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## Chitosan – An alternative drug delivery approach for neurodegenerative diseases

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#### ABSTRACT

Neurological disorders have become severe and dreadful issues around the globe that are rarely directly mediated because of the blood-brain barrier (BBB). Despite the various therapeutic strategies, including the utilization of cholinesterase inhibitors, metal chelators, molecular chaperones, and anti-body treatment that have been put forth, drug delivery to the brain has remained a problem in the treatment of neurodegenerative disorders (NDD). Chitosan, one of nature's multifunctional polymers, is acknowledged as a useful chemical in the medical and pharmaceutical industries due to its distinctive and flexible biological characteristics. By using Chitosan and its derivatives as drug delivery methods, it is possible to give medications in a sustained and regulated way, increase their stability, and lessen the likelihood of adverse drug reactions. In the current review, we have concentrated on the significance of Chitosan and its derivatives to become a hotspot in drug delivery, particularly for NDDs. This review also explains their properties as drug delivery vectors and their ability to cross the BBB, which is a significant obstacle to medication administration in NDDs. In conclusion, this review suggests that expanding the scope of such research would make it possible to develop NDD drug delivery systems that are more efficient.

#### **1. Introduction**

Polymeric drug delivery systems have advanced significantly over the past 20 years. The therapeutic approaches should be both neuroprotective and neurorestorative to delay, reverse, or prevent the disease's course (Dhivya & [Balachandar, 2017\)](#page-14-0). However, the disease progression is unaffected by the currently available treatment options, including pharmacological interventions and neurosurgical procedures ([Xue et al., 2020](#page-16-0)). Because nanoparticles can easily cross the blood-brain barrier (BBB), they are more effective than current therapeutics for treating neurodegenerative diseases [\(Dong, 2018](#page-14-0)). Nanoparticle-mediated medication distribution to the brain has shown much promise in avoiding BBB obstruction ([Hersh et al., 2022\)](#page-14-0). To make polymeric drug delivery systems more effective the natural use of polymers like arginine, Chitosan, dextrin, poly (glycolic acid), poly (lactic acid), and hyaluronic acid has to be increased widely ( $\frac{\text{Sung } \& }{\text{Sung } \& }$ [Kim, 2020\)](#page-16-0). Polysaccharides are a preferred base for customized pharmaceutical delivery systems because, as natural biomaterials, they (i) are widely available and relatively cheap; (ii) possess excellent biocompatibility and biodegradability; and (iii) are nontoxic and non-reactogenic ([Barclay et al., 2019\)](#page-14-0). In addition to techniques for discovering new drug compounds, the creation of multifunctional drug delivery systems has recently emerged as a fashionable and alluring idea in pharmaceutical science. Pharmaceutical drug carriers based on carbohydrates have shown promise to reduce dose frequency, enhance drug pharmacological action, and deliver medications to the intended place.

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One fascinating poly-based compound is Chitosan, a cationic polysaccharide consisting of D-glucosamine and N-acetyl-D-glucosamine units randomly distributed throughout its structure, posing chelating qualities. It is made by deacetylating Chitin, a carbohydrate found in crab shells ([Huang et al., 2017\)](#page-14-0). It is naturally seen as organized microfibrils in the cuticles of fungi and insects and the exoskeletons of mollusks and crustaceans (Kaur & [Dhillon, 2014\)](#page-15-0). Demineralization, deproteinization, and decolorization are all sequential steps involved in the technique for chitin extraction from shellfish wastes in the industry ([Beaney et al., 2005](#page-14-0); Shahidi & [Synowiecki, 2002](#page-16-0)). Chitosan has garnered interest as a nontoxic, secure, and promising agent for use in drug delivery systems. Many experiments have recently been conducted to create medication delivery systems employing Chitosan to treat neurological illnesses ([Shayganfard, 2022\)](#page-16-0). This review article emphasizes chitosan-based biopolymers as a helpful drug delivery method for NDDs. The primary purposes of Chitosan are highlighted and discussed in this study, along with the restrictions placed on nanoparticle-based drug release systems, the most prevalent NDD, and current developments in the micro/nanoparticulate chitosan-based drug delivery systems.

#### **2. Neurodegenerative disease – an overview**

Neurodegenerative diseases (NDD) illnesses emerge when neurons in the spinal cord and brain begin to age. Neurodegeneration has been recognized as the main pathological change in most diseases affecting the brain. The major challenge in the treatment of NDD is the inability of pharmaceuticals to cross the BBB and reach the target tissue. The BBB showcases a high degree of selective permeability ([Chowdhury et al.,](#page-14-0)  [2017;](#page-14-0) [Vellingiri et al., 2022](#page-16-0)). Large, non-lipophilic compounds with high polarities are prevented from passing through this barrier, which gives rise to the need to use carriers for the delivery of drugs. Therefore, synthesizing chitosan-based efficient carriers for drug delivery is the upcoming area of research. (Patel & [Patel, 2017\)](#page-15-0). The NDDs, which include conditions such as Alzheimer's disease (AD), Parkinson's disease (PD), and Huntington's disease (HD), are among the most crippling age-related conditions in people [\(Balachandar et al., 2012;](#page-14-0) [Hou et al.,](#page-14-0)  [2019;](#page-14-0) [Venkatesan et al., 2021](#page-16-0); [Venugopal et al., 2018](#page-16-0)), almost 6.3 % of the global burden of all diseases is attributable to NDDs ([Misra et al.,](#page-15-0)  [2003\)](#page-15-0). Despite adequate blood flow, the transport of medications through the central nervous system is a significant issue. The blood-cerebrospinal fluid barrier (BCSFB) and the BBB, two physiological obstacles, isolate the brain from its blood supply. Minimal strategies are available for NDDs-related therapeutics and treatment because of the highly selective permeability of BBB. Out of which, drug delivery into the CNS is one of the most challenging problems faced. ([Barchet](#page-14-0)  $\&$  Amiji, [2009\)](#page-14-0). Earlier surgeries and highly evasive, classical techniques were used for treatment and drug delivery. However, their long-term benefit was a matter of concern because of the potential damage to the brain it causes, as well as the local administration of drugs with the inability to diffuse to other parts of the brain. Nanotherapeutics that can cross the BBB non-invasively have been proposed and shown in several circumstances as a feasible alternative for slowing or reversing neurodegeneration [\(Harilal et al., 2019](#page-14-0); [Hinge et al., 2022\)](#page-14-0). Nanocarriers such as liposomes, solid-lipid nanoparticles, nanoemulsions, and polymeric nanoparticles are some examples of potential nano techniques that can be used for therapeutic purposes (Barchet & [Amiji, 2009](#page-14-0)). In addition to techniques for discovering new drug compounds, the creation of multifunctional drug delivery systems has recently emerged as a fashionable and alluring idea in pharmaceutical science [\(Mukherjee et al.,](#page-15-0)  [2022\)](#page-15-0). Pharmaceutical drug carriers based on carbohydrates hold promise since they can deliver pharmaceuticals at the desired spot, improve drug pharmacological activity, and reduce the doses needed ([Agnihotri et al., 2004](#page-13-0); [Akhtar et al., 2021\)](#page-13-0). Chitosan is employed as a matrix to mediate the transfer of doxycycline hydrochloride across the BBB, according to Yadav et al.'s 2017 research [\(Yadav et al., 2017](#page-16-0)).

