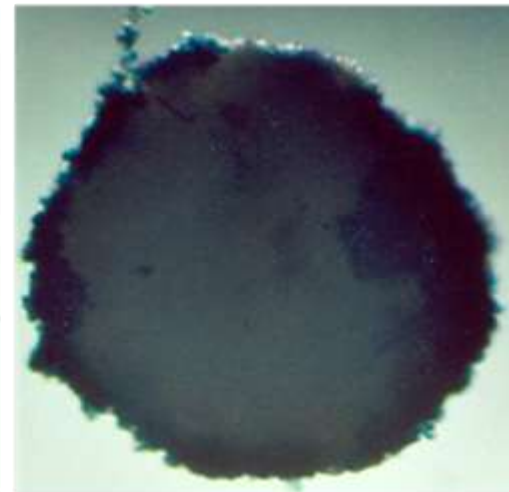
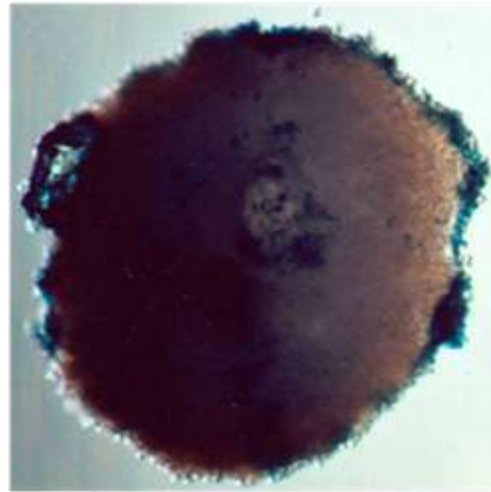
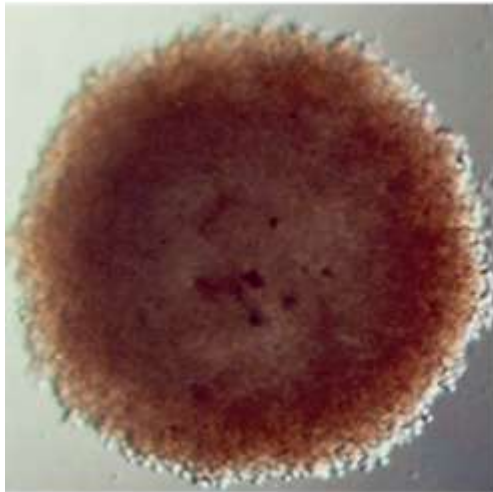


Welcome to NACK's Webinar

Nanotechnology in Medicine



Hosted by MATEC NetWorks www.matecnetworks.org

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Nanotechnology Applications and Career Knowledge Center located at Penn State University



National
Science
Foundation

Funded, in part, by a grant from the
National Science Foundation.
DUE-08020498



Objectives

1. Understand the role of dimensions in nanoscience.
2. Describe three areas of current nanomedicine research.
3. Describe targeted drug delivery and the benefits over systemic therapies.
4. List three issues related to commercialization of therapies.



NACK's Webinar Presenters



John Wagner Ph.D.
Chippewa Valley Technical College



Timothy Lyden Ph.D.
UWRF TCIC



Madhan Kumar Ph. D.
Penn State



Mylisa Parette Ph.D.
Keystone Nano



Bob Ehrmann
Director: NACK Penn State



Nanotechnology in Medicine: Introduction

John Wagner, Ph.D.

Chippewa Valley Technical College

Eau Claire, Wisconsin



What is Nanoscience?

- Extension of physics, chemistry, biology and engineering to small dimensions
 - Size range of atoms and molecules
- Enabled by
 - Advances in technology to study small dimensions
 - Improved understanding of atomic processes in materials and molecular processes in cells
- Rapidly increasing number of commercial applications



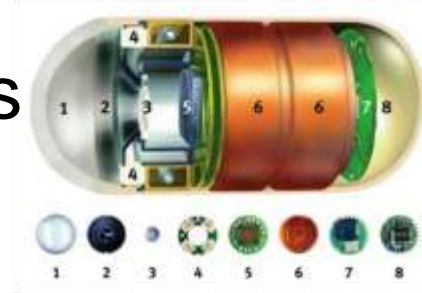
Nanoscience in Medicine Overview

- Medical devices
- Stem cells and tissue engineering
- Disease detection
- Targeted delivery of therapies
- Personalized medicine



Medical Devices

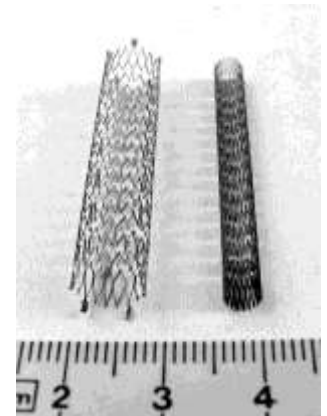
- Implantable micro-devices
- Implants - stents and prostheses compatible with tissue
- Immune resistance
- Bacteria resistance
- Strength



From:
http://www.leblogsante.com/pillcam_2Dtof_small.jpg



Metal-on-Metal Hip Implant Systems

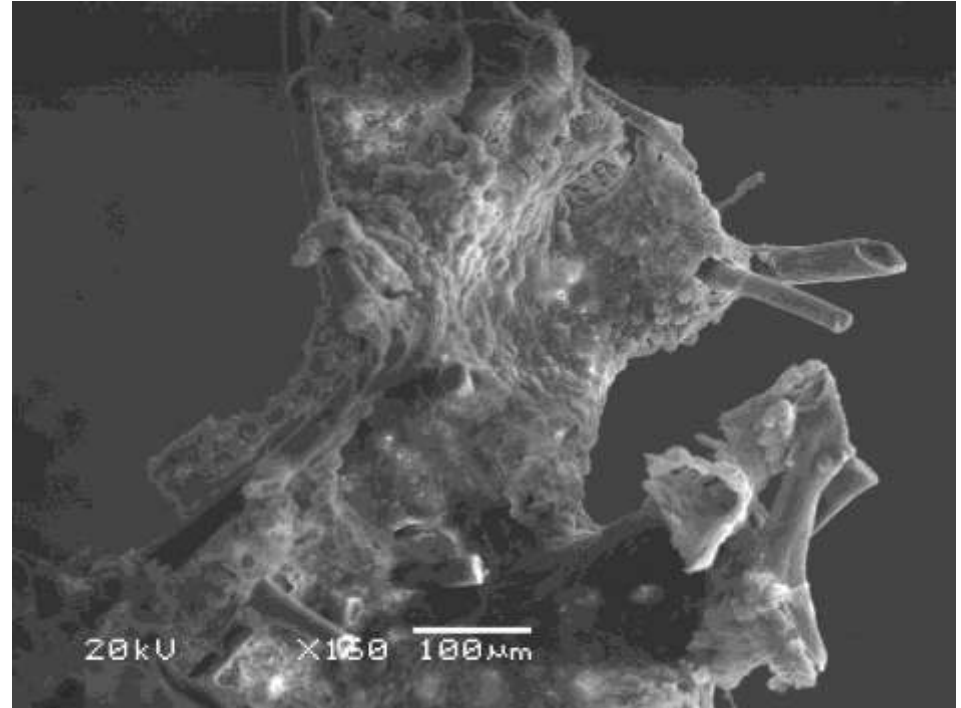


Stem Cells and Tissue Engineering Research



Thomas Matthiesen <http://www.npr.org>

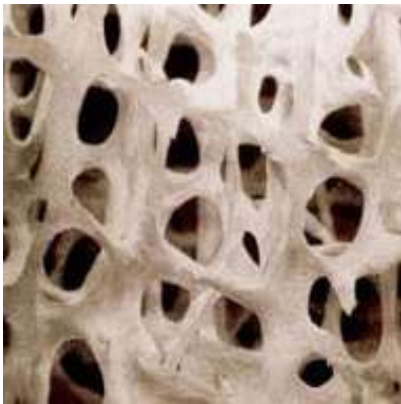
University of Minnesota
scaffolding research (rat heart)



University of Wisconsin River Falls
artificial scaffolding infused with cells

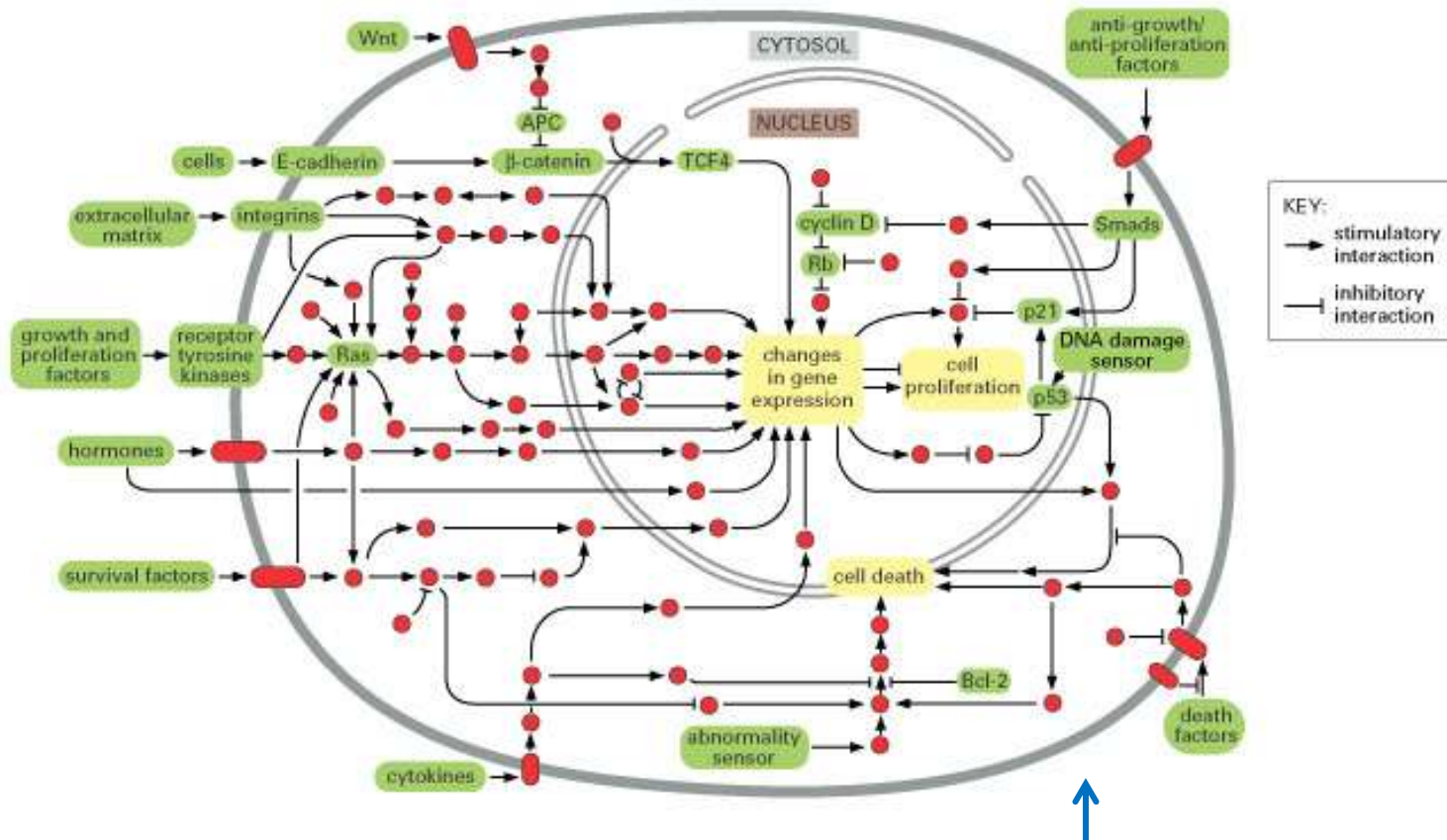
Tissue Engineering Applications

- Stem cells to generate specific tissue
- Scaffolds to reconstruct damaged tissue
- Bone and organ regeneration



Disease Process Complexity

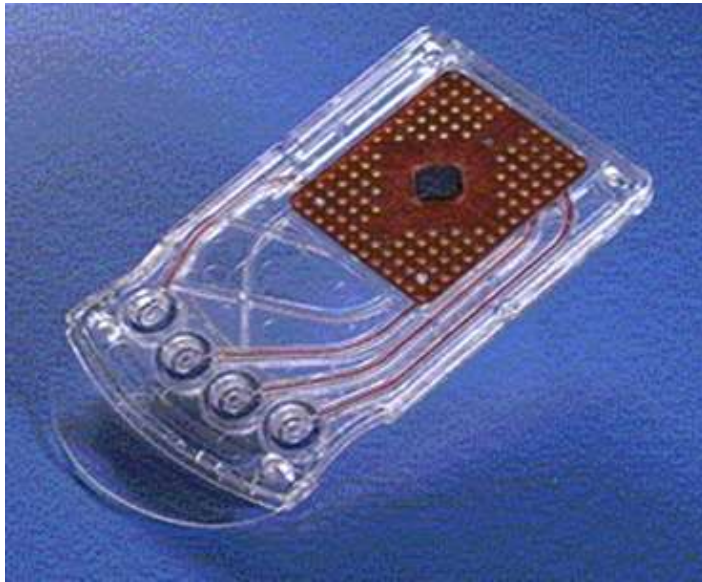
Example: Signaling Pathways in Human Cancer



Cancer Critical
Components and Control

Disease Detection - Microarrays

- Genetic markers
- Genomic microarrays can detect DNA markers

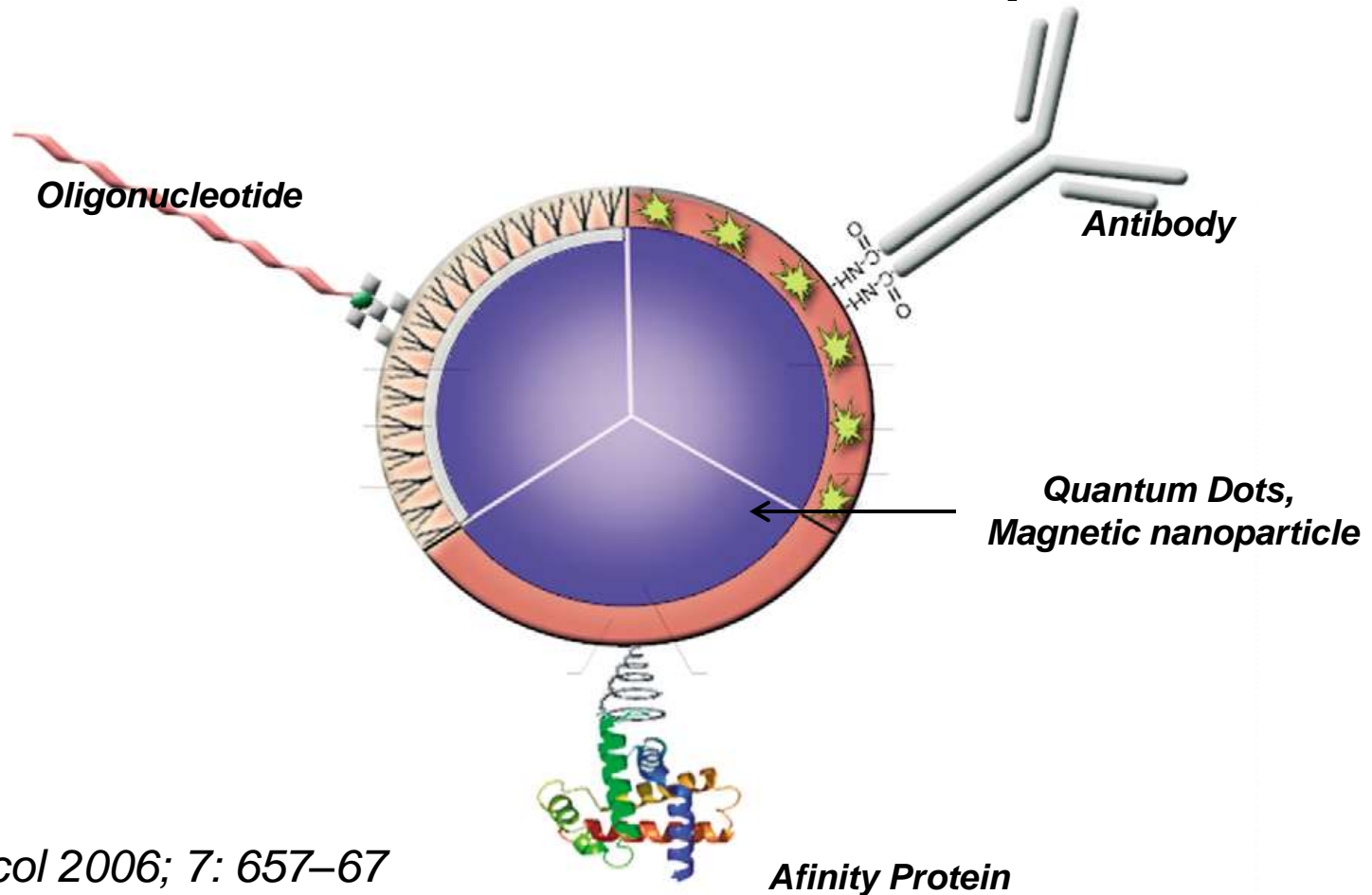


Early generation commercially available “NanoChip®”



GeneChip® by Affymetrix

Disease Detection - Nanoparticles



Lancet Oncol 2006; 7: 657–67

Therapy Model Shift

- Systemic approach
 - Therapy introduced to system
 - Attacks both diseased and healthy cells
 - Systemic side effects
 - Only small amount of medication attacks diseased cells



Therapy Model Shift

- Targeted approach
 - Diseased cell identified by protein markers in cell membrane
 - Transport vehicle contains drug or gene
 - Significant reduction of side effects
 - Lower cost due to efficiency of delivery

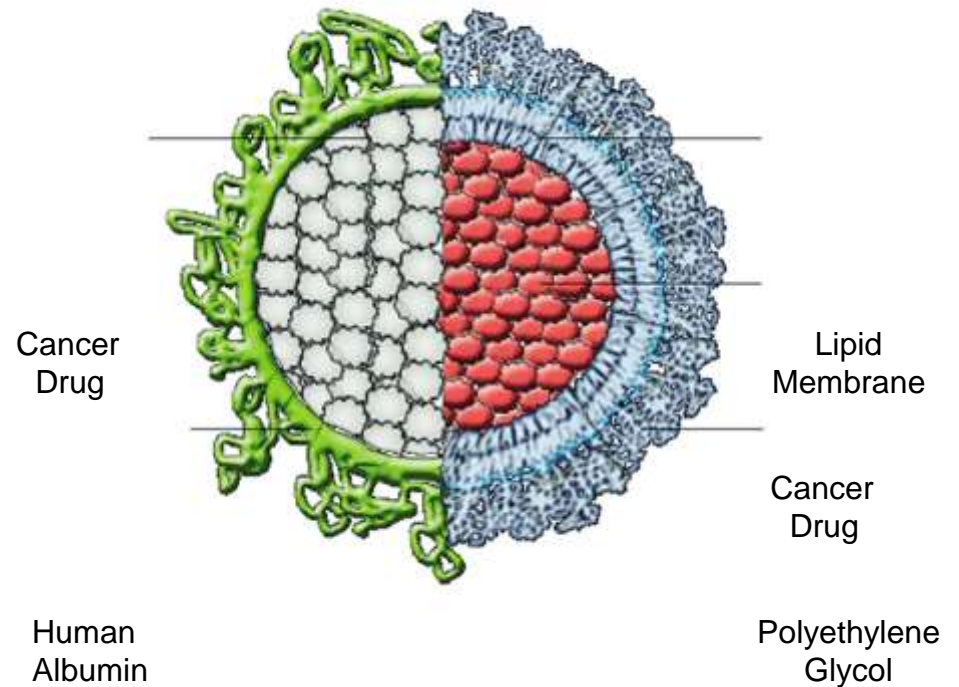
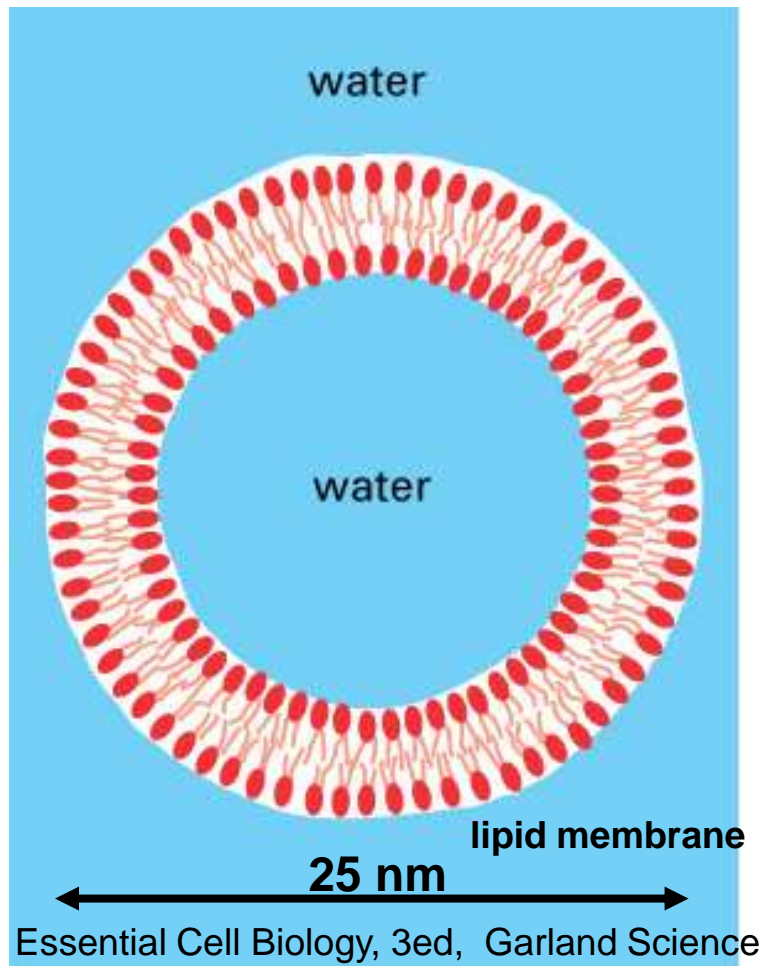


