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(54) Title: A MEDICINAL AEROSOL FORMULATION

(57) Abstract: This invention relates to a medicinal aerosol formulation and more particularly, to a medicinal aerosol formulation containing a particulate drug, a propellant and a stabilizing agent selected from an amino acid, an amino acid derivative and a mixture of the foregoing.

TITLE OF THE INVENTION

A MEDICINAL AEROSOL FORMULATION

RELATED APPLICATIONS

This application is a continuation-in-part of application USSN 09/158,369 filed September 22, 1998, now allowed, expressly incorporated by reference.

Field of the Invention

This invention relates to a medicinal aerosol formulation, and more particularly, to a medicinal aerosol formulation comprising a stabilizer selected from an amino acid, a derivative thereof or a mixture of the foregoing.

Description of the Related Art

Delivery of drugs to the lung by way of inhalation is an important means of treating a variety of conditions, including such common local conditions as bronchial asthma and chronic obstructive pulmonary disease and some systemic conditions including pain management, cystic fibrosis, etc. Steroids, β2 agonists, anticholinergic agents, non-steroidal antiinflammatory agents, proteins and polypeptides are among the drugs that are administered to the lung for such purposes. Such drugs are commonly administered to the lung in the form of an aerosol of particles of respirable size (less than about 10 μm in diameter). In order to assure proper particle size in the aerosol, particles can be prepared in respirable size and then incorporated into a suspension formulation containing a propellant. Alternatively, formulations can be prepared in solution form in order to avoid the concern for proper particle size in the formulation. Solution formulations must nevertheless be dispensed in a manner that produces particles or droplets of respirable size.

Once prepared an aerosol formulation is filled into an aerosol canister equipped with a metered dose valve. In the hands of the patient the formulation is dispensed via an actuator adapted to direct the dose from the valve to the patient.

It is important that an aerosol formulation be stable such that the pressurized dose discharged from the metered dose valve is reproducible. Rapid creaming, settling, or flocculation after agitation are common sources of dose irreproducibility in suspension formulations. This is especially true where a binary

aerosol formulation containing only medicament and propellant, e.g. 1,1,1,2-tetrafluoroethane, is employed or where such formulation contains small amounts of surfactant as well. Sticking of the valve also can cause dose irreproducibility. In order to overcome these problems aerosol formulations often contain surfactants, which serve as suspending aids to stabilize the suspension for a time sufficient to allow for reproducible dosing. Certain surfactants also function as lubricants to lubricate the valve to assure smooth actuation. Myriad materials are known and disclosed for use as dispersing aids in aerosol formulations. Suitability of materials, however, is dependent on the particular drug and the propellant or class of propellant used in the formulation.

It is sometimes difficult to dissolve sufficient quantities of conventional surfactants in hydrofluorocarbon (HFC) propellants such as HFC-134a and HFC-227. Cosolvents, such as ethanol, have been used to overcome this problem, as described in U.S. Patent NO. 5,225,183. An alternative approach that avoids cosolvents involves materials that are soluble in hydrofluorocarbon propellants and are said to be effective surfactants or dispersing aids in an aerosol formulation. Among such materials are certain fluorinated surfactants and certain polyethyoxysurfactants.

SUMMARY OF THE INVENTION

It has surprisingly been found that novel medicinal aerosol formulations can be obtained without the use of either cosolvents, such as ethanol, or surfactants, such as sorbitan trioleate which are added to a binary aerosol formulation. Stable medicinal aerosol formulations are obtained by the use of amino acids, derivatives thereof or a mixture of the foregoing.

DETAILED DESCRIPTION OF THE INVENTION

This invention involves a stable suspension aerosol formulation suitable for pressurized delivery which comprises (1) a particulate medicament or drug or combinations of at least two medicaments or drugs, (2) a suitable propellant, and (3) a suitable stabilizer.

A suitable medicament or drug is one which is suitable for administration by inhalation, the inhalation being used for oral and nasal inhalation

therapy. Therapeutic categories of drugs or medicaments include cardiovascular drugs, antiallergics, analgesics, brochodilators, antihistamines, antitussives, antifungals, antivirals, antibiotics, pain medicaments, antiinflammatories, peptides, proteins and steroids.

