

Tool for Studying Drug Delivery to the Eye in Case of Glaucoma

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Introduction: To improve the efficiency of drug delivery to the eye clinicians are prescribing therapeutic lens containing drug. The aim of this study is to give mathematical arguments to answer the question:

TOPICAL EYE DROPS or THERAPEUTIC LENS?

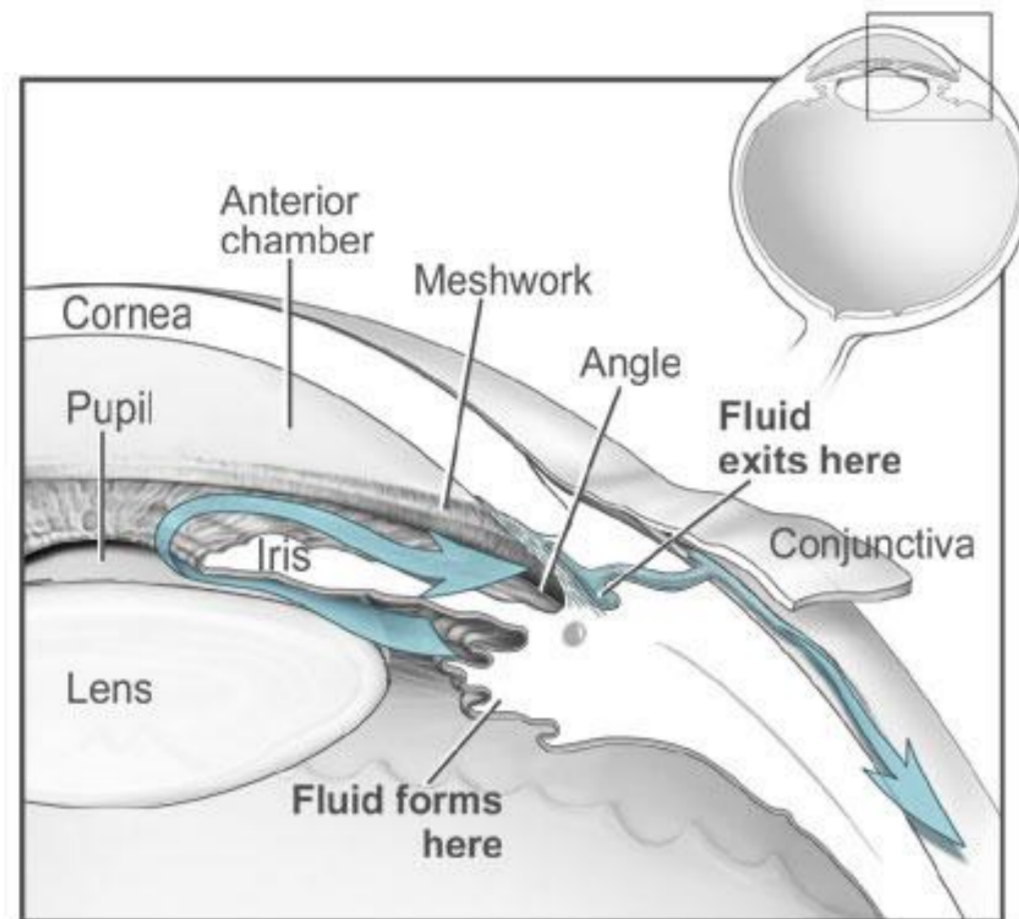


Figure 1. Fluid dynamics in the eye
(Credit: National Eye Institute, National Institutes of Health)

Mathematical model: The mathematical model takes into account (i) diffusion processes in the therapeutic lens (TL), cornea (C) and anterior chamber (AC); (ii) metabolic consuming processes of the drug in the cornea and anterior chamber; (iii) convection processes induced by the circulation of aqueous humour (AH) in the anterior chamber.

