# Research Article

# **BDDCS Applied to Over 900 Drugs**

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Abstract. Here, we compile the Biopharmaceutics Drug Disposition Classification System (BDDCS) classification for 927 drugs, which include 30 active metabolites. Of the 897 parent drugs, 78.8% (707) are administered orally. Where the lowest measured solubility is found, this value is reported for 72.7% (513) of these orally administered drugs and a dose number is recorded. The measured values are reported for percent excreted unchanged in urine, LogP, and LogD<sub>7.4</sub> when available. For all 927 compounds, the in silico parameters for predicted Log solubility in water, calculated LogP, polar surface area, and the number of hydrogen bond acceptors and hydrogen bond donors for the active moiety are also provided, thereby allowing comparison analyses for both in silico and experimentally measured values. We discuss the potential use of BDDCS to estimate the disposition characteristics of novel chemicals (new molecular entities) in the early stages of drug discovery and development. Transporter effects in the intestine and the liver are not clinically relevant for BDDCS class 1 drugs, but potentially can have a high impact for class 2 (efflux in the gut, and efflux and uptake in the liver) and class 3 (uptake and efflux in both gut and liver) drugs. A combination of high dose and low solubility is likely to cause BDDCS class 4 to be underpopulated in terms of approved drugs (N=53 compared with over 200 each in classes 1–3). The influence of several measured and in silico parameters in the process of BDDCS category assignment is discussed in detail.

KEY WORDS: BDDCS; biowaiver; dose number; extent of metabolism; permeability rate.

In 2005, Wu and Benet (1) introduced the Biopharmaceutics Drug Disposition Classification System (BDDCS). Wu and Benet recognized that there was a very strong correlation between the intestinal permeability rate and the extent of metabolism. For example, Benet *et al.* (2) noted that for the 29 drugs and endogenous substances for which human jejunal permeability rate measurements were available, there was an excellent correlation between these permeability rate measurements and the extent of drug metabolism in humans. Fourteen of the 16 drugs exhibiting human intestinal permeability rates greater than metoprolol were extensively metabolism.

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olized, while 11 of 12 drugs showing permeability rates less than metoprolol were poorly metabolized. Two drugs showing disparity between the permeability rate and metabolism, cephalexin and losartan, exhibit permeability rates that differ by no more than 16% from metoprolol (2). Since the coefficients of variation for the human permeability parameters range from 29% to 130%, these borderline compounds may in fact also have followed the correlation. The correlation between the extent of metabolism and human intestinal jejunal permeability was markedly better than that observed for intestinal jejunal permeability and partition coefficient by Takagi et al. (3), who noted that Log P measured and calculated correctly predict high versus low permeability only about two thirds of the time. Wu and Benet (1) reasoned that it might be easier to utilize metabolism in assigning drug classification since it is difficult and expensive to determine human intestinal permeabilities and since it is also difficult to obtain quantitative mass balance measures that show ≥90% absorption, the FDA criterion for a biowaiver as defined in the FDA BCS Guidance (4), based on the work of Amidon et al. (5). Therefore, in proposing the BDDCS classification system, Wu and Benet (1) substituted extensive and poor metabolism for high and low permeability in the BCS while utilizing the same criteria as the FDA for high and low solubility. That is, a high solubility compound at the highest marketed dose strength would be soluble in 250 mL of water over the pH range of 1-7.5 at 37°C. Using the BDDCS, Wu and Benet (1) classified 168 drugs based on the extent of metabolism and solubility.

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#### **BDDCS VERSUS BCS**

Although BDDCS grew out of the FDA's BCS Guidance (4), Wu and Benet (1) proposed BDDCS as a means to predict the drug disposition characteristics of novel chemicals (here, referred to as "new molecular entities", NMEs) during the early stages of drug discovery and development. Such examples will be discussed below. Recently, Benet and Larregieu (6) reviewed the differences between BCS and BDDCS in terms of purpose and basis. The purpose of BCS is to facilitate biowaivers of in vivo bioequivalence studies for drugs that exhibit no significant intestinal absorption problems. In contrast, the purpose of BDDCS is to predict the drug disposition of NMEs as well as potential drugdrug interactions for NMEs and drugs on the market with respect to the intestine and liver. Very recently, a consensus paper with respect to BCS, BDDCS, and regulatory guidances has been published (7).

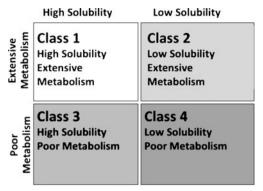
Both BCS and BDDCS use the same criteria for solubility. Therefore, there is no difference in the basis between the two systems with respect to this parameter. As noted above, BDDCS predictions and classification are based on the intestinal permeability rate, not the extent of permeability. There is some ambiguity with respect to the basis for BCS, as reviewed by Benet and Larregieu (6). The initial permeability studies of Amidon, Lennernäs, and colleagues (5,8), as summarized by Takagi et al. (3), show a good correlation between human intestinal permeability rate and the extent of absorption, as detailed earlier in the first paragraph of this paper. However, the criterion listed in the FDA BCS Guidance (4) is "...a drug substance is considered to be highly permeable when the extent of absorption in humans is determined to be 90% or more of an administered dose based on a mass balance determination or in comparison to an intravenous reference dose" [emphasis added by the FDA]. Although permeability rate methods are listed in the FDA BCS Guidance (4), we are unaware of any drug that has been certified by the FDA as class 1 eligible for in vivo biowaiver where there is no confirmatory ≥90% absorption data. This ambiguity does not exist in the Guideline on the Investigation of Bioequivalence issued in 2010 by the European Medicines Agency (EMA), which only allows in vivo biowaivers based on the extent of absorption (9). This difference in the permeability basis between BCS and BDDCS is brought home in a recent publication by FDA scientists (10). Chen and Yu (10) note that the FDA has classified as "highly permeable" a number of drugs where absorption is ≥90% in humans, but the measured permeability rates of these compounds are less than that for metoprolol (cefadroxil, cephradine, levofloxacin, loracarbef, ofloxacin, and sotalol), and in one case (pregabalin), the measured permeability rate is less than that for mannitol. As previously recognized (3), BCS is influenced by transporter effects. For example, large amino acid transporter-1 (LAT-1) is expressed in Caco-2 cells (11), and pregabalin is a LAT-1 substrate as noted in the package insert (12), which may explain this discrepancy. Since pregabalin is a zwitterion, its high oral bioavailability (≥90%) may be attributed to LAT-1 transport, an effect that is not taken into account by BCS. Thus, although in general drugs exhibiting high intestinal permeability rates show a high extent of absorption and a high extent of metabolism in both BCS and BDDCS, there are a number of drugs that could be classified as highly permeable in the BCS system based on absorption ≥90% but would be predicted to be poorly metabolized based on the low intestinal permeability rate, the basis for BDDCS classification. By evaluating metabolism, not permeability, BDDCS is not subject to variability due to transporter effects.

In general, classification of drugs between BCS and BDDCS only differ about 5–10%. However, for class 1 drugs where FDA has granted biowaivers, we estimate that the difference between BCS and BDDCS occurs for about 40% of drugs. We cannot make a more accurate estimate since the listing of all drugs granted biowaivers by the FDA is confidential. The percentage difference is high due to the ease in determining whether a drug is >90% absorbed (class 1 in BCS) when a drug is almost completely eliminated unchanged in the urine (class 3 in BDDCS).

# **BDDCS AND ITS USE**

In 1995, Wu and Benet (1) reviewed 131 drugs that had been classified into the four BCS categories in the literature through the end of 1994. Ten of these drugs had been listed in different classes by different authors. Wu and Benet (1) recognized that the major route of elimination in humans for the great majority of high-permeability class 1 and class 2 drugs was metabolism, while the major route of elimination for the poorly permeable class 3 and class 4 drugs in humans was renal and biliary excretion of unchanged drug. They also noted that the major route of elimination via cytochrome P450 3A4 (CYP3A4) was only observed for the class 1 and class 2 drugs and that for the class 3 and class 4 drugs CYP3A4 was not a major contributor to elimination for any. Since the extent of metabolism is better characterized than the extent of absorption, for marketed drugs, Wu and Benet proposed that in BDDCS, drugs be categorized in terms of the extent of metabolism and solubility versus permeability rate and solubility (1). This immediately eliminated the situation where drugs were classified in more than one class because of the uncertainty of permeability measures from study to study. The implication from the BDDCS for an NME is that if a surrogate measure of intestinal absorption rate is available, such as permeability rate through a Caco-2 cellular system, it would be possible to predict the major route of elimination for this new molecular entity in humans prior to its in vivo dosing to either animals or humans. Work is ongoing in our laboratory to determine the degree of accuracy in predicting BDDCS class for an NME based only on in vitro permeability measures prior to studies determining the extent of metabolism. Thus, Benet and Wu (1) proposed the BDDCS as shown in Fig. 1 with  $\geq 70\%$  metabolism being the cutoff for extensive metabolism. They also noted that there were relatively few drugs where the extent of metabolism was between 30% and 70% and that most drugs are either very highly metabolized or very poorly metabolized.

Figure 2 summarizes the predictions from BDDCS related to the effects of enzymes and transporters in the gut and liver following oral dosing of drugs (1,13). For class 1, highly soluble—high permeability rate—extensively metabolized drugs, transporter effects in the intestine and the liver have no clinical impact. Even compounds like verapamil,



**Fig. 1.** The Biopharmaceutics Drug Disposition Classification System (BDDCS) as proposed by Wu and Benet (1)

which can be shown in certain cellular systems (e.g., MDR1-MDCK) to be a substrate for P-glycoprotein (P-gp), exhibit no clinically significant P-gp substrate effects in the gut and the liver. Thus, a major proposition of BDDCS is that although class 1 drugs may be shown in cellular systems to be substrates for transporters found in the intestine and the liver, this has no clinical relevance. However, a caution is in order here. At this time, BDDCS predictions only apply to the intestine and the liver since class 1 drugs could be substrates for transporters at the blood–brain barrier and in the kidney.

From Fig. 2, it can be seen that for class 2 drugs, efflux transporter effects will predominate in the intestines. Thus, transporter–enzyme interplay will be primarily important for class 2 compounds that are substrates for CYP3A and phase II gut enzymes (e.g., glucuronosyltransferases, sulfotransferases), where efflux transporter effects can control the access of the drug to the gut enzymes. BDDCS predicts that both uptake and efflux transporters can affect class 2 drug disposition in the liver. Thus, inhibition or induction of uptake hepatic transporters such as the SLCOs (OATPs) and the SLC22As (OATs and OCTs) as well as the drug efflux hepatic transporters ABCB1 (P-gp), ABCG2 (BCRP), and ABCCs (MRPs) can lead to changes in hepatic metabolism even when hepatic enzymes are unaffected.

BDDCS predicts that for class 3, highly soluble—poor permeability rate—poorly metabolized drugs, uptake transporters will be important for intestinal absorption and liver entry for these poorly permeable compounds (Fig. 2). However, once these drugs get into the enterocyte or the

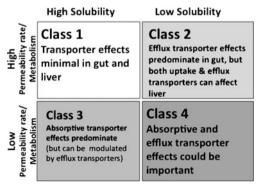


Fig. 2. Transporter effects predicted by BDDCS following oral dosing

hepatocyte, efflux transporter effects can also occur. Similarly, uptake and efflux transporter effects would be expected for the poorly soluble class 4 compounds. Because they are numerically underrepresented, one might expect that class 4 drugs are more difficult to manage therapeutically, i.e., there are transporter effects just as in class 2, except these drugs are not significantly metabolized. As will be shown subsequently, plotting the maximum recommended therapeutic daily dose (14) versus BDDCS and looking at the "actives" (low dose) versus "inactives" (high dose, safer) revealed no such relationship. It is more likely that fewer drugs are represented in class 4 because of the combined negative characteristics of high dose and (comparatively) low solubility, which leads to high variability. Since the FDA criteria for solubility is measured in water, we suspect that the approved class 4 drugs have adequate solubility in the natural surfactant containing intestinal fluids.

Details and explications for the predictions in Fig. 2 have been presented in recent reviews from the Benet lab (13,15,16). However, in large part, the predictions in Fig. 2 were based on clinical and experimental observations. That is, we are unaware of any clinically significant effects of the uptake and efflux transporters in the gut and liver on class 1 drugs, even when such drugs have been shown in cellular systems or other organs besides the gut and the liver to be substrates of the uptake and efflux transporters. These effects, however, might become relevant in overdosage situations, e.g., when combined with strong inhibitors of their respective metabolizing enzyme, when liver failure is manifest, or when accidentally overdosed. Similarly, we are unaware of the clinically significant effects of the uptake transporters in the gut for class 2 drugs even when these drugs are shown to be substrates of uptake transporters in the liver.

BDDCS also allows potential drug-drug interactions to be predicted (16,17). For class 1 drugs, only metabolic interactions need to be considered in the intestine and the liver. For class 2 drugs, metabolic, efflux transporter, and efflux transporter-enzyme interplay in the intestine must be taken into consideration, while in the liver, metabolic, uptake transporter, efflux transporter, and transporter-enzyme interplay (both uptake and efflux) can occur. For class 3 and class 4 drugs, uptake transporter, efflux transporter, and uptake-efflux transporter interplay will be of major importance.

BDDCS classification may also be useful in predicting the effect of high-fat meals on the extent of bioavailability (F) for an NME. In general, F for class 1 drugs is unaffected by high-fat meals; F is generally increased for class 2 drugs and generally decreased for class 3 drugs (18). Custodio *et al.* (19) have observed that these findings would be the outcomes expected if a component of high-fat meals inhibited both the uptake and efflux transporters. However, even if this were true, high-fat meals would be expected to have many other effects than inhibiting transporters. We estimate that the predicted effect of high-fat meals on F is only correct about 70% of the time.

#### **CAUTION**

It is surprising that such a simple four-category process as indicated in Fig. 2 works so well in predicting drug disposition, transporter-enzyme effects, and drug interactions. It is obvious, however, that this simple four-category system will not predict every interaction. BDDCS does not propose that every drug in the class will be substrates or not substrates for the uptake and efflux transporters. Rather, BDDCS helps prioritize what interactions should and should not be investigated. For example, the class 2 drug felodipine has been shown not to be affected by the intestinal or hepatic efflux transporters (20). Recently, our laboratory has shown the importance in humans of hepatic uptake transporters for the drugs atorvastatin and glyburide (21,22). These interactions were predicted based on cellular, isolated organ, and animal studies (22–24). Even when such preliminary studies confirm BDDCS predictions, this may not always be the case. Warfarin is a class 2 drug and, thus according to BDDCS, may be a substrate for a hepatic uptake transporter. In vitro studies in human and rat hepatocytes showed that rifampin would decrease warfarin metabolism by 30% (25), a similar extent to that found for our in vitro results with glyburide (22). However, our recently published study examining the effects of a single dose of rifampin on the pharmacokinetics of warfarin in healthy volunteers showed that OATP uptake in vivo in humans was not clinically significant for warfarin (25). Similarly, although warfarin appears to be both a substrate and inhibitor of liver-bound P-gp (26), this has not been regarded as clinically significant; one P-gp haplotype, however, is clearly associated with low-dose warfarin in a 201 patient sample (27). This emphasizes again the caution that BDDCS only predicts with respect to transporters what might occur, but not that the effect will always occur. Furthermore, our example above (25) reinforces the well-recognized concept that observations in cellular systems and animal models must be tested in vivo in humans before the significance of the effect is assumed.

#### WHY DID WE PREPARE THIS PAPER?

Wu and Benet (1) recognized that the FDA's BCS approach (4) held the potential for predicting the drug disposition characteristics and drug interactions for NMEs as well as for drugs on the market. The use of BDDCS in the area of systems chemical biology (28) has been previously outlined (29), and computational models to assign BDDCS class from molecular structure have been proposed (30). However, to test the usefulness of BDDCS, to examine patterns within the BDDCS classes and among them, and to gain further perspectives, it is necessary to compile a large database, at least with respect to drugs that have reached the market. Since BDDCS makes predictions related to hepatic elimination in addition to intestinal absorption, such a database should include as many drugs as possible where systemic concentrations are relevant. Thus, approximately one quarter of the drugs categorized here are administered exclusively by non-oral routes. We also felt strongly that the information provided in the database should be based, where available, not only on the *in silico* predictions of those parameters but also on experimental values. We noted that many of the solubility values used in BCS analyses are frequently in silico predictions of solubility. For example, in the often quoted paper of Willmann et al. (31) describing a physiological model for the estimation of the fraction dose absorbed in humans, the measured solubility values were only included for only 22 of the 126 drugs evaluated. The solubility for the great majority of the drugs utilized in the Willmann et al. (31) analysis came from the compilation of Zhao et al. (32). These latter workers evaluated human intestinal absorption data for 241 drugs (32). Of the 241 drugs, Zhao et al. compared the experimental results for 26 of the compounds with the predicted solubility utilizing the method of Meylen et al. (33) based on octanol water partition coefficients. For these 26 drugs, the measured *versus* calculated solubility differs by a factor of  $5.7\pm6.0$ -fold, the greatest difference being 23-fold. Thus, at present, in silico methodologies for aqueous solubility prediction are not sufficiently accurate for the BDDCS analysis not only due to the inherent limitations of such methods but also to its definition, i.e., BDDCS solubility categorization depends on the maximum strength dose and the effect of pH. Experimental solubility values were included in this compilation wherever they could be found in the literature (577 drugs). Qualitative evaluations such as "practically insoluble in water," which relate to upper limits, and "highly soluble in water" were used in the absence of published solubility values from a reliable source and were the basis of the BDDCS assignment when no measured value is listed in the table.

Frequently, large compilations such as the ones presented here are carried out with the assistance of graduate students, postdoctoral fellows, and auxiliary personnel. In our experience, this can lead to unevenness in the quality of the data presented in the table. For each of the drugs listed here, decisions concerning the experimental values to be listed and classification assigned were made during the multiple joint meetings of Drs. Benet and Oprea between February 2007 and February 2011. Then, Dr. Broccatelli captured potential errors by cross-checking many references. Therefore, if there are errors in the parameters or in the assignments, this can only be attributable to the authors.

# MEASURED PARAMETERS (IN ORDER OF DIFFICULTY)

#### **Solubility**

There are a number of issues concerning the choice of the high versus low solubility criteria and which representative experimental values should be listed. The high solubility criterion that the highest dose strength on the market is soluble in 250 mL or less of water over the pH range 1-7.5 at 37°C was an arbitrary decision made by Amidon et al. (5) and incorporated into the regulatory Guidances (4,9). Wu and Benet (1) found that this cutoff criterion in BCS appeared to work well for BDDCS, and thus, we have continued to use this arbitrary, discriminatory criterion. The FDA criteria (4) require the solubility measurements to be made in water, not simulated intestinal fluid containing a surfactant, and the solubility values listed in the table are values in water. Furthermore, the FDA criteria evaluate the cutoff between high and low solubility using the value for the lowest solubility over the pH range 1-7.5 (realistically measured at pH 1.2, 4.5, and 6.8 as indicated in the FDA Guidance). Furthermore, the solubility is to be measured at 37°C. The values in Tables I, II, III, IV, and V are the authors' best recommendation based on experimental literature data for

