



“BIOMEDICAL APPLICATIONS OF MAGNETIC NANOPARTICLES:

I: DRUG DELIVERY”

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II: ELECTROMAGNETIC RADIATION”

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ZARAGOZA (SPAIN)

<http://ina.unizar.es>

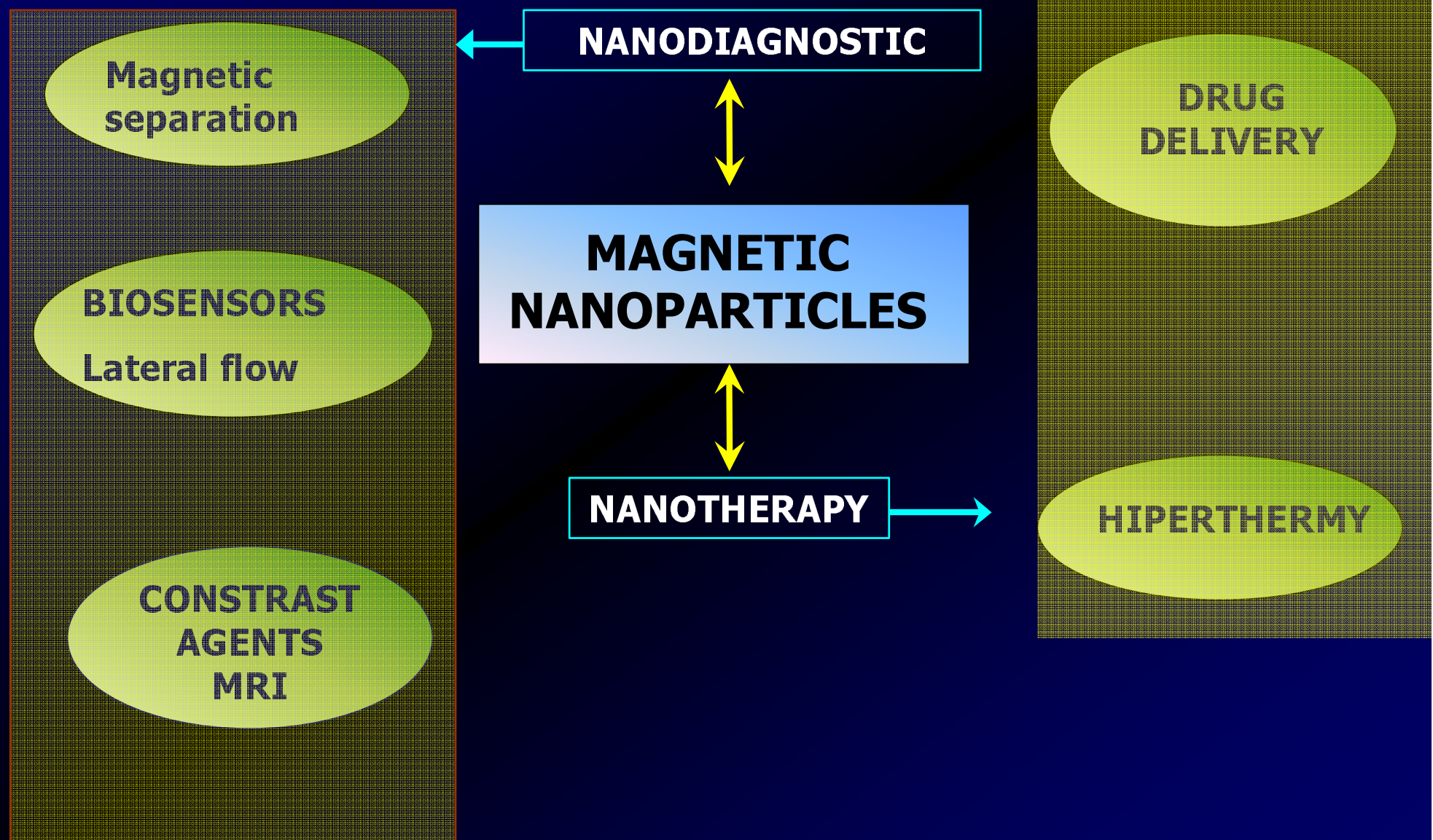
OUTLINE OF THE TALK

Biomedical applications of magnetic nanoparticles I: Drug delivery

-Introduction

- Encapsulated nanoparticles:preparation and
charaterization: Morphology, Structure and Magnetism**
- Bioferrofluids for local drug delivery:**
 - i) In vitro experiment: blood biocompatibility and
drug carrier**
 - ii) Invivo experiments: magnet implant and magnetic
localization**

Medical applications of magnetic nanoparticles



WHY MAGNETIC NANOPARTICLES ?

**SIZE
CONTROL**

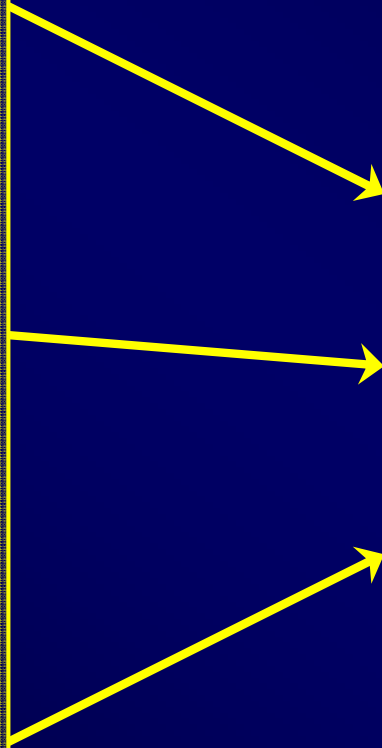
**RISPONSE UNDER
APPLIED FIELD**

**EASY TO
FUCTIONALIZE**

**VERSATILE FOR
APPLICATIONS**

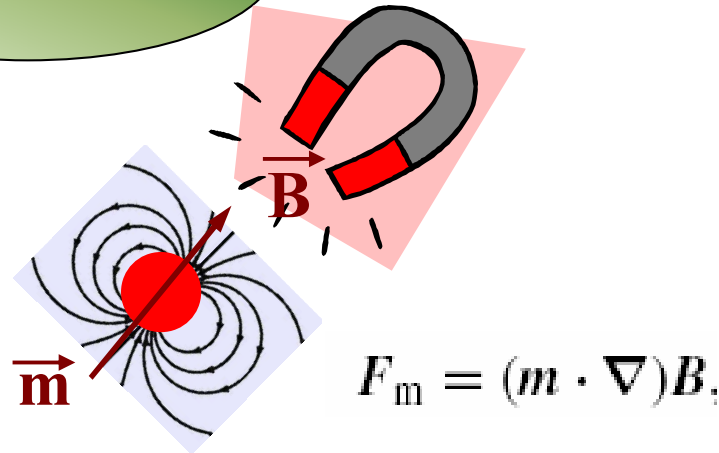
*"in-vivo", "in-vitro" y "ex-
vivo"*

**MODULATE RESPONSE
UNDER EXTERNAL FIELDS**



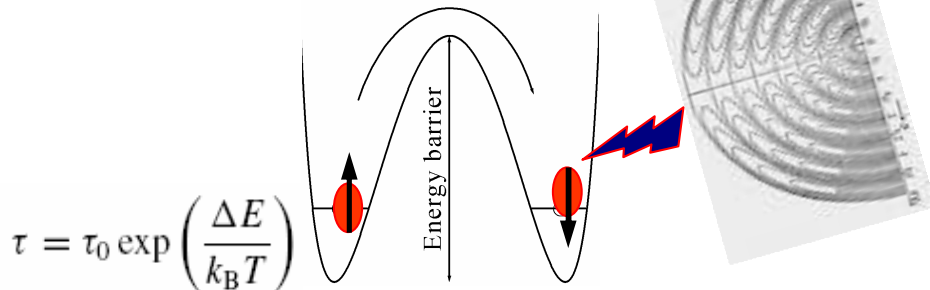
Magnetic nanoparticles response

STATIC



- Drug delivery (Therapy)
- Detection and quantification of biomolecules (Cell sorting and immunoassays)
- Contrast enhance in MRI

DYNAMIC

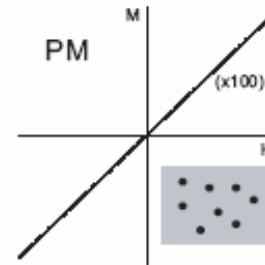
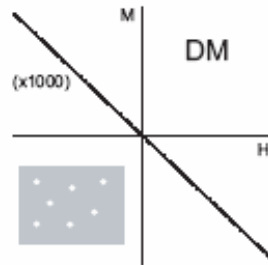


- Resonant adsorption of electromagnetic radiant energy (Hyperthermy, drug release)
- Magnetic resonance

Magnetic behaviour of the matter

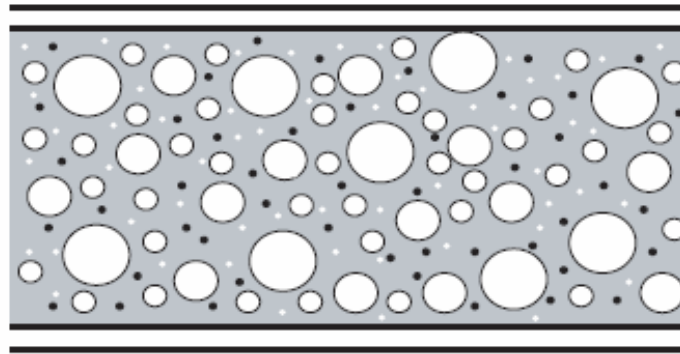
Diamagnetism

All matter



Paramagnetism

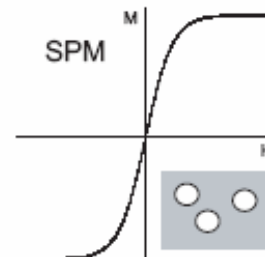
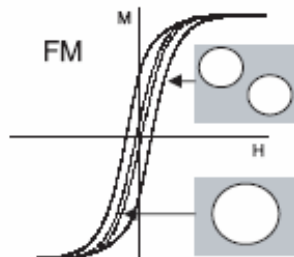
Isolated atoms



Q.A. Pankhurst et al. J. Phys. D.:Appl. Phys. 36 (2003) R167

Ferromagnetism

Mainly metals

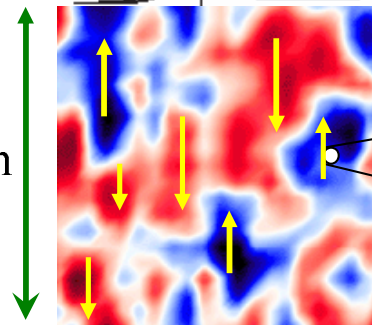


Superparamagnetism

Nanoparticles

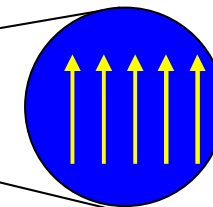
Magnetic domains

100 μm

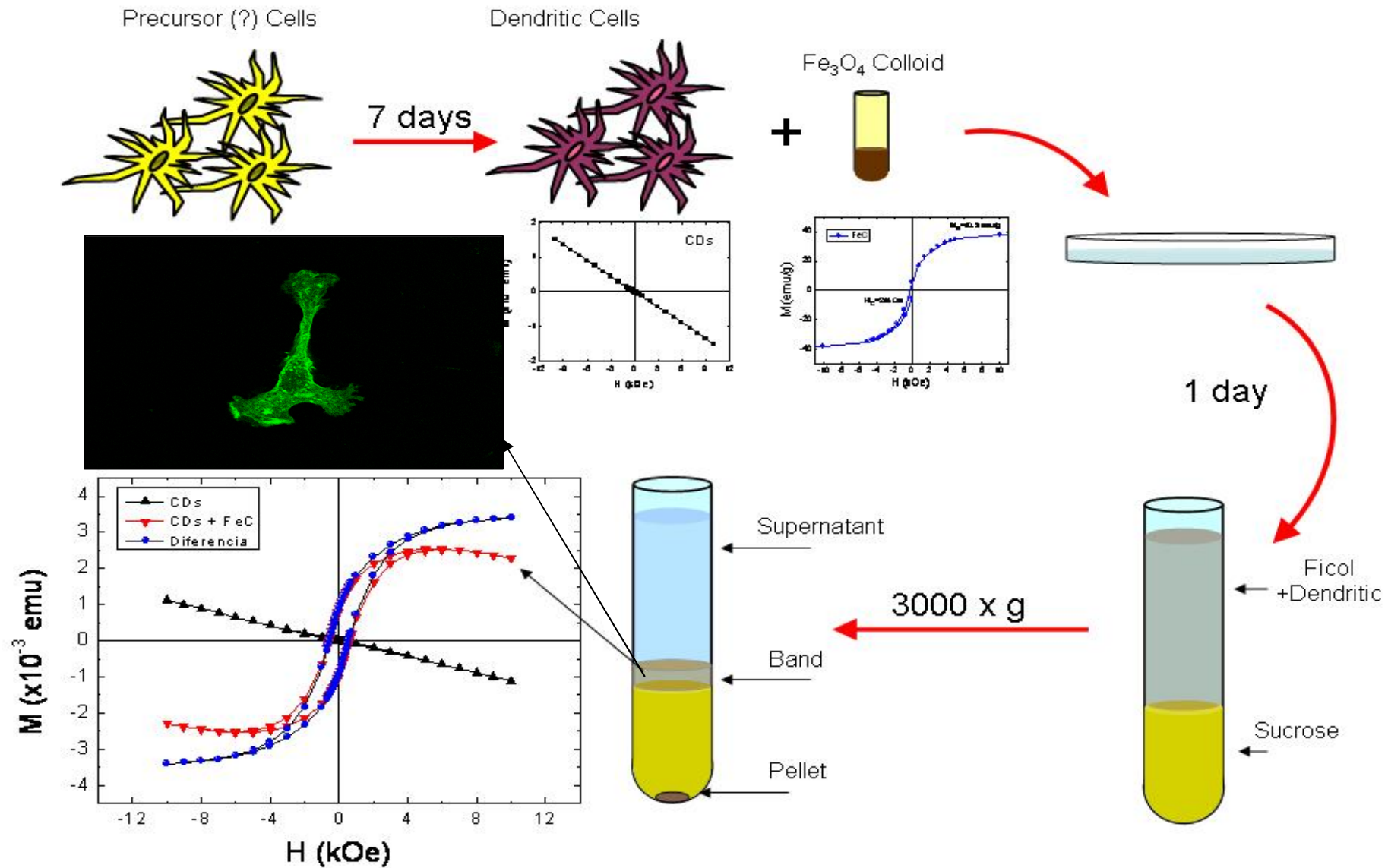


Single-domain particles

20 nm



Dendritic cells as MRI contrast agent



G. Goya et al. INA (2006)

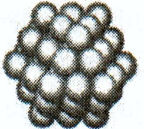
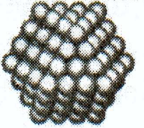
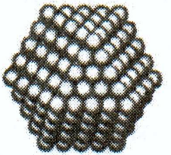
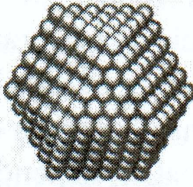
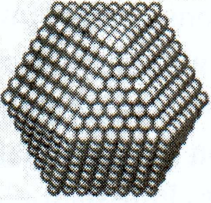
How small?

30 nm → 5 % atoms at the surface

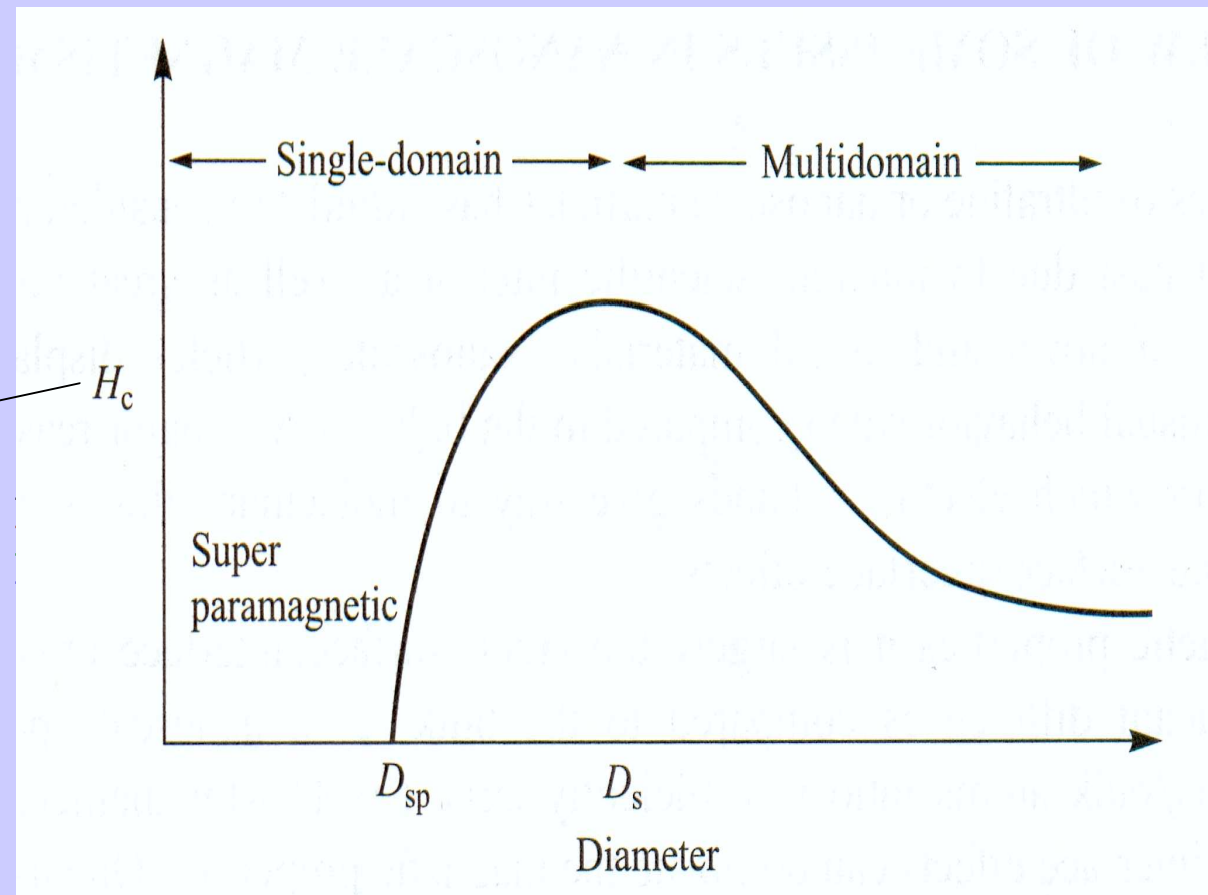
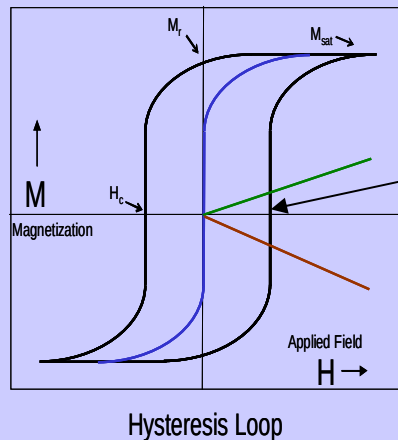
10 nm → 20 % atoms at the surface

3 nm → 50 % atoms at the surface

TABLE 2.1 The relation between the total number of atoms in full shell clusters and the percentage of surface atoms

Full-shell Clusters		Total Number of Atoms	Surface Atoms (%)
1 Shell		13	92
2 Shells		55	76
3 Shells		147	63
4 Shells		309	52
5 Shells		561	45
7 Shells		1415	35

