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1 Heparin-modified graphene oxide loading anti-cancer drug and growth factor
2 with heat stability, long-term release property and lower cytotoxicity

3

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22

1 **Abstract**

2 To realize the long-term release property of drug, reduce the cytotoxicity of anti-cancer
3 drug and improve the heat stability of growth factor, a heparin-modified graphene oxide
4 (Hep-GO) was prepared through a click reaction between azide-modified graphene oxide and
5 propargylamine-modified heparin. Then, the Hep-GO was used as the carrier of doxorubicin
6 hydrochloride (DOX) and granulocyte colony stimulating factor (G-CSF), and
7 Hep-GO/DOX/G-CSF complex was fabricated. UV-Vis analysis was carried out to study the
8 colloidal stability of Hep-GO in aqueous solution. Thermogravimetric test was used to
9 determine its composition. Then, the loading process, *in vitro* release behavior, heat stability
10 and cytotoxicity of Hep-GO/DOX/G-CSF complex were studied. The results showed that the
11 Hep-GO/DOX/G-CSF complex displayed heat stability, long-term drug release property and
12 lower drug cytotoxicity, suggesting the great potential application of Hep-GO as
13 multifunctional drug delivery system.

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15 Key words: graphene oxide; anti-cancer drug; growth factor; heat stability; cytotoxicity

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1 **1. Introduction**

2 Doxorubicin hydrochloride (DOX) is a drug used in the treatments of a wide range of
3 cancers, including hematological malignancies (blood cancers like leukaemia and lymphoma),
4 many types of carcinoma (solid tumours) and soft tissue sarcomas. Common adverse effects
5 of doxorubicin include nausea and vomiting (which are seen in roughly 30-90% of people
6 treated with the drug), oral mucositis, oesophagitis, diarrhoea and skin reactions (including
7 hand-foot syndrome) [1].

8 Chemotherapy can cause myelosuppression and unacceptably low levels of white blood
9 cells, making patients susceptible to infections and sepsis. Granulocyte-colony stimulating
10 factor (G-CSF) is a glycoprotein that stimulates the bone marrow to produce granulocytes
11 and stem cells and release them into the bloodstream. In oncology and hematology, G-CSF is
12 used with certain cancer patients to accelerate recovery from neutropenia after chemotherapy,
13 allowing higher-intensity treatment regimens. But, the G-CSF easily loses the activity under
14 room temperature [2].

15 Graphene oxide (GO), a special two-dimensional nanomaterial, has been widely
16 investigated for its special physical properties and potential applications in nanoelectronic
17 devices, transparent conductors and nanocomposite materials [3-5]. In recent years, a
18 considerable amount of literatures have been reported for chemically modified GO as
19 hydrophobic drug carrier, because its large plane can load many aromatic drugs through π - π
20 stacking interaction. For example, Sun et al. synthesized a PEG-modified GO with good
21 water dispersion for DOX delivery and cellular imaging [6,7]. Zhang et al. used
22 folate-modified GO to load doxorubicin and camptothecin, and obtained a targeted drug

1 carrier for tumor [8]. Yang et al. prepared a GO/Fe₃O₄ hybrid nanoparticle for loading DOX
2 to develop a potential controlled targeted drug carrier [9]. Bao et al. prepared
3 chitosan-modified GO as a nanocarrier for drug and gene delivery, and showed a good result
4 in HeLa cell [10].

5 Heparin is a biologically relevant and highly anionic polysaccharide, which has been
6 widely studied due to its importance in medicine and biomedical applications, including its
7 common clinical use as an anticoagulant [11]. In addition, heparin contains distinct
8 recognition sites for growth factors, such as G-CSF [12] and other growth factors (bone
9 morphogenetic protein, basic fibroblast growth factor, and transforming growth factor-β)
10 [13-16].

11 In this paper, we attempted to prepare a drug/protein dual nanocarrier by modifying GO
12 with heparin. The water-soluble heparin could not only functionalize GO for growth factors
13 binding, but also enhance the stability of GO in aqueous solution. DOX and granulocyte
14 colony stimulating factor (G-CSF) were used as model drugs for loading by heparin-modified
15 GO, and their stability, long-term release property and cytotoxicity were studied.

16

17 **2. Materials and methods**

18 **2.1 Materials**

19 Graphene oxide (GO) was prepared by a two-step approach [17-19]. Heparin sodium
20 salt (potency > 120 U/mg) was purchased from Qiyun Biological Technology Company in
21 China. 3-Azidopropylamine was synthesized according to reported method [20].
22 1-Ethyl-3-(3-dimethylaminopropyl) carbodiimide hydrochloride (EDC·HCl), N-hydroxy-

1 succinimide (NHS), 4-dimethylamioipyridine (DMAP), N,N-dicyclohexylcarbodiimide
2 (DCC), sodium azide and propargylamine were purchased from Sigma-Aldrich and used
3 without further purification. Doxorubicin hydrochloride (DOX) was obtained from BioBasic
4 Inc., USA. Human granulocyte colony stimulating factor (G-CSF) was obtained from General
5 Hospital of Guangzhou Military Command in China. Thiazolyl blue tetrazolium bromide
6 (MTT) substance was purchased from Sigma-Aldrich (Shanghai, China). Mouse fibroblast
7 cell line NIH-3T3 was supplied by General Hospital of Guangzhou Military Command.
8 Human nasopharyngeal carcinoma CNE1 (CNE1) cells were supplied by General Hospital of
9 Guangzhou Military Command. All other reagents were of analytical grade and were used
10 without further purification.

11 **2.2 Preparation of heparin-modified GO (Hep-GO)**

12

13

Scheme 1

14

15 (1) Synthesis of azide-modified graphene oxide (GO-N₃)

16 For azide modification, 50 mg GO was dispersed in DMSO and sonicated for 30 min to
17 obtain a homogenous dispersion. Then, 160 mg 3-azidopropylamine, 108 mg DCC and
18 31.35mg DMAP were added. After reaction for 48 h at room temperature, the solution was
19 dialyzed (MWCO = 5 000) in distilled water for 3 d, and GO-N₃ was obtained after frozen to
20 dry with a yield of 96%. FT-IR (KBr, cm⁻¹): 3430 ($\nu_{\text{O-H}}$), 2920 ($\nu_{\text{C-H}}$), 2100 ($\nu_{\text{N=N-N}}$), 1590
21 ($\nu_{\text{C=O}}$), 1410 ($\delta_{\text{C-H}}$), 1250 ($\delta_{\text{O-H}}$), 1110 ($\delta_{\text{C=O}}$) and 900-850 ($\delta_{\text{C-H}}$). The content of azide group
22 in GO-N₃ was analyzed by elemental analyzer (Vario EL, Elementar) and determined to be

1 2.59%.

