

Translation of a combination between a laser device and a medicinal agent, from bench to bedside

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Medical Device

ISO 13485:2016;

Regulation (EU) 2017/745

Class I – non-invasive devices, unless...

They channel or store body fluids or cells, or liquids or gases : **Class IIa**

They are connected to Class IIa, IIb, or III : **Class IIb**

Class IIa – non-invasive devices intended for modifying the biological or chemical composition of the body

Includes active devices intended for diagnosis and monitoring

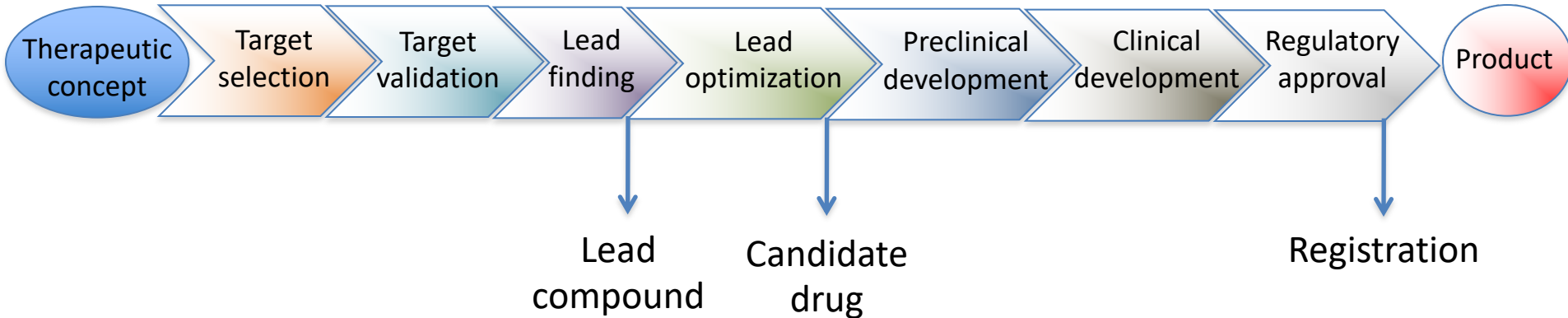
Class IIb – implantable devices and long-term surgical devices

Includes devices intended to emit ionizing radiation

Class III – active therapeutic devices with incorporated diagnostic function

Includes devices incorporating a medicinal product with an action ancillary to that of the device

Drug discovery and development



10 years

10 years

> 1000 million euros

Combinations Products

Integral combination products

The device and the medicinal product form a single integrated product
pre-filled syringes, patches for transdermal drug delivery and pre-filled inhalers

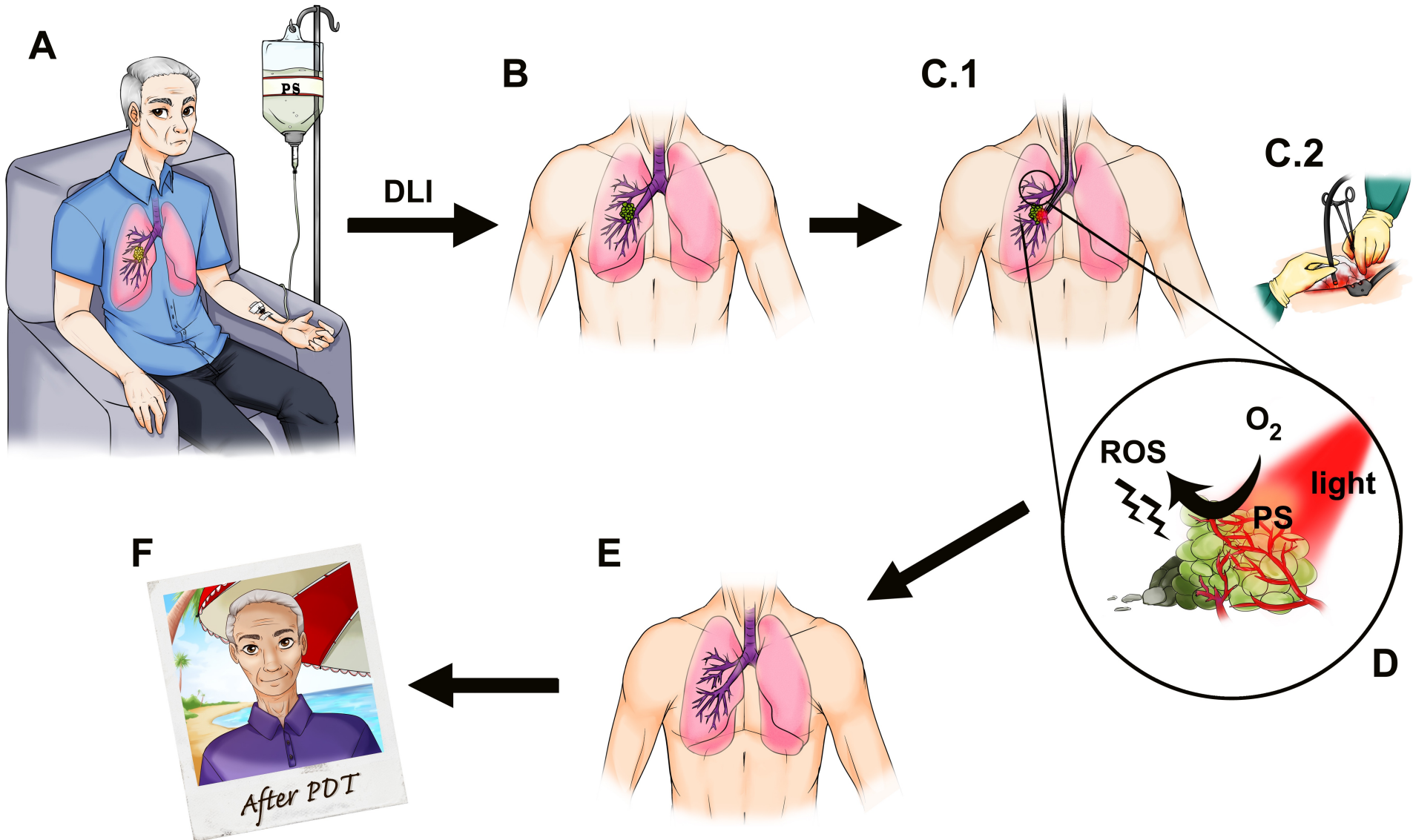
Co-packaged combination products

Device and medicinal products are separate items contained in the same pack
reusable pen for insulin cartridges, delivery system with controller for pain management

Medical device with ancillary medicinal substance

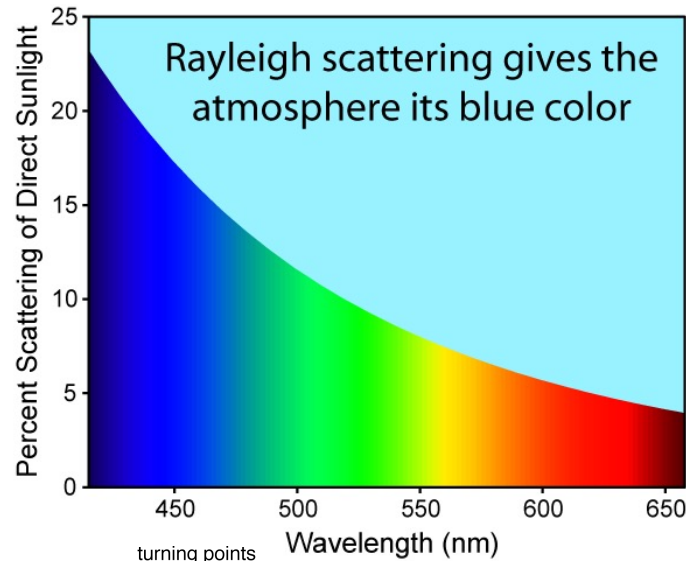
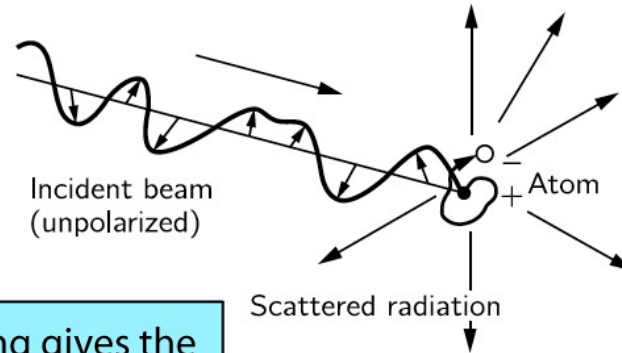
Device contains an ancillary medicinal substance to support its proper functioning
drug-eluting stents, catheters coated with antibiotic

PDT for solid tumors



Light propagation in human tissues

Elastic scattering

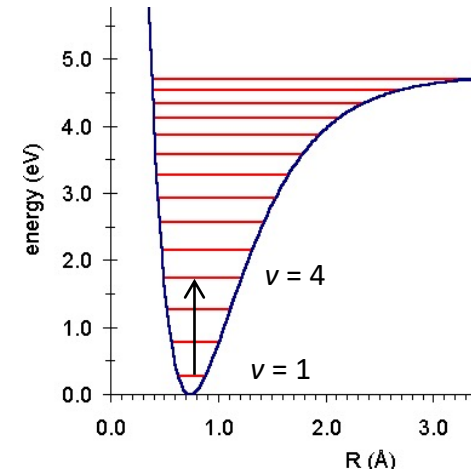


Mie

(particle size comparable with λ)

Cell diameter	40λ
Mitochondria length	λ
Ribosome width	$\lambda/20$

For $\lambda=700 \text{ nm}$



Vibration overtones

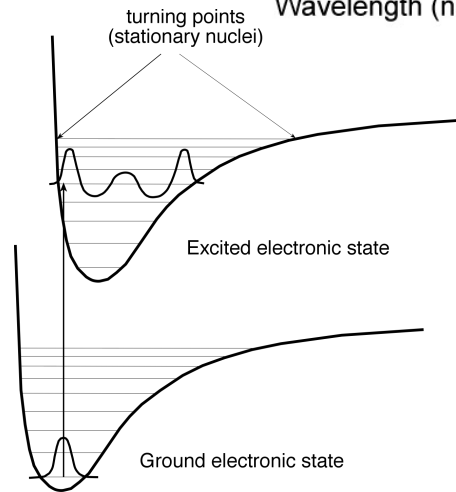
Rayleigh

(very small particles)

