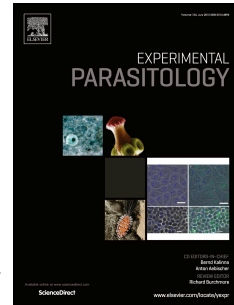


Accepted Manuscript

Albendazole-lipid nanocapsules: Optimization, characterization and chemoprophylactic efficacy in mice infected with *Echinococcus granulosus*

Gabriela V. Ullio Gamboa, Patricia E. PenseL, María C. Elissondo, Sergio F. Sanchez Bruni, Jean-Pierre Benoit, Santiago D. Palma, Daniel A. Allemandi



PII: S0014-4894(18)30069-9

DOI: <https://doi.org/10.1016/j.exppara.2019.02.002>

Reference: YEXPR 7659

To appear in: *Experimental Parasitology*

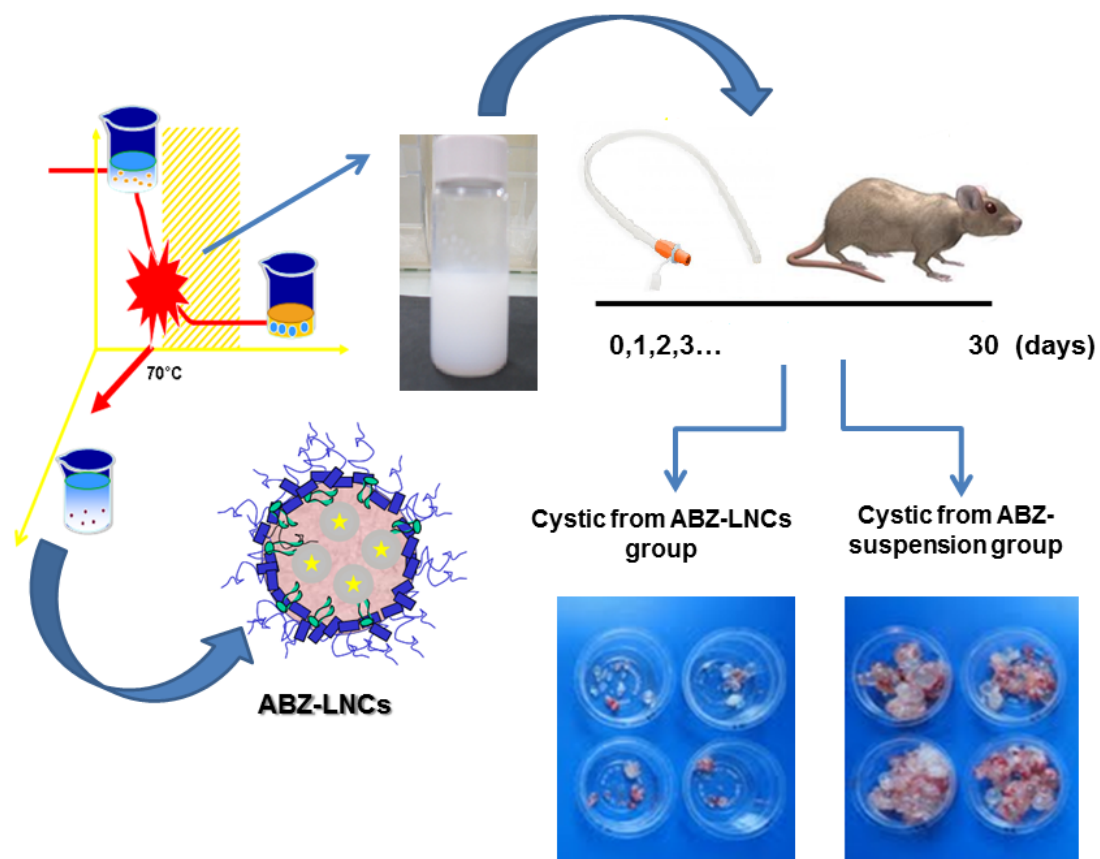
Received Date: 14 February 2018

Revised Date: 3 January 2019

Accepted Date: 10 February 2019

Please cite this article as: Ullio Gamboa, G.V., PenseL, P.E., Elissondo, Marí.C., Sanchez Bruni, S.F., Benoit, J.-P., Palma, S.D., Allemandi, D.A., Albendazole-lipid nanocapsules: Optimization, characterization and chemoprophylactic efficacy in mice infected with *Echinococcus granulosus*, *Experimental Parasitology* (2019), doi: <https://doi.org/10.1016/j.exppara.2019.02.002>.

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.



ACCEPTED

Albendazole-lipid nanocapsules: optimization, characterization and chemoprophylactic efficacy in mice infected with *Echinococcus granulosus*

ABSTRACT

Cystic echinococcosis (CE), which is caused by during the metacestode larval stage of *Echinococcus granulosus*, is a life-threatening disease and is very difficult to treat. At present, the FDA-approved antihelmintic drugs are mebendazole (MBZ), albendazole (ABZ) and its principal metabolite ABZ sulfoxide (ABZSO), but as these have with a therapeutic efficacy over 50%, underlining the need for new drug delivery systems. The aim of this work was the optimization and characterization of to ~~optimised and fully characterizes the~~ previously developed ABZ lipid nanocapsules (ABZ-LNCs) ~~previously developed~~ and evaluate their efficacy in mice infected with *E. granulosus* ~~the murine model of CE~~. LNCs were prepared by the phase inversion technique and characterized in terms of size, surface charge, drug loading, and *in vitro* stability followed by an *in vivo* proof-of-concept ~~performed in using a CE murine model~~ murine model infected with *E. granulosus*. Stable particles dispersions with a narrow size distribution and high efficiency of encapsulation ($\geq 90\%$) were obtained. ABZ-LNCs showed a greater chemoprophylactic efficacy than ABZ suspension administered by the oral route ~~since~~ as 4 out of the 10 ABZ-LNCs treated mice did not develop any cysts, whereas the infection progressed in all mice from the ABZ suspension group. Regarding the ultrastructural studies of cysts, mice treated with ABZ-LNCs or ABZ suspension revealed changes in the germinal layer. However, the extent of the damage appeared to be greater after ABZ-LNCs administration compared to the suspension treatment. These results suggested that ABZ-LNCs ~~are~~ could be a promising novel candidate for ABZ delivery to treat CE.

Keywords

Albendazole; Chemoprophylactic efficacy; Cystic echinococcosis; Drug delivery; Lipid nanocapsules.

26

27 **1. INTRODUCTION**

28 Cystic echinococcosis (CE), a zoonosis caused by the larval stage of *Echinococcus*
29 *granulosus*, is characterized by the long-term growth of cysts in humans and mammalian
30 intermediate hosts (McManus et al., 2012). This is a chronic and complex parasitic infection ~~is a~~
31 ~~chronic, complex,~~ and still neglected disease (Brunetti and Junghanss, 2009). Currently, four
32 treatment approaches are used ~~in use~~: surgery, PAIR (puncture, aspiration, injection of
33 protoscolicidal agent and reaspiration), chemotherapy with benzimidazoles (BZ), and watching and
34 waiting for the appearance of inactive, clinically silent cysts (Stojkovic et al. 2009). Albendazole
35 (ABZ) and mebendazole (MBZ) are the BZ commonly indicated for inoperable patients with
36 multiple cysts in two or more organs and, also for the prevention of secondary echinococcosis after
37 surgery (Pawłowski et al., 2001). According to WHO recommendations, ABZ should be
38 administered in daily doses of 10-15 mg/kg of body weight taken in two divided doses post-
39 prandially for 3-6 months (WHO Informal Working Group on Echinococcosis, 2001). Nevertheless,
40 approximately only one-third of patient's experiences complete remission or cure, with ~~and~~ 30-50%
41 of treated patients developing some evidence of a therapeutic response (Moro and Schantz, 2009).
42 Despite this questionable efficacy, ABZ remains the best treatment option for inoperable human
43 cases, and is the drug of choice for perioperative prophylaxis due to the lack of alternative drugs
44 against hydatid cysts.

