

Cascade Impactor Study Comparing the Amsino OneMask™ Oxygen Mask and Predicate Mask from Hudson RCI on a Human Model

Abstract

This in vitro study compares drug delivery efficiencies of a new mask device to that of a predicate mask device when placed on a human model using an Anderson Cascade Impactor. The objective is to compare the mask deposition mass, coarse particle mass, respirable mass, fine particle mass, Mass Median Aerodynamic Diameter (MMAD) and Geometric Standard Deviation (GSD) of the Adult Amsino OneMask™ Oxygen Mask (Amsino International, Inc., Pomona, CA) and the Adult Hudson RCI Neb-U-Mask System (Teleflex Inc., Research Triangle Park, NC).

The predicate was chosen based on similar design features which include the ability to administer drug therapeutics via a nebulizer or Metered Dose Inhalers (MDIs). The masks were tested using three different therapeutic drugs: Albuterol Sulfate (beta-agonist bronchodilator), Ipratropium Bromide (anti-cholinergic bronchodilator), and Budesonide (anti-inflammatory).

Each mask was tested on a human model, using an Anderson Cascade Impactor, for each drug, administered both by nebulizer and MDI in triplicate for a total of 36 separate cascade impactor trials. The study design utilized a modified Prestan Adult CPR-AED Manikin (PP-AM-100M-MS) for the representative patient model connected to an Anderson Cascade Impactor with a constant flow of 28.3 lpm. The nebulizer trials used commercially available off-the-shelf jet nebulizer, the Hudson RCI Micro-Mist nebulizer (Research Triangle Park, NC). In each trial the nebulizer was powered with medical grade oxygen at 8 L/min for a treatment time of 3-5 minutes, depending on the drug. MDI trials used commercially available MDIs with oxygen delivered to the masks at 8 lpm during MDI actuation. MDIs were actuated a total of 10 times for each trial.

Analysis of cascade impactor stage drug content was performed by HPLC on a Dionex Ultimate 3000 nano HPLC, equipped with Dionex UVD-3000 UV/VIS detector (Thermo Scientific, Sunnyvale, CA).

Introduction

Both the Amsino OneMask™ Adult Oxygen Mask and the Neb-U-Mask System are combination devices that allow for the delivery of aerosolized medication via nebulizer or Metered Dose Inhalers, MDI's, while providing oxygen therapy. Each mask features an over the nose enclosed design with elastic straps to hold the masks in position on the patients face. The Amsino OneMask™ Adult Oxygen Mask is equipped with a single opening near the mouth to allow patients to imbibe food or drink during oxygen or nebulization therapy. The Neb-U-Mask System

does not have this feature. The purpose of the present study was to determine the total inhaled drug mass, mask deposition mass, coarse particle mass, respirable mass, fine particle mass, Mass Median Aerodynamic Diameter (MMAD) and Geometric Standard Deviation (GSD) using an Anderson Cascade Impactor for aerosol particle size characterization. The masks were tested using three different therapeutic drugs: Albuterol Sulfate (beta-agonist bronchodilator), Ipratropium Bromide (anti-cholinergic bronchodilator), and Budesonide (anti-inflammatory) each delivered via nebulizer and MDI. Table 1 shows pictures of each mask and some key features of each mask design.

Masks

Picture	New Proposed - OneMask™	Predicate - Neb-U-Mask
Mask Features		
Manufacturer	Amsino	Hudson RCI
Model	OneMask™ Oxygen Mask	Neb-U-Mask
Length (cm)*	12.7	13.2
Width (cm)*	7.9	8.2
Mask Volume (ml)**	115	143
Surafce Area of Openings (cm ²)*	7.2 (port near mouth)	1.15 (two valved side ports)

* Mask dimensions and openings are approximate due to irregular design

** Mask volume measured by filling mask w ith w ater

Table 1: General Features of the Aerosol Mask.

Study Design

The study was designed to evaluate device performance utilizing a jet nebulizer and metered dose inhalers on a simulated patient model via Anderson Cascade impactor.

The testing platform utilizes an eight stage non-viable Anderson Cascade Impactor (Thermo Fisher Scientific; Waltham, MA) integrated to a CPR mannequin to serve as the patient model. A Gast rotary-vane vacuum pump, calibrated to 28.3 lpm, was used to drive the Anderson Cascade Impactor. The mask was placed onto the mannequin and secured via the equipped elastic strap.

For the nebulizer trials, a Hudson RCI MicroMist nebulizer was filled, depending on the trial, using one of the following: Ventolin Nebules (GlaxoSmithKline), 2.5mg / 2.5 ml salbutamol sulfate IP (total volume 5 ml per trial), Atrovent Nebules (Boehringer Ingelheim), 500µg / 2.5 ml ipratropium bromide IP (total volume 5ml per trial), or Pulmicort Respules (AstraZeneca), 500µg / 2.5 ml Budesonide

IP (total volume 5ml per trial). The jet nebulizer was weighed before fill, after fill and post-test to determine overall mass balance of the system. First, the filled nebulizer was fitted into the mask. Then the vacuum pump powering the cascade impactor was turned on and the oxygen feed to the jet nebulizer was initiated (8 L/min) and run for 3-5 minutes. Next, the mask (including valve body), throat, and all stages of the cascade impactor were rinsed with a quantity of appropriate solvent (HPLC mobile phase). Finally, the samples were then analyzed for drug content via HPLC with UV detection.

For the MDI trials, one of three different MDI's were used: Ventolin Evohaler (GlaxoSmithKline), 100µg / actuation salbutamol sulfate IP (total of 10 actuations per trial), Atrovent HFA (Boehringer Ingelheim), 20µg / actuation ipratropium bromide IP (total of 10 actuations per trial), or Pulmicort HFA (AstraZeneca), 200µg / actuation budesonide IP (total of 10 actuations per trial). The MDI was

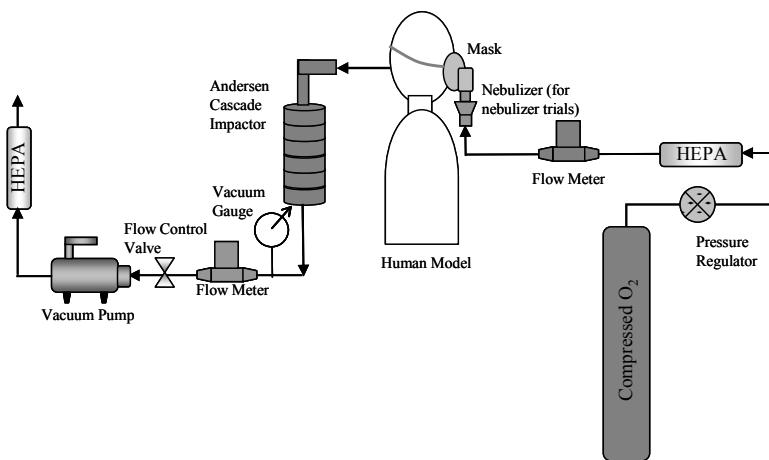


Figure 1: Flow Diagram for Cascade Impactor Testing

weighed before and after each trial. The vacuum pump powering the cascade impactor was turned on and the oxygen feed to the mask was initiated (8 lpm). The MDI was shaken well between each actuation and actuated a total of 10 times for each trial. The mask (including valve body), throat, and all stages of the cascade impactor were rinsed with a quantity of appropriate solvent (HPLC mobile phase).

All sample extractions were placed in labeled 12x32mm glass HPLC auto-sampler vials and analyzed for drug content via HPLC. Samples were

stored refrigerated (approximately 2°C) until HPLC analysis. Figure 1 shows the flow diagram for the testing.

The test matrix for the study consists of a total of 36 independent trials. Each mask was tested in triplicate for each of three drugs for nebulizer delivery and metered dose inhaler delivery. Table 2 shows the complete test matrix for all trials for both the Amsino OneMask™ Oxygen Mask and the Neb-U-Mask System.

Nebulizer Testing Matrix

Test	Mask	Nebulizer	Nebulizer Flow (lpm)	Dose	Drug	Time	Trials
1	Amsino OneMask™	Hudson Micro Mist	8	5ml	Albuterol Sulfate (2.5mg/2.5ml)	3 min	triplicate
2	Neb-U-Mask	Hudson Micro Mist	8	5ml	Albuterol Sulfate (2.5mg/2.5ml)	3 min	triplicate
3	Amsino OneMask™	Hudson Micro Mist	8	5ml	Ipratropium Bromide (0.5mg/2.5ml)	5 min	triplicate
4	Neb-U-Mask	Hudson Micro Mist	8	5ml	Ipratropium Bromide (0.5mg/2.5ml)	5 min	triplicate
5	Amsino OneMask™	Hudson Micro Mist	8	5ml	Budesonide (0.5mg/2.5ml)	5 min	triplicate
6	Neb-U-Mask	Hudson Micro Mist	8	5ml	Budesonide (0.5mg/2.5ml)	5 min	triplicate

MDI Testing Matrix

Test	Mask	MDI	Oxygen Flow (lpm)	Drug	Acuations	Trials
1	Amsino OneMask™	Ventolin Evohaler	8	Albuterol Sulfate (100µg/actuation)	10	triplicate
2	Neb-U-Mask	Ventolin Evohaler	8	Albuterol Sulfate (100µg/actuation)	10	triplicate
3	Amsino OneMask™	Atrovent HFA	8	Ipratropium Bromide (20µg/actuation)	10	triplicate
4	Neb-U-Mask	Atrovent HFA	8	Ipratropium Bromide (20µg/actuation)	10	triplicate
5	Amsino OneMask™	Pulmicort HFA	8	Budesonide (200µg/actuation)	10	triplicate
6	Neb-U-Mask	Pulmicort HFA	8	Budesonide (200µg/actuation)	10	triplicate

Table 2: Test Matrices for all trials.

Patient Model

The test bed utilized a modified Prestan Adult CPR-AED Manikin (PP-AM-100M-MS) for the representative patient model connected to an Anderson Cascade Impactor. The mannequin was modified by manufacturing a custom molded PVC throat tube (1/2" ID x 5.5") and fitting it inside the head of the mannequin. The throat tube is then press-fit into the Anderson USP throat. Figure 3 below shows the human model with the Amsino OneMask™ Adult Oxygen Mask and Anderson Cascade Impactor attached.

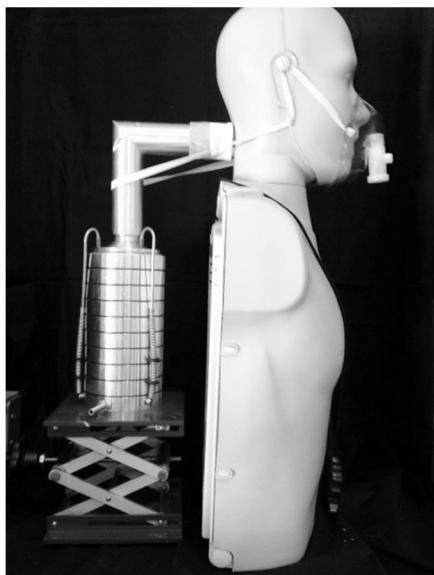


Figure 2: Adult Mannequin connected to Anderson Cascade Impactor.

Sample Collection

Samples were collected from the mask, throat and each stage of the cascade impactor for all runs. Nebulizer samples were also collected for the nebulizer trials. Samples were recovered in the appropriate mobile phase of a set volume. The rinse fluid volumes used was based on observance of the linearity of the calibration curve and extraction technique. Nebulizer samples were diluted with mobile phase at a 1:9 dilution before being analyzed. Cascade impactor filters were rinsed in mobile phase and filtered through 0.45um nylon syringe filters before being analyzed. All samples were archived refrigerated until analysis.

