



Received on 10 March 2022; received in revised form, 10 June 2022; accepted 10 September 2022; published 01 November 2022

NANO GELS: AN OVERVIEW OF PROPERTIES, CLASSIFICATIONS, DRUG TARGETING METHODS, EVALUATION PARAMETERS AND APPLICATIONS

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Keywords:

NGs, Release mechanism, Drug targeting, Cancer targeting, Marketed formulation, NGs application

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ABSTRACT: Nanogels (NGs) are advanced and innovative drug delivery systems that play an important role in remarking many issues that are associated with recent and trendy courses of treatment, such as non-specific effects and low stability. NGs could be well-defined as extremely cross-linked hydrogels (nano-sized) ranging from 20-200 nm. NGs are vigorous nanoparticles (NPs) used to deliver active drug complexes for the controlled delivery of drugs. This system is simpler and safer for both hydrophobic and hydrophilic drugs because of their chemical composition and formulations that are unsuitable for different formulations. Drugs are incorporated into NGs for many purposes, like gene targeting, organ targeting, diagnosis, and many more. NGs can be administered through different pulmonary, nasal, transdermal, intra-ocular, oral, and parenteral routes. Frequently, NGs are used to treat cancer, bone regeneration, inflammation, *etc.* This NGs system is a novel drug delivery system for hydrophobic and hydrophilic drugs. This review mainly focuses on providing general information on NGs, their properties, various classifications, drug targeting methodology, different types of drug delivery systems, evaluation methods and novel applications of NGs in detail.

INTRODUCTION: NGs are three-dimensional (3D) structures made up of physically or chemically cross-linked polymers with amphiphilic or hydrophilic molecular chains, as shown in **Fig. 1**. It maintains the structure intact because NGs are ready to swell by holding an excellent quantity of water with no dissolving.

The good water content correlates with the fluid-like transport properties for the biologically active molecules that are considerably smaller than the gel pore size¹. NPs have some advantages over conventional formulations, such as controlled drug release, resistance to degradation, delayed elimination, stimuli-responsive behaviour, and so on^{2, 3, 4}.

Moreover, NGs-based nanomedicines should fulfill all the desires of drug delivery systems to make sure maximum therapeutic impact with minimal side effects, stable covalent bonds or, less preferably, encapsulation of the active substance

<p>QUICK RESPONSE CODE</p> 	<p>DOI: 10.13040/IJPSR.0975-8232.13(11).4385-00</p> <hr/> <p>This article can be accessed online on www.ijpsr.com</p> <hr/> <p>DOI link: http://dx.doi.org/10.13040/IJPSR.0975-8232.13(11).4385-00</p>
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must be guaranteed^{3, 4, 5}. NGs are often administered with two basic methods, such as passive and active targeting. In passive targeting, NGs show drug release concerning the surface charge, size, swelling, and other physicochemical properties.

On the other hand, in active targeting, NGs conjugate with specific moieties that precisely identify and bind to several over-expressed receptors at the targets^{3,4,6}.

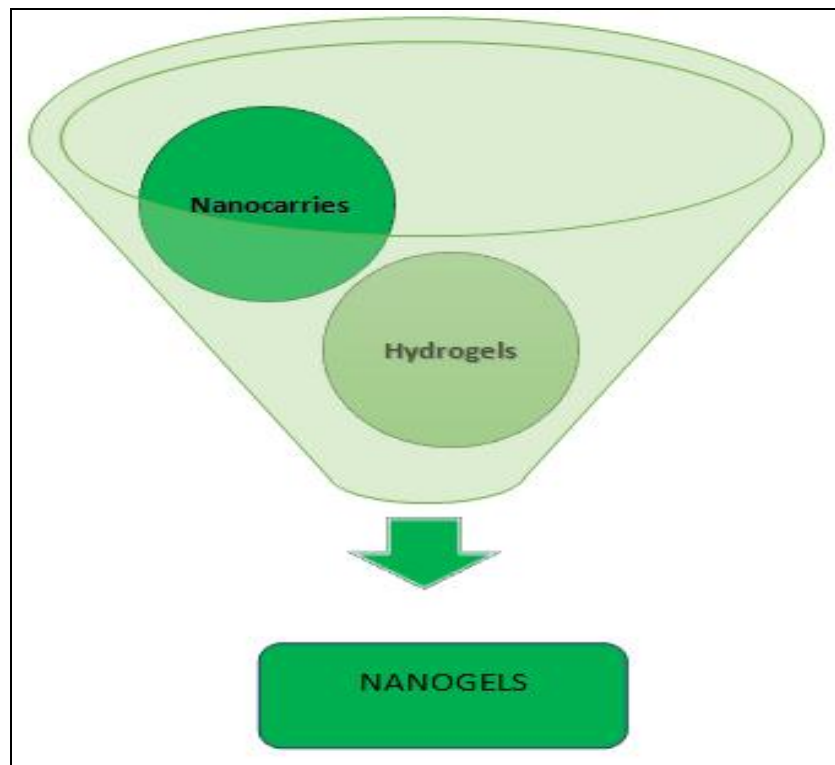


FIG. 1: NANO GEL COMPOSITION

Advantages of Nanogels:

- ❖ NGs occur with increasing biodegradability and biocompatibility in formulations. NGs are often precise for drugs sustained release from the formulation by the addition of a polymeric network.
- ❖ Enhanced bloodstream transport and tissue permeation properties because of their optimal nm size scale - Response to a wide variety of external stimuli (ionic strength, pH, temperature).
- ❖ Drug loading capacity is high. It will contain both hydrophobic and hydrophilic drugs.
- ❖ Improved ability to access areas that are not accessible by hydrogels upon intravenous administration.
- ❖ Release of drugs can be regulated in NGs by tuning cross-linking densities^{4, 7, 8, 9, 10, 11}.

Limitations of Nanogels:

- It is an exclusive way to get rid of the surfactant and, therefore, the solvent at the top of the preparation method, although the manufacturing process isn't very pricey.
- Adverse effects could occur if a trace of polymers or surfactants remains within the system.
- NGs have limited drug-loading efficiency and sub-optimal regulation of drug release.
- Tracing of the monomer or surfactant may also be left, which may be toxic^{6, 7, 8, 11}.

Nanogels Classification: NGs are frequently classified into many classes that support their behaviour to environmental stimuli, the presence of some linkage, supported polymers consistent with their structure, and supported preparation techniques, which are shown in **Fig. 2**.

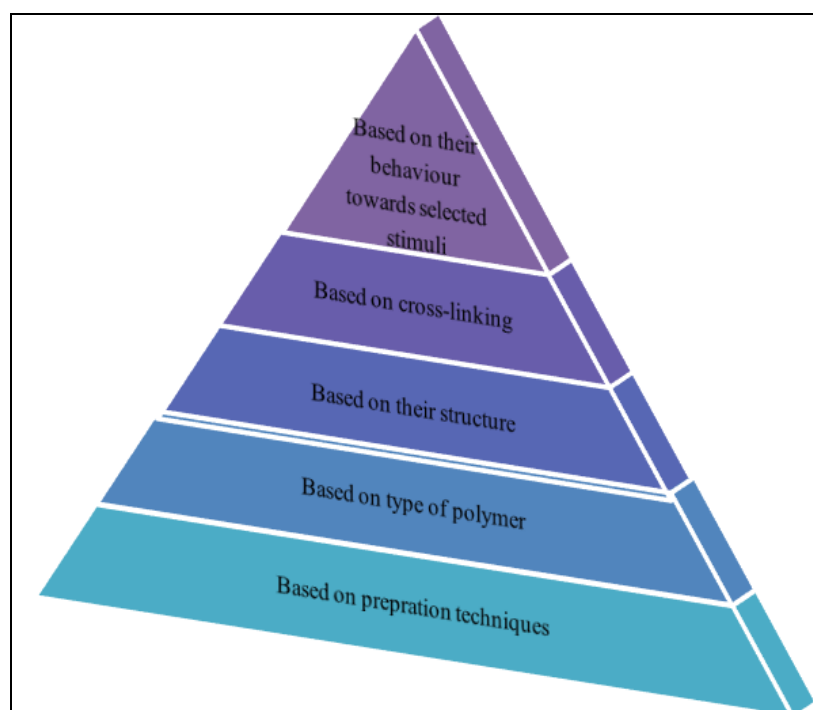


FIG. 2: CLASSIFICATIONS OF NANOGELES

1. Based on their Behaviour towards Selected Stimuli:

Based on behaviour towards stimuli, they are of two types: non-responsive NGs and stimuli-responsive NGs. NGs that are non-responsive swell in the presence of water (due to water absorption), whereas stimuli-responsive NGs swell in response to a different environmental state.

