

## BIORESPONSIVE POLYMERS: THE CORE OF THE NEXT-GEN TARGETED DRUG DELIVERY

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### ABSTRACT

The field of targeted drug delivery has revolutionized therapeutic strategies by allowing drugs to reach specific tissues or pathological sites, thereby minimizing systemic toxicity and enhancing clinical efficacy. However, conventional drug delivery systems often lack the precision to respond to the complex and dynamic biological environments encountered *in vivo*. This has led to the emergence of bioresponsive polymers, also known as stimuli-sensitive or smart polymers, which can undergo physical or chemical transformations in response to specific internal stimuli—such as pH fluctuations, temperature gradients, enzyme concentrations, redox potential, or glucose levels. These polymers enable spatiotemporal control of drug release, making them particularly valuable in personalized and precision medicine. Notably, their application in oncology, inflammation, diabetes, and infection management has shown significant promise. For instance, pH-responsive hydrogels release drugs preferentially in acidic tumor microenvironments, while enzyme-sensitive nanoparticles degrade selectively in inflamed tissues. Despite these advancements, the clinical translation of such systems remains

limited due to challenges like batch reproducibility, biocompatibility, and regulatory hurdles. Therefore, there is a pressing need to design highly reproducible, biocompatible, and scalable polymeric systems with robust responsiveness. This review explores the classification, design principles, and recent advancements in bioresponsive polymer-based TDDS and outlines their current limitations and future opportunities in therapeutic applications.

**KEYWORDS:** Bioresponsive polymers, Ultra sensitive biopolymers, Biomolecule sensitive biopolymers, ROS bioresponsive polymers, Future Directions.

## INTRODUCTION

Drug delivery (DD) encompasses the strategies, formulations, technologies, and mechanisms employed to transport pharmaceutical compounds within the body to achieve a desired therapeutic outcome.<sup>[1]</sup> It involves the precise administration of therapeutic agents in both humans and animals to ensure optimal efficacy and safety. In recent years, advancements in drug delivery systems (DDSs) have shifted toward the concept of smart drug delivery, which emphasizes site-specific and time-controlled release, tailored to meet the pharmacological needs of individual patients.<sup>[2]</sup> These novel drug delivery systems (NDDSs) are designed to enhance therapeutic efficacy, minimize side effects, and maintain consistent drug levels through targeted, sustained, and controlled release. The development of NDDSs has significantly improved the bioavailability of both new and existing drugs.<sup>[3]</sup> Among the five established generations of DDSs, targeted drug delivery is categorized under the fourth generation, reflecting a major shift toward personalization and precision medicine. For instance, bilayer tablets represent an NDDS designed to modify conventional release patterns and optimize therapeutic profiles. Over the past few decades, the focus has increasingly turned to controlled and sustained-release formulations, aiming to reduce dosing frequency, maintain steady-state plasma levels, and improve overall patient compliance.<sup>[4]</sup>

Targeted Drug Delivery Systems (TDDSs) represent a significant advancement in pharmaceutical technology, designed to transport therapeutic agents directly to a specific site within the body rather than distributing them systemically. This approach enhances drug efficacy while minimizing off-target effects and systemic toxicity. TDDSs integrate principles from multiple scientific domains, including polymer science, pharmacology, molecular biology, and bioconjugate chemistry, enabling the development of precise and responsive delivery mechanisms.<sup>[5]</sup> The core objectives of TDDSs include the modulation of pharmacokinetics and pharmacodynamics, reduction of immunogenicity, avoidance of nonspecific toxicity, and enhancement of biorecognition at the target site. Unlike conventional delivery systems, which rely on passive drug absorption through biological membranes, TDDSs utilize active or stimuli-responsive strategies to achieve site-specific and controlled drug release.<sup>[6]</sup> This improves therapeutic outcomes, particularly in chronic diseases like cancer, autoimmune disorders, and inflammatory conditions, where localized

treatment is crucial. Ultimately, TDDSs aim to deliver the right drug, at the right dose, at the right time, to the right place, thereby aligning with the vision of personalized and precision medicine.<sup>[7]</sup>

### THE NEED OF BIORESPONSIVE TARGETED DRUG DELIVERY SYSTEM

Targeted drug delivery (TDD) has emerged as a crucial strategy to overcome the inherent limitations of conventional drug delivery systems (DDSs). While parenteral routes are often invasive and oral routes are unsuitable for protein- or peptide-based therapeutics due to enzymatic degradation and poor bioavailability, topical formulations are typically restricted to localized effects.<sup>[8]</sup> These traditional approaches frequently result in suboptimal therapeutic efficacy and increased systemic toxicity. TDD addresses these limitations by ensuring that the drug is transported directly to the site of action in a controlled dosage and at a precise rate, thereby maximizing therapeutic outcomes while minimizing adverse effects. Moreover, targeted systems offer additional benefits, such as simplified administration procedures, reduced total drug requirement (which translates to lower treatment costs), and enhanced drug accumulation in target tissues without affecting healthy ones.<sup>[9]</sup> This targeted localization not only improves pharmacokinetic control and biodistribution but also enhances patient compliance through reduced dosing frequency and side effects. Ultimately, TDD provides a more efficient and safer alternative, especially for chronic and sensitive therapeutic applications.<sup>[10]</sup>

