Water-Insoluble Drug Formulation

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Library of Congress Cataloging-in-Publication Data

Water-insoluble drug formulation / Rong Liu, editor.
p. cm.
Includes bibliographical references and index.
ISBN 1-57491-105-8
1. Solutions (Pharmacy) 2. Drugs—Solubility. I. Liu, Jung.
RS201.S6W38 2000
615'42---dc21

00-033450

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No claim to original U.S. Government works International Standard Book Number 1-57491-105-8 Library of Congress Card Number 00-033450 Printed in the United States of America 1 2 3 4 5 6 7 8 9 0 Printed on acid-free paper

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Alteration of the Solid State of the Drug Substance: Polymorphs, Solvates, and Amorphous Forms

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The maximum solubility of a drug substance is a function of the nature of the solid phase in equilibrium with a specified solvent system at a given temperature and pressure. Solubility is an equilibrium constant for the dissolution of the solid into the solvent and thus depends on the competition of solute:solvent interactions and solid:solid interactions. Alteration of the solid phase of the drug substance can influence its solubility and dissolution properties by affecting the molecular interactions in the solid.

A crystal of higher free energy will yield an apparent higher solubility than a lower energy stable crystal form of the same molecular structure. In the lowest energy solid state, the energetically favorable solid:solid interactions reduce the escaping tendency of the molecules, and thus fewer molecules dissolve in a given solvent under the same set of environmental conditions. Crystalline polymorphs, solvates and hydrates, and amorphous forms of drug substances have been used to change the thermodynamic driving force for dissolution and to increase the apparent solubility of poorly soluble drugs.

Unlike solubilization techniques that change the nature of the solvent environment (cosolvent systems, emulsions, micellization) or the chemical identity of the dissolved solute (salt formation, complexation, pro-drugs), manipulation of the solid state of the drug substance results in only a transient change in the system. Since the solvent

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and the chemical form are identical, the system will ultimately revert to the lowestenergy solid phase in equilibrium with the solvent, with the lowest solubility. Crystal growth and dissolution have been used to assign relative physical stability for polymorphs by observing the direction of the transformation under a microscope under controlled temperature in contact with a solvent. The rate of transformation in contact with a solvent is normally too fast to consider solution or suspension dosage forms of metastable solids. Systems with unusually large energy barriers, slow reversion kinetics, or excipients to retard crystallization can be useful in limited circumstances.

The most practical use of this technique is to alter the solid phase in dry dosage forms where molecular mobility is greatly reduced. Metastable forms of solid drugs are often stable to physical transformation in the time context required for marketable formulations. Tablets, capsules, lyophilized powders, granules for constitution, and other solid dosage forms are ideal systems for incorporation of metastable solid phases. In most cases, the brief exposure to gastrointestinal (GI) fluids does not result in conversion to the lower solubility form prior to generating the desired enhanced effect. Solid-state transformations and transformations induced by adsorbed water during long-term storage can still be problematic. Any consideration of formulating metastable solid phases must balance the expected gain in efficacy with the potential for reversion to the less-favorable form prior to patient use. This involves both an understanding of the phase diagrams (which forms are physically stable under which conditions) and the physical principles governing transformation kinetics.

In this chapter, the theoretical and practical considerations for the use of metastable solids in formulations to gain a solubility or dissolution-rate advantage are explored. Experiments are suggested that identify the potential solid forms of the drug and elucidate the potential advantages and disadvantages. Specific examples of the degree of enhancement that can be expected and special considerations for each type of solid are covered (polymorphs, solvates, and amorphous forms).

THEORETICAL AND PRACTICAL CONSIDERATIONS

Importance of the Solid State of the Drug

Origin of the Effect of Solid State on Solubility

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When a medicinal chemist discovers a new chemical entity (NCE) with a desired pharmacological effect, structure-activity relationships are used to optimize the series for activity. Aqueous solubility, partition coefficient, crystallinity, melting point, particle size, and hygroscopicity, all of interest to the formulator of this NCE, will also vary within the series of drug candidates. Because the biological activity is often estimated by target enzyme binding studies in very dilute media, solubility may not be optimized simultaneously. If an ionizable drug candidate is selected, the choice of free acid/base form versus the salt forms again produces a myriad of possible physical properties. The alteration of solubility by judicious choice of the salt was covered in a

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