Targeted Delivery Model

- Employs nanoparticle vesicle to contain drug or gene
- Vesicle surface contains ligand that bonds only to target cell
- Assembly must not be detected by body's immune system
- After attachment to cell, payload must be delivered to interior of cell
- Some therapies require payload to be transported from the cytoplasm to the nucleus



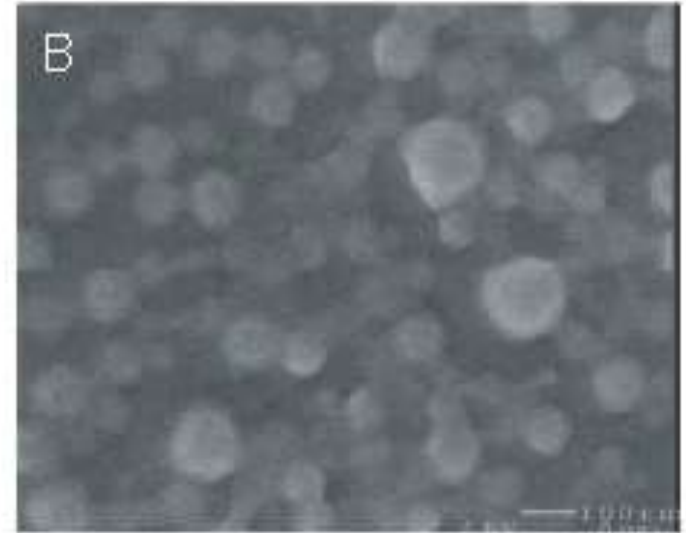
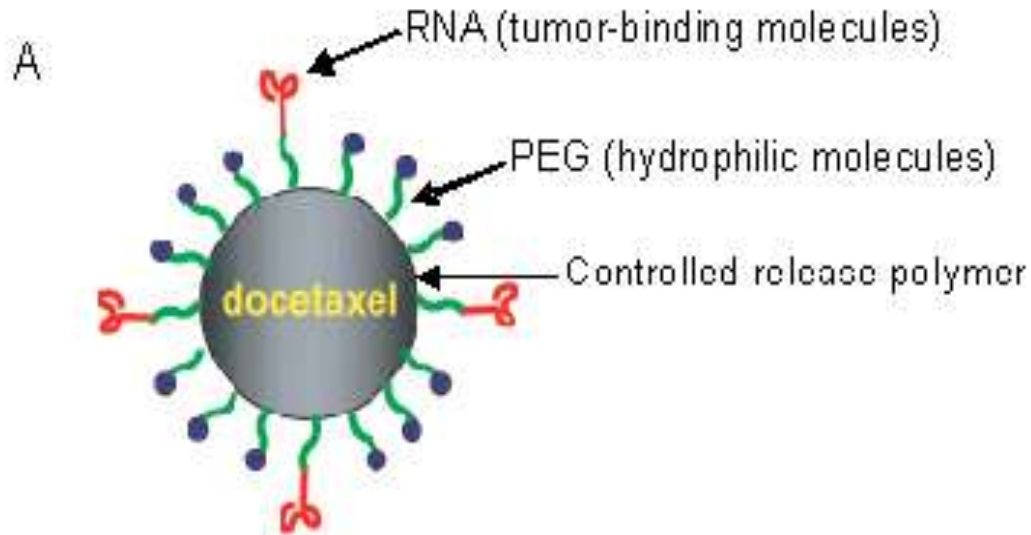
Example Vesicle - Liposome



Lancet Oncol 2006; 7: 657-67



Example of Nanoparticle Delivery System



- (A) Graphical representation of docetaxel-encapsulated nanoparticles
- (B) Scanning electron-microscopy (SEM) image of docetaxel-encapsulated nanoparticles. The average particle size is approximately 150 nanometers in diameter

Some Current Nanoscale Therapies

Particle Type	Development Stage	Examples	Application
Liposome	FDA- approved	DaunoXome, Doxil	AIDS carcinoma
Albumin-based	FDA- approved	Abraxane	Brest cancer
Polymeric micells	Clinical trials	Genexol-PM, SP1049C, NK911, NK012, NK105, NC-6004	Lung cancer
Polymer-drug conjugate	Clinical trials	XYOTAX (CT-2103), CT-2106, IT-101, AP5280, AP5346, FCE28068 (PK1), PNU166148, PNU166945, MAG-CPT, DE-310, Pegamotecan, NKTR-102, EZN-2208	Stomach cancer
Targeted Liposome	Clinical trials	MCC-465, MBP-426, SGT-53	Delivery System
Target polymer-based particle	Clinical trials	FCE-28069 (PK2), CALAA-01	Delivery System
Solid inorganic or metal particle	Clinical trials (gold) and pre-clinical	Carbon nanotubes, silica particles, gold particles (CYT-6091)	Delivery System
Dendrimer	Preclinical	Polyamidoamine (PAMAM)	Delivery of RNAi (gene silencing)

Some Current Nanoscale Therapies

Particle Type	Development Stage	Application
Liposome	FDA- approved	AIDS carcinoma
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Polymeric micells	Clinical trials	Lung cancer
Polymer-drug conjugate	Clinical trials	Stomach cancer
Targeted Liposome	Clinical trials	Delivery System
Target polymer-based particle	Clinical trials	Delivery System
Solid inorganic or metal particle	Clinical trials (gold) and pre-clinical	Delivery System
Dendrimer	Preclinical	Delivery of RNAi (gene silencing)

Personalized Medicine

- Detect disease by genetic or protein markers
 - Microbiology and biochemistry of disease
 - DNA microarrays and biochips
- Disease mitigation/cure
 - Customized therapies designed to meet individual requirements
- Medical clinics are advertising personalized medicine today (Marshfield Clinic in Wisconsin)



Questions?



Nanotechnology in Medicine: Nanotechnology Approaches to Translational and Personalized Cancer Medicine.

Timothy Lyden, Ph.D.

Director
Tissue and Cellular Innovation Center
Associate Professor
Anatomy and Physiology
UWRF Biology Department



Tissue and Cellular Innovation Center



MARSHFIELD CLINIC®

Research Foundation



ALLINA
Hospitals & Clinics

Rivers
Cancer
Center

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Personalized Medicine

Concept:

- New paradigm in medicine.
- Focused on defining illness or disease for each individual patient.

Goal:

- Allow for more precise outcome predictions and therefore better or more effective treatment design.



2009 Estimated US Cancer Deaths*

ONS=Other nervous system.

Source: American Cancer Society, 2009.

Men
292,540

Women
269,800

Lung & bronchus	30%
Prostate	9%
Colon & rectum	9%
Pancreas	6%
Leukemia	4%
Liver & intrahepatic bile duct	4%
Esophagus	4%
Urinary bladder	3%
Non-Hodgkin lymphoma	3%
Kidney & renal pelvis	3%
All other sites	25%



26%	Lung & bronchus
15%	Breast
9%	Colon & rectum
6%	Pancreas
5%	Ovary
4%	Non-Hodgkin lymphoma
3%	Leukemia
3%	Uterine corpus
2%	Liver & intrahepatic bile duct
2%	Brain/ONS
25%	All other sites

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Personalized Medicine

Nanotechnology Applications

Tissue engineering
in personalized
translational cancer
medicine:

Development of artificial tissues
and cellular modeling of tumors.



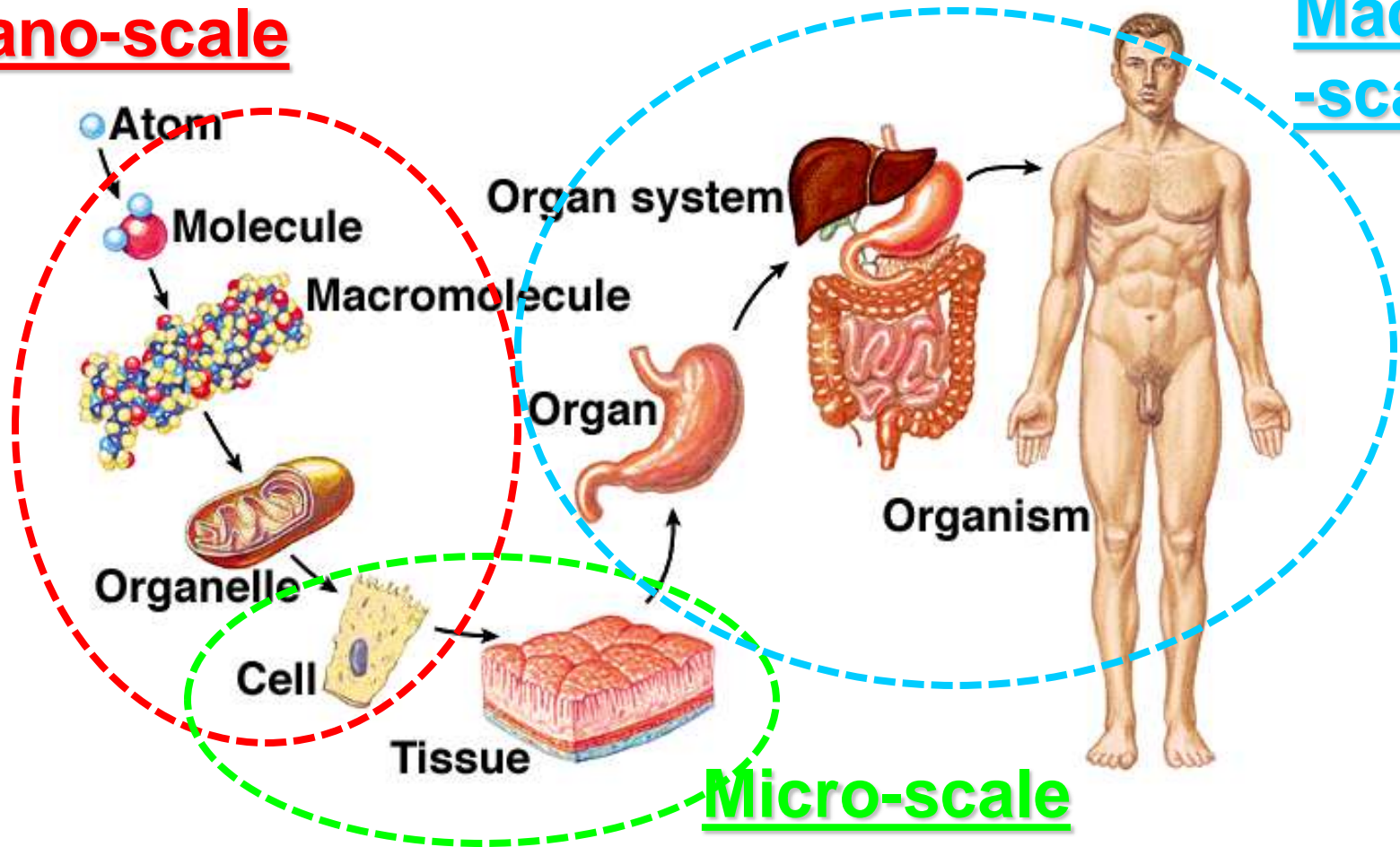
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Nanotechnology: The Biological Context

Nano-scale

Macro-scale

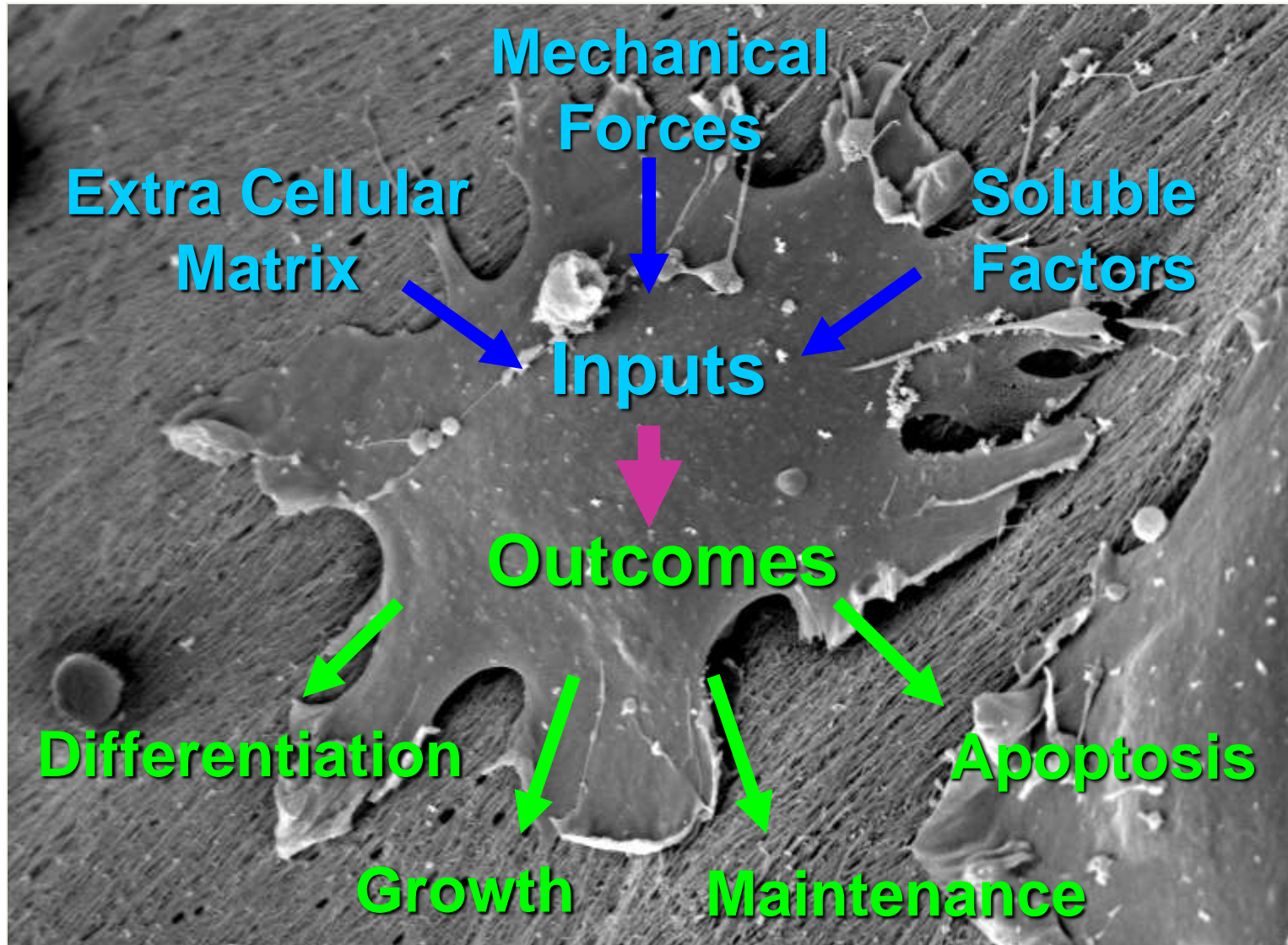


3D Tissue and Cellular Modeling

- 3D culture allows the study of complex mixtures of cells.
- Produces dynamic tissue-like interactions, cell-cell and cell-matrix.
- Establishes and maintains cellular level micro-environments or niches.
- Allows for the study of large scale tissue macro-environments.

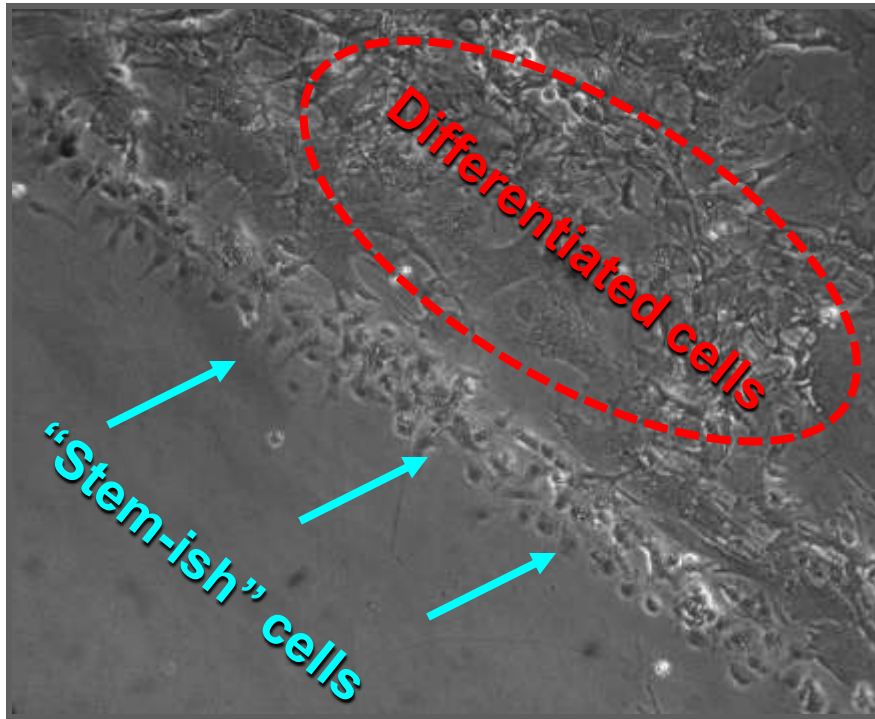


Microenvironments and Niches

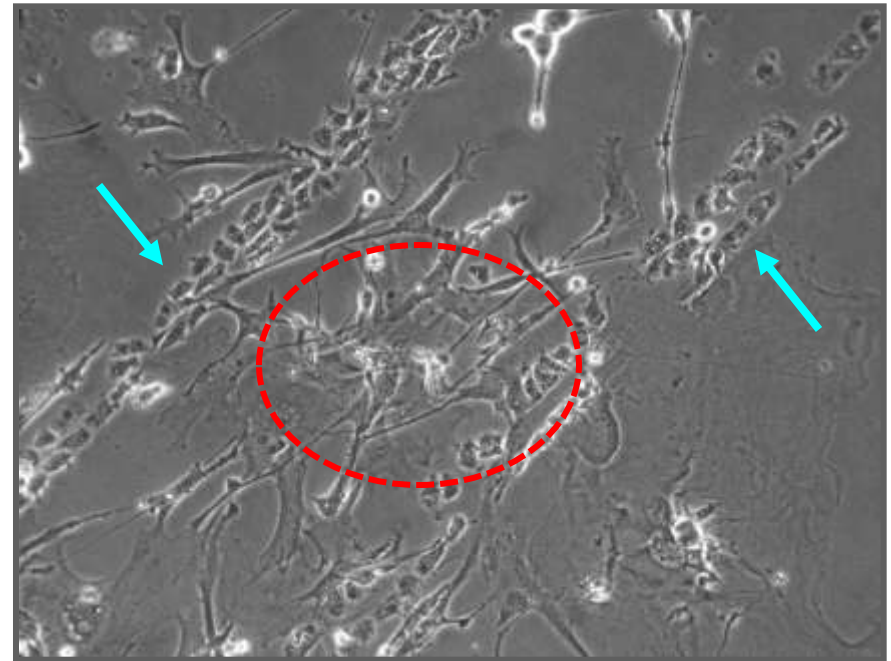


Primary Tissue Cultures:

Neural Monolayer Cultures from Midbrain Region



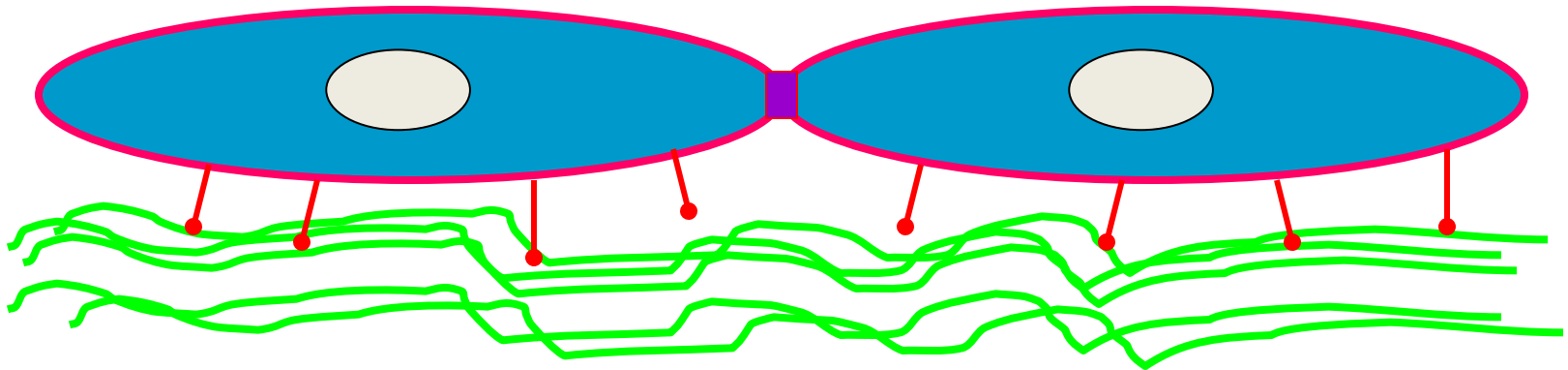
Even in “flat-cell” monolayer cultures, the environment of the cell can/does control its behavior.



