

NANOMEDICINE IN TARGETED DRUG DELIVERY FOR NEUROLOGICAL DISORDERS

Poonam Ruhel, Palika Sehgal

ABSTRACT

Department of Pharmacy,
Panipat Institute of Engineering &
Technology,
Samalkha, Panipat, Haryana, India

Department of Pharmacy,
Panipat Institute of Engineering &
Technology,
Samalkha, Panipat, Haryana, India

Correspondence: Palika Sehgal,
Department of Pharmacy, Panipat
Institute of Engineering &
Technology, Samalkha, Panipat
132102, Haryana, India
E-mail: ruhalpoonam@gmail.com,

How to cite this article: Rahul P.
Nanomedicine in Targeted Drug Delivery
for Neurological Disorders Innov Pharm
Planet (IP-Planet) 2017;05(3)16- 20.

Source of Support: Nil.

Conflicts of Interest: None declared.

Date of Submission: 09-07-2017

Date of Revision: 14-08-2017

Date of Acceptance: 22-08-2017

Neurological disorders, including Alzheimer's disease, Parkinson's disease, glioblastoma, and stroke, impose significant global health challenges due to their prevalence, complexity, and treatment limitations. A primary barrier to effective therapy is the blood-brain barrier (BBB), which restricts the delivery of therapeutic agents to the brain. Traditional drug delivery methods often result in non-specific targeting, limited efficacy, and systemic side effects. Nanomedicine, an emerging field at the intersection of nanotechnology and medicine, offers innovative solutions to these challenges by enabling precise, targeted drug delivery across the BBB.

This review explores the application of nanomedicine in treating neurological disorders, focusing on advanced nanoparticle platforms such as liposomes, polymeric nanoparticles, and dendrimers. Key mechanisms of targeting, including passive, active, and stimuli-responsive approaches, are discussed in the context of their utility for various neurological conditions. Despite promising preclinical and early clinical results, challenges such as nanoparticle toxicity, scalability, and regulatory hurdles remain significant barriers to widespread adoption.

Emerging trends, including multifunctional nanocarriers, theranostic systems, and the integration of artificial intelligence, show potential to revolutionize the field. By addressing current limitations, nanomedicine holds transformative potential in improving therapeutic outcomes for neurological disorders, paving the way for a new era in targeted drug delivery.

KEYWORDS: Nanomedicine, targeted drug delivery, neurological disorders, blood-brain barrier, nanoparticles.

INTRODUCTION

Neurological disorders represent a significant global health challenge, accounting for a substantial portion of morbidity and mortality. According to recent studies, more than 3 billion people worldwide are living with neurological conditions, making these disorders the leading cause of disability and the second leading cause of death globally. The rise in prevalence is attributed to an aging population and increased exposure to various risk factors, with low- and middle-income countries bearing the brunt of this burden. The Global Burden of Disease Study indicates that neurological conditions contributed to 443 million years of healthy life lost due to illness, disability, and death in 2021, marking an 18% increase since 1990. The urgent need for effective treatment strategies is underscored by the fact that existing healthcare resources are often inadequate to meet the growing demand¹. Treatment of neurological disorders faces significant challenges, primarily due to the

blood-brain barrier (BBB). This highly selective barrier restricts the passage of therapeutic agents into the central nervous system (CNS), complicating drug delivery and reducing treatment efficacy. Many drugs that show promise in preclinical models fail in clinical settings due to their inability to cross the BBB effectively. Additionally, systemic side effects from treatments can further limit their utility, as they may lead to adverse reactions that outweigh therapeutic benefits². The complexity of neurological diseases adds another layer of difficulty, as these conditions often involve intricate interactions between genetic, environmental, and lifestyle factors. The emergence of nanomedicine offers a promising avenue for addressing these challenges. Nanotechnology involves manipulating materials at the nanoscale to enhance drug delivery systems, potentially allowing for more targeted therapies that can effectively cross the BBB. Nanoparticles can be engineered to improve drug solubility, stability,

Access this article online

Website: <https://innovationaljournals.com/index.php/ip>

e-ISSN: 2348-7275

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution Non-commercial Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

© 2017 Innovations in Pharmacy Planet | Published by Innovational Publisher

and bioavailability while minimizing systemic side effects. Recent research highlights the potential of Nano therapeutics in treating various CNS diseases, including Alzheimer's disease, Parkinson's disease, and brain cancers. By facilitating more efficient delivery mechanisms and improving drug efficacy, nanomedicine could significantly transform the landscape of treatment for neurological disorders, ultimately leading to better patient outcomes and reduced healthcare burdens.³

