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Mechanistic studies on release of large and small molecules from biodegradable SiO₂

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Abstract

Both small and large biologically active agents were encapsulated into biodegradable sol–gel derived SiO₂. Both fast and slowly-eroding SiO₂ matrices were prepared. Propranolol represented a small molecule and a model protein, BSA (bovin serum albumin) the larger one. The release mechanisms were studied using two different dissolution media representing extreme cases with respect to the matrix erosion, free dissolution media a such provided information on the general release mechanisms and power law-based mathematical models supported the propranolol release results. A modified power law is suggested, where both the initially released amount and time are included. BSA was not released without matrix erosion and propranolol release was mainly diffusion-controlled, although the matrix dissolution was needed for R = 3 monoliths due to closed pores. It is also shown that for R = 30 microparticles propranolol release was partly matrix erosion controlled.

Keywords: Silica; Sol-gel; Drug delivery; Release mechanism; In vitro dissolution

1. Introduction

Amorphous, sol–gel derived SiO₂ matrices are known to be compatible with and degradable in living tissue, as well as in corresponding simulated physiological conditions (Kortesuo et al., 2000a; Meseguer-Olmo et al., 2002). The low temperature liquid phase processing provides possibilities to encapsulate different types of biologically active agents into SiO₂. Small drug molecules (Böttcher et al., 1998; Ahola et al., 2000; Radin et al., 2001), proteins (Arnir et al., 1994; Nicoll et al., 1997; Santos et al., 1999; Bhatia et al., 2000; Keeling-Tucker et al., 2000; Kadnikova and Kostic, 2001; Flora and Brennan, 2001), cells (Pope et al., 1997; Al-Saraj et al., 1999; Sglavo et al., 1999; Conroy et al., 2000), viruses (Koskinen et al., 2003) and other biologically active agents, some of them being highly sensitive to the surrounding conditions, have been successfully encapsulated into the sol–gel derived SiO₂. Furthermore, the possibility to adjust the degradation rate on large scale in simulated physiological conditions (Ahola et al., 2001; Viitala et al., 2005a) and to prepare amorphous SiO₂ in several morphologies (Kortesuo et al., 2000a,b) (e.g., as injectable microparticles or implantable rods) makes the SiO₂ sol–gel technique an attractive alternative for the delivery of biologically active agents.

It is shown that viruses retain their biological activity and viability in wet SiO₂ gel for several weeks (Koskinen et al., 2002). This suggests general potential of the conventional sol–gel method in encapsulation of corresponding large biologically active agents, e.g., cells, bacteria or large proteins. The release of biologically active agents from nanoporous SiO₂ matrix is mainly governed by a combination of SiO₂ matrix degradation and diffusion whose influence on the final release behaviour varies case by case. If the size of the encapsulated molecules is bigger than the pore size of the matrix (e.g., viruses and proteins encapsulated in SiO₂ matrix) or if the drug molecules are encapsulated into closed pores matrix degradation is needed before drug is released. In the case of diffusion both drug molecules

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and matrix degradation products diffuse out from the matrix. Diffusion occurs through water filled pores and in bulk eroding matrixes the diffusion environment is changing all the time because of matrix degradation (Göpfrich, 1997; Göpferich and Langer, 1995; Lee et al., 2003). Parameters like porosity, chemical structure and encapsulated drug molecule affect the matrix degradation and their influence have to be considered case by case for versatile systems, such as sol-gel derived SiO₂. We have recently shown that it is relatively easy to adjust the dissolution of SiO₂ on a large scale in simulated physiological conditions using the conventional sol-gel parameters; water-to-alkoxide ratio, solvent amount, catalyst concentrations and the process parameters, such as aging and drying (Viitala et al., 2005a,b). It is also known that in vivo SiO2 dissolves into bodily fluids as silicic acid without extra cleavage steps and it is mainly removed through urine in soluble form, which makes SiO₂ matrixes an attractive option for drug delivery applications (Lai et al., 1998).