45 Regarding the oral route, the low aqueous solubility coupled ~~to~~ with the slow dissolution rate
46 of ABZ ~~generally~~ leads to a poor and erratic absorption from the gastro-intestinal tract. (Alanazi et
47 al. 2007; Martinez-Marcos et al. 2016; Castro et al. 2010). Thus, several options are currently being
48 explored in order to overcome these drawbacks ~~improve ABZ solubility~~. One ~~A~~ viable strategy is the
49 choice of a dissolution medium that allow the ionization of this molecule ~~in acidic medium since the~~
50 ~~drug is basic in nature~~ but this solubility enhancement is not enough for preparing formulations
51 containing the required ~~high~~ ABZ concentration (Garcia et al. 2003). Another alternative is the use of

52 surfactants, such as polysorbate and bile salts (del Estal et al. 1994; Torrado et al. 1996). However,
53 the detergents properties of these formulations are associated with irritation of the digestive mucosa.
54 Similarly, the complexation with cyclodextrins (Pradines et al., 2014) or co-grinding ABZ with
55 various excipients (Pluronic 188[®], lactose monohydrate, corn starch, polyvinylpyrrolidone,
56 hydroxypropylmethyl cellulose and sodium lauryl sulphate) using jet-milling and solid dispersion
57 techniques (Castro et al., 2012; Vogt et al., 2008) were also tested without any clear benefits being
58 found.

59 ~~In relation~~ With respect to CE, ~~it is important to highlight that~~ the success of the post-surgical
60 chemoprophylactic treatment is based upon the capacity of ABZ to ~~operate on~~ inhibit the
61 protoscoleces in order to avoid their establishment and the development ~~to~~ of cysts. Therefore, the
62 development of novel formulations ~~that facilitate the controlled~~ able to control the drug release ~~of~~
63 ~~the drug~~ to the target site is ~~still now a~~ an ongoing challenge. Nanotechnology-based delivery
64 systems have emerged as promising alternatives ~~to~~ for improving the therapeutic efficiency of ABZ
65 ~~based on its~~ by selective targeting and a tunable delivery rate, although their *in vivo* effectiveness has
66 ~~was~~ not been extensively studied (Kang et al., 2015; Liu et al., 2013; Mukherjee and Plakogiannis,
67 2010; Press, 2010). Among these, lipid nanoparticles were developed ~~according to~~ using a phase
68 inversion process that leads ~~follows~~ the formation of an oil/water microemulsion containing an oily
69 fatty phase, surrounded by a rigid tensioactive shell (Heurtault et al. 2002). These particles ~~are~~ were
70 synthesized without the use of an organic solvent with a narrow size distribution ~~which could be~~
71 ~~adjusted through precise modifications in pharmaceutically acceptable excipient proportions~~
72 (Hirsjärvi et al., 2013; Huynh et al., 2009). Previously, it ~~has been~~ was shown that orally-
73 administered LNCs can permeate through the mucus, increase drug absorption by the epithelial
74 tissue, and finally, increase drug bioavailability (Roger et al., 2009a, 2009b, 2017). Concerning the
75 CE, ABZ loaded LNCs were reported to improved the bioavaibility of ABZ in the plasma and cysts
76 ~~in~~ of infected mice, ~~wich and this~~ was correlated with an increased clinical efficacy of the drug

77 (Pensel et al., 2015). Taking into account these above findings ~~considerations~~, this study was
78 conducted in order to optimized ABZ loaded LNCs and to characterized them in terms of size,
79 surface potential, encapsulation efficiency, and *in vitro* drug stability. The chemoprophylactic
80 efficacy of this formulation was then evaluated in mice infected with *E. granulosus*.

81 2. MATERIALS AND METHODS

82 2.1. Materials

83 ABZ powder was purchased ~~to~~ from Parafarm (Buenos Aires, Argentina) and Captex 8000[®]
84 (tricaprylin) was supplied by Abitec Corp. (Columbus, Ohio, USA). The lipophilic Labrafac[®] WL
85 1349 (caprylic-capric acid triglycerides; European Pharmacopeia, IVth, 2002) and Transcutol HP[®]
86 (diethylene glycol monoethyl ether) were kindly provided by Gattefossé S.A.S (Saint-Priest, France).
87 Lipoid[®] S75-3 (soybean lecithin ~~at~~ with 70% of phosphatidylcholine and 10% of
88 phosphatidylethanolamine) and Koliphor[®] HS-15 (mixture of free polyethylene glycol 660 and
89 polyethylene glycol 660 hydroxystearate) were gifts from Lipoid GmbH (Ludwigshafen, Germany)
90 and BASF (Ludwigshafen, Germany), respectively. Due to the complex composition of each
91 product, the brand names will be used from here on ~~in the following text~~. NaCl was purchased from
92 the Cicarelli lab (Buenos Aires, Argentina), and oleic acid (OA), monobasic ammonium phosphate,
93 polysorbate 80 (Tween 80[®]) and Carboxymethylcellulose (CMC)–were purchased from Sintorgan
94 (Buenos Aires, Argentina). Porcine pepsin and pancreatin (reagent grade) enzymes ~~were American~~
95 ~~Chemical Society (ACS) and~~ were bought from Sigma (St. Louis, MO, USA). Purified water was
96 obtained from MilliQ System (Biopore, Buenos Aires, Argentina). All other chemical reagents were
97 of HPLC-grade and acquired from Sintorgan, Argentina.

98

99 2.2. LNCs formulations

100 The LNCs were prepared according to a ~~the~~ process described by Heurtault et al., 2002
101 ~~including~~ with a few modifications. Firstly, ABZ was solubilised in OA (25 mg/g). Then, 0.8 g of the

102 oily matrix (Labrafac[®], Captex[®] 8000 or a mix of them) was added, and the mixture was heated at 80
103 °C for 5 min. After cooling, Lipoid[®] S75-3 (0.075g), Kolliphor[®] HS-15 (0.846g), NaCl (0.089g) and
104 water (2.96 g) were added and homogenized under magnetic stirring. Three cycles of progressive
105 heating and cooling between 60-85°C were carried out and which was followed by an irreversible
106 shock induced by dilution with through the addition of deionised water (12.5 g) added to the mixture
107 at 75 °C. Afterwards, a slow magnetic stirring was applied to the suspension of LNCs for 5 min at
108 room temperature. The final concentration of ABZ was 0.29 mg/g.

109 **2.3. Particle size and zeta potential (ZP) measurements**

110 The particle size, based on a volume distribution values, (D90), the polydispersity index (PI),
111 and zeta (ζ) potential were determined by dynamic light scattering (DLS) on a DelsaNano-C
112 instrument (Beckman Coulter, Osaka, Japan) fitted with a 488-nm laser beam at a fixed angle (90°)
113 at 25°C with using DelsaNano 2.20 (Beckman Coulter, Osaka, Japan) instrument software. All
114 measurements were performed in triplicate and nanocapsules were diluted 1:20 (v/v) in with
115 deionised water.

116 **2.4. Scanning electron microscopy (SEM)**

117
118 The morphological structures of LNCs were investigated using a the scanning electron
119 microscope LEO Model EVO 40XVP (Göttingen, Germany). The nanoparticle suspensions were
120 diluted (1:400) in distilled water and fixed on a brass stub using a double-sided aluminium tape. To
121 improve the conductivity, samples were gold-coated under vacuum by employing a sputter coater
122 PELCO Model 3.

