

Microfluidic Production of Lysolipid-Containing Temperature-Sensitive Liposomes

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- 2 Microfluidics Production of Lysolipid-Containing Temperature-Sensitive Liposomes
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17 KEYWORDS

- 18 Microfluidics, liposomes, thermosensitive, lysolipid, LTSLs, staggered herringbone micromixer,
- 19 cholesterol-free, indocyanine green (ICG), doxorubicin loading (DOX).

20 21 **SUMMARY**

- 22 The protocol presents the optimized parameters for preparing thermosensitive liposomes using
- 23 the staggered herringbone micromixer microfluidics device. This also allows co-encapsulation of
- 24 doxorubicin and indocyanine green into the liposomes and the photothermal-triggered release
- 25 of doxorubicin for controlled/triggered drug release.
- 26

27 ABSTRACT

- 28 The presented protocol enables a high-throughput continuous preparation of low temperature-29 sensitive liposomes (LTSLs), which are capable of loading chemotherapeutic drugs, such as 30 doxorubicin (DOX). To achieve this, an ethanolic lipid mixture and ammonium sulfate solution are 31 injected into a staggered herringbone micromixer (SHM) microfluidic device. The solutions are 32 rapidly mixed by the SHM, providing a homogeneous solvent environment for liposomes self-33 assembly. Collected liposomes are first annealed, then dialyzed to remove residual ethanol. An 34 ammonium sulfate pH-gradient is established through buffer exchange of the external solution 35 by using size exclusion chromatography. DOX is then remotely loaded into the liposomes with 36 high encapsulation efficiency (> 80%). The liposomes obtained are homogenous in size with Z-37 average diameter of 100 nm. They are capable of temperature-triggered burst release of 38 encapsulated DOX in the presence of mild hyperthermia (42 °C). Indocyanine green (ICG) can also
- 39 be co-loaded into the liposomes for near-infrared laser-triggered DOX release. The microfluidic
- 40 approach ensures high-throughput, reproducible and scalable preparation of LTSLs.
- 41

42 INTRODUCTION

- 43 LTSL formulation is a clinically relevant liposomal product that has been developed to deliver the
- 44 chemotherapeutic drug doxorubicin (DOX) and allows efficient burst drug release at clinically

45 attainable mild hyperthermia ($T \approx 41 \text{ °C}$)¹. The LTSL formulation consists of 1,2-dipalmitoyl-sn-46 glycero-3-phosphocholine (DPPC), the lysolipid 1-stearoyl-2-hydroxy-sn-glycero-3-47 phosphatidylcholine (MSPC; M stands for "mono") and PEGylated lipid 1,2-distearoyl-sn-glycero-48 3-phosphoethanolamine-N-[methoxy(polyethylene glycol)-2000] (DSPE-PEG₂₀₀₀). Upon reaching 49 the phase transition temperature ($T_m \approx 41$ °C), the lysolipid and DSPE-PEG₂₀₀₀ together facilitate the formation of membrane pores, resulting in a burst release of the drug². The preparation of 50 51 LTSLs primarily uses a bulk top-down approach, namely lipid film hydration and extrusion. It 52 remains challenging to reproducibly prepare large batches with identical properties and in 53 sufficient quantities for clinical applications³.

54

55 Microfluidics is an emerging technique for preparing liposomes, offering tunable nanoparticle 56 size, reproducibility, and scalability³. Once the manufacturing parameters are optimized, the 57 throughput could be scaled-up by parallelization, with properties identical to those prepared at 58 bench scale^{3–5}. A major advantage of microfluidics over conventional bulk techniques is the ability 59 to handle small liquid volumes with high controllability in space and time through 60 miniaturization, allowing faster optimization, while operating in a continuous and automated 61 manner⁶. Production of liposomes with microfluidic devices is achieved by a bottom-up 62 nanoprecipitation approach, which is more time and energy efficient because homogenization processes such as extrusion and sonication are unnecessary⁷. Typically, an organic solution (e.g. 63 64 ethanol) of lipids (and hydrophobic payload) is mixed with a miscible non-solvent (e.g. water and 65 hydrophilic payload). As the organic solvent mixes with the non-solvent, the solubility for the 66 lipids is reduced. The lipid concentration eventually reaches a critical concentration at which the 67 precipitation process is triggered⁷. Nanoprecipitates of lipids eventually grow in size and close 68 into a liposome. The main factors governing the size and homogeneity of the liposomes are the 69 ratio between the non-solvent and solvent (i.e. aqueous-to-organic flow rate ratio; FRR) and the 70 homogeneity of the solvent environment during the self-assembly of lipids into liposomes⁸.

