

RESEARCH ARTICLE

PREPARATION AND *IN-VITRO* ASSESSMENT OF TOLBUTAMIDE LOADED NANOSPONGES

Vaishnav S.G.*, Vaishnav G.A., Joshi A.S., Girbane Y.R. Received: 30 November 2021/ Accepted in revised form: 28 December 2021 / Published online: 02 March 2022

Abstract:

In this research, we have used polyethylene to characterise and produce nanosponges tolbutamide formulations (polyoral caprolactone). For decades, efficient targeted pharmaceutical distribution technologies have been a pipe dream. Nanosponges drug delivery technology has emerged as one of the most promising new medication delivery methods. Nanosponges drug delivery technology has recently become a significant advancement in various biopharmaceutical overcoming challenges. Before it reaches the precise target surface, the Nanosponges target the medicine in the body's systemic circulation and begin to release the drug in a controlled and consistent way. A broad range of drug molecules have been filled with hydrophilic and lipophilic drug material in Nanosponges medicine release devices. As a result, the Nanosponges are a suitable target carrier molecule. The medicine may be given at a specific place in the Nanosponges approach, preventing the drug from destroying proteins and extending drug release in a predictable manner. According to the FTIR and DSC investigations, there was no significant association between the medication and the excipients. In nanoscale ranges, prepared nanoparticles having spherical shape have been found to be resilient. The rubber's surface, which has an explosive effect and indicates that action is about to begin, exposes free material particles. Drug release studies indicate that drugs will continue to be released into the polymeric matrix. The tolbutamide-loaded nano-carrying unit was absorbed with continuous drug release patterns in this study, demonstrating the effectiveness of increased solubility.

Key words: Tolbutamide, FTIR, SEM, dissolution, ethyl cellulose, Dichloromethane, PVA, In-Vitro drug release.

Correspondent author: Dr. Sushama G.Vaishnav (Hota)

Department of Pharmaceutical Chemistry,

Yash Institute of Pharmacy, Aurangabad (Maharashtra) India. 431136.

Email- sushamavaishnav@gmail.com

All rights reserved to IJRMPS

Available online at: <u>www.ijrmps.com</u>

Introduction:

Tolbutamide is a hypoglycaemic drug that promotes insulin production by acting primarily on B cells. On the KATP channel in plasma Bcell membranes, high-affinity tolbutamide present, and tolbutamide receptors are counterparts are attached to trigger insulin release. [1-2]. The drugs work by inhibiting the KATP channel, which is responsible for polarisation, Ca2+ entry, and insulin production in B cells. It is a water-soluble medicine with a 6-12 hour working duration. The medication's pharmacokinetic aspect is that part of the tolbutamide and carboxylate concentrations are converted to inactive molecules in the liver and are normally eliminated by the kidneys. The quantity and frequency with which each solid dosage form is taken is determined by the degree of dissolution and duration of the medicine. Dissolution is a limiting factor in the absorption process, especially for medications with an aqueous solubility of less than 0.1 mg/ml or for pharmaceuticals that are poorly or insoluble in water [10]. Insufficient or intermittent G.I.T. is used to take these somewhat insoluble medications. Micro-crystalline or molecular dispersion is used to create a stable dispersion of a low-water-solution medicinal ingredient in a solid transport matrix. Tolbutamide is a kind of aryl sulfonylurea drug that is often used to treat type 2 diabetes [3]. It belongs to the first generation of anti-diabetic drugs and has a great hypoglycaemic effect [4]. Insulin is induced by tolbutamide stimulation of pancreatic -cells. The drug is a dissolution-limited oral hyperglycaemic and belongs to BCS class II. Traditional dose versions of this medicine are often encountered, and they have a variety of adverse effects and limits. Limited availability to conventional pharmaceutical formulations at the sought place of service, numerous medicating for chronic treatments, and so on are some of the connected difficulties. [5]. Nanodrug delivery is therefore a highly effective technique to boost the potency of tolbutamide and is meant to improve bioavailability by improving water solubility and absorption at the point of administration. Nanomedicine creates individualised treatment plans that protect the body by destroying dangerous substances. Advances in nanotechnology have resulted in the development of a variety of nano-specific materials, such as nanoparticles and nanosponges, among other things.[6]These nano formulations are a practical and typical technique to increase absorption by lowering the particle size of drugs, especially when bioavailability and potentially harmful side effects are low. [7]

Material and methods:

Materials: Chemicals and pharmaceuticals with quantum properties Tolbutamide is used to make Tamilnadu. Sigma-Aldrich has developed a polymer (tal-caprolactone). Nanosponges were prepared and identified using deionized water.

