## An open-label, randomized, crossover, comparative bioavailability study of Levodopa Cyclops® and Inbrija® in healthy adult subjects

#### Jaap Wieling<sup>1</sup>, Wouter Dijkstra<sup>1</sup>, Floris Grasmeijer<sup>1,2</sup>, Marcel Hoppentocht<sup>1</sup>

<sup>1</sup>PureIMS B.V., Ceintuurbaan Noord 152, Roden, 9301 NZ, the Netherlands

<sup>2</sup>Department of Pharmaceutical Technology & Biopharmacy, University of Groningen, Antonius Deusinglaan 1, Groningen, 9713 AV, the Netherlands

#### Introduction

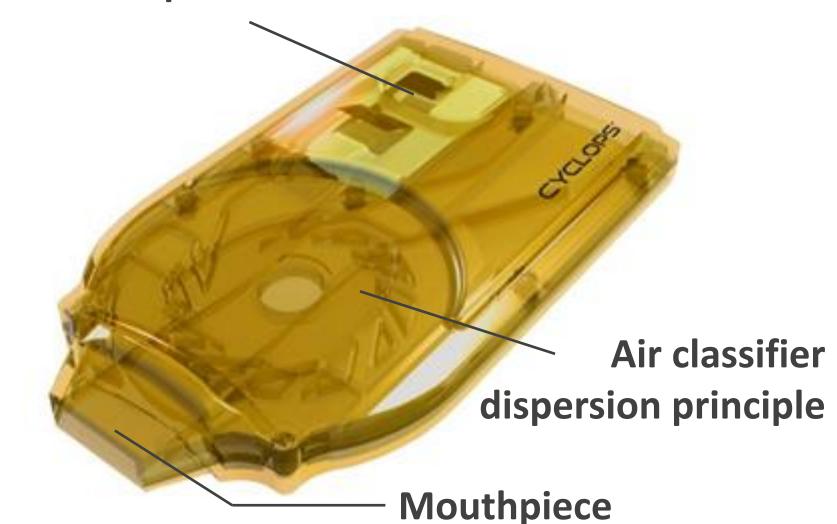
- Many Parkinson's disease (PD) patients experience OFF episodes that require medication with a predictable and fast onset of effect.
- This unmet medical need was addressed by apomorphine-based products and Inbrija®, but these products still have limitations.
- Levodopa Cyclops<sup>®</sup> is a pre-filled, ready-to-use, single-use dry powder inhaler (DPI) that offers PD patients excellent ease-of-use.
- Previous studies in PD patients have shown **Levodopa Cyclops®' fast efficacy** (< 20 min.), ease-of-use during OFF episodes, and **tolerability**. 1,2

#### Objective

Primary objective was to determine the comparative bioavailability between Levodopa Cyclops® and Inbrija®.

Most important secondary objective was to determine the safety and tolerability of Levodopa Cyclops®.

#### **Dose compartment**



#### Methods



#### Levodopa Cyclops®

- 45 mg (1 DPI)
- 90 mg (2 DPIs)

Inbrija<sup>®</sup>

• 135 mg (3 DPIs)

84 mg (2 capsules)

### Carbidopa50 mg

1 h. pre-dose

- **Blood sampling:** -60, -30, -15, 3, 6, 9, 12, 15, 18, 21, 24, 27, 30, 40, 60 minutes, 1:30, 2:00, 4:00 and 8:00 hours
- PK endpoints:  $C_{max}$ ,  $T_{max}$ ,  $AUC_{0-4}$ ,  $AUC_{0-t}$ ,  $AUC_{0-\infty}$ ,  $t_{1/2}$
- Safety endpoints: adverse events, vital signs and clinical and laboratory examination