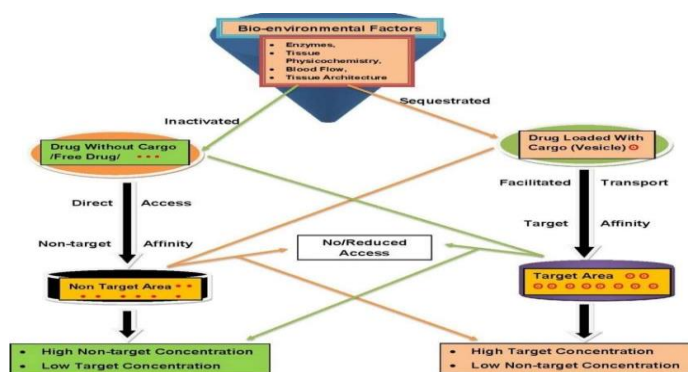


**Fig. 1: Limitations of Conventional Drug Delivery.**

### THE BASIC PRINCIPLE OF TARGETING DRUG DELIVERY SYSTEM

The primary principle of targeted drug delivery (TDD) lies in optimizing therapeutic efficacy while minimizing side effects, which often arise due to high systemic drug concentrations, non-specific distribution, and unwanted interactions with non-target tissues. TDD systems enhance therapeutic precision by reducing multitarget binding, limiting off-target exposure,

and preventing degradation or inactivation by bioenvironmental factors en route to the intended site of action.<sup>[11]</sup> A robust TDD system is composed of three fundamental elements: the therapeutic agent, the target (typically a specific organ, cell, or pathological site), and a carrier vehicle engineered to deliver the drug effectively. These carriers—often nanoparticles, liposomes, or polymer-based vehicles—must possess essential features such as biocompatibility, non-immunogenicity, biodegradability, physicochemical stability (both *in vitro* and *in vivo*), and minimal premature drug leakage.<sup>[12]</sup> Additionally, the system should allow for predictable and controllable drug release patterns, be straightforward and cost-effective to manufacture, and ensure safe and complete clearance from the body post-therapy. The successful formulation of such systems requires careful consideration of the target cell properties, receptor-specificity, and the physicochemical nature of the carrier to ensure that the drug reaches its intended destination with maximal efficiency and minimal systemic toxicity.<sup>[13]</sup> The efficiency and precision of targeted drug delivery systems are governed by multiple physicochemical, biological, and formulation-related parameters.<sup>[14]</sup> Critical factors include drug concentration, particulate size and distribution, molecular weight, and intrinsic physicochemical properties such as solubility and stability. Additionally, enzymatic activity at the target site, electric or magnetic responsiveness, and local physiological conditions (pH, temperature, oxidative stress) significantly influence the release profile and therapeutic action. The nature and concentration of polymers or excipients used in the formulation—especially in bioresponsive or stimuli-sensitive systems—play a pivotal role in modulating drug release and targeting behaviour. Surface morphology parameters like particle shape, surface charge, porosity, and density further dictate cellular uptake, biodistribution, and circulation half-life of the delivery system. These multifaceted variables must be intricately balanced to achieve site-specific delivery, optimize pharmacokinetics, and minimize systemic toxicity.<sup>[15]</sup>



**Fig. 2 Bio-environmental Factors.**

## BIORESPONSIVE POLYMERS

Bioresponsive polymers have emerged as a revolutionary class of materials in the design of advanced drug delivery systems, particularly for targeted therapy. These polymers are engineered to undergo physical or chemical changes in response to specific biological stimuli such as pH, temperature, redox conditions, enzyme concentration, glucose levels, or even external stimuli like light and magnetic fields.<sup>[16]</sup> The fundamental principle behind their design is the creation of drug delivery systems that remain stable during circulation but trigger the release of the active pharmaceutical ingredient upon encountering a defined pathological environment. This smart responsiveness enhances site-specific delivery, improving therapeutic efficacy while significantly minimizing systemic toxicity and adverse effects. In targeted drug delivery systems (TDDS), bioresponsive polymers play a crucial role in enhancing drug bioavailability, prolonging drug release, and reducing the frequency of dosing. For instance, pH-sensitive polymers are extensively used to exploit the acidic microenvironment of tumours or inflamed tissues, ensuring selective release at these sites. Similarly, enzyme-responsive polymers utilize overexpressed enzymes in disease states, such as matrix metalloproteinases in cancer or esterases in inflamed tissues, to trigger drug release. These polymers are often incorporated into nanoparticles, micelles, hydrogels, or implantable matrices that provide both protection to the drug and control over its spatiotemporal release.<sup>[17]</sup> The integration of bioresponsive polymers in TDDS aligns with the broader vision of precision medicine. Their ability to adapt and function intelligently within complex biological systems makes them indispensable in modern pharmaceutical formulations. As research progresses, multi-stimuli-responsive systems are gaining traction, combining two or more triggers to enhance specificity and robustness. However, challenges such as large-scale reproducibility, long-term biocompatibility, and regulatory compliance remain, necessitating continued interdisciplinary research and innovation.<sup>[18]</sup>