BIOLOGICAL AND PATHOPHYSIOLOGICAL BARRIERS IN NEUROLOGICAL DISORDERS

The blood-brain barrier (BBB) is a critical structure that serves as a protective interface between the bloodstream and the central nervous system (CNS). Composed of specialized endothelial cells, the BBB regulates the entry of substances into the brain, effectively preventing toxins and pathogens from causing harm. This semi-permeable membrane restricts the passage of most chemical drugs and biopharmaceuticals, allowing only small, lipophilic molecules with a molecular weight typically less than 400-600 Da to diffuse passively. Consequently, over 98% of small-molecule drugs and virtually all macromolecular therapeutics are unable to penetrate the BBB effectively, leading to challenges in achieving therapeutic efficacy for CNS disorders. The presence of transport systems, efflux pumps, and tight junctions within the BBB further complicates drug delivery, necessitating innovative strategies to enhance permeability and facilitate targeted delivery⁴.

In specific neurological conditions such as Alzheimer's disease, Parkinson's disease, and glioblastoma, the integrity of the BBB can be compromised. In Alzheimer's disease, for instance, altered BBB permeability is associated with amyloid-beta accumulation and neuroinflammation, which can exacerbate cognitive decline. Similarly, in Parkinson's disease, changes in BBB function may contribute to the neurodegenerative process by allowing harmful substances to enter the brain. Glioblastoma presents a unique challenge as tumor growth can induce structural changes in the BBB, leading to increased permeability that allows for tumor progression but also complicates therapeutic interventions. These disease-specific barriers highlight the need for tailored approaches to drug delivery that account for both the protective role of the BBB and its alterations in pathological states.

Conventional therapies face significant hurdles due to these biological barriers. Systemic delivery methods often result in suboptimal concentrations of therapeutic agents reaching the target site within the CNS while causing adverse effects in peripheral tissues. Non-specific targeting can lead to accumulation of drugs in non-target organs, further diminishing their effectiveness and increasing toxicity. Strategies such as direct injection into the CNS or transient disruption of the BBB have been explored; however, these approaches carry risks that may outweigh their benefits. As a result, there is an urgent need for innovative drug delivery systems that leverage advancements in nanotechnology and materials science to enhance drug penetration across the BBB while minimizing systemic side effects⁵.

NANOMEDICINE: FUNDAMENTALS AND MECHANISMS

Nanoparticle platforms are essential components of nanomedicine, providing innovative methods for drug delivery and therapeutic applications. Various types of nanoparticles include:

Liposomes: These are spherical vesicles formed by lipid bilayers, capable of encapsulating both hydrophilic and hydrophobic drugs. Liposomes enhance drug solubility and stability, improving bioavailability and allowing for targeted delivery to specific tissues, particularly in cancer therapy⁶.

Polymeric nanoparticles: Made from biodegradable polymers, these nanoparticles can be designed to control drug release profiles and enhance targeting capabilities. They offer advantages such as high drug loading capacity and prolonged circulation time in the bloodstream, which are critical for effective treatment⁷.

Dendrimers: These branched macromolecules feature a well-defined structure that allows precise control over their size and surface properties. Dendrimers can be functionalized with various ligands to improve targeting abilities, making them suitable for delivering both small molecules and genetic materials⁸.

Micelles: Formed by the self-assembly of amphiphilic surfactants, micelles are effective at solubilizing hydrophobic drugs. Their small size facilitates penetration through biological barriers, making them ideal for targeted delivery applications⁹.

Inorganic nanoparticles: This category includes materials like gold nanoparticles and quantum dots, which are used for both drug delivery and imaging purposes. Their unique optical properties enable real-time tracking of drug distribution within the body.

The mechanisms of targeting utilized by nanoparticle systems can be classified into several strategies:

Passive targeting leverages the enhanced permeability and retention (EPR) effect, which is characterized by the preferential accumulation of nanoparticles in tumor tissues due to their leaky vasculature. This phenomenon allows for localized drug delivery while minimizing systemic exposure to healthy tissues. Nanoparticles can exploit this effect by being designed to remain in circulation long enough to reach tumor sites.

