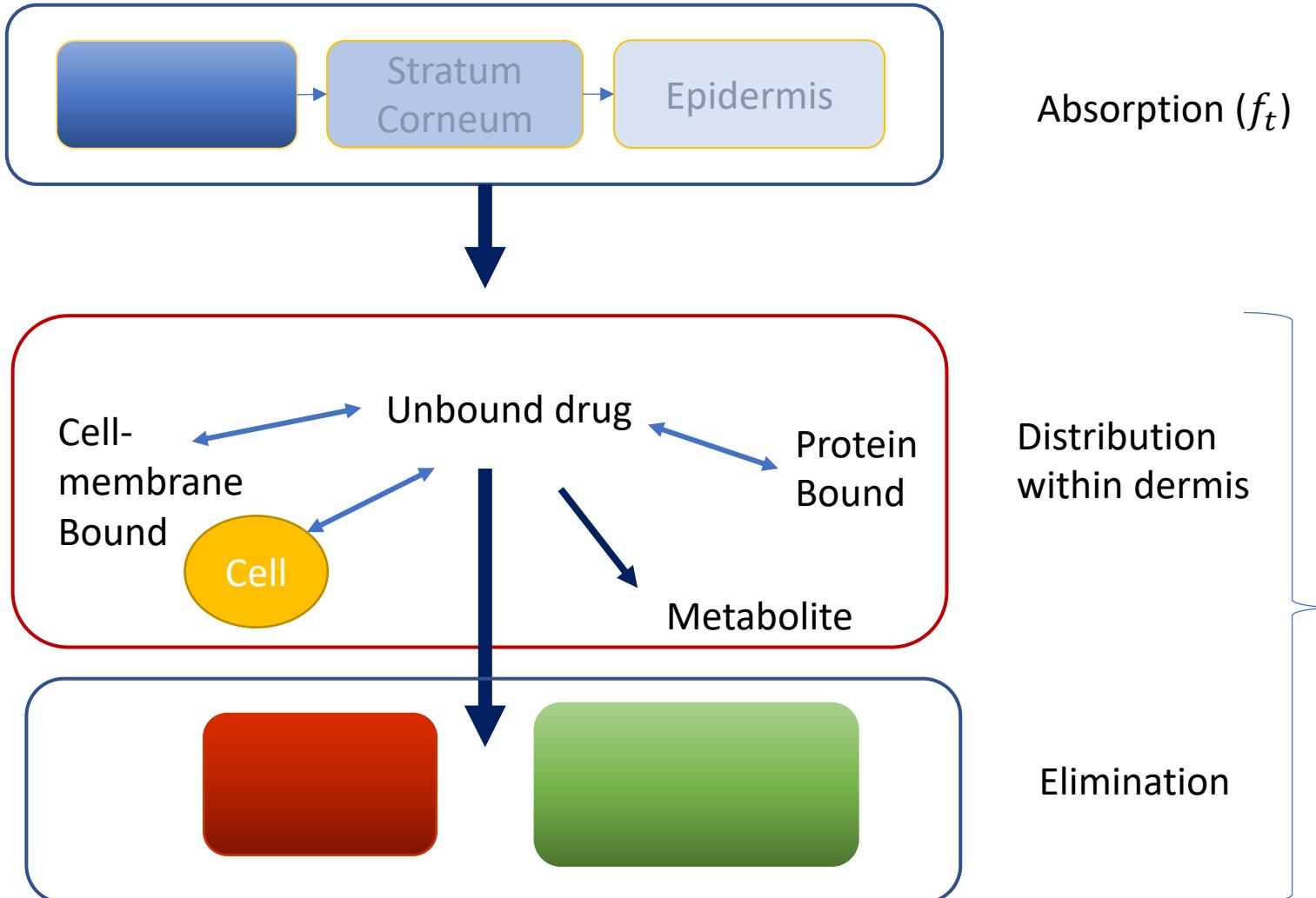
# Disclaimer

- The views and opinions presented here represent those of the speaker and should not be considered to represent advice or guidance on behalf of the U.S. Food and Drug Administration.

