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Review Article

**ETHOSOMES: A NEW PATHWAY FOR NOVEL DRUG
DELIVERY****Singh Satnam * and Kumar Sandeep**

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Abstract:

Transdermal is the route for delivery of drug to the viable epidermis at controlled rate to systemic circulation. All ethosomal system are simple in their preparation, safe for use in a combination that can highly expand their application. Ethosomes are the drug carriers that enable drug to reach into systemic circulation made up of phospholipids, high concentration of ethanol and water.

Key words: *Transdermal, Ethosomes, Ethanol effect etc*

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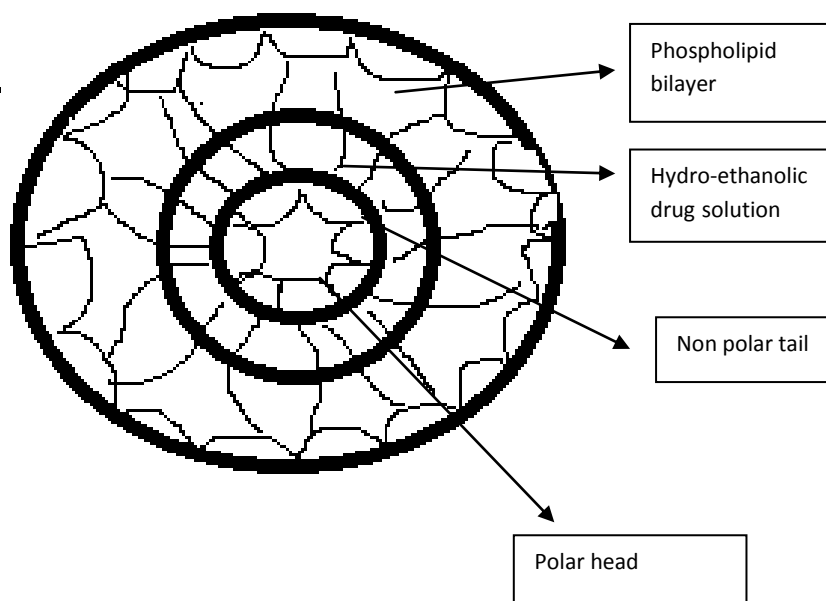
INTRODUCTION:

Transdermal drug delivery system has given best result in comparison to conventional oral drug delivery system and it eliminates gastrointestinal involvement and hepatic first pass metabolism of the drug but the main consequences of TDDS is it encounters the barrier properties of the horny layer (Stratum Corneum) and hence only the lipophilic drugs that have molecular weight <500 Da can pass through it(1,2). In order to improve the permeation of drugs through the skin surfaces various mechanisms have been studied, including use of chemical or physical methods of penetration enhancers such as iontophoresis, sonophoresis, etc. Liposomes, niosomes, transferosomes and ethosomes also have been investigated to enhance permeation of drug through the stratum corneum barrier layer. Permeation enhancers increase the permeability of the skin, so that the drugs can easily pass through the skin. Unlike liposomes[3], that are known mainly to deliver drugs to the outer layers of skin, ethosomes can enhance permeation through the stratum corneum barrier layer (4,5) Ethosomes can permeate through the skin layers more rapidly and possess significantly higher transdermal flux while comparing to liposomes(6,7,8).

Ethosomes

“Ethosomes are ethanolic vesicles”. Ethosomes can be defined as novel delivery carriers that enable drugs to reach deep into the skin layers or the systemic circulation. These are soft, malleable vesicles used for enhanced delivery of active agents. The vesicles have been well known for their importance in cellular communication and particle transportation. These vesicles allow in controlling the release rate of drug over an extended period of time, keeping the drug protected from immune response or other body removal systems and thus be able to release just the right amount of drug and maintains that constant concentration for longer periods of time.(9).