In surface erosion, material is lost from the matrix exterior surface and in an ideal case the erosion rate is directly proportional to the external surface area. For thin, flat slabs that retain the constant external surface, the matrix erosion is constant showing zero-order kinetics and homogenously encapsulated molecules must also follow zero-order release. For spheres and cylindrical rods the release will decline towards the end (Siepmann and Göpferich, 2001; Tamada and Langer, 1993). In bulk erosion, the material is lost from entire matrix volume and water penetrates into matrix faster than the matrix is degraded. The bulk erosion rate depends on the total amount of material and generally decreases as material is depleted. Porous and hydroscopic matrices, such as sol-gel derived SiO₂ matrices, degrade mostly by a combination of both suggested ideal cases, as do most of the degradable drug delivery devices (Kortesuo et al., 2001a; Siepmann and Göpferich, 2001). Zero-order release kinetics of biologically active agents may also be obtained by bulk erosion with a suitable combination of other matrix properties, such as water and drug diffusion, polymer swelling and degradation (Siepmann and Göpferich, 2001).

The aim of this work is to study the release mechanisms of different types of biologically active agents from sol-gel derived SiO_2 with specific emphasis on the influence of SiO_2 matrix erosion on the release. Propranolol represents a small drug molecule and BSA (a model protein) a larger molecule that are encapsulated into sol-gel derived SiO₂ matrices. Both spray-dried microparticles and monoliths cast in the moulds were prepared. The experimental method is based on the utilisation of two dissolution media simulating the extreme cases of matrix dissolution. The drug release and matrix erosion are studied in vitro in Tris buffer (pH 7.4 at 37 °C) in sink conditions (SiO₂ < 30 ppm) allowing free dissolution of the matrix and in SiO_2 -saturated buffer (130 ppm SiO_2), where the matrix dissolution is prevented. The traditional power law and a new modified power law where the initial release (burst or lag time) effects are taken into account are used in comparative analysis of the release mechanism. Experimental results combined with results obtained from mathematical models are used to evaluate the release mechanisms.

2. Materials and methods

2.1. Material preparation

The sol–gel technique is used to produce SiO₂ monoliths and microparticles. Matrices were prepared by the hydrolysis and condensation of tetraethoxysilane (TEOS 98%, Aldrich). BSA and propranolol were added into the sols. Bovine serum albumin BSA (bovine albumin extracted from buffalo blood) is used as a model protein. It has a molecular weight of 68 kDa. Brown and Shockley (1982) have constructed a model of BSA as having a cigar shape in size 4 nm × 14 nm (Friedli, 1996). The isoelectric point of BSA is at pH 4.7. Propranolol (1-(isopropylamino)-3-(1-naphthyloxy)-2-propanol hydrochloride) was used as a small drug molecule, it has the molecular weight of 295 g/mol. Propranolol has the pK_a value of 9.4. The amount of BSA or propranolol was 5, 7 or 10 wt.% of the theoretical SiO₂ amount in the sol (1 mol TEOS = 1 mol SiO₂). The sol compositions are presented in Tables 1 and 2.

Hydrochloric acid (HCl) and sodium hydroxide (NaOH) were used to adjust the sol pH. The hydrolysis time in Tables 1 and 2 means the time needed to achieve a homogeneous sol at room temperature under magnetic stirring. The process starts at acidic pH₁. A two-step catalysis process was used in the encapsulation of BSA. The initial sol pH₁ was low and before adding the BSA the pH₁ was raised to pH₂ in order to avoid the protein denaturation. After the pH adjustment, BSA was added into the sol as an aqueous solution, which raised simultaneously the water-to-TEOS value of the sol from R_1 to R_2 . Only one pH was used in the propranolol containing sols. The sols used in the microparticle preparation (Tables 1 and 2, group B) were aged at 40 °C for 65–67 h before adding the drug molecules into the sol.

