#### 2019 KSCPT Spring Meeting Pre-course Workshop

Theories and Practices for Human Pharmacokinetics Prediction Using Non-clinical Information





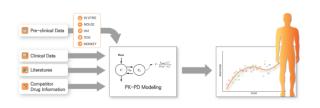
## 주요 *in vivo* 정보와 이를 활용한 인간 약동학 예측 이론

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Q-fitter

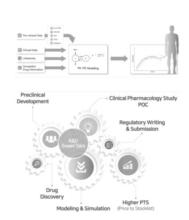
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- 1. Dallphin 에서 사용하는 in vivo 정보
- 2. In vivo 정보를 통한 PK parameter 예측
- Basic info "fraction unbound"
- Distribution "allometry"
- Elimination "human CL"
- 3. Allometry
- General allometric approaches (V, CL)
- Dallphin allometric approach (V)
- 4. Examples
- Various allometries (V, CL)
- Dallphin CL vs. allometry CL predictions



#### In vivo information in Dallphin

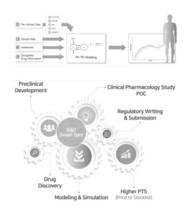
# What is Dallphin-AtoM

- **D**rugs with
- ALLometry and
- PHysiology
- INside
- Animal to
- Hu**M**an



PBPK software for human PK parameters prediction

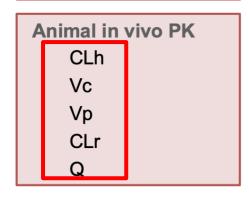
using physicochemical properties, in vitro and animal PK data

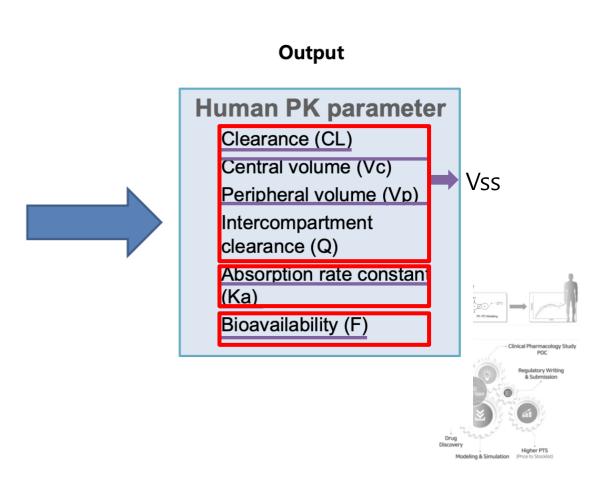


#### **Dallphin: Inputs & Outputs**

#### Input

# In vitro data LogP Cb/Cp fu pKa Papp CLmet





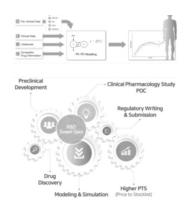
#### Major PK parameters Dallphin predicts

- [Absorption] Ka
- [Distribution] Vd (Vss, Vc, Vp), and Q
- [Elimination] CL
- [Absorption] F (if drug follows first-order kinetics)

#### In vivo data provides…

- Allometric methods to predict Vd, Q
- ✓ One of the methods to predict CLh & Fh (ex vivb data)
- ✓ Two methods to predict CLr





## Dallphin methods: Clearance & F

$$CL_{hepatic} = \frac{Q_H \cdot fu \cdot CLint}{Q_H + fu \cdot CLint}$$

#### CL total = CL hepatic + CL renal

#### Microsome

- 1. MPPGL
- 2. Rat IVIV ratio
- 3. PS
- 4. PS(logD)

#### **Hepatocyte**

1. Human hepatocyte

 $F total = Fh \times Fa$ 

#### Microsome

- 1. MPPGL (CLint)
- 2. Rat IVIV ratio
- 3. PS
- 4. PS(logD)

#### **Hepatocyte**

1. Human hepatocyte

- 1. CL renal\_rat
- 2. CL renal\_dog
- 3. CL renal\_user input

$$CLr_{Human} = CLr_{Species} imes rac{fu_{Human}}{fu_{Species}} imes rac{KBF_{Human}}{KBF_{Species}}$$

$$Fh = 1 - \frac{CL_{hepatic}}{Q_H}$$

- 1. Fa\_Caco
- 2. Fa\_PSA

CLint: intrinsic metabolic or hepatic clearance

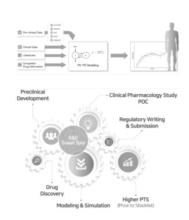
Fh: hepatic availability

Fa: fraction absorbed from intestinal tract

PS: permeability surface area coefficient

Q<sub>H</sub>: hepatic blood flow

PSA: dynamic polar molecular surface area



#### Dallphin methods: Vd & Q

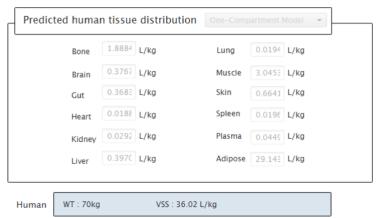
#### Allometric approaches

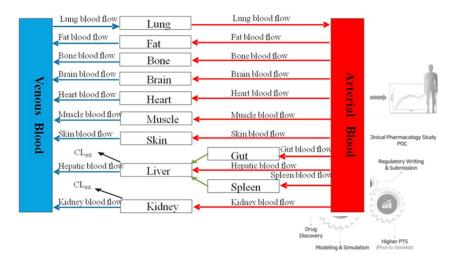
- Vss: 1-compartment model
- 2. Vss, Vc, Vp, Q: 2-compartment model