123 **2.5. LNCs drug payload and encapsulation efficiency**

124
125 After formulation, LNCs were filtered using a Minisart[®] 0.2 μ m filter (Vivascience AG,
126 Hanovre, Germany) in order to eliminate not unencapsulated ABZ crystals, and samples were
127 prepared by dissolving an exact quantity of these filtered LNCs in methanol. The ABZ concentration

128 was measured by liquid chromatography (HPLC) in triplicate experiments. A Waters HPLC 1525
129 pump with a Waters 717 plus autosampler was used, and 20 μ l aliquot of the filtrate was injected into
130 a reversed phase C18 column (250 \times 4.6mm i.d., 5 μ m particle size, Luna, Phenomenex[®]). The oven
131 temperature was maintained at 40 °C using a Waters column heater 1500 series. The assay analysis
132 was performed with 0.01M monobasic ammonium phosphate and methanol (40:60) as mobile phase,
133 at a flow rate of 1.3 ml/min. Eluting fractions were revealed with a PDA UV detector 2296 (lambda
134 295 nm). The mean \pm SD drug content was calculated (mg of ABZ/g LNCs dispersion)- and the
135 efficiency of encapsulation (EE%) was determined by dividing the experimental by the theoretical
136 drug loading.

137

138 **2.6. Storage stability studies**

139 The stability of ABZ-loaded LNCs dispersion was evaluated after storage at 4-8 °C for 2
140 months- and the particle size distribution and drug loading were determined as previously described
141 above.

142

143 **2.7. Stability of the nanocapsules in simulated gastrointestinal fluids**

144 As these nanostructures were developed as carriers intended for oral administration of ABZ,
145 ~~thus~~ we evaluated their stability in the gastrointestinal fluids. An aliquot (50 μ l) of ABZ-LNCs (0.29
146 mg/g) ~~were~~ was placed in a glass tube in triplicate and incubated at 37 °C under moderate stirring
147 (100 rpm), either in 2.95 ml of simulated gastric medium (USP XXVII, pH=1.2, pepsin 0.32% w/v)
148 ~~and~~ or in simulated intestinal medium (USP XXVII, pH=6.8, pancreatin 1% w/v). Samples from
149 each tube were collected at a predetermined incubation time and centrifuged for 5 min at 5000 g in
150 order to precipitate the enzymes. Then, the mean particle size of the remaining non-aggregated
151 nanocapsules was determined by DLS. In order to check the ABZ loading, the samples were filtered
152 after incubation using a Minisart[®] 0.2 μ m filter (Sartorius, Goettingen, Germany) to remove free

153 precipitated ABZ, and the drug payload was determined by HPLC in triplicate as it was described in
154 section 2.5.

155 **2.8. Animal studies**

156 Animal procedures and management protocols were approved by the Institutional Animal
157 Care and Use Committee (RD RD 148/15) of the Faculty of Exact and Natural Sciences, National
158 University of Mar del Plata (Mar del Plata, Argentina), and carried out in accordance with the 2011
159 revised form of The Guide for the Care and Use of Laboratory Animals published by the U.S.
160 National Institutes of Health. Any unnecessary animal suffering was avoided throughout the study.
161 Female CF-1 mice (n=40; body weight 25±5g) were infected by intraperitoneal inoculation with
162 1500 *E. granulosus* protoscoleces/animal, suspended in 0.5 ml of medium 199 (Gibco, Thermo
163 Fisher Scientific, Argentina). The animals were housed in a temperature-controlled (22 ± 1 °C),
164 light-cycled (12-hour light/dark cycle) room. Food and water were given *ad libitum*.

166 **2.8.1. Protoscoleces collection**

167 Protoscoleces of *E. granulosus* were collected aseptically from liver and lung hydatid cysts of
168 infected cattle slaughtered in an abattoir located in the southeast of Buenos Aires, Argentina.
169 Viability was assessed by the methylene blue exclusion test (Elisondo et al., 2007).

171 **2.8.2. ABZ formulations**

172 Suspensions were prepared in 100 ml of purified water with the required amount of
173 suspending agent (CMC) and kept overnight for proper hydration. This solution was used as vehicle
174 in the preparation of the suspensions. An accurately weighed quantity of ABZ was distributed in the
175 vehicle, and Tween 80[®] was added and mixed gently for 30 min. The ABZ suspension (0.29 mg/g)
176 was vigorously shaken before its intragastric administration to mice. The ABZ-LNCs were prepared
177 as described above at an equal concentration.

178 **2.8.3. Chemoprophylactic efficacy study**

179 Twenty-four hours after the infection, CF-1 mice were allocated into four experimental
180 groups (10 animals/group) and treated as follows: a) Control group, animals receiving distilled water
181 as placebo; b) Control LNCs group, animals receiving blank LNCs; c) ABZ suspension treated
182 group; d) ABZ-LNCs treated group. The treatment was performed daily for 30 days by intragastric
183 administration (0.55 ml/animal) at a dose rate of 5 mg/kg. Six months after infection, mice were
184 euthanized, and necropsy was carried out immediately thereafter.

186 **2.8.4. Determination of parasite weight and efficacy rate of treatments**

187 At necropsy, the peritoneal cavity was opened, and the cysts were carefully removed. With
188 The weight of the cysts collected from each individual animal was being recorded using an analytical
189 scale. The efficacy of treatments, based on the weight of the cysts from infected mice, was calculated
190 using the following formula: (mean cysts weight of control group - mean cysts weight of treated
191 group)/ (mean cysts weight of control group) x 100.

193 **2.8.5. Morphological study**

194 Samples of cysts recovered from each mouse were processed by SEM as described elsewhere
195 (Elissondo et al., 2007).

197 **Statistical analysis**

198 Cysts weights (mean \pm SD) were compared by means of the Kruskal–Wallis (non parametric
199 ANOVA) test followed by Dunn's multiple comparison test: with a value of $P < 0.05$ was being
200 considered to be statistically significant. The statistical analysis was performed using the Instat 3.0
201 software program (GraphPad Software, San Diego, CA).

202

3. RESULTS

3.1. Development and formulation set-up

The first goal in the formulation process was to find out the most convenient core material able to solubilise a sufficient amount of ABZ. As this drug is sparingly soluble in water and in the most common organic solvents (Torrado et al., 1996). ~~Preliminarily,~~ The solubility of ABZ in HCl 0.1 M and further encapsulation into the oily inner phase were evaluated since this strategy was reported as being successful for another hydrophobic drug (Roger et al., 2011). However, in our study ~~this case,~~ drug loading and EE% were low and were considered ~~not~~ unacceptable for further applications. ~~Alternatively, ABZ could be solubilised in~~ Thus, co-surfactants and oils were tested but ~~added to the preparation. Results of this study showed that among the oils and co-surfactants tested~~ only OA and Transcutol HP[®] were able to solubilise ABZ.

It is important to highlight that the thermodynamic stability of LNCs is strongly dependent on the nature of the lipid material utilised as the core. Therefore, ~~the next step was to~~ we evaluated the combination of the lipids ~~such as~~ Labrafac[®] or Captex[®] 8000 and the co-surfactants OA and Transcutol HP[®]. Regarding the latter co-surfactant, ~~last one,~~ as only a small quantity of this excipient (≤ 0.10 g/g lipid) combined with Labrafac[®] allowed the production of stable LNCs formulation consequently, this excipient was discarded. In the case of OA, the maximal amount which leads to LNCs suspension with acceptable physical properties was estimated in 0.25 g/g lipid. Next, in order to evaluate the efficiency of this material as an ABZ solubiliser, three batches of LNCs (A, B, and C; n=3) were manufactured using Labrafac[®], Captex[®] 8000 and a mixture Labrafac[®]/Captex[®] 8000 (50/50) respectively as the lipid core and then ~~mixing~~ each one was mixed with OA. Their physical properties were determined and are listed in Table 1. A blank LNCs suspension using Captex[®] 8000 and OA as the lipid core was included as a reference.

