



Received on 04 January, 2018; received in revised form, 02 February, 2018; accepted, 13 February, 2018; published 01 May, 2018

ROLE OF NATURAL COMPOUNDS - ENCAPSULATED NANOPARTICLES IN DISEASES TREATMENT

Seyyed Hossein Hassanpour^{* 1}, Mohammad Amin Dehghani², Seyyed Mozaffar Alipour³, Seyyedeh Zeinab Karami⁴ and Fatemeh Dehghani⁵

Young Researchers and Elite Club¹, Yasooj Branch, Islamic Azad University, Yasooj, Iran.

Department of Toxicology², School of Pharmacy, Ahvaz Jundishapour University of Medical Sciences, Ahvaz, Iran.

Department of Environmental Health³, School of Health, Yasouj University of Medical Sciences, Yasouj, Iran.

Department of Biology⁴, School of Basic Sciences, Yasouj University, Yasouj, Iran.

Department of Genetics⁵, Faculty of Medicine, Shiraz University of Medical Sciences, Shiraz, Iran.

Keywords:

Nanotechnology,
Pharmaceutical products,
Nanoparticles, Drug, Bioavailability

Correspondence to Author: Seyyed Hossein Hassanpour

Young Researchers and Elite
Club, Yasooj Branch, Islamic
Azad University, Yasooj, Iran.

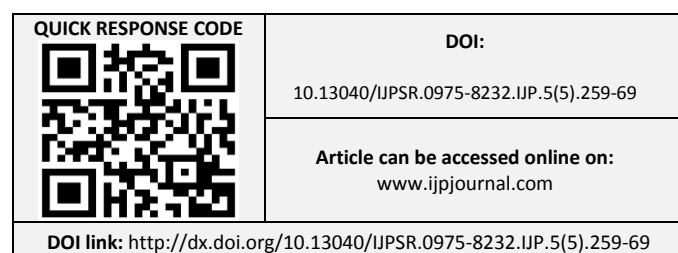
Email: Dr.hossein1366@yahoo.com

ABSTRACT: During the last decades, nanotechnology has entered in many areas and leads to amazing scientific developments Worldwide. Meanwhile, the pharmaceutical industry has not been deprived and nanotechnology inventions lead to supply new and innovative pharmaceutical products. In this study, we reviewed the role of nanoparticles with bioactive compounds in order to diseases treatment. In order to reach this purpose, we searched keywords such as nanoparticles and compounds and diseases, nanoparticles and drug delivery and diseases in databases including web of science, PubMed and Scopus. In the last decade, it has been confirmed use of nanotechnology-based drugs in order to increase their efficiency and effectiveness especially in pharmaceutical researches and clinical studies. Today, there are many systems based on nanoparticles for targeting and transport of drug. In fact, nanoparticles lead to reduction of drug destruction, inhibition of side effects and increase of bioavailability. In this paper, we reviewed effects of nanoparticles as carrying of compounds with bioactive property in the treatment of diseases.

INTRODUCTION: In recent years, to focus new drug delivery systems such as nano-drug in order to treatment of diseases significantly increases. In order to deliver of effective dose of drug and inhibition of side effects, pharmaceutical field require carriers with appropriate formulations.

In this regard, the use of colloidal carriers such as liposomes and nanoparticles can be good strategies to achieve this goal. It has been demonstrated that delivery systems based on nanoparticles have good efficacy, less toxicity, more convenience for patient, as well as obvious bioavailability¹⁻³.

Generally, nano-particles have widespread use such as carrier for anti-microbial and anti-cancer drug as well as peptides and proteins such as insulin. In addition, the first nanoparticles have developed in order to production of vaccine against tetanus and diphtheria by Markle and Speiser⁴.



The nanoparticles are classified into two main groups including: the nanoparticles with organic molecules as the main material and another, nanoparticles with metals and minerals as main material⁵⁻⁷. There are several methods for nanoparticles preparing so that they provide major changes in the structure, composition and physico-chemical property. Selection of a method for nanoparticles producing is depended on drug solubility and its biological activity as well as particle size range. In the selection of raw materials needed to produce nanoparticles, features such as biocompatibility, degradation, administration method of final formulation and of the drug releasing should be considered⁸. In fact, by preparation of drug nanoparticles, can be achieved unique features that lead to a better efficacy and variety in drug forms.

In addition, their precise formulations of these particles lead to their more stability and can increase their dissolution and ultimately reach to their biological level. These events accelerate bioavailability and therapeutic effect of drugs. It has been showed that development of new drugs is not alone effective in drug therapy because low solubility of some drugs in water is considered as their main problem. Therefore, it seems that is very necessary to develop drug delivery systems for overcome these problems. These systems should be non-toxic carriers with high capacity for drug carrying and ability of drug releasing control⁹.

Many drugs with various applications have successfully embedded in nanoparticles. These drug delivery systems lead to controlled releasing of drugs and increase their chemical stability. In addition, these systems are safe carriers that can be easily produced on a large scale¹⁰⁻¹². The aim of this study was to review the effect of nanoparticles with bioactive compounds in treatment of diseases.

Review Method: In this study, we reviewed the role of nanoparticles with bioactive compounds in order to diseases treatment. In order to reach this purpose, we searched keywords such as nanoparticles and compounds and diseases, nanoparticles and drug delivery and diseases in databases including web of science, PubMed and Scopus. After searching, the paper were read and summarized here.

Role of Natural Compounds - Encapsulated Nanoparticles in Diseases Treatment: Ellagic acid is an antioxidant phenolic compound comprised four rings with hydroxyl groups and two lactone rings that reflect its hydrophilic part. Ellagic acid is dimer form of gallic acid and pomegranates, grapes and strawberries are rich of ellagic acid¹³. It has been reported range of activities such as antioxidant, antiviral and anticancer from this compound¹⁴⁻¹⁶. Ellagic acid is a commercial valuable compound that is used as capsule and powder for various diseases such as cancer and heart disease as a dietary supplement¹⁵.¹⁷ It have been confirmed its anticancer property against in colon, liver and lung¹⁸. However, its low stability in aqueous solution and limited bioavailability has limited its use in the treatment¹⁹. This problem is solvable by nanotechnology and advances in the field of drug delivery for example; chitosan has necessary performance for this work.

In addition, liposomes, polymeric nanoparticles, lipid nanoparticles, cyclodextrin and hydrogel are appropriate candidates to achieve this idea²⁰. Nevertheless, biopolymeric nanoparticles are widely used because it can prevent the destruction of the drug under *in vivo* condition and have great ability to transfer large amounts of the drug and can to the target location²¹. In addition, chitosan nanoparticle is used as a promising carrier for anticancer drugs²². Kim *et al.*, in 2009 reported that chitosan can be a suitable carrier for transferring of ellagic acid to the tumor site because treatment of human melanoma cell lines (WM115) with chitosan nanoparticles carrying ellagic acid leads to reduction of cell growth of tumor and apoptosis induction²³.

Chitosan enhances antitumor activity of ellagic acid so that the nanoparticles of chitosan containing of ellagic acid results in reduction of growth, activation of caspase-3 in human U87 glioblastoma cell lines and rat C6 glioma at the end of treatment period. In addition, it could abrogate amount of tumor cells in rats with C6 glioma²⁴. Arulmozhi *et al.*, in 2013 indicated that ellagic acid encapsulated chitosan has many performances to destroy the human oral cancer cell line (KB) so that it reduced cancer cells significantly and induced apoptosis²⁵. Nano-sized metalla-cages containing of ellagic acid has anti-cancer activity while free ellagic acid has

not obvious cytotoxic effect against granulocyte colony of T cell expression stimulating but nano-sized metalla-cages containing of ellagic acid reduced T cells expression in the macrophage cell line RAW264²⁶.