Monoliths were prepared by drying the sol in a mould. The sol was injected into moulds where aging and drying occurred. The sols and formed gels were aged and dried at 4 °C or at 40 °C and 40% relative humidity. No further heat-treatment was used. The aging and drying process of the monoliths is a slow and unforced process done at constant conditions, where the gel structure is formed. Monolithic gels (as rods and tablets) were dried to the constant weight. The BSA containing monoliths and Am06–08 specimens were rods and Bm12–15 tablets. The amount of cast sol per mould was 170 μ l. Microparticles were prepared by spray-drying the sols with a mini spray dryer (B-191, Büchi Labortechnik AG, Switzerland). The following process parameters were used: pump 16%, aspirator 95%, and flow 600 l/h. The nozzle temperature was 120 °C and the outlet temperature was under 75 °C.

2.2. In vitro matrix dissolution and drug release studies

Matrix degradation was measured as SiO₂ dissolution. SiO₂ dissolution and drug release was studied *in vitro* by immersing silica monoliths (R=30: 16–18 mg and R=3: 48–53 mg) and microparticles (10–20 mg) in 0.005 M Tris (Trizma[®] preset Crystals, Sigma) buffer at pH 7.4 *in sink* conditions and in the same buffer saturated with SiO₂ (SiO₂ 120–130 ppm). *In sink* conditions for dissolved Si-species is below 20% of the

up $(R_1 = 19 -$	Ivr	lud inc		Hydrolysis	Sol aging	K_2	EtOH/TEUS ₂	Sol pH ₂	BSA (wt.%)	Aging and	Spray drying,
up $(R_1 = 19-$			(mol)	time" (min)	time (n)		(mol)			arying, I (°C)	I(2, C)
noliths	22; pH ₁ 2	.8)									
Am01	22	2.8	I	140	I	30	I	5.2	7	4	I
Am02	19	2.8	I	140	I	30	I	5.3	10	4	I
crospheres											
As03	22	2.8	I	140	I	30	I	5.3	5	I	120
$A_{S}04$	22	2.8	I	140	I	30	Ι	5.4	7	Ι	120
$up(R_1 = 2; p)$	H ₁ 2)										
3s05	2	2	1	15	65	20	1.8	6.3	5	I	120
up $(R_1 = 2; p)$ prospheres 3s05	H ₁ 2) 2	0	Τ	15	65	20	1.8	6.	3	3	3 5 -

Table 1

SiO₂ solubility corresponding to $c(SiO_2) < 30$ ppm. They represent two extreme cases, a free dissolution of the SiO₂ matrix and no or minimal dissolution of SiO₂, respectively. The total amount of SiO₂ in the monoliths was calculated from the known sol volume and TEOS amount per monolith. For the monoliths, typically 85% of the sample weight is SiO₂. Based on our earlier dissolution studies the amount of SiO₂ in the microparticles is about 60% of the sample weight. This is due to residuals, like water and ethanol and unreacted or partly reacted alkoxide species that are always left in non heat-treated SiO₂ xerogel matrices.

The SiO₂ saturated Tris buffer was prepared by first dissolving the sol-gel derived SiO₂ microparticles into Tris buffer until a concentration of 120-130 ppm SiO₂ was achieved. The buffer was subsequently filtered to remove remaining microspheres. The influence of high SiO₂ concentration in the buffer properties was characterised. Solubility of the studied biologically active agents, viscosity and surface tension of the buffer was measured and compared with the corresponding values for the buffer without SiO₂. There were no differences between these two buffers. The total amount of drugs encapsulated into SiO₂ was very low compared with the solubility of the drugs in the both buffers. The Tris buffer was sterilized at 121 °C before use. In the case of SiO2-saturated Tris buffer, the SiO2 was added after the sterilisation. The dissolution studies were done in the water bath at 37 °C, where dissolution bottles were shaken at constant speed. The Si concentration was measured with a spectrophotometer (UV-1601, Shimadzu) analysing the molybdenum blue complex absorbance at 820 nm. The BSA concentration was determined directly by measuring the absorbance at 220 nm and propranolol at 227 nm with a spectrophotometer (UV-1601, Shimadzu).

