



F-CAD: In-silico Design of Solid Dosage Forms

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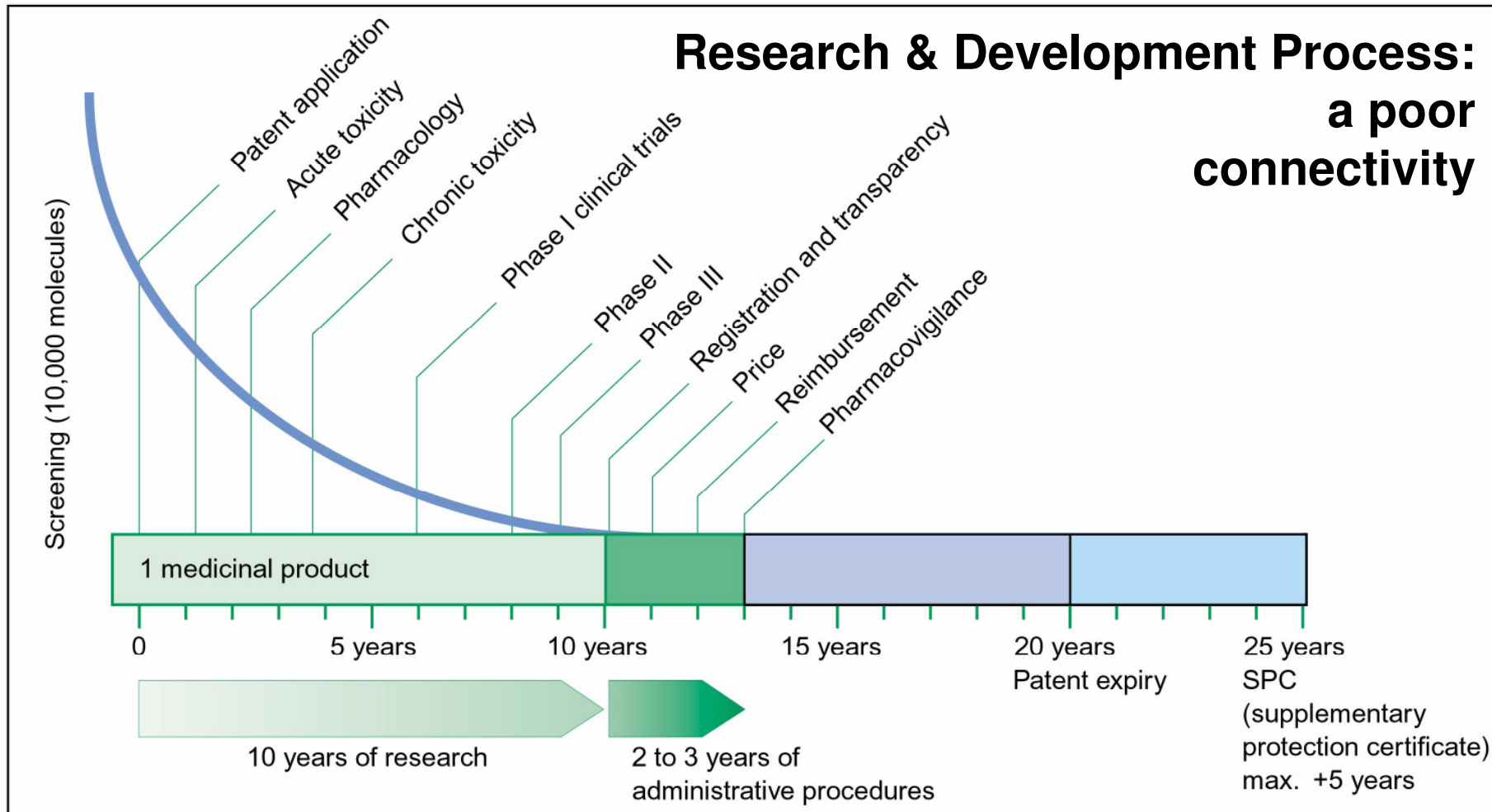
and

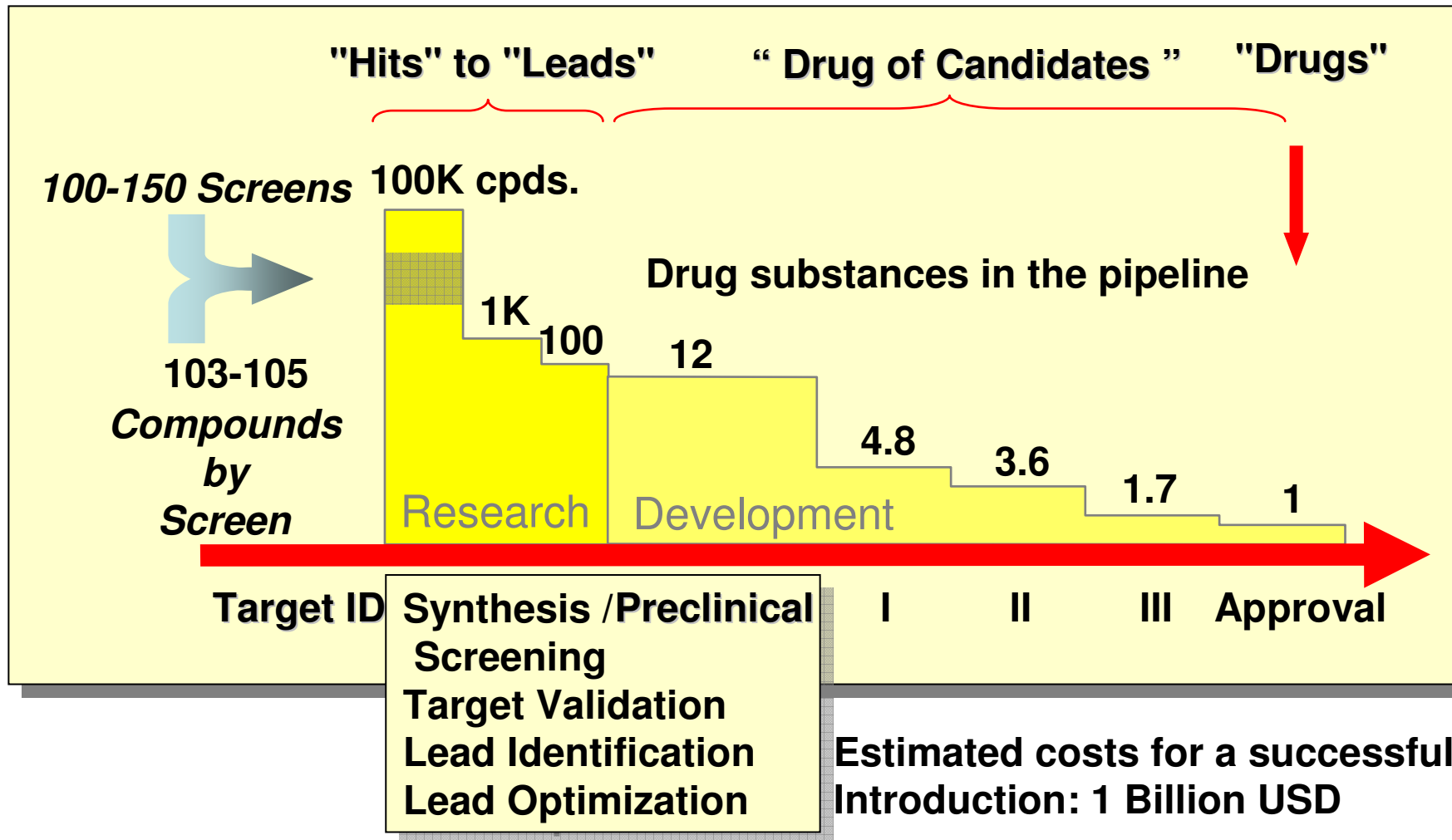
Dr. Maxim Puchkov

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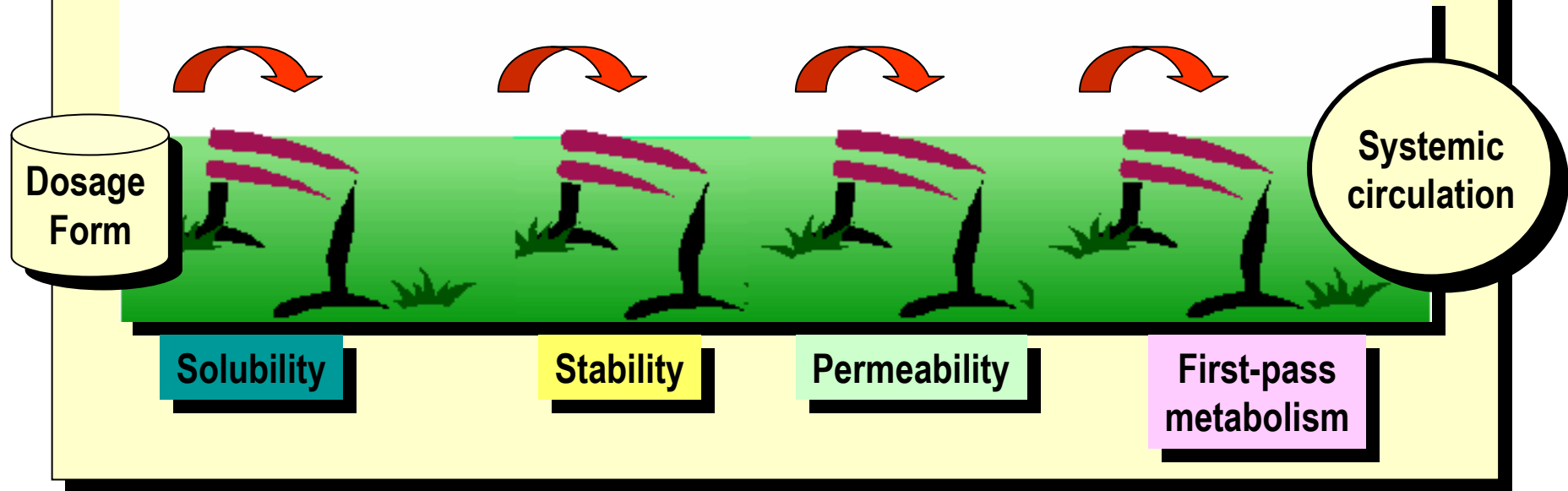
Research & Development Process: a poor connectivity



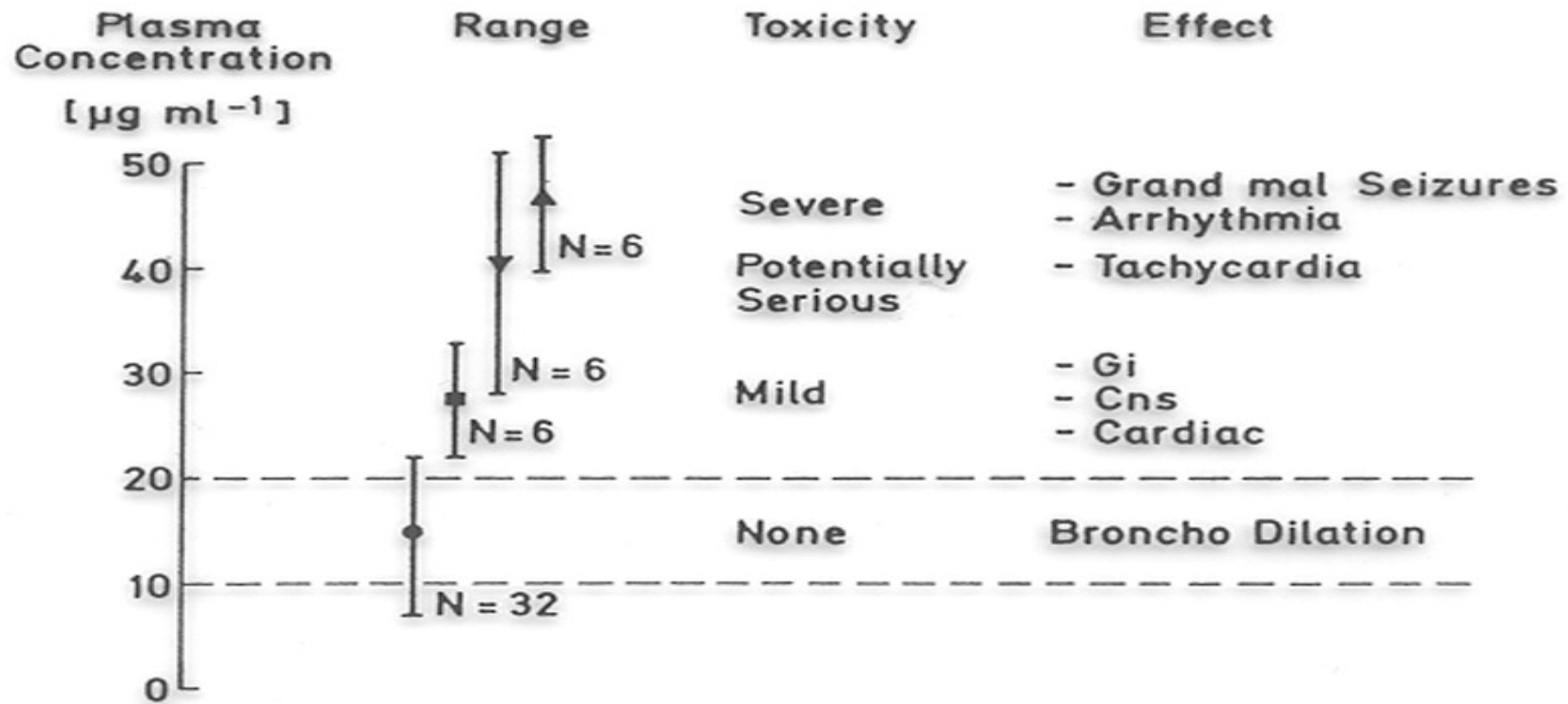


Slide: A. Hussain, ex FDA

Major hurdles for a drug substance



Systemic Circulation: Therapeutic window

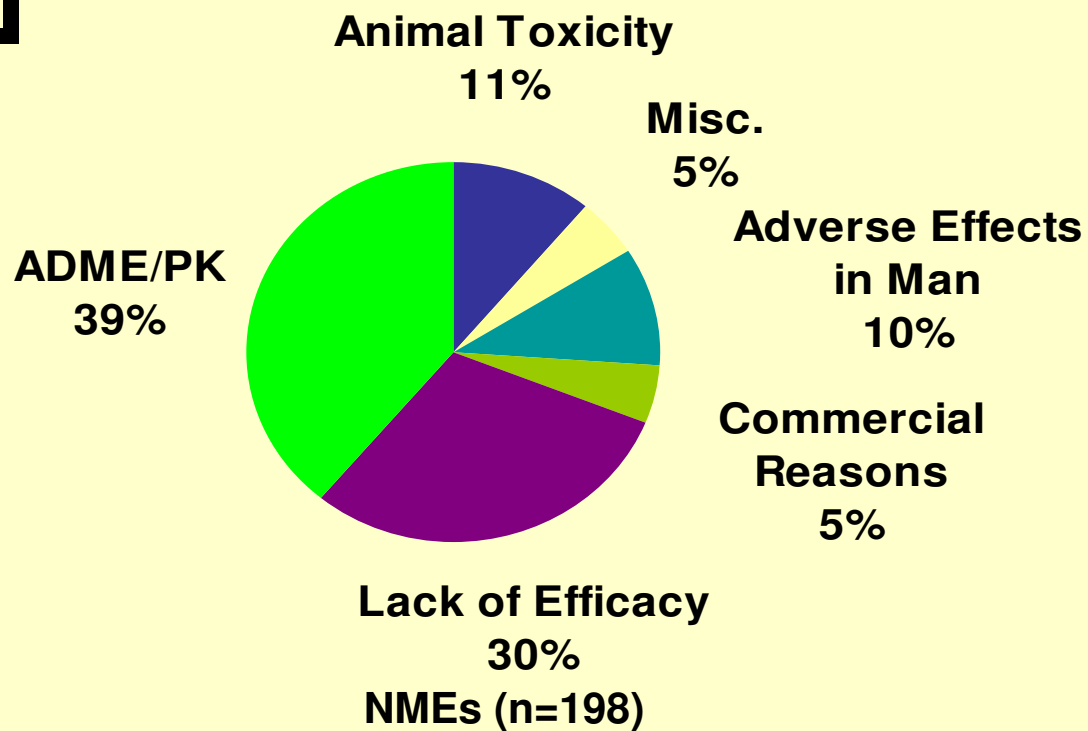


Plasma concentrations of theophylline related directly to the appearance of adverse reactions. Bronchodilation is the therapeutic effect of this drug



