

Review Paper:

Preparation methods and applications of Lipid-based nanosomes for advancement in the field of Pharmaceutical Biotechnology: A review and outlook on future

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Abstract

Nano-sized vesicles composed of a phospholipid bilayer encapsulating an aqueous core called Liposomes, have garnered substantial attention in pharmaceutical biotechnology for their capacity to safeguard and enhance drug and bioactive molecule delivery. This review presents an overview of liposome preparation methods and their applications in disease and gene therapy. Liposomes serve as drug delivery vehicles in cancer, cardiovascular and infectious diseases. In cancer therapy, they precisely transport chemotherapeutic agents to tumors, minimizing systemic toxicity. For cardiovascular diseases, liposomes ferry nitric oxide and antioxidants, ameliorating vascular function and reducing oxidative stress. In gene therapy, liposomes ferry nucleic acids (DNA, RNA) to modulate gene expression. Targeting ligands like antibodies or peptides further tailored liposomes for specific cell or tissue delivery.

With implications in diverse medical fields, particularly disease and gene therapy, liposomes are versatile drug delivery systems. Their pharmacokinetic and pharmacodynamic properties are shaped by preparation methods and composition. Advances have yielded more stable and targeted liposomes. However, further exploration is required to fully harness their potential, to ensure safer therapies and to tackle varied diseases. In conclusion, liposomes hold promise in pharmaceutical applications, efficiently delivering drugs and addressing therapeutic challenges. Continued research will unlock their potential, revolutionizing patient care and medical practices.

Keywords: Liposomes, targeted drug delivery, diseases.

Introduction

In recent decades, conventional methods of drug delivery have shown limitations in terms of effectiveness due to characteristics such as large size, restricted surface area and shape of the drugs. These methods face challenges in achieving *in vivo* stability at the target site, poor availability,

solubility, absorption by cells, immune response, therapeutic effectiveness and potential adverse effects. To overcome these challenges, novel drug delivery systems, notably those using nanotechnology, have emerged as promising solutions. Among these systems, nanosomes have gained significance in the area of therapeutic and diagnostic agents.

Vesicular drug delivery mechanisms are made up of self-assembling amphiphilic building blocks comprising of one or more concentric bilayers. They perform a key role in targeting drugs to specific organs or sites while reducing undesired side effects. Liposomes, for instance, are simple spherical vesicles made up of a phospholipid layer surrounding an aqueous volume. Their size ranges from 20nm to several nanometers, making them ideal as drug delivery vehicles for pharmaceutical drugs including anti-viral vaccines, mRNA and phytoconstituents. Liposomes come in different categories such as small unilamellar vesicles, large unilamellar vesicles, multilamellar vesicles and gigantic unilamellar vesicles.

Ethosomes, on the other hand, are hydroalcoholic nonvesicular phospholipid systems containing phospholipids, ethanol and isopropanol. They act as vehicles for dermal and transdermal delivery of bioactive molecules, providing enhanced skin penetration. Phytosomes, closely related to liposomes, are phospholipid complexes of drug delivery systems. They consist of a complex mixture of active ingredients derived from herbal sources, surrounded by phospholipids.

Various novel methods, deviating slightly from conventional techniques, have been employed for making nanosomes. Examples include lipid film hydration, microfluidics, bubble method, freeze drying, detergent removal method (to remove non-encapsulated material) and mechanical dispersion method. Nanosomes can be carried via various routes such as intravenous, oral, intramuscular, nasal and transdermal, leading to differences in pharmacodynamics, pharmacokinetics and bioavailability. Liposomes, with their complex yet simple structure, can be negatively or positively charged, protecting DNA from degradative processes. Novel liposomal delivery methods have been introduced to carry large amounts of DNA, potentially as big as a chromosome. These genes loaded liposomes can be directed to specified cells or tissues.

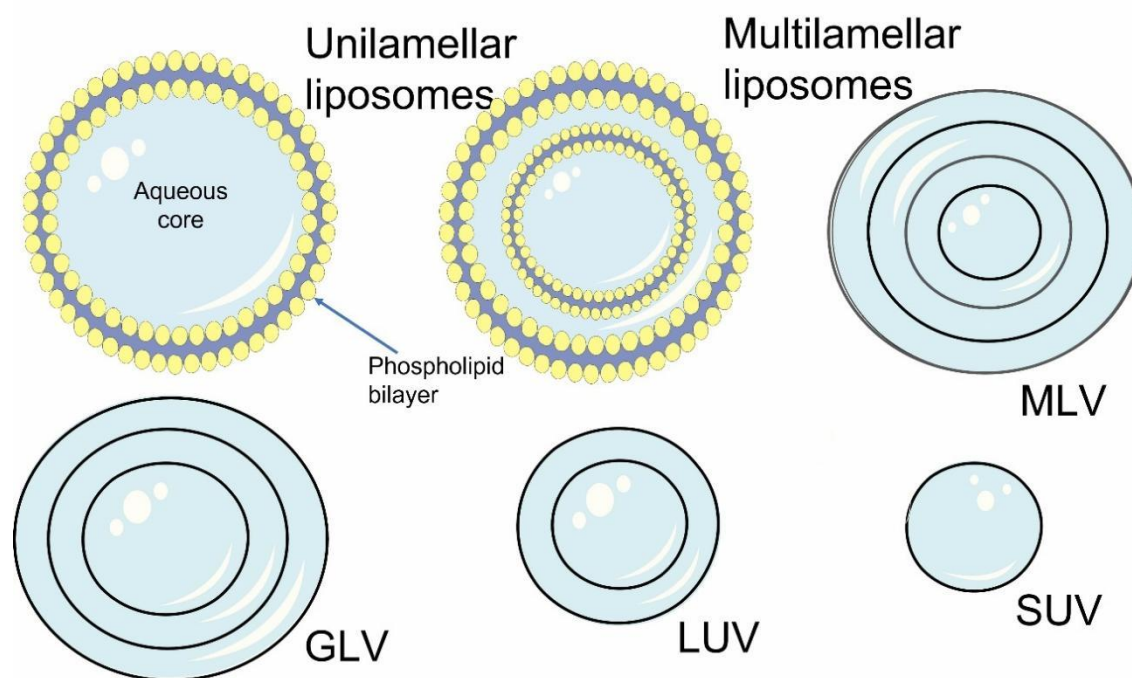


Figure 1: Types of liposomes

Liposomes, as drug delivery systems, provide advantages including improved pharmacodynamics, pharmacokinetics, reduced toxicity, enhanced therapeutic efficacy against bacteria and advanced drug-target selectivity. Current liposomal formulations span a range of applications, from clinical use to the development of multifunctional liposomal systems for treatment and diagnostics. Recent research has made significant progress in liposomal systems with enhanced drug delivery potential for cancer treatment. This includes different types of liposomal preparations such as liposomes, niosomes, ethosomes, aquasomes and phytosomes. Additionally, the various preparation methods, biological properties and recent trends in liposomes are discussed.

Nanosomes preparation methods: Nanosomes, which are nanosized particles with small and uniform dimensions, offer advanced properties compared to conventional drugs. Their large surface-to-area ratio makes them highly desirable in pharmaceutical industries, as they can enhance drug efficacy and availability. Nanosomes find applications across a wide range of diseases, where drugs are administered in nanosome form. To achieve optimal results, the preparation methods of nanosomes vary depending on factors like route of administration, desired size and encapsulation efficiency. Industries employ diverse techniques to improve production speed, to increase quantity and to reduce production costs. This review discusses on several types of nanosomes including liposomes, aquasomes, niosomes and ethosomes and provides an in-depth discussion of their respective preparation methods.

Liposomes preparation method: The bupivacaine multivesicular liposomes were prepared using a series of

steps including 1st emulsification, 2nd emulsification, solvent removal and centrifugation⁶⁵. A methanol solvent phase was prepared for the High Gravity Rotating Packed Bed (RPB) technique by mixing EPC and cholesterol at the mass proportion of 3:1 with phosphate-buffer saline at acid-base balance of 7.4. Simultaneously, an aqueous phase was produced. Both phases were injected separately into the RPB through separate inlets while the temperature was maintained by circulating water in the tank's jackets. The aqueous phase exhibited flow rates from 20 to 300 ml/min whereas the solvent part exhibited a steady flow rate of 20 ml/min. The outcome liposome suspension with a concentration of 1+0.5 mg/ml was sourced from the RPB outflow and subsequently clarified against pH 7.4 to remove residues⁵³.

