



# Introduction to Aerosol Technology for Drug Delivery

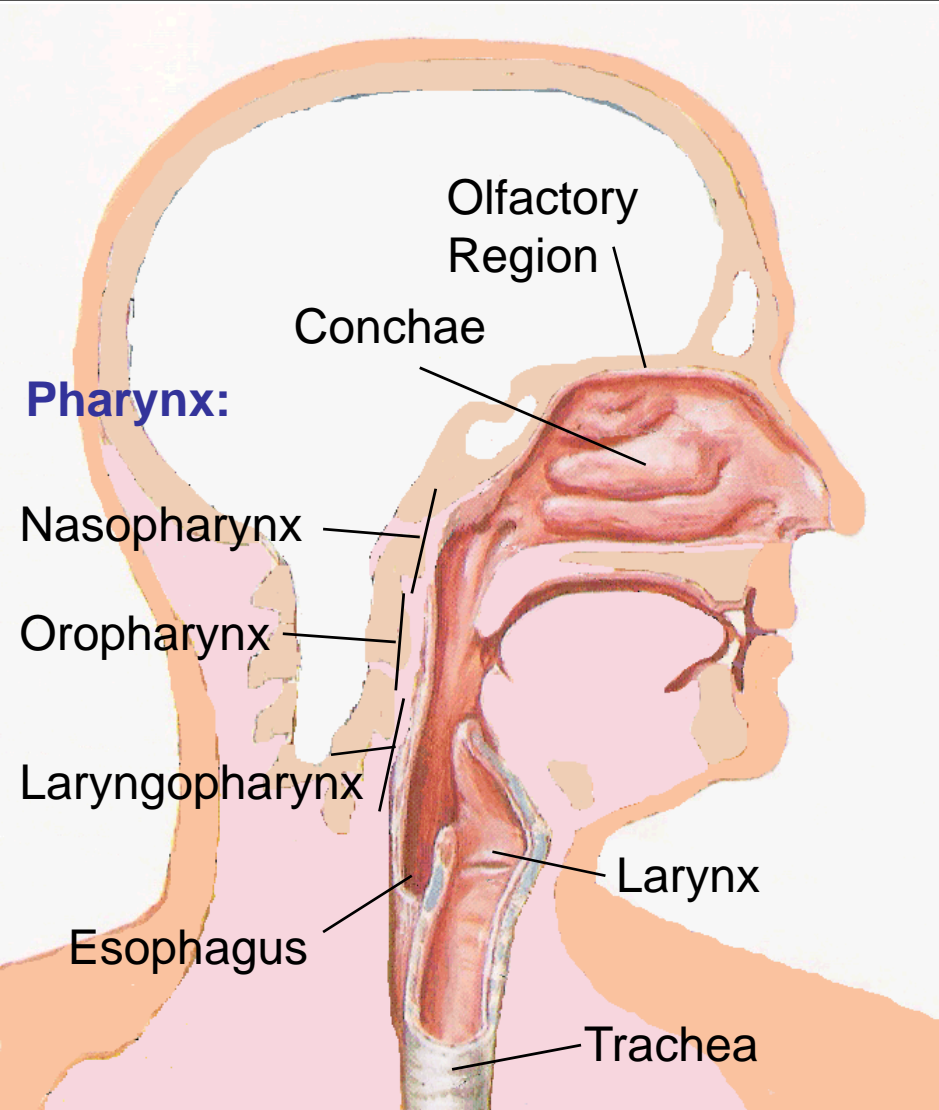
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# Outline

- Anatomy and Physiology of the Respiratory System
- Deposition and Pharmacology
- Delivery Devices
- Powder Manufacture
- Particle Engineering

# The Portal: Nose or Mouth



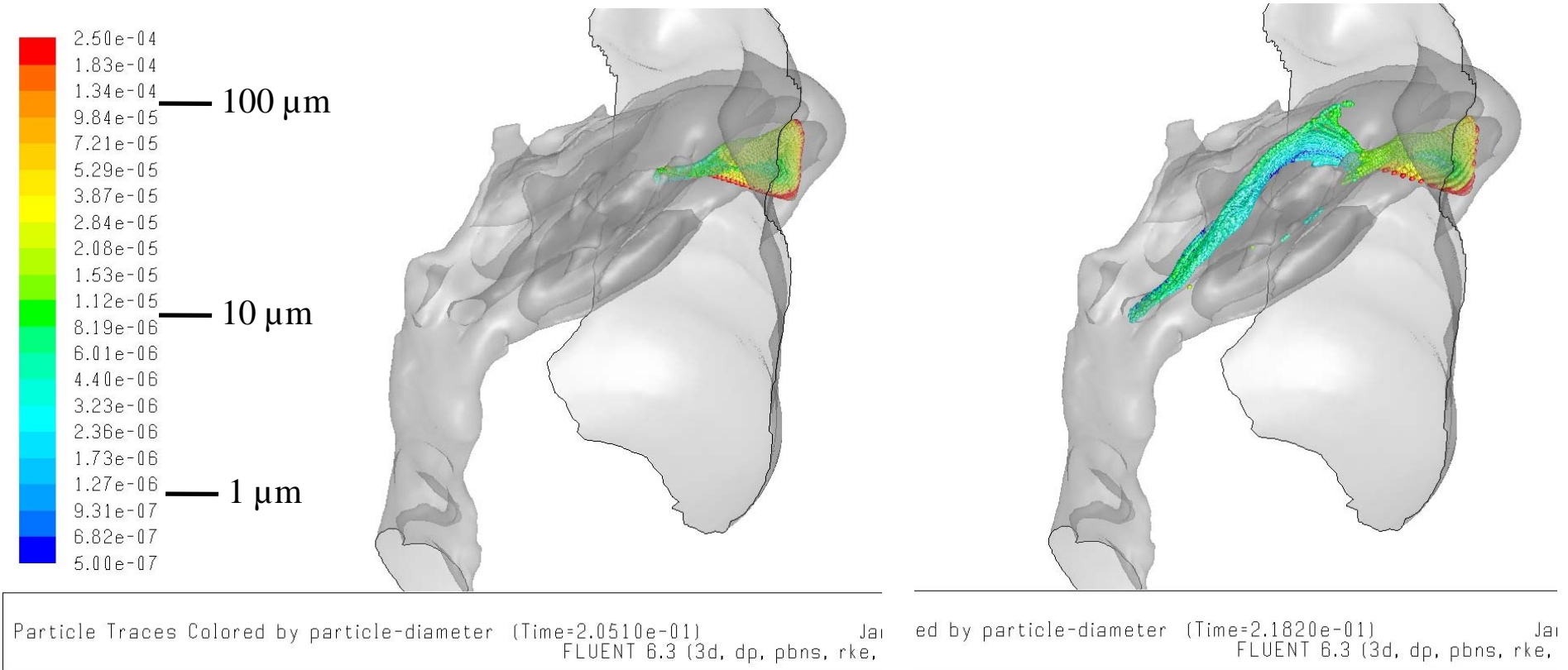
## Nose

- Variable anatomy
- Warms and filters air
  - Captures > 50 % of particles with an aerodynamic diameter  $d_a > 3 \mu\text{m}$
  - Captures > 90 % of particles with  $d_a > 10 \mu\text{m}$
- Surface area:  $150 \text{ cm}^2$
- Cilia and mucus transport particles down the nasal cavity to the pharynx. Mucociliary clearance takes 15 – 20 min.

## Mouth

- Extrathoracic filter function
  - < 10 % for  $d_a < 3 \mu\text{m}$
  - > 65 % for  $d_a > 10 \mu\text{m}$
  - Depends on jaw and tongue position, and on breathing rate
- Extrathoracic volume:  $50 \text{ cm}^3$

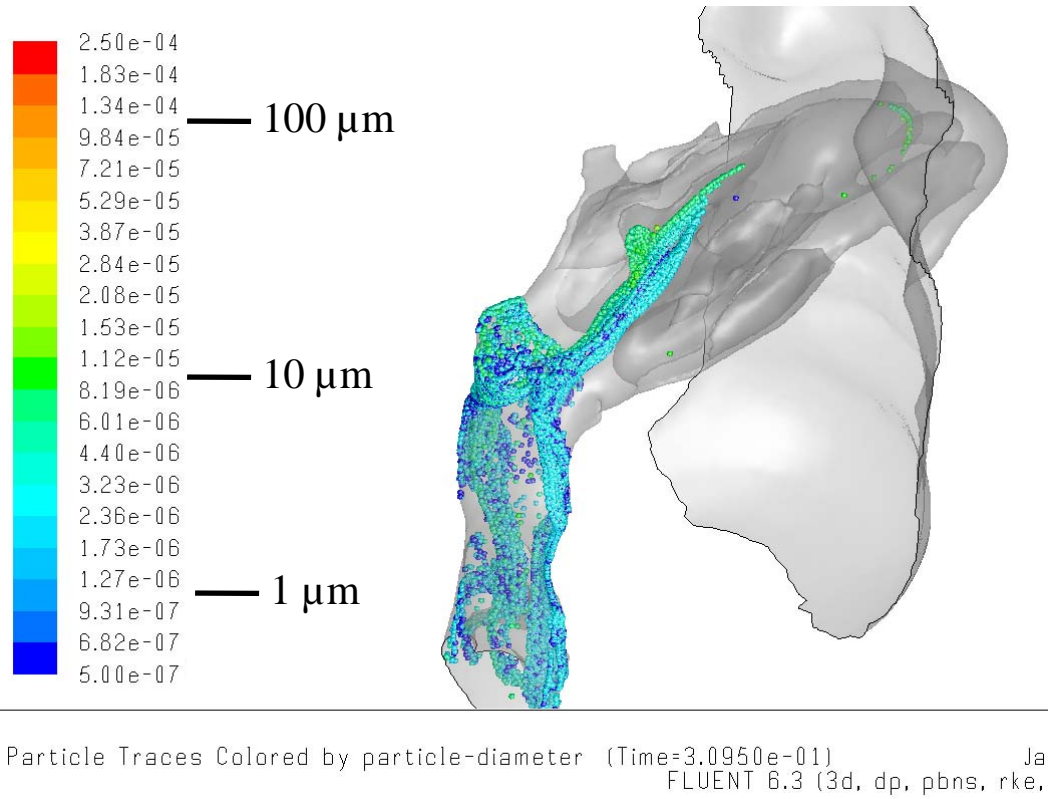
# Particle Tracking with Computational Fluid Dynamics



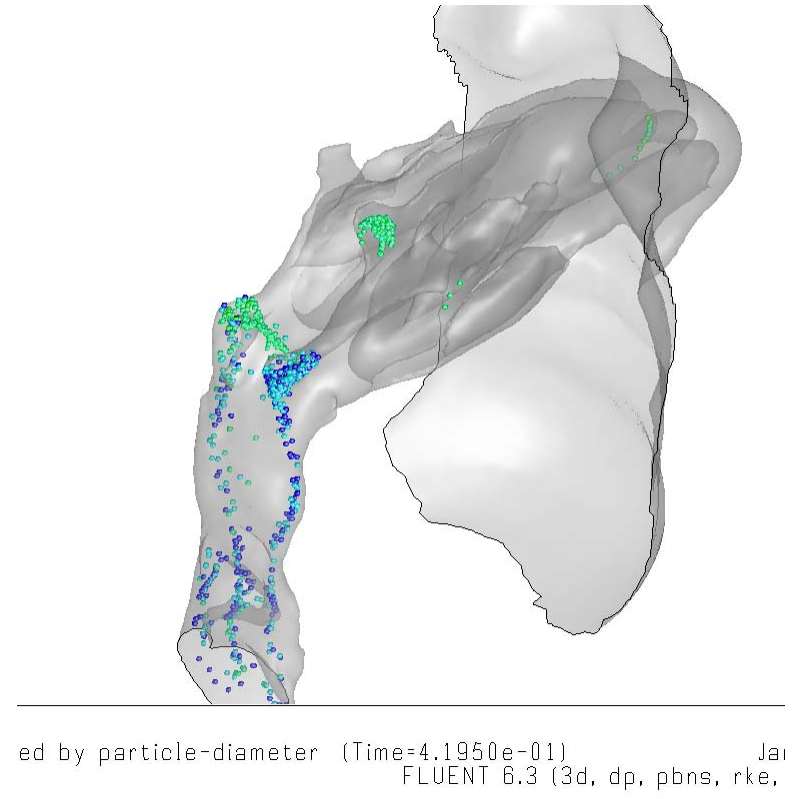
$t = 205 \text{ ms}$

$t = 218 \text{ ms}$

# CFD Particle Tracking

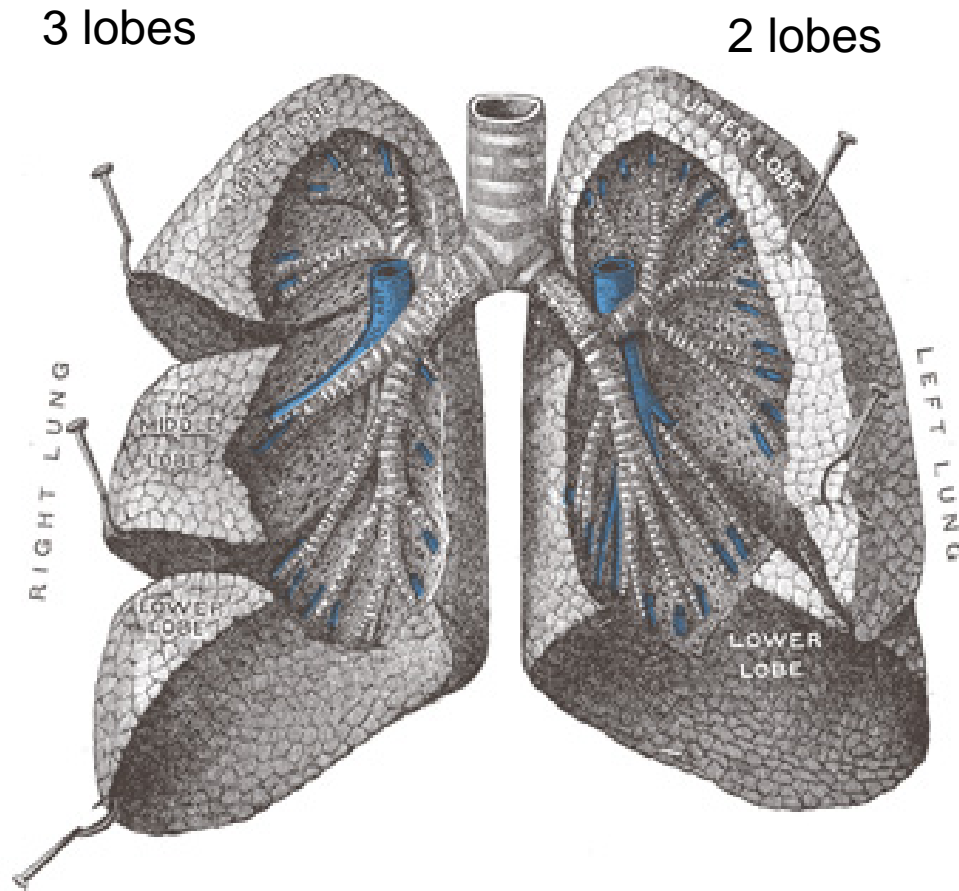


$t = 310 \text{ ms}$



$t = 420 \text{ ms}$

# Lung Anatomy - Overview



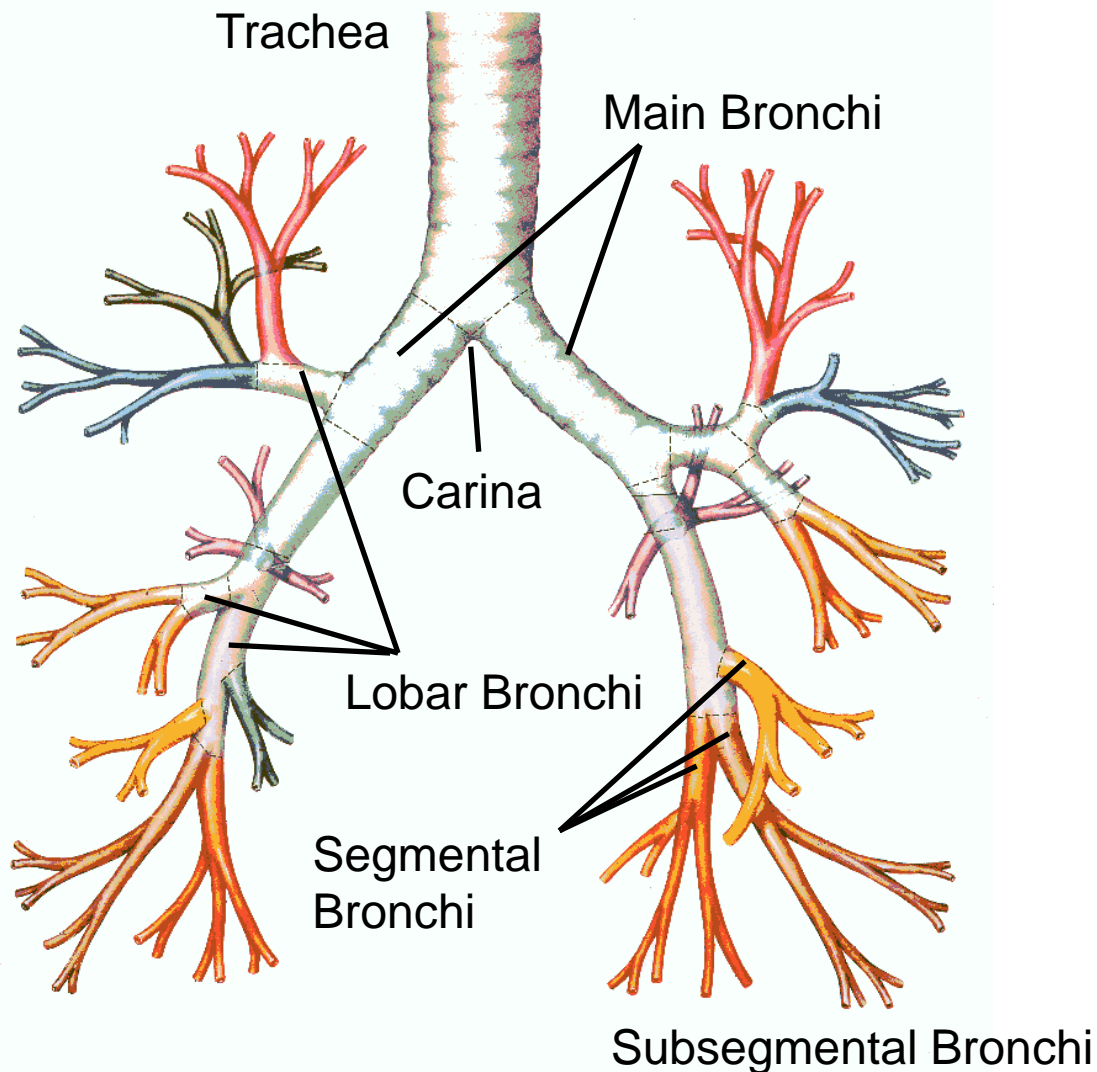
## Conducting Zone

- Trachea
- Bronchi
- Bronchioles
- Terminal Bronchioles
- Volume:  $175 \text{ cm}^3$
- Surface Area:  $3500 \text{ cm}^2$

## Respiratory Zone

- Respiratory Bronchioles
- Alveolar Ducts
- Alveoli
- Volume:  $5,000 \text{ cm}^3$
- Surface Area:  $100 \text{ m}^2$

# Conducting Airways – Trachea and Bronchi



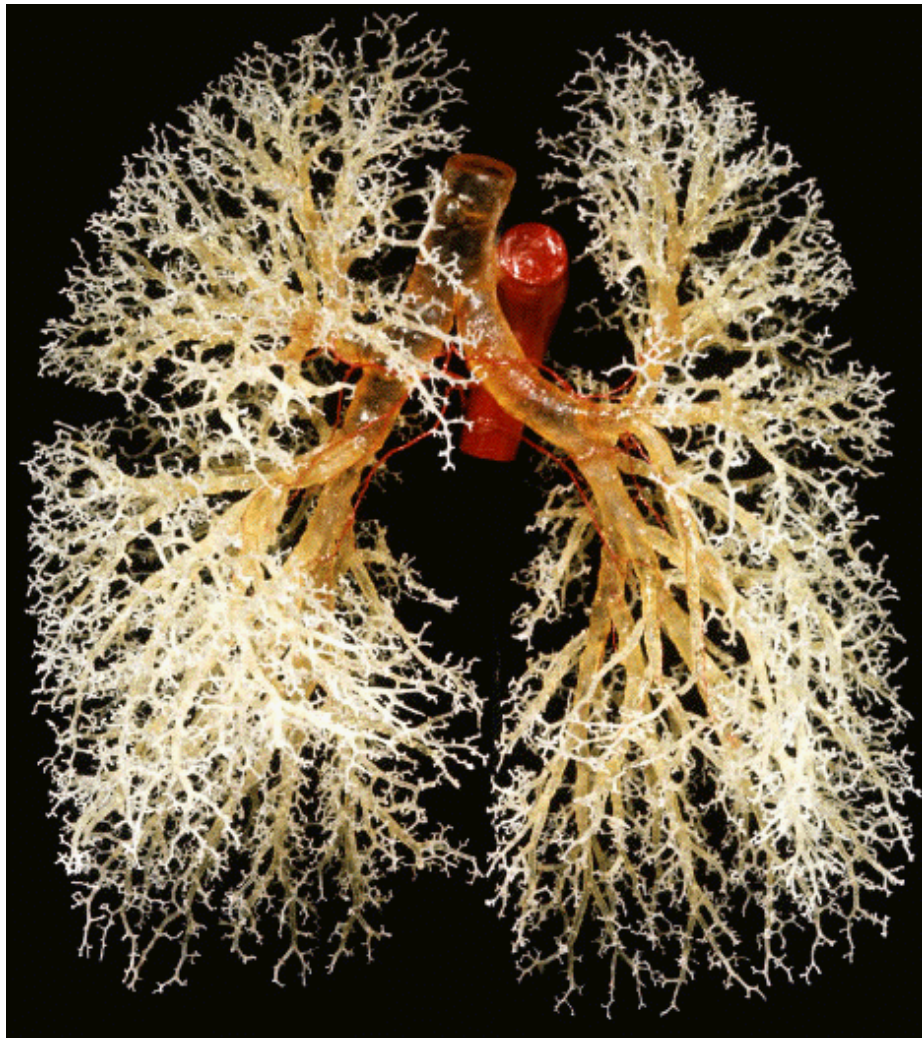
## Structure

- Cartilaginous
- Longitudinal elastic fibers
- Smooth muscle
- Ciliated
- Mucus layer
- Branching with irregular dichotomy

