

# Simultaneous spray drying for innovative dry powder inhaler combination formulations

Kim Shepard, PhD Lonza, Bend, OR

22 June 2022

Business Use Only



#### **Enabling a Healthier World**

### Addressing Market Challenges as One

#### Four Key Trends:

#### 1. More Complex, Highly Potent Molecules

- >250 highly complex molecules in pipeline
- Using pioneering methodologies to navigate challenges, and advance

#### 2. Small Biotechs Driving Innovation

- Our division is geared toward small biotechs
- Represent 60% of our customer base
- Driving novel development

#### 3. Accelerated Timelines to Market

- Dedicated to taking customers to market faster
- Specialist fixed-time and cost pathways
- · Early Phase and beyond

#### 4. Uncertain In-market Demand

- Customers require flexibility through to commercial production
- · Flexibility is our top contractual priority



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#### **Enabling a Healthier World**



# You Only Need One CDMO

Being global puts a team of connected experts from Small Molecules in your time zone and by your side.

**3** Regions







#### **Outline**



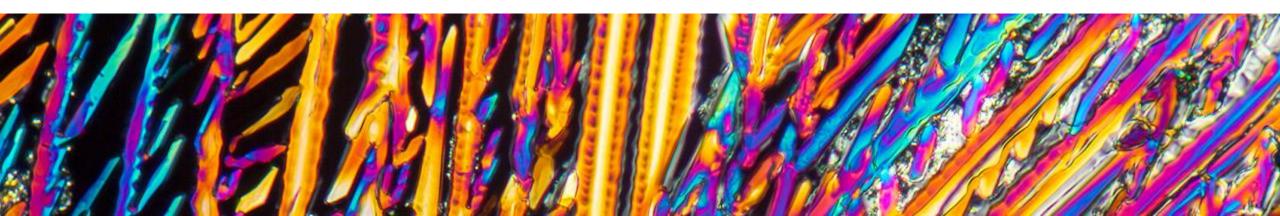
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Intro to particle engineering for inhalation delivery

Motivation for improved lung cancer therapies

Case study 1: Bevacizumab monotherapy Case study 2:
Beva/small molecule
simul-spray combo

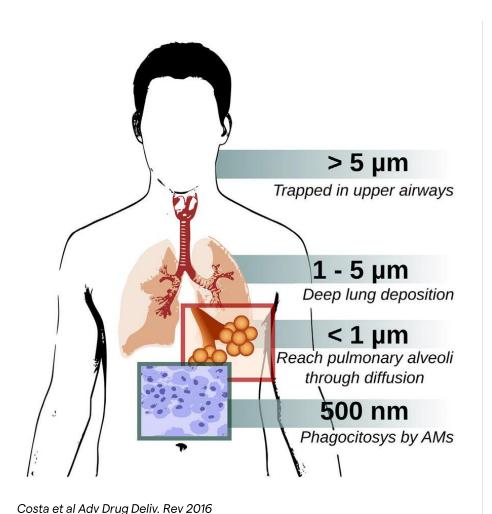
therapies



#### Particle engineering for lung delivery

#### Aerodynamic diameter is key





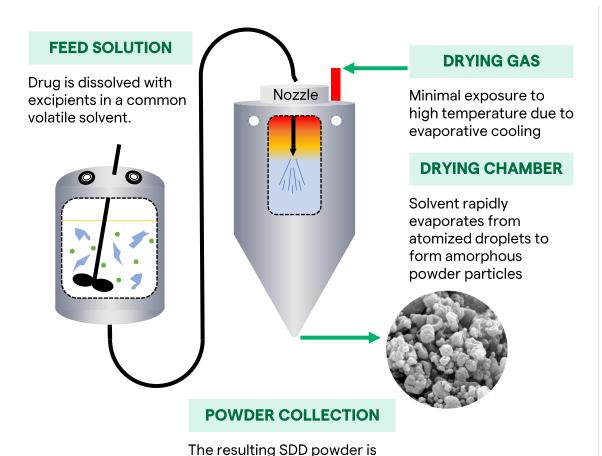
- The lung is designed to keep particles out, so we must work to ensure good delivery.
- Particle diameter and density are therefore critical to product performance
- Aerodynamic diameter is used to determine how a particle will behave in the respiratory tract

$$d_a = d_e igg(rac{
ho_p}{
ho_0 \chi}igg)^{rac{1}{2}}$$

- $\rho_0$  is reference density of 1000kg/m<sup>3</sup>,
- chi is shape factor (1 for spheres)

