

Hydrogel Based Drug Delivery System for Wound Healing by Using Green Tea Extract

Pratiksha chaudhar, Vaishnavi Dhawalbaje, Mrs.Kalyani Patil

^{1,2}*Yashodeep Institute of Pharmacy (B. Pharm) Pimpalgaon Pandhari, Beed Road,
Chhatrapati Sambhaji Nagar*

³*Assistant Professor, Yashodeep Institute of Pharmacy (B. Pharm) Pimpalgaon Pandhari, Beed Road,
Chhatrapati Sambhaji Nagar*

Abstract— 1. Aim And Objective

Aim:

Hydrogel based drug delivery system for wound healing Objective

1. To design and synthesis a hydrogel matrix suitable for wound-application (unnatural/synthetic polymers, cross linking etc).
2. To incorporate a therapeutic agent (such as an antibiotic, anti-inflammatory drug, growth factor or combination thereof) into the hydrogel.
3. To characterise the hydrogel system for key physical/chemical properties: swelling behaviour, mechanical strength, porosity, degradation rate, drug loading efficiency, and in-vitro drug release kinetics.
4. To evaluate the hydrogel's biocompatibility (cytotoxicity tests, possibly hemocompatibility) and antimicrobial/anti-infection potential (if using antimicrobial payload).

I. INTRODUCTION

Introduction of Hydrogels: -

A hydrogel is a three-dimensional network of hydrophilic polymer chains that is cross-linked (either chemically or physically) and capable of absorbing large amounts of water or biological fluids, yet maintaining its structural integrity (i.e., it does not dissolve).

- According to one definition: "Hydrogels are natural or synthetic polymeric networks, insoluble in water which can absorb approximately 90% water and are regarded as superabsorbent materials."
- The term "hydro-gel" literally means "water gel" (gel whose dispersion medium is water).

Advantages of Hydrogel: - 1. High Water Absorption

1. Biocompatibility
2. Soft and Flexible Structure
3. Controlled Drug Release
4. Permeability
5. Stimuli Responsiveness

Disadvantages of hydrogel: - 1. Low mechanical strength.

1. Dehydration
2. Over-swelling
3. Difficult to handle
4. Limited stability
5. High production cost

II. LIMITATION OF HYDROGEL

1. Low mechanical strength – Hydrogels are soft and weak, making them unsuitable for load-bearing applications.
2. Dehydration and instability – They can lose water and shrink or, conversely, absorb too much water and swell excessively.
3. Difficult sterilization – Many hydrogels cannot tolerate standard sterilization methods such as heat or radiation.
4. Limited durability – Some hydrogels degrade or lose functionality over time in biological or environmental conditions.

III. APPLICATIONS

1. Drug delivery system
2. Wound dressings
3. Tissue engineering

4. Contact lenses
5. Biosensors

IV. MATERIAL OF HYDROGEL

Hydrogels can be made from a wide variety of natural, synthetic, or hybrid (composite) materials.

- ✓ Natural material: - a) Alginate
b) Gelatin
- ✓ Synthetic material: -a) Polyacrylamide
b) Polyacrylic acid
- ✓ Hybride: - a) Fibers
b) Protein

V. METHODS OF HYDROGEL

- Physical method: -a) Ionic cross linking
b) Freeze Thawing method
- Chemical method: - a) Free Radical Polymerization
b) Condensation reaction

Causes of Wound Healing: -

1. Local Factors: - a) Infection- bacteria prolong inflammation and tissue damage.
b) Poor blood supply (ischemia) – limits oxygen and nutrient delivery.
 2. Systemic Factors: - a) Age – older individuals heal slower due to reduced cell activity.
b) Malnutrition – especially lack of protein, vitamin C, zinc, and iron.
 3. Environmental & Psychosocial Factors: -a) Stress – releases cortisol, which suppresses immune function.
b) Poor hygiene – increases infection risk.
- Treatment: -
 - a) Initial care
 - b) Prevent infection
 - c) Promote healing

VI. INTRODUCTION OF WOUND HEALING

- Definition: -
- Wound healing is the biological process through which the body repairs and restores the integrity of damaged tissue after an injury. It involves a complex series of overlapping cellular and molecular events that work together to close the wound, replace lost or damaged tissue, and restore normal function.

