

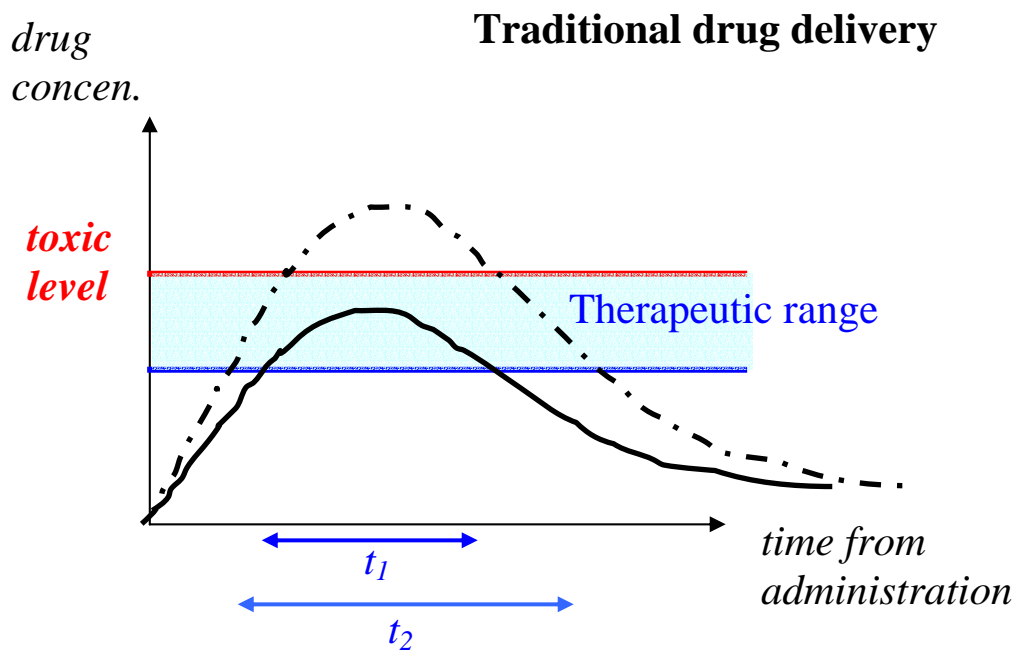
Lecture 19

Drug Delivery: Controlled Release

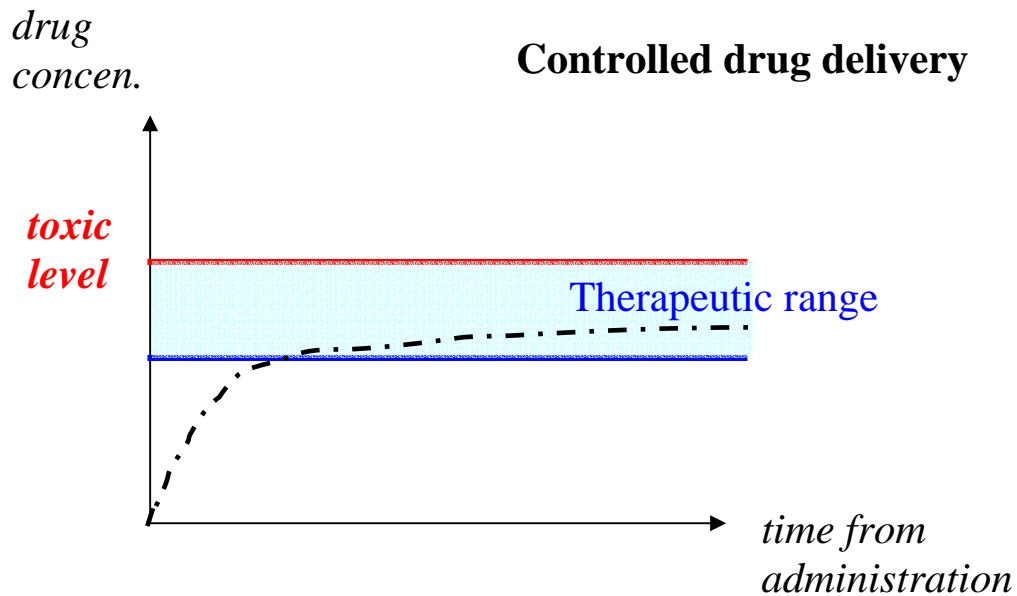
What do we mean by “controlled” release?

- Control of:
- 1. delivery rate
 - 2. site of release/activity

Need for Control



longer period of dose efficacy = toxicity risk



Types of Devices

1. Diffusion Controlled Delivery Devices

- Monolithic Devices
- Membrane Controlled Devices
- Osmotic Pressure Devices
- Swelling-Controlled Devices

2. Chemically Controlled Approaches

- Matrix Erosion
- Combined Erosion/Diffusion
- Drug Covalently Attached to Polymer
- Desorption of Adsorbed Drug

3. Electronic/Externally Controlled Devices

1. Diffusion Controlled Devices

a) Monolithic Devices

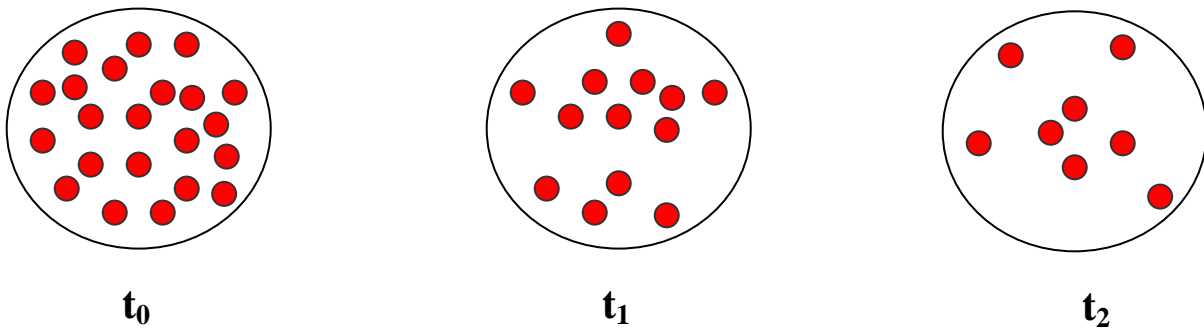
Drug is released by diffusion out of a polymer matrix

Release rate depends on initial drug concentration

i) Case of $C_0 < C_s$

(drug concentration C_0 is below solubility limit in matrix C_s)

⇒ Diffusion through matrix limits the release rate



How can we control release rate?

