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Review

Rationale employment of cell culture versus conventional techniques in pharmaceutical appraisal of nanocarriers

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ABSTRACT

Nanomedicines are enjoying a widespread popularity realizing their intriguing potential to solve drug delivery obstacles. Assessment of major quality attributes of nanocarriers is a crucial process for approving their therapeutic outcomes. Disparate assessment methods that recently encompassed cell line technique were employed. Routinely, a cell line model was viewed as an excellent platform for gene and vaccine deliveries. However, its application in pharmaceutical assessment of nanocarriers was not so far overviewed. This review provides a meticulous look at cell culture implementations in evaluation of major quality attributes of nanocarriers, including oral permeability, cytotoxicity and efficiency of tumor targeting. Among others, cell culture technique strikes the right balance between predictability and throughput. It could circumvent drawbacks of in-vivo and in-vitro techniques while gathering privileges of both. Imperative pharmaceutical considerations demanded for proper application of this technique were emphasized. Furthermore, challenges encountered in assessment of versatile nanocarriers were highlighted with proposed solutions. Finally, future research perspectives in this theme issue were suggested.

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Abbreviations: P-gp, P-glycoproteins; BEs, bioactive excipients; AP, apical; BL, basolateral; Papp, apparent permeability; CYP3A4, cytochrome P450 3A; HCC, hepatocellular carcinoma; BBB, blood–brain barrier; ER, Estrogen receptor.

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58

59 1. Introduction

60 Major restraints of new and old drug moieties are manifested in poor
61 oral bioavailability, harmful side effects, and lack of tissue targeting.
62 Nanomedicines have been recently employed to circumvent therapeutic
63 obstacles of drug delivery. Unique characteristics of such nano-
64 platforms like nanometric range, content of bioactive excipients (BEs),
65 and amenability for surface modification endow them to face numerous
66 therapeutic challenges. Versatile classes of nanocarriers with desperate
67 properties comprised the core of our recent research, including
68 nanoemulsions, self-nanoemulsifying drug delivery system [1,2], liposomes
69 and its modifications [3–5], solid lipid nanoparticles and nano-
70 structured lipid carriers [6,7]. In addition, polymeric nanoparticles [8,
71 9], metal-based nanocarriers [10], and inorganic nanocarriers (carbon
72 nanotubes) are attracting intensified interest as well [11].

73 Proper assessment techniques should be adopted to guarantee therapeutic
74 outcomes of nanocarriers. In the field of oral nanomedicine, assessment
75 of intestinal permeability is the most indicative for bioavailability and
76 efficacy. Accordingly, many attempts were implemented to circumvent
77 permeability related hurdles. These could be achieved either via inclusion
78 of bioactive excipients (BEs) in the nanosystem or by using the whole
79 system for lymphatic targeting. On the other hand, in view of parenteral
80 nanocarriers, appraisal of targeting and uptake efficiency is the most
81 crucial parameter. In particular, high mortality rates were reported
82 from side effects of anti-cancer drugs lacking targeting property. Thus,
83 appraisal of targeting efficiency of parenteral nanocarriers via both passive
84 and active mechanisms is essential as well. For both cases (oral and
85 parenteral nanocarriers) cytotoxicity assessment would be badly required.
86 When an already existing molecule or compound, is reintroduced
87 in a nanomaterial form, it is considered as new chemical entity. Therefore,
88 an update has to be performed to include nanosystem specific properties
89 and toxicities [11,12] that was recognized as nanotoxicology. In a consequence,
90 characterization of major quality attributes of nanocarriers, including
91 permeability, cytotoxicity and targeting potential deemed crucial for
92 fulfilling proposed therapeutic outcomes via different administration
93 routes.