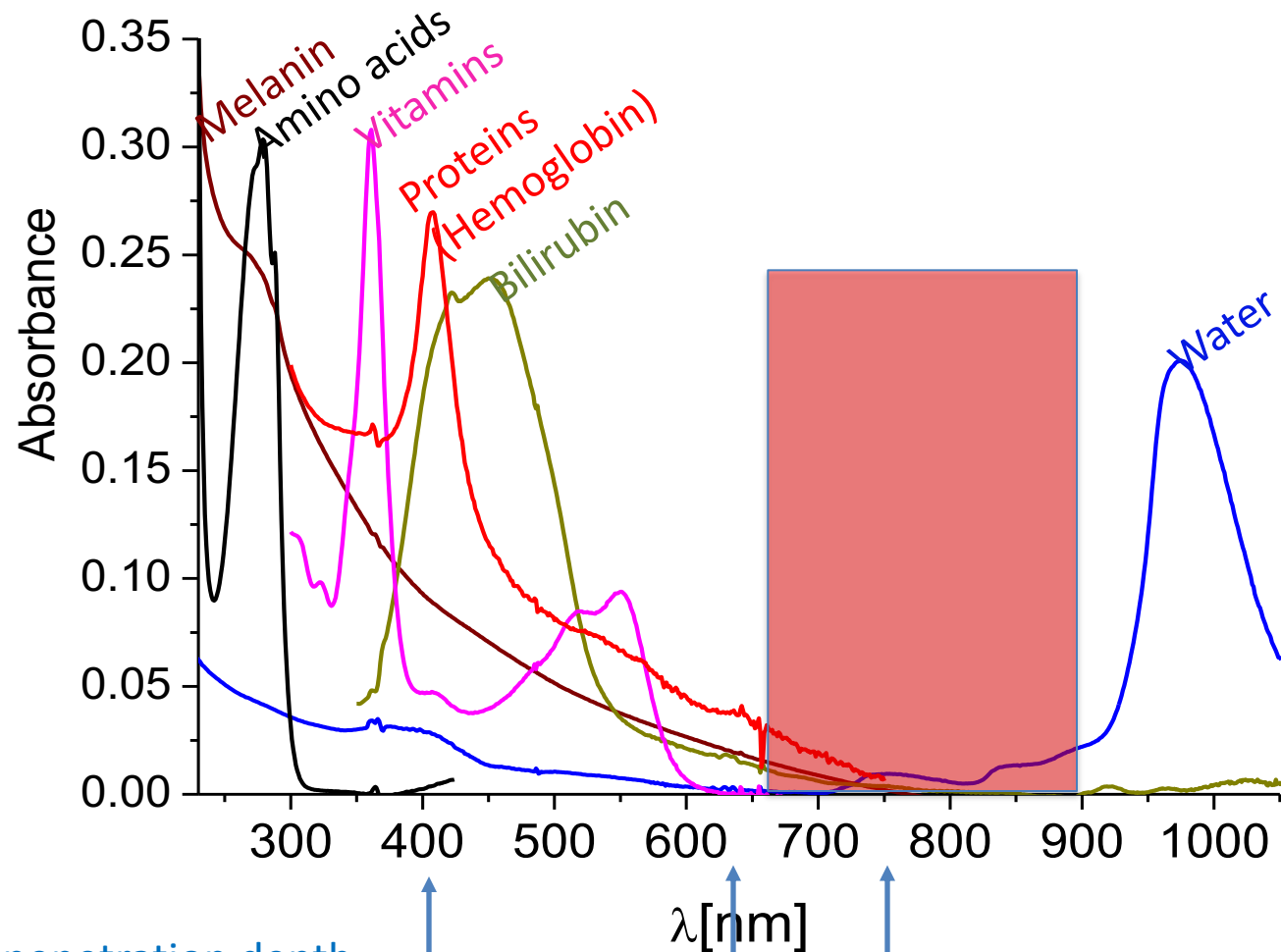
$$I \propto \frac{1 - \cos^2 \theta}{\lambda^4} I_0$$

Absorption

Electronic excitation



Endogenous chromophores and the phototherapeutic window

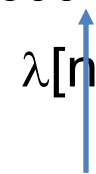


δ – optical penetration depth

$3\delta \approx 95\%$ light attenuation



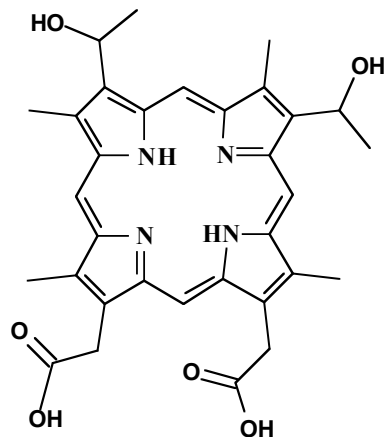
0.8 mm



5.4 mm

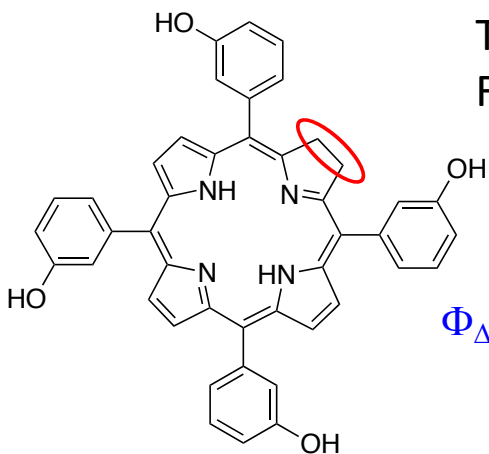
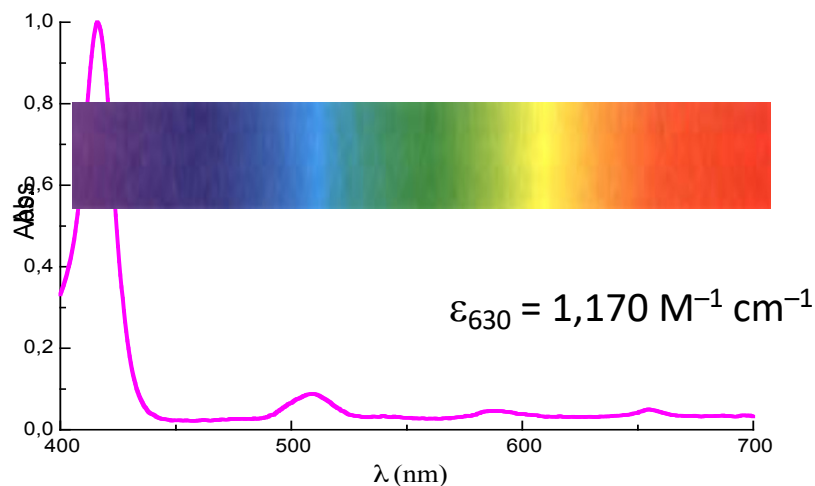


6.9 mm



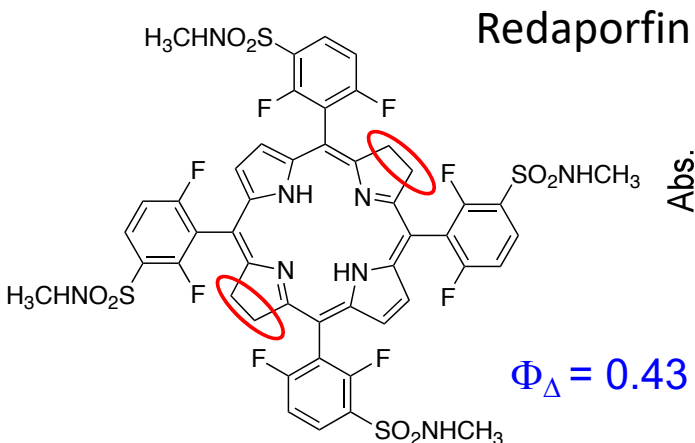
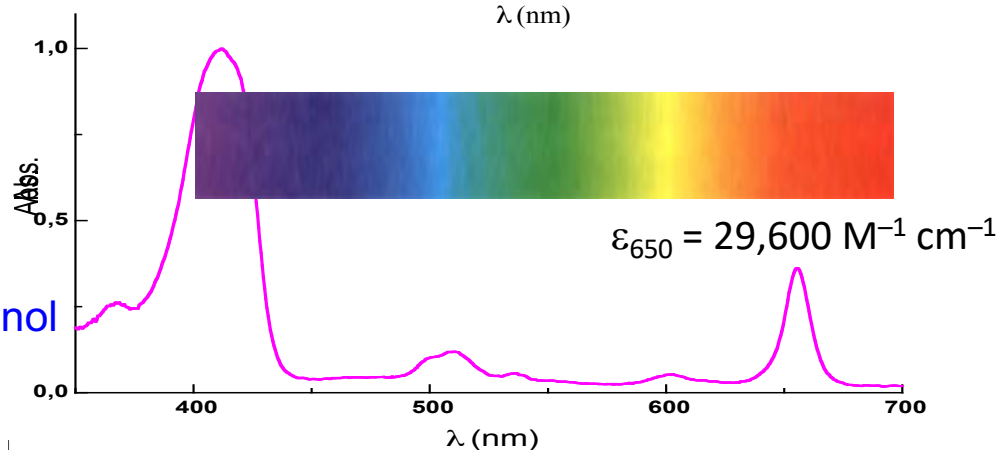
Porphimer sodium
Photofrin®

