ORIGINAL ARTICLE



JOURNAL OF PHARMACOLOGY AND BIOMEDICINE

Published by RB Science

Home Page: www.jpbiomed.com

Development of ciprofloxacin loaded niosomal gel for the treatment of acne

Mahesh Sithele*, Urwesh S. Narwaria

IPS College of Pharmacy, Gwalior, MP, India

Article History

Received on: 02/03/2024 Revised on: 26/03/2024

Accepted on: 01/04/2024

Published on: 07/04/2024

Keywords

Niosome

Gel

Carbopol

Bioavailability

Ciprofloxacin

ABSTRACT

In the present study niosomes of ciprofloxacin were developed by thin film hydration technique and incorporated into gel formulation suitable for topical application. The niosomes prepared using varving ratio of surfactant (span 20 and tween 20) and cholesterol were evaluated for entrapment efficiency and in vitro release. From the results of the release studies it was found that the maximum amount of drug was released from formulations F2 (79.74 %) and F5 (71.68 %) over a period of 12 h at an almost steady rate. The higher amount of drug release along with the higher entrapment efficiency make the formulations F2 and F5 containing surfactant to cholesterol ratio of 1:2 the most promising formulations. The gel loaded with niosomal formulations F2 and F5 were prepared using Carbopol 934 as the gelling agent and propylene glycol as the plasticizer. The drug content in all the formulations ranged from 96.4 to 99.1 % confirming the incorporation of the niosomes into the gel base. The in-vitro drug diffusion study of ciprofloxacin niosomal gel was done using dialysis membrane in Franz diffusion cell using phosphate buffered saline (PBS) pH 7.4 enriched with 10% v/v of methanol as the diffusion medium. The formulations NG1 (80.22 %) and NG3 (72.68 %) containing 1% Carbopol 934 were found to release significant amount of drug from the gel over a period of 12 h as compared to the formulations with 2% carbopol.

*Corresponding Author

Mahesh Sithele

Email: ipsgwa@gmail.com

JOURNAL OF PHARMACOLOGY AND BIOMEDICINE

ISSN No. 2456-8244

Publication Hosted by rbscience.co.in

Scan QR to visit website



Introduction

The primary objective of the novel drug delivery system is to attain a steady state blood or tissue concentration of the drug that is therapeutically effective and non-toxic for an extended period of time1. Vesicular systems are prepared by the self-assembly of the lipids/ surfactants to form the bilayers where an aqueous space is present in the core.2 Drug delivery via vesicular system offer many advantages like increased solubility, high permescience like immunology, membrane biology, were measured at 276 nm. diagnostic techniques and genetic engineering.² Niosomes are lamellar vesicles composed Formulation of ciprofloxacin Niosomes⁷ of non-ionic surfactants and cholesterol. Incomparison with liposomes, they offer some advantages, such as lower cost, greaterchemical stability and longer storage time. They also have high compatibility withbiological systems and low toxicity due to their non-ionic nature.3,4

Poor water solubility, high metabolic clearance, short half-life and other pharmacokinetto their ability to increase membrane fluidity tion are presented in Table 1. and their capacity to solubilize and extract Evaluation of Cirpofloxacin loaded Niomembrane components.6 On the basis of somes these evidences, it was envisioned that nonionic surfactant based vesicles (niosomes) can help in achieving the goals of increasing bioavailability and half-life of ciprofloxacin.

Material and Methods

Preformulation Studies

The preformulation studies were carried out for confirming the identity of the drug and to ascertain the compatibility amongst the drug and the excipient (polymers) used in formula- was measured spectrophotometrically at 276 tion.

The organoleptic properties of the procured

drug sample were examined using sensory organs and include color, odor, taste and appearance. The solubility of the drug in various solvents was also observed. The melting point of ciprofloxacin hydrochloride was determined by capillary method. Loss on drying was determined by drying the pure drug in an oven at 100°C to 105°C for 3 hours.