2 (2) Synthesis of propargylamine-modified heparin (Hep-PA)

3 For propargylamine modification, 160 μL propargylamine, 448 mg EDC·HCl and 272
4 mg NHS was added into 10 mL heparin aqueous solution (80 mg/mL). Then, the pH value of
5 the mixture was adjusted to 6.0-6.5. After reaction for 48 h at room temperature, the solution
6 was dialyzed (MWCO = 5 000) for 3 d and frozen to dry to obtain Hep-PA (yield: 78%). ^1H
7 NMR (300 MHz, D_2O): δ (ppm) 2.68 (s, 1H, NHCH_2CCH), 3.0 (m, 2H, NHCH_2CCH), 1.85
8 (s, 3H, OCH_3 of sugar units), 3.35-3.95 and 4.50 (m, 4H, backbone of sugar units). Based on
9 the ^1H NMR analysis, 28 propargylamine molecules were found for each 100 sugar unit of
10 heparin.

11 (3) Synthesis of heparin-modified graphene oxide (Hep-GO)

12 The synthesis route to heparin-modified graphene oxide (Hep-GO) was shown in
13 scheme 1. Briefly, 10 mg GO-N_3 was dispersed in DMSO and sonicated for 30 min to obtain
14 a homogenous dispersion. 5 mL Hep-PA solution (20 mg/mL), 12.5mg $\text{CuSO}_4 \cdot 5\text{H}_2\text{O}$ and
15 80mg sodium ascorbate were then added. Under atmospheric argon, the reaction was
16 conducted at 40 $^\circ\text{C}$ for 24 h. The solution was dialyzed (MWCO = 14 000) for 3 d and frozen
17 to dry. Hep-GO was then obtained with a yield of 72%. Its structure was characterized by ^1H
18 NMR analysis with the help of a 300 MHz Bruker Avance DPX-300 spectrometer (using
19 D_2O as solvent), and FTIR analysis with the help of a Nicolet 670 Fourier-transform infrared
20 spectrometer (using KBr pellets). The composition of Hep-GO was analyzed by
21 Thermogravimetric (TG) test with a temperature range of 50-600 $^\circ\text{C}$ and a scan rate of
22 10 $^\circ\text{C}/\text{min}$. And its dispersion stability in aqueous solution was studied using a UV-Vis

1 spectrophotometer at an absorbance wavelength of 500 nm.

2 **2.3 Loads of DOX and G-CSF**

3 Doxorubicin hydrochloride (DOX) was dissolved in water with the concentration of 10
4 mg/mL, and Hep-GO was dispersed in aqueous solutions with the concentration of 10 mg/mL.
5 Then, DOX solution (1 mL) was added into Hep-GO dispersion (1 mL) drop by drop. The
6 resultant mixture was stirring at room temperature for 24 h, and then centrifugated at 50 000
7 r/min for 10 min. After washing with distilled water for three times, the residue was frozen to
8 dry to obtain the DOX-loaded Hep-GO (Hep-GO/DOX). The loading efficiency of DOX on
9 Hep-GO was calculated by analyzing centrifugation solution using UV-Vis
10 spectrophotometer at the absorbance wavelength of 480 nm [21].

11 To obtain the Hep-GO/G-CSF or Hep-GO/DOX/G-CSF complex, 1 mL Hep-GO or
12 Hep-GO/DOX mixture (Hep-GO: 10 mg/mL) was mixed with 1 mL G-CSF solution (10
13 mg/mL). The resultant mixture was stirring at room temperature for 30 min, and then
14 dialyzed (MWCO = 30 000) for 24 h with distilled water to remove free G-CSF. The loading
15 efficiency of G-CSF was analyzed by ELISA assay.

16 In Hep-GO/DOX, 712 mg DOX was loaded onto 1 g Hep-GO; in Hep-GO/G-CSF, 967
17 mg G-CSF was loaded onto 1 g Hep-GO; in Hep-GO/DOX/G-CSF, 687 mg DOX and 933
18 mg G-CSF were loaded onto 1 g Hep-GO.

19 The zeta potentials and particle sizes of Hep-GO, Hep-GO/DOX and
20 Hep-GO/DOX/G-CSF were studied by a Zeta Potential Analyzer instrument (ZetaPALS,
21 Brookhaven Instruments Corporation, USA). TEM test was used to observe their
22 morphologies.

1 2.4. *In vitro* release

2 The simulated gastrointestinal medium and the amount of Hep-GO/DOX/G-CSF that
3 was added were determined from previous reports [22,23]. Briefly, the simulated gastric fluid
4 was a solution of 0.1 mol/L hydrochloric acid (pH=1.2), and 140 mg of the
5 Hep-GO/DOX/G-CSF was added to 10 mL of the simulated stomach fluid. The simulated
6 small intestinal fluid was prepared with pH=6.8 PBS containing 1% of pancreatin, and 95 mg
7 of Hep-GO/DOX/G-CSF was added to 10 mL of the simulated small intestine medium. The
8 simulated colon fluid was prepared as a pH=7.2 buffer medium that was composed of 0.15 wt%
9 potassium dihydrogen orthophosphate, 0.15 wt% dipotassium hydrogen orthophosphate, 0.45
10 wt% sodium chloride, 0.05 wt% magnesium chloride hexahydrate, 0.005 wt% ferrous
11 sulphate heptahydrate, 0.015 wt% calcium chloride dihydrate and 0.015 wt% sufficient
12 sodium hydroxide, and 1 g of Hep-GO/DOX/G-CSF was added to 10 mL of the simulated
13 colon medium.

14 The release studies were conducted at 37 °C under slow stirring (50 rpm). The
15 supernatant (2.0 mL) was withdrawn periodically at predetermined time interval, and another
16 2.0 mL of simulated gastrointestinal medium was added to continue the experiment. The
17 supernatant was dialysed (immersed in PBS (pH=7.4) with a dialysis bag, molecular weight
18 cut off of 3000). The amount of released DOX was determined according to a method
19 reported previously by a UV spectrophotometer (S52, China) at the absorbance wavelength of
20 480 nm [20], and G-CSF was determined by ELISA assay. The percentage of cumulative
21 amount of released drug was calculated from standard calibration curve. All release studies
22 were carried out in triplicate.

1 **2.5 Heat stability**

2 262 mg Hep-GO/DOX/G-CSF (containing 100 mg Hep-GO, 68.7 mg DOX and 93.3 mg
3 G-CSF) or 93.3 mg G-CSF was respectively immersed in 50 mL pH=7.0 ultrapure water at
4 25 °C, 35 °C, 45 °C or 60 °C. At predetermined time point, the solution was cooled to 25 °C,
5 and then centrifugated at 50 000 r/min for 10 min. After that, the concentration of DOX was
6 calculated by analyzing centrifugation solution using UV-Vis spectrophotometer at the
7 absorbance wavelength of 480 nm [21].