Ethosomes are lipid vesicles that contain the phospholipids, alcohol (ethanol and isopropyl alcohol) in relatively high amount and water. Ethosomes are soft vesicles made of phospholipids and ethanol (in higher quantity) and water. The size range of ethosomes may vary from few nanometers (nm) to microns (μ) ethosomes can penetrate through the skin layers at faster rates and possess significantly higher transdermal flux.

**STRUCTURE OF ETHOSOMES**

ADVANTAGES

1. Delivery of proteins and peptides molecules is possible.
2. Transdermal drug delivery through skin is enhanced.
3. More patient compliance.
4. Due to gel formulation bitter taste of drug is masked.
5. Simple method for drug delivery then iontophoresis, sonophoresis and other methods.
6. Ethosomal drug delivery is passive, non invasive and is available for immediate commercialization. (10, 11)

DISADVANTAGES

- 1 The molecular size of the drug should be reasonable that it should be absorbed percutaneously.
- 2 Adhesive may not adhere well to all types of skin.
3. May not be economical.
4. Poor yield.
5. Skin irritation or dermatitis due to excipients and enhancers of drug delivery systems.
6. In case if shell locking is ineffective then the ethosomes may fall apart on transfer into water.
7. Loss of product during transfer from organic to water media. (12,13,14,15)

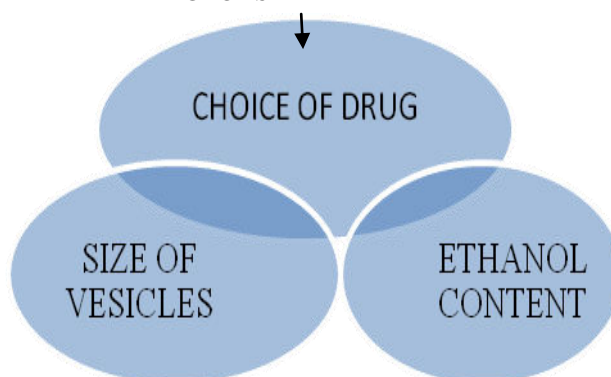
CHALLENGES DURING TRASDERMAL DRUG DELIVERY

The skin has a multi-layered structure made up of stratum corneum (horny layer), the outermost layer which contains the epidermis and dermis layer. These layers of skin contain fibroblasts, hair follicles

and sweat glands that originate in the area of dermis and having blood supply. The nature of SC is a major challenge for systemic delivery of percutaneously absorption of drugs. The arrangement of corneocytes, flattened mononucleotide keratinocytes, with lipids and proteins makes the SC approximately least permeable than other body biological membranes. Hence it is then more difficult for other drugs to penetrate to the deeper layers of skin. (16,17,18)

FACTORS AFFECTING ETHOSOMAL PREPARATION

1. **CHOICE OF DRUG:** During formulation the most important factor to be considered in ethosomes is the nature and physicochemical properties of the drug that is going to be selected. This is because the drug ultimately may affect the properties of the ethosomal systems, especially particle size and zeta-potential. Therefore lipophilic type of drug candidate is selected, because hydrophilic drug may have chances of leakage. (19)
2. **SIZE OF VESICLES:** Ethosomes are specially designed for topical and transdermal drug delivery system, and hence the size of these carriers are very important. The size of these vesicles should be <200 nm or 300 nm and is suitable for this type of administration.(20,21)
3. **CONCENTRATION OF ETHANOL:** Ethanol is used as an penetration enhancer. (22). It plays an important role in ethosomal systems by giving the vesicles unique characteristics in terms of size, zeta-potential, stability, entrapment efficacy, and enhanced skin permeability. Concentrations of ethanol in ethosomal systems must be in approximately 10%–50%. Over this concentration inc size of ethosomal vesicles. (23, 24)

