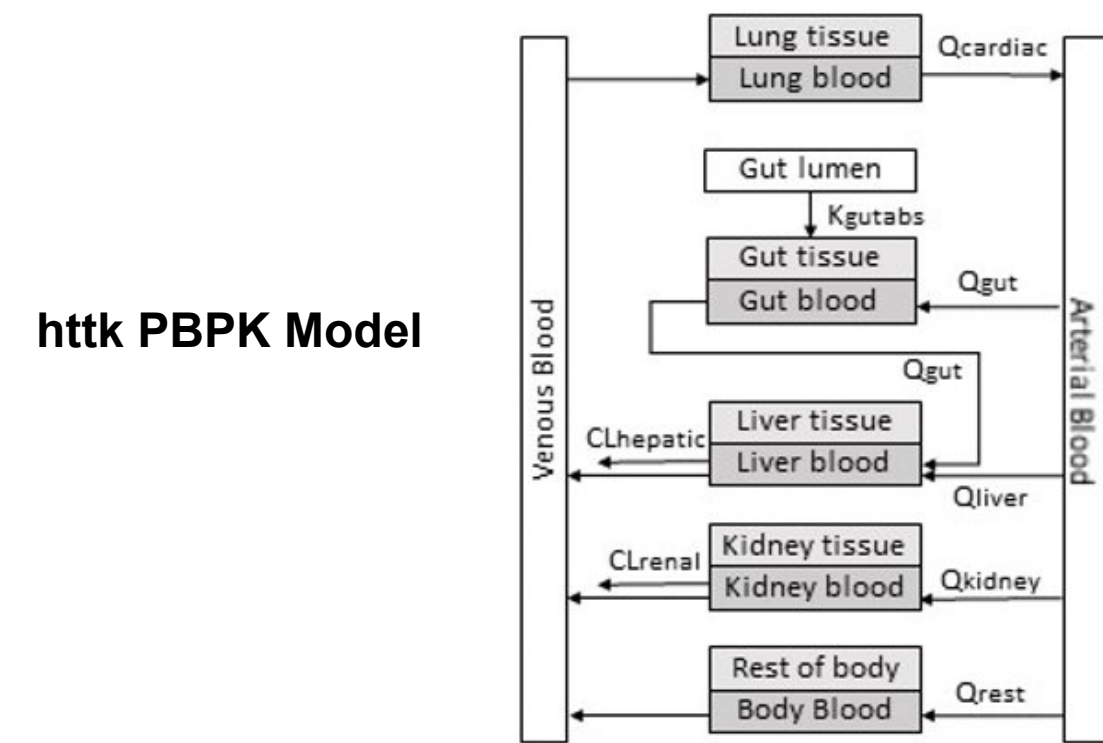


Expanding PBPK Modeling to Predict Chemical Distribution in Brain and Adipose Tissues

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Introduction

- Physiologically based pharmacokinetic (PBPK) models represent absorption, distribution, metabolism, and excretion (ADME) processes to help predict concentrations of chemicals in relevant tissues.
- These models are based on mathematical representations that combine chemical and physiological data using systems of ordinary differential equations.
- Here we build upon the existing generic PBPK model included in the U.S. Environmental Protection Agency's (EPA's) htkk package (version 2.2.2) [1] to estimate chemical concentrations in brain and adipose compartments of the body. The htkk R package is open-source and can accommodate integration of new models.
- The Integrated Chemical Environment (ICE: <https://ice.ntp.niehs.nih.gov/>) utilizes existing htkk R packages in its PBPK and In Vitro to In Vivo Extrapolation (IVIVE) tools to predict chemical distribution. After testing and validation, the new model compartments will be integrated into these ICE tools, allowing users to predict adipose and brain tissue concentrations.



$$\frac{dA_i}{dt} = Q_i \left([C_{art}] - \frac{A_i}{(P_i \cdot V_i)} \right) - C_i \cdot f_u \cdot CL_i$$

A_i : amount in tissue i ;
 Q_i : blood flow to tissue i ;
 V_i : volume of tissue i ;
 $[C_{art}]$: concentration in arterial blood;
 C_i : metabolic clearance in tissue i ;
 P_i : the tissue to plasma partition coefficient;
 f_u : fraction of compound unbound in blood

