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**A novel pH-sensitive liposomes to trigger delivery of afatinib to cancer cells: Impact
on lung cancer therapy**

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Badran, Hanaa Elsaghire, Imran Y. Saleem, Gillian A. Hutcheon.**

18

19 **Abstract**

20 A novel drug delivery systems based on cationic (CL) and pH-sensitive liposomes (PSL)
21 for tyrosine kinase inhibitor afatinib (AFT) were developed to enhance tumor-targetability
22 against NSCLC cells and therapeutic effect. Optimal lipid to drug ratio was selected to
23 prepare AFT-loaded PSL and CL with desirable physiochemical properties based on
24 particle size, drug encapsulation efficiency (EE%), stability and release profiles. Moreover,
25 antitumor activity was performed *in vitro* on human lung cancer cells (H-1975) using a
26 WST-1 assay and Annexin-V apoptosis assay. The mean particle size of the liposomes was
27 less than 100 nm, and EE% was more than 50% with lipid to drug ratio of 1:0.5. Stability
28 data showed that PSL and CL were physically stable for 1 months at 4 and 25 °C. *In vitro*
29 drug release study demonstrated the sustained release of AFT at pH 7.5; while PSL
30 exhibited fast drug release in pH 5.5. This effect revealed that PSL showed pH-sensitive
31 release behaviors. In addition, the *in vitro* cytotoxicity study was employed for AFT-loaded
32 PSL due to optimal characterizations. Thus, *in vitro* anticancer activity revealed that AFT
33 loaded-PSL triggered apoptosis in H-1975 cells. In addition, the inhibitory effect towards
34 H-1975 and HCC-827 was observed, indicating, which indicated high antitumor activity
35 of AFT-loaded PSL. Then, PSL might potentially create practical clinical strategies for
36 better targetability and delivery of AFT for treatment of lung cancer.

37

38 **Key words:** Afatinib, pH-sensitive liposomes, *In vitro* release, Anticancer activity, Lung
39 cancers

40

41 **1. Introduction**

42 Cancer is a foremost problem of disease worldwide to human health in recent years.
43 Moreover, lung cancer becomes a serious danger to human health, it is about 1.38 million
44 cancer-associated mortality in males and females in recent decades [1-2]. The incidence of
45 lung cancer has increased significantly in recent years in Kingdom of Saudi Arabia and
46 United Kingdom due to the increased prevalence of cigarette smoking [3-4].
47 Approximately 85% of lung cancer diagnoses are classified as non-small cell lung cancer
48 (NSCLC) and the remaining 15% small cell lung cancer (SCLC) [6]. The unsatisfactory
49 effects after treatment of lung cancer patients using conventional approaches such as
50 surgical resection, radiation, and chemotherapy were perceived [6]. The majority of
51 chemotherapy administration is intravenous, causing pronounced side effects due to their
52 systemic drug distribution. Moreover, the bioavailability of orally administrated anticancer
53 agents is usually compromised by the first-pass metabolism [7]. The cytotoxic effects of
54 chemotherapeutic agents against normal cells, according to dose-response effects, have
55 been recorded, leading to the patient's frail and death [8]. Therefore, the targeted delivery
56 of anticancer drugs has become a focus of scientific research. NSCLC treatment can be
57 improved by targeted delivery of chemotherapeutic agent (s) to suppress the major
58 signaling pathways involved in lung cancer. Then the targeted delivery of anticancer drugs
59 directly into the lungs can increase their accumulation in tumor cells and reduce adverse
60 side effects [9]. To date, numerous epidermal growth factor (EGFR) targeting agents have
61 been approved, including gefitinib, erlotinib, and lapatinib; however, both primary and
62 acquired resistance are significant clinical problems [10]. Afatinib (AFT) is a novel, potent,
63 small-molecule tyrosine kinase inhibitor (TKI), which is now marketed (2013), as a film-
64 coated oral tablet as a dimaleate salt. AFT is an especially effective treatment for nonsmall

65 cell lung cancer (NSCLC) [11]. AFT has ability to bind covalently and irreversibly to the
66 intracellular TK domain, preventing intracellular signaling [12]. By targeting ErbB family
67 receptors, AFT blocks a wide spectrum of cancer-associated ErbB-driven pathways, and
68 thus has broader antitumor activity against receptors with acquired mutations that are
69 resistant to the first generation of TKIs [13]. AFT exposed at low concentration in the
70 tumor cells, which reduced their clinical uses [14]. Therefore, the targeted delivery of AFT
71 has become a focus of scientific research. Nanomedicine is extensively used due to their
72 intrinsic properties such as improved cancer therapy with reduced toxicity. The
73 nanoparticles may be considered as a promising antitumor delivery system for AFT, which
74 may trigger its delivery to the cancer tissues [15]. The liposomes were the interest type of
75 nanomedicine for clinical application in the field of cancer therapy [16]. In addition, they
76 have ability to target tumor tissues via an enhanced permeation and retention (EPR) effect
77 [15]. Liposomes are suitable carriers for pulmonary drug delivery owing to their capacity
78 for targeting to specific cells/tissues [17]. Although drug-loaded liposomes can extend *in*
79 *vivo* circulation and increase chemotherapeutic activity, they may also be limited targeting
80 and fast cleared [18]. It has been reported that pH-sensitive liposomes have received great
81 attention due to their efficient accumulation in the tumor cells [19]. It has been described
82 that tumor tissues exhibited an acidic condition (pH 5.0-6.5) than normal tissues (pH 7.4-
83 7.5) [20]. Therefore, pH-sensitive liposomes were able to deliver the drugs into the tumor
84 cells when the pH value is lower than the normal tissue. Therefore, it may be expected that
85 pH-sensitive liposomes are more efficient for the delivery of AFT than conventional
86 liposomes due to their fusogenic character [21]. pH-sensitive liposomes could increase the
87 intracellular delivery of their content in cancer cells [20-21]. To the best of our knowledge,

88 only one study investigated AFT nanoparticles in term of polymeric micelles as a
89 pulmonary delivery system that improved the therapeutic efficacy in HER2-overexpressed
90 HCT-15-induced tumors [22].

91 In this study, we have prepared three types of liposomes, pH-sensitive liposomes
92 compared with conventional and cationic liposomes containing AFT to study their cancer
93 targeting. An HPLC method was developed and validated for AFT for *in vitro* analysis.
94 The liposomes were characterized in term of particle size distribution, zeta potential and
95 encapsulation efficiency. The surface morphology of the desired liposome was observed
96 by TEM. Moreover, the drug release of AFT was investigated for pH sensitivity (pH 5.5)
97 and prolonged circulation (pH 7.4). The stability studies of these liposomes were
98 performed at a different temperature. Afterward, the NSCLC cells (H-1975 cells) were
99 selected for the assessment of antitumor activity of the optimum liposomes using a
100 colorimetric WST-1 assay and flow cytometry. Moreover, the apoptosis in different cells
101 like H-1975, HCC-827 and H-1650 was established after incubation with liposomes.

102 **2. Materials and methods**

103 2.1. Materials

104 AFT (99.8% purity) was purchased from Green Stone Swiss Co., Limited. 1,2-
105 distearoyl-sn-glycero-3-phosphocholine [18:0] (DSPC), 1,2-dioleoyl-sn-glycero-3-
106 phosphoethanolamine [18:1] (DOPE), 1,2-dioleoyl-sn-glycero-3-phosphocholine [18:1]
107 (DOPC), and 1,2-dioleoy-3-trimethylammonium-propane Chloride salt (DOTAP) were
108 kindly gifted by Avanti Polar Lipid. Cholesteryl hemisuccinate (CHEMS) was purchased
109 from Avanti Polar Lipid. H1975, H-1650, and HCC827 cells were obtained from the
110 American Type Culture Collection (ATCC, Manassas, VA, USA). Cells were maintained

111 at 37°C and 5% CO₂ in RPMI 1640 medium (GIBCO[®], SIGMA-ALDRICH, Saint Louis,
112 USA) containing 10% fetal bovine serum (FBS) and 1% antibiotic/antimycotic which were
113 purchased from (GIBCO[®], Invitrogen[™], Carlsbad, USA). All other reagents and
114 chemicals were of analytical grade.

115 **2.2. HPLC assay of AFT**

116 2.2.1. HPLC instrumentation

117 A Water Breeze2[™] HPLC system (Waters Corporation, Milford, U.S.A) was used
118 for method development. The HPLC system equipped with an automated sampling system
119 (Waters[™] 2695 Plus Autosampler, USA) at 4°C and a photodiode array detector
120 (Waters[™] 2998, USA). The HPLC system was examined by “Breeze2 (Water[™])”
121 software. AFT was analyzed using mobile phase that consisted of A: 0.1% triethanolamine
122 and 1% acetonitrile in HPLC water (pH= 6), and B: acetonitrile and 10% methanol at a
123 flow rate of 1 mL/min. The mobile phase flowed over a reversed-phase C18 column
124 (Water[™], 3 x 150 mm, 3.5 µm particle size) coupled with a C18 guard cartridge (4x2.0
125 mm) and maintained at 50 °C. The injection volume of each AFT sample was 10 µl and
126 detected by the UV detector at 253 nm. All the operations were carried out at room
127 temperature.

128 2.2.2. HPLC assay

129 A stock solution of AFT was prepared in methanol at a concentration of 1 mg/ml
130 and stored in 4.0 ml amber glass vials at -20°C. Serial dilutions in mobile phase were
131 performed in the range of 0.01 to 25 µg/ml to produce a standard calibration curve and
132 stored at -20°C. A daily standard calibration curve (n=3) ranging from 0.01 to 25 µg/ml

133 was prepared to determine the unknown AFT concentrations for entrapment efficiency and
134 drug release.

135 2.2.3. Method validation

136 The validation of HPLC method was conducted according to the International
137 Conference on Harmonization (ICH) guidelines. The following items were considered for
138 validation: linearity, accuracy, precision, specificity, limit of detection (LOD), limit of
139 quantification (LOQ) and robustness. Three standard calibration lines were prepared at
140 different times (3 months) to evaluate the linearity, precision, accuracy, and stability of the
141 method.

142 Linearity was assessed by calculating a regression line by plotting the peak area of
143 AFT vs. the AFT concentration ranging from 0.01 to 25 $\mu\text{g/ml}$.

144 The accuracy was determined via the analysis of multiple replicates ($n = 6$) of AFT
145 concentration. The accuracy of the method was expressed in term of bias.

146 The precision of a quantitative method was determined by repeatability as intra-day
147 precision by an analysis of three replicates of AFT concentrations over the same day. Inter-
148 day precision was determined by the analysis of three replicates of various AFT
149 concentrations over three different days. The results were expressed as the relative standard
150 deviation (RSD%).

151 Low, medium, and high concentration quality control (QC) samples at
152 concentrations of (100, 1,000 and 10,000 ng/ml AFT, respectively) were analyzed, on three
153 distinct occasions within at least 3 months, as before described.

154 The LOD and LOQ were determined from the calibration curve obtained using six
155 replicates that were closest to the LOQ. The following equations were used:

156 $LOD = 3.3 \sigma/S$ Eq. 1

157 $LOQ = 10 \sigma/S$ Eq. 2

158 LOD and LOQ were determined based upon the slope (S) of the calibration curve
159 and least standard deviation obtained from the response (σ). It has a low limit of
160 quantitation (5 ng/ml) with satisfactory specificity, no matrix interference was observed.
161 These findings demonstrated that the assay has good selectivity.