# Objectives

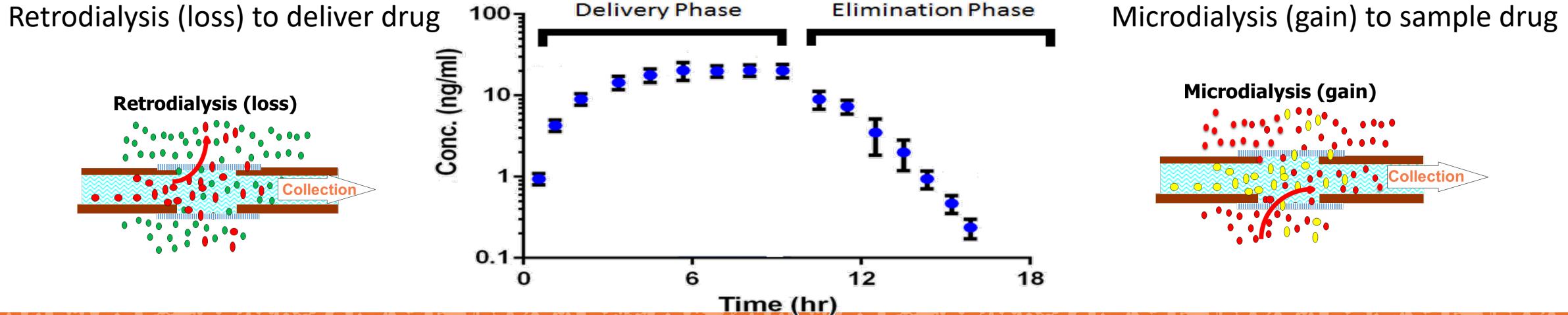
- Demonstrate the applicability of a retrodialysis/microdialysis approach to estimate the dermis unit impulse response (dUIR).
- Calculate MTZ flux and cumulative amount permeated.
- Development of IVIVR from in-vitro permeation testing data (IVPT) and dermal microdialysis (dMD) concentration data to predict dermis pharmacokinetics.

The observed dermis concentration profile results from:

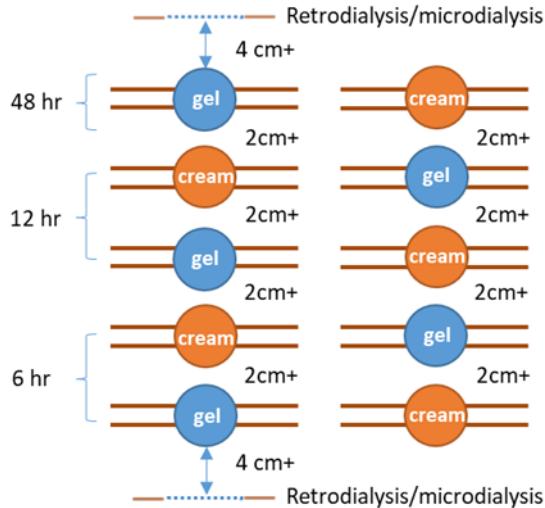


# Dermis Disposition: Unit Impulse Response (dUIR)

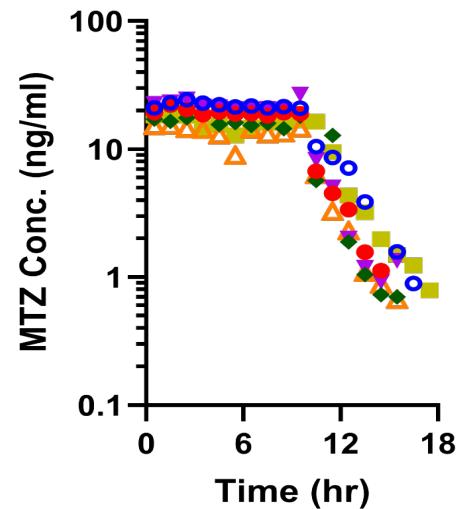
- Disposition function ( $g_t$ ) also known as “Unit Impulse Response” (UIR) is defined as:  
**The concentration deriving from the instantaneous administration of a unit amount of drug:** it accounts only for the distribution and elimination processes
- How can we give an instantaneous administration directly in dermis?
- Idea: use a retrodialysis/microdialysis approach:



# Estimation of MTZ dUIR in Yucatan mini-pig



3 x



- UIR for mono-exponential elimination:

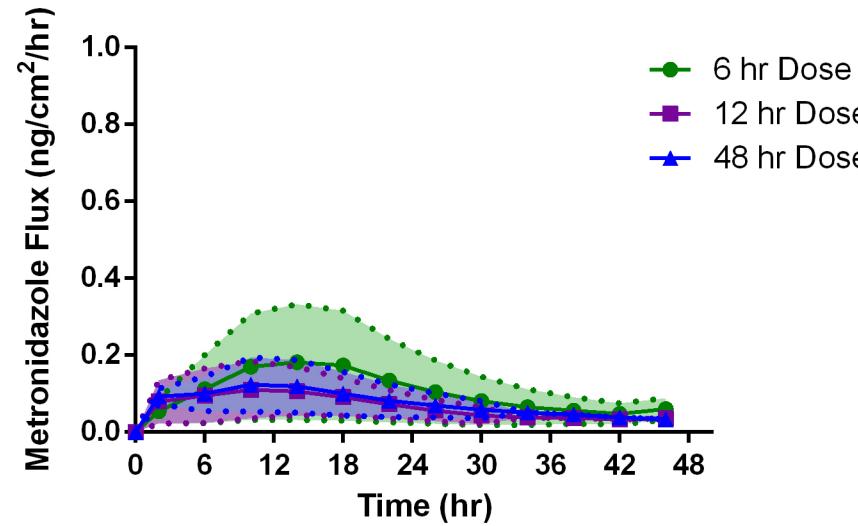
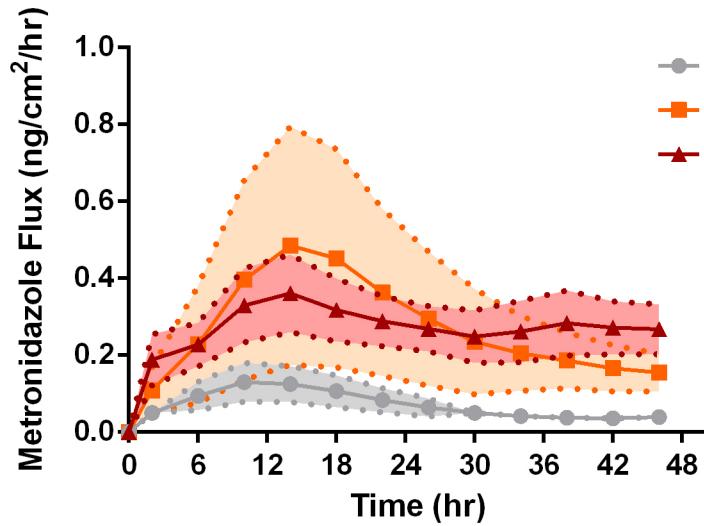
$$UIR = \frac{1}{V_d} \times e^{-k_e t}$$

- Averaged dUIR for all probes and subjects:

$$dUIR = 10.1 \times e^{-0.45t}$$

Where  $V_d$  has units of mL and  $K_e$  has units of  $hr^{-1}$

# Deconvolution<sup>[1]</sup> of Dermis Concentrations: In-vivo Flux



**CREAM:** The log transform of maximum flux [ $\text{Ln}(J_{\max})$ ] for the 6-hr dose was significantly different from the 12-hr dose ( $p=0.019$ ) and 48-hr dose ( $p=0.041$ ). The  $\text{Ln}(\text{AUC})$  for the 6-hr dose was also significantly different from the 12-hr dose ( $p=0.018$ ) and 48-hr dose ( $p=0.013$ ).

