## **Effect of Delayed Inhalation on Fine Particle Dose** from Two Valved Holding Chambers

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## Rationale

- Pressurized Metered Dose Inhalers (pMDIs) are effective means for generating drug-containing aerosols for rapid delivery to the intrapulmonary airways.
- Reduced medication delivery due to delays between pMDI actuation and inhalation can be mitigated by adding a Valved Holding Chamber (VHC) to the inhaler mouthpiece.
- This *in vitro* study compared the efficiency of drug output through a new device (AeroChamber2go\* (AC2GO)) and AeroChamber Plus\* *Flow-Vu*\* (AC+FV) VHCs.



AeroChamber2go\* VHC used in combination with pMDI

# **Methods**

- Measurements for fine particle dose (FPD, $\mu g_{<4.7\mu m}$ ) were made with a common salbutamol pMDI formulation (Novo-Salbutamol HFA) by cascade impactor at 28.3L/min.
- Two sampling conditions were evaluated: (1) immediate collection simulating no delay between actuation and inhalation; (2) collection after a 2-second delay when using the VHCs (n=5)which simulates an uncoordinated use scenario.



• Values of FPD/actuation from the pMDI with no delay was found to be  $58.0 \pm 2.6 \, \mu g.$ 

• Following a 2s delay FPD/actuation from the AC2GO and AC+FV VHCs were found to be  $50.0 \pm 3.3\mu g$  and  $54.8 \pm 6.6\mu g$  respectively.

• Perfect coordination when using the MDI alone is very unusual. Previous studies have shown that even a short delay before inhaling will decrease the drug delivery to the lungs significantly when MDI used alone.

## Conclusions

 Either the established AeroChamber Plus\* Flow-Vu\* or new AeroChamber2go\* VHCs provide the opportunity to deliver similar amounts of salbutamol to the lungs, as with pMDI alone when coordinated perfectly.

• The VHCs also provide the additional benefit of reduced oropharyngeal deposition.



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