





Allow an extension of existing patents for block-buster drugs with a newly formulated API that is more efficient either by reducing dosage (increased bioavailability) or by extending the release of the compound over a longer period of time



Allow the formulation of High Soluble Compounds that are poorly bioavailability



Easier formulation of newly discovered molecules sometimes rejected before pre-clinical trials, despite their in vitro efficacy, because of poor solubility and bio-availability



Reduce or eliminate side effects



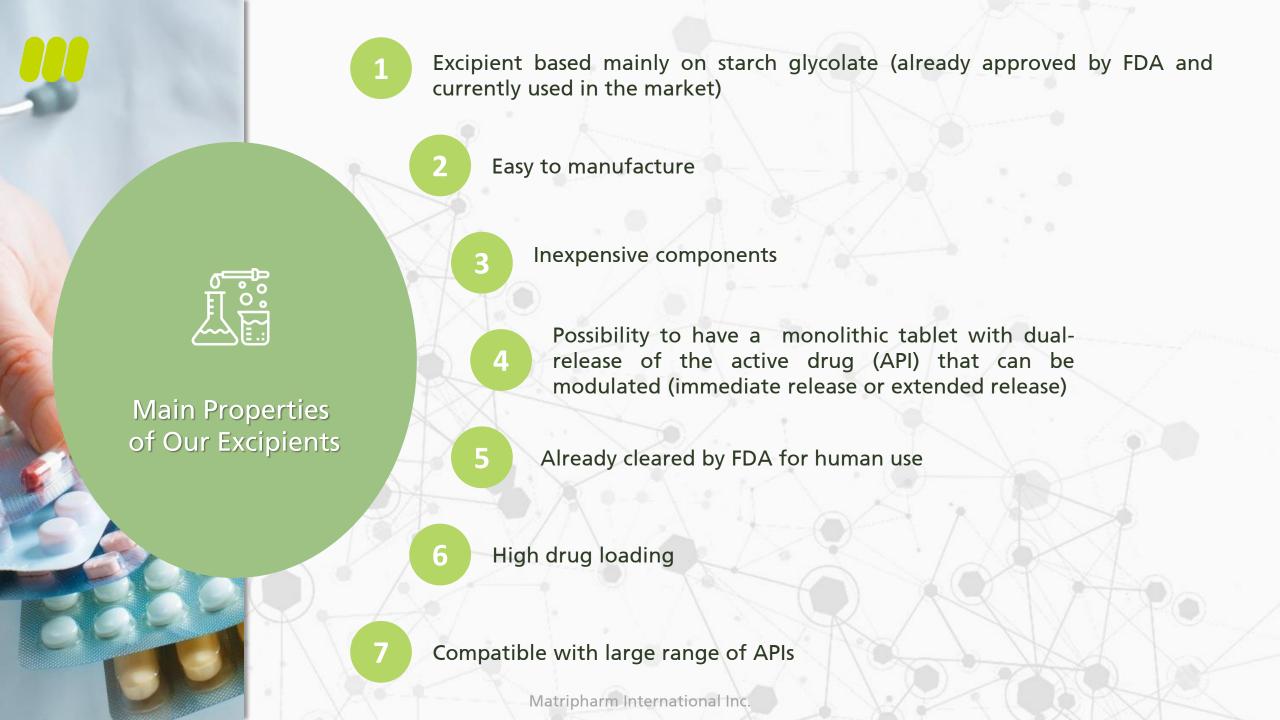
Heighten safe and improve efficacy profile



Increase patient compliance



Compatible with many APIs in today's market





Two speed monolithic system for controlled release of drugs (2RR)

<u>Dual-rate release formulation</u> <u>with high drug loading (DRR)</u>

Our Intellectual Property Portfolio

Monolithic tablets based on carboxyl polymeric complexes for controlled drug ... (HSDER)

Monolithic composition for dual-rate release with high drug loading (DRR)





The new platform described herein a process consists in converting insoluble APIs to water soluble (WS) or dispersible (WD) APIs. One of the unique and important aspects of our Technology is that the conversion processing is operated under mild conditions and without modification of APIs. Consequently, there is no alteration of API structure or of its biological activity.