$$\begin{array}{l}
 \text{Therapeutic Lens} \left\{ \begin{array}{l} \frac{\partial C}{\partial t} = D \nabla^2 C - \lambda(C - C^b) \\ \frac{\partial C^b}{\partial t} = D_b \nabla^2 C^b + \lambda(C - C^b) \end{array} \right. \\
 \text{Cornea} \left\{ \begin{array}{l} \frac{\partial C_c}{\partial t} = D_c \nabla^2 C_c - K_c C_c \\ \frac{\partial C_a}{\partial t} = D_a \nabla^2 C_a - \mathbf{u} \cdot \nabla C_a - \frac{C_{la}}{V_a} C_a \end{array} \right. \\
 \text{Anterior Chamber} \left\{ \begin{array}{l} \rho \frac{\partial \mathbf{u}}{\partial t} - \nabla \cdot \eta (\nabla \mathbf{u} + (\nabla \mathbf{u})^T) + \rho (\mathbf{u} \cdot \nabla) \mathbf{u} + \nabla p = 0 \\ \nabla \cdot \mathbf{u} = 0 \end{array} \right.
 \end{array}$$

Geometry

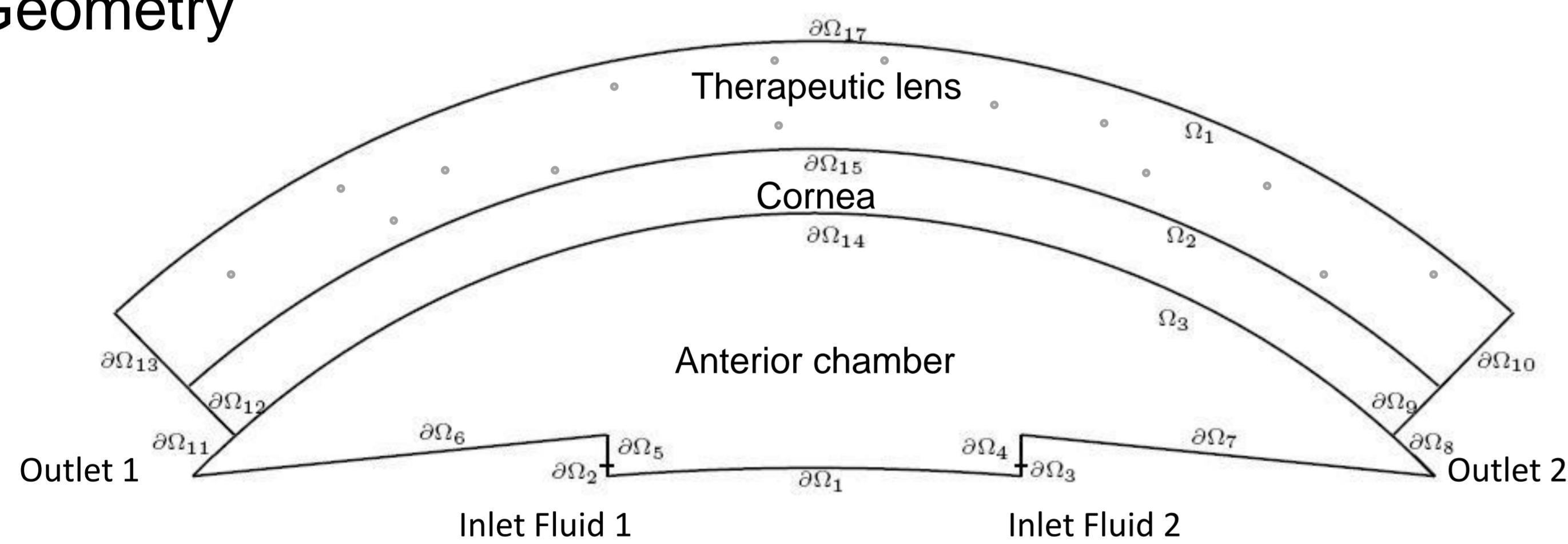


Figure 2. Geometry of the lens, cornea and anterior chamber

Initial, interface and boundary conditions

$$\begin{array}{l}
 C = C_0, \Omega_1, t = 0 \\
 C^b = C_0^b, \Omega_1, t = 0 \\
 C_c = 0, \Omega_2, t = 0 \\
 C_a = 0, \Omega_3, t = 0 \\
 \mathbf{u} = \mathbf{u}_0, \Omega_3, t = 0 \\
 p = p_0, \Omega_3, t = 0
 \end{array}
 \begin{array}{l}
 D \nabla C \cdot \eta = 0, \partial \Omega_{i,i=17,10,13}, t > 0 \\
 D_b \nabla C^b \cdot \eta = 0, \partial \Omega_{i,i=17,15,10,13}, t > 0 \\
 D \nabla C \cdot \eta = D_c \nabla C_c \cdot \eta, \partial \Omega_{15}, t > 0 \\
 D_c \nabla C_c \cdot \eta = 0, \partial \Omega_{i,i=12,9}, t > 0 \\
 D_c \nabla C_c \cdot \eta = A_c (C_c - C_a), \partial \Omega_{14}, t > 0 \\
 D_a \nabla C_a \cdot \eta = 0, \partial \Omega_{i,i=1,4,5,6,7}, t > 0
 \end{array}
 \begin{array}{l}
 \mathbf{u} = \mathbf{u}_0^F, \partial \Omega_{i,i=2,3}, t > 0 \\
 \mathbf{u} = 0, \partial \Omega_{i,i=1,4,5,6,7,14}, t > 0 \\
 p = p_0^F, \partial \Omega_{i,i=8,11}, t > 0
 \end{array}$$

Results: In all simulations an obstruction of the trabecular mesh (TM) is considered, leading to an intraocular pressure - IOP- of 3600 Pa (in a normal eye the IOP is 1950Pa).

