



A concept on self regulatory drug transport System in field of Novel drug delivery system: An Review

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ABSTRACT:

Smart drug delivery systems (DDSs) with stimuli-responsive features have been developed as a result of advances in biomedical nanotechnology. These precisely designed nanoplatforms can improve patient compliance by lowering side effects and increasing the effectiveness of therapeutic targeting. However, due to a lack of established production processes, expertise with toxicity evaluation, and a clear correlation between pre-clinical and clinical investigations, these sophisticated stimulus-sensitive nano-DDSs are still not authorized for clinical usage. The goal of advanced drug delivery systems is to produce a medication release profile that is most appropriate for the physiological state, stage of sickness, or circadian rhythms of each patient. The main component of these systems is stimuli-responsive polymers, which detect variations in a certain characteristic and initiate the delivery. It has been described how recent developments in stimuli-responsive polymer-based open-loop and closed-loop control systems have progressed and the difficulties encountered during clinical translation. Novel technical developments and therapeutic techniques to enhance traditional therapies include intelligent drug-delivery systems. These systems are designed to address different clinical disorders that need different pharmacological therapy. They range in terms of approach, intricacy, materials, and patient compliance. Pulsatile drug delivery, responsive delivery systems, enzymes, and antibodies that are intended to carry out different tasks such as the identification, separation, and/or release of therapeutic substances for the treatment of disease are all included in this new class of intelligent drug delivery. When designing these intelligent delivery systems, controlled release, target specificity, mass transfer, on-demand dose modification, and pharmaceutical agent stability are the most important factors to take into account. Drug delivery systems provide longer life expectancies and better quality of life as they are created and improved.

KEYWORD: Drug delivery system, Thermo responsive, Polymer, Gluco Watch, Insuline Pump

INTRODUCTION:

The traditional method of administering medication to patients is ineffective and frequently results in harmful side effects. Over the past several decades, there has been a significant advancement in regulated and targeted drug delivery systems, which has raised expectations for the treatment of numerous complex illnesses with the least amount of adverse effects. The intelligent medication delivery system is one type of such system. Drug release rates can be changed by intelligent drug delivery devices in response to a physiological requirement.

This technology helps to conserve medication that is quickly degraded, enhance patient compliance, and keep drugs within the therapeutic range with a single, localized drug administration to a specific compartment [1].

Various nanomaterial's provide exciting advantages and new potential for the smart DDSs because of their distinct nanoscale characteristics and particular bio-functions. For instance, disease-specific binding and regulated release behavior are two features of DDSs based on nanoparticles. Even yet, a number of innovative properties of nanomaterial's that are being exploited as smart medicine carriers have been discovered and described by current research and reviews.[2-3]

This new type of intelligent, responsive, or smart delivery systems is intended to carry out many tasks, such as therapeutic drug release, isolation, and/or detection for the treatment of different illnesses. The majority of intelligent drug delivery systems are based on stimuli-responsive polymers, which are reversible phenomena that perceive a change in a certain characteristic and trigger the distribution. Many materials, including lipids, polymers, and inorganic compounds, have been designed to regulate drug release in this way, leading to the creation of intelligent drug delivery systems[4-5].

Only a small number of them have been successfully implemented in clinics for practical uses [6]. In our opinion, in order to guarantee clinical potential for future marketing, a number of crucial factors need to be considered (Figure 1).[7]

FIGURE 1

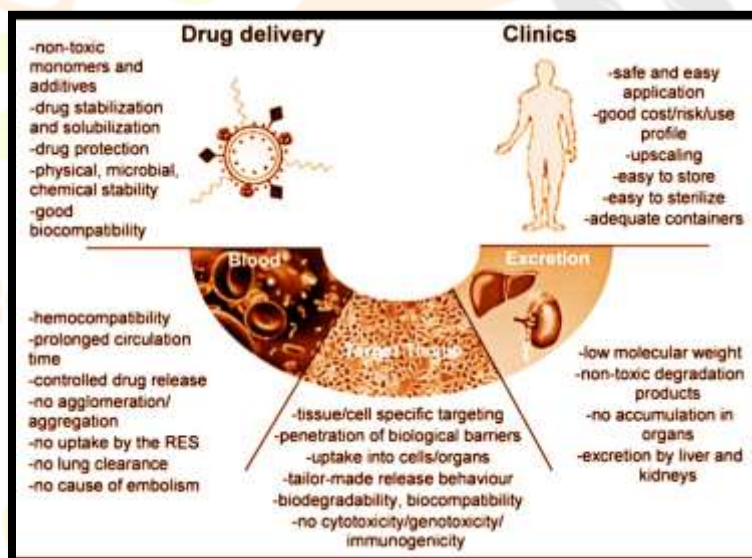


Figure 1. Essential components for design of polymeric drug delivery systems

Materials that can respond to stimuli and cause a reaction that is predictable, repeatable, proportionate to signal strength, and reversible are necessary for the creation of intelligent DDS. Rarely are these materials offered for sale. As a result, the design phase of the development process starts even before the creation of a new material, which is often a synthetic or semisynthetic polymer.[8,9]

BENEFITS:

- The plasma medication concentration is kept within the therapeutic range with the aid of this technology.

- Drugs can be delivered using intelligent drug delivery systems in accordance with physiological requirements.
- Boost adherence from patients.
- Preserve medications that quickly deteriorate and improve stability.
- Drugs can be delivered locally to a specific compartment (targeted location).

TYPE OF INTELLIGENT DRUG DELIVERY SYSTEMS:

"Intelligent" or "smart" DDS can operate in an open or closed circuit and regulate drug delivery in response to particular inputs (Fig. 2).[10,11]

This paper details current developments in the realm of medication delivery, where stimuli-responsive polymers are used to create both closed- and open-loop control systems that are self-regulating and pulse.[12]

Externally controlled systems and pulsatile systems are other names for open-loop systems. To administer the medication, these systems used external triggers like magnets, thermometers, ultrasounds, electric effects, etc. Conversely, closed-loop systems are also referred to as responsive or self-regulating medication delivery systems. Drug release rate regulated by feedback data without outside assistance. These are employed in a variety of ways, including those that are thermosensitive, urea-responsive, pH-responsive, glucose-responsive, and inflammation-sensitive. Thus, in these later systems, the delivery mechanism is directly controlled by a biological variable.[13,14]

OPEN-LOOP SYSTEM:

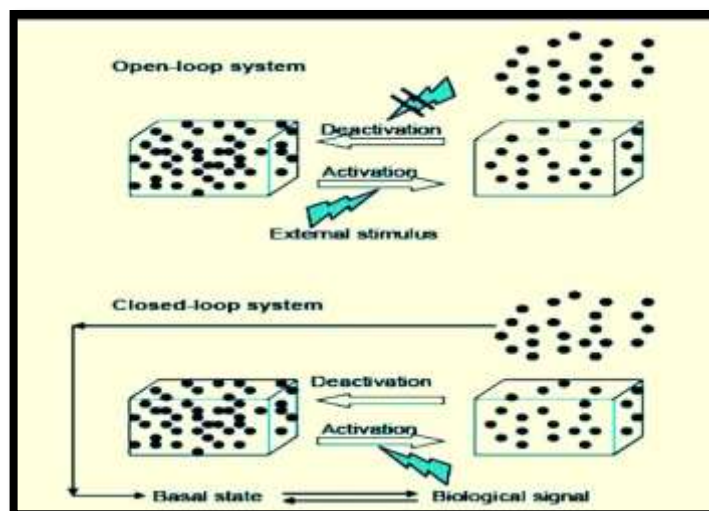
Sensing a particular external signal, open-loop systems, sometimes referred to as pulsatile systems, regulate the release of drugs at a pace that is not reliant on the biological environment.

CLOSE-LOOP SYSTEM:

Closed-loop or self-regulated systems are able to detect changes in the biological medium directly, such as variations in pH, temperature, or substance concentration. These changes can then be used to activate or modulate a response, such as turning on or off drug release or automatically varying the release rate.