Chitosan is a fantastic option for biomedical applications because of its bioavailability and biodegradability ([de Oliveira Pedro et al., 2018;](#page-14-0) [M.](#page-15-0)  [Ways et al., 2018](#page-15-0)). It is an appropriate matrix that will give the drug's encapsulation a solid foundation ([Dhanavel et al., 2017](#page-14-0)). Therefore, these studies demonstrate that Chitosan is a potential new therapeutic option for neurological disorders as a promising intravenous neural drug discovery.

## **3. Existing therapeutic approaches for NDD**

A lot of time and effort are still needed to develop a drug that can treat neurodegenerative illnesses because it is such a massive undertaking. Therefore, the requirements for an effective treatment will only be discussed in part.

#### *3.1. Silibinin treatment*

Several models of neurodegenerative disorders have demonstrated the neuroprotective effects of the natural flavonoid silibinin. This study sought to determine how silibinin affects memory loss and oxidative stress from mice's amyloid β (Aβ) peptide. The administration of silibinin was reported to counteract memory impairment brought on by Aβ peptide, as seen by improved performance in the passive avoidance test and the Morris water maze test. A decrease in oxidative stress markers in the brain further demonstrated that silibinin therapy lessened the oxidative stress brought on by the Aβ. According to these results, silibinin may be able to treat NDD conditions allied with memory loss and oxidative stress [\(Lu et al., 2009\)](#page-15-0).

#### *3.2. Curcumin treatment*

According to Reddy et al.'s 2017 evaluation, curcumin treatment significantly improved memory and cognitive function in animal models of AD. Due to curcumin's ability to reduce amyloid-beta levels and tau hyperphosphorylation, cognitive function was improved. Additionally, this result was brought about by its anti-inflammatory and antioxidant properties. An increase in the expression of synaptic plasticity-related proteins, such as PSD-95 (postsynaptic density protein-95) and synaptophysin, was also seen after curcumin administration ([Reddy et al.,](#page-16-0)  [2018\)](#page-16-0).

#### *3.3. Quercetin and quercetin-3-β-d-glucoside treatment*

In an *in vivo* model of AD that involves the intracerebroventricular injection of amyloid β (Aβ25–35), Kim et al.'s 2016 study assessed the preventive effects of two flavonoids, quercetin (Q) and quercetin-3-Dglucoside (Q3G). According to our research, Q and Q3G enhanced cognitive and memory skills compared to the control group, which received an amyloid β (Aβ25–35) injection. The administration of Q and Q3G significantly reduced the amount of lipid peroxidation and NO (nitric oxide) production in the brain after Aβ25–35injection in control mice. Therefore, this study implies that Q and Q3G may have the ability to improve memory deficits and cognitive impairment brought on by Aβ25–35, as well as provide neuroprotection against oxidative stress in the brain [\(Kim et al., 2016](#page-15-0)).

#### *3.4. Nobiletin treatment*

[Nakajima et al. \(2015\)](#page-15-0) have shown the natural substance nobiletin to improve cognitive performance while simultaneously lowering soluble Aβ levels in the triple transgenic mice model of AD (3XTg-AD). This approach gradually produces amyloid plaques, neurofibrillary tangles, and cognitive impairment. The short-term and recognition memory deficits experienced by those with 3XTg-AD were reversed in these mice after three months of receiving a nobiletin dosage of 30 mg/kg. Additionally, ELISA research revealed that nobiletin decreased the concentrations of soluble Aβ− 1–40 in the brains of the 3XTg-AD mice. When given nobiletin, it has also reduced ROS levels, indicating that the natural substance may one day be used as a new medication to prevent and treat AD [\(Nakajima et al., 2015\)](#page-15-0).

#### *3.5. Novel curcumin formulation treatment*

Curcumin has better cellular absorption, and the data showed that NCF was safer and more effective than the CUR control. Based on these evaluations, it was determined that NCF outperformed currently existing treatment alternatives by not only halting the decline of the elderly mice's cognitive functions but also turning them around to a more youthful state. After conducting a thorough safety examination, it was determined that NCF was well tolerated and had no adverse effects ([Parikh et al., 2018](#page-15-0)).

## *3.6. Perilla frutescens var. japonica and rosmarinic acid treatment*

In the T-maze and object recognition tests, [Lee et al. \(2016\)](#page-15-0) study found that giving PFE (*Perilla frutescens* var. *japonica* extract) and RA (rosmarinic acid) significantly enhanced cognitive performance and study object discrimination while also offsetting the unfavorable effects caused by Aβ25–35. Nitric oxide (NO) and malondialdehyde (MDA) levels in the brain, liver, and kidney were also decreased after receiving PFE and RA. Notably, PFE substantially reduced oxidative stress by preventing the generation of NO and MDA in the mouse brain after Aβ25–35 injection [\(Lee et al., 2016](#page-15-0)).

#### *3.7. Grewia asiatica berry juice*

According to [Imran et al. \(2021\)](#page-15-0) study from 2021, the behavior of rats given 20 % and 30 % dilutions of fruit exudate was significantly affected. In the T mazes of the open field test, two popular anxiety tests, these animals displayed anxiolytic behavior. Additionally, in the forced swim test, rats who were given a higher concentration of exudate showed decreased immobility, which is a sign of antidepressant-like action. As evidenced by improved cognitive performance in numerous tests, medicated rats in learning and memory experiments showed that the effects of scopolamine-induced amnesia could be reversed. Superoxide dismutase and glutathione peroxidase levels in the isolated brains of treated rats showed a considerable rise  $(P < 0.05)$ , while acetylcholinesterase and malondialdehyde levels showed a significant decrease (*P <* 0.05). These outcomes indicate that this fruit exudate has medicinal potential.

#### *3.8. Rutin treatment*

Rutin, a naturally occurring flavonoid glycoside, inhibited tau aggregation and tau oligomer-induced cytotoxicity *In vitro*. It also decreased the release of pro-inflammatory cytokines and preserved neuronal shape. Significantly, rutin promoted extracellular tau oligomer uptake by microglia. Rutin therapy decreased pathogenic tau levels, controlled tau hyperphosphorylation, and inhibited gliosis and neuroinflammation in Tau-P301S animal models of tauopathy. Rutin also repaired synapse loss, inhibited microglial synapse engulfment, and markedly enhanced cognition. Rutin compounds constitute a viable pharmacological candidate for combinatorial targeting of tau and Aβ in treating AD ([Sun et al., 2021\)](#page-16-0).

#### *3.9. Naringin treatment*

Naringin can dramatically enhance cognitive, learning, and memory skills in mice with hydrocortisone-induced memory impairment, and it is evident that naringin, having neuroprotective properties, can significantly improve cognitive function in mice with memory impairment. As a result, naringin has considerable promise as a potential candidate for a

particular drug to treat AD ([Meng et al., 2021](#page-15-0)).