94 In the context of nanocarrier assessment, different in-vivo and in-
95 vitro methods have been employed. In recent research investigations,
96 cell culture technique could circumvent the drawbacks of in-vivo and
97 in-vitro methods while gathering privileges of both. Cell culture technology
98 was extensively employed in biochemical and immunological research
99 disciplines. It is one of the major tools used in cellular and molecular
100 biology, providing excellent model systems for studying the normal
101 physiology and biochemistry of cells (e.g., metabolic studies, aging),
102 mutagenesis and carcinogenesis. In addition, cell culture medium was
103 used in Hybridoma technology for mass production of monoclonal antibodies.
104 Besides, cultured cells are used in viral vaccine production and recombinant
105 DNA technology either as a source of mRNA, gene sequence or as vector.
106 Recently, such techniques gained an enormous interest in the field of drug
107 development and pharmaceutical assessment of dosage forms with a recent
108 highlight on nanocarriers [13].

109 Cell culture is the process by which cells are cultivated under controlled
110 conditions outside the living animal (in vitro) for easier experimental
111 manipulation and regulation of controls [14]. This technique offers
112 privileges of reducing the animal's need, so it avoids the legal and ethical
113 problems of animal experimentation and related variations. In addition,
114 it avoids interference from biological molecules that occurs in vivo, so
115 different secretions and elements will be feasibly monitored. Furthermore,
116 homogeneous population of cells with similar growth requirements could
117 be obtained. Therefore, cell characteristics will be

maintained over several cell generations producing consistent and reproducible
118 results [13–15]. 119

Albeit cell culture technology was extensively utilized as a tool in biomedical
120 field, their pharmaceutical applications were not so far overviewed. The
121 rationale of the current review was to give an overview on implementations
122 of cell culture models in pharmaceutical assessment of nanomedicines,
123 with high emphasis on permeability assays, cytotoxicity studies and
124 targeting efficiency as major quality attributes. 125

2. Terminology involved in cell culture methodologies 126

Before proceeding in cell culture applications in nanomedicine, it may
127 be useful to summarize commonly used terminology of cell and tissue
128 culture. The following definitions will help to explain different types
129 of cultured cell, how to grow and expand cell population, in addition to
130 cell distribution in monolayer and multilayer culture. 131

2.1. Primary culture 132

These are cells derived directly from intact or dissociated tissues or
133 organ fragments taken directly from an animal. The cells have heterogeneous
134 nature, and retain many of the differentiated characteristics of the original
135 cells in vivo. However, most have a limited life span and ultimately die.
136 Until subculture, a culture is considered a primary one, after that it is
137 termed a cell line [13]. 138

2.2. Cell line 139

These cells are subcultured from primary cells but undergo manipulation
140 in the laboratory so that they can be propagated and passaged indefinitely
141 with no apoptosis. The term cell line denotes that it consists of lineages
142 of cells that originally exist in the primary culture, it also could be
143 referred as Established or Continuous cell line. Unlike the unmanipulated
144 primary cells, cell line may not mimic the original cells in vivo cells—
145 after several passages—due to their manipulation. Tumor cell lines are
146 often derived from actual clinical tumors, for example Coca-2 cell line
147 which is derived from human colonic adenocarcinoma, while in transformed
148 cell lines, the transformation may be induced using viral oncogenes or by
149 chemical treatment. For example Hela cell line (human epithelial cervical
150 carcinoma) is transformed by human papillomavirus 18 (HPV18) to
151 immortalized cell line. Most normal cells undergo limited number of
152 subcultures, or passages before they stop growing due to senescence,
153 so that they are referred to as finite cell lines, while tumor or transformed
154 cell lines can divide more rapidly, indefinitely, and form tumors when
155 reintroduced into animals. Another type of cell lines includes clonal cell
156 line which is a cell population derived from a single cell by successive
157 mitoses forming a genetically homogeneous population [13]. 159

2.3. Sub-culture (passage, splitting) 160

Sub-culture is the dissociation of cells from each other and from substrate
161 using proteolytic enzymes. Trypsin and/or EDTA are most commonly used
162 in this process, so it is called trypsinization. Afterward, these cells are
163 transferred or transplanted to a new culture vessel with nutrition media so
164 as to propagate and expand the cell population for study. Reseeding this
165 cell suspension generates a secondary culture, which can be grown up and
166 subcultured again to give a tertiary culture, and so on. It is essential to
167 determine, for each cell the type, source, and 168

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