

Use of PBPK in simulating drug concentrations in pediatric populations: Case studies of Midazolam and Gabapentin

WORKSHOP ON MODELLING IN PAEDIATRIC MEDICINES

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Goals

- Demonstrate the application of physiologically based pharmacokinetic (PBPK) modeling methods for nonlinear metabolism and transport
- Demonstrate the ability of PBPK modeling to predict PK for a pediatric population from adult and *in vitro* data

Methods – Physiological Models

- Gut: ACAT (Advanced Compartmental Absorption and Transit) model^{1,2}
- Physiologies: PEAR™ (Population Estimates for Age-Related Physiology) module within GastroPlus™
- Tissue-plasma concentration ratio (Kp) calculations using modified method of Rodgers & Rowland³

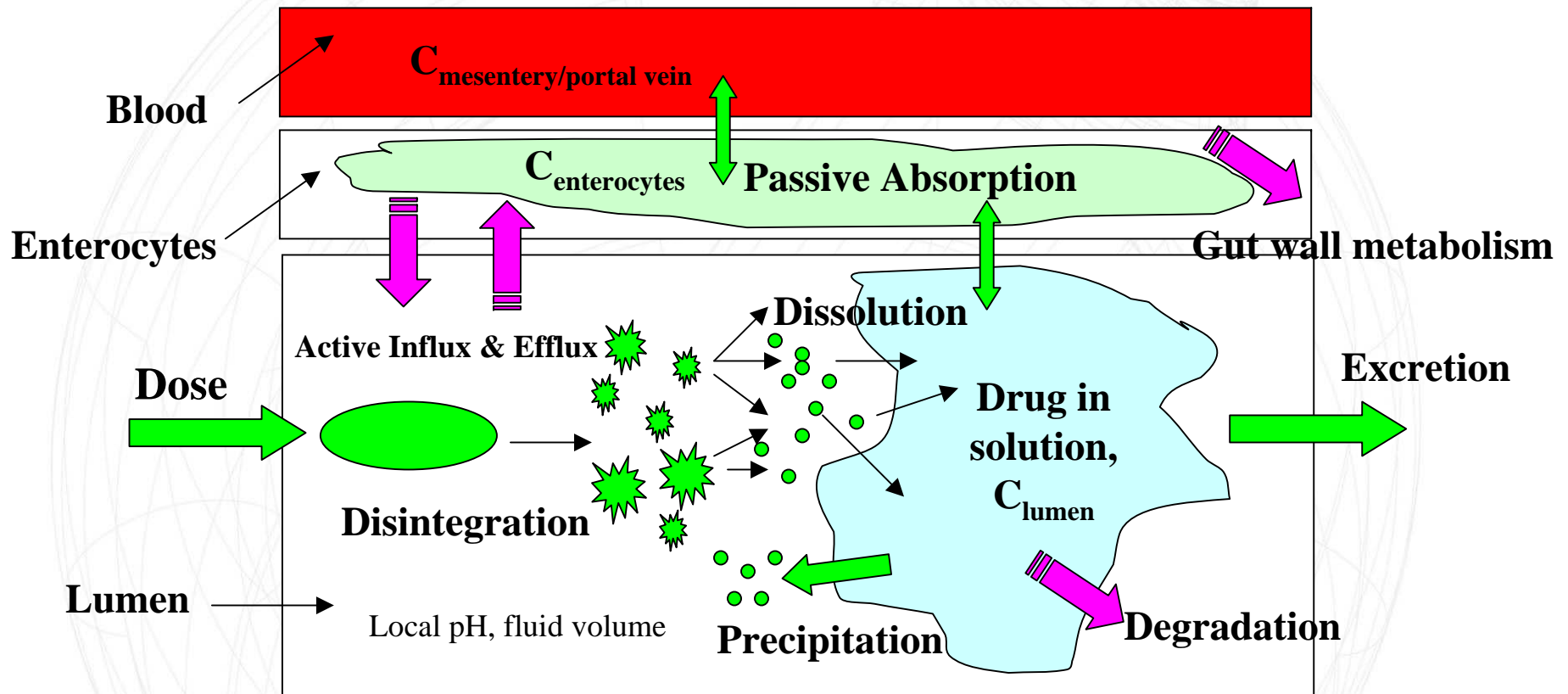
¹Yu, L.X. and Amidon, G.A., Int. J. Pharm. 186:119 (1999)

²Agoram et al, Adv. Drug Deliv. Rev. 50:S41 (2001)

³Rodgers et al, J. Pharm. Sci. 94:6:1259 (2005)