Conclusions & Future Directions

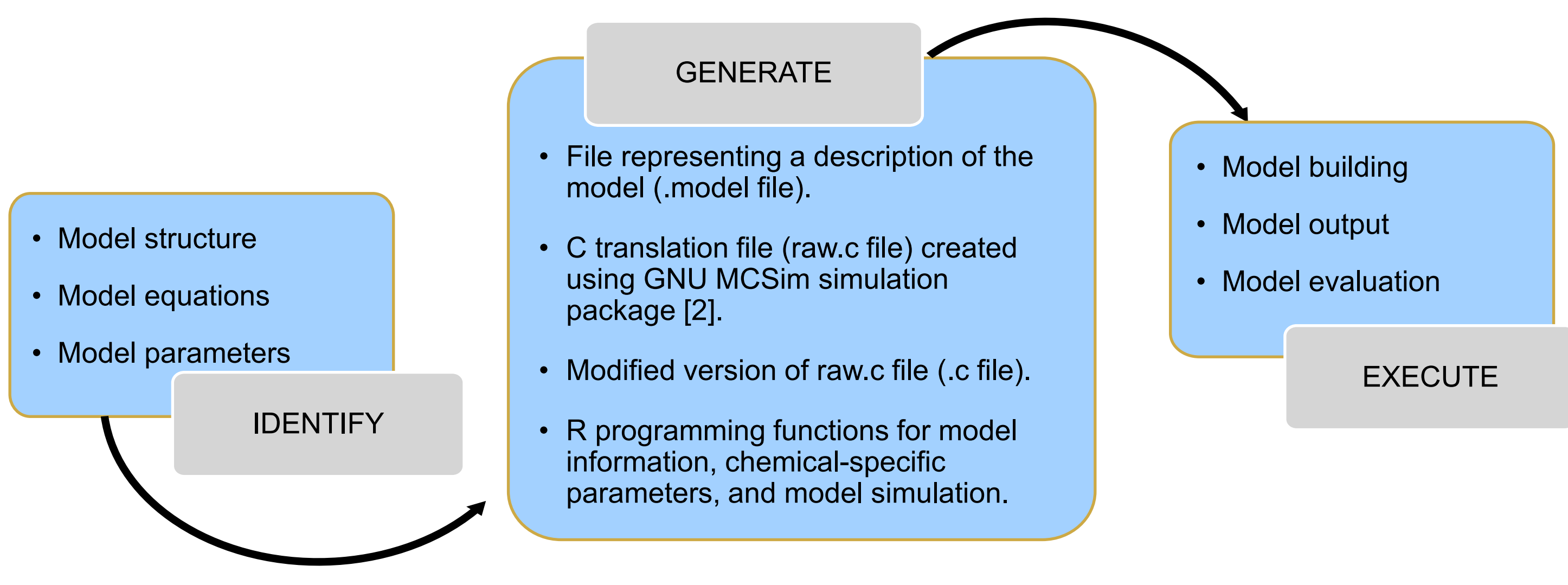
Conclusions:

- By expanding the existing open-source PBPK modeling approach, this work can refine the quantification of chemical distribution in specific toxicologically relevant body compartments for human and other species.
- The incorporation of a brain compartment can support the assessment of drug efficacy and potential to induce neurotoxicity. Determining the concentration of chemicals distributed to adipose tissue can provide valuable information on a chemical's likelihood of bioaccumulation.
- The model outputs time series dynamic concentration graphs representing chemical distribution and disposition in these compartments.

Future Directions:

- Perform comparative evaluations based on the output from these models and experimental ADME data identified in the literature.
- Use the same workflow to develop a model with complex brain compartments incorporating the blood-brain barrier, cerebrospinal fluid circulation, and active transporters.
- Incorporate the fully developed and validated models into the htkk R package and ICE's PBPK and IVIVE tools.