Critical size for single-domain particle



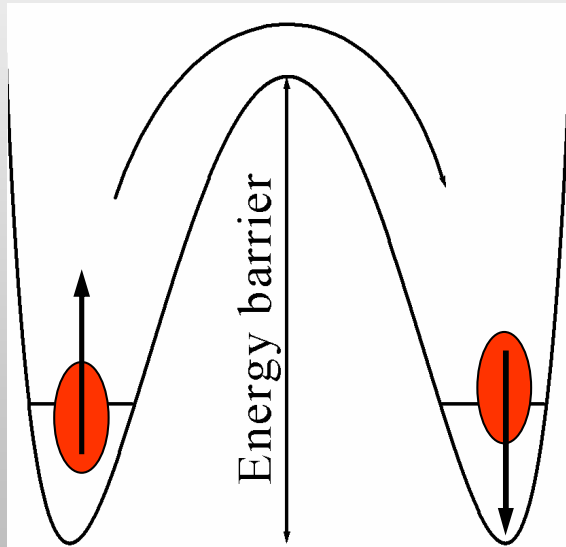
- Under size reduction the coercive field increases and the particle becomes single-domain
- When $E_K = KV$ as $V \rightarrow 0$ then $E_K \rightarrow 0$ **superparamagnetic limit** $\rightarrow KV = k_B T$
- At this situation the particle magnetic moment will fluctuate independently of the particle

Time effects: relaxation

Due to the stocastic nature of the thermal energy the superparamagnetism is a time dependent effect

$$\tau = \tau_0 \exp(-KV/k_B T)$$

τ time for magnetization reversal (depend on the anisotropy)



Si $\tau < \tau_{\text{measure}}$ superparamagnetism

τ_0 typically 10^{-9} s

$$T_B = \frac{K_{\text{eff}} V}{k_B \ln\left(\frac{\tau_M}{\tau_0}\right)}$$

Critical volume to detect superparamagnetism:

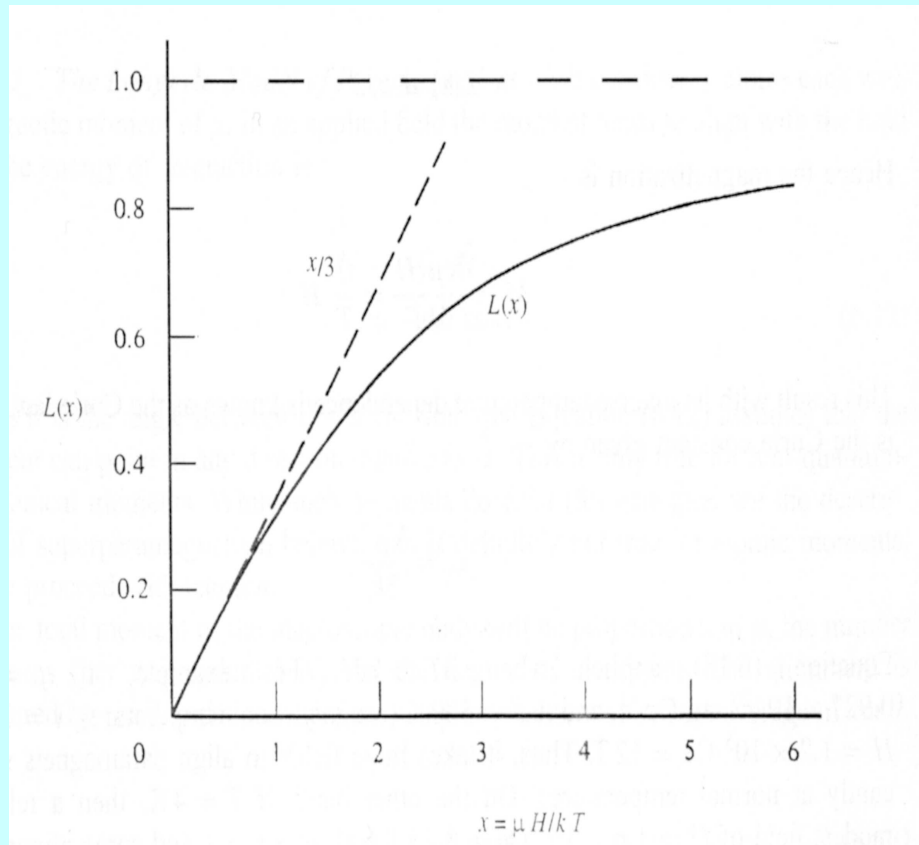
$$V_{\text{sp}} = 25(k_B T/K) \quad \tau_{\text{measure}} = 100 \text{ s} \quad T_B = KV_{\text{sp}}/25k_B$$

$$V_{\text{sp}} = 4.5(k_B T/K) \quad \tau_{\text{measure}} = 10^{-7} \text{ s} \quad T_B = KV_{\text{sp}}/4.5k_B$$

T_B Mössbauer = 5.5 T_B magnetometry (FC y ZFC)

Fe y Co at 300K $V_{\text{sp}} = 16$ y 7.6 nm

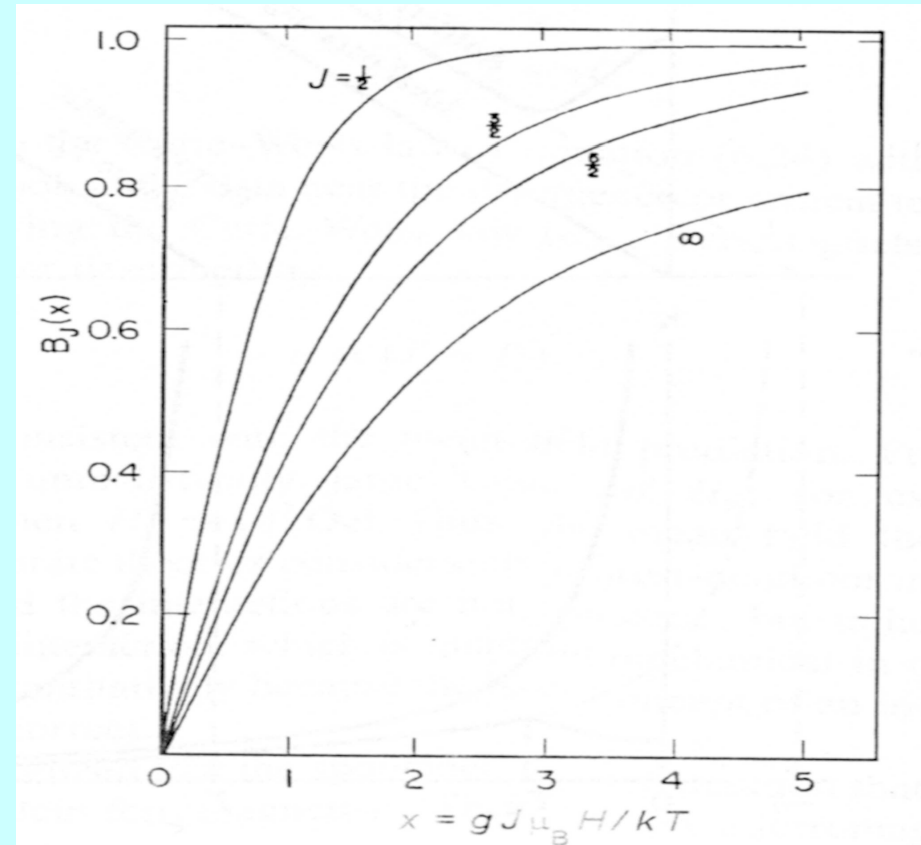
Classic paramagnet



If $K \rightarrow 0$

The supermoment follows the Langevin law

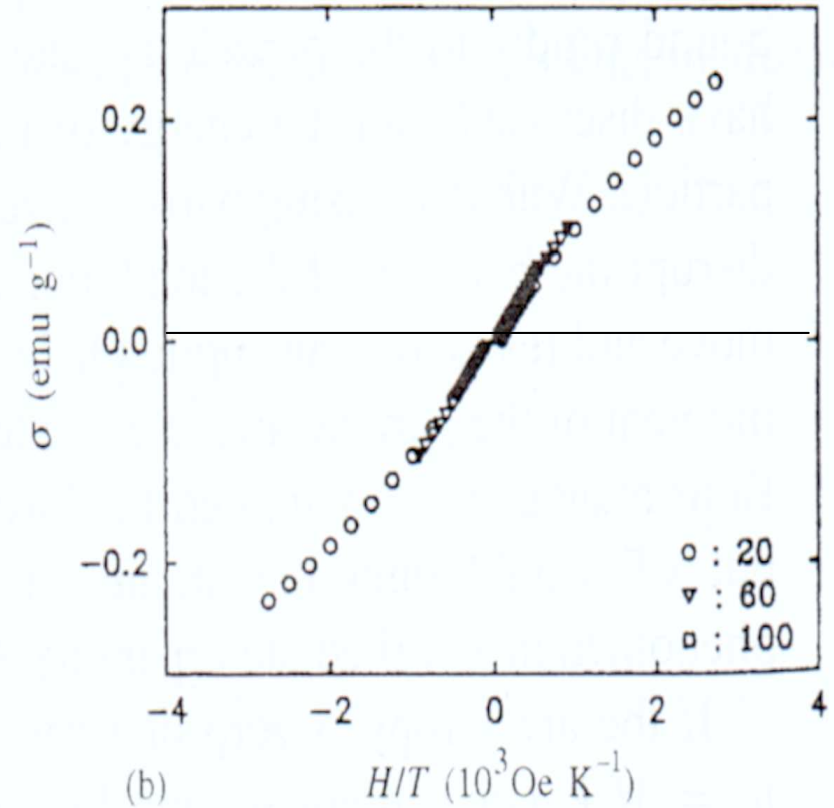
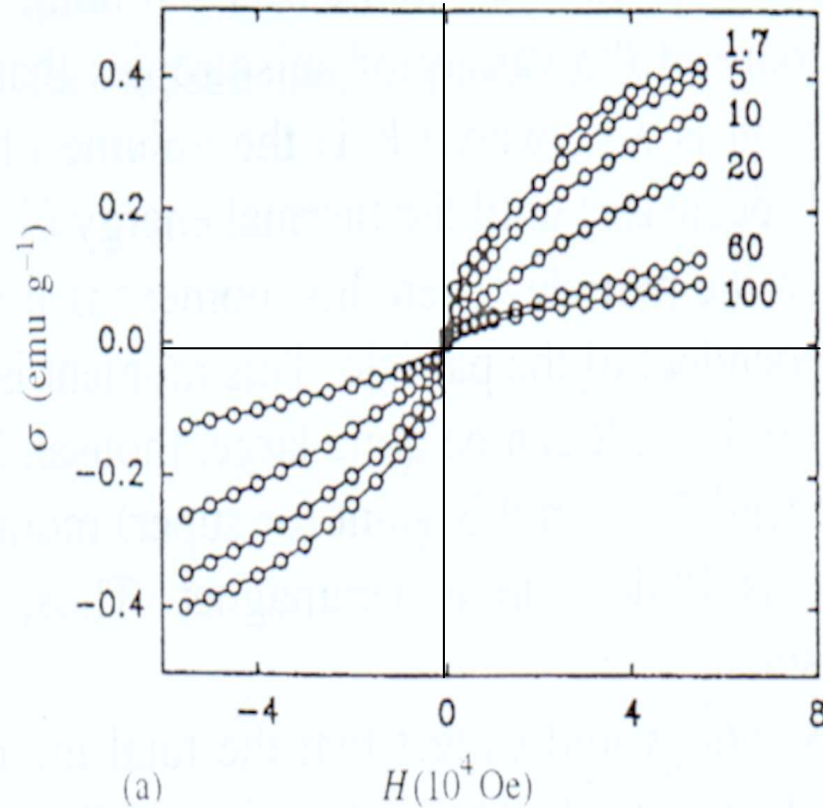
Quantum paramagnet



If $K \gg \gg$

The supermoment follows the Brillouin $J=1/2$ law

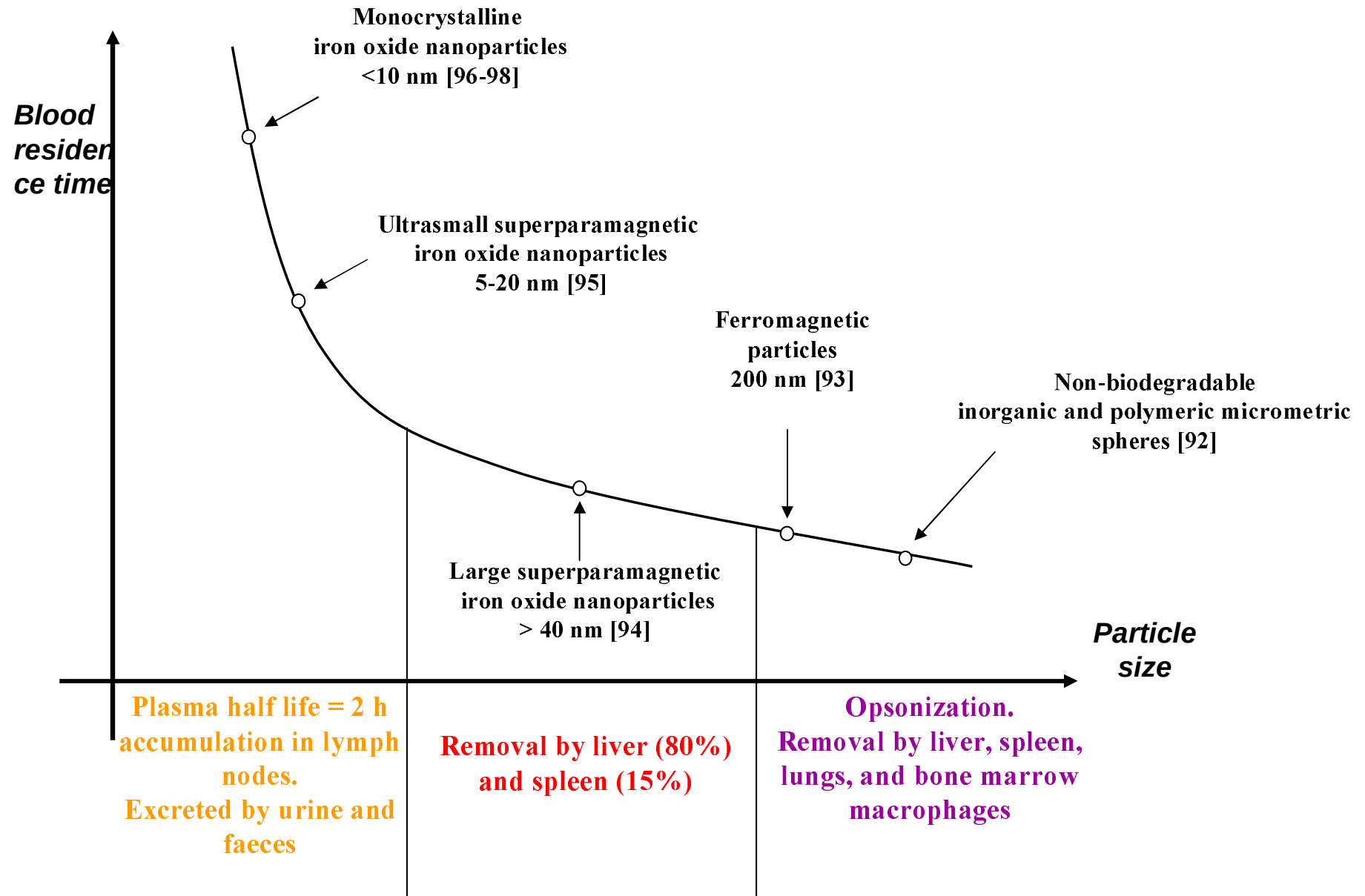
Real superparamagnetic system



-No hysteresis

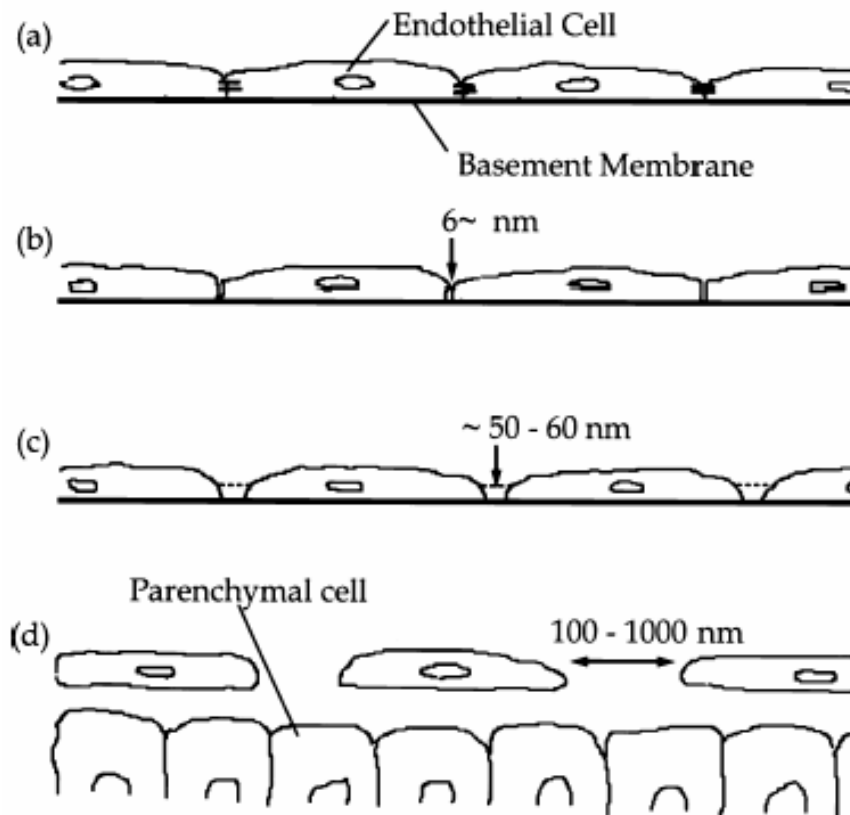
-The isotherm presents a universal H/T behaviour

Qualitative diagram showing the evolution of blood residence time with particle size



Different classes of blood capillaries

For agents to distribute in a tissue they must go through the vascular capillary wall; The permeability of this wall is essential



Lining cells are connected with a tight junction (BBB "Blood-Brain-Barrier")(Central nervous system)

Continuous capillaries (muscles, skin, lung...)