#### Spray drying enables dry powder inhaled formulations





separated from the gas stream

using a cyclone and collected

# Spray drying of large & small molecules is well-precedented



- Spray drying small molecules common for oral bioavailability enhancement
- 20+ compounds at Lonza Bend: mAbs, fAbs, DNA, oligonucleotides, VLPs, peptides



Minimize API degradation

- Evaporative cooling limits heat exposure
- Use of stabilizing excipients like trehalose
- Shear exposure controlled by pump & atomizer choice



Tunable particle engineering

- Atomization conditions
- Solution composition
- Drying kinetics
- Customized solutions for challenging particle collection

### Strong need for improved lung cancer treatments





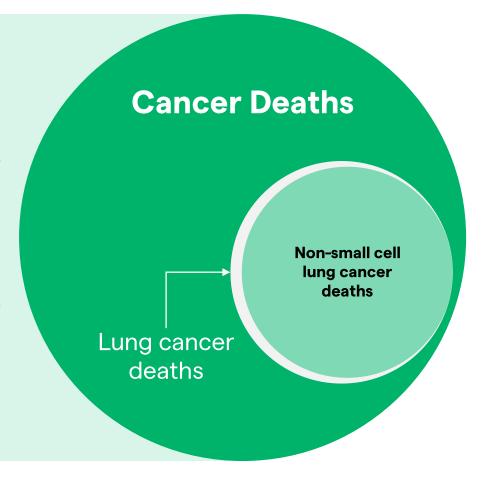
Lung cancer is the leading cause of cancerrelated deaths in the US and worldwide. 25% of US cancer deaths



90% of lung cancer mortality is due to Non-Small Cell Lung Cancer (NSCLC)



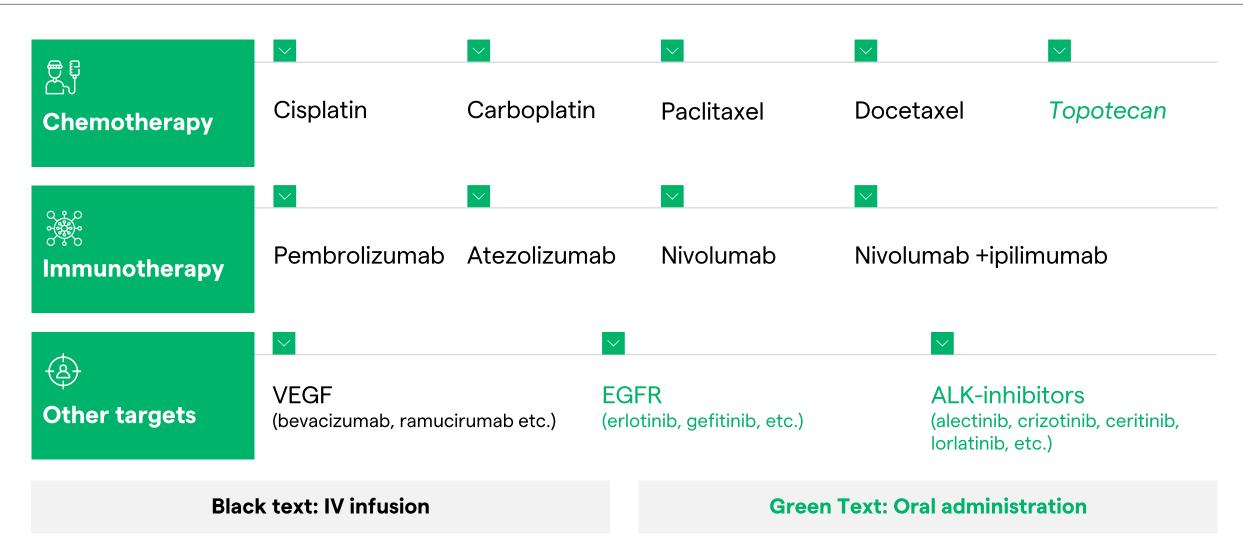
Advanced cases of NSCLC have a five-year survival rate of ~5%



Areas approximately to scale

#### Late-stage lung cancer treatment examples: all systemic





### Advantages of local therapy for lung cancer



#### Improved therapeutic outcomes

Challenge

Effectiveness limited by toxicity and side effects at high dose



Solution

Reduce systemic dose by lung delivery to affected tissues

#### Challenge

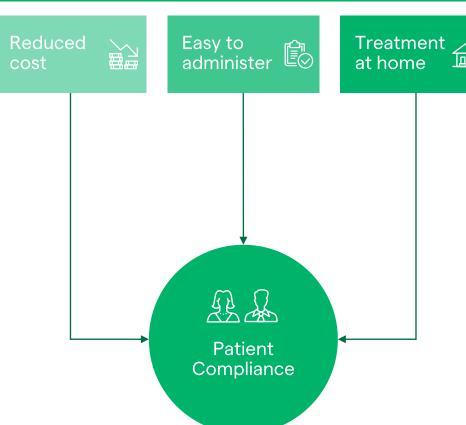


Solution

Poor exposure in lung tissue due to metabolism or distribution issues

Local administration circumvents first-pass metabolism and the need for distribution to the tissues from systemic circulation