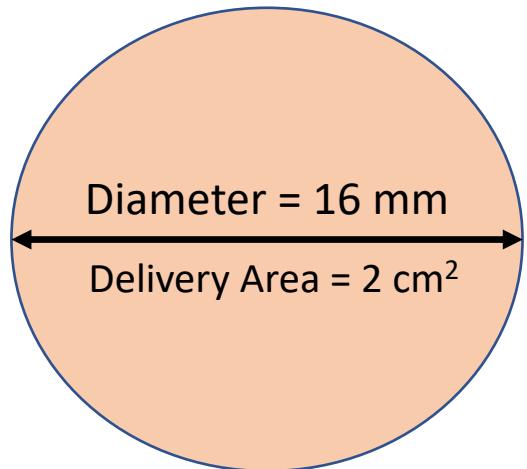
**GEL:** There was no significant difference amongst the different formulation wipe off schemes for  $\text{Ln}(J_{\max})$  ( $p>0.739$ ) and  $\text{Ln}(\text{AUC})$  ( $p>0.833$ )

**CREAM/GEL:** Comparison between the cream and the gel at the different dose schemes indicated that both  $\text{Ln}(J_{\max})$  and  $\text{Ln}(\text{AUC})$  for the 48-hr dose were significantly different,  $p=0.010$  and  $p=0.005$ , respectively; also at the 12-hr dose scheme the  $\text{Ln}(J_{\max})$  and  $\text{Ln}(\text{AUC})$  were significantly different between the formulations,  $p=0.02$  and  $p=0.02$ , respectively; whereas at the 6-hr dose scheme there was no difference between the two formulations.

[1] Numerical Deconvolution performed with Phoenix®, Certara, Princeton, NJ

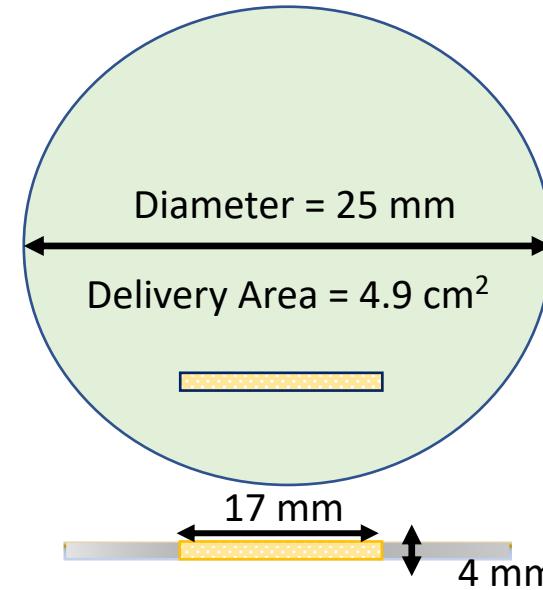
# How can we relate IVPT and dMD?

Dose applied:  $10 \text{ mg/cm}^2$



Area in contact with formulation =  $2 \text{ cm}^2$

Dose applied:  $10 \text{ mg/cm}^2$



Area on top of sampling dMD membrane =  $0.0068 \text{ cm}^2$

# Levy Plot: Non-linear Time scaling

Is time scaling required?