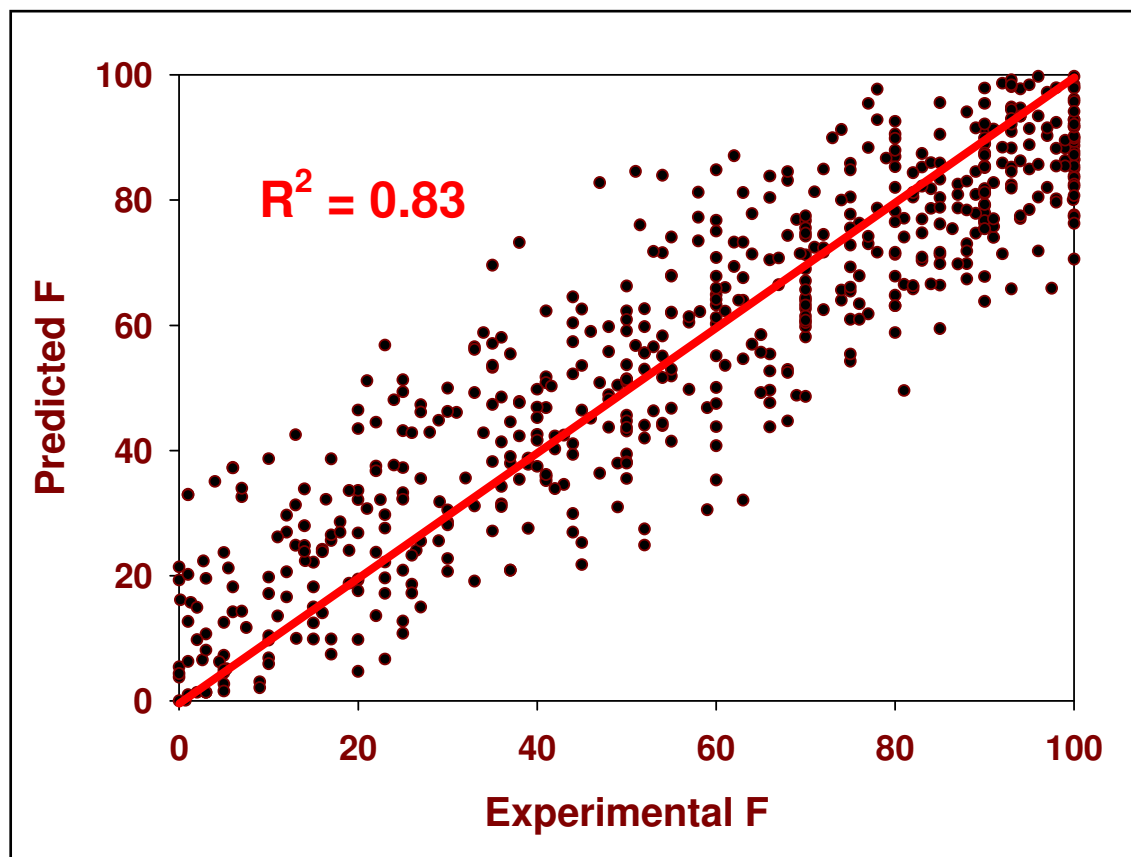
Failure of a project: Reasons

Failures due to:



Kennedy, T. (1997) drug Discovery Today, 2, 436-444.

Hurdle: Bioavailability of the drug substance



Yu, et al. Quantitative Structure Bioavailability
Relation-hip (QSBR):
Pharm Res. 17:639-644 (2000)

The Biopharmaceutical Classification System I

Class I - High Permeability, High Solubility

The drug substance is well absorbed, i.e. the absorption rate constant is much higher than excretion rate constant

Example: Metoprolol

Class II - High Permeability, Low Solubility

The bioavailability of such a drug substance depends on its solubility in the gastro-intestinal tract.

Example: Glibenclamide

The Biopharmaceutical Classification System II

Class III - Low Permeability, High Solubility

The absorption is unfortunately limited by the biological Membrane permeation rate. Thus the high solubility of the Drug substance is not helpful.

Example: Cimetidine

Class IV - Low Permeability, Low Solubility

Such drug substances have a poor bioavailability.

Worst case scenario:

The drug substance is not well absorbed over the intestinal mucosa and a high variability can be expected.

Example: Hydrochlorothiazide

Goal: Robust Solid Dosage Form

Task: Development and production of a **vehicle** that **delivers the drug substance safely and**

precisely at the	right time
in the	right quality
in the	right quantity
to the	right site in the body.

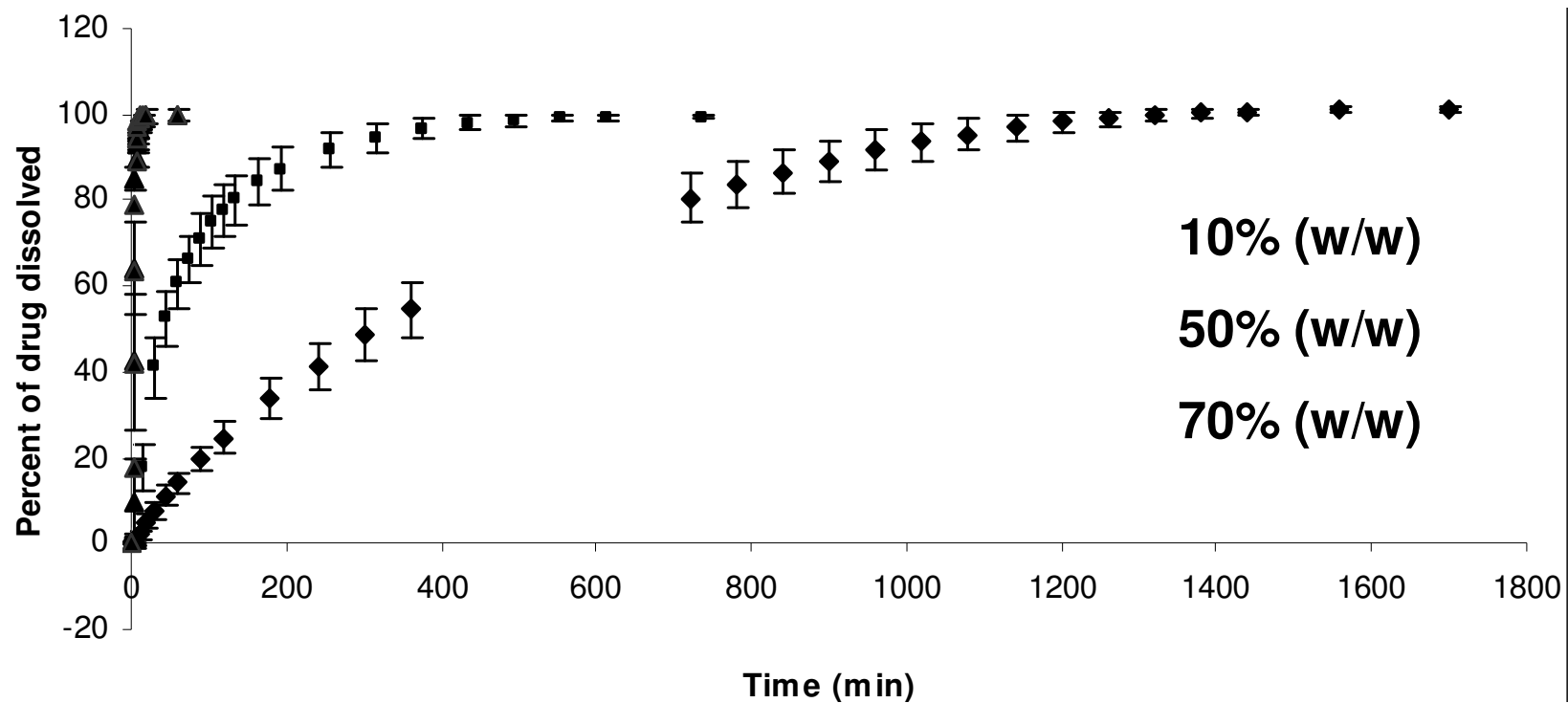


Classical Approach I

**The final marketed dosage form - supposed
To be a robust one - is ususally only
defined in Clinical Phase II or Phase III !
For Dose Range Finding in Clinical Phase I
Often preliminary hard gelatine capsule
formulations are used, which can be
problematic (see the 2 following slides !)**

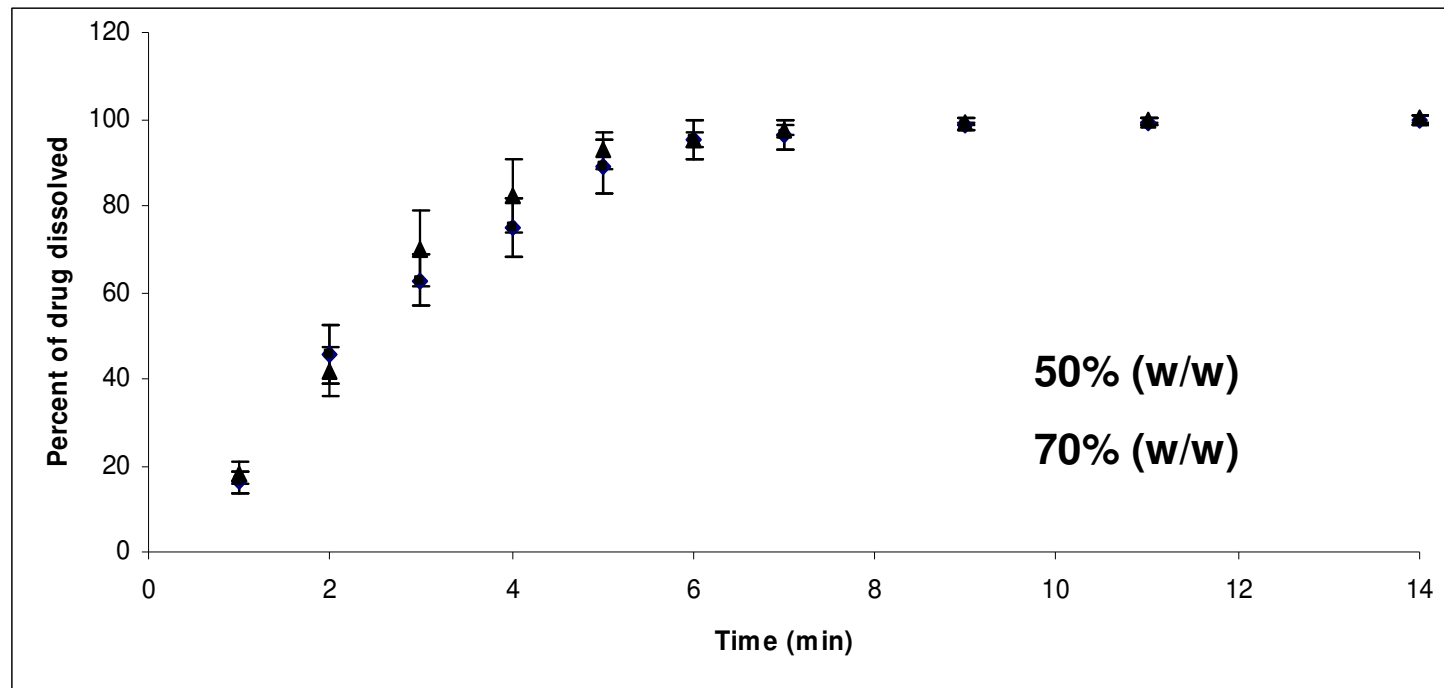
Drug A: Dissolution rate of capsule formulations

Capsule formulations were not robust being sensitive to the drug load (16, 79 and 109 mg, respectively 10% w/w, 50% w/w and 70% w/w).



Drug A: Dissolution rate of tablet formulations

Tablet formulations have been robust and not sensitive to the drug load: 77mg, 109 mg drug substance, respectively 50% w/w, 70% w/w.