Rate control by **choice of matrix**:

glassy matrix: $D \sim 10^{-10} - 10^{-12} \text{ cm}^2/\text{s}$
 rubbery matrix: $D \sim 10^{-6} - 10^{-7} \text{ cm}^2/\text{s}$

Quantifying drug release

Governed by Fick's Laws.

For 1D: The drug flux J is: $J = -D \frac{dC}{dx}$

The change in drug concentration with time is: $\frac{\partial C}{\partial t} = D \frac{\partial^2 C}{\partial x^2}$

We want to calculate:

- $dM_t/dt =$ release rate
- $M_t =$ amount released after time t

\Rightarrow Solve Fick's 2nd law with initial & boundary conditions.

Example: For a 1D slab loaded at an initial concentration of C_0 , with drug concentration in solution resulting in constant surface concentration of C_i .

I.C.: $C(x,0) = C_0$

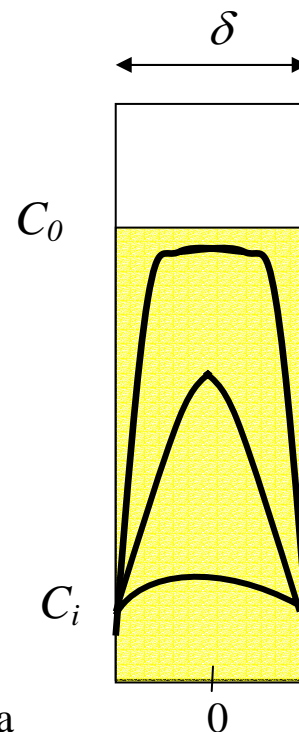
B.C. 1: $\left. \frac{\partial C}{\partial x} \right|_{x=0,t} = 0$

B.C. 2: $C(\delta/2,t) = C_i$

Solve for $C(x,t)$

$$\frac{dM_t}{Adt} = -D \left. \frac{dC(x,t)}{dx} \right|_{x=\delta/2} \Rightarrow M_t$$

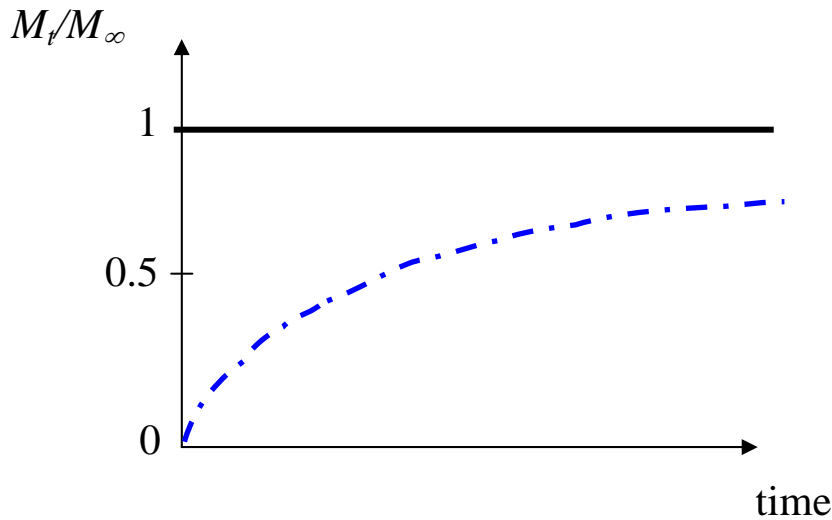
$A =$ cross-sectional area



The **amount of drug released** is given by the series solution:

$$\frac{M_t}{M_\infty} = 1 - \sum_{n=0}^{\infty} \frac{8}{(2n+1)^2 \pi^2} \exp\left[\frac{-D(2n+1)^2 \pi^2}{\delta^2} t\right]$$

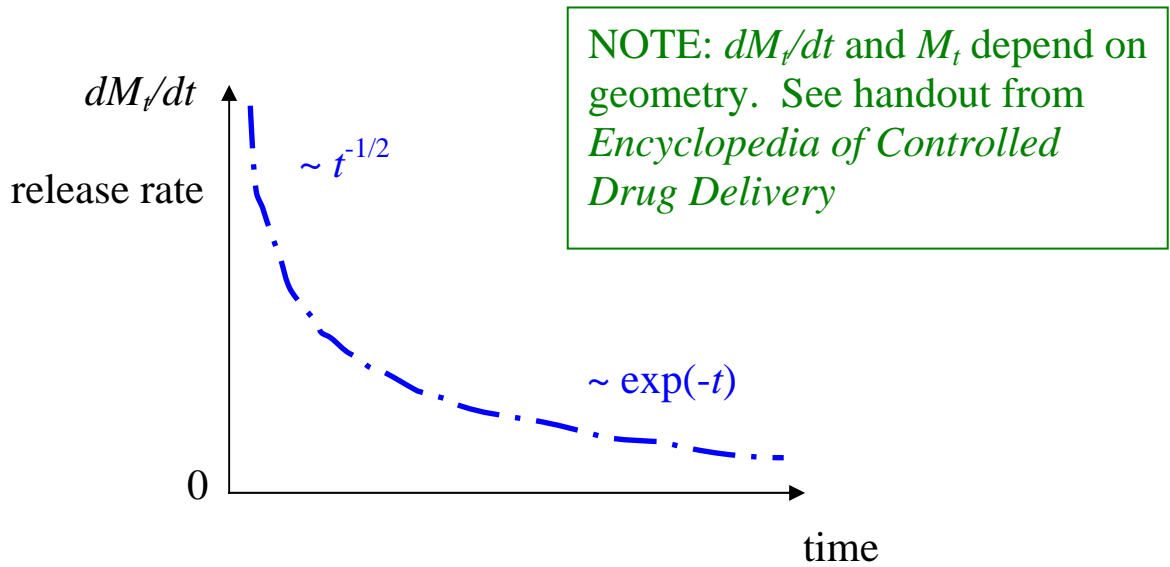
where: M_∞ = amount of drug released at long times
 (e.g., total amt of drug: $M_\infty = C_0 A \delta$)
 δ = slab thickness