162 **2.3. Preparation of liposomes**

163 Different types of AFT-loaded liposomes were fabricated by thin-film hydration
164 method followed by extrusion as described previously [23]. Non-targeting liposomes (NL)
165 were prepared using DSPC, DOPC, and DOPE at molar ratios of 3: 3: 10. Moreover, three
166 parts of the 10 parts of DOPC of the total liposomal contents were replaced by DOTAP or
167 CHEMS to form cationic and pH-sensitive liposomes, respectively. The AFT was added
168 to the lipids at ratios of 0.25:1, 0.5:1, 0.75:1, 1:1, 1.25:1 and 1.5:1 (w:w), respectively. The
169 composition of the liposomes was presented in Table 1. Briefly, AFT and lipids were
170 dissolved in chloroform, in a round bottom flask following by evaporation to obtain dried
171 thin film at 55 °C using a rotary evaporator (Buchi Rotavapor R-200, Switzerland). The
172 resulting lipid film was hydrated with the proper volume of phosphate buffer saline (PBS;
173 pH 7.4) by gently mixing for 30 min at 55 °C to produce multilamellar vesicles (MLVs).
174 The liposomes were subjected to extrusion through polycarbonate membranes with two
175 pore sizes (200 and 100 nm) using a discontinuous extruder (Liposo-Fast™ Avestin Inc.,
176 Ottawa, Canada). The liposomes were extruded 5 times through a polycarbonate membrane
177 with a pore size of 200 nm following by 21 times through 100 nm at low pressure (200
178 psi). The three types of plain liposomes were prepared similarly. The final formulations
179 were stored for overnight at 4°C.

180 **2.4. Physicochemical characterization of liposomes**

181 2.4.1. Particles size distribution and zeta potential

182 The mean vesicle sizes, size distribution and the zeta potential (ζ) were
183 characterized by dynamic light scattering (DLS) at 25 °C with a fixed angle of 137° using
184 a Zetasizer Nano ZS (Malvern Instruments Ltd., UK). The liposomes were appropriately
185 diluted with purified and filtered water (0.2 μm pore size) prior to the measurements. The
186 mean vesicle diameters were the averages of five measurements. All measurements were
187 done in triplicate.

188

189 2.4.2. Encapsulation efficiency

190 Due to the poor solubility of AFT, the free AFT occurred in two forms in the
191 external phase of the liposomal dispersion like free undissolved and free dissolved AFT.
192 The free undissolved AFT was separated from the liposomes using light centrifugation.
193 Meanwhile, the supernatant (encapsulated and free dissolved AFT) were filled into
194 centrifuge tubes and ultra-centrifuged at 40000 rpm at 4 °C. The clear supernatant which
195 contained the free dissolved AFT was collected. The total AFT regard to the sum of both
196 encapsulated and free AFT that is existed in the liposomal preparation. The concentration
197 of total AFT was determined after dissolving and disrupting of the liposomal dispersion in
198 methanol and triton x-100 using a vortex mixer, followed by centrifugation for 15 min. The
199 clear supernatant which contained the total AFT was then transferred to a new tube and
200 kept at 4 °C until analysis.

201 The drug encapsulation efficiency (EE%) was calculated using the total drug
202 content of liposomal ($\text{AFT}_{\text{total}}$) dispersion and un-entrapped drug content of the dispersion
203 (AFT_{free}). The EE% of all the formulation was calculated by using the following formula:

204
$$EE\% = \frac{AFT_{total} - AFT_{free}}{AFT_{total}} \times 100$$
 Eq. 3

205 2.4.3. Morphology of liposomes

206 The morphology of selected liposomes was visualized by transmission electron
207 microscope (TEM) using a JEM-2100 electron microscope (Jeol, Tokyo, Japan). Briefly, a
208 drop of diluted liposomes was applied to a copper grid and the excess liquid was removed
209 using filter paper. The samples were air-dried for 15 min and observed by TEM.

210 2.4.4. Stability study

211 The physical stability of the selected liposomes was conducted to monitor the
212 physical stability of AFT loaded liposome formulations (Table 2). All liposomal
213 formulations were stored in glass vials at 4 ± 1 °C and $25^\circ\text{C} \pm 2^\circ\text{C}$ for a period of one month.
214 The stability was evaluated by measuring the average particle size, ζ and PDI during the
215 storage. The AFT content was evaluated by HPLC. The physicochemical stability of the
216 freshly prepared formulation (at day1) was used as the control and the AFT content on day
217 1 was normalized to 100%.

218 2.4.5. *In vitro* drug release

219 *In vitro* release profile of AFT from of NL, CL, and PSL (selected liposomes) were
220 evaluated using the Franz diffusion cell system (FDC-6, LOGAN, Instruments
221 Corporation, USA). The experiments were conducted in 7 ml of PBS buffer (pH 7.4 and
222 5.5) with 0.2% Tween 80 to maintain sink condition. The cellophane dialysis membranes
223 (molecular weight cut off: 12-14 KDa) were soaked before use in distilled water at room
224 temperature for 12 h prior to use to ensure its wetting. An aliquot of 100 μL liposomes was
225 added into donor chambers, ensuring there were no air bubbles under the membrane. The
226 receptor compartment consisted of PBS at pH 7.4 for all liposomes and pH 5.5 for PSL at

227 37 °C, and stirring at 150 rpm. Samples of 500 µL were withdrawn at various time intervals
228 up to 24 h, and replaced immediately with the equal volume of fresh re-heated PBS. The
229 amount of AFT in each sample was analyzed by HPLC. The experiments were performed
230 in triplicate. The data of *in vitro* AFT release were fitted to various kinetic equations,
231 including zero order, first order, Higuchi's model and Korsmeyer Peppas plot and R².
232 Then, n values (diffusion exponent) were calculated for each linear curve obtained by the
233 regression analysis of each kinetic equation [24].

234 **2.5. Antitumor activity studies**

235 2.5.1. Cell proliferation assay, WST-1

236 The *in vitro* cytotoxicity of AFT compared to different chemotherapeutic agents
237 (carboplatin, gemcitabine and paclitaxel) was determined using WST-1 using NSCLC
238 cells (H-1975 cells). In brief, the cells were seeded into 96-well plates at a density of 10⁴
239 cells/well and incubated overnight in culture medium. Afterward, different concentrations
240 of 1, 5, 10, 20, 40 and 80 µM were added to each well and incubated for additional 24 h.
241 At the end of the treatment, a 10 µl of cell proliferation reagent WST-1 kit was added and
242 incubated for 4 h at 37 °C. The intensities of photometric metabolite (formazan) were
243 measured at 450 nm using an xMark™ Microplate Absorbance Spectrophotometer (Bio-
244 Rad Laboratories, Inc., Hercules, CA, USA). The results are expressed as the IC50, which
245 was obtained graphically using SigmaPlot 10 (SYSTAT Software, Inc., San Diego CA,
246 USA).

247 2.5.2. Annexin-V apoptosis assay

248 Cell death was assessed using the Vybrant® Apoptosis Assay kit and flow
249 cytometry. The H-1975 cells were seeded in six-well plates at 7 x 10⁴ per well and

250 incubated overnight. Then, the cells were treated with pure AFT (control) and AFT loaded
251 PSL at concentrations of 0.5, 1, 3, 5 and 8 μm for 24 h after dilution with culture medium.
252 After treatment, the cells were harvested by trypsinization and centrifuged, and re-
253 suspended in PBS. The cells were stained with Alexa Fluor[®] 488 Annexin V/propidium
254 iodide (PI) and analyzed using the flow cytometer. The percentage of cell death was
255 determined using FACS-Calibur[™] apparatus and CellQuest Pro software (Becton-
256 Dickinson Biosciences, Franklin Lakes, NJ, USA). Moreover, the apoptosis in different cells
257 like H-1975, HCC-827 and H-1650 was tested after application of NL, CL and PSL at 0.25,
258 0.5, 0.75, 1 and 2 μM . Furthermore, the percentage of cell death in the wells containing
259 the free drug and PSL following a 48 and 72h incubation period was subsequently
260 compared with the results of 24 h incubation at 0.25, 0.5, 0.75, 1 and 2 μM .

261 **2.6. Statistical analysis**

262 Quantitative data were expressed as the mean \pm SD of at least three replicates. The
263 Student's *t*-test and one-way analysis of variance (ANOVA) using IBMSPSS Statistics 21
264 was used to assess multiple comparisons between different methods and times. The level
265 of confidence was set as 95%.

266 **3. Results**

267 3.1. HPLC assay

268 Three HPLC methods have been described for AFT quantification in dosage forms
269 [25]. This method has been reported by Vejendle *et al*, which demonstrated a lack of
270 sensitivity with LOD (60 ng/ml) and a longer run time (20 min). Therefore, A new sensitive
271 HPLC method for AFT analysis was developed in the current study. This method was used

272 to quantify the AFT concentration for its *in vitro* studies. The method was determined to
273 be specific for AFT in the matrix with no interfering peaks.

274 It was identified in our laboratory that the maximum absorbance for AFT is at 206
275 and 253 nm. While, the HPLC analytical methods reported in the literature detected AFT
276 at 252, 258 or 268 nm. Therefore, the detection wavelength of 253 nm was used for a better
277 sense of AFT in the HPLC in this study. As shown in Fig. 1, the average retention time
278 was 2.4 min, with no interfering peaks in chromatogram A (the blank) and chromatograms
279 B, C (AFT). The obtained results indicated the specificity of the HPLC assay method. It
280 should be mentioned that, during the *in vitro* studies, there was no interfering peaks from
281 the NP ingredients co-eluted with the AFT peak, which further confirmed the specificity
282 of the method.

283 3.2. Method validation

284 A calibration curve of the peak area of AFT vs. the various AFT concentrations, in
285 the range of 0.01 to 25 µg/ml was conducted. The regression equation of the line was
286 obtained ($y = 360232x + 56.95$) resulting in the correlation coefficient (R^2) of 0.9999. The
287 results indicated the quality of the curve (data not shown). Therefore, there was a good
288 linear relationship between the AFT peak area and its tested concentrations.

289 The analytical method was validated in terms of linearity, precision, and accuracy.
290 Linearity was assessed using a calibration curve to investigate the ability of this method to
291 get a proportional response to the different concentrations. Based on the concentrations
292 used ranged from 10 to 250000 ng/m, in triplicate, the linearity was evaluated and a
293 calibration curve was constructed.

294 The LOD was determined to be 10 ng/ml and the LOQ was 5 ng/ml, with the
295 corresponding CV values of 1.8 and 0.93 %, respectively (Table 2).

296 For precision and accuracy of sample analysis, AFT standard solutions of three
297 replicates were prepared in triplicate, and analyzed on the same day (repeatability) or in
298 three different days (intermediate precision). Tables 3 showed that the precision did not
299 exceed the required RSD value with maximum RSD value was < 1.98 %. Analysis of
300 variance of the data indicated no significant difference ($p = 0.401$) in the slopes, intra- and
301 inter-day of the calibration curves. The results confirmed the reproducibility of the assay.
302 The accuracy was more than 99.9 %.

303 The method was found to be robust, since small variations in the method conditions
304 had a negligible effect on the chromatographic behavior of the AFT. The results indicated
305 that changing of the HPLC system or the C₁₈ column had no effect on the chromatographic
306 behavior of AFT. Even a small change in the mobile phase composition did not
307 significantly change the peak area of the drug used for this method.

308 3.3. Particle size distribution and zeta potential

309 This study aims to evaluate the incorporation of AFT to CL and PSL compared to
310 NL (control liposomes) for the design of an efficient anticancer delivery system. The
311 obtained liposomes were characterized in terms of the mean particle size, PDI and ζ values
312 using DLS and electrophoretic light scattering (Data not shown). The particle size of the
313 liposomes were ranged from 46 to 57 nm and values of PDI were less than 0.2, which
314 indicate narrower size distribution indicating no aggregation. Regarding ζ , the liposomes
315 presented high values according to the increasing lipid to the drug ratios, until the ratio was
316 1:0.5 (Fig. 2). The AFT-containing liposomes exhibited more positive ζ than liposomes

317 without AFT, which proposes that the addition of DOTAP increased the amounts of AFT
318 in the liposomes. In case of NL, the positive ζ was low and after the incorporation of the
319 drug, ζ increased by approximately two-fold until 1:0.5 of lipid to the drug ratio. CL
320 possessed great values of positive ζ ranging from 38.9 mV for the blank to 48.4 mV for the
321 ratio of 1:0.5. However, PSL exhibited negative values of ζ , due to CHEMS and decreased
322 with the increasing the drug to lipid ratios (Fig. 2).

