

Menthol

Nicotine delivery from e-cigarettes part II: data and learnings from two pharmacokinetic studies.

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Content



Part I

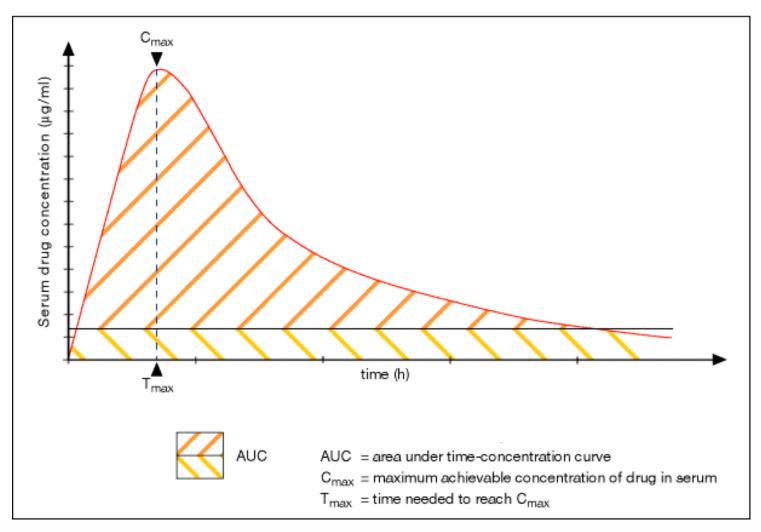
- **E-cigarettes**
- Introduction to nicotine PK studies
- Study design for two e-cigarette nicotine PK studies
 - Belfast, U.K.
 - Burbank, U.S.A.

Part II

- Data from U.K. and U.S.A. nicotine PK studies
- Discussion
 - What do our data tell us about nicotine delivery?
 - How can our data inform future study design?
 - Can we do it differently?

