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## Formulation and evaluation of cuo-enhanced levofloxacin nanoparticles for targeted therapy against *Salmonella typhi*

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### Abstract

The CuO-loaded levofloxacin nanoparticles (CuO-LFNs) act as an antibacterial agent. In this study, the CuO-loaded levofloxacin nanoparticles (CuO-LFNs) are characterized using advanced techniques such as FTIR, SEM, TEM, and HPLC. These characterization methods reveal the structural integrity, particle morphology, and surface chemistry of the Nano carriers. In vitro release experiments are conducted using simulated body fluid at 37 °C to assess the dissolution and drug release profiles. The data obtained from these experiments are analysed with different kinetic models, showing a slow dissolution rate over 12 to 24 hours, which indicates sustained release behavior of the CuO-LFNs.

The antimicrobial efficacy of CuO-LFNs against *Salmonella typhi* is evaluated, and the results demonstrate a significant enhancement in antibacterial activity compared to free levofloxacin. The experimental data show that CuO-LFNs possess a particle size of 140.1 nm, with a zeta potential value of -19.8 mV, indicating good stability in solution. The encapsulation efficiency of the nanoparticles is found to be between 87-91%, highlighting the successful loading of the antibiotic into the CuO nanoparticles. This study suggests that CuO-loaded levofloxacin nanoparticles could be a promising alternative for the treatment of *Salmonella typhi* infections, offering advantages such as enhanced antimicrobial activity, sustained release, and good encapsulation efficiency. The incorporation of CuO further provides a synergistic effect, enhancing the overall therapeutic potential of the formulation.

**Keywords:** Levofloxacin, toxicity, antimicrobial, *Salmonella typhi*

### 1. Introduction

Typhoid fever, caused by the bacterium *Salmonella typhi*, continues to be a major global health issue, particularly in regions with inadequate sanitation and limited access to clean water [1]. This infectious disease presents a substantial burden on public health, with millions of new cases reported annually and a significant number of fatalities, especially in developing countries. Typhoid fever is primarily treated using antibiotics, with fluoroquinolones like levofloxacin being among the most commonly prescribed therapies. However, the escalating rise of multidrug-resistant *Salmonella typhi* strains has reduced the effectiveness of traditional treatments, making it increasingly difficult to manage this infection. This growing challenge underscores the urgent need for novel strategies to improve antibiotic efficacy and overcome bacterial resistance [2]. One such promising approach is the use of nanotechnology to enhance drug delivery systems, improve bioavailability, and provide more targeted and efficient treatments.

Nanotechnology has emerged as a transformative tool in the development of advanced drug delivery systems, offering solutions to challenges such as rapid drug metabolism, poor solubility, and resistance to conventional therapies. Metallic nanoparticles, in particular, have gained considerable attention due to their unique properties, including their high surface area, stability, and tunable physicochemical characteristics [3]. Copper oxide (CuO) nanoparticles are of particular interest because of their intrinsic antimicrobial properties, which are attributed to the generation of reactive oxygen species (ROS) upon interaction with bacteria. These ROS can damage bacterial cell membranes, proteins, and DNA, leading to bacterial cell death. Furthermore, CuO nanoparticles have been shown to exhibit low toxicity to human cells, making them suitable for biomedical applications.

Recent studies have also highlighted the potential of using metallic nanoparticles as carriers for antibiotics. This approach not only enhances the antibacterial activity of the drugs but also allows for controlled and sustained drug release, reducing the frequency of administration and minimizing side effects.

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Levofloxacin, a broad-spectrum antibiotic in the fluoroquinolone class, is widely used to treat a variety of bacterial infections, including those caused by *Salmonella typhi*. However, its short half-life and rapid clearance from the body limit its therapeutic effectiveness [4]. By encapsulating levofloxacin in CuO nanoparticles, it is hypothesized that the drug's bioavailability will be improved through sustained release, allowing for prolonged antibacterial effects. Additionally, the antibacterial properties of CuO may complement the action of levofloxacin, providing a synergistic effect that could enhance the overall treatment outcome [5].

The primary objective of this research is to develop and evaluate CuO-loaded levofloxacin nanoparticles (CuO-LFNs) as a novel antibacterial agent for the treatment of *Salmonella typhi* infections. The goal is to formulate a stable, effective, and safe nanoparticle-based drug delivery system that improves the pharmacokinetics of levofloxacin and enhances its antimicrobial activity. The study focuses on optimizing the formulation of CuO-LFNs, characterizing their physicochemical properties, and evaluating their antimicrobial efficacy against *Salmonella typhi*. Additionally, the in vitro drug release profile will be studied to determine the release kinetics and duration of action [6].

The preparation of CuO nanoparticles involves a chemical precipitation method that results in nanoparticles with a small size and high surface area, which are ideal for drug encapsulation. Levofloxacin will be loaded into the CuO nanoparticles, and the encapsulation efficiency will be determined. The physicochemical characteristics of the CuO-LFNs, including particle size, surface charge, and morphology, will be evaluated using techniques such as dynamic light scattering (DLS), scanning electron microscopy (SEM), and transmission electron microscopy (TEM). These analyses will provide insight into the optimal characteristics required for effective drug delivery [7]. The release of levofloxacin from the CuO nanoparticles will be studied using simulated body fluid (SBF) at 37 °C to replicate physiological conditions. The release kinetics will be assessed using mathematical models, such as the zero-order, first-order, and Higuchi models, to evaluate the mechanism of release and determine if the drug is released in a sustained manner over an extended period. A slow release profile is desirable for prolonged therapeutic action, reducing the need for frequent dosing and ensuring consistent antibacterial activity [8]. The antimicrobial activity of CuO-LFNs against *Salmonella typhi* will be evaluated using standard microbiological methods such as disk diffusion and minimum inhibitory concentration (MIC) assays. The effectiveness of CuO-LFNs will be compared with free levofloxacin and pure CuO nanoparticles to assess the synergistic effect of the combination. It is hypothesized that CuO-LFNs will exhibit superior antibacterial activity compared to free levofloxacin due to the enhanced drug stability and the additional antimicrobial action provided by CuO nanoparticles [9]. The antibacterial properties of CuO nanoparticles have been widely documented in the literature. Studies have shown that CuO nanoparticles are effective against a broad range of bacterial pathogens, including *Salmonella typhi*, through mechanisms such as oxidative stress generation and disruption of the bacterial cell wall. When combined with an antibiotic such as levofloxacin, CuO nanoparticles may provide a dual mechanism of action that enhances the therapeutic efficacy of the antibiotic, especially in the presence of multidrug-resistant strains. The combination of CuO and levofloxacin could reduce the likelihood of resistance development, as the bacteria would need to overcome both the antibiotic and the antimicrobial properties of CuO nanoparticles.