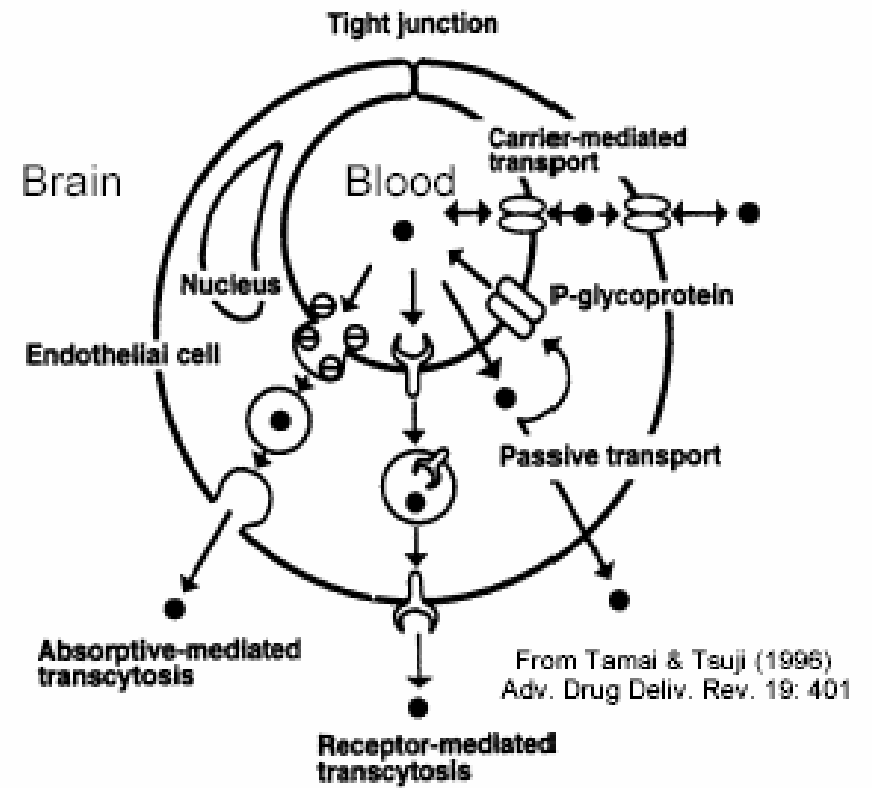
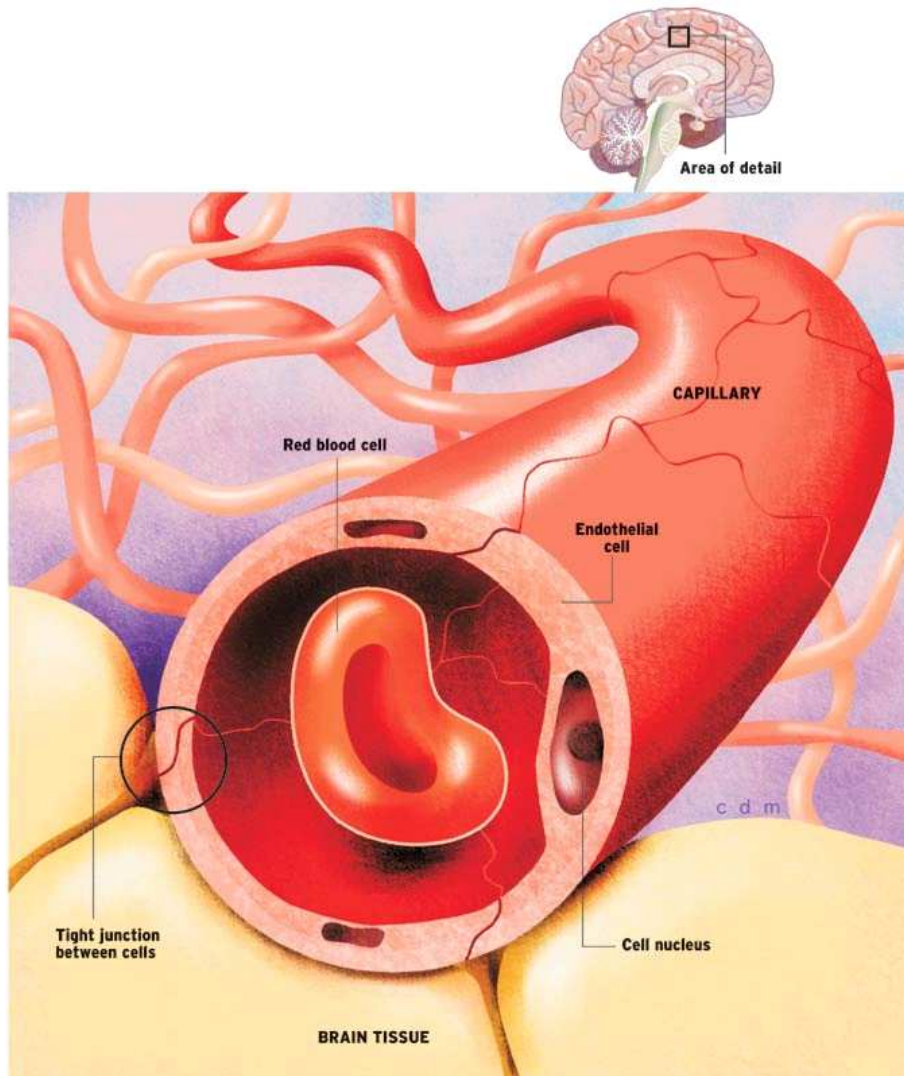
Fenestrated capillaries (kidney, intestine and glands..)

Sinusoid capillaries (liver, spleen and bone marrow...)

Y. Okuhata / Advanced Drug Delivery Reviews 37 (1999) 121-137

Nanoparticles between 60-80 nm are removed from the blood stream in 8-10 minutes

Brain Blood Barrier (BBB)



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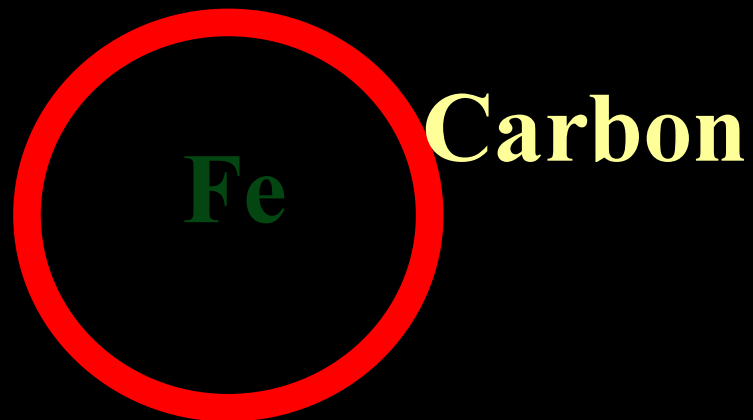
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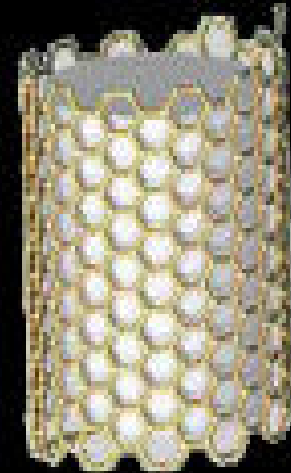
FOR MEDICAL APPLICATIONS WE NEED:

- Small particles**
- Strong magnetic response**
- Biocompatibles**
- Capability to adsorb the drug in short time**
- Release the drug during long time**



Particles coating: Carbon and Silica nanocages

The discovery of graphitic nanostructures as fullerenes and nanotubes offers the possibility to fill nanoscale cavities with transition metals



The confinement of this small amount of material promises:

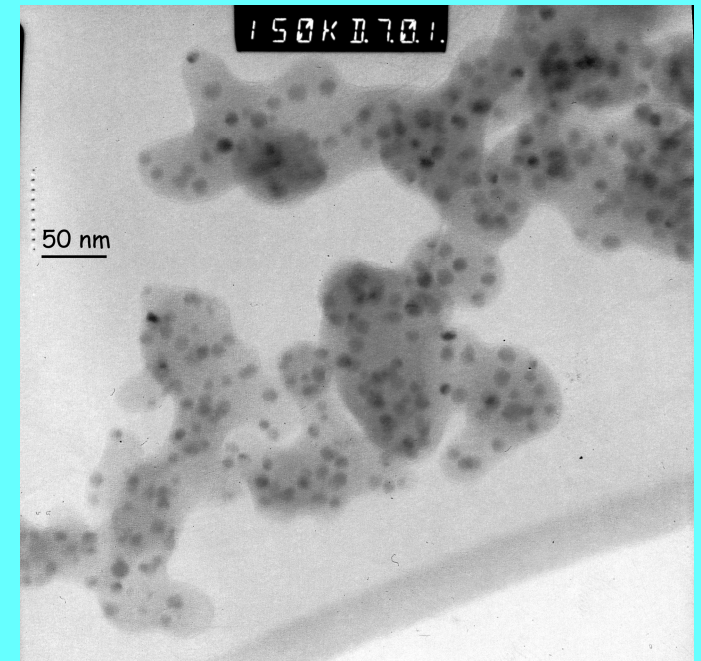
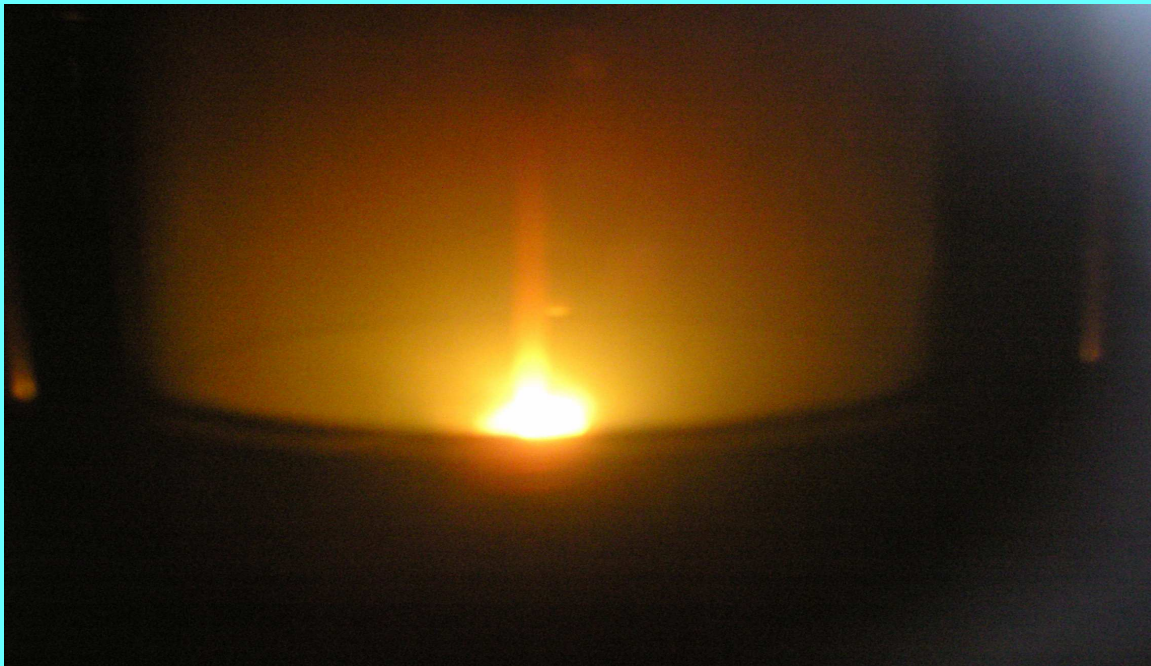
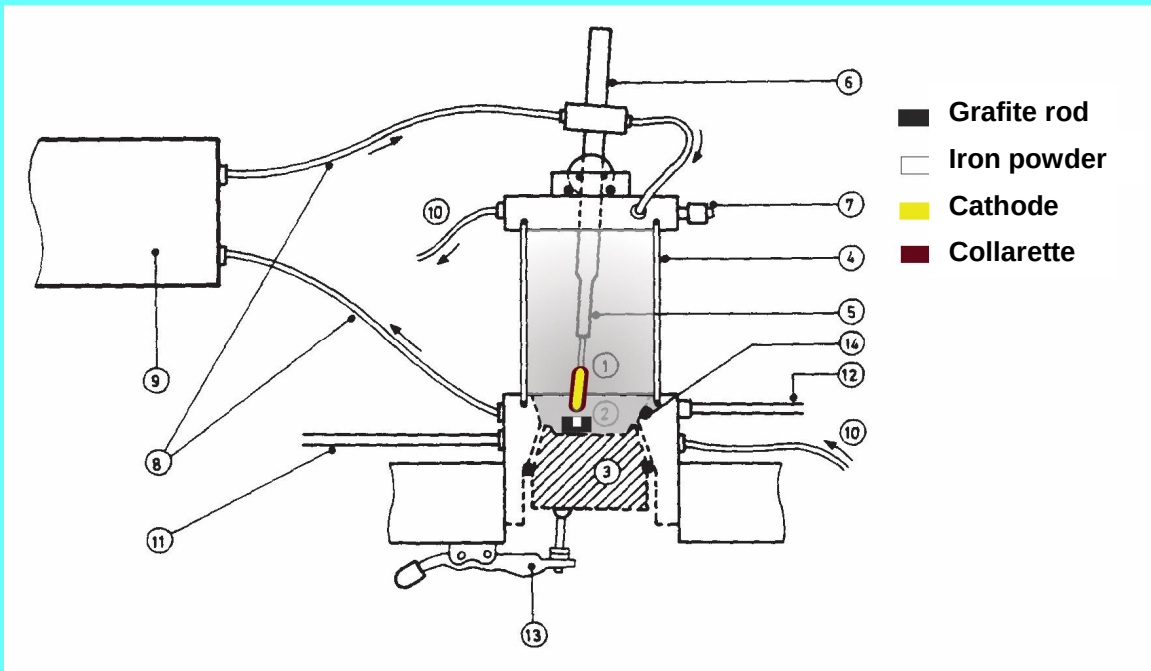
- Novel physical properties**
- Protection of the encapsulated metals from oxidation by resistant carbon cages**

Plasma Furnace

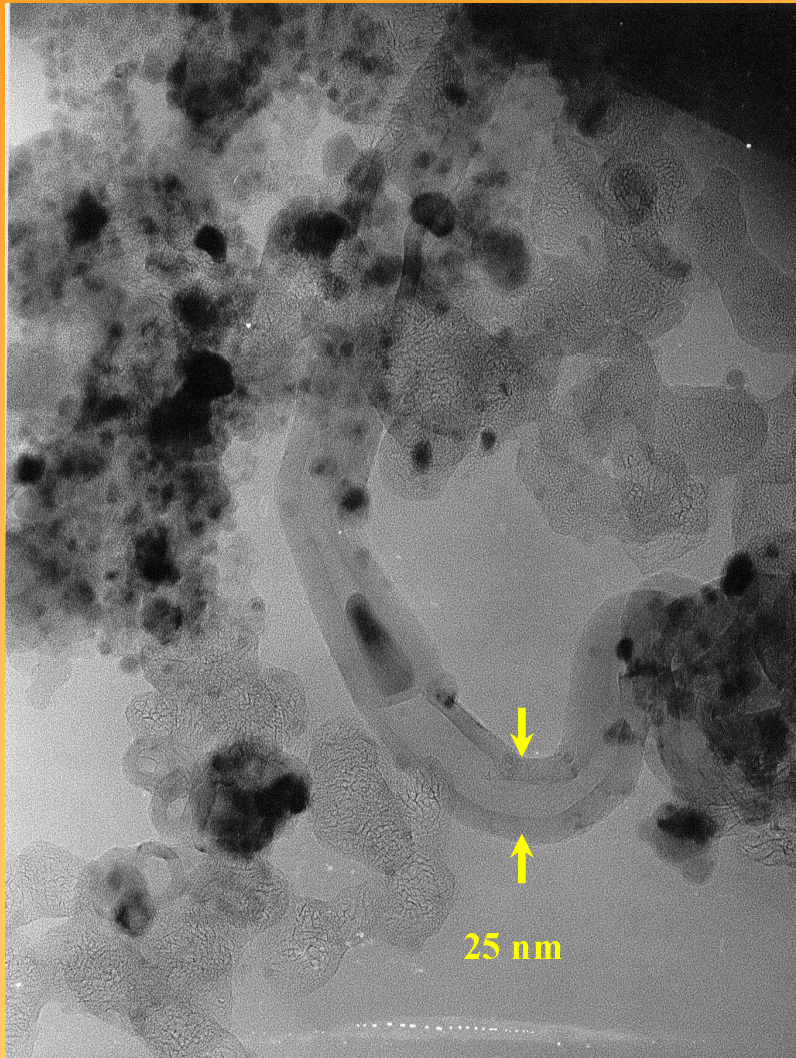
(Kratschmer W. et al., (1990)
Nature 347, 354)

-Helium plasma vaporizes the
iron and carbon electrode

-Small drop of Fe condensed
in nanoparticles coated by
carbon cages



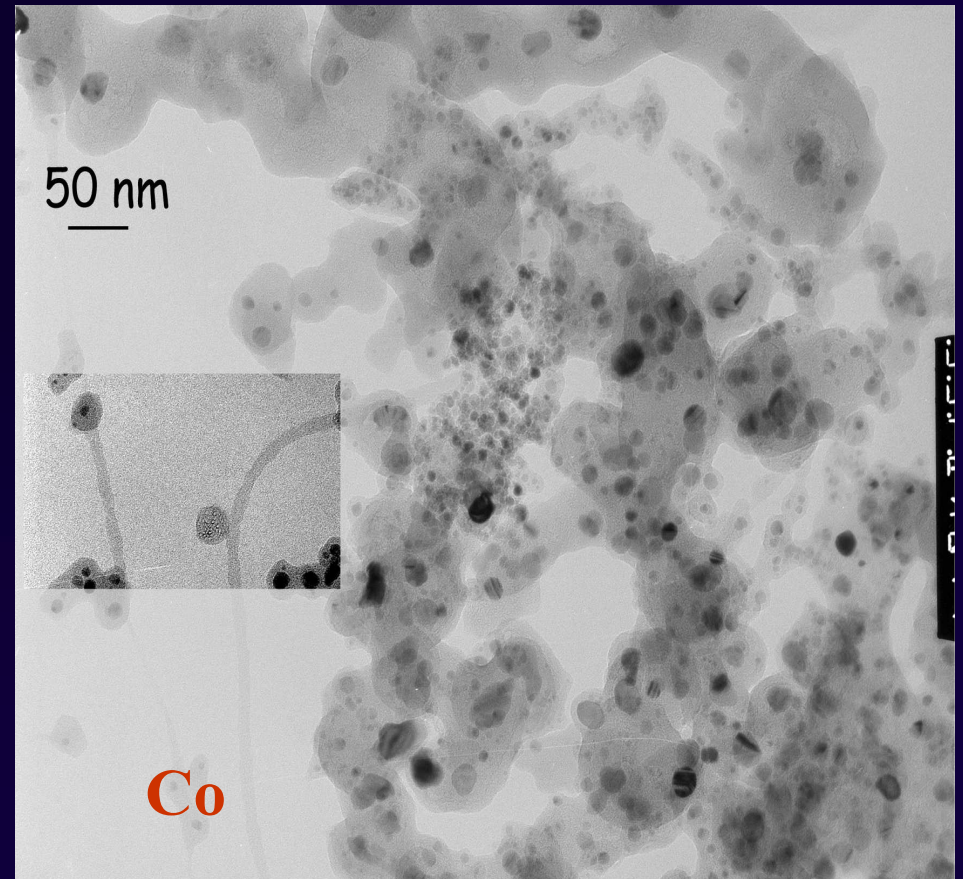
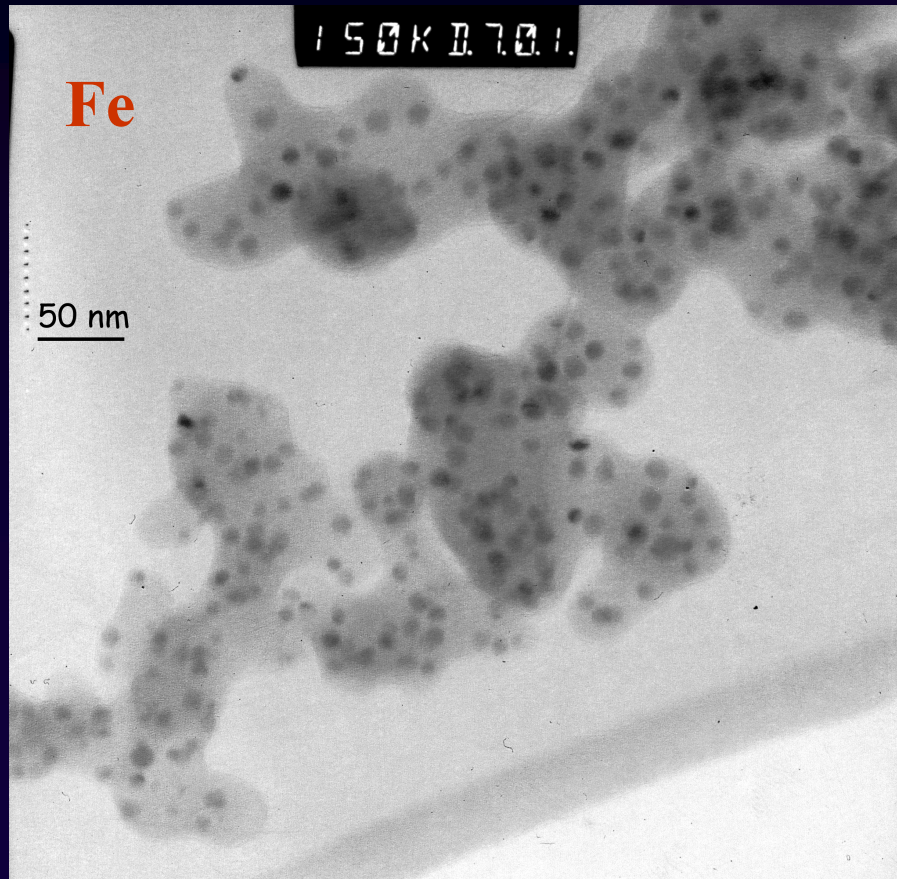
Transition metals encapsulated nanoparticles