323 3.4. Encapsulation efficiency

324 The effect of the lipid to drug ratio on the encapsulation of AFT is indicated in Fig.
325 3. As the lipid to AFT ratios increased, the amount of the drug was increased to a certain
326 extent and then decreased. The highest values of the encapsulated AFT were on lipid to
327 drug ratio, 1:0.5, the EE values were 43, 50, and 52 % for NL, PSL, and CL respectively.
328 As expected, the amount of AFT in the liposomes would increase with increasing of drug
329 concentration. After reaching the maximum capacity of AFT, EE values were decreased
330 with more AFT. However, the amount of free drug increased ($P < 0.05$) significantly,
331 thereby notably decreasing the EE%.

332 According to the obtained results, a lipid to drug ratio 1:0.5 in all tested liposomes
333 was selected for further studies due to the high value of EE%. On the contrary, PSL at a
334 lipid to drug ratio of 1:1 showed the lowest EE%.

335 3.5. Morphology of liposomes

336 TEM images of PSL are presented in Fig 4. The images showed that PSL were a
337 spherical shape. In addition, the existence of multilamellar structure was well visualized
338 inside PSL (Fig. 4). It has been reported that the protonated CHEMS showed a lower
339 hydration ability than CHEMS at neutral pH, while the protonated amino group of

340 phosphatidylethanolamine (PE) exhibited greater hydration ability, thus enhancing the
341 immiscibility between PE and CHEMS and causing formation of a heterogeneous system
342 [23].

343 3.6. Stability study

344 The short-term stability of the selected liposomes of lipid:drug ratio of 1:0.5 was
345 investigated for up to 30 days at 4 ± 1 °C and 25 ± 2 °C. This ratio was chosen due to the
346 highest EE% of AFT. There was no significant change in the particle size, PDI, ζ and AFT
347 EE% of liposomes during the stability study at 4°C compared to the initial preparation (p
348 > 0.05). However, at 25 °C, the particle size of the liposomes after storage for 30 days as
349 47.5 ± 2.3 to 75 ± 3.3 nm, 53.8 ± 2.6 to 84 ± 15.9 nm and 55.3 ± 1.2 to 79.5 ± 2.5 for CL, PSL and
350 NL respectively. However, liposomes were still smaller than 100 nm. There was no
351 appreciable change in PDI over 30 days. The ζ at 4°C and 25°C for 30 days exhibited
352 insignificantly different ($p = 0.141$) compared to the initial formulation. The EE% of AFT
353 after storage at 4°C and 25°C for 30 days was slightly decreased but was still higher than
354 90% and 80%, respectively, of the initial formulations (Fig.5).

355 3.7. *In vitro* release study

356 To evaluate the *in vitro* drug release behaviors of AFT from CL and PSL compared
357 to NL, these nanoliposomes were incubated in pH 7.4 PBS solutions at 37 °C in (Fig. 6).
358 Moreover, to determine the pH sensitivity of PSL, the drug release behavior under pH 5.5
359 was also investigated, and pH 5.5 was selected to mimic the tumor pH (Fig. 6). As weakly
360 acidic environments are presented in the endosomal and lysosomal of tumor cells [26].

361 The AFT release rate was relatively slow in neutral pH 7.4, just reaching 63.6%,
362 28.1% and 35.6 % for CL, NL, and PSL, respectively within 24 h. These data revealed that

363 the liposomes exhibited significantly constant release profiles and AFT was successfully
364 loaded into the liposomes. However, the cumulative release of AFT in PSL at pH 5.5
365 reached to 101 % in 4 h, presenting a burst release phenomenon. The release profiles of
366 AFT from different liposomes apparently biphasic release processes, where rapid release
367 of the surface-adsorbed AFT was observed during the initial phase (first 4 h), followed by
368 a slow release profile for up to 24 h. The AFT release was increased significantly with the
369 pH decreased from 7.4 to 5.5 in case of PSL, and showed reasonably good pH-
370 responsiveness. But, in a physiological environment (pH 7.4), the encapsulated AFT was
371 released at a constant rate. It indicated that the AFT was well protected inside the liposome
372 bilayers at physiological pH. But in acidic condition (pH 5.5) cancer environment, the AFT
373 release was hastened. Therefore, the release of the PSL containing AFT was controlled by
374 the environmental pH. This phenomenon are consistent with the obtained results of
375 doxorubicin release at various pH values [27]. The constant release rate of AFT may
376 conserve a constant contact of the drug to the cancer cell resulted in improved antitumor
377 activity and helpful for drug delivery applications. The PSL system has the greatest
378 potential to improve cancer therapy efficacy. To fit the release kinetics of AFT from
379 liposomes at pH 5.5 and 7.4, different kinetic models viz. Peppas, Higuchi, zero order and
380 first order were exploited to predict the drug release profile. These models depend on the
381 diffusion equations, which based on the composition of liposomes and release conditions.
382 It was reported that the release of the drug from liposomes could be allocated in three
383 different mechanisms: diffusion, erosion and diffusion-erosion [28]. It was found that the
384 results were supported by the Korsmeyer-Peppas model at pH 7.4, which it presented the
385 highest value of R^2 . Moreover, the values of n are 0.460, 0.681, 0.431 and 0.599 for CL,

386 NL, PSL and PSL (pH 5.5), respectively, indicated a non-Fickian diffusion kinetics ($0.5 <$
387 $n < 1$) [28]. PSL ($n=0.431$) exposed Fickian diffusion due to slow release at neutral
388 condition [28]. Subsequently, it is concluded that the drug release mechanism was mainly
389 owing to the combination of diffusion and erosion of the liposomes containing AFT (Table
390 4).

391 Moreover, the release profiles of the three AFT-loaded liposomes could be divided
392 into two phases, the first phase from 1 to 4 h and the second phase from 6 and 24 h. The
393 fitting parameters derived from korsmeyer-Peppas were listed in Table 5. n is the release
394 exponent indicating the drug release mechanism and k reflected the rate constant of the
395 release. At pH 7.4, n values of liposomes in the first phase were higher than 0.43, indicating
396 the release behavior of AFT followed a combination of diffusion and erosion control. In
397 the second stage, n values of liposomes were below 0.43, except NL, representing a
398 combination of diffusion and erosion mechanism. The k values for PSL at pH5.5 were
399 much higher than those of pH 7.4, demonstrating the highest release rate in an acidic
400 environment. The difference between k values of the first and second stage were nearly the
401 same, which indicated that the AFT release rate was comparatively slow in a neutral
402 environment.

403

404 3.8. Cell proliferation assay, WST-1

405 In general, it is essential to screen and confirm that the antitumor drugs are potent
406 and efficient for cancer therapy. Therefore, the potency of AFT was evaluated in
407 comparison with selected drugs depending on their activities against lung cancer in an *in*
408 *vitro* cell-based assay. Half-maximal inhibitory concentration (IC_{50}) of these drugs was

409 attained from an experimentally derived dose-response curve. In this study the cytotoxicity
410 was evaluated with a WST-1 assay in H-1975 cells. The cells were incubated with AFT,
411 paclitaxel, carboplatin and gemcitabine for 24 h. As shown in Fig. 7, the results detected
412 that effect of AFT and paclitaxel on H-1975 cells had dose-dependent manner. On the
413 contrary, the data displayed minor cytotoxicity against H-1975 cells, even up to the highest
414 doses of carboplatin and gemcitabine. The IC₅₀ values for AFT and paclitaxel were 20 and
415 25 μM, respectively. Particularly, by increasing the concentrations of AFT to 40 μM, H-
416 1975 cells exhibited higher sensitivity than paclitaxel. The cell viability dropped to 2%
417 with 40 μM of AFT and 50% with paclitaxel. Further increasing the concentration of AFT
418 up to 80 μM, the insignificant reduction in the cell viability was observed (Fig. 7). Thus,
419 *in vitro* anticancer activity revealed that AFT had potent cytotoxic (IC₅₀ value; 20 μM) as
420 compared to other drugs.

421 The cell toxicity of the best liposomes PSL, NL, and CL was also measured by a
422 WST-1 assay on H-1975 cells (data not shown). Unfortunately, the reduction of cell
423 viability (H-1975 cells) at any AFT concentrations did not recorded. This behavior
424 confirmed that the WST-1 assay failed to detect any reduction in viable cell numbers. In
425 contrast, the cytotoxicity (dose-dependent) was detected by microscopic examination using
426 1-80 μM of PSL, NL, and CL. Accordingly, the intracellular vacuoles and cell aggregates
427 at concentrations from 1 to 5 μM was appeared. Further increasing the concentrations from
428 10 to 80 μM, indefinite aggregates of damaged and dying cells were perceived. The order
429 of liposomes to kill H-1975 cell was followed as PSL > NL > CL. Therefore, AFT-loaded
430 PSL at concentrations less than 10 μM were performed in the next study.

431 3.9. Annexin-V apoptosis assay

432 Apoptosis-inducing influence of AFT loaded-PSL formulation was evidenced by
433 Annexin V/PI protocol. The extent and the nature of the induced cell death were analyzed
434 by flow cytometry. H-1975 cells were incubated with various concentrations of AFT
435 loaded-PSL (0.5 - 8 μ M) for 24 h, which were selected based on WST-1 assay results. The
436 amounts of the early apoptotic and the late apoptotic cells, with necrotic cells were
437 determined after deduction of the proportion of spontaneous apoptosis. The results clearly
438 revealed that the AFT loaded-PSL triggered both apoptosis in H-1975 cells (Fig. 8A).

439 The quantities of apoptotic cells increased from 55 to 58.9 % after exposure to 0.5
440 to 1 μ M of AFT loaded PSL. However, increasing the concentration to 8 μ M resulted in a
441 reduction of the quantities of apoptotic cells from 30% at 3 μ M to 9 % at 8 μ M.
442 Furthermore, high cell viability of 87.5 % of free liposomes was observed. Concerning the
443 concentrations of AFT loaded-PSL at 3 to 8 μ M, the proportions of necrotic cells increased
444 as the number of apoptotic cells decreased. The proportions of necrotic cells increased from
445 3 to 90%, depending on the concentrations of AFT loaded-PSL at 0.5 and 8 μ M (a dose-
446 dependent manner) (Fig. 8B). Consequently, AFT at a concentration of 2.0 μ M was
447 selected due to high apoptotic activity for further cytotoxicity studies using different lung
448 cancer cell lines.

449 Moreover, the cell viability of AFT loaded-PSL after H-1975 cells were incubated
450 for 48 and 72 h in addition to 24 h also was investigated (Fig. 9). The significant cytotoxic
451 effect in H-1975 cell at a concentration of 2 μ M of AFT loaded-PSL, with the total cell
452 death proportion exceeding 78, 80 and 84 % after 24, 48 and 72 h, respectively. The
453 cytotoxic effect of the AFT-PSL formulation at a concentration of 2 μ M was mainly due
454 to induced apoptosis, with slight necrosis. For comparison, the cell viability of free

455 liposomes at 72 h was 90 %. These results revealed that no significant difference in the cell
456 death after 24 and 48 h of exposure with H-1975 cells ($p > 0.05$). Therefore, 24 h of
457 exposure was selected for further study. Free liposomes showed insignificance cytotoxic
458 (apoptosis) after 24 and 48 h of exposure with considerable toxicity (necrosis) after 72 h
459 of exposure.

