

Introduction

- Pregabalin QD formulation was developed using **GLARS platform technology** by GL PharmTech Corporation^{1), 2)}.
- The pharmacokinetic studies were undertaken :
 - to evaluate the **pharmacokinetic properties** of a **single dose** of **pregabalin QD formulation (150mg)** relative to those of twice a day (**BID**) administration of pregabalin IR (**Lyrice Capsule 75mg**) administered after high-fat meal respectively (study 1);
 - to evaluate the **effect of food** on a **single dose** of **pregabalin QD formulation (150mg) administered fasted** relative to those of a **single dose** of **pregabalin QD formulation (150mg) administered after high-fat meal** (study 1) ;
 - to evaluate the pharmacokinetic properties of a **multiple (3 days) dose** of **pregabalin QD formulation (150mg)** administered after evening meal relative to those of twice a day administration of pregabalin IR (**Lyrice Capsule 75mg**) administered after meal during 3 days respectively (study 2);
 - to evaluate the **dose proportionality** of **four different doses** of **QD formulation (150, 300, 450 and 600 mg/day, respectively)** administered **after evening meal** in healthy male volunteers (study 3).

Methods

- Study 1** was a phase I, open-label, randomized, 3-period, 6-sequence crossover study. Healthy male volunteers received **single-dose pregabalin QD formulation** after fasted or after high-fat meal or **twice a day administration of pregabalin IR** after high-fat meal respectively.
- Study 2** was a phase I, open-label, randomized, 2-period, 2-treatment crossover study. Healthy male volunteers received **single-dose pregabalin QD formulation** after evening meal or **twice a day administration of pregabalin IR** after meal during 3 days respectively.
- Study 3** was a phase I, open-label, randomized, single dose, parallel study. Each 10 healthy male volunteers randomized for **pregabalin QD formulation of 150, 300, 450 and 600 mg**, respectively. In order to access **dose-proportionality** of pregabalin QD formulation, the **power model** was applied.
- All the study serial blood samples were collected up to 36 hrs for pharmacokinetic evaluation after oral dose. Plasma concentrations of pregabalin were determined by validated LC/MS/MS method. Pharmacokinetic parameters were obtained by noncompartmental methods using PhoenixTM WinNonlin software. Adverse events were monitored throughout all studies.

Results

❖ Study 1 (Single admin. & food effect study)

- Treatment A : Lyrice capsule 75 mg bid (After high-fat meal)
- Treatment B : pregabalin QD formulation 150mg (After high-fat meal)
- Treatment C : pregabalin QD formulation 150mg (Fasted)

Table 1. Comparative pharmacokinetic parameters between pregabalin QD formulation and Lyrice capsule 75mg bid at fed state in healthy male volunteers (N=27)

| Pharmaco-kinetic parameters | Geometric LS mean [Tr. A] | Geometric LS mean [Tr. B] | Geometric LS mean [Tr. C] | Point Estimate [B/A] | Point Estimate [B/C] | Confidence Interval [B/A, 90%] | Confidence Interval [B/C, 90%] |
|--------------------------------|---------------------------|---------------------------|---------------------------|----------------------|----------------------|--------------------------------|--------------------------------|
| C _{max} (ng/mL) | 1,624 | 1,701 | 1,166 | 1.047 | 1.458 | [0.971, 1.129] | [1.353, 1.573] |
| AUC _{last} (hr·ng/mL) | 24,110 | 18,255 | 11,033 | 0.757 | 1.655 | [0.694, 0.826] | [1.518, 1.804] |
| t _{1/2} (hr) | 5.71 | 6.31 | 7.43 | 1.105 | 0.849 | | |
| T _{max} (hr) | 2.23 | 4.75 | 3.03 | 2.130 | 1.567 | | |

