



PREFORMULATING STUDIES ON DEVELOPMENT OF POLYMERIC NANO-PARTICLES TO CURE ULCER

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ABSTRACT

This paper gives the development of controlled drug delivery of lansoprazole for oral route. Nanoparticles controlled drug delivery system will be developed. The nanoparticles containing lansoprazole (PNP7) exhibited a large portion of the ideal characters required for an oral controlled discharge dosage shapes. The nanoparticles (PNP7) of lower particle size (262 ± 23 nm) helped with adversely charged surface charge (-30.1 ± 1.2 mV) has been achieved. The discharge profile demonstrated persistent controlled discharge up to 24 hr.

Keywords: polymeric, nano-particles, ulcer

INTRODUCTION

Advanced drug delivery systems have a greater number of preferences than the conventional delivery system. In a perfect world they may enhance drug strength, controlled drug discharge over to a supported intermittent of time, give more prominent security and decreased lethal impacts. Drugs can likewise be focused to a specific tissue in the human system. Most conventional oral dosage frames, for example, tablets and capsules are formulated to discharge the dynamic drug immediately after oral administration to acquire rapid and finish systemic drug absorption. Such immediate-discharge items result in relatively rapid drug absorption and beginning of going with pharmacodynamic impacts. Be that as it may, after absorption of the drug from the dosage shape is finished, plasma drug concentrations decline as per the drug's pharmacokinetic profile. In the end, plasma drug concentrations fall beneath the base effective plasma concentration (MEC), bringing about loss of helpful movement.

CONTROLLED DRUG DELIVERY SYSTEMS

Controlled delivery can be characterized as Sustained action at a predetermined rate by maintaining a relatively consistent, effective drug level in the body with minimization of undesirable symptoms. Localized drug action by spatial arrangement of a controlled discharge system neighboring or in the sick tissue, Directed drug action by utilizing transporters to convey drug to a specific target cell which provide a physiologically/restoratively based drug discharge system.

PHARMACOKINETIC MODELS

The pharmacokinetic models for controlled discharge incorporates zero request, first request, Higuchi, Korsmeyer-Peppas demonstrate, Hixson Crowell, Baker-Lonsdale, Weibull display. Presently accessible controlled drug delivery systems are floating



tablets, osmotic tablets, grid tablets, colonic discharge, plastic lattices, particle exchange pitch tablets, film covered tablets, enteric covered and delayed discharge tablets, swellable tablets, mucoadhesive tablets, numerous unit tablets, repeat action tablets, floating capsules, microgranules, spheroids, dots, pellets, microcapsules, microspheres and nanoparticles.

NANOPARTICLES

Nano as the name itself suggests that these systems are in nano estimate. Nanotechnology is a wide field which includes assortment of applications including drug delivery, medical diagnostics and so on. These systems have some impossible to miss properties, for example, expanded surface region, specific focusing on, optical properties and less lethality when contrasted with different systems. In 1974, Norio Taniguchi utilized the term nanotechnology at first time. Nano systems give an effective method for drug delivery especially for chronic treatment the board. In nano systems, nanoparticles are of one kind which conveys the drug in systematic way. Nanoparticles are little colloidal particles which are made of biodegradable as well as non-biodegradable polymers in which the drug is ensnared, dissolved, scattered or encapsulated to a polymeric framework. Normally the molecule measure ranges from 1 to 1000nm.

LITERATURE REVIEW

Shimizu T et al., (2003) designed lansoprazole quick crumbling tablets (LFDT) consisted of enteric-covered microgranules and idle granules.⁶⁹ In the design of the idle granules, mannitol was utilized as an essential excipient. Microcrystalline cellulose, low-substituted hydroxypropyl cellulose (L-HPC), and crospovidone were utilized as binders and

disintegrants. Another review of LHPC (L-HPC-33), with a hydroxypropoxy amass content of 5.0-6.9%, was developed and it has no unpleasant texture because of a lessening in water absorption. It was clarified that L-HPC33 could be helpful as a binder and disintegrant in rapidly deteriorating tablets. LFDT contain enteric-covered microgranules in 24 tablet shape.

The 47.4% content of the enteric-covered microgranules was chosen to give adequate tensile strength, rapid breaking down time in the mouth, and dissolution conduct in the corrosive stage and buffer stage like current lansoprazole capsules.

Pressure constrain influenced the tensile strength and the crumbling time in the mouth, however did not influence the dissolution conduct in the corrosive and buffer stages Iwasaki K et al., (2004) developed quick crumbling lansoprazole tablet (LFDT) as a various unit formulation and assessed utilizing human subjects when contrasted with the conventional lansoprazole (LPZ) case containing enteric covered granules.⁷² Twelve sound male volunteers, who were confirmed as extensive metabolizers were enlisted into the investigation and genotype of CYP2C19 was confirmed.

