

## **Polymers and Biopolymers in Field of Medicines**

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### **ABSTARCT**

A polymer is a large molecule of many repeated units. Polymers range from synthetic plastics such as polystyrene to natural biopolymers such as DNA and proteins. Polymers and biopolymers are also used in field of medicines and such type of polymers are bio-safe, non-toxic and environmentally friendly. Biopolymers are the polymeric materials which is used to interact with tissues, bones, teeth and other living substances and thereafter environmentally friendly, that are degradable polymers which are also used in efficient drugs such as insulin. Thus, their effective response had led a wide range to make it successful in field of medicines.

### **KEYWORDS:**

- Non-Toxic ,
- Large molecules
- Medicines
- Safe
- Degradable
- Environmentally
- Tissues
- Effective response

### **INTRODUCTION**

The formation of a big molecule by the union small molecules of many repeated units is known as polymer. These polymers may be man-made such as plastic films, plastic resins like Bakelite, etc. or other may be natural polymers such as DNA, proteins, etc.

Some scientists are now expressing their concern on the field of medicines.

Polymers have become a necessary commodity for everyone and are used in manufacturing the medicines however all polymers are not used in this purpose. For medicinal purpose a polymer should be bio-safe, non-toxic, environmentally friendly.

Biopolymers are also used in medicinal purpose which are further used in repairing of tissues, bones, teeth, tendons, ligaments, etc. More advance these are used to repair the organs such as lungs, kidney, etc. Drugs such as insulin are summed up with a polymeric capsule for their sustained release.

Polymers may be natural, synthetic or semi-synthetic depending upon their source of origin. Polymers like proteins, starch are biopolymer or natural polymers. Celluloid is one of the semi-synthetic and Nylon, PVC are synthetic polymers. Therefore, polymers like Collegen obtained from bovines of cows and such polymers are used in repairing the bones, teeth, heart valves etc. Similarly, Chintosan obtained from crabs and many other marine animals are used as a filler in tablets, Cellulose is used in preparation of drugs such as pills and tablet coatings and granules and many other microcapsules.

Cancers have been the most dangerous disease since the decade.

Scientists are doing great effort and many research are done on cancer and more than half of the population all over the world are suffering from cancer and mostly half of them die due to these diseases.

Polymers and biopolymers are used in the treatment of cancers numerous products involve polymers and biopolymers.

By the word biopolymer, is a polymer which is biocompatible, and which can degrade the enzymes or decomposition by the actions of bacteria and fungi. Therefore, biopolymers are mostly used in the medical and in the biomedical applications.

Natural polymers are advantageous as they are non-toxic, non-inflammable and many more but they may have some disadvantages like high cost, high water absorption, low physical and chemical property but on the other hand biopolymers are more relevant as these have better physical properties and have intrinsic properties and suitable for medicinal applications and biopolymers have been used since many decades for medicinal use such as surgery and body implants. The research is still on regarding the biopolymers for more better mechanical and more relevant properties and more biocompatible.

### **POLYMERISATION REACTIONS (A process of making giant molecules)**

#### **FREE RADICAL ADDITION:**

##### **1: INITIATION:**

Radical initiators such as Benzoyl peroxide, Azobis-isobutyronitrile, etc. further generate the free radical which further initiate the reaction into Vinyl monomer.

Benzoyl Peroxide

Free Radical

Free Radical

Azo bis- isobutyronitrile

Free Radical

Vinyl Monomer

Formation of a new Free Radical

## **2: PROPOGATION:**

The above new radical produced in free radical addition adds another monomer to form or produce the other radical and thus similarly the successive addition of monomers to such radicals leads to the formation of a long chain of radicals.

Monomer

Secondary Radical (more stable)

## **3: TERMINATION**

The termination itself means the repetition. So, the termination of a radical is done in 3 steps:

1. Coupling
2. Disproportionation

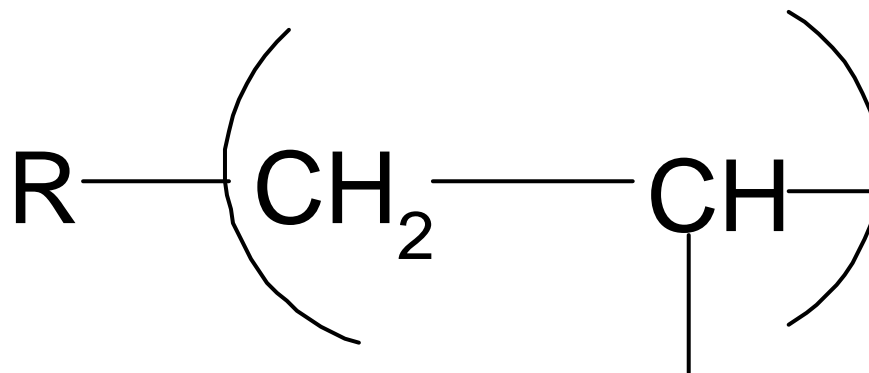
3. Chain transfer

A) **COUPLING:**

It may take place in two ways:

2 Radical Unit

B) **Disproportionation:**



**CHAIN TRANSFER:** Similarly, in such type there is a transfer of chain and the reaction moves on by the transfer of chain and starting from a monomer.

**Biopolymers /Polymers in treatment and medicinal field:**

Advances in biopolymers in medicines and modern therapies has uplifted in the medicinal field like the:

1. **pH-responsive polymers:** A wide survey has studied that the natural polymers also *responses* to the pH changes.

For instance: There might be a wide variation in the gastrointestinal which mostly be strongly acidic in the stomach and further leads to the drugs involvement to the intestine. Therefore, these pH – responsive can be used to further decrease the release of drugs in the stomach.

Similarly, the pH sensitive hydrogels have also been known in the cancer drugs targeting that the acidic medium has been noticed in the tumour tissues as compared to the healthy tissues. So, thus these hydrogels can thus release the acidic drugs and further minimise the effect of other numberof drugs releasing elsewhere.

2: **Hyaluronic Acid:**It is a natural linear co-polymer of the D-glucuronic and N-acetyl, D-glucosamine. This type of acid is present in the neutral tissue and the synovial fluid and the most important property about this tissue is that these are compatible and biodegradable, and they have tissue healing properties such as promotion of cell migration. It is also surveyed that these types of polymers also show the bacteriostatic action too.

**Table1 :**

**Uses of Hyaluronic Acid In Biomedical Field**

AREA	APPICATIONS
Diseases Indicator	Identifies the presence of tissue diseases and tumors.
Eye surgery	Retinal reattachment, Protects Corneal tissue, and other eye surgery.
Ear surgery	Healing of the tympanic membrane.
Scar control	Surgery
Wound Healing	Tissue repair
Tendon Surgery	Repairs the joint and tendon’s especially in the animals.
Antiadhesion	General Surgery

Basically, this polymer that is the *Hyaluronic Acid* is an attractive polymer because it is degraded into simple sugars. It is mainly used in the treatment of eye surgery, ear surgery and wound healing.

Therefore, the table displayed above explains and figure outs the area and the medical applications of this acid.

3: **Fibrin:** It is one of the natural polymers which is advancely used in the science as in a medicinal area. It is basically a fibrous protein used in the clotting of blood. It is formed by the polymerisation process which leads to convert the fibrinogen into fibrin.

**POLYMERS USED IN THE CARDIOPULMANARY BYPASS SURGERY :**

Some polymers are used in the vascular protheses or for the good blood flow and such polymers are also used in the oxygenate blood without any blood damage. These polymers have also played an indispensable role in the cardiopulmonary bypass surgery which therefore leads to the better flow of blood all over the body.

### **EXTRACORPOREAL MEMBRANE OXYGENERATION (ECMO):**

It is one of the best and major outbreaks which came out and is now one of the best surveys done. These ECMO uses hydrophobic, microporous and a hollow fibrous membrane with a property of porus. These lifejackets allow the blood to bypass in the heart and lungs.

Basically, the blood is moved in these ECMO machines then these ECMO oxygenate the blood artificially and then further and the end remove the carbon dioxide.

### **Biopolymers and Polymers in treatment of CANCER**

Cancer has been the most deleterious disease all over the world and fortunately its spread is increasing day to day. Today also many people died due to this disease and the percentage of this is increasing day to day. Taking in an account of this global issue scientists are trying to develop the novel carriers of anticancer drug delivery especially the cancer tumors.

Millions of people are diagnosed with this disease and it has become the second largest and most widely spread disease just after the cardiovascular diseases. Globally over 20% of the people suffer from the breast cancer. The most used treatments for the cancer are surgery, chemotherapy, hormonal therapy, immunotherapy.

**Chemotherapy** is a cancer treatment based on the treatment using drugs and chemicals which is one of the most important treatment for the surgery and the tumors. The resistance of the cancer cells is the most challenging technique in this process.

