

***Review Article***

**A Review on Microsponges: A Novel Drug Delivery System.**

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**ABSTRACT**

As pharmaceutical industry, moving ahead with different innovative techniques in various controlled released dosage forms like solid formulation, semi solid formulation and topical preparation due to efficacy and patient compliance. Conventional preparations of the topical drugs have some disadvantages like unpleasant odor and skin irritation and fail to reach the site of action in sufficient amounts in few cases. This problem overcomes by micro sponge delivery system. Micro sponge is a recent novel technique for control release and target specific drug delivery system. Microsponges are polymeric delivery system composed of porous microspheres. They are composed tiny sponge-like spherical particle with a large porous surface. Micro sponge system reduced side effects, improved stability, increased appearance, and enhanced formulation flexibility and economic therapy. The present review introduces micro sponge technology along with its properties, advantage, characteristics, method of preparation, evaluation, and application summary of various micro sponge drugs of different category with various polymers and ratio and effectiveness over conventional dosage form.

**KEYWORD**

Microsponges, Controlled release, Micro sponge dosage form.

## **1. INTRODUCTION**

Microsponges are novel drug delivery system. They are porous, polymeric microspheres. They are composed tiny sponge-like spherical particles with a large porous surface having polymeric delivery system. Microsponges may improve stability, reduce side effects and modify drug release profiles favorably. Microsponges are polymeric delivery System so they based on microscopic, polymer-based microspheres that can entrap a wide variety of substances, and can then be incorporated into a formulated product such as a gel, cream, liquid or powder. Microsponge Delivery System can provide increased efficacy for topically active agents with enhanced safety, extended product stability and improved aesthetic properties in an efficient manner. In oral application, the microsponge has been shown to increase the of solubilization of poorly water soluble drug by entrapping such drugs in the microsponge system pores.[1, 2, 3] To control the delivery rate of active agents to a site of administration in the human body has been one of the biggest challenges faced by Pharmaceutical scientists. Several predictable and reliable systems have been developed for systemic delivery of drugs under the transdermal delivery system (TDS) using the skin as entrance of entry. It has improved the efficacy, stability and safety of many drugs that may be better administered through skin. But TDS is difficult for delivery of materials whose final target is skin itself. Controlled release of drugs onto the epidermis with certainty that the drug remains primarily localized and does not enter the systemic circulation in significant amounts is a challenging area of research.[4] Microsponges consist of non-collapsible structures with porous surface through which active ingredients are released in controlled manner. Depending upon the size, an internal pore structure equivalent to 10 ft in length and total pore volume of about 1 ml/g. When applied to the skin, the microsponge delivery system (MDS) releases its active ingredient on a predetermined time mode and also in reaction to other stimuli such as rubbing, temperature, and pH with increased efficacy. Microsponges have the capacity to load a high degree of active materials into the particle or onto its surface. Its large capacity for entrapment of actives up to 3 times its weight differentiates microsponges from other types of transdermal delivery systems. Mostly microsponge is use for topical drug delivery system. Recently microsponge drug delivery systems used in oral medications due to protected environment and provide the controlled delivery of drug at the lower GI tract, it has shown to increase the rate of solubilization of poorly water soluble drugs by the pores produced by microsponge systems.[5, 6]

### ***1.1. Properties of Microsponges***[7-9]

Microsponges when applied to the skin, its bioactive agent progressively release on the skin at a predetermined time mode and response to stimuli such as rubbing, temperature and pH effect with enhanced efficacy.

1. These formulations are stable over pH range of 1-11.
2. It is stable at up to 130°C.
3. They exhibit good compatible with most vehicles and ingredients.
4. Self-sterilizing as their average pore size is small about 0.25  $\mu\text{m}$ , thus the bacteria cannot penetrate the pores.