### 1. PH RESPONSIVE POLYMERS

pH-sensitive polymers are a class of intelligent materials engineered to exploit the acidic microenvironment characteristic of pathological conditions such as tumours, inflamed tissues, or intracellular compartments like endosomes and lysosomes. These polymers are functionalized with ionizable or acid-labile groups, such as carboxyl ( $-\text{COOH}$ ), amine ( $-\text{NH}_2$ ), or imidazole moieties, that undergo structural transformations — typically protonation or deprotonation — in response to slight pH fluctuations. This adaptive behavior allows for the selective and controlled release of therapeutic agents precisely at the disease site,

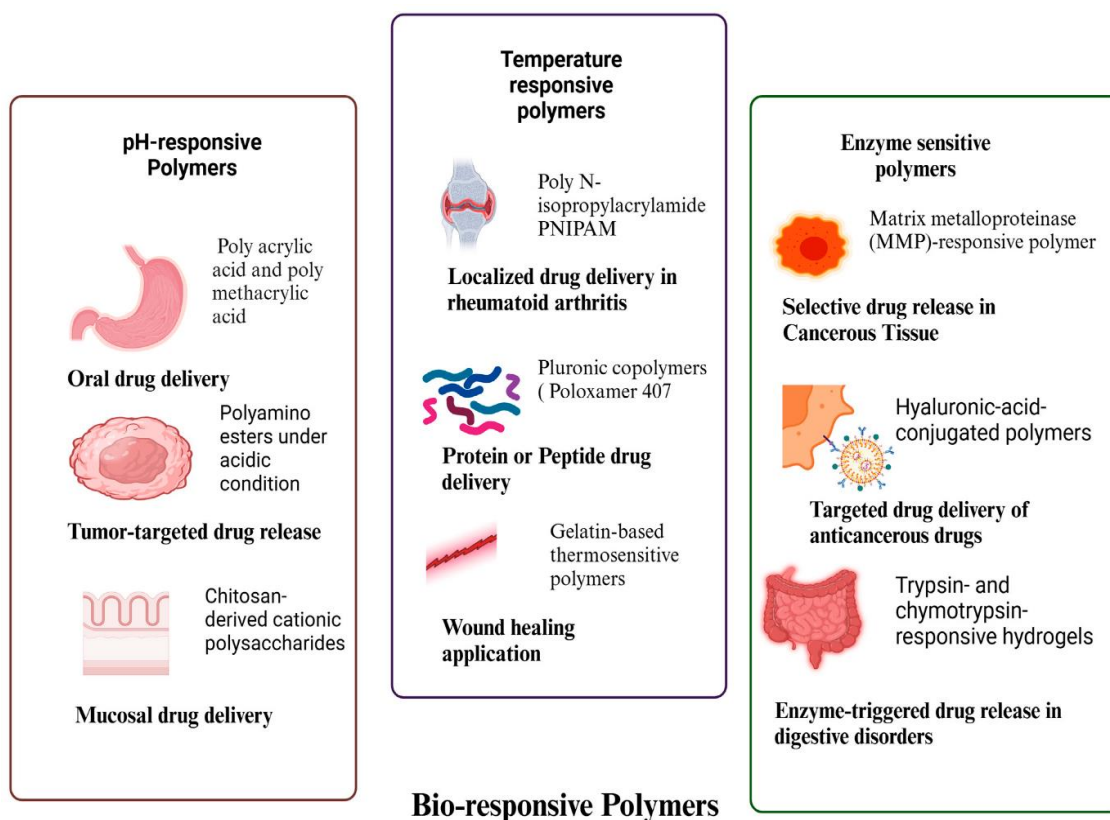
significantly minimizing systemic exposure and toxicity.<sup>[19]</sup> Common examples include poly (acrylic acid) (PAA) and poly (methacrylic acid) (PMAA), which exhibit pH-dependent swelling, making them ideal for oral delivery systems that prevent premature drug release in the acidic stomach and ensure targeted delivery in the more neutral pH of the intestines. Poly ( $\beta$ -amino esters) (PBAEs) and poly (N-vinyl imidazole) (PVI) are synthetic polymers that degrade under mildly acidic conditions (pH ~6.5–6.8), which is especially useful for tumor-specific drug delivery. Among natural polymers, chitosan stands out for its cationic nature, being soluble under acidic conditions and capable of forming gels at physiological pH, lending itself well to mucosal and gastrointestinal drug delivery platforms. The responsiveness of these materials to the tumor microenvironment has demonstrated great promise in oncology, enabling localized drug release, enhanced therapeutic efficacy, and reduced off-target effects.<sup>[20]</sup>

