

Fiscal Year 2024 Generic Drug Science  
and Research Initiatives Public Workshop

## Integration of Simulation, In Vitro and Clinical Methods to Support Complex Drug Product Development

Will Ganley

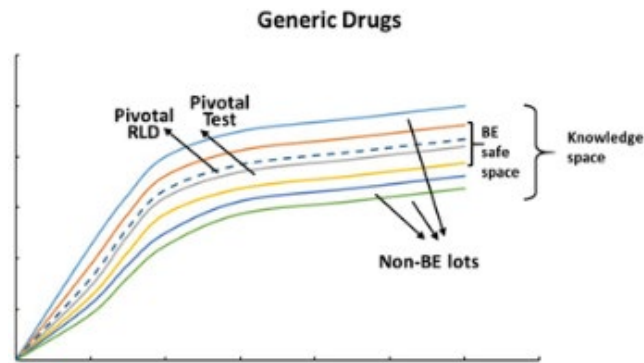
20<sup>th</sup> May 2024



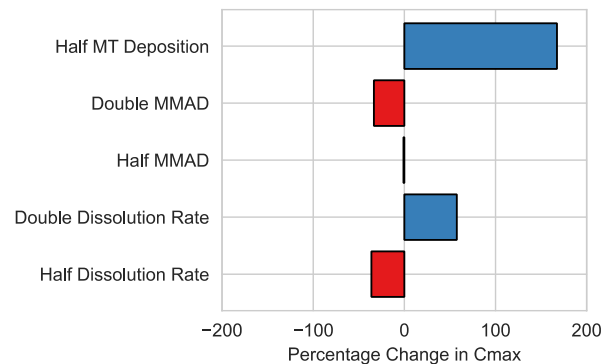
## Development Tools

Support product development decision making

Formulation  
Safe Space



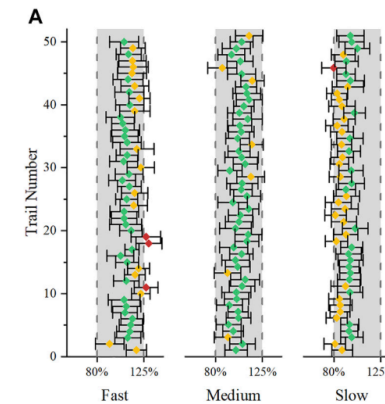
Sensitivity  
Analysis



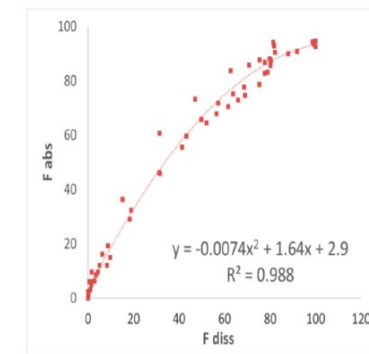
## Regulatory Tools

Support regulatory decision making

Virtual Clinical  
Studies

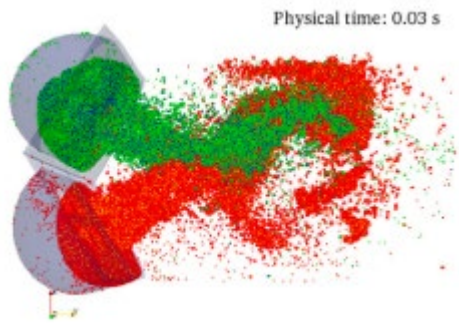


IVIVC



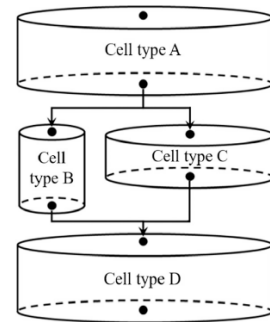
## Modelling and simulation methods to elevate in vitro and clinical studies

### In Vitro Lab Studies



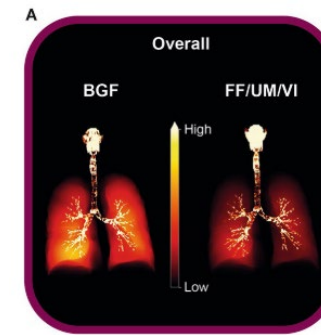
Simulations of  
Aerosolisation in DPIs  
Device Designs and  
Patient Breathing Profiles

### In Vitro Cell Studies



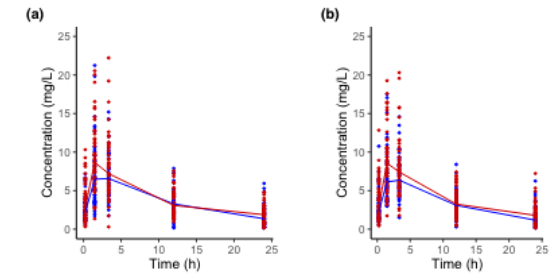
Quasi- 3D Modelling Drug  
Transport Across the  
Cornea transcellular and  
paracellular pathways