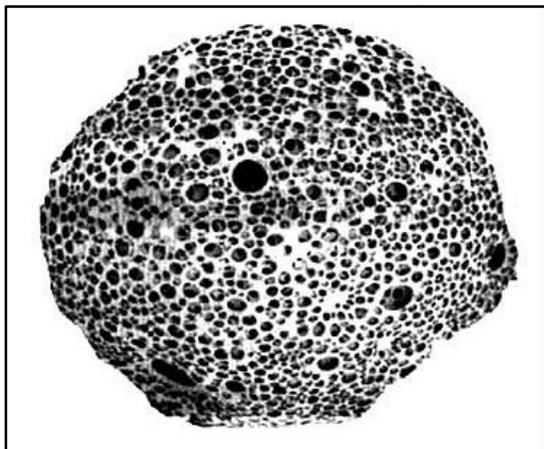
5. They have pay load up to 50-60%
6. These particles are appropriated in size to absorb into the skin, therefore oiliness and shine from skin is reduced.
7. Microsponges formulation improved oil control as it can absorb oil up to 6 times its weight without drying.
8. They have extended release so provide continuous action upto 12 hrs.

### ***1.2. Benefit of Microsponge Drug Delivery System***

1. Microsponges have several advantages over topical preparations in being non-irritating, non-mutagenic, non-allergenic and non-toxic.
2. It can also improve efficacy in treatment, thus enhanced product performance.
3. Provide continuous action upto 12 hrs. i.e. extended release & improved product elegance.
4. Lesser the irritation and better tolerance hence improved patient compliance.
5. Improved oil control as it can absorb oil up to 6 times its weight without drying.
6. They have superior formulation flexibility.
7. Microsponges are thermally, physically, and chemically stable.
8. Flexibility to develop novel product forms.[4, 10]

### ***1.3. Characteristics of Actives Moieties that is Entrapped into Microsponges***

- a) Microsponges are polymeric delivery System so they based on microscopic, polymer-based microspheres that can entrap a wide variety of substances, and can then be incorporated into a formulated product such as a gel, cream, liquid or powder.
- b) It should be either fully miscible in monomer or capable of being made miscible by addition of small amount of a water immiscible solvent.
- c) It should be inert to monomers and polymers. It should not increase the viscosity of the mixture during formulation.
- d) It should be water immiscible as well as most only slightly soluble.
- e) The spherical structure of the microsponges should not collapse.
- f) It should be stable in contact with polymerization catalyst and conditions of polymerization.
- g) The solubility of actives in the vehicle must be limited.
- h) If not, the vehicles will evacuate the microsponges before the application.
- i) Not more than 10 to 12% w/w microsponges must be incorporated into the vehicle in order to avoid cosmetic problems.
- j) High entrapment and polymer design of the microsponges for the active must be optimized for required release rate for given period of time. [11, 12]



**Fig. 1.**Structure of microsponge

#### ***1.4. Preparation of Microsponge***

Drug loading in Microsponges can take place in two different ways, one-step process or by two-step process which are based on physicochemical properties of drug to be loaded. Liquid liquid suspension polymerization is one step process and Quasi-emulsion solvent diffusion is two step process. If the drug is typically an inert non-polar material, will create the porous structure it is called Porogen. Porogen drug, which neither hinders the polymerization not become activated by it and stable to free radicals is entrapped with one-step process.[13]

##### ***1.4.1. Liquid-liquid suspension polymerization***

Reaction vessel for microsponge preparation by liquid liquid suspension polymerization. By using suspension polymerization method in liquid-liquid systems prepared the porous microspheres. In that preparation, the monomers are first dissolved along with active ingredients in a suitable solvent solution of monomer and then dispersed in the aqueous phase, which consist of surfactant, suspending agents, etc.

The polymerization is then process to begin by adding catalyst or by increasing temperature or irradiation.

Preparation by liquid-liquid suspension method,

The various steps in the preparation of Microsponges are given as follows,

1. Selection of monomer or combination of monomers.
2. Formation of chain monomers as polymerization begins.
3. Formations of cross linking between chains as a ladder form.
4. Monomers.
5. Folding of monomer ladder to forms spherical particles Agglomeration of microspheres, which give rise to the formation of bunches of microspheres.
6. Binding of bunches to for microsponges.