$\Phi_{\Delta} = 0.36$ in PBS



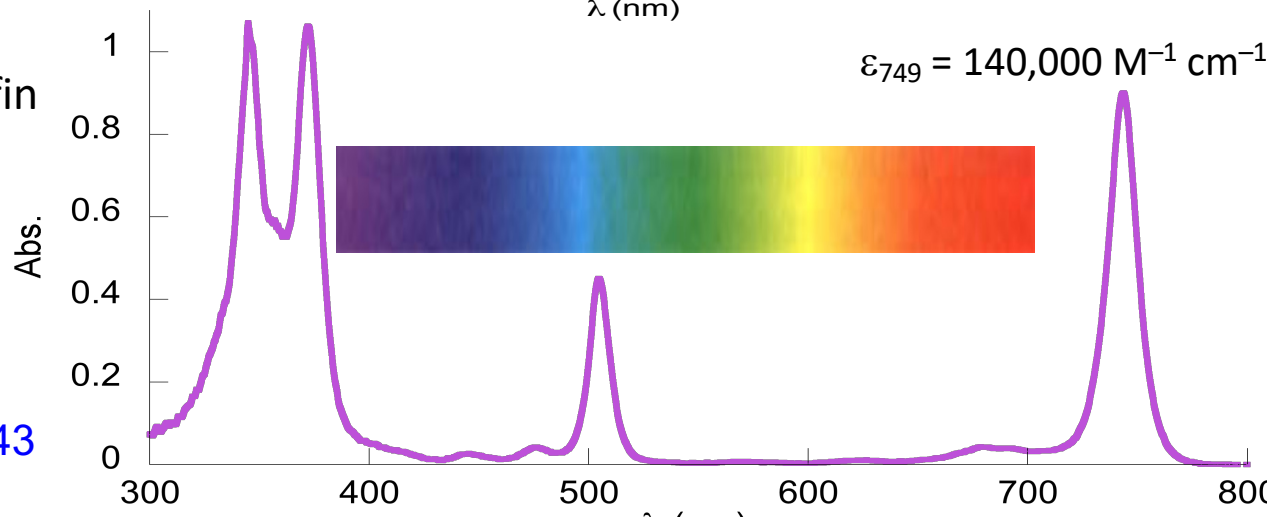
Temoporfin
Foscan®

$\Phi_{\Delta} = 0.43$ in methanol

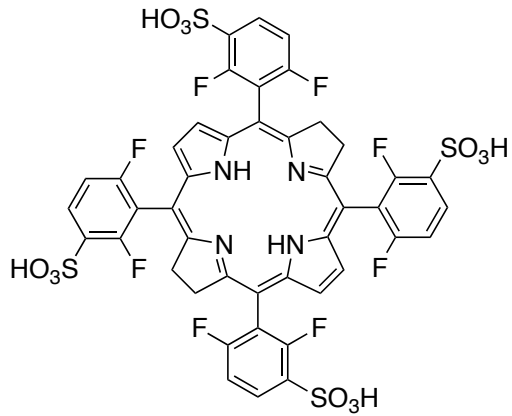


Redaporfin

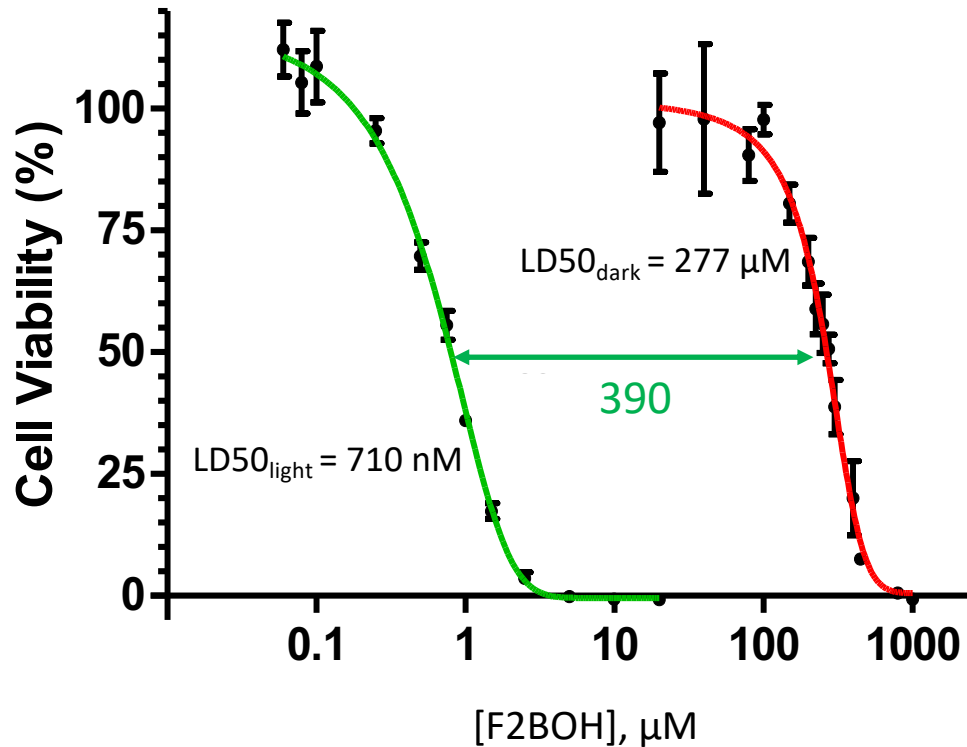
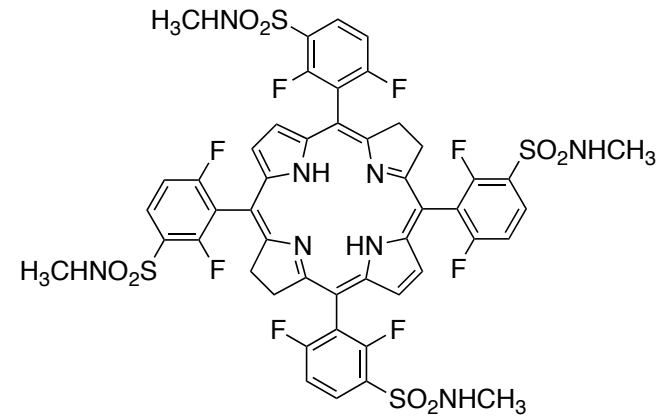
$\Phi_{\Delta} = 0.43$



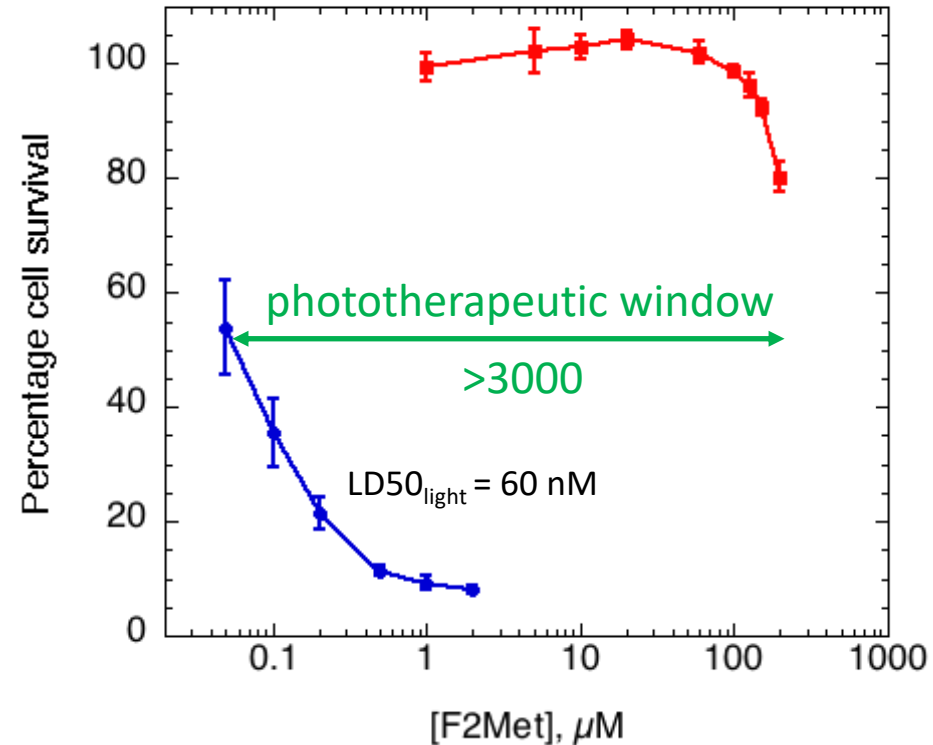
Toxicity and phototoxicity



In vitro CT26 cell line
6 J/cm²



Hydrophilic bacteriochlorin

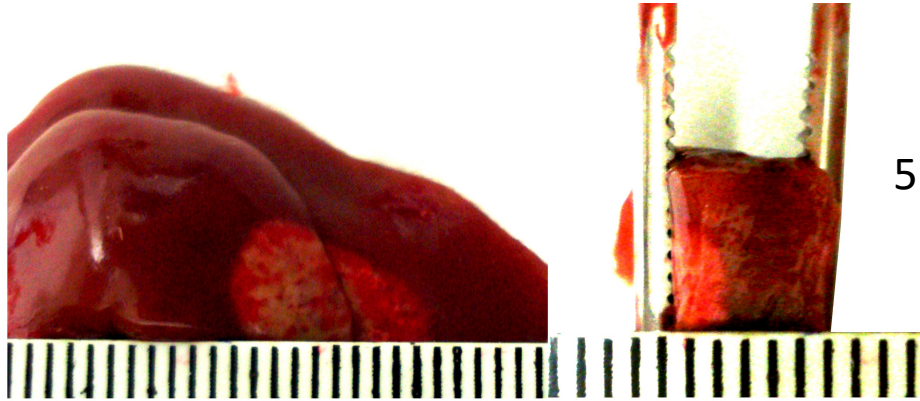


Amphiphilic bacteriochlorin

Depth of necrosis – Frontal illumination, 1 cm diameter spot

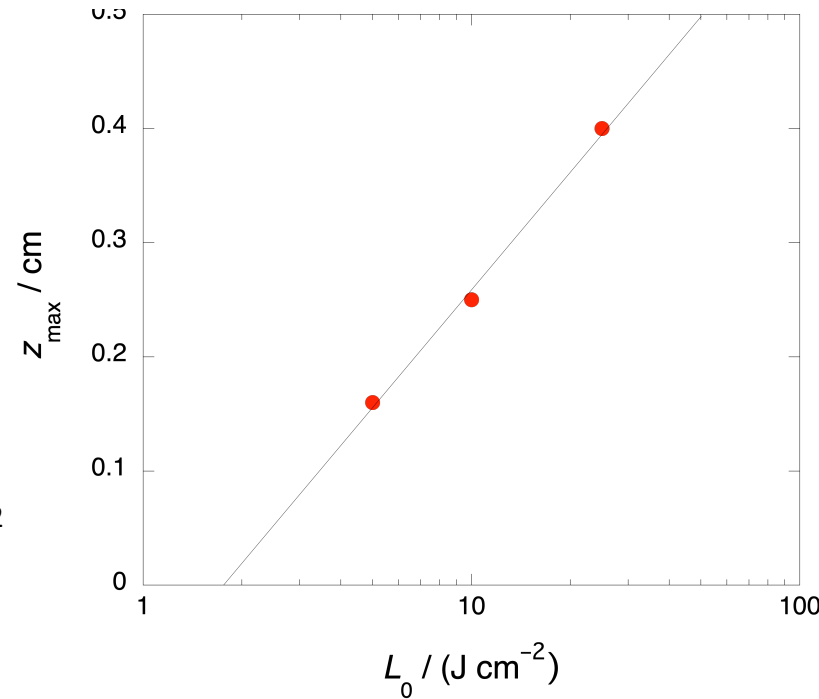
Rat liver, 0.75 mg/kg redaporfin , DLI =15 min, $\lambda = 750$ nm, $P = 130$ mW/cm²

