

## Report

# Effects of First-Pass Metabolism on Metabolite Mean Residence Time Determination After Oral Administration of Parent Drug

Keith K. H. Chan<sup>1,3</sup> and Milo Gibaldi<sup>2</sup>

Received December 13, 1988; accepted July 5, 1989

Metabolite kinetics after oral drug administration can be determined, without separate metabolite administration, using the concepts of mean residence time (MRT). The MRT of parent drug and metabolite after oral administration of the parent drug,  $MRT_{p,p(oral)}$  and  $MRT_{m,p(oral)}$ , can be calculated directly from the drug and metabolite profiles. The difference between  $MRT_{m,p(oral)}$  and  $MRT_{p,p(oral)}$ , termed Delta MRT, yields an estimate of MRT of metabolite when the metabolite is given as an iv bolus,  $MRT_{m,m(iv)}$ . The calculation is simple for drugs that are known to undergo negligible first-pass metabolism. Correction can also be made when extent of first-pass metabolism is known. Ambiguity is encountered, however, when the degree of first-pass metabolism is unknown. When the delta MRT is negative, then first-pass metabolism must be considered. A positive value of delta MRT, on the other hand, is not a definitive indication of the absence of first-pass metabolism. It may occur in the presence or absence of first-pass metabolism. Ignoring the possibility of first-pass metabolism when a positive value of delta MRT occurs may lead to an incorrect estimate of  $MRT_{m,m(iv)}$ . The estimation error is relatively small, however, when  $MRT_{m,m(iv)} \gg MRT_{p,p(iv)}$ , even when first-pass metabolism is extensive. This situation may apply to the administration of a prodrug.

**KEY WORDS:** metabolite; mean residence time; first-pass metabolism.

## INTRODUCTION

Evaluation of metabolite kinetics is of interest especially in the case where a metabolite is responsible for, or contributes significantly to, the pharmacological and/or toxicological response. Unfortunately, use of classical compartmental methods to assess metabolite kinetics after administration of the parent drug usually leads to complex kinetic relationships involving both the parent drug and its metabolite. Metabolite kinetics cannot be determined unequivocally unless intravenous data on the metabolite are available.

The determination of mean residence time, based on the statistical moments theory, has largely been applied to evaluate the kinetics of the parent drug (1-9). Recently, Veng-Pedersen and Gillespie (10,11) proposed a method for evaluating the mean residence time of metabolite in the body, systemic circulation, and peripheral tissue after a single intravenous or oral administration of parent drug. Metabolite kinetics can be readily calculated without the need to administer the metabolite separately. However, the method is applicable only to drugs with little or no first-pass metabolism after oral administration. Midha *et al.* (12) and Brockmeier

and Ostrowski (13) investigated the mean residence times of parent drug and metabolite and suggested that when the mean residence time of the metabolite was shorter than the mean residence time of the parent drug, relevant first-pass metabolism had to be considered. However, a situation was not considered where the mean residence time of the metabolite is longer than the mean residence time of the parent drug, which does not necessarily indicate a lack of first-pass metabolism. Erroneous results will be obtained if first-pass metabolism is not accounted for. In the present report, we examine the effects of first-pass metabolism on the relationship between the mean residence time of the parent drug and that of the metabolite after a single oral dose of parent drug. The same concept can also be applied to prodrugs where the pharmacologically active component (metabolite) is formed following oral administration of the precursor.

## THEORY

### Case 1: No First-Pass Metabolism

A model describing the oral administration of drug and the formation of metabolite is depicted in Fig. 1. The following sequence applies: parent drug is administered orally, some drug may be lost in the GI lumen and some drug is absorbed through the gut wall, and passes the portal vein and liver. Finally, the drug is converted to metabolite in the systemic circulation. After the first pass, the gut wall, portal

<sup>1</sup> Development Department, Pharmaceuticals Division, CIBA-GEIGY Corporation, Ardsley, New York 10502.

<sup>2</sup> School of Pharmacy, University of Washington, Seattle, Washington 98195.

<sup>3</sup> To whom correspondence should be addressed.