The Super Lip method utilizes supercritical technology for lab-scale production of liposomes. The process involves the creation of a water phase containing tween 80 dissolved in distilled water and an oil phase containing a lipid mass base of 15% in isopropyl myristate. These phases are combined with carbon dioxide and an ethanolic solution in a saturator, with a 2:4 gas-to-liquid ratio. The mixture is then delivered to a third feeding line and sprayed at high pressure through an 80 µm diameter nozzle, resulting in the rapid precipitation and encapsulation of droplets by phospholipids¹³¹.

Various hydration methods have been used for liposome preparation. In the conventional film hydration method, cholesterol and soya lecithin dissolved in ethanol are used to produce a smooth film, which is subsequently hydrated with PBS and sonicated⁹². The heating method involves the hydration of lipids with an aqueous phase containing 3% glycerol which enhances liposome stability and is

biocompatible and non-toxic¹⁵⁸. The curvature-tuned preparation of nanoliposomes employs a speedy pH modification preceded by an equilibrium interval to induce spontaneous vesicle formation. This solvent-free approach involves hydrating a lipid combination with preheated PBS buffer, vortexing and adding to a pH 7.4 buffer. The resulting liposomes are isolated through centrifugation²⁸.

In the packed bed preparation of liposomes, non-spherical monodisperse alumina particles are used to pack capillaries. A micropipette is used to disperse the lipid mixture into the packing bed and the capillary is dried and purged with nitrogen gas. The hydration of the dried lipid bilayers is performed with a phosphate buffer⁹⁷. The localized infrared heating method allows the formation of unilamellar vesicles from spin-coated lipid films. The process involves the use of a polydimethylsiloxane (PDMS) frame placed on a spin-coated surface, which creates a chamber. The chamber is filled with a 60 mM ionic strength PBS solution to moisturize the film and localized heating is achieved using an IR-B laser directed through an optical fiber¹⁰³.

A dual asymmetric centrifugation method shears a rich blend of cholesterol and lecithin [55:45 mol%] in a 0.90 percentage NaCl solution using centrifugal and rotational forces, resulting in the formation of liposomes⁸³. Osmotic shock hydration involves the repeated rehydration of a small liposome solution with deionized water, leading to generation of enlarged and more homogenous giant unilamellar vesicles¹⁴⁴. This spray drying method involves dissolving lipids in chloroform which is then sprayed into a drying chamber and subsequently moisturized and homogenized to prepare spray-dried liposomes¹⁵¹. The lyophilization method has 3 phases: frosting, initial drying and subsequent drying to obtain lyophilized liposomes¹³³.

The gel-assisted hydration method involves the use of a polyvinyl alcohol (PVA) solution which is spread on a coverslip and dried. Lipids dissolved in chloroform are then spread on the dried PVA and the solubilizer is vaporized under vacuum. The resulting lipid layer is rehydrated with PBS and subjected to electroformation to obtain liposomes¹³⁴. The glass bead hydration method utilizes lipid-coated beads that are mixed with a sucrose buffer and heated at 65°C to induce liposome formation⁹⁸. Finally, the electro formation method involves the hydration of lipid films deposited on electrodes in an electric field¹⁶¹.

In a recent modified electro formation method, a 10 μ L dribble of charged lipid mixture was distributed over a tin oxide-covered slide and dried for 30 minutes under vacuum. A secondary glass plate was employed to shield the vault, which was then brimmed with an accurate 0.095 molarity sucrose mixture. An alternating current voltage of 1.50V and 10.00 Hertz was supplied over a 1 mm gap within the chamber for 3 hours at $22.0 \pm 1.0^\circ\text{C}$ ¹⁶¹. Electro formation method is also used in microfluidics where the electro formation technique is applied to micro-sized fluidic

channels with a square cross-section. The channels are placed between glass slides coated with ITO electrodes and liposomes are formed within ten minutes by utilizing an alternating current voltage³.

Traditional bulk techniques are also used to produce liposomes. In the RPEM, liposomes are formed in an inverted stage and then the inverse-phase vesicles are sonicated and prepared in a buffer solution (wet phase) containing hydrophilic molecules for encapsulation within the vesicles. In the ethanol injection method, EtOH is spontaneously delivered into an excess buffer to make liposomes. In the detergent depletion method, surfactants at the CMC's are used to solubilize fats and when the surfactant is detached, the microemulsions become increasingly enriched in phospholipids. Then, a dialysis system is used to remove detergents. Recent advancements in bulk methods include the membrane contractor method and microfluidics⁷³.

In the membrane contractor method, the system used contains a nitrogen bottle, peristaltic pump and pressurized recipient. A metal instrument with a tubular SPG membrane within 2 pressure gauges is employed. Phospholipids at a concentration of 20 mg/ml and 20% lipid (w/w) are mixed in 250.00 ml of ethanol in a pressure container. When the aqueous phase is let into it, spontaneous formation of liposomes is observed and the extracted pellets are disseminated in saline (PBS) and preserved at +4°C. Microfluidics is another bulk method that encompasses fluid movement through conduits with cross-segmental proportions typically ranging between 5–500 μm ²⁹.

Many innovative microfluidics-focused liposome production methods have been created in recent years. The flow of a hydrophilic buffer beside two opposed walls is aided by current in a microchannel in microfluidic hydrodynamic focusing. By mixing phospholipid in EtOH and a hydrophilic buffer, a diffusive mixture is formed. The breakdown of water and alcohol reduces the concentration of alcohol, causing phospholipids to self-assemble into bilayers⁽⁶⁹⁾. Vertical flow focusing, like other microfluidics techniques, delivers an exceptional sample homogeneity. Liposomes that are generated in microfluidic VFF devices are equipped with an elevated aspect ratio of the channel¹³⁵.

Microfluidic systems incorporating micromixer structures fall under the mixer-assisted microfluidics method of producing liposomes. The droplet method of microfluidics targets on producing specified volumes in the form of drops from immiscible fluids¹³⁰. Pulsed microfluidic jetting involves placing a pulsating jet stream of a lyophobic solution against a flat bilayer, inducing an extension through locally distorting the bilayer. This helps to culminate in liposome formation and the formation of intact bilayers¹⁶⁷.

In the transient membrane ejection method, two phases are infused into a microfluidic device and squeezed through

crossflow in a T-junction, resulting in bilayers. Fluid displacement is achieved by infrared rays which produce liposomes⁷⁹. Supercritical fluid technology involves dissolving phospholipids and other fats in hypercritical CO₂ at 60°C and 250.00 bar, with 5% ethanol as a co-solvent, to form liposomes²³. The cDICE approach incorporates zwitterionic lipids into homogeneous giant unilamellar vesicles (GUVs) for specified size and high encapsulation efficiency⁶³. The stationary phase interdiffusion approach is primarily based on the diffusible fusion of 2 intermixable phases, resulting in the self-arrangement of lipid particles to produce liposomes⁶⁴.

In conclusion, among various liposome preparation methods discussed, three standout approaches for liposome preparation are the Super Lip method using supercritical technology, the Packed Bed Preparation of liposomes and the Conventional Film Hydration. The Super Lip method demonstrates rapid and solvent-free production of liposomes, although its reliance on specialized equipment for handling supercritical fluids may limit its scalability. The Conventional Film Hydration Method offers simplicity but poses safety concerns due to the use of hydrophobic diluents.

The Packed Bed method of preparation of nanosomes allows precise size control and high uniformity, making it suited for large-scale production, albeit with equipment and temperature control requirements. While other methods discussed in the text have their advantages and limitations, factors such as complexity, specialized equipment needs, or scalability issues may hinder their suitability for massive production. Researchers should carefully consider these aspects when selecting a liposome preparation method for their specific study objectives.

Niosomes preparation method: There are several methods available to produce niosomes: The thin film hydration, ether injection, micro fluidization, bubble, transmembrane pH gradient drug uptake process and reverse phase evaporation methods^{54,126}. Surface-active agents and cholesterol are dispersed in a hydrophobic solubilizer and vaporized in a thin film hydration process using a rotary evaporating unit. Surface-active agents and cholesterol are dispersed in a hydrophobic solubilizer and vaporized in a thin film hydration process using a rotary evaporating unit.

The resulting thin film is treated and rehydrated by adding a hydrophilic phase comprising the drug and the blend is sonic-wave-treated to form micelles¹³⁶. The surfactant-cholesterol mixture is solubilized in diethyl ether and injected into the pre-warmed aqueous solution containing the drug. The temperature is kept above the boiling point of the solvent and vesicles form as the ether evaporates¹⁷. In the reverse-phase evaporation method, surfactant and cholesterol are solubilized in a hydrophobic solvent such as CHCl₃ or ether. A water-based form of the drug is then added to this mixture and the 2 immiscible phases are homogenized and sonic-wave-treated to form a dispersion. The chloroform is then removed by applying a vacuum to produce liposomes⁶⁰. The transmembrane pH gradient method is based on niosomes using a pH gradient.