This technique acquires the use of drugs and beside the drugs, carriers. Polymers, biopolymers, nanocomposites polymers. The biopolymers as by the definition degrade the enzymes. So, the nanocomposites biopolymer has very good quality of holding protecting and releasing the bioactive drugs for instance enzymes, probiotics. The research tells that the source of biopolymers and their uses, including the cancer drug carriers has become one of the most successful research.

For instance, the biopolymers such as collagen, chitosan and many more, especially the chitosan (CS) as a drug carrier and the curcumin (CUR) as a cancer drug are widely used for the treatment of cancer in the chemotherapy theory.

### **BIOPOLYMERS FOR MEDICAL APPLICATIONS**

#### **1: MICROBIAL POLYESTERS: Polyhydroxyalkanoates (PHA):**

These are basically the flexible thermostatic biopolymers which are mainly intercellular materials for bacterial cells. These PHA have a property of rigidity and are flexible plastics which have a strong property of tough elastomers which further depends on their chemical structure. Currently

these biopolymers are investigated in the medical applications. The applications are mainly controlled in the drug release, bandages, bone plates and wound care.

2: **POLYAMINO ACIDS:**These are a type of synthetic polymers which are further formed by the polymerization of the same amino acid. The polyaspartate polymers are basically analogous of natural proteins and these compounds are derived naturally and these can be further used in place of the petroleum derived polymers.

**Table 1**

Uses of polyaspartate polymers in different field of medicines

AREA	APPLICATION
Superabsorbent	Diapers
Dental Treatment	Toothpaste (Tartar control agents)
Biomedical Devices	Microencapsulation for drug delivery, Prosthetic devices for heart valves
Chitin	Incorporated into bandages, wound healing treatment, tissue repair, blood clotting.

The application of the polymers and biopolymers have been highly significant and effective in the medical life. These are safe, bio-degradable, non-toxic, relevant and simple and less costly.

Their sudden and active response to the environment is also one of the factors in their advancement. Thus, the use of polymers and biopolymers in the medicine had further led out to come with flying colours as these are innumerable.

**References:**

1. R. Bhatt, M. Jaffe, Biopolymers in Medical Implants, in: A.S. Narang, S.H. Boddu (Eds.), Excip. Appl. Formul. Des. Drug Deliv., Springer, 2015: pp. 311–348.
2. L. Lu, S.J. Peter, M.D. Lyman, H. Lai, S.M. Leite, J.A. Tamada, et al., In vitro and in vivo degradation of porous poly ( DL -lactic- co -glycolic acid ) foams, Biomaterials. 21 (2000) 1837–1845.
3. S.H. Oh, S. Gon, E. Seok, S. Ho, J. Ho, Fabrication and characterization of hydrophilic poly ( lactic- co - glycolic acid )/ poly ( vinyl alcohol ) blend cell scaffolds by melt-molding particulate-leaching method, Biomaterials. 24 (2003) 4011–4021.
4. A.S. Rowlands, S.A. Lim, D. Martin, J.J. Cooper-White, Polyurethane / poly ( lactic- co -glycolic ) acid composite scaffolds fabricated by thermally induced phase separation, Biomaterials. 28 (2007) 2109–2121.
5. H. Liu, E.B. Slamovich, T.J. Webster, Less harmful acidic degradation of poly ( lactic- co-glycolic acid ) bone tissue engineering scaffolds through titania nanoparticle addition, Int. J. Nanomedicine. 4 (2006) 541– 545.
6. F.A. Cziple, A.J. Marques, Biopolymers Versus Synthetic Polymers, Anul XV. 1 (2008) 125–132.
7. R. Augustine, R. Rajakumari, M. Mozeti, A. George, Biopolymers for Health , Food , and Cosmetic Applications, Wiley, 2013.
8. M. Niaounakis, Biopolymers: Applications and Trends, Elsevier, 2015.
9. N. Onar, Usage Of Biopolymers In Medical Applications, in: Proc. 3rd Indo-Czech Text. Res. Conf., 2014.
10. N. Reddy, R. Reddy, Q. Jiang, Crosslinking biopolymers for biomedical applications, Trends Biotechnol. 33 (2015) 362–369.
11. T. Mukherjee, N. Kao, PLA Based Biopolymer Reinforced with Natural Fibre : A Review, J. Polym. Environ. 19

(2011) 714–725.

