

# Ginsenoside-Gemcitabine Nanocomplex-based Delivery System for Enhanced Cancer Therapy

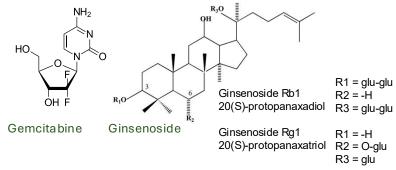
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AIM: To develop and evaluate a self-assembled ginsenoside-gemcitabine nanocomplex (GGNC) as a novel bioactive drug delivery system aimed at enhancing chemotherapeutic efficacy, sustaining drug release, and minimizing toxicity in colorectal cancer therapy.

#### **BACKGROUND**

- Colorectal cancer (CRC) is the third leading cause of cancer-related mortality worldwide.
- Current chemotherapy regimens often face limitations such as drug resistance, systemic toxicity, and poor bioavailability.
- Gemcitabine, a second-line agent in CRC, is limited by rapid enzymatic degradation, short plasma half-life, and off-target toxicity<sup>1</sup>.
- Ginsenosides, bioactive compounds from Panax ginseng, possess anticancer, anti-inflammatory, and antioxidant properties<sup>2</sup> and can self-assemble into nanoparticles.
- Ginsenosides serve as both therapeutic agents and nanocarriers, offering a promising strategy to improve drug delivery and efficacy<sup>2</sup>.
- This study aims to develop ginsenoside-gemcitabine nanocomplexes (GGNCs) for sustained drug release, enhanced colloidal stability, and synergistic anticancer effects in vitro CRC models.

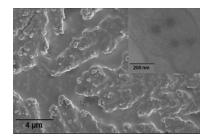


#### **METHODS**

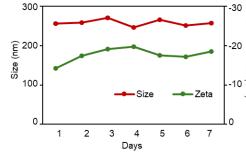
- Preparation of GGNCs: Ginseng dissolved in DMSO was added dropwise to gemcitabine (5:1 w/w) in water, stirred for 6 h, then filtered, washed, and lyophilized.
- Characterization: Particle size and morphology was analyzed by TEM; PXRD and FT-IR were used to assess crystallinity and molecular interactions.
- Stability: Particle size and zeta potential were monitored over 7 days in water.
- Drug Analysis: Drug loading and encapsulation efficiency were measured; in vitro release was assessed by HPLC.
- Cell Viability: Alamar Blue assay was performed on L929 and SW480 cells.

#### **RESULTS**

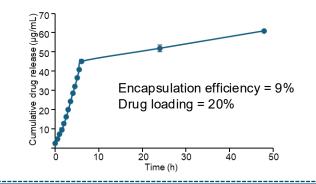
1. GNCs exhibited a uniform spherical shape as observed under SEM and TEM (inset), with a size range of ~ 200-250 nm.



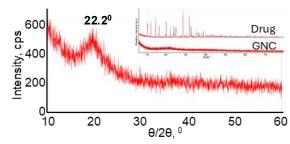
2. GGNCs showed consistent particle size ( $\sim$ 250 - 270 nm) with no significant aggregation and stable zeta potential (-15 mV to -20 mV) over a 7-day period in aqueous conditions, indicating good short-term colloidal stability.



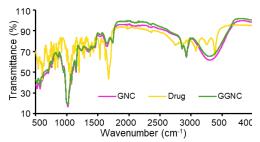
3. GGNCs showed a biphasic release profile with an initial burst followed by sustained gemcitabine release, with a cumulative release of ~61 µg/mL over 48 hours in PBS at 37 °C, confirming effective drug incorporation into the nanoparticles.



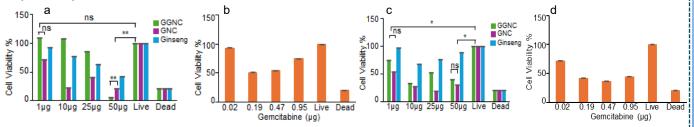
4. PXRD analysis of GGNCs exhibited a broad amorphous halo ( $2\theta = 15^{\circ}$ - $30^{\circ}$ ), similar to GNCs, with no detectable gemcitabine peaks, confirming successful drug incorporation. Inset shows PXRD spectra of free gemcitabine and GNCs as controls.



5. FT-IR analysis showed no gemcitabine-specific peaks (N–H, C–F, C=O) in GGNCs, indicating the absence of free drug on the nanoparticle surface. Retention of ginseng-specific peaks suggests successful drug encapsulation.



6. GGNCs exhibited dose-dependent cytotoxicity in SW480 cells (a,b), reducing viability to ~10% at 50 μg. GNCs showed moderate effects, while free ginseng and gemcitabine had limited effects, indicating a synergistic response in the GGNC formulation. In L929 fibroblasts (c,d), GGNCs and GNCs caused moderate toxicity at higher concentrations (~40-30% viability), whereas free ginseng maintained >90% viability, suggesting the selective cytotoxicity of GGNCs toward cancer cells.



## CONCLUSION

- ✓ This study reports the successful synthesis and characterization of ginseng-gemcitabine nanocomplexes, a self-assembled nanocarrier system utilizing ginsenosides for dual therapeutic and delivery functions.
- ✓ GGNCs demonstrated sustained drug release, maintained colloidal stability over 7 days, and cytotoxicity against colorectal cancer cells suggesting synergistic therapeutic effect.
- ✓ These findings highlight GGNCs as a promising, safe, and effective strategy for cancer therapy.

#### **REFERENCES**

- Zeng, X., et al. Front. Endocrinol. 14, 1170526 (2023).
- 2. Zuo, S., et al. Front. Bioeng. Biotechnol. 10, 945472 (2022).

### **ACKNOWLEDGMENT**

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