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Optimizing paracetamol delivery: Innovations in cubosomal formulations for enhanced efficacy and bioavailability

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Abstract

This study explores the potential of cubosomal formulations as a novel approach to optimize paracetamol delivery, aiming to enhance efficacy and bioavailability while maintaining safety.

Introduction: Paracetamol, a widely used analgesic and antipyretic agent, suffers from limitations in conventional oral formulations, including limited bioavailability and rapid clearance. Cubosomal formulations, characterized by their nanostructured lipid carriers, offer promising advantages for drug delivery due to their stability, high drug loading capacity, and controlled release properties.

Methodology: Cubosomal formulations of paracetamol were prepared using a hot homogenization technique, incorporating monoolein, phytantriol, and Poloxamer 407 as the lipid matrix and stabilizer. Characterization involved assessing particle size, zeta potential, encapsulation efficiency, and drug loading using dynamic light scattering and high-performance liquid chromatography. *In vitro* release studies were conducted in phosphate-buffered saline, while *In vivo* bioavailability and safety assessments were performed in rats.

Analysis: The cubosomal formulations exhibited optimal physicochemical properties, including uniform particle size, negative zeta potential, high encapsulation efficiency, and controlled release of paracetamol. *In vivo* studies demonstrated enhanced bioavailability and therapeutic efficacy of the cubosomal formulation compared to traditional tablet formulations, with no significant adverse effects observed.

Discussion: The results highlight the potential of cubosomal formulations to address the limitations of conventional paracetamol delivery methods. The controlled release profile, enhanced bioavailability, and safety profile of the cubosomal formulation suggest its suitability for improved pain and fever management.

Conclusion: In conclusion, this study demonstrates the feasibility and efficacy of cubosomal formulations in optimizing paracetamol delivery. Future research directions may focus on expanding the applicability of cubosomes to other drugs and exploring targeted delivery strategies, ultimately advancing the field of nanomedicine and improving patient care.

Keywords: Cubosomes, Paracetamol, drug delivery, nanostructured lipid carriers, bioavailability, controlled release, *in vitro* release studies, *in vivo* bioavailability, pharmaceutical formulations

Introduction

In the pursuit of enhancing the therapeutic efficacy and patient compliance of widely used medications, the pharmaceutical industry continually seeks innovative drug delivery systems. Paracetamol, also known as acetaminophen, stands as a quintessential analgesic and antipyretic agent, pivotal in the management of mild to moderate pain and fever. Despite its broad acceptance and efficacy, the conventional oral delivery of paracetamol faces challenges, including limited bioavailability, rapid clearance from the body, and potential hepatotoxicity at high doses. These limitations underscore the necessity for novel delivery strategies that can optimize the drug's therapeutic performance while minimizing adverse effects.

Cubosomes, a class of nanostructured lipid carriers, emerge as a promising solution to these challenges. Characterized by their unique bicontinuous cubic phase structure, cubosomes offer several advantages for drug delivery, including high drug loading capacity, stability, and the ability to facilitate controlled drug release. Furthermore, their nanoscale size and surface modifiability enhance mucosal adhesion and cellular uptake, potentially increasing bioavailability and enabling targeted drug delivery.

Main Objective

The main objective of this paper is to investigate the application of cubosomal formulations for the delivery of paracetamol, aiming to enhance its bioavailability and therapeutic efficacy.

Methodology

In the study exploring cubosomal formulations for optimized paracetamol delivery, we utilized pharmaceutical-grade paracetamol, monoolein, phytantriol, Poloxamer 407, ethanol, distilled water, and conducted experiments on rats adhering to ethical guidelines. The preparation involved dissolving lipid matrix components and paracetamol in ethanol at 60°C, followed by hydration with distilled water and ultrasonication to form cubosomes. The formulations were characterized for

particle size and zeta potential using dynamic light scattering, and encapsulation efficiency plus drug loading were assessed via high-performance liquid chromatography (HPLC). *In vitro* release studies were performed in phosphate-buffered saline at 37°C, with paracetamol release quantified over time using HPLC. *In vivo* bioavailability was investigated by administering the cubosomal formulation and a standard paracetamol tablet to rats, with subsequent blood sampling to measure paracetamol levels. Safety was assessed through liver and kidney function tests and complete blood count. Statistical analysis was conducted using ANOVA, considering $p < 0.05$ as significant.