- Types of Wound Healing: -
- Primary Intention: Edges of the wound are directly closed (e.g., surgical incision). Minimal scarring.
- Secondary Intention: Wound heals naturally without closure; more granulation tissue and scarring.
- Tertiary Intention (Delayed Primary): Wound is initially left open to control infection, then closed later.

Mechanisms of wound healing

The mechanism of wound healing is an organized sequence of four overlapping phases: hemostasis, inflammation, proliferation, and remodeling. During hemostasis, the body stops bleeding by forming a clot. Next, in the inflammation phase, immune cells clear debris and fight infection. The proliferation phase involves new tissue growth, including angiogenesis (new blood vessels), granulation tissue formation, epithelialization (skin resurfacing), and wound contraction. Finally, the remodeling phase strengthens the new tissue by converting the initial scar into a more mature, organized matrix.

VII. PLANT PROFILE GULVEL

Gulvel, also known as Giloy or Amrita, is a highly valued medicinal plant in Ayurveda. Its scientific name is *Tinospora cordifolia*, and it belongs to the Menispermaceae family. Gulvel is a climbing shrub with heart-shaped leaves and long, twining stems. It is native to India and commonly found in tropical regions.

Ayurvedic texts praise Gulvel as an “Amrita” (nectar of immortality) due to its wide range of health benefits. It is known for its immunomodulatory, antipyretic, anti-inflammatory, antioxidant, and detoxifying properties. Traditionally, it is used to boost immunity, reduce fever, manage diabetes, and improve digestion and overall vitality.



- Biological sources: -
Biological source: Gulvel is the dried stem of *Tinospora cordifolia* (Family Menispermaceae).
- Chemical constituents: Alkaloids: Magnoflorine
Palmatine
Tembetarine
Glycosides: - Cordifolioside A, B, C, D
Common name: -
Sanskrit: - Guduchi, amrita
Hinde: - Giloy
English: - Indian tinospora
- Uses of gulvel in wound healing: -
1. promotes faster wound contraction and epithelialization
2. Enhance collagen formation
3. anti-inflammatory effect
4. Angiogenesis
- Applications: Immuno health Anti-inflammatory
Antioxidant
- Advantages: - Reduce fever Boosts Immunity
Improves energy
- Disadvantages: -Hypoglycemia risk
Digestive upset
Gastro intestinal issues

VIII. GREEN TEA EXTRACT

Green tea extract is a concentrated form of the bioactive compounds found in green tea leaves (*Camellia sinensis*). Unlike regular brewed green tea, the extract provides higher amounts of polyphenols, especially catechins, which are responsible for most of its health benefits. Among these catechins, epigallocatechin gallate (EGCG) is the most potent and widely studied for its antioxidant and metabolic properties.

Green tea extract is commonly available as a dietary supplement in capsules, powders, or liquid form. It is known for its antioxidant, anti-inflammatory, and metabolism-boosting effects, making it popular in weight management, cardiovascular health, and general wellness products. Biological Source: -

It is derived from *camellia sinensis* leaves is a potent natural product rich in catechins especially EGCG.

Family: - Theaceae

- Chemical constituent: -
Alkaloid

Catechins

Phenolic Acid

Common Name: -

Camellia Sinensi

- Mechanism Of Action: -
Anti-oxidant Activity
Anti-inflammatory effect
- Used in wound healing: -
Anti-oxidant effect
Anti-inflammatory action
Anti-microbial action

- Application: -
Medical and pharmaceutical
Cosmatic Application
Food and beverage industry application

- Advantages: -
Cardiovascular benefits metabolic and weight management
- Disadvantages: -
liver toxicity
Gastro intestinal issues



IX. TRIDAX

Introduction of tridax

Tridax commonly refers to *Tridax procumbens*, a flowering plant in the Asteraceae family. It is a small, creeping herb that is widely distributed in tropical regions and is often considered a weed. Despite its status as a weed, Tridax has significant medicinal and ecological importance.