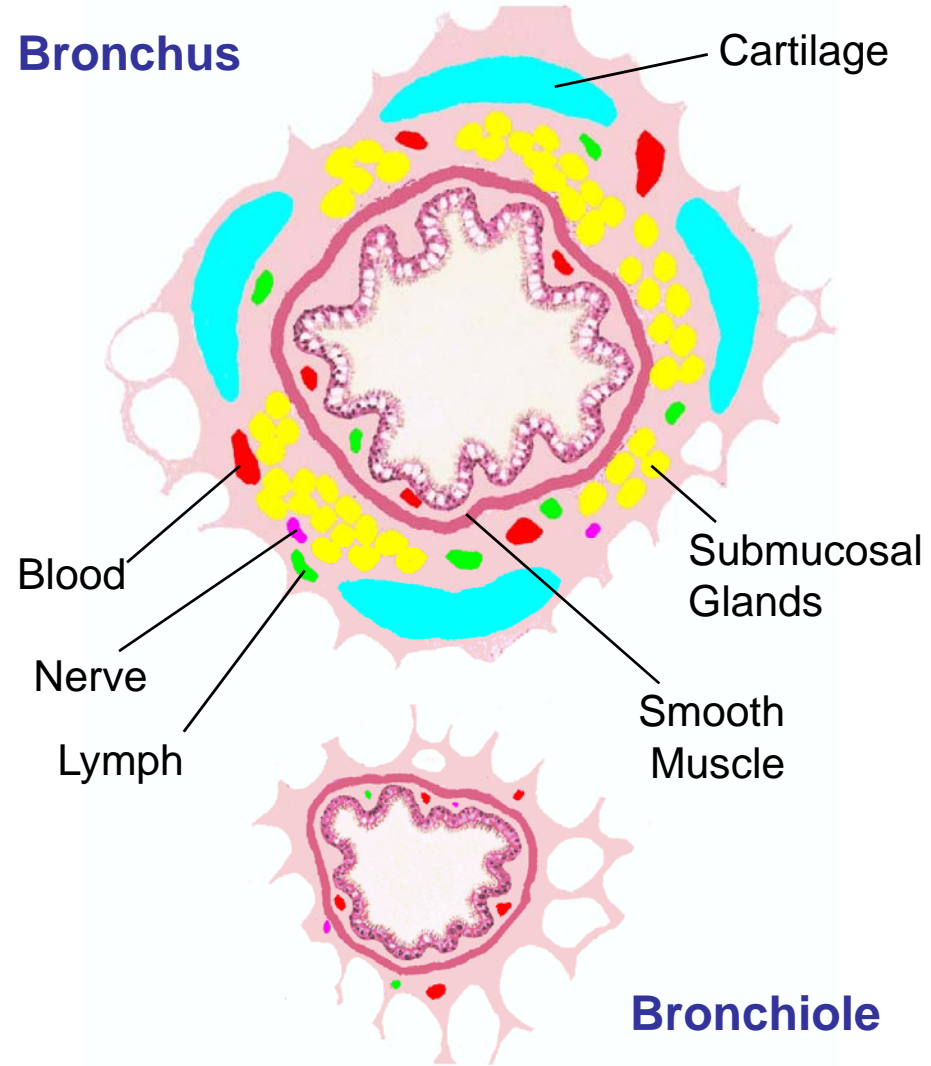
## Physiology

- Contributes most of the airway resistance

# Conducting Airways - Bronchi and Bronchioles



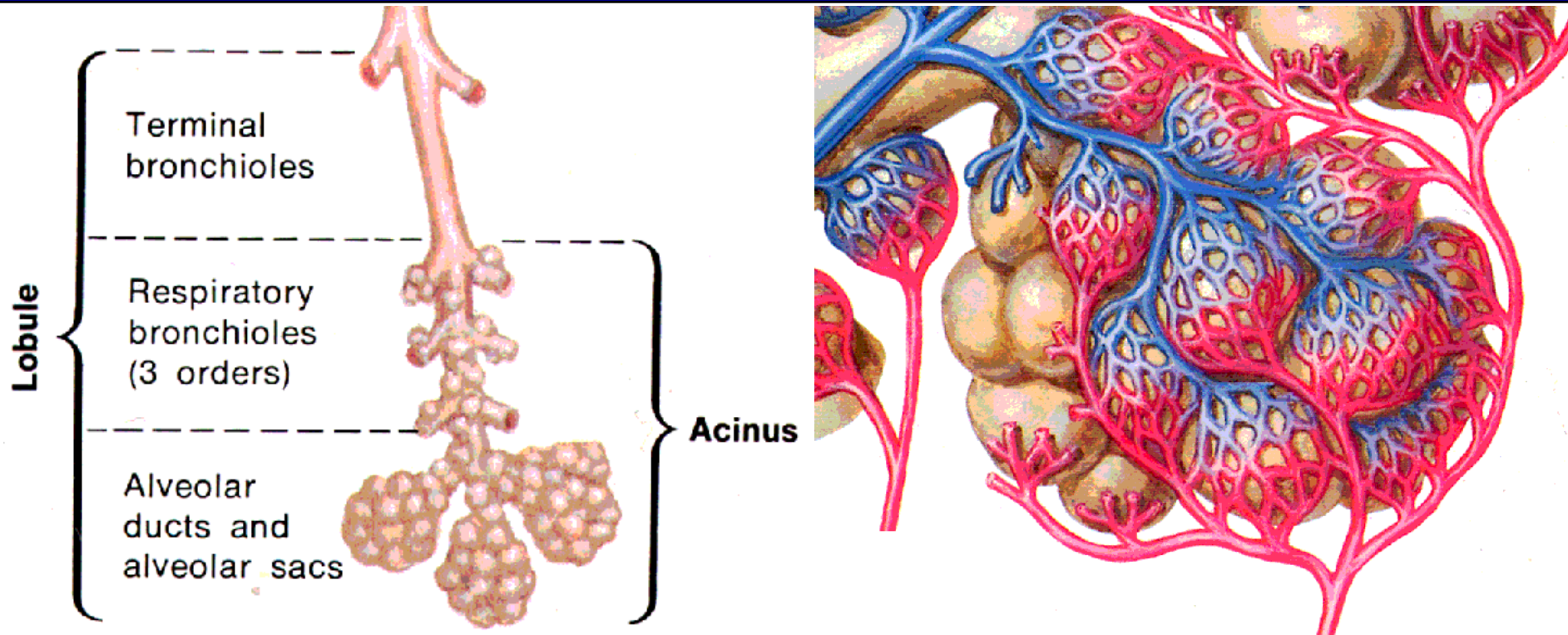
**Bronchus**



**Bronchiole**

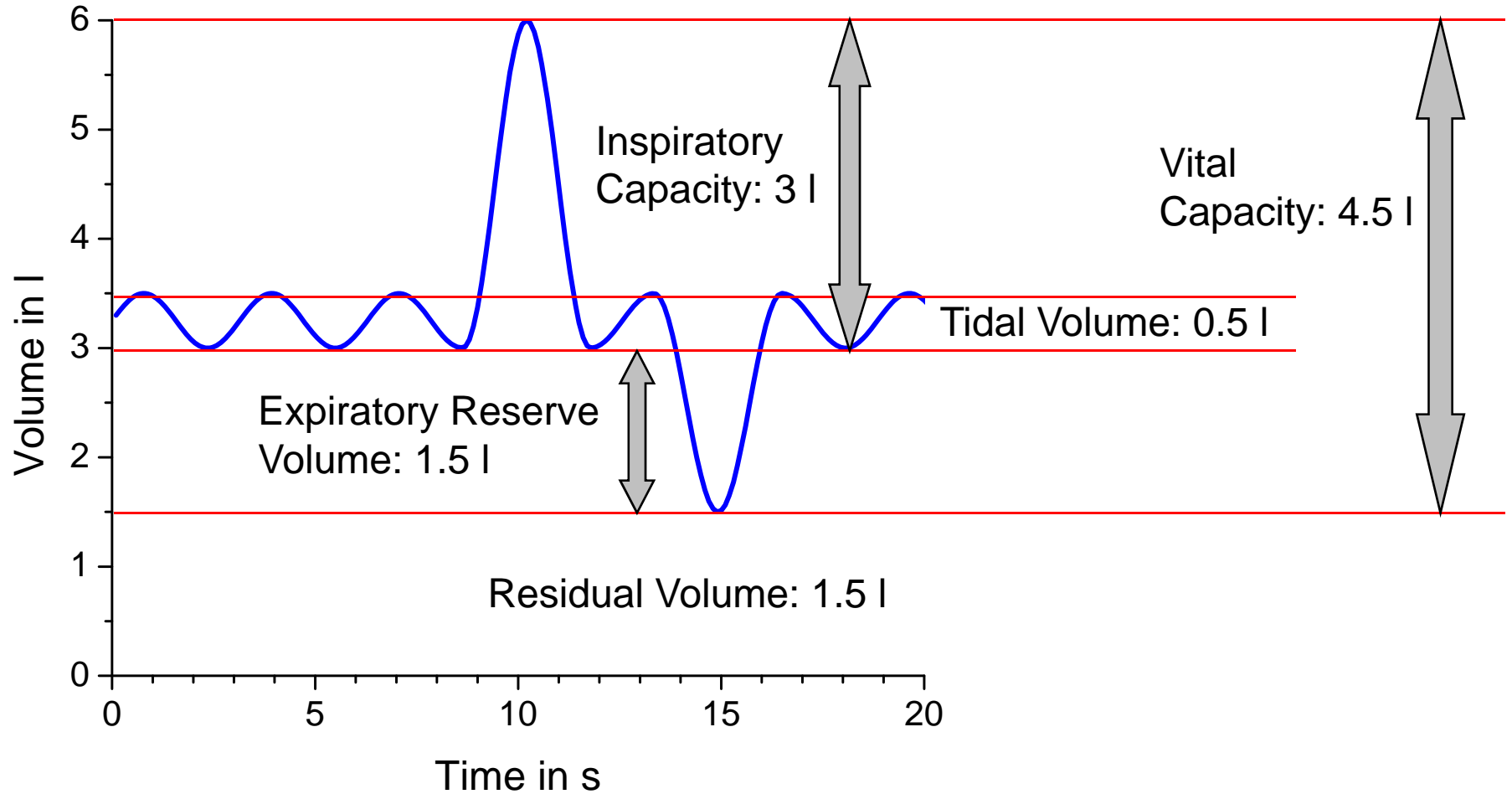


# Respiratory Zone

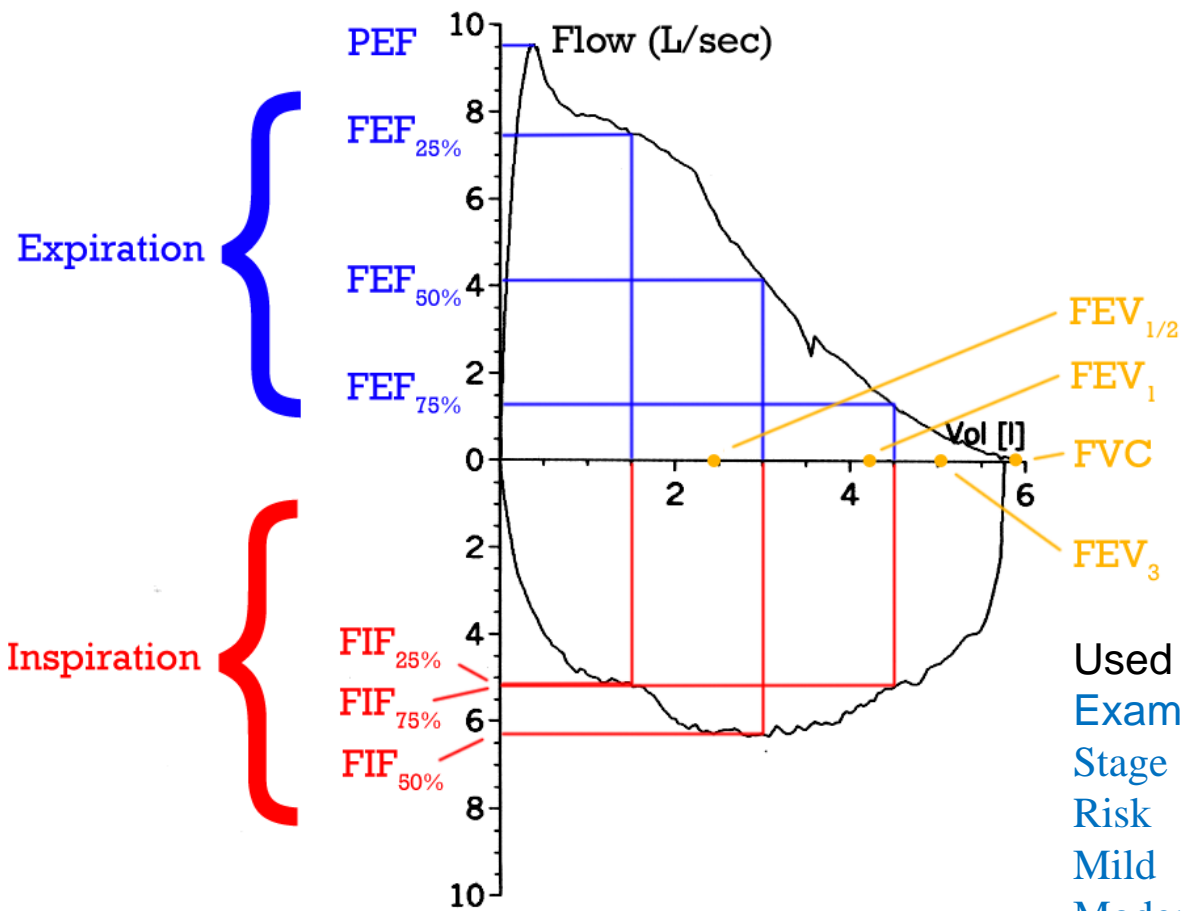


- No cartilage, cilia or mucus
- Few longitudinal elastic fibers and some smooth muscle
- 300 million alveoli provide a large surface area (100 m<sup>2</sup>) separated from blood flow by a thin tissue layer.
- The entire blood volume of the body passes through the lungs each minute.

# Lung Volumes



# Lung Function Test / Spirometry



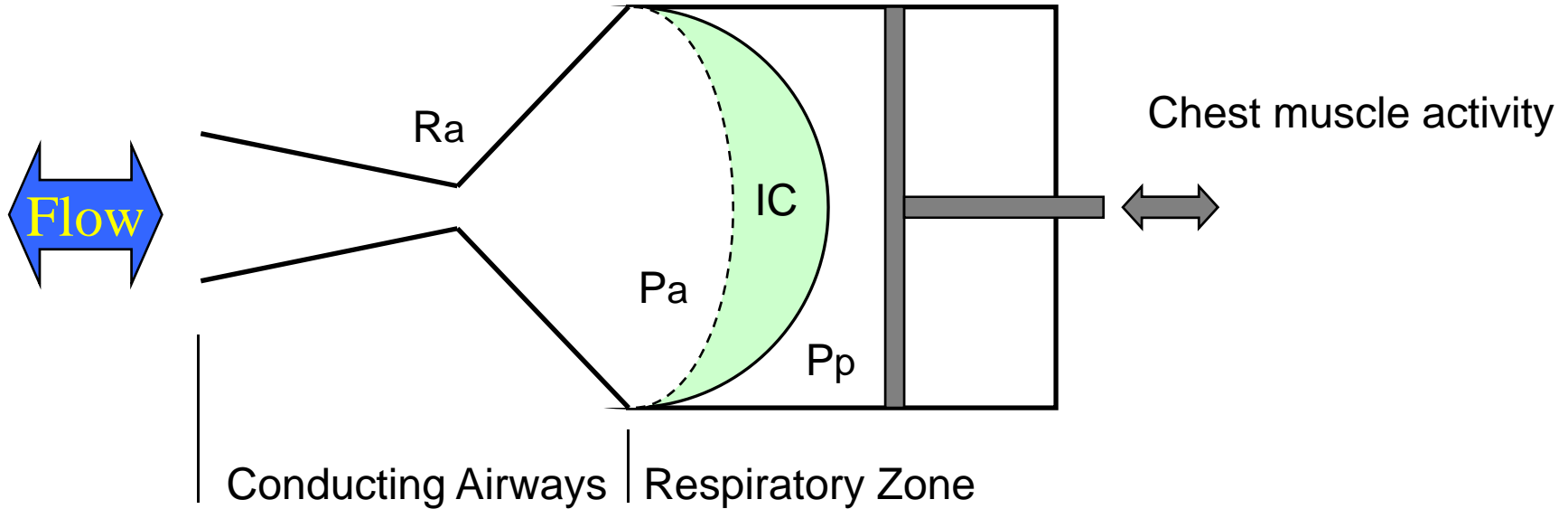
FEF: Forced expiratory flow  
 PEF: Peak expiratory flow  
 FEV: Forced expiratory volume  
 FVC: Forced vital capacity  
 FIF: Forced inspiratory flow  
 Ratios, e.g FEV<sub>1</sub> / FVC

Used for diagnosis and categorization  
**Example COPD:**

| Stage       | FEV <sub>1</sub> / FVC, pd | FEV <sub>1</sub> % pred. |
|-------------|----------------------------|--------------------------|
| Risk        | > 0.7                      | > 80 %                   |
| Mild        | < 0.7                      | > 80 %                   |
| Moderate    | < 0.7                      | 50 – 80 %                |
| Severe      | < 0.7                      | 30 – 50 %                |
| Very Severe | < 0.7                      | < 30 %                   |

Flow-Volume Loop

# Breathing - Mechanical Analogy

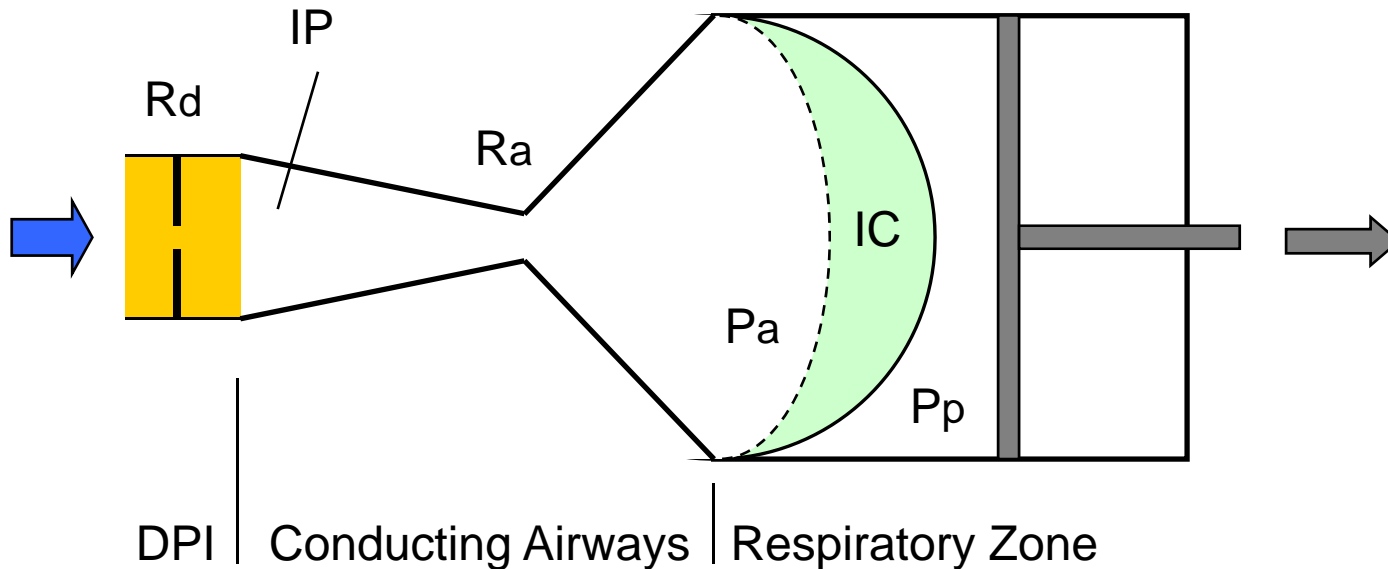


Flowrate: 
$$Q = \frac{\sqrt{P_a}}{R_a}$$

$R_a$ : Airway Resistance  
 $P_p$ : Pleural Pressure (Drop)  
 $P_a$ : Alveolar Pressure (Drop)

IC: Inspiratory Capacity

# Inspiration through a DPI - Mechanical Analogy

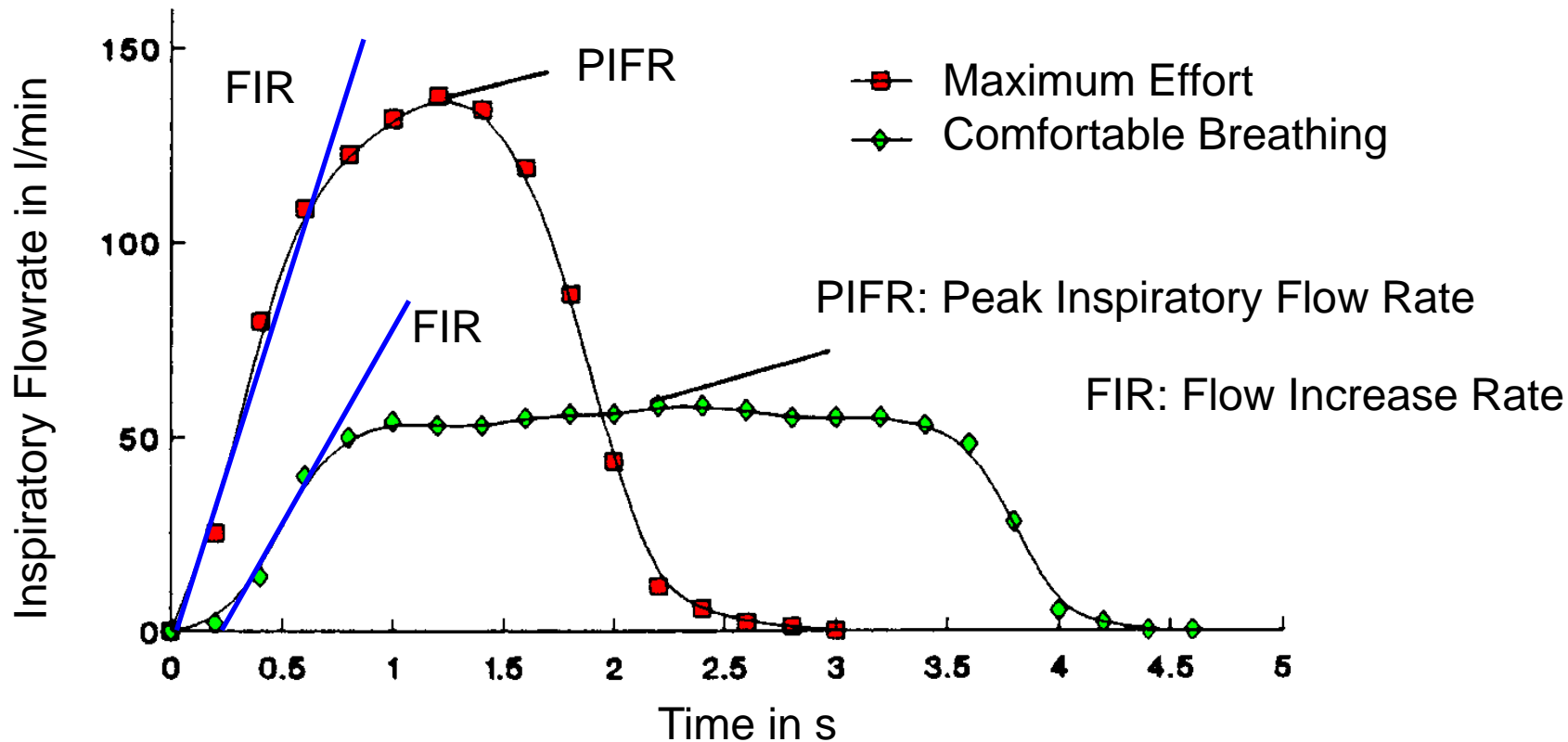


Flowrate:  $Q = \frac{\sqrt{IP}}{R_d}$  ,  $R_d \gg R_a$

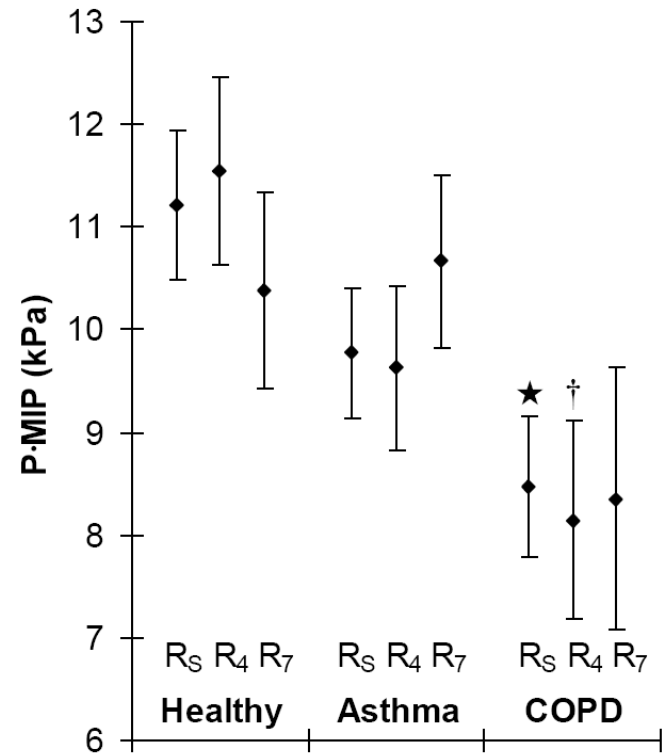
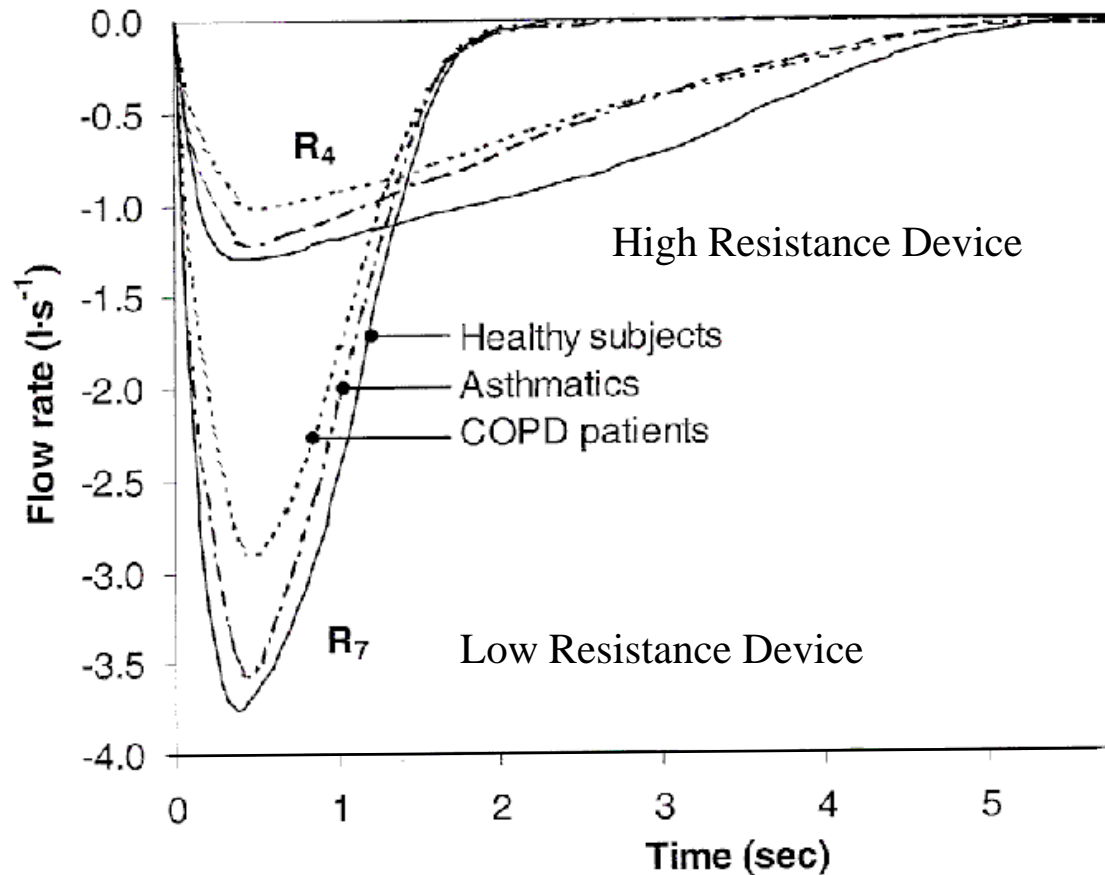
Rd: Device Resistance  
 Ra: Airway Resistance  
 Pp: Pleural Pressure (Drop)  
 Pa: Alveolar Pressure (Drop)  
 IP: Inspiratory Pressure (Drop)  
 IC: Inspiratory Capacity

# Breathing Profile, Flow Versus Time

Device Resistance:  $0.051 \text{ cm H}_2\text{O}^{1/2} / (\text{l}/\text{min})$



# Breathing Profiles and Mouth Pressure in the Diseased Lung



# Outline

- Anatomy and Physiology of the Respiratory System
- **Deposition and Pharmacology**
- Delivery and Dispersion Devices
- Powder Manufacture
- Particle Engineering



# Aerosol Transport – Aerodynamic Diameter

The aerodynamic diameter ,  $d_a$ , of a particle is the diameter of a sphere with a density of  $1 \text{ g/cm}^3$  having the same gravitational settling velocity as the particle.

**Gravitational Force**

$$F_{Gr} = m_p g ,$$

**Drag Force (Stokes Law,  $Re < 1$ )**

$$F_D = \frac{3\pi\eta v d_g}{C_c}$$



**Settling velocity:**

$$v_s = \frac{\rho_p d_g^2 g C_c}{18\eta}$$

Cunningham Slip Correction Factor corrects for non-continuum conditions. (P in kPa, d in  $\mu\text{m}$ )

$$C_c = 1 + \frac{1}{Pd} (15.39 + 7.518 e^{-0.0741 Pd})$$

$d_a$  is derived equating the settling velocity of the particle and the reference sphere:

$$d_a^2 = \frac{\rho_p C_c}{\rho_{ref} C_{c,ref}} d_g^2$$

$$d_a = \sqrt{\rho_p} d_g$$

Assuming that the slip correction factors are nearly identical and using  $\rho$  in  $\text{g/cm}^3$ :

# Stokes Number and Impaction Parameter

The dimensionless Stokes number is the ratio of the stopping distance and a characteristic dimension of the gas flow. It describes how well particles are able to follow the gas flow.

$$Stk = \frac{s}{x} = \frac{v_0 \tau}{x} \qquad \tau = \frac{d_a^2 C_c}{18\eta}$$

The stopping distance is the initial velocity of a particle times the relaxation time.

For the impaction of a gas jet onto a surface the characteristic dimension is the jet radius. The particle velocity is assumed to be the same as the gas velocity.

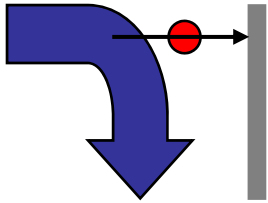
$$Stk = \frac{v d_a^2 C_c}{9\eta d_j}$$



$$K = d_a^2 Q$$

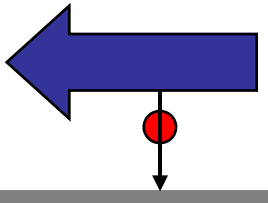
For lung deposition a related parameter, called impaction parameter or inertial parameter, is often used, where Q is the inspiratory flow rate. This is less accurate, because it assumes a fixed geometry.

# Lung Deposition - Mechanisms



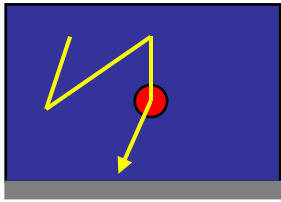
## Impaction

Primary mechanism for big particles and upper airways



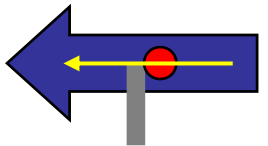
## Sedimentation

More important in smaller airways and affected by breath-hold



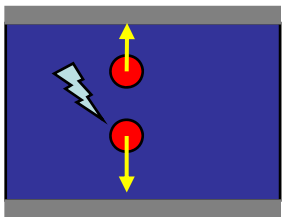
## Diffusion

Primary mechanism for small particles in the respiratory zone



## Interception

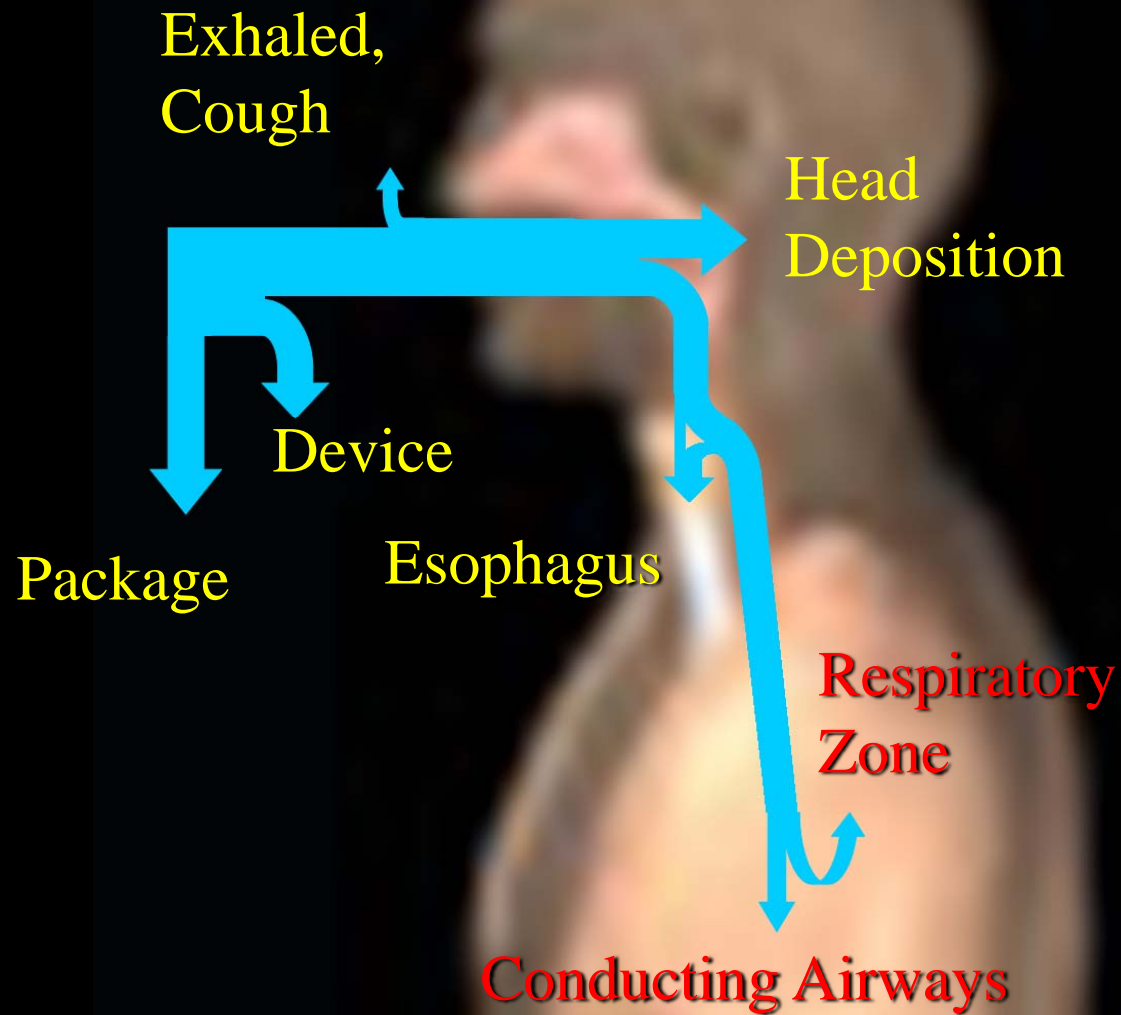
Important for non-spherical particles



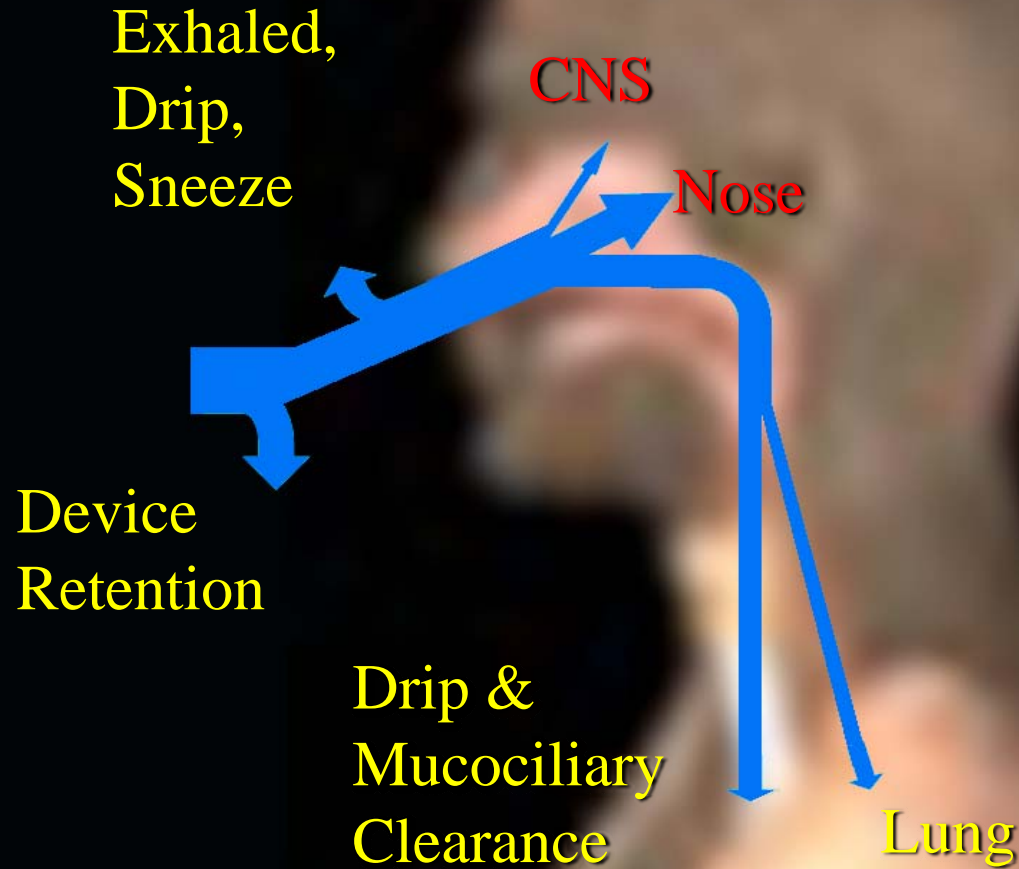
## Electrostatic Precipitation

Plays a role in triboelectrically charged aerosol

# Losses in Pulmonary Delivery



# Losses in Nasal Delivery



# Factors Affecting Lung Deposition

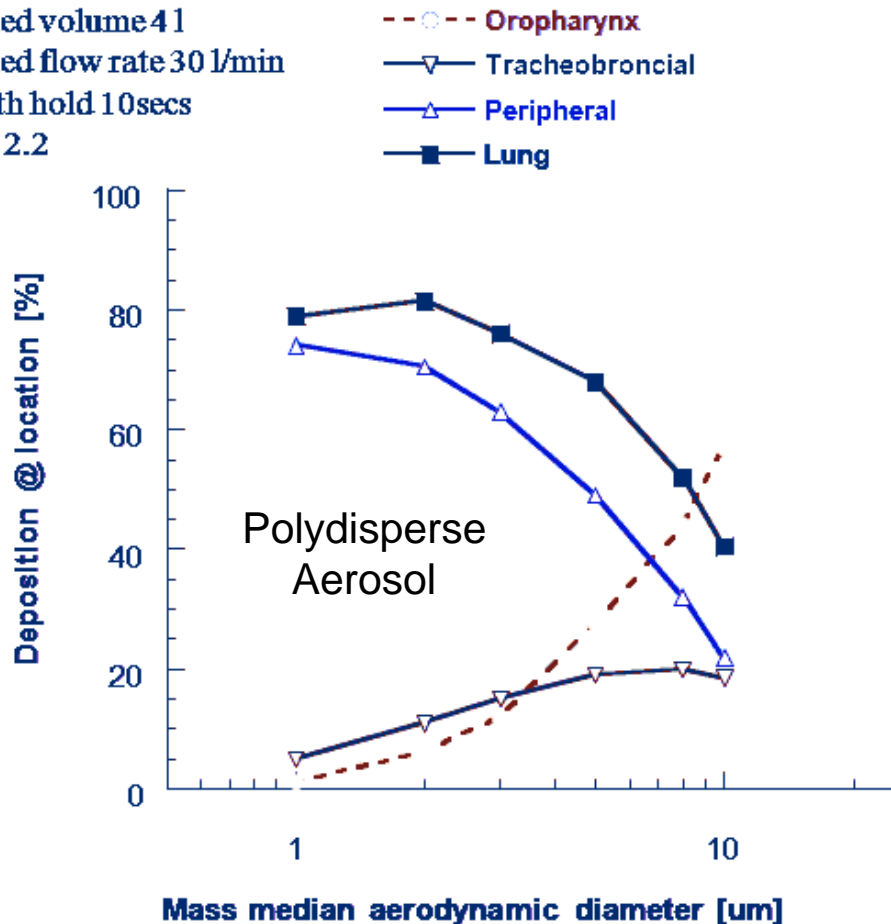
- Aerodynamic particle diameter
  - Primary aerodynamic particle diameter
  - State of agglomeration
  - Hygroscopic growth / droplet evaporation
- Inspiratory flow
  - Flow increase rate
  - Peak inspiratory flow rate
  - Inspiratory capacity
  - Breath hold
- Lung volume
- Aerosol concentration and initial velocity
  - Inhalation device design
  - Delivered dose