#### PBPK approach<sup>12,13</sup>

1. Vss: 1-compartment model (Vc:well-perfused organs)

PBPK approach





#### 1. Dallphin 에서 사용하는 in vivo 정보

- [Basic info] Plasma protein binding (ex-vivo data)
- Rat fraction unbound => human hepatic CL(2), hepatic availability(2), human renal CL
- Dog fraction unbound => human renal CL
- Human fraction unbound =  $\rangle$  human hepatic CL (1)-(4), hepatic availability (1)-(4)
- Blood to plasma ratio
- [Distribution] Allometric approaches: Animal IV PK parameters
- Weight, Q, Volume of distributions (Vss, Vc, Vp)
- [Elimination] Microsome:
- Rat CLint, initial, rat hepatic CL (observed) = human hepatic CL(2), hepatic availability(2)

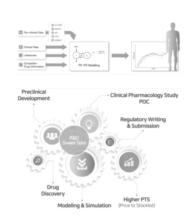
#### 2. Input parameter for human PK prediction<sup>1,2</sup>

- [Basic info] Plasma protein binding
- 1. fu\_Rat -> CL int, rat(in vivo observed) -> CL int\_rat\_iviv\_ratio
  - => human hepatic CL CLh\_fromRativivc
  - => human bioavailability F(CLh\_fromRativivc)
  - => human renal CL CLr (rat to human prediction)

$$CLh\_fromRativivc = \frac{Q_{\text{H,B}} \cdot fu_{\text{B}} \cdot \text{CLu}_{\text{int,H}}}{Q_{\text{H,B}} + fu_{\text{B}} \cdot \text{CLu}_{\text{int,H}}} \times \underbrace{CLint\_rat, IVIV\ ratio}_{\text{CLint\_rat, IVIV\ ratio}}$$

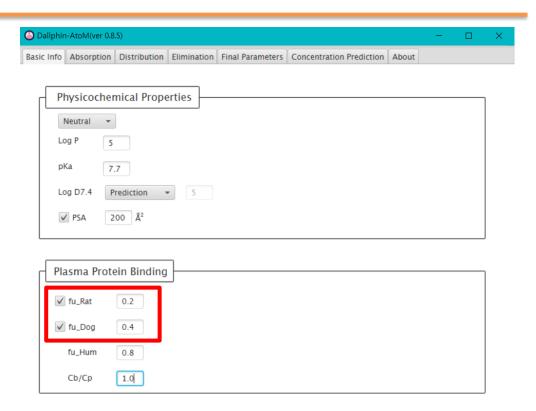
2. fu\_Dog => human renal CL CLr (dog to human prediction)

$$CLr_{Human} = CLr_{Species} \times \frac{fu_{Human}}{fu_{Species}} \times \frac{KBF_{Human}}{KBF_{Species}}$$



## [Basic info]

- Plasma protein binding
- fu\_Rat
- fu\_Dog



#### CL renal<sup>2</sup>

- Three animal scaling techniques for the prediction of human CL renal:
- 1. Direct correlations between CLr in man and each of the two main preclinical species (rat and dog)

$$CLr_{Human} = CLr_{Species} \times \frac{fu_{Human}}{fu_{Species}} \times \frac{KBF_{Human}}{KBF_{Species}}$$

2. Simple allometry  $CLr = a(W)^b$ 

$$CLr_{Predicted\ total} = CLr_{Predicted\ unbound} \times fu_{Human}$$

3. Mahmood's renal clearance scaling method

$$SSF = \frac{(Glomerular\ filtration \times kidney\ blood\ flow)}{(body\ weight \times kidney\ weight)}$$

$$Correction factor = \frac{SSF_{Species}}{SSF_{Human}}$$

$$\frac{SSF_{Human}}{SSF_{Human}}$$
Higher PTS

#### CL renal<sup>2</sup>

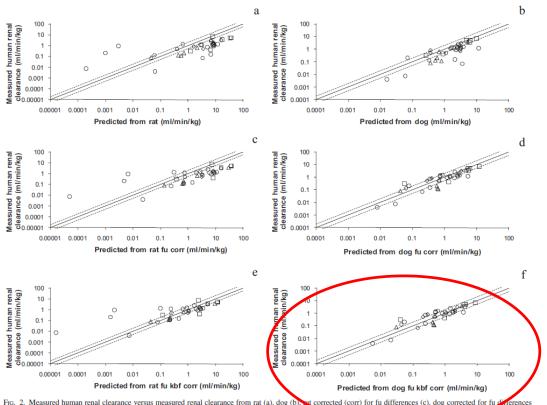
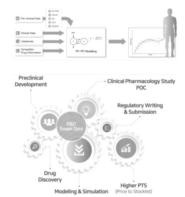


