J. Victor Garcia, Chair of Department of Microbiology at University of Alabama Birmingham Long-acting formulations based on ISFIs for TB

"LA rifabutin was our first foray into the TB field."

In situ forming implant (ISFI) technology

Process is simple and scalable:

- Prepare a liquid suspension comprising three key components (pink).
- The suspension forms a solid after injection into the body.



Many clinical examples of long, efficacious drug release.

• Successful delivery of single, double, and triple drug combinations for HIV has inspired development for TB. Multiple parameters are easily modified for any given drug to generate a formulation with desired drug delivery.

- Polymer molecular weight (MW). Higher MW increases or decreases the initial burst release of hydrophilic or hydrophobic drugs, respectively.
- Polymer concentration. Lower concentration increases the initial burst release.
- Drug load. Higher load increases initial burst release.
- Polymer composition, polymer end group, solvent type, and additives. Affect the release profile of any formulation.

Previous work on LA RFB formulations

Preclinical studies of initial formulations (RFB14 and RFB14KH).

- Long duration *in vivo* drug release.
 - Both formulations release RFB and maintain plasma concentrations above the MIC for Mtb ≥16 weeks.
- Efficacy of RFB14KH for *Mtb* prevention and treatment in mice.
 - Pre- (A) and post-exposure (B) dosing demonstrate significant bactericidal activity in Mtb tissue targets at day 28 vs placebo.

RFB14KH modification generates new formulations with improved PK (RK400, RK400OA150).

- Increased drug delivery enables preclinical PK translation from NHPs to humans.
- RK400OA150 > RK400 > RFB14KH. AUCRK400OA150 > AUCRFB14KH (5.2-fold; p<0.0001) AUCRK400 > AUCRFB14KH (3.5-fold; p<0.0001) AUCRK400OA150 > AUCRK400 (1.5-fold; p=0.0003)





LA Delamanid formulations

Rationale for delaminid (DEL).

- Effective anti-TB agent developed for MDR-TB (FDA approval in Aug 2017). Inhibits synthesis of mycobacterial cell wall components.
- Low MIC for *Mtb* (12.5 ng/mL).

- PK studied in three species (mouse, rat, and dog).
- Prepared several DEL formulations.
- Liquid suspensions are transportable and all form solid implants. Favorable in vitro drug release (PF127/DEL-E and PF68/DEL-E).
- Both formulations release delaminid and sustain conc >100-fold above the MIC for *Mtb* for ≥ 98d.

LA multi-drug delivery systems

Two-in-one drug formulation for TPT and TB treatment.

- Considerations for pairing RFB and BDQ.
 - Different mechanisms of action. RFB inhibits bacterial RNA synthesis; BDQ inhibits mycobacterial ATP synthase.
 - Different MIC, half-life, logP, and solubility. DMSO is the best solvent for RFB; NMP is the best solvent for BDQ.

- Prepared several RFB/BDQ co-formulations (RQ1, RQ2, RQ3, RQ4, RQ5).
 - Liquid suspensions form solid implants.
- Individual drug release (in vivo).
 - RFB was released. PK was similar to the single-drug formulation (RFB14KH).
 - BDQ was not released. Failed drug release drug was observed with initial delaminid formulations and is fixable.
 - Further formulation work is needed. To modify drug release properties.

Two-in-one drug formulation for TB and HIV prevention.

- Considerations for pairing RFB and Dolutegravir (DTG).
 - DTG is a second generation INSTI with a lot of clinical experience and is expected to come out of patent in a couple of years.
 - There is a theoretical concern that RFB could interfere with DTG concentrations.
- DTG/RFB co-formulation (DTG/RFB-A).
 - Liquid suspension is injectable with a 19G needle and forms a solid implant.
 - Individual drug release.
 - o In vitro (A).
 - Both drugs are released from the polymer.
 - RBT and DTG have similar release kinetics.
 - o In vivo (B).
 - DTG and RFB remained >64 ng/mL ≥42 days.
 - RFB did not impact DTG concentration.
 - Individual drug release from the co-formulation matched published PK data for the single-drug formulations (RFB14KH and ULA-DT).



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