



# Role of Excipients in Modulation of Drug Dissolution Profile

**Sandip B. Tiwari, *Ph. D.***

BASF Pharma Solutions, NA

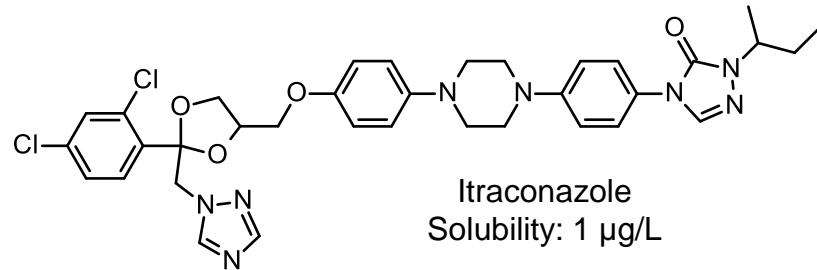
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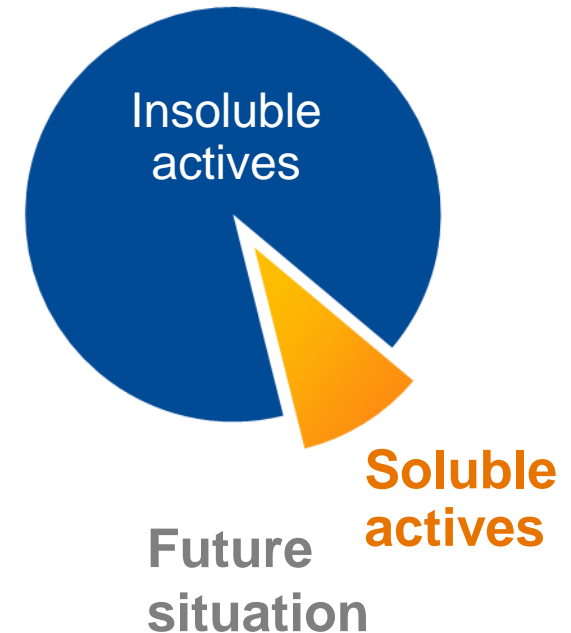
# Outline

1. Introduction to solubility and bioavailability challenges
2. Supersaturation and drug delivery systems (softgels)
  - 2.1 Experimental design & results
3. Amorphous solid dispersions (tablets)
  - 3.1 Experimental design & results
4. Conclusions

# Poor solubility of drugs is one of the key challenges in formulation development

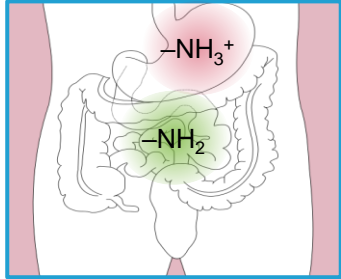


- The Venus de Milo (Marble) is 10-times more soluble in water than many other actives
- The intraluminal concentration of a drug is not necessarily limited by its solubility in gastrointestinal fluids
- Drugs may be in solution at a concentration above their saturation solubility → state of supersaturation



- **What cannot be dissolved cannot be absorbed and cannot cure!**

# Supersaturating drug delivery systems can enhance oral bioavailability



## Supersaturation induced by gastrointestinal pH gradient

The intake of weakly basic drug molecules – even in the crystalline form – may result in supersaturation in the small intestine



## Administration of drugs in solution

Drugs formulated using a mixture of co-solvents, surfactants, complexing agents, and/or oils; dilution or dispersion in the GI tract generates a metastable supersaturated state

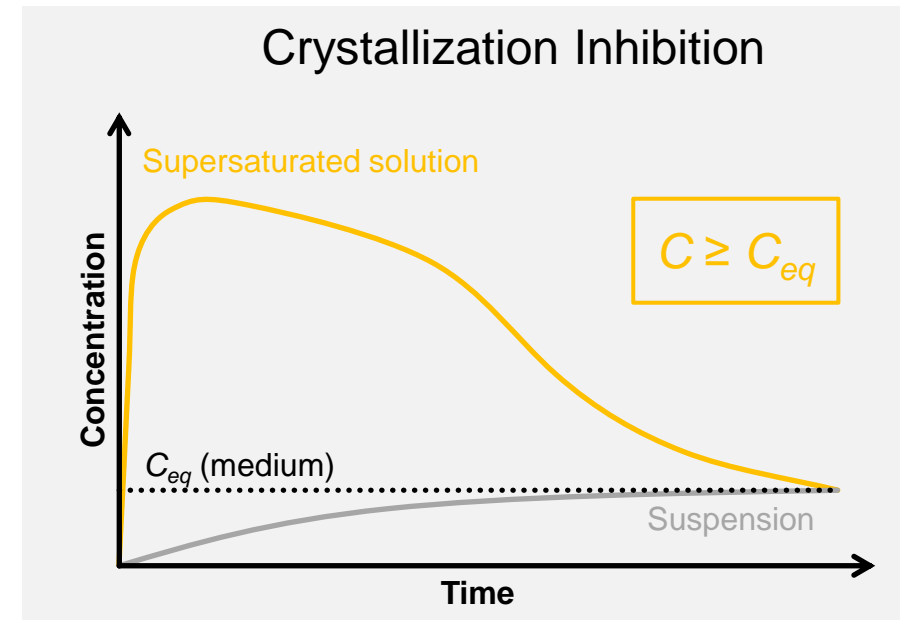
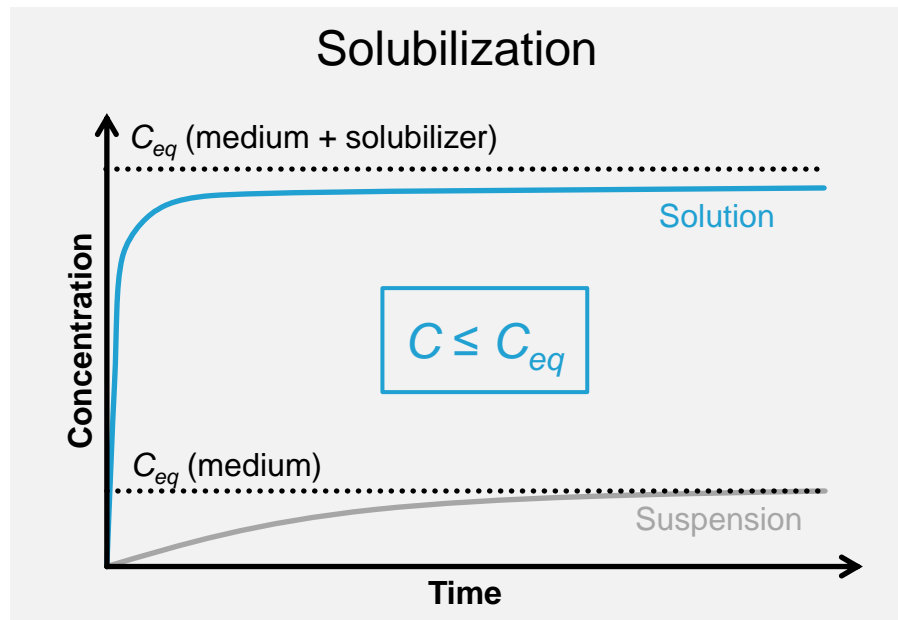


## High-energy and/or rapidly dissolving solid forms

Amorphous solid dispersions, nanoparticles, co-ground mixtures, carriers based on mesoporous silica, co-crystals and crystalline salt forms, water-soluble prodrugs...

# Excipients enabling supersaturation state

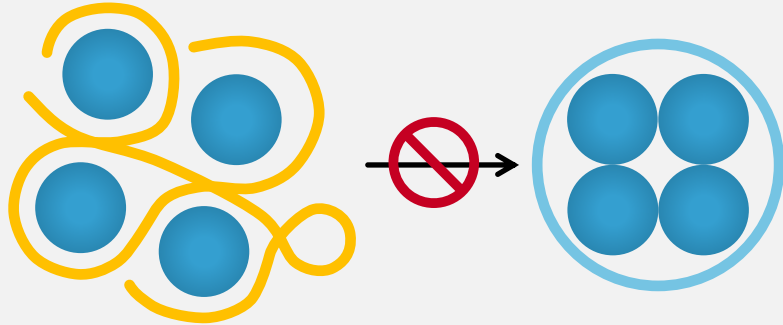
- Excipients like surfactants may inhibit precipitation by increasing the maximum achievable saturation concentration of the drug ( $C \leq C_{eq}$ , thermodynamic approach)
- Surfactants may also delay precipitation from supersaturated solutions by inhibiting crystallization ( $C \geq C_{eq}$ , kinetic approach)



*The intraluminal concentration of a drug is not necessarily limited by its solubility in GI fluids but rather the time it can be maintained in supersaturation during the absorption window*