Particularly suitable medicaments or drugs include albuterol (also known as salbutamol), atropine, beclomethasone, esters of beclomethasone such as its monopropionate and dipropionate, budesonide, cromolyn, epinephrine, ephedrine, fentanyl, flunisolide, formoterol, ipratropium bromide, isoproterenol, pirbuterol, prednisolone, mometasone, salmeterol, amiloride, fluticasone esters, such as phosphate, monohydrate and furoate, (-)4-amino-3,5-dichloro-α-[[[6(2-pyridinyl)ethoxy] hexyl] amino] methyl]benzene-methanol. Also included are the suitable acid addition salts of the foregoing drugs, their hydrates and their other solvates. In this regard, suitable acid addition salts include the salts obtained from inorganic acids, such as hydrochloric, hydrobromic, sulfuric, nitric, phosphoric and perchloric acids as well as organic acids such as tartaric, citric, acetic, succinic, maleic, fumaric and oxalic acids. Suitable pharmaceutically acceptable solvates include solvates with ethylactate, alkanes, ethers, alcohols and water.

An preferred embodiment of this invention are aersol formulations which provide for a combination of at least two and most preferably no more than four different medicaments, such as cardiovascular drugs, antiallergenics, analgesics, bronchodilatiors, antihistamines, antitissive, antifungals, antiviral, antibiotics, pain medicaments, antinflammatories, peptides, proteins and steroids as well as the use of these aerosol formulations to treat the disease states associated with these medicaments. These medicaments and their use to treat a particular disease state are well known to practitioners of the art.

This invention includes the derivatives of the foregoing medicaments. These derivatives include all the salt, ester, solvate and hydrate forms of the foregoing drugs as well as their geometric and optical isomers, including their chiral forms. Such derivatives are well known to a practitioner in this art.

Especially preferred, are formulations which comprise combinations comprising at least two different medicants, such as ß2-adrenergic agonists, corticosteroids, anticholinergics and leucotriene modulators. Especially preferred

are ß2-adrenergic agonists, such as albuterol and formoterol, and corticosteroids, such as mometasone, hydrocortisone, fludrocortisone, dexamethasone, predniscone, cortisone, aldosterone hemi-acetal, betametasone, beclomethasone dipropionate, triamcinolone acetonide, budesonide dipropionate, fluticasone propionate and fluniscolide, anticholinergics such as ipratopium bromide, histamine antagonists (mast cell mudulators). Such as cromolyn, and non-steroidal antiinflammatory agents, such as acetominophen or ibuprofen.

The leucotrienes contemplated in this invention are those which implicated as mediators of allergic and inflammatory responses associated with bronchial asthma and rheumatoid arthritis, these medicaments are known in the art to constrict dramatically the pulmonary airways and small blood vessels. Thus, inhibitors or antagonists of leucotrienes are effective mediators of the allergic responses typified by asthma and may be used to treat bronchial asthma and other diseases state associated with inflammation of the airways.

The leucotriene modulators contemplated in this application include, but not limited, to the following:

1. Inhibitors or antagonists of lecotriene, including the PAF receptor antagonists and 5-lipoxynase inhibitors, for example 2,5-diaryl tetrahydrofurans, 2,5-diaryl tetrahydrothiophenes, 2,4-diaryl tetrahydrofurans, 2,4-diaryl tetrahydrothiophenes, 1,3-diaryl cyclopentanes, 2,4-diaryl pyrrolidines, and 2,5-diaryl pyrrolidines, triazolo(4,3-A)(1,4)benzodiazepines and thieno (3,2-F)(1,2,4)triazolo(4,3-A)(1,4)diazepine compounds, 6-phenyl-4H-s-triazolo[4,3-a][1,4]benzodiazepines (see, U.S. Patent Nos. 5,856,323; 5,358,938; 4,959,361; and 3,987,052), including, both optically pure and racemates (U.S. Patent No. 5,629,337). An example of this group of compounds is Zileuton® (Abbott Laboratories) and Acolate® (Merck).