Methods: The stock solution of tolbutamide was generated using the correct solution of 100 mg Tolbutamide in 10 ml of filtered water, and the amount was then adjusted to 100 ml in the same solution.

Working: With filtered water, the standard resolution of a prescription was decreased to 2 - 10 g of drug per ml. With a dual U.V. beam and a white-water distillation max of 284 nm, the diluted solvent absorbance was estimated. After that, the spectrometer was employed. The average of three readings was calculated and a table was created. Solubility analysis. Tolbutamide solubility was determined in pure water using a variety of buffers, including pH 2.5,

pH 7.5, pH 8.0, and pH 9.0. Readings in triplicate and average have been taken.[9]

Solubility studies: Tolbutamide buffers have been detected in filtered water at pH 2.5, pH 7.5, pH 8.0, and pH 9.0. There have been average and quadruple readings obtained.

Preparation of Nanosponges by solvent evaporation method: The solvent evaporation technique 11, 12 yielded five sets of Nanosponges with different ethyl cellulose and polyvinyl alcohol contents. The dispersion stage, consisting of tolbutamide and the required amount of ethyl cellulose liquified in 10 ml of solvent (dichloromethane or ethnol), was slowly added to a given volume of PVA 100 ml aquaculturally, using a microwave oven. Filter paper is used to collect established Nanosponges, which are then dried in a 50°C oven for 2 hours. The vaccine desiccator has been used to hold nanosponges to ensure that dissolution is prevented. [11]

Solvent Evaporation Method: Different quantities of ethylcellulose were employed to make nanosponges, with solvent evaporation methods utilised to delay polymers and copolymers such polyvinyl alcohol and cyclodextrins. A dysphate phase consisted of tolbutamide (1 gm) or the appropriate amount of ethyl cellulose dissolved in 10 ml of solvent was slowly added to a dysphate phase made of tolbutamide (1 gm) or the required amount of ethyl cellulose dissolved in 10 ml of solvent. For three hours, the reaction mixture was stirred in a magnetic agitator at 1000 rpm. Whatman filter paper was used to purify the Nanosponges, which were then dried in a 50°C oven for 2 hours. Dry Nanosponges were placed in a vacuum drier to ensure that any remaining solvent was removed. [12]

Drug - Excipient Compatibility Study: Potassium and polymer are combined and processed in a 1:1 ratio in glass bottles. At 40 percent and 75 percent HR, the glass vials were screened and installed in the stabilisation chamber for one month. FT-IR, polymer, and physical drug combinations and polymers have all been used to produce and test tolbutamide peaks. All samples' spectra were obtained on a scale of 4000- 4000 hundred cm-1. [13]

Sr N 0.	Materials	TF1	TF 2	TF 3	TF 4	TF 5
1	Tolbutamide (gm)	0.25	0.2 5	0.2 5	0.2 5	0.2 5
2	Ethylcellulo se (gm)	0.5	0.7 5	1	1.2 5	1.5
3	Dichloromet hane (ml)	20	20	20	20	20
4	β- cyclodextrin (gm)	0.5	0.5	0.5	0.5	0.5
5	Water	50	50	50	50	50

 Table 1: Formation of tolbutamide loaded nanosponges.