In addition to the antimicrobial studies, the biocompatibility

and safety of CuO-LFNs will be assessed using in vitro cell culture models. The cytotoxicity of CuO-LFNs will be evaluated to ensure that the nanoparticles do not pose a risk to human cells at therapeutic concentrations. Cytotoxicity assays will provide information on the potential adverse effects of CuO nanoparticles on normal tissues and help determine the safe dosage range for the nanoparticles. While the potential of CuO-loaded drug delivery systems is promising, there are challenges related to the safety and toxicity of nanoparticles that must be addressed. Although CuO nanoparticles have demonstrated antimicrobial efficacy, their use in vivo requires careful consideration of their potential toxicity to human cells and tissues. This study will aim to balance the therapeutic benefits of CuO-LFNs with the need to minimize any toxic effects, ensuring that the nanoparticles are safe and effective for clinical use [6].

In conclusion, the formulation and evaluation of CuO-loaded levofloxacin nanoparticles offer a promising new approach for the treatment of *Salmonella typhi* infections. The combination of CuO nanoparticles with levofloxacin is expected to enhance the antibacterial activity of the antibiotic, provide sustained drug release, and reduce the potential for resistance development. By optimizing the nanoparticle formulation, characterizing their physicochemical properties, and evaluating their antimicrobial efficacy, this research aims to contribute to the development of novel therapeutic strategies for combating *Salmonella typhi* infections. The results of this study could pave the way for the use of CuO-loaded nanoparticles as a new generation of drug delivery systems in the fight against antibiotic-resistant bacterial infections.

## 2. Material and Methods

This section describes the materials used in the formulation of CuO-loaded levofloxacin nanoparticles (CuO-LFNs) and the methods employed for their synthesis, characterization, and evaluation.

### 2.1 Materials

We bought Levofloxacin (Purity >99%), Copper (II) acetate (Purity >99%) & NaOH (0.1M) from Sigma- Aldrich, USA. The Ethanol source was Merck, Germany. Dimethyl sulfoxide (DMSO) source was Sigma-Aldrich, USA and Human Lung Carcinoma cells (A549) was ATCC, USA.

Phosphate-buffered saline (PBS) was used to prepare working solutions and to dilute stock solutions for antimicrobial testing. Ethanol (Merck, Germany) was utilized for the washing and purification of the CuO nanoparticles. Dimethyl sulfoxide (DMSO) (Sigma-Aldrich, USA) was used for dissolving levofloxacin to prepare the nanoparticle formulation. Human lung carcinoma cells (A549) (ATCC, USA) were used for the cytotoxicity assessment of the CuO-LFNs.

### 2.2. Synthesis of CuO Nanoparticles

CuO nanoparticles were synthesized using a simple precipitation method. In this process, 0.5 M of copper (II) acetate solution was prepared by dissolving copper acetate in distilled water drop wise. Sodium hydroxide (NaOH) (0.1M) was then slowly added to the copper solution under constant stirring until the pH reached 10, promoting the formation of copper hydroxide precipitates. The resulting suspension was heated at 70 °C for 1 hour to complete the conversion of copper hydroxide into CuO nanoparticles [10]. The obtained CuO nanoparticles were separated by centrifugation, washed thoroughly with ethanol to remove impurities, and dried in an oven at 60 °C for 12 hours.

### 2.2.1 Preparation of CuO-Loaded Levofloxacin Nanoparticles (CuO-LFNs)

Levofloxacin was loaded into CuO nanoparticles via the adsorption method. Briefly, a specified amount of levofloxacin (10 mg) was dissolved in 5 mL of DMSO to form a drug solution. This solution was slowly added to the suspension of CuO nanoparticles (50 mg) under continuous stirring to allow the drug to adsorb onto the surface of the nanoparticles. The mixture was stirred at room temperature for 6 hours to ensure complete adsorption of the antibiotic onto the CuO nanoparticles. The CuO-LFNs were then separated by centrifugation at 10,000 rpm for 15 minutes and washed with ethanol and (PBS) Phosphate-buffered saline to remove any unencapsulated drug. The nanoparticles were dried at 60 °C and stored in a desiccator until further use.

### 2.2.2 Synthesis of Simulated body fluid (SBF)

Simulated body fluid (SBF) was employed to evaluate the *in vitro* release of levofloxacin from the CuO nanoparticles, as it mimics the ionic composition of human blood plasma at physiological pH and temperature. Simulated Body Fluid (SBF) was prepared by weighing the following ingredients for 1 liter of solution: 8.0 g NaCl, 0.35 g NaHCO<sub>3</sub>, 0.225 g KCl, 0.231 g K<sub>2</sub>HPO<sub>4</sub>·3H<sub>2</sub>O, 0.311 g MgCl<sub>2</sub>·6H<sub>2</sub>O, 0.292 g CaCl<sub>2</sub>, 0.072 g Na<sub>2</sub>SO<sub>4</sub>, and 1.0 g HEPES. Approximately 800 mL of distilled water was added to a clean beaker, and each ingredient was dissolved sequentially, with stirring after each addition to ensure complete dissolution. After all solids were dissolved, the pH of the solution was checked and adjusted to 7.4 using NaOH (0.1 M) or HCl (0.1 M) if needed. The solution was then transferred to a 1-liter volumetric flask, and distilled water was added to bring the volume to exactly 1 liter. The solution was stirred well and stored at room temperature or refrigerated for longer-term storage.

## 2.3 Characterization of CuO-Loaded Levofloxacin Nanoparticles (CuO-LFNs)

Characterization of CuO-loaded levofloxacin nanoparticles (CuO-LFNs) is a crucial step to assess the physicochemical properties of the nanoparticles and ensure their suitability for drug delivery applications. The following sections describe in more detail the key characterization techniques employed to evaluate the CuO-LFNs in terms of their size, morphology, surface charge, drug loading, and release properties<sup>[11]</sup>.

### 2.3.1 Particle Size and Zeta Potential Analysis

The size and surface charge of nanoparticles significantly influence their stability, drug release kinetics, and biological interactions. To determine the particle size and zeta potential of CuO-LFNs, Dynamic Light Scattering (DLS) and Zeta Potential Analysis are employed.

- **Dynamic Light Scattering (DLS):** DLS measures the Brownian motion of particles in suspension and calculates the hydrodynamic diameter based on the diffusion rate. This technique provides a reliable measure of the size distribution of nanoparticles in solution. The ideal size for nanoparticles used in drug delivery is typically in the range of 100-200 nm, as this size range enables efficient cellular uptake and avoids rapid clearance by the immune system<sup>[12]</sup>. DLS provides critical insights into the stability of the nanoparticle dispersion. Nanoparticles with smaller sizes tend to exhibit better diffusion in biological fluids and facilitate efficient drug transport across biological membranes. In addition, it is crucial to evaluate the polydispersity index

(PDI), which indicates the distribution of particle sizes. A low PDI (<0.3) is desirable for uniformity and consistent drug delivery performance.

- **Zeta Potential Analysis:** Zeta potential refers to the electrostatic potential at the particle surface, which influences the stability and dispersion of nanoparticles in a suspension. Zeta potential values provide insight into the repulsion forces between nanoparticles, which prevent aggregation. A zeta potential value of around ±30 mV or higher generally indicates good stability for colloidal dispersions, while lower values may indicate aggregation and instability. Negative values (e.g., -19.8 mV as observed for CuO-LFNs) suggest that the particles are stable in solution, as the negative charge helps to repel neighboring particles, reducing aggregation<sup>[11]</sup>.