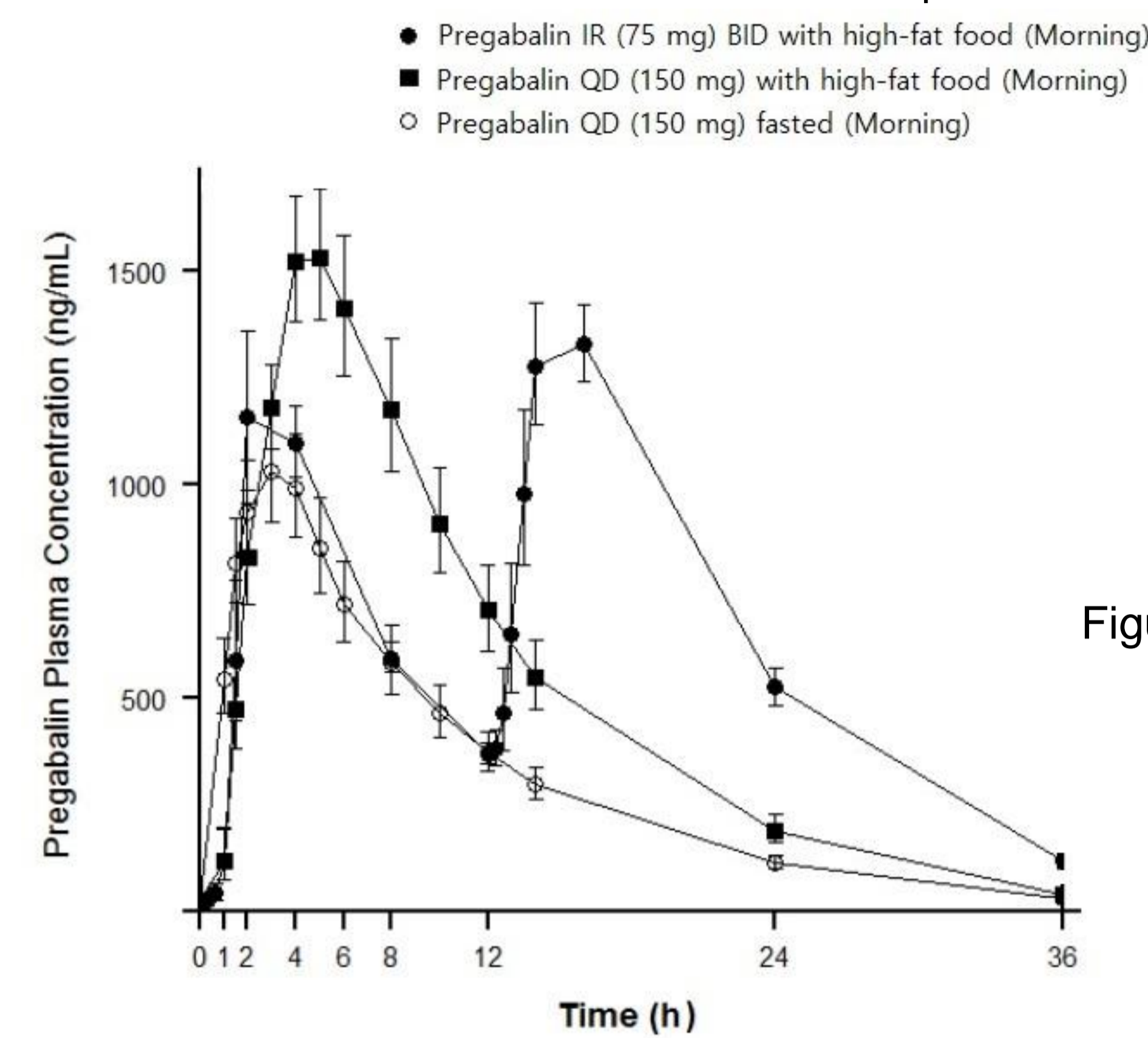


Figure 1. Mean plasma pregabalin concentration-time profiles after single administration of the treatment A, B and C in healthy male volunteers (N=27)

❖ Study 2 (Multiple admin. study)