In addition, the converted API is mechanically resistant in biological fluids (i.e. gastric acid) and stable at high temperatures able to protect effectively certain sensitive APIs against to oxidation and to light enhancing thus its shelf-life.





The converted API in powder forms can obtain under homogenous liquid form by dispersing in an aqueous medium or under tablet forms by direct compaction. It is of interest to mention that these different dosage forms could be formulated with our excipients for immediate release (rapid action) or controlled release (delayed or longer action) including, when it may be necessary, targeted colon delivery.



One of key feature of the our Technology is not only to improve the availability and effectiveness of APIs, but also to reduce their undesirable secondary effects. Additionally, the simplicity, compatibility and versatility of our Technology confers to new formulations with WS-API a high competitiveness compared with that of its initial insoluble



Advantages of Our Technology



Inexpensive and 100 % GRAS (Generally Recognized As Safe) raw materials



Simple to manufacture;



Unparalleled performance and safety;



Broad portfolio of applications for almost common dosage forms;



easy to formulate with any drugs under oil, liquid or solid forms;



Simple to formulate for immediate or controlled delivery;



Stable and resistant in gastric acidity;



able to protect against oxidation and light for sensible APIs;



Possible to open ways to enable intravenous and intramuscular administrations for certain APIs, etc.





Formulate double rate-release in a monolithic tablet easy to manufacture and with the possibility of formulate the release

How our technologies can be immediately applied to existing products?



Extend the patent of existing products by accelerating the patent protection of newly formulated molecules



Formulate High Soluble Drugs in a time-release situation



Increase the bio-availability of poorly soluble drugs in preclinical development





Formulate new API by combing two molecules using our know-how.

Business Models for An Industrial



Using our proprietary technologies and trade secret we are willing to re-formulate existing API (active pharmaceutical ingredients) that need a better and simpler delivery systems in order to restart again a patented life-cycle



Formulate new API that are currently at the discovery stage using our know-how.





Paracetamol (DRR)

Matripharm
Products
(Started
Registration with
Health Canada)



Metformin (HSDER)



Ibuprofen (2RR)



Paracetamol/Caffeine (DRR)



Examples of Existing Products that Can Be Improved by Matripharm Technologies

- Atorvastatin (Lipitor)
- Norvasc (Amlodipine)
- Diflucan (Fluconazole)
- Pregabalin(Lyrica)
- Sertraline (Zoloft)
- Sodium Cromoglycate

Hydrocodone Bitartrate/ Phenylephrine HCl

- Nilutamide
- Dolasetron Mesylate
- Irbesartan
- Leflunomide
- Meperidine hydrocholoride

- Metformin hydrochloride
- Fludarabine phosphate
- Zopiclone
- Furosemide
- Dronedarone

Clopidogrel (possible combined with or without ASA)

 enterosolvental

 Sevelamer hydrochloride, Acebutolol hydrochloride



(Applicable Example: Metformin Extended Release)

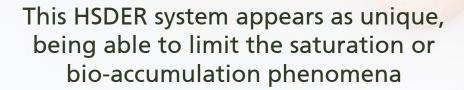






HSDER Technology was developed for controlled release of high soluble drugs such as Metformin (~ 300 mg/mL)



