



Nanoparticles vs Oil-Based Emulsions as Active Pharmaceutical Ingredients Delivery Systems for nanoQuick Research

I. Introduction: The Evolving Landscape of Drug Delivery

Nanoparticles vs. Oil-Based Emulsions: Key Points

The Problem We're Trying to Solve with nanoQuick:

- Lots of new drugs don't dissolve well in water, which makes it hard for our bodies to use them effectively.
- Regular drug delivery methods such as oil-based emulsions can also lead to drugs breaking down too quickly or going to the wrong places in the body, causing side effects.
- Delivering big, complicated drugs like proteins is even trickier due to their instability and poor absorption.
- High cost to create nanoparticles
- High cost to scale the production of nanoparticles
- Different ratios and types of Active Pharmaceutical Ingredients (APIs) make the practical use of nanoparticle development cost prohibitive for companies.

Why We Need Better Drug Delivery:

- We want to control *exactly* where and when drugs work in the body, kind of like precision medicine.
- We're moving beyond just dissolving drugs and aiming for targeted action with fewer side effects.

Two Main Players: Nanoparticles and Oil-Based Emulsions



- Both nanoparticles and oil-based emulsions are ways to get drugs to where they need to go more effectively than traditional methods.

Nanoparticles:

- What are they? Solid, super small particles (10-1000 nm) that carry drugs.
- Types:
 - Natural ingredients
 - Lipid core
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 - Lipid-based: Made from fats, like liposomes (little bubbles), SLNs (solid fat particles), and NLCs (fancy SLNs).
 - Other: Inorganic (like gold), dendrimers (branched structures), but we're focusing on the first two.
- Advantages:
 - Can help drugs dissolve better.
 - Can protect drugs from breaking down.
 - Can improve how much drug gets to where it needs to go.
 - Can be designed to target specific cells or tissues (like cancer cells).
 - Can release drugs slowly and steadily or in response to triggers (like pH change).
 - Can get past tricky barriers like the blood-brain barrier.
 - Can carry all sorts of drugs, big or small, water-loving or oil-loving.

Oil-Based Emulsions: Oil and Water Don't Mix (But We Can Make Them)

- What are they? Little droplets of oil mixed in water (or water in oil) with the help of emulsifiers (like soap).
- Types:
 - Conventional: Bigger droplets, can be unstable.





- Microemulsions: Tiny droplets, super stable.
- Nanoemulsions: Very tiny droplets, pretty stable.
- Self-emulsifying: Designed to form an emulsion in the body after you take them.
- Why they're useful:
 - Great for helping oil-loving drugs dissolve and get absorbed.
 - Can improve how much drug gets into the body.
 - Can protect drugs from breaking down.
 - Some types are easier and cheaper to make.
 - Have been used for a long time in various ways (oral, topical, IV).
- Their downsides:
 - Some types can be unstable and separate.
 - Mostly good for oil-loving drugs, not so much for water-loving or big drugs.
 - Not great at targeting specific places in the body.
 - Emulsifiers can sometimes irritate.

Nanoparticles vs. Emulsions: The Showdown

- Nanoparticles: More versatile, better at targeting and controlled release, but can be trickier and pricier. delivers 80%-90+% of the API into the bloodstream and target location.
- Emulsions: Great for oil-loving drugs, often easier and cheaper to make, but less versatile and not as good at targeting. Lacks a high absorption potential of the API delivering an average of 20% (standard emulsions) to 40% (nanoemulsions) compared to nanoparticles.

Basically: It all depends on the specific drug and what you're trying to achieve! Both nanoparticles and oil-based emulsions have their place in the world of drug delivery.



The Imperative for Advanced Drug Delivery Systems

The therapeutic efficacy of many pharmacological agents is often constrained by limitations inherent in conventional drug formulations. A significant challenge in modern drug development is the poor aqueous solubility of a substantial fraction of new chemical entities; estimates suggest that approximately 40% of these compounds exhibit low water solubility.¹ This poor solubility frequently translates to inadequate bioavailability, particularly following oral administration, thereby hindering the attainment of therapeutic concentrations at the target site. Beyond solubility issues, conventional formulations may subject drugs to rapid degradation or premature metabolism, especially first-pass metabolism in the liver, further diminishing their systemic availability. Moreover, the lack of site-specificity in traditional delivery methods often leads to widespread systemic distribution of potent drugs, resulting in undesirable off-target effects and dose-limiting toxicities. The delivery of macromolecular therapeutics, such as proteins, peptides, and nucleic acids, presents an additional layer of complexity due to their susceptibility to enzymatic degradation, poor membrane permeability, and potential immunogenicity. These collective challenges underscore the critical need for advanced drug delivery systems (DDS) capable of overcoming these hurdles to enhance therapeutic outcomes.³

The progression from rudimentary drug solutions and suspensions towards more sophisticated delivery platforms signifies a broader scientific and technological pursuit: the quest for increasingly precise control over the pharmacokinetics and pharmacodynamics of therapeutic agents *in vivo*. This journey did not merely aim to address solubility; it has been driven by the aspiration to achieve targeted action and minimize harm, aligning with the foundational principles of precision medicine. Initially, simple oil-based vehicles like emulsions were developed primarily to solubilize lipophilic drugs.⁵ However, as the limitations of these systems—such as inherent instability or restricted targeting capabilities—became apparent, and as the pharmaceutical pipeline expanded to include a wider array of challenging molecules

like biologics, the focus shifted towards engineered particulate carriers. This led to the burgeoning field of nanomedicine, where nanoparticles offered the promise of tunable physicochemical properties (size, surface characteristics, material composition) that could be meticulously designed for specific therapeutic tasks, including navigating biological barriers and interacting selectively with target cells.⁷ This evolution towards nanoscale control, however, brings with it an increased complexity in formulation, characterization, and manufacturing, alongside more intricate interactions with biological systems, which in turn necessitate more sophisticated regulatory evaluation. Consequently, while advanced nanoparticle systems offer unprecedented potential, they also face higher developmental and translational barriers compared to more established technologies like emulsions.

Emergence of Nanoparticles and Emulsions as Key Platforms

In response to the limitations of conventional formulations, nanoparticles and oil-based emulsions have emerged as two prominent and extensively investigated platforms for advanced drug delivery. Nanoparticles, broadly defined as solid colloidal particles engineered at the sub-micron scale (typically 10-1000 nm), function as carriers where the therapeutic agent can be dissolved, entrapped, encapsulated, or adsorbed onto or within their matrix.⁷ Oil-based emulsions, on the other hand, are dispersed systems consisting of at least two immiscible liquids (typically oil and water), where one liquid is distributed as droplets within the other, stabilized by an interfacial film of emulsifying agents. These systems are particularly recognized for their ability to deliver lipophilic drugs.⁶

Scope and Objective of the Report

This report provides an expert-level comparative analysis of nanoparticle-based drug delivery systems and oil-based emulsions. It aims to delineate their respective advantages and disadvantages across crucial aspects of drug delivery, including formulation characteristics, mechanisms of action, pharmacokinetic profiles,



therapeutic efficacy, and safety considerations. By examining their fundamental properties, performance attributes, and practical limitations, this report seeks to clarify the optimal application niches for each platform and to highlight the context-dependent factors that guide the selection of one system over the other in contemporary pharmaceutical development.

II. Nanoparticle-Based Drug Delivery Systems: Design, Mechanisms, and Attributes

A. Defining Nanoparticles: Classification, Composition, and Physicochemical Properties

Nanoparticles utilized in drug delivery are solid, colloidal entities with dimensions typically ranging from 10 to 1000 nanometers (nm). For many nanomedicine applications, a size below 200 nm is often pursued to facilitate passage through biological barriers and avoid rapid clearance.⁷ The drug can be integrated into the nanoparticle structure in various ways: dissolved within the matrix, entrapped in a core, adsorbed onto the surface, or covalently attached. These systems are diverse, encompassing several major classes based on their constituent materials.

