

Dynamic Pediatric Physiology – Affects on Pharmacokinetics, Pharmacodynamics and Development of Long-Acting Therapeutics

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ADME - PD

- **A**bsorption
- **D**istribution
- **M**etabolism
- **E**xcretion
- **P**harmaco**D**ynamics (Response)

Age Can Impact All !

Pharmacokinetics

Pharmacodynamics

Dose of drug
administered

ABSORPTION

Drug
concentration
in systemic
circulation

Drug
concentration
at site of
action

Pharmacologic
Effect

DISTRIBUTION

Drug in
tissues of
distribution

ELIMINATION (CL)

Drug
metabolized or
excreted

Drug Absorption

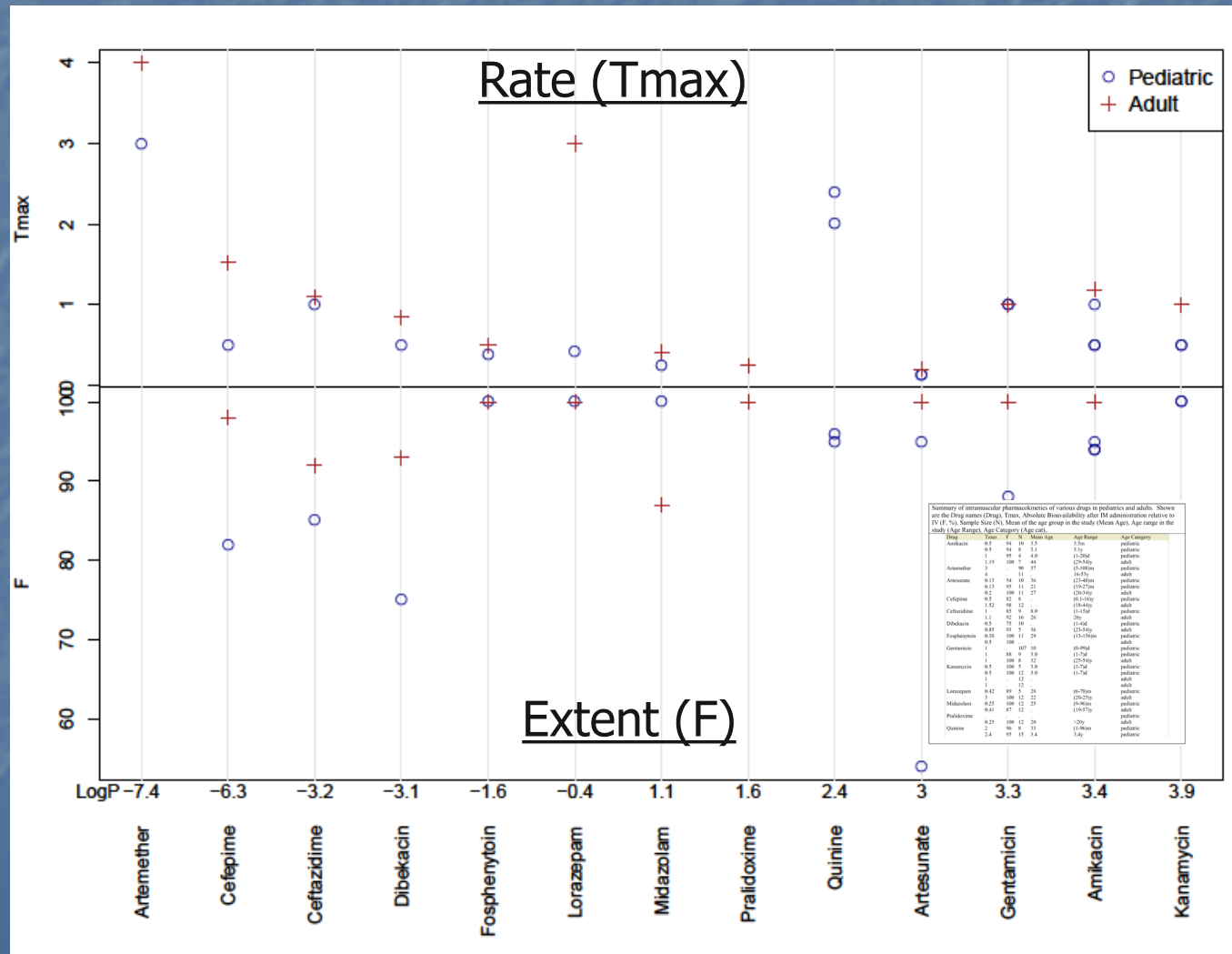


Maturation of Drug Absorption

- **Rate** (K_A , T_{max} , C_{max}) and **Extent** (F , C_{max}) can be Affected by Age
- Maturation Changes Seen in Various Routes
 - **Oral Absorption**
 - Maturation in gut function may have large impact on drug absorption both K_A and F
 - Multiple factors involved – GI motility, gastric pH, transporters and drug metabolizing enzymes, bile acid pool, lipolytic activity, microbiome, diet etc.
 - Largest changes in first 3 years of life
 - **IM Absorption**
 - Variable effects of age – Muscle mass, location, needle length, injection method etc.
 - **SC Absorption**
 - Mostly depends on convection through pericellular pores. Faster mAb (bNAb) absorption seen in infants
 - mAb (bNAb) absorption, distribution and metabolism driven by lymphatic (not blood) flow and lysosomal (not hepatic) enzymes