Table I. Measured and In Silico Data for 351 BDDCS Class 1 Drugs

	Maximum	Maximum			Measured	ţ	% Excreted			;	;					
Generic name	strength dose value	strengtn dose unit	Formulation	Route	(mg/mL)	Dose	unchanged in urine	MW drug	Measured LogS molar	Measured $LogP$	Measured $LogD_{74}$	mmvsLgs 3-7.5	CLogP	HBA	HBD	PSA
Abacavir sulfate	300	mg	Tablets	Oral	77	0.02	1.2	286.34	-0.57	1.20	1.20	-3.07	0.81	9	ю	95.80
Acarbose	100	mg	Tablets	Oral			1	645.62		-8.83		3.30	99.9-	19	14	351.80
Acebutolol hydrochloride	400	mg	Capsules	Oral	;	4	10	336.43	9	1.71	0.19	-1.46	1.71	5	6	97.05
Acetaminophen; paracetamol	1000	mg	Tablets	Oral	23.7	0.2	3	151.17	-0.80	0.20	0.40	-1.66	0.49	7 .	7 (	55.41
Acetohexamide	200	mg	Tablets	Oral	5.43	0.0	,	324.40	-1.98	2.44	-0.36	-3.13	57.7	4 (	7 -	103.22
Acetylsalicylic acid; aspirin	300	mg r	Lablets	Oral Initiation (1 m)	OI 2	7.0	4. 0	01.081	1.26	00.0	1.10	-0.94	21.02	n 0		125 44
A tenosine	o -	mg/mr	Cansules	Injection (i.v.)	0		> 00	400.65	C/.T_	-0.90	-1.10	/SI-	8.24	۰ ر	t (	45.12
Alfentanil	0.5	mg/mL	Solution	Injection (i.v.)			0.5	416.53		2.16	2.10	-4.12	2.13	1 9	٥ ٥	77.73
Alfuzosin	10	m &	Tablets	Oral			11	389.46		i	-1.18	-3.80	2.55	× ×	2	108.88
Aliskiren	300	mg	Tablets	Oral	350	0.003	25	551.77	-0.20		2.45	-3.09	3.51	7	4	156.62
Alosetron	1	mg	Tablets	Oral	19	0.00007	9	294.36	-0.68			-3.26	1.74	2	1	44.23
Alprazolam	2	mg	Tablets	Oral	0.073	0.1	20	308.77	-3.63	2.12	1.26	-3.68	2.56	3	0	33.27
Alprenolol	200	mg	Tablets	Oral	20	0.02	0.5	249.36	-0.70	3.10	1.34	98.0-	2.65	3	2	46.24
Ambrisentan	10	mg	Tablets	Oral	90.0	0.7	S	376.46	-3.80			-3.35	3.33	2	1	70.11
Ambroxol	30	mg	Tablets	Oral	10.9	0.01	∞	364.08	-1.52			-2.44	5.66	3	3	64.50
Amifostine	2	mg/mL	Solution	Injection (i.v.)			69.0	214.22	;	-1.04		3.12	-1.85	5	4	106.66
Aminophenazone; aminopyrine	300	mg	Tablets	Oral	55.55	0.02		231.30	-0.62		1.00	-2.23	1.04	ю ·	0	26.79
Amitriptyline hydrochloride	150	mg	Tablets	Oral	1000	90000		277.41	0.50	4.92	2.95	-2.29	4.85	_	0	1.18
Amlodipine	10	mg	Tablets	Oral			10	408.89		3.00	1.68	-1.79	3.43	S	7	105.47
Amoxapine	150	mg	Tablets	Oral				313.79				-2.43	3.41	m 1		34.47
Amsacrine	33.33	mg/mL	Solution	Injection (i.v.)	i,	000	10	393.47	0			-1.37	4.69	n -	7 0	85.11
Anastrozole		mg	Tablets	Oral	O.5	0.008	10	293.37	1.00	Ċ	0),	-3.60	1.29	4 0	o (	120.05
Annydrovinoslaules;	-	mg/mr	Solution	Injection (i.v.)	OT	0.0004	6.0	192.98	-1.90	3./0	5.09	-/.12	0.11	ø	7	150.05
Antinyrine: phenazone	200	ma	Tablets	Oral	1700	0.001	50	188 23	96 0		0.28	-1 79	0.20	c	0	20 00
Anupyime, phenazone	35,0	m g	Tablets	Unjection (e.c.)	8/1	0.001	0.3	767 33	0.30	230	0.70	-1.72	07.70	1 (	۰ د	70.77
Aponiotpinie Asenanine	10	E E	Tablets	Injection (s.c.) Oral	07	0.000	C	285.78	CI.I_	7.30		-2.73 -2.41	4.49 87.89	o –	7 0	10.59
Atomoxetine	09	9 III 8	Cansules	Oral	877.8	600.0		255.36	96.0-			-1.14	3.94	, ,	· -	23.68
Azathioprine	100	me me	Tablets	Oral	10 27 ::	0.04		277.27	1.44	0.10	0.02	-2.72	0.51	1 9		99.66
Bambuterol	20	m Su	Tablets	Oral	33	0.002	0	367.45	-1.05	1.50	-2.58	-1.56	0.56	4	2	94.24
Benazepril	40	mg	Tablets	Oral	2/8	0.002	0.5	424.50	-0.74		1.10	-1.84	1.82	5	2	101.61
Bendamustine	5	mg/mL	Solution	Injection (i.v.)			1	358.27				-0.83	2.76	4	1	82.69
Benidipine	∞	mg	Tablets	Oral	1.9	0.02	1	535.65	-2.45			-5.69	7.41	0	0	112.85
Benserazide	50	mg	Tablets	Oral			1	257.25				2.13	-2.90	7	7	169.84
Benznidazole	100	mg	Tablets	Oral	0.4	1.0	1	260.25	-2.81			-2.65	0.90	4 (		87.81
Bepridil	000	mg	Tablets	Oral	v 5	0.000000	0.5	366.55	-1.87		2.00	-429	6.20	n u	0 6	10.84
Betamethasone	to:0	a m	Tablets	Oral	0.066	0.000000	8 4	390.30	-3.77	1 94	1 04	13.61	1 70	o v	י ני	104 22
Betaxolol	20	m s	Tablets	Oral	0.451	0.2	15	307.44	-2.83	2.81	0.55	-1.66	2.32	, 4	2 2	55.03
Bimatoprost	0.30	mg/mL	Solution	Ophthalmic	8.0			415.58	-2.72			-5.44	1.75	4	4	100.52
Biperiden	2	mg	Tablets	Oral	1	0.008		311.47	-2.49	4.25		-1.93	4.94	2	1	23.73
Bopindolol	2	mg	Tablets	Oral	3.3	0.002	0	380.49	-2.06		4.22	-3.92	4.98	3	2	64.71
Bortezomib		mg/mL	Solution	Injection (i.v.)	 		ç	384.25	-2.07	0		-4.09	0.78	9	4 (	151.53
Dromogonom	7 4	mgmL	Solution	Opnunalmic	C.1 71.0	10	IO	216.14	22.29	0.70	151	2.00	1.49	n "	7 -	50.94
Bromocriptine	o vo	m R	Cansules	Oral	0.1,	0.03	6	654.61	-2.91	60:7	4.59	)±6.90	6.58	, ,	- m	118.24
Bromperidol	10	m	Tablets	Oral	0.09	0.4	0.5	420.33	-3.67	2.74	3.34	-3.84	4.00	ю		42.01
Budesonide	3	mg	Capsules	Oral	0.02	9.0	0	430.55	-4.33	3.20	2.70	-4.71	2.91	9	2	99.25
Buflomedil hydrochloride	300	mg	Tablets	Oral			23.6	307.39			-0.75	-123	2.93	5	0	46.76
Bupivacaine	v o	mg/mL	Solution	Injection (epidural)	0.17	000	5 -	288.44	-3.23	3.41		-3.53	3.69	2		33.72
Duprenorphine hydrochloride	0 5	m g	Tablets	Oral	217	0.002	1 0	720.75	-1.4/	6.70	2 27	1.00	5.99	n (	۷ -	32.62
b upropion Busulfan (busulphan)	2	E E	Tablets	Oral	312 0.1	0.00	, T	246.30	0.11 -3.39	-0.52	3.27 -0.52	-1.99	3.21 -0.59	1 4	۰ 0	92.04
/ J	i	۵		1	!		1	!	!	!	!					

Table I. (Continued)

	Maximum	Maximum			Measured	í	% Excreted				,	1022				
Generic name	surengun dose value	strength dose unit	Formulation	Route	solubility (mg/mL)	number	unchanged in urine	MW drug	Measured LogS molar	LogP	$LogD_{74}$	3–7.5	CLogP	HBA	HBD	PSA
Butabarbital	100	mg	Tablets	Oral				212.25		1.65	1.45	-2.42	1.58	3		83.96
Butalbital	50	mg	Tablets	Oral			3.6	224.26				-2.74	1.63	3	2	83.96
Butorphanol	S	mg	Tablets	Oral	2	0.01	2	327.47	-2.21	2.26		-2.40	3.73	c		46.61
Caffeine	65	mg	Caplets	Oral	21.5	0.01		194.19	0.96	-0.07	-0.07	-1.95	40.04	т,	•	48.50
Capecitabine	2000	mg	Tablets	Oral O==1	97.	0.08	nc	359.36	-1.14			-3.45	6.84	, ٥		24.33
Captylidene	20000	m m	Fowder	Oral	3 (	8	0 4	276.73	1 06			1 33	75.5 75.5	o 4		22.20
Carollopa	07.7	g m	Implant	Otal Tonical (skin	5.7 8.0	0.04	5.0 5.0	214.05	-1.30	1.53	1 53	-2 50	5.4 5.4	۰ د		60.78
(an integral	2::	a B	mbiant	membranes)	9	0000	9	60:417	61:1	CCT	CC:-1	00.7	70:1	1		00
Caspofungin acetate	6.48	mg/mL	Solution	Injection (i.v.)			1.4	1093.34				-3.18	-2.95	18	16 4	54.42
Cefoperazone	2000	mg	Powder	Injection (i.v.)			29	645.68		-0.74	-2.12	-3.47	-0.22	11		227.75
Cerivastatin	8.0	mg	Tablets	Oral	195	0.00002	24	459.56	-0.37			-2.00	3.56	9		104.98
Cetrorelix	3	mg/mL	Solution	Injection (s.c.)	∞		3	1431.07	-2.25			-7.00	-0.40	18		543.33
Cevimeline	30	mg	Capsules	Oral			13.5	199.32				-1.32	1.14	2	0	6.97
Chloral hydrate	200	mg	Capsules	Oral	8300	0.0002		165.40	1.70	0.99	1.61	-0.77	0.72	2		45.12
Chlorambucil	2	mg	Tablets	Oral	12	0.0007	0.5	304.22	-1.40	3.25	1.59	-0.27	3.63	m i		41.70
Chloramphenicol	250	mg	Capsules	Oral	2.5	0.4	\$	323.13	-2.11	1.14	1.00	-2.79	1.28	2		122.11
Chlordiazepoxide	25	mg	Capsules	Oral	2	0.05	0.5	299.76	-2.18	2.44	2.19	-2.65	3.79	c		45.94
Chlormethiazole; clomethiazole	192	mg	Capsules	Oral	10	80.0	0.05	161.65	-1.21	2.12	2.12	-1.80	1.68	_		10.24
Chlorpheniramine	4	mg	Tablets	Oral			10	274.80		3.38	1.38	-1.57	3.15	2		11.42
Chlorpromazine	200	mg	Tablets	Oral	400	0.002	0.5	318.87	0.10	5.41	2.82	-2.69	5.30	7	0	1.75
Cilazapril	5	mg	Tablets	Oral		0.02	0	417.51	-2.62	į	-2.25	-0.78	1.47	9		106.36
Cisplatin		mg/mL	Solution	Injection (i.v.)	2.53		2.3	300.06	-2.07	-2.53		,	-1.68	0		75.29
Clemastine	2	mg	Tablets	Oral	2.3	0.003	w (	343.90	-2.17	5.49	3.04	-2.56	5.45	7		9.97
Clindamycin hydrochloride	300	mg	Capsules	Oral	40	0.03	13	424.99	-1.08	2.16		-2.99	7.2.7	9	4 	110.49
nydrate	ç		T-11-11		0 100			3000	,	,	5	000	-	,		00
Clobazam	10	mg	Tablets	Ora	0.100	7.0	t u	314.65	07.5	21.7	1.30	-3.03	4 6	7 (	) t	26.76
Clonbric acid	Č	Active metabolite		-	¢,	0	).	214.65	0.68	/27	-1.13	-1.63	7.87	n (	- 0	49.94
Clomiphene citrate	50	mg	Tablets	Oral	1.11	0.2	∞	405.97	-2.73	6.70	j	-4.24	7.15	7 (	0 0	10.28
Clomipramine	5, 6	mg	Tablets	Oral	Č	00	i.	314.86	c c	5.19	2.76	-2.56	5.92	7 -	o ,	1.75
Clonazepam	7	mg	Tablets	Oral	0.1	0.08	0.5	313.72	-3.30	2.41	2.41	-3.90	2.38	4 4	- c	86.30
Coming	5.0	mg ma/m1	Lablets Solution	Oral Teninel (megal)	71		0.5 1	314.73	000	230	7.20	-2.30	15.2	4 %	7 0	82.98
Codoino monohuduoto	1.0	mg/mr	Solution Tehlets	Topicai (iiasai)	135	90000	1 0	200.37	0.17	1.10	2.30	1.40	000	o ∠		41.04
Colchicine	90	a m	Tablets	Oral	657 74	0.0000	0.1	300.45	0.14	1.19	1.03	-1.40 -3 90	0.90	<del>1</del> ~		41.74
Cortisone	25.0	89 E	Tablets	Oral	800	0.0000		360.45	-3 11	1.30	1.03	-3.52	130	o v	- 6	99 93
Cvanocobalamin (vitamin B12)	i v	a iii	Tablets	Oral	12.5	0.002	0.5	1355.40	-2.04			0.05	-1.36	17	9	492.69
Cyclizine	50	mg	Tablets	Oral	8.7	0.02	0.5	266.39	-1.49			-2.97	3.80	2	0	2.35
Cyclobenzaprine	10	mg	Tablets	Oral	200	0.0002	0.5	275.40	-0.14			-2.58	5.10	1	0	1.18
Cyclophosphamide	50	mg	Tablets	Oral	40	0.005	6.5	261.09	-0.81	0.63	0.63	-1.92	0.80	2	1	44.31
Cyproheptadine	4	mg	Tablets	Oral	3.636	0.004	0.5	287.41	-1.90	4.69		-3.19	5.30	-	0	1.18
Cytarabine	20	mg/mL	Solution	Injection (i.v.)			11	243.22		-2.51	-2.24	-0.60	-2.20	7	4	133.23
Dabigatran etexilate	110	mg	Capsules	Oral	1.8	0.2	0	627.75	-2.54	3.80		-7.74	4.13	∞	2 14	146.19
Dantrolene	100	mg	Capsules	Oral	2	0.2	S	314.26	-2.20	1.70	0.77	-3.44	1.63	S	1	118.74
Darifenacin	15	mg	Tablets	Oral	ć	000	12.5	426.56	i c	i c	ò	-3.74	3.62	m (	_ (	56.52
Debrisoquine	07.	mg	Tablets	Oral	67	0.003	12	1/5.24	9/.0	C/:0	-2.96	2.59	0.90	n (	7 -	52.16
Desarkyınurazepam	000	Active metabolite	Tobloto	- Tom-O			o. c	266.70		7.70	6 6	03.70	10.7	۷ ر		C1.24
Desipramine	700	mg	Tablets	Oral	1400	t	7 0	266.39	0,	0.45	0.40	0.80	/4.4	7 (		15.14
Desmetnyldiazepam (nordazenam)	10	mg	Tablets	Orai	0.057	0.7	C:0	71.0.17	-3.08	2.93	2.93	-3.09	3.02	7	,	CT:7±
Desogestrel	1.5	mg	Tablets	Oral	0.32	0.02	0	310.48	-2.99			-4.86	5.68	1	1	22.56
Dexamethasone	0.75	gm	Tablets	Oral	0.092	0.03	2.6	392.47	-3.63	1.94	1.83	-3.65	1.79	5	3 10	04.22
Dexmethylphenidate	10	mg	Tablets	Oral			0.5	233.31		1.80	-0.28	-1.61	2.56	2	1	41.64

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000	10.28	50.84	28.76	54.80	43.08	106.25	56.49	6.97	83.19	60.48	1.18	104 90	10.28	22.21	23.68	51.90	101.91	2095.89	222.89	70.55	118.24	28.67	73.30	71.04	45.43	79.29	22.56	45.43	51.12	22.56		212.97	1923.78	113.10	20.32	51.11	65.69	135.44	185.94	20,00	57.00	20.72	64.48	23.68	29.93	86.52	58.37	101.65	120.98	74.79	41.94	10.67	537.10	47.74	78.44	662.73	
c	0	2	0	7	70	4	· c	0	4		0	-	٠ .	ی د	-		2	63	9	3	Э	0	2	1	2	0	1	2	1	1		ю	28	-	0	_	7 .	4 -	4	,	۷ ٥	0 0	,	-	0	ю	1	4	2	Э		n n	, <u>«</u>		3	15	
,	7	2	2	m '	9	4	+ 4	- 6	1 4	· m		. 0	, ,	2 5	2 7	ı m	5	29	12	3	9	В	4	5	2	9	1	2	2	2		13	29	9	7	m	7	<b>x</b> 0	×	ų	n 1	0 4	۰ ر	1 2	ю	4	4	5	7	2	4 ,	۰ ح	- ~	9 %	4	33	
30.0	3.95	3.72	2.96	4.73	3.27	2.50	3.65	3.45	2.43	2.34	4.53	3.53	4.09	0.32	4.26	3.36	0.67		0.32	1.23	4.66	3.13	1.72	2.57	3.78	1.25	-0.24	3.86	0.40	5.68		7.10	1.61	0.09	3.62	4.36	3.01	-2.01	-3.07	7.4	1.34	1.23	2,73	4.57	4.22	4.05	3.32	1.26	-0.78	0.72	1.03	4.71	2	1.72	2.98	69.6-	
20	-1.35	-0.65	-3.75	-3.43	-2.61	00 6-	2.2	187	-1.85	-1.96	-2.26	55.4	-2 30	-3.74	-2.22	-2.30	-0.67		-3.77	-3.07	-2.74	-2.94	-0.80	-3.69	-3.90	-2.82	1.06	-4.16	-1.24	-4.61		-8.68		-2.79	-3.65	-1.83	-4.38	-1.68	0.64	8	14.00	2.54	69 0	-1.19	-3.52	-4.00	-1.68	-2.00	2.41	0.42	-1.09	19.97	55.5	-1.16	-1.38	-3.81	
		1.12	2.99	1.13	1.82	1 07	2.27	1.61			2.76	090	237	1 27	1	1.10			0.46		2.85						-0.31	3.67	1.13						2.92		3.03	-2.32			1.07	2.06	080-	1.95	2.35		1.21		0.95			3 53	3	-0.85	0.12		
			2.82	4.51	3.44	3 00	07.0	3.27	į		4.49	ì	4 20	1 27	1				1.27		3.69			2.23	4.01		-0.31	3.67	0.38						4.05		3.03	-0.80			1.6/	2.06	08.0	4.05	3.94	3.80	1.12					096	20:1				
,	-1.26	-1.09	-3.70	-1.52	-1.51	-131	16.1	0.59			0.23	3.5		-1 74		-1.98	-1.18	-0.65		-1.51	-2.82		-1.17	-2.84	-3.48				-0.56	-2.80		-4.98	-2.22	-0.11	-1.13	-0.21	-3.94	č	-2.01	6	0.40	-4.80	-1.03	-1.31	0.11	-0.92	-1.33	-2.72			-1.46	-1.24	3	-0.49	-1.32	-1.36	
5	2/1.41	245.37	284.75	296.16	326.44	328 41	414.53	255.36	301.39	324.38	295.45	451.49	279.39	543.53	297.42	382.53	376.46	4491.98	543.53	325.41	581.68	324.40	295.38	345.42	272.39	388.82	46.07	296.41	141.17	324.47		958.25	4186.66	321.34	336.48	411.59	372.56	285.24	363.77	02.00	302.30	313.20	130.08	309.33	387.89	411.48	318.34	344.41	386.26	243.31	287.36	263.20	1269 44	312.42	231.09	1134.94	
ç	0.19	1	0.5	0.5	18 18	2 %	C C	1 6	10	0	· v	ì	C	v c	) (	· vo	10	0	9.5			∞	0.5	0.5	0.5	5	2.5	3	25	0.1		0		0	∞	0	0.5	24			1 0	0.0	i v	1.25	0.1	1.5	2	∞		9	20	× <	20.5	3 =		0.5	
	0.02		0.7	0.02	0.1			0.0002								0.04	0.003			0.00008	0.004			0.2	0.09				0.03	0.001		9.4		800.0	0.0003	0.0001	0.5	Č	0.01	000	0.003	10	0.1	0.005	0.0002	0.003	0.03	0.00007			0.005	30	3	0.00004	9000		
į	CI	20	0.057	6	1.11	16	01	1000			200			10	2	4	25	1000		10	2		20	0.5	0.09				39.2	0.51		0.01	25	250	25	256	0.043	0	5.53	2	0.14	0.004	12.2	15.2	500	50	14.869	99.0			10	cI 0	1	100	11	50	
	Oral	Injection (i.v.)	Oral	Oral	Oral	Oral	Oral	Oral	Injection (i.v.)	Oral	Oral	Oral	Oral	Injection (i v.)	Oral	Oral	Oral	Injection (i.m.)	Injection (i.v.)	Oral	Oral	Oral	Injection (i.v.)	Oral	Oral	Oral	Oral	Oral	Oral	Topical (skin.	membranes)	Oral	Injection (s.c.)	Oral	Oral	Oral	Oral	-	Oral		Oral Injection (i.v.)	Oral	Injection (i v.)	Oral	Oral	Oral	Oral	Topical (aerosol)	Oral	Oral	Oral	Injection (1.v.)	Injection (s.c.)	Oral	Oral	Injection (i.v.)	
The Latest	lablets	Solution	Tablets	Tablets	Tablets	Tablete	Cansules	Cansules	Solution	Tablets	Tablets	Tablete	Cansules	Solution	Cansules	Tablets	Tablets	Solution	Solution	Tablets	Tablets	Tablets	Solution	Tablets	Tablets	Tablets	Solution	Tablets	Capsules	Tablets (and 68 mg	implant s.c)	Tablets	Solution	Tablets	Lozenge	Tablets	Tablets		Iablets	177	Solution	Tablets	Solution	Capsules	Capsules	Capsules	Tablets	Powder	Tablets	Tablets	Tablets	Solution	Implant	Tablets	Tablets	Solution (10 000 units/mL)	(10,000 чины поста)
	mg	mg/mL	mg	mg	mg	ě	m m	m <sub>s</sub>	mø/mľ.	ā m	å	me m	S III	Im/sm	mg min	9 H	mg	mg/mL	mg/mL	mg	mg	mg	mg/mL	mg	mg	mg	mg/mL	m	mg	gni		mg	mg/mL	mg	mg	mg	mg	Active metabolite	mg		mg mg/mI	mg/mr	mg/mI	m g	ů m	mg	mg	μg/inhalation	mg	mg	mg	mg/mL	m e	mg m	mg	mg/mL	
Ş	09	15	10	20	300	05	120	205	12.5	100	75	, o	9	,	67.3	40	20	06	2	0.2	2	20	10	20	2	8	62	1	250	157		1	0.25	200	1.6	∞	S	Ç	OT		0.1	1.1	35	30 E	30	40	100	12	100	2.5	12	0 <del>4</del> %	10.8	-	16	20	
	Dextromethorphan hydrobromide	Dezocine	Diazepam	Diclofenac	Dihydroquinidine;	Dilevalol	Diltiazem	Diphenhydramine	Dobutamine hydrochloride	Dolasetron	Dosulepin: dothiepin	Dovazosin	Doxenin	Doxornhicin	Duloxetine hydrochloride	Eletriptan hydrobromide	Enalapril	Enfuvirtide	Epirubicin	Ergonovine; ergometrine	Ergotamine tartrate	Escitalopram	Esmolol	Esomeprazole magnesium	Estradiol	Eszopiclone	Ethanol	Ethinylestradiol	Ethosuximide	Etonogestrel		Everolimus	Exenatide	Famciclovir	Fentanyl	Fesoterodine	Finasteride	Fludarabine	Fludarabine	2 -monophosphate	Flucirocorusone acetate	Flunitrazenam	Fluorogradil	Fluoxetine	Flurazepam	Fluvastatin sodium	Fluvoxamine	Formoterol fumarate	Fosfluconazole	Frovatriptan	Galantamine	Glibomuride	Goserelin	Granisetron	Guanabenz	Heparin; enoxaparin	