Workflow: Add New Model to htkk Package



Incorporation of Adipose Compartment

- As a storage compartment for lipophilic chemicals, adipose tissue affects distribution of a variety of chemicals, particularly persistent organic pollutants, and can act as a source of chronic internal exposure.
- We incorporated these physiological parameters specific for adipose tissue:

Parameter	Description	Value	Source
Q _{adiposef}	Fraction of cardiac output flowing to the adipose tissue	0.05	[4]
V _{adiposec}	Volume fraction of the adipose tissue per kg body weight	0.21	[1, 4]

Equation for adipose:

$$Q_{adipose} = Q_{cardiac} \cdot Q_{adiposef}$$

$$V_{adipose} = V_{adiposec} \cdot BW$$

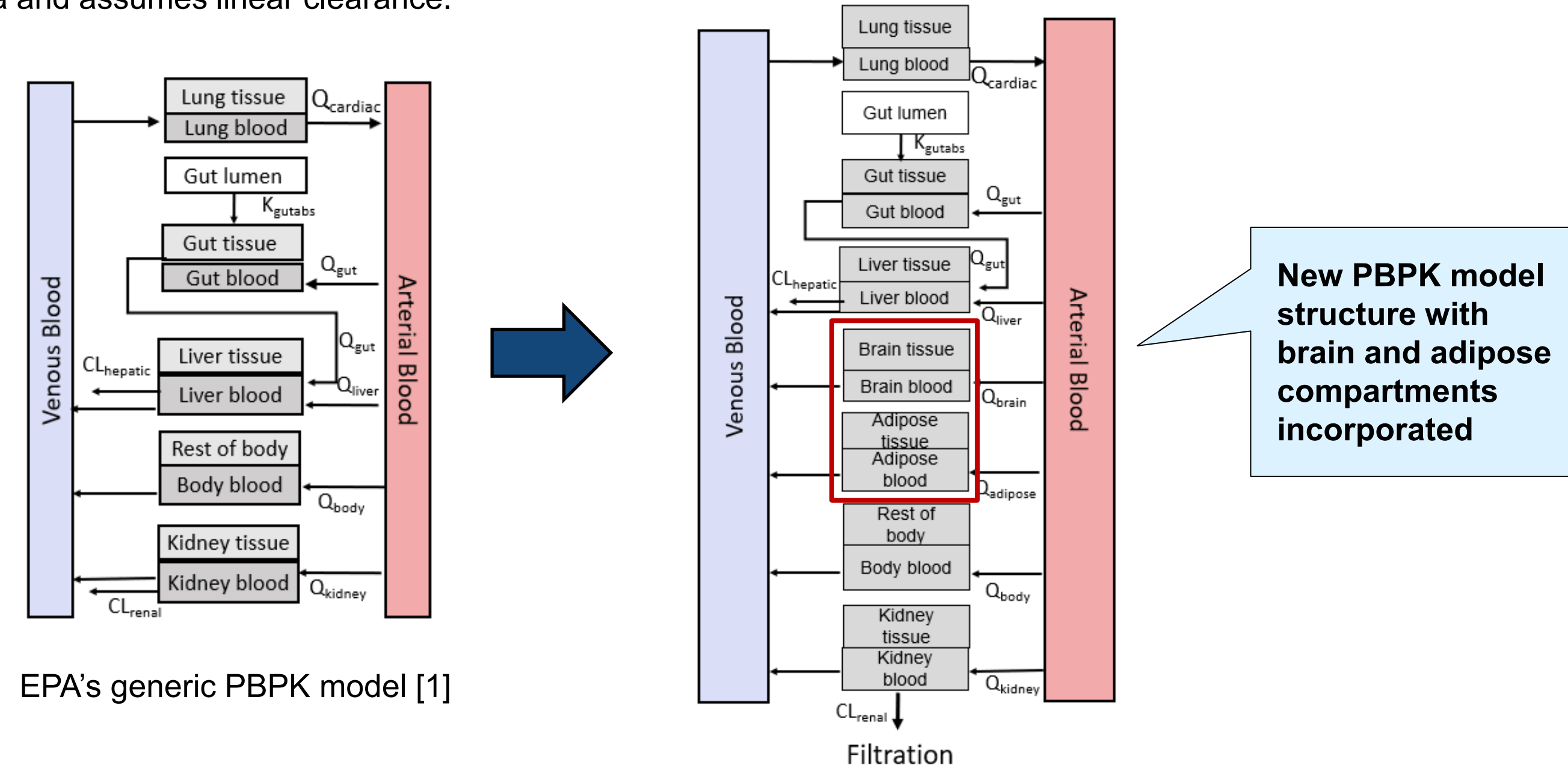
$$\frac{dA_{adipose}}{dt} = Q_{adipose} \left(\frac{A_{art}}{V_{art}} - \frac{A_{adipose}}{V_{adipose}} \cdot \frac{R_{blood2plasma} \cdot f_{up}}{K_{adipose2pu}} \right)$$