IM Absorption – Pediatric vs Adults

Rate (Tmax) and Extent (F) Drug Dependent

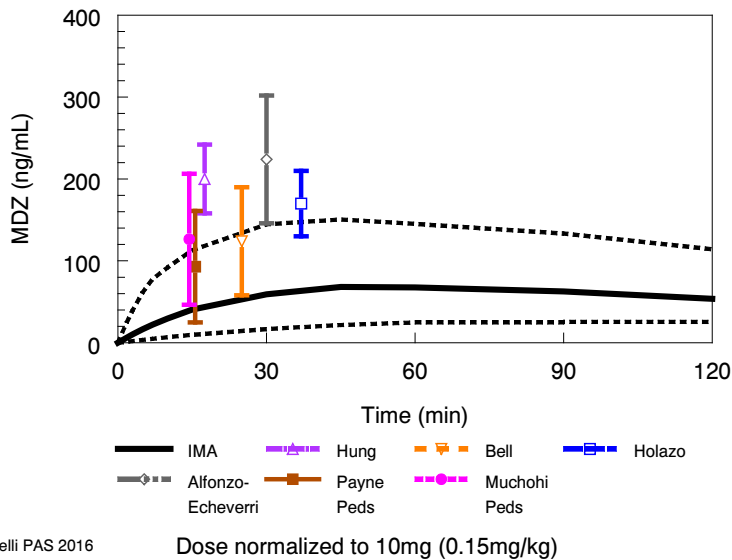


IM Absorption of Midazolam

Autoinjector IM (IMA) vs Needle Syringe (IMNS) Administration

Injection Method

PK Comparison of MDZ IMA (DOD) to IMNS (Literature)

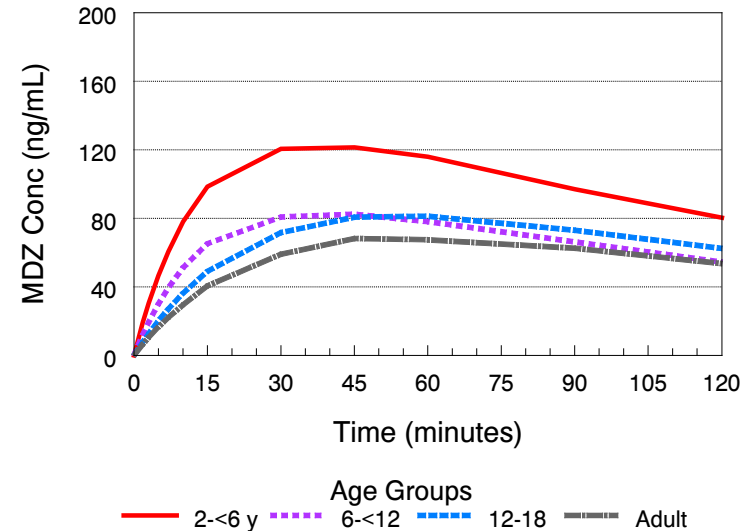


E Capparelli PAS 2016

Age Effect

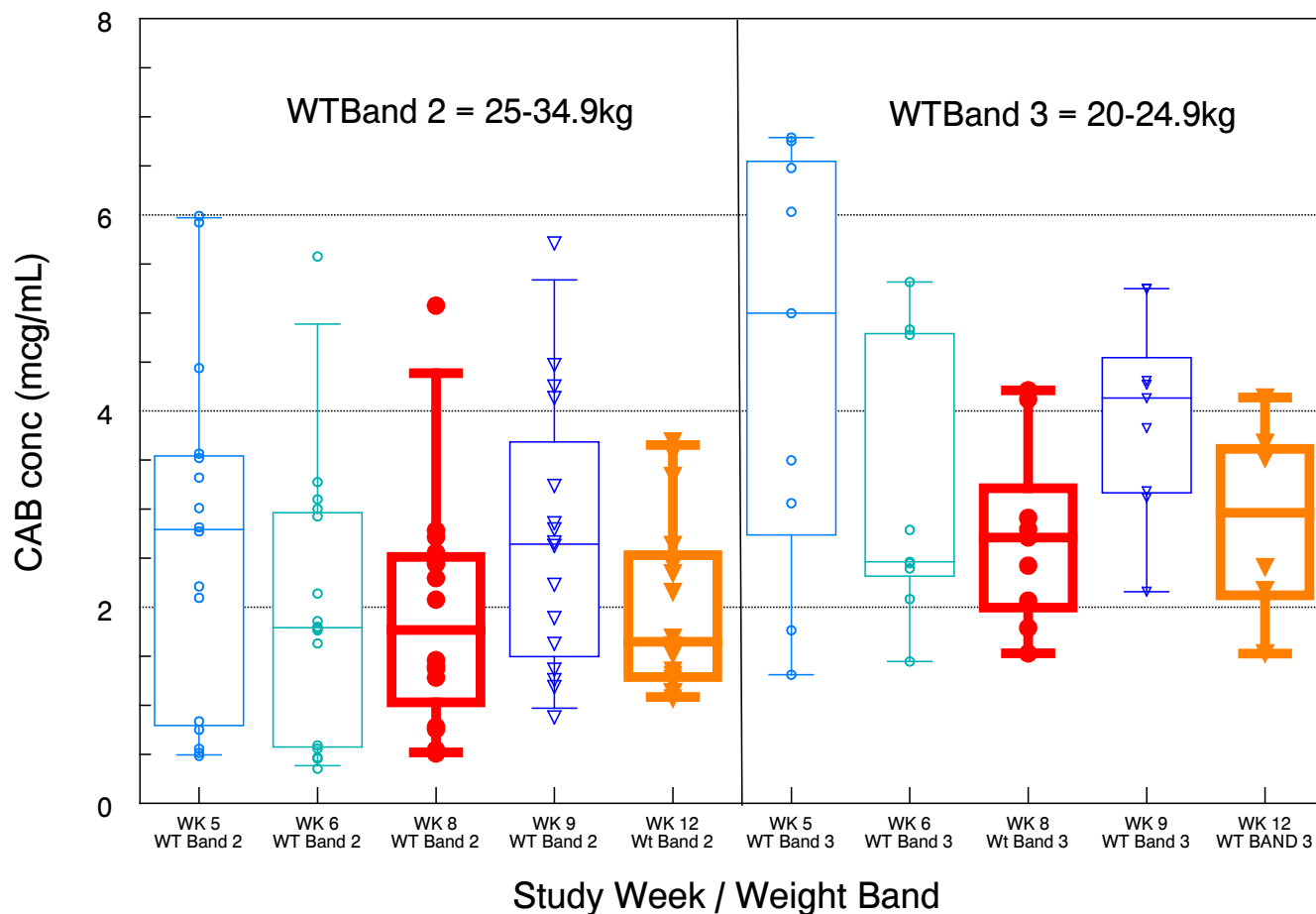
Predicted MDZ Concentrations following IMA Administration