71

72 Efficient fluid mixing in microfluidics is therefore essential to the preparation of homogeneous 73 liposomes, and various designs of mixers have been employed in different applications⁹. Staggered herringbone micromixer (SHM) represents one of the new generations of passive 74 75 mixers, which enables high throughput (in range of mL/min) with a low dilution factor. This is 76 superior to traditional microfluidics hydrodynamic mixing devices^{8,10}. The SHM has patterned herringbone grooves, which rapidly mix fluids by chaotic advection^{9,11}. The short mixing timescale 77 78 of SHM (< 5 ms, less than the typical aggregation time scale of 10-100 ms) allows lipid self-79 assembly to occur in a homogenous solvent environment, producing nanoparticles with uniform 80 size distribution^{3,12}.

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The preparation of LTSLs with microfluidics is, however, not as straightforward compared to conventional liposomal formulations due to the lack of cholesterol⁸, without which lipid bilayers are susceptible to ethanol-induced interdigitation^{13–15}. Until now, the effect of residual ethanol presents during the microfluidics production of liposomes has not been well understood. The majority of the reported formulations are inherently resistant to interdigitation (containing cholesterol or unsaturated lipids)¹⁶, which unlike LTSLs are both saturated and cholesterol-free. 89 The protocol presented herein uses SHM to prepare LTSLs for temperature triggered-release drug 90 delivery. In the presented method, we ensured the microfluidics-prepared LTSLs are nano-sized 91 (100 nm) and uniform (dispersity < 0.2) by dynamic light scattering (DLS). Furthermore, we 92 encapsulated DOX using the transmembrane ammonium sulfate gradient method (also known as remote loading)¹⁷ as a validation of the integrity of the LTSL lipid bilayer. Remote loading of DOX 93 94 requires the liposome to maintain a pH-gradient in order to achieve high encapsulation efficiency 95 (EE), which is unlikely to happen without an intact lipid bilayer. In this presented method, 96 distinctive from typical microfluidic liposome preparation protocols, an annealing step is required 97 before the ethanol is removed to enable the remote loading capability; i.e. to restore the integrity 98 of the lipid bilayer.

99

As mentioned previously, hydrophilic and hydrophobic payloads can also be introduced to the initial solutions for the simultaneous encapsulation of payloads during the formation of LTSLs. As a proof-of-concept, indocyanine green (ICG), an FDA-approved near-infrared fluorescent dye, which is also a promising photothermal agent, is introduced to the initial lipid mixture and successfully co-loaded into the LTSLs. An 808 nm diode laser is used to irradiate the DOX/ICGloaded LTSLs and successfully induce photothermal heating-triggered burst release of DOX within 5 min.

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All the instruments and materials are commercially available, ready-to-use, and without the need for customization. Since all the parameters for formulating LTSLs have been optimized, following this protocol, researchers with no prior knowledge of microfluidics could also prepare the LTSLs, which serves as the basis of a thermosensitive drug delivery system

111 which serves as the basis of a thermosensitive drug delivery system.
112

113 **PROTOCOL**

- 114115 **1. Equipment setup**
- 116

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117 **1.1.** Assemble the syringe pumps and SHM as follows.

118
119 1.1.1. Connect the "To Computer" port of the secondary syringe pump (Pump 02, for aqueous solution) to the "To Network" port of the master syringe pump (Pump 01, for ethanol lipid solution) using Pump to Pump network cable (Figure 1, yellow).

- 123 1.1.2. Connect the "To Computer" port of the master pump to the "RS232 Serial" port of the
 124 computer using PC to Pump network cable (Figure 1, blue).
- 126 1.1.3. Connect tubing to each of the inlets and outlets of the SHM using a nut and ferrule. Convert
 the terminal of the tubing for both inlets to female Luer using another nut and ferrule and a union
 assembly. Longer tubing of the inlets allows easier attachment to the syringes (Figure 2).
- 130 **1.2.** Set up the **pump control** software.
- 132 1.2.1. Assign the address of the master syringe pump and secondary syringe pump to "Ad:01"