Release rate (from derivative):

$$\frac{dM_t}{dt} = 2M_\infty \left[\frac{D}{\pi \delta^2 t} \right]^{1/2} \quad \text{short times: } \sim t^{-1/2}$$

$$\frac{dM_t}{dt} = \frac{8DM_\infty}{\delta^2} \exp\left[\frac{-\pi^2 Dt}{\delta^2}\right] \quad \text{long times: exponential decay}$$



ii) **Case of $C_0 > C_s$**
 (drug concentration above solubility limit in matrix)

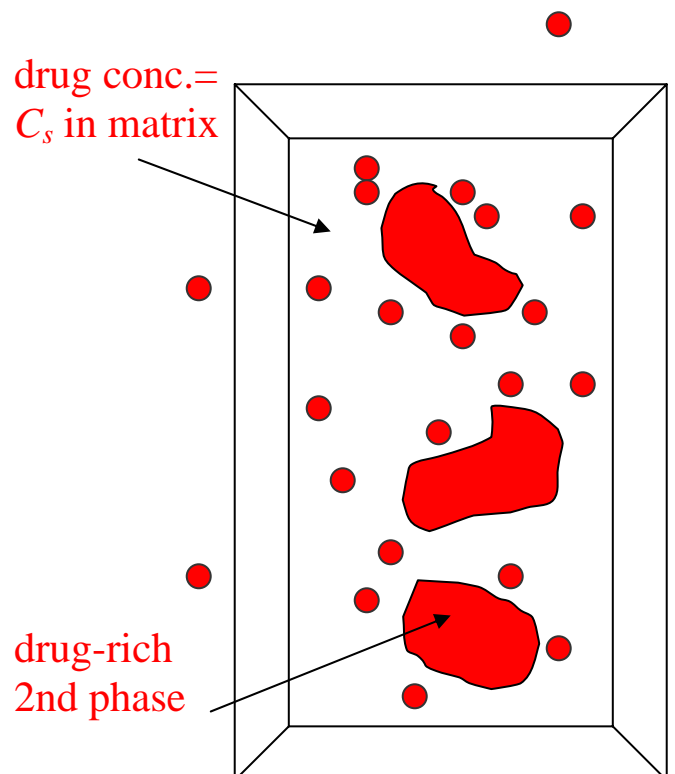
⇒ Drug dissolution in polymer matrix limits release rate

Higuchi model: assumes $C_i = 0$

$$M_t = A [DC_s (2C_0 - C_s)t]^{1/2}$$

$$\frac{dM_t}{dt} = \frac{A}{2} [DC_s (2C_0 - C_s)]^{1/2} t^{-1/2}$$

where A = surface area of the slab



For $C_s \ll C_0$:

$$\frac{dM_t}{dt} = \frac{A}{2} \left[\frac{2DC_s C_0}{t} \right]^{1/2}$$

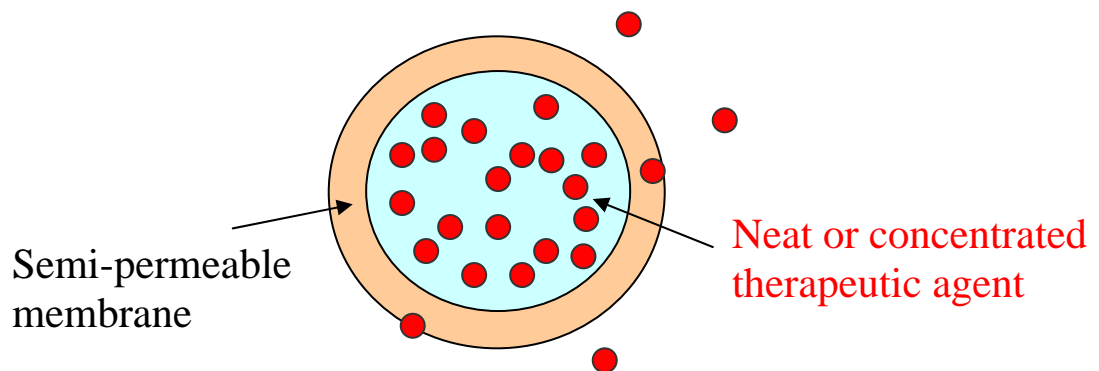
How can we control release rate?

b) Membrane Controlled Devices

Drug release is controlled by a **semi-permeable membrane**

⇒ Diffusion through membrane limits the release rate

Advantage: A constant flux device!



Release rate thru membrane described by Fick's 1st law.

For 1D:

$$J = \frac{dM_t}{A dt} = -D \frac{dC}{dx}$$

Typical flux
units: g/cm²s

i) Nonporous semi-permeable membranes

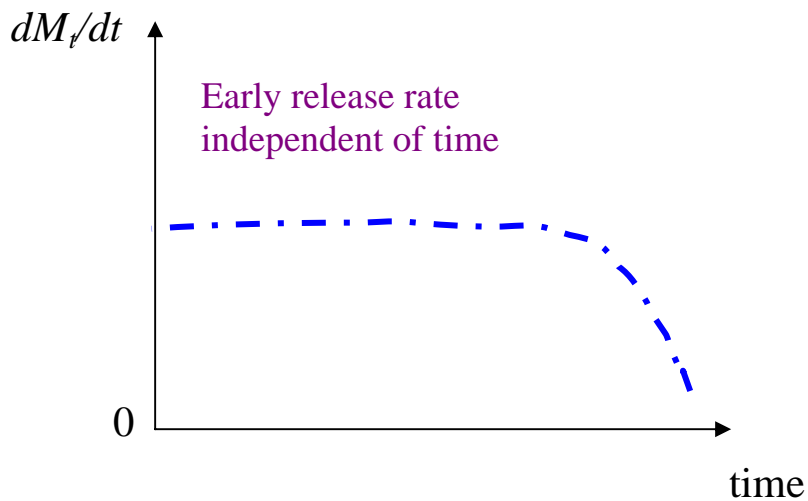
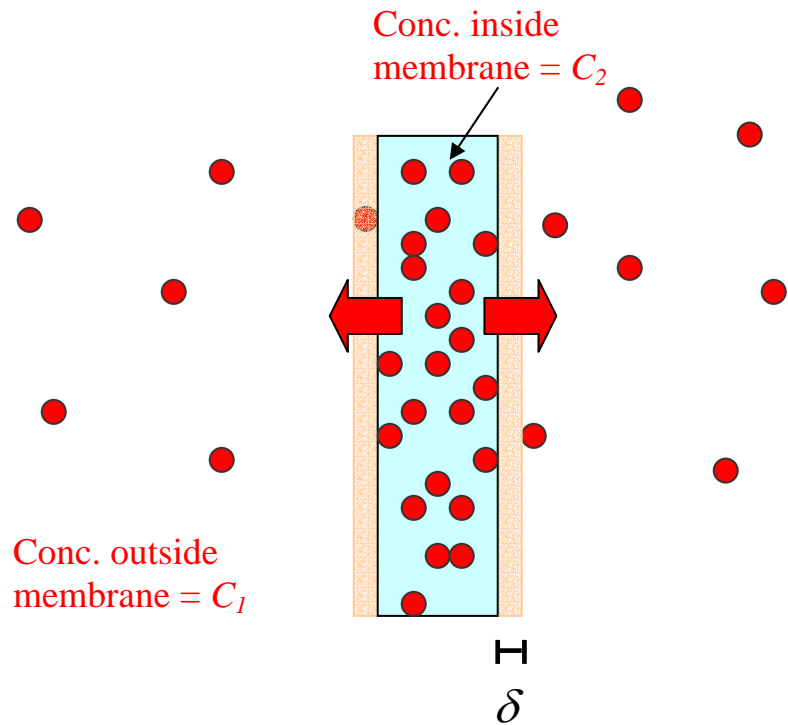
⇒ Drug diffusion through swollen polymer membrane