## 2. TEMPERATURE SENSITIVE POLYMERS

Temperature-sensitive polymers are smart materials that exhibit reversible sol-gel phase transitions in response to physiological temperature fluctuations. These polymers, particularly thermosensitive hydrogels, exist in a sol (liquid) state at room temperature and transition into a gel state upon reaching body temperature (~37 °C). This unique property enables injectable or implantable depot systems that form in situ drug reservoirs, facilitating localized and sustained drug release at the target site with minimal invasiveness.<sup>[21]</sup> A prominent example is poly(N-isopropylacrylamide) (PNIPAM), which exhibits a lower critical solution temperature (LCST) around 32–35 °C. PNIPAM has been widely explored in localized drug delivery, especially for rheumatoid arthritis and postoperative pain management, due to its gelation at near-physiological temperatures. Pluronic® block copolymers, such as Poloxamer 407, comprise a PEO–PPO–PEO (polyethylene oxide–polypropylene oxide–polyethylene oxide) triblock structure that also undergoes thermoreversible gelation, making them excellent vehicles for protein and peptide delivery. Additionally, gelatin-based hydrogels, crosslinked using genipin or transglutaminase, have shown promise in biodegradable tissue scaffolds and wound healing applications. These thermogelling systems enhance site-specific retention and prolong therapeutic action, making them particularly effective for treating chronic inflammatory conditions.<sup>[22]</sup>

### 3. ENZYME SENSITIVE BIORESPONSIVE POLYMER

Enzyme-sensitive polymers represent a groundbreaking advancement in the field of targeted drug delivery, particularly for the treatment of cancer, inflammation, and metabolic disorders. These smart polymers are engineered to respond to specific enzymatic stimuli present in pathological tissues, such as matrix metalloproteinases (MMPs), hyaluronidases, or proteases, which are often overexpressed in disease conditions.<sup>[23]</sup> The fundamental principle involves incorporating cleavable linkages (e.g., peptide bonds, ester groups, or disulfide bridges) within the polymer backbone or side chains. These bonds remain stable under physiological conditions but undergo enzymatic degradation in the presence of disease-specific enzymes, thereby triggering localized drug release at the intended site of action. A widely studied example is the use of MMP-responsive hydrogels composed of PEGylated gelatin or polycaprolactone, which are degraded by MMP-2 and MMP-9—enzymes significantly overexpressed in the tumor microenvironment. These systems have shown enhanced drug accumulation at tumor sites with minimized systemic toxicity.<sup>[24]</sup> Likewise, hyaluronic acid (HA)-based carriers, responsive to hyaluronidase, are employed for the targeted delivery of chemotherapeutic agents in solid tumours, where hyaluronidase activity is elevated. Furthermore, protease-sensitive hydrogels, such as trypsin-responsive PEG networks, are utilized in gastrointestinal applications, where site-specific degradation by digestive enzymes leads to localized therapeutic release. This approach reduces the drug dose needed, minimizes side effects, and enhances patient compliance. The design of enzyme-sensitive drug delivery systems also allows for spatiotemporal control over therapeutic payloads, offering a major advantage in treating diseases with localized enzyme overexpression.<sup>[25]</sup> These polymers exhibit favourable biocompatibility, biodegradability, and stimuli specificity, aligning with the principles of personalized medicine. The integration of these materials into nanoparticle systems, micelles, or injectable hydrogels further expands their potential, enabling real-time responsiveness to the biochemical cues of the target tissue. As research continues, the next generation of enzyme-responsive carriers is expected to feature multi-responsive behavior, enhanced circulatory stability, and targeting ligands, further refining the precision of drug delivery.



**Fig. 3: Types of Bioresponsive Polymers.**

#### 4. LIGHT SENSITIVE DRUG DELIVERY

Light-responsive polymers are a class of smart materials that undergo structural or physicochemical changes upon exposure to specific wavelengths of light, enabling precise, non-invasive, and on-demand drug release.<sup>[26]</sup> These systems typically utilize chromophores such as azobenzene, stilbene, and triphenylmethane, which can undergo photoisomerization or bond cleavage when exposed to ultraviolet (UV) or visible light. Polymers like poly(N-isopropylacrylamide) (PNIPAM) integrated with light-sensitive chromophores are known to respond to light by altering their hydrophilicity or swelling behavior, thereby triggering drug release. In one approach, gold-capped mesoporous silica nanoparticles functionalized with photo-cleavable linkers release drugs upon UV irradiation, as the linker breaks and the gold caps detach due to charge repulsion. Another example involves polymers with quinone-methide moieties, where light triggers a rapid breakdown of the structure, allowing fast payload release. Furthermore, PNIPAM hydrogels doped with copper chlorophyllin respond to visible light by increasing local temperature, leading to swelling and subsequent drug diffusion. These polymers enable localized, time-controlled drug delivery, especially beneficial in cancer therapy, dermatological applications, and ocular drug delivery, where external light can be precisely focused on the disease site. Their advantages include minimal

invasiveness, reduced systemic toxicity, and improved therapeutic outcomes, making them a promising tool in advanced targeted drug delivery platforms.<sup>[27]</sup>