12. H. Tamai, K. Igaki, E. Kyo, K. Kosuga, A. Kawashima, S. Matsui, et al., Initial and 6-Month Results of Biodegradable Poly-L-Lactic Acid Coronary Stents in Humans, *Circulation*. 102 (2000) 399–404.
13. Kaewkannetra Pakawadee. *Products and Applications of Biopolymers*. Croatia: Intech; 2012. Fermentation of Sweet Sorghum into Added Value Biopolymer of Polyhydroxyalkanoates (PHAs). In: Casparus Johannes Reinhard Verbeek editor; pp. 41–60. [[Google Scholar](#)]
14. Kaplan DL, et al. *Polymer. Systems-Synthesis and Utility*. New York: NY Hanser Publishing; 1994. ‘Naturally Occurring Biodegradable Polymers’ G Swift and R Narayan (eds) [[Google Scholar](#)]
15. Ramesh Babu NG, Anitha N, Hema Kalai Rani R. Recent Trends in Biodegradable Products from Biopolymers. *Advanced Biotech*. 2010;9(11):30–34. [[Google Scholar](#)]
16. Gross AR, Kalra B. Biodegradable Polymers for the Environment. *Sci*. 2002;297:803–07. [[PubMed](#)] [[Google Scholar](#)]
17. Harkness RD. Biological functions of collagen. *Biol Rev*. 1961;36:399–463. [[PubMed](#)] [[Google Scholar](#)]
18. Lee CH, Singla A, Lee Y. Biomedical applications of collagen. *Int J Pharmaceut*. 2001;221:1–22. [[PubMed](#)] [[Google Scholar](#)]
19. Friess W. Collagen-biomaterial for drug delivery. *Eur J Pharm Biopharm*. 1998;45:113–36. [[PubMed](#)] [[Google Scholar](#)]
20. Maeda M, Tani S, Sano A, Fujioka K. Microstructure and release characteristics of the minipellet, a collagen based drug delivery system for controlled release of protein drugs. *J Controlled Rel*. 1999;62:313–24. [[PubMed](#)] [[Google Scholar](#)]
21. Yang SC, Lu LF, Cai Y, Zhu JB, Liang BW, Yang CZ. Body distribution in mice of intravenously injected camptothecin solid lipid nanoparticles and targeting effect on brain. *J Control Release*. 1999;59:299–307. [[PubMed](#)] [[Google Scholar](#)]
22. Berthold A, Cremer K, Kreuter J. Collagen microparticles: carriers for glucocorticosteroids. *Eur J Pharm Biopharm*. 1998;45:23–29. [[PubMed](#)] [[Google Scholar](#)]
23. Morrison NA, Clark RC, Chen YL, Talashek T, Sworn G. Gelatin alternatives for the food industry. *Progr Colloid Polym Sci*. 1999;114:127–31. [[Google Scholar](#)]
24. Mariod AA, Adam HF. Review: gelatin, source, extraction and industrial applications. *Acta Sci Pol Technol Aliment*. 2013;12(2):135–47. [[Google Scholar](#)]
25. Lobo L. Coalescence during emulsification. 3. Effect of gelatin on rupture and coalescence. *J Coll Interface Sci*. 2002;254:165–74. [[PubMed](#)] [[Google Scholar](#)]
26. Domard A, Domard M. Chitosan: Structure properties relationship and biomedical applications. *Polym Biomater*. 2002;9:187–212. [[Google Scholar](#)]
27. Canella KMNC, Garcia RB. Caracterização de quitosana por cromatografia de permeação em gel. Influência do método de preparação e do solvente. *Quim Nova*. 2001;24(1):13–17. [[Google Scholar](#)]
28. Signini R. Estudo das relações estruturas/propriedades de quitina e quitosana. Tese (Doutorado em Físico-Química). Instituto de Química de São Carlos- USP- São Paulo 2002.
29. Synowiecki J, Al-Khatteb NAA. Production, properties, and some new applications of chitin and its derivatives. *Crit Rev Food Sci Nut*. 2003;43:144–71. [[PubMed](#)] [[Google Scholar](#)]
30. Hamman JH. Chitosan Based Polyelectrolyte Complexes as Potential Carrier Materials in Drug Delivery Systems. *Mar Drugs*. 2010;8:1305–22. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]