## Determined by

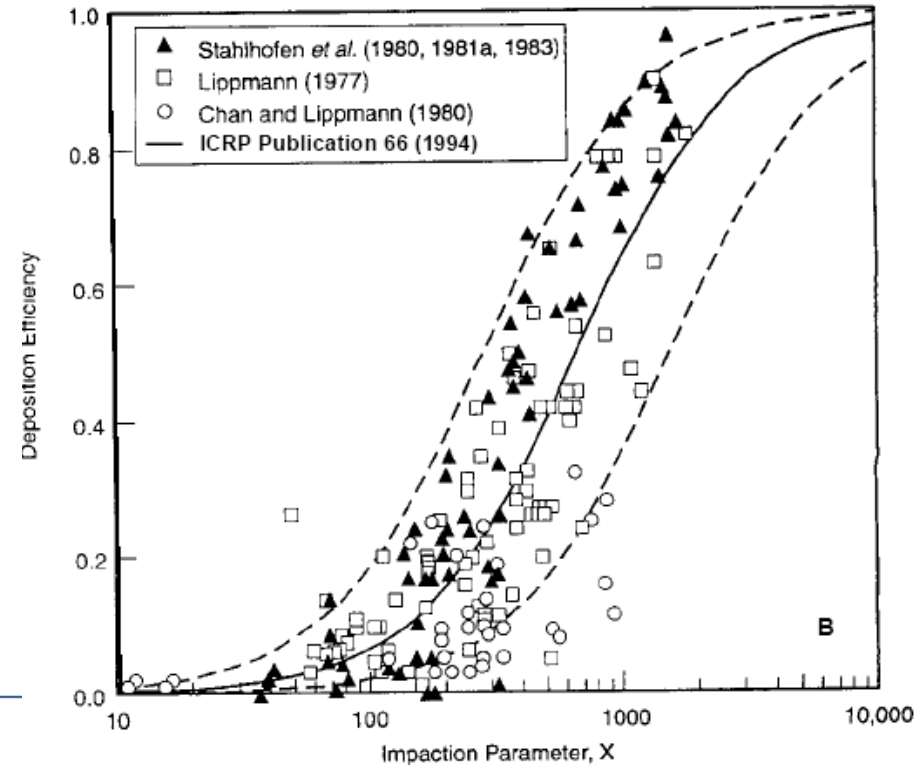
- Formulation
- Delivery Device
- Patient
  - Gender
  - Age
  - Training
  - Disease state
  - Inspiratory Effort

# Deposition as a Function of Particle Size and Flow Rate

Inhaled volume 4 l  
 Inhaled flow rate 30 l/min  
 Breath hold 10secs  
 GSD 2.2



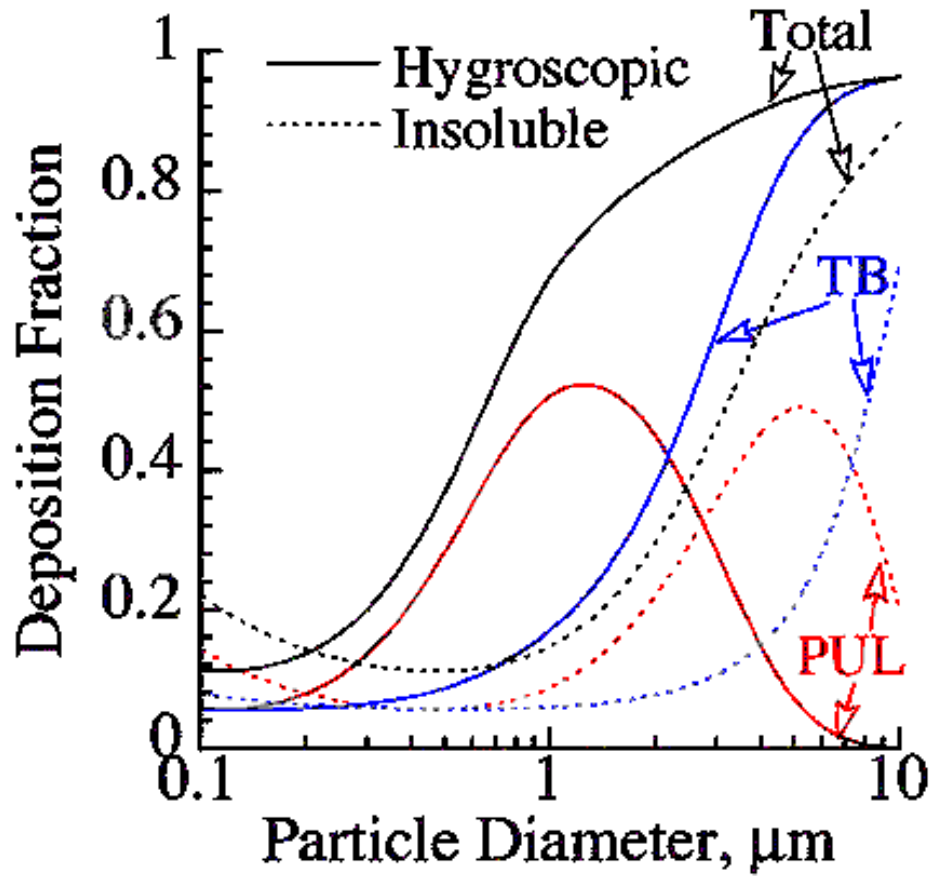
## Extrathoracic Deposition Particles inhaled through a mouthpiece



$$X = d_a^2 Q^{0.6} V_T^{-0.2} [\mu\text{m}^2 \text{cm}^{1.2} \text{s}^{0.6}]$$

# Hygroscopicity Influences Deposition

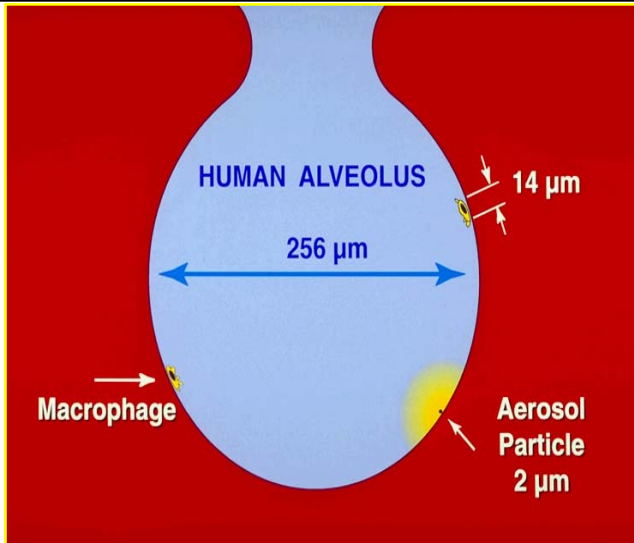
Regional and Total Deposition  
Oral Breathing



Numerical model results  
Tidal volume: 625 ml  
Breathing frequency: 15 / min  
Monodisperse NaCl particles



# Pharmacology - Systemic Drug Delivery



## Transport Across the Alveolar Wall

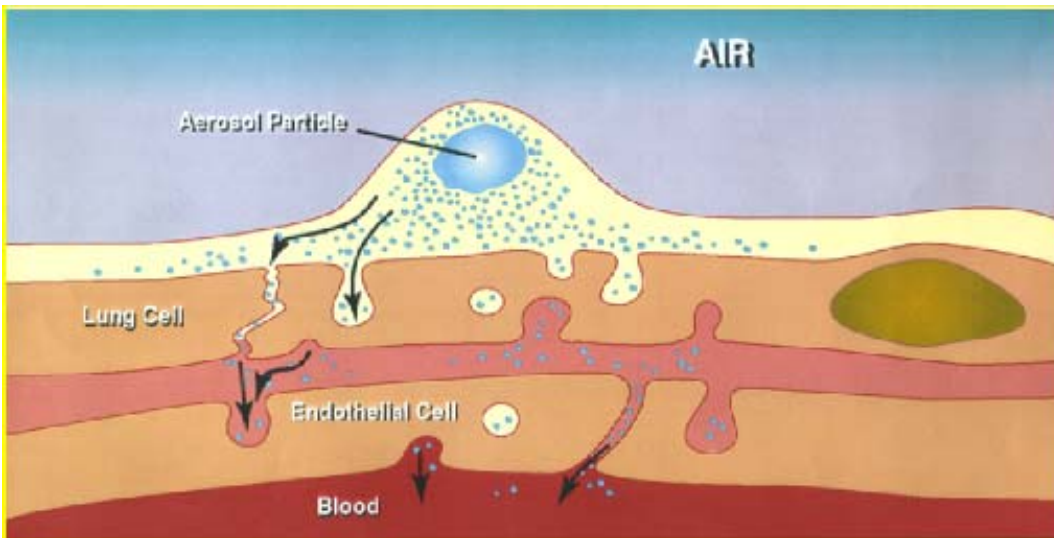
A typical aerosol dose (1 – 50 mg) deposits only a few particles per alveolus onto a thin alveolar wall (200 nm)

## Transport mechanisms

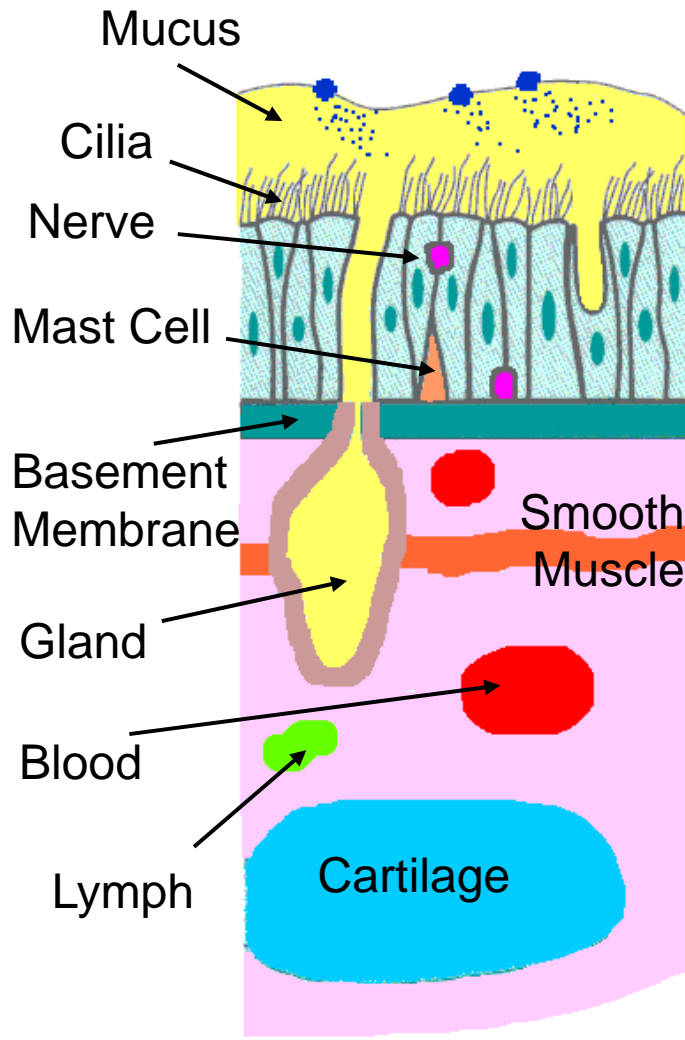
- Paracellular
  - Tight junctions - epithelium
  - Loose junctions - endothelium
- Transcellular
  - Diffusion
  - Transcytosis
  - Receptor mediated

Absorption kinetics are fast and depend on

- Molecular weight
- Solubility
- Partition coefficient.



# Pharmacology - Local Drug Delivery



## Across the Bronchiolar Epithelium

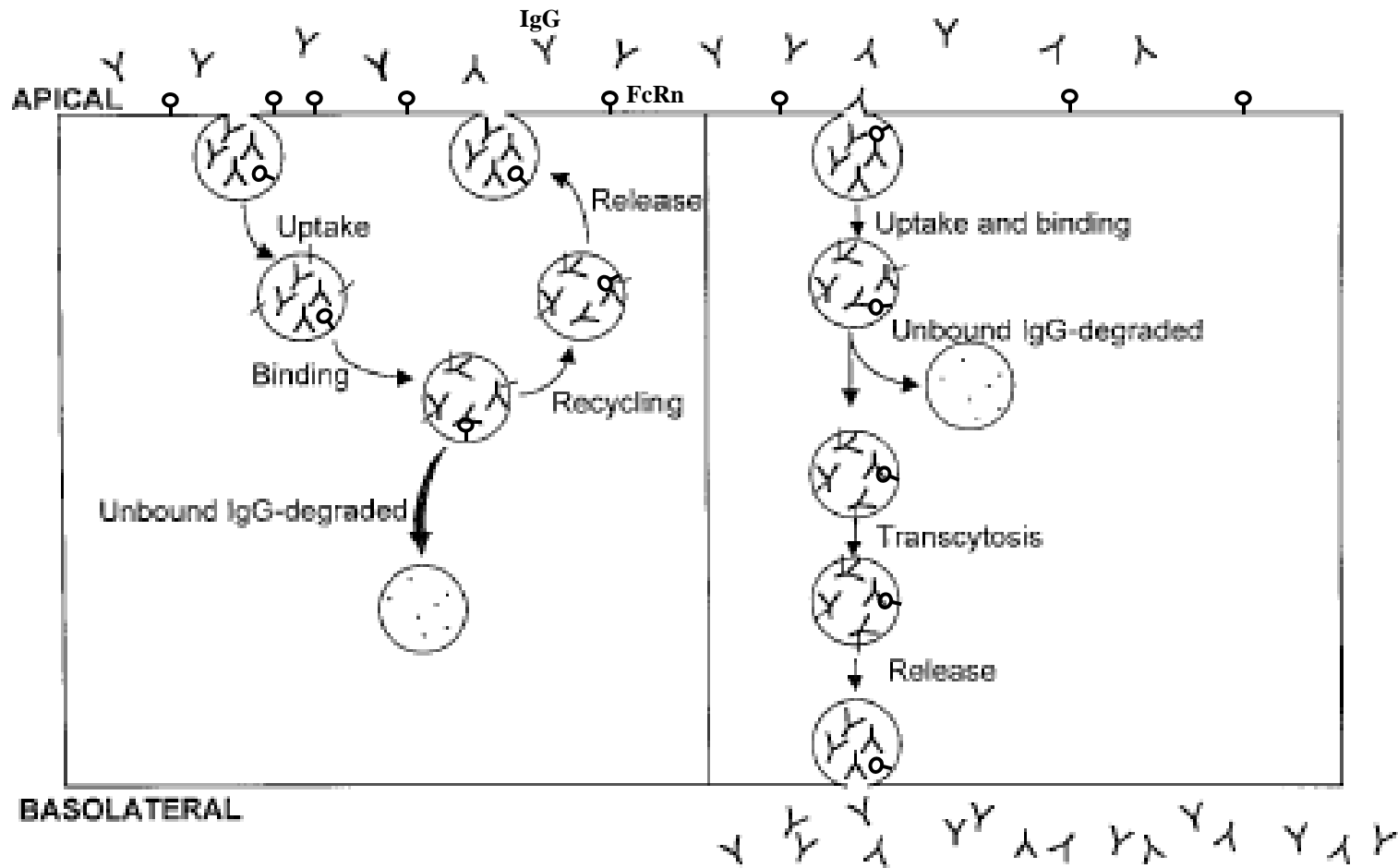
### Transport mechanisms

- Local aerosol concentration higher, because of smaller surface area
- Diffusion in mucus layer competes with mucociliary clearance, solubility is important
- Bioavailability depends on location of local target
- Larger distances favor small molecules
- Active transport present, e.g. for immunoglobulins

### Absorption Kinetics

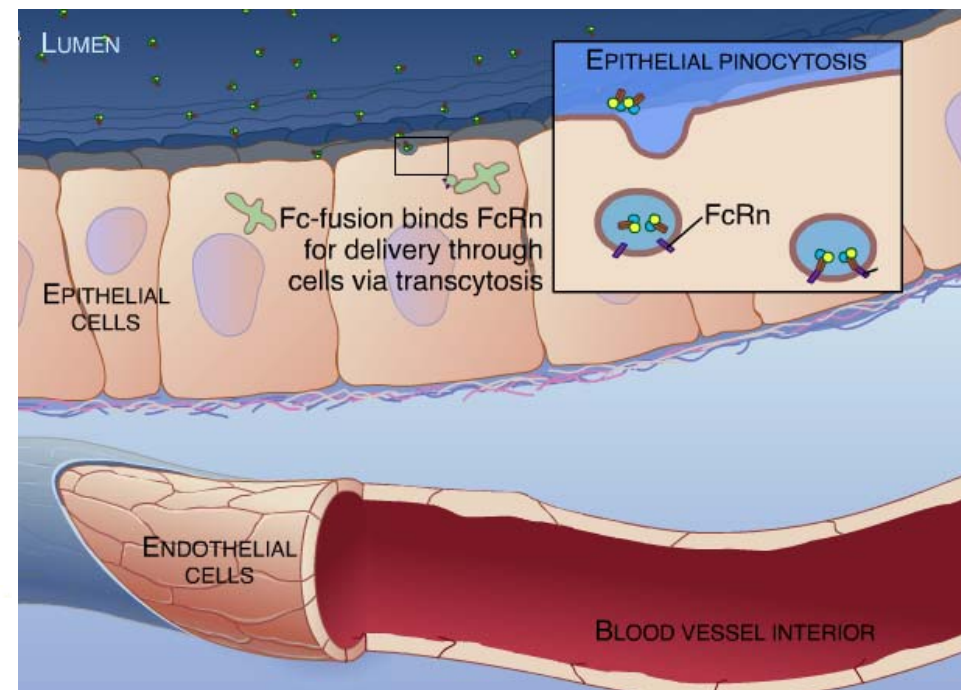
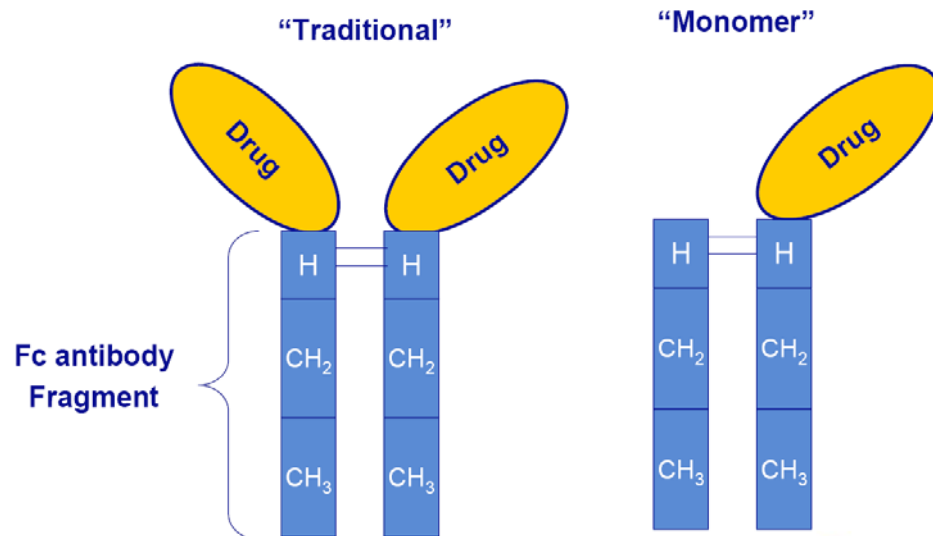
- Slower but targeting the conducting airways is difficult
- Interstitial tissue may act as reservoir

# Active Transport Using FcRn Trafficking



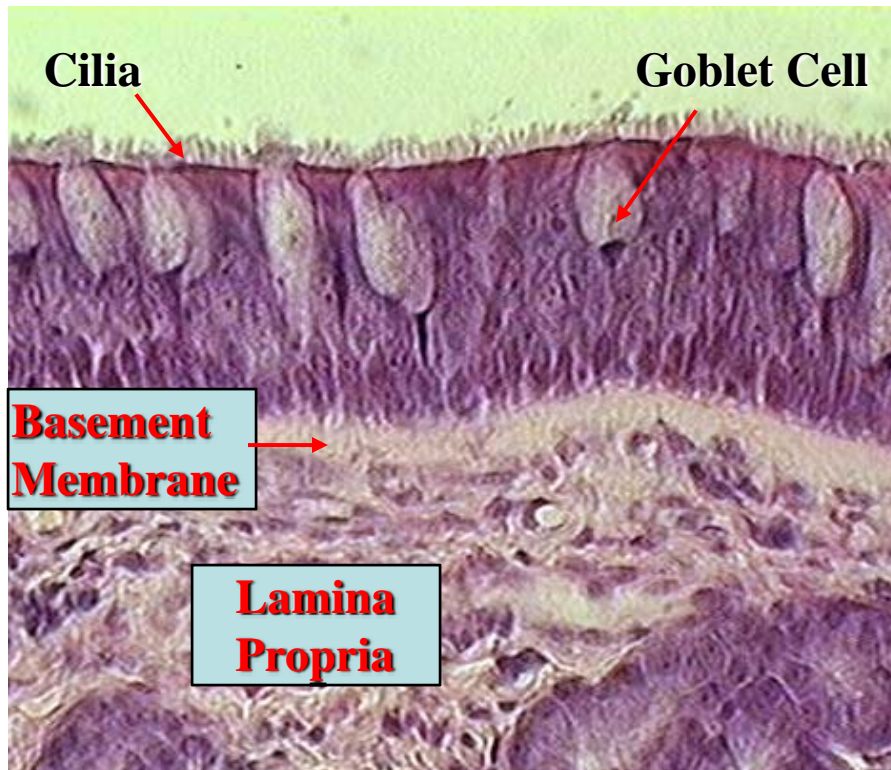
# Systemic Delivery of Fc-Fusion Molecules (Syntonix)

- Fc-fusion molecules: API attached to Fc fragment.
- 5 to 50 % bioavailability depends on type of fusion molecule, monomeric vs. dimeric.
- Receptor saturation limits capacity for systemic delivery



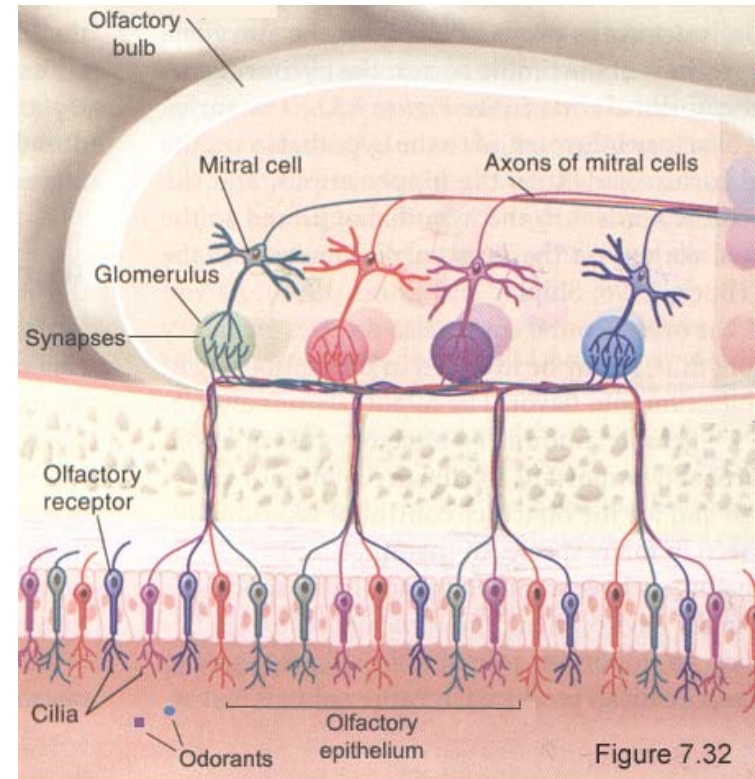
# Nose Ultrastructure

- Cilia and mucus transport particles to the pharynx.
- Mucociliary clearance takes 15 – 20 min
- High bioavailability only for small molecules (< 1 kDa) with rapid uptake (1 - 5 min)



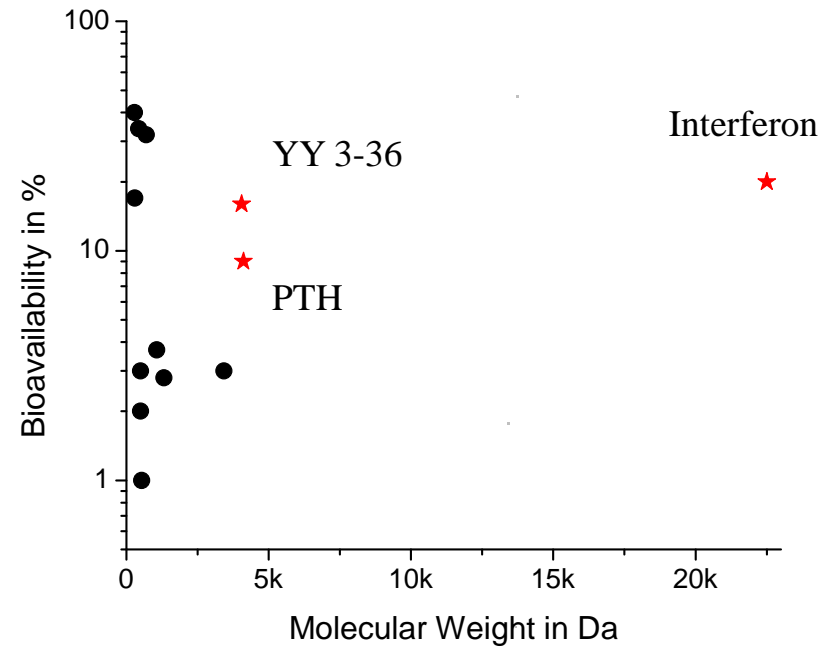
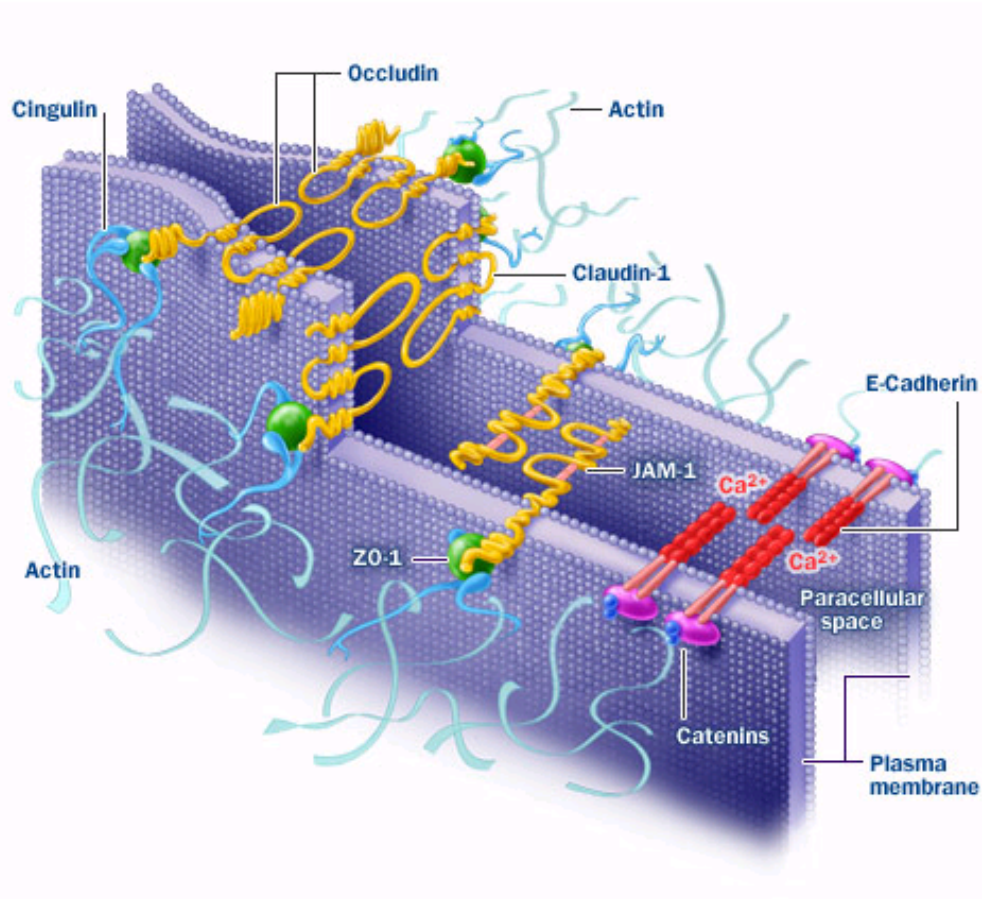
Columnar ciliated epithelium