#### *3.10. Safflower seed extract treatment*

[Kim et al. \(2019\)](#page-15-0) study shows that after 100 mg/kg/day of sunflower seed extract was administered, several behavioral tests, including the T-maze and novel object recognition tests, were carried out. Analyses of the acetylcholinesterase (AChE) activity, reactive oxygen species (ROS) generation, and antioxidant enzymes in the brain were carried out to evaluate the efficacy of safflower seed extract. According to the results, the injection of safflower seed extract appeared to improve item recognition and innovative route exploration, which implies that memory function is enhanced by safflower seed extract in a scopolamine-treated mouse model. Safflower seed extract recipients also showed reduced cholinergic dysfunction and decreased AChE activity.

#### *3.11. Coffee polyphenol treatment*

APP/PS2 transgenic mice were given a diet containing 0.1 % coffee polyphenols for six months. A contextual fear conditioning test was performed to measure cognitive function, and immunohistochemical analysis was employed to determine Aβ pathology. According to our findings, coffee polyphenols shielded APP/PS2 mice's brains from A plaques and avoided cognitive impairment. Additionally, coffee polyphenols decreased the concentrations of soluble Aβ in the brain by preventing the action of β-secretase, a crucial enzyme in the synthesis of Aβ. So, according to our research, coffee polyphenols have a high therapeutic potential for reducing AD cognitive symptoms ([Ishida et al.,](#page-15-0)  [2020\)](#page-15-0).

#### *3.12. Phosphodiesterase-4 (PDE4) treatment*

The Morris water maze and novel object recognition tests revealed a considerable cognitive decline in the APPswe/PS1dE9 mice, which the oral administration of roflumilast successfully reversed at 5 and 10 mg/ kg per day. The tail-suspension test and the forced swimming test likewise revealed prolonged immobility time in the AD mice, which roflumilast was able to reduce. Roflumilast was shown to lessen neuronal cell damage by hematoxylin-eosin and Nissl staining, and it was also shown to decrease cell apoptosis in AD mice by terminal deoxynucleotidyl transferase-mediated dUTP-biotin nick-end labeling analysis ([Wang](#page-16-0)  [et al., 2020\)](#page-16-0).

#### *3.13. Paeoniflorin (PF) treatment*

In a 2018 study by [Wang et al. \(2018\)](#page-16-0), the possible neuroprotective effects of Paeoniflorin (PF) were investigated regarding cognitive deficits brought on by STZ intracerebroventricular (ICV) injection in mice. On days 1 and 3, 3 mg/kg of STZ was injected into the ICV twice on alternate days. Following the start of STZ treatment, daily PF (10 mg/kg) intraperitoneal administration for 21 days significantly improved the cognitive deficits caused by ICV-STZ as measured by the Morris water maze (MWM) test and novel object recognition test. Additionally, PF administration significantly reduced oxidative stress and STZ-induced mitochondrial dysfunction in the cortex and hippocampus compared to the control group, as evidenced by increased cytochrome c oxidase activity, ATP synthesis, and restoration of the mitochondrial membrane potential (MMP). The findings of this study imply that PF may be used to treat the cognitive deficits brought on by ICV-STZ when taken as a whole

#### *3.14. Lutein treatment*

According to the study by [Nazari et al. \(2022\)](#page-15-0), passive avoidance testing and the Morris water maze were used to assess the cognitive ability of rats. The study showed that lutein supplementation had a

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protective effect on learning and memory in the AD rat model, enabling improved performance in the behavioral tests. Lutein has the potential to be an effective treatment for AD, and more study is needed to understand its mechanism of action works [\(Nazari et al., 2022](#page-15-0)).

#### *3.15. Tannic acid treatment*

In 2022, evidence from [Ullah et al. \(2022\)](#page-16-0) showed that tannic acid (TA) and lipopolysaccharide were administered to adult male mice once and twice weekly during the three-month trial. Western blotting and immunofluorescence labeling methods examined the protein expression of particular mediators, including TNF-α, p-JNK, pIRS636, BACE1, APP, and Aβ. Biochemical experiments were carried out to gauge TA's antioxidant properties. A computer analysis was also done to examine how TA binds to TNF- $\alpha$  target sites. The findings of the behavioral tests showed that the mice treated with TA had better memory. TA dramatically reduced the activity of BACE1, resulting in less A synthesis and accumulation in the mouse brain's hippocampus. Additionally, TA significantly increased glutathione levels while reducing LPS-induced ROS generation. All the studies are described in the form of Table 1.

All the above-mentioned therapeutic modules for AD with

#### **Table 1**

Therapeutic approaches for NDD.

phytochemicals can delay the onset of AD and slow its progression. Some can promote the recovery of damaged neuronal cells by targeting various pathogenic pathways with their anti-cholinergic, anti-inflammatory, and antioxidant properties. Also, low bioavailability of the drug, limited transport, and long-term effects of the drug over the system pose a significant threat to using traditional drugs for the treatment of AD. At the same time, using chitosan nanoparticles can increase the loaded drug's bioavailability and provide a multifunctional platform that can aid in various theragnostic applications.

## **4. Current clinical trials for NDD**

Clinical trials are scientific investigations that put a medical, surgical, or behavioral intervention before human subjects. These studies are the primary means by which scientists ascertain the safety and efficacy of new forms of therapy or prevention, such as new drugs, diets, or medical devices, in humans. There are several chances for failure in clinical trials for drugs and medical devices. From preclinical to phase 3, the resources, time, and financial commitments increase with each stage ([Fogel, 2018](#page-14-0)).

Parkinson's disease (PD) and dementia of the Alzheimer's type, two



neurodegenerative diseases whose incidence rises with advancing age, will soon place a heavy burden on societies that, like our own, are aging. Since most neurodegenerative disorders' etiology and pathophysiology are unknown, they pose a research challenge. It is challenging but vital to create cures for diseases whose causes are currently unknown ([Jayaramayya et al., 2020](#page-15-0); Stanzione & [Tropepi, 2011](#page-16-0)). Clinical trials for neurodegenerative illnesses necessitate the long-term monitoring of a large number of patients, making it difficult to continue the studies and driving up expenditures. Additionally, only a few symptomatic therapies are accessible due to the abysmal success rate, and therapeutic drugs able to slow the progression of the disease have not yet been created. Alternative study designs may prove valuable in finding disease-modifying therapies because research must continue while waiting for the pathways underlying neurodegeneration to be exposed ([Iyer et al., 2016;](#page-15-0) [Reddy et al., 2020\)](#page-16-0). For each neurological condition across all Indian states in 2019, they provide general, age, and sex-specific prevalence or incidence rates and disability-adjusted life

## **Table 2**



neurological ailment. All non-communicable neurological illnesses, except stroke, are reported for their prevalence. In contrast, stroke, infectious neurological disorders, and injury-

years (DALY) rates. The 2019 deaths in India are included for each

related neurological disorders are noted for their incidence, according to the metric that is most frequently applied clinically for each condition. The research on the Global Burden of Diseases (GBD) and global neurological disorders, which was previously published, also employed the same measures. It is impossible to compare the prevalence and incidence directly ([Singh et al., 2021](#page-16-0), pp. 1990–2019). The Current Clinical Trial Data was collected from "ClinicalTrials.gov," a resource provided by the U.S. National Library of Medicine that will be available worldwide. Table 2 demonstrates the details of Current clinical trials in neurodevelopmental diseases.