[Table 1]

227 ~~We obtained~~ A monodisperse suspension (PI < 0.2) was obtained with a mean particle size
228 ranging from 47-56 nm and with a negative zeta potential in all batches. Nevertheless, ~~only in Captex~~
229 ~~8000[®] formulations~~ the EE% of ABZ was higher than 90% only in Captex 8000[®] formulations
230 (batch B, table 1). Moreover, as these physical-chemical features were stable for at least for 1 month;
231 ~~consequently~~, the composition of batch B was selected for further studies.

232

233 3.2. Morphology of ABZ-LNCs

234 SEM was used to characterise the morphology of the optimised nanoparticles. ~~According to~~
235 In Fig. 1.a and 1.b, the observed diameter slightly differed from the values of the DLS
236 determinations since the LNCs flattened during the drying stage of the ~~in~~ sample preparation, ~~This~~
237 ~~observation~~ which seems to be frequently occur in the study of LNCs by means of this technique
238 (Lamprecht et al., 2004). The SEM images in Fig. 1.b also ~~showed~~ reveal the homogeneity of the
239 LNCs, although a few large particles of higher size can be observed.

240 [Figures 1.a and 1.b]

241 3.3. Storage stability

242 Particle stability of ~~particles~~ was assessed for 2 months by storing three batches of the
243 obtained suspensions at 4-8 °C. As shown in Table 2, the ABZ loaded in LNCs were physically
244 stable for at least for 2 months and with no significant changes in mean particle size and or ZP were
245 being observed. For all formulations, the PI was <0.2, which demonstrates the monodispersity of the
246 preparations and the with the EE% of ABZ was being higher than 90%. The drug payload (~0.29
247 mg/g) remained constant and there were no significant differences between the evaluated batches
248 ($P < 0.05$).

249 [Table 2]

250 3.4. *In vitro* stability in simulated gastrointestinal fluids

251 ~~In view of an oral administration of this formulation,~~ Considering that this formulation has to
252 be administered orally, *in vitro* stability studies ~~in~~ on different simulated gastrointestinal fluids were
253 first performed. In the gastric medium, which was characterized by a pH of 1.2 and the presence of a
254 digestive protease (pepsin), a release of about 7% of the initial amount of encapsulated ABZ was
255 measured after 3 h (Fig. 2). Then, the stability of ABZ-LNCs was assayed in simulated intestinal
256 fluid media. As ~~it was seen~~ occurred before, ABZ remained encapsulated in the LNCs after 3 h of
257 incubation (with less than 10% ~~was~~ being released). Also, the size and PI of the nanocarriers were
258 monitored after incubation in these media (Fig. 3.a and 3.b). The slightly increase in size observed
259 for the nanocapsules in the first medium was attributed to the presence of pepsin, since the system
260 maintained its particle size in the absence of enzymes (data no shown). Regarding the incubation in
261 simulated intestinal fluids, it is important to point out that the inclusion of pancreatin, as
262 recommended by different pharmacopoeias, may have an unpredictable effect ~~over~~ on the lipid
263 matrix of LNCs ~~since~~ as it is constituted by several enzymes such as amylase, lipase and protease
264 which present diverse functions and catalytic sites (Prego et al., 2006). Nevertheless, because no
265 further degradation was observed, ~~and~~ it seems that the chemical composition of these nanocapsules
266 contributed to the stability of the systems in ~~these~~ this medium. We hypothesize that the shell
267 composed of the association of free PEG and HS-PEG (Kolliphor[®] HS-15) in ~~their~~ its outer structure
268 attached to the oily core improved the stability of the nanosuspension, which otherwise aggregated
269 massively upon dilution in the incubation medium.

270 **[Figure 2, 3.a and 3.b]**

271 **3.5. Chemoprophylactic efficacy study**

272 All the infected mice (10/10) from the control groups and ABZ-treated group developed
273 hydatidic cysts in the abdominal cavity, whereas ~~in 4 out of the 10 ABZ-LNCs treated mice~~ the
274 infection did not progress in 4 out of the 10 ABZ-LNCs treated mice. A deleterious drug effect on *E.*
275 *granulosus* protoscoleces at the time of infection may help to explain the lack of cyst development

276 observed in some animals of the ABZ-LNCs treated groups. The differences in cyst weight among
277 experimental groups, showing the intragroup variability, are presented in Fig. 4. There ~~was~~ were no
278 statistically significant differences ($P>0.05$) between the mean cysts weights of the control groups
279 (distilled water = 4.38 ± 3.39 g; blank LNCs = 4.22 ± 2.51 g). On the other hand, significant differences
280 ($P<0.005$) were observed in the weight of the cysts recovered from untreated mice compared to that
281 obtained from ABZ suspension (1.27 ± 0.60 g) and ABZ-LNCs (0.25 ± 0.24 g) treatments.
282 Interestingly, mice receiving ABZ-LNCs exhibited a higher reduction ($P<0.05$) in the weight of the
283 cysts compared to ABZ suspension treated mice.

284 **[Figure 4]**

285 Fig. 5 shows the ultrastructural appearance of the germinal layer after an SEM analysis of
286 cysts recovered from infected mice. All cysts in the samples removed from control mice appeared
287 turgid, showing no observable collapse of the germinal layer and no change in ultrastructure ~~was~~
288 ~~detected~~. In contrast, all the cysts developed in mice treated with ABZ-LNCs or ABZ suspension
289 revealed changes in the germinal layer. ~~A~~ with a reduced number of germinal cells ~~were~~ being
290 detected in cysts recovered from the ABZ suspension-treated group (Fig. 5.b). The damage extension
291 appeared to be greater after ABZ-LNCs. The germinal layer was extensively distorted, ~~where only~~
292 ~~debris of cells treatment~~, as only cell debris could be observed (Fig. 5.c).

293

294 **[Figure 5]**

295 DISCUSSION

296 CE is a neglected disease, especially in developing countries, ~~with~~ which has had an
297 increasing economic impact due to the need for lifelong treatments (Narra et al., 2016). ~~The~~ Radical
298 resection of the cyst mass represents the traditional treatment strategy, ~~and is, in many instances,~~

299 accompanied in many cases by chemotherapy. For inoperable cases, ABZ is considered to be a
300 cornerstone pharmacological treatment.

301 ~~Nevertheless,~~ Hydrophobicity is an important physicochemical parameter of ~~this~~ drugs which
302 determines the rate and degree of absorption. In the case of ABZ, its slow dissolution rate limits ~~thus~~
303 ~~limiting~~ the production of highly potent ABZ formulations (Teggi, 2004). ~~Nanodrug delivery~~
304 ~~systems have been widely reviewed for their use in several formulations to~~ To try to improve drug
305 bioavailability, prolonged drug release and ~~decrease~~ minimize side effects of many drug candidates
306 (Allam et al., 2017), nanosized drug delivery systems have been widely reviewed for different
307 formulations. Regarding this, particle size and size distribution seems to be ~~one~~ two of the most
308 important characteristics related to ~~their~~ biodistribution properties. Indeed, the key feature is ~~its~~ an
309 enlarged surface area, which ~~allows~~ improves dispersion in aqueous environments and leads to a
310 faster saturation in the dissolution layer around the particles with a consequent increase in dissolution
311 velocity (Murdande et al., 2015). Different strategies have been developed in order to improve ABZ
312 water solubility and its dissolution rate, such as preparation of a self-microemulsifying drug delivery
313 system (Mukherjee and Plakogiannis, 2010), its incorporation into liposomes (Lv et al., 2013;
314 Panwar et al., 2010) and its complexation with cyclodextrins (García et al., 2014; Pradines et al.,
315 2014). ~~Alternatively~~ In addition, ABZ solubility has been improved by preparing hot-melt extrusion
316 formulations with polyvinylpyrrolidone (Hengsawas Surasarang et al., 2016; Martinez-Marcos et al.,
317 2016) and solid lipid nanoparticles (Ahmadnia et al., 2013). ~~Although the~~ However, preparation
318 methods which included the use of rotatory evaporators and organic solvents, as well as high
319 ~~quantity/~~ concentrations of complexing agents are limiting factors in the application of these
320 formulations.