- ✓ **Non-responsive Nanogels:** When non-responsive NGs are in contact with water, they absorb it, leading to swelling of the NGs.
- ✓ **Stimuli-responsive Nanogels:** Environmental conditions, like temperature, pH, magnetic flux, and ionic strength, control whether swelling will occur or not and, therefore the extent of swelling and de-swelling of NGs. Any changes in any of those environmental factors, which act as stimuli, will cause alteration in the behaviour of the NGs as a response, hence the term stimuli-responsive NGs^{7, 12}.

Stimuli-responsive Nanogels are Many types:

- pH-sensitive
- Temperature-dependent
- Light sensitive
- Field responsive
- Ionic strength sensitive

2. Based on Cross-Linking:

I. Physical Cross-Linking: Physically cross-linked gels involve weak bonds like hydrophobic bonds, vanderwal forces, and hydrogen bonds. The formation of microgels and NGs takes a couple of minutes. Physical gels can also be formed by the aggregation and self-assembly of polymeric chains^{2, 12, 13}.

- ❖ **Liposome Modified Nanogels:** Liposome modified NGs are physically cross-linked, stimuli-responsive NGs currently being studied as transdermal drug delivery devices.
- ❖ These NGs involve the incorporation of poly [N-isopropyl-acryl amide] co-polymeric groups into the liposomes, leading to a high degree of responsiveness to temperature and ph. Additionally, succinate poly [glycidol] is infused into the liposomes under pH of 5 to make NGs that efficiently and expeditiously deliver calcein to the cytoplasm of target cells^{7, 12}.
- ❖ **Micellar:** Obtained by supra molecular self-assembly of amphiphilic block or graft copolymers in aqueous solutions. Drug molecules in the hydrophobic core are shielded from hydrolysis and enzymatic degradation.

❖ N-isopropyl acrylamide-based micelle systems, evaluated as drug delivery devices^{1,12}.

❖ **Hybrid Nanogels:** Particles of NGs become dispersed in an inorganic or organic medium. It's referred to as a hybrid NGs. Self-assembly and aggregation of amphiphilic polymers, like pullulan-PNIPAM, hydrophobized Pullulan, and hydrophobized polysaccharides, were the procedures used in the formation of NGs in an aqueous medium^{7,12}.

3. Chemical Cross-Linking: The chemically cross-linked NGs involve their networks' permanent and strong covalent bonds. The kinds of chemical bonds depend upon the sort of functional group present within the structure^{2,13}.

❖ **Disulfide Cross-Linking:** Reacting groups: disulfide and thiol, at pH, gentle reaction conditions, simple further fictionalization-Self-cross linking amphiphilic random copolymers (PEG hydrophilic unit and pyridyl disulfide hydro-phobic and cross linkable unit).

❖ **Amide Cross-Linking:** Reacting groups: carboxylic and amino esters, iodides, no additives needed- Adjustable cross-linking degree.

❖ **Imine Cross-Linking:** Schiff-base reaction-amine or hydrazide and aldehyde-no catalyst-gentle reaction conditions.

❖ **Copper-free Click Chemistry Cross-Linking:** Reacting groups: alkyl units with amino groups immobilized to the particle shell *via* amidation of hydrophilic polymer micelles Counting on a slow or fast reaction, with or without a catalyst

❖ **Photo-induced Cross-Linking:** A technique that wants to stabilize polymers with functional groups which will polymerize -Reacting groups: alkene or coumarin-UV irradiation, photo initiator-extremely efficient, toxicity concern¹.

4. Classification of Nanogels Consistent with their structure:

1. Simple Nanogels: are self-assembled, cross-linked semi-interpenetrating polymer networks that are temperature and pH-responsive⁵.

2. Cross-shell Nanogels: cross-linked stimulus-sensitive NGs made from polymers with different sensitivities and consisting of shell and core compartments¹⁴.

3. Hairy Nanogels: cross-linked by RAFT aqueous dispersion polymerization. Hairy NGs consist of a twin structure having a shell and a core. These nanomaterials respond to various stimuli, including temperature, enzymes, and pH¹⁴.

4. Hollow Nanogels: interpenetrating polymer networks Hollow NGs are fabricated by temperature-sensitive polymers with predominantly favourable constituents¹⁴.

5. Functionalized Nanogels: three-step cross-linking. These are mostly used NGs; their formulation methods are complicated and require high purification at each step, including the inverse microemulsion or microemulsion methods¹⁴.

6. Multilayer Nanogels: cross-linked, stimulus-responsive NGs that have many layers are referred to as multilayer NGs¹⁴.

Nanogels-Based Drug Release Mechanism:

There is more than one mechanism in which drug release or the bio-molecule is as well as simple diffusion, temperature, pH and the extent of transition of NGs as shown in **Fig. 3**¹⁵.

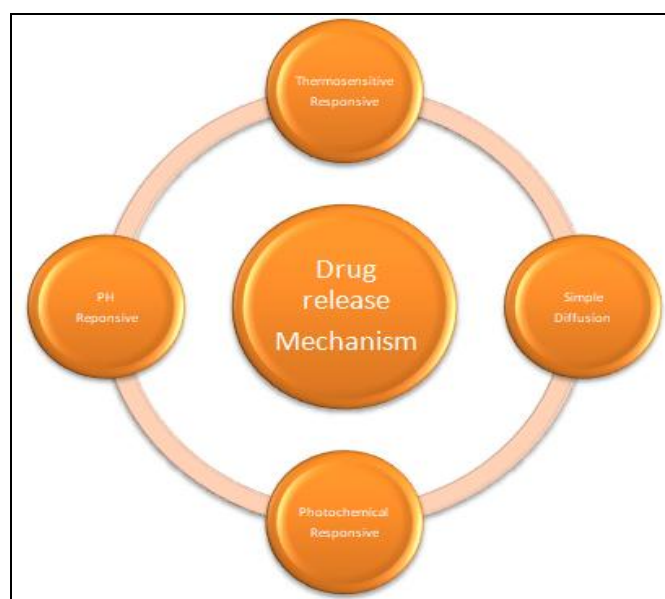


FIG. 3: DRUG RELEASE MECHANISM

1. **pH-Responsive:** Drug release in response to pH changes in the environment. In other words, drug release may happen in diverse physiological environments that obtain exclusive pH values. The maximum release will occur in the true pH region because the release is specifically executed in the targeted vicinity of a body with that pH ^{12, 13, 16}.
2. **Thermo Sensitive Responsive and Volume Transition:** Thermo sensitive NGs are developed by poly (N- isopropylacrylamide), which releases indomethacin because of temperature maintenance above the lower critical solution temperature (LCST), which results in unexpected shrinkage inside the volume of the gel. Thermo-responsive NGs was synthesized by changing polyethyleneimine with a pluronic group, which gave a decreased particle size and was efficiently used in gene transport systems. The volume transition function of NGs is a critical application in which NGs increase their volume when exposed to a change in pH, temperature, light, and so on. This quantity alternate triggers the drug launch from the NGs ^{6, 7, 12, 15, 16}.
3. **Photochemical Responsive:** In this type of NGs, swelling and deswelling is controlled by using retaining photo controllable cross-linking between polymers. Photosensitizers loaded into NGs are animated. They produce species of oxygen (singlet and reactive) which may result in oxidation inside the cellular compartment walls that extremely influence the release of therapeutic marketers into the cytoplasm ^{6, 7, 12, 13, 16}.
4. **Simple Diffusion:** Diffusion takes place while a drug or active agent passes via a polymer that forms a control release device. The diffusion may arise on a macroscopic scale, via pores inside the polymer matrix, or via passing among polymer chains on a molecular scale. The polymer and active agents have been blended to make a homogeneous system, which is mentioned as the matrix system. This type of system, the combination of polymer matrices and bioactive agents are chosen, permits the drug to diffuse through the pores or macromolecule's shape of the polymer upon

introduction of the transport machine into the biological environment without consisting of any changes in the polymer itself. The timing of the release of a drug from the delivery system by using diffusion may be controlled by means of a number of factors:

- ❖ The binding strength of the drug in the micelle core (e.g., hydrophobic binding in hydrophobic cores), that's characterized by way of the partitioning of drug among the micelle and external surroundings and
- ❖ The polymer chains bind to each other in a micelle structure and are characterized by means of cmc. Therefore mentioned elements show the 'thermodynamic' and 'kinetic stability' of the formulation, enabling them to link with the drug and micelles and manage the drug release ^{12, 15, 16}.