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31. Kong M, Chen XG, Xing K, Park HJ. Antimicrobial properties of chitosan and mode of action: A state of the art review. *Int J Food Microbiol.* 2010;144:51–63. [[PubMed](#)] [[Google Scholar](#)]
32. Feng Y, Xia W. Preparation, characterization and antibacterial activity of water-soluble O-fumaryl-chitosan. *Carbohydr Polym.* 2011;83:1169–73. [[Google Scholar](#)]
33. Sano H, Shibasaki R, Matsukubo T, Takaesu Y. Effect of chitosan rinsing on reduction of dental plaque formation. *Bull Tokyo Dent Coll.* 2003;44:9–16. [[PubMed](#)] [[Google Scholar](#)]
34. Stamford-Arnaud TM, Barros-Neto B, Diniz FB. Chitosan effect on dental enamel de-remineralization: An invitro evaluation. *J Dent.* 2010;38:848–52. [[PubMed](#)] [[Google Scholar](#)]
35. Murugan R, Ramakrishna S. Bioresorbable composite bone paste using polysaccharide based nano hydroxyapatite. *Biomaterials.* 2004;25:3829–35. [[PubMed](#)] [[Google Scholar](#)]
36. Tanodekaew S, Prasitsilp M, Swasdison S, Thavornnyutikarn B, Pothsree, Pateepasen R. Preparation of acrylic grafted chitin for wound dressing application. *Biomaterials.* 2004;25:1453–60. [[PubMed](#)] [[Google Scholar](#)]
37. Maia RCC, Franco LO, Stamford TCM, Fukushima K, Porto ALF, Campos-Takaki GM. Chitin produced by *Cunninghamella elegans* (IFM 46109) and applied to wound healing. *Asian Chitin Journal.* 2006;2:11–20. [[Google Scholar](#)]
38. Mori T, Murakami M, Okumura M, Kadosawa T, Uede T, Fujinaga T. Mechanism of macrophage activation by chitin derivatives. *J Vet Med Sci.* 2005;67:51–56. [[PubMed](#)] [[Google Scholar](#)]
39. Anraku M, Kabashima M, Namura H, Maruyama T, Otagiri M, Gebicki J, et al. Antioxidant protection of human serum albumin by chitosan. *Int J Biol Macromol.* 2008;43:159–64. [[PubMed](#)] [[Google Scholar](#)]
40. Ueno H, Mori T, Fujinaga T. Topical formulations and wound healing applications of chitosan. *Adv Drug Deliv Rev.* 2001;52:105–15. [[PubMed](#)] [[Google Scholar](#)]
41. Wang M. Developing bioactive composite materials for tissue replacement. *Biomaterials.* 2003;24:2133–51. [[PubMed](#)] [[Google Scholar](#)]
42. Iwata H, Yana S, Nasu M, Yosue T. Effects of chitosan oligosaccharides on the femur trabecular structure in ovariectomized rats. *Oral Radiol.* 2005;21:19–22. [[Google Scholar](#)]
43. Porporatto C, Canali MM, Bianco ID, Correa SG. The biocompatible polysaccharide chitosan enhances the oral tolerance to type II collagen. *Clin Exp Immunol.* 2009;155:79–87. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]
44. Murakami K, Aoki H, Nakamura S, Nakamura SI, Takikawa M, Hanzawa MM, et al. Hydrogel blends of chitin/chitosan, fucoidan and alginate as healing impaired wound dressings. *Biomaterials.* 2010;31:83–90. [[PubMed](#)] [[Google Scholar](#)]
45. Di Martino A, Sittinger M, Risbud MV. Chitosan: A versatile biopolymer for orthopedic tissue-engineering. *Biomaterials.* 2005;26:5983–90. [[PubMed](#)] [[Google Scholar](#)]
46. Francis Suh J, Matthew H. Application of chitosan-based polysaccharide biomaterials in cartilage tissue engineering: a review. *Biomaterials.* 2000;21:2589–98. [[PubMed](#)] [[Google Scholar](#)]
47. Hu Q, Li B, Wang M, Shen J. Preparation and characterization of biodegradable chitosan/hydroxyapatite nanocomposite rods via in situ hybridization: a potential material as internal fixation of bone fracture. *Biomaterials.* 2004;25:779–85. [[PubMed](#)] [[Google Scholar](#)]
48. Xia W, Liu P, Zhang J, Chen J. Biological activities of chitosan and chitooligosaccharides. *Food Hydrocolloids.* 2011;25:170–79. [[Google Scholar](#)]
49. Yadav AV, Bhise B. Chitosan: a potential biomaterial effective against typhoid. *Cur Sci.* 2004;87(9):1176–78. [[Google Scholar](#)]