3 – 5 % of total nasal surface



Olfactory Region

# Tight Junction Modulation (Nastech)



# Defense Mechanisms and Ways to Beat Them

- **Mucus / Mucociliary Clearance**

- **Phagocytosis**

- **Cellular Barrier**

- Tight Junctions
- Cell Wall

- **Lysosomal Proteases**

- **Filter Function**

- Bioadhesives
- Rapidly dissolving particles

- Large particles
- Trojan Horses

- Tight junction modulation
- Transporter, viral vectors
- Molecular carriers, active transport
- Bioactive particle surfaces

- pH sensitive release

- Particle & Device Engineering

# Outline

- Anatomy and Physiology of the Respiratory System
- Deposition and Pharmacology
- **Delivery and Dispersion Devices**
- Powder Manufacture
- Particle Engineering



# Delivery Devices – Classification

## By actuation

- Passive – uses breathing maneuver to administer or disperse dose
- Active – uses external energy source to administer dose
  - Active coordinated – requires cooperation of patient
  - Active uncoordinated – no patient cooperation

## By dosage form

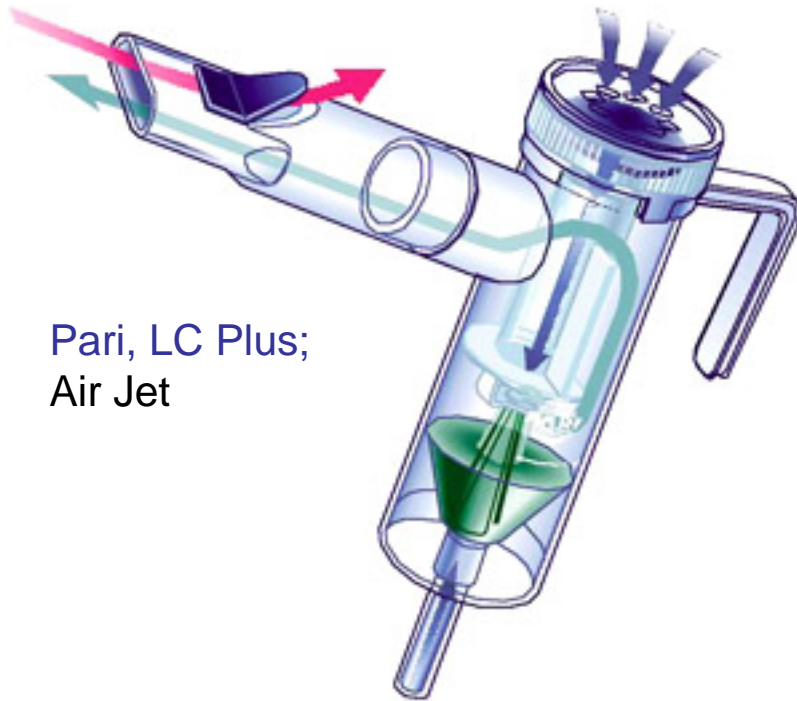
- Liquid (drops, jet, spray, aerosol)
- Suspension
- Dry (homogeneous powder, blend, on carrier)

## By dosing type

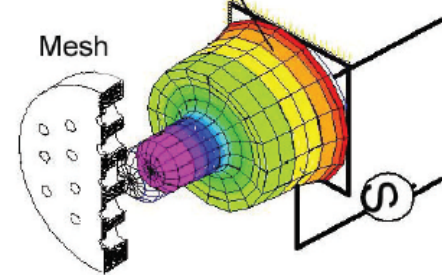
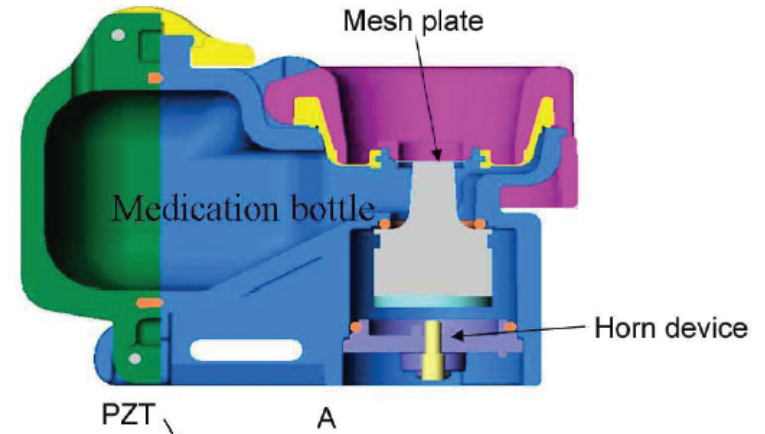
- Single dose
- Multi dose
  - Reservoir
  - Unit packaged (single course, refillable)
- Metered versus unmetered
- Administration to a single patient versus multiple patients

# Pulmonary Delivery Devices – Nebulizers

## Nebulizer Types



Pari, LC Plus;  
Air Jet



### Horn device

1. Higher amplified vibration with lower electric power.
2. Lower residual volume.



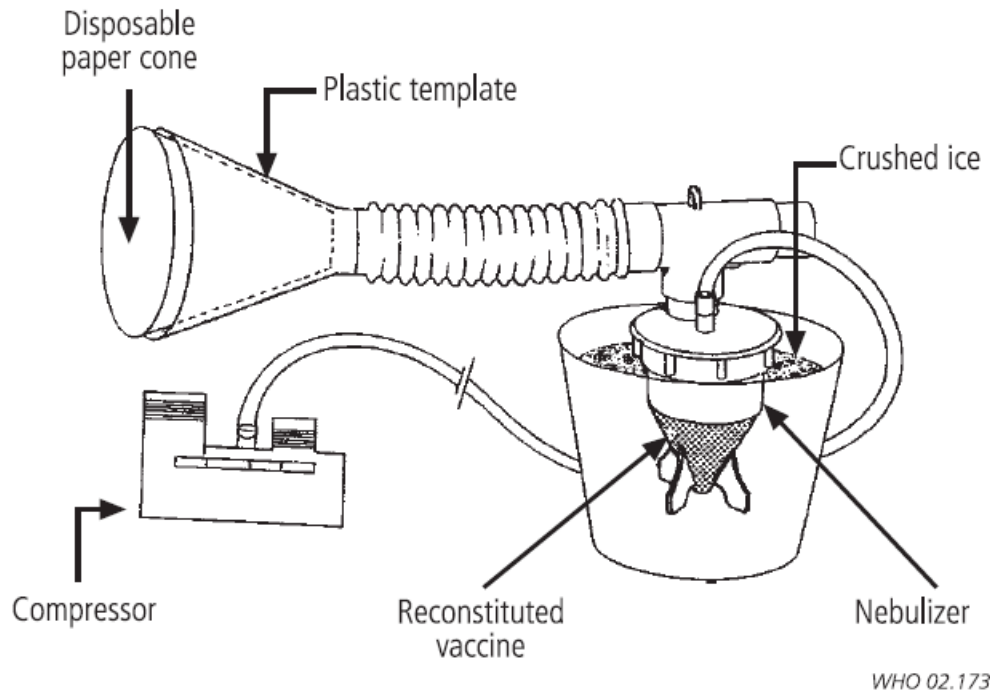
Omron, MicroAir; Ultrasonic / Vibrating Mesh

# Pulmonary Mass Inoculation Systems

Used by WHO for measles mass immunization  
Multi patient delivery with disposable patient interface.

Attack rates during the 1988-90  
measles outbreak in Mexico:  
Not vaccinated: 26 %  
Vaccinated SC: 14 %  
Vaccinated pulmonary: 0.8 %

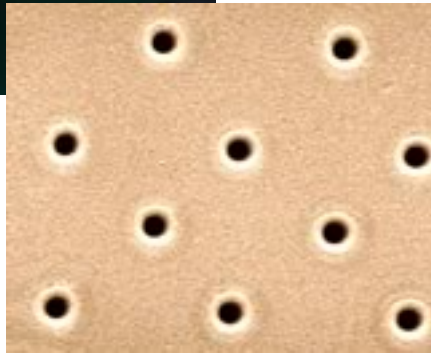
Fig. 1. Diagram of equipment used to aerosolize vaccines



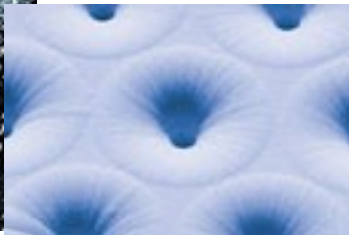
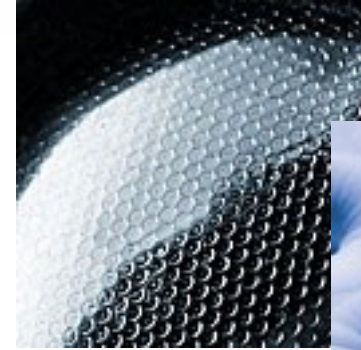
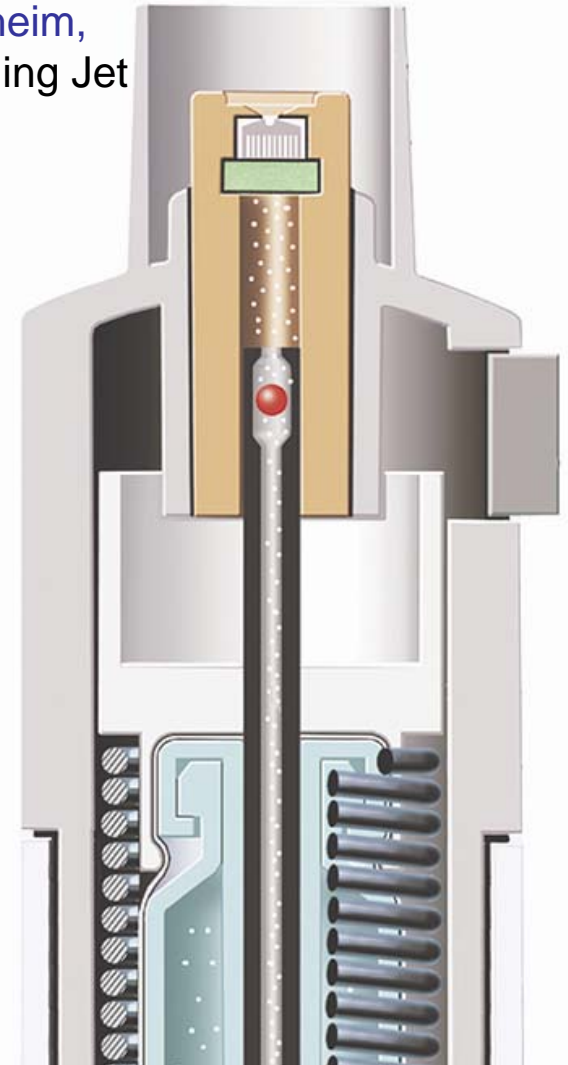
# New Nebulizer Developments

Boehringer Ingelheim,  
Respimat; Impinging Jet

Aerogen / Nektar,  
OnQ; Micropump,  
Vibrating mesh

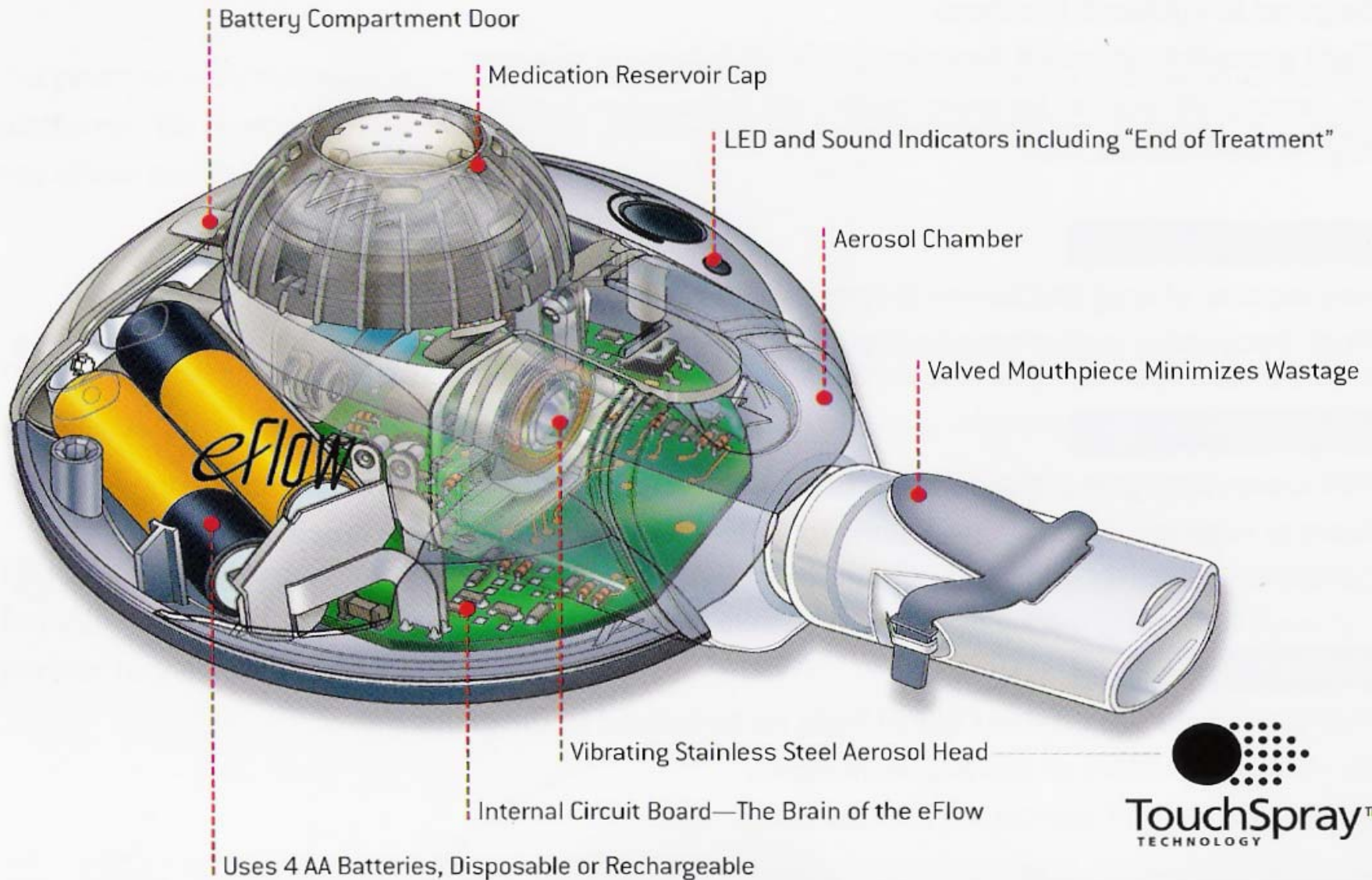


Aradigm AERx;  
Microorifice /  
Disintegrating jet



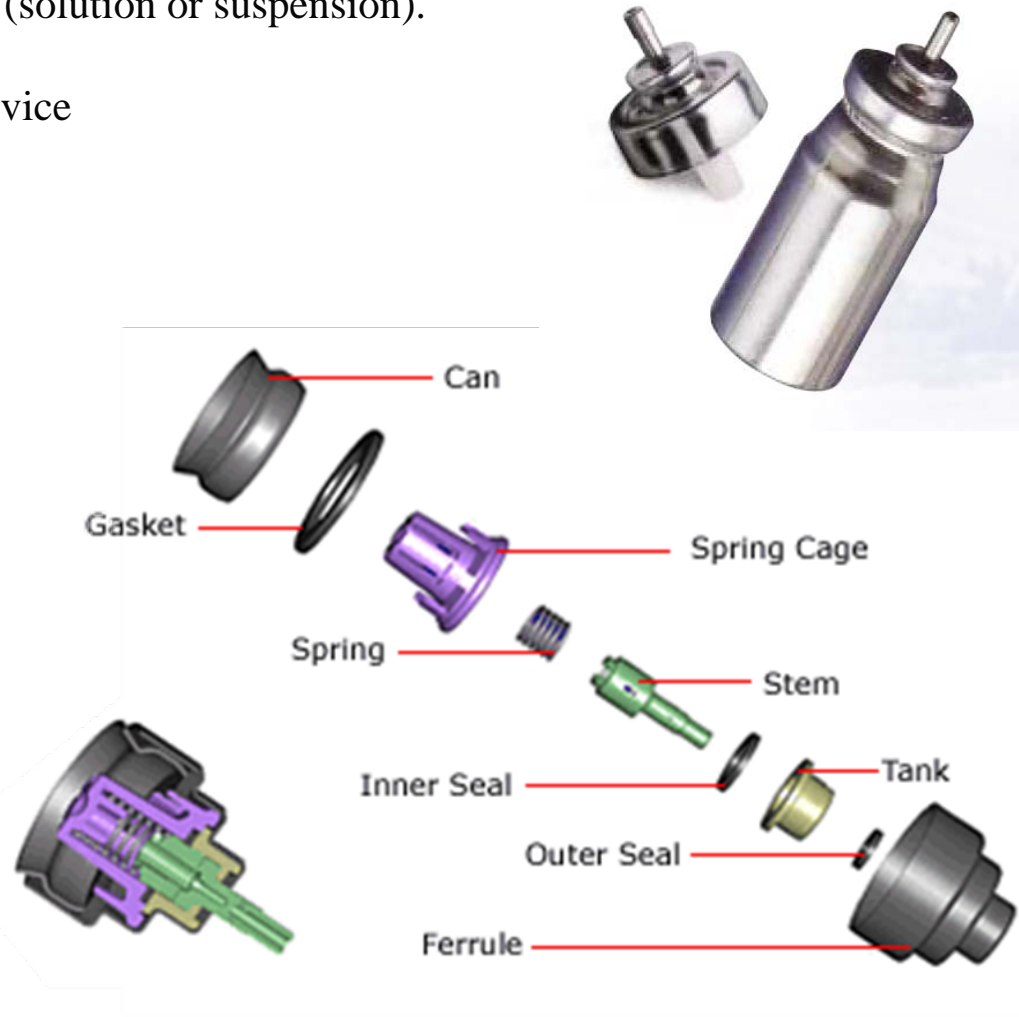
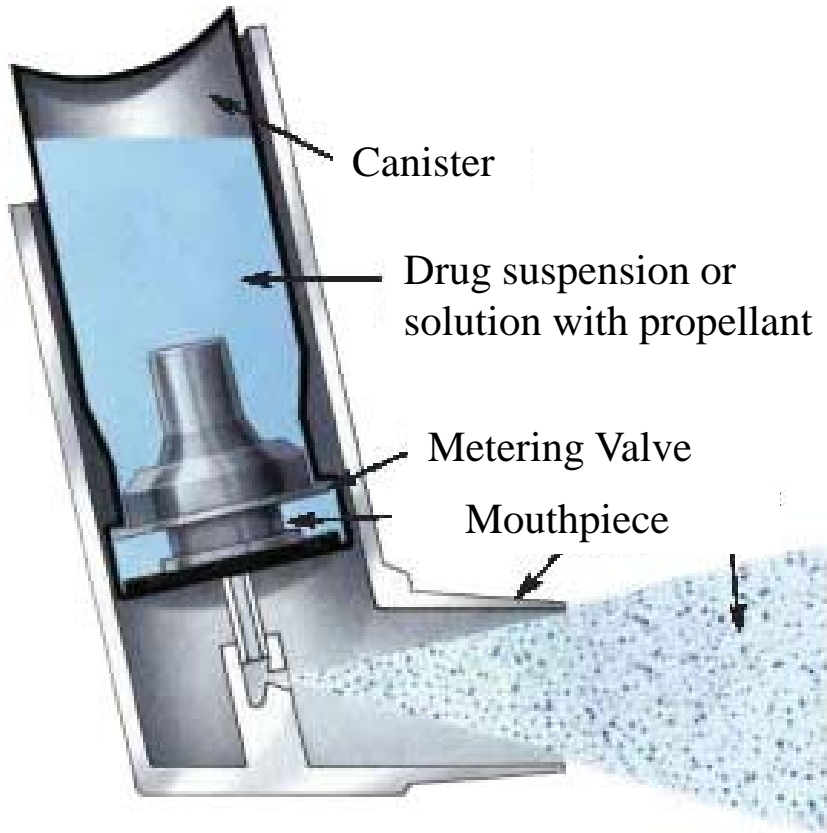
# Stand-Alone, Hand-Held Nebulizer (Pari)

## eFlow Anatomy:

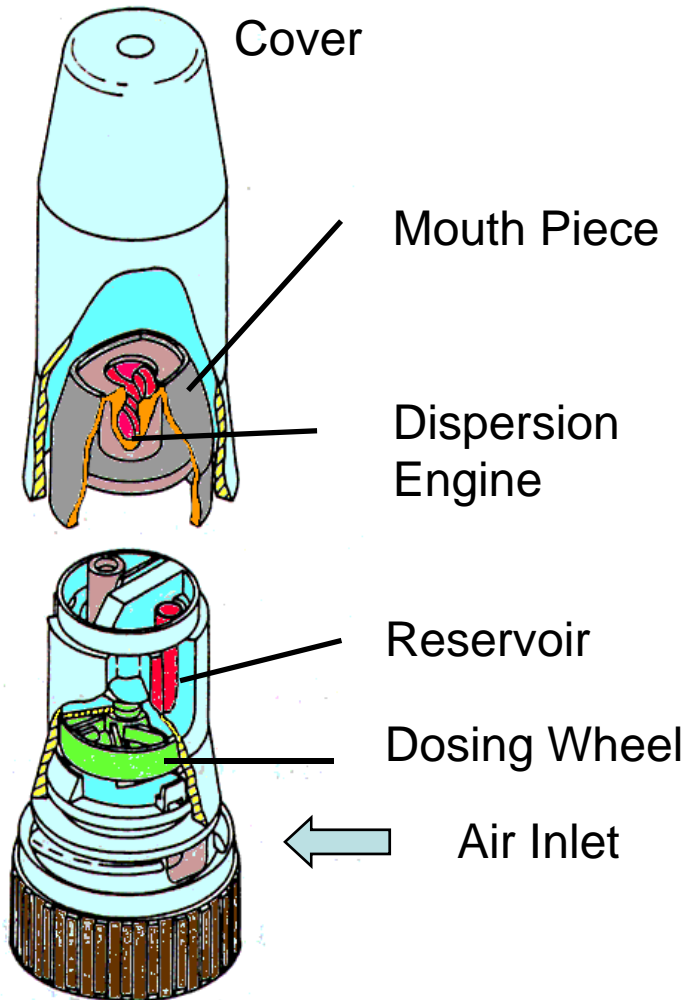


# Pressurized Metered Dose Inhalers

Propellant driven spray (solution or suspension).  
Multi-dose, metered.  
Active (coordinated) device



# Multi-Dose Dry Powder Inhaler - Reservoir



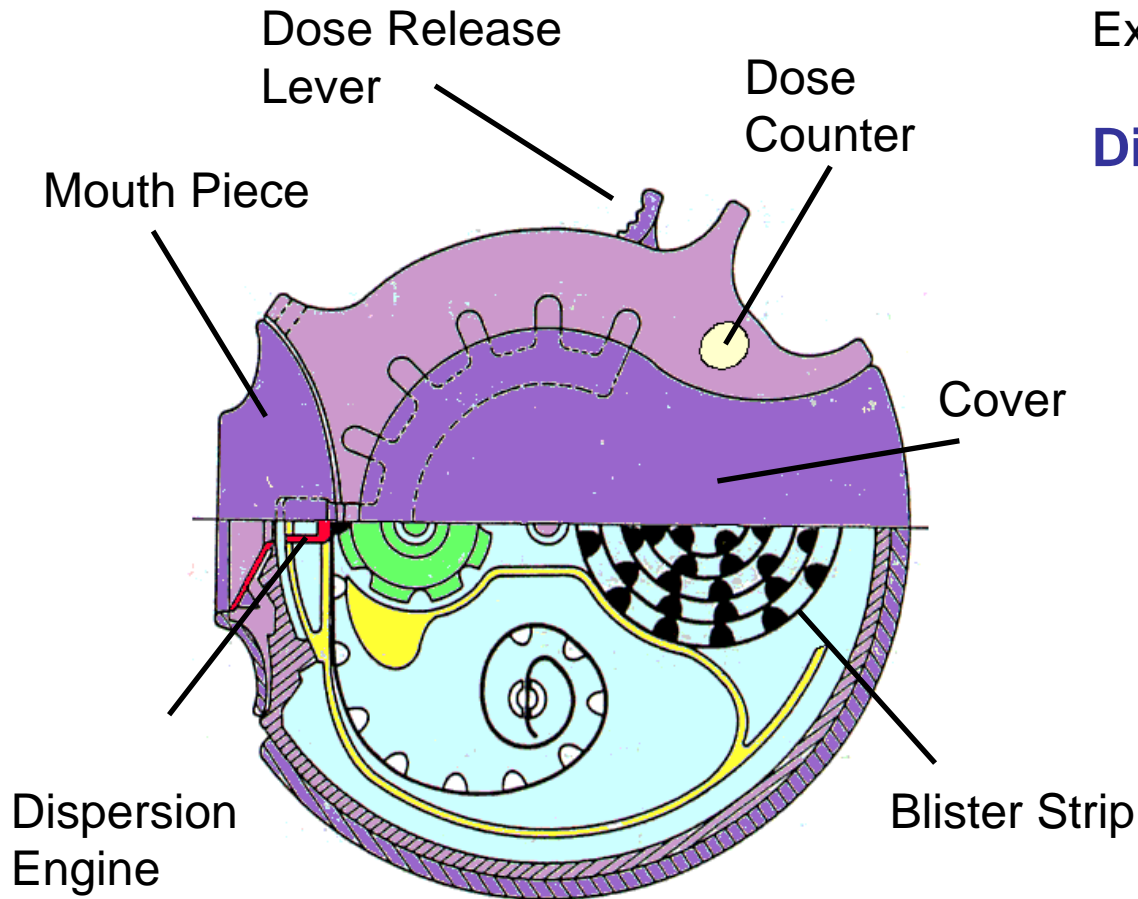
Example:

## Turbuhaler (Astra Zeneca)

- Micronized neat drug or with lactose carrier
- 50 – 200 doses
- Dose counter
- ~ 50 mg reservoir capacity
- Flow rate dependent lung dose

Dry powder aerosol.  
Multi-dose, reservoir metered.  
Passive device

# Multi-Dose (Maintenance) Dry Powder Inhaler - Blister



Example:

## Diskus (GSK)

- Uses lactose carrier
- 60 metered doses
- Dose counter
- Small mouthpiece



# Multi-Dose (Therapy) Dry Powder Inhaler - Blister

## Parts of the DISKHALER:

### COVER

keeps the DISKHALER clean and free of foreign matter; replace cover when not in use

### WHITE MOUTHPIECE

where the medicine is inhaled by mouth

### DARK BROWN WHEEL

rotates to the next blister of medicine

### WHITE TRAY

pulls in and out of DISKHALER body

### RAISED RIDGES

help you pull out the tray for loading

### NEEDLE

punctures the blister to release medicine

### DISKHALER BODY

### HALF-CIRCLE FLAP

lifts up and down to operate plastic needle

### SILVER MEDICINE DISK

contains 4 blisters of medicine; the disk fits into the dark brown wheel inside the DISKHALER

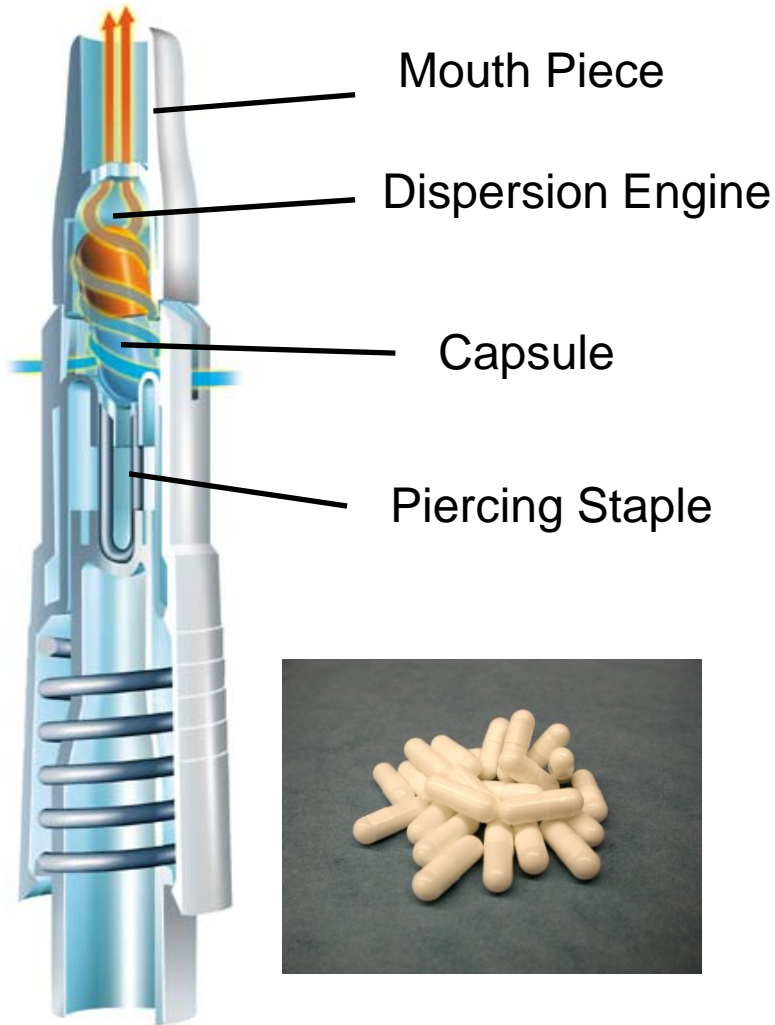


## Example:

### DiskHaler / Relenza (GSK) Antiviral therapy

- Uses 20 mg lactose carrier + 5 mg of active
- Daily dose in blister disk
- Room temperature storage
- 13 ! steps to administer

# Single-Dose Passive Dry Powder Inhaler - Capsule



## Turbospin (PH&T)

- Several products in development using a similar concept
- Capsules contain ~ 5 to 50 mg of powder

- Moisture protection can be achieved by secondary packaging

Example: Spiriva capsules, Boehringer Ingelheim / Pfizer



# Single-Dose Active Dry Powder Inhaler - Blister



## Nektar PDS

- Decouples inspiration and dispersion
- Uses compressed air for dispersion
- Foil blisters contain 2 – 5 mg of powder
- Aerosol is dispersed into collapsible holding chamber



# Nasal Delivery Devices – Spray Bottles

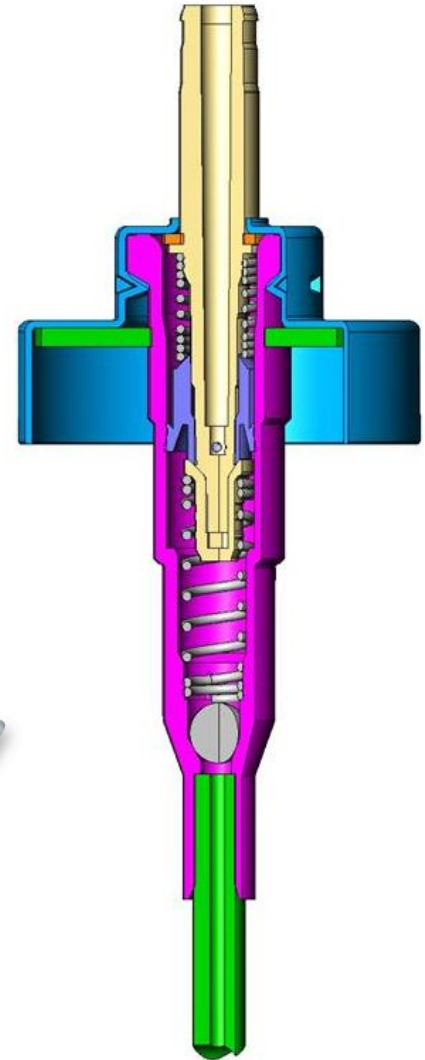


Squeeze  
bottle

Applicator

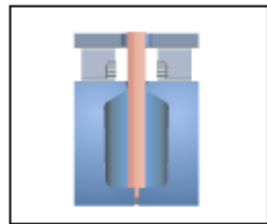


Pump



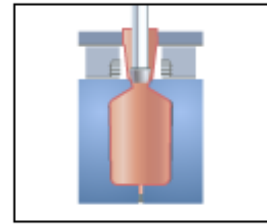
Drops, jet or spray.  
Multi-dose.  
Unmetered or coarse  
Metering.

