

Enhanced anti-sarcopenic activity of perindopril erbumine-entrapped ultradeformable liposomes via skin delivery in muscle atrophy mouse model

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ABSTRACT

Sarcopenia is a pertinent challenge in the super-aged societies causing reduced functional performance, poor quality of life and increased morbidity. The aim of this study is to prepare perindopril erbumine-entrapped ultradeformable liposomes (PER-UDLs) with enhanced skin permeation and to investigate the anti-sarcopenic activity of optimized PER-UDLs in lipopolysaccharide (LPS)-induced muscle atrophy mouse model. PER-UDLs were prepared by thin-film hydration and extrusion technique using egg yolk phosphatidylcholine as a bilayer forming lipid component and Tween 80 or sodium deoxycholate as an edge activator. The deformability of PER-UDLs was determined and compared with that of conventional liposomes by penetrating formulations through a filter device at a constant pressure. The in vitro skin permeation of PER-UDLs was assessed using Franz diffusion cell. In vivo anti-sarcopenic effects of PER-UDLs were investigated in lipopolysaccharide-induced muscle atrophy mouse model. Owing to the smallest particle size (75.0 nm) and the highest deformability (54.2) and entrapment efficiency (35.7%), PER-UDLs with EPC to Tween 80 ratio of 8:2 was selected as the optimized formulation. The optimized PER-UDLs showed significantly higher cumulative amount of drug permeated and permeation rate across the rat skin compared to PER solution (485.7 vs. 50.1 μg and 13.4 vs. 2.3 μg/cm²/h, respectively). Topically applied PER-UDLs successfully alleviated the LPS-induced sarcopenia in mice by improving body weight changes, grip strength and muscle weight. Furthermore, PER-UDLs reduced the shrinkage of muscle fibers as demonstrated by higher cross-sectional area than PER solution. PER-UDLs also increased the expression of myosin heavy chain (MHC) protein and reduced the expression of muscle atrophy F-box (Atrogin-1) and muscle ring-finger protein-1 (MuRF1), thereby improving muscles atrophy. In conclusion, these results indicate that PER-UDLs have a great potential as sarcopenia therapeutics.

INTRODUCTION

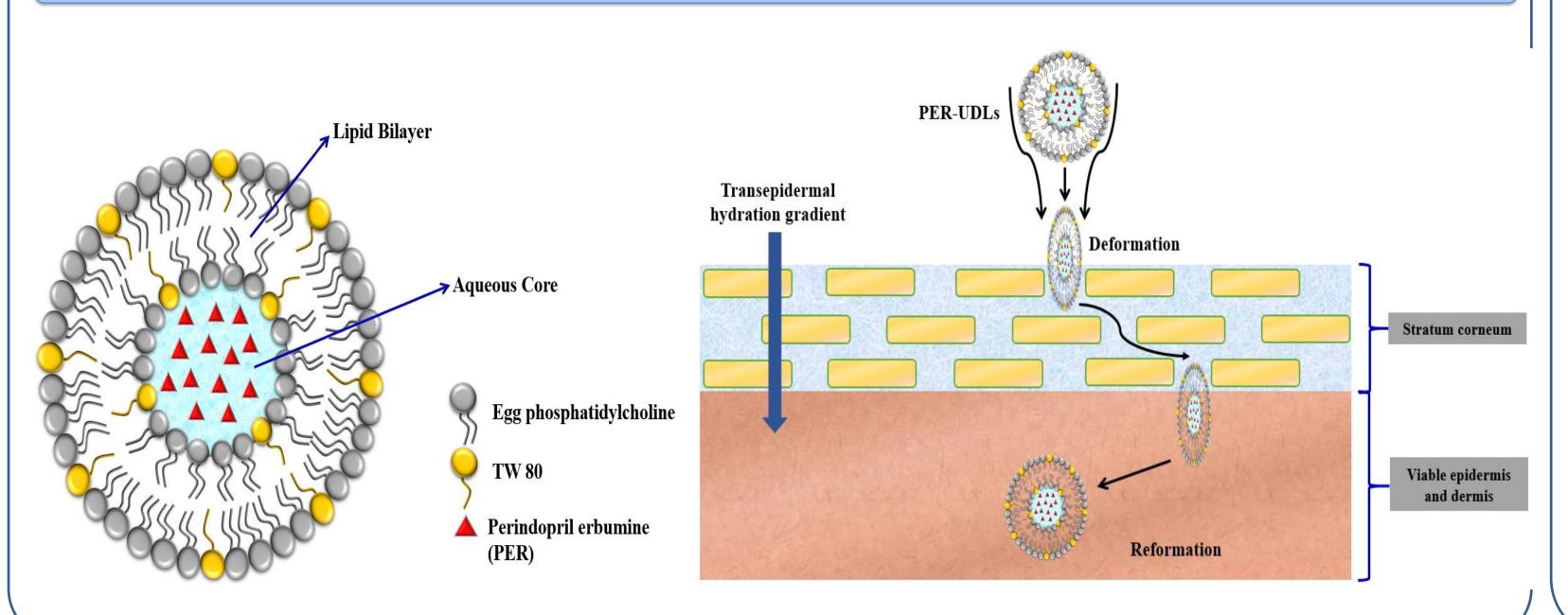
Ultradeformable liposomes (UDLs)