2. Chromone-2-carboxylic acid derivatives as antagonists of SRS-A (slow reacting substance of anaphylaxis (see, Samuelsson et al., Department of Chemistry, Karolinska Institutet, Stockholm, Sweden, TIPS, 227, May, 1980; J. Med. Chem. 20 371 (1977)), such as 7-[3-(4-acetyl-3-hydroxy-2-propylphenoxy)-2-hydroxypropoxy]-4-oxo-8-propyl-4H-1-benzopyran-2-carboxylate (FPL 55712), which is a specific antagonist of SRS-A as well as a standard for evaluating other inhibitors;

3. Aryloxyalkyloxy-and aralkyloxy-4-hydroxy-3-nitrocoumarins as antagonists of SRS-A and inhibitors of histamine release, (see, e.g. Buckle et al., J. Med. Chem. 22 158 (1979); U.S. Patent No. 4,296,237; European Patent No. 0036663; U.S. Patent No. 4,296,120; and U.S. Patent No. 4,296,129), as well as other compounds which act as inhibitors of SRS-A including oxiranbutyric acid esters, 3-hydroxy-4-substituted-3-pyrroline-2,5-diones or carboxy-oxo-pyrrolidino)phenyl alkenamides and esters or (carboxyacylamino)phenyl alkenamides and esters, or the substituted derivatives of these before mentioned compounds, including, but not limited, to alkyl, hydroxy amino, dialkylamino, hydroxymethyl, aminomethyl, alkylaminomethyl or alkanoylaminomethyl of 1 to 12 carbon atoms; -CN, $-CONH_2$ or $-CO_2M$ in which M is hydrogen, aryl, phenyl, or naphthyl, cyclohexyl, cyclopentyl, or fluoromethoxy; or

4. Antagonists and inhibitors of leukotrienes including N-o-tolylsulfonylbenzamide compounds.

All of the aforemention mentioned prior literature is expressly incorporated by reference. These medicaments are known in the art to treat inflammatory diseases and include medicaments that block release, production, secretion, or any other biochemical action of arachidonic acid, prostaglandines, thromoxanes, or other leukotrienes that participate in inflammatory rections, exhibit chemotactic activities, stimulate lysosomal enzyme releases and act as important factors in the immediate hypersensitivity reaction.

Especially preferred medicaments include groups comprising [1-formyl-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-(hydroxycarbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-((2-carboxyethyl)carbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-((2-tetrazolylethyl)carbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-(methylphenylcarbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-(diphenylcarbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide; [1-carbamoyl-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, and [1-(pyrrolidine-carbonyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide. Also, included are the pharmaceutically acceptable salts of these agents, including addition salts derived from organic or inorganic acids such as hydrochloric, hydrobromic, sulfuric, phosphoric, methane sulfonic, nitric, p-toluene sulfonic, acetic, citric, maleic, succinic acid, and the like. In addition, the compounds in their free carboxylic acid form may be converted by standard techniques well-known to the practitioner to their corresponding alkali metal (e.g. sodium or potassium), alkaline earth metal (e.g. calcium or magnesium), ammonium or primary, secondary and tertiary alkylamine salts, the latter containing from 1 to 6 carbon atoms in their alkyl moieties or a pharmaceutically acceptable salt thereof. These components are known in the literature and are described, for example in Brown et al., J. Med. Chem., vol. 35(13), pp. 2419 to 2439 (1992); Jacobs et al., J.

Med. Chem., vol. 37(9), pp. 1282 to 1297 (1994); AU000646587 Australia 3/1993; McFadden, E.R., Jr., Am. Rev. Resp. Dis., vol. 147 pp. 1306-1310 (1993); Greenberger, P.A., Chest, vol. 101 pp. 418S-421S (1992); Lipworth, B.J., Pharmacol. Ther., vol. 58 pp. 173-209 (1993); Busse, W.W., Chest, vol. 104 pp. 1565-1571 (1993); Anonymous; Executive Summary: Guidelines for the Diagnosis and Management of Asthma, Public Health Service, Publication 91-3042A, NIH, Bethesda, MD., pp. 1-44 (1991); Israel, E., and Drazen, J.M., N. Engl. J. Med., vol., 331 pp. 737-739 (1994); or Barnes, P.J., N. Engl. Med., vol. 332 pp. 868-875 (1995). All these prior publications are expressly incorporated by reference.

For purposes of the formulations of this invention, which are intended for inhalation into the lungs, the medicament or drug is preferably micronized whereby a therapeutically effective amount or fraction (e.g., ninety percent or more) of the drug is particulate. Typically, the particles have a diameter of less than about 10 microns, and preferably less than about 5 microns, in order that the particles can be inhaled into the respiratory tract and/or lungs.

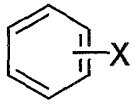
The particulate medicament or drug is present in the inventive formulations in a therapeutically effective amount, that is, an amount such that the drug can be administered as an aerosol, such as topically, or via oral or nasal inhalation, and cause its desired therapeutic effect, typically preferred with one dose, or through several doses. The particulate drug is administered as an aerosol from a conventional valve, e.g., a metered dose valve.