## **5. Carbohydrate bio-polymers – a novel therapeutic approach for NDD**

Biopolymers are extensively eco-friendly since they are biodegradable & biocompatible and are accentuated in various biomedical applications ([Azeem et al., 2017;](#page-14-0) [Torres et al., 2019](#page-16-0); [Wei et al., 2021](#page-16-0)). These biopolymers are used in multiple aspects of neurodegeneration and have been proven to have a positive effect.

#### *5.1. Polyphenols*

Polyphenols have an essential function, such as acting as a defense against the accumulation and attack of pathogens, and it is proved that the use of food substances that are polyphenol-rich could deliver fortification counter to neurodegenerative disorders [\(Graf et al., 2005](#page-14-0)). Flavonoids are a form of polyphenols that can be used against inflammatory disorders and are involved in treating Alzheimer's Disease (AD) and Parkinson's Disease ([Widhiantara et al., 2021](#page-16-0)). Flavonoids, with antioxidants, prevent oxidative stress damage of a cell. Flavonoids have also been associated with inhibiting inflammatory cytokines such as IL-1, TNF-α, and IL-6, which ultimately protect neuronal cells by inhibiting the triggering of microglial cells in the case of PD. By inhibiting  $Ca^{2+}ATP$ ase, flavonoids exert their therapeutic effects in AD ([Shukla et al., 2019](#page-16-0)). Resveratrol, another polyphenol biopolymer, has an extensive impact on AD treatment by decreasing factors of proinflammation (NF-kB pathway) and regulating various pathways of autophagy [\(Dhingra et al., 2021](#page-14-0)).

#### *5.2. Alginate*

Alginate is an oligosaccharide biopolymer that possesses antioxidant effects. It has the potential to upregulate the levels of GSH (Glutathione), thereby mediating the cellular OS and protecting the neuronal cell death

induced by  $H_2O_2$  ([Eftekharzadeh et al., 2010\)](#page-14-0), which is a depository product in AD and regulates NF-kB pathway insisting on its neuroprotective effect in AD.

#### *5.3. Glycan*

Glycans are prime in various cellular functions, such as disease progression. Anomalous glycation and glycosylation in NDDs result in protein dysfunction and aberrant deposition. Hence, the modulation of glycosylation can be used as a therapeutic approach against protein deposition in neurodegenerative disorders, and the intonation is done via modulating the regulator enzymes such as glycosidases and glycosyltransferases ([Esko et al., 2015\)](#page-14-0). The various functions of biopolymers of carbohydrates are explained in Fig. 1.

#### *5.4. Polysaccharide fractionate*

Damage to the nerve cells induced due to the upregulated concentrations of excitatory amino acids by the undue stimulation of glutamate receptors is called excitotoxicity. [Lemieszek et al. \(2018\)](#page-15-0) have demonstrated the activities of polysaccharide fractions from C. cibarius have a neuroprotective effect and protect the neuronal cells against excitotoxicity ([Lemieszek et al., 2018](#page-15-0)). Similarly, polysaccharides from T. fuciformis yielded the same result as a neuroprotectant ([Jin et al., 2016](#page-15-0)). In PC12 cells, the polysaccharides from C. cicadae had a neuroprotective effect against glutamate-induced damage [\(Olatunji et al., 2016](#page-15-0)).

## **6. Chitosan – a carbohydrate bio-polymer**

Chitosan is a deacetylated chitin derivative comprising N-acetyl-Dglucosamine and D-glucosamine ([Kumar et al., 2004;](#page-15-0) [Zargar et al.,](#page-16-0)  [2015\)](#page-16-0). The Chitin can be extracted from various sources such as fungi, crustaceans, worms, yeasts, and mollusks ([Anitha et al., 2014](#page-14-0); [Bo et al.,](#page-14-0) 



**Fig. 1.** Chitosan the suitable carbohydrate polymers - The functions of carbohydrate biopolymers towards neuroprotection in neurodegeneration via its variants such as polyphenols, glycans and alginate has been explained. Polyphenols has flavonoids which protects the cells against OS, inflammatory cytokines and excitotoxicity. Alginate upregulates GSH which in turn downregulates hydrogen peroxide production protecting against OS. Glycan clears protein deposition by glycosylation using enzymes such as glycosidase and glycosyltransferase.

[2012;](#page-14-0) [Ehrlich et al., 2010](#page-14-0); [Wysokowski et al., 2015\)](#page-16-0). Recently, researchers have initiated to acknowledge Chitosan as a biomedically useful biopolymer that is biodegradable  $\&$  renewable, functional, and nontoxic. have the potential usage in several fields such as food ([Shahidi](#page-16-0)  & [Synowiecki, 2002\)](#page-16-0), pharmaceutics, and cosmetics ([Zhang et al., 2010](#page-17-0); [Li et al., 2018](#page-15-0)). Chitosan also possesses antimicrobial, immunoenhancing, and antitumor properties [\(Bellich et al., 2016](#page-14-0)). Chitosan and its derivatives exert neuroprotective roles and are classified into some mechanisms, namely Anti-Apoptosis, Anti- Neuroinflammatory, Anti-Excitotoxic, Clamping down the aggregation of Aβ and Suppressing the action of Oxidative stress.

## *6.1. Anti-apoptosis*

Chitosan (CS) is proven to have properties that suggestively increase the viability of cells and decrease the release of LDH (Lactate dehydrogenase) [\(Wang et al., 2016](#page-16-0)). In the cell apoptosis induced by DBT (Dibutyltin), the disturbance of MMP (Mitochondrial membrane potential) and ROS production were diminished by CS [\(Wang et al., 2016](#page-16-0)). Another study by [Koo et al. \(2002\)](#page-15-0) demonstrated that CS inhibits neuronal and astrocyte cell death via the blockage of glutamate receptors [\(Koo et al., 2002\)](#page-15-0).

#### *6.2. Anti-Inflammatory*

Neuroinflammation plays a prime role in neurodegeneration, which is mediated by the release of inflammatory cytokines ([Elangovan et al.,](#page-14-0)  [2023\)](#page-14-0). [Kim et al. \(2002\)](#page-15-0) found that in astrocytoma cells of humans, water-soluble CS could constrain the pro-inflammatory cytokine production triggered by IL (Interleukins) and Aβ. Pre-treatment of CS in astrocytoma cells of humans significantly inhibits the expression of IL-6, TNF-α, and iNOS (inducible nitric oxide synthase) ([Kim et al., 2002\)](#page-15-0).