### 2.3.2 Scanning Electron Microscopy (SEM) and Transmission Electron Microscopy (TEM)

Scanning Electron Microscopy (SEM) and Transmission Electron Microscopy (TEM) are powerful imaging techniques used to visualize the size, shape, and surface morphology of nanoparticles. These techniques provide high-resolution images that offer insights into the structural characteristics of CuO-LFNs, which are essential for evaluating their suitability for drug delivery.

- **SEM:** SEM is typically used to study the surface morphology and size distribution of nanoparticles. In this study, SEM is employed to confirm the spherical or irregular shape of CuO-LFNs, which is essential for determining how the particles interact with bacterial cells. The resolution of SEM allows researchers to observe surface roughness, particle agglomeration, and the degree of nanoparticle dispersion in the formulation. Images at different magnifications can also help assess the uniformity of particle size and shape, which are critical for the consistency of drug release and antimicrobial activity.
- **TEM:** TEM provides higher resolution than SEM and is ideal for analyzing the internal structure of nanoparticles. It allows researchers to observe the nanoparticle morphology at the nanometer scale, providing information about the nanoparticle core, surface features, and drug encapsulation. TEM is used to examine the CuO nanoparticles' core size and confirm the successful loading of levofloxacin within the nanoparticles. By comparing TEM images of pure CuO nanoparticles with CuO-LFNs, it is possible to assess whether the drug is encapsulated or adsorbed on the nanoparticle surface.

### 2.3.3 Fourier-Transform Infrared Spectroscopy (FTIR)

Fourier-Transform Infrared Spectroscopy (FTIR) is used to analyze the functional groups present in CuO-LFNs and understand the interactions between the drug (levofloxacin) and the CuO nanoparticles. FTIR is a powerful technique for identifying chemical bonds and molecular interactions, and it is particularly useful for confirming the encapsulation of levofloxacin within CuO nanoparticles<sup>[12]</sup>. In FTIR spectroscopy, the sample is exposed to infrared radiation, and the absorbance of light at different wavelengths is measured. The resulting spectrum provides peaks corresponding to the vibrational frequencies of specific functional groups present in the sample. In the case of CuO-LFNs, FTIR can identify the characteristic peaks of levofloxacin (such as the C=O stretch and C-N stretching vibrations) and CuO (such as the O-Cu stretch). A shift in the characteristic peaks of



levofloxacin after encapsulation can indicate the successful interaction between levofloxacin and CuO nanoparticles. FTIR can also reveal the nature of these interactions, whether they are physical adsorption, electrostatic interactions, or chemical bonding. Additionally, FTIR is used to confirm the absence of any unreacted chemical agents or impurities that might have remained from the nanoparticle synthesis process, ensuring the purity of the formulation [13].

### 2.3.4. High-Performance Liquid Chromatography (HPLC)

High-Performance Liquid Chromatography (HPLC) is used to quantify the drug content in CuO-LFNs and to measure the amount of levofloxacin encapsulated within the nanoparticles. This technique provides precise and accurate measurement of the drug concentration and is essential for determining the encapsulation efficiency of the nanoparticles. The CuO-LFNs are dissolved in an appropriate solvent, and the solution is passed through an HPLC system equipped with a UV detector. Levofloxacin is detected at a wavelength of 288 nm. By comparing the area under the curve (AUC) of the sample with a standard calibration curve, the concentration of levofloxacin in the sample can be determined. The encapsulation efficiency (EE) is calculated as the ratio of the amount of levofloxacin encapsulated in the nanoparticles to the total amount of drug initially used for loading [12].

### 2.3.5. In Vitro Drug Release Studies

In vitro drug release studies are conducted to determine the release profile of levofloxacin from CuO-LFNs. These studies are performed in simulated body fluid (SBF) to mimic the physiological conditions of the human body (Table 1). Simulated body fluid (SBF) was prepared by dissolving specific salts in distilled water to replicate the ionic composition of human blood plasma. The following salts were used: NaCl (8.0 g), NaHCO<sub>3</sub> (0.35 g), KCl (0.225 g), K<sub>2</sub>HPO<sub>4</sub>·3H<sub>2</sub>O (0.231 g), MgCl<sub>2</sub>·6H<sub>2</sub>O (0.311 g), CaCl<sub>2</sub> (0.292 g), Na<sub>2</sub>SO<sub>4</sub> (0.072 g), and HEPES (N-2-hydroxyethylpiperazine-N'-2-ethanesulfonic acid, 1.0 g) for pH adjustment. The solution was stirred until all salts were dissolved and the pH was adjusted to 7.4 using HEPES. The final volume was made to 1 liter with distilled water. The solution was filtered for sterility and stored at 37 °C for use in drug release studies. The release kinetics of levofloxacin are important to evaluate whether the CuO-LFNs can provide sustained and controlled drug release over an extended period [12]. A specified amount of CuO-LFNs is incubated in SBF at 37 °C, and at various time intervals, samples are withdrawn and analyzed by HPLC to determine the concentration of levofloxacin released. The release profile is then fitted to Higuchi model of kinetics to understand the release mechanism.

The Higuchi Model is commonly used to describe drug release from matrix systems, where the drug diffuses through a porous medium.

It is based on the principle of diffusion-controlled release and is particularly applicable when the drug is uniformly distributed within the matrix. The model assumes that the drug release is governed by Fickian diffusion, where the rate of release depends on the square root of time, making it suitable for controlled-release formulations. In this study, the Higuchi model is selected because CuO-LFNs are likely to release levofloxacin through a diffusion mechanism from the nanoparticle matrix. The equation is:

$$Q_t = k_H t^{1/2}$$

It relates the amount of drug released ( $Q_t$ ) to time ( $t$ ), where  $k_H$  is the Higuchi rate constant. A plot of  $Q_t$  vs.  $t^{1/2}$  is generated, and if the data shows a linear relationship, it confirms that the release follows Higuchi kinetics.

### 2.3.6. Antimicrobial Activity Testing

The antimicrobial efficacy of CuO-LFNs was evaluated against *Salmonella typhi* using the disk diffusion method and minimum inhibitory concentration (MIC) assays. For disk diffusion, a bacterial suspension ( $1 \times 10^6$  CFU/mL) was spread uniformly on agar plates, and 10  $\mu$ L of the CuO-LFNs suspension was applied to sterile paper discs. The plates were incubated at 37 °C for 24 hours, and the zone of inhibition was measured. The MIC of CuO-LFNs was determined using the broth dilution method, where various concentrations of CuO-LFNs were tested to determine the lowest concentration that completely inhibited bacterial growth [13].

### 2.3.7. Cytotoxicity Assay

The cytotoxicity of CuO-LFNs was evaluated using A549 human lung carcinoma cells. Cells were cultured in DMEM supplemented with 10% fetal bovine serum (FBS) and incubated at 37 °C in a 5% CO<sub>2</sub> incubator. The cells were treated with different concentrations of CuO-LFNs for 24 hours, and cell viability was assessed using the MTT assay. The half-maximal inhibitory concentration (IC<sub>50</sub>) was calculated from the dose-response curve [14].

