

A Review on Colon Targeted Drug Delivery System

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Abstract: Colon targeted drug delivery systems (CTDDS) have gained considerable attention due to their ability to deliver drugs selectively to the colon for both local and systemic therapeutic effects. This approach is particularly beneficial in the treatment of colonic diseases such as ulcerative colitis, Crohn's disease, colorectal cancer, and for systemic delivery of peptides and proteins that are unstable in the upper gastrointestinal tract. Successful colon targeting requires protection of the drug from degradation in the stomach and small intestine, followed by controlled or abrupt release in the colon. Various strategies such as pH-dependent systems, time-controlled systems, microbially triggered systems, pressure-controlled systems, osmotic systems, and multiparticulate approaches have been developed. Natural and synthetic polymers play a crucial role in achieving colon specificity. This review discusses the anatomy and physiology of the colon, criteria for drug selection, conventional and novel approaches for colon targeting, and the role of biodegradable polymers, highlighting recent advances and future prospects in colon targeted drug delivery.

Keywords: Colon targeted drug delivery, pH-sensitive systems, microbially triggered systems, polysaccharides, prodrug approach, multiparticulate systems

I. INTRODUCTION

The primary goal of any drug delivery system is to deliver a therapeutic concentration of drug to the target site with minimal side effects. Colon targeted drug delivery systems (CTDDS) are designed to deliver drugs specifically to the colon while preventing premature release in the upper gastrointestinal tract (GIT). CTDDS is particularly useful for treating local colonic diseases such as inflammatory bowel disease (IBD), ulcerative colitis, Crohn's disease, amoebiasis, and colorectal cancer. Additionally, the colon is considered a promising site for systemic delivery of proteins, peptides, and drugs that undergo extensive first-pass metabolism or degradation in the stomach and small intestine.

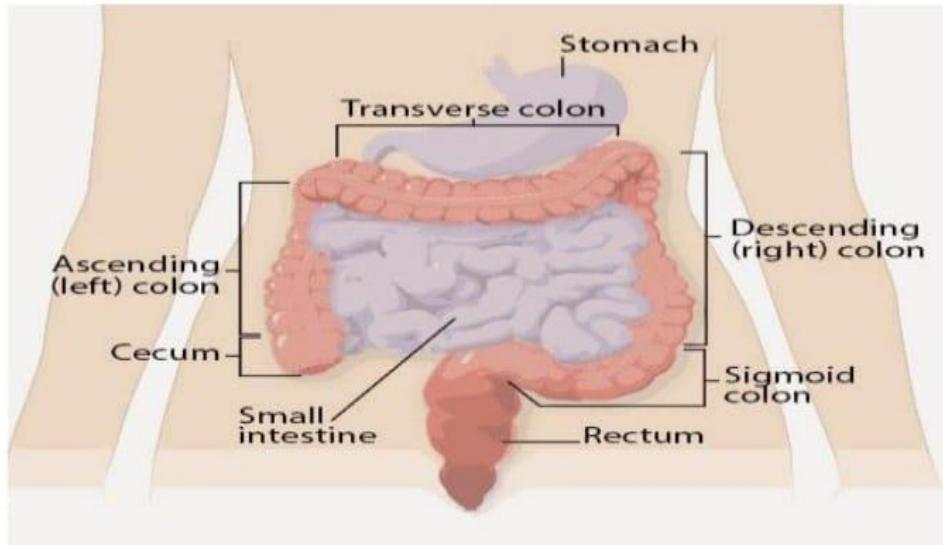
The colon offers several physiological advantages including lower enzymatic activity, longer transit time, and a rich microflora capable of degrading specific polymers. These factors make it an attractive site for targeted drug delivery. However, variations in pH, transit time, and microflora among individuals pose significant formulation challenges.

Anatomy and Physiology of the Colon

The colon is the terminal part of the gastrointestinal tract, extending from the ileocecal junction to the anus. It is divided into the ascending colon, transverse colon, descending colon, sigmoid colon, rectum, and anal canal. The pH of the colon typically ranges from 6.4 to 7.0, though it can vary depending on diet, disease state, and microbial activity.

The colon harbors a dense population of anaerobic bacteria (10^{11} – 10^{12} CFU/mL), which produce enzymes such as azoreductase, glycosidase, nitroreductase, and glucuronidase. These enzymes are exploited in microbially triggered colon drug delivery systems. The slower transit time (50–70 hours) allows prolonged contact of the drug with the mucosa, enhancing absorption of poorly absorbable drugs.