Drug Analysis

All drug content analysis was performed using a Dionex Ultimate 3000 nano-HPLC equipped with a Dionex UVD-3000 multi-wavelength UV/VIS Detector using a micro flow cell (75um x 10mm path length, total analytical volume 44.2 nl).

The column used for the albuterol sulfate and budesonide analysis was a Vydac 238DE5.315 (0.3mm ID x 150mm) C18 monomeric, 100A (USP L1) column with a column flow rate of 10 μ l/min at a nominal pressure of 206 bar. Total HPLC run time was 10 minute per sample with approximately 5 minutes flush between each sample. Sample injection was performed with a 1 μ l sample loop in full loop injection mode. Detection was with UV at 276nm for albuterol sulfate and 254nm for Budesonide.

A Thermo Electron Beta-Basic-18 (0.32mm ID x 100mm) C18 monomeric, 100A (USP L1) column with a flow rate of 15 μ l/min at a nominal pressure of 202 bar was used for ipratropium bromide analysis. Total HPLC run time was 6 min per sample with approximately 5 minutes flush between each sample. Sample injection was performed with a 1 μ l sample loop in full loop injection mode. Detection was with UV at 220nm.

Data acquisition and analysis were performed using Chromeleon 6.8 SR11 Build 3161 with GLP compliance client features installed.

HPLC Method and Standards

US Pharmacopeial monograph USP29nf24s_m1218 was followed as a reference method for analysis of albuterol sulfate. Briefly, the method involved dilution of an appropriate formulation of albuterol sulfate in mobile phase; 60% buffer and 40% HPLC grade methanol (Acros Organics, lot# 1154574). Buffer formulation contains reverse-osmosis filtered deionized water with 1.13gr of sodium 1-hexanesulfonate (Alfa Aesar, lot# 10159201) in 1200 ml of water, with 2 ml glacial acetic acid (Acros Organics, lot# A0317484) added. The mobile phase solution was mixed and filtered through a 0.45um filter membrane. The final mobile phase is a 60:40 dilution of Buffer:MEOH.

US Pharmacopeial monograph USP31nf26s1_m42380 was followed as a reference method for analysis of ipratropium bromide. Briefly,

the method involved dilution of an appropriate formulation of ipratropium bromide in mobile phase; 87% buffer and 13% methanol. Buffer formulation contains reverse osmosis filtered deionized water with 14.3g of monobasic sodium phosphate dihydrate (MP, lot # MR28909) and 2.0g tetra-n-propylammonium chloride (Alfa Aesar, lot# L21W016) in 1,000 ml of water, adjust pH to 5.5 with solution containing 8.9g / 100ml dibasic sodium phosphate (Acros Organics, lot# A0312739). The mobile phase solution was mixed and filtered through a 0.45um filter membrane. The final mobile phase is a 87:13 dilution of Buffer:MEOH.

Albuterol Sulfate Standards Calibration Curve

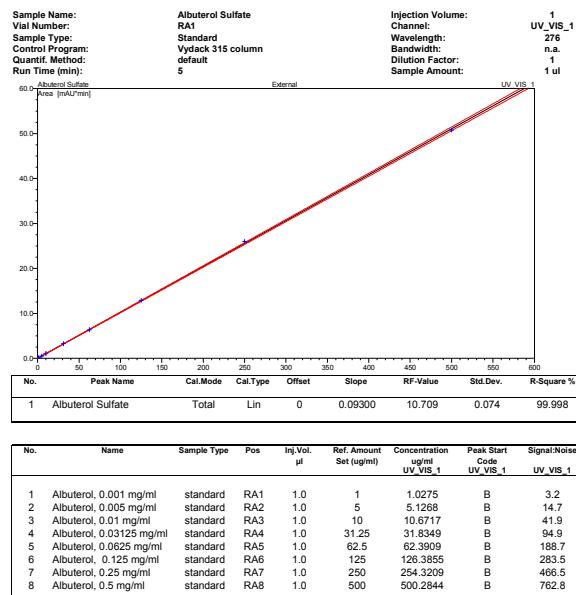


Table 3: Albuterol Sulfate Calibration Standards and Linear Regression showing 95% confidence levels (red).

US Pharmacopeial monograph for budesonide was used as a reference method for analysis of budesonide. Briefly, the method involved dilution of an appropriate formulation of budesonide in mobile phase; 68% buffer and 32% HPLC grade acetonitrile (Acros Organics, lot# B00M1129). Aqueous buffer includes 3.17 mg/ml monobasic sodium phosphate (MP Biomedical, Lot# MR28909) and 0.23 mg/ml of phosphoric acid (Across Organics, lot# A0305025). pH is 3.2 ± 0.1 . All US Pharmacopeial monographs were followed without deviation.

Standard preparation includes making a stock concentration of 500 μ g/ml of albuterol sulfate, 250 μ g/ml of ipratropium bromide and 250 μ g/ml of

budesonide in its respective mobile phase. These stock concentrations were diluted to make a 7-point serial dilution for use as calibration standards for each drug.

Ipratropium Bromide Standards Calibration Curve

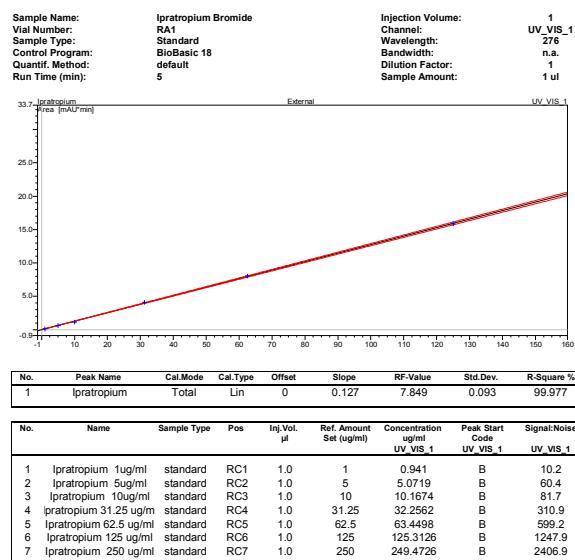


Table 4: Ipratropium Bromide Calibration Standards and Linear Regression showing 95% confidence levels (red).

The concentrations of the standards used are: 1, 5, 10, 31.25, 62.5, 125 and 250 μ g/ml concentrations. The calibration curve was plotted for peak area of the analyte against the corresponding concentrations. Linear regression (with forced zero intercept) analysis within Chromeleon 6.8 was used for all standards curve fit. The correlation coefficient (R-squared) for each albuterol sulfate, ipratropium bromide and budesonide were 0.99998, 0.99977 and 0.99995 respectively.

The calibration curves showed excellent linearity across the entire calibration standard range for all drugs. Table 3, 4 and 5 show the linear calibration curve generated in Chromeleon with 95% confidence levels in red for each drug.

Budesonide Standards Calibration Curve

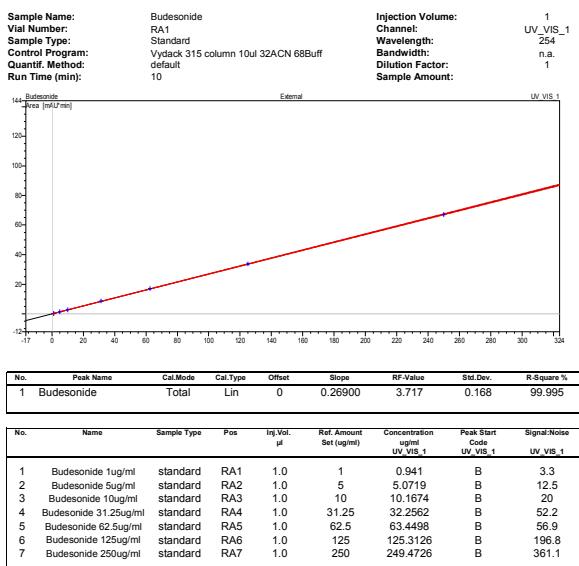


Table 5: Budesonide Calibration Standards and Linear Regression showing 95% confidence levels (red).

Limit of Detection and Limit of Quantification

The sensitivity of the method was determined by estimating the Limits Of Detection (LOD) and of Quantification (LOQ) for each drug.

A routine and accepted method to determine LOD and LOQ is based on signal-to-noise ratios of the peaks. Samples with signal-to-noise ratios corresponding to 3 are accepted as LOD and samples with signal-to-noise ratio values of 10 are accepted as LOQ values.

	Albuterol	Ipratropium	Budesonide
LOD ($\mu\text{g}/\text{ml}$)	1.0	0.5	1.0
LOQ ($\mu\text{g}/\text{ml}$)	<5	1.0	<5

Table 6: LOD and LOQ Estimation based on S:N Ratios.

Prepared samples with 1 $\mu\text{g}/\text{ml}$ of each drug were analyzed. The signal-to-noise, S/N, ratio for albuterol sulfate, ipratropium bromide and budesonide were 3.2, 10.2 and 3.3 respectively. Prepared samples with 5 $\mu\text{g}/\text{ml}$ of each drug were analyzed. The signal-to-noise ratio for albuterol sulfate, ipratropium bromide and budesonide were 14.7, 60.4 and 12.5 respectively. Table 6 below shows the Estimated LOD and LOQ values for each drug based on S/N ratios obtained from Chromeleon. S/N ratios can be found in figure 3, 4 and 5.

Statistical Analysis

Mean and standard deviation were calculated for all triplicate trial sets for each component of: nebulizer drug fill, total delivered dose, mask deposition, coarse particle dose, course particle fraction, respirable particle dose, respirable particle fraction, fine particle dose, fine particle fraction, aerosol MMAD and GSD

Results: Nebulizer Trials

Results show that the new Amsino OneMask™ Adult Oxygen Mask outperformed the Neb-U-Mask System for delivered respirable particle dose for albuterol sulfate and ipratropium bromide trials.

The Amsino OneMask™ Oxygen Mask and Neb-U-Mask system had a mean \pm standard deviation respirable particle dose of $651.2 \pm 29.2 \mu\text{g}$ and $598.2 \pm 34.5 \mu\text{g}$ respectively for albuterol sulfate. The Amsino OneMask™ Oxygen mask and Neb-U-Mask system had a respirable particle dose of $120.2 \pm 2.7 \mu\text{g}$ and $108.0 \pm 5.5 \mu\text{g}$ respectively for ipratropium bromide. Respirable particle dose for budesonide was $234.3 \pm 5.4 \mu\text{g}$ and $248.9 \pm 22.0 \mu\text{g}$ for the Amsino OneMask™ Oxygen Mask and Neb-U-mask system respectively.

The Amsino OneMask™ delivered a mean respirable particle dose of 108.9% for albuterol sulfate and 111.3% for Ipratropium bromide when compared to the Neb-U-mask system. The Rollin7 delivered 94.1% of the budesonide respirable particle dose when compared to the Neb-U-mask system. Figure 3 below shows the mean respirable particle dose for all trials.

The slight performance difference seems to be linked to the MMAD of the specific aerosol. Although both masks are substantially equivalent concerning respirable particle delivered dose, it is interesting to note that aerosols with a smaller MMAD appear to have slightly higher delivery efficiency on the Amsino OneMask™ Oxygen Mask than on the Neb-U-Mask system.

All other features are comparable with only two notable differences: Mask deposition and coarse particle dose. Mask deposition differences appear to be due to the fact that the Neb-U-Mask system employs a spring loaded valve in-between the nebulizer and the mask. This valve collects nebulized fluid due to increased impaction of the larger aerosol particles.