In the thin lipid method, films are hydrated with acidic compounds at pH 4. An aqueous suspension of the drug is then appended and the pH is raised to 7 using PBS to allow formation of the niosome bilayer¹¹⁰. In the bubble method, inert gas bubbles are injected into a crude dispersion of a non-hydrated mixture of phosphatidylcholine and nonionic surfactant to generate stable niosomes⁶¹.

Table 1
Types of liposomes

Liposome Type	Size (nm)	Surface Charge	Stability	EE (%)	DLC (%)	Surface Modification	Application
Conventional	50-100	Neutral	Moderate	80%	10%	None	Drug delivery ⁵⁸
Stealth	80-200	Neutral	High	90%	20%	PEGylation	Enhanced drug delivery ¹²
Cationic	100-200	Positive	Moderate	70%	15%	Positively charged	Gene therapy ¹⁰⁷
pH-Sensitive	80-150	Neutral	Moderate	85%	12%	pH-sensitive polymers	Controlled drug release ⁸⁸
Temperature-Sensitive	80-120	Neutral	High	95%	18%	Thermosensitive lipids	Hyperthermia-based therapy ⁸⁵
Ligand-Targeted	80-200	Neutral	High	90%	20%	Ligand conjugation	Targeted drug delivery ¹²²
Stimuli-Responsive	80-150	Neutral	High	95%	25%	Stimuli-responsive polymers	On-demand drug release ¹³⁹
Long-Circulating	100-200	Neutral	High	90%	22%	Stealth coating	Enhanced drug delivery ⁹³
Multifunctional	100-200	Variable	High	95%	30%	Multifunctional coatings	Theranostics ⁸⁴
pH-Responsive	80-150	Neutral	Moderate	88%	20%	pH-sensitive lipids	pH-triggered drug release ³³

EE-Encapsulation Efficiency, DLC-Drug Loading Capacity, PEG-Polyethylene Glycol, pH-Potential of Hydrogen

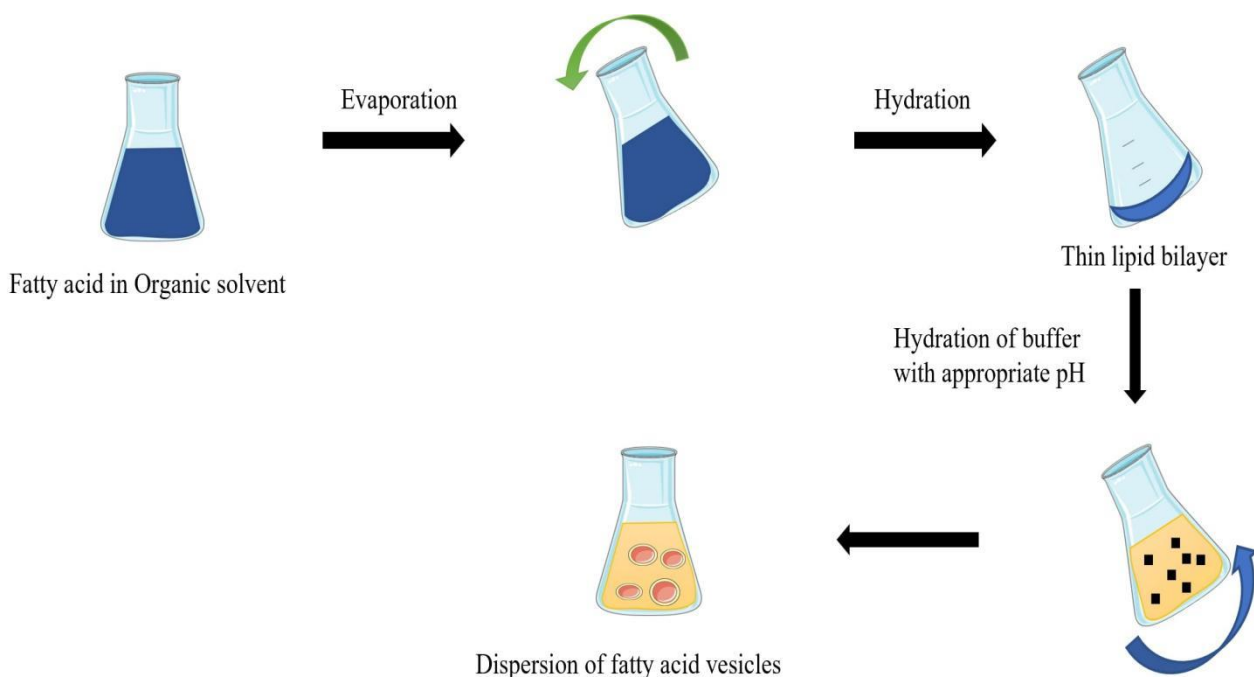


Figure 2: Thin film hydration method

The microfluidic method of niosome preparation utilizes the nonensemble system for controlled formation of vesicular structures through nanoprecipitation. A solvent mixture is used along with an acidic aqueous solution which is heated and then dialyzed against water to obtain drug-loaded niosomes¹²³. Among these methods, thin film hydration, micro fluidization and reverse phase evaporation methods are considered as effective approaches. The hydration method is simple and versatile, although the use of organic solvents raises safety concerns.

The reverse phase evaporation method allows for efficient entrapment of both lipophobic and lipophilic drugs but is limited using chloroform. The micro fluidization method offers precise control over niosome formation, enhanced stability and high drug-loading capacity, but it requires specialized equipment. On the other hand, the remaining methods have certain limitations that make them less suitable for publication in scientific papers. The ether injection method poses challenges due to high temperatures and the use of volatile and hazardous solvents. The transmembrane pH gradient method may have limited applicability depending on the properties of the drugs being entrapped. The bubble method, while straightforward, may result in less stable niosomes compared to other methods. Researchers should carefully consider the advantages and limitations of each method when selecting an appropriate approach for their niosome preparation, taking into account factors such as safety, drug characteristics, scalability and equipment availability.

Aquasomes preparation method: Aquasomes are prepared through a three-step process which involves the preparation of the core material, coating of the core material and immobilization of the drug candidate. The core material can

be composed of polymers or ceramics, depending on the specific requirements. Commonly used polymers include albumin, gelatin and acrylates while ceramics such as diamond particles, tin oxide and brushite are chosen for their high surface energy and absorbing properties. To enhance binding, a polyhydroxy oligomer surface film is favored. In the second step, the core material is coated with materials such as cellobiose, sucrose, or trehalose. These coating materials offer versatility in drug loading and stability. In the final step, the drug or bio actives are absorbed onto the aquasome surface and interact with the coating through noncovalent and ionic interactions²².

The preparation method of aquasomes offers various advantages in drug delivery. The use of polymers or ceramics as core materials and coatings allows for flexibility in drug loading and enhances stability. Aquasomes exhibit improved drug solubility, bioavailability and controlled release properties. The non-covalent and ionic interactions between the drug and aquasome surface facilitate efficient drug loading and release. However, researchers should consider limitations such as potential drug leakage and the careful selection of appropriate core materials and coatings. Overall, the aquasome preparation method presents a viable and effective approach for researchers to explore controlled drug delivery systems and targeted therapies. It is a valuable topic in the field of pharmaceutical research.

Ethosomes preparation methods: Lipid-based nanovesicles, ethosomes, are used in dermal and transdermal delivery of molecules through the skin into the body. They were originally formed as an inventive lipid carrier model consisting of ethanol, water and phospholipids. Their primary application is to improve the delivery of API through the dermal medium. There are three common

methods employed for the manufacturing of ethosomes: thin-layer hydration method, cold and hot method.

In thin-layer hydration method, 500mg of PC 90G is mixed in dichloromethane and the dissolver is then vaporized using a rotary evaporating device under the lipid phase transition temperature within a nitrogen gas atmosphere. The resultant film layer is hydrated with azelaic acid, ethanol, PEG and PBS at an acid-base balance of 7.4. The composite is then sonic-treated to yield ethosomes¹⁹. In the cold method, PC 90G is solubilized in 3.0 mL of alcohol and azelaic acid is solubilized in 5.750 mL of alcohol. These two solutions are mixed together using a magnetic stirrer and the hydrophilic phase at pH 7.4 is added drop by drop to the hydrophobic phase while stirring at 700 rotation per minute for 30 minutes. The resulting mixture is sonicated²⁴.