# Blow-Fill-Seal Technology



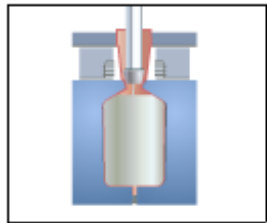
## Extruding

The plastic parison, extruded from polymer, is accepted by the opened blow mould and cut below the die of the parison head.



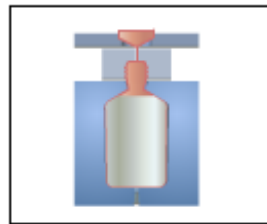
## Moulding

The main mould closes and simultaneously seals the bottom. The special mandrel unit settles onto the neck area and forms the parison into a container using compressed air or vacuum.



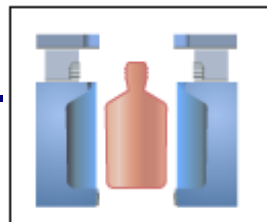
## Filling

By the way of the special mandrel unit, the product precisely measured by the dosing unit is filled into the container.



## Sealing

After the special mandrel unit retracts, the head mould closes and forms the required seal by vacuum.



## Mould opening

With the opening of the blow mould, the containers exits from the machine and the cycle repeats itself.

Drops, jet, spray?  
Single-dose.  
Metered.

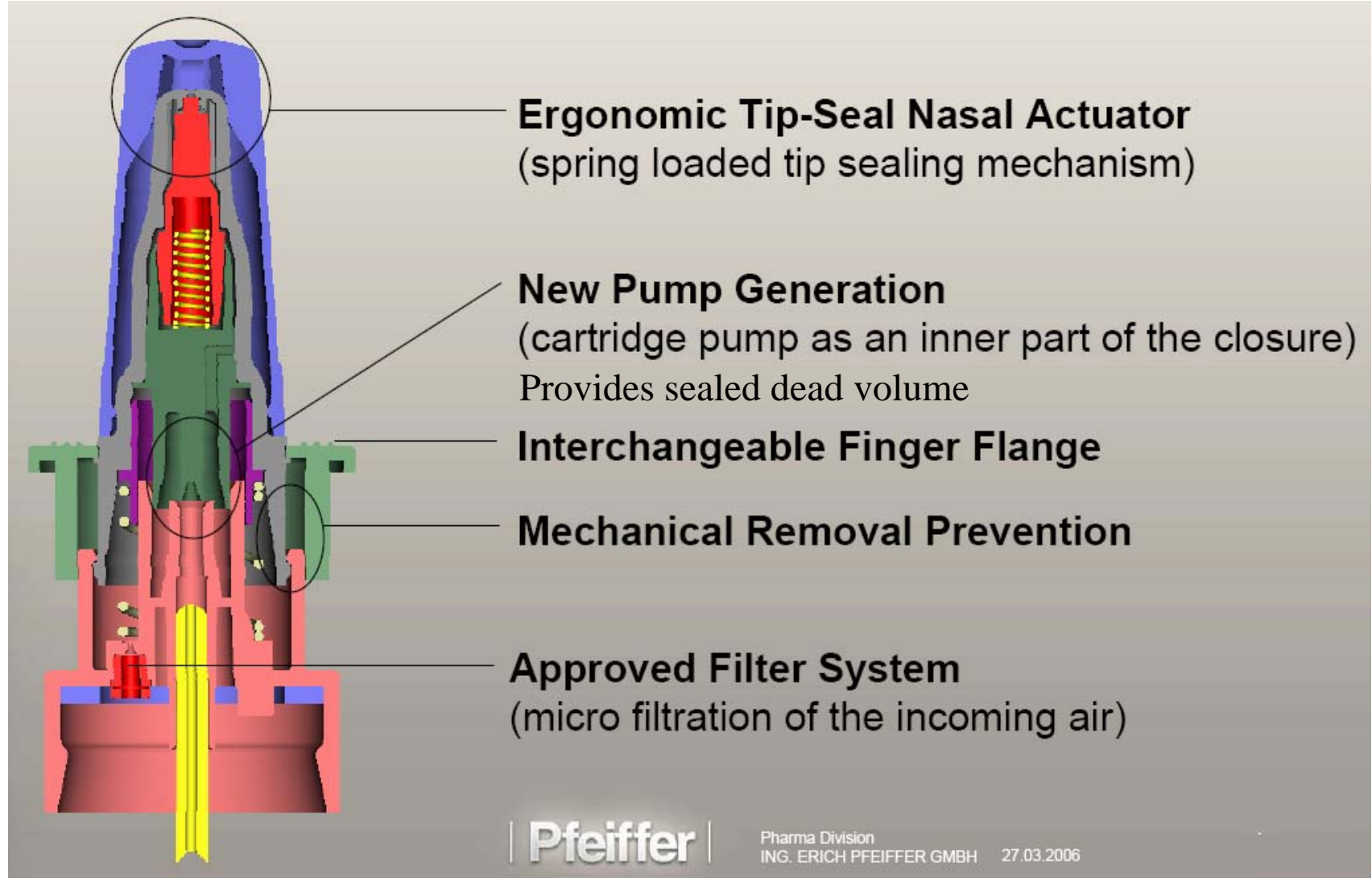
## MicroDose™ Features



## Twist-Tip™ Features



# Preservative Free Spray Bottle



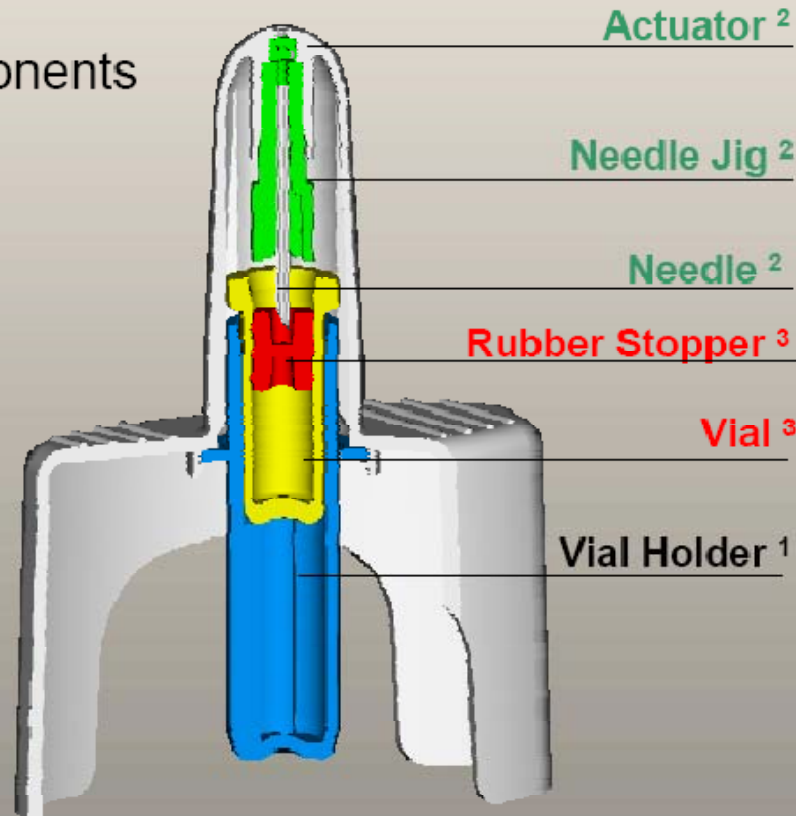
Metering Spray Pump working as a closed system: (Aerodiol® from Servier, Nezeril® from Astra Zeneca, and Otrivin® from Novartis)

# Nasal Delivery Devices – Metered Sprays

## Technical Data

- 3 Plastic Parts
- 3 External Components

Spray.  
Single-dose.  
Metered.



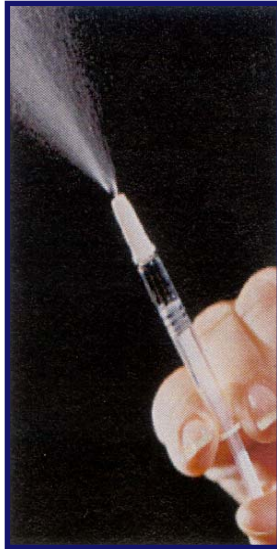
1 = no drug contact  
2 = temporary drug contact  
3 = permanent drug contact

Used in

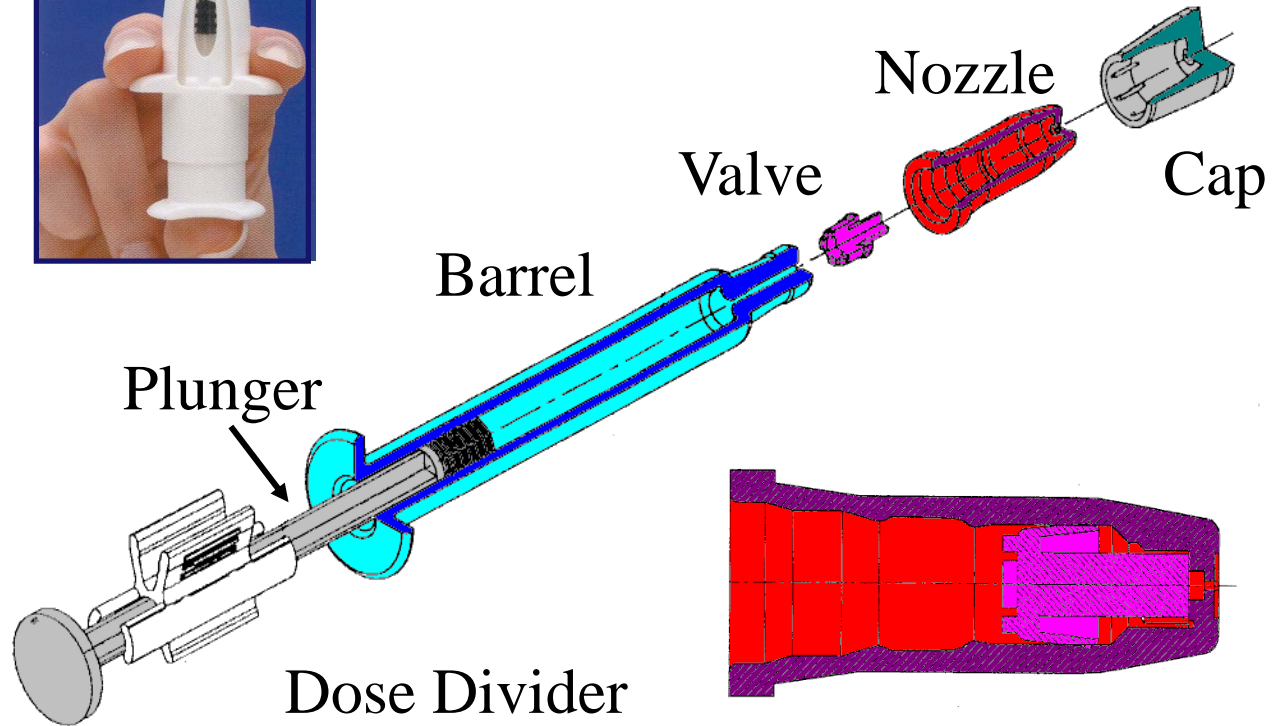
- Hormone replacement therapy (Oestradiol),
- Osteoporosis (Calcitonin),
- Pain management (Butorphanol, Sumatriptan, and Zomitriptan),
- Smoking cessation (Nicotine),
- Enuresis (Desmopressin),
- Motion sickness (Metoclopramide)

# Nasal Delivery Devices – Metered Sprays

## BD - Accuspray



## Vaccine Delivery

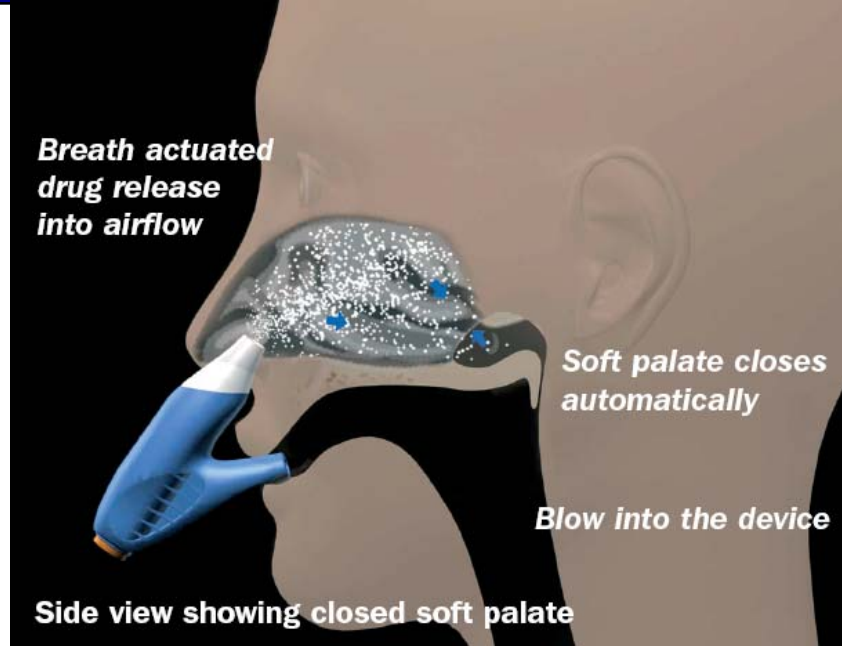


Spray.  
Bi-dose.  
Metered.



# Nasal Delivery Devices – Bidirectional

## OptiNose



Spray.  
Multi-dose.  
Metered  
Breath actuated  
Active coordinated.



## DirectHaler

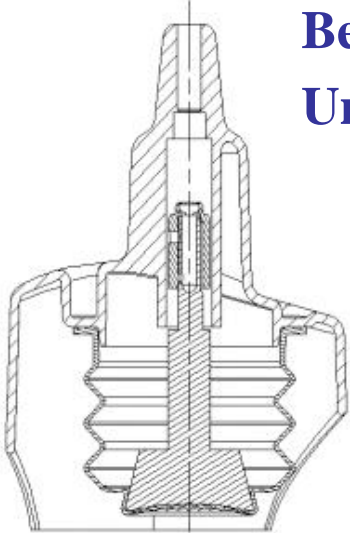


Dry powder

Dry powder.  
Single dose.  
Passive.

# Nasal Powder Delivery Devices – Active

**Bespak  
Unidose DP**



**Valois Monopowder**



**Dry powder.  
Active uncoordinated.  
Single dose.**

**BD SoloVent**



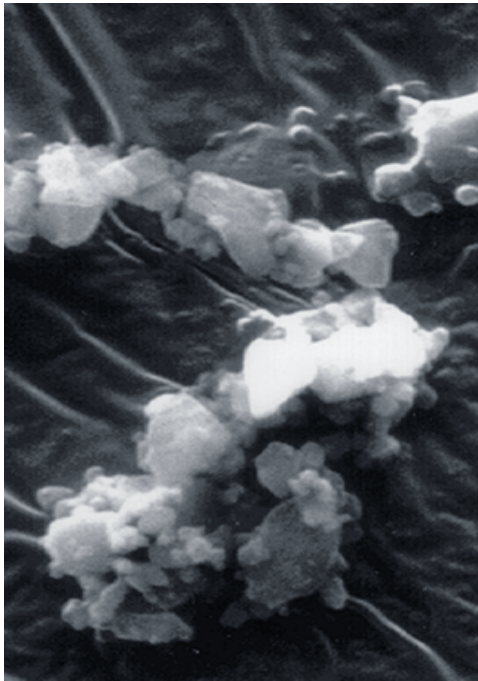
# Outline

- Anatomy and Physiology of the Respiratory System
- Deposition and Pharmacology
- Delivery and Dispersion Devices
- **Powder Manufacture**
- Particle Engineering

# Powder Manufacturing Methods – Milling and Blending

## Milling

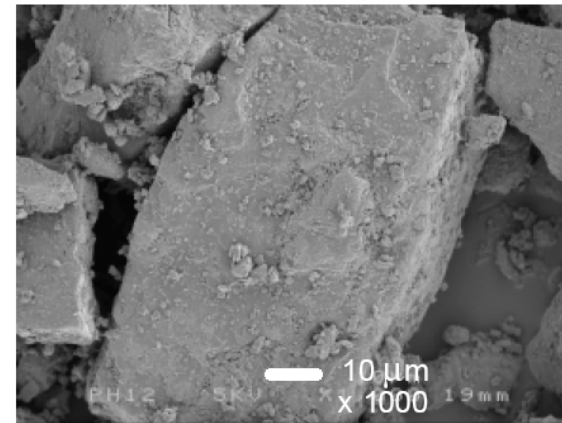
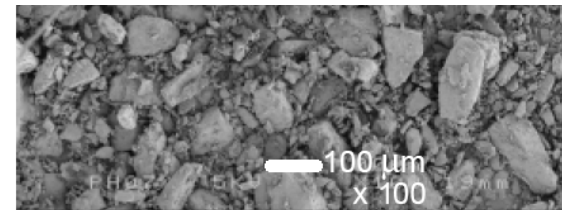
- Jet-milling (dry)
- Homogenization (wet)
- Cryo-milling (cold)



Micronized  
Budesonide

## Blending

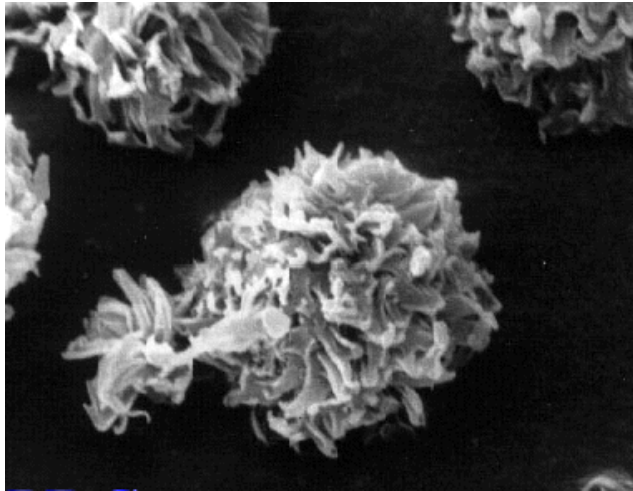
- with larger carrier particles
- with smaller “force control agents”



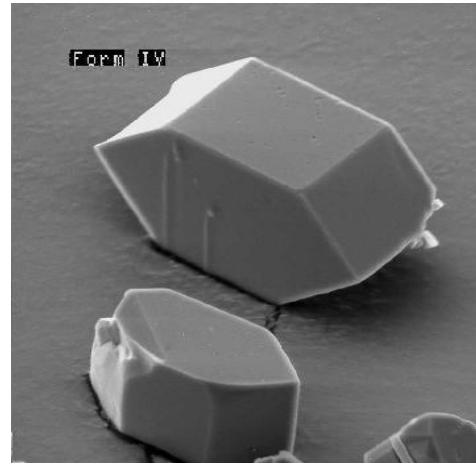
Lactose Blend

# Powder Manufacturing Methods – Precipitation and SCF

## Precipitation

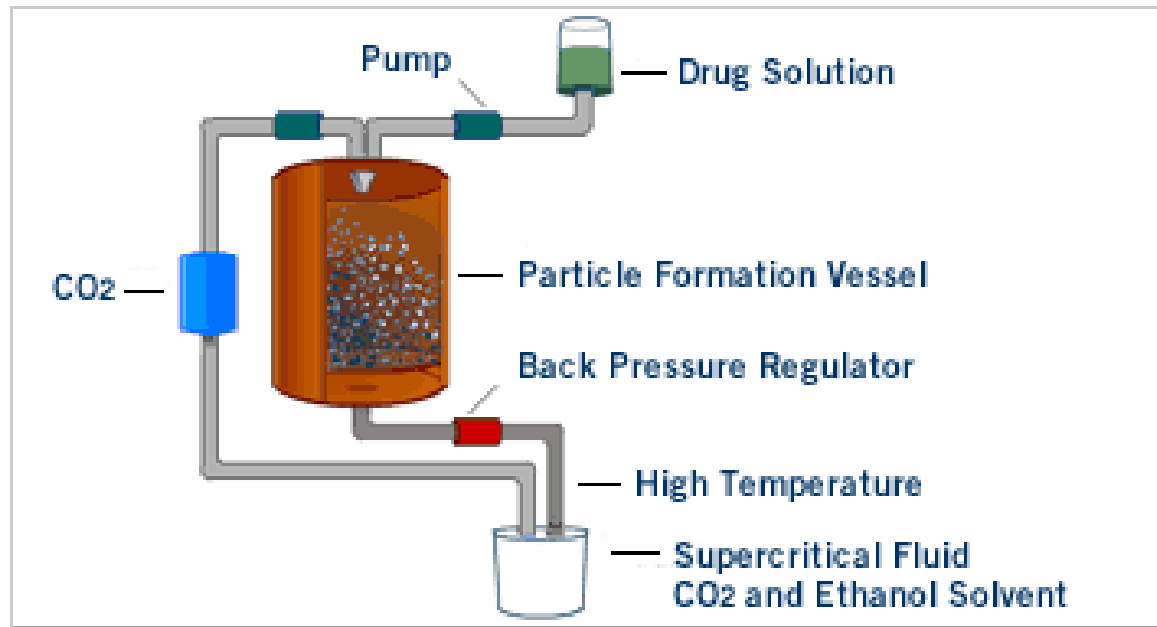


Example:  
Mannkind Technospheres:  
Self Assembling Particles  
Precipitation induced by pH shift



## Supercritical Fluid Particle Technology

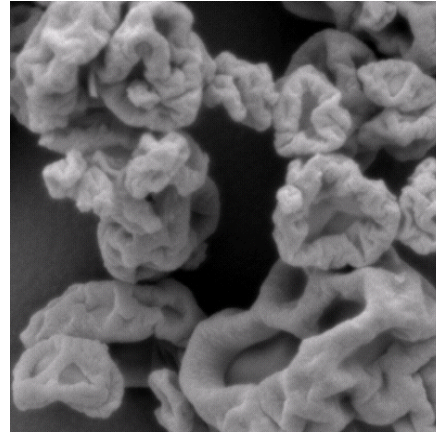
Dispersion and solvent extraction by supercritical fluids



# Powder Manufacturing Methods – Spray Drying

## Spray Drying

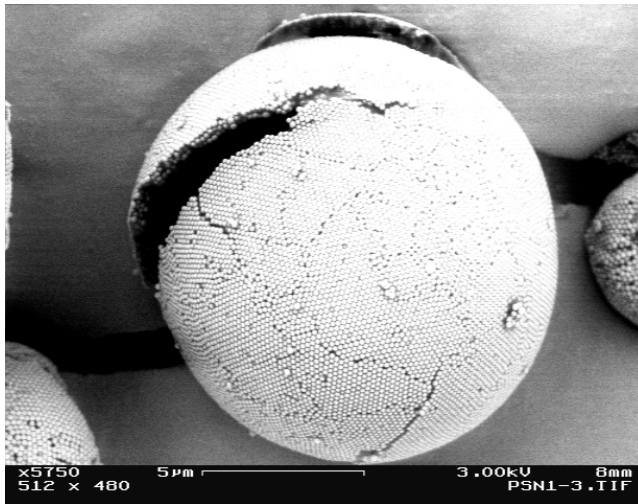
- Solutions
- Suspensions, dispersions
- Emulsions
- Co-solvent
- With pore-forming agent



Protein solution



Pore-forming Agent



Nanoparticle suspension

# Spray Drying at Different Scales

Benchtop



Büchi 191  
Evaporates 0.5 kg / h

Intermediate Scale



Niro Mobile Minor  
Evaporates 7 kg / h

(Very) Large Scale



Kaolin Plant  
Evaporates 16,000 kg / h

# Outline

- Anatomy and Physiology of the Respiratory System
- Deposition and Pharmacology
- Delivery and Dispersion Devices
- Powder Manufacture
- **Particle Engineering by Spray Drying**



# Particle Engineering Basics

- Particle design requires a good understanding of the particle formation process
- Particle formation is determined by formulation *and* process
- The balance between material properties (solubility, diffusion coefficient, solid state properties) and process parameters (droplet size, evaporation rate, droplet temperature) is key to designing the desired particle morphology

# Studying the Particle Formation Process

## Problem:

The two phase flow in an actual spray dryer is difficult to model.

Heat and mass transfer processes are difficult to study *in situ*.

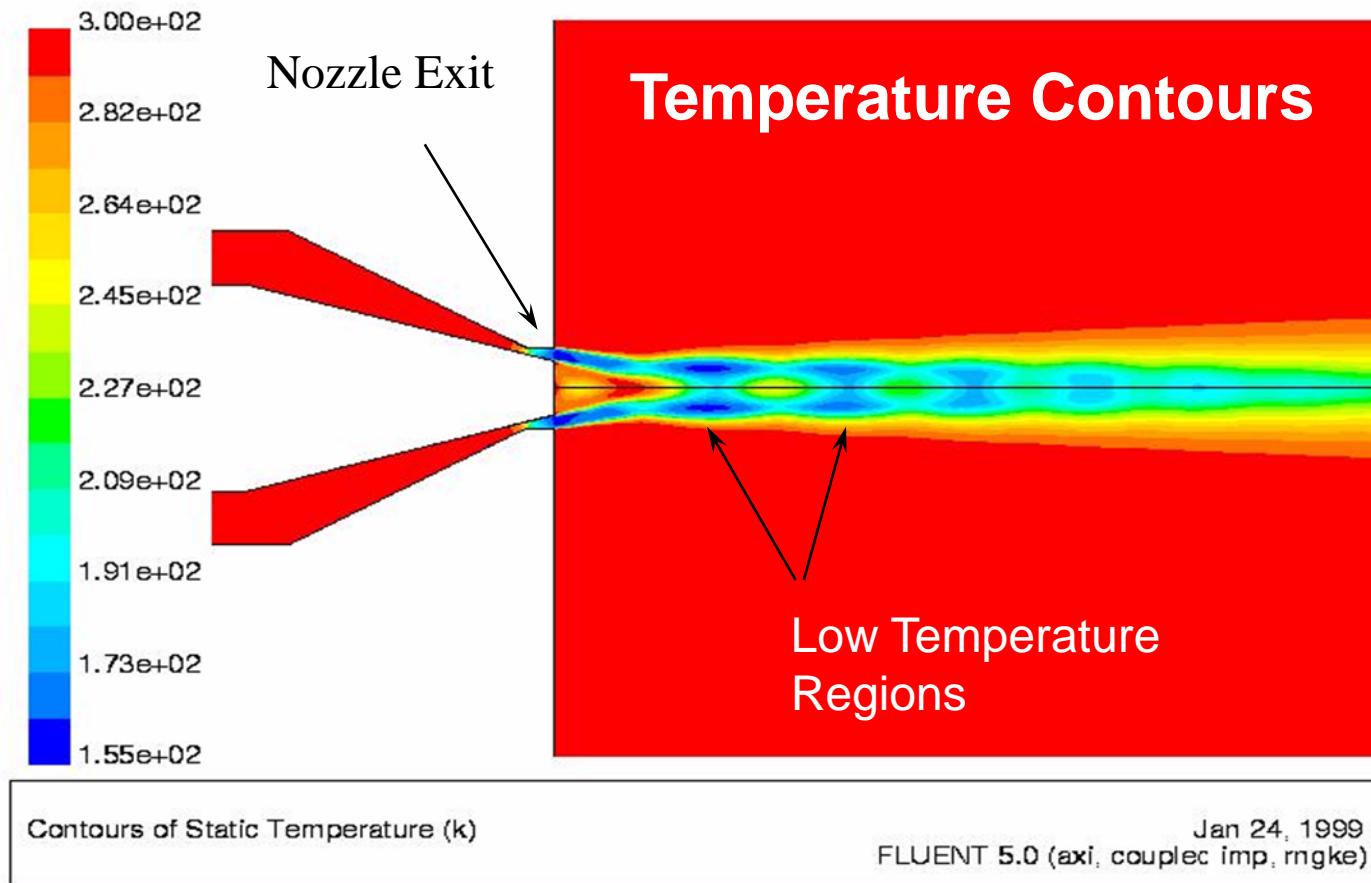
Comprehensive numerical models of evaporation and particle formation are very complex and of limited use due to missing material properties