## 5. ULTRASOUND SENSITIVE BIOPOLYMERS

Ultrasound-responsive drug delivery systems utilize mechanical energy to trigger site-specific drug release through mechanisms like cavitation, thermal effects, or enhanced membrane permeability. These systems are especially valuable due to the non-invasive nature of ultrasound, its deep tissue penetration, and real-time controllability. Ultrasound exposure induces transient changes in the polymer matrix, either by raising local temperature or causing mechanical cavitation, which leads to polymer degradation or structural disruption.<sup>[28]</sup> For instance, Pluronic P105-based micelles, when stabilized with N, N-diethyl acrylamide, have been shown to encapsulate drugs like doxorubicin and release them upon low-frequency ultrasound exposure at the tumor site. This method significantly enhances drug accumulation at the target location, reduces tumor size, and minimizes systemic toxicity. Additionally, ultrasound-treated lipid-polymer hybrid systems have demonstrated increased membrane permeability, facilitating not only drug delivery but also gene transfection. These smart systems hold immense potential in the treatment of deep-seated cancers and localized diseases, offering controlled release profiles, minimized off-target effects, and enhanced therapeutic efficacy.<sup>[29]</sup>

## 6. BIOMOLECULE SENSITIVE POLYMERS

Biomolecule-responsive drug delivery systems represent a cutting-edge approach where specific biological molecules such as glucose or enzymes act as triggers for controlled drug release. In glucose-responsive systems, materials are engineered to detect fluctuations in glucose levels—particularly useful for diabetic patients requiring insulin regulation. A classic example involves polyelectrolyte hydrogels embedded with glucose oxidase (GOx), which catalyses the conversion of glucose to gluconic acid, thereby lowering local pH and initiating swelling in pH-sensitive hydrogels to release insulin. Poly(N-isopropylacrylamide) (PNIPAm) hydrogels functionalized with phenylboronic acid (PBA) provide another elegant mechanism, where PBA interacts reversibly with glucose, altering the polymer's hydrophilicity and promoting insulin release. Concanavalin A (Con A), a glucose-binding lectin, has also been incorporated into carboxymethyl dextran (CM-dextran) hydrogels to form reversible networks that respond to free glucose through competitive binding changing the gel's morphology and permeability. Beyond glucose, enzyme-responsive hydrogels offer

remarkable disease-site specificity.<sup>[30]</sup> These materials contain peptide linkers or cross-links that are selectively cleaved by enzymes overexpressed in pathological tissues. For instance, poly (ethylene glycol) (PEG) hydrogels integrated with human neutrophil elastase (HNE)-sensitive peptides have been developed to release therapeutic agents at inflamed or infected sites.<sup>[31]</sup> Similarly, matrix metalloproteinases (MMPs), which are abundant in tumor microenvironments, have been targeted using MMP-sensitive PEGylated gelatin or polycaprolactone-based systems. These strategies enable highly localized and efficient drug release, minimize systemic side effects, and are particularly valuable in managing chronic conditions like cancer, diabetes and inflammatory diseases. As research advances, biomolecule-responsive systems hold great promise for the development of self-regulated, intelligent therapeutics with enhanced precision and adaptability.<sup>[32]</sup>

## 7. ROS BIORESPONSIVE POLYMERS

Reactive oxygen species (ROS) are chemically reactive molecules derived from molecular oxygen, including singlet oxygen ( $^1\text{O}_2$ ), hydrogen peroxide ( $\text{H}_2\text{O}_2$ ), superoxide anion ( $\text{O}_2^{\bullet-}$ ), and hydroxyl radicals ( $\bullet\text{OH}$ ). While physiologically important as cell signalling mediators, excessive ROS generation can damage cellular components such as DNA, lipids, and proteins, resulting in oxidative stress. Elevated ROS levels are a hallmark of various pathological conditions, particularly cancers, due to mechanisms such as the Warburg effect, oncogenic signalling, and mitochondrial dysfunction. This abnormal oxidative environment provides a compelling target for site-specific drug delivery using ROS-responsive polymeric nanomaterials.<sup>[33]</sup> To exploit this, researchers have developed innovative ROS-sensitive polymers that degrade selectively in the presence of pathological ROS concentrations. A notable strategy involves the use of a chemical amplification system embedded in a ROS-activatable responsive polymer (ROS-ARP). This polymer was synthesized from three distinct monomers with varying functionalities, including ketal moieties that undergo hydrolytic cleavage upon ROS exposure. A critical component of this design is the incorporation of thioether groups via Michael addition of bisthiols to bisacrylamide ketals. Upon interaction with  $\text{H}_2\text{O}_2$  or  $\text{HOCl}$ , thioethers are oxidized into sulfoxides and sulfones, significantly increasing the polymer's hydrophilicity and accelerating ketal hydrolysis, thus enhancing degradation rates. Furthermore, hydroxymethyl-phenylboronic acid pinacol ester (BE) was integrated into the polymer as a  $\text{H}_2\text{O}_2$ -cleavable group, which upon oxidative cleavage releases carboxylic acid groups.<sup>[34]</sup> These generated acids further catalyze the hydrolysis of adjacent ketals in the backbone, creating a self-amplifying degradation cascade.

