

Pharmacokinetic (PK) and Pharmacodynamic (PD) Implications of Diurnal Variation of Gastric Emptying and Small Intestinal Transit Time for Quinidine Mechanistic Simulation

- Circadian variability influences the pharmacokinetics (PK) and pharmacodynamics (PD) of certain drugs [1-4].
- Our objective was to validate methodology simulating a QT change for orally administered quinidine using mechanistic methods - Simcyp Simulator for PK and Cardiac Safety Simulator (CSS) for PD - accounting for circadian variability.

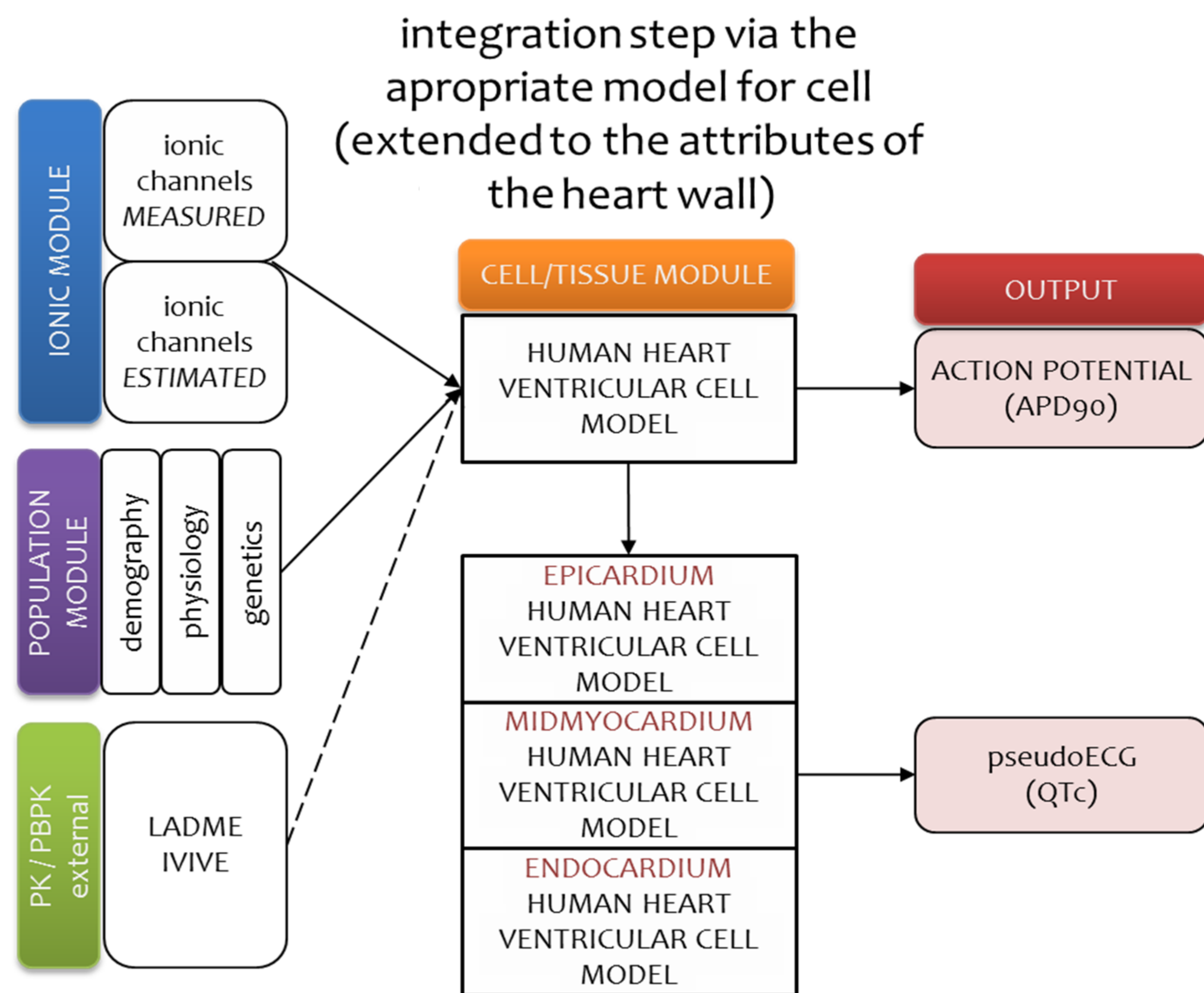


Table 2. Cardiac Safety Simulator (CSS) input data (*in vitro* ionic currents inhibition).