$A_{adipose}$: chemical amount in adipose
 A_{art} : chemical amount in arterial compartment
 BW : body weight
 f_{up} : unbound fraction in plasma
 $K_{adipose2pu}$: adipose to plasma partition coefficient
 $Q_{adipose}$: blood flow to adipose

$Q_{adiposef}$: fraction of blood flow to adipose out of total cardiac output
 $Q_{cardiac}$: total cardiac output
 $R_{blood2plasma}$: blood to plasma concentration ratio
 V_{art} : volume of arterial compartment
 $V_{adipose}$: adipose volume

PBPK Model Structure

- We built on an existing generalized model from the htkk R package that facilitates parameterization with limited data and assumes linear clearance.



PBPK Model Output

- We chose acetaminophen as the test chemical for the brain compartment because it rapidly enters the brain by passive permeability, without the need for a transporter, and there is extensive animal and human data [5].
- We chose bisphenol A as the test chemical for the adipose compartment. Bisphenol A is a lipophilic chemical that accumulates in human tissues, which can contribute to development of health issues like type 2 diabetes [6, 7]. Identifying the concentration-time profile of this chemical in adipose tissue provides information on its pharmacokinetic disposition.
- Results of a test of our models with these chemicals are shown below.

C_{max} (μM) and T_{max} (hours) in the Compartments of Interest

Model	Chemical	C _{max} , μM			T _{max} , Hours		
		Rest of Body*	Brain	Adipose	Rest of Body*	Brain	Adipose
Solve_pbtck	Acetaminophen	5.1	-	-	1.5	-	-
Brain + Adipose	Acetaminophen	5.5	6.1	4.2	1.5	1	2.5
Solve_pbtck	Bisphenol A	4	-	-	4	-	-
Brain + Adipose	Bisphenol A	4.5	7.4	2.7	4	1.5	12

Dosing Regimen
 Daily Dose = 1 mg/kg
 Days = 1
 Doses Per Day = 1
 Species = Human

C_{max}: maximum concentration; T_{max}: time to C_{max}
 Rest of Body for Brain and Adipose models excludes brain and adipose tissues.

Incorporation of Brain Compartment

- To help assess specific toxicological effects such as neurotoxicity, models need to predict chemical distribution to compartments like the brain that have complex and often tissue-specific structural features and may be sensitive to chemical exposures.
- A brain compartment can be simple or complex depending on whether the model incorporates the blood-brain barrier, brain-specific importers and exporters, and drainage via the cerebrospinal fluid.
- We created a simple perfusion-limited brain compartment model based on the generic PBPK model provided by EPA's htkk R package.
- We incorporated these physiological parameters specific for brain tissue:

Parameter	Description	Value	Source
Q _{brainf}	Fraction of cardiac output flowing to the brain tissue	0.125	[1]
V _{brainc}	Volume fraction of the brain tissue per kg body weight	0.02	[1,3]

Equation for brain:

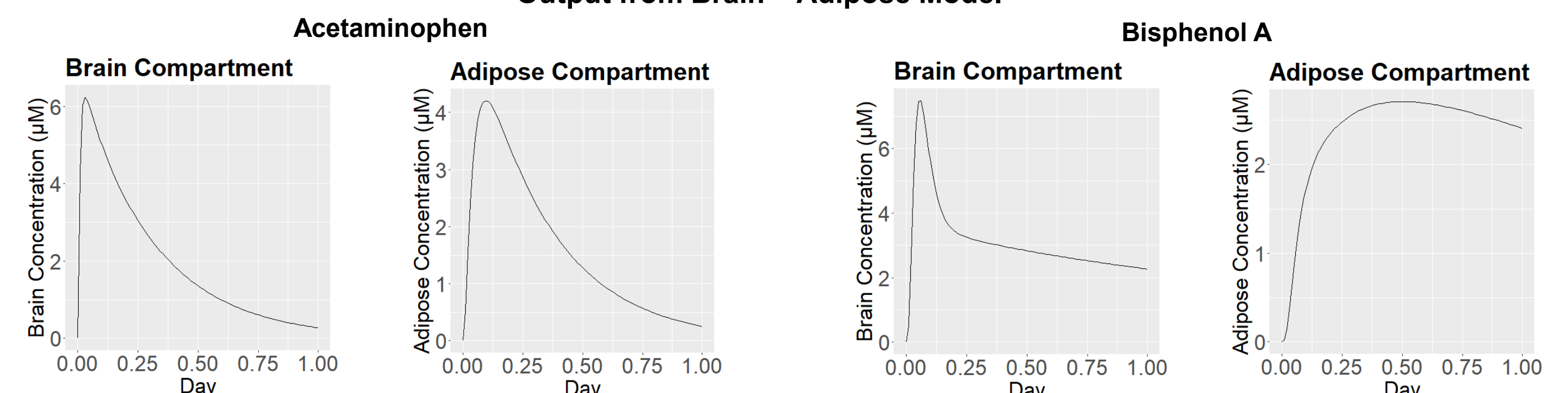
$$Q_{brain} = Q_{cardiac} \cdot Q_{brainf}$$

$$V_{brain} = V_{brainc} \cdot BW$$

$$\frac{dA_{brain}}{dt} = Q_{brain} \left(\frac{A_{art}}{V_{art}} - \frac{A_{brain}}{V_{brain}} \cdot \frac{R_{blood2plasma} \cdot f_{up}}{K_{brain2pu}} \right)$$

A_{art} : chemical amount in arterial compartment
 A_{brain} : chemical amount in brain
 BW : body weight
 f_{up} : unbound fraction in plasma
 $K_{brain2pu}$: brain to plasma partition coefficient
 Q_{brain} : blood flow to brain
 Q_{brainf} : fraction of blood flow to brain out of total cardiac output
 $Q_{cardiac}$: total cardiac output
 $R_{blood2plasma}$: blood to plasma concentration ratio
 V_{art} : volume of arterial compartment
 V_{brain} : brain volume

Output from Brain + Adipose Model



- Expected accumulation in adipose compartments was observed for bisphenol A but not for acetaminophen. Literature findings tends to support these predictions for acetaminophen and bisphenol A [5, 8].
- Compared to the generic pbtck model in the htkk package, the new model was able to predict the dynamic distribution to brain and adipose compartments. This helps create a foundation for further refined pharmacokinetic modeling.

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References

- Pearce RG et al. 2017. J Stat Software 79(4):1-26. <https://doi.org/10.18637/jss.v079.i04>.
- Bois F. 2009. Bioinformatics 25(11):1453-1454. <https://doi.org/10.1093/bioinformatics/btp162>.
- Dumas-Campagna J et al. 2014. Inh Toxicol 26(2):59-69. <https://doi.org/10.3109/08958378.2013.853714>.
- Clewell RA, Clewell HJ. 2008. Reg Toxicol Pharmacol 50(1):129-143. <https://doi.org/10.1016/j.yrtph.2007.10.012>.
- Singla NK et al. 2012. Pain Pract 12(7):523-532. <https://doi.org/10.1111/j.1533-2500.2012.00556.x>.
- Ahmed F et al. 2020. Toxicology 445:152600. <https://doi.org/10.1016/j.tox.2020.152600>.
- Cimmino I et al. 2020. Int J Mol Sci 21(16):5761. <https://doi.org/10.3390/ijms21165761>.
- Fernandez MF et al. 2007. Reprod Toxicol 24(2):259-264. <https://doi.org/10.1016/j.reprotox.2007.06.007>.