Reference: PhD Thesis Johannes von Orelli



Product and Process Quality Knowledge: Science-Risk Based cGMP's

***Quality by Design
Process Design***

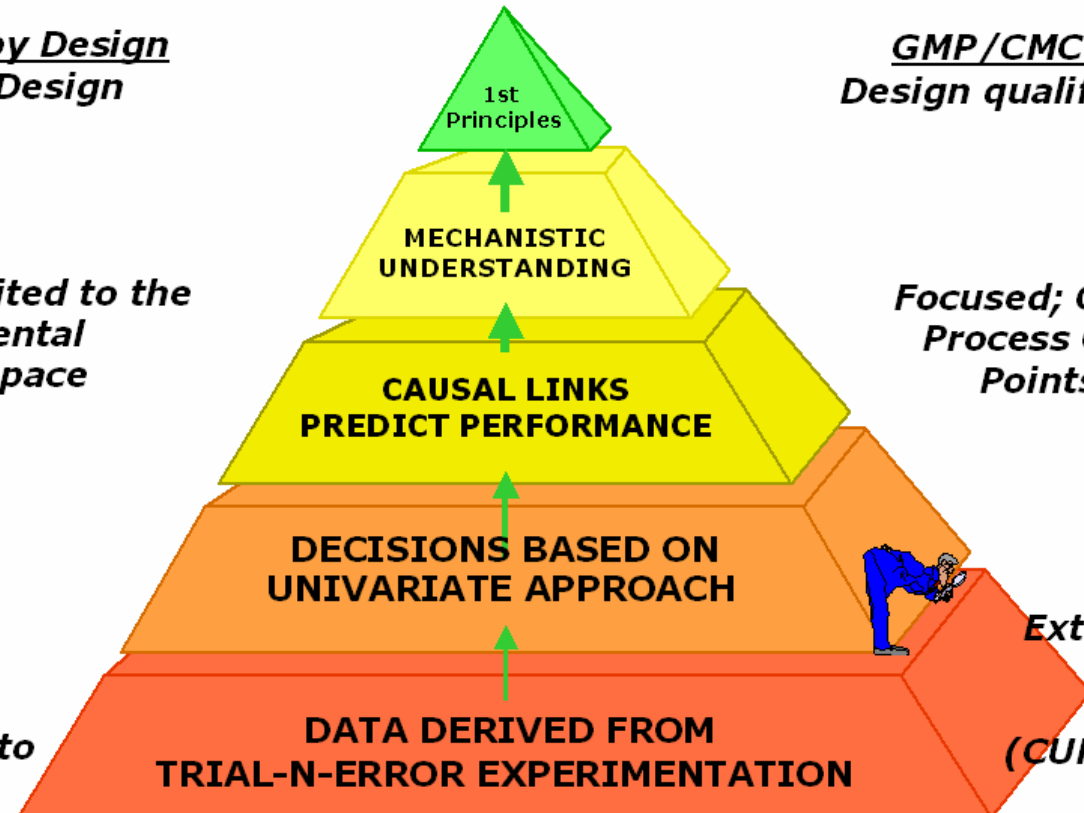
***GMP/CMC FOCUS
Design qualification***

***Yes, Limited to the
Experimental
Design Space***

***Focused; Critical
Process Control
Points (PAT)***

***Maybe,
Difficult to
Assess***

***Extensive;
Every
Step
(CURRENT)***




Classical Approach II

The reason to use a preliminary preclinical dosage form in Clinical Phase I is related to the fact, that it is impossible to develop and optimize simultaneously 12 robust formulations for 12 drug substances.

In fact the famous 20% to 80% Rule has to be applied: Invest 20% of your resources to get 80% of your desired result!

Is this sufficient to get SIX SIGMA Quality?



PAT (Process Analytical Technology) Initiative and Quality by Design (QbD) – Can we afford it ?

- Is it possible to reduce time to market and to enhance product quality?
- The Sigma Concept
- Goal: Six Sigma Performance

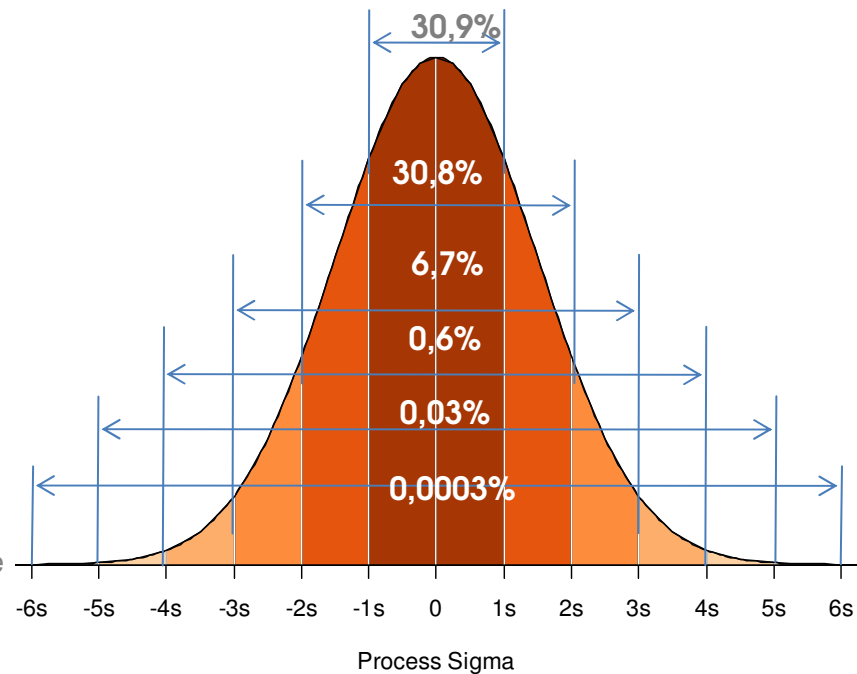
Performance of a process → Sigma value

Sigma	Yield, %	Defects, %	DPMO
1	30,9	69,1	690000
2	69,2	30,8	308000
3	93,3	6,7	66800
4	99,4	0,6	6210
5	99,97	0,03	320
6	99,9997	0,0003	3,4

Source: Kurt Haubner, www.sixsigma.de

Normal distribution - Gauss!

$$f(x) = \frac{1}{\sigma\sqrt{2\pi}} e^{-\frac{x^2}{2\sigma^2}}$$



Source: Jeremy Kemp, adapted

The SIGMA Concept

Champion: Chip industry

6 Sigma performance:

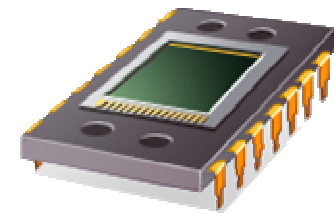
amount of defective samples = 3.4 DPMO

Performance

Pharmaceutical Industry ~ 2 Sigma

i.e. > 20% defectives in case of the **dynamical** Sigma Value, which has been adopted during the phases of early development, i.e. in the Preclinical Phase up to the decision point of defining the final marketed dosage form in the Clinical Phase I, II or even III?

i.e. ca. 4.5% defectives (snap-shot evaluation of the final dosage form (**static** Sigma Value!))



Common approach to keep costs under control

The 20% / 80% Rule:

With 20% of time and effort dedicated to a project
80% of the goals can be achieved!

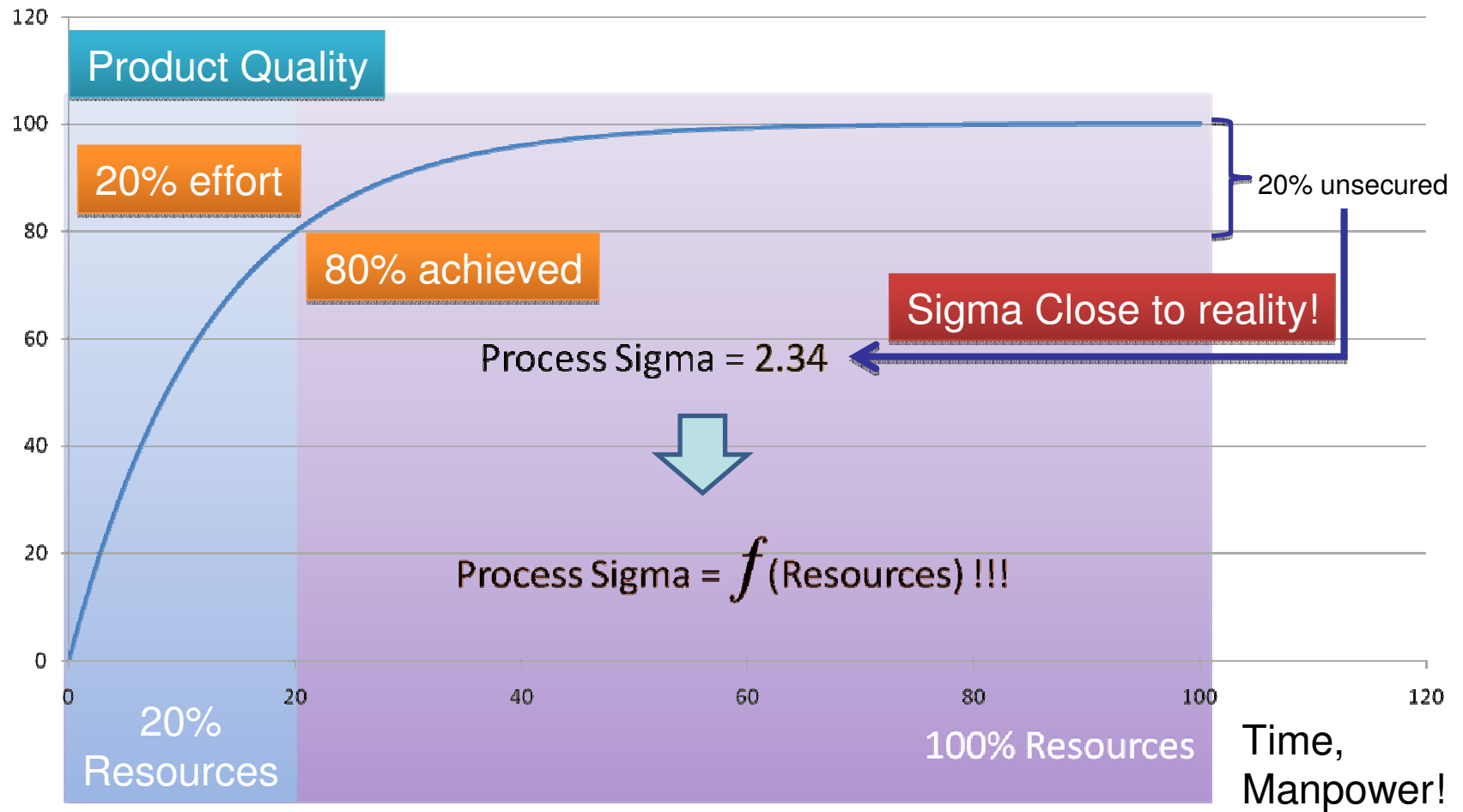
Is this approach adequate for an optimal Quality by Design?

Can we afford a 6 Sigma Quality? What is the Quality in case of
the 20%/80 % Rule?

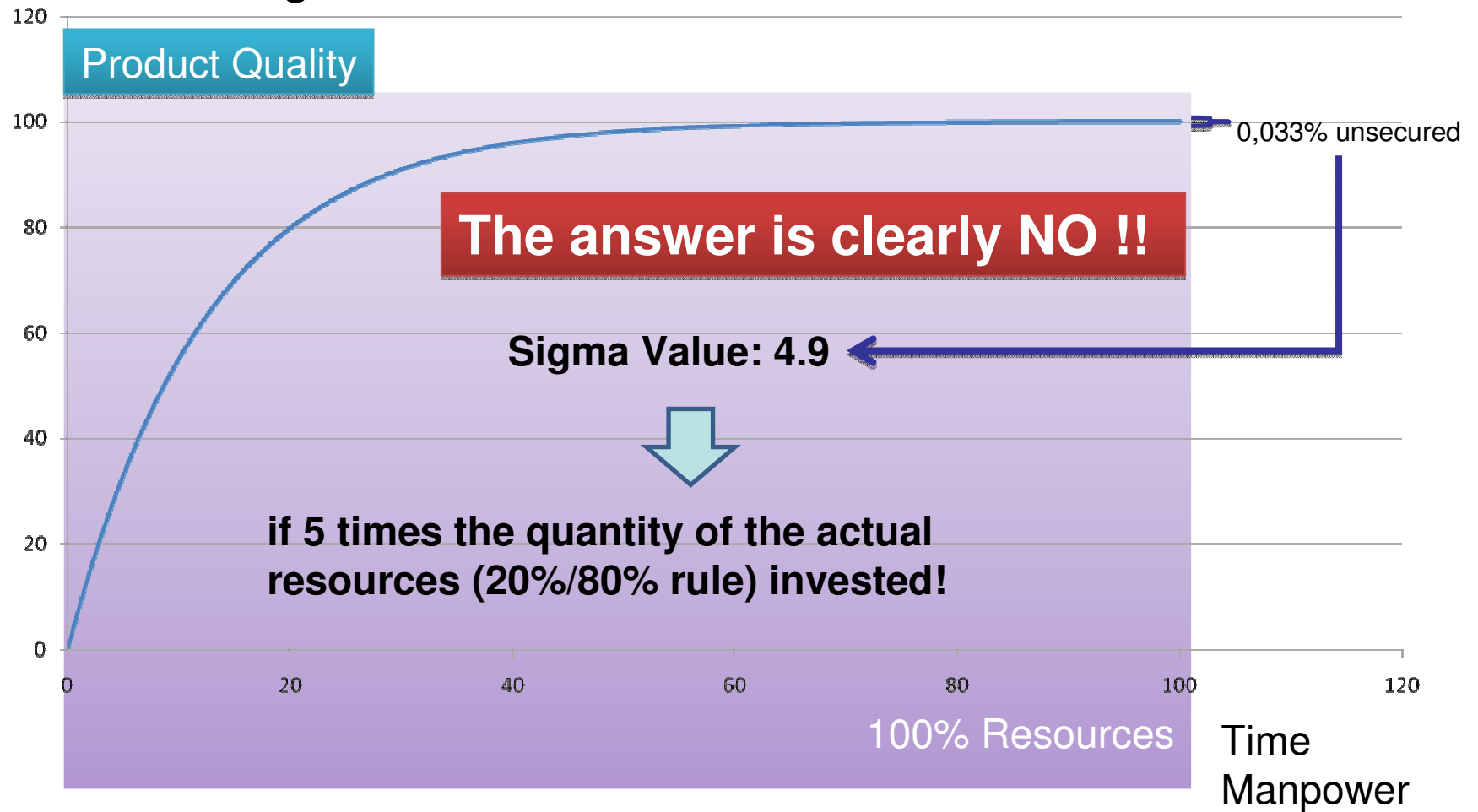
Let us make an estimate!



Sigma Value – function of resources



Can Six Sigma be achieved with conventional tools?



PWC Pharma 2020: Vision e-Development

New Tools are required!!

- SEE the study of Price Waterhouse Coopers :
- **PWC PHARMA 2020 – a Vision**
- **Is it possible to introduce special e-tools to facilitate the work of development?**
- **We think: YES**
- Is it possible to copy e.g. the concepts of the aircraft industry, using „in-silico“ Computer-aided design?
- Let us compare the aircraft building industry with the development of a solid dosage form!

Goal: Robust Solid Dosage Form

Task: Development and production of a **vehicle** that **delivers the drug substance safely and**

precisely at the	right time
in the	right quality
in the	right quantity
to the	right site in the body.