#### Results and discussion

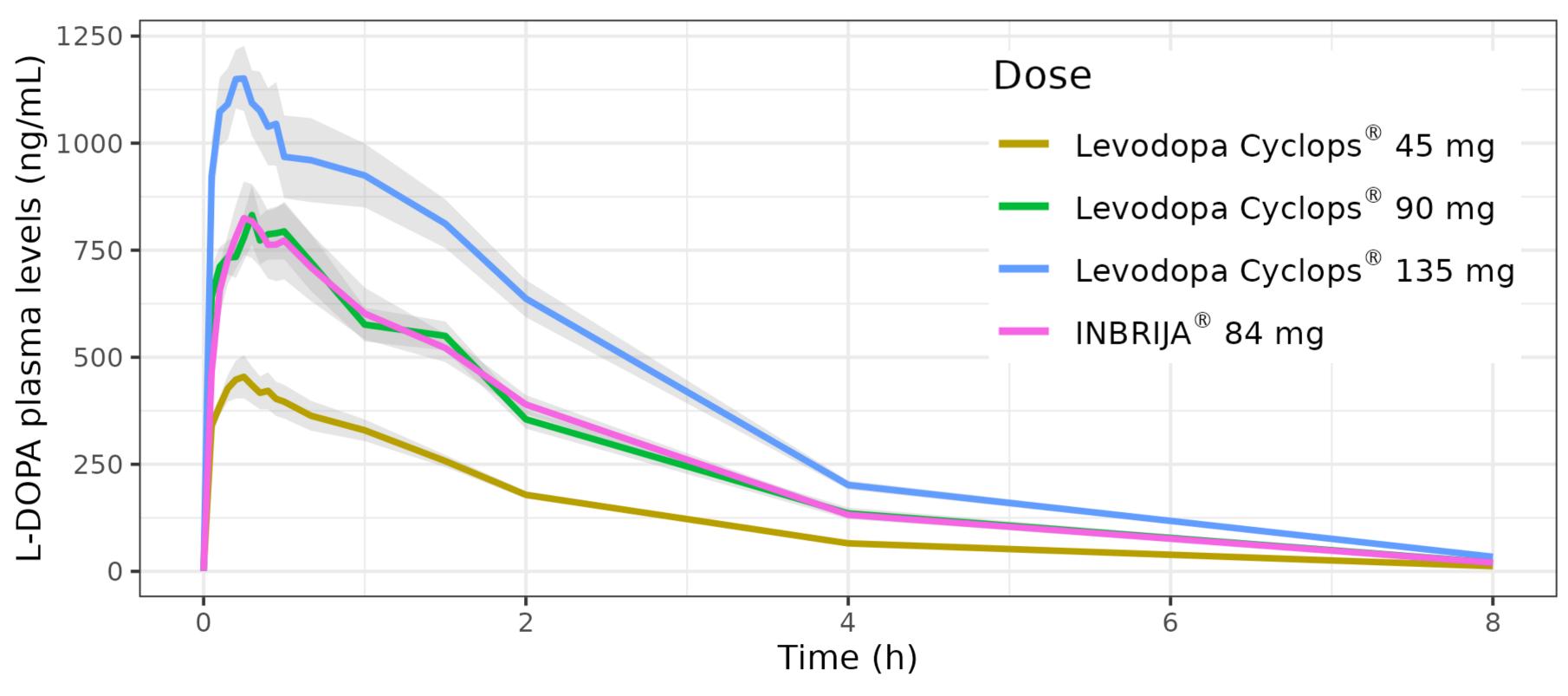
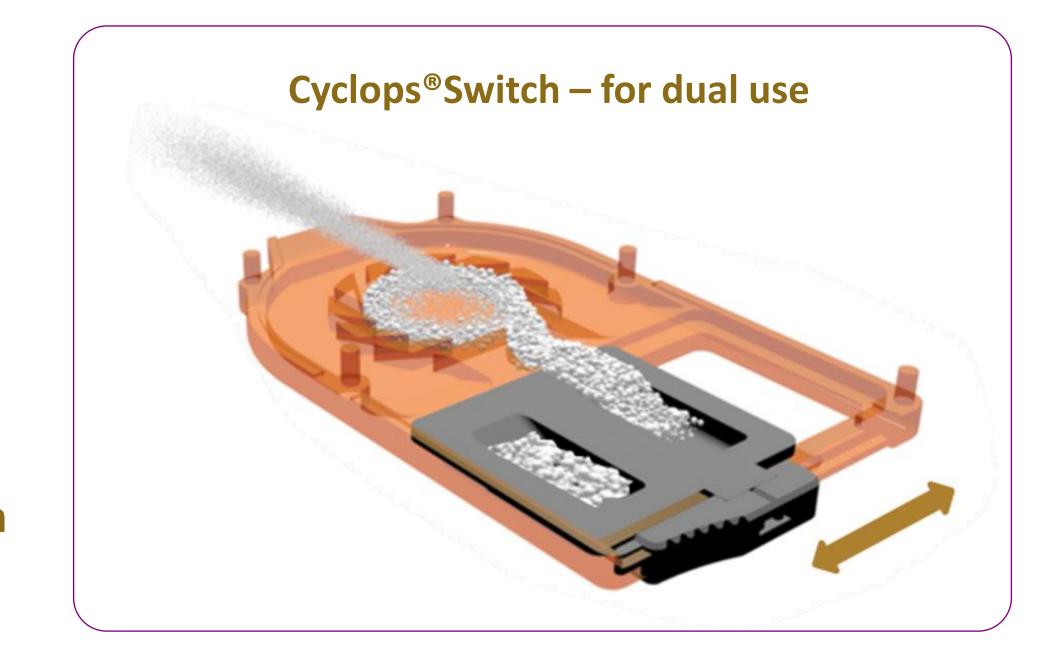


Figure 1: plasma levodopa concentration profiles following inhalation from Levodopa Cyclops® and Inbrija®.

- ~2000 plasma samples were analyzed by LC-MS/MS.
- Therapeutic levodopa levels were reached within minutes.
- Linear increase in concentration as the Levodopa Cyclops® dose increases.
- Similar shape of the curves of Levodopa Cyclops® 90 mg and Inbrija®.
- Only one case of levodopa-related diarrhea was reported as adverse event and no reports of cough
  for Levodopa Cyclops<sup>®</sup>.

# Table 1: Pharmacokinetic results; geom. mean (geom. CV%). $\frac{t_{max}}{(min)} \quad C_{max} \left( ng/mL \right) \quad \text{AUC}_{0-\infty} \left( ng*h/mL \right)$ Cyclops® 45 mg 19.4 531 (40.6) 1041 (19.3)

	(111111)		
Cyclops <sup>®</sup> 45 mg	19.4	531 (40.6)	1041 (19.3)
Cyclops® 90 mg	19.6	1021 (32.7)	1973 (24.9)
Cyclops <sup>®</sup> 135 mg	17.2	1504 (28.4)	3120 (18)
Inbrija <sup>®</sup> 84 mg	23	969 (51.9)	1849 (55.9)



#### Conclusions

- Levodopa Cyclops® is safe and very well tolerated (no cough).
- Levodopa absorption from Cyclops® is comparable to Inbrija®, thereby, fulfilling the bioequivalence criteria.
- Results enable abbreviated registration routes with a limited PK-only clinical program.
- Cyclops®Switch for dual use is in development.
- Levodopa Cyclops® is very easy to use and systemic absorption is fast, so it will be a valuable asset to offer fast and reliable relief of debilitating OFF episodes.

#### References

- 1. Luinstra et al. (2019), International Journal of Pharmaceutics, p. 1-5, vol. 567
- 2. Luinstra et al. (2019), Therapeutic Advances in Chronic Disease, 204062231985761, vol. 10



jwieling@pureims.com