The polymerization process starts to the formation of a reservoir type of system, which opens at the surface through pores. In a few cases an inert liquid immiscible with water but fully miscible with monomer is used during the polymerization to form the pore network. After the

polymerization the liquid is evacuated leaving the porous microspheres, i.e. Microsponges. Fertilizing them within preformed Microsponges then incorporates the functional substances. Frequently solvent may be used for faster and efficient incorporation of the active substances. The Microsponges act as not representative of a group carriers for variety of functional substances, e. g. Anti-acne, anti-inflammatory, antiquities, antifungal, rubefacients etc. When the drug is quick to detect the polymerization conditions, two-step processes used. The polymerization is performed using substitute Porogen and is replaced by the functional substance under mild experimental condition.[14]

#### 1.4.2. Quasi-emulsion solvent diffusion

This is mostly used method for preparation of microsphere. In this method porous microspheres (microsponges) were also prepared by a quasi-emulsion solvent diffusion method (two-step process) using an internal phase containing polymer such as eudragit which is dissolved in ethyl alcohol. Then, the drug is slowly added to the polymer solution and dissolved under ultrasonication at 35<sup>0</sup>c and plasticizer such as triethylcitrate (TEC) was added in order to aid the plasticity. The inner phase is then poured into external phase containing polyvinyl alcohol and distilled water with continuous stirring for 2 hours. Then, the mixture was filtered for the separation of the microsponges. The product (microsponges) was washed and then dried in an air- heated oven at 40°C for 12 hr. and then weighed accurately for result.[15, 16]

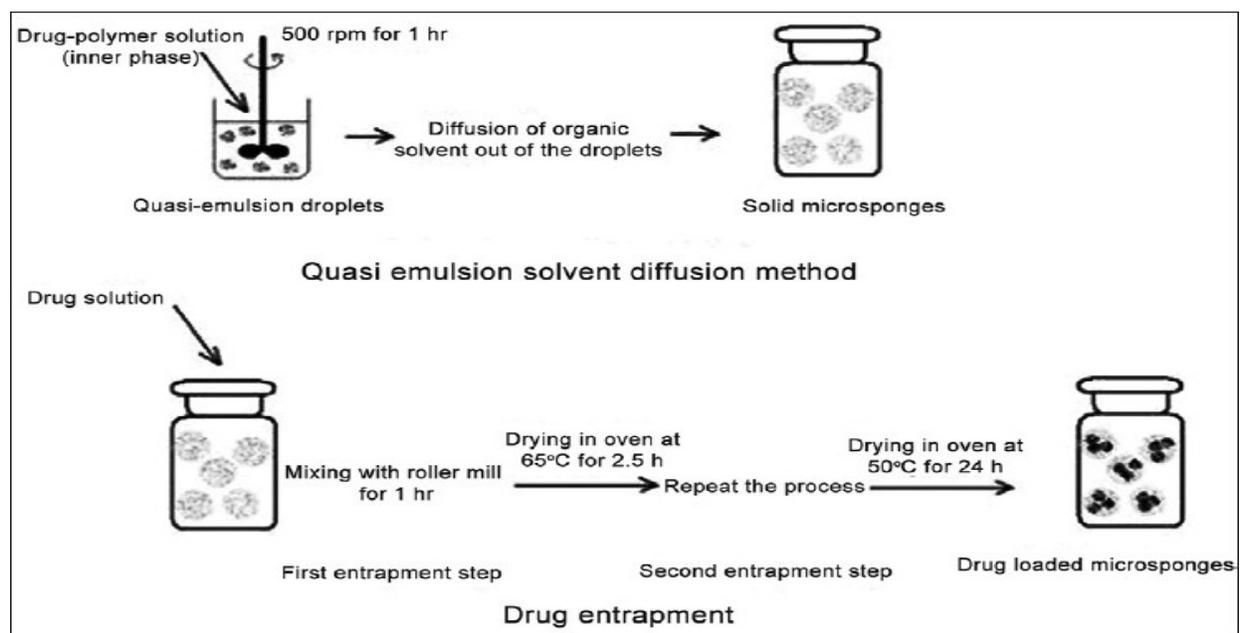


Fig. 2. Quasi-emulsion solvent diffusion method.

### 1.5. evaluation of microsphere

#### 1.5.1. Particle size determination

Laser light diffractometry can be used for the particle size analysis of loaded and unloaded microsponges. The values can be expressed for all formulations, size range. Cumulative

percentage drug release from microsponges of different particle size will be plotted against time to study effect of particle size on drug release. Particles of sizes between 10 and 25µm are preferred to use in final topical formulation because particles larger than 30µm can impart gritty feeling.

### ***1.5.2. Morphology and surface topography of microsponges***

Prepared microsponges can be coated with gold–palladium under an argon atmosphere at room temperature and then the Scanning electron microscopy (SEM) can be used to study surface morphology of microsponges. SEM of a fractured microsphere particle can also be taken to explain its ultra-structure.

