

**ADVANCED MICROSPHERE TECHNOLOGY: TRANSFORMING
CONTROLLED DRUG RELEASE****Lokesh M.^{1*} and Bhuvaneshwari M.²**¹Student, Smt Gandhimathi College of Pharmacy, Tiruvannamalai, Tamil Nadu.²Lecturer, Smt Gandhimathi College of Pharmacy, Tiruvannamalai, Tamil Nadu.Article Received on
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Nadu.**ABSTRACT**

Currently, an effective drug delivery carrier is needed to deliver therapeutic compounds to the target site. This carrier can administer the medication consistently and carefully just at the site of action. Microspheres are one of several such carriers that meet all the requirements for a powerful drug carrier. Microspheres are characterized as free-flowing, spherically shaped particles. Composed of proteins or artificial polymers that are either biodegradable or non-biodegradable and, ideally, have a particle size between 1 and 1000 μm . By overcoming the drawbacks of traditional dose forms, this innovative drug delivery technology seeks to improve patient compliance, boost bioavailability, and administer medications or other active substances more precisely. The best features, kinds, preparation techniques, assessment of their qualities, in vitro-in vivo correlation, and uses of microspheres as drug carriers are all covered in this review article. Today, there are numerous techniques for creating

microspheres that aim to achieve consistency, repeatability, and high entrapment efficiency.

KEYWORDS: Microspheres, Drugdelivery, Targetedtherapy, Controlledrelease, Bioavailability, encapsulation efficiency, preparation, Application.

INTRODUCTION

The development of drug delivery systems, particularly those that provide a regulated and prolonged action of the drug to the desired area of effect, has completely changed the idea of drug delivery. These innovative drug delivery systems have the ability to target drug delivery

to a particular place, maintain the duration of therapeutic activity, and or regulate the rate of drug delivery.^[1]

Compared to traditional methods of administration, a well-designed controlled drug delivery system may offer the following possible benefits.

1. Drug release rates can be adjusted to meet the requirements of a particular application, for example, pulsatile release or a constant rate of drug delivery,
2. Drugs, particularly proteins that the body would otherwise quickly break down, are protected by controlled release systems.
3. By substituting occasional (once per month or less) injections for frequent (daily, for example) dosages, controlled release systems can improve patient comfort and compliance.^[1]

A continuous phase of one or more miscible polymers with drug particles dispersed at the molecular or macroscopic level, usually ranging in size from 1 to 1000 μm , was used to define microspheres. Alternatively, they were defined as monolithic spheres with the therapeutic agent uniformly distributed throughout the matrix, either as particles or as a molecular dispersion.^[2]

Microcapsules and micromatrices are the two types of microspheres. In microcapsules, the entrapped material is clearly surrounded by a distinct capsule wall, whereas in micromatrices, the entrapped material is dispersed or dissolved through the particle matrix, potentially allowing for controlled drug release.

They consist of waxy, polymeric, or other protective compounds, such as modified natural products and biodegradable synthetic polymers.^[3]

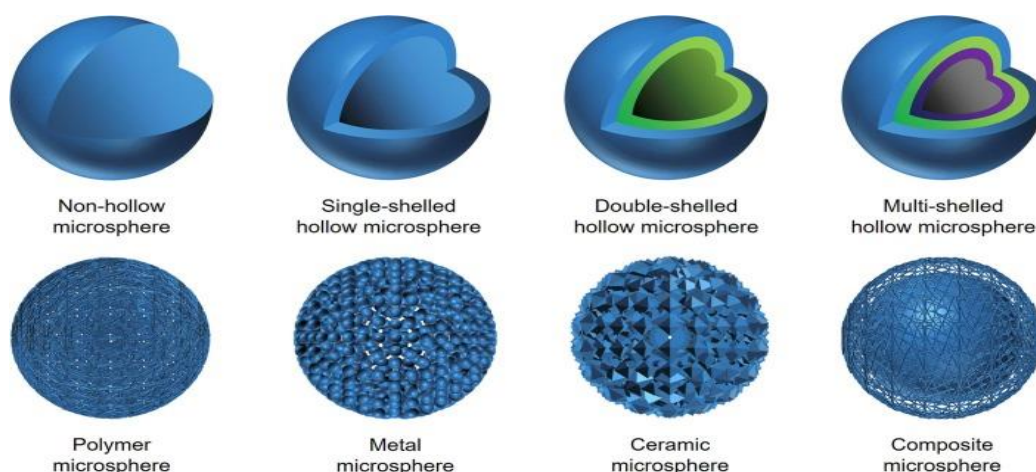


Fig.No.01: Microspheres.

Properties of microspheres^[4]

- ❖ A well-regulated release of the active ingredient over an extended period.
- ❖ Biocompatibility, with the ability to biodegrade in a controlled manner.
- ❖ Controlled particle size and the ability to disperse well in water-based solutions for injection.
- ❖ Stability after production, ensuring a shelf life that is acceptable for clinical use.
- ❖ The ability to incorporate a high concentration of the drug.
- ❖ The potential for chemical modification when needed.

Advantages of microspheres^[5]

- ❖ Microspheres provide a continuous and long-lasting therapeutic effect, maintaining
- ❖ stable drug levels in the bloodstream and improving patient adherence to treatment.
- ❖ The need for fewer doses with microspheres increases patient compliance while enhancing bioavailability and reducing the frequency or severity of side effects.
- ❖ Microspheres protect the gastrointestinal tract from drug irritation and, through controlled release, ensure steady drug delivery while minimizing toxicity and the need for frequent injections.
- ❖ Microspheres can protect drugs from environmental factors like moisture and light while improving the flow of powdered substances.
- ❖ Microspheres help disperse compounds that are insoluble in water within aqueous solutions.

Disadvantages of microspheres^[6]

- ❖ Reproducibility can be limited, and the cost of materials and processing is higher compared to traditional methods.
- ❖ Stability of core particles may be influenced by changes in process variables such as temperature, pH, solvent addition, and evaporation/agitation.
- ❖ The fate of the polymer matrix and additives is uncertain.