The hot method of ethosome preparation involves maintaining a water bath at 40°C, with a beaker containing water inside it. Phospholipid is dispersed in the beaker until a colloidal solution is formed. Ethanol, PEG and drugs are mixed separately. Subsequently, the organic and aqueous phases are combined and stirred together, followed by sonication to form ethosomes³².

Among these methods, the thin-layer hydration method and cold method are considered effective approaches for ethosome preparation in the field of topical drug administration. The thin-layer hydration method offers simplicity and efficient encapsulation of drugs, resulting in the formation of ethosomes with enhanced capabilities for delivering drugs to the skin. The cold method, although requiring longer mixing times, facilitates the inclusion of both water-liking and lipophilic drugs while maintaining the integrity of the vesicles. On the other hand, the hot method is regarded as less effective due to its limitations. Although

it provides convenience in terms of temperature control, the hot method may result in decreased stability and compromised integrity of the ethosomes.

Overall, the development of ethosomes and the optimization of their preparation methods present promising avenues for researchers in the field of topical drug delivery with the prospective to improve patient experiences and therapeutic outcomes.

Route of administration of nanosomes: Nanosomes find extensive applications across numerous industries, specifically in the pharmaceutical sector, where they offer potential therapeutic benefits for the treatment of diverse diseases like cancer, dystrophy, dementia and more. It is important to consider that the properties of nanosomes may vary depending on the method of their preparation. Moreover, the route of administration plays a significant role in governing the distribution, bioavailability, permeability and mode of action of drugs encapsulated within nanosomes.

The selection of the appropriate route of administration is considered by several factors inclusive of the patient's preference and the severity of the disease. Several routes of administration are available such as nasal, oral, transdermal and intravenous, among others. Each route of administration has distinct implications for drug delivery and subsequent therapeutic outcomes.

Oral administration: The oral route of drug administration is predominantly used for the treatment of various chronic diseases and nanosomes can also be administered via this route. In a therapeutic setting, it has been observed that curcumin-loaded nanosomes, coated with the natural alkaline polysaccharide chitosan, demonstrated an higher absorption rate of 7.26% and better bioavailability¹⁶⁶.

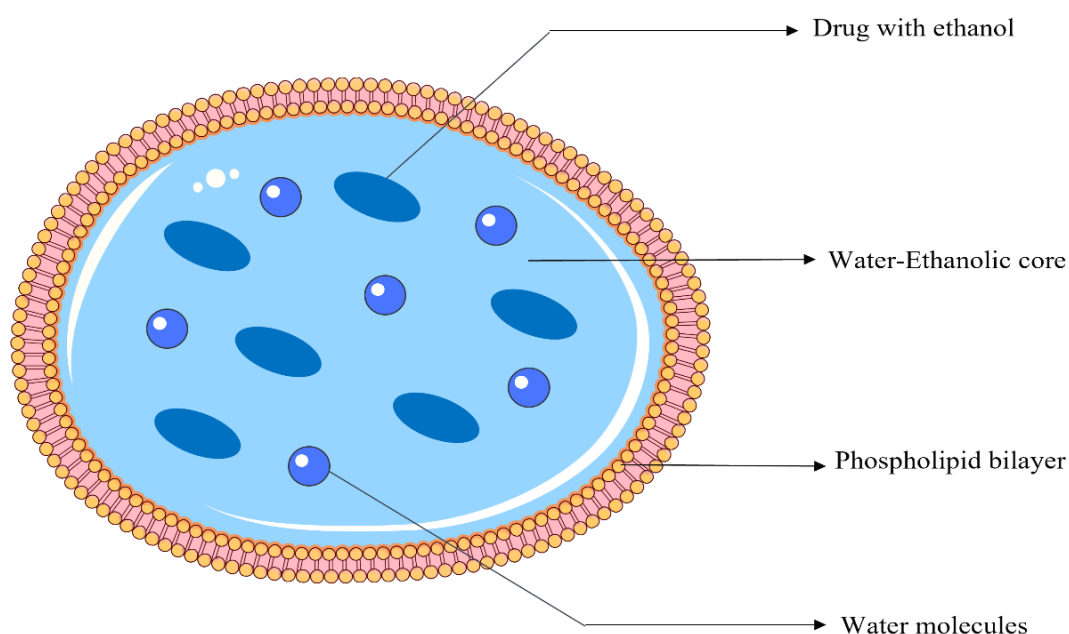


Figure 3: Structure of Ethosomes

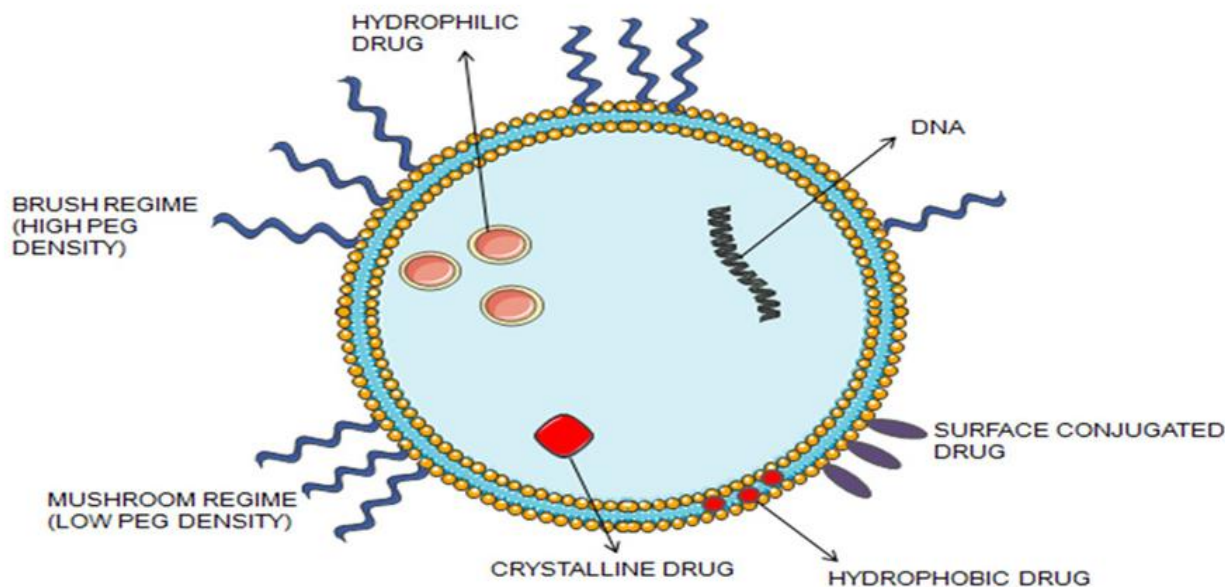


Figure 4: Drug entrapped inside a liposome

Another example involves a nanosomal formulation of resveratrol, utilizing lecithin in a lyophilized form, which exhibited antioxidant and anti-inflammatory properties with a bioavailability of 61%. Notably, it demonstrated a four-fold increase in peak plasma concentration, thereby showing promise for the treatment of diabetes types 1 and 2¹⁰⁸.

For the administration of docetaxel, a novel nanosomal lipid suspension was used as a one-hour intravenous infusion every three weeks, resulting in a potentially promising overall response. However, the most prevalent non-hematological toxicity was nausea with vomiting¹⁸. To enhance therapeutic efficiency and mitigate the toxic effects of drugs, receptor-specific ligand-crafted active targeting nanocarriers have been employed¹²⁷. Utilizing lipidic nanocarriers cloaked with polysaccharides, botanical anticancer drugs produced from the natural polyphenol curcumin showed an 8.94-fold increase in bioavailability, while limiting the effectiveness of CD133 and ABCG2 by 38% and 32% respectively¹⁵⁵. Insulin-loaded nanosomes with WGA-N-glut-PE exhibited high entrapment efficiency of 60% and a bioavailability of 7.11% when administered orally¹⁶³.

In male rats, an oral administration of vinpocetine, used to treat dementia and stroke, incorporated solid lipid nanoparticles produced by ultrasonic-solvent emulsification. This approach demonstrated a rapid diffusion rate and enhanced bioavailability in the bloodstream⁹⁴. Lipid nano capsules delivering biocompatible ibuprofen achieved an incorporation efficiency of 95%, thereby aiding in the treatment of postoperative pain due to their antinociceptive efficacy⁸⁷. Furthermore, simvastatin-loaded lipid nanoparticles, characterized by their spherical shape and encapsulation efficiency over 95%, exhibited enhanced intestinal absorption and oral bioavailability, making them

valuable for the treatment of high cholesterol and coronary heart disease¹⁶⁵.

