# The USC Laboratory of Applied Pharmacokinetics presents a Workshop on

## Population Pharmacokinetic/Dynamic Modeling: Basic Concepts and Clinical Applications to Optimally Individualized Drug Therapy.

#### Wednesday & Thursday, May 7-8, 2003

This course is for physicians and pharmacists with an interest in population pharmacokinetic/dynamic modeling who have a grasp of the basic aspects of such work. **Day 1** will introduce and review **Basic PK/PD tools and concepts** of pharmacokinetic modeling, and will emphasize their application to optimal patient care. **Day 2** will discuss intermediate and advanced **PK/PD tools, and concepts,** including parametric and nonparametric population modeling. **Note:** if you would like to bring your own laptop computer to obtain and learn the relevant software (not included in the registration fee), you are encouraged to do so.

#### **Preliminary Program**

#### **Faculty:**

Roger Jelliffe, M.D., Professor of Medicine, USC School of Medicine, USA Irina Bondareva, Ph.D., Institute for Physical and Chemical Medicine, Moscow, Russia Dimiter Terziivanov, M.D., Hospital St. J. Rilsky, Sofia, Bulgaria

### Wednesday, May 7, 2003 – Pharmacokinetics and Optimal Patient Care

8:30 AM - Registration

9:00 AM - Welcome - Dr. Terziivanov

9:15 AM - Review of Basic Pharmacokinetic Concepts - Dr. Bondareva

Compartmental Models

Cumulation and Elimination

T ½, Fraction lost, Doses sustained.

Changing T ½, changing dose, outcomes.

9:45 AM – Ways of fitting data for patients

Linear regression of logs of data

Must wait for steady state

Must wait for complete distribution after a dose

Nonlinear regression on the data itself

No wait for steady state

No wait for distribution

Bayesian fitting – the best

The MAP Bayesian scenario and feedback strategy

10:30 AM - Break

10:45 AM - Estimation of Creatinine Clearance without a urine specimen in unstable patients – Dr. Jelliffe

11:00 AM - When to obtain serum data - Dr. Jelliffe

Not just the trough

Capture the dynamics

Some optimal strategies

11:20 AM - Modeling the assay error – Dr. Bondareva

11:40 AM - Parametric population models – Dr. Bondareva

What "parametric" means here

The iterative Bayesian (IT2B) modeling approach

Separating inter - from intra-individual variability (IIV)

Separating IIV from assay error

Demonstration of the approach – an Amikacin data set

12:00 Noon - Nonparametric population modeling approaches – Dr. Jelliffe

What "nonparametric means here

The NPEM approach

Using IIV, assay error, and stated ranges

12:15 PM - Using population modeling approaches optimally – Dr. Jelliffe

Get the assay error polynomial

Use IT2B - get Gamma

Then use NPEM, get the entire joint density, essentially resolving the population into up to one model for each subject studied.

12:30 PM - Lunch

1:30 PM - The separation principle: limitations to current dosage methods – Dr. Jelliffe

1:45 PM - Introduction to multiple model (MM) dosage design – Dr. Jelliffe

Software for MM dosage regimens

2:15 PM - Getting MM Bayesian posterior joint densities – Dr. Jelliffe

MM Bayesian posteriors

A new method – IMM – for detecting changing parameter values in patients

2:40 PM - How to plan and develop individualized dosage regimens for patients – Dr. Jelliffe

Set a target goal for each patient according to the need for the drug.

Aminoglycosides 10 and 1, or 20 and 0.5

Vancomycin trough 10

Digoxin – really a 2 compartment model

Clinical effect correlates better with tissue than serum concentrations

How to manage this problem clinically

Serum troughs 0.9 ng/ml

Peripheral peaks 7.0 ug/kg

Patients with atrial fibrillation need more

3:00 PM - Case studies in aminoglycoside therapy

Therapeutic drug monitoring

Making the individualized, Bayesian posterior, model

Analyzing the data

A patient on dialysis

3:30 PM - Break

- 3:45 PM Modeling Caffeine Metabolism and its Genetic Components Dr. Terziivanov
- 4:15 PM Concentration versus time-dependent drugs: Modeling organism growth and kill Dr.Jelliffe

4:45 PM - Adjourn

#### Thursday May 8, 2003 – Modeling Tools and Applications

9:00 AM - Cost-effectiveness of optimal aminoglycoside therapy – Dr. Jellliffe

9:30 AM - Outcomes in Busulfan therapy for bone marrow transplants in children – Dr. Jelliffe

9:45 AM - Case studies in digoxin therapy

An initial regimen for a patient with atrial fibrillation

A case history: another patient with atrial fibrillation

A patient on digoxin and quinidine

10:10 AM – Case studies in Aminoglycoside therapy – Dr. Jellliffe

A Patient on Gentamicin

A dialysis patient on Gentamicin

A difficult patient on Tobramycin

10:30 AM – Break

10:45 AM – Demo – Making an IT2B population model of Amikacin – Dr. Jelliffe

11:20 AM – Demo – Making a NPAG population model of Amikacin – Dr. Jelliffe

12:00 Noon - Comparing results: parametric and Nonparametric models - Dr.Jelliffe

12:30 PM - Lunch

1:30 PM - 3:45 PM - Modeling of Antiepileptic Drugs - Dr. Bondareva

2:00 PM - Making large and nonlinear population models - Dr. Bondareva

Demo - Using BOXES making a Michaelis-Menten model of Phenytoin

2:15 PM - Demo setting up Big NPAG Model. Modelling Phenytoin - Dr.

Bondareva

A typical subject data file

Setting up the model, the data, the instructions, sending it, analysing it. Evaluating the results

3:00 PM - BREAK

3:30 PM – Summary: Strengths and Weaknesses of Parametric and Nonparametric methods – Dr. Jelliffe

4:00 PM – Adjourn.