The ROS-ARP demonstrated a degradation rate over 17 times faster than control polymers lacking this amplification mechanism, highlighting the effectiveness of dual ROS-sensitivity and amplification strategies. Despite its promising degradation profile and smart design, the *in vivo* therapeutic potential of this ROS-triggered polymeric system is still under investigation. However, these advances underline the remarkable potential of ROS-responsive polymers in achieving high specificity, controlled release, and reduced off-target toxicity in oxidative stress-associated diseases, especially cancer.<sup>[35]</sup>

## 8. GLUTATHIONE/REDUCTIVE ENVIRONMENT BIOPOLYMERS

Glutathione (GSH) plays a central role in regulating the oxidative balance within cells and is recognized as one of the most abundant and potent intracellular antioxidants. Structurally composed of glutamate, cysteine, and glycine, GSH helps neutralize harmful reactive oxygen species (ROS) and maintains the cellular redox environment.<sup>[36]</sup> Under normal physiological conditions, the intracellular concentration of GSH ranges between 1 to 10 mM, while extracellular levels are significantly lower. This sharp gradient between intra- and extracellular GSH concentrations provides a valuable biological trigger for the design of stimuli-responsive drug delivery systems. Redox-responsive polymers incorporating disulfide bonds are engineered to remain stable during circulation (in the low-GSH environment) but rapidly degrade within cells where GSH levels are high. This enables site-specific drug release, minimizing systemic toxicity and enhancing therapeutic outcomes. These disulfide linkages can function as crosslinkers in polymeric micelles, nanogels, or hydrogels, or be placed between the drug and the carrier to enable a precise release upon cellular uptake.<sup>[37]</sup> Furthermore, the concept of PEGylation—adding polyethylene glycol chains to nanoparticles—while beneficial for improving blood circulation time, often creates a steric barrier that limits cellular uptake. To overcome this issue, redox-cleavable disulfide bonds can be inserted between PEG and the carrier, allowing PEG to detach upon encountering high intracellular GSH levels. This strategy improves cellular internalization and therapeutic efficacy, especially in targeted cancer therapies or inflamed tissues. Overall, the unique intracellular redox environment can be effectively exploited using GSH-responsive polymers for intelligent, safe, and efficient drug delivery.<sup>[38]</sup>

## 9. ATP RESPONSIVE POLYMERS

Adenosine triphosphate (ATP) is a critical intracellular energy carrier with a pronounced concentration gradient between the intracellular (3–10 mM) and extracellular (10–100 nM)

environments. This steep gradient presents a unique physiological trigger for designing ATP-sensitive polymeric drug delivery systems.<sup>[39]</sup> The energy stored in ATP's high-energy phosphate bonds not only powers cellular metabolism but also serves as a molecular signal in both central and peripheral nervous systems. Leveraging this differential, researchers have developed ATP-responsive nanocarriers—especially polyplex micelles—that are capable of site-specific cargo release within cells. One widely used strategy involves dynamic covalent crosslinking using phenylboronic acid (PBA) derivatives. These form reversible phenylboronate ester bonds with cis-diol-containing molecules, such as ribose moieties in intracellular ATP. In this system, PBA-functionalized block copolymers (e.g., PEG-b-polycation) are used to encapsulate sensitive molecules like mRNA. The crosslinked micelles remain stable extracellularly but disassemble in the ATP-rich intracellular space, thereby releasing their cargo in the cytosol where therapeutic activity is needed. Optimization of PBA: diol crosslinker ratios and polymer protonation levels is critical to balance micelle stability and efficient cargo release.<sup>[40]</sup> Furthermore, cholesterol-functionalization at both the mRNA and polymer ends administration. This platform has also been extended for enzyme delivery: for instance, glucose oxidase-loaded PBA-modified polymers form nanoclusters that remain inert in circulation but dissociate upon intracellular ATP exposure, triggering enzymatic activity specifically at the target site. These ATP-sensitive delivery systems showcase how cellular metabolic states can be harnessed to achieve responsive, precise therapeutic release, particularly valuable in cancer and intracellular-targeting therapies.<sup>[41]</sup>

## **FUTURE DIRECTIONS AND CHALLENGES IN BIORESPONSIVE POLYMER SYSTEMS**

The transition from conventional passive drug delivery systems to intelligent, stimuli-responsive platforms holds the potential to revolutionize therapeutic interventions. By enabling the spatiotemporal control of drug release, smart polymers offer the ability to tailor biodistribution profiles—delivering higher drug concentrations directly to the site of interest while minimizing systemic toxicity and off-target side effects. Such fine-tuned delivery enhances therapeutic efficacy and patient compliance. Current responsive systems, including polymersomes, liposomes, micelles, and dendrimers, demonstrate diverse architectures and mechanisms designed to sense and respond to biochemical or physical stimuli, thereby releasing their therapeutic cargo in a precise manner. Despite significant progress, key translational challenges remain. One of the major limitations is the sensitivity of these systems to physiological triggers, which often exist in nanomolar or even picomolar

concentrations—particularly in the case of biochemical biomarkers. This necessitates the development of highly sensitive polymers or incorporation of amplification strategies capable of responding to these subtle changes. Similarly, physical differences such as pH or temperature between healthy and diseased tissues are often modest, underscoring the need for ultra-responsive and selective materials. Furthermore, the next generation of smart polymers is expected to be multi-stimuli responsive, capable of integrating various environmental cues such as redox potential, enzymatic activity, mechanical stress, or pH fluctuations to achieve better control over drug release in complex pathophysiological settings. These hybrid or multifunctional systems offer the flexibility to fine-tune therapeutic delivery based on disease state or patient-specific variations. Beyond drug delivery, such smart polymers also show promise in tissue engineering and regenerative medicine as injectable scaffolds, as well as in the field of soft robotics and microfluidics as shape-memory materials or adaptive valves. The continuous evolution of polymer chemistry and nanotechnology is expected to further expand the design space for bioresponsive systems. As these materials become more refined, incorporating sensing, processing, and response functions, the development of versatile and programmable drug carriers tailored for personalized medicine becomes increasingly feasible.