2.3. Release models

The modelling of release is an extensively studied topic in the drug delivery. Different empirical and semi-empirical models have been developed, such as the classical Higuchi equation (Higuchi, 1961) and the so-called power law (Siepmann and Peppas, 2001) based on Fick's second law of diffusion and assumptions that diffusion coefficient is concentrationindependent and drug distribution is homogeneous in the device. Although the power law has its limitations, it is considered to be more useful in the comparative studies providing explanations also for matrices that do not fulfil the presumptions of the Higuchi model (Harland et al., 1988; Siepmann and Peppas, 2001). The general form of the power law is:

$$\frac{M_t}{M_{\infty}} = kt^n \tag{1}$$

which includes M_t the cumulative drug released at time t, M_{∞} the cumulative drug release at infinite time, k being a constant depending on the structural and geometrical characteristics and the release exponent n indicating the mechanism of drug release. This equation can be used until 60% of the drug has been release (Peppas, 1985). The exponent value depends slightly on the geometry of the device and it is shown that exponent values between 0.43 and 0.5 are indicative of diffusion-controlled

Sample name	R_1	Sol pH1	EtOH/TEOS ₁ (mol)	Hydrolysis time ^a (min)	Sol aging time (h)	<i>R</i> ₂	EtOH/TEOS ₂ (mol)	Propranolol (wt.%)	Aging and drying, <i>T</i> (°C)	Spray drying, T (°C)
A-group $(R_1 = 30)$; pH ₁ 2.8)									
Monoliths	-									
Am06	30	2.8	_	110	_	30	_	5	4	-
Am07	30	2.8	_	110	_	30	_	7	4	-
Am08	30	2.8	-	110	-	30	-	10	4	_
Microspheres										
As09	30	2.8	_	110	_	30	_	5	_	120
As10	30	2.8	_	110	_	30	_	7	_	120
As11	30	2.8	_	110	-	30	_	10	-	120
B-group $(R_1 = 2 - 2)$	3: pH ₁ 2)									
Monoliths	, p=== =)									
Bm12	3	2	_	60	_	3	_	_	40	_
Bm13	3	2	_	60	_	3	_	5	40	_
Bm14	3	2	_	60	_	3	_	7	40	_
Bm15	3	2	_	60	_	3	_	10	40	_
Microspheres										
Bs16	2	2	1	15	65	14	1.8	5	-	120
Bs17	2	2	1	15	66	14	1.8	7	_	120
Bs18	2	2	1	15	67	14	1.8	10	-	120

 Table 2

 Sol compositions of propranolol containing monoliths and microparticles

^a Time needed to achieve homogeneous sol; R: H₂O/TEOS mol ratio of the sol; R_1 : the initial R of the sol; R_2 : R of the sol after sol dilution; pH₁: calculated initial pH of the sol; EtOH/TEOS: ethanol/TEOS mol ratio of the sol.

release. Higher *n* values (0.85-1.0) are typical for drug transport in swelling polymer devices. n = 1.0 indicates actually zero order drug release kinetics, which can be achieved also with matrix erosion controlled systems (Siepmann and Peppas, 2001). The n values between 0.5 and 1.0 are indicative of anomalous transport behaviour including both diffusion and swelling or erosion (Siepmann and Peppas, 2001). Peppas has suggested that the *n* values below 0.50 are indicative of porous matrix structure (Peppas, 1985). Transport of drug molecules in typical nanoscale pores of sol-gel derived SiO2 may also show square root of time dependence as shown, e.g., by Kortesuo et al. (2001b). However, although the typical SiO₂ may show square root of time kinetics of drug release, it is known that the porous and amorphous materials, such as SiO₂ that has heterogeneous pores with respect to form, length, diameter, fractality and surface roughness, may cause unexpected transport behaviour differing from diffusion as compared to, structures that have well-defined and smoother pores (Andrade et al., 1997; Kumar and Yashonath, 2000).