TYPES OF POLYMER**POLYMERS**

Polymers were macromolecules formed by linking monomers through polymerization. They were categorized by origin, structure, or polymerization process. Natural polymers, like wool and wax, had complex structures, while synthetic ones, such as nylon, offered simplicity. Polymers could be linear, branched, or three-dimensional and were classified as

homopolymers or copolymers, formed via stepwise or chain processes, used in plastics, rubbers, fibers, and adhesives.^[8]

Various substances, both biodegradable and non-biodegradable, have been explored for microsphere preparation. These materials primarily consist of polymers, which are divided into two categories.

1. Synthetic polymers
2. Natural polymers

1. Synthetic polymers: They are employed as carrier materials and are divided into two types.

(A) Non-biodegradable polymers: (for example) Poly methyl methacrylate, Acrolein, Glycidyl methacrylate, Epoxy polymers.

(B) Biodegradable polymers: (for example) Lactides and Glycolides and their copolymers, Poly alkyl cyano acrylates, Poly anhydrides and Poly-ε-caprolactone (PCL).⁽⁷⁾

2. Natural polymers: They are obtained from different sources like proteins, carbohydrates, and chemically modified carbohydrates.

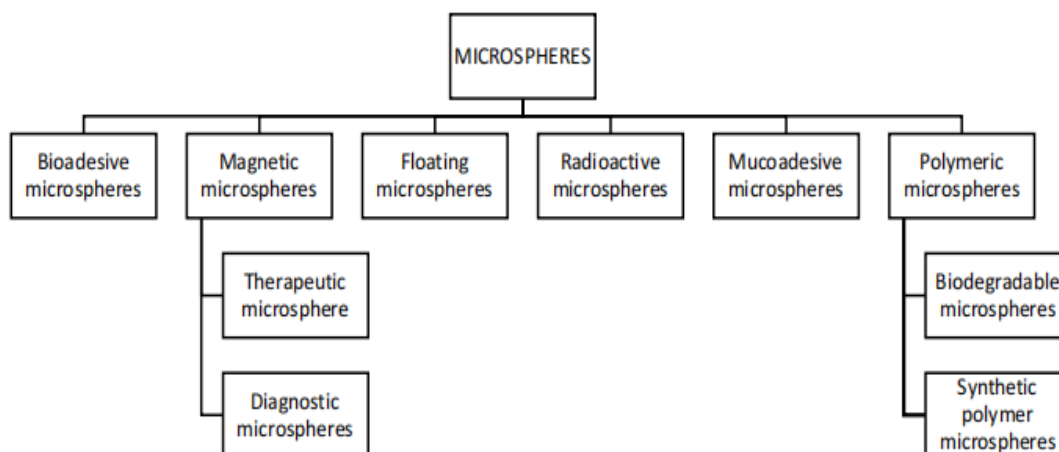
- a) Proteins- Albumin, Gelatin, Collagen.
- b) Carbohydrates- Agarose, Gelatin, Starch, Chitosan, Carrageenan.
- c) Chemically modified carbohydrates- Poly(acryl) dextran, Poly(acryl) starch, DEAE cellulose.^[7]

IDEAL MICROPARTICULATE CARRIERS:

The material utilized for the preparation of microparticulates should have the following properties.^[7,9]

- ❖ Longer duration of action.
- ❖ Provide protection of drug.
- ❖ Sterilizability.
- ❖ Water solubility or dispersability.
- ❖ Non-toxic.
- ❖ Relative stability.
- ❖ Bioresorbability.
- ❖ Increase of therapeutic efficiency.
- ❖ Control of content release.

TYPES OF MICROSPHERES^[10]



Bioadhesive microspheres

Bioadhesion occurred when synthetic or biological macromolecules adhered to biological tissues, forming an interface for bonding. Bioadhesive microspheres, ranging from 1 to 1000 micrometers, either made entirely of a bioadhesive polymer or with a drug core, were valuable for controlled and targeted drug delivery. Their bioadhesive properties offered benefits such as drug absorption, better bioavailability, and close interaction with the mucus layer. These microspheres were designed to stick to various mucosal tissues, enabling localized and systemic controlled drug release.^[11]

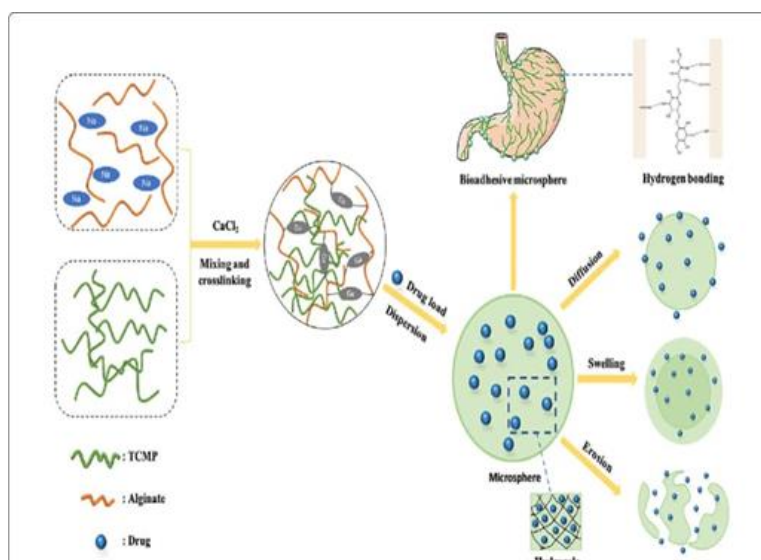


Fig.No.02: Bioadhesive microspheres.