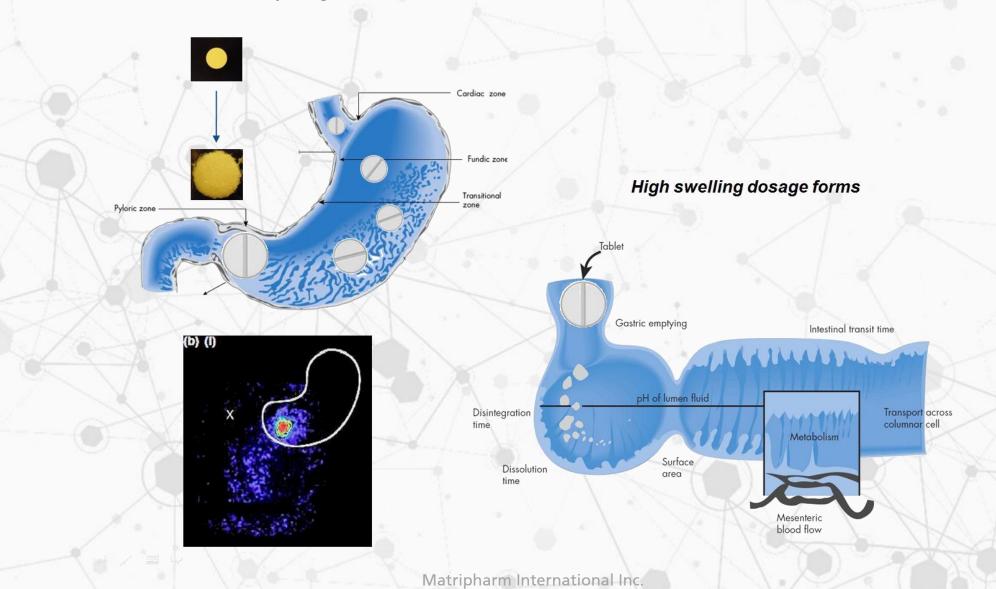




The technology concept is widely differing from the systems currently commercialized (Gastroretentive Dosage Form)



Gastroretention Technology Glucophage SR (MERCK SERONO) – Glumetza (DEPOMED)





Comparison of Cost between Immediate and Extended Release Formulation

Metformin (Non-proprietary) Pom

Tablets, coated, metformin hydrochloride 500 mg, net price 28-tab pack = 93p, 84-tab pack = £1.37; 850 mg, 56-tab pack = £1.34. Label: 21

Oral solution, sugar-free, metformin hydrochloride 500 mg/5 mL, net price 100 mL = £62.06. Label: 21 Brands include Metsol®

Glucophage® SR (Merck) PoM

Tablets, m/r, metformin hydrochloride 500 mg, net price 28-tab pack = £3.07, 56-tab pack = £6.14; 750 mg, 28-tab pack = £3.20, 56-tab pack = £6.40; 1 g, 28-tab pack = £4.26, 56-tab pack = £8.52. Label: 21, 25 Dose initially 500 mg once daily, increased every 10–15 days, max. 2 g once daily with evening meal; if control not achieved, use 1 g twice daily with meals, and if control still not achieved change to standard-release tablets

Note Patients taking up to 2 g daily of the standard-release metformin may start with the same daily dose of *Glucophage® SR*; not suitable if dose of standard-release tablets more than 2 g daily

The *Scottish Medicines Consortium* (p. 3) has advised (December 2005) that *Glucophage® SR* is not recommended for the treatment of type 2 diabetes

Matripharm International Inc.



In Canada

Glumetza® was excluded from the Non-Insured Health Benefits (NIHB) Program as recommended by the Common Drug Review (CDR) and the Federal Pharmacy and Therapeutics Committee, because

1

«... published evidence does not support the clinical value or cost of the drug relative to existing therapies...»