The term "amount" as used herein refers to quantity or to concentration as appropriate to the context. The amount of a drug that constitutes a therapeutically effective amount varies according to factors such as the potency of the particular drug, the route of administration of the formulation, and the mechanical system used to administer the formulation. A therapeutically effective amount of a particular drug can be selected by those of ordinary skill in the art with due consideration of such factors. Generally a therapeutically effective amount will be from about 0.005 parts by weight to about 2 parts by weight based on 100 parts by weight of the propellant.

A suitable propellant is selected. A suitable propellant is any fluorocarbon, e.g. a 1-4 hydrogen containing flurocarbon(, such as CHF_2CHF_2,

CF_3CH_2F, $CH_2F_2CH_3$ and CF_3CHFCF_3)), a perfluorocarbon, e.g. a 1-4 carbon perfluorocarbon, (such as CF_3CF_3, $CF_3CF_2CF_3$); or any mixture of the foregoing, having a sufficient vapor pressure to render them effective as propellants. Some typical suitable propellants include conventional chlorofluorocarbon (CFC) propellants such as mixtures of propellants 11, 12 and 114. Non-CFC propellants such as 1,1,1,2-tetrafluoroethane (Propellant 134a), 1,1,1,2,3,3,3-heptafluoropropane (Propellant 227) or mixtures thereof are preferred. The propellant is preferably present in an amount sufficient to propel a plurality of the selected doses of drug from an aerosol canister.

A suitable stabilizer is selected. A suitable stabilizer includes (1) an amino acid selected from (a) a monoamino carboxylic acid of the formula, H_2N-R-COOH (I), (b) a monoamino dicarboxylic acid of the formula, H_2N-R$(COOH)_2$ (II) and (c) a diamino monocarboxylic acid of the formula $(H_2N)_2$-R COOH (III), where R is a straight or branched alkyl radical of from 1 to 22 carbon atoms, which can be mono or poly-substituted with moieties such as sulfide (-S-), oxide (-O-), hydroxyl (-OH), amide (-NH), sulfate (-SO4); aryl of the formula



where X is hydrogen, halogen (F, C1, BR, I), alkyl of 1 to 6 carbon atoms, alkoxy of 1 to 6 carbon atoms, hydroxy and nitro; and heterocyclic, such as thienyl, furyl, pyranyl, imidazolyl, pyrrolyl, thizolyl, oxazolyl, pyridyl, and pyrimidinyl compounds; (2) a derivative of the amino acid selected from (a) acid addition salts of the amino group, obtained from inorganic acids, such as hydrochloric, hydrobromic, sulfuric, nitric, phosphoric, and perchloric acids, as well as organic acids, such as tartaric, citric, acetic, succinic, maleic, fumaric, oxalic acids; (b) amides of the carboxylic acid group, e.g., glutamine, (c) esters of the carboxylic acid group obtained from aliphatic straight or branched chain alcohols of from 1 to 6 carbon atoms, e.g. L-aspartyl-L-phenylalanine methylester (Aspartame®), and (3) a mixture of the amino acid and the derivative of the amino acid.

Suitable amino acids of the formula I include glycin, glycine, alanine, valine, leucine, isoleucine, methionine, threonine, isovaline, phenylalanine, tyrosine,

serine, cysteine, N-acetyl-L-cysteine, histidine, tryptophan, proline, and hydroxyproline, e.g. trans-4-hydroxy proline. Compounds of the formula II include, aspartic acid, and glutamic acid, compounds of the formula (III) include arginine, lysine, hydroxylysine, ornithine, asparagine, and citrulline.

An aerosol formulation preferably comprises the stabilizer in an amount effective to stabilize the formulation relative to an identical formulation not containing the stabilizer, such that the drug does not settle, cream or flocculate after agitation so quickly as to prevent reproducible dosing of the drug. Reproducible dosing can be achieved if the formulation retains a substantially uniform drug concentration for about two or three seconds after agitation.

The particular amount of stabilizer that constitutes an effective amount is dependent upon the particular stabilizer, the particular propellant, and on the particular drug used in the formulation. It is therefore not practical to enumerate specific effective amounts for use with specific formulations of the invention, but such amounts can readily be determined by those skilled in the art with due consideration of the factors set forth above. Generally, however, the stabilizer can be present in a formulation in an amount from about 0.000002 percent by weight, to about 20% by weight, more preferably about 0.0002 percent to about 10% by weight, based on the weight of the formulation.