# Better patient experience

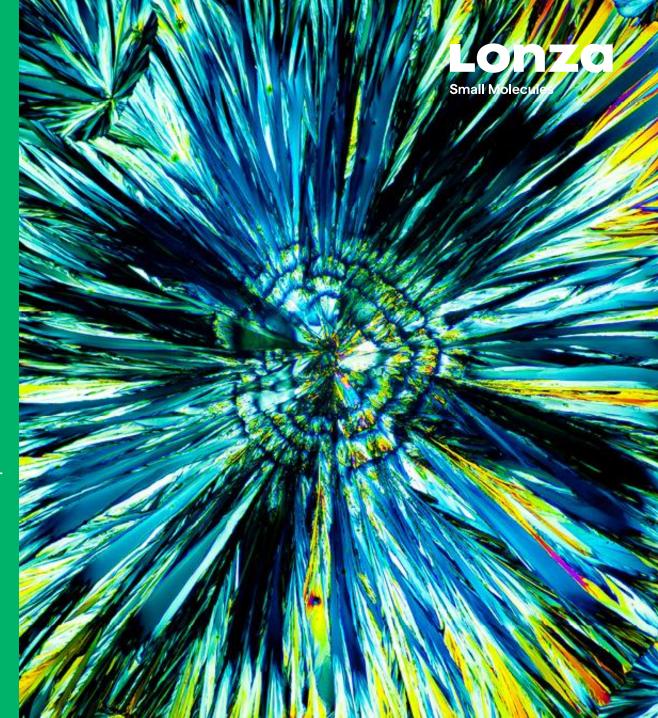


## Case study 1:

Inhaled bevacizumab dry powder monotherapy

Open access peer-reviewed study now published in AAPS PharmSciTech (2021)

"Local treatment of non-small cell lung cancer with a spraydried bevacizumab formulation"



#### Meet the model compound: bevacizumab











- Indications: NSCLC, colon cancer, glioblastoma, etc.
- Approved in 2004 as Avastin®, biosimilars Mvasi® and Zirabev® now on the market





- Inhibits VEGF angiogenesis pathway, reducing tumor's ability to grow
- Primary treatment in combination with chemotherapy
- Maintenance treatment on its own after chemo is no longer tolerated. IV infusion every 3 weeks.
- Risk of severe bleeding leads to substantial exclusion of patients who could benefit from therapy

### Delivery of mAb therapies for lung indications



#### **Standard of Care**



- mAbs for lung diseases are delivered as sub-Q injections or IV infusions
- Most are recurring treatments, weekly or monthly

#### **Challenges**



- Systemic administration is not always ideal
- Invasive delivery
- Expensive in-clinic administration
- Patient compliance for recurring treatments

#### **Local Delivery Alternative: Nebulizer**



- Pre-clinical evidence nebulizers are effective for pulmonary delivery of some mAbs (Respaud et al Exp Opin Drug Deliv 2015)
- 2 Self-administered at home
- 3 Physical stability concerns for liquid formulations
- 4 Treatments take minutes-hours, not seconds