The Goal is similar to the task of designing an aircraft:

Task: Development and manufacturing of an aircraft that **delivers the passengers safely and precisely**

at the
in the
in the
to the

right time
right quality
right quantity
right site (destination).

Boeing 777 and Airbus 380 were fully designed in-silico



Designing aircraft: *in silico* approach



Boeing 777: 100% digitally designed using 3D solids technology

- The consequences were dramatic:
 - Elimination of > 3000 assembly interfaces, without any physical prototyping
 - 90% reduction in engineering change requests (6000 to 600)
 - **50% reduction in cycle time for engineering change request**
 - **90% reduction in material rework**
 - 50x improvement in assembly tolerances for fuselage.

How can we do that for pharma?

Source: <http://www.cds.caltech.edu/conferences/1997/vecs/tutorial/Examples/Cases/777.htm>

Designing a solid dosage form: *in silico* approach I?



Tablet: 100% digitally designed using 3D solids technology?

Prerequisites and primary requirements I:

**Best possible knowledge of the *Physico-Chemical and Biopharmaceutical Properties* of the drug substance and of the excipients such as
Drug/Excipient Compatibility
Issue of Polymorphism etc.**

How can we do that for pharma?

Designing a solid dosage form: *in silico* approach II?



How can we do that for
pharma?

**Tablet: 100% digitally designed
using 3D solids technology?**

**Prerequisites and primary
requirements II:**

**a) Availability of a corresponding
software to design the solid
dosage form, taking into account
*percolation theory, physico-
chemical and mechanical*
properties of the substances
Involved etc. and**

Designing a solid dosage form: *in silico* approach II?

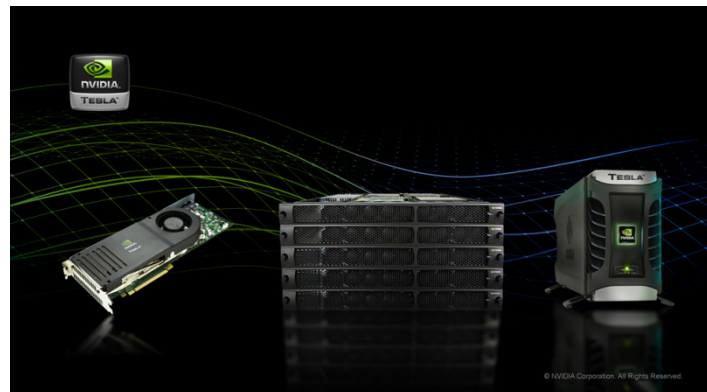


How can we do that for pharma?

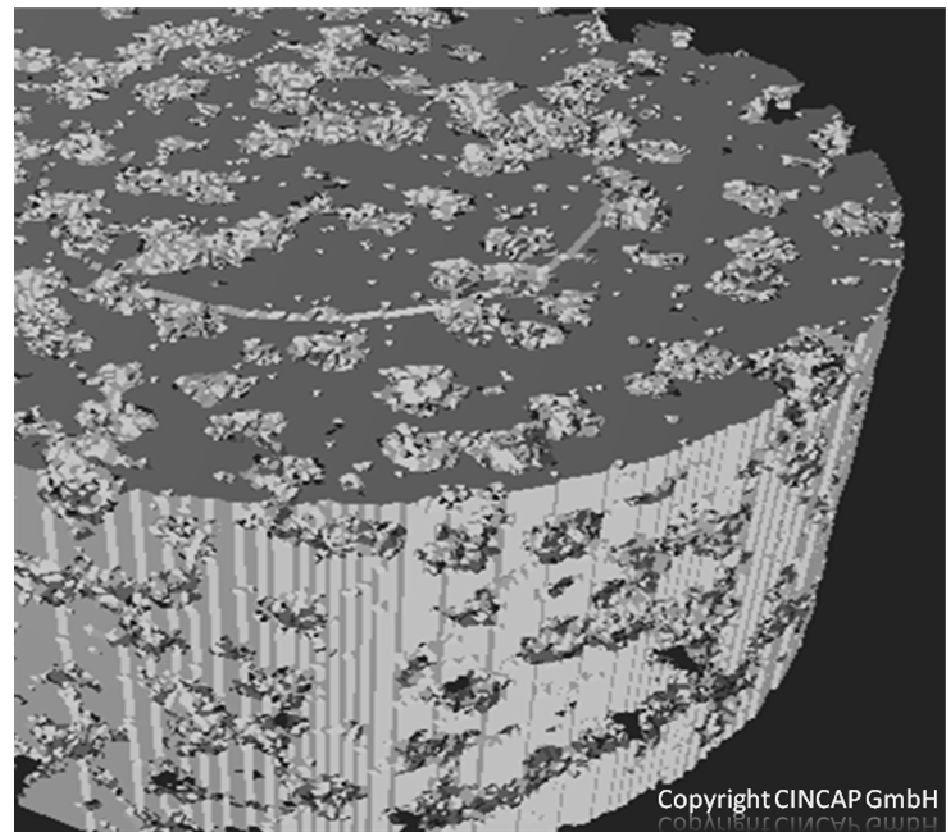
Tablet: 100% digitally designed using 3D solids technology?

Prerequisites and primary requirements II:

b) Availability of the corresponding **hardware, i.e. A supercomputer.**



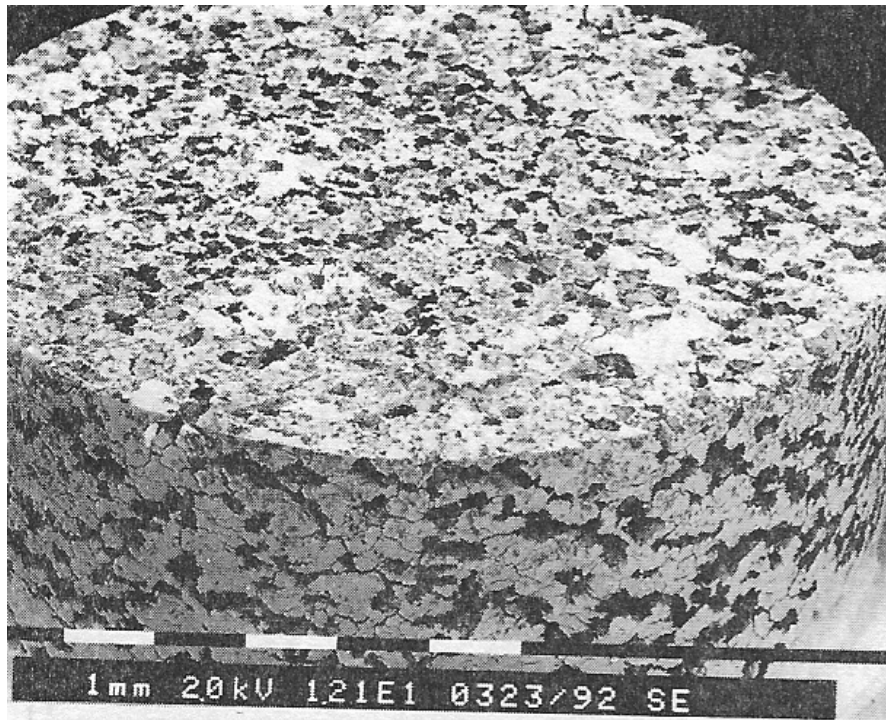
Leached Matrix Controlled Release Tablet: Real: left ; Computer Generated System: right



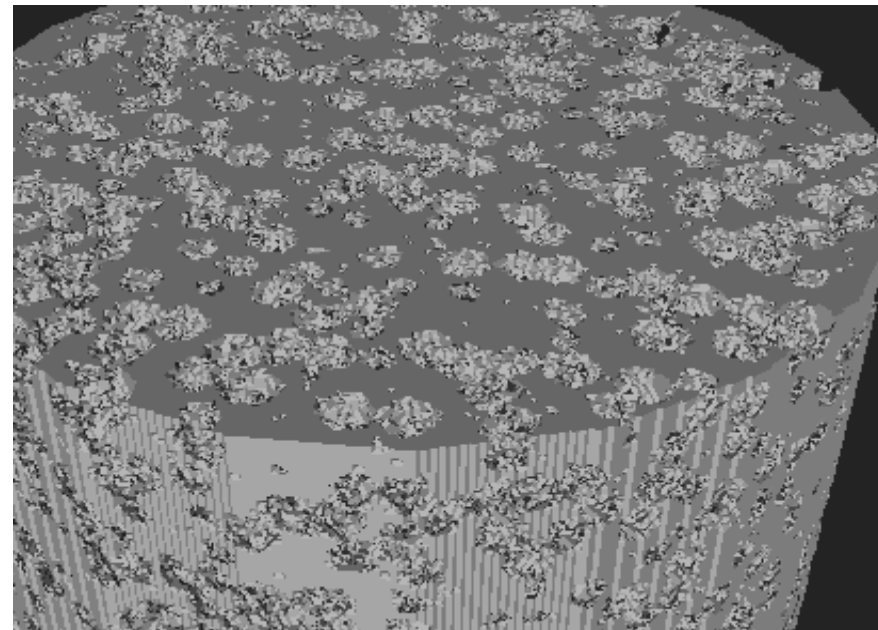
Reference for real product: PhD Thesis J.D. Bonny

Leached Matrix Controlled Release Tablet:

250-355 μm



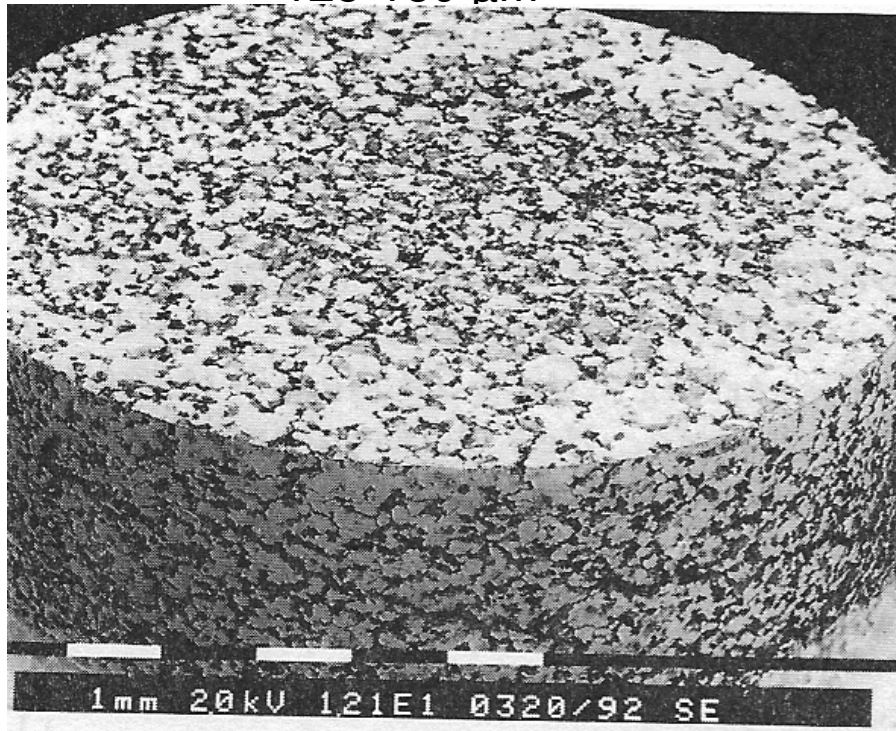
280-400 μm



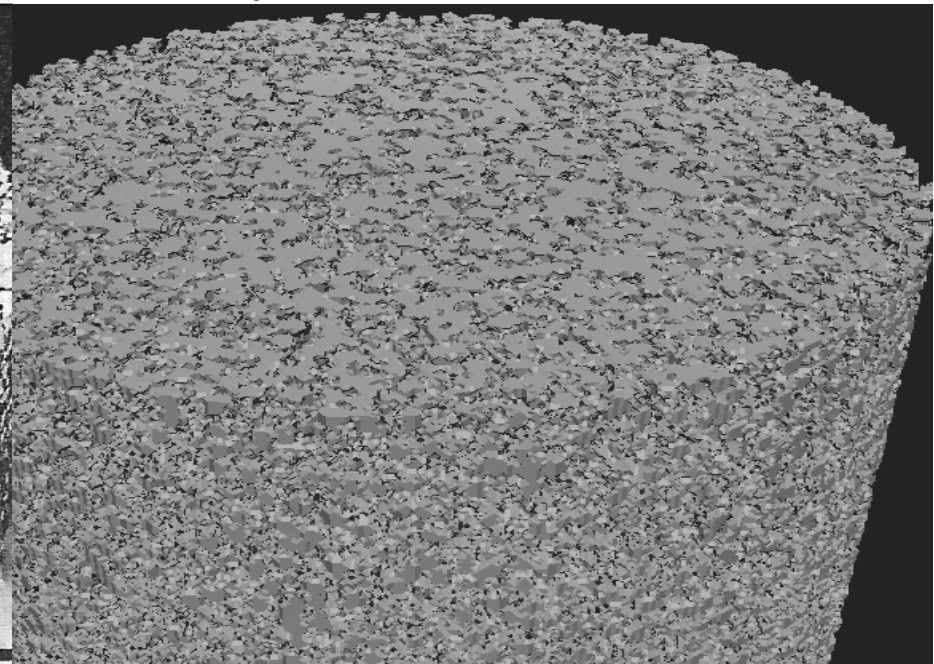
Real – left (PhD Thesis J.D. Bonny)
Computer Generated System - right