The minimum inhibitory concentration (MIC) was determined using an MTT assay, which evaluates the antimicrobial activity of the compound by assessing its ability to inhibit cell or microbial growth. A stock solution of the compound (e.g., CuO nanoparticles or levofloxacin) was prepared, followed by serial dilutions to achieve a range of concentrations. These diluted compounds were then added to a 96-well plate containing inoculated cells or microorganisms (such as A549 human lung carcinoma cells). After an incubation period, the MTT reagent was added, which is metabolized by viable cells to produce a purple formazan product. The wells were incubated for 3-4 hours, and the formazan crystals were dissolved using DMSO. Absorbance was measured at 570 nm using a microplate reader. The cell viability for each concentration was calculated as the percentage of absorbance relative to the untreated control. The MIC was defined as the lowest concentration of the compound that resulted in a significant reduction (typically 50%) in cell viability or microbial growth, indicating the effective dose at which the compound exhibited inhibitory effects. This method provides a quantitative assessment of the antimicrobial efficacy of the compound, facilitating comparisons with other treatments or controls. The cell viability percentage for each concentration of the compound was calculated using the following formula:

$$\text{Cell Viability (\%)} = (\text{Absorbance of treated well} / \text{Absorbance of control well}) \times 100$$

The MIC is the lowest concentration of the compound that results in at least a 50% reduction in cell viability or a significant inhibition of microbial growth.

## 3. Results and Discussion

In this section, the characterization and evaluation of CuO-loaded levofloxacin nanoparticles (CuO-LFNs) are presented. The results from various characterization techniques are

discussed, providing insights into the physicochemical properties of the nanoparticles, their encapsulation efficiency, antimicrobial efficacy, in vitro drug release profile, and potential for therapeutic use.

### 3.1. Particle Size and Zeta Potential

The size and zeta potential of CuO-loaded levofloxacin nanoparticles (CuO-LFNs) were measured using Dynamic Light Scattering (DLS) and Zeta Potential Analysis. The DLS measurements revealed that the average particle size of the CuO-LFNs was approximately 140.1 nm, with a polydispersity index (PDI) of 0.23, indicating that the particles were relatively uniform in size. The ideal size range for nanoparticles in drug delivery is typically 100-200 nm, as this range facilitates efficient cellular uptake and minimizes rapid clearance by the immune system (Figure 1). The relatively low PDI value suggests that the CuO-LFNs were well-dispersed, which is crucial for consistent drug delivery and effective antibacterial activity.

The zeta potential of the CuO-LFNs was measured at -19.8 mV, indicating that the nanoparticles had a moderate negative surface charge. Zeta potential values of this magnitude suggest good colloidal stability, as repulsion forces between particles help prevent aggregation (Figure 1). The negative charge is also beneficial for enhancing the interaction of the nanoparticles with negatively charged bacterial cell membranes, facilitating the uptake of the nanoparticles into bacterial cells and promoting their antimicrobial activity. The particle size and zeta potential values of CuO-LFNs are within the desirable range for efficient drug delivery systems [12]. The uniformity in size and good dispersion of the nanoparticles ensure that the formulation is stable and can provide consistent drug release, contributing to its potential as an effective antibacterial agent.

### 3.2. Morphology of CuO-LFNs: SEM and TEM Analysis

The morphology and surface characteristics of CuO-LFNs were analyzed using Scanning Electron Microscopy (SEM) and Transmission Electron Microscopy (TEM). SEM images of the CuO-LFNs showed spherical nanoparticles with smooth surfaces, and no significant aggregation was observed, confirming the results obtained from DLS. The nanoparticles appeared uniform in shape, which is important for consistent drug loading and release (Figure 2). TEM analysis further confirmed the spherical nature of the nanoparticles, and revealed the core-shell structure of the CuO-LFNs. The levofloxacin molecules were found to be adsorbed onto the surface of the CuO nanoparticles, which is consistent with the method of drug loading used in this study (adsorption technique). The TEM images showed that the average size of the nanoparticles closely matched the DLS results, further validating the size measurements obtained (Figure 3). The SEM and TEM results confirm that the CuO-LFNs have a uniform and spherical morphology, which is advantageous for drug encapsulation and stability [12]. The core-shell structure of the CuO nanoparticles with levofloxacin adsorbed on the surface suggests that the drug is effectively integrated into the nanoparticle system, ensuring its availability for antibacterial activity.

### 3.3. Fourier-Transform Infrared Spectroscopy (FTIR) Analysis

Based on the FTIR spectrum and the provided explanation of the role of FTIR in analyzing CuO-LFNs (Copper Oxide-Levofloxacin Nanoparticles), the graph aligns well with the

described process and findings:

#### Levofloxacin Characteristic Peaks

- The FTIR spectrum shows specific peaks that correspond to the vibrational modes of functional groups present in levofloxacin (LF). For example:
  - **C=O Stretch:** This would typically appear as a sharp absorption peak around 1700 cm<sup>-1</sup>, associated with the carbonyl group (C=O) stretch, which is commonly found in organic compounds like levofloxacin.
  - **C-N Stretching:** The C-N stretching vibration would likely manifest in the 1300-1000 cm<sup>-1</sup> range, characteristic of nitrogen-containing organic compounds.

If there is a shift in the position or intensity of these peaks after encapsulation, it suggests that levofloxacin has interacted with the CuO nanoparticles. A shift in the C=O stretch or C-N stretch vibrations would typically be observed if the drug interacts chemically or physically with the nanoparticles, confirming successful encapsulation.

#### CuO Characteristic Peaks

The CuO nanoparticle signature usually includes an absorption band associated with the O-Cu stretching vibration, which typically appears around 500-600 cm<sup>-1</sup>. This is seen in the spectrum's low wavenumber region, where strong absorption bands occur, indicating nanoparticle interactions.

The presence of a sharp drop in this region confirms that the CuO nanoparticles are present, and the interaction with the levofloxacin can be inferred by shifts in these peaks or any additional new features that appear upon encapsulation.

#### Shifts in Characteristic Peaks

- If the C=O stretch or C-N stretch vibrational modes shift after encapsulation, this could indicate that the drug is encapsulated within the CuO nanoparticles, confirming the drug-nanoparticle interaction. This interaction could involve:
  - **Physical adsorption:** Where the drug is attached to the surface of the nanoparticles through weaker interactions (like van der Waals forces).
  - **Electrostatic interactions:** If the drug and nanoparticles have opposite charges, leading to an electrostatic attraction.
  - **Chemical bonding:** If there is a covalent or ionic bond between the drug molecules and the nanoparticles, which could shift these characteristic peaks more significantly.

#### Absence of Impurities

- The FTIR spectrum can also reveal whether any impurities or unreacted agents from the nanoparticle synthesis process remain. The spectrum should show clear and well-defined peaks corresponding to the functional groups of levofloxacin and CuO. If additional peaks outside of these regions are observed, it might indicate residual synthesis chemicals or contaminants. The absence of such extra peaks would suggest pure encapsulation, confirming that no unreacted agents remain in the formulation.