Drug Targeting via Nanogels: NGs have been used for the most effective treatments for superficial acute diseases, but they have also entered the important class of deadly disease therapies. Nowadays, these transport systems are curing mental disorders, lung and liver disorders, cancer, skin diseases, joint disorders, ophthalmic disorders, wound restoration and vaccine delivery. In addition, corresponding NGs have additionally entered the field of diagnostic imaging. Many NGs formulations have been patented in several countries for diverse diseases. Hydrogel with a polymeric nanocarrier system has a very promising ability to improve the bioavailability of such poorly permeable tablets. In the field of brain shipping, NGs have been developed for numerous degenerative disorders in addition to brain cancer ¹⁷.

Skin Disorders: The NGs can be immediately carried out on the affected parts of the body. The drug's permeability enhancement is better by the drug's conversion into the size range of NPs. When compared to the existing gel, the zinc oxide NPs are incorporated into the gel to improve the antibacterial efficacy of the drug by using this method. Another study found high psoriatic activity by preparing methotrexate-loaded chitin NGs ².

Cancer: Many anti-cancer drugs are repeatedly used in cancer treatment. However, they have

indicated shortcomings that offer hindrances to most cancers' effective remedy. Some of the shortcomings are poor permeability, much less bioavailability, less retention time, and quicker excretion of drugs.

To reduce these shortcomings, NGs loaded with anti-cancer drugs were prepared with N-hexylcarbamoyl-5-fluorouracil-loaded NGs for brain cancer treatment and were found to have high retention time and accumulation in the brain².

Healing of Wounds: NGs are amongst the satisfactory carriers to incorporate when considering the topical application of drugs. Presently, it's thought that wounds with a wet environment show higher healing compared to dry dressing. NGs, which are gels, offer the best choice for wet dressing as the recovered tissue quality is best in wet (moist) dressing wounds. Furthermore, the hydrogel NPs (i.e., NGs) provides a cooling effect and help reduce swelling and erythema by reducing capillary circulation at the application site⁶.

Eye Disorders: In treating eye disorders, NGs is very effective because of improved corneal bioavailability, much less formulation drainage from the corneal surface, and improved retention time compared to different carrier systems².

Diagnosis: From the diagnostic point of view, NGs with cell imaging play an important role in distinguishing cancer cells from ordinary cells to perform surgical procedures for removing cancerous cells without affecting normal cells. Many techniques presently exist for imaging tumours².

Vaccine Delivery: As a vaccine, NGs may also be active and can provide some advantages, like reduced inflammatory cytokines, induced toxicity, and enhanced immunity. Vaccination is specific to antigen immune response by using organic agents that can be weaker or kill microbes or resemble disorder causing microorganisms⁶.

The Anatomy of a Drug Delivery Vehicle:

1. Encapsulation Stability: The molecules of a drug should be stably encapsulated such that they do not leak prematurely during circulation.

This is important to ensure minimal side effects and maximal therapeutic efficacy.

- 2. Response to Stimuli:** Encapsulation stability is desirable during circulation, and they should release the drug at a target site. Thus, responsiveness to stimuli is essential for drug-delivery vehicles.
- 3. Passive Targeting:** The design of passive targeting is a key to targeting many diseases, especially, arthritis and cancer. This aspect of design, which is controlled by size, also determines the body's clearance times or circulation times.
- 4. Active Targeting:** The strategy of active targeting is used to target a few specific disease phenotypes and so reduce the side effects.
- 5. Toxicity:** The transport system should be non-toxic and, preferably, biodegradable with non-toxic degradation products^{18,19}.

Preparation Methods of Nanogels:

- ❖ Photolithographic method
- ❖ Emulsion solvent diffusion method
- ❖ Coacervation polymerization method
- ❖ Emulsion cross-linking method
- ❖ Emulsion droplet coalescence method
- ❖ Emulsion polymerization method
- ❖ Ionic gelation method
- ❖ Desolvation method

Photolithographic Method: In this method, for drug delivery, the subsequent reaction and phytochemical reaction for activation have been discovered in an attempt to produce NGs and 3D hydrogel particles. To achieve the specific properties of the surface, replica molds and stamps are treated or released the incorporated agents by the molded gels allowed^{2,17}.

Emulsion Solvent Diffusion Method: In this method for drug delivery, correctly weigh the polymer, drug and stabilizer, then dissolve in glycerol with continuous stirring.

On heating, the aqueous phase-gelling agent is dissolved in water with continuous stirring. Ultrasonicate the drug-containing phase and dropwise add the drug phase to the aqueous phase. It is converted into emulsion form by homogenization. Homogenizer at 5000-8000 rpm for 1 hour reduces emulsion in nanodroplets. After this, the O/W emulsion is formed, increasing the preparation efficiency, and the pH is adjusted^{2,19}.

Coacervation Polymerization Method: This method employs the physicochemical characteristics of polymers involved in formulation. In alkaline solutions, chitosan becomes precipitated but insoluble in alkaline PH media. Particles are produced by blowing chitosan solution into coacervate droplets of NaOH-methanol using a compressed air nozzle into an alkaline solution such as sodium hydroxide (NaOH). A compressed nozzle spray controls the particle size of the polymer-containing drug. The separation of particles is carried by centrifugation or filtration and washed with cold and hot water. To control a drug's release, they used a cross-linking agent^{2,17,20}.

Emulsion Cross-Linking Method: The method is totally based on the cross-linking of polymers and cross-linking agents. The dispersion of the aqueous solution of polymer in the oil phase (w/o) emulsion is prepared. This method adds a surfactant and a cross-linking agent to stabilize the solution and harden the droplets. And then, the NGs are washed with organic solvents and dried².

Emulsion-droplet Coalescence Method: This method is obtained by a slight modification in the precipitation and emulsion cross-linking methods. By allowing the coalescence of polymer droplets, they become precipitated with the involvement of the cross-linking method. The aqueous polymer solution is emulsified by using suitable oil. In alkaline pH, the emulsion is prepared by using the same polymer-containing drug. Then both the emulsions are mixed by using high speed homogenization. Then the particles are separated by centrifugation, washed and dried^{2,17}.

The Emulsion Polymerization Method: According to the type of continuous phase, emulsion polymerization can be divided into-

1. Aqueous continuous phase containing emulsion polymerization.
2. Organic continuous phase containing emulsion polymerization. Emulsion polymerization can be divided into three phases: nucleation, particle growth phase, and polymerization. The emulsification components are dispersion medium, hydrophobic monomer, surfactants and initiator. The type of emulsion polymerization technique includes surfactant-free emulsion polymerization, conventional emulsion polymerization, micro-emulsions, and mini-emulsion polymerization.

Mini-emulsion Polymerization: In mini-emulsion polymerization, the surfactant disperses oil in water. Sodium dodecyl sulphate (SDS) is used as a surfactant.

Reverse Mini-emulsion Polymerization: In reverse mini-emulsion polymerization, the surfactant disperses water-in-oil. Span 80 and sodium bis (2-ethylhexyl) sulfosuccinate are used as a surfactant².

Ionic Gelation Method: The interaction of an ionic polymer with an oppositely charged ion initiates cross-linking. Two methods are involved in generating the hydrogel beads through the Ionotropic gelation technique.