In addition, alginate-silver nanoparticles increase efficiency of ellagic acid in treatment of breast cancer. In fact, treatment of MCF-7 as a breast cancer cell line by the ellagic acid encapsulated alginate-silver nanoparticles led to reduction of cancer cells²⁷. Berberine is an isoquinoline alkaloid with therapeutic effects and found in plants such as *Coptis chinensis*, *Berberis aquifolium* *Berberis vulgaris*^{28, 29}. It has been demonstrated wide range of biochemical and pharmacological activities such as anti-diarrheal and anti-cancer effects from berberine^{30, 31}. Today, the uses of nanoparticles have increased to transfer compounds with therapeutic features³². In a study, it was showed that berberine conjugated with silica nanoparticles has promising antitumor activity²⁸.

Xiang-Ping Meng et al., 2016 showed that incubation HepG2 and Huh7 cell lines and EC9706 cells with lipid nanoparticles containing berberine lead to a significant reduction of cancer cells growth. In fact, in this study the anticancer property of lipid nanoparticles containing berberine against HCC was confirmed³³. A research group was studies the anti-tumor property of Janus magnetic mesoporous silica nanoparticles as a delivery system for berberine. This nanoparticles had properties such as non-identical surface, good magnetic strength, proper drug loading, obvious endocytic ability and prominent cytotoxic.

Incubation of HCC cells with mentioned nanoparticles led to reduction of tumor cells due to proper drug delivery to target location. Meanwhile, drug distribution was not obvious in hepatocytes. In addition, outer surface of the magnetic had pivotal role to entry drug into cell due to magnetic property³⁴. The use of lipid nanoparticles as a suitable delivery system increases anticancer activity berberine against hepatocarcinoma cell line H22 because treatment with nanoparticles containing berberine reduced tumor growth significantly³⁵.

Silica nanoparticles have pivotal role to increase anti-tumor activity of berberine. According to a

study conducted by Halimani and colleagues in 2009, the effect of the nanoparticle-containing berberine against human cervical carcinoma cell line (HeLa), hepatocellular carcinoma cell line (HepG2) and embryonic kidney cell (293T) were assessed. The results showed that the antitumor activity of nanoparticles containing berberine is more than free berberine form. This effect occurred through cell cycle arrest in G1 phase. In addition, apoptosis induction was another reason to reduce tumor mass²⁸. Selenium is a vital element in maintaining of body health and recent studies have been confirmed its anticancer property against prostate and colorectal cancers in animal models³⁶⁻³⁸. These observations were unexpected, daily intake of selenium as a supplement can be beneficial to all people, and it was found reduction of cancer after treatment with selenium only in people with plasma selenium level 1.53 $\mu\text{mol/l}$ before their entering to clinical trials³⁹. Selenium performance is reflected by selenoproteins and its metabolites that both are tumor regulators^{40, 41}.

In fact, it has been found at least 25 different selenoproteins with especial antioxidant activity while selenium metabolites induce reactive oxygen species⁴². Selenium in lethal doses leads to abrogation of cancer cells through induction of apoptosis and cell cycle arresting⁴³⁻⁴⁵. However, it has been showed neurological effects at high doses so that a daily intake of selenium supplements contain (60 - 120 $\mu\text{g/kg}$ body weight) leads to mental disorders⁴⁶. Today, advances in nanotechnology facilitates to develop new methods for embedding of selenium in nanomaterials that have significant potential for use in medical field, diagnosis of diseases, toxicology and treatment⁴⁷.

In fact, in order to increase of efficiency of selenium, can use nanoparticles because they can control selenium releasing for reduction of toxic effects⁴⁸. Chen et al., 2008 demonstrated that selenium nanoparticles with polysaccharides *Undaria pinnatifida* induce apoptosis in human melanoma cell line (A375) through increase of oxidative stress and mitochondrial dysfunction⁴⁹. In a study, it was found that selenium nanoparticle inhibits growth of prostate cancer cell line (LNCaP) and leads to apoptosis induction by activation of caspases.

In addition, it resulted in down regulation of androgen receptor, increase of Akt kinase phosphorylation and androgen receptor depended on Akt and Mdm2 degradation by proteasome pathway⁵⁰. Yazdi *et al.*, 2012 reported that due to anticancer effects of selenium nanoparticles against cell line 4 T1 and stimulation of Th1 cytokine such as IFN- γ and IL-12 in mice's spleen suffered from breast cancer, therefore it can be a promising drug to control and reduction of breast cancer⁵¹. Reduction of growth of cell lines MDA-MB-231 and HeLa occurs after treatment with selenium nanoparticles. Meanwhile, this nanoparticle arrest cell cycle in S phase after incubation in HeLa cells. MTT test confirms reduction of cancer cells after treatment.

According to this study, selenium nanoparticle is a good drug for cancer treatment⁵². Nanoparticles Selenium enriched by strain *Lactobacillus plantarum* is effective in stimulating of immune system against breast cancer induced in mice because it leads to increase of inflammatory cytokines levels such as IFN- γ , TNF- α and IL-2 as well as increase of natural killer cells (NK cell) activation⁵³. Gallic acid is considered as an anti-tumor natural compound found in plants such as grapes, pomegranates, vegetables, rose and green tea⁵⁴. However, it is a safe drug due to lack of toxic effects on fibroblast and endothelial cells⁵⁵.

To exposure compounds with anti-tumor property in a suitable delivery system greatly reduces their toxic effects lead to their accurate transferring to desired location. Nano-carriers such as nanoparticles and liposomes can be perfect candidate for this work⁵⁶. Despite the favorable effects of gallic acid in reduction of oxidative stress, but it is not desirable pharmacokinetic property due to slight bioavailability that leads to limiting its use in the treatment of diseases. Use of nanoparticle is one of the strategies to solve this problem. In a study, it was found that chitosan-glycerol phosphate nanoparticle could be a delivery system for gallic acid so that it dramatically increased antioxidant effect of gallic acid⁵⁷. Gallic acid is a compound with antidepressant property due to reduction of glutathione level and improvement of oxidative status in the central nervous system. In fact, the use of nanoparticle was very helpful in promotion of its antioxidant property and subsequently depression

reduction⁵⁸. Silica nanoparticle is used to transfer gallic acid due to have high stability, low toxicity, therefore it can deliver hydrophilic and hydrophobic compounds such as wide range of drugs, biological active compounds and proteins⁵⁹. Nanoparticles increase cytotoxic activity of gallic acid against cell lines Caco-2 cells⁶⁰. The use of nanoparticles to deliver gallic acid into cancer cells improves its anticancer activity.

In fact, the treatment of cervical cancer cell lines (CaSki and HeLa) with gallic acid covered by fifteen-nanometer spherical gold nanoparticles result in tumor growth inhibition, apoptosis induction without significant cytotoxic effect in normal cells⁶¹. Rattanata *et al.*, 2014 found that transfer of gallic acid into adenocarcinoma cell lines (M213, M214) by gold nanoparticles lead to increase of tumor growth inhibition and improvement of gallic acid efficacy in association with apoptosis induction⁶². Polymeric nanoparticles formed from chitosan as a delivery system to transfer gallic acid have good solubility under neutral and basic conditions. In addition, antioxidant and cytotoxic activity of this nanoparticle against cell line (Caco-2) related to colon cancer was showed that they have potential ability to abrogate cancer cell lines due to obvious drug delivery to tumor site⁶³. Zhou *et al.*, 2016 reported that nanoparticle Se/Ru alloy with gallic acid is an anti-cancer drug and induces apoptosis HeLa cell line. Moreover, it inhibits migration and transfer of cancer cells by inactivation of matrix metalloproteinases such as MMP 2 and MMP-9⁶⁴.