Respirable Particle Dose for All Nebulizer Trials
(Mean \pm SD, Three trials per mask/drug model, 5 min treatment time)

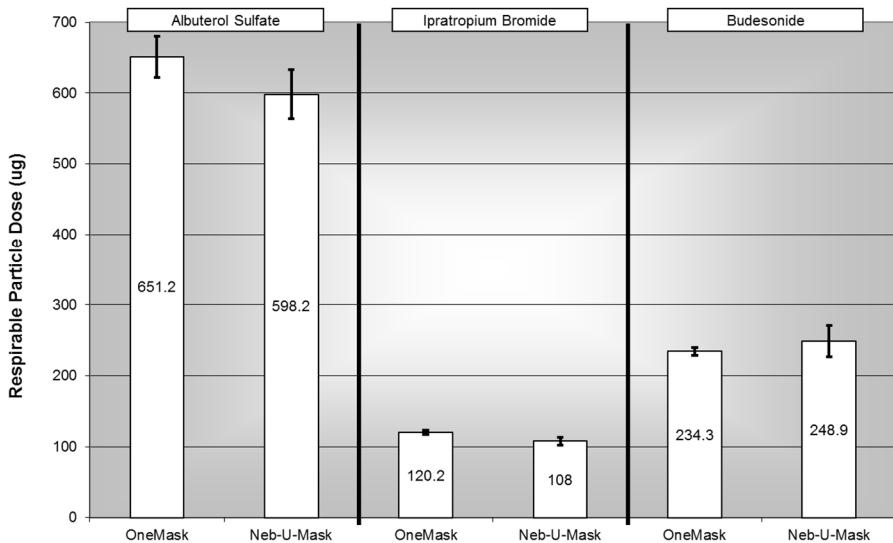


Figure 3: Respirable Particle Dose for All Nebulizer Trials, mean \pm SD.

The rinse of the mask includes this spring loaded valve assembly into fluid which increases the mask deposition values. Additionally, the coarse particle dose and fraction are lower in the Neb-U-Mask system when compared to the Amsino OneMask™ Oxygen Mask. This appears to verify that the valve in the Neb-U-Mask system is acting as an impaction surface to

remove some of the larger particles. It is also evident that since the Amsino OneMask™ Oxygen Mask has a higher respirable particle dose than that of the Neb-U-Mask, we can assume that the Neb-U-Mask valve is also collecting a small fraction of the respirable particles as well.

Respirable Particle Dose for All MDI Trials
(Mean \pm SD, Three trials per mask/drug model, 10 MDI actuations per impactor trial)

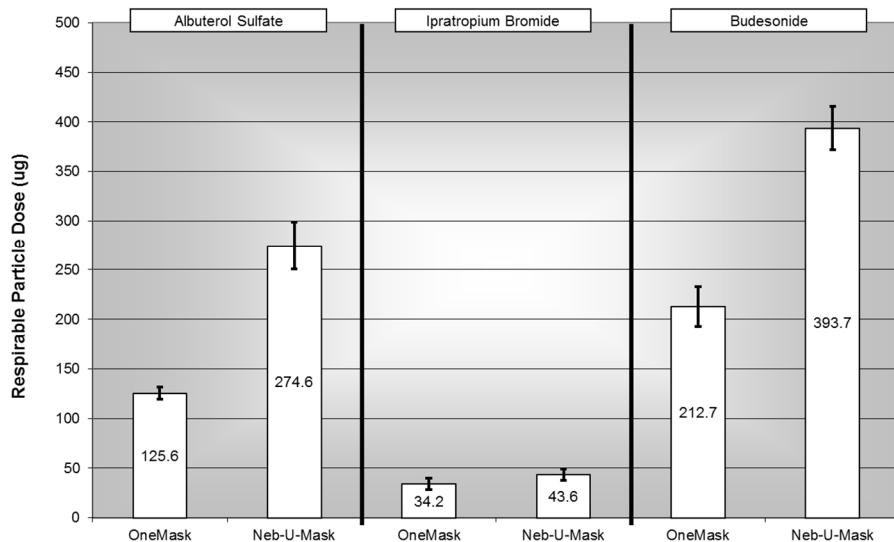


Figure 4: Respirable Particle Dose for All MDI Trials, mean \pm SD

Overall, the Amsino OneMask™ delivers a substantially equivalent respirable dose to the patient for all drugs tested. Table 7 shows results for nebulizer drug fill, total delivered dose, mask deposition, coarse particle dose, coarse particle fraction, respirable particle dose, respirable particle fraction, fine particle dose, fine particle fraction, aerosol MMAD and GSD for all trials.

Results: MDI Trials

Results show that the new Amsino OneMask™ Adult Oxygen Mask underperformed the Neb-U-Mask

Nebulizer Testing Summary

Features	Drug	New OneMask Adult	Predicate Neb-U-Mask
Nebulizer Fill (ug)	Albuterol Ipratropium Budesonide	2510.7 +/- 24.0 947.5 +/- 3.0 2039.8 +/- 18.6	2472.1 +/- 40.7 927.3 +/- 20.9 2032.6 +/- 27.8
Total Delivered Dose (ug)	Albuterol Ipratropium Budesonide	877.3 +/- 42.8 162.0 +/- 1.4 385.3 +/- 7.7	988.1 +/- 40.4 145.9 +/- 5.9 435.3 +/- 65
Mask Deposition (ug)	Albuterol Ipratropium Budesonide	42.3 +/- 16.9 13.8 +/- 1.7 11.4 +/- 1.6	300.7 +/- 67.6 145.9 +/- 5.9 65.3 +/- 15.2
Coarse Particle Dose (ug) (>4.7um)	Albuterol Ipratropium Budesonide	128.1 +/- 33.2 17.2 +/- 0.5 83.6 +/- 10.4	11.9 +/- 2.5 3.3 +/- 0.6 54.2 +/- 31.2
Coarse Particle Frac (%) (>4.7um)	Albuterol Ipratropium Budesonide	15.8% +/- 3.6% 11.7% +/- 0.2% 26% +/- 2.9%	1.9% +/- 0.5% 2.7 +/- 0.5% 17% +/- 8.2%
Respirable Particle Dose (ug) (0.4-4.7 um)	Albuterol Ipratropium Budesonide	651.2 +/- 29.4 120.2 +/- 2.7 234.3 +/- 5.4	598.2 +/- 34.5 108.0 +/- 5.5 248.9 +/- 22
Respirable Particle Frac (%) (0.4-4.7 um)	Albuterol Ipratropium Budesonide	80.7% +/- 3.2% 81.8% +/- 0.2% 73% +/- 2.8%	93.1% +/- 1.1% 90.4 +/- 0.5% 81.4% +/- 7.8%
Fine Particle Dose (ug) (<0.4um)	Albuterol Ipratropium Budesonide	28.6 +/- 12.1 9.6 +/- 0.4 3.2 +/- 0.5	32.4 +/- 7.6 8.1 +/- 0.2 4.8 +/- 1
Fine Particle Frac (%) (<0.4um)	Albuterol Ipratropium Budesonide	3.5% +/- 1.4% 6.5% +/- 0.3% 1.0% +/- 0.2%	5% +/- 1.1% 6.8 +/- 0.1% 1.6% +/- 0.6%
MMAD (um)	Albuterol Ipratropium Budesonide	2.06 +/- 0.13 1.87 +/- 0.07 3.03 +/- 0.12	1.64 +/- 0.08 1.65 +/- 0.07 2.97 +/- 0.31
GSD (um)	Albuterol Ipratropium Budesonide	2.66 +/- 0.14 2.54 +/- 0.05 2.10 +/- 0.04	1.98 +/- 0.05 2.06 +/- 0.02 2.14 +/- 0.14
Confidence level of testing	The test and number of samples (3) tested provide 95% confidence level		

All values Mean +/- SD

System for respirable particle delivered dose for all MDI drug trials.

The Amsino OneMask™ Oxygen Mask and Neb-U-Mask system had a mean ± standard deviation respirable dose of $125.6 \pm 5.8 \mu\text{g}$ and $274.6 \pm 24.0 \mu\text{g}$ respectively for albuterol sulfate. The Amsino OneMask™ Oxygen mask and Neb-U-Mask system had a respirable dose of $34.2 \pm 5.7 \mu\text{g}$ and $43.6 \pm 5.5 \mu\text{g}$ respectively for ipratropium bromide. Respirable dose for budesonide was $212.7 \pm 20.0 \mu\text{g}$ and $394.7 \pm 22.0 \mu\text{g}$ for the Amsino OneMask™ Oxygen Mask and Neb-U-mask system respectively when using a metered dose inhaler.

MDI Testing Summary

Features	Drug	New OneMask Adult	Predicate Neb-U-Mask
Total Delivered Dose (ug)	Albuterol Ipratropium Budesonide	245.2 +/- 26.5 143.2 +/- 6.2 389.4 +/- 43.5	486.2 +/- 35.6 158.9 +/- 6 732.2 +/- 36.2
Mask Deposition (ug)	Albuterol Ipratropium Budesonide	99.3 +/- 17.4 37.2 +/- 0.6 119.1 +/- 9	176.1 +/- 10.6 40.3 +/- 2.8 198 +/- 33.8
Coarse Particle Dose (ug) (>4.7um)	Albuterol Ipratropium Budesonide	12.7 +/- 3.8 27.3 +/- 3.5 61.3 +/- 10.9	19.1 +/- 8.7 33.7 +/- 2.1 126.3 +/- 11
Coarse Particle Frac (%) (>4.7um)	Albuterol Ipratropium Budesonide	8.7% +/- 2.1% 33.7% +/- 5.8% 21.6% +/- 1.8%	6.2% +/- 2.5% 28.7% +/- 3.8% 23.9% +/- 2.0%
Respirable Particle Dose (ug) (0.4-4.7 um)	Albuterol Ipratropium Budesonide	125.6 +/- 5.8 34.2 +/- 5.7 212.7 +/- 20.2	274.6 +/- 24.0 43.6 +/- 5.5 393.7 +/- 21.9
Respirable Particle Frac (%) (0.4-4.7 um)	Albuterol Ipratropium Budesonide	87.1% +/- 1.4% 41.8% +/- 3.5% 75.4% +/- 1.30%	91.6% +/- 1.5% 37.1% +/- 5.4% 74.3% +/- 2.1%
Fine Particle Dose (ug) (<0.4um)	Albuterol Ipratropium Budesonide	6.0 +/- 0.8 20.1 +/- 4.1 8.3 +/- 1.5	6.3 +/- 2.6 40.6 +/- 11.5 9.7 +/- 0.8
Fine Particle Frac (%) (<0.4um)	Albuterol Ipratropium Budesonide	4.2% +/- 0.7% 24.6% +/- 4.2% 3% +/- 0.6%	2.2% +/- 1.1% 34.2% +/- 7.8% 1.8% +/- 0.1%
MMAD (um)	Albuterol Ipratropium Budesonide	2.50 +/- 0.13 1.30 +/- 0.18 3.12 +/- 0.06	2.51 +/- 0.08 1.36 +/- 0.30 3.45 +/- 0.06
GSD (um)	Albuterol Ipratropium Budesonide	2.01 +/- 0.05 6.54 +/- 0.67 2.12 +/- 0.15	1.88 +/- 0.09 5.06 +/- 0.48 1.97 +/- 0.04
Confidence level of testing	The test and number of samples (3) tested provide 95% confidence level		

All values Mean +/- SD

Table 5: Testing Results for all trials (Mean ± SD), N=3.

The Amsino OneMask™ delivered 45.7% of albuterol sulfate and 54.0% of Ipratropium bromide of the respirable dose when compared to the Neb-U-mask system when using the MDI. The Amsino OneMask™ delivered 78.4% of the budesonide respirable dose when compared to the Neb-U-mask system when using the MDI. Figure 4 shows the mean respirable particle dose for all MDI trials.