8 **2.6 Cytotoxicity assay.**

9 Cytotoxicity of sample was tested using the MTT assay based on the cellular uptake of
10 MTT and its subsequent reduction in the mitochondria of living cells to dark blue MTT
11 formazan crystals. NIH-3T3 cells or CNE1 cells were seeded on 96-well plates ($1.5-2 \times 10^4$
12 cells/well) in corresponding medium. Then, the NIH-3T3 cells or CNE1 cells were treated
13 with the samples for 24 h. After that, MTT (5 mg/mL in PBS) was added to each well and
14 incubated for additional 4 h (37 °C, 5% CO₂). The cells were then lyzed in dimethyl sulfoxide
15 (150 µL/well) and the plates were allowed to stay in the incubator (37 °C, 5% CO₂) to
16 dissolve the purple formazan crystals. The color intensity reflecting cell viability was read at
17 490 nm using a Model-550 Enzyme-linked immunosorbent microplate (Bio-Rad, USA), and
18 the morphologic changes of NIH-3T3 cells or CNE1 cells were photographed by a IX-70
19 inverted phase contrast microscope (Olympus, Japan). All the experiments were repeated four
20 times and Statistical Product and Service Solutions software was used to assess statistical
21 significance of the differences among treatment groups.

22 **2.7 Statistical analysis**

1 The statistical analysis was performed using Statistical Product and Service Solutions
2 statistical software (SPSS 11.0, United States). The differences between the groups were
3 assessed using the analysis of variance test. The results were considered statistically
4 significant when the P value was <0.05 or <0.01 .

5

6 **3. Results and discussion**

7

8

Figure 1

9

10 Figure 1(A) showed the ^1H NMR spectra of Hep-PA and Hep-GO. Compared with that
11 of Hep-PA, the spectrum of Hep-GO showed a new peak at 7.80 ppm, which could be
12 contributed to the presence of the triazole proton due to Cu(I)-catalyzed Huisgen 1,3-dipolar
13 cycloaddition of GO-N_3 with Hep-alkynyl. Such a signal was also observed by Srinivasachari
14 *et al.* [24] who synthesized multivalent polycationic β -cyclodextrin “click clusters” by
15 reacting an acetylated-per-azido- β -cyclodextrin with the alkyne dendrons containing one to
16 five ethyleneamine units with the help of copper-catalyzed 1,3-dipolar cycloaddition. Besides,
17 another new peak at 2.59 ppm might be attributed to the methylene protons from
18 3-azidopropylamin of GO-N_3 . To further confirm the chemical structure of Hep-GO, FT-IR
19 test was carried out and the result was showed in Figure 1(B). Before click-reaction, Hep-PA
20 and GO-N_3 showed their characteristic absorption bands, respectively. Particularly, GO-N_3
21 sample showed the obvious band of azido group at 2100 cm^{-1} [25]. After the click
22 conjugation, the spectrum of the resultant Hep-GO did not show the characteristic absorption
23 band of the azido at 2100 cm^{-1} . However, it exhibited the main characteristic absorption

1 bands of Hep-PA and GO-N₃, which confirmed the click conjugation reaction and all azido
2 groups of GO-N₃ reacted with Hep-PA.

3 The composition of the obtained Hep-GO was analyzed by TG test shown in Figure 1(C).
4 Under nitrogen atmosphere, GO-N₃ sample remained about 65.87% residue after heated to
5 600 °C, while Hep-PA sample only remained 30.79%. Hep-GO sample began to decompose
6 at about 240 °C and remained 39.65% residue. From these results, the content of heparin in
7 Hep-GO could be calculated to be 74.7 wt%.

8

9

Figure 2

10

11 Figure 2 showed the colloidal stability characterization of Hep-GO in aqueous solution.
12 Figure 2(A) gave the change of relative absorbance with respect to the setting time for GO
13 and Hep-GO samples. It was found that there was little change in relative absorbance for
14 Hep-GO sample after 12 h, which proved that the obtained Hep-GO dispersion had a good
15 colloidal stability. As a contrast, the pure GO without modification by heparin showed a
16 faster deposition in aqueous solution. Inset image showed the typical results of Hep-GO and
17 GO aqueous samples after 4 d. In order to confirm the homogenous dispersion of the Hep-GO
18 in aqueous solution, UV-Vis absorption spectra were collected for different Hep-GO
19 concentrations. As shown in Figure 2(B), the intensities of absorption spectra had a good
20 linear relation with the concentrations of Hep-GO (inset figure), i.e., following
21 Lambert-Beer's law. This result confirmed that Hep-GO showed a good dispersion in
22 aqueous solution [26]. From these results, it seemed that the utilization of heparin could
23 function as an effective stabilizing agent for the formation of colloidal stable Hep-GO sample.

1 In fact, the obtained colloidal Hep-GO showed a macroscopically homogeneous dispersion
2 more than two weeks.

3

4

Figure 3

5

6 Due to the interactions between heparin and growth factors, meanwhile between GO and
7 drugs, Hep-GO could be used as dual carrier for drug and protein. Figure 3(A) showed the
8 particle size and zeta potential results of Hep-GO, Hep-GO/DOX and Hep-GO/DOX/G-CSF.
9 GO showed a zeta potential of -21.23 mV and particle size of 907 nm. Due to the carboxyl
10 groups of GO plane sheet and electronegative groups of heparin, Hep-GO showed a zeta
11 potential of -29.36 mV and particle size of 817 nm. After loading DOX onto GO sheet, the
12 Hep-GO/DOX complex showed a decreased zeta potential of -22.04 mV and particle size of
13 634 nm, respectively. This result might be due to the interaction between electropositive
14 DOX and Hep-GO, which resulted in a slight shrinkage of Hep-GO nanoparticles. After
15 binding G-CSF followed, the obtained Hep-GO/DOX/G-CSF showed a further smaller
16 particle size (568.8 nm) but an increased zeta potential (-23.22 mV), which might be caused
17 due to the net negative charge of G-CSF. Figure 3(B) showed the TEM images of Hep-GO,
18 Hep-GO/DOX and Hep-GO/DOX/G-CSF. It could be seen that all samples in these cases
19 showed the nanosheet morphologies with good dispersion in aqueous solution.