Fig. 2. Measured human renal clearance versus measured renal clearance from rat (a), dog (b), at corrected (corr) for fu differences (c), dog corrected for fu differences (d), rat corrected for both KBF and fu differences (e), and dog corrected for both KBF and fu differences (f). Circles, acids; squares, bases; triangles, neurals; diamonds, ratiferious

 Most accurate prediction: 1. Direct correlation with the dog renal clearance with PPB and KBF corrections (R<sup>2</sup> = 0.84)



#### 2. Input parameter for human PK prediction<sup>1,2</sup>

- [Elimination] Microsome
- CL int\_ini Rat -> CL int,rat (in vitro)
  CLh\_ratinvivo -> CL int,rat (in vivo)

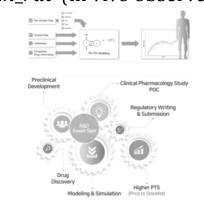
  => CLint\_rat,iviv ratio
- - => human hepatic CL CLh\_fromRativivc
  - => human bioavailability Fh (CLh\_fromRativivc)

$$CLh\_fromRativivc = \frac{Q_{\text{H,B}} \cdot fu_{\text{B}} \cdot \text{CLu}_{\text{int,H}}}{Q_{\text{H,B}} + fu_{\text{B}} \cdot \text{CLu}_{\text{int,H}}} \times CLint\_rat, IVIV \ ratio$$

$$CLint\_rat, IVIV \ ratio = \frac{CLint\_rat \ (in \ vivo \ observed)}{CLint\_rat \ (in \ vitro \ predicted)} < - CLh\_rat \ (in \ vivo \ observed)$$

$$CLh\_rat(in\ vivo\ observed) = \frac{Q_{H\_rat} \cdot fu_{rat} \cdot CLint_{rat}}{Q_{H\_rat} + fu_{rat} \cdot CLint_{rat}}$$

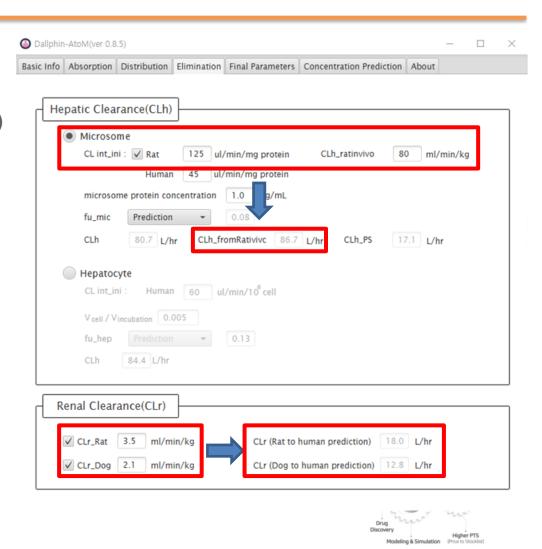
$$CL_{int,rat} \rightarrow CL_{int,ini,rat}$$
  $MPPGLrat \cdot Liver, wt_rat$ 



#### [Elimination]

- Hepatic Clearance (CLh)
   Microsome
- -CL int\_ini Rat (ul/min/mg protein)
- -CLh\_ratinvivo (ml/min/kg)

- Renal Clearance (CLr)
- -CLr\_Rat (ml/min/kg)
- -CLr\_Dog (ml/min/kg)

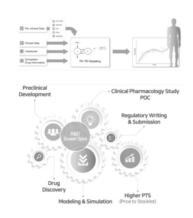


## 2. Input parameter for human PK prediction [Distribution]

- Mouse, rat, monkey, dog 총 4종의 정보 입력 가능
- 각종별 Weight
- Model structure 1 compartment vs. 2 compartment
- Model 을 통해 구한 각 종 별 Vss 또는 Q, Vss (Vc, Vp)
- [Prediction] 을 통해 Allometric scaling 수행 =>
   70 kg-human Q, Vc, Vp, Vss 구함

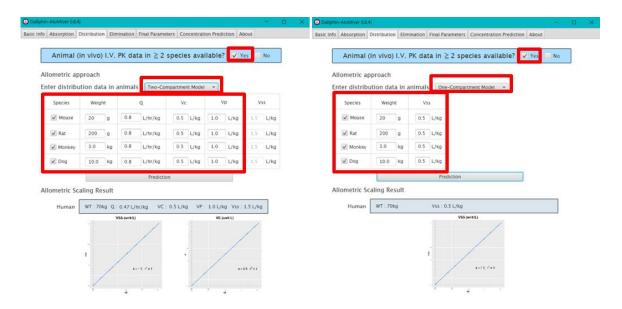
• Vc 
$$\Longrightarrow$$
 Ka  $k_{\mathrm{a,eq}} = \frac{P_{\mathrm{m}}S}{V_{\mathrm{c}}}$ 

 $P_{\rm m}$ : drug permeability across intestinal mucosa (Caco-2 Papp) S: absorptive surface area



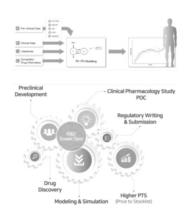
#### [Distribution]