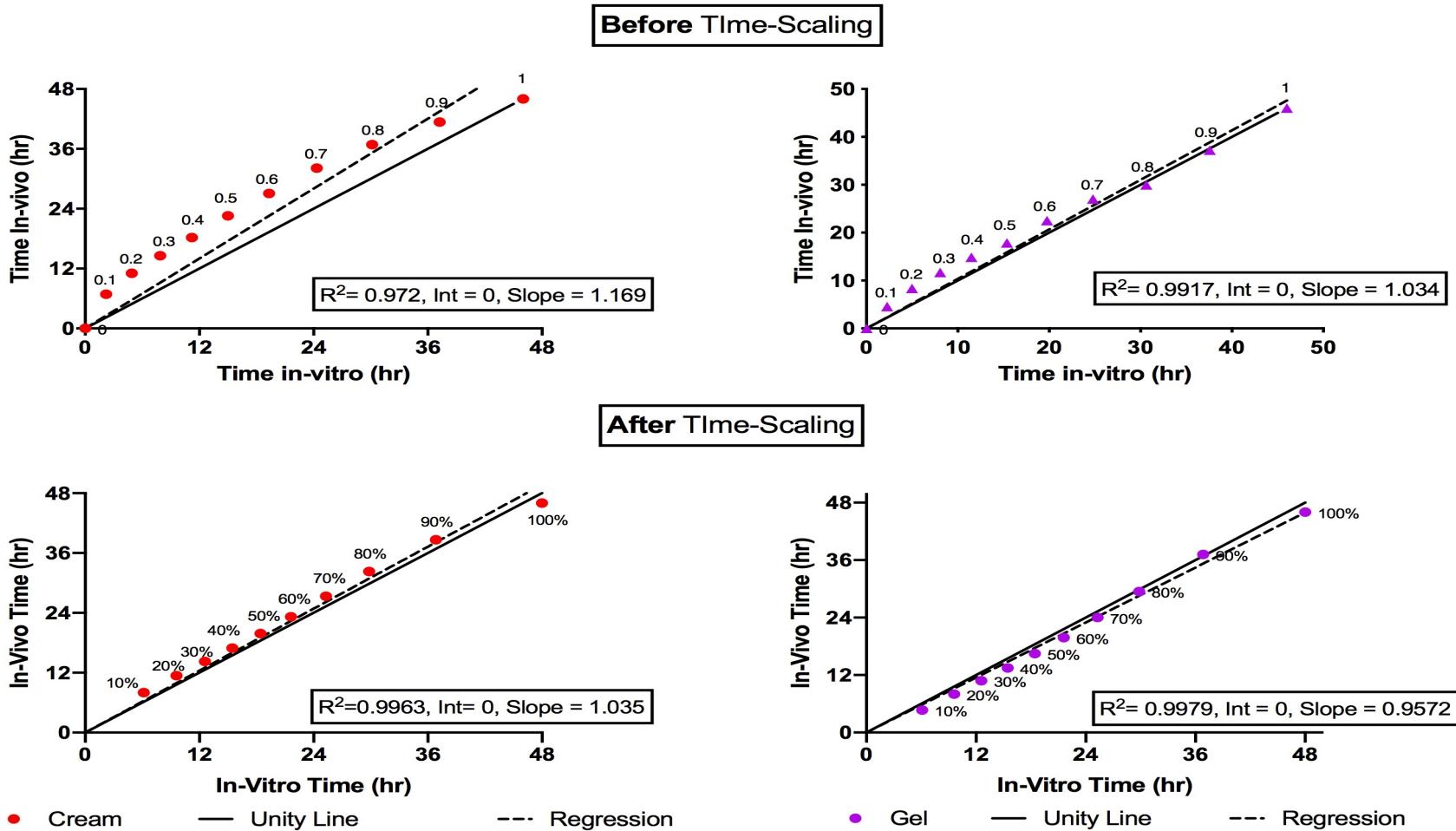


YES

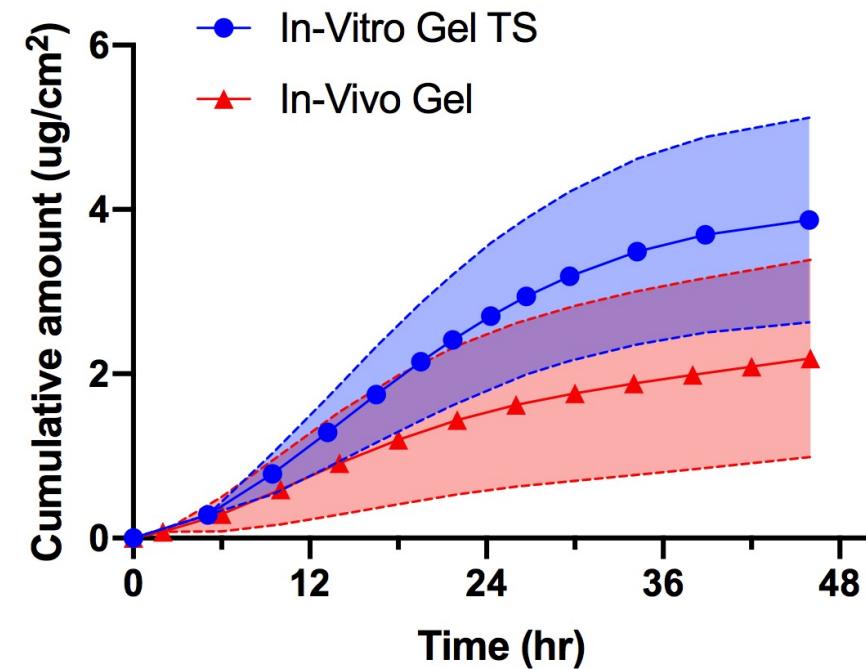
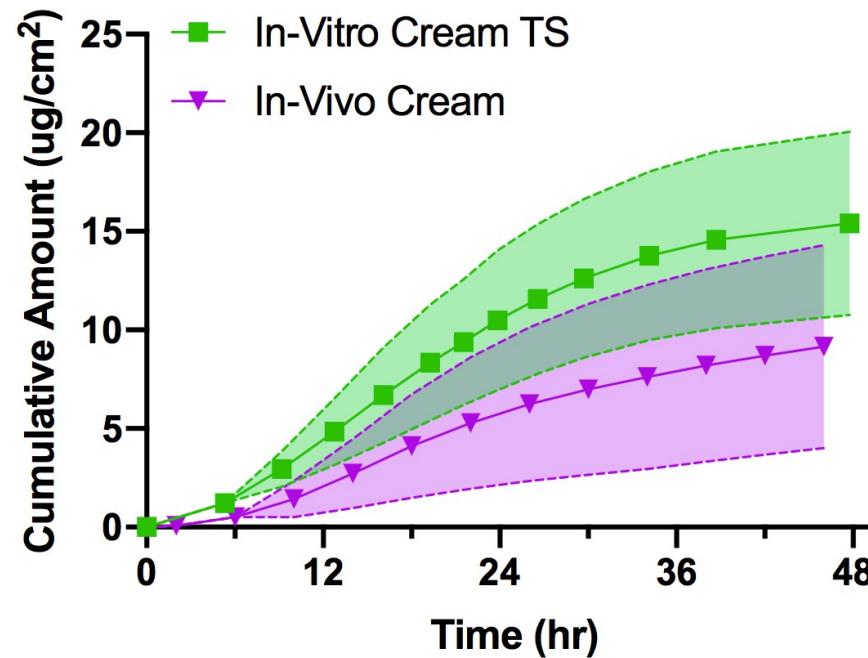
Inverse Release Function

$$TS = \left( -\ln \left( \frac{-absorb}{F_{inf}} + 1 \right)^{\frac{1}{b}} \right) \times MDT$$

Cardot et al. AAPS J. (2018)