Magnetic microspheres

Magnetic Targeting involves encapsulating a drug within a magnetic substance and introducing it into the bloodstream. A strong magnetic field directs the drug to the target site,

increasing its concentration while minimizing spread to other body parts. Various systems like magnetic microspheres, liposomes, nanoparticles, resealed erythrocytes, and emulsions are used in this technique.^[12]

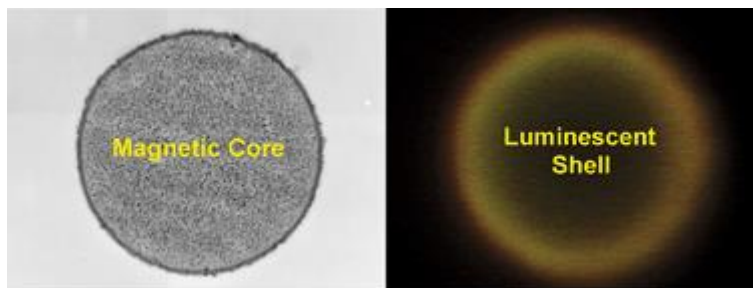


Fig.No.03: Magnetic microspheres

Floating microspheres

Floating microspheres, also known as hollow microspheres or microballoons, are gastroretentive systems that maintain buoyancy for prolonged periods.^[11] These free-flowing particles, sized from 1 to 1000 μm , have a hollow core with the drug coated on the surface using polymers like Eudragit, cellulose acetate, acrylic, and PVA. The drug's release is controlled by polymer concentration and polymer-to plasticizer ratio, while buoyancy is influenced by the choice of polymers, plasticizers, solvents, and formulation method.^[13]

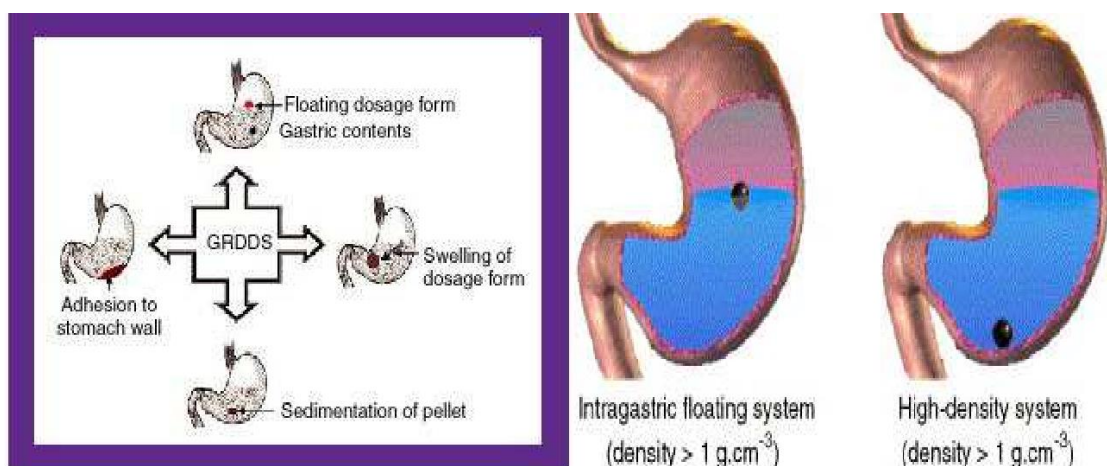


Fig. No. 04: Floating microspheres.

RADIOACTIVE MICROSPHERES

Radioactive microspheres, sized between 10 to 2000 nanometers, are made from materials emitting radiation like glass or inorganic compounds. They deliver localized radiotherapy effectively, especially in radioembolization for liver and spleen tumors, emitting alpha, beta, or gamma radiation to target cancer cells while sparing healthy tissues. These microspheres,

used for both therapeutic and diagnostic purposes, trap within capillary beds to concentrate radiation and enable precise therapeutic effects and accurate diagnostic measurements. Their versatility extends to treating conditions like liver cancer and rheumatoid arthritis, and aiding in imaging applications like lung scans. ^[14]

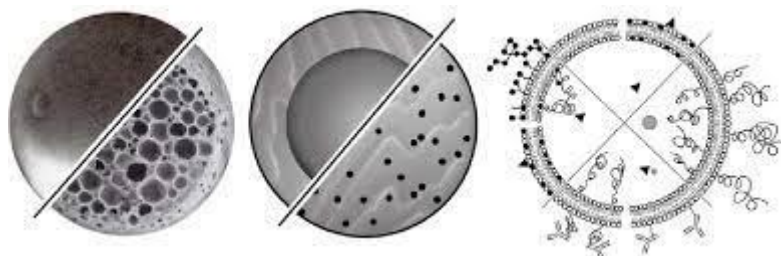


Fig.No.05:Radioactive microspheres.

MUCOADHESIVE MICROSPHERES

Mucoadhesive microspheres, made of mucoadhesive polymers or coated with adhesive layers, utilized bioadhesion to enhance drug targeting, absorption, and bioavailability. They bound to mucosal surfaces through interactions between mucin and polymers, ensuring precise drug delivery, extended residence time, and minimized side effects. Effective for localized and systemic drug delivery, they adhered to nasal, gastrointestinal, and urinary tract mucosal layers. These microspheres, valuable in sustained drug release and targeted therapies, represented significant advancements in drug delivery by preventing first-pass metabolism, enhancing peptide absorption, and offering controlled release. ^[15]

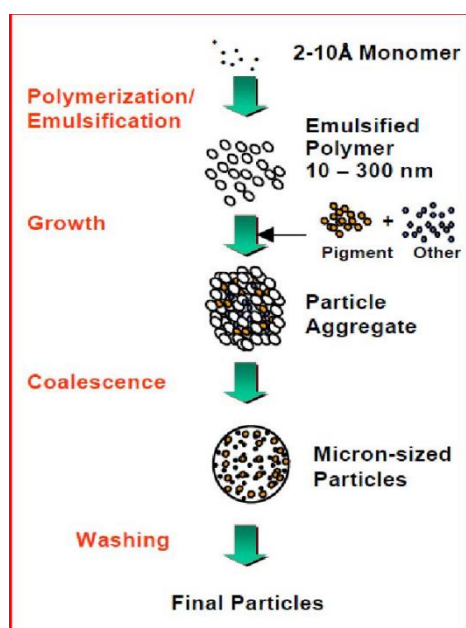


Fig. No. 06: Mucoadhesive microspheres.