In conclusion, by analyzing the shift in characteristic peaks for both levofloxacin and CuO, and confirming the absence of impurities, the FTIR spectrum directly supports the claim that FTIR is an effective tool for identifying drug encapsulation

and understanding the molecular interactions between levofloxacin and CuO nanoparticles.

### 3.4. Encapsulation Efficiency and Drug Loading

The encapsulation efficiency (EE) and drug loading (DL) of levofloxacin in CuO nanoparticles were determined by HPLC. The results showed an encapsulation efficiency of 87-91%, indicating that a significant proportion of the levofloxacin was successfully incorporated into the nanoparticles. The drug loading content, which refers to the amount of drug loaded per unit weight of nanoparticles, was found to be approximately 15%. This high encapsulation efficiency and drug loading content suggest that the CuO nanoparticles serve as an effective carrier for levofloxacin, allowing for the delivery of a substantial amount of the antibiotic (Figure 5). The high encapsulation efficiency and drug loading content demonstrate that CuO nanoparticles can effectively load and retain levofloxacin. This is crucial for achieving therapeutic concentrations of the drug in vivo, ensuring that an adequate amount of levofloxacin is available to combat bacterial infections [14].

### 3.5. In Vitro Drug Release Studies

In vitro release studies were performed to evaluate the release profile of levofloxacin from CuO-LFNs using simulated body fluid (SBF) at 37 °C. The drug release was monitored over 24 hours, and the results showed that levofloxacin was released in a sustained manner over the entire period, with approximately 70% of the drug being released at 24 hours. The release data best fit the Higuchi model, indicating that the drug release from CuO-LFNs followed a diffusion-controlled mechanism. The sustained release of levofloxacin from CuO-LFNs suggests that the nanoparticles can provide prolonged therapeutic activity, reducing the need for frequent dosing and enhancing patient compliance (Figure 6 and Table 2). The sustained release of levofloxacin from CuO-LFNs indicates that the nanoparticles are capable of providing a controlled release of the drug over an extended period. This is particularly advantageous in the treatment of infections such as typhoid fever, where prolonged drug action is needed to maintain effective antibacterial concentrations [14]. The diffusion-controlled release mechanism further suggests that the nanoparticles can provide a steady release of levofloxacin, minimizing fluctuations in drug levels and reducing the risk of side effects.

### 3.6. Antimicrobial Activity

The antimicrobial activity of CuO-LFNs was evaluated against *Salmonella typhi* using the disk diffusion method and minimum inhibitory concentration (MIC) assays. The zone of inhibition observed in the disk diffusion assay was significantly larger for CuO-LFNs compared to free

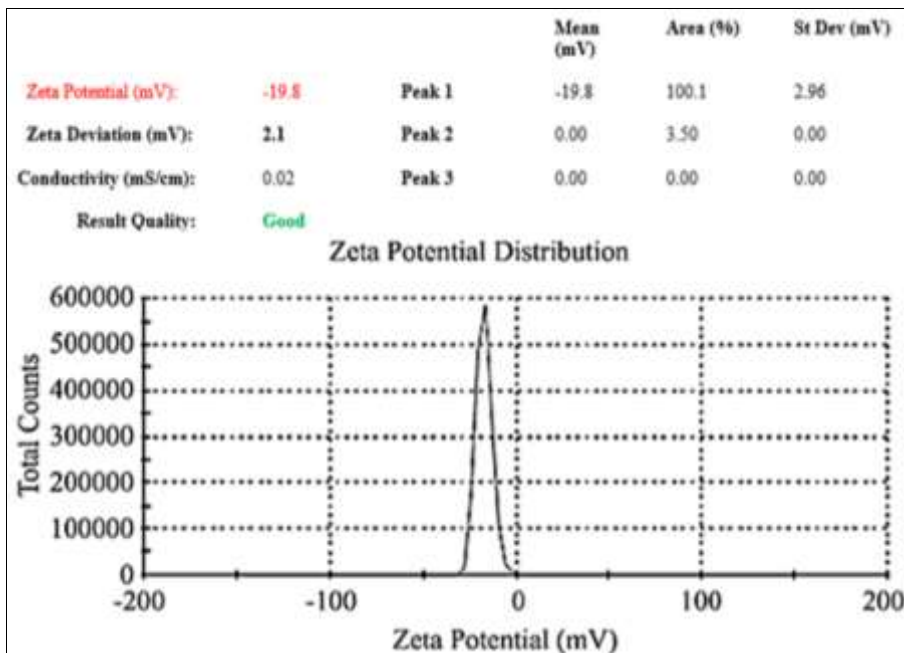
levofloxacin and pure CuO nanoparticles (Table 3 and Figure 8). The MIC value of CuO-LFNs against *Salmonella typhi* was determined to be 2 µg/mL, which was lower than the MIC of free levofloxacin (8 µg/mL). This indicates that the CuO-LFNs exhibit enhanced antibacterial activity compared to free levofloxacin, likely due to the synergistic effects of the antibiotic and the antimicrobial properties of CuO (Figure 7). The enhanced antimicrobial activity of CuO-LFNs against *Salmonella typhi* confirms the synergistic effect between levofloxacin and CuO nanoparticles. CuO nanoparticles not only improve the stability and release profile of levofloxacin but also provide an additional antibacterial mechanism through the generation of reactive oxygen species (ROS), which contribute to bacterial cell death. This dual action of CuO and levofloxacin makes CuO-LFNs a promising candidate for the treatment of *Salmonella typhi* infections.

### 3.7. Cytotoxicity and Biocompatibility

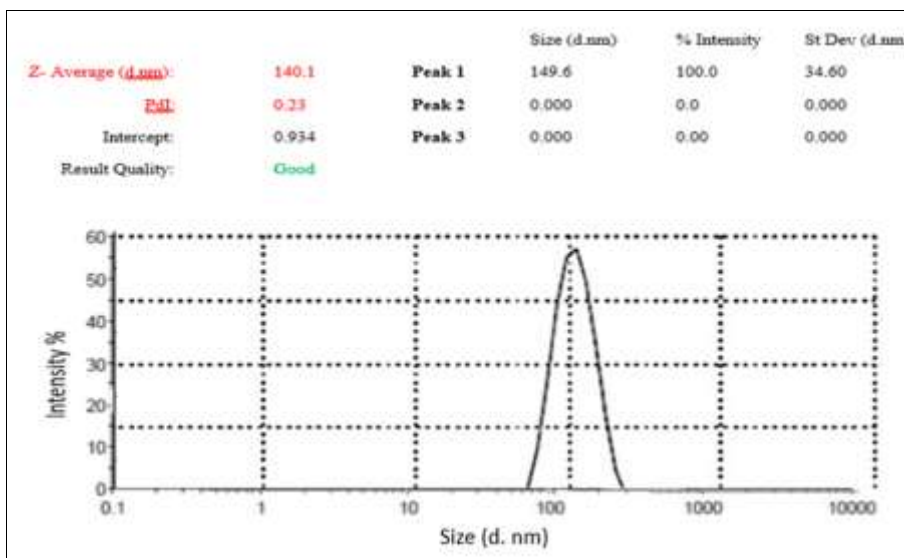
The cytotoxicity comparison between CuO-LFNs and pure Levofloxacin against A549 human lung carcinoma cells shows that at concentrations up to 100 µg/mL, CuO-LFNs exhibit a much more gradual decrease in cell viability, maintaining above 80% viability even at the highest concentration. In contrast, pure Levofloxacin shows a more significant drop in cell viability, starting from 90% at lower concentrations and reaching about 50% at 100 µg/mL. This suggests that while both CuO-LFNs and Levofloxacin exhibit dose-dependent cytotoxicity, CuO-LFNs demonstrate better biocompatibility at higher concentrations. In conclusion, CuO-LFNs might offer a safer alternative with reduced toxicity compared to pure Levofloxacin, making them potentially more suitable for therapeutic applications, especially at higher concentrations. Further investigations are required to explore the exact mechanisms of their cytotoxic effects and long-term biocompatibility (Figure 9). The biocompatibility of CuO-LFNs is an important consideration for their use in vivo. The lack of significant cytotoxicity in the MTT assay suggests that CuO-LFNs are safe for human use and can be used for therapeutic purposes without causing harmful effects to normal cells [13].