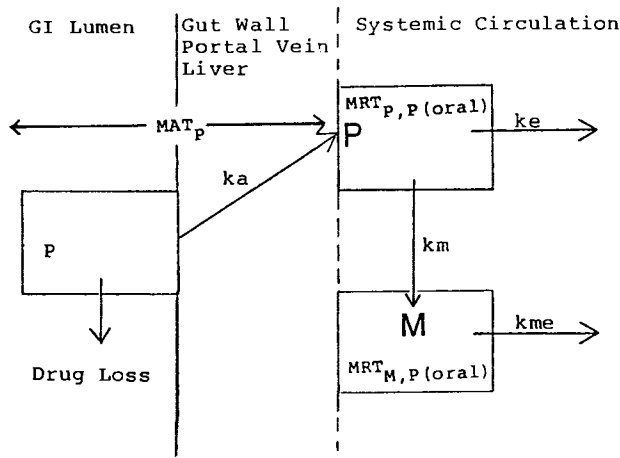


Fig. 1. Model describing the oral administration of parent drug (P) and the formation of metabolite (M) without first-pass metabolism (Case 1).

vein, and liver are considered part of the systemic circulation. Under these conditions, the mean residence time of the parent drug after oral administration of parent drug,  $MRT_{p,p(oral)}$ , is given by

$$MRT_{p,p(oral)} = MAT_p + MRT_{p,p(iv)} \quad (1)$$

where  $MAT_p$  is the mean absorption time of the parent drug and  $MRT_{p,p(iv)}$  is the mean disposition residence time of the parent drug or mean residence time of the parent drug when the parent drug is given as an iv bolus.

The mean residence time of the metabolite after oral administration of the parent drug,  $MRT_{m,p(oral)}$ , is given by

$$\begin{aligned} MRT_{m,p(oral)} &= MRT_{p,p(oral)} + MRT_{m,m(iv)} \\ &= MAT_p + MRT_{p,p(iv)} + MRT_{m,m(iv)} \end{aligned} \quad (2)$$

where  $MRT_{m,m(iv)}$  is the mean disposition residence time of the metabolite or mean residence time of the metabolite when the metabolite is given as an iv bolus.

$MRT_{p,p(oral)}$  and  $MRT_{m,p(oral)}$  can be calculated directly from the parent drug and metabolite profiles after oral administration of parent drug using the following equations:

$$MRT_{p,p(oral)} = \frac{AUMC_{p,p(oral)}}{AUC_{p,p(oral)}} \quad (3)$$

$$MRT_{m,p(oral)} = \frac{AUMC_{m,p(oral)}}{AUC_{m,p(oral)}} \quad (4)$$

where AUMC and AUC are the areas under the first and zero moments of the plasma concentration-time curve.

It is clear, from Eqs. (1) and (2), that the difference between  $MRT_{m,p(oral)}$  and  $MRT_{p,p(oral)}$  provides an estimate of  $MRT_{m,m(iv)}$ :

$$\begin{aligned} \text{delta MRT} &= MRT_{m,p(oral)} - MRT_{p,p(oral)} \\ &= MRT_{m,m(iv)} \end{aligned} \quad (5)$$

In this case,  $MRT_{m,p(oral)}$  is always larger than  $MRT_{p,p(oral)}$  so that delta MRT or  $MRT_{m,m(iv)}$  is positive.

## Case 2: First-Pass Metabolism

Another model describing the oral administration of drug and the formation of metabolite is depicted in Fig. 2. Parent drug is administered orally; some drug may be lost in the GI lumen and some drug is absorbed through the gut wall and passes the portal vein and liver. A fraction of the absorbed dose ( $F$ ) escapes the first-pass metabolism, reaches the systemic circulation, and is subsequently converted to metabolite in the systemic circulation. A complementary fraction of the absorbed dose ( $1 - F$ ) is converted to metabolite during the first pass through the liver. Under these conditions, the mean residence time of the parent drug after oral administration of the parent drug,  $MRT_{p,p(oral)}$ , is also given by Eq. (1). However, the  $MRT_{m,p(oral)}$  is contributed by two routes of input: (1) metabolite formed during first-pass metabolism ( $1 - F$ ) and (2) metabolite in the systemic circulation from parent drug that has escaped first-pass metabolism ( $F$ ). The overall  $MRT_{m,p(oral)}$  is given by the sum of these two routes of input with respect to their relative weight of contribution.

