



Solid Lipid Nanoparticles: A Next-Generation Approach In Drug Delivery Systems

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Abstract: Targeted medication delivery remains a major challenge in pharmaceutical sciences. Made of solid biodegradable lipids, Solid Lipid Nanoparticles (SLNs) are a potential colloidal carrier system that combines the advantages of polymeric nanoparticles, emulsions, and liposomes while minimizing their disadvantages. SLNs enhance bioavailability, protect labile drugs from degradation, and enable controlled, site-specific administration. This page discusses many preparation methods, including solvent-based processes, high shear homogenization, ultrasonication, microemulsion dilution, and supercritical fluid techniques. Characterization methods such as particle size analysis, zeta potential measurement, electron microscopy, atomic force microscopy, and differential scanning calorimetry are highlighted. SLNs are still a developing and important technology in modern drug delivery systems, and they show versatility in a range of administration methods, including parenteral, nasal, pulmonary, ophthalmic, rectal, and topical. Despite some limitations, such as poor drug loading, sophisticated systems like Lipid Drug Conjugates (LDCs) and Nanostructured Lipid Carriers (NLCs) provide useful solutions in addition to their growing uses in gene delivery and cancer treatment.

Keywords: Solid Lipid Nanoparticles (SLNs), Drug Delivery Systems, Nanotechnology, Controlled Release.

1.INTRODUCTION:

One of the most difficult research problems in pharmaceutical sciences is ensuring the precise delivery of a therapeutic chemical to particular organ sites. New approaches to enhancing medication delivery have been made possible by the development of colloidal delivery systems like liposomes, micelles, and nanoparticles. Because of their special small particle size, vast surface area, and ability to change their surface properties, nanoparticles provide several advantages over other delivery methods. Nanoparticles are solid colloidal particles that range in size from 10 to 1000 nm (1.0 μ m) that contain dissolved, trapped, adsorbed, or attached active principles (drugs or physiologically active compounds). Since nanotechnology provides an appropriate way to deliver small molecular weight drugs and macromolecules like proteins, peptides, or DNA to cells and tissues while shielding them from enzymatic degradation, a lot of work has been done recently to develop the field of nanotechnology for drug delivery. Because of their non-toxicity, biodegradability, and enhanced stability, which allows for extended storage times, nanoparticles are

advantageous when used as drug delivery vehicles. Over the past 10 years, solid nanoparticles of lipid (SLN) have been studied as a possible substitute for colloidal drug delivery vehicles such liposomes, polymeric nanoparticles, and lipid emulsions. SLN eliminates some of the drawbacks of multiple colloidal carriers while combining their benefits. SLN can be used to produce prolonged dissolution of lipophilic medications like camptothecin and to increase the bioavailability of medications like cyclosporine A. Liquid colloidal dispersions with a matrix made of solid biodegradable lipids are known as solid lipid nanoparticles (SLN). SLNs offer high acceptance, controlled release, stability in nature, and the safeguarding of integrated labile drugs against degradation by combining the benefits and drawbacks of other colloidal suspensions in their class. SLN formulations for a range of administration routes, such as parenteral, oral, cutaneous, ocular, pulmonary, and rectal, have been developed and thoroughly documented both in vitro and in vivo.[1,2]

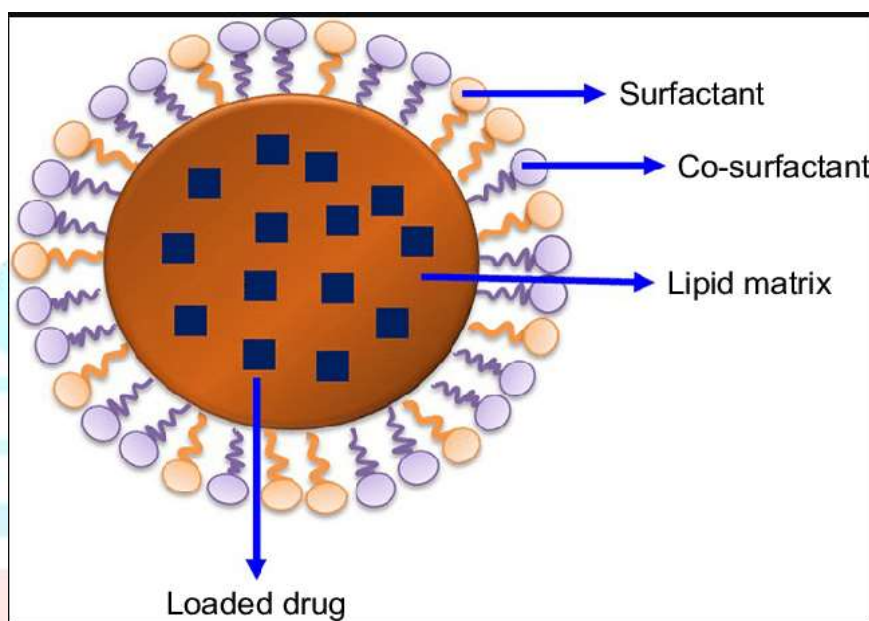


Fig.1 Structure of SLN

Advantages of SLN:

- Acute and longterm toxicity are less likely when biodegradable physiological lipids are used instead of organic solvents in industrial procedures.
- Increased bioavailability of substances that are poorly soluble in water; site-specific drug delivery; and better skin penetration by dermal application
- Defense of chemically labile compounds and sensitive molecules from the environment against gastrointestinal deterioration
- Boost the confined bioactive's bioavailability and the labile integrated compound's chemical production.
- The likelihood of lyophilization[3]

Disadvantages of SLN:

- Insufficient capacity to load medications.
- Drug ejection happens during polymeric change during storage.
- The relatively high water content of the dispersions (70–99.9%)

2.METHOD OF PREPERATION:

1. High shear homogenization (HSH): This technique is dependable and was first applied to the production of solid lipid nanoemulsions. High pressure homogenization is the process of forcing a liquid at extreme pressure (between 100 and 2000 bar) through a small hole that is only a few microns across. The fluid accelerates at a very high viscosity of over 1000 km/h for a relatively little distance. The particles are broken down to the submicron level by extremely high cavitation forces and shear stress. Research has been done on lipid concentrations ranging from 5% to 40%. Hot and cold homogenization are two widely used methods for generating HSH..

- **Hot homogenization:** While a high shear mixing mechanism creates a pre-emulsion of the drug-loaded fatty acids melt and the water-soluble emulsifier phase (at the same temperature), hot homogenization is typically performed at temperatures higher than the lipid's melting point. Lipid crystallization and the development of SLNs result from cooling the resulting heated o/w emulsion. Because the lipid phase is less viscoelastic at higher processing temperatures, the particles are smaller; yet, the medicine and carrier degrade more quickly at higher temperatures. Raising the homogenization degree or the number of cycles frequently results in an increase in particle size since the particles have a significant amount of kinetic energy. At 500–1500 bar of pressure, between 3 and 5 homogenization cycles are often employed.
 - **Cold homogenization:** Cold homogenization was developed to address the problems associated with the hot homogenization procedure, including temperature-related degradation, drug loss into the aqueous phase, and partitioning. Unpredictable polymeric transitions of the lipid result from the intricacy of the nanoemulsion's crystallization phase, which can produce multiple modifications and/or supercooled melts. Here, the medication is mixed with saturated fat and quickly chilled with liquid nitrogen or dry ice. A mortar mill is used to grind the solid. A cold surfactant solution at the ambient temperature or below is then used to dissolve the resultant lipid microparticles. The lipid must be effectively cooled during homogenization in order to remain solid. However, cold homogenization samples often show a wider size dispersion and bigger particle sizes than hot homogenization samples.[4,5,6]
2. **Ultrasonication:** A further method that produces SLNs is high-speed homogenization, often known as ultrasonication. This strategy has the added benefit of utilizing commonly accessible lab-scale equipment. Nevertheless, this approach has drawbacks, such as a wider size dispersion that reaches into the micrometer range. Other disadvantages of this strategy include potential contamination with metals and physical instability, such as particle production during storage.[7]
3. **Microemulsion based SLN preparation:** Gasco and associates (1997) reduced microemulsions to create SLNs. These originate by stirring an optically transparent fluid at 65 to 70°C. This mixture typically consists of water, co-emulsifiers (like sodium monoethylphosphate and butanol), an emulsifier (like polysorbate 20, polysorbate 60, soyaphosphatidylcholine, and sodium salt taurodeoxycholic acid), and a low boiling fatty acid (like stearic acid). While whirling, the heated microemulsion dissolves in cold water (2–3°C). Hot microemulsion to freezing water volume ratios typically fall among 1:25 and 1:50. The microemulsion's content has a big impact on the dilution process. The SLN dispersion can be used as a granulation fluid when it is transformed into solid products, such as tablets/pellets throughout the granulation process, but when the particle content is low, too much water needs to be removed. The nanoparticles could only be formed by solvents that rapidly disperse into the aqueous phase, such as acetone; bigger particle sizes were created by more lipophilic solvents.[8]

