

## Supporting Information

Use of Osmotic Pumps to Establish the Pharmacokinetic-Pharmacodynamic Relationship and Define Desirable Human Performance Characteristics for Aggrecanase Inhibitors

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S1 – Supporting information title page

S2 – Additional experimental detail for PBPK modelling

S3 – Figure 10: Comparison of observed and modelled PK data for compound **3** and **8** following iv administration to rats, dogs and monkeys

S4 – Figure 11: Comparison of observed and modelled PK data for compound **3** and **8** following oral administration to rats, dogs and monkeys

## Human PK Projections

### Results

The preclinical ACAT-PBPK models produced simulations which were compared to the observed plasma concentrations following single-doses of compound-3 or compound-8. Unadjusted PBPK models (using retrograde CI) produced reasonably accurate simulations of  $C_0$ , but failed to capture the terminal elimination phases ( $t_{1/2}$ ). Modifications in  $K_{p,adipose}$  produced  $V_{ss}$  to match the observed  $V_{ss}$ , however these simulations failed to capture the time-course or curve shape observed in vivo. For compound-3, a 90% decrease in  $Q_{adipose}$  (for all species) from the default value in each species model, provided an improved fit to the multi-compartment nature of the observed plasma-concentration time curves when compared to the more rapid distributing non-adjusted models. For compound-8, a 10-fold increase in  $Q_{adipose}$  gave a suitable fit for the rat concentration-time curve however the dog and monkey models were insensitive to either  $K_p$  or  $Q_{adipose}$  (Figure 10). Despite the insensitive nature of the dog and monkey models, the increased  $Q_{adipose}$  was retained in design of the human model. The i.v. bolus models were then used to simulate a single-oral dose when coupled with species specific ACAT model, as described in Methods. Species specific oral models, provided suitable fits to the observed oral plasma-concentration-time data, both in terms of absorption phase and terminal elimination half-life (Figure 11).

A human ACAT-PBPK models was constructed based on assumptions used in the preclinical models (with no additional model modifications) including  $K_{p,adipose}$  to match the projected  $V_{ss}$  (Oie-Tozer) and a 90% decrease or 10-fold increase in  $Q_{adipose}$  for compound 3 and compound-8, respectively. Simulations of seven-days of oral dosing of compounds 3 or 8 were conducted at simulated doses necessary to achieve an unbound  $C_{min}$  (e.g., 168 hrs) equal to 10x- $IC_{50}$ . As shown in figure 8, the compound-3 model required a 600 mg QD dose or 40 mg BID, whereas a 45 mg QD simulated dose of compound-8 achieved an unbound  $C_{min}$  equal to 10x the  $IC_{50}$ .