$$\begin{aligned} MRT_{m,p(oral)} &= F [MRT_{p,p(oral)} + MRT_{m,m(iv)}] \\ &\quad + (1 - F) [MAT_p + MRT_{m,m(iv)}] \\ &= F [MAT_p + MRT_{p,p(iv)} + \\ &\quad MRT_{m,m(iv)}] \\ &\quad + (1 - F) [MAT_p + MRT_{m,m(iv)}] \end{aligned} \quad (7)$$

$$(7a)$$

Solving Eq. (7) gives

$$MRT_{m,p(oral)} = F * MRT_{p,p(oral)} + (1 - F) * MAT_p + MRT_{m,m(iv)} \quad (8)$$

Again, the  $MRT_{p,p(oral)}$  and  $MRT_{m,p(oral)}$  can be calculated directly from the parent drug and metabolite profiles after oral administration of parent drug, using Eqs. (3) and (4). The difference between  $MRT_{m,p(oral)}$  and  $MRT_{p,p(oral)}$  is

$$\text{delta MRT} = MRT_{m,p(oral)} - MRT_{p,p(oral)} \quad (9)$$

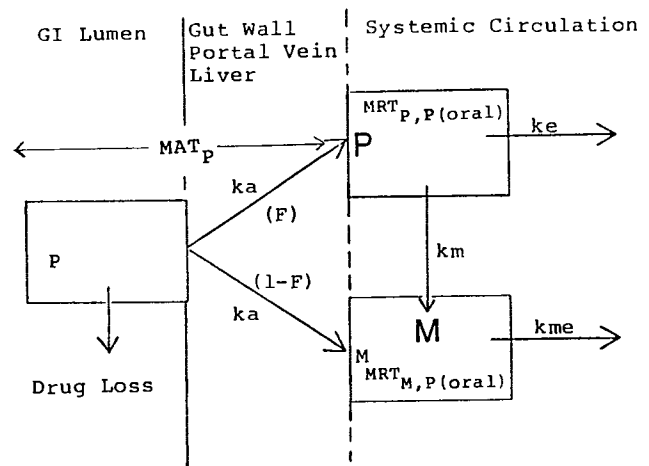


Fig. 2. Model describing the oral administration of parent drug (P) and the formation of metabolite (M) with first-pass metabolism (Case 2).

Table I. Calculated Pharmacokinetic Parameters as Determined by Eqs. (7) and (7a): MRT<sub>m,(iv)</sub> Was Held Constant at 10

MRT <sub>p,(iv)</sub>	MRT <sub>m,(iv)</sub>	Calculated		MAT <sub>p</sub>	Calculated		Delta MRT
		F	1 - F		MRT <sub>p,(oral)</sub>	MRT <sub>p,(oral)</sub>	
2.5	10	1	0	0	12.5	2.5	10
2.5	10	1	0	10	22.5	12.5	10
2.5	10	1	0	20	32.5	22.5	10
2.5	10	0.75	0.25	0	11.875	2.5	9.375
2.5	10	0.75	0.25	10	21.875	12.5	9.375
2.5	10	0.75	0.25	20	31.875	22.5	9.375
2.5	10	0.5	0.5	0	11.25	2.5	8.75
2.5	10	0.5	0.5	10	21.25	12.5	8.75
2.5	10	0.5	0.5	20	31.25	22.5	8.75
2.5	10	0.25	0.75	0	10.625	2.5	8.125
2.5	10	0.25	0.75	10	20.625	12.5	8.125
2.5	10	0.25	0.75	20	30.625	22.5	8.125
2.5	10	0	1	0	10	2.5	7.5
2.5	10	0	1	10	20	12.5	7.5
2.5	10	0	1	20	30	22.5	7.5
5	10	1	0	0	15	5	10
5	10	1	0	10	25	15	10
5	10	1	0	20	35	25	10
5	10	0.5	0.5	0	12.5	5	7.5
5	10	0.5	0.5	10	22.5	15	7.5
5	10	0.5	0.5	20	32.5	25	7.5
5	10	0	1	0	10	5	5
5	10	0	1	10	20	15	5
5	10	0	1	20	30	25	5
10	10	1	0	0	20	10	10
10	10	1	0	10	30	20	10
10	10	1	0	20	40	30	10
10	10	0.5	0.5	0	15	10	5
10	10	0.5	0.5	10	25	20	5
10	10	0.5	0.5	20	35	30	5
10	10	0	1	0	10	10	0
10	10	0	1	10	20	20	0
10	10	0	1	20	30	30	0
20	10	1	0	0	30	20	10
20	10	1	0	10	40	30	10
20	10	1	0	20	50	40	10
20	10	0.5	0.5	0	20	20	0
20	10	0.5	0.5	10	30	30	0
20	10	0.5	0.5	20	40	40	0
20	10	0	1	0	10	20	-10
20	10	0	1	10	20	30	-10
20	10	0	1	20	30	40	-10
50	10	1	0	0	60	50	10
50	10	1	0	10	70	60	10
50	10	1	0	20	80	70	10
50	10	0.75	0.25	0	47.5	50	-2.5
50	10	0.75	0.25	10	57.5	60	-2.5
50	10	0.75	0.25	20	67.5	70	-2.5
50	10	0.5	0.5	0	35	50	-15
50	10	0.5	0.5	10	45	60	-15
50	10	0.5	0.5	20	55	70	-15
50	10	0.25	0.75	0	22.5	50	-27.5
50	10	0.25	0.75	10	32.5	60	-27.5
50	10	0.25	0.75	20	42.5	70	-27.5
50	10	0	1	0	10	50	-40
50	10	0	1	10	20	60	-40
50	10	0	1	20	30	70	-40