Biopolymers are excellent models for creating customized synthetic materials that may be used to simulate biological system activity. Humans have unique cellular systems for targeted identification, selective capture, and regulated drug transfer; macromolecules are essential to all of these processes. Certain barriers to the direct application of biomacromolecules can be addressed by synthetic polymers:

- i) Their use is safer.
- ii) It is possible to estimate their structure precisely.
- iii) They can be obtained through flexible procedures that result in materials with customized features.
- iv) Their industrial production is more cost-effective. [15]

FIGURE 2

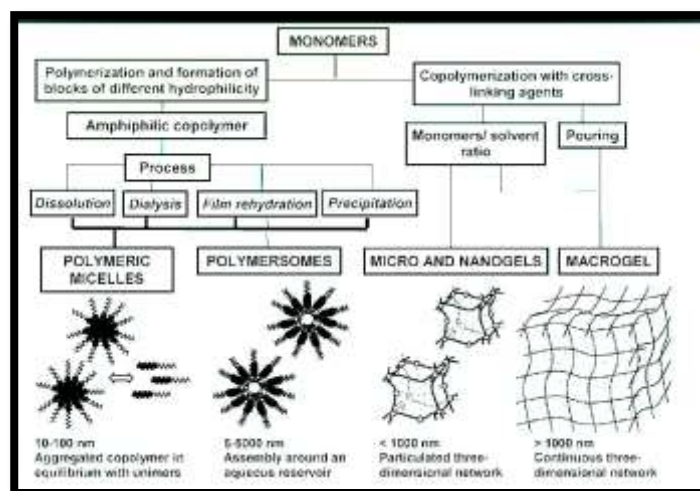
NATURE AND STRUCTURE

POLYMERS:

The rapid progress of biomedical research has given rise to several inventive uses of biocompatible polymers. The goal of healing in modern medicine is to replicate, or as closely as feasible, the physiology of healthy functioning as additional mechanisms of pathophysiology and physiology are discovered. As a result, the field of responsive medication delivery by smart polymers has developed. The advancements may be divided into two groups: self-controlled systems, often referred to as "closed-loop" systems, and externally regulated or pulsatile systems, sometimes referred to as "open-loop" systems. For pulsatile delivery, the externally controlled devices use external triggers as light, electric, magnetic, ultrasonic, chemical, or biological agents. Conversely, self-regulated systems are those in which the output of the system is modified in response to the detection of the controlled variable. Without the help of other parties, feedback data regulates the discharge rate. The rate control techniques used by the self-regulated systems include competitive binding, metal-concentration-dependent hydrolysis, heat-sensitive polymers, pH-sensitive drug solubility, enzyme-substrate reactions, and antibody interactions.[16]

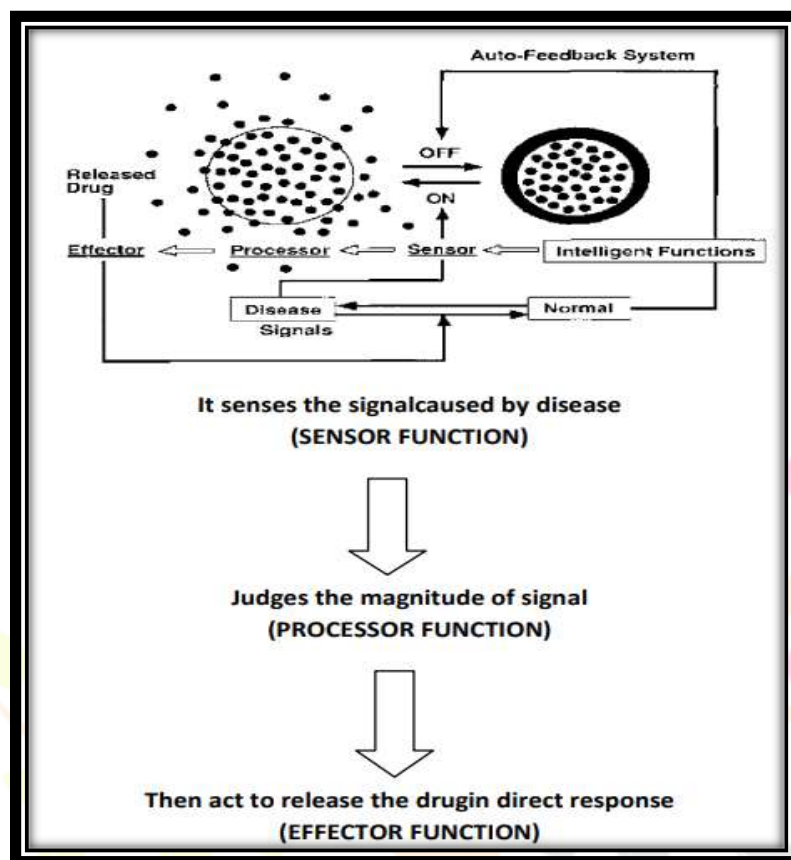
Polymeric chains that are stimuli-sensitive combine to form intelligent polymeric micelles and hydrogels. In polymeric micelles and polymersomes, weak interactions hold the polymers together, but greater physical or chemical cross-linking between the chains is necessary for the development of hydrogels (Fig. 3).

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FIGURE 3

When amphiphilic copolymers spontaneously aggregate in water, they form hydrophilic micelles, which are nanometric aggregates with a hydrophobic core encircled by a hydrophilic shell, or they form liposome-like vesicles, which are composed of alternating layers of water and amphiphilic copolymers arranged in a palisade.[17] Since they may host nonpolar molecules in the hydrophobic sections and comparatively polar substances in the hydrophilic parts, polymeric micelles and polymersomes are both effective drug carriers. When parenterally delivered, polymeric micelles have a tendency to concentrate in tissues with improved penetration and retention (EPR effect) of macromolecules.[18] Due to their size, polymeric micelles can act as drug carriers inside of cells, much like viruses, lipoproteins, and other biological transport systems. Until the hydrophilicity or conformation of the unimers are altered by an external stimulation or a shift in physiological parameters, intelligent micelles can hold onto the medicine. [19] The strength of the stimulation determines how many micelles break down or destabilize and, in turn, how the drug release profile is affected. The release is stopped and the micelles reform as soon as the stimulation ends. [20]

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MECHANISM:**FIGURE 4****Figure 4 :Mechanism of Intelligent Drug Delivery System****SOME DISCUSSED BELOW****THERMO RESPONSIVE DRUG DELIVERY SYSTEM:**

When compared to other stimuli, temperature is one of the most practical and efficient ways to regulate medication release. [21]

Next-generation drug delivery technologies, known as thermo-responsive carriers, are thought to be able to release medications sensibly in reaction to internal or external stimuli. Reduced exposure to normal cells, enhanced therapeutic efficacy, and low toxicity are the attributes of these systems. In addition to the most researched polymeric nanoparticles and micelles, research is being done on other drug delivery systems that can react to temperature changes for targeted drug release. Gels are one of those that have been researched primarily for their reactivity.[22]

Below their critical temperature of dissolution, temperature-sensitive polymers—which are employed to create intelligent systems—become hydrophilic (LCST). The polymer undergoes a conformational shift from an extended (soluble) to globular (insoluble) state as the temperature rises above the lower critical temperature.[23] Temperature-sensitive micelles can be produced by using amphiphilic copolymers containing poly(N-isopropyl acrylamide), PNIPA, or one of its variants.[24]

Block copolymers made up of hydrophobic and thermoresponsive blocks combined to generate the thermo-responsive micelles. The thermo-responsive block was created using poly(N-isopropylacrylamide-co-N,N-dimethylacrylamide) with a lower critical solution temperature (LCST) of approximately 40 °C, and the hydrophobic block was created using biodegradable poly(d,l-lactide), poly(ϵ -caprolactone), or poly(d,l-lactide-co- ϵ -caprolactone). Physical parameters including micelle diameter and critical micelle concentration were adjusted by varying both block lengths of the block copolymers containing poly(d,l-lactide).[25]

On the other hand, an array of polyaspartamides with isopropylamide and hydroxyalkylamide pendant groups were created via a sequential aminolysis reaction of polysuccinimide in order to construct poly(amino acid)s with temperature sensitivity. The derivatives of polyaspartamide exhibited a sharp behavior of temperature-responsive phase transition and self-assembled into nanoparticles in water. By modifying the composition of both pendants, the hydrophilic–hydrophobic balance of the copolymer can be adjusted, hence modulating the phase transition temperature (T_p). Furthermore, the polymeric nanoparticles were effectively loaded with the anticancer drug doxorubicin by the dialyzing process. Temperature-dependently, the drug release profile considerably accelerated above the T_p and decelerated below the T_p . With its remarkable biocompatibility and adjustable temperature responsiveness, this polymeric nanoparticle may be cheaply made and has great potential for applications involving controlled drug release.[26]