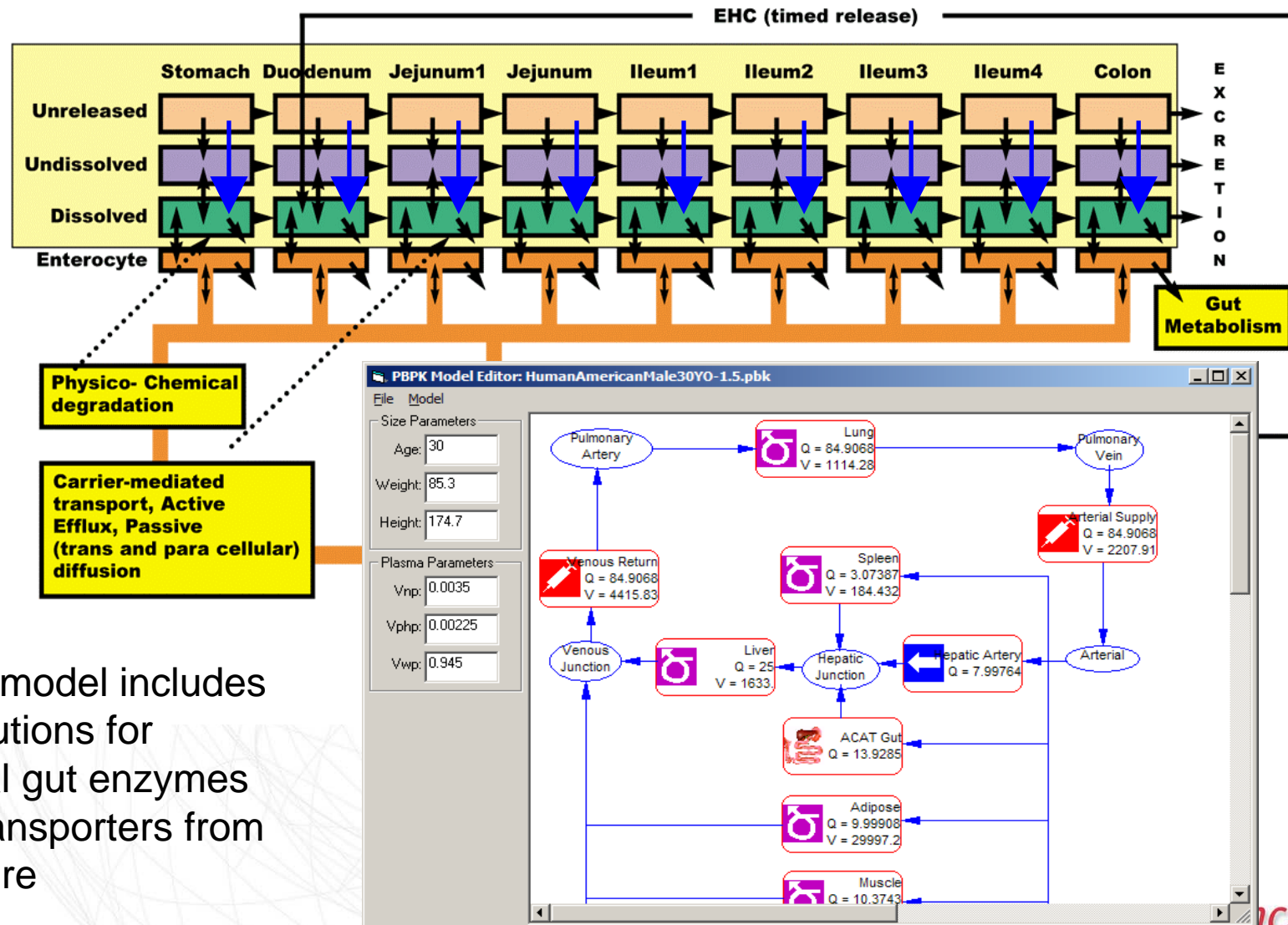


Processes Involved in Oral Absorption



These phenomena are repeated in each of the compartments of the gastrointestinal tract

ACAT-PBPK Combined Model



ACAT model includes distributions for several gut enzymes and transporters from literature

PEAR™ Physiology

Population Estimates for Age-Related (PEAR) Physiology generates body weight, height, body mass index, tissue weights and volumes, and tissue perfusion rates, for male or female, Western or Asian, at any age between 1 and 85 years.

Correlation models were fitted to data from the U.S. National Health and Nutrition Examination Survey (NHANES)¹ database for American (Western) physiologies and from a Japanese database² for Japanese (Asian) populations. Allometric scaling is used to scale individual tissue weights and perfusion rates.

Tissue volumes and perfusion rates are calculated for each tissue for each generated physiology^{3,4}

¹ <http://www.cdc.gov/nchs/nhanes.htm>

² Ogiu et al, Health Phys. 72(3):368 (1997)

³ Price, P.S. Crit. Rev. Toxicol. 33(5):469 (2003)

⁴ Haddad S., et al., J. Tox. Envir. Health 64:453 (2001)

Methods – Midazolam PK

- *in vitro* data for metabolism of midazolam in human liver microsomes
- *in silico* tissue partition coefficients (K_p s) using modified method of Rodgers & Rowland
- *in silico* physico-chemical properties (ADMET Predictor™) when experimental values were not available
- Assess default adult model for midazolam iv and po doses using nonlinear gut and liver clearance
- Validate the absorption/PK model using adult data for oral dose
- Reduce 3A4 metabolism (V_{max}) for pediatric populations using published data for enzyme expression levels
- Conduct Virtual Trial for pediatric population and compare to observed results

Midazolam Data

- In vitro metabolism (microsomes)¹:
 - $V_{max} = 850 \text{ pmol/min/mg msp}$
 - $K_m = 3.7 \text{ }\mu\text{M}$
- Intravenous plasma concentration-time in adults²
- Plasma concentration-time data after oral doses in adults²
- Expression levels of 3A4 in adults³ and children⁴
- Plasma concentration-time data after oral dosing in children⁵

¹Paine, M. J. Pharmacol. Exp. Therap. 283(3):1552 (1997)