- Reference : Lyrice capsule 75 mg bid (After standard meal)
- Test : pregabalin QD formulation 150mg (After evening standard meal)

Table 2. Comparative pharmacokinetic parameters after multiple administration during 3 days between pregabalin QD formulation and Lyrice capsule 75mg bid after standard meal in healthy male volunteers (N=24)

| Pharmaco-kinetic parameters | Geometric LS mean [Test] | Geometric LS mean [Ref] | Point Estimate [Test/Ref] | Confidence Interval [90%] |
|-----------------------------------|--------------------------|-------------------------|---------------------------|---------------------------|
| C _{ss, max} (ng/mL) | 2,022 | 1,583 | 1.277 | [1.210, 1.348] |
| C _{ss, min} (ng/mL) | 263 | 493 | 0.533 | [0.971, 1.129] |
| AUC _{T(0-24)} (hr·ng/mL) | 23,813 | 24,444 | 0.974 | [0.933, 1.017] |
| t _{1/2} (hr) | 5.98 | 5.74 | 1.042 | |
| T _{max} (hr) | 5.88 | 6.05 | 0.972 | |
| R | 1.07 | 1.06 | | |

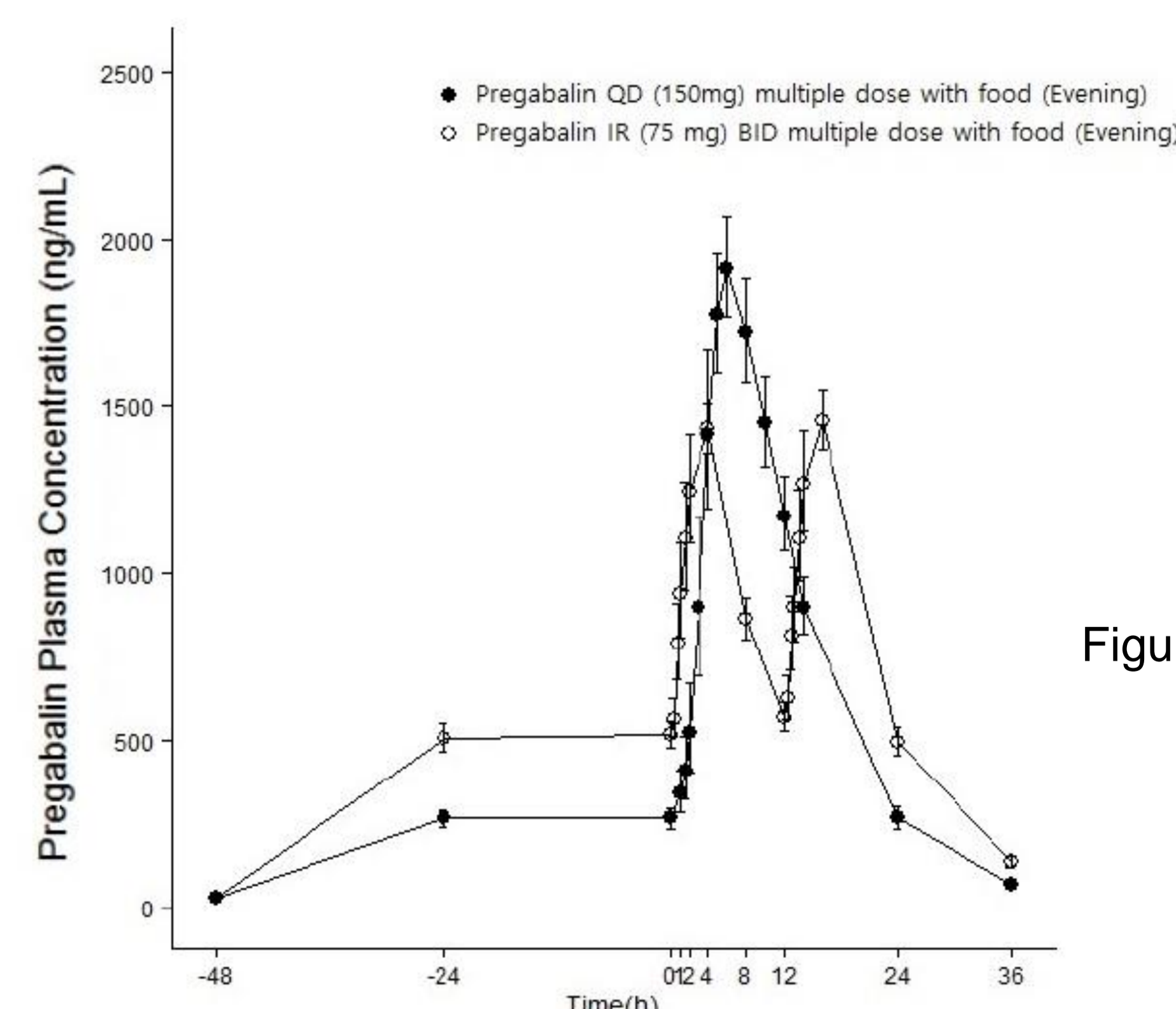


Figure 2. Mean plasma pregabalin concentration-time profiles after multiple administration of pregabalin QD formulation and Lyrice® 75mg capsule bid after standard meal during 3 days (N=24)

❖ Study 3 (Dose-proportionality study)

Table 3. Mean pharmacokinetic parameters along with dose increase of pregabalin QD formulation after evening standard meal in healthy male volunteers

| Pharmaco-kinetic parameters | pregabalin QD 150 mg (N=10) | pregabalin QD 300 mg (N=10) | pregabalin QD 450 mg (N=9) | pregabalin QD 600 mg (N=9) |
|--------------------------------|-----------------------------|-----------------------------|----------------------------|----------------------------|
| C _{max} (ng/mL) | 2,063 | 3,976 | 5,800 | 7,342 |
| AUC _{last} (hr·ng/mL) | 26,440 | 52,996 | 77,633 | 106,054 |
| t _{1/2} (hr) | 6.51 | 6.37 | 6.23 | 6.23 |
| T _{max} (hr) | 6.20 | 8.20 | 7.11 | 7.44 |
| Vd/F (L) | 52.24 | 50.74 | 50.98 | 50.10 |