As the temperature rises, poly(acrylamide) gels swell while poly(N-alkyl substituted acrylamide) gels deswell. Body temperature is typically higher in illness states than in healthy states; examples of this include inflammation and tumors, which have higher temperatures than normal tissues. [27] Smart drug administration can improve drug release in tumors by taking advantage of the temperature differential between cancerous and healthy tissues. [28] To enhance medication release within the tumor vascular milieu, one additional temperature-responsive tactic involves heating the tumor location by external triggers such as magnetic fields, ultrasound sounds, etc. [29]

ENZYME RESPONSIVE DRUG DELIVERY SYSTEM:

The use of enzymes as triggers in the development of intelligent drug delivery systems has gained popularity because of their distinct advantages, which include excellent selectivity and substrate specificity. [30] Enzymes can be used to obtain enzyme-mediated drug release because they are associated with nearly every biological and metabolic activity (e.g., glycosidases, lipases, phospholipases, or proteases). [31]

Enzyme activity is vital to every biological and metabolic process in the human body. Certain chemical events that are catalyzed by certain enzymes and result in the breakdown, dissociation, or morphological changes of the parent NPs are the source of drug release from NPs in an enzyme-responsive manner. [32]. Severe destruction of NPs exposed to enzymes, which typically results in burst release of pharmaceuticals, is neither required nor desirable in order to establish regulated release profile of drugs. Controlled alterations to the macroscale structure of NPs typically result in the intended controlled release of medications in tumor microenvironments containing particular enzymes.

pharmaceuticals with the intended regulated release [33] Under mild circumstances, enzyme-catalyzed reactions are very efficient and selective toward particular substrates. They are the main players in the molecular chemistry of living things, taking part in every biological and metabolic process. By enhancing the responsive polymers' triggering specificity and selectivity, the combination of enzyme-catalyzed processes and these polymers can increase the design flexibility and range of applications. In this tutorial overview, we highlight this study topic with a few chosen literature studies and discuss recent advances regarding hydrogels,

nanoparticles, and enzyme-responsive polymeric assemblies. Enzyme-driven disintegration and structural reorganization of polymeric assemblies and nanoparticles, enzyme-triggered sol-to-gel and gel-to-sol transitions, and enzyme-triggered self-assembly and aggregation of synthetic polymers are the three types of systems that are presented. There is also discussion of their possible uses in biocatalysis, imaging, sensing, controlled release of drugs, and diagnostics.[34]

In recent years, a variety of nanoscale materials, such as polymer materials, phospholipids[35] and inorganic materials, have been used to construct enzyme-responsive drug delivery systems.[36] The incorporation of nanomaterials with enzymatic reactions can confer bio-specificity and selectivity to the formulations, hence facilitating their potential applications across several domains. For instance, without sacrificing targeting efficiency or specificity, active tumortargeting nanoparticles combined with site-specific enzyme-triggered moieties can greatly increase accumulation at the tumor site, decrease uptake by nontargeted tissue, and enable site-specific controlled drug release.

The self-assembly of peptides with enzyme-cleavable sequences or the covalent coupling of proteinase-sensitive peptides to therapeutic or diagnostic substances are two of the most popular techniques for creating nanoparticles with enzyme-responsive cores. In this instance, it has been shown that the family of over 20 calcium-dependent zinc-containing proteinases known as matrix metalloproteinases (MMPs) is capable of catalyzing the core destruction of peptide-based NPs. Of these, MMP-2 and MMP-9 have been shown to correlate with cancer cell invasion and metastasis creation, making them particularly significant for the development of enzyme responsive anti-tumor drug delivery systems.[37]

In recent years, enzyme-responsive nanoparticles have surfaced as a feasible and promising technological platform for the administration of drugs under control. The active design of these devices aims to provide increased medication release at specific areas (spatial control) and/or at optimal times (temporal control). Enzyme-based dual/multiple responsive drug delivery systems, such as pH/enzyme and temperature/enzyme, have recently been created in an attempt to further improve controlled drug release performances. These systems react to a combination of two or more signals. A pH/enzyme-responsive tumor-specific doxorubicin delivery system, for instance, was reported by Dong et al. [38]

PH RESPONSIVE DRUG DELIVERY SYSTEM:

The pH of the gastrointestinal system varies typically. There are pH gradients in other parts of the body as well. For instance, the extracellular pH of tumor tissues ranges from 6.5 to 7.0, which is somewhat lower than the pH of healthy tissues and blood (7.4). [39]

Materials that respond to changes in pH can be used to address the pH, which is a significant signal. As was previously noted, the physiological pH fluctuations. For pH-responsive systems, ionisable polymers with pKa values between 3 and 10 are suitable. [40].

pH is used in this kind of system as a trigger to release the medication. The polymer will expand or contract in response to changes in the pH of the surrounding environment. pH-responsive carriers are employed to measure pH in several bodily regions, including the intestinal system ($\text{pH} \approx 7$) and stomach ($\text{pH} \approx 2$). [41]

In the past 20 years, the subject of pH-responsive polymers has attracted a lot of attention from both academia and industry due to its broad range of possible applications as well as advancements in the synthetic methods used to create these materials.

A class of stimuli-responsive polymers known as pH-responsive polymers are able to alter their structure and properties in response to changes in solution pH, including surface activity, chain conformation, solubility, and configuration. A frequent name for polymers with ionisable acidic or basic residues whose ionization depends on solution pH is "pH-responsive polymers." The field of pH-responsive polymers has seen significant growth in popularity in recent years, with new research being added on an annual basis. As a result of these special qualities, pH-responsive polymer systems are highly valuable in a variety of applications, including chromatography, surfaces, membranes, sensors, drug and gene delivery, and sensors. [42-43]

Polymeric micelles and hydrogels with pH-sensitive drug release can be produced using polymers having ionizable groups. The copolymer composition determines the triggering pH [44].

The pH-sensitive system has been the most often utilized stimulus type while designing sensitive nano-systems for drug delivery in cancer treatment. It is commonly recognized that pH levels may range greatly across various tissues or organs, such as the liver and stomach, as well as between disease conditions, including ischemia, infection, inflammation, and cancer. Tumor pH is lower than that of normal tissues because cancer cells exhibit a high rate of glycolysis in both aerobic and anaerobic environments. It has been shown that tumors have acidic pH values between 5.7 and 7.8, whereas normal tissue has a pH of 7.4.[45]

pH-sensitive nanosystems are predicted to store and stabilize anticancer medications at physiological pH, release the drug fast when the pH trigger point is reached, and guarantee that the intracellular drug concentration achieves the therapeutic dosage for successful drug delivery. Numerous pH-responsive drug release techniques have been researched in order to accomplish these objectives.

One method is to combine nanomaterials with "ionizable" chemical groups, such as carboxylic acids, amines, and phosphoric acids, among others. These groups may collect or give protons and undergo pH-dependent changes in physical or chemical characteristics like swelling ratio or solubility, leading in drug release. They differ in their chemical structures and pKa values. Nanomaterials can be categorized as organic, inorganic, or hybrid based on their contents. Because of their capacity to both encapsulate and protect payloads and react to certain stimuli, polymers represent a key class of materials that may be employed in the construction of organic DDSs. [46]

GLUCOSE AND SACCHARIDE RESPONSIVE DRUG DELIVERY SYSTEM:

Given the requirement to adjust dose depending on the patient's actual disease condition in real time, the development of "smart" medication delivery systems for diabetes is especially intriguing. The creation of a "Fully Synthetic Pancreas," an abiotic construct that can detect blood glucose rises and react by producing a metered amount of insulin or maybe glucagon for closed-loop treatment, is the ultimate objective of these studies. [47]

Insulin delivery systems based on glucose-responsive polymers are capable of closely regulating blood glucose levels (BGL) and also have the added advantage of lowering the risk of hypoglycemia. The three main glucose-sensing components that glucose-responsive materials often interact with are glucose oxidase, phenylboronic acid (PBA), and glucose-binding molecules. Glucose-responsive materials are sensibly engineered to sense changes in glucose concentration or indirect signals related to glucose fluctuation, like pH, H_2O_2 concentration, and O_2 level, and modify their chemical or physical properties accordingly. These materials are based on glucose-sensing elements. In this vein, several sophisticated glucose-responsive materials have been created

with the goal of enhancing their therapeutic efficacy and achieving strong glucose-responsive insulin release performance.