- Animal data available? YES
- One-compartment model
- Two-compartment model
- [Prediction]
- Allometric scaling result



#### Volume of distribution

- Allometric scaling as choice of method to predict human Vd
- Plasma protein binding should be considered<sup>3</sup>
- Multiple methods available for prediction of volume of distribution<sup>3,4,6</sup>
  - ✓ Simple allometric scaling
  - ✓ Allometry with correction factors
  - ✓ Average fraction unbound tissue
  - ✓ Proportionality (dog-human)
  - ✓ QSAR



#### Volume of distribution<sup>3,4</sup>

- Simple allometric scaling
- Allometry with correction factors\*
- Average fraction unbound tissue\*
- Proportionality (dog-human)\*
- QSAR

\*Pertains plasma protein binding data as an essential elem

Table 4. Methods for prediction of volume of distribution (Va).

Method	Equation		Comment *	Ref.
Simple AS	$V = a(W)^b$	(93)	The prediction of Va is well predicted equally with using two species in AS	[108]
Average fraction unbound in tissue <sup>1</sup>	$V = V_{Plasma} (1 + R_{E/I}) + f_u \cdot V_P (\frac{V_E}{V_p} - \frac{V_R \cdot f_u}{\alpha_R})$	(94)	It is useful to analyze and predict an alteration in apparent V <sub>d</sub> then identify the cause of alteration.  It is particularly useful for drugs with low V <sub>d</sub> (<15 L or 0.2 L/kg)	[119]
nent Proportionality	$V_{human,pred} = \frac{V_{animal} \cdot f_{u,human}}{f_{u,animal}}$	(95)	It is assumed that the volume of distribution at a steady state of free drug is identical between species	[120]
One species AS	$V_{\rm human,pred} = -0.35 V_{\rm rat}^{0.91}$	(96)	Statistical modeling is applied in this model	[121]
QSAR	$\begin{split} \log(\text{Vd}_{ss,\text{human}}) &= 0.1859 \\ & \cdot \log(\text{Vd}_{ss,\text{rat}}) \times \log(\text{Vd}_{ss,\text{rat}}) \\ & - 0.3887 \\ & \cdot \log(\text{Vd}_{ss,\text{rat}}) \times \log(\text{MW}) \\ & + 0.3089 \\ & \cdot \log(\text{Vd}_{ss,\text{dog}}) \times \log(\text{MW}) \\ & + 0.003306 \cdot \log(\text{MW}) \times c \log P \\ & + 1.71 \end{split}$	(97)	Vdss, human (mL/kg) is predicted by QSAR modeling with quadratic term descriptors	[122]

<sup>\*</sup> Each comment corresponds to all the equations within each major section of the table defined by horizontal lines.

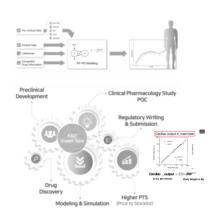
 $<sup>^1</sup>$  Where  $V_d$  is apparent volume of distribution,  $V_{Plasma}$  is plasma volume,  $V_E$  is extracellular space minus the plasma,  $V_R$  is physical volume into which the drug distributes minus the extracellular space,  $f_u$  is the fraction unbound in plasma, and  $R_{E/l}$  is the ratio of distributed albumin in the extravascular space to that in the intravascular space. It is 1.4.  $\alpha_R$  equals to  $C_u/C_R$  where  $C_u$  is unbound drug concentration at distribution equilibrium and  $C_R$  is concentration in  $V_R$ .

## 3. Allometry<sup>5,6</sup>

- "Study of size and its consequences"
- Based on the assumption that there are <u>anatomical</u>, <u>physiological</u>, <u>and biochemical</u> <u>similarities</u> among animals which can be described by simple mathematical models
- Choice of method for projection to human PK
- Possible with in vivo IV PK data from 2 species, but ≥ 3 species provide more accurate prediction
- Plasma protein binding data in two or more species and human should be emphasized
- Completed after each species modeling to predict human PK parameters, which is used for simulations
- Different allometric approaches available

For which PK parameter prediction?

- Human Vd
- Human CL



## General allometric approaches<sup>3,4,5</sup>

- Simple allometry  $Y = a(BW)^b$   $log Y = log(a) + b \cdot log(BW)$
- Allometry with standard correction factors for Vd PPB (plasma protein binding)

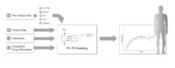
$$\log(VD) = \log(a) + b \cdot \log(BW)$$

$$VD_{\text{free}} = \frac{VD_{\text{total}}}{f_{\text{total}}}$$

Allometry with standard correction factors for CL – MPL (product of maximum life-span), brain weight

Clearance = 
$$aBW^b$$

Clearance 
$$\times$$
 BrainWeigh  $t = aBW^b$ 



/....

cf) Correction factors for renally/biliary excreted drugs3 - GFR/bile flow.