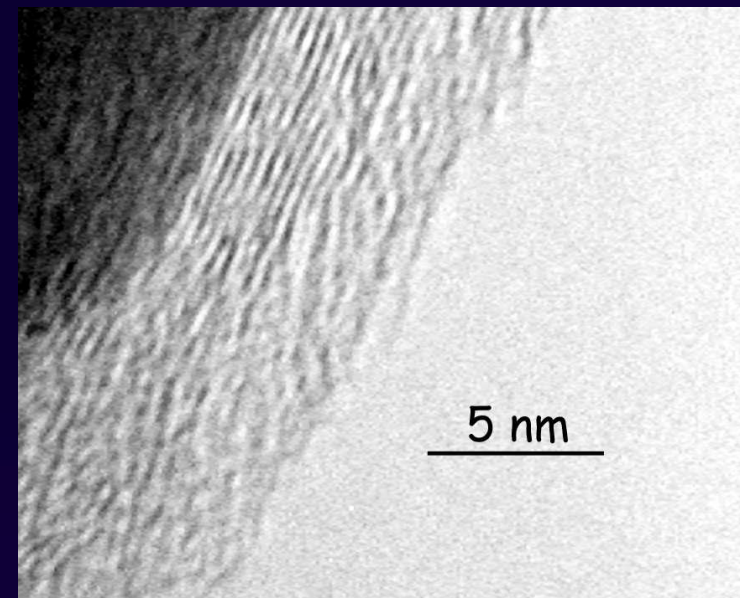
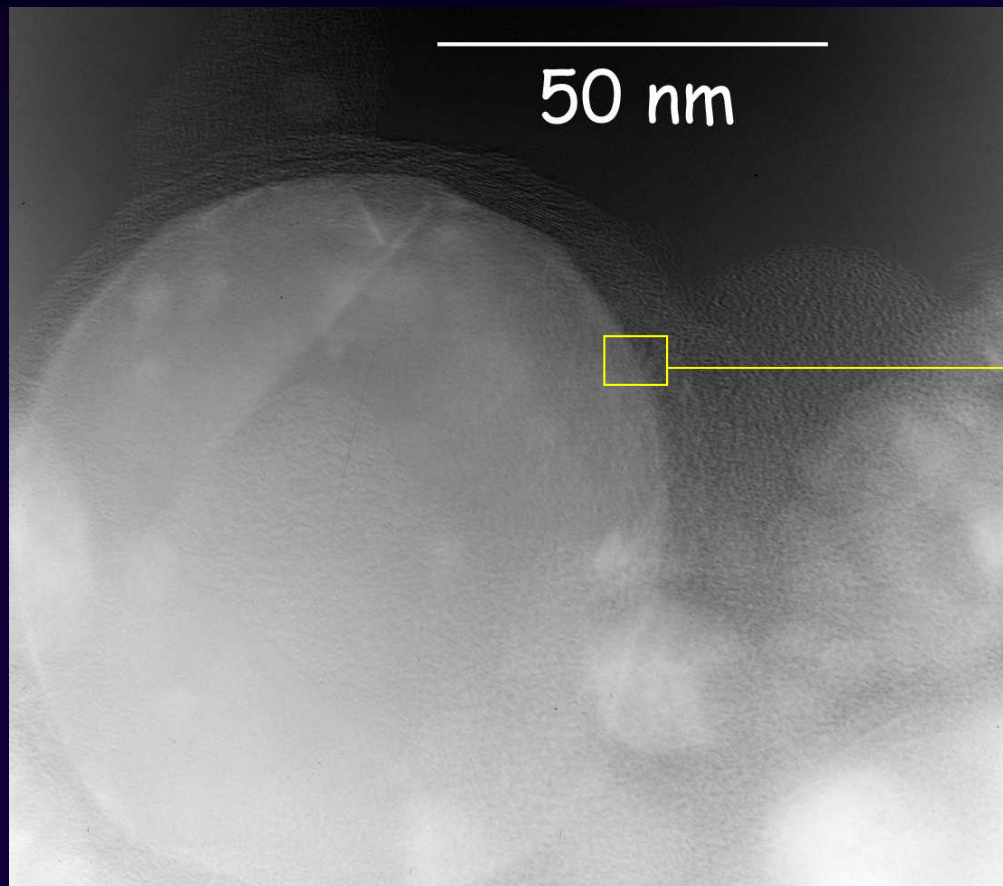
- Graphitic multiwall nanotubes
- Catalytic particles forming large single wall nanotubes
- Small particles surrounded by polygonal layers: Onions
- Metallic inclusions in nanotubes
- Nanoparticles encapsulated in graphitic layers and glassy carbon



TEM images of Fe & Co encapsulated nanoparticles

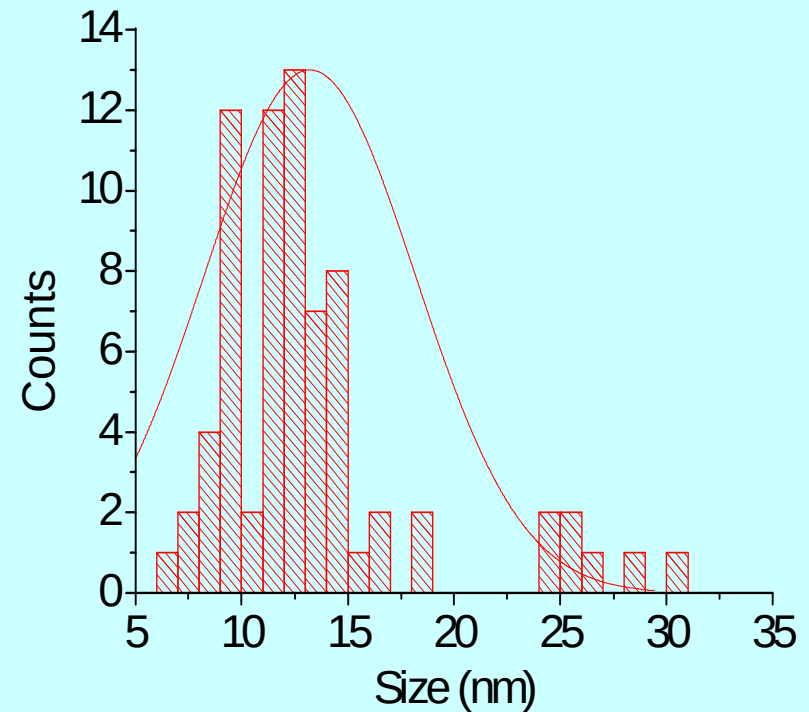
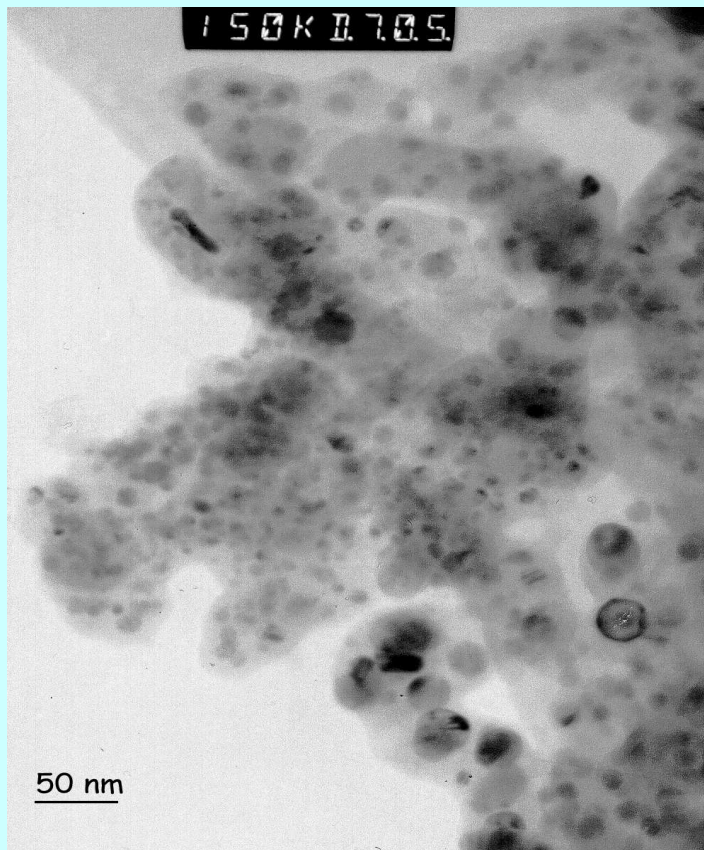


Fe coated by graphitic layers

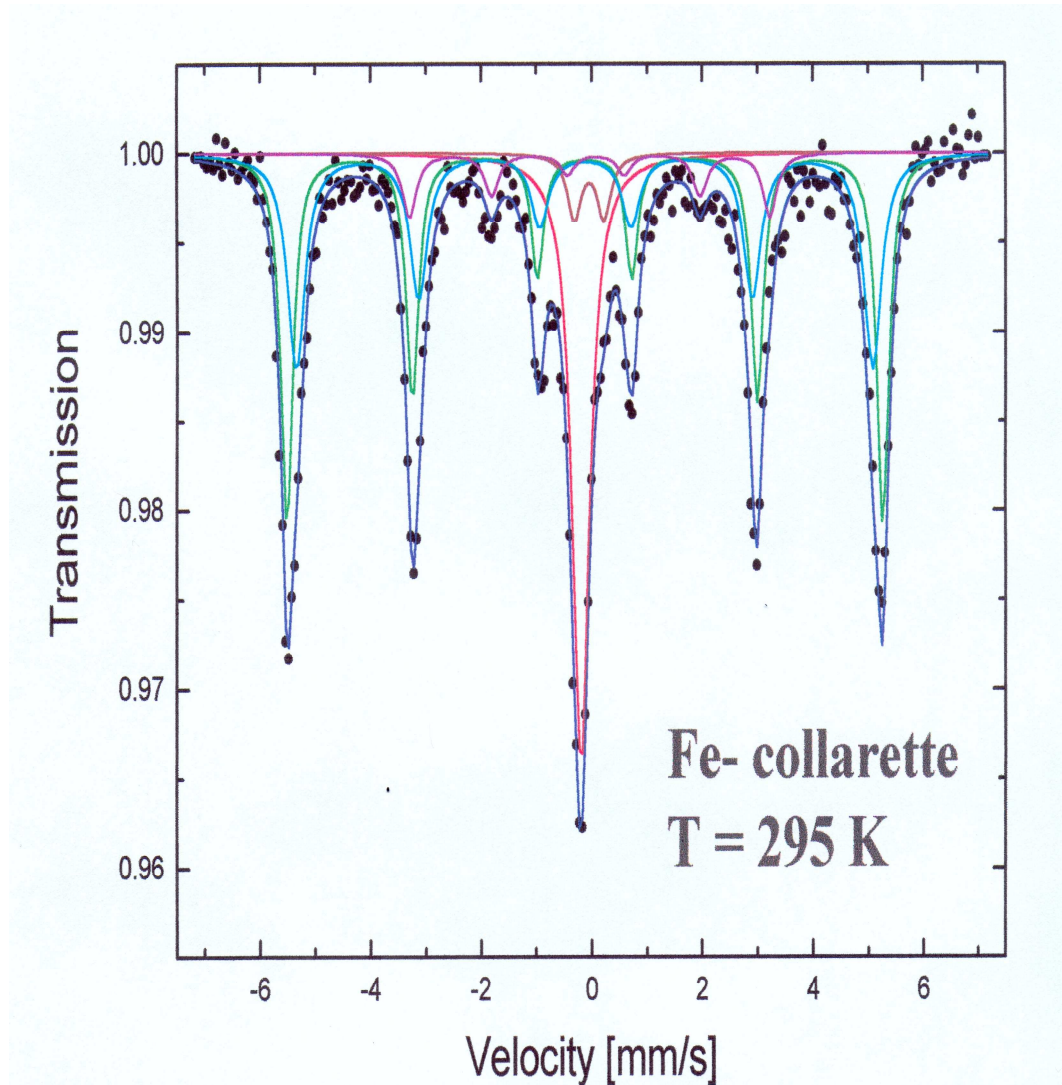


Sample treatment and average size

- Samples are sonicated in a dilution of surfactant (SDS and distilled water (5g/l))
- Magnetic separation is achieved in a field gradient of 3 kOe/cm
- Chemical etching with aqua regia is made to remove the uncovered metallic particles



Mössbauer spectroscopy



No indication of SP relaxation at room temperature

Estimated particle size 13-9 nm
(interparticle interaction)

α -Fe

Two sextets (34T and 31T)

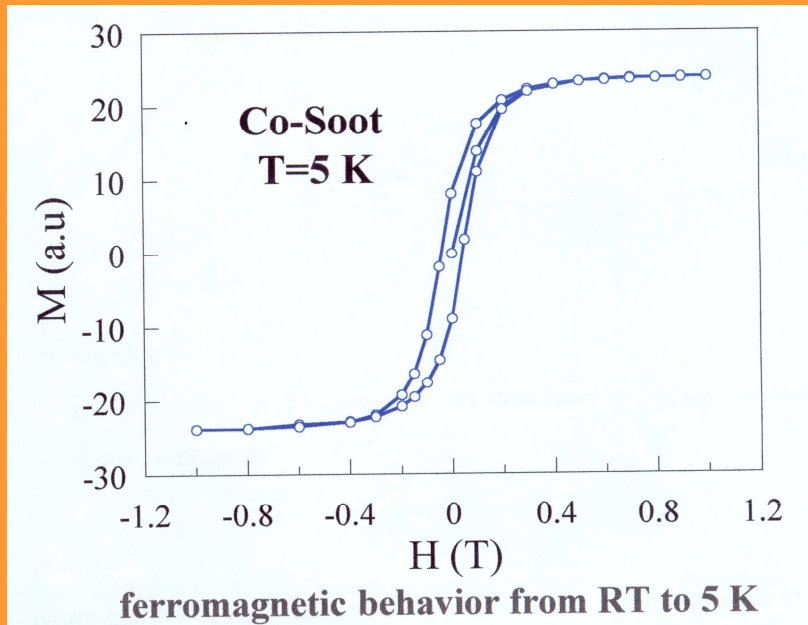
Fe_3C

A sextet (25.1 T)

γ -Fe

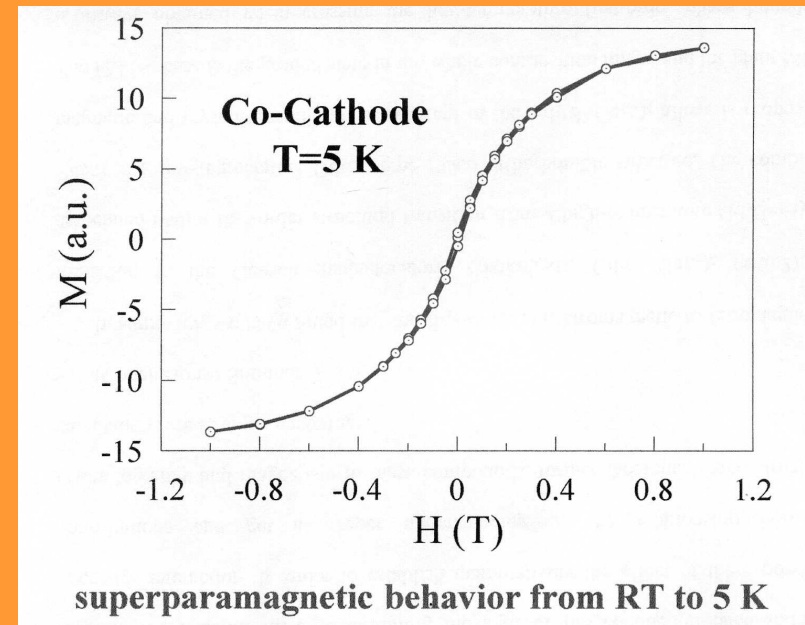
Singlet and doublet

Magnetization measurements



Blocked particles

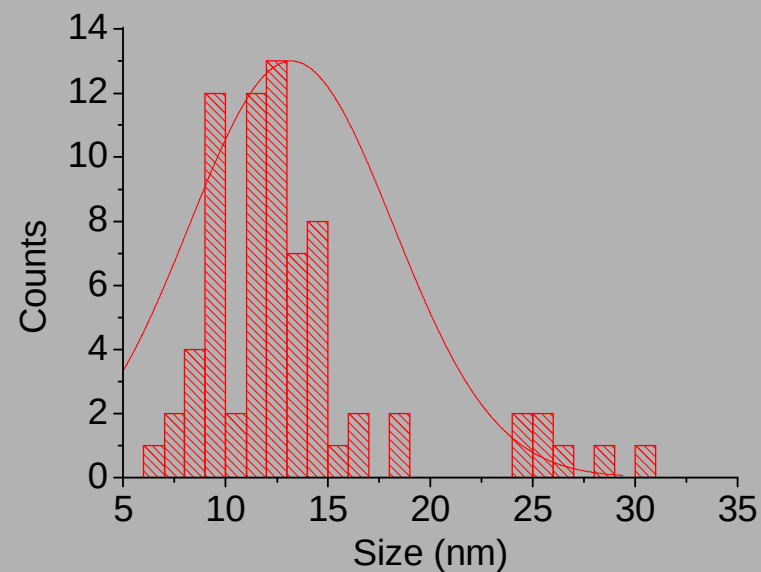
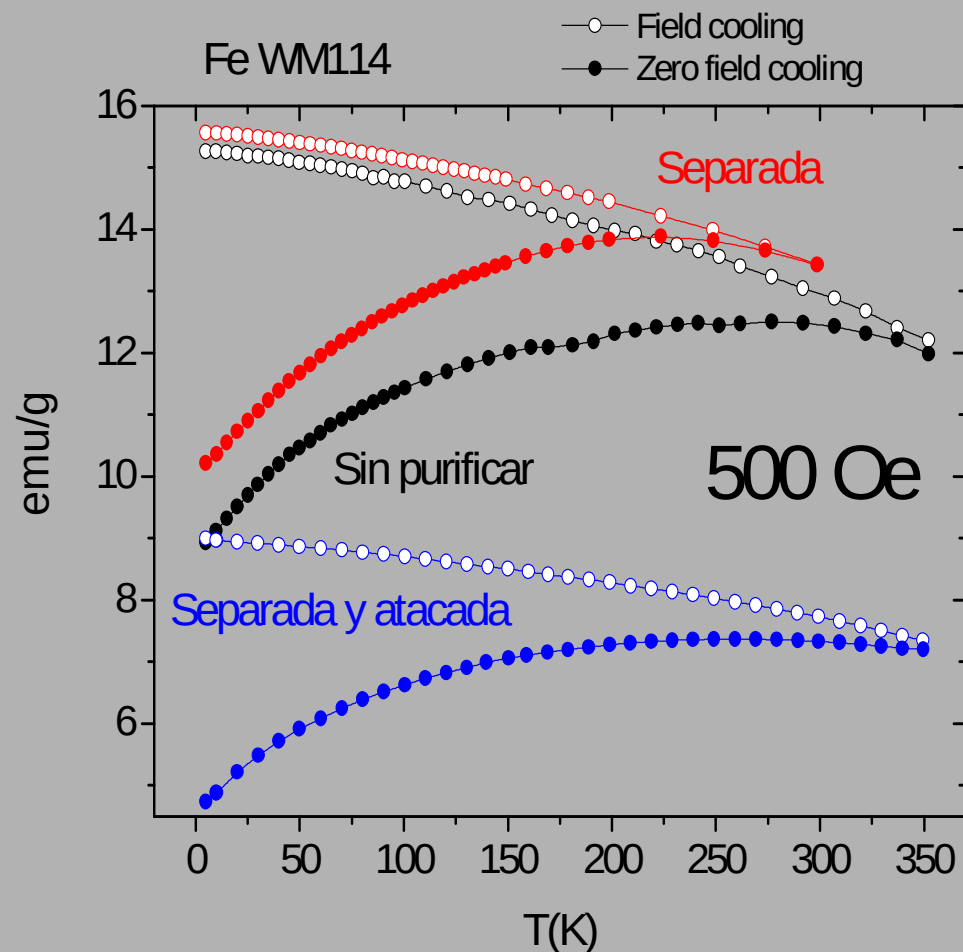
Large/correlated particles