321 LNCs are nanocarriers produced by a simple phase temperature inversion process without the
322 use of organic solvents and are able to entrap many hydrophobic drugs such as ABZ. The structure of
323 this vector is unique, and it is composed of an oily core, in which the drug is solubilised, and

324 surrounded by a shell ~~composed~~ made of lecithin and polyethylene-glycol chains (Anton and
325 Saulnier, 2013; Anton et al., 2007; Huynh et al., 2009). In the present study ~~this work~~, we have fully
326 characterised the ABZ-LNCs formulations previously described (Pensel et al., 2015). ~~We achieved~~
327 and attained the encapsulation of ABZ (EE% $\geq 90\%$) in a stable LNCs formulation with a mean
328 particle size around 50 nm and an acceptable PI which demonstrates the monodispersity of this
329 preparation.

330 Concerning the administration of nanoparticles by the oral route, several biopharmaceutical
331 parameters should be considered in order to obtain a good efficacy/safety ratio. The first barrier to
332 overcome after oral administration is ~~constituted by~~ the physicochemical environment of the
333 gastrointestinal tract. It is known that nanoparticles are susceptible to aggregation in media with a
334 high ionic strength, extreme pH or high enzyme/protein content, and thus, the surface composition of
335 the nanocarrier plays an important role in its stability (Prego et al., 2006). In this study, we
336 demonstrated the stability of these nanocapsules in both ~~either~~ the gastric and intestinal media. The
337 positive effect of the Kolliphor[®] HS-15 coating used, ~~consisted on~~ was in reducing the number of
338 interactions of particles with the digestive enzymes and this is in ~~accordance~~ agreement with the
339 PEG stabilizing effects previously reported by Tobio et al., 2000. Moreover, the stability study (Fig.
340 2) also revealed no burst release of ABZ loaded LNCs, so that the drug transport out of the LNCs
341 ~~would be~~ may have been driven mainly by a diffusion-controlled mechanism (Roger et al., 2017). In
342 consequence, ABZ ~~could be~~ was released for a prolonged period of time from these nanocapsules
343 ~~means~~ implying a longer residence time in systemic circulation, which ~~could~~ consequently can
344 improve the delivery to target tissues.

345 In a previous ~~work~~ study, we characterized the plasma and cyst drug exposure after the
346 administration of ABZ loaded LNCs in mice infected with *E. granulosus* (Pensel et al., 2015). More
347 enhanced albendazole sulfoxide (ABZSO) concentration profiles were obtained in plasma and cysts
348 from ABZ-LNCs orally and subcutaneously treated animals ~~both orally and subcutaneously~~,

349 compared to those observed after oral administration of ABZ suspension. Additionally, the
350 ABZSO concentrations measured in cysts from ABZ-LNCs-treated mice were 1.7-fold higher than
351 those detected in plasma, ~~with~~ with this capacity of LNCs to increase oral bioavailability of ABZ
352 ~~could be possibly~~ being explained in part, by the gastrointestinal stability of the particles ~~reveled~~
353 observed in this investigation.

354 ~~In the present work~~ The chemoprophylactic efficacy of our formulation was evaluated in our
355 study by ~~the study~~ ~~simulating~~ a cyst rupture during surgical practice and the concomitant drug
356 treatment. ~~Indeed,~~ This is the first report of nanoparticles loaded with ABZ ~~which~~ improving the
357 chemoprophylactic efficacy of the drug in mice infected with *E. granulosus*. Interestingly, ABZ
358 loaded in LNCs ~~have~~ produced a greater preventive effect than ABZ alone, since ~~not only~~ this
359 reduced not only the number of developed cysts, but may also have inhibited the development of
360 hydatid cysts in mice.

361 Metacestodes are fluid-filled vesicles that are separated into: (i) an inner germinal layer
362 representing the living and metabolically active parasite tissue, and (ii) an outer, acellular
363 compartment known as the laminated layer, which mediates the direct physical contact with the host
364 immune and non-immune cells (Shuhua et al., 2002). As ~~it is seen~~ can be observed in figure 5 ~~6~~, only
365 cells debris ~~of cells could be observed for~~ was present in ABZ-LNCs treatments with a marked
366 alteration in the germinal layer ~~with internal tissue extensively distorted, internal tissue, vacuolated~~
367 ~~areas and the presence of lamellar bodies. Altogether~~ The improved ~~in the~~ therapeutic efficacy of
368 ABZ-LNCs ~~previously demonstrated~~ could be due to ~~the~~ an increased oral bioavailability of ABZ
369 due to the enhancement of its permeability across the intestine and/or a decrease of the intestinal
370 metabolism. However, more specific studies should be performed to get more detailed information
371 on the host-parasite interactions that occur during drug treatments.

372 5. Conclusion

373 In conclusion, this study reports on the characterisation of a novel carrier based on the
374 incorporation of an antiparasitic drug into LNCs and describes their potential use as in CE treatment
375 ~~was reported~~. These nanocarriers exhibited ~~attractive~~ adequate properties in terms of size, drug
376 payload and physicochemical stability which make them an interesting alternative for the oral
377 delivery of ABZ. In addition, ABZ-LNCs ~~showed~~ revealed a higher chemoprophylactic efficacy in
378 comparison to ABZ suspension administered by the oral route. Our results ~~complement and reinforce~~
379 are in agreement with the clinical efficacy, ~~and the~~ observed in previous pharmacokinetics studies
380 ~~reported before in order to elucidate~~ concerning the mechanism of action of this carrier and its
381 potential use as a drug delivery system for CE treatment in humans.

382

383 CONFLICT OF INTEREST STATEMENT

384 The authors have declared that no conflict of interest exists

385

386 ACKNOWLEDGEMENTS

387 Gabriela Ullio Gamboa thanks the Consejo Nacional de Investigaciones Científicas y
388 Técnicas (CONICET) for support. The authors gratefully acknowledge Dr. Melendez and Dr.
389 Sebastián González (SENASA, Argentina). We thank Dr. Paul Hobson, native speaker, for revision
390 of the manuscript.

391

392 FINANCIAL SUPPORT

393 This work was supported by SECyT-UNC (D.A., grant number Res. 162/12), CONICET
394 (D.A., grant PID number 11220090100673), ANPCyT-Argentina (PICT 12 N°1164 and PICT 15
395 No. 0717) and Universidad Nacional de Mar del Plata (EXA 769/16), Argentina.