Conclusions: Nebulizer Performance

Results show that the newly proposed Amsino OneMask™ Adult Oxygen Mask outperformed the Southmedic OxyMulti Mask for two of the three drugs when considering the respirable delivered dose to the patient. The Amsino OneMask™ mask slightly under performed the Neb-U-Mask system for ipratropium bromide respirable dose using a nebulizer. Overall, the new proposed mask's respirable dose delivery is substantially

equivalent to the predicate mask. Table 7 lists all results for both mask's nebulizer performance.

Conclusions: MDI Performance

Results show that the newly proposed Amsino OneMask™ Adult Oxygen Mask had a patient respirable dose of about 50% compared to the Neb-U-Mask system for albuterol sulfate and budesonide when administered by MDIs. The Amsino OneMask™ Oxygen mask performed better with the ipratropium bromide MDI, having a patient delivered respirable dose of 78.4% that of the Neb-U-Mask system. Using two actuations from the MDI would alleviate the underperformance and deliver substantially equivalent respirable dose to the patient.

Table 7 list all results for both mask's MDI performance.

Document Revision

December 2016 – Updated manufacture data from original report

References

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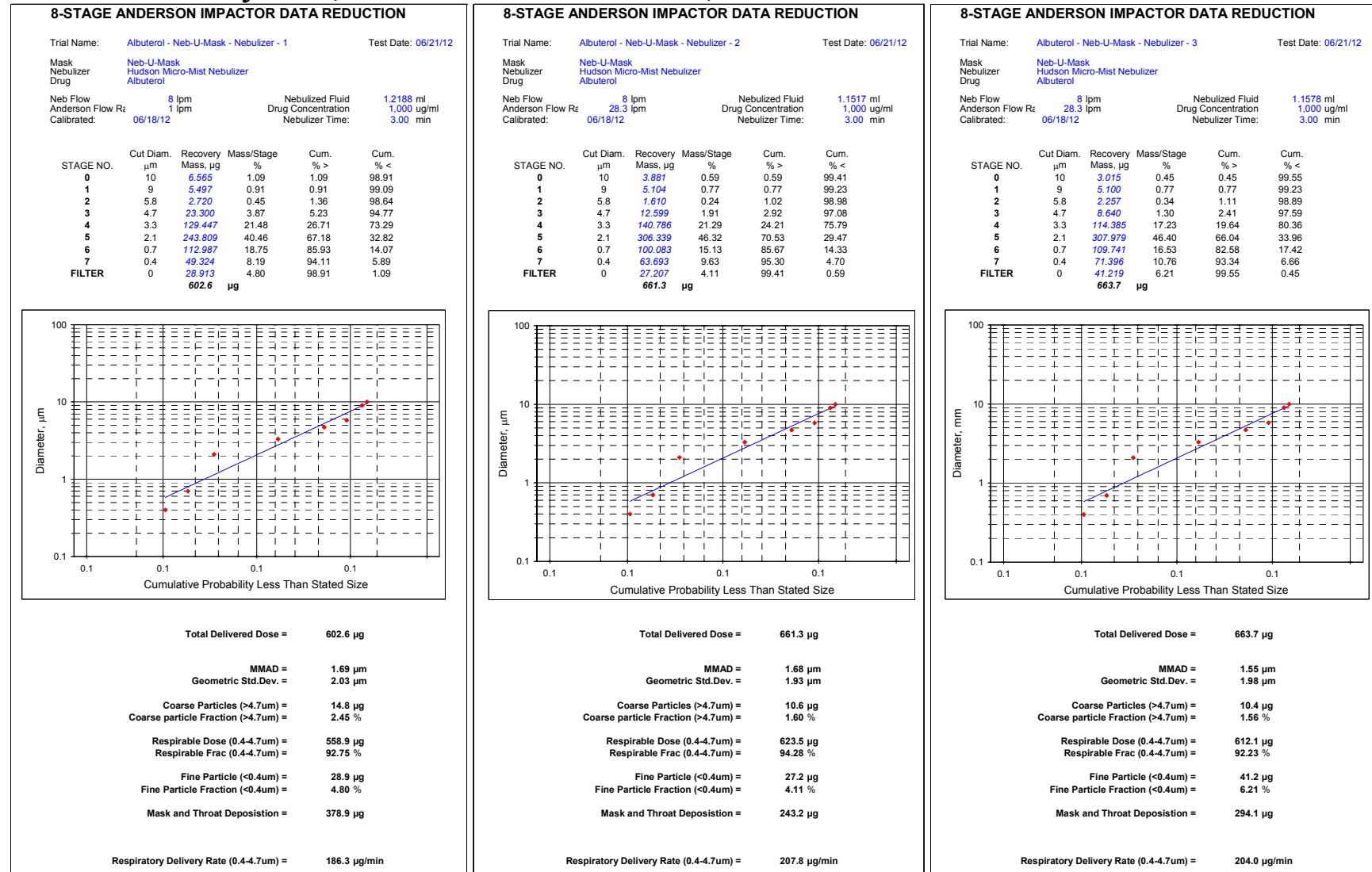
Appendix A

Individual Cascade Reduction Data for Each Nebulizer Trial

Amsino OneMask™ Oxygen Mask, Nebulizer Performance, Albuterol Sulfate

8-STAGE ANDERSON IMPACTOR DATA REDUCTION							8-STAGE ANDERSON IMPACTOR DATA REDUCTION							8-STAGE ANDERSON IMPACTOR DATA REDUCTION						
Trial Name: Albuterol - OneMask - Nebulizer - 1			Test Date: 06/21/12				Trial Name: Albuterol - OneMask - Nebulizer - 2			Test Date: 10/17/12				Trial Name: Albuterol - OneMask - Nebulizer - 3			Test Date: 10/17/12			
Mask	Nebulizer	Drug	OneMask	Hudson Micro-Mist Nebulizer	Albuterol	Mask	Nebulizer	Drug	OneMask	Hudson Micro-Mist Nebulizer	Albuterol	Mask	Nebulizer	Drug	OneMask	Hudson Micro-Mist Nebulizer	Albuterol			
Neb Flow Anderson Flow:	8 lpm 28.3 lpm	Calibrated: 06/18/12	8 lpm 28.3 lpm	Drug Concentration Nebulizer Time:	1.1232 ml 1,000 ug/ml 3.25 min	Neb Flow Anderson Flow R:	8 lpm 28.3 lpm	Calibrated: 10/04/12	8 lpm 28.3 lpm	Drug Concentration Nebulizer Time:	0.9397 ml 1,000 ug/ml 3.00 min	Neb Flow Anderson Flow R:	8 lpm 28.3 lpm	Calibrated: 10/04/12	8 lpm 28.3 lpm	Drug Concentration Nebulizer Time:	0.9876 ml 1,000 ug/ml 3.00 min			
STAGE NO.	Cut Diam. µm	Recovery Mass, µg	Mass/Stage %	Cum.	Cum.	STAGE NO.	Cut Diam. µm	Recovery Mass, µg	Mass/Stage %	Cum.	Cum.	STAGE NO.	Cut Diam. µm	Recovery Mass, µg	Mass/Stage %	Cum.	Cum.			
0	10	45.45	6.00	6.00	94.00	0	10	41.58	5.09	5.09	94.91	0	10	60.93	7.17	7.17	92.83			
1	9	55.10	7.27	7.27	92.73	1	9	42.82	5.24	5.24	94.76	1	9	70.33	8.28	8.28	91.72			
2	5.8	21.17	2.79	10.07	89.93	2	5.8	14.08	1.72	6.97	93.03	2	5.8	32.77	3.86	12.14	87.86			
3	4.7	45.68	6.03	16.10	83.90	3	4.7	39.44	4.83	11.80	88.20	3	4.7	70.75	8.33	20.46	79.54			
4	3.3	151.94	20.06	36.15	63.85	4	3.3	188.03	23.02	34.82	65.18	4	3.3	197.32	23.23	43.69	56.31			
5	2.1	261.14	34.47	70.62	29.38	5	2.1	299.07	36.62	71.44	28.56	5	2.1	257.89	30.36	74.05	25.95			
6	0.7	91.95	12.14	82.76	17.24	6	0.7	93.97	11.51	82.94	17.06	6	0.7	77.63	9.14	83.19	16.81			
7	0.4	69.75	9.21	91.97	8.03	7	0.4	58.49	7.16	90.10	9.90	7	0.4	50.64	5.96	89.15	10.85			
FILTER	0	15.39	2.03	94.00	6.00	FILTER	0	39.25	4.81	94.91	5.09	FILTER	0	31.24	3.68	92.83	7.17			
	Total	757.6	µg				Total	816.7	µg				Total	849.5	µg					
Total Delivered Dose = 757.6 µg MMAD = 2.06 µm Geometric Std.Dev. = 2.66 µm Coarse Particles (>4.7um) = 121.7 µg Coarse particle Fraction (>4.7um) = 16.07 % Respirable Dose (0.4-4.7um) = 620.5 µg Respirable Frac (0.4-4.7um) = 81.90 % Fine Particle (<0.4um) = 15.4 µg Fine Particle Fraction (<0.4um) = 2.03 % Mask and Throat Deposition = 39.1 µg Respiratory Delivery Rate (0.4-4.7um) = 190.9 µg/min							Total Delivered Dose = 816.7 µg MMAD = 1.92 µm Geometric Std.Dev. = 2.52 µm Coarse Particles (>4.7um) = 98.5 µg Coarse particle Fraction (>4.7um) = 12.06 % Respirable Dose (0.4-4.7um) = 679.0 µg Respirable Frac (0.4-4.7um) = 83.14 % Fine Particle (<0.4um) = 39.2 µg Fine Particle Fraction (<0.4um) = 4.81 % Mask and Throat Deposition = 59.5 µg Respiratory Delivery Rate (0.4-4.7um) = 226.3 µg/min							Total Delivered Dose = 849.5 µg MMAD = 2.18 µm Geometric Std.Dev. = 2.79 µm Coarse Particles (>4.7um) = 164.0 µg Coarse particle Fraction (>4.7um) = 19.31 % Respirable Dose (0.4-4.7um) = 654.2 µg Respirable Frac (0.4-4.7um) = 77.01 % Fine Particle (<0.4um) = 31.2 µg Fine Particle Fraction (<0.4um) = 3.68 % Mask and Throat Deposition = 71.1 µg Respiratory Delivery Rate (0.4-4.7um) = 218.1 µg/min						