20

21

Figure 4

22

23 The average residence time for a dosage form in the gastrointestinal system was
24 different after oral administration, which was approximately 1-3 h in the stomach, 3-5 h in

1 the small intestine, and 30-50 h in the colon [22, 23]. The *in vitro* DOX and G-CSF release
2 behaviours of the Hep-GO/DOX/G-CSF were evaluated in different simulated
3 gastrointestinal media (Figure 4). To overcome the undesirable side effects of DOX and
4 G-CSF after oral administration, the Hep-GO/DOX/G-CSF must sustain the releases of the
5 DOX and G-CSF. As shown in Figure 4, various release rates were found. In all the cases, the
6 releases of DOX and G-CSF could be prolonged and no initial burst release was obvious,
7 which indicated that the releases of DOX and G-CSF could be controlled and sustained in the
8 Hep-GO/DOX/G-CSF form. These results indicated that the Hep-GO/DOX/G-CSF was
9 stable in simulated gastric fluid, and it reduced the undesirable side effect of DOX. Sustained
10 release and high DOX or G-CSF cumulative release were achieved in the
11 Hep-GO/DOX/G-CSF, which was important in drug delivery.

12 To understand the DOX and G-CSF release mechanisms of Hep-GO/DOX/G-CSF, we
13 fitted the accumulative release data using the semiempirical equation (5) [27, 28]:

$$14 \quad M_t / M_\infty = Kt^n \quad (\text{for } M_t / M_\infty \leq 0.6) \quad (5)$$

15 Where M_t and M_∞ were respectively the cumulative amount of the drug released at t and
16 equilibrium, K was the rate constant relating to the properties of the hydrogel matrix and the
17 drug, and n was the release exponent characterising the transport mechanism.

18 By plotting $\log (M_t/M_\infty)$ versus $\log (t)$, the n values as well as the corresponding
19 determination coefficients (R^2) were obtained. The n values were between 0.53 and 0.72, and
20 the R^2 values were greater than 0.98. According to the semi-empirical equation (5), there
21 were four distinguishable modes of diffusion, as follows: (i) the value of $n=0.5$ suggested
22 Fickian or Case I transport behaviour, in which the relaxation coefficient was negligible

1 during transient sorption; (ii) the value of $n=1$ referred to a non-Fickian or Case II mode of
2 transport in which the morphological change was abrupt; (iii) if $0.5 < n < 1$, the transport
3 process was anomalous, corresponding to Case III, and the structural relaxation was
4 comparable to diffusion; (iv) a value of $n < 0.5$ indicated a pseudo-Fickian diffusion behaviour,
5 in which the sorption curve resembled Fickian curve, with the speed of the approach to the
6 final equilibrium being very slow. In our case, the n values were found to be in the 0.5 to 1
7 range, showing a Case III mechanism, which indicated that the structural relaxation was
8 comparable to diffusion (Table 1).

9
10 Table 1

11
12 The *in vitro* evaluation suggested that the Hep-GO/DOX/G-CSF exhibited sustained
13 release behaviour in the simulated medium of the gastrointestinal tract. This finding might be
14 helpful for decreasing damage of DOX to the gastrointestinal tract and achieving long-term
15 and sustained releases of DOX and G-CSF for efficient clinical use [29,30].

16
17 Figure 5

18
19 As shown in figure 5, a rise in temperature would accelerate the rate of degradation of
20 G-CSF. With the rise in temperature, the rate of degradation of G-CSF was accelerated. But,
21 the G-CSF in Hep-GO/G-CSF was more stable in heating condition than the G-CSF alone.
22 Since the Hep-GO bundled the G-CSF, the G-CSF in Hep-GO/G-CSF would be isolated from
23 heating condition, which made the G-CSF more stable than the G-CSF alone and would

1 extend the store and application condition of G-CSF.

2

3

Figure 6

4

5 The cytotoxicity test on the sample was also carried out. As shown in Figure 6(A),
6 G-CSF acted as a growth hormone promoting NIH-3T3 cellular growth and preventing
7 apoptosis. Hep-GO (100 $\mu\text{g}/\text{mL}$) exhibited a slight cytotoxicity (15.7%) to NIH-3T3 within
8 24 h incubation. DOX exhibited a serious cytotoxicity to NIH-3T3 within 24 h incubation
9 (the cell viability of NIH-3T3 was reduced to 6.0% with 100 $\mu\text{g}/\text{mL}$ DOX). However, the cell
10 viability of NIH-3T3 was reduced to 35.0% with 100 $\mu\text{g}/\text{mL}$ DOX-loaded Hep-GO/DOX,
11 while the cell viability of NIH-3T3 was reduced to 45.0% with 100 $\mu\text{g}/\text{mL}$ DOX-loaded
12 Hep-GO/DOX/G-CSF, since there was G-CSF in Hep-GO/DOX/G-CSF. Therefore, the
13 cytotoxicity of Hep-GO/DOX/G-CSF was significantly lower than DOX, and the use of DOX
14 would be safer than the direct use of DOX, which was in accordance with the results of
15 inverted phase contrast microscope measurements (Figure 6(B)). In Figure 6(B), when the
16 concentrations of total DOX and G-CSF in samples were set at 100 $\mu\text{g}/\text{mL}$, the NIH-3T3
17 cells showed different morphologic changes after interaction for 24 h: In the blank control
18 group (a), the NIH-3T3 cells had good shape and presented long fusiform or polygon. In the
19 GO group (b) (100 $\mu\text{g}/\text{mL}$), the NIH-3T3 cells decreased slightly, but the NIH-3T3 cells still
20 had good shape and presented long fusiform or polygon. In the Hep-GO group (c), the
21 NIH-3T3 cells also decreased slightly, but the NIH-3T3 cells still had good shape and
22 presented long fusiform or polygon. In the DOX group (d), the number of NIH-3T3 cells

1 decreased significantly, and the shapes of majority of the cells were seriously injured. In the
2 G-CSF group (e), the NIH-3T3 cells had better shape. In the Hep-GO/DOX group (f), the
3 number of NIH-3T3 cells decreased, and the shapes of majority of the cells were seriously
4 injured. In the Hep-GO/DOX/G-CSF group (g), the number of NIH-3T3 cells decreased, but
5 the shapes of the cells still presented long fusiform or polygon. Compared with other reports
6 [17-19], we concluded that Hep-GO/DOX/G-CSF was relatively biocompatible nanomaterial
7 with reduced cytotoxicity.

8

9

Figure 7

10

11 As shown in Figure 7(A), DOX exhibited a serious cytotoxicity to CNE1 within 24 h
12 incubation (the cell viability of NIH-3T3 was reduced to 4.1% with 500 $\mu\text{g/mL}$ DOX).
13 However, the cell viability of CNE1 was reduced to 9.1% with 500 $\mu\text{g/mL}$ DOX-loaded
14 Hep-GO/DOX, while the cell viability of CNE1 was reduced to 9.7% with 500 $\mu\text{g/mL}$
15 DOX-loaded Hep-GO/DOX/G-CSF. Therefore, the cytotoxicity of Hep-GO/DOX/G-CSF on
16 CNE1 cells was as much the same as DOX, but the use of Hep-GO/DOX/G-CSF would be
17 safer than the direct use of DOX, which was in accordance with the results of inverted phase
18 contrast microscope measurements (Figure 6(B)). In Figure 6(B), when the concentrations of
19 total DOX in samples were set at 100 $\mu\text{g/mL}$, the CNE1 cells showed different morphologic
20 changes after interaction for 24 h: In the blank control group (a), the CNE1 cells had good
21 shape and presented long fusiform or polygon. In the DOX group (b), the Hep-GO/DOX
22 group (c) and the Hep-GO/DOX/G-CSF group (g), the number of CNE1 cells decreased

1 significantly, and the shapes of majority of the cells were seriously injured.