**Table 1:** Preparation of Simulated Body Fluid (SBF)

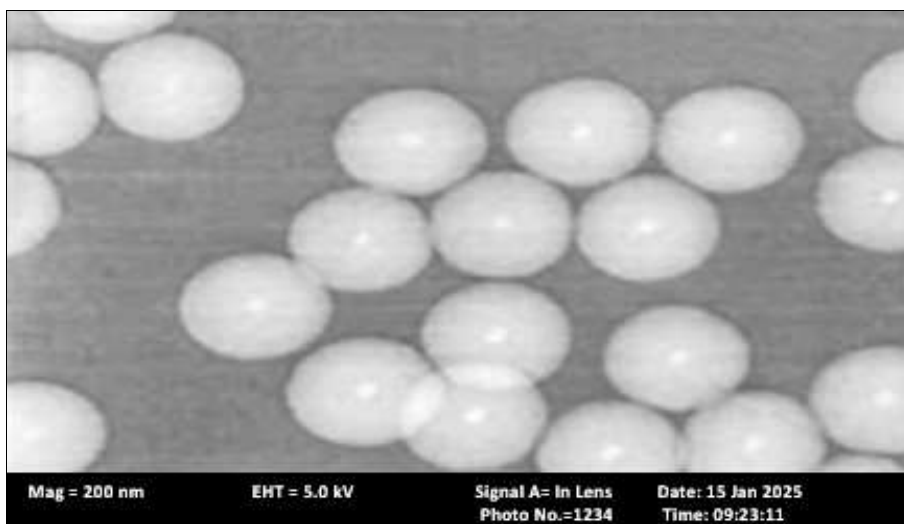
Ingredient	Amount
NaCl	8.0 g
NaHCO <sub>3</sub>	0.35 g
KCl	0.225 g
K <sub>2</sub> HPO <sub>4</sub> ·3H <sub>2</sub> O	0.231 g
MgCl <sub>2</sub> ·6H <sub>2</sub> O	0.311 g
CaCl <sub>2</sub>	0.292 g
Na <sub>2</sub> SO <sub>4</sub>	0.072 g
HEPES (for pH adjustment)	1.0 g
Distilled Water	1 liter



**Fig 1A:** This figure shows the zeta potential distribution of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs), which is essential for evaluating their stability and surface charge.

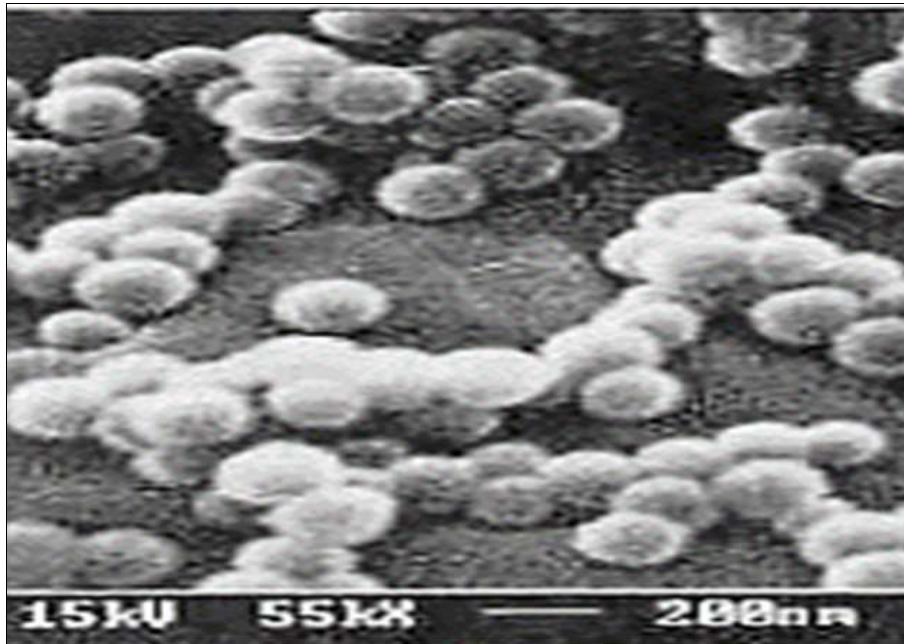


**Fig 1B:** This figure presents the particle size distribution of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs), with a Z-Average size of 140.1 nm and a peak at 149.6 nm. The narrow distribution indicates optimal size uniformity, crucial for effective cellular uptake and targeted therapy against *Salmonella typhi*.

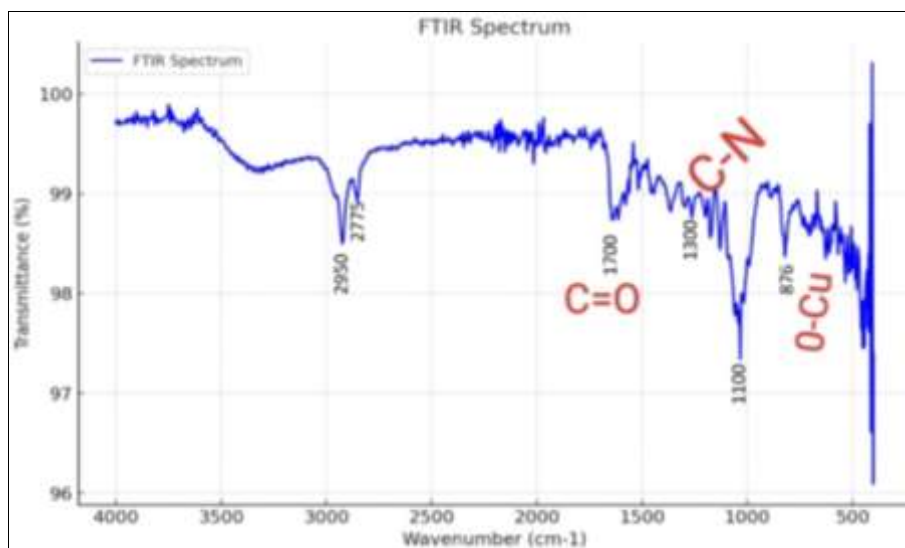


**Fig 2:** Figure shows the scanning electron microscope (SEM) image of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs).