1. Nanoparticles:

nanoparticles are fabricated from natural or synthetic excipients in a variety of architectures; common forms include nanospheres, where the drug is uniformly dispersed throughout the matrix, and nanocapsules, where the drug is confined within an aqueous or oily core surrounded by a shell.¹⁰ nanoparticles are prized for their exceptional versatility in design. Their physicochemical properties—such as size, shape, surface charge, and hydrophobicity—can be precisely controlled through the choice of excipients and fabrication method.⁸ Furthermore, they can be engineered for tunable drug release profiles, including sustained or stimuli-responsive release (e.g., triggered by pH, temperature, or enzymes).⁸

2. Lipid-Based Nanoparticles:

This category includes several distinct systems primarily composed of lipids:

- Liposomes: These are vesicular structures composed of one or more concentric



phospholipid bilayers enclosing an aqueous core.⁷ This unique structure allows liposomes to encapsulate both hydrophilic drugs within the aqueous compartment and hydrophobic drugs within the lipid bilayer(s).⁹ They are typically biocompatible and biodegradable.

- Solid Lipid Nanoparticles (SLNs): SLNs are colloidal carriers made from lipids that are solid at body temperature, such as triglycerides, fatty acids, or waxes.¹⁴ The drug is incorporated into this solid lipid matrix. SLNs were developed to overcome some limitations of traditional colloidal systems like emulsions (e.g., instability) and liposomes (e.g., drug leakage, manufacturing challenges), offering improved drug protection and controlled release.¹⁵
- Nanostructured Lipid Carriers (NLCs): Considered a "second generation" of lipid nanoparticles, NLCs are formulated using a blend of solid and liquid lipids (though the overall matrix remains solid at body temperature).¹⁴ This creates a less ordered, imperfect crystalline structure within the lipid matrix compared to SLNs. These imperfections provide more space to accommodate drug molecules, leading to potentially higher drug loading capacity and reduced drug expulsion during storage.¹⁵

Table 1: Characteristics of Major Nanoparticle Subtypes

Nanoparticle Type	Typical Composition	Size Range (nm)	Drug Encapsulation (Hydrophilic/ Hydrophobic)	Key Advantages	Key Disadvantages
Nanosphere	Biodegradable	10-1000	Both (depending on API)	Tunable properties, controlled release,	Potential manufacturing complexity,

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				surface functionalization	burst release
Nanocapsule	shell around an oily/aqueous core	10-1000	Both (hydrophilic in core, hydrophobic in shell/core)	High drug loading for some drugs, protection of core	Manufacturing complexity, potential shell rupture
Liposome	Phospholipid bilayers	50-1000	Both (hydrophilic in aqueous core, hydrophobic in bilayer)	Biocompatible, versatile encapsulation, can deliver biologics	Physical instability (fusion, aggregation), drug leakage, manufacturing scale-up challenges for some types
Solid Lipid Nanoparticle (SLN)	Solid lipids (triglycerides, fatty acids, waxes)	50-1000	Primarily hydrophobic (some hydrophilic possible)	Good biocompatibility, drug protection, controlled release, avoids organic solvents in some prep methods	Limited drug loading for some drugs, potential drug expulsion during storage, relatively larger particle sizes



Nanostructured Lipid Carrier (NLC)	Blend of solid and liquid lipids	50-1000	Primarily hydrophobic (improved loading over SLNs)	Higher drug loading than SLNs, reduced drug expulsion, good biocompatibility, controlled release	More complex lipid matrix than SLNs, potential for lipid polymorphism affecting stability
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3. Other Nanoparticle Types (Brief Mention for Context):

Beyond oil-in-water and lipid-based systems, other nanoparticle types exist, such as inorganic nanoparticles (e.g., gold, silica, iron oxide) and dendrimers.³ Gold nanoparticles, for instance, offer unique optical properties useful for imaging and photothermal therapy.²⁰ Mesoporous silica nanoparticles provide high surface area for drug loading.²¹ Dendrimers are highly branched macromolecules with well-defined structures suitable for drug conjugation or encapsulation.³ While these systems possess distinct advantages for specific applications, they often raise more significant concerns regarding long-term toxicity, biodegradability, and complex synthesis compared to the more commonly utilized oil-in-water and lipid-based nanoparticles in general drug delivery. Therefore, this report will primarily focus on oil-in-water and lipid-based nanoparticles for a more direct comparison with oil-based emulsions.

B. Key Advantages of Nanoparticle Systems

Nanoparticle-based drug delivery systems offer a multitude of advantages over conventional formulations, stemming largely from their unique size, composition, and tunable properties.

1. Enhanced Drug Solubility and Stability:

A primary benefit of nanoparticles is their ability to encapsulate or otherwise associate with poorly water-soluble drugs, thereby increasing their apparent solubility in aqueous biological environments.⁷ This is crucial for drugs that would otherwise precipitate or have very limited

dissolution. Furthermore, encapsulation within the nanoparticle matrix can protect the drug cargo from chemical or enzymatic degradation in vivo, enhancing its stability and preserving its therapeutic activity until it reaches the target site.⁸

2. Improved Bioavailability and Pharmacokinetic Profiles:

By enhancing solubility and protecting against degradation (including first-pass metabolism), nanoparticles can significantly improve the bioavailability of administered drugs.³ The pharmacokinetic profile of a drug can also be favorably modulated. For instance, surface modification of nanoparticles with hydrophilic excipients such as PEG, known as PEGylation, can reduce their recognition and uptake by the reticuloendothelial system (RES), thereby prolonging their circulation time in the bloodstream.⁸ This extended circulation increases the probability of the drug reaching its target tissue. Lipid-based DDS, for example, are noted for their ability to protect encapsulated cargo, shield it from enzymatic degradation and premature clearance, and facilitate controlled release kinetics at the target site.²³

3. Targeted Drug Delivery:

Nanoparticles offer sophisticated mechanisms for targeted drug delivery, which can be broadly categorized as passive or active:

- **Passive Targeting:** This relies on the inherent pathophysiological characteristics of certain diseased tissues, most notably tumors. Tumor vasculature is often "leaky" with poorly formed endothelial junctions and impaired lymphatic drainage. Nanoparticles within a certain size range (typically 10-200 nm) can extravasate through these leaky vessels and accumulate preferentially in the tumor interstitium due to the poor lymphatic clearance. This phenomenon is known as the Enhanced Permeability and Retention (EPR) effect.¹⁸
- **Active Targeting:** This involves the functionalization of the nanoparticle surface with specific targeting ligands, such as antibodies, peptides, aptamers, or small molecules (e.g., folic acid, transferrin).⁷ These ligands recognize and bind to receptors or antigens that are overexpressed on the surface of target cells (e.g., cancer cells, inflamed endothelial cells, or specific brain cells). This specific binding enhances the selective uptake of the nanoparticles by the target cells, often via receptor-mediated endocytosis, thereby increasing drug concentration at



the site of action and minimizing exposure to healthy tissues.⁸

4. Controlled and Sustained Drug Release:

The design of nanoparticles allows for precise control over the rate and location of drug release.⁸ Drugs can be released slowly over extended periods through diffusion from the nanoparticle matrix or by gradual degradation of a biodegradable excipient matrix. This sustained release can maintain therapeutic drug concentrations within the desired range for longer durations, reducing the need for frequent administration and improving patient compliance. Moreover, "smart" nanoparticles can be engineered to release their payload in response to specific internal or external stimuli, such as changes in pH (e.g., acidic tumor microenvironment or endosomal compartments), temperature, enzyme activity, redox potential, or light.⁸ This stimuli-responsive release further enhances site-specificity and therapeutic efficacy.