133	and "Ad:02", respectively, using the "Setup" button of the syringe pump. This only needs to be
134	done for the first time.
135	
136	1.2.2. Open the pump control software on the computer. The two syringe pumps should be
137	detected automatically, followed by a beeping sound. Otherwise, click Pumps and Search for
138	pumps to update the connection. (Figure 3).
139	
140	1.2.3. Assign Diameter to 12.45 (mm) by choosing "HSW Norm-Ject 5 cc (Dia=12.45)".
141	
142	1.2.4. Assign Rate to 0.25 mL/min for Pump 01 (ethanol lipid solution) and 0.75 mL/min for Pump
143	02 (aqueous solution). The flow rates correspond to a total flow rate (TFR) of 1 mL/min and
144	aqueous-to-ethanol flow rate ratio (FRR) of 3.
145	
146	1.2.5. Assign Volume to any values above 5 mL.
147	
148	NOTE: The targeted infusion volume is set greater than the loaded liquid volume considering the
149	void volume of the tubing.
150	
151	1.2.6. Select INF (infusion) mode for both pumps.
152	
153	1.2.7. Press Set to confirm the settings.
154	
155	2. Prepare the LTSLs
156	
157	2.1. Prepare a LTSL10 or LTSL10-ICG lipid mixture (see Table 1).
158	
159	2.2. Withdraw 1 mL of lipid mixture and at least 3 mL of (NH ₄) ₂ SO ₄ solution using two 5 mL Luer
160	lock syringes.
161	
162	2.3. Install the two syringes onto the syringe pumps in the upright position by sliding the barrel
163	flange of the syringe to the syringe retainer of the pump, and the plunger flange of the syringe
164	<mark>to the pusher block of the pump (Figure 4).</mark>
165	
166	2.4. Wrap the end of the heating tape to the syringes with the aqueous solution. Wrap the other
167	end of the heating tape and temperature probe of the thermostat around the syringe with the
168	lipid solution. It is helpful to practice this step with empty syringes in place in order to ease the
169	assembly process (Figure 5A).
170	
171	2.5. Connect the two syringes to the female Luer adaptors of the corresponding inlets of the
172	SHM. Make sure the syringes containing the lipid mixture and (NH4) ₂ SO ₄ solutions are connected
173	ethanol inlet and aqueous inlet, respectively. Adjust the plunger position to remove air bubbles
174	from the syringes (Figure 5B).
175	
176	NOTE: Ensure the syringes are still securely positioned onto the syringe retainer of the pumps.

2.6. Heat up the syringes to above 51 °C using the heating tape using a 10 s heating session. Allow
the thermostat to update the temperature of the syringes. Repeat this step in the following steps
to maintain the temperature during the infusion.
CAUTION: Turn off the heating tape after 10 s to prevent temperature overshoot and allow the
thermostat to undate the actual temperature. The heating tape should also be handled with care
as its temperature rises very quickly. Heating continuously may damage the equipment and
suring as due to the time delay of the thermostat for undating the measured temperature
syninges, due to the time delay of the thermostat for updating the measured temperature.
2.7. Once the temperature is above 51 °C, we the environe number by pressing Dup All in the numb
2.7. Once the temperature is above 51°C, run the syringe pumps by pressing kun All in the pump
control software (Figure 3).
2.8. Ensure the fluid flow is free of air bubbles and any leakage. Dispose the initial volume
(around 0.5 mL) of liquid from the outlet as waste.
NOTE: This initial waste volume is not definite and depends on the internal volume of the setup,
which is the volume for fluid to travel from the syringes through the tubing and SHM to the outlet.
2.9. Collect the rest of the liquid as liposome samples into a microcentrifuge tube or bijou vial.
2.10. Pause/stop the infusion when the liquid in either of the syringes are almost empty.
NOTE: The pumps should be stopped manually, since the pumps may not accurately detect the
position when the syringes are empty.
2.11. Place the collected liposome solutions in a 60 °C water bath to anneal for 1.5 h.
NOTE: This step is essential in enabling drug loading into the liposomes.
2.12. Transfer the solutions to dialysis tubes. Dialyze the solutions against 1 L of 240 mM
$(NH_4)_2SO_4$ at 37 °C for at least 4 h to obtain purified liposomes.
NOTE: The protocol can be paused here. Liposomes at this step are at 5 mM of phospholipid
Purified linesomes can be stored at Λ °C
2.12 To clean the SUM for repeated use fluch the SUM seguentially with deterined water
2.13. TO clean the SHIVI for repeated use, flush the SHIVI sequentially with delonized water,
ethanol and dry with hitrogen gas.
2. Demote leading of DOV into LTCLs by transmission was directed in the
3. Remote loading of DOX into LISLs by transmembrane pH gradient
3.1. Exchange external buffer to HEPES-buffered saline (HBS) by using size exclusion
chromatography (SEC) to establish a transmembrane pH gradient .