A

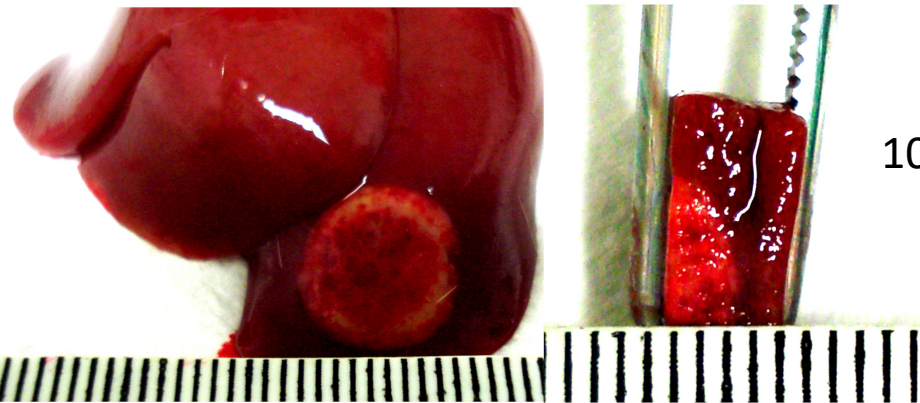


$L_0 =$

5 J/cm²

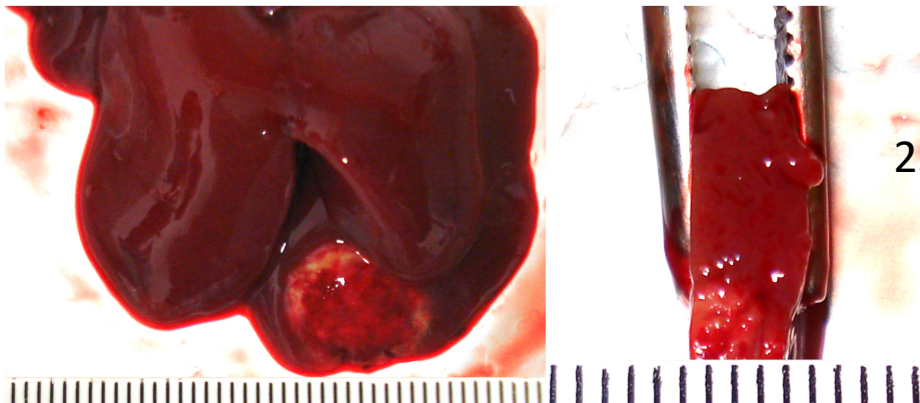


B



10 J/cm²

C



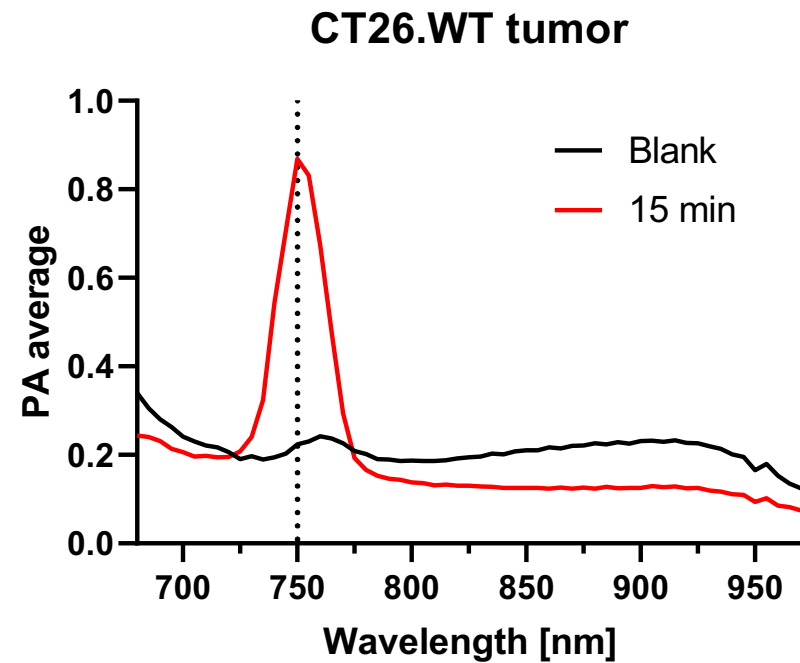
25 J/cm²

Photodynamic threshold dose

$$T = 2.3 \varepsilon C_{\text{loc}} L_{\text{th}}$$

$$\approx 11 \text{ mM}$$

Redaporfin tumor accumulation by Photoacoustic Tomography



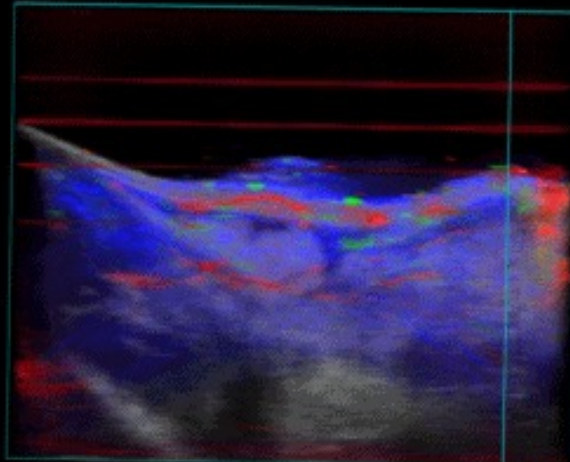
Photoacoustic tomography of tumors after administration of redaporfin

Blue = deoxyhemoglobin

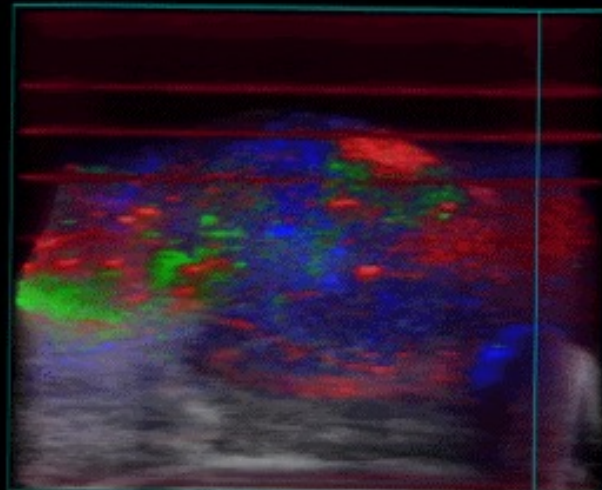
Red = oxyhemoglobin

Green = redaporfin

4T1@48h

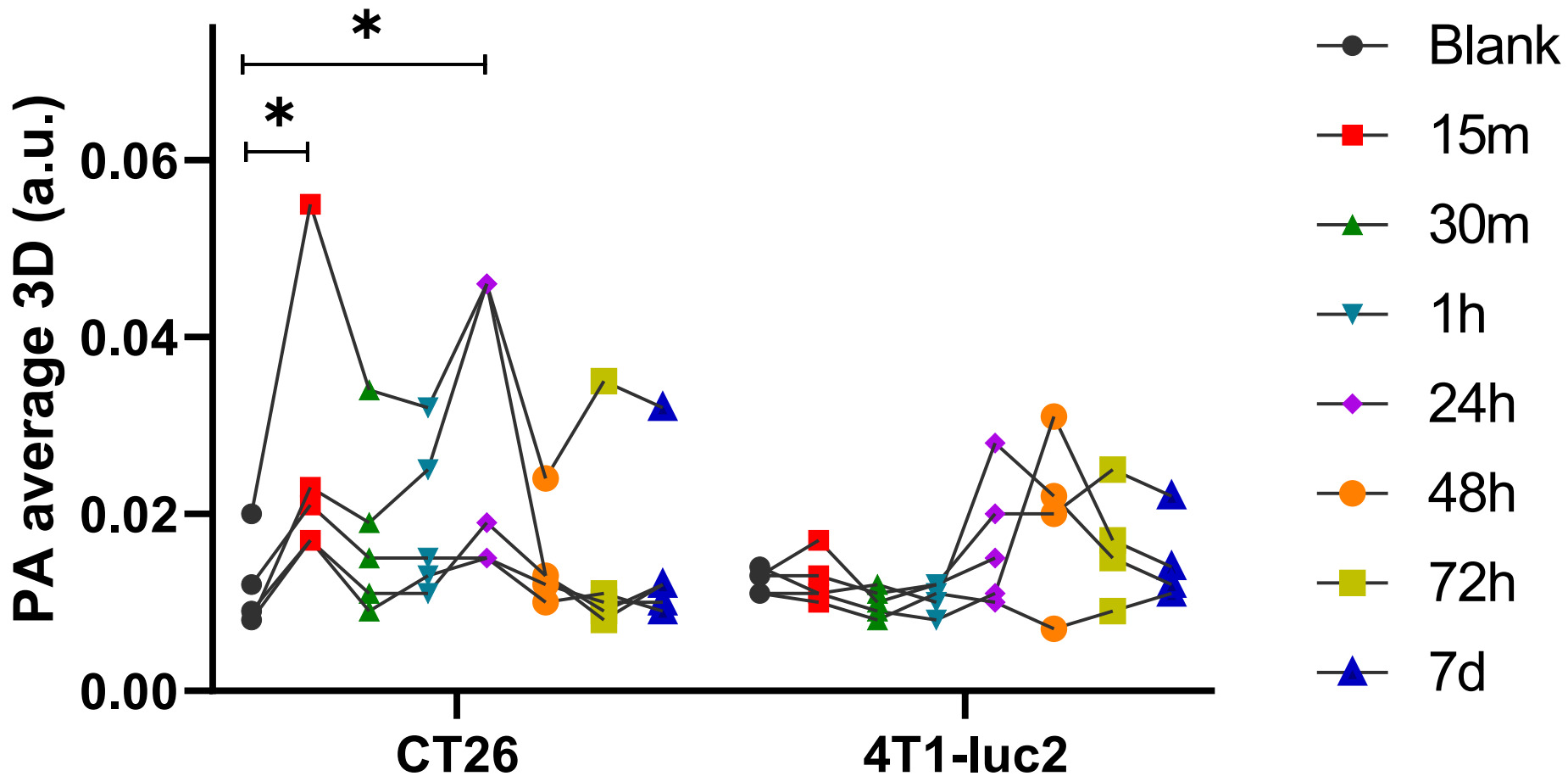


CT26@15min



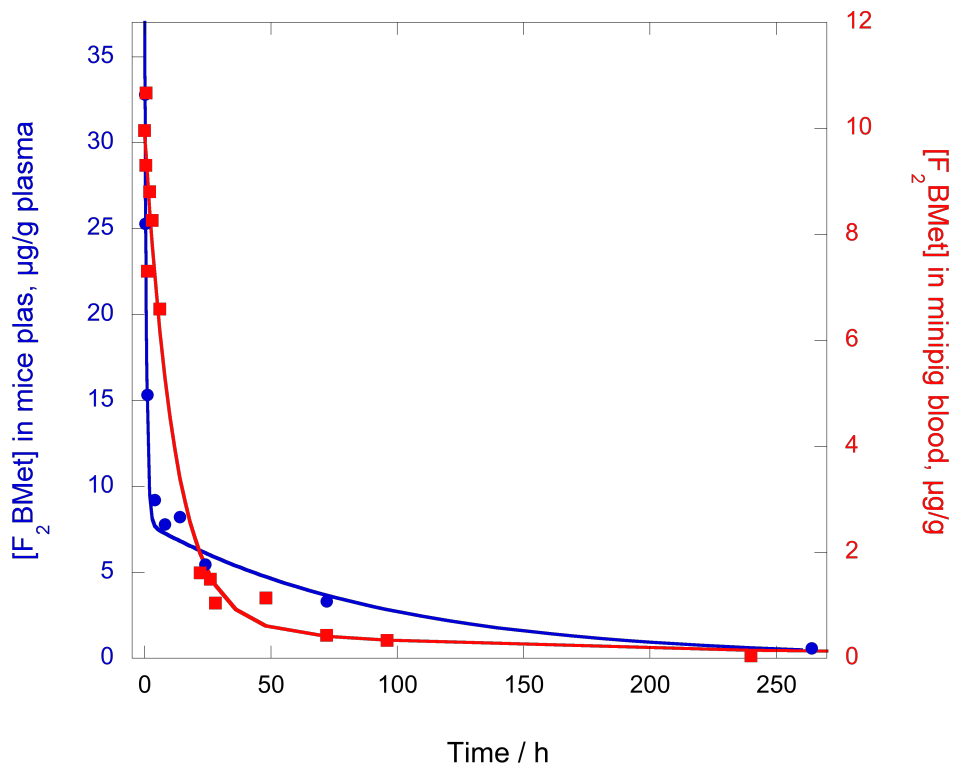
Profile of redaporfin accumulation in the tumor followed by photoacoustic tomography

redaporfin 1.65 mg/kg



Pharmacokinetics in BALB/c mice and minipigs

(i.v. administration of 1.5 mg/kg)