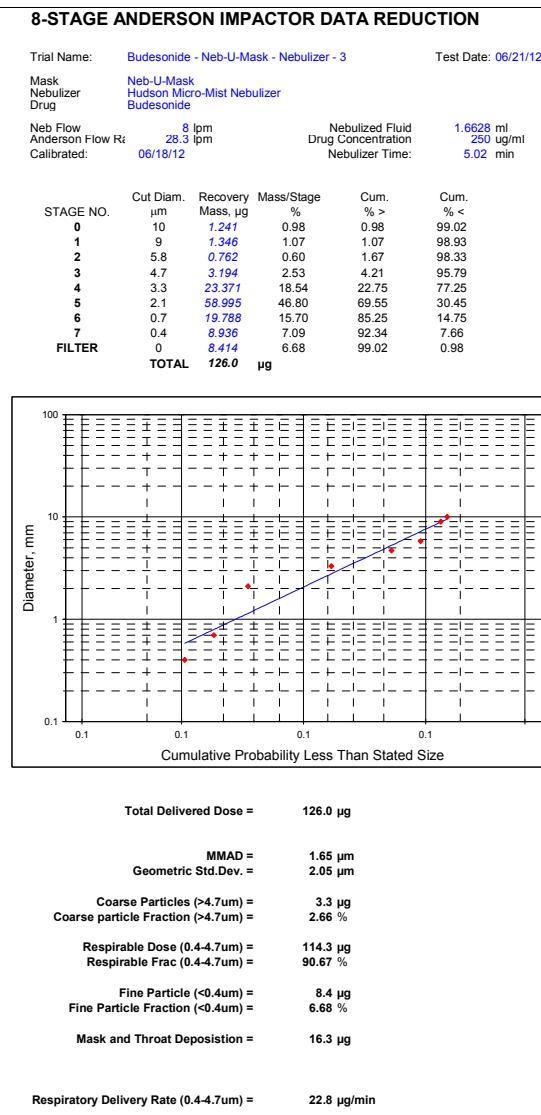
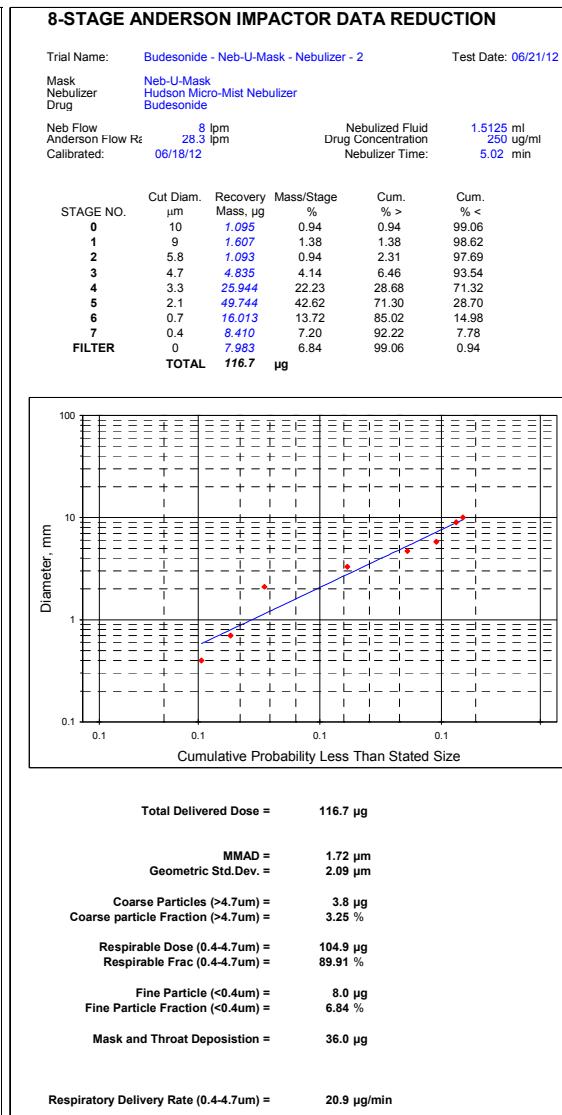
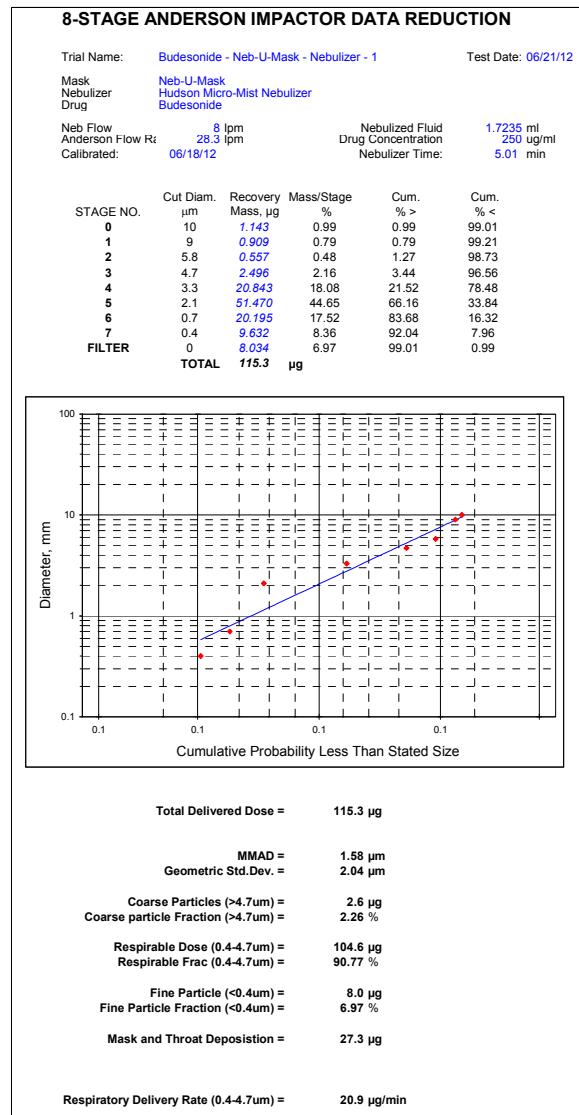
Neb-U-Mask System, Nebulizer Performance, Albuterol Sulfate



Amsino OneMask™ Oxygen Mask, Nebulizer Performance, Ipratropium Bromide

8-STAGE ANDERSON IMPACTOR DATA REDUCTION							8-STAGE ANDERSON IMPACTOR DATA REDUCTION							8-STAGE ANDERSON IMPACTOR DATA REDUCTION						
Trial Name: Ipratropium - OneMask - Nebulizer - 1			Test Date: 10/28/12				Trial Name: Ipratropium - OneMask - Nebulizer - 2			Test Date: 10/28/12				Trial Name: Budesonide-OneMask-Neb-1			Test Date: 10/28/12			
Mask	Nebulizer	Drug	OneMask		Hudson Micro-Mist Nebulizer		Mask	Nebulizer	Drug	OneMask		Hudson Micro-Mist Nebulizer		Mask	Nebulizer	Drug	OneMask		Hudson Micro-Mist Nebulizer	
Neb Flow	8 lpm		Nebulized Fluid		1.5858 ml		Neb Flow	8 lpm		Nebulized Fluid		1.6602 ml		Neb Flow	8 lpm		Nebulized Fluid		1.8241 ml	
Anderson Flow R:	28.3 lpm		Drug Concentration		250 ug/ml		Anderson Flow R:	28.3 lpm		Drug Concentration		250 ug/ml		Anderson Flow R:	28.3 lpm		Drug Concentration		250 ug/ml	
Calibrated:	10/16/12		Nebulizer Time:		5.02 min		Calibrated:	10/16/12		Nebulizer Time:		5.01 min		Calibrated:	10/16/12		Nebulizer Time:		5.02 min	
STAGE NO.	Cut Diam.	Recovery Mass, μg	Mass/Stag	%	% >	Cum.	STAGE NO.	Cut Diam.	Recovery Mass, μg	Mass/Stag	%	% >	Cum.	STAGE NO.	Cut Diam.	Recovery Mass, μg	Mass/Stag	%	% >	Cum.
0	10	7.074	4.92	4.92	95.08		0	10	7.668	5.19	5.19	94.81		0	10	5.940	3.97	3.97	96.03	
1	9	6.913	4.81	4.81	95.19		1	9	6.741	4.56	4.56	95.44		1	9	7.413	4.96	4.96	95.04	
2	5.8	2.677	1.86	6.68	93.32		2	5.8	3.179	2.15	6.71	93.29		2	5.8	3.870	2.59	7.55	92.45	
3	4.7	6.681	4.65	11.33	88.67		3	4.7	7.730	5.23	11.94	88.06		3	4.7	8.472	5.67	13.22	88.78	
4	3.3	30.656	21.34	32.67	67.33		4	3.3	32.207	21.79	33.73	66.27		4	3.3	32.760	21.92	35.14	64.86	
5	2.1	50.509	35.17	67.84	32.16		5	2.1	53.889	36.46	70.19	29.81		5	2.1	55.870	37.38	72.52	27.48	
6	0.7	18.801	13.09	80.93	19.07		6	0.7	18.324	12.40	82.58	17.42		6	0.7	17.262	11.55	84.07	15.93	
7	0.4	10.581	7.37	88.29	11.71		7	0.4	8.955	6.06	88.64	11.36		7	0.4	8.049	5.39	89.46	10.54	
FILTER	0	9.741	6.78	95.08	4.92		FILTER	0	9.123	6.17	94.81	5.19		FILTER	0	9.815	6.57	96.03	3.97	
	TOTAL	143.6 μg						TOTAL	147.8 μg						TOTAL	149.5 μg				
Total Delivered Dose = 143.6 μg							Total Delivered Dose = 147.8 μg							Total Delivered Dose = 149.5 μg						
MMAD = 1.80 μm Geometric Std.Dev. = 2.59 μm							MMAD = 1.86 μm Geometric Std.Dev. = 2.54 μm							MMAD = 1.93 μm Geometric Std.Dev. = 2.50 μm						
Coarse Particles (>4.7um) = 16.7 μg Coarse particle Fraction (>4.7um) = 11.60 %							Coarse Particles (>4.7um) = 17.6 μg Coarse particle Fraction (>4.7um) = 11.90 %							Coarse Particles (>4.7um) = 17.2 μg Coarse particle Fraction (>4.7um) = 11.52 %						
Respirable Dose (0.4-4.7um) = 117.2 μg Respirable Frac (0.4-4.7um) = 81.62 %							Respirable Dose (0.4-4.7um) = 121.1 μg Respirable Frac (0.4-4.7um) = 81.93 %							Respirable Dose (0.4-4.7um) = 122.4 μg Respirable Frac (0.4-4.7um) = 81.91 %						
Fine Particle (<0.4um) = 9.7 μg Fine Particle Fraction (<0.4um) = 6.78 %							Fine Particle (<0.4um) = 9.1 μg Fine Particle Fraction (<0.4um) = 6.17 %							Fine Particle (<0.4um) = 9.8 μg Fine Particle Fraction (<0.4um) = 6.57 %						
Mask and Throat Deposition = 16.7 μg							Mask and Throat Deposition = 15.0 μg							Mask and Throat Deposition = 13.3 μg						
Respiratory Delivery Rate (0.4-4.7um) = 23.3 $\mu\text{g}/\text{min}$							Respiratory Delivery Rate (0.4-4.7um) = 24.1 $\mu\text{g}/\text{min}$							Respiratory Delivery Rate (0.4-4.7um) = 24.4 $\mu\text{g}/\text{min}$						