Solid lipid nanoparticles (SLNs) of buspirone HCl prepared using emulsification evaporation followed by sonication, demonstrated a loading efficiency of 32.8%. Oral administration of 15 mg/kg resulted in a relative increase in bioavailability with approximately 90% of buspirone released within 4.5 hours¹⁴⁷. Praziquantel-loaded SLNs, produced through ultrasound techniques, showed improved oral bioavailability with an encapsulation efficiency of 80%. These SLNs hold promise as a drug carrier for PZQ and Schistosoma treatment¹⁵⁴.

Transdermal administration: Rice bran oil nanosomes produced via the reverse phase evaporation method contain various antioxidants such as gamma-oryzanol, tocopherols and tocotrienols. These nanosomes exhibit an antioxidant activity of 4.3 mg/mL. They possess excellent entrapment efficiency and permeation capacity, making them suitable for use in cosmetic creams for their anti-aging properties⁹⁵. Soya lecithin-based emulsome nanoparticles have been primarily used for the percutaneous administration of lornoxicam in the treatment of inflammatory joint disorders. These nanoparticles have an entrapment efficiency of 67.75% and an optimized formulation with a release rate of 88%⁷⁵. Cosmetics nanosomes made from oleic acid-conjugated peptides have shown high skin penetration capacity, with potential benefits in anti-aging properties and skin repair¹³.

In clinical trials, nano retinol for the treatment of facial acne vulgaris, has been found to be more effective and better tolerated compared to other formulations. Additionally, it demonstrates a reduction in both total and inflammatory acne lesion count⁴⁴. Furthermore, the topical delivery of

PEG-based liposomes loaded with tofacitinib citrate has shown enhanced skin permeability by 4-11 folds. These liposomes remain stable for a period of 6 months, highlighting their effectiveness for topical drug delivery⁸¹.

Nasal administration: To treat Parkinson's disease, L-DOPA was incorporated into a polymer matrix composed of a biodegradable copolymer of glycolic acids. Pharmacokinetic studies were conducted and it was observed that nasal administration resulted in a remarkable increase in drug bioavailability by 244.4%¹⁰⁶. In the context of Alzheimer's disease treatment, hydrogels loaded with donepezil HCl were prepared. The liposomes exhibited an entrapment efficiency of 62.5% and a vesicle diameter of 438 nm. Intranasal delivery of donepezil demonstrated a significant increase in drug content by 107%⁴. For the treatment of cerebral malaria, nanocomposite liposomes modified with glucose were utilized. These nanosomes had a particle size of 86.2 ± 0.9 nm and an encapsulation efficacy exceeding 90%¹³⁷.

Additionally, anionic liposomes incorporated with chitosan DNA complex were found to be capable of delivering anti-carcinogens DNA. These developed nanoparticles provide a potential platform for packaging and delivering DNA vaccines, enabling strong elicitation of mucosal immunity³⁴. In the case of valproic acid, an anticonvulsant, it was entrapped in soy-based cholesterol liposomes. This formulation is useful for delivering valproic acid to the brain through intranasal administration with an entrapment

efficiency exceeding 85%. Furthermore, it exhibited 2.7 times higher bioavailability compared to the free drug⁷⁸.

Intravenous administration: Nanosomal tacrolimus, comprising of castor oil hydrogenated with polysorbate 60, was delivered and analyzed using frozen-fracture electron micrograph. The findings exposed an existence of a homogeneous group of nano-sized matter. Animal toxicity studies demonstrated no mortality, indicating that it is a safer alternative treatment for patients undergoing organ relocation⁹. In the case of Nanosomal Docetaxel Lipid Suspension, IV injection for an hour per cycle of 21 days showed improved clinical efficiency in subjects with stage 4 breast tumor. Each patient received a maximum of 6 cycles of treatment². A combination therapy involving ginsenosides and paclitaxel loaded in a unique nanocarrier exhibited the ability to inhibit human gastric cancer cell proliferation when administered via the intravenous route⁶⁸.

In the case of Doxorubicin loaded vesicles, they are capable of specifically targeting Her2+ breast cancer cells, inducing a cytotoxic effect. These liposomes have a size of 101 nm and an entrapment efficacy of 88%⁶⁸. Furthermore, Decoquinat loaded liposomes, when administered intravenously, can effectively suppress the activity of the parasite *P. berghei*, which causes severe malaria. These liposomes exhibit an entrapment efficiency of more than 95% and demonstrate excellent DQ IC50 (half maximal inhibitory concentration) of 1.33 nM¹⁶⁰.

Table 2
Modes of administration of liposomes

Mode of Administration	Commercial Name	Targeted Disease	Liposome Composition	DEE (%)	Stability	Encapsulation Method
Intratumoral	Doxorubicin Liposomal	Various cancers	DSPC, cholesterol, PEG-lipid	95%	Stable	Thin film hydration ¹⁰
Inhalation	Amikacin Liposome Inhalation	Pulmonary infections	DPPC, cholesterol	80%	Stable	Freeze-drying ¹⁴⁰
Subcutaneous	Naltrexone Liposomal	Substance abuse treatment	DSPC, cholesterol	90%	Stable	pH-gradient ³⁸
Intraperitoneal	Cisplatin Liposome	Peritoneal cancers	DSPC, cholesterol	85%	Stable	Reverse phase evaporation ²³
Topical	AmBisome	Fungal skin infections	Lipid-based	70%	Stable	Ethanol injection ¹¹²
Intravitreal	Triamcinolone Acetonide	Ocular inflammation	DSPC, cholesterol, PEG-lipid	92%	Stable	Bubble method ²¹
Intrathecal	DepoCyt	Central nervous system cancers	DSPC, cholesterol	88%	Stable	Microfluidic method ⁵⁹
Intramuscular	Morphine Sulfate Liposomal	Pain management	DSPC, cholesterol, PEG-lipid	95%	Stable	Ether injection method ²⁷
Intravesical	Bacillus Calmette-Gurin	Bladder cancer	Lipid-based	75%	Stable	Transmembrane pH gradient ¹³²
Intratumoral	Vincristine Sulfate Liposomal	Acute lymphoblastic leukemia	DSPC, cholesterol, PEG-lipid	90%	Stable	Ether injection method ⁴⁰

DSPC-Distearoylphosphatidylcholine, PEG-Polyethylene Glycol

Applications of liposomes in field of medical: Liposomes find extensive applications in various domains in the field of pharmacology and medicine, serving as valuable tools for therapeutic and diagnostic purposes. Liposomes can be loaded with drugs or different markers, allowing for targeted delivery and enhanced efficacy. Moreover, liposomes serve as essential models for studying cell interactions, recognition mechanisms and the mode of action of specific substances, providing valuable insights into fundamental biological processes.

One of the significant challenges in drug therapy is the narrow therapeutic window exhibited by many medications where the effective therapeutic concentration is not significantly lower than the potentially harmful concentration. However, by employing suitable drug carriers such as liposomes, it is possible to modulate the pharmacokinetics and biodistribution of drugs. This approach offers several advantages including the potential reduction of toxicity associated with the drug and the enhancement of its therapeutic efficacy³⁹. Using appropriate drug carriers, liposomes can effectively optimize the delivery of drugs, striking a balance between effectiveness and safety, thus providing a promising avenue for advancing medical treatments.

Application of liposomes in treating bacterial infections:

Liposomes have emerged as versatile tools in the medical field, finding applications in the treatment of various diseases caused by bacteria, viruses, fungi and protozoa. They offer unique advantages such as targeted drug delivery, reduced systemic side effects, improved solubility and prolonged drug release, thereby enhancing the efficacy of therapeutic interventions. For instance, negatively charged deformable rigid bilayer liposomes loaded with the broad-spectrum antibiotic Azithromycin (AZI) have been administered orally to effectively treat cervicovaginal bacterial infections caused by planktonic and biofilm-forming *E. coli* and intracellular chlamydia. The encapsulation of the antibiotic within liposomes enhances its solubility, antibiotic properties and biofilm inhibition capabilities¹⁴⁵.

In the case of *Staphylococcus aureus*, a gram-positive bacterium known for causing systemic infections, phospholipid liposomes containing vancomycin, levofloxacin and rifabutin have been utilized to penetrate and accumulate within biofilms formed by this bacterium. The liposomes demonstrate efficient release of the antibiotics in *in situ* conditions, offering potential therapeutic benefits⁴⁹.

Similarly, liposomal vaccines derived from glycosphingolipids (GSLs) have shown promise in combating *Acinetobacter baumannii*, a common pathogen responsible for a range of infections. GSLs liposomes have been found to induce antibody secretion, cytokine production and lymphocyte proliferation, leading to a

reduction in biofilm production and improved survival rates⁸². Cationic liposomes, prepared with CMC-PE via amidation reactions, are loaded with a derivative of CSD to target amoxicillin-resistant *Staphylococcus aureus* and exhibit significant antibacterial effects. These liposomes demonstrate high encapsulation efficiency, favorable zeta potential and effective inhibition of biofilm formation¹⁶².

