

Helping people breathe better and live fuller lives.



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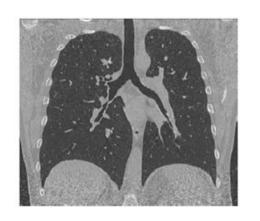


ATS Conference 2021 Virtual Platform Metered Dose Inhaler (MDI) with Valved Holding Chamber (VHC) vs Dry Powder Inhalers (DPIs): Using Functional Respiratory Imaging (FRI) to Assess Modelled Lung Deposition in an Asthmatic patient.

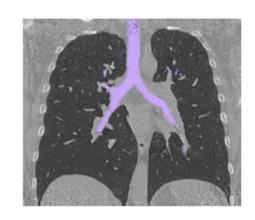
Rationale Methods Results Conclusion

RATIONALE

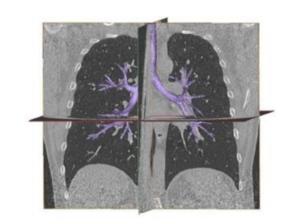
- Both MDIs and DPIs can be used to deliver drugs to manage Asthma.
- Valved Holding Chambers (VHC) can be used to help patients with inhalation coordination of their MDIs.
- Inspiratory flow rate is known to influence drug delivery. This FRI based study assessed the modelled airway drug delivery from an MDI/VHC system and two DPI systems at optimal and sub-optimal flow rates.



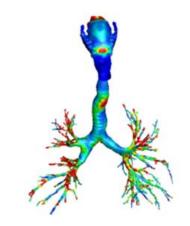
HRCT



Structure segmentation



Patient-specific 3D model



Flow simulation (CFD)

1. Patient data is obtained by taking low dose CT scans

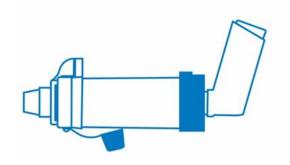
2. Patient-specific airway and lung structures are extracted

3. Flow and particle simulations are applied to the 3D models

Rationale Metho	s Results	Conclusion
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METHODS

- Three dimensional geometries of airways and lobes were extracted from a CT scan of a 21 year old male Asthma (moderate) patient.
- Drug delivery and airway deposition was modelled using FRI with measured particle and plume characteristics via the following devices:



AeroChamber Plus* Flow-Vu*

((AC+) valved holding chamber
(VHC), Trudell Medical International)
delivering salbutamol from a Ventolin†
EvoHaler† pMDI (100 μg; GSK)



Symbicort[†] Turbuhaler[†] (6 μg formoterol fumarate/200 μg budesonide; AstraZeneca)



Seretide† Diskus† (50 µg salmeterol xinafoate/250 µg fluticasone propionate; GSK)

• Inhalation flowrates of 30 L/min (optimum for MDI/VHC, sub-optimal for DPIs) and 60 L/min (optimum for DPIs, sub-optimal for MDI/VHC) were assessed.

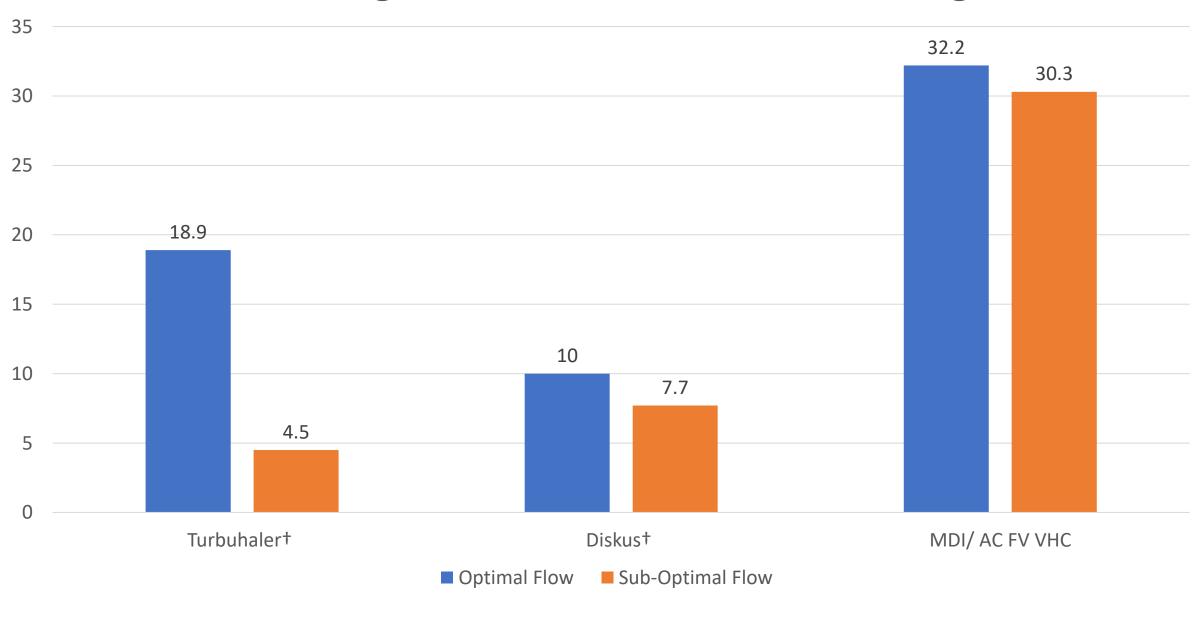
Rationale	Methods	Results	Conclusion
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RESULTS