- UDLs are liposomal carriers consisting of phospholipids and edge activators.
- Edge activators destabilize the lipid bilayers and impart high deformability to the vesicle.
- UDLs have better permeation through the skin compared to the conventional liposomes.

Perindopril Erbumine (PER)

- PER is an ACE inhibitor mainly used to treat hypertention and also known to have antisarcopenic effect via inhibition of angiotensin II.
- PER oral tablets have several limitations including first-pass effect, difficulty of swallowing in elderly patients and risk of side effects.
- Skin delivery of PER using UDLs could be a promising alternative to sarcopenia therapeutics.

Schematic illustration of UDLs & skin permeation mechanism



METHODS Preparation of PER-loaded Ultra Deformable liposomes (PER-UDLs) Formulation EPC SDC TW80 CH PER PER-UDLs-S1 9 1 10 PER-UDLs-S2 8 2 10 PER-UDLs-S3 7 3 10 PER-UDLs-T1 9 1 1 10 PER-UDLs-T2 8 2 10 PER-UDLs-T3 7 3 10 PER-CLs 8 2 10

Phospholipid Edge activator

Evaporation of organic solvent

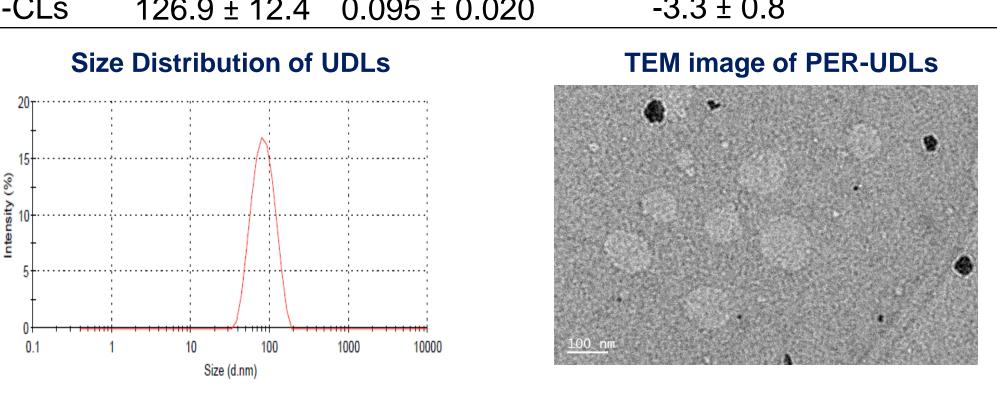
Evaporation of lipid film with PER solution

