

## Enhanced Absorption of Nasulin™, an Ultrarapid-Acting Intranasal Insulin Formulation, Using Single Nostril Administration in Normal Subjects

Robert Stote, M.D.,<sup>1</sup> Michael Miller, Ph.D.,<sup>2</sup> Thomas Marbury, M.D.,<sup>3</sup> Leon Shi, Ph.D.,<sup>2</sup>  
and Poul Strange, M.D., Ph.D.<sup>2</sup>

### Abstract

#### Background:

This pharmacokinetic (PK) study was designed to investigate the maximum intranasal insulin dose that could be achieved by repeated doses in a single nostril of a nasal spray of recombinant regular human insulin 1% in combination with cyclopentadecalactone (CPE-215) 2%, a compound that enhances absorption of molecules across mucous membranes (Nasulin™, CPEX Pharmaceuticals, Inc.).

#### Method:

A nine-period crossover study of 8 healthy, nonsmoking subjects (ages 18–50, body mass index <33 kg/m<sup>2</sup>, weight >70 kg) were studied. In a fasted state, subjects were randomly given 25, 50, and 75 U in a single nostril on the first day and randomly given 50, 75, and 100 U doses utilizing both nostrils on two subsequent days. After a 45-minute PK assessment, subjects were given a meal. To determine the mechanism of enhanced absorption in a single nostril, a second study utilizing 24 subjects under similar conditions received 25 U, placebo (P) that included CPE-215 plus 25 U, and 50 U in a single nostril.

#### Results:

Single nostril administration revealed enhanced absorption with maximum concentrations ( $C_{\max}$ ) of 13, 65, and 96  $\mu\text{U/ml}$  for the 25, 50, and 75 U doses, respectively. Dual nostril administration in two cohorts resulted in  $C_{\max}$  of 31/42, 65/52, and 88/79  $\mu\text{U/ml}$  for the 50, 75, and 100 U, respectively. In the second cohort,  $C_{\max}$  was 23, 19, 56  $\mu\text{U/ml}$  for the 25, P + 25, and 50 U doses, respectively.

#### Conclusions:

Repeated dosing in a single nostril resulted in enhanced absorption; this was not due to the increased CPE-215 but to the increased insulin administered.

*J Diabetes Sci Technol* 2011;5(1):113-119

**Author Affiliations:** <sup>1</sup>CPEX Pharmaceuticals, Inc., Exeter, NH; <sup>2</sup>Integrated Medical Development, Princeton Junction, NJ; and <sup>3</sup>Orlando Clinical Research Center, Orlando, Florida

**Abbreviations:** (AUC) area under the curve, (BMI) body mass index, ( $C_{\max}$ ) maximum concentration, (CPE-215) cyclopentadecalactone, (ORMC) Orlando Regional Medical Center, (P) placebo, (PK) pharmacokinetic, (SE) standard error of the mean, ( $T_{\max}$ ) time to maximum concentration, (U) unit

**Keywords:** CPE-215, cyclopentadecalactone, intranasal insulin, Nasulin, ultrarapid time-action profile

**Corresponding Author:** Robert M. Stote, M.D., CPEX Pharmaceuticals, Inc., 2 Holland Way, Exeter, NH 03833; email address [rstote@cpexpharm.com](mailto:rstote@cpexpharm.com)