#### Would formulation as a dry powder inhaler be possible?

#### Formulation of bevacizumab dry powder by spray drying





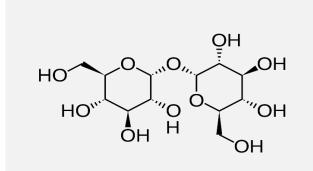


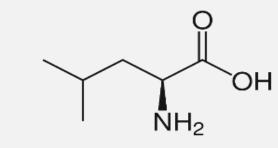


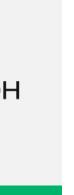
40% active formulation

Stable for 12 months at 25°C

High process yield of ~90%

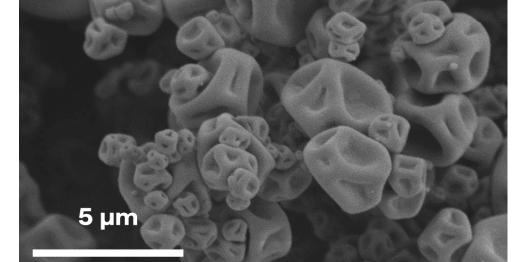






**Trehalose** 





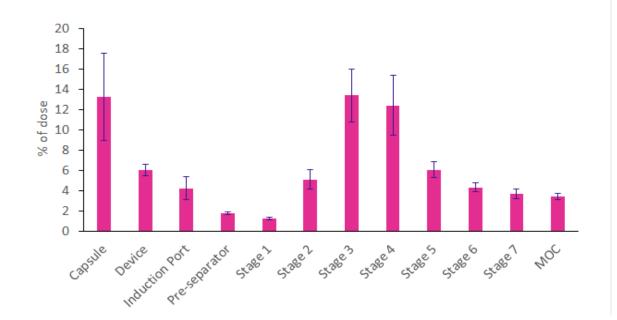
SEM image of bevacizumab particles for inhalation

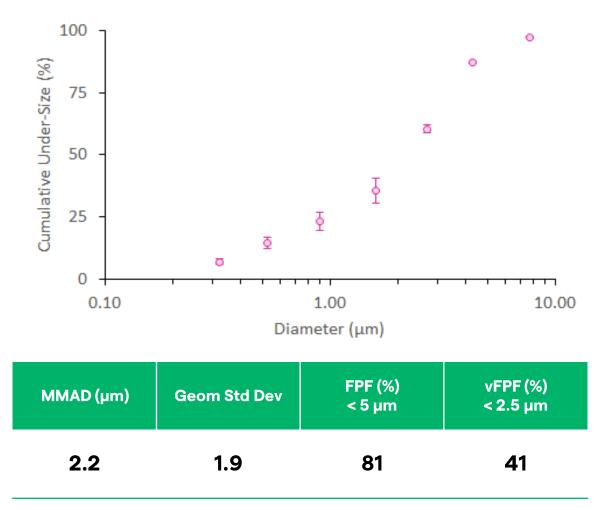
Stabilize amorphous state Replace H-bonds from water Crystallizes at surface of particle Improves aerosol properties Vehring Pharm Res 2008

### Aerosol properties of bevacizumab SDD



SDD aerodynamic diameter in range for deep lung delivery with high fine particle fraction on NGI





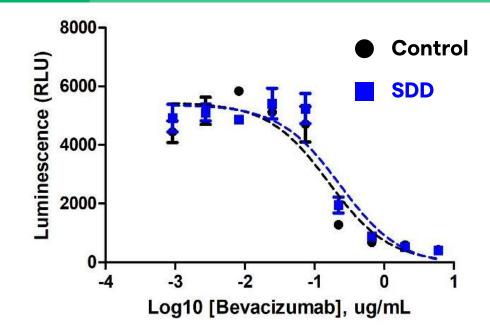
#### Bevacizumab SDD maintains anti-VEGF activity

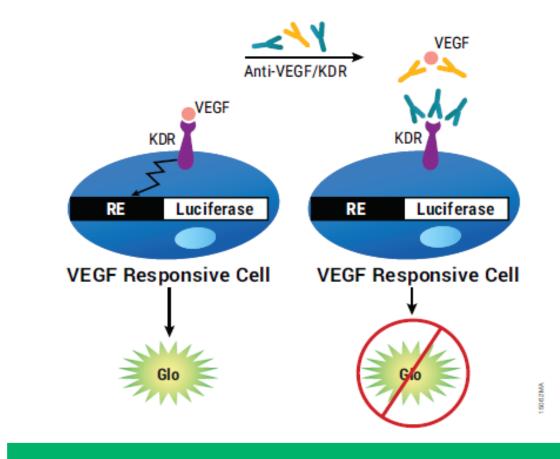


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Bevacizumab binds with VEGF as effectively as control over a wide range of concentrations, using luciferase reporter assay kit for VEGF activity





Luciferase reporter assay kit for VEGF from Promega.com

### Efficacy study in NSCLC rat model



Efficacy study conducted in orthotopic nude rat NSCLC intratracheally instilled into model in collaboration with Lovelace Biomedical

Treatment administered study endpoint: lung weight weekly from weeks 4-8 after

CALU-3 tumor cells were intratracheally instilled into rats' lungs

4

Study endpoint: lung weight (tumor burden)