## CONCLUSION

Bioresponsive polymers represent a promising class of smart materials that can respond to specific physiological stimuli such as pH, temperature, enzymes, glucose, reactive oxygen species, and redox gradients. Their ability to undergo controlled structural or functional changes under these conditions makes them highly suitable for targeted and controlled drug delivery. By tailoring the responsiveness of these polymers, therapeutic agents can be released at the desired site, minimizing systemic toxicity and enhancing patient compliance.

In recent years, bioresponsive polymers have shown remarkable progress in applications such as cancer therapy, gene delivery, and tissue engineering. The incorporation of these polymers into nanocarriers, hydrogels, and micelles has opened new possibilities for precise, patient-specific treatments. However, challenges such as large-scale synthesis, reproducibility, long-term safety, and regulatory approval remain critical hurdles.

Overall, bioresponsive polymers provide a strong foundation for the development of next-generation drug delivery systems. Future research integrating these polymers with machine learning, artificial intelligence, and personalized medicine will accelerate their translation from bench to bedside, offering safer, smarter, and more effective therapeutic options.

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## REFERENCE

1. Zishan M, Zeeshan A, Faisal S, et al. Vesicular drug delivery system used for liver diseases. *World J Pharm Sci*, 2017; 5(4): 28-35.
2. Thakur A, Roy A, Chatterjee S, Chakraborty P, Bhattacharya K, Mahata PP. Recent trends in targeted drug delivery. SMGroup, 2015.
3. Kumar A, Nautiyal U, Kaur C, Goel V, Piarchand N. Targeted drug delivery system: current and novel approach. *Int J Pharm Med Res*, 2017; 5(2): 448-54.
4. Akhtar M, Jamshaid M, Zaman M, Mirza AZ. Bilayer tablets: a developing novel drug delivery system. *J Drug Deliv Sci Technol*, 2020; 60: 102079. doi: 10.1016/j.jddst.2020.102079.
5. Ali Y, Alqudah A, Ahmad S, Hamid SA, Farooq U. Macromolecules as targeted drug delivery vehicles: an overview. *Des Monomers Polym*, 2015; 22(1): 91-7.
6. Mishra N, Pant P, Porwal A, Jaiswal J, Samad MA, Tiwari S. Targeted drug delivery: a review. *Am J PharmTech Res*, 2016; 6(1).
7. Yoo J, Park C, Yi G, Lee D, Koo H. Active targeting strategies using biological ligands for nanoparticle drug delivery systems. *Cancers (Basel)*, 2019; 11(5): 640. doi:10.3390/cancers11050640.
8. Mishra N, Pant P, Porwal A, Jaiswal J, Samad MA, Tiwari S. Targeted drug delivery: a review. *Am J PharmTech Res*, 2016; 6(1).
9. Rani K, Paliwal SA. Review on targeted drug delivery: its entire focus on advanced therapeutics and diagnostics. *Sch J App Med Sci*, 2014; 2(1C): 328-31.
10. Gujral S, Khatri S. A review on basic concept of drug targeting and drug carrier system. *Int J Adv Pharm Biol Chem*, 2013; 2(1).
11. Vyas SP, Khar RK. Targeted and controlled drug delivery: novel carrier systems. New Delhi: CBS Publishers & Distributors, 2004.
12. Manish G, Vimukta S. Targeted drug delivery system: a review. *Res J Chem Sci*, 2011; 1(2): 135-8.