These sophisticated materials mostly consist of inorganic materials like calcium phosphate ($\text{Ca}_3(\text{PO}_4)_2$) and metal organic frameworks (MOFs) and organic materials including biomacromolecules, synthetic polymers, polypeptides, and liposomes. Other groups and we have created a variety of carriers, including hydrogels, micro/nanoparticles, liposomes, complexes, cell-drug conjugates, and microneedle (MN) array patches, based on these glucose-responsive materials. Through glucose-stimulated swelling/contraction, dissolution, pore size change, charge reversal, and polymer degradation, these delivery methods can release insulin. Furthermore, these carriers are always being developed to boost response index, quicken response rate, and enhance biocompatibility.

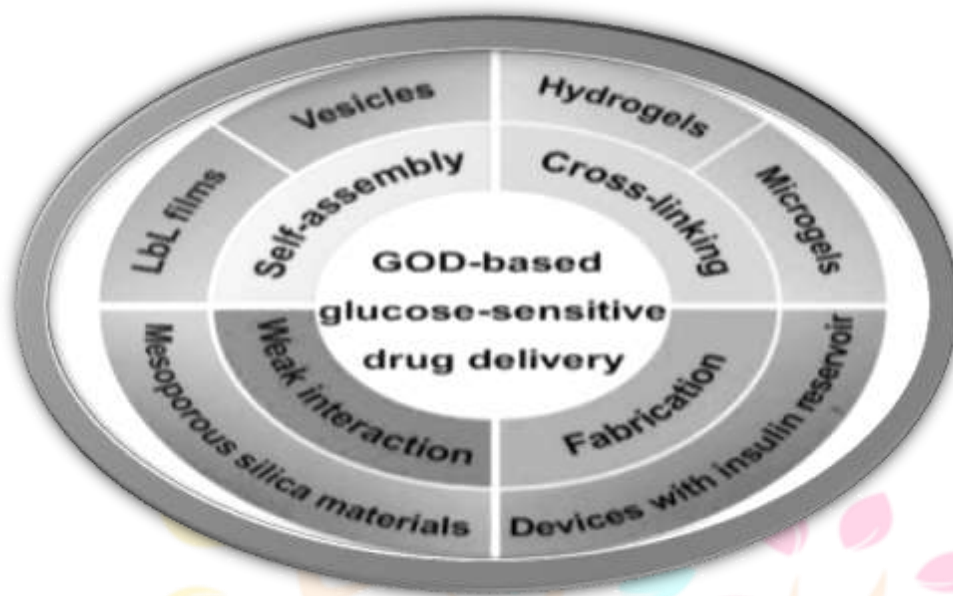
In order to treat diabetes in a manner that is dose-, spatially-, and temporally-controlled, our lab works on the production of glucose-responsive materials and the creation of glucose-responsive MN array patches, hydrogels, insulin complexes, and cell-drug conjugates. The right quantity of insulin may be secreted in response to BGL alternation by these closed-loop insulin administration devices. MN array patches also offer the added benefits of being simple to use and painless.[48]

Glucose oxidase (GOD) has been effectively incorporated with pH-sensitive materials as a glucose-sensitive component. Before being integrated into liposomes, Glucose oxidase is often altered to increase its hydrophobicity. [49]

The first glucose-responsive material was created in the 1980s and was a pH-sensitive polymeric matrix containing glucose oxidase.[50] As a glucose detecting element, when glucose is exposed to oxygen, it combines with the glucose to produce gluconic acid, which lowers pH.[51] In response to the pH shift, the pH-sensitive polymeric matrix swells to promote the release of insulin. In order to create glucose-responsive insulin delivery, Peppas and colleagues also used pH-sensitive hydrogels. These hydrogels change size in response to pH changes, adjusting insulin release in a glucose-mediated way.[52]

Glucose oxidase -based glucose-sensitive medication delivery has advanced significantly in the last several years. The Glucose oxidase -immobilized glucose-sensitive systems are covered in this article along with their in vivo uses in self-regulated drug delivery and controlled blood glucose management. These Glucose oxidase -based platforms include cross-linking hydrogels and microgels, self-assembly films and polymer vesicles, hybrid mesoporous silica nanoparticles, and microdevices made with insulin reservoirs, as seen in Figure 5. [53]

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FIGURE 5**Figure 5: Glucose-sensitive self-regulated drug delivery platforms based on glucose oxidase**

To achieve the goal of a fully synthetic pancreas, a glucose-responsive insulin delivery system must be developed, and these are only a few of the numerous obstacles that need to be overcome. Currently, the most sophisticated method for implementing closed-loop diabetes care involves creating automated control systems that utilise a blend of digital pumps and glucose sensors.[54] however at the moment necessitates the employment of somewhat large pump and sensor systems. Creating formulations or systems based on smart materials has been an alternate strategy. Early research outlined initiatives for insulin's regulated release from polymeric materials.[5]

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Based on the selective binding of GBPs to glucose, several glucose-responsive insulin delivery techniques have been utilized during the past ten years. Concanavalin A (Con A), a lectin derived from the jack bean, is frequently used as the glucose detecting moiety. Con A has reversible affinity for D-glucose, D-mannose, and polysaccharides at four different binding sites. Concanavalin A was initially used by Brownlee and Cerami in the 1970s to create a glucose-responsive insulin delivery system. To do this, they synthesized and bonded a glycosylated insulin derivative to Concanavalin A. The competitive replacement of free glucose in the context of elevated glucose concentrations led to the release of the insulin derivative. In order to complementarily attach to Concanavalin A for self-regulated insulin release, Kim and colleagues additionally produced insulin modified with gluconic acid.[56]

PHOTO RESPONSIVE DRUG DELIVERY SYSTEM:

Because they can undergo a series of reversible changes in specific physical and chemical properties in response to light stimulus, photoresponsive materials are well suited for information recording and readout. These changes specifically manifest as variations in optical properties (absorption and emission), solubility, viscosity, conformation, polarity, electrochemical properties, conductivity, refractive index, etc.[57]

Among these differences, optical characteristics are crucial for information storage since the color change and/or luminescence of photoresponsive materials directly determine the efficacy of information rewriting and erasing, encryption and decryption, and anti-counterfeiting. Photoresponsive materials are easier to realize optical information storage than their solvent-or vapor-, thermal-, electro-, magnetic-, and mechano-responsive counterparts. This is because light has many unique advantages over these other materials, such as easy accessibility, no need for physical contact, high spatial and temporal resolution, as well as simple emission wavelength and intensity tuning. Light also shows great convenience in information storage in a noninvasive manner. [58]

Photoresponsive gels are characterized by reversible changes in their chemical or physical properties when exposed to photoradiation. A photoreceptor, often a photochromic chromophore, plus a functional component make up a photoresponsive polymer. The optical signal is captured by the photochromic molecules, and it is then converted to a chemical signal in the photoreceptors by isomerization of the chromophores. Visible light induces a phase shift in polymer gels, and the mechanism suggested was direct heading to the network polymer reaction to the light.[59]

By using light as a triggering mechanism, localized medication release may be achieved in precisely defined body locations with little damage to nearby tissues. As is typically the case with photodynamic therapy, therapies applied to the skin or mucous membranes might make use of ultraviolet or blue light. higher wavelengths of radiation (infrared), although still safe, have a higher ability to penetrate tissue, making them especially helpful for controlling release in harder-to-reach places [60].

The most attention is being paid to photosensitive polymers containing azobenzene groups. At 365 nm, radiation causes a trans to cis isomerization without the need for further chemical processes. The copolymer's hydrophilicity is changed by this isomerization, which makes it hydrophilic at cis (lasting as unimers) and hydrophobic at trans (forming micelles). Since the wavelength that initiates the isomerization is dependent on the kind of substituent groups, it is easily adjustable [61].

When creating stimuli-responsive biomaterials, the photo penetrating property is a promising energy source that can be controlled with great spatial and temporal precision in terms of intensity, frequency, polarization, and light-direction [62]. Thus, the precise intensity adjustment, controllable exposure time and tissue location (by choosing suitable beam parameters), and non-invasive photo-regulatory activation are the benefits of the photo-responsive nano-carriers drug delivery system [63].

A picture is a medically less hazardous alternative for controlling biomaterials than other stimuli. Generally speaking, photoisomerization, photolysis, photo-crosslinking, photo-redox (which can be used in photodynamic therapy, or PDT), and photothermal trigger (which is related to photothermal therapy, or PTT) can all potentially activate the photo-sensitive groups in the structure of photo-responsive nanomaterials to trigger drug release [64].