4. **Supercritical Fluid technology:** This fresh approach has recently been used to create SLNs. When a fluid's temperature and pressure simultaneously beyond its respective critical values, it is said to be supercritical. The fluid's capacity to dissolve substances improves. The method in question uses a variety of techniques to create nanoparticles, including rapid expansion of supercritical solution (RESS), aerosol solvent extraction solvent (ASES), particles from gas saturated solution (PGSS), and supercritical fluid extraction of emulsions (SFEE). Avoiding solvents, producing particles as a dry powder rather than suspensions, and requiring just low pressure and temperature are some benefits of this method. The best solvent option for this procedure is carbon dioxide solution.[9]
5. **Solvent emulsification/evaporation:** The lipophilic substance is dissolved in cyclohexane, a water-immiscible chemical solvent that is emulsified in an aqueous phase, to produce nanoparticle dispersions by sedimentation in o/w emulsions. Lipid collects in the aqueous media when the solvent evaporates, creating a dispersion of nanoparticles. The average diameter of the resulting particles was 25 nm, using lecithin/sodium glycocholate as a lubricant and cholesterol acetate as the model medication. Siekmann and Westesen (1996) created the cholesterol acetate nanoparticles, which had a mean size of 29 nm, proving that the outcomes were repeatable.[10,11]
6. **Double Emulsion:** In this method, the drug is encapsulated with a stabilizer to prevent the drug from partitioning to the external water phase during solvent evaporation in the external water phase of the w/o/w double emulsion. Li et al. (2010) made solid lipid nanoparticles containing bovine serum albumin (BSA) using the double emulsion technique.[11]
7. **Solvent injection technique:** Here, a solvent that is miscible with water dissolves the solid lipid. The lipid solvent mixture is injected into the agitated aqueous phase, either with or without surfactant. After that, the dispersion was filtered to remove any remaining fat. Emulsion in the aqueous phase aids in the formation of lipid droplets at the injection site and stabilizes SLNs until solvent diffusion is complete.[12]

3.CHARACTERIZATION OF SLNs:

It is necessary to accurately and sufficiently characterize the SLNs for quality control purposes. However, considering the colloidal size of the particles and the intricate and dynamic nature of the delivery system, characterizing SLN is an immense challenge. Particle size, zeta potential (the kinetics of size distribution), their level of crystallinity and lipid alterations (polymorphism), cooperation of other colloidal structures (miscelles, liposomes, absolutely chilled melts, along with drug the nanoparticles), time scale of distribution processes, drug content, in-vitro drug release, and surface morphology are important parameters scrutinized for the SLNs.

- **Particle size and Zeta potential:** The particle size of SLNs influences their physical stability. The most efficient techniques to calculate particle size are laser diffraction (LD) and photon correlation spectroscopy (PCS). PCS, sometimes referred to as dynamic light scattering, measures variability in scattered light intensity relied on by particle motion. Size is determined using photon correlation spectroscopy in the 3 nm to 3 µm dimensions and laser diffraction in the 100 nm to 180 µm size range. In addition to identifying bigger microparticles, PCS is a helpful technique for characterizing nanoparticles. Despite being a helpful method for describing nanoparticles, PCS is also capable of sensing bigger microparticles. The diffraction angle's dependency on particle size (Fraunhofer spectra) is the foundation of the LD method. A zeta potential analyzer or zetameter can be used to measure the zeta potential. To determine size and evaluate zeta potential, SLN dispersions are diluted 50 times with the original dispersion preparation liquid before measurement. In the absence of other complicating elements such as hydrophilic surface appendages or steric stabilizers, a greater zeta potential value may result in particle deaggregation.
- **Electron microscopy:** Nanoparticles can be witnessed directly using a pair of methods: scanning electron microscopy (SEM) and transmission electron microscopy (TEM). Nevertheless, SEM is superior for morphological analysis. The detection limit of TEM is relatively small.