$$CI \times Bile \ \_flow = aBW^B$$

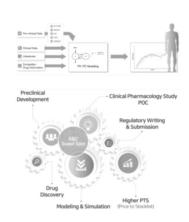
Discovery

Modeling & Simulation

$$CI \times UDPGT = aBW^b$$

## Different allometric approaches for CL<sup>10</sup>

- Simple allometry
- Rule of exponents
- Correction factor MLP, brain weight
- Two-term method
- Multiexponential
- Normalized



## Different allometric approaches for CL<sup>4</sup>

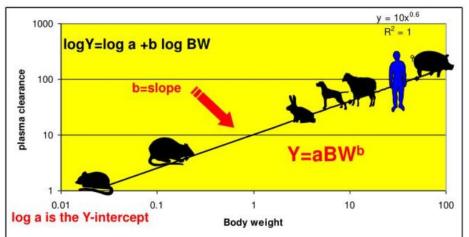
Table 3. Methods for prediction of clearance (CL) using allometric scaling (AS).

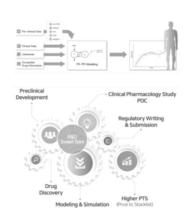
Method	Equation		Comments *	Ref.				The exponent b is a	
Simple AS	$CL = a(W)^b$	(74)	Select a proper equation by the rule of exponent		One species AS	$CL_{human} = CL_{animal} \cdot (\frac{W_{human}}{W_{animal}})^{b}$		constant 0.75, which is physiologically relevant value	[94,95]
AS with MLP <sup>1</sup>	$CL \cdot MLP = a(W)^b$	(75)	(ROE) W and BW represent	-				(e.g., blood flow, filtration, etc.)	
AS with BW	$CL \cdot BW = a(W)^b$	(76)	body and brain weight, respectively	[89]		$CL_{pred} = 0.152 \cdot CL_{rat} \cdot (\frac{W_{human}}{W_{rat}})$		Prodict the CL of	
	If the exponent is 0.55 to 0.7, then use the simple AS, Equation (74)	•		•	One species AS	$CL_{pred} = 0.41 \cdot CL_{dog} \cdot (\frac{W_{human}}{W_{dog}})$ W.		Predict the CL of bound drug	
Rule of exponent	If the exponent is 0.71 to 1, then use the MLP, Equation (75)	•		[90]		$CL_{pred} = 0.407 \cdot CL_{monkey} \cdot (\frac{W_{human}}{W_{monkey}})$	(83)		[90]
	If the exponent is more than 1, then use the BW, Equation (76)	•			Two species AS	$CL_{pred} = a_{rat-dog} \cdot W_{human}^{0.628}$	(84)	Predict the CL of bound drug	
	then use the BW, Equation (70)	•				$CL_{pred} = a_{rat-monkey} \cdot W_{human}^{0.650}$	(85)		
Two-term method	$CL = \theta(W)^a \cdot (BW)^b$	(77)	θ is a constant, which is determined by multiple regression analysis	[91]	Hepatic liver method	$CL_{pred} = CL_{animal} \cdot (\frac{Q_{H,human}}{Q_{H,animal}})$	(86)		[96]
Multiexponential	$CL_{human} = aW^b + \left[ \left( \frac{1 - \frac{3}{2}b}{1 - \frac{1}{2}b} \right) \right] aW^{0.9}$	(78)	The unit of CL is mL/min	[92]	FCIM <sup>2</sup>	$CL = 33.35 \times (\frac{a}{Rf_u})^{0.77}$	(87)	Rfu is the fu ratio between rats and humans and a is the coefficient form	[97]
Normalized AS	$CL_{animal} \frac{CL_{int,human}}{CL_{int,animal}} = a(W)^b$	(79)	CL <sub>H</sub> refers the unbound CL <sub>H</sub> in microsomes or hepatocytes in species	[93]				AS The unit of CL is mL/min	
	шқашпа		and humans		QSAR <sup>3</sup>	$\begin{split} Log CL_{pred} &= 0.433 \cdot log (CL_{rat}) \\ &+ 1.0 \cdot log (CL_{dog}) \\ &- 0.00627 \cdot MW + 0.189 \cdot Ha \\ &- 0.00111 \cdot log (CL_{dog}) \cdot MW \\ &+ 0.0000144 \cdot MW^2 \\ &- 0.0004 \cdot MW \cdot Ha - 0.707 \end{split}$	(88)	The unit of	The unit of observed and (199) profested oral CL. value in Mininkg
								X log(Cl <sub>20000000</sub> )   X log(Cl <sub>2000000000000000000000000000000000000</sub>	

## Simple allometry<sup>5</sup>

- $Y = a(BW)^b$
- Log-log transformation
- Dallphin's choice for Vd (exponents fixed)
- Easily done with Excel linear regression
- When a midpoint species (e.g. dog) is the source of the error, the change is primarily in the intercept rather than the slope
- Fixed exponents...

