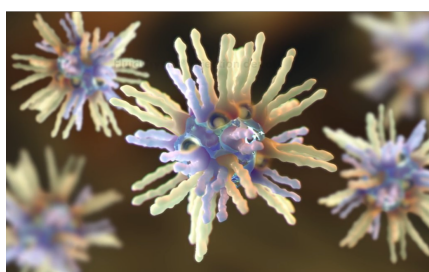


Developed by



Supported by



## FluidCrystal®

Based on public information

## Developer(s)

Camurus AB

Originator

<https://www.camurus.com>

Sweden



Camurus AB is a biopharmaceutical company that creates long-acting treatments for serious and chronic diseases. This company originated in 1991. Camurus, based on scientific understanding, aims to enhance patient outcomes through innovative therapies. They specialise in pharmaceutical commercialization and have a portfolio that includes clinical trial products as well as two FDA-approved drugs.

**Sponsor(s)**

No sponsor indicated

## Partnerships



Braeburn Pharmaceuticals

<https://braeburnrx.com/>



Rhythm Pharmaceuticals

<https://rhythmtx.com/>



NewBridge Pharmaceuticals

<https://www.nbpharma.com/>



Novartis

<https://www.novartis.com/>

# Technology information

## Type of technology

Based on other organic particles, Amphiphile-based

## Administration route

Subcutaneous, Intravenous, Optical

## Development state and regulatory approval

### Active Pharmaceutical Ingredient (API)

Buprenorphine

### Development Stage

Marketed

### Regulatory Approval

Buprenorphine long acting is approved under the brand name - Brixadi by US FDA and as Buvidal by EMA for Opioid Dependence.

## Description

FluidCrystal Technology is an advanced injectable formulation utilizing endogenous lipids, characterized by low viscosity and long-acting properties. This technology enables the administration of active pharmaceutical ingredients (APIs) with controlled release durations ranging from days to months. The mechanism underlying this system involves reversed non-lamellar liquid crystalline phases, which facilitate the efficient encapsulation of APIs. These phases ensure a sustained and steady-state release of the API into the bloodstream, thereby enhancing therapeutic efficacy.

## Technology highlight

- Self assembling lipids forms a nanostructure reversed-phase nonlamellar liquid crystal around the API in an aqueous environment
- Easy and convenient administration
- High treatment adherence
- Adapted to prefilled syringes and pen injection devices
- Small injection volume with a thin needle.

## Technology main components

The level of each component varies based on the physiological and chemical properties of the API a) One or more neutral diacyl lipids and / or at least one tocopherol b) One or more 5–90% phospholipids c) One or more biocompatible , oxygen-containing, or low-viscosity organic solvents d) At least one bioactive agent is dissolved or dispersed in the low-viscosity mixture e) One or more oxygen-containing solvent selected from alcohols , ketones , esters , ethers , amides and sulfoxide

## Information on the raw materials sourcing, availability and anticipated price

The price of Brixadi (FDA approved FluidCrystal drug) is 459.13 USD. Camurus obtains commercially available, high-quality sources of key components for FluidCrystal formulation.

## Delivery device(s)

No delivery device

# APIs compatibility profile

## API desired features

### Water-soluble molecules

### Water-insoluble molecules

### Small molecules

Small molecules that are targeted for FluidCrystal Technology are Opioids, local analgesics, hormones, anti-emetics, local antibiotics, and prostacyclins

### Proteins

Peptides & proteins that are targeted for FluidCrystal Technology are somatostatin & analogues, LHRH agonists, Glucagon & insulin, GLP-1 & analogues, MC4 agonists, and antibody fragments

### Additional solubility data

Not provided

### Additional stability data

Not provided

### API loading: Maximum drug quantity to be loaded

< 10 wt%



## **API co-administration**

Not provided

## **LogP**

Not provided

# **Scale-up and manufacturing prospects**

## **Scale-up prospects**

In 2022, 830,000 doses were manufactured

## **Tentative equipment list for manufacturing**

Not provided

## **Manufacturing**

Manufacturing and distribution of Camurus' products is based on a multi-stage supply chain with several participants involved. Braeburn Pharmaceuticals overlooks the manufacturing of the FDA approved drugs of FluidCrystal in liaison with a third party manufacturer. The manufacturing process includes: - Compounding - Filtration - Filing  
The aim of the manufacturing process setup is to reduce product manufacturing waste by 20% and to increase the use of packaging material originating from sustainable sources to at least 50%.

## **Specific analytical instrument required for characterization of formulation**

The listed analytical instrument used was HPLC with UV detection

# Clinical trials

**CAM2038**

## Identifier

NCT02946073

## Link

<https://clinicaltrials.gov/study/NCT02946073>

## Phase

Phase III

## Status

Completed

## Sponsor

Braeburn Pharmaceuticals

## More details

This is a Phase III, placebo-controlled, multicenter study with an enriched-enrollment withdrawal (EEW) design to evaluate the efficacy and safety of CAM2038 in opioid-experienced subjects with moderate to severe CLBP that requires continuous, around-the-clock (ATC) opioid treatment  $\geq$  40 mg morphine equivalent dose (MED). The study includes 5 phases: A Screening Phase (up to 2 weeks), a Transition Phase (up to 2 weeks), an Open-Label Titration Phase (up to 10 weeks), a Double-Blind Treatment Phase including a Final Study Visit (12 weeks), and a Follow-up Phase (4 weeks). The overall duration of participation in the core phase of the study (randomized Double-Blind Phase) is up to 30 weeks, from the Screening Phase through the Follow-up Phase.