460 Overall, the obtained results clearly revealed the greater anticancer activity of PSL
461 as shown by a WST-1 assay and apoptosis assay. Therefore, 24 h of exposure was selected
462 for further cytotoxicity study of AFT-loaded PSL, CL and NL by using different lung
463 cancer cell lines. Hence, the anticancer activity of these liposomes was performed using
464 Flow cytometric analysis in the three cell lines as H-1975, H-1650, and HCC-827 (Fig.10
465 A, B & C). This study was conducted to detect the level of apoptosis induced after
466 incubation with various concentrations of 0.25, 0.5, 0.75, 1, and 2 μM of each liposomes
467 for 24 h. While, dimethyl sulfoxide and free liposomes were used as the controls. The
468 incubation of the cells with free liposomes did not induce notable cytotoxicity (data not
469 shown). The viability of H-1975 cells decreased more significantly compared to H-1650
470 and HCC-827 cells ($p < 0.05$). PSL produced highest cytotoxic effect in the different lung
471 cancer cell lines (H-1975 cells and HCC-827) compared to NL and CL, when using
472 concentrations 2 μM AFT (Fig. 10). Overall, the results clearly revealed the superior
473 anticancer activity of PSL as shown by MTT assay and apoptosis assay.

474 **Discussion**

475 It has been reported that the cancer cells exhibited leaky vasculature with gap of
476 ~ 100 nm, this allows the drug to leak out of the blood vessels and into the cancer cells [29].
477 Additionally, cancer cells have an impaired lymphatic system; therefore, substances such

478 as drugs loaded-liposome can be retained for a relatively longer time [30]. This behavior
479 is commonly referred to EPR effect, which increases the exposure of tumor cells to drug
480 action. The liposomes have been reported as a potential carrier to target cancer cells. The
481 liposomes less 100 nm are able to escape the tumor vasculature and accumulate in the cells
482 by passive targeting [31]. Moreover, the targeted liposomes were designed depending on
483 the type of phospholipids used. In this study, it has been illustrated that modified liposomes
484 as PSL can work as an effective carrier for delivery of AFT *in vitro*. Moreover, this carrier
485 system presented significant antitumor activity. The desired liposomes can be obtained by
486 investigating different quantities of the drug to lipid ratios to detect the greatest
487 encapsulated liposomes. Furthermore, the best liposomes in terms of vesicle size, PDI, ζ
488 and EE were selected. The *in vitro* release study and cytotoxicity of the selected liposomes
489 loaded AFT were examined. In addition, AFT is a potent antitumor drug used in clinical
490 oncology against a lung tumor. However, AFT had low specificity, systemic toxicity and
491 indiscriminating of the tumor and healthy tissues [14]. So AFT loaded-liposomes were
492 developed for successful cancer therapy that decreases dose-limiting toxicity. In this study,
493 a novel pH-sensitive liposomes-based AFT as targeted delivery (PSL) were used to target
494 tumor cells. It has been observed that PSL has intensely improved the cytotoxicity in
495 comparison to conventional liposomes (NL) or cationic liposomes (CL). Kraft *et al*
496 observed that CL or PSL could accumulate in the lung cells more, compared with NL [32].
497 PSL exposed to the destabilization behavior under acidic condition, which lead to rapid
498 release of its content. It is interesting that the tumor tissues are relatively acidic compared
499 to the normal tissue site [19-21]. The main difference between these two liposomes is the
500 composition of phospholipid used. In general, three lipid components: DSPC, DOPC, and

501 DOPE. DSPC were used. The rationale for the selection of DSPC was its stability against
502 chemical degradation due to saturated lipid, which reduces the drug leakage from
503 liposomes on storage and in vivo transit. To increase the fluidity of liposomal membrane,
504 DOPC was selected due to its high fluidity at room temperature (transition temperature
505 (T_m)= -20°C). While, T_m of DSPC is $+55^\circ\text{C}$, which remains in the gel phase [33].
506 Moreover, DOPE was combined to provide fusogenic characters to the liposomes, due to
507 the formation of an inverted hexagonal phase upon destabilization of membranes at a
508 mildly acidic pH [34]. These lipids possess various chain lengths and degrees of
509 saturation, which can produce fine-tune the membrane dynamics and phase properties [35].
510 The main composition of CL is DOTAP, which is considered as a cationic phospholipid.
511 While PSL composed from pH-sensitive phospholipid (CHEMS). The film hydration
512 method has been used to actively entrap AFT into liposomes with relatively high
513 efficiencies and small vesicle size ($<100\text{ nm}$) [36]. The PDI values of the obtained
514 liposomes are less than 0.3 indicating narrow size distribution. The higher ζ , of the obtained
515 liposomes provoked the potential stability of a liposome. Patil *et al* investigated the
516 influence of ζ on the cellular uptake of cerium oxide nanoparticles in A549 lung
517 adenocarcinoma [37]. Thus, the charged surface of liposomes has ability to attach the cell
518 membrane. Furthermore, to obtain the liposomes with the highest EE%, the best ratio of
519 drug to phospholipid was selected for further studies. Accordingly, the highest EE% of
520 AFT reached to 43.20%, 50.20%, and 52.01% for NL, PSL, CL, respectively at the 1:0.5
521 ratio of lipid to the drug. Nallamotheu *et al* 2006 indicated that the high EE% of
522 combretastatin A4 was obtained by increasing the drug to lipid ratios. By using 1:10 to
523 2:10 of combretastatin A4 to lipid ratios, the amount of the drug increased from 1.05 mg/ml

524 to 1.55 mg/ml, respectively. When the drug to lipid ratios was further increased to 4:10,
525 the EE% of the drug did not increase [38]. Thus, the best liposomes were subjected to
526 stability study, they exhibited better stability at 4°C or at 25°C after storage for 1 month.
527 CL showed the highest stability in term of EE%, particle size and zeta potential. This effect
528 is due to the inclusion of DOTAP in the liposomes, which decreases the rigidity of the
529 liposomes with good loading capacity. *In vitro* drug release data revealed that PSL and NL
530 exposed sustained release profiles due to the presence of DSPC (T_m), which lead to a
531 decrease in leakage of AFT in the circulation or extracellular environment. But in case of
532 CL, AFT exhibited high release rate compared with the other liposomes, at pH 7.4. This is
533 due to the complete protonation of DOTAP at pH 7.4 [39]. By contrast, the fast drug release
534 profile of AFT was found after addition PSL in acidic media, which reached to 100% after
535 4 h. The PSL undergoes destabilization at pH 5.5 and acquire fusogenic properties, thus
536 tended to rupture and quickly release of AFT. The fusogenic performance of PSL is due to
537 the presence of DOPE in the lipid layer, which forms a hexagonal structure instead of a
538 bilayer structure after dispersion in aqueous media. Düzgünes *et al* showed that liposomes
539 composed of CHEMS had high stabilize of EE calcein at pH 7.4 and undergo
540 destabilization and irreversible aggregation under acidic pH [40]. According to the kinetic
541 models, the release of AFT at pH 7.4 displayed release with Korsmeyer-Peppas model.
542 This effect is due to early rapid release followed by slow release of the liposomes [41]. In
543 case of the release pattern of PSL at pH 5.5, AFT release was quite faster with Korsmeyer-
544 Peppas model. This behaviour because AFT exists liposomal membrane, which leaks out
545 at a faster rate in acidic condition [42].

546 Therefore, it was confirmed that the pH-sensitive point in the liposome is close to
547 5 (the tumor microenvironment). PSL might release their content in the acidic environment
548 of the tumor tissues quickly. Therefore, the PSL were fabricated in the current study to
549 achieve a certain active targeting toward the tumor. The TEM of PSL revealed uniform,
550 homogenous and spherical-shaped liposomes with a smooth surface.

551 The potency of free AFT was compared with selected drugs depending on their
552 activity against lung cancer. The cell toxicity was evaluated by WST-1 using H-1975 cells.
553 The WST-1 assay showed that AFT is more effective as a cytotoxic agent compared to
554 other compounds used in lung cancer treatments (H-1975 cells). Furthermore, the anti-
555 proliferative effect of AFT on H-1975 cells was investigated at various concentrations for
556 24 h. The results indicated that the inhibition of cell viability AFT had concentration-
557 dependent manners. Moreover, anticancer activity of the obtained liposomes was also
558 investigated using and H-1975 cells. Unfortunately, WSR-1 assay failed to detect the
559 anticancer activity of the obtained liposomes due level of interference. However, a detailed
560 characterization of this interference was not undertaken here. Therefore, the levels of cell
561 viability between each liposomes were measured by using flow cytometry analysis after
562 Annexin V/PI staining. The results of flow cytometry after the treatment of cells with the
563 AFT loaded-PSL using different concentrations exhibited a comparable level of cell
564 intensity. It was clearly indicated that the uptake of AFT loaded-PSL by H-1975 cells was
565 higher than free AFT. The results revealed a marked decline in cell viability with AFT
566 loaded-PSL up to 60.4% of cell apoptosis at 1 μ M after 24 h. The free AFT resulted in
567 apoptosis in 11.88% of the cells after 24 h. The low cytotoxic effect of free AFT could be
568 attributed to the low cellular uptake and poor trans-membrane permeability. Of the three

569 cancer cell lines tested, H-1975 cells appeared more sensitive to the liposomes.
570 Particularly, the cytotoxicity of PSL is high compared with that of CL and NL. It is possible
571 that PSL released AFT in response to the lowered pH in the endosome, and thus facilitated
572 diffusion of the released AFT from the endosome to the cytosol. It has been suggested that
573 pH-sensitive liposomes are internalized more efficiently than non-pH-sensitive
574 formulations [43]. It is notable that the destabilization of PSL at the endosomal
575 demonstrated that the efficacy of PSL depends on the pH of the tumor tissues [34].
576 Additionally, the liposomes containing CHEMS release their contents into the cytoplasm
577 from 5 to 15 min upon their incubation with the cells [44]. The destabilization of PSL
578 induced by acidification of the endosomal lumen represents the most important stage in the
579 process of intracellular delivery. Carvalho *et al* developed cisplatin loaded-PSL to treat the
580 SCLC. Compared with free cisplatin, the cytotoxicity of this PSL was significantly
581 enhanced [7]. Kim *et al* developed a PSL with an efficient and targeted delivery system for
582 gemcitabine, and represent a useful, novel treatment approach for tumors that overexpress
583 EGFR [45]. More, the cationic liposomes containing paclitaxel composed of DOTAP were
584 able to significantly decrease tumor perfusion and vascular diameter and the progress of A-Mel-
585 3 melanoma in mouse models [46]. The association of cationic liposomes with surface
586 membrane is due to the presence of anionic glycoproteins, such as sialic acid rich
587 glycoproteins [47]. Furthermore, pH-sensitive liposomes containing cytarabine have been
588 shown greatly antitumor effectiveness in both human HepG2 hepatoma cells and normal
589 human liver L02 cells compared to non-pH-sensitive liposomes [48]. These promising
590 results are required further *in vivo* analysis to understand the biodistribution profile of AFT
591 loaded PSL to achieve new targeted-formulation for the tumor therapy.

592 **4. Conclusion**

593 In this work, a novel AFT-loaded PSL for targeted therapy of lung cancer (NSCLC)
594 were developed. For comparison purpose, AFT-loaded NL, CL and PSL were successfully
595 designed. The obtained liposomes showed small particle less than 100 nm with a low PDI
596 (<0.27) and acceptable zeta potential with a spherical shape. The highest EE% values of
597 the liposomes were achieved according the following order: CL>PSL>NL. The selected
598 liposomes were stable at 4 and 25°C for 1 month. The PSL, CL and NL showed slow
599 release profiles in pH 7.4. However, in acidic pH values, PSL exhibited fast release, which
600 improved its tumor targetability. The selected liposomes revealed efficiency on cancer cells
601 (NSCLC). Moreover, AFT-loaded PSL inhibited the cell growth of lung cancer cells more
602 efficiently than free AFT, CL and NL based on using Annexin V assay. The obtained data
603 indicate that AFT-loaded PSL is a promising a targeted drug delivery for cancer therapy.