$$\frac{dM_t}{dt} = \frac{DKA}{\delta} (C_2 - C_1)$$

$$M_t = \frac{DKA}{\delta} (C_2 - C_1)t$$

K = membrane “partition” coefficient (unitless metric of drug solubility in membrane)

Which D is referred to?



Is this release profile advantageous?

ii) Porous semi-permeable membranes

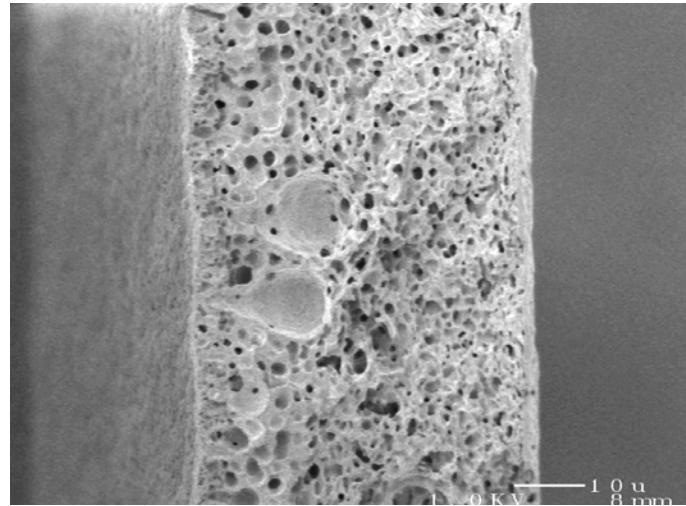
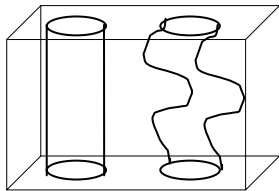
⇒ Drug diffusion through membrane pores

Requires replacing D by D_{eff} :

$$D_{eff} = \frac{D_{pore} \epsilon}{\tau}$$

ϵ = porosity $0 < \epsilon < 1$

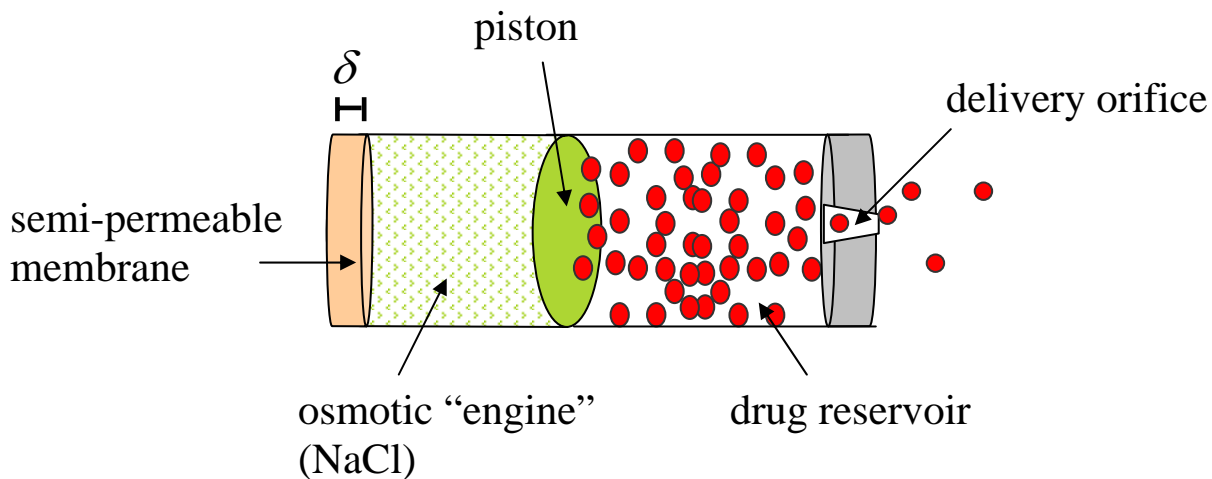
τ = tortuosity $\tau \geq 1$



Cross-section of porous semi-permeable membrane

c) Osmotic Pressure Devices

Osmotic pressure build-up from water in-flux across semi-permeable membrane forces drug release through orifice



Ex: DUROS Implant (ALZA)