2 The *in vitro* release characterization indicated that both of two model drugs showed a
3 long-term drug release property, heat stability and lower drug cytotoxicity. The π - π bonding
4 interaction and ionic bond interaction between carrier (Hep-GO) and drugs (DOX and G-CSF)
5 was controlled the drug load and long-term drug release property [17-19]. What is more, the
6 long-term DOX release, along with the coating of DOX into Hep-GO also reduced the
7 cytotoxicity of DOX. Since the G-CSF will be exposed to environmental conditions different
8 from a research lab setting, many factors, including light, temperature, salinity, etc., are
9 suspected to affect the stability of the G-CSF [2]. The Hep-GO anchored the G-CSF and
10 isolated the G-CSF from outside, thus G-CSF in Hep-GO/DOX/G-CSF showed heat stability.

11 Compared with other reports [13-16], we concluded that the carrier of Hep-GO has
12 better biocompatible, and exhibited a great potential as multifunctional drug delivery
13 nanocarrier.

14

15 **Conclusion**

16 A dual drug nanocarrier had been prepared by the click conjugation of heparin with
17 graphene oxide. The model drugs, doxorubicin hydrochloride (DOX) and granulocyte colony
18 stimulating factor (G-CSF), were then loaded. UV-Vis analysis confirmed that this Hep-GO
19 had high loading efficiencies for DOX and G-CSF. The *in vitro* release characterization
20 indicated that both of two model drugs showed a long-term drug release property, better heat
21 stability and lower drug cytotoxicity. Such a Hep-GO exhibited a great potential as
22 multifunctional drug delivery nanocarrier.

23

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8

9 Author contributions

10 Ting Wu and Jinyan Bu prepared heparin-modified graphene oxide; Bin Zhang and Lixing
11 Lin loaded anti-cancer drug and growth factor onto heparin-modified graphene oxide;
12 Yuanyuan Liang and Zhimin Wu characterized the complex; Ting Wu, Hongxi Liu, and
13 Shuiping Wen conducted *in vitro* evaluation; Ting Wu, Bin Zhang, Shaozao Tan and Xiang
14 Cai analysed the data and wrote the manuscript; Shaozao Tan and Xiang Cai conceived of
15 this project, designed the experiments; all authors discussed the results and commented on the
16 manuscript.

17

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16

1 **Table 1.** The kinetics parameters of DOX and G-CSF releases.

simulated medium	Drug	K^*	n^{**}	R^2	Transport mechanism
stomach fluid	DOX	0.78 ± 0.07	0.51 ± 0.05	0.95	Case III
	G-CSF	0.56 ± 0.01	0.57 ± 0.01	0.99	Case III
small intestine	DOX	0.82 ± 0.03	0.49 ± 0.03	0.98	Case III
	G-CSF	0.57 ± 0.02	0.55 ± 0.04	0.94	Case III
colon	DOX	0.83 ± 0.04	0.46 ± 0.02	0.96	Case III
	G-CSF	0.62 ± 0.04	0.54 ± 0.03	0.95	Case III

2 * K , rate constant, \pm SD, $n = 3$.

3 ** n , release exponent, \pm SD, $n = 3$.

4

5

1 **Figure capture:**

2 Scheme 1. Step 1, synthesis route to azide-modified graphene oxide (GO-N₃); step 2,
3 synthesis route to propargylamine-modified heparin (Hep-PA); step 3, synthesis route to
4 heparin-modified graphene oxide (Hep-GO).

5

6 Figure 1. (A) ¹H NMR spectra of Hep-PA and Hep-GO (D₂O, 25 ° C). (B) FT-IR spectra of
7 Hep-PA, GO-N₃ and Hep-GO. (C) TG curves of Hep-PA, GO-N₃ and Hep-GO.

8

9 Figure 2. (A) The changes of relative absorbance with respect to the setting time for GO and
10 Hep-GO in aqueous solution at 500 nm (inset was the picture of Hep-GO and GO aqueous
11 dispersion after 4 d). (B) UV-vis absorption spectra of Hep-GO in water with different
12 relative concentrations of C₀ (C₀ denoted the original concentration of Hep-GO in water; 1:
13 1.0C₀, 2: 0.8C₀, 3: 0.6C₀, 4: 0.4C₀, 5: 0.2C₀). Inset was Lambert-Beer's plot for the
14 absorption at 500 nm.

15

16 Figure 3. (A) Particle size and (B) zeta potential results of GO, Hep-GO, Hep-GO/DOX and
17 Hep-GO/DOX/G-CSF. (C) TEM images of GO, Hep-GO, Hep-GO/DOX and
18 Hep-GO/DOX/G-CSF.

19

20 Figure 4. The release behaviours of DOX and G-CSF from the Hep-GO/DOX/G-CSF in the
21 simulated medium of the gastrointestinal tract (±SD, n = 3).

22

1 Figure 5. Stabilities of G-CSF and Hep-GO/G-CSF preserved in different pH aqueous
2 solution at various temperatures.

3

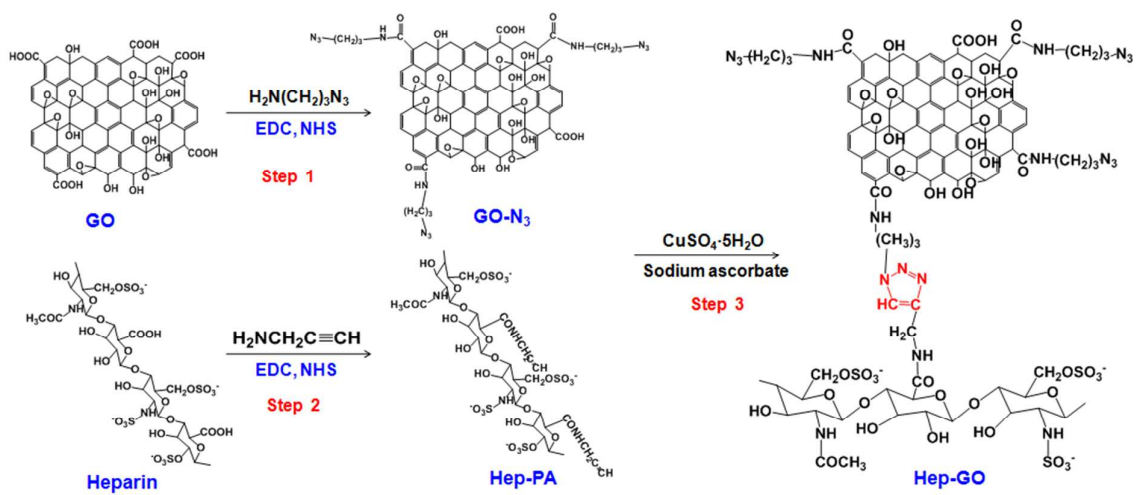
4 Figure 6. (A) Cytotoxicity of sample on NIH-3T3 cells. (B) When the concentrations of the
5 samples were set at 100 $\mu\text{g}/\text{mL}$, the morphologic changes of NIH-3T3 cells after interaction
6 for 24 h. (In Hep-GO/DOX and Hep-GO/DOX/G-CSF, the concentration meant the total
7 DOX in sample).