2

«In a phase III trial, the occurrence of GI adverse events was comparable between all treatment groups (immediate vs. extended-release form), but all GLUMETZA treatment groups reported fewer occurrences of diarrhea and nausea in comparison to immediate release»



After studies conducted by Matripharm for GRDF system, no evident improvement of metformin side effects could be probably due to:



Retention time of tablet in the stomach is too long



Metformin release occurs locally and continually in the stomach (saturated absorption)



High dose of drug required to achieve beneficial effects



Incomplete release due to the interactions of Metformin with Matrix (croscarmellose sodium)

Impairment of the digestive system



in the stomach





The new system HSDER releases Metformin in the whole gastrointestinal system including:



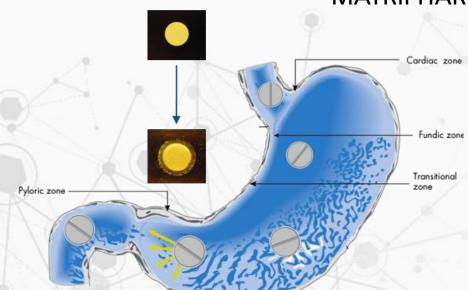
in upper intestine



including the colon and others

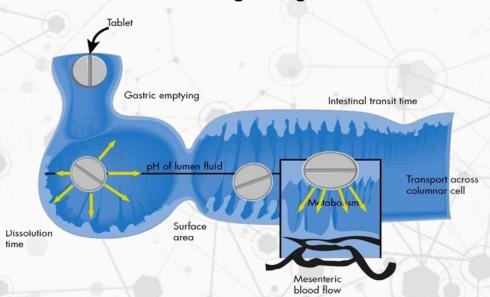


MATRIPHARM Technology



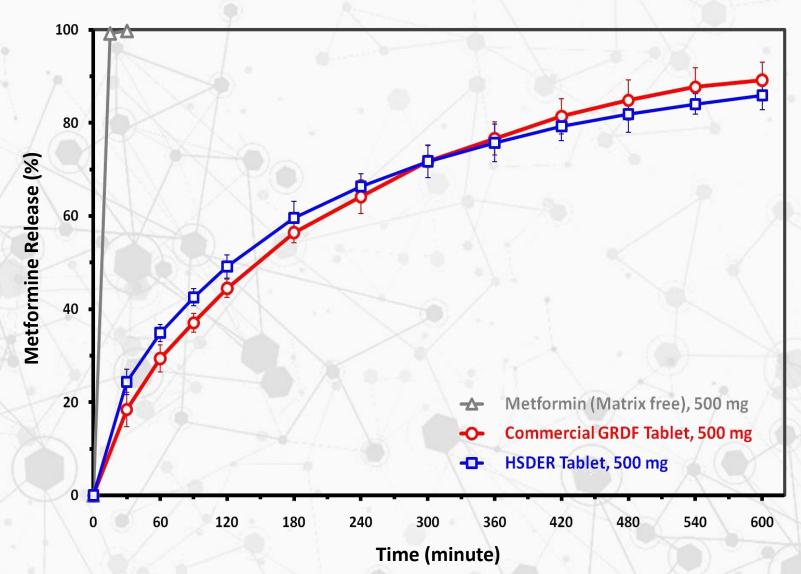
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Low swelling dosage forms



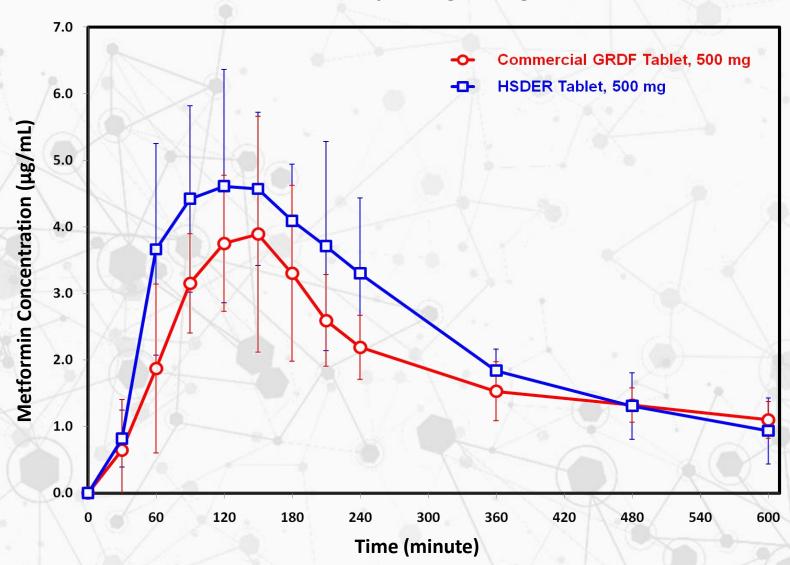


In vitro Dissolution Assay





In vivo Study (Beagle Dogs)