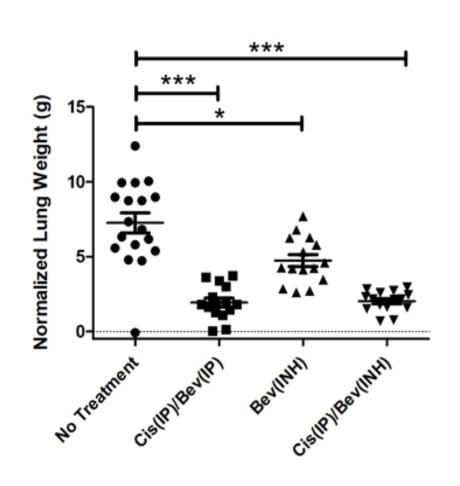
Group	Cisplatin	Bevacizumab	Animals
1	None	None	15
2	IP 3 mg/kg	IP 15 mg/kg	15
3	None	INH 1.5 mg/kg	15
4	IP 3 mg/kg	INH 1.5 mg/kg	15

		Cisplatin	Bevacizumab
1	<u></u>	$\bigotimes$	$\bigotimes$
2	4	C. C	<u>Creek</u>
3	<u>A</u>	$(\times)$	7
4	4	C. C.	7

instillation

#### Inhaled bevacizumab is efficacious in vivo





#### \* = p < 0.05, \*\*\* = p < 0.0005

#### **Key findings for efficacy**





Inhaled bev + IP cisplatin reduces tumor mass as much as positive control (IP bev + IP cisplatin) At 1/10<sup>th</sup> the bevacizumab dose



Inhaled bev alone reduces tumor burden significantly compared with negative control



Also tested in maintenance study where inhaled bevacizumab prolonged survival after chemo ended

#### Conclusions for case study 1

#### A promising future for patients





## Spray drying: A platform for pulmonary delivery

- Spray drying enables scalable particle engineering for inhalation without damaging delicate actives
- Spray dried powders have good aerosol properties, physical stability at ambient temp, and biological activity



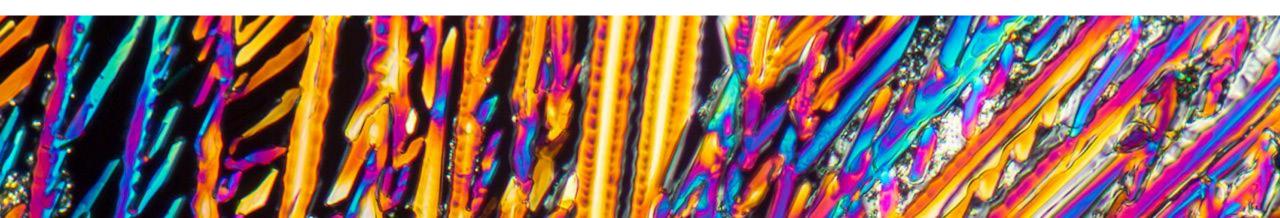
# Bevacizumab reduces tumor size in rat model of lung cancer

 Bevacizumab was effective at reducing tumor growth in rat model as a primary or maintenance therapy



### Improve patient quality of life

- Simple and inexpensive at-home administration when dealing with a challenging disease
- Potential for lower dose and reduced side effects

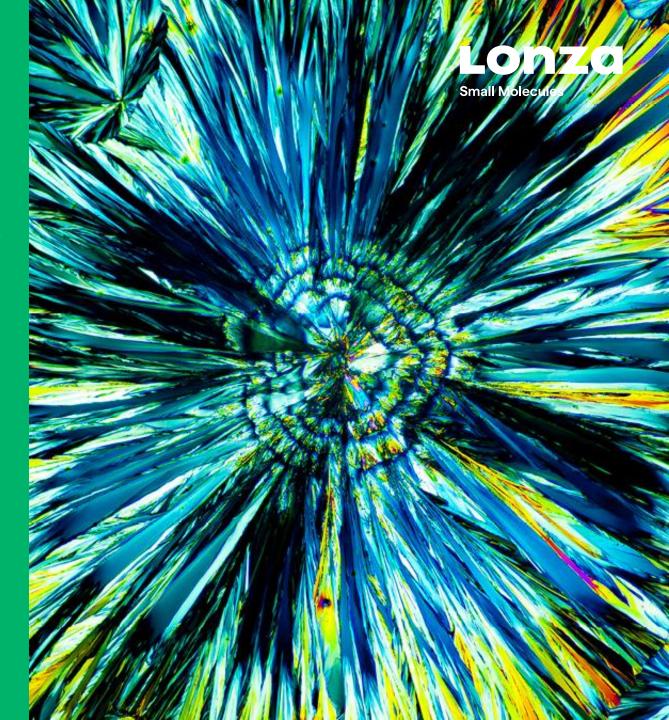


# Case study 2:

Simul-spray bevacizumab/ small molecule combination therapy

Open Access peer-reviewed study now published in Pharmaceutics (2022)

"Simultaneous spray drying for combination dry powder inhaler formulations"



