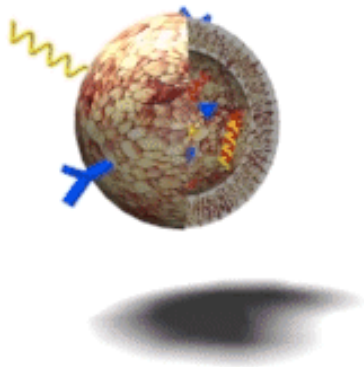


# DRUG RELEASE METHODOLOGIES FOR NANOMEDICINES *ADDRESSING CHALLENGES*



**PROF. PADMA V. DEVARAJAN**

Dept. of Pharmaceutical Sciences and Technology

Institute of Chemical Technology (ICT)

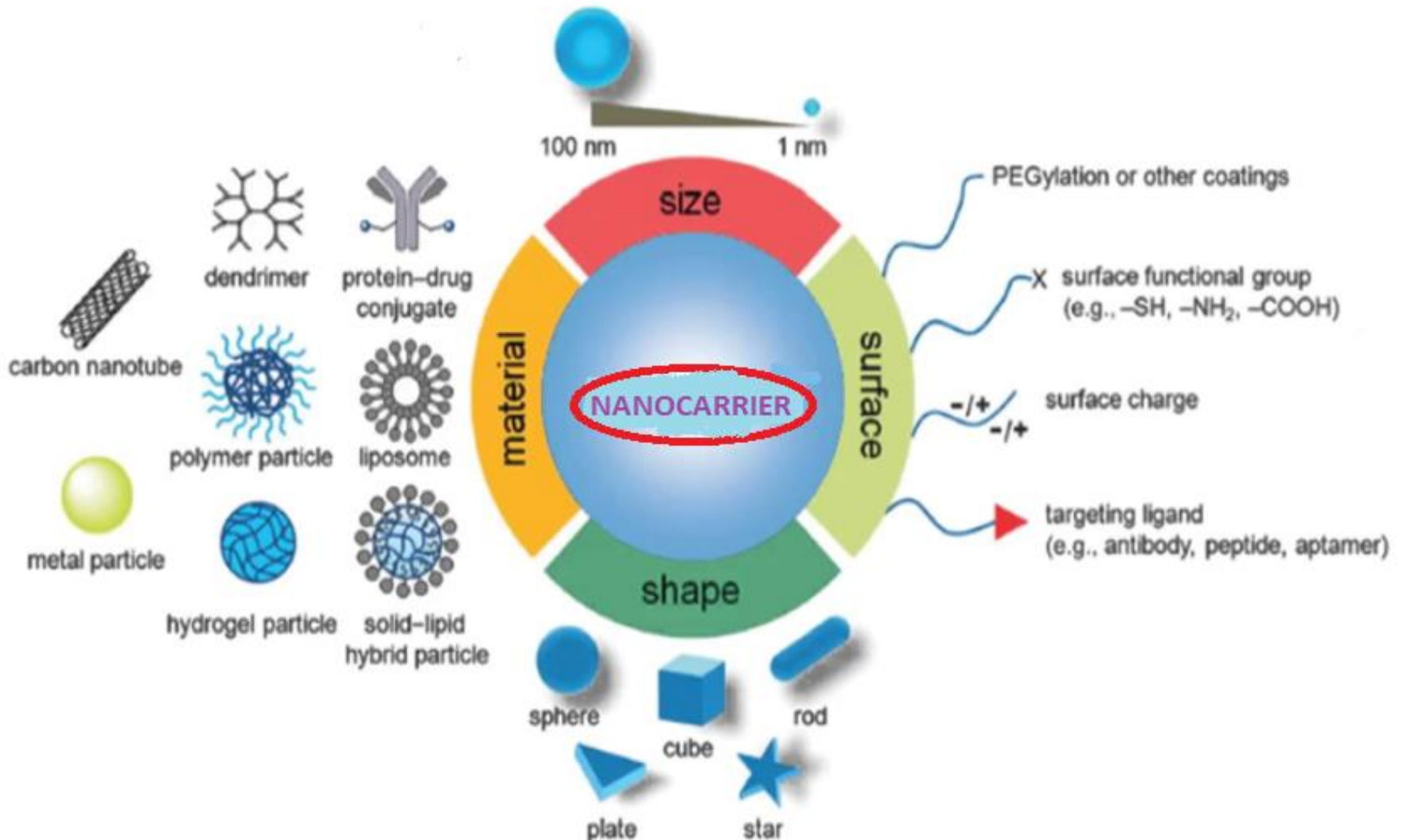
Deemed University, Elite status and Centre of Excellence (GOM),

Mumbai 400 019, INDIA

E-mail: [pvdevarajan@gmail.com](mailto:pvdevarajan@gmail.com)