#### *6.3. Anti-excitotoxic*

As explained in the previous topics, the glutamate and glutamate receptors play a significant role in the physiology of neurodegeneration. One of the products of Chitosan, COS (Chito oligosaccharides), protects hippocampal neuronal cells against apoptosis due to glutamate. COS downregulates the concentration of calcium Ca  $2+$ and provokes glutamate-induced caspase-3 activation [\(Zhou et al., 2008](#page-17-0)).

## *6.4. Clamping down the aggregation of Aβ*

Aβ peptide plaque formation is a chief concern in AD ([Elangovan](#page-14-0)  [et al., 2023](#page-14-0); [Sasikalaa et al., 2016\)](#page-16-0). In a study done by [Dai et al. \(2013\)](#page-14-0), they discovered that COS might possess fibrillogenic properties against Aβ plaque formation, and treatment of cells with COS protects the cells against Aβ deposition and generation ROS [\(Dai et al., 2013\)](#page-14-0). By blocking the ability of the BACE-1 gene, COS delivers a neuroprotective effect that results in downregulated Aβ deposition ([Byun et al., 2005](#page-14-0); [Je](#page-15-0) & [Kim, 2005](#page-15-0)).

#### *6.5. Suppressing oxidative stress*

It is a known fact that free OS is present in most neurodegenerative diseases and plays a prominent role in cell death, which is mediated by free radicals ([Fenn et al., 2016\)](#page-14-0). Consequently, regulating free radicals allows the OS to be controlled or managed in neurodegenerative disorders. [Hao et al. \(2015\)](#page-14-0) experiment on PC12 cells showed that PACO (Peracetylated chitosan oligosaccharides) reduces LDH and ROS. Additional studies suggested that PACO protects cells against death by glutamate via downregulating the ratio Bax/Bcl-2 and activation of caspase-3 ([Hao et al., 2015\)](#page-14-0), indicating the potential of chitosan derivatives against OS in neurodegenerative disorders.

Chitosan and its derivatives play a pivotal role in various aspects of

#### **7. Chitosan – available sources and extraction methods**

Chitosan is a linear copolymer obtained from the deacetylation of polysaccharide chitin (Dodane & [Vilivalam, 1998](#page-14-0)). Chitin is commonly present in organisms in species like crustaceans (Cray Fish, Shrimp, squids), insects (beetles, grasshoppers, honey bees, locusts), and microorganisms (fungi, algae) [\(Moura et al., 2011;](#page-15-0) [Muzzarelli, 1973](#page-15-0); Pochanavanich & [Suntornsuk, 2002](#page-16-0)). Various steps, including pre-treatment, Deproteination, Demineralization, Decolouration, Purification, and Deacetylation, follow the extraction of Chitosan. In the pre-treatment step, the organism's soft tissues were removed entirely and sterilized by cleaning with hot water. Then, the Chitin's biomass (shell, Exoskeleton) will be chopped or grounded and sieved in the  $60-120$   $\mu$ m mesh, and the powder form will be taken for further processing ([Mohammed et al., 2013](#page-15-0)). The obtained powder of biomass was taken for deproteination. The deproteination step will be carried out using chemical and biological methods. The chemical method (Alkaline treatment) is commonly used; here, NaOH breaks down the protein at high temperatures ([Bajaj et al., 2011](#page-14-0); [Marei et al., 2016](#page-15-0)). In the biological method, *B. cereus* SV1 protease enzyme was used to digest the protein at the optimum condition (40 ◦C) ([Manni et al., 2010](#page-15-0)). Followed by deproteination demineralization was done with the help of acids ([Bastiaens et al., 2019](#page-14-0)). HCl is commonly used as a demineralizing agent to remove Calcium carbonate (CaCO3) from the exoskeletons of crustaceans and other organisms ([Abdou et al., 2008](#page-13-0); [Manni et al., 2010](#page-15-0)). In the decoloration step, the pigments were removed using acetone, potassium permanganate, ethanol, and chloroform [\(Liu et al., 2012](#page-15-0); [Mohammed et al., 2013\)](#page-15-0). After completion of the deproteination, demineralization, and decoloration, samples were washed in the deionized water to neutralize the pH, and finally, Chitin was dried and taken for the deacetylation ([Bajaj et al., 2011](#page-14-0); [Manni et al., 2010](#page-15-0); Pochanavanich & [Suntornsuk, 2002](#page-16-0)). The deacetylation treatment is done to obtain the Chitosan from the Chitin. NaOH/KOH is commonly used to perform the deacetylation process. The Chitin was soluble while treated with NaOH in an alkaline condition. The solidified Chitin was maintained at a high temperature for completing the deacetylation process ([Manni et al., 2010](#page-15-0); [Moura et al., 2011;](#page-15-0) [Pochanavanich](#page-16-0) & [Suntornsuk, 2002](#page-16-0)). Then, the samples were taken for purification, mixed with acetic acid, and centrifuged at 6650 g for 30 min to remove the insoluble particles. The NaOH was added to the supernatant to precipitate Chitosan. Finally, the precipitated Chitosan was dried and stored. The available sources and the respective extraction methods have been given in [Table 3.](#page-8-0)

#### **8. Chitosan – biological properties**

Chitosan has a wide range of physicochemical properties, including a rigid structure with glucosamine residues showing an increased hydrophilic and crystalline nature. It is whitish yellow and has a higher molecular weight of  $1.2 \times 10^5$  g/mol. They are linear cationic biopolymers with high nitrogen content and high charge density (one positive charge per glucosamine residue) at pH *<* 6.5 with excellent ionic conductivity ([Zhao et al., 2018\)](#page-17-0). Chitosan is insoluble in organic solvents and water while soluble in dilute hydrous acidic solutions. It can also act as a weaker base, a powerful nucleophile (pKa 6.3), and a flocculating agent. They form intermolecular hydrogen bonds with increased viscosity, density (0.18–0.33  $g/cm<sup>3</sup>$ ), and optical clarity.

Moreover, they show film-forming, chelating, and complexing properties with high entrapment and adsorption efficacy ([Muxika et al.,](#page-15-0)  [2017\)](#page-15-0). Because of the physicochemical properties engrossed with the Chitosan, they show various biological properties, including biocompatibility, i.e., safe and nontoxic, with mucoadhesive properties and biodegradability. They show a wide spectrum of activities, including hemostatic (causes bleeding to stop), fungistatic (hinders the growth of

<span id="page-7-0"></span>

**Fig. 2.** Chitosan against neuronal inflammation: Depicted are the several means by which chitosan and its by-products protects a cell against many physiological reactions in neurodegeneration. This includes COS, PACO, Glutamate interfering in clearing Aβ fibril formation, NF-kB pathway regulation and neuroinflammation.

fungi), spermicidal (controls pregnancy), anti-cholesteric (lowers cholesterol level), and anticancer or antitumor (inhibits the growth of tumor cells) activities (Koł[odziejska et al., 2021\)](#page-15-0). It can also act as a CNS depressant (decreasing brain activity) and as an immunoadjuvant (involved in improving the immune response). They have the potency to hasten the process of osteoblast development and play a pivotal role in bone formation. Furthermore, they interact with mammalian and microbial cells, effectively showing antioxidant and antimicrobial activity. They possess wound management efficacy and aid in orthopedic and periodontal application ([Aranaz et al., 2021](#page-14-0)).