Additionally, liposomes containing ParELC3 have been employed to inhibit the growth of *E. coli* strains responsible for infections. These liposomes exhibit high purity, solubility and the ability to inhibit key bacterial enzymes, thereby displaying potential antibacterial activity¹²¹. Liposomes have also been used to treat specific bacterial infections. For instance, fusogenic liposomes containing methicillin and Tat47-57 cell-penetrating peptides have shown effective antimicrobial activity against *Neisseria meningitidis*, a bacterium associated with brain inflammation. The liposomes exhibit successful penetration into bacterial cells, highlighting their potential therapeutic value⁵¹. Combating streptococcal toxic shock syndrome caused by *Streptococcus pneumoniae*, *Streptococcus dysgalactiae* and *Streptococcus pyogenes* subspecies has been explored using liposomes composed of high levels of cholesterol and choline-containing phospholipids. These liposomes demonstrate antagonistic properties against exotoxins produced by these pathogens²⁵.

Furthermore, liposomes loaded with curcumin have exhibited antagonistic properties against *Aeromonas sobria*, a Gram-negative bacterium associated with gastrointestinal and extraintestinal infections. These liposomes demonstrate potential antibacterial activity against *A. sobria*²⁶. To address human salmonellosis, liposomes loaded with geraniol have shown anti-virulence properties, inhibiting the colonization of *Salmonella* bacteria. The liposomes exhibit high encapsulation efficiency and hold promise for combatting this infectious disease⁴³. In the treatment of endophthalmitis, sustained-release liposomes containing moxifloxacin have been investigated as a therapeutic approach. These liposomes, produced by the AL method, demonstrate high encapsulation efficiency and antimicrobial properties, offering potential benefits in treating this intraocular inflammation¹⁰⁵. Liposomes have also shown promise in targeting specific bacterial toxins. For example, liposomes capable of absorbing cholesterol-dependent toxins such as pneumolysin have been explored for combating *Streptococcus pneumoniae*-induced inflammation and associated responses⁵².

Immunization strategies against tuberculosis have been developed using liposomes loaded with tuberculosis antigens Ag85B and ESAT-6. These liposomes, combined with poly:IC adjuvant and phosphatidylserine, effectively reduce bacterial loads in the lungs and spleen, offering a unique vaccination strategy⁴¹. To tackle *Cutibacterium acnes*, a Gram-negative bacterium known for biofilm production and skin infections, positively charged liposomes

encapsulating enzymes have been developed. These liposomes exhibit high encapsulation efficiency and demonstrate significant inhibition of biofilm growth including effective penetration within the biofilm structure⁴⁵.

Application of liposomes in treating fungal infections

Candidiasis, cryptococcosis and aspergillosis are among the diseases responsible for numerous annual fatalities. Amphotericin B, a potent antifungal agent, exhibits effectiveness against *Aspergillus fumigatus*. However, the limited efficacy of antifungal drugs can lead to reduced fungicidal effects. To enhance drug efficiency, dectin-2-coated amphotericin B-loaded liposomes were developed, specifically targeting fungal cells. Dectin-2, a mammalian innate immune membrane receptor, binds to mannans as a dimer to signal fungal infections, with the estimated MICs for AmB species ranging from 0.06 to 1.3 μM ¹⁴. Amphotericin B is a lipophilic macrolide used in antifungal therapy, but its solubility in water is low and it poorly absorbs through the gastrointestinal mucosa and skin. Direct drug release in the body can cause nephrotoxicity.

However, liposome drug delivery systems mitigate amphotericin B's toxicity by controlling the drug's transfer rate from the carrier to the cell membrane⁶⁶. A promising drug, gene and tissue engineering delivery system is the fibrin-based delivery system. Plasma beads, as efficient drug and antigen carriers, effectively load and encapsulate the antifungal compound amphotericin B, releasing the drug at a slower rate compared to liposomal drug delivery. In animal studies, AmpB impregnated plasma beads showed kidney drug levels of 2.3 $\mu\text{g/g}$ and 2.7 $\mu\text{g/g}$ at 24 h⁴⁸. In combination therapies, antifungal drugs like fluconazole, voriconazole, caspofungin and micafungin are used along with amphotericin B and lipid formulations. Fluconazole, in particular, is advanced for treating invasive candidiasis and is well-tolerated, but certain *Candida* species like *C. krusei* and *C. glabrata* are resistant to it. Dendrimers serve as drug carriers, consisting of core, dendrons and surface-active groups, with drug encapsulation occurring in the dendrimer's inner part. However, these dendrimers have high cytotoxicity and lower stability and biocompatibility¹⁴⁹.

The FDA has approved three amphotericin B liposomes: Ambisome, Abelcet and Amphotec. Ambisome efficiently penetrates the fungal cell wall, binding to membrane sterol components before releasing amphotericin B. Abelcet, a preservative-free phospholipid, is sterile and used to treat invasive and difficult-to-respond-to fungal infections. Finally, amphotec is a parenteral liposome formulation of amphotericin B, characterized by a small, spherical particle size of 100nm⁶⁷.

Applications of liposomes in cancer treatment

The liposomes have been manifested as an efficient promising technique for drug delivery in cancer therapy due to their unique chemical and physical traits. These versatile

structures can encapsulate both water-repellent and hydrophilous drugs, granting protection against deterioration as well as increasing the drugs bioavailability. Moreover, liposomes can either passively target cancerous growth through the intensified penetration and containment effect, or vigorously target specific cells via ligand-mediated binding mechanisms. One notable example of liposomal drug delivery in cancer treatment is Doxil® (doxorubicin hydrochloride liposome injection), a vesicular formulation of doxorubicin for chemotherapy. Doxil® is used for the management of ovary and breast cancers that have shown resistance to prior chemotherapy⁵⁷. Another liposomal formulation is Irinotecan liposome injection (Onivyde®), which encapsulates the chemotherapy drug irinotecan. It has gained authorization for the therapy of spreading stage of pancreatic cancer that has worsened during gemcitabine-based therapy, usually administered in combination with other drugs²⁰.

A newer liposomal formulation of Irinotecan called nano liposomal Irinotecan (nal-IRI) has been proposed to enhance its pharmacokinetics and biodistribution. It is approved for use in the treatment of stage 4 pancreatic tumor in mix with 5-FU and leucovorin⁵⁵. Marqibo® is a liposomal combination of the chemotherapy drug oncovin, specifically approved for the diagnosis of recurrent ALL in aged people¹²⁴. Cytarabine liposome injection is another liposomal formulation that contains the chemotherapy drug cytarabine, primarily used to treat lymphomatous meningitis, a complication caused by certain types of lymphomas¹²⁰. Vyxeos® is a liposomal blend of two cancer drugs, daunorubicin and cytarabine. It is employed for treatment of freshly diagnosed AML¹⁴¹.

In the realm of metastatic colorectal cancer treatment, an oral liposomal formulation combining trifluridine and tipiracil hydrochloride has shown efficacy in patients who have previously received chemotherapy⁸⁶. L-MTP-PE is a liposomal formulation that incorporates muramyl dipeptide, a molecule that stimulates the immune system. It is currently under investigation for the therapy of different cancers, comprising osteosarcoma and mesothelioma, often in combination alongside chemotherapy and radiation therapy. Furthermore, liposome-based drugs have been used in the treatment of numerous other tumor types¹⁰⁴.

Applications of liposomes in autoimmune disease

Inflammation plays a key role in various number of diseases ranging from infections and autoimmune disorders to cancer and organ rejection. Within the site of inflammation, increased vascular permeability is one of the notable vascular consequences¹⁶. This augmented permeability allows fluid, proteins and leukocytes, particularly leukocytes, to migrate from the blood vessels into the interstitial space at specific locations where the endothelial barrier is more permeable¹¹³. Due to this phenomenon, liposomes are unable to traverse the intact endothelium barrier in healthy tissues but can selectively extravasate into

inflamed tissues, a process known as passive targeting. Macrophages, as antigen-presenting cells, play a substantial role in inflammation throughout the stages of injury, repair

and tissue regeneration¹⁰⁹. *In vitro* studies have demonstrated that macrophages possess phagocytic activity and can uptake liposomes within a short span of 8 hours¹⁰¹.