RAMPART Dosing 5mg: 13-40g and 10mg >40 (Silbergleit 2013)



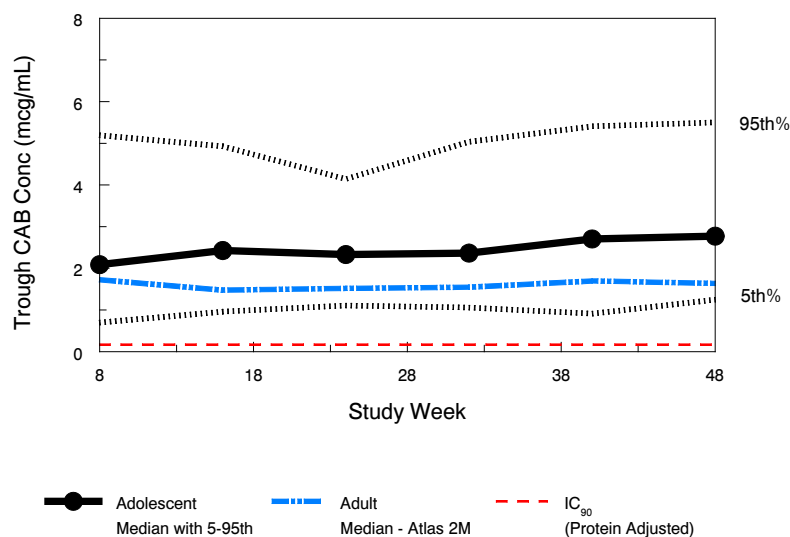
E Capparelli PAS 2016

IMPAACT 2036/CRAYON IM PK (Q4W) Initial CAB Conc in Children

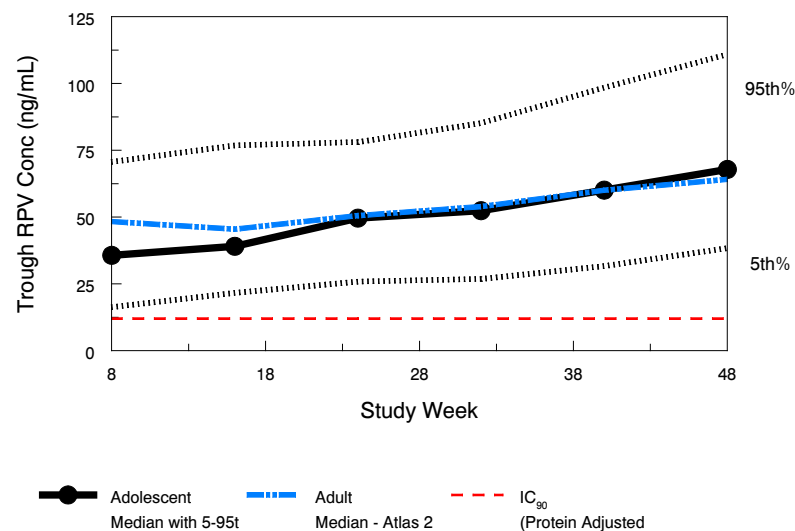


IMPAACT 2017/MOCHA IM PK (Q8W) CAB and RPV Pre-dose Conc Adolescents vs Adults