# Excipients enabling supersaturation state: mechanism of action

## Nucleation



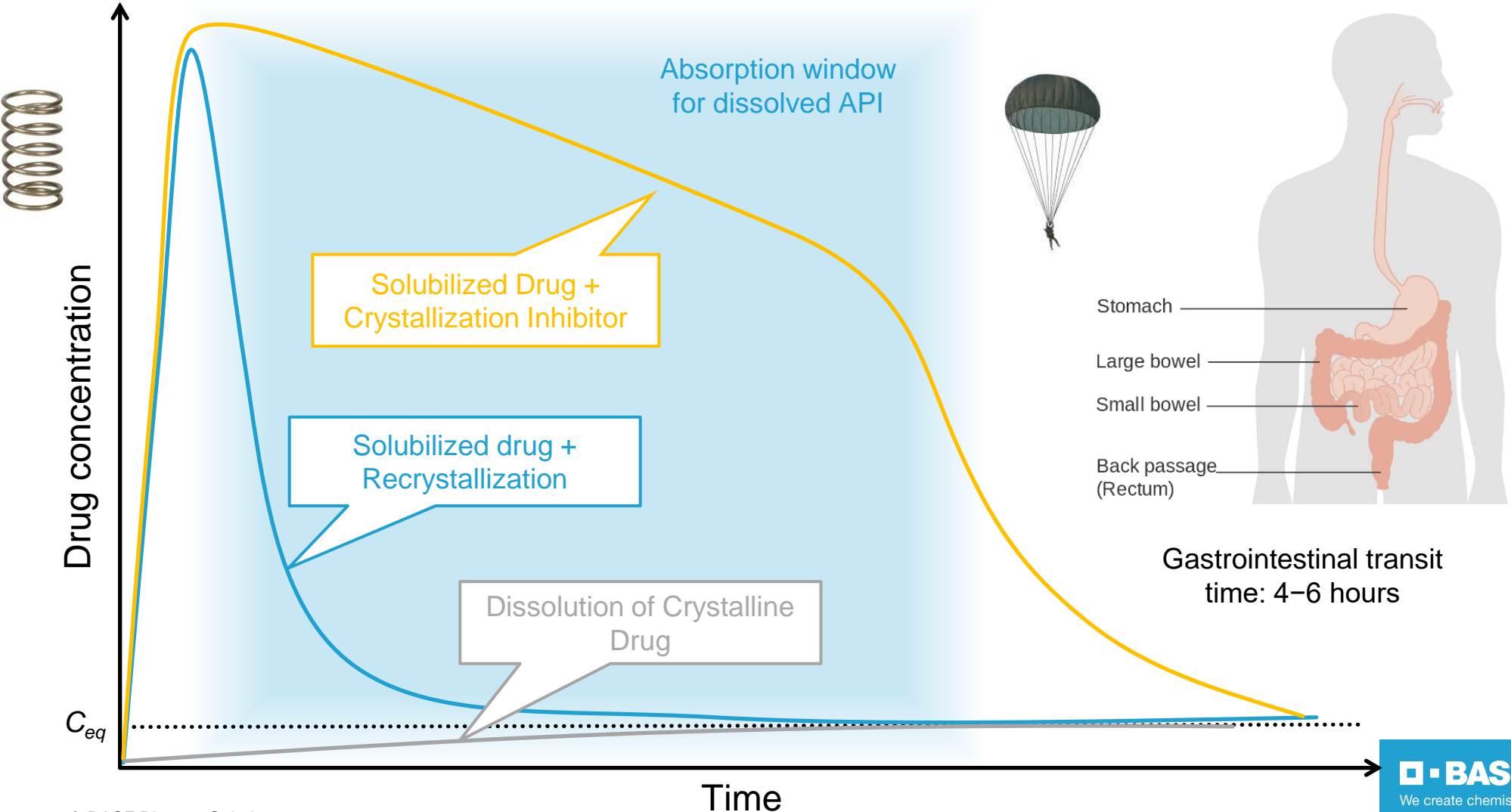
- Specific (e.g., hydrogen bonds) and non-specific (e.g., hydrophobic) interactions between drug molecules and the polymer increase the activation energy required for nucleation
- Polymers hinder the reorganization of a cluster of drug molecules into an ordered structure (rate-limiting step of the two-step nucleation model)

## Crystal growth



- Change of the adsorption layer at the crystal–solution interface
  - ▶ Diffusion of drug molecules to the crystal nuclei is hindered
- Polymers adsorb onto the crystal surface
  - ▶ Incorporation of drug molecules into the crystal lattice is hindered
  - ▶ Growth rate decreases
- Polymers alter the surface energy of the crystal face / change the level of solvation

# “Spring and parachute” approach –lever to enhance bioavailability



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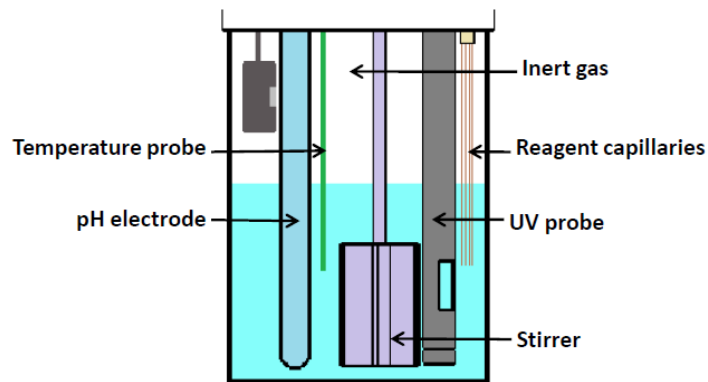


# Enabling “parachute effect” in soft gelatin capsules

## Use of Pion inForm for high throughput dissolution measurement



Pion inForm



inForm Measurement Cell

Experimental set-up

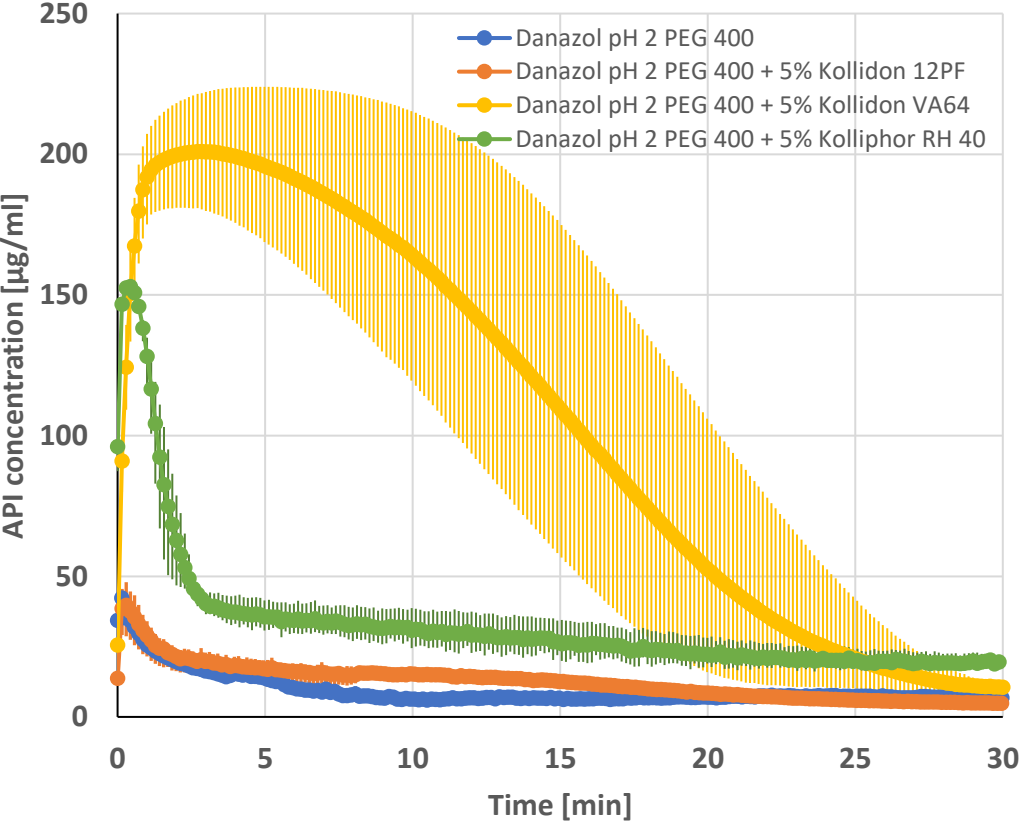
### ■ Formulations

- ▶ Kollisolv® PEG 400
  - Saturated with API
- ▶ 5% of surfactant or polymeric additive is solubilized
- ▶ 500  $\mu$ L formulations
  - Representative Softgel volume
- ▶ Dissolution media -50 mL Buffer System
  - pH 2 HCl Buffer
  - pH 6.8 Phosphate Buffer