50. Rios JL, Recio MC. Medicinal plants and antimicrobial activity. *J Ethnopharmacol.* 2005;100(1-2):80–84. [[PubMed](#)] [[Google Scholar](#)]
51. Muzzarelli T, Pruzzo G. Inhibition of *Streptococcus mutans* adsorption to hydroxyapatite by low-molecular-weight chitosans. *Oral Microbiol Immun.* 1997;72:665–72. [[PubMed](#)] [[Google Scholar](#)]
52. Yoshiharu N, Paul L, Henri C. Crystal Structure and Hydrogen-Bonding System in Cellulose I $\beta$  from Synchrotron X-ray and Neutron Fiber Diffraction. *J Am Chem Soc.* 2002;124(31):9074–82. [[PubMed](#)] [[Google Scholar](#)]
53. Tomsic B, Simoncic B, Orel B, Vilcnik A, Spreizer H. Biodegradability of cellulose fabric modified by imidazolidinone. *Carbohydr Polym.* 2007;69(3):478–88. [[Google Scholar](#)]
54. Peppas NA. Hydrogels and drug delivery. *Curr Opin Colloid Interface Sci.* 1997;2(5):531–57. [[Google Scholar](#)]
55. Drury JL, Mooney DJ. Hydrogels for tissue engineering: Scaffold design variables and applications. *Biomaterials.* 2003;24(24):4337–51. [[PubMed](#)] [[Google Scholar](#)]
56. Entcheva E, Bien H, Yin L, Chung CY, Farrell M, Kostov Y. Functional cardiac cell constructs on cellulose-based scaffolding. *Biomaterials.* 2004;25(26):5753–62. [[PubMed](#)] [[Google Scholar](#)]
57. Stabenfeldt SE, Garcia AJ, LaPlaca MC. Thermoreversible laminin-functionalized hydrogel for neural tissue engineering. *J Biomed Mater Res A.* 2006;77(4):718–25. [[PubMed](#)] [[Google Scholar](#)]
58. Svensson A, Nicklasson E, Harrah T, Panilaitis B, Kaplan DL, Brittberg M, et al. Bacterial cellulose as a potential scaffold for tissue engineering of cartilage. *Biomaterials.* 2005;26(4):419–31. [[PubMed](#)] [[Google Scholar](#)]
59. Czaja WK, Young DJ, Kawecki M, Malcolm Brown R. The future prospects of microbial cellulose in biomedical applications. *Biomacromolecules.* 2007;8(1):1–12. [[PubMed](#)] [[Google Scholar](#)]
60. Ebringerova A, Heinze T. Xylan and xylan derivatives - Biopolymers with valuable properties, 1 – Naturally occurring xylans: structures, isolation, procedures and properties. *Macromol Rapid Comm.* 2000;21(9):542–56. [[Google Scholar](#)]
61. Kayserilioglu BS, Bakir U, Yilmaz L, Akkas N. Use of xylan, an agricultural by-product, in wheat gluten based biodegradable films: mechanical, solubility and water vapor transfer rate properties. *Bioresour Technol.* 2003;87(3):239–46. [[PubMed](#)] [[Google Scholar](#)]
62. Kacurakova M, Capek P, Sasinkova V, Wellner N, Ebringerova A. FT-IR study of plant cell wall model compounds: Pectic polysaccharides and hemicelluloses. *Carbohydr Polym.* 2000;43(2):195–203. [[Google Scholar](#)]
63. Oliveira EE, Silva AE, Nagashima Jr T, Gomes M CS, Aguiar LM, Marcelino HR, et al. Xylan from corn cobs, a promising polymer for drug delivery: Production and characterization. *Bioresour Technol.* 2010;101(14):5402–06. [[PubMed](#)] [[Google Scholar](#)]
64. Saha BC. Alpha-L-arabinofuranosidases: Biochemistry, molecular biology and application in biotechnology. *Biotechnol Adv.* 2000;18(5):403–23. [[PubMed](#)] [[Google Scholar](#)]
65. Ebringerova A, Hromadkova Z. Xylans of industrial and biomedical importance. *Biotechnology and Genetic Engineering Reviews.* 1999;16:325–46. [[PubMed](#)] [[Google Scholar](#)]
66. Narayanan RP, Melman G, Letourneau NJ, Mendelson NL, Melman A. Photodegradable iron (III) cross-linked alginate gels. *Biomacromolecules.* 2012;13:2465–71. [[PubMed](#)] [[Google Scholar](#)]
67. Bouhadir KH, Lee KY, Alsberg E, Damm KL, Anderson KW, Mooney DJ. Degradation of partially oxidized alginate and its potential application for tissue engineering. *Biotechnol Prog.* 2001;17:945–50. [[PubMed](#)] [[Google Scholar](#)]
68. Kong HJ, Alsberg E, Kaigler D, Lee KY, Mooney DJ. Controlling degradation of hydrogel via the size of cross-linked junctions. *Adv Mater.* 2004;16:1917–21. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]