Sizing

RESULTS Physicochemical properties & deformability of PER-UDLs

Rotary evaporator

Formulation	Size (nm)	PDI	Zeta Potential (mv)	Entrapment efficiency (%)	Deformability index(J
PER-UDLs-S1	80.4 ± 0.9	0.051 ± 0.021	-15.1 ± 0.8	20.0 ± 0.8	43.3 ± 3.6
PER-UDLs-S2	85.3 ± 0.3	0.055 ± 0.028	-20.0 ± 1.0	24.1 ± 1.8	52.1 ± 4.0
PER-UDLs-S3	79.5 ± 7.6	0.224 ± 0.047	-13.8 ± 5.0	25.5 ± 6.9	47.5 ± 3.9
PER-UDLs-T1	82.0 ± 2.3	0.053 ± 0.011	-8.8 ± 0.5	20.5 ± 2.0	39.3 ± 1.7
PER-UDLs-T2	75.0 ± 1.1	0.072 ± 0.007	-10.8 ± 1.9	35.7 ± 4.2	54.2 ± 2.3
PER-UDLs-T3	79.4 ± 0.9	0.095 ± 0.024	-8.5 ± 1.5	33.2 ± 2.3	49.0 ± 6.8
PER-CLs	126.9 ± 12.4	0.095 ± 0.020	-3.3 ± 0.8	25.7 ± 6.8	26.1 ± 4.2