POLYMERIC MICROSPHERES

microspheres, typically sized from 1 to 1000 micrometers, were used in drug delivery systems as carriers for active pharmaceutical ingredients (APIs), enabling controlled and sustained drug release. Employed in cancer treatment, controlled drug release, and tissue regeneration, they enhanced drug bioavailability, minimized side effects, and improved therapeutic effectiveness. By encapsulating the drug, these microspheres gradually released it over time, preventing rapid clearance from the body. Engineered to target specific tissues or organs, they ensured the drug was concentrated at the desired site while minimizing exposure to healthy tissues.^[16]

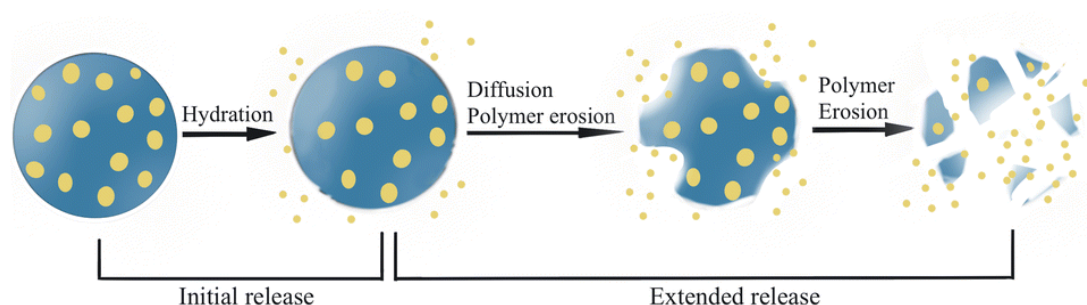


Fig.No.07: Polymeric microspheres.

Biodegradable polymeric microspheres

Natural polymers such as starch are used because of their biodegradable, biocompatible, bio adhesive property. Biodegradable polymers prolongs the residence time when comes in contact with mucous membrane due to its high degree of swelling property with aqueous medium which results in formation of gel. Concentration of polymers controls the release of drug.^[17]

Synthetic polymeric microspheres

Although synthetic polymeric microspheres are often utilized in therapeutic settings, their primary drawback is their propensity to migrate away from the injection site, which increases the risk of embolism and further organ damage.^[18]

METHOD OF PREPARATION^[15]

- I. The preparation of microspheres should satisfy certain criteria. They are:
- II. The ability to incorporate reasonable concentrations of the drug.
- III. Stability of the preparation after synthesis with a clinically acceptable shelf-life.
- IV. Controllable particle size and dispensability in aqueous vehicles for injection.

V. Release of active agent with good control over a wide time scale.

VI. Biocompatibility with a controllable biodegradability.

VII. Susceptibility to chemical modification.

Techniques for Microsphere Preparation^[20]

Several methods are used to produce microspheres, designed to meet specific properties and drug delivery needs. These techniques include.

- Solvent Evaporation
- Single Emulsion Method
- Double Emulsion Method
- Phase Separation Method
- Spray Drying and Spray Congealing
- Freeze Drying
- Polymerization
- Quasi-Emulsion Solvent Diffusion

Solvent Evaporation Method^[21]

The solvent evaporation technique was widely used for producing microspheres, particularly for encapsulating bioactive substances within a polymer matrix. The process involved controlled removal of the solvent to form solid microspheres, adaptable for both hydrophilic and lipophilic drug formulations. A bioactive compound was either dissolved or dispersed in an organic solvent containing a polymer. This solution was emulsified in an aqueous phase with stabilizers or surfactants, and the organic solvent was removed through evaporation or extraction, resulting in solid microspheres.

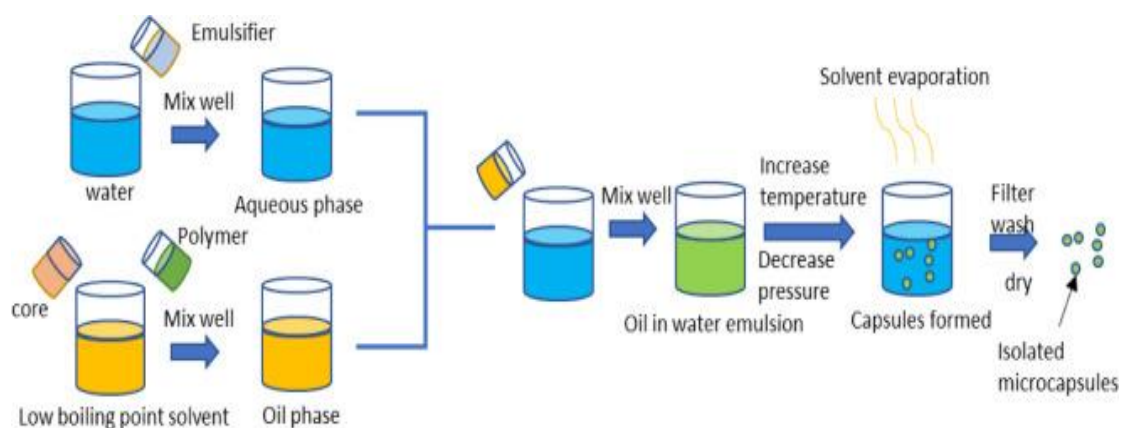


Fig.No.08: Solvent evaporation method.