They kept 30 mg LFDT in their mouths for 2 min and the salivation was recouped without swallow. Eight subjects did not indicate LPZ in their serum after admission. Despite the fact that LPZ was recognized in 4 subjects' serum, their concentrations were under 5 ng/mL. LPZ was believed to be not absorbed from the oral cavity. From these outcomes, LFDT has been appeared to be equivalent to LPZ case demonstrated similar corrosive smothering impacts in the clinical circumstance.



Baldi F (2005) reformulated lansoprazole orodispersible tablet (LODT) that rapidly breaks down in the mouth without water. In sound grown-ups the security and 26 bioavailability of LODT 15-30 mg, taken without water or scattered in water, were observed to be tantamount with those of lansoprazole 15-30 mg capsules. Also, the bioavailability of LODT managed without water has been observed to be like that of water-scattered LODT given by means of a nasogastric tube. Taking everything into account, LODT is effective, bioequivalent to the container formulation and satisfactory to patients.

Raffin RP et al., (2007) formulated pantoprazole-stacked microparticles by shower drying utilizing a mix of Eudragit S100 and HPMC, which can give 27 gastro-obstruction and controlled discharge. Microparticles introduced worthy drug stacking, epitome productivity, surface territory and particle size. DSC investigations demonstrated that the drug is molecularly scattered in the microparticles, and in vivo hostile to ulcer assessment exhibited that microparticles were effective in protecting stomach against ulceration.

Microparticles were effectively tableted utilizing magnesium stearate. In vitro gastro-opposition consider demonstrated that microparticles balanced out pantoprazole in 62.0% and tablets in 97.5% and gave a controlled arrival of the drug. Sherje AP et al., (2008) developed two straightforward, exact and exact spectrophotometric strategies for synchronous determination of lansoprazole and domperidone in pharmaceutical dosage frame. Strategy A includes arrangement of Q-absorbance condition at 256.0 nm (isoabsorptive point) and at 294.2 nm while technique B is two wavelength strategy where 277.6 nm, 302.1 nm were chosen as lambda(1) and lambda(2) for determination of lansoprazole and 231.3 nm, 292.0 nm were

chosen as lambda(1) and lambda(2) for determination of domperidone. Linearity of lansoprazole and domperidone were in the scope of 24-36 mug/ml and 8-12 mug/ml, separately. The proposed strategies have been connected effectively to the analysis of the referred to drugs either in unadulterated shape or in pharmaceutical formulations with great accuracy and exactness.

Ramteke S et al., (2008) arranged the oral mucoadhesive sustained discharge nanoparticles of clarithromycin and omeprazole with the end goal to enhance persistent consistence by improving its helpful impact and diminishing its portion related reactions. The clarithromycin and omeprazole containing gliadin nanoparticles were set up by the desolvation strategy utilizing Pluronic F-68 as a balancing out operator.

The outcomes demonstrated that this strategy is reproducible, simple, and prompts the proficient entrapment of drug and development of circular particles going from 400 to 650 nm. In vitro antibacterial action of the formulations was performed on detached culture of *Helicobacter pylori*, which indicated more noteworthy.

CHARACTERIZATION OF NANOPARTICLES

Particle Size: The size of the nanoparticle influences both in vitro and in vivo characters. So it is mandatory to achieve the required nano size. The size can be measured by photon connection spectroscopy, laser diffraction, coulter counter. The state of a particle can be imagined by atomic power microscopy.

Change in particle size may prompt stability issues. **Particle Morphology:** Morphology of the particle can be contemplated by scanning electron microscopy, transmission electron

microscopy or by atomic power microscopy (AFM). By AFM, high goals 10 pictures can be acquired. Crystallinity and polymorphic investigations can be performed by utilizing x-beam diffraction.

Zeta Potential: This parameter straightforwardly identifies with the stability of the item. Increased particle size, particle-particle collection can be maintained a strategic distance from by high zeta potential nanoparticles. Zeta potential can be measured by zeta sizer. Drug and stabilizers utilized in the plan may have an abundant impact in the zeta potential qualities. At the point when zeta potential esteem increments, at last the particle surface charges expands, which results in stable planning. To keep up the increased zeta potentials, stabilizers are utilized.

Entrapment Efficiency: This parameter gives data about the entrapment of drug in the polymer. Entrapment effectiveness gives significant data about the sort and measure of bearer to be utilized for specific drug. It relies upon drug solubility, polymer structure, molecular weight and drug polymer interaction.

Drug Release: Nanoparticles concept additionally developed to comprehend the poor solubility issues of a drug. The solubility can be increased by reduced particle size. So it is vital to achieve the dissolution of required measure of drug to the objective site. In the event that a nanoparticle is designed for controlled impact, the discharge ought to be achieved in controlled way at the systemic site.

This can be achieved by covering a polymer or by some different mechanisms. The drug discharge can be dictated by dissolution, dispersion or ultracentrifugation.