### Clinical Imaging Studies



Simulated lung  
deposition for different  
inhaled products

### Pharmacokinetic Studies



Model-based equivalence  
assessment for sparsely  
sampled  
pharmacokinetics

# Challenge: How Do We Bring This All Together

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- So far, a lot of success we need a roadmap for using modelling and simulation to get more generic drugs to market, particularly for complex dosage forms

## In Vitro Studies



- Relevant to **local exposure**
- **BE bounds** set using modelling
- Accompanying **in silico** models

## Local Site Exposure



- **Extrapolation** from in vitro studies
- Incorporation into **physiological models**

## Credible Models

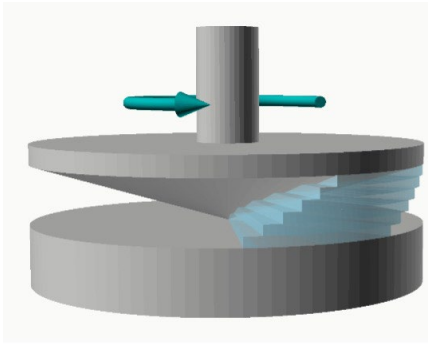


- Sufficient **available data** for validation
- Common framework
- Routes for adding new models

## Clinical Studies

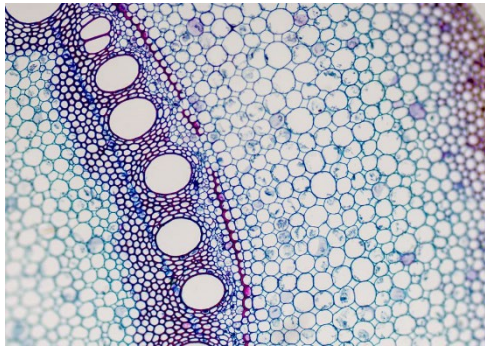


- Robust **statistical approaches**
- **Reduce** or **replace** clinical studies



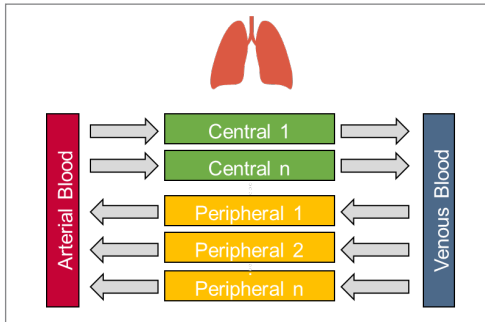
- **Flow**

- Biorelevant mucociliary clearance assays
- Easy extrapolation to local site (i.e. nasal cavity, ocular drainage)
- Screen for excipient differences (non-Q1/Q2)



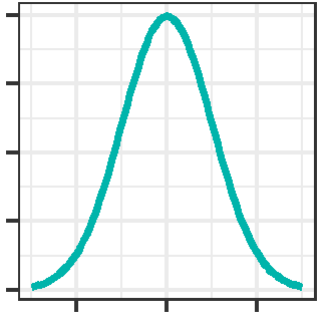
- **Permeation and Release**

- Mechanistic extrapolation from cell lines to physiological models
- Easy extrapolation to dissolution at the delivery site (e.g. upper/lower airways)
- Mechanistic models for tandem in vitro dissolution and permeation models

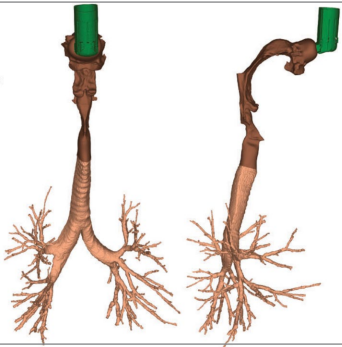


- **Model Structures**

- Coarse graining – lung nose regions, ocular/epithelial tissue layers



- **Selection of Disease State Characteristics**
  - Sensitivity analysis – which characteristics are important
  - Variance in population including correlation with other metrics



- **Representation of Disease-state Characteristics**
  - Replicated in silico (CFD meshes of airways, mechanistic representations in PBPK)?
  - Replicated in vitro (dissolution media, casts or organ-on-chip)



- **Understanding of Risk for Different Use Cases**
  - Alternative bioequivalence
  - Justifying in vitro BE bounds
  - Investigating in vitro BE failure
  - Replacing in vitro studies



- **Governance of Publicly Available Data for Model Validation**
  - Academic data stored
  - Private data can be entered
  - Access controlled



- **Patient Selection**

- Selection criteria – extend beyond age, disease state etc.
- Generation of virtual patients (which parameters to vary, correlation between parameters)
- Propagation of variance from inputs to endpoints

$$\frac{(\mu_T - \mu_R)^2 + \sigma_{TT}^2 - \sigma_{TR}^2}{\max(\sigma_0^2, \sigma_{TR}^2)}$$

- **Statistics**

- BE statistics
- Control of error



- Outcomes of potential research programmes
  - Mechanistic models of in vitro models
  - New in vitro methods to investigate local exposure
  - Methods for disease state representation in silico (including virtual patient selection)
  - Worked examples of credibility requirements for wider range of scenarios
  - More robust guidance on model-informed evidence



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Thank you!