Single Emulsion Technique^[22]

The single emulsion method was commonly used for creating microparticulate carriers from natural polymers like proteins and carbohydrates. The polymer was dissolved or dispersed in an aqueous medium, emulsified into a non-aqueous phase like oil, and solidified through crosslinking. Heat-induced crosslinking involved preheated oil, while chemical crosslinkers like glutaraldehyde and formaldehyde stabilized the polymer structure. This method required optimization to maintain the integrity of sensitive active compounds and minimize undesirable effects.

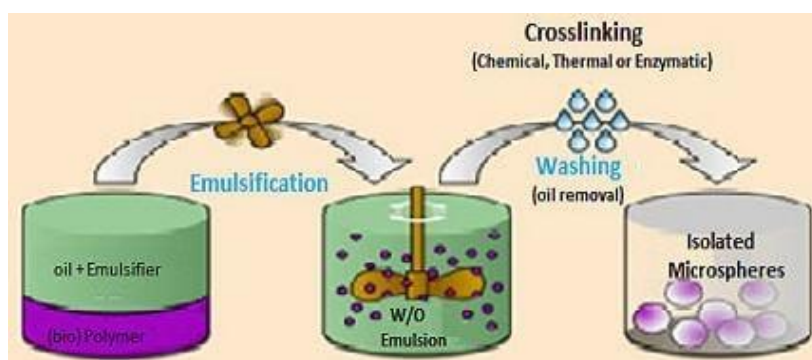


Fig.No.09: Single emulsion technique.

Double Emulsion Method^[23]

The double emulsion method is a widely utilized technique for producing porous microspheres, particularly when precise control over structure and internal features is essential. This approach involves the preparation of water-in-oil-in-water (W/O/W) emulsions followed by solidification to achieve tailored microsphere characteristics. The process formed microporous channels within microspheres, sometimes leading to a rapid release of the drug, especially for hydrophilic drugs. The referenced study suggested that freeze-drying could be a key factor contributing to burst release.

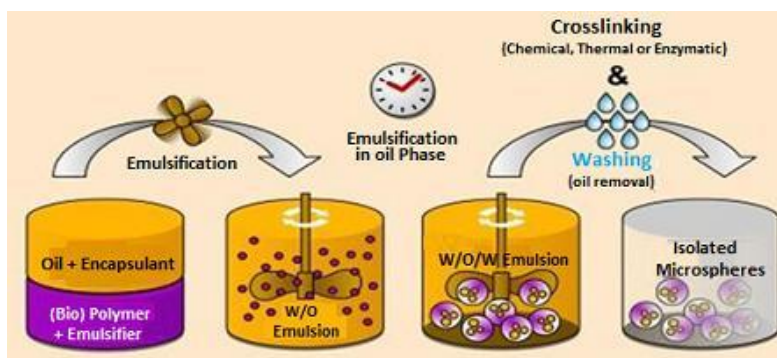


Fig.No.10: Double emulsion method.

Polymerization^[24]

Polymerization techniques, categorized into normal and interfacial polymerization, were used in microsphere production. Normal polymerization included methods like bulk, suspension, precipitation, emulsion, and micellar polymerization, involving monomers mixed with initiators or catalysts and heated to trigger polymerization, creating drug-loaded microspheres. Suspension polymerization heated monomer droplets in an aqueous phase, while emulsion polymerization used an aqueous initiator for micelle surface polymerization. Interfacial polymerization involved two monomers reacting at the interface of two immiscible liquid phases, forming polymer films encapsulating the dispersed phase.

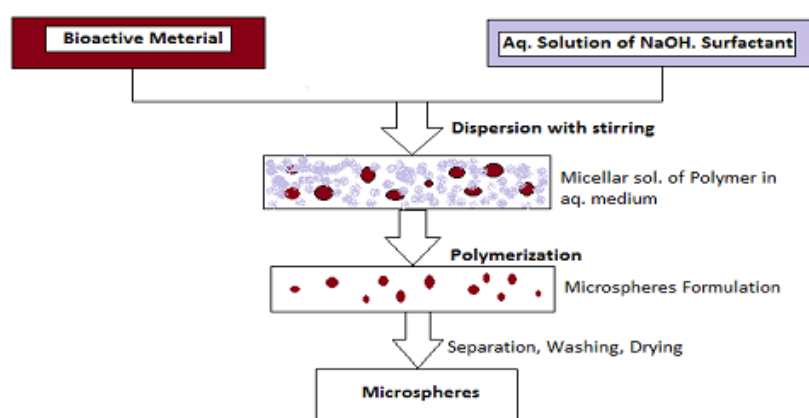


Fig.No.11: Polymerization.

Spray Drying and Spray Congealing^[25]

Spray drying and spray congealing, both methods for microencapsulation, involved dispersing a core material in a liquid coating that solidified quickly. Spray drying solidified the coating through rapid solvent evaporation, while spray congealing achieved solidification by cooling a molten coating or adding a coating solution to a nonsolvent. Once solidified, the solvent or nonsolvent was removed through sorption, extraction, or evaporation.

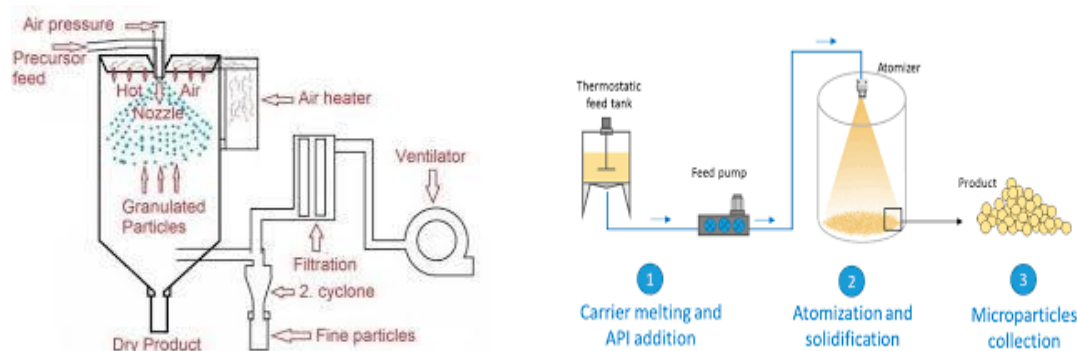


Fig.No.12: Spray Drying and Spray Congealing.