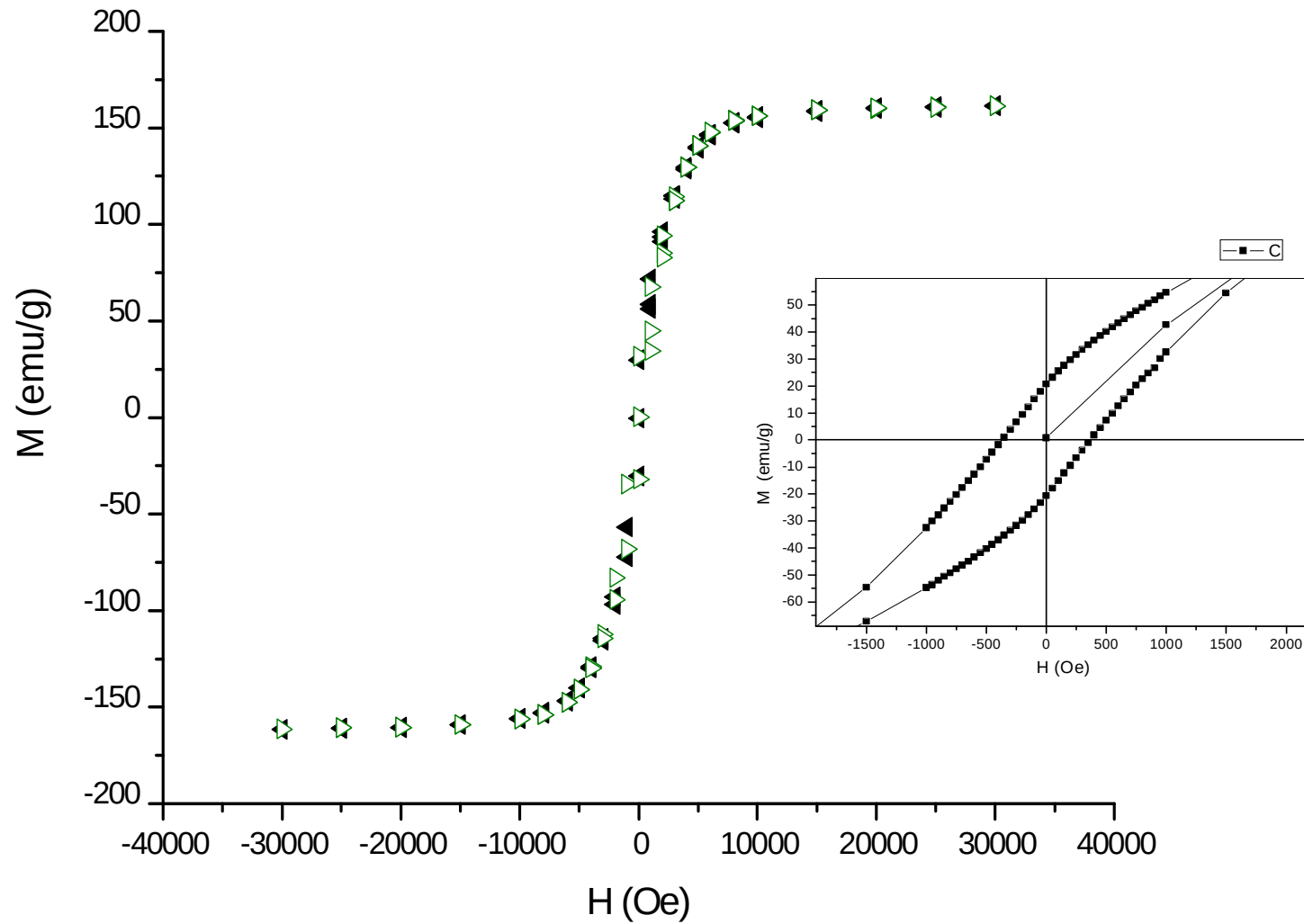
Superparamagnetic particles

Small particles

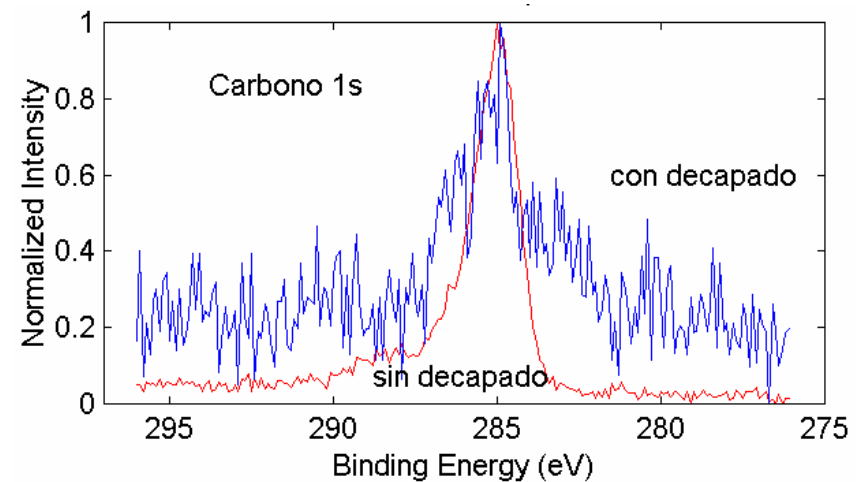
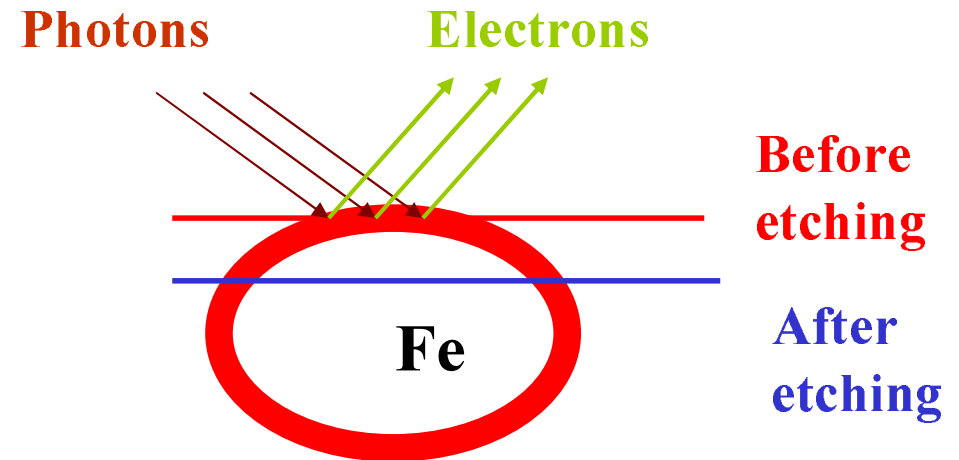
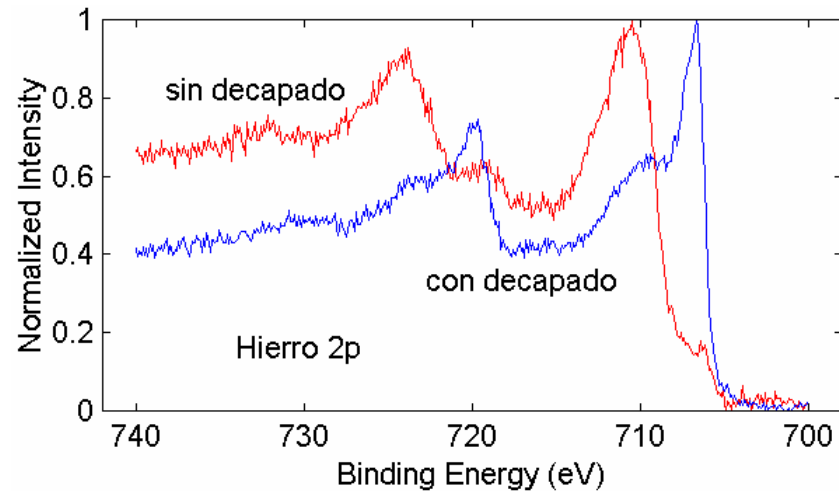
Blocking temperature is determined from FC and ZFC

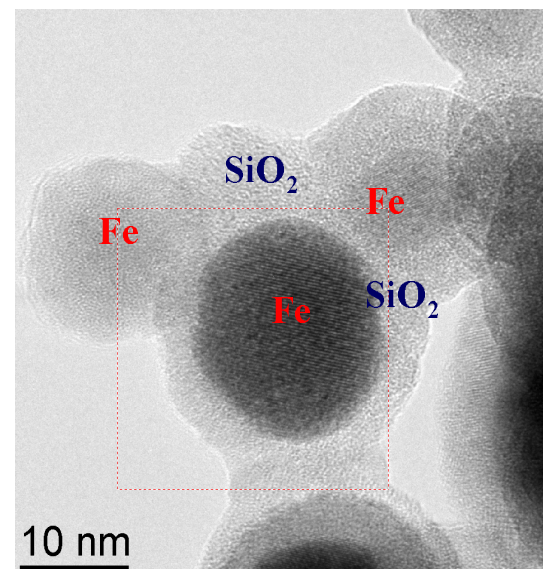
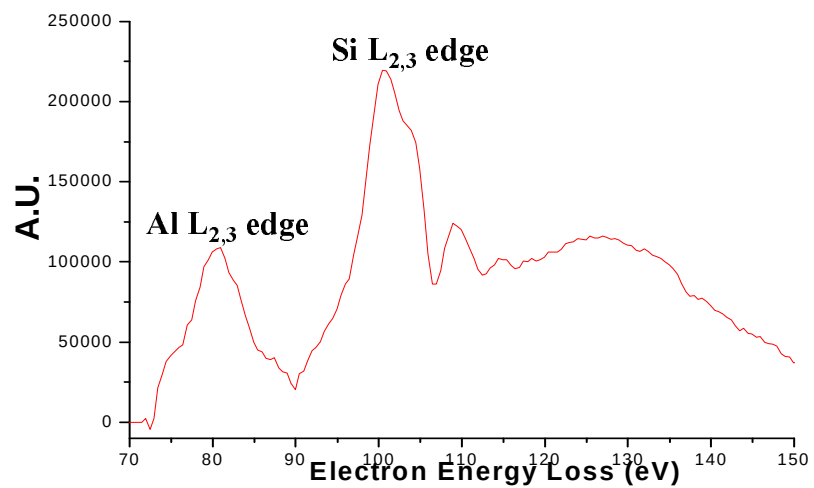
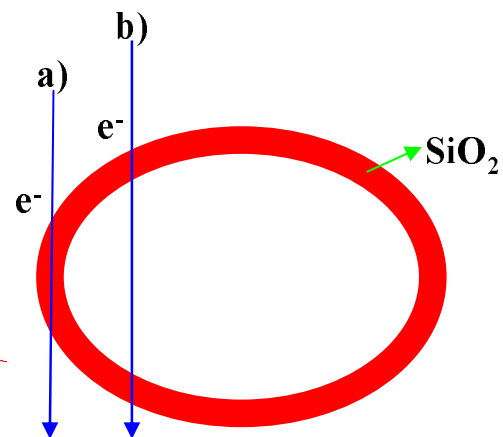
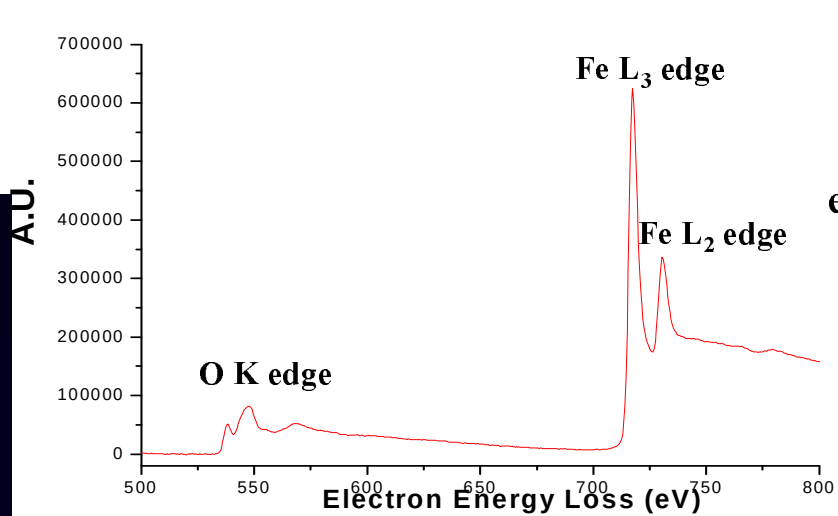


Silica encapsulated Fe nanoparticles



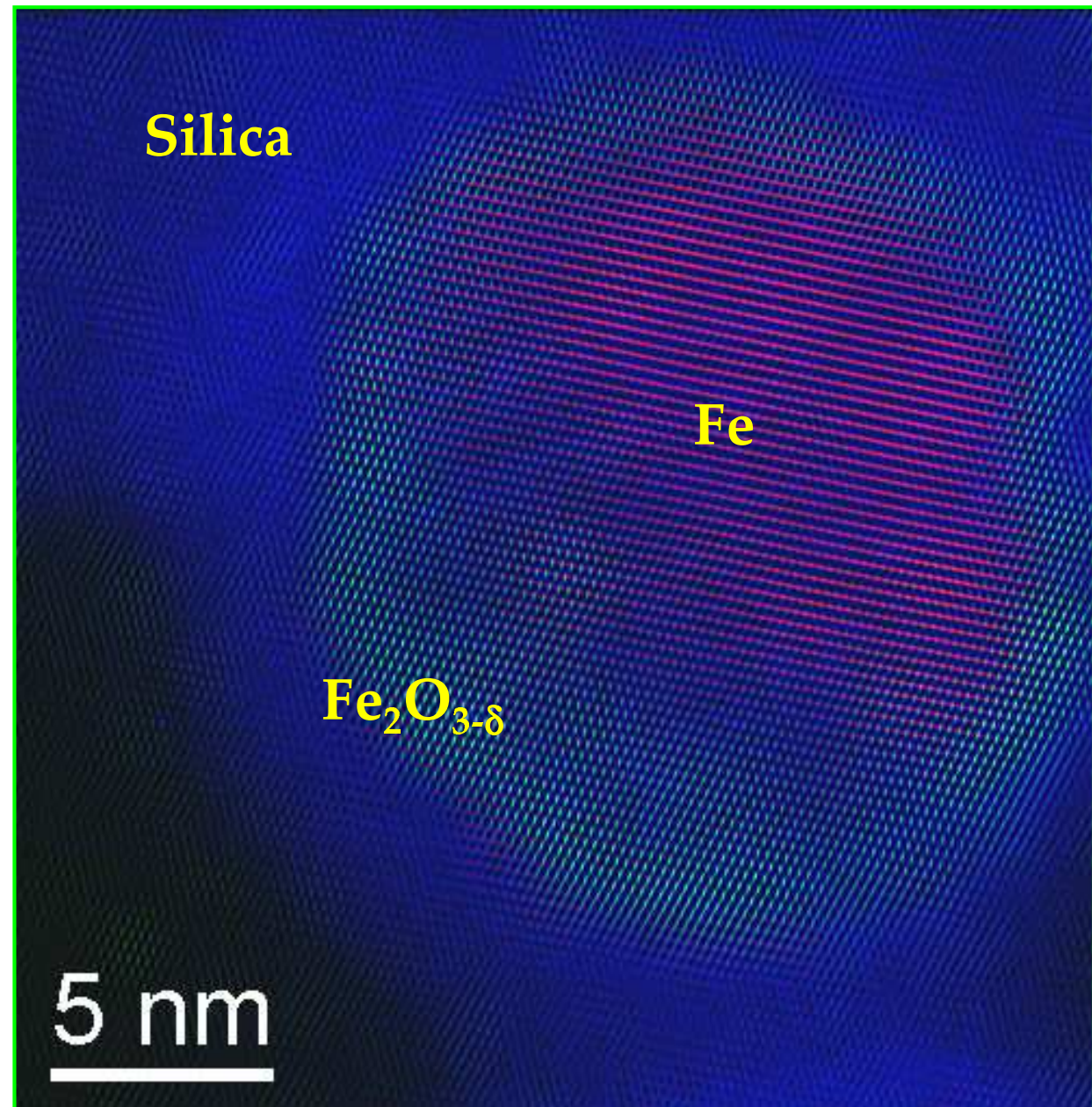
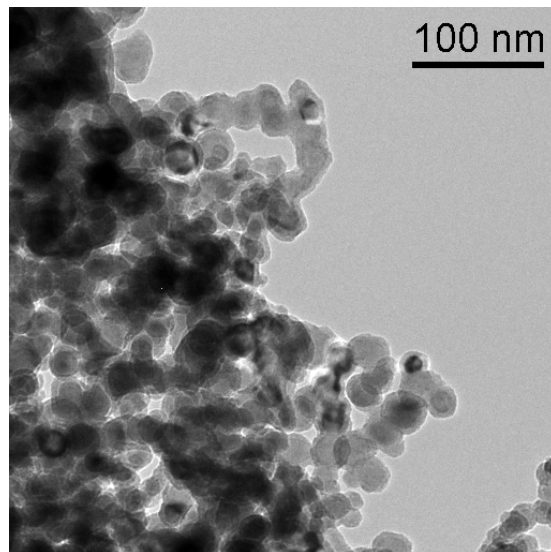
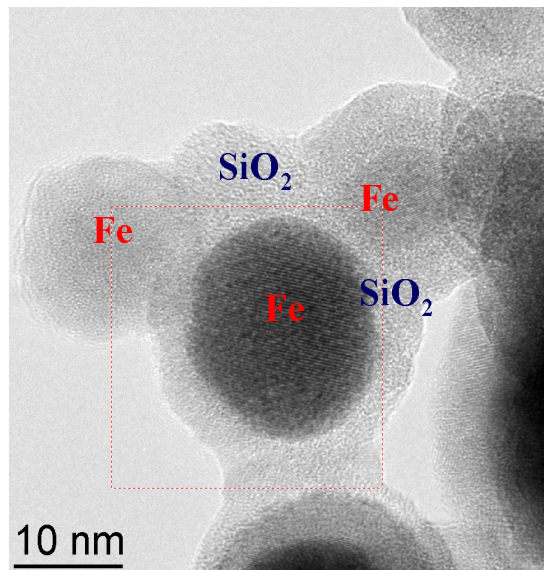
Fe encapsulated in Silica X-Ray Photoelectron Spectroscopy