Melatonin (N-acetyl 5-methoxy Tryptamyn) is a hormone secreted by pineal gland that involved in sleep-wake cycle. Darkness stimulates its secretion and stimulation of retinal neurons by light suppresses its secretion⁶⁵. During day, its secretion amount is 10 pg/ml but it is increased at 9 pm and reached the greatest of its level during 2 - 4 am (70 - 100 pg / ml)⁶⁶. For clinical purposes, artificial melatonin has same functional endogenous melatonin but it has not significant pharmacokinetic property and its half-life is very low⁶⁷. Its bioavailability is very low and it easily excreted from the body due to liver metabolism⁶⁸. Use of a delivery system is essential for melatonin and nanoparticle can be a good candidate to solve this problem⁶⁹.

In fact, the nanoparticles can cover hydrophilic and lipophilic compounds in themselves and be helpful in their transfer into the desired location ⁷⁰. In a study, it was showed that use of lipid nanoparticle for transfer of melatonin resulted in improvement of melatonin plasma levels that led to increase of its efficacy ⁶⁹. According to a study conducted by Topal *et al.*, 2015, it was proven that melatonin combined with nanoparticles 2-hydroxypropyl- β -cyclodextrin in a complex reduces growth rate in cell line MG-63 due to cell cycle arresting in G2/M phase instead of S phase because the mentioned complex increased the stability and releasing of melatonin ⁷¹.

In another study, it has been showed that the use of poly (d, l-lactide-co-glycolide) nanoparticle for transfer of melatonin leads to increase of anticancer activity against cell lines MG-63 so that this polymeric system could improve conditions for chemotherapy against osteosarcoma ⁷². The most common types of nanoparticles used for drug delivery are polymer nanoparticles, solid lipid nanoparticles (SLNs), crystal nanoparticles, liposomes, micelles, and dendrimers **Fig. 1A**. Each of these nanoparticles has its own advantages and disadvantages as drug delivery vehicle. Polymeric nanoparticles have been the most tested in combination with natural products. Poly(lactic-co-glycolic acid) (PLGA), polyethylene glycol (PEG), polyvinyl alcohol (PVA), poly-l-lactic acid (PLA), polycaprolactone (PCL), and chitosan are the most common polymers used due to their biocompatibility, biodegradability, and the fact that they are easy to functionalize **Fig. 1B**.

Chitosan itself is a natural polymer that has gained attention recently in applications with natural product delivery ^{73 - 79}. There are two types of polymeric nanoparticles: nanocapsules and nanospheres **Fig. 1C**. Nanocapsules contain a drug-filled core, which is surrounded by a polymer membrane. The nanospheres are porous and the drug is uniformly distributed among the pores ⁸⁰. To overcome some limitations in the old-generation SLNs, liquid lipid has been incorporated into the solid structure; resulting in nanostructured lipid carriers **Fig. 1D**. Three types of lipid nanoparticles have been described: an imperfect type, an amorphous type, and a multiple type. The imperfect

type contains spatially different lipids and allows for increased drug-loading capacity. The amorphous type mixes solid lipids with special lipids, such as medium-chain triglycerides, to prevent crystallization and drug expulsion during storage. The multiple-type nanoparticle has added liquid lipids that increase the solubility of many drugs and decrease drug expulsion during storage. Structures of selected natural compounds discussed in this review are shown in **Fig. 2**. Relevant physicochemical properties of the selected compounds are listed in **Table 1**.

TABLE 1: PHYSICO - CHEMICAL PROPERTIES OF SELECTED NATURAL COMPOUNDS

Natural Compound	Partition coefficient (logP)	Polar surface area/Molecular surface area \AA^2
Apigenin	2.71	86.99/326.60
Baicalin	2.71	86.99/325.74
Berberin	-1.28	40.8/473.39
Caffeic acid	1.53	77.76/226.17
Caffeine	-0.55	58.44/269.15
Catechine	1.80	110.38/373.00
Cinnamaldehyde	1.98	17.07/194.07
Curcumin	4.12 \cdot 3.29 ^b	93.06/194.07
Epigallocatechin gallate	3.08	197.37/556.67
Ellagic acide	3.32	133.52/319.89
Epicatechin	1.80	110.38/373.01
Eugenol	2.61	29.46/257.78
Gambogic acid	7.78	119.36/906.97
Genistein	3.08 \cdot 3.04 ^c	86.99/325.45
6-Gingerol	3.62	66.76/507.44
Hydroxytyrosol	0.89	60.69/230.61
Kaempferol	2.46 \cdot 3.11 ^c	107.22/337.38
Luteolin	2.40	107.22/337.39
Morin	2.16	127.45/348.34
Naringenin	2.88 \cdot 2.6 ^c	86.99/351.09
Oleuropein	0.11	201.67/727.25
Paeonol	1.72	46.53/251.92
Quercetin	2.16 \cdot 1.82 ^c	127.45/348.11
Resveratrol	3.40	60.69/308.38
Rosmarinic acid	3.00	144.52/456.21
Salidroside	-0.58	119.61/426.44
Salvianolic acide B	pH dependent ^d	N/A
Silibinin	2.63	155.14/614.71
Tanshinone I	4.00	47.28/368.83
Taxifolin	1.82	127.45/367.80
Thymoquinone	2.55	34.14/245.97
Tyrosol	1.19	40.46/219.74
Ursolic acid	6.58	57.53/795.27

Notes: ^aLogP and surface area values are obtained from source <http://www.chemicalize.org> unless specified; ^bData from Gryniewicz G *et al.*, 2012; ^cData from Rothwell JA *et al.*, 2005. ^dData from Li J *et al.*, 2013.

