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A Continuous Aerosol Therapy System Utilizing a Modified Collison Nebulizer

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In conducting the research described in this report, the investigators adhered to the "Guide for the Care and Use of Laboratory Animals," as promulgated by the Committee on Revision of the Guide for Laboratory Animal Facilities and Care of the Institute of Laboratory Animal Resources, National Research Council. The facilities are fully accredited by the American Association of Accreditation of Laboratory Animal Care.

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ABSTRACT

A Collison nebulizer was incorporated into an exposure system to administer antiviral compounds as continuous aerosols to mice infected by influenza virus. The nebulizer was modified to control aerosol output by varying the liquid feed-rate. A multiple regression equation was developed from data obtained with uranine dye to define the aerosol concentration in the system as a function of the concentration of the test solution and the rate at which it was aerosolized. The rate of change of the concentration of the test solution due to evaporative losses was also ascertained for a 1 ml/min feed-rate over a 23.5-period of operation. Procedures are outlined for using these relationships to determine the concentration of a solution that will result in a given dose. Performance data for the drug ribavirin are presented.

The efficacy of aerosol vaccination of experimental animals and man against respiratory infection is well documented (5,6,8,9,12,15). For the most part these studies have been undertaken to test the hypothesis that the antigen would be more effective in inducing host immunity if the route of vaccine administration was the same as the route of disease acquisition. The same rationale has been applied to studies on therapeutic management of respiratory infections (1,2,7, 13,14,16,18). We have recently initiated a program to investigate the effectiveness of aerosols of potential antiviral compounds in the treatment of respiratory infection induced by influenza virus in laboratory animals. One of our objectives has been to compare the efficacy of a drug administered as a continuous aerosol with that resulting from the same dose of drug given either by short-term intermittent aerosols or by intraperitoneal injection (17,18). This report describes the system we have developed for continuous aerosol therapy of laboratory mice, and discusses the procedures followed to calibrate and characterize it. We also present performance data for a modified Collison nebulizer which is basic to the system, and describe the procedures for using those data to determine the concentration of drug required to achieve a specified dose, or to calculate the dose administered when the concentration is known.

MATERIALS AND METHODS

Aerosol system. The general features of the aerosol system are depicted schematically in Fig. 1. Plastic animal holding cages (22.9 cm wide by 45.7 cm long by 15.2 cm deep) were converted to therapy chambers by outfitting them with gasketed covers that were clamped on to achieve an air-tight seal. The output of the Collison nebulizer and secondary air were introduced into the first cage through a tube extending through the cover. Aerosol was forced from the cage through a second tube in the cover and thence through a 2-cm rubber tube to the inlet of the second cage. The system consisted of four cages interconnected in that manner. Watering tubes extended into the cages through tight-fitting rubber bushings in the covers. The ventilation rate, including the input from the nebulizer, was 15 l/min. The entire system was housed in a biological safety cabinet.

Aerosol generation. Aerosols were generated by a Collison nebulizer (11) which we modified in order to vary the concentration of the aerosol output by controlling the liquid feed-rate. Details of the modified nebulizer are shown in Fig. 2. Two of the liquid intakes were closed with machine-screw plugs. The third intake was fitted with a plastic tube through which the solution to be aerosolized was pumped at the desired rate. The liquid-feed tube adaptation was effected by cutting an infant feeding tube (size 5, French) to an appropriate length, inserting a 2-cm length of 19-guage hypodermic needle stock about 1 cm into the end of the feeding tube to prevent it from collapsing, and then "screwing" it into the threaded liquid intake of the nebulizer. A hole in the side of the jar accepted a 2-hole rubber stopper with feed-through

tubes to connect the nebulizer to the liquid feed pump, and to connect a liquid return pick-up tube to the reservoir. The reservoir was maintained air-tight; therefore, as liquid was withdrawn by the pump, a suction was created to return the run-off from the jar to the reservoir. By extending the pick-up tube to the bottom of the jar and tilting the jar slightly, it was possible to prevent an accumulation of spray solution.

The performance characteristics of the nebulizer were determined at four different liquid feed-rates: 0.1, 0.4, 0.7 and 1.0 ml/min. However, all of the studies to characterize the system were conducted with a 1.0-ml/min feed-rate. A variable speed syringe pump (Model 355, Sage Instruments, Cambridge, Mass.) supplied the nebulizer with fresh test solutions in all of the studies except one, in which aerosols were generated continuously over a 23.5-h period. In that case, a metering mump (Model RRP 1 G 20, Fluid Metering, Inc., Oyster Bay, N.Y.) was used and the solutions were recycled through the reservoir.