Leached Matrix Controlled Release Tablet

125-180 μm

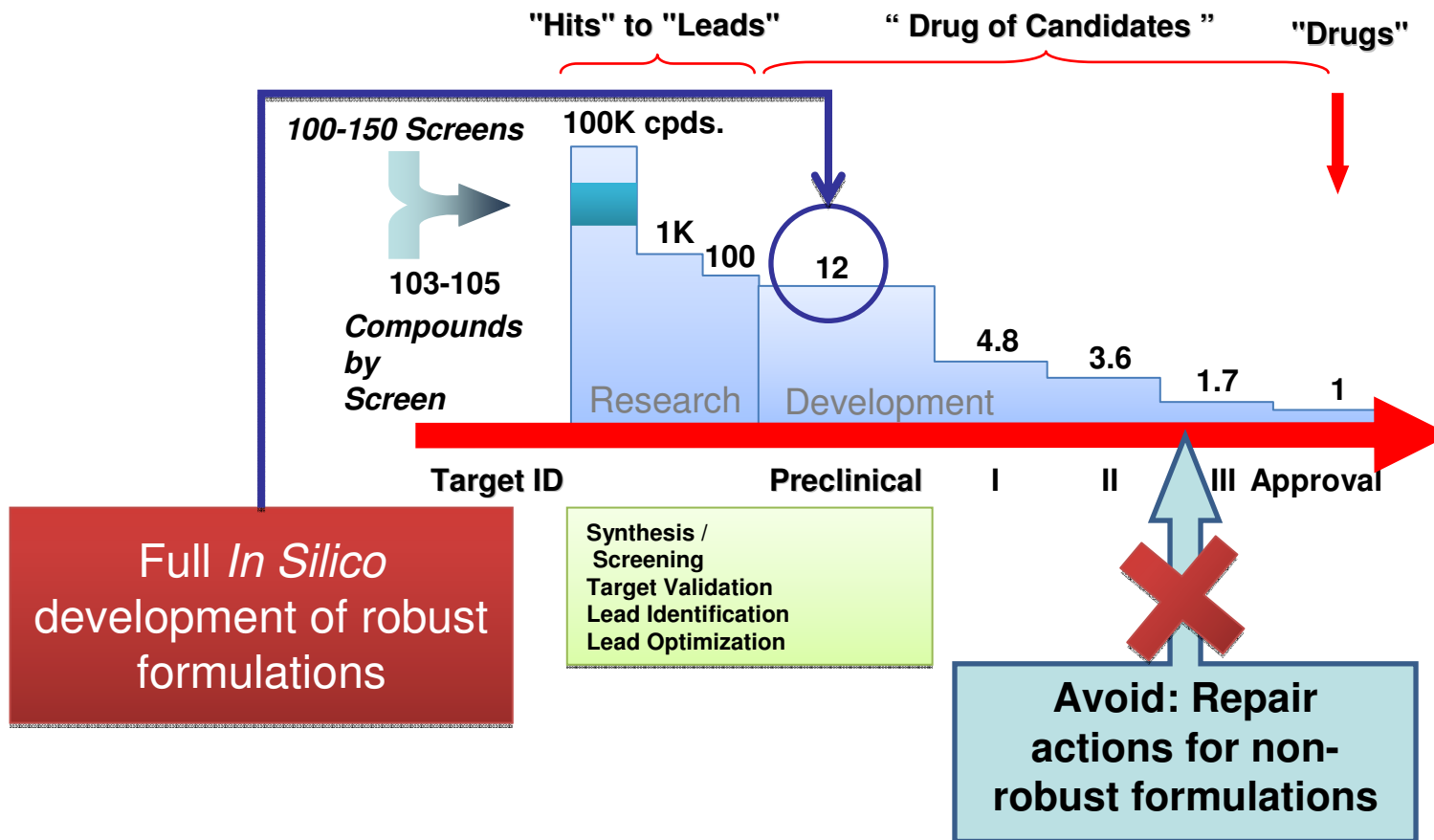


150-200 μm



Real – left (PhD Thesis J.D. Bonny)
Computer Generated System - right

Idea: Full in-silico development of the marketed dosage form of 12 drug candidates for Clinical Phase I instead in the phase II / end of phase III !!





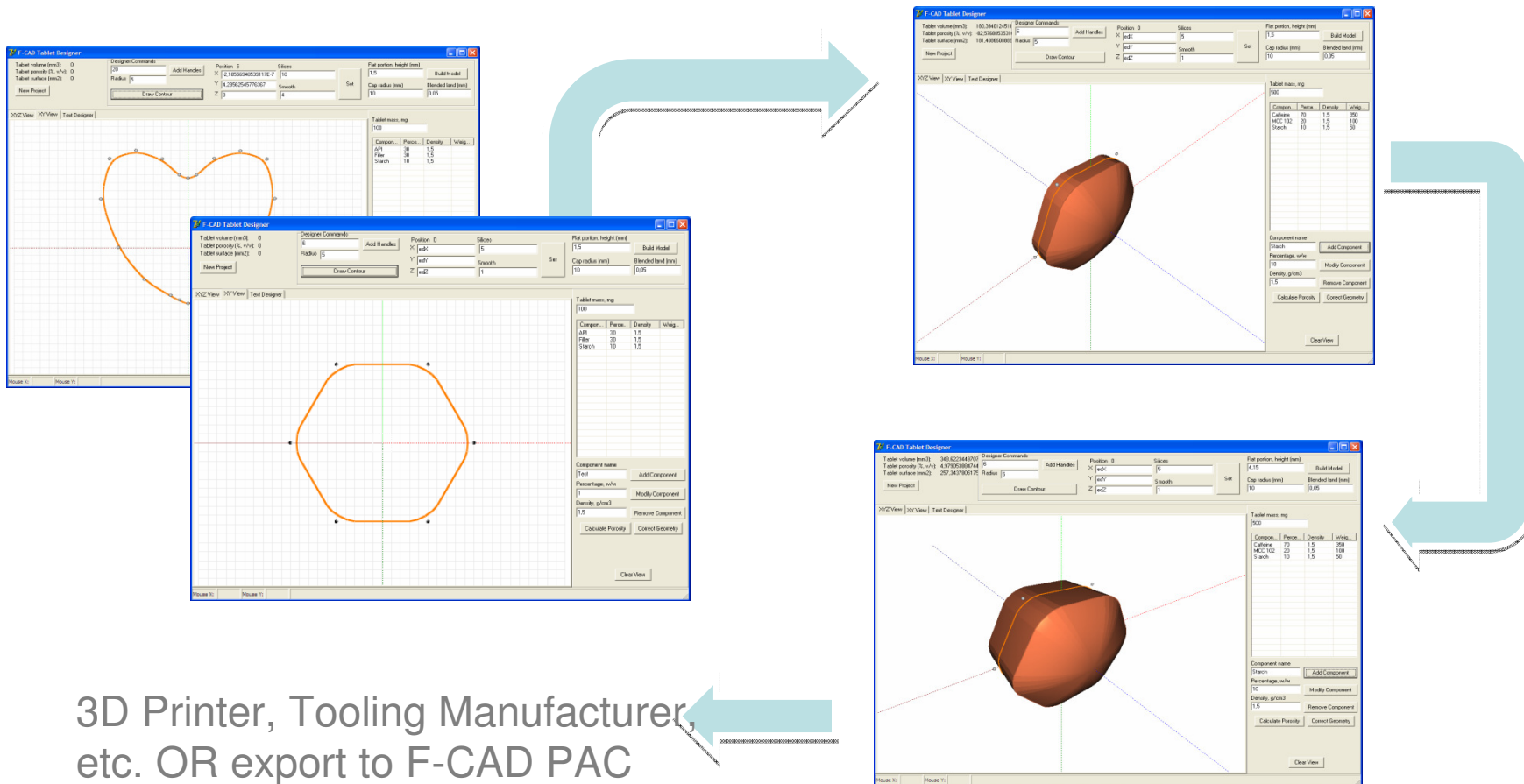
F-CAD as Toolbox for computer-aided formulation design

Important issue:

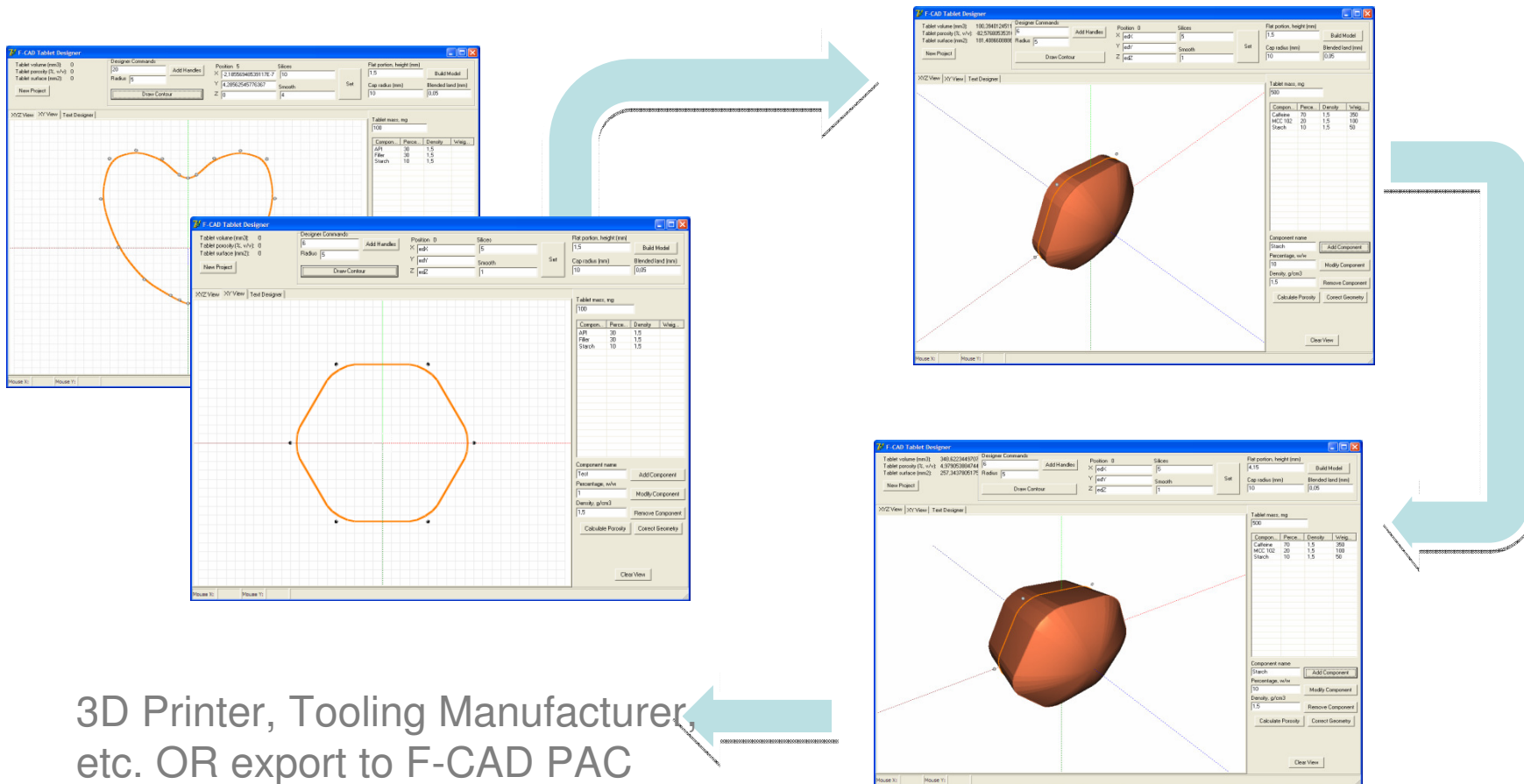
In order **to close the gaps** between Marketing, Pharmaceutical R&D, Clinical Supply, Clinical Phases, Pilot Plant Manufacturing, Scale-up Activities, Full Scale Manufacturing,
it is recommended
to start to use F-CAD already in the pre-clinical phase!

Thus the connectivity between the departments can be improved as a result of applying F-CAD!