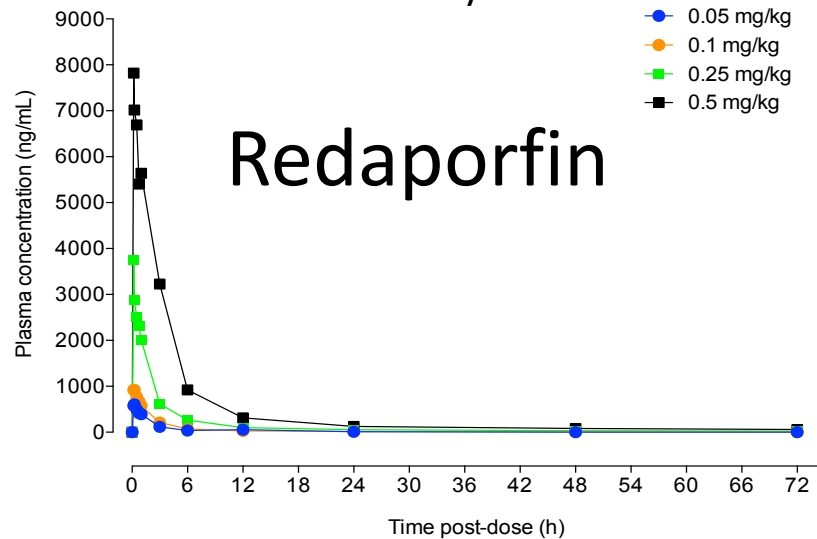
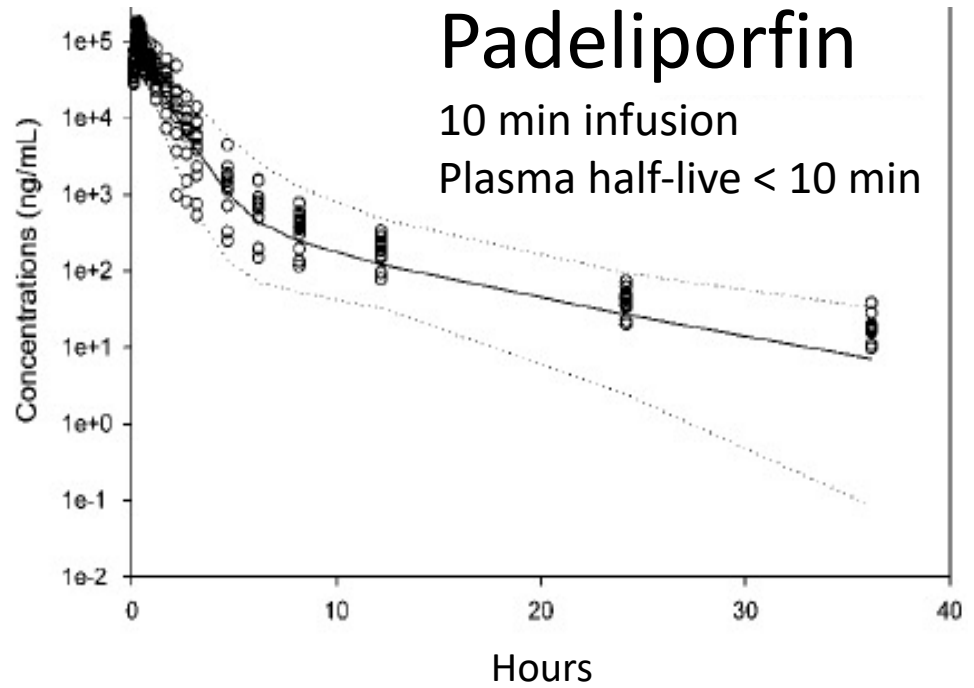
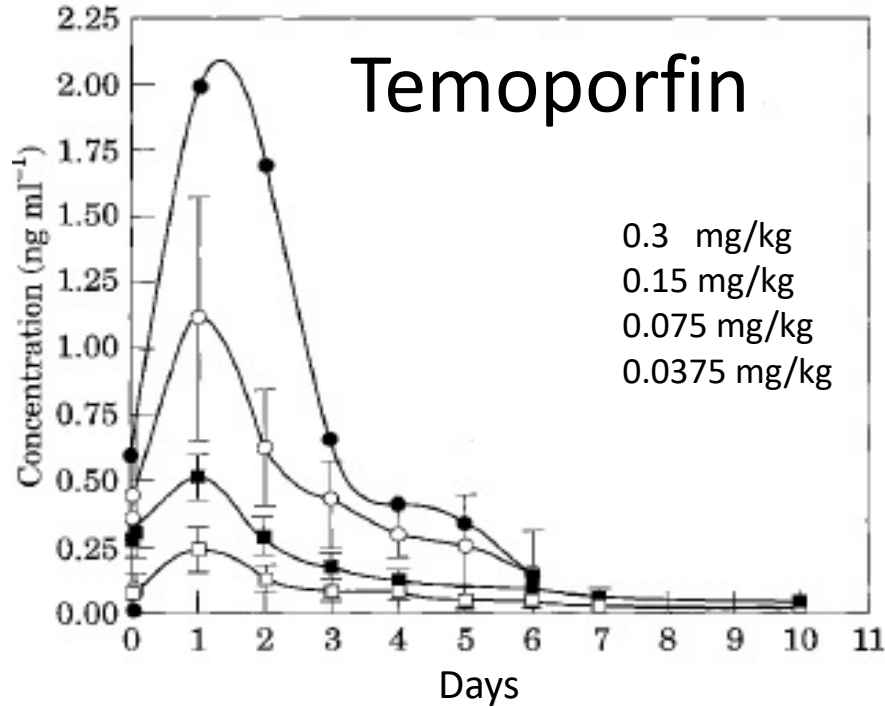
PK parameter	BALB/c mice	Minipigs
i.v. dose (mg/kg)	2	2
C_{max} ($\mu\text{g/mL}$)	39	9.9
V_D (mL/kg)	52	202
$t_{1/2} (\alpha)$ (h)	0.5	8.2
$t_{1/2} (\beta)$ (h)	65	121
AUC_{∞} ($\mu\text{g h/mL}$)	763	213
CL (mL/kg/h)	2.6	9.4

- The PK of redaporfin in plasma of mice follows a 2 compartment model
- 90% of redaporfin is cleared from the plasma in 3 days

Clinical pharmacokinetics

Ronn, A. M. et al Laser Med. Sci. 11 (1996) 267

M.-A. Fabre et al J. Pharm. Sci. 96 (2007) 3444

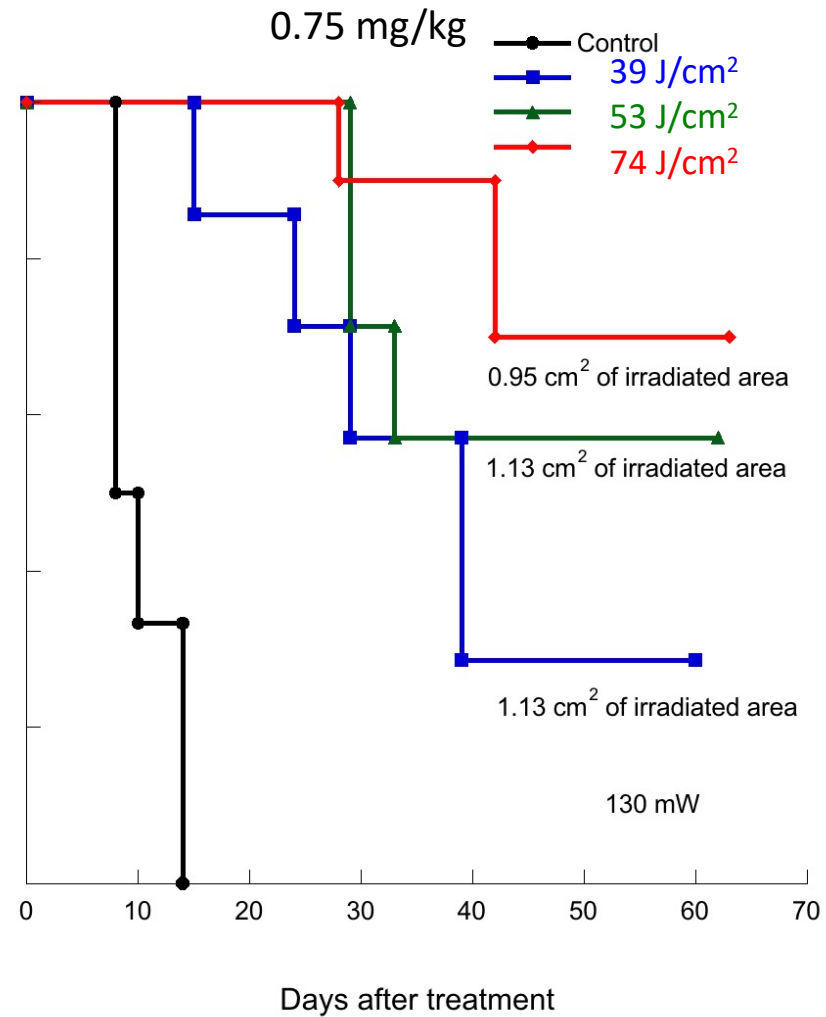
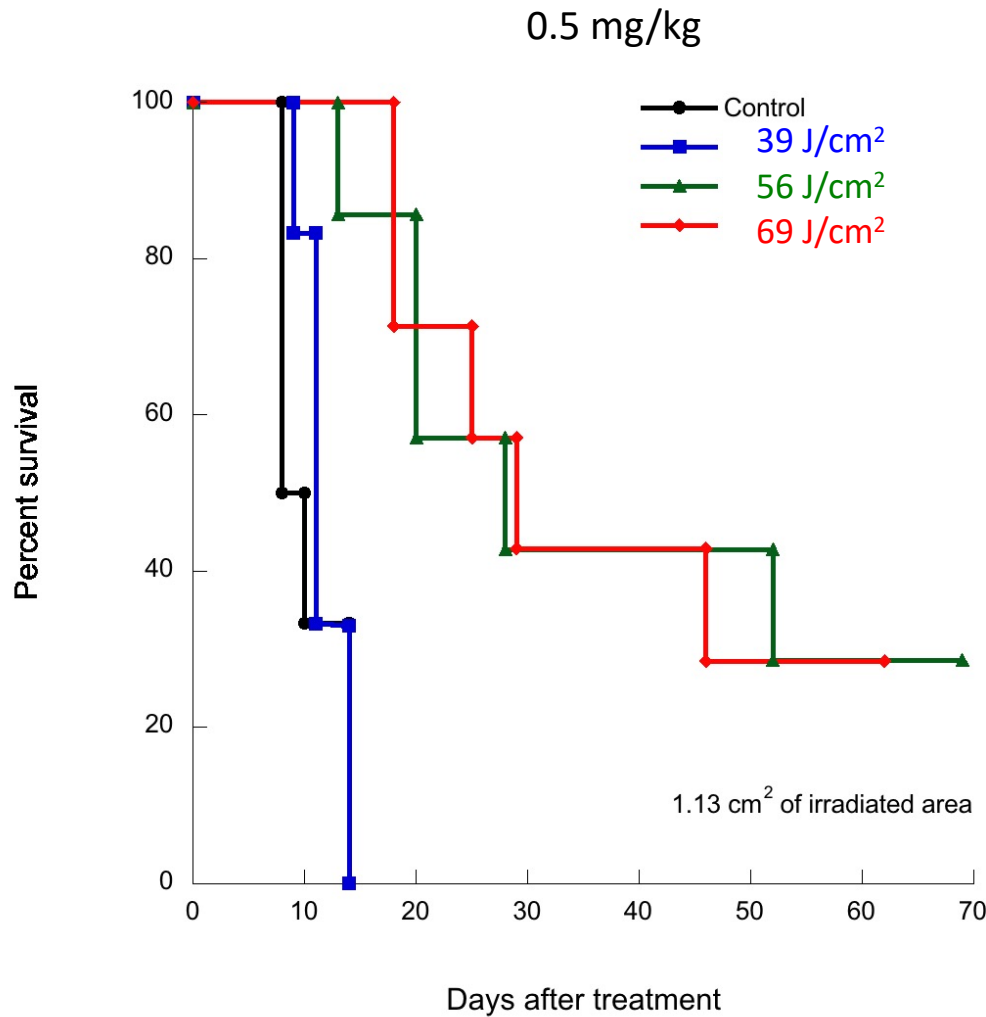