STIMULI RESPONSIVE DRUG DELIVERY SYSTEM:

According to this perspective, extremely selective and sensitive medication delivery is being ensured by stimuli-responsive drug delivery vehicles. Stimuli responsive nano-carriers are composed of an amphiphilic stimulus-responsive polymer shell that is sensitive to a variety of endogenous and exogenous stimuli, and a core (hydrophobic or hydrophilic region) that contains therapeutic hydrophobic or hydrophilic drugs [65].

A variety of internal and external stimuli can cause an organism to produce stimuli-responsive drug delivery carriers by a variety of disintegration processes (such as particular protonation, hydrolytic cleavage, molecular/supramolecular conformation changes, etc.). To guarantee that there are enough doses in the intended lesion, the drug release is controlled as a result [66]. The conveyance offers a high degree of flexibility for stimuli-responsive material systems as it may be put together in a variety of architectural configurations and used to initiate precise and timely drug release. This might eventually increase the therapeutic effectiveness.[67]

Developing irritating nano-carrier treatment requires a thorough understanding of the molecular and physical differences between healthy and diseased cells. This enables the medication to be released from the drug in order to counteract aberrant molecular changes that occur throughout the damage process at an appropriate precise release target. Based on the source of the responsive stimuli, responsive nanomaterials for illness treatment fall into two main categories: external stimuli and endogenous stimuli. In living things, endogenous stimuli include things like enzymes, reactive oxygen species (ROS), pH, glutathione (GSH), and so on, whereas external stimuli include things like temperature, light, magnetic fields, and ultrasound (US) [68].

Smart or stimuli-responsive polymers are those that can react to an external physical or chemical stimulation. Smart polymers were first used to regulate the release of biologically active cargos fifty years ago, and this was a significant advancement in the study and creation of nanomedicines. As was said in the preceding section, smart polymeric systems have been shown to respond to a variety of environmental stimuli, including as magnetic fields, pH, and US [69].

Polymers' chemical and physical characteristics can change intelligently in response to certain stimuli. The strength of the stimulation provided to the artificial carriers can regulate the medication release rate. The two types of these smart polymer materials are those that respond to a single stimulus and those that respond to two or more stimuli [70].

Single stimulus that induces protonation, hydrolytic cleavage or (supra) molecular conformational change in the polymer nanomaterials, which can be further categorized as exogenous and/or endogenous stimulus. The exogenous stimuli such as temperature, magnetic field, ionic strength, US intensity or electric pulses can trigger conformation changes due to on-off polymer chains [71]. Factors like pH, enzyme concentration, hormone level, redox gradient, and small bio-molecules are summarized as endogenous stimuli. Among a variety of stimuli that have been utilized, pH, redox, enzymes, light, and temperature have recently emerged as promising triggering motif for the design of smart polymeric DDSs [72].

ELECTRICALLY REGULATED DRUG DELIVERY SYSTEM:

These systems display drug release in response to an applied electric field because the electric field acts directly on the solute or on the rate-limiting membrane, regulating the solute's passage over the membrane. Due to its swelling-deswelling nature, electric field-sensitive polyelectrolyte hydrogels have been created for artificial muscles, actuators, and solute penetration control.

The basis of techniques such as iontophoresis and electroporation for transdermal administration is the well-established impact of electrical stimulation on medication penetration through the skin. For the purpose of creating electro-sensitive hydrogels for pulsatile drug release, cross-linked polyelectrolytes with a high density of ionizable groups are especially suitable. [73]

In generally, polyelectrolytes with cations (like chitosan) or anions (like polyacrylic acid) on their structure are known as electric stimuli sensitive hydrogels. Transdermal devices and implants can release the necessary dosage of medication "on demand" through the use of electrically sensitive hydrogels [74].

Several processes, including electrodiffusion, electroosmotic, electrophoretic, and electrostatic partitioning of the charged pharmaceuticals into hydrogels, can regulate the drug release behavior from polyelectrolyte hydrogels under electrical stimulation. Three opposing forces—rubber elasticity, polymer-polymer affinity, and ionic pressure—are crucial during drug release from hydrogels. Osmotic pressure is the aggregate term for these three pressures. The hydrogel's volume changes as a result of these forces' shifting equilibrium. The hydrogel's osmotic pressure is equal to that of the surrounding aqueous solution when it is in equilibrium. The counterion of the polyion (H^+) travels towards the negative electrode (cathode) when an electrical stimulation is provided to the negatively charged gel in an aqueous solution, while the polyion stays stationary. Furthermore, the free ions in the surrounding solution migrate into the gel and toward their counter electrode. As a result, the hydrogel's osmotic pressure close to the anode, or positive electrode, rises and surpasses that of the hydrogel close to the negative electrode. Drug release from hydrogels is therefore caused by a rise in the osmotic pressure differential inside the hydrogel. [75]

REDOX RESPONSIVE DRUG DELIVERY SYSTEM:

In intracellular DDSs, redox responsive stimuli have garnered significant interest for their potential as disease therapies. [77]

It is possible to create redox-sensitive delivery systems by taking use of the multivariate redox potential seen in microenvironments across diverse tissues. Creating and designing Glutathione-responsive nanoparticles is a potentially effective method for delivering drugs.[78]

Tumor cells' reducing environment functions as a special internal signal that enables redox-responsive nanocarriers to break down and release their laden payloads. Redox-responsive nanocarriers have three key

benefits. First, they frequently remain stable in healthy tissues, which can clearly lessen the biological toxicity and adverse effects of the payloads as well as the carriers. Secondly, they exhibit a fast reaction (often a few minutes to hours) to elevated GSH concentration in tumor cells in order to release payloads. Finally, the release in the cytoplasm is frequently anticipated to have superior therapeutic benefits in comparison to other possible locations of cargo release [79].

Disulfide bond-based redox-responsive delivery systems have been thoroughly investigated in several studies. By converting glutathione into sulfhydryl groups, disulfide bonds are readily broken down, leading to the deterioration of carriers and the easier release of payloads. The redox-responsiveness of disulfide bonds is the subject of several studies, and diselenide bonds are becoming more and more popular. Diselenide bonds can respond to redox conditions and reduce as sensitively as disulfide bonds [80].

Apart from disulfide and diselenide bonds, research on additional redox-responsive chemical structures is currently ongoing. For instance, the succinimide-thioether bond can be quickly released intracellularly by being broken by exogenous glutathione in reducing conditions [81].

RECENT ADVANCEMENT

GLUCO WATCH:

By applying a small electrical current, glucose may be removed through undamaged skin using a technique known as "reverse iontophoresis" or electro-osmotic flow. We have just developed a gadget called the GlucoWatch® biographer that combines an in situ glucose sensor with iontophoretic extraction. Four control buttons and a liquid crystal display make up the device's front surface. The electronic component includes a circuit to run the iontophoresis and amperometric biosensors, a microprocessor to manage the device's operations and translate sensor signals into glucose readings, enough memory to store 4000 glucose readings, and a serial port for uploading glucose data to a PC. Skin temperature fluctuations and sweat are detected by temperature and skin conductivity sensors, respectively. The device's disposable component, the auto sensor, consists of two sets of identical biosensor and iontophoresis electrodes as well as two hydrogel discs that fit into the biographer's skin. These hydrogel discs function as both the reservoirs that hold the glucose and the electrolyte for the biocensor. These hydrogel discs have enough glucose oxidase enzyme dissolved in them to completely remove all Kinetic-related restrictions on the biosensor signal. The gluco watch biographer's design integrates three distinct technologies. [82]

TEMPERATURE RESPONSE PHOTONIC DEVICE:

Here, we present a very thin, skin-like, or "epidermal," photonic device that, when gently laminated on the skin's surface, combines wireless stretchable electronics with colorimetric temperature indicators to sense heat. The electronics in the sensors enable radio frequency signals to be used to regulate and localize heating of the thermochromic liquid crystals, which are etched into large-scale, pixelated arrays on thin elastomeric substrates. The generated data has quantitative significance thanks to algorithms that extract color patterns captured by these devices using a digital camera and computational techniques that link the findings to underlying heat processes close to the skin's surface.

INSULIN PUMP:

The ultimate objective of insulin therapy for diabetes mellitus is blood glucose regulation and the avoidance or stabilization of long-term diabetic consequences. The initial insulin pumps were large, cumbersome devices

that were primarily used in research. In the 1970s, pumps were introduced to the market for use by patients with diabetes in general. Patients had to figure out how much bolus insulin to take for high blood sugar levels and meal coverage [83].