Subjects who complete the Double-Blind Treatment

## **Purpose**

Buprenorphine (CAM2038) in Subjects With a Recent History of Moderate to Severe Chronic Low Back Pain

## **Interventions**

### **Intervention 1**

buprenorphine

### **Intervention 2**

Placebo

## **Countries**

United States of America

## **Sites / Institutions**

Not provided

## **Trials dates**

### **Anticipated Start Date**

Not provided

### **Actual Start Date**

2016-09-01

### **Anticipated Date of Last Follow-up**

2021-09-20

### **Estimated Primary Completion Date**

Not provided

**Estimated Completion Date**

Not provided

**Actual Primary Completion Date**

2018-05-01

**Actual Completion Date**

2019-02-01

**Studied populations****Age Cohort**

- Adults
- Older Adults

**Genders**

- All

**Accepts pregnant individuals**

Unspecified

**Accepts lactating individuals**

Unspecified

**Accepts healthy individuals**

No

**Comments about the studied populations**

Inclusion Criteria: 1. Written informed consent provided prior to the conduct of any study-related procedures. 2. Male or non-pregnant, non-lactating female subject, greater than or equal to 18 years old. 3. Body mass index (BMI) between 18 and 38 kg/m<sup>2</sup>, inclusive. 4. Treated with daily opioids for moderate to severe CLBP for a minimum of 3 months prior to Screening. 5. On a stable dose of  $\geq 40$  mg/day of oral morphine or MED during the 14 days prior to Screening. 6. Systolic blood pressure  $\geq 100$  mmHg and diastolic blood pressure  $\geq 60$  mmHg. 7. Female subject of

childbearing potential who is willing to use a reliable method of contraception during the entire study (Screening Visit to final Follow-up). To be considered not of childbearing potential, female subjects must be surgically sterile.

### **Health status**

Not provided

### **Study type**

Interventional (clinical trial)

### **Enrollment**

1053

### **Allocation**

Randomized

### **Intervention model**

Parallel Assignment

### **Intervention model description**

Not provided

### **Masking**

Quadruple-blind masking

### **Masking description**

Not provided

### **Frequency of administration**

Weekly

**Studied LA-formulation(s)**

Injectable

**Studied route(s) of administration**

Subcutaneous

**Use case**

Treatment

**Key resources**

Not provided

# ACROINNOVA 1

## Identifier

NCT04076462

## Link

<https://clinicaltrials.gov/study/NCT04076462>

## Phase

Phase III

## Status

Completed

## Sponsor

Camurus AB

## More details

The purpose of this trial is to assess the efficacy and safety of CAM2029 in patients with acromegaly. Patients will be randomized to either CAM2029 or placebo administered subcutaneously once monthly during 6 months.

## Purpose

A Trial to Assess Efficacy and Safety of Octreotide Subcutaneous Depot in Patients With Acromegaly

## Interventions

### Intervention 1

CAM2029 (octreotide subcutaneous depot)



## **Intervention 2**

Matching placebo

## **Countries**

United States of America

Germany

Greece

Hungary

Italy

Poland

Russian Federation

Spain

United Kingdom

## **Sites / Institutions**

Not provided

## **Trials dates**

### **Anticipated Start Date**

Not provided

### **Actual Start Date**

2019-08-19

### **Anticipated Date of Last Follow-up**

2024-04-24

### **Estimated Primary Completion Date**

Not provided

### **Estimated Completion Date**

Not provided

### **Actual Primary Completion Date**

2023-05-02

**Actual Completion Date**

2023-05-02

**Studied populations**

**Age Cohort**

- Adults
- Older Adults

**Genders**

- All

**Accepts pregnant individuals**

Unspecified

**Accepts lactating individuals**

Unspecified

**Accepts healthy individuals**

No

**Comments about the studied populations**

Inclusion Criteria: \* Male or female patients,  $\geq 18$  years at screening \* Able to provide written informed consent to participate in the trial prior to any trial related procedures are performed \* Diagnosis of acromegaly by historical evidence of (persistent or recurrent) acromegaly \* Treatment with a stable dose of octreotide LAR or lanreotide ATG for at least 3 months as monotherapy prior to screening \* IGF-1 levels  $\leq 1 \times \text{ULN}$  at screening \* Adequate liver, pancreatic, renal and bone marrow functions \* Normal ECG

Exclusion Criteria: \* GH  $\geq 2.5$   $\mu\text{g/L}$  at screening (cycle) \* Have received medical treatment for acromegaly with pasireotide (within 6 months prior to screening), pegvisomant (within 3 months prior to screening), dopamine agonists (within 3 months prior to screening).

## **Health status**

Not provided

## **Study type**

Interventional (clinical trial)

## **Enrollment**

72

## **Allocation**

Randomized

## **Intervention model**

Parallel Assignment

## **Intervention model description**

Not provided

## **Masking**

Triple-blind masking

## **Masking description**

Not provided

## **Frequency of administration**

Monthly

## **Studied LA-formulation(s)**

Injectable

## **Studied route(s) of administration**

Subcutaneous

**Use case**

Treatment

**Key resources**

Not provided

**HS-12-455**

**Identifier**

NCT02299089

**Link**

<https://clinicaltrials.gov/study/NCT02299089>

**Phase**

Phase II

**Status**

Completed

**Sponsor**

Camurus AB

**More details**

This is a Phase II, open-label multicentre, randomised study to assess the PK, PD, efficacy, and safety of two dosing regimens of CAM2029 in adult patients with acromegaly or a functional, well-differentiated NET, with carcinoid symptoms.