- Biological source: - Tridax is the plant *Tridax procumbens*.
- Scientific Name: *Tridax procumbens*
- Family: Asteraceae
- Chemical constituent: - flavonoides Saponins
Tannins
- Common names: - Antimicrobial

Antioxidant

Migration

Used: -

Promotes tissue regeneration

Antioxidante activity

Antioxidante activity

- Application: -

Hemostatic

Traditional uses in others aliments

Agricatures

- Advantages: -

Easily available

Economical

Low toxicity

- Disadvantages: -

Limited clinical evidences

Low standardization

Weed nature

X. REVIEW AND LITERATURE

1. Hydrogel based drug delivery system: A review (Bhalerao et al., 2022) Broad review of hydrogels (types, classification, general drug-delivery) including wound healing.
2. Insight Into Bioactive Hydrogels for Wound Healing and Drug Delivery Systems (2019) Focuses on bioactive hydrogels, antibacterial/hydrogel dressings, smart systems.
3. Review on Hydrogel Based Systems and their use in Drug Delivery for Wound Healing & Wound Management (Jayswal et al., 2024) Specific to wound healing + drug-delivery in hydrogel systems.
4. Comprehensive Review on Antimicrobial based Hydrogel for Wound Healing (Singh & Sharma, 2025) Emphasis on antimicrobial drug-loaded hydrogels for wound healing.
5. Polymer-Based Hydrogel Loaded with Honey in Drug Delivery System for Wound Healing Applications (Yasin et al., 2023) Niche review: honey-loaded hydrogels in wound healing.
6. Stimuli-responsive hydrogels for skin wound healing and regeneration (Emergent Materials, 2024) Explores “smart” hydrogels (pH/temperature/light responsive) for wound healing.

XI. RESEARCH PAPER

1. Polymer-Based Hydrogel Loaded with Honey in Drug Delivery System for Wound Healing Applications (2023)

Authors: Yasin S.N.N., Said Z., Halib N., Rahman Z.A., Mokhzani N.I.

Summary: Natural/synthetic polymer hydrogel loaded with honey (which has antibacterial, anti-inflammatory, antioxidant properties) is designed for wound healing.

2. Hydrogels and hydrogel-based drug delivery systems for promoting refractory wound healing: Applications and prospects (2024)

Authors: (not listed here) Publisher: Elsevier.

Summary: This review focuses on challenging (refractory, chronic) wounds, and how hydrogels plus drug delivery can help. It discusses limitations and future perspectives of hydrogel systems for wound healing.

3. Review on Hydrogel Based Systems and their use in Drug Delivery for Wound Healing & Wound Management (2024)

Authors: Meet A. Jayswal, Priyanka Ahlawat, Ashaben Patel.

Summary: This review covers hydrogel types (natural/synthetic, cross-linking, ionic charge etc), preparation methods, drug delivery aspects, and wound healing/wound management applications.

XII. PLANE OF WORK

1. Literature Review
2. Identify key compound in
3. Collection and prepration
4. Extraction process with the help of heating metal
5. Formulation of hydrogel
6. Evaluation Test
7. Result and Conclusion

XIII. MATERIAL AND METHOD

1. Beaker
2. PH meter
3. Conical flask
4. Stirrer
5. Analytical Balance

6. Syringes and needle
7. Water bath
8. Petri dish

Chemical: -

1. Chitosan
2. Polyvinyl alcohol
3. Glycerol
4. Silver nano partical

XIV. FORMULATION

Method of Preparation

1. Preparation of Polymer Solution
 - Disperse Carbopol in distilled water with continuous stirring.
 - Allow it to hydrate and swell completely.
2. Drug Incorporation
 - Dissolve drug separately and add slowly to polymer solution.
3. Addition of Excipients
 - Add glycerin and preservative.
4. Neutralization

Add triethanolamine dropwise to adjust pH and form gel.

5. Homogenization

Mix thoroughly to obtain uniform hydrogel.

6. Storage

Store in airtight container.