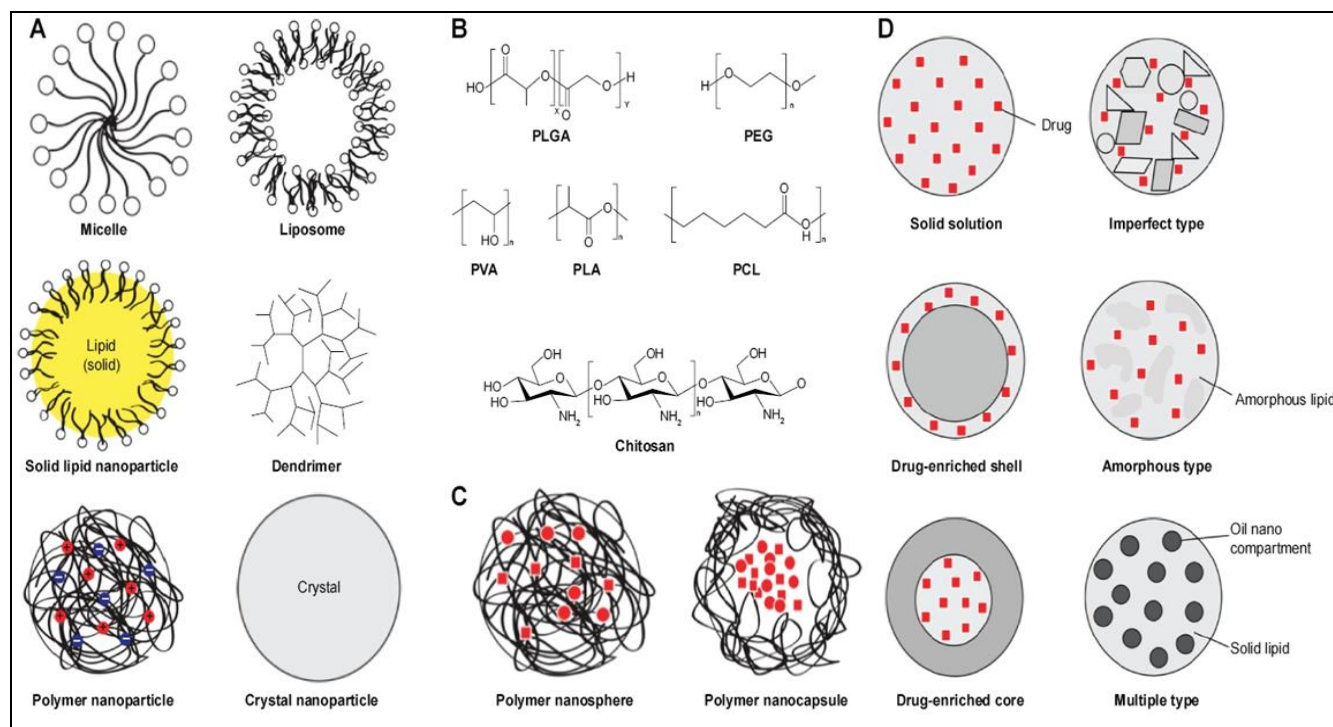
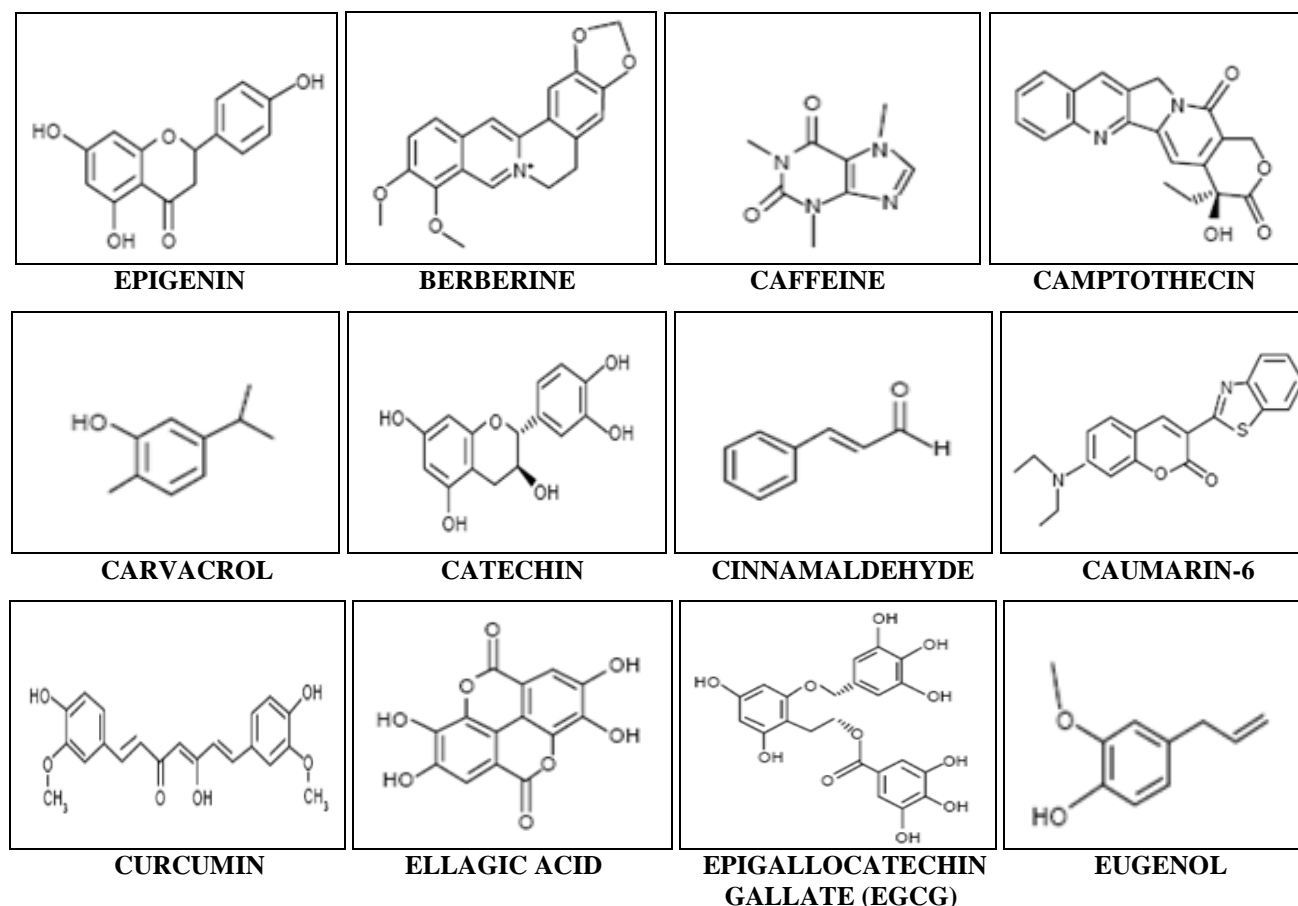


FIG. 1: SCHEMATIC REPRESENTATION OF NANOPARTICLES

Notes: (A) Graphical representations of the most common types of nanoparticles. Charges in polymers are indicated as red and blue circles for some polymer nanoparticles. (B) Chemical structures of the most common types of polymers used in polymer nanoparticles. (C) Graphical representations of the two types of polymer nanoparticles. The drugs incorporated are shown in red. (D) Drug-incorporation models in solid lipid nanoparticles (left) and types of nanostructured carriers (right). Abbreviations: PLGA, poly (lactic-co-glycolic acid); PEG, polyethylene glycol; PVA, polyvinyl alcohol; PLA, poly-L-lactic acid; PCL, polycaprolactone.