Ionic current	Quinidine [IC ₅₀]/n	3-OH quinidine [IC ₅₀]/n
I _{Kr}	0.82/1	1.19/1*
I _{Ks}	44/1	39.67/1*
I _{Ca}	10/1	26.38/1*
I _{Na}	16.6/1	-

* ToxComp built-in QSAR model predictions

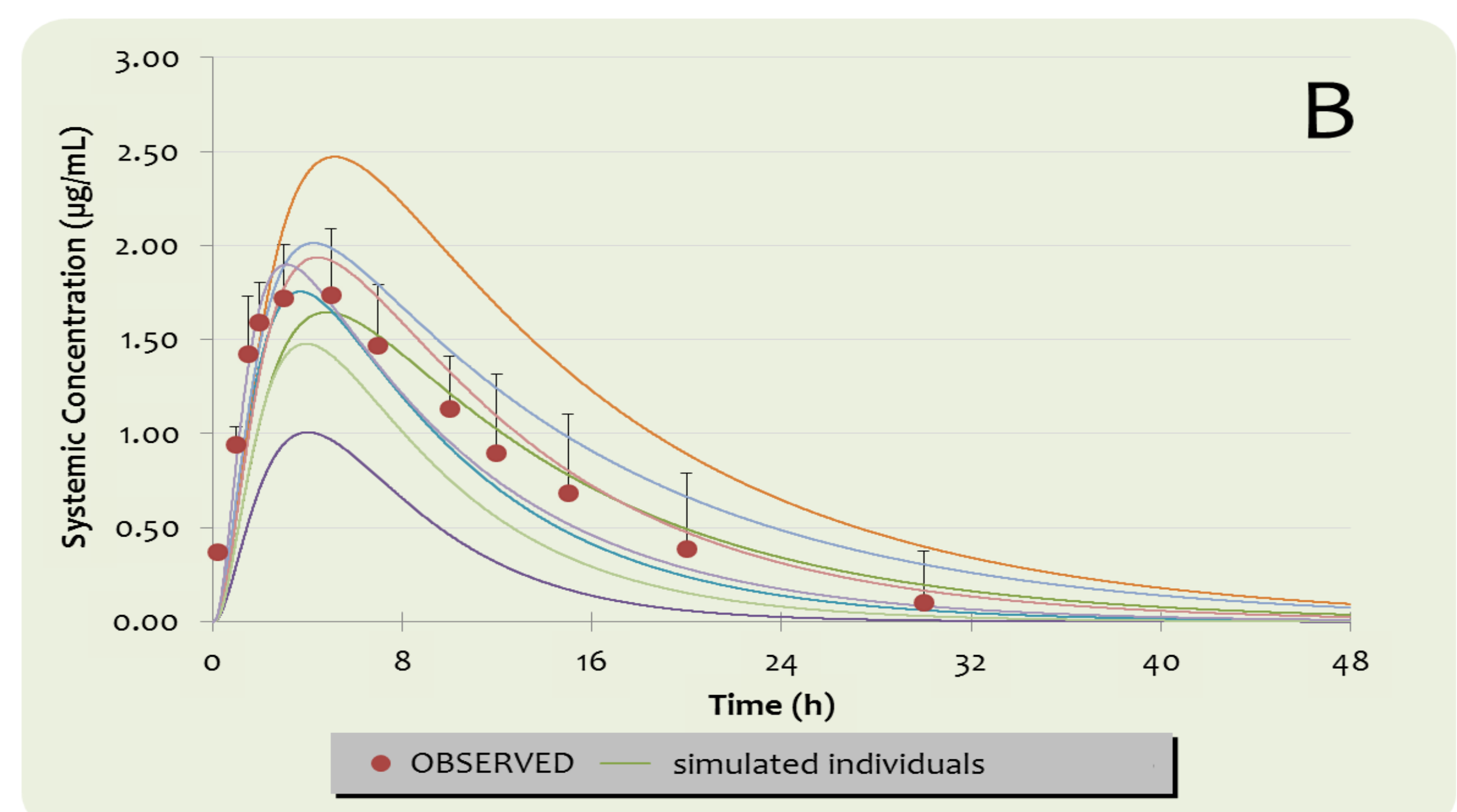