It has surprisingly been found that the formulation of the invention is stable without the necessity of employing a cosolvent, such as ethanol, or surfactants. However, further components, such as conventional lubricants or surfactants, cosolvents, ethanol, etc., can also be present in an aerosol formulation of the invention in suitable amounts readily determined by those skilled in the art. In this regard, reference is made to U.S. Patent No. 5,225,183, which is incorporated by reference hereinto in its entirety.

Generally the formulations of the invention can be prepared by combining (i) the drug in an amount sufficient to provide a plurality of therapeutically effective doses; (ii) the stabilizer in an amount effective to stabilize each of the formulations; (iii) the propellant in an amount sufficient to propel a plurality of doses from an aerosol canister; and (iv) any further optional components e.g. ethanol as a cosolvent; and dispersing the components. The components can be

dispersed using a conventional mixer or homogenizer, by shaking, or by ultrasonic energy. Bulk formulation can be transferred to smaller individual aerosol vials by using valve to valve transfer methods, pressure filling or by using conventional cold-fill methods. It is not required that a stabilizer used in a suspension aerosol formulation be soluble in the propellant. Those that are not sufficiently soluble can be coated onto the drug particles in an appropriate amount and the coated particles can then be incorporated in a formulation as described above.

Aerosol canisters equipped with conventional valves, preferably metered dose valves, can be used to deliver the formulations of the invention. It has been found, however, that selection of appropriate valve assemblies for use with aerosol formulations is dependent upon the particular stabilizer and other adjuvants used (if any), on the propellant, and on the particular drug being used. Conventional neoprene and buna valve rubbers used in metered dose valves for delivering conventional CFC formulations often have less than optimal valve delivery characteristics and ease of operation when used with formulations containing HFC-134a or HFC-227. Therefore certain formulations of the invention are preferably dispensed via a valve assembly wherein the diaphragm is made of a nitrile rubber such as DB-218 (American Gasket and Rubber, Schiller Park, Ill.) or an EPDM rubber such as Vistalon™ (Exxon), Royalene™ (UniRoyal), bunaEP (Bayer). Also suitable are diaphragms fashioned by extrusion, injection molding or compression molding from a thermoplastic elastomeric material such as FLEXOMER™ GERS 1085 NT polyolefin (Union Carbide).

Conventional aerosol canisters, coated or uncoated, anodized or unanodized, e.g., those of aluminum, glass, stainless steel, polyethylene terephthalate, and coated canisters or cans with epon, epoxy, etc., can be used to contain a formulation of the invention.

The formulation of the invention can be delivered to the respiratory tract and/or lung by oral inhalation in order to effect bronchodilation or in order to treat a condition susceptible of treatment by inhalation, e.g., asthma, chronic obstructive pulmonary disease. The formulations of the invention can also be delivered by nasal inhalation in order to treat, e.g., allergic rhinitis, rhinitis, (local) or

diabetes (systemic), or they can be delivered via topical (e.g., buccal) administration in order to treat, e.g., angina or local infection.

Claims:

1. A medicinal aerosol formulation, which comprises:

(a) a therapeutically effective amount of a combination of at least two different particulate medicaments;

(b) a propellant; and

(c) a stabilizer selected from an amino acid, a derivative thereof, or a mixture of the foregoing.

2. The formulation as defined in claim 1 wherein said stabilizer is selected from the group consisting of glycin, glycine, alanine, valine, leucine, isoleucine, methionine, threonine, isovaline, phenylalanine, tyrosine, serine, histidine, tryptophan, proline, hydroxyproline, arginine, ornithine, asparagine, citrulline, aspartic acid, cysteine, glutamic acid, glutamine, lysine, hydroxylysine, N-acetyl-L-cysteine, phenylalanine, trans-4-hydroxy-L-proline, tyrosine, L-aspartyl-L-phenylalanine methylester and a mixture of any of the foregoing.

3. The formulation as defined in claim 1 wherein the medicaments for the combination are selected from the group consisting of ß-2 adrenergic agonists, corticosteroids, anticholinergics, histamine antagonists, non-steroidal antiinflammatory agents and leucotriene modulators.