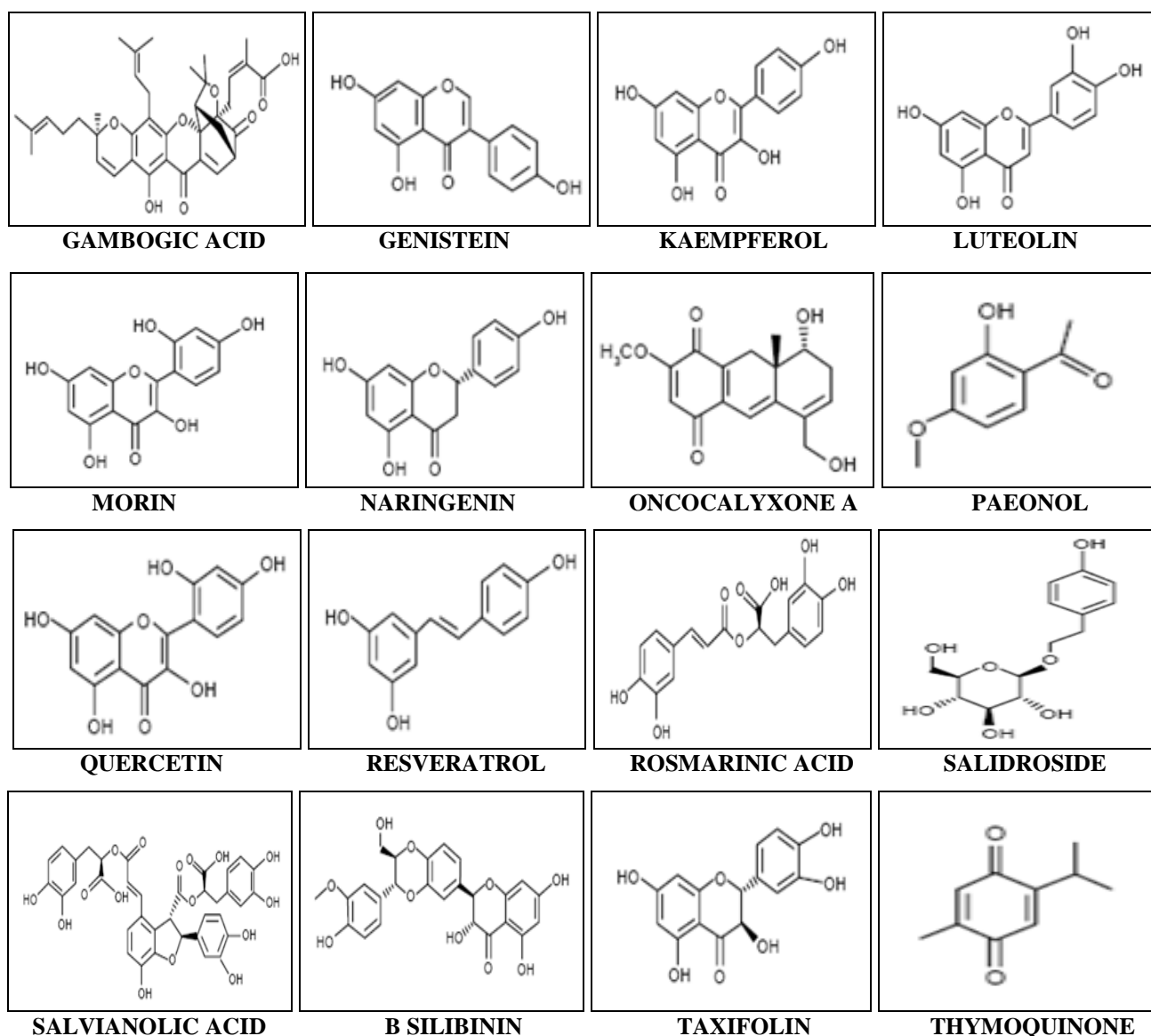


FIG. 2: CHEMICAL STRUCTURES OF SELECTED NATURAL COMPOUNDS DISCUSSED IN THIS REVIEW

Bioavailability: Nanoparticles can improve the effectiveness of natural compounds in disease treatment and prevention by increasing their bioavailability. Many of the studied natural compounds, such as curcumin, resveratrol, and EGCG, are highly lipophilic **Table 1**. Highly lipophilic compounds are not ideal for drug delivery because they do not dissolve well in the bloodstream. These compounds have a low bioavailability, and therefore large quantities of the compounds must be administered in order to achieve the desired therapeutic effects. The large dose size of these compounds can lead to acute toxicity or low patient compliance. Just encapsulating these highly lipophilic compounds can improve their water solubility and efficiency. Celia *et al.*,⁸¹ have found that bergamot essential

oil, which has anticancer properties, when encapsulated in liposomes, showed improved solubility of the drug and led to increased cell death *in vitro*. This was also true for nanoemulsified berberine.

The nanoberberine was added to a phosphate buffer and in 45 minutes, 85% of the compound dissolved, compared to only 60% of the free berberine in the same time period. Other classes of natural compounds, such as tannins and terpenoids, are highly hydrophilic. These compounds have low bioavailability because they cannot cross biological membranes. In both of these cases, incorporating the natural compound into a nanoparticle can improve the bioavailability and lower the dose needed to obtain a therapeutic effect. **Table 2**

provides several examples of nanoparticle formulations and adjuvants that increase the bioavailability (drug concentration in plasma) of selected natural compounds. Curcumin, a diarylheptanoid derived from turmeric, has generated immense interest as a lead compound

against a variety of health conditions, including cancer, inflammation, microbial infection, angiogenesis, amyloidosis, wound healing, and alleviation of morphine tolerance. However, poor bioavailability is a major limitation to the therapeutic utility of curcumin in clinical trials.

TABLE 2: COMPARISON OF PLASMA CONCENTRATIONS OF NATURAL COMPOUNDS WITH THE USE OF NANOPARTICLES OR ADJUVANTS AND IN FREE DRUG FORM

Natural compound	Nanoparticle or adjuvant	Dose	Plasma concentration		Mixture (free drug mixed with empty nanoparticle)
			Encapsulated by nanoparticle (or with piperine)	Free drug	
Apigenin	Carbon nanopowder solid dispersion	60 mg/kg body weight ⁸²	3.26 µg/mL	1.33 µg/mL	1.43 µg/mL
Curcumin	Liposome	100 mg/kg body weight ⁸³	319.2 µg/L	64.6 µg/L	78.3 µg/L
Curcumin	Solid lipid nanoparticle	50 mg/kg body weight ⁸⁴	14.29 µg/mL	0.292 µg/mL	N/A
Curcumin	PLGA nanoparticle	100 mg/kg body weight ⁸⁵	6.75 µg/mL	1.55 µg/mL	N/A
Curcumin	Piperine as adjuvant in rats	2 g/kg curcumin and 20 mg/kg piperine body weight ⁸⁶	1.8 µg/mL	1.35 µg/mL	N/A
Curcumin	Piperine as adjuvant in humans	2 g/kg curcumin and 20 mg/kg piperine body weight ⁸⁶	0.006 µg/mL	0.18 µg/mL	N/A
EGCG	Piperine as adjuvant in mice	163.8 µmol/kg EGCG and 72.2 µmol/kg piperine body weight ⁸⁷	0.66 µmol/L	0.32 µmol/L	N/A
Taxifolin	Nanoparticles liquid antisolvent precipitation	50 mg/kg body weight ⁸⁸	13.5 ng/mL	1.3 ng/mL	N/A

Abbreviations: EGCG, epigallocatechin gallate; N/A, not available; PLGA, poly (lactic-co-glycolic acid)

CONCLUSION: In recent decades, it has been examined the ability of nanoparticles in drug delivery. These studies confirmed that nanoparticles could be considered as good strategy in order to improvement of pharmacodynamic and pharmacokinetic of drugs. In addition, use of nanoparticles at *in vivo* models confirms that they can maintain bioavailability of drugs in blood circulating system. Moreover, they can control drug releasing. It has been used different polymers to formulate nanoparticles in order to promotion of their therapeutic effect and reduction of their side effects.

In this review, we showed that nanoparticle could be considered as good carriers for bioactive compound. Therefore, in order to achievement of better findings should be more attention to nanoparticles in further studies.

ACKNOWLEDGEMENT: Us acknowledgement and gratefulness at the beginning and at last is to god who gave us the gift of the mind. The authors thank Young Researchers and Elite Club, Yasooj Branch, Islamic Azad University due to cooperation in this study.

CONFLICT OF INTEREST: The authors declare that there is no conflict of interest regarding this study.

FINANCIAL SUPPORT AND SPONSORSHIP: This study was supported by the authors named in this article alone.

CONTRIBUTION OF AUTHORS: This work was done by the authors named in this article and all liabilities pertaining to claims relating to the content of this article was borne by the authors named in this article.

ETHICAL APPROVAL: This research does not contain any studies with human participants or animals and was performed by the authors alone.