Procedure

1. Preparation of PVA Solution

Take 10 g PVA + 60 mL distilled water

Heat at 80–90°C with continuous stirring

Continue until clear solution forms

Cool to ~40°C

2. Preparation of Chitosan Solution

Dissolve 2 g chitosan in 50 mL of 1% acetic acid

Stir overnight or until fully dissolved

Filter if needed

3. Preparation of Extract Phase

Dissolve:

2 g green tea extract

2 g gulvel extract

Use minimal distilled water (≈10–15 mL)

Stir to get uniform solution

4. Mixing Phase

Slowly add chitosan solution into PVA solution with stirring

Add glycerol (5 g)

Then add herbal extract solution

Maintain temperature below 40°C to protect actives

5. Gel Formation (Cross-linking)

Option A: Physical Cross-linking (Recommended)

Pour mixture into petri plates/molds

Subject to freeze–thaw cycles:

Freeze at –20°C for 16 hours

Thaw at room temperature for 8 hours

Repeat 3 cycles

Produces stable, non-toxic hydrogel

6. Final Adjustment

Adjust weight to 100 g with distilled water

Check pH → adjust to 5.5–6.5 (skin compatible)

XV. FORMULATION TABLE

Total batch size: 50 g per formulation

Ingredients	F1(2%Extract)	F2(3%extract)	F3(5%extract)
Chitosan	1.0g	1.0g	1.0g
PVA	4.0g	4.0g	4.0g
Gulvel	1.0g(2%)	1.5g(3%)	2.5g(5%)
Green Tea Extract	1.0g(2%)	1.5g(3%)	2.5g(5%)
Ginpil	0.25g	0.20g	0.20g
Glycerol	0.5g	0.5g	0.5g
Distilled Water	q.s.to 50g	q.s. to 50g	q.s.to 50g

XVI. EVALUATION PARAMETER TEST

Physicochemical Evaluation Parameters:

These determine the basic material properties of the hydrogel.

a. Swelling Behavior

Measures fluid absorption capacity in simulated wound fluid (SWF) or PBS

Important for exudate management

Parameters:

Swelling ratio (%) = $(W_t - W_0) / W_0 \times 100$

Equilibrium swelling time

b. Gel Fraction

Indicates crosslinking efficiency

Higher gel fraction → better structural stability

c. Porosity

Determines oxygen/nutrient transport and drug diffusion

Measured by liquid displacement or SEM imaging

d. pH Responsiveness

Important for infected wounds (often acidic environment)

Evaluates drug release behavior under different pH conditions

2. Mechanical Properties

Critical for maintaining integrity at wound site.

a. Tensile Strength

Resistance to breaking under tension

b. Elastic Modulus

Flexibility and softness (important for skin compatibility)

c. Adhesive Strength

Ability to adhere to wound bed without secondary dressing

d. Compressibility / Rheology

Flow behavior for injectable hydrogels

3. Drug Delivery Performance

a. Drug Loading Efficiency (DLE)

Percentage of drug successfully incorporated

b. Drug Entrapment Efficiency (DEE)

c. In Vitro Drug Release Profile

Studied in PBS or simulated wound fluid

Models used:

Higuchi model (diffusion-controlled)

Korsmeyer–Peppas model (mechanism identification)

d. Release Kinetics

Burst release vs sustained release behavior

4. Biological Evaluation (In Vitro)

a. Cytocompatibility

Tested on fibroblasts or keratinocytes (e.g., NIH-3T3 cells)

MTT or Live/Dead assay

b. Cell Migration (Scratch Assay)

Measures wound closure rate in cell monolayer

c. Hemocompatibility

Hemolysis assay (<5% hemolysis is considered safe)

d. Antibacterial Activity

Against common wound pathogens:

Staphylococcus aureus

Escherichia coli

Zone of inhibition or CFU reduction

XVII. CONCLUSION

Hydrogel-based drug delivery systems represent a promising and innovative approach to wound healing, combining the advantages of controlled drug release, high water content, biocompatibility, and structural similarity to natural extracellular matrix. These systems can maintain a moist environment conducive to tissue regeneration, reduce infection risk, and enable localized, sustained release of therapeutic agents such as antibiotics, growth factors, and anti-inflammatory drugs. Advances in stimuli-responsive and smart hydrogels further enhance their ability to respond dynamically to wound conditions, promoting faster and more effective healing. However, challenges such as mechanical strength, long-term stability, and large-scale manufacturing still need to be addressed.

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