Table I. (Continued)

	Maximum	Maximum			Measured	,	% Excreted			:	;					
Generic name	strength dose value	strength dose unit	Formulation	Route	solubility (mg/mL)	Dose	unchanged in urine	MW drug	Measured LogS molar	Measured $LogP$	Measured $Log D_{74}$	minVSLgS 3-7.5	${ m CLog}P$	HBA	HBD	PSA
																I
Hexobarbital	250	mg	Tablets	Oral	640	0.002	0.5	236.27	0.43	1.98	1.98	-2.81	1.63	3		70.56
Hydralazine hydrochloride	100	mg	Tablets	Oral	44.2	0.009	∞	160.18	-0.65	1.00	0.56	-1.29	99.0	4	2	26.79
Hydrocodone	10	mg	Tablets	Oral	62.5	90000	10.2	299.37	89.0-	1.27	3.38	-1.25	1.13	4		37.66
Hydrocortisone; cortisol	20	mg	Tablets	Oral	0.42	0.2		362.47	-2.94	1.61	1.37	-3.48	1.70	5	3 10	104.22
Hydromorphone	∞	mg	Tablets	Oral	10	0.003	9	285.35	-1.46			-1.06	0.72	4	_	51.42
Hydroxychloroquine	200	mg	Tablets	Oral	200	0.004	27	335.88	-0.23		1.72	-1.64	4.12	4	7	48.25
Sunate Hydroxyzine	100	mø	Tablets	Oral	200	90000	0.1	374.91	72.0	3.50	2.37	-3.76	4 00	4	_	33.70
Thutilide	0.1	mø/mI.	Solution	Injection (i.v.)	100		7	384.59	-0.58			-2.01	3.78	. 4	,	75.53
Idamikicin	-	mø/mI.	Solution	Injection (i v)			۰ (۲	497 51			163	-3.81	06.0	. 01	1 1/2	191 23
Ifosfamide	50	mg/mT	Solution	Injection (i.v.)	100		10	261.09	-0.42	98'0	0.86	-2.40	0.92	2		44.31
Hoprost	, v	uø/inhalation	Solution	Topical (aerosol)	-	0.00002	0	360.50	-2.56	2.97	0.46	-4.40	2.71	1 4		85.95
Imidapril	10	mg	Tablets	Oral		!	· vo	405.45	)	i	,	-0.68	1.53	. 9	2 13	121.36
Imipramine	50	mg	Tablets	Oral			1.5	280.42		4.80	2.20	-2.04	5.04	2	0	1.75
Imiguimod	50	mg/g	Cream	Topical (skin.	9.0		1	240.31	-2.60			-2.71	3.24	3	1 ,	48.73
				membranes)												
Inamrinone;	0.25	mg/mL	Solution	Injection (i.v.)	6.0		25	187.20	-2.49		-0.70	-1.89	69:0-	3	2	70.15
amrinone lactate																
Indapamide	2.5	mg	Tablets	Oral	0.59	0.02	7	365.84	-2.79		2.09	-3.70	2.96	4	2 10	102.49
Irinotecan	20	mg/mL	Solution	Injection (i.v.)	10		16.7	586.69	-1.77			-3.79	2.73	9	1 10	108.44
Isoniazid	300	mg	Tablets	Oral	153	0.008	7	137.14	0.05	-0.70	-1.14	-0.67	-0.67	3	2	74.33
Isosorbide 2-mononitrate	10	mg	Tablets	Oral	1.1	0.04		191.14	-2.24	-0.40	-0.40	-0.83	99.0-	9	1	09.96
Isosorbide 5-mononitrate	20	mg	Tablets	Oral	1.1	0.07	2.5	191.14	-2.24	-0.40	-0.15	-0.88	99:0-	9		96.60
Isosorbide dinitrate	40	mg	Tablets	Oral	1.089	0.1		236.14	-2.34	131	1.31	-2.15	0.22	∞	0 13	130.49
Ivabradine	7.5	mg	Tablets	Oral			4	468.60				-3.33	3.97	9		57.04
Ivermectin	3	mg	Tablets	Oral	4	0.003		875.12	-2.34		6.82	-8.48	5.39	13	3 I	73.88
Ketamine	100	mg/mL	Solution	Injection (i.v.)	200		4	237.73	-0.08	2.18	2.09	-1.35	2.93	2	1	32.84
Labetalol	300	mg	Tablets	Oral	16	80.0	2.5	328.41	-1.31	1.33	1.08	-2.14	2.50	4		106.25
Letrozole	2.5	mg	Tablets	Oral	0.041	0.2	3.9	285.31	-3.84			-4.71	1.24	4	0	61.36
Leuprolide	45	mg/mL	Solution	Injection (s.c.)	250		2	1209.43	89:0-			-5.36	-0.99		16 46	464.21
Levamisole	50	mg	Tablets	Oral				204.30		1.84	1.16	-1.62	1.84	2	0	10.79
Levobupivacaine	7.5	mg/mL	Solution	Injection (epidural)	0.17	0.2	0.5	288.44	-3.23	3.21	2.66	-3.53	3.69	2	1	33.72
Levodopa	250	mg	Tablets	Oral	1.65	9.0	0.5	197.19	-2.08	-2.74	-2.39	1.48	-2.82	2	4	114.54
Lidocaine	20	mg/mL	Solution	Injection (i.v.)	3.58		∞ ;	234.34	-1.82	2.44	1.88	-2.09	1.95	2		33.72
Linezolid	009	mg	Tablets	Oral	œ	0.3	30	337.35	-1.62		1.80	-3.42	0.17			70.45
Liragiunde	0 0	mg/mr	Solution	Injection (s.c.)	000	,	0 0	5/51.29	9	000	000	,	,	66 6	94 10	61.5.10
Lorazepam Loroninida budasoblorida	100	mg m	Tablets	Oral	0.00	0.1	C: 7	370.03	-3.60	657	2.59	5.90	7 7 7	n (	v (	20.32
Manachiline	75	mg m	Tablets	Oral	7.7	0.10	، ۳	277.41	-1 05	2 4 2 8 5	1.04	-1 17	52.40	٦ -	· ·	14.57
Maraviroc	300	m e	Tablets	Oral		0.10	) oc	513.68	2	) F	ì	-3 53	3.26	- 4		57 98
Melatonin	2	mg m	Tablets	Oral	0.1	0.2		232.28	-3.37			-2.78	1.03	2	2	55.92
Melphalan	2	m gu	Tablets	Oral	0.1	80.0	12	305.21	-3.48		-0.11	-0.39	-0.21	4		29.69
Meperidine; pethidine	100	mg	Tablets	Oral	3.22	0.1	13	247.34	-1.89	2.72	1.44	-1.65	2.23	2	0	28.24
Mepivacaine	20	mg/mL	Solution	Injection (epidural)	2.4		5	246.36	-2.01	1.95	1.75	-2.74	2.10	2		33.72
Meprobamate	400	mg	Tablets	Oral	3.4	0.5		218.25	-1.81	0.70	0.70	-1.53	0.92	2	2 1.	110.07
Mesna	400	mg	Tablets	Oral				142.20				1.69	-1.55	3		59.79
Methadone	10	mg	Tablets	Oral	120	0.0003	24	309.46	-0.41	3.93	2.07	-2.46	4.17	2		19.45
Methohexital	10	mg/mL	Solution	Injection (i.v.)	100		0.5	262.31	-0.42		2.30	-3.13	1.81	e (	_ (	70.56
Methylergonovine	0.2	mg	Tablets	Oral O '				339.44		90	0	-3.30	1.76	m (	m +	70.55
Methylphenidate Methylphenidate	33	mg	Tablets	Oral	0 2726		C	233.31	30.6	1.80	0.28	-1.75	2.56	2 4	, 1	41.64
Metorrolol	32 100	mg me	Tablets	Oral	U.325.U 1000	0.0	y. 6	3/4.48	0.00	1 88	0.16	19.0/	1.74	o 4	o c	24.22
Metropiola Metropidazola	001	mg me	Tablets	Oral	1000	0.0004	10	171 16	0.5/ -1 23	1.88 -0.02	0.10	-0.81	1.4y 4.6	<b>1</b> ~	7 -	55.05
Menomazore	nnc	IIIg	Laurers	G G	Π	7.0	ΛĪ	01,1,1	C7.1_	70.02	0.14	C+:1-	0.40	4	_	7.77

37.08 2.05 2.05 2.012 1.75.38 89.15 1.2.29 90.45 90.45 90.45 90.45 90.45 90.45 1.2.29 1.3.07 1.4.04 1.	80.15 41.89 61.72 120.17 66.77 101.91 83.96 41.56 60.00 33.99 1855.80 96.10 104.22 61.59 2.92 89.44 1.75
16 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
2 2 2 3 5 5 5 6 7 5 7 5 7 5 5 7 5 7 5 7 5 7 5 7	2 4 2 2 4 8 8 8 9 9 1 8 9 1 8 4 8 8 8 9 1 1 1 1
2.57 3.76 -2.59 3.42 0.19 0.19 0.16 0.36 0.36 0.36 0.36 0.36 0.36 0.38 0.38 0.38 0.38 0.38 0.38 0.38 0.38	2.11 - 0.32 - 0.33 - 0.12 1.21 1.21 1.37 3.39 - 0.09 6.40 6.40 6.40 6.40 7.50
-0.12 -2.73 -2.73 -2.73 -1.86 -1.86 -1.77 -1.17 -1.17 -1.17 -1.10 -2.10	-3.45 -1.97 -0.61 -2.98 -0.95 -0.95 -2.62 -3.67 0.51 -3.67 -3.67 -3.62 -3.62 -3.62 -3.62 -2.02 -2.03 -2.04 -2.03 -2.04 -2.04 -2.04 -2.05 -2.
2.15 2.52 1.53 0.04 1.38 2.91 1.03 1.03 0.90 0.72 0.43 1.62 2.23 2.12 2.23 2.12 2.78 0.18 0.18	1.19 0.15 0.29 0.29 0.29 1.34 0.73 1.34 0.73 0.79 0.79 1.62 0.07 2.58 2.54 1.07
2.15 4.24 3.27 0.05 1.24 1.24 1.08 3.00 0.36 3.82 3.82 1.17 1.17 4.04 4.04 4.04 4.04 6.21 0.21 0.21 0.21 0.29 0.21 0.20 0.21 0.20 0.20 0.20 0.20 0.20	0.27 0.29 1.47 3.16 -0.31 6.30 6.30 4.88 2.53 4.55 4.85
-1.89 -1.55 -1.89 -1.98 -1.98 -1.98 -2.72 -1.00 -0.44 -0.87 -0.87 -0.87 -0.87 -1.00 -1.10 -1.11 -1.43 -1.45 -1.45 -1.43 -1.43 -1.43 -1.43 -1.43 -1.03	-1.79 -0.53 -0.16 -0.16 -2.37 -2.64 -2.44 -2.98 -3.57 -1.45 0.07
179.26 264.37 1270.30 325.78 457.49 209.25 265.36 382.55 286.35 339.44 337.45 339.44 339.44 339.44 339.44 339.44 339.44 339.54 341.11 162.24 223.33 112.13 472.24 211.18 162.24 223.33 312.46 345.42 258.33 345.43 258.33 345.43 258.33 345.43 258.33 345.43 258.33 345.43 258.33 345.43 258.33 345.43 258.33 345.43 258.33 345.43 345.43 258.33 345.43 3	383.38 329.37 340.43 278.31 368.48 232.24 308.38 167.21 461.56 395.46 395.46 383.41 360.45 259.35 259.35 259.35 259.35 259.35 259.35 259.35 259.35 259.35 259.35 259.35 373.45 259.35 373.45 259.35 373.45 374 374 375 375 375 375 375 375 375 375 375
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0.007 0.008 0.002 0.0002 0.0003 0.003 0.002 0.002 0.003 0.008 0.008 0.008 0.008 0.008 0.008 0.008 0.008 0.008 0.009 0.008	0.03 0.01 0.008 0.02 0.6 0.01 0.01 0.04 0.04
3.4 10.3 50 2.2 0.5 0.5 124 114 1100 34.5 1000 34 1000 34 1000 34 1000 34 1000 0.02 0.02 0.02 0.02 0.03 0.03 0.03 0	5.4 111.4 100 191 1 1 0.008 0.1 9.09 333.33
Oral  Oral  Oral  Injection (ix.)  Oral  O	Oral Oral Oral Injection (i.v.) Oral Oral Oral Oral Oral Oral Oral Oral
Capsules Tablets Solution Syrup Capsules Tablets	Tablets Tablets Tablets Powder Powder Tablets
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250 600 100 100 100 100 100 30 30 30 30 30 30 30 30 30 30 30 30 3	40 400 400 300 8 8 8 60 60 100 100 100 100 100 100 100 100 1
Mexiletine Mianserin Micafungin sodium Midazolam hydrochloride Minocycline hydrochloride Minocycline hydrochloride Minosycline Misoprostol Molindone Misoprostol Molindone Maraelin Nafarelin Nafarelin Nafarelin Nafarelin Naluxone Nadoxone Nadoxone Nadoxone Nadrochioride Naluxone Nicopam Niacin; nicotinamide Niacin; nicotinamide Niacin; nicotinamide Nicardipine Nicardipine Nicardipine Nicotine Norethindrone Norethindrone Norethindrone Northididine Northididine Octreotide acetate Ondansetron Orphenadrine Ostreotide acetate Ondansetron Orphenadrine Ostreotide acetate Ostliptin Omeprazole Ondansetron Orphenadrine Ostreotide acetate Ostpenadrine Ostreotide acetate Ostreotide acetate Ostreotide acetate Ostreotide acetate Ostreotide acetate Ostreotide acetate Ostphenadrine Ostreotide Acetate Ostreotide	Pantoprazole sodium Paroxetine Pedroxacin Pentoxisylline Pentoxisylline Perindopril erbumine Phenobarbital Phenobarbital Phenylbutazone Phenylephrine hydrochloride Praminitide acetate Prazosin Prednisolone Primaquine Prochlorperazine Prochlorperazine Prochlorperazine Prochorperazine

Table I. (Continued)

Generic name	Maximum strength dose value	Maximum strength dose unit	Formulation	Route	Measured solubility (mg/mL)	Dose	% Excreted unchanged in urine	MW drug	Measured LogS molar	Measured Log <i>P</i>	Measured $\mathrm{Log}D_{74}$	minVSLgS 3-7.5	$ ext{CLog} P$	HBA	HBD	PSA
			;													
Propranolol hydrochloride	80	mg	Tablets	Oral	20,	0.006	0.25	259.35	-0.71	3.48	1.20	-1.11	2.75	ω,		46.24
Propylthiouracii	000	mg	Tablets	Oral 0	1.2	0.7	,	1/0.23	-2.15		1.09	-1.83	0.97	٠,	7 ,	46.21
Fromptyline	10	mg	Tablets	oral C	30	0.0008	- ÷	203.39	27.7		1.30	-1.10	\o. 4. \o.	٠, ٠		14.57
ryrazmamue	300	E I	Tablets	E C	5 5	0.1	1.0	20.521	10.91	-0.00	65.0	7.60	90.0	o 4		00.73
Quenapine lumarate	300	E E	Tablets	Oral	4 °C	0.01	0.5	200.002	1.15		1 01	-3.69	64.7	o -		24.70
Cumacinie, inepacinie	300	giii	Tablets	Oral	11 1	0.01	10	324.43	1.13	4	1.91	2.67	77.0	t -		34.79
dihydrate	300	giii	ranicis	Ola	11.1	0.1	10	24.43	-1.03	<del>‡</del>	70.1	70.7	6/:7	+	-	90.04
Oninine highlighte	096	011	Cancillae	Ie-FC	1111	0000	21	324.43	-0.60	244	1 82	28 6-	2 70	_	_	43.08
hentahydrate	202	Sim	Capsures	E I	11111	0,000	77	CF: F-7C	6.6	Ė	7971	69:7			-	90.0
Rahemazole codium	00	m	Selusas	Oral			0	350.45				-3 73	3.08	v	_	70.73
Ramelteon	2 oc	S E	Tablets	Dra O			0 0	250.35				-3.49	2.00	, ,		41.05
Raminril	0 1	8 H	Caneulae	Oral				416.52			1 76	-1.27	. i.	1 V	, ,	10.10
Rampin	2 4	a m	Tablete	Oral	o	0.003	. 01	313.40	-1 50		7:10	11.27	20,5	) <u>-</u>	4 <del>-</del>	41.58
Demifortanii bridanddonida	0 -	mg mg/m1	Solution	Unication (i.r.)	0	0.003	10 10	276.46	-1.39	1 05	30,1	2.11	3.20	t -	- 0	941.30
Kemirentanii nydrochioride	1	mg/mL	Solution	Injection (1.v.)	ō	,	U.I	3/0.40	i i	1.85	57.1	-5.15	1.96	4 0	,	74.45
Keserpine	0.25	mg	Tablets	Oral 0 .	0.01	0.1	- ţ	608.69	-4.78	3.72	4.14	-5.80	3.86	ж I		14.49
Ribavirin	200	mg	Tablets	Oral	142	0.006	17	244.21	-0.24	-1.85	-2.43	-0.90	-2.85		4	46.67
Ridogrel	2	mg	Tablets	Oral	0.02	1.0	,	366.34	-4.26			-3.58	4.54	2		72.68
Riluzole	50	mg	Tablets	Oral			2	234.20				-2.72	3.24	m	_	47.02
Rimantadine hydrochloride	100	mg	Tablets	Oral	20	800.0	20	179.31	-0.55		80.0	1.85	3.96	_	_	27.97
Risperidone	4	mg	Tablets	Oral	0.25	90.0	8	410.50	-3.22	3.04	2.52	-3.49	2.71	4	0	53.60
Rivastigmine	9	mg	Capsules	Oral			0.1	250.34				-1.56	2.10	2	0	29.73
Rizatriptan	10	mg	Tablets	Oral	42	0.0010	14	269.35	-0.81			-1.19	0.99	33	1	39.11
Ropinirole	5	mg	Tablets	Oral	133	0.0002	5	260.38	-0.29	2.70		-0.33	2.80	2		33.72
Ropivacaine	10	mg/mL	Solution	Injection (epidural)	53.8		_	274.41	-0.71	2.90	1.15	-3.25	3.16	2	_	33.72
Rosiglitazone maleate	~	mg	Tablets	Oral	0.04	8.0	0	357.43	-3.95			-3.80	3.02	5	1	71.34
Rotigotine	18	mg	Transdermal	Topical (skin.	9.6	0.01	0	315.48	-1.75	4.03	3.40	-2.44	4.54	2	1	24.05
				membranes)												
Roxatidine acetate HCl	150	mg	Tablets	Oral			2	384.90			-0.55	-2.62	2.80	4	1	70.19
Salicylic acid	300	mg	Tablets	Oral	2.51	0.5	15	138.12	-1.74	2.26	-1.51	0.20	2.19	3	2	63.70
Scopolamine	10	mg	Tablets	Oral	29.999	9000000	9	303.36	0.34	86.0	0.62	-1.72	0.29	4	1	59.59
Secobarbital	100	mg	Tablets	Oral	1.1	0.4		238.29	-2.34	1.97	1.97	-2.94	2.16	3	2	83.96
(quinalbarbitone)																
Selegiline; (-)-deprenil	5	mg	Tablets	Oral			0.1	187.29		2.90	2.67	-2.32	3.02	1	0	1.18
Sertraline hydrochloride	100	mg	Tablets	Oral	3.8	0.1	0.2	306.24	-1.91		2.74	-2.99	5.35	1	1	14.57
Sibutramine	15	mg	Capsules	Oral	2.9	0.02	0	279.86	-1.98	1.49		-2.19	5.59	1	0	1.18
Sildenafil	100	mg	Tablets	Oral	3.5	0.1	7.5	474.59	-2.13			-4.17	1.98	7	1 1	05.18
Solifenacin succinate	10	mg	Tablets	Oral			12.5	362.48				-3.16	4.68	2	0	29.42
Sparfloxacin	200	mg	Tablets	Oral	1.1	0.7	10	392.41	-2.55			-0.67	-0.61	7	3 1	02.79
Sufentanil	0.05	mg/mL	Solution	Injection (i.v.)			9	386.56		3.95	3.24	-3.23	3.59	33	0	29.11
Sumatriptan succinate	100	mg	Tablets	Oral	21.4	0.02	22	295.41	-1.14	0.93	-1.17	-0.96	0.74	3	2	67.24
Sunitinib malate	20	mg	Capsules	Oral	25	800.0	4	398.48	-1.20		5.40	-2.58	3.00	33	3	80.53
Tacrine	40	mg	Capsules	Oral			0.5	198.27		2.71	0.46	-0.12	3.27	2		37.91
Tamoxifen	20	mg	Tablets	Oral	0.5	0.2	0.5	371.53	-2.87		92.9	-4.42	6.82	2	0	10.28
Tamsulosin	9.4	mg	Capsules	Oral			8.7	408.52				-2.96	2.17	9	2 1	07.38
Temazepam	30	mg	Capsules	Oral	0.604	0.2	0.5	300.75	-2.70	2.19	1.79	-3.58	2.34	3	1	51.32
Temocapril	4	mg	Tablets	Oral			1.5	476.62				-1.98	2.10	2	2	01.91
Temsirolimus	10	mg/mL	Solution	Injection (i.v.)	0.01		4.6	1030.31	-5.01			-9.52	0.67	14	4 2	53.80
Tenoxicam	20	mg	Tablets	Oral	0.803	0.10	0.1	337.38	-2.62		-0.32	-0.17	1.61	2	2 1	04.05
Terazosin	10	mg	Tablets	Oral	24.2	0.002	10	387.44	-1.20		-4.64	-3.71	2.18	∞	_	95.48
Theophylline	009	mg	Tablets	Oral	8.3	0.3	18	180.17	-1.34	-0.04	-0.02	-1.87	-0.03	3	_	61.90
Thioguanine	40	mg	Tablets	Oral	0.2	8.0	0.5	167.19	-2.92			-0.79	-1.70	3	3	60.92
Thiopental	1000	mg	Powder	Injection (i.v.)	50	0.08	0.5	242.34	69:0-	2.85	2.84	-3.26	2.98	2	2	65.69