The burst effect which is the initial, short-time release of large amount of drug before a more stable and slower release phase, has not been taken into account in all release models. Huang et al. have introduced a modified power law model that includes an additional burst parameter, $\alpha: M_t/M_{\infty} = kt^n + \alpha$. The release profile is shifted vertically by α accounting for a rapid jump in concentration at t=0 (Huang and Brazel, 2001). The initial release phase may also be slower than the longer lasting main release phase, i.e., lag time is sometimes observed. Both burst and lag time differ from the main release phase and lag time may also last a relatively long time. In order to take this initial release, either burst or lag time, into account we suggest a modified power law model:

$$\frac{M_t - M_2}{M_{\infty}} = k(t - t_2)^{n_B}$$
(2)

where M_t is the cumulative release at time t, M_2 the amount released within the initial release phase (that differs from the main release phase), M_{∞} the cumulative drug release at infinite time, k the constant depending on the structural and geometrical characteristics of the device, t_2 the end point time of the initial release and n_B is the release exponent characteristics for the mechanism of drug release after the initial release. By plotting the ln $(M_t - M_2/M_{\infty})$ versus ln $(t - t_2)$ the n_B can be calculated from the slope of this curve. The values of n_B are interpreted in the same way as the values of n (in power law), which are characteristic for the drug release mechanism, but n_B describes the release, which occurs after the initial release.

3. Results

3.1. SiO_2 degradation by dissolution

As expected, SiO_2 matrix dissolution was not observed in the SiO_2 -saturated Tris buffer. The dissolution of the matrix in Tris buffer *in sink* conditions is presented as cumulative dissolution of SiO_2 in Figs. 1 and 2. The matrix dissolution results showed great variation based on the water-to-TEOS ratio and/or pro-



Fig. 1. SiO₂ dissolution of Am01-08 matrices in Tris buffer in sink conditions.

cessing method resulting either in monolithic rods and tablets or microparticles. There was no significant difference in the SiO₂ dissolution between the BSA- and propranolol-containing monoliths made at high water-to-TEOS ratios, $R_2 = 30$ (Am01, Am02, Am06, Am07 and Am08, Fig. 1). The concentration of the encapsulated biologically active agents did not have a significant influence on the SiO₂ monolith dissolution, although higher concentration of propranolol made the matrix dissolve a bit faster.

BSA containing SiO₂ microparticles prepared at high water-to-TEOS ratios, $R_1 = 22$ (As03 and As04) dissolved more slowly than microparticles prepared at low water-to-TEOS ratios, $R_1 = 2$ (Bs05) as seen in Fig. 1. Low water-to-TEOS ratio propranolol-containing microparticles also dissolved very fast (Bs16–18, Fig. 2). In the case of matrixes prepared at R = 30 the effect of propranolol amount to the matrix degradation rate was much greater in microparticles (As09–11) than in monoliths (Am06–08). The higher the propranolol concentration the faster the SiO₂ dissolution. This can be explained by the typical dense structure of the SiO₂ microparticles (Viitala et al., 2005a) where any extra additive makes the structure more heterogeneous. Some kind of two-phase behaviour is visible in the release profile (As09–11), i.e., faster dissolution in the beginning (about up to 250 h) followed by a more linear



Fig. 2. SiO₂ dissolution of As09–Bs18 matrices in Tris buffer in sink conditions.



Fig. 3. BSA release *in sink* conditions from monoliths Am01–02 and microparticles As03–04.

phase. The matrix dissolution rates of monoliths made at low water-to-TEOS ratios, $R_1 = 3$ (Bm12–15) show also some propranolol concentration dependence, matrix degradation rate increased as the propranolol amount increased (Fig. 2).

3.2. BSA release

BSA release from monoliths and microparticles (R = 19-22) is presented in Fig. 3. The release of BSA occurs only *in sink* conditions and no release is observed in SiO₂-saturated buffer. Pores in the SiO₂ matrix are not large enough for significant diffusion of BSA without the SiO₂ matrix dissolution. This indicates that release occurs due to the SiO₂ matrix dissolution, by erosion-control. Fig. 3 shows also a good example on the lag time that is observed for AmO2. The observed faster release from microspheres than from the monoliths is most likely due to the denser structure of microspheres (Viitala et al., 2005a), where the presence of BSA produces more heterogeneity in SiO₂ structure than in the case of the monoliths.