#### Why combination therapies?



#### **Combination therapies help patients**

Challenge

Adherence is a problem in 70% of patient populations for inhaled treatments



**Solution** 

Lower patient burden by reducing number of medications

#### Challenge



**Solution** 

Medication costs are high for managing lung diseases

Combination products can reduce overall cost of treatment, particularly for asthma management

#### Local treatment of lung cancer combination

Challenge



Solution

APIs of interest cannot be easily formulated into a single product

Simul-spray drying circumvents formulation challenges

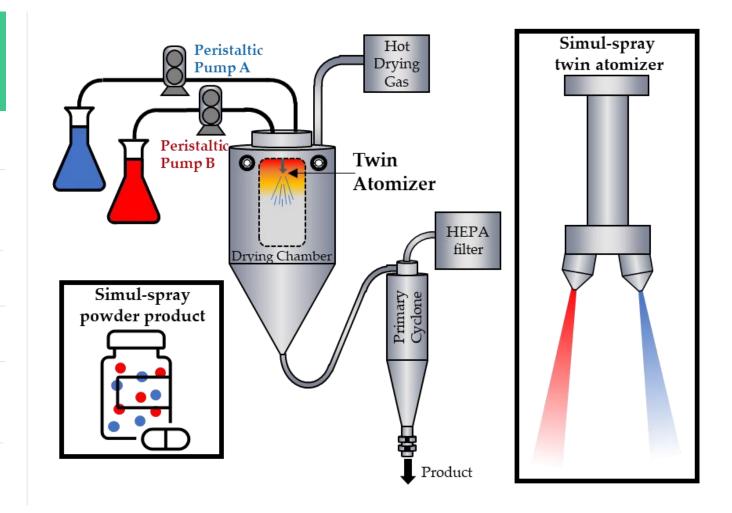
#### Simultaneous spray drying



# One spray dryer + Two solution feeds



- Avoid milling/blending
- No need for a common spray solvent between APIs
- No need for a single formulation
- Powder product is intimately blended
- Adjust final powder composition via liquid flow rates
- Can also use one feed as a placebo for easy dose escalation



### Model systems and powder composition results



#### 3 lung cancer-relevant combinations





**Beva/Erlotinib** 

- Erlotinib is an EGFR inhibitor, used when NSCLC has an EGFR mutation
- Erlotinib has low aqueous solubility
- Simul-sprayed 1:2 and 1:1 mass ratios



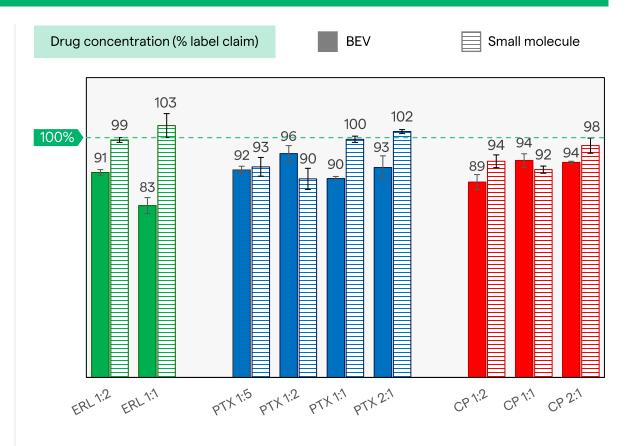
**Beva/Paclitaxel** 

- Paclitaxel is a chemotherapy
- Also has low aqueous solubility
- Simul-sprayed 1:5, 1:2, 1:1, 2:1 mass ratios



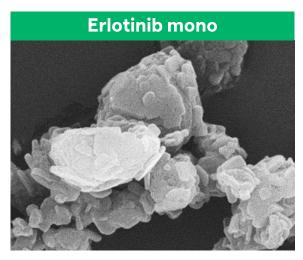
Beva/cisplatin

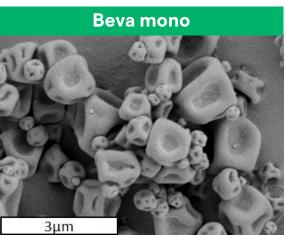
- Cisplatin is a chemotherapy used in combination with beva as NSCLC standard of care
- Aqueous solution has chemical stability issues
- Simul-sprayed 1:2, 1:1, 2:1 mass ratios