Cabotegravir

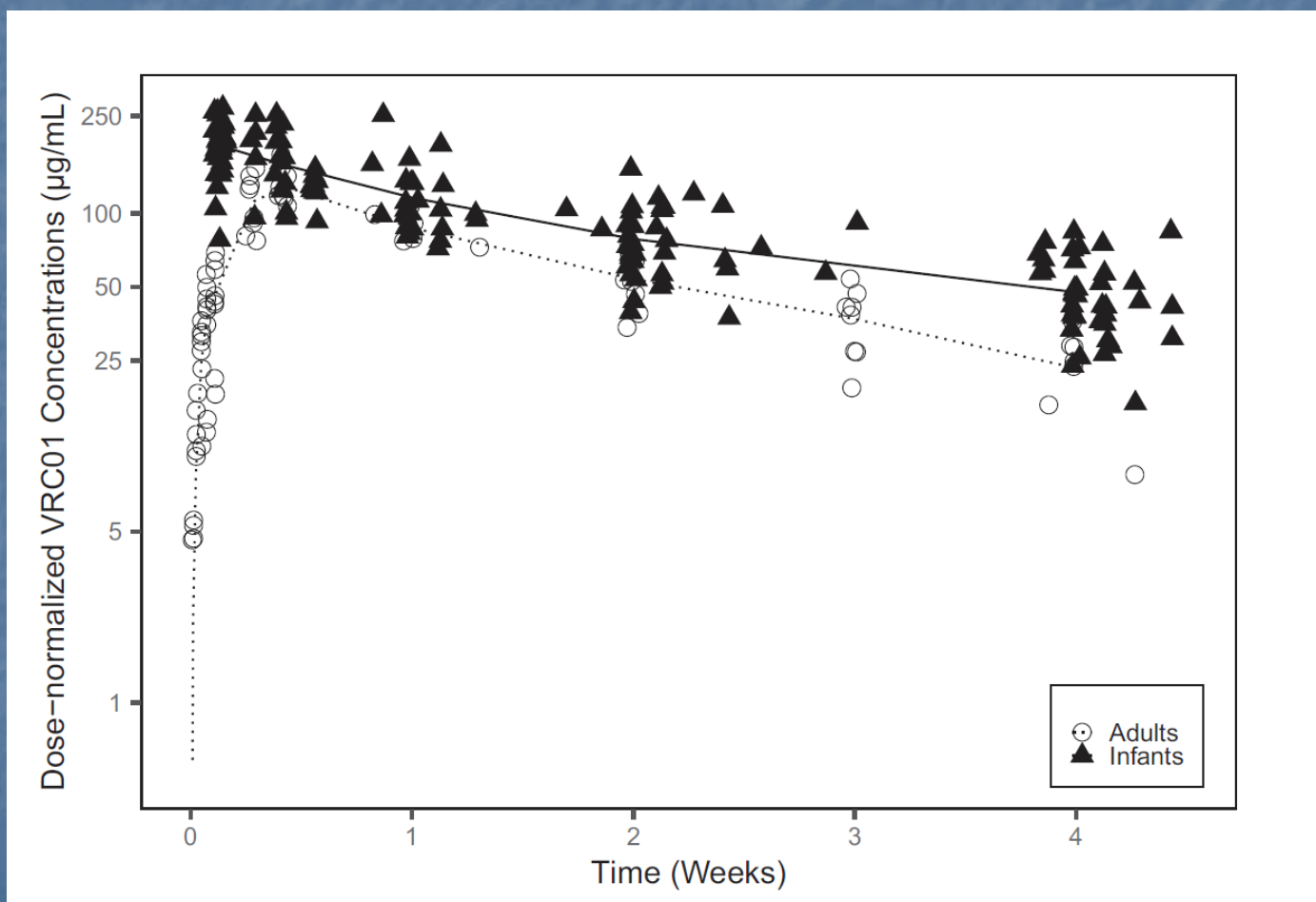


Rilpivirine

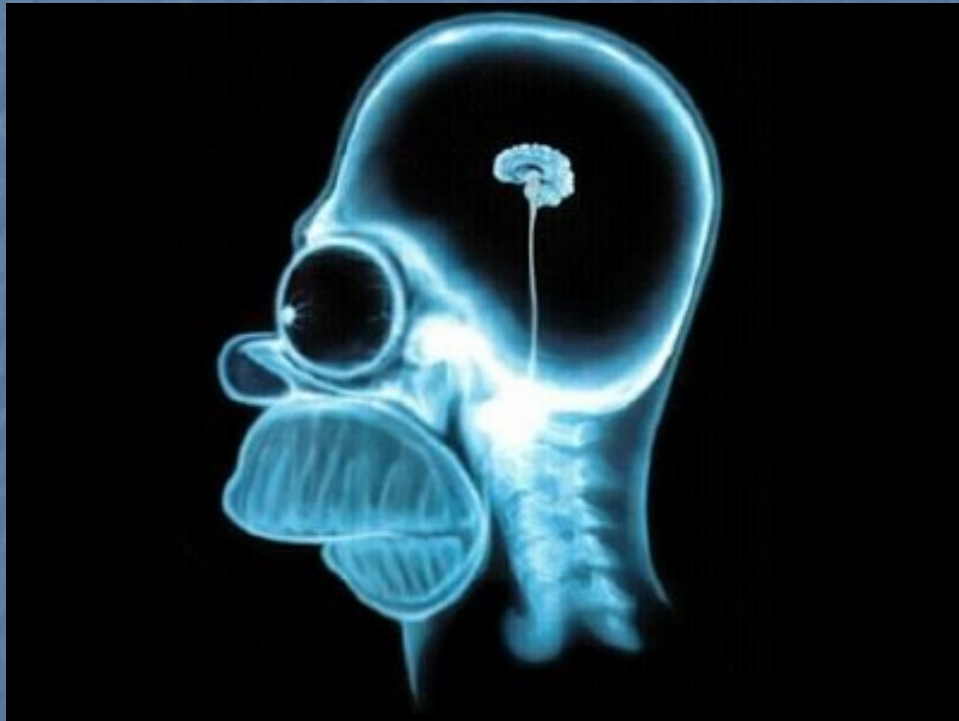


SC Absorption of VRC01 in Infants vs Adults

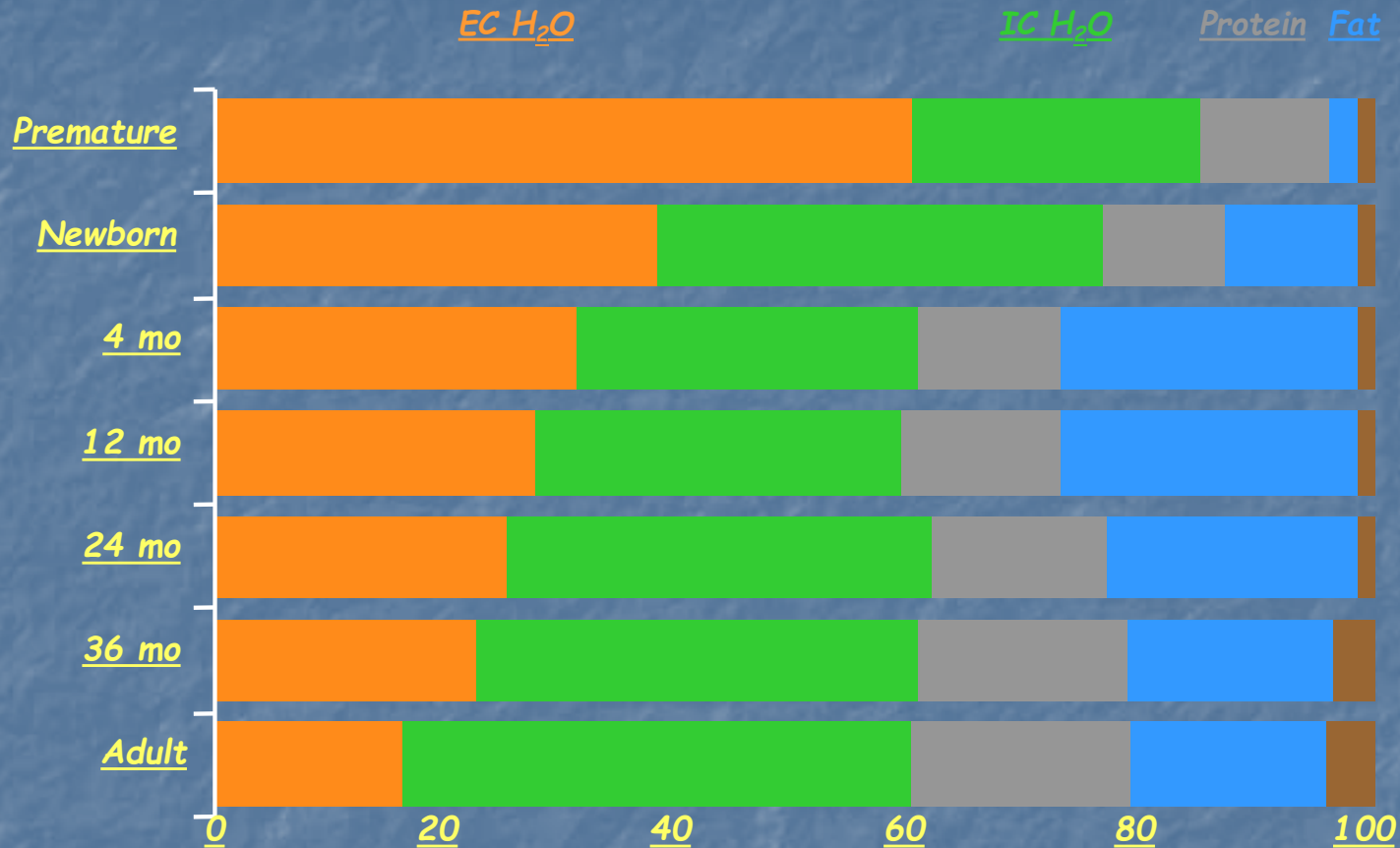
Faster T_{max}, Higher C_{max} and Lower CL/F in Infants – IMPAACT P1112