	3.1.1. Add a total of 25 mL of HBS to the top of a SEC column to prepare the column. Allow all eluent to elute through the column and dispose the eluate.
	3.1.2. Add 1 mL of dialyzed liposomes, prepared from step 2.12, to the column and dispose the elute.
	3.1.3. Add 1.5 mL of HBS to the column and dispose the elute.
	3.1.4. Add 3 mL of HBS to the column and collect the 3 mL of elute.
N C	NOTE: The protocol can be paused here. Liposomes are collected at this step and are at 1.67 mM of phospholipid. Buffer exchanged liposomes can be stored at 4 °C.
	3.2. Incubate LTSLs with doxorubicin (DOX) and purify LTSLs.
	3.2.1. Add DOX solution in 1:20 DOX-to-phospholipid molar ratio into 1 mL of buffer-exchanged iposomes solution (1.67 mmol) contained in a bijou vial. This can be achieved by adding 48.4 μL of 1 mg/mL DOX solution (83.4 μmol).
	3.2.2. Place the bijou vial in a 37 °C water bath for 1.5 h to allow DOX loading into the liposomes.
i	3.2.3. Mix 10 μL of the liposomes with 170 μL of HBS and 20 μL of 1% (v/v) Triton X-100 solution in a black 96-well plate. Repeat for three wells. These wells correspond to the "before purification" DOX content.
300	8.2.4. In case of preparing LTSL10-ICG, mix 40 μL of the liposomes with 160 μL of DMSO in a clear 96-well plate. Repeat for three wells. These wells correspond to the "before purification" ICG content.
	3.2.5. Purify the liposome solution as described in step 3.1.
	NOTE: To reuse the column for future purification, clean the column from free DOX by first adding 1 mL of diluted 0.5 M NaOH solution before performing step 3.1.1. Free DOX in red will turn violet-blue and elute through the column quickly.
	3.2.6. Mix 30 μ L of the purified liposomes solution with 150 μ L of HBS and 20 μ L of 1% (v/v) Triton X-100 solution in a black 96-well plate. Repeat for three wells. These wells correspond to the "after purification" DOX content.
	3.2.7. In case of LTSL10-ICG, mix 40 μ L of the purified liposomes solution with 160 μ L of DMSO in a clear 96-well plate. Repeat for three wells. These wells correspond to the "after purification" ICG content.
	3.2.8. Measure the DOX fluorescence intensity of the wells before (step 3.2.3) and after (step

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265 3.2.6) purification, using a microplate reader (λ_{ex} = 485 nm, λ_{em} = 590 nm).

267 3.2.9. Calculate the encapsulation efficiency of DOX (DOX EE) by taking the ratio of the 268 fluorescence intensities before and after purification.

$$DOX \, EE(\%) = \frac{\text{F. I. after purification}}{\text{F. I. before purification}} \times 100$$

269

270
271 3.2.10. Measure the ICG absorbance of the wells before and after purification, using a microplate
272 reader (600 to 1000 nm).

273

3.2.11. Calculate the encapsulation efficiency of ICG (ICG EE) by taking the ratio of the
absorbance at 792 nm before and after purification, taking into account the dilution factor (3
times) during the purification.

 $ICG \ EE(\%) = \frac{Absorbance_{\lambda = 792 \ nm} \ after \ purification \times 3}{Absorbance_{\lambda = 792 \ nm} \ before \ purification} \times 100$

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280 4. Dynamic Light Scattering (DLS)

4.1. Add 50 μL of liposomes solution (step 2.12) to 450 μL of deionized water in a disposable
polystyrene cuvette, to achieve a final salt concentration of 10 mM, which is suitable for DLS
measurements.

4.2. Place the cuvette inside the DLS instrument and perform the measurement according to themanufacturer's instructions.

289 4.3. Record the mean Z-average diameter and dispersity of three measurements for each sample.

291 **5. Differential scanning calorimetry (DSC)**

5.1. Concentrate 1 mL of the liposomes samples (step 2.12) with a centrifugal filter unit to 0.5 mL
(final lipid concentration of 10 mM). Using a fixed-angle rotor, spin at 7500 x g for approximately
15 min.