### ***1.5.3. Determination of loading efficiency and production yield***

The loading efficiency (%) of the microsponges can be calculated according to the following equation:

$$\text{Loading efficiency} = \frac{\text{Actual Drug Content in Microsponges}}{\text{Theoretical drug content}} \times 100$$

---Formula 1

#### **Theoretical Drug Content**

The production yield of the micro particles can be determined by calculating accurately the initial weight of the raw materials and the last weight of the microsphere obtained.

$$\text{Production Yield} = \frac{\text{Practical mass of Microsponges}}{\text{Theoretical mass (polymer+drug)}} \times 100$$

---Formula 2

### ***1.5.4. Dissolution tests***

Dissolution apparatus USP XXIII with a modified basket consisted of 5µm stainless steel mesh is used for the study of dissolution release rate of microsponges. The dissolution medium is selected while considering solubility of actives to protect sink conditions. At various intervals the samples from the dissolution medium were analysed by suitable analytical methods at different intervals.

### ***1.5.5. Determination of true density***

The true density of micro particles is measured using an ultra-pycnometer under helium gas and is calculated from a mean of replicated determinations.

### ***1.5.6. Resiliency (viscoelastic properties)***

Resiliency (viscoelastic properties) of microsponges can be converted to produce beadlets that are softer or firmer according to the needs of the final formulation. Increased cross-linking tends to slow down the rate of release. Hence resiliency of microsponges will be studied by considering release as a function of cross linking with time.[17-23]

**Table 1.** Drug Explored In Microsponge Delivery System.[24-44]

Sr. No.	Drug	Category	Method of preparation	Polymer Used	Ratio Drug:Polymer	Conclusion
1.	Paracetamol	NSAID	Quasi-emulsion solvent diffusion method	Eudragit RS 100	3:1, 6:1, 9:1, 12:1	Provide effective local action than convensional dasage form.
2.	Diclofenac Sodium	NSAID	Quasi-emulsion solvent diffusion method	Ethyl cellulose	1:1 to 1:10	Control the release rates or target drugs to a specific body site and release its active ingredient on a timer mode.
3.	Indomethacin	NSAID	Quasi-emulsion solvent diffusion method	Eudragit RS 100	3:1, 4:1, 5:1	More uniform maintainance of blood plasma level of active agent.
4.	Lornoxicam	NSAID	Quasi-emulsion solvent diffusion method	Eudragit RS 100	1:1, 3:1, 5:1, 7:1, 9:1.	Prolonged released characteristics and producing mechanically strong tablets.
5.	Rabamipide	Anti-ulcer drug	Quasi-emulsion solvent diffusion method	Eudragit L 100	1:1, 2:1, 3:1, 5:1, 10:1, 15:1	Enhanced the saturated solubility of rabapimide in HCL.

6.	Fluconazole	Anti-fungal	Quasi-emulsion solvent diffusion method	Eudragit S 100	1:1 to 1:6	Reduce application frequency, hypertensive reactions & to improve bioavailability & safety.
7.	Acyclovir	Anti-viral	Quasi-emulsion solvent diffusion method	Ethyl cellulose	1:1, 2:3	No sign of bleeding, streaking, blooming for lipstick formulation.
8.	Mupirocin	Anti-bacterial	Quasi-emulsion solvent diffusion method	Eudragit RS 100	1:1, 2:1, 4:1, 6:1, 8:1, 10:1, 12:1, 14:1	Rapid, easy, reproducible & avoiding solvent toxicity.
9.	Prednisolone	Corticosteroids	Quasi-emulsion solvent diffusion method	Eudragit RS 100	1:1, 3:1, 5:1, 7:1, 9:1, 11:1, 13:1, 15:1	Colon targeted, inhibits the release of drug in upper part of GIT.
10.	Mometasone Furoate	Corticosteroids	Quasi-emulsion solvent diffusion method	Eudragit RS 100	1:1, 3:1, 5:1, 7:1, 9:1, 11:1, 13:1	Reduce the solubility of polymer in the droplets, since polymer is insoluble in water.
11.	Curcumin	Anti-inflammatory agent	Quasi-emulsion solvent diffusion method	Ethyl cellulose	1:1, 2:1, 3:1, 4:1, 5:1	Extended period of time, to reduce frequency of administration & improve bioavailability.