Freeze-Drying (Lyophilization)^[26]

Freeze-drying preserved materials by freezing them and then lowering the pressure to sublimate frozen water from solid to gas, maintaining the structure and properties essential for controlled drug release systems. Thi normal and interfacial polymerization, were used in microsphere production. Normal polymerization included methods like bulk, suspension, precipitation, emulsion, and micellar polymerization, involving monomers mixed with initiators or catalysts and heated to trigger polymerization, creating drug-loaded microspheres. Suspension polymerization heated monomer droplets in an aqueous phase, while emulsion polymerization used an aqueous initiator for micelle surface polymerization. Interfacial polymerization involved two monomers reacting at the interface of two immiscible liquid phases, forming polymer films encapsulating the dispersed phase.

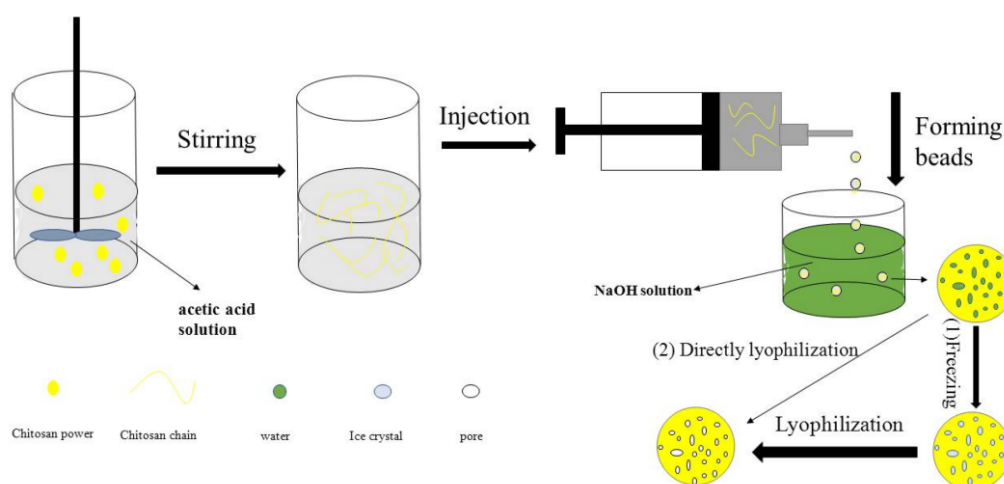


Fig.No.13: Freeze-Drying (Lyophilization).

Quasi-Emulsion Solvent Diffusion^[27]

The quasi-emulsion solvent diffusion method is a technique employed for the preparation of microspheres, especially for controlled drug release applications. In this process, a drugpolymer solution is dispersed into a poor solvent to form a quasi-emulsion. The controlled diffusion of the solvent leads to the formation microspheres.

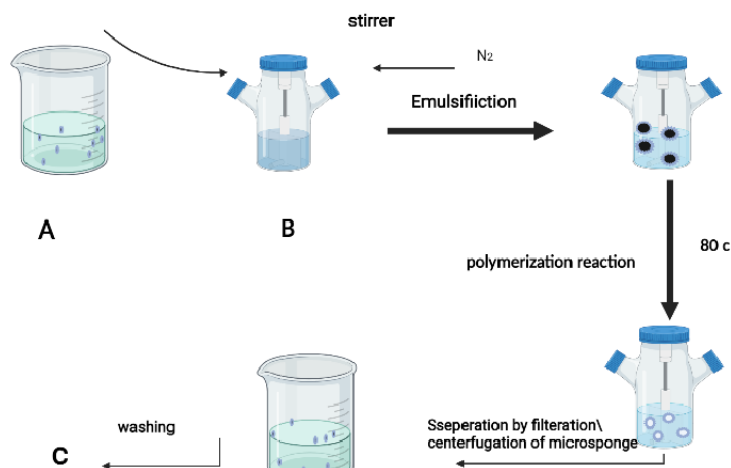


Fig.No.14: Quasi-Emulsion Solvent Diffusion.

Operations of Microspheres in Drug Delivery Systems^[28]

- **Vaccine Delivery:** Enhanced vaccine effectiveness by ensuring sustained antigen release and improved stability.
- **Targeted Drug Delivery:** Facilitated precise drug delivery to specific sites.
- **Oral Drug Delivery:** Enhanced drug stability and pH sensitivity.
- **Gene Therapy:** Carriers for genetic material and insulin delivery.
- **Nasal Delivery:** Improved drug absorption and retention in the nasal mucosa.
- **Intra-tumoral Delivery:** Localized delivery of anti-cancer drugs to tumour sites.
- **Transdermal and Gastrointestinal Delivery:** Sustained drug release in patches or buoyant microspheres.
- **Imaging and Diagnostics:** Targeted imaging and diagnostic applications.
- **Topical and Medical Applications:** Controlled release of proteins, hormones, and active agents.
- **Radioactive Applications:** Used in embolization, radio synovectomy, and localized radiotherapy.

EVLUTION OF MICROSPHERES

Particle size and shape^[3,29,30-33]

Scanning electron microscopy (SEM) and conventional light microscopy (LM) are the most used methods for seeing microparticles. The shape and external structure of microparticles can be ascertained using both methods. In the case of double-walled microspheres, LM offers control over the coating settings. Before and after coating, the structures of the microspheres can be seen, and the difference can be quantified at the microscopic level. Higher resolution

is offered by SEM compared to LM. SEM makes it possible to examine the surfaces of microspheres and, once particles have been cross-sectioned, to examine systems with two walls. Multiple walled microspheres are characterized structurally using confocal fluorescence microscopy.