External Ionotropic Gelation: The position of the cross-linker ion is external.

Internal Gelation / Emulsification: In the inactive form, the cross-linker ion is incorporated within the polymer solution^{17,21}.

Desolvation Method: In this method, gelatin is dissolved in double distilled water with heating and continuous stirring. After heating, the solution is allowed to stand at room temperature for 10 minutes. Ethanol is added for precipitation. After this, the aging gelatin dissolves in double distilled water containing the drug. Then the solution is stirred at 500-1000 rpm for 8 hours. After stirring, the solution is centrifuged and the settled NPs are collected and washed. Other preparation methods include the Reverse micro emulsion polymerization method, the Inverse mini emulsion polymerization method, the Solvent emulsification method, the

Solvent Displacement method, and the Modified Pullulan method^{2, 17, 20, 21}.

Nanogels Evaluation Parameters:

Swelling Studies/Pulsatile Swelling Studies: It is the most important parameter of all NGs, and swelling is characterized by measuring their capacity to absorb water or an aqueous solution. To measure the weight with the swelling degree being calculated from the portion weight of the swollen NGs or the initial weight is the easy way to determine the kinetics and swelling equilibrium of NGs various factors, like the type and composition of the monomer, cross-link density, pH, temperature and ionic strength, influence the swelling of NGs. The pH-responsive behaviour of hydrogel beads was confirmed by a pulsatile swelling study^{5, 22}.

The degree of swelling was calculated by finding the weight of swollen NGs. The swelling behaviour of the NGs was studied at three different pH conditions. The swelling ratio is calculated by using the following formula after determining the dry and wet weight of the lyophilized, pelletized NGs after sufficient exposure to the corresponding pH solution. The swelling at each pH was studied in triplicate.

Swelling Ratio = final wt. of NGs after swelling- Initial wt. of NGs / Initial wt. of NGs $\times 100$ ^{23, 24}

The swelling was highest at acidic pH compared to neutral, acidic and alkaline conditions²⁵.

In-vitro Drug Release of Nanogels: To regulate the therapeutic effectiveness of the NGs formulation by *in-vivo* study. A dissolution tester is used to test the behaviour of the release rate of drug from the hydrogel. The study of the release of drugs was carried out in 900 ml of acidic medium (pH 1.2) and alkaline medium (pH 7.4 phosphate buffer) at 37.0 ± 0.5 C and 50 rpm speed. At different time intervals, 5 ml samples were withdrawn and replaced with the same volume of fresh solution.

The test samples were filtered by using a membrane filter, and the amount of released drug was analysed using a UV-visible spectrophotometer at the desired wavelength after suitable dilutions. The *in-vitro* drug release study

was done at two pH values, physiological and acidic, since the skin pH as well as that at the tumour site is in the acidic range (4-5), the chitin NGs was shown to have higher swelling at acidic pH.

Release (%) = Released amount of drug / Total amount of drug $\times 100$ ^{22, 23}

In-vitro Drug Permeation of Nanogels: To evaluate transdermal absorption of NGs *in-vitro* skin permeation study performed by using Franz diffusion cell. Skin cuts into appropriate size and receptor solution filled in receptor chamber. Maintain the temperature at 32 ± 1 °C using a circulating jacketed water bath. NGs formulation was applied on the donor chamber and collected samples collected and analyzed using High-performance liquid chromatography (HPLC) after a desired time period. Recovery of drug also calculated²⁴.

Loading Efficiency of Nanogels: The loading efficiency of NGs is calculated after determining the concentration of the untrapped drug. The supernatant collected after an HPLC assay analyzed the centrifugation step to determine the concentration of the untrapped drug.

The drug concentration in the sample is calculated against known standards via the area method under the absorption time curves. The loading efficiency is calculated by using the formula given below:

Loading Efficiency (%) = Weight of drug in NGs / Weight of drug taken initially $\times 100$ ²³

Entrapment Efficiency of Nanogels: Entrapment efficiency is calculated based on the amount of drug in the NGs and the amount of drug used during drug loading.

Entrapment efficiency (%) = Total amount of drug in NGs/Total amount of drug $\times 100$ ²⁶

Cytotoxicity Studies of Nanogels: A Cytotoxicity assay of NGs is performed and compared with the standard by cell viability testing. The percentage of cell viability was expressed by the equation as follows:

Cell Viability (%) = Absorbance of control cell/Absorbance of treated cell $\times 100$ ^{24, 26}

Applications of Nanogels:**TABLE 1: THE LIST OF ANTI-CANCER DRUGS INCORPORATED INTO NANOGELS**

Drug	Polymer	Type of cancer cells	Purpose	Method of Preparation	Route	Ref.
Doxorubicin	Chitosan-gellan gum	Acute lymphoblastic leukemia, breast carcinoma	Good entrapment efficacy and sustained release	In situ-cross linking	Topical/transdermal	[26]
Doxorubicin	Chitin-PLA	Liver carcinoma	To overcome the cardiotoxicity of Dox and achieve better efficacy	Developed an intratumoral pH responsive Dox-chitin-PLA composite NGs(Dox-chitin-PLA CNGs) system	locally injectable	[27]
5-Fluorouracil	Chitin	Skin cancer	Formed good, stable aqueous dispersion and showed pH responsive swelling and drug release.	Simple regeneration method without using any organic solvents.	Skin/topical	[28]
Heparin	Disulphide cross-linked heparin NGs	Melanoma cancer	Well-designed delivery carrier for controlled drug delivery applications	Cross-linked	Topical	[29]
Decitabine	NIPAM	Breast cancer	Inhibit cell proliferation via cell-cycle arrest and is effective in overcoming drug resistance, even in cancer cells that are resistant to DAC	Surfactant polymerization/cross-link	Topical	[30]
Doxorubicin	Chitin	Prostate, breast and lung cancer	The doxorubicin loaded chitin NGs could be a better alternative for cancer therapeutic agent	Emulsion polymerization/controlled regeneration method.	Topical	[31]
Paclitaxel/Lonadamine	PCL	Ovarian and breast cancer	Improved efficacy with combination therapy and active EGFR targeting.	Solvent displacement method	Topical	[32]
Curcumin	Dextrin	Colon, breast, prostate and lung cancer	Effective nanocarrier for the formulation of lipophilic curcumin	Interaction mechanism	Intravenous	[33]
Methotrexate	Poly (N-isopropylacrylamide-co-butylacrylate-co-N, N'-methylenebisacrylamide)	Breast cancer, lung cancer	NGs delivery system is potentially useful for the topical delivery	Surfactant-free emulsion polymerisation method.	Topical	[34]
Cisplatin	NIPAM	Breast cancer	The dual responsible NGs is a suitable CDDP delivery candidate	Emulsion polymerization	Topical	[35]
Fludarabine	PEI/PEG	Cancer	Efficient therapeutic activity but without elevated systemic toxicity	Emulsification-solvent evaporation method	Oral	[36]
Temozolomidine	Poly (acrylic acid-co-N, N'-methylenebisacrylamide)	Melanoma	Offer a pH-triggered sustained-release of the drug molecules in the gel	Polymerization	Topical	[37]