$$= F \cdot \text{MRT}_{p,p(\text{iv})} - \text{MRT}_{p,p(\text{iv})} + \text{MRT}_{m,m(\text{iv})} \quad (9a)$$

$$= (F - 1) \text{MRT}_{p,p(\text{iv})} + \text{MRT}_{m,m(\text{iv})} \quad (9b)$$

It is clear that the difference between  $\text{MRT}_{m,p(\text{oral})}$  and  $\text{MRT}_{p,p(\text{oral})}$  will not provide an estimate of  $\text{MRT}_{m,m(\text{iv})}$ , as is the case where there is no first-pass metabolism. In fact, Eq. (9b) can yield either positive or negative values depending on the  $F$  value and the relative magnitude of  $\text{MRT}_{p,p(\text{iv})}$  and  $\text{MRT}_{m,m(\text{iv})}$ . If  $F$  is equal to 1 (case 1: no first-pass metabolism), then Eq. (9) simplifies to Eq. (5) where delta MRT provides an estimate of  $\text{MRT}_{m,m(\text{iv})}$ . If  $F$  is equal to zero (all parent drug converted to metabolite after first pass), then

$$\text{delta MRT} = \text{MRT}_{m,m(\text{iv})} - \text{MRT}_{p,p(\text{iv})} \quad (10)$$

Equation (10) represents the limiting value for delta MRT. It is clear, under these conditions, that if  $\text{MRT}_{m,m(\text{iv})}$  is smaller than  $\text{MRT}_{p,p(\text{iv})}$ , delta MRT will be negative. This serves as an indication of first-pass metabolism. However, if  $\text{MRT}_{m,m(\text{iv})}$  is greater than  $\text{MRT}_{p,p(\text{iv})}$ , delta MRT will be positive even though there is extensive first-pass metabolism. Whether delta MRT is positive or negative depends on the relative magnitude of the parent drug and metabolite mean residence times as well as the degree of first-pass metabolism.

## METHODS

We examined the relationships between  $\text{MRT}_{p,p(\text{iv})}$ ,  $\text{MRT}_{m,m(\text{iv})}$ , and delta MRT using Eq. (7). Various values of  $F$  and  $\text{MAT}_p$  were used to calculate  $1 - F$ ,  $\text{MRT}_{p,p(\text{oral})}$ , and  $\text{MRT}_{m,m(\text{oral})}$ . The following values were used for the evaluation:  $\text{MRT}_{p,p(\text{iv})}$  ranged from 2.5 to 50;  $\text{MRT}_{m,m(\text{iv})}$  was held constant at 5, 10, and 20;  $F$  ranged from 0 to 1; and  $\text{MAT}_p$  ranged from 0 to 20.

## RESULTS

The results for the case where  $\text{MRT}_{m,m(\text{iv})} = 10$  are tabulated in Table I and depicted in Fig. 3. Similar results were obtained for  $\text{MRT}_{m,m(\text{iv})} = 5$  and 20 and are not presented. Two extreme and two general situations were examined and the following conclusions can be drawn.

