



#### clinical Future PIPAC Research

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# Disclosures

- CEO/Owner of Capnomed GmbH
- CEO/Owner of Capnopharm GmbH

These disclosures have been deemed as irrelevant, as this presentation is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and I will not make care recommendations.

*This presentation and/or comments will be free of any bias toward or promotion of the above referenced companies or their products and/or other business interests.* 

The off-label or investigational use of Cisplatin, Doxorubicin, Oxaliplatin, nab-Paclitaxel will be addressed.





#### PIPAC: the research space



Environment





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#### PIPAC is not a therapy but a drug delivery system

# The therapeutic effect is achieved by the drug, not the device





# Hyperbaric PIPAC (up to 20 mmHg)

- Significant effect of increased intra-abdominal pressure (20 vs 12 mmHg) on DOX penetration depth
- 2. Large variations in DOX penetration between abdominal organs
  - omentum > <u>ovary > colon\*</u>
- 3. Large variations between animalsm (sheeps)

\* Explaining HIPEC effect ovarian / colon cancer ?





#### Green: doxo, Blue: counterstaining (DAPI)

Mimouni et al, BMC cancer 2021



#### <u>Hyperthermic</u> PIPAC (41-43 °C)



#### Three heating devices needed

#### Bachmann C. et al, Surg Endosc 2021



#### Intraluminal infrared energy delivery





### Hyperthermic PIPAC (41-43 °C)

DOX tisse concentration



hPIPAC is technically feasible

No pharmacological advantage of hPIPAC > PIPAC

Bachmann C. et al, Surg Endosc 2021





# Electrostatic loading (ePIPAC): granulometry

- Aerosol sediments 5 times
   faster after ePIPAC vs PIPAC
- 2. ePIPAC prevents

  agglomeration of aerosol
  particles over time: smaller

  Median Aerodynamic
  Diameter (MAD)



Sautkin I et al, PhD thesis, Tübingen 2022





# Electrostatic precipitation (e)PIPAC: spatial distribution



Simulation

Van de Sande et al, Adv Healthcare Mater 2020

#### In-vitro experiment



Sautkin I et al, PhD thesis, Tübingen 2022

#### Spatial distribution more homogeneous after ePIPAC vs. PIPAC





### ePIPAC: depth of tissue penetration (nab-PTX)

Tissue penetration

Tissue concentration



Tissue drug delivery **optimized** after ePIPAC vs. PIPAC

Van de Sande et al, Adv Healthcare Mater 2020





### ePIPAC vs. PIPAC : biological effect (DOX)

- Cleaved Caspase-3 (apoptosis marker) as determined by Immunohistochemistry
- Comparison of ePIPAC vs. PIPAC
- eIBUB model

After ePIPAC, apoptosis is observed on the outside bladder surface



Sautkin I, PhD Thesis





# ePIPAC: synergy with charged nanoparticles

Positively charged Curcumin-PLGA nanoparticles Ex-vivo experiment (inverted bovine urinary bladder, IBUB)

CUR-PLGA-NPs increased:

- depth of tissue penetration by 81.5%
- tissue concentration by 80%.

Electrostatic precipitation further improved uptake of positively charged CUR-PLGA-NPs by 41.8%



Castagna A et al, Nanomedicine 2021



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### <u>Ultrasound</u> PIPAC (usPIPAC)



Hoeltzcke P et al, Surg Endosc (in press)





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#### usPIPAC: granulometry

Granulometry of usPIPAC equivalent to PIPAC for aqueous solutions (green curve)

PIPAC superior for glucose (red) or silicone oil (blue)



Hoeltzcke P et al, Surg Endosc, in press





### usPIPAC: spatial distribution, tissue penetration



superior to usPIPAC

Hoeltzcke P et al, Surg Endosc, in press





#### PIPAC for non-viral gene delivery: siDNA

AsiDNA = **DNA damage repair inhibitor** disrupting and exhausting the tumour DNA damage response mechanism.