Doxorubicin	filled with hydroxypropyl cellulose PNA	Hyperthermia/liver carcinoma	Reduce the toxic and side effect of anti-tumor drug, and improve tumor targeting delivery	Acid-cleavable hydrazone bonds	Topical	[38]
5- Fluorouracil	Poly(N-vinylcaprolactum)	Solid tumors	Preventing the unwanted effects by specifically delivering the drug molecules to the target site.	Emulsion polymerisation	Topical	[39]
Doxorubicin	Poly (L-aspartic acid)	Ovarian carcinoma	Great potential for tumor therapy	Polymerization technique	Topical	[40]
Taxane	polyethylene glycol	Pancreatic and breast cancer	Improve the efficacy of drugs that have poor pharmacokinetics or dose-limiting toxicities	Chemical gradient method	Topical	[41]
Doxorubicin	Acetylated chondroitin sulphate	Cervical cancer	AC-CS self-organizing NGs may eventually prove useful in the development of effective anti-cancer drug carriers for chemotherapy.	Acetylation method	Topical	[42]
Curcumin	Chitin	Skin cancer	To achieve effective treatment by transdermal route	Sonophoresis	Transdermal	[43]
Si-RNA anti EGFR	PNIMA	Ovarain cancer	Investigating the fundamental mechanisms of NGs endosomal release	Precipitation polymerization	Topical	[44]
Paclitaxel	Pluronic-F127/PEI	Tumor	Greater stability, increased solubility and better cellular uptake	Emulsification/solvent evaporation method.	Topical	[45]
Doxorubicin	P9NIPAM-co-AAc)	Melanoma	Achieve environmental triggered drug release and targeted drug delivery and combine diagnostic and therapeutic functions in one nanostructure	Precipitation polymerization	Topical	[46]
Cisplatin	PEO-b-PMA	Ovarian cancer	Demonstrates fundamental possibility for targeted delivery of the NGs-based anti-cancer therapeutics	Conjugation	Topical	[47]
5- Fluorouracil	PEG-Chitosan	Melanoma	Reduced toxicity in combined chemo-thermo treatments,	Physical interpenetration	Topical	[48]
5- Fluorouracil	Poly (N-isopropylacrylamide-copolyethylenimine-co-N,N'-methylenebisacrylamide)	Mastocarcinoma therapy	Higher therapeutic efficacy and lower toxicity	Radical grafting copolymerization method	Topical	[49]
Doxorubicin	Cervical cancer	Self-assembly pullulan-based NGs with folic substituents	Overcoming the complications in the drug carrier design	A simple fabrication method	Topical	[50]

TABLE 2: THE LIST OF TRANSDERMAL DELIVERY DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	Ref.
Itraconazole	Euginol, labrasol, Carbopol	Emulsification followed by sonication	Sustain release profile and improved permeation of skin	Transdermal	[51]
Diclofenac sodium	carbopol 940, Eudragit S-100	Emulsion solvent diffusion method	For improve bioavailability of drug and prolonged residence of	Transdermal	[52]

Ciclopirox	Tween 80, oleic acid, chitosan, Carbopol	Emulsification followed by gelation	drug in the skin Effective delivery by enhancing the penetration of CIC and retention time in skin layers	Topical	[53]
Methotrexate	Sodium 2,4-diaminopteroic acid, Tween 80	Cross-linking	For improved arthritic joint mobility, repair and reduced inflammation	Transdermal	[54]
Chitin	Curcumin	Controlled regeneration	Excellent capacity for drug loading and release and good skin penetration and retention properties	Transdermal	[55]
Caffeine	PNIPAm-co-AA	Emulsion polymerization/controlled regeneration method.	Excellent stability, reversible physical property change in response to a pH change	Topical	[56]
Tenoxicam	Poloxamer 188, Soybean lecithin	Emulsion/solvent evaporation method	Helps to design efficient dermatological bioequivalence assessment methods.	Topical	[57]
Acelofenac	Tween 80, ethyl acetate, Carbopol	Emulsification Diffusion	Significant improvement in the activity for the formulation in comparison with the conventional formulation	Topical	[58]
Diclofenac	Cholesterol, lecithin, chloroform and methanol	Thin-layer hydration method	More sustained and prolonged anti-inflammatory effect	Topical	[59]
Alcohol, soyabean oil polysorbate 80, Carbopol	Clinamycin and adapalene	Emulsification–High-pressure homogenization	Comparative efficacy and safety of a nano-emulsion gel	Topical	[60]
Chitin	5-fluorourazil	Controlled regeneration	Formed good, stable aqueous dispersion, pH-responsive swelling and drug release	Topical	[61]

TABLE 3: THE LIST OF PROTEIN AND PEPTIDE DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	Ref.
Clostridium botulinum type A neurotoxinBoHC/A	Cholesteryl group-bearing pullulan	Physically cross-linked NGs by self-assembly	A low risk of causing unfavourable and undesired biological reactions	Intranasal	[62]
Insulin	Cadmium chloride, Fe3O4 chitosan	Polymerization and controlled cross-linking	Prepared with different chitosan/QD/MNP ratios and under different processing parameters	Topical	[63]
Palmitoyl acylated extend in four peptides	Deoxycholic acid, chitosan	Hydrophobic modification self-assembly method	Fabricated self-assembled nanoparticles composed of deoxycholic acid-modified glycol chitosan (DOCA-GC) with incorporated palmitylacylated exendin-4 (Ex4-C16)	Pulmonary route	[64]
Vancomycin	PNIPAm, PMA, PEG	Photo-assisted polymerization	To improve their oral delivery relies on their association with colloidal carriers	Oral	[65]

TABLE 4: THE LIST OF OCULAR DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	References
Fluconazole	Chitin	Controlled regeneration chemistry and wet milling methods	Improve the bioavailability	Topical	[66]

Levofloxacin	PLGA, Chitosan	Nanoprecipitation technique	Improve precorneal residence time and ocular penetration	Ocular	[67]
Tacrolimus	N-isopropyl acrylamide, 2-hydroxy-methacrylate lactide–dextran	Solvent impregnation method	High drug-loading capacity and controlled release of the drug over a long time, better patient compliance	Topical / ocular	[68]
Timolol	Nano diamond, chitosan, poly (hydroxy ethyl methacrylate) matrix	Ultra-sonication	Improve matrix mechanical properties, produce a contact lens that releases TM in a controlled manner	Ocular	[69]

TABLE 5: THE LIST OF ANTI-INFLAMMATORY DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	Ref
Methotrexate	PNIPAm-co-BA	Emulsion polymerization	Enhanced topical delivery and anti-inflammatory activity of methotrexate	Topical	[70]
Triclosan and flurbiprofen	Poly-ε-caprolactone (PCL), Chitosan	solvent displacement method	Provide dual action, anti-inflammatory and antimicrobial in periodontitis	Topical	[71]
Photosensitizer	Chitosan, Hyluronic acid	Ionic gelation	Targets of treatments aiming at their local destruction in inflammation sites.	Intraperitoneally injection	[72]
Sodium diclofenac	Isopropyl amine, d-limonene, lauric acid, HPMC	Microemulsion	For enhance the skin permeation of drug	Transdermal	[73]
Spantide 11 and ketoprofen	PLGA and chitosan	Emulsification solvent evaporation	Controlled and sustained release via modification of polymer composition and reducing irritation associated with direct contact of drug with skin	Topical	[74]

TABLE 6: THE LIST OF BRAIN DELIVERY OF DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	Ref.
Nucleoside reverse transcriptase inhibitors (NRTIs)	PEG and PEI	Emulsification-solvent evaporation	Increase antiviral activity against HIV infection in the brain	Intravenous	[75]
N-hexylcarbamoyl-5-fluorouracil	N-vinylpyrrolidone, N, N-methylenebisacrylamide, polysorbate 80	Cross-linking and free radical mechanism	Increase the drug permeability into the brain	Intravenous	[76]

TABLE 7: THE LIST OF EYE DELIVERY OF DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	Ref.
Timolol maleate	Poly 2-hydroxyethyl methacrylate, polysaccharide, chitosan	Covalent conjugation	To develop a lysozyme-triggered drug delivery system capable of delivering a drug in a controlled fashion	Topical	[77]
Fluconazole	Chitin	Passive or ligand-mediated targeting mechanisms	For improve corneal bioavailability	Topical	[78]

TABLE 8: THE LIST OF VACCINE DELIVERY OF DRUG INCORPORATED INTO NANOGELS

Antigen used	Polymer	Method of preparation	Purpose	Route	Ref.
CHP-HER2, a cut protein(146HER2) complexed cholesterol pullulan (CHP)	Dimethylsulfoxide	Cr-release method	For humoral immunity	Subcutaneousl y injected	[79]
Pneumococcal surface protein A (PspA)	Cationic cholesteryl group-	Non-toxin-based	For respiratory Pneumococcal infection	Intranasal	[80]