5. Penetration of Biological Barriers:

The diminutive size of nanoparticles facilitates their transport across various biological barriers that are often impermeable to larger molecules or conventional drug formulations. This includes enhanced penetration of mucosal barriers (e.g., intestinal, nasal, pulmonary) and the skin.⁸ Of particular significance is the potential for specifically designed nanoparticles to traverse the blood-brain barrier (BBB), a highly selective physiological barrier that protects the central nervous system (CNS) but also severely restricts the entry of most therapeutic agents.⁷ Nanoparticle-mediated BBB penetration opens new avenues for treating a wide range of CNS disorders.

6. Protection of Therapeutic Cargo and Overcoming Drug Resistance:

Encapsulation within nanoparticles provides a protective environment for delicate therapeutic molecules, such as peptides, proteins, and nucleic acids (siRNA, mRNA, DNA), shielding them from enzymatic degradation and maintaining their structural integrity and activity in vivo.⁸ In cancer therapy, nanoparticles can play a crucial role in overcoming multidrug resistance (MDR). MDR is often mediated by efflux pumps like P-glycoprotein (P-gp) that actively expel chemotherapeutic drugs from cancer cells. Nanoparticles can bypass these efflux pumps by entering cells via endocytic pathways, thereby increasing intracellular drug accumulation.²¹ Additionally, nanoparticles can co-deliver chemotherapeutic agents with MDR modulators or deliver agents that target apoptotic pathways, further enhancing their efficacy against resistant



tumors.²⁸

7. Versatility in Encapsulating Diverse Therapeutic Agents:

Different types of nanoparticles can be tailored to accommodate a wide spectrum of therapeutic agents, irrespective of their solubility or molecular nature. For instance, liposomes are particularly versatile, capable of encapsulating hydrophilic drugs in their aqueous core and hydrophobic drugs within their lipid bilayers, and can even co-encapsulate multiple drugs.⁹ nanoparticles can be designed to carry small molecules, proteins, peptides, and nucleic acids, depending on the excipient properties and encapsulation method.⁸ This versatility makes nanoparticles a broadly applicable platform for various therapeutic challenges.

C. Challenges and Limitations of Nanoparticle Systems

Despite their significant promise, nanoparticle-based drug delivery systems are associated with several challenges and limitations that can impede their clinical translation and widespread application.

1. Biocompatibility and Potential Toxicity Concerns:

The interaction of nanoparticles with biological systems can elicit adverse responses. Toxicity is highly dependent on the nanoparticle's material composition, size, surface charge, morphology, dose, and route of administration.⁷ While many biodegradable excipients and lipids are generally considered biocompatible ¹³, some materials, particularly certain inorganic nanoparticles (e.g., heavy metals, some metal oxides), can induce dose-dependent toxicity, oxidative stress, inflammation, or organ damage.¹¹ Even carrier systems themselves may impose risks beyond those of conventional chemical hazards.⁷

Immunogenicity is another concern. Nanoparticles can be recognized as foreign by the immune system, leading to opsonization (coating with serum proteins) and rapid clearance by phagocytic cells of the RES, primarily in the liver and spleen.⁸ This not only reduces therapeutic efficacy but can also trigger adverse immune reactions. Surface modifications like PEGylation are employed to create "stealth" nanoparticles that evade immune recognition, but this strategy is not always completely effective and can sometimes lead to other issues like the accelerated blood clearance (ABC) phenomenon upon repeated administration.

The biodistribution and long-term fate of nanoparticles are also critical. Accumulation in non-target organs, especially for non-biodegradable or slowly degrading nanoparticles, can lead to chronic toxicity.⁹ The formation of a "protein corona" on the nanoparticle surface upon

entering biological fluids can alter its physicochemical properties, biological identity, and subsequent interactions with cells and tissues, making in vivo behavior difficult to predict.⁹ The nuanced nature of nanotoxicity means it cannot be generalized; it is highly specific to the formulation. Biodegradable and lipid-based nanoparticles generally exhibit better biocompatibility profiles compared to persistent inorganic nanoparticles.¹³ This variability necessitates rigorous, case-by-case safety assessments for each new nanoparticle system, moving beyond broad categorizations of "nanomaterials." Such detailed evaluations are crucial for regulatory approval and ensuring patient safety.

2. Manufacturing Complexity, Scalability, and Cost:

The fabrication of nanoparticles, particularly those with sophisticated designs incorporating targeting ligands, stimuli-responsive elements, or complex architectures, often involves intricate, multi-step synthesis and purification processes.⁸ These processes can be challenging to scale up from laboratory research to industrial-level production while maintaining consistent quality and particle characteristics (e.g., size distribution, drug loading).⁸ Batch-to-batch variability can be a significant hurdle. Consequently, the manufacturing costs for advanced nanoparticle formulations are often substantially higher than those for conventional drugs or simpler delivery systems like some emulsions.⁸

The pursuit of highly specific targeting or complex release mechanisms inherently increases these practical challenges. For example, active targeting requires ligand conjugation, an additional chemical step needing optimization and purification.²² Incorporating multiple ligands or stimuli-responsive moieties further escalates this complexity. This creates an intrinsic trade-off: the enhanced therapeutic potential offered by advanced nanoparticle functionalities comes at the price of increased developmental complexity, time, and cost. A careful cost-benefit analysis is therefore essential for each specific application to determine if the potential therapeutic gains justify the substantial investment and hurdles associated with these sophisticated systems.

3. In Vivo Stability and Clearance:

Maintaining the structural integrity and stability of nanoparticles in the complex biological environment is a major challenge. Some nanoparticles can be prone to aggregation, premature drug release, or degradation in biological fluids.¹³ As mentioned, rapid clearance by the RES/MPS significantly limits the circulation time and thus the opportunity for nanoparticles to reach their target site, particularly for those not adequately protected by stealth coatings.⁸

4. Drug Loading Efficiency and Premature Leakage:

Achieving a high drug loading capacity within nanoparticles can be difficult, especially for drugs with poor affinity for the nanoparticle matrix material. Low drug loading necessitates the administration of a larger quantity of the nanocarrier material to deliver a therapeutic dose, which can increase the risk of toxicity.⁹ Furthermore, premature leakage of the encapsulated drug from the nanoparticle during systemic circulation, before reaching the target site, can reduce therapeutic efficacy and contribute to systemic side effects.¹⁵

III. Oil-Based Emulsions for Drug Delivery: Formulations, Mechanisms, and Attributes

A. Defining Oil-Based Emulsions: Classification, Composition, and Physicochemical Properties

Oil-based emulsions are heterogeneous pharmaceutical systems in which one immiscible liquid phase (typically an oil) is dispersed as droplets within another liquid phase (typically aqueous), stabilized by the presence of one or more emulsifying agents (surfactants) that form an interfacial film around the droplets.⁶ These systems are primarily employed to deliver lipophilic (oil-soluble) drugs.