5.2. Transfer 20 μL of (NH₄)₂SO₄ solution and liposomes samples to two respective DSC pans. Seal
 the pans with DSC hermetic lids using the DSC sample press kit.

5.3. Measure the sample from 30 °C to 60 °C at a heating rate of 1 °C/min using a differential
 scanning calorimeter.

- 5.4. Analyze the data with appropriate software. Take the phase transition temperature (T_m) as the onset of the phase transition (melting peak), which is measured by the x-intercept of the tangent of the point of maximum slope.
- 306

307 6. Doxorubicin release 308 309 6.1. Preheat HBS at designated temperature (37 or 42 °C) using a water bath. Prepare an ice 310 water bath for quenching the samples. 311 312 6.2. Add 100 µL of purified DOX-loaded liposomes (step 3.2.5) into 1.9 mL of HBS in a 313 microcentrifuge tube. Place the tube into the water bath of the designated temperature. 314 315 6.3. Withdraw immediately 200 μ L of samples from the tube and quickly place it in the ice water 316 bath to quench any subsequent drug release. This sample corresponds to the initial (t = 0) time 317 point. 318 319 6.4. Withdraw 200 μ L of samples at subsequent time points (t = 5, 10, 15, 30, 60 min) and quickly 320 place it in the ice water bath to quench any drug release. 321 322 6.5. Mix 50 μ L of sample of each time point with 150 μ L of HBS in a black 96-well plate. Measure 323 the DOX fluorescence intensity using a plate reader. 324 325 6.6. Add 20 μL of 1% (v/v) Triton X-100 into random selected wells prepared in step 6.5. Measure 326 the DOX fluorescence intensity of these wells using a plate reader. These values correspond to 327 the fully released (t = ∞ ; 100% release) time point. 328 329 6.7. Calculate and plot the percentage of DOX released by interpolating the fluorescence 330 intensity of each time points (I(t)), compared to the initial and fully released) value. $DOX \ Release(\%) = \frac{I(t) - I(0)}{I(\infty) - I(0)} \times 100$ 331 332 333 7. Laser Heating and Triggered Release 334 335 7.1. Set water bath temperature to 37 °C and allow the temperature to stabilize. 336 337 7.2. Add 200 μ L of DOX loaded LTSL10-ICG ([ICG] = 10 μ g/mL) to a clear 96-well plate, then place 338 it in the water bath, keep the bottom immersed in water. 339 340 7.3. Set the current of the laser system to 2.27 A. Place the collimator of the laser system at 5 cm 341 vertically above the surface of the 96-well plate, which corresponds to an energy flux of 0.5 342 W/cm² [Figure 6]. 343 344 CAUTION: The laser system should be operated in compliance with relevant laser safety 345 measures. 346 347 7.4. Switch on the laser and monitor the temperature using a fiber optic temperature probe every minute. 348 349

350 7.5. At the time points of 5 min and 10 min, withdraw 10 μ L of the laser-irradiated LTSL10-ICG 351 solution and mix with 190 μ L of HBS in a black 96-well plate. Repeat for three wells. These wells 352 correspond to the "laser-induced release" DOX content.

353

354 7.6. Mix 10 μL of the liposomes with 190 μL of HBS in black 96-well plate. Repeat for three wells.
355 These wells correspond to the "0% released" DOX content.

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357 7.7. Mix 10 μ L of the liposomes with 170 μ L of HBS and 20 μ L of 1% (v/v) Triton X-100 solution in 358 a black 96-well plate. Repeat for three wells. These wells correspond to the "100% released" DOX 359 content.

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361 7.8. Measure the percentage of DOX release as described in step 6.7.

362

363 **REPRESENTATIVE RESULTS:**

The preparation of LTSLs by microfluidics requires the lipid composition of DPPC/MSPC/DSPE-PEG₂₀₀₀ (80/10/10, molar ratio; LTSL10). **Figure 7A** (left) shows the appearance of as-prepared LTSL10 from step 2.9, as a clear and non-viscous liquid. LTSL10 formulation is developed from the conventional formulation, LTSL4 (DPPC/MSPC/DSPE-PEG₂₀₀₀, 86/10/4, molar ratio) since LTSL4 forms a gel-like viscous sample, as indicated by the large amount of air bubbles trapped in the sample (**Figure 7A**; right).

