



Journal of Frontiers in Multidisciplinary Research

Probiotic Power Plays: Engineering Nanoparticles to Tackle Obesity through Gut Microbiota Modulation

Nkechi Asogwa ^{1*}, Sunday Ameh ¹, Kelechi Asogwa ¹, Taiwo Awojulu ², Joseph Ezeani ³, Oscar Oturu ⁴

¹ Department of Chemistry, University of Benin, Benin City, Edo, Nigeria

² Department of Chemical Engineering, University of Benin, Benin City, Edo, Nigeria

³ Chemical Engineering, University of Toledo, Toledo, United States

⁴ Department of Chemistry, University of Jos, Jos, Plateau State, Nigeria

* Corresponding Author: Nkechi Asogwa

Article Info

E-ISSN: 3050-9726

P-ISSN: 3050-9718

Volume: 04

Issue: 01

January-June 2023

Received: 08-03-2023

Accepted: 12-04-2023

Published: 24-04-2023

Page No: 491-499

Abstract

The rising global prevalence of obesity has motivated the search for new, effective, and sustainable treatment techniques beyond traditional dietary and pharmaceutical approaches. Emerging data underscores the crucial role of the gut bacteria in energy control, metabolic function, and systemic inflammation. Disruptions in microbial composition termed dysbiosis have been substantially correlated with obesity and related metabolic diseases. While probiotics offer a potential route for restoring microbial balance, their therapeutic efficacy is generally hindered by poor gastrointestinal survival and non-specific dispersion. This work proposes a unique intervention technique that combines probiotics with nanoparticle-based delivery systems. These designed nanocarriers boost probiotic viability, allow targeted distribution to intestinal areas, and regulate gut microbiota with precision. By boosting beneficial bacteria taxa, lowering lipogenic activity, and regulating metabolic hormones, nanoparticle-mediated probiotic therapy indicates significant promise for non-invasive, individualized obesity management. The research further explores molecular insights, preclinical discoveries, and translational approaches toward clinical use, presenting this strategy as a frontier in microbiome-based medicines.

DOI: <https://doi.org/10.54660/JFMR.2023.4.1.491-499>

Keywords: Obesity, Gut microbiota, Dysbiosis, Probiotics, Nanoparticles, Microbiome modulation

Introduction

Obesity remains a significant global health concern, contributing to higher risks of type 2 diabetes, cardiovascular illnesses, and some malignancies (Asogwa *et al.*, 2022). While conventional treatments such as diet, pharmacotherapy, and bariatric surgery have shown varying degrees of success, their limitations including side effects and poor long-term compliance underscore the need for innovative therapeutic strategies (Rastelli *et al.*, 2019; Cani *et al.*, 2019). However, recent breakthroughs in microbiome research have identified the gut microbiota as a major regulator of host metabolism, energy balance, and fat storage. Dysbiosis imbalanced gut microbial composition has been closely connected with obesity and metabolic syndrome (de Vos *et al.*, 2022). Probiotics, defined as live microorganisms that deliver health advantages when supplied in suitable concentrations, offer a promising avenue for altering the gut microbiota. However, typical probiotic techniques frequently suffer from poor survival in the gastrointestinal tract and lack specialized delivery mechanisms. Meanwhile, to tackle these issues, the burgeoning field of nanobiotechnology has produced artificial nanoparticles meant to encapsulate and protect probiotics. These nanosystems boost probiotic stability, control release, and improve colonization in specific gut areas. Studies have indicated that such tailored delivery can lead to enhanced microbial balance, reduction in fat deposition, and metabolic regulation via suppression of lipogenic enzymes including fatty acid synthase (He *et al.*, 2022).

This work analyzes how tailored probiotic-loaded nanoparticles represent a frontier in individualized, non-invasive obesity treatment by selectively manipulating the gut flora.

Obesity Epidemic and Gut Microbiota Imbalance

The global prevalence of obesity has increased over the past four decades, making it one of the most important public health concerns of the 21st century. According to the World Health Organization, approximately 650 million adults were obese in 2016, with estimates predicting ongoing growth. Obesity is connected with a number of comorbidities, including type 2 diabetes, cardiovascular disease, and some malignancies (WHO, 2021). In recent years, a growing body of research has identified the gut microbiota complex community of trillions of microorganisms dwelling in the

gastrointestinal tract as a crucial factor influencing the genesis and progression of obesity. Studies in both people and animal models have demonstrated that obese persons generally display altered Firmicutes/Bacteroidetes ratio relative to lean individuals (Figure 1) and lower microbial diversity (Figure 2) (Turnbaugh *et al.*, 2006). This imbalance promotes increased intestinal permeability and systemic inflammation via endotoxins such as lipopolysaccharides (LPS), further worsening metabolic problems (Cani *et al.*, 2007). Furthermore, the gut flora affects important hormonal and metabolic processes, regulating satiety signals, fat storage, and glucose metabolism (Rastelli *et al.*, 2019). Restoration of microbial balance using probiotics, prebiotics, dietary treatments, or fecal microbiota transplantation is therefore being researched as a novel way to attenuate obesity and its effects.