12.	Valsertan	Anti-Hypertensive	Quasi-emulsion solvent diffusion method	Ethyl Cellulose	1:4, 1:5, 1:6	For extensive time period to reduce application frequency, hypertensive reactions and to improve bioavailability.
13.	Febuxostat	Hyperuricemia agent	Quasi-emulsion solvent diffusion method	Eudragit RS 100	1:1, 3:1, 5:1, 7:1, 9:1, 11:1, 13:1	Reduced dose related side effects.
14.	Nateglinide	Anti-diabetic agent	Quasi-emulsion solvent diffusion method	Eudragit RS 100	1:1, 1:2, 1:3, 1:4, 1:5	Maximise the therapeutic effect of the drug.
15.	Ketoconazole	Anti-fungal	Quasi-emulsion solvent diffusion method	Eudragit RS 100	2.5:1, 5:1, 10:1, 20:1	Drug polymer ratio increases particle size decreases.
16.	Oxybenzone	Photoprotective agent	Quasi-emulsion solvent diffusion method	Ethyl cellulose	1:1, 1:2, 1:3	Enhanced sunscreens efficiency.
17.	Erythromycin	Antibiotic	Quasi-emulsion solvent diffusion method	Ethyl cellulose	0.3:1, 0.3:2, 0.3:3, 0.3:4, 0.3:6	Formulation shows good loading efficiency, production yield, particle size, drug content.

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18.	Terbinafine HCL	Anti- fungal	Quasi- emulsion solvent diffusion method	Ethyl cellulose	2:1, 1.5:1, 1:1, 1:1.5	Polymer internal volume & speed greatly affected to partical size & active drug content of microsponges.
19.	Sertacona -zole nitrate	Anti- fungal	Quasi- emulsion solvent diffusion method	Eudragit RS 100	1:1, 4:1, 6:1, 8:1, 10:1	Drug ratios enhanced the production yield, encapsulation efficiency & partical size upto certain limit beyond which no further enhancement obesreved.
20.	Roxythro -mycine	Antibiotic	Quasi- emulsion solvent diffusion method	Eudragit RL 100	1:0.5, 1:1.5, 1:2.5, 1:3.5, 1:4.5, 1:5	1:1, 1:2, 1:3, 1:4, Control the release rates or target drug to specific body site.
21.	Miconazole Nitrate	Anti- Fungal	Quasi- emulsion solvent diffusion method	Eudragit RS 100	-----	Cut the dosing frequency & improve bioavailability.

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### ***1.6. Applications of Microsponge Systems***

Microsponges are porous, polymeric microspheres that are used frequently for topical but recently used for oral administration. Microsponges are arranged to deliver the pharmaceutical active ingredient efficiently at the minimum dose. Microsponges are also to increase stability, reduce side effects and modify drug release.

### **1.6.1. Microsponge for topical delivery**

Conventional formulations of topical drugs are proposed to work on the outer layers of the skin. The Microsponge systems are based on microscopic, polymer-based microspheres that can bind, suspend or entrap a wide variety of substances and then be incorporated into a formulated product, such as a gel, cream, liquid or powder. Several primary characteristics, or parameters, of the Microsponge system can be defined during the production phase to obtain spheres that are tailored to specific product applications and vehicle compatibility. Microsponge systems are made of biologically inert polymers. Comprehensive safety studies have demonstrated that the polymers are non-irritating, non-mutagenic, non-allergenic, non-toxic and non-biodegradable. As a result, the human body cannot convert them into other substances or rupture them down. Although they are microscopic in size, these systems are too large to pass through the stratum corneum when incorporated into topical products.[45-53]

### **1.6.2. Microsponge for oral delivery**

In oral applications, the microsponge system has been shown to increase the rate of solubilisation of poorly watersoluble drugs by entrapping such drugs in the microsponge system pores. As these pores are very small, the drug is in effect reduced to microscopic particles and the significant increase in the surface area thus greatly increases the rate of solubilisation.[45-53]

## **2. CONCLUSION**

A Microsponge Delivery System can entrap wide range of actives and then release them at the site of action over a time and in response to trigger. It is a unique technology for the controlled release of topical agents and consists of microporous beads loaded with active agent. The microsponge delivery system also use for oral as well as biopharmaceutical drug delivery. The microsponge delivery technology of controlled release system in which active pharmaceutical ingredient is loaded in the macro porous beads and process to begin reduction in side effects with improved therapeutic efficacy. Microsponge can be effectively incorporated into topical drug delivery system for retention of dosage form on skin, and also use for oral delivery of drugs using bio erodible polymers, especially for colon specific delivery and controlled release drug delivery system thus become better patient compliance by providing site specific drug delivery system and extend the duration of dosage intervals.