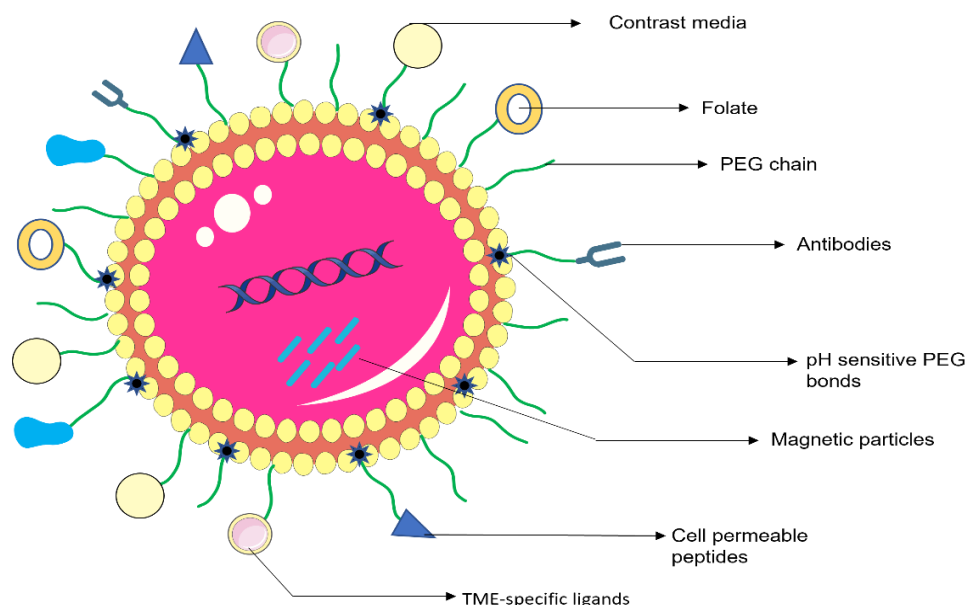


Figure 5: Multi-functional liposomes for targeting tumors

Table 3
Application of liposomes in cancer treatment

Application	Liposome Used	Imaging Modality	Targeting Ligand	Liposome Composition
Photodynamic Therapy	Folate-targeted	Fluorescence imaging, MRI	Folate receptor	Lipid bilayers + Photosensitizing agent ³⁷
Radiotherapy Enhancement	Radiosensitizer-loaded	Computed tomography (CT) imaging	HER2 receptor	Lipid bilayers + Radiosensitizing agent ³¹
Immunomodulation	Cationic	Fluorescence imaging	Mannose receptor	Lipid bilayers + Immunostimulating agent ⁷²
Gene Delivery	pH-sensitive	Bioluminescence imaging	Transferrin receptor	Lipid bilayers+ Nucleic Acid + Cationic agent ¹⁰⁰
Targeted Drug Delivery	PEGylated	Positron emission tomography (PET)	Epidermal growth factor receptor	Lipid bilayers + Drug + Surface-modifying agent ¹¹
Vaccine Delivery	Cationic	Fluorescence imaging	Mannose receptor	Lipid bilayers + Antigen + Cationic agent ¹²⁸
Controlled Release	pH-sensitive	Near-infrared fluorescence imaging	Transferrin receptor	Lipid bilayers + Drug + pH-sensitive component ¹³⁸
Theranostics	Multifunctional	Magnetic resonance imaging (MRI)	HER2 receptor	Lipid bilayers + Drug + Imaging agent ¹⁵⁰
Nanotheranostics	PEGylated	Fluorescence imaging, MRI	Transferrin receptor	Lipid bilayers + Drug + Imaging agent ⁷¹
Combination Therapy	PEGylated	Computed tomography (CT) imaging	Epidermal growth factor receptor, Transferrin receptor	Lipid bilayers + Drugs + Nanoparticle ¹¹¹

PEG-Polyethylene Glycol, CT-Computed Tomography, MRI-Magnetic Resonance Imaging, PET-Positron emission Tomography, HER2-Human Epidermal Growth Factor Receptor

Inflammatory conditions are well-suited for passive liposomal drug delivery due to the localized extravasation of liposomes and subsequent cellular absorption. Several pre-clinical investigations have explored the potential advantages of liposomal drug delivery in the treatment of inflammatory conditions. Particularly, researchers studied liposomal formulations of conventional drug for the management of rheumatoid arthritis^{50,115,142}. These studies consistently demonstrate improved efficacy or better localization of the liposomal drugs when compared to conventional therapies. Furthermore, significant progress has been made in the development of liposomal medications that are designed for local release triggered by factors such as pH, ultrasound, or thermosensitivity, or modified for enhanced accumulation through peptide binding or folate conjugation^{35,56,129,153}.

Additionally, liposomes have been utilized for co-delivery of conventional drugs to explore potential synergistic effects^{42,102,148,164}. Liposomal formulations have also provided a new perspective on drugs that were previously discontinued due to severe adverse effects. For example, liposomal administration of a sulfapyridine prodrug resulted in improved intraarticular retention and increased therapeutic efficacy⁸⁰. In a clinical evaluation involving psoriasis patients, an ethosomal gel demonstrated superior efficacy compared to a liposomal formulation⁴⁷. The utilization of liposomal encapsulation for biologics, employing spherical nucleic acids targeting the IL-17 receptor, has shown promising outcomes in a mouse model with psoriatic plaque induced by imiquimod⁹¹. Combination therapy involving laser irradiation and controlled liposomal drug release exhibited encouraging results, with treated mice showing no recurrence of symptoms⁸⁹.

Furthermore, liposomal encapsulation of dithranol demonstrated positive outcomes, achieving complete lesion clearance in five out of nine treated patients and a 50%

reduction in lesions in the remaining two⁷⁷. More recently, a liposomal formulation of prednisolone was tested in a mouse model of arteriovenous fistulas (AVF) revealing the suppression of vascular inflammation and promotion of outward remodeling¹⁵². In a randomized clinical trial, the administration of liposomal prednisolone was found safe for patients after AVF surgery, although no significant improvement in effective AVF maturation was observed¹⁴³.

Applications of Phytosomes

Phytosomes have emerged as advanced delivery systems within the field of phytotherapy, attracting considerable attention due to their remarkable enhancements in bioavailability and therapeutic efficacy. These specialized complexes comprise of plant extracts and phospholipids, which synergistically create unique structures capable of enhancing the solubility and permeability of active constituents. Notably, phospholipids like phosphatidylcholine play a crucial role in creating phytosomes by encapsulating the hydrophobic elements found in plant extracts. This process results in improved stability and absorption properties. Phytosomes bring a multitude of benefits including enhanced cellular uptake, extended circulation time and the ability to target specific tissues or organs.

Researchers have conducted extensive investigations into the potential uses of phytosomes across various therapeutic fields including their effectiveness in anti-inflammatory, anticancer and antioxidant interventions. Moreover, phytosomes have shown promising results in enhancing the delivery of herbal drugs with low solubility, effectively addressing the limitations of conventional herbal formulations. This comprehensive review aims to offer a detailed overview of the diverse applications of phytosomes, highlighting their potential in optimizing phytotherapeutic approaches and opening doors for innovative drug delivery strategies.

