

# Pharmacokinetic characteristics and pharmacological profile of polyethylenglicole derivatives of palmitoylethanolamide (PEA)

R. Russo<sup>1</sup>, C. Avagliano<sup>1</sup>, C. Cristiano<sup>1,2</sup>, N.S. Orefice<sup>1</sup>, C. De Caro<sup>1</sup>, G. D'Agostino<sup>1</sup>, G. Mattace Raso<sup>1</sup>, C. Ostacolo, G. La Rana<sup>1</sup>, S. Laneri, A. Sacchi, R. Meli<sup>1</sup>, A. Calignano<sup>1</sup>

<sup>1</sup>Dept. of Pharmacy, University of Naples Federico II, Naples, Italy

<sup>2</sup>Drug Discovery and Development, Istituto Italiano di Tecnologia, via Morego 30, Genova, Italy

N-Palmitoylethanolamide (PEA), the amide of palmitic acid and ethanolamine, has been proposed as an endogenous agonist for peroxisome proliferators-activated receptor-alpha (PPAR-alpha). PEA has been widely studied for its analgesic and anti-inflammatory effects, and its properties have been shown to be dependent on PPAR-alpha expression (Lo Verme 2006). Multiple lines of evidence suggest that PPAR- $\alpha$  receptors and their ligands are important modulators of the inflammatory process and they are involved in modulation of pain (Daynes and Jones, 2002, D'Agostino G, et al., 2009; Sasso et al., 2013). Our recent evidence show that PEA does not elicit anti-inflammatory effects in mutant PPAR- $\alpha$  null mice (PPAR  $\alpha$  -/- mice) (LoVerme et al., 2005). Moreover, when administered in a topical formulation to inflamed mouse skin, PEA inhibits inflammation and induces the expression of PPAR- $\alpha$  mRNA, an effect characteristic of synthetic high-affinity PPAR- $\alpha$  ligands (LoVerme et al., 2005). Pro-drug technologies are commonly employed to improve the membrane permeability or solubility of drugs. The important distinction between analogs and pro-drugs is that the former are biologically active, whereas the latter require *in vivo* modification in order to elicit biological activity. In this study we used PEA and its pro-drugs (PEA -PEG1 and -PEG2), with one and two molecular of polyethylene add to PEA, to determine their efficacy on carrageenan induced paw oedema and hyperalgesia, after local application (patent n° MI2012A002127). In particular, the aim of this study is estimate an improvement of pro-drug efficacy versus reference drug. In fact, PEA -PEG1 and -PEG2, thanks to linkage of polyethylene glycol, is slowly released, evoking a longest effect, and highest skin concentration, respect to PEA. Results showed that carrageenan injection into the mice paw produced both a significant hyperalgesia as determined by a reduction in withdrawal latencies, and paw oedema determined by an increase of paw volume. PEA (1mg/paw), markedly reduced mechanical hyperalgesia and paw oedema; in particular, anti-hyperalgesic and anti-inflammatory effects were observed at 2 and 4 h following application. PEA-PEG1 treatment at equimolecular dose of PEA, showed a significant anti-hyperalgesic and anti-inflammatory activities at 6h until at 72h following local application, while no effect was observed at 2-4h. Similarly, local application of PEA-PEG2 at equimolecular dose of PEA reduced mechanical hyperalgesia and paw oedema at 48 until 96h following local application. Results obtained from *in vivo* experiments were in accordance with data collected from skin accumulation experiments. Collectively, these findings confirm that PEA and their pro-drugs have an anti-inflammatory and anti-hyperalgesic activities, with important difference that PEA has a rapid effect (2-4 h), whereas pro-drugs, following local application, and after 'metabolization', releases slowly PEA, producing an clear and significant effect until to 96h.

## REFERENCES

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