- **Atomic force microscopy (AFM):** This method constructs a topological map by restoring a probe tip across a sample with atomic-level accuracy while paying consideration the forces between the tip and the surface. The distinction between many different sub-techniques is made easier by considering the specific force type used. The probe can be moved over the sample (contact mode) or left floating slightly above it (non-contact mode). It additionally yields ultra-high resolution, which makes AFM a valuable tool when combined with the ability to map a sample based on attributes other than size, such as colloidal attraction or resistance to deformation.
- **Dynamic light scattering (DLS):** Quasi-elastic light scattering (QELS), additionally referred to as PCS or DLS, evaluates fluctuations in the light that gets scattered level on a microsecond timescale. This variation, which may be quantified by constructing an autocorrelation function, can be explained by the aberration of light diffused by specific particles under the effect of Brownian motion. Among the method's advantages embrace its sensitivity to submicrometer particles, convenience of examination, and lack of calibration requirements.
- **Static light scattering (SLS)/Fraunhofer diffraction:** The strategy, which accumulates and fits the arrangement of light scattered from a particle response into fundamental electromagnetic equations, relies mostly on size. Although the entire process is quick and precise, it necessitates higher purity than DLS and a greater awareness of the optical characteristics of the particles.
- **Differential scanning calorimetry (DSC):** DSC and powder X-ray diffractometry (PXRD) are both used for assessing the particle dispersion's degree of crystal structure. The thermal enthalpy/g of the dispersion versus the bulk material are compared in order to identify the evolution of crystallinity using DSC.
- **Nuclear magnetic resonance (NMR):** The size and compositional makeup of nanoparticles can be assessed via NMR. The sensitivity to the motion of molecules has been improved by the selectivity that is offered by chemical shift, thereby providing details on the physicochemical state of the nanoparticle's constituent components.[13,14]

4.COMPARISON OF SLN WITH OTHER COLLOIDAL CARRIERS:

It has been demonstrated that SLN is a better alternative carrier system than conventional O/W emulsion in the following domains.

- if the drug must be shielded from deterioration by chemicals. Incorporating the medication within the solid lipid matrix, rather than the greasy interior phase of emulsion and liposomes, surely offers a higher level of protection.
- Although it is impractical to have long-term drug release from an emulsion, SLN can offer some degree of this.

SLNs are proven to be a better carrier than polymeric nanoparticles in the following areas:

- Decreased cytotoxicity due to the absence of solvents
- Minimal excipient expenses
- Large-scale production is made possible by the simple homogenization process.

SLNs and liposomes: SLNs offer a stronger barrier against the chemical breakdown of medications than liposomes since water can't reach the inner core of lipid particles. The composition of the medicine may allow for higher payloads.

Nanostructured lipid carriers (NLC): NLC was created to circumvent any potential problems with SLNs. The goals were to increase drug loading and prevent drug ejection. This can be visualized in three different ways. In the first model, different lipids, including glycerides, which are composed of different fatty acids, are spatially intermingled. The use of spatially different lipids increases the amount of space accessible for guest molecules, leading to greater gaps between the fatty acid chains of the glycerides and overall crystal defects. The highest possible drug load may be achieved by combining trace amounts of liquid lipids (oils) with solid lipids. This model is known as incomplete type NLC. Drugs that dissolve better in oils than in solid fatty acids can do so while the solid lipids surrounding them protect them from degradation. These NLCs are known as various varieties of NLC and are similar to w/o/w emulsions since they are lipid-in-water dispersions that are that are oil-in-solid.

Lipid drug conjugates (LDC): One major problem is the restricted capacity of SLNs to load hydrophilic medications due to partitioning effects during production. The only drugs that can be properly added to the solid lipid matrix are very potent hydrophilic drugs at modest concentrations. To overcome this limitation, the so-called LDC nanoparticles were developed, which have drug loading capacities of up to 33%. First, an insoluble drug-lipid conjugate bulk is created by either producing salt (for instance, with a fatty acid) or covalently attaching (for instance, to ethers or ester). High pressure homogenization (HPH) is then used to treat the resultant LDC in order to produce nanoparticles using an aqueous surfactant solution (such as Tweens). In cases of severe protozoal infections, these matrices may be helpful for hydrophilic drug transport to the brain.[15,16]

5.APPLICATIONS OF SLN:

SLN for Parenteral Application: Wissing et al. (2004) carried out an extensive assessment of parenteral SLN use. SLN are perfect for systemic distribution since they are composed of physiologically well-tolerated ingredients and have excellent preservation capacity after lyophilization and/or sterilization. When given intravenously, SLN are small enough to go throughout the microvascular system and prevent macrophage uptake in the case of a hydrophilic coating. For both viral and non-viral gene delivery, SLN has therefore been suggested. Through electrostatic interactions, cationic SLN has been demonstrated to directly bind genes, which could be useful for targeted gene therapy in the treatment of cancer. Additionally, the charge of particles can be altered by their composition, allowing molecules with opposite charges to bind. The management of diseases of the central nervous system, such as brain tumors, AIDS, neurological disorders, and mental problems, is sometimes limited by the inability of potent drugs to penetrate the blood-brain barrier (BBB). Colloids with a hydrophilic coating exhibit superior BBB transit and tissue dispersion.