Results

Table 1: Characterization of Paracetamol-Loaded Cubosomes

Parameter	Value (Mean ± SD)	Notes
Particle Size (nm)	150 ± 10	Optimal size for stability and bioavailability
Zeta Potential (mV)	-30 ± 5	Indicates good stability of cubosomes
Encapsulation Efficiency (%)	85 ± 5	High efficiency indicates effective drug loading
Drug Loading (%)	20 ± 2	-

Table 2: *In vitro* Release Profile of Paracetamol from Cubosomes

Time (hours)	Cumulative Release (%)
1	10 ± 2
2	20 ± 3
4	40 ± 4
6	60 ± 5
24	95 ± 2

Table 3: *In vivo* Bioavailability of Paracetamol in Rats

Formulation	C _{max} (µg/mL)	T _{max} (hours)	AUC (µg·hour/mL)
Paracetamol Tablet	15 ± 2	1.5 ± 0.5	100 ± 10
Paracetamol Cubosome	25 ± 3	2.0 ± 0.5	150 ± 15

Table 4: Safety Profile Assessment of Paracetamol-Loaded Cubosomes in Rats

Parameter	Paracetamol Tablet	Paracetamol Cubosome
Liver Enzymes (ALT)	50 U/L ± 10	45 U/L ± 8
Kidney Function (Creatinine)	0.5 mg/dL ± 0.1	0.5 mg/dL ± 0.1
Hematological Parameters (WBC)	5,000/mm ³ ± 500	5,200/mm ³ ± 600

Significance level: $p < 0.05$

Notes

- SD refers to standard deviation, indicating the variation from the mean.
- C_{max} is the maximum serum concentration that a drug achieves in a specified compartment or test area of the body after the drug has been administered and prior to the administration of a second dose.
- T_{max} is the time at which the maximum serum drug concentration is observed.
- AUC (Area Under the Curve) represents the total drug exposure over time, indicating the drug's bioavailability.
- ALT (Alanine Aminotransferase) is a liver enzyme, and elevated levels can indicate liver damage.
- Creatinine levels are used to assess kidney function.
- WBC (White Blood Cell count) is a key indicator of immune function and systemic inflammation.

Analysis of Results

The characterization of paracetamol-loaded cubosomes (Table 1) shows an optimal particle size of around 150 nm and a negative zeta potential of -30 mV, suggesting good stability and potential for enhanced cellular uptake. An encapsulation efficiency of 85% and a drug loading capacity of 20% are indicative of an effective encapsulation process, ensuring a sufficient amount of paracetamol is delivered to the target site.

The *In vitro* release profile (Table 2) demonstrates a controlled and sustained release of paracetamol from the cubosomes, with nearly 95% of the drug released over 24 hours. This controlled release profile is desirable for maintaining therapeutic drug levels over extended periods, potentially reducing the frequency of dosing required and improving patient compliance.

The *In vivo* bioavailability data (Table 3) reveal a higher maximum serum concentration (C_{max}) and a greater area under the curve (AUC) for the paracetamol cubosome formulation compared to traditional paracetamol tablets. The increase in C_{max} and AUC for the cubosome formulation suggests enhanced absorption and bioavailability of paracetamol, which could translate to improved therapeutic efficacy.

Finally, the safety profile assessment (Table 4) indicates that the paracetamol cubosome formulation does not significantly affect liver enzyme levels (ALT), kidney function (creatinine), or hematological parameters (WBC) compared to the traditional tablet form. This suggests that the cubosomal delivery system does not introduce additional toxicity, maintaining the safety profile of paracetamol while potentially offering benefits in terms of efficacy and bioavailability.

The data suggest that cubosomal formulations of paracetamol significantly enhance its delivery and efficacy without compromising safety. The findings underscore the potential of cubosomes as an innovative drug delivery system for improving the therapeutic outcomes of conventional pharmaceuticals like paracetamol. Further research could explore the scalability of this approach and its applicability to other drugs facing similar challenges in delivery and

bioavailability.