BDDCS Applied to Over 900 Drugs	
1.75 1.18 2.8.24 2.8.24 91.72 2.4.05 10.28 33.28 27.97 27.97 2.92 23.73 117.41 42.21 63.11 114.80 167.36 16	32.84 56.29 152.61 170.88 130.05 22.25 50.83 127.30 56.78 29.96 88.84 79.29
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6.00 4.39 3.76 6.33 6.53 6.53 6.53 6.53 6.53 6.53 6.5	3.27 4.47 5.23 4.04 5.23 9.48 9.48 9.48 1.29 1.29
3.53 3.53 3.53 3.53 3.53 4.73	4.11 6.97 6.97 6.73 6.73 6.71 6.71 4.16 7.231 1.130 4.20 1.30
3.55 3.37 1.91 -0.33 0.69 1.16 2.30 1.63 3.14 0.65 2.02	3.69 2.57 0.08 2.35 -0.10 -0.90
5.90 1.83 -0.35 2.63 2.42 5.03 4.82 1.60 1.60	3.79 3.70 -0.77 0.05
2.5.7 2.5.6 2.0.6 1.0.9 1.1.43 3.03	0.31 -3.05 -1.92 -1.92 -1.92 0.11 0.12 -3.59 -1.03 -1.13 -2.42 -2.42 -3.51
370.58 263.79 273.38 247.27 325.50 405.97 405.97 394.44 434.51 394.44 434.51 394.44 37.22 37.49 369.43 369.43 37.49 37.40 37.40 37.40 37.40 37.40 37.40 37.40 37.40 37.40 37.40 37.4	277.41 454.61 811.00 824.98 778.95 169.18 384.65 324.78 267.25 267.25 267.25 267.25 307.40
0.5 0.1 115 12.5 22.5 1 1 0.1 0.1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4.6 4.6 11.5 11.1 11.1 8 8 8 2.2 8 8 0.5 4.5
0.8 0.03 0.1 0.0007 0.6 0.2 0.02 0.004 0.002 0.002 0.002 0.002 0.002 0.002 0.002 0.003	0.001 0.64 0.0005 0.06 0.00 0.002 0.5 0.3
2.74 20 20 12 0.38 48 0.08 0.114 0.045 50 50 10 11 11 12 17 70 1.3	572 0.75 10 10 1000 222 0.1 25 20 23 0.8 0.8
Oral Oral Oral Oral Oral Oral Oral Oral	Oral Oral Injection (i.v.) Injection (i.v.) Oral Oral Oral Oral Oral Oral Oral
Tablets	per mL) Tablets Tablets Solution Solution Solution Capsules Tablets Capsules Tablets Capsules Tablets
	mg mg/mL mg/mL mg/mL mg/mL mg
200 250 50 50 50 60 60 60 60 60 60 50 10 10 50 50 10 60 50 50 50 50 50 50 50 50 50 50 50 50 50	150 150 120 11 10 25 2.5 300 5 10 10 10 7.5
Thioridazine Ticlopidine Ticlopidine Tilidine; tilidate Timiolol Tinidazole Tolterodine Toremifene Tramadol Tramadol Tramacinolome sulfate Triamcinolome acetonide Triamcinolome acetonide Triamcinolome Triamcinolo	Vanopuesana Venlafaxine hydrochloride Verapamil hydrochloride Vinoblastine Vinoristine Vinorelsine tartrate Vitamin B6 (pyrdoxine) Vitamin D3 (cholecalciferol) Vorozole Zidovudine Zolmitriptan Zolmitriptan Zolpidem tartrate Zonisamide Zopiclone

Table II. Measured and In Silico Data for 265 BDDCS Class 2 Drugs

	Maximum				Measured		% Excreted									
Generic name	strength dose value	Maximum strength dose unit	Formulation	Route	solubility (mg/mL)	Dose	unchanged in urine	MW drug	Measured LogS molar	Measured LogP	Measured LogD74	minVSLgS 3-7.5	CLogP	HBA	HBD	PSA
10-Hydroxy-carbamazepine 6-Methoxy-2-naphthyl-acetic		Active metabolite Active metabolite			0.045		27	254.29 216.24	-3.75		1.26	-3.15 -2.29	1.21	3.2	2 1	32.78 49.94
Acitretin Adapalene	25 6	mg mg	Capsules Cream, gel, solution	Oral Topical (skin. membranes)			0	326.44 412.53		6.40		-5.07 -5.78	6.07	сυ	п п	49.94 49.94
Albendazole Albendazole sulfoxide	200	mg Active metabolite	Tablets	Oral			0 1	265.34			2.85	-3.54 -3.28	3.46	mm	2 2	65.55
Allopurinol	300	mg	Tablets	Oral	0.569	2.1	12	136.11	-2.38	-0.55	-0.55	-1.18	0.63	8	2 1	70.47
Altretamine	50	mg	Capsules	Oral			0.5	210.28		2.73	-	-3.02	1.67	9 (	0 (	33.35
Aminoglutethimide Amindarone hydrochloride	250 400	mg me	Tablets	Oral Oral	2.0	,,	0	232.28	90 C-	7 80	1.41	-2.35 -5.40	8.95	n u	7 0	37.07
Amphotericin B	2 400	mg/mL	Solution	Injection (i.v.)	0.7	C:-7	3.5	924.10	-3.97	00.7	t.:2	-5.40	-3.65	17	12	347.83
Amprenavir	50	mg	Capsules	Oral	0.04	5.0	1	505.64	-4.10			-5.03	3.29	9	ю	139.36
Anidulafungin	3.33	mg/mL	Solution	Injection (i.v.)	0.05		0.5	1140.27	-4.36			-10.68	2.20	17		415.56
Aprepitant	125	mg ma/mI	Capsules	Oral Injection (i.v.)			0 4	534.44				-5.28	0 5.0	no	7 4	78.IZ
Arininrazole	, Ç	mg/mr.	Solution	Injection (i.v.)	0 0001	1200	10	308.04 448.40	999		3.20	-4.64	5.31	٧ 4	o -	43.70
Armodafinil	250	mg mg	Tablets	Oral	0,0001	1700	3 ∞	273.36	3		0.50	-2.82	0.94	+ 7		64.62
Artemether	50	S III	Tablets	Oral				298.38				-3.35	3.05	ıν	0	49.50
Astemizole	10	mg	Tablets	Oral			0.5	458.58		5.70	3.88	-5.40	60.9	4	1	35.37
Atazanavir sulfate	300	mg	Capsules	Oral			7	704.87	:			-7.38	5.92	7	S.	186.22
Atorvastatin calcium	80	mg	Tablets	Oral	0.0000204	15686		558.66	-7.44		ò	-6.47	4.46	s c	4 (	119.06
Azelastine hydrochloride	700	µg/mL	Solution	Ophthalmic	0.1843	7	7 0	381.91	7,00	900	96.T	-2.3/ -3.15	4.01	n v	) c	33.17
Bexarotene	75	mg mø	Cansules	Oral	0.104	ţ	0.01	348.49	14:0	00.0	2.00	55 4.74	8.19	2 2	<sub>1</sub> –	40.83
Bezafibrate	200	e ii	Capsules	Oral			40	361.83			-0.17	-3.79	3.70	1 4	2	82.78
Bicalutamide	50	mg	Tablets	Oral	0.005	40		430.38	-4.93			-4.32	2.71	5	2	110.56
Bosentan	125	mg	Tablets	Oral	0.001	200	2	551.63	-5.74			-5.38	4.17	6	2	142.96
Buspirone	10	mg	Tablets	Oral	0.0214	1.9	0.1	385.51	-4.26	2.63	3.39	-3.50	2.19	9	0	60.25
Cabergoline	0.5	mg	Tablets	Oral			т Г	451.62				-4.28	4.77	4	7	18.24
Calcipotriene; calcipotriol	0.05	μg/mL	Solution	Topical (skin,			0.5	412.62				-5.58	5.27	m	m	89'.29
Calcitriol	0.5	П	Capsules	memoranes) Oral			∞	416.65				-6.35	6.04	т	m	67.68
Capsaicin	179	mg	Cream	Topical	90.0	12	0	305.42	-3.71			-4.49	4.00	т	7	64.82
Carbamazepine	300	mg	Tablets	Oral	0.256	4.7	0.5	236.28	-2.97	2.45	2.45	-3.32	2.38	1	1	46.81
Carbamazepine		Active metabolite			0.1		0.5	252.28	-3.40	69'0	69:0	-3.00	0.24	1	1	55.61
IU,II-epoxide	30		Toblots	-	100	0		406 40	13 6	7 10		4.30	5	v	,	5
Cefditoren pivoxil	200	in in	Tablets	Oral	0.08	10 12		620.73	-3.89	4.17		-6.88	2.71	. 6	. 4	176.19
Cefpodoxime proxetil	200	mg	Tablets	Oral	0.3	2.7	0	557.61	-3.27			-4.79	0.80	10	2	183.53
Celecoxib	200	mg	Capsules	Oral	0.005	160	2	381.38	-4.88			-4.47	4.37	ю	1	78.91
Chlorzoxazone	500	mg	Tablets	Oral	0.25	8.0	0.5	169.57	-2.83			-1.77	2.51	2	1	42.53
Ciclesonide	0.16	mg/inhalation	Solution	Topical (nasal)	0.0002	3.2	0	540.70	-6.43			-6.25	5.25	9	_	103.75
Cilostazol	100	mg	Tablets	Oral	0.003	133	,	369.47	-5.09			-4.87	3.53	v -		81.66
Cinacalcet	9 6	mg	Tablets	Oral Oral	0.1	3.6	0.1	357.42	5.5- 5.5-		2 30	-3.12 -4 \$7	6.35	1 4	٦,	14.57
Citalopram	07 40	mg mø	Tablets	Oral	0.031	5.2	12	324.40	4.02 4.02	3.41	0.74	-2.83	3.13	o m	4 C	28.67
Cladribine	. 1	mg/mL	Solution	Injection (i.v.)			18	285.69		0.02	0.24	-2.15	-0.91	_	m	112.88
Clofazimine	50	mg	Capsules	Oral	0.001	200	0.2	473.41	-5.68	7.48		-5.84	7.70	4	1	34.09
Clofibrate	200	mg	Capsules	Oral		1	11	242.70		3.60	3.60	-1.63	3.02	ю.		36.17
Clopidogrel bisulfate	75	mg	Tablets Tablets	Oral O=21	0.05078	5.9	ų	321.83	-3.80	00 1		-3.83	4.21	7 -	0 0	28.24
Cloranine	10 100 100	mg me	Tablets	Oral	0.003	C1 25	0 0	376.83	13.06	4.8U	2 00	-5.07	2.22		o -	10.01
and and a	>	S.III					;		:		ì	)	1	-		3

Conivantan hydrochloride	٧.	lm/sml	Solution	Injection (i.v.)	0.15		-	498 59	-3 55			-673	200	"	75	9
Cyclosporine	100	mg	Capsules	Oral	0.008	50	0.1	1202.64	-5.18	2.95	2.92	-10.73	14.36	12	5 290.	- 1
Cyproterone acetate	50	mg	Tablets	Oral	0.0021	95	1	416.95	-5.30			-4.83	3.96	33	0 63.	15
Danazol	200	mg	Capsules	Oral	0.0009	688		337.47	-5.57			-4.54	3.93	2	1 45.	2
Dapsone	100	mg	Tablets	Oral	0.2	2.0	15	248.31	-3.09	0.97	0.97	-2.71	0.89	4	2 92.	<b>ر۔۔</b> 2
Darunavir	009	mg	Capsules	Oral	0.15	16	1.2	547.68	-3.56			-5.44	2.89	۲ .	3 148.15	v i
Damograpicin	<b>?</b> ∨	mg ma/mI	Lablets	Oral Injection (i.v.)	0.0302		0.1	488.02	13	1 83	1 83	-4.70	2.88	× =	5 10L	3 2
Delevirgine	000	mg/mr	Caplete	Oral	0.00081	880	5.5	756 57	CI.+	60.1	60.1	3.89 -4.80	2.04	1 4	3 200.	t 5
Desloratadine	202 50	m g	Tablets	Oral	0.000077	260	. v	310.83	6.61			-2.42	3.83	2 0	1 24.	2 2
Diazoxide	100	mg	Capsules	Oral	0.15	2.7	35	230.67	-3.19	1.81	1.08	-2.00	1.42	ı m	1 61.	=
Dicoumarol	100	mg	Tablets	Oral	0.128	3.1	0.5	336.30	-3.42	2.07	1.86	-3.06	3.66	4	2 101.	7
Diffunisal	500	mg	Tablets	Oral			9	250.20		4.4	0.76	-2.17	4.40	ж	2 63.	ر 9
Diloxanide furoate	500	mg	Tablets	Oral			1	328.15		1.96		-4.03	3.09	2	0 55.	4
Dipyridamole	75	mg	Tablets	Oral	0.007	43	0.1	504.64	-4.86		3.71	-4.21	1.49	12	4 134.	,
Disulfiram	250	mg	Tablets	Oral	0.2	5.0	0	296.54	-3.17	3.88	3.88	-4.19	3.88	0	0 2.	52
Docetaxel	40	mg/mL	Solution	Injection (i.v.)	0.0065		2	807.90	-5.09			-7.05	4.08	10	5 240.	m D
Domperidone	20	mg	Tablets	Oral	0.006	13	0	425.92	4.85	3.90	3.33	-4.31	4.27	ω <i>-</i>	2 66.	
Donepezu	10	mg	Tablets	Oral	0.0029	+	10.6	319.30	-3.12	5	9	-4.10 5.03	00.4	4 (	37.	2 9
Dionacinoi, tetrahydrocannahinol	10	giii	Capsures	G B			C:0	314.47		0.97	9.70	19:51	+7:/	7	.10	0
Dronedarone	400	mg	Tablets	Oral	0.5	3.2	0	556.77	-3.05			-4.24	8.57	5	1 89.	77
Drospirenone	3	, m	Tablets	Oral			0.1	366.50				-4.11	2.84	2	0 45.	*
Dutasteride	0.5	m gm	Capsules	Oral			0.5	528.54				-6.05	4. 9.	2	2 65.	6
Ebastine	10	mg	Tablets	Oral			2	469.67			2.78	-5.87	6.94	8	0 28.	42
Efavirenz	009	mg	Capsules	Oral	0.005	480	0.5	315.68	-4.80			-3.99	4.67	2	1 41.	24
Entacapone	200	mg	Tablets	Oral	0.0166	48	0.2	305.29	-4.26			-2.73	1.76	9	2 128.	4
Eplerenone	50	mg	Tablets	Oral			3	414.50			0.85	-4.02	0.29	4	0 81.	6
Erlotinib hydrochloride	163.9	mg	Tablets	Oral	0.4	1.6	0.3	393.45	-2.99			-5.20	4.34	7	1 70.	55
Estazolam	2	mg	Tablets	Oral	0.0015	5.3	4	294.75	-5.29			-3.73	2.29	33	0 33.	72
Ethchlorvynol	750	mg	Capsules	Oral			0.05	144.60			2.06	-2.16	1.57	1	1 22.	92
Etizolam	1	mg	Tablets	Oral			0.3	342.85				-3.82	2.87	3	0 33.	72
Etodolac	009	mg	Tablets	Oral	0.01	240	1	287.36	-4.46	3.81	1.14	-2.81	3.43	8	2 63.	66
Etomidate	2	mg/mL	Solution	Injection (i.v.)	0.045		2	244.30	-3.73	3.05	3.05	-3.49	2.67	2 .	0 37.	<b>∞</b> :
Etoricoxib; arcoxia	120	mg	Tablets	Oral	0.14	3.4	0.5	358.85	-3.41			-4.52	2.35	4 /	0 57.	o :
Etravirine	100	mg	Tablets Tablets	Oral			0 -	435.29				-6./6	27.5	ہ د	26.	4 2
Exemestane	57	giii ii	Tablets	Oral			٦ ,	400 44				5.55	3.20	1 r	2 20.	ŧ [
Ezeumoe Februxostat	01 08	m a	Tablets	Oral	0.013	35	1 r	316 38	-4 30			-3.59	4.40	o v	78.	- %
Felodipine	10	em.	Tablets	Oral	0.001	9 9	0.25	384.26	-5.58	3.86		-4.73	5.30	n m	1 68.	2 2
Fenofibrate	145	mg	Capsules	Oral	0.0008	725	0.1	360.84	-5.65		4.80	-5.47	5.23	3	0 54.	4
Flufenamic acid	100	mg	Tablets	Oral	0.0265	15	7	281.24	-4.03	5.25	2.06	-3.41	5.53	3	2 54.	œ
Flunarizine	10	mg	Tablets	Oral	0.0165	2.4	0.2	404.51	-4.39	5.78	4.90	-5.69	6.34	7	0 2.	55
Fluphenazine hydrochloride	10	mg	Tablets	Oral	0.031	1.3	0.1	437.53	-4.22	717	3.48	-4.11	4.12	4 (	1 25.	∞ <u>:</u>
Flurolproten	125	am a	Capsules	Oral	50000	23	2.2	776.27	446	3.35	10.91	-3.17	2.73	7 (*	1 40.	2 9
Fluticasone propionate	50	ıng ıı ø/inhalation	Suspension	Tonical (nasal)	0.00051	3.0		500.58	-5 99	CC:C	00:+	-4.82	t &	. 4	7 %	2 1
Folic acid	2	mg	Tablets	Oral	0.0016	13		441.41	-5.44	-0.52		-2.59	-2.31	12	6 219.	: 2
Fosamprenavir calcium	700	mg	Capsules	Oral	0.31	0.6	0	585.62	-3.28			-0.53	3.04	∞	4 189.	98
Fosinopril	40	mg	Tablets	Oral	0.022	7.3	0	563.68	-4.41		2.32	-5.95	7.45	5	1 115.	0
Fulvestrant	50	mg/mL	Solution	Injection (i.m.)	0.001	200	0.1	60.909	-5.78			-8.28	7.35	3	2 63.	<del></del>
Gefitinib	250	mg	Tablets	Oral	0.0017	588	2	446.91	-5.42	4.85	;	-4.77	5.60	7	1 62.	ري د
Gemfibrozil	009	mg	Tablets	Oral	0.019	126	0.5	250.34	-4.12	,	1.33	-3.15	3.94	m ·	1 49.	<b>4</b>
Gliclazide	08	mg	Tablets	Oral	0.0039	85	0.5	323.42	-4.92	1.36	-0.07	-2.98	1.09	4 ı	2 89.	æ :
Glimepiride	4 -	mg	Tablets	Oral	0.0012	13	0 4	490.63	-5.61	5	ć.	-5.70	3.96	ο ,	3 137.	4 9
Glipizide Glipanida: glibanalamida	01	mg	Tablets	Oral	500	0 9	v	445.54	90	1.91	0.40	64.49	/5.7	o v	3 138.	x c
Griseofulvin	200	mo mo	Tablets	Oral	100.00	0.0	0 0	352 77	5.03	2 18	2.18	-3.19	1 01	. 4	72.	2 15
Haloperidol	20	m g	Tablets	Oral	0.037	2.2	1	375.87	-4.01	4.30	3.16	-3.68	3.85	· "	1 42.	. =
Ibuprofen	800	mg	Capsules	Oral	0.038	84	0.5	206.29	-3.73	3.97	0.81	-2.31	3.68	2	1 40.83	83
Idebenone	180	mg	Capsules	Oral			0.5	338.45				-4.81	3.42	5	1 76.	99

Table II. (Continued)