1. Conventional Emulsions (Macroemulsions):

These are the most traditional type of emulsions, characterized by relatively large droplet sizes, typically ranging from 0.1 micrometers (μm) to 100 μm , though often greater than 1 μm .³⁴ They are thermodynamically unstable systems and, over time, are prone to various forms of physical instability such as creaming (upward movement of droplets) or sedimentation (downward movement of droplets), flocculation (reversible aggregation of droplets), coalescence (irreversible merging of droplets leading to larger droplets), and eventually phase separation (breaking of the emulsion).³³ Conventional emulsions are classified based on the nature of the dispersed and continuous phases:

- Oil-in-Water (O/W) Emulsions: Oil droplets are dispersed in a continuous aqueous phase. These are commonly used for oral and intravenous administration of lipophilic drugs, as well as in topical products like lotions and creams.³³
- Water-in-Oil (W/O) Emulsions: Water droplets are dispersed in a continuous oil



phase. These are often used for topical preparations (e.g., ointments, some creams) to provide emollient and occlusive properties, and can also deliver hydrophilic drugs within the dispersed water phase.¹⁶ The composition typically includes an oil phase (e.g., vegetable oils like soybean, palm, castor, or mineral oil; medium-chain triglycerides (MCTs)), an aqueous phase (water), and emulsifiers (e.g., lecithin, polysorbates, sorbitan esters).⁵

2. Microemulsions:

Microemulsions are distinct from conventional emulsions in that they are thermodynamically stable, clear or translucent, isotropic mixtures of oil, water, and surfactant(s), often requiring a co-surfactant or co-solvent for their formation.³³ They form spontaneously or with very minimal energy input (e.g., gentle agitation) when their components are mixed in appropriate ratios. Droplet sizes in microemulsions are significantly smaller than in macroemulsions, typically in the range of 10 nm to 100 nm (though sometimes reported up to 200 nm).³³ Their thermodynamic stability imparts a long shelf-life if formulated correctly, though they can be sensitive to changes in temperature or dilution.³⁹

3. Nanoemulsions:

Nanoemulsions are kinetically stable (unlike the thermodynamically stable microemulsions) dispersions of oil and water with extremely small droplet sizes, typically ranging from 20 nm to 200 nm, although sizes up to 500–600 nm are sometimes included in this classification.³⁶ They appear translucent or milky. Due to their small droplet size, nanoemulsions exhibit enhanced stability against gravitational separation (creaming/sedimentation) and coalescence compared to conventional macroemulsions.³⁵ Their formation usually requires high-energy methods such as high-pressure homogenization, microfluidization, or ultrasonication, which reduce droplet size.³⁹ Low-energy methods, like phase inversion temperature (PIT) or spontaneous emulsification, can also be employed.⁴²

4. Self-Emulsifying Drug Delivery Systems (SED DS, SMED DS, SNED DS):

These are isotropic mixtures of oils, surfactants, and often co-solvents or co-surfactants, designed to spontaneously form fine O/W emulsions (SED DS), microemulsions (SMED DS), or nanoemulsions (SNED DS) upon gentle agitation in an aqueous medium, such as the fluids in the gastrointestinal (GI) tract.⁵ These systems are typically administered orally in soft or hard gelatin capsules, with the emulsion forming in situ upon contact with GI fluids. This approach

enhances the solubilization and absorption of poorly water-soluble drugs.

The heterogeneity within the term "emulsion" is significant. Conventional macroemulsions, thermodynamically stable microemulsions, and kinetically stable nanoemulsions possess distinct physicochemical properties, stability profiles, and manufacturing requirements. This diversity means that broad generalizations about "emulsions" can be imprecise. Nanoemulsions, for instance, leverage their small droplet size to gain advantages similar to some nanoparticles (e.g., increased surface area, potential for enhanced biological interaction and penetration), yet their liquid core and surfactant-based stabilization fundamentally differ from the solid matrix and material composition of solid nanoparticles. This distinction is crucial when making comparisons: evaluating a nanoemulsion against a solid lipid nanoparticle (SLN) involves different considerations than comparing a conventional macroemulsion to a micelle. Nanoemulsions can be viewed as occupying an intermediate space, offering some benefits of nanocarriers while retaining certain formulation aspects of traditional emulsions.

Table 2: Characteristics of Major Oil-Based Emulsion Subtypes

Emulsion Type	Typical Composition	Droplet Size Range	Stability Profile	Key Advantages	Key Disadvantages
Conventional O/W Emulsion (Macroemulsion)	Oil, water, emulsifier	0.1–100µm	Thermodynamically unstable; prone to creaming, coalescence, breaking	Good for lipophilic drugs (oral, topical, IV), established technology, relatively simple to formulate	Physical instability, large droplet size limits some applications, potential for irritation from emulsifiers

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Conventional W/O Emulsion (Macroemulsion)	Water, oil, emulsifier	0.1–100µm	Thermodynamically unstable; prone to coalescence, breaking	Emollient/occlusive (topical), can deliver hydrophilic drugs in water phase	Physical instability, greasy feel (topical), limited oral applicability
Microemulsion	Oil, water, surfactant, co-surfactant /co-solvent	10–100 nm (up to 200 nm)	Thermodynamically stable, forms spontaneously	High stability, enhances solubility/bioavailability, transparent/translucent	High surfactant concentration may cause toxicity/irritation, sensitive to dilution/temperature changes
Nanoemulsion	Oil, water, emulsifier	20–200 nm (up to 600 nm)	Kinetically stable (more stable than macroemulsions)	Small droplet size enhances stability & bioavailability, good for various routes, can encapsulate both drug types	Requires energy for formation (high-energy methods), not thermodynamically stable, higher surfactant needs for some
Self-Emulsify	Oil,	Forms	Forms stable	Enhances	High



ing Drug Delivery System (SEDDS/SM EDDS/SNED DS)	surfactant, co-solvent/c o-surfactant	emulsion <i>in situ</i> (nm to μ m range)	emulsion/mic roemulsion/n anoemulsion upon dilution in aqueous media	oral bioavailabilit y of lipophilic drugs, ease of administratio n (capsule), good for poorly soluble drugs	surfactant content, potential GI irritation, drug precipitation upon dilution if poorly formulated
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B. Key Advantages of Emulsion Systems

Oil-based emulsions, in their various forms, offer several distinct advantages as drug delivery platforms, particularly for lipophilic compounds.

1. Enhanced Solubilization and Absorption of Lipophilic Drugs:

This is arguably the most significant advantage of emulsion systems. Many drugs, especially those belonging to Biopharmaceutical Classification System (BCS) Class II (low solubility, high permeability) and Class IV (low solubility, low permeability), suffer from poor aqueous solubility, which limits their dissolution and subsequent absorption.⁵ The oil phase in emulsions acts as a solvent for these lipophilic drugs, effectively increasing their concentration in a dispersed form within the GI tract or on the skin.⁵ The formation of small droplets, especially in microemulsions and nanoemulsions, dramatically increases the interfacial surface area available for drug release and absorption, leading to improved dissolution rates.¹⁵

2. Improved Bioavailability for Poorly Water-Soluble Compounds:

Consequent to enhanced solubilization and absorption, emulsions can significantly improve the oral bioavailability of poorly water-soluble drugs.⁵ For highly lipophilic drugs, absorption via the intestinal lymphatic system can occur, which bypasses the hepatic first-pass metabolism, a major route of pre-systemic drug degradation. This lymphatic transport, often facilitated by chylomicron formation, can lead to a substantial increase in the amount of active drug reaching

systemic circulation.⁴¹ Nanoemulsions, in particular, are reported to improve the reproducibility of plasma concentration profiles and bioavailability.⁴¹

3. Protection Against Drug Degradation:

Encapsulating a drug within the oil droplets of an emulsion can shield it from the harsh chemical or enzymatic environment of the GI tract (e.g., acidic pH, digestive enzymes) or from oxidative degradation during storage or in vivo transit.⁶ This protection helps maintain the drug's integrity and activity, contributing to improved therapeutic outcomes. For instance, oxidation of oils and drugs can be minimized by adding antioxidants or manufacturing under nitrogen.⁶

4. Ease of Formulation and Scale-Up (especially for certain types):

Conventional emulsions and some self-emulsifying systems can often be manufactured using relatively simple and well-established mixing equipment and processes, which facilitates straightforward scale-up for industrial production.⁸ Microemulsions, due to their thermodynamic stability, can form spontaneously with minimal energy input once the components are combined in the correct proportions.³³ This contrasts with the often more complex and energy-intensive methods required for some nanoparticle fabrications. The "ease of manufacture" and "cost-effectiveness" are most apparent for conventional macroemulsions and certain SEDDS/microemulsions. However, it is important to note that high-energy methods often employed for producing nanoemulsions (e.g., high-pressure homogenization, ultrasonication) can be more complex and costly, approaching the manufacturing demands of some nanoparticle systems.³⁹ Thus, the advantage in manufacturing simplicity is not universal across all emulsion types.