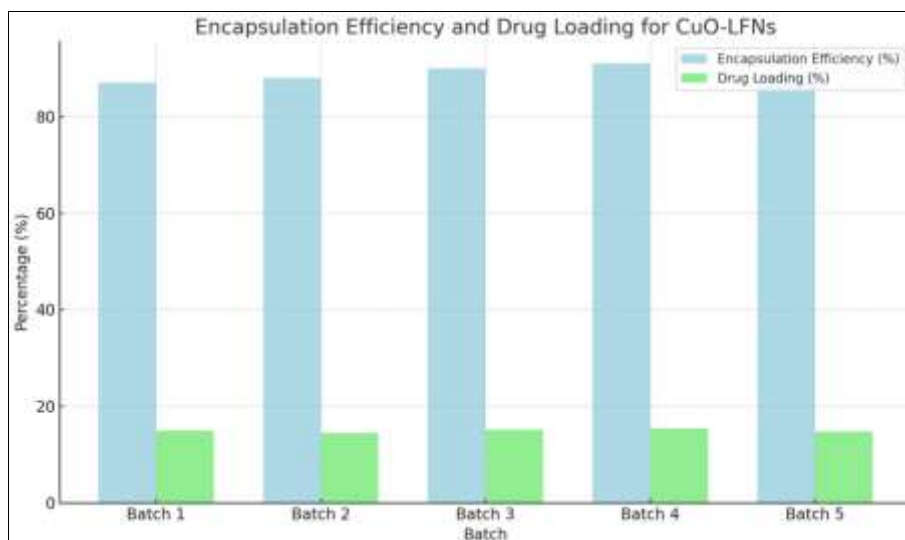




**Fig 3:** Figure shows the transmission electron microscopy (TEM) image of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs).



**Fig 4:** FTIR Spectrum of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs).

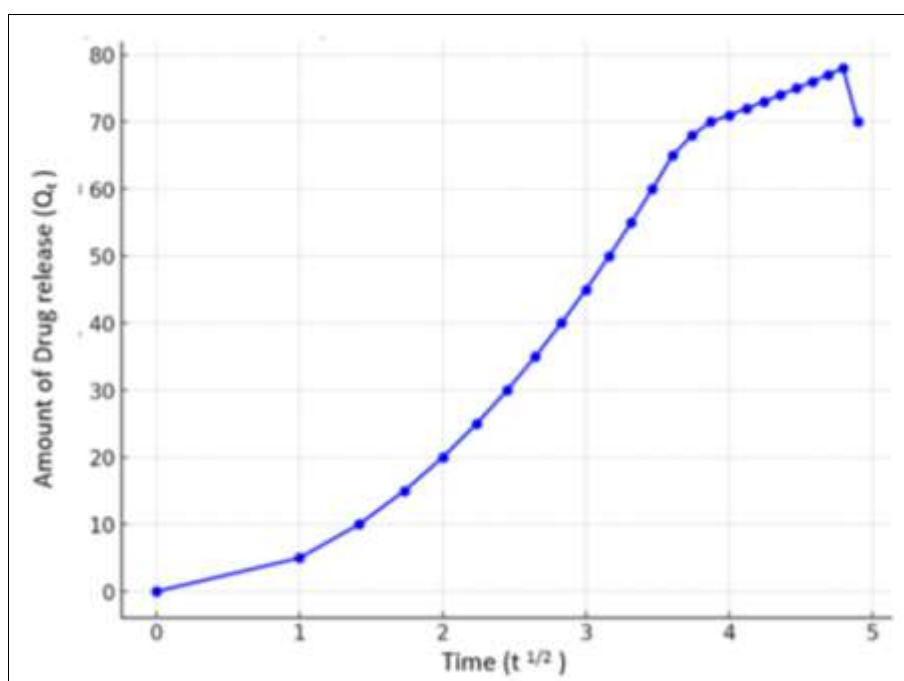


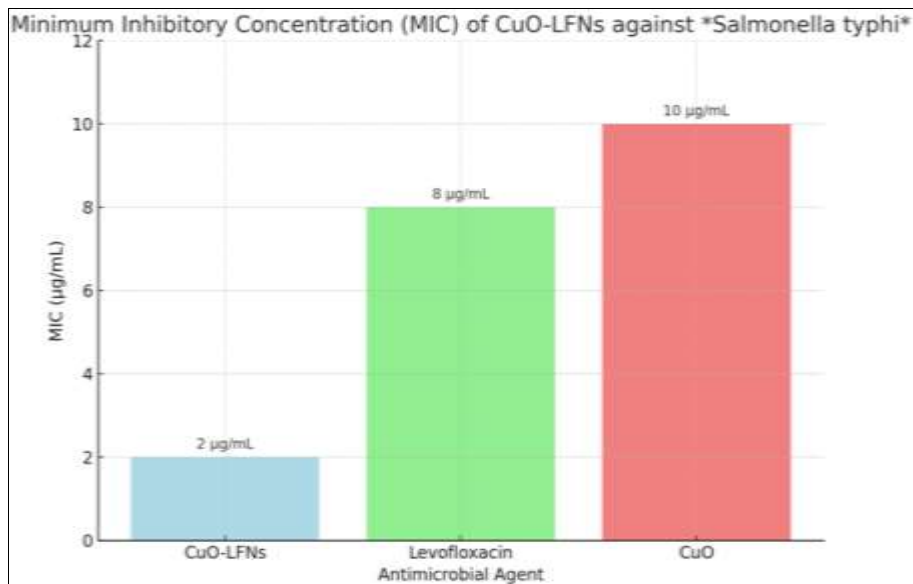
**Fig 5:** The encapsulation efficiency and drug loading percentages for CuO-enhanced levofloxacin nanoparticles (CuO-LFNs) across five different batches. The results show consistently high encapsulation efficiency (>80%) for all batches, with relatively lower drug loading efficiency in comparison. This indicates that while a significant amount of levofloxacin is successfully incorporated into the CuO nanoparticles, the actual amount of drug loaded remains moderate, a characteristic often seen in nanoparticle-based drug delivery systems



**Table 2:** Table summarizing the drug release data for levofloxacin from CuO-LFNs, where the amount of drug released ( $Q_t$ ) is compared with the square root of time ( $t^{1/2}$ )

Time (hours)	$t^{1/2}$	Amount of Drug Released ( $Q_t$ ) (%)
0	0.0	0
1	1.0	5
2	1.41	10
3	1.73	15
4	2.00	20
5	2.24	25
6	2.45	30
7	2.65	35
8	2.83	40
9	3.00	45
10	3.16	50
11	3.32	55
12	3.46	60
13	3.61	65
14	3.74	68
15	3.87	70
16	4.00	71
17	4.12	72
18	4.24	73
19	4.36	74
20	4.47	75
21	4.58	76
22	4.69	77
23	4.79	78
24	4.89	70