## Polymers And Biopolymers In Field Of Medicines

69. Balakrishnan B, Jayakrishnan A. Self-cross-linking biopolymers as injectable in situ forming biodegradable scaffolds. *Biomaterials*. 2005;26:3941–51. [[PubMed](#)] [[Google Scholar](#)]
70. Gaserod O, Smidsrod O, Skjak-Braek G. Microcapsules of alginate-chitosan I: A quantitative study of the interaction between alginate and chitosan. *Biomaterials*. 1998;19:1815–25. [[PubMed](#)] [[Google Scholar](#)]
71. Rowley JA, Madlambayan G, Mooney DJ. Alginate hydrogels as synthetic extracellular matrix materials. *Biomaterials*. 1999;20:45–53. [[PubMed](#)] [[Google Scholar](#)]
72. Richards AJ, Hagelstein SM, Patel GK, Ivins NM, Sweetland HM, Harding KG. Early use of negative pressure therapy in combination with silver dressings in a difficult breast abscess. *Int Wound J*. 2011;8(6):608–11. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]
73. Opanson S, Magnette A, Meuleneire F, Harding K. Askina® Calgitrol® Made easy. *Wounds Int*. 2012;3(1) [[Google Scholar](#)]
74. Chrisman CA. Care of chronic wounds in palliative care and end- of-life patients. *Int Wound J*. 2010;7(4):214–35. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]
75. Li X, Chen S, Zhang B, Li M, Diao K, Zhang Z, et al. In situ injectable nano-composite hydrogel composed of curcumin, N, O-carboxymethyl chitosan and oxidized alginate for wound healing application. *Int J Pharm*. 2012;437:110–19. [[PubMed](#)] [[Google Scholar](#)]
76. Hooper SJ, Percival SL, Hill KE, Thomas DW, Hayes AJ, Williams DW. The visualization and speed of kill of wound isolates on a silver alginate dressing. *Int Wound J*. 2012;9:633–42. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]
77. Cao Y, Shen XC, Chen Y, Guo J, Chen Q, Jiang XQ. pH-Induced self-assembly and capsules of sodium alginate. *Biomacromolecules*. 2005;6:2189–96. [[PubMed](#)] [[Google Scholar](#)]
78. Mi FL, Shyu SS, Linc YM, Wuc YB, Peng CK, Tsai YH. Chitin/PLGA blend microspheres as a biodegradable drug delivery system: A new delivery system for protein. *Biomaterials*. 2003;24:5023–36. [[PubMed](#)] [[Google Scholar](#)]
79. Abbah SA, Liu J, Lam RW, Goh JC, Wong HK. In vitro bioactivity of rhBMP-2 delivered with novel polyelectrolyte complexation shells assembled on an alginate microbead core template. *J Control Rel*. 2012;162:364–72. [[PubMed](#)] [[Google Scholar](#)]
80. Zhao Q, Mao Z, Gao C, Shen J. Assembly of multilayer microcapsules on CaCO<sub>3</sub> particles from biocompatible polysaccharides. *J Biomater Sci Polym Ed*. 2006;17:997–1014. [[PubMed](#)] [[Google Scholar](#)]
81. Marchetti M, Pisani S, Pietropaolo V, Seganti L, Nicoletti R, Orsi N. Inhibition of herpes simplex virus infection by negatively charged and neutral carbohydrate polymers. *J Chemotherapy*. 1995;7:90–96. [[PubMed](#)] [[Google Scholar](#)]
82. Carlucci MJ, Scolaro LA, Damonte EB. Inhibitory action of natural carrageenans on herpes simplex virus infection of mouse astrocytes. *Chemotherapy*. 1999;45:429–36. [[PubMed](#)] [[Google Scholar](#)]
83. Buck ChB, Thompson CD, Roberts JN, Muller M, Lowy DR, Schiller JT. Carrageenan is a potent inhibitor of papillomavirus infection. *PLoS Pathog*. 2006;2:0671–80. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]
84. Lev R, Long R, Mallonga L, Schnaram R, Reily W. Evaluation of Carrageenan as Base for Topical Gels. *Pharm Res*. 1997;14:42. [[Google Scholar](#)]
85. Lui Y, Schnaram R, Reily W. Evaluation of Carrageenan as Suppository Base. *Pharm Res*. 1997;14:41. [[Google Scholar](#)]