**Purpose**

Phase II Study of Subcutaneous Inj. Depot of Octreotide in Patients With Acromegaly and Neuroendocrine Tumours (NETs)

**Interventions**

**Intervention 1**

Octreotide FluidCrystal® injection depot

## Countries

Not provided

## Sites / Institutions

Not provided

## Trials dates

### Anticipated Start Date

Not provided

### Actual Start Date

2015-01-01

### Anticipated Date of Last Follow-up

2017-05-16

### Estimated Primary Completion Date

Not provided

### Estimated Completion Date

Not provided

### Actual Primary Completion Date

2016-05-01

### Actual Completion Date

2016-06-01

## Studied populations

### Age Cohort

- Adults
- Older Adults

### Genders

All

**Accepts pregnant individuals**

Unspecified

**Accepts lactating individuals**

Unspecified

**Accepts healthy individuals**

No

**Comments about the studied populations**

Inclusion Criteria: Acromegaly: \* Male or female patients  $\geq 18$  years of age \* Acromegaly currently treated with Sandostatin LAR NET: \* Male or female patients  $\geq 18$  years of age \* Functional, well-differentiated (Grade 1 or Grade 2) NET with symptoms of carcinoid syndrome (number of bowel movements and/or flushing) \* Currently treated with Sandostatin LAR for symptom control Exclusion Criteria: Acromegaly: \* Inadequate bone marrow function \* Abnormal coagulation or chronic treatment with warfarin or coumarin derivatives \* Impaired liver, cardiac and/or renal function \* Known gallbladder, bile duct disease or pancreatitis \* Diabetes with poorly controlled blood glucose levels despite adequate therapy \* Hypothyroidisms not adequately treated.

**Health status**

Not provided

**Study type**

Interventional (clinical trial)

**Enrollment**

12

**Allocation**

Randomized

## **Intervention model**

Parallel Assignment

## **Intervention model description**

Not provided

## **Masking**

Open label

## **Masking description**

Not provided

## **Frequency of administration**

Monthly

Other : "Once two weekly "

## **Studied LA-formulation(s)**

Injectable

## **Studied route(s) of administration**

Subcutaneous

## **Use case**

Treatment

## **Key resources**

Not provided



# SORENTO

## Identifier

NCT05050942

## Link

<https://clinicaltrials.gov/study/NCT05050942>

## Phase

Phase III

## Status

Not provided

## Sponsor

Camurus AB

## More details

The purpose of this study is to compare the effectiveness and safety of CAM2029 to octreotide LAR or lanreotide ATG in patients with advanced, well-differentiated GEP-NET. Patients who experience progressive disease in the randomized part of the study may proceed to an open-label extension part with intensified treatment with CAM2029.

## Purpose

A Trial to Assess Efficacy and Safety of Octreotide Subcutaneous Depot in Patients With GEP-NET

## Interventions

### Intervention 1

CAM2029

## **Intervention 2**

Octreotide LAR

## **Intervention 3**

Lanreotide ATG

## **Countries**

United States of America

Australia

Belgium

Canada

France

Germany

Hungary

Israel

Italy

Netherlands

Romania

Spain

## **Sites / Institutions**

Not provided

## **Trials dates**

### **Anticipated Start Date**

Not provided

### **Actual Start Date**

2021-10-22

### **Anticipated Date of Last Follow-up**

2024-01-25

**Estimated Primary Completion Date**

2024-12-01

**Estimated Completion Date**

2026-12-01

**Actual Primary Completion Date**

Not provided

**Actual Completion Date**

Not provided

**Studied populations****Age Cohort**

- Adults
- Older Adults

**Genders**

- All

**Accepts pregnant individuals**

Unspecified

**Accepts lactating individuals**

Unspecified

**Accepts healthy individuals**

No

**Comments about the studied populations**

Inclusion Criteria: \* Male or female patient  $\geq 18$  years old \* Histologically confirmed, advanced (unresectable and/or metastatic), and well-differentiated NET of GEP or presumed GEP origin \* At least 1 measurable, somatostatin receptor-positive lesion according to RECIST 1.1 determined by multiphasic CT or MRI (performed within 28

days before randomization) \* ECOG performance status of 0 to 2 Exclusion Criteria: \* Documented evidence of disease progression while on treatment (including SSAs) for locally advanced unresectable or metastatic disease \* Known central nervous system metastases \* Consecutive treatment with long-acting SSAs for more than 6 months before randomization \* Carcinoid symptoms that are refractory to treatment (according to the Investigator's judgement) with convention.