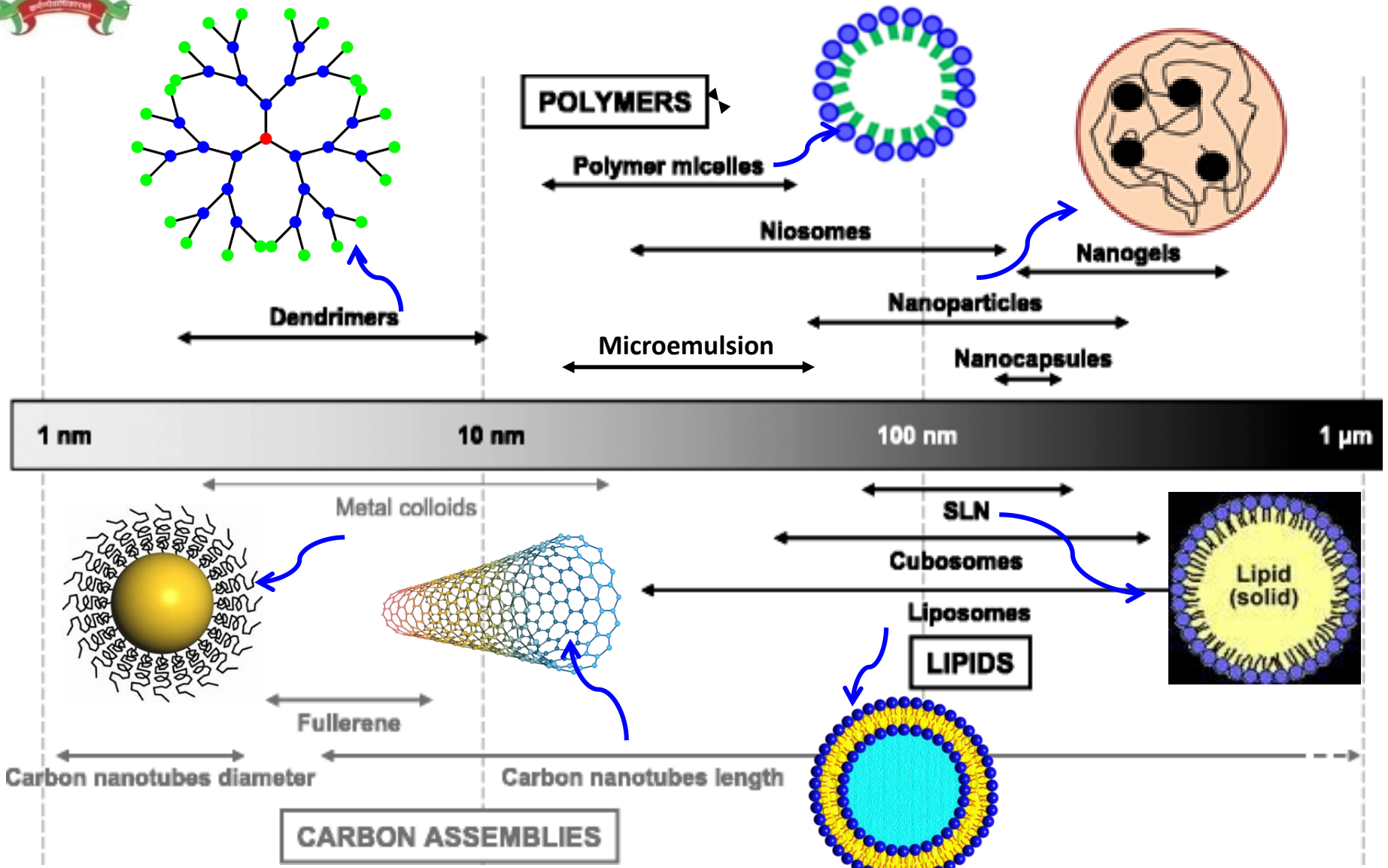
**DISSO EUROPE – ROMANIA, OCTOBER 20-21, 2016**

# NANOMEDICINES





# NANOCARRIERS IN NANOMEDICINE





# ADVANTAGE - NANOMEDICINE

- ✓ TARGETTED DELIVERY
- ✓ ENHANCED EFFICACY
- ✓ DECREASED SYSTEMIC TOXICITY

## SUCCESS STORIES

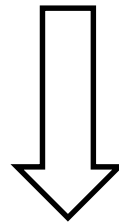
CANCER

INFECTIOUS DISEASES

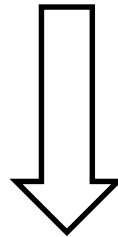


# Nanosystems and Need for *in vitro* Dissolution testing

Nanosystems are promising



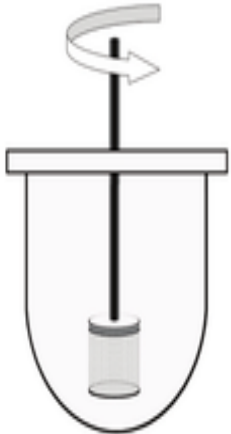
Unavailability of standardized *in vitro* dissolution method



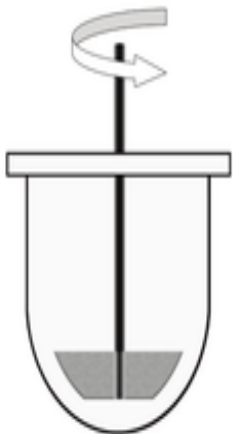
Urgent Need to develop Standardized Testing Methods



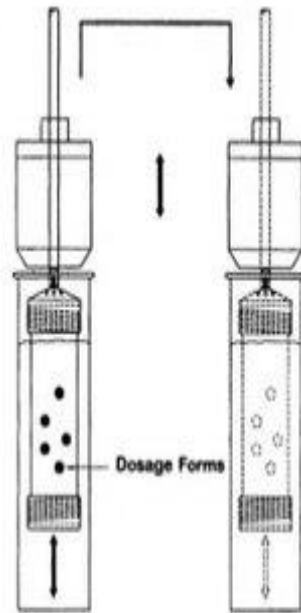
# OFFICIAL USP DISSOLUTION APPARATUS



Type I



Type II



Type III



Type IV



Type VII



# CHALLENGES IN DISSOLUTION METHOD FOR NANOMEDICINES

## Size & Separation

- Difficulty in Separation of NP from medium

## Complex System

- Complexity of System type
- Target specific release
- Environment specific release (pH, temperature)
- Programmed Release





# **DISSOLUTION METHODS FOR NANOMEDICINES**



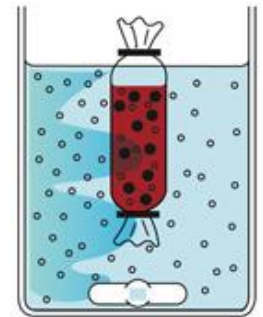


# DISSOLUTION METHODS

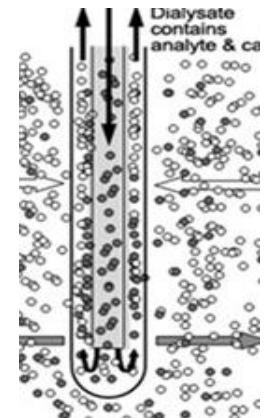
❑ Sample & Separation methods



❑ Membrane Diffusion (Dialysis Sac) methods



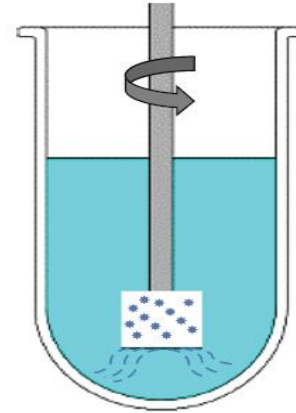
❑ Others (Micro dialysis, Dynamic dissolution & 2 stage reverse dialysis)





# MODIFIED OFFICIAL APPARATUSES

❑ Constant Volume



❑ Continuous Flow Methods



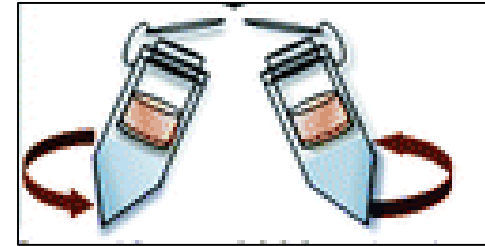


# SAMPLE & SEPERATION METHODS

- NP directly added in medium & separation techniques applied
- Drug content in supernatant or filtrate is analyzed