Distribution



Changes in Body Composition



Comparative Protein Binding

Drug	Percent Bound	
	Newborn	Adult
Ampicillin	10	18
Diazepam	84	99
Digoxin	20	32
Lidocaine	20	70
Morphine	31	42
Nafcillin	69	89
Phenytoin	80	90
Phenobarbital	32	47
Propranolol	60	93
Theophylline	36	56

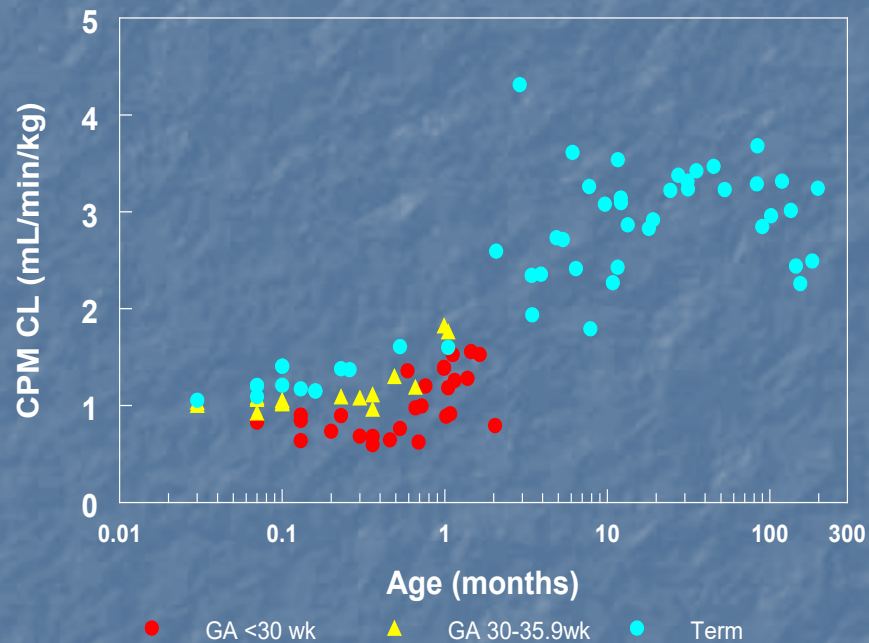
Renal Elimination



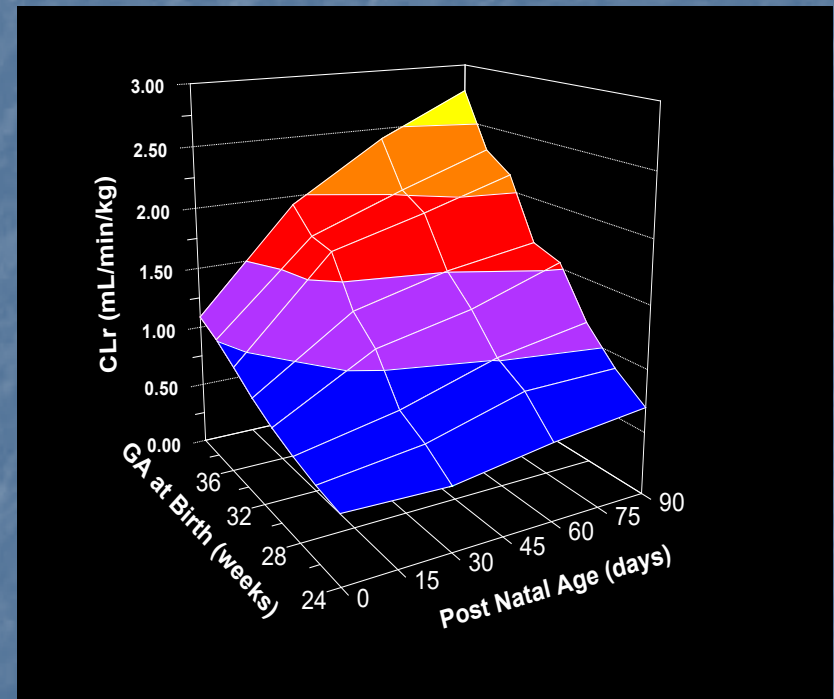
Ontogeny of Renal Drug Elimination

- Kidneys at birth receive only 5-6% of cardiac output compared to 15-25% in adults
- Renal blood flow is ~ 12 ml/min at birth compared to 1100 ml/min in adults
- GFR is directly proportional to gestational age (GA) beyond 34 weeks GA
- Tubular secretion increases 2 fold over the first week of life and 10 fold over first year of life
- GFR function similar in children (>2 yr) and adults normalized to BSA 80-120mL/min/1.73m²