In vivo Study (Beagle Dogs)

352 Handbook of Pharmaceutical Manufacturing Formulations: Compressed Solid Products

Metformin Hydrochloride Biphasic Tablet

Manufacturing Directions

- 1. 25 g of ethylcellulose N10 NF is dissolved/dispersed in 100 mL of 95% ethanol.
- 2. This dispersion is gradually added to 500 g of metformin hydrochloride in a planetary mixer to produce a uniform damp granulation.
- The granulation is dried at 55°C for 1 hour and passed through a 0.8 mm aperture screen to break down agglomerates.
- 4. The metformin–ethylcellulose granules (541 g) are blended with 351.5 g of hydroxypropyl methylcellulose 2208 USP (100,000 cps grade), 10 g of hydroxypropyl methylcellulose 2910 USP (5 cps grade), and 100.5 g of microcrystalline cellulose in a planetary mixer for 10 minutes.
- 5. Finally this mix is lubricated with 1% w/w magnesium stearate and compressed into capsule shaped tablets, each containing 500 mg of metformin hydrochloride.



Matripharm Formulation Metformin Hydrochloride Extended Release Monolithic Tablet (500 mg)



Manufacturing Directions
Metformin-HCl (500 mg) are blended
with Matripharm Excipient (330 mg) and
compressed into capsule shaped tablet



Metformin Biphasic Tablet (Commercial Formulations)	Metformin Monolithic Tablet (Matripharm Technology)
High cost to manufacture	Low cost to manufacture
Preparation implied several steps	Preparation in one step
Special equipment required	No require special equipment
Requiring the use of solvent (alcohol)	No solvent required
Low loading tablet (max. 50 %)	High loading tablet (max 60 %)
No versatile excipient	Versatile excipient
Requires a new formulation process for each drug	Compatible with a large range of drugs

Two-Rate Release or «2RR» Monolithic Excipient Technology

useful for drugs with short half-life Non-steroidal anti-inflammatory drugs NSAID

(Applicable Example Ibuprofen 2RR)

Matripharm International





Motrin® Ibuprofen Tablets, USP

Cardiovascular Risk

- NSAIDs may cause an increased risk of serious
 cardiovascular thrombotic events, myocardial infarction,
 and stroke, which can be fatal. This risk may increase
 with duration of use. Patients with cardiovascular
 disease or risk factors for cardiovascular disease may
 be at greater risk (see WARNINGS).
- MOTRIN tablets are contraindicated for treatment of perioperative pain in the setting of coronary artery bypass graft (CABG) surgery (see WARNINGS).

Gastrointestinal Risk

NSAIDs cause an increased risk of serious gastrointestinal adverse events including bleeding, ulceration, and perforation of the stomach or intestines, which can be fatal. These events can occur at any time during use and without warning symptoms. Elderly patients are at greater risk for serious gastrointestinal events (see WARNINGS).

In order to reduce side effect, it is desirable to reduce the dose...