## **Health status**

Not provided

## **Study type**

Interventional (clinical trial)

## **Enrollment**

332

## **Allocation**

Randomized

## **Intervention model**

Parallel Assignment

## **Intervention model description**

Not provided

## **Masking**

Open label

## **Masking description**

Not provided

## **Frequency of administration**

Monthly

Other : "Once two weekly "

### **Studied LA-formulation(s)**

Injectable

### **Studied route(s) of administration**

Subcutaneous

### **Use case**

Treatment

### **Key resources**

Not provided

**HS-19-647**

**Identifier**

NCT04125836

**Link**

<https://clinicaltrials.gov/study/NCT04125836>

**Phase**

Phase III

**Status**

Not provided

**Sponsor**

Camurus AB

**More details**

The purpose of this trial is to assess the long-term safety and efficacy of CAM2029 in patients with acromegaly. Patients will be administered CAM2029 subcutaneously once monthly during 12 months. Patients fulfilling trial NCT04076462 will be offered to continue with open-label treatment week 24-52 in this trial. Patients completing the main part of the trial will be offered 52 weeks continued open-label treatment in an extension part.

**Purpose**

A Trial to Assess the Long-term Safety of Octreotide Subcutaneous Depot in Patients With Acromegaly

**Interventions**

## **Intervention 1**

CAM2029 (octreotide subcutaneous depot)

## **Countries**

United States of America

Germany

Greece

Hungary

Italy

Poland

Russian Federation

Serbia

Spain

United Kingdom

## **Sites / Institutions**

Not provided

## **Trials dates**

### **Anticipated Start Date**

Not provided

### **Actual Start Date**

2019-10-10

### **Anticipated Date of Last Follow-up**

2024-04-10

### **Estimated Primary Completion Date**

2025-06-01

### **Estimated Completion Date**

2025-06-01

### **Actual Primary Completion Date**

Not provided

### **Actual Completion Date**

Not provided

### **Studied populations**

#### **Age Cohort**

- Adults
- Older Adults

#### **Genders**

- All

#### **Accepts pregnant individuals**

Unspecified

#### **Accepts lactating individuals**

Unspecified

#### **Accepts healthy individuals**

No

### **Comments about the studied populations**

Inclusion Criteria: \* Male or female patients,  $\geq 18$  years at screening \* Able to provide written informed consent to participate in the trial \* Diagnosis of acromegaly by historical evidence of (persistent or recurrent) acromegaly \* Treatment with a stable dose of octreotide LAR or lanreotide ATG for at least 3 months as monotherapy prior to screening \* IGF-1 levels  $> 1 \times \text{ULN}$  and  $\leq 2.0 \times \text{ULN}$  at screening or IGF-1 levels  $\leq 1 \times \text{ULN}$  at screening with or without prior pituitary radiotherapy \* Adequate liver, pancreatic, renal and bone marrow functions \* Normal ECG Exclusion Criteria: For Roll-over Patients from NCT04076462: \* Unresolved, drug-related serious adverse event (SAE) from the preceding trial.

### **Health status**



Not provided

## **Study type**

Interventional (clinical trial)

## **Enrollment**

135

## **Allocation**

Not provided

## **Intervention model**

Single group assignment

## **Intervention model description**

Not provided

## **Masking**

Open label

## **Masking description**

Not provided

## **Frequency of administration**

Monthly

## **Studied LA-formulation(s)**

Injectable

## **Studied route(s) of administration**

Subcutaneous

**Use case**

Treatment

**Key resources**

Not provided

# POSITANO

## Identifier

NCT05281328

## Link

<https://clinicaltrials.gov/study/NCT05281328>

## Phase

Phase II/III

## Status

Not provided

## Sponsor

Camurus AB

## More details

The purpose of the trial is to compare the effectiveness and safety of 2 treatment regimens of CAM2029 (given weekly or every 2 weeks) to placebo in participants with symptomatic PLD, either isolated as in autosomal dominant PLD (ADPLD) or associated with autosomal dominant polycystic kidney disease (ADPKD). In the Treatment Period of the trial, participants will be allocated at random to 1 of the 3 treatment arms in a 1:1:1 ratio. After completing the Treatment Period (53 weeks) participants may proceed to a 24-week open-label extension part of the trial and then only receive the same CAM2029 treatment. The active ingredient in CAM2029, octreotide, is administered as a subcutaneous depot using Camurus' FluidCrystal® technology.

## Purpose

A Trial to Assess the Efficacy and Safety of Octreotide Subcutaneous Depot in Patients

With PLD

## **Interventions**

### **Intervention 1**

CAM2029

### **Intervention 2**

Placebo

## **Countries**

United States of America

Belgium

Germany

Netherlands

## **Sites / Institutions**

Not provided

## **Trials dates**

### **Anticipated Start Date**

Not provided

### **Actual Start Date**

2022-06-28

### **Anticipated Date of Last Follow-up**

2024-02-13

### **Estimated Primary Completion Date**

2025-02-01

### **Estimated Completion Date**

2025-08-01

**Actual Primary Completion Date**

2011-05-01

**Actual Completion Date**

2011-06-01

**Studied populations****Age Cohort**

- Adults
- Older Adults

**Genders**

- All

**Accepts pregnant individuals**

Unspecified

**Accepts lactating individuals**

Unspecified

**Accepts healthy individuals**

No

**Comments about the studied populations**

Inclusion Criteria: \* Male or female patient,  $\geq 18$  years at screening \* Diagnosis of PLD (associated with ADPKD or isolated as in ADPLD) as defined by htTLV  $\geq 1800$  mL/m at screening \* Presence of at least 1 of the following PLD-related symptoms within 2 weeks before screening: bloating, fullness in abdomen, lack of appetite, feeling full quickly after beginning to eat, acid reflux, nausea, rib cage pain or pressure, pain in side, abdominal pain, back pain, shortness of breath after physical exertion, limited in mobility, concern about abdomen getting larger, dissatisfied by the size of abdomen \* Not a candidate for, or not willing to undergo, surgical intervention for hepatic cysts during the trial.