5. Cost-Effectiveness in Specific Scenarios:

The raw materials commonly used in emulsion formulations, such as vegetable oils (e.g., soybean, palm, olive oil) and standard food-grade or pharmaceutical-grade emulsifiers, are often readily available and relatively inexpensive compared to specialized excipients or ligands used in advanced nanoparticle systems.⁸ Combined with simpler manufacturing processes for some emulsion types, this can lead to lower overall production costs, making them an attractive option for certain drugs and market segments.

6. Established Routes of Administration (Oral, Topical, Parenteral):

Emulsions have a long and successful history of use across various routes of administration. Orally, SEDDS, SMEDDS, and SNEDDS are widely employed to enhance the absorption of

drugs like cyclosporine and ritonavir.⁴⁰ Topically, O/W and W/O emulsions form the basis of numerous creams, lotions, and ointments for dermatological and cosmetic applications.³³ Parenterally, lipid emulsions (typically O/W) are well-established for total parenteral nutrition (TPN) and as delivery vehicles for lipophilic intravenous drugs like propofol and diazepam.⁶

C. Challenges and Limitations of Emulsion Systems

Despite their utility, oil-based emulsion systems also present several challenges and limitations.

1. Thermodynamic Instability and Physical Stability Issues:

A primary drawback of conventional macroemulsions is their inherent thermodynamic instability. Over time, or when subjected to environmental stresses such as temperature fluctuations, they tend to undergo physical changes like creaming or sedimentation (density-driven separation of phases), flocculation (reversible aggregation of droplets), and coalescence (irreversible merging of droplets into larger ones), ultimately leading to phase separation or "cracking" of the emulsion.³³ These instability phenomena compromise the formulation's homogeneity, appearance, and performance. Nanoemulsions, while kinetically more stable due to their small droplet size and reduced gravitational forces, are still thermodynamically unstable systems that can break down over extended periods or under stress.³⁹ Microemulsions, although thermodynamically stable, can lose their stability upon significant dilution or changes in temperature or composition.³⁹ Furthermore, the lipid components in any oil-based system are susceptible to oxidative degradation, which can affect the stability of both the vehicle and the encapsulated drug, potentially generating harmful byproducts.⁵

2. Limited Versatility for Certain Drug Types:

Oil-based emulsions are primarily designed for and most effective at delivering lipophilic (oil-soluble) drugs.⁵ Efficiently encapsulating and delivering hydrophilic (water-soluble) drugs or macromolecular biologics (proteins, peptides, nucleic acids) can be challenging with simple O/W or W/O emulsions. While W/O emulsions can carry hydrophilic drugs in their dispersed aqueous phase, their applicability for systemic delivery is limited. More complex formulations, such as water-in-oil-in-water (W/O/W) double emulsions, are often required to incorporate hydrophilic compounds into systems with an external aqueous phase, but these add to formulation complexity and can have their own stability issues.³³ Nanoemulsions are reported

to encapsulate both hydrophilic and lipophilic drugs ⁴¹, but their capacity for hydrophilic compounds may be inferior to specialized nanoparticle systems like liposomes.³⁹ The delivery of sensitive biologics, which may denature in the presence of oils or high shear forces during emulsification, generally necessitates more sophisticated nanoparticle approaches.³⁸

3. Difficulties in Achieving Precise Targeting or Complex Release Profiles:

Simple emulsion systems generally lack intrinsic targeting capabilities beyond some passive accumulation in organs with high lipid uptake, such as the liver.⁶ Their drug distribution is primarily governed by the physicochemical properties of the formulation and the route of administration. Modifying the surface of liquid emulsion droplets for active, ligand-mediated targeting is considerably more complex and less established than for solid nanoparticles. Similarly, achieving highly precise, programmed, or stimuli-responsive drug release profiles is more challenging with emulsions compared to advanced or solid lipid nanoparticles. Drug release from emulsions is typically diffusion-controlled from the oil droplets, and while SEDDS/SMEDDS/SNEDDS provide rapid dispersion and release, and some topical emulsions can offer sustained release ³³, the level of control over release kinetics is generally less sophisticated than that achievable with nanoparticles specifically engineered for complex release patterns.

4. Potential for Irritation or Toxicity from Emulsifiers/Components:

The surfactants and co-surfactants used to stabilize emulsions, especially if required in high concentrations (as can be the case for microemulsions or some nanoemulsions), may cause irritation to the skin or mucous membranes (e.g., GI tract).⁵¹ For parenteral emulsions, there are stringent regulatory requirements regarding the purity of components (especially oils, to avoid peroxides and other contaminants) and the droplet size distribution (to prevent the risk of embolism or other adverse vascular events).⁶ The choice of emulsifier is critical for biocompatibility.

IV. Comparative Analysis: Nanoparticles versus Oil-Based Emulsions

A direct comparison between nanoparticle-based systems and oil-based emulsions reveals distinct advantages and limitations for each, contingent upon the specific therapeutic objective, drug characteristics, and desired performance attributes.

Table 3: Comparative Overview of Nanoparticles vs. Oil-Based Emulsions

Feature	Nanoparticles (General)	Oil-Based Emulsions (General)
Primary Drug Type Suitability	Highly versatile: Hydrophilic, hydrophobic, lipophilic, biologics (proteins, nucleic acids) ⁹	Primarily lipophilic/hydrophobic drugs; hydrophilic drugs possible with W/O or double emulsions, but less efficient for biologics ¹⁶
Targeting Potential (Site-Specific Delivery)	High: Passive (EPR effect) and active (ligand-mediated surface functionalization) targeting achievable ²¹	Low to Moderate: Generally lacks specific targeting; some passive accumulation (e.g., liver). Nanoemulsions may offer some enhanced tissue interaction. ⁶
Controlled/Sustained Release Capability	High: Tunable release via matrix degradation, diffusion, stimuli-responsive mechanisms (pH, temp, enzymes) ⁸	Moderate: Primarily diffusion-controlled from droplets; SEDDS offer rapid release. Some topical systems offer sustained release. ³³
Formulation Stability	Variable: /SLNs generally good; liposomes/some LNPs can have issues (leakage, aggregation) ⁸	Variable: Conventional emulsions unstable; microemulsions thermodynamically stable; nanoemulsions kinetically stable. Lipid oxidation risk. ⁶

Manufacturing Complexity & Cost	Generally Higher: Especially for sophisticated, functionalized systems. Scalability can be challenging ⁸	Generally Lower: Especially for conventional emulsions, microemulsions, and SEDDS. Nanoemulsion production can be energy-intensive. ⁸
Typical Size	10–1000 nm (often <200 nm for nanomedicine) ⁷	Macroemulsions: >1µm; Micro/Nanoemulsions: 10–600 nm ³⁴
Biological Barrier Penetration (e.g., BBB)	Moderate to High: Nanosize aids mucosal/skin penetration; specifically engineered NPs for BBB ⁷	Moderate: Nano/microemulsions enhance skin/mucosal penetration. Intranasal microemulsions for brain delivery explored. ³⁸
Key Advantage	Targeting precision, controlled release versatility, delivery of biologics, BBB penetration potential.	Enhanced solubilization and oral bioavailability of lipophilic drugs, simpler manufacturing/lower cost for some types, established routes.
Key Limitation	Manufacturing complexity/cost, potential toxicity/immunogenicity, <i>in vivo</i> stability/clearance issues.	Thermodynamic instability (conventional), limited targeting, less versatile for hydrophilic drugs/biologics, surfactant issues.

