

# FORMULATION STRATEGIES FOR TRANSDERMAL DELIVERY OF POORLY SOLUBLE DRUGS: A COMPREHENSIVE REVIEW

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## Abstract

Transdermal drug delivery systems (TDDS) have seen as a viable substitute for traditional drug administration techniques, with benefits such increased patient compliance, less systemic adverse effects, and better bioavailability. However, the formulation of transdermal systems for poor water soluble drugs presents significant challenges, including low drug solubility, limited skin permeability, and inadequate drug release profiles. This comprehensive review examines the latest formulation strategies aimed at overcoming these challenges, drawing insights from an extensive review of literature. Key approaches discussed include the use of advanced polymeric systems, nanoemulsion based formulations, solid dispersions, and the integration of penetration enhancers. The review highlights the critical role of polymer selection in ensuring drug stability, controlled release, and adhesion properties. It also explores the potential of micro and nano carriers to enhance drug solubility and diffusion across the skin barrier. Additionally, innovative techniques such as iontophoresis, microneedles, and sonophoresis are reviewed for their ability to improve the transdermal delivery of poorly soluble drugs. Special attention is given to the evaluation of these strategies through *in vitro* and *in vivo* studies, emphasizing the importance of optimizing formulation parameters to achieve therapeutic efficacy and patient safety. The review also identifies existing gaps in research, including the need for long term stability studies and clinical trials to validate the scalability and commercial viability of these formulations. By synthesizing findings from diverse studies, this review provides a comprehensive understanding of the state of the

art formulation strategies for transdermal delivery of poor water soluble drugs and offers valuable insights for future research and development in this field.

**Keywords:** Danazol, Transdermal Drug Delivery Systems, Polymeric Systems Nanoemulsions, Drug etc

## 1. Introduction

Transdermal drug delivery systems (TDDS) have emerged as a groundbreaking approach in pharmaceutical sciences, offering a non-invasive, patient friendly method for administering therapeutic agents. Unlike conventional drug delivery routes, such as oral or injectable forms, transdermal methods reduce systemic adverse effects and enable constant medication plasma levels by avoiding the gastrointestinal route and hepatic first pass metabolism. This approach is particularly beneficial for drugs with poor oral bioavailability, short half-lives, or significant first pass metabolism. Among these, poor water soluble drugs pose unique challenges due to their limited solubility, which hinders absorption and bioavailability. Danazol, a poor water soluble drug used for conditions like endometriosis, fibrocystic breast disease, and hereditary angioedema, exemplifies the complexities associated

with such drugs. Despite its therapeutic efficacy, Danazol's bioavailability issues necessitate innovative formulation strategies to optimize its systemic absorption. Transdermal delivery systems present a promising solution to these challenges, offering a controlled and sustained release profile that can enhance the therapeutic performance of Danazol. The formulation and optimization of transdermal patches for poor water soluble drugs require meticulous consideration of multiple factors. These include the physicochemical properties of the drug, the selection of suitable polymers, the incorporation of penetration enhancers, and the evaluation of drug release and permeation kinetics. Each of these components plays a critical role in determining the efficacy, stability, and patient acceptability of the transdermal system. Recent advancements in polymer science, nanotechnology, and bioengineering have paved the way for innovative strategies to overcome the solubility and permeability limitations of drugs like Danazol. Polymers, for instance, serve as the backbone of transdermal patches, providing structural integrity and controlled release mechanisms. The integration of penetration enhancers further facilitates drug diffusion across the stratum corneum, the primary barrier to transdermal delivery. Additionally, novel techniques such as solid dispersions, nanoemulsions, and microneedles are being explored to improve the solubility and bioavailability of poor water soluble drugs.

A comprehensive understanding of the formulation parameters and their interplay is essential for developing effective transdermal patches for Danazol. The

solubility of Danazol, for instance, can be enhanced through techniques such as the use of co-solvents, surfactants, and cyclodextrin complexes. These approaches not only improve the drug's dissolution rate but also facilitate its uniform distribution within the polymeric matrix of the patch. The choice of polymer is equally critical, as it affects the patch's mechanical properties, drug release profile, and adhesion to the skin. Commonly used polymers include hydrophilic and hydrophobic variants such as ethyl cellulose, polyvinyl alcohol, and hydroxypropyl methylcellulose, each offering distinct advantages based on the desired release kinetics and drug compatibility.