ADVANTAGES AND LIMITATIONS OF COLON TARGETED DRUG DELIVERY

Advantages

- Targeted delivery for colonic diseases.
- Reduced dose and systemic side effects.
- Protection of acid- and enzyme-labile drugs.
- Improved bioavailability of poorly absorbed drugs.
- Reduced dosing frequency and improved patient compliance.
- Suitable for peptide and protein delivery.

Disadvantages

- Inter- and intra-individual variability in pH and transit time.
- Poor site specificity in some systems.
- Influence of diet and disease on colonic microflora.
- Manufacturing complexity and reproducibility issues.
- Requirement of specialized polymers and technologies.

CRITERIA FOR DRUG SELECTION FOR CTDDS

Ideal candidates for colon targeted delivery include:

- Drugs poorly absorbed in the stomach and small intestine
- Drugs intended for local action in the colon
- Drugs unstable in acidic or enzymatic environments
- Drugs undergoing extensive first-pass metabolism
- Peptides and proteins
- Carrier selection depends on the physicochemical properties of the drug, disease condition, and desired release mechanism.



APPROACHES FOR COLON TARGETED DRUG DELIVERY**Primary Approaches****pH-Sensitive Drug Delivery Systems**

These systems utilize polymers that remain intact in acidic pH and dissolve at higher pH values found in the terminal ileum or colon. Commonly used polymers include Eudragit® L, S, and FS. Although simple and cost-effective, variability in intestinal pH may lead to premature drug release.

Time-Controlled (Delayed Release) Systems

Drug release is controlled by transit time through the GIT. A lag time is incorporated so that drug release occurs upon reaching the colon. However, variations in gastric emptying and intestinal transit time may affect site specificity.

Microbially Triggered Systems

These systems exploit colonic bacterial enzymes to degrade polymers or prodrugs, leading to drug release specifically in the colon. This approach offers better site specificity than pH- or time-dependent systems.

(a) Prodrug Approach

Prodrugs are pharmacologically inactive derivatives that are converted into active drugs by colonic enzymes. Azo-bond containing prodrugs such as sulfasalazine are classic examples.

(b) Polysaccharide-Based Systems

Natural polysaccharides remain intact in the upper GIT and are degraded by colonic microflora. Examples include pectin, guar gum, chitosan, dextran, inulin, amylose, and chondroitin sulfate.

Novel Approaches**Pressure-Controlled Drug Delivery Systems**

These systems utilize the higher luminal pressure generated by colonic peristalsis to rupture the dosage form and release the drug.

Pulsatile Drug Delivery Systems

Includes Pulsincap and PORT systems, where drug release occurs after a predetermined lag time due to swelling or osmotic pressure.

Multiparticulate Systems

Pellets, microspheres, nanoparticles, and granules offer uniform drug distribution, reduced local irritation, and improved bioavailability.

CODEST™ Technology

Combines pH-dependent and microbially degradable polymers to overcome limitations of single-mechanism systems.

Osmotically Controlled Drug Delivery Systems (OROS-CT)

These systems provide controlled drug release in the colon using osmotic pressure and enteric coatings.

POLYMERS USED IN COLON TARGETED DRUG DELIVERY**Natural Polymers**

- Guar gum
- Pectin
- Chitosan
- Dextran
- Inulin
- Amylose
- Locust bean gum
- Chondroitin sulfate

These polymers are biodegradable, biocompatible, non-toxic, and selectively degraded by colonic bacteria.

Synthetic Polymers

- Eudragit® series
- Ethyl cellulose



- Cellulose acetate phthalate
- Hydroxypropyl methylcellulose
- Polyvinyl acetate phthalate

Paper Title	Journal Name	Author(s)	Year	Conclusion
A Review on Development of Colon Targeted Drug Delivery System	International Journal of Applied Pharmaceutics	RozhanArifMuhammed, Saya Mohammed, SharadVisht, Ali Omar Yassen	2024	Reviews development of CTDDS over 36 years, highlighting conventional and novel approaches (pH-, time-, pressure-, osmotic-controlled, CODES, nanotechnology). Combined approaches may optimize colon drug delivery and reduce systemic side effects.
Colon Targeted Drug Delivery Systems: Based on Polymers	Journal of Pharmaceutical Negative Results	Saumil Patel, AdarshBhadoria, PragneshPatani	2022	Summarizes advances in polymer-based systems for colon targeting including nano-drug delivery systems; discusses challenges such as burst release, degradation, pH fluctuations, and how NDDS can improve therapeutic efficacy.
Colon Specific and Targeted Drug Delivery System (CDDS): A Review	Scholars Academic Journal of Pharmacy	Nimesh Agrawal, Navneet K. Verma, Saumya Srivastava, Sanch Srivastava	2024	Provides an overview on pH-sensitive, time-controlled, microbially triggered, prodrug, pressure-controlled, CODES, and osmotic systems for colon targeting and treatment of local colon diseases.
Advancements in Colon-Targeted Drug Delivery: A Comprehensive Review	AAPS PharmSciTech	Nouf D. Alshammari, RashaElkanayati, Sateesh Kumar Vemula,	2024	Comprehensive review of various colon targeting strategies; emphasizes innovative methods like hot-melt extrusion and 3D printing for enhanced release control and formulation precision.
Inulin-based Colon Targeted Drug Delivery Systems: Advancing Site-Specific Therapeutics	Discover Materials	(Various authors)	2025	Highlights inulin, a natural polysaccharide, as a promising vehicle for colon targeting due to biodegradability, microbiota-triggered degradation, and potential for delivering diverse drug classes; calls for further <i>in vivo</i> validation.