Evaluation of nanosponges:

The nanosponges made for the following tasks were assessed:

- a. Scan electron microscopy characterization
- b. Studies of in vitro dissolution
- c. Performance of drug Enrapping

d. Size and form of particles (Zeta sizer)

Drug Entrapment **Efficiency:** The determination spectrophotometric of the compound entanglement efficacy of the produced nanosponges. A modest quantity of ethyl acetate (10 mg/100 ml) was dissolved and deposited in tolbutamide nanoparticles for 12 hours (10 mg). The 1 ml beverage was drunk and diluted into 10 ml using a phosphate buffer pH of 7, 4 and a UV-Visible spectrophotometer calibrated at 258 nm. The medication Entrapment was tested using equation 1 to see how effective it was (percent).[15]

 $Drug Entrapment efficiency (\%) = \frac{Amount of Tolbutamide in nanoparticle \times 100}{Amount of Tolbutamide in formulation} \dots$

Scanning electron microscopy: SEM was used to identify the moral properties of the produced Nanosponges at various magnifications.

Particle size and shape: For the standard size of the particles and the shape of the created nanosponges, the Malvern Zeta sizer ZS was utilised as a dispersion medium. To determine the particle size, the sample was scanned 100 times. [18]

Drug Percentage Studies using In-Vitro: Triplicate in vitro release studies were carried out using a USP Paddle at 100 rpm and 900 ml phosphate buffer at 370.2oC. (pH 6.8). Each experiment utilises 100 mg of nanoparticles that have been manufactured. Samples were taken every five minutes for the first hour and a half hour for the following three hours, up to six hours in an hour, and finally for the twelfth hour at normal intervals. Calculated spectrophotometrically at 284nm. A new dissolving medium has been replenished to compensate for the quantity of sample removed.[8]

Solubility studies:

Distilled water, acidic and alkaline pH buffers have all been tested for tolbutamide solubility. Purified water (100 mg/10 ml), gasoline (0.395 mg/ml), and dichloromethane (100 mg/10 ml).

Result and Discussion:-

A) Particle size examination of nanosponges:

The particle size of the nanosponges was estimated using optical microscopy, and the nanosponges were confirmed to be normal. The particle sizes of both preparations range from 265.9 to 522.8 nm on average. However, it was discovered that the particle size reduced when the drug to polymer ratio was improved by increasing the polymer concentration, but only after a specific concentration. This might be because the amount of polymer available per nanosponge was somewhat restricted with a high drug-to-polymer ratio. In big drug/polymer ratios, maybe less polymer is present across the drug, and the thickness of the wall and smaller nanosponges has been lowered. The particle size formulations vary with the polymer drug ratio concentration, as determined by particle size evaluation.

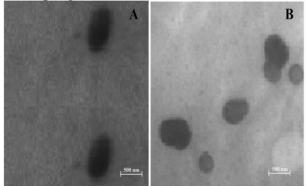
Table 2: Partic	le size of	inanosponges:
-----------------	------------	---------------

S.No.	Formulation code	Particle size (nm)
1	TF1	522.8
2	TF2	419.7
3	TF3	388.7
4	TF4	345.8
5	TF5	265.9

B) Morphology determination by scanning electron microscopy (SEM):

The nanosponges were found to be spherical and homogeneous, with no visible pharmaceutical crystals on the surface.

Figure 2: SEM Analysis photographs of Nanosponges:



The surface and surface of the spherical nanosponges per unit weight are affected by the form of the nanosponges. The dissolving rate may be influenced by the unique shape of particles in the dissolution environment. **Figure. 3: FTIR spectra of tolbutamide:**

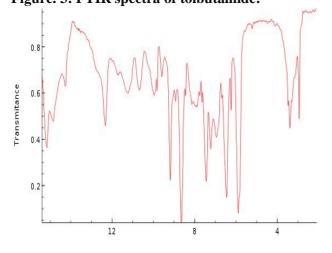


Figure. 4: FTIR spectra of ethyl cellulose:

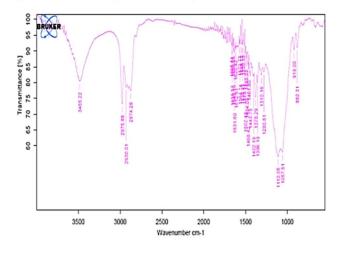


Figure. 5: FTIR spectra of β cyclodextrin:

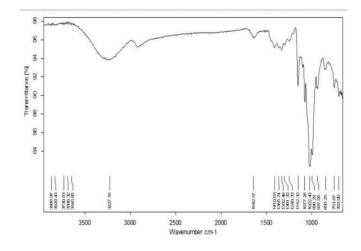
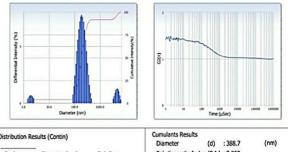
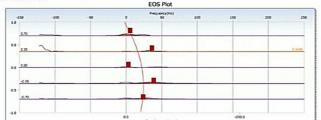


Figure 6: Representation of Zeta Sizer:



Distribution K	esuits (contin)		Diameter	(d) :	388.7	(nm)
Peak	Diameter (nm)	Std. Dev.	Polydispersity Index ((P.I.) :	0.250	
1 2	1.9 210.6	0.3 78.4	Diffusion Const. (Molecular Weight		1.269e-008 6.213e+009	(cm ² /sec)
3	4,994.0	926.9	Measurement Conditio	n		
4	0.0	0.0	Temperature	:	25.1	(°C)
5	0.0	0.0	Diluent Name	:	WATER	
Average	584.0	1,328.1	Refractive Index		1.3328	
			Viscosity	:	0.8858	(cP)
Residual :	4.480e-002	(N.G)	Scattering Intensity Attenuator 1		16430 33.91	(cps) (%)

Figure 7: Graph of Zeta sizer of TF3



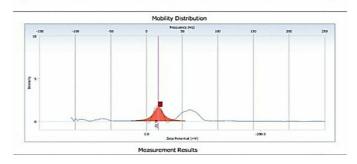


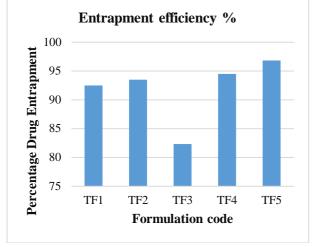
 Table 3: Drug content of Formulated nanosponges:

Formulation code	Mean % drug content		
TF1	92.2		
TF2	94.2		
TF3	92.5		
TF4	92.8		
TF5	95.2		

Table4: Entrapment efficiency of batches TF1 TF5:

Formulation code	Entrapment efficiency %
TF1	91.5
TF2	92.5
TF3	81.3
TF4	93.5
TF5	95.8

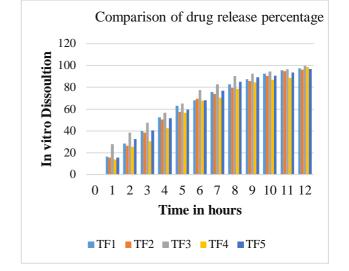




nanosponges:	

TIME					
(HRS)	TF1	TF2	TF3	TF4	TF5
0	0	0	0	0	0
1	16.5	15.5	27.8	13.65	15.5
2	28.5	26.5	38.5	25.5	32.5
3	39.9	38.5	47.5	30.6	40.5
4	52.6	50.5	56.5	42.6	51.5
5	63	57.5	65.2	56.5	59.57
6	68	69.5	77.6	67.9	68.09
7	75.6	73.9	82.6	70.5	76.89
8	82.6	79.5	90.5	78.5	85.06
9	87.4	85.6	92.5	84.5	89.06
10	92.5	90.5	94.6	86.9	90.80
11	95.7	94.9	96.6	88.5	93.7
12	97.5	96.1	99.8	98.5	96.8

Figure 9: In vitro drug Release percentage



Conclusion

Nanosponges were produced and evaluated utilising a solvent evaporation approach, providing a number of key outcomes for the effective creation of nanosponges. TF3 outperforms eight other formulations in terms of production. Both are within an optimised range for the production of a continuous release dose sort, and are considered an optimised formulation in this project. TF3 has a particle size of 388.7 nm and a trapping quality of 82.30. The drug content of 93.5 percent represents 99.8% of the medication that was supplied. This research resulted in the long-term release of primed nanosponges containing anti-diabetic tolbutamide. The final load (TF3) is thought to have the finest stuck nanosponges (99.8%) of all the formulations tested (TF1 through TF5). The nanosponges were created once the SEM characterization was completed.