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610 **References**

- 611 1. Y. Bahader, and A.-R. Jazieh, Epidemiology of lung cancer, *Ann. Thorac. Med.* 3
612 (2008) 65-67.
- 613 2. O. Alamoudi, Prevalence of respiratory diseases in hospitalized patients in Saudi
614 Arabia: A 5 years study 1996-2000, *Ann. Thora. Med.* 1 (2006) 76-80.
- 615 3. C.R. UK, Lung cancer and smoking. UK. *Cancer Stats. Cancer Research UK.* 2008.
616 Sep., available form: [http:// www.info.cancerresearchuk.org/cancerstats/ Lung/html](http://www.info.cancerresearchuk.org/cancerstats/Lung/html).

- 617 4. K.A. Al-Turki, N.A. Al-Baghli, A.J. Al-Ghamdi, A.G. El-Zubaier, R. Al-Ghamdi,
618 Prevalence of current smoking in Eastern province, Saudi Arabia, *East Mediterr. Health*
619 *J.* 16 (2010) 671-667.
- 620 5. M.R. Davidson, A.F. Gazdar, B.E. Clarke, The pivotal role of pathology in the
621 management of lung cancer. *J. Thorac. disease*, 5 (2013) S463-S478.
- 622 6. A.Goel, S. Baboota, J.K. Sahni, J. Ali, Exploring targeted pulmonary delivery for
623 treatment of lung cancer. *Int. J. Pharm. Invest.* 3 (2013) 8-14.
- 624 7. T.C. Carvalho, S.R. Carvalho, J.T. McConville, Formulations for pulmonary
625 administration of anticancer agents to treat lung malignancies, *J. Aerosol Med. Pulm.*
626 *Drug Deliv.* 24 (2011) 61-80.
- 627 8. G. Pilcer, and K. Amighi, Formulation strategy and use of excipients in pulmonary
628 drug delivery, *Int. J. Pharm.* 392 (2010) 1-19.
- 629 9. S. Anabousi, U. Bakowsky, M. Schneider, H. Huwer, M. Lehr, C. Ehrhardt, In vitro
630 assessment of transferrin-conjugated liposomes as drug delivery systems for inhalation
631 therapy of lung cancer, *Eur. J. Pharm. Sci.* 29 (2006) 367-374.
- 632 10. T. Mukohara, Mechanisms of resistance to anti-hu C man epidermal growth factor
633 receptor 2 agents in breast cancer, *Cancer Science*, 102 (2011) 1-8.
- 634 11. G.Metro, and L. Crinò, The LUX-Lung clinical trial program of afatinib for non-small-
635 cell lung cancer, *Expert rev. anticancer ther.* 11 (2011) 673-682.
- 636 12. F. Solca, G. Dahl, Z. Aoepfel, G Bader, M. Sanderson, K. Clein, O. Kraemer, F.
637 Himmelsbach, E. Haaksma, G.R. Adolf, Target binding properties and cellular activity
638 of afatinib (BIBW 2992), an irreversible ErbB family blocker, *J. Pharmacol. Exp. Ther.*
639 343 (2012) 342-350.
- 640 13. V. Hirsh, Afatinib (BIBW 2992) development in non-small-cell lung cancer, *Future*
641 *Oncology* 7 (2011) 817-825.
- 642 14. S.C. Coelho, G.M. Almeida, M.C. Pereira, F.S. Silva, Functionalized gold
643 nanoparticles improve afatinib delivery into cancer cells, *Expert Opin Drug Deliv*, 13
644 (2016) 133-41.
- 645 15. Y. Malam, M. Loizidou, A.M. Seifalian, Liposomes and nanoparticles: nanosized
646 vehicles for drug delivery in cancer, *Trends Pharmacol sci.* 30 (2009) 592-599.

- 647 16. S. Martins, B. Sarmento, D.C. Ferreira, E.B. Souto, Lipid-based colloidal carriers for
648 peptide and protein delivery-liposomes versus lipid nanoparticles, *Int. J. nanomedicine*,
649 2 (2007) 595-607.
- 650 17. A.S. Ulrich, Biophysical aspects of using liposomes as delivery vehicles, *Bioscience*
651 *reports* 22 (2002) 129-150.
- 652 18. T. Liu, H. Choi, R. Zhou, I.W. Chen, RES blockade: A strategy for boosting efficiency
653 of nanoparticle drug, *Nano Today*, 10 (2015) 11-21.
- 654 19. Y. Duan, L. Wei, J. Petryk, T.D. Ruddy, Formulation, characterization and tissue
655 distribution of a novel pH-sensitive long-circulating liposome-based theranostic
656 suitable for molecular imaging and drug delivery, *Int. J. Nanomedicine* 11 (2016)
657 5697-5708.
- 658 20. M. Chang, S. Lu, F. Zhang, T. Zuo, Y. Guan, T. Wei, W. Shao, G. Lin, RGD-modified
659 pH-sensitive liposomes for docetaxel tumor targeting, *Colloids Surfaces B* 129 (2015)
660 175-182.
- 661 21. Y. Zhang, Y. Wang, Y. Yang, S. Liu, Q. Ruan, X. Zhang, J. Tai, T. Chen, High tumor
662 penetration of paclitaxel loaded pH sensitive cleavable liposomes by depletion of tumor
663 collagen I in breast cancer, *ACS Appl. Mater. Interfaces* 7 (2015) 9691-9701.
- 664 22. S.S. Guan, J. Chang, C.C. Cheng, T.Y. Luo, C.C. Wang, S.H. Liu, Afatinib and its
665 encapsulated polymeric micelles inhibits HER2-overexpressed colorectal tumor cell
666 growth in vitro and in vivo, *Oncotarget*. 5 (2014) 4868-4880.
- 667 23. Y. Fan, C. Chen, Y. Huang, F. Zhang, G. Lin, Study of the pH-sensitive mechanism of
668 tumor-targeting liposomes, *Colloids Surf. B Biointerfaces*, 151 (2017) 19-25.
- 669 24. S. Dash, P.N. Murthy, L. Nath, P. howdhury, Kinetic modeling on drug release from
670 controlled drug delivery systems, *Acta Pol. Pharm.* 67 (2010) 217-23.
- 671 25. R. Vejendla, C. Subramanyam, G. Veerabhadram, New RP-HPLC method for the
672 determination of afatinib dimaleate in bulk and pharmaceutical dosage forms, *Indo-*
673 *American J. Pharmaceut. Res.* 5 (2015) 2015-2111.
- 674 26. F. Meng, R. Cheng, C. Deng, Z. Zhong, Intracellular drug release nanosystems,
675 *Materials Today*, 15 (2012) 436-442.

- 676 27. Y. Zhao, W. Ren, T. Zhong, S. Zhang, Tumor-specific pH-responsive peptide-modified
677 pH-sensitive liposomes containing doxorubicin for enhancing glioma targeting and
678 anti-tumor activity, *J. Controlled Rel.* 222 (2016) 56-66.
- 679 28. N.A. Peppas, J.J. Sahlin, A simple equation for the description of solute release. III.
680 Coupling of diffusion and relaxation, *Int. J. Pharm.* 57 (1989) 169-172.
- 681 29. H.M. Mansour, C.-W. Park, D. Hayes, Nanoparticle lung delivery and inhalation
682 aerosols for targeted pulmonary nanomedicine. 2013: CRC Press, Taylor & Francis
683 Group: Boca Raton, FL, USA.
- 684 30. H. Maeda, H. Nakamura, J. Fang, The EPR effect for macromolecular drug delivery to
685 solid tumors: Improvement of tumor uptake, lowering of systemic toxicity, and distinct
686 tumor imaging in vivo, *Adv. drug deliv. Rev.* 65 (2013) 71-79.
- 687 31. M. Brandl, Liposomes as drug carriers: a technological approach, *Biotechnol Annual*
688 *Rev.* 7 (2001) 59-85.
- 689 32. J.C. Kraft, J.P. Freeling, W. Zang, R.J. Ho, Emerging research and clinical
690 development trends of liposome and lipid nanoparticle drug delivery systems. *J Pharm.*
691 *.Sci.* 103 (2014) 29-52.
- 692 33. A. Fahr, P. van Hoogevest, S. May, B. Nergstrand, S. Leigh, Transfer of lipophilic
693 drugs between liposomal membranes and biological interfaces: consequences for drug
694 delivery, *Eur. J. Pharm. Sci.* 26 (2005) 251-265.
- 695 34. R. Karanth, R.S. Murthy, pH-Sensitive liposomes-principle and application in H.cancer
696 therapy, *J. Pharm. Pharmacol.* 59 (2007) 469-483.
- 697 35. U. Michaelis, H. Haas, Targeting of cationic liposomes to endothelial tissue, in
698 *Liposome Technology*, G. Gregoriadis, Editor. 2006, Informa Healthcare, 151-170.
- 699 36. G.M. Jensen, T.H. Bunch, Conventional liposome performance and evaluation: lessons
700 from the development of Vescan, *Journal of liposome research*, 17(2007) 121-137.
- 701 37. S. Patil, S. Aandberg, E. Heckert, W. Self, S. Seal, Protein adsorption and cellular
702 uptake of cerium oxide nanoparticles as a function of zeta potential, *Biomaterials*, 38
703 (2007) 4600-4607.
- 704 38. R. Nallamotheu, G.C. Wood, K.F. Kiani, L.A. Thoma, A targeted liposome delivery
705 system for combretastatin A4: formulation optimization through drug loading and in
706 vitro release studies, *PDA J. Pharm. Sci. Technol.*, 60 (2006) 144.

- 707 39. N.J. Zuidam, Y. Barenholz, Electrostatic and structural properties of complexes
708 involving plasmid DNA and cationic lipids commonly used for gene delivery, *Biochim*
709 *Biophys Acta*, 1368 (1998) 115-128.
- 710 40. J.J. Sudimack, W. uo, R.J. Lee, A novel pH-sensitive liposome formulation containing
711 oleyl alcohol, *Biochim Biophys Acta*, 1564 (2002) 31-37.
- 712 41. C. Koutsoulas, N. Pippa, C. Demetzos, M. Zabka, Preparation of liposomal
713 nanoparticles incorporating terbinafine in vitro drug release studies *J. Nanosci.*
714 *Nanotechnol.* 14 (2014), 4529-4533.
- 715 42. S. Modi, B.D. Anderson, Determination of drug release kinetics from nanoparticles:
716 overcoming pitfalls of the dynamic dialysis method, *Mol. Pharm.* 10 (2013), 3076-
717 3086..
- 718 43. T. Ishida, Y. Okada, H. Kiwada, Development of pH-sensitive liposomes that
719 efficiently retain encapsulated doxorubicin (DXR) in blood, *Int. J. Pharm.* 309(2006)
720 94-100.
- 721 44. D.S. Collins, K. Findlay, C.V. Harding, Processing of exogenous liposome-
722 encapsulated antigens in vivo generates class I MHC-restricted T cell responses, *J.*
723 *Immunol.* 148 (1992) 3336-3341.
- 724 45. I.-Y Kim, Y.S. Kang, D.S. Lee, H.J. Park, E.K. Choi, Y.K. Oh, J.S. Kim, Antitumor
725 activity of EGFR targeted pH-sensitive immunoliposomes encapsulating gemcitabine
726 in A549 xenograft nude mice. *J. Controlled Rel.* 140 (2009) 55-60.
- 727 46. S. Strieth, M.E. Eichhorn, B. Sauer, B. Schulze, M. Teifel, U. Michaelis, M. Dellian,
728 Neovascular targeting chemotherapy: encapsulation of paclitaxel in cationic liposomes
729 impairs functional tumor microvasculature, *Int. J. Cancer* 110, (2004)117-124.
- 730 47. R. Weijer, M. Broekgaarden, M. Kos, R. van Vught, E.A. Rauws, E. Breukink, T.M.
731 van Gulik, G. Storm, M. Heger, Enhancing photodynamic therapy of refractory solid
732 cancers: combining second-generation photosensitizers with multi-targeted liposomal
733 delivery, *J. Photochem. Photobiol. Chem.* 23 (2015) 103-131.
- 734 48. L. Wang, D. Geng, H. Su, Safe and efficient pH sensitive tumor targeting modified
735 liposomes with minimal cytotoxicity, *Colloids Surf B Biointerfaces* 123 (2014) 395-
736 402.
- 737