Test solutions. Uranine dye (Fisher Scientific Co., Fair Lawn, N.J.) dissolved in distilled water was used at concentrations of 10, 30 and 50 mg/ml to calibrate the nebulizer, and at 30 mg/ml to characterize the system. Base-line data were also obtained for 30 mg/ml aqueous solutions of ribavirin (kindly supplied by ICN Pharmaceuticals, Inc., Irvine, Calif.).

Aerosol sampling. The aerosol parameters pertaining to a specified cage in the system were determined from samples collected from the tube that connected it to the following cage, at a point adjacent to the

exhaust tube of the cage. All-glass impingers (AGI) were used to determine total aerosol concentrations (4). Particle size data were obtained with a series of single-stage impactor devices (SSI) for which the respective aerodynamic particle diameters associated with 50% collection efficiency were 1, 3 and 5 μm (10). The collection medium in both types of samplers was distilled water. Samples from the dye aerosols were assayed for fluorescence using a Model 54 fluorophotometer (Photovolt Corp., New York, N.Y.); a spectrophotometric procedure was used to evaluate the ribavirin samples (17).

The data obtained from the impingers of the SSI were employed in conjunction with those obtained with the AGI to characterize the aerosol in terms of two parameters: the mass median diameter (MMD) and the geometric standard deviation (GSD) of a log-normal distribution. Analyses of variance were computed on the logarithms of MMD, GSD and total aerosol concentrations.

Mice. In all of the studies described except the nebulizer calibrations, each of the cages in the system housed fifteen 5- to 6-week-old random bred, white Swiss mice weighing 20 to 25 g each.

RESULTS

Nebulizer calibration. Four replicate aerosols were generated with each of 12 combinations of solution concentration and liquid-feed rate. The system was allowed to operate for 5 min to establish steady-state conditions before sampling was initiated. Samples were collected from the first cage.

Total aerosol concentrations increased significantly ($P < 0.001$) in response to increases in either solution concentration or liquid feed-rate (Table 1). The relationship between aerosol concentration and the two variables was described by the following equation:

$$\hat{Y} = -0.5728 + 2.6045X_1 - 0.5758X_1^2 + 0.2925X_2 - 0.3162X_2^2 \quad [1]$$

where, in logarithms, $\hat{Y}$ is the estimated aerosol concentration in µg/l, X_1 is the concentration of the dye solution in mg/ml and X_2 is the liquid feed-rate in ml/min.

Particle size distributions were essentially the same regardless of solution concentration or feed-rate. Although MMD increased ($P < 0.001$) with increasing solution concentration, the differences were too small to be of practical importance in regard to respiratory tract deposition and retention. There was no demonstrable effect of feed-rate on MMD or of either of the variables on GSD. The overall geometric means for MMD and GSD were 1.38 µm and 1.79, respectively.

Cage-to-cage comparisons. Six replicate aerosols were generated to compare the aerosol parameters among cages. Samples were collected from each cage following a 20-min equilibration period.

The mean total aerosol concentration in the first cage (Table 2) was lower ($P < 0.01$) than that obtained at the same conditions in the nebulizer calibration study. This difference was associated entirely

with particles having aerodynamic diameters in the range of 3 to 5 μm; recoveries in the ≤ 1- and ≤ 3- m size classifications were essentially the same as those obtained previously. Since droplets produced by air-blast atomization characteristically carry high electrostatic charges, the lower aerosol concentration may have been the result of particle precipitation associated with the introduction of animal fur into the system; in this study each cage contained 15 mice.

Aerosol concentrations decreased in each successive cage ($P < 0.01$). The loss associated with each cage and the tube that connected it to the preceding cage amounted to about 8.8%. There was no evidence that the particle size distribution changed materially as a result of the aerosol passing through successive cages.

Continuous aerosol generation. Aerosols were generated continuously for 23.5 h on each of 5 days. At the beginning of each day, the reservoir was charged with 275 ml of dye solution. At 1, 3, 5, 7 and 23.5 h, AGI samples were collected from the first cage to determine aerosol concentrations, and the liquid in the reservoir was sampled to measure solute concentration. The volume of solution in the reservoir was measured at the end of the 23.5-h period.

In the Collison nebulizer, over 99% of the droplet mass is associated with droplets that either impinge on the wall, or are too large to escape the jar because their settling velocities exceed the velocity of the upward airflow to the outlet port (11). The evaporation of solvent from these droplets results in an increase in the concentration of the spray solution which is continually recycled.