A. Efficacy and Bioavailability Enhancement

Nanoparticles demonstrate broad applicability in enhancing the bioavailability of



diverse drug types, including hydrophilic, hydrophobic, and biological macromolecules, through mechanisms such as improved solubilization, protection from degradation, targeted delivery to absorptive sites, and enhanced permeation across biological barriers.³ The enhancement of oral bioavailability by nanoparticle formulations, including nanoparticles and various lipid-based nanosystems like NLCs or nanocrystals, has been particularly significant for challenging drugs.¹

Oil-based emulsions, particularly nanoemulsions and self-emulsifying systems (SEDDS/SMEDDS/SNEDDS), are exceptionally effective in improving the oral bioavailability of lipophilic drugs.⁵ They achieve this by increasing drug solubilization in the GI tract, presenting the drug in a readily absorbable form, and potentially promoting lymphatic uptake, thereby bypassing hepatic first-pass metabolism.⁴¹ Nanoemulsions generally exhibit superior performance over conventional macroemulsions in this regard due to their larger interfacial area and more intimate contact with the absorptive mucosa.³⁶

Comparing the two, nanoparticles offer a wider scope for bioavailability enhancement across a broader range of drug classes and administration routes. Emulsions, while highly effective, are more specialized for improving the absorption of lipophilic compounds, primarily via the oral and topical routes. Interestingly, a direct pharmacokinetic comparison of methotrexate formulated in PLGA nanoparticles versus an olive oil-based nanoemulsion in rats indicated that the nanoemulsion formulation exhibited a tendency for significantly decreased clearance and increased bioavailability compared to the nanoparticles.⁵⁵ This particular finding underscores that the "nano" advantage is not exclusive to solid nanoparticles and that nano-sized emulsions can also achieve substantial pharmacokinetic improvements, sometimes even surpassing specific solid nanoparticle formulations for certain drugs. The mechanisms, however, may differ; for instance, the nanoemulsion's benefit might stem more from enhanced absorption and altered distribution pathways rather than matrix-controlled release



characteristics typical of many solid nanoparticles.

B. Stability of Formulation and Drug Cargo

The stability of the formulation and the protection of the encapsulated drug are paramount for successful drug delivery. nanoparticles and solid lipid nanoparticles (SLNs and NLCs) are generally designed to offer good physical stability and robust protection of the drug cargo from chemical and enzymatic degradation *in vivo*.⁸ The solid matrix of these nanoparticles provides a rigid environment that can prevent drug leakage and degradation. However, certain types of nanoparticles, such as liposomes or some lipid nanoparticles (LNPs), can be susceptible to physical instability issues like aggregation, fusion, or premature drug leakage, especially during storage or upon interaction with biological components [¹⁵ (niosomes), ¹⁷ (LNPs), ¹⁵].

Conventional oil-based emulsions are inherently thermodynamically unstable and are prone to various destabilization processes like creaming, flocculation, coalescence, and phase separation over time.³³ Nanoemulsions, due to their very small droplet size, exhibit significantly improved kinetic stability against these gravitational separation phenomena compared to macroemulsions.³⁵ Microemulsions are thermodynamically stable due to the specific balance of oil, water, and surfactant(s), but their stability can be compromised by changes in temperature or upon dilution.³³ A common concern for all oil-based systems is the potential for oxidative degradation of the lipid components, which can affect both the vehicle and the drug, necessitating the inclusion of antioxidants or protective manufacturing conditions.⁶ An innovative approach to enhance emulsion stability involves Pickering emulsions, which utilize solid particles (instead of surfactants) as stabilizers, forming a robust interfacial barrier around droplets.³⁵

In general, well-designed solid nanoparticles (, SLNs, NLCs) often provide superior long-term physical stability and drug protection compared to conventional liquid-based emulsions. Within the emulsion category, nanoemulsions and microemulsions offer





substantially improved stability profiles over their macroemulsion counterparts.

C. Targeted Delivery Capabilities and Specificity

Nanoparticles possess a distinct advantage in their capacity for targeted drug delivery. This can be achieved through passive mechanisms, such as the EPR effect in tumors, where nanoparticles accumulate due to leaky vasculature¹⁸, or more effectively through active targeting. Active targeting involves the surface functionalization of nanoparticles with specific ligands (e.g., antibodies, peptides, aptamers) that recognize and bind to receptors overexpressed on target cells or tissues.³ This ligand-receptor interaction facilitates selective uptake by target cells, thereby enhancing drug concentration at the desired site of action and minimizing off-target toxicity.

Oil-based emulsions, in their simpler forms, generally lack such sophisticated, specific targeting capabilities. Their biodistribution is primarily governed by their physicochemical properties (droplet size, surface charge if any, lipid composition) and the route of administration. While nanoemulsions, due to their small size, might exhibit altered biodistribution or enhanced interaction with certain tissues compared to macroemulsions, they typically do not possess the active targeting moieties that can be readily engineered onto the surface of solid nanoparticles.⁶ Achieving active targeting with liquid emulsion droplets is technically more challenging than with solid particulate systems.

Therefore, for applications requiring high precision and site-specific drug delivery, nanoparticles offer significantly more advanced and versatile options through well-established surface engineering strategies.

D. Controlled Release Mechanisms and Pharmacokinetic Modulation

Nanoparticles provide a diverse toolkit for modulating drug release kinetics and, consequently, the drug's pharmacokinetic profile. nanoparticles, for instance, can be designed for sustained release through drug diffusion from the matrix or by controlled





degradation of the excipient itself.⁸ Furthermore, stimuli-responsive nanoparticles can be engineered to release their drug payload specifically in response to triggers present in the target microenvironment (e.g., low pH in tumors or endosomes, specific enzymes, redox conditions), allowing for highly programmed and site-specific drug release.

Drug release from conventional emulsions is typically diffusion-controlled from the oil droplets into the surrounding aqueous phase. The rate of release can be influenced by factors such as drug solubility in the oil and aqueous phases, droplet size, and the nature of the interfacial film. Self-emulsifying systems (SEDDS, SMEDDS, SNEDDS) are designed for rapid dispersion and drug release upon contact with GI fluids, aiming to maximize absorption.³⁷ Some topical emulsion formulations can provide sustained release of drugs into the skin.³³

While emulsions can offer some degree of release modulation, nanoparticles generally provide a much broader and more sophisticated range of mechanisms for achieving precise control over drug release rates and patterns, enabling more tailored pharmacokinetic profiles for specific therapeutic needs. However, as seen with the methotrexate example⁵⁵, nanoemulsions can also significantly modulate pharmacokinetics, potentially through mechanisms related to absorption efficiency and distribution rather than complex matrix-controlled release. This highlights that substantial PK improvements are achievable with advanced emulsion systems, though the underlying mechanisms for release control may differ from those in solid nanoparticles.

E. Biological Barrier Penetration (Skin, Mucosa, BBB)

The ability to overcome biological barriers is crucial for effective drug delivery to many target sites. Nanoparticles, owing to their small size and tunable surface properties, can facilitate the penetration of drugs across mucosal layers (e.g., intestinal, nasal, ocular) and the skin.⁸ Of particular interest is the development of nanoparticles



specifically engineered to traverse the highly restrictive blood-brain barrier (BBB), which has historically been a major impediment to treating CNS diseases.⁷ Mechanisms for NP-mediated BBB transport include adsorptive-mediated transcytosis, receptor-mediated transcytosis (by functionalizing NPs with ligands for BBB transporters like transferrin or glucose transporters), and disruption of tight junctions.¹⁹

Oil-based nanoemulsions and microemulsions also demonstrate enhanced penetration across biological barriers like the skin and mucous membranes compared to conventional formulations.⁴² Their small droplet size, large surface area, and the presence of surfactants can fluidize membrane lipids or temporarily disrupt barrier integrity, facilitating drug permeation. For brain delivery, intranasal administration of drug-loaded microemulsions or nanoemulsions is being explored as a non-invasive strategy to bypass the BBB and deliver therapeutics directly to the CNS via olfactory and trigeminal nerve pathways [⁴³ (general mention of BBB for nanoemulsions), ³⁸].