PK parameter	Clinical
i.v. dose (mg/kg)	0.1
C _{max} (μg/mL)	1
V _D (mL/kg)	1380
t _{1/2} (α) (h)	0.8
t _{1/2} (β) (h)	26
CL (mL/kg/h)	40

Escalating drug and light doses

CT26 colo tumors in BALB/c mice

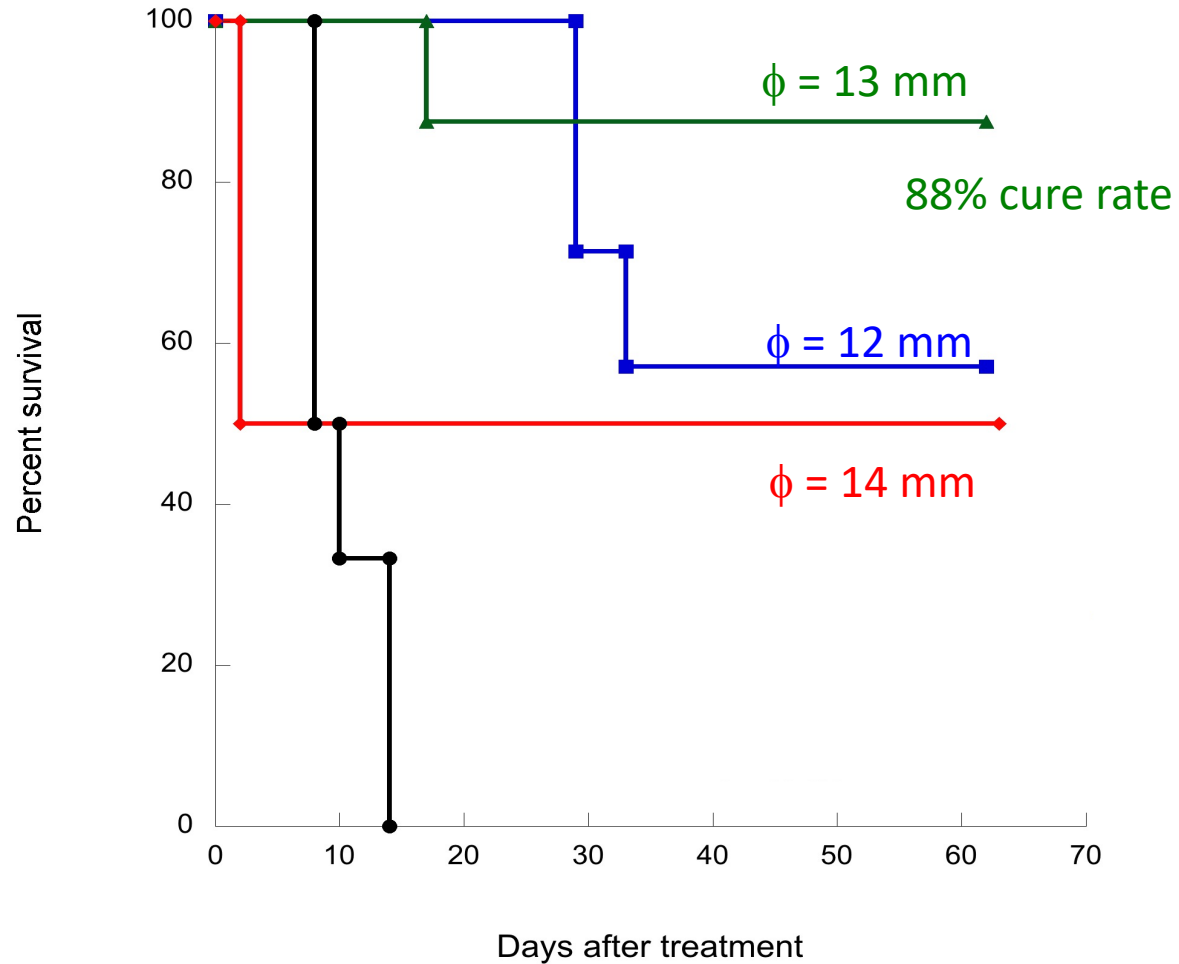
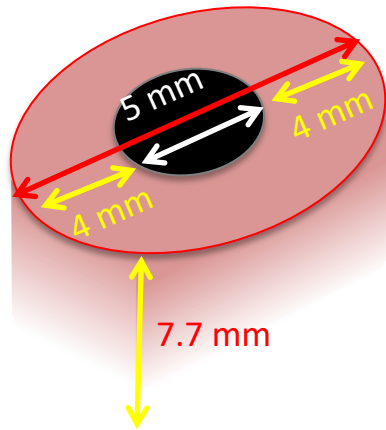
drug-to-light interval = 15 min



Optimizing tumor margins

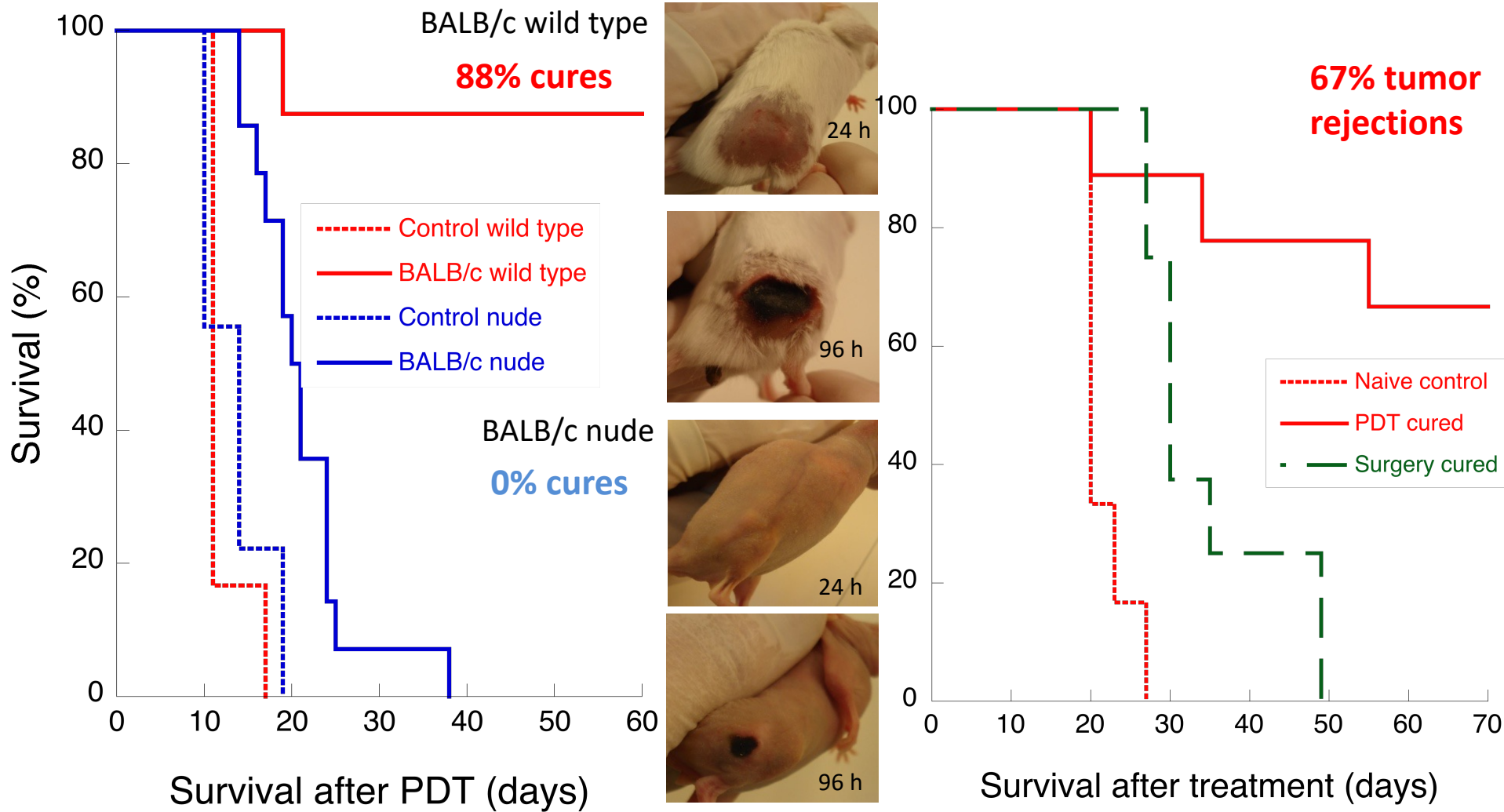
CT26 colo tumors in BALB/c mice

drug-to-light interval = **15 min**
0.75 mg/kg **$51 \pm 2 \text{ J/cm}^2$**



PDT triggers systemic anti-tumor immunity

PDT of BALB/C mice with CT26 colon carcinoma, 0.75mg/kg, 50 J/cm²

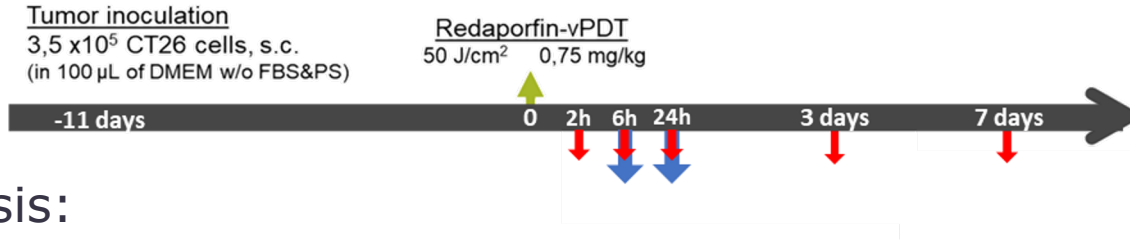


Immune competent mice respond strongly to redaporfin-PDT, with unprecedented cure rates