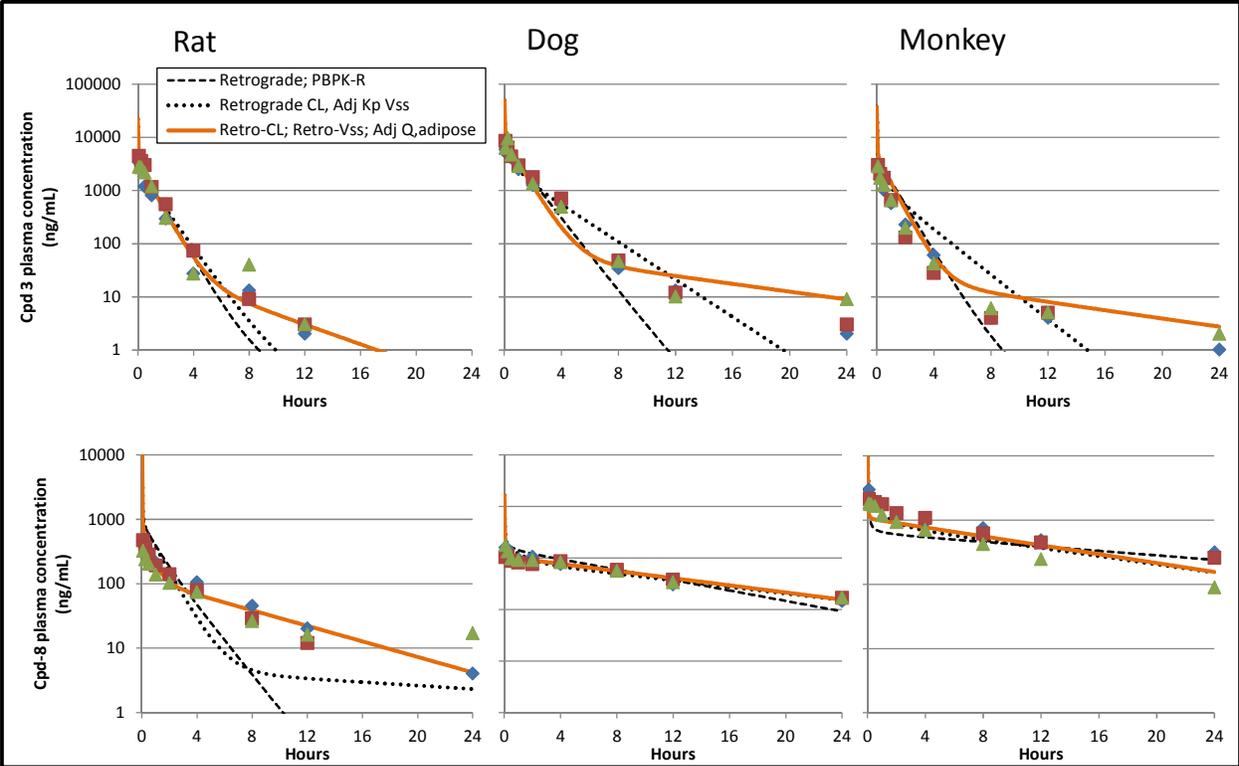


Figure 10. Observed (symbols) and simulated (lines) plasma concentrations of compound-3 or compound-8 following a single i.v. dose in rats, dogs and monkeys.

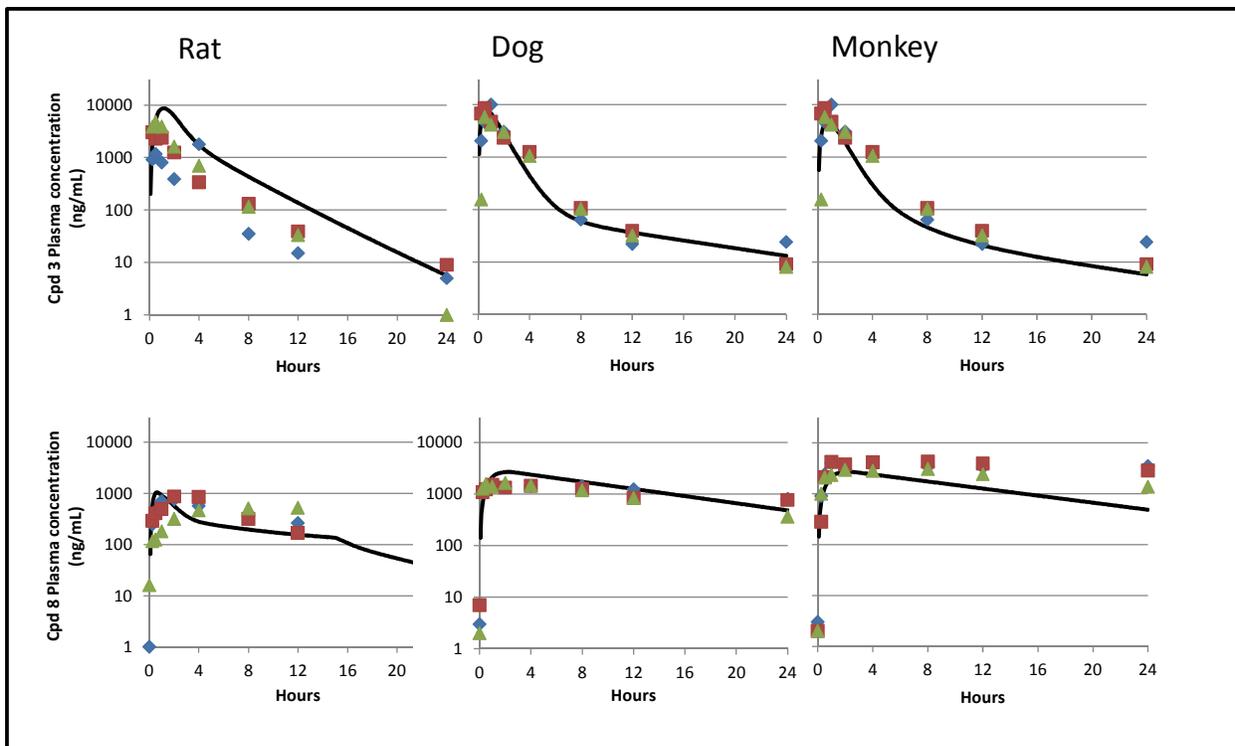


Figure 11. Observed (symbols) and simulated (lines) plasma concentrations of compound-3 or compound-8 following a single oral dose in rats, dogs and monkeys.