396

397 REFERENCES

- 398 Ahmadnia, S., Moazeni, M., Mohammadi-Samani, S., Oryan, A., 2013. In vivo evaluation of the
399 efficacy of albendazole sulfoxide and albendazole sulfoxide loaded solid lipid nanoparticles
400 against hydatid cyst. *Exp. Parasitol.* 135, 314–319. doi:10.1016/j.exppara.2013.07.017
- 401 Alanazi, F.K., El-Badry, M., Ahmed, M.O., Alsarra, I.A., 2007. Improvement of albendazole
402 dissolution by preparing microparticles using spray-drying technique. *Sci. Pharm.* 75, 63–79.
403 doi:10.3797/scipharm.2007.75.63
- 404 Allam, A.N., Hamdallah, S.I., Abdallah, O.Y., 2017. Chitosan-coated diacerein nanosuspensions as a
405 platform for enhancing bioavailability and lowering side effects: Preparation, characterization,
406 and ex vivo/in vivo evaluation. *Int. J. Nanomedicine* 12, 4733–4745. doi:10.2147/IJN.S139706
- 407 Anton, N., Gayet, P., Benoit, J.P., Saulnier, P., 2007. Nano-emulsions and nanocapsules by the PIT
408 method: An investigation on the role of the temperature cycling on the emulsion phase
409 inversion. *Int. J. Pharm.* 344, 44–52. doi:10.1016/j.ijpharm.2007.04.027
- 410 Anton, N., Saulnier, P., 2013. Adhesive water-in-oil nano-emulsions generated by the phase
411 inversion temperature method. *Soft Matter* 9, 6465. doi:10.1039/c3sm51064f
- 412 Brunetti, E., Junghanss, T., 2009. Update on cystic hydatid disease. *Curr. Opin. Infect. Dis.* 22, 497–
413 502. doi:10.1097/QCO.0b013e328330331c
- 414 Castro, S.G., Bruni, S.S., Lanusse, C.E., Allemandi, D. a, Palma, S.D., 2010. Improved albendazole
415 dissolution rate in pluronic 188 solid dispersions. *AAPS PharmSciTech* 11, 1518–25.
416 doi:10.1208/s12249-010-9517-6
- 417 Castro, S.G., Sanchez Bruni, S.F., Urbizu, L.P., Confalonieri, A., Ceballos, L., Lanusse, C.E.,
418 Allemandi, D. a, Palma, S.D., 2012. Enhanced dissolution and systemic availability of
419 albendazole formulated as solid dispersions. *Pharm. Dev. Technol.* 18, 1–9.
420 doi:10.3109/10837450.2012.693509
- 421 del Estal, J.L., Alvarez, A.I., Villaverde, C., Justel, A., Prieto, J.G., 1994. Increased systemic
422 bioavailability of albendazol when administered with surfactants in rats. *Int. J. Pharm.* 102,

- 423 257–260. doi:10.1016/0378-5173(94)90063-9
- 424 Elissondo, M., Ceballos, L., Dopchiz, M., Andresiuk, V., Alvarez, L., Sánchez Bruni, S., Lanusse,
425 C., Denegri, G., 2007. In vitro and in vivo effects of flubendazole on *Echinococcus granulosus*
426 metacestodes. *Parasitol. Res.* 100, 1003–1009. doi:10.1007/s00436-006-0381-y
- 427 Garcia, J.J., Bols, F., Torrado, J.J., 2003. Bioavailability and efficacy characteristics of two different
428 oral liquid formulations of albendazole. *Int. J. Pharm.* 250, 351–358. doi:10.1016/S0378-
429 5173(02)00559-8
- 430 García, A., Leonardi, D., Salazar, M.O., Lamas, M.C., 2014. Modified β -cyclodextrin inclusion
431 complex to improve the physicochemical properties of albendazole. Complete in vitro
432 evaluation and characterization. *PLoS One* 9. doi:10.1371/journal.pone.0088234
- 433 Hengsawas Surasarang, S., Keen, J.M., Huang, S., Zhang, F., McGinity, J.W., Williams, R.O., 2016.
434 Hot melt extrusion versus spray drying: hot melt extrusion degrades albendazole. *Drug Dev.*
435 *Ind. Pharm.* 9045, 1–15. doi:10.1080/03639045.2016.1220577
- 436 Heurtault, B., Saulnier, P., Pech, B., Proust, J.E., Benoit, J.P., 2002. A novel phase inversion-based
437 process for the preparation of lipid nanocarriers. *Pharm. Res.* 19, 875–880.
438 doi:10.1023/A:1016121319668
- 439 Hirsjärvi, S., Dufort, S., Gravier, J., Texier, I., Yan, Q., Bibette, J., Sancey, L., Josserand, V.,
440 Passirani, C., Benoit, J.P., Coll, J.L., 2013. Influence of size, surface coating and fine chemical
441 composition on the in vitro reactivity and in vivo biodistribution of lipid nanocapsules versus
442 lipid nanoemulsions in cancer models. *Nanomedicine Nanotechnology, Biol. Med.* 9, 375–387.
443 doi:10.1016/j.nano.2012.08.005
- 444 Huynh, N.T., Passirani, C., Saulnier, P., Benoit, J.P., 2009. Lipid nanocapsules: A new platform for
445 nanomedicine. *Int. J. Pharm.* doi:10.1016/j.ijpharm.2009.04.026
- 446 Kang, B.S., Lee, S.E., Ng, C.L., Cho, C.W., Park, J.S., 2015. Determination of preparation
447 parameters for albendazole-loaded nanoparticles using chitosan and tripolyphosphate. *J. Pharm.*

- 448 Investig. 45, 265–269. doi:10.1007/s40005-015-0171-6
- 449 Lamprecht, A., Saumet, J.L., Roux, J., Benoit, J.P., 2004. Lipid nanocarriers as drug delivery system
450 for ibuprofen in pain treatment. *Int. J. Pharm.* 278, 407–414. doi:10.1016/j.ijpharm.2004.03.018
- 451 Liu, Y., Wang, X.Q., Ren, W.X., Chen, Y.L., Yu, Y., Zhang, J.K., Bawudong, D., Gu, J.P., Xu,
452 X.D., Zhang, X.N., 2013. Novel albendazole-chitosan nanoparticles for intestinal absorption
453 enhancement and hepatic targeting improvement in rats. *J. Biomed. Mater. Res. - Part B Appl.*
454 *Biomater.* 101 B, 998–1005. doi:10.1002/jbm.b.32908
- 455 Lv, H., Jiang, Y., Liao, M., Sun, H., Zhang, S., Peng, X., 2013. In vitro and in vivo treatments of
456 *Echinococcus granulosus* with Huaier aqueous extract and albendazole liposome. *Parasitol. Res.*
457 112, 193–198. doi:10.1007/s00436-012-3125-1
- 458 Martinez-Marcos, L., Lamprou, D.A., McBurney, R.T., Halbert, G.W., 2016. A novel hot-melt
459 extrusion formulation of albendazole for increasing dissolution properties. *Int. J. Pharm.* 499,
460 175–185. doi:10.1016/j.ijpharm.2016.01.006
- 461 McManus, D.P., Gray, D.J., Zhang, W., Yang, Y., 2012. Diagnosis, treatment, and management of
462 echinococcosis. *BMJ Br. Med. J.* 344, e3866–e3866. doi:10.1136/bmj.e3866
- 463 Moro, P., Schantz, P.M., 2009. Echinococcosis: a review. *Int. J. Infect. Dis.*
464 doi:10.1016/j.ijid.2008.03.037
- 465 Mukherjee, T., Plakogiannis, F.M., 2010. Development and oral bioavailability assessment of a
466 supersaturated self-microemulsifying drug delivery system (SMEDDS) of albendazole. *J.*
467 *Pharm. Pharmacol.* 62, 1112–1120. doi:10.1111/j.2042-7158.2010.01149.x
- 468 Murdande, S.B., Shah, D.A., Dave, R.H., 2015. Impact of nanosizing on solubility and dissolution
469 rate of poorly soluble pharmaceuticals. *J. Pharm. Sci.* 104, 2094–2102. doi:10.1002/jps.24426
- 470 Narra, R., Maestri, M., Budke, C.M., Tamarozzi, F., Mariconti, M., Nicoletti, G.J., Rinaldi, F.,
471 Brunetti, E., 2016. Costs associated with surgically treated cases of abdominal cystic
472 echinococcosis: A single center's experience from 2008 to 2014, Pavia, Italy. *Am. J. Trop.*