4. The formulation as defined in claim 3, wherein the stabilizer is selected from the group consisting of glycine glycine, alanine, valine, leucine, isoleucine, methionine, threonine, isovaline, phenylalanine, tyrosine, serine, histidine, tryptophan, proline, hydroxyproline, arginine, ornithine, asparagine, citrulline, aspartic acid, cysteine, glutamic acid, glutamine, lysine, hydroxylysine, N-acetyl-L-cysteine, phenylalanine, trans-4-hydroxy-L-proline, tyrosine, L-aspartyl-L-phenylalanine methylester and a mixture of any of the foregoing

5. The formulation as defined in claim 3 wherein the ß2 adrenergic agonist are albuterol, formoterol or the pharmaceutically acceptable salts, esters, hydrates, solvates or geometric or optical isomers of the foregoing.

6. The formulation as defined in claim 3 wherein the corticosteroides are selected from the group consisting of mometasone, hydrocortisone, fludrocortisone, dexamethasone, prednisone, cortisone, aldosterone hemi-acetal, betametasone, beclomethasone dipropionate, triamcinolone acetonide,

budesonide dipropionate, fluticasone propionate, fluniscolide, the pharmaceutically acceptable salts, esters, hydrates, solvates and geometric or optical isomers of the foregoing and a mixture of any of the foregoing medicaments used.

7. The formulation as defined in claim 3 where the anticholinergics agent is cromolyn and the antiinflammatory agent is acetominophen or ibuprofen.

8. The formulation as defined in claim 3 wherein the leudotriene modulator is selected from the group consisting of [[1-formyl-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-(hydroxycarbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, [1-((2-carboxyethyl)carbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide; [1-((2-tetrazolylethyl)carbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide; [1-(methylphenylcarbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide; [1-(diphenylcarbamoyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide; [1-carbamoyl-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide; and [1-(pyrrolidine-carbonyl)-5-(cyclopentyloxycarbonyl)amino-1H-indol-3-ylmethyl]-3-methoxy-N-o-tolylsulfonylbenzamide, the pharmaceutically acceptable salts of the forgoing, and a mixture of any of the foregoing medicaments.

9. The formulation as defined in claim 1, wherein combination comprises of a corticosteroid and β2-adrenergic agonist;

10. The formulation as defined in claim 1, wherein the combination comprises a corticosteroid and an anticholinergic agent;

11. The formulation as defined in claim 1, wherein the combination comprises of a corticosteroid and a leucotriene modulator;

12. The formulation as defined in claim 1, wherein the combination comprises of a corticosteroid, a β-2 adrenergic agonist and a leucotriene modulator;

13. The formulation as defined in claim 9, wherein the corticosteroid is fluticasone or fluticasone proprionate;

14. The formulation as defined in claim 1 wherein the combination comprises a ß-2 adrenergic agonist and a leucotriene modulator or a ß-2 adrenergic agonist and a anticholinergic.

15. The formulation as defined in claim 1, wherein the combination comprises a histamine antagonist or an antiinflammatory agent.

16. The formulation as defined in claim 1, wherein said propellant is selected from the group consisting of 1,1,1,2-tetrafluoroethane, 1,1,1,2,3,3,3-heptafluoropropane or a mixture thereof.

17 The formulation as defined in claim 4, which further includes a cosolvent.

18. The formulation as defined in claim 17 wherein said cosolvent comprises ethanol.

19. The formulation as defined in claim 2 wherein said stabilizer is present in an amount effective to prevent settling, creaming or flocculation of the formulation for a time sufficient to allow reproducible dosing of the drug after agitation of the formulation.

20. The formulation as defined in claim 19 wherein said stabilizer is present in an amount ranging from about 0.000002% by weight to about 20% by weight based on the weight of the formulation.

21. A method of preparing a medicinal aerosol formulation according to claim 1, which comprises:

(a) combining (i) said combination of medicaments in an amount sufficient to provide a plurality of therapeutically effective doses, (ii) said propellant in an amount sufficient to propel a plurality of said therapeutically effective doses from an aerosol canister; and (iii) said stabilizer in an amount effective to stabilize the formulation; and

(b) dispersing components (i), (ii) and (iii).

22. The method as defined in claim 21 wherein the medicinal aerosol formulation further comprises combining in step (a) a cosolvent and in step (b) dispersing components (i), (ii), (iii) with said cosolvent.

23. A method of treating in an animal a condition capable of treatment by oral or nasal inhalation, which comprises, administering a formulation according to claim 1 to said animal by oral or nasal inhalation.