Ulcers are characterized as a particular break in the mucosa of the alimentary tract that stretches out through the muscularis mucosa into the submucosa or more profound. Ulcers are to be recognized from disintegrations, in which there is epithelial disruption inside the mucosa however no rupture of muscularis mucosa. Peptic ulcers are chronic, sores equivalent or more noteworthy than 0.5cm that happens in any portion of the gastrointestinal tract exposed to the aggressive action of peptic juices/corrosive. Generally peptic ulcer happens in duodenum or stomach.

eradication impact of double treatment entrapped formulations when contrasted and single treatment containing formulations and plain drugs. Zhang W et al., (2009) characterized the plasma gastrin (PG) profile related with administration of dexlansoprazole MR. Forty-two solid subjects get dexlansoprazole MR 90 mg, dexlansoprazole MR 120 mg, and lansoprazole 30 mg once day by day for 5 days in a randomized, open-mark, 3-period hybrid investigation with no less than 14-day washout interims.

Twenty-four-hour PG profiles were acquired at gauge (day - 1 of period 1) and on days 1 and 5 in every period. Fasting PG levels were resolved on days 8 and 12 in periods 1 and 2. On day 1, 24-hour PG levels increment from standard to a comparative degree with all regimens. On day 5, 24-hour PG levels with both dexlansoprazole MR regimens increment further and to a comparative degree and are somewhat higher than PG levels with lansoprazole. For all regimens, fasting PG levels on days 5 and 6 are higher than standard dimensions (P of MLX ($P < 0.01$) when contrasted with that of MLX suspension. The higher calming impact was maintained for a more extended span (6 h).

ULCER AND ANTI-ULCER DRUGS



The polymeric nanoparticles additionally brought about less ulcerogenicity when contrasted with that of MLX suspension. Zhonghua Yu et al., (2012) arranged and built up the impact of titanium dioxide nanoparticles on hemogram in rodents with gastric ulcer. Twenty-four clear class SD male rodents, maturing multi week-old, were randomly isolated into 4 gatherings, 6 rodents for each gathering. 20% acidic corrosive was injected into the rodents' stomach on the outskirts of gastric body and pyloric antrum.

The rodents in 4 bunches were exposed to nanoparticles through intragastric administration at 0, 10, 50 and 200 mg/kg body weight separately for 30 days. Thereafter, the rodents were directed blood routine test and blood coagulation test for analysis. The long haul admission of TiO nanoparticles caused a factually increment in the measure of WBC and RBC in rodents with gastric ulcer; be that as it may, there was no conspicuous changes found in blood platelet and coagulation file.

Abdelwahab S et al., (2013) arranged TQNLCs utilizing hydrogenated palm oil, olive oil, and phosphatidylcholine for the lipid stage and sorbitol, polysorbate 80, thimerosal, and twofold refined water for the fluid lipid material. A morphological appraisal of TQNLCs was performed utilizing different strategies. Analysis of the ulcer file, hydrogen concentration, bodily fluid content, and biochemical and histochemical considers confirmed that the stacking of TQ into the NLCs significantly enhanced the gastroprotective movement of this characteristic compound against the development of ethanol-incited ulcers.

Alai M et al., (2014) considered the mix of nanoparticle design and enteric covering procedure to support the delivery of

lansoprazole (LPZ), in the treatment of indigestion issue. Lansoprazolestacked Eudragit RS100 nanoparticles (ERSNP-LPZ) and in addition poly(lactic-co-glycolic corrosive) (PLGA) nanoparticles (PLGANP-LPZ) were readied utilizing a dissolvable dissipation/extraction technique. The confocal minute pictures uncovered the fruitful confinement of nanoparticles in the cytoplasm of Caco-2 cells.

The cell take-up of emphatically charged Eudragit nanoparticles was significantly higher than that of contrarily charged PLGA nanoparticles, which were enhanced by sodium caprate by means of the transcellular pathway. The two kinds of nanoparticles displayed sustained drug discharge conduct in vitro.

The oral administration of enteric-covered capsules loaded up with nanoparticles sustained and prolonged the LPZ concentration up to 24 h in ulcer-prompted wistar rodents, and 92.4% and 89.2% of gastric ulcers mended following a 7-day treatment with either EC-ERSNP1010-Na caprate or ECPLGANP1005-Na caprate, separately.

CONCLUSION

Controlled discharge nanoparticles exhibited the ideal characters including in vitro and in vivo contemplates. The creature thinks about uncovered enhanced enemy of ulcer action with reduced reactions. They chose formulation (PNP7) will be observed to be stable. Consequently it very well may be inferred that the recently developed oral controlled drug delivery system - nanoparticles of lansoprazole is viewed as ideal and effective in the administration of ulcer and related conditions. The examination work exhibited the capability of the controlled drug



delivery system as nanoparticles of lansoprazole, though the dosage shape can fill in as an effective delivery system for different drugs with comparative characters.

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