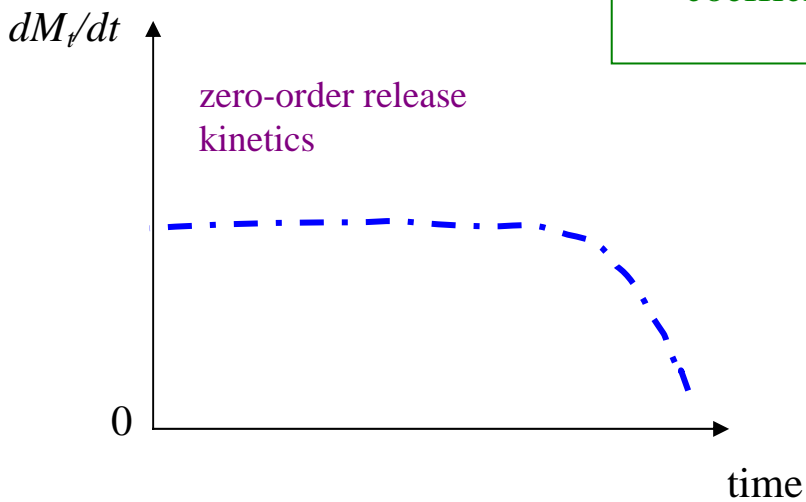
- Ti housing, 4mm × 45 mm
- ~ 1 year duration
- in use for prostate cancer therapy

<http://www.alza.com/alza/duros>

Release rate proportional to change in volume of drug reservoir:

$$\frac{dM_t}{dt} = \frac{dV}{dt} C = \frac{Ak\Delta\pi C}{\delta}$$

A = membrane area
Δπ = osmotic pressure differential
C = drug concentration in reservoir
k = membrane permeability coefficient (~10⁻⁶-10⁻⁷ g/cm/s)



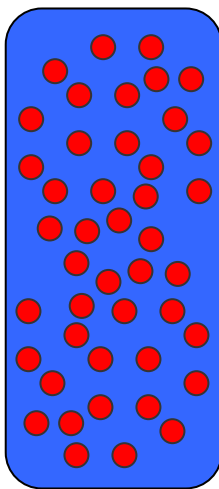
Controlled Release via Solute Choice for Osmotic Engine ($\Delta\pi$)

Solute	Osmotic Pressure (atm)
body tissue	7
NaCl	356
KCl	245
sucrose	150
dextrose	82
potassium sulfate	39

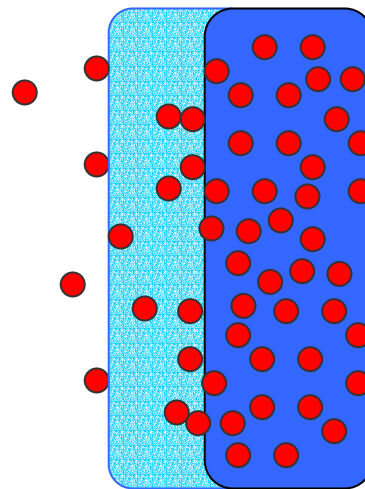
d) Swelling Controlled Devices

- Drug dispersed in a glassy, hydrophilic matrix
- Swelling in aqueous medium allows drug release

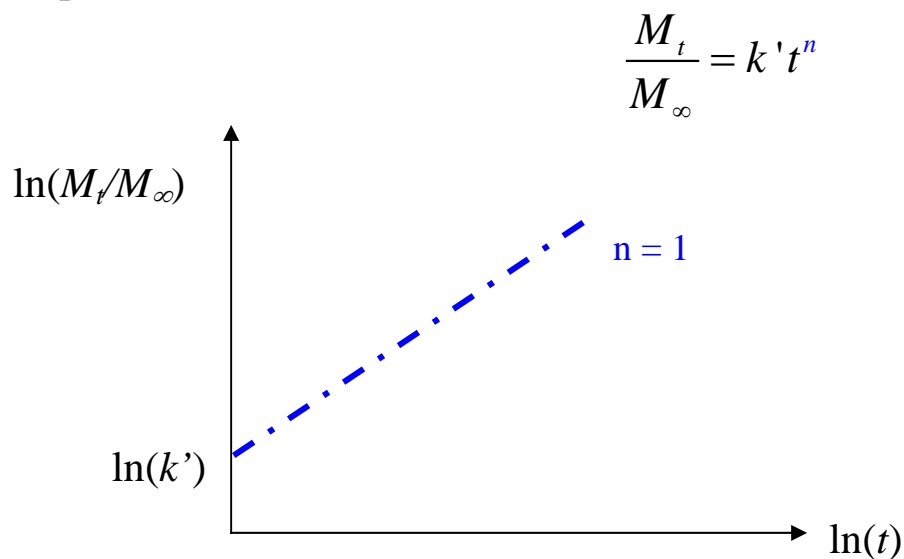
glassy polymer matrix
with dispersed drug



H₂O swelling provides
mobility for drug release



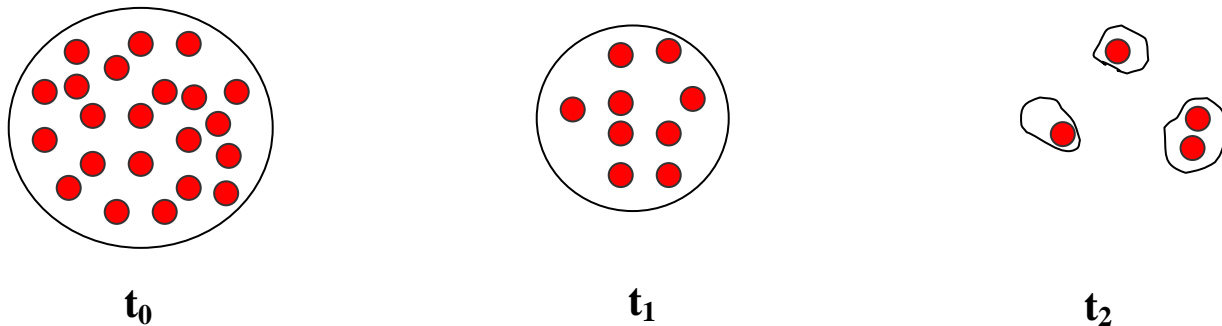
Complex release kinetics: modeled by fitting experimental data to power law expression.