24. A formulation according to claim 1 in an aerosol canister equipped with a metered dose valve.

25. A method of stabilizing a suspension aerosol formulation comprising a propellant and a combination of at least two different particulate drugs which comprises,

incorporating into the formulation a stabilizer selected from the group consisting of a suitable amino acid, a derivative thereof, or any mixture of the foregoing, in an amount which is effective to prevent settling, creaming, or flocculation of the formulation for a time sufficient to allow reproducible dosing of the drug after agitation of the formulation.

26. A metered dose inhaler containing a medicinal aerosol formulation, the formulation comprising:

(a) a combination of at least two different drugs in particulate form in a therapeutically effective amount;

(b) a propellant; and

(c) a suitable stabilizer selected from an amino acid, an amino acid derivative, or a mixture of the foregoing, present in an amount sufficient to stabilize the formulation to prevent settling, creaming or flocculation for a time sufficient to allow reproducible dosing of the drug after agitation of the formulation.

27. The metered dose inhaler as defined in claim 26 wherein the stabilizer is selected from the group consisting of glycin, glycine, alanine, valine, leucine, isoleucine, methionine, threonine, isovaline, serine, histidine, tryptophan, proline, hydroxyproline, arginine, ornithine, asparagine, citrulline, aspartic acid, cysteine, glutamic acid, glutamine, lysine, hydroxylysine, N-acetyl-L-cysteine, phenylalanine, trans-4-hydroxy-L-proline, tyrosine, L-aspartyl-L-phenylalanine methylester and a mixture of any of the foregoing.

28. The metered dose inhaler as defined in claim 26 wherein said stabilizer is present in an amount of 0.000002% by weight to about 20% by weight based on the weight of the medicinal aerosol formulation.

29. The metered dose inhaler as defined in claim 26, wherein the medicaments for the combination are selected from the group consisting of β-2adrenergic agonists, corticosteroids, anticholorergics, and leucotriene modulators.

30. The metered dose inhaler as defined in claim 26, wherein the propellant is selected from the group consisting of 1,1,1,2-tetrafluoroethane, 1,1,1,2,3,3,3-heptafluoropropane or a mixture thereof.

31. The metered dose inhaler as defined in claim 26, wherein the medicinal aerosol formulation further comprises a cosolvent.

32. The metered dose inhaler as defined in claim 31, wherein said cosolvent comprises ethanol.

INTERNATIONAL SEARCH REPORT

International Application No
PCT/US 00/42624

A. CLASSIFICATION OF SUBJECT MATTER
IPC 7 A61K9/00

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)
IPC 7 A61K

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practical, search terms used)

PAJ, EPO-Internal, CHEM ABS Data

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category °	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	WO 90 09781 A (RORER INTERNATIONAL) 7 September 1990 (1990-09-07) claims 1,7-9 page 5, paragraph 2 - paragraph 4 page 6, paragraph 5 -page 7, paragraph 7 page 28; example 5 ---	1-6,9, 10,14, 17-29, 31,32
X	WO 96 19198 A (ASTRA AKTIEBOLAGET) 27 June 1996 (1996-06-27) claims 1-3,15-21 page 4, paragraph 2 --- -/--	1,3,5,6, 9-14, 16-26, 28-32

[X] Further documents are listed in the continuation of box C.

[X] Patent family members are listed in annex.

° Special categories of cited documents :

"A" document defining the general state of the art which is not considered to be of particular relevance

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"P" document published prior to the international filing date but later than the priority date claimed

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"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone

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"&" document member of the same patent family

Date of the actual completion of the international search	Date of mailing of the international search report
27 September 2001	05/10/2001

Name and mailing address of the ISA	Authorized officer
European Patent Office, P.B. 5818 Patentlaan 2 NL – 2280 HV Rijswijk Tel. (+31–70) 340–2040, Tx. 31 651 epo nl, Fax: (+31–70) 340–3016	Ventura Amat, A

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INTERNATIONAL SEARCH REPORT

International Application No
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C.(Continuation) DOCUMENTS CONSIDERED TO BE RELEVANT

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A	WO 00 16814 A (AEROPHARM TECHNOLOGY INCORPORATED) 30 March 2000 (2000-03-30) the whole document	1-32
T	WO 01 13893 A (ADVANCED INHALATION) 1 March 2001 (2001-03-01) the whole document	1-32

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