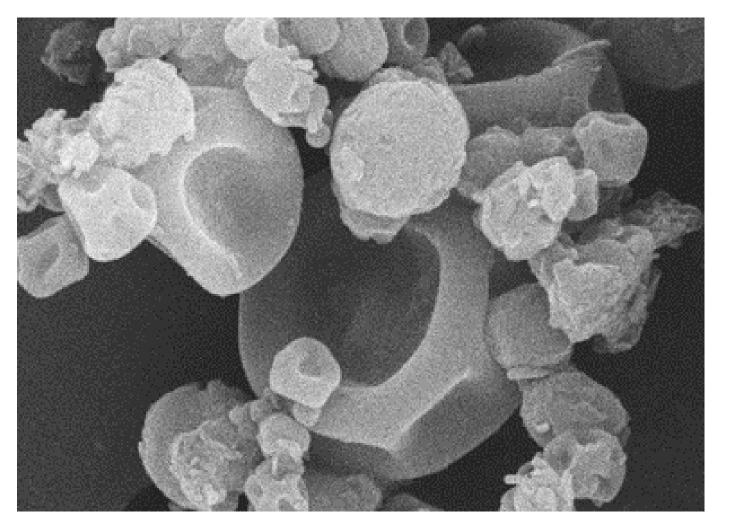
### SEM images: Erlotinib bevacizumab simul-spray





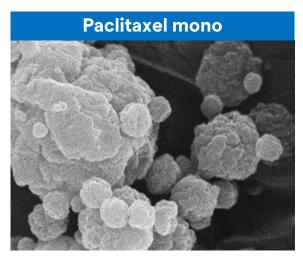






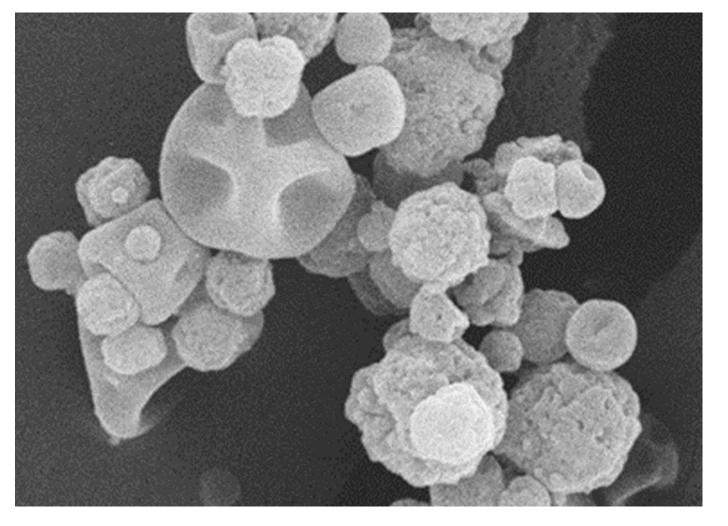
### SEM images: Paclitaxel bevacizumab simul-spray





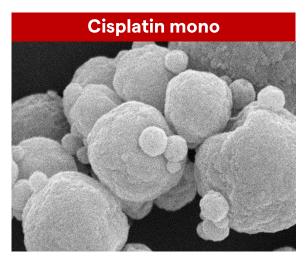


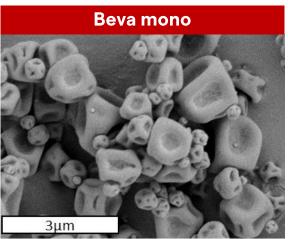




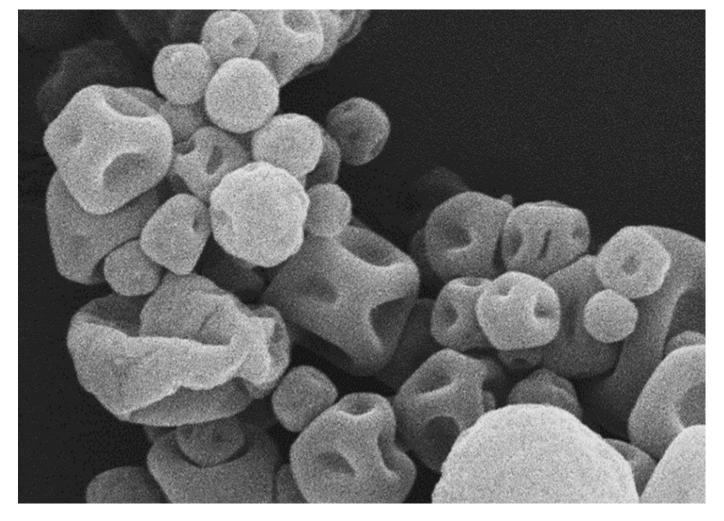
### SEM images: Cisplatin bevacizumab simul-spray