## **Health status**

Not provided

## **Study type**

Interventional (clinical trial)

## **Enrollment**

71

## **Allocation**

Randomized

## **Intervention model**

Parallel Assignment

## **Intervention model description**

Not provided

## **Masking**

Quadruple-blind masking

## **Masking description**

Not provided

## **Frequency of administration**

Weekly

Other : "Once two weekly "

## **Studied LA-formulation(s)**

Injectable

**Studied route(s) of administration**

Subcutaneous

**Use case**

Treatment

**Key resources**

Not provided

**HS-12-460**

**Identifier**

NCT02212197

**Link**

<https://clinicaltrials.gov/study/NCT02212197>

**Phase**

Phase II

**Status**

Completed

**Sponsor**

Camurus AB

**More details**

The purpose of this study is to assess the pharmacokinetics, pharmacodynamics, efficacy and safety of CAM2032 versus Eligard, in patients with prostate cancer. All patients will receive leuprolide acetate administered subcutaneously once monthly during 3 months.

**Purpose**

Phase II Study of Subcutaneous Injection Depot of Leuprolide Acetate in Patient With Prostate Cancer

**Interventions**

**Intervention 1**

leuprolide acetate FluidCrystal® injection depot



## **Intervention 2**

leuprolide acetate

## **Countries**

Finland

Hungary

## **Sites / Institutions**

Not provided

## **Trials dates**

### **Anticipated Start Date**

Not provided

### **Actual Start Date**

2014-09-01

### **Anticipated Date of Last Follow-up**

2017-03-15

### **Estimated Primary Completion Date**

Not provided

### **Estimated Completion Date**

Not provided

### **Actual Primary Completion Date**

2015-11-01

### **Actual Completion Date**

2016-03-01

## **Studied populations**

### **Age Cohort**

Adults

- Older Adults

### **Genders**

- Male

### **Accepts pregnant individuals**

Unspecified

### **Accepts lactating individuals**

Unspecified

### **Accepts healthy individuals**

No

### **Comments about the studied populations**

Inclusion Criteria: \* Men  $\geq 40$  and  $\leq 85$  years of age \* Histological or cytological proven adenocarcinoma of the prostate requiring hormone therapy \* Life expectancy over 12 months \* World Health Organisation/ The Eastern Cooperative Oncology Group (WHO/ECOG) performance status of 0, 1 or 2 \* Adequate and stable renal function \* Adequate and stable hepatic function Exclusion Criteria: \* Evidence of brain metastasis, spinal cord compression, or urinary tract obstruction \* Serum Testosterone levels below 150 ng/dL at Screening visit \* Medical or radiological prostate cancer treatments within 2 months prior to the Screening visit \* Surgical treatment of prostate cancer within 2 weeks prior to the Screening visit \* Prior orchiectomy, hypophysectomy, or adrenalectomy \* Prior use of LHRH agonist

### **Health status**

Not provided

### **Study type**

Interventional (clinical trial)

### **Enrollment**

## **Allocation**

Randomized

## **Intervention model**

Parallel Assignment

## **Intervention model description**

Not provided

## **Masking**

Open label

## **Masking description**

Not provided

## **Frequency of administration**

Monthly

## **Studied LA-formulation(s)**

Injectable

## **Studied route(s) of administration**

Subcutaneous

## **Use case**

Treatment

## **Key resources**

Not provided

# Excipients

## **Proprietary excipients used**

No proprietary excipient used

## **Novel excipients or existing excipients at a concentration above Inactive Ingredients Database (IID) for the specified route of administration**

No novel excipient or existing excipient used

## **Residual solvents used**

No residual solvent used

## **Additional features**

### **Other features of the technology**

- Biodegradable
- Drug-eluting
- Monolithic

### **Release properties**

Upon administration of the FluidCrystal SC injection, lamellar liquid crystal nanoparticles are formed by phospholipids in conjunction with the active pharmaceutical ingredient (API). This structural formation results in an initial burst release of the API into the fatty tissue environment. Subsequently, the plasma concentration of the API gradually decreases, yielding a near dose-proportional drug release over a target period of four weeks. Furthermore, repeated weekly administrations of the FluidCrystal product demonstrate smaller and less frequent fluctuations in the plasma concentration.

### **Injectability**

Use a 23 to 25 gauge, 5/8-inch needle for the subcutaneous FluidCrystal injection. Clean the injection site and inject into the subcutaneous tissue of the abdomen, upper arm, or thigh, rotating sites each time.

## **Safety**

A recent study aimed to evaluate the safety and efficacy of Buprenorphine administered via weekly or monthly subcutaneous (SC) injection using the FluidCrystal technology, compared to the traditional daily sublingual administration. Among the 215 patients assigned to receive SC Buprenorphine, 128 reported experiencing at least one adverse effect. The most frequently observed adverse events included injection-site pain, headache, constipation, nausea, as well as injection-site pruritus and erythema.

## **Stability**

Not provided

## **Storage conditions and cold-chain related features**

FluidCrystal formulations are should be stored at room temperature, specifically between 20°C to 25°C . Within the range of 15°C to 30°C, fluctuations are allowed. In case of unexpected temperature variations, products should have a fall-back at refrigerated storage conditions.