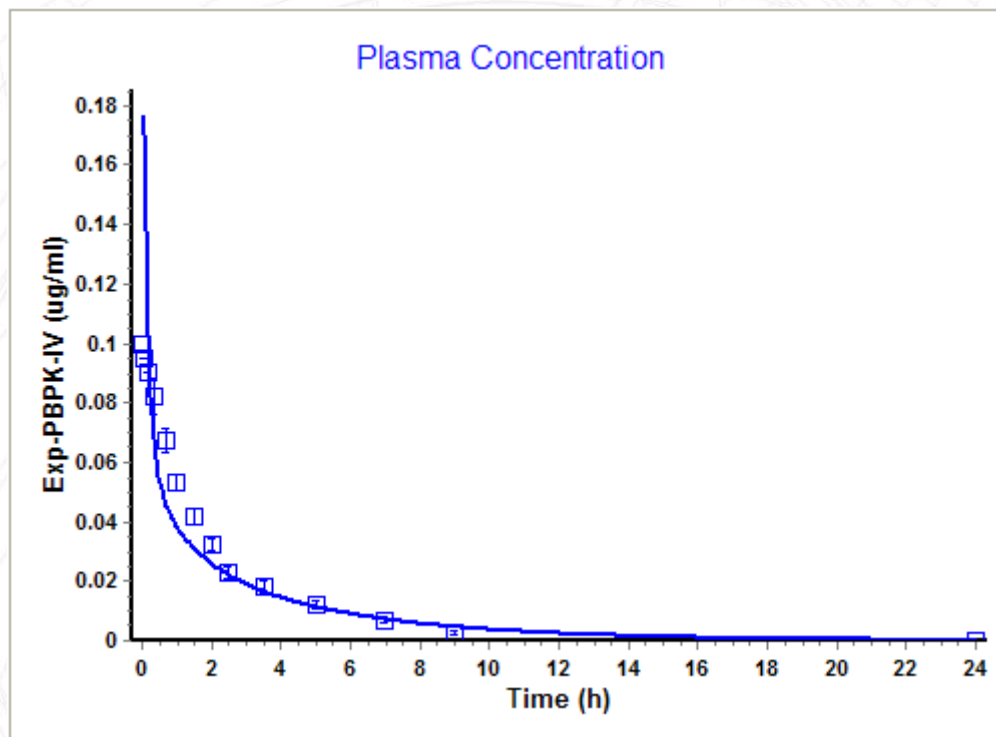
²Kupferschmidt, H.H. et al, Clin. Pharmacol. Therapeut. 58:20 (1985)

³Inoue, S. et al, Xenobiotica 36(6):499 (2006)

⁴Johnson, T.N. et al, Br. Clin. Pharm. 51(5):451 (2001)

⁵Johnson, T.N. et al, Br. J. Anaesth. 89(3):428 (2002)

IV-bolus

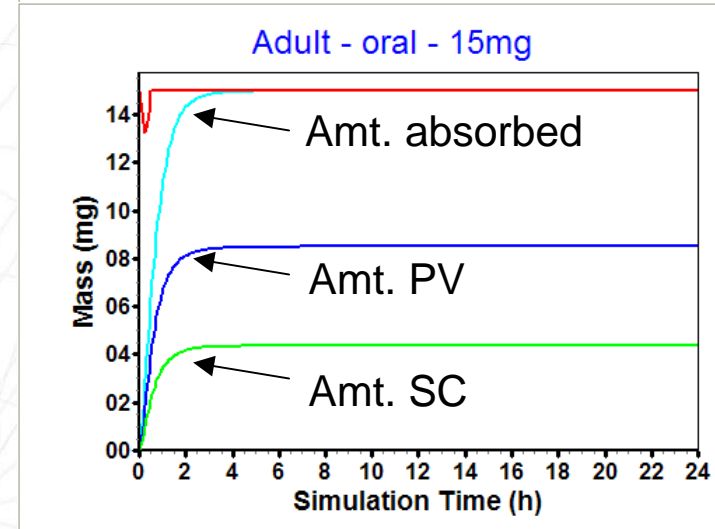
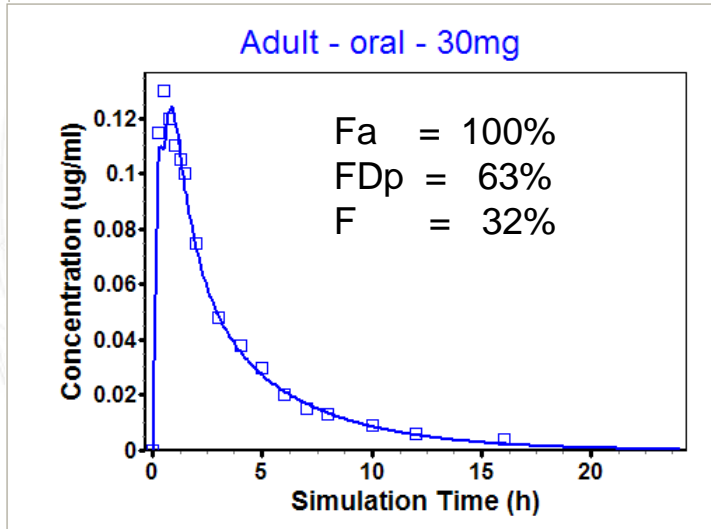
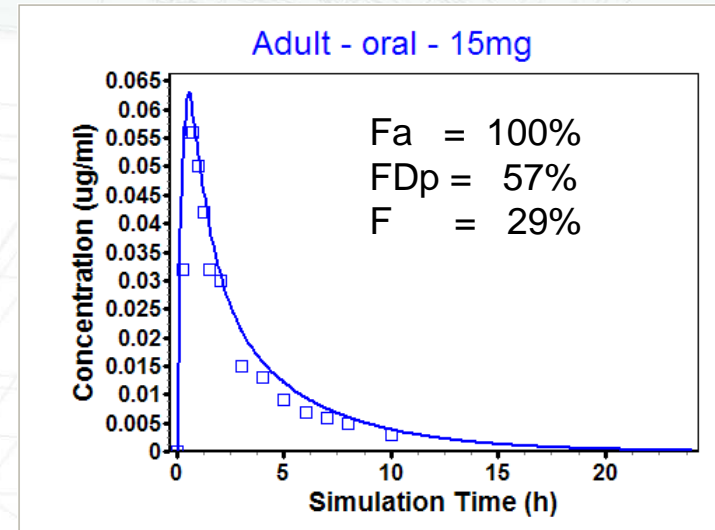
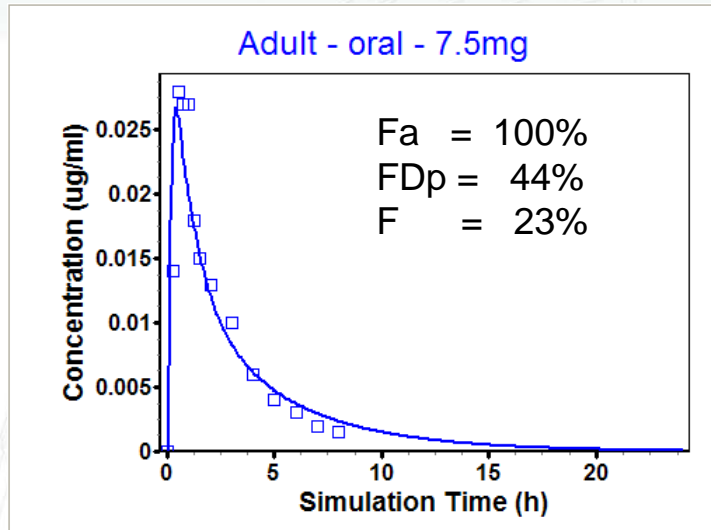