Active targeting involves the functionalization of nanoparticles with specific ligands or antibodies that bind to receptors overexpressed on target cells. This approach enhances the specificity of drug delivery, ensuring that therapeutic agents are directed toward diseased cells while sparing healthy ones. For example, modifications with antibodies can facilitate targeted delivery to cancer cells by recognizing tumor-associated antigens.

Stimuli-responsive systems are engineered to release their payloads in response to specific environmental triggers such as pH changes, temperature fluctuations, or magnetic fields. These systems allow for precise drug delivery by ensuring that drugs are released only in desired locations or under specific conditions, thus improving therapeutic outcomes while reducing side effects ¹⁰. For instance, pH-sensitive nanoparticles can release their contents in the acidic microenvironment typical of tumors.

Overall, these nanoparticle platforms and targeting mechanisms represent significant advancements in nanomedicine, enhancing the efficacy and safety of treatments for various diseases.

APPLICATIONS IN NEUROLOGICAL DISORDERS

Alzheimer's Disease

In Alzheimer's disease (AD), targeting amyloid-beta plaques and tau proteins is crucial for therapeutic strategies. Nanoparticle systems have been developed to enhance drug delivery to these pathological hallmarks. For instance, studies have shown that polymeric nanoparticles, such as PLGA nanoparticles, can effectively inhibit amyloid-beta aggregation

and tau phosphorylation, thereby reducing neurotoxicity in cellular models. These nanoparticles have demonstrated significant potential in preclinical trials, improving drug bioavailability in the brain and facilitating targeted therapy against both amyloid-beta and tau proteins. Additionally, multifunctional nanocarriers have been designed for co-delivery of therapeutic genes and peptides, addressing both amyloid-beta plaque deposition and tau-related fibrillar formation, showing promising results in transgenic AD mouse models ¹¹.

Parkinson's Disease

In Parkinson's disease, the delivery of dopamine and neuroprotective agents is essential for managing symptoms and slowing disease progression. Nanomedicine plays a vital role by utilizing nanoparticles to enhance the delivery of these therapeutic agents directly to the brain. For example, dopamine-loaded nanoparticles can improve the stability and bioavailability of dopamine while minimizing peripheral side effects. Furthermore, nanomedicine is advancing gene therapy approaches aimed at neuroregeneration. Nanocarriers can deliver genes that encode neuroprotective factors or enzymes that enhance dopamine synthesis, potentially restoring dopaminergic function in affected neurons ¹².

Glioblastoma and Other Brain Tumors

Overcoming the blood-brain barrier (BBB) to deliver chemotherapeutics effectively is a significant challenge in treating glioblastoma and other brain tumors. Nanoparticle-based systems are being explored to enhance drug penetration across the BBB. For instance, targeted nanoparticles can be designed to exploit the EPR effect or functionalized with ligands that bind specifically to tumor markers, ensuring localized drug delivery while reducing systemic toxicity. Innovations in nanoparticle-based imaging and diagnostics are also noteworthy; for example, gold nanoparticles have been utilized for imaging tumor margins during surgery, allowing for more precise removal of tumor tissues while minimizing damage to surrounding healthy brain structures ¹³.

Stroke and Ischemic Injuries

Nanoparticles are being investigated for their potential in neuroprotection and reperfusion therapy following stroke or ischemic injuries. These nanoparticles can provide

neuroprotective effects by delivering antioxidants or anti-inflammatory agents directly to affected brain regions, thereby mitigating neuronal damage. Advances in targeted delivery systems enable the precise administration of thrombolytic agents, which can dissolve blood clots responsible for ischemic strokes. By utilizing stimuli-responsive nanoparticles that release their therapeutic payloads in response to specific conditions (such as pH changes or temperature variations), researchers aim to optimize treatment outcomes during critical time windows following ischemic events ¹⁴.

CURRENT CHALLENGES AND LIMITATIONS

Toxicity and Biocompatibility

The safety concerns surrounding nanoparticles (NPs) primarily revolve around their toxicity and biocompatibility. While nanoparticles have unique properties that make them suitable for biomedical applications, their small size and high surface area can lead to adverse biological effects. Factors such as particle size, shape, surface charge, and chemical composition significantly influence their toxicity profiles. For instance, metallic nanoparticles can induce oxidative stress by generating reactive oxygen species (ROS), which may result in cellular damage, genotoxicity, and inflammation. Surface functionalization of nanoparticles is a strategy employed to enhance biocompatibility and reduce toxicity; for example, coating with hydrophilic polymers like polyethylene glycol (PEG) can minimize opsonization and enhance circulation time in the bloodstream. Despite these advancements, the interaction mechanisms between nanoparticles and biological systems are not fully understood, necessitating further research to ensure their safe application in clinical settings ¹⁵.