Two Rate Release (2RR) system is conceived to release API such as to provide:



First, a rapid therapeutic effect (an initial dose effective required for immediately pain relief)



Followed by a sustained release (maintain the effective concentration in therapeutic window for a longer period of time)



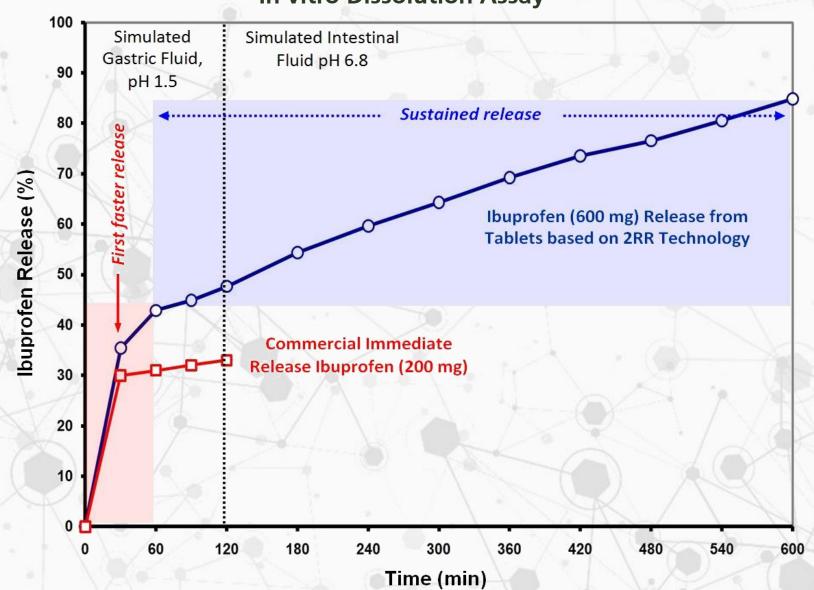
useful for subjects (e.g. Alzheimer) unable to follow frequent administrations



Useful for Anti-imflamatories

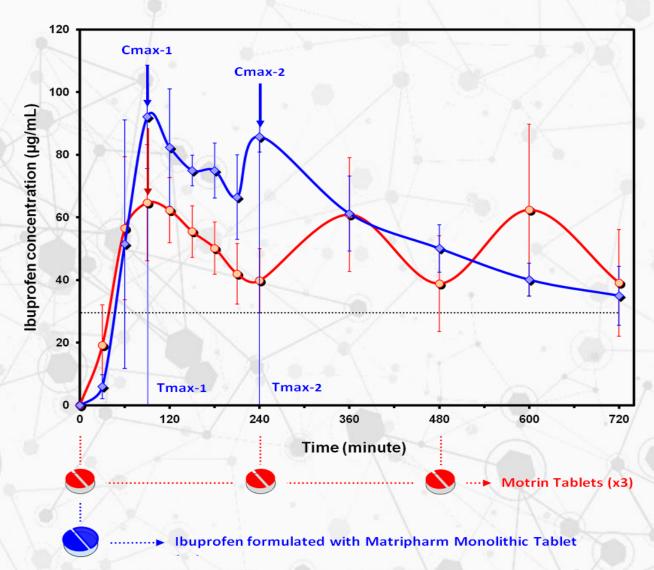








In vivo Study (Beagle Dogs)





Ibuprofen Pharmacokinetic Parameters in Dogs from 2RR Monolithic Tablets vs Conventional Form Motrin®

	Ibuprofen Monolithic Tablet formulated with 2RR Technology	Conventional Dosage Form
Test or Control Articles	2RR-400	Motrin [®]
Dose (mg)	400	200
Number of Dose	1 (x 400 mg)	3 (x 200 mg) (every 4 h, at to, t4 & ts)
Route of Administration	Oral	Oral
Cmax-1 (µg/mL) Immediate Release	92	65
Cmax-2 (µg/mL) Sustained Release	86	
Tmax-1 (h) Immediate Release	1.5	1.5
Tmax-2 (h) Sustained Release	4.0	- · · · · · · · · · · · · · · · · · · ·
AUC _{0-24h} (μg.h/mL)	981	899
T _{1/2} (h)	9.9	4.8