Therapeutic lens

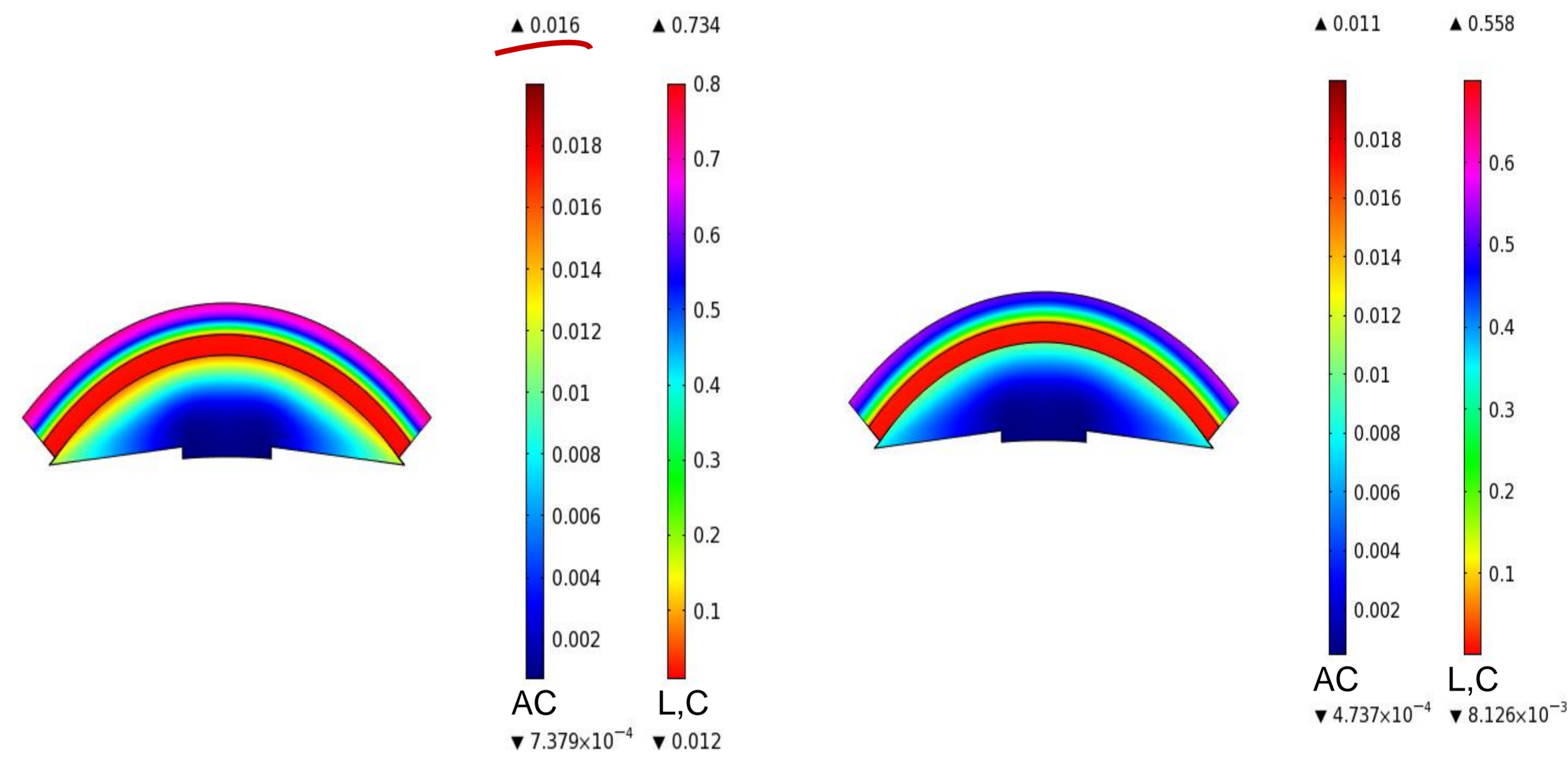


Figure 3. Drug concentration at 1h (left) and 2 h (right)

Topical administration

$$\text{Tear Film} \quad \frac{\partial C_T}{\partial t} = D_a \nabla^2 C_T - \frac{S}{V_L + V_i e^{-k_d t}} C_T, \Omega_1$$

Figure 4. Drug concentration at t=100s (left) and t=300s (right)

Variables and Parameters

- initial concentration - $C_0 = 1.147, C_0^b = 0.209 \text{ (mol / m}^3\text{)}$
- diffusion coefficient - $D = 3.333 \times 10^{-11}, D_c = 5.74 \times 10^{-9}, D_a = 5 \times 10^{-9} \text{ (m}^2 / \text{s)}$
- transfer, metabolic and drainage rate - $\lambda = 2 \times 10^{-4}, K_c = 1.0713 \times 10^{-5} \text{ (s}^{-1}\text{)}, k_d = 1.45 \text{ (min}^{-1}\text{)}$
- clearance, lacrimal secretion - $C_{la} = 30 \text{ (}\mu\text{l / min)}, S = 1.2 \text{ (}\mu\text{l / min)}$
- volume - AC, TF, TF+Drop, surface area of the cornea - $V_a = 1000, V_L = 7, V_i = 10 \text{ (}\mu\text{l)}, A_c = 0.1$
- average velocity and IOP - $u_0 = 1.2 \times 10^{-3} \text{ (m / s)}, p_0^F = p_0 = 1950 \text{ (Pa)}$
- initial concentration - drop - $C_{T0} = 5 \times 10^{-3} \text{ (g / cm}^3\text{)}$

Conclusions: Therapeutic lenses are more efficient than topical administration in the glaucoma treatment: higher drug concentration is obtained and for a longer period of time (see red marks in Fig. 3 and 4). At present a more realistic model where TM is represented as a porous media is being implemented. Simulations of therapeutic effects of different drugs in the IOP are also being developed.

References:

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