Nowadays, the main treatment for diabetes is the subcutaneous injection of insulin. To keep the blood glucose level within normal range, two or three injections must be administered daily. The patient would not have a high quality of life because this procedure is taxing and intrusive to living things. Thus, research has been done on an insulin pump made of polymer materials. Wang created an insulin reservoir made of silicone rubber that compresses to create a pressure gradient that releases insulin that has been stored within.

Insulin pumps use a single subcutaneous location that is usually changed every three days to continuously infuse insulin. For this purpose, only rapid-acting insulin is employed, and analogue insulins have become more popular than conventional insulin [84]. A pump continuously administers programmed basal insulin based on the patient's 24-hour glucose profile. The physiology of the person, the kind and intensity of daily activity, job schedule, exercise, sickness, concurrent medication use, etc., can all have an impact on the amount of insulin required. While some individuals may use a single rate, the majority require numerous basal rates throughout the course of a 24-hour period. Almost all pumps may be programmed to have an hourly basal rate that can be changed, as well as a temporary basal rate function for unforeseen circumstances. .. Bolus insulin, which infuses from a few minutes to many hours, can also be administered by patients. Insulin shots provide coverage for meals and address elevated blood glucose levels. The blood glucose level and the amount of carbohydrates in the meal are needed for the pump to calculate the bolus insulin dosages correctly. The patient may choose to stop receiving insulin via the pump if required.

INSULIN PATCH:

A patch with microneedles that can detect high blood sugar and react by releasing insulin may provide diabetics with a more comfortable and dependable means of controlling their disease. While the painless transdermal medication administration provided by the microneedle (MN) patch is a promising alternative, it is still exceedingly difficult to give insulin as quickly as by SC injection. Here, a unique MN patch is created by coating MNs at pH 3.0 with layer-by-layer (LBL) films of insulin and poly-L-glutamic acid (PGA). Because the net charge of insulin changes from positive to negative when the pH rises from 3.0 to 7.4, this coating is pH-sensitive. As a result, the coating dissociates promptly and releases insulin quickly when it is moved to pH 7.4 medium, such as when it is placed into skin.[85]

CONCLUSION:

Advances in biomedical nanotechnology have led to the development of smart drug delivery systems (DDSs) with stimuli-responsive features. These nanoplateforms can improve patient compliance by reducing side effects and increasing therapeutic targeting effectiveness. However, due to lack of established production processes, toxicity evaluation expertise, and a clear correlation between pre-clinical and clinical investigations, these sophisticated stimulus-sensitive nano-DDSs are not yet authorized for clinical use. The main component of these systems is stimuli-responsive polymers, which detect variations in a certain characteristic and initiate the delivery. Innovative drug-delivery systems are designed to address different clinical disorders requiring different pharmacological therapy. These systems range in approach, intricacy, materials, and patient compliance. Pulsatile drug delivery, responsive delivery systems, enzymes, and antibodies are all part of this new class of intelligent drug delivery. Controlled release, target specificity, mass transfer, on-demand dose modification, and pharmaceutical agent stability are the most important factors in

designing these systems. As they are developed and improved, drug delivery systems provide longer life expectancies and better quality of life.

REFERENCE

1. Joseph Kost and Robert Langer, *Advanced Drug Delivery Reviews*, 6 (1991) page no. 19-50.
2. Hrubý M, Filippov SK, Štěpánek P. Smart polymers in drug delivery systems on crossroads: Which way deserves following? *European Polymer Journal*. 2015;65:82-97.
3. Couvreur P. Nanoparticles in drug delivery: past, present and future. *Advanced Drug Delivery Reviews*. 2013;65:21-3.
4. Annabi N, Tamayol A, Uquillas JA, Akbari M, Bertassoni LE, Cha C, et al. 25th anniversary article: rational design and applications of hydrogels in regenerative medicine. *Adv Mater*. 2014;26:85-124. DOI: 10.1002/adma.201303233
5. Stumpel JE, Gil ER, Spoelstra AB, Bastiaansen CW, Broer DJ, Schenning AP. Stimuli-Responsive Materials Based on Interpenetrating Polymer Liquid Crystal Hydrogels. *Adv Fun Mater*. 2015;25:3314-20. DOI: 10.1002/adfm.201500745
6. Alvarez-Lorenzo C, Concheiro A. Smart drug delivery systems: from fundamentals to the clinic. *Chemical Communications*. 2014;50:7743-65.
7. Grund S, Bauer M, Fischer D. Polymers in drug delivery—state of the art and future trends. *Advanced Engineering Materials*. 2011;13:B61-B
8. Kopeček, J. (2003, September 1). *Smart and genetically engineered biomaterials and drug delivery systems*. *European Journal of Pharmaceutical Sciences*. [https://doi.org/10.1016/s0928-0987\(03\)00164-7](https://doi.org/10.1016/s0928-0987(03)00164-7)
9. Hoffman, A.S. In *Polymers in Drug Delivery*; Uchegbu, I.F., Schätzlein, A.G., Eds.; CRC Taylor & Francis: Boca Raton, 2006, pp. 7-22.
10. Kost, J., & Langer, R. (2012, December 1). *Responsive polymeric delivery systems*. *Advanced Drug Delivery Reviews*. <https://doi.org/10.1016/j.addr.2012.09.014>
11. Sershen, S., & West, J. L. (2002, November 1). *Implantable, polymeric systems for modulated drug delivery*. *Advanced Drug Delivery Reviews*. [https://doi.org/10.1016/s0169-409x\(02\)00090-x](https://doi.org/10.1016/s0169-409x(02)00090-x)
12. Dethlefsen U, Repges R. Ein neues therapieprinzip bei nichtlichem asthma. *Med Klinik* 1985;80, 44-47.
13. Chang HI, Yeh MK. Clinical development of liposome-based drugs: formulation, characterization, and therapeutic efficacy. *Int J Nanomedicine*. 2012;7:49-60. DOI: 10.2147/ijn.s26766
14. Stumpel JE, Gil ER, Spoelstra AB, Bastiaansen CW, Broer DJ, Schenning AP. Stimuli-Responsive Materials Based on Interpenetrating Polymer Liquid Crystal Hydrogels. *Adv Fun Mater*. 2015;25:3314-20. DOI: 10.1002/adfm.201500745
15. Roy, I., & Gupta, M. N. (2003, December). Smart Polymeric Materials. *Chemistry & Biology*, 10(12), 1161–1171. <https://doi.org/10.1016/j.chembiol.2003.12.004>
16. Traitel, T., Goldbart, R., & Kost, J. (2008, January). Smart polymers for responsive drug-delivery systems. *Journal of Biomaterials Science, Polymer Edition*, 19(6), 755–767. <https://doi.org/10.1163/156856208784522065>
17. Letchford, K., & Burt, H. M. (2007, March 1). *A review of the formation and classification of amphiphilic block copolymer nanoparticulate structures: micelles, nanospheres, nanocapsules and polymersomes*. *European Journal of Pharmaceutics and Biopharmaceutics*. <https://doi.org/10.1016/j.ejpb.2006.11.009>
18. Haag, R. (2003, December 29). *Supramolecular Drug-Delivery Systems Based on Polymeric Core–Shell Architectures*. *Angewandte Chemie International Edition*. <https://doi.org/10.1002/anie.200301694>

