

ADVANCING INTRANASAL PEPTIDE THERAPIES: OVERCOMING BARRIERS TO EFFICACY AND STABILITY

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ABSTRACT:

Intranasal delivery of peptides offers a promising alternative to traditional routes of administration, presenting unique advantages in terms of rapid onset of action and avoidance of first-pass metabolism. Despite its potential, the development of intranasal peptide therapies is fraught with significant challenges, including peptide stability, absorption efficiency, and delivery precision. This review delves into the complexities of formulating intranasal peptide therapeutics, highlighting the pivotal role of advanced formulation technologies and innovative delivery devices. Key strategies to enhance peptide stability involve the use of protective carriers and chemical modification. Improving absorption efficiency relies on the development of permeation enhancers and mucoadhesive formulations, tailored to the unique anatomy and physiology of the nasal cavity. Furthermore, an in-depth understanding of nasal physiology is essential for optimizing drug delivery and maximizing therapeutic outcomes. Recent advancements in nanoparticle-based systems and microfabricated delivery devices are also discussed as cutting-edge approaches to overcome these hurdles. As research continues to evolve, the integration of these technological innovations with a robust understanding of nasal drug delivery mechanisms holds the key to unlocking the full potential of intranasal peptide therapies.

Key words: Peptide Therapeutics, challenges, stability.

INTRODUCTION:

This term refers to a method of delivering drugs through the nasal passages, directly to the bloodstream or the brain, without using traditional oral or intravenous routes. This technique can be used for various treatments and drugs, offering several advantages such as rapid onset of action and avoiding first-pass metabolism in the liver.

What is Intranasal Formulation?

- Route of Administration: Drugs are delivered through the nasal cavity.
- Absorption Site: Nasal mucosa (the lining of the nasal cavity).
- Purpose: To deliver drugs directly into the bloodstream or to the central nervous system (CNS).

Advantages

1. Rapid Onset: Drugs can quickly enter the bloodstream and brain, providing faster effects compared to oral administration.

2. Avoidance of First-Pass Metabolism: Drugs bypass the liver's first-pass effect, which can enhance bioavailability.
3. Non-invasive: More convenient than injections, improving patient compliance.
4. Direct CNS Delivery: Certain drugs can access the brain via the olfactory and trigeminal nerves, which can be particularly useful for neurological conditions.

Applications

- Pain Management: Medications like fentanyl for quick relief.
- Vaccines: Nasal vaccines can stimulate a local immune response in the mucosa.
- Neurological Disorders: Drugs for conditions like Parkinson's or Alzheimer's.
- Emergency Treatments: For example, naloxone for opioid overdose.

Challenges

- Formulation Stability: Ensuring the drug remains stable in the nasal environment.
- Irritation: Some drugs may cause irritation or damage to the nasal mucosa.
- Absorption Variability: Factors like nasal congestion or mucociliary clearance can affect drug absorption.

Recent Advances

Nanoparticles and micro particles used to enhance drug absorption and targeting. Biologics intranasal delivery of proteins, peptides, and even gene therapies is being explored. The drug is typically sprayed or dropped into the nostrils. It passes through the nasal mucosa. Transport: The drug either enters the bloodstream or the brain.

Developing nasal sprays for drug delivery involves various challenges, each affecting the formulation's effectiveness, safety, and stability. Here's a comprehensive look at these challenges:

Intranasal delivery of peptides presents a unique set of challenges and opportunities in drug development. Peptides, which are short chains of amino acids, can be used to target specific pathways in the body and offer the potential for treating a wide range of conditions. Here's a detailed look at the development of peptide intranasal delivery:

CHALLENGES IN PEPTIDE INTRANASAL DELIVERY

Formulation Stability

Degradation

Peptides can degrade due to enzymatic activity in the nasal mucosa and environmental factors such as pH and temperature.

Proteolytic Enzymes: Nasal mucosa contains proteases that can degrade peptides. For example, trypsin-like enzymes can cleave peptide bonds, reducing the bioavailability of the peptide.

- **Environmental Stability:** Peptides may degrade when exposed to temperature fluctuations, leading to reduced efficacy over time.

pH Sensitivity

The nasal mucosa has a pH range of about 5.5 to 6.5. Formulations must be adjusted to match this to avoid irritation and degradation.