## **3. REFERENCES**

1. Kappor, D., Patel, M., Vyas, R. B., Lad, C., & Tyagi, B. L. (2014). A review on microsponge drug delivery system. *Journal of Drug Delivery and Therapeutics*, *4(5)*, 29-35.
2. Kaity, S., Maiti, S., Ghosh, A. K., Pal, D., Ghosh, A., & Banerjee, S. (2010). Microsponges: A novel strategy for drug delivery system. *Journal of advanced pharmaceutical technology & research*, *1(3)*, 283.
3. Chadawar, V., & Shaji, J. (2007). Microsponge delivery system. *Current drug delivery*, *4(2)*, 123-129.

4. Aloorkar, N. H., Kulkarni, A. S., Ingale, D. J., & Patil, R. A. (2012). Microsponges as innovative drug delivery systems. *Int J Pharm Sci Nanotechnol*, *5(1)*, 1597-1606.
5. Anderson, D. L., Chung-Heng, C., & Nacht, S. (1994). Flow characteristics of loosely compacted macroporous microsphere® polymeric systems. *Powder technology*, *78(1)*, 15-18.
6. Barkai, A., Pathak, Y. V., & Benita, S. (1990). Polyacrylate (Eudragit retard) microspheres for oral controlled release of nifedipine. I. Formulation design and process optimization. *Drug Development and Industrial Pharmacy*, *16(13)*, 2057-2075.
7. Aritomi, H., Yamasaki, Y., Yamada, K., Honda, H., & Koishi, M. (1996). Development of Sustained-Release Formulation of Chlorpheniramine Maleate Using Powder-Coated Microsphere Prepared by Dry Impact Blending Method. *Journal of Pharmaceutical Science and Technology*, *56(1)*, 49-56.
8. D'souza, J. I., Masvekar, R. R., Pattekar, P. P., Pudi, S. R., & More, H. N. (2004). Microspongy delivery of fluconazole for topical application. *Indo-Japanese Int. In Conference on Adv. Pharm. Res. and Tech* (Vol. 76).
9. Partibhan, K. G., Manivannan, R., Krishnarajan, D., Chandra, S., & Nidhin, R. (2011). Microsponges role in novel drug delivery. *Int J Pharm Res Dev*, *3*, 117-25.
10. D'souza, J. I., & More, H. N. (2008). Topical anti-inflammatory gels of fluocinolone acetonide entrapped in eudragit based microsphere delivery system. *Research Journal of Pharmacy and Technology*, *1(4)*, 502-506.
11. Jain, N., Sharma, P. K., & Banik, A. (2011). Recent advances on microsphere delivery system. *International journal of Pharmaceutical Sciences Review and Research*, *8(2)*, 13-23.
12. Kawashima, Y., Niwa, T., Takeuchi, H., Hino, T., & Ito, Y. (1992). Control of prolonged drug release and compression properties of ibuprofen microspheres with acrylic polymer, Eudragit RS, by changing their intraparticle porosity. *Chemical and pharmaceutical bulletin*, *40(1)*, 196-201.
13. Shaha, V., Jain, H., Krishna, J., & Patel, P. (2010). Microsphere drug delivery: A Review. *International Journal of Research in Pharmaceutical Sciences*, *1(2)*, 212-218.
14. Shafi, S. K., Duraivel, S., Bhowmik, D., & Kumar, K. S. (2013). Microsphere drug delivery system. *Indian Journal of Research in Pharmacy and Biotechnology*, *1(2)*, 206.
15. Jain, N., Sharma, P. K., & Banik, A. (2011). Recent advances on microsphere delivery system. *International journal of Pharmaceutical Sciences Review and Research*, *8(2)*, 13-23.
16. Çomoğlu, T., Gönül, N., & Baykara, T. (2003). Preparation and in vitro evaluation of modified release ketoprofen microspheres. *Il Farmaco*, *58(2)*, 101-106.
17. Khopade, A. J., Jain, S., & Jain, N. K. (1996). The microsphere. *Eastern pharmacist*, *39(459)*, 49-53.