Cured mice acquire immune memory that rejects tumor cells more than 6 months after

Immune responses after vascular-PDT with redaporfin

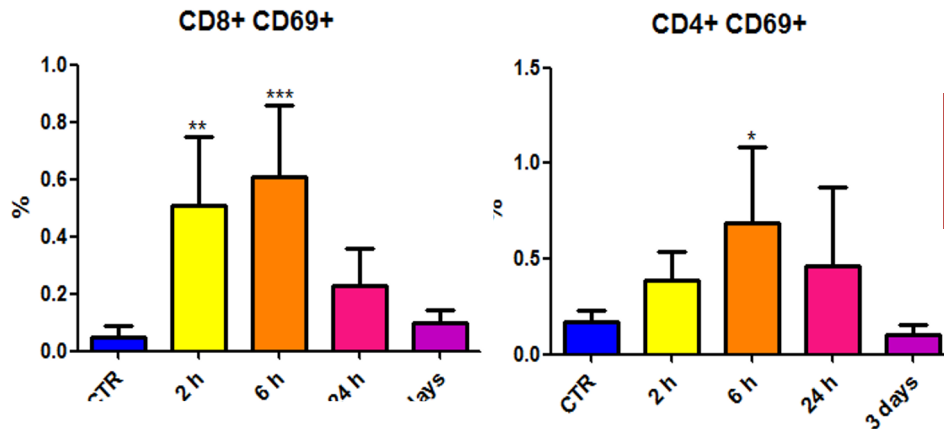
BALB/c Animal Model
CT26WT cell line



Blood analysis:

CD69⁺ T cells

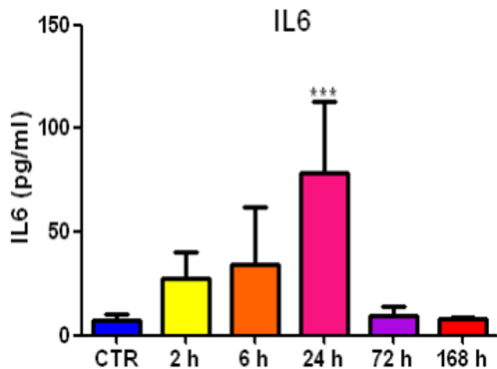
One-way ANOVA, n=5



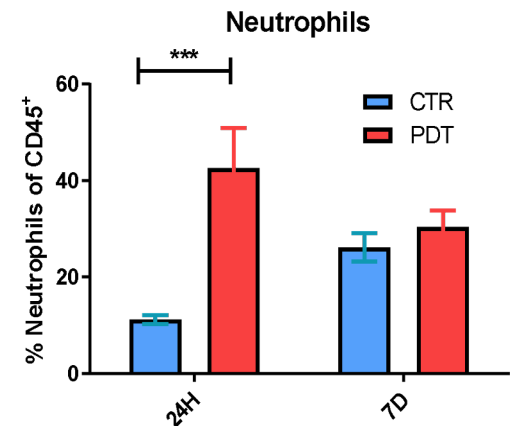
↑ of activated T cells 6h post PDT

IL-6 Cytokine

One-way ANOVA, n=5



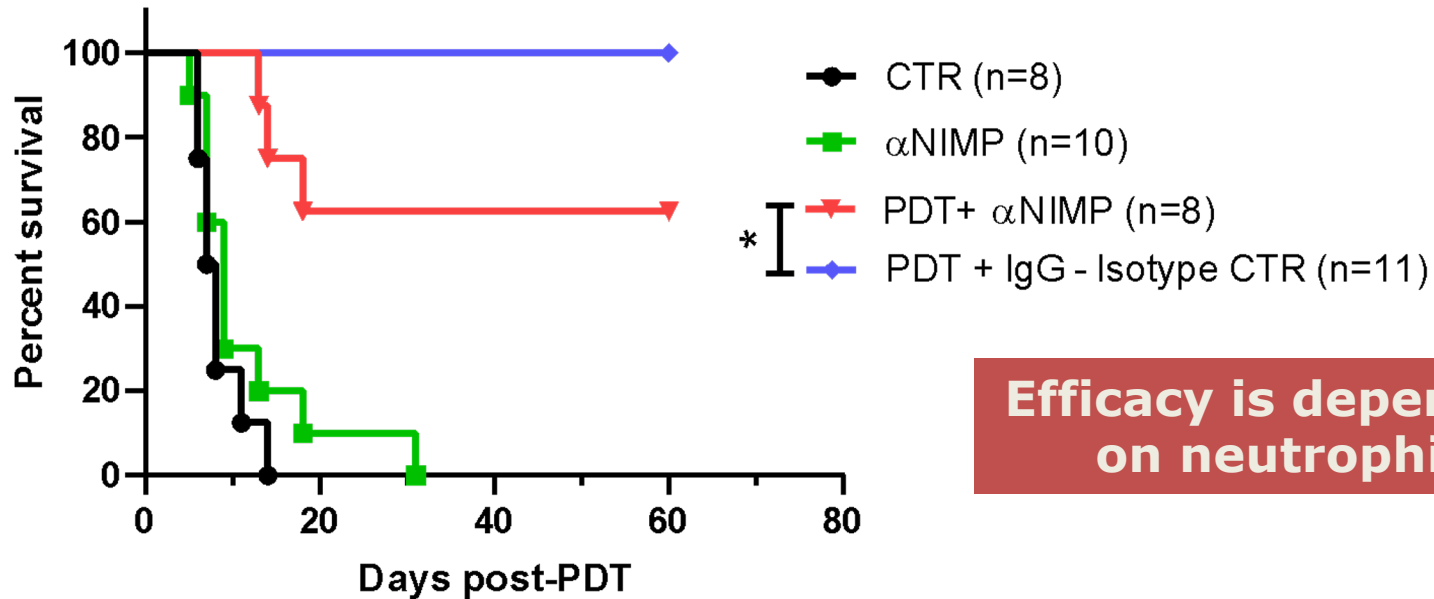
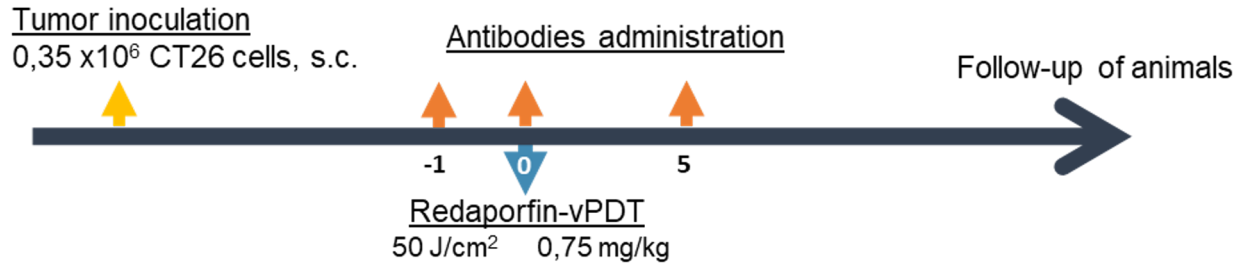
Neutrophilia
Induced 24h post-PDT



Immune responses after vascular-PDT with redaporfin

Selective Depletion of Neutrophils (mAb NIMP-R14)