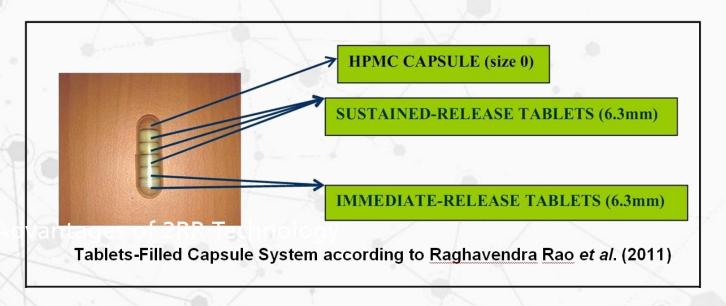
Cmax = maximal concentration; Tmax = time at maximal concentration; AUC₀₋₂₄ = area under the concentration-time curve from time zero to 24 h; T_{1/2} = elimination half-life.



Comparison of Dosage Forms



Matripharm Monolithic Tablet





Biphasic Tablets



Biphasic Tablets





Advantages of 2RR Technology



Reduced frequency of administration;



Diminished common side effects caused by NSAIDs;



Increased compliance for patients requiring long-term NSAID therapy

Moreover



Monolithic tablet easy to manufacture by direct compaction;



Compatible with a large rang of APIs;



High loading of APIs;



Raw material «generally recognized as safe» (GRAS)













'Commercial brand names and photos are for reference only"

Dual-Rate Release (DRR)

Technology MI-755







Dual-Rate Release (DRR)

Technology MI-755



The DRR matrix present the same 2RR kinetic profile, but used for a combination of APIs (e.g. Caffeine + acetaminophen)



This matrix (composed polysaccharide complexed with amphionic molecules) is mildly disintegrated in gastric fluid, but stable in intestinal fluid



required lower excipient (active principle/excipient 80:20);



Easy and simple to manufacture: no heating and no spray-drying;



No required disintegrating agents in the formulation

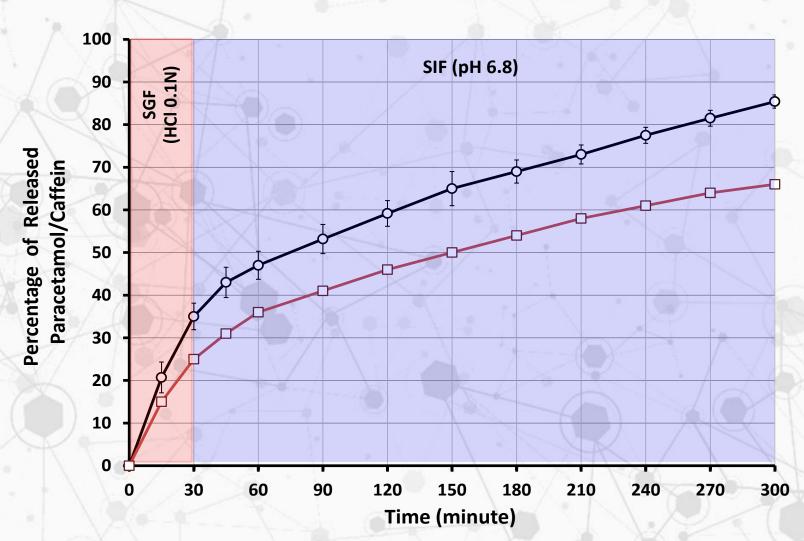
useful for Combination of different APIs



Dual-Rate Release (DRR)	Technology MI-755	
Ingredient	Quantity (mg)	Percentage (%)
Paracetamol	900	68.2
Caffeine	160	12.1
Carboxymethyl-Starch	130	9.8
Carboxymethylcellulose/Arginine-Cacium	30	2.3
Hydroxypropyl methylcellulose (E5)	60	4.6
Arginine	20	1.5
Magnesium Stearate	20	1.5
Total	1320	100.0
Ratio Paracetamo	l/Excipient 80:20	



Release Kinetic Profile of Paracetamol/Caffeine in Simulated Gastric (SGF) and Intestinal (SIF) Fluids



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