18. D'Emanuele, A., & Dinarvand, R. (1995). Preparation, characterisation, and drug release from thermoresponsive microspheres. *International journal of pharmaceutics*, *118(2)*, 237-242.
19. Kılıçarslan, M., & Baykara, T. (2003). The effect of the drug/polymer ratio on the properties of the verapamil HCl loaded microspheres. *International journal of pharmaceutics*, *252(1-2)*, 99-109.
20. Jayaweera, D. M. A. (1980). Medicinal plants (Indigenous and exotic) used in Ceylon.
21. Disouza, J. I., Saboji, J. K., Jyothi, M. H., & Patil, C. S. (2001). In-vitro antibacterial and skin irritation studies of microsponges of benzoyl peroxide. *Indian Drugs-Bombay-*, *38(7)*, 361-362.
22. Barkai, A., Pathak, Y. V., & Benita, S. (1990). Polyacrylate (Eudragit retard) microspheres for oral controlled release of nifedipine. I. Formulation design and process optimization. *Drug Development and Industrial Pharmacy*, *16(13)*, 2057-2075.
23. D'souza, J. I., & Harinath, M. (2008). The micro sponge drug delivery system: for delivering an active ingredient by controlled time release. *Pharma. info. net*, *6(3)*, 62.
24. Jain, V., & Singh, R. (2010). Development and characterization of eudragit RS 100 loaded microsponges and its colonic delivery using natural polysaccharides. *Acta poloniae pharmaceutica-drug research*, *67(4)*, 407-415.
25. Hussain, H., Dhyani, A., Juyal, D., & Bahuguna, A. (2014). Formulation and evaluation of gel-loaded microsponges of diclofenac sodium for topical delivery. *The Pharma Innovation*, *3(10, Part B)*, 58.
26. Mahajan, A. G., Jagtap, L. S., Chaudhari, A. L., Swami, S. P., & Mali, P. (2011). Formulation and evaluation of micro sponge drug delivery system using indomethacin. *International research journal of pharmacy*, *2(10)*, 64-69.
27. Karthika, R., Elango, K., Ramesh Kumar, K., & Rahul, K. (2013). Formulation and evaluation of lornoxicam microsponges tablets for the treatment of arthritis. *International Journal of Pharmaceutical Innovations*, *3(2)*, 29-40.
28. Ghareeb, M. M. (2018). Improvement of Rebamipide Solubility via optimized Microsponge formulation. *Journal of Pharmaceutical Sciences and Research*, *10(6)*, 1525-1529.
29. Moin, A., Deb, T. K., Osmani, R. A. M., Bhosale, R. R., & Hani, U. (2016). Fabrication, characterization, and evaluation of micro sponge delivery system for facilitated fungal therapy. *Journal of basic and clinical pharmacy*, *7(2)*, 39.
30. Yadav, P., & Nanda, S. (2014). Development and evaluation of some micro sponge loaded medicated topical formulations of Acyclovir. *Int J Pharm Sci Res*, *5(4)*, 1395-1410.
31. Mohan, V., Veena, N. M., & Manjula, B. P., (2013). Formulation & Evaluation of micro sponge for topical drug delivery of Mupirocin. *International Journal of PharmTech Research.*, *5(3)*, 1434-1440.
32. Sonali, R. P. (2014). Singh, and S. Prajapati. *Int. J. Pharm. Sci. Res*, *5(5)*, 1994.

