

# Indomethacin microencapsulation in polymeric blends of PLGA502 and PEOT-PBT multiblock copolymer

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### 1. Introduction

Indomethacin (IND) is a non-selective nonsteroidal anti-inflammatory drug (NSAIDs) with high anti-inflammatory, antipyretic and analgesic activity. It has been widely used in the therapeutical management of moderate to severe rheumatic disorders, including rheumatoid arthritis, osteoarthritis and gouty arthritis. Nonetheless, its use as a first-line and long-term therapy is limited by its dose-dependent severe gastrointestinal, renal and hematologic adverse effects [1]. Local administration via intraarticular (I.A.) injection can be an alternative to achieve high drug concentrations into the joint, but the high clearance rate of most drugs limits its use as a long-term administration route.

Microencapsulation seems to be an excellent approach to overcome those limitations, allowing us to increase the retention time of the drug into the joint and to achieve a controlled drug delivery profile [2]. Nonetheless, IND microencapsulation in PLGA was previously reported, showing a high drug delivery rate [3].

This work aims to prepare and characterize INDloaded microspheres made of a polymeric blend of PEOT-PBT and PLGA502 with convenient features to achieve an intra-articular long-term delivery profile.

## 2. Materials and methods

#### 2.1. Preparation of microspheres

Indomethacin-loaded microspheres were fabricated by coaxial ultrasonic atomization. Briefly, both channels of a dual-feed nozzle were fed with a 3 % polymeric blend dispersion in CH2Cl2 composed for a mixture of PLGA502 and 1000PEOT70PBT30 at different ratios, obtaining a spray that was collected over a PVA stirring solution. Indomethacin was dissolved in the polymeric dispersion atomized through the inner channel (0.1 g IND/g polymer), whereas the outer dispersion remained drug-free. The contribution of each channel to the total flow rate (1 ml/min) and PEOT PBT/PLGA502 ratio was set accordingly to an experimental design. Finally, the solvent was removed under continuous stirring, and microparticles were isolated and dried under vacuum.

A central composite rotatable and orthogonal statistical experimental design was built to assess the influence of flow rate through each channel (0.22 – 0.78 ml/min) and polymeric composition (PLGA502; 14.64 – 85.36 %) on particle size, encapsulation efficiency and drug delivery profile. Experimental results were fitted to a quadratic multiple regression model and optimal formulations were selected by surface response methodology.

#### 2.2. Characterization of microspheres

All formulations obtained were characterized in terms of particle size (laser diffraction), surface morphology (SEM), process yield and encapsulation efficiency. Physicochemical interactions between PEOT-PBT and PLGA502 and between IND and the polymeric matrix were characterized by FTIR. Also, thermal analysis of IND, Empty and IND-loaded MPs was performed by DSC. Changes in the degree of crystallinity of the drug and polymers after microencapsulation were assessed by X-ray diffraction.

Cell compatibility of the microspheres was tested by XTT assay in THP-1 cells previously differentiated into macrophages. Further, the phagocytic capacity of THP-1-derived macrophages in the presence of microspheres was evaluated.

## 3. Results and Discussion

All formulations included in the experimental design were successfully prepared, exhibiting high process yield (78.2 – 88.5 %) and encapsulation efficiency (81.3 – 56.2 %). Particle size analysis showed a polydisperse distribution with a mean diameter ranging between 22.8 and 82.6  $\mu$ m. Experimental data of encapsulation efficiency (E.E) and Mean Diameter (d(v,0.5) have successfully fitted a multiple regression quadratic model. Surface response graphs were constructed to assess the influence of formulation parameters over the microspheres' properties (Figure 1).

SEM micrographs showed spherical particles with a porous surface (Figure 2). Further studies by RAMAN confocal microscopy are being carried out to determine the distribution of PLGA502, PEOT-PBT and Indomethacin within the microparticles.



**Fig. 2.** SEM micrographs of IND-loaded microspheres (central point). A)500x B)3000x

DSC thermogram of commercial crystalline IND showed an endothermic peak around 161 °C (Tm). X-ray diffractogram confirmed its crystalline state, showing the characteristic diffraction pattern of  $\gamma$ -polymorph of IND. The absence of significant differences between DSC thermograms of empty and IND-loaded microspheres suggested that the drug is dispersed into the polymeric matrix in an amorphous form with the independence of the polymeric blend composition. These results support those of X-ray diffraction, where the typical diffraction pattern of crystalline IND was not detected in IND-loaded microcapsules, corroborating the amorphous state of the microencapsulated drug. The absence of polymer-polymer and drugpolymer chemical interactions were confirmed by FTIR, suggesting that the polymeric blend is a simple mixture of polymers.

Microspheres' biocompatibility was assessed in THP-1 derived macrophages after 24 hours of



**Figure 1-** Surface-response graphs for encapsulation efficiency and particle size of IND-loaded microspheres prepared by ultrasonic atomization accordingly to the experimental design

co-incubation, achieving high viability rates (95-100 %). Also, microparticles were found to be extensively phagocyted by THP-1 cells.

4. Conclusions

Indomethacin-loaded microparticles with suitable properties for intra-articular

administration were successfully obtained. Also, in vitro drug delivery studies are being performed.

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