This concentrating effect is described by the following equation:

$$C_t = C_o\left(\frac{V_o}{V_o - k_1 t}\right)^{k_2} \quad [2]$$

where, C_t is the solute concentration after t minutes of operation, C_o and V_o are the initial solute concentration and solution volume, respectively; k_1 is the total time-rate expenditure of solution due to evaporation and aerosol production; and k_2 is the loss of solvent due to evaporation expressed as a fraction of the total liquid loss. After 23.5 h, the mean volume of residual solution was 106 ml with a mean concentration of 47.8 mg/ml. These values were used in conjunction with the initial measurements of volume and concentration to establish k_1 and k_2 in equation [2] at 0.12 ml/min and 0.41, respectively. In practical terms, therefore, the system expended solution at an average rate of 0.12 ml/min; 0.07 ml/min was converted to effective aerosol while 0.05 ml/min of solvent was evaporated. The mean solution concentrations measured at 1, 3, 5 and 7 h were slightly lower than the values predicted by equation [2], but at most, differed by less than 5% (Table 3).

Measured aerosol concentrations at 3, 5, 7 and 23.5 h were lower than the values predicted by equation [1] by an average of 6.5% when the measured values of solution concentration were used in the computation and by about 8% when the concentrations predicted by equation [2] were used. The lower-than-predicted concentrations observed in the cage-to-cage comparisons (Table 2) where mice were introduced into the system, was still evident in this study at the end of 1 h of operation. However, by the third hour, a state of equilibrium appeared to have been reached.

Ribavirin. Base-line data were obtained with ribavirin by creating five replicate aerosols which were sampled at cages 1 and 3 beginning 20 min after the nebulizer was activated. The aerosol concentrations and particle size distributions from cage 1 were similar to those obtained with dye calibration (Table 4). In addition, the concentration of ribavirin in cage 3 was consistent with the 8.8% loss per cage determined in the cage-to-cage comparisons, and as before the particle size distribution in cage 3 was essentially the same as that in cage 1.

DISCUSSION

We have described a system which has proved successful for administering aerosols of antiviral drugs to mice with experimentally induced viral respiratory infections (17,18), and have presented the results of system characterization studies. Our purpose for this was to delineate the operating principles involved and identify the variables which affect performance in the continuous generation of small-particle aerosols.

It was essential to quantitate the effects of solute concentration and liquid feed-rate on aerosol concentrations, because, at a given ventilation rate and with continuous aerosolization, control of aerosol concentration is the only means for controlling dose. We have shown that these variables were mutually independent and, that as would have been predicted, their independent effects were direct and curvilinear. The curvilinear relationships suggest, of course, that a maximum exists for each variable beyond which there will be no further increase in aerosol concentration. Having determined with uranine both the form of, and the coefficients for, equation [1], that relationship becomes the basis for extrapolating the aerosol concentration of drug that will result for any combination of solute (drug) concentration and liquid feed-rate.

Although our experience has shown that the calibration data obtained with uranine can be used to predict the performance of the system with aerosols of ribavirin, it does not necessarily follow that this will hold for all other drugs. Since the output of the Collison nebulizer will vary as a function of the physical properties of the solution being aerosolized, and the electrostatic charge carried by

the particles will vary with the ionic strength or conductivity of the solution, sufficient base-line data should be obtained with each new compound to verify the predictive equations or determine the correction factors that should be applied.

The average aerosol concentration ($\bar{Y}$) that will result in a specified dose for an exposed animal can be determined from the following equation:

$$\bar{Y} = \frac{d}{mtr} \qquad [3]$$

where d is the dose, m is the respiratory minute volume (l/min) of the animal, t is the period of time (min) during which the dose is administered, and r is the respiratory retention rate. Now from equation [1]

$$\bar{Y} = \frac{1}{b - a}\int_a^b (-0.5728 + 2.6054X_1 - 0.5758X_1^2 + 0.2925X_2 - 0.3162X_2^2)dX_1 \qquad [4]$$

where the limits of integration a and b are the initial and final solution concentrations, respectively. It follows that the initial solution concentration required to achieve a given dose can be found by substituting the liquid feed-rate to be used for X_2 in equation [4]; integrating between the limits $a = X_1$ and $b = X_1 + \log\left(\frac{C_t}{C_o}\right)$ where $\left(\frac{C_t}{C_o}\right)$ is defined for the period of therapy by equation [2]; and solving the resultant quadratic equation for X_1 after substituting the value for $\bar{Y}$ which will, by equation [3], yield the desired dose.