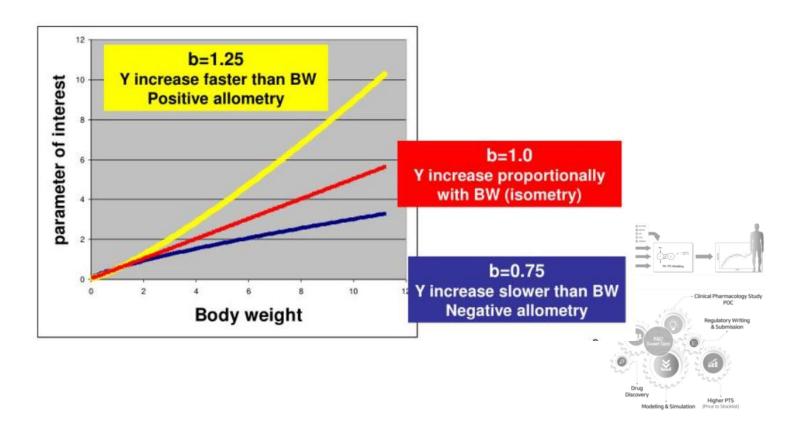
# Simple allometry: the log-log transformation





#### The scaling exponents

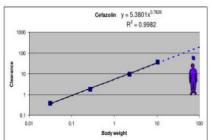
- $Y = a(BW)^b$
- Scaling exponent (b) (i.e. the slope) defines the type of scaling relationship

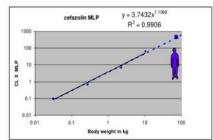


#### Allometry with correction factors for CL

- Simple allometry vs. corrected allometry
- The rule of exponents provides an idea of which standard correction factor to select<sup>7,8</sup>

# Simple vs. corrected allometry (MLP): Cefazolin clearance in man





Simple allometry
Predicted: 141 mL/min
Actual: 61 mL/min
Error: 131%

Allometry with MLP as a correcting factor Predicted: 50.55mL/min Actual: 61mL/min Error:17.1%

# The rule of exponents to predict human CL

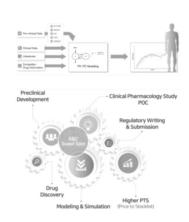
- 0.55 ≤ b <0.71 : no correction factor is necessary
- 2. 0.71 ≤ b <1.00 MLP should be incorporated into scaling method
- B>1.00 Brain weight should be incorporated into the scaling method

Methods	% Mean absolute error (MAE)
Simple allometry	106
CL x MLP	40
CL x brain Weight	49
Rule of exponents	25

#### How to use Dallphin allometric approach?

- 각 종별 PK modeling\*을 선행적으로 수행해야함
- Model structures: 기본 1-comp or 2-compartment model
- 모든 종에서 동일한 model structure 를 사용

- \*PK modeling: General workflow
- 1. Model structure 정하기
- 2. Model optimization
- 3. Model diagnosis GOF, individual plots
- 4. Model validation VPC, (bootstrap for human data)
- 5. PK parameter estimation & extrapolation



## Dallphin allometric approach (Vd, Q)

For 2 compartment model:

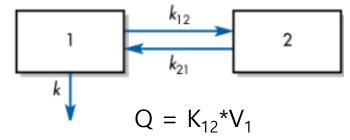
$$Vss = Vc + Vp, Q$$

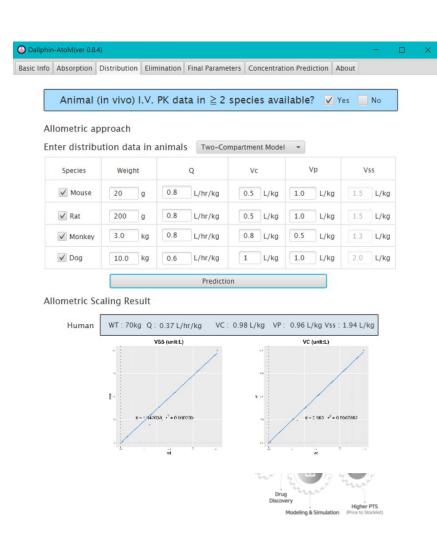
Exponents fixed to 1 and 0.75

$$V = a(WT)^1$$

$$Q = a'(WT)^{0.75}$$

Two-compartment open model, IV injection.



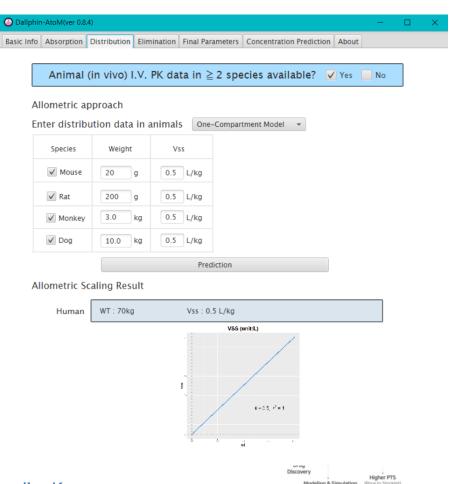


## Dallphin allometric approach (Vd, Q)

- For 1 compartment model:
   Vss only (Q, Vc, Vp)
- Exponents fixed to 1
   V = a(WT)<sup>1</sup>
   Q = a'(WT)<sup>0.75</sup>

One-compartment open model, IV injection.