F-CAD Tablet Designer

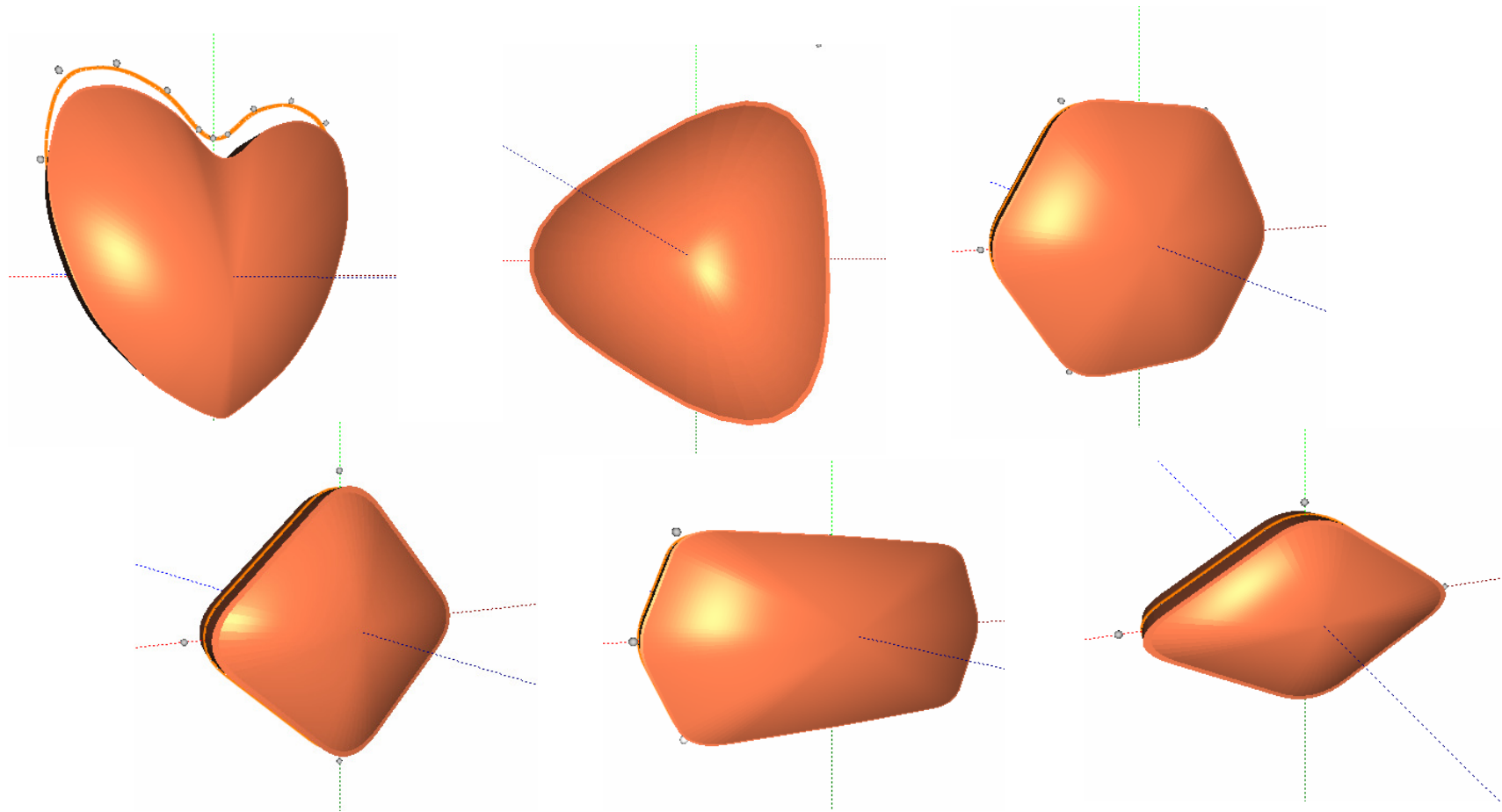


F-CAD Tablet Designer

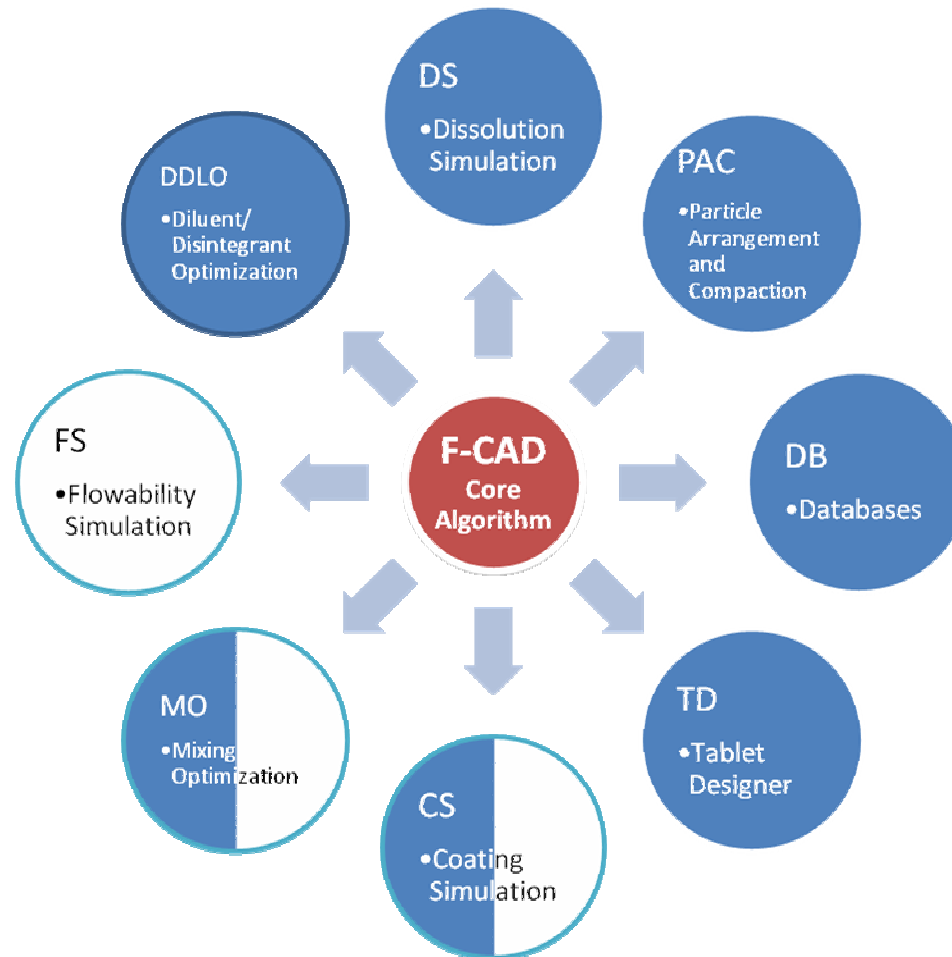


3D Printer, Tooling Manufacturer,
etc. OR export to F-CAD PAC

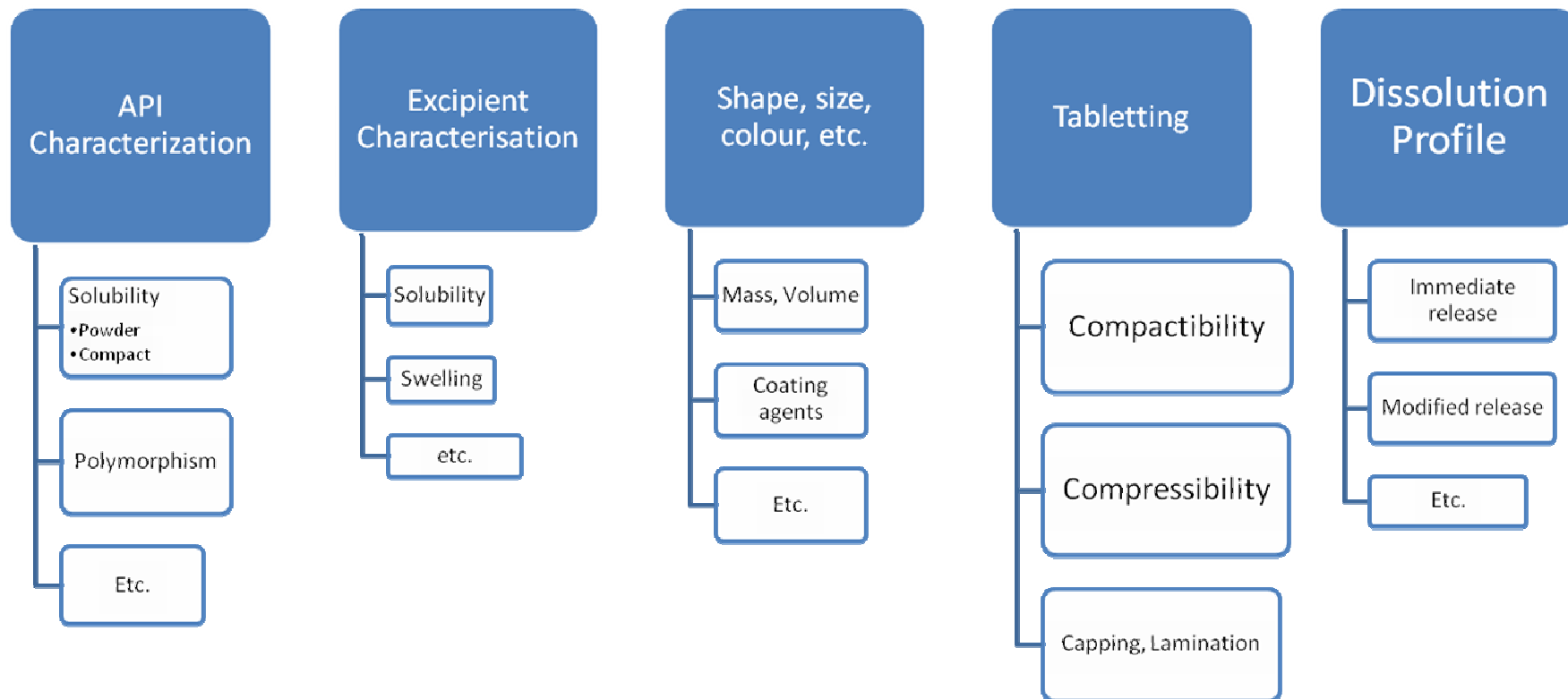
Custom Shapes with F-CAD Tablet Designer



F-CAD Modules



Formulation development with F-CAD

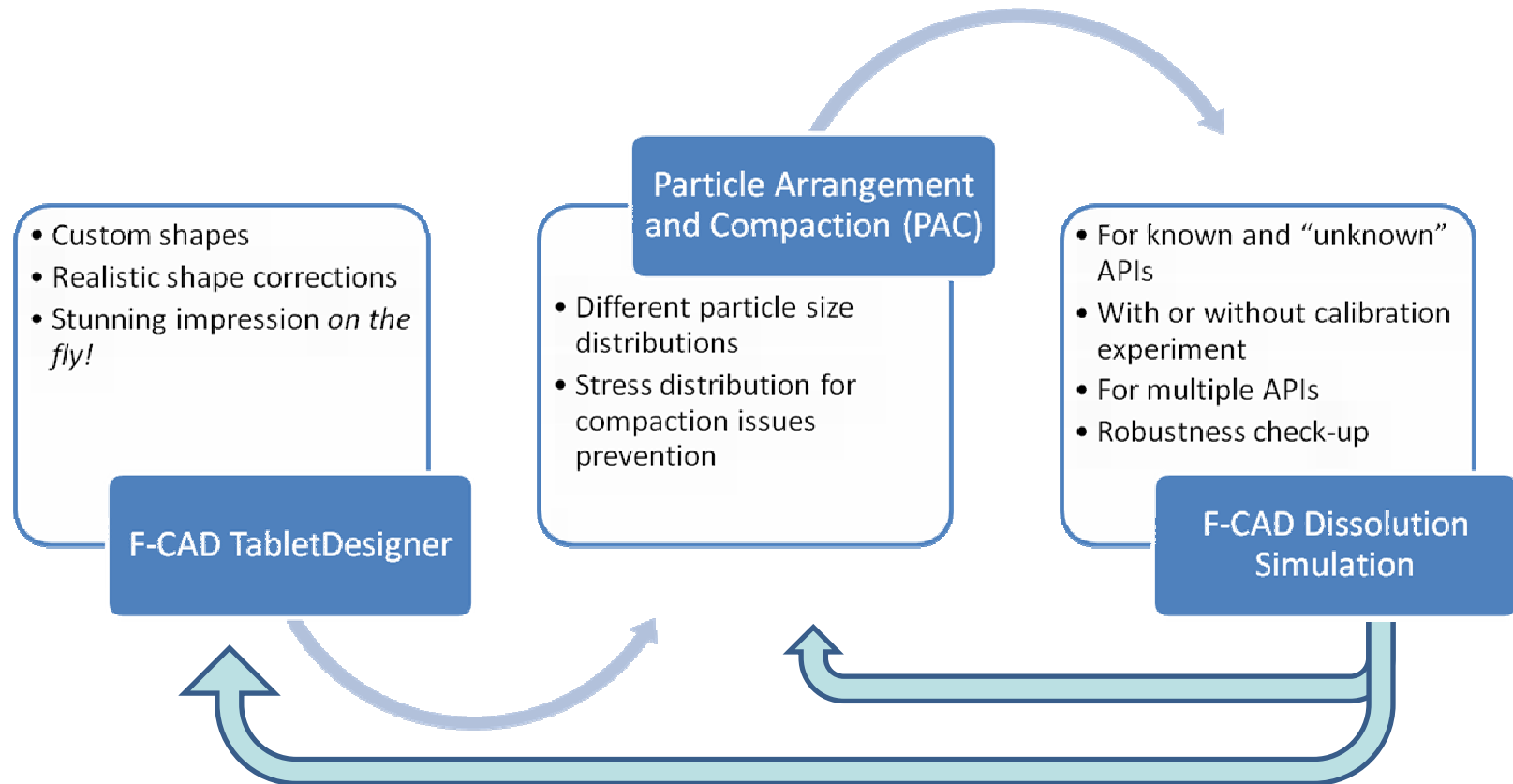




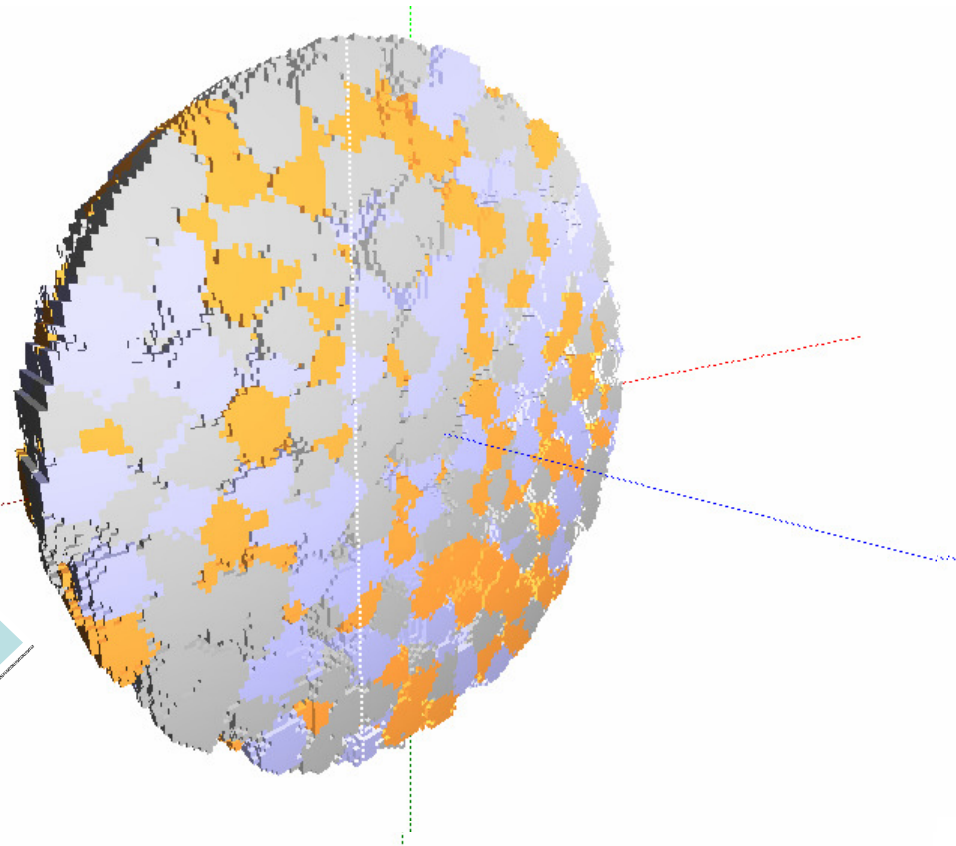
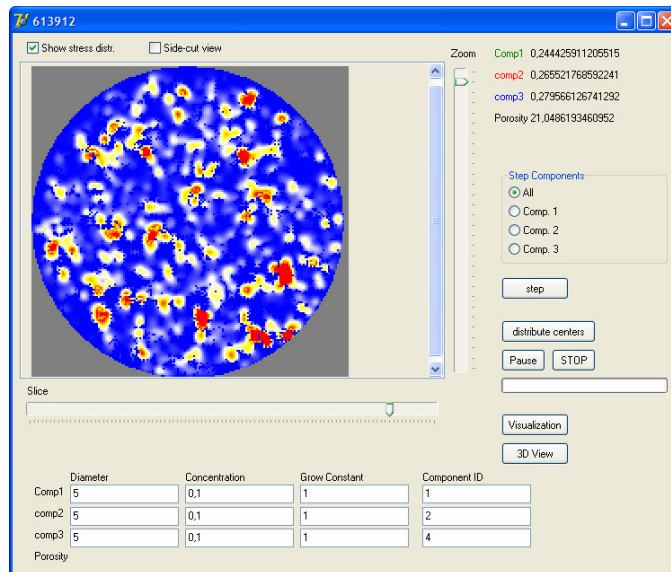
F-CAD - QbD

- Screening for robust formulation
- Setting up acceptance criteria for raw materials
- Analyse scale-up/scale-down issues and prevent problems

