

From Nanoparticle Innovation to Safety Governance: A Roadmap for Responsible Translation in Pharmaceutical Sciences

Farshad Hosseini Shirazi^{a,b}

a. Department of Toxicology & Pharmacology, School of Pharmacy, Shahid Beheshti University of Medical Sciences, Tehran, Iran.

b. Pharmaceutical Sciences Research Center, Shahid Beheshti University of Medical Sciences, Tehran, Iran.

Please Cite this article as: Shirazi FH. From Nanoparticle Innovation to Safety Governance: A Roadmap for Responsible Translation in Pharmaceutical Sciences. *Int. Pharm. Acta.* 2025; 8(1):e13.

DOI: <https://doi.org/10.22037/ipa.v8i1.52438>

Nanotechnology is rapidly reshaping the future of pharmaceutical sciences. Whether in targeted drug delivery, controlled-release formulations, diagnostic probes, or surface-engineered nanocarriers, nanoparticles have become an essential part of modern therapeutic innovation. Yet, as the scientific community accelerates toward increasingly complex nanosystems, a fundamental question remains unanswered: *How can we ensure that innovation progresses in parallel with safety?* In many pharmaceutical settings, development timelines focus primarily on efficacy, stability, and manufacturability—while the biological consequences of chronic exposure, occupational handling, or long-term tissue accumulation remain underexplored [1]. The result is a widening gap between what we can design and what we can confidently regulate or translate. In this context, responsible governance is not a regulatory burden; it is a scientific necessity [2]. Recent studies of workers exposed to nanoparticles illustrate the urgency of this shift. Elevated oxidative stress markers and upregulated inflammatory genes, such as IL-6, IL-8, and TNF- α , indicate that even well-established nanomaterials can induce subtle but persistent biological responses. These findings do not imply that nanoparticles are inherently harmful; rather, they underscore that biological monitoring must become an integral part of pharmaceutical nanotechnology—not an afterthought [3, 4]. The lessons from occupational exposure translate directly into drug development: if nanoparticles can modulate inflammatory or oxidative pathways unintentionally, these pathways must be considered during therapeutic design as well [5].

As the pharmaceutical industry increasingly embraces nanocarriers—from ZIF-8-based systems to hyaluronic acid-coated platforms for targeted methotrexate delivery—our collective responsibility is to ensure that innovation is guided by structured risk assessment and

transparent safety principles. To achieve this, a shift from "product-focused innovation" to "ecosystem-focused governance" is required. Below, I propose a practical roadmap for this transition.

1. Pre-Development Safety Screening Must Become Standardized

Early screening typically focuses on size, shape, zeta potential, and drug-loading capacity. These physicochemical parameters are necessary but insufficient. The next generation of pre-development evaluation should systematically include:

- inflammatory markers (IL-6, IL-8, TNF- α , IL-1 β)
- oxidative stress markers (MDA, TAC, SOD)
- rapid in vitro genotoxicity assays
- immune-cell interaction profiling
- computational toxicity prediction when applicable

This shift transforms safety evaluation from a regulatory obligation into a scientific tool that guides design decisions. It also prevents costly downstream failures in preclinical or clinical stages [6, 7].

2. Occupational Exposure Monitoring Should Be Integrated into Pharmaceutical Manufacturing

Nanoparticle-based therapeutics cannot be separated from nanoparticle manufacturing. Workers in formulation laboratories, coating units, milling processes, or powder-handling environments represent the first biological interface with any newly developed nanomaterial [4, 6]. Observations from these occupational settings can therefore provide critical early signals about the biological behavior of nanoparticles [5, 6]. If workers exhibit measurable biological responses, such as changes in cytokine profiles or oxidative stress markers, these findings

should not remain confined to occupational health reports but should actively inform nanoparticle development pipelines. A responsible pharmaceutical system must therefore integrate structured biomonitoring programs for exposed personnel, including periodic evaluation of inflammatory cytokines and oxidative stress indicators, alongside environmental monitoring of airborne nanoparticle concentrations within manufacturing facilities [5, 6]. In parallel, engineering controls must be implemented for processes involving nanoparticle powders, while personnel involved in these activities should receive exposure-specific training focused on safe handling and risk awareness. Furthermore, risk stratification strategies based on job tasks, exposure intensity, and duration should be incorporated into workplace health programs. Data generated from occupational monitoring can provide valuable insights into nanoparticle–biological interactions and should therefore contribute not only to workplace safety policies but also to formulation design decisions and regulatory communication during pharmaceutical development [5].

3. Translational Governance Should Guide the Path to Clinical Application

Nanotechnology does not fit neatly into classical regulatory frameworks. A nanoparticle is neither a conventional small-molecule drug nor a typical biologic. Its biological behavior is strongly influenced by structural and physicochemical characteristics, such as geometry, surface coatings, aggregation tendencies, and the formation of a protein corona—properties that may change dynamically once the formulation leaves the laboratory environment and interacts with biological systems [1, 7]. Because of this complexity, traditional regulatory paradigms are often insufficient to fully capture the safety and translational implications of nanomedicine [8]. Addressing this challenge requires establishing a governance framework specifically tailored to nanoparticle-based therapeutics. Such a framework should incorporate standardized reporting of nanospecific physicochemical attributes, systematic post-market surveillance strategies capable of detecting long-term nanoparticle retention and delayed biological effects, and early communication between developers and regulatory agencies during the development process [4, 6]. In addition, emerging computational approaches, including artificial intelligence–supported modeling of nanoparticle biodistribution and toxicity, should be integrated to improve predictive safety assessments. Equally important is harmonizing safety metrics across academic research, pharmaceutical industry practices, and regulatory oversight. The ultimate objective of this framework is not to create additional barriers to innovation but rather to accelerate clinical translation by

reducing scientific and regulatory uncertainty surrounding nanoparticle-based therapeutics [6].

4. AI as the Integrating Force for the Future

One of the strongest messages for the pharmaceutical industry is that artificial intelligence should not be viewed merely as a computational luxury but rather as a critical bridge between innovation and safety in nanotechnology-based therapeutics. The complexity of nanoparticle systems—where biological responses depend on multiple interacting physicochemical parameters—creates analytical challenges that conventional experimental approaches alone cannot fully address. In this context, AI-driven analytical frameworks can support predictive toxicity modeling, enabling early identification of potentially hazardous nanoparticle characteristics before large-scale production or clinical translation [9]. Machine learning algorithms can also facilitate the analysis of large datasets describing nanoparticle–cell interactions, helping researchers identify patterns linking structural features to biological responses [9]. In parallel, AI-assisted optimization of formulation parameters can accelerate the development of safer and more effective nanoparticle-based drug delivery systems [10]. Beyond formulation design, intelligent monitoring systems integrated into manufacturing environments may enable automated environmental surveillance and early warning systems based on biomarker trends or exposure indicators detected in occupational settings [4, 5]. Such approaches can provide real-time insights into potential safety risks associated with nanoparticle handling and production. In this emerging landscape, the central question for the pharmaceutical industry is no longer whether artificial intelligence should be integrated into pharmaceutical nanotechnology, but rather how rapidly and at what level of regulatory and scientific responsibility this integration should occur. By combining computational prediction with experimental validation and occupational health monitoring, AI has the potential to become the central integrative tool guiding the safe and responsible development of nanomedicine [9, 10].

Toward a Responsible Future in Pharmaceutical Nanotechnology

Nanotechnology remains one of the most transformative forces in pharmaceutical science. But with great precision comes great responsibility. Biological monitoring, occupational exposure assessment, and transparent safety governance are not limitations—they are essential components of trustworthy innovation. The future belongs to those who develop not only the most advanced nanoparticles, but also the safest ones.

Acknowledgements

None.

Conflict of interest

There is no conflict of interest.

Funding

This study received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Authors' ORCIDs

Farshad Hosseini Shirazi:

<https://orcid.org/0000-0003-1356-385X>

References

1. Patel P, Shah J. Safety and toxicological considerations of nanomedicines: the future directions. *Current Clinical Pharmacology* 2017; 12(2):73-82.
2. Mishra M, Prasad K, Ramakrishn S, Jha AK. Nanomaterials in drug delivery—Promises and limitations. *Nano and Medical Materials* 2024; 4(1).
3. Zhao L, Zhu Y, Chen Z, Xu H, Zhou J, Tang S, et al. Cardiopulmonary effects induced by occupational exposure to titanium dioxide nanoparticles. *Nanotoxicology* 2018; 12(2):169-184.
4. Babaei V, Ashtarinezhad A, Torshabi M, Teimourian S, Shahmirzaie M, Abolghasemi J, et al. Evaluating Inflammatory Gene Expression Linked to Chronic Obstructive Pulmonary Disease in Workers of the Nanoparticle Industries: A Cross-Sectional Study. *Health Science Reports* 2026; 9(5):e72141.
5. Luo X, Xie D, Hu J, Su J, Xue Z. Oxidative stress and inflammatory biomarkers for populations with occupational exposure to nanomaterials: a systematic review and meta-analysis. *Antioxidants* 2022; 11(11):2182.
6. Mehrparvar N, Ashtarinezhad A, Shekaftik SO, Moghadasi N, Mohammadi S, Moosavi MS, et al. Occupational Exposure to UPVC Powder Containing Calcium Carbonate (CaCO₃) Nanoparticles: A Cross-Sectional Biological Monitoring and Qualitative Risk Assessment. *Health Science Reports* 2026; 9(5):e72182.
7. Jain K, Kumar Mehra N, K Jain N. Nanotechnology in drug delivery: safety and toxicity issues. *Current pharmaceutical design* 2015; 21(29):4252-4261.
8. Etheridge ML, Campbell SA, Erdman AG, Haynes CL, Wolf SM, McCullough J. The big picture on nanomedicine: the state of investigational and approved nanomedicine products. *Nanomedicine: nanotechnology, biology and medicine* 2013; 9(1):1-14.
9. Vamathevan J, Clark D, Czodrowski P, Dunham I, Ferran E, Lee G, et al. Applications of machine learning in drug discovery and development. *Nature reviews Drug discovery* 2019; 18(6):463-477.
10. Martin O. Artificial intelligence in drug discovery and development. *Advanced Sciences* 2021; 3(2):1-10.

Farshad Hosseini Shirazi, PhD

Professor of Toxicology & Pharmacology,

Department of Toxicology & Pharmacology of the School of Pharmacy, and

Dean of Pharmaceutical Sciences Research Center, Shahid Beheshti University of Medical Sciences, Tehran, Iran.

Editor in-Chief

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