#### **9. Chitosan-based drug delivery for diseases**

Chitosan-based drug delivery system is also used to treat diseases like Diabetes Mellitus apart from NDs [\(Revathi et al., 2023](#page-16-0)). Due to its excellent biodegradability, biocompatibility, hypoallergenic, antibacterial, immune, and antitumor activities, Chitosan has garnered considerable interest from researchers worldwide [\(Tang et al., 2023](#page-16-0)). The stimuli-responsive properties of chitosan hydrogels have become an active area of research since this technique may now enable the regulated release of drugs at target sites (Tian  $&$  [Liu, 2023](#page-16-0)). Along with NDs, recent studies have also established the roles of N-benzyl-O-acetyl-chitosan, Imino-chitosan, Sulfated-chitosan oligosaccharides derivatives as potent antiviral candidates due to their high binding affinity of the ligands [\(Modak et al., 2021](#page-15-0)). Chitosan-based nanocarriers are used for anticancer drug delivery and chemotherapy ([Alhodieb et al., 2022](#page-13-0)). Additionally, CS NPs are effective in several biomedical applications for the treatment of diseases [\(Khalaf et al., 2023](#page-15-0)).

Chitosan and its nanoform, in particular, are the most appealing natural polymers to utilize for controlled release in various drug delivery systems. Given its exceptional biocompatibility, biodegradability, and adsorption characteristics, Chitosan has been highly suggested as a good functional material ([Jafernik et al., 2023\)](#page-15-0). The presence of functional amino and hydroxyl groups in its structure is partially responsible for this attraction. These molecules efficiently bind to active compounds, thus rendering Chitosan to change feasibly, which is crucial for the exact dosing and prolonged release of drugs or other bioactive substances ([Muxika et al., 2017\)](#page-15-0). Because of their unique *in-situ* gelling abilities and mucoadhesive nature, they are utilized in administering drugs to treat eyes. Chitosan-coated nanocapsules have shown favorable eye tolerance and are an effective way to increase the ocular bioavailability of different therapeutic medications [\(Calvo et al., 1997](#page-14-0)). They are also utilized in oral drug delivery because they improve absorption by loosening tight mucosal membrane connections. They help deliver pulmonary drugs due to their positive charge ([Garg et al., 2019](#page-14-0)). They aid in the mucosal drug delivery process by enhancing the absorption of hydrophilic compounds. It acts as an adjuvant in the administration of vaccines. It has also been proven to be successful in the treatment of cancer. The physiochemical characteristics of chitosan NPs are largely responsible for these wide applications.

Chitosan acts both as a vector for carrying the drug payload and as a therapeutic drug in its modified form [\(Aranaz et al., 2023\)](#page-14-0). The composites formed with the Chitosan have been used to deliver medicinal drugs to the brain, i.e., crossing BBB [\(Rajamanickam](#page-16-0) & Manju, 2023; [Yang et al., 2023](#page-16-0)) for treating cerebral hemorrhage. They can also aid in the treatment of diseases like migraine and brain cancer.

One of the composites that have played an important role in treating AD is the selenium-chitosan nanocomposite (CS- SeNPs). Previous studies have demonstrated the antioxidant properties of CS-SeNPs to be more efficient as 87.45  $\pm$  7.63 % (in ABTS) [\(Zhai et al., 2017\)](#page-17-0), 20.2  $\pm$ 0.6 % (in DPPH) ([Bai et al., 2020](#page-14-0)), 83.71 % (in ABTS) [\(Chen et al.,](#page-14-0)  [2015\)](#page-14-0)), and  $60\pm 2.5$  % (in DPPH) ([Khiralla et al., 2020\)](#page-15-0). Moreover, the metal ion chelators were accepted as promising agents for treating AD as it is one of the metal ions' dysmetabolisms. Thus, Se itself can act as a viable therapeutic target to alleviate AD. As beta-amyloid peptide aggregates remain a major offender in the occurrence of AD, Chitosan itself can act in the dissolution of insoluble and preformed soluble aggregates. They act by retracting the formation of the secondary structure (beta sheet) of amyloid protein by stabilizing the alpha-helical structure, preventing aggregate formation, which is because of the effect of pH, which makes the peptide have a net negative charge of -3 and Chitosan to have a positive charge, resulting in the formation of ionic or hydrogen bonds. The effect of CS-SeNPs on cell lines (SH-SY-5Y) was studied in previous reports by [Jha et al. \(2019\).](#page-15-0) They reported that the polymeric nanoparticles alone tend to disintegrate the amyloid plaques formed in the brain.

Chitosan scaffolds assist in anchoring and promoting osteoblast cell growth and in the production of mineralized bone matrix. Hydrogels made of Chitosan stand out for promoting cartilaginous tissue regeneration and effectively promoting chondrogenic activity. The potential of

# $M.$  Iyer et al.  $% \left( \mathcal{N}\right)$ *M. Iyer et al.*

## <span id="page-8-0"></span>**Table 3**

Chitosan – Available sources and its extraction methods.



M. Iyer et al. *M. Iyer et al.* 



(*continued on next page*)

 $M.$  Iyer et al.  $% \left( \mathcal{N}\right)$ *M. Iyer et al.* 

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Chitosan for nerve regeneration has been established *In vitro* and *in vivo*. Chitosan-based materials also promote neurons' adhesion, survival, and neurite outgrowths [\(Victor et al., 2020\)](#page-16-0). Fig. 3 depicts the use of Chitosan as an effective drug delivery system for NDDs.

## **10. Chitosan – drug delivery and derivatives for NDD**

Concerns about the blood-brain barrier (BBB) and blood-spinal cord barrier, in particular neurodegenerative diseases (NDD), continue to be the main issues in neurological illnesses. The blood-brain barrier (BBB), out of all these biological barriers, is the one that makes it most difficult for medications to enter the brain [\(Akhtar et al., 2021\)](#page-13-0). Delivery of brain-targeted nanoparticles with desired properties and adaptable qualities is made possible by the feasibility of surface modification of the chitosan structure. To improve BBB penetration, cell compatibility, and serum stability, modified Chitosan is also effective in capping the surfaces of other nanocarrier materials such as PLGA (poly (lactic-co-glycolic acid)) and PLA (poly lactic acid) [\(Wang et al., 2010](#page-16-0)). By using a promising nanoparticle, the medicine would be able to pass the blood-brain barrier (BBB) more readily and avoid cytotoxicity to a greater extent [\(Baysal et al., 2017;](#page-14-0) Sánchez-López [et al., 2018\)](#page-16-0). Focus has also switched to chitosan-collagen nanocomposites since their scaffolds have demonstrated outstanding potential in developing protein-polysaccharide drug delivery vehicles [\(Rezaii et al., 2019](#page-16-0); [Zeissler et al., 2016](#page-16-0)). By forming polyplexes, the chitosan derivative's hydrophobic component helps release the anionic ions bound to the Chitosan. The simple, less toxic, biocompatible, more stable, and completely biodegradable nature of chitosan nanoparticles has employed them for various therapeutic purposes. Blood stability, BBB epithelial surface adhesion, and blood compatibility are necessary to treat neurodegenerative diseases [\(Szebeni, 2012\)](#page-16-0).