Maturation of Renal Drug Clearance

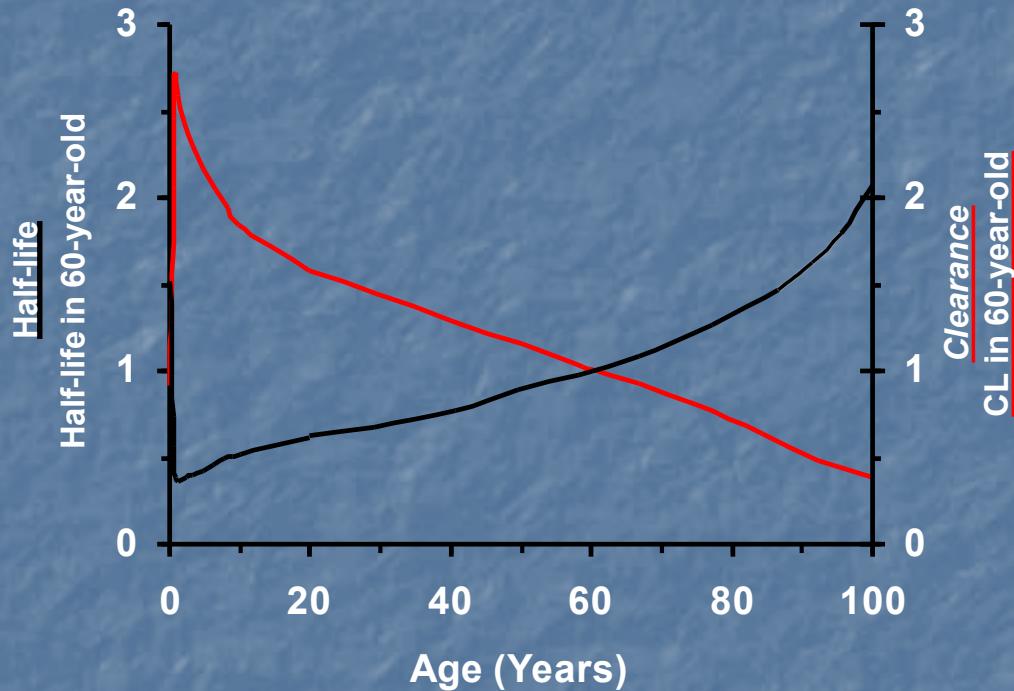


Cefepime

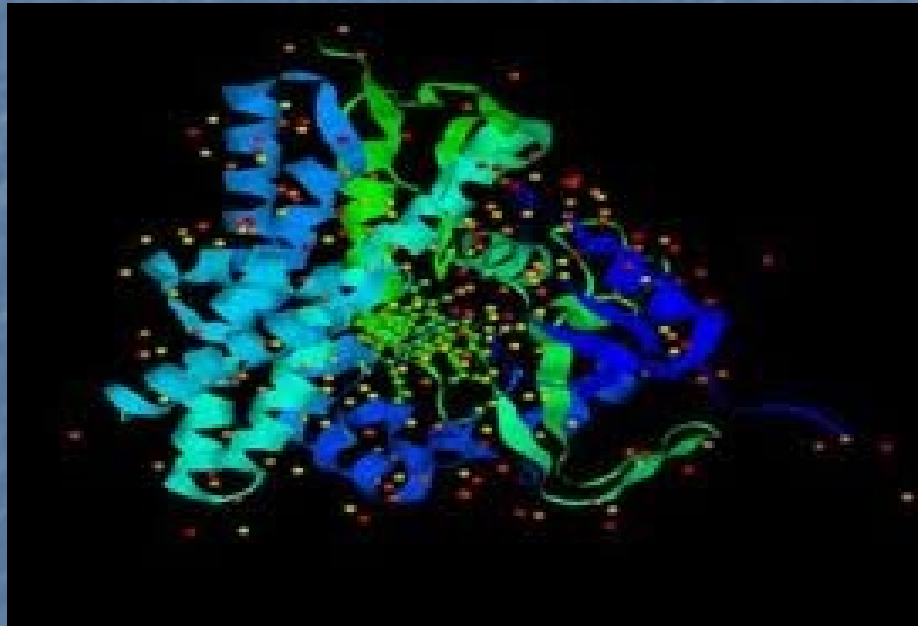


Meropenem

Impact of Age on $T_{1/2}$ and