33. Rekha, U., & Manjula, B. P. (2011). Formulation and evaluation of microsponges for topical drug delivery of mometasone furoate. *International Journal of Pharmacy and Pharmaceutical Sciences*, *3(4)*, 133-137.
34. Bhatia, M., & Saini, M. (2018). Formulation and evaluation of curcumin microsponges for oral and topical drug delivery. *Progress in biomaterials*, *7(3)*, 239-248.
35. Desavathu, M., Pathuri, R., & Chunduru, M. (2017). Design, development and characterization of valsartan microsponges by quasi emulsion technique and the impact of stirring rate on microsphere formation. *Journal of Applied Pharmaceutical Science*, *7(1)*, 193-198.
36. Pawar, P. G., Darekar, A. B., & Saudagar, R. B., (2019). Formulation, development & Evaluation of Febuxostat loaded microsphere. *International journal of research in advent technology.*, *7(5)*, 523-533.
37. Selvapriya, A., Elango, K., Daisy, Chella, Kumari, S., & Keerthana, K., Formulation & Evaluation of Nateglinide microsponges. *World Journal of Pharmacy & Pharmaceutical Sciences.*, *6(5)*, 1685-1694.
38. Saboji, J. K., Manvi, F. V., Gadad, A. P., & Patel, B. D. (2011). Formulation and evaluation of ketoconazole microsphere gel by quasi emulsion solvent diffusion. *Journal of cell and tissue research*, *11(1)*, 2691.
39. Pawar, A. P., Gholap, A. P., Kuchekar, A. B., Bothiraja, C., & Mali, A. J. (2015). Formulation and evaluation of optimized oxybenzone microsphere gel for topical delivery. *Journal of drug delivery*, 2015.
40. Ravi, R., & Sk, S. K. (2013). Standardization of process parameters involved erythromycin microsponges by Quasi emulsion solvent diffusion method. *Int J Pharm Dev Technol*, *3*, 28-34.
41. Mahaparale, P. R., Nikam, S. A., & Chavan, M. S. (2018). Development and Evaluation of Terbinafine Hydrochloride Polymeric Microsponges for Topical Drug Delivery. *Indian Journal of Pharmaceutical Sciences*, *80(6)*, 1086-1092.
42. Pande, V. V., Kadnor, N. A., Kadam, R. N., & Upadhye, S. A. (2015). Fabrication and characterization of sertaconazole nitrate microsphere as a topical drug delivery system. *Indian journal of pharmaceutical sciences*, *77(6)*, 675.
43. Sharma, P., Jat, R. K., & Sharma, V. K. (2019). formulation Formulation and Evaluation of Gel-Loaded Microsponges of Clarithromycin for Topical Delivery. *Journal of Drug Delivery and Therapeutics*, *9(3-s)*, 29-35.
44. Gulati, N., Tomar, N., & Nagaich, U. (2016). Miconazole Microsponges based topical delivery system for diaper dermatitis.
45. Draize, J. H., Woodard, G., & Calvery, H. O. (1944). Methods for the study of irritation and toxicity of substances applied topically to the skin and mucous membranes. *Journal of pharmacology and Experimental Therapeutics*, *82(3)*, 377-390.
46. D'souza, J. I., & Harinath, M. (2008). The microsphere drug delivery system: for delivering an active ingredient by controlled time release. *Pharma. info. net*, *6(3)*, 62.

47. Jadhav, N., Patel, V., Mungekar, S., Bhamare, G., Karpe, M., & Kadams, V. (2013). Microsponge delivery system: an updated review, current status and future prospects. *Journal of Scientific and Innovative Research*, *2(6)*, 1097-1110.
48. Disouza, J. I., Saboji, J. K., Jyothi, M. H., & Patil, C. S. (2001). In-vitro antibacterial and skin irritation studies of microsponges of benzoyl peroxide. *Indian Drugs-Bombay-*, *38(7)*, 361-362.
49. Wester, R. C., Patel, R., Nacht, S., Leyden, J., Melendres, J., & Maibach, H. (1991). Controlled release of benzoyl peroxide from a porous microsphere polymeric system can reduce topical irritancy. *Journal of the American Academy of Dermatology*, *24(5)*, 720-726.
50. Osmani, R. A., Aloorkar, N. H., Kulkarni, A. S., Harkare, B. R., & Bhosale, R. R. (2014). A new cornucopia in topical drug delivery: microsponge technology. *Asian J Pharm Sci Technol*, *4*, 48-60.
51. Jain, V., & Singh, R. (2010). Dicyclomine-loaded Eudragit®-based microsponge with potential for colonic delivery: preparation and characterization. *Tropical Journal of Pharmaceutical Research*, *9(1)*.
52. Orlu, M., Cevher, E., & Araman, A. (2006). Design and evaluation of colon specific drug delivery system containing flurbiprofen microsponges. *International journal of pharmaceutics*, *318(1-2)*, 103-117.
53. Shaheen, S. Z., Bolla, K., Vasu, K., & Charya, M. S. (2009). Antimicrobial activity of the fruit extracts of *Coccinia indica*. *African journal of Biotechnology*, *8(24)*, 7073-7076.