## TRAINING AND ASSESSMENT OF CISPLATIN-LOADED SUPERPARAMAGNETIC NANOPARTICLES MODIFIED WITH PCL-PEG COPOLYMERS ON A549 LUNG CANCER CELLS

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Magnetic iron-oxide nanoparticles have turned out as the major uses in biomedical and biological uses, and the mix of hyperthermia and controlled delivery of medicine is so attractive strength in cancer treatment. The goal of the study was to examine if cisplatin-encapsulated nanoparticles enhanced anti-carcinogenic impact of free cisplatin in cancerous cells of lung or not. Triblock copolymer PCL-PEG-PCL was prepared using ring-opening polymerization of  $\varepsilon$ -caprolactone (CL) in when poly (ethylene glycol) existed. The bulk features of the copolymers were manifested by Fourier transform infrared spectroscopy.

Cisplatin-loaded nanoparticles (NPs) were made ready using the technique of double emulsion solvent evaporation and specified for the performance of medicine encapsulation (%), content of medicine, size and morphology of the surface. In vitro release outline of cisplatin-loaded NP formulations was specified.

Cytotoxic tests were evaluated in lung carcinoma (A549)-treated cells using MTT assay technique. Moreover, the particles were specified by scanning of electron microscopy. Fourier transform infrared spectroscopy and X-ray powder diffraction. The proliferate-suppressing effect of cisplatin done far sooner when the medicine was encapsulated in magnetic nanoparticles compared to when it was free. Cisplatin-encapsulated magnetic nanoparticles improved significantly the reduction in IC50 rate. The in vitro cytotoxicity experiment revealed that  $Fe_3O_4$ -PCL-PEG magnetic nanoparticles did not have cytotoxic effects and were biologically compatible. The chemotherapeutic result of free cisplatin on cancerous lung cell is improved by its encapsulation in corrected magnetic nanoparticles. This approach has the capability to defeat some main constraint of foreseeable chemotherapy and can be a desirable approach for future applications in the treatment of lung cancer.