19. Rijcken, C. J., Soga, O., Hennink, W. E., & Van Nostrum, C. F. (2007, July 1). *Triggered destabilisation of polymeric micelles and vesicles by changing polymers polarity: An attractive tool for drug delivery*. Journal of Controlled Release. <https://doi.org/10.1016/j.jconrel.2007.03.023>
20. Alvarez-Lorenzo, C., & Concheiro, A. (2008, October 1). Intelligent Drug Delivery Systems: Polymeric Micelles and Hydrogels. *Mini-Reviews in Medicinal Chemistry*, 8(11), 1065–1074. <https://doi.org/10.2174/138955708785909952>
21. Shi Y, van den Dungen ET, Klumperman B, van Nostrum CF, Hennink WE. Reversible Addition–Fragmentation Chain Transfer Synthesis of a Micelle-Forming, Structure Reversible Thermosensitive Diblock Copolymer Based on the N-(2-Hydroxy propyl) Methacrylamide Backbone. *ACS Macro Letters*. 2013;2:403-8.
22. Bolla, P. K., Rodriguez, V. A., Kalhapure, R. S., Kolli, C. S., Andrews, S., & Renukuntla, J. (2018, August). A review on pH and temperature responsive gels and other less explored drug delivery systems. *Journal of Drug Delivery Science and Technology*, 46, 416–435. <https://doi.org/10.1016/j.jddst.2018.05.037>
23. Tanaka, T. (1978, February 1). *Dynamics of critical concentration fluctuations in gels*. Physical Review. <https://doi.org/10.1103/physreva.17.763>
24. Alexander, C. (2006, September). Temperature- and pH-responsive smart polymers for gene delivery. *Expert Opinion on Drug Delivery*, 3(5), 573–581. <https://doi.org/10.1517/17425247.3.5.573>
25. Nakayama, M., Okano, T., Miyazaki, T., Kohori, F., Sakai, K., & Yokoyama, M. (2006, September). Molecular design of biodegradable polymeric micelles for temperature-responsive drug release. *Journal of Controlled Release*, 115(1), 46–56. <https://doi.org/10.1016/j.jconrel.2006.07.007>
26. Gu, X., Wang, J., Liu, X., Zhao, D., Wang, Y., Gao, H., & Wu, G. (2013). Temperature-responsive drug delivery systems based on polyaspartamides with isopropylamine pendant groups. *Soft Matter*, 9(30), 7267. <https://doi.org/10.1039/c3sm50904d>
27. Adelsberger J, Kulkarni A, Jain A, Wang W, Bivigou-Koumba AM, Busch P, et al. Thermoresponsive PS-b-PNIPAM-b-PS micelles: aggregation behavior, segmental dynamics, and thermal response. *Macromolecules*. 2010;43:2490-501. DOI: 10.1021/ma902714p
28. Danhier F, Feron O, Préat V. To exploit the tumor microenvironment: passive and active tumor targeting of nanocarriers for anti-cancer drug delivery. *J Control Release*. 2010;148:135- 46. DOI: 10.1016/j.jconrel.2010.08.027
29. Torchilin VP. Multifunctional, stimuli-sensitive nanoparticulate systems for drug delivery. *Nat Rev Drug Discov*. 2014;13:813-27. DOI: 10.10
30. Nguyen MM, Carlini AS, Chien MP, Sonnenberg S, Luo C, Braden RL, et al. Enzyme-Responsive Nanoparticles for Targeted Accumulation and Prolonged Retention in Heart Tissue after Myocardial Infarction. *Adv Mater*. 2015;27:5547-52. DOI:10.1002/adma.201502003
31. De La Rica R, Aili D, Stevens MM. Enzyme-responsive nanoparticles for drug release and diagnostics. *Adv Drug Deliv Rev*. 2012;64:967-78. DOI: 10.1016/j.addr.2012.01.002
32. Torchilin, V. P. (2014). Multifunctional, stimuli-sensitive nanoparticulate systems for drug delivery. *Nat. Rev. Drug Discovery* 13, 813–827. doi: 10.1038/nrd4333
33. Zhou, Q., Shao, S. Q., Wang, J. Q., Xu, C. H., Xiang, J. J., Piao, Y., et al. (2019). Enzyme-activatable polymer-drug conjugate augments tumour penetration and treatment efficacy. *Nat. Nanotechnol.* 14, 799–809. doi: 10.1038/s41565-019-0485-z

34. Hu, J., Zhang, G., & Liu, S. (2012). Enzyme-responsive polymeric assemblies, nanoparticles and hydrogels. *Chemical Society Reviews*, 41(18), 5933. <https://doi.org/10.1039/c2cs35103j>
35. Wang, C., Chen, Q., Wang, Z., & Zhang, X. (2010, September 30). *An Enzyme-Responsive Polymeric Superamphiphile*. *Angewandte Chemie*. <https://doi.org/10.1002/ange.201004253>
36. Cassidy, J., & Schätzlein, A. G. (2004, September 7). Tumour-targeted drug and gene delivery: principles and concepts. *Expert Reviews in Molecular Medicine*, 6(19), 1–17. <https://doi.org/10.1017/s1462399404008269>
37. Yoon, S. O., Park, S. J., Yun, C. H., and Chung, A. S. (2003). Roles of matrix metalloproteinases in tumor metastasis and angiogenesis. *J. Biochem. Mol. Biol.* 36, 128–137. doi: 10.5483/BMBRep.2003.3 6.1.128
38. Dong L, Xia S, Wu K, Huang Z, Chen H, Chen J, Zhang J. *Biomaterials*. 2010;31:6309–6316. [PubMed: 20472287]
39. Ojugo, A.S.E.; Mesheedy, P.M.J.; McIntyre, D.J.O.; McCoy, C.; Stubbs, M.; Leach, M.O.; Judson, I.R.; Griffiths, J.R. *NMR Biomed.*, 1999, 12, 495.
40. Siegel, R. A. (1993, January 1). *Hydrophobic weak polyelectrolyte gels: Studies of swelling equilibria and kinetics*. *Advances in Polymer Science*. https://doi.org/10.1007/3-540-56791-7_6
41. Liu J, Huang Y, Kumar A, Tan A, Jin S, Mozhi A, et al. pH-Sensitive nano-systems for drug delivery in cancer therapy. *Bio Adv.* 2014;32:693-710. DOI: 10.1016/j.biotechadv.2013.11.009
42. S. Hoffman, P. S. Stayton, V. Bulmus, G. H. Chen, J. P. Chen, C. Cheung, A. Chilkoti, Z. L. Ding, L. C. Dong, R. Fong, C. A. Lackey, C. J. Long, M. Miura, J. E. Morris, N. Murthy, Y. Nabeshima, T. G. Park, O. W. Press, T. Shimoboji, S. Shoemaker, H. J. Yang, N. Monji, R. C. Nowinski, C. A. Cole, J. H. Priest, J. M. Harris, K. Nakamae, T. Nishino and T. Miyata, *J. Biomed. Mater. Res.*, 2000, 52, 577–586
43. Hu, J., Zhang, G., Ge, Z., & Liu, S. (2014, June 1). *Stimuli-responsive tertiary amine methacrylate-based block copolymers: Synthesis, supramolecular self-assembly and functional applications*. *Progress in Polymer Science*. <https://doi.org/10.1016/j.progpolymsci.2013.10.006>
44. Gillies, E. R., & Fréchet, J. M. J. (2004, January 1). *Development of acid-sensitive copolymer micelles for drug delivery*. *Pure and Applied Chemistry*. <https://doi.org/10.1351/pac200476071295>
45. Drummond DC, Zignani M, Leroux J. Current status of pH-sensitive liposomes in drug delivery. *Prog Lipid Res* 2000;39:409–60.
46. Lin YL, Jiang GH, Birrell LK, El-Sayed MEH. Degradable, pH-sensitive, membran destabilizing, comb-like polymers for intracellular delivery of nucleic acids. *Biomaterials* 2010;31:7150–66.
47. Bratlie KM, et al. Materials for diabetes therapeutics. *Advanced healthcare materials*. 2012;1(3): 267–284. [PubMed: 23184741]
48. Yao, Y., Ji, K., Wang, Y., Gu, Z., & Wang, J. (2022, July 29). Materials and Carriers Development for Glucose-Responsive Insulin. *Accounts of Materials Research*, 3(9), 960–970. <https://doi.org/10.1021/accountsmr.2c00094>
49. Jo, S.M.; Lee, H.Y.; Kim, J.C. Glucose-sensitivity of liposomes incorporating conjugates of glucose oxidase and poly(N-isopropylacrylamide-co-methacrylic acid-co-octadecylacrylate). *Int. J. Biol.*

Macromol. 2009, 45, 421–426. [CrossRef] [PubMed]