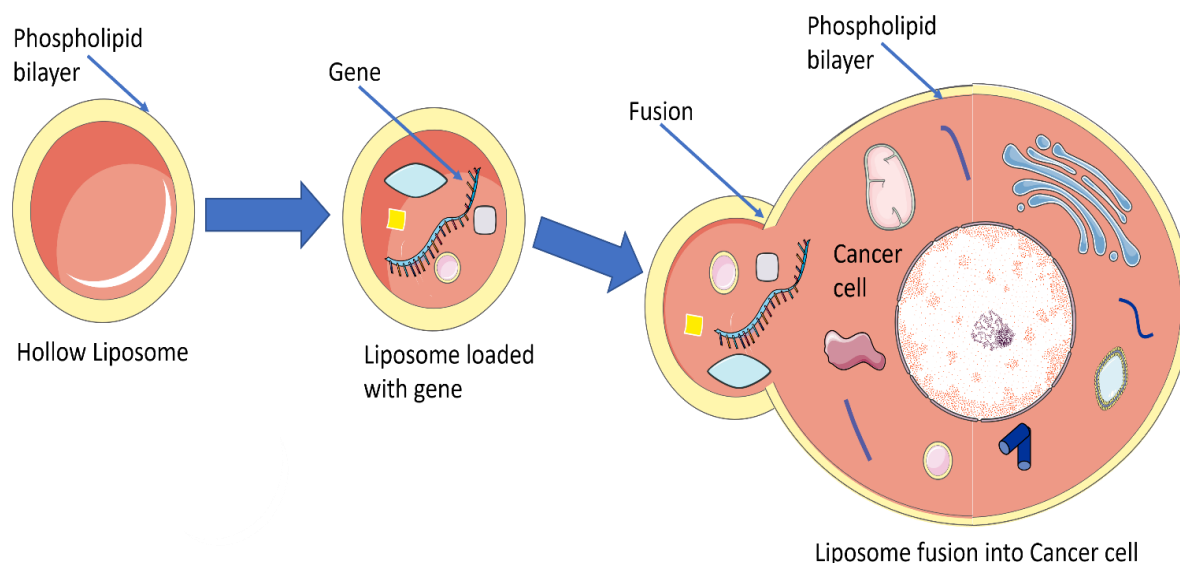


Figure 6: Surface topology of phytosomes

Table 4
Application of Phytosomes

Phytosome	Phyto-constituent	Lipid composition used	Pharmaceutical activity
Scorpion Venom-Functionalized Quercetin Phytosomes	Scorpion Venom peptide and Quercetin	Phospholipo® 90H	Anti breast cancer activity ⁷
Optimized Icaritin Phytosomes	Icaritin	Phospholipo® 90H	Cytotoxic and apoptosis enhancing activities in ovarian cancer cells ⁸
Thymoquinone-Loaded Soy-Phospholipid phytosomes	Thymoquinone	Phospholipo® 90H	Anti-cancer activity in human lung cancer cells ⁵
Crocetin phytosomes from NAT	crocetin	phosphatidyl choline and cholesterol	Wound and cut healing properties in rat model ⁵
Piper longum and Abutilon indicum loaded phytosomes	<i>Ethanol extract of Abutilon indicum and Piper longum</i>	phospholipid (soy PC)	Hepatoprotective effect ¹²⁵
Cisplatin and curcumin coloaded lipid nanosomes	Cisplatin and curcumin	DMPC AND DOPA	High cytotoxic effect on hepG2 cells ³⁶
Cholate modified polymer-lipid nanoparticles	Quercetin	PLGA and lecithin	Antileukemic effect ¹⁵⁹
Piceatannol loaded bilosome	piceatannol	cholesterol	Cytostatic and apoptotic activity in lung cancer cells ⁶
Targeted lipid nano structured lipid crystal of folate	letrozol	compritol	Improve efficiency of LTZ on breast cancer cells ¹¹⁹
2-Methoxy 3-estradiol loaded polymeric micelle	2-Methoxy 3-estradiol	EG-PLGA and ALA	Enhancing anti-cancer activity in prostate cancer ⁶

DMPC-Dimyristoyl-sn-glycero-3-phosphocholine, PLGA-Poly Lactic co Glycolic Acid, ALA-Alanine

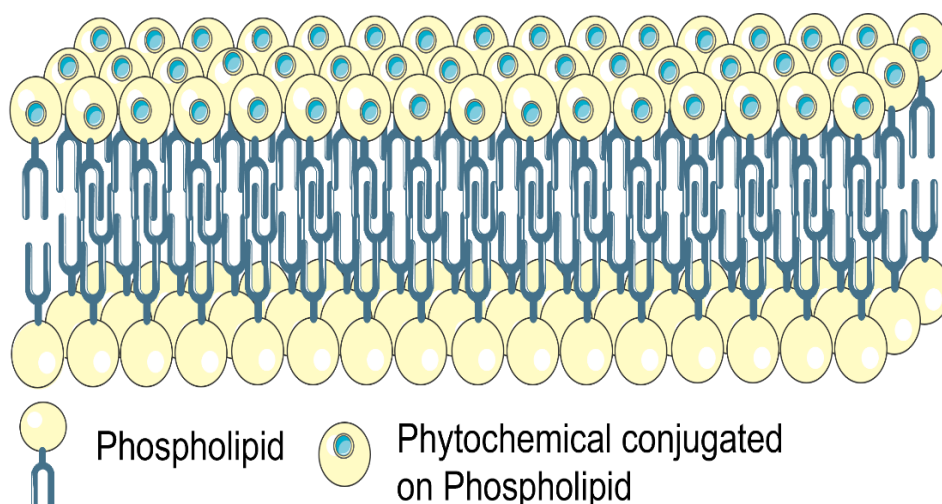


Figure 7: Gene delivery through liposomes

Gene delivery through nanosomes: Gene therapy has arisen as a promising clinical intervention for the treatment of various conditions including cancer, cardiovascular disorders, dermatological disorders, infectious diseases and neurological ailments. Its substantial development over the recent decades has propelled it into the forefront of medical research¹⁵⁶. Currently, gene transfer methods can be categorized into three major groups: viral (transduction) and

physical and direct microinjection⁷⁶. Notably, liposome-based DNA delivery systems have been developed, some of which incorporate molecular components for targeted cell surface receptor recognition or evasion of the lysosomal compartment. Additionally, a recently developed technique utilizing cationic lipids has gained significant interest for its potential in gene transfer¹¹⁸.

Positively charged liposomes, known as cationic liposomes, have gained recognition in the field of gene therapy because of their beneficial interactions with negatively charged DNA and cell membranes⁹⁰. The transfection process using cationic liposomes is highly efficient, as the complex readily binds to and is internalized by cells. The versatile nature of cationic liposomes makes them attractive for DNA delivery into mammalian cells⁴⁶. Liposomes have also been applied for ultrasound technique and enhanced drug delivery, with gas and drugs being encapsulated within the liposomal structure. Echogenic liposomes, produced through various techniques like lyophilization, pressurization and biotin-avidin binding, have demonstrated notable *in vivo* uses in the treatment of cardiac disease, stroke and tumor therapy⁷⁰.

Additionally, liposomes have showcased their efficacy as delivery systems for gene therapy and drug transport to skin tissues. The application of the PINC polymer and a mixture of propylene glycol, alcohol and water have shown success in delivering beta-galactosidase or luciferase DNAs¹¹⁴. Encapsulation of DNA and conjugation with monoclonal antibodies (MAbs) has consistently shown high efficiency. Furthermore, the stability of liposomal complexes and their ability to block transfection of N2A cells have been maintained even after 48 hours in a physiological buffer¹¹⁷.

Limitations of Nanosomal delivery of drugs

Nanosomal drug delivery has emerged as a promising technique to improve the therapeutic effectiveness of drugs through their encapsulation within nanoscale vesicles. These nanosomes are typically composed of lipids, polymers, or other biocompatible materials and can be engineered to accommodate various payloads including small molecule drugs, nucleic acids and proteins. However, despite their potential advantages, there are several limitations associated with the utilization of nanosomal drug delivery systems that necessitate careful consideration. This study aims to provide an encompassing overview of these limitations, encompassing biocompatibility, cost, stability and clearance concerns. Thorough comprehension of these limitations is vital for the development of safe and efficacious nanosomal drug delivery systems for clinical implementation⁷⁴.

One key limitation of nanosomal drug delivery systems is their constrained drug loading capacity due to their small size and surface area. For instance, a study demonstrated that nanosomes loaded with curcumin exhibited a loading efficiency of merely 17.9% owing to the limited solubility of the drug in the lipid bilayer¹⁵. Additionally, nanosomal drug delivery systems can display instability and a restricted shelf life, particularly if they are not stored under appropriate conditions. Research has reported that nanosomes containing docetaxel possessed a short shelf life due to drug degradation and aggregation¹¹⁶. Furthermore, the targeting ability of nanosomal drug delivery systems can be limited, as they may struggle to differentiate between healthy and diseased cells. An investigation revealed that nanosomes containing doxorubicin targeted both cancerous and healthy

cells, leading to toxicity in normal cells⁹⁹. The production of nanosomes can be costly, time-consuming and challenging to scale up for clinical use. For instance, the production of nanosomes containing siRNA was limited, posing challenges in translating the technology into clinical practice⁶². Additionally, nanosomes may elicit immune responses and provoke toxicity in the body due to their foreign nature and potential interactions with biological components. Studies have demonstrated that nanosomes containing siRNA induced an immune response in mice, resulting in liver toxicity⁹⁶.

Conclusion

In summary, liposomes have revolutionized the fields of disease management, pharmaceutical biotechnology and gene therapy. These lipid-based nanoparticles have showcased remarkable versatility and effectiveness as carriers for various therapeutic agents, allowing for precise drug delivery to specific locations within the body. Furthermore, liposomes have played a crucial role in advancing gene therapy by facilitating the efficient delivery of genetic materials, opening up new avenues for treating a wide range of medical conditions.

As technology continues to advance and our understanding of liposomes deepens, their potential in drug delivery and therapeutic applications remains incredibly promising. Therefore, it is crucial for researchers and scientists to continue exploring and refining the utilization of liposomes, offering innovative solutions to current and future healthcare challenges.

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