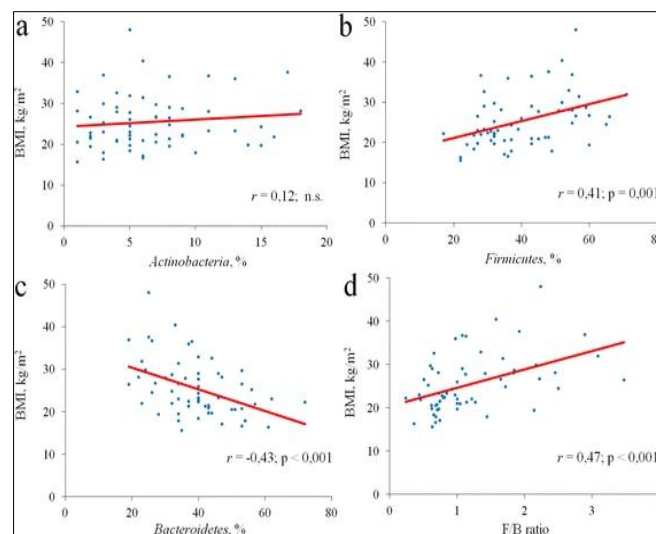


Fig 1: BMI vs gut microbiota phyla. a Actinobacteria, b Firmicutes, c Bacteroidetes and d Firmicutes/Bacteroidetes ratio; n.s.: non-significant; r: Spearman's correlation coefficient (Koliada *et al.*, 2017)

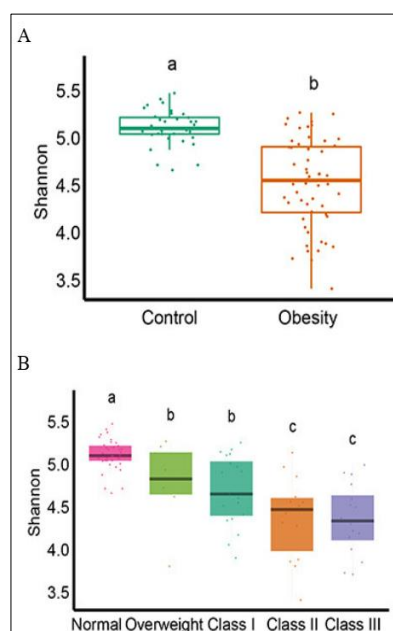


Fig 2: (A) Microbial diversity estimated based on Shannon index (A) in healthy controls (n = 36) and obese (n = 56) subgroups. Different lowercase letters indicate significant differences (P < 0.05). (B) in subjects from the Normal, "Overweight", Class I, Class II, and Class III obesity groups. Different lowercase letters indicate significant differences (P < 0.05). (Hu *et al.*, 2017)

The Role of Gut Microbiota in Metabolic Health

The gut microbiota plays a key role in various physiological functions, including energy collection, immunological control, fat storage, and modulation of inflammation. In healthy individuals, a balanced microbial community helps maintain metabolic equilibrium. However, in obesity, this balance is typically disrupted, a condition known as dysbiosis (de Vos *et al.*, 2022). Dysbiosis is characterized by reduced microbial diversity, changed abundance of beneficial species such as *Bifidobacterium* and *Akkermansia muciniphila*, and an elevated ratio of Firmicutes to Bacteroidetes (Turnbaugh *et al.*, 2006).

Mechanisms Linking Dysbiosis to Obesity

Several mechanisms have been proposed to explain how gut microbiome imbalance contributes to obesity:

- **Enhanced Energy Harvest:** Certain microbial communities are more efficient at fermenting dietary polysaccharides into short-chain fatty acids (SCFAs), which are absorbed and utilized by the host for energy. An enhanced SCFA production can lead to greater caloric absorption from the same diet (Turnbaugh *et al.*, 2006).
- **Inflammation and Endotoxemia:** Dysbiosis can damage the gut barrier, leading to increased intestinal permeability. This permits endotoxins such

lipopolysaccharides (LPS) to enter systemic circulation, initiating chronic low-grade inflammation that promotes insulin resistance and fat formation (Cani *et al.*, 2007).

- **Hormonal Dysregulation:** The gut microbiota regulates the release of satiety and metabolic hormones such as leptin, ghrelin, and glucagon-like peptide-1 (GLP-1). Altered microbial populations can compromise this hormonal transmission, resulting in increased hunger and impaired glucose metabolism (Rastelli *et al.*, 2019).
- **Bile Acid Metabolism:** Gut microorganisms have a role in the conversion of primary to secondary bile acids, which regulate lipid absorption and glucose balance through signaling pathways like FXR and TGR5. Dysbiosis can disrupt this process, impacting host metabolism (de Vos *et al.*, 2022).
- **Probiotic and Microbiota-Based Therapies:** Given the gut microbiota's influence on metabolic health,

microbiota-targeted treatments are emerging as viable methods for obesity treatment. Probiotics (beneficial live bacteria), prebiotics (non-digestible fibers that nourish good bacteria), and synbiotics (a combination of both) have been shown to restore microbial balance, reduce inflammation, and improve insulin sensitivity in both animal and human studies (Cani *et al.*, 2005; He *et al.*, 2022). More advanced therapies such as fecal microbiota transplantation (FMT) and modified bacterial strains are also being studied. Therefore, the connection between gut microbiota and obesity highlights the need of considering microbial health in obesity prevention and treatment techniques. While lifestyle and dietary therapies remain vital, treating gut microbiota imbalance offers a fresh and perhaps more tailored strategy to managing obesity and its related illnesses.