Chitosan has varied kinds of derivatives, which would be very beneficial for drug delivery among NDDs. Various techniques can be used to create drug-loaded chitosan nanoparticles depending on the structural properties of the Chitosan and the makeup of the drug. The Ntrimethyl chitosan (TMC) is a type of Chitosan that has received extensive research for brain targeting with anti-AD because positive charged TMC and anionic sialic acid residues of glycoprotein present on the BBB undergo electrostatic interactions (Sarvaiya & [Agrawal, 2015](#page-16-0)). It has been discussed how TMC can target the brain by altering the surface of PLGA nanoparticles. The delivery of Co-enzyme Q10 and 6-coumarin by TMC/PLGA-NP for the treatment of AD-related neurodegeneration was confirmed by senile plaque and biochemical testing to have effects that are specifically targeted to the brain ([Wang et al.,](#page-16-0)  [2010\)](#page-16-0). Other derivatives of Chitosan are the use of tween 80 coated chitosan, PEGylated Chitosan, and zwitter ionic chitosan derivatives

([Wilson et al., 2010\)](#page-16-0), which is another standard method for influencing BBB permeability of neuroprotective drugs. In contrast, it was discovered that the amount of medication transported by Tween 80 coated chitosan nanoparticles across the BBB was equal to that of unmodified chitosan nanoparticles [\(Bhavna et al., 2014](#page-14-0)) [\(Fig. 4](#page-12-0)).

DNA-loaded chitosan particles are more durable when stored, so using Chitosan as a vector for gene therapy is essential [\(Duceppe](#page-14-0)  $\&$ [Tabrizian, 2010\)](#page-14-0). Using Chitosan as a protein carrier can assist in extending the biological activity of protein therapeutics *in vivo* by protecting them from enzyme degradation and regulating drug release to meet the goal of sustained or controlled release ([Lü et al., 2010](#page-15-0)). Chitosan shields the DNA from nuclease degradation by combining with the negatively charged DNA to form a polyelectrolyte complex. The effectiveness of transfection is increased by this protection ([Agnihotri et al.,](#page-13-0)  [2004\)](#page-13-0). It is possible to transmit genes with and without the aid of viruses. A naturally occurring cationic polysaccharide with an excellent affinity for DNA is Chitosan [\(Renugalakshmi et al., 2011](#page-16-0)). Increase Chitosan's ability to transport DNA and its solubility; the quaternary ammonium group was modified to create quaternary Chitosan [\(Li et al.,](#page-15-0)  [2015\)](#page-15-0). Derivatization of Chitosan can increase its stability and targeting potential; for instance, [Hu et al. \(2015\)](#page-14-0) used a chitosan-based glycolipid-like nanocarrier to deliver siRNA with a redox response to specific targets. As Chitosan and its derivatives are studied more in-depth, the evidence is mounting that the organic mixture of chitosan bioactivities and pharmaceuticals will enhance the progress of drug preparations and be extensively used in novel drug dosage forms. The development of chitosan vehicles that can control the release of medication, particularly for NDDs, is one of the research fields that will be studied in the future.

#### **11. Challenges to use Chitosan as drug deliverables for NDD**

One significant area for improvement is establishing a long enough shelf life for chitosan formulations because unstable chitosan-based systems limit their practical application. Controlling environmental parameters, adjusting production settings (such as temperature), adding the right stabilizing component, creating chitosan blends with other polymers, or altering the structure of the Chitosan using chemical or ionic agents can all improve stability (Szymańska  $\&$  [Winnicka, 2015](#page-16-0)). The molecular mass, polydispersity, deacetylation level, purity threshold, and amount of moisture are all important factors that affect how quickly and how Chitosan can get degraded. Chitosan can get easily degraded both *in-vivo* and i*n-vitro* mode. Lysozyme, a general protease found in all mammalian tissues, is primarily responsible for breaking down Chitosan *in vivo*. This process results in nontoxic oligosaccharides that can either be expelled or added to glycosaminoglycans and glycoproteins [\(Kurita et al., 2000\)](#page-15-0). Low-molecular Chitosan is often prepared



**Fig. 3.** Chitosan forms for various Neurodegenerative diseases: Chitosan can be used in various forms for the treatment of a number of neurodegenerative diseases and it includes chitosan microsphere, dendrimer, micelles, nanogel and nanoparticles in diseases such as AD, PD, Migraine etc.

<span id="page-12-0"></span>

**Fig. 4.** Chitosan as drug delivery for Neurodegenerative diseases: Drugs conjugated with chitosan makes it easy to delivery the drugs for neurodegenerative diseases. The release of chitosan coated drugs easily diffusions the drugs to astrocytes and neurons due to the positive and negative charges.

#### **Table 4**

Explanation of studies using Chitosan as drug delivery for overall neurological diseases.