Tissue Engineering Concepts

Cellular Properties:

- Cell/cell adhesions
- Cell/matrix adhesions
- Mechano and biochemical transduction



Matrix Properties:

- Biochemical
- Physical / mechanical
- Geometry: macro, micro and nano-scales

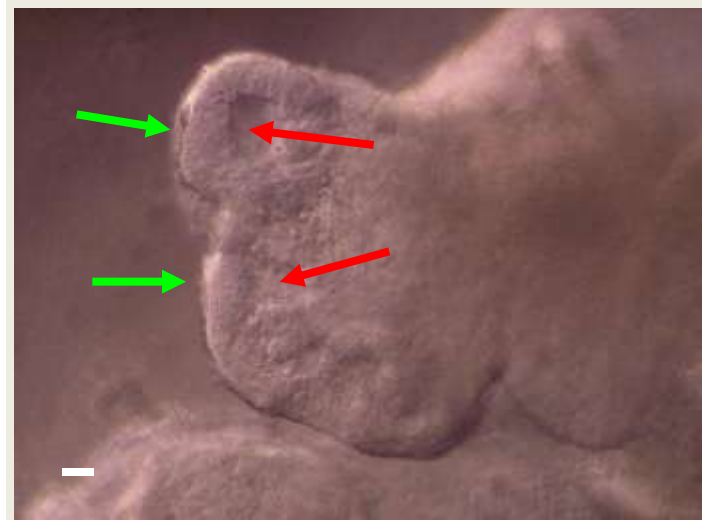
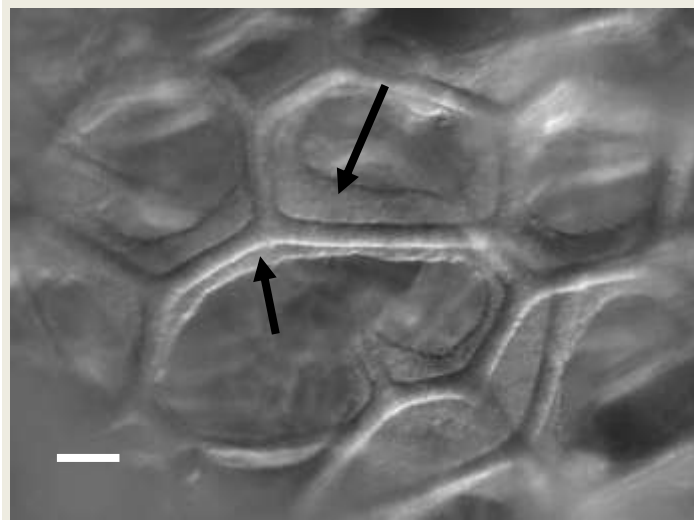
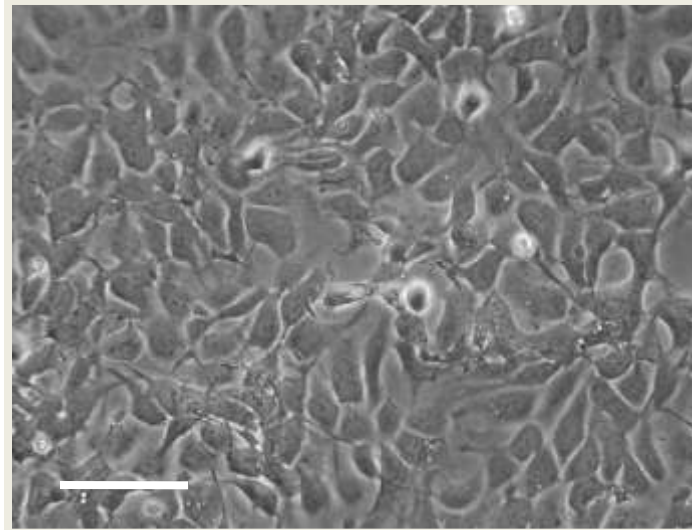
New “Tissue Engineering” Technology:

- Utilizes Natural ECM Materials
- Produces Complex Artificial Tissue (ATs) Constructs
- Applied to Cell Lines, Primary Fetal / Neonatal Tissues, Cancerous Tumors, and Embryonic Stem Cells

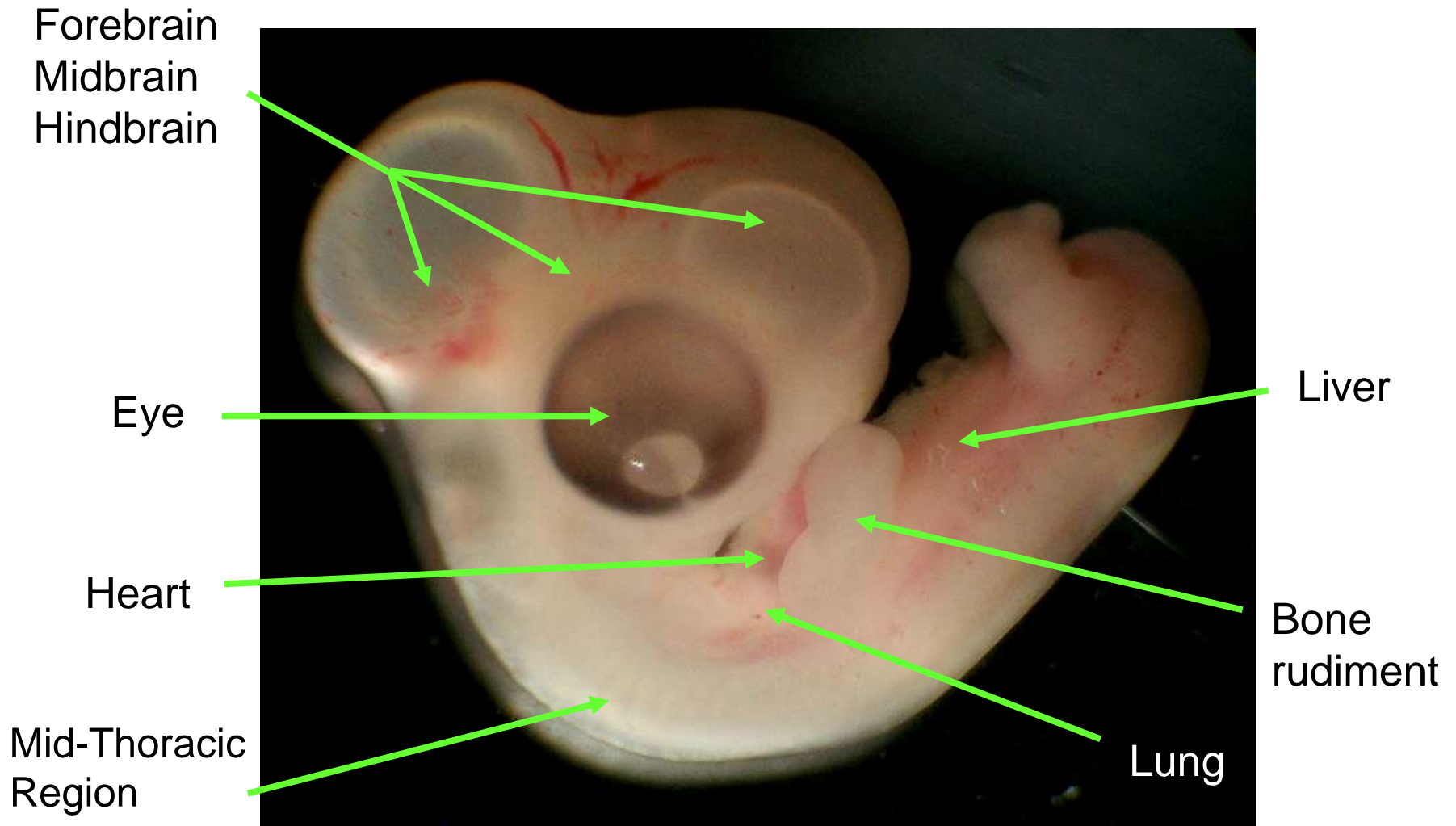


Artificial Tissues (ATs) from Cell Lines:

Epithelial (Embryonic Kidney)



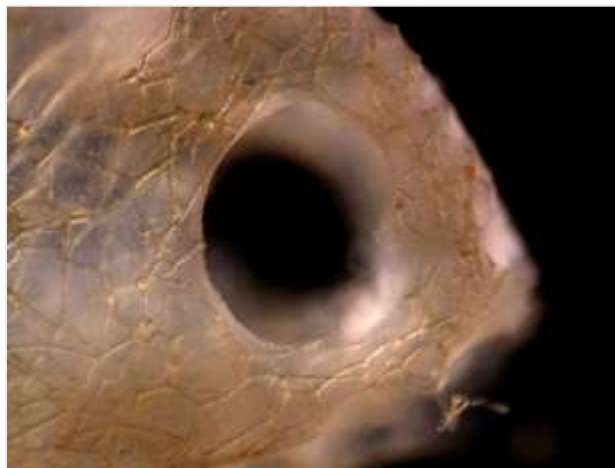
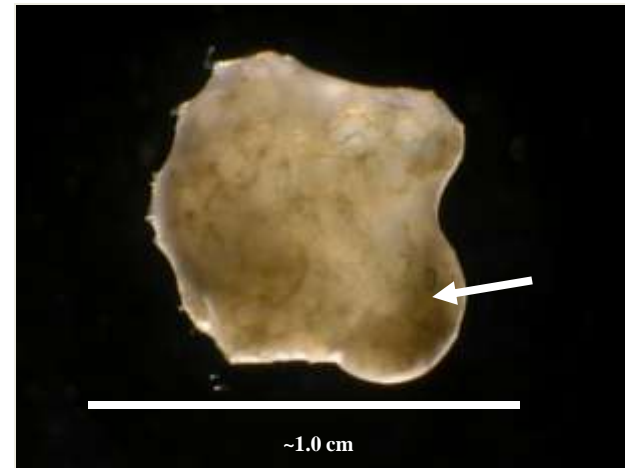
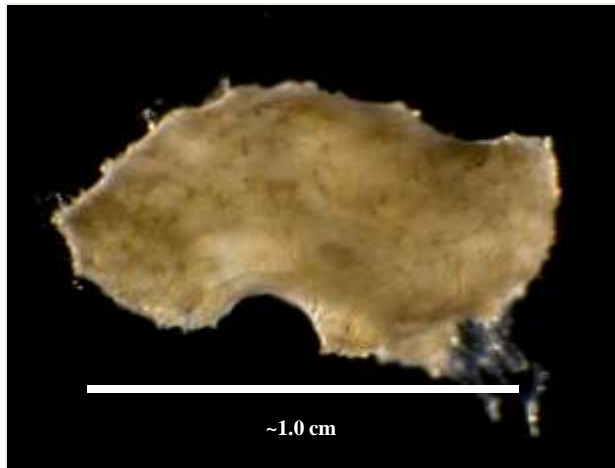
Avian Fetal ATs Studies



~6 day Stage Chicken Embryo

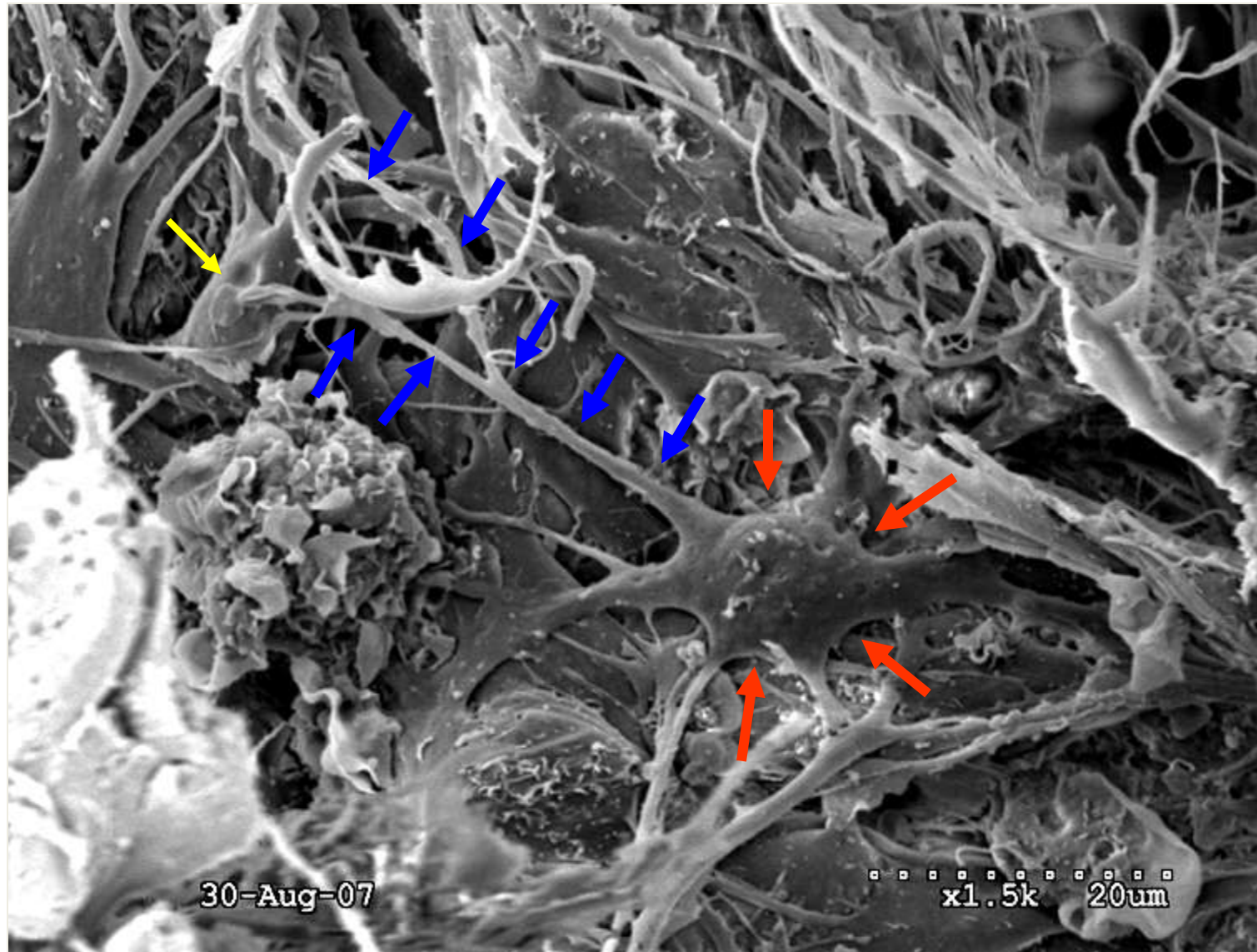
Artificial Neural Tissues

Large Scale Artificial Tissues from Midbrain Region



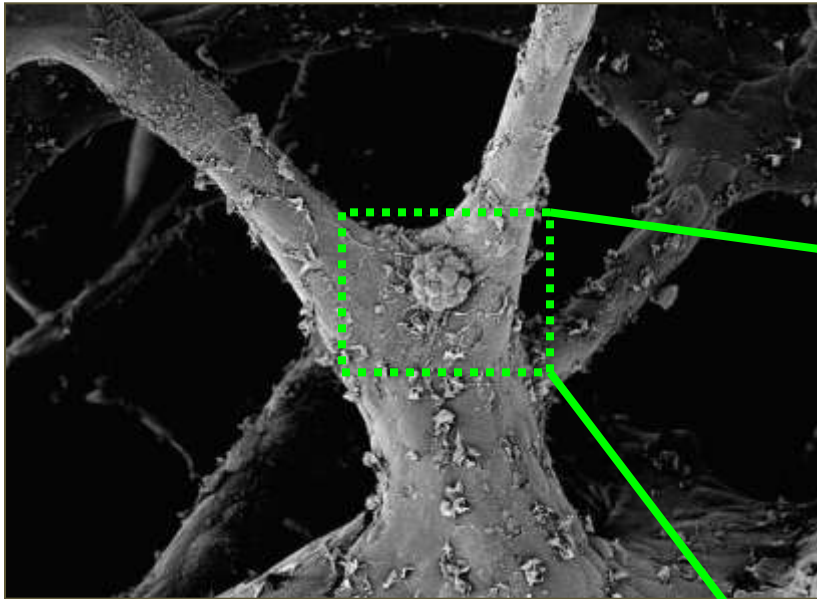
Artificial Neural Tissues

Chick Midbrain, 6 Day Embryo/2 Months Culture



Avian Fetal ATs Studies: Neural

Chick Midbrain, 6 Day Embryo/2 Months Culture



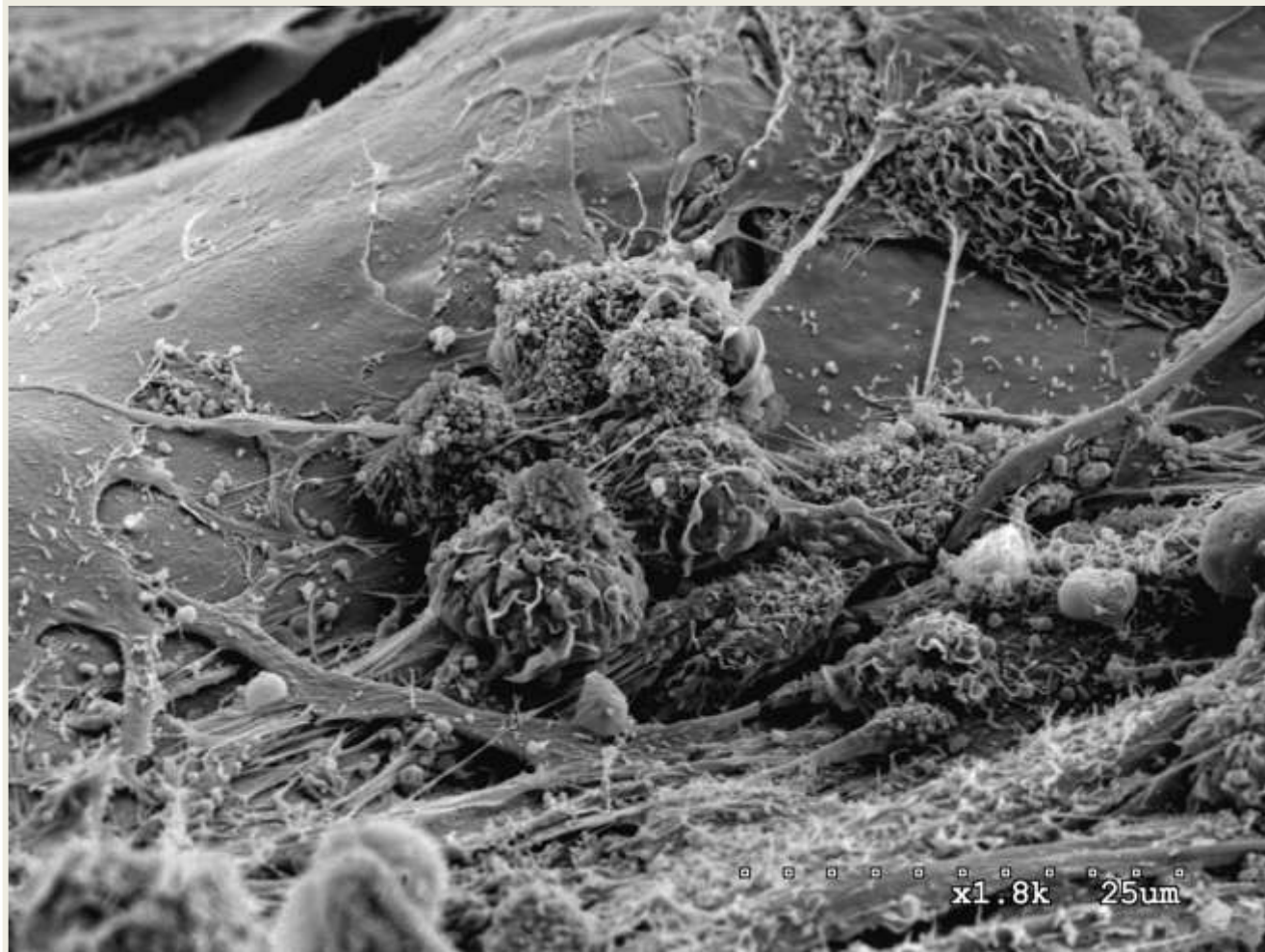
Cluster of neural
stem/progenitor cells.

