ANTITUMOR ACTIVITY STUDY OF OXALIPLATIN COMBINED WITH EPINEPHRINE AFTER INTRAPERITONEAL OR INTRATUMORAL ADMINISTRATION ON ADVANCED PERITONEAL CARCINOMATOSIS OR SUBCUTANEOUS TUMOR FROM RAT COLON CANCERS IN BDIX RATS.

P.Genne<sup>1</sup>, F. Bichat<sup>1</sup>, V.Chiesa<sup>1</sup>, G.Griffon Etienne<sup>2</sup>, M.Bayssas<sup>2</sup>, J.L. Beltramo<sup>3</sup>, C. Duvillard<sup>3</sup>, <sup>1</sup>Oncodesign, Dijon, France; <sup>2</sup>Debiopharm, Lausanne, Switzerland; <sup>3</sup>Dijon Hospital, Dijon, France.

## Abstract

fails to produce a complete response. The main reason is the poor diffusion of drugs into tumor mass when injected inside or around tumor tissues. L-OHP has proven to be effective in combination against many tumors in man, without nephrotoxicity. In this work, we determined the antitumor activity, pharmacokinetics (PKs) and biodistribution of single intratumoral (IT) or intraperitoneal (IP) I-OHP injections alone or combined with EP ( mg/kg), in BDIX rats bearing advanced DHD/K12/PROb peritoneal carcinomatoses or s.c. DHD/K12/PROb

EP did not modify significantly (p=0.38) the *in vitro* 1-OHP cytotoxicity against DHD/K12/PROb cells ( $IC_{50}$  I-OHP: 0.16  $\pm$  0.06;  $IC_{50}$  I-OHP/EP: 0.19  $\pm$  0.02). L-OHP/EP combination was well tolerated after a single IP injection in healthy Wistar rats. EP greatly reduced the platinum (Pt) peritoneal clearance, inducing a higher local Pt concentration in peritoneal fluid when combined with I-OHP (13 mg/kg) (AUC 5.1 times higher than that obtained with I-OHP alone) with a specific intratumoral accumulation (AUC 4.8 times higher). The Pt PK in plasma was completely modified with a delay  $[T_{max}: 8.0h (I-OHP/EP) \text{ versus } 0.083h (I-OHP); <math>C_{max}: 6.79 \text{ µg/ml} (I-OHP/EP) \text{ versus } 5.11 (I-OHP)]$ . A significant increase in the AUC of plasma (2 times higher) correlated with the EP enhancement of the I-OHP antitumor activity (2.65 and 5.30 mg/kg) against advanced. peritoneal carcinomatosis (T/C I-OHP:132 and 186%; T/C I-OHP/EP: 164 and 238%). When EP was injected together with I-OHP IT. EP reduced the Pt tumoral clearance (ALIC 3.8 times higher), maintaining a high Pt entration in SC tumor with a significant decrease of the Pt AUC (2 times lower) in plasma and complete

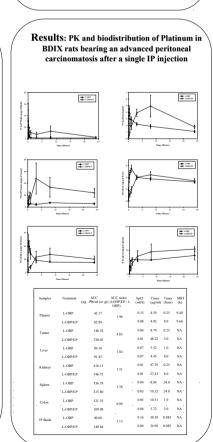
The EP mechanism of action could be due to its vasoconstrictive effects blocking the clearance of I-OHP from The Lit inclamation of action Could be due to a season similar extractive energy becausing in creatance of FOTH from the cavity or tumor into the blood. The results showed a correlation between PKs and tumor efficacy from both IP and IT administrations. The I-OHP/EP combination should be tested as IP chemotherapy of advanced sis, a common feature of colorectal and ovary cancers for which oxaliplatin showed activi

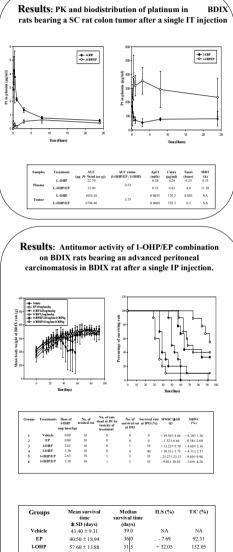
## Results: In vitro cytotoxic activity of I-OHP combined with EP on DHD/K12/PROb rat colon cancer cells



