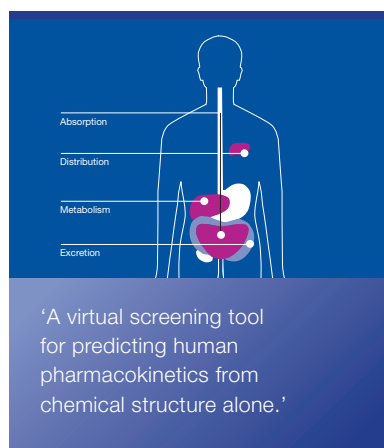


## In Silico Prediction

# chemPK™ V.2 - Human PK Prediction Directly from Chemical Structure

## Background Information



- Predicts key human oral and intravenous pharmacokinetic parameters directly from structure.
- No *in vitro* ADME or physicochemical data requirements.
- Save money and time by allowing pharmacokinetics to be characterised virtually (no synthesis required).
- Provides early stage filter for directing chemistry and prioritising screening.
- Superior approach which uses PBPK model optimised from human clinical (*in vivo*) data.

### chemPK™ Input Requirements

- Chemical structure, e.g., SMILES, mol or sdf.
- Dosing regimen.

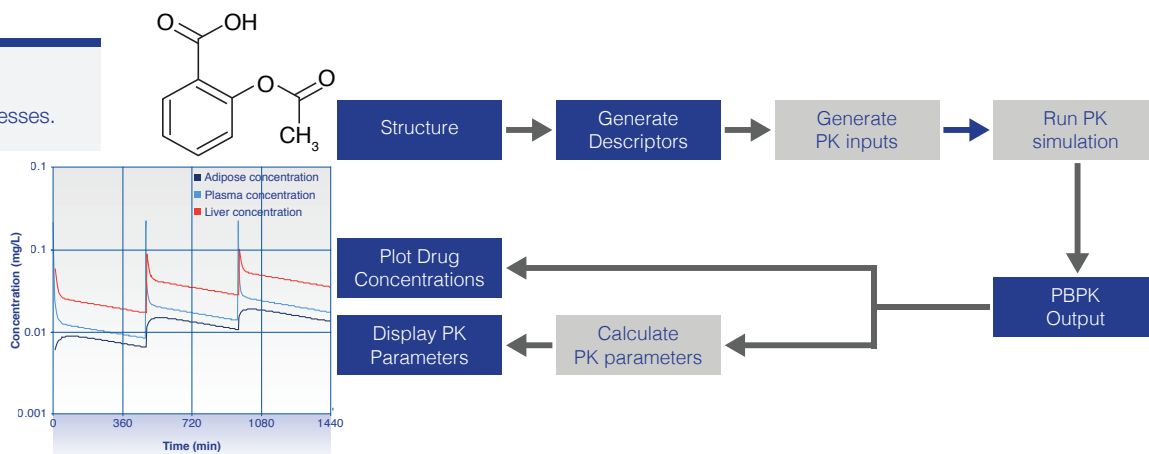
### chemPK™ Data Delivery

- Predicted pharmacokinetic parameters following oral and intravenous dosing regimens (for single and repeat doses).
- Predicted time concentrations for plasma (or blood) and all tissues/organs with graphical representation.
- Predicted time series hepatic metabolism, renal elimination and faecal elimination.

### How does it work?

chemPK™ utilises a KNIME workflow-based approach which executes the processes illustrated in Figure 1.

**Figure 1**  
chemPK™ workflow processes.



**'KNIME can be downloaded easily and for free.** Cyprotex can then provide the bespoke KNIME nodes (chemPK™) for the workflow including Generate PK inputs, Run PK simulation and Calculate PK parameters nodes'

**The Generate PK input node includes calculations of the following parameters:**

- 10 Tissue partition coefficients ( $K_p$ ) trained on *in vivo* data
  - Adipose, brain, heart, gut wall, kidney, liver, lung, muscle and skin.
  - Tissue partition coefficient for the remaining tissues and organs that are not explicitly represented in the PBPK model.
- Rate of renal clearance trained using *in vivo* plasma and urine profiles following intravenous (bolus and infusion), oral and subcutaneous dosing.
- Rate of metabolism in the liver trained using intravenous *in vivo* profiles (bolus and infusion).
- Rate of absorption from the gastrointestinal tract trained using oral *in vivo* profiles (rapid release).

**Table 1**

Intravenous PK parameters for an independent test set of 62 compounds.

PK parameter	MFE <sup>a</sup>	Rank
Total clearance (CL)	2.54	0.51
Half-life ( $t_{1/2}$ )	2.16	0.52
Mean time a molecule resides in the body (MRT)	2.26	0.47
Volume of distribution (V)	2.08	0.71
Volume of distribution at steady-state conditions ( $V_{ss}$ )	2.03	0.69

<sup>a</sup> Mean fold error

**Table 2**

Oral PK parameters for an independent test set of 35 compounds<sup>a</sup>.

PK parameter	MFE <sup>b</sup>	Rank
Highest drug concentration in plasma ( $C_{max}$ )	3.30	0.72
Time at which highest concentration occurs ( $t_{max}$ )	1.73	0.17
Area under the plasma drug concentration-time curve ( $AUC_{last}$ )	3.46	0.71

<sup>a</sup> MW < 450 g/mol

<sup>b</sup> Mean fold error

**The Run PK simulation node:**

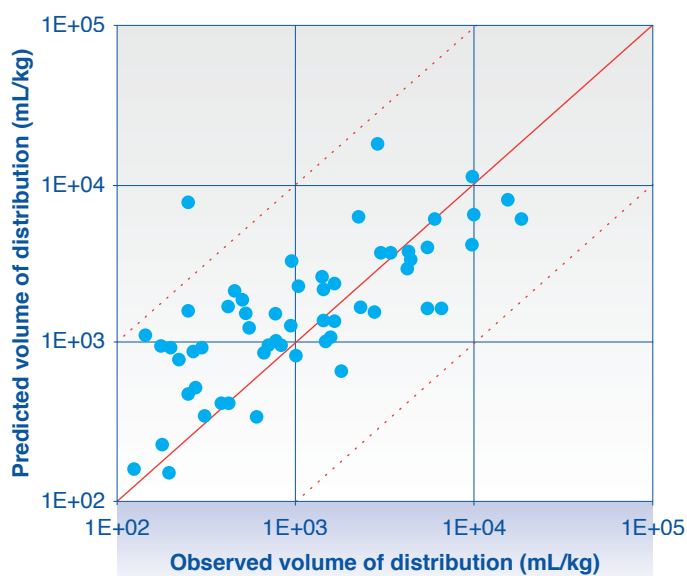
- Executes the PBPK model with intravenous and oral dosing including a repeat dose option.
- Requires the parameters generated by the Generate PK inputs node.
- Output is in KNIME table (data frame) format that can be processed in any way required, e.g.:
  - Converted to XLS
  - Converted to CSV
  - Plotted using Python, R, etc.
  - Written to a database using a connector

**The Calculate PK parameters node reports the following predicted PK parameters:**

- CL,  $t_{1/2}$ , MRT, V,  $V_{ss}$ ,  $AUC_{\infty}$  and fraction absorbed to the last timepoint.
- $C_{max}$ ,  $t_{max}$  and  $AUC_{last}$  for all tissues/organs.

**Figure 2**

Plot of the predicted volume of distribution versus the observed volume of distribution for a test set of 62 compounds.



**We are looking for partners with whom we can further develop the chemPK™ model. If you would like to be involved then please get in touch.**

**Contact enquiries@cyprotex.com for a demonstration.**