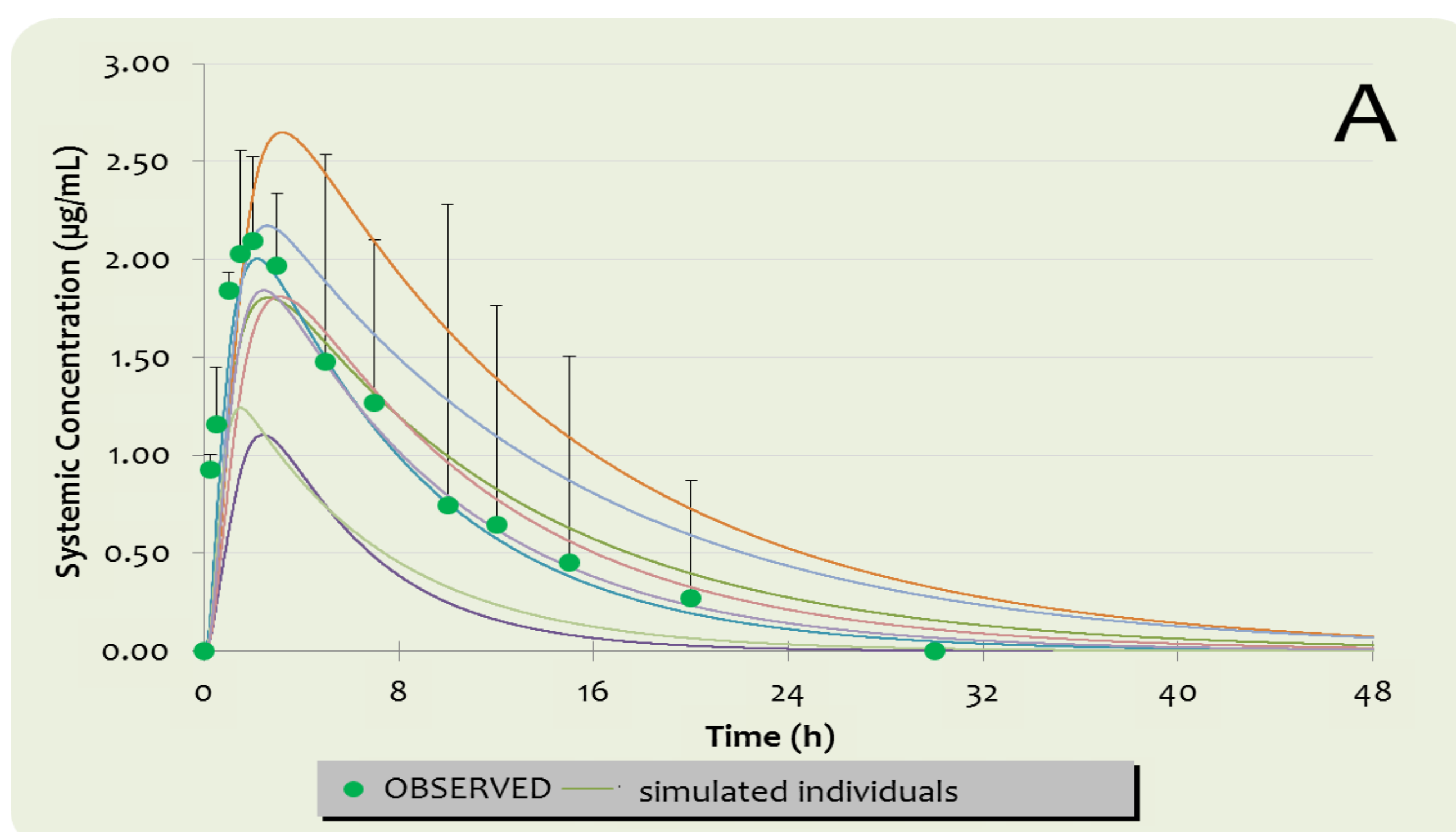


Figure 1. Observed (average \pm SD) and Simcyp predicted (8 individuals) quinidine plasma concentration after 10 :00(A) and 22:00 (B) single oral dose.