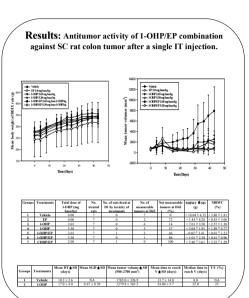
- Test substance: Epinephrine (EP, Fluka, France),
- Oxaliplatin (I-OHP, Debiopharm, Switzerland), Cytotoxic drug: - Tumor cell line: DHD/K12/PROb rat colon cancer.
- BDIX rats (Iffa Credo, France),
- # In vitro cytotoxic activity of I-OHP associated with 40.0ug/ml EP on DHD/K12/PROb cells
- Three independent experiments each performed in quadruplicate
- Determination of IC50 (I-OHP concentration which inhibits 50% of cell growth)
- # PK and biodistribution of Pt in BDIX rats bearing an advanced peritoneal carcinomatosis after
- a single IP co-injection of LOHP/EP
- IP Injection of 106 DHD/K12/PROb cells at D0,
- Treatment start at D20 on advanced carcinomatosis
- Treatment doses: 1.0 mg base/kg for EP and 6.39 mg base Pt/kg for I-OHP,
- Injection volume: 40.0 ml/kg,
- Plasma, IP tumor and organ collection (7 sampling times, 4 rats/time).
- # Antitumor activity of I-OHP/EP combination on BDIX rats bearing an advanced peritonea carcinomatosis after a single IP co-injection:
  - IP Injection of 106 DHD/K12/PROb cells at D0 (10 rats/group).
- Treatment start at D10 on advanced carcinomatosis
- Treatment doses: 1.0 mg base/kg for EP; 2.65 and 5.30 mg base/kg for I-OHP,
- Injection volume: 40.0 ml/kg.
- Monitorin gof body weight and survival rate,
- Determination of treatment toxicity and survival parameters
- # PK and biodistribution of Pt in BDIX rats bearing a SC rat colon tumor after a single IT coinjection of I-OHP/EP:
- SC injection of 106 DHD/K12/PROb cells at D0,
- Treatment start at D26 when the mean tumor volumes reach  $856 \pm 335 \text{ mm}^3$
- Treatment doses: 1.0 mg base/kg for EP and 6.39 mg base Pt/kg for I-OHP,
   Injection volume: 1.0 µl/mm³ of tumor,
- Plasma and SC tumor collection (7 sampling times, 3 rats/time).
- # Antitumor activity of I-OHP/EP combination against SC DHD/K12/PROb tumors after a single
- SC injection of 106 DHD/K12/PROb cells at D0 (7 rats/group).
- Treatment start at D31 when the mean tumor volumes reach 700 ± 350 mm<sup>3</sup>
- Treatment doses: 1.0 mg base/kg for EP; 2.65 and 5.30 mg base/kg for I-OHP,
- Injection volume: 1.0 ul/mm³ of tumor.
- Monitoring of body weight, tumor measurement and survival rate,
- Determination of treatment toxicity and tumor growth parameters
- # Dosage of Platinum (Pt) in liquids and mineralized samples by Atomic Absorption Spectrometry under GLP validated methods.
- The area under the Pt concentration-time curve (AUC) was calculated from the sum areas of the individual trapezia using Micropharm software,
- Determination of apparent clearance (ApCl), mean residence time (MRT), experimental Pt peak concentration (Cmax) and time to peak (Tmax).

The in vivo experiments were performed following the United Kingdom Guidelines for the Welfare of Animals in Experimental Neoplasia (Workman P. et al., Br. J. Cancer, 7, 1-10, 1998.





Groups	Mean survival time	Median survival time	ILS (%)	T/C (%)
	± SD (days)	(days)		
Vehicle	43.40 ± 9.31	39.0	NA	NA
EP	$40.50 \pm 18.94$	36 0	- 7.69	92.31
I-OHP	57.60 ± 13.88	515	+ 32.05	132.05
I-OHP	$77.20 \pm 14.12$	72 5	+ 85.90	185.90
I-OHP/EP	$73.89 \pm 16.42$	64.0	+ 64.10	164.10
I-OHP/EP	89 33 ± 6 58	93.0	+ 138.46	238.46



## **Conclusions**

- ☐ EP did not modify the in vitro I-OHP cytotoxicity against DHD/K12/PROb
- ☐ EP decreased the Pt peritoneal clearance of I-OHP IP injected in BDIX rats bearing an advanced advanced peritoneal carcinomatosis of DHD/K12/PROb rat cancer cells,
- ☐ EP increased the accumulation of Pt in IP tumors.
- ☐ EP delayed the presence of Pt in the systemic bloodstream and increased the AUC of Pt in plasma,
- ☐ EP enhanced the antitumor activity of I-OHP against advanced peritoneal carcinomatosis of DHD/K12/PROb rat cancer cells.
- ☐ EP decreased the Pt clearance of SC tumors to the systemic bloodstream,
- ☐ EP enhanced the antitumor activity of I-OHP against SC DHD/K12/PROb
- ☐ The main EP mechanism of action may be due to its vasoconstrictive effect, blocking the clearance of I-OHP from the IP cavity or tumor into the blood