Generic name	Maximum strength dose value	Maximum strength dose unit	Formulation	Route	Measured solubility (mg/mL)	Dose	% Excreted unchanged in urine	MW drug	Measured LogS molar	Measured LogP	Measured LogD74	minVSLgS 3-7.5 CLogP HBA HBD	CLogP	HBA		PSA
Hoperidone	12	mg	Tablets	Oral	0.03	1.6	0.5	426.49	-4.15			-3.87	4.27	5	0	51.00
Imatinib mesylate	400	g m	Capsules	Oral	1	1.6	\$	493.62	-2.69			-5.77	4.53	7		79.59
Indinavir sulfate	400	mg	Capsules	Oral	0.015	107		613.81	-4.61	2.92		-6.21	3.68	7	_	23.40
Indobufen	200	mg	Tablets	Oral			13	295.34			-0.70	-3.20	3.27	ю		86.69
Indomethacin	50	mg	Tablets	Oral	0.0025	80	15	357.80	-5.16	4.27	0.77	-3.93	4.18	4 (		68.78
Indoramin	25	mg	Tablets	Oral	0	ţ	v o	347.46	7	3.23	2.29	-3.86	2.84	7 .	7 -	66.74
Irbesartan Isotratinoin	300	mg	Tablets	Oral	0.08	S	2.5	300 44	-3./3	08.9	1.00	-2.82 -4.80	6.04	n (		82.47
13-cis-retinoic acid	2	SIII	Capsucs	Ola B			2.0	300:4		06.0	£.2.7	4.00	+	1	-	6.0
Isradipine	5	mg	Capsules	Oral	0.008	2.5	0	371.40	-4.67	4.28	3.67	-4.14	3.92	S	1	96:501
Itraconazole	100	ğ	Capsules	Oral	0.000001	400000	0.03	705.65	-8.85	5.66	3.27	-8.44	5.99	6	0	84.66
Ixabepilone	1.915	mg/mL	Solution	Injection (i.v.)			5.6	506.71				-5.51	3.08	9	3 1.	115.27
Ketanserin	40	mg	Tablets	Oral	0.05	3.2	0.5	395.44	-3.90	3.29	2.18	-5.10	3.00	4		70.53
Ketoconazole	200	mg	Tablets	Oral	0.0069	116	ъ	531.44	-4.89	4.35	4.05	-5.99	3.64	9	0	57.83
Ketoprofen	75	mg	Capsules	Oral	0.18	1.7	0.5	254.29	-3.15	3.12	-0.01	-2.82	2.76	33		59.10
Lamotrigine	200	mg	Tablets	Oral	0.17	4.7	10	256.10	-3.18		-0.19	-2.75	2.53	2	2	88.97
Lansoprazole	30	mg	Capsules	Oral	0.00097	124	0	369.37	-5.58		2.36	-3.74	2.60	4 1	,	61.94
Lapatinib ditosylate	250	mg	Tablets	Oral	0.001	1000		581.07	-5.76			-7.19	5.97	r -	2 10	104.31
Latanoprost I Amenida	0.5	mg/mL	Solution	Opntnaimic	0.03	Ĺ	-	10.7070	-5.94			-6.14	3.00	4 c		55.00
Letiniolinae	200	mg m	Tablets	Oral	0.023	1		418.07	0.4		22.9	66.7	7 20	7 (		00.00
Loninavir	200	mg mo	Cansules (with	Oral			2.2	628.82			(2)	-7.32	6.10	s vo		131.37
		٥	50 mg ritonavir)				ı i							,		
Loratadine	10	mg	Tablets	Oral	0.005	8.0	S	382.89	-4.88	5.20	5.20	-5.32	5.05	2	0	38.48
Losartan potassium	100	mg	Tablets	Oral	0.048	8.3	12	422.92	-3.98			-2.04	4.10	5	2	86.79
Lovastatin	40	mg	Tablets	Oral	0.0004	400	10	404.55	-6.00	4.26	4.26	-4.95	4.08	3	_	69.92
Mebendazole	100	mg	Tablets	Oral				295.30		2.83	2.42	-4.00	3.08	4		83.82
Mefenamic acid	250	mg	Tablets	Oral	80.0	13	1	241.29	-3.48	5.12		-3.36	5.29	3		54.80
Mefloquine	250	mg	Tablets	Oral			6	378.32			0.72	-3.12	3.67	3		47.38
Meloxicam	15	mg	Tablets	Oral	0.012	5.0	0.2	351.41	-4.47	3.02	0.10	-2.15	2.29	S	2 10	104.05
Mercaptopurine;	50	mg	Tablets	Oral			22	152.18		0.01	0.39	1.74	0.82	n	2	44.70
6-mercaptopurine	1300		11.11			9	t	150 14	ç		ć	7	70	-	,	5
Metavalone; mesalazine	800	mg me	Tablets	Oral	1 03	6. E	- c	221.26	-2.19 -2.87	cV c	-3.20	1.9/	2.15	4 C	o -	50.77
Methadialone	200	me mo	Tablets	Oral	0.3	7.7	2 0	250.30	.0.2 00 C-	25.2	2.50	-3 83	3.65	1 (		87.80
Miconazole	1200	m g m o	Cream suppository	Tonical (skin.	0.89	. v	7:0	416.14	25.2	5.34	6.34	-5.83	28.5	1 6		19.61
		٥	Crossed days (see a	membranes)										1		
Mizolastine	10	mg	Tablets	Oral	0.013	3.1	S	432.50	-4.52			-5.28	2.84	5	1	55.05
Modafinil	200	mg	Tablets	Oral			8	273.36				-2.92	0.94	2	-	64.62
Mometasone furoate	200	μg/activation	Powder	Topical (aerosol)			0.5	521.44				-5.87	4.12	4	-	89.90
Montelukast sodium	10	mg	Tablets	Oral			0.2	586.20			0	-7.75	8.47	4 ı	7 0	73.63
Mycophenolate	G G	Active metabolite			0.00	į	0.5	320.35	9		0.20	-3.44	67.7	ο ,	7 -	18.6
Mycophenolate moretii	200	mg	Tablets Tablets	Oral	0.043	4 6	0 0	15.554	1.00	90	75.7	-4.0/	2.98	, ه	- 0	96.07
Nalidixic acid	1000	mg mo	Tablets	Oral	0.054	202	Þ	232.24	-3.63	1.59	0.59	-1.88	1.02	1 v	-	69.92
Naproxen	500	ğ	Tablets	Oral	0.115	17	0.5	230.27	-3.30	3.18	1.70	-2.50	2.82	ю		49.94
Nateglinide	120	m g	Tablets	Oral	0.322	1.5	13	317.43	-2.99			-3.53	4.30	3	2	73.68
Nefazodone	100	mg	Tablets	Oral			0.1	470.02		5.00		-5.94	5.73	5	0	43.72
Nelarabine	5	mg/mL	Solution	Injection (i.v.)	1		9.9	297.27	-2.47			-1.56	-0.46	6	4	12.88
Nelfinavir	625	mg	Tablets	Oral		Ġ		567.80	9	č		-6.89	5.84	ς,	4	12.29
Nevirapine	700	mg	Iablets	Oral	0.1	×.0	Ö	266.31	-3.43	1.81	6	-3.15	2.65	4 ı	· · ·	03.60
Nifedipine	200	mg me	Capsules Tablets	Oral	0.000	51	0.01	346.34	-4.70	7.70	7.80	-3.66 -2.02	3.13	n 9		104 30
Michigan	007	a ma	Iduicio	Çıa			-	201.07				40:4	70:0	>	; >	j.

Nilotinib Nilvadipine Nimesulide Nimodipine	200 2 100	E E E	Capsules Tablets Tablets Cansules	Oral Oral Oral Oral	0.0013 0.014 0.0025	6.2 29 48	4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	529.53 385.38 308.31 418.45	-5.47 -4.34 -5.22	1.79	-1.10	-7.56 -4.10 -3.01	5.84 3.04 3.21 4.00	0040	87.75 131.55 105.36	5 5 5 4 5 5 5 4
Nitrazepam	9 10	gii mg	Capsules Capsules	Oral	0.0254	1.6	0.5		4.04	3.03 2.25	2.16	-4.68 -3.51	2.32	041	86.30	t 2: 1
Nitrendipine Norelgestromin	07 9	m B B B	Capsules Tablets	Oral Oral	0.0022	30			-5.21	2.70		-4.20 -4.56	3.73 4.10	v &	57.9	8 4 BB
Norethindrone acetate	5	mg	Tablets	Oral	0.005	4.0			4.83			-4.89	3.93	2	45.	¥ 8
Olanzapine Oxanrozin	040	mg me	Tablets Tablets	Oral Oral	0.01	16 1.4	0.5		-4.49 -2.24	3.00 4.19	1.03	-3.58	3.01 2.95	4 w	2.09	ప చె
Oxatomide	30	g Bu	Tablets	Oral	0.043	2.8			-4.00	5.42	3.39	-5.49	5.62	3 6	35.	9
Oxazepam	30	mg	Tablets	Oral	0.045	2.7	0.5		-3.80	2.24	2.24	-3.55	2.31	ю (	. 64.	E 9
Oxcarbazepine Paclitaxel	009	mg mo/mL	Tablets Solution	Oral Injection (i v.)	0.085	28	٧.	252.28	-3.47		1.25	-3.18 -7.35	1.21	10 2	65.0	z 4
Paricalcitol	. 4	gn	Capsules	Oral			0	416.65				-629	5.69	6	9.79	
Pentazocine	50	mg	Tablets	Oral	0.0449	4.5	15	285.43	-3.80	3.31	0.83	-2.06	4.67	2 .	24.0	50
Pergolide Perhexiline	100	mg mo	Tablets	Oral Oral	900000	2999			29.9		3.97	-3.98 -1.41	7.15		15.14	4 5
Phenacetin	200	gii.	Tablets		0.73	2.7			-2.39	1.58		-2.16	1.77	2	41.6	
Phenytoin sodium	300	mg	Tablets		0.02	09	7 0	252.28	-4.14	2.47	2.47	-3.25	2.09	2 5	65.69	69
Pimecrolimus	10	mg/g	Cream	Iopical (skin, membranes)				810.47				-8.00	5.30	01	Ib3	4
Pioglitazone	45	mg	Tablets	Oral			0.5	356.45				-1.08	3.53	4	10.4	9
Piroxicam	70	mg	Capsules	Oral	0.0073	11		331.35	-4.66	3.06	0.20	-0.23	1.89	ν.	2 104.05	55
Pitavastatin December 1	4 6	mg 	Tablets	Oral O==0	30000			421.47	41.		1.50	1.51	5.59	00	5 8	5 5
Fosaconazole Pragnaral	04 01	mg/mL mg	Suspension Tablets	Oral	0.00003			773.45	CI./-			=7.92 =4.26	3.43	٠ «	70.6	2 C
Prazepam	30	S III	Tablets	Oral	0.004	30			-4.91	3.73	3.73	-4.53	3.93	7 7	28.7	i 75
Praziquantel	009	g m	Tablets	Oral	0.4	0.9			-2.89		2.44	-3.89	3.36	2 (	38.8	· &
Prednisone	50	gm	Tablets	Oral	0.133	1.5	3		-3.43	1.46	1.46	-3.57	1.66	5	99.6	33
Primidone	250	mg	Tablets	Oral	9.0	1.7			-2.56	0.91	-0.84	-2.59	0.88	2	65.0	6
Probenecid	200	mg	Tablets	Oral				285.36		3.21	-0.26 10.40	-2.36	3.37	4 (	79.5	12 z
Prodesterone	200	mg m	Tablets	Oral	2000	114		310.80	-4.65	3.87	10.40	-8.32 -4.25	3.78	7 0	. 45.	<b>4 '4</b>
Propafenone hydrochloride	300	s m	Tablets	Oral	0.093	13	0.5	341.45	-3.56			-2.21	3.64	1 4	4.49	5.5
Propofol	10	mg/mL	Emulsion	Injection (i.v.)	0.164			178.28	-3.04	3.79	4.16	-3.29	3.93	1	22.8	22
Propoxyphene napsylate	500	mg	Tablets	Oral	0.0196	102		367.54	-4.27	ç	ć.	-0.95	5.32	2 1	41.64	¥ :
Proscillaridin Dyrantel namoate	0.5 081	mg mo	Capsules Canlet	Oral	\$ 0	1.4	1	530.66	-2 63	2.48	2.48	-5.09	3.66	- c	135.7	10 02
r yranter pannoate Ouazepam	150	mg m	Caplet Tablets	Oral	C:O	t.	_	386.80	77.07	4.03	3.87	1.01	3.20	1 1	10.7	. ∞
Quinapril	40	mg	Tablets	Oral	0.001	160			-5.64		2.26	-1.82	1.74	5	2 101.5	Ξ
Raloxifene; keoxifene	09	mg	Tablets	Oral	0.013	18			-4.56			-5.56	98.9	5	74.	67
Raltegravir potassium	400	mg	Tablets Tablets	Oral Oral				444.43			0.45	-3.79	1.16	L 4	3 150.4	5 3
Kanolazne Repaglinide	1000	mg mo	Tablets	Oral			1.5	452.60				-4.38 -2.42	5.30	o v	83.0	2. 50
Rifabutin	150	mg	Capsules	Oral	0.19	3.2		847.03	-3.65	3.20		-5.36	4.73	13 5	5 216.	6
Rifampin	300	mg	Capsules	Oral				822.96			1.32	-4.36	3.71	14 (	5 233.5	7
Ritonavir	100	mg	Capsules	Oral 6 .	•		3.5	720.96	(			-8.08	4. 2. 8	9 0	151.5	55 5
Rotecoxib	20	mg	Tablets	Oral	0.1	7.0		314.36	-3.50			-2.83	1.80	5 1	65.2	2 2
Komidepsin Rufinamide	400	mg/mL mo	Solution	Injection (i.v.) Oral	0.059	27	_	238.20	-3.61			-4.10 -2.26	0.51	o κ	73.	<del>1</del> =
Salmeterol xinafoate	0.05	me me	Powder	Topical (aerosol)		i	2.5	415.58				-3.01	3.06	. v	1 91.	22
Saquinavir	500	mg	Capsules	Oral	0.08	25	2	98.029	-3.98	4.70		-6.91	4.73	7	5 178.7	.5
methanesulfonate			:		4	;		0				,	9	,	ì	5
Simvastatin	08 6	mg	Tablets	Oral	0.03	Ξ	10	418.58	-4.14	89.4	4.68	-5.15	84.48	ε <u>(</u>	76.0	S 1
SN-38; 7-ethyl-10-	7	mg Active metabolite	Tablets	Oral			0.5	914.20 392.42				-9.3 <i>z</i> -4.37	1.97	5 2	204.17	- 00
hydroxycamptothecin	9		E	-				17.4 00				202	2 4 6			٤
Soratenib tosylate Spironolactone	700	mg mo	Tablets	Orai	<i>60</i> 00	31			8C V	200	2.26	C6.C-	5.40 5.65	n 4		<b>7</b> 5
Sulfamethoxazole	800	8 E	Tablets	Oral	0.392 0.392	8.2	0.3 14	253.28	-4.26 -2.81	0.89	7.70	-4.36 -2.12	0.56		2 102.81	·
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Table II. (Continued)

	Maximum				Measured	5	% Excreted									1
Generic name	strength dose value	Maximum strength dose unit	Formulation	Route	solubility (mg/mL)	Dose u number ii	unchanged in urine	MW drug	Measured LogS molar	Measured LogP	Measured LogD74	minVSLgS 3-7.5	CLogP HBA		HBD	PSA
														l		I
Sulfasalazine	500	mg	Tablets	Oral	0.0024	833	1.5	398.40	-5.22		-0.78	-3.46	3.88	∞	3	148.16
Sulfinpyrazone	200	mg	Capsules	Oral	0.031	56	39	404.49	-4.12	2.30	-0.08	-3.61	1.66	co	0	59.94
Sulindac	200	mg	Tablets	Oral	0.0028	286	1	356.42	-5.10	3.42	99.0-	-4.16	3.16	co	_	59.21
Sulindac sulfide		Active metabolite			0.0028		0.5	340.42	-5.08			-4.38	3.16	co	_	40.83
Tacrolimus	5	mg	Capsules	Oral	800.0	2.5	0.5	804.04	-5.00		3.96	-7.74	5.78	Ξ	3	185.90
Tadalafil	20	mg	Tablets	Oral				389.41				-4.46	2.58	4	1	71.07
Tegaserod maleate	9	mg	Tablets	Oral			0.5	301.39				-3.06	2.81	5	4	88.12
Telithromycin	400	mg	Tablets	Oral	8.0	2.0	13	812.03	-3.01			-3.70	3.75	11	1	163.02
Telmisartan	80	mg	Tablets	Oral			0.5	514.63				-4.72	7.54	4	1	62.46
Temozolomide	250	mg	Capsules	Oral			5.6	194.15				-1.48	-0.81	5	1	101.89
Teniposide	10	mg/mL	Solution	Injection (i.v.)	0.025		6	656.67	-4.42	1.24	3.09	-5.24	0.72	12	3	166.64
Terbinafine	250	mg	Tablets	Oral				291.44		00.9		-4.71	5.96	1	0	1.18
Terfenadine	09	mg	Tablets	Oral	900.0	40	0	471.69	-4.90	5.69	4.77	-5.48	6.07	ж	2	46.29
Testolactone	50	mg	Tablets	Oral	0.027	7.4		300.40	-4.05			-3.86	2.63	2	0	45.34
Testosterone	40	mg	Capsules	Oral	0.0234	8.9		288.43	-4.09	3.32		-3.92	3.22	2	1	40.83
Tetrabenazine	25	mg	Tablets	Oral			0	317.43				-2.41	3.81	4	0	37.66
Thalidomide	200	mg	Capsules	Oral	0.0525	15	0.5	258.24	-3.69	0.33		-2.54	0.53	4	1	88.83
Thiabendazole	200	mg	Tablets	Oral	0.05	40	0.1	201.25	-3.60	2.47		-3.01	2.36	2	_	34.46
Thyroxine; levothyroxine	0.3	mg	Tablets	Oral	0.000585	2.1	0	776.88	-6.12		0.65	-3.17	3.51	4	3	01.09
Tiagabine hydrochloride	16	mg	Tablets	Oral	0.03	2.1	2	375.56	-4.10			-1.87	2.78	ж	1	42.01
Tiaprofenic acid	300	mg	Tablets	Oral			2.5	260.31		2.51	98.0	-2.42	2.54	33	1	59.10
Tibolone	2.5	mg	Tablets	Oral			0	312.46				-4.68	3.15	2	1	40.83
Tipranavir	200	mg	Tablets	Oral			0.1	602.68				-6.52	7.76	5	2	11.66
Tizanidine	9	mg	Capsules	Oral				253.71				-2.40	5.09	2	2	58.53
Tolazamide	500	mg	Tablets	Oral	0.278	7.2		311.41	-3.05	2.69	0.09	-3.03	1.34	4	2	89.39
Tolbutamide	200	mg	Tablets	Oral	0.109	7.3	0	270.35	-3.39	2.34	2.52	-2.86	2.50	co :	2	84.94 24.94
Tolcapone	200	mg	Tablets	Oral			0.5	273.25				-3.11	3.25	2	2	08.16
Tolfenamic acid	200	mg	Tablets	Oral			∞	261.71		5.17		-3.55	2.66	co	2	54.80
Tolmetin	009	mg	Tablets	Oral	0.22	=	7	257.29	-3.07	2.79	-0.98	-2.29	2.21	m ·	_	29.62
Tolvaptan	30	mg	Tablets	Oral	0.0005	240	0	448.95	-5.95			-6.28	4.65	m ·	7	74.25
Torsemide, torasemide	100	mg	Tablets	Oral	0.16	1.56	20	348.43		3.37	0.45	-1.04	3.36	S	т П	109.16
Trandolapril	4	mg	Tablets	Oral		1	1	430.55	ļ	4	1.08	-1.68	2.10	ς.	7	01.91
Irazodone	300	mg	Tablets	Oral	0.2	0.0	0.5	3/1.8/	-3.2/	3.80	7.04	-4.92	3.83 6.63 6.63	4 v	۰ ر	34.31
Treprosumi	10	mg/mr	Solution	Injection (s.c.)			4 C	390.52		00	6	55.4-	3.72	n (	o +	50.06
Triomtonio	100	mg m.s	Capsules	Oral	0200	7	0.0	300.44	50	0.30	52.4	14.71	1.61	1 1	- 6	22.00
Triclebendezole	250	mg me	Capsures Tablets	Oral	0.000	\$000 \$000	10	350 66	5.5	7.31	06.1	-5.34	1.01	٠.	n -	33.63
Triming malage	100	mg me	Tablets	Oral	20002	2000	1	207.00	6.5	10.7	1 08	2.37	F 7	٠, ر	٠ -	1 75
Ursodiol: ursodeoxycholic	500	am ma	Tablets	Oral			0.5	392.58		4.15	2.03	-4.68	4.51	1 4	o m	85.95
acid		0														
Valdecoxib; bextra	20	mg	Tablets	Oral				314.37				-3.93	1.83	Э	1	88.84
Vitamin A (retinol)	110	mg	Tablets	Oral	0.044	10	0	286.46	-3.81	5.68		-5.12	6.40	1	1	22.56
Vitamin D2 (ergocalciferol)	1.25	mg	Capsules	Oral				396.66		7.04		-6.63	9.39	_	1	22.56
Voriconazole	200	mg	Tablets	Oral	0.39	2.1	1.5	349.32	-2.95			-3.20	0.52	S	1	67.01
Warfarin	10	mg	Tablets	Oral	0.018	2.2	1	308.34	-4.23	2.60	1.12	-3.40	2.90	3	-	68.83
Zafirlukast	20	mg	Tablets	Oral			0	575.69				-6.67	7.09	9		21.38
Zaleplon	10	mg	Capsules	Oral	1		0.5	305.34	ļ	1.23		-4.19	4: :	5	0	61.50
Zileuton	009	mg	Tablets	Oral	0.5	4. 5 8.	i.	236.29	-2.67			-2.16	2.48	7 -	7 -	73.18
Ziprasidone nydrochioride	90	mg	Capsures	Orai	0.00043	44	0.0	412.94	-5.98			-4.92	4.21	4	-	6.4
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Table III. Measured and In Silico Data for 247 BDDCS Class 3 Drugs