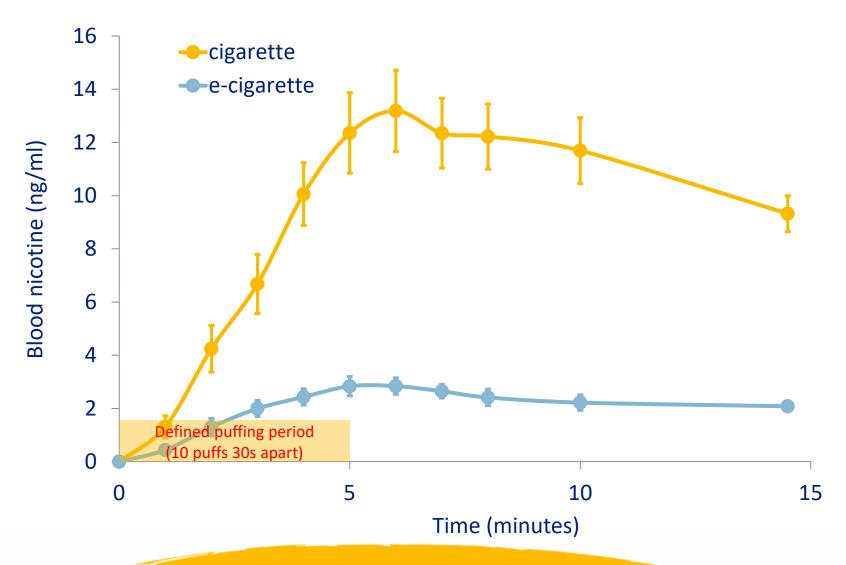
Interpreting PK data 101





BAT PK study #1 – nicotine data





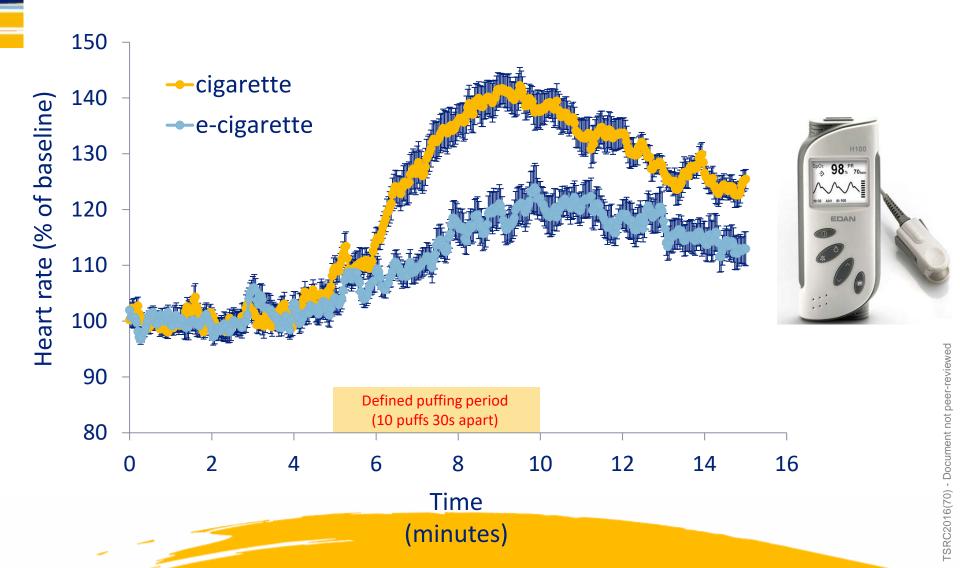
BAT PK study #1 – PK data



_	Statistic		Cigarette	e-cigarette
Parameter		Period#	(<i>n</i> =24)	(<i>n</i> =23)
C _{max} (ng/ml)	LS Geometric mean	Controlled	13.0	2.5*
	Geometric mean		13.4	2.5
	Geometric CV (%)		51.4	67.8
	Median		13.5	2.5
	Range (min – max)		5.3 - 35.5	0.5 - 6.9
C _{max} (ng/ml)	LS Geometric mean	Ad libitum	14.1	5.8*
	Geometric mean		14.9	5.9
	Geometric CV (%)		45.7	61.1
	Median		14.7	6.5
	Range (min – max)		6.9 - 40.6	1.6 - 12.5
t _{max} (min)	Median	Controlled	7.0	6.0 ^{NS}
	Median	Ad libitum	75	75
AUC _{0-14.5} (ng.h/ml)	LS Geometric mean	Controlled	2.1	0.4*
	Geometric mean		2.2	0.4
	Geometric CV (%)		45.5	60.5
	Median		2.2	0.5
	Range (min – max)		1.0 - 5.0	0.1 - 1.2

BAT PK study #1 – heart rate data





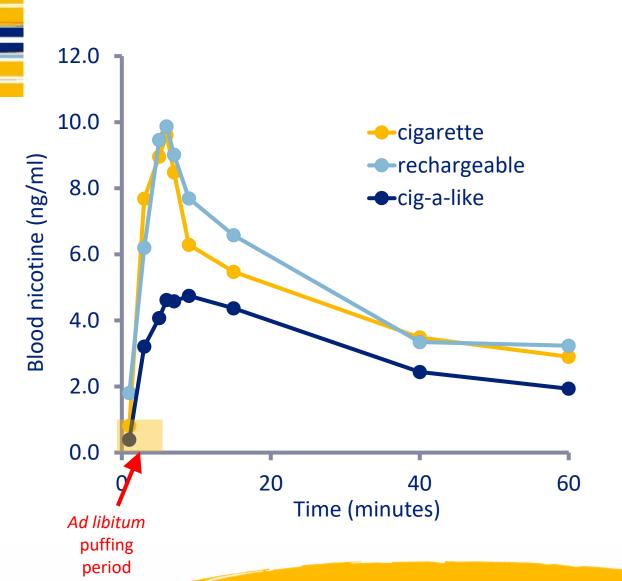
BAT PK study #1 summary

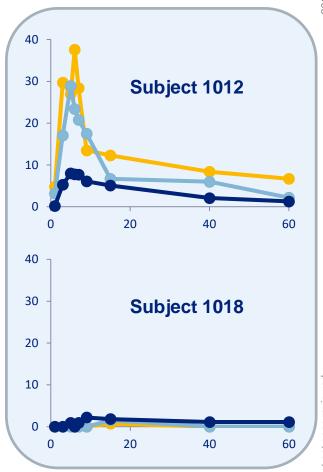


- E-cigarette nicotine delivery much lower than that of a cigarette under defined use conditions
- Potential for heart rate as a surrogate for blood nicotine
- Other data can be gained in these studies smoking urges, satisfaction, cigarette consumption
 - be wary of subject overload

BAT PK study #2 – nicotine data







TSRC2016(70) - Document not peer-reviewed

BAT PK study #2 – PK data



Parameter	Statistic	Cigarette (n=18)	Vype vPro e-cigarette (n=18)	Nicolites e-cigarette (n=18)
	LS Geometric mean	7.2	8.8 ^{NS}	4.7 ^{#NS}
C _{max} (ng/mL)	Geometric mean	7.2	7.8	4.7
	Geometric CV (%)	130.8	108.2	93.6
	Median	6.2	9.2	5.1
	Range (min – max)	0.7 - 37.6	0.0 - 40.2	1.2 - 18.2
t _{max} (min)	Median	6	6 ^{NS}	9 ^{NS}
	LS Geometric mean	3.4	2.9 ^{NS}	2.2 ^{#NS}
AUC _{0-60.0} (ng.h/mL)	Geometric mean	3.4	2.9	2.2
	Geometric CV (%)	†	†	†
	Median	4.0	4.6	2.9
	Range (min – max)	0.2 - 11.5	0.0 - 15.6	0.0 - 6.3

†, unable to determine

Document not peer-reviewed

BAT PK study #2 - summary



- Blood nicotine elevation far greater in vapers than in 'naïve' ecigarette users
- Greater variability seen in this cohort
 - puffing/inhalation behaviour
- Potential need for better screening to ensure subjects meet study criteria

Is there a need for a standardised PK study protocol?