In vitro Vmax and Km, *in silico* Kps, American male 18 yo physiology, default ACAT



7.5, 15, and 30 mg po Doses in Adults

(the same non-linear model used for all three doses)



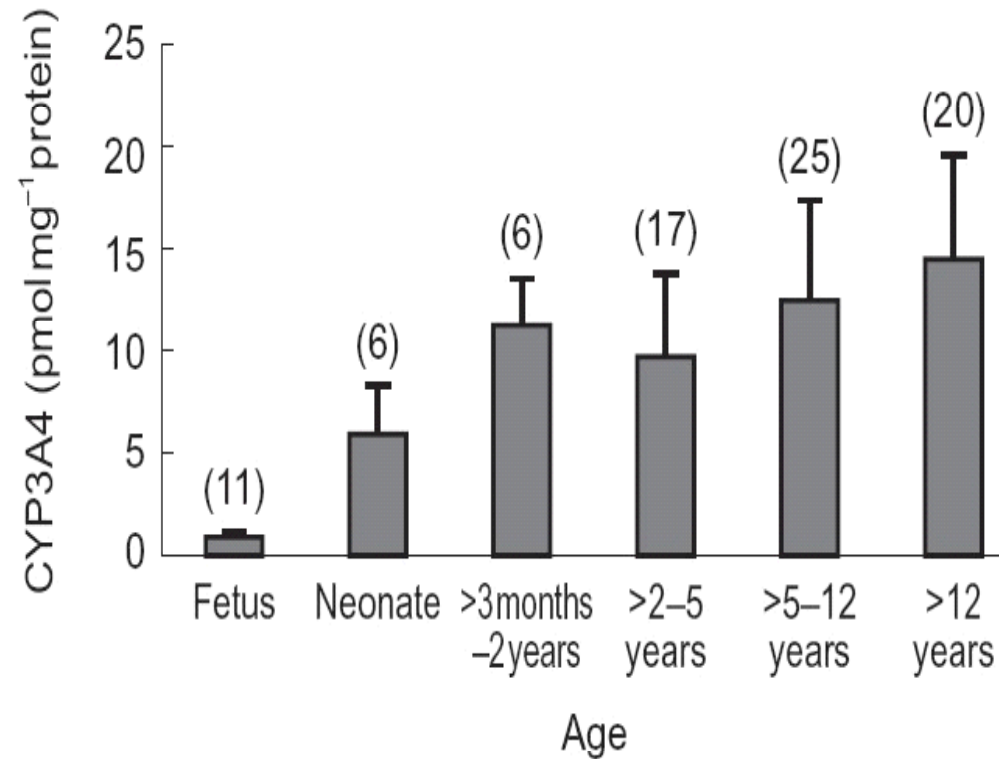
PK - same as for IV dose

absorption – selected model that provides the best match

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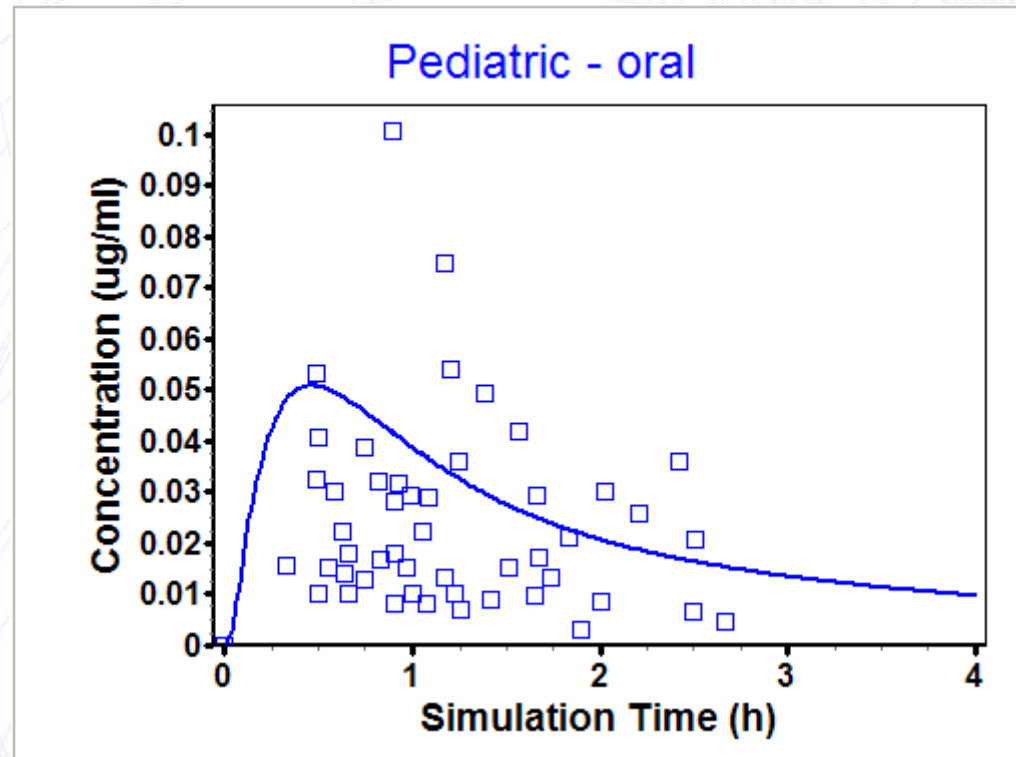


Changes in CYP 3A4 Expression in Duodenum of Pediatric Subjects



Johnson, T.N., Br. J. Clin. Pharm. 51(5):451 (2001)

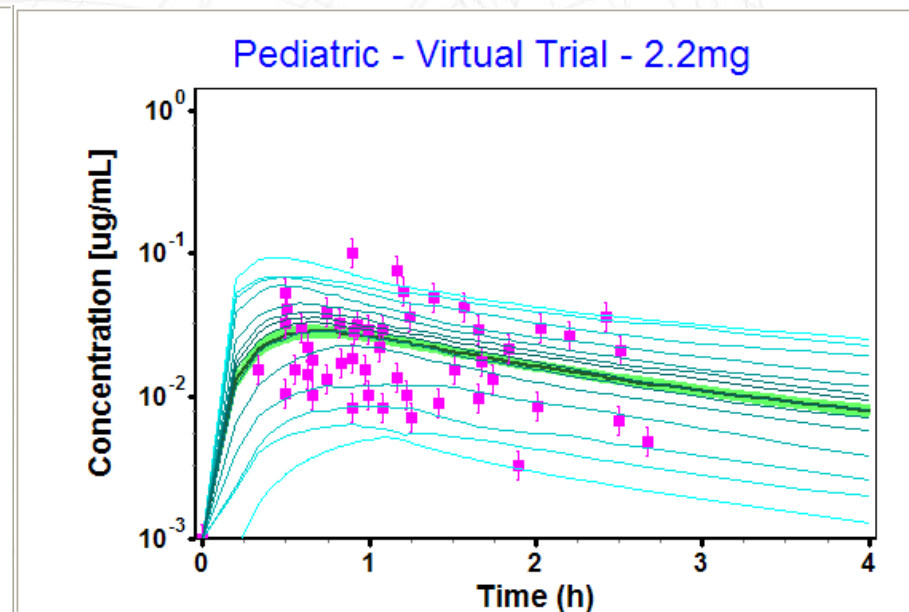
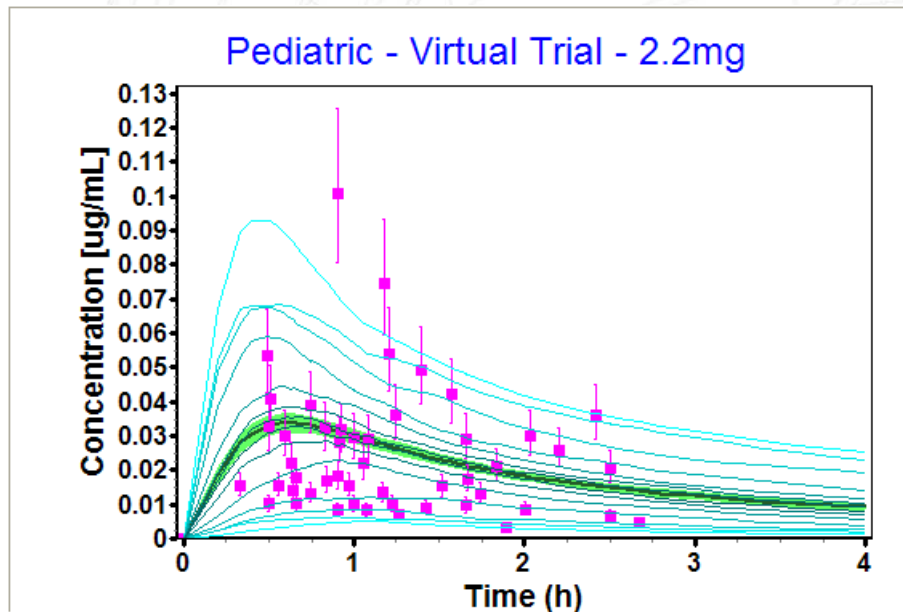
Results: Midazolam Pediatric 2.2 mg Oral Solution – Vmax Reduced 30%