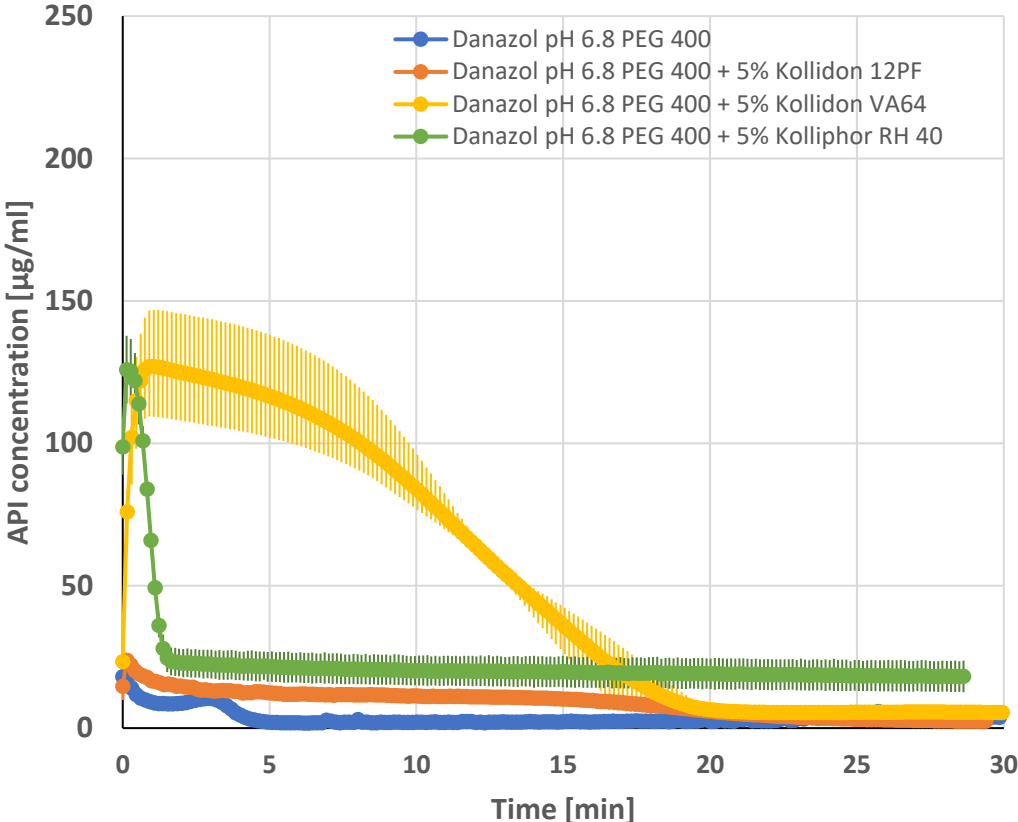


# Danazol formulation: enabling “parachute effect”

### Danazol – 500 µL in 50 mL pH 2 HCl Buffer



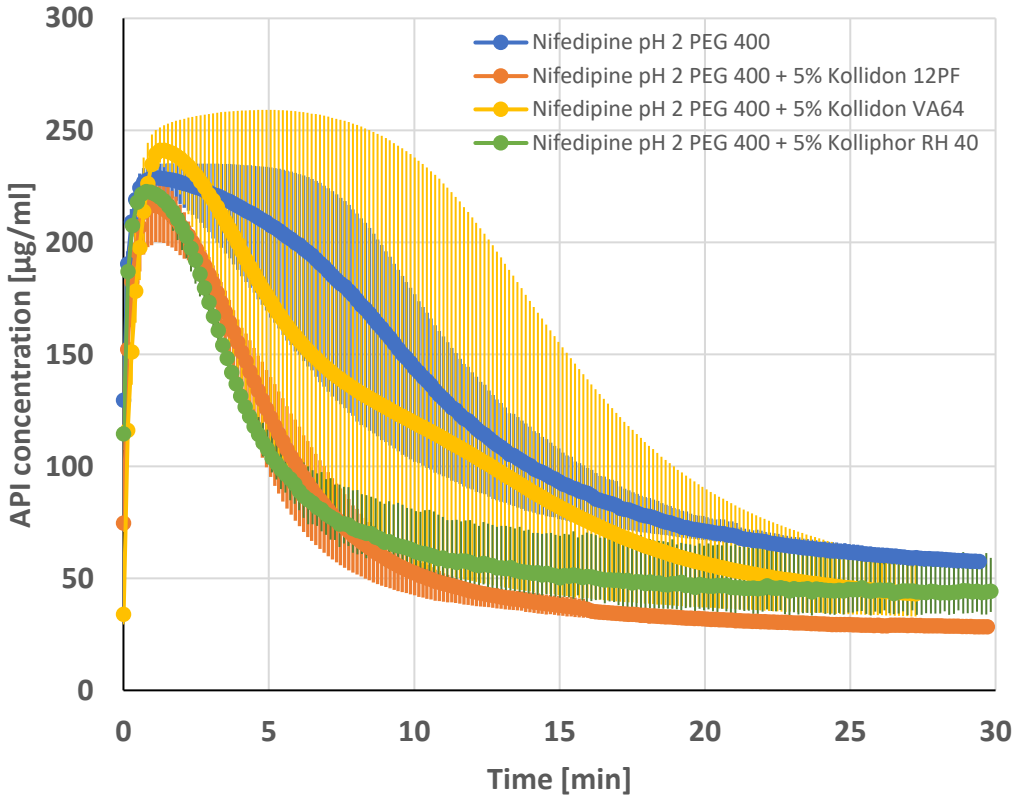
### Danazol – 500 µL in 50 mL pH 6.8 Phosphate Buffer



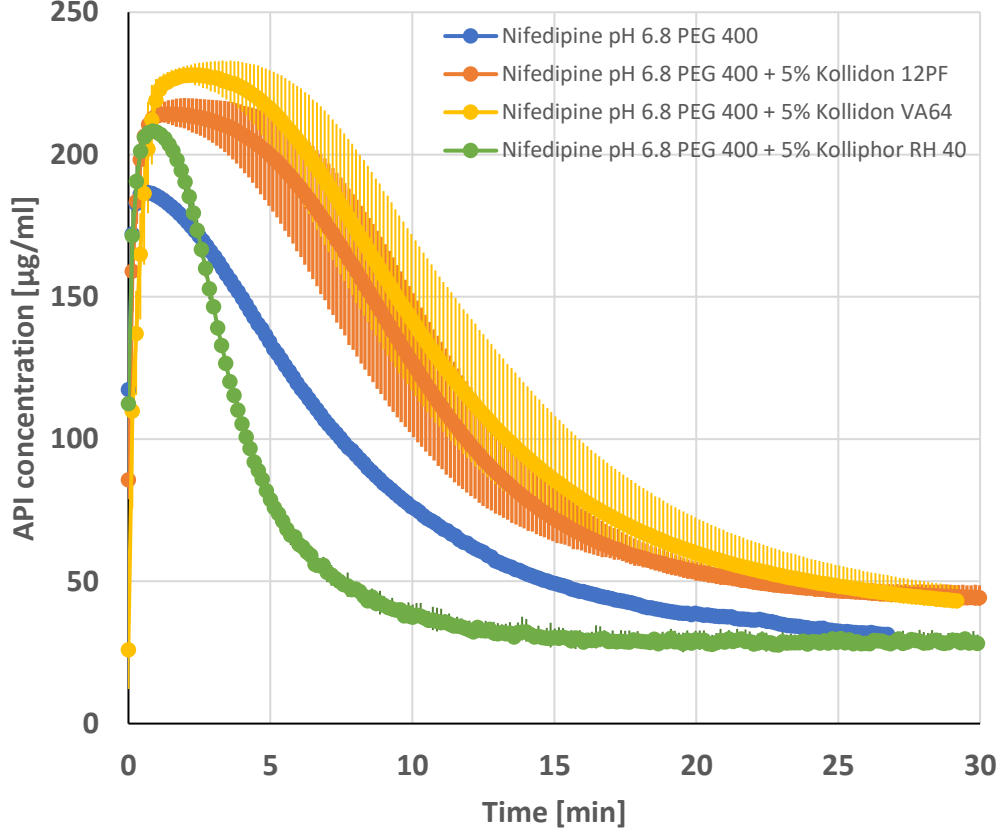
■ Under GI conditions, a surprisingly strong inhibition is shown for formulations using Kollidon® VA 64

