Are valved holding chambers (VHCs) the preferred device for young children or do valve-less spacers (VLs) offer better delivery?

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Introduction

- We describe in ISAM Poster P136 (New Devices & Emerging Therapy, 1st June) the development of a new single-use DispozABLE Spacer™.
- Salbutamol sulphate in vitro aerosol characteristics via the DispozABLE Spacer were comparable with pMDI alone, and between different commercial pMDIs, Ventolin® HFA (GSK) and ProAir® HFA (Teva).
- DispozABLE Spacer features include recyclable, valve-less, low-cost, low-bulk stack-storage and simple assembly (Figure 1).

Figure 1



New research objectives

- To compare, using standard flow rate conditions, in vitro aerosol characteristics via the DispozABLE Spacer and via two commercially available spacers:
 - VHC -
- OptiChamber® Diamond (Philips Respironics)
 - valve-less spacer Nessi® Spacer (Hi-Tech Pharmacal Co)
- To extend this to a three-way comparison using a flow rate representative of paediatric use, 12 L/min.

Results

- At 28.3 L/min, there were no significant differences (t-value range 0.46 - 1.44) in total dose, respirable dose, or fine particle dose between the DispozABLE Spacer and OptiChamber Diamond for either Ventolin (Table 1) or ProAir (Table 2).
- · Nessi Spacer Data were comparable (Table 1).
- Total dose delivered data for the pMDIs alone (Tables 1 and 2) demonstrate the contribution of the coarse particle fraction, >4.7 μ m.

Table 1

| Ventolin pMDI | Aerosol characteristic (µg/actuation) | | | | | |
|-----------------------------|---------------------------------------|--------------------------------------|--------------------------------|--|--|--|
| | Total dose delivered | Total respirable dose (0.5-5.0μm) | Fine particle dose (<4.7µm) | | | |
| DispozABLE Spacer (DS) | 49.0 ± 4.9 | 40.7 ± 4.6 | 41.6 ± 4.3 38.8 ± 3.0 | | | |
| OptiChamber Diamond (OD) | 44.8 ± 3.4 | 36.9 ± 3.2 | | | | |
| pMDI alone | 103.8 ± 0.9 | 42.2 ± 4.1 | 48.0 ± 2.7 | | | |
| Nessi Spacer (NS) | 46.8 ± 0.6 | 36.7 ± 0.6 | 38.2 ± 0.3 | | | |

Table 2

| ProAir pMDI | Aerosol characteristic (µg/actuation) | | | | |
|-----------------------------|---------------------------------------|--------------------------------------|--------------------------------|--|--|
| | Total dose delivered | Total respirable dose (0.5-5.0µm) | Fine particle dose (<4.7µm) | | |
| DispozABLE Spacer (DS) | 48.0 ± 5.1 | 38.0 ± 4.6 | 39.0 ± 4.8 | | |
| OptiChamber Diamond (OD) | 43.2 ± 4.5 | 35.4 ± 4.5 | 37.5 ± 4.5 | | |
| pMDI alone | 99.6 ± 4.6 | 40.5 ± 4.2 | 46.2 ± 3.7 | | |

Methods

Study tools:

- 8-stage Andersen Cascade Impactor operated according to manufacturer's instructions and to US Food & Drug Administration requirement standards
- All testing and analytical chemistry conducted to Good Laboratory Practice at an independent laboratory.
- Aerosols: Ventolin HFA and ProAir HFA pMDIs, 90µg ex-mouthpiece, 108µg ex-valve.
- Devices: OptiChamber Diamond VHC and valve-less Nessi Spacer and DispozABLE Spacer.

Aerosol characteristics at 28.3 L/min:

- Data from Poster 136 Study 2 compared with drug delivery from Ventolin and ProAir via the OptiChamber Diamond, and from the pMDIs alone (n=3).
- Student's t-test with a two-tailed comparison (t-value < 2.23 = no significant difference at 95% confidence level).
- Ventolin via valve-less Nessi Spacer determined (n=3) and compared.

Aerosol characteristics at 12.0 L/min:

- Data from Ventolin via DispozABLE Spacer, OptiChamber Diamond and Nessi Spacer (n=3) compared in the same experiment.
- Student's t-test with two-tailed comparisons (t-value < 2.78 = no significant difference at 95% confidence level).

Results

- At 12.0 L/min, there were no significant differences (t-value <2.78) between the two valve-less spacers, DispozABLE Spacer and Nessi Spacer (Table 3).
- DispozABLE Spacer was significantly different (t-value > 2.78) compared to the valved OptiChamber Diamond for all three variables, with the DispozABLE performance being superior.

Table 3

| Ventolin pMDI | Aerosol characteristic (µg/actuation) | | | | | | |
|-----------------------------|---------------------------------------|-----------|-----------------------|----------------------|--------------------|-------------------|--|
| | Total dose | delivered | Total respi (0.5-5 | irable dose .0μm) | Fine part (<4.7 | icle dose 'μm) | |
| DispozABLE Spacer (DS) | 55.6 ± 5.3 | | 44.0 | ± 5.1 | 43.9 | ± 5.3 | |
| OptiChamber Diamond (OD) | 36.9 ± 4.2 | | 29.3 ± 4.9 | | 29.8 ± 4.5 | | |
| Nessi Spacer (NS) | 49.2 ± 4.4 | | 39.6 ± 3.8 | | 39.7 ± 3.3 | | |
| | DS v OD | DS v NS | DS v OD | DS v NS | DS v OD | DS v NS | |
| Difference | 18.7 | 6.4 | 14.7 | 4.4 | 14.1 | 4.1 | |
| t-value | 4.79 | 1.63 | 3.64 | 1.21 | 3.50 | 1.15 | |

Conclusions

- 1. A clinically effective dose was delivered via all three spacer devices.
- 2. The DispozABLE Spacer is suitable for effective delivery of medication (salbutamol sulphate).
- Delivery of respirable salbutamol sulphate was similar via each of the chamber/spacer devices, and comparable to pMDI at the standard flow rate.
- At low flows a valve-less spacer may perform better than a VHC, which has clinical implications for treating infants.