Generic name	Maximum strength dose value	Maximum strength dose unit	Formulation	Route	Measured solubility (mg/mL)	Dose	% Excreted unchanged in urine	MW drug	Measured LogS molar	Measured LogP	Measured LogD74	minVSLgS 3-7.5	CLogP	HBA	HBD	PSA
							C N	,	,	,	)	6		,	,	0
Acamprosaic acid	333	mg Againg motobolite	Tablets	Oral	9		50	181.21	0			0.72	-2.47	4 6	7 (	92.63
procainamide		anno morano			2		5	2	÷			10:0		,	1	00:00
Acrivastine	∞	mg	Capsules	Oral	0.7	0.05	29	348.45	-2.70			-2.11	1.46	4	1	52.25
Adefovir dipivoxil	10	mg	Tablets	Oral	0.4	0.1	45	333.24	-2.92			-1.63	-1.98	∞	ю	149.47
Albuterol; salbutamol	4	mg	Tablets	Oral			50	239.32			-1.11	0.45	90.0	4	4	82.56
Alendronate sodium	70	mg	Tablets	Oral			\$4	249.10				4.87	-5.64	∞ (	9	178.77
Almotriptan	12.5	mg	Tablets	Oral	Č	i.	0 40	335.47	,			-1.46	1.79	m i		53.85
Alvimopan	12	mg	Capsules	Oral	0.1	0.5	7 20	424.54	-3.63	,	0	-1.82	2.16	n +	n +	71.16
Amantadine	100 250	mg mg/ml	Capsules	Oral Injection (i.v.)	20	0.008	ç 8	585 61	-0.48	44.7	-0.09	2.00	00.7	1 7	1 5	16.12
Amilorida	067	mg/mL	Solution	Injection (1.v.) Oral	05	0000	8 6	200.001	99 0-	0.10	1 25	5.51 -1.03	0.30	7	cI S	150.65
Aminocaproic acid	1000	a H	Tablets	Oral	333	0.000	6 4	131 18	0.00	0.10 -2 95	-1.60	2.05	-2.24	- (r	o c	68.80
Amoxicillin	875	me me	Tablets	Oral	3.5	1.0	98	365.41	-2:02	0.87	-1.52	-0.47	-1.87	9	1 4	143.96
Ampicillin	500	n gil	Capsules	Oral	7.8	0.3	88	349.41	-1.65	1.35	-1.61	-0.42	-1.20	S	ъ	121.09
Atenolol	100	mg	Tablets	Oral	24.8	0.02	94	266.34	-1.03	0.16	-1.03	-0.16	-0.11	4	33	92.48
Atropine (DL)	0.4	mg	Tablets	Oral	0.002	8.0	57	289.38	-5.16	1.83		96:0-	1.30	ю	1	50.80
Azacitidine	25	mg/mL	Solution	Injection (i.v.)	68		62	244.21	-0.44	-3.02		-0.83	-2.20	∞ ;	4	143.47
Azithromycin	009	mg	Tablets	Oral	39	90:00	9 (	749.00	-1.28	4.02		-3.15	2.64	13	n ·	186.17
Azloculin	4000	mg	Powder	Injection (1.v.)	200	0.3	60	461.50	1.64		10.2	78.7	1.56	2 و	4 4	159.99
Aztreonam	9 6	mg/mL	Solution	Injection (1.v.)	10	50	8 09	212.67	1.04	90.0	70.6-	1.07	0.34	. II	4 c	02.217
Benazenrilat	77	mg Active metabolite	Lablets	Cia	7.7	5.0	69	396.45	-2.01	96.7	-0.07	0.91	2.02	n v	1 r	115 38
Bendroflumethiazide	10	mg	Tablets	Oral	0.108	0.4	21	421.42	-3.59	1.89	1.99	-3.42	1.73	ν.	, m	131.87
Betamipron	2	mg/mL	Solution (with	Injection (i.v.)			86	193.20				-1.18	0.72	т	2	73.68
•		,	panipenem)													
Biapenem	300	mg	Powder	Injection (i.v.)			53	350.40				-0.67	-6.35	S	1	97.13
Biotin	2	mg	Tablets	Oral	0.22	60.0	43	244.31	-3.05			-1.14	-0.08	ю	С	88.25
Bisoprolol fumarate	10	mg	Tablets	Oral			63	325.45		1.87	-0.23	-1.52	1.83	2	2	63.82
Bleomycin A2	8	mg/mL	Solution	Injection (i.v.)	20		89	1415.58	-1.85			-7.03	-7.68	28	50	662.79
Bretylium	50	mg/mL	Solution	Injection (i.v.)	50	0	77	243.17	-0.69		-2.10	-1.93	-1.25	0 1	0 (	0.00
Bumetanide	2	mg	Tablets	Oral	0.1	0.08	5 2	364.42	-3.56		-0.45	-3.55	3.37	s,	m c	130.02
Cadralazine	10 200	mg /I	Tablets	Oral Injection (3 ::.)	1.3	0.03	c 6	283.33	-2.34		0.32	-2.80	0.93	2 -	v 5	106.01
Capteonycm 1B	300	mg/mr	Solution	Injection (i.v.)	160	0 003	38	023.70	-0 13	0.34	-1 08	1.99	080	7	cı c	27.600
Carbenicillin	382	a m	Tablets	Oral	50	0.03	82	378.41	-0.88	1.13	2	-1.33	1.64	9	1 (1)	133.95
Carboplatin	10	mg/mL	Solution	Injection (i.v.)	14		77	371.26	-1.42	-2.30		0.94	-0.34	2	7	149.65
Carteolol	10	gm	Tablets	Oral			09	292.38			-0.46	-0.76	1.29	4	3	78.78
Cefaclor	500	mg	Capsules	Oral	8.59	0.2	52	367.81	-1.63		-1.76	-0.17	-1.64	2	3	121.09
Cefadroxil	1000	mg	Tablets	Oral	14.2	0.3	93	363.39	-1.41		-3.40	0.14	-2.51	9	4	143.96
Cefamandole	400	mg	Tablets	Oral	333	0.005	96	462.51	-0.14	0.50	-2.40	-2.54	0.11	∞	m ·	155.70
Cetazolin	1000	mg	Powder	Injection (i.v.)	33	0.1	80	454.51	-1.14	-0.58	-3.14	-1.36	-1.19		7 (	156.53
Cerepime	2000	mg 	Powder Selection	Injection (1.v.)	6,000		8 8	480.57	7	03.0		77.0	5.05	00	7 (	150.63
Cefodizime	9 %	mg/mL mg/mI	Solution	Injection (i.v.)	0.0942		0e Se	584 67	-3.70 -034	0.00		-2.34	1.34	, 1	7 4	203.72
Cefonicid	20	me/mI.	Solution	Injection (i.v.)	ì		66	542.57				-1.71	-1.92	=	- 4	215.48
Ceforanide	50	mg/mL	Solution	Injection (i.v.)			84	519.56				0.00	-3.36	10	4	201.94
Cefotaxime	40	mg/mL	Solution	Injection (i.v.)			30	455.47			-1.70	-0.31	0.14	6	3	179.71
Cefotetan	50	mg/mL	Solution	Injection (i.v.)			29	575.62			-1.20	-2.04	-1.54	11	4	229.00
Cefotiam	167	mg/mL	Solution	Injection (i.v.)			80	525.63				-0.79	-3.58	10	3	172.22
Cefoxitin	50	mg/mL	Solution	Injection (i.v.)	1000		85	427.46	0.37	-0.02	-1.89	-1.42	-0.81	9	т (	156.95
Cefsulodin	200	mg	Powder 6-1-4	Injection (1.v.)	50 5	40:0	000	532.55	-1.03	9	000	-I.96	6.89	χç	n (	104.05
Cettaziame	707	mg/mL	Solution	Injection (1.v.)	n		60 00	362.38	-2.04	-1.60	-3.80	0.46	0.27	01 %	o 11	152.65
Сепиходине	5	mg/mr	Solution	Injection (1.v.)			Cr	14:000				T+:0	10.0	0	o	132.03

Table III. (Continued)

Generic name	Maximum strength dose value	Maximum strength dose unit	Formulation	Route	Measured solubility Dose (mg/mL) number	% Excreted e unchanged ber in urine	eted ed MW drug	Measured LogS molar	Measured LogP	Measured LogD74	minVSLgS 3-7.5	CLogP	HBA	HBD	PSA
Coffeiovono	9	Im/om	Colution	Injection (4 yr)	400		25/50	510		7 30	0.31	0.00	12	-	216 99
Cefuroxime	50	mg/mr mg	Tablets	Oral		0.001	96 424.39		-0.16	-1.91	-1.76	0.23	7 /	t (C	179.19
Celiprolol	200	gm	Tablets	Oral					1.92	1.14	-1.73	1.86	. 2		98.23
Cephalexin	750	mg	Capsules	Oral			91 347.40		-0.67	-2.40	-0.28	-1.84	5		121.09
Cephalothin sodium	2000	mg	Powder	Injection (i.v.)	50 0.	0.2	52 396.44	-0.92	0.00	-2.20	-1.72	-0.28	S.	3 1	120.19
Cephapirin	1000	mg	Powder	Injection (i.v.)					-1.15	-1.15	-0.27	-0.61	9 1		130.43
Cephradine	200	mg	Capsules	Oral O==1			86 349.41		-1.75	-2.10	- 10.0 - 4	-1./3	n 4		51.09
Ceturizine	10	mg	Tablets	Oral	101				1.70	-0.31	-1.42	2.08	Λ,	<b>-</b> -	51.97
Chloroquine	2000	mg mg/mI	Salution Salution	Oral Inigotion (i.v.)		0.02	01 077	0.50	4.03	1.54	7.17	5.06	n 0		25.69
Cilostotin	750	mg/mL mg/mI	Solution (with	Injection (i.v.)	35	א ני	90 358 46			110	56.7 FF 0	65.3	0 4		27.76
Chastath	007	mg/mir	imipenem)	mjecuon (i.v.)	67					TITO	00	÷.	>	+	94.7
Cilazaprilat	2.6	mg	Tablets	Oral		6	91 389.46				1.01	1.50	7	3 1	120.13
Cimetidine	800	mg	Tablets	Oral		0.5 6			0.40	0.33	-1.91	0.19	5		81.67
Clarithromycin	500	mg	Tablets	Oral	2 1.		35 747.97	7 –2.57	3.16		-4.00	2.37	13	4	189.50
Clavulanic acid	125	mg	Tablets (with 875 mg	Oral		4	3 199.16				0.31	-1.07	S		91.63
		17	amoxicillin)		•						7	4	t		00
Clorarabine	- 0	mg/mL	Solution	Injection (1.v.)	-	n v	55 505.08	-2.48	5	6	1.97	0.40	- (	n (	112.88
Cromolen	5.0	mg mg/inhalation	Solution	Oral Tonical (nasal)	210	0 00001	52 230.10	-0.35	2.1 2.1 2.0	0.83	-1.40 -2 33	1.73	٠ <del>-</del>	,	38.40
Cycloserine	250	mg/milaiauon	Capsules	Oral				,	77.1	90.	1.25	1.10	; "	,	73.83
Dabigatran		Active metabolite	capomeo				85 471.52				-2.28	0.06	, ∞		146.28
Dacarbazine	10	mg/mL	Solution	Injection (i.v.)	4.2	· m		-1.64	-0.24	-0.24	-1.56	0.48	2		97.62
Dactinomycin: actinomycin D	0.5	mg/mI.	Solution	Injection (i.v.)	0.5	. —				1	-6.89	8.01	· ∞	(*,	368.53
Dalfampridine	10	mg	Tablets	Oral		6			0.26		1.51	0.32	2	_	37.91
Daptomycin	50	mg/mL	Solution	Injection (i.v.)	1000	4	40.5 1620.71	-0.21			-7.54	-2.43	27	7 22	774.05
Demeclocycline	300	mg	Tablets	Oral	1.5	0.8			09:0-		0.39	-0.59	6		197.07
Desmopressin	0.2	mg	Tablets	Oral			-				-2.48	-3.14	15	4	476.51
Desvenlafaxine	100	mg	Tablets	Oral		200				0.21	-1.28	2.68	3		34.13
Dexrazoxane	200	mg	Powder	Injection (i.v.)	11 0.	0.2		, -1.39		-1.60	-2.12	-1.33	9		104.58
Dibekacin; dideoxykanamycin B	50	mg/mL	Ampoules	Injection (i.m.)		οο <b>ν</b>			č		1.70	-3.41	13		265.26
Dicloxacillin	500	mg	Capsules	Oral					2.91	Č	-3.36	2.98	'n,		116.46
Didanosine	52	mg	Tablets	Oral	27.3 0.	0.004	5 236.23	0.94	-1.24	-1.24	-1.62	-1.65	<b>ာ</b> ငု		84.65
Digoxin	0.25	mg mo	Tablets	Oral	9		30 /64.96		1.26	1.05	6.01	1.65	13		215.02
Dispovramide	150	me me	Cansules	Oral					2.58	-0.43	-0.79	2.58	9 60	1	27.66
Dofetilide	0.5	gm g	Capsules	Oral							-3.35	1.99	9		113.88
Dorzolamide hydrochloride	0.02	mg/mL	Solution	Ophthalmic	3.9	1	0 324.44	1.92			1.31	-0.43	5		116.83
Doxycycline	40	mg	Tablets	Oral		4			-0.02	-0.06	0.52	-0.51	6		197.07
Edetate calcium disodium	200	mg/mL	Solution	Injection (i.v.)							6.61	-1.93	10		165.67
Emtricitabine	200	mg	Capsules	Oral	112 0.	0.007		-0.34	-0.43	-0.43	-1.31	-1.29	2		88.11
Enalaprilat	∞	mg	Tablets	Oral					-0.74	-0.28	0.21	0.88	9		115.68
Entecavir	1	mg	Tablets	Oral	2.4 0.	0.002					-2.13	-2.58	9 !		126.09
Eptifibatide	2	mg/mL	Solution	Injection (i.v.)	65	v, c	0 831.98	-1.11			-5.02	-2.86	12		350.27
Ertapenem sodium	1000	mg	Fowder	Injection (1.v.)					ò		0.70	-1.82	» ;		1/0./8
Erythromycin (base)	200	mg mg/mI	Tablets Salution	Oral Injection (: ::)	70 T.7	1.0	-	-2.54	3.00		45.5	1.01	S 2	n 4	703.27
Etyunomyem tactoonate Ethambutol	30	mg mr	Solution	Injection (i.v.)	07	ľ	7			07.0-	15.04	0.17	CI ~		12.50.
Etidronic acid	400	me mo	Tablets	Oral		- v				67:7	4.72	-2 54	+ 1-		150.80
Etoposide	50	mg	Capsules	Oral	0.22 0.	9.0		, –3.43	09:0	09:0	-4.31	0.03	12		166.64
EXP-3174	š	Active metabolite					55 436.90				-1.50	5.59	9	2 1	105.06
Famotidine	40	mg	Tablets	Oral					-0.64	-1.50	-1.64	-1.17	8		179.34
Ferrous sulfate	182	mg	Capsules	Oral	570 0.	0.001	151.91	0.57			3.65	-4.15	4		75.52

87.12	65.63	70.15	104.95	72.91		134.88	215.91	81.66	83.82	131.87	64.77	131.87	86.58	30.00	137.49	120.42	220.19	211.03	20:117	183.86	49.62	304.97	29.67	74.48	88.11	232.35		87.30	62.69	51.97	133.05	143.65	63.19	75.12	43.18	27.07	89.74	107.10	111.33	211.69	114.54	72.81	70.79	55.25	184.12	91.41	47.42	61.18
С	7 -	2	6	7 0	4 C	4	∞	1	33	33	2	m	m +	- v	'n	4	∞	o		9	1	11		2	7 7	4 L	٠	4				4	0	2	П (	o -	4	-	2	5	4	2	2	0	יט ער	, 4	_	1
S	4 v	n m	ς.	4 "	0	· ∞	12	4	ю	S	33	2	7 7	n ox		9	6	o		∞	2	15	3	ю I	νţ	12	•	4	2	v L		7	33	9	es u	o -	٠,	9	9	12	5	4	4	4 0	∞ ∞	o vo	2	3
1.96	3.66	1.64	-2.17	0.23	1.43	-2.73	-1.80	-3.30	1.37	-0.37	1.90	-0.21	-1.80	1.30	1.74	-1.35	99.0	98.0	8	1.37	-2.19	-5.17	1.62	0.39	-1.46	-3.49	ò	0.06	-0.34	2.08	1.28	-1.69	-3.65	-0.11	4.66	4.6	5.03 -1.63	0.09	1.78	-0.53	-2.26	-2.64	2.23	1.12	1.50	0.91	1.91	-0.03
-3.08	-2.20	0.05	3.43	175/	1.71	-1.52	3.49	1.90	-2.16	-1.75	-1.44	-1.88	1.19	7.10	0.46	0.82	-4.12	3 88	00:5	-3.90	-2.28	3.84	-2.37	-2.15	-1.21	-1.96		0.45	-1.18	-1.54	-2.27	1.85	0.00	-0.56	-4.57	1.35	4.13	-1.04	-2.39	-0.03	1.34	-1.70	-1.25	-5.31	-3.36 1.70	0.22	1.46	-2.50
2.68	1.14	0.95 -1.97	-2.00	_1 31	1.5.1	-4.25	-8.40		1.12	-0.07		0.36	4	<del>†</del>											24.0	-3.45	į	_I.II	į	-0.31	-	-3.40		-1.03	4.22		-5.41	:	-2.41	-2.52	-2.39	-1.12	0.32					89.0
	3.78	00		-1 10	1.10	-1.66			1.33	-0.07		0.36	-1.80	1.00									1.04		-0.93	00			į	1.70	0.56	-1.22		-0.30		900	3.70	0.13	1.22	-1.85	0.39	-1.12	2.62		-3.21	1		
	-0.93	-2.49		4.0 4.5	57.1	-1.66	-0.98		-2.39	-2.70		-3.04	-0.18	1.91		-1.48							-0.11	-2.10	-0.52	0.02		-0.12	0.79	-3.59	0.97	-0.62	-0.75	-2.33	-2.53	6.95		-2.53	-0.10	-3.00	-1.32		-3.18	-2.34		99.0		-2.32
501.67	414.35	129.09	126.01	138.06	255.73	255.24	477.61	368.09	246.10	297.74	326.40	331.29	76.06	310.73	377.40	299.35	821.15	00 222	0	791.12	332.47	484.51	255.28	250.30	229.26	320.46 473.45	00000	239.32	170.21	388.90	406.55	405.50	73.89	351.36	477.05	170.31	129.17	236.27	380.42	454.45	211.22	356.45	299.80	652.84	539.59	219.28	246.36	211.23
25	43	66	82	28 20	9 S	91	91	70	20	100	53	06	2 5	75	6	69	95	90	2	76	50	06	58	9 ;	20	10	3	40	99	71	30	94	95	92	5.0	÷ ;	1/	61	88	81	40	52.75	20	20	80 80	% %	55	85
	0.01	0.1		0.7	C:0	0.3			0.008	0.3		0.7	0.08	0.0003		0.3							0.0002	0.1	0.02	0.0002	*000000	0.000001	0.004				0.2		0.006	50.04		0.3		0.1	0.2		0.2			0.0004		
	48.4	15	i	0, 0	10	9	50		1	9.0		0.3	50	3.30		10							200	2 -	0,5	200	9	180	1040	0.101	20	76	13	1.64	4. 1.	4		0.704	300	0.45	10		0.2	ю		1000		1
Oral	Oral	Oral	Injection (i.v.)	Oral	Uniection (i.v.)	Oral	Injection (i.v.)	Injection (i.m.)	Oral	Oral		Oral	Oral	Oral		Injection (i.v.)	Injection (i.v.)	Injection (i.v.)	mjeenen ()	Injection (i.v.)	Topical (aerosol)	Injection (i.v.)	Oral	Oral	Oral I-i(i)	Injection (1.v.) Oral		Iopical (aerosol)	Oral	Oral	Injection (i.v.)	Oral	Oral	Oral	Oral	Oral Oral	Oral	Oral	Injection (i.v.)	Oral	Oral	Injection (s.c.)	Oral	Injection (i.v.)	Injection (i.v.) Oral	Oral	Oral	Injection (i.v.)
Tablets	Tablets	Capsules	Solution	Tablets	Solution	Capsules	Solution	Solution	Tablets	Tablets		Tablets	Tablets	Tablets	Tag Car	Powder	Solution (equivalent	to 350 mg I per mL)	370 mg I per mL)	Solution (equivalent	Solution	Solution	Tablets	Tablets	Tablets	Solution Tablets	•	Solution	Tablets	Tablets Tablets	Solution	Tablets	Tablets	Tablets	Capsules	Capsules Tebleto	Tablets	Tablets	Solution	Tablets	Tablets	Solution	Tablets	Solution	Powder Tablets	Capsules	Tablets	Solution
mg	ng	m m	mg/mL	mg	mg/mL	m Su	mg/mL	mg/mL	mg	mg	Active metabolite	mg	mg	am a	Active metabolite	mg	mg/mL	Im/sm	A	mg/mL	μg/activation	mg/mL	mg	mg	mg /I	mg/mL mg	3	µg/activation	mg	mg	mg/mI.	m Su	mg	mg	mg	mg me	a III	me m	mg/mL	m	gm	mg/mL	mg	mg/mL	mg mo	g u	g m	mg/mL
180	150	200	24	3000	25	200	40	50	2	50		20	1000	150		750	755	755	3	692	17	333	10	50	300	25	į	<b>4</b>	1000	5	300	40	009	400	2	904	1000	50	40	15	200	20	10	2	2000	100	100	1
Fexofenadine; terfenadine	Hecainide Fluconazole	Flucytosine	Foscarnet	Fostomycin tromethamine	Gablium nitrate	Ganciclovir sodium	Gentamicin C1 sulfate	Gold sodium thiomalate	Guanfacine hydrochloride	Hydrochlorothiazide	Hydrodolasetron	Hydroflumethiazide	Hydroxyurea	Hyoscyanine; L-auopine Dandronata	Imidanrilat	Imipenem	Iohexol	Tonomidal	opullador.	Iopromide	Ipratropium bromide	Kanamycin	Ketorolac	Lacosamide; erlosamide	Lamivudine	Leucovorin; folinic	acid	Levalbuterol	Levetiracetam	Levocetirizine Levodovacin	Lincomycin	Lisinopril	Lithium carbonate	Lomefloxacin	Loperamide	Momentine	Methormin	Methazolamide	Methicillin	Methotrexate	Methyldopa	Methylnaltrexone	Metoclopramide	Metocurine iodide	Mezlocillin Miølitol	Miglustat	Milnacipran	Milrinone

Table III. (Continued)