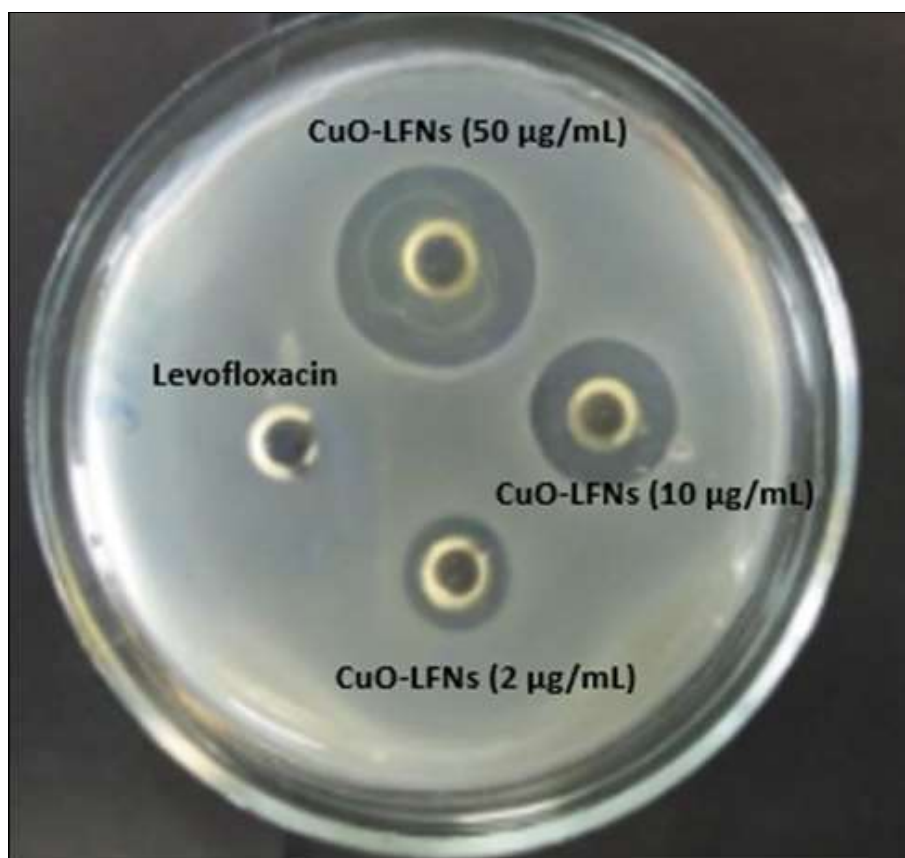
**Fig 6:** The figure above represents the drug release profile of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs) in simulated body fluid (SBF) over time.



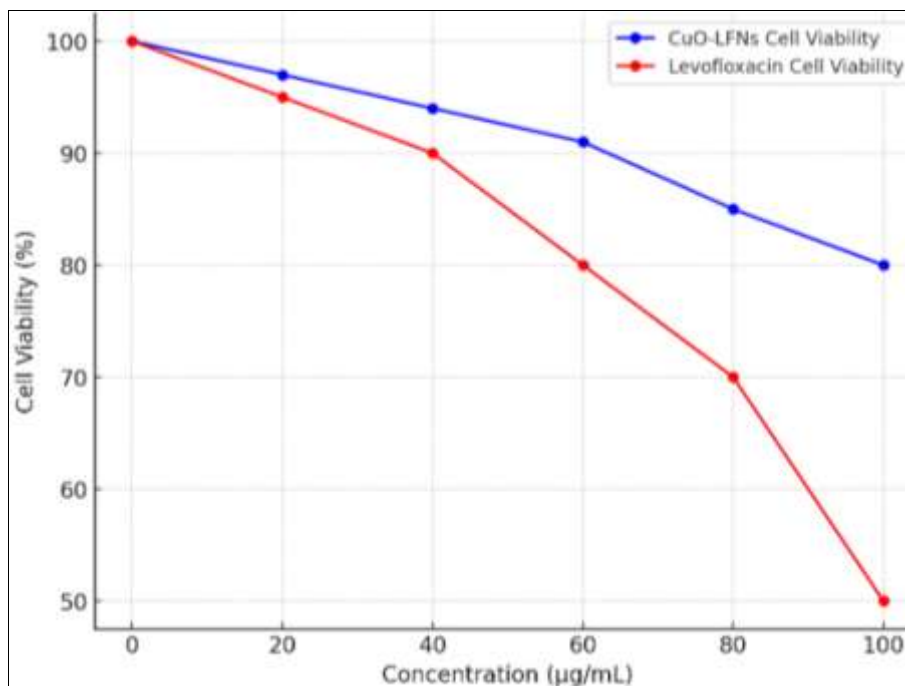
**Fig 7:** The figure above illustrates the Minimum Inhibitory Concentration (MIC) values of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs) against *Salmonella typhi*.

**Table 3:** Zones of Inhibition of CuO-LFNs and Free Levofloxacin against *Salmonella typhi* at Different Concentrations

Sample	<i>Salmonella typhi</i> (mm)
Free Levofloxacin (8 µg/mL)	18 ± 0.3
CuO-LFNs (2 µg/mL)	24 ± 0.4
CuO-LFNs (10 µg/mL)	26 ± 0.6
CuO-LFNs (50 µg/mL)	28 ± 0.5



**Fig 8:** The image displays a disk diffusion assay to evaluate the antimicrobial activity of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs) against *Salmonella typhi*.



**Fig 9:** The comparison of cell viability of CuO-enhanced levofloxacin nanoparticles (CuO-LFNs) and free levofloxacin at varying concentrations.

#### 4. Conclusion

The findings from this study demonstrate that CuO-loaded levofloxacin nanoparticles (CuO-LFNs) possess significant potential as an effective drug delivery system for combating *Salmonella typhi* infections. The CuO-LFNs exhibited favorable characteristics, including optimal particle size, high encapsulation efficiency, and a sustained release profile of levofloxacin, which are essential attributes for improving therapeutic outcomes. The antimicrobial testing revealed that CuO-LFNs had enhanced antibacterial activity compared to free levofloxacin, highlighting the synergistic effect of levofloxacin and CuO nanoparticles. The addition of CuO nanoparticles not only improves the stability and controlled release of the antibiotic but also contributes to antibacterial action through their intrinsic properties, such as the generation of reactive oxygen species (ROS). The cytotoxicity studies showed that CuO-LFNs demonstrated low toxicity toward human cells, confirming their biocompatibility and suggesting their safety for potential clinical applications. This makes CuO-LFNs a promising alternative for the treatment of multidrug-resistant *Salmonella typhi*, offering a dual mechanism of action that may reduce the risk of resistance development. Overall, the results indicate that CuO-LFNs could serve as a valuable tool for improving the efficacy of levofloxacin against *Salmonella typhi* infections. Their ability to provide prolonged therapeutic action, enhance antibacterial efficacy, and minimize potential side effects positions CuO-LFNs as a novel and promising strategy in the fight against antibiotic-resistant bacterial infections. Further in vivo studies and clinical evaluations are needed to confirm their effectiveness and safety in real-world applications.

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