

New Uses for Nano medicine in the Treatment and Diagnosis of Cardiovascular Diseases

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ABSTRACT

This convergent field, which bridges the gap between molecular and cellular interactions by combining research fields such as chemistry, biology, physics, mathematics, and engineering, has the potential to transform current medical practice. By enhancing the treatment and diagnosis of cardiovascular disorders like atherosclerosis, restenosis, and myocardial infarction, this review presents the most recent developments in Nano medicine research. These developments have the potential to have a significant impact on the treatment of cardiovascular disease. In particular, we talk about the utilization of nanoparticles for sub-atomic imaging and high level therapeutics, uniquely planned drug eluting stents and in vivo/ex vivo early identification methods.

Keywords: Molecular and cellular; Cardiovascular disease; Nano medicine; Treatment; Medical practice

INTRODUCTION

The coronary stent, which was developed by Palmaz & Schatz and received FDA approval, was the most recent disruptive technology to have an impact on cardiovascular disease. Percutaneous Tran's luminal coronary angioplasty, coronary artery bypass grafts, and stenting are two examples of surgical procedures that have been improved since then in order to treat cardiovascular disease in clinical medicine. In any case, momentum strategies for early discovery and high level treatments of CVD are restricted and their effectiveness in forestalling the illnesses is sketchy [1]. According to definition, nanotechnology consists of the following interconnected components: dimensions at the nanoscale of the system as a whole or its most important parts; the nature of the system as made by humans; and the distinct characteristics of a new material that emerge because of its nanoscopic size. In point of fact, nanotechnology is a convergent field in which the boundaries between various fields of study, including chemistry, biology, physics, mathematics, and engineering, blur [2]. By advancing ex vivo and in vivo biomarker detection and imaging, directed/improved drug delivery, and tissue regeneration, cardiovascular Nano medicine is likely to face and address current challenges in CVD, as well as to improve detection and therapy. In this audit we will sum up and talk about late advancements in the area of nanotechnology for the discovery and treatment of CVD, zeroing in on nanoparticles, uniquely planned restorative and tissue recovery gadgets, and in vivo/ex vivo early recognition procedures [3].

MATERIAL AND METHODS

Advanced CVD diagnostics using nanoparticles

Nanoscale contrast agents have emerged as multifaceted modalities that can identify and characterize early disease stages before gross disease manifestations, which can be detected by conventional clinical imaging methods, develop [4]. For cardiovascular imaging, contrast-generating nanomaterials include electron dense, fluorescent, radioactive, paramagnetic, superparamagnetism, and superparamagnetism particles. Cardiovascular imaging by attractive reverberation imaging requires strong attractive fields and radio recurrence waves to produce pictures of interior designs [5]. Energy changes in tissue because of attractive field are recognized and the presence of difference specialists enhances these changes. Offresonance imaging is one of three MR imaging methods. Positive contrast is produced by pulse sequences that excite and refocus off-resonance water in off-resonance imaging. Bright contrast can be seen in MR images thanks to the enhancement of T1 contrast by paramagnetic contrast agents like gadolinium chelates. Another recent example of a T1 enhancing contrast agent is manganese nanoparticles [6]. Super paramagnetic contrast agents, such as magnetite and iron oxide (IO) nanoparticles, typically produce dark contrast and enhance T2 contrast. The best method depends on the application as well as the importance of sensitivity, specificity, and artefact minimization, such as reducing bright contrast on atherosclerotic plaque images caused by cardiovascular fat. Imaging properties of nanoparticles vary according to their size. Quantum

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dots, which are nanoparticles that are intrinsically fluorescent, produce light that can be seen in the near-UV to mid-infrared range [7]. Particle size increases are positively correlated with emission wavelength increases. Micro particle-based contrast specialists for imaging incorporate permeable silicon particles that embody plentiful iron oxide nanoparticles in a solitary unit for upgraded contrast. Imaging of inflamed areas where macrophages accumulate, such as atherosclerotic plaque, is made possible by these multistage particles and other particles that are candidates for phagocytosis by macrophages. The achievability of multi-modular imaging with nanoparticles containing different difference specialists, for example, 18F-cross-connected iron oxide nanoparticles has been illustrated [8]. Using positron emission tomography, fluorescence molecular tomography, and magnetic resonance imaging (MRI), the cross-linked dextran shell that is formed on a super paramagnetic iron oxide (IO) core and functionalized with the radionuclide 18F can be seen in 18F-CLIO agents. Chen investigated vulnerable plaque high-density protein nanoparticles enriched with Gd-based audiophiles and a targeting moiety for intrauterine macrophages using in vivo MRI contrast.

Nanoparticles for therapeutic and theranostic use

Which will be further discussed. Antibiotics, cytotoxic that slow down the growth of smooth muscle cells, PDGF receptor antagonists, inhibitors of the inflammatory response, and immunomodulators are among the medications used to prevent restenosis. Other promising therapeutics influence explicit quality targets liable for apoplexy or intimal hyperplasia. Encapsulation in nanoparticles protects genetic materials and other biomolecules from enzymatic degradation and enables prolonged release profiles [9]. These therapeutic approaches have recently been thoroughly examined. Liposomes with different surface characteristics, polymeric nanoparticles and micelles, per fluorocarbon Nano-emulsions, and CLIO particles conjugated to therapeutic molecules are the primary Nano carrier classes under investigation as therapeutic and thermostatic agents for restenosis. However this technique is still in its early stages for CVD applications, it enjoys various likely benefits, which are widely examined in the field of malignant growth Nano medicine. Consolidating a symptomatic imaging moiety with a designated restorative Nano molecule takes into consideration exact, transient and spatial checking of the helpful specialist as well as treatment results [10]. The imaging capabilities of thermostatic nanoparticles can be used to verify the delivery of an active compound to its intended site of action, monitor and quantify the therapeutics' efficacy on a molecular or cellular level, design dosing regimens, and determine the population of responders and non-responders for a particular treatment. In animals with hyperglycemia, for instance, a theranostic v3-integrin targeted paramagnetic nanoparticle-based prolonged anesthesia therapy was reported. The correlation between histological examination and MRI data indicating a three-week decrease in endovascular signal suggests the strategy's potential for effective antiangiogenic therapy while simultaneously evaluating plaque stability. Other model is a framework in light of fibrin-covered per fluorocarbon nanoparticles, which can be utilized for acoustic or X-ray imaging with designated thrombolysis.

CONCLUSIONS

Given the persistent trend toward a higher representation of the elderly and obese population, this becomes even more significant. Nanotechnology, which bridges the gap between interactions on the molecular and microscopic levels, is one of the major potential players in the advancement of CVD treatment and detection thanks to the rapid evolution of fields like genetics, proteomics, molecular and cellular biology, material science, and bio engineering. Taking advantage of Nano technological solutions developed for other medical applications, primarily oncology, where therapeutic Nano carriers currently occupy a significant therapeutic niche, cardiovascular Nano medicine is likely to meet the high demand for the breakthrough innovation in CVD therapy and diagnosis, even though it is still in its very early stages of development. Nano medicine, in contrast to conventional molecular therapeutics, enables the design of multi-component, multi-tasking, multi-modular agents that are capable of precisely and simultaneously detecting and treating the disease. We can, for instance, imagine smart Nano-sensors integrated into existing implants like defibrillators, stents, or pacemakers that could, in the event of a need, either initiate warning or acute drug release. One more Nano clinical answer for CVD could be anticipated for weak plaque, where click-science or profoundly controlled cross connecting methodologies that can target and tie down the plaque preceding resulting AMI without risk of blocking the vessel can be used.

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