	Maximum	Maximum			Measured		% Excreted			,	,	200				
Generic name	strength dose value	strength dose unit	Formulation	Route	(mg/mL) number	er	uncnanged in urine	MW drug	Measured LogS molar	LogP	Measured LogD74	3–7.5	CLogP	HBA	HBD	PSA
Mitoxantrone	2	mg/mL	Solution	Injection (i.v.)	7.5		7	444.49	-1.77		0.70	09:0-	2.30	10		185.09
Morphine 6-glucuronide		Active metabolite			1000		06	461.47	0.34		-0.66	-0.23	-3.10	10	5 1	159.24
Moxifloxacin hydrochloride	400	mg	Tablets	Oral		90.0	22	401.44	-1.20			-0.83	-0.08	7	2	84.22
Nadolol	160	mg	Tablets	Oral	30.4 0	0.02	73	309.41	-1.01	0.81	0.93	-0.39	0.38	2		91.35
Nafcillin sodium	36	mg/mL	Solution	Injection (i.v.)			27	414.48				-3.46	3.53	2	2 1	102.23
Naratriptan	2.5	mg	Tablets	Oral		0.0003	50	335.47	-0.98			-0.72	1.70	33		67.24
Neomycin B sulfate	200	mg	Tablets	Oral	60	0.3	40	614.66	-2.05			4.21	-6.47	19		378.50
Neostigmine	15	mg	Tablets	Oral	100	9000.0	67	223.30	-0.35			-0.51	-2.81	- ;		28.55
Netilmicin	100	mg/mL	Solution	Injection (i.v.)			\$ 3	475.59	,	0	•	2.52	-2.40	12	oo (	215.91
Nizatidine	300	mg	Capsules	Oral	65	0.06	61	331.46	-1.18	-0.20	1.00	-2.55	-0.16	င္း		85.02
Nystatin	700	mg	Capsules	Oral	4 6	0.2	77	926.12	-2.36	02.0	9	-6.39	-3.20	I./		347.83
Olmesartan	904	mg Active metabolite	lablets	Cia		J.5	4 4	301.30 446.51	-2.01	6.0	0.40	-0.3/	2.51	- 1-		127.62
Olomotodine brideockloride	v	me meanounc	Toblete	Onhtholmio	·	0.01	£ 4	227.42	-2 23			10.2	1001			51 11
Oseltamixir	n	mg Active metabolite	iablets	Opiniiaiiiiic		7.01	6 6	284.36	57.7			0.57	-1.24	t v		110.44
Oxacillin	167	mg/mL	Solution	Injection (i.v.)			46	401.44		2.38	-1.24	-2.86	2.05	2	2	116.46
Palonosetron hydrochloride	0.05	mg/mL	Solution	Injection (i.v.)			40	296.42				-2.72	2.18	2		20.62
Pamidronate disodium	15	mg/mL	Solution	Injection (i.v.)			94	235.07			-7.87	5.20	-6.17	1 ∞		178.77
Pancuronium bromide	2	mg/mL	Solution	Injection (i.v.)			29	572.88				-4.27	1.21	2		54.13
Pemetrexed disodium	25	mg/mL	Solution	Injection (i.v.)	06		80	427.42	-0.68			-2.23	-1.17	6	_	198.63
Penciclovir	10	mg/g	Cream	Topical (skin,	170		75	253.26	-0.17	-1.62		-2.17	-2.72	9		126.09
				membranes)												
Penicillamine	250	mg	Capsules	Oral			45	149.21		-1.78	-3.94	2.60	-1.73	ю	Э	08.89
Penicillin G;	39	mg/mL	Solution (as	Injection (i.v.)				334.40		1.83	-1.81	-2.21	1.75	4	2	93.12
benzylpenicillin	(60,000	units/mL)	potassium salt)	:	ć		ć	0	0		,	,	,	ı		;
Pentostatin	2	mg/mL	Solution	Injection (i.v.)	30		08 [	268.27	-0.95	-2.09	-4.65	-1.17	-1.96	_		111.17
Phenylethylmalonamide	250	mg	Tablets	Oral			6/	206.25		0.13	0.13	-1.61	0.01	7 (	7 (	92.49
Phenylpropanolamine	5,	mg	Tablets	Oral		100	65	151.21	ų,	0.83	-2.27	0.99	0.58	7 (		50.53
Pindolol	10	mg	Tablets	Oral	7.9	0.000	54	248.33	-1.50	1.75	0.39	-1.40	1.67	ю.		60.21
Pipecuronium bromide	1	mg/mL	Solution	Injection (i.v.)	,		33	602.91	7	0	,	-3.57	0.63	4 1	۰ د	26.48
Piperacillin	200	mg/mL	Solution (with	Injection (1.v.)	714.3		.17	517.56	0.14	0.50	-3.30	-3.44	1.70	_		94.80
			tazobactam)													
Piperazine	200	mg	Tablets	Oral	260 0	800.0	50	86.14	0.48	-1.50		3.10	-1.48	2	2	29.15
Piracetam	800	mg	Tablets	Oral			70	142.16		-1.54	-1.55	-0.45	-1.18	2		69.59
Pirenzepine	50	mg	Tablets	Oral		0.004	43	351.41	-0.85	0.10	-0.39	-3.12	-0.35	2		63.98
Plerixafor	20	mg/mL	Solution	Injection (s.c.)			70	502.80	-1.70			4.68	-0.25	∞	9	89.79
Potassium chloride	1500	mg	Tablets	Oral		0.02	82	74.56	0.65			-1.07	-2.14	0 (	o (	0.00
Promototic	C. 0	m g	Tablets	Oral	7.002	0.03	8 8	424.53	-3.02	010	0.00	0.00	7.17	o 4		32.49
Pravastatin	900	m g	Tablets	Oral		0.001	07	150.22	0.46	7.10	1.25	21.73	5.03	۰ ۵		10.00
Processinemide	300	mg me	Tablets	Oral	55	t 0.0	06	735 33	-1 77	88.0	-1.53	7.77 -0.57	1 42	n 11	1 C	00.00
Desirantamine	120	m m	Tablets (discontinued:	Oral		2.	5 4	165 24	7.7.7	0.00	CTT	75.0	25.0	, ,	1 0	37.13
o a constant a constan	071	a m	60 mg in				}	F7:001		CTIT		0000	9.0	1	1	9.10
			combinations)													
Pyridostigmine	09	mg	Tablets	Oral	100	0.002	85	181.22	-0.26	0	-	-0.13	-4.26		0 (	29.12
Pyrimetnamine	57	mg • ·	Iablets	Orai		N.8	60 %	248.72	-5.51	7.09	1.01	16.7-	3.00	4 /	•	79.67
Quinaprilat		Active					95	410.4/				05.0-	1.95	9		115.68
Baltitrexed	0.5	metabonie mø/mI.	Solution	Injection (i.v.)			20	458.50				-0.32	0.71	00		157.86
Ramiprilat	è	Active metabolite					13	388.47				-0.28	1.75	9	3 .	115.68
Ranitidine	300	mg	Tablets	Oral	555 0	0.002	30	314.41	0.25	0.27	0.54	-1.50	0.67	5		84.19
Regadenoson	80.0	mg/mL	Solution	Injection (i.v.)	0.05		92	390.36	-3.89			-3.00	-2.86	10		181.70

											0			
mg	0.0	Tablets	Oral			87	283.12				2.80	-2.62	∞ .	5 161.04
mg		Tablets	Oral			10	287.36				-1.42	1.65	4	
mg	mg/mL	Solution	Injection (i.v.)			17	530.80				-3.53	6.40	0	
mg	5	Tablets	Oral	1250	0.0008	55	527.58	0.37		-3.21	-0.82	0.47	10	
mg	0.00	Tablets	Oral			S	481.55			-0.89	-3.71	1.90	∞	
Ų,	Active metabolite					57.5	306.40				-2.62	2.35	4	
п	mg	Tablets	Oral	17.6	0.001	24	315.42	-1.25			-2.48	0.11	4	2 88.67
=	mg	Tablets	Oral			75	409.82				-1.33	-1.25	9	
=	mg	Tablets	Oral			78	407.32				-1.70	69.0	4	
	mg	Tablets	Oral	137	0.007	82	272.37	-0.30	0.24	-0.79	0.11	0.23	4	
п	mg/mL	Solution	Injection (i.m.)	7.5		70	332.36	-1.65			1.31	-2.88	6	
п	mg	Capsules	Oral	83	0.002	39	224.22	-0.43	0.14		-1.60	-0.49	4	
п	mg	Powder	Injection (i.m.)	20	0.2	55	581.58	-1.46			2.10	-4.26	19	
=	mg	Tablets	Oral	2.28	0.4	70	341.43	-2.18	0.57	-1.15	-0.99	1.11	5	
п	mg	Tablets	Oral	1.23	0.3	52.8	363.50	-2.47			-2.27	3.15	4	
Ξ	mg/mL	Solution (with	Injection (i.v.)	50		77	300.29	-0.78			-0.42	-0.65	7	
		200 mg/mL												
		piperacillin)												
	Active metabolite					29.5	448.56				-1.22	2.56	9	3 1
	mg/mL	Solution	Injection (i.v.)				414.46				-1.32	1.52	7	3 142.75
	m g	Tablets	Oral	13.4	0.09	82	519.45	-1.59		1.25	-3.71	0.80	10	1 1
	mg	Tablets	Oral	213	0.00009	56	225.29	-0.02	0.90		1.54	0.48	4	4
	mg/mL	Syrup	Oral	1.7		58	444.45	-2.42	-1.30	-1.41		-0.91	6	6 1
	mg	Capsules	Oral	10.9	0.2	58	480.94	-1.64	-1.30	-1.41	99.0	-0.91	6	
	mg/mL	Solution	Injection (i.v.)	1000		77	384.43	0.42			-1.17	1.28	9	
	mg/mL	Solution	Injection (i.v.)	295		22	99.695	-0.29			0.83	-0.83	10	5 1
	mg	Tablets	Oral			09	318.61				0.07	0.26	9	
	gu	Capsules	Oral			74	392.52				-1.64	-1.71	3	
	mg/mL	Solution	Injection (i.v.)			65	440.61				-2.34	2.00	9	
	mg/mL	Solution	Injection (i.v.)	1000		93	467.52	0.33			2.92	-4.72	14	
	mg	Tablets	Oral	10	0.2	38	192.26	-1.28	92.0	0.83	-0.94	0.26	2	
	mg	Tablets	Oral	8.6	80.0	70	339.37	-1.54			-2.05	0.04	∞	1 118.72
	mg	Capsules	Oral	1	0.004	40	421.46	-2.62			-0.91	0.73	9	
	mg	Tablets	Oral			62	266.34				0.04	1.18	5	
	mg	Tablets	Oral	1.37	0.5	70	290.32	-2.33	0.91	0.83	-2.25	0.98	7	
	mg	Powder	Injection (i.m.)			41.7	1311.48				-5.29	-1.22	17	
	mg	Tablets	Oral	200	0.0002	9	392.52	0.11			-3.50	-1.16	2	
	mg/mL	Solution	Injection (i.v.)	50		63	609.75	-1.09			-2.82	3.55	2	
	mg	Capsules	Oral	50	0.02	79	1449.29	-1.46			-7.43	-1.14	24	
	mg	Tablets	Oral	0.2	0.02	92	211.27	-3.02			-0.28	0.90	3	
	mg/mL	Solution	Injection (i.v.)			20	557.84				-3.70	4.33	ю	
	mg	Tablets	Oral			09	129.16		-2.16	-2.60	2.68	-2.22	ю	
	mg	Tablets	Oral	27	0.07	06	265.36	-0.99			-1.58	-5.97	4	
	mg	Tablets	Oral	76.4	0.00004	92	211.22	-0.44	-1.30	-1.64	-1.24	-1.25	5	2 88.11
	mg	Powder	Topical (aerosol)	18	0.001	100	332.32	-1.27			1.76	-5.56	10	8
	mg/mL	Solution	Injection (i.v.)			39	272.09				3.16	-3.07	×	

Table IV. Measured and In Silico Data for 53 BDDCS Class 4 Drugs

Consonio mono	Maximum strength	h Maximum strength	Dominion		l solubility	**************************************		MW dence	Measured	Measured	Measured minVSLgS	minVSLgS	V dr. dec LD		d Clan	DCA
Generic name	dose value	aose unit	rormulation	Noure (		Dose number	uncha	in w urug	Logo moiar	Logr	Logn /4	S-1-C	CLOGF			46
Acetazolamide	250	mg	Tablets	Oral	0.64	1.6	06	222.25	-2.54	-0.26	-0.45	-0.77	-0.98	2	2 13	121.43
Acyclovir	800	mg	Tablets	Oral	2.5	1.3	75	225.21	-1.95	-1.56	-1.76	-2.68	-2.42	9	3 1.	112.32
Amisulpride	200	mg	Tablets	Oral			20	369.49		1.10		-1.30	1.80	9	2 10	107.55
Atovaquone	250	mg	Tablets	Oral			3	366.85			3.82	-5.06	6.35	Э	1	59.10
Auranofin	3	mg	Capsules	Oral			09	678.49				-1.91	3.79	2	0 1.	117.05
Azapropazone; apazone	300	mg	Capsules	Oral	0.0615	20	09 0	300.36	-3.69	1.78		-3.35	1.79	4 (	0 6	52.35
Candesartan	,	Active metabolite	Totaloto		30.0	,	25	440.47	90			4.25	0.4.0 0.6.0	- 0	7 -	114.10
Candesartan cilexetii	200	mg	Tablets	Oral	0.02	0.7	0 4	010.08	4.09			6.50	55.7	ю c	1 7	150.23
Celdinii	200	mg Active metabolite	Capsules	Ora			CI 02	506 58				1779	1.46	0 0	4 c	162.89
Cofficience	400	ma metabolite	Canembee	Ora!	0.05511	00	2 =	453.46	-3 07			0.0	35.0	, =	7 7	103.48
Cenamie	200	S E	Capsuics	Oral	0.0001	67	<del>-</del> - <del>-</del> ×	423.40	3.32			0.09	-0.41	01	+ c	155 91
Ceforozil	200	a m	Tablets	Oral	0.055	36	73	389.43	-3.85			-0.49	-1.87	, ,	4 4 1	143.96
Ceftibuten	400	m gm	Capsules	Oral	0.08	20	71	410.43	-3.71			1.68	-1.21	∞	4	171.87
Chlorothiazide	500	m	Tablets	Oral	0.52	3.8	92	295.72	-2.75	-0.24	-1.10	-1.59	-1.00	9	2 13	126.91
Chlorthalidone	100	mg	Tablets	Oral	0.27	1.5	92	338.77	-3.10	0.85	0.85	-2.98	0.45	4	3 12	120.90
Cinoxacin	200	mg	Tablets	Oral			09	262.22			-1.55	-2.05	1.74	7	1	91.03
Ciprofloxacin	750	mg	Tablets	Oral	0.15	20	92	331.35	-3.34	0.28	-1.21	-0.45	-0.73	9	2	75.12
Clodronic acid	800	mg	Capsules	Oral	0.395	8.1	80	244.89	-2.79			4.95	-0.14	9	4 13	128.24
Cloxacillin	250	mg	Tablets	Oral	0.0139	72	75	435.89	-4.50	2.48	-1.82	-2.98	2.52	2	2 1.	116.46
Dalfopristin	100	mg/mL	Solution	Injection (i.v.)			4.5	98.069				-5.35	0.92	6	2 1	177.78
Daunorubicinol		Active metabolite					25	529.55				-1.12	1.36	11	9	204.62
Enoxacin	400	mg	Tablets	Oral	9.0	2.7	45	320.33	-2.73	-0.20	-2.15	0.07	-1.60	7	2	85.36
Eprosartan	009	mg	Tablets	Oral	80.0	30	30	424.52	-3.72			-4.18	4.80	2	2	92.48
Erythromycin stearate	500	mg	Tablets	Oral	0.33	6.1	v i	1018.40	-3.49			-3.84	1.61	13	5 20	203.27
Felbamate	009	mg	Tablets	Oral O-ral	0.7	4. r	\$ 6	238.25	-2.53	5	-0.29	-1.93	0.50	7	2 F	10.07
FIELOXACIII	900	mg	rablets	Oral	0.0	2.7	7.5	309.53	-2.03	0.24	020	77.0	4 95	0 4	- 6	27.10
Fosinophilat	S	Active metabolite	Toblete	Caro	0.01		5 43	330.75	1. 10. 10.	2 03	1.09	77.7	C6.4 C9.4	o v	7 6	130.02
Tonanoic acid: iodonanoic acid	200	me	Tablets	Oral	0.015	133	33	570.94	85	CO:-7	+	2.36	07.1	, r		50.02
I enalidomide	350	E E	Cansules	Oral	0.00045	222	99	259.27	5.76			-2 64	0.53	0 4	10	88.83
Levocabastine	0.5	mg/mL	Solution	Ophthalmic			70	420.53				-2.60	1.86	. 4		60.70
Levonorgestrel	0.75	ă di	Tablets	Oral	0.0014	2.1	52	312.46	-5.35		3.60	-4.34	3.31	5		40.83
Medroxyprogesterone acetate	200	, a	Tablets	Oral	0.022	91	4	386.54	-4.24			-4.69	4.01	ъ	0	63.61
Megestrol acetate	40	mg	Tablets	Oral	0.002	80	09	384.52	-5.28			-4.57	3.58	Э	0	63.61
Meropenem	333.3	mg/mL	Solution	Injection (i.v.)			70	383.47				0.11	-3.28	9	3 1	116.86
Niclosamide	200	mg	Tablets	Oral	0.013	154		327.13	-4.40			-4.10	4.34	4	2	99.56
Nitrofurantoin	100	mg	Capsules	Oral	0.19	2.1	47	238.16	-3.10	-0.47	-0.19	-1.74	-0.47	5	1 T	118.74
Norfloxacin	400	mg	Tablets	Oral	0.75	2.1	29	319.34	-2.63	-1.03	-2.00	-0.32	-0.78	9	2	75.12
Orlistat	120	mg	Capsules	Oral			-	495.75				-7.63	8.61	ю		86.97
Paliperidone	6	mg	Tablets	Oral	0.01125	3.2	59	426.50	-4.58		2.52	-2.77	1.12	S	-	76.16
Penicillin V;	200	mg	Capsules	Oral	0.25	8.0		350.40	-3.15	2.09	-1.54	-2.34	1.94	2	2 10	102.23
phenoxymethylpenicillin			;	,			:	,								
Phenazopyridine hydrochloride		mg	Iablets	Oral			41	213.24				-2.37	5.05	o ;	~ ;	88.00
Quinupristin	100	mg/mL	Solution	Injection (1.v.)	500	0000	3.5	1021.26	i i			6.15	0.7	77	4 1	236.20
Kıtaxımın	250	mg	Iablets	Oral	0.001	2200	0.035	785.90	0.50	į		9T'/-	47.7	71	0 1	5.54
Koxithromycin	300	mg	Tablets	Oral	0.1	12	77	837.07	-3.92	2.72	9	-4.95	67.7	9 v	00	224.19
Sulfactiazine	200	mg	Tablets	Oral	0.13	15	2/	220.78	5.28	-0.09	-1.00	-1.93	0.10	n ı	7 0	56.66
Sulfamethizole	200	mg	Tablets	Oral	0.25	0.0 ,	9g ç	270.33	-5.03	0.54	-1.11	-1.90	0.42	ο.	7 7	102.86
Suinsoxazole	200	mg	lablets	Orai	0.13	CI	44	15.707	15.5	1.01	\overline{\chi}	-2.01	0.22	4 /	7 7	102.81
Trandolaprilat		Active metabolite					4	402.49				7.07	2.31	۰ -	5 F	52.68
Volcarian	330	Active metabolite	Toblete	los C	010	1	0.5 7	3/3.00	-2.20			26:4-	06.4	1 9	- c	32.01
Vatsantan Vitamin R2 (rihoflavin)	100	E E	Tablets	Oral	0.15	3.6	57	376 37	-3.53	-1 46		7.: 49.c-	-0.73	0	2 2	161.81
(111,111)		9				2	2							`	,	
																l

Table V. Measured and In Silico Data for 11 BDDCS Class 0 Drugs

	Maximum strength	Maximum strenath Maximum strenath			Measured solubility		% Fxcreted		Measured	Measured	So ISV nim beausea Measure	So ISVuim				
Generic name	dose value		Formulation Route	Route	(mg/mL)	Dose number	Dose number unchanged in urine MW drug LogS molar LogP	MW drug	LogS molar	LogP	LogD74	3-7.5	CLogP	CLogP HBA HBD	HBD	PSA
Amphetamine sulfate	10	mg	Tablets (	Oral	30	0.001	40	135.21	-0.65	1.76	1.54	1.25	1.74	1		76.73
Atracurium	10	mg/mL	Solution	Injection (i.v.)			8.5	929.17				-7.00	3.50	10		126.97
Chlorphentermine	25	mg		Oral			17	183.68		2.60	0.40	0.41	2.85	1	_	76.73
Chlorpropamide	250				2.2	0.5	20	276.74	-2.10	2.27	-0.13	-2.66	2.35	3	~	84.94
Cisatracurium besylate	10	T		Injection (i.v.)			8.5	929.17				-7.56	3.50	10		126.97
Dextroamphetamine	15	mg		Oral	1	90.0	40		-2.13	1.76	1.54	1.29	1.74	1		. 16.73
Diethylcarbamazine citrate	100				63.7	9000	35		-0.50		1.08	69:0-	1.62	2		1.80
Mecamylamine	2.5	mg	Tablets (	Oral	212	0.00005	50		0.10			1.77	2.83	1	_	14.57
Methamphetamine	5	mg		Oral	1000	0.00002	40		0.83			0.99	1.89	1	_	4.57
Phenmetrazine	25	mg			2.5		19		-1.85	1.50		-0.20	1.67	2	_	33.37
Vitamin C; ascorbic acid	1000	mg	Capsules	Oral	333	0.01	25		0.28	-1.85		0.92	-1.76	2	<del>-</del>	117.30
																•

the lowest solubility under the conditions listed above. The solubility criteria over the pH range 1-7.5 can create marked differences from compilation to compilation for drugs that are salts. For example, one may find in the package insert for atazanavir sulfate that the drug "is slightly soluble in water (4–5 mg/mL, free base equivalent) with the pH of a saturated solution in water being about 1.9." Reporting this solubility would lead to the assignment of atazanavir sulfate as a class 1 drug in BCS and BDDCS. However, it is known that atazanavir, as for almost all the protease inhibitors, exhibits very poor solubility in solutions at pH above 5.5, although these solubilities are not reported. Therefore, we list atazanavir sulfate as a class 2 drug and no specific solubility is listed in Table II. Another example of a basic drug is imatinib mesylate (and other kinase inhibitors) where the package insert states "Imatinib mesylate is soluble in aqueous buffers ≤pH 5.5 [a published value of 200 mg/mL can be found] but is very slightly soluble to insoluble in neutral/ alkaline aqueous buffers." Therefore, we list this drug in Table II as class 2 with a solubility of 1 mg/mL, determined at pH 7.4. Similar variances can occur for acidic drugs where solubility may be very low at pH 1. This concern that the pH range maybe too restrictive has been addressed (34) and explicated (35) previously for acidic drugs. Individual references are not given for the solubility values because in many cases the values in the tables are the authors' consensus view of the appropriate value based on a number of experimental results as discussed above. This is a technique followed by Dr. Benet when he first introduced the table of pharmacokinetic parameters in Goodman and Gilman and represents a decision of the two senior authors alone in reviewing all of the literature data that they could find. A single solubility value is given in the five tables in milligrams per milliliter.