S. No	Pharmaceutical form of Chitosan and its derivatives used	Source of Therapeutic drug	In vitro/ In vivo model	Dosage	Pharmaceutical applications	Refs.
1.	Brain-derived neurotrophic factor (BDNF) loaded chitosan microspheres	Commercially purchased	PC-12 cells	$1$ mg/mL	Detection of neural differentiation and axonal promoting activity of BDNF in PC-12 cells	Aranaz et al. (2023)
2.	Piracetam-loaded magnetic chitosan nanoparticles	Commercially purchased	Female Albino rats	$200$ mg/kg	Mitigates Thiacloprid induced brain toxicity	Abomosallam et al. (2023)
3.	Niruriflavone-loaded chitosan nanoparticles	Phyllanthus niruri	SH-SY-5Y, Wistar rats	$250 \mu g/mL$ $0.125$ mg/ kg	Targets blood-brain barrier and also in treating <b>Alzheimers Disease</b>	Rajamanickam and Manju (2023)
4.	Resveratrol loaded chitosan nanoparticles	Commercially purchased	Mice		Alleviates glucolipid metabolism disorder- associated cognitive impairment in Alzheimer's disease	Yang et al. (2023)
5.	L-arginine loaded chitosan nanoparticles	Commercially purchased	Wistar rat	$500$ mg/kg	Ameliorates aging-induced neuron atrophy and autophagy	Zargani et al. (2023)
6.	Transferrin-decorated chitosan nanoparticles	Commercially purchased	RPMI 2650 and U87 glioblastoma cells	5 <sub>mg</sub>	Enhances delivery of protein through nose-to- brain	Gabold et al. (2023)
7.	Chitosan-g-poly (N- isopropylacrylamide)	Synthesized compound	Female New Zealand white rabbits		Enhances myelin growth and neuron regeneration in glaucoma related neurodegeneration	Luo et al. (2020)
8.	Cannabidiol Coated by Nano- Chitosan	Commercially purchased	Male Wistar rat	$200$ mg/kg	Enhances cannabinoid receptor type 1 and 2 which results in increased learning and memory in Alzheimers induced rat	Amini and Abdolmaleki (2022)
9.	Chitosan-Mangafodipir nanoparticles for intranasal delivery of siRNA and DNA	Commercially purchased	NIH3T3 cells/ transgenic green mice	$20 \mu M$	For treating neurodegenerative disease by delivery of siRNA and dsDNA (liberating payload from nose to brain; to develop disease-modifying therapeutics)	Sanchez-Ramos et al. (2018)
10.	Chitosan nanoparticles and HAMC composites	Commercially purchased	Rats	$10 \frac{\text{mg}}{\text{kg}}$	For treatment of Intracerebral hemorrhage through intranasal drug delivery	Guo et al. (2019)
11.	Rutin-encapsulated chitosan nanoparticles	Commercially purchased	Wistar rats	1:1	For treatment of Cerebral Ischemia	Ahmad et al. (2016)
12.	Chitosan glucamate microcarrier	Commercially purchased	Wistar rats	$5$ mg/ml	For treatment of anti-migraine	Gavini et al. (2013)
13.	Ellagic acid loaded chitosan/ $\beta$ -glycerophosphate (Ch/ $\beta$ -GP) thermo-sensitive gel	Commercially purchased	U87 and C6 glioma cells	660mM	For treatment of Brain cancer	Kim et al. (2010)
14.	Curcuminoid loaded Hyaluronic acid/chitosan nanoparticles	Commercially purchased	C6 cells	$2$ mg/mL	For treating Malignant glioma	Yang et al. (2015)
15.	Lactoferrin-coated chitosan hydrochloride/hyaluronic acid/ PEG nanoparticles	Commercially purchased	BCECs and C6 cells/ ICR mice	$5 \mu g/mL/$ $1.25 \,\mathrm{mg/kg}$	For treating Malignant glioma through targeting <b>Blood Brain Barrier</b>	Xu et al. (2017)
16.	Tacrine-loaded chitosan nanoparticles	Commercially purchased	Albino Wistar rat	1:1	Pre-clinical assessment for treating Alzheimer's disease	Wilson et al. (2010)
17.	Glycol chitosan and dextran sulfate nanoparticles	Commercially purchased	In vitro		For the treatment of Brain cancer	Saboktakin et al. (2011)
18.	TAT peptide-tagged PEGylated chitosan nanoparticles	Chemically synthesized	Mouse neuroblastoma cells (Neuro 2a)	$40 \mu M$ <b>SiRNA</b>	For treating Neurodegenerative disease by targeting Ataxin-1 gene	Malhotra et al. (2013)

<span id="page-13-0"></span>under controlled circumstances by *In vitro* degradations of Chitosan through oxidation, chemical, or enzymatic hydrolysis reactions ([Ma](#page-15-0)  [et al., 2014\)](#page-15-0). Irrespective of the method of deterioration of Chitosan, the process often starts with the N-acetyl linkage, which means deacetylation and random splitting of -1,4-glycosidic, which links depolymerization.

The results are an increase in deacetylation degree and a decrease in average molecular weight. Additionally, the depolymerization of Chitosan may produce free radicals, which trigger oxidation processes (Mucha & [Pawlak, 2022\)](#page-15-0). As a result, chitosan material should be highly pure and free of impurities, including endotoxins, when applicable [\(Li](#page-15-0)  [et al., 2018](#page-15-0)). Chitosan has much potential for tissue engineering and drug delivery systems; however, scaling up these applications for pharmaceutical use is difficult due to its low long-term stability. During storage, chitosan experiences slow chain degradation, followed by the elimination of its functional groups, which causes the irreversible loss of its physicochemical properties, which might be because Chitosan has significant hygroscopic qualities and because chitosan materials from different sources have very different molecular weights, molecular weight distributions, levels of deacetylation, and purity. Due to Chitosan's high susceptibility to outside factors, its structure may be stressed and deteriorate due to processing conditions (such as heating or freezing). Consequently, even though chitosan-based services have been the subject of broad investigation in the biomedical field, manufacturing Chitosan as a pharmaceutical ingredient for NDDs still needs to overcome a few obstacles ([Table 4\)](#page-12-0).

## **12. Future directions and recommendations for the use of Chitosan in NDD therapies**

Since there are no general guidelines for maintaining chitosan-based goods during storage, pre-formulation research and choosing the best storage conditions are crucial to ensuring the maximum stability of Chitosan for drug delivery. The following is an explanation of some recommendations for future studies using Chitosan for medication delivery:

- In addition to its physiological properties like immunology or biological breakdown, Chitosan's purity level greatly impacts a substance's solubility and stability.
- It must be noted that heat generation during capsule manufacturing is caused by the compression force, which could impact the dispersion of the chitosan molecular weight and prevent deacetylation.
- The physicochemical and mechanical properties of chitosan-based systems may alter due to variations in the moisture content of the chitosan material during storage.
- The rate of drug discharge outline of the chitosan matrix can be altered by storing it at high relative humidity and modifying its water-uptake capacity.
- To avoid the loss of moisture and hardness and improve the mechanical tablet strength, the exposure temperature should be kept below 40 °C.
- Filter sterilization could eliminate microbial impurities and ensure that heat-labile liquid chitosan formulations are pure.
- The mechanical and water-uptake properties of chitosan formulations will be influenced by adding stabilizing chemicals to chitosan films .

#### **13. Conclusion**

Chitosan is a promising novel excipient for pharmaceutical preparations since it is a biodegradable polymer with good characteristics. Chitosan nanoparticles help deliver medicines and boost their therapeutic potency. They can be employed in oral drug delivery because they loosen the mucosal membrane's tight junctions, which improves absorption. They make a variety of medications more nasally absorbable

by increasing their permeability. They aid in the mucosal drug delivery process by enhancing the absorption of hydrophilic compounds. They serve as an adjuvant in the administration of vaccines. The physiochemical characteristics of chitosan NPs are primarily responsible for these uses. These include *in-situ* gelling ability, mucoadhesiveness, absorption-enhancing capacity, biocompatibility, and biodegradability. In conclusion, conducting more extensive recharge on Chitosan and its derivatives for NDDs would help us develop novel dosage forms of drugs.

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**Mahalaxmi Iyer:** Writing – review & editing, Writing – original draft, Formal analysis, Data curation, Conceptualization. **Ajay Elangovan:** Writing – original draft, Data curation. **Ramya Sennimalai:**  Writing – review  $&$  editing, Writing – original draft, Formal analysis, Data curation. **Harysh Winster Suresh Babu:** Writing – original draft, Data curation. **Saranya Thiruvenkataswamy:** Writing – original draft, Data curation. **Jayalakshmi Krishnan:** Writing – review & editing. **Mukesh Kumar Yadav:** Writing – review & editing. **Abilash Valsala Gopalakrishnan:** Writing – review & editing. **Arul Narayanasamy:**  Writing – review & editing. **Balachandar Vellingiri:** Writing – review & editing, Supervision, Project administration, Conceptualization.

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The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

## **Data availability**

No data was used for the research described in the article.

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