370

DLS measurement of LTSL10 (Figure 7B, red) showed that the Z-Average diameter and dispersity
 of LTSL10 were 95.28 ± 7.32 nm and 0.100 ± 0.022, respectively, indicating the success of the
 experiment. Figure 7B (gray) also shows a suboptimal sample, which was prepared at 20 °C,
 where larger and more dispersed liposomes were obtained.

375

376 Figure 7C shows that the DOX EE of LTSL10. DOX EE should usually be around 80%. LTSLs prepared 377 by the conventional method of lipid film hydration with extrusion (LF) are included for 378 comparison, prepared as described elsewhere¹⁸. DOX EE of LTSL4 (LF) and LTSL10 (LF) showed 379 decent DOX loading of around 70% and 50%, respectively. Annealing of as-prepared LTSL10 (step 380 2.11) is essential to enable DOX loading. In the absence of the annealing step, low DOX EE (< 20%) 381 was persistent, regardless of incubation temperature (20 °C to 42 °C) and duration (1 to 24 h). 382 This indicated the failure of LTSL10 to maintain a transmembrane pH gradient, where DOX was 383 instead loaded passively or by adsorption. By annealing the as-prepared LTSL10, DOX EE 384 increased significantly to a mean of 85%, indicating the success of the remote loading of DOX and 385 the presence of the transmembrane pH gradient.

386

Figure 7D shows the DOX release profile of LTSL10. At 37 °C, the release of encapsulated DOX
over 60 min was about 10%. In contrast, at 42 °C, all of the encapsulated DOX was released within
5 minutes, demonstrating the temperature-sensitivity of LTSL10. Similar results were observed
with LTSL10 (LF) as a control.

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Figure 8 shows the phase transition temperature (T_m) of LTSL10 characterized using differential scanning calorimetry (DSC). Dotted lines as tangent of the point of maximum slope, are added as

a visual aid of the onset phase transition temperature (x-intercept of the tangent line). LTSL10 has a relatively broad phase transition with onset at 41.6 °C and peak at 42.6 °C. Similar results were observed with LTSL10 (LF), suggesting a minor difference between the preparation techniques. As a comparison, LTSL4 (LF) has a lower and sharper phase transition, in agreement with the literature¹.

399

400 Figure 9 shows the characterization of LTSL10-ICG. Effect of initial ICG concentration on size 401 (Figure 9A) and loading efficiencies of DOX and ICG (Figure 9B) are categorized into three 402 concentration ranges. At low ICG concentration (ICG-to-lipid molar ratio of 0.003; initial 403 concentration of 60 µM ICG and 20 mM lipid), Z-average, dispersity and DOX EE were similar to 404 LTSL10 without ICG loading; ICG EE was around 75%. The efficient co-loading of DOX and ICG into 405 LTSL10 can be achieved at this ICG concentration. At intermediate ICG concentrations, while the size and dispersity of the samples were satisfactory, both DOX and ICG EE were reduced. In 406 407 particular, the decrease in DOX EE indicated the disruption of the liposomal membrane and thus, 408 the pH-gradient. At high ICG concentrations, samples were again gelled; DOX and ICG EE were 409 both significantly decreased.

410

LTSL10-ICG was irradiated with near-infrared laser (section 7) to induce photothermal heating and triggered the release of DOX (**Figure 10**). Upon laser irradiation, the sample first heated up to 49.7 °C with a gradual reduction of temperature. Subsequent laser irradiation increased the temperature to 36.7 °C. Quantification of the released DOX indicated that a complete burst release of encapsulated DOX was achieved after the first heating cycle. This was as expected since the temperature reached above 42 °C, in agreement with the DOX release profile shown in **Figure 7D**. In contrast, LTSL10 without ICG cannot provide photothermal heating, and thus did not

418 release DOX upon laser irradiation.

419420 FIGURE LEGENDS

Figure 1: Photograph of the syringe pumps setup. The "To Network" port of the master pump
(Pump 01) is attached to the "To Computer" of the secondary pump (Pump 02; yellow); the "To
Computer" port of the master pump is attached to the RS-232 port of the computer (blue).

424

Figure 2: Photograph of the SHM setup. (A) Assembled view of the SHM setup. (B) Exploded view
of the SHM setup. Inlets and outlets of the SHM are connected to tubing using a nut and ferrule.
The tubing of both inlets is extended by a longer tubing with nut and ferrule on each end,
terminated by a female Luer adapter using a union assembly.

429

Figure 3: Interface of the pump control software. The two syringe pumps should be detected
automatically upon initiating the software; otherwise, click Pumps on the top left corner and
Search for pumps. Parameters to be configured are highlighted in red boxes.