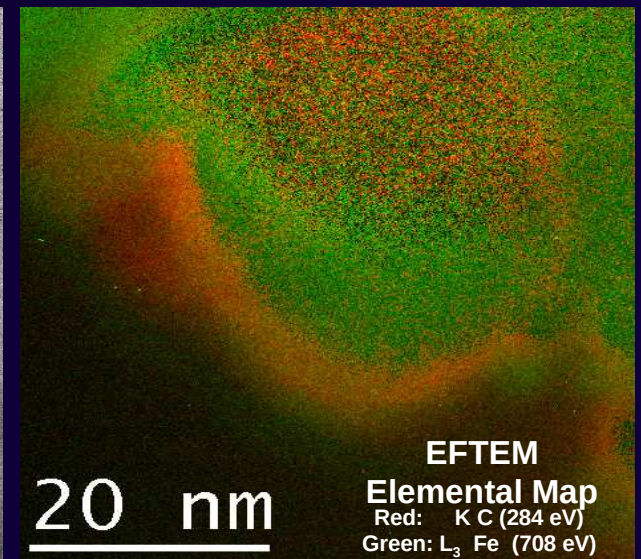
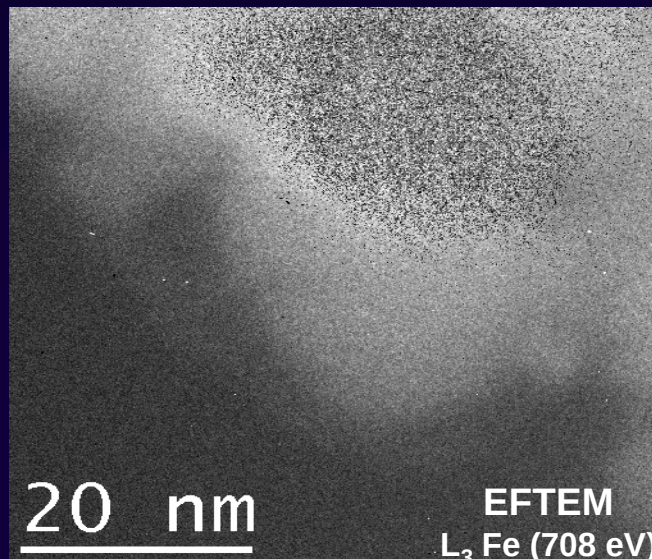
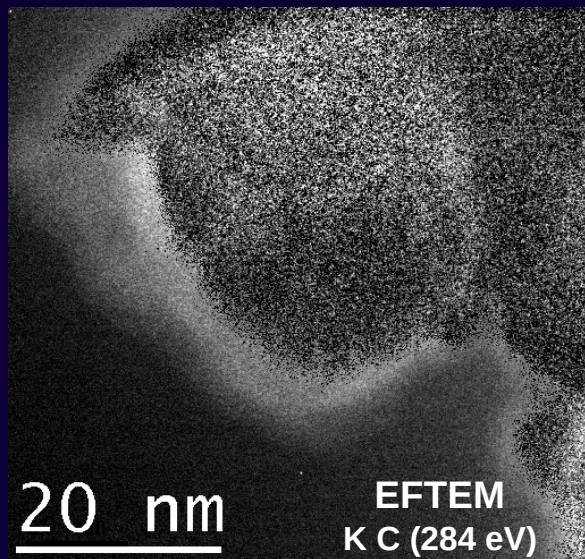
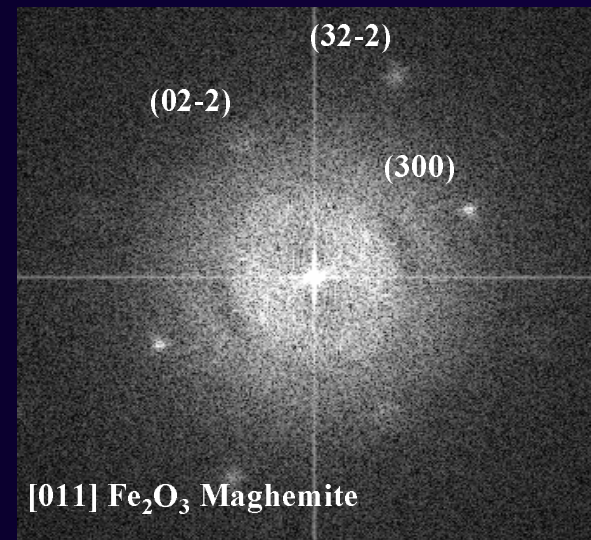
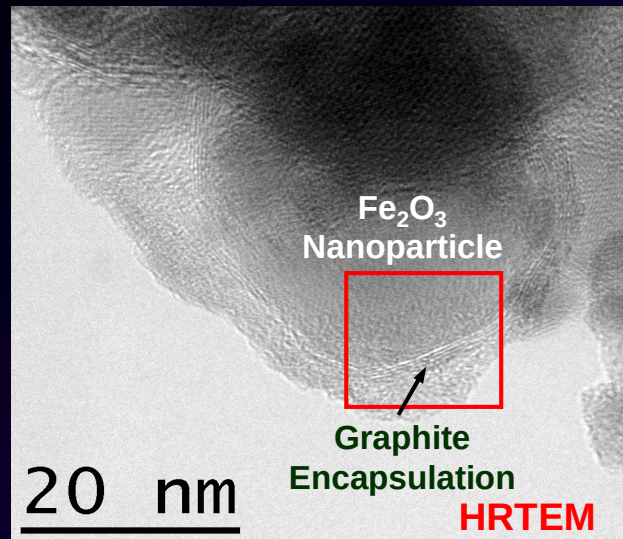


Iron nanoparticles encapsulated in Silica

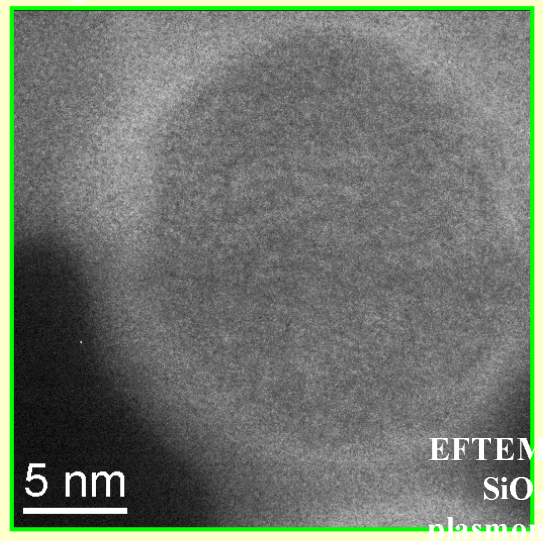
(M. Arruebo et al. Adv. Funct. Mat. 2007)



High Resolution Transmission Electron Microscopy of carbon encapsulated iron nanoparticles



Cryatalline structure at the nanoscale



Fourier
transform

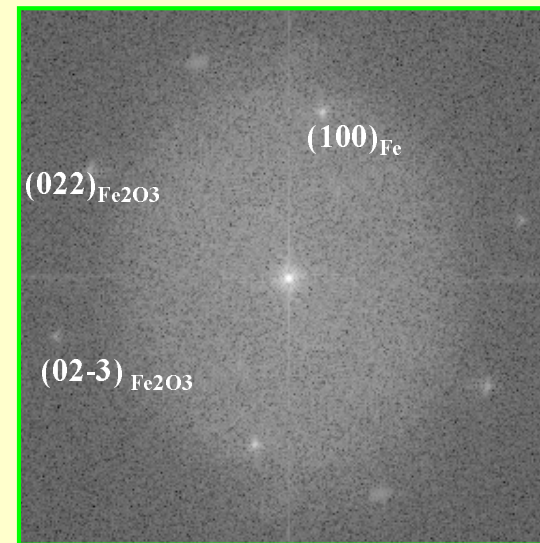
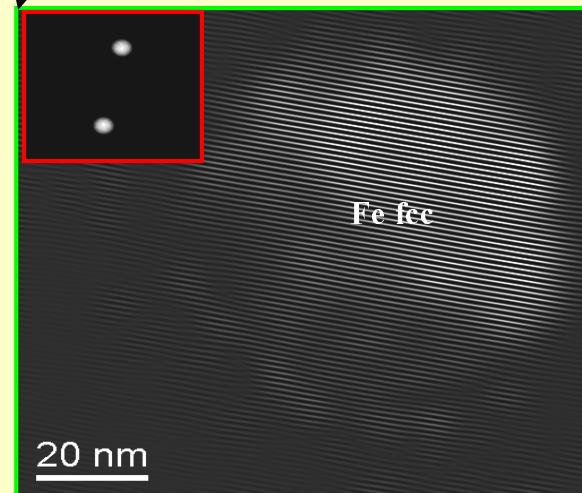
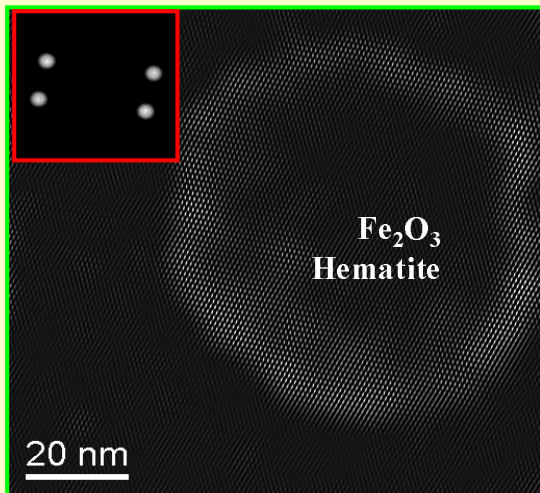


Image (real space)

Image (reciprocal space)

FILTERING



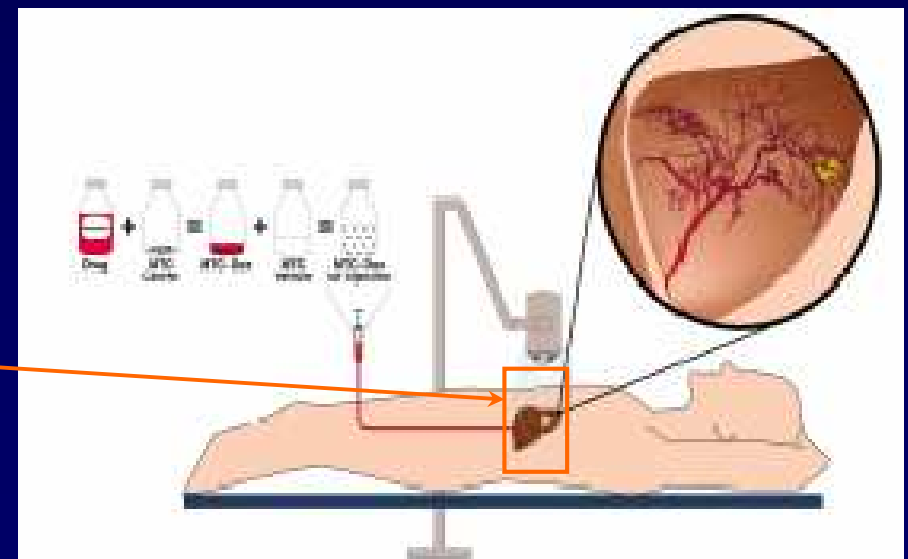
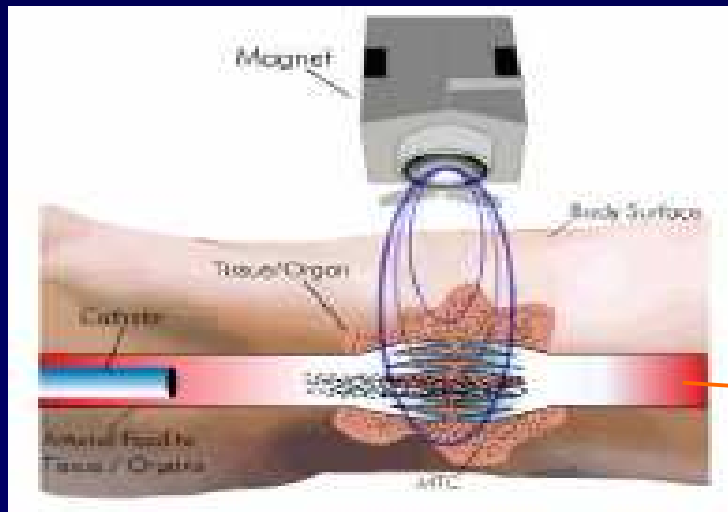
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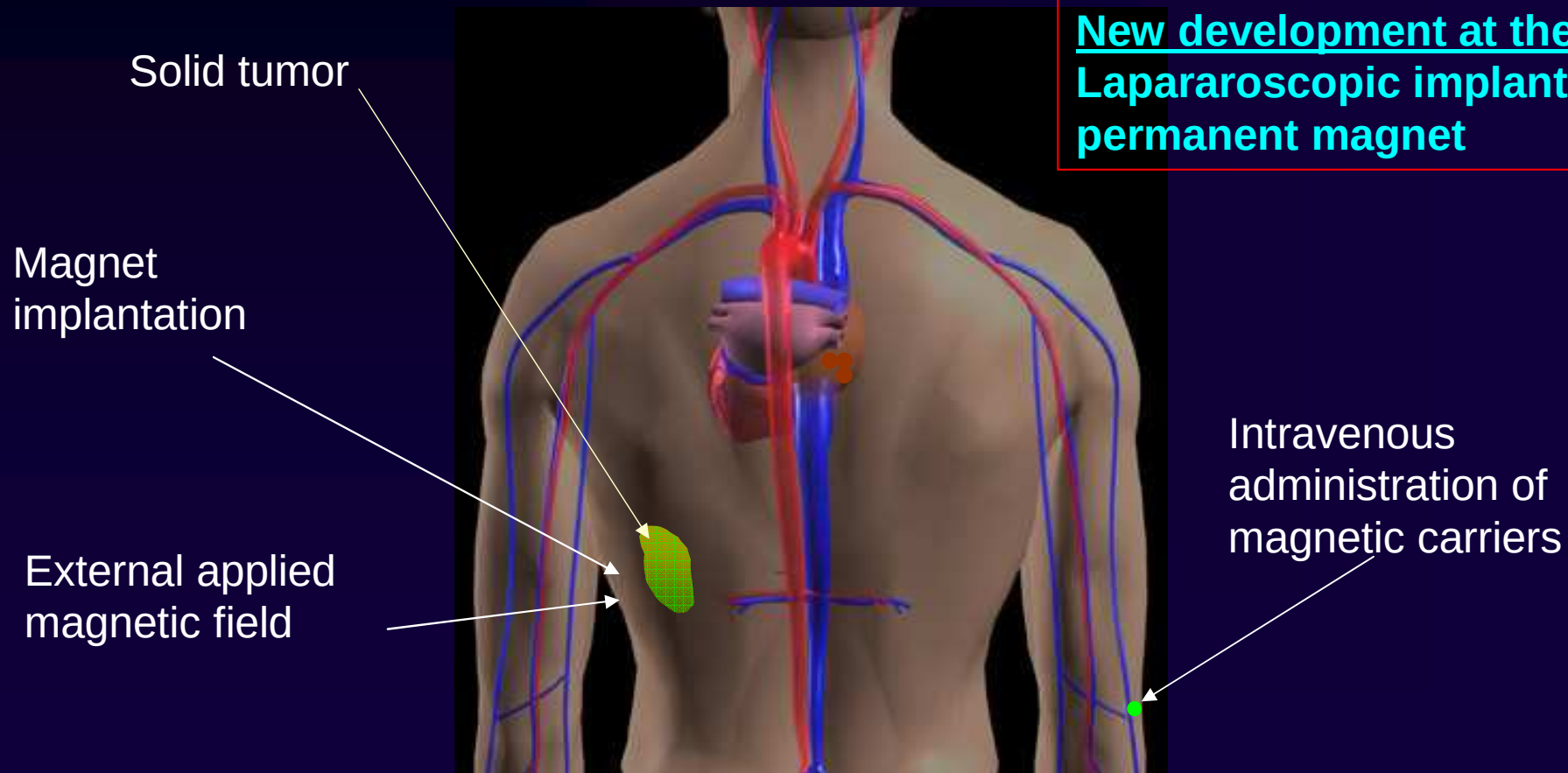
BIOFERROFLUIDS AS THERAPEUTIC CARRIERS

- They should be magnetic to be guided by applied magnetic fields
- The magnetic materials are not biocompatibles
- The nanoparticles should be encapsulated
- The surrounding material should be able to adsorb and desorb the drug

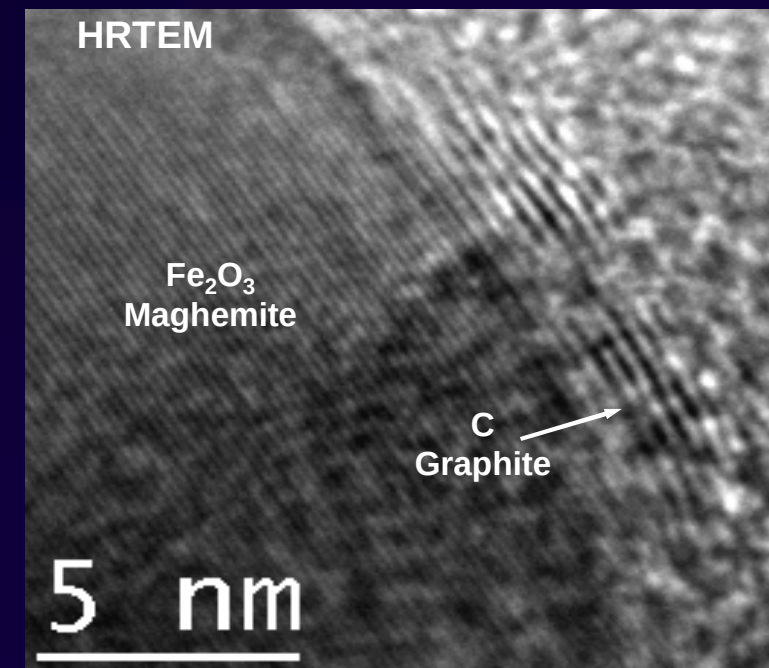
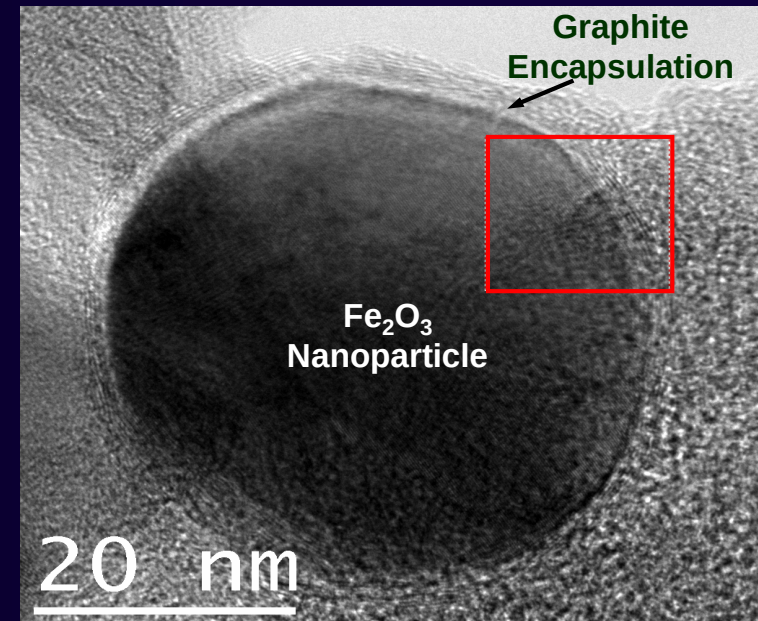


Local drug delivery by using magnetic carriers

New development at the INA
Lapararoscopic implant of a
permanent magnet

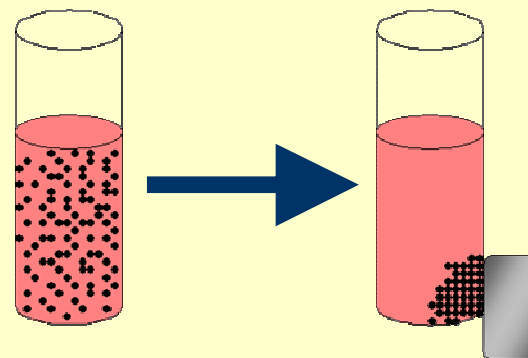
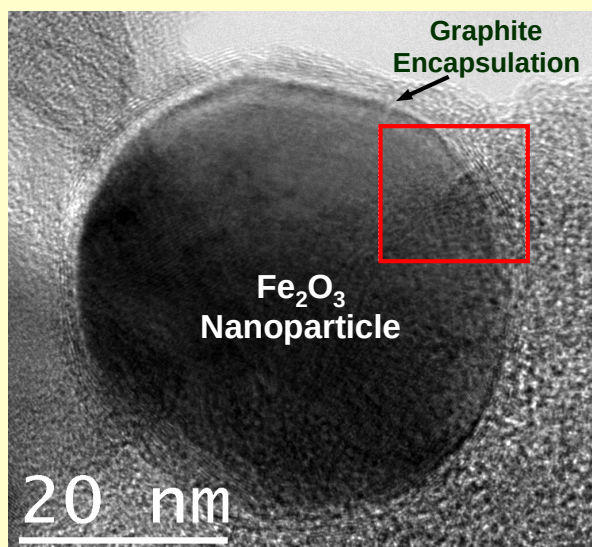
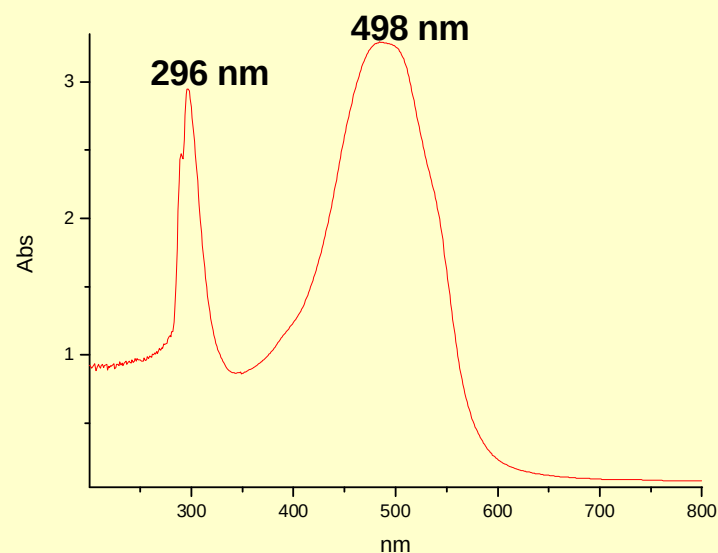
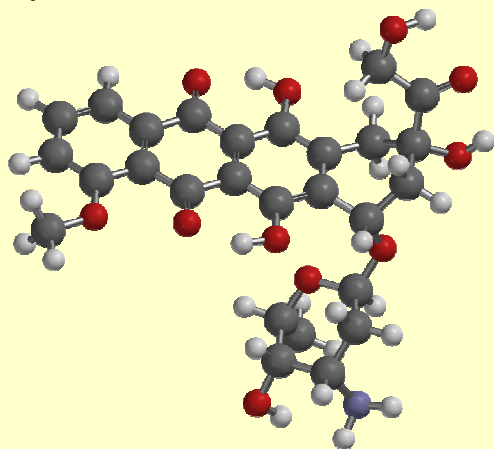