8

9 Figure 7. (A) Cytotoxicity of sample on CNE1 cells. (B) When the concentrations of the
10 samples were set at 100 $\mu\text{g}/\text{mL}$, the morphologic changes of CNE1 cells after interaction for
11 24 h. (In Hep-GO/DOX and Hep-GO/DOX/G-CSF, the concentration meant the total DOX in
12 sample).

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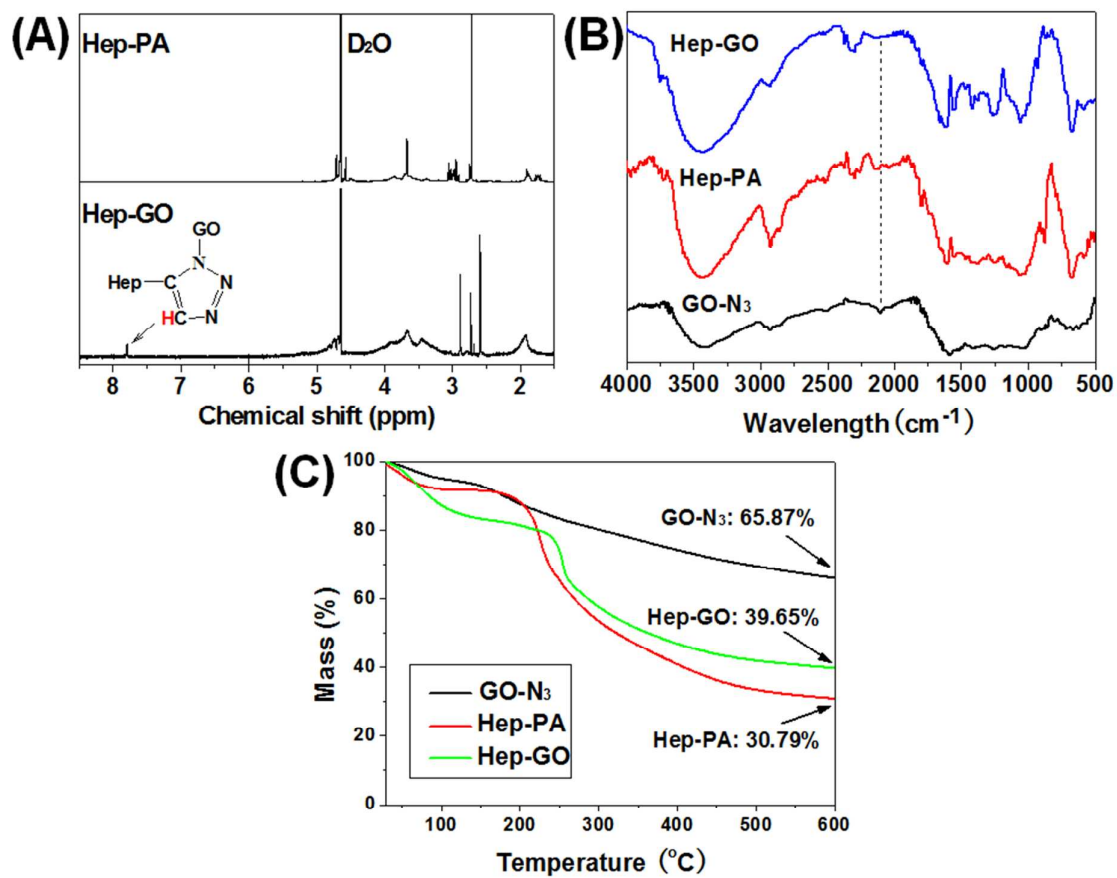
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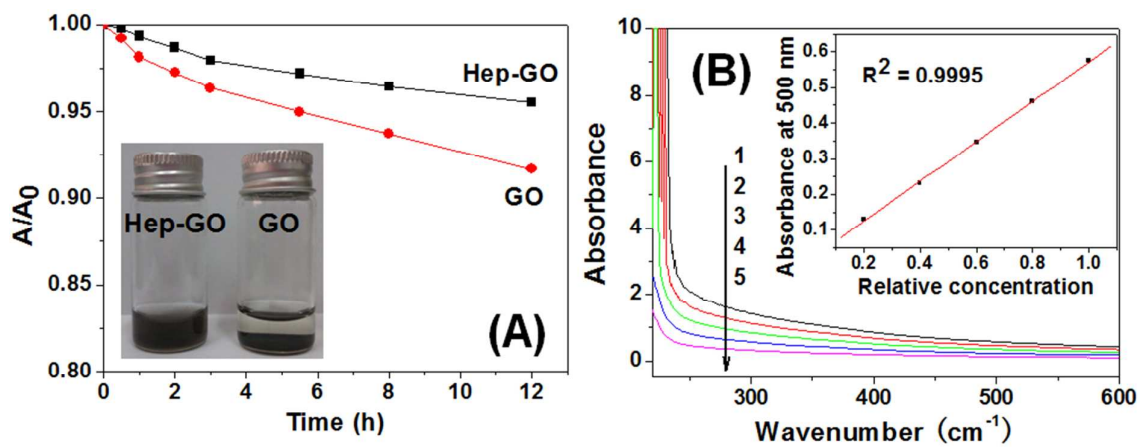
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Scheme 1