# Nifedipine formulation: “parachute effect” depended on GI conditions

### Nifedipine – 500 µL in 50 mL pH 2 HCl Buffer



### Nifedipine – 500 µL in 50 mL pH 6.8 Phosphate Buffer



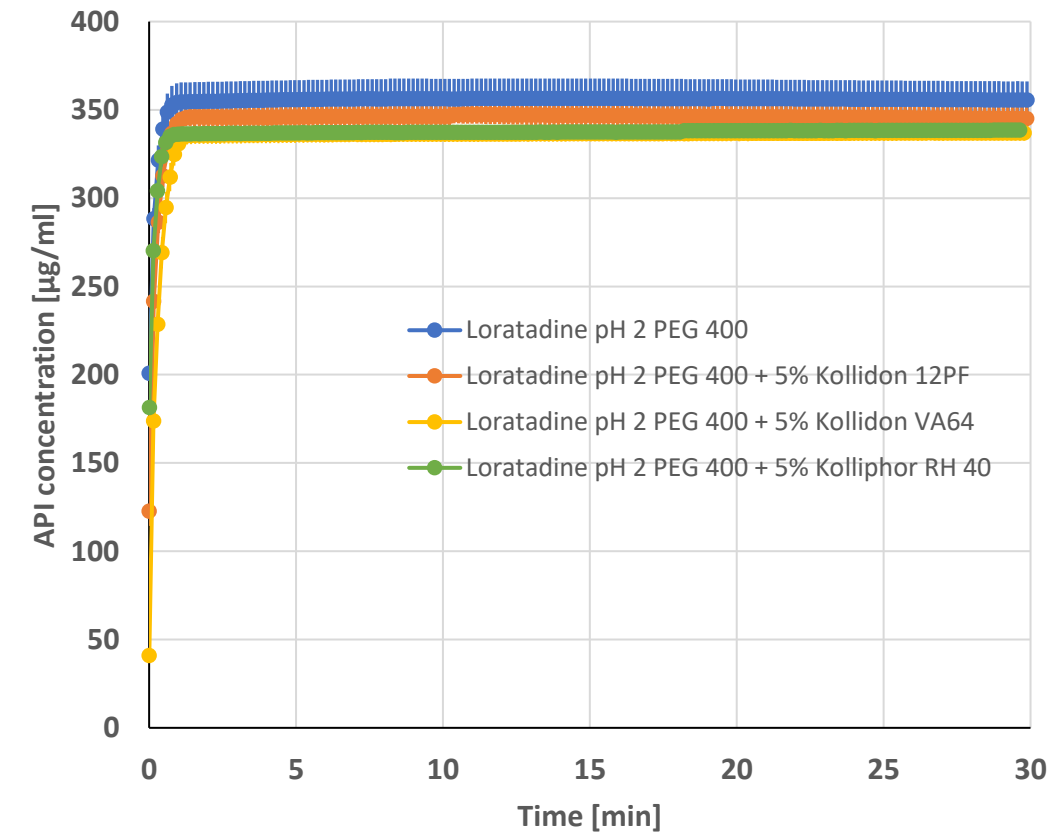
■ Inhibition of Nifedipine under stomach conditions were not significantly more effective than the PEG matrix alone

■ Povidone and Copovidone exhibited strong inhibition under intestinal conditions



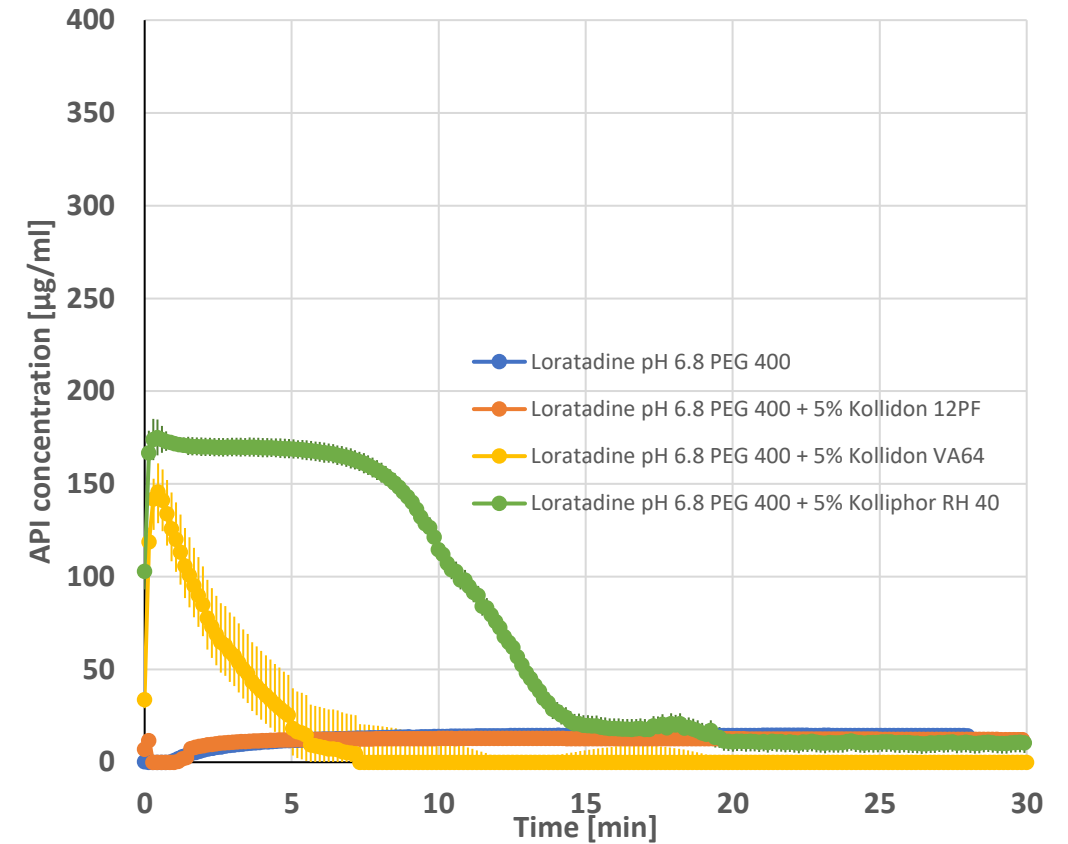
# Loratadine formulation: “parachute effect” in intestinal conditions

## Loratadine – 500 $\mu$ L in 50 mL pH 2 HCl Buffer



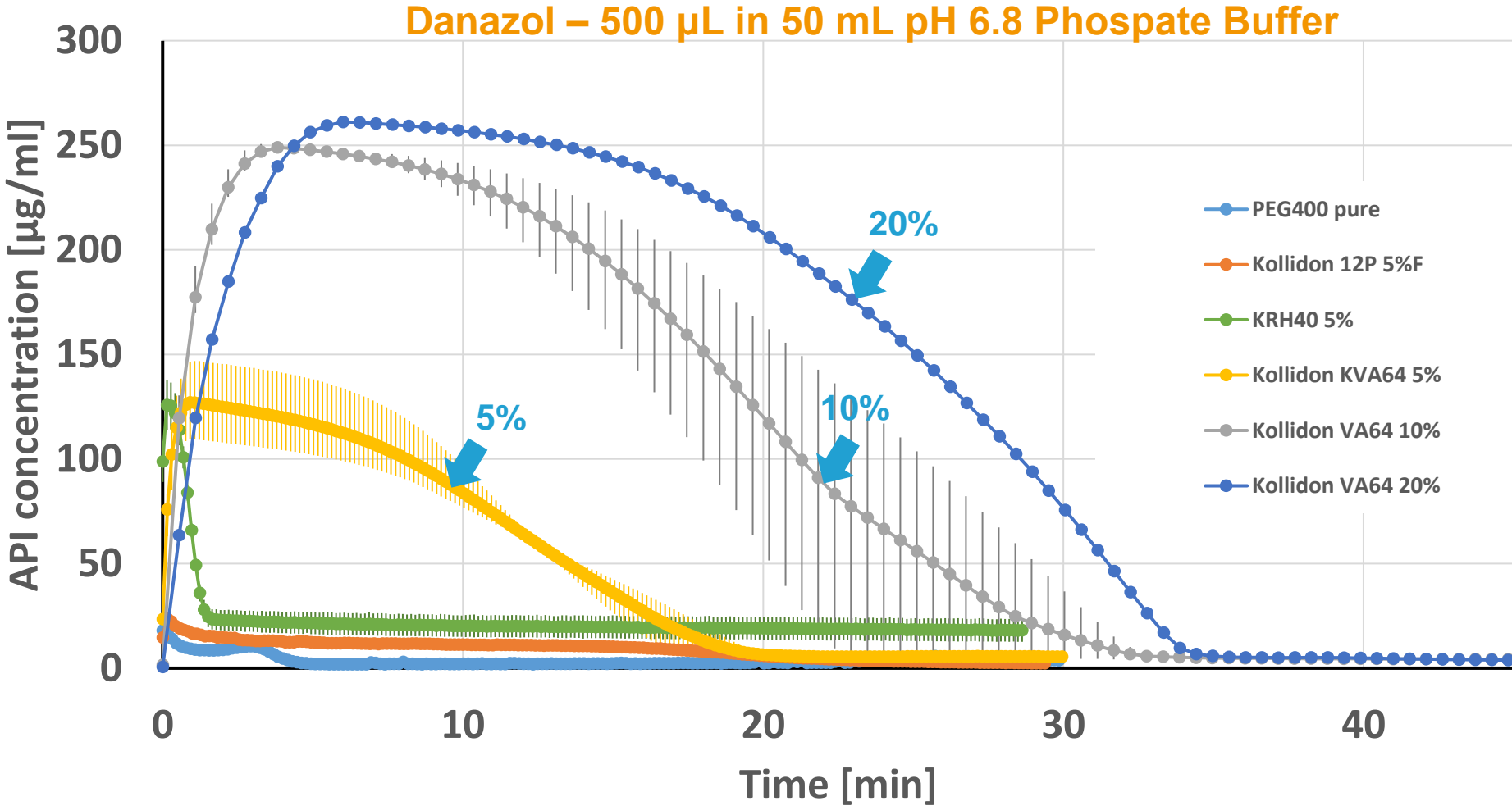
- Loratadine is known to be soluble under acidic conditions of the stomach and no inhibition was required