FACTORS

COMPOSITION OF ETHOSOMES

| CLASS | EXAMPLE | USES |
|---------------|---|---|
| PHOSPHOLIPIDS | Soya phosphatidyl choline, Egg phosphatidyl choline | Vesicles forming component |
| ALCOHAL | Ethanol, Isopropyl alcohol | For providing the softness for vesicle and as penetration enhancer. |
| POLYGLYCOL | Propylene glycol, Transcutol RTM | As a skin penetration enhancer |
| CHOLESTEROL | Cholesterol | For providing the stability to vesicle membrane |
| Dye | Rhodamine-123, Rhodamine red, Fluorescene Isothiocynate, | For characterization study |

MECHANISM OF DRUG PENITRATION

1. ETHANOL EFFECT: Ethanol plays its role as penetration enhancer through the skin different layers. The mechanism of its penetration enhancing effect is well known. Ethanol get enters into intercellular lipids layers and increases the fluidity of cell membrane lipids and then decrease the density of the lipid multicellular layer of cell membrane.

2. ETHOSOMES EFFECT: This effect increased cell membrane lipid fluidity by the ethanol of ethosomes results increased skin permeability. Thus, the ethosomes permeates easily inside the skin layers, where it got fused with lipids of the skin and releases the drugs into deep inside layer of skin (25).

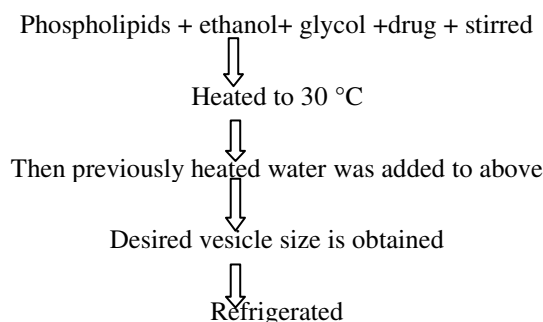
METHODS OF PREPRATION

1 THE ETHANOL INJECTION AND SONICATION METHOD

This method contains, the organic phase which contains the dissolved phospholipids in ethanol and then it is injected to the aqueous phase, using a syringe system and the flow rate must be 200 $\mu\text{L}/\text{min}$, then homogenized with an ultrasonic probe for 5 minutes.(26,27)

2 THIN FILM HYDRATION METHOD

This method contains the lipid film which is hydrated by a hydro-ethanol solution and then phospholipids dissolved in chloroform only or in a chloroform–methanol mixture at certain ratios in a clean and dry Rbf. Then the organic solvents are removed by using a rotary vacuum evaporator at a temperature above the lipid-phase transition temperature. At last, the traces of the solvents are removed from the deposited film under vacuum. The lipid film is then hydrated with a water–ethanol solution or phosphate buffered saline–ethanol solution. (28,29,30)

3 COLD METHOD

4 HOT METHOD

Phospholipids +water +drug at 40° Cand dispersed

Formulation of colloid solution

Ethanol and glycol mixed separately 40°C

Organic phase added to aqueous phase (31)

CHARACTERIZATION OF ETHOSOMES

(32,33)

1. Vesicle shape: Visual imaging of ethosomes can be done by using transmission electron microscopy (TEM) and by scanning electron microscopy (SEM). Visual inspection by electron microscopy shows that an ethosomal formulation has vesicular size of 300-400 nm in diameter. Vesicles obtain on are malleable because of their not proper or imperfect round shape.
2. Vesicle size and zeta-potential: Both can be seen by dynamic light scattering and photon correlation spectroscopy.

3. Drug entrapment efficiency: This can be measured by ultracentrifugation method.

4. Temperature of transition: This can be measured by deferential scanning calorimetry.

5. Drug content: Ethosomes drug content can be measured by using UV spectrophotometer. This can also be measured by modified liquid chromatography method.

6. Stability studies: Stability of ethosomes can be determined by mean size using DLS and changes in structure can be seen by TEM.