In vitro Vmax and Km, *in silico* Kps, American male 5 yo physiology
PK – used the same assumptions as in adult model
absorption – used the model validated on adult data

Pediatric PBPK Virtual Trial Results

Virtual Trial sampled variables: all ACAT physiological variables, all PK parameters, subject age and gender within constraints, body weight and height around baseline physiology for sampled age and gender, all PBPK tissue volumes and perfusion rates



Methods – Gabapentin PK

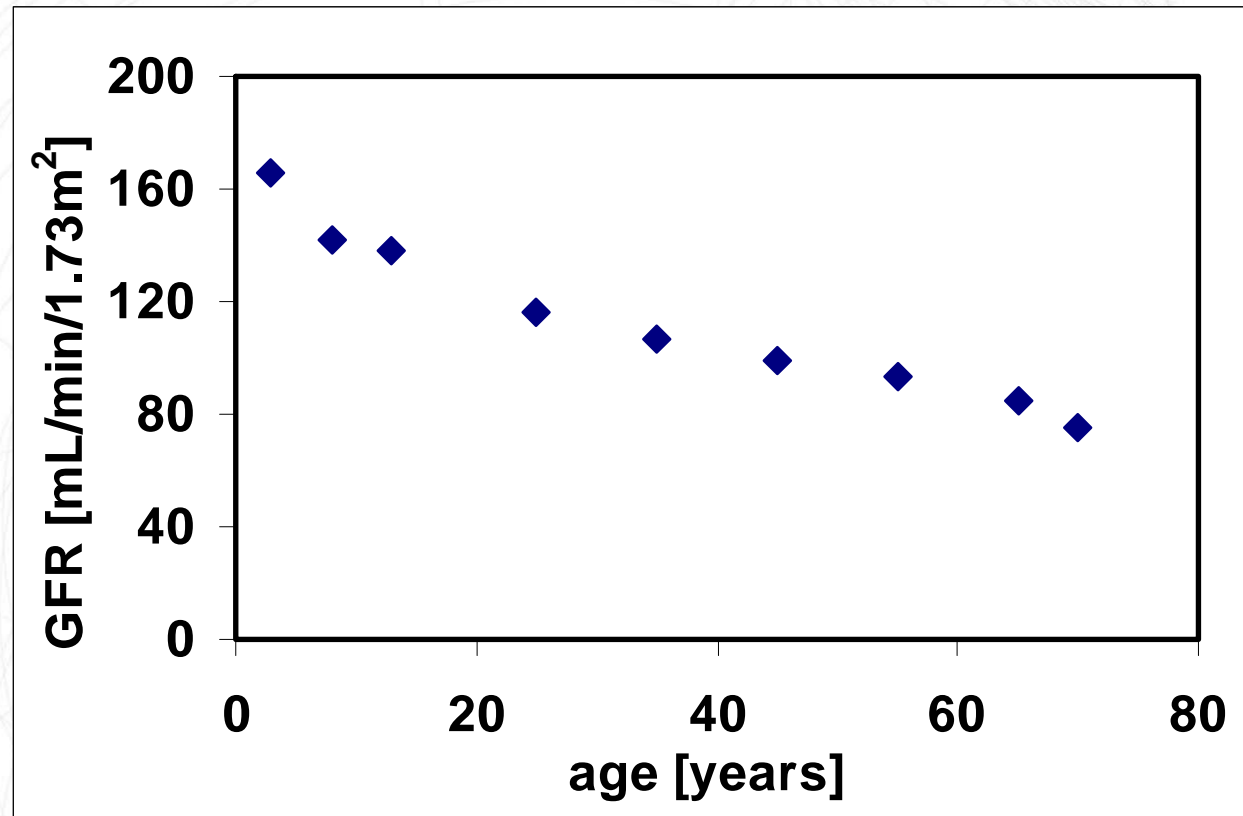
- Obtain literature data for gabapentin PK in adults and children
- *in silico* tissue partition coefficients (K_p s) using modified method of Rodgers & Rowland
- *in silico* physico-chemical properties (ADMET Predictor™) when experimental values were not available
- Build absorption and PBPK model based on adult data
- Conduct Virtual Trial for pediatric population and compare results with observed pediatric population data

¹Ouellet D., Epilepsy Research 47:229 (2001)

²Gidal B.E., Epilepsy Res. 40:123 (2000)

³Gidal B.E., Epilepsy Res. 31:91 (1998)