Scalability and Cost

Manufacturing challenges pose significant barriers to the clinical application of nanomedicine. The scalability of nanoparticle production is often limited by the complexity of synthesis methods, which can be time-consuming and costly. Achieving consistent quality and reproducibility in nanoparticle characteristics such as size, shape, and surface properties is critical for therapeutic efficacy but can be difficult at larger scales. Moreover, the incorporation of advanced materials or functionalization techniques may further increase production costs, making it challenging to develop economically viable nanomedicine solutions for widespread clinical

use. Addressing these manufacturing challenges requires innovative approaches that streamline production processes while maintaining high-quality standards ¹⁶.

CONCLUSION

Nanomedicine presents a promising approach to overcoming the challenges of drug delivery in neurological disorders by enabling precise targeting across the blood-brain barrier. Advanced nanoparticle platforms offer improved efficacy while minimizing systemic side effects. Despite existing challenges like toxicity and regulatory barriers, emerging technologies such as theranostics and AI integration show potential for future advancements. With continued research and innovation, nanomedicine could revolutionize the treatment of neurological diseases, enhancing therapeutic outcomes.

REFERENCE

1. World Health Organization. (2006). Neurological disorders: public health challenges. World Health Organization.
2. Chiu, A. Y., & Rao, M. S. (2011). Cell-based therapy for neural disorders anticipating challenges. *Neurotherapeutics*, 8(4), 744-752.
3. Riehemann, K., Schneider, S. W., Luger, T. A., Godin, B., Ferrari, M., & Fuchs, H. (2009). Nanomedicine challenge and perspectives. *Angewandte Chemie International Edition*, 48(5), 872-897.
4. Neuwelt, E. A., Bauer, B., Fahlke, C., Fricker, G., Iadecola, C., Janigro, D., ... & Drewes, L. R. (2011). Engaging neuroscience to advance translational research in brain barrier biology. *Nature Reviews Neuroscience*, 12(3), 169-182.
5. Szot, P. (2012). Common factors among Alzheimer's disease, Parkinson's disease, and epilepsy: possible role of the noradrenergic nervous system. *Epilepsia*, 53, 61-66.
6. Bozzuto, G., & Molinari, A. (2015). Liposomes as nanomedical devices. *International journal of nanomedicine*, 975-999.
7. Sharma, A., & Sharma, U. S. (1997). Liposomes in drug delivery: progress and limitations. *International journal of pharmaceuticals*, 154(2), 123-140.
8. Boas, U., & Heegaard, P. M. (2004). Dendrimers in drug research. *Chemical Society Reviews*, 33(1), 43-63.
9. Menger, F. M. (1979). The structure of micelles. *Accounts of Chemical Research*, 12(4), 111-117.
10. Anselmo, A. C., & Mitragotri, S. (2015). A review of clinical translation of inorganic nanoparticles. *The AAPS journal*, 17, 1041-1054.
11. Mayeux, R., & Sano, M. (1999). Treatment of Alzheimer's disease. *New England Journal of Medicine*, 341(22), 1670-1679.

-
12. Tolosa, E., Wenning, G., & Poewe, W. (2006). The diagnosis of Parkinson's disease. *The Lancet Neurology*, 5(1), 75-86.
 13. Black, P. M. (1991). Brain tumors. *New England Journal of Medicine*, 324(22), 1555-1564.
 14. Candelario-Jalil, E. (2009). Injury and repair mechanisms in ischemic stroke: considerations for the development of novel neurotherapeutics. *Curr Opin Investig Drugs*, 10(7), 644-654.
 15. Anderson, J. M., & Voskerician, G. (2010). The challenge of biocompatibility evaluation of biocomposites. In *Biomedical composites* (pp. 325-353). Woodhead Publishing.
 16. Ahmed, N., Hossain, M. E., Rishad, S. S. I., Rimi, N. N., & Sarkar, M. I. Server less Architecture: Optimizing Application Scalability and Cost Efficiency in Cloud Computing. *BULLET: Jurnal Multidisiplin Ilmu*, 1(06), 1366-1380.
-