Ultrafiltration



Ultracentrifugation



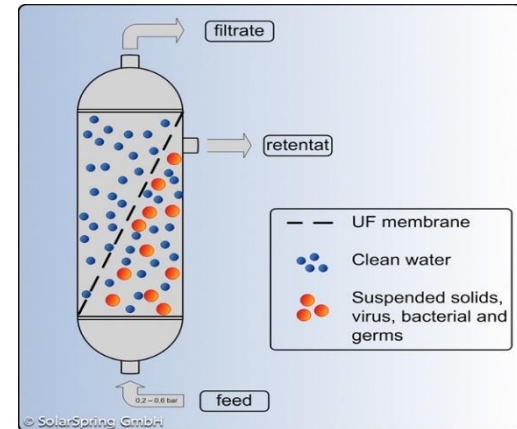
Key parameters : **Sample separation technique**  
**Agitation conditions**



# SAMPLE & SEPARATION METHODS

## Pressure Ultrafiltration

- Completely separate Nanoparticles from release media within 5 min
- Prevent Clogging of filter pores



SCHEMATIC

## Syringe Filtration

- Use of Syringe filters with smaller pore size (0.1 to 0.02  $\mu\text{m}$ ) has been used

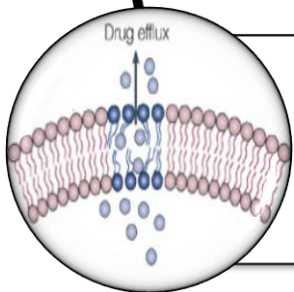




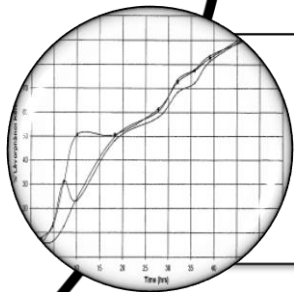
# DISADVANTAGES OF SAMPLE & SEPARATION METHODS



Difficulty in separation of NP from media though high external energy applied



Long-time & High speed can result in destabilization of system (e. g. Nanoemulsion & Liposome)

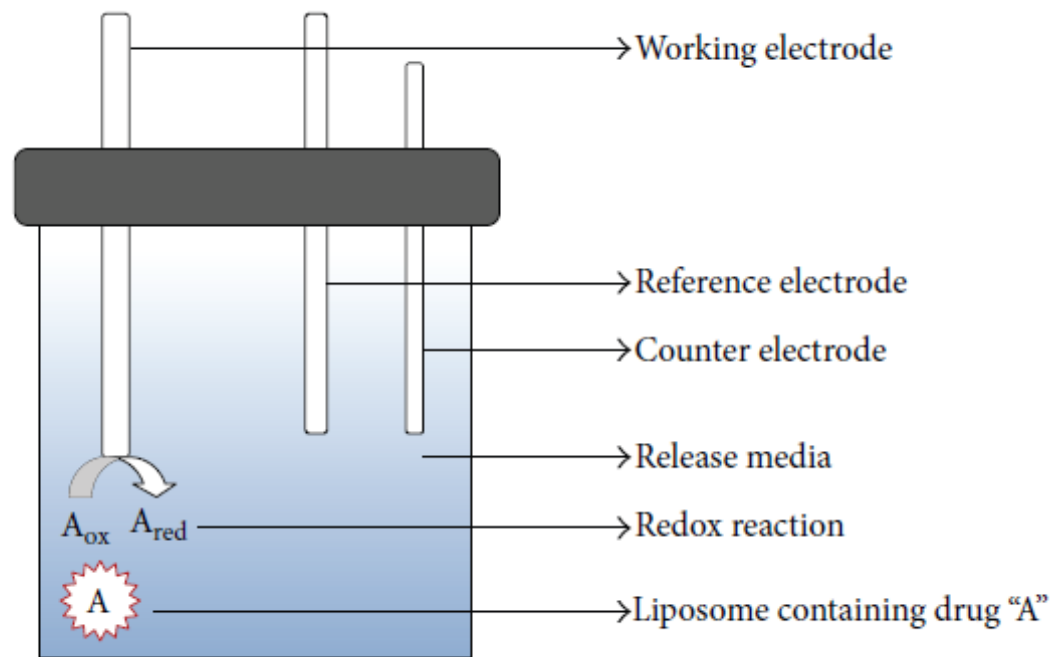


Drug release continues during separation process, which can lead to erroneous results



# DYNAMIC DISSOLUTION

## ADVANCED SAMPLE AND SEPARATE METHOD



Utilize ion- or drug-selective electrodes to monitor the dissolution/release profiles of electroactive drugs

Not suitable for non-electroactive drugs



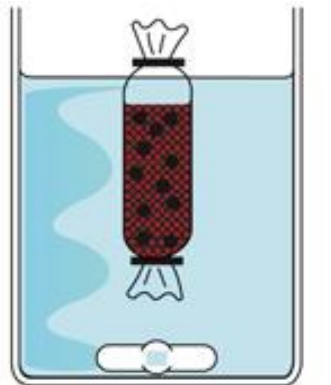
# DIALYSIS METHODS

## FIXED VOLUME

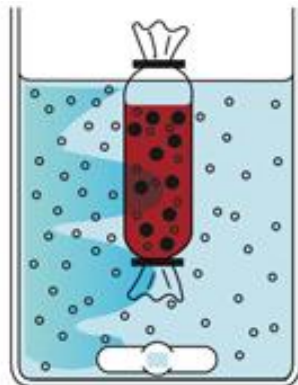


# MEMBRANE DIFFUSION METHODS (DIALYSIS BAG)

Nanosystems separated from the release medium through dialysis membranes that are permeable to the free drug but impermeable to the nanosystems

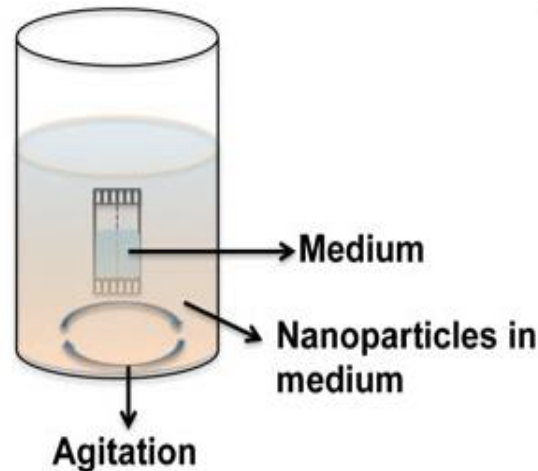


Start Dialysis  
(high concentration gradient)