- How you design and run the study will impact the data you generate
 - Subject demographics
 - Product use
- Will this generate a headache for manufacturers and regulators as they try to assess products, potentially against one another?
- Do we need, therefore, a standardised way of running nicotine
 PK studies, as far as is practically possible?

A potential alternative approach using PBPK modelling



- Nicotine PK studies run according to GCP are expensive
- These studies are also resource-intensive
- Heart rate may be a potential surrogate
 - Product assessment
 - Not for regulatory submission
 - Still expensive and time-consuming
- Can we accurately model blood nicotine levels for assessment purposes?

A potential alternative approach using PBPK modelling



doi:10.1093/ntr/ntu175

Advance Access publication September 1, 2014

Commentary

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Electronic Cigarette Effectiveness and Abuse Liability: Predicting and Regulating Nicotine Flux

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Abstract

Electronic cigarettes (ECIGal comprise an serosolized nicotine delivery product category that provides consumers with probably unprecedented control over extensive features and operating conditions, allowing a wide range of nicotine yields to be obtained. Depending on the combination of such ECIG variables as electrical power input, geometry, liquid composition, and put fle-havior, ECIG users can extract in a few putfs far more or far less nicotine than with a conventional combustible cigaretts. These features of ECIG design and use present challenges for public health policy, central among which is the question of how to regulate nicotine delivery. In this commentary, we propose a conceptual framework intended to provide a convenient approach for evaluating and regulating the nicotine emitted from ECIGs. This framework employs nicotine flux to account for the total does and reat within incotine reaches the user, 2 key factors in drug abuse liability. The nicotine flux is the nicotine emitted per puff second (e.g., mgis) by a given ECIG design under given use conditions, and it can be predicted accountably using physical principles. We speculate that if the flux is too low, users likely will abandon the device and maintain conventional blocks and control the force may have higher-than-necessary abuse liability. By considering ECIG design, operation conditions, liquid composition, and puff behavior variables in combination, we illustrate how ECIG secifications can be residisfully mandated to result in a terror flux range.

Basic design

- cartomizer
- tank
- drip tip
- disposable

Heating element

electrical resistance

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- battery voltage
- surface area
- number of heater coils

Liquid

- nicotine concentration
- solvent composition
- flavors

Χ

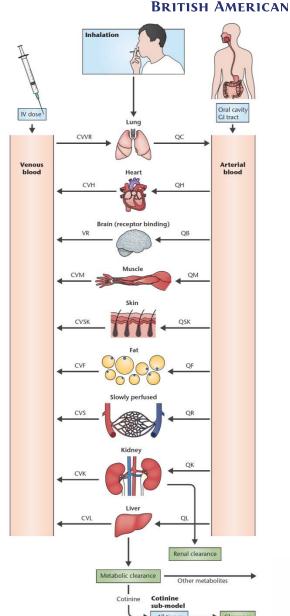
other additives



A potential alternative approach using PBPK modelling

RDITICH AMEDICAN

- Multi-compartment nicotine model
- Cotinine sub-model
- Renal and metabolic clearance applied to kidney and liver



Predicting blood nicotine from PK study #1

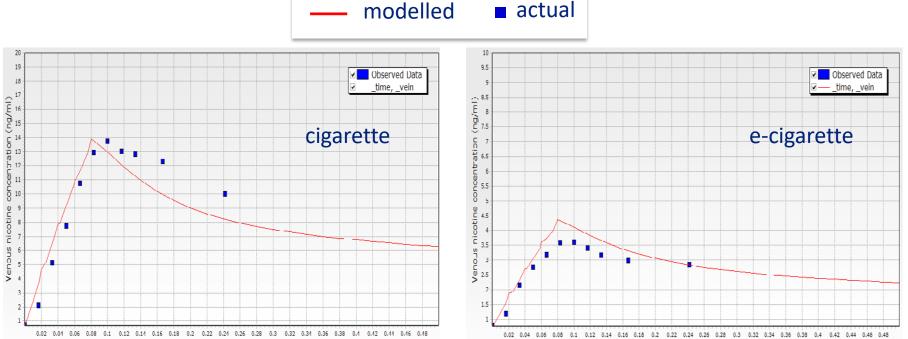


Inputs: Estimated puff nicotine yields; puff counts

Average study body weight (76.4 kg)

Nicotine cartridge weights

Assumptions: 30% mouthspill



Summary

- Nicotine PK studies have provided us with a wealth of insight into e-cigarette performance
- Such studies help us understand our products and may be a requirement for regulatory submissions and/or claims
- Standardised protocol will help compare products
- For product development purposes, there might be potential surrogates
 - heart rate
 - PBPK modelling

Acknowledgements



Alison Eldridge
Mike McEwan
Fiona Cunningham
Kevin McAdam

Nathan Gale
Jim Shepperd
Stacey Fiebelkorn
Chris Proctor



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