References:

- [1] Piero MN, Nzaro GM and Njagi JM: Diabetes mellitus – a devastating metabolic disorder. Asian Journal of Biomedical and Pharmaceutical Sciences 2014; 4(40): 1-7.
- [2] Kumar KN, Katkuri S and Ramyacharitha I: A study to assess prevalence of diabetes mellitus and its associated risk factors among adult residents of rural Khammam. International Journal of Community Medicine and Public Health 2018; 5(4): 1360-65.
- [3] Nyenwe EA, Jerkins TW, Guillermo EU and Abbas EK: Management of type 2 diabetes: evolving strategies for the treatment of

patients with type 2 diabetes. Metabolism: clinical and experimental 2011; 60(1): 1-23.

- [4] Susan CW, Roberta B, Nash A and Noe P: Discovering successful strategies for diabetic self-management: a qualitative comparative study. BMJ Open Diabetes Research & Care 2017; 5: e000349.
- [5] Smith A and Harris C: Type 1 Diabetes: Management Strategies. American Family Physician 2018; 98(3): 154-62.
- [6] Eva Harth. Nanomedicine: Development of "Nanosponges" as superior sustain delivery systems of diverse biological cargos, Department of Chemistry, Vanderbilt University, USA, 2011.
- [7] Roberta C, Francesco T, Wander T. Cyclodextrin based Nanosponges for drug delivery, J inclphenom Macrocycl Chem, 2006; 56: 209-213.
- [8] Khalid A A, Pradeep R V, Francesco T, Roberta C. Cyclodextrin dextrin - based nanosponges for delivery of Resveratol: In vitro characterization, stability, cytotoxicity and permeation study, AAPS Pharm Sci Tech, 2011; 12(1): 279-286.
- Renuka S. Kamala P. Polymeric [9] Nanosponges as an alternative carrier for improved retention of Econazole nitrate onto the skin through topical hydrogel formulation, Department of Pharmaceutics, Rajiv Academy for Pharmacy, Mathura, UP, 2011; 16(4): 367-376.
- [10] Torne S J, Ansari K A, Vavia P R, Trotta F, Cavalli R. Enhanced oral Paclitaxe loaded Nanosponges, Drug delivery, 2010; 17(6): 419-425.
- [11] Isabelle A, Christine V, Helene C, Elias F, Patrick C. Sponge like alginate nanoparticles as a new potential system for the delivery of Antisense Oligonucleotides, Anti sense and Nucleic acid Drug Development, 1999; 9(3): 301-312.
- [12] David F. Nanosponge drug delivery system more effective than direct injection, www.physorg.com, 2011.
- [13] Renuka S, Roderick B W, Kamala P. Evaluation of the kinetics and mechanism of drug release from Econazole Nitrate Nanosponge loaded carbopol hydrogel,

Indian Journal of Pharmaceutical Education and Research, 2011; 45(1): 25-31.

- [14] De Quan L, Min M. Nanosponges for water purification, Clean products and processes, 2000; 2: 112-116.
- [15] Selvamuthukumar S, Anandam S, Kannan Krishnamoorthy, Manavalan Rajappan. Nanosponges: A Novel class of delivery system - Review, J Pharm Pharmaceut Sci, 2012; 15(1): 111, 103-109.
- [16] Frances Separovic. Nanosponges for Targeted cancer treatment: The Promises of Nanotechnology, Elizabeth Mudroch Theatre, University of Melbourne, 2011.
- [17] Mallikarjuna Gouda M, Somashekar Shyale, Putta Rajesh Kumar and Shanta Kumar S M. Physico-chemical characterization, UV spectrophotometric analytical method development and validation studies of Rabeprazole Sodium, J. Chem. Pharm. Res, 2010; 2(3): 187-192.
- [18] Lala Rita. Current trends in β- Cyclodextrin based drug delivery systems, IJRAP, 2011; 2(5): 1520-1526.
- [19] Selvamuthukumar Subramanian, Anandam Singiredd, Kannan Krishnamoorthy and Manavalan Rajappan, Nanosponges: A Novel drug delivery system-Review, J Pharm Pharmaceut Sci (www.cspsCanada.org), 2012; 15(1): 103-111.