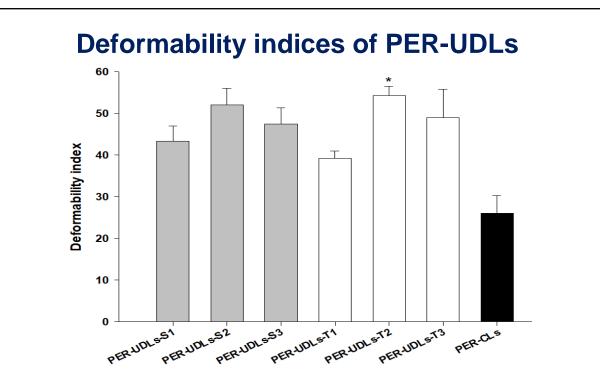


PER solution

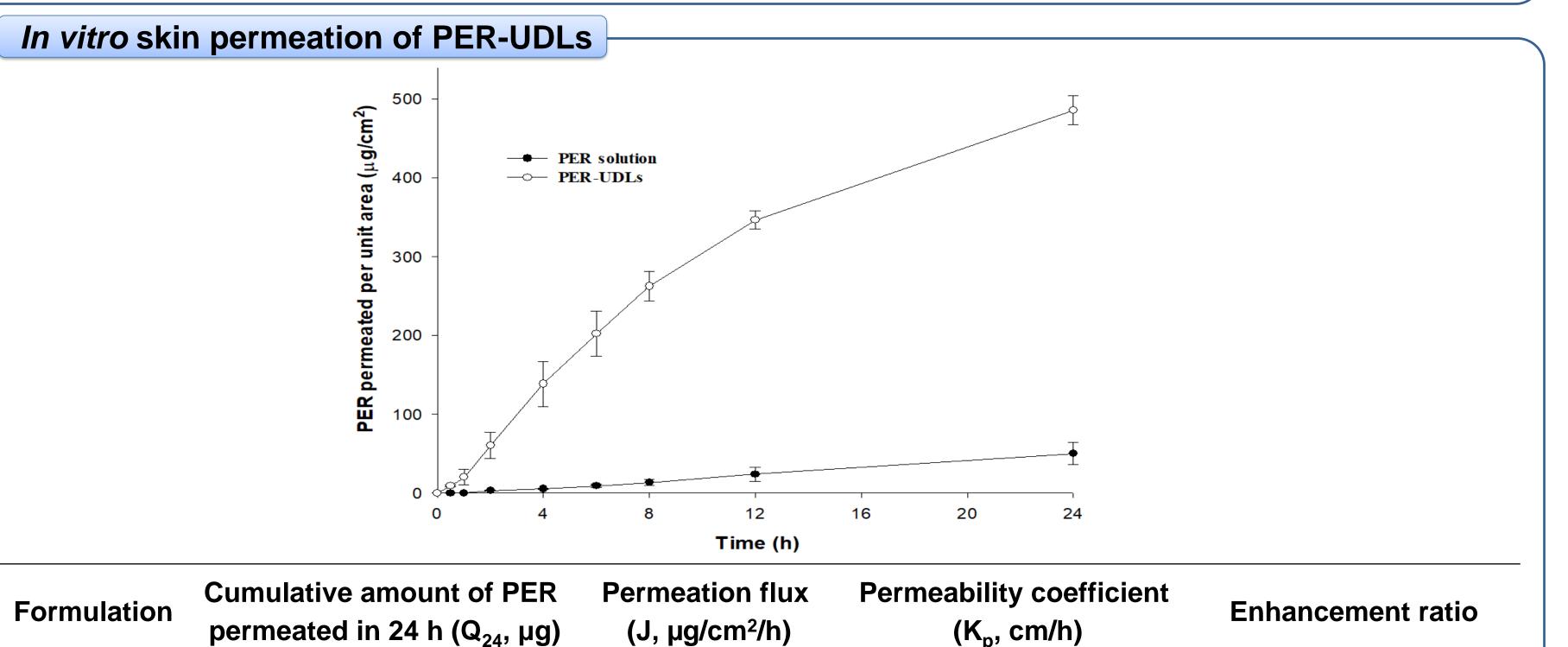
PER-UDLs

50.1 ± 14.4

485.7 ± 18.6*



5.9

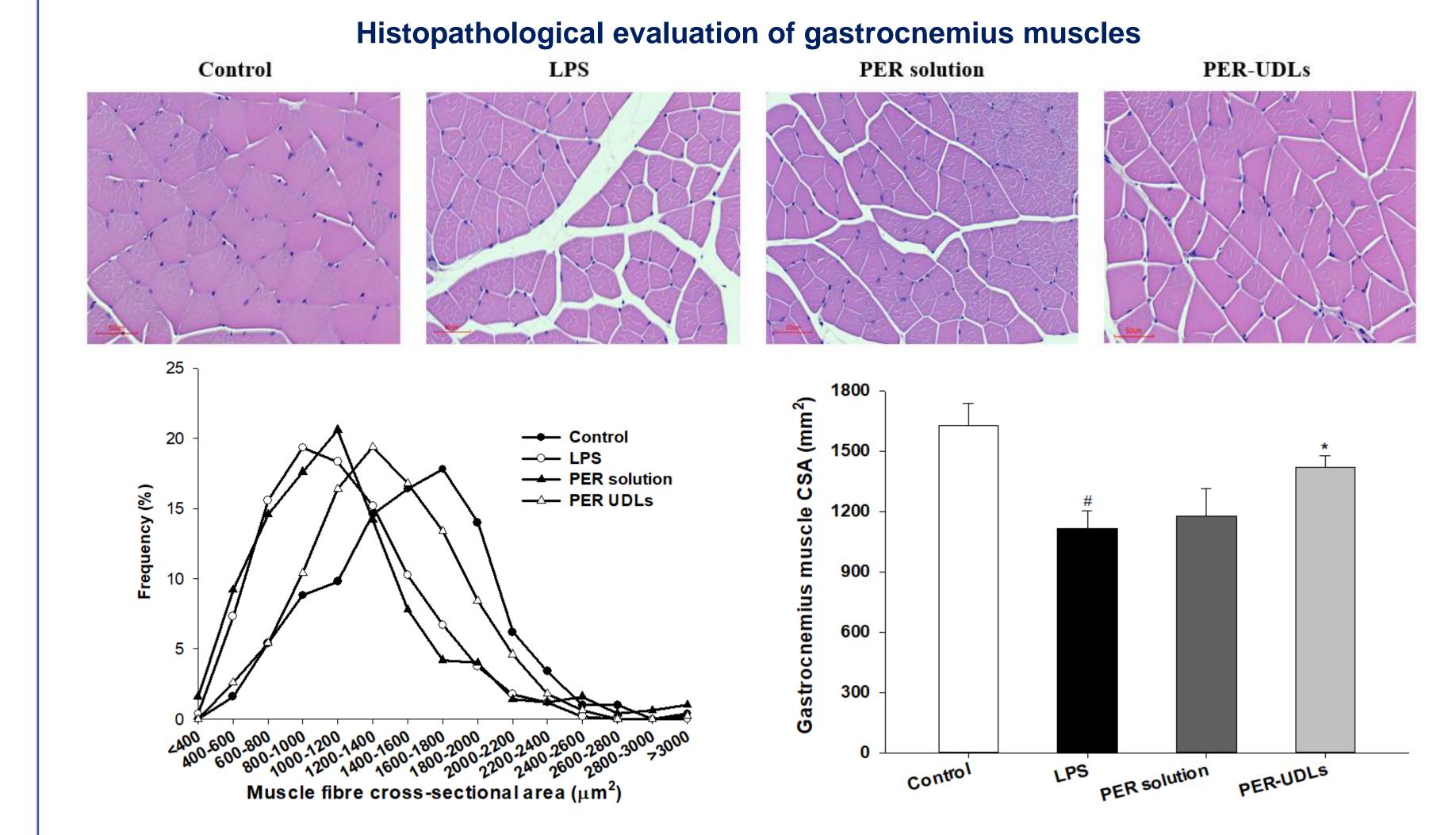


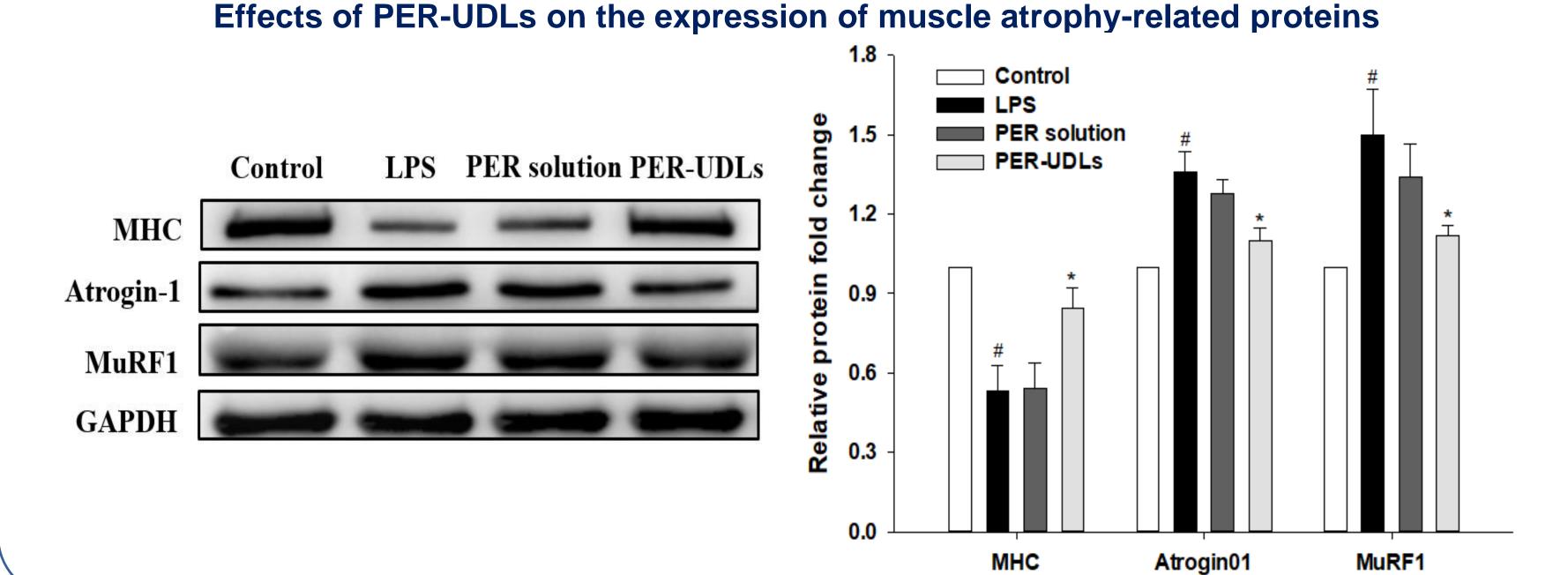
 2.3 ± 0.6

 13.4 ± 0.8 *

 1.5×10^{-3}

 $8.9 \times 10^{-3*}$





CONCLUSION

Collectively, these results suggest that PER-UDLs could be a promising transdermal delivery system for potential sarcopenia therapy.