- 473 Med. Hyg. 95, 405–409. doi:10.4269/ajtmh.16-0187
- 474 OMS/OIE, 2002. Manual on Echinococcosis in Humans and Animals: A Public Health Problem of
475 Global Concern, Veterinary Parasitology. doi:10.1016/S0304-4017(01)00631-8
- 476 Panwar, P., Pandey, B., Lakhera, P.C., Singh, K.P., 2010. Preparation, characterization, and in vitro
477 release study of albendazole-encapsulated nanosize liposomes. *Int. J. Nanomedicine* 5, 101–
478 108. doi:10.2147/IJN.S8030
- 479 Pawłowski, Z.S., Eckert, J., Vuitton, D.A., Ammann, R.W., Kern, P., Craig, P.S., Dar, K.F., Rosa, F.,
480 De, Filice, C., Gottstein, B., Grimm, F., Macpherson, C.N.L., Sato, N., Todorov, T., Uchino, J.,
481 Sinner, W. von, Wen, H., 2001. Echinococcosis in humans: clinical aspects, diagnosis and
482 treatment, in: WHO/OIE Manual on Echinococcosis in Humans and Animals: A Public Health
483 Problem of Global Concern. pp. 20–72. doi:10.1016/S0304-4017(01)00631-8
- 484 Pensel, P.E., Ullio, G., Fabbri, J., Ceballos, L., Sanchez, S., Alvarez, L.I., Allemandi, D., Pierre, J.,
485 Palma, S.D., Elissondo, M.C., 2015. Acta Tropica Cystic echinococcosis therapy : Albendazole-
486 loaded lipid nanocapsules enhance the oral bioavailability and efficacy in experimentally
487 infected mice. *Acta Trop.* 152, 185–194. doi:10.1016/j.actatropica.2015.09.016
- 488 Pradines, B., Gallard, J.F., Iorga, B.I., Gueutin, C., Loiseau, P.M., Ponchel, G., Bouchemal, K.,
489 2014. Investigation of the complexation of albendazole with cyclodextrins for the design of new
490 antiparasitic formulations. *Carbohydr. Res.* 398, 50–55. doi:10.1016/j.carres.2014.06.008
- 491 Prego, C., Torres, D., Fernandez-Megia, E., Novoa-Carballal, R., Quiñoá, E., Alonso, M.J., 2006.
492 Chitosan-PEG nanocapsules as new carriers for oral peptide delivery: Effect of chitosan
493 pegylation degree. *J. Control. Release* 111, 299–308. doi:10.1016/j.jconrel.2005.12.015
- 494 Press, D., 2010. Study of Albendazole-Encapsulated Nanosize Liposomes. *Int. J.* 5, 101–108.
- 495 Roger, E., Lagarce, F., Benoit, J.P., 2009a. The gastrointestinal stability of lipid nanocapsules. *Int. J.*
496 *Pharm.* 379, 260–265. doi:10.1016/j.ijpharm.2009.05.069
- 497 Roger, E., Lagarce, F., Garcion, E., Benoit, J.P., 2009b. Lipid nanocarriers improve paclitaxel

- 498 transport throughout human intestinal epithelial cells by using vesicle-mediated transcytosis. *J.*
499 *Control. Release* 140, 174–181. doi:10.1016/j.jconrel.2009.08.010
- 500 Roger, E., Lagarce, F., Benoit, J.P., 2011. Development and characterization of a novel lipid
501 nanocapsule formulation of Sn38 for oral administration. *Eur. J. Pharm. Biopharm.* 79, 181–
502 188. doi:10.1016/j.ejpb.2011.01.021
- 503 Roger, E., Gimel, J.C., Bensley, C., Klymchenko, A.S., Benoit, J.P., 2017. Lipid nanocapsules
504 maintain full integrity after crossing a human intestinal epithelium model. *J. Control. Release*
505 253, 11–18. doi:10.1016/j.jconrel.2017.03.005
- 506 Shuhua, X., Jiqing, Y., Mingjie, W., Pieying, J., Fanghua, G., Junjie, C., Wei, J., Hotez, P., 2002.
507 Augmented bioavailability and cysticidal activity of albendazole reformulated in soybean
508 emulsion in mice infected with *Echinococcus granulosus* or *Echinococcus multilocularis*. *Acta*
509 *Trop.* 82, 77–84. doi:10.1016/S0001-706X(02)00027-X
- 510 Stojkovic, M., Zwahlen, M., Teggi, A., Vutova, K., Cretu, C.M., Virdone, R., Nicolaidou, P.,
511 Cobanoglu, N., Junghans, T., 2009. Treatment response of cystic echinococcosis to
512 benzimidazoles: A systematic review. *PLoS Negl. Trop. Dis.* 3.
513 doi:10.1371/journal.pntd.0000524
- 514 Teggi, A., 2004. An up-to-date on clinical management of human cystic echinococcosis, in:
515 *Parassitologia*. pp. 405–407.
- 516 Tobío, M., Sánchez, A., Vila, A., Soriano, I., Evora, C., Vila-Jato, J., Alonso, M., 2000. The role of
517 PEG on the stability in digestive fluids and in vivo fate of PEG-PLA nanoparticles following
518 oral administration. *Colloids Surfaces B Biointerfaces* 18, 315–323. doi:10.1016/S0927-
519 7765(99)00157-5
- 520 Torrado, S., Torrado, S., Cadorniga, R., Torrado, J.J., 1996. Formulation parameters of albendazole
521 solution. *Int. J. Pharm.* 140, 45–50. doi:10.1016/0378-5173(96)04545-0
- 522 Vogt, M., Kunath, K., Dressman, J.B., 2008. Dissolution improvement of four poorly water soluble

523 drugs by cogrinding with commonly used excipients. Eur. J. Pharm. Biopharm. 68, 330–337.
524 doi:10.1016/j.ejpb.2007.05.009
525 WHO Informal Working Group on Echinococcosis, 2001. PAIR: Puncture, Aspiration, Injection, Re-
526 Aspiration. An option for the treatment of Cystic Echinococcosis.
527 WHO/CDS/CSR/APH/2001.6.
528

ACCEPTED MANUSCRIPT

Fig.1.a.b. SEM micrographs of ABZ-LNCs (from batch B in table 1).

Fig.2. Encapsulation efficiency (EE%) of ABZ in LNCs following incubation in simulated gastric fluid (SGF) and simulated intestinal fluid (SIF) with enzymes (Mean \pm SD.; n=3).

Fig.3. Stability determination of ABZ-LNCs following incubation in simulated gastric fluid (SGF) and simulated intestinal fluid (SIF) with enzymes (Mean \pm SD.; n=3). a) mean particle size, b) polydispersity index (PI).

Fig.4. Box Plot: Chemoprophylactic efficacy study. Mean (\pm SD) weights (g) of hydatid cysts recovered six months post-infection of mice from of control groups (water and blank LNCs) and treated groups (ABZ-LNCs and ABZ suspension). Treatments were given at of 5 mg/kg, every 24 h over for 30 days following infection. The different letters indicate statistically significant differences ($P<0.05$) between experimental groups.

Fig.5. Representative SEM images of hydatid cysts recovered from infected mice during the chemoprophylactic efficacy study. a) Cysts from unmedicated animals (gl: germinal layer; $\times 800$). b) Cysts recovered from mice treated with ABZ-suspension (5 mg/kg). Alteration of the germinal layer (gl) can be appreciated, where observed with only a few cells exhibiting an intact morphology ($\times 800$). c) Cysts recovered from mice treated with ABZ-LNCs (5mg/kg). The germinal layer is altered and with only cell debris of cells can be being observed ($\times 700$).

Table 1. Physical-chemical characterisation of different oil core ABZ-LNCs formulations. (Mean± SD.; n=3; PI= polydispersity index).