II. RESULTS AND DISCUSSION

The present review analyzed recent literature (2022–2025) focusing on colon targeted drug delivery systems (CTDDS), with emphasis on delivery approaches, polymer selection, and technological advancements. Analysis of the selected review articles revealed that CTDDS research has progressed significantly from conventional single-trigger systems to advanced multi-mechanistic delivery platforms. pH-sensitive, time-controlled, and microbially triggered systems were identified as the most widely studied primary approaches. Among these, microbially triggered systems demonstrated superior site specificity due to the unique enzymatic activity of colonic microflora. Prodrug strategies and polysaccharide-based carriers such as pectin, guar gum, dextran, and inulin were consistently reported to enhance colon-specific drug release. Recent reviews highlighted increasing utilization of multiparticulate systems including pellets, microspheres, and nanoparticles, which offer improved drug distribution, reduced local irritation, and enhanced bioavailability. Advanced technologies such as CODESTM, osmotic controlled systems (OROS-CT), pulsatile delivery

systems, and pressure-controlled formulations showed promising outcomes in overcoming the limitations of conventional systems.

Polymer-based CTDDS emerged as a dominant research focus, with both natural and synthetic polymers playing critical roles. Natural polysaccharides were favored for their biodegradability and microbial degradability, while synthetic polymers like Eudragit® grades provided better reproducibility and controlled release properties. Recent reviews also emphasized innovative manufacturing techniques such as hot-melt extrusion and 3D printing for achieving precise release profiles.

The findings of this review clearly indicate that colon targeted drug delivery remains a dynamic and evolving field. The effectiveness of CTDDS largely depends on a thorough understanding of colonic physiology, drug properties, and polymer behavior. While pH-dependent systems are simple and commercially feasible, their reliability is compromised by inter-individual variability in gastrointestinal pH. Similarly, time-controlled systems are influenced by gastric emptying and intestinal transit variations. Microbially triggered systems, particularly those employing polysaccharide carriers or prodrug approaches, offer greater specificity due to enzymatic activation unique to the colon. This makes them especially suitable for chronic colonic diseases such as ulcerative colitis and Crohn's disease. However, variability in gut microflora composition due to diet, disease, and antibiotic use remains a major challenge. Recent advancements emphasize combination approaches that integrate pH sensitivity, microbial degradation, and time-controlled mechanisms to improve site specificity and therapeutic outcomes. Multiparticulate and nanotechnology-based systems have gained importance due to their ability to minimize dose dumping and enhance mucosal contact. The growing interest in natural polymers such as inulin reflects a shift towards safer, biodegradable, and patient-friendly delivery systems. However, challenges related to scale-up, formulation stability, and regulatory approval still limit widespread clinical translation. Emerging technologies such as 3D printing and hot-melt extrusion show strong potential in addressing formulation complexity and achieving personalized medicine.

III. CONCLUSION

Colon targeted drug delivery systems represent an effective and promising strategy for the treatment of colonic disorders and for systemic delivery of drugs that are unstable or poorly absorbed in the upper gastrointestinal tract. This review demonstrates that significant progress has been made in the development of CTDDS through the use of diverse delivery approaches and advanced polymeric carriers. Among the available strategies, microbially triggered and polysaccharide-based systems offer superior colon specificity, while multiparticulate and osmotic systems enhance formulation reliability and patient compliance. The integration of conventional and novel approaches has emerged as a key trend in recent research to overcome physiological variability and improve therapeutic efficacy. Despite these advancements, challenges related to inter-individual variability, formulation complexity, and large-scale manufacturing persist. Future research should focus on combination delivery systems, advanced manufacturing technologies, and in vivo validation to facilitate clinical translation. With continued innovation, CTDDS has strong potential to improve patient outcomes and expand therapeutic options for colon-related diseases.

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