Electron spectroscopy for chemical analysis^[3,29,30-33]

Electron spectroscopy for chemical analysis (ESCA) can be used to ascertain the microspheres' surface chemistry. A method for figuring out the surface's atomic makeup is offered by ESCA. The surfacial degradation of the biodegradable microspheres can be ascertained from the spectra acquired using ECSA.

Attenuated total reflectance Fourier Transform

Infrared Spectroscopy^[3,29,30-33]

The deterioration of the carrier system's polymeric matrix is assessed using FT-IR. Alternated total reflectance (ATR) is measured to examine the microspheres' surface. In order to get IR spectra, primarily of surface material, the infrared beam traveling through the ATR cell reflected numerous times through the sample. Depending on the circumstances and production processes, the ATR-FTIR gives information about the microspheres' surface composition.

Density determination^[3,29,30-33]

A multi-volume pycnometer can be used to measure the microspheres' density. A cup containing an accurately weighted sample is put inside the multivolume pycnometer. In the chamber, helium is supplied at a steady pressure and given time to expand. The pressure inside the chamber drops as a result of this expansion. Two successive pressure drop values at various starting pressures are recorded. From two pressure readings the volume and hence the density of the microsphere carrier is determined.

Isoelectric point^[3,29,30-33]

The isoelectric point can be ascertained by measuring the electrophoretic mobility of microspheres using a device called micro electrophoresis. By timing the particle's movement over a 1 mm distance, the mean velocity for various Ph values between 3 and 10 is determined. This information can be used to calculate the particle's electrical mobility. The surface contained charge, ionisable behavior, or ion absorption nature of the microspheres can all have an impact on the electrophoretic mobility.

Surface carboxylic acid residue^[3,29,30-33]

Radioactive glycine is used to assess the amount of carboxylic acid residue on the surface. C14-glycine ethyl ester hydro chloride reacts with the microspheres to produce the radioactive glycine conjugates. The water-soluble condensing 1-ethyl-3 (3 dimethyl amino propyl) carbodiimide (EDAC) is used to connect the glycine residue. A liquid scintillation counter is then used to measure the conjugate's radioactivity. Consequently, it is possible to compare and correlate the carboxylic acid residue. For hydrophobic, hydrophilic, or any other derivatized kind of microspheres, the amount of free carboxylic acid residue can be determined.

Surface amino acid residue^[3,29,30-33]

The radioactive c14-acetic acid conjugate determines the amino acid residue linked with the surface. The amino acid residue can be ascertained indirectly by measuring the carboxylic acid residue using a liquid scintillation counter. The amino group and the carboxylic acid residue of c14-acetic acid are condensed using EDAC. The method used for determining the free amino or the free carboxylic acid residues are based on indirect estimation, by measuring the radioactivity of the c14 having acetic acid or the glycine conjugate. However, the time allotted for the radioactive moiety to conjugate and the reactivity of the free functional group determine how accurate the approach is.

Capture efficiency^[3,29,30-33]

The capture efficiency or percent entrapment of microspheres is determined by lysing the washed microspheres. The resulting lysate is then analyzed to quantify the active constituents, following the specifications outlined in the monograph. The percent encapsulation efficiency is calculated using following equation.

$$\% \text{ Entrapment} = \text{Actual content} / \text{Theoretical content} \times 100$$

Angle of contact^[3,29,30-33]

The contact angle is used to assess the wetting properties of a microparticulate carrier, indicating whether the microspheres are hydrophilic or hydrophobic. This thermodynamic property is unique to solids and can be influenced by the presence of adsorbed components. The contact angle is determined at the interface of solid, air, and water. To measure it, a droplet is placed in a circular cell positioned above the objective of an inverted microscope, capturing both the advancing and receding angles. The measurement is conducted at 20°C within one minute of depositing the microspheres.

In vitro methods^[3,29,30-33]

To better understand how drugs are released and how they pass through membranes, researchers have developed various experimental methods. Both in vitro (lab-based) and in vivo (tested in living organisms) techniques are used to study these processes. In vitro drug release testing plays a crucial role in pharmaceutical manufacturing, helping ensure quality and guide product development. However, getting accurate and consistent results requires carefully controlled conditions. Since it's difficult to fully replicate how a drug behaves inside the body, scientists have designed multiple in vitro methods for testing buccal (oral) drug formulations. Despite these efforts, there's still no single standardized method, as different researchers use different equipment and conditions depending on the type of drug being studied.

In vivo methods^[3,29,30-33]

Techniques that take advantage of the organism's biological reaction either locally or systemically, as well as those that detect the uptake or accumulation of penetrants at the surface directly, are used to investigate the permeability of intact mucosa. The systemic pharmacological effects that medications produce after being applied to the oral mucosa were used in some of the first and most basic investigations of mucosal permeability. Nonetheless, the most popular techniques for examining drug permeability include perfusion chambers, buccal absorption tests, and in vivo investigations employing animal models.

IN-VITRO CORRELATION^[34,35]

"In vitro-in vivo correlations" are relationships between the rate and degree of availability as assessed by blood concentration and/or urine excretion of the medication or its metabolites and the rates of dissolution seen in vitro. One can create product specifications with bioavailability thanks to these relationships.

Drug Dissolution Percentage in Vitro Compared to Peak Plasma Concentration^[34,35]

Measuring the percentage of the drug released from various dosage forms and estimating the peak plasma concentrations they reach, followed by a correlation analysis, are two methods of confirming the in vitro and in vivo correlation. Poorly constructed dosage forms are expected to release more drug than well-formulated ones; hence, there is less medication accessible for absorption from poorly formulated dosage forms than from well-formulated ones.

Drug Dissolved Percentage Compared to Drug**Absorbed**^[34,35]

By comparing the percentage of the drug absorbed to the percentage of the drug dissolved, a linear association can be shown if the dissolving rate is the limiting stage in the drug's absorption and is fully absorbed after dissolution. A change in the dissolution rate might not be reflected in a change in the rate and degree of drug absorption from the dosage form if the rate of absorption is the rate limiting step in the medication's bioavailability.