Two inherent shortcomings of our system are the cage-to-cage differences in aerosol concentrations and the increase of aerosol concentration as a function of time due to increasing solute concentration in the spray solution. Fortunately, these differences followed predictable patterns and could, therefore, be quantitated. Aerosol concentrations in successive cages closely approximated a

geometrical progression described by the following general equation:

$$\hat{Y}_n = ae^{k(n-1)} \quad [5]$$

where $\hat{Y}_n$ is the estimated aerosol concentration in the nth cage, a and k are constants determined by the geometry of the system and the concentration of the aerosol entering the first cage, and e is the base of the natural system of logarithms. For our system, the values of the constants a and k pertaining to a 30-mg/ml solution and a 1-ml/min feed-rate were 86.2 µg/l and -0.092, respectively. The fractional loss per cage, L, was given by the following equation:

$$L = 1 - e^{-0.092} \quad [6]$$

We did not define fully the aerosol concentration-time relationship which in general is obtained by substituting the logarithmic form of the expression for solution concentration (equation [2]) for X_1 in equation [1]. Since the range of aerosol concentrations obtained with the 1-ml/min feed-rate was consistent with the dose requirements of our initial therapy studies, that was the only feed-rate for which we determined k_1 and k_2 of equation [2]. Therefore, our predictive capabilities with respect to either increase of aerosol concentration with time or the concentration of solution required to yield a given dose are presently limited to the 1-ml/min feed-rate.

The cage-to-cage effects could have been avoided by adopting alternative designs. One alternative would have been to use a cage of sufficient size to hold as many mice as our 4-cage system holds. However, such a design would not have provided for isolation among groups of mice that had received different experimental treatments prior to therapy. A second alternative would have been a 4-cage parallel system with one-fourth of the aerosol going to each; that is,

dividing the aerosol-laden ventilation air equally among the cages. We were prevented from using such a design by a requirement to house the system in an existing biological safety cabinet which imposed dimensional limitations. Our series arrangement of cages represented a compromise that permitted selective isolation among groups of mice.

There were two alternative approaches to the problem of increasing solute concentrations in the spray solution with time. One would have been to avoid recycling of the spray solution. However, such a system would be unacceptably wasteful of drug solutions. The other approach would have been to continuously replace solvent at a rate equal to the evaporation rate, but that would have further complicated the system with the need for additional equipment and space.

The total ventilation rate of the system was established with the objective of achieving the highest aerosol concentrations consistent with a maximum relative humidity of 70% in the fourth cage. An input of 8 l/min of dry secondary air was determined on the basis of an estimated maximum input of 0.07 g/min of free water vapor from the nebulizer and about 0.003 g/min from each of 60 mice (3). Preliminary data obtained at the exhaust of the fourth cage indicated that the system performed within the limit set for relative humidity and that the average increases in temperature and relative humidity were about 1 C and 10% per cage, respectively.

TABLE 1. Mean total concentrations and particle size distribution parameters of uranine dye aerosols produced with a modified Collison nebulizer

Variables		Parameter		
Dye concentration (mg/ml)	Liquid feed-rate (ml/min)	Total aerosol concentration (µg/l)	MMD (µm)	GSD
10	0.1	8.08	1.06	1.9º
	0.4	23.3	1.10	1.97
	0.7	28.2	1.00	1.93
	1.0	35.9	1.17	1.54
30	0.1	25.5	1.40	1.57
	0.4	73.3	1.53	1.71
	0.7	100.0	1.46	2.02
	1.0	105.2	1.43	1.99
50	0.1	41.7	1.79	1.67
	0.4	108.2	1.71	1.76
	0.7	144.4	1.50	1.70
	1.0	146.9	1.42	1.67

TABLE 2. Mean concentrations of uranine aerosols (µg/l) as a function of aerodynamic particle diameters

Sample source	Particle diameter classification			
	Total	≤ 5 µm	≤ 3 µm	≤ 1 µm
Cage 1	83.7	N.D.[a]	88.7	29.7
Cage 2	81.9	N.D.	81.3	25.7
Cage 3	73.6	N.D.	73.3	22.3
Cage 4	64.5	N.D.	60.0	16.0
Cage 1[b]	105.2	100.2	92.7	30.2

[a]N.D. = not determined.

[b]From nebulizer calibrations.