(1) As the difference between  $\text{MRT}_{p,p(\text{iv})}$  and  $\text{MRT}_{m,m(\text{iv})}$  becomes smaller [i.e., as  $\text{MRT}_{m,m(\text{iv})}$  becomes larger than  $\text{MRT}_{p,p(\text{iv})}$ ;  $\text{MRT}_{p,p(\text{iv})}/\text{MRT}_{m,m(\text{iv})}$  ratio  $\ll 1$ ], the effects of first-pass metabolism on delta MRT are smaller. In

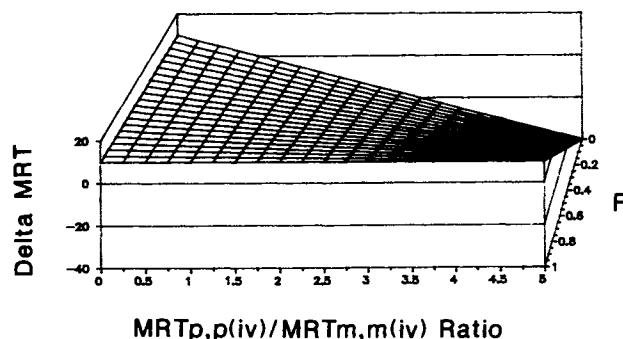


Fig. 3. Three-dimensional plot of delta MRT versus MRT ratio and  $F$ .  $\text{MRT}_{m,m(\text{iv})}$  was held constant at 10.

other words, the error in determining  $\text{MRT}_{m,m(\text{iv})}$  using delta MRT is smaller. However, under these conditions, the value of delta MRT is positive and first-pass metabolism may not be signaled by the data.

(2) As the difference between  $\text{MRT}_{p,p(\text{iv})}$  and  $\text{MRT}_{m,m(\text{iv})}$  becomes larger [i.e., as  $\text{MRT}_{m,m(\text{iv})}$  becomes smaller than  $\text{MRT}_{p,p(\text{iv})}$ ,  $\text{MRT}_{p,p(\text{iv})}/\text{MRT}_{m,m(\text{iv})} \gg 1$ ], the effects of first-pass metabolism on delta MRT are greater. In other words, the error in determining  $\text{MRT}_{m,m(\text{iv})}$  using delta MRT and ignoring first-pass metabolism is greater. Under these conditions, delta MRT is negative at relatively low values of  $F$ . For example, delta MRT reaches negative when  $F < 0.5$  with a  $\text{MRT}_{p,p(\text{iv})}/\text{MRT}_{m,m(\text{iv})}$  ratio = 2 (see Table I and Fig. 3).

(3) When  $\text{MRT}_{p,p(\text{iv})}$ ,  $\text{MRT}_{m,m(\text{iv})}$ , and  $F$  are held constant, a change in  $\text{MAT}_p$  may affect the value of  $\text{MRT}_{p,p(\text{oral})}$  and  $\text{MRT}_{m,p(\text{oral})}$  but has no effect on the resultant delta MRT.

(4) When  $\text{MRT}_{p,p(\text{iv})}/\text{MRT}_{m,m(\text{iv})}$  ratio is equal to or less than 1, delta MRT values are always positive and approach zero as the  $\text{MRT}_{p,p(\text{iv})}/\text{MRT}_{m,m(\text{iv})}$  ratio approaches 1 and  $F$  approaches zero.

## DISCUSSION

The results of this investigation indicate that if first-pass metabolism is ignored in estimating  $\text{MRT}_{m,m(\text{iv})}$ , the error may or may not be substantial, depending upon the relative values of  $\text{MRT}_{p,p(\text{iv})}$  and  $\text{MRT}_{m,m(\text{iv})}$ . Furthermore, a negative delta MRT value may not be observed if  $\text{MRT}_{m,m(\text{iv})}$  is larger than  $\text{MRT}_{p,p(\text{iv})}$  as in the prodrug situation where the metabolite usually has a greater mean residence time than the precursor. On the other hand, if first-pass metabolism is not substantial, the error in determining  $\text{MRT}_{m,m(\text{iv})}$  may be acceptable. For example, the error in estimating  $\text{MRT}_{m,m(\text{iv})}$  is only 12.5% with 50% first-pass metabolism when  $\text{MRT}_{p,p(\text{iv})} = 2.5$  and  $\text{MRT}_{m,m(\text{iv})} = 10$  (Table I and Fig. 3). On the other hand, when  $\text{MRT}_{m,m(\text{iv})} < \text{MRT}_{p,p(\text{iv})}$ , a common situation where a more polar metabolite is eliminated faster than parent drug, ignoring first-pass metabolism leads to a highly unacceptable error. However, the likelihood of detecting negative delta MRT values is higher, and adjustments can be made to account for first-pass metabolism.