433

Figure 4: Photograph of the syringe pumps and installation of a syringe. (A) Syringe retainer
bracket and syringe retainer thumbscrew (2, one on each side) of the syringe pump (yellow box).
Pusher block, adjustment thumbscrew, and drive-nut button (white button on the left) of the

437 syringe pump (green box). (B) Position of an installed syringe on the syringe pump.

438

Figure 5: Photograph of the assembly of syringes, heating element and SHM. (A) Assembly of
syringes, heating tape, and thermostat. (B) Assembly of syringes, heating tape, thermostat, and
SHM.

- 442
- Figure 6: Photograph of the laser setup. (A) Photograph of the fiber coupled laser system during
 operation. (B) Position of the collimator 5 cm above the 96-well plate.
- 445

446Figure 7: Characterization of LTSL10. (A) Photograph of (left) LTSL10 and (right) LTSL4, before447dialysis. LTSL10 appeared as clear and non-viscous liquid, while LTSL4 was gel-like and viscous.448(B) Z-average diameter and dispersity of 10 mM of LTSL10 prepared at 20 and 51 °C. Solid bars449and open circles (O) indicate Z-average diameter and dispersity, respectively. (C) DOX EE of LTSL4450(LF; white), LTSL10 (LF; white), and LTSL10 before (gray) and after annealing (red). (D) DOX451release of LTSL10 (circle) and LTSL10 (LF; cross) at 37 °C (black) and 42 °C (red). Data represent452mean ± SD of at least three independent experiments. ***p < 0.001; two-tailed unpaired t-tests.</td>453

454 Figure 8: Thermal properties of LTSL10. Thermographs of LTSL4 (LF), LTSL10 (LF), and LTSL10
 455 characterized by DSC. Dotted lines are added as a visual aid of the onset phase transition
 456 temperature. Data represent the mean of at least three independent experiments.

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Figure 9: Characterization of LTSL10-ICG. (A) Z-average diameter (red) and dispersity (blue) of
 ICG-loaded LTSL10. (B) DOX EE (red) and ICG EE (green) of ICG-loaded LTSL10. Data represent the
 mean ± SD of at least three independent experiments.

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Figure 10: Laser-induced photothermal heating triggered the release of DOX -loaded LTSL10
 and LTSL10-ICG. (A) The temperature of irradiated samples and (B) DOX release of DOX-loaded
 LTSL10 (blue) and LTSL10-ICG (red) during the laser-induced photothermal heating. Data
 represent the mean ± SD of at least three independent experiments.

- 466
- 467 Table 1: Lipid mixtures, buffers, and stock solutions.

468469 **DISCUSSION**

470 The presented protocol describes the preparation of low temperature-sensitive liposomes 471 (LTSLs) using a staggered herringbone micromixer (SHM). The LTSL10 formulation enables 472 temperature-triggered burst release of doxorubicin within 5 minutes at a clinically attainable hyperthermic temperature of 42 °C. Indocyanine green (ICG) can also be co-loaded for 473 474 photothermal heating triggered the release of DOX. The method relies on: (i) self-assembly of 475 phospholipids into liposomes under a homogenized solvent environment provided by the rapid, 476 chaotic mixing of ethanol and ammonium sulfate solution in the SHM¹¹; (ii) annealing of the liposomes to preserve the integrity of the lipid bilayer essential for DOX loading; and (iii) remote 477 478 loading of DOX into LTSLs by an ammonium sulfate pH-gradient¹⁷. Since the equipment utilized 479 in this protocol is commercially available off-the-shelf and the parameters are optimized, this 480 approach is manageable for users without prior knowledge or microfluidic experience.

481

482 One of the most critical steps within the protocol is to ensure the whole assembly is properly 483 secured and fluid can be properly infused (step 2.5). Since the reproducibility of the self-assembly 484 of liposomes relies on a homogenized solvent environment, any instability, such as dislodgement 485 of syringes or introduction of air bubbles, will disturb the stability of the fluid flow and result in 486 suboptimal liposome size and dispersity. This is also the rationale behind step 2.8, where the 487 volume, consisting of the fluid initially occupying the channel and before a stable flow is reached, 488 should be disposed of.