7. Skin permeation: This can be determined by using confocal laser scanning microscopy

CHARACTERIZATION OF ETHOSOMES

| S.no | Parameter | Importance | Method |
|------|-----------------------|--------------------|----------------------|
| 1 | size and shape | skin penetration | SEM , TEM , DLS |
| 2 | zeta potential | vesicle stability | Zeta meter |
| 3 | entrapment efficiency | suitability | Ultracentrifugation |
| 4 | Drug content | amount of drug | UV , HPLC |
| 5 | Invitro dissolution | release rate | Franz diffusion cell |
| 6 | skin permeation | rate drug movement | CL ,SM |

ETHOSOMES MARKETED FORMULATION

| NAME OF PRODUCT | USES | MANUFACTURER |
|-----------------|---|------------------|
| Nanominox | Hair growth promoter that must be metabolized by sulfation to active compound | Sinere , Germany |
| Supravir cream | For treatment of herpes virus formulation of acyclovir | Trima, Isarel |
| Cellutight | Topical cream to breakdown of fat metabolism | USA |
| Niocellex | Topical anti-cellulite cream | Isarel |

Applications of ethosomes (34,35,36,37)

| Active ingredients | Formulation | Application | Observation |
|--------------------|-------------|---|---|
| Ketoprofen | Suspension | Treatment of arthritis related inflammatory pain and musculoskeletal pain | Enhanced transdermal delivery |
| Linoleic acid | Suspension | Treatment of melasma | Improved skin permeation and accumulation |
| Ligustrazine | Patch | Treatment of angina pectoris | Better drug absorption and Increased bioavailability. |

FUTURE ASPECTS OF ETHOSOMES

With the tremendous work of ethosomes has created a new area of interest in vesicular research for TDDS. On obtaining different reports ethosomes shows a promising future perspective in making TDD of various agents more effectively. Further on purifying research in this area will allow better hold on drug release pattern in vivo, allowing researchers to make therapy more effective. In ethosomal formulation special focus is on the skin delivery of proteins and other macromolecules. The near future also impact on the growing success of new commercial ethosomes based topical products. Novel Therapeutics Technology (NTT) increase in demand for biopharmaceutical products for treating alopecia, deep skin infection, herpes, hormone deficiency, inflammatory disorders, atopic dermatitis and erectile dysfunctioning .

CONCLUSION:

Ethosomes offered the safety, efficacy, long term stability and can be simplified manufactured at industrial as well as better patient compliance. Thus, it can be a logical conclusion, that ethosomes can become a promising drug carrier in future for not only topical treatment of local and systemic disorders, but also for the cosmetic and pharmaceutical field. (38)

REFERENCES:

1. Gangwar S., Singh S., Garg G., Ethosomes: A Novel tool for Drug Delivery through the Skin, *Journal of Pharmacy Research* 2010;3,4:688-691.
2. Kumar KP., Radhika PR., Sivakumar T., Ethosomes: A Priority in Transdermal Drug Delivery, *International Journal of Advances in Pharmaceutical Sciences* 2010;1:111-121.

3. Heeremans JLM., Gerristen HR., Meusen SP., Mijnheer FW., Gangaram RS., Panday G., Prevost R., Kluft C., Crommelin DJA., The preparation of tissue type plasminogen activator (tPA) containing liposomes: entrapment efficacy and ultracentrifugation damage, *Journal of Drug Targeting* 1995;3:301.
4. Asbill CS., El-Kattan AF., Michniak B., Enhancement of transdermal drug delivery: chemical and physical approaches, *Critical Reviews in Therapeutic Drug Carrier Systems* 2000;17:621
5. Touitou E., Dayan N., Levi-Schaffer F., Piliponsky A., Novel lipid vesicular system for enhanced delivery *Journal of Lipid Research* 1998;8:113.
6. Verma P., Pathak K., Therapeutic and cosmeceutical potential of ethosomes: An overview, *Journal of Advanced Pharmaceutical Technology & Research* 2010;1:274-82.
7. Jain S., Umamaheshwari RB., Bhadra D., Jain NK., Ethosomes: A novel vesicular carrier for enhanced transdermal delivery of an anti-HIV agent, *Indian Journal of Pharmaceutical Sciences* 2004;66:72-81.
8. Touitou E., Godin B., Dayan N., Weiss C., Piliponsek A., Levi-Schaffer F., Intracellular delivery mediated by an ethosomal carrier, *Biomaterials* 2001;22:3053-3059.
9. Manosroi A., Jantrawut P., Khositsuntiwong N., Manosroi W., Manosroi J., Novel Elastic Nano vesicles for Cosmeceutical and Pharmaceutical Applications, *Chiang Mai Journal of Science* 2009;36,2:168-178
10. Rakesh R., Anoop KR., Ethosome for Transdermal and Topical Drug Delivery, *International Journal of Pharmaceutical Sciences*