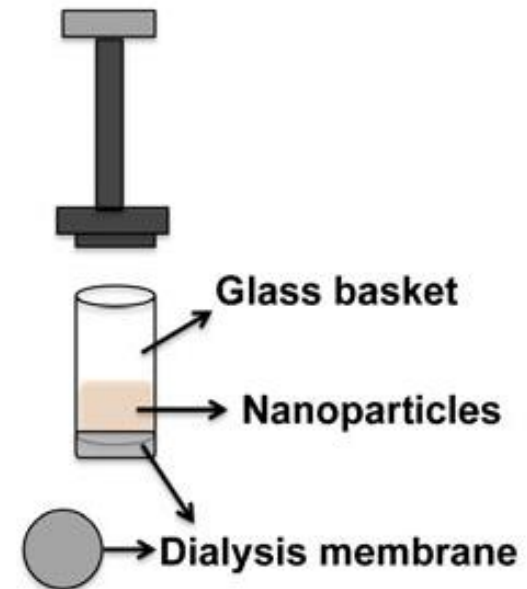


End Dialysis  
(equilibrium)

Dialysis Sac Method



Reverse Dialysis Sac  
Method

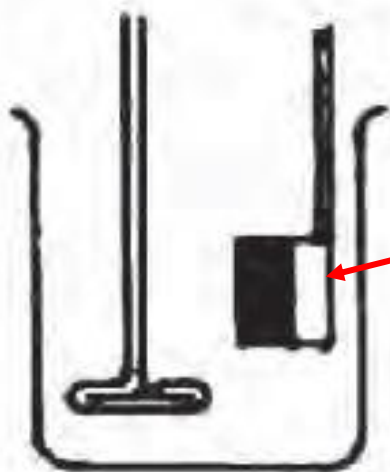


Side-by-Side-  
Dialysis



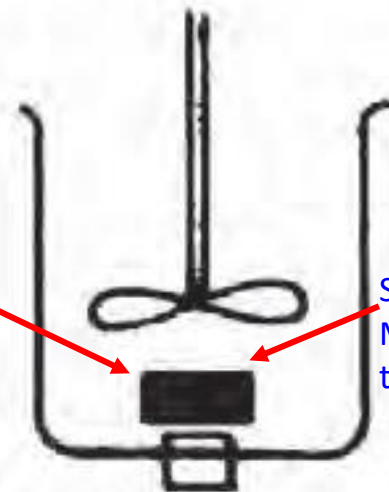


# DEVELOPMENTS IN DISSOLUTION METHOD



**Stationary basket**  
Cook (1968)

Dialysis Bag

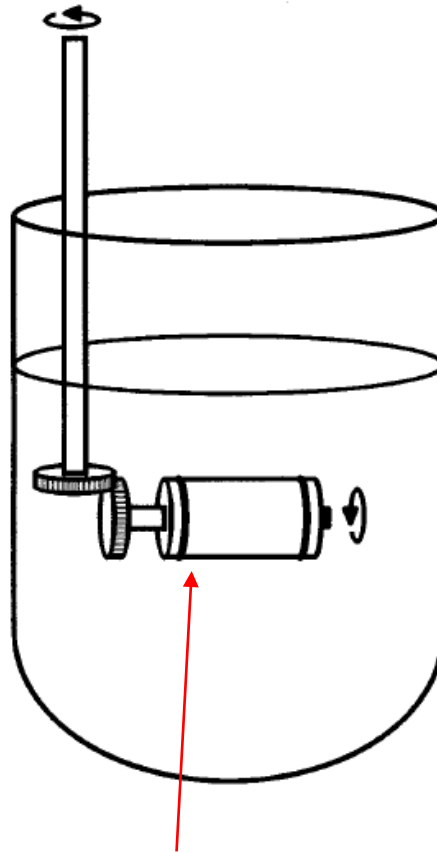


**Magnetic basket**  
Shepherd, *et al* (1972)

Stirring  
Magnet inside  
the bag



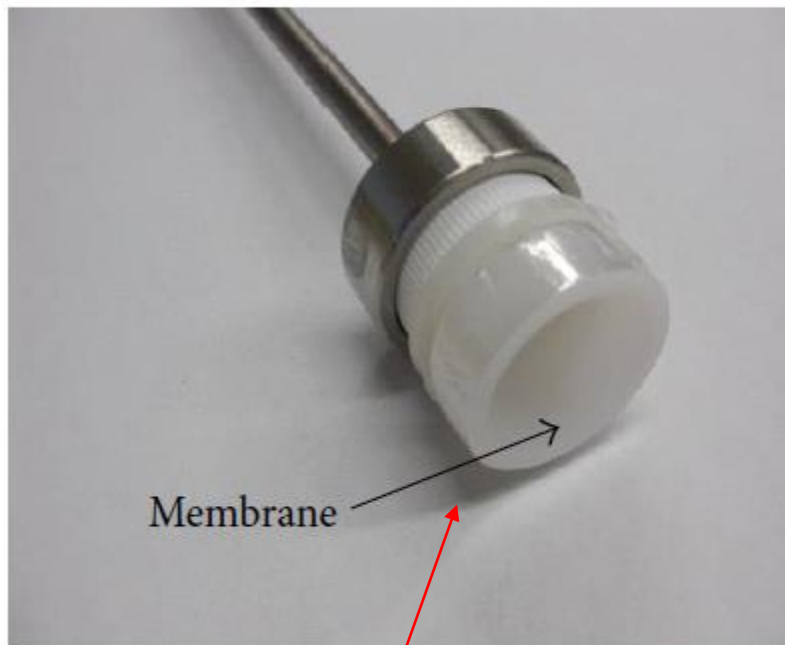
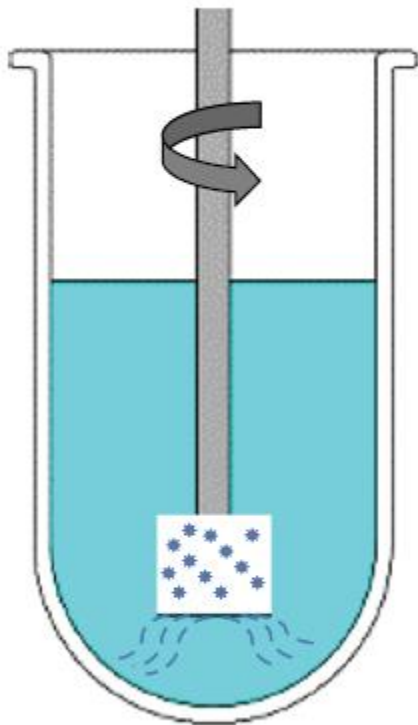
# ROTATING DIALYSIS CELL FOR PARENTERAL DEPOT FORMULATIONS