## Potential application(s)

### Therapeutic area(s)

Other(s) : "Acromegaly, Polycystic liver disease, Genetic obesity disorders, Raynaud's phenomenon, Pulmonary arterial hypertension, Chemotherapy-induced nausea and vomiting, Endocrine disorders"

Pain management

Oncology

Substance use disorders

### Use case(s)

Treatment

### Use of technology

#### Ease of administration

- Administered by a community health worker
- Administered by a nurse
- Administered by a specialty health worker
- Self-administered

#### Frequency of administration

Weekly, Monthly

#### User acceptance

Not provided

## Targeted user groups

### Age Cohort

- Adults
- Older Adults

### Genders

- All

### Pregnant individuals

Unspecified

### Lactating individuals

Unspecified

### Healthy individuals

Unspecified

### Comment

Not provided



## Potential associated API(s)

### Buprenorphine

#### Class(es)

Analgesics

#### Development stage

Marketed

#### Clinical trial number(s)

NCT02651584

#### Foreseen/approved indication(s)

Opioid Dependence and Chronic Pain Management

#### Foreseen user group

All genders above the age of 18 years

#### Foreseen duration between application(s)

Once weekly (8mg, 16mg, 24mg and 32mg) and Once monthly injections (64mg, 96mg and 128mg)

#### Applications to Stringent Regulatory Authorities (SRA) / regulatory approvals

Buprenorphine long acting is approved under the brand name - Brixadi by US FDA and as Buvidal by EMA for Opioid Dependence.

## Pituitary and hypothalamic hormones and analogues

### Class(es)

Synthetic Somatostatin

### Development stage

Phase III

### Clinical trial number(s)

NCT04076462

### Foreseen/approved indication(s)

Acromegaly, Gastroenteropancreatic neuroendocrine tumors and Polycystic liver disease

### Foreseen user group

Not provided

### Foreseen duration between application(s)

Once monthly

### Applications to Stringent Regulatory Authorities (SRA) / regulatory approvals

holds Orphan Drug Designation in the EU for CAM2029 for the treatment of acromegaly



## Patent info

## Description

Lipid Depot Formulations

## Brief description

The invention relates to pre-formulations made from low viscosity, non-liquid crystalline mixtures of a neutral diacyl lipid, tocopherol, phospholipid, and a biocompatible organic solvent. The bioactive agent is dissolved in the mixture, and the pre-formulation forms a liquid crystalline phase structure upon contact with an aqueous fluid. These preformulations are suitable for generating depot compositions for sustained release of active agents. The invention also relates to methods of delivery, treatment, and the use of preformulations in the manufacture of a medicament.

## Representative patent

WO2005117830

## Category

formulation

## Patent holder

Camurus AB

## Exclusivity

Not provided

## Expiration date

June 6, 2035

## Status

Granted in : AU, BR, CA, CN, IL, JP, KR, MX, NZ, RU, ZA, UA, EP (GB, DK, FR, DE, IS, IE, IT, NL, PL, ES, SE, CH, TR,) SG, US

## Description

Depot precursor formulation comprising buprenorphine

## Brief description

Depot precursor formulation comprising buprenorphine and its salts, controlled release matrix and organic solvent; administration for the sustained delivery of buprenorphine, for treatment of pain or opioid dependence etc

## Representative patent

WO2014016428

## Category

formulation

## Patent holder

Camurus AB

## Exclusivity

Not provided

## Expiration date

July 26, 2033

## Status

Pending in: AR, BR, IL, MY, KR, EP, HK, TH Granted in: AU, CA, CL, CN, CO, IN, ID, JP, MX, NZ, PE, SG, ZA, TH, US, EA (AM, AZ ,BY, KZ, RU, TJ, TM), EP

## Description

Composition for the delayed delivery of a peptide active agent

## Brief description

A composition for the delayed delivery of a peptide active agent comprising; i) a salt of said peptide active agent comprising at least one positively charged peptide ion and at least one negatively charged counter-ion ii) a sustained-release delivery vehicle.

Wherein said at least one negatively charged counter-ion is a halide ion, preferably a chloride or bromide ion.

## Representative patent

WO2008152401

## Category

formulation

## Patent holder

Camurus AB

## Exclusivity

Not provided

## Expiration date

June 13, 2028

## Status

Not provided

## **Supporting material**



## Publications

**Albayaty, M., Linden, M., Olsson, H., Johnsson, M., Strandgården, K., & Tiberg, F. (2017). Pharmacokinetic Evaluation of Once-Weekly and Once-Monthly Buprenorphine Subcutaneous Injection Depots (CAM2038) Versus Intravenous and Sublingual Buprenorphine in Healthy Volunteers Under Naltrexone Blockade: An Open-Label Phase 1 Study.** *Advances in therapy*, 34(2), 560–575. <https://doi.org/10.1007/s12325-016-0472-9>

A study involving 89 healthy volunteers was conducted to evaluate the effectiveness of a new treatment for buprenorphine. The participants were divided into five groups: intravenous buprenorphine 600 µg, sublingual buprenorphine 8, 16, or 24 mg daily for 7 days, or four repeated weekly doses of CAM2038 q1w 16 mg. All subjects received daily naltrexone. The mean duration of buprenorphine release after CAM2038 q4w was 4-10 hours, with a mean terminal half-life of 19-25 days. Both CAM2038 formulations showed complete absolute bioavailability of buprenorphine, with 5.7- to 7.7-fold greater bioavailability compared to sublingual buprenorphine. Both CAM2038 q1w and q4w were well tolerated, with higher acceptance rates for CAM2038 than sublingual buprenorphine 1 hour post-dose.