Rationale

• The modelled lung deposition results are shown in the chart below, expressed as a percentage of label dose, using both optimal and sub-optimal inhalation flow rates.





Results

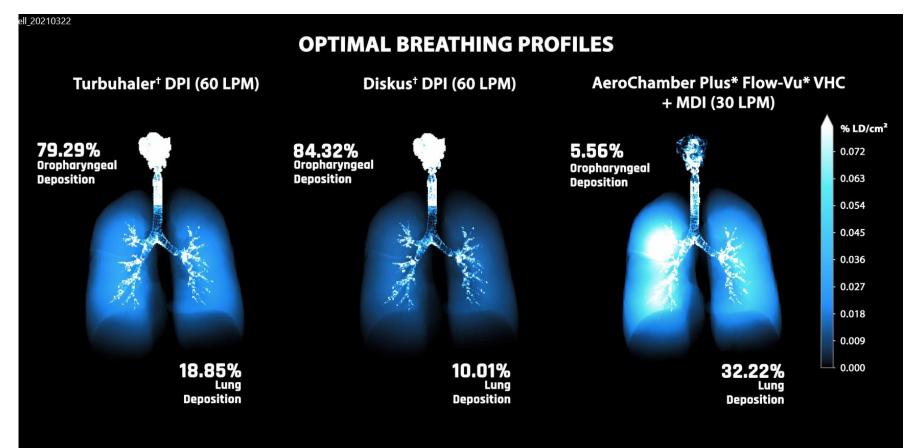
Conclusion

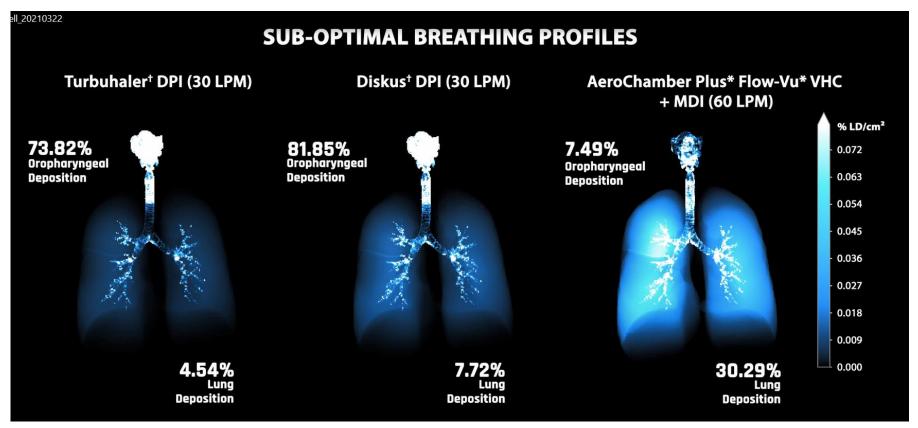
Methods



CONCLUSIONS

- The FRI deposition profiles highlight that the MDI/AeroChamber Plus*
 Flow-Vu* VHC system delivered an appreciably greater percentage of drug to the lung region than either of the two DPIs.
- The influence of inhalation flow profile was less with the MDI/VHC system and differed between the two DPIs.





Rationale	Methods	Results	Conclusion