BIOFERROFLUIDS

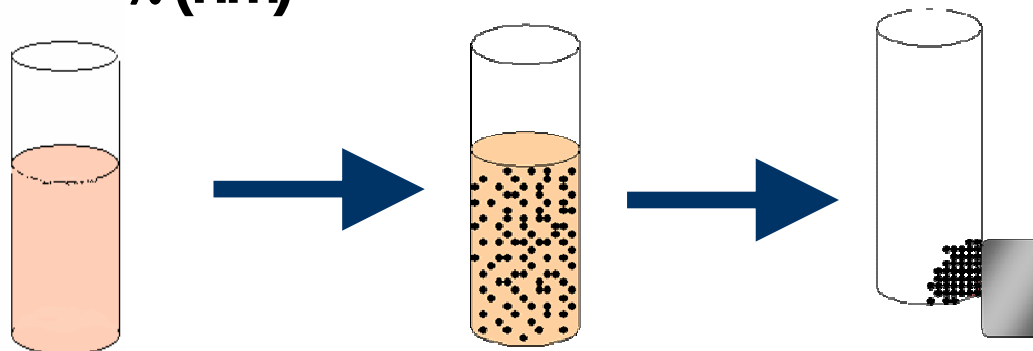
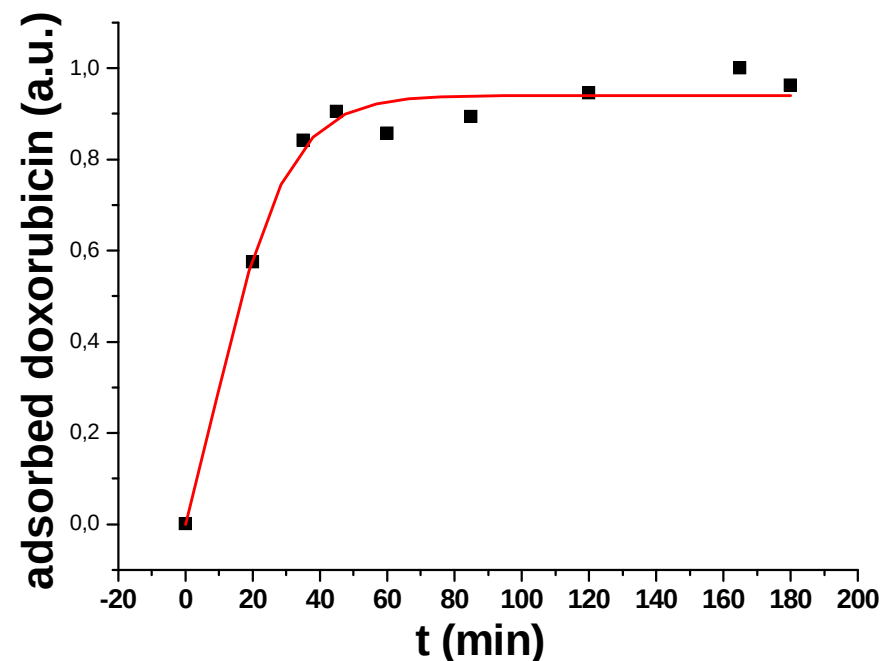
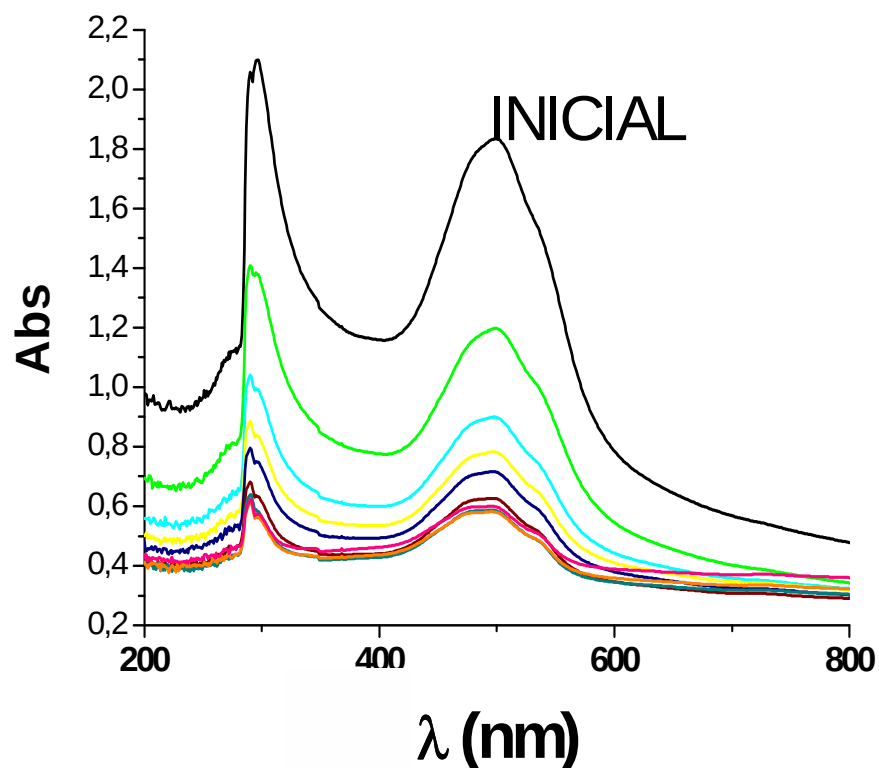


Drug adsorption and desorption of drugs

Doxorubicin (11x 13 Å)

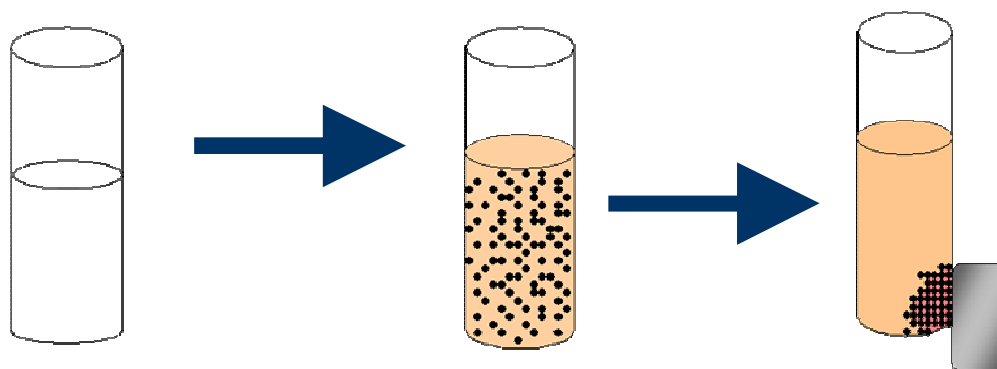
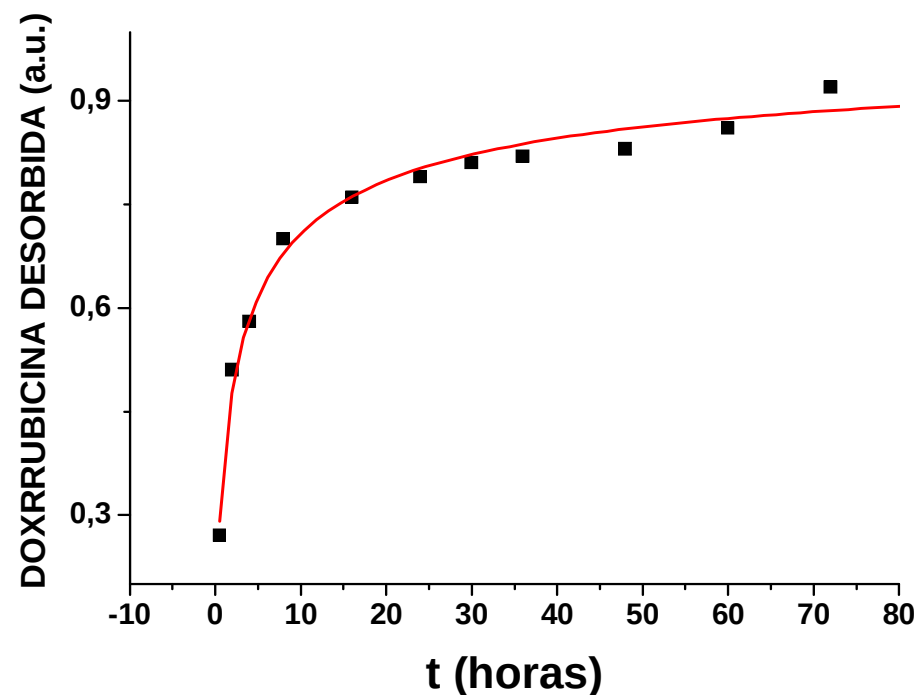
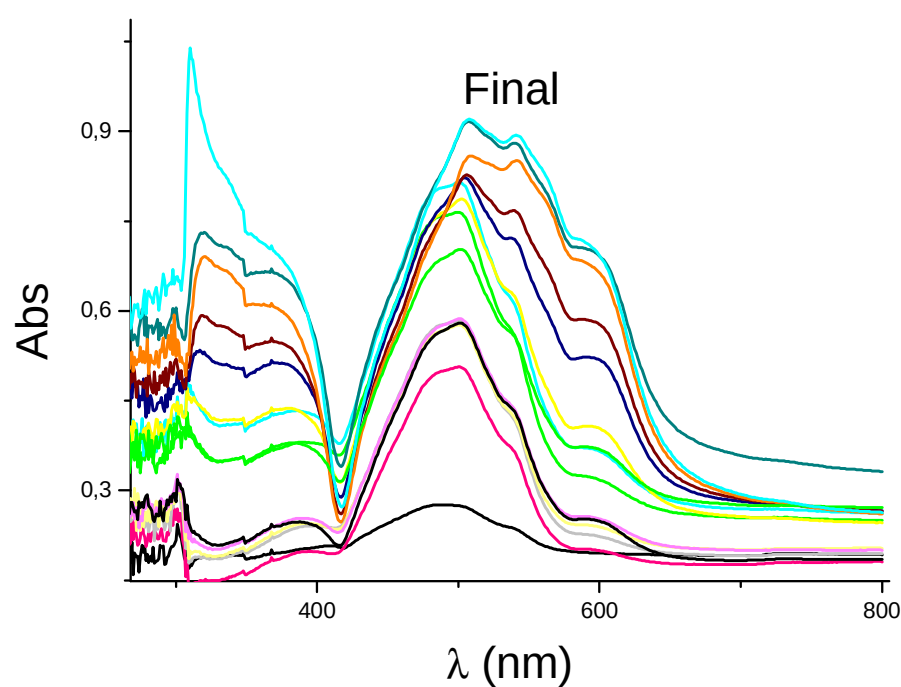


Absorbance spectra of Doxorubicin. Kinetics of adsorption



The adsorbent particles were sedimented with a 3 KOe permanent magnet, and the optical density of the supernatant measured with a UV spectrophotometer (method proposed by Kuznetsov, A. et al, (1999) J. Mag. Mat. 194, 22).

Absorbance spectra of Doxorubicin after desorption



The adsorbent particles were sedimented with a 3 KOe permanent magnet, and the optical density of the supernatant measured with a UV spectrophotometer

Nanoparticles in the blood stream

Test of biocompatibility



The particles can be seen in blood smeared as black point in May-Gruendwald-Giemsa and Perls stain. The green-blue die characteristic of iron in Perls stain is absent, which is an indication of the good encapsulation of the iron by graphitic layers. All the particles are extra-cellular, both in rabbits (circulating particles “in-vivo”) and human (mixture of the ferrofluid and blood “in-vitro”). We did not find magnetic particles neither in circulating monocytes nor granulocytes. This means that iron is well coated and that the particles have not been withdrawn from circulation for phagocytes.



HEMATOLOGIC TESTS

“In vivo” in rabbits

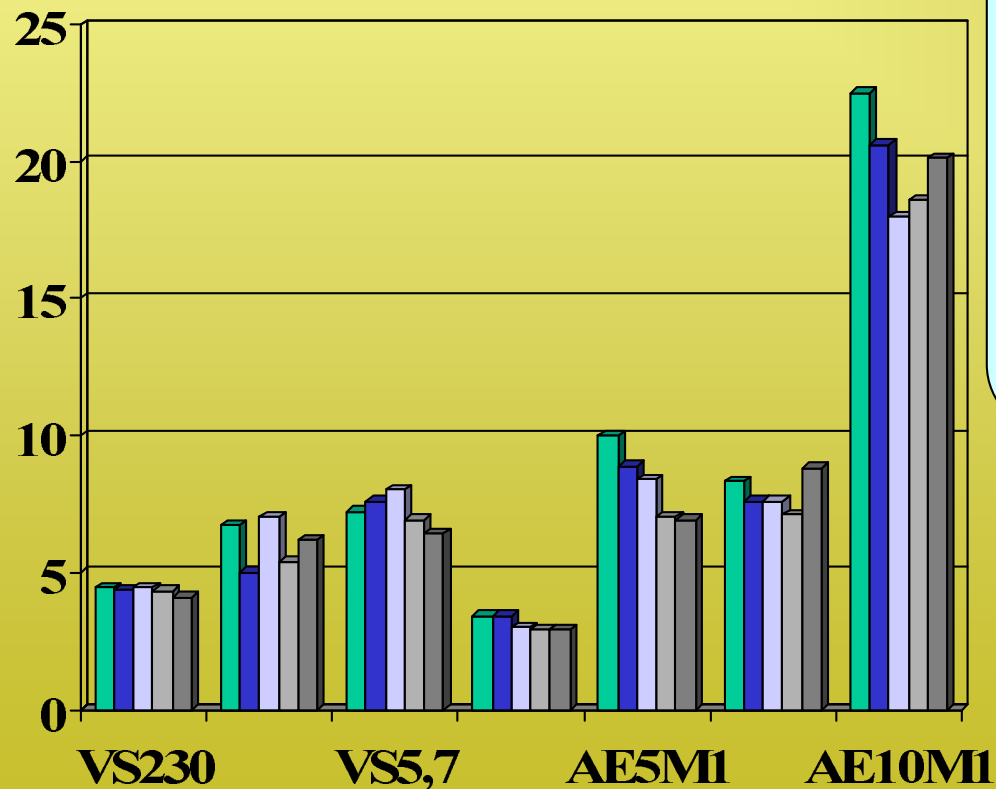
- Blood samples were taken before, and 10 minutes after the venous injection of the particles.
- 1 ml of Nanoparticles at a concentration of 12.5 mg/ml of Gelafundine injected in rabbits do not modify blood and plasma viscosity.
- Erythrocyte aggregation remains within normal limits, with very small variations without clinical significance.

“In vitro” in human blood

- We have tested human blood at different concentration of particles (5 ml of blood and 0, 0.06, 0.12, 0.24 and 0.5 ml of ferrofluid). We obtained normal values in all tests, differing less than 10% in relation to our own series of normal controls.

RESULTS IN HUMAN BLOOD

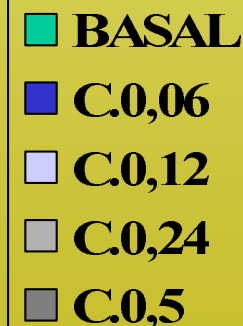
	VS230	VS 23	VS5,7	AE5M	AE5M1	AE10M	AE10M1
BASAL	4,44	6,7	7,2	3,4	10	8,3	22,5
C.0,06	4,36	5	7,6	3,4	8,9	7,6	20,6
C.0,12	4,45	7	8	3	8,4	7,6	18
C.0,24	4,33	5,4	6,9	2,9	7	7,1	18,6
C.0,5	4,1	6,2	6,4	2,9	6,9	8,8	20,1



AE = Erythrocyte aggregation
(M: stasis, M1 minutes under low shear rate)

VS = Blood viscosity Shear rate (s^{-1})

C= Particles concentration (mg/ml)



OUTLINE OF THE TALK

Biomedical applications of magnetic nanoparticles I: Drug delivery

- Introduction

- Encapsulated nanoparticles: preparation and characterization: Morphology, Structure and Magnetism

- Bioferrofluids for local drug delivery:

 - i) In vitro experiment: blood biocompatibility and drug carrier

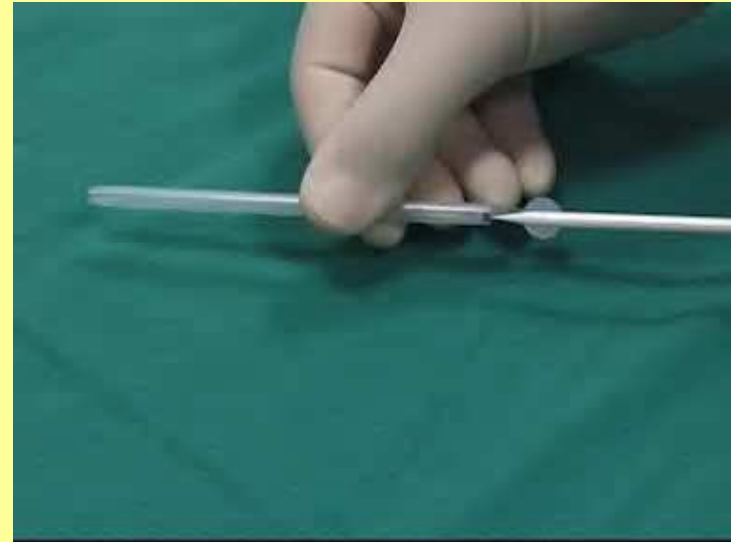
 - ii) Invivo experiments: magnet implant and magnetic localization

Surgical model: Percutaneous insertion of a permanent magnet



The rabbits were submitted to general anaesthesia with endotracheal intubation.

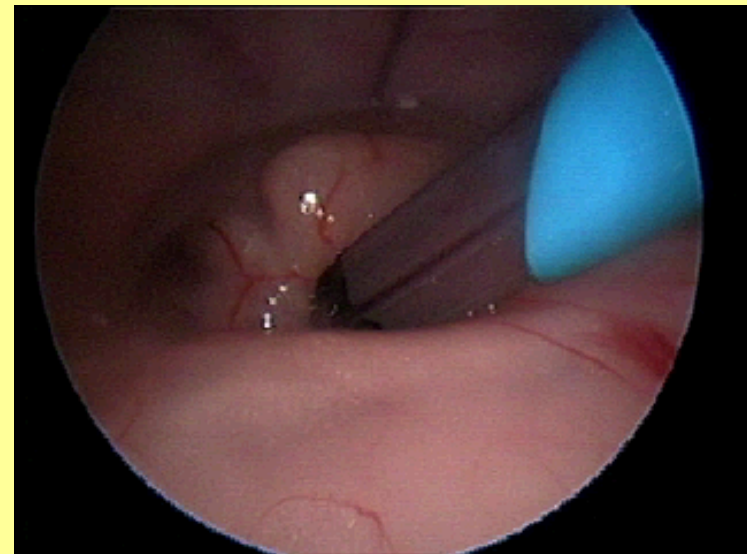
A laparoscopic optic was introduced by using a 5 mm trocar.