TABLE 3. Effects of continuous operation of a modified Collison nebulizer on solution and aerosol concentration of uranine dye

Item	Hours after activation of nebulizer					
	0	1	3	5	7	23.5
Solution, mg/ml						
Measured	32.3	31.8	31.9	34.0	34.6	47.8
Predicted	32.3	32.6	33.4	34.4	35.1	47.8
Aerosol, µg/l						
Measured	83.7[a]	88.4	104.8	113.2	110.7	136.8
Predicted	111.6	112.5	114.9	117.8	119.7	150.8

[a]From cage-to-cage comparisons, t = ∿30 min.

TABLE 4. Aerosol parameters of aerosols of ribavirin

Parameter	Sample source	
	Cage 1	Cage 3
Total aerosol concentration, µg/l	101.4	88.3
MMD, µm	1.37	1.37
GSD	1.69	1.93

FIGURE LEGENDS

FIG. 1. Schematic representation of continuous aerosol therapy system.

FIG. 2. Details of Collison nebulizer modification.

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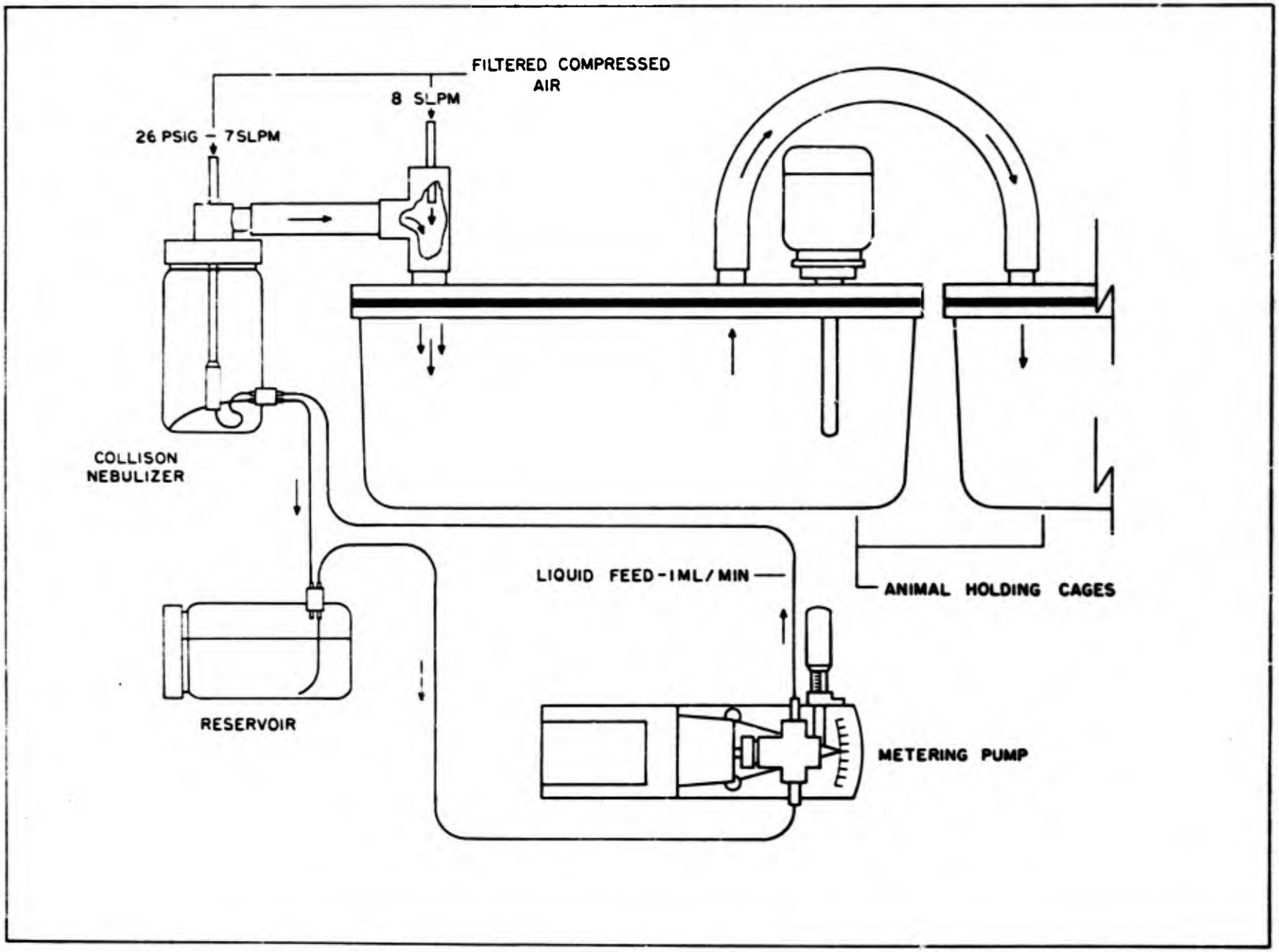
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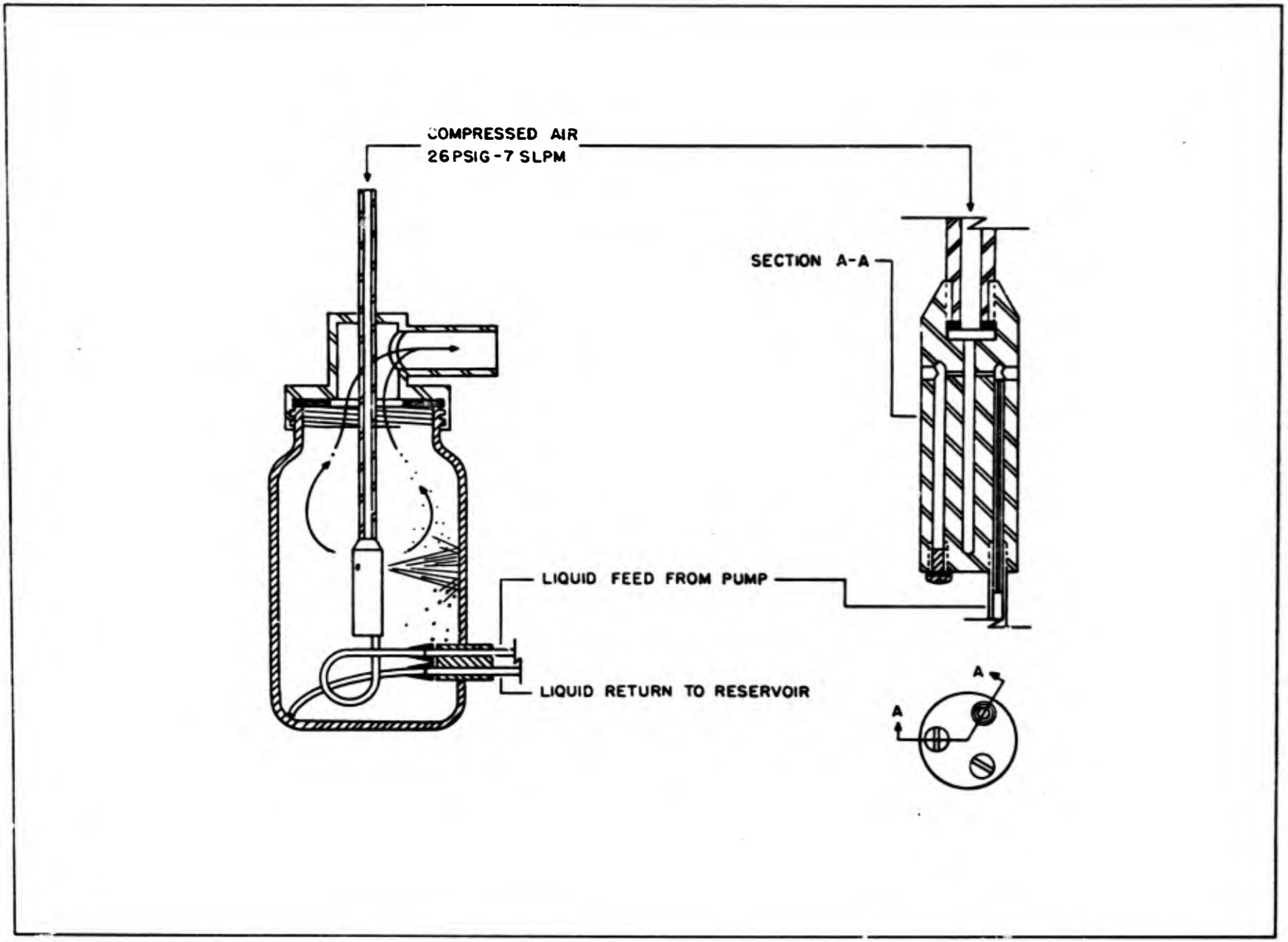
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