



Transporter targeted-carnitine modified pectin-chitosan nanoparticles for inositol hexaphosphate delivery to the colon: An in silico and in vitro approach

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ABSTRACT

Orally targeted delivery systems have attracted ample interest in colorectal cancer management. In this investigation, we developed Inositol hexaphosphate (IHP) loaded Tripolyphosphate (Tr) crosslinked Pectin (Pe) Chitosan (Ch) nanoparticles (IHP@Tr*Pe-Ch-NPs) and modified them with L-Carnitine (CE) (CE-IHP@Tr*Pe-Ch-NPs) to improve uptake in colon cells. The formulated CE-IHP@Tr*Pe-Ch-NPs displayed a monodisperse distribution with 219.3 ± 5.5 nm diameter and 30.17 mV surface charge. Cell-line studies revealed that CE-IHP@Tr*Pe-Ch-NPs exhibited excellent biocompatibility in J774.2 and decreased cell viability in DLD-1, HT-29, and MCF7 cell lines. More cell internalization was seen in HT-29 and MCF7 due to overexpression of the OCTN2 and ATB^{0,+} transporter (CE transporters) compared to DLD-1. The cell cycle profile, reactive oxygen species, apoptosis, and mitochondrial membrane potential assays were performed to explore the chemopreventive mechanism of CE-IHP@Tr*Pe-Ch-NPs. Moreover, the in-silico docking studies revealed enhanced interactive behavior of CE-IHP@Tr*Pe-Ch-NPs, thereby proving their targeting ability. All the findings suggested that CE-IHP@Tr*Pe-Ch-NPs could be a promising drug delivery approach for colon cancer targeting.

1. Introduction

Cancer is a major burden disease worldwide that annually takes a toll on several lives. Worldwide, the prevalence and mortality are still rising substantially despite enormous attempts to address the issue. The incidence of colorectal cancer (CRC), the third largest cause of cancer mortality worldwide, is swiftly escalating in developing countries [1,2]. Cancer treatment burns holes in the patient's pocket, as well as the side effects of cancer therapy worsen the quality of life of a cancer patient. It

has been demonstrated that 30–40 % of malignancies might be prevented with a simple diet change that includes increasing fruit and vegetable intake, retaining a healthy body weight, abstaining from alcohol, and engaging in consistent physical activity [3,4]. Natural dietary agents are known to control the genesis and course of malignancies owing to their low or no toxicity, notable multiple-site efficacy, oral ingestion, recognized mechanisms of action, competitive prices, and human acceptance. The utilization of natural products for CRC management is very promising because diet plays a significant role in the

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