Potential Applications of ATs Technology:

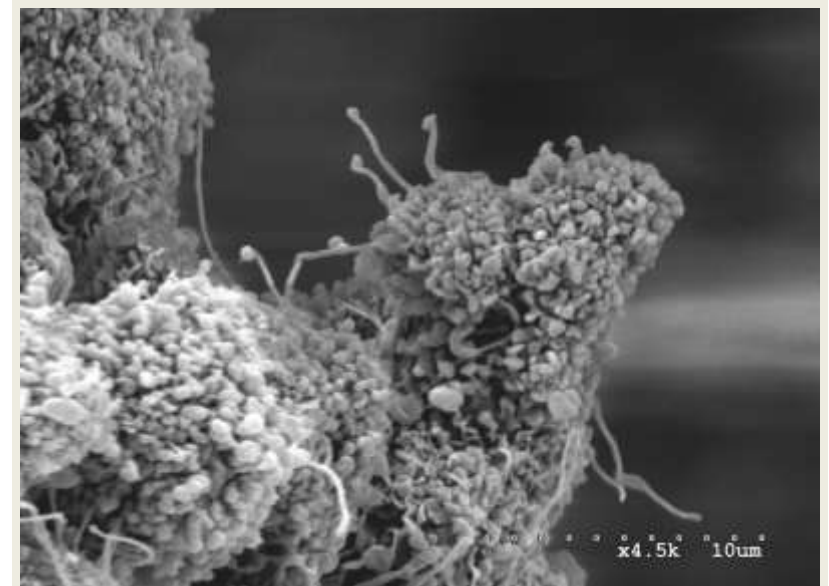
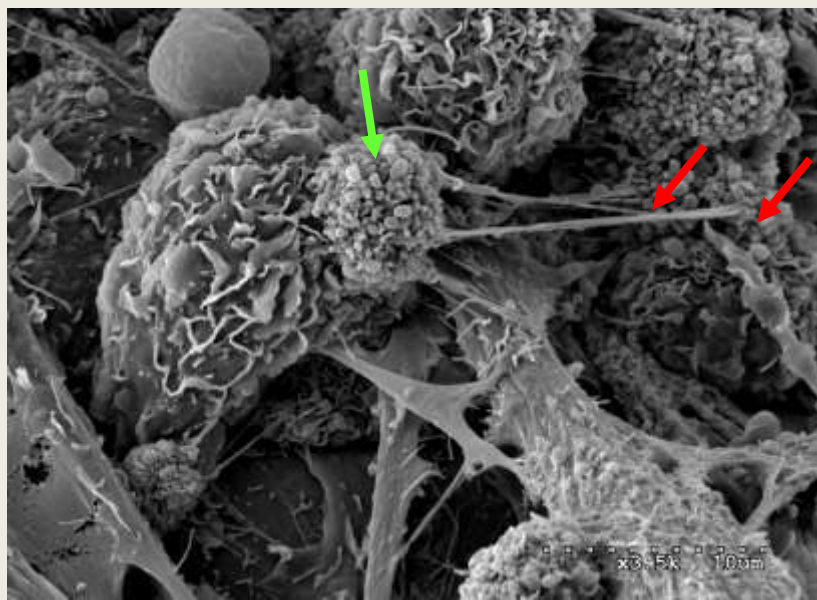
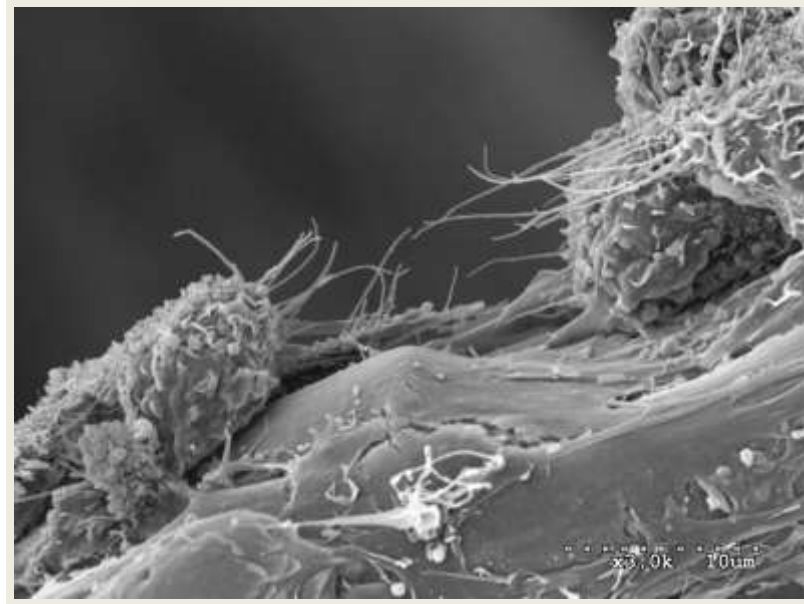
- Vaccine Development
- Pharmaceutical Testing
- Production of Recombinant Proteins
- Immunotherapy and Biomarker Development
- Personalized Translational Medicine



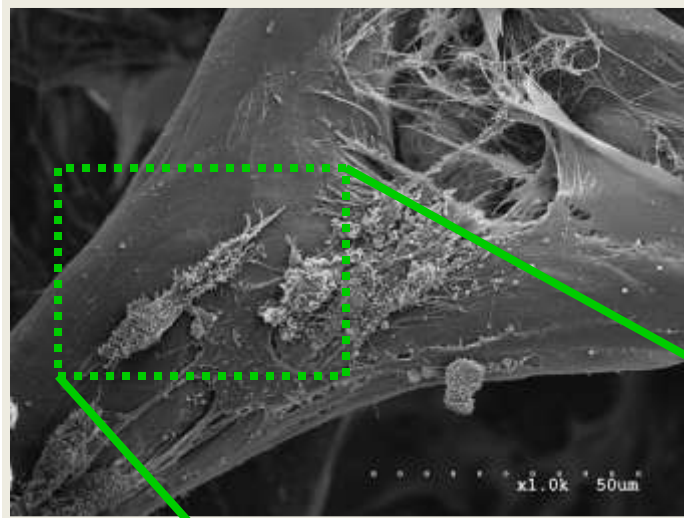
Artificial 3D Tumor Tissue: Glioblastoma



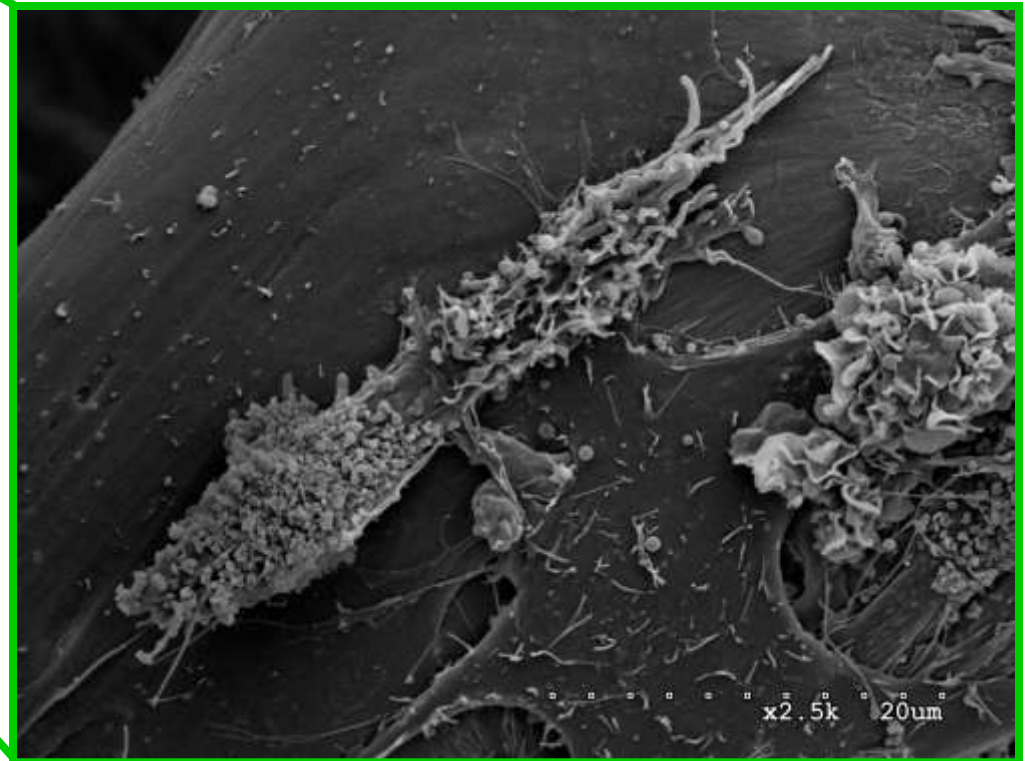
Artificial 3D Tumor Tissue: Glioblastoma



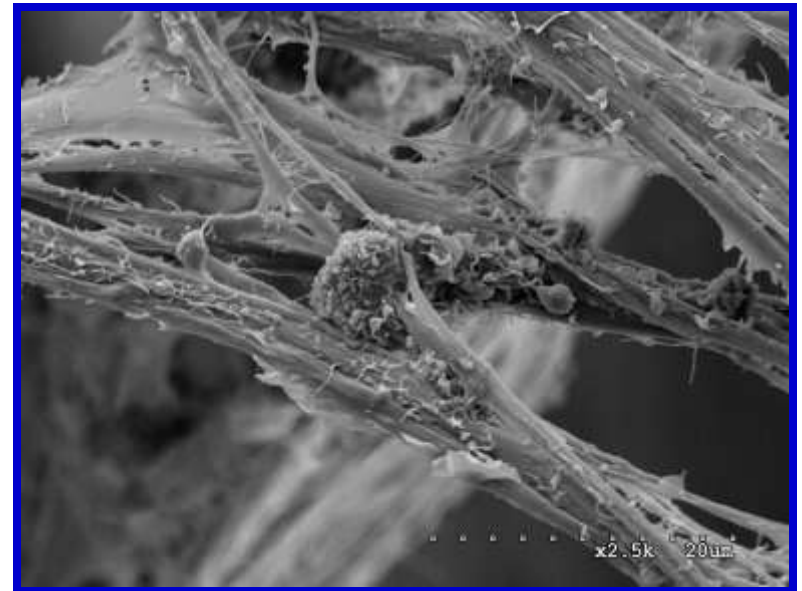
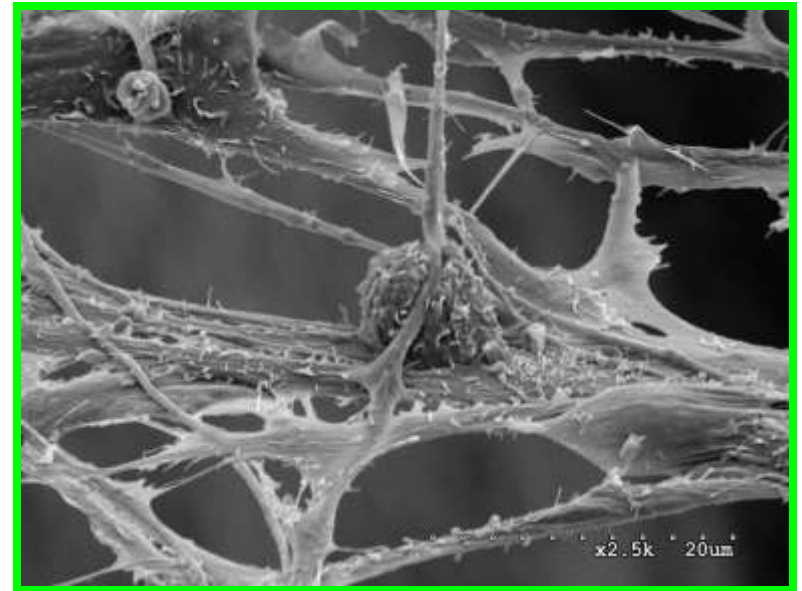
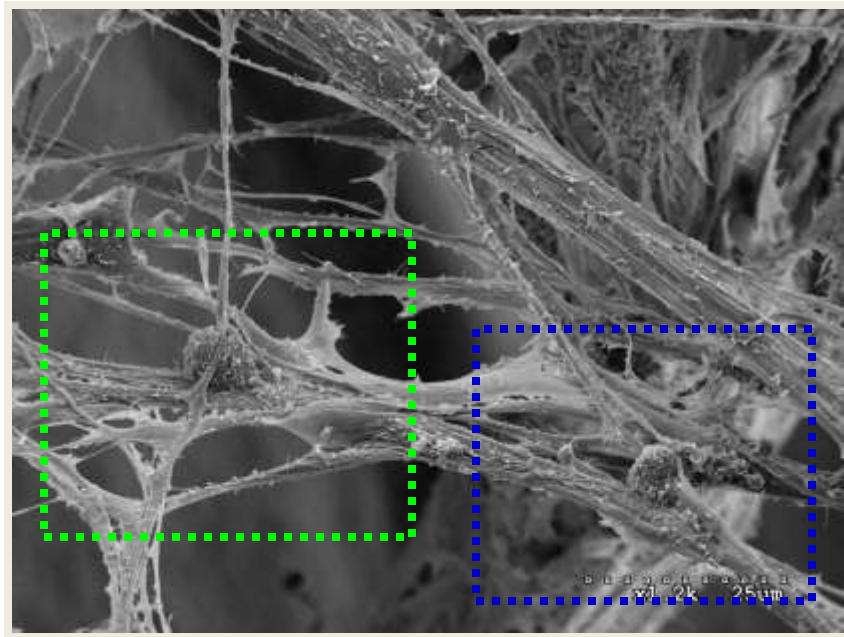
Artificial 3D Tumor Tissue: Glioblastoma



Modeling cancer cell motility and metastatic potential.



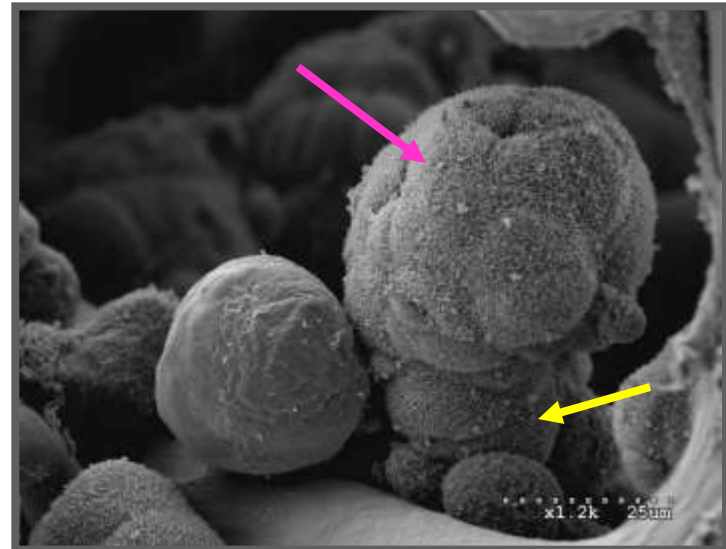
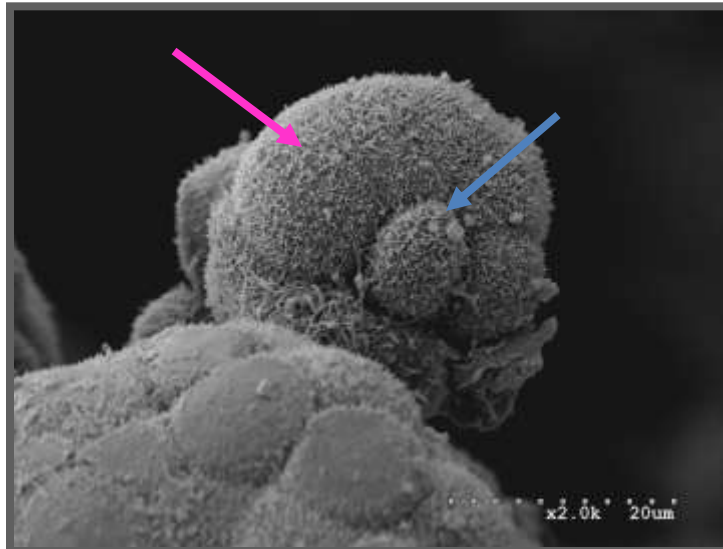
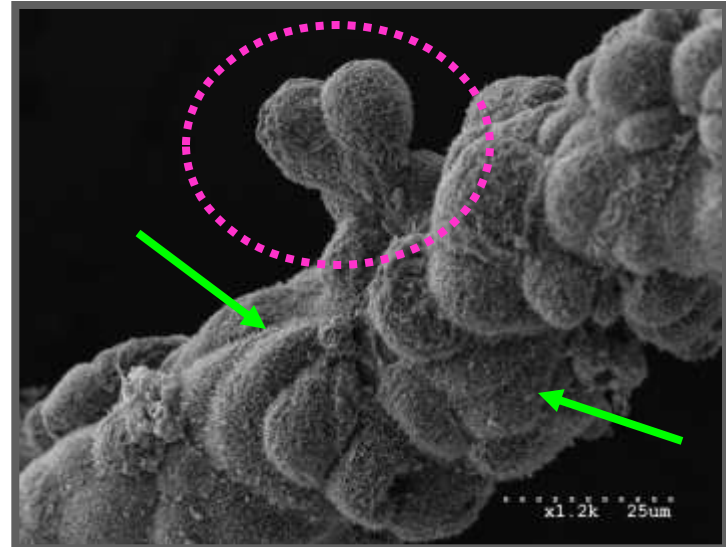
Artificial 3D Tumor Tissue: Glioblastoma



Modeling cancer cell differentiation.

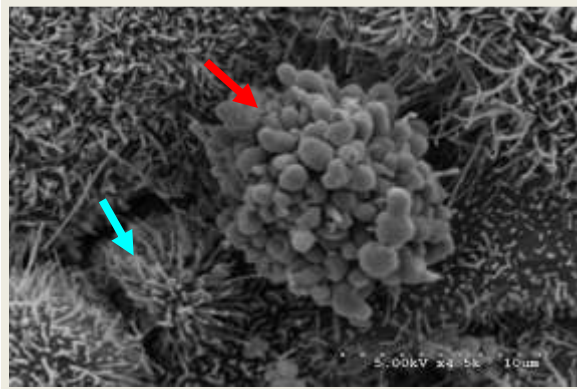
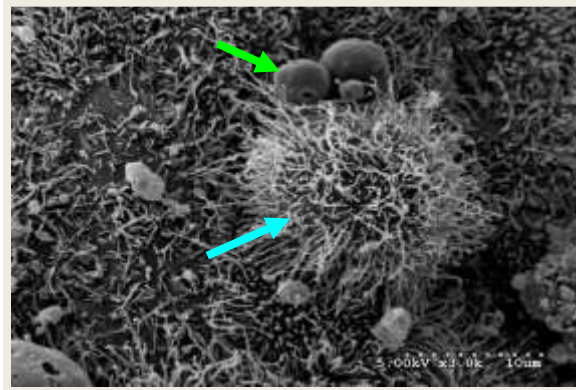
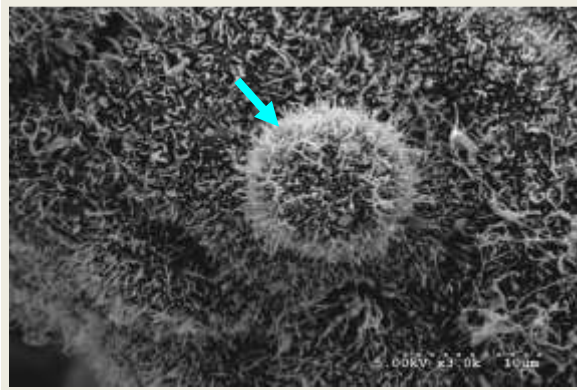
Cancer Cell Line ATTs:

MCF-7, Breast Cancer

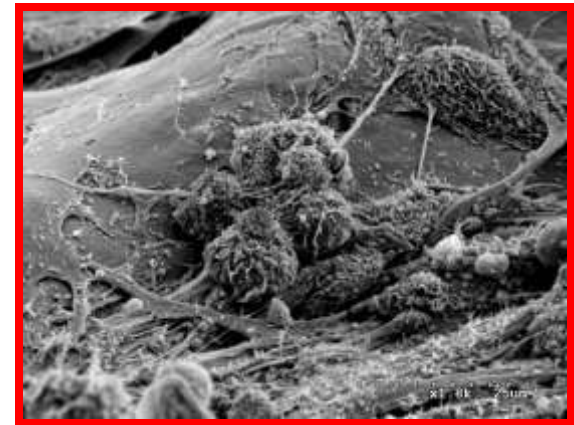
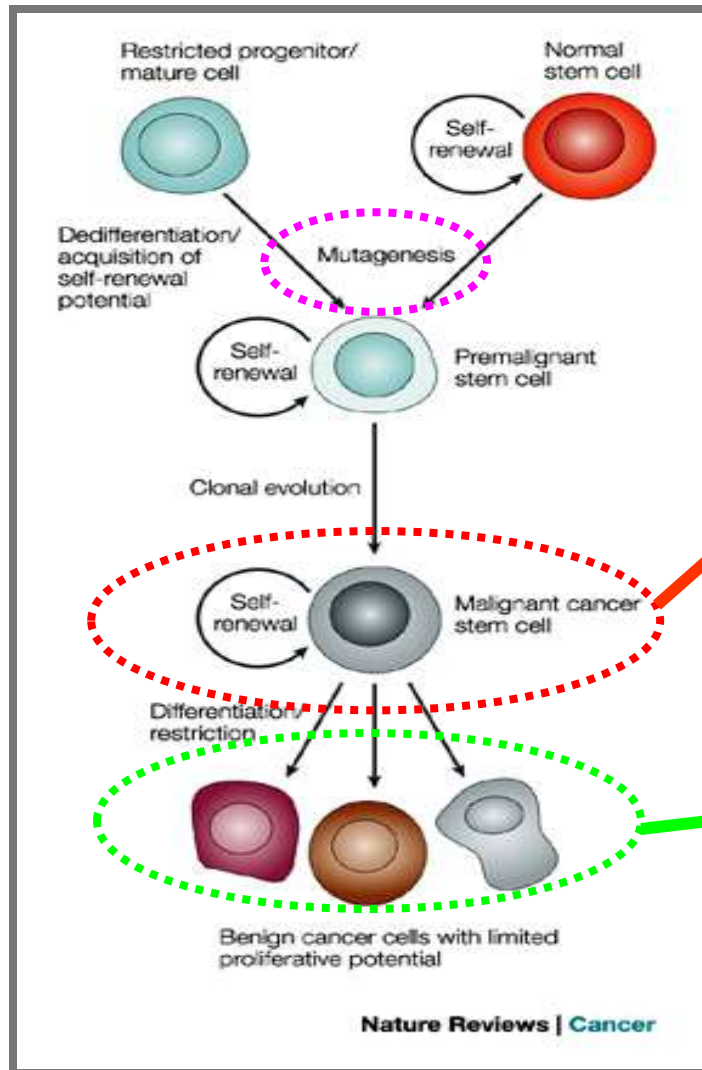


Cancer Cell Line ATTs: Hela, Cervical Carcinoma

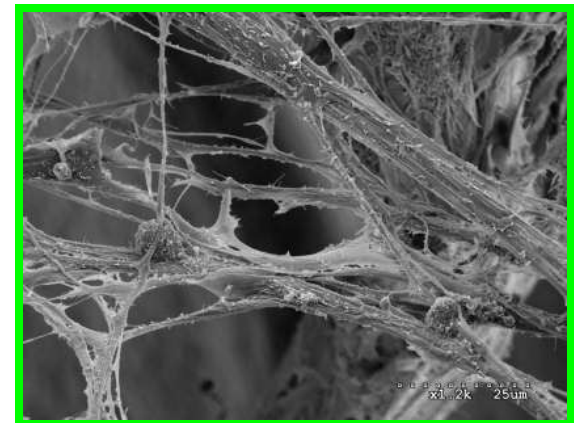
Surface Features of Hela Cell ATTs



Tumor Stem Cell Hypothesis



Support for the hypothesis?



Applicable to personalized medicine?