738 **Table 1**

739 Compositions of different types of liposomes.

Phospholipids*	Amount required ($\mu\text{mol/mL}$)		
	NL	PSL	CL
DSPC	3	3	3
DOPC	10	7	7
DOPE	3	3	3
CHEMS	-	3	-
DOTAP	-	-	3

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741 *NL: Non-targetin liposomes; CL: Cationic liposomes; PSL: pH-sensitive liposomes;
 742 DSPC: 1,2-distearoyl-sn-glycero-3-phosphocholine[18:0]; DOPC: 1,2-dioleoyl-sn-
 743 glycero-3-phosphocholine [18:1]; DOPE:1,2-dioleoyl-sn-glycero-3-phosphoethanolamine
 744 [18:1]; CHEMS: Cholesteryl hemisuccinate; DOTAP:1,2-dioleoy-3-trimethylammonium-
 745 propane Chloride salt (DOTAP)

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762 **Table 2**

763 Precision of the developed method for analysis of AFT.

Nominal ($\mu\text{g/mL}$)	Concentrations Mean \pm SD	CV%
0.01	0.01 \pm 6.09	0.9266
0.05	0.05 \pm 6.40	0.8051
0.1	0.1 \pm 5.71	1.7143
0.25	0.25 \pm 1.76	0.7076
0.5	0.5 \pm 5.70	1.1404
1	1 \pm 1.77	0.1763
2	2 \pm 4.03	2.3016
5	5 \pm 5.65	1.0731
10	10 \pm 3.76	1.3577
20	20 \pm 3.83	0.1992
25	25 \pm 2.55	0.1102

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765 SD: standard deviation; CV: Coefficient of variation percentage

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776 **Table 3**

777 Repeatability for different levels of AFT (n = 3).

Concentration ($\mu\text{g/ml}$)	Mean \pm SD ^a	Precision RSD ^b (%)	Accuracy (%)
Inter day			
0.1	99.98 \pm 1.98	1.98	99.9
1	1000.72 \pm 0.49	0.05	102
10	10000 \pm 113.26	1.13	100.1
Intra-day			
0.1	100 \pm 1.06	1.07	99.86
1	1000 \pm 0.29	0.03	100.5
10	10000 \pm 60.08	0.6008	100.2

778 a Standard deviation of the mean

779 b Relative standard deviation

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796 **Table 1**

797 Release kinetics of AFT release from different liposomes.

pH media	Codes	Zero order	First order	Higuchi (Diffusion)	Korsmeyer Peppas	"n" value
	CL	0.691	0.559	0.871	0.940	0.460
pH 7.4	NL	0.928	0.731	0.988	0.994	0.681
	PSL	0.754	0.634	0.912	0.971	0.431
pH 5.5	PSL	0.647	0.486	0.835	0.889	0.599

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814 **Table 5**

815 Drug release kinetics parameters derived from Korsmeyer Peppas.

pH media	Codes	^a n ₁	^a k ₁	^b n ₂	^b k ₂
	CL	0.675	16.987	0.168	37.619
pH 7.4	NL	0.681	3.606	0.527	5.434
	PSL	0.483	8.809	0.201	16.381
pH5.5	PSL	0.941	20.910	0.181	59.671

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817 ^aThe first stage is 0-4 h. ^bThe second stage is 6-24 h.

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827 Fig. 1

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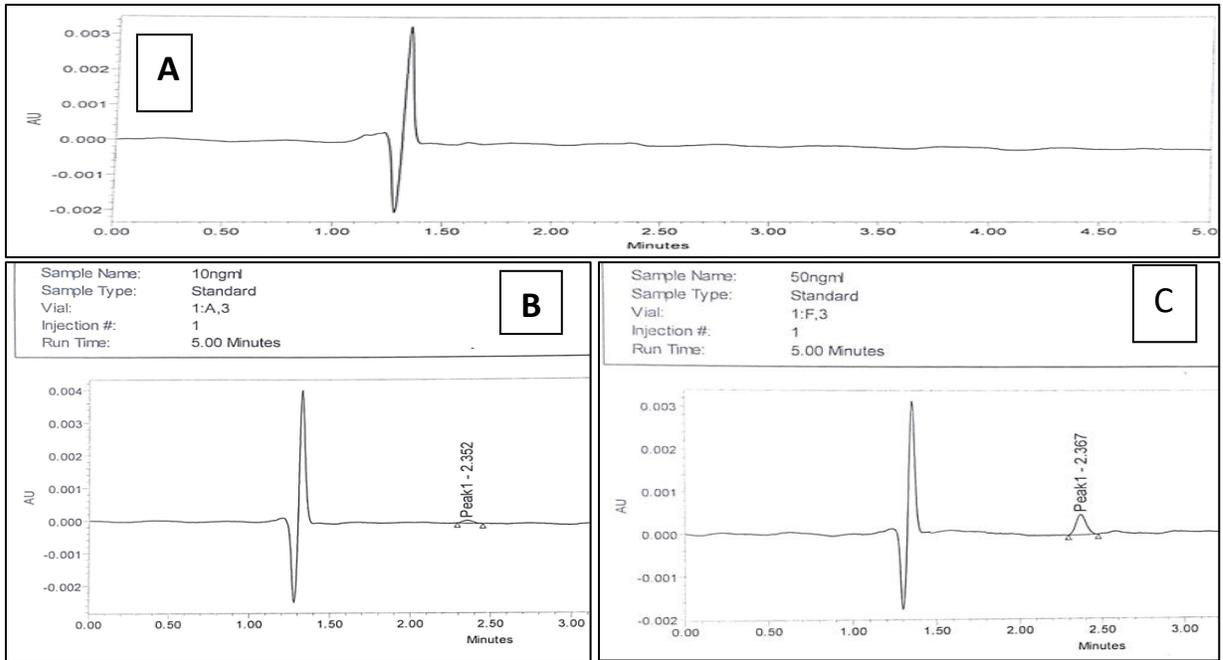


Fig. 1. HPLC chromatograms of the mobile phase (chromatogram A), and HPLC chromatograms of the mobile phase containing (B) 10 ng/ml and (C) 50 ng/ml afatinib.

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839 Fig. 2

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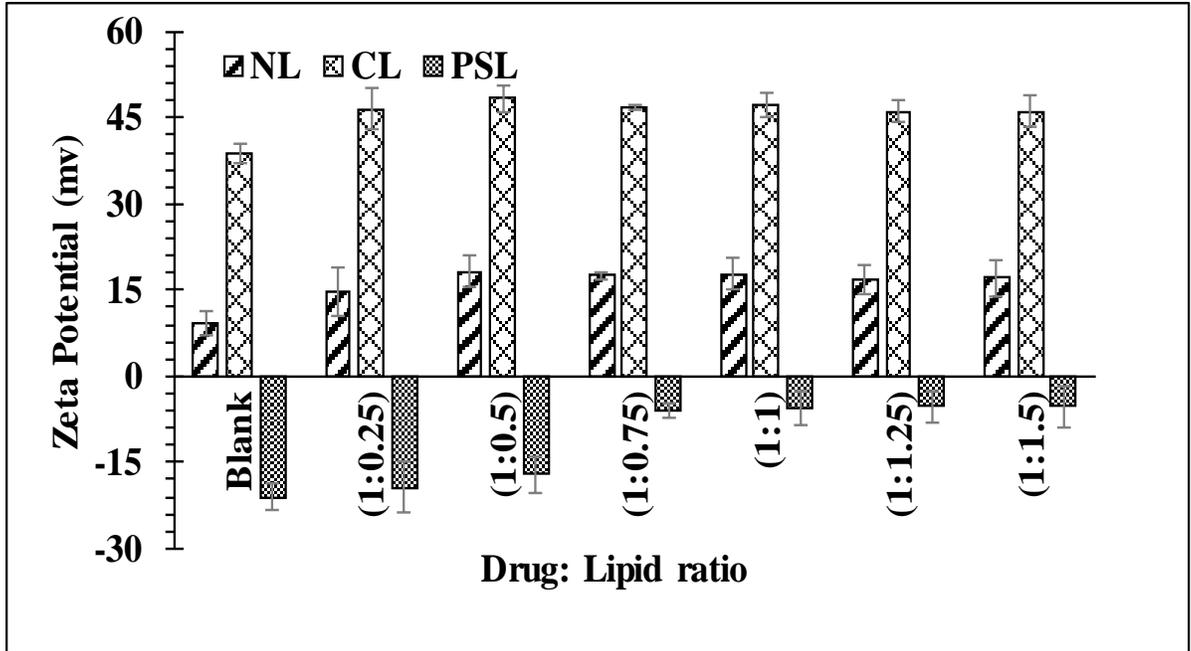


Fig. 2. Zeta potentials of afatinib-loaded liposomal formulations at different lipid to drug ratios.

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852 Fig. 3

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875 Fig. 4

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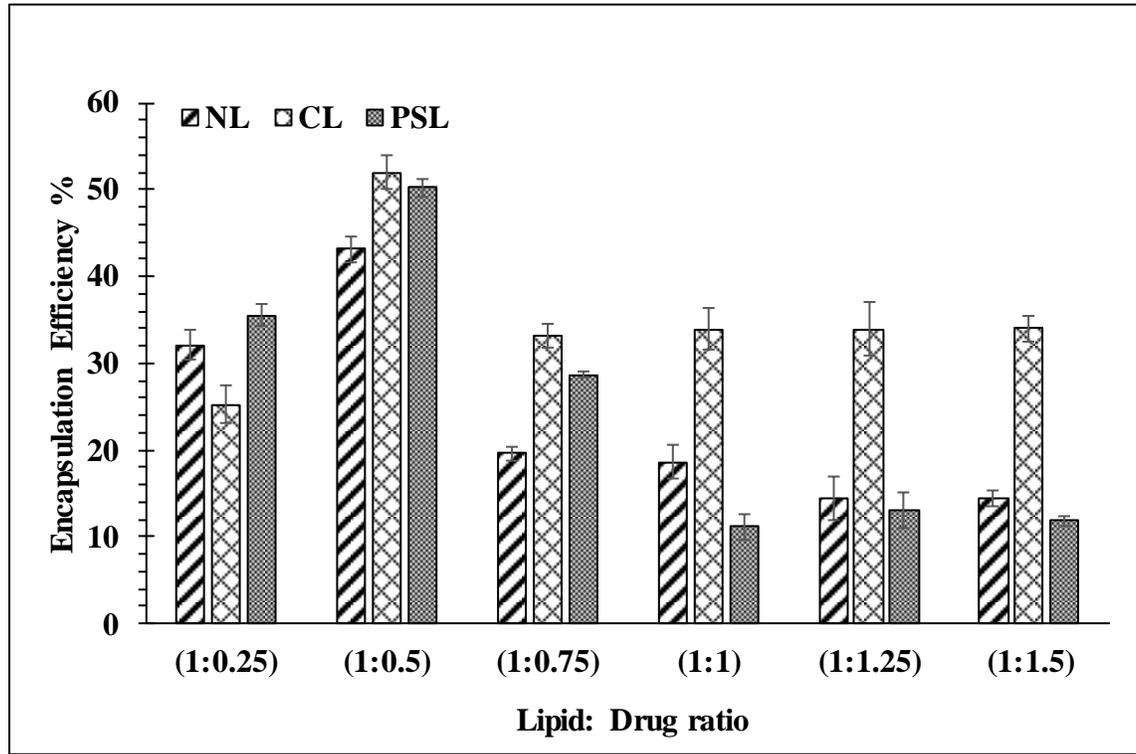


Fig. 3. EE% of afatinib-loaded different liposomal formulations with different lipid to drug ratios.