CL For Renal Eliminated Drug



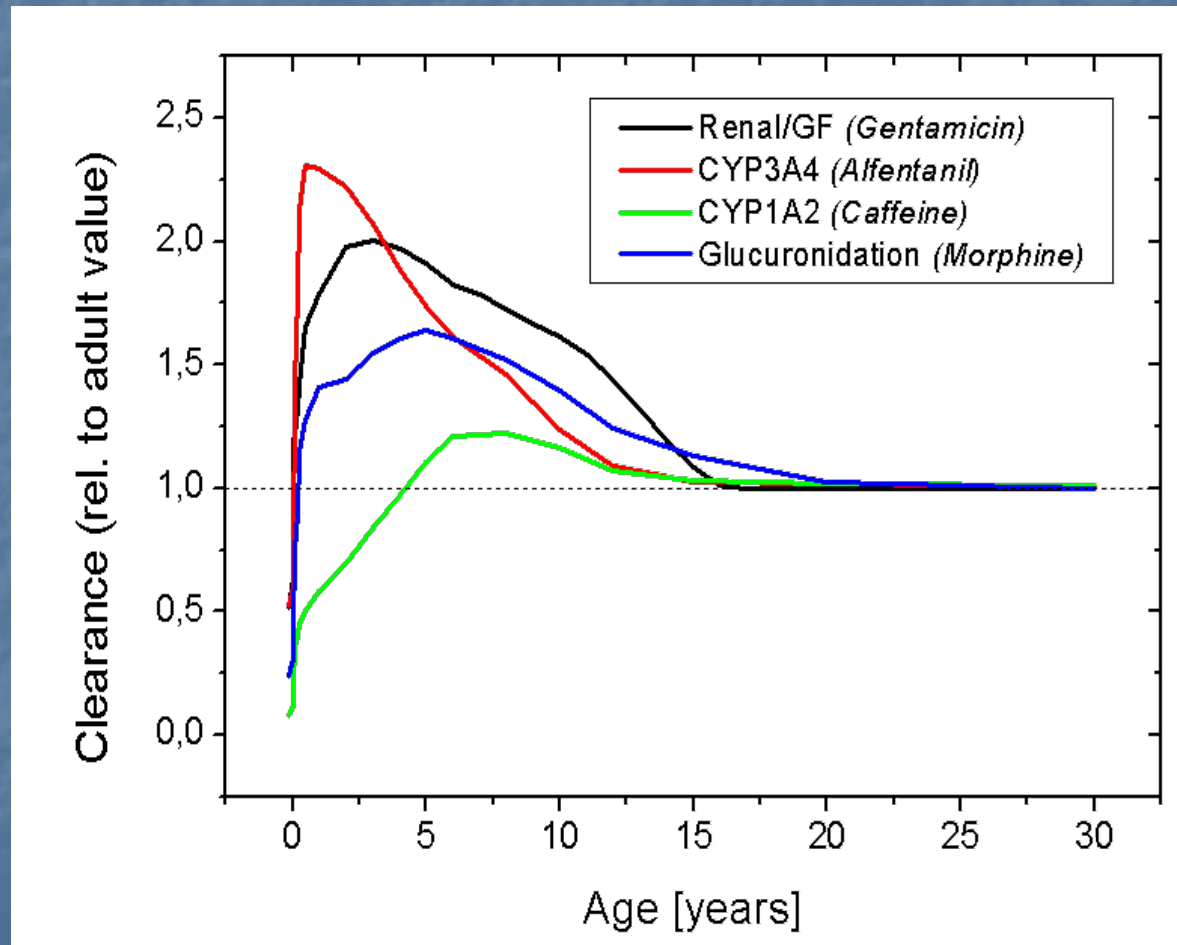
Drug Metabolism



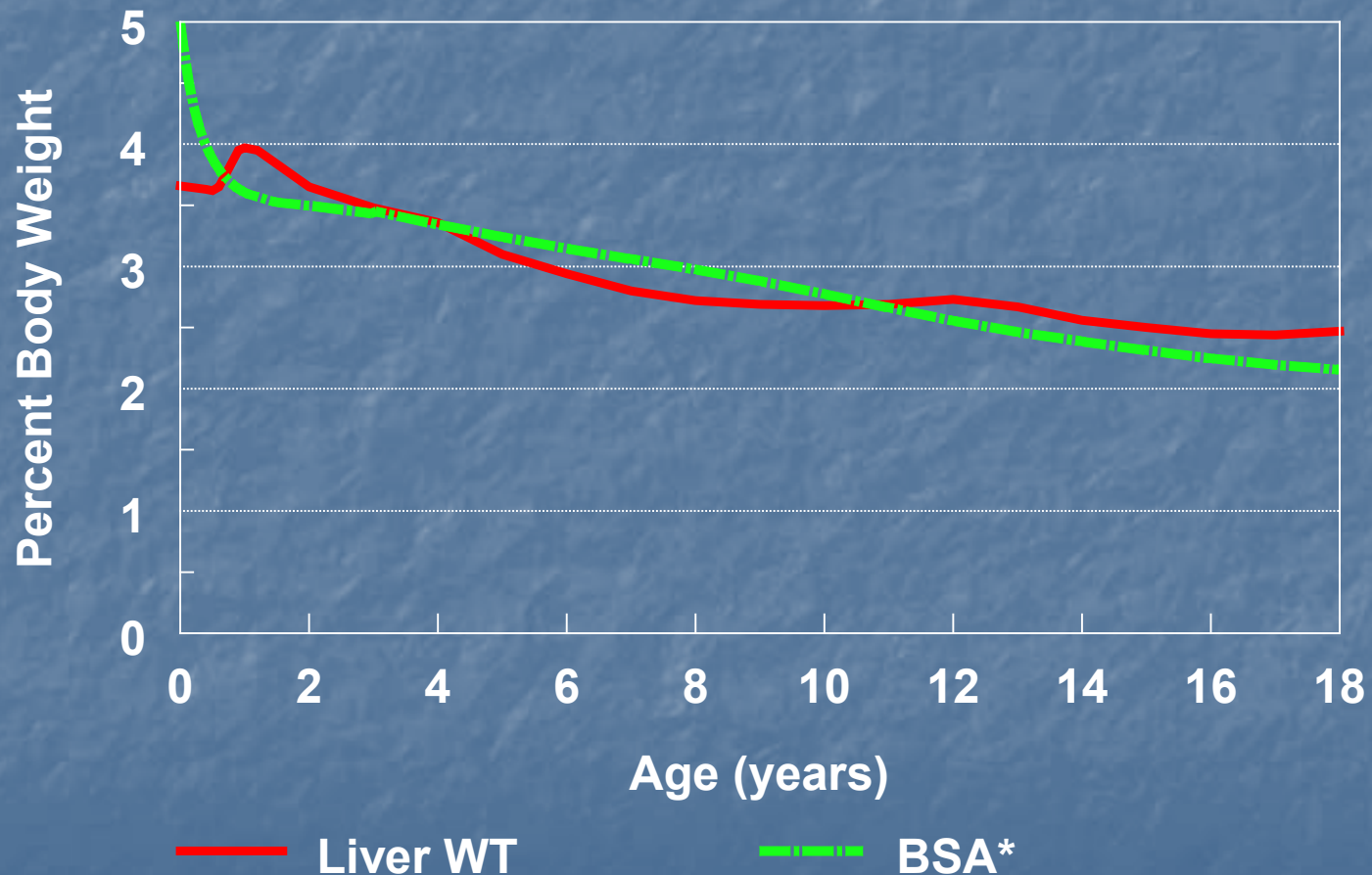
Developmental Changes in Drug Metabolism