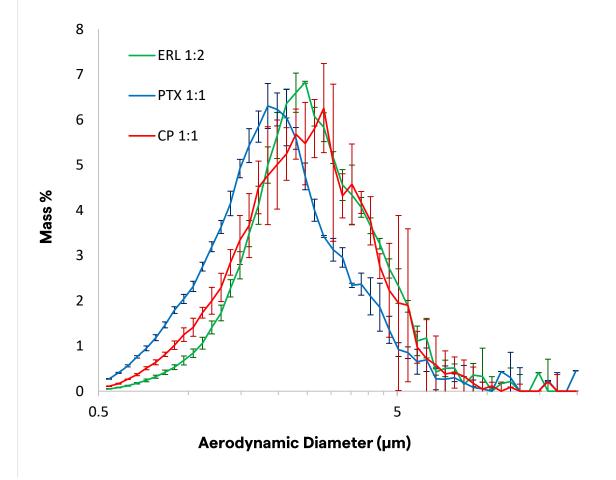


### Simul-spray formulations have targeted aerosol properties



- Mass median aerodynamic diameters for all formulations are < 3 microns, targeted for deep lung delivery
- PTX formulations have highest fine particle dose by fastscreening impactor

Formulation	APS MMAD (µm)	APS GSD (μm)	FSI FPD/ Fill Mass, %
ERL 1:2	2.9	1.7	43.4 ± 2.5
ERL 1:1	2.5	1.7	46.3 ± 1.5
PTX 1:5	2.3	1.6	64.3 ± 8.0
PTX 1:2	2.4	1.7	$64.0 \pm 0.0$
PTX 1:1	2.4	1.7	$54.6 \pm 7.0$
PTX 2:1	1.8	1.7	65.2 ± 5.9
CP 1:2	2.8	1.7	58.0 ± 0.7
CP 1:1	2.7	1.7	57.7 ± 1.6
CP 2:1	2.7	1.7	59.9 ± 2.7

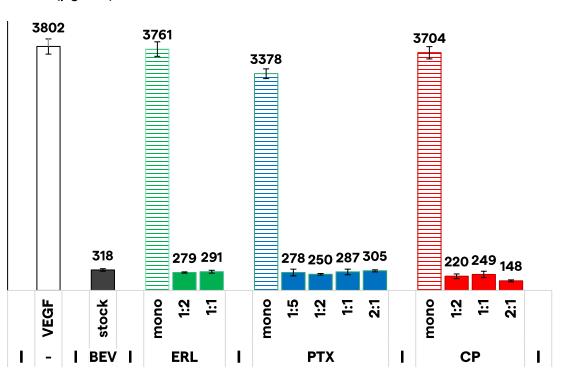


#### Simul-spray formulations retain bevacizumab's activity



#### **ELISA-based VEGF activity assay**

#### VEGF (pg/mL)



# Confirmed bevacizumab survives the simul-spray process with anti-VEGF activity intact

Reconstitute powders in buffer

Incubate beva-containing solution with VEGF

- Quantify remaining unbound VEGF with assay
- Mono therapies (without beva) do not inhibit VEGF on their own

#### Conclusions for case study 2

#### Simul-spray for combination products





### Simul-spray drying enables unique combination therapies

- Simul-spray atomizes two separate liquid feeds into a single spray dryer
- Collected as a uniform blend of two formulations in a single unit operation
- No carriers needed; compatible with low and high dose actives



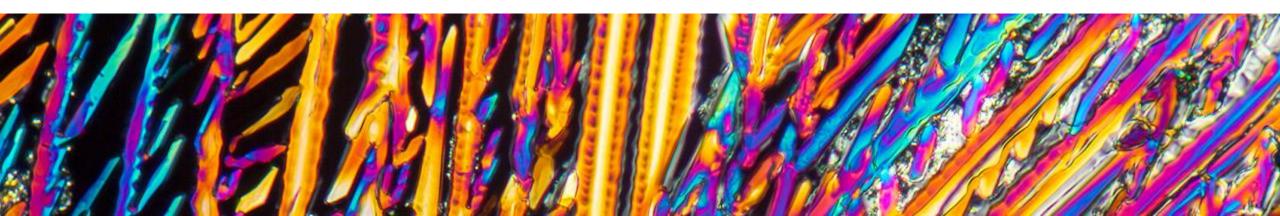
### Cancer-relevant beva/ small molecule formulations

- Manufactured inhalation combination dry powders of beva with erlotinib, paclitaxel and cisplatin
- Formulations achieved target drug concentration, good aerosol properties and preserved anti-VEGF bioactivity



### Simul-spray for dose escalation with placebo

- One active stream and one placebo stream used to vary active concentration without changing individual formulations
- May help with dose escalation studies where delivered dose is fill-dependent



# Thank you!

Q&A