SLN for Nasal Application: Because nasal administration avoided the breakdown of labile medications (like peptides and proteins) in the GI tract and poor transport across epithelial cell layers, it was a feasible alternative noninvasive drug administration approach. To improve the absorption of drugs through the nasal mucosa, methods such as development of formulations and prodrug derivatization have been employed. As an alternative transmucosal delivery route for macromolecular diagnostics and medications, SLN has been proposed by a number of research teams. A recent study found that polymeric nanoparticles coated with PEG had promising results when used as vaccine carriers. This concept could be useful for solid lipid nanoparticles.

SLN for Respiratory Application: The lungs offer a lot of surface area for drug absorption because they don't have first-pass effects. Aerosolized drugs (with a size range of 1-3 μm) absorb rapidly in the deep lung due to the extremely thin alveolar walls. Particle absorption in the respiratory system depends on lymphatic drainage. SLN may be recommended as carriers to improve the bioavailability of peptide drugs or anti-cancer drugs used to treat lung cancer. The assessment of the biodistribution of inhaled radio-labeled SLN revealed a significant and notable absorption of the radio-labeled SLN into the lymphatic after inhalation. In a recent investigation, antitubercular drugs (pyrazinamide, isoniazid, and rifampicin) were added to a number of solid lipid particle formulations. The dosage forms were nebulized orally to guinea pigs for direct pulmonary delivery, and the particles ranged in size from 1.1 to 2.1 μm . Nebulization of solid lipid particles carrying antitubercular drugs has been shown to improve pulmonary tuberculosis therapy by reducing dosage frequency and effectively increasing drug bioavailability.

SLN for Ocular Application: There have been several reports of SLN being used to administer ocular medications. The biocompatibility and mucoadhesive properties of SLN improve their interaction with the ocular mucosa and prolong the drug's corneal residence time, which is intended for ocular pharmaceutical targeting. In rabbit eyes, Cavalli et al. (2002) assessed SLN as carriers for tobramycin ocular administration. As a result, SLN considerably raised the drug's bioavailability in the aqueous humor.

SLN for Rectal Application: The literature contains a few reports on SLNs administering medications rectal. combined diazepam to SLN for rectal delivery in order to provide a rapid action. They gave rabbits SLN dispersions and performed bioavailability tests. They found that diazepam cannot be effectively delivered via the lipid matrix, which is solid at body temperature. They decided to employ lipids that melt at body temperature in their ensuing experiments. This field seems to be very accessible to investigation when considering the benefits of the rectal route. For rectal distribution, PEG coating seems to be a potential technique that would boost bioavailability.

SLN in Cancer chemotherapy: Many chemotherapeutic medications have been encapsulated in SLN over the last 20 years, and both in vitro and in vivo tests have been used to evaluate their efficacy. To prolong the drug's release following intravenous treatment for breast cancer, SLN has been supplemented with tamoxifen, an anticancer medicine. To target tumors, SLN laden with drugs like methotrexate and camptothecin has been utilized. Metoxantrone SLN local injections were created to reduce the toxicity of the medication and improve its safety and bioefficacy in the treatment of breast cancer and lymph node metastases.

SLN for Topical application: SLN and NLC are very attractive colloidal carrier systems for skin applications because of their colloidal carrier system characteristics as well as a variety of additional desired skin effects. The researchers have recorded the topical application of SLN in great detail. They are perfect for use on damaged or irritated skin because they are based on non-toxic and non-irritating lipids. Active substances such as vitamin E, tocopherol acetate, retinol, ascorbyl palmitate, clotrimazole, triptolide, phodphyllotoxin, and a nonsteroidal antiandrogen called RU 58841 have been studied in combination with SLN and NLC in recent years..[17,18,19,20]

6.CONCLUSION:

SLN is a colloidal drug carrier that combines the advantages of polymeric nanoparticles, fat emulsions, and liposomes. The hot and cold homogenization strategy is one of the advanced techniques used to create SLNs. The site-specific and sustained release effects of the medication are enhanced by the usage of SLNs. One major problem is the restricted capacity of SLNs to load hydrophilic medications due to partitioning effects during production. Only highly potent low dose hydrophilic drugs can be properly incorporated in the solid lipid matrix, however NLC can improve drug loading and prevent drug ejection. By using LDC nanoparticles, drug loading capacities of up to 33% can be achieved. Therefore, more research on the formulation of NLC and LDC may be undertaken in order to achieve better drug loading, site specificity, and minimal side effects.

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