## Loratadine – 500 $\mu$ L in 50 mL pH 6.8 Phosphate Buffer



- Potent solubilizer Kolliphor® RH 40 was shown to be most effective under intestinal conditions

# Danazol formulation: maximizing “parachute effect”

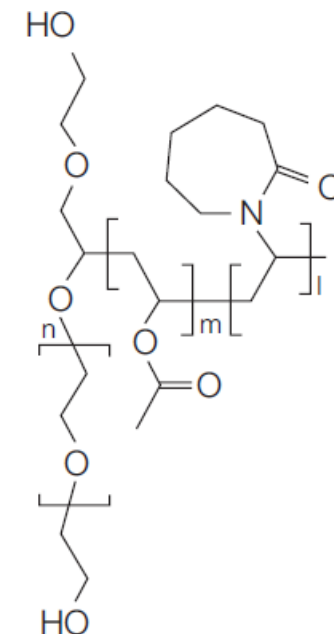
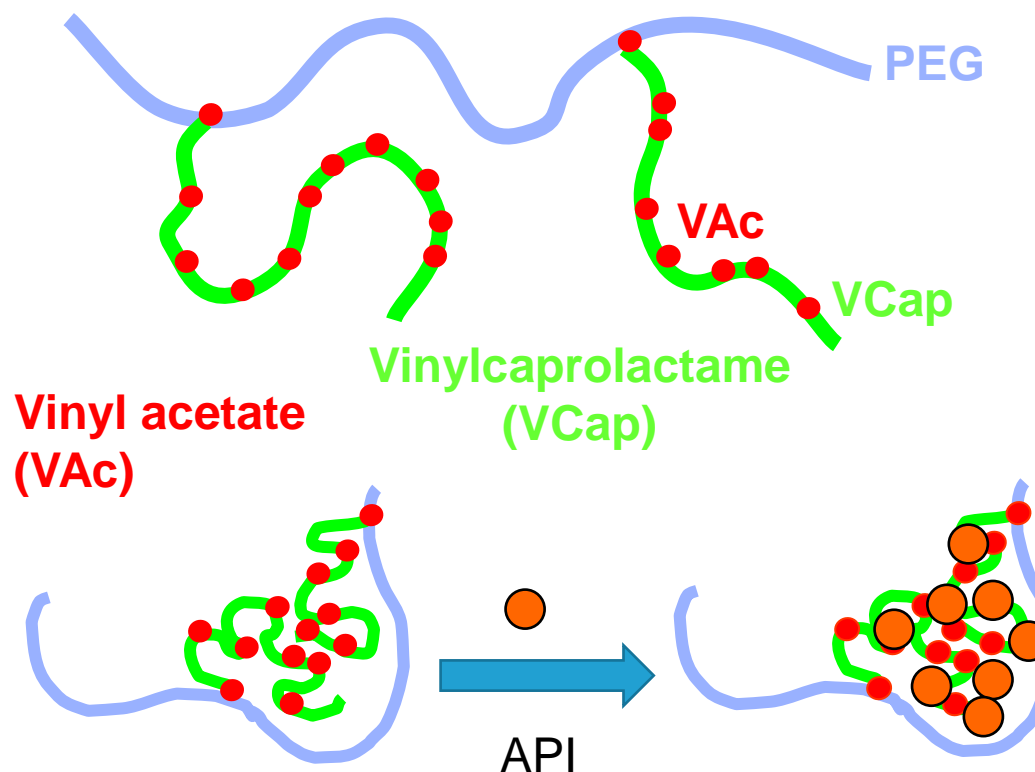


■ Higher concentrations significantly extending the window further (Intestine pH 6.8, Danazol model)

# Novel excipient: Soluplus<sup>®</sup> as crystallization inhibitor

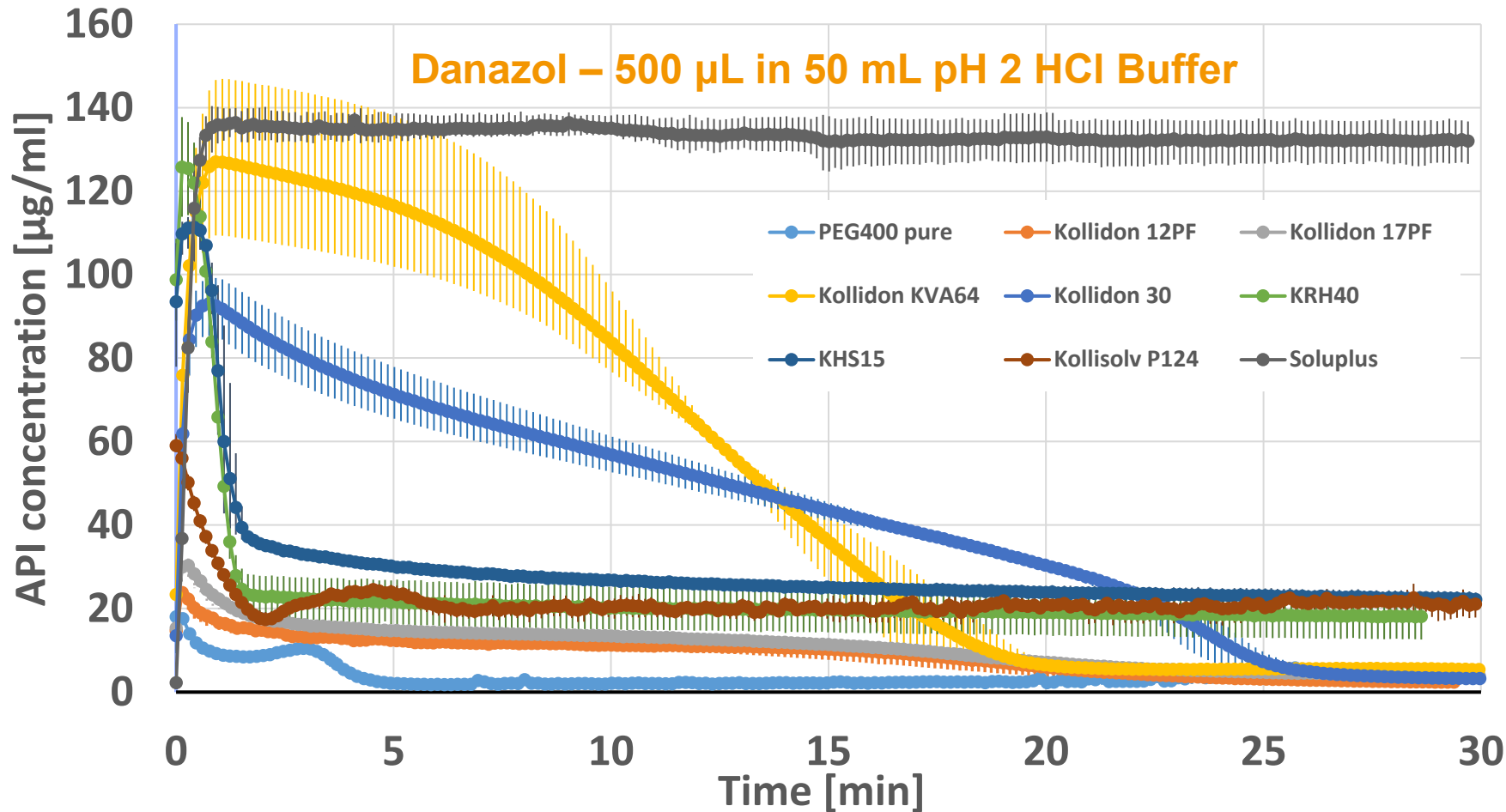
## Intermolecular Interactions between API and Polymer

- Polyvinyl caprolactam-polyvinyl acetate-polyethylene glycol graft copolymer
- Longer polymeric chain length
- Crystallization Inhibitor through quasi-complexation
- H-Bonding
- VdW interactions