REFERENCES:

1. Douglas S, Davis S and Illum L: Nanoparticles in drug delivery. Critical reviews in therapeutic drug carrier systems 1986; 3(3): 233-261.
2. Lockman P, Mumper R, Khan M and Allen D: Nanoparticle technology for drug delivery across the blood-brain barrier. Drug development and industrial pharmacy 2002; 28(1): 1-13.
3. Xia X, Hu Z and Marquez M: Physically bonded nanoparticle networks: A novel drug delivery system. Journal of controlled release 2005; 103(1): 21-30.

4. Kreuter J: Nanoparticles - A historical perspective. International journal of pharmaceuticals 2007; 331(1): 1-10.
5. Park JW: Liposome-based drug delivery in breast cancer treatment. Breast Cancer Research 2002; 4(3): 95.
6. Salehzadeh R and Abdullah R: Solid lipid nanoparticles as new drug delivery system. International Journal of Biotechnology and Molecular Biology Research 2011; 2(13): 252-261.
7. Wesolowski J, Alzogaray V, Reyelt J, Unger M, Juarez K, Urrutia M *et al.*: Single domain antibodies: promising experimental and therapeutic tools in infection and immunity. Medical microbiology and immunology 2009; 198(3): 157-174.
8. Mathiowitz E: Encyclopedia of controlled drug delivery: Wiley-Interscience 1999.
9. Mehnert W and Mäder K: Solid lipid nanoparticles: production, characterization and applications. Advanced drug delivery reviews 2001; 47(2): 165-96.
10. Akbari J, Enayatifard R, Saeedi M and Saghafi M: Influence of hydroxypropyl methylcellulose molecular weight grade on water uptake, erosion and drug release properties of diclofenac sodium matrix tablets. Tropical Journal of Pharmaceutical Research 2011; 10(5): 535-541.
11. Akbari J, Nokhodchi A, Farid D, Adrangui M, Siahi-Shadbad MR and Saeedi M: Development and evaluation of buccoadhesive propranolol hydrochloride tablet formulations: effect of fillers. Il Farmaco 2004; 59(2): 155-161.
12. Enayatifard R, Saeedi M, Akbari J and Tabatabaee YH: Effect of hydroxypropyl methylcellulose and ethyl cellulose content on release profile and kinetics of diltiazem HCl from matrices. Tropical Journal of Pharmaceutical Research 2009; 8(5): 425-432.
13. Dalton PD, Woodfield T and Hutmacher DW: Erratum to: Snap Shot: polymer scaffolds for tissue engineering [Biomaterials 30/4 (2009) 701-702]. Biomaterials 2009; 30(12): 2420.
14. Rogério AP, Fontanari C, Borducchi É, Keller AC, Russo M, Soares EG *et al.*: Anti-inflammatory effects of *Lafoensia pacari* and ellagic acid in a murine model of asthma. European Journal of Pharmacology 2008; 580(1): 262-270.
15. Falsaperla M, Morgia G, Tartarone A, Ardito R and Romano G: Support ellagic acid therapy in patients with hormone refractory prostate cancer (HRPC) on standard chemotherapy using vinorelbine and estramustine phosphate. European Urology 2005; 47(4): 449-455.
16. Larrosa M, Tomás-Barberán FA and Espín JC: The dietary hydrolysable tannin punicalagin releases ellagic acid that induces apoptosis in human colon adenocarcinoma Caco-2 cells by using the mitochondrial pathway. The Journal of nutritional biochemistry 2006; 17(9): 611-625.
17. Sellappan S and Akoh CC: Flavonoids and antioxidant capacity of Georgia-grown *Vidalia* onions. Journal of Agricultural and Food Chemistry 2002; 50(19): 5338-5342.
18. Arulmozhi V and Mirunalini S: Ellagic acid: A novel polyphenolic antioxidant and their therapeutic applications. Pharmacologyonline 2010; 3: 446-457.
19. Hariharan S, Bhardwaj V, Bala I, Sitterberg J, Bakowsky U and Kumar MR: Design of estradiol loaded PLGA nanoparticulate formulations: A potential oral delivery system for hormone therapy. Pharmaceutical research 2006; 23(1): 184-195.
20. Duan K, Zhang X, Tang X, Yu J, Liu S, Wang D *et al.*: Fabrication of cationic nanomicelle from chitosan-graft-polycaprolactone as the carrier of 7-ethyl-10-hydroxycamptothecin. Colloids and Surfaces B: Biointerfaces 2010; 76(2): 475-482.
21. Kumari A, Yadav SK and Yadav SC: Biodegradable polymeric nanoparticles based drug delivery systems. Colloids and Surfaces B: Biointerfaces 2010; 75(1): 1-18.
22. Anitha A, Deepa N, Chennazhi K, Lakshmanan VK and Jayakumar R: Combinatorial anticancer effects of curcumin and 5-fluorouracil loaded thiolated chitosan nanoparticles towards colon cancer treatment. Biochimica et Biophysica Acta (BBA)-General Subjects 2014; 1840(9): 2730-2743.
23. Kim S, Liu Y, Gaber MW, Bumgardner JD, Haggard WO and Yang Y: Development of chitosan - ellagic acid films as a local drug delivery system to induce apoptotic death of human melanoma cells. Journal of Biomedical Materials Research Part B: Applied Biomaterials 2009; 90(1): 145-155.
24. Kim S, Gaber MW, Zawaski JA, Zhang F, Richardson M, Zhang XA *et al.*: The inhibition of glioma growth *in vitro* and *in vivo* by a chitosan / ellagic acid composite biomaterial. Biomaterials 2009; 30(27): 4743-4751.
25. Arulmozhi V, Pandian K and Mirunalini S: Ellagic acid encapsulated chitosan nanoparticles for drug delivery system in human oral cancer cell line (KB). Colloids and Surfaces B: Biointerfaces 2013; 110: 313-320.
26. Dubey A, Park DW, Kwon JE, Jeong YJ, Kim T, Kim I *et al.*: Investigation of the biological and anti-cancer properties of ellagic acid-encapsulated nano-sized metallacages. International journal of nanomedicine 2015; 10(Spec Iss): 227.
27. Hussein-Al-Ali SH, Balavandy SK, Abidin ZZ, Kura AU, Fakurazi S, Hussein MZ *et al.*: The *in vitro* Therapeutic Activity of Ellagic Acid-Alginate-Silver Nanoparticles on Breast Cancer Cells (MCF-7) and Normal Fibroblast Cells (3T3). Science of Advanced Materials 2016; 8(3): 545-553.
28. Halimani M, Chandran SP, Kashyap S, Jadhav V, Prasad B, Hotha S *et al.*: Dendritic effect of ligand-coated nanoparticles: enhanced apoptotic activity of silica-berberine nanoconjugates. Langmuir 2009; 25(4): 2339-2347.
29. Rojsanga P, Gritsanapan W and Suntornsuk L: Determination of berberine content in the stem extracts of *Coscinium fenestratum* by TLC densitometry. Medical Principles and Practice 2006; 15(5): 373-378.
30. Newman DJ, Cragg GM and Snader KM: KMJ Nat. Prod 2003; 66: 1022-1037.
31. Mantena SK, Sharma SD and Katiyar SK: Berberine inhibits growth, induces G1 arrest and apoptosis in human epidermoid carcinoma A431 cells by regulating Cdk1-Cdk-cyclin cascade, disruption of mitochondrial membrane potential and cleavage of caspase 3 and PARP. Carcinogenesis 2006; 27(10): 2018-2027.
32. Lin YS, Tsai CP, Huang HY, Kuo CT, Hung Y, Huang DM *et al.*: Well-ordered mesoporous silica nanoparticles as cell markers. Chemistry of Materials 2005; 17(18): 4570-4573.
33. Meng XP, Fan H, Wang YF, Wang ZP, Chen TS and editors: Anti-hepatocarcinoma effects of berberine-nanostructured lipid carriers against human HepG2, Huh7, and EC9706 cancer cell lines. SPIE/COS Photonics Asia; 2016: International Society for Optics and Photonics.
34. Wang Z, Wang YS, Chang ZM, Li L, Zhang Y, Lu MM *et al.*: Berberine-loaded Janus nanocarriers for magnetic field-enhanced therapy against hepatocellular carcinoma. Chemical biology and drug design 2016.

35. Wang ZP, Wu JB, Chen TS, Zhou Q, Wang YF and editors: *In vitro* and *in vivo* antitumor efficacy of berberine-nanostructured lipid carriers against H22 tumor. SPIE BiOS; International Society for Optics and Photonics 2015.
36. Clark LC, Combs GF, Turnbull BW, Slate EH, Chalker DK, Chow J *et al.*: Effects of selenium supplementation for cancer prevention in patients with carcinoma of the skin: A randomized controlled trial. *Jama* 1996; 276(24): 1957-1963.
37. Wang L, Bonorden MJ, Li GX, Lee HJ, Hu H, Zhang Y *et al.*: Methyl-selenium compounds inhibit prostate carcinogenesis in the transgenic adenocarcinoma of mouse prostate model with survival benefit. *Cancer prevention research* 2009; 2(5): 484-495.
38. Finley JW: Reduction of cancer risk by consumption of selenium-enriched plants: enrichment of broccoli with selenium increases the anticarcinogenic properties of broccoli. *Journal of medicinal food* 2003; 6(1): 19-26.
39. Rayman MP, Combs GF and Waters DJ: Selenium and Vitamin E supplementation for cancer prevention. *Jama* 2009; 301(18): 1876-1877.
40. Hatfield DL, Yoo M-H, Carlson BA and Gladyshev VN: Selenoproteins that function in cancer prevention and promotion. *Biochimica et Biophysica Acta (BBA)-General Subjects* 2009; 1790(11): 1541-1545.
41. Zeng H, Wu M and Botnen JH: Methylselenol, a selenium metabolite, induces cell cycle arrest in G1 phase and apoptosis *via* the extracellular-regulated kinase 1/2 pathway and other cancer signaling genes. *The Journal of nutrition* 2009; 139(9): 1613-1618.
42. Zhang S, Rocourt C and Cheng WH: Selenoproteins and the aging brain. *Mechanisms of ageing and development* 2010; 131(4): 253-260.
43. Lu J, Jiang C, Kaeck M, Ganther H, Vadhanavikit S, Clement I *et al.*: Dissociation of the genotoxic and growth inhibitory effects of selenium. *Biochemical pharmacology* 1995; 50(2): 213-219.
44. Spallholz JE, Shriver BJ and Reid TW: Dimethyldiselenide and methylseleninic acid generate superoxide in an *in vitro* chemiluminescence assay in the presence of glutathione: implications for the anti-carcinogenic activity of L-selenomethionine and L-Semethylselenocysteine. *Nutrition and cancer* 2001; 40(1): 34-41.
45. Stewart MS, Spallholz JE, Neldner KH and Pence BC: Selenium compounds have disparate abilities to impose oxidative stress and induce apoptosis. *Free Radical Biology and Medicine* 1999; 26(1): 42-48.
46. Clark RF, Strukle E, Williams SR and Manoguerra AS: Selenium poisoning from a nutritional supplement. *Jama* 1996; 275(14): 1087-1088.
47. Chaudhary S, Umar A and Mehta S: Selenium nanomaterials: An overview of recent developments in synthesis, properties and potential applications. *Progress in Materials Science* 2016; 83: 270-329.
48. Hadrup N, Loeschner K, Skov K, Ravn-Haren G, Larsen EH, Mortensen A *et al.*: Effects of 14-day oral low dose selenium nanoparticles and selenite in rat - as determined by metabolite pattern determination. *Peer J* 2016; 4: e2601.
49. Chen T, Wong YS, Zheng W, Bai Y and Huang L: Selenium nanoparticles fabricated in *Undaria pinnatifida* polysaccharide solutions induce mitochondria-mediated apoptosis in A375 human melanoma cells. *Colloids and surfaces B: Biointerfaces* 2008; 67(1): 26-31.
50. Kong L, Yuan Q, Zhu H, Li Y, Guo Q, Wang Q *et al.*: The suppression of prostate LNCaP cancer cells growth by Selenium nanoparticles through Akt/Mdm2/AR controlled apoptosis. *Biomaterials* 2011; 32(27): 6515-6522.
51. Yazdi MH, Mahdavi M, Varastehmoradi B, Faramarzi MA and Shahverdi AR: The immunostimulatory effect of biogenic selenium nanoparticles on the 4T1 breast cancer model: an *in vivo* study. *Biological trace element research* 2012; 149(1): 22-28.
52. Luo H, Wang F, Bai Y, Chen T and Zheng W: Selenium nanoparticles inhibit the growth of HeLa and MDA-MB-231 cells through induction of S phase arrest. *Colloids and Surfaces B: Biointerfaces* 2012; 94: 304-308.
53. Yazdi M, Mahdavi M, Kheradmand E and Shahverdi A: The preventive oral supplementation of a selenium nanoparticle-enriched probiotic increases the immune response and lifespan of 4T1 breast cancer bearing mice. *Arzneimittelforschung* 2012; 62(11): 525-531.
54. Chang SS and Kibel AS: The role of systemic cytotoxic therapy for prostate cancer. *BJU international* 2009; 103(1): 8-17.
55. Inoue M, Sakaguchi N, Isuzugawa K and Ogihara Y: Role of reactive oxygen species in gallic acid-induced apoptosis. *Biological and Pharmaceutical Bulletin* 2000; 23(10): 1153-1157.
56. Rashidi L and Khosravi-Darani K: The applications of nanotechnology in food industry. *Critical reviews in food science and nutrition* 2011; 51(8): 723-730.
57. Sharma G, Italia J, Sonaje K, Tikoo K and Kumar MR: Biodegradable *in situ* gelling system for subcutaneous administration of ellagic acid and ellagic acid loaded nanoparticles: evaluation of their antioxidant potential against cyclosporine induced nephrotoxicity in rats. *Journal of controlled release* 2007; 118(1): 27-37.
58. Nagpal K, Singh SK and Mishra DN: Nanoparticle mediated brain targeted delivery of gallic acid: *in vivo* behavioral and biochemical studies for improved antioxidant and antidepressant-like activity. *Drug delivery* 2012; 19(8): 378-391.
59. He Q and Shi J: Mesoporous silica nanoparticle based nano drug delivery systems: synthesis, controlled drug release and delivery, pharmacokinetics and biocompatibility. *Journal of Materials Chemistry* 2011; 21(16): 5845-5855.
60. Rashidi L, Vasheghani-Farahani E, Soleimani M, Atashi A, Rostami K, Gangi F *et al.*: A cellular uptake and cytotoxicity properties study of gallic acid-loaded mesoporous silica nanoparticles on Caco-2 cells. *Journal of nanoparticle research* 2014; 16(3): 2285.
61. Daduang J, Palasap A, Daduang S, Boonsiri P, Suwannalert P and Limpaboon T: Gallic acid enhancement of gold nanoparticle anticancer activity in cervical cancer cells. *Asian Pac J Cancer Prev* 2015; 16(1): 169-174.
62. Rattanata N, Daduang S, Wongwattanakul M, Leelayuwat C, Limpaboon T, Lekphrom R *et al.*: Gold Nanoparticles Enhance the Anticancer Activity of Gallic Acid against Cholangiocarcinoma Cell Lines. *Asian Pacific Journal of Cancer Prevention* 2015; 16(16): 7143-7147.
63. Hu B, Wang Y, Xie M, Hu G, Ma F and Zeng X: Polymer nanoparticles composed with gallic acid grafted chitosan and bioactive peptides combined antioxidant, anticancer activities and improved delivery property for labile polyphenols. *Journal of Functional Foods* 2015; 15: 593-03.
64. Zhou Y, Xu M, Liu Y, Bai Y, Deng Y, Liu J *et al.*: Green synthesis of Se/Ru alloy nanoparticles using gallic acid and evaluation of their anti-invasive effects in HeLa cells. *Colloids and Surfaces B: Biointerfaces* 2016; 144: 118-124.