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Figure 1



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Figure 2

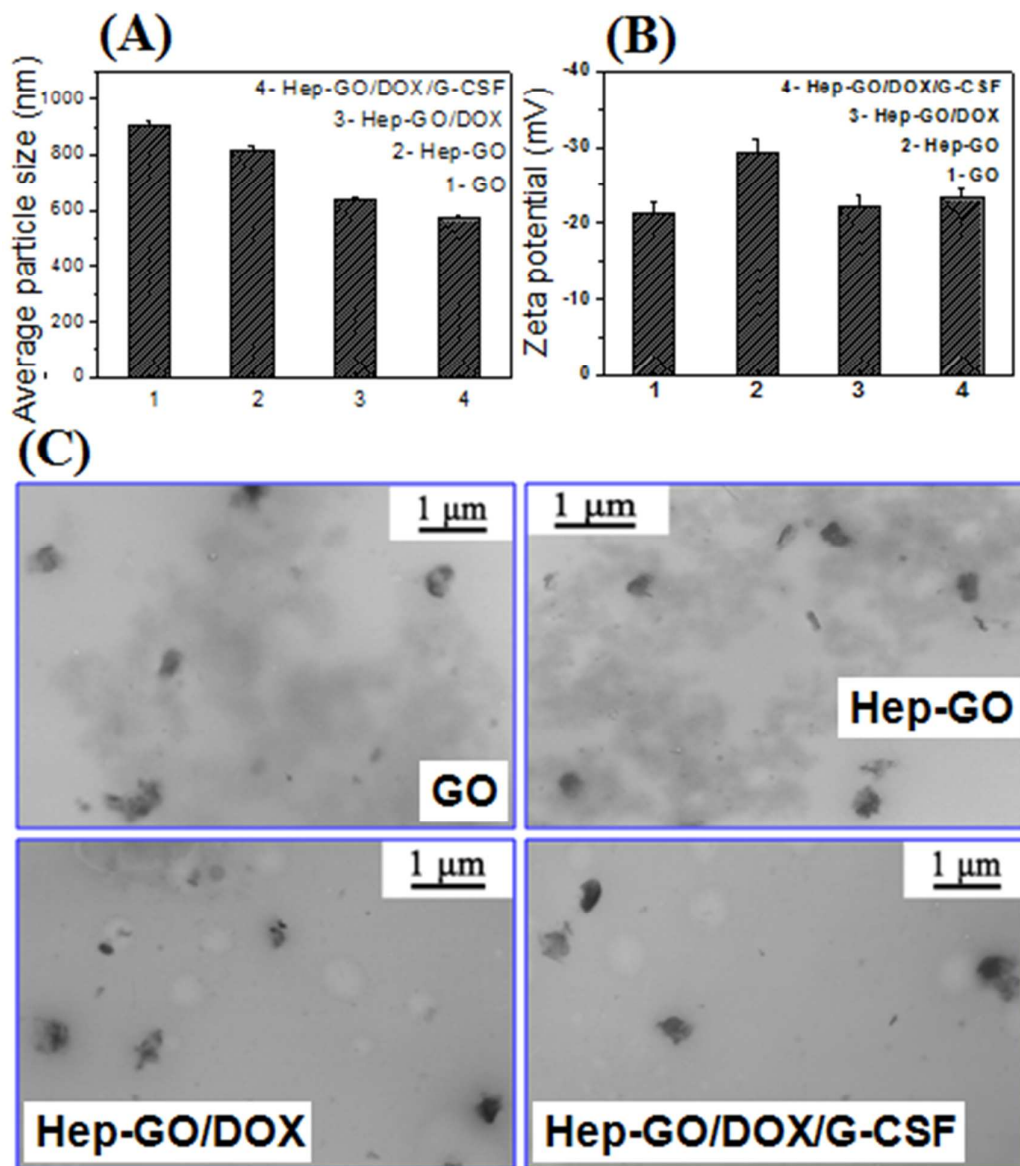
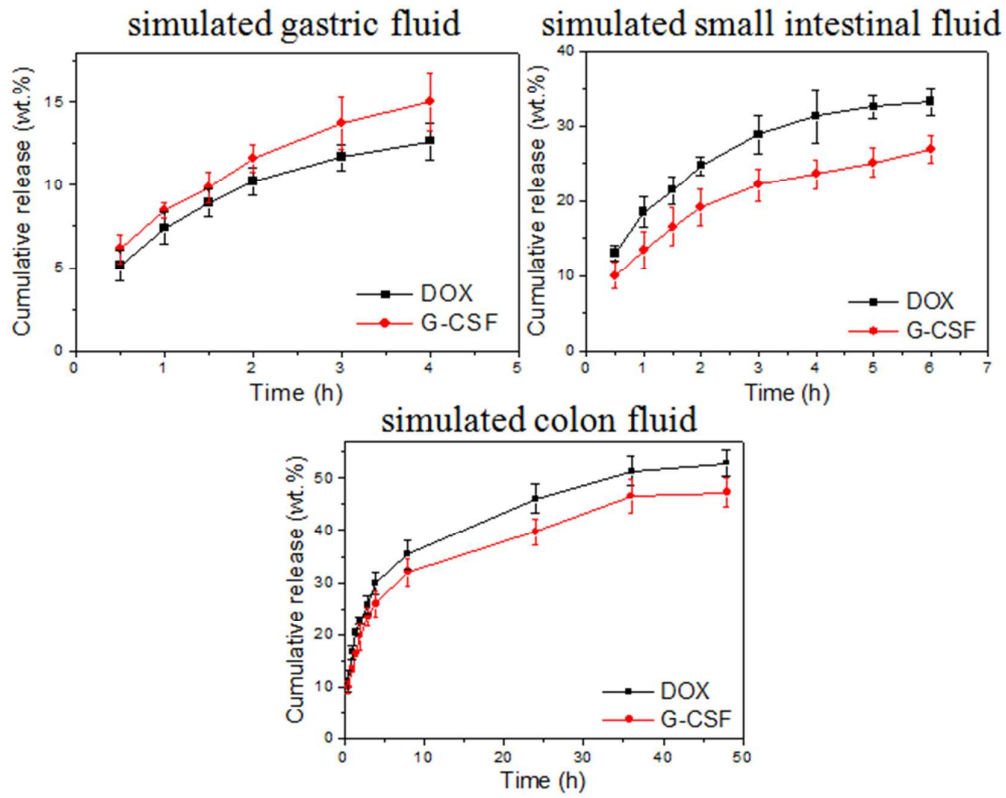


Figure 3

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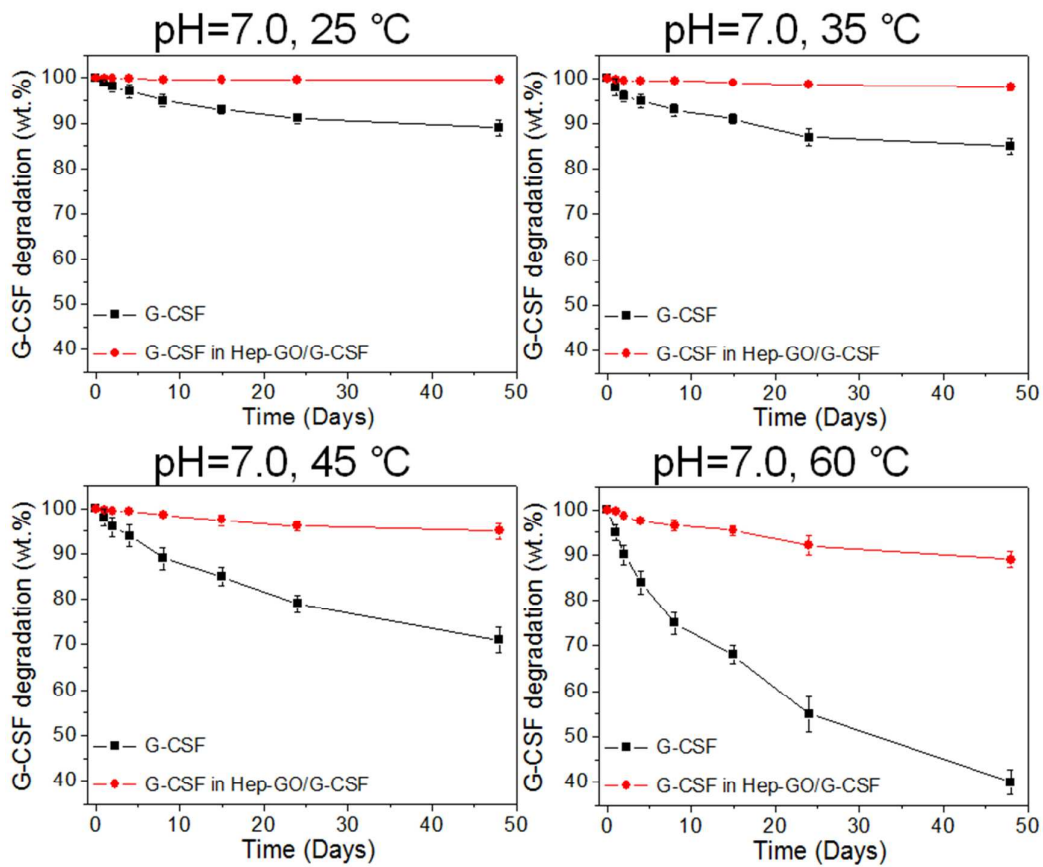
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Figure 4



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Figure 5

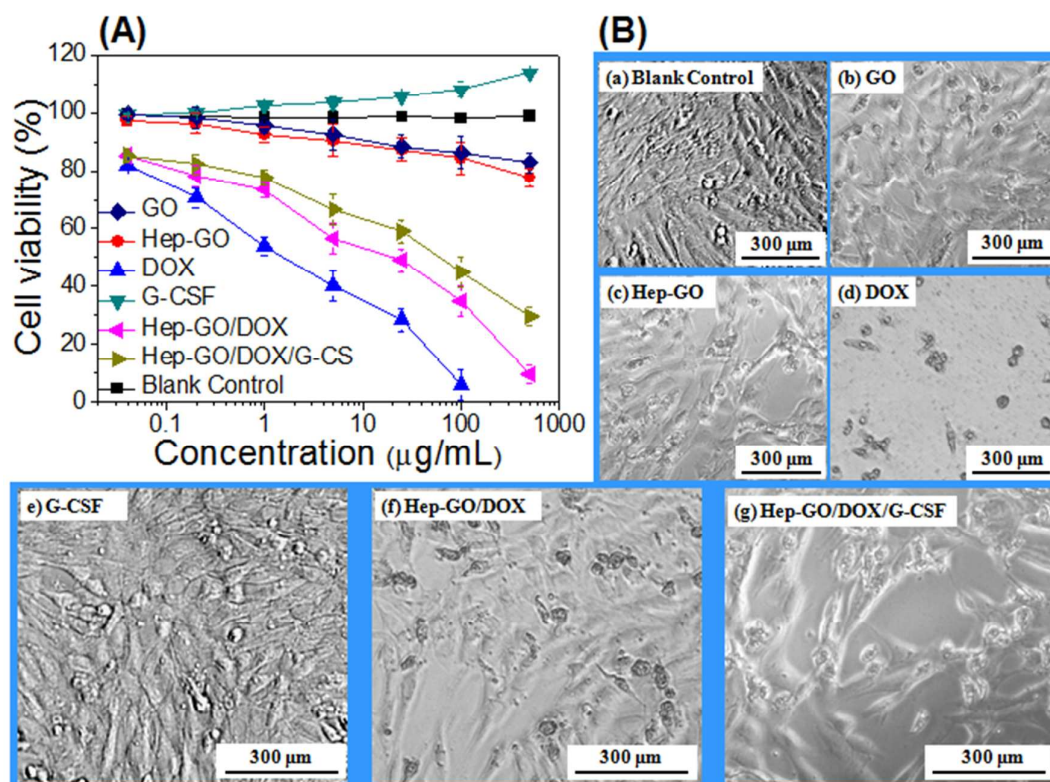


Figure 6

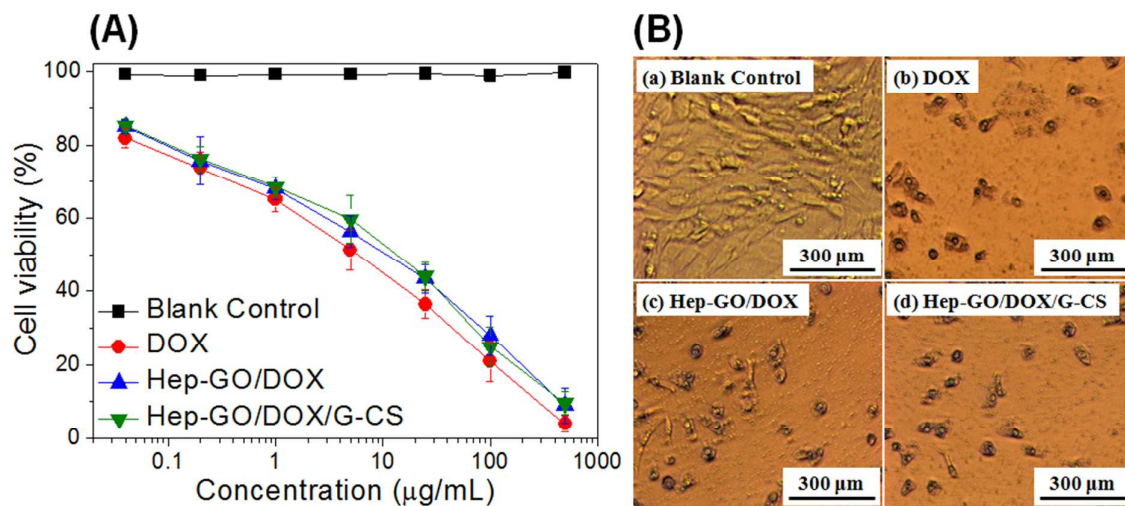


Figure 7

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