86. Clark DT, Gazi MI, Cox SW, Eley BM, Tinsley GF. The effects of Acacia arabica gum on the invitro growth and protease activities of periodontopathic bacteria. *J Clin Periodontol.* 1993;20(4):238–43. [[PubMed](#)] [[Google Scholar](#)]
87. Onishi T, Umemura S, Yanagawa M, Matsumura M, Sasaki Y, Ogasawara T, et al. Remineralization effects of gum arabic on caries-like enamel lesions. *Arch Oral Biol.* 2008;53(3):257–60. [[PubMed](#)] [[Google Scholar](#)]
88. Kenneth J Anusavice. *Gypsum products; in Phillips' Science of Dental Materials.* 11th edition. St. Louis, Missouri: Elsevier; 2003. p. 258. [[Google Scholar](#)]
89. Sharma BR, Naresh L, Dhuldhoya NC, Merchant SU, Merchant UC. Xanthan Gum—A Boon to Food Industry. *Food Promot Chron.* 2006;1:27–30. [[Google Scholar](#)]
90. GarcõÁa-Ochoa F, et al. Xanthan gum: production, recovery, and properties. *Biotechnol Adv.* 2000;18:549–79. [[PubMed](#)] [[Google Scholar](#)]
91. Katzbauer B. Properties and Applications of Xanthan Gum. *Polym Degrad Stabil.* 1998;59:81–84. [[Google Scholar](#)]
92. Mukhiddinov ZK, et al. Isolation and structural characterization of a pectin homo and ramnagalacturonan. *Talanta.* 2000;53:171–76. [[PubMed](#)] [[Google Scholar](#)]
93. Wang NL, Kiyohara H, Matsumoto T, Otsuka H, Hirano M, Yamada H. Polyclonal antibody against a complement-activating pectin from the roots of Angelica acutiloba. *Planta Med.* 1994;60:425–29. [[PubMed](#)] [[Google Scholar](#)]
94. Michaelsen TE, Gilje A, Samuelsen AB, Høgåsen K, Paulsen BS. Interaction between human complement and a pectin type polysaccharide fraction, PMII, from the leaves of Plantago major L. *Scand J Immunol.* 2000;52:483–90. [[PubMed](#)] [[Google Scholar](#)]
95. Chen CH, Sheu MT, Chen TF, Wang YC, Hou WC, Liu DZ. Suppression of endotoxin-induced proinflammatory responses by citrus pectin through blocking LPS signaling pathways. *Biochem Pharmacol.* 2006;72:1001–09. [[PubMed](#)] [[Google Scholar](#)]
96. Salman H, Bergman M, Djaldetti M, Orlin J, Bessler H. Citrus pectin affects cytokine production by human peripheral blood mononuclear cells. *Biomed Pharmacother.* 2008;62:579–82. [[PubMed](#)] [[Google Scholar](#)]
97. Ito T, Iida-Tanaka N, Koyama Y. Efficient in vivo Gene Transfection by Stable DNA/ PEI Complexes Coated by Hyaluronic Acid. *J Drug Target.* 2008;16:276–81. [[PubMed](#)] [[Google Scholar](#)]
98. Bourlais CL, Acar L, Zia H, Sado PA, Needham T, Leverage R. Ophthalmic Drug Delivery Systems—Recent Advances. *Prog Retin Eye Res.* 1998;17:33–58. [[PubMed](#)] [[Google Scholar](#)]
99. Bucolo C, Mangiafico S, Spadaro A. Methylprednisolone Delivery by Hyalobend Corneal Shields and Its Effects on Rabbit Ocular Inflammation. *J Ocul Pharmacol Ther.* 1996;12:141–49. [[PubMed](#)] [[Google Scholar](#)]
100. Price RD, Berry MG, Navsaria HA. Hyaluronic Acid: The Scientific and Clinical Evidence. *J Plast Reconstruct Aesth Surg.* 2007;60:1110–19. [[PubMed](#)] [[Google Scholar](#)]
101. McDonald CC, Kaye SB, Figueiredo FC, Macintosh G, Lockett C. A Randomized, Crossover, Multicenter Study to Compare the Performance of 0.1% (w/v) Sodium Hyaluronate with 1.4% (w/v) Polyvinyl Alcohol in the Alleviation of Symptoms Associated with Dry Eye Syndrome. *Eye.* 2002;16:601–07. [[PubMed](#)] [[Google Scholar](#)]
102. Aragona P, Di Stefano G, Ferreri F, Spinella R, Stilo A. Sodium Hyaluronate Eye Drops of Different Osmolarity for the Treatment of Dry Eye in Sjogren's Syndrome Patients. *Br J Ophthalmol.* 2002;86:879–84. [[PMC free article](#)] [[PubMed](#)] [[Google Scholar](#)]