Dissolution Rate Vs Absorption Rate^[34,35]

Determining the absorption rate is typically more challenging than determining the absorption time. The absorption time can be used to correlate the dissolution data to the absorption data because a drug's absorption rate and absorption time are inversely connected. By monitoring the absorption time for the dose form, quick drug absorption can be differentiated from delayed drug absorption in the analysis of in vitro and in vivo drug correlation. The shorter the absorption time needed to absorb a specific dose of the medicine, the faster the drug is absorbed. There is a correlation between the amount of time needed to absorb the same amount of medicine from the dosage form.

Percent of Drug Dissolved Vs Serum Drug**Concentration**^[34,35]

It is possible to establish a linear association between the percentage of drug dissolved at specific periods and the serum drug concentrations at corresponding times for medications whose absorption from the GIT is dissolution rate limited.

Drug Dissolution Percent Vs Dose Percent**Excreted in urine**^[34,35]

There is a linear relationship between the percentage of a medicine dissolved and the percentage absorbed. There is a relationship between the quantity of drug in the body and the quantity expelled in the urine. As a result, the percentage of the medication dissolved and the percentage of the dosage eliminated in the urine may be found to be linearly related.

APPLICATIONS**1. Microspheres in vaccine delivery**

A vaccination must provide protection against the microorganism or its harmful byproduct. An ideal vaccine must fulfill the requirement of efficacy, safety, convenience in application

and cost. The aspect of safety and minimization of adverse reaction is a complex issue [48]. The mode of application has a direct impact on both the degree of antibody response generation and safety. Parenteral (subcutaneous, intramuscular, and intradermal) carriers are of interest because they have certain benefits, such as the following: Biodegradable delivery methods for vaccines administered by parenteral route may address the drawback of traditional vaccinations.^[7,36-39]

- i. Improved antigenicity by adjuvant action
- ii. Modulation of antigen release
- iii. Stabilization of antigen.

2. Targeting using microparticulate carriers^[7,36-39]

Targeting, or site-specific medication delivery, is a well-established idea that is receiving a lot of attention. The drug's ability to reach and interact specifically with its target receptors is essential to its therapeutic effectiveness. The core of pharmacological action mediated by a carrier system is the capacity to exit the pool in a repeatable, effective, and targeted manner. When the particles are placed in a specific anatomical compartment, they are retained either due to the environment's physical characteristics or because of the particles' biophysical interactions with the target tissue's cellular makeup.

3. Monoclonal antibodies mediated microspheres

Targeting^[7,36-39]

Immunomicrospheres are monoclonal antibodies that target microspheres. This targeting technique is employed to accomplish selective targeting to the designated areas. The molecules known as monoclonal antibodies are incredibly selective. Monoclonal antibodies' (Mabs') high specificity can be used to direct microspheres containing bioactive compounds to specified locations. Covalent coupling allows mabs to be directly bonded to the microspheres. The antibodies can be attached to the free aldehyde, amino, or hydroxyl groups on the microspheres' surface.^[7] The following techniques can be used to attach the Mabs to microspheres.

- i. Non specific adsorption
- ii. Specific adsorption
- iii. Direct coupling
- iv. Coupling via reagents

4. Chemoembolisation^[7,36-39]

Chemoembolization is an endovascular treatment that entails the local delivery of a chemotherapeutic agent either concurrently or later, along with the selective arterial embolization of a tumor. Theoretically, the benefit of such embolisations is that they will result in prolonged therapeutic levels of chemotherapeutics in the tumor regions in addition to providing vascular blockage. Traditional percutaneous embolization methods are expanded upon by chemotherapy.

5. Imaging

The use of microspheres for targeting has been thoroughly investigated. Radiolabeled microspheres can be used to imaging a variety of cells, cell lines, tissues, and organs. When it comes to imaging specific areas, the microspheres' particle size range is a crucial consideration. The intravenous particles will become caught in the lung's capillary bed if they are administered outside of the portal vein.^[7,36-39] Using tagged human serum albumin microspheres, this phenomenon is used to scintigraphically image lung tumor masses.

6. Topical porous microspheres^[7,36-39]

The porous microspheres known as microsponges are made up of several interconnected spaces with particle sizes ranging from 5 to 300 μm . These porous microspheres with active ingredients can be added to formulations like creams, lotions, and powders. These microsponges are used as topical carriers because they have the ability to entrap a wide variety of active ingredients, including emollients, fragrances, essential oils, etc. Microsponges are non-collapsible structures having a porous surface that allows for the regulated release of active substances.

7. Surface modified microspheres

Various methods have been used to modify the carriers' surface characteristics in order to shift their body distribution patterns and shield them from phagocytic clearance. The polystyrene, polyester, or polymethyl methacrylate microspheres become more hydrophilic due to the poloxamer's adsorption on their surface, which reduces their MPS uptake.^[7,36-39] Protein microspheres covalently treated with PEG derivatives show decreased immunogenicity and clearance.

The most studied surface modifiers are.

I. Antibodies and their fragments

II. Proteins

III. Mono-, oligo- and polysaccharides

IV. Chelating compounds (EDTA, DTPA or Desferroxamine)

V. Synthetic soluble polymers

In order to target certain organs and prevent quick evacuation from the body, the surface of microspheres is modified in this way.

CONCLUSION

The delivery of therapeutic drugs via the microsphere is gaining popularity as a result of recent developments in innovative drug delivery system technology. Thanks to advancements in polymer science, it is now feasible to create a variety of biodegradable and nonbiodegradable polymers that can be utilized to create microspheres with various properties utilizing a variety of methods. The aforementioned demonstrates the significant potential of microspheres as drug carriers, which can be used as diagnostic instruments in addition to drug delivery. Even though a lot of research is required to create easily manufactured pharmaceutical goods that meet quality control standards, microsphere-based systems are highly appealing technologies, and their benefits are driving a rapid development in this field.

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