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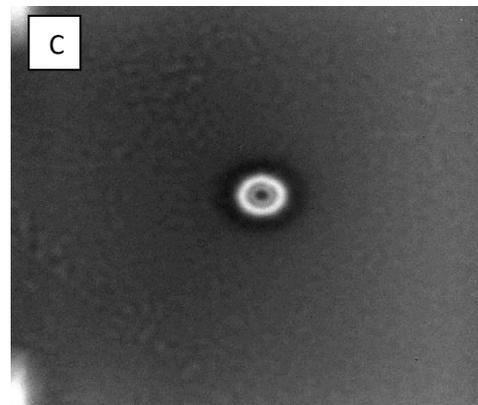
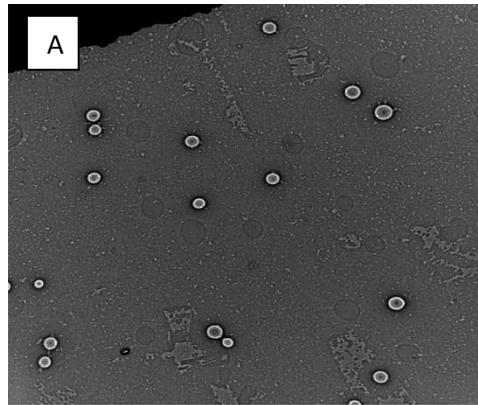
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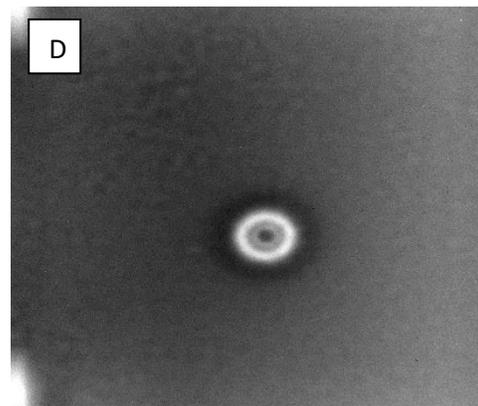
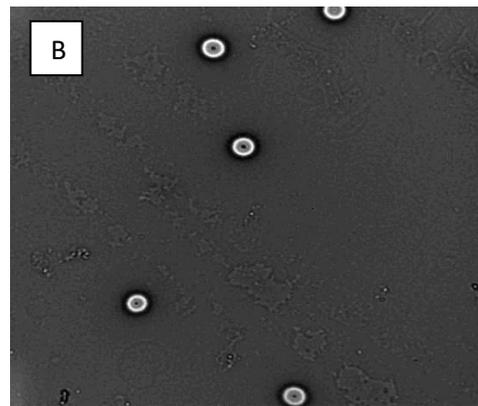
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Fig. 4. TEM micrographs of the pH sensitive liposome at a drug to lipid ratio of 1:0.5 (PSL), using varied magnification power.

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899 **Fig. 5**

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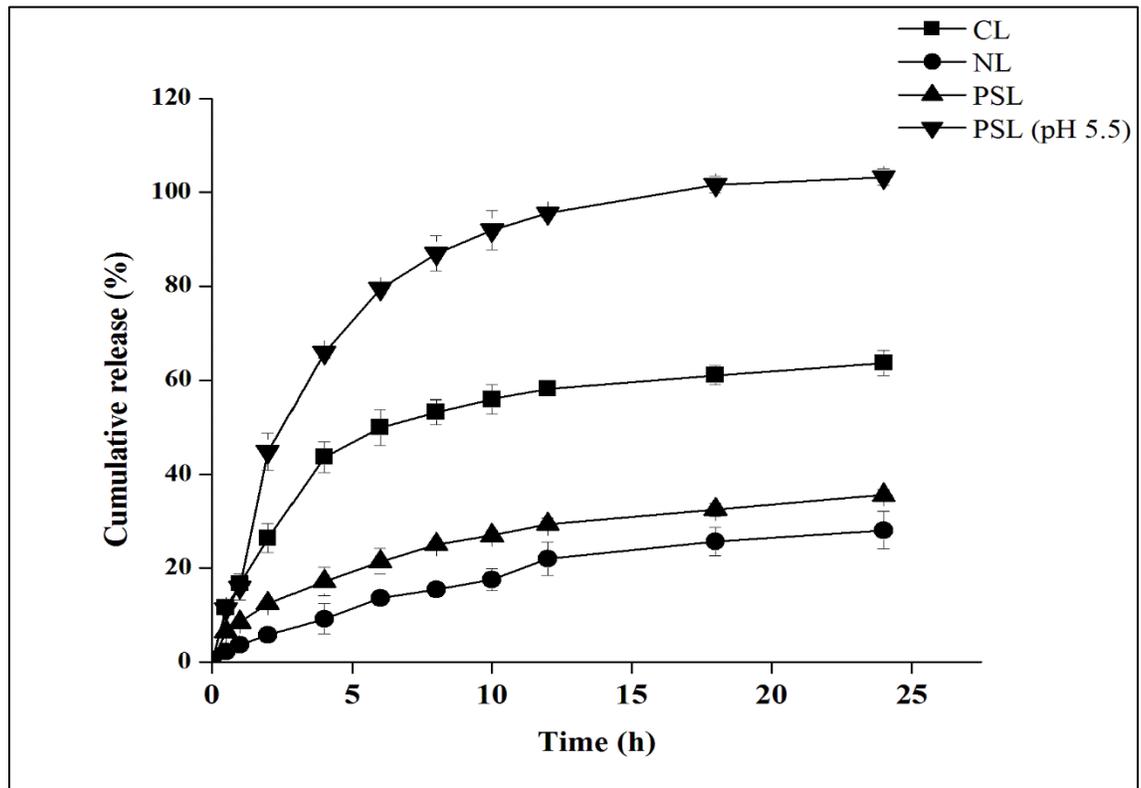
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Fig. 5. *In vitro* release profiles of the liposomal formulations loaded with afatinib in phosphate-buffered saline containing 0.2% Tween 80 at pH 7.4 and pH 5.4. Values are presented as the mean \pm SD.

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921 Fig. 6

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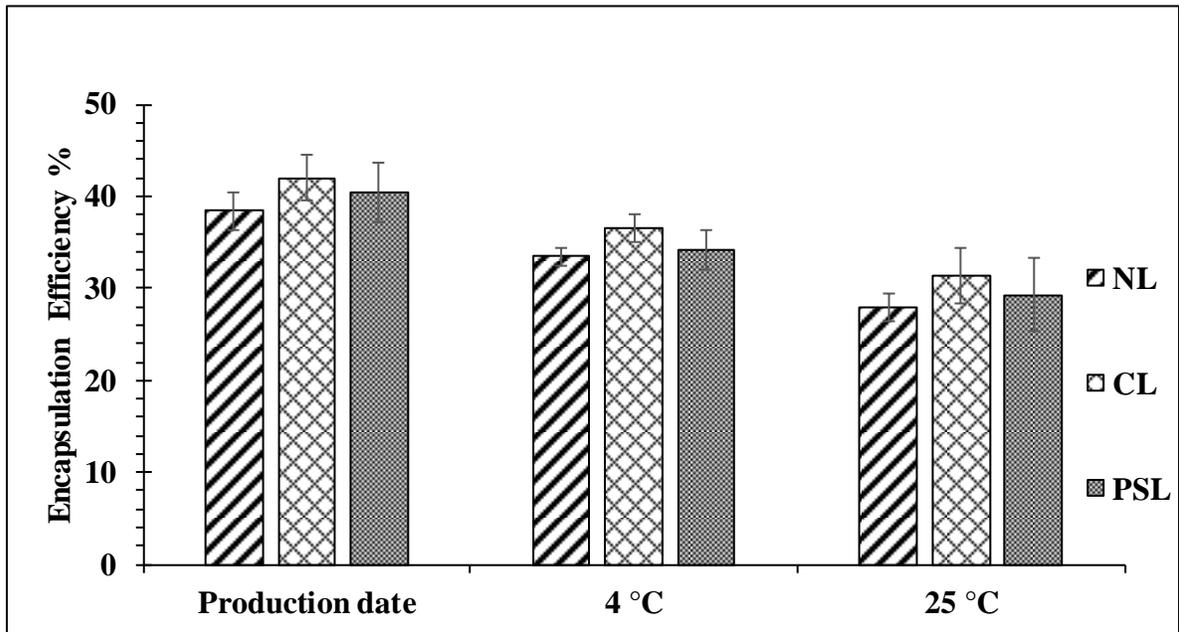


Fig. 6. EE % of afatinib at the ratio 1:0.5, following storage for one month at 4 and 25°C, of NL (nontargeting liposome), PSL (pH sensitive liposome) and CL (cationic liposome), P = 0.141.

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931 **Fig. 7**

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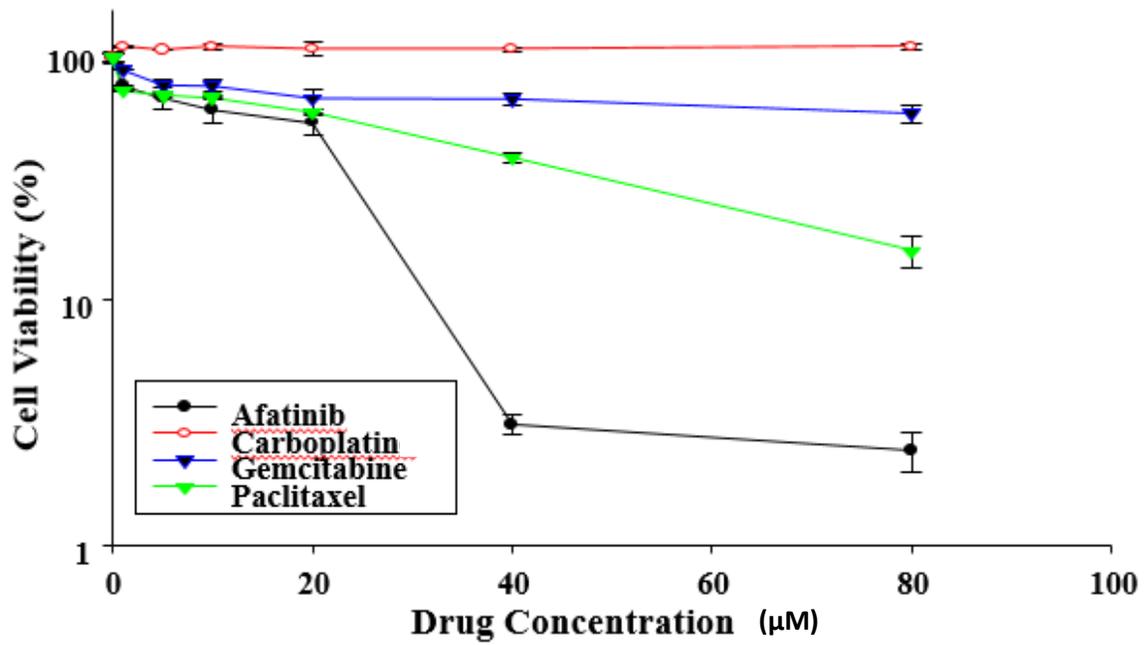
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943 **Fig. 7.** Cytotoxicity of afatinib, carboplatin, gemcitabine and paclitaxel on H-1975 cells, as
944 determined by a WST-1 assay. Cells were treated with varying concentrations of the drugs for
945 24 h. Results are from three independent experiments and are expressed as the mean \pm SD.