- and Research 2012;4,3:17-24
11. Gangwar S., Singh S., Garg G., Ethosomes: A Novel Tool for Drug Delivery Through the Skin, *Journal of Pharmacy Research* 2010;3,4:688-691.
 12. Jain H., Patel J., Joshi K., Patel P., Upadhyay UM., Ethosomes: A Novel Drug Carrier, *International Journal of Clinical Practice* 2011;7:1:1-4.
 13. Upadhyay N., Mandal S., Bhatia L., Shailesh S., Chauhan P., A Review on Ethosomes: An Emerging Approach for Drug Delivery through the Skin, *Recent Research in Science and Technology* 2011;3,7:19-24.
 14. Sivakranth M., Anjuma Ara P., Krishnaveni C., Venkatesh E., Ethosomes: A Novel Vesicular Drug Delivery System, *International Journal of Advances in Pharmaceutical Research* 2012;2,1:16-27.
 15. Kumar R., Aslam MD., Tripathi A., Prasad D., Chaudhary V., Jain V., Mishra SK., Singh R., Ethosomes: Novel Vesicular Carriers in Transdermal Drug Delivery, *Journal of Global Pharma Technology* 2010;2,6:1-7.
 16. Dave A, (2010) *International Journal of Drug Delivery*. 2: 81-92
 17. Hadgraft J, Guy R. *Transdermal Drug Delivery, Developmental Issues and Research Initiatives*. New York: Marcel Dekker 1989
 18. Chourasia MK, (2011), Nanosized ethosomes bearing ketoprofen for improved transdermal delivery, *Results in Pharma Sciences* (1); 60–67.
 19. Dayan N, Touitou E. Carriers for skin delivery of trihexyphenidyl HCl: ethosomes vs liposomes. *Biomaterials*. 2000;21(18):1879–1885. [[PubMed](#)]
 20. Akhtar N, Pathak K. Cavamax W7 composite ethosomal gel of clotrimazole for improved topical delivery: development and comparison with ethosomal gel. *AAPS PharmSciTech*. 2012;13(1):344–355. [[PMC free article](#)] [[PubMed](#)]
 21. Verma P, Pathak K. Nanosized ethanolic vesicles loaded with econazole nitrate for the treatment of deep fungal infections through topical gel formulation. *Nanomedicine*. 2012;8(4):489–496. [[PubMed](#)]
 22. Finin BC, Morgan TM. Transdermal penetration enhancers: Applications, limitations, and potential. *J Pharm Sci*. 1999;88(10):955–958. [[PubMed](#)]
 23. Touitou E, Dayan N, Bergelson L, Godin B, Eliaz M. Ethosomes — novel vesicular carriers for enhanced delivery: characterization and skin penetration properties. *J Control Release*. 2000;65(3):403–418. [[PubMed](#)]
 24. Ascenso A, Raposo S, Batista C, et al. Development, characterization, and skin delivery studies of related ultradeformable vesicles: transfersomes, ethosomes, and transethosomes. *Int J Nanomedicine*. 2015;10:5837–5851. [[PMC free article](#)] [[PubMed](#)]
 25. Heeremans JLM., Gerristen HR., Meusen SP., Mijnheer FW., Gangaram RS., Panday G., Prevost R., Kluft C., Crommelin DJA., The preparation of Tissue Type Plasminogen Activator (T- PA) containing liposomes: Entrapment Efficacy and Ultracentrifugation Damage, *Journal of Drug Targeting* 1995;3:301.