- Soluplus carries all the pre-requisites for maintaining supersaturation by crystallization inhibition

# Danazol formulation: “parachute effect” to “flying mode”



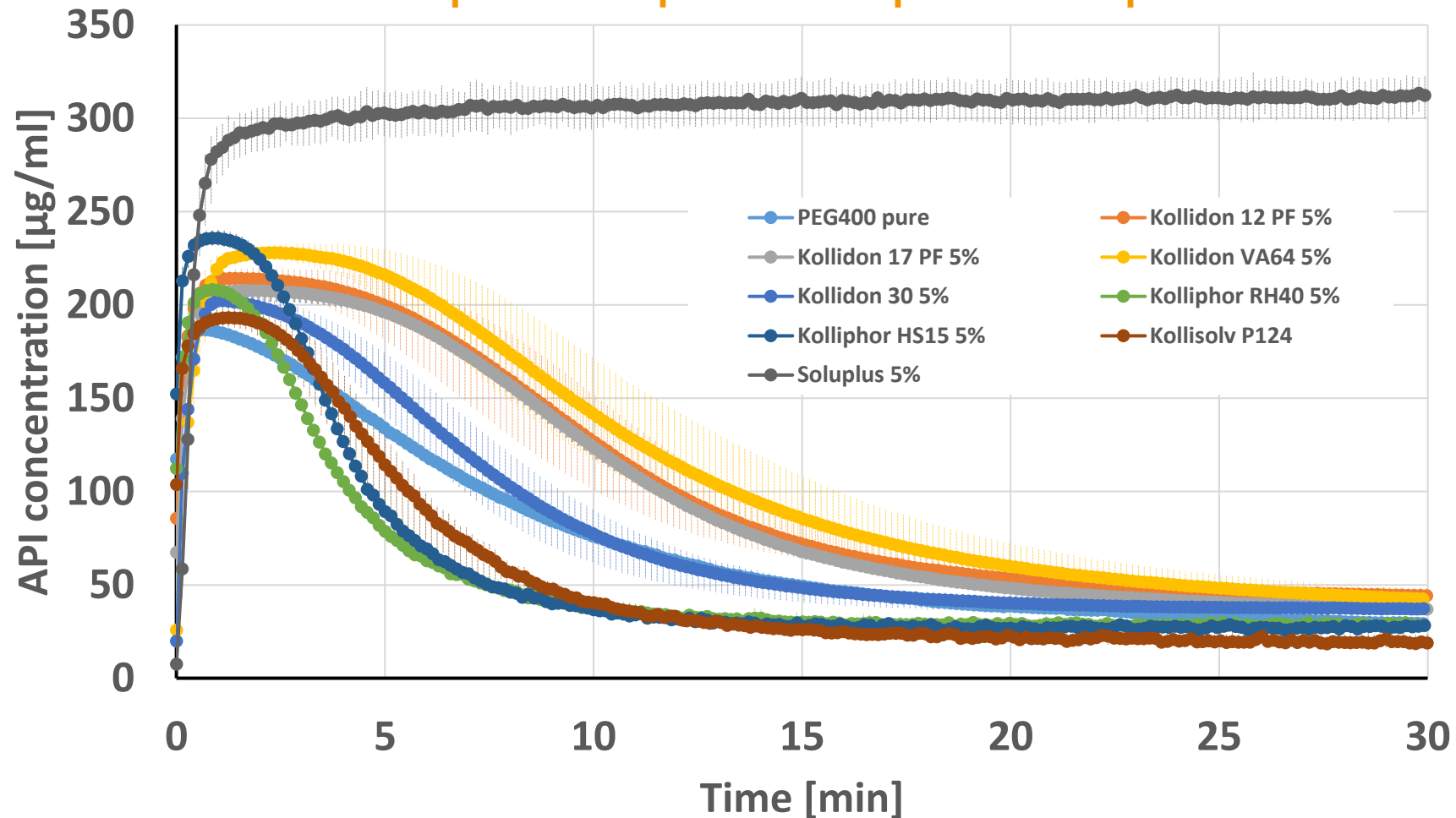
Soluplus Solution in PEG 400

■ Soluplus® exhibited no-crystallization effect under acidic condition



# Nifedipine formulation: “parachute effect” to “flying mode”

Nifedipine – 500  $\mu\text{L}$  in 50 mL pH 6.8 Phosphate Buffer



Similar findings were shown for Nifedipine – but the question remains is it due to strong adsorption or complexation?

# Conclusions: Supersaturation and drug delivery systems (softgels)

- Pion inForm could be used for high throughput screening of excipients to identify optimal formulation
- Polymeric excipients (Kollidon® 12, Kollidon® VA 64, Kollisolv® PEG 400, Soluplus® and Kolliphor® RH 40) could be better for preventing nucleation and crystal growth by
  - **Stronger** polymer- API interactions
  - **Surface active** properties
- Excipients like surfactants exert thermodynamic and kinetic effects enabling solubilization and larger absorption window.
- FDA's Novel excipient pilot program is expected to give impetus to innovation, both for new and novel excipients such as Soluplus®.

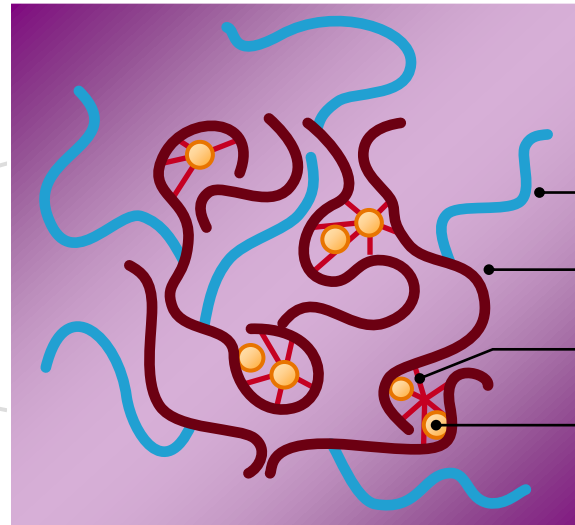
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# Amorphous Solid Dispersions

## The Solid Solution – Why make ASDs?

**Principle of action:** The API is solubilized in the polymer **like sugar into coffee**

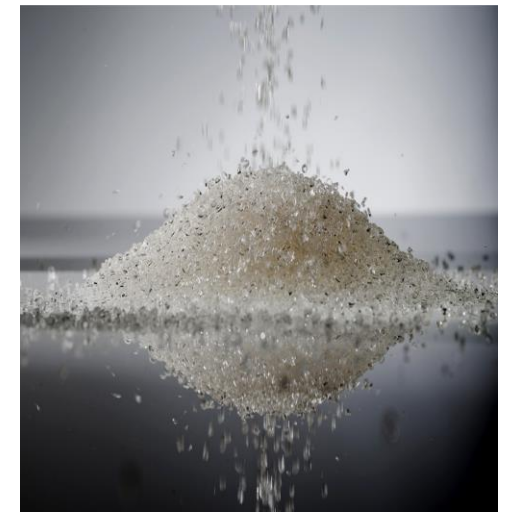


Hydrophilic element

Lipophilic element

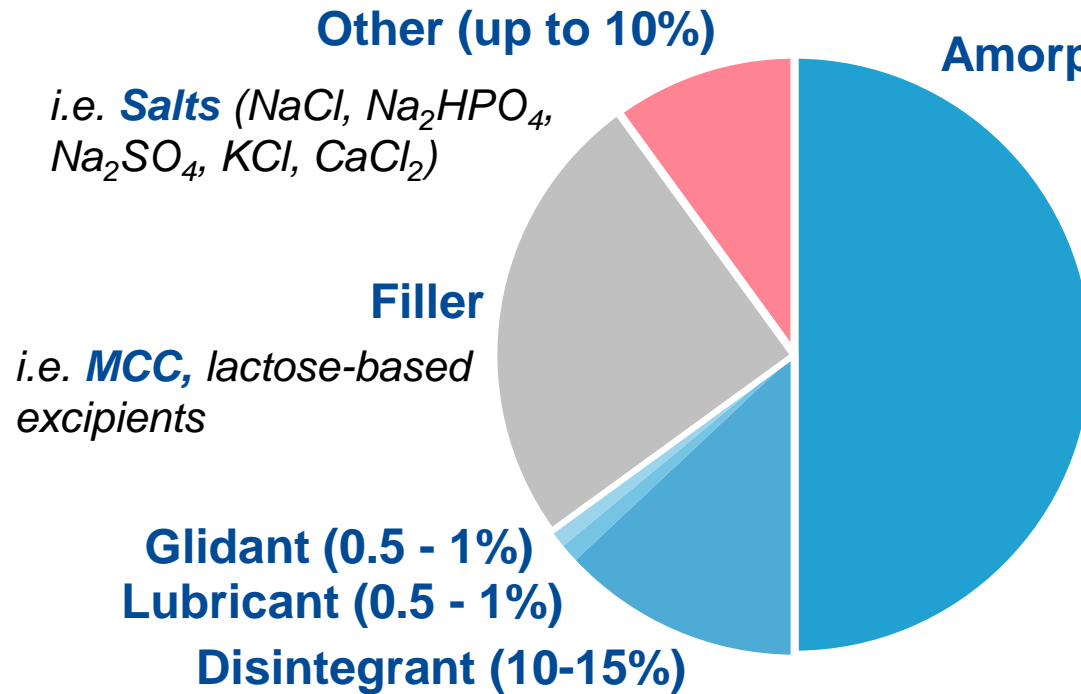
Drug complexation

Active



ASDs are a **simple** and elegant **solid solution** of **poorly water soluble** drug **dissolved within** a **polymer** matrix