- In general, drug metabolism pathways:
 - Are less active in newborns than in older children and adults
 - Increase to peak in young children
 - Decline to “adult” levels later (?puberty)
- Pattern of increase depends on the specific pathway
 - Peak activity
 - Time to peak activity

Developmental Changes in Drug Elimination

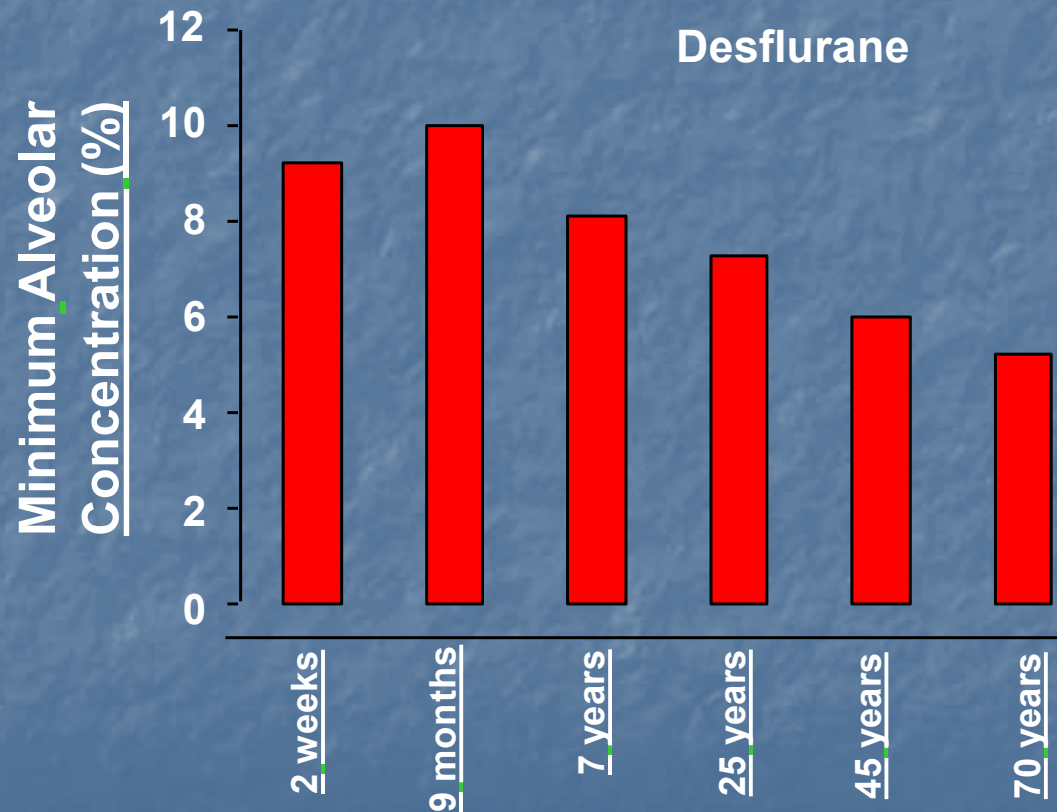


Liver Size as a Source of Developmental Changes in Metabolism



*multiplied x scalar

Changes in PD – Anesthesia at Various Ages



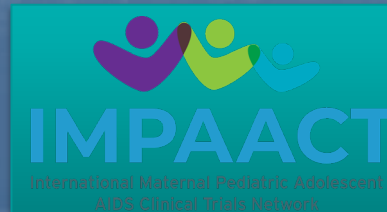
Summary of Physiological Differences Between Neonates and Adults

Gastric pH	Increased
Gastric Motility	Decreased
Gastric Emptying Time	Increased
Intestinal flora, pancreatic enzymes, bile salts	Decreased
Percutaneous Absorption	Increased
Total body water % & Extracellular water	Increased
Plasma Proteins	Decreased
Hepatic Enzyme capacity	Decreased
Renal Function	Decreased

Acknowledgements

UC San Diego in Center for Research in Pediatric and Developmental Pharmacology (RPDP)

- Victor Nizet, MD
- Adriana Tremoulet, MD, MAS
- Brookie Best, PharmD, MAS
- Jeremiah Momper, PharmD, PhD
- Mina Nikanjam, MD, PhD
- Jincheng Yang, PharmD
- Jerry Li, PharmD
- Rowena Espina, MS
- Steve Rossi PhD
- Nina Ilog, MS
- Dustin Huynh, PharmD
- **The International Maternal Pediatric Adolescent AIDS Clinical Trials (IMPAACT) Network P1106, P1112, P1115 and 2008 2017, 2036 and 2037 Study Teams:**
 - Mark Mirochnick MD
 - Mark Cotton MD
 - Adrie Bekker MD
 - Tim Cressey PhD
 - Coleen K. Cunningham MD
 - Elizabeth J. McFarland MD
 - Ellen Chadwick, MD
 - Ted Ruel, MD



Vaccine Research Center VRC601, VRC602, VRC605, VRC606, and VRC612 Study Teams

- John R. Mascola MD
- Barney S. Graham MD
- Julie E. Ledgerwood DO
- Koup A. Richard MD
- Emily E. Coates PhD
- Katherine Houser PhD
- Gama Lucio PhD
- Martin R. Gaudinski MD
- Robert Seder, MD
- Peter Crompton, MD

NICHD Pediatric Trials Network

- Karen Chiswell PhD
- P Brian Smith, MD, MPH
- David Siegel MD
- Tracy Glauser MD

Overall support for the International Maternal Pediatric Adolescent AIDS Clinical Trials Network (IMPAACT) was provided by the National Institute of Allergy and Infectious Diseases (NIAID) with co-funding from the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) and the National Institute of Mental Health (NIMH), all components of the National Institutes of Health (NIH), under Award Numbers UM1AI068632-15 (IMPAACT LOC), UM1AI068616-15 (IMPAACT SDMC) and UM1AI106716-09 (IMPAACT LC), and by NICHD contract number HHSN2752018000011. The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH.

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