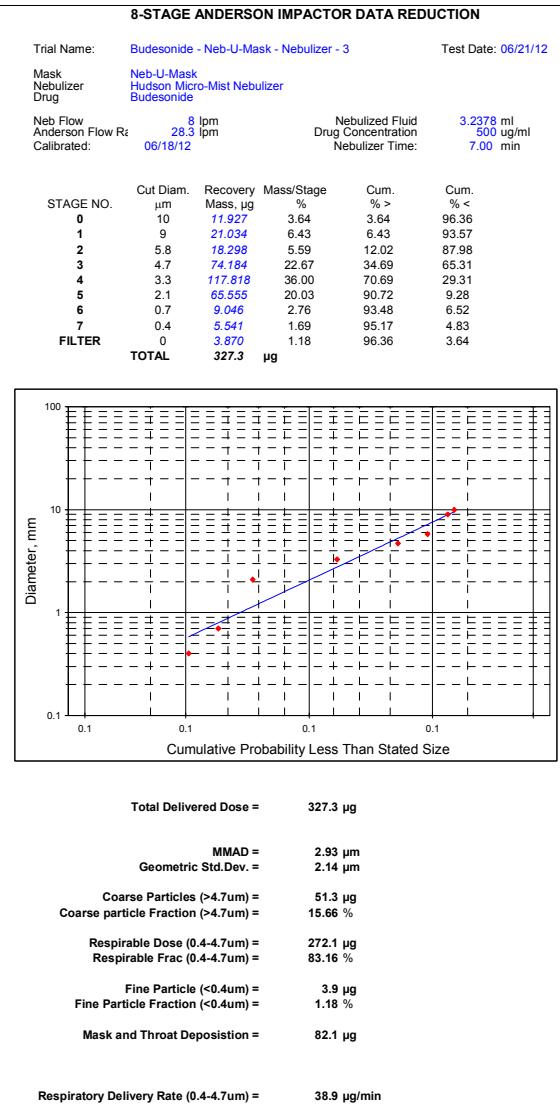
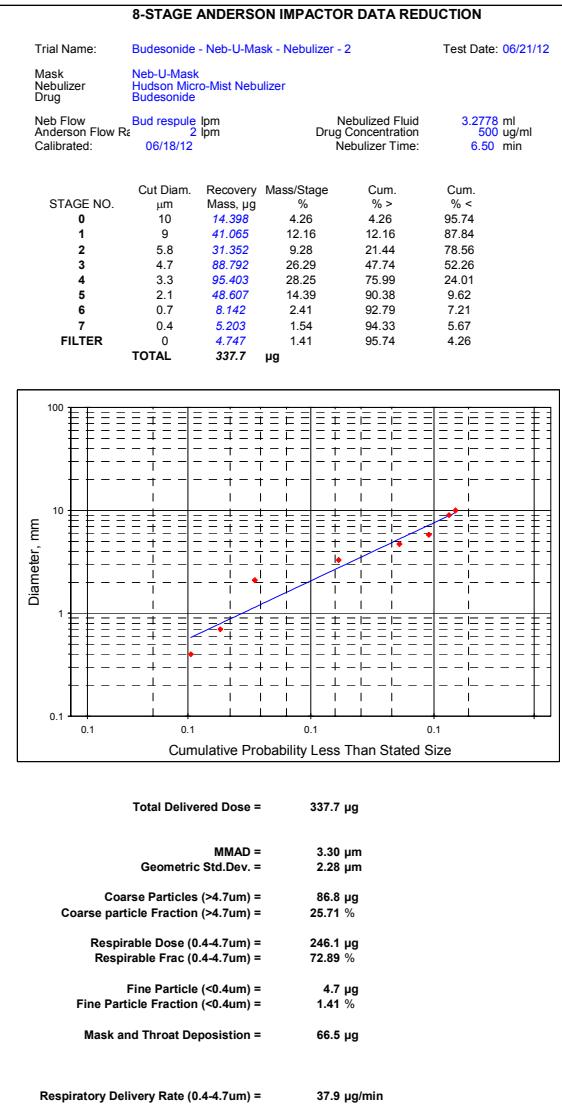
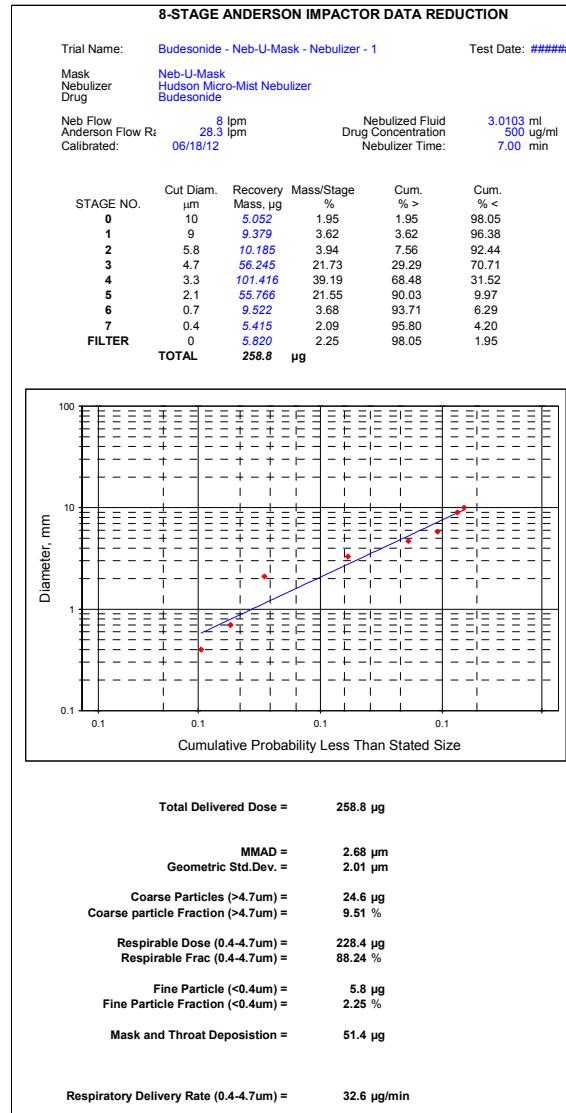
Neb-U-Mask System, Nebulizer Performance, Ipratropium Bromide



Amsino OneMask™ Oxygen Mask, Nebulizer Performance, Budesonide

8-STAGE ANDERSON IMPACTOR DATA REDUCTION							8-STAGE ANDERSON IMPACTOR DATA REDUCTION							8-STAGE ANDERSON IMPACTOR DATA REDUCTION						
Trial Name:	Budesonide - OneMask - Nebulizer - 1	Test Date:	06/22/12				Trial Name:	Budesonide - OneMask - Nebulizer - 2	Test Date:	06/21/12				Trial Name:	Budesonide - OneMask - Nebulizer - 3	Test Date:	06/21/12			
Mask Nebulizer Drug	OneMask Hudson Micro-Mist Nebulizer Budesonide						Mask Nebulizer Drug	OneMask Hudson Micro-Mist Nebulizer Budesonide					Mask Nebulizer Drug	OneMask Neb-U-Mask Nebulizer Budesonide						
Neb Flow Anderson Flow:	8 lpm	Nebulized Fluid	2.744 ml				Neb Flow Anderson Flow:	8 lpm	Nebulized Fluid	2.9948 ml				Neb Flow Anderson Flow:	8 lpm	Nebulized Fluid	2.7776 ml			
Calibrated:	28.3 lpm	Drug Concentration	500 ug/ml				Calibrated:	28.3 lpm	Drug Concentration	500 ug/ml				Calibrated:	28.3 lpm	Drug Concentration	500 ug/ml			
		Nebulizer Time:	7.00 min						Nebulizer Time:	6.50 min								Nebulizer Time:	6.25 min	
STAGE NO.	Cut Diam. μm	Recovery Mass/ μg	Mass/Stagge	Cum.	Cum.	% >	STAGE NO.	Cut Diam. μm	Recovery Mass/ μg	Mass/Stagge	Cum.	Cum.	% >	STAGE NO.	Cut Diam. μm	Recovery Mass/ μg	Mass/Stagge	Cum.	Cum.	% >
0	10	3.003	0.93	0.93	99.07		0	10	3.621	1.12	1.12	98.88		0	10	2.473	0.78	0.78	99.22	
1	9	51.537	15.89	15.89	84.11		1	9	40.742	12.58	12.58	87.42		1	9	31.233	9.91	9.91	90.09	
2	5.8	33.477	10.32	26.21	73.79		2	5.8	46.721	14.43	27.02	72.98		2	5.8	37.999	12.06	21.97	78.03	
3	4.7	30.551	9.42	35.63	64.37		3	4.7	47.544	14.69	41.70	58.30		3	4.7	29.707	9.43	31.40	68.60	
4	3.3	70.144	21.63	57.26	42.74		4	3.3	80.182	24.77	66.47	33.53		4	3.3	72.774	23.09	54.49	45.51	
5	2.1	91.752	28.29	85.55	14.45		5	2.1	60.040	18.54	85.01	14.99		5	2.1	95.593	30.33	84.82	15.18	
6	0.7	33.467	10.33	95.88	4.12		6	0.7	30.802	9.51	94.53	5.47		6	0.7	36.172	11.48	96.30	3.70	
7	0.4	6.637	2.05	97.93	2.07		7	0.4	11.381	3.52	98.04	1.96		7	0.4	6.040	1.92	98.22	1.78	
FILTER	0	3.720	1.15	99.07	0.93		FILTER	0	2.722	0.84	98.88	1.12		FILTER	0	3.151	1.00	99.22	0.78	
	TOTAL	324.3 μg						TOTAL	323.8 μg							TOTAL	315.1 μg			
Diameter mm							Diameter mm							Diameter mm						
100							100							100						
10							10							10						
1							1							1						
0.1							0.1							0.1						
0.1	0.1	0.1	0.1	0.1	0.1		0.1	0.1	0.1	0.1	0.1			0.1	0.1	0.1	0.1	0.1	0.1	
Cumulative Probability Less Than Stated Size							Cumulative Probability Less Than Stated Size							Cumulative Probability Less Than Stated Size						
Total Delivered Dose =	324.3 μg						Total Delivered Dose =	323.8 μg						Total Delivered Dose =	315.1 μg					
MMAD =	3.07 μm						MMAD =	3.13 μm						MMAD =	2.90 μm					
Geometric Std.Dev. =	2.11 μm						Geometric Std.Dev. =	2.13 μm						Geometric Std.Dev. =	2.05 μm					
Coarse Particles (>4.7 μm) =	88.0 μg						Coarse Particles (>4.7 μm) =	91.1 μg						Coarse Particles (>4.7 μm) =	71.7 μg					
Coarse particle Fraction (>4.7 μm) =	27.14 %						Coarse particle Fraction (>4.7 μm) =	28.13 %						Coarse particle Fraction (>4.7 μm) =	22.75 %					
Respirable Dose (0.4-4.7 μm) =	232.6 μg						Respirable Dose (0.4-4.7 μm) =	229.9 μg						Respirable Dose (0.4-4.7 μm) =	240.3 μg					
Respirable Frac (0.4-4.7 μm) =	71.71 %						Respirable Frac (0.4-4.7 μm) =	71.03 %						Respirable Frac (0.4-4.7 μm) =	76.25 %					
Fine Particle (<0.4 μm) =	3.7 μg						Fine Particle (<0.4 μm) =	2.7 μg						Fine Particle (<0.4 μm) =	3.2 μg					
Fine Particle Fraction (<0.4 μm) =	1.15 %						Fine Particle Fraction (<0.4 μm) =	0.84 %						Fine Particle Fraction (<0.4 μm) =	1.00 %					
Mask and Throat Deposition =	15.2 μg						Mask and Throat Deposition =	16.1 μg						Mask and Throat Deposition =	12.1 μg					
Respiratory Delivery Rate (0.4-4.7 μm) =	33.2 $\mu\text{g}/\text{min}$						Respiratory Delivery Rate (0.4-4.7 μm) =	35.4 $\mu\text{g}/\text{min}$						Respiratory Delivery Rate (0.4-4.7 μm) =	38.4 $\mu\text{g}/\text{min}$					

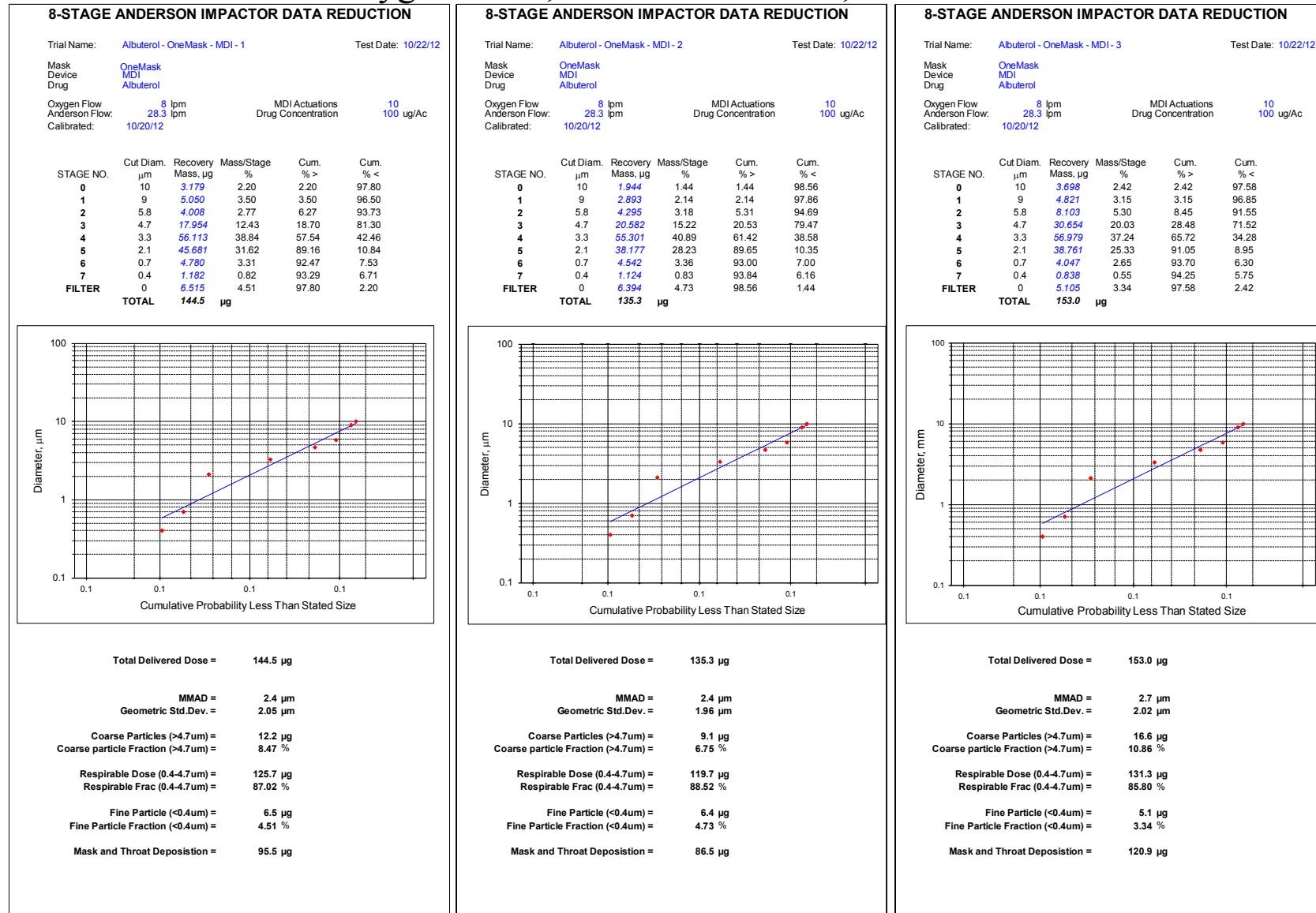
Neb-U-Mask System, Nebulizer Performance, Budesonide



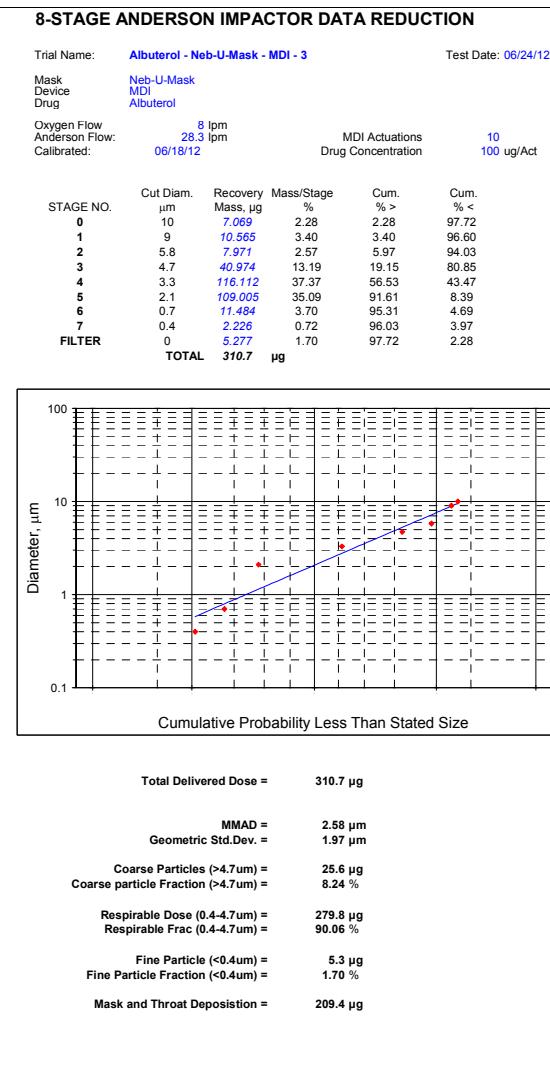
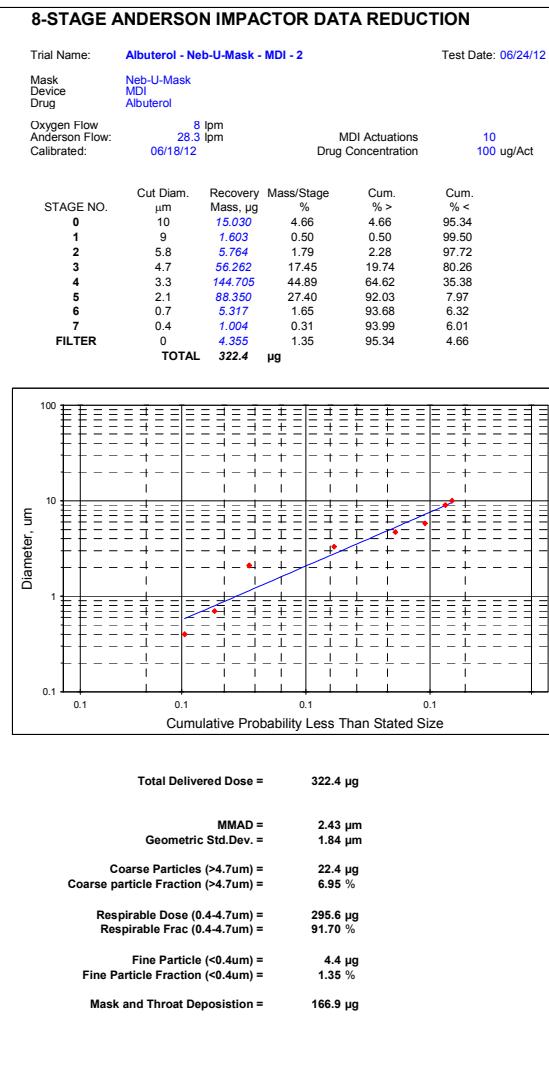
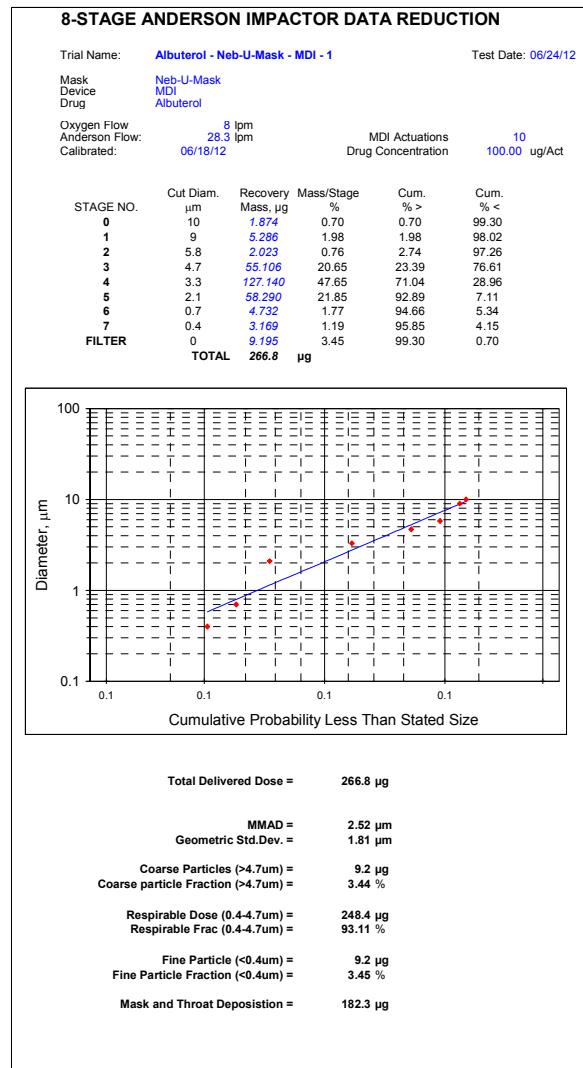
Appendix B

Individual Cascade Reduction Data for Each Metered Dose Inhaler Trial

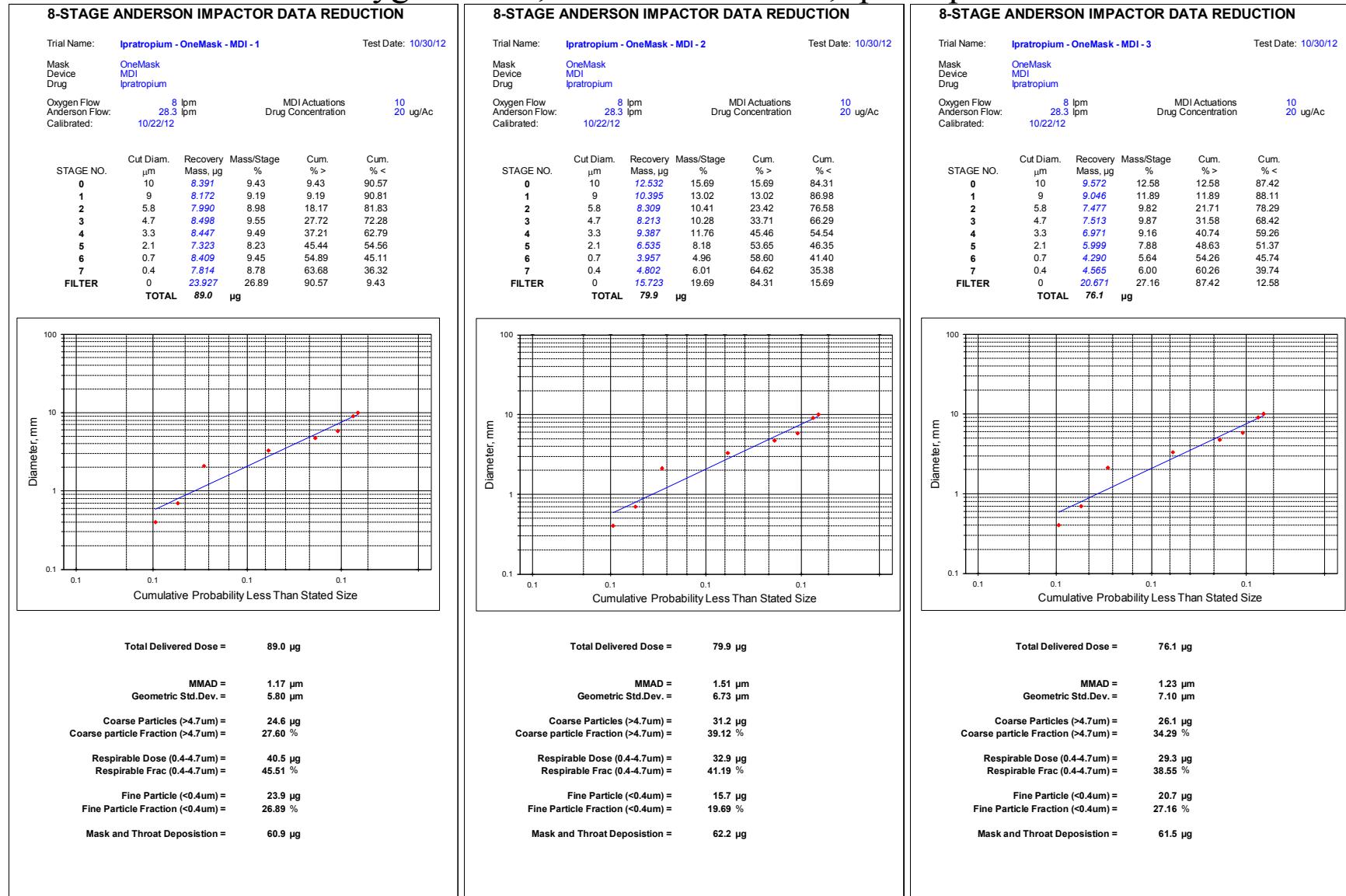
Amsino OneMask™ Oxygen Mask, MDI Performance, Albuterol Sulfate



