

Associated Institute of





QUALITY CONTROL OF INFUSIONS IN PATIENT-SPECIFIC PREPARATIONS FOR ONCOLOGICAL TREATMENT

Lars M. H. Reinders^{1,2,3}, Jacqueline Bruckmann¹, Martin D. Klassen¹, Claudia vom Eyser¹, Martin Jaeger², Torsten C. Schmidt³, Thorsten Teutenberg¹, Jochen Tuerk¹

1) Institut für Energie- und Umwelttechnik e. V. (IUTA, Institute of Energy and Environmental Technology), Bliersheimer Straße 58-60, 47229 Duisburg, Germany, teutenberg@iuta.de

2) Hochschule Niederrhein (University of Applied Science), Reinarzstraße 49, 47805 Krefeld, Germany

3) University Duisburg-Essen, Faculty of Chemistry, Instrumental Analytical Chemistry, Universitätsstraße 5, 45141 Essen, Germany

Motivation

• Within the area of cancer treatment, the therapy regimen is adapted to the patient.

- Type and dose of the drug are adjusted to the individual needs of the patient.
- Patient individual application solutions are not analyzed.
 - No quality assurance cause a risk of errors.
 - Sources of error: stability-, mixing-problems, underdosing and overdosing, as well as drug counterfeiting and deliberate dilutions.
- Incorrectly dosed preparations can lead to increased side effects or to ineffectiveness.
- To improve quality assurance, we compared chromatography coupled to UV-detection versus a

Take home message

- Additional quality assurance can improve the accuracy for patient-specific application solutions.
 - -3.2% incorrect dosages (n=126).
- Advantages of Raman-UV
 - Identification of formulation substances and generics.
 - Good distinguishability of monoclonal antibodies.
- Advantages of HPLC-UV
 - Separation of formulation substances is possible.

method based on a combined Raman and UV detection system (Raman-UV).

Robust results with less knowledge about the sample.

Steps in preparation





500



1500

1000 Raman Shift / cm⁻¹

Figure 2: Comparison of the Raman spectra from gemcitabine from vendor B (blue) and gemcitabine from vendor A (green). Gemcitabine from vendor B contains ethanol, polyethylene glycol and propylene glycol as further formulation substances, which are not contained in gemcitabine from vendor A.

- Raman-UV does not separate any formulation substances.
 - Enables the differentiation of generics.
 - Requires a drug specific calibration as demonstrated in figure 2
 - 9% recovery rate using gemcitabine from vendor A calibration.
 - 92% recovery rate using gemcitabine from vendor B calibration.
- HPLC-UV offers the opportunity to separate formulation substances.
 - No drug-specific calibration required.

The main differences in the Raman spectra are between 1175 cm⁻¹ and 785 cm⁻¹.

- HPLC-UV analysis of monoclonal antibodies faces several challenges.
 - Nearly the same UV-spectra (Figure 3A).
 - Difficult to separate with common reversed phase chromatography.
 - Analysis time of several minutes.
 - Very robust quantification is possible.
- Monoclonal antibodies differ significantly in their Raman spectra (Figure 3B).
 - Opportunity of identity testing.
 - Formulation substances can lead to interferences.
 - Quantification via UV, as the Raman signals are very weak.
 - Identification and quantification in approximately 90 seconds.

Acknowledgement



We thank B&W TEK for providing the Raman-UV spectrometer and especially Dr. Sara Seiffert for her support and fruitful discussions. We would also like to thank Mr. Pérennec for his help in data export.



Darzalex

MabThera

- Darzalex

MabThera