# ASD-based tablets give ample opportunity for synergistic formulation strategies



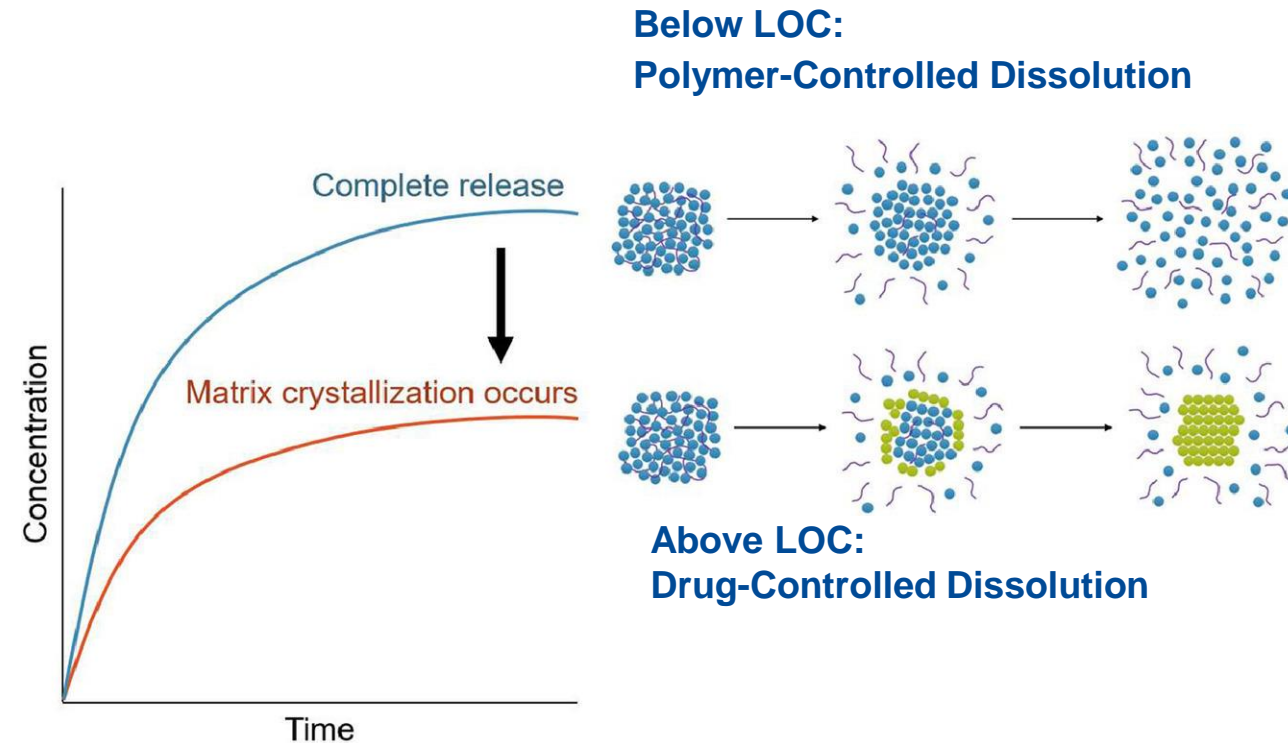
*i.e. crospovidone, croscarmellose*



- Ideal matrix candidates for ASD formulation should first be identified through prescreening work.
- Then, **leading levers for independent improvements of ASD-based tablet dissolution behavior** include:
  - **Processing and tableting conditions**
  - **Choice of filler and disintegrant**
  - **Other additives and components in tablet**
- Each component can be optimized for tailored drug release behavior, as shared in case following case studies

# Recent literature has brought the topic of the Limit of Congruency (LOC) as a dissolution-dominating attribute of amorphous solid dispersions.

- **Limit of Congruency (LOC)** for an ASD is a **specific drug load that transitions** between simultaneous drug+matrix phase dissolution to a release where drug-rich surface forms and limits dissolution
- LOC is **drug and matrix specific**. LOC is determined by a sharp decline in dissolution of API from the ASD (typically around 15-40 wt%)
- Congruent release occurs when dissolution is faster than matrix phase separation
- Generation of a drug-rich porous microstructure at the dissolving interface of leads to incongruently releasing ASDs
- **LOC can be increased** through use of surfactants, solubilizers, second excipients, additives within the ASD



| Dana E. Moseson, Tze Ning Hiew, Yongchao Su, Lynne S. Taylor Formulation and Processing Strategies which Underpin Susceptibility to Matrix Crystallization in Amorphous Solid Dispersions, *Journal of Pharmaceutical Sciences*, 112, 1, 2023, 108-122.

| Anura S. Indulkar, Xiaochun Lou, Geoff G. Z. Zhang, and Lynne S. Taylor Insights into the Dissolution Mechanism of Ritonavir–Copovidone Amorphous Solid Dispersions: Importance of Congruent Release for Enhanced Performance *Mol. Pharmaceutics* 2019, 16, 3, 1327–1339

# Limit of Congruency (LOC) has a strong influence on ASD behavior in dissolution, and thus also at tablet-scale

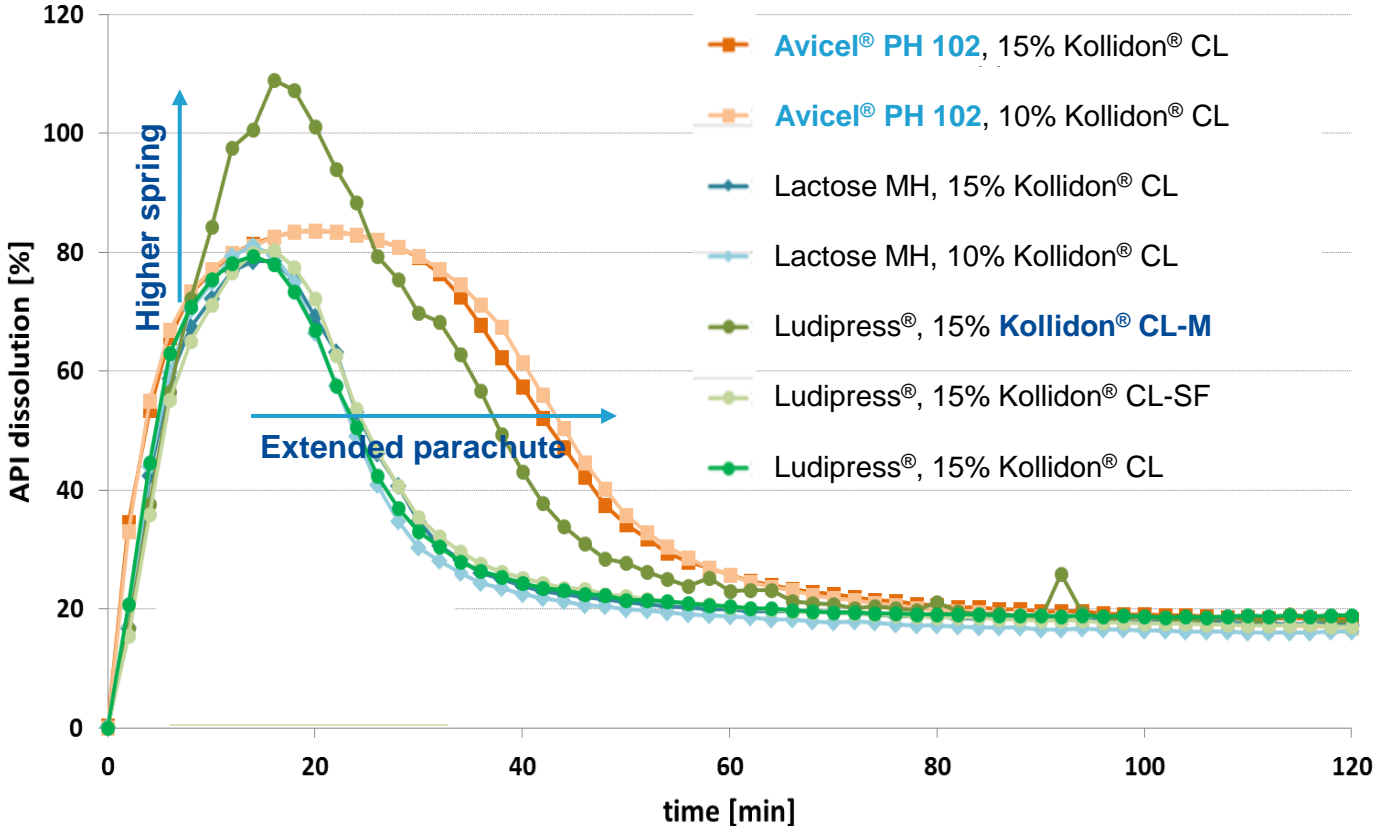
- LOC for **copovidone-based binary ASDs** is typically **15-30% API** load
- LOC **can be increased** through inclusion of **surfactants, salts, second matrix excipients**, and other additives **within the ASD**