F-CAD modelling process

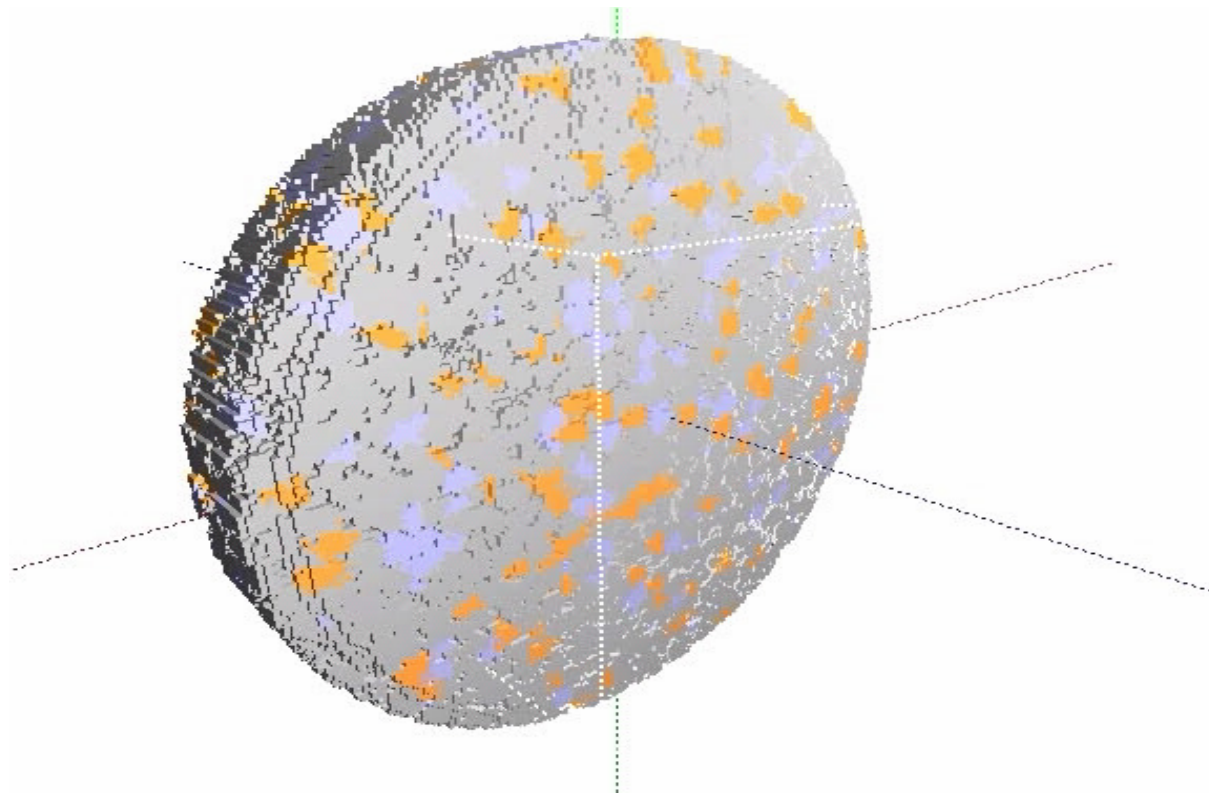


F-CAD PAC – Particle Arrangement and Compaction

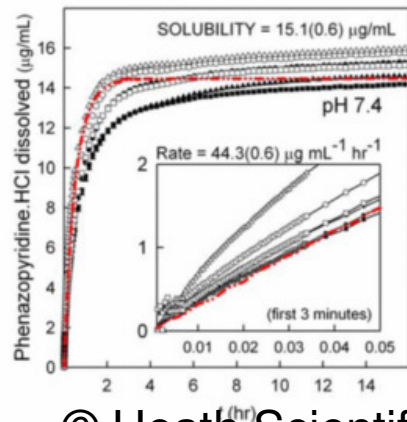




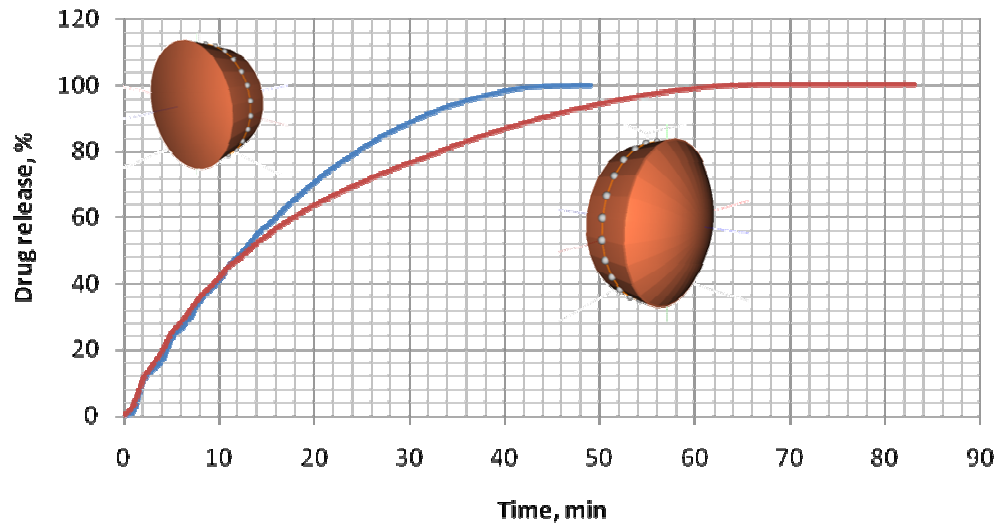
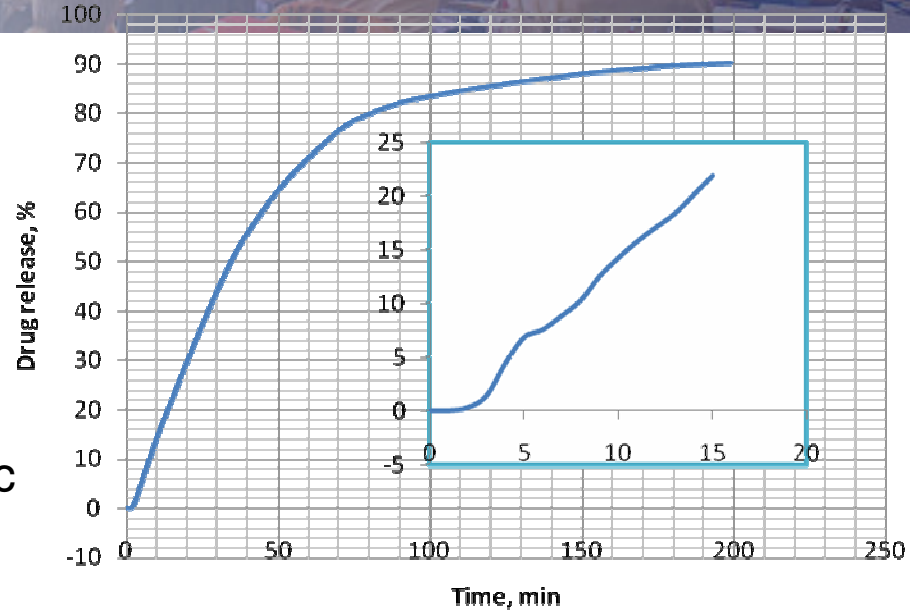
Resulting compact



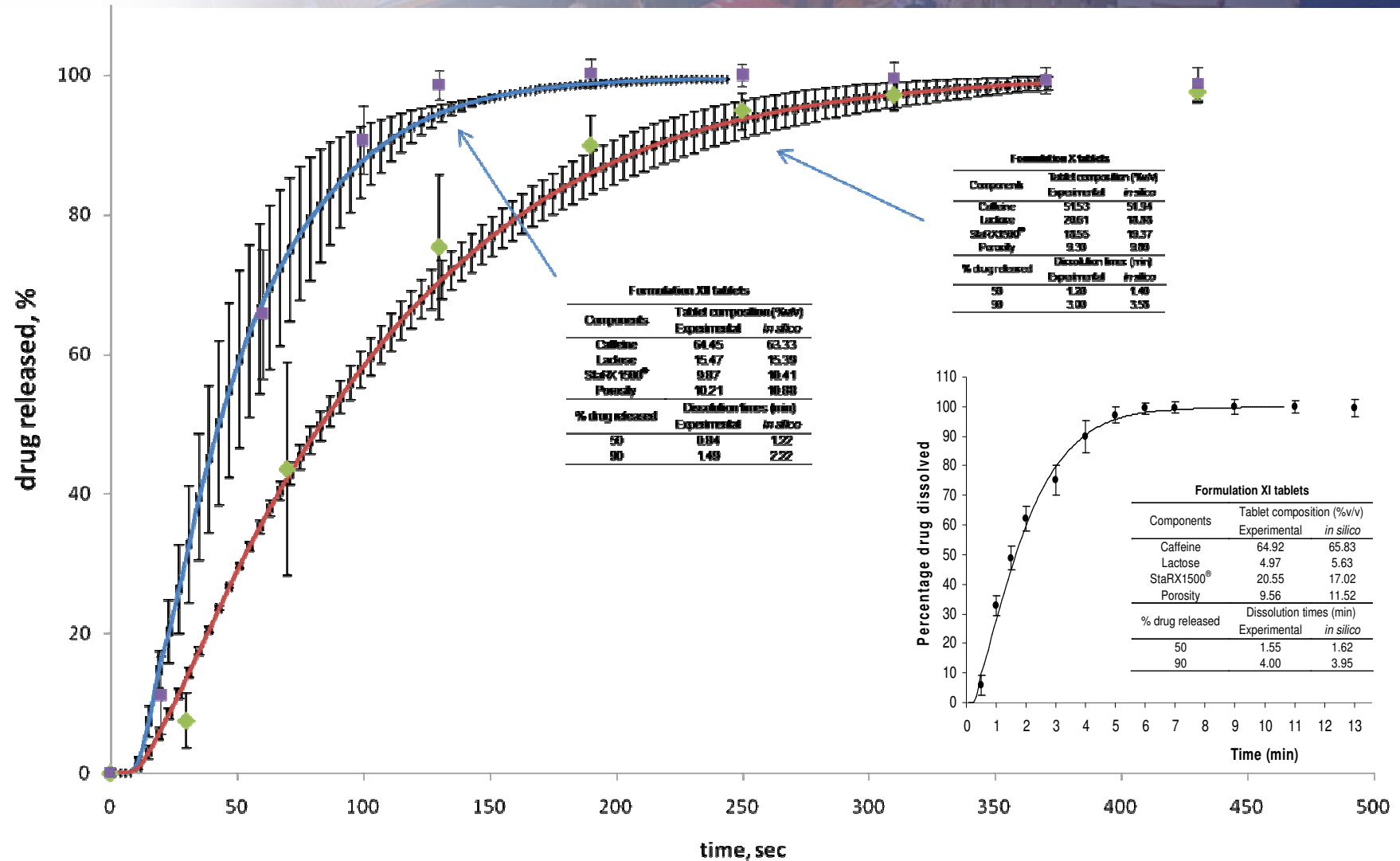
F-CAD DS – *in silico* Profiles



© Heath Scientific



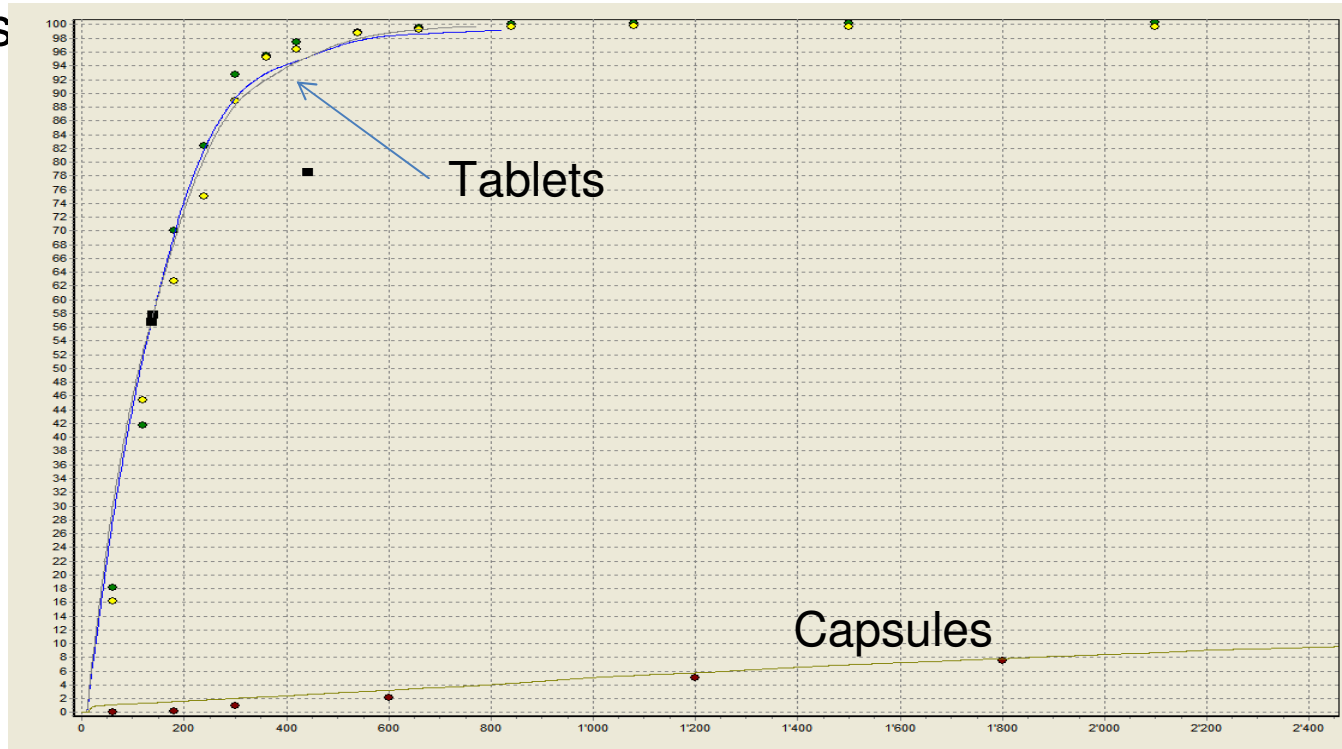
Experimental vs. in silico dissolution profiles of different formulations with caffeine



"Krausbauer E.: Contributions to a science based expert system for solid dosage form design. PhD Thesis; University of Basel: Basel, 2007."