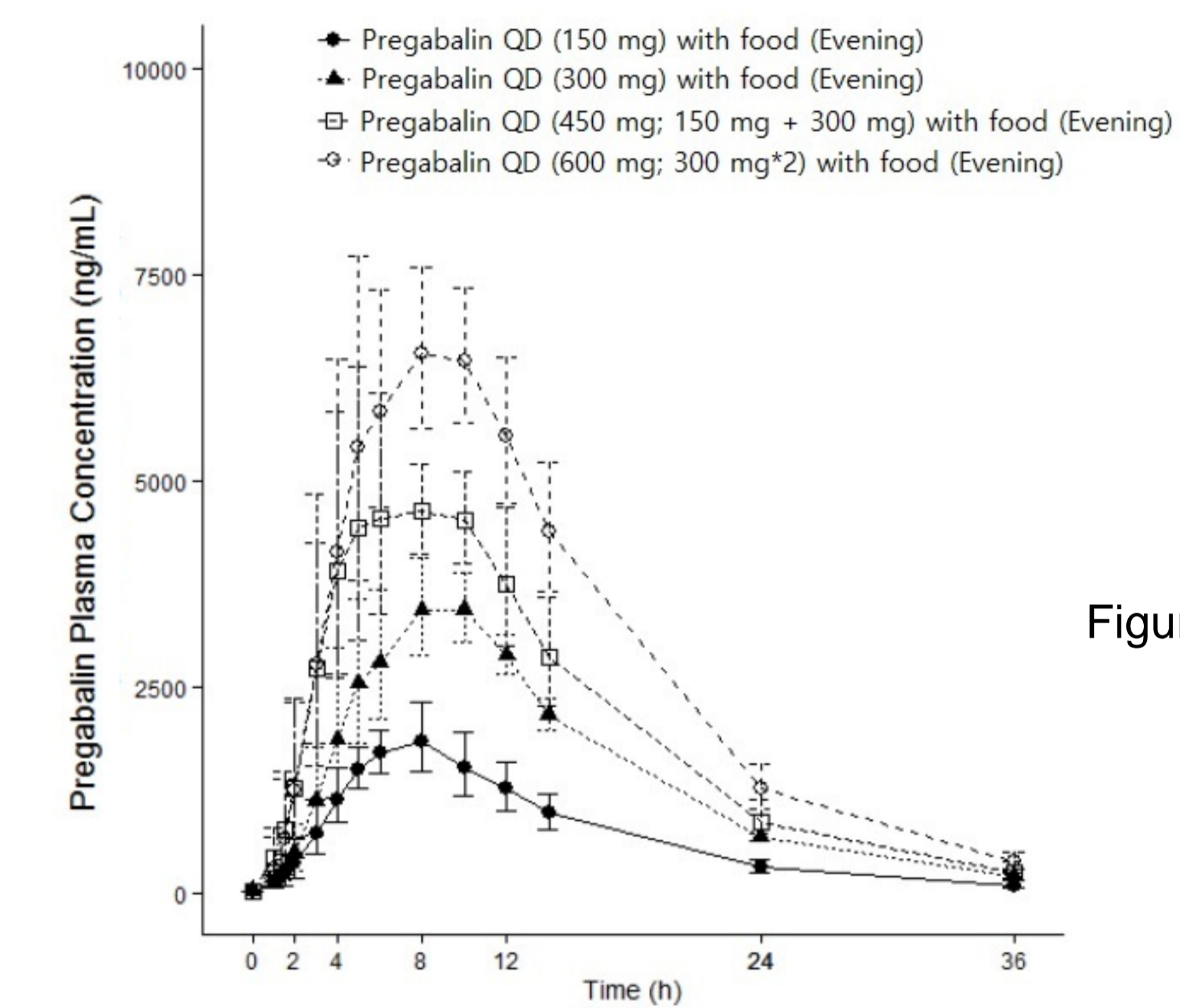


Figure 3. Mean plasma pregabalin concentration-time profiles in various treatments of single administration of ranging from 150mg to 600mg of pregabalin QD formulation in healthy male volunteers

CONCLUSIONS

- There was a dramatic absorption enhancement of pregabalin QD formulation after high-fat morning meal in single administration study, although it was still not sufficient to be comparable to Lyrice® capsule bid in terms of extent of drug absorption (exposure, AUC) despite the equivalence in rate of absorption (peak concentration, C_{max}).
- High-fat food increase pregabalin absorption for pregabalin QD formulation by approximately 65%.
- Study 2 shows a remarkable increase of AUC_{T(0-24)} of pregabalin QD formulation, getting up for equivalence to Lyrice® capsule bid, which possibly indicate the change of administration time from morning to evening would meet the assumption of further retention followed by additional drug absorption.
- There is a possibility of further drug absorption in pregabalin QD formulation in case of being taken after regular evening meal, which could provide a possible chance of further retention of the tablet in stomach due to posture change in sleeping time, as suggested by Pfizer's research group.
- No serious adverse events and all the adverse events were recovered without any medical action during the treatment as well as after the study; No statistical significance between the treatments.
- Pregabalin QD formulation appeared to be generally well tolerated and to have dose-proportional pharmacokinetics within the clinically recommended dose range in healthy male volunteers.

❖ References

- J.S. Park, et al. A novel three-layered tablet for extended release with various layer formulations and *in vitro* release profiles. *Drug Development and Industrial Pharmacy*, 2011, 37(6), 664–672.
- L.A. Hodges, et al. Pharmacoscintigraphy confirms consistent tamsulosin release from a novel triple-layered tablet. *Int. J. Pharm.*, 2013, 454, 41–46.