Ovalubumin (OVA)	bearing pullulan Chitosan	mucosal antigen carrier, gel filtration Endosomal-based processes	Influence of surface decoration and amount of vaccine on targeting and activating dendritic cells	Topical route	[81]
A non-toxic subunit fragment of Clostridium botulinum type-A neurotoxinBoH/A	Cholesteryl-group-bearing pullulan	Physically cross-linked	For mucosal infection	Intranasal	[82]

TABLE 9: THE LIST OF ANAESTHETICS DRUG INCORPORATED INTO NANOGELS

Drug	Polymer	Method of preparation	Purpose	Route	Ref.
Lidocaine	Poly (ε-caprolactone)–poly (ethylene glycol)–poly(ε-caprolactone)	Tail flick latency tests	For prolong action of anaesthesia	Topical	[83]
Bupivacaine	N-isopropylacrylamide	Volume phase transition	Determine scavenging ability of NGs	Topical	[84]
Procaine HCL	Methacrylic acid–ethyl acrylate (MAA–EA) di-allyl phthalate (DAP)	Synthesized via emulsion polymerization	For determination of release kinetics	Topical	[85]

TABLE 10: MARKETED FORMULATION OF NANOGELS

Nanogels	Drug	Mfg. by	Uses
Zyclin Nanogel	Clindamycin	Zydus candila	Mild to moderate (Acne)
Zyflex Nanogel	Thiocolchicoside, methyl salicylate, methanol, alcohol	Zydus candila	Releaving pain
Silver nanogel	Nanocrystalline silver	Cipla ltd.	Pimples (Acne)
Adalene Nanogel	clindamycin, Adapalene	Zydus candila	Acne
Oxalgin Nanogel	Diclofenac, methyl salicylate and methanol	Zydus candila	Inflammation and pain

CONCLUSION: In this review, we focused on the properties, classification, drug targeting or evaluation methods, and applications of NGs in detail. NGs can achieve an efficient drug delivery system. NGs are categorized according to their behaviour towards selected stimuli, cross-linking, and structure. Some preparation methods, such as photolithographic techniques, the Emulsion solvent diffusion method, coacervation/ precipitation / precipitation polymerization, *etc.*, were also discussed.

NGs found excellent application for anti-cancer drug delivery, transdermal delivery, protein and peptide delivery, ocular delivery, brain delivery, vaccine delivery and anaesthesia drug delivery and made the treatment effective. Various evaluation parameters are also discussed.

ACKNOWLEDGMENT: The manuscript was written through the contributions of both authors.

CONFLICTS OF INTEREST: Nil

REFERENCES:

1. Neamtu L, Rusu A G, Diaconu A, Nita L E and Chiriac A P: Basic concepts and recent advances in nanogels as carriers for medical applications, *Drug Delivery* 2017; 24(1): 539-557.
2. Kesharwani D, Mishra S, Paul S D, Paliwal R and Satapathy T: The Functional Nanogel-An Exalted Carrier System. *Journal of Drug Delivery & Therapeutics* 2019; 9(2): 570-582
3. Narayanaswamy R and Torchilin VP: Hydrogels and their applications in targeted drug delivery *Molecules* 2019; 24(3): 603.
4. Keskin D, Zu G, Forson AM, Tromp L, Sjollem J and Rijn PV: Nanogels-A novel approach in antimicrobial delivery systems and antimicrobial coatings *Bioactive Materials* 2021.
5. Kousalova J and Etrych T: Polymeric Nanogels as Drug Delivery Systems, *Physiol. Res* 2018; 67 (2): 305-317.
6. Wani TU, Rashid M, Kumar M, Chaudhary S, Kumar P and Mishra N: Targeting aspects of nanogels an overview. *International Journal of Pharmaceutical Sciences and Nanotechnology* 2014; 7(4): 2612-30.
7. Yadav HK, Al Halabi NA and Alsalloum GA: Nanogels as Novel Drug Delivery Systems - A Review. *J Pharm Pharm Res* 2017; 1: 5.
8. Rahman FAL, Magbool F, Elnima EI, Shayoub ME, Ali ME, Hussein SEO: Nanogel as a Pharmaceutical Carrier. *Sch J App Med Sci* 2017; 5(11): 4730-4736.