Capsule/Tablet simulation with F-CAD

- System s



VES and F-CAD Screenshots



MiniGlatt simulator

Operation guide:

1. Set up the process air valve till green light lights on
2. Set up the required process temperature
3. Turn on the heater
4. Increase the Spray pressure to 0.5 bar
5. Wait till the temperature reaches the required value
6. Turn on "Process On" switch
7. Correct the process air valve to start the fluidization
8. Set up the pumping rate
9. Increase the atomization air pressure

Process air valve: 157.42940367 t64

Water remained in bed, kg: 0.011033657

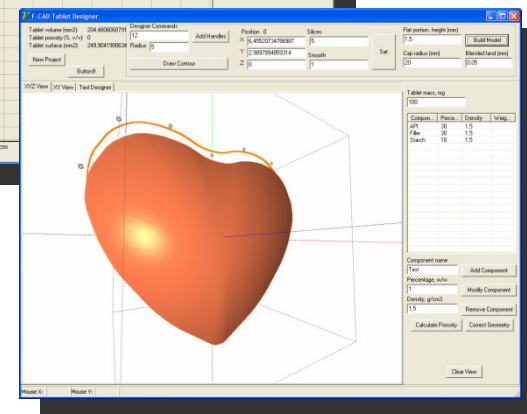
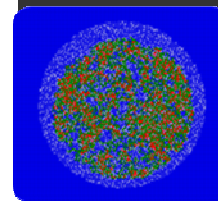
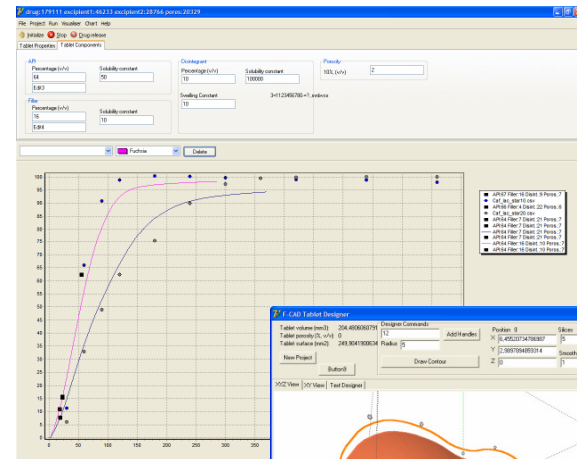
Particle size, μm

Fine: 48.19384;

Mean: 139.8391t

Coarse: 0

Random Factor Overlays



Orientation: Quality by Design (QbD)

Formulation R&D

- F-CAD
 - *In-Silico* formulation development
 - Risk assessment and mitigation
 - Cost reduction

**F-CAD
Robust
Formulation
n!**

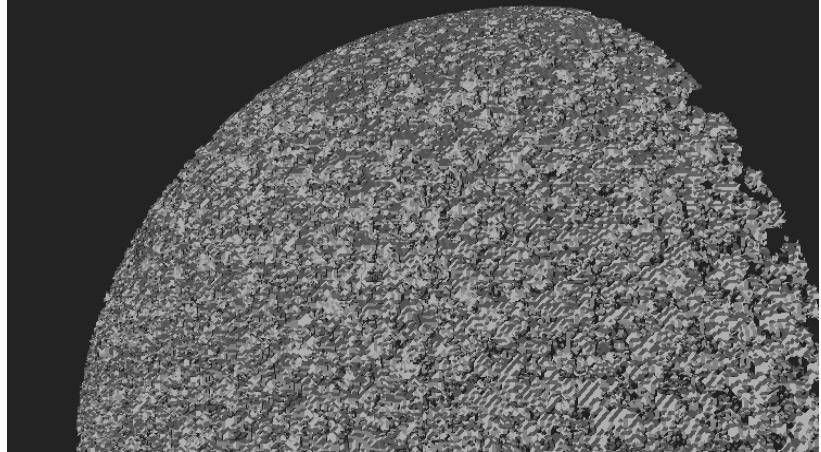
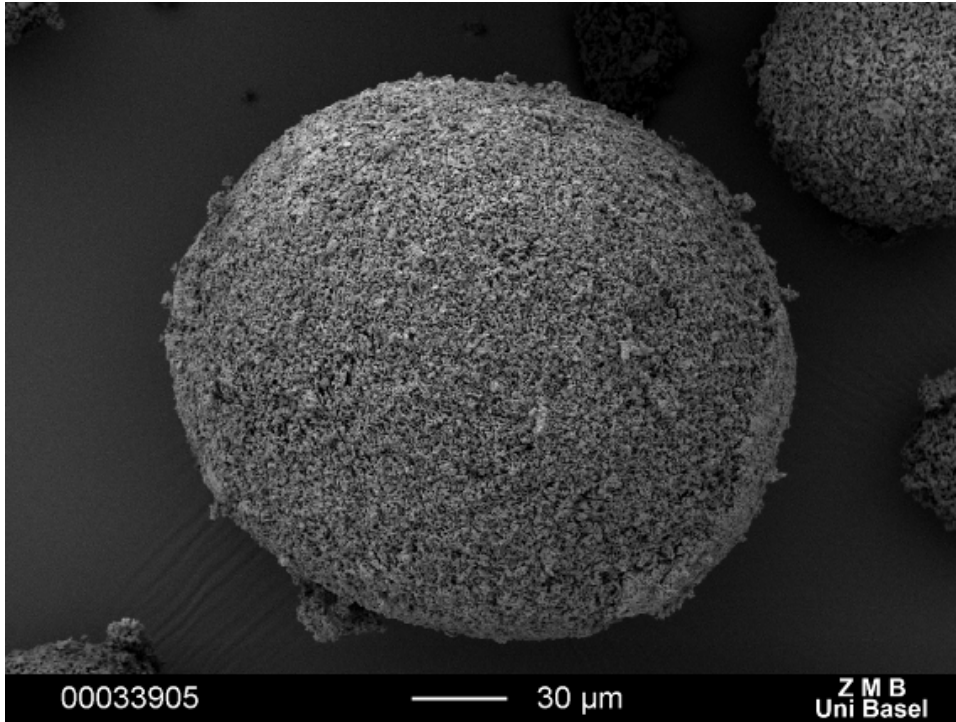
Production

Virtual Equipment Simulation (VES)
Continuous Education + Personalized
Training
Minimum human error

**VES
Operator
Training**

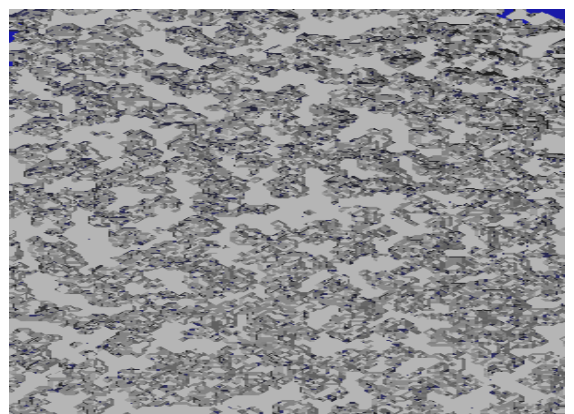
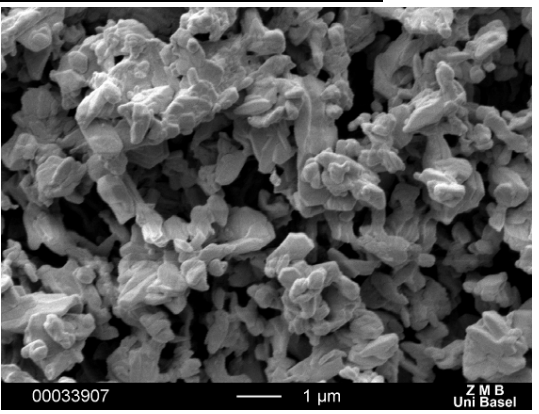
Benefits of F-CAD

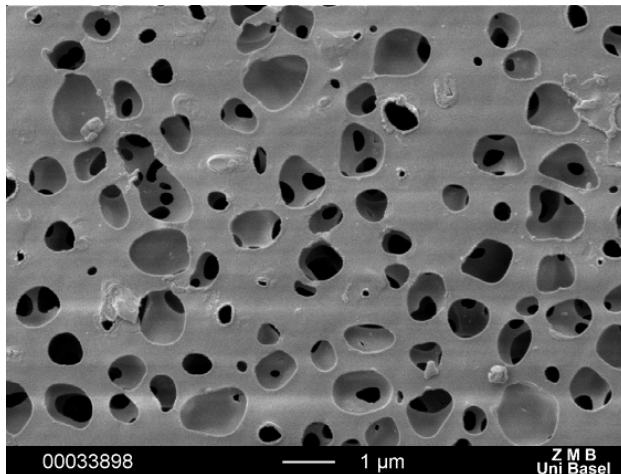
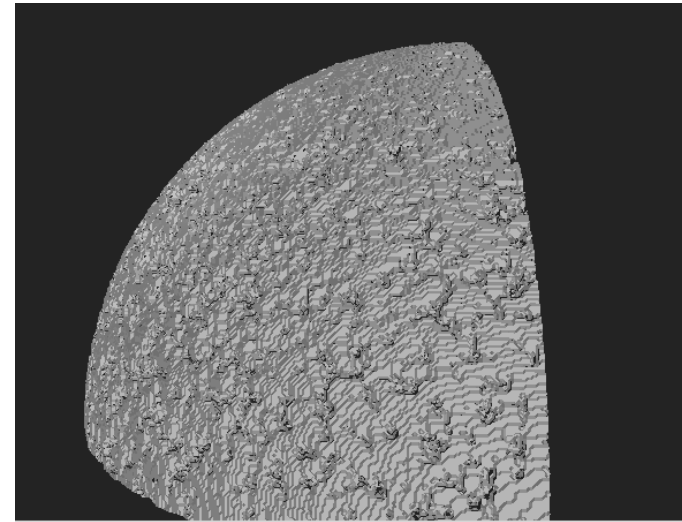
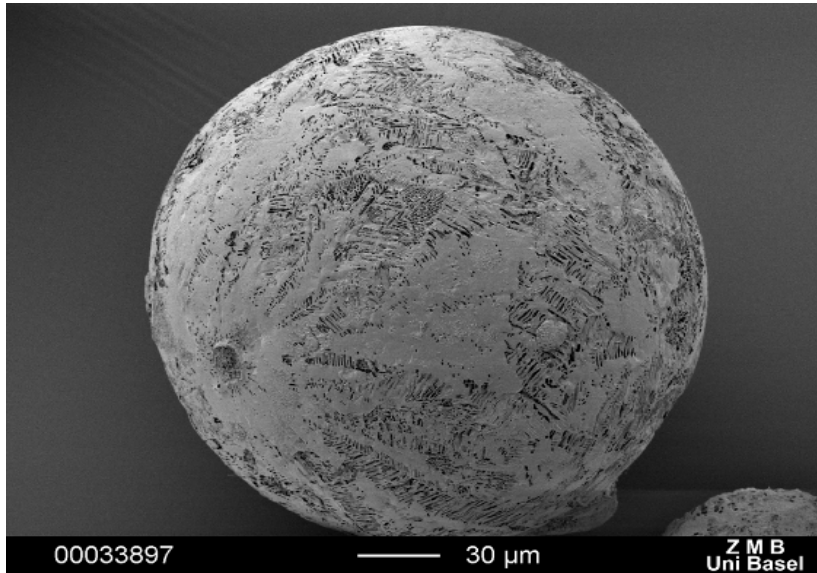
- Significant development **costs reduction**
- **Improves connectivity** between marketing and pharma R&D and production depts.
- Higher end-product quality – **Quality By Design (QbD)**
- Knowledge and experience management
- Unified solution for
 - Immediate and controlled release formulations
 - Support for different unit operations (granulation, milling, etc.)
 - Tablet size and shape design... and much more.... such as **Nanocomposite Pellets** with the correct aerodynamic diameter **for Inhalation** or e.g. **instant soluble** for **Injection of biopharmaceuticals** etc.



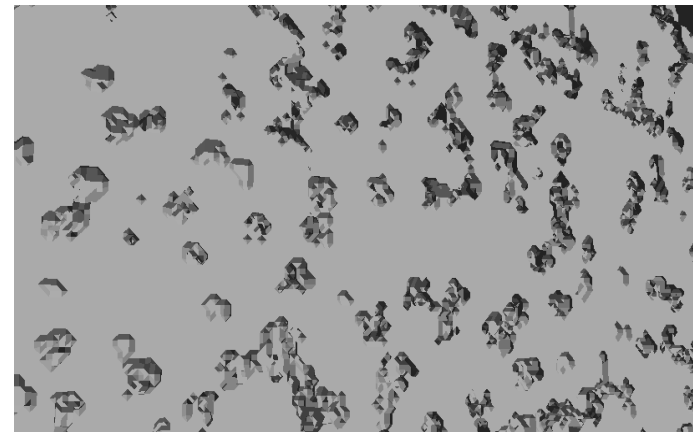
Spray freeze dried Mannitol pellets with ca. 80% porosity as a drug Carrier, Left: PhD Thesis M. Plitzko; Right: Computer generated nano - comp. pellets by F-CAD (www.cincap.ch).

Nanocomposite Pellets as drug carriers for instant soluble Injections Or for Inhalation of Biopharmaceuticals, see www.ifiip.ch





Left: Ref.
PhD Thesis
M.Plitzko,
Right:
F-CAD



Real and computer generated Nano-composite Dextran pellets as drug carriers.

F-CAD Selected Features

- Formulation design with F-CAD starts with final-product desired properties, such as shape, dissolution rate, etc.
- F-CAD is tablet shape sensitive.
 - F-CAD can be used to find out differences in dissolution profiles for different shapes of tablets with identical composition.
- Different particles size distributions of components will result into different dissolution profiles
- Effect of compact porosity is taken into account along with hydrophilicity/hydrophobicity, including solubility and swellability of the components.
- Run-time visualization of tablet undergoing in-silico dissolution test.



F-CAD - QbD

- Screening for robust formulation
- Setting up acceptance criteria for raw materials
- Analyse scale-up/scale-down issues and prevent problems

Computing formulation quality

- If we use computation do we still need experimental trials?
 - Yes. However, not for screening but confirmation
- If it is so good, can I substitute human scientists with it?
 - No. However, free your scientists from innovation hurdles induced by costly, time-consuming lab tests
- I have my know-how (technology, physical and chemical effect, etc.), can I integrate them into computational algorithms without going deep into mathematical or computational science?
 - You can and you have to! You can naturally use and enter all your available know-how(s), previously obtained experimental data to boost up versatility of your computed models.

Computer simulations can be used

- 1. to interpret experimentally measured data by providing the underlying physical models.**
- 2. to provoke experiments, that may confirm unexpected theoretical predictions.**
- 3. to replace e.g. biological experiments in case that the accuracy of the in-silico experiment is better than that of an experiment in a lab environment.**
- 4. to establish intellectual property rights by providing results for systems that have not yet been performed experimentally.**



Thank you for your attention!

Audience Q&A