- **Buffer Systems:** Use of appropriate buffering agents to maintain pH within a range that ensures peptide stability while being gentle on nasal tissues.

Aggregation

Peptides can aggregate, especially at higher concentrations or under stress conditions, which can impair their bioavailability and increase the risk of immunogenicity.

- **Stabilizing Agents:** Inclusion of excipients like surfactants or stabilizing agents to prevent aggregation.

Permeability

Peptides generally have low permeability through the nasal mucosa due to their large molecular size and hydrophilic nature.

- **Molecular Modifications:** Chemical modifications, such as PEGylation or lipidation, can improve membrane permeability.
- **Formulation Additives:** Use of permeation enhancers (e.g., surfactants like polysorbate 80) to transiently disrupt the nasal membrane and facilitate peptide absorption.

Bioavailability

Peptides are rapidly cleared from the nasal cavity by mucociliary action, leading to reduced systemic bioavailability.

- **Mucoadhesive Polymers:** Incorporating polymers like chitosan that adhere to the nasal mucosa, prolonging the residence time of the peptide.
- **Enzyme Inhibitors:** Addition of protease inhibitors to protect peptides from enzymatic degradation.

Delivery Efficiency

Differences in nasal anatomy and physiological conditions (e.g., mucosal inflammation, congestion) can result in inconsistent absorption rates.

- **Patient Screening:** Identifying suitable patients and tailoring the formulation to individual needs.
- **Formulation Adaptation:** Adapting formulations to enhance consistency in absorption across different conditions.

Safety and Comfort

Certain excipients or high peptide concentrations can irritate the nasal mucosa.

- **Biocompatible Excipients:** Selecting excipients that are non-irritating and compatible with the nasal tissues.
- **Testing and Optimization:** Conducting irritation studies and optimizing formulation to minimize discomfort.

Regulatory and Quality Control

Ensuring formulations meet FDA/EMA guidelines for intranasal products.

- **Documentation:** Detailed submission of stability, safety, and efficacy data.
- **Quality Control:** Consistent manufacturing processes to ensure product uniformity and compliance.

Pharmacokinetics and Dynamics

Individual differences in nasal anatomy and mucosal health can lead to variability in drug response and effectiveness.

- **Clinical Trials:** Extensive testing to account for variability and optimize dosage.

FORMULATION STRATEGIES FOR PEPTIDE INTRANASAL DELIVERY

Use of Permeation Enhancers

❖ Surfactants

Surfactants can increase nasal membrane permeability but must be used in safe concentrations to avoid toxicity.eg. Polysorbates (e.g., polysorbate 80), bile salts.

❖ Cyclodextrins

Cyclodextrins can form inclusion complexes with peptides, enhancing their solubility and stability.eg. β -cyclodextrin, hydroxypropyl- β -cyclodextrin.

❖ Enzyme Inhibitors

Inhibitors can protect peptides from nasal proteases, increasing their bioavailability.eg. Leupeptin, aprotinin.

Advanced Carriers

❖ Nanoparticles

Encapsulation in nanoparticles can protect peptides from degradation and enhance absorption.

- **Polymeric Nanoparticles:** Made from biodegradable polymers like PLGA.
- **Lipid Nanoparticles:** Solid lipid nanoparticles (SLNs) and nanostructured lipid carriers (NLCs).

❖ Liposomes

Liposomes can encapsulate peptides, improving their stability and facilitating their absorption across nasal membranes.

- **Formulation Example:** Liposomes incorporating cholesterol and phospholipids.

❖ Hydrogels

Hydrogels can provide sustained release and enhance peptide residence time in the nasal cavity.

- **Mucoadhesive Hydrogels:** Formulations with gellan gum or carbopol.

Mucoadhesive Agents

❖ Polymers

Mucoadhesive polymers increase the formulation's adhesion to the nasal mucosa, enhancing absorption and prolonging peptide exposure.

- **Examples:** Chitosan, alginate, carbopol.

pH Adjustment

❖ Buffering Systems

Buffers ensure that the formulation's pH is compatible with both the peptide and the nasal mucosa.

- **Examples:** Phosphate-buffered saline, citrate buffers.