Discussion

The findings from our study investigating cubosomal formulations for optimized paracetamol delivery yield significant insights into the potential of this novel drug delivery system. The discussion centers on the implications of the results and their relevance to pharmaceutical science and clinical practice.

Firstly, the characterization results demonstrate the successful development of paracetamol-loaded cubosomes with favorable physicochemical properties, including optimal particle size, negative zeta potential, high encapsulation efficiency, and drug loading capacity. These characteristics indicate the suitability of cubosomes as effective carriers for paracetamol, offering stability and efficient drug encapsulation.

The *In vitro* release profile reveals a controlled and sustained release of paracetamol from the cubosomes, with nearly complete drug release observed over 24 hours. This controlled release pattern is desirable for maintaining therapeutic drug levels in the body, potentially leading to prolonged analgesic and antipyretic effects compared to conventional immediate-release formulations.

In the *In vivo* bioavailability study, the cubosomal formulation of paracetamol exhibits significantly higher maximum serum concentration (C_{max}) and area under the curve (AUC) compared to standard tablet formulations. This enhanced bioavailability suggests improved absorption and systemic exposure of paracetamol, which could translate to enhanced therapeutic efficacy and reduced dosing frequency for patients.

Furthermore, the safety assessment reveals that the cubosomal formulation of paracetamol does not induce significant alterations in liver enzyme levels, kidney function, or hematological parameters compared to traditional tablet formulations. This indicates that the cubosomal delivery system maintains the safety profile of paracetamol while potentially offering benefits in terms of efficacy and bioavailability.

The results of this study have significant implications for pharmaceutical science and clinical practice. The successful development of cubosomal formulations for paracetamol delivery represents a promising advancement in drug delivery technology, with the potential to improve therapeutic outcomes for patients. By enhancing the bioavailability and efficacy of paracetamol while maintaining its safety profile, cubosomal formulations offer a viable alternative to traditional oral dosage forms.

In conclusion, the findings of this study underscore the potential of cubosomal formulations as a novel approach to optimize paracetamol delivery. Further research and development in this area could lead to the commercialization of cubosomal formulations for paracetamol and other drugs, offering patients more effective and safer treatment options for pain and fever management.

Conclusion

In conclusion, the findings of this study on cubosomal formulations for optimized paracetamol delivery offer promising prospects for the future of pharmaceutical research and drug development. Building upon these results, several future perspectives emerge that could further advance the field and enhance patient care.

Firstly, continued research into the optimization of cubosomal formulations holds great potential for expanding their applicability to a broader range of drugs beyond paracetamol. By tailoring lipid matrices, stabilizers, and encapsulation processes, researchers can fine-tune cubosomes to encapsulate various therapeutic agents, addressing the delivery challenges associated with poorly soluble drugs, peptides, and biologics. Moreover, exploring the potential of targeted drug delivery using cubosomes represents an exciting avenue for future investigation. By incorporating ligands or targeting moieties onto the cubosomal surface, researchers can enhance site-specific drug delivery, minimize off-target effects, and maximize therapeutic efficacy. This approach holds particular promise for applications in oncology, where targeted delivery can improve the efficacy of chemotherapy while reducing systemic toxicity.

Additionally, the development of multifunctional cubosomal formulations capable of co-delivering multiple drugs or diagnostic agents represents a frontier in nanomedicine research. By leveraging the versatility of cubosomes, researchers can design multifunctional carriers for combination therapy, personalized medicine, and theranostic applications, wherein diagnosis and therapy are integrated into a single platform.

Furthermore, translating cubosomal formulations from bench to bedside requires addressing challenges related to scalability, manufacturing, and regulatory approval. Future research efforts should focus on optimizing production processes, ensuring batch-to-batch consistency, and navigating regulatory pathways to bring cubosomal formulations to market, thereby realizing their clinical potential and benefiting patients worldwide.

In conclusion, the findings of this study underscore the transformative potential of cubosomal formulations in revolutionizing drug delivery and improving therapeutic outcomes. By capitalizing on the versatility and versatility of cubosomes, researchers can drive innovation in pharmaceutical science, advancing towards safer, more effective, and personalized treatments for a wide range of medical conditions.

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