**Chang, D. P., Barauskas, J., Dabkowska, A. P., Wadsäter, M., Tiberg, F., & Nylander, T. (2015). Non-lamellar lipid liquid crystalline structures at interfaces.** *Advances in colloid and interface science*, 222, 135-147. <https://doi.org/10.1016/j.cis.2014.11.003>

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Non-lamellar interfacial layer: from the organization of the adsorbed layer to the characterization of the internal structure. The self-assembly of lipids results in the formation of various nano-structures, including non-lamellar liquid crystalline structures like cubic, hexagonal, and sponge phases. These non-lamellar phases are crucial for living systems, providing compartmentalization and acting as biological activity regulators. They are of interest for pharmaceutical, food, and cosmetic applications due to their compartmentalizing nature. Understanding how these structures interact with different interfaces is essential for their use in biomedical devices for drug delivery and analysis. These non-lamellar interfacial layers can entrap functional biomolecules that respond to lipid curvature and confinement.

## Additional documents

- [Corporate Presentation](#)

## Useful links

There are no additional links

# Access principles

## Collaborate for development



Consider on a case by case basis, collaborating on developing long acting products with potential significant public health impact, especially for low- and middle-income countries (LMICs), utilising the referred to long-acting technology

Not provided

## Share technical information for match-making assessment



Provide necessary technical information to a potential partner, under confidentiality agreement, to enable preliminary assessment of whether specific medicines of public health importance in LMICs might be compatible with the referred to long-acting technology to achieve a public health benefit

Not provided

## Work with MPP to expand access in LMICs

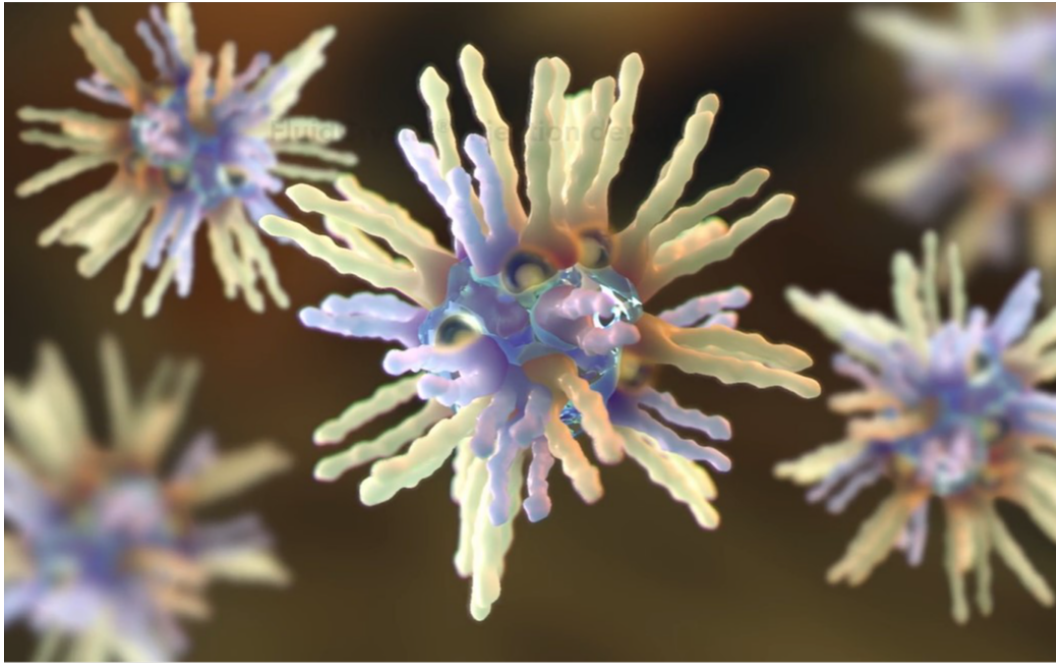


In the event that a product using the referred to long-acting technology is successfully developed, the technology IP holder(s) will work with the Medicines Patent Pool towards putting in place the most appropriate strategy for timely and affordable access in low and middle-income countries, including through licensing