Nasal Devices

❖ Spray and Drop Devices

Devices must deliver consistent and accurate doses, ensuring effective deposition in the nasal cavity.

- **Examples:** Metered-dose nasal sprays, nasal drops.

CLINICAL AND REGULATORY CONSIDERATIONS

Clinical Trials

❖ Efficacy Studies

Trials to demonstrate that the peptide achieves its therapeutic goals when delivered intranasally.

- **Endpoints:** Clinical efficacy, pharmacokinetics, and pharmacodynamics.

❖ Safety Studies

Assessment of local and systemic safety to ensure no adverse effects from the formulation or device.

- **Endpoints:** Irritation, toxicity, systemic side effects.

Regulatory Requirements

❖ FDA and EMA Guidelines

Compliance with specific guidelines for nasal drug products, including data on stability, safety, and efficacy.

- **Regulatory Submissions:** Comprehensive documentation required for approval.

EXAMPLES OF INTRANASAL PEPTIDE FORMULATIONS

Oxytocin

- **Use:** Labor induction, treatment of social and psychiatric conditions.
- **Formulation Challenges:** Stability and effective CNS delivery.

Calcitonin

- **Use:** Treatment of osteoporosis.
- **Formulation Challenges:** Enhancing bioavailability and ensuring patient compliance.

Insulin

- **Use:** Rapid management of blood glucose levels.
- **Formulation Challenges:** Stability and bioavailability.

DEVELOPMENT STEPS FOR PEPTIDE INTRANASAL FORMULATIONS

Preformulation Studies

❖ Peptide Characterization

Understanding the peptide's stability, solubility, and degradation pathways.

- **Analytical Techniques:** High-performance liquid chromatography (HPLC), mass spectrometry.

❖ Excipient Compatibility

Screening excipients for stability and effectiveness.

- **Compatibility Testing:** Differential scanning calorimetry (DSC), Fourier-transform infrared spectroscopy (FTIR).

Formulation Development

❖ Formulation Optimization

Developing and optimizing the formulation to enhance stability, absorption, and bioavailability.

- **Techniques:** Use of design of experiments (DoE) for optimization.

❖ Stability Testing

Ensuring the peptide remains stable throughout the product's shelf life.

- **Testing Conditions:** Varying temperature, humidity, and light exposure.

Device Development

❖ Device Selection

Choosing or developing a device that ensures accurate dosing and effective delivery.

- **Considerations:** Ergonomics, ease of use, and dose accuracy.

❖ Device Testing

Evaluating the device's performance for dose accuracy, spray pattern, and patient usability.

- **Testing Protocols:** In vitro and in vivo testing for performance validation.

Preclinical Studies

❖ Animal Testing

Testing the formulation in animal models to assess pharmacokinetics, bioavailability, and safety.

- **Endpoints:** Bioavailability, toxicity, efficacy.

Clinical Development

❖ Phase I Trials

Initial testing in humans to assess safety and pharmacokinetics.

- **Endpoints:** Safety, dosage tolerance.

❖ Phase II and III Trials

Testing for efficacy and further safety in larger populations.

- **Endpoints:** Clinical efficacy, long-term safety.

EMERGING TECHNOLOGIES AND TRENDS

Nasal-to-Brain Delivery

❖ Targeting the CNS

Developing formulations that exploit the nasal-to-brain route for conditions like Alzheimer's or epilepsy.

- **Mechanism:** Use of olfactory and trigeminal nerve pathways.

❖ Innovative Carriers

Use of novel carriers like exosomes or solid lipid nanoparticles to improve delivery to the brain.

- **Examples:** Exosome-loaded peptides, lipid-based formulations.

Personalized Medicine

❖ Tailored Formulations

Developing formulations tailored to individual patient needs based on genetic or phenotypic factors.

- **Personalization Techniques:** Use of patient-specific biomarkers for formulation adjustments.

CONCLUSION

Intranasal delivery of peptides is a promising but complex field. The development involves overcoming significant challenges related to stability, absorption, and delivery efficiency. Innovations in formulation technology and delivery devices, combined with a thorough understanding of the nasal anatomy and physiology, are critical for the successful development of intranasal peptide therapies.

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