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950 **Fig. 8**

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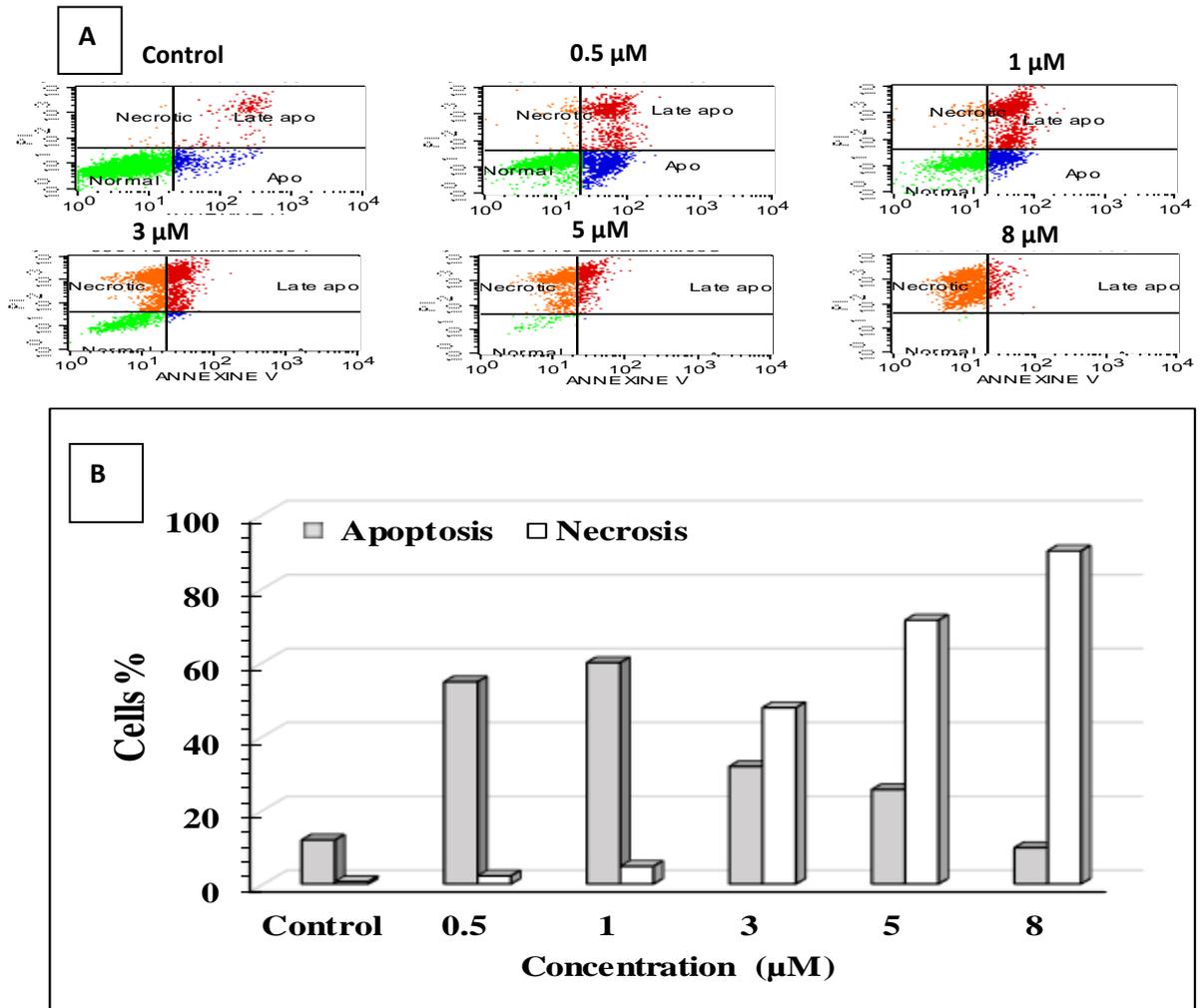


Fig. 8. H-1975 lung cancer cells were either treated with free liposomes, as controls, or challenged with Afatinib loaded liposomes (PSL2) for 24 hrs, and then the proportion of apoptosis and necrosis was analysed by Annexin V/PI-flowCytometry. four groups of cells, viable cells that excluded both Annexin V and PI (Annexin V/PI), bottom left; early apoptotic cells that were only stained with Annexin V (Annexin V+/PI), bottom right; late apoptotic cells that were stained with both Annexin V and PI (Annexin V+/ P+), top right and necrotic cells that were only stained with PI (Annexin V/PI+), top left. (A) Flow charts. (B) Histogram showing the percentage of induced apoptosis in H-1975cells.

956 Fig. 9

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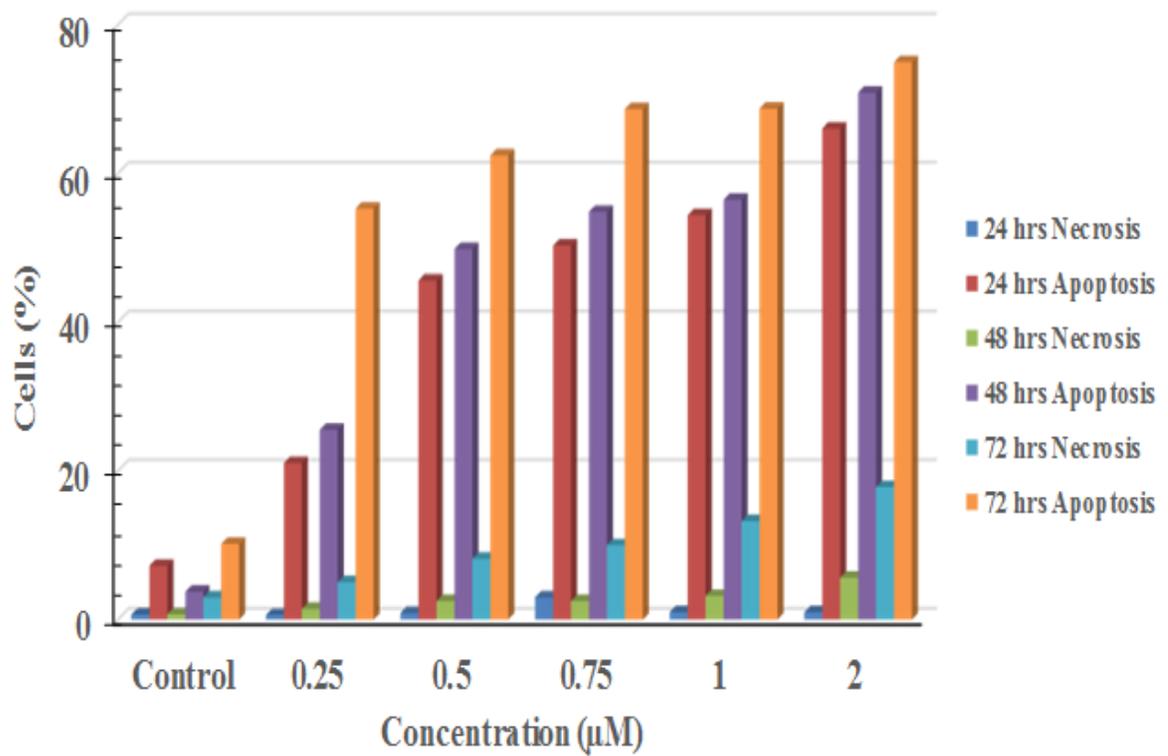


Fig. 9. H-1975 cells were challenged with pH-sensitive liposomes (PSL) (0.25-2 μM) for 24, 48 or 72 h, following which apoptosis was analysed with Annexin V/PI-flow cytometry. Each value represents the mean ± SD of three independent experiments performed in triplicate.

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966 Fig. 10

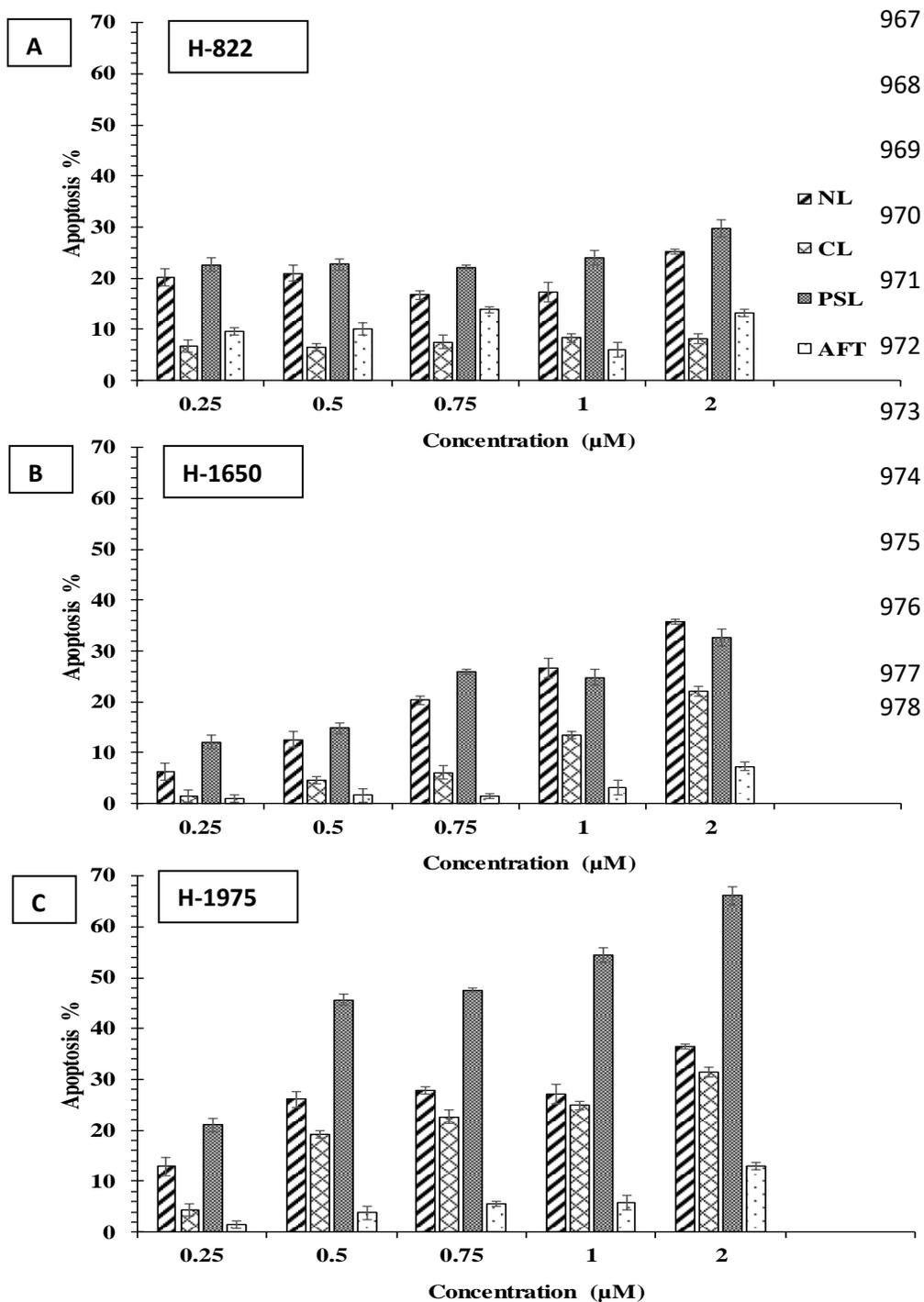


Fig.10. Non-small cell lung cancer cells were either treated with Blank Liposomes, as control, or challenged with AFT and AFT-loaded liposomes (PSL, NL, CL) for 24 h, following which the proportion of apoptotic cells was analysed using Annexin V/PI-flow cytometry. Histogram shows the percentage of induced apoptosis in H-1975 cells. Each point represents the mean \pm SD of three independent experiments performed in duplicate.