Cancer cells continue dividing with damaged DNA, resulting in cell death

AsiDNA activates DNA repair signals, interfering with and preventing DNA repair in cancer cells while sparing healthy cells

Multiple DNA repair pathways are activated in cancer cells allowing them to repair damaged DNA and escape cell death

Onxeo-AsiDNA-cancer-treatment.jpg (669×490) (labiotech.eu)



Dbait can be delivered as PIPAC into human peritoneal tissue

Solass et al Surg Endosc 2012





### PIPAC for non-viral gene delivery: siDNA

AsiDNA (as PIPAC) sensitizes human peritoneal cancer nodes to genotoxic therapy ex-vivo



Detection of histone gamma-H2AX (phosphorylatedH2AX) reveals nuclear activation of DNA-PK by AsiDNA







### PIPAC for non-viral gene delivery: RNA lipoplexes



Administration of RNA lipoplexes as PIPAC In vitro, nebulization of the siRNA complexes did not lower significantly transfection efficiency of SKOV3 cells when compared to non-nebulized complexes.

Minnaert et al. Macromol Biosc 2017





# PIPAC for non-viral gene delivery: RNA lipoplexes



In-vivo, PIPAC distribution of RNA was superior to the IV route. Bioluminescence was localized to the peritoneal cavity, while IV injection mainly induced protein expression in the spleen.





# PIPAV: Pressurised Intraperitoneal Aerosolised Virotherapy

#### Demonstration of feasibility in vitro



Cytolytic adenovirus Ad5.GFP survives aerosolization using the CapnoPen device and retains its ability to transduce Wistar Rat hepatocytes in vitro



The virus is unaffected by exposure to hyperbaric conditions (up to 40 mmHg)

Tate et al, Pharmaceutics 2021





# PIPAV: Pressurised Intraperitoneal Aerosolised Virotherapy

#### Demonstration of feasibility in-vivo (Wistar rat model)

#### Intraperitoneal

#### Intravenous

Intraperitoneal injection of 1x10<sup>11</sup>vp Ad5.Luc in 5 ml 0.9% NaCl



Intravenous injection of 1x10<sup>11</sup>vp Ad5.Luc in 5 ml 0.9% NaCl

#### Luciferase expression 72 h after IV & IP injection (IVIS)

The higher luminescence in the IV group is likely due to viral expression in the liver & clotting factor X in the blood engaged by Ad5 to enter cells presenting Heparan Sulfate ProteoGlycans.

Treatment group	Rat	Day 0	Day 1 post procedure			Day 2 post procedure		
		Weight (g)	Weight (g)	% change	Analgesi a	Weight (g)	% change	Analgesi a
Intraperitoneal Ad5.Luc injection (3 × 10 <sup>10</sup> vp)	A1	343	345	0.6	0	350	1.4	0
	A2	335	337	0.6	0	343	1.8	0
	A3	349	352	0.9	0	353	0.3	0
Intraperitoneal Ad5.Luc aerosolisation (3 × 10 <sup>10</sup> vp)	B1	342	345	0.9	0	330	-4.3	1
	B2	330	330	0.0	0	307	-7.0	1
	B3	340	334	1.2	0	332	-0.6	1
Intraperitoneal 0.9% NaCl injection	C1	337	334	-0.9	1	337	0.9	0
Intraperitoneal 0.9% NaCl aerosolisation	C2	333	324	-2.7	1	317	-2.2	1
Intraperitoneal Ad5.Luc injection $(1\times 10^{11} vp)$	D1	345	342	0.0	0	350	0.0	0
Intravenous Ad5.Luc injection (1 × 10 <sup>11</sup> vp)	E1	345	344	0.0	0	347	0.0	0
Intraperitoneal 0.9% NaCl injection	F1	346	350	0.0	0	353	0.0	0

#### The rats tolerated the increased dose ( $1 \times 1011 \text{ vp}$ )

well No increase in welfare scores, no requirement for analgesia

Tate et al, Pharmaceutics 2021





#### Summary

- **Pressure** increases drug tissue uptake (by convection)
- ePIPAC
  - improves the homogeneity of spatial distribution vs. PIPAC
  - increases the depth of tissue penetration (DOX, PTX)
  - should be applied for at least 6 min, activation before aerosolization
- hPIPAC is feasible but has no pharmacological advantage over PIPAC in the eIBUB model
- **usPIPAC** is feasible but has no advantage over PIPAC in the eIBUB model
- PIPAC can be used for **non-viral (DNA, RNA)** and **viral (PIPAV) gene delivery**