65. Barrenetxe J, Delagrance P and Martinez J: Physiological and metabolic functions of melatonin. *Journal of physiology and biochemistry* 2004; 60(1): 61-72.
66. Arendt J: Melatonin and human rhythms. *Chronobiology international* 2006; 23(1-2): 21-37.
67. Mallo C, Zaidan R, Galy G, Vermeulen E, Brun J, Chazot G *et al.*: Pharmacokinetics of melatonin in man after intravenous infusion and bolus injection. *European journal of clinical pharmacology* 1990; 38(3): 297-301.
68. DeMuro RL, Nafziger AN, Blask DE, Menhinick AM and Bertino JS: The absolute bioavailability of oral melatonin. *The Journal of Clinical Pharmacology* 2000; 40(7): 781-784.
69. Priano L, Esposti D, Esposti R, Castagna G, De Medici C, Fraschini F *et al.*: Solid lipid nanoparticles incorporating melatonin as new model for sustained oral and transdermal delivery systems. *Journal of nanoscience and nanotechnology* 2007; 7(10): 3596-3601.
70. Gasco M: Solid lipid nanoparticles for drug delivery. *Pharmaceutical Technology Europe* 2001; 13: 32-41.
71. Topal B, Altındal DÇ and Gümüşderelioglu M: Melatonin / HPβCD complex: Microwave synthesis, integration with chitosan scaffolds and inhibitory effects on MG-63CELLS. *International journal of pharmaceutics* 2015; 496(2): 801-811.
72. Altındal DÇ and Gümüşderelioglu M: Melatonin releasing PLGA micro / nanoparticles and their effect on osteosarcoma cells. *Journal of microencapsulation* 2016; 33(1): 53-63.
73. Dube A, Nicolazzo JA and Larson I: Chitosan nanoparticles enhance the intestinal absorption of the green tea catechins (+)-catechin and (-)-epigallocatechin gallate. *European Journal of Pharmaceutical Science* 2010; 41(2): 219-225.
74. Tan Q, Liu W, Guo C and Zhai G: Preparation and evaluation of quercetin-loaded lecithin - chitosan nanoparticles for topical delivery. *International Journal of Nanomedicine* 2011; 6: 1621-1630.
75. Sanna V, Roggio AM, Siliani S, Piccinini M, Marceddu S, Mariani A *et al.*: Development of novel cationic chitosan- and anionic alginate-coated poly (D, L-lactide-co-glycolide) nanoparticles for controlled release and light protection of resveratrol. *International Journal of Nanomedicine* 2012; 7: 5501-5516.
76. Barhate G, Gautam M, Gairola S, Jadhav S and Pokharkar V: Enhanced mucosal immune responses against tetanus toxoid using novel delivery system comprised of chitosan-functionalized gold nanoparticles and botanical adjuvant: characterization, immunogenicity, and stability assessment. *Journal of Pharmaceutical Sciences* 2014; 103(11): 3448-3456.
77. Casertari L and Illum L: Chitosan in nasal delivery systems for therapeutic drugs. *Journal of Controlled Release* 2014; 190: 189-200.
78. Liang J, Li F, Fang Y, Yang W, An X, Zhao L *et al.*: Cytotoxicity and apoptotic effects of tea polyphenol-loaded chitosan nanoparticles on human hepatoma HepG2 cells. *Materials Science and Engineering. C, Materials for Biological Applications* 2014; 36: 7-13.
79. Samarasinghe RM, Kanwar RK, Kumar K and Kanwar JR: Antiarthritic and chondroprotective activity of Lakshadi Guggul in novel alginate-enclosed chitosan calcium phosphate nanocarriers *Nanomedicine (Lond)*. 2014; 9(6): 819-837.
80. Leonarduzzi G, Testa G, Sottero B, Gamba P and Poli G: Design and development of nanovehicle-based delivery systems for preventive or therapeutic supplementation with flavonoids. *Current Medicinal Chemistry* 2010; 17(1): 74-95.
81. Celia C, Trapasso E, Locatelli M, Navarra M, Ventura CA, Wolfram J *et al.*: Anticancer activity of liposomal bergamot essential oil (BEO) on human neuroblastoma cells. *Colloids and Surfaces B: Biointerfaces* 2013; 112: 548-553.
82. Ding SM, Zhang ZH, Song J, Cheng XD, Jiang J, Jia XB. Enhanced bioavailability of apigenin *via* preparation of a carbon nanopowder solid dispersion. *Int J Nanomedicine*. 2014; 9: 2327-2333.
83. Takahashi M, Uechi S, Takara K, Asikin Y and Wada K: Evaluation of an oral carrier system in rats: bioavailability and antioxidant properties of liposome-encapsulated curcumin. *J Agric Food Chem*. 2009; 57(19): 9141-9146.
84. Kakkar V, Singh S, Singla D and Kaur IP: Exploring solid lipid nanoparticles to enhance the oral bioavailability of curcumin. *Mol Nutr Food Res*. 2011; 55(3): 495-503.
85. Xie X, Tao Q, Zou Y, Zhang F, Guo M, Wang Y, et al. PLGA nanoparticles improve the oral bioavailability of curcumin in rats: characterizations and mechanisms. *J Agric Food Chem*. 2011; 59(17): 9280-9289.
86. Shoba G, Joy D, Joseph T, Majeed M, Rajendran R and Srinivas PS: Influence of piperine on the pharmacokinetics of curcumin in animals and human volunteers. *Planta Med*. 1998; 64(4): 353-356.
87. Lambert JD, Hong J, Kim DH, Mishin VM and Yang CS: Piperine enhances the bioavailability of the tea polyphenol (-)-epigallocatechin-3-gallate in mice. *J Nutr*. 2004; 134(8): 1948-1952.
88. Zu Y, Wu W, Zhao X, Li Y, Wang W, Zhong C, *et al.*: Enhancement of solubility, antioxidant ability and bioavailability of taxifolin nanoparticles by liquid anti-solvent precipitation technique. *Int J Pharm*. 2014; 471(1-2): 366-376.

How to cite this article:

Hassanpour SH, Dehghani MA, Alipour SM, Karami SZ and Dehghani F: Role of natural compounds-encapsulated nanoparticles in diseases treatment. *Int J Pharmacognosy* 2018; 5(5): 259-69; doi link: [http://dx.doi.org/10.13040/IJPSR.0975-8232.IJP.5\(5\).259-69](http://dx.doi.org/10.13040/IJPSR.0975-8232.IJP.5(5).259-69).

This Journal licensed under a Creative Commons Attribution-Non-commercial-Share Alike 3.0 Unported License.

This article can be downloaded to **ANDROID OS** based mobile. Scan QR Code using Code/Bar Scanner from your mobile. (Scanners are available on Google Playstore)