\*Note: when using 1-compartment model, in order to predict Ka,

Vss was used instead of Vc (as in 2-compartment model)<sup>13</sup>,

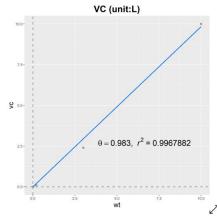
2019 KSCPT Spring Meeting Pre-course Workshop
Theories and Practices for Human Pharmacokinetics Prediction Using Non-clinical Information which may provide potential discrepancy in predicting human Ka.

#### Dallphin's allometric approach example (Vd)

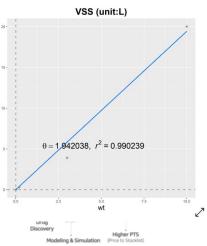
- Excel 데이터분석의 회귀분석과 같은 결과
- Natural scale 그래프로 제시, 상수는 0 을 사용 ((0,0) 을 지나가는 직선)
- $Vc = 0.9833(WT) (R^2 = 0.9967), Vss = 1.9420(WT) (R^2 = 0.9902)$
- 다음 버전에는 scaling exponent 를 예측하도록 update 될 예정





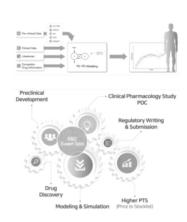






#### 4. Examples

- 1. Simple allometry using monkey data
- 2. Simple allometry using 4 species data (mouse, rat, monkey, dog)
- 3. Allometry with correction factor (brain weight)
- 4. Modified allometry with correction factor



## Simple allometry example (1)

- 실제 수행된 모델링 프로젝트에서의 simple allometry
- Scaling 3-kg monkey to 70-kg human for mAb<sup>9</sup>
- Scaling CL (non-specific CL), Vc, Vp, Q, and Vmax, Km (target-specific CL)

	monkey	Unit	x 3 kg monkey	Unit	Human	allometry						
CL		L/h/kg		l/h		•CLh = CLm*(WTh/WTm)^0.85						
V1		l/kg		I		•V1 = V1m*(WTh/WTm)^1						
V2		l/kg		I		•V2 = V2m*(WTh/WTm)^1						
Q		l/h/kg		l/h		•Q h = CLm*(WTh/WTm)^0.85						
Vmax		mg/h/kg		mg/h		•Vmax = Vmaxmm*(WTh/WTm)^0.8						
Km		mg/l		mg/l		•Km	그대로	-				

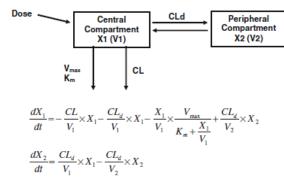


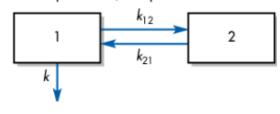
Fig. 1 Two-compartment nonlinear PK model



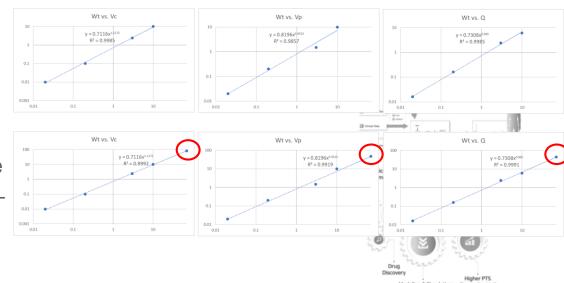
## Simple allometry example (2)

		kg	Vss (L/kg)	vc (L/kg)	vc (L)	vp (L/kg)	vp (L)	Q (L/h/kg)	Q(L/h)
		0			0		0		0
	mouse	0.02	1.5	0.5	0.01	1	0.02	0.8	0.016
	rat	0.2	1.5	0.5	0.1	1	0.2	0.8	0.16
	monkey	3	1.3	0.8	2.4	0.5	1.5	0.8	2.4
	dog	10	2	1	10	1	10	0.6	6
ехр		70	1.84	1.17	81.96	0.67	46.69	0.63	44.09
dallphine			1.94	0.98		0.96		0.37	

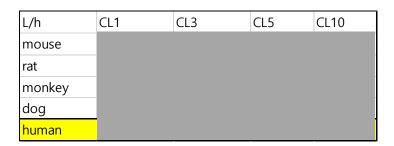
Two-compartment open model, IV injection.

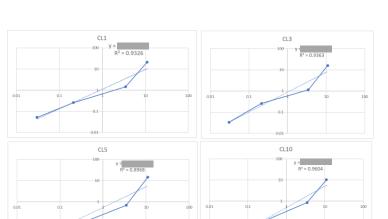


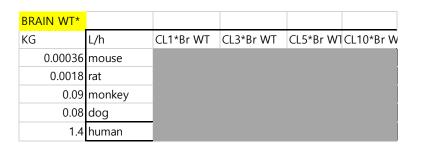
- 4 Species PK data
- Each species PK parameters estimated from 2-compartment model
- Vd = a(WT)b, Q = a(WT)b
- a, b estimated from regression line
- Extrapolation to predict PK in a 70kg human