9. Rajput R, Narkhede J and Naik J: Nanogels as nanocarriers for drug delivery. *ADMET & DMPK* 8(1) 2020; 1-15.
10. Li C, Obireddy SR and Lai WF: Preparation and use of nanogels as carriers of drugs. *Drug Delivery* 2021; 28: 1594–1602.
11. Nishchal, Alam MJ and Kumar N: Nanogel-A mini review of a future perspective novel drug delivery system. *Int J Adv Res* 2020; 8(06): 1081-1092.
12. Yadav HKS, Halabi NAA and Alsalloum GA: Nanogels as Novel Drug Delivery. *J Pharm Pharm Res* 2017; 1: 5.
13. Yin Y, Hu B, Yuan X, Cai L, Gao H and Yang Q: Nanogel- A Versatile Nano-Delivery System for Biomedical Applications. *Pharmaceutics* 2020; 12(3): 290.
14. Sabir F, Asad MI, Qindeel M, Afzal I, Dar MJ, Shah KU, Zeb A, Khan GM, Ahmed N and Din F: Polymeric Nanogels as Versatile Nanoplatforams for Biomedical Applications. *Hindawi Journal of Nanomaterials* 2019; 16.
15. Sharma A, Garg T, Aman A, Panchal K, Sharma R, Kumar S and Markandeywar T: Nanogel-an advanced drug delivery tool Current and future. *Artificial Cells Nanomedicine and Biotechnology* 2016; 44(1): 165-177.
16. Kaoud RM, Heikal ME and Jaafar LM: Nanogel as a drug delivery system. *WJPMR* 2021; 7(11): 113 – 118.
17. Sun Z, Song C, Wang C, Hu Y and Wu J: Hydrogel-based controlled drug delivery for cancer treatment: a review. *Molecular Pharmaceutics* 2019; 17(2): 373-91.
18. Chacko RT, Ventura J, Zhuang J and Thayumanavan S: Polymer nanogels- a versatile nanoscopic drug delivery platform, *Adv Drug Deliv Rev* 2012; 64(9): 836–851.
19. Vishnubhaktula S, Elupula R and Durán-Lara EF: Recent Advances in Hydrogel-Based Drug Delivery for Melanoma Cancer Therapy. *Journal of Drug Delivery* 2017; 1–9.
20. Agarwal M, Nagar DP, Srivastava N and Agarwal MK: Chitosan Nanoparticles based Drug Delivery. *International Journal of Advanced Multidisciplinary Research* 2015; 1–13.
21. Ahirrao SP, Gide PS, Shrivastav B and Sharma P: Ionotropic Gelation-A Promising Cross-Linking Technique for Hydrogels, *RRJPNT* 2014; 2: 1.
22. Kulkarni RV, Boppana R, Mohan GK, Mutalik S and Kalyane NV: pH-responsive interpenetrating network hydrogel beads of poly (acrylamide)-g-carrageenan and sodium alginate for intestinal targeted drug delivery: Synthesis, *in-vitro* and *in-vivo* evaluation. *Journal of Colloid and Interface Science* 2012; 367: 509–517.
23. Aminua N, Chana SY, Yama MF and Toh SM: A dual-action chitosan-based nanogel system of triclosan and flurbiprofen for localised treatment of periodontitis. *International Journal of Pharmaceutics* 2019; 570: 118659.
24. Priya P, Raj RM, Vasanthakumar V and Raj V: Curcumin-loaded layer-by-layer folic acid and casein coated carboxymethyl cellulose/casein nanogels for treatment of skin cancer. *Arabian Journal of Chemistry* 2017; 1878-5352(17): 30140-5.
25. Bodek KH: Evaluation of properties microcrystalline chitosan as a drug carrier. *In-vitro* release of diclofenac from microcrystalline chitosan hydrogel. *Acta poloniae pharmaceutica* 2000; 1; 57(6): 431-40.
26. Kumar M and Sharma HK: Formulation and evaluation of doxorubicin containing nanogels for delivery to cancer cells. *Journal of Drug Delivery & Therapeutics* 2018; 8(5): 178-183.
27. Arunraj T, Rejinold NS, Kumar NA and Jayakumar R: Bio-responsive chitin-poly (l-lactic acid) composite nanogels for liver cancer. *Colloids and Surfaces B: Biointerfaces* 2014; 113: 394-402.
28. Sabitha M, Rejinold NS, Nair A, Lakshmanan VK, Nair SV and Jayakumar R: Development and evaluation of 5-fluorouracil loaded chitin nanogels for treatment of skin cancer, *Carbohydrate Polymers* 2013; 91(1): 48-57.
29. Ho BH, Young CM, Hyeon HJ, Haryoung P, Moon-Hee S and Taik LY: Bio-derived poly (gamma-glutamic acid) nanogels as controlled anticancer drug delivery carriers. *J Microbiol Biotechnol* 2012; 22: 1782–1789.
30. Vijayaraghavalu S and Labhasetwar V: Efficacy of decitabine-loaded nanogels in overcoming cancer drug resistance is mediated *via* sustained DNA methyltransferase 1 (DNMT1) depletion. *Cancer letters* 2013; 331(1): 122-129.
31. Jayakumar R, Nair A, Sanoj Rejinold N, Maya S and Nair S V: Doxorubicin-loaded pH-responsive chitin nanogels for drug delivery to cancer cells. *Carbohydr Polym* 2012; 87: 2352–2356.
32. Milane L, Duan Z and Amiji M: Development of EGFR targeted polymer blend nanocarriers for combination paclitaxel/Ionidamine delivery to treat multi-drug resistance in human breast and ovarian tumor cells. *Mol Pharm* 2011; 8(1): 185-203.
33. Gonçalves C, Pereira P, Schellenberg P, Coutinho PJ and Gama FM: Self-Assembled Dextrin Nanogel as Curcumin Delivery System. *Journal of Biomaterials & Nanobiotechnology* 2012; 3(2).
34. Singka GS, Samah NA, Zulfakar MH, Yurdasiper A and Heard CM: Enhanced topical delivery and anti-inflammatory activity of methotrexate from an activated nanogel. *Eur J Pharm Biopharm* 2010; 76: 275–281.
35. Peng J, Qi T, Liao J, Chu B, Yang Q, Li W, Qu Y, Luo F and Qian Z: Controlled release of cisplatin from pH-thermal dual responsive nanogels. *Biomaterials* 2013; 34(34): 8726-8740.
36. Vinogradov SV, Zeman AD, Ev Batrakova and Kabanov AV: Polyplex Nanogel formulations for drug delivery of cytotoxic nucleoside analogs. *Journal of Controlled Release* 2013; 107(1): 143- 157.
37. Wu W, Aiello M, Zhou T, Berliner A, Banerjee P and Zhou S: *In-situ* immobilization of quantum dots in polysaccharide-based nanogels for integration of optical pH-sensing, tumor cell imaging, and drug delivery. *Biomaterials* 2010; 31: 3023-3031.
38. Xiong W, Wang W, Wang Y, Zhao Y, Chen H, Xu H and Yang X: Dual temperature/pH-sensitive drug delivery of poly (< i> N-isopropylacrylamide-< i> co-acrylic acid) nanogels conjugated with doxorubicin for potential application in tumor hyperthermia therapy. *Colloids and Surfaces B: Biointerfaces* 2011; 84(2): 447-453.
39. Rao K M, Mallikarjuna B, Rao K K, Siraj S, Rao K C and Subha M: Novel thermo/pH sensitive nanogels composed from poly (N-vinylcaprolactam) for controlled release of an anticancer drug. *Colloids and Surfaces B Biointerfaces* 2013; 102: 891-897.
40. Oh NM, Oh KT, Youn YS, Lee DK, Cha KH, Lee DH and Lee ES: Poly (l-aspartic acid) nanogels for lysosome-selective antitumor drug delivery. *Colloids and Surfaces B Biointerfaces* 2013; 101: 298-306.
41. Murphy EA, Majeti BK, Mukthavaram R, Acevedo LM, Barnes LA and Cheresch DA: Targeted nanogels-a versatile platform for drug delivery to tumors. *Molecular Cancer Therapeutics* 2011; 10(6): 972-982.
42. Park W, Park SJ and Na K: Potential of self-organizing nanogel with acetylated chondroitin sulfate as an anti-cancer drug carrier. *Colloids Surf B Biointerfaces* 2010; 79: 501-508.