## Approach:

Isolate and study relevant sub-processes in idealized environments

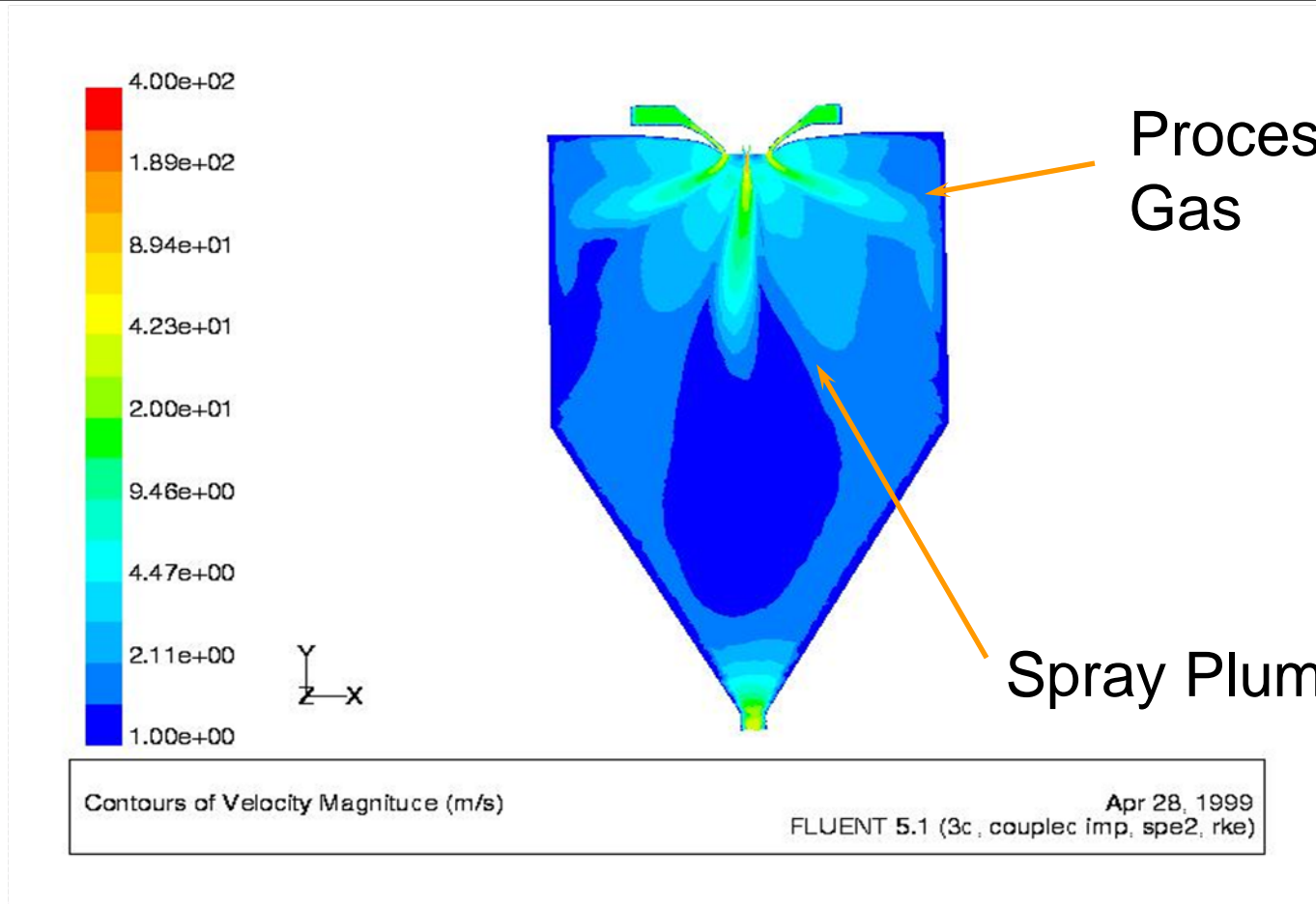
- *Single droplets* (acoustic, electrodynamic, optical levitation, concave hot plate, filament technique)
- *Droplet chains* (vibrating orifice, droplet-on-demand)
- *Research spray dryers* (highly instrumented, monodisperse)
- Approximate analytical model for particle formation
- CFD models for sub-processes with simplified two-phase conditions

# Example: CFD Model of the Atomization Process



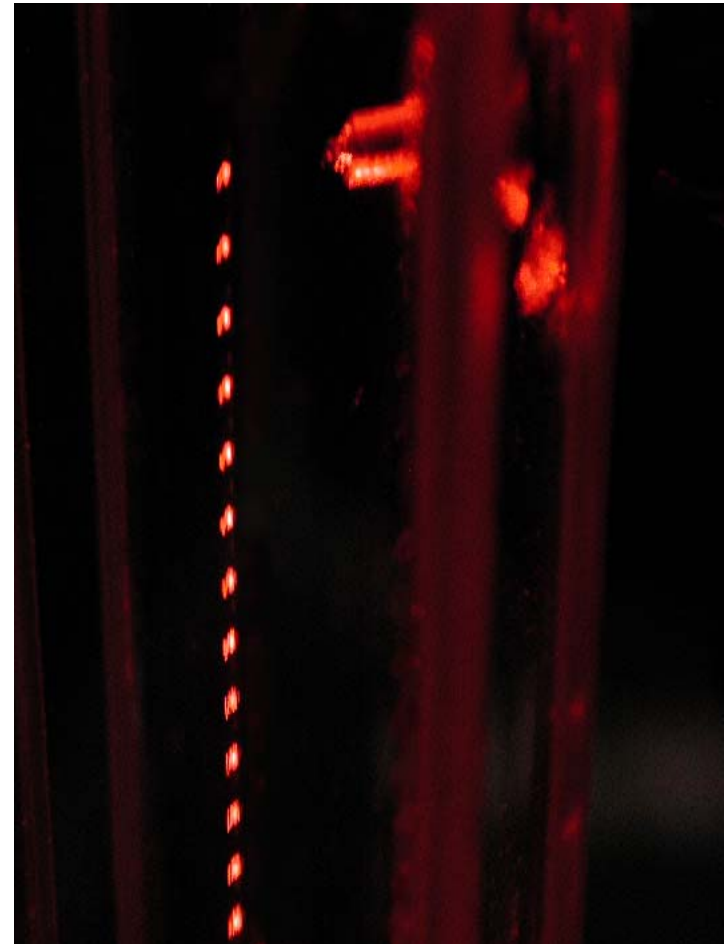
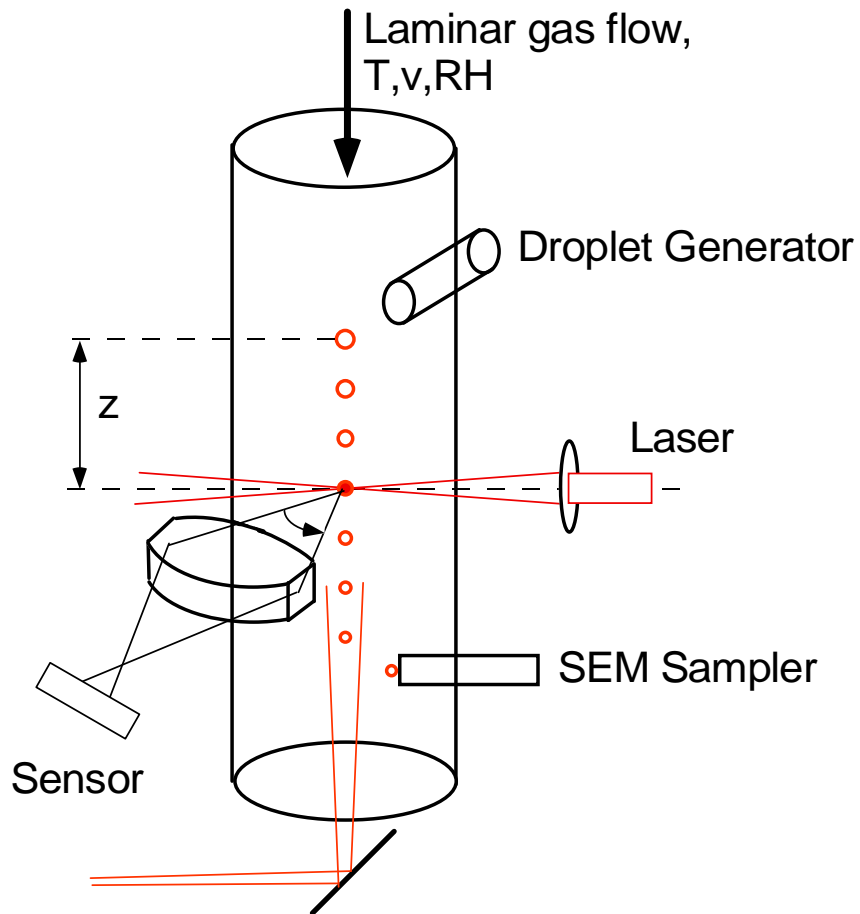
Droplets pass through a flow field with large temperature and velocity gradients.

# Example: Spray Dryer Internal Gas Flow Field



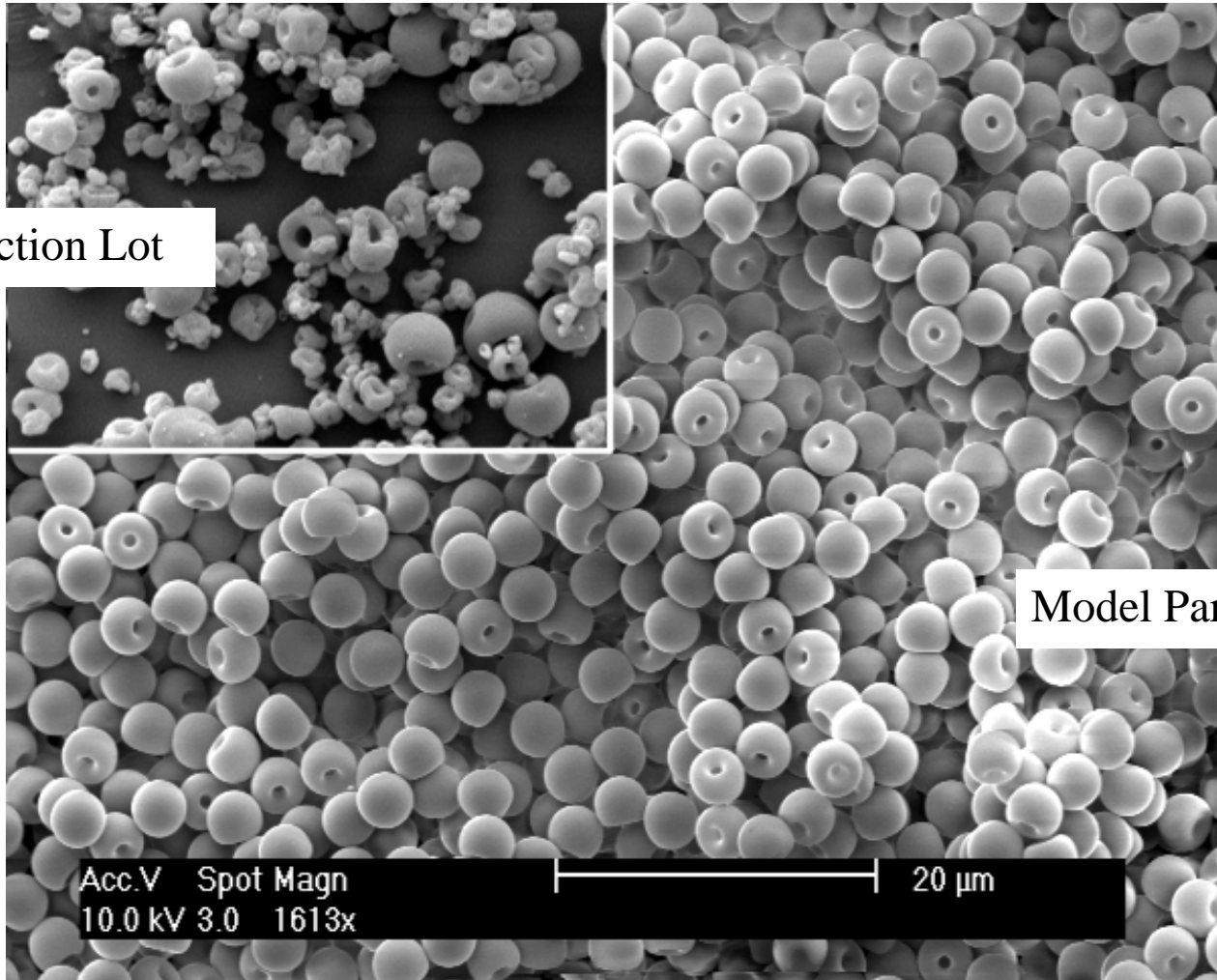
The flow field in the spray dryer is inhomogeneous.

# Idealized Environment: Droplet Chain Technique



Droplets do not influence gas phase or each other. Allows measurement of evaporation rates.

# Monodisperse, Monomorph Particles

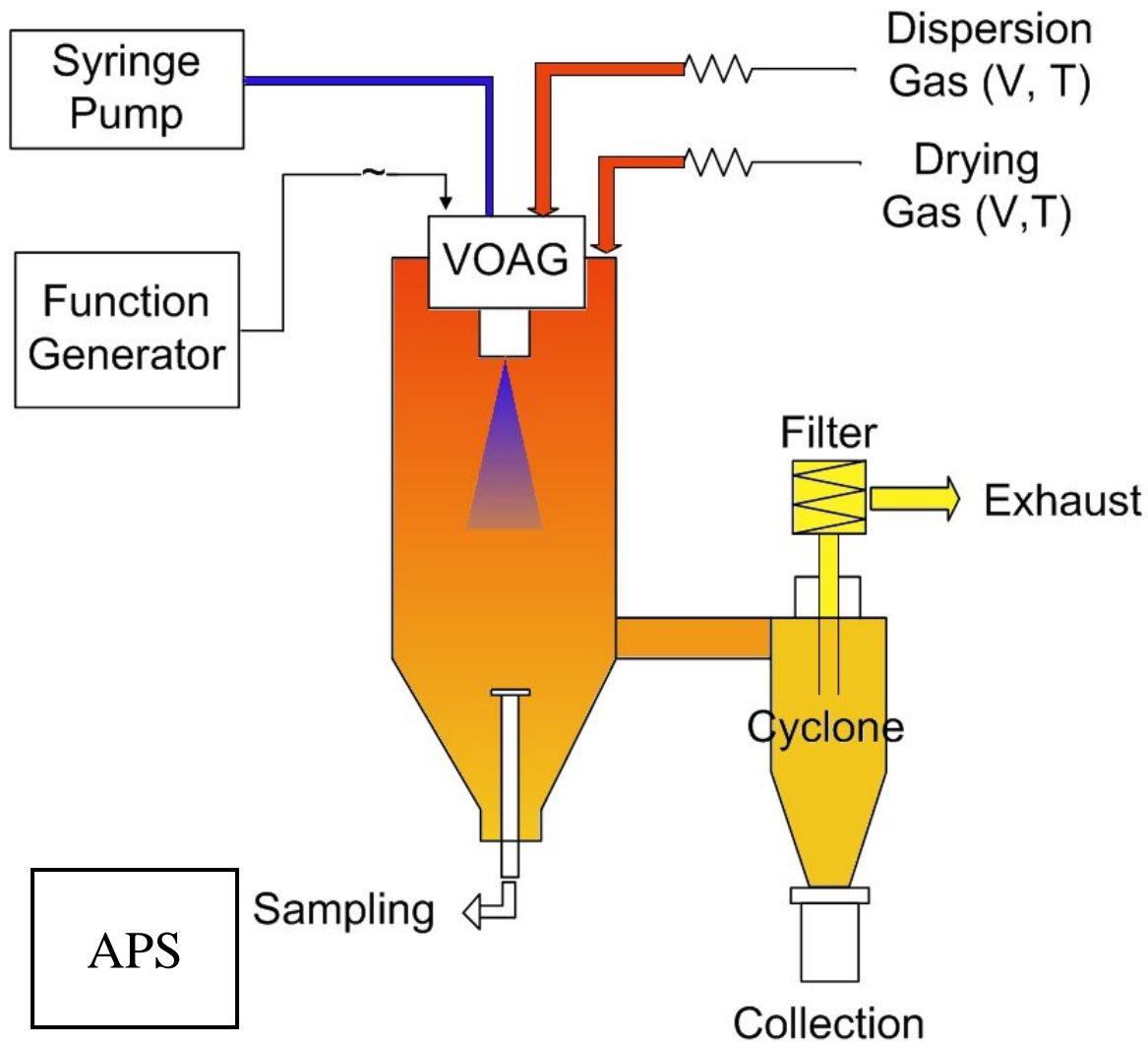


Geometric diameter and density can be correlated with drying rate.

Only small quantities can be produced ( $< 1\text{mg/h}$ )

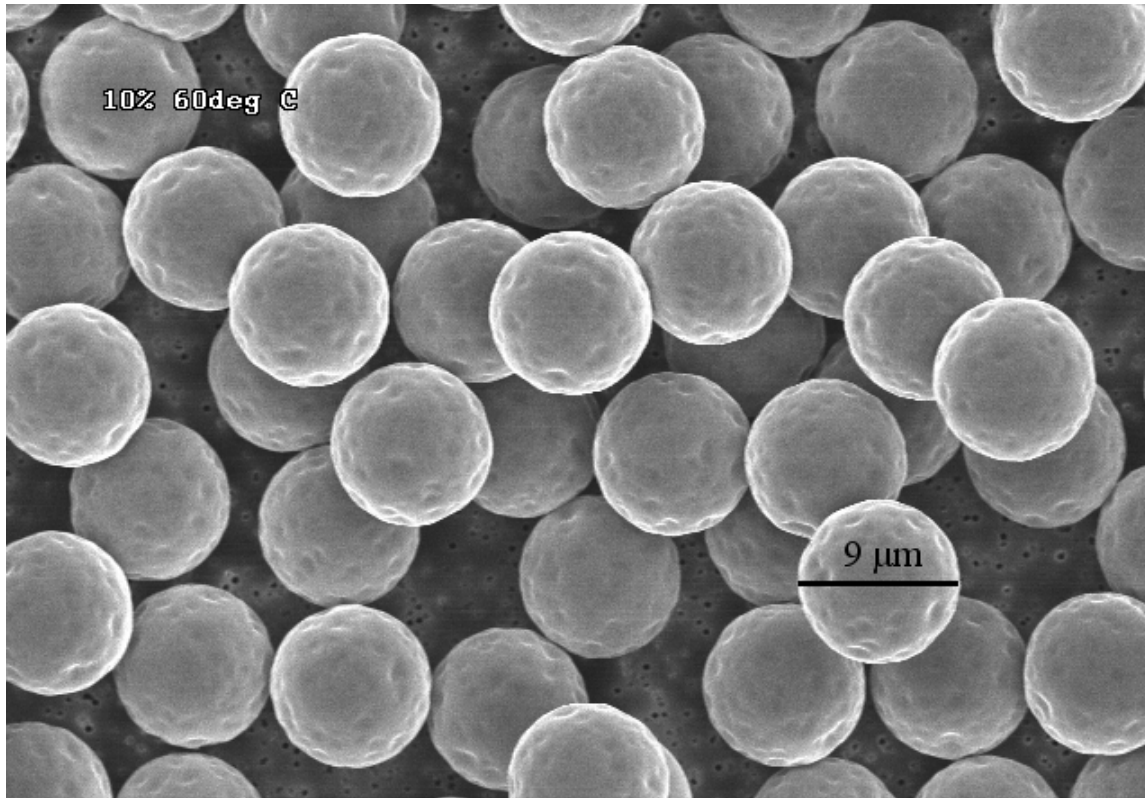
Model Particles

# Idealized Environment: Monodisperse Spray Dryer



- 1000 x higher production rates
- Gas phase conditions not constant
- No direct observation of evaporation process
- Online measurement of aerodynamic dry particle diameter

# Particles from Monodisperse Spray Dryer



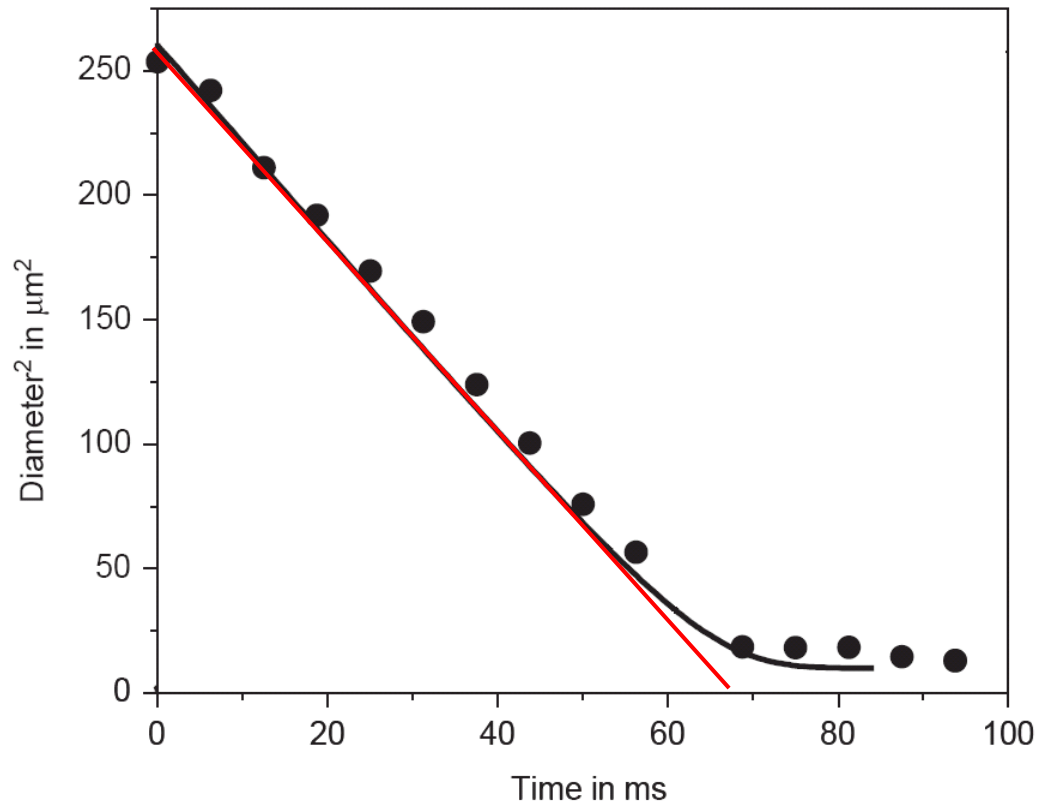
Consistent morphology

Density of main population  
can be determined



# Constant Evaporation Rate Simplification

Definition:  $d^2(t) = d_0^2 - \kappa t$



# How to Estimate Evaporation Rate

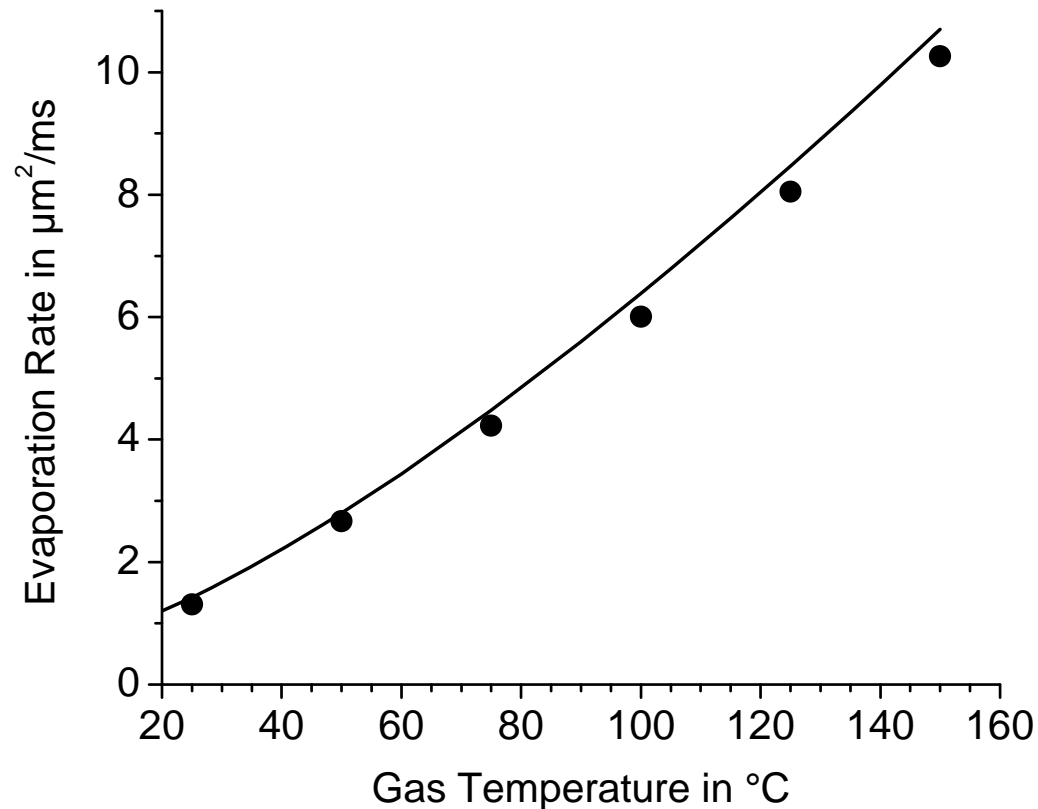
Approximation: 
$$\kappa = 8D_g \frac{\rho_g}{\rho_l} (Y_s(T_e) - Y_\infty)$$

Vapor Pressure: 
$$\log P_{sat} = A - \frac{B}{T + C}$$

$$\begin{aligned} A &= 10.113 \\ B &= 1685.6 \\ C &= -43.154 \\ T &\text{ in K, } P \text{ in Pa} \end{aligned}$$

Wet bulb temperature: 
$$T_{wb} = 137 \left( \frac{T_b}{373.15} \right)^{0.68} \log(T_G) - 45$$

# Water Evaporation Rates



Theoretical and measured evaporation rates for pure water droplets in dry air at gas conditions typical for spray drying applications .

# Constant Rate Assumption Allows Analytical Solution

Analytical model provides dimensionless numbers

Diffusion equation for normalized radial coordinate,  $R=r/r_s$ ,

$$\frac{\partial c}{\partial t} = \frac{D}{r_s^2} \left( \frac{\partial^2 c}{\partial R^2} + \frac{2\partial c}{R\partial R} \right) + \frac{R\partial c\partial r_s}{r_s \partial R \partial t} \quad , \quad d^2(t) = d_0^2 - \kappa t$$

$D$ : Diffusion coefficient,  $c$ : concentration,  $r_s$ : droplet radius,  $d$ : droplet diameter,  $\kappa$ : evaporation rate.

Solution

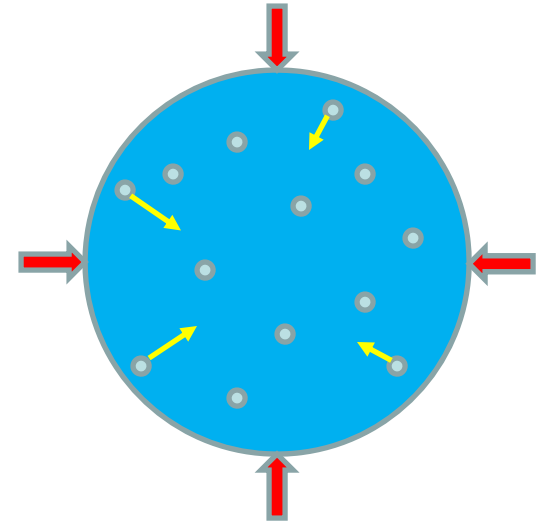
$$c = c_m \frac{\exp(-0.5\text{Pe}R^2)}{3 \int_0^1 R^2 \exp(-0.5\text{Pe}R^2) dR} \quad , \quad \text{Pe} = -\frac{r_s \partial r_s}{D \partial t} = \frac{\kappa}{8D}$$

where the concentration is expressed as a function of the average concentration in the droplet,  $c_m$ . Pe is the Peclet number.

# Peclet Number and Surface Enrichment

Definition: 
$$Pe_i = \frac{\kappa}{8D_i}$$

Describes balance between velocity of surface recession and diffusion



Surface Enrichment: 
$$E_i = \frac{c_{s,i}}{c_{m,i}}$$

Ratio of surface concentration to average concentration

$$E_i = 1 + \frac{Pe_i}{5} + \frac{Pe_i^2}{100} - \frac{Pe_i^3}{4000}$$

# Initial Saturation

Definition: 
$$S_{0,i} = \frac{c_{0,i}}{c_{sol,i}}$$

Ratio of initial concentration to solubility (for solutes)

Dimensionless initial density,

Definition: 
$$P_{0,i} = \frac{c_{0,i}}{\rho_{t,i}}$$

Ratio of initial concentration to true density  
(for suspended material or high solubility solutes)

# Characteristic Times

Droplet drying time:  $\tau_D = \frac{d_0^2}{K}$

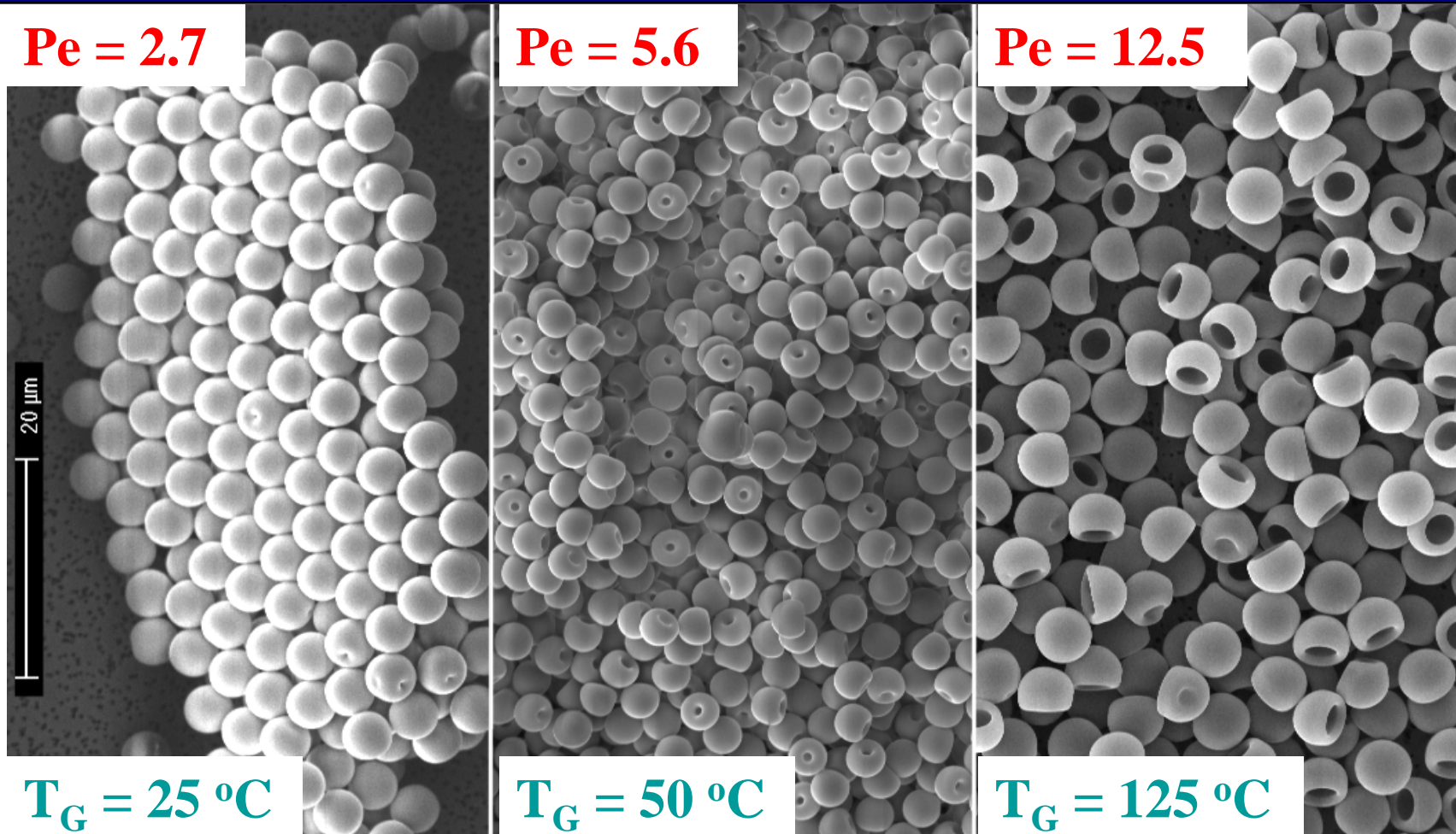
Time to saturation:  $\tau_{sat,i} = \tau_D \left( 1 - (S_{0,i} \cdot E_i)^{\frac{2}{3}} \right)$

Time to true density:  $\tau_{t,i} = \tau_D \left( 1 - (P_{0,i} \cdot E_i)^{\frac{2}{3}} \right)$

Precipitation Window:  $\tau_{p,i} = \tau_D - \tau_{sat,i} = \frac{d_0^2}{K} (S_{0,i} E_i)^{\frac{2}{3}}$

Particle morphology is determined by the components with the shortest  $\tau_{sat}$  or  $\tau_t$ . The precipitation window needs to be long enough or dried solutes will be amorphous.

