



Cite this: *RSC Appl. Polym.*, 2024, **2**, 47

Aromatic polypeptide amphiphiles for drug adsorption: a new approach for drug overdose treatment†

Karoline E. Eckhart,^{‡a} Hunter B. Wood,^{‡a} Tarik A. Taoufik,^{‡a}
Michelle E. Wolf,^{‡a} Dazhe J. Cao^b and Stefanie A. Sydlik^{‡a*}

The drug overdose epidemic in America has intensified over the past 20 years and has led to hundreds of thousands of deaths. Opioids account for most of these deaths, but overdose can be effectively reversed using naloxone, an FDA-approved medication. The rate of non-opioid drug fatalities has also risen in recent years—but unlike opioids—many of these drugs do not have specialized treatments in cases of overdose. Instead, activated charcoal is ingested to decontaminate the gastrointestinal tract before the drug is absorbed by the blood. Although activated charcoal is an effective drug adsorbent, there are many adverse side effects following respiratory and oral exposure. To address the drawbacks of this treatment, a new class of aromatic polypeptide amphiphiles (termed “KEYs”) were developed to adsorb drugs from the stomach and intestines without harmful side effects. This manuscript details the rational design and synthesis of KEY polypeptide adsorbents. KEYs were evaluated against model compounds acid yellow 3 and amitriptyline in simulated biological media and compared to activated charcoal. Adsorption studies indicate that KEYs are capable of adsorbing drugs. KEYs adsorb molecules as rapidly as activated charcoal and adsorb certain compounds with comparable or higher adsorption capacity in a pH-dependent manner. This work represents a novel application of aromatic polypeptide amphiphiles as a gastrointestinal decontamination technology. Further, these studies provide insight for how future generations of polypeptide-based adsorbents can be rationally designed to selectively target and improve drug adsorption from the gastrointestinal tract.

Received 12th June 2023,
Accepted 13th September 2023
DOI: 10.1039/d3lp00082f

rsc.li/rscaplpoly

1. Introduction

The rate of drug overdose fatalities in America has steadily increased over the past 20 years.¹ Between 1999 and 2016, opioid overdose increased by 371% and accounted for the majority of the drug overdoses.² Importantly, the number of non-opioid drug fatalities also rose by 274% during this period. While opioid overdose can often be reversed with naloxone if treatment is initiated quickly and frequently,^{3,4} many non-opioid drugs do not have effective antidotes. In some cases, the only way to treat these specific overdoses is to

decontaminate the gastrointestinal tract before the drug can be absorbed by the blood. Typically, gastrointestinal decontamination is achieved by administering activated charcoal (AC) either orally or through a stomach tube, to adsorb the overdosed drug(s) from the stomach.⁵

The physical and chemical composition of AC make it an effective drug adsorbent. AC is highly porous and possesses a remarkably high surface area that is available for adsorption of drugs and other molecules.^{6,7} The surface of AC is composed of a delocalized π -system that can participate in interactions with the aromatic π -electrons of an adsorbate.^{6,7} AC can also adsorb compounds through hydrogen bonding and electrostatic attraction, making it an effective adsorbent through a variety of interactions.⁶ Moreover, AC is an inexpensive feed-stock that can be prepared from a variety of waste products^{8–10} which makes it ideal for commercial use. These properties have made AC a life-saving overdose treatment, positioning it as the clinical standard for treatment of overdose from drugs including antidepressants and barbiturates.⁵

The efficacy of *in vivo* drug adsorption by AC has been thoroughly demonstrated.^{11,12} Since it is not systemically

^aDepartment of Chemistry, Carnegie Mellon University, 4400 Fifth Avenue, Pittsburgh, PA, USA. E-mail: ssydlik@andrew.cmu.edu

^bDepartment of Emergency Medicine, University of Texas Southwestern Medical Center, Dallas, TX, USA

† Electronic supplementary information (ESI) available: Structures, synthesis protocols, characterization, and supplemental data (UV-Vis calibration curves, non-linear Langmuir isotherm fits, comparison of linear *versus* non-linear Langmuir isotherm fits, and control experiment results). See DOI: <https://doi.org/10.1039/d3lp00082f>

‡ These authors contributed equally.

This work describes the synthesis and evaluation of KEYS as drug adsorbents and compares their performance to the clinical standard, AC. By controlling amino acid composition, KEYS are designed to participate in π - π stacking, electrostatic interactions, and hydrogen bonding to adsorb aromatic and

All cell culture reagents were acquired from ThermoFisher Scientific. RAW 264.7 murine macrophages were cultured in Dulbecco's Modified Eagle Medium with 4500 mg L⁻¹ D-glucose, 584 mg L⁻¹ L-glutamine, and 100 mg L⁻¹ sodium pyruvate (catalog #11995065). This basal media was supplemented with 10% v/v fetal bovine serum (catalog

#26140079) and penicillin streptomycin antibiotics (catalog #15140122) that was diluted to a final concentration of 100 U mL⁻¹. The cells were cultured in an incubator at 37 °C with a humidified atmosphere at 5% CO₂.

2.2 Synthetic procedures

NCA synthesis. α -Amino acid *N*-carboxyanhydride (NCA) monomers were synthesized according to standard literature precedent. Detailed experimental conditions used for preparation may be found in the ESI.†

NCA polymerization. KEY polypeptides were prepared *via* ring-opening polymerization of NCA monomers according to procedures found in literature.⁴⁸ A random copolymerization of Lys(Z)-NCA and Glu(OBzl)-NCA was first used to prepare the p[K(Z)-ran-E(OBzl)] macroinitiator. The macroinitiator was added to different mole percentages of Tyr(OBzl)-NCA to yield p[K(Z)-ran-E(OBzl)-*b*-Y(OBzl)] with different degrees of aromatic functionalization (*i.e.* KEY10, KEY20, and KEY30). Detailed experimental conditions used for the preparation of the KE macroinitiator and KEY polypeptides may be found in the ESI.†

Polypeptide deprotection. Polypeptides were deprotected following standard literature techniques.^{49,50} In a typical deprotection, the protected polypeptide was dissolved in TFA and glacial acetic acid. Then, HBr (48% in water) was added to the flask, resulting in the appearance of a thick white precipitate that redissolved over time. The reaction mixture was stirred at room temperature overnight. The strongly acidic deprotection mixture was safely evaporated to a concentrate using a Schlenk line cold trap and precipitated into tetrahydrofuran (8× the volume of the concentrated copolypeptide solution) while vigorously stirring on ice. The copolypeptide, a white solid, was collected *via* centrifugation, dispersed in deionized water, and dialyzed against deionized water for 4 days using SnakeSkin™ dialysis tubing with a 3500 molecular weight cutoff. Following dialysis, the deprotected copolypeptide was lyophilized to dryness to give a fluffy, white powder and stored at room temperature.

2.3 Characterization techniques

Fourier transform infrared spectroscopy (FTIR). FTIR attenuated total reflectance spectroscopy was performed using a PerkinElmer Frontier FTIR spectrometer with a germanium crystal. Spectra were acquired with a 1 cm⁻¹ resolution over a range of 700–4000 cm⁻¹. Using the Spectrum software (PerkinElmer), spectra were corrected for attenuated total reflectance mode, baseline corrected, converted to absorbance, and normalized to the maxima of the amide I peak (1637 cm⁻¹ for deprotected KEs and 1652 cm⁻¹ for the protected KEY).

Nuclear magnetic resonance (NMR). A 500 MHz NMR (Bruker Avance™ 500) was used to acquire ¹H-NMR spectra of the monomers and polypeptides in DMSO-d₆ and TFA-d, respectively. Data was analyzed using Mestrenova software (version 12.0.1) and TopSpin software (version 4.1.4).

Gel permeation chromatography (GPC). Polypeptide solutions (approximately 10 mg mL⁻¹ in dimethylformamide, fil-

tered through a 0.2 μ m PTFE membrane) were analyzed *via* gel permeation chromatography with neat dimethylformamide at 25 °C as eluent with a constant flow rate of 1.00 mL min⁻¹. A differential refractive index (RI) detector (Waters and Wyatt) was used, and chromatograms were calibrated to poly(methyl methacrylate) standards.

Zeta potential. Dispersions of the KEs and activated charcoal were prepared with a concentration of 50 μ g mL⁻¹ in SGF, SIF, PBS, and deionized water. The dispersions were then loaded into Malvern disposable folded capillary cells (DTS1070). Zeta potentials were measured using a Zetasizer Nano ZS (Malvern Instruments Ltd, Worcestershire, UK) with Zetasizer Software v7.12 (Malvern, Inc.). Three measurements were acquired using the optimal scanning parameters of the instrument (ranging from 10–100 scans per measurement).

Microscopy. Dispersions of each adsorbent (activated charcoal and the KEs) were prepared with a concentration of 0.1 mg mL⁻¹ in SGF, SIF, or PBS. Subsequently, 100 μ L of the adsorbent dispersion was dispensed into a well of a 96-well plate. Microscope images of the settled adsorbent particles were acquired on an EVOS® FL Auto Cell Imaging System (ThermoFisher Scientific) with a 10×, 0.30 numerical aperture objective in transmission mode.

Plate reader. A Spark Multimodal Microplate Reader (TECAN) was used to determine the concentration of acid yellow 3 and amitriptyline. Here, 100 μ L of the analyte solution was dispensed in a well of a disposable 96-well plate (Greiner Bio-one Cellstar® Cell Culture Plate for acid yellow 3 and Greiner Bio-one UV-Star Microplate for amitriptyline) and analyzed according to the following parameters. For acid yellow 3, absorbance spectra were acquired from 300–600 nm with a step size of 2 nm and a settle time of 50 ms. The λ_{max} for acid yellow 3 was determined to be 412 nm. For amitriptyline, absorbance spectra were acquired from 200–600 nm with a step size of 2 nm and a settle time of 50 ms. The λ_{max} for amitriptyline was determined to be 238 nm.

2.4 Adsorption studies

Adsorption kinetics. In a typical adsorption kinetics experiment, 6 identical adsorbate/adsorbent mixtures were prepared in 1.5 mL Eppendorf tubes as described above using a 5 : 1 ratio of adsorbent-to-adsorbate. The Eppendorf tubes were vortexed briefly to mix and incubated at 37 °C with rotational shaking. At 6 different time points, an Eppendorf was removed from the incubator, centrifuged, and the supernatant was analyzed. The adsorption equilibrium time was designated as the time at which the percent of adsorbate adsorbed became constant. More detail on the experimental conditions used for these studies may be found in the ESI.†

Adsorption capacity. In a typical adsorption capacity experiment, 6 adsorbate solutions were prepared in 1.5 mL Eppendorf tubes, each with a final volume of 250 μ L and a concentration ranging from 20–250 μ g mL⁻¹ (within the linear range of quantification). Next, a dispersion of adsorbent in buffer was added to each Eppendorf to give adsorbent-to-adsorbate ratios ranging from 0.5 : 1 to 22 : 1 and a final