2. Chemically Controlled Approaches

a) Eroding Monolithic Device

Drug is incorporated into a **bioerodible or dissolvable** polymer **matrix**



i) Surface Erosion Devices

$$\frac{dM_t}{dt} = k_e A_e$$

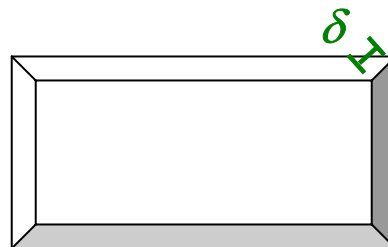
A_e = instant surface area
 k_e = rxn or dissolution rate const.

release rate = strong function of device geometry

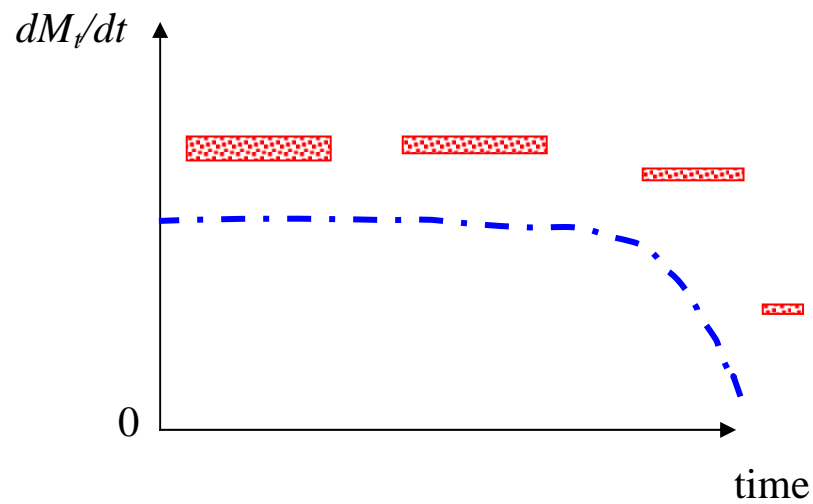
For a slab:

$$A_e \approx \frac{2M_\infty}{C_0 \delta} \approx \text{const}$$

$$\frac{dM_t}{dt} = \frac{2k_e M_\infty}{C_0 \delta}$$



⇒ zero-order release kinetics



For other geometries, A_e is a function of time:

$$\frac{dM_t}{dt} = k_e A_e(t)$$

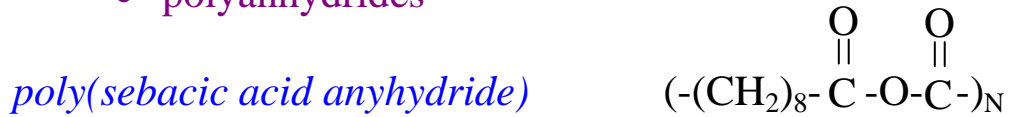
For various geometries, the solution to this expression is:

$$\frac{M_t}{M_\infty} = 1 - \left[1 - \frac{k_e t}{C_0 \frac{\delta}{2}} \right]^n$$

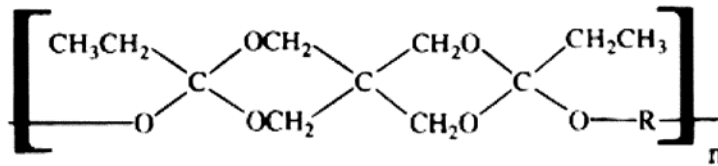
Geometry	δ	n
slab	thickness	1
cylinder	diameter	2
sphere	diameter	3

Matrix Examples:

- polyanhydrides



- poly ortho esters *DETOSU*



where R = $(\text{CH}_2)_5$

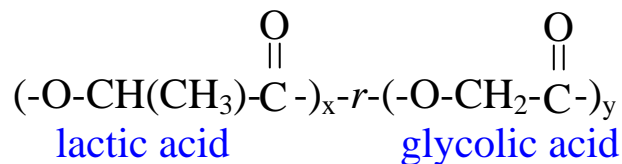
ii) Bulk Erosion Devices

- uniform hydrolysis of bulk matrix polymer
- hydrolysis rate vs. drug diffusion controls release rate

$$\frac{dM_t}{dt} \sim t^n \quad \Rightarrow n = -1/2 \text{ drug diffusion limited}$$

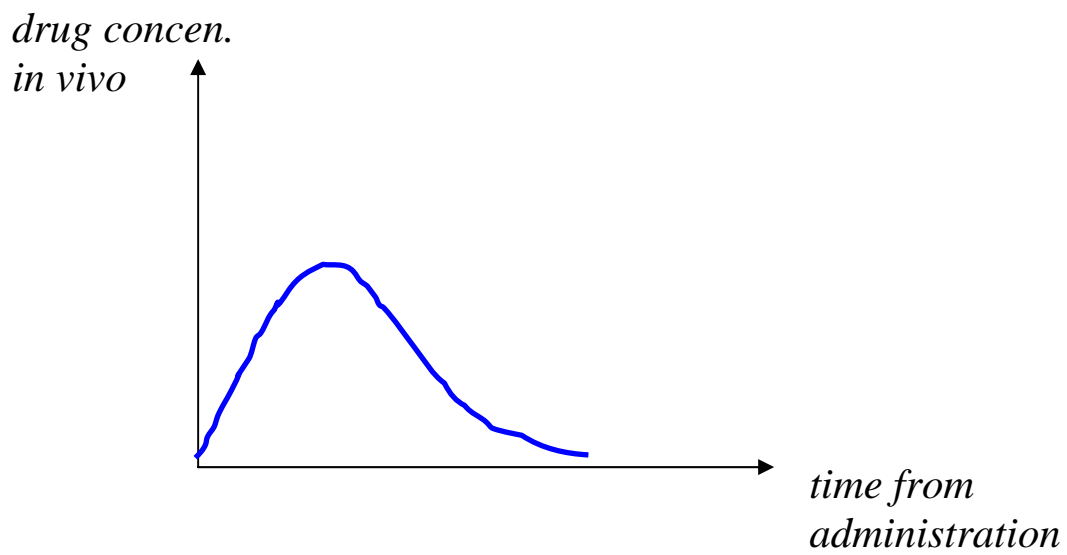
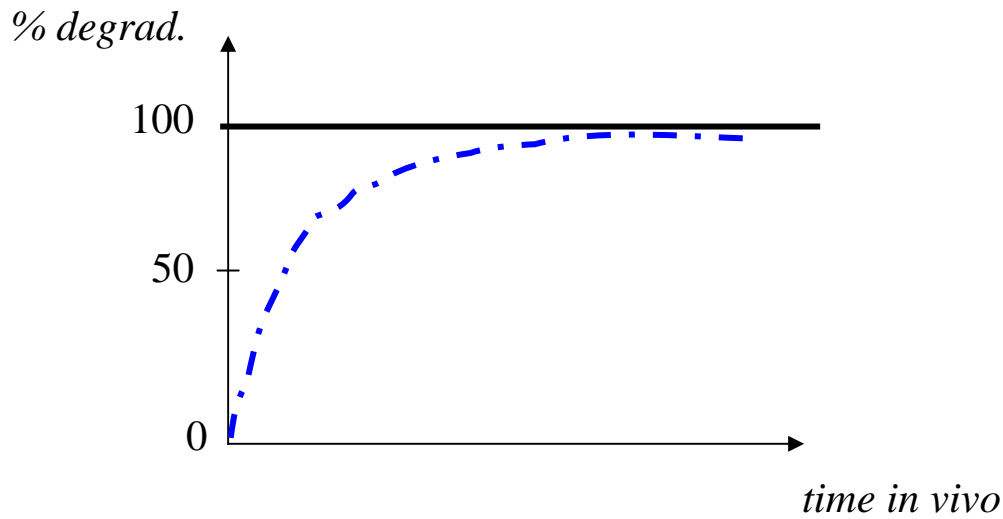
Matrix Example:

poly(lactide-co-glycolide)

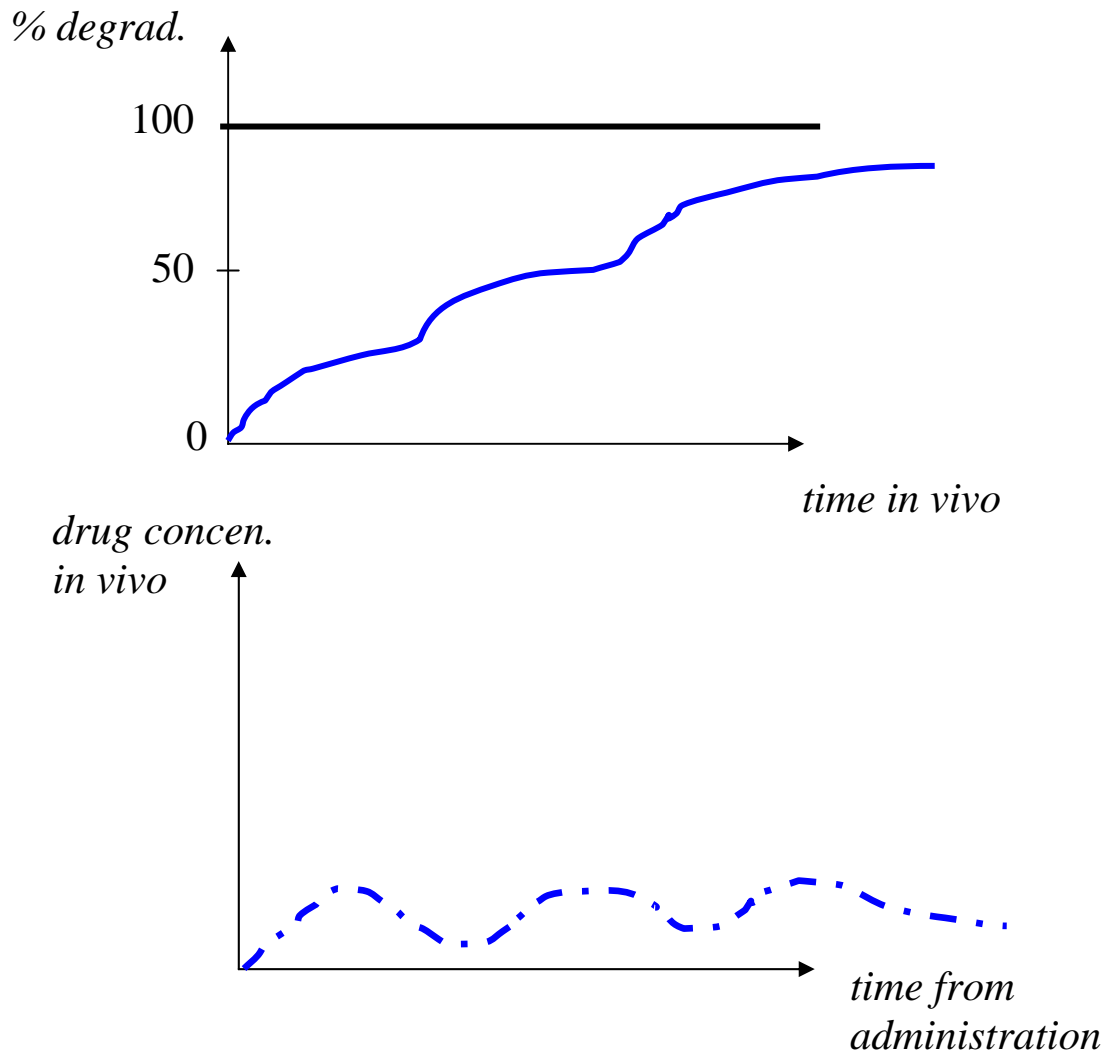


iii) Pulsed release systems

Mixture of eroding particles with different degradation rates

Degradation Profile for Single Eroding Component (schematic)

Degradation Profile for Mixture of Components (ex., microspheres)



Applications Example: “one shot” vaccines with multiple antigens

TT tetanus toxoid
 DT diphtheria toxoid
 HBsA hepatitis B surface antigen
 SEB staphylococcal enterotoxoid B

Vaccines stimulate Ab production

⇒ How can we achieve different degradation rates?