Optical Microscope Image of the permanent magnet coated with gold.



Under endoscopic control, the permanent magnet was implanted in the lower pole of the right kidney





Bioferrofluid

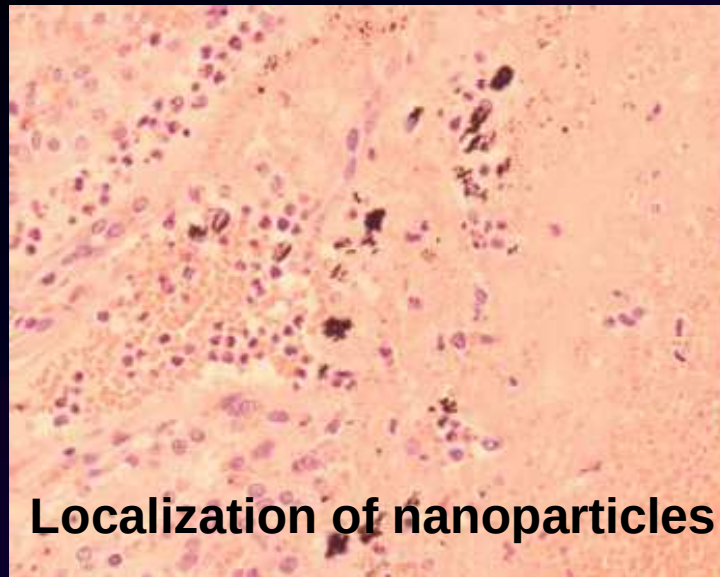
125 mg of our nanoparticles were suspended in 100 ml of **gelafundine**

1 ml of the fluid were injected intravenously in the marginal ear vein of the rabbit.



In coll. Veterinarian Clinical Hospital

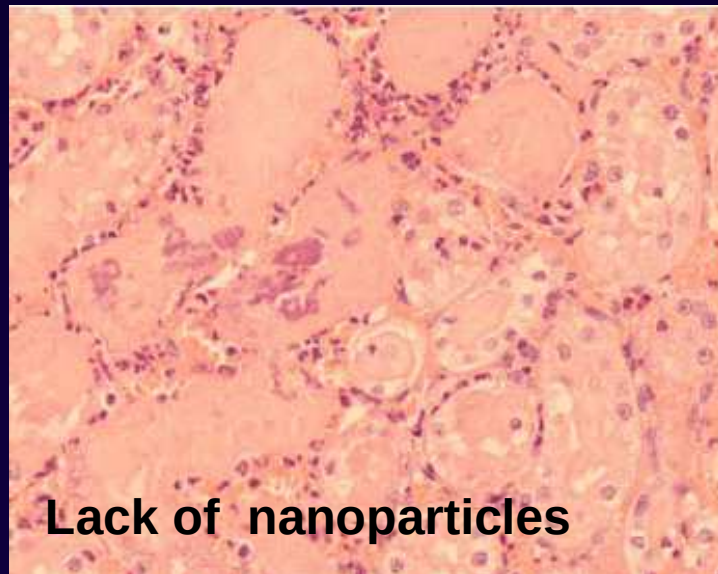
Magnet implant in the left kidney



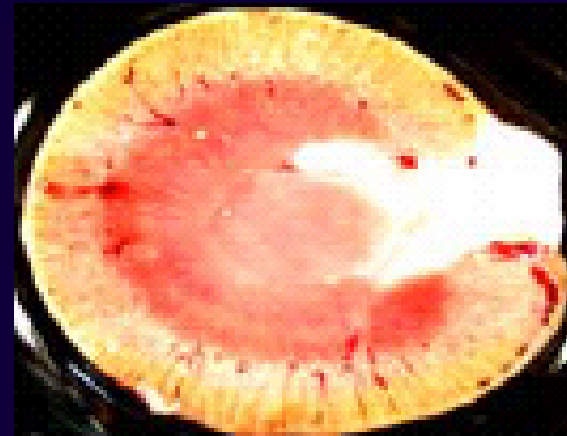
Localization of nanoparticles



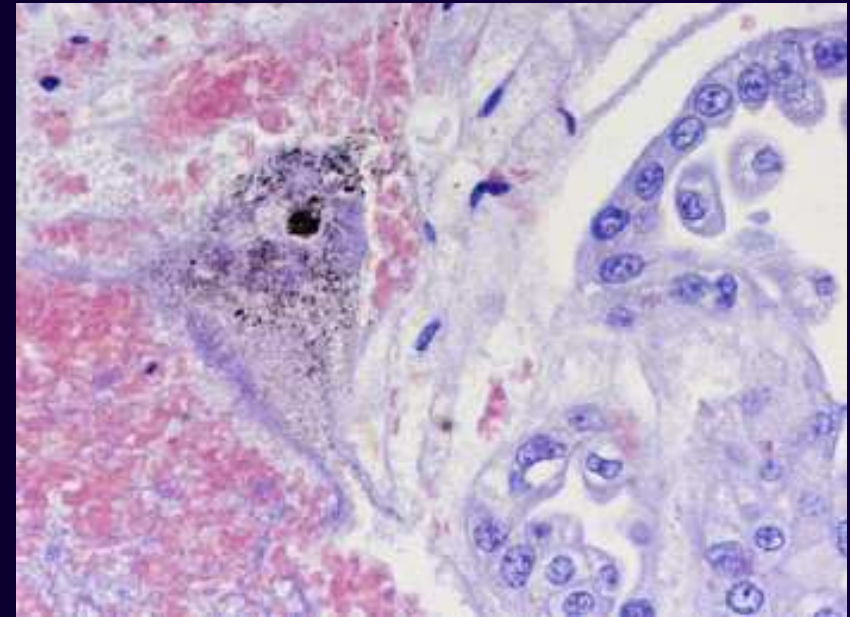
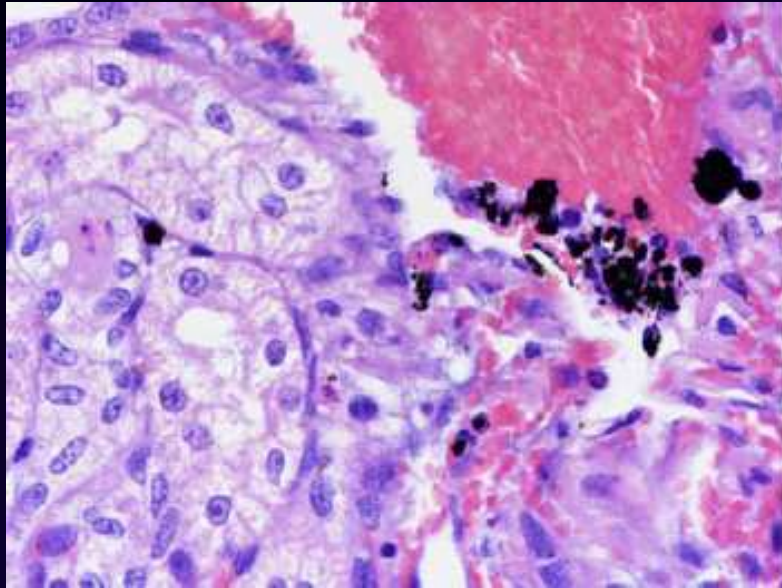
Right kidney without magnetic implant



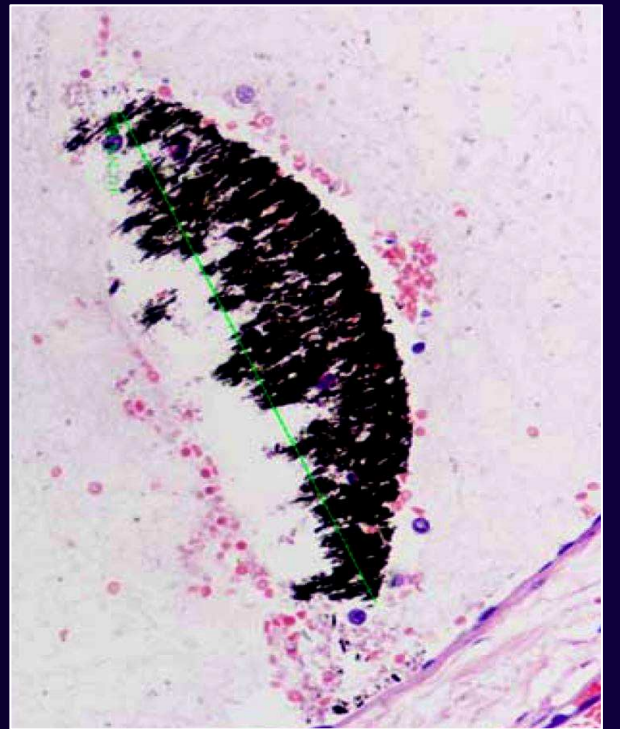
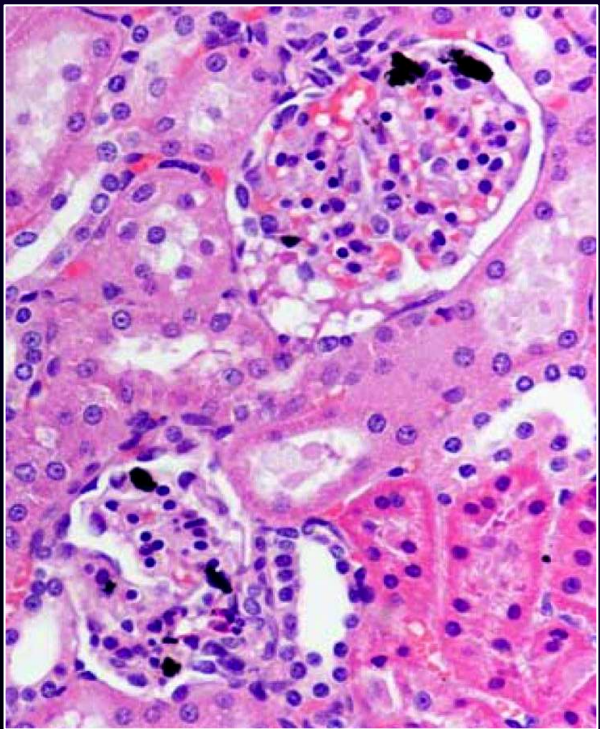
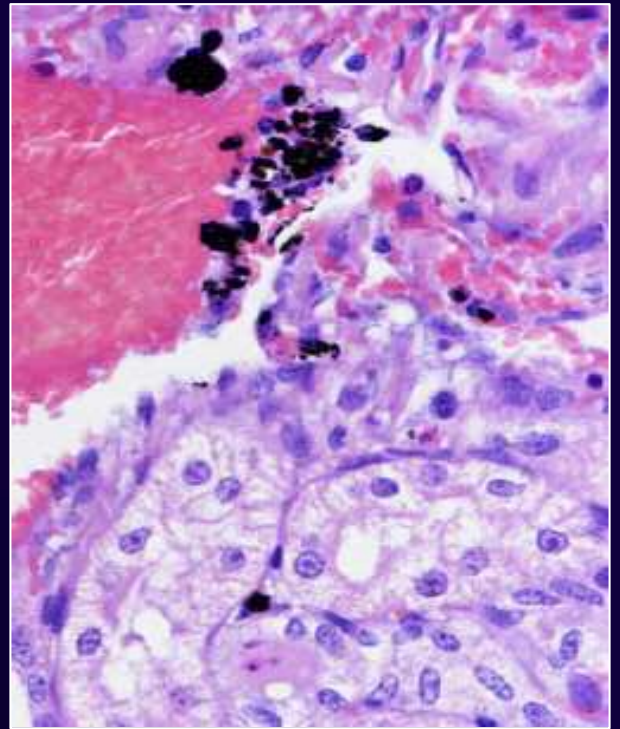
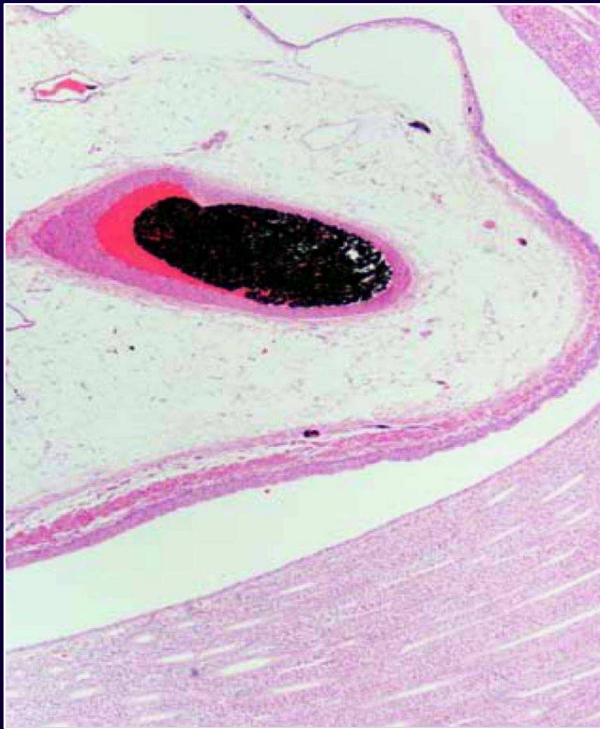
Lack of nanoparticles

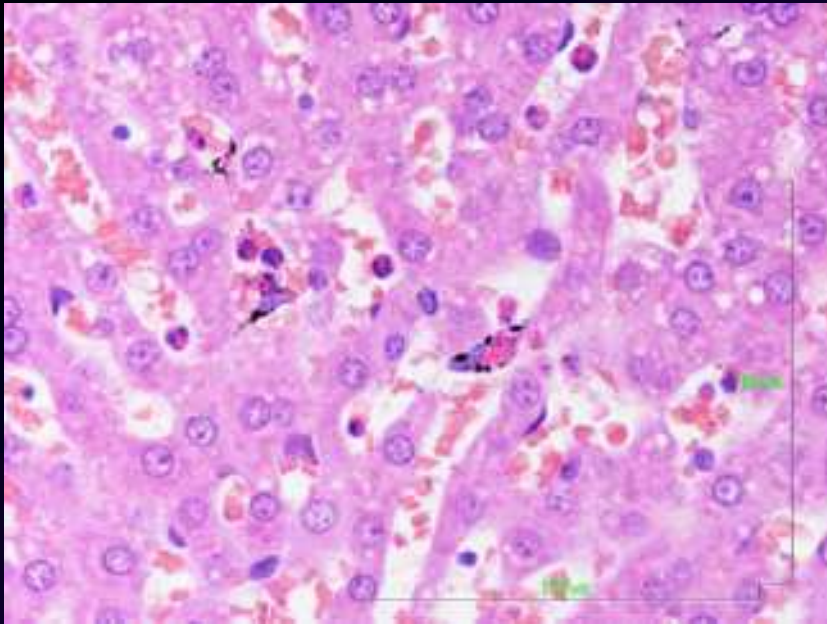


Kidney with magnetic implant:

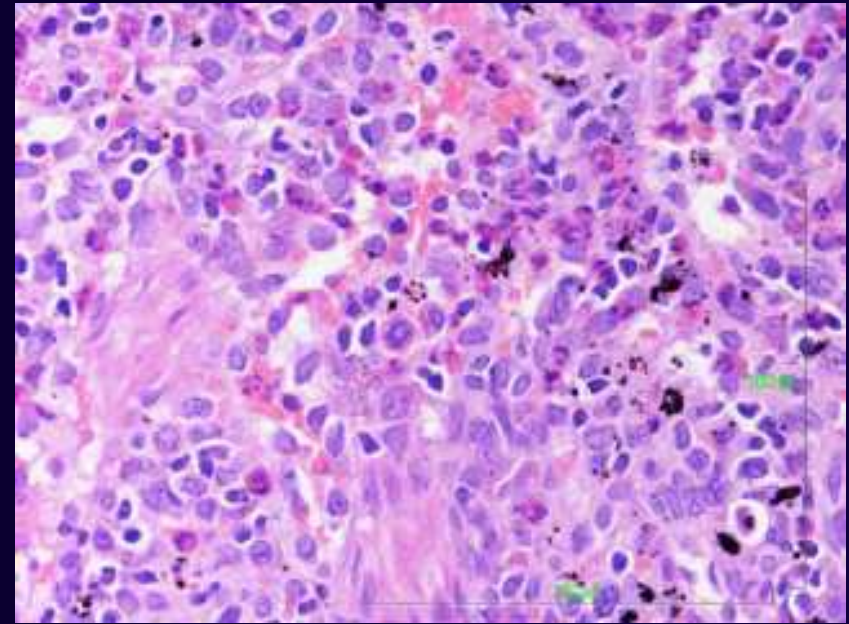


The advantage of this method is the huge field gradient obtained (30 T/m)

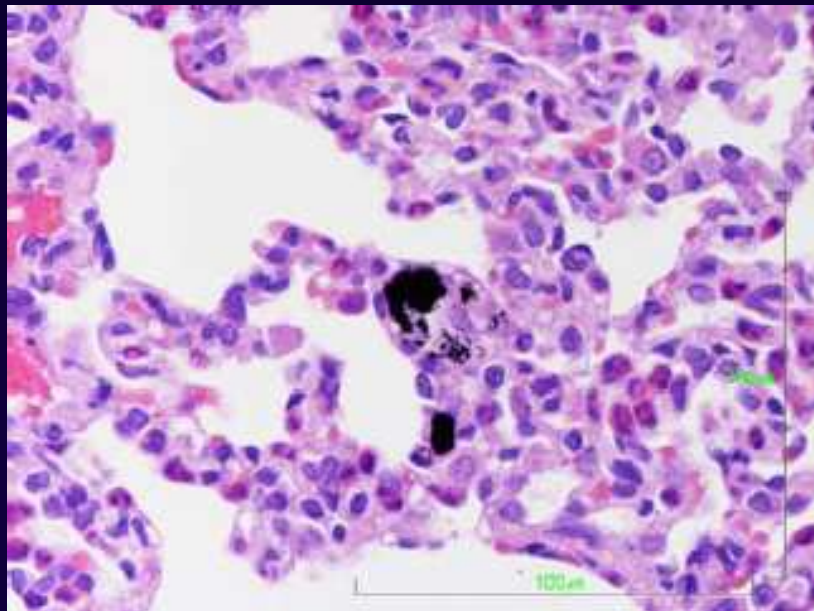




Liver Capture in Kuffer cells



Nanoparticles in spleen

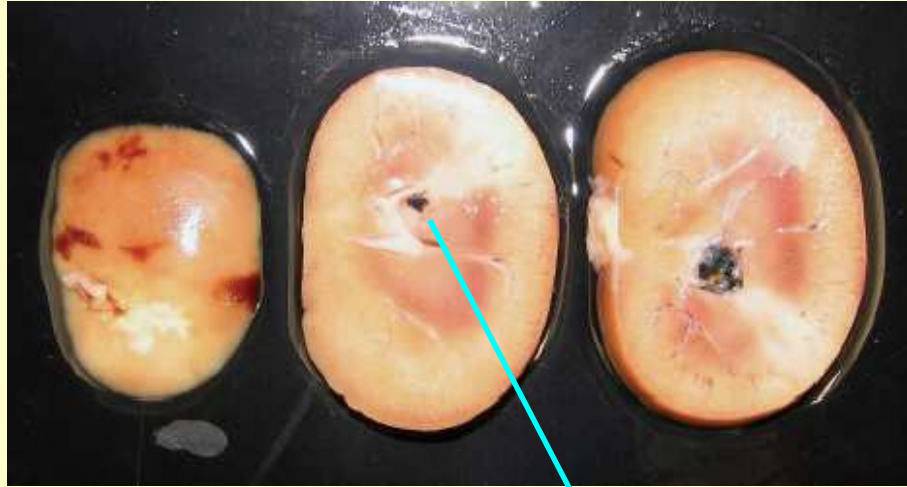


Reduced concentration of nanoparticles in lung

**Macrophagy
capture in
organs**

The ultrasound scan displays the image of a gold coated magnet inserted inside a kidney. After the injection magnetic nanoparticles remain attracted to the magnet, the amount of metallic then increases and the echo of the ultrasound is broadened





**Ecoguided puncture
for drug delivery to
avoid macrophages
capture**

