# APPLICATIONS OF PHYSIOLOGICALLY-BASED PHARMACOKINETIC MODEL TO SMOKEABLE / INHALABLE TOBACCO PRODUCTS



#### ABSTRACT

Mathematical modeling is a non-invasive approach for predicting the time course concentration of compounds within human tissues. We have developed and validated a physiologically based pharmacokinetic (PBPK) model with physiological and biological components to describe nicotine pharmacokinetics using tobacco products [1]. The previous model [2-3] has been enhanced to divide the uptake route in the model into three regions; Buccal Cavity (BC), Upper Respiratory Tract (conducting airways, URT) and Lower Respiratory Tract (transitional airways and alveolar region, LRT). Our PBPK model was validated for various tobacco products, including cigarette, smokeless tobacco, E-vapor, and nicotine inhaler. Based on regional deposition and permeation rate of nicotine within each region, the PBPK model predicts the product specific nicotine PK profile. In this study, a sensitivity analysis was carried out in an attempt to examine the effect of nicotine level in smokeable/inhalable products, aerosol mass and regional deposition of nicotine within different regions of human respiratory tract on nicotine PK profile. The results demonstrated that higher nicotine deposition in BC, and URT leads to a lower nicotine  $C_{max}$  (maximum plasma concentration), due to the slower uptake in these regions compared to LRT. Additionally, higher aerosol mass results in higher nicotine delivery, and hence, a higher level of nicotine concentration in plasma over time. Increasing the nicotine delivery increased C<sub>m</sub> proportionately, however, did not significantly affect t<sub>max</sub> (time to reach C<sub>max</sub>), as t<sub>max</sub> mainly depends on type of product along with the use conditions. In addition to the aforementioned validation cases, capability of the model for predicting PK profile of Tobacco Heating System (THS) is also tested, and the results demonstrate good agreement between PK data from the experiment and prediction by the model. We report here a robust PBPK model that can be used to predict nicotine pharmacokinetics from a wide variety of tobacco products.

# OBJECTIVES

Expand the understanding of internal exposure to nicotine through a parametric study, examining the effect of various parameters such as nicotine concentration, smoking topography and regional absorption of nicotine within different regions of human respiratory tract on nicotine pharmacokinetic profile.



- □ Within each region, the model includes product specific descriptions of the flux of nicotine into plasma, as well as the flux of nicotine from the BC and URT to the Gastrointestinal (GI) tract. These descriptions are based on regional absorption and permeation models of nicotine into plasma.
- Mucous diffusion in URT is based on water diffusivity.
- Epithelial layer diffusion in URT estimated to provide the best fit to the permeation model expected flux of nicotine and the plasma time-course across all product types.
- Diffusion coefficients were scaled to tissue width and surface area.
- Nicotine reaching the lower respiratory tract is assumed to be transferred to the plasma immediately
- The model results are compared with the available data only.

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#### METHOD



#### EXAMPLE 1: **Cigarette: Model, Mean and Individual Data** 30 25 ر 20 آت<sup>20</sup>

\*Study: Subjects took up to 10 inhalations of the cigarette at 30-sec intervals, with the inhalation duration as desired by the subject \*Altria Client Services LLC Study No. ALCS-RS-15-05-MST **EXAMPLE 2:** 

#### Nicotrol<sup>®</sup> Inhaler : Model, Mean and Individual Data



\*Study: Each product administration consisted of using one unit of the product, with puffs taken approximately every 15 seconds for 20 minutes \*Altria Client Services Inc., Study No. CEL-LIQ-01-12, Celerion Project AA98611

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# VALIDATION

The model was validated for various tobacco products [6], including cigarette, smokeless tobacco, E-vapor, as well as Nicotrol® Inhaler.





| Cases | Aerosol<br>Mass<br>(mg/puff) | Nicotine<br>% | Nicotine<br>(mg/puff) | BUCF  |  |
|-------|------------------------------|---------------|-----------------------|-------|--|
| 2a    | 4                            | 1             | 0.04                  | 0.125 |  |
| 2b    | 4                            | 2             | 0.08                  | 0.125 |  |
| 3b    | 4                            | 3             | 0.12                  | 0.125 |  |
| 4b    | 4                            | 4             | 0.16                  | 0.125 |  |
|       |                              |               |                       |       |  |



| Cases | Aerosol<br>Mass<br>(mg/puff) | Nicotine<br>% | Nicotine<br>(mg/puff) | BUCF  | ι |
|-------|------------------------------|---------------|-----------------------|-------|---|
| 3a    | 4                            | 3             | 0.12                  | 0.125 | 0 |
| 3b    | 4                            | 3             | 0.12                  | 0.25  | ( |
| 3c    | 4                            | 3             | 0.12                  | 0.5   |   |
| 3d    | 4                            | 3             | 0.12                  | 0.6   |   |
|       |                              |               |                       |       |   |



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### RESULTS