489

490 A second critical step for a successful experiment is the annealing step, to enable high DOX EE 491 (step 2.11). In cholesterol-free liposomes, micelle-forming membrane components (i.e. MSPC 492 and DSPE-PEG₂₀₀₀) will accumulate at grain boundaries with a high degree of defects to 493 accommodate a high membrane curvature². These arrangements thermodynamically favor the 494 formation and stabilize membrane pores, opened liposomes, or bilayer discs. The low DOX EE of 495 LTSL10 without annealing suggested that porous structures existed even below T_m, resulting in 496 the absence of the pH gradient required for DOX loading (Figure 7C). The premature formation 497 of pores below T_m was not observed for LTSLs prepared by lipid film (LTSL4 (LF) and LTSL10 (LF)), 498 where annealing is not required. Furthermore, cholesterol-containing formulations prepared by 499 microfluidics also do not require annealing⁸. It is, therefore, speculated that the premature 500 formation of pores is a combined effect of the presence of ethanol during the preparation and 501 the lack of cholesterol in the lipid bilayer. Structural defects within the bilayer membrane have 502 been reported to be eliminated by annealing the liposomes above T_m, allowing lipid molecules to 503 redistribute homogeneously and defects to be corrected¹⁹. In addition, the annealing process is 504 an irreversible process where annealed liposomes returning to a temperature below T_m do not 505 recreate leaky vesicles¹⁹, in agreement with the annealed LTSL10.

506

507 The nature of microfluidic preparation of liposome is a nanoprecipitation process, which requires 508 two miscible solvents with distinctive solubility for the lipids: typically, ethanol (as a lipid solvent) 509 and aqueous solution (as a lipid non-solvent). Thus, the presence of ethanol is unavoidable. 510 Therefore, formulations that are sensitive or prone to alcohol-induced interdigitation¹³, such as cholesterol-free liposomes²⁰, may require modification of the formulation or re-optimization of 511 512 the protocol. As demonstrated with the preparation of LTSL4, the highly viscous gel was obtained, 513 (Figure 7A), which was likely due to the formation of an interdigitated gel phase¹⁵. On the other hand, LTSL10, with its higher polymer concentration that prevents interdigitation²¹, was prepared 514 515 successfully. Consequently, an ethanol removal procedure also must be performed; here, it was 516 removed simply by dialysis. While on-chip continuous purification techniques such as tangential 517 flow filtration (capable of both ethanol removal and buffer exchange) have been developed^{22, 23}, 518 their implementation (as one-chip or modular) are beyond the aim of this protocol. Nonetheless, 519 in the future, we expect these modular or standardized designs to be optimized and increased in 520 availability, streamlining the microfluidic production process. 521

522 Another limitation of the protocol is the sample loss due to the travelling distance of the liquids, 523 namely the initial waste volume (step 2.8) as well as the last fraction of solutions that would be 524 injected but wouldn't reach the outlet. These sample losses are almost unavoidable and may 525 contribute to a significant portion of the preparation volume at bench-scale production, especially when a small volume or precious samples are to be prepared. When necessary, the
 lipid recovery could be quantified by high performance liquid chromatography-evaporative light
 scattering detector method that enables rapid quantification of lipid concentrations²⁴. However,

- 529 once the process is optimized and scaled up, such as by using a larger syringe or fluid reservoir,
- the throughput could be further scaled up and sample losses would be less significant.
- 531

532 The main difference between this method and the existing preparation method is that liposomes 533 are self-assembled in a controllable solvent environment in a high-throughput, continuous 534 manner. The lipid film method is a batch manufacturing process and requires size 535 homogenization. While very feasible at a bench-scale, it remains challenging to scale up for 536 clinical production. Within existing microfluidic techniques, for instance, microfluidic 537 hydrodynamic focusing, SHM offers a shorter mixing timescale¹¹ and a greater throughput (in the 538 range of mL/min) with lower dilution factor; notwithstanding the preparation of LTSLs has not 539 been reported using other microfluidic devices so far. The major advantage of our approach is 540 the high-throughput, scalable production of thermosensitive liposomes.

541

542 Thus far, the microfluidics protocol offers continuous production of LTSL10 with drug loading 543 capability. Payloads other than DOX and ICG are also viable. However, ethanol removal by 544 dialysis, drug remote loading, and purification by SEC column remain as batch processes and are 545 the bottlenecks of the overall formulation process. Future development could focus on utilizing 546 microfluidic approaches (such as tangential flow filtration) to enhance the throughput of these 547 downstream processes and increase the scalability of the protocol.

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553 DISCLOSURES

554 The authors have nothing to disclose.

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