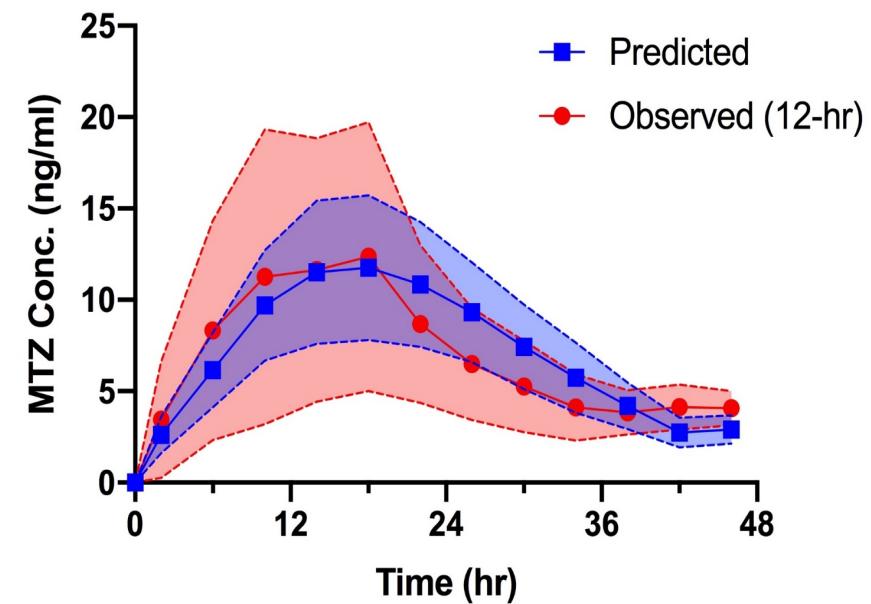
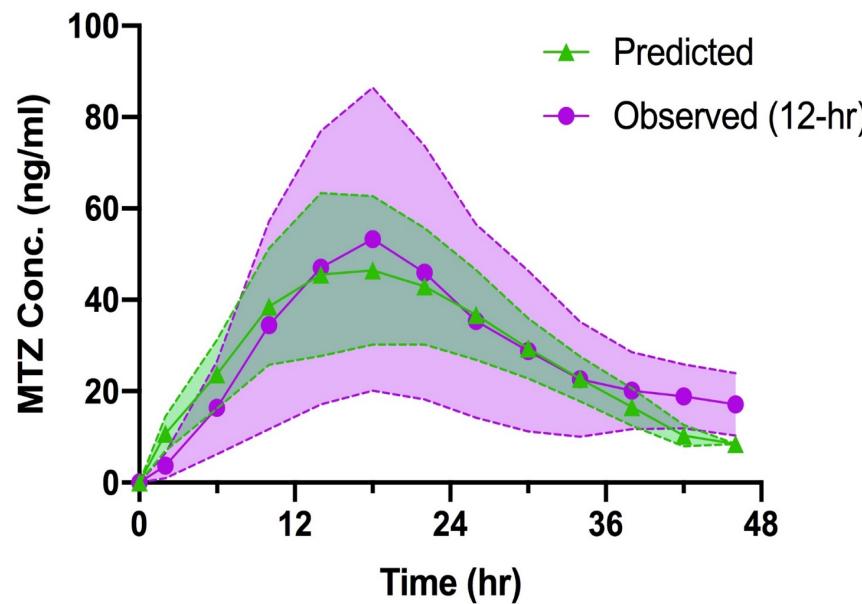


After non-linear time scaling data with Inverse Release Function and correcting the in-vivo dMD data by the area of **0.0068cm<sup>2</sup>**, we arrive here:



An 'absorption scaling factor' is required to relate IVPT and dMD

# Convolution of Time Scaled and Absorption Scaled IVPT data:



## Absolute Prediction Errors:

$AUC_{all}$  – 3.4% ✓

$AUC_{0-36}$  – 5.1% ✓

$C_{max}$  – 15.1% ✓

# Conclusions

- The deconvolution of the PK profiles utilizing the dermal disposition of MTZ allowed for the characterization of the absorption process in vivo: **in-vivo flux and cumulative amount input**.
- Accounting for the sampling area allows for the comparison of drug permeation between IVPT data and dMD data
- Comparison of the in-vitro and in-vivo cumulative amount plots clearly shows a consistent higher MTZ permeation from the cream compared to the gel and the **non-linear time-scale** helped to account for the differences between the in-vitro and in- vivo cumulative amounts.
- The comparison of the observed and predicted in vivo concentration profiles after convolution with the dUIR demonstrates that a **reasonable IVIVR has been established**.
- These results offer a **promising starting point** for further exploration of the microdialysis/retrodialysis approach to study the disposition of drug molecules in the dermis, which can be useful for the development of a quantitative IVIVR for topical dermatological products. Additional research studies are warranted to **further evaluate** the utility of this **approach, its assumptions, and outcomes**.

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# Questions

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- **Dr. Grazia Stagni Lab Posters:**

- **Sharareh Senemar** – M1430-09-57 - Evaluating the Bioequivalence of Topical Dermatological Drug Products containing Metronidazole using Dermal Microdialysis: Preliminary Studies in Rabbits.
- **Benjamin A. Kuzma** – T1130-09-59 - Estimation of in-vivo percutaneous permeation (flux) and cumulative amount input of metronidazole formulations in mini-pigs' dermis

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