50. Fischel-Ghodsian, F., Brown, L., Mathiowitz, E., Brandenburg, D., Langer, R., 1988. Enzymatically controlled drug delivery. *Proc. Natl. Acad. Sci.* 85, 2403–2406.
51. Chen, C., Xie, Q., Yang, D., Xiao, H., Fu, Y., Tan, Y., Yao, S., 2013. Recent advances in electrochemical glucose biosensors: a review. *RSC Adv.* 3, 4473–4491.
52. Podual, K., Doyle, F., Peppas, N., 2000. Preparation and dynamic response of cationic copolymer hydrogels containing glucose oxidase. *Polymer* 41, 3975–3983.
53. Zhao, L., Wang, L., Zhang, Y., Xiao, S., Bi, F., Zhao, J., Gai, G., & Ding, J. (2017, June 29). Glucose Oxidase-Based Glucose-Sensitive Drug Delivery for Diabetes Treatment. *Polymers*, 9(12), 255. <https://doi.org/10.3390/polym9070255>
54. Weinzimer SA, et al. Fully automated closed-loop insulin delivery versus semiautomated hybrid control in pediatric patients with type 1 diabetes using an artificial pancreas. *Diabetes Care.* 2008; 31(5):934–939. [PubMed: 18252903]
55. Bratlie KM, et al. Materials for diabetes therapeutics. *Advanced healthcare materials.* 2012; 1(3): 267–284. [PubMed: 23184741]
56. Makino, K., Mack, E.J., Okano, T., Kim, S.W., 1990. A microcapsule self-regulating delivery system for insulin. *J. Controlled Release* 12, 235–239.
57. L. Wang et al., “Photochromism into nanosystems: towards lighting up the future nanoworld,” *Chem. Soc. Rev.*, 47 (3), 1044 –1097 (2018). <https://doi.org/10.1039/C7CS00630F> CSRVBR 0306-0012 Google Scholar
58. D. Kim et al., “Multicolor fluorescence photoswitching: color-correlated versus color-specific switching,” *Adv. Opt. Mater.*, 6 (20), 1800678 (2018). <https://doi.org/10.1002/adom.201800678> 2195-1071 Google Scholar
59. Nihar, Shah, Patel Nishith, and K. R. Patel. "A sequential review on intelligent drug delivery system." *J. Pharm. Sci. Biosci. Res* 3.5 (2013): 158-162.
60. Nagasaki, T., & Shinkai, S. (2007, April 4). *The concept of molecular machinery is useful for design of stimuli-responsive gene delivery systems in the mammalian cell.* *Journal of Inclusion Phenomena and Macrocyclic Chemistry.* <https://doi.org/10.1007/s10847-007-9303-6>
61. Halabieh, R. H. E., Mermut, O., & Barrett, C. J. (2004, January 1). *Using light to control physical properties of polymers and surfaces with azobenzene chromophores.* *Pure and Applied Chemistry.* <https://doi.org/10.1351/pac200476071445>
62. M. Karimi, P. Sahandi Zangabad, S. Baghaee-Ravari, M. Ghazadeh, H. Mirshekari, M.R. Hamblin, Smart nanostructures for cargo delivery: uncaging and activating by light, *J. Am. Chem. Soc.* 139 (13) (2017) 4584–4610, <https://doi.org/10.1021/jacs.6b08313>.
63. M. Karimi, A. Ghasemi, Z.P. Sahandi, R. Rahighi, B.S. Moosavi, H. Mirshekari, M. Amiri, P.Z. Shafaei, A. Aslani, M. Bozorgomid, D. Ghosh, A. Beyzavi, A. Vaseghi, A.R. Aref, L. Haghani, S. Bahrami, M.R. Hamblin, Smart micro/ nanoparticles in stimulus-responsive drug/gene delivery systems, *Chem. Soc. Rev.* 45 (5) (2016) 1457–1501, <https://doi.org/10.1039/c5cs00798d>.

64. P.Z. Shafaei, A. Aslani, M. Bozorgomid, D. Ghosh, A. Beyzavi, A. Vaseghi, A.R. Aref, L. Haghani, S. Bahrami, M.R. Hamblin, Smart micro/ nanoparticles in stimulus-responsive drug/gene delivery systems, *Chem. Soc. Rev.* 45 (5) (2016) 1457–1501.
65. J. Majumder, T. Minko, Multifunctional and stimuli-responsive nanocarriers for targeted therapeutic delivery, *Expert Opin. Drug Deliv.* 18 (2) (2021) 205–227, <https://doi.org/10.1080/17425247.2021.1828339>.
66. [19] S. Mura, J. Nicolas, P. Couvreur, Stimuli-responsive nanocarriers for drug delivery, *Nat. Mater.* 12 (11) (2013) 991–1003, <https://doi.org/10.1038/nmat3776>.
67. Zhang, M., Hu, W., Cai, C., Wu, Y., Li, J., & Dong, S. (2022, March). Advanced application of stimuli-responsive drug delivery system for inflammatory arthritis treatment. *Materials Today Bio*, 14, 100223. <https://doi.org/10.1016/j.mtbio.2022.100223>
68. [21] A. Raza, T. Rasheed, F. Nabeel, U. Hayat, M. Bilal, H. Iqbal, Endogenous and exogenous stimuli-responsive drug delivery systems for programmed site-specific release, *Molecules* 24 (6) (2019) 1117, <https://doi.org/10.3390/molecules24061117>.
69. Hrubý M, Filippov SK, Štěpánek P. Smart polymers in drug delivery systems on crossroads: Which way deserves following? *European Polymer Journal*. 2015;65:82-97.
70. Cheng R, Meng F, Deng C, Klok H-A, Zhong Z. Dual and multi-stimuli responsive polymeric nanoparticles for programmed site-specific drug delivery. *Biomaterials*. 2013;34:3647-57.
71. Delcea M, Möhwald H, Skirtach AG. Stimuli-responsive LbL capsules and nanoshells for drug delivery. *Advanced Drug Delivery Reviews*. 2011;63:730-47.
72. Stuart MAC, Huck WT, Genzer J, Müller M, Ober C, Stamm M, et al. Emerging applications of stimuli-responsive polymer materials. *Nature Materials*. 2010;9:101-13.
73. Murdan, S. (2003, September). Electro-responsive drug delivery from hydrogels. *Journal of Controlled Release*, 92(1–2), 1–17. [https://doi.org/10.1016/s0168-3659\(03\)00303-1](https://doi.org/10.1016/s0168-3659(03)00303-1)
74. Juliano RL. Targeted Drug Delivery. Vol 100. Ger-many: Springer-Verlag, 1991.
75. Kim SY, Lee YM. Drug release behavior of electrical re-sponsive poly(vinyl alcohol)/poly(acrylic acid) IPNhydrogels under an electric stimulus. *J Appl Polym Sci*1999; 74:1752-61.
76. Kulkarni RV, Biswanath SA. Electrically Responsive Smart Hydrogels in Drug Delivery: A Review. *Journal of Applied Biomaterials and Biomechanics*. 2007;5(3):125-139. doi:10.1177/228080000700500301
77. Mura S, Nicolas J, Couvreur P. Stimuli-responsive nanocarriers for drug delivery. *Nature Materials*. 2013;12:991-1003
78. Wang J, Sun X, Mao W, Sun W, Tang J, Sui M, et al. Tumor Redox Heterogeneity-Responsive Prodrug Nanocapsules for Cancer Chemotherapy. *Adv Mater*. 2013;25:3670-6. DOI: 10.1002/adma.201300929
79. Meng F, Hennink WE, Zhong Z. Reduction-sensitive polymers and bioconjugates for biomedical applications. *Biomaterials*. 2009;30:2180.
80. Beld J, Woycechowsky KJ, Hilvert D. Selenogluthione: efficient oxidative protein folding by a diselenide. *Biochemistry*. 2007;46:5382–90.
81. Baldwin AD, Kiick KL. Reversible maleimide-thiol adducts yield glutathione-sensitive poly(ethylene glycol)-heparin hydrogels. *Polym Chem*. 2013;4:133–43.
82. Kurnik RT, Berner B, Tamada J, Potts RO. Design and simulation of a reverse iontophoretic glucose monitoring device. *J Electrochem Soc* 1998; 145: 4119-25.

83. Riley, W.J.; Silverstein, J.H.; Rosenbloom, A.L.; Spillar, R.; McCallum, M.H. Ambulatory diabetes management with pulsed subcutaneous insulin using a portable pump. *Clin. Pediatrics(Phila)* **1980**, *19*, 609–614. [Google Scholar] [CrossRef]
84. Radermecker, R.P.; Scheen, A.J. Continuous subcutaneous insulin infusion with short-acting insulin analogues or human regular insulin: Efficacy, safety, quality of life, and cost-effectiveness. *Diabetes Metab. Res. Rev.* **2004**, *20*, 178–188. [Google Scholar] [CrossRef] [PubMed]
85. Wang, Y., Wang, H., Zhu, X. X., Guan, Y., & Zhang, Y. (2020). Smart microneedle patches for rapid, and painless transdermal insulin delivery. *Journal of Materials Chemistry B*, 8(40), 9335–9342. <https://doi.org/10.1039/d0>