In the case of fast dissolving microparticles (Bs05, R = 2) with low water-to-TEOS ratio the BSA release is fast both *in sink* conditions and in SiO₂-saturated buffer, BSA is totally released in both buffers after 2 h dissolution (not shown). BSA release is even faster than the matrix degradation presented in Fig. 1. Because the BSA release seems to be even faster than the SiO₂ matrix dissolution, it is likely that the real encapsulation has not occurred in the SiO₂ microparticles with low water-to-TEOS ratio.

3.3. Propranolol release

The measured cumulative release of propranolol *in sink* conditions and in SiO₂-saturated buffer are shown as dots and the modelled release as line graphs in Figs. 4–7. Modelled release graphs are calculated based on the new modified power law and calculated variables are presented in Table 3. The difference in the propranolol release *in sink* conditions and SiO₂-saturated buffer is insignificant for the monoliths made at high water-to-TEOS ratios, R = 30 (Am06–08, Figs. 4 and 5), i.e., the



Fig. 4. Propranolol release *in sink* conditions from monoliths Am06–08. Lines are the corresponding calculated modified power law release profiles after the initial release phase.



Fig. 5. Propranolol release in SiO_2 saturated Tris buffer from monoliths Am06–08. Lines are the corresponding calculated modified power law release profiles after the initial release phase.



Fig. 6. Propranolol release in Tris (*in sink* conditions) and in SiO₂ saturated Tris from the microparticles As09–11. Lines are the corresponding calculated modified power law release profiles after the initial release *in sink* conditions.



Fig. 7. Propranolol release in Tris (*in sink* conditions) and in SiO₂ saturated Tris from monoliths Bm13-15. Lines are the corresponding calculated modified power law release profiles after the initial release *in sink* conditions.

dissolution of the SiO₂ matrix had no effect and the release differs clearly from that of larger BSA molecules. This result together with two other observations suggests that the propranolol release from Am06–08 is governed by out-diffusion from the pores: (1) SiO₂ matrix dissolution (Fig. 1) is slower than the propranolol release and (2) n_B values (Table 3; $n_B = 0.5 \pm 0.07$ for all propranolol concentrations) are typical for the diffusioncontrolled release. The n_B is obtained by subtracting 12 first hours of the release. If the burst or the initial release phase is not removed from the release curve, a low *n* value of 0.2 with no clear physical meaning is obtained. The burst cannot be perfectly defined, but the release rate is approximately four times faster than within next 12h and the fitting to linear curve in ln-ln graph does not provide acceptable correlation factor for 0-24 h initial release. The used experimental dissolution media support our choice, 0–12 h, by indicating same burst both in the SiO₂-saturated buffer and in the buffer in sink conditions. In addition, the SiO₂ matrix dissolves only 2-3% in sink conditions within 12 h. The dissolution (about 40% at 250 h) does not seem to affect the mechanism and this is suggested to depend on the bulk erosion mechanism that includes a strong diffusion component also in the matrix erosion.

In the case of the microparticles with high water-to-TEOS ratio (As09–11, R_1 = 30, Fig. 6) the propranolol release in the SiO₂-saturated buffer is low, only 3 wt.% for (As09 and As10) and 8 wt.% for (As11) and the released amount does not increase after the initial burst. However, propranolol is increasingly released in sink conditions. These results indicate that the SiO₂ matrix dissolution is needed for the release. The propranolol release during the initial release phase is lowest for the SiO₂ microparticles containing 5% propranolol and highest for microparticles with 10% propranolol. The initial release phase was chosen to be between 0 and 220 h. The release of propranolol was faster than SiO2 matrix dissolution until 220 h. The n_B value for microparticles containing 5% propranolol indicates matrix-erosion controlled release $n_B = 1.00$, and for 7% and 10% propranolol $n_B = 0.86$ and 0.74, respectively. Also the n_B values are logical with the propranolol amount; increasing amount of propranolol seems to increase the effect of diffusion component. If the initial release phase is not subtracted the corresponding nvalues would be 0.34, 0.49 and 0.30 with no logic in variation and no indication to the role of matrix dissolution in the release. The release results show that the spray-dried SiO₂ microparticles are dense enough to stop the extensive out-diffusion of propranolol after the initial faster release and the SiO₂ dissolution is needed.

