

TRANSDERMAL FLUX PREDICTIONS FOR HIGHLY LIPOPHILIC COMPOUNDS: COMPARISON WITH EXPERIMENTAL RESULTS

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BACKGROUND & AIMS

- To evaluate the feasibility of delivering transdermally a series of **highly lipophilic** compounds ($\log P \sim 4-7$), comprising several selective estrogen receptor modulators (**SERMs**) and a modified testosterone (**danazol**).
- To explore whether the fluxes achieved might be sufficient to allow for 'local' application and drug delivery to underlying subcutaneous tissues, avoiding thereby undesirable systemic side-effects when treating breast cancer.
- To compare the **in vitro experimental fluxes** of the drugs considered with their **predicted transport** using the **Potts & Guy algorithm**.

Prediction model & experimental studies

Step 1: Calculation of lipophilicity and aqueous solubility of compounds

- $\log P_{o/w}$ and aqueous solubilities ($\log S$) of the drugs were estimated with the "ALOGPS 2.1 Programme" [1].

Step 2: Prediction of maximum drug flux (J_{max}) across skin

$$J_{max} \cong \frac{D}{h} * K_{skin / vehicle} * C_{vehicle}^{sat}$$

$$K_p = \frac{D * K_{skin / water}}{h}$$

- Calculate permeability coefficient (K_p) of each drug across skin from aqueous solution using the **Potts & Guy equation** [2]:

$$\log K_p = -2.7 + 0.71 * \log P - 0.0061 * MW$$

- Calculate corrected permeability coefficient (K_{pcorr}) following **Cleek & Bunge** [3] for highly lipophilic species for which viable epidermis can contribute to rate-control:

$$K_p^{corr} = \frac{K_p}{1 + \frac{K_p * \sqrt{MW}}{2.6}}$$

Step 3: Determine J_{max} from K_p x estimated solubility of drug in water

J_{max} : maximum flux; D : diffusion coefficient; K : stratum corneum-vehicle partition coefficient; h : stratum corneum path length; $C_{sat,veh}$: saturated drug solubility; K_p : permeability coefficient; MW : molecular weight

Step 4: In vitro permeation studies

- In vitro* experimental fluxes (J_{expt}) from saturated hydroalcoholic solutions (70:30; ethanol:water) were determined in side-by-side diffusion cells (area: 0.71 cm²; volume: 3.2 ml) through dermatomed (750 μ m) pig skin at 37 \pm 0.5°C. Samples were analyzed by HPLC.

METHODS

Table: Estimated physicochemical properties and predicted skin permeability parameters of the compounds considered.

Compound ^a	MW	Model ^b	Log $K_{o/w}$	$10^2 \times C_{sat}$ (mg.cm ⁻³)	Log K_p (cm.h ⁻¹)	$10^2 \times K_p$ (cm.h ⁻¹)	$10^2 \times K_{pcorr}$ (cm.h ⁻¹)	J_{max} (μ g.cm ⁻² .h ⁻¹)	J_{expt} (μ g.cm ⁻² .h ⁻¹)
Clomiphene	405.97	AlogPs	6.08	0.04	-0.819	15.2	6.97	0.03	0.1 \pm 0.09
		Average logPs	6.89	0.25	-0.244	57.0	10.5	0.26	
		AlogPs	3.61	1.76	-2.162	0.69	0.66	0.12	
Danazol	337.46	AlogPs	4.02	0.76	-1.871	1.35	1.23	0.09	0.30 \pm 0.08
		Average logPs	5.43	0.31	-1.170	6.76	4.47	0.14	
		AlogPs	6.03	1.77	-0.744	18.00	7.62	1.35	
Droloxifene	387.52	AlogPs	5.32	0.09	-1.164	6.85	4.54	0.04	0.06 \pm 0.03
		Average logPs	5.64	0.39	-0.937	11.60	6.22	0.24	
		AlogPs	5.44	0.30	-1.163	6.87	4.52	0.14	
Endoxifen	373.5	AlogPs	5.92	1.12	-0.822	15.10	7.04	0.79	1.55 \pm 1.28
		Average logPs	5.93	0.10	-0.719	19.10	7.91	0.08	
		AlogPs	6.46	0.30	-0.343	45.40	10.40	0.31	
4-OH Tamoxifen	387.52	AlogPs	5.65	0.04	-1.124	7.51	4.75	0.02	0.14 \pm 0.08
		Average logPs	6.45	0.15	-0.556	27.80	8.81	0.14	
		AlogPs	6.45	0.15	-0.556	27.80	8.81	0.14	
Tamoxifen	371.52	AlogPs	5.65	0.04	-1.124	7.51	4.75	0.02	0.21 \pm 0.13
		Average logPs	6.45	0.15	-0.556	27.80	8.81	0.14	
		AlogPs	6.45	0.15	-0.556	27.80	8.81	0.14	
Toremifene	405.97	AlogPs	5.65	0.04	-1.124	7.51	4.75	0.02	0.21 \pm 0.13
		Average logPs	6.45	0.15	-0.556	27.80	8.81	0.14	
		AlogPs	6.45	0.15	-0.556	27.80	8.81	0.14	

^aTheoretical calculations presented are based only on parent drug.

^bAlogPs model, in which AlogPs and AlogPs values predicted by the algorithm were taken as log $K_{o/w}$ and C_{sat} , respectively. Average AlogPs model uses average values of these two parameters derived from several different algorithms.

- Predicted fluxes were in good general agreement with the experimental results (**Figure**).

RESULTS & DISCUSSION

- Experimental values (except droloxifene) were typically greater than the predicted fluxes.
- Possibly due to the fact that prediction of J_{max} is based on an aqueous vehicle, whereas experimental formulation was a ethanol/water (70:30).
- Higher experimental fluxes could be due to the action of ethanol as a skin penetration enhancer.

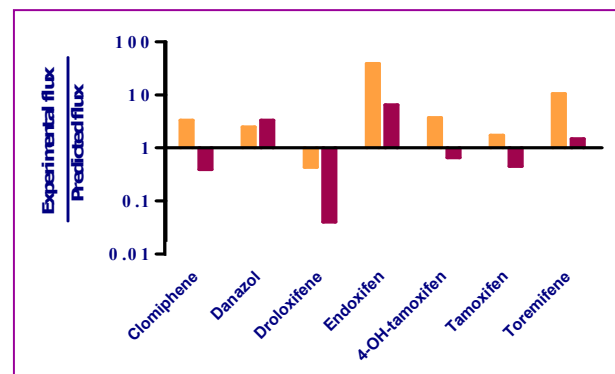


Figure: Comparison of experimental and predicted fluxes using either ALOGPs values (orange bars) or average ALOGPs values (red bars).

CONCLUSIONS

- Fluxes of **highly lipophilic** compounds can be **reasonably predicted**.
- From previous clinical studies [4, 5] and experimental fluxes observed, **topical** delivery of therapeutically useful doses of certain compounds to cancerous breast tissue and/or to treat benign breast diseases (such as mastalgia) may be feasible.

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ACKNOWLEDGEMENTS

We thank Ascend Therapeutics, Inc. and the Scientific and Research Council of Turkey (TUBITAK) for financial support.