43. Mangalathillam S, Rejinold NS, Nair A, Lakshmanan VK, Nair SV and Jayakumar R: Curcumin loaded chitin nanogels for skin cancer treatment *via* the transdermal Route. *Nanoscale* 2012; 7: 239–250.
44. Blackburn WH, Dickerson EB, Smith MH, McDonald JF and Lyon LA: Peptide-functionalized nanogels for targeted siRNA delivery. *Bioconjug Chem* 2009; 20(5): 960-968.
45. Li N, Wang J, Yang X and Li L: Novel nanogels as drug delivery systems for poorly soluble anticancer drugs. *Colloids and Surfaces B Biointerfaces* 2011; 83(2): 237-244.
46. Su S, Wang H, Liu X, Wu Y and Nie G: iRGD-coupled responsive fluorescent nanogel for targeted drug delivery *Biomaterials* 2013; 34(13): 3523-3533.
47. Nukolova NV, Oberoi HS, Cohen SM, Kabanov AV and Bronich TK: Folate-decorated nanogels for targeted therapy of ovarian cancer. *Biomaterials* 2011; 32(23): 5417-5426.
48. Zhou T, Xiao C, Fan J, Chen S, Shen J, Wu W and Zhou S: A nanogel of on-site tunable pH-response for efficient anticancer drug delivery. *Acta Biomaterialia* 2013; 9(1): 4546-4557.
49. Zhu X, Sun Y, Chen D, Li J, Dong X, Wang J, Chen H, Wang Y, Zhang F, Dai J, Pirraco Rp, Guo S, Marques Ap, Reis Rl and Li W: Mastocarcinoma therapy synergistically promoted by lysosome dependent apoptosis specifically evoked by 5-Fu@nanogel system with passive targeting and pH activatable dual function. *J Control Release* 2017; 254: 107-118.
50. Kim S, Park KM, Ko JY, Kwon IC, Cho HG, Kang D, Yu IT, Kim K and Na K: Minimalism in fabrication of self-organized nanogels holding both anti-cancer drug and targeting moiety. *Colloids Surf B Biointer* 2008; 63: 55-63.
51. Sunitha S, Wankar J and Ajimera T: Design, development and evaluation of nanoemulsion and nanogel of itraconazole for transdermal delivery. *J Sci Res Pharm* 2014; 3: 6–11.
52. Talele S, Nikam P, Ghosh B, Deore C, Jaybhav A and Jadhav A: A Research Article on Nanogel as Topical Promising Drug Delivery for Diclofenac sodium. *Indian Journal of Pharmaceutical Education and Research* 2017; 1; 51(4S): S580-587.
53. Kumar S, Talegaonkar S, Negi LM and Khan ZI: Design and development of ciclopirox topical nanoemulsion gel for the treatment of subungual onychomycosis. *Indian J Pharm Educ Res* 2012; 46: 303–311.
54. Yang C, Daoping Z, Xiaoping X, Jing L and Chenglong Z: Magnesium oil enriched transdermal nanogel of methotrexate for improved arthritic joint mobility, repair, and reduced inflammation. *Journal of Microencapsulation* 2020; 2: 37(1):77-90.
55. Mangalathillam S, Rejinold NS, Nair A, Lakshmanan VK, Nair SV and Jayakumar R: Curcumin loaded chitin nanogels for skin cancer treatment *via* the transdermal Route *Nanoscale* 2012; 7: 239–250.
56. Rejinold NS, Chennazhi KP, Tamura H, Nair SV and Rangasamy J: Multifunctional chitin nanogels for simultaneous drug delivery, bioimaging and biosensing. *ACS Appl Mater Interfaces* 2011; 3: 3654–3665.
57. Elkomy MH, Elmenshawe SF, Eid HM and Ali AM: Topical ketoprofen nanogel- artificial neural network optimization, clustered bootstrap validation and *in-vivo* activity evaluation based on longitudinal dose response modeling. *Drug Delivery* 2016; 21; 23(9): 3294-306.
58. Phatak AA and Chaudhari PD: Development and evaluation of nanogel as a carrier for transdermal delivery of aceclofenac. *Asian J Pharm Technol* 2012; 2: 125–132.
59. Jithan AV and Swathi M: Development of topical diclofenac liposomal gel for better anti-inflammatory activity. *Int J Pharm Sci Nanotechnol* 2010; 3: 986–993.
60. Prasad S, Mukhopadhyay A, Kubavat A, Kelkar A, Modi A, Swarnkar B, Bajaj B, Vedamurthy M, Sheikh S and Mittal R: Efficacy and safety of a nano-emulsion gel formulation of adapalene 0.1% and clindamycin 1% combination in acne vulgaris: a randomized, open label, active-controlled, multicentric, phase IV clinical trial. *Indian J Dermatol Venereol Leprol* 2012; 78: 459–467.
61. Sabitha M, Rejinold NS, Nair A, Lakshmanan VK, Nair SV and Jayakumar R: Development and evaluation of 5-fluorouracil loaded chitin nanogels for treatment of skin cancer, *Carbohydr Polym* 2013; 91: 48–57.
62. Nochi T, Yuki Y, Takahashi H, Sawada S, Mejima M, Kohda T, Harada N, Kong IG, Sato A and Kataoka N: Nanogel antigenic protein-delivery system for adjuvant-free intranasal vaccines. *Nat Mater* 2010; 9: 572–578.
63. Shen J M, Xu L, Lu Y, Cao H M, Xu ZG, Chen T, Zhang HX: Chitosan-based luminescent/magnetic hybrid nanogels for insulin delivery, cell imaging and anti-diabetic research of dietary supplements. *Int J Pharm* 2012; 427: 400–409.
64. Lee J, Lee C, Kim TH, Lee ES, Shin BS, Chi SC, Park ES, Lee KC and Youn YS: Self-assembled glycol chitosan nanogels containing palmityl-acylated exendin-4 peptide as a long-acting anti-diabetic inhalation system. *J Controlled Release* 2012; 161: 728–734.
65. Ichikawa H, Fukumori Y and Kamiya H: Functional stimuli responsive nanogels particle for oral peptide delivery- preparation, drug release behaviours and *in-vitro* cellular interactions. *NSTI Nanotech* 2006; 2: 392–395.
66. Mohammed N, Rejinold N S, Mangalathillam S, Biswas R, Nair S V and Jayakumar R: Fluconazole loaded chitin nanogels as a topical ocular drug delivery agent for corneal fungal infections. *J Biomed Nanotechnol* 2013; 9: 1521–1531.
67. Gupta H, Aqil M, Khar RK, Ali A, Bhatnagar A and Mittal G: Nanoparticles laden *in-situ* gel of levofloxacin for enhanced ocular retention. *Drug Deliv* 2013; 20: 306–309.
68. Zhang J, Misra GP and Lowe TL: Nanogels for ocular drug delivery to treat uveitis. In- Proceedings of the Annual Meeting Materials Engineering and Sciences Division. Thomas Jefferson University 2010; ISBN: 978-0-8169-1064-9.
69. kim HJ, Zhang K, Moore L and Ho D: Diamond nanogel-embedded contact lenses mediate lysozyme-dependent therapeutic release. *ACS Nano* 2014; 8: 2998–30052.
70. Singka GS, Samah NA, Zulfakar MH, Yurdasiper A, Heard CM: Enhanced topical delivery and anti-inflammatory activity of methotrexate from an activated nanogel. *Eur J Pharm Biopharm* 2010; 76: 275–281.
71. Aminu N, Chan SY, Yam MF and Toh SM: A dual-action chitosan-based nanogel system of triclosan and flurbiprofen for localised treatment of periodontitis. *International Journal of Pharmaceutics* 2019; 570: 118659.
72. Schmitt F, Lagopoulos L, Kauper P, Rossi N, Busso N, Barge J, Wagnieres G, Carsten L, Christine W and Lucienne JJ: Chitosan-based nanogels for selective delivery of photosensitizers to macrophages and improved retention in and therapy of articular joints. *J Control Release* 2010; 144: 242–250.
73. Escribano E, Calpena A C, Queralt J, Obach R and Doménech J: Assessment of diclofenac permeation with different formulations: anti-inflammatory study of a selected formula. *European Journal of Pharmaceutical Sciences* 2003; 19(4): 203–210.

74. Shah PP, Desai PR, Patel AR and Singh MS: Skin permeating nanogel for the cutaneous co-delivery of two anti-inflammatory drugs. *Biomaterials* 2012; 33: 1607–1617.
75. Gerson T, Makarov E, Senanayake TH, Gorantla S, Poluektova LY and Vinogradov SV: Nano-NRTIs demonstrate low neurotoxicity and high antiviral activity against HIV infection in the brain. *Nanomedicine* 2014; 10(1): 177-185.
76. Soni S, Babbar AK, Sharma RK and Maitra A: Delivery of hydrophobised 5-fluorouracil derivative to brain tissue through intravenous route using surface modified nanogels. *J Drug Target* 2006; 14(2): 87-95.
77. Kim HJ, Zhang K, Moore L and Ho D: Diamond nanogel-embedded contact lenses mediate lysozyme-dependent therapeutic release. *ACS Nano* 2014; 8(3): 2998-3005.
78. Mohammed N, Rejinold N S, Mangalathillam S, Biswas R, Nair SV and Jayakumar R: Fluconazole Loaded Chitin Nanogels as a Topical Ocular Drug Delivery Agent for Corneal Fungal Infections. *Journal of biomedical nanotechnology* 2013; 9(9): 1521- 1531.
79. Kageyama S, Kitano S, Hirayama M, Nagata Y, Imai H, Shiraishi T, Akiyoshi K, Scott AM, Murphy R and Hoffman EW: Humoral immune responses in patients vaccinated with 1-146 HER2 protein complexed with cholesteryl pullulan nanogel. *Cancer science* 2008; 99(3): 601-607.
80. Kong IG, Sato A, Yuki Y, Nochi T, Takahashi H, Sawada S, Mejima M, Kurokawa S, Okada K and Sato S: Nanogel based PspA intranasal vaccine prevents invasive disease and nasal colonization by *Streptococcus pneumoniae*. *Infection and immunity* 2013; 81(5): 1625-1634.
81. Thomann-Harwood L, Kaeuper P, Rossi N, Milona P, Herrmann B and McCullough K : Nanogel vaccines targeting dendritic cells: contributions of the surface decoration and vaccine cargo on cell targeting and activation. *Journal of Controlled Release* 2013; 166(2): 95-105.
82. Nochi T, Yuki Y, Takahashi H, Sawada SI, Mejima M, Kohda T, Harada N, Kong IG, Sato A and Kataoka N: Nanogel antigenic protein-delivery system for adjuvant-free intranasal vaccines. *Nature materials* 2010; 9(7): 572-578.
83. Yin QQ, Wu L, Gou ML, Qian ZY, Zhang WS and Liu J: Long-lasting infiltration anaesthesia by lidocaine-loaded biodegradable nanoparticles in hydrogel in rats. *Acta anaesthesiologica Scandinavica* 2009; 53(9): 1207-1213.
84. Hoare T, Young S, Lawlor MW and Kohane DS: Thermoresponsive nanogels for prolonged duration local anesthesia. *Acta Biomaterialia* 2012; 8(10): 3596-3605.
85. Tan JP, Zeng AQ, Chang CC and Tam KC: Release kinetics of procaine hydrochloride (PrHy) from pH-responsive nanogels, theory and experiments. *Int J Pharm* 2008; 357(1-2): 305-313.

How to cite this article:

Arti and Archna KM: Nanogels: an overview of properties, classifications, drug targeting methods, evaluation parameters and applications. *Int J Pharm Sci & Res* 2022; 13(11): 4385-00. doi: 10.13040/IJPSR.0975-8232.13(11).4385-00.

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