The propranolol release from the low water-to-TEOS ratio microparticles, Bs16–18, was similar *in sink* conditions and in the SiO₂-saturated buffer (not shown). Propranolol was totally released from all specimens after 20 h of dissolution in both buffers. The matrix dissolution is also very fast as seen in Fig. 2. The release of propranolol is slightly slower than the release of BSA from the corresponding microparticles, indicating better encapsulation for propranolol than for BSA.

The amount of released propranolol from the monoliths with a low water-to-TEOS ratio $R_1 = 3$ (Fig. 7) into the SiO₂-saturated buffer are 9, 15 and 23 wt.% for Bm13, Bm14 and Bm15, respectively. *In sink* conditions the release is faster and continues as a function of time. The difference to the monolith formulations made at high water-to-TEOS ratios, R = 30 (Am06–08, Figs. 4 and 5) is clear. The release rates of propranolol from R = 3 monoliths are substantially lower and the role of matrix dissolution is clearly observed. The difference between the *in sink* conditions and SiO₂-saturated buffer results suggests that propranolol is partly encapsulated in closed pores of Bm13–15

Table 3

Calculated M_2 , t_2 , n_B , and $\ln k$ according to the new modified power law $(M_t - M_2)/M_{\infty} = k(t - t_2)^{n_B}$ for propranolol release in Tris (*in sink* conditions) and in SiO₂ saturated Tris-buffer

Sample name	Propranolol	release in Tris	Propranolol release in SiO ₂ saturated Tris							
	M ₂ (%)	<i>t</i> ₂ (h)	n _B	ln k	R	M ₂ (%)	<i>t</i> ₂ (h)	n _B	ln k	R
Am06	35.4	12	0.50	0.99	0.99	32.7	12	0.57	0.73	0.98
Am07	40.8	12	0.51	0.95	0.98	40.4	12	0.47	1.11	0.98
Am08	45.6	12	0.46	1.16	0.98	41.9	12	0.50	0.95	0.98
As09	12.9	220	1.00	-4.11	0.99	-	_	-	_	_
As10	27.5	220	0.86	-2.78	0.98	_	_	_	_	_
As11	51.3	220	0.74	-2.28	0.97	_	_	_	_	_
Bm13	20.1	338	0.60	-1.94	0.97	_	_	_	_	_
Bm14	27.9	338	0.62	-1.76	0.97	_	_	_	_	_
Bm15	33.2	338	0.66	-2.08	0.98	-	-	-	-	-

and SiO₂ has to dissolve before drug release occurs. However, the overall matrix dissolution is slower than drug release and the release rate decreases quite a lot towards the end. In other words, the release profiles suggest that diffusion has a major role in the release. The power law does not give reasonable fitting without the burst subtraction. The release deviates substantially from the main phase until 338 h. After 338 h the n_B values show anomalous diffusion ($n_B = 0.6 \pm 0.06$, Table 3), i.e., mainly diffusion-controlled release.

4. Discussion

Dissolution experiments done in saturated and unsaturated conditions provides results that show the general release mechanism of the system. Clearly diffusion-controlled system has similar release behaviour in both buffers and in matrix erosion controlled system no release is observed in saturated buffer. The use of two buffers provided also information about internal structure and encapsulation ability of the matrix. In the case of propranolol release from monoliths (Am06–08) with high initial *R* the drug release in both buffers was very similar indicating diffusion controlled system. Whereas in the case of low *R* monoliths (Bm13–15) matrix degradation had an effect on drug release, suggesting that propranolol was partly capsulated into the closed pores.