# Formation Mechanism: Large Molecules

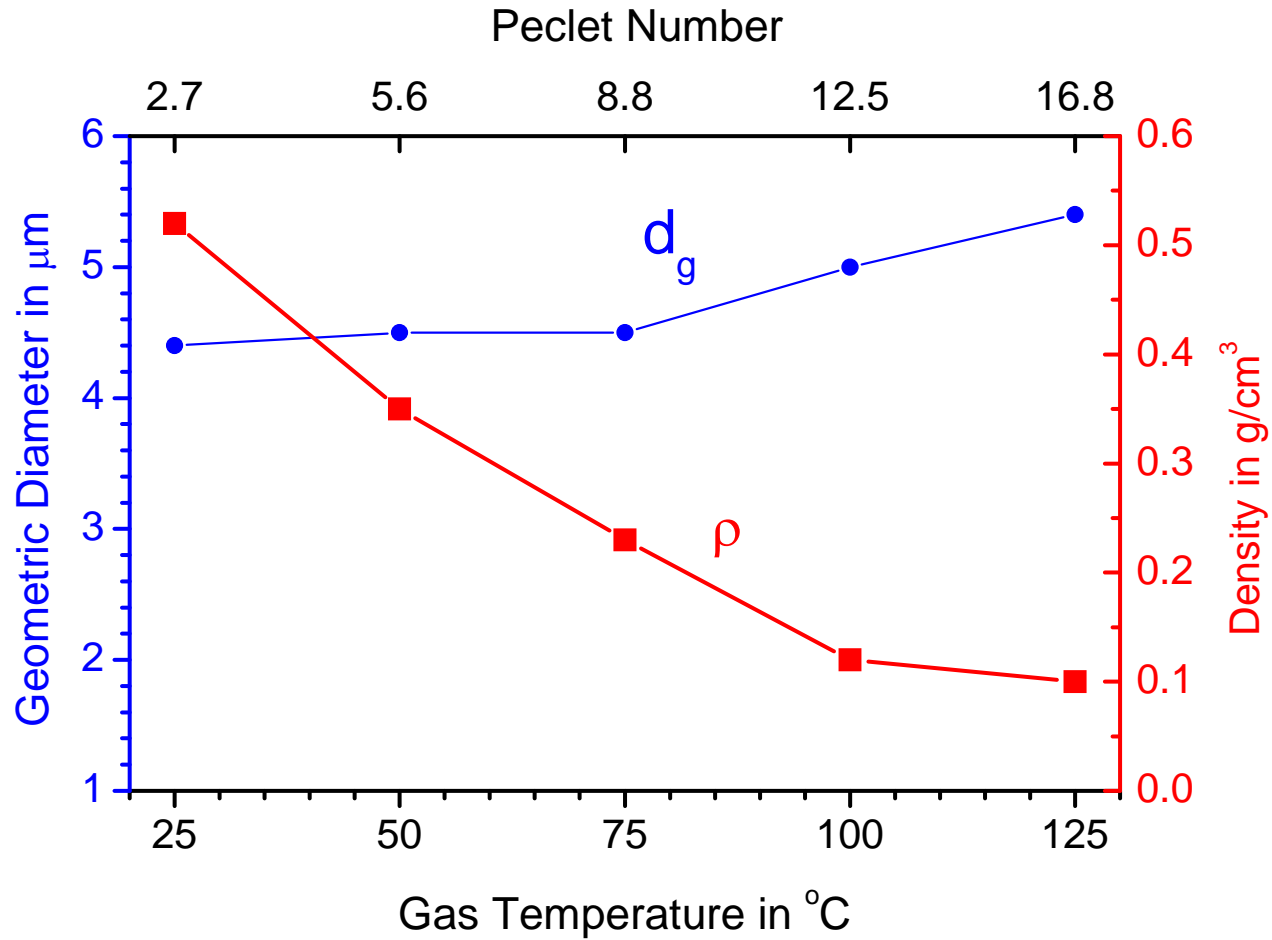


Morphology and density change with drying rate

Glycoprotein, MW: 51 kDa, D:  $6 \cdot 10^{-11}$  m<sup>2</sup>/s (estimate)

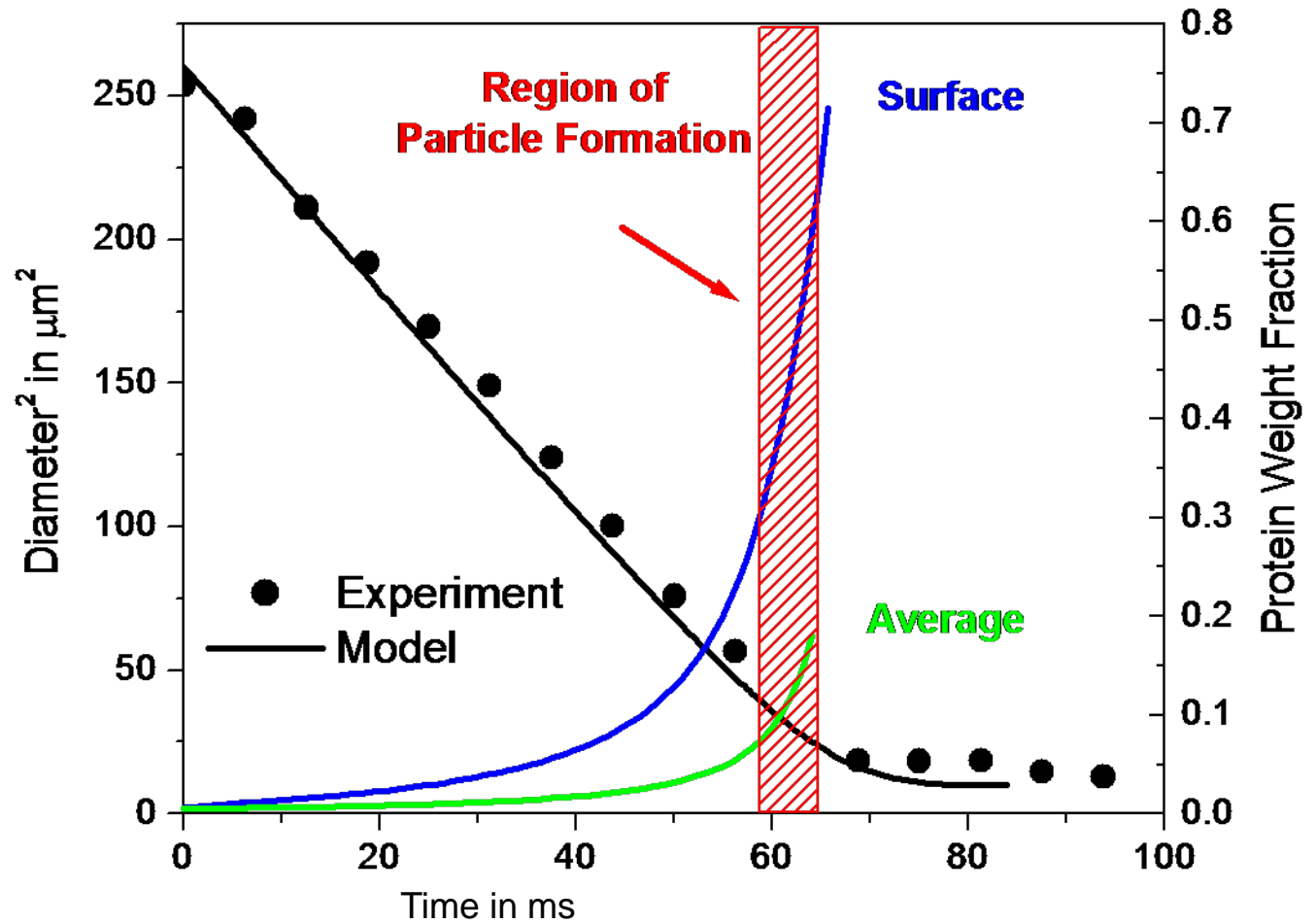
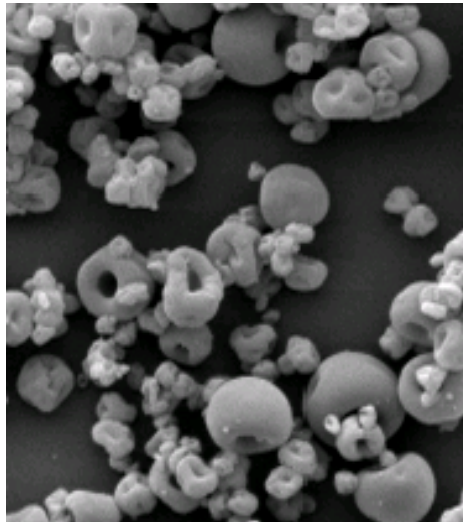


# Density Decreases with Increasing Pe-Number

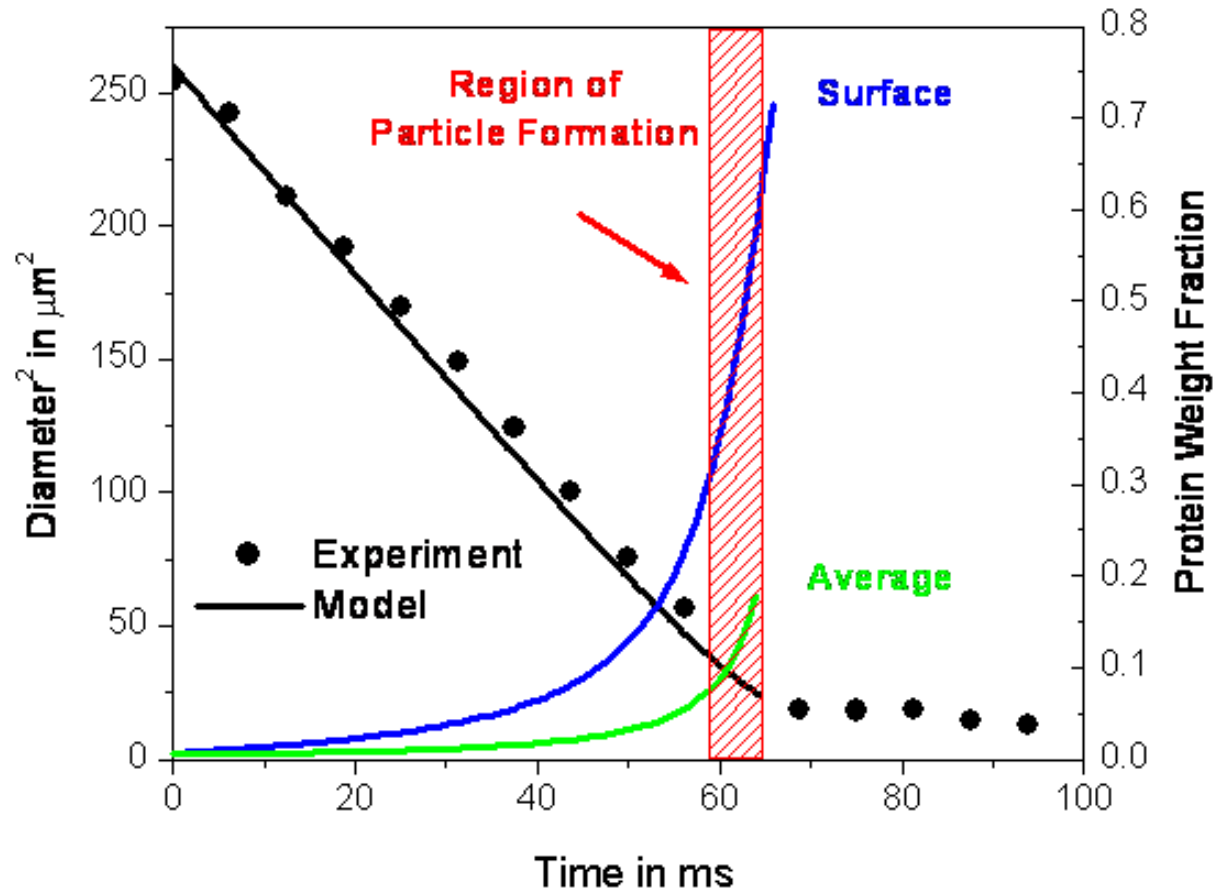


# Evaporation Process for a Glycoprotein

$Pe = 10$

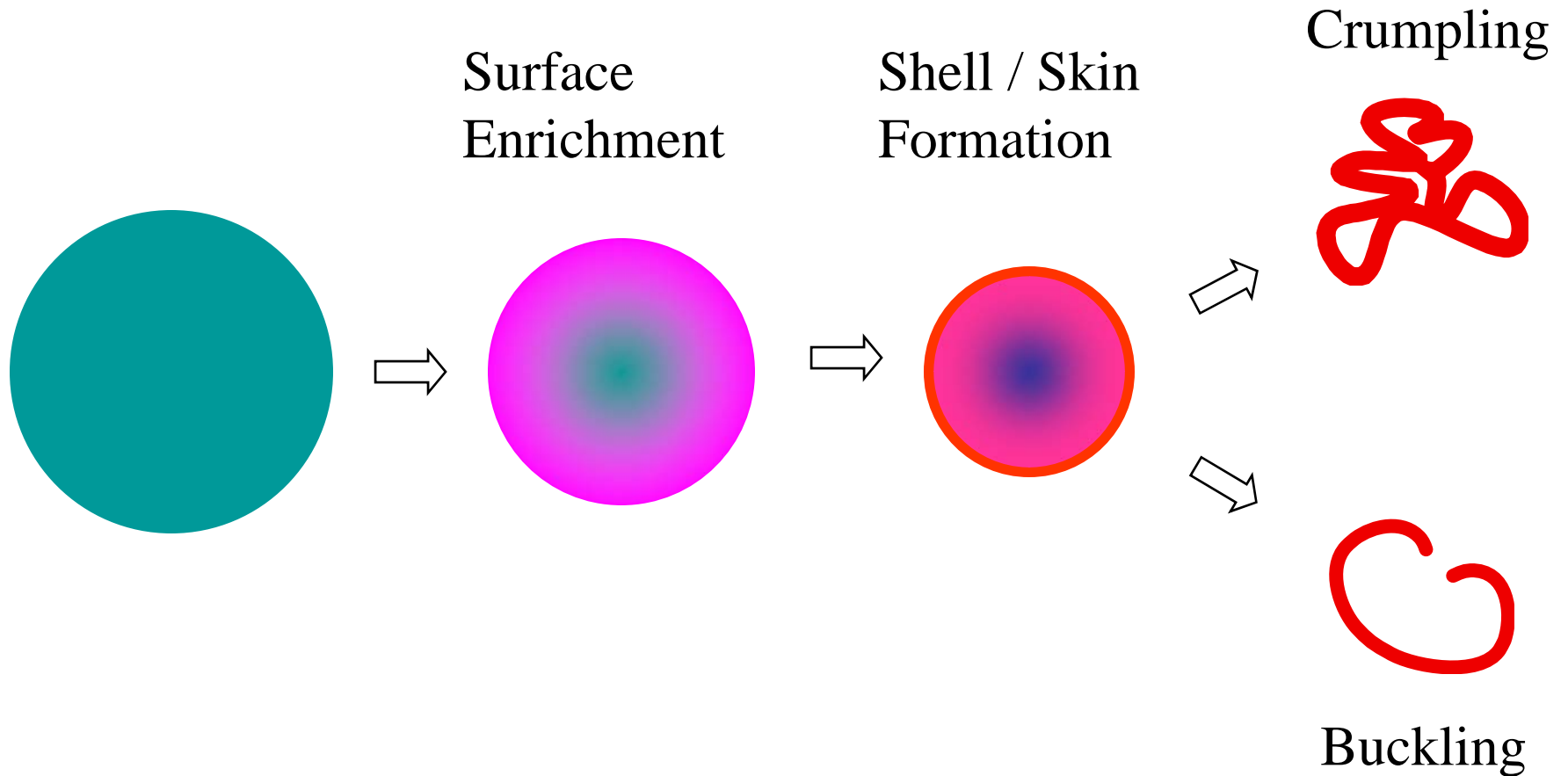


# Theory Predicts Surface Enrichment of Protein

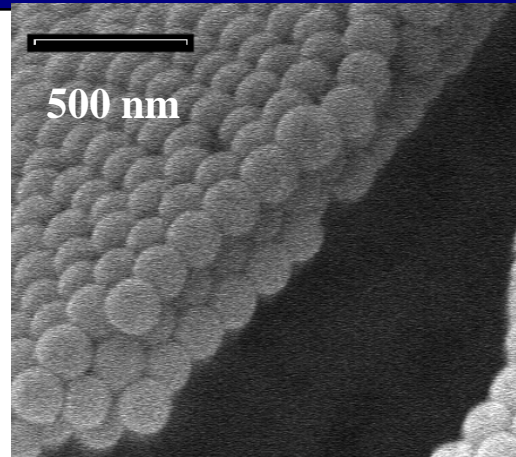
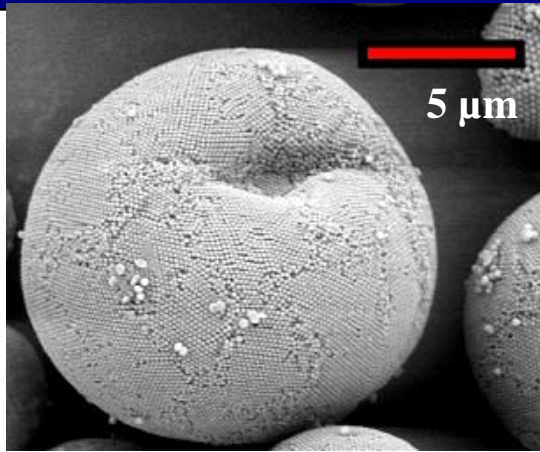


Dry particle formation coincides with predicted high surface concentration of the protein.

# Diffusion Controlled Particle Formation

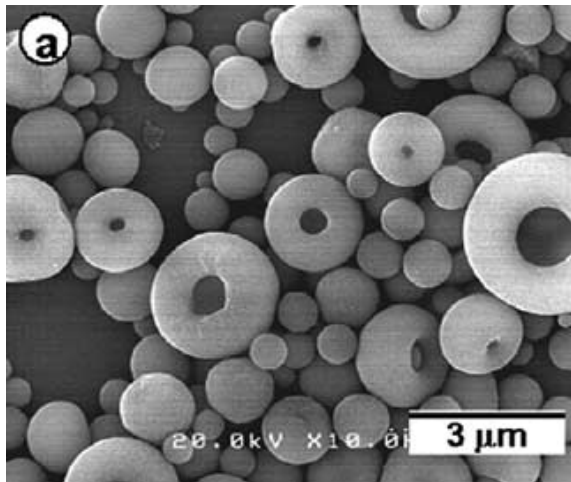
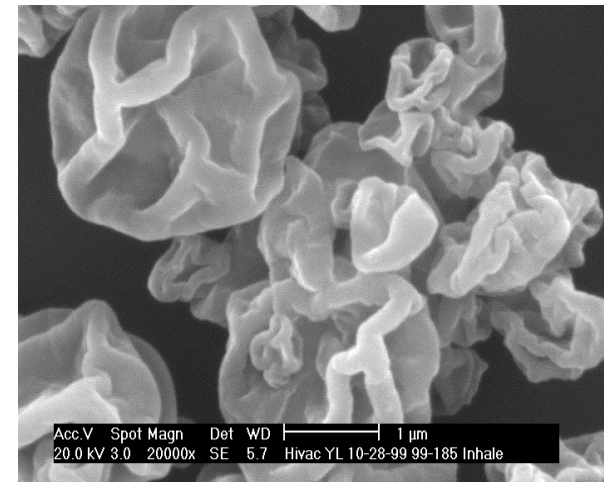


# Large Peclet Number Examples

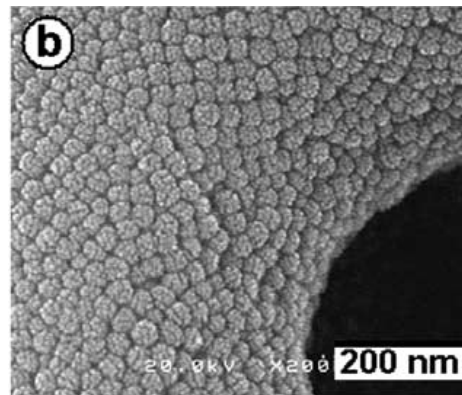


Polystyrene nanoparticle  
(170 nm) suspension

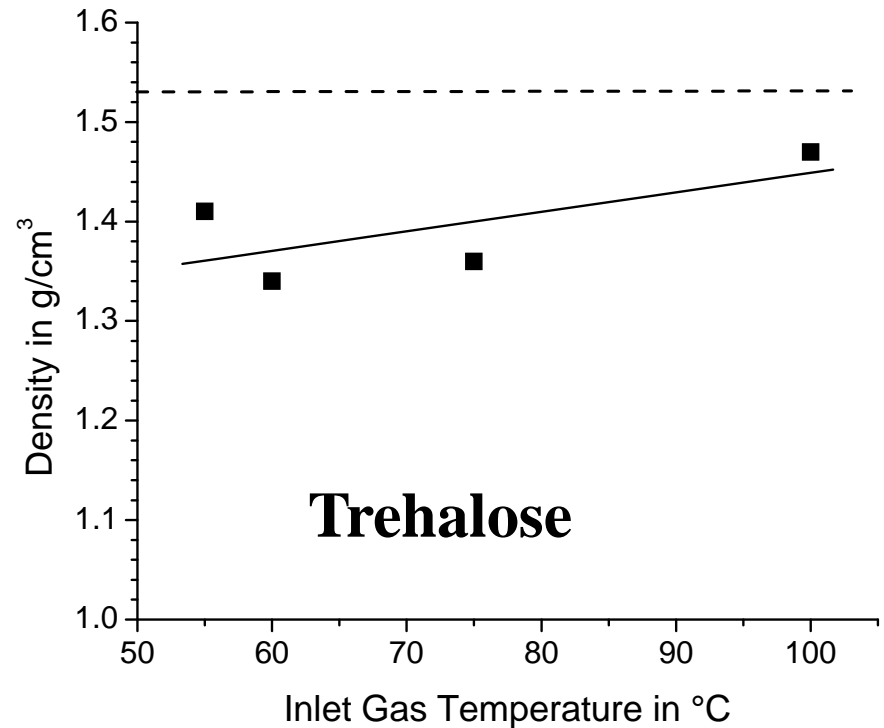
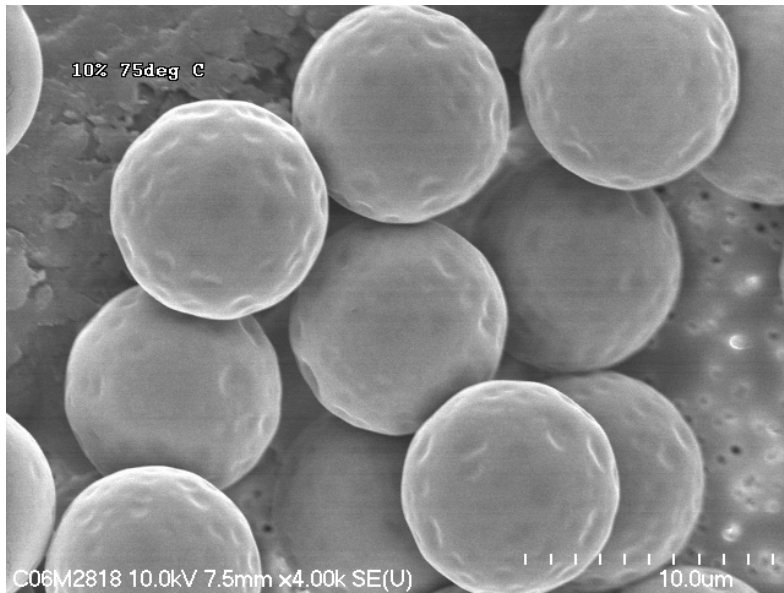
Peptide formulation



Silica nanoparticles, 25 nm

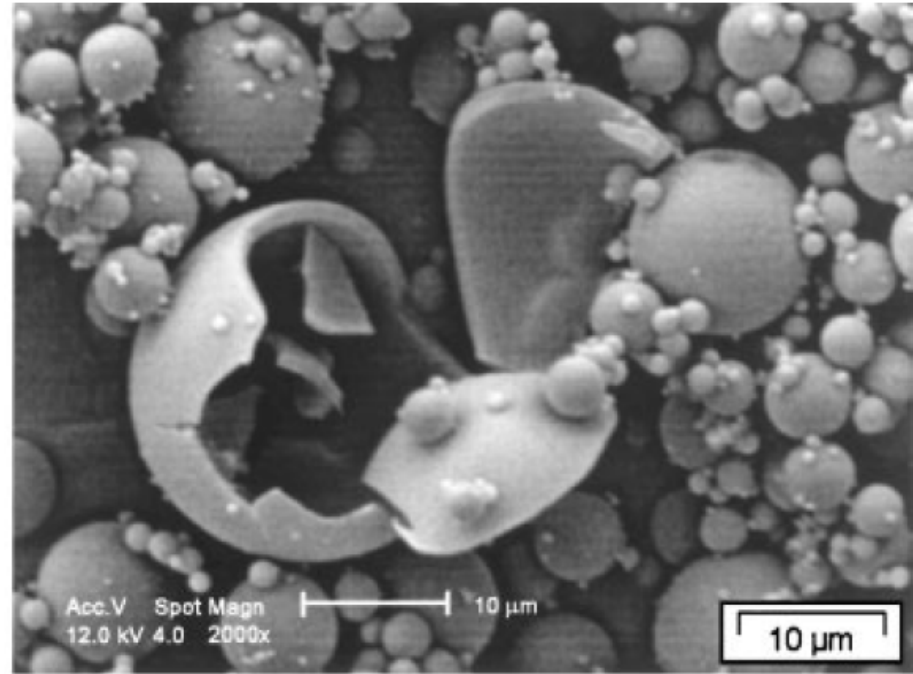
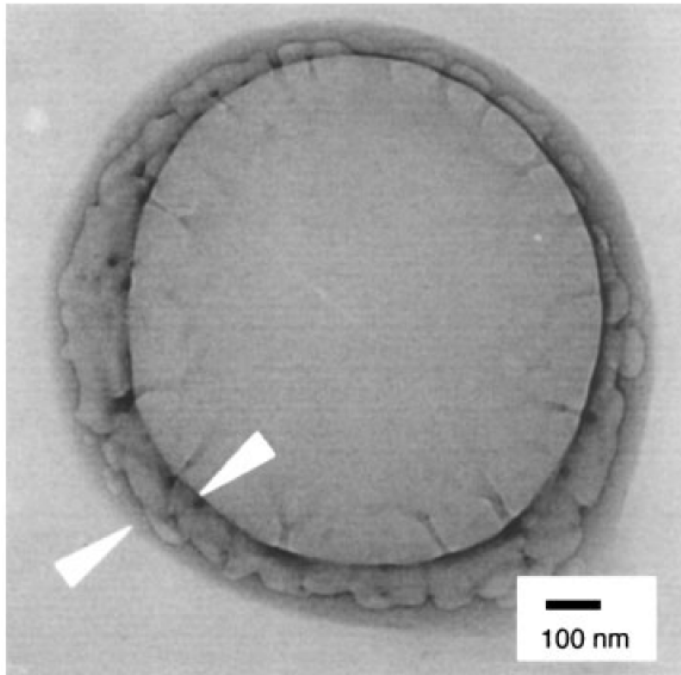


# Formation Mechanism: Small Molecules



Low Peclet Number ( $<2$ ) and high solubility leads to solid particles with a density close to the pycnometer density ( $1.53 \text{ g/cm}^3$ )

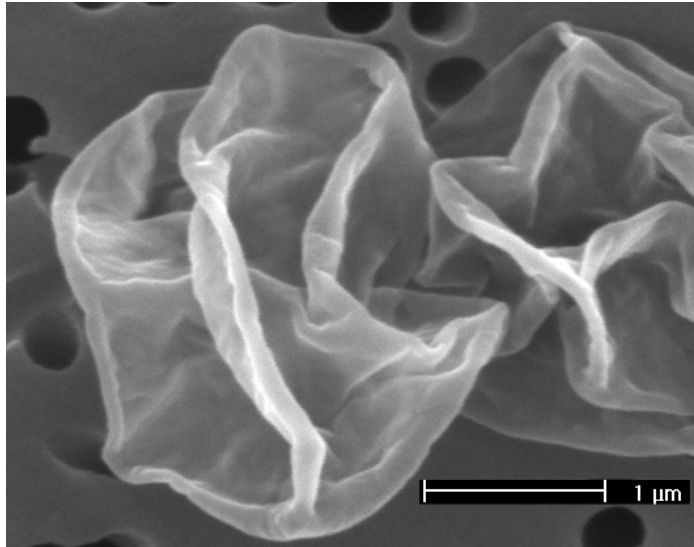
# Small Molecules at High Peclet Numbers



Lactose particles, dried at high drying gas temperatures (200 °C inlet)  
Peclet number range: 2-5

**Saccharides can form hollow particles at high Peclet numbers**

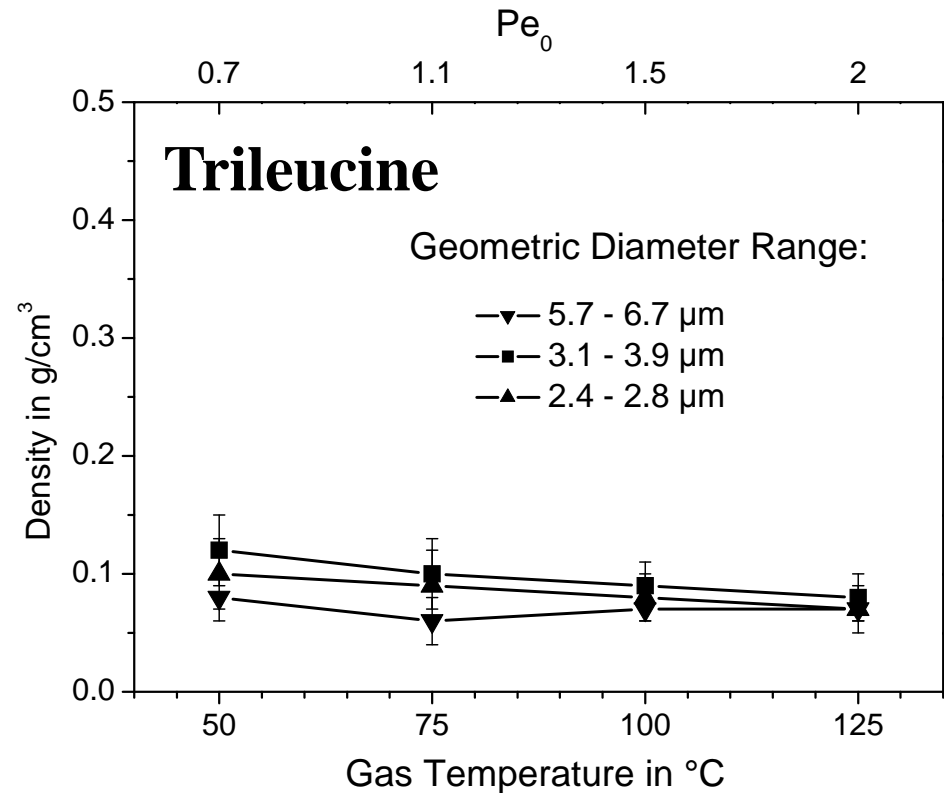
# Small Molecules / Low Solubility – High Surface Activity



