

# Administrarea transcutanata a medicamentelor: o abordare microtehnologica

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# Cercetarea stiintifica in Singapore

- Tinta: Industrie condusa de R &D
- Economie bazata in principal pe: Industria petroliera, Banking, Santier naval, *Microelectronica*, *Biofarmaceutica*
- Nr personalului angajat in cercetare a crescut de la 12000 in 2001 la 25.000 in 2009 (si populatia a crescut de la 3.5 mil in 2001 la 5 mil in 2010)
- Investitiile anuale in cercetare: 2 miliarde de Euro
- Agentia de stiinta divizata in doua ramuri: inginerie (microtechnologie) si biomedicala.
- Invatamintul universitar este axat pe dezvoltarea celor doua ramuri
- Modalitati de finanta:
  - Finatare directa de la agentie
  - Aplicatii Proiecte

# Institute of Bioengineering and Nanotechnology

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- Infintat in Martie 2003 (ED Prof Jackie Ying )
- Personal: 150 / inclusiv studenti
- No 7 in Asia
- Target : cercetare interdisciplinara cu aplicatii in Biologie si Medicina
- Aree de cercetare:
  - Cell and Tissue Engineering
  - Biosensors and Biodevices
  - Drug and gene Delivery
  - Pharmaceutical Synthesis & Green Chemistry

# Outline

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- ❖ General consideration regarding transdermal drug delivery
- ❖ Microneedles
- ❖ Microneedles with ultrasound enhancer (SEMA- method)
- ❖ Summary

# Drug delivery- definition and methods

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## Definition:

**Drug delivery** is the method or process of administering a pharmaceutical compound to achieve a therapeutic effect in humans or animals.

## Drug delivery methods:

- Invasive: injection (protein, peptides)
- Non-invasive:
  - Peroral (through the mouth),
  - transmucosal (nasal, sublingual, vaginal, ocular and rectal)
  - inhalation routes
  - **Transdermal** (skin).

# Transdermal drug delivery enhancers

Transdermal drug delivery is more advantageous due to its better patient compliance than injection and oral delivery

## Problem:

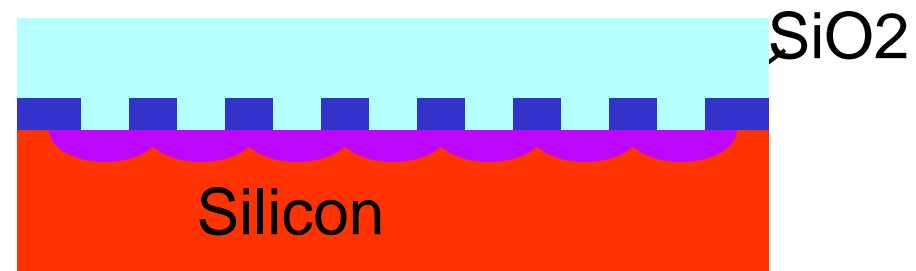
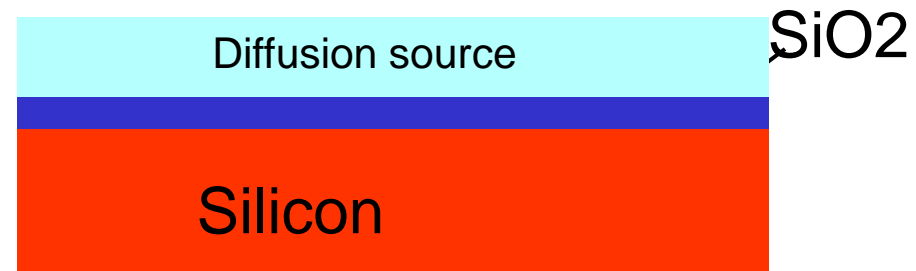
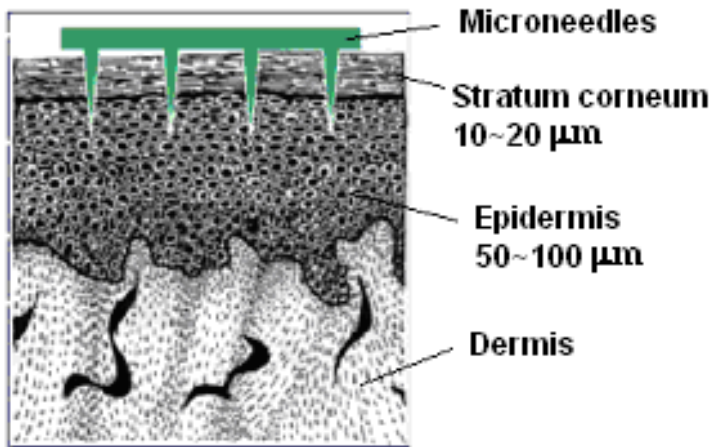
- drug release is limited by low skin permeability.
- No proteins /peptides can be administered transdermal.

## TDD methods:

- mechanical (microneedles)
- chemical (improve the hydrophilicity of the skin)
- electroporation
- iontophoresis
- sonophoresis

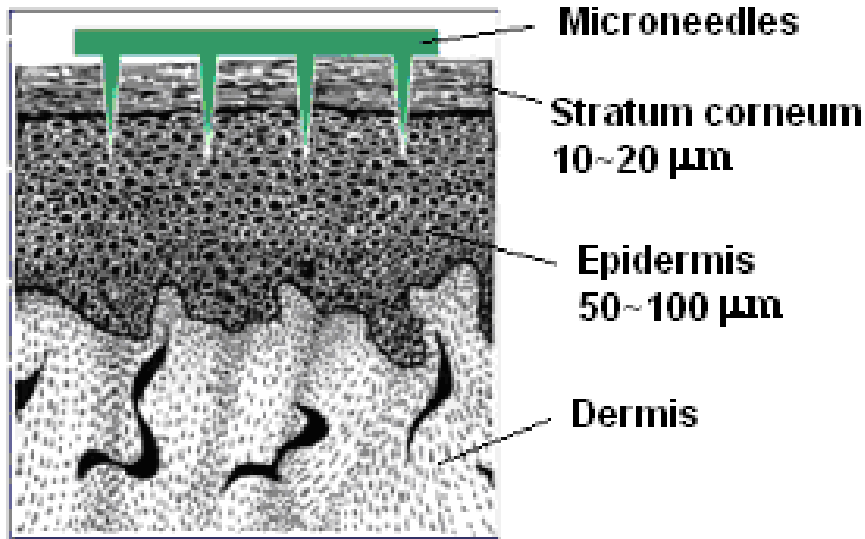
- ❖ General consideration regarding transdermal drug delivery
- ❖ Microneedles
  - ❖  $\mu$ needles for TDD
  - ❖ Why microneedles with biodegradable tips are needed?
  - ❖ Fabrication of silicon microneedles
  - ❖ Fabrication of the porous tip
  - ❖ Anodization process for the porous tips
- ❖ SEMA- method
- ❖ Summary

# Skin structure and ... its equivalent in microfabrication





# Microneedles for TDD



## Advantage:

Microneedles penetrate the skin barrier of stratum corneum, provide very high permeability with minimal invasion and uniform delivery of drugs.

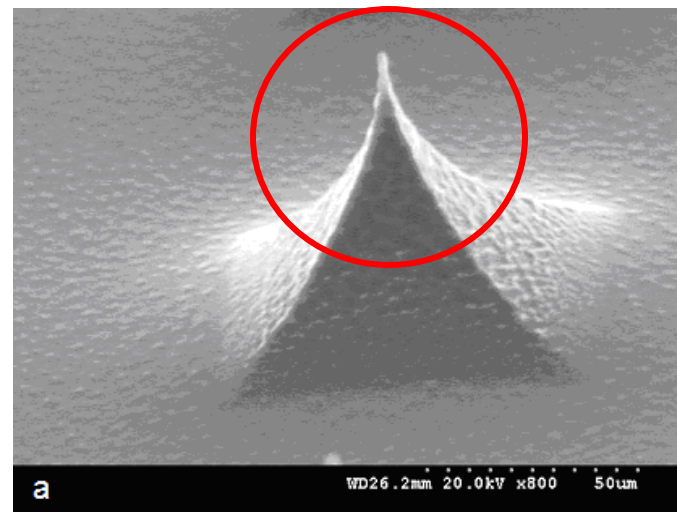
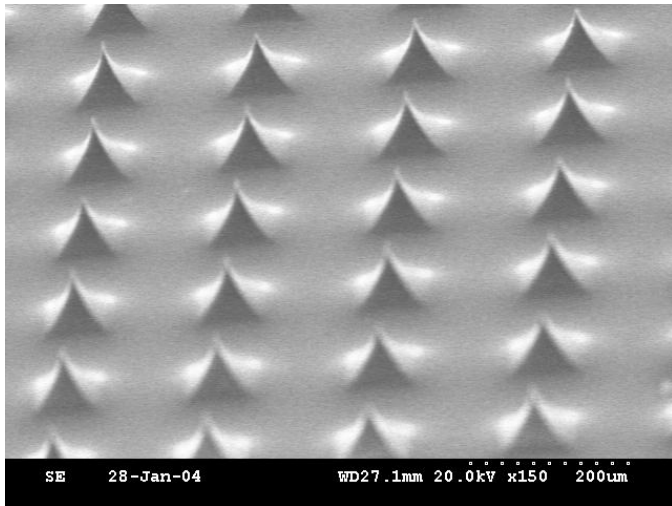
Stratum corneum acts as a “masking layer” for the drug diffusion into the skin

## Disadvantages:

- still passive diffusion
- broking parts from the microneedle tip can cause infection
- limited quantity of drug delivery
- limited size of macromolecule drug

# Why microneedles with biodegradable tips are needed?

Silicon microneedles are fragile, but with high aspect-ratio, easily broken in the skin and may cause infection.



## Solution:

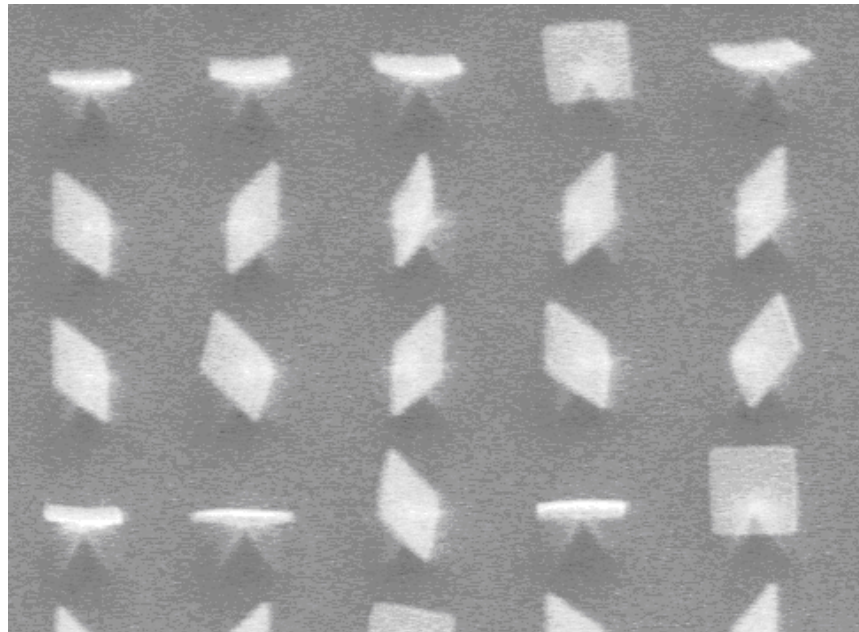
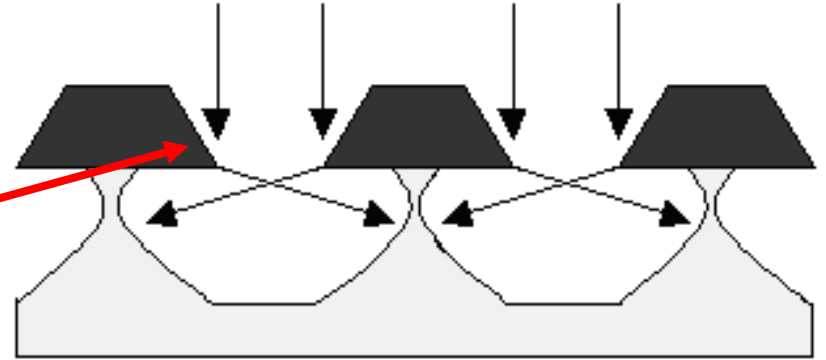
mesoporous silicon tips (biodegradable)

# Fabrication of silicon microneedles

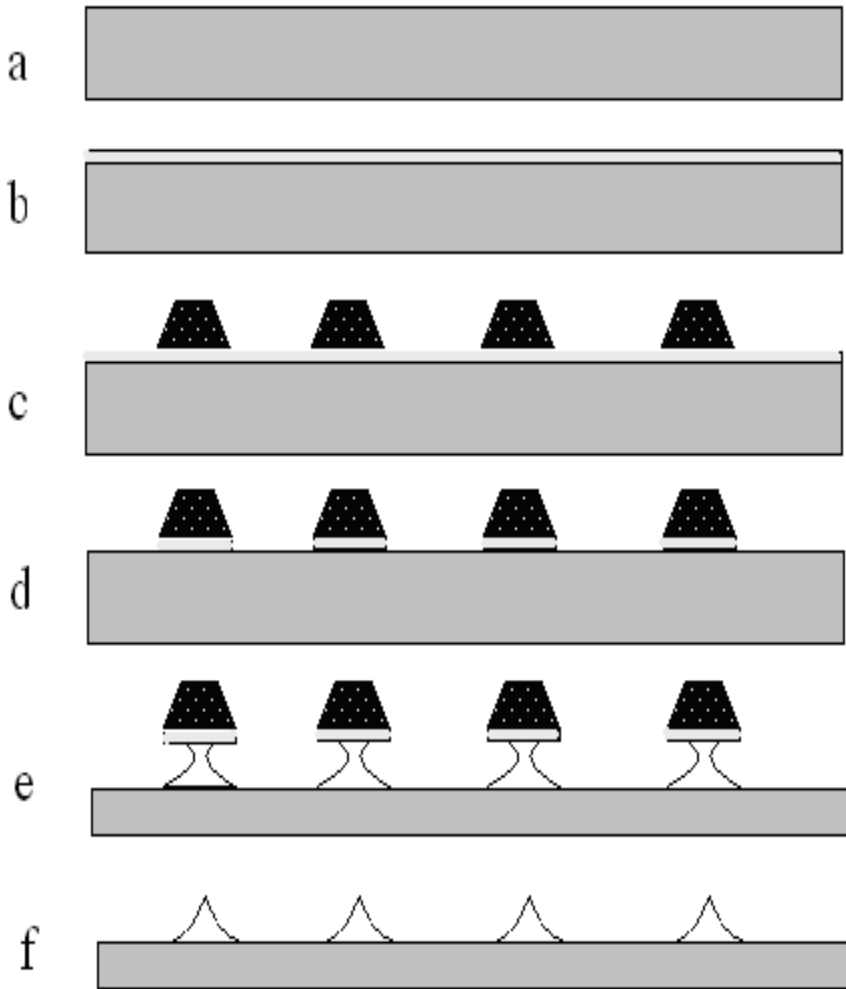
Isotropic deep RIE

+

notching effect of reflected charges on the masking layer



# Fabrication of silicon microneedles



a) Silicon wafer

b) 1 μm-thick SiO<sub>2</sub> (PECVD)

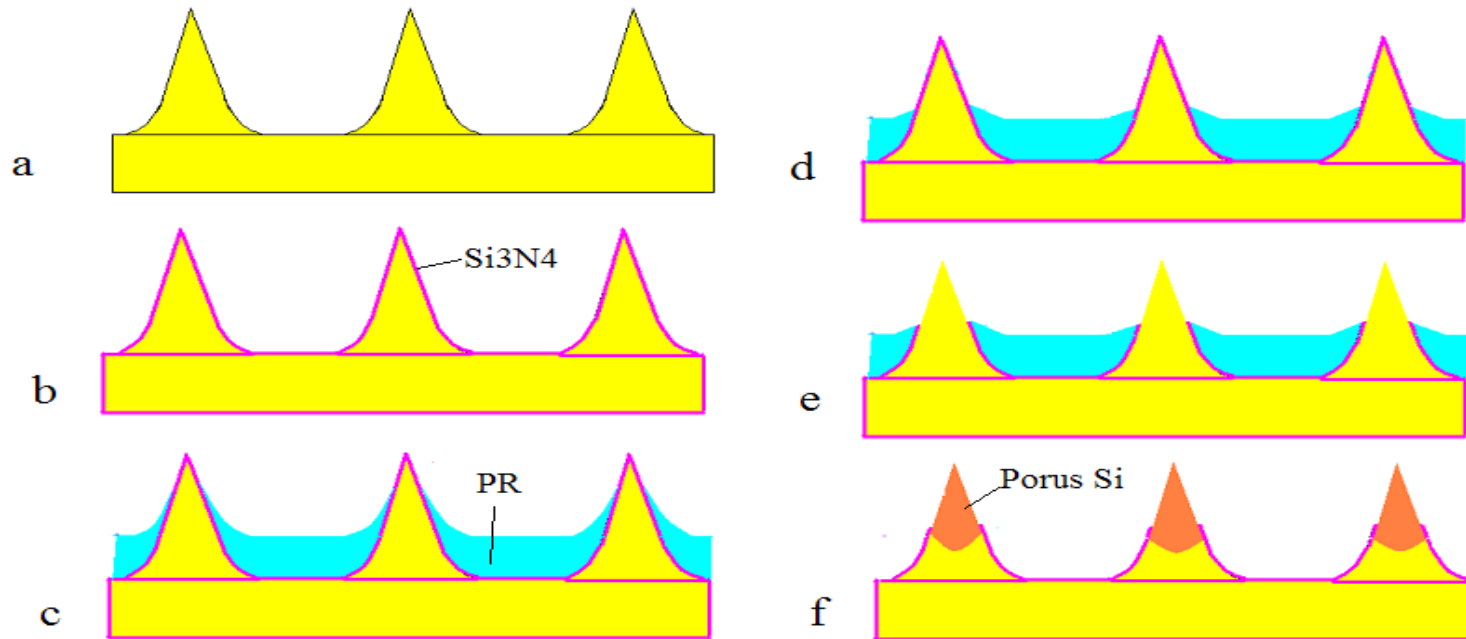
c) AZ 9620 photoresist mask  
(overheated)

d) RIE etch of the SiO<sub>2</sub>

e) Isotropic etching of silicon

f) (Removing of the mask)

# Fabrication of the porous tip



- a) microneedles fabrication; b) Low stress PECVD Si<sub>3</sub>N<sub>4</sub> deposition;  
c) Photoresist deposition; d) O<sub>2</sub> plasma etch of PR  
e) Si<sub>3</sub>N<sub>4</sub> etch in plasma; f) Porous Si process

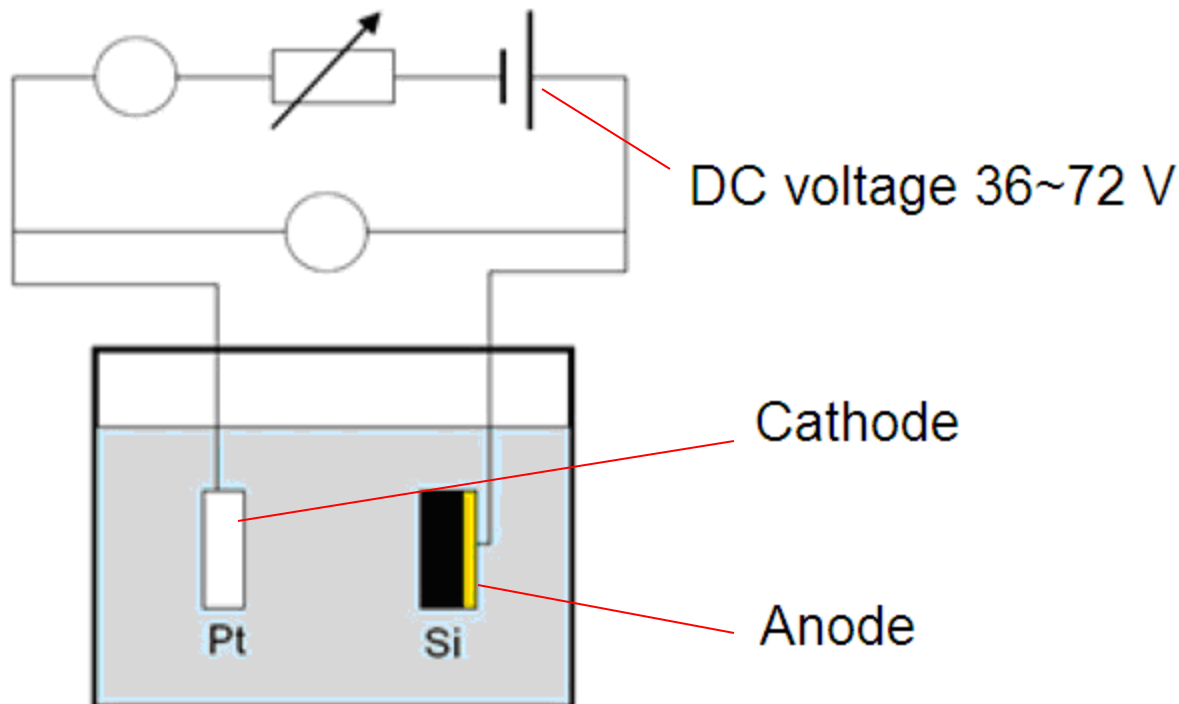
# Anodization process for the porous tip

Method: anodic electrochemical etching process

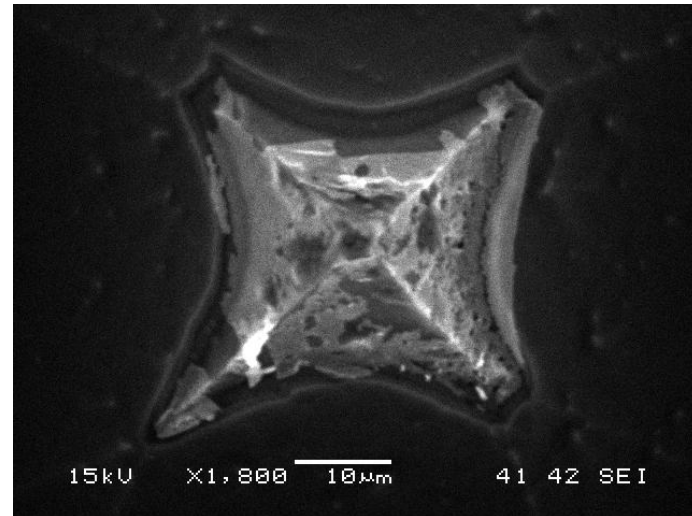
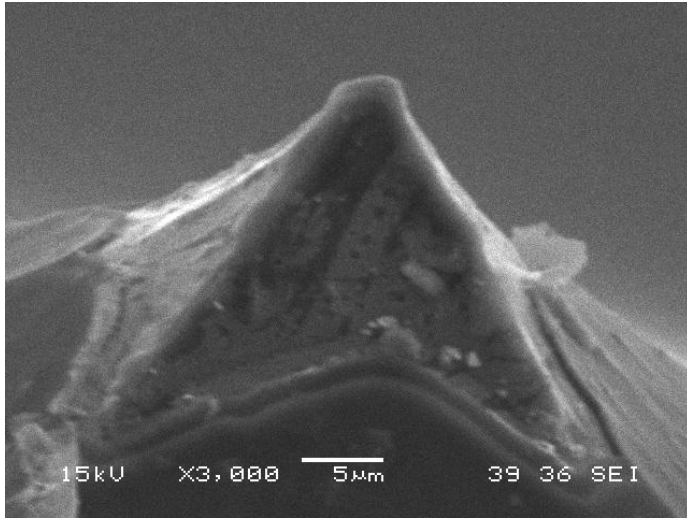
Chemical Solution:

MeCN : HF : H<sub>2</sub>O = 92% : 4% : 4% by weight

Electrical power: DC 36~72 V, current intensity 10 mA·cm<sup>2</sup>



# Results

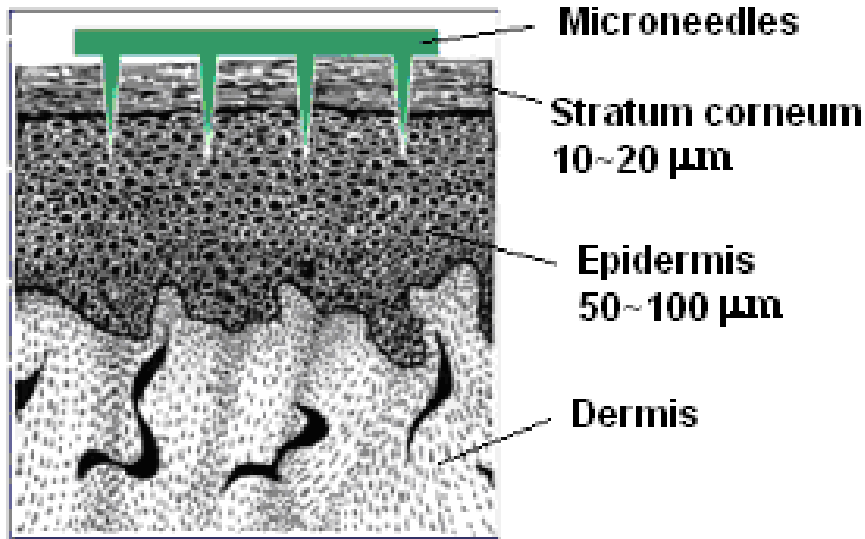


Microneedle with biodegradable tip

- ❖ General consideration regarding transdermal drug delivery
- ❖ Microneedles
- ❖ *Microneedles with ultrasound enhancer (SEMA- method)*
  - ❖ General considerations
  - ❖ SEMA method
  - ❖ Process flow of the TDD using SEMA
  - ❖ Fabrication of hollow microneedles array
  - ❖ Low frequency sonophoresis
  - ❖ Testing
  - ❖ Considerations regarding thermal effect
- ❖ Summary



# General considerations



Stratum corneum acts as a “masking layer” for the drug diffusion into the skin

## Advantage:

Microneedles penetrate the skin barrier of stratum corneum, provide very high permeability with minimal invasion and uniform delivery of drugs.

## Disadvantages:

- still passive diffusion
- broking parts from the microneedle tip can cause infection

**Target: insulin**

# Drug diffusion

The **drug flux**  $F$  through the skin is proportional with the concentration gradient as given by the Fick's first law:

$$F = -D \frac{\partial C}{\partial x}$$

where  $D$  is the **diffusion coefficient** while  $\partial C / \partial x$  is the **concentration** gradient.

The flux gradient  $\partial F / \partial x$  is proportional with the change of concentration in time and is approximated by the Fick's second law of diffusion:

$$\frac{\partial C(x, t)}{\partial t} = -\frac{\partial F}{\partial x} = D \frac{\partial^2 C}{\partial x^2}$$

where the **concentration**  $C$  is a function of position  $x$  and time  $t$ , while  $D$  is assumed to be constant.

# Drug diffusion

Under these conditions eqn. can be simplified to:

$$\frac{dm}{dt} = D \frac{C_0}{h}$$

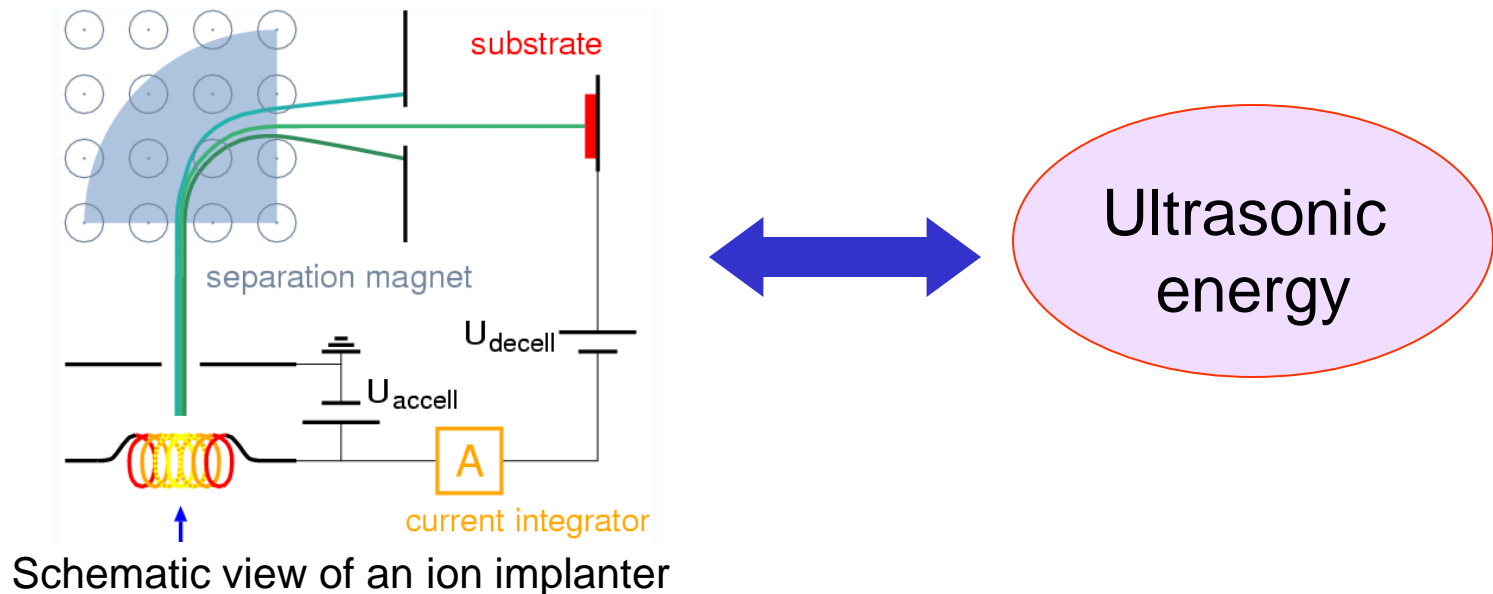
where  $m$  is the mass of permeant that passes per unit area through membrane in the time  $t$ ,  $C_0$  is the concentration of the source and  $h$  is the membrane thickness.

Speaking in general terms, the diffusion coefficient  $D$  is a function of the activating energy  $E_a$  and temperature  $T$ :

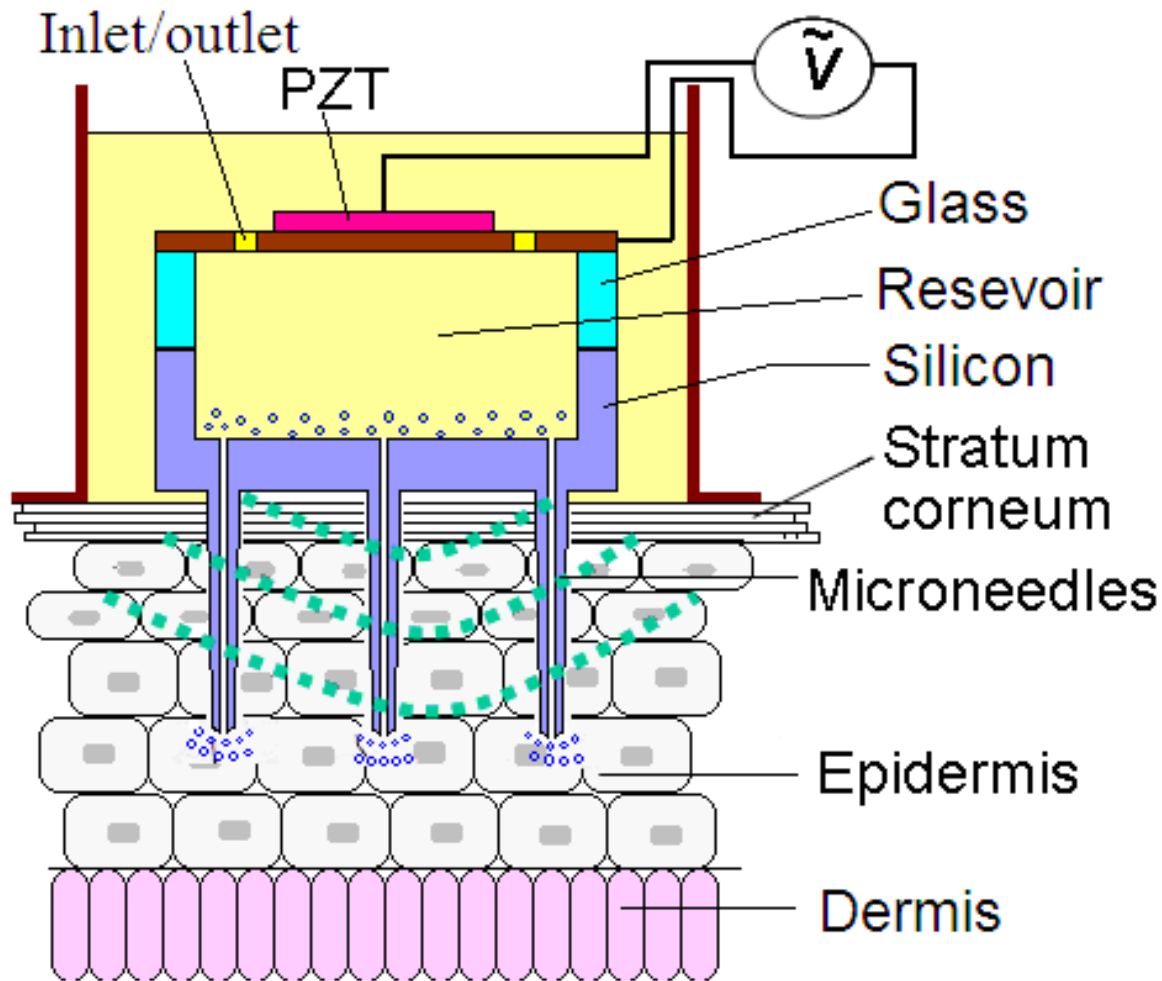
$$D = f(E_a, T)$$

# Drug diffusion- “drug implantation”

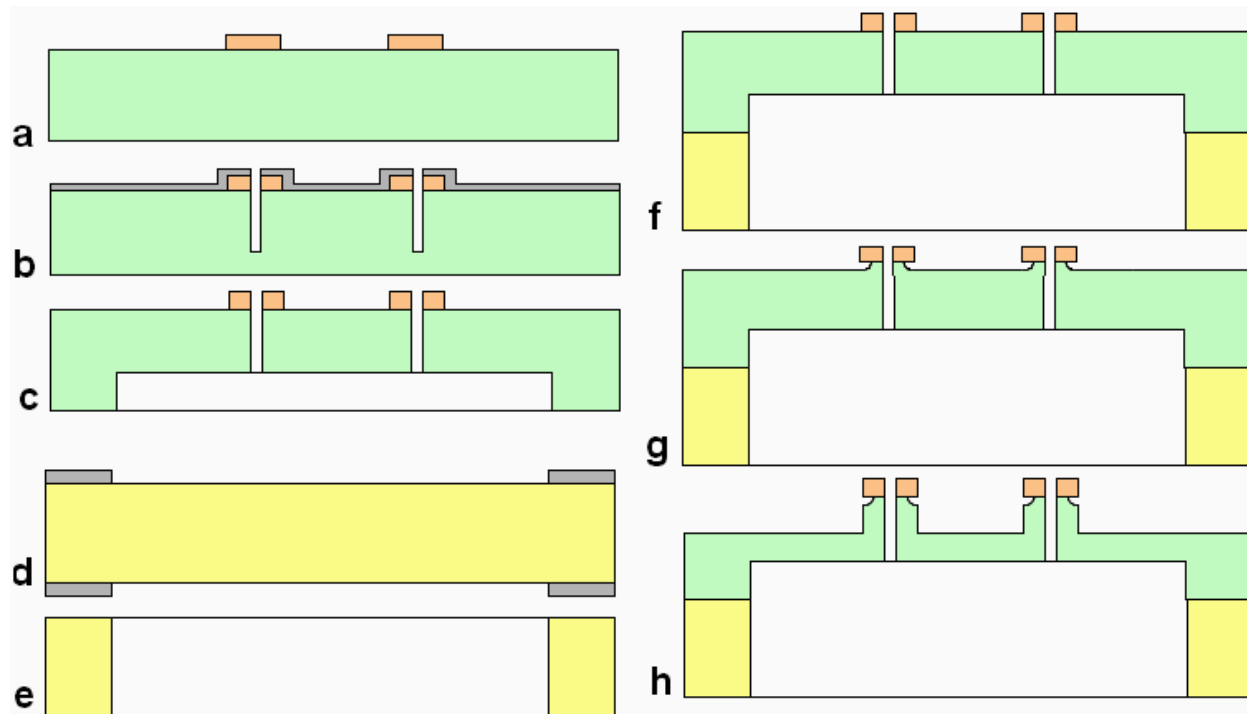
- Temperature can not be sensitively modify in transdermal drug delivery
- Only solution can be improving the activation energy



# SEMA method



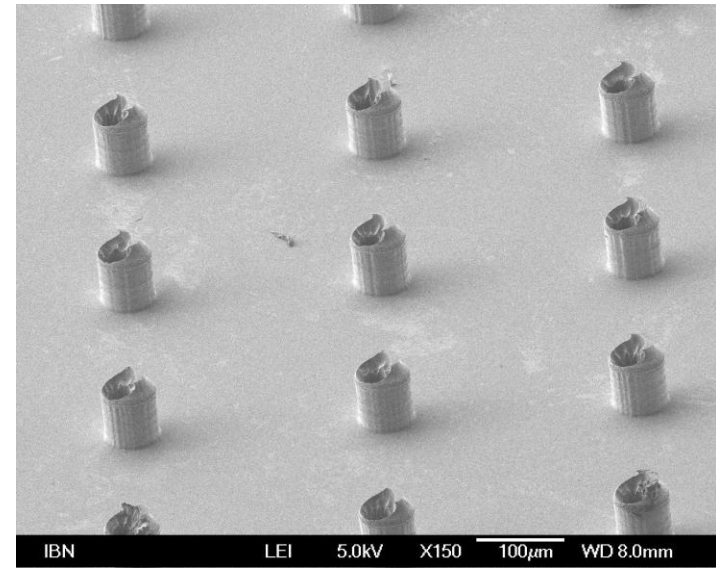
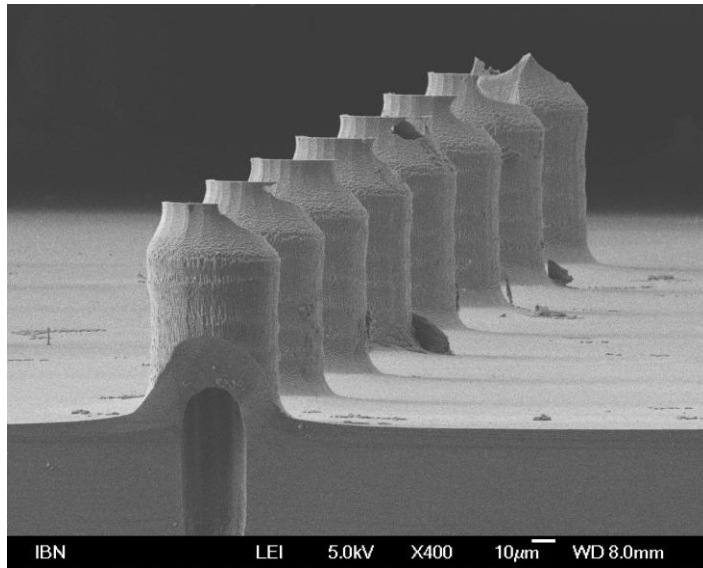
# Fabrication of hollow microneedles array



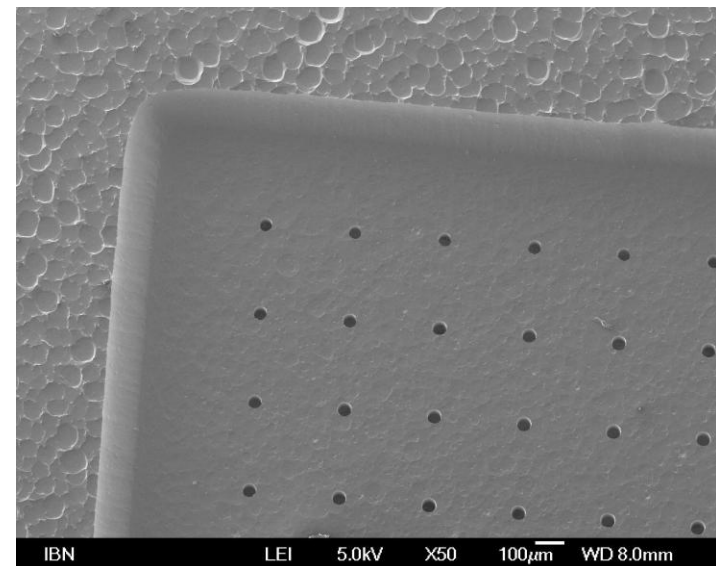
## Typical process for silicon microneedles

- a) patterning of SiO<sub>2</sub> layer; b) etching and oxidation of the holes;
- c) DRIE to get the reservoir; d) patterning the glass substrate;
- e) etching of glass holes; f) bonding of the silicon with glass substrate,
- g) Isotropic etching of needle tips; (i) DRIE to get needle out-rings

# Fabrication of microneedles array

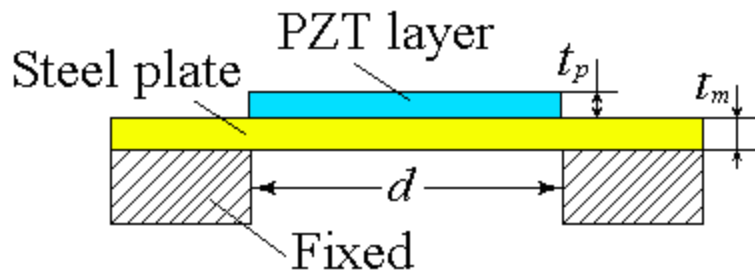


Typical dimensions of the microneedles:  
Length of 100 μm,  
out-diameter of 50~80 μm,  
inner-diameter of 30~40 μm

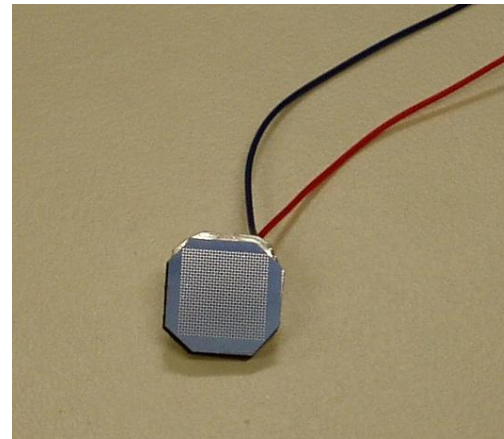


# Low frequency sonophoresis

- PZT bar was used as ultrasound emitter to generate sonophoresis
- Key parameters of the PZT bar:



PZT thickness  $t_p = 200 \mu\text{m}$ ,  
steel substrate  $t_m = 200 \mu\text{m}$ .



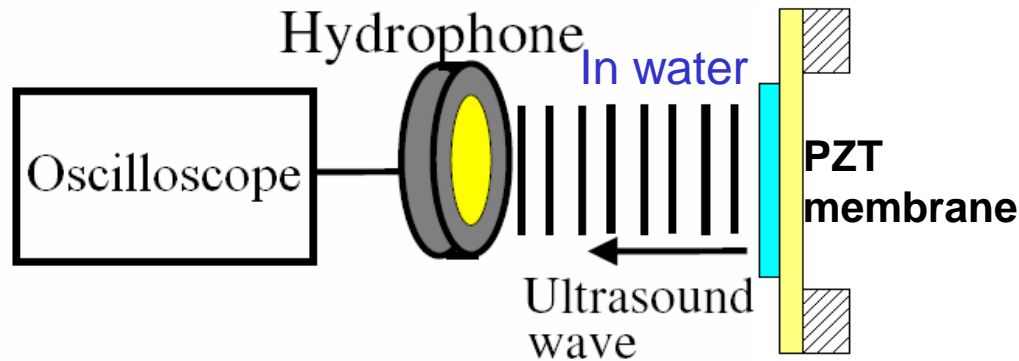
Measured resonant frequency is 21 kHz

## Working frequency

- Why not therapeutic ultrasound (1~3 MHz)? The cavitation effect is reversely proportional to the ultrasound frequency.
- Low frequency (20 kHz ~ 50 kHz) sonophoresis proved to have better enhancement on TDD of macromolecules.



# Low frequency sonophoresis



$$I = \frac{P^2}{\rho C}$$

$P$  – sound pressure  
 $\rho$  - density of media  
 $C$  – sound speed in media

The threshold intensity of 20 kHz ultrasound is 0.11 W/cm<sup>2</sup>.

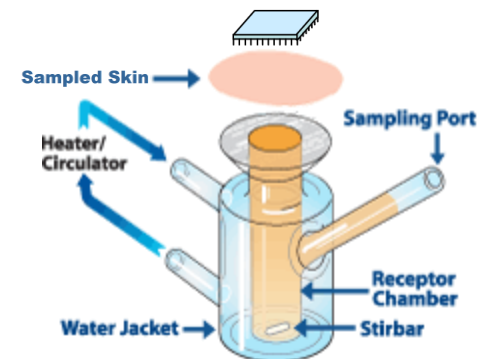
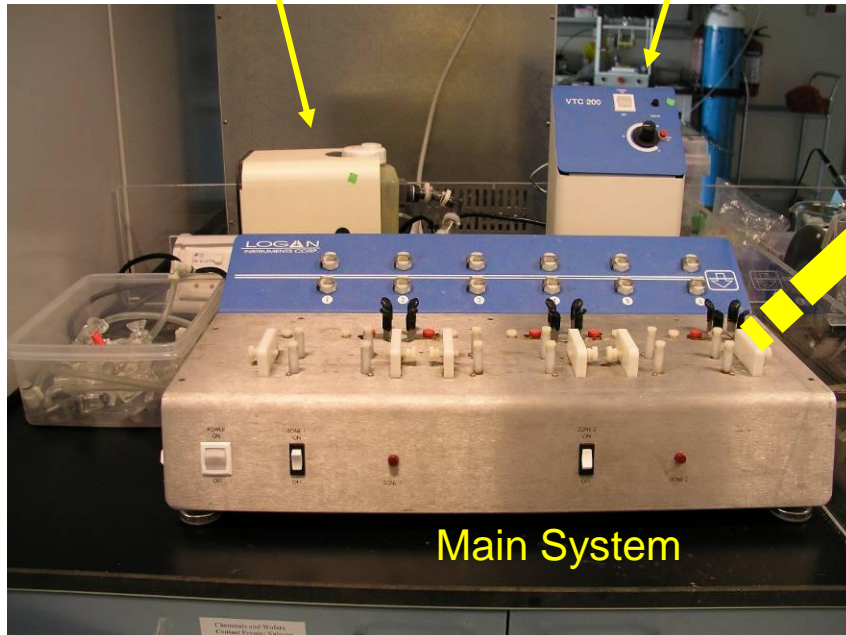
## *Safety concerns:*

- The minimal thermal effect doesn't induce skin lesion or necrosis at ~ $\mu$ m level.
- Literature suggested that the integrity of insulin and peptides are not degraded
- Obvious skin lesions might be induced at intensities  $> 2.5$  W/cm<sup>2</sup>

# Testing setup for TDD

Water Bath Tank

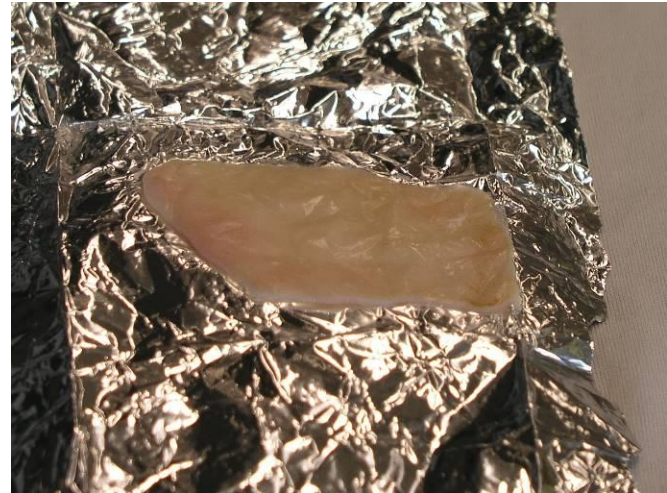
Heater Circulator



# Skin preparation

## Skin Preparation Protocol:

1. Excise the skin from abdominal area of rats/pigs;
2. Remove the hair from the sampled skins;
3. Remove the adhering fat and other visceral debris by tweezers;
4. Scrape off the underlying subcutaneous fat to leave the skin to be 1.5 mm-thick;
5. Wash the skin with physiological saline;
6. Wrap the skin in aluminum foil;
7. Store at  $-80^{\circ}\text{C}$



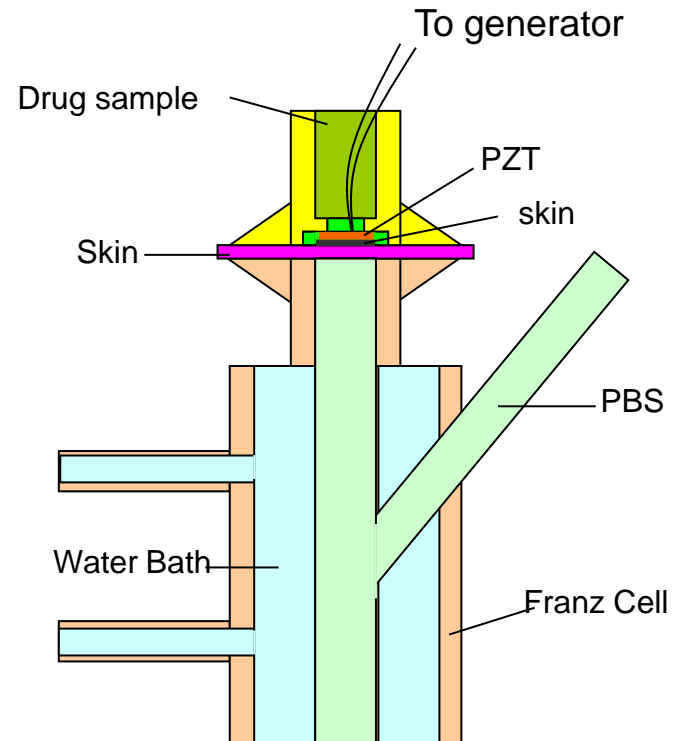
**Rat Skin**



**Pig Skin**

# *In vitro* drug release with animal skin

## Experiment set-up



Diffusion tool: Franz diffusion cell

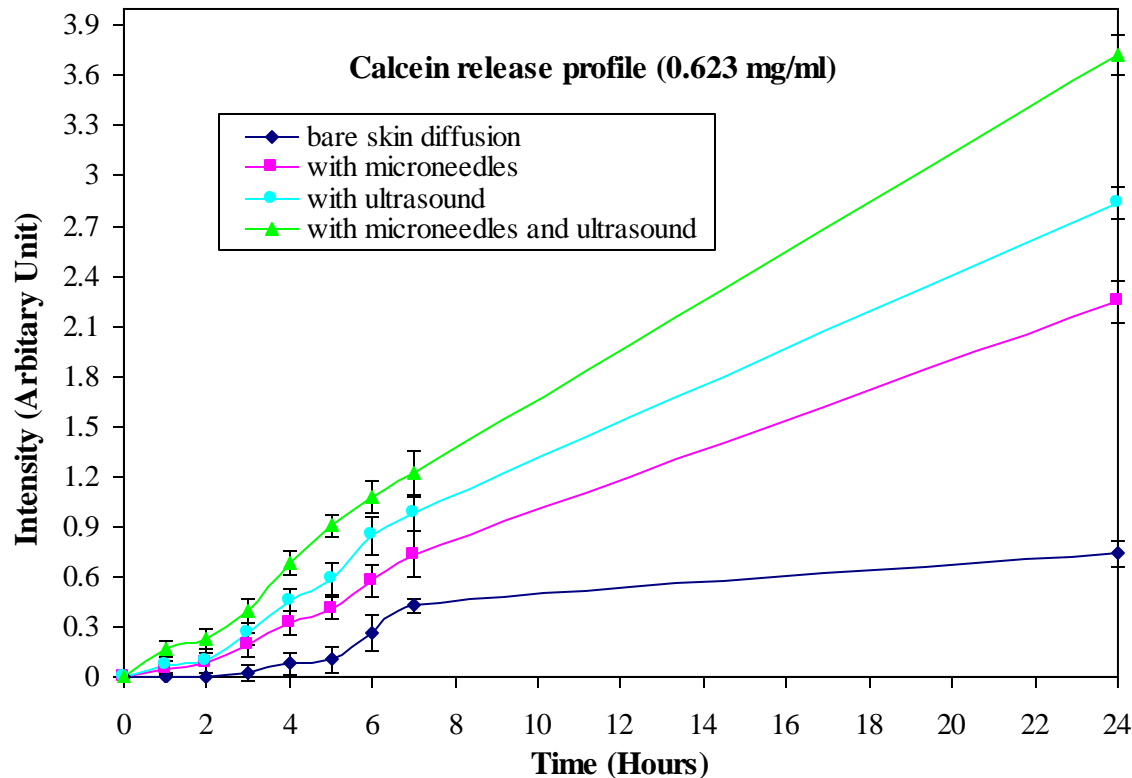
Skin model: rat skin, pig skin

Drug model: Calcein, BSA, Insulin (detected by UV spectra)

Microneedles: 30 by 30 array, length 100  $\mu\text{m}$ , diameter 60  $\mu\text{m}$

Ultrasound energy: 20 kHz, 20% duty, intensity of 0.1~1  $\text{W}/\text{cm}^2$

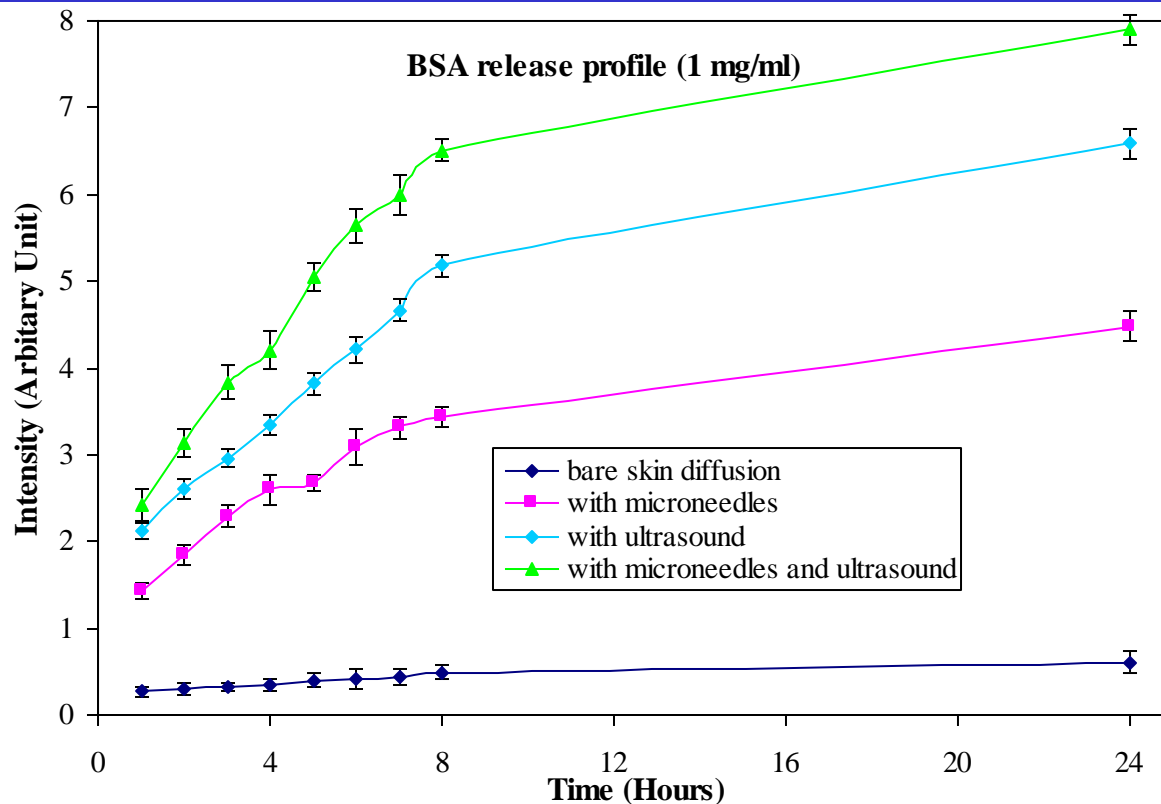
# *In vitro* calcein drug release in animal skin



The *in-vitro* release profile was dependent on the skin and drugs

- For calcein release, the skin permeability was greatly enhanced (about 5 times) by the microneedles in comparison with the passive diffusion, 7 times for sonophoresis and further enhanced ( $\sim 9\times$ ) using SEMA.

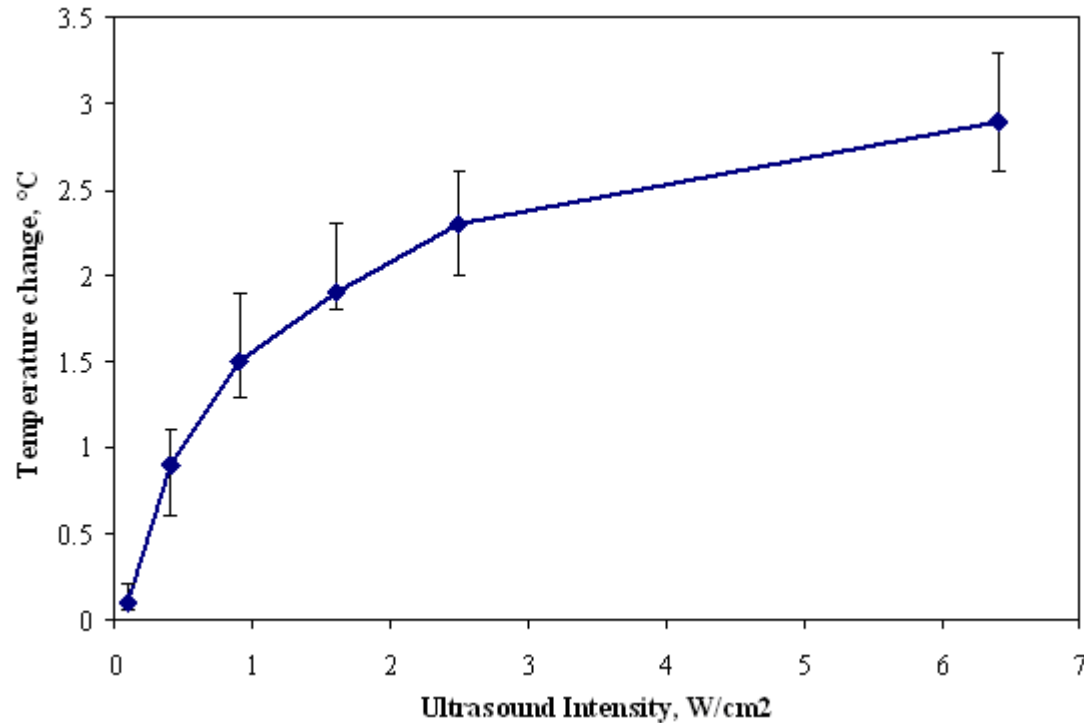
# *In vitro* BSA drug release in animal skin



## Preliminary results and challenges:

- The *in-vitro* release profile was dependent on the skin and drugs
- For BSA release, skin permeability enhancements of ~7 times (microneedles), ~8.5 times (sonophoresis) and ~12 times for SEMA

# Thermal effect



- The temperature can induce vasodilatation !
- LFS can generate large gradients of temperature !

# Summary

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- Ultrasound integrated microneedle array device for TDD was designed to have better enhancements of TDD with macromolecules.
- The microneedles array were successfully fabricated with silicon materials. The device was packaged with PZT transducers.
- Characterization study showed that low-frequency and low-intensity ultrasound have better TDD enhancement.
- Preliminary *in vitro* TDD results proved the enhancement effect of ultrasound integrated microneedle device.



**Thank you  
for your attention!**