In addition, difference in release was observed between small propranolol and larger BSA. No BSA release was observed in the SiO₂-saturated buffer, but the conditions allowing free dissolution of SiO₂ matrix showed release of BSA in the case of monoliths and microparticles (Fig. 3). Microparticle formulations with $R_1 = 2$ could not encapsulate BSA (Bs05) or propranolol (Bs16-18) into matrix to achieve controlled release. The difference in the matrix degradation in BSA and propranolol containing microparticles prepared at high water-to-TEOS ratio indicates that the initial matrix degradation is slower for BSA containing microparticles. BSA is larger than propranolol and a greater heterogeneity in SiO₂ structure could be a reasonable conclusion. However, the larger size of BSA may result in slower diffusion to the exterior of the droplet during the spray drying. In addition, the interaction between SiO₂ and propranolol and between SiO₂ and BSA, respectively may differ a lot, both during the SiO₂ preparation at lower pH_1 2–2.8 (propranolol) and pH_2 5–6 (BSA) and during the release of both molecules at pH 7.4. Propranolol is quite hydrophilic at the used synthesis pH 2–2.8, positively-charged ($pK_a = 9.4$) and it contains two active sites for hydrogen bonding, both donors, NH and OH, and they are located near each other. The isoelectric point of SiO₂ is near the synthesis pH, but propranolol has still possibilities to interact with Si-OH by hydrogen bonding. The release results of propranolol from the monolith with high water-to-TEOS ratio support suggestion on the weak interaction at pH 7.4 (Figs. 5 and 6), although propranolol is still fully dissociated and positively charged and SiO₂ is negatively charged. Hydrophilic SiO₂ is also known to adsorb BSA on its surface near the isoelectric point of BSA (pH 4.7) and still a substantial amount at neutral pH (although less than at pH 4.7), despite the negative net charge of BSA (Norde and Favier, 1992). At high water-to-TEOS ratios the water amount is large enough for homogeneous distribution of BSA in general and the interaction is suggested to be stronger than between propranolol and SiO_2 , which results in more homogeneous distribution than in the case of propranolol.

Due to relatively often observed burst and lag time, we suggest a modified power law (Eq. (2)) which takes into account both of these possible initial release phases that differ from the main release phase. The n_B values calculated according to the suggested modifications in the power law are sensitive to the chosen point that separates the initial release phase from the actual release phase. However by using combinatory data, i.e., by evaluating the physical meaning of n values obtained from the power law without any burst or lag time subtractions, by comparing the data obtained from the use of dissolution media with free matrix dissolution and prevented matrix dissolution, and by analysing different time ranges in the release curves, it is possible to choose a justified point representing the start of the main release phase.

One could argue that the observation on any burst or lag time indicates that the power law cannot be used because one of the main prerequisites is that the distribution of the drugs should be homogeneous. However, the burst and lag time might also depend on the heterogeneous structure of the matrix containing a homogeneously distributed drug. This is an obvious option for sol–gel derived SiO₂ that consists of aggregated nanoparticles, where both larger amounts of drugs and larger drugs may disturb the homogeneity of the matrix nanostructure. Also heterogeneous drug distribution is possible. The SiO₂ structure shrinks during the aging and drying and water and other liquids diffuse out spontaneously, by capillary forces or by vapour Knudsen diffusion (Brinker and Scherer, 1990) and thus, drug migration is also possible.

In conclusion, it was shown that the use of dissolution medium allowing free dissolution of the matrix combined with the use of medium preventing the dissolution provides general information about the release mechanism. A modified power law is suggested. It takes into account an initial release phase, either burst or lag time that differ from the main release phase. The release results obtained from the modified power law supported the results obtained from the use of the different dissolution media. It was shown that diffusion is the main mechanism controlling the release of small-sized propranolol from the SiO₂ monolith matrices. Despite of the main role of the diffusion, the SiO2 matrix dissolution had a clear effect on the release of monoliths made at low water-to-TEOS ratios. The release rate from the monoliths could also be substantially adjusted by formulation. The model protein, BSA, was successfully encapsulated both into monoliths and microparticles prepared with high water-to-TEOS ratio and the release was shown to occur predominantly by matrix erosion.

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