Solubility: 8 mg/ml (25°C, pH7)

Surface Activity: 42 mN/m (sat, 25°C)

MW: 357.5 Da

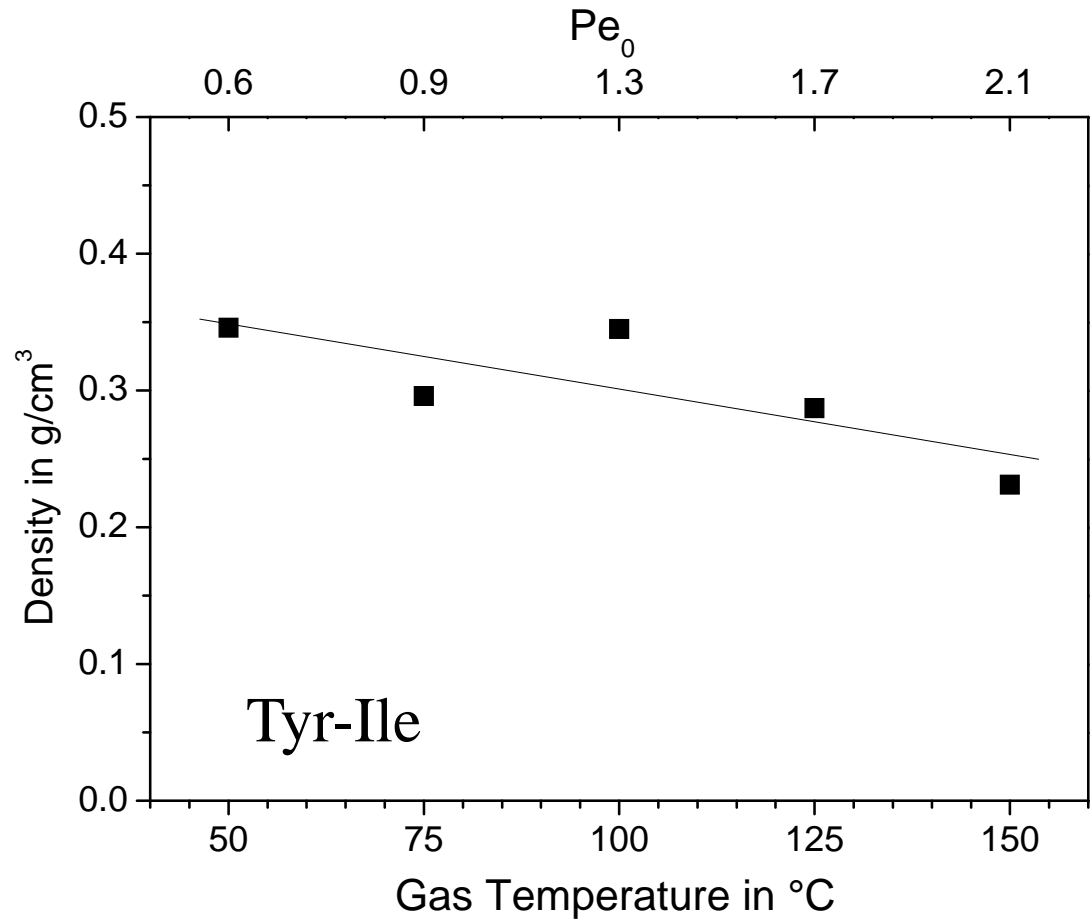
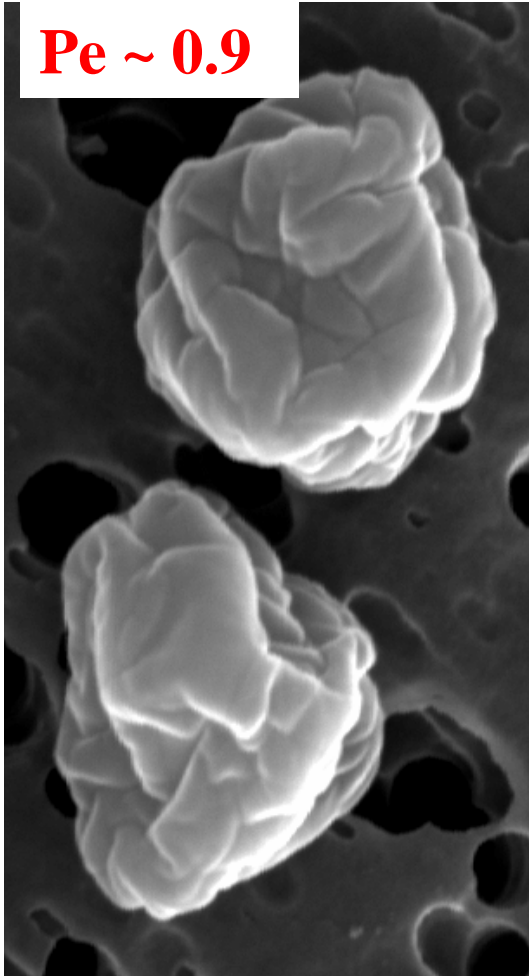


Particles with very low density can be formed from small molecules



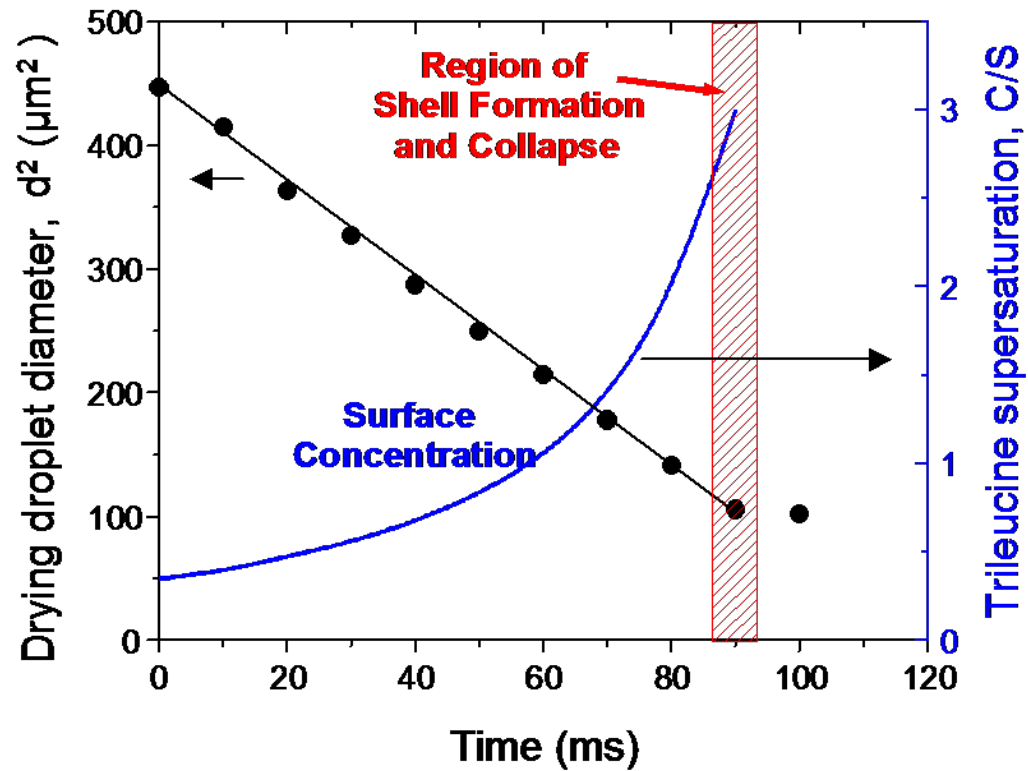
# Small Molecules / Low Solubility – Low Surface Activity

**Pe ~ 0.9**



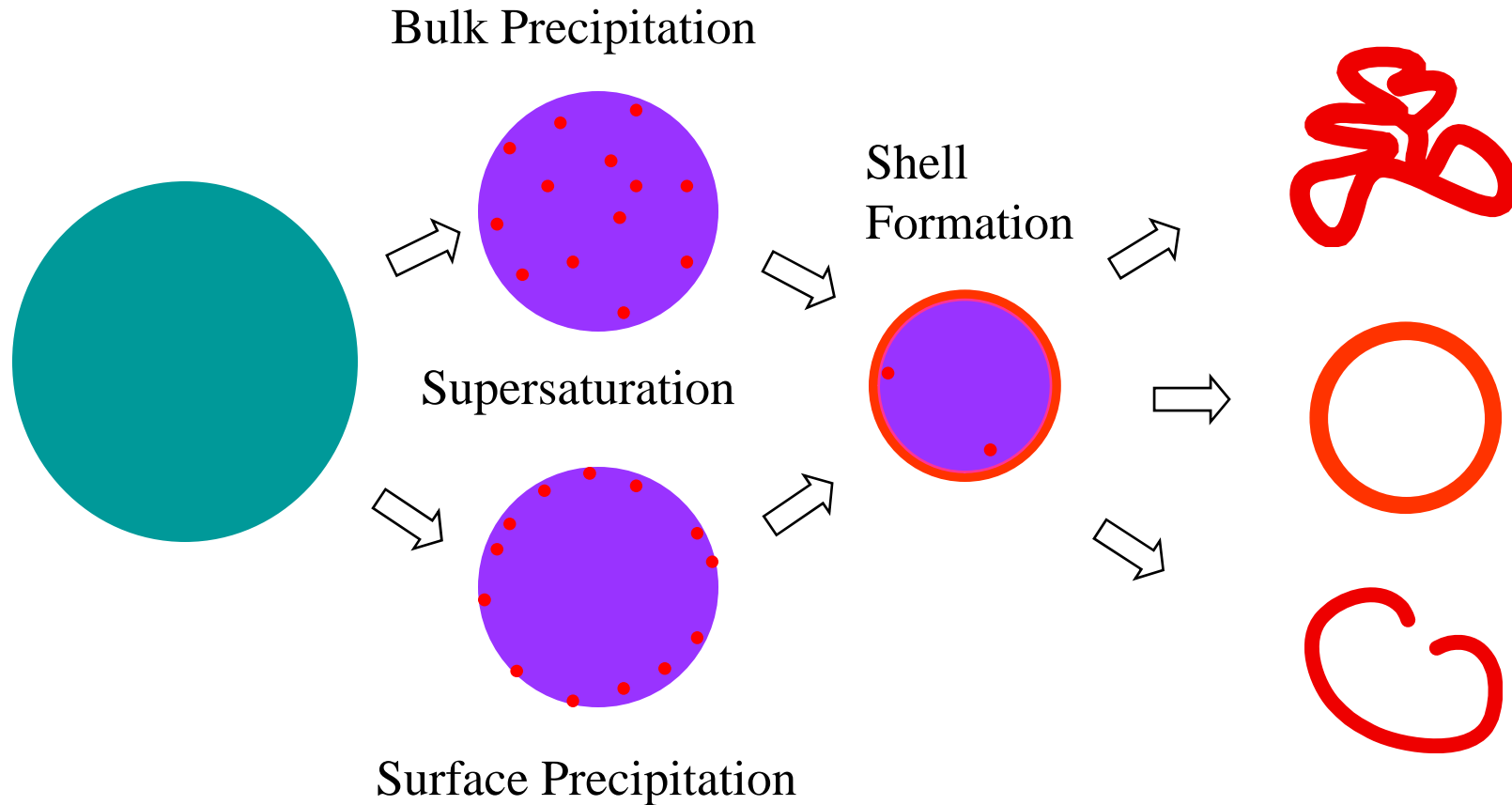
Surface activity is not necessary for low particle density

# Particle Formation Coincides with Supersaturation

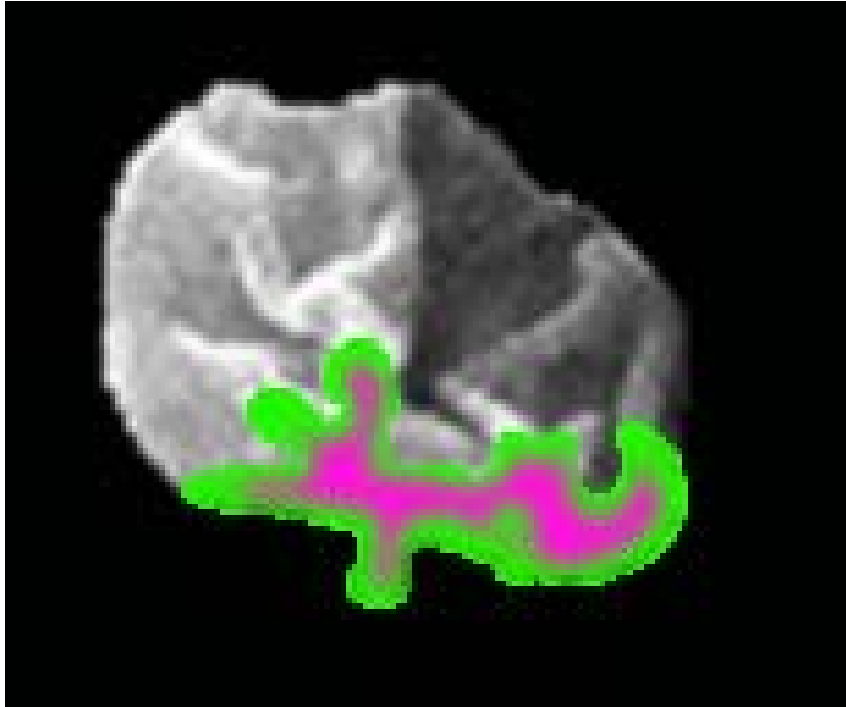


Precipitation leads to sharp increase in Pe - number

# Particle Formation with Early Phase Separation



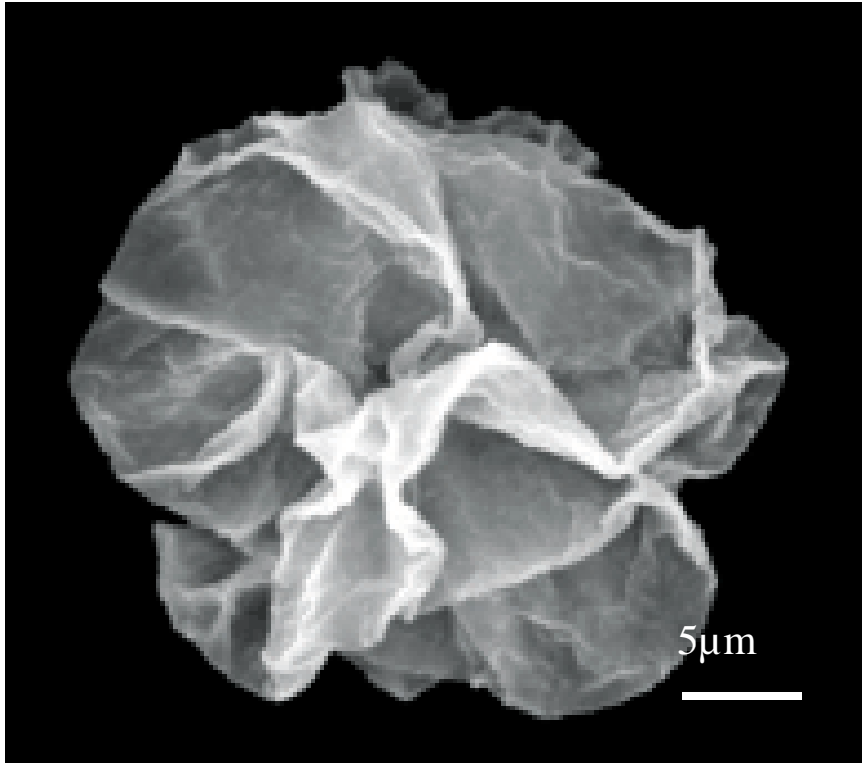
# Designing Structured Particles - Applications



- **Encapsulation**
- **Structural layers**

- **Improving physical stability**
- **Improving biological / chemical stability**
- **Improving powder / aerosol properties**
  - Flowability
  - Dispersibility
  - Density / Aerodynamic diameter
- **Improving delivery**
  - Solubility
  - Bioadhesion
  - Release
  - Targeting

# Example 1: Large Porous Particles (Alkermes / AIR)



- $D_p = 5-30 \mu\text{m}$
- $D_a = 1-5 \mu\text{m}$

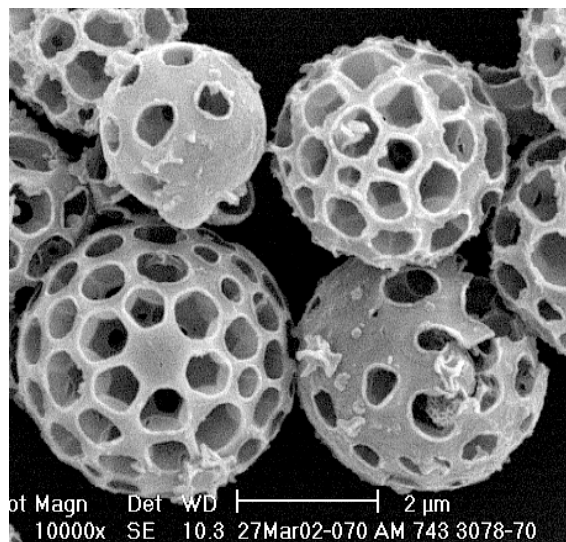
- Large particles with small aerodynamic diameter

$$D_a = D_p \sqrt{\rho_e}$$

Provide good dispersibility

- Lipid (DPPC) based
- May use additional excipients such as organic salts

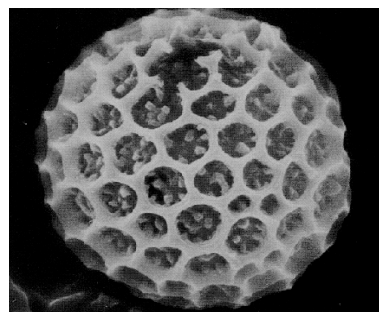
## Example 2: Lipid Based Particles (Nektar Therapeutics)



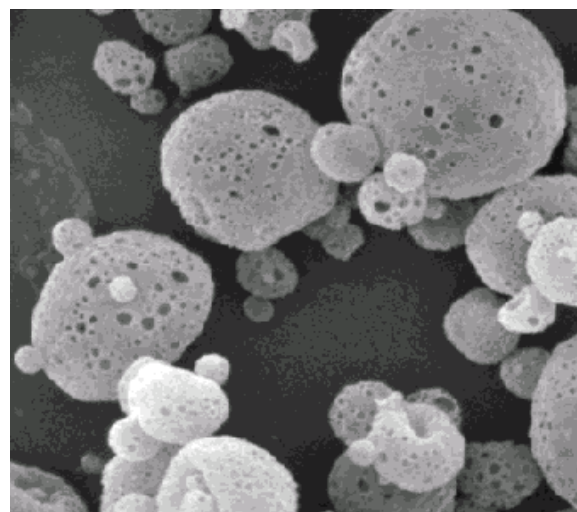
Small  
Molecule  
Formulation

- Small porous particles provide good dispersibility and facilitate transport to the peripheral lung
- Lipid (DSPC) based
- May use pore-forming agent to lower and control particle density

**PulmoSphere®**



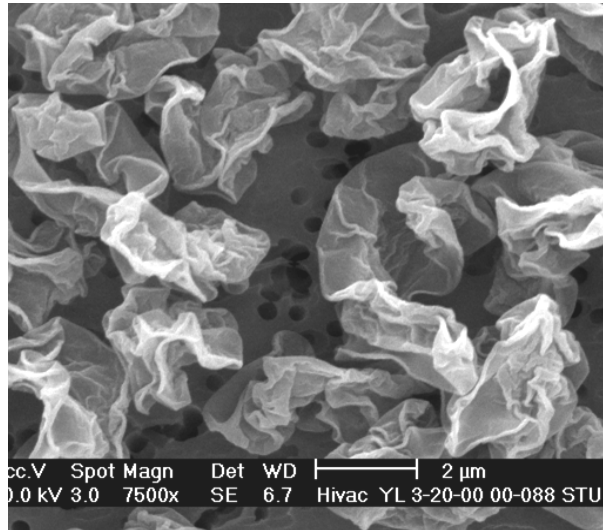
Mushroom Spore



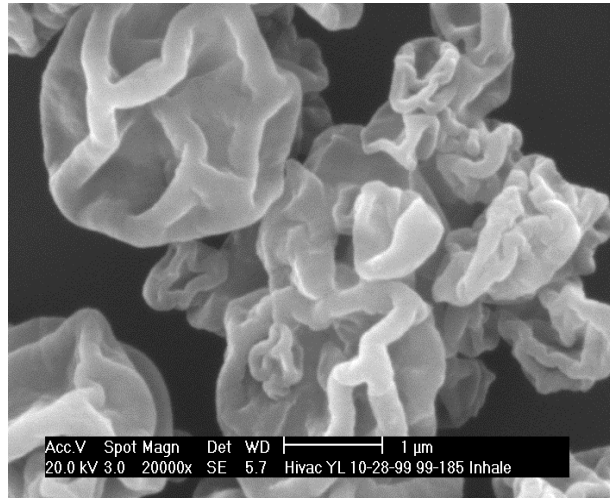
Calcitonin

# Example 3: Amino Acid / Sugar Based Particles (Nektar)

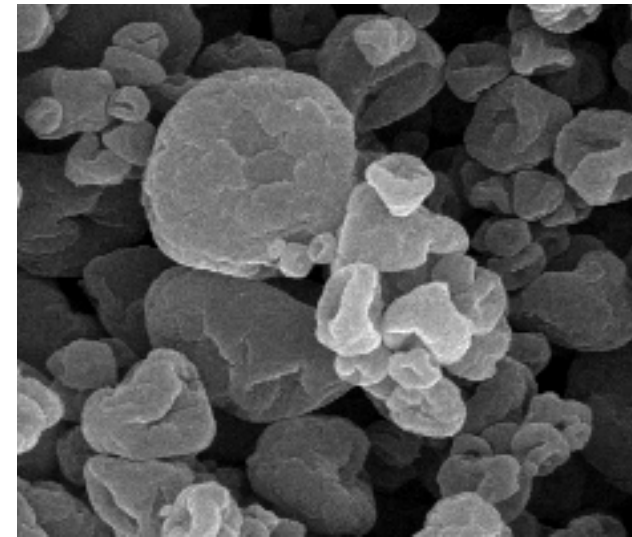
## Trileucine Shell



## Protein Formulation



## Crystalline Amino Acid Shell



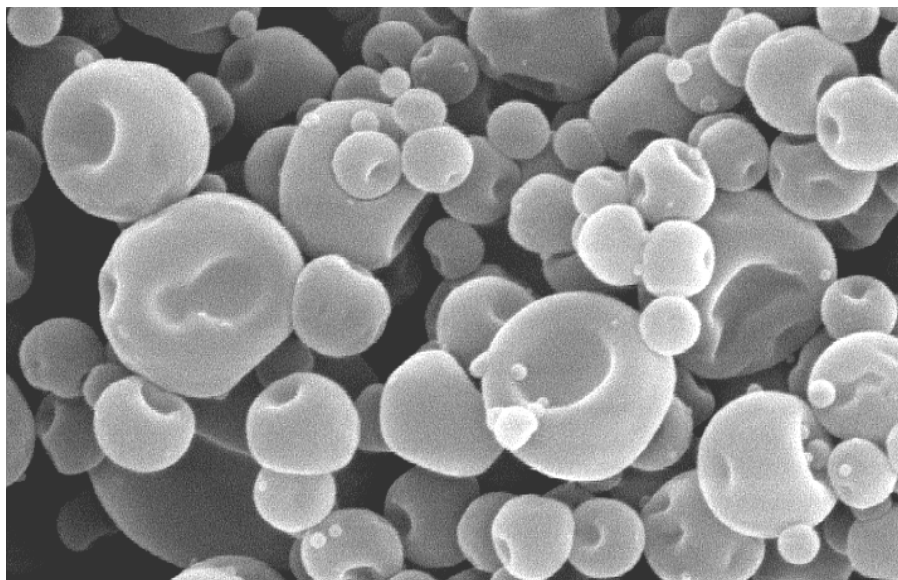
## Typical Excipients

- Amino acids, di-, tripeptides
- Sugars
- Organic Salts

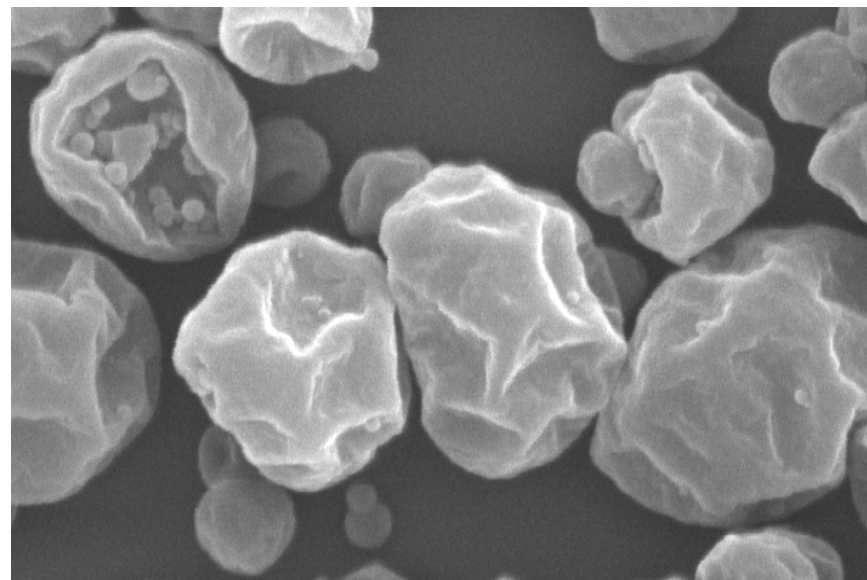
# Successful Encapsulation of a Model Molecule

Spray-dried from a co-solvent system:

**100 % PVP K17**

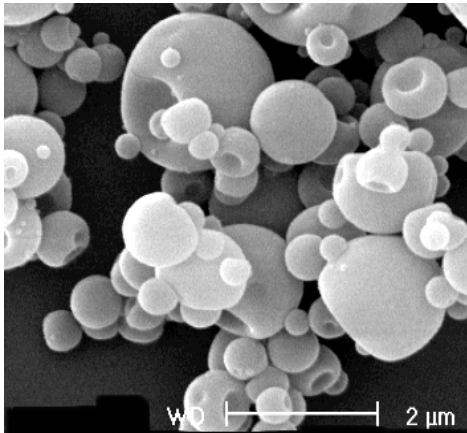


**90 % PVP, 10 % Amino Acid**

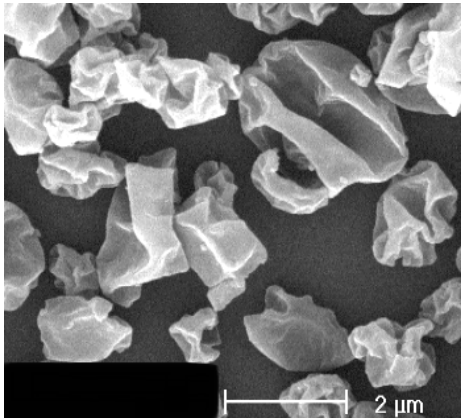




# Designing for Dispersibility

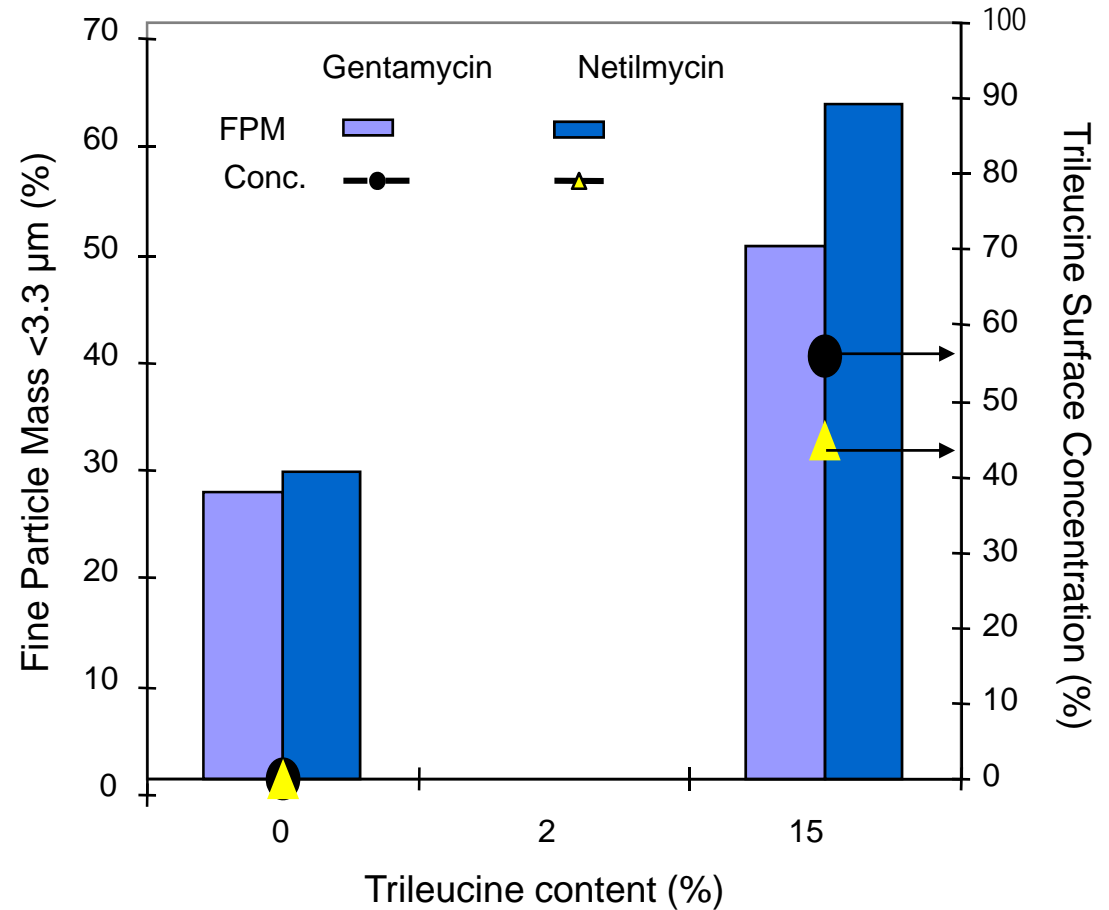


0 % Leu<sub>3</sub>



15 % Leu<sub>3</sub>

## Netilmicin Sulfate



# Particle Engineering - Conclusion

- Aerosol science, process development and formulation are linked and form a new discipline: Particle Engineering.
- Understanding of the underlying physics and physical chemistry of the evaporation and particle formation processes has led to the development of predictive particle engineering tools.
- Predictive tools for the design of packaging configurations, processing conditions, and formulation compositions allow rapid development and optimal product performance
- Spray drying is capable of economical manufacture of sophisticated particles which have the potential to enable and improve therapeutics in the future for the benefit of patients