Not provided

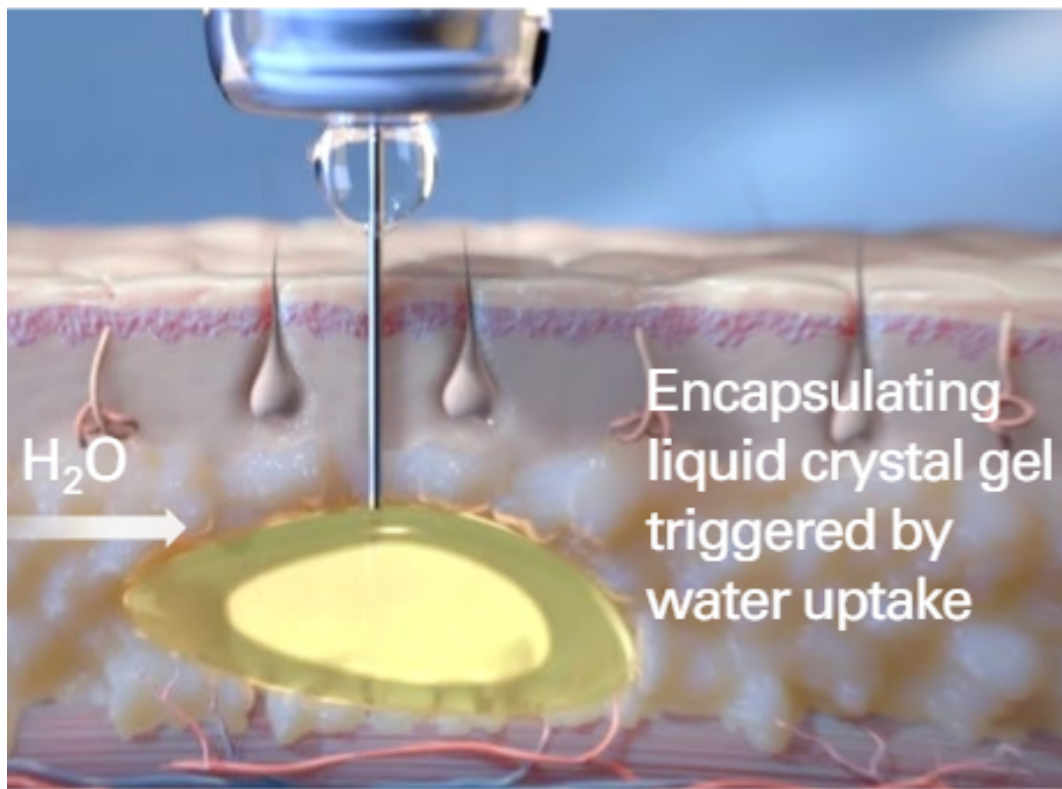
## **Comment & Information**

## Illustrations



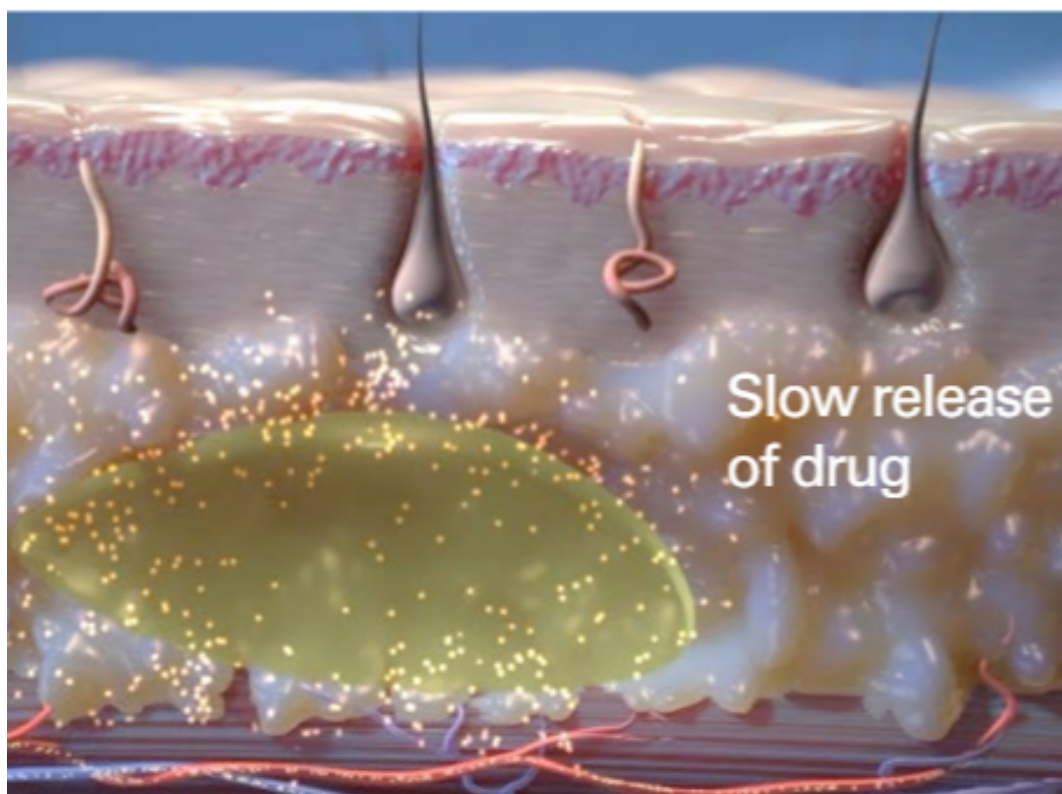
Self-assembled functional reversed-phase nonlamellar liquid crystal gel formed around API molecules by the phospholipids

Camurus. (n.d.). Technology. Retrieved June 20, 2024, from <https://www.camurus.com/science/technology/>.



Subcutaneous Administration of FluidCrystal prefilled Injection and the initiation of the encapsulation

Camurus. (2023). Camurus Annual Report 2023. Retrieved from <https://www.camurus.com/files/Main/13456/3952729/camurus-annual-report-2023.pdf>



Initial Burst of the API into the body from the FluidCrystal lipid lamellar structure

Camurus. (2023). Camurus Annual Report 2023. Retrieved from

<https://www.camurus.com/files/Main/13456/3952729/camurus-annual-report-2023.pdf>