BALB/c Animal Model
CT26WT cell line

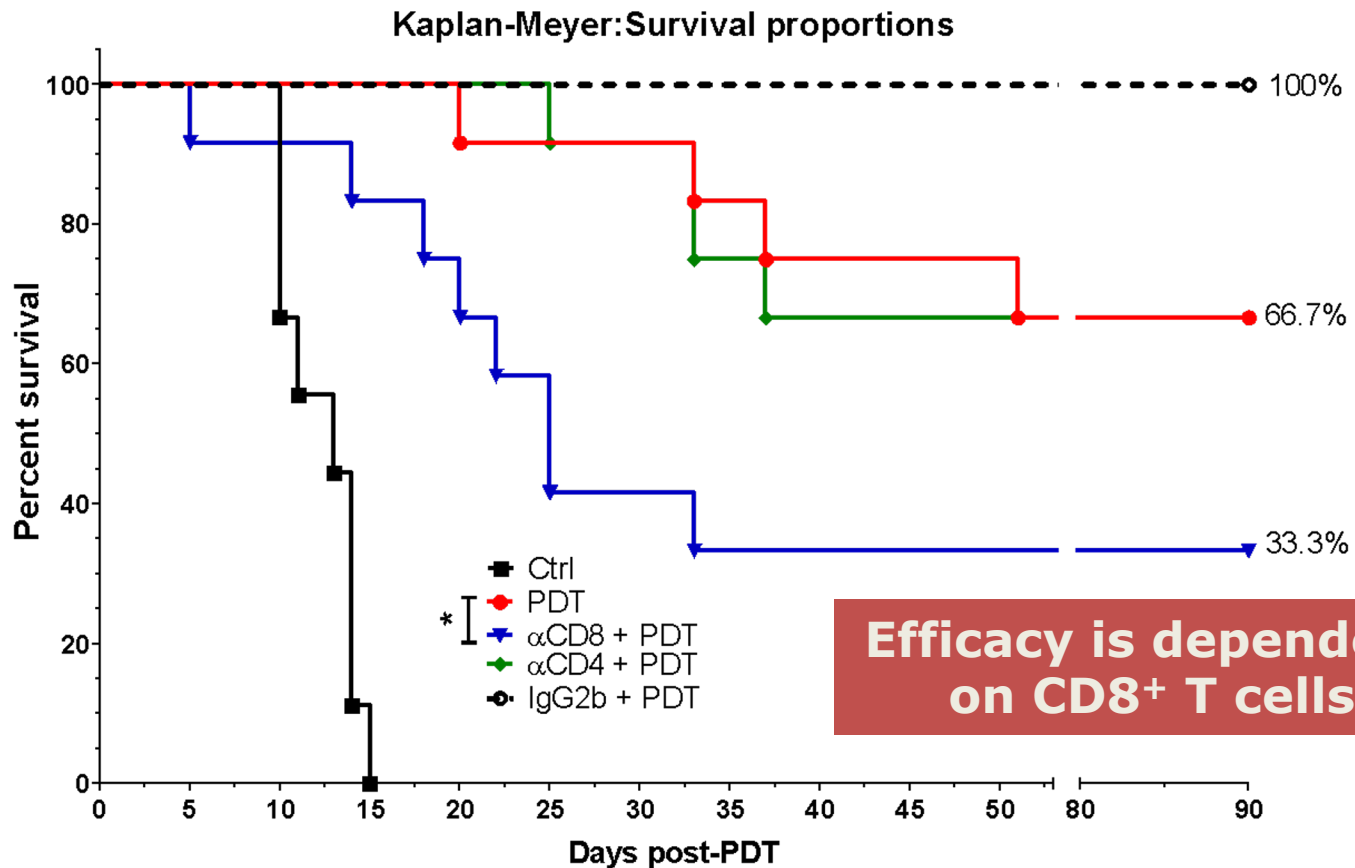


Efficacy is dependent on neutrophils

Immune responses after vascular-PDT with redaporfin

BALB/c Animal Model
CT26WT cell line

Selective depletion of **CD8+** or **CD4+** T cell populations



Redaporfin PDT Clinical Trial

Clinical Trial:
NCT02070432



Your wellness matters

- **Luzitin code:**
- LUZ11-CDU-001

- **ClinicalTrials.gov Identifier:**
- NCT02070432

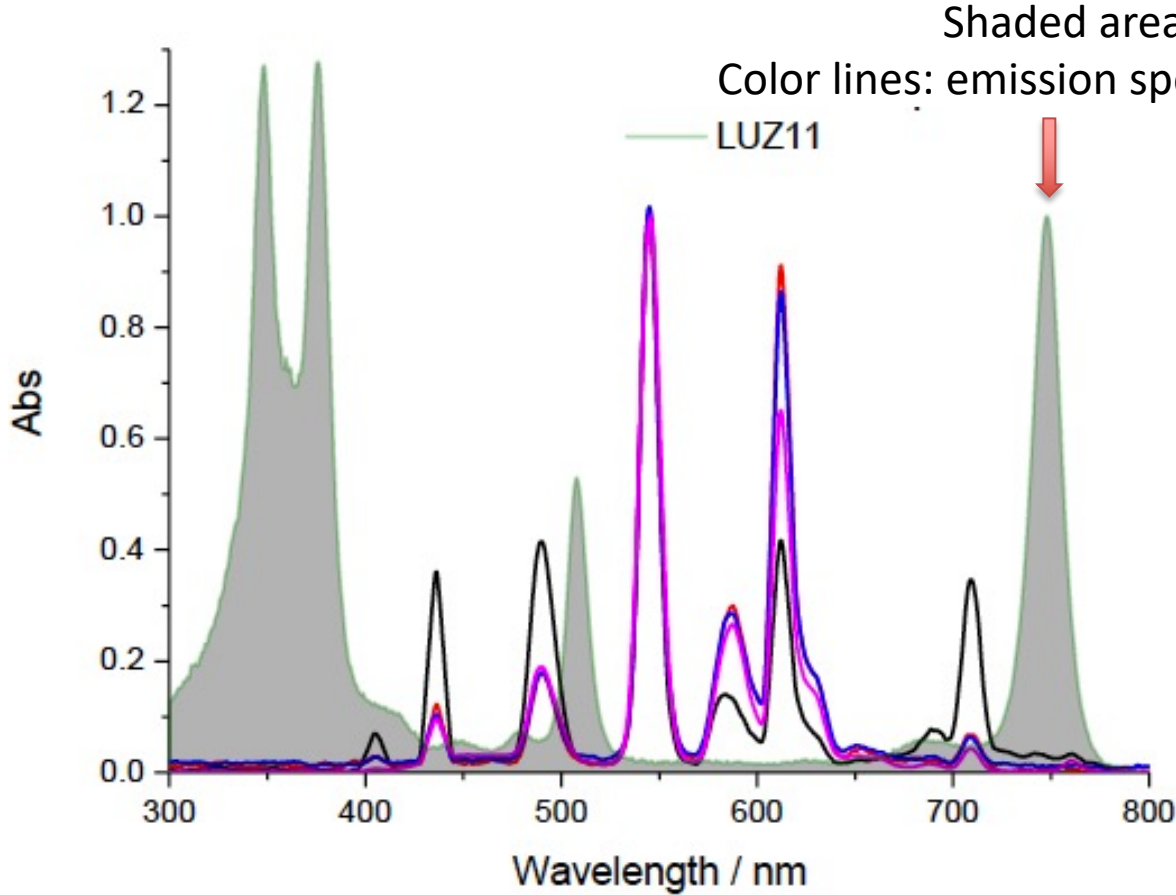
- **EudraCT Number:**
- 2013-003133-14

- **Study team**
- Clinical staff of the Portuguese Institute of Oncology – Porto operating at the Hospital CUF Porto's facilities
- PI: Lucio Lara-Santos, MD, PhD

Study title

An open-label study to investigate the tolerability, pharmacokinetics and antitumor effect following photodynamic therapy (PDT) with single-ascending doses of LUZ11 in patients with advanced head and neck cancer

Light



omiron
L A S E R A G E

Diode laser
749 nm, 1.5 W
Calibration port for microlens fiber
and for cylindrical diffuser



Redaporfin in Head & Neck Advanced Cancer

Clinical case: Man, 63 years, diagnosed JAN2012 with squamous cell carcinoma of the mouth floor
After chemotherapy, radiotherapy and surgery, proposed to palliative care APR2016
Referred to clinical trial, met inclusion criteria (Karnofsky performance status $\geq 60\%$)



P#13-PDT3-Bloco

Intravenous infusion of 0.75 mg/kg redaporfin

Sequential illumination of 4 areas

1st area illuminated 5 min after infusion for 6.4 min, then on to the 2nd area, and so on

Light dose 50 J/cm²

Total time for the procedure \approx 1 h

20SEP2016

26SEP2016

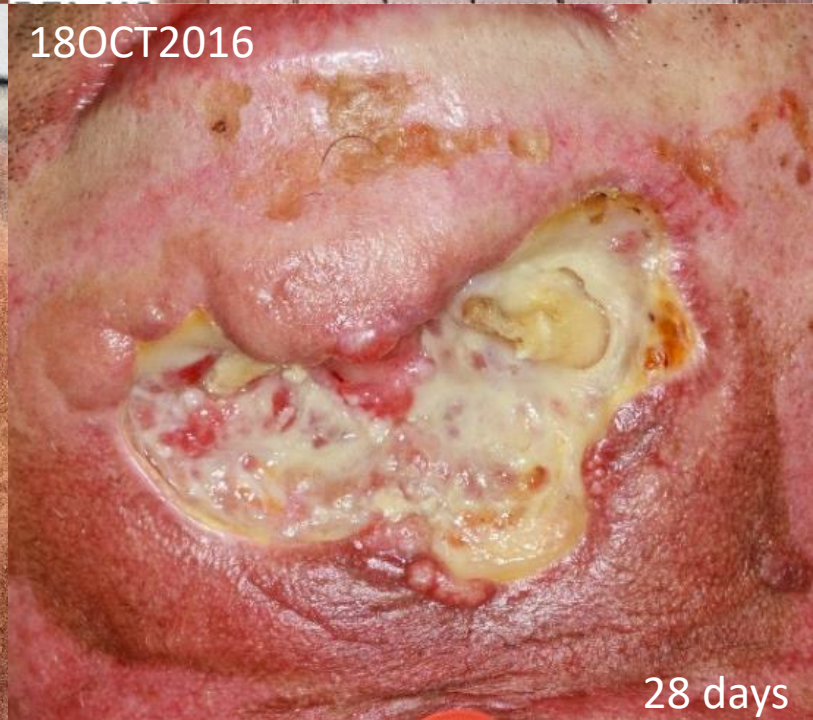
Reda
porfin

0.75 mg/kg

DLI = 5 – 40 min

Frontal
illumination

50 J/cm²



Redaporfin-PDT + nivolumab-immunotherapy

Patient re-started palliative chemotherapy

Failing to respond to chemotherapy, the patient started immunotherapy with nivolumab

September 2016

June 2017



One cycle of redaporfin-PDT + 3 cycles of nivolumab

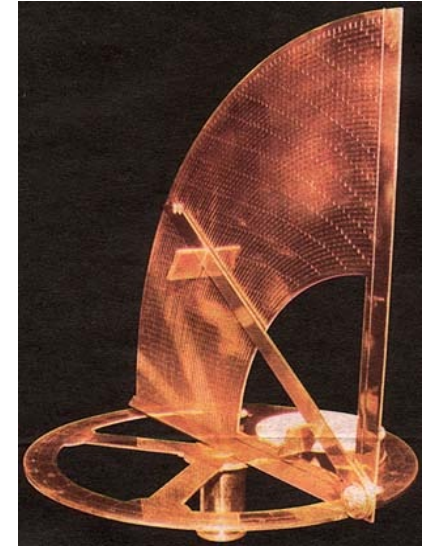
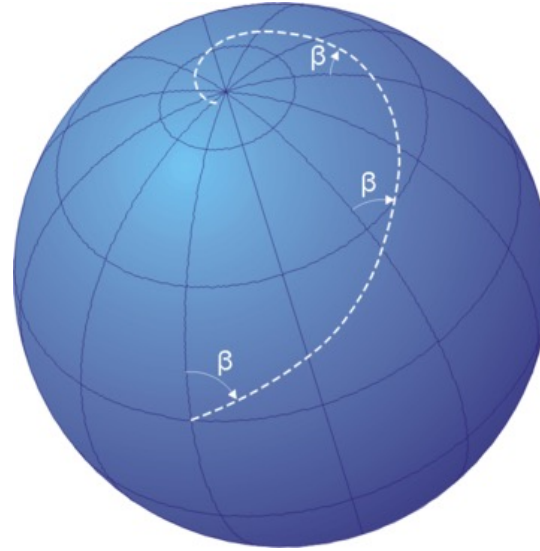
Nivolumab: anti-PD1 monoclonal antibody (checkpoint inhibitor)

Pedro Nunes (Petrus Nonius)

1502 - 1578

1537 – Treaty of the Sphere
Loxodrome

1542 – De Crepusculis
Nonius



“Manifesto he que **estes descobrimentos** de costas: ylhas e terras firmes: **não se fizeram indo a acertar** mas **partiam os nossos mareantes muy ensinados e providos de estromentos e regras de astrologia e geometria**, que sam as cousas de que os Cosmographos ham –de andar apercebidos”

... These discoveries ... were not made by trial-and-error ... Our sailors sailed well instructed and equipped, knowledgeable of the dictates of astronomy and geometry

1525 – Medical Doctor

1544 – Professor of Mathematics

1547 – Chief Cosmographer of the Kingdom

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Your wellness matters

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