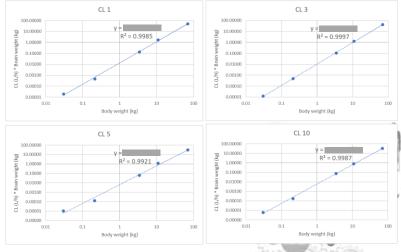


## Allometry with correction factor example (3)









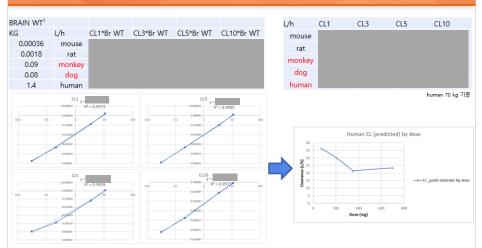
•  $CL = a(BW)^b$  vs.  $CL \times Brain\ Weight = a(BW)^b$ 

## Modified allometry with correction factor example (4)

- 실제 수행된 모델링 프로젝트에서의 modified allometry
- Brain weight 를 correction factor 로 사용하여 human CL 예측 후, 용량에 따른 CL 변화를 수식으로 설명함

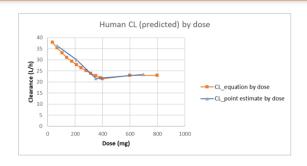
 $CL \times Brain\ weight = a \cdot f(Dose) \cdot (BW)^b$ 

#### CL: allometry with standard correction factor (brain weight) (1)



- Brain weight 을 standard correction factor로 사용하여 CL 에 대해 각각의 용량 (1, 3, 5, 10 mg/kg)에 따른 interspecies scaling (모든 용량군의 R²~0.99) 을 수행하여 CL 를 구함 (CL\_point estimate by dose)
- Clearance x BrainWeight = aBW<sup>b</sup>

#### CL: allometry with standard correction factor (brain weight) (2)



- 앞서 Mouse 에서 얻은 용량에 따른 CL 수식을 기반으로 이를 interspecies scaling 에 적용함, 400 mg 이하에서 수식을 적용하였으며, 400 mg 초과시 CL 는 일정하다고 가정함 --400 mg 이하: CL\*BrainWeight = a\*(CLmax\*(1-DOSE/(DOSE+CL50)))\*BW<sup>b</sup> (CLmax= □ CL50=□ a=□ □ b = 1 \*상수 a 와 b 는 모델링을 통해 산출한 값임)
- (CLmax= CL50=■ a= b = 1 \*상수 a 와 b 는 모델링을 통해 산출한 값임) -400 mg 초과: CL 는 용량에 따라 일정하다고 가정함
- 따라서, 용량에 따른 CL 변화를 BW 에 따라 나타낼 수 있으며, 용량과 BW 정보가 있다면 이젠 CL 산출이 가능해짐
- 이를 기반으로 70kg 사람에서의 CL 를 산출한 결과는 위와 같음(CL\_equation by dose),
   이를 앞의 각각 용량별 interspecies scaling 결과(CL\_point estimate by dose)와 비교하였음

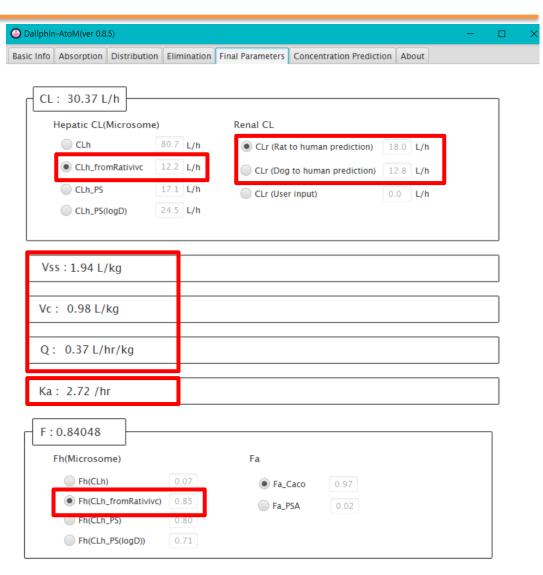
Higher PTS
Modeling & Simulation (Price to Stocklist)

#### CL prediction: Allometry vs. in vitro data<sup>11</sup>

- Allometry vs. IVIVE methods
- Allometry: fu intercept method and two-species-based allometry (ratdog) were best
- IVIVE: Using microsomes (incorporating both plasma and microsomal binding) and hepatocytes (not incorporating binding) resulted in better prediction
- ⇒ Allometry slightly more accurate than predictions based on in vitro data
- ⇒ Dallphin uses only in vitro data for CL prediction
- 다음 버전에는 allometry(in vivo data)를 통해 CL 예측이 가능하도록 예정

#### Final parameters

- Hepatic CL: CLh\_fromRativive
- Renal CL:
- -CLr (Rat to human prediction)
- -CLr (Dog to human prediction)
- Vss
- Vc → Ka
- 0
- Fh (CL h\_fromRativivc)



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#### 2019 KSCPT Spring Meeting Pre-course Workshop

Theories and Practices for Human Pharmacokinetics Prediction Using Non-clinical Information





## 경청해 주셔서 감사합니다.

주요 *in vivo* 정보와 이를 활용한 인간 약동학 예측 이론