Figure 3 depicts a box plot of the measured solubility values (representing about 68% of drugs listed in Tables I, II, III, and IV) used for assigning BDDCS classification. Class 2 and 4 drugs are less soluble than class 1 and 3 drugs, but there

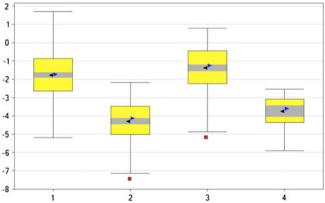


Fig. 3. Box plot of Log10 measured molar solubility values used for the BDDCS classification against BDDCS categories. Arrows pointing left show the mean, arrows pointing right the median; the shaded area indicates the 95% confidence interval, while the box itself is the interquartile range; the horizontal bars indicate the minimum and maximum values; squares are outliers. Class 1,  $-1.79\pm1.27$  (266 drugs); class 2,  $-4.29\pm1.12$  (167); class 3,  $-1.38\pm1.18$  (159); class 4,  $-3.70\pm0.96$  (35)

is a considerable overlap since the highest dose strength also affects the assignment. Further analysis with respect to the *in silico* predicted solubility values is addressed below.

# Percent Excreted Unchanged in the Urine (%Urine)

Although the FDA (4) and EMA (9) guidances list 90% and 85% absorption, respectively, as a cutoff for high permeability, Wu and Benet (1) believed that a 70% cutoff for BDDCS would be sufficient since the purpose of BDDCS was not to provide a regulatory exemption but rather to make a prediction of drug disposition. As noted above, Wu and Benet (1) found that there were very few drugs in which the percent of dose metabolized fell between 30% and 70%. One may be tempted to use the percent urine values in the tables to test this hypothesis, but this would be incorrect since a number of class 3 and class 4 drugs are known to be excreted unchanged in the bile, as are the metabolites of some class 2 and possibly class 1 drugs, depending on the BDDCS class of the metabolite. When a drug is given intravenously, the percent of drug unchanged in the urine is readily obtained. When for a given drug only the oral dosage forms are available, frequently limited human data may be available on a parenteral experimental formulation. In these two previous cases, that is the value listed in Tables I, II, III, and IV. Where only oral human data are available, the authors used their best judgment in correcting the value with a bioavailability parameter. Lowering the cutoff to 70% obviates in most cases any error that would be inherent in classification based on this assumption. However, the criterion for poor metabolism in BDDCS is excretion of unchanged drug both in the urine and in the bile. The extent of biliary excretion of unchanged drug is an experimentally difficult value to obtain in humans for most drugs. But this is the criterion that we have used in the assignment of BDDCS classification for the more than 900 drugs listed in the tables. It will be obvious in reviewing Tables III and IV that a number of class 3 and class 4 compounds show very low values for %Urine. For example, erythromycin is listed in Table III with 4% excreted unchanged in the urine; however, only 15% of an erythromycin dose is metabolized with more than 80% excreted unchanged in the bile. Thus, for the class 1 and 2 drugs in Tables I and II, the low percent urine does reflect fairly accurately the degree of metabolism since for these compounds it is usually the metabolites that are excreted into the bile, not the parent drug. However, for the class 3 and the class 4 compounds, the assignment was not made based only on the percent urine data value in Tables III and IV. The box plot depicted in Fig. 4 reflects these differences between classes 1 and 2 versus classes 3 and 4, with the very wide standard deviations below the mean for classes 3 and 4 reflecting the importance of biliary excretion in these assignments.

As mentioned earlier, Benet *et al.* (2) proposed that  $\geq$ 90% metabolism could be an additional criterion that regulatory agencies may use in confirming that a drug was more than 90% absorbed. In that paper, Benet *et al.* (2) restricted the metabolic processes to those that would only occur following absorption such as cytochrome P450 metabolism or metabolism by phase II enzymes found in the gut or the liver. However, in the present compilation,

the metabolism criterion for BDDCS assignment does not limit the metabolic processes to these enzymes only. In the present tables, when a drug is metabolized 70% or more, it is classified as highly metabolized and if the metabolism is <70% is categorized as poorly metabolized (readers will note in Fig. 4 that five class 1 and 2 drugs show between >30% and  $\leq 40\%$  excreted unchanged. For these compounds, it is the authors' belief that these drugs operate more like the assignment made).

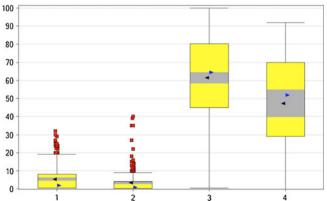
### **Maximum Strength Dose**

For US-approved drugs, the maximum dose strength is taken from the package insert. In a number of cases, we have included drugs in the tables that have been removed from the market and drug products where a package insert was not available. In those cases, the maximum strength dose was selected based on an evaluation of literature data.

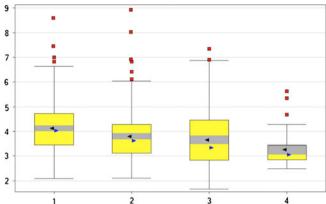
Figure 5 is a box plot of the -Log10 of the maximum strength dose (molar) against BDDCS. It appears that class 4 drugs have the highest dose (molar) compared with other BDDCS classes, whereas class 1 drugs have the lowest strength. This most likely relates to differences in bioavailability, but may also relate to differences in efficacy. The more lipophilic highly metabolized drugs tend to be more active toward wanted and off targets because of a higher capability of nonspecific interactions. Therefore, it is more likely that drugs that are less lipophilic and less metabolized are given at a higher dose since they are probably less potent and since there is less risk of toxicity.

#### **BDDCS Classification and Dose Number**

High *versus* low solubility was determined using the FDA/EMA criteria of the maximum strength dose of the drug at its lowest solubility over the pH range of 1–7.5 being soluble in 250 mL of water at 37°C. The solubility cutoff may be expressed as the dose number, which is calculated as the highest dose strength (milligrams) divided by 250 mL and the lowest solubility (milligrams per milliliter). When the dose number is  $\leq$ 1.0, the drug is considered to have high solubility; when the dose number is >1.0, the drug is considered to have low solubility. Using the solubility (dose number) and the



**Fig. 4.** Box plot of % Urine against BDDCS. Key: as in Fig. 3. Class 1,  $5.3\pm6.8$  (302); class 2,  $3.5\pm6.3$  (228); class 3,  $61.3\pm24.4$  (243); class 4,  $47.8\pm27.1$  (50)



**Fig. 5.** Box plot of the -Log10 of the maximum strength dose (molar) against BDDCS. Key: as in Fig. 3. Class 1, 4.12 $\pm$ 1.01 (288); class 2, 3.79 $\pm$ 0.98 (237); class 3, 3.67 $\pm$ 1.13 (163); class 4, 3.24 $\pm$ 0.69 (43)

percent metabolism criteria discussed above, the BDDCS class was assigned. For non-orally dosed drugs and active metabolites, no dose number is given in the tables, and the BDDCS assignment is based on the best estimate of the relevant solubility as determined by the authors. This opens the possibility of a more refined system, the dose-dependent BDDCS, dBDDCS. Such a system, based on evaluating multiple strength doses, could highlight "class migration," which is likely to occur for some drugs, versus "class propensity." We anticipate that some drugs will migrate to a neighboring class depending on dose strength, whereas most drugs, however, are likely to show preference for one class only. By migrating existing class 4 drugs toward class 3 or class 2 drugs toward class 1, one is likely to obtain improved biopharmaceutical characteristics; thus, FDA approval for novel formulations can be requested using a drug repurposing mechanism (36) under Section 505(b) (2) of the Federal Food, Drugs and Cosmetic Act.

# Class Zero

For a number of drugs, such as amphetamine, changes in urinary pH affect the extent of metabolism. Therefore, it is not possible to assign a BDDCS class. It appears for the 11 drugs listed in Table V that they all are predominantly highly soluble in water and thus would probably be BCS class 1 drugs, or BDDCS class 1 or class 3 depending upon urine pH.

# MLogP and MLogD<sub>7.4</sub>

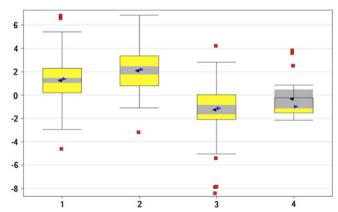
When no active transport processes are involved, pharmaceutical scientists expect lipid/water partition coefficients to be correlated with drug permeability. The Lipinski Rule of Five (37–39) was an attempt to define the upper limits of lipophilicity for developing NMEs that are likely to be orally available. As noted above, Takagi *et al.* (3) evaluated the correlation of measured Log*P* and calculated Log*P* with BCS high *versus* low human jejunal permeability rate compounds, finding that the correlation only held about two thirds of the time. Since there is interest in these parameters and following our guideline of attempting to use measured experimental values when available in making predictions, we have included in Tables I, II, III, IV, and V values for measured

LogP and measured LogD at pH 7.4 when such values are available. Again, individual references for the values are not included. However, in the section below, we will comment on prediction differences and accuracy with respect to *in silico* calculations. Figure 6 is a box plot of the measured LogD values at pH 7.4 against BDDCS assignment.

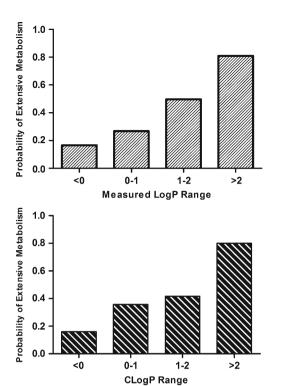
This provides some partial explanation for the food effects mentioned earlier. BDDCS class 2 drugs have high-fat solubility, as illustrated by their higher measured  $LogD_{7.4}$  (Fig. 6), compared with other classes. Under high-fat meal conditions, higher amounts of drug are therefore likely to be solubilized in the intestinal contents and become available to the enterocytes for (passive) absorption. However, we do not see a similar effect for the more hydrophilic, poorly soluble class 4 drugs. Since BDDCS class 1 drugs already are solubilized, they would receive no benefit from increased lipid solubilization.

#### IN SILICO PARAMETERS

As discussed above, BDDCS assignments were based on the measured parameters of extent of metabolism and solubility, although in the latter case, for extremely poorly soluble and very highly soluble compounds, a numerical value is not always available. However, it is also useful to analyze how well or how poorly in silico parameters can predict the BDDCS classification and to use this type of computation to make other predictions. Thus, for each compound in the tables, we also include: the molecular weight of the listed compound; the calculated Log P(CLog P) using the method of Leo (40); the number of hydrogen bond donors (HDo) for the active moiety; the number of hydrogen bond acceptors (HAc) for the active moiety; the polar surface area (PSA) calculated using the method of Clark (41); and the log of the lowest water solubility calculated over the pH range 3-7.5 (minVSLgS; VolSurf+), as proposed by Cruciani et al. (42,43). We also calculated (and list in Supporting Info) the solubility of each drug in its neutral form using Tetko's solubility in water ( $TLogS_w$ ) prediction using ALOGPS 2.1 [see (44)]. We hope that this parameter compilation and discussion will be valuable to investigators trying to develop better prediction methods.



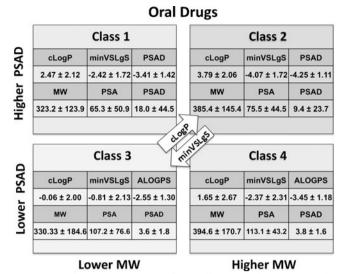
**Fig. 6.** Box plot of MLog $D_{7.4}$  values against BDDCS. MLog $D_{7.4}$  for class 2, 2.09±1.91 (121) is the highest among all classes. Class 1, 1.25±1.68 (219); class 3,  $-1.26\pm2.19$  (110); and class 4  $-0.42\pm1.77$  (20). Key: as in Fig. 3



**Fig. 7.** Probability of extensive metabolism in different measured Log*P* and CLog*P* ranges. The plot show the probability of being extensively metabolized in a specific Log*P* (CLog*P*) range if a set with equal number of extensively and poorly metabolized drugs is considered

# Solubility and Dose Number

Both in silico solubility predictions correlate poorly with the measured values, although the VolSurf+ correlation  $(r^2=0.33)$  is somewhat better than the ALOGPS solubility  $(r^2=0.24)$ . However, even with these poor correlations, the predicted dose numbers (cDose Number) with the calculated VolSurf+ solubility were reasonable for class 1, 2, and 3 drugs. Results for the VolSurf+ (and ALOGPS) solubilities were as follows: Class 1 drugs are classified with an accuracy of 78.6% (54.3%), class 2 with an accuracy of 76.9% (84.3%), and class 3 with accuracy of 89.4% (65.7%). The predictive accuracy for class 4 drugs was very poor (39.5%) for the VolSurf+ prediction, but reasonable when the pH effect is not considered (79.1% when using ALOGPS). Upon further examination, 17 of these drugs are well predicted by cDose Number. These 17 drugs have a "class2-like" CLogP profile (average CLogP=3.76). The deviation between measured LogS and minVSLgS is on average 0.66 for these drugs. For the 26 class 4 drugs that are poorly predicted, the average CLogP is 0.27, and the average measured Log P is 0.11. The deviation between measured LogS and minVSLgS is on average around 3.00. A number of these 26 drugs are likely to exist as zwitterions at pH below 7.5; several among them are fluoroquinolone antibiotics. In particular, for enoxacin, ciprofloxacin, norfloxacin, and cinoxacin, solubility prediction based on melting point and LogD failed, probably due to self-

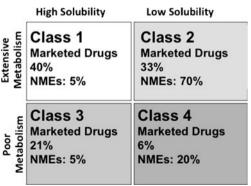


**Fig. 8.** *In silico* parameters for 698 orally dosed drugs. For each, calculated property average value and standard deviation are shown. PSAD (polar surface area density) = MW/PSA

association (45). In support of this hypothesis, Ross and Riley (45) noted that the solubility of these drugs at the same pH increases with temperature. The lowest measured solubility data for class 4 drugs are observed when these molecules behave as zwitterions (pH 7). Therefore, the reason for class 4 assignment prediction error is likely to relate to self-association for drugs that behave as zwitterions. This is less likely to play a role in the digestive tract since varying pH conditions, the presence of counterions, and surfactants (e.g., bile acids) might diminish the importance of self-association. Despite the relatively high success of the ALOGPS method for class 4, solubility predictions for these zwitterions in neutral form, which essentially ignores the pH effect, should be used with caution.

# **Partition Coefficient and Extent of Metabolism**

As discussed above, a high extent of metabolism is expected for high LogP compounds and *vice versa*. In contrast to the predicted *versus* measured solubility values discussed above, the correlation between MLogP versus CLogP is quite good ( $r^2$ =0.83). Thus, it might be expected that both MLogP and CLogP would reasonably well predict



**Fig. 9.** BDDCS distribution of 698 marketed, immediate release, orally dosed drugs in the present table *versus* the predicted distribution of small molecule NMEs being developed by the industry

class 1 and 2 drugs *versus* class 3 and 4 drugs, with the results shown in Fig. 7. For either measured or calculated Log*P*>2, the probability of extensive metabolism is 80.1% and 79.3%, respectively. For Log*P* values<0, the probability of poor metabolism is 83.5% for MLog*P* and 83.9% for CLog*P*. However, when Log*P* values range from 0 to 2 (31.7% of drugs for MLog*P* and 27.5% of drugs for CLog*P*), the probability assignments are not very good, with MLog*P* doing somewhat better for extensively metabolized drugs and CLog*P* doing somewhat better for poorly metabolized drugs (Fig. 7). As with solubility predictions, the poorest probability of extent of metabolism was found for class 4 drugs (data not shown).

#### Summary of In Silico Parameters for Orally Dosed Drugs

Figure 8 highlights the in silico parameters for 698 orally dosed drugs. As expected, CLogP is higher and PSA lower for extensively metabolized (class 1 and 2) drugs. However, an unexpected finding is the very marked similarity for solubility and (somewhat less) for CLogP predictions for class 1 and 4 drugs. This reflects the inherent confounding aspects of the dose number calculation used in both BDDCS and BCS, as discussed earlier in this manuscript and by Rinaki et al. (46), and the generally poor predictability for class 4 drugs. We also calculated the polar surface area density (PSAD = MW/ PSA) and are struck by the empirical observation of the similarity and low coefficient of variation for PSAD (Fig. 8) for the class 3 and class 4 poorly metabolized drugs. As noted by the arrows in Fig. 8, class 2 and class 3 drugs exhibit the extremes for the in silico measures of solubility and partition coefficient.

#### **OTHER COMMENTS**

The listing of drugs in the five tables is essentially inclusive of small molecules only as most peptide and protein drugs were not included in the compilation. However, there are exceptions, such as the inclusion of exenatide and liraglutide. We note that all the drugs listed in the 2011 Goodman and Gilman compilation (47) are included in the present table except, for streptokinase and interferon alpha and beta. Since many drugs on the market are in fact prodrugs, when data were available, our listing includes the parameters for some of the better characterized active metabolites, even when the metabolite itself was not a commercially available product and thus the maximum strength dose does not exist. For example, see flurazepam and desalkylflurazepam (both Table I) as well as losartan (Table II) and EXP3174 (Table III). In those cases, the BDDCS classification was made based on the dose of the parent drug, the known fraction conversion to the active species, and the solubility of the active metabolite. The finding of Wu and Benet (1) that very few drugs fall in the 30-70% metabolism range does not mean that there are no such drugs. For example, in Table III, moxifloxacin HCl has been shown to be metabolized 52% (14% as a glucuronide and 38% as a sulfate conjugate) while 45% is excreted unchanged (25% in the feces and 20% in the urine). Similarly, palonosetron HCl (Table III) is excreted 40% unchanged and 50% via CYP enzymes, while phenazopyridine (Table IV) is excreted 41% unchanged and 49% metabolized.

# WHERE CAN ADDITIONAL INFORMATION BE FOUND?

Oprea and co-workers (48,49) have indexed the information for over 1,260 drugs in WOMBAT-PK, a database that includes pharmacokinetic parameters (such as those indexed in Goodman-Gilman), physicochemical properties, and target bioactivities (see http://www.sunset molecular.com/index.php?option=com\_content&view= article&id=16&Itemid=11). WOMBAT-PK contains additional information related to the BDDCS entries described in the tables. However, all pertinent data used to categorize individual drugs for the BDDCS classification are provided here. Further information about drugs can also be found in public resources as follows: Chemical information, physicochemical properties, and bioactivities are compiled in PubChem (http:// pubchem.ncbi.nlm.nih.gov/), ChEMBL (https://www.ebi.ac.uk/ chembl/), and ChemSpider (http://www.chemspider.com/). Detailed drug information can be retrieved at DailyMed (http:// dailymed.nlm.nih.gov/dailymed/about.cfm), DrugBank (http:// drugbank.ca/), and European Medicines Agency (http://www. ema.europa.eu/).

Information as found in the five tables, together with the physicochemical properties and target bioactivities, can serve as a source for investigating and predicting the characteristics of NMEs in drug development. However, we add a further caution concerning in silico methodologies that may be developed based on our compilation of data for drugs on the market at some time. This is illustrated in Fig. 9 where we have compiled the BDDCS classification of the orally dosed drugs in our tables. In Fig. 9, we compare this distribution of commercially available drugs with our predictions of the distribution of total NMEs that have at some time been dosed to humans, particularly in the last decade. Based on our prior evaluation of high-activity medicinal chemistry compounds (50), we estimate that of the drug candidates being investigated by the industry, up to 70% are large molecular weight, lipophilic, poorly soluble class 2 compounds, another 20% are not only poorly soluble but also poorly permeable class 4 compounds, while only 10% are high-soluble class 1 and class 3 compounds. Thus, when in silico methodologies are developed and tested on commercially available drugs, it is important to remember that 40% of drugs are BDDCS class 1, and as predicted in Fig. 2, these compounds will not exhibit disposition characteristics affected by transporters in the gut and liver, whereas up to 95% of NMEs are likely to be affected. Therefore, in testing such new methodologies, it is critical that both the training and test compound sets have a strong representation of compounds other than BDDCS class 1.

### **ACKNOWLEDGMENTS**

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**Supporting Info Available** An excel file is available as supporting info containing the following data for the 927 drugs dataset: name, BDDCS class, max dose strength value, max dose strength unit, formulation, route, measured solubility, dose number, % excreted unchanged in urine, MW drug, MW solution, pDose, measured LogS molar, measured LogP, measured LogD<sub>7.4</sub>, ALOGPS 2.1 solubility, cDose Number (ALOGPS based), minVSLgS, cDose Number (minVSLgS based), cLogP, HBA,HBD, PSA, and violations to Rules of Five. Definitions for the terms used only in the supporting info file may be found at the end of that data set. In addition, box plots of minVSLgS, ALOGPS 2.1 solubility, MLogP, cLogP, MW, PSA parameters against BDDCS are provided.

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