 26. Zhaowu Z, Xiaoli W, Yangde Z, Nianfeng L. Preparation of matrine ethosome, its percutaneous permeation in vitro and anti-inflammatory activity in vivo in rats. *J Liposome Res*. 2009;19(2):155–162. [[PubMed](#)]
 27. Liu X, Liu H, Liu J, et al. Preparation of a ligustrazine ethosome patch and its evaluation in vitro and in vivo. *Int J Nanomedicine*. 2011;6:241–247. [[PMC free article](#)] [[PubMed](#)].
 28. Maheshwari RG, Tekade RK, Sharma PA, et al. Ethosomes and ultradeformable liposomes for transdermal delivery of clotrimazole: a comparative assessment. *Saudi Pharm J*. 2012;20(2):161–170. [[PMC free article](#)] [[PubMed](#)]
 29. Mishra D, Mishra PK, Dubey V, Nahar M, Dabadghao S, Jain NK. Systemic and mucosal immune response induced by transcutaneous immunization using hepatitis B surface antigen-loaded modified liposomes. *Eur J Pharm Sci*. 2008;33(4–5):424–433. [[PubMed](#)]
 30. Barry B W. Is Transdermal drug delivery research still important today? *Drug Discovery Today*. 2001; 6(19): 967 – 971.
 31. Manosroi A, Jantrawut P, Khositsuntiwong N, Manosroi W, Manosroi J. Novel Elastic Nanovesicles for Cosmeceutical and Pharmaceutical Applications. *Chiang Mai. J. Sci*. 2009; 36(2): 168-178.
 32. Rao Y., Zheng F., Zhang X., In-Vitro Percutaneous Permeation and Skin Accumulation of Finasteride Using Vesicular Ethosomal Carriers, *AAPS Pharm Sci Tech* 2008;9:860-865. d characterization of rutin-loaded ethosomes. *Korean J Chem Eng*. 2014;31(3):485–489.33.
 33. P, Pathak K. Therapeutic And Cosmeceutical Potential Of Ethosomes: An Overview. *Journal Of Advanced Pharmaceutical Technology And Research*,1(3), 2010, 274-282.
 34. Manish, K.C., Lifeng, K., Sui, Y.C., Nanosized Ethosomes Bearing Ketoprofen For Improved

- Transdermal Delivery, Results Pharma Sci,2011;1:60-67.
35. Celia, C., Cilurzo, F., Trapasso, E., Cosco, D., Fresta, M., Paolino, D., Ethosomes And Transfersomes Containing Linoleic Acid: Physicochemical And Technological Features Of Topical Drug Delivery Carriers For The Potential Treatment Of Melasma Disorders. Biomed microdev, 2011; 6:105-111.
36. Carl, S., Jakob, T.M., Annette, G., Klaus, E.A., Ann-Therese, K., Charlotte, A.J., Marica, B.E., A Study of The Enhanced Sensitizing Capacity of A Contact Allergen In Lipid Vesicle Formulation, Toxicol Appl Pharmacol, 2011; 252:221-227.
37. Rao, Y., Zheng, F., Zhang, X., Gao, J., Liang, W., In Vitro Percutaneous Permeation And Skin Accumulation Of Finasteride Using Vesicular Ethosomal Carriers, AAPS Pharm Sci Tech, 2008; 9:860-865.
38. Verma P, Pathak K. Therapeutic And Cosmeceutical Potential Of Ethosomes: An Overview. Journal Of Advanced Pharmaceutical Technology And Research, 1(3), 2010, 274-282.