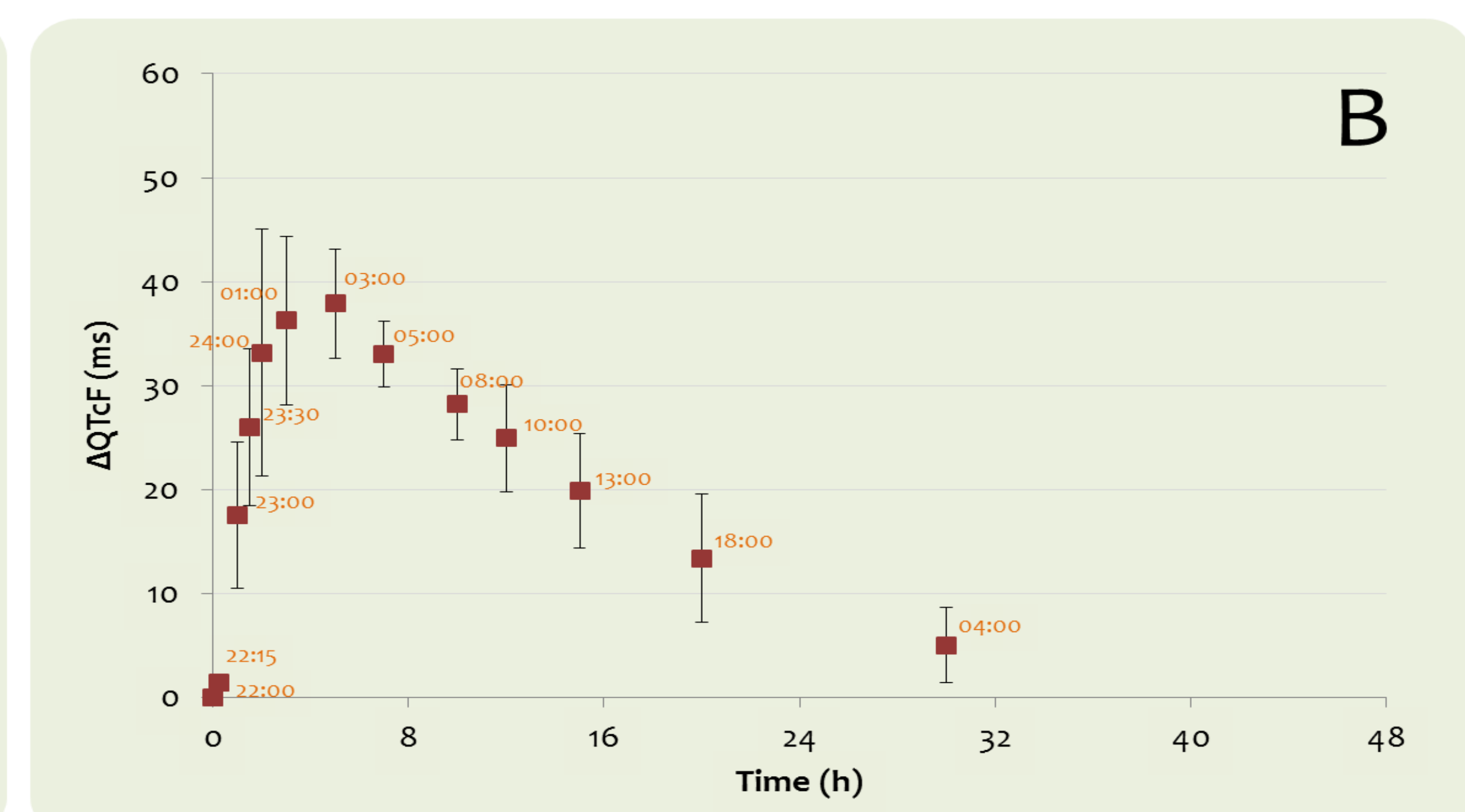
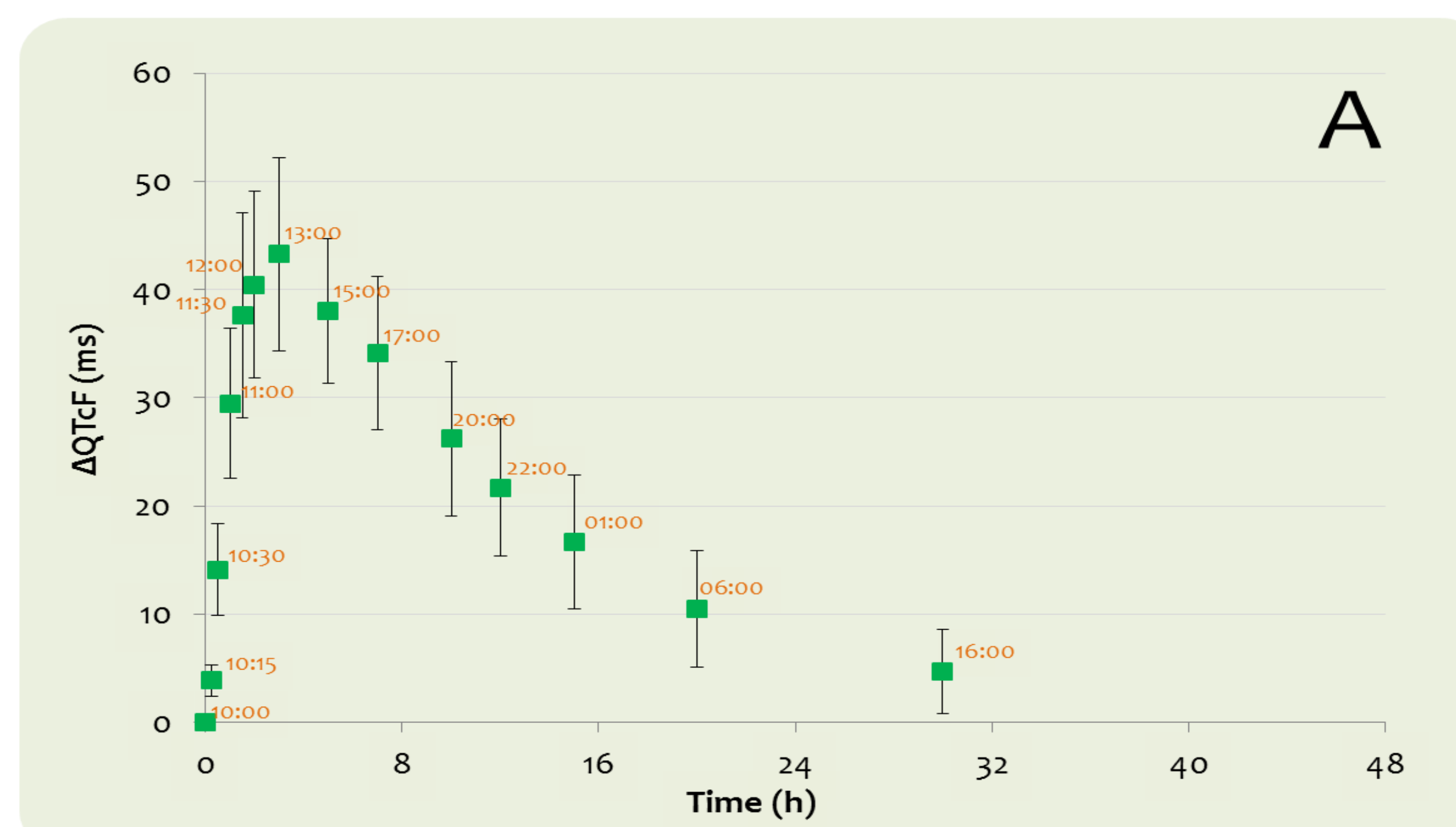


Figure 2. Cardiac Safety Simulator predicted (average \pm SD) quinidine triggered QTc change after 10 am (A) and 10 pm (B) single oral dose.

- Predicted Δ QTcF values were concentration dependent, followed circadian rhythms and maximum population values for 22:00 and 10:00 scenarios were 38 (03:00) and 43 (13:00) ms respectively.
- Mechanistic *in vitro-in vivo* extrapolation (IVIVE) incorporates knowledge determining circadian PK / PD variability using *in vitro* data on drugs and may assist in clinical study design for drugs affected by chronobiology.