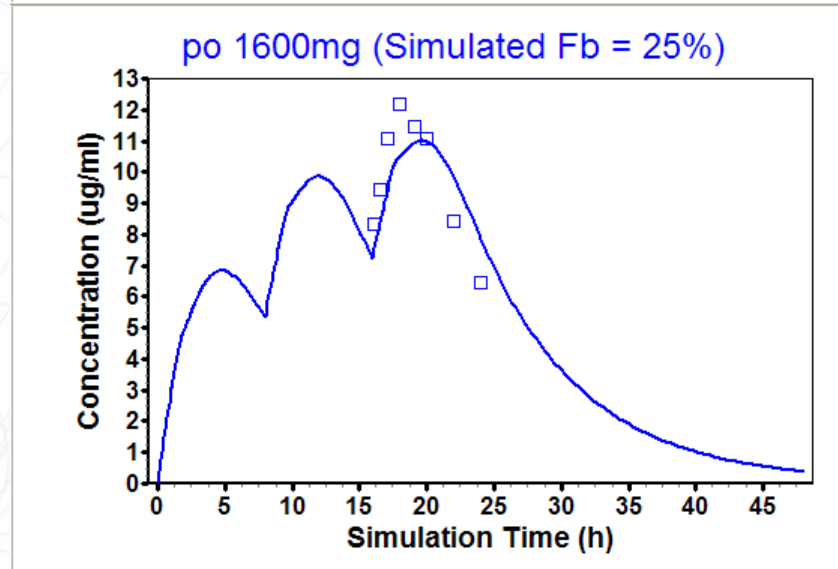
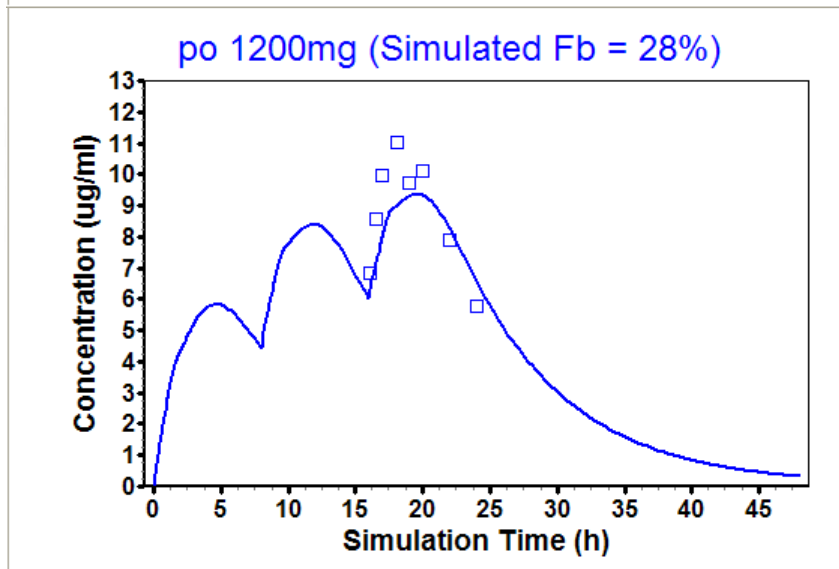
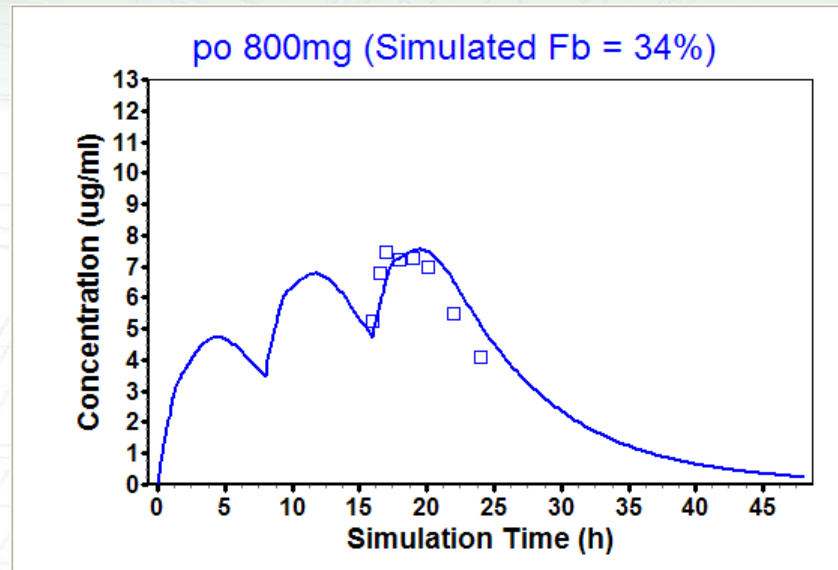
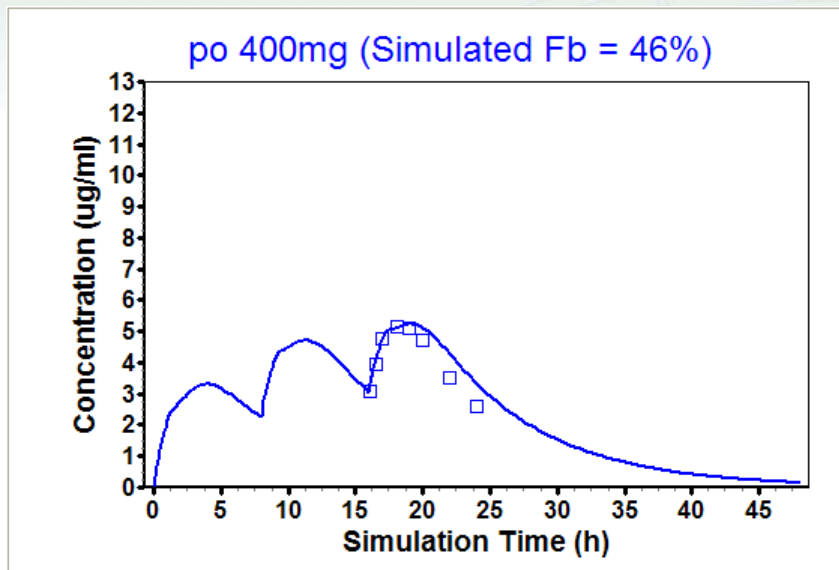
Gabapentin CL Modeled as Function of Glomerular Filtration Rate