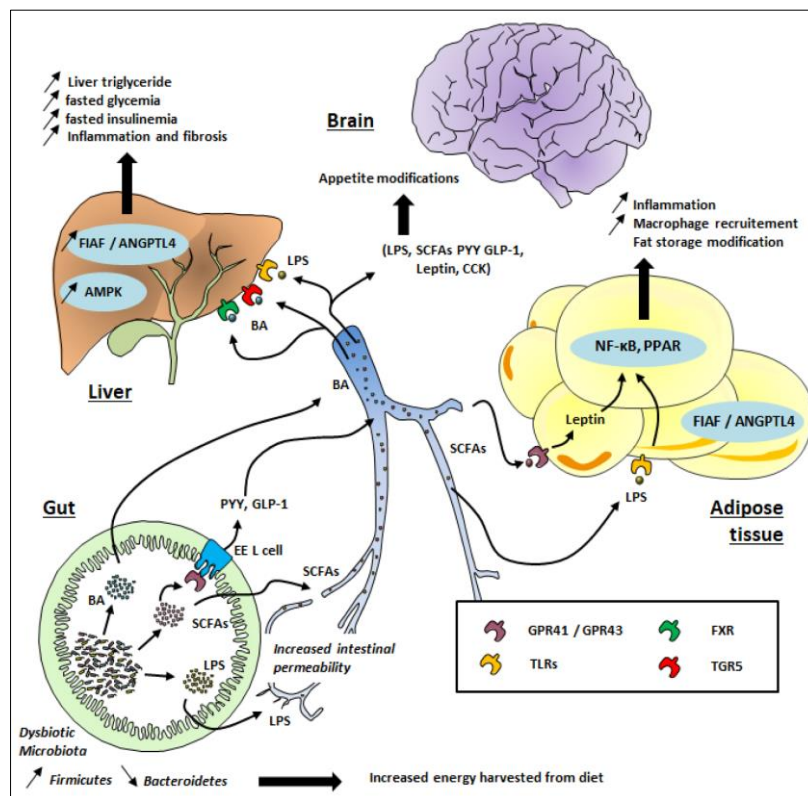


Fig 3: Mechanisms Linking Dysbiosis to Obesity (Breton *et al.* 2022)

Need For Innovative Therapeutic Approaches

Despite decades of research and public health initiatives, obesity is a global epidemic with frightening rates of morbidity and mortality. Conventional treatment strategies, such as calorie restriction, increased physical activity, pharmaceutical therapies, and bariatric surgery, often suffer from limited long-term efficacy, adverse effects, and poor patient adherence (Apovian, 2016; Ryan and Yockey, 2017). Furthermore, obesity is a complex disease influenced by not just lifestyle and genetics but also emerging biological factors such as the gut microbiota, systemic inflammation, and metabolic signaling pathways (Cani *et al.*, 2019). The identification of gut bacteria as a critical actor in energy management, food absorption, and immune modulation has opened new avenues in obesity research. Dysbiosis, or microbial imbalance, has been implicated in increasing adipogenesis, insulin resistance, and chronic inflammation

which are factors that are often resistant to established treatment approaches (de Vos *et al.*, 2022). Consequently, there is a pressing need to discover other, more comprehensive therapeutic techniques that go beyond calorie control and surgical therapies. One such potential method is the use of microbiota-targeted medicines, including probiotics, prebiotics, postbiotics, and synbiotics, to rebalance gut microbial populations and alter host metabolism. More recently, breakthroughs in nanotechnology have permitted the building of delivery systems such as probiotic-loaded nanoparticles that can promote the survival, stability, and targeted administration of beneficial microorganisms in the gastrointestinal tract (He *et al.*, 2022). These techniques hold the promise to deliver safer, non-invasive, and tailored solutions to weight management and metabolic health, establishing them at the cutting edge of therapeutic innovation.

Gut Microbiota and Metabolic Health

The human gut microbiota comprising trillions of microorganisms including bacteria, viruses, fungus, and archaea plays a key role in sustaining metabolic health. It regulates energy harvest, fat storage, glucose metabolism, and the regulation of hunger and inflammation. A healthy microbiome contributes to metabolic homeostasis, whereas dysbiosis (an imbalance in microbial composition) has been associated with obesity, type 2 diabetes, and non-alcoholic fatty liver disease (Rastelli *et al.*, 2019; Cani, 2019). Short-chain fatty acids (SCFAs) including acetate, propionate, and butyrate, which are formed through the fermentation of food fibers by gut bacteria, are essential mediators of gut–host communication. These metabolites affect insulin sensitivity, satiety, and immunological function via receptors such as GPR41 and GPR43 (Koh *et al.*, 2016). Additionally, gut microorganisms alter the enteroendocrine system by modulating hormones like GLP-1 and PYY, which regulate hunger and glucose management (Ridaura *et al.*, 2013).

Altered microbiota composition might increase intestinal permeability and systemic inflammation through the translocation of endotoxins like lipopolysaccharide (LPS), contributing to metabolic endotoxemia and insulin resistance (Cani *et al.*, 2007). Thus, maintaining a healthy gut microbiota is widely recognized as vital for metabolic well-being and is a prospective target for therapeutic therapies.

Roles of Specific Bacteria in Energy Balance

The gut microbiota is a major regulator of host energy balance, and individual bacterial taxa play diverse roles in energy harvest, storage, and expenditure. Bacteria regulate host metabolism by fermentation of indigestible carbohydrates into short-chain fatty acids (SCFAs), control of lipid metabolism, and interaction with metabolic hormones. Firmicutes and Bacteroidetes. A higher Firmicutes/Bacteroidetes (F/B) ratio is typically reported in

obese persons and is associated with better energy harvest from the food (Turnbaugh *et al.*, 2006). Firmicutes are excellent at fermenting complex polysaccharides into SCFAs, particularly butyrate and acetate, which can be utilized by the host for energy.

Akkermansia muciniphila

This mucin-degrading bacterium is inversely linked with body weight, fat mass, and inflammation. Its presence maintains gut barrier integrity and improves insulin sensitivity, making it a viable probiotic candidate for obesity and metabolic syndrome therapy (Everard *et al.*, 2013).

Bifidobacterium spp.

Bifidobacteria are related to lower endotoxemia and inflammation. They promote intestinal barrier function and alter immunological responses, contributing to improved metabolic outcomes (Cani *et al.*, 2007). Supplementation with *Bifidobacterium* strains has shown promise in lowering body weight and improving lipid profiles in animal models.

Lactobacillus spp.

Lactobacillus species have strain-specific effects: some (e.g., *L. gasseri*) promote anti-obesity effects by altering lipid metabolism and lowering fat formation, while others may have neutral or even obesogenic impacts depending on the setting (Million *et al.*, 2012).

Christensenella spp.

This recently identified genus is more common in lean individuals and has been connected to decreased BMI. It is expected to regulate energy homeostasis through host-microbe interactions that are not yet fully explored (Goodrich *et al.*, 2014). In summary, altering certain microbial populations by diet, probiotics, or tailored therapies has promise for regulating energy balance and treating obesity.

Table 1: The roles of specific gut microbes in obesity and metabolic regulation

Microbial Species	Roles	Mechanism of Action	Association with Obesity
<i>Akkermansiamuciniphila</i>	Anti-obesity improves insulin sensitivity.	Degrades mucin maintains gut barrier integrity, reduces inflammation	Inversely linked with body weight and fat mass (Everard <i>et al.</i> , 2013).
<i>Bifidobacterium</i> spp.	Anti-inflammatory, improves metabolism.	Enhances intestinal barrier, modulates immune responses, lowers endotoxemia	Linked to lower body weight and improved lipid profile (Cani <i>et al.</i> , 2007).
<i>Lactobacillus</i> spp.	Strain-specific metabolic effects	Alters lipid metabolism; some strains (e.g., <i>L. gasseri</i>) reduce fat accumulation.	Some strains are anti-obesogenic; others neutral or obesogenic. (Goodrich <i>et al.</i> , 2014).
<i>Christensenella</i> spp.	Regulates energy homeostasis	Interacts with host metabolism; mechanisms under investigation	More abundant in lean individuals, lower BMI

Dysbiosis in Obesity

Dysbiosis refers to an imbalance in the composition, variety, or function of the gut microbiota. In obesity, dysbiosis is characterized by reduced microbial diversity, changed Firmicutes/Bacteroidetes ratios, and a decline in beneficial bacteria such as *Bifidobacterium* and *Akkermansia muciniphila*. This imbalance is related with increased energy harvest, low-grade inflammation, and decreased intestinal barrier function (Turnbaugh *et al.*, 2009; Cani *et al.*, 2008). Obese persons generally exhibit higher amounts of lipopolysaccharide (LPS)-producing Gram-negative bacteria, which contribute to metabolic endotoxemia, a chronic inflammatory condition that promotes insulin resistance and fat deposition (Cani *et al.*, 2007). Dysbiosis also inhibits the formation of short-chain fatty acids (SCFAs), crucial for

energy regulation and immunological modulation, further altering host metabolic homeostasis (Koh *et al.*, 2016). Moreover, dysbiosis may alter appetite regulation and lipid metabolism by interfering with gut hormone communication, particularly GLP-1 and PYY, hence increasing overeating and weight gain (Ridaura *et al.*, 2013). This new understanding supports therapy methods targeted at restoring microbial balance to prevent or reverse obesity and associated consequences.

Nanoparticle Design for Probiotic Delivery

Probiotics are viable bacteria that confer health advantages when consumed in sufficient quantities. Nonetheless, their survival is impeded by severe gastrointestinal (GI) conditions, including stomach acidity and bile salts.

Nanoparticle-based delivery systems have emerged as effective options to improve the stability, targeted administration, and efficacy of probiotics.

Justification for the Utilization of Nanoparticles

Nanoparticles can safeguard probiotics from environmental stress, enhance mucosal adherence, and provide regulated

release. However, probiotics are protected from bile salts and acidic pH by encapsulation, their targeted distribution inside the gastrointestinal system is made possible by surface changes, and their controlled release is ensured by biodegradable polymers. All of these factors work together to promote improved colonization and therapeutic results (Cook *et al.*, 2012).

Table 2: Justification for the utilization of nanoparticles (Salata, 2004)

S/N	Justification	Description
1	Enhanced Bioavailability	Nanoparticles improve the solubility and stability of drugs, leading to better absorption and therapeutic effects.
2	Targeted Drug Delivery	Surface-modified nanoparticles can be directed to specific tissues or cells, reducing side effects and improving efficacy.
3	Controlled and Sustained Release	Nanoparticles allow for controlled release of encapsulated drugs over time, minimizing frequent dosing.
4	Crossing Biological Barriers	Nanoparticles can penetrate the blood-brain barrier and other physiological barriers for drug delivery.
5	Improved Diagnostic Sensitivity	Nanoparticles enhance imaging techniques such as MRI and PET scans, improving disease diagnosis.
6	Reduction in Drug Toxicity	Nanocarriers help deliver drugs precisely to diseased cells, minimizing damage to healthy tissues.
7	Multifunctionality	Nanoparticles can combine therapy, diagnostics (theranostics), and targeting in a single platform.
8	Eco-Friendly Applications	Green synthesis of nanoparticles reduces the environmental impact of chemical and pharmaceutical industries.
9	Antimicrobial Properties	Metallic nanoparticles (e.g., silver, copper) show strong antimicrobial effects against resistant pathogens.
10	Cancer Therapy Advancements	Nanoparticles are used in photothermal and photodynamic therapy for precise and effective cancer treatment.

Types of Nanoparticles Used

Different materials have been researched for probiotic encapsulation: Polymeric nanoparticles: E.g., chitosan, alginate, PLGA Lipid-based systems: E.g., liposomes, solid lipid nanoparticles Protein-based carriers: E.g., whey protein or gelatin (Burgain *et al.*, 2011).

Design Considerations

Important considerations in nanoparticle design include encapsulation efficiency and loading capacity, which impact probiotic viability and release; biocompatibility and biodegradability, which guarantee safety and low toxicity; and size and surface charge, which impact mucosal adherence and cellular uptake (Zhang, 2020).

Stimuli-Responsive Systems

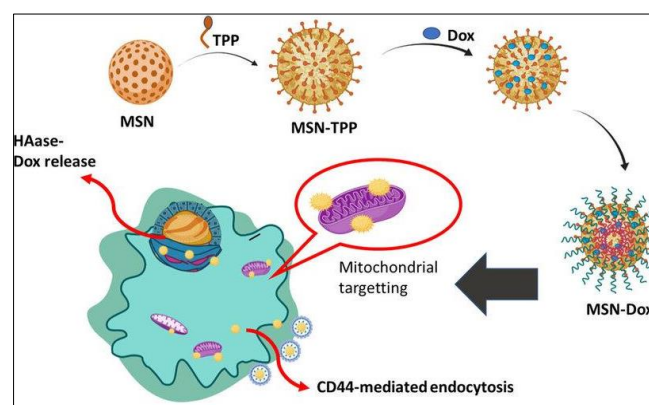


Fig 4: Stimuli-Responsive Systems for nano carriers' particles (Murugan *et al.*, 2021)

Encapsulation Strategies For Bacterial Stability

One popular method for improving the stability and viability of probiotic microorganisms in challenging gastrointestinal environments is encapsulation. Probiotic cells are shielded from environmental stresses such as low pH, bile salts, and

oxygen exposure by methods like microencapsulation and nanoparticle-based systems, which maintains their functional qualities throughout digestion and storage (Cook *et al.*, 2012). Because of their biocompatibility and capacity to create protective barriers, materials such as poly(lactic-co-

glycolic acid) (PLGA), alginate, and chitosan are commonly used (Lee and Mooney, 2012). Additionally, site-specific and regulated release is made possible by sophisticated designs such as stimuli-responsive polymers and multilayer coatings, which enhance bacterial colonization and therapeutic efficacy (Zhang and Zhang, 2020).

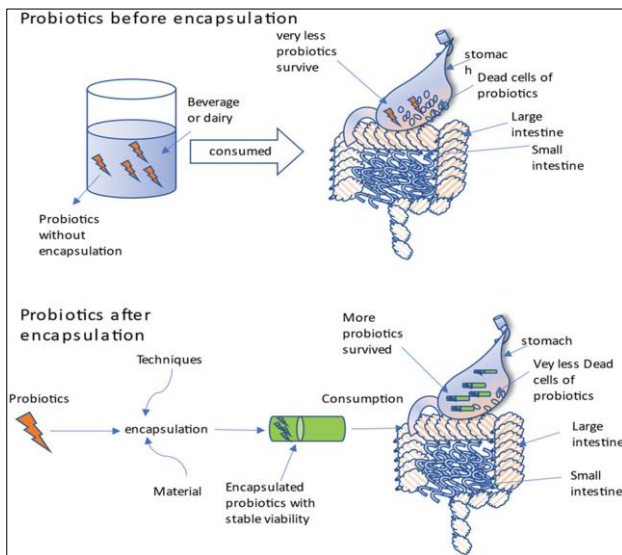


Fig 5: Probiotics in gut before and after encapsulation (Safeer *et al.*, 2023)

Mucoadhesive and Targeted Delivery Systems

Mucoadhesive delivery devices serve a vital role in increasing the retention and bioavailability of probiotics within the gastrointestinal (GI) tract. These methods utilize materials such as chitosan, alginate, and carbopol that can cling to the mucosal lining, extending the contact duration of probiotics with intestinal surfaces and boosting colonization (Cook *et al.*, 2012). The electrostatic interaction between positively charged polymers and negatively charged mucosal membranes promotes this adhesion, resulting in increased therapeutic efficacy (Lee and Mooney, 2012). Again, targeted delivery systems further increase probiotic delivery by directing payloads to specific parts of the GI tract, such as the colon, where probiotics exert most of their health benefits. Surface modifications such as ligand attachment, pH-sensitive coatings, or enzyme-responsive materials, allow for precise localization and release under specified biological conditions (Zhang and Zhang, 2020). This combined method of mucoadhesion and controlled release not only enhances bacterial survival but also optimizes their interaction with the host microbiota, leading to more consistent and beneficial outcomes.

Mechanisms of Action

Probiotic delivery methods function through many processes that promote the survivability, localization, and therapeutic impact of probiotic microbes. A main mechanism involves protection from severe gastrointestinal conditions. Encapsulation using materials like alginate or PLGA produces a physical barrier that shields probiotics from gastric acid and bile salts, enhancing their survivability en route to the intestine (Cook *et al.*, 2012).

Another significant strategy is regulated and site-specific release, achieved using pH-sensitive or enzyme-responsive compounds that break down or dissolve in the intestinal

environment. This ensures that the probiotics are released where they are most effective, particularly in the colon (Zhang and Zhang, 2020). Furthermore, mucoadhesion allows for prolonged retention in the GI system by adhering to the mucosal surfaces, boosting colonization and contact with the host (Lee and Mooney, 2012). Once administered, probiotics exert biological effects by competitive exclusion of pathogens, regulation of the immune response, and synthesis of antimicrobial chemicals. Targeted systems may also increase these effects by raising the concentration of viable cells at the intended region, boosting both local and systemic therapeutic outcomes (Plavec and Berlec, 2020).

Interaction with Gut Environment

Once administered to the gastrointestinal tract, probiotics interact dynamically with the gut environment to produce their therapeutic effects. These interactions occur at various levels, including modification of the host immune system, strengthening of the intestinal barrier, and management of the gut microbiota. Probiotics boost the generation of anti-inflammatory cytokines and enhance mucosal immunity via interacting with dendritic cells and intestinal epithelial cells (Plavec and Berlec, 2020). They also contribute to preserving intestinal barrier integrity by boosting the expression of tight junction proteins, therefore reducing intestinal permeability and inhibiting pathogen translocation (Zhang and Zhang, 2020). Furthermore, probiotics engage in competitive exclusion by occupying adhesion sites on the mucosal surface, generating antimicrobial compounds (e.g., bacteriocins, organic acids), and reducing luminal pH, creating an unfavorable environment for pathogens (Cook *et al.*, 2012).

Encapsulated probiotics, in particular, increase these interactions by enhancing the survival and sustained release of bacterial cells, ensuring a prolonged presence in the gut and more effective control of the microbiome (Lee and Mooney, 2012). These multiple interactions contribute to homeostasis and have been related to improvements in illnesses such as inflammatory bowel disease, irritable bowel syndrome, and metabolic disorders.

Modulation of Microbial Diversity and SCFA Production

Probiotics have a crucial role in changing the gut microbiota by improving microbial diversity and promoting the production of beneficial metabolites, particularly short-chain fatty acids (SCFAs). Upon colonization, probiotics can outcompete pathogenic bacteria for resources and adhesion sites, therefore generating a more balanced and diversified microbial community (Plavec and Berlec, 2020). This modulation is crucial, as decreasing microbial diversity is commonly associated with gastrointestinal and metabolic problems.

One of the primary effects of microbial modification is the increased generation of SCFAs, including acetate, propionate, and butyrate. These metabolites are predominantly produced by bacterial fermentation of dietary fibers and perform critical functions in maintaining gut health. Butyrate, for example, acts as the principal energy source for colonocytes, strengthens the intestinal barrier, and has anti-inflammatory characteristics (Zhang and Zhang, 2020).

Encapsulated probiotics may further boost SCFA synthesis by enhancing bacterial survival and maintaining prolonged metabolic activity in the colon. Moreover, some delivery

systems include prebiotics (synbiotics), which serve as substrates for both given and native beneficial bacteria, boosting SCFA synthesis (Cook *et al.*, 2012).

Preclinical and Experimental Studies

Preclinical and experimental investigations have produced compelling data supporting the usefulness of nanoparticle-based delivery systems in increasing probiotic stability, colonization, and therapeutic results. *In vitro* studies have shown that encapsulated probiotics display much better survival rates under simulated stomach and intestinal circumstances compared to non-encapsulated counterparts (Cook *et al.*, 2012). These models also exhibit enhanced mucoadhesion and release patterns when incorporating pH-sensitive and biodegradable materials such as alginate, chitosan, and PLGA.

In vitro investigations in animal models have further corroborated these findings. For example, mice treated with encapsulated probiotics showed greater intestinal colonization, increased production of anti-inflammatory cytokines, and improved gut barrier function (Plavec and Berlec, 2020). In models of colitis, these delivery systems lowered disease severity and stabilized gut microbiota composition, demonstrating their promise for treating inflammatory bowel disorders. Additionally, nanoparticle delivery technologies have showed potential in co-delivering probiotics with prebiotics (synbiotics) or bioactive substances, further magnifying health advantages such as short-chain fatty acid synthesis and immunological modulation (Zhang and Zhang, 2020). While these findings are promising, translation to clinical application requires further exploration into long-term safety, scalability, and regulatory compliance.

In vitro and *In vivo* Models

In vitro and *In vivo* models are critical for evaluating the efficiency of nanoparticle-based probiotic delivery systems. *In vitro* models typically entail employing simulated stomach and intestinal environments to study the stability, survival, and release characteristics of encapsulated probiotics. These models commonly utilize pH-adjusted buffers, bile salt solutions, and digestive enzymes to simulate the conditions experienced by probiotics after oral administration (Cook *et al.*, 2012). For instance, probiotics encapsulated in materials such as alginate, chitosan, or PLGA have been found to greatly boost survivability in acidic pH, shielding the cells from the harsh circumstances of the stomach and enhancing their release in the intestine (Lee and Mooney, 2012).

In vitro models allow a more complicated and precise assessment of the efficacy of nanoparticle delivery systems, imitating real physiological settings. Animal studies, particularly in rodents, are commonly utilized to evaluate the colonization of probiotics, their immune-modulatory effects, and their ability to modify gut microbiota composition. For example, in mice with induced colitis, encapsulated probiotics have been found to reduce inflammation, enhance gut barrier integrity, and restore microbial balance (Zhang and Zhang, 2020). In these models, nanoparticles not only improve the retention of probiotics in the gastrointestinal tract but also boost their therapeutic benefits by transporting them directly to the site of action (Plavec and Berlec, 2020). Both *in vitro* and *in vivo* models are crucial to understanding the behavior of probiotics within the digestive system and

refining their delivery strategies for clinical uses.

Metabolic Outcomes in Treated Subjects

The use of nanoparticle-based probiotic delivery methods has demonstrated encouraging effects on metabolic outcomes in various treated subjects, particularly in models of metabolic illnesses such as obesity, type 2 diabetes, and dyslipidemia. Probiotics, when supplied efficiently through these advanced methods, can significantly alter the gut microbiota and modulate metabolic pathways, leading to better insulin sensitivity, lipid metabolism, and weight management. In animal models of obesity, probiotics encapsulated in nanoparticles have been demonstrated to prevent fat accumulation and enhance glucose homeostasis. This is mostly related to the changing of gut microbiota composition, which impacts the control of hormones such as leptin and ghrelin, both implicated in hunger regulation and fat storage (Cook *et al.*, 2012). Additionally, short-chain fatty acid (SCFA) generation, promoted by probiotic metabolism, has been associated with improved energy expenditure and lower inflammation, further contributing to positive metabolic benefits (Zhang and Zhang, 2020).

In clinical studies, patients with metabolic diseases have also shown improvements in lipid profiles, insulin sensitivity, and inflammatory markers following probiotic medication. These effects are often magnified when probiotics are co-delivered with prebiotics or other bioactive substances, which synergistically promote gut health and metabolic processes (Plavec and Berlec, 2020). Moreover, nanoparticle delivery technologies have proved to improve the bioavailability and stability of probiotics, ensuring continuous metabolic effects. The cumulative effects found in preclinical and clinical research show that probiotic nanoparticle-based systems hold significant potential for addressing metabolic diseases and enhancing general metabolic health.

Potential Risks and Limitations

Despite the promise of nanoparticle-based probiotic delivery, various hurdles and possible hazards remain. One problem is nanotoxicity, as certain components employed in nanoparticle formulations such as synthetic polymers or surfactants may induce unanticipated cytotoxic or inflammatory effects (Zhang and Zhang, 2020). Moreover, batch variability, scalability, and cost of production constitute challenges to the commercialization of these systems (Cook *et al.*, 2012). There is also the possibility of uncontrolled release or bacterial overgrowth, especially in immunocompromised persons, which could lead to unfavorable consequences rather than therapeutic advantages (Plavec and Berlec, 2020).

Immune Responses and Tolerance

The interaction between probiotics and the host immune system is complex and not totally predictable. While probiotics are typically viewed as harmless, immunological activation can occur, particularly if the host is susceptible to bacterial components such as lipoteichoic acids or peptidoglycans. Encapsulation may minimize this by limiting early exposure, however nanoparticle composition can itself activate immunological responses depending on the substance and method of delivery (Lee and Mooney, 2012). Long-term exposure might also develop to immunological resistance, thereby lowering the effectiveness of therapy over time (Plavec and Berlec, 2020).

Long-Term Effects on Microbiota Balance

Although probiotics are frequently meant to restore microbial balance, long-term supplementation, especially in nanoparticle-enhanced delivery, may alter the native microbiota composition in unforeseen ways. Continuous introduction of certain strains could lead to competitive exclusion of commensals or upset the ecological equilibrium of the gut microbiome (Cook *et al.*, 2012). Additionally, the persistence of given probiotics may interfere with host-microbe communication or lead to unexpected metabolic repercussions, underlining the necessity for longitudinal investigations (Zhang and Zhang, 2020).

Conclusion

Nanoparticle-mediated delivery systems have emerged as a transformative approach to probiotic therapy, addressing significant limitations such as low gastrointestinal survival, poor mucosal adherence, and uncontrolled release. By enabling protection and site-specific administration, these methods dramatically boost probiotic viability, colonization, and therapeutic efficiency. In both *in vitro* and *in vivo* investigations, encapsulated probiotics have exhibited benefits in metabolic, inflammatory, and immunological responses, highlighting their broad application across gastrointestinal and systemic illnesses. However, while the evidence is promising, problems such as long-term microbiota modification, material safety, immunological responses, and translational scalability remain significant considerations.

References

- Apovian CM. The clinical and economic consequences of obesity. *Am J Manag Care*. 2016;22(7 Suppl):s176–85.
- Asogwa K, Ameh S, Awojulu T, Oтуру O, Ezeani J. The Role of Food Systems in the Obesity-Diabetes Epidemic: Policy Innovations for a Healthier Nation. *Int J Med All Body Health Res*. 2022;3(2):68–72. <https://doi.org/10.54660/ijmbhr.2022.3.2.68-72>
- Breton J, Galmiche M, Déchelotte P. Dysbiotic gut bacteria in obesity: an overview of the metabolic mechanisms and therapeutic perspectives of next-generation probiotics. *Microorganisms*. 2022;10(2):452.
- Burgain J, Gaiani C, Linder M, Scher J. Encapsulation of probiotic living cells: From laboratory scale to industrial applications. *J Food Eng*. 2011;104(4):467–83.
- Cani PD. Microbiota and metabolites in metabolic diseases. *Nat Rev Endocrinol*. 2019;15(2):69–70.
- Cani PD, Amar J, Iglesias MA, Poggi M, Knauf C, Bastelica D, *et al.* Metabolic endotoxemia initiates obesity and insulin resistance. *Diabetes*. 2007;56(7):1761–72.
- Cani PD, Neyrinck AM, Fava F, Knauf C, Burcelin RG, Tuohy KM, *et al.* Selective increases of bifidobacteria in gut microflora improve high-fat-diet-induced diabetes in mice through a mechanism associated with endotoxaemia. *Diabetologia*. 2007;50(11):2374–83.
- Cani PD, Plovier H, Van Hul M, Geurts L, Delzenne NM, Druart C, *et al.* Endocannabinoids—at the crossroads between the gut microbiota and host metabolism. *Nat Rev Endocrinol*. 2019;15(1):52–66.
- Cook MT, Tzortzis G, Charalampopoulos D, Khutoryanskiy VV. Microencapsulation of probiotics for gastrointestinal delivery. *J Control Release*. 2012;162(1):56–67.
- de Vos WM, Tilg H, Van Hul M, Cani PD. Gut microbiome and health: Connecting actors across the metabolic system. *Nat Metab*. 2022;4(7):523–37.
- Everard A, Belzer C, Geurts L, Ouwerkerk JP, Druart C, Bindels LB, *et al.* Cross-talk between *Akkermansia muciniphila* and intestinal epithelium controls diet-induced obesity. *Proc Natl Acad Sci USA*. 2013;110(22):9066–71.
- Goodrich JK, Waters JL, Poole AC, Sutter JL, Koren O, Blekhman R, *et al.* Human genetics shape the gut microbiome. *Cell*. 2014;159(4):789–99.
- He Y, Wu W, Zheng HM, Li P, McDonald D, Sheng HF, *et al.* Regional variation limits applications of healthy gut microbiome reference ranges and disease models. *Nat Med*. 2022;28(1):172–85.
- Hu J, Guo P, Mao R, Ren Z, Wen J, Yang Q, *et al.* Gut microbiota signature of obese adults across different classifications. *Diabetes Metab Syndr Obes*. 2022;15:3933–47.
- Koh A, De Vadder F, Kovatcheva-Datchary P, Bäckhed F. From dietary fiber to host physiology: short-chain fatty acids as key bacterial metabolites. *Cell*. 2016;165(6):1332–45.
- Koliada A, Syzenko G, Moseiko V, Budovska L, Puchkov K, Perederiy V, *et al.* Association between body mass index and Firmicutes/Bacteroidetes ratio in an adult Ukrainian population. *BMC Microbiol*. 2017;17:1–6.
- Lee KY, Mooney DJ. Alginate: properties and biomedical applications. *Prog Polym Sci*. 2012;37(1):106–26.
- Million M, Angelakis E, Paul M, Armougom F, Leibovici L, Raoult D. Comparative meta-analysis of the effect of *Lactobacillus* species on weight gain in humans and animals. *Microb Pathog*. 2012;53(2):100–8.
- Murugan B, Sagadevan S, Fatimah I, Oh WC, Hossain MAM, Johan MR. Smart stimuli-responsive nanocarriers for cancer therapy—nanomedicine. *Nanotechnol Rev*. 2021;10(1):933–53.
- Plavec T, Berlec A. Engineered probiotics for delivery of therapeutic molecules. *Curr Opin Biotechnol*. 2020;61:172–80.
- Plavec T, Berlec A. Engineering strategies for therapeutic gut microbiota modulation. *Microorganisms*. 2020;8(6):830.
- Rastelli M, Cani PD, Knauf C. The gut microbiome influences host endocrine functions. *Endocr Rev*. 2019;40(5):1271–84.
- Ridaura VK, Faith JJ, Rey FE, Cheng J, Duncan AE, Kau AL, *et al.* Gut microbiota from twins discordant for obesity modulate metabolism in mice. *Science*. 2013;341(6150):1241214.
- Ryan DH, Yockey SR. Weight loss and improvement in comorbidity: differences at 5%, 10%, 15%, and over. *Curr Obes Rep*. 2017;6(2):187–94.
- Safeer Abbas M, Afzaal M, Saeed F, Asghar A, Jianfeng L, Ahmad A, *et al.* Probiotic viability as affected by encapsulation materials: Recent updates and perspectives. *Int J Food Prop*. 2023;26(1):1324–50.
- Bitragunta SL, Mallampati LT, Velagaleti V. A High Gain DC-DC Converter with Maximum Power Point Tracking System for PV Applications. *IJSAT-Int J Sci*

- Technol. 2019;10(2).
27. Turnbaugh PJ, Bäckhed F, Fulton L, Gordon JI. Diet-induced obesity is linked to marked but reversible alterations in the mouse distal gut microbiome. *Cell Host Microbe*. 2008;3(4):213–23.
 28. Turnbaugh PJ, Ley RE, Mahowald MA, Magrini V, Mardis ER, Gordon JI. An obesity-associated gut microbiome with increased capacity for energy harvest. *Nature*. 2006;444(7122):1027–31.
 29. World Health Organization (WHO). Obesity and overweight [Internet]. 2021. Available from: <https://www.who.int/news-room/fact-sheets/detail/obesity-and-overweight>
 30. Zhang L, Zhang LF. Nanoparticle-based delivery systems for probiotic bacteria: Applications and perspectives. *Biotechnol Adv*. 2020;43:107576.
 31. Zhang L, Zhang LF. Nanotechnology-based approaches for enhancing oral bioavailability of probiotics. *Curr Pharm Biotechnol*. 2020;21(6):505–16.