The results from the above analysis clearly indicate that detection of the fraction of first-pass metabolism is of utmost importance. It is safe to assume that any drug which can be metabolized by the body will undergo some first-pass metabolism. Notice that  $\text{MRT}_{m,p(\text{oral})}$  and  $\text{MRT}_{p,p(\text{oral})}$  are the only experimental calculable parameters [Eqs. (3) and (4)] and we have no way of knowing the relative magnitude of  $\text{MRT}_{m,m(\text{iv})}$  and  $\text{MRT}_{p,p(\text{iv})}$ . Equation (8), with first-pass metabolism, is more general than Eq. (5) and, therefore, should always be considered. According to Eq. (8), and as suggested by Brockmeier and Ostrowski (14), when several subjects are involved in the study, plotting  $\text{MRT}_{m,p(\text{oral})}$  values against  $\text{MRT}_{p,p(\text{oral})}$  values from each individual, the slope of such plot yield the overall  $F$  and the intercept yields  $[(1 - F) \cdot \text{MAT}_p + \text{MRT}_{m,m(\text{iv})}]$ . Unfortunately, this method assumes that  $\text{MAT}_p$  is constant for all subjects involved in the study and may not be valid in most cases. The plot should be evaluated with caution.

In closing, metabolite kinetics are easily evaluated for a

drug known to undergo negligible first-pass metabolism [Eq. (5)]. Ambiguity is encountered, however, when the degree of first-pass metabolism, if any, is unknown. A negative value of delta MRT, in this case, signals first-pass metabolism, which must be taken into account when estimating  $MRT_{m,(iv)}$ . A positive value of delta MRT, on the other hand, is not definite; it may occur in the presence or absence of first-pass metabolism. Ignoring the possibility of first-pass metabolism when a positive value of delta MRT occurs may lead to an incorrect estimate of  $MRT_{m,(iv)}$ . The estimation error is relatively small, however, when  $MRT_{m,(iv)} \gg MRT_{p,(iv)}$ , even when first-pass metabolism is extensive. This situation may apply to the administration of a prodrug.

#### REFERENCES

1. K. Yamaoka, T. Nakagawa, and T. Uno. *J. Pharmacokin. Biopharm.* 6:547-558 (1978).
2. S. Riegelman and P. Collier. *J. Pharmacokin. Biopharm.* 8:509-534 (1980).
3. D. J. Culter. *J. Pharm. Pharmacol.* 30:476-478 (1978).
4. L. A. Bauer and M. Gibaldi. *J. Pharm. Sci.* 72:978-979 (1983).
5. M. Chung. *J. Pharm. Sci.* 73:570-571 (1984).
6. D. Perrier and M. Mayersohn. *J. Pharm. Sci.* 71:372-373, 1427-1428 (1982).
7. P. Veng-Pedersen and W. R. Gillespie. *J. Pharmacokin. Biopharm.* 12:535-543 (1984).
8. P. Veng-Pedersen and W. R. Gillespie. *J. Pharm. Sci.* 74:791-792 (1985).
9. M. Gibaldi and D. Perrier. *Pharmacokinetics*, Marcel Dekker, New York, 1982.
10. P. Veng-Pedersen. *J. Pharm. Sci.* 75:818-819 (1986).
11. P. Veng-Pedersen and W. R. Gillespie. *Biopharm. Drug Dispos.* 8:395-401 (1987).
12. K. K. Midha, R. M. H. Roscoe, T. W. Wilson, J. K. Cooper, J. C. K. Loo, A. Ho-Ngoc, and I. J. McGilveray. *Biopharm. Drug Dispos.* 4:331-338 (1983).
13. D. Brockmeier and J. Ostrowski. *Eur. J. Clin. Pharmacol.* 29:45-48 (1985).