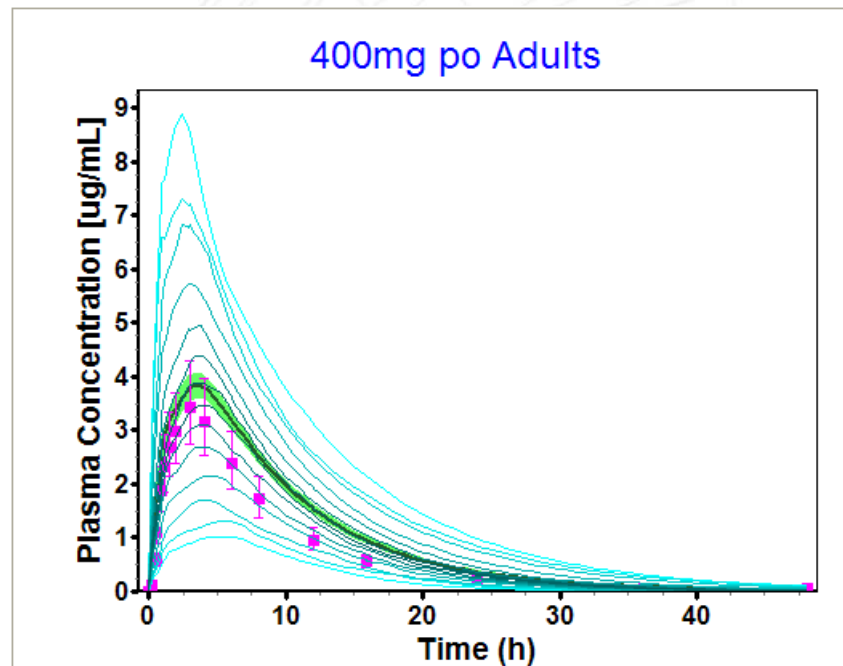
Mego S. 36th Annual Scientific Meeting of the Australian and New Zealand Society of Nuclear Medicine (poster)
Stevens L. FAQ about GFR Estimates (National Kidney Foundation publication)



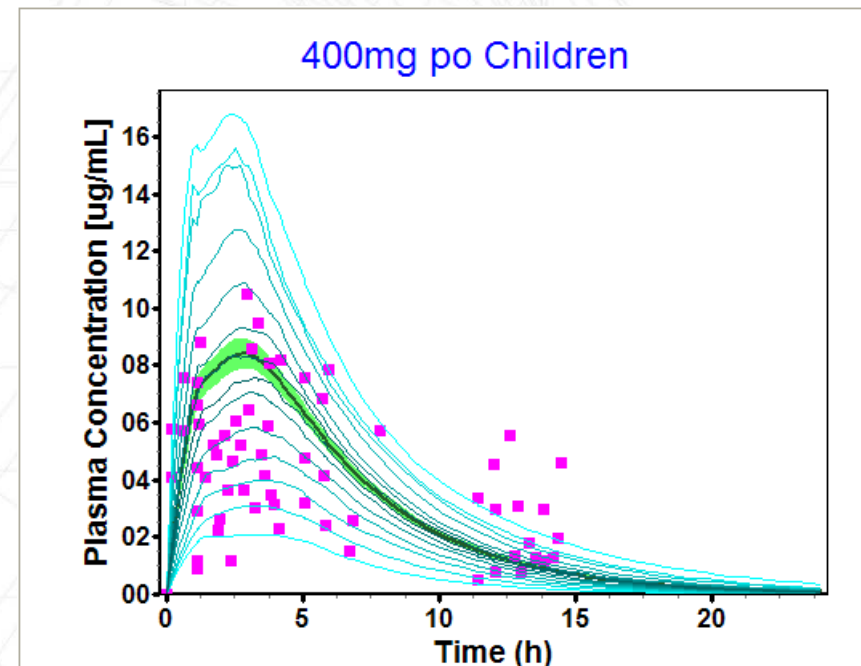
Gabapentin Nonlinear Dose Dependence in Adults



Adult and Pediatric Population Simulations



400 mg solution: 41 yo adult female



400 mg tablet, 7 yo children

Conclusions

- State-of-the-art PBPK modeling methods are appropriate for nonlinear metabolism and transport
- Bioavailability and plasma concentration-time can be predicted with reasonable accuracy from *in vitro* data and *in silico* predictions when the *in vitro* measures of metabolism/clearance are representative of *in vivo* processes
- State-of-the-art PBPK modeling can predict pediatric PK from adult and *in vitro* data when such data are available
- Population studies with PBPK models allow the selection of focused populations with specified ethnicity, age ranges, and gender percentages
- PBPK/PD modeling may provides a new approach for the modeling and prediction of pharmacodynamic effects based on simulated tissue concentrations