BASKET MODIFIED INTO A DIALYSIS CELL



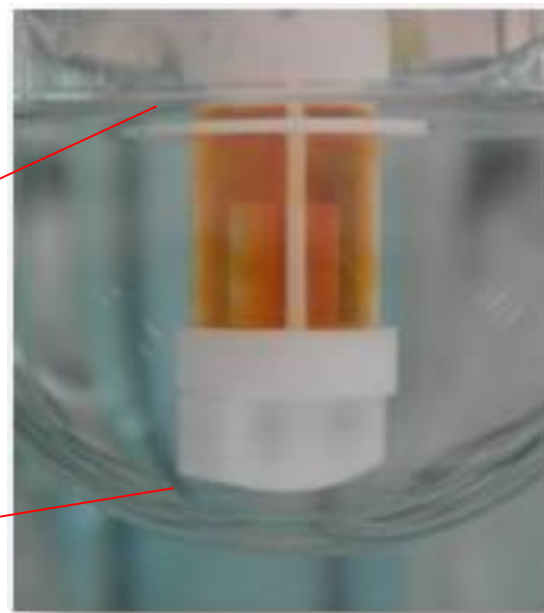
# ADAPTATION OF DIALYSIS AND USP TYPE I



BASKET MODIFIED INTO A DIALYSIS CELL



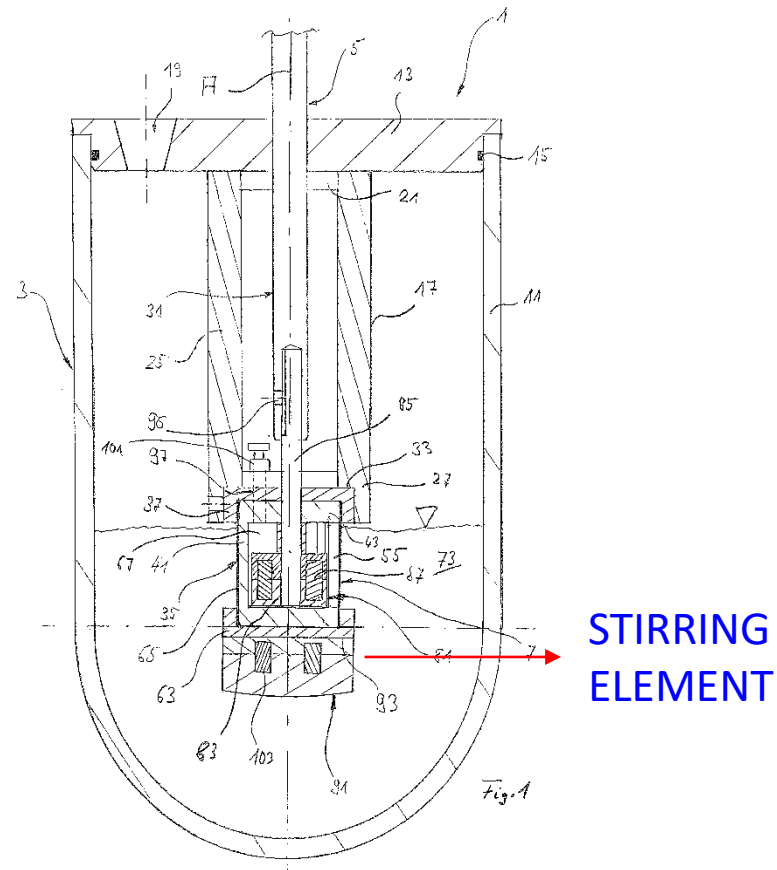
# ADAPTATION OF DIALYSIS AND USP TYPE I & II (Phamatest)



- Pharma Test offers the “dispersion releaser”
- High sensitivity for fluctuations in release rate
- Works well for compounds **with poor, moderate and good solubility**



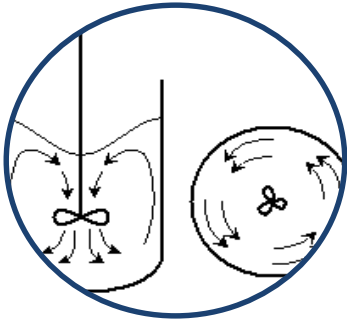
# ADAPTATION OF DIALYSIS AND USP TYPE I & II (Phamatest)



**SCHEMATIC**



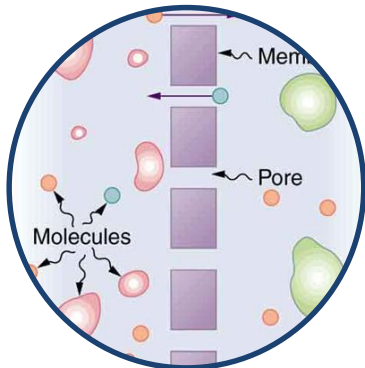
# KEY PARAMETERS INFLUENCING DRUG RELEASE IN DIALYSIS METHODS



Agitation Conditions



Ratio between Donor & acceptor cell Volume  
Inside Volume 6 to 10 fold less than medium volume