## Case Study:

- **Nifedipine and Kollidon<sup>®</sup> VA 64** ASD-based tablets were prepared
- ASDs were prepared at **20% API load (below LOC)** and **50% API load (above LOC)**
- Different **fillers and disintegrants** were evaluated for their impact under each conditions

# Below LOC, filler and disintegrant selection influence the spring and parachute behaviors of ASD-based tablets

20% Nifedipine in ASD with Kollidon® VA 64  
 500 mg tablet, 40 mg Nifedipine  
 For 20% API in ASD: 40% ASD; 1% Aerosil 200; 0.5% MgSt; (filler + disintegrant) = 59.5%



Tablet Hardness 50 – 75 N  
 USP Apparatus 2, Paddle method, 100 rpm, 37 °C, HCl 0.08 M, 700 mL

- The **MCC as filler increased API release** (Avicel® vs Lactose and Ludipress®) by **extending parachute effect**.
- **Micronized particle size of crospovidone Kollidon® CL-M disintegrant achieved higher spring drug release** over larger disintegrant particles.

### Particle Size Distribution:

	Kollidon® CL	Kollidon® CL-F	Kollidon® CL-SF	Kollidon® CL-M
< 15 µm				≥ 90%
> 50 µm	max 80%	max 60%	max 30%	
> 100 µm	max 60%	max 20%	max 10%	



The enhanced spring behavior is not based on a more rapid disintegration, but rather a solution/suspension-based stabilization behavior.

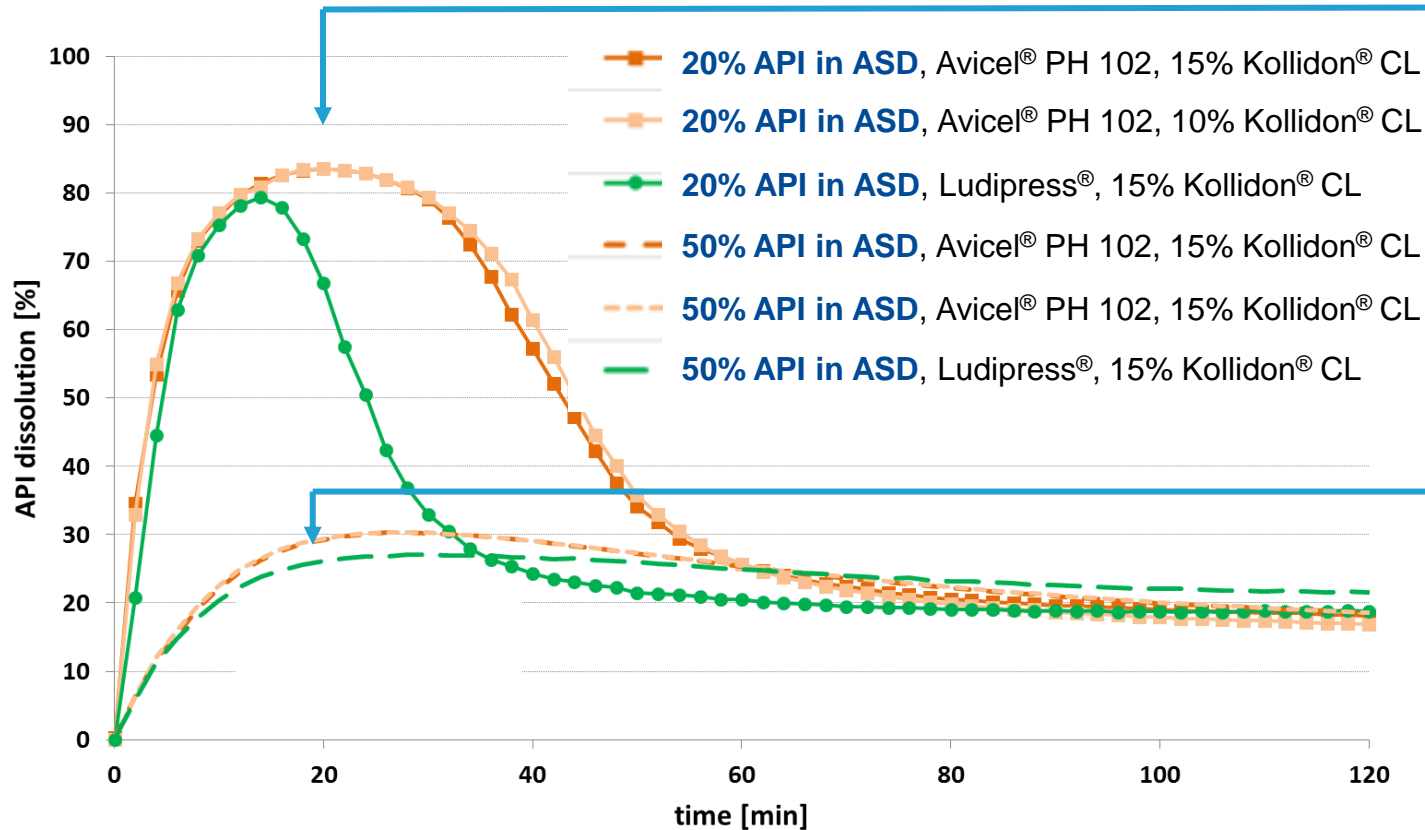
	press force [kN]	hardness [N]	disintegration time [min]	friability [%]
➤ Avicel® PH 102, 15% Kollidon® CL	5	61	< 0,5	1,24
➤ Avicel® PH 102, 10% Kollidon® CL	5	75	< 0,5	0,64
➤ Lactose MH, 15% Kollidon® CL	13	61	1 – 2	1,05
➤ Lactose MH, 10% Kollidon® CL	12	52	1 – 2	1,59
➤ Ludipress®, 15% <b>Kollidon® CL-M</b>	7	61	5 – 10	1,45
➤ Ludipress®, 15% Kollidon® CL-SF	8	62	1 – 2	1,19
➤ Ludipress®, 15% Kollidon® CL	12	69	0,5 – 1	0,98

- Micronized particle size of crospovidone Kollidon® CL-M is also used as as a stabilizer in oral suspensions.

# Above the LOC, filler selection and wt% of disintegrant lose impact once API loading in the ASD exceeds the LOC threshold

20% or 50% Nifedipine in ASD with Kollidon® VA 64  
500 mg tablet, 40 mg Nifedipine

For 50% API in ASD: 16% ASD; 1% Aerosil 200; 0.5% MgSt; (filler + disintegrant) = 82.5%



**Below the ASD Limit of Congruency  
(matrix-dominated dissolution):  
20% API load in ASD**

- The **selection of filler may increase release** (Avicel® vs Ludipress®)

**Above the ASD Limit of Congruency  
(API-dominated dissolution):  
50% API load in ASD**

- The **selection of filler** (Avicel® vs Ludipress®) **did not increase release** of Nifedipine
- **Increasing disintegrant 10% to 15 wt% also did not increase** drug dissolution behavior

Tablet Hardness 50 – 75 N

27 USP Apparatus 2, Paddle method, 100 rpm, 37 °C, HCl 0.08 M, 700 mL

# Conclusions: Amorphous Solid Dispersions (ASD) Based Tablets

- **Formulating from an ASD that is below LOC** will provide the best canvas for optimizing tablet dissolution behavior
- **Micronized crospovidone** can provide a high-surface area, and thereby enable spring effect to the dissolution of ASD-based tablets
- **MCC** forms **better ASD-based tablets** than lactose-based excipients, and can also **extend the parachute effect during the dissolution of ASD tablets**
- The **presence of salts is helpful for disintegration**, though **too-high loading will compromise tablet properties**
- BASF has a deep and profound understanding of various suitable excipients and formulations of ASD tablets



**Allow our expert team to provide you with Innovative solutions to address your unmet formulation needs & faster commercialization of your products**

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