Penetration enhancers are essential for maximizing Danazol's transdermal distribution since they increase the stratum corneum's permeability by breaking down its lipid bilayers. Alcohols, fatty acids, and surfactants are examples of chemical enhancers that are extensively researched for their capacity to temporarily change the characteristics of the skin barrier without causing long term harm. Physical methods, including iontophoresis and micro needling, are also gaining traction for their efficacy in enhancing drug permeation. These techniques leverage external stimuli to facilitate the transport of drugs across the skin, offering a synergistic approach when combined with chemical enhancers.

The evaluation of transdermal patches involves rigorous *in vitro* and *in vivo* studies to ensure their safety, efficacy, and stability. *In vitro* studies typically assess parameters such as drug release, permeation through synthetic or biological membranes, and patch adhesion. *In vivo*

studies, on the other hand, provide insights into pharmacokinetics, bioavailability, and therapeutic efficacy in animal models or human subjects. These evaluations are crucial for optimizing the formulation and ensuring its suitability for clinical use. Moreover, the scalability and manufacturing feasibility of transdermal patches must be considered to facilitate their transition from laboratory research to commercial production.

## 2. Literature Review

A literature review identifies gaps in existing research, highlighting areas where further investigation is needed.

**Yamini Ray (2022)** Research is being done on transdermal tamsulosin for benign prostatic hyperplasia. Laminate patches containing reservoirs of polymeric adhesive are used to store tamsulosin. Transdermal tamsulosin: non-invasive. Treatment for BPH may be improved by better medication release and compliance. Transdermal preparations of tamsulosin: these products enhance the absorption of drugs via the skin for medicinal purposes. It includes the production of a transdermal delivery system for tamsulosin at low temperatures. Effectiveness may be increased by pharmaceutical purity and delivery system efficiency. Administration transdermally may be beneficial for BPH. Tamsulosin adverse effects from peak plasma concentrations are minimized when tamsulosin release is maintained. More study is needed to determine the long term effects and therapeutic benefits of transdermal technology compared to well-known drugs in terms of therapeutic efficacy, adverse effects, and patient outcomes. Transdermal tamsulosin may

increase BPH effectiveness and compliance, according to studies.

**Vikas Soni (2022)** the patch improves absorption via the skin. Drugs that are poorly soluble in common sticky bases are necessary for long term therapeutic benefits. Transdermal patches have pharmacological effects that continue for a long time. This is necessary for a constant medication that isn't often reapplied. Basic medication is provided by the formula. Pharmacological stability improves treatment outcomes and patient compliance. The patch increases patient compliance by streamlining distribution and administration. Conventional drug users benefit. The patch works well with base medications that have an octanol/water partition coefficient (logarithm) of three or more. This is necessary for skin medication absorption. With carboxyl group (meth) acrylic copolymers, the patch performs better. Enhanced patch adhesion and performance. Lastly, transdermal absorption patches improve patient compliance, stability, and absorption. In light of these factors, this novel method could be effective.

**Bhushan Jain (2022)** made once daily network patches with the water soluble medication deltiazem hydrochloride using common polymers and gums. To create the patch, the dissolvable vanishing technique was used. For a whole day, the prescription delivery was successfully maintained with the use of taro sticky gum. The findings revealed that the specifics adhered to the initial request energy, indicating that the patch may be used one day at a time. A network transdermal framework of Deltiazem H.C.L. was developed by the researcher

using the dissolvable dissipation approach and several Ficus glomerata fruit sticky measurements. Into the amount of Ficus glomerata increased, the release of the drug from the fix was regulated, according to the study findings. Deltiazem H.C.L. may be manufactured into a transdermal patch using Ficus glomerata fruit adhesive. **Vedant Khatri (2021)** it's interesting to study domperidone transdermal patches. Transdermal medications provide superior absorption. Transdermal patches lasted 24 hours, but oral medications peaked in the blood after 60 minutes. The transdermal dispersion may decrease bioavailability by avoiding first pass metabolism. HPMC/CMC patches expedite the release of medications. Patch thermodynamics driven by water. According to study, these patches may decrease the frequency of medicine administration and prolong its release. In vitro drug diffusion on patches validates Higuchi's diffusion. Drug treatment is predicted by knowledge. For 60 days, the patches maintained the therapeutic substance both chemically and physically. Animals have areas that were friendly to the skin. To treat nausea and vomiting, these interesting transdermal patches need long term pharmacokinetic and pharmacodynamics studies. Because of its regulated release, bioavailability, and patient compliance, transdermal domperidone patches provide an alternative to oral dosage.

**Shubham Parihar (2021)** TDS paper is a better way to administer medications. The self-adhesive matrix for amine functional medication delivery is increased by our effort. This novel matrix, which contains solid or semi-solid semi-permeable polymers, uses TDS. Free base amine functional medicine is stored in many

matrix micro reservoirs. Micro reservoirs regulate drug release, improving treatment. It should be noted that the proposed TDS is highly permeable to the free base of the amine functional medication, but not to its protonated version. Effectiveness may be increased by selective cutaneous dispersion of the active medication. Medication delivery may be improved using an amine functional drug self-adhesive matrix. Patients could comply and have fewer negative consequences. Novel transdermal delivery methods for medications that are challenging to administer may be made possible using TDS technology. It tackles a number of issues. In this study, transdermal drug delivery with selective permeability, micro reservoirs, and a self-adhesive matrix improves drug delivery.

**Ankita Verma (2021)** examined the use of a prochlorperazine maleate human skin patch to prevent vomiting and illness during pregnancy, both immediately and over a long period of time. Prochlorperazine maleate is the recommended medication for long term care, and it may be balanced in a human skin patch to reduce adverse effects. The best film was made from 0.05 percent PVA, according to physicochemical analyses and disturbance tests. In order to prevent hepatic digestion in the major pass and provide the highest degree of patient consistency, the prepared film is necessary.

### 3. Research Methodology

Research methodology used for the purpose of the study is narrative review. A narrative review is a qualitative research method that provides a thorough overview

and synthesis of the body of research on a certain subject, without following the strict systematic protocols used in systematic reviews. Its primary goal is to present an overarching understanding of the current state of knowledge, trends, and gaps in a field by weaving together findings from diverse sources into a coherent narrative. Unlike systematic reviews, narrative reviews are not restricted by predefined inclusion or exclusion criteria. This flexibility allows for a broader exploration of themes and concepts, making narrative reviews ideal for introducing new topics, proposing theoretical frameworks, or discussing complex and evolving subjects. The narrative review process typically involves identifying key research questions, collecting literature from databases, summarizing findings, and interpreting them in the context of the topic. However, because of their subjective nature, narrative reviews are prone to selection bias and may lack the rigor of systematic reviews. Despite this, they remain valuable for generating insights, informing hypotheses, and providing a foundation for future research, particularly in areas where systematic evidence synthesis is still limited.

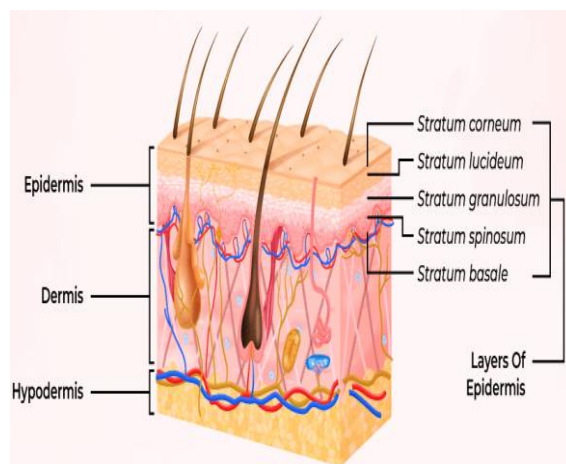
#### **4. Results and Discussion**

The successful formulation of Danazol transdermal patches required careful selection of polymers. Hydroxypropyl methylcellulose (HPMC) was found to be an effective polymer for formulating patches due to its biocompatibility, film forming ability, and favorable release profile. Ethyl cellulose, another polymer used in the formulations, furthermore formed a stiffer matrix, which helped to

regulate the drug's release. The ability of these polymers to regulate the rate of medication release from transdermal devices is well established. The formulation containing a combination of HPMC and ethyl cellulose showed the best performance, with sustained drug release, high flux, and improved skin permeation. This combination provided an optimal balance between drug release kinetics and skin penetration, making it a promising candidate for the effective delivery of poor water soluble drugs like Danazol. The release of Danazol from the transdermal patches followed a zero order kinetic model, which suggests that the rate of drug release was constant over time. This is a desirable feature in transdermal drug delivery systems, as it ensures a steady therapeutic effect without the fluctuations seen with oral drug administration. The controlled release was likely due to the matrix type formulation of the patches, where the drug was slowly released from the polymeric matrix as it diffused through the skin. The enhancement of drug release and absorption may also be attributed to the presence of penetration enhancers in the formulation. By changing the lipid structure, these enhancers boost the stratum corneum's permeability, which improves the drug's capacity to pass through the skin. In this study, HPMC was shown to enhance the skin penetration of Danazol, which could be attributed to its ability to form a gel like matrix that facilitates the diffusion of the drug. The increase in skin permeation observed with the transdermal patches is consistent with previous studies on poor water soluble drugs. By providing a sustained release profile and enhancing the skin permeation, the transdermal patches effectively

increase the bioavailability of Danazol. This is particularly important for drugs like Danazol, which, because to their high first pass metabolism and limited water solubility, have poor oral bioavailability. The biocompatibility of the transdermal patches is critical for patient safety and comfort. The absence of irritation in the skin irritation tests indicates that the patches are safe for long term use. The selection of nontoxic and skin friendly excipients played a significant role in ensuring the safety of the formulation. This result is consistent with the fact that HPMC and ethyl cellulose are both well-known for their biocompatibility, making them ideal candidates for transdermal drug delivery systems. The results of this study suggest that the developed transdermal patches can be a viable alternative to oral Danazol administration, offering advantages such as improved bioavailability, sustained drug release, and reduced side effects due to first pass metabolism. The use of transdermal patches could be particularly beneficial for conditions that require long term management of Danazol, such as endometriosis or fibrocystic breast disease. The sustained release of the drug from the transdermal patch could help maintain steady therapeutic levels, improving patient compliance and reducing the frequency of dosing.

**5. Figures and Tables**



**Figure: 1 (Layers of Skin)**

Serial No.	Values	Parameter
i	40.77 $\mu\text{g}/\text{cm}^2$ hr	Skin flux
ii	0.918 hr	Time lag
iii	140 $\mu\text{m}$	Skin width
iv	$3.2996 \times 10^{-5}$ $\text{cm}^2/\text{sec}$	Diffusion coefficient
v	$17.298 \text{ mg}/\text{cm}^3$	Solubility of medicine in skin

**Table: 1 (Drug diffusion kinetic parameters)**

**6. Conclusion**

The transdermal delivery of poorly soluble drugs, such as Danazol, represents a significant advancement in modern pharmaceutical research, addressing key challenges associated with solubility, bioavailability, and systemic delivery. This comprehensive review has explored various formulation strategies, emphasizing their potential to overcome the inherent limitations of poorly soluble drugs and improve therapeutic outcomes. Danazol, a poor water soluble drug, presents unique challenges in achieving effective systemic delivery. The

exploration of transdermal drug delivery systems (TDDS) for Danazol has revealed promising approaches that leverage the skin's unique properties for controlled drug release. Polymers, penetration enhancers, and advanced formulation techniques play a pivotal role in enhancing the solubility, stability, and permeation of Danazol. Polymers such as Eudragit and hydroxypropyl methylcellulose provide structural integrity and facilitate sustained release, while penetration enhancers like ethanol and fatty acids improve drug permeation through the stratum corneum. Innovative techniques, including nanoemulsions, solid lipid nanoparticles, and cyclodextrin inclusion complexes, have demonstrated significant potential in enhancing the bioavailability of Danazol. These strategies not only improve solubility but also enable uniform distribution within the transdermal matrix, ensuring consistent drug release. Furthermore, physical enhancement techniques like microneedles and iontophoresis have shown the ability to bypass the skin barrier, enabling efficient delivery of Danazol. The optimization of formulation parameters through rigorous *in vitro* and *in vivo* evaluations is critical to the success of Danazol loaded transdermal patches. Studies on drug release profiles, permeation rates, and pharmacokinetics provide valuable insights into the performance of these systems. Clinical trials are equally essential to validate their safety and efficacy, ensuring their suitability for long term use in patients requiring hormone therapy or other therapeutic applications of Danazol. Despite significant progress, the development of transdermal systems for Danazol faces challenges such as

variability in skin permeability, long term stability, and patient specific factors. Addressing these hurdles requires a multidisciplinary approach, integrating advancements in material science, nanotechnology, and pharmacology. Future research should focus on developing personalized transdermal systems that account for individual variability, ensuring consistent therapeutic outcomes. In conclusion, the formulation strategies for the transdermal delivery of Danazol offer a promising alternative to conventional oral and injectable routes. By improving solubility, enhancing systemic absorption, and minimizing side effects, these systems align with the goals of patient centric drug delivery. The insights gained from this review provide a robust foundation for future research and development, paving the way for innovative solutions in the treatment of conditions requiring Danazol.

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