13. Bhargav E, Madhuri N, Ramesh K, Manne A, Ravi V. Targeted drug delivery: a review. *World J Pharm Sci*, 2013; 3(1): 150-69.
14. Gujral S, Khatri S. A review on basic concept of drug targeting and drug carrier system. *Int J Adv Pharm Biol Chem*, 2013; 2(1).
15. Erkoc P, Cinay GE, Kizilel S. Targeted drug delivery: overcoming barriers through the design of novel delivery vehicles. *SMGroup*, 2015.
16. Solanki R, Bhatia D. Stimulus-responsive hydrogels for targeted cancer therapy. *Gels*, 2024; 10(7): 440.
17. Hu S, Zhao R, Shen Y, Lyu B. Revolutionizing drug delivery: the power of stimulus-responsive nanoscale systems. *Chem Eng J.*, 2024; 496: 154265.
18. Fan R, Cheng Y, Wang R, Zhang T, Zhang H, Li J, et al. Thermosensitive hydrogels and advances in their application in disease therapy. *Polymers (Basel)*, 2022; 14(11): 2379.
19. AlSawaftah NM, Awad NS, Pitt WG, Hussein GA. pH-responsive nanocarriers in cancer therapy. *Polymers (Basel)*, 2022; 14(5): 936.
20. Bertsch P, Diba M, Mooney DJ, Leeuwenburgh SC. Self-healing injectable hydrogels for tissue regeneration. *Chem Rev*, 2022; 123(2): 834-73.
21. Yi YH, Chen G, Gong S, Han LZ, Gong TL, Wang YX, et al. Injectable temperature-sensitive hydrogel loaded with IL-36Ra for the relief of osteoarthritis. *ACS Biomater Sci Eng*, 2023; 9(4): 1672-81.
22. Lee S, Choi S, Kim MS. Intra-articular hydrogel formulation prolongs the in vivo stability of Toll-like receptor antagonistic peptides for rheumatoid arthritis treatment. *J Control Release*, 2024; 372: 467-81.
23. Ramli I, Cheriet T, Posadino AM, Giordo R, Zayed H, Eid AH, et al. Potential therapeutic targets of resveratrol in the prevention and treatment of pulmonary fibrosis. *Front Biosci (Landmark Ed)*, 2023; 28: 198.
24. Unsoy G, Gunduz U. Smart drug delivery systems in cancer therapy. *Curr Drug Targets*, 2018; 19(2): 202-12.
25. Singh R, Jadhav K, Vaghasiya K, Ray E, Shukla R, Verma RK. New generation smart drug delivery systems for rheumatoid arthritis. *Curr Pharm Des*, 2023; 29(6): 984-1001.
26. Vivero-Escoto JL, Slowing II, Wu CW, Lin VS. Photoinduced intracellular controlled release drug delivery in human cells by gold-capped mesoporous silica nanosphere. *J Am Chem Soc*, 2009; 131(9): 3462-3.
27. Klaikherd ANC, Thayumanavan S. Multi-stimuli sensitive amphiphilic block copolymer assemblies. *J Am Chem Soc*, 2009; 131(13): 4830-8.

28. Hussein GA, Pitt WG. Ultrasonic-activated micellar drug delivery for cancer treatment. *J Pharm Sci*, 2009; 98(3): 795-811.
29. Pruitt JD, Pitt WG. Sequestration and ultrasound-induced release of doxorubicin from stabilized Pluronic P105 micelles. *Drug Deliv*, 2002; 9(4): 253-8.
30. Kataoka K, Miyazaki H, Okano T, Sakurai Y. Sensitive glucose-induced change of the lower critical solution temperature of poly[N, N-dimethylacrylamide-co-3-(acrylamide)phenylboronic acid] in physiological saline. *Macromolecules*, 1994; 27(4): 1061-2.
31. Kataoka K, Miyazaki H, Bunya M, Okano T, Sakurai Y. Totally synthetic polymer gels responding to external glucose concentration: their preparation and application to on-off regulation of insulin release. *J Am Chem Soc*, 1998; 120(49): 12694-5.
32. Miyata T, Jikihara A, Nakamae K, Hoffman AS. Preparation of reversibly glucose-responsive hydrogels by covalent immobilization of lectin in polymer networks having pendant glucose. *J Biomater Sci Polym Ed*, 2004; 15(9): 1085-98.
33. Li R, Jia Z, Trush MA. Defining ROS in biology and medicine. *React Oxyg Species (Apex)*, 2016; 1(1): 9-21.
34. Hancock J. Oxygen is instrumental for biological signaling: an overview. *Oxygen*, 2021; 1(1): 3-15.
35. Perillo B, Di Donato M, Pezone A, Di Zazzo E, Giovannelli P, Galasso G, et al. ROS in cancer therapy: the bright side of the moon. *Exp Mol Med*, 2020; 52(2): 192-203.
36. Han M, Bae Y, Nishiyama N, Miyata K, Oba M, Kataoka K. Transfection study using multicellular tumor spheroids for screening non-viral polymeric gene vectors with low cytotoxicity and high transfection efficiencies. *J Control Release*, 2007; 121(1-2): 38-46.
37. Takae S, Miyata K, Oba M, Ishii T, Nishiyama N, Itaka K, et al. PEG-detachable polyplex micelles based on disulfide-linked block cationomers as bioresponsive nonviral gene vectors. *J Am Chem Soc*, 2008; 130(18): 6001-9.
38. Yoshinaga N, Uchida S, Dirisala A, Naito M, Osada K, Cabral H, et al. mRNA loading into ATP-responsive polyplex micelles with optimal density of phenylboronate ester crosslinking to balance robustness in the biological milieu and intracellular translational efficiency. *J Control Release*, 2020; 330: 317-28.
39. Naito M, Ishii T, Matsumoto A, Miyata K, Miyahara Y, Kataoka K. A phenylboronate-functionalized polyion complex micelle for ATP-triggered release of siRNA. *Angew Chem Int Ed Engl*, 2012; 51(43): 10751-5.

40. Matsumoto A, Kataoka K, Miyahara Y. New directions in the design of phenylboronate-functionalized polymers for diagnostic and therapeutic applications. *Polym J.*, 2014; 46(8): 483-91.
41. Matsumoto, A.; Kataoka, K.; Miyahara, Y. New directions in the design of phenylboronate-functionalized polymers for diagnostic and therapeutic applications. *Polym. J.*, 2014; 46: 483–491.