Both nano-sized formulations (solid nanoparticles and liquid nanoemulsions/microemulsions) show advantages over larger conventional systems in barrier penetration. For BBB transport, engineered solid nanoparticles currently appear to offer a more diverse array of strategic approaches, particularly those involving receptor-mediated mechanisms. However, the potential of nanoemulsions for brain delivery, especially via alternative routes like intranasal administration, is an active area of investigation.

F. Versatility for Different Drug Moieties (Hydrophilic, Lipophilic, Biologics)

Nanoparticles, as a class, exhibit remarkable versatility in their ability to encapsulate or associate with a wide range of therapeutic agents. Liposomes, for example, can simultaneously carry hydrophilic drugs within their aqueous core and lipophilic drugs within their lipid bilayers.⁹ nanoparticles can be tailored through excipient selection and formulation techniques to effectively deliver small molecules (both hydrophilic and hydrophobic), as well as macromolecular biologics such as proteins, peptides, siRNA,



mRNA, and DNA.⁸ This makes them suitable for a broad spectrum of therapeutic applications, including gene therapy and vaccine development.

Traditional oil-based emulsions are primarily designed for the delivery of lipophilic (oil-soluble) drugs, as these can be readily dissolved or dispersed in the oil phase.⁵ While nanoemulsions have been reported to encapsulate both hydrophilic and lipophilic compounds [¹⁶ (though noting limited efficiency vs. liposomes for hydrophilic drugs)], their capacity and efficiency for hydrophilic drugs or sensitive biologics are often lower compared to specialized nanoparticle systems like liposomes or certain carriers. To incorporate hydrophilic drugs into emulsion systems that have an external aqueous phase, more complex formulations like W/O/W double emulsions are typically required, which adds to formulation intricacy and potential stability concerns.³³

Therefore, nanoparticles generally offer greater versatility in accommodating a wider range of drug polarities and molecular types, particularly for challenging macromolecular biologics where protection from degradation and specific intracellular delivery mechanisms are often required.

The critical distinction between "nanoemulsions" (liquid-in-liquid dispersions) and "solid nanoparticles" (solid particles in a dispersion) must be emphasized. While nanoemulsions leverage their small droplet size for benefits such as increased surface area and improved stability over macroemulsions, their fundamental structure (liquid core, surfactant stabilization) differs significantly from the solid matrix and diverse material composition of solid nanoparticles. This structural difference profoundly impacts drug retention mechanisms, release profiles, and the potential for sophisticated surface functionalization. Active targeting, for example, is far more extensively developed and readily achievable with solid nanoparticles compared to liquid nanoemulsion droplets. Thus, direct comparisons must be specific to the types of systems involved. For instance, comparing a nanoemulsion to an SLN (both being "nano" and lipid-based) involves different considerations than comparing a





conventional W/O macroemulsion to a micelle. The former comparison might focus on subtle differences in drug loading mechanisms (dissolution in liquid lipid vs. incorporation in solid lipid matrix), release kinetics, and manufacturing nuances, while the latter involves more fundamental disparities in applicability, stability, and achievable sophistication in delivery.

G. Biocompatibility

The safety profile of any drug delivery system is paramount. For nanoparticles, biocompatibility are highly dependent on their constituent materials, size, surface charge, morphology, concentration, and route of administration.⁷ Biodegradable excipients (e.g., phospholipids, triglycerides) used in many nanoparticle formulations are generally considered biocompatible and have a good safety record.¹² However, some inorganic nanoparticles (e.g., certain metal oxides, quantum dots) or non-biodegradable excipients can elicit dose-dependent toxicity, including oxidative stress, inflammation, and organ accumulation.¹¹

Comparing the two, emulsions made from well-established, food-grade or pharmaceutical-grade components may offer a more straightforward biocompatibility assessment for common routes like oral and topical delivery but lack high absorption potential of the API delivering an average of 20% (standard emulsions) to 40% (nanoemulsions) compared to nanoparticles delivering 80%-90+% of the API. The biocompatibility of nanoparticles is more variable and necessitates careful, formulation-specific evaluation.

H. Manufacturing, Scalability, and Cost-Effectiveness

Practical considerations such as manufacturing complexity, scalability, and cost-effectiveness are critical for the translation of drug delivery systems from the laboratory to clinical use. Nanoparticle formulations, especially those involving sophisticated designs with multiple components, surface modifications, or





stimuli-responsive features, often entail complex, multi-step synthesis, purification, and characterization processes.⁸ These complexities can lead to higher manufacturing costs and significant challenges in scaling up production while maintaining batch-to-batch consistency and quality control. However, advancements are being made; for example, lipid nanoparticle (LNP) production for mRNA vaccines using rapid mixing techniques has proven to be scalable.²⁴

Conventional oil-based emulsions and some self-emulsifying systems (SEDDS/microemulsions) are generally simpler and less expensive to manufacture and scale up.¹⁶ The raw materials are often common and inexpensive, and the processing equipment (e.g., mixers, homogenizers) is widely available. The production of nanoemulsions can be more energy-intensive if high-energy methods like high-pressure homogenization or ultrasonication are required³⁹, although low-energy methods also exist that rely on the physicochemical properties of the components.⁴²

In general, simpler emulsion systems (conventional macroemulsions, microemulsions, and many SEDDS) hold an advantage in terms of manufacturing ease and lower cost compared to most nanoparticle systems. The development of more efficient, scalable, and cost-effective manufacturing processes for nanoparticles remains an active and crucial area of research.

The perceived clinical benefit of a nanoparticle formulation must be substantial enough to justify its typically higher complexity and cost compared to simpler systems, including advanced emulsions or even improved conventional formulations. While nanoparticles offer high *potential* for precise targeting and controlled release, the *actualized clinical superiority* needs rigorous, case-by-case demonstration. The added developmental burden for nanoparticles must translate into a significant improvement in the therapeutic index (efficacy vs. toxicity) or enable therapies that are otherwise not feasible. For example, the study on paclitaxel nanoformulations⁵⁶ where different types (liposome, emulsion, albumin-NP) showed similar *in vivo* antitumor efficacy in one



model, despite *in vitro* differences, suggests that increased complexity does not automatically equate to a better outcome, and that interactions with the host biological system (e.g., immune response to the carrier) can be critical equalizers or confounders. This underscores the idea that there isn't a universal "nanoparticle is better" rule; rather, the choice depends on whether the unique capabilities of a specific nanoparticle system are indispensable for a given drug and therapeutic challenge, and if these benefits outweigh the practical hurdles. Simpler, incrementally improved systems like nanoemulsions or optimized SEDDS might offer a more pragmatic and faster path to market for many drugs unless the unique functionalities of solid nanoparticles are absolutely essential.

VI. Concluding Perspectives and Future Directions

A. Summarizing Key Differentiators and Context-Dependent Advantages

The comparative analysis of nanoparticles and oil-based emulsions as drug delivery systems reveals a landscape of nuanced advantages and specific application domains rather than a universal superiority of one platform over the other. Nanoparticles, as a broad class of engineered materials, generally offer a higher degree of sophistication and versatility. Their key strengths lie in the potential for precise targeted delivery to specific cells or tissues (via passive and active mechanisms), the ability to provide complex and tunable controlled drug release profiles, their capacity to encapsulate a wide array of therapeutic moieties including challenging biologics (proteins, nucleic acids), and their demonstrated potential to overcome significant biological barriers such as the blood-brain barrier.

Oil-based emulsions, particularly modern formulations like nanoemulsions and self-emulsifying drug delivery systems (SEDDS/SMEDDS/SNEDDS), excel in enhancing the solubility and oral bioavailability of lipophilic (poorly water-soluble) small molecule drugs. They often present advantages in terms of simpler manufacturing processes, lower production costs, and well-established regulatory pathways for certain



applications, especially oral and topical delivery.