Standard curve for ciprofloxacin

Ciprofloxacin 10 mg was weighed and dissolved in methanol in a 100 ml volumetric ability, acts as a carrier for various drugs flask. The flask was shaken and volume was which exhibits different solubility. It also acts made up to the mark with methanol to give a as drug reservoirs, allows drug targeting and solution containing 100 µg/ml. Appropriate control release. It prolongs the residence time volume of the above stock solution (1 to 10 of drug in the body, reduces toxicity (if selec- ml) from was transferred to volumetric flasks tive uptake is achieved), improves bioavailabil- of 10 ml capacity. The volume was adjusted to ity and reduces cost of therapy, delays elimi- the mark with methanol to obtain concentranation of rapidly metabolizable drug. These tions of 2, 4, 6, 8, and 10 µg/mL. Absorbance systems are widely used in different fields of of each solution against methanol as blank

Ciprofloxacin loaded niosomes were prepared by thin film hydration technique. Accurately weighed quantity of cholesterol and surfactant were dissolved in chloroform methanol mixture ratio (2:1v/v) in a 100 mL volumetric flask. The weighed quantity of drug and dicetyl phosphate was added to the solvent mixture. The solvent mixture was removed from liquid phase using rotary evaporator at 60°C to obtain a thin film on the wall of the flask at ic problems hinder the pharmacodynamic effi- a rotation speed of 150 rpm. The complete cacy of ciprofloxacin.⁵ In order to increase the removal of solvent can be ensured by applying bioavailability, increase the half-life and pro- vacuum. The dry lipid film was hydrated with long the duration of action several formula- 5 ml phosphate buffer saline of pH 7.4 at a tions like solid dispersions, nanoparticles, sol- temperature of 60±2°C for a period of 2 hour id-lipid nanoparticles, nanoemulsions etc until the formation of niosomes. All the batchhave been formulated. The non-ionic surfac- es were subjected to sonication process for 2 tant play important role in solubilizing the min using probe sonicator. The ratios of chodrug as well as the permeation enhancers due lesterol and surfactant used in the formula-

Encapsulation efficiency8

Drug entrapped vesicles were separated from un-entrapped drug by centrifugation method. 0.5 ml of ciprofloxacin loaded niosome preparation was added with 0.5 ml of 10% triton X 100 and mixed well then incubated for 1 hour. The triton X 100 was added to lyse the vesicles in order to release the encapsulated ciprofloxacin. The solution was diluted with phosphate buffer saline pH 7.4 and filtered through Whatman filter paper. The filtrate nm using methanol and triton X 100 mixture as blank.

$$Percent \ entrapment \ = \ \frac{Amount \ of \ drug \ entrapped}{Total \ amount \ of \ drug \ added} \times 100$$

Ιn

vitro release study for niosomal preparation9

The niosomal formulation was taken in a dialysis membrane of 5 cm length and suitably suspended in a beaker containing 100 ml diffusion medium of phosphate buffer saline pH 7.4. The temperature of medium was maintained at 37±0.5°C. The medium was stirred by means of magnetic stirrer at a constant speed. 1 ml of sample was withdrawn at every 1 hour and replaced with 1 ml of fresh buffer, so that the volume of diffusion medium was maintained constant at 100 ml. The withdrawn samples were made upto 10 mL using phosphate buffer saline pH 7.4. The samples were measured spectrophotometrically at 276 nm.

Preparation of ciprofloxacin niosomal gel¹⁰

Gel formulations were prepared by soaking varying concentration of Carbopol 934 in water for 24 h. The niosomes equivalent to 2% w/w ciprofloxacin were dissolved in ethanol and was added to the gel with continuous stirring. The plasticizer and other ingredients were added and stirred to obtain the gel noisome loaded gel formulation.

Evaluation of Niosomal gel^{10,11} Determination of pH

The pH of each formulation was determined by pH meter. The pH meter was calibrated using standard buffer solutions of pH 4 and pH 7. 1 mL of the formulation was diluted with distilled water and the pH of the solution was recorded by dipping the electrode in the solution.

Drug content

The drug content of the prepared gel was carried out by dissolving accurately weighed quantity of gel equivalent to 10 mg of the drug in 100 ml volumetric flask and volume was made up to 100 ml with methanol. The content was The melting point of the procured drug sample methanol. The content of ciprofloxacin was determined at 276 nm against methanol as blank in water and phosphate buffer. by using UV-visible spectrophotometer. The drug content was determined from the calibration curve of ciprofloxacin.

Viscosity Determination

Viscosity of the gel was determined using Brook field viscometer DV-1. Temperature of 37±0.5°C was maintained and the spindle no. 52 was **Development of ciprofloxacin niosomes** lowered into gel formulations which were placed in a beaker. The viscosity of each formulation was determined by applying 10rpm speed.

Spreadability

Spreadability of the formulations was determined using indigenously developed apparatus. The apparatus consisted of a wooden block provided with a pulley at a one end. A rectangular ground glass was fixed on the block. An excess of gel (3-5 g) was placed on this plate sandwiched using another glass plate having the dimensions as that of fixed ground plate. A 1 kg weight was placed on the top of the plates for 5 minutes to expel air and to provide a uniform film of the cream between the plates. Excess of the gel was scrapped off from the edges. Weight of 80 g was hung on the hook of the top plate with the help of string attached to the hook and the time (in seconds) required by top plate to cover a distance of 10 cm was noted. Spreadability of the formulation was determined by the following formula:

S = M * L/T

where, S - spreadability; L - distance travelled by the glass slide; T - time in seconds; M weight in the pan

In-vitro drug release study

Drug release from gel was determined by using Franz diffusion cell. Artificial dialysis membranes were soaked in receptor medium for 12 h prior to use. Phosphate buffer saline (12 ml) pH 7.4 enriched with 10% v/v methanol was added into the receptor chamber maintained at 34 ± 1°C. Gel equivalent to 10 mg of drug was placed into donor compartment and the setup was kept on stirring. Aliquots of 5ml were withdrawn at predetermined time intervals from receptor compartment and replaced with fresh buffer till 12 h. The samples were diluted suitably and analyzed spectrophotometrically at 276 nm and the amount of drug released was determined using calibration curve.

Results and Discussion

The observed organoleptic characteristic of the drug sample is presented in Table 3.

filtered through Whatman filter paper and 5 ml was found to be 254-257°C which was equivaof this solution was taken into a 25 ml volumet- lent to the reported standard for ciprofloxacin. ric flask and volume was made up to mark with The loss on drying of ciprofloxacin pure drug was found to be 0.44%. The drug was soluble

Calibration curve of ciprofloxacin

The calibration curve of ciprofloxacin was prepared according to the reported procedure using methanol as the solvent (Figure 1).

In this study, ciprofloxacin loaded niosomes were prepared by thin film hydration technique using cholesterol and non-ionic surfactants such as span 20 and tween 20. Chloroformmethanol mixture (2:1v/v) was used as solvent. employing cold gelling procedure. The gel for-After evaporation of solvent from the formula- mulations were evaluated for various parameter tion, thin film was formed. The thin film was to ascertain the most suitable formulation. hydrated and removed by phosphate buffer saline pH 7.4. Size of the vesicles in formulation Evaluation of niosomal gel was reduced by sonicating the formulation in Probe sonicator. Formulations with different ratios of surfactant and cholesterol were prepared. Several physicochemical characteristics of niosomes such as morphology, vesicle size determination, drug release profile was investigated. Dicetyl phosphate (DCP) was included in the formulation as charge inducing agent. The inclusion of charge inducing agent (DCP) prevented the aggregation and fusion of vesicles. Integrity and uniformity also maintained by dicetyl phosphate.

Percentage drug entrapment efficiency

The unentrapped drug from niosomes was removed by centrifugation technique. The results are presented in Table 4. The entrapment efficiency of the niosomes is governed by the ability of formulation to retain drug molecule in aqueous core or in bilayer membrane of vesicles. After removal of unentrapped drug, the The in-vitro drug diffusion study of ciprofloxacin entrapment of all formulation was studied. Entrapment efficiency was varied with varying the surfactant and cholesterol ratio. Various factors like lipid concentration, drug to lipid ratio, and cholesterol content are liable to affect the entrapment efficiency.

The entrapment efficiency using both the surfactants was determined and it was found that a 1:2 ratio of surfactant and cholesterol exhibited the maximum entrapment of the drug in the core.

In vitro release study

The release of ciprofloxacin from niosomes was determined using the membrane diffusion technique. Release study was carried for 12 hours and results were plotted (Figure 2).

From the results of the release studies it was found that the maximum amount of drug was The objective of the present investigation was to released from formulations F2 (79.74 %) and F5 loaded with niosomes containing ciprofloxacin.

The gel loaded with niosomal formulations F2 and F5 were prepared using Carbopol 934 as the gelling agent and propylene glycol as the plasticizer. The niosomes were suspended in ethanol prior to mixing with the Carbopol gel

The gel formulations were prepared using two concentrations of the gelling agent and were evaluated for physical appearance, pH, viscosity, drug content and in vitro diffusion of the drug. The gel formulations were found to be offwhite in color, homogenous and sticky in feel. The pH of the all the formulations was 6.4 to 6.9 making them suitable for topical application. The formulations were found to possess sufficient viscosity to make then suitable for application to the surface and extrusion from the collapsible tube in which they were packed.

The drug content in all the formulations ranged from 96.4 to 99.1 % confirming the incorporation of the niosomes into the gel base. The results of the evaluation parameters are presented in Table 5.

In vitro drug diffusion from gel formulations

niosomal gel was done using dialysis membrane in Franz diffusion cell using phosphate buffered saline (PBS) pH 7.4 enriched with 10% v/v of methanol as the diffusion medium (Figure 3).

The results of the in vitro diffusion study revealed that increasing the concentration of the gelling agent (Carbopol 934) decreased the release of drug from the gel. The formulations NG1 (80.22 %) and NG3 (72.68 %) containing 1% Carbopol 934 were found to release significant amount of drug from the gel over a period of 12 h as compared to the formulations with 2% carbopol. Thus it was concluded that 1% Carbopol 934 was an appropriate concentration for formulating the niosomal gel.

Conclusion

develop non-ionic surfactant based delivery (71.68 %) over a period of 12 h at an almost system for topical application of ciprofloxacin steady rate. The higher amount of drug release for treatment of fungal diseases. The idea was along with the higher entrapment efficiency to increase the bioavailability and skin permeamake the formulations F2 and F5 containing tion of ciprofloxacin and decrease the side efsurfactant to cholesterol ratio of 1:2 the most fects like skin rashes that are associated with promising formulations. These two formula- the contact of drug to skin. Niosomes are tions were further processed to formulate gel known to present a solution to these side effects and the study proved that niosomes of ciprofloxacin could be easily prepared and formulated as gel for topical application that can provide good skin contact and improve drug bioavailability.

References

- 1. Nagalakshmi S, Kalaiapurmal K, Arul Jothy 11. Mishra A, Kondalkar AK, Lal M, Tripathi D, M, Chaudhari PS, Pushpalatha HB, Shanmuganthan S. Fabrication and Characterization of Herbal Drug -Loaded Nonionic Surfactant Based Niosomal Topical Gel. J Pharm Sci Res 2016; 8(11): 1271-1278
- 2. Dave V, Sharma S, Yadav RB, Agarwal U. Herbal liposome for the topical delivery of ketoconazole for the effective treatment of seborrheic dermatitis. Appl Nanosci 2017; 7: 973-987
- 3. Sharma A (1997) Liposomes in drug delivery: progress and limitations. Int J Pharm 154:123-140
- 4. Gharbavi M, Amani J, Kheiri-Manjili H, Sharafi A. Niosome: A promising nanocarrier for natural drug delivery through bloodbrain barrier. Adv Pharmacol Pharm Sci 2018; doi.org/10.1155/201/6847971
- 5. Kashef MT, Saleh NM, Assar NH, Ramadan MA. The Antimicrobial Activity Ciprofloxacin-Loaded Niosomes against Ciprofloxacin-Resistant and Biofilm-Forming Staphylococcus aureus. Infection and Drug Resistance. 2020; 13: 1619-1629.
- 6. Keservani RK, Sharma AK, Ayaz Md, Kesharwani RK. Novel drug delivery system for the vesicular delivery of drug by the niosomes. Int J Res Controlled Release. 2011; 1:1-8.
- 7. Oumbar M, Ameeduzzafar, Imam SS, Ali J, Ahmad J. Formulation and optimization of lacidipine loaded niosomal gel for transdermal delivery: In-vitro characterization and in-vivo activity. Biomed Pharmacother 2017; 93: 255-266
- 8. Imam SS, Agil M, Akhtar M, Sultana Y, Ali A. Formulation by design-based proniosome for accentuated transdermal delivery of risperidone: in vitro characterization and in vivo pharmacokinetic study, Drug Deliv 2015; 22(8): 1059-1070.
- 9. Ahad A, Aqil M, Kohli K, Sultana Y, Mujeeb M, Ali A. Formulation and optimization of nanotransfersomes using experimental design technique for accentuated transdermal delivery of valsartan, Nanomedicine 2012; 8: 237- 249
- 10. Dantas MGB, Reis SAGB, Damasceno CMD, Rolim LA, Rolim-Neto PJ, Carvalho FO, Quintans-Junior LJ, da Silva Almeida JRG. Development and Evaluation of Stability of a Gel Formulation Containing the Monoterpene Borneol. The Scientific World J 2016.

Dx.doi.org/10.1155/2016/7394685

Singh N. Formulation and characterization of chrysin loaded niosomal vesicular delivery system. Journal of Pharmacology and Biomedicine. 2023; 7(4): 642-650.

Table 1 Composition of Ciprofloxacin Niosomes

Formulation	Ciprofloxacin	Surfactant	Surfactant: Cholesterol
Code	(mg)	Surfactant	(μ M)
F1	100	Span 20	100:100
F2	100	Span 20	100:200
F3	100	Span 20	100:300
F4	100	Tween 20	100:100
F5	100	Tween 20	100:200
F6	100	Tween 20	100:300

Table 2 Composition of gel formulation

Ingredients	NG1	NG2	NG3	NG4
Ciprofloxacin noisome with span 20 (%w/w)	2	2	-	-
Ciprofoxacin noisome with Tween 20 (%w/w)	-	-	2	2
Carbopol 934 (%w/w)	1	2	1	2
Propylene glycol (% w/w)	10	10	10	10
Ethanol (mL)	5	5	5	5
Triethanolamine (% w/w)	0.7	0.7	0.7	0.7
Water (g)	15	15	15	15

Table 3 Organoleptic properties of ciprofloxacin

S.No	Test	Observation		
1	Color	White to off-white		
2	Odor	Odorless		
3	Appearance	Solid, crystalline		
4	Taste	Tastless		

Table 4 Entrapment efficiency

Formulation Code	Surfactant: Cho- lesterol Ratio	Surfactant Used	Percentage Entrapment Efficiency (%)
F1	100:100	Span 20	63
F2	100:200	Span 20	74
F3	100:300	Span 20	62
F4	100:100	Tween 20	68
F5	100:200	Tween 20	71
F6	100:300	Tween 20	61

Table 5 Evaluation of the niosomal gel formulations

Formula- tion code	Color	Appear- ance	рН	Viscosi- ty (cps)	Drug con- tent (%)	Spreadabil- ity (g.cm/ sec)
NG1	Off White	Sticky	6.43	8320	96.4	18.12
NG2	Off White	Sticky	6.67	8670	99.12	14.08
NG3	Off White	Sticky	6.9	8417	97.15	17.56
NG4	Off White	Sticky	6.84	8648	98.97	14.6

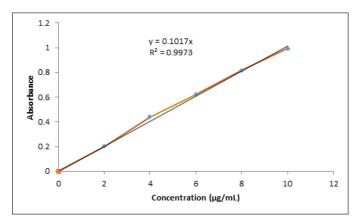


Figure 1 Calibration curve of ciprofloxacin

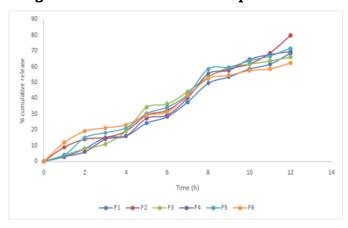


Figure 2 Comparative in vitro release from niosome formulations

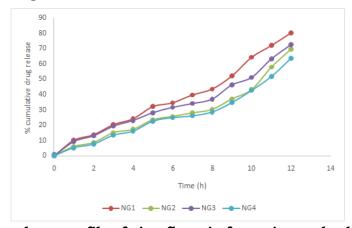


Figure 3 In vitro release profile of ciprofloxacin from niosomal gel formulations