Factors influencing degradation:

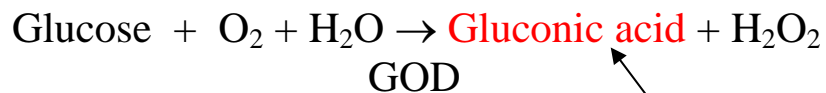
- Composition (e.g., PLGA copolymer LA:GA ratio)
- Geometry

iv) Regulated systems

Incorporate a component that responds to the *in vivo* environment

- Enzyme that catalyzes degradation in presence of a substrate

Example: GOD-regulated insulin release



pH drop promotes acid hydrolysis or swelling of matrix

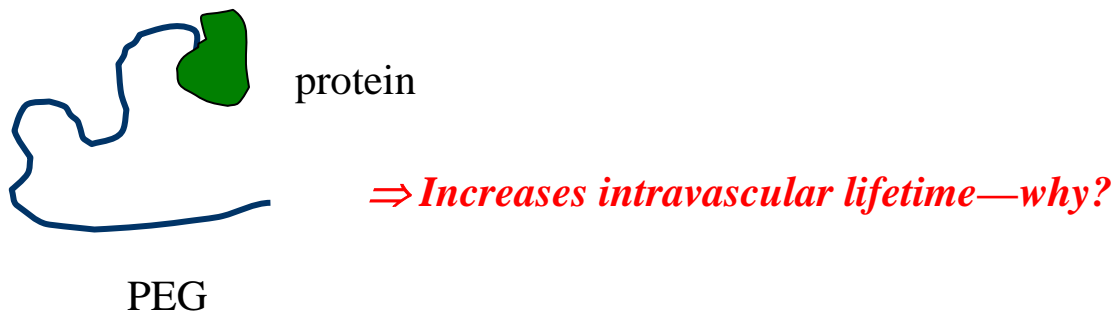
b) Polymer-Drug Conjugates

Therapeutic agent is covalently or ionically bound to a polymer through a cleavable bond

Purposes:

- increase resistance to proteolysis (protein drugs)
- reduce antigenicity/immunogenicity
- prolong plasma circulation lifetime
- enhance water solubility of hydrophobic agents
- reduce toxicity

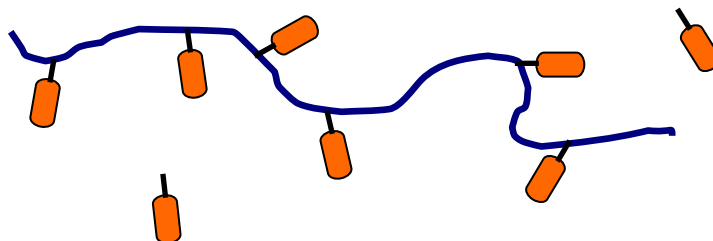
Example 1: Therapeutic proteins tethered to polyethylene glycol (PEG)



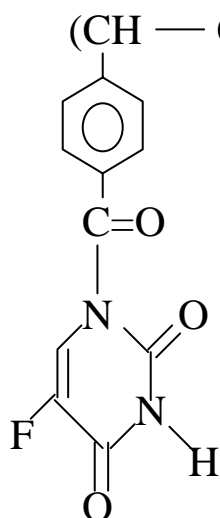
Some clinical systems:

- PEG-adenosine deaminase (FDA appr. immunodeficiency therapy)
- PEG-asparaginase (FDA appr. for lymphoblastic leukemia)
- PEG-hemoglobin
- PEG-interleukin 2
- PEG-alpha interferon
- PEG-colony stimulating factor

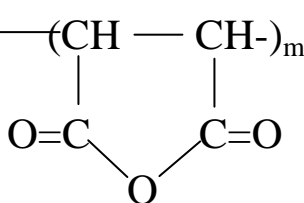
Example 2: Chemotherapeutic agent attached to water-soluble or hydrolysable backbone



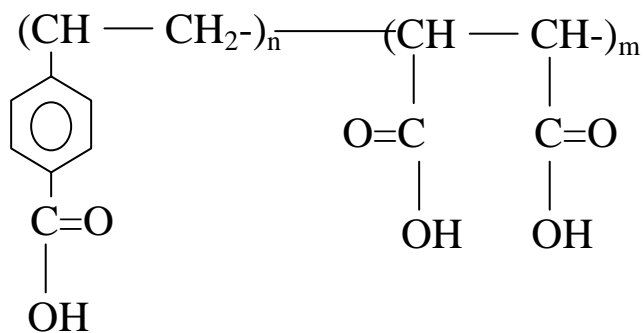
vinyl benzyl
fluorouracil



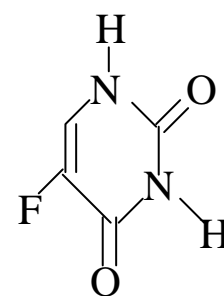
maleic
anhydride



hydrolysis



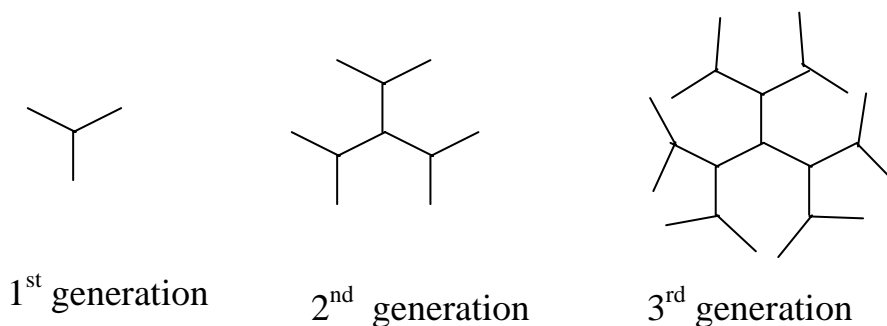
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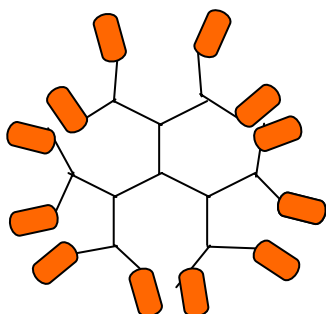
5-fluorouracil

Example 3: Dendrimer Drug Conjugates (early development)

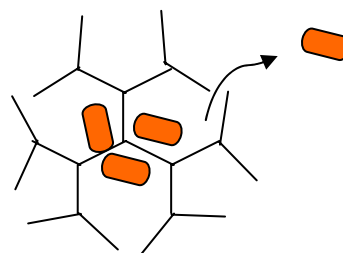
Dendrimers – sequentially synthesized, hyperbranched macromolecules



Two strategies for controlled drug delivery



drug-conjugated
chain ends



Drug-filled core
(diffusion-controlled)

References

Encyclopedia of controlled drug delivery vol. 1, E. Mathiowitz, ed., John Wiley & Sons, NY, 1999.

Encyclopedia of controlled drug delivery vol. 2, E. Mathiowitz, ed., John Wiley & Sons, NY, 1999.

Biomaterials Science: An introduction to materials in medicine, B.D. Ratner et al., eds., Academic Press, NY 1996.