The decision to employ nanoparticles versus oil-based emulsions is not binary but rather a context-dependent choice. It necessitates a comprehensive assessment of multiple factors, including the physicochemical properties of the drug, the specific therapeutic objective, the intended route of administration, the required level of precision in delivery and release, and practical constraints related to development time, manufacturing complexity, and cost.

B. Identifying Scenarios Where Nanoparticles are Distinctly Advantageous

Nanoparticle-based systems are often the preferred or necessary choice in scenarios demanding advanced functionalities that simpler systems cannot readily provide:

- **Delivery of Active Pharmaceutical Ingredients:** For cannabinoids, and other oil-soluble APIs peptides, and proteins, nanoparticles (e.g., lipid nanoparticles, nanoparticles, liposomes) offer crucial protection from enzymatic degradation *in vivo* and can facilitate efficient intracellular delivery to target organelles, which is essential for their therapeutic action.⁹
- **Active Cellular/Tissue Targeting:** When highly specific delivery to particular cell types (e.g., cancer cells, immune cells) or tissues is required to maximize therapeutic efficacy while minimizing systemic toxicity, the surface functionalization capabilities of nanoparticles with targeting ligands are unparalleled.²¹ This is particularly relevant in oncology and for treating inflammatory diseases.
- **Crossing Formidable Biological Barriers:** For delivering drugs to privileged sites like the central nervous system, engineered nanoparticles designed to traverse the blood-brain barrier offer a promising strategy where conventional drugs and emulsions often fail.¹⁹
- **Complex and Programmed Drug Release:** Applications requiring sophisticated drug release kinetics, such as multi-stage release, pulsatile release, or release



triggered by specific physiological or external stimuli (e.g., pH, enzymes, temperature, light, magnetic field), are best addressed by "smart" nanoparticle designs.⁸

- Solid Matrix Benefits: In cases where a solid carrier matrix is beneficial for enhancing drug stability over long periods, providing very prolonged and predictable release, or for specific interactions with biological systems, solid nanoparticles (, SLNs, NLCs) are advantageous over liquid-core emulsions.

C. Identifying Scenarios Where Oil-Based Emulsions (including Nanoemulsions) Remain a Preferred or Practical Choice

Oil-based emulsions, including their advanced nano-formulations, continue to be a highly relevant and often preferred platform in several key situations:

- Oral Delivery of Lipophilic Small Molecules: For poorly water-soluble (BCS Class II/IV) drugs administered orally, the primary goal is often to enhance dissolution and absorption. Emulsions, particularly SEDDS, SMEDDS, SNEDDS, and nanoemulsions, excel in this domain by solubilizing the drug and presenting it in a highly dispersed form for efficient uptake, often without the need for complex targeting.⁵
- Topical and Transdermal Delivery: For localized treatment of skin conditions or for transdermal delivery of certain drugs, emulsions (creams, lotions, emulgels) offer good skin penetration, desirable sensory properties, and patient acceptability. Nanoemulsions can further enhance skin permeation.³³
- Simplicity, Cost, and Development Speed: When formulation simplicity, lower manufacturing costs, and faster development timelines are critical factors, and the drug's characteristics and therapeutic application are amenable, emulsions can be a more pragmatic choice than complex nanoparticle systems.¹⁶ This is especially true if advanced targeting or release control is not essential.
- Established Parenteral Applications: Lipid emulsions are well-established and effective for parenteral nutrition and as vehicles for certain intravenous anesthetics

(e.g., propofol) or other lipophilic drugs where rapid and widespread distribution is acceptable or desired.⁶

- High Oil Solubility of Drug: If the drug is highly soluble in pharmaceutically acceptable oils and a simple O/W or W/O system can provide adequate delivery and stability without requiring the structural features or protective encapsulation of a solid nanoparticle matrix.

D. Future Trends and Unanswered Questions

The field of drug delivery is continuously evolving, with ongoing research aimed at refining existing platforms and developing novel approaches.

- Nanoparticles: Future advancements are anticipated in the realm of "smart" nanoparticles, including those capable of responding to multiple physiological stimuli for highly specific drug release, and theranostic nanoparticles that combine diagnostic imaging with therapeutic delivery.⁹ The integration of artificial intelligence and machine learning in nanoparticle design is expected to accelerate the development of systems with tailored characteristics for personalized medicine.¹³ A deeper understanding of nano-bio interactions, particularly with the immune system, is crucial for improving *in vivo* performance and predictability.⁵⁶ Significant efforts are also directed towards developing more scalable, reproducible, and cost-effective manufacturing techniques for complex nanomedicines.
- Emulsions: Research in emulsion technology continues to focus on enhancing the stability and functionality of nanoemulsions, for example, through the use of novel biocompatible oils and emulsifiers, or innovative stabilization strategies like Pickering emulsions employing responsive particles.⁵ The application scope of SEDDS, SMEDDS, and SNEDDS is likely to expand as more poorly soluble drugs enter development pipelines.
- Bridging the Gap: Hybrid systems that aim to combine the advantages of both platforms are emerging. Examples include drug-loaded nanoparticles dispersed

within an emulsion carrier, or nanoparticle-stabilized emulsions (a form of Pickering emulsion). Such systems could potentially offer unique benefits.

- **Regulatory Science:** Regulatory frameworks must continue to evolve to keep pace with the rapid innovation in both nanoparticle and advanced emulsion technologies, ensuring robust evaluation of safety and efficacy while facilitating the translation of promising systems to the clinic.
- **Head-to-Head Clinical Trials:** A persistent need exists for more well-designed, rigorous clinical trials that directly compare optimized nanoparticle formulations against optimized emulsion formulations (especially nanoemulsions or SEDDS) for the same drug and clinical indication. Such studies are essential for making definitive, evidence-based choices in clinical practice.²⁷

The future of drug delivery will likely embrace a "horses for courses" philosophy. The selection of an optimal delivery system will be increasingly guided by a comprehensive understanding of the drug's specific molecular characteristics, the nature of the biological barriers to be overcome, the detailed pathophysiology of the target disease, patient-specific factors (pharmacogenomics, disease stage), and the economic viability of the proposed therapeutic product. It is improbable that a single delivery platform will emerge as universally superior. Instead, a diverse armamentarium of systems, including various nanoparticles and advanced emulsions, will be available, with choices tailored to the specific challenge at hand. This necessitates multidisciplinary expertise within drug development teams, spanning materials science, pharmacology, pharmaceuticals, bioengineering, and manufacturing science, to make informed decisions. Platform technologies that can be readily adapted for different drugs within a particular class (e.g., a validated LNP platform for various mRNA payloads) will likely gain prominence due to efficiencies in development and regulation.

Furthermore, the delineations between "nanoparticles" and "emulsions" can sometimes become indistinct, particularly when considering systems like "nanoemulsions" (which have droplet sizes overlapping with many nanoparticles) and

"nanostructured lipid carriers (NLCs)" (which are solid lipid nanoparticles but incorporate liquid lipids, thus sharing some characteristics with emulsions).¹⁴ This creates a spectrum of lipid-based delivery options rather than a stark dichotomy. Future research may increasingly focus on optimizing these "hybrid" or "intermediate" systems that seek to capture the most advantageous features of both traditional categories—for example, leveraging the high drug-loading capacity often associated with an oil phase while benefiting from the enhanced stability or controlled release mechanisms of a more structured nanoparticle. Precise terminology and a clear understanding of the specific system's composition and structure will be crucial to avoid confusion and to accurately assess comparative benefits in this evolving landscape.

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The logo for plantrica, consisting of the word "plantrica" in a lowercase, sans-serif font, centered within a light blue square border.

Nanoparticles | PLOS One, accessed May 14, 2025,
<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0126366> Absolutely! Here's a breakdown of the document's key points in an informal, easy-to-digest list:

