

Targeted and sustained delivery of hydrocortisone to normal and stratum corneum-removed skin without enhanced skin absorption using a liposome gel

Moon-Kyoung Kim^a, Suk-Jae Chung^b, Min-Hwa Lee^b, Ae-Ri Cho^c, Chang-Koo Shim^b

^aYuhan Research Center, ^bSeoul Nat'l. Univ., ^cDuksung Women's Univ.

Purpose: To determine rate limiting process of percutaneous absorption from liposomes in order to understand whether enhanced drug absorption to the skin or to retarded systemic diffusion of the skin-absorbed drug is responsible for the higher drug concentration in the skin.

Methods: A liposome-gel formulation containing 1% (w/w) hydrocortisone was prepared by blending phosphatidylcholine liposomes of hydrocortisone with Carbopol 934 hydrogel. The liposome-gel was applied topically onto the normal and stratum corneum (SC)-removed skins (3.0 cm²) of hairless mice at a dose of 1 mg as hydrocortisone. Subsequently, concentrations of hydrocortisone in the skin and various organs were measured.

Results: Judging from hydrocortisone concentration in dosing area, the extent of absorption was reduced in the liposome-gel formulation. However, higher and sustained skin concentrations of hydrocortisone were achieved for the liposome-gel as compared to the ointment. Drug concentration in both viable and deep skin reached its maximum within 0.5 h after application of both formulations to both skin types. Drug concentrations in both skins from the ointment declined with time, while those from the liposome-gel were greatly sustained. The sustainment by the liposome-gel was more remarkable in the viable skin than in the deep skin. Drug concentration in the viable skin could be maintained at a nearly constant level for over 8 h by applying the liposome-gel. As a result, a 5-fold higher viable skin drug concentration was obtained from the liposome-gel than from the ointment at 8 h after the application to the SC-removed skin. However, the plasma concentration of hydrocortisone at 4 h from the liposome-gel was only one-fourth ($p < 0.01$) the value from the ointment when the drug was applied to the SC-removed skin, consistent with the lower urinary (one-third, $p < 0.05$) and fecal (one-half, $p < 0.05$) excretion.

Conclusions: Retarded diffusion of the drug from the skin to the systemic blood stream appears to be a potential factor in the sustained skin concentration of hydrocortisone from the liposome-gel. Interaction of hydrocortisone in the skin with phosphatidylcholine, a component of the liposomes and skin, may well be a factor in retarding the diffusion of the drug in the skin.