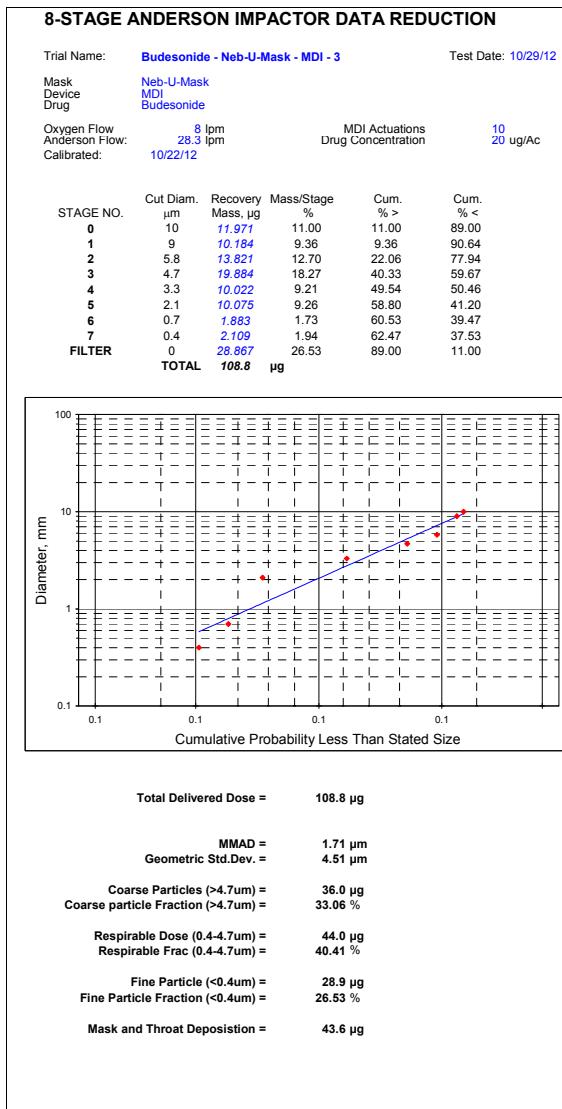
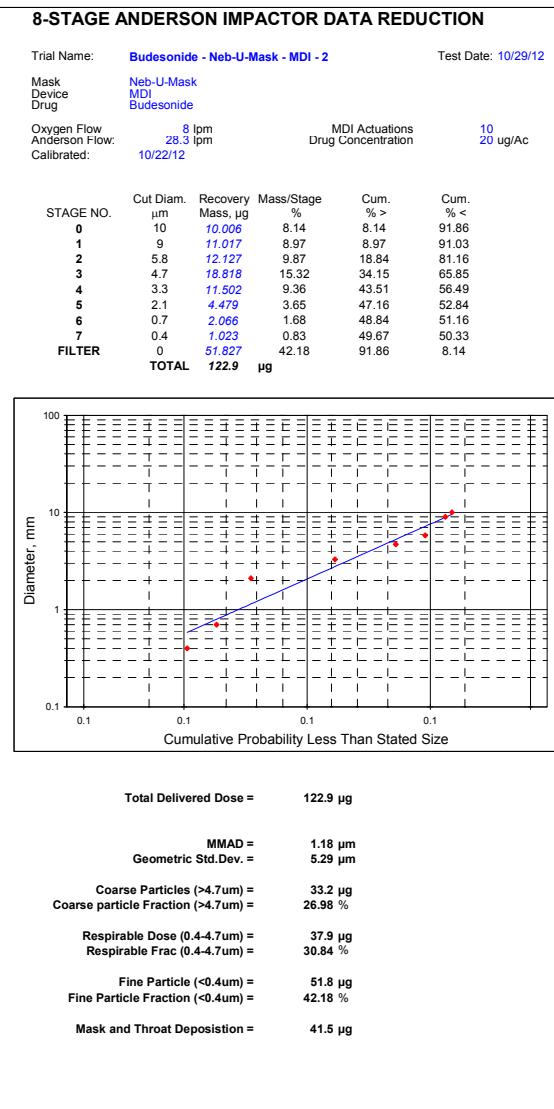
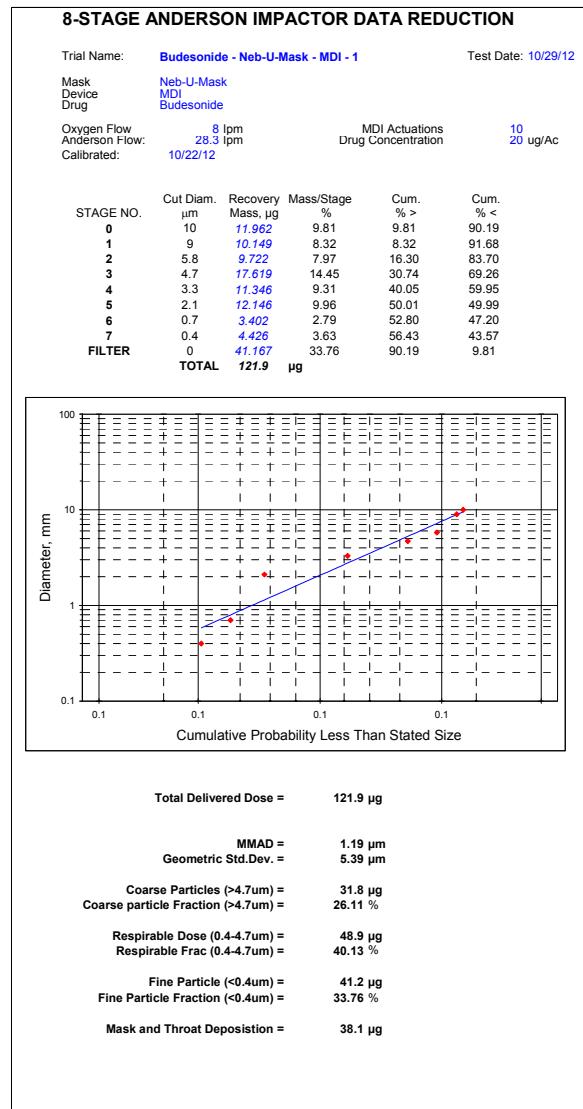
Neb-U-Mask System, MDI Performance, Albuterol Sulfate



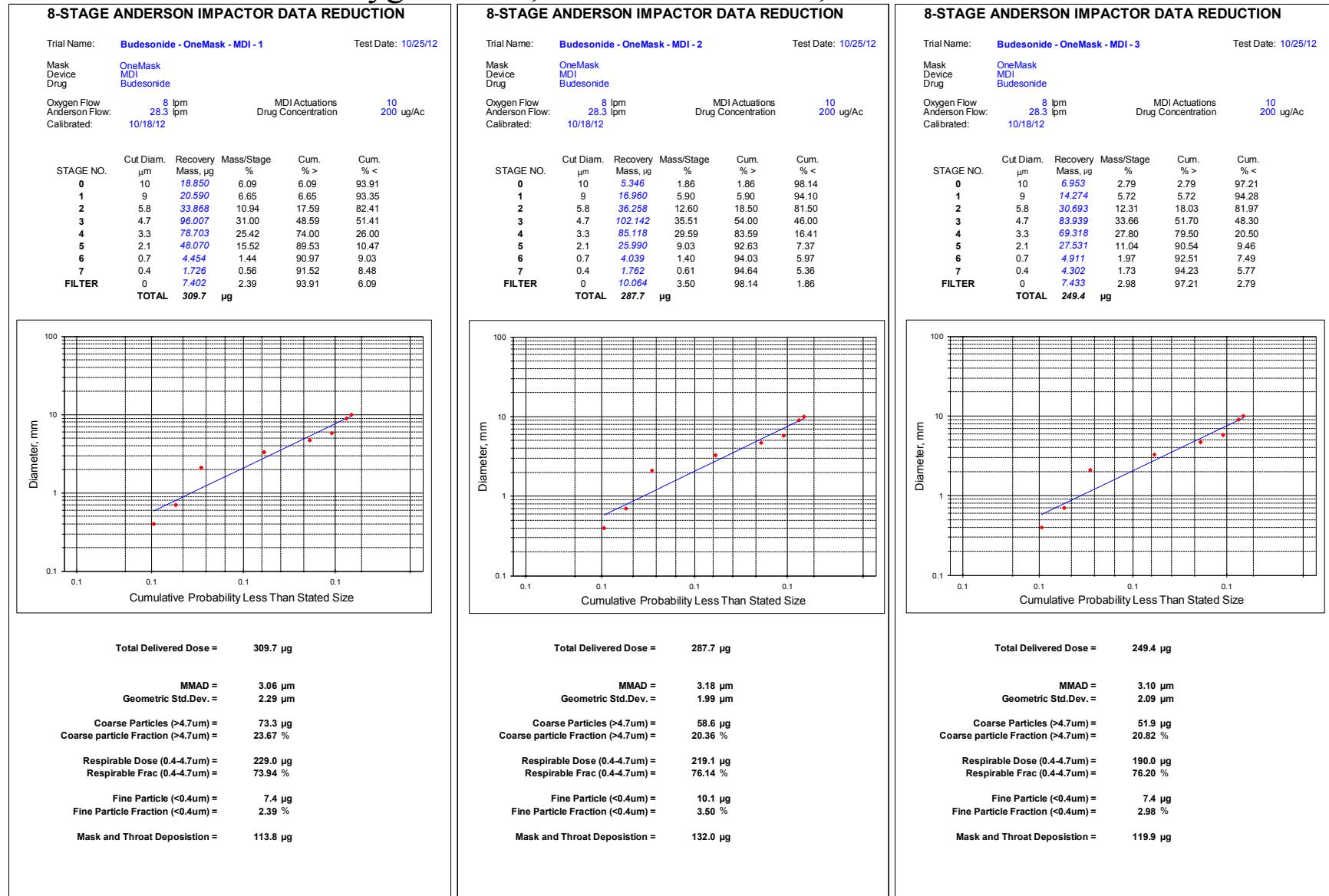
Amsino OneMask™ Oxygen Mask, MDI Performance, Ipratropium Bromide



Neb-U-Mask Sysystem, MDI Performance, Ipratropium Bromide



Amsino OneMask™ Oxygen Mask, MDI Performance, Budesonide



Neb-U-Mask System, MDI Performance, Budesonide