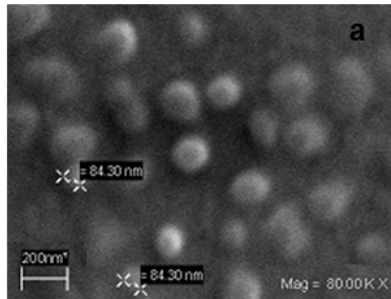
	FORMULATIONS			
	A*	B*	C*	Blank LNCs**
Size (nm)	56.2±0.2	47.9±1.1	54.2±0.9	49.56±0.74
PI	0.08	0.08	0.09	0.07
Zeta potential (mV)	-16±2	-18±3	-17±3	-17±2.4
Encapsulation efficiency (%)	77±2	97.5±1.8	75±4	-
Loading (mg/g)	0.22±0.01	0.28±0.002	0.21±0.003	-

*Lipid matrix: A) Labrafac[®] + OA; B) Captex[®]8000 +OA C) Labrafac[®]/Captex[®]8000 (50/50) + OA.

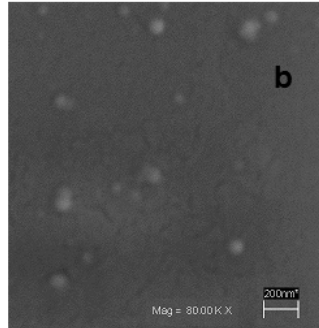
** Blank LNCs were made as a reference with Captex[®]8000+OA as the oily core.

Table 2. Storage stability. Characterization in terms of size, zeta potential (ZP), encapsulation efficiency (EE%) and drug payload of LNCs containing ABZ after 60 days at 4-8 °C. (Mean \pm S.D.; n=3). P.I: Polydispersity Index.

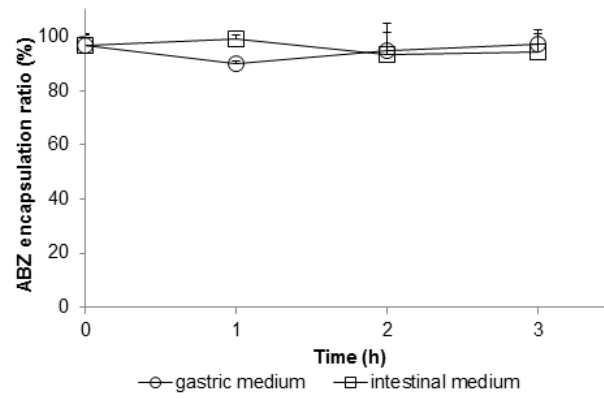
	EE%	Drug payload (mg/g LNCs)	Size (nm)	PI	ZP (mV)
0 days	97.5 \pm 1.9	0.28 \pm 0.05	46.1 \pm 1.2	0.08	-14.8 \pm 1.8
60 days	91.1 \pm 1.7	0.26 \pm 0.05	46.2 \pm 2.7	0.10	-14.0 \pm 1.9



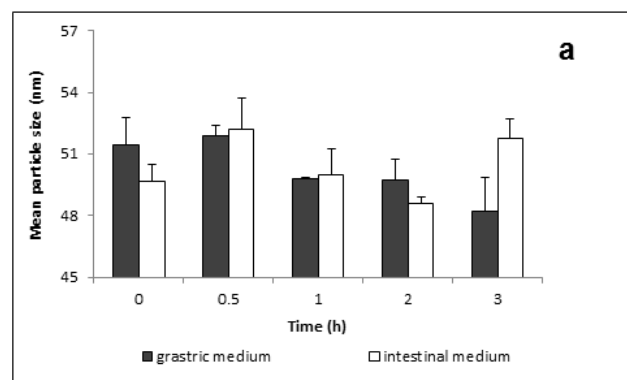
ACCEPTED



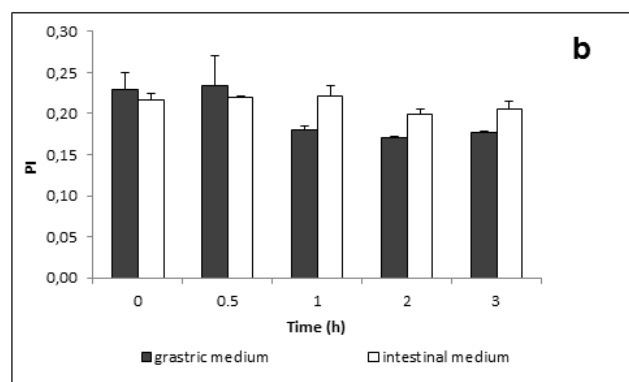
ACCEPTED



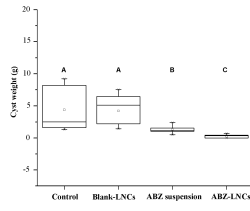
ACCEPTED



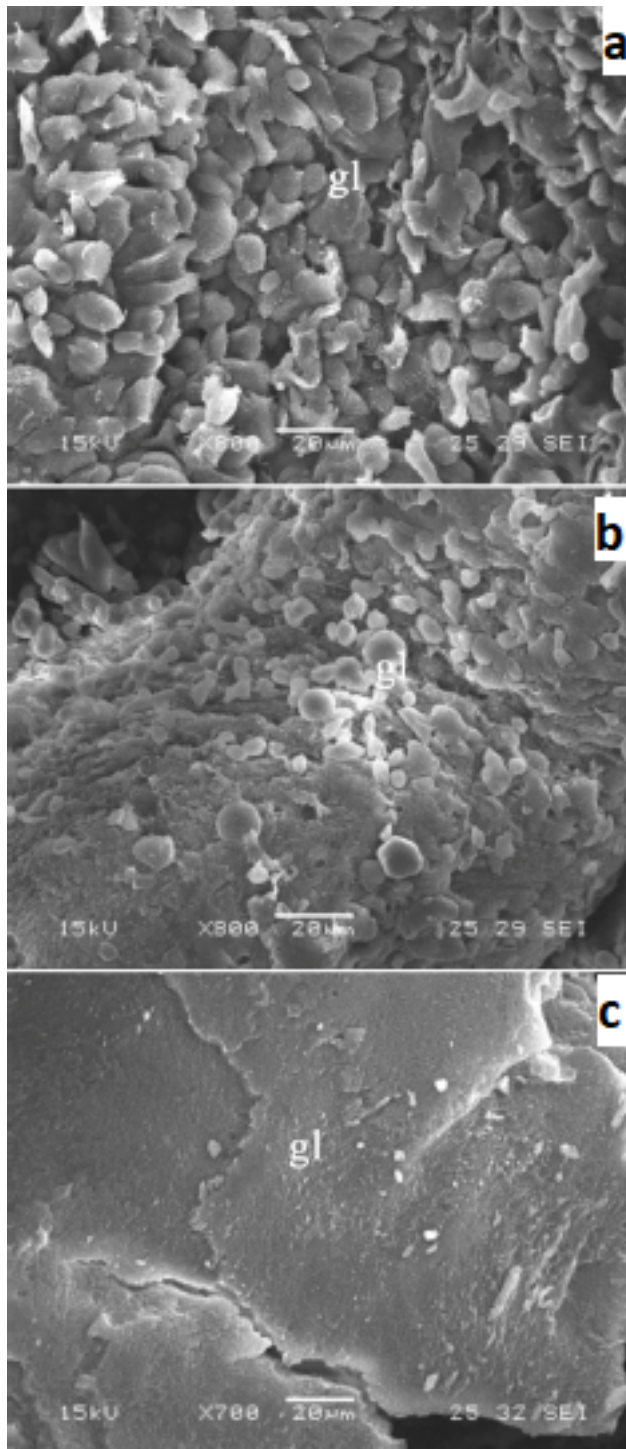
ACCEPTED



ACCEPTED



ACCEPTED MANUSCRIPT



MANUSCRIPT

HIGHLIGHTS

- Optimised ABZ-LNCs were obtained through the phase inversion method
- ABZ-LNCs with a EE >90% were stable for at least 2 months
- ABZ remained encapsulated in LNCs after its incubation in simulated biological fluids
- ABZ-LNCs showed a greater chemoprophylactic efficacy than ABZ suspension
- ABZ-LNCs could be a promising strategy for ~~in the~~ cystic echinococcosis treatment