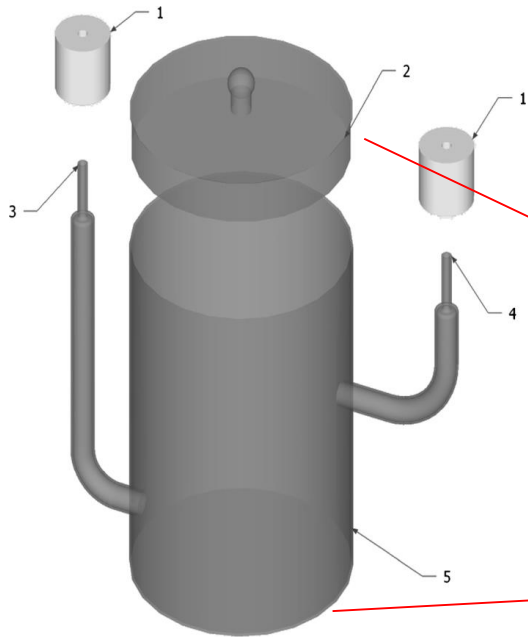


Molecular Weight Cut-Off (MWCO) of  
membrane

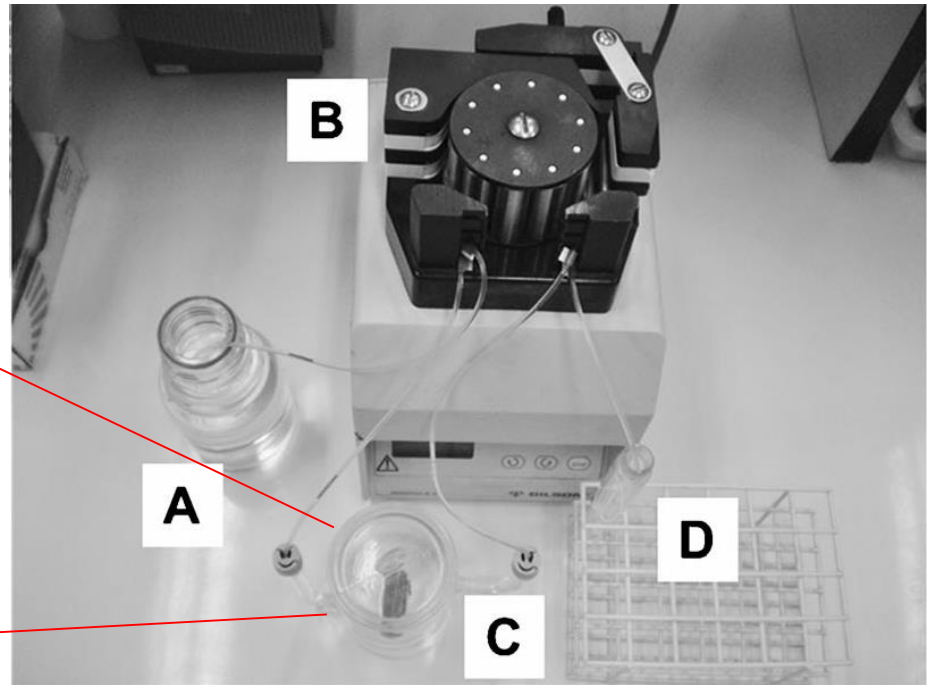
MWCO 100 times more than drug MW



# ADAPTATION OF DIALYSIS AND CONTINUOUS FLOW CELL



- 1 rubber seals
- 2 glass lid
- 3 release medium outlet
- 4 release medium inlet
- 5 release device

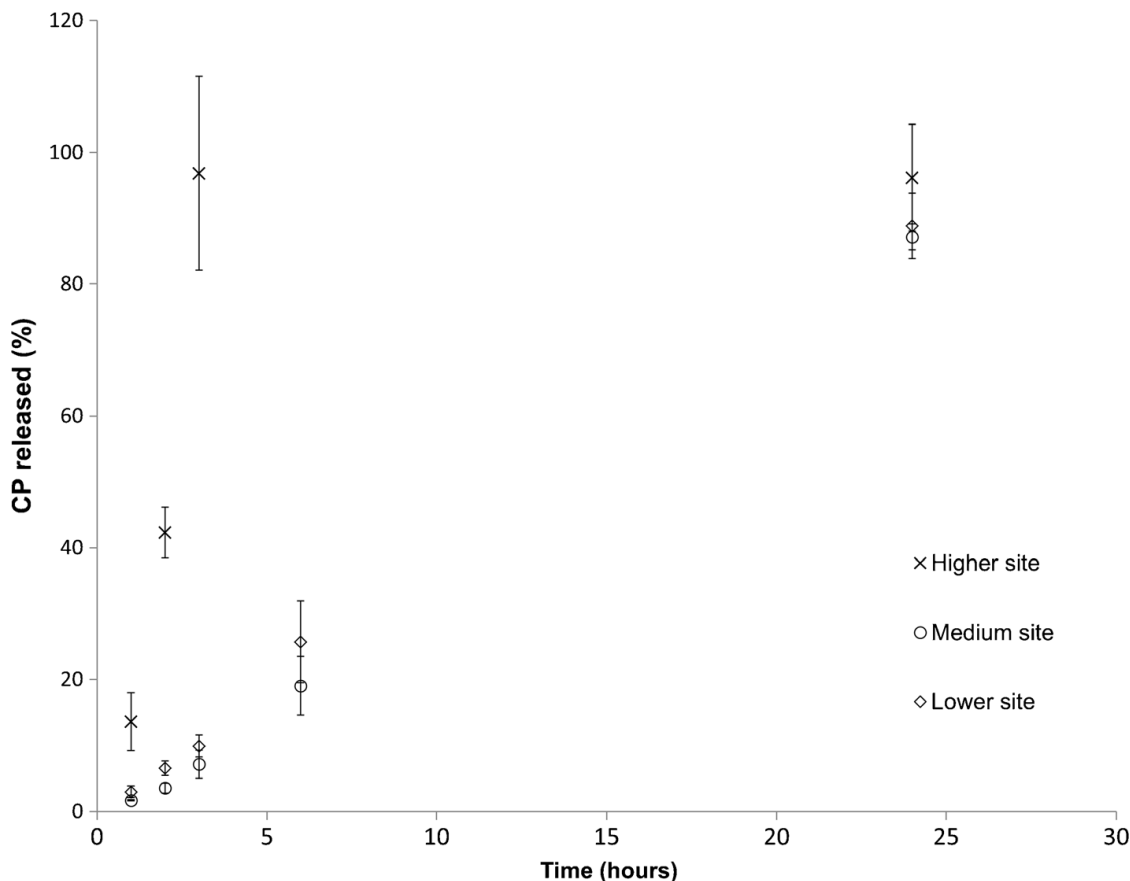


- A a flask containing fresh release medium
- B a peristaltic pump
- C the proposed release device
- D a sampling flask



# ADAPTATION OF DIALYSIS AND CONTINUOUS FLOW CELL FOR NLC

Conventional Dialysis bag method with Proposed flow apparatus



In vitro CP (Clobetasol Propionate) release

**CONVENTIONAL DIALYSIS  
SAC TECHNIQUE**

**SIGNIFICANT DIFFERENCE  
BASED ON SITE OF  
SAMPLING**





# DISADVANTAGES OF DIALYSIS METHODS

Lack of adequate agitation inside membrane

Violation of sink condition  
**(fixed volume)**

Hindrance to drug diffusion through membrane

Reverse system causes high dilution of Nano system thus medium loses its discriminatory ability

**Disadvantages of Dialysis Methods**



# CONTINUOUS FLOW THROUGH CELL TYPE IV

This method has been widely used to investigate drug release from microspheres

But Nanoparticulate systems have very small particle size (<100nm), challenging to test their release in USP IV.

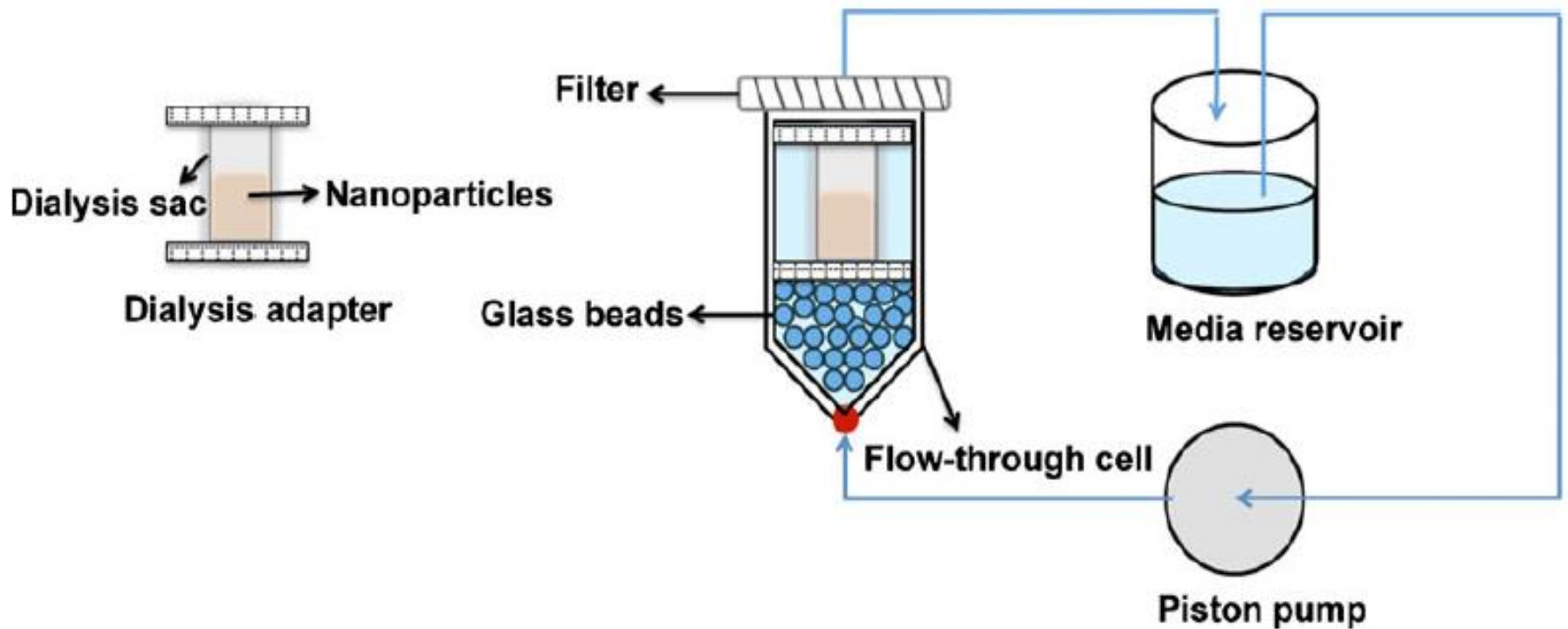
## CHALLENGE:

- NP clog the filter leading to slow flow rates and high pressure build-up in the system
- Pass through filters, thus resulting in erroneous data.

**SOLUTION: novel Dialysis Adaptor is introduced in USP type IV**



# CONTINUOUS FLOW THROUGH CELL TYPE IV





# CONTINUOUS FLOW THROUGH CELL TYPE IV





# CONTINUOUS FLOW THROUGH CELL TYPE IV - DIALYSIS CELL



- ✓ High Discriminative power
- ✓ Avoided Filter clogging
- ✓ Avoided violation of sink conditions
- ✓ Avoided lack of agitation

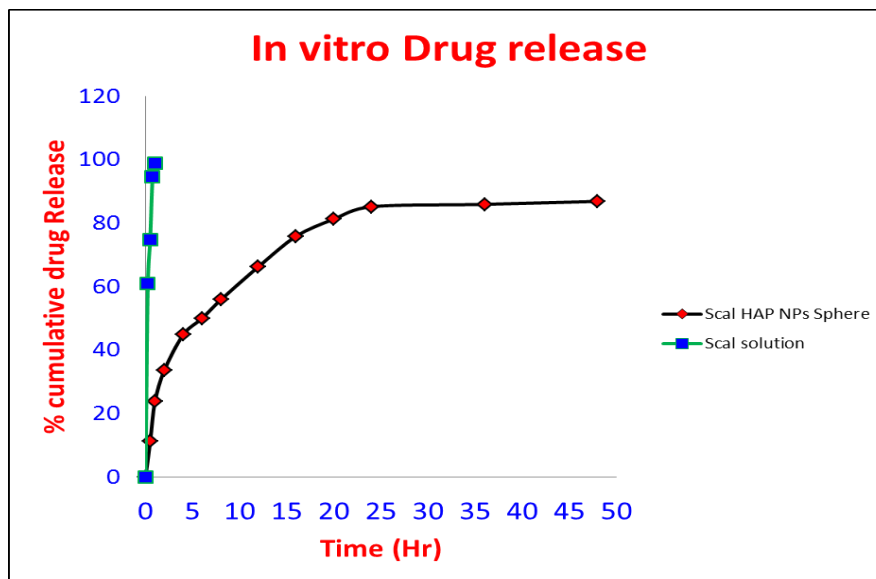


# CASE STUDIES

## USP APPARATUS IV WITH DIALYSIS CELL



# INORGANIC NANOPARTICLES OF SALMON CALCITONIN USP IV

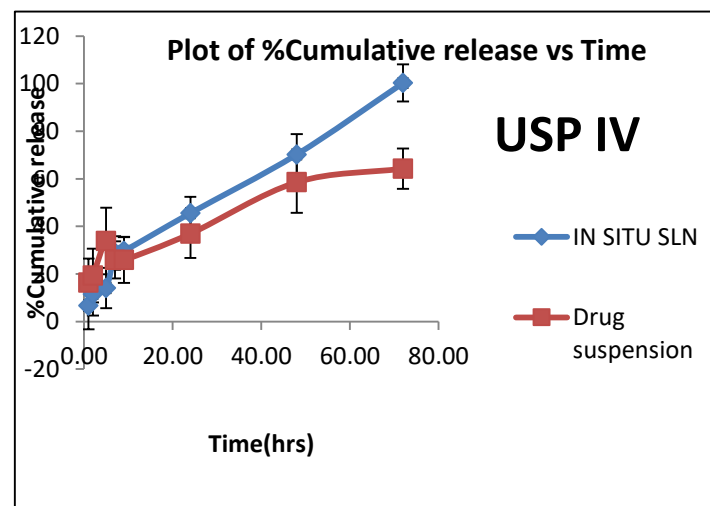
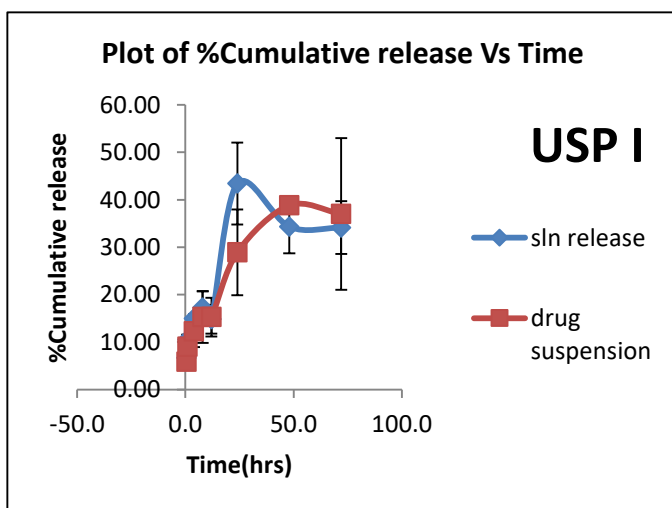


- 98 % of SCT high molecular weight drug (MW ~3000) in 1 hr indicates dialysis membrane not rate limiting
- Sustained release seen with SCT NPs



# BUPARVAQUONE SLN USP TYPE I vs IV

Parameters	USP IV	USP I
Volume of media(5%sls)	100ml	500ml
Speed	120rpm	100rpm
Flow rate	6ml/min	-
Sample volume	1ml	5ml
Aliquot volume	1ml	5ml



**USP I – LOWER DRUG RELEASE DUE TO ABSENCE OF SINK CONDITION**  
**USP IV – COMPLETE RELEASE AND LOWER STANDARD DEVIATIONS**

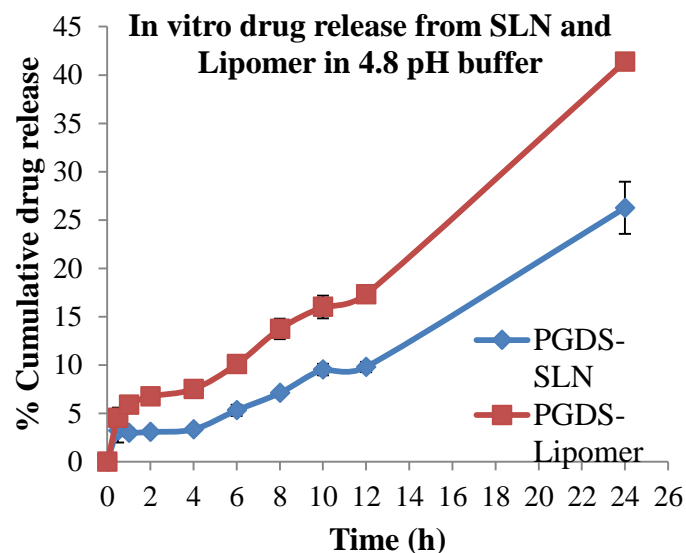
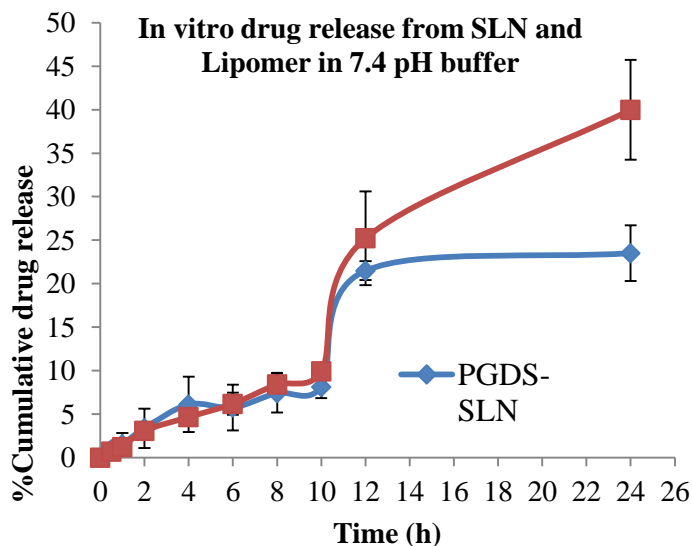




# AMPHOTERICIN B NANOSYSTEM USP TYPE IV- LIPOMER vs SLN

Volume of Media-100mL  
Flow rate-6mL/min

Sample volume-1mL  
Aliquot volume-1mL



- SLN -  $23.50 \pm 3.22\%$  AmB release after 24h
- Lipomer -  $39.98 \pm 5.74\%$  AmB release after 24h

- SLN -  $26.26 \pm 2.70\%$  AmB release after 24h
- Lipomer -  $41.38 \pm 0.45\%$  AmB release after 24h

**DISCRIMINATION BETWEEN TWO NANOSYSTEMS OBSERVED**



# FUTURE PERSPECTIVES

- USP IV WITH DIALYSIS CELL APPEARS PROMISING
- USP II MODIFIED APPARATUS ALTHOUGH PROMISING COULD LACK SINK CONDITION FOR POORLY SOLUBLE DRUGS



# FUTURE PERSPECTIVES

- SYSTEMS THAT ADDRESS SPECIFIC REQUIREMENTS OF NANOSYSTEMS
  - No release in circulation
  - Release prediction at site of delivery
- COST EFFECTIVE STRATEGIES MAY BE EXPLORED



# PROF. DEVARAJAN'S RESEARCH GROUP





# INSTITUTE OF CHEMICAL TECHNOLOGY



**Deemed University , Elite status and Centre of Excellence (GOM)**



# ACKNOWLEDGEMENTS

- WORLD BANK – TEQIP- ICT, FOR FINANCIAL SUPPORT
- SOTAX INDIA PVT. LTD., FOR USP IV WITH DIALYSIS CELL



THANK YOU