Personalized Cancer Medicine Project

Concept:

- Employ individualized 3D ATTs to define the nature and responses of a patient's own tumor.
- Accurately predict outcomes for specific treatment approaches.
- Design an individualized therapeutic plan based on the translational experimental results obtained in-vitro.

Overall Goals:

- More effective treatment design.
- Improved patient outcomes: survival and quality of life.



Human Tumor 3D Culture Studies

Dr. Ray Haselby, Marshfield Clinic

Dr. Christopher Cold, Marshfield Clinic

Dr. Peter Dahlberg, Rivers Cancer Center

Dr. Michael Pickert, UW-Stout

Additional Contributors:

Dr. Wernberg

Dr. Douglas-Jones

Dr. Anderson

Dr. Kolquist

Dr. Wengert

Dr. Maki

Carol Beck, Clinical Research Coordinator

Faith Bosman, PA



Human Tumor 3D Culture Studies

Supported by:



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PDF Grant 2008

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CAS and CAFES Lab Mod Grants

CAS Dean, Grants in Aid of Research

UWRF Biology Department

UWRF Foundation

2002 Teaching Support Grant

2003 Student Summer Stipend

2004 Imaging Center Grant

2006 Tissue Culture Teaching

and Research Grant

2008 Research Microscope Grant





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Questions?



Nanotechnology in Medicine: Brain Tumor Targeted Nanodelivery Systems for Therapy and Diagnosis

A.B. Madhankumar
Department of Neurosurgery
Penn State Hershey



Nano Drug Delivery Systems

1. Lipid based drug delivery systems
 - Liposomes, Solid Lipid Nanoparticles (SLN)
2. Non-lipid drug delivery systems
 - Synthetic:
 - Dendrimers, Fullerenes, Quantum Dots (QD's), Iron Oxide Nanoparticles
 - Natural:
 - Gelatin, Chitosan, Alginate Nanoparticles

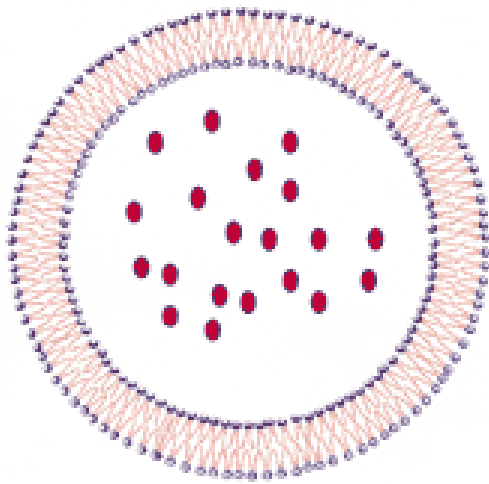


Nano Drug Delivery System for Brain Tumors

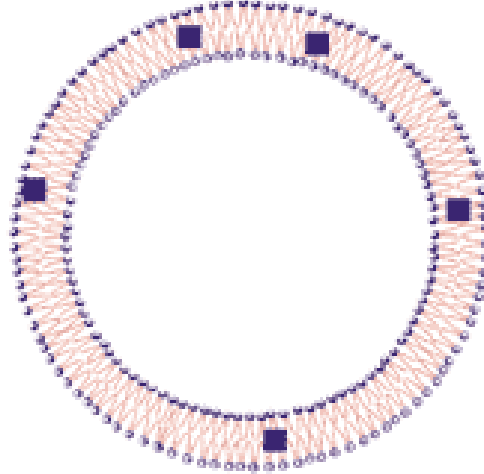
- Cytotoxin delivery to tumor cells
 - Molecular Cancer Therapeutics (Madhankumar et al. 2006, 2009)
- Deliver contrast enhancement agents to visualize tumor cells
 - Magnevist liposomes (Kari Duck)
- RNA interference gene therapy to increase vulnerability of tumor cells to existing therapeutic agents and make resistant tumors vulnerable
 - Have a cationic liposome delivery platform (Xiaoli Liu, 2011)
- Target the tumor cells in CSF and tissues with fluorescent quantum dots (Cody Weston)



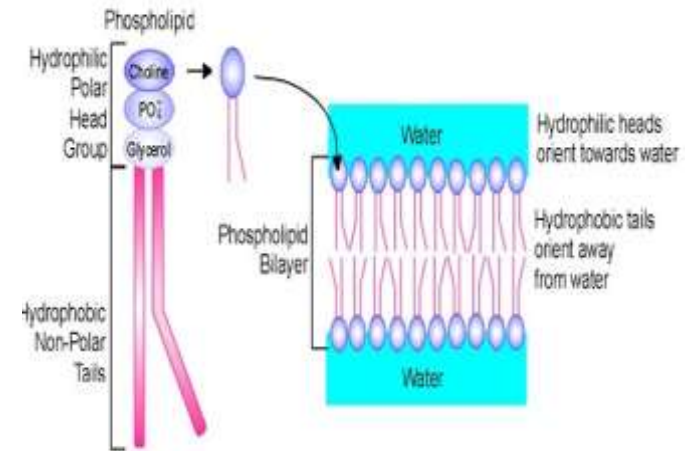
Liposomes: Lipid Bilayer Membranes



Hydrophilic drugs



Hydrophobic drugs



Goal:

To modify the surface of liposomes with proteins to selectively target cancer cells.

We use Interleukin 13:

IL13R α 2 (high affinity receptor)(glioma tumor)

IL13R α 2 receptors are over expressed on GBMs



Scheme of Liposome Preparation

DPPC, Chol, DSPE-
PEG2000, DSPE-PEG-
Maleimide

Methanol/chloroform
Or
Methanol/t-butanol

Solvent evaporation

Dry lipid film

Reconstitution
(NH₄)₂SO₄
pH5.5
(sonication)

Extrusion

10 times, 55-60C,
100nm, 50nm
membrane

Liposomes

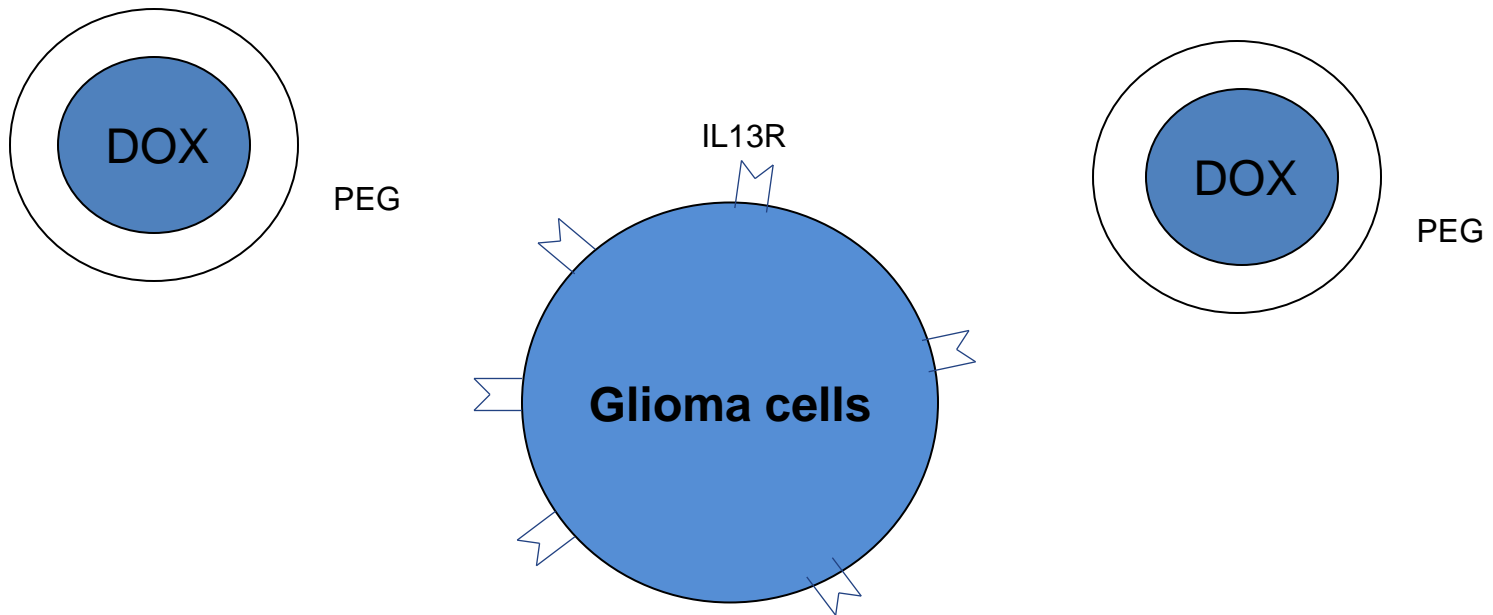
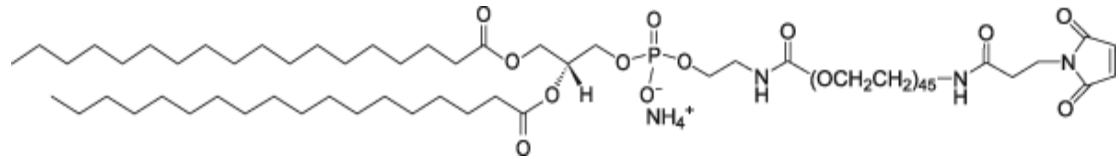
Conjugate
with IL13

Tumor targeted
liposomes



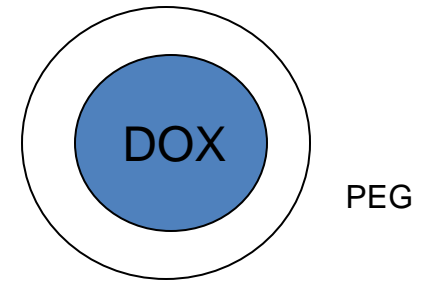
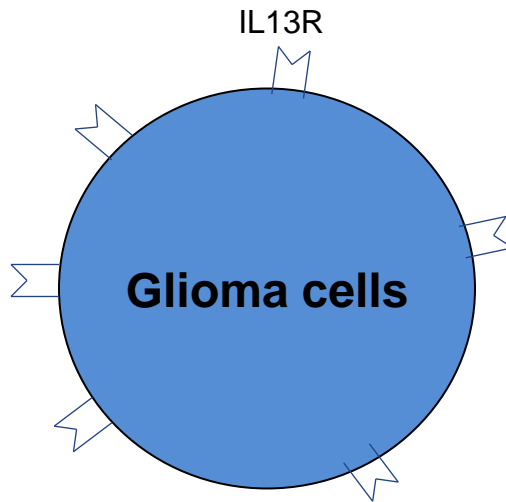
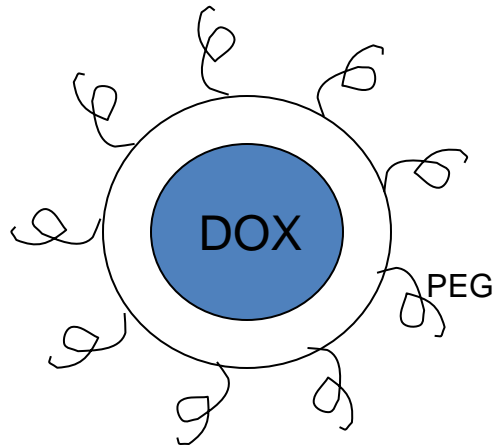
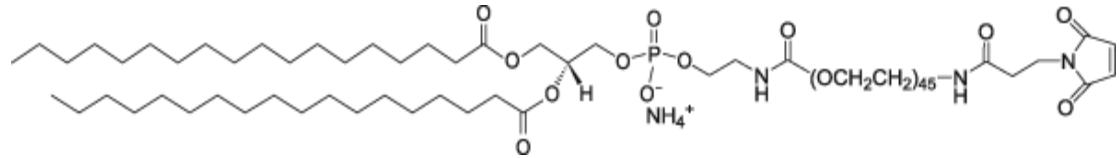
Surface Conjugation of Proteins for Selective Targeting

DSPE-PEG-Maleimide

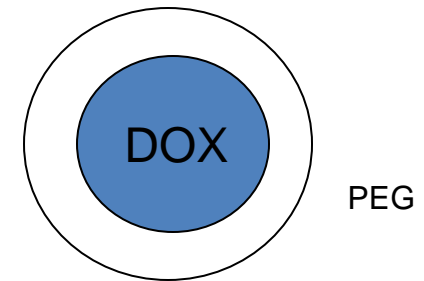
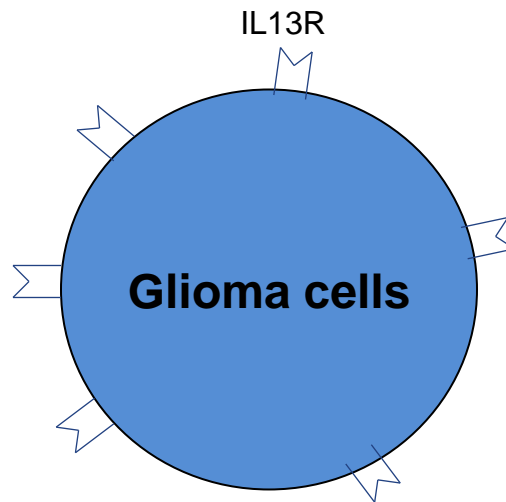
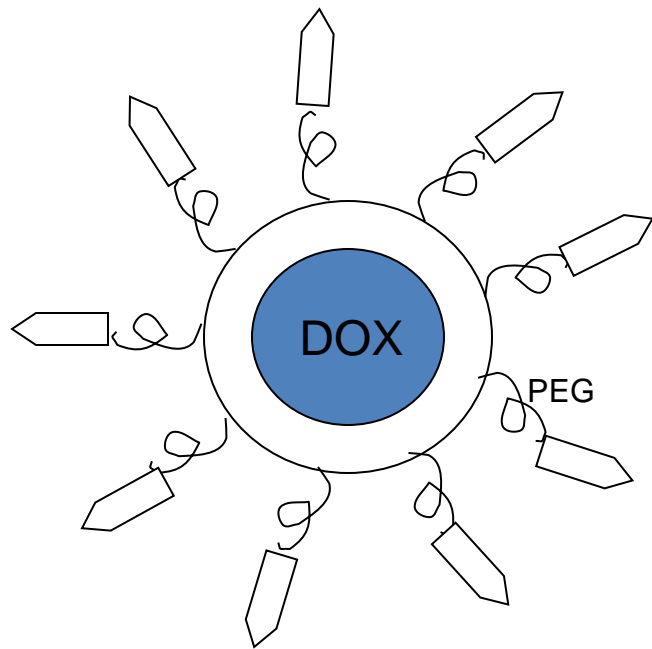
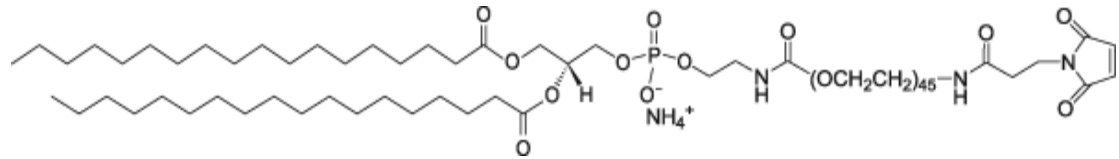


Surface Conjugation of Proteins for Selective Targeting

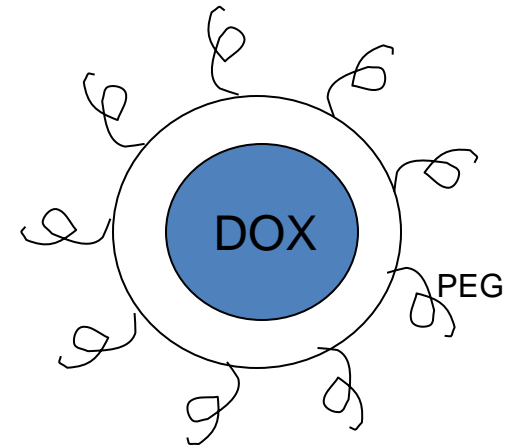
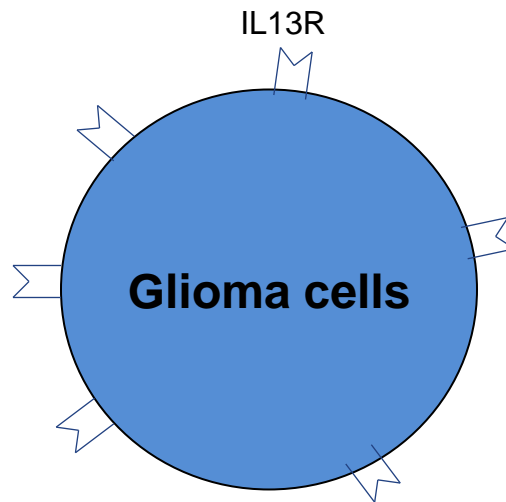
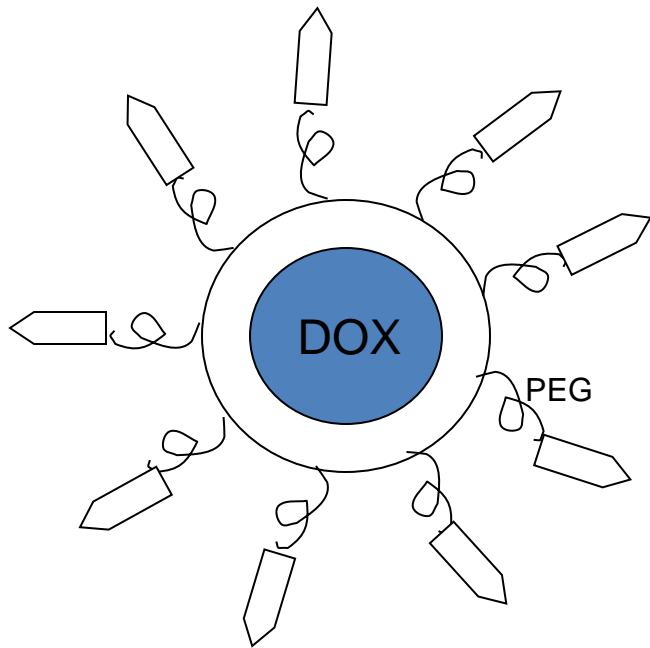
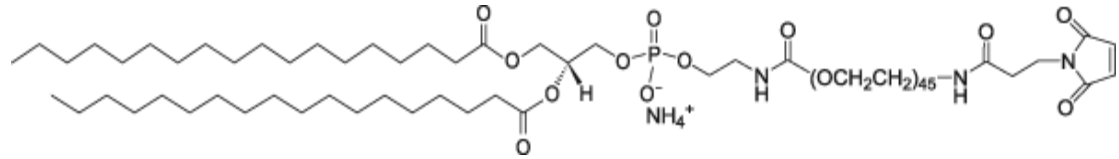
DSPE-PEG-Maleimide



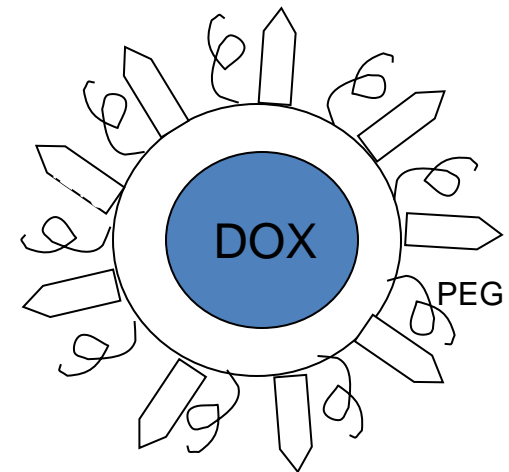
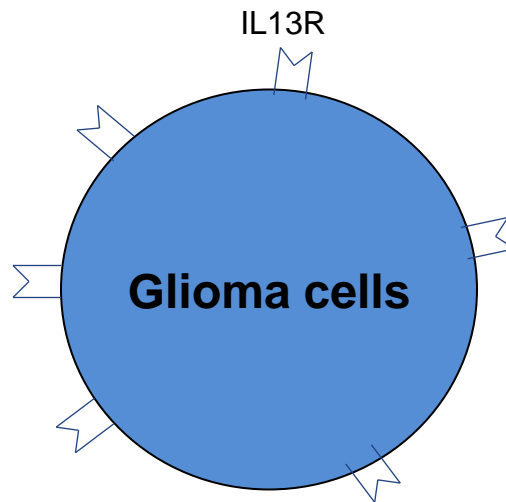
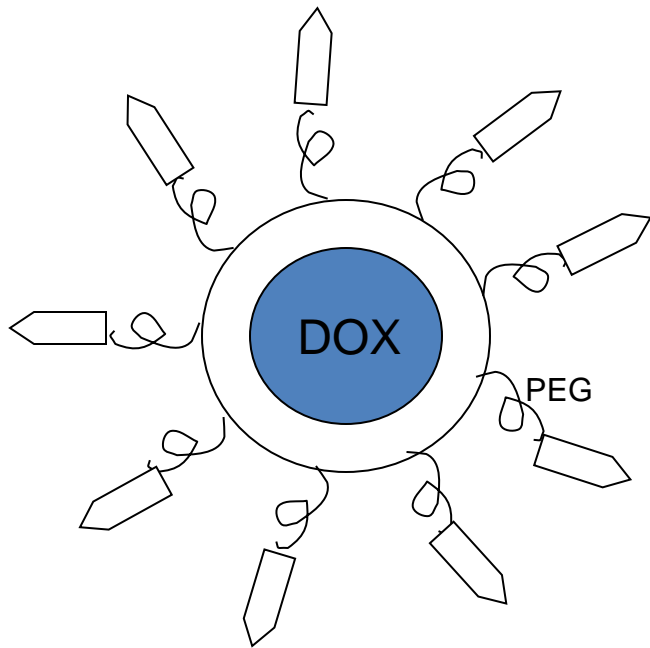
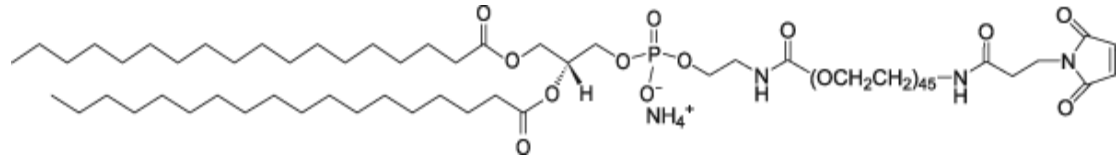
Selective Targeting



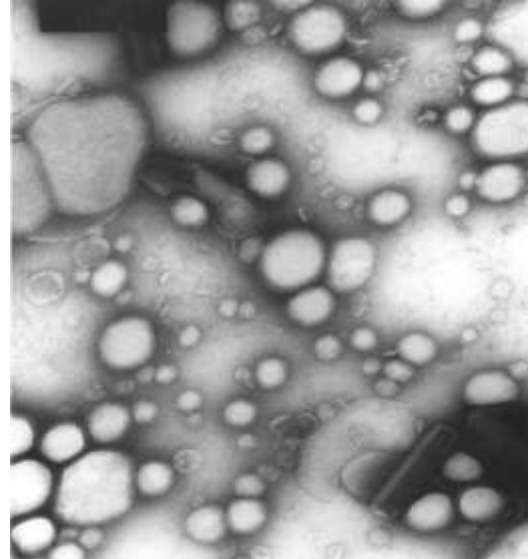
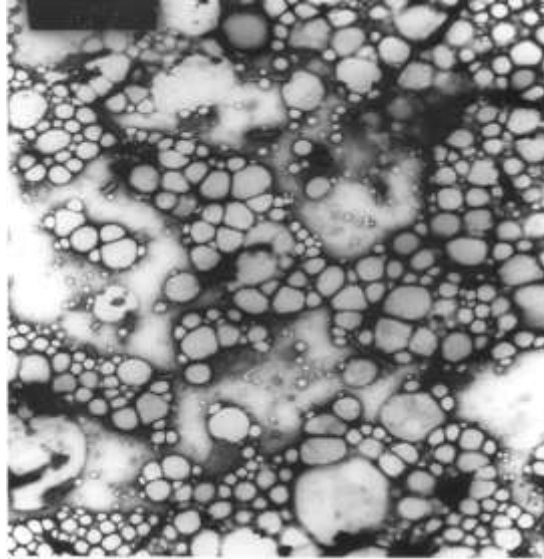
DSPE-PEG-Maleimide



DSPE-PEG-Maleimide



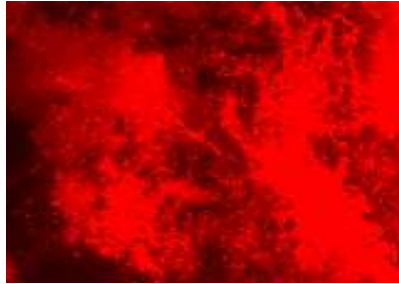
TEM Images of IL13 Conjugated Liposomes



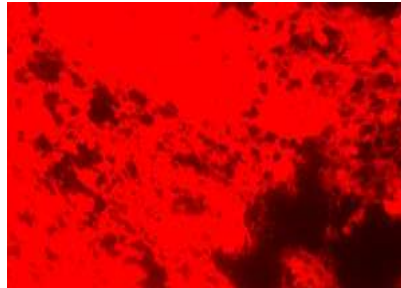
Particle size analysis (50-150nm size range PDI= 0.2-0.4)

Zeta potential : -35 mV

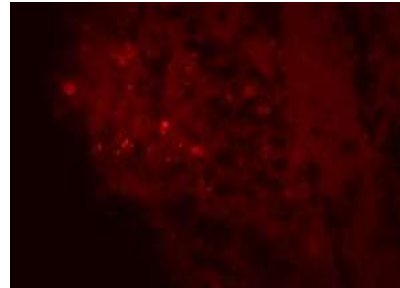
Binding of Fluorescent IL-13 Liposomes to Tumor Sections: Receptor Mediated



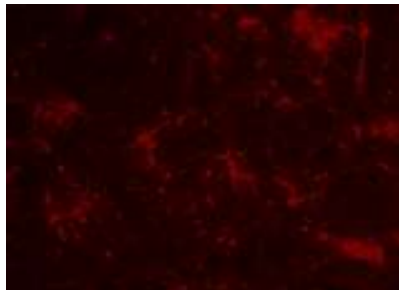
GBM# 5



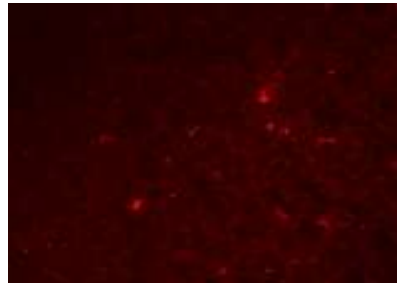
GBM#15



GBM#15(after blocking with
IL13Rα2 receptor antibody)



Medulloblastoma



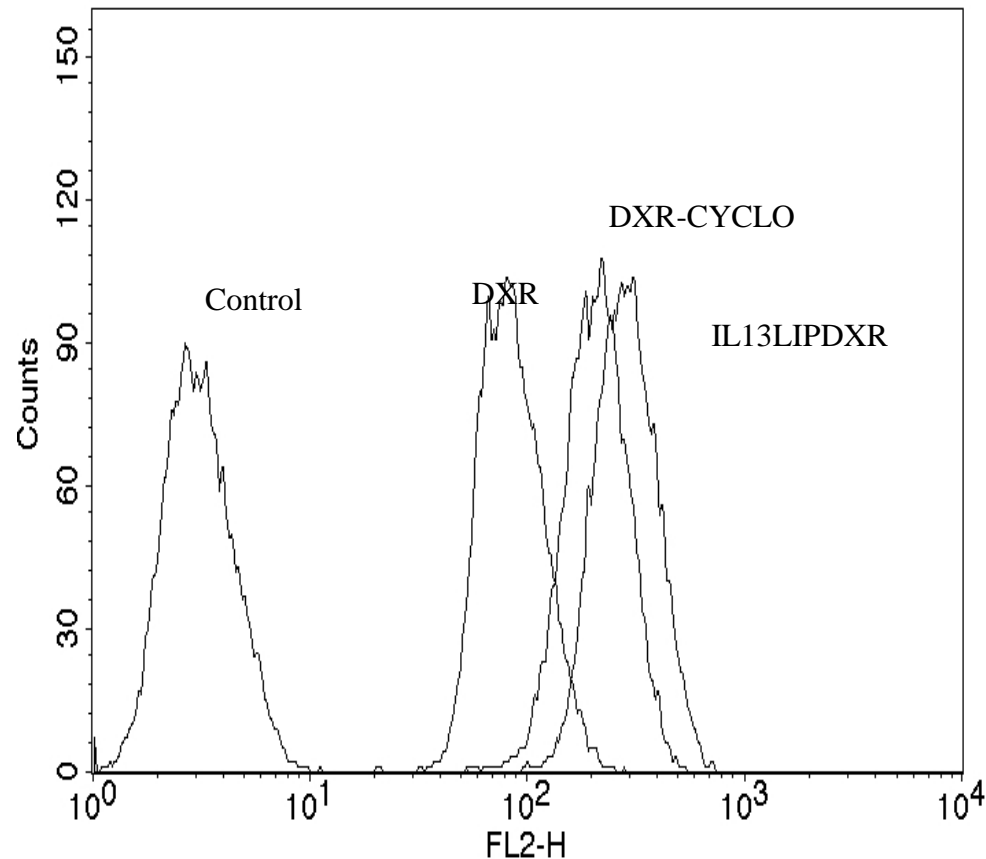
Normal Human Cortex



Pilocytic Astrocytoma

Molecular Cancer Therapeutics 5(12):3162-3169, Dec 2006.

Pgp Mediated Drug Resistance: U251 Glioma Cells



These data show that the liposome Encapsulated drug (DXR) can avoid extrusion by the multi-drug resistance system for at least 2 hours

(MDR was blocked by cyclosporine A)

T1 Contrast MRI Images During the Treatment

Targeted DXR/LIP

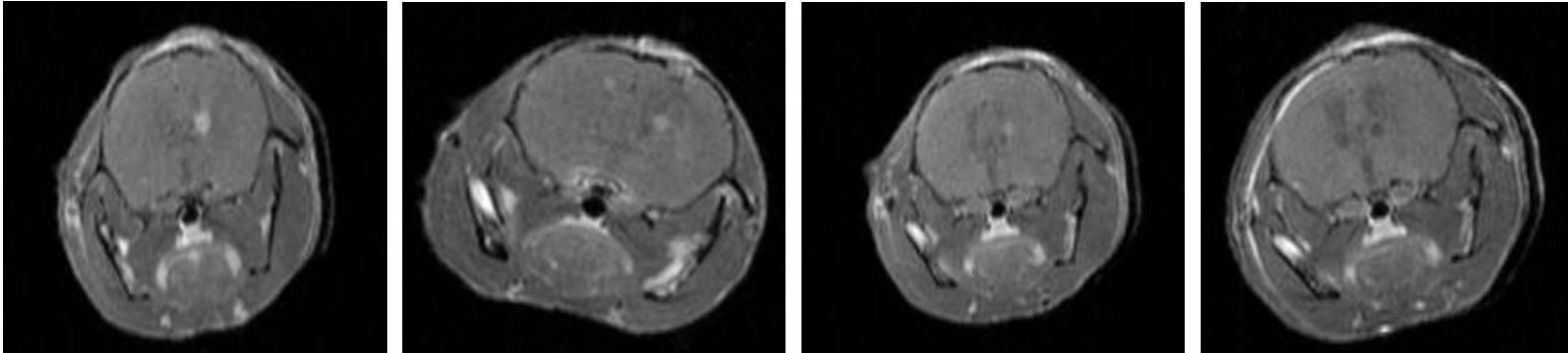
1st MRI
Prescan

2nd MRI
1 week post
treatment

3rd MRI
2 week post
treatment

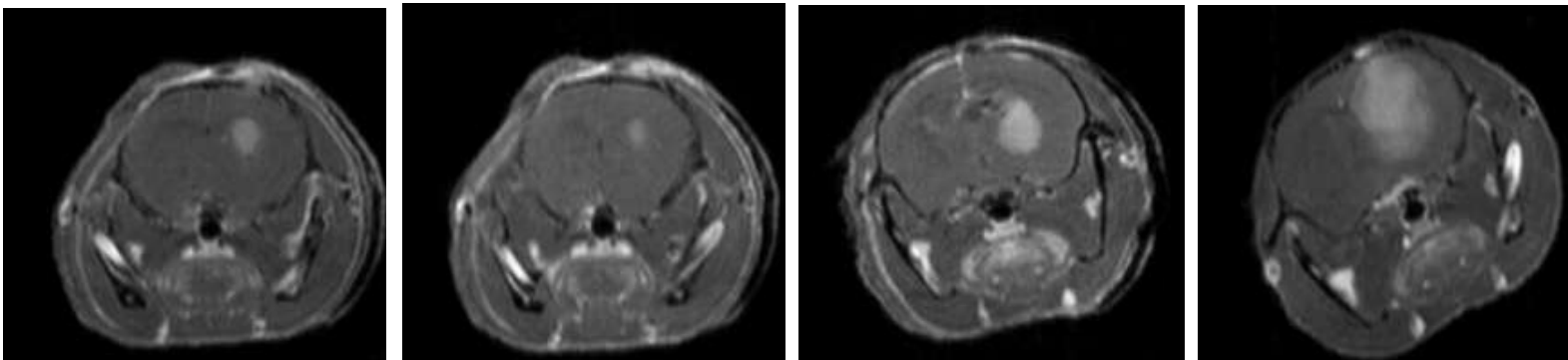
4th MRI
3 week post
treatment

A



Untargeted DXR/LIP

B

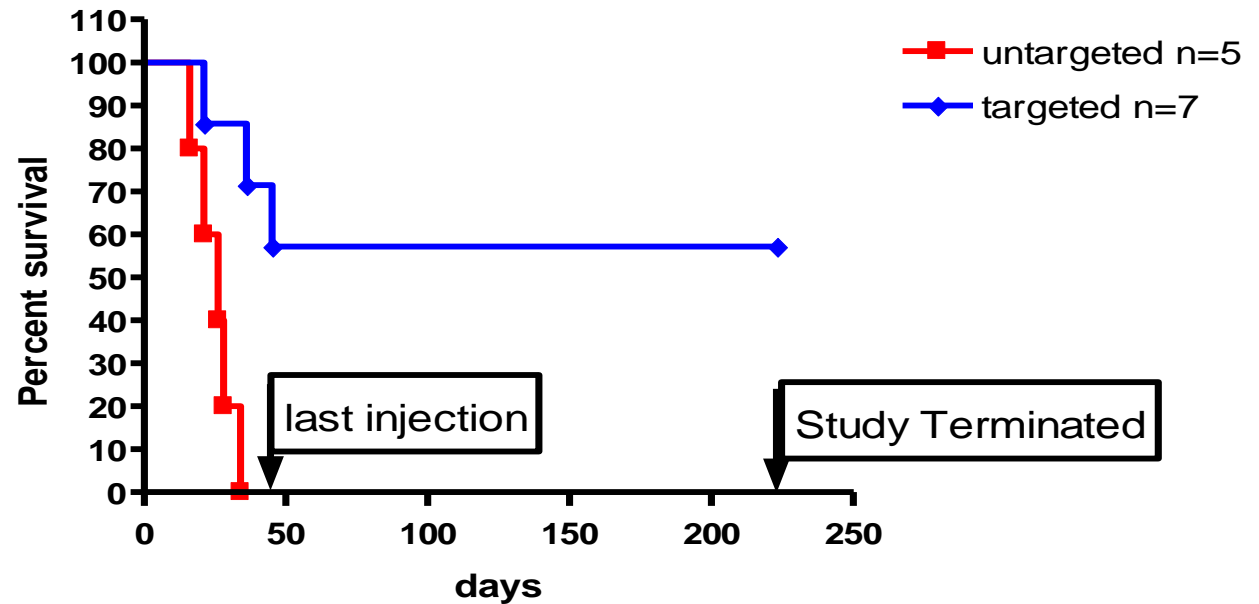


Kaplan-Meyer Survival Graph

Median survival
untargeted=25 days

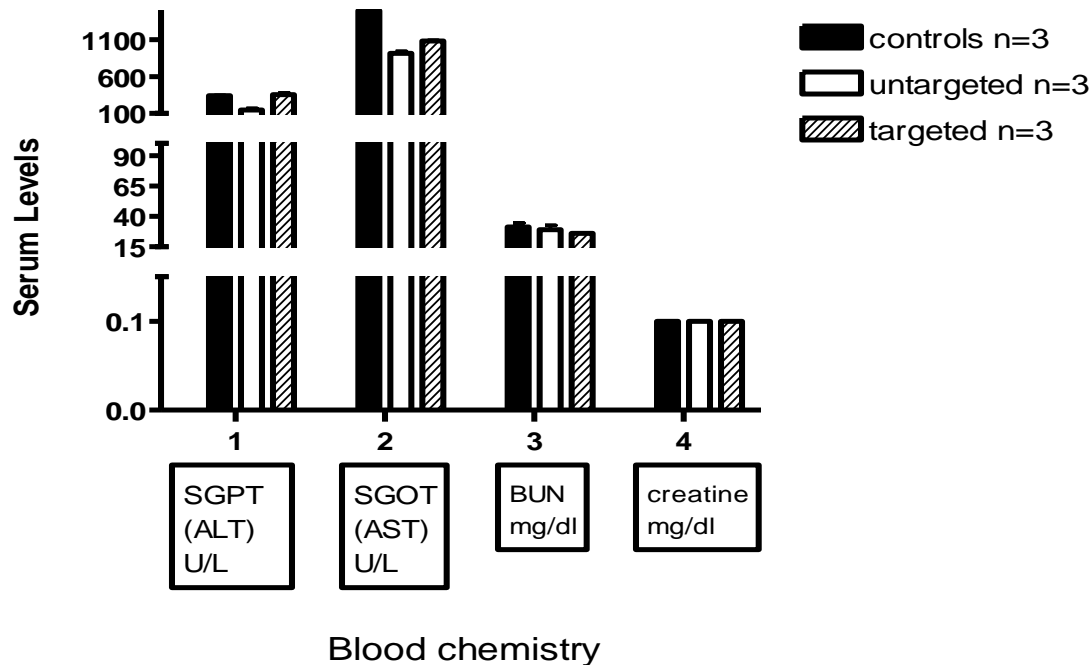
Median survival
targeted=142 days

P value=0.0149



Serum Chemistry of Treated Mice:

Treatment with liposomes does not cause toxicity to liver or kidney



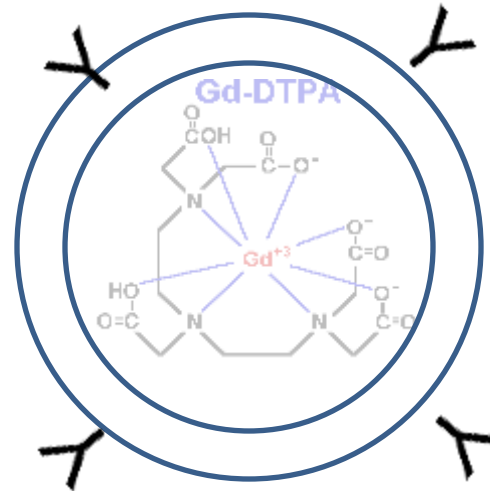
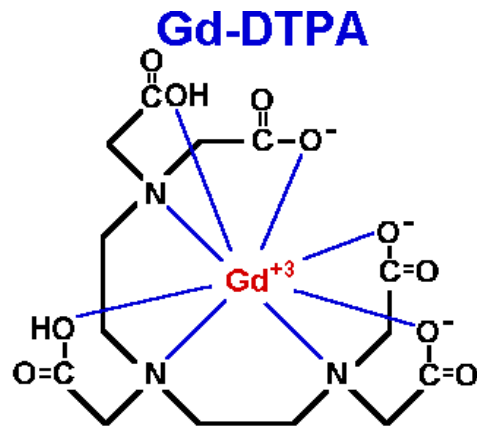
Conclusions: Liposomes

- Targeted nanovesicles can deliver chemotoxins to human brain tumor cells more effectively than non-targeted nanovesicles
- Targeted nanovesicles appear safe
- This technology chosen by NCI/NCL for collaboration for pharmacokinetics and biodistribution studies



Tumor Specific Receptor Targeted Liposomes Carrying MRI Contrast Agents

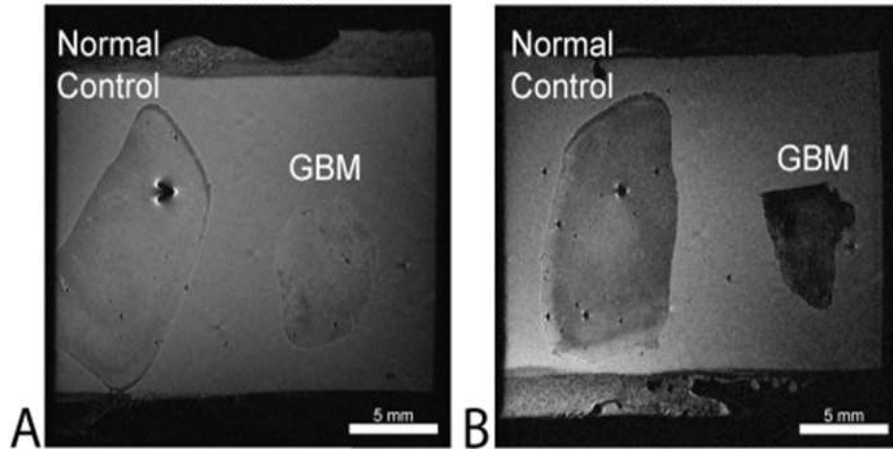
Positive contrast enhancing agents (reduce T1 relaxation time of the surrounding water protons)



MRI images of tumor sections

Liposome w/o
Gadolinium

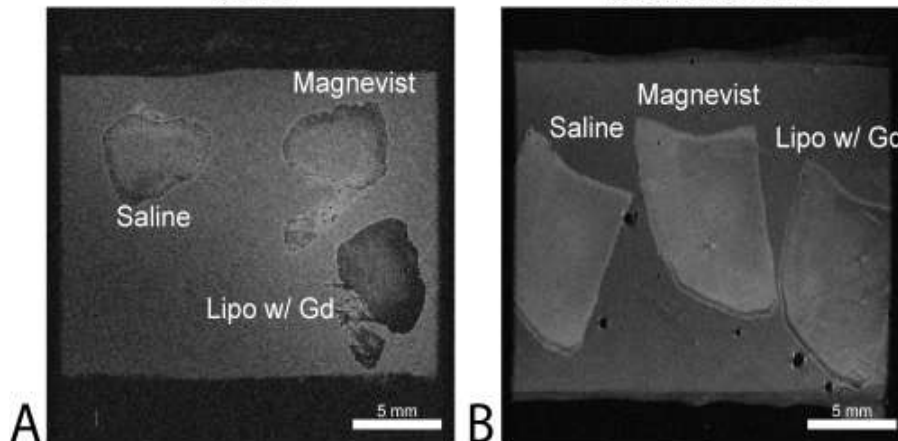
Liposome with
Gadolinium



T1 weighted images with a TR of 500ms of Normal Control and Glioblastoma Multiforme tissue with IL-13 Conjugated Liposomes. The image provides evidence for both selective binding of the IL-13 Conjugated Liposomes to GBM samples but also shows that liposomes containing gadolinium alter T1 contrast. The scale bar is 5mm in length for both images.

GBM

Normal Control



T1 weighted images with a TR of 500ms of (A) GBM and (B) Normal control tissue samples. The molar gadolinium concentrations of Magnevist and IL-13 Conjugated Liposomes containing Gadolinium were standardized to the clinical concentration of gadolinium in blood. Saline and Magnevist did not alter T1 for either GBM or control tissue samples. GBM samples incubated in IL-13 Conjugated Liposomes containing Gadolinium do show altered T1 contrast compared to control tissue. The included scale bar is 5 mm in length for both images.

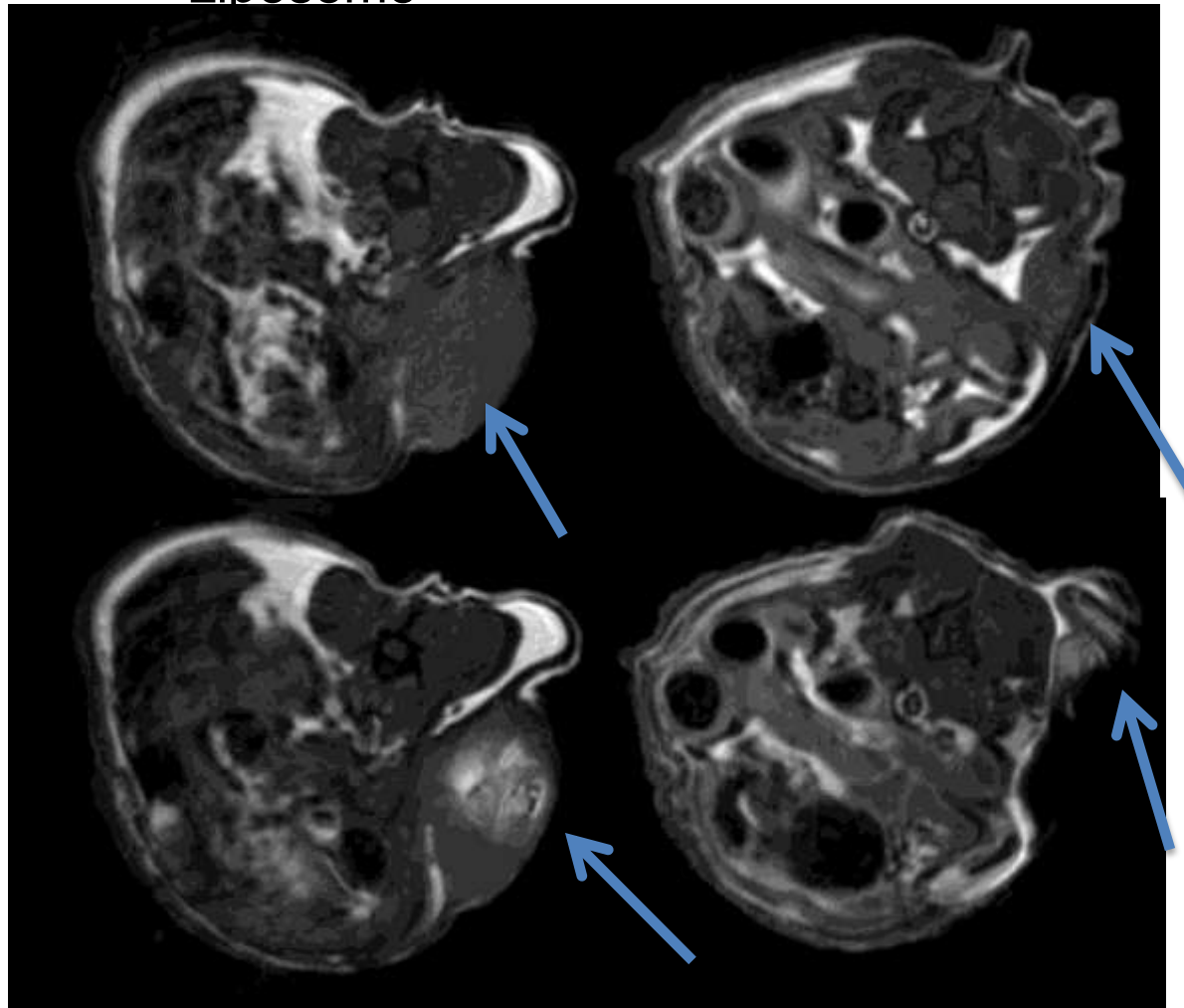
T1 Contrast MRI of IL-13 Targeted Gadolinium Liposome in Subcutaneous Tumor

IL-13 Targeted
Liposome

Magnevist Control

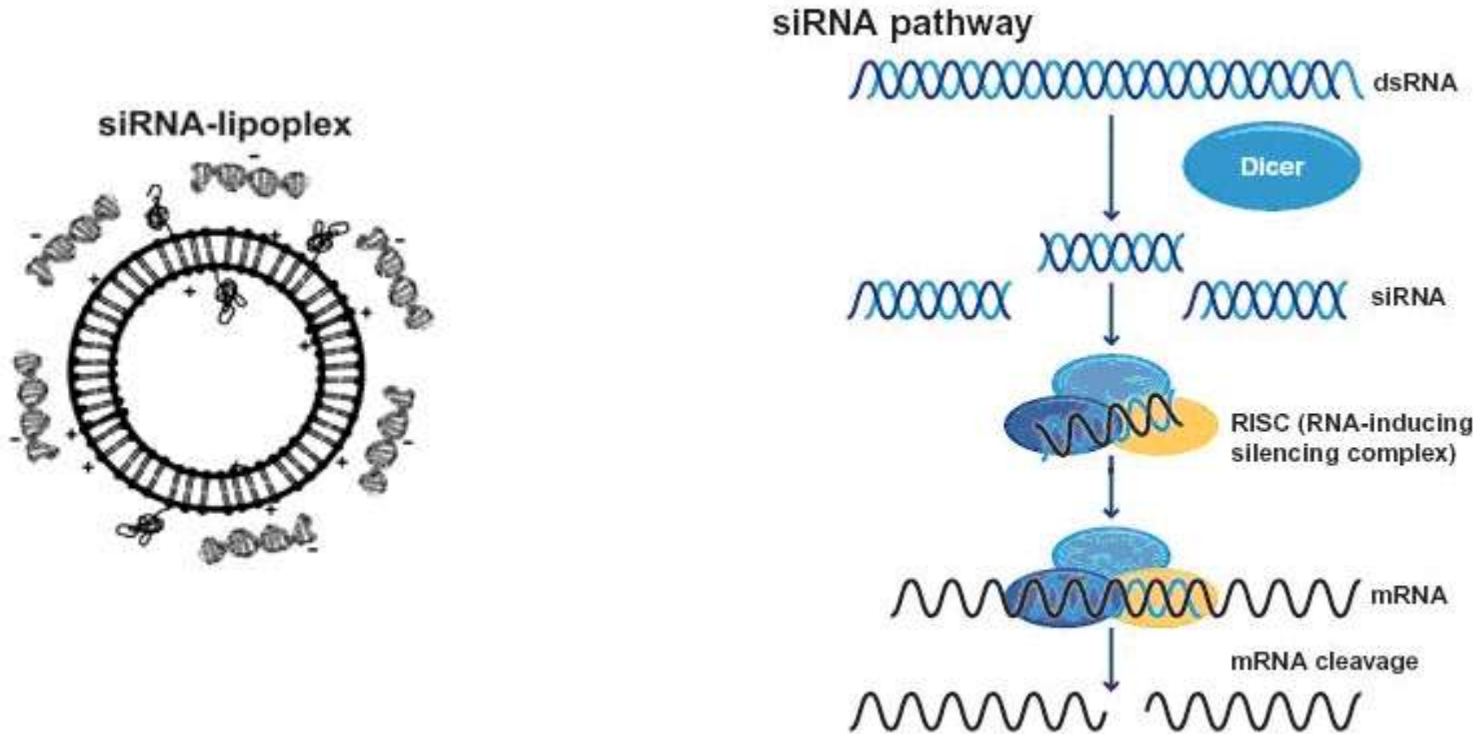
Prescan

30 min post
injection



siRNA Delivery - Cationic Liposomes

20-24 base pair double stranded
RNA molecule

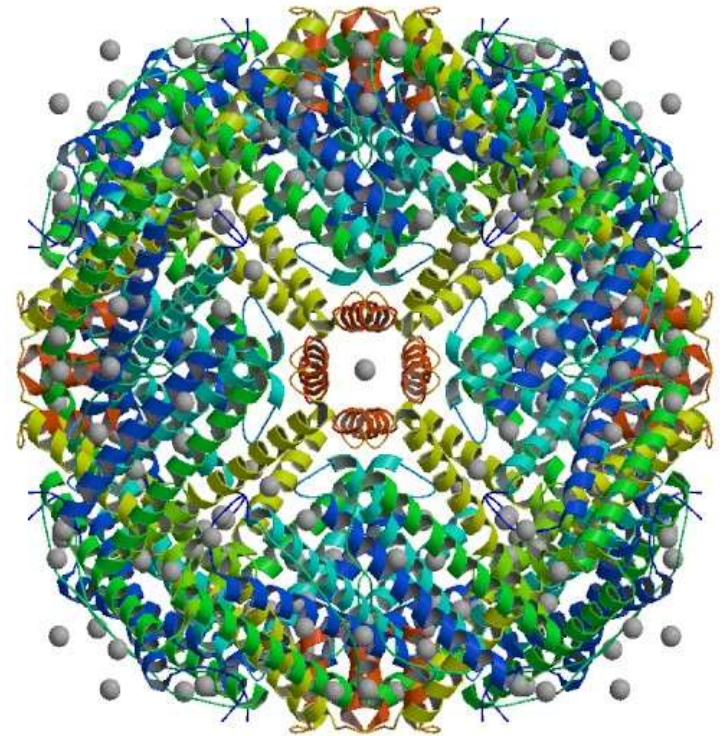


Suppress protein expression

Gene Delivery to Decrease Expression of Ferritin

Ferritin, MW 450 kD, is an iron storage protein with 24 subunits of two kinds: **H** and **L-ferritin** chains

Ferritin can keep iron in a soluble, Biodegradable and non-toxic form



Rationale to Suppress H-ferritin in Cancer Cells

- H-ferritin is present in nucleus of glioma cells
- H-ferritin protected the DNA from iron-induced oxidative damage in tumor cells
- BCNU (chemotherapeutic drug) and radiation has ability to induce DNA damage to cancer cells.
- Decreasing the H-ferritin expression will sensitize the tumors for chemo and radiation therapy

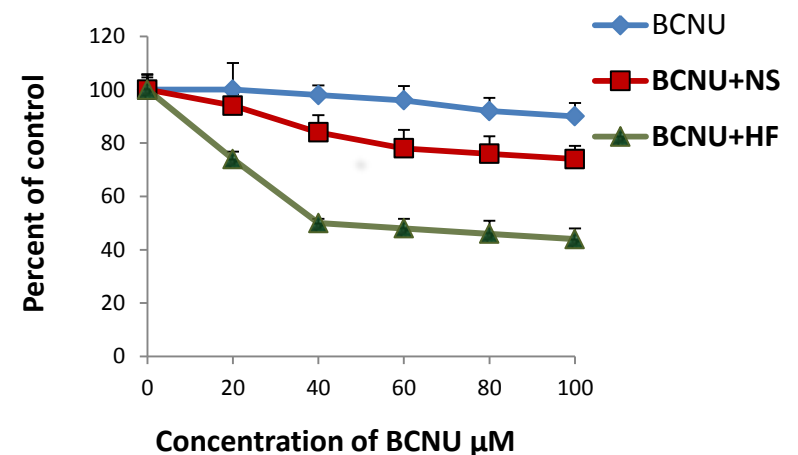


Down Regulating H-ferritin Increased Chemotherapeutic Efficacy in U251 cells: Human Brain Tumor Model

Method:

1. U251 cells were seeded for O/N.
2. Transfected with siRNA: liposomes.
3. BCNU was added 48 h post transfection.
4. SRB assay was performed 48 h post exposure of BCNU.

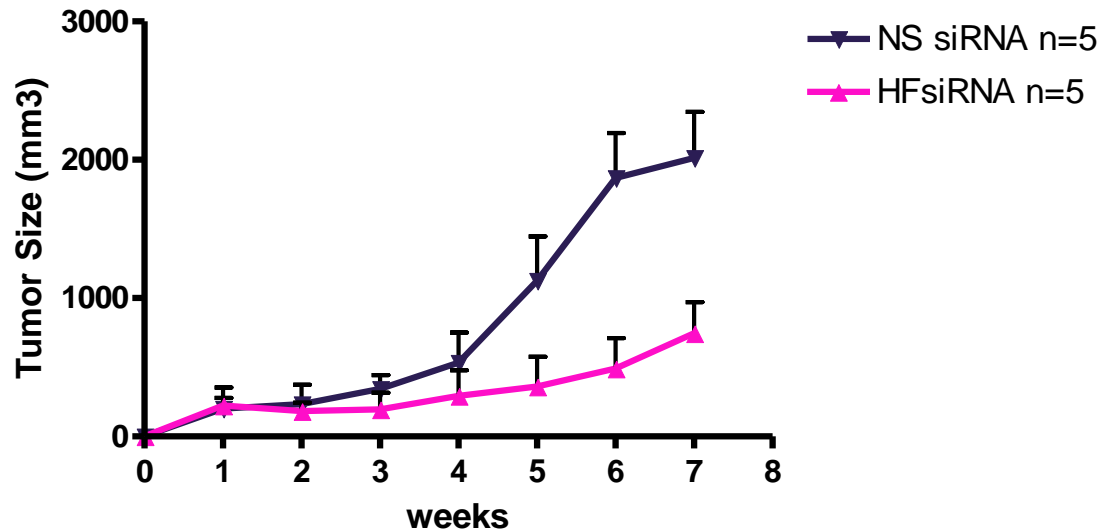
H-ferritin LD50 = 38 μ M



Result: Chemotherapeutic sensitivity in U251 cells was increased after H-ferritin was down regulated by siRNA.

H-ferritin siRNA Increased Chemotherapeutic Efficacy in Vivo

s.c.tumor model U251



Method:

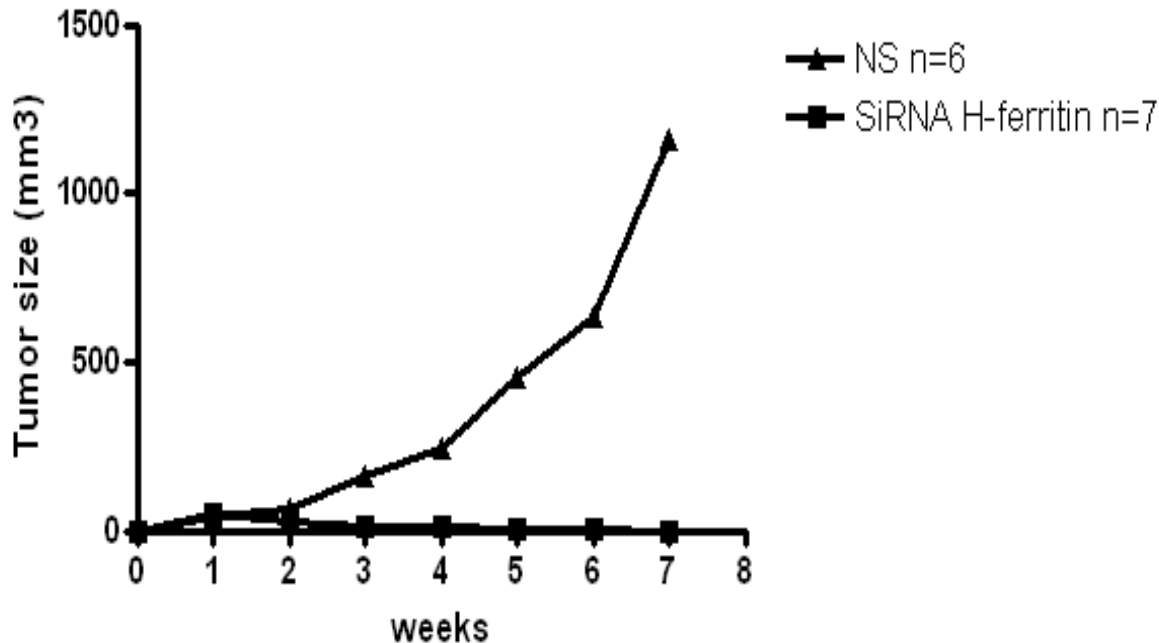
1. Adult female athymic nude mice were inoculated s.c with 15×10^6 U251 cells
2. The tumors (1.4 to 3.0 cm³) were formed in two weeks.
3. Intratumoral injection of HF(▲) and NS(▼) siRNA/liposomes weekly for seven weeks.
4. IP injection of BCNU was followed next day.
5. Size of the tumor was measured weekly

Result: Tumor growth was inhibited by synergistic approach. Importantly, 12.5mg/kg is half of the dosage for conventional treatment



H-ferritin siRNA Increased Radiation Efficacy in Vivo

S.C. tumor model



In vivo study

Result: Tumor growth was inhibited by synergistic approach.

Method:

1. Adult female athymic nude mice were inoculated s.c with 15×10^6 U251 cells
2. The tumors (1.4 to 3.0 cm³) were formed in two weeks.
3. Intratumoral injection of NS(▲) and HF(■) siRNA/liposomes weekly for seven weeks.
4. Radiation 4 (Gy) was followed next day.
5. Size of the tumor was measured weekly

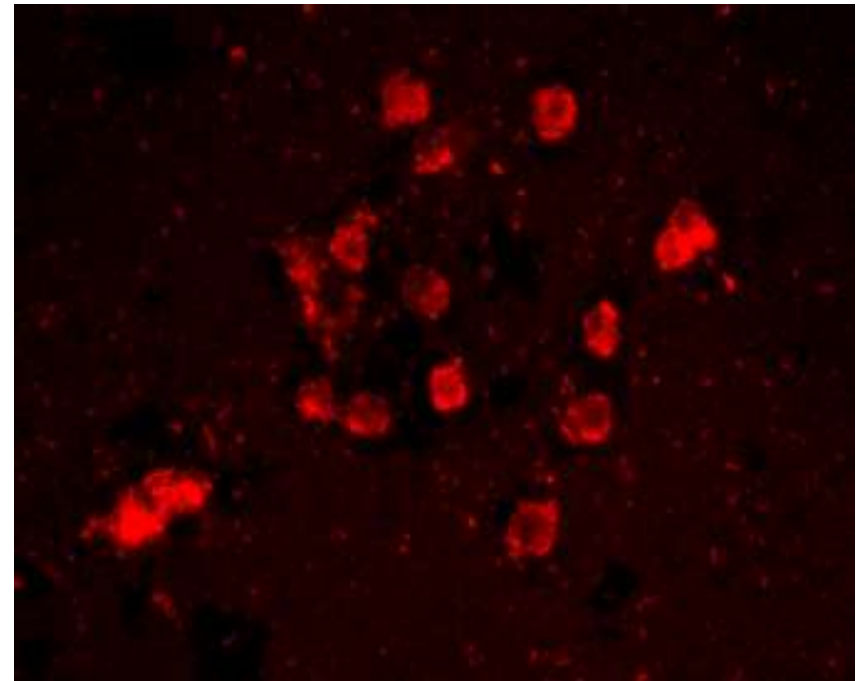
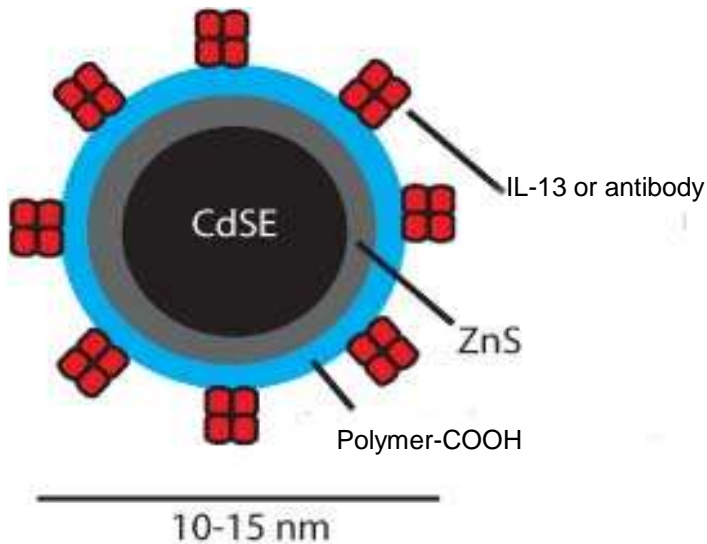
Conclusions for Gene Delivery

- We can deliver a siRNA in a nanovesicle to tumors
- The siRNA will decrease the expression of ferritin
- Decreased expression of ferritin makes the tumor cells more vulnerable to chemotherapy and radiation



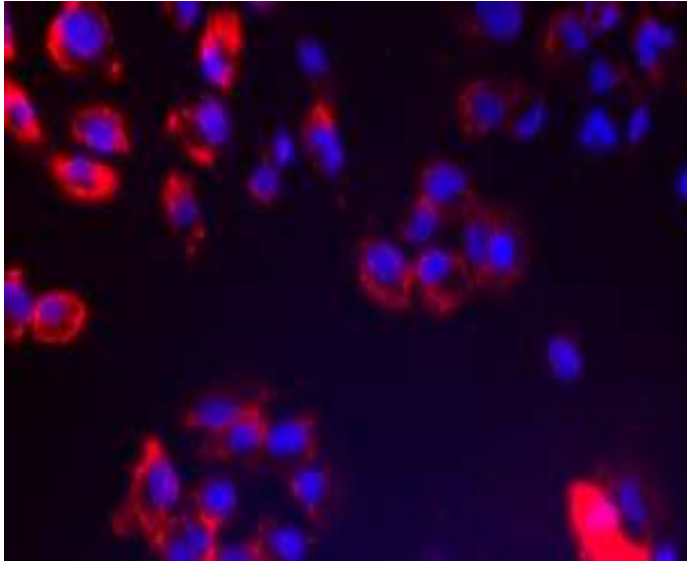
The Future: Targeting Quantum Dots for Detecting Cancer Cells in CSF

In vitro tumor diagnosis

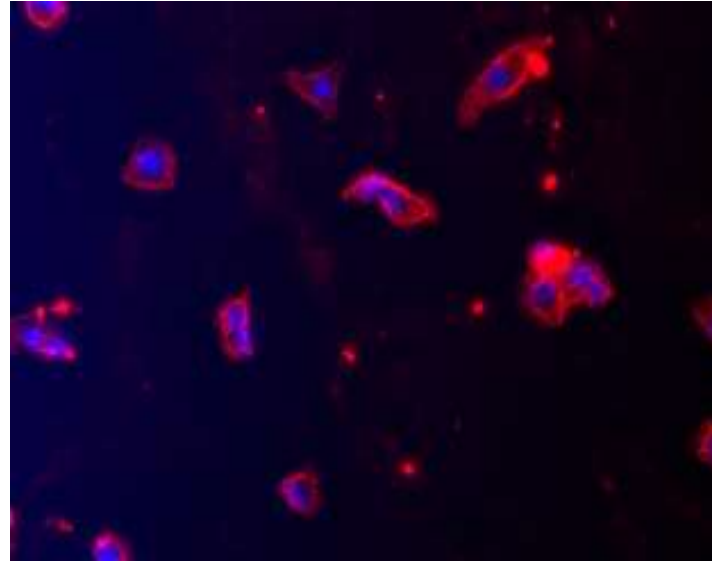


U251 glioma cells after exposure to IL13-QD

Binding of Targeted Quantum Dots to Glioma and Melanoma Cells



(U251 glioma) (IL13 QD)

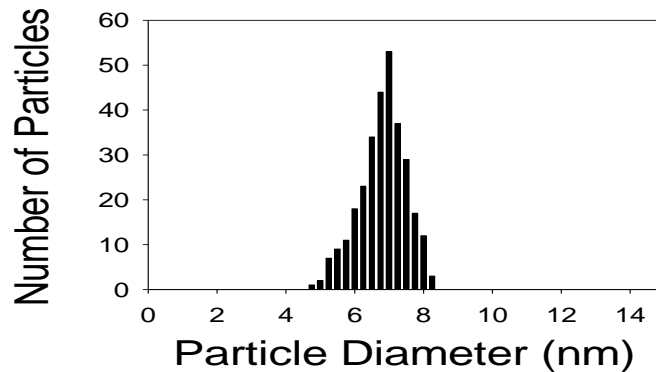
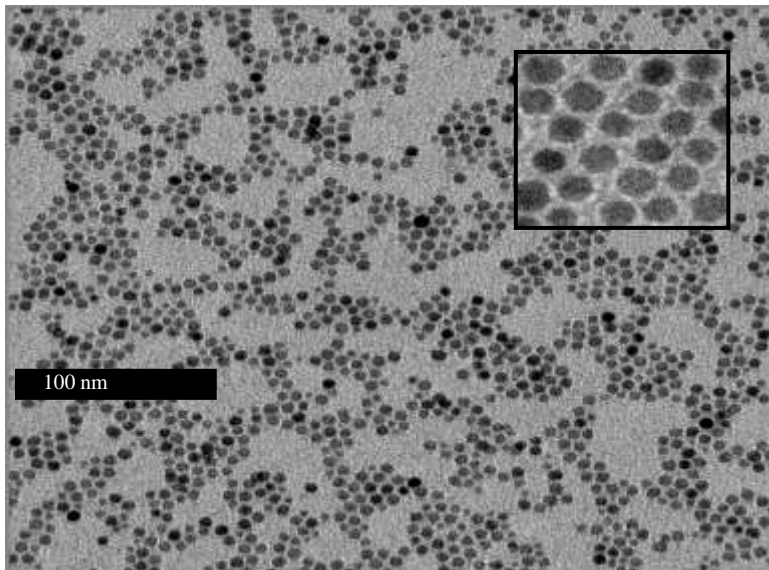


UACC903 Melanoma (9.2.27QD)

Red –quantum dot
Blue-DAPI

Using Our Targeted Delivery System to Deliver Nanoparticles

Iron oxide nanoparticles - MRI contrast enhancing

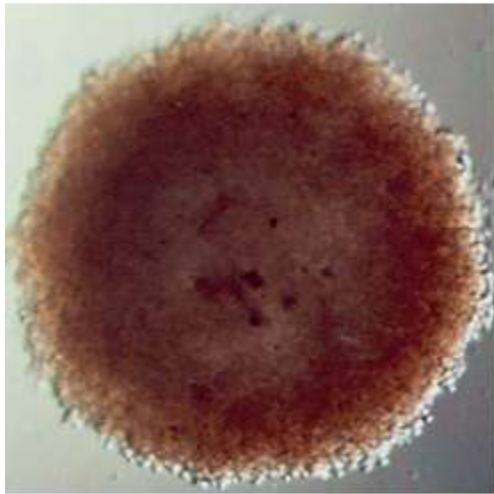


Particle size: 6.7(+/-) 0.7 nm

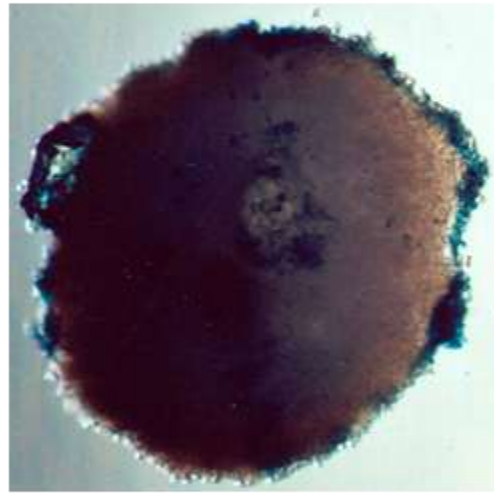
Perl's Staining on Tumor Spheroid

Uptake of IL13-Fe₂O₃ by multicellular tumor spheroids cultured from U251 glioma cells

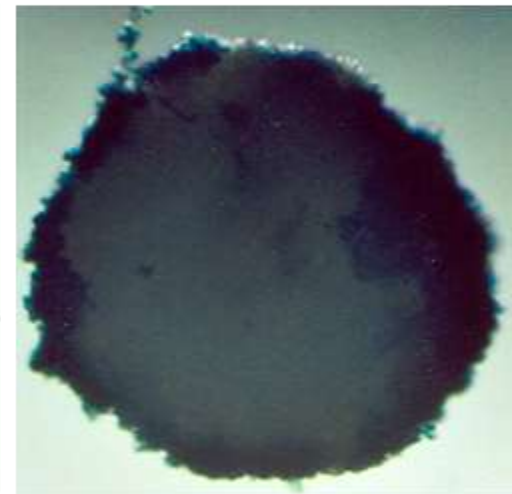
(10 ug/mL of Fe₂O₃-IL13 final conc.)



Without
Nanoparticles



12 h exposed
to nanoparticles



24 h exposed
to nanoparticles

Conclusion

- We developed tumor specific delivery system for delivering chemotherapeutic agent and MRI contrast agent
- Established the efficacy of cationic liposomes to sensitize the tumors for chemo and radiation therapy
- Currently involved in tumor targeted iron oxide nanoparticles and QD's for in vitro and in vivo diagnosis of tumors.



Thank You! Connor Laboratory: 2011

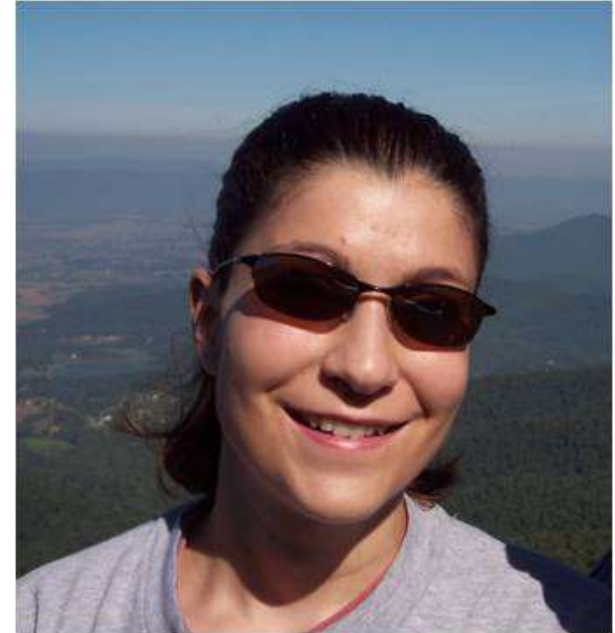


Questions?



Nanotechnology in Medicine: Commercializing Nanomedicine

Mylisa Parette, BS, MAT, PhD
Research Manager
Keystone Nano, Inc.

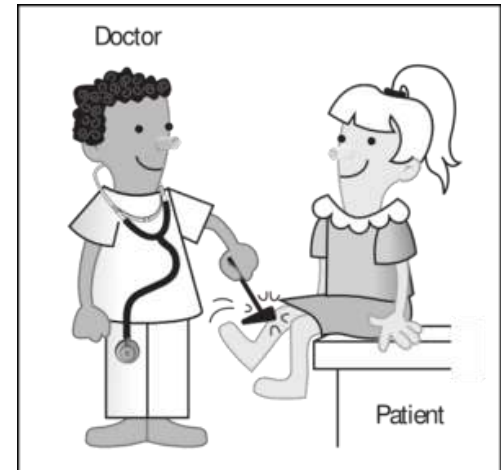


Commercializing Nanomedicine



<http://science401.com>

?



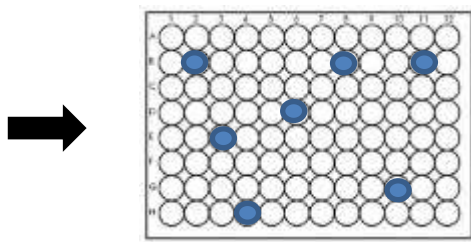
www.clker.com

NACK
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Current Pharmaceutical Development

X_1 X_2 X_3 X_4 X_5 X_6
 X_7
Medicinal Chemistry
(1000s of derivatives)



High-throughput Screening

- Solubility
- Efficacy
- Toxicity



Formulation Development

- Solubility
- Stability/Shelf-Life



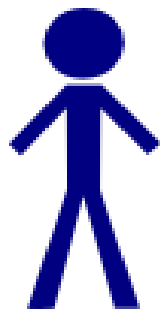
In Vivo Testing

- Safety
- Efficacy



Preclinical Testing

- Efficacy
- Toxicity
- Biodistribution
- Pharmacokinetics



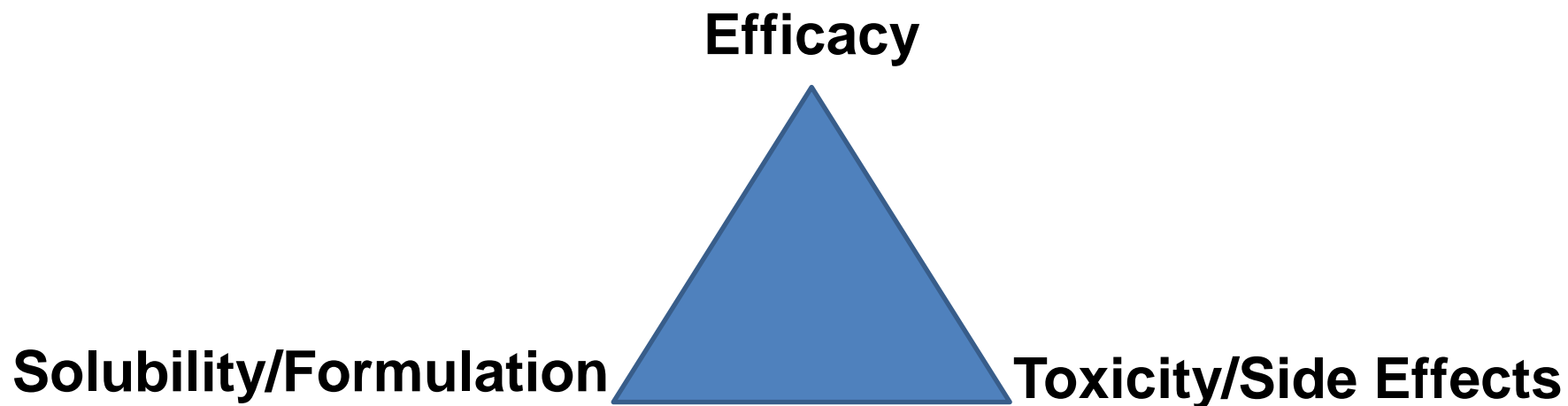
Clinical Trials

All clip art from www.clker.com



Picking the Right Compound

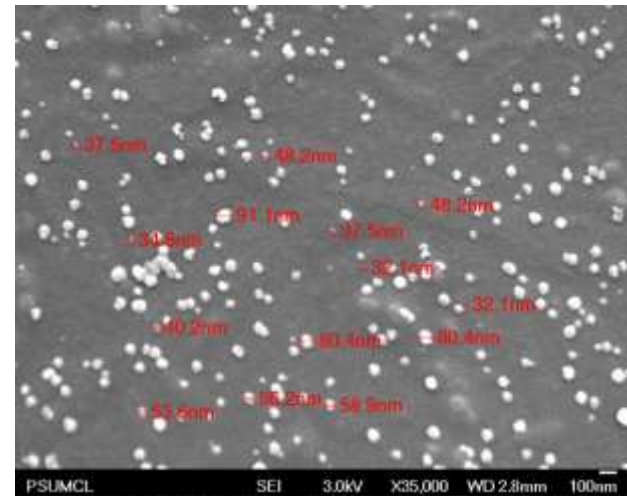
The Balancing Act



Nanomedicine

Picking the Right Technology

- Indication
- Size
- Composition
- Surface Groups
- Morphology
- Active Ingredient
- Loading
- Reproducibility
- Stability/Dispersion
- Biodistribution/Clearance



Technical Challenges

Manufacturing &
Characterization



Regulatory Testing

\$\$\$\$



Technical Challenges:

Manufacturing & Characterization

Manufacturing Scale:

- How much can be made?
- How much is needed?
- What changes to manufacturing procedures are required to increase scale?

Manufacturing Consistency:

- How reproducible is manufacturing process?
- What are the process variables?
- How can the variables be controlled?

Characterization & Quality Control:

- What analytical techniques are used to analyze the product?
- What is the error in each measurement?
- Can manufacturing processes consistently produce acceptable product?



Technical Challenges: Regulatory Testing

Chemistry, Manufacturing & Controls:

- What are the physico-chemical characteristics?
- What is the stability/degradation profile?
- How can the active and carrier be measured in blood/tissues?

Preclinical Evaluation:

- Is the product efficacious?
- Does the product induce any toxicity?
- How is the product absorbed, metabolized and excreted from the body?
- Is the product safe to test in humans?



Technical Challenges: Regulatory Testing

Phase I Clinical Trial (small # of people – 20-80)

- What is the maximum safe dosage for humans?
- What side effects are induced?

Phase II Clinical Trial (larger # of people – 200-800)

- Is the product efficacious?
- Is the product and dosage safe in humans?

Phase III Clinical Trial

- Is the product efficacious in humans?
- Is the product and dosage safe in humans?
- Does the product provide a therapeutic advantage over existing drugs?

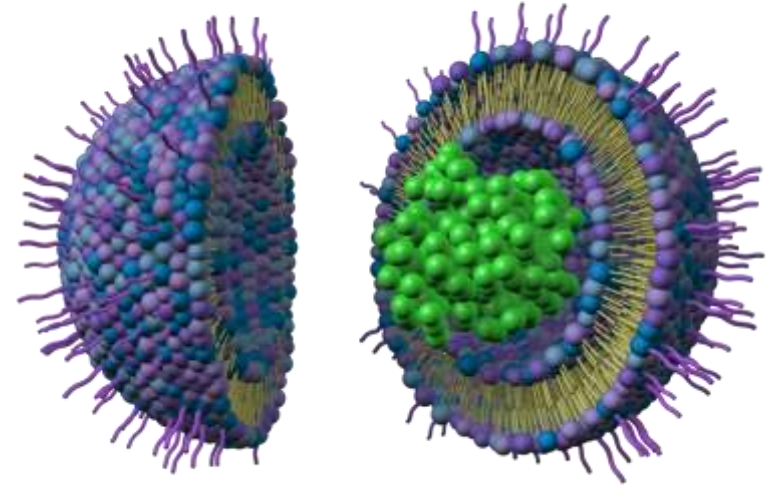


Realizing the Potential of Nanomedicine

FDA Approved

Liposomal Drug Products

- Doxil (Doxorubicin),
- Daunoxome (Daunorubicin),
- Depocyte (Cytarabine),
- Ambisome (Amphotericin B)



In Clinical Trials

Solid Lipid Nanoparticles

Polyethyleneimine

Nanoparticles



Developing a Nanomedicine: Ceramide NanoLiposome

Indication = Liver Cancer, Pancreatic Cancer, Leukemia

Size = 85nm mean liposome size

Composition = Synthetic lipids – PC, PE,

Surface Groups = Polyethylene glycol (PEG)

Morphology = Spherical

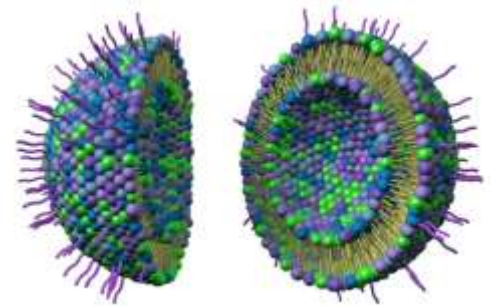
Active Ingredient = Ceramide

Loading = 30 molar%

Reproducibility = +/- 5nm mean

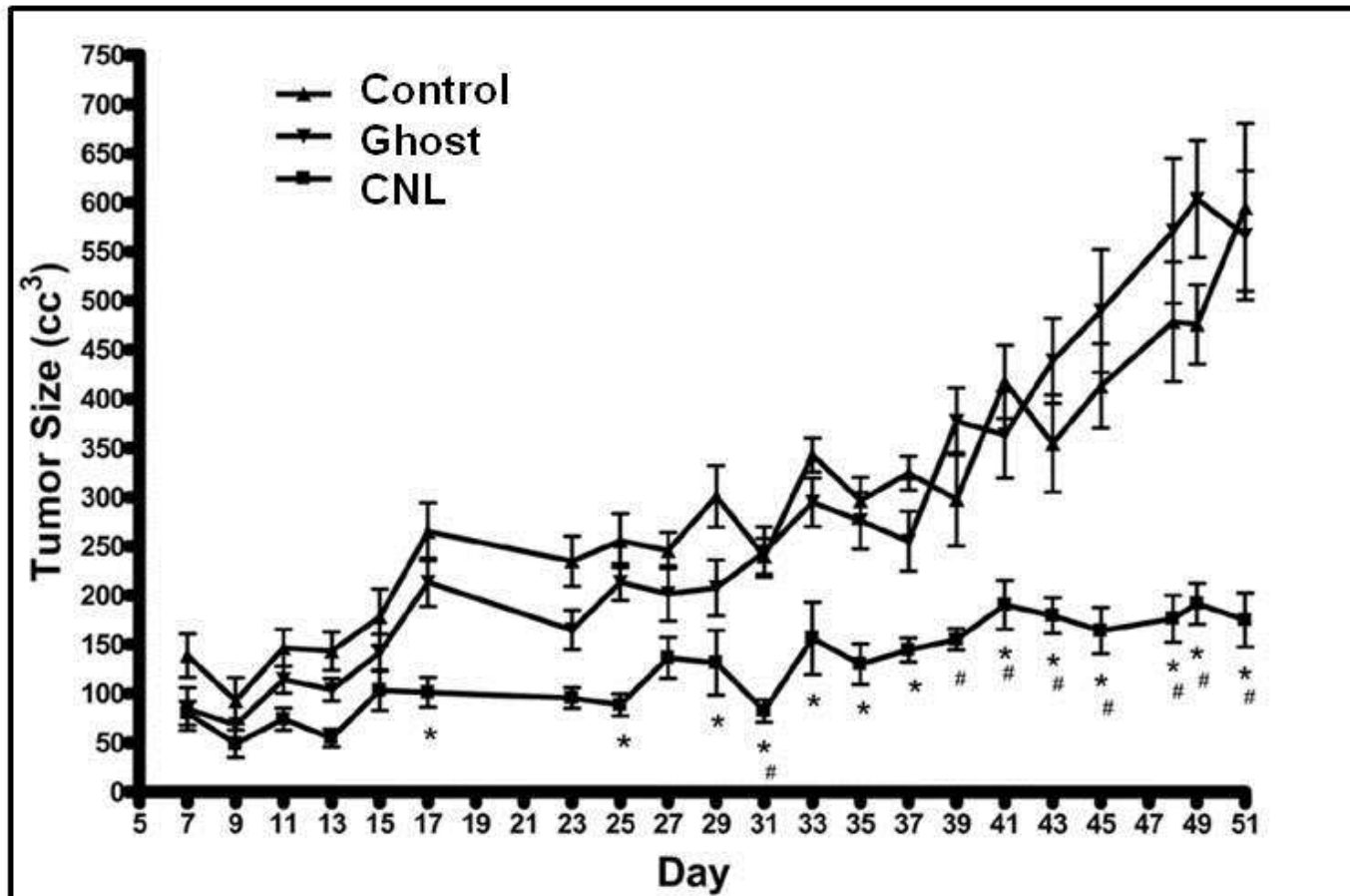
Stability/Dispersion = stable from pH 4-9, 4-60°C, 3+ months

Biodistribution/Clearance = distributes mainly to the lungs and liver, cleared through the hepatobiliary route



Developing a Nanomedicine:

Ceramide NanoLiposome



Tagaram et al, 2010



Questions?



Objectives

1. Understand the role of dimensions in nanoscience.
2. Describe three areas of current nanomedicine research.
3. Describe targeted nano drug delivery and the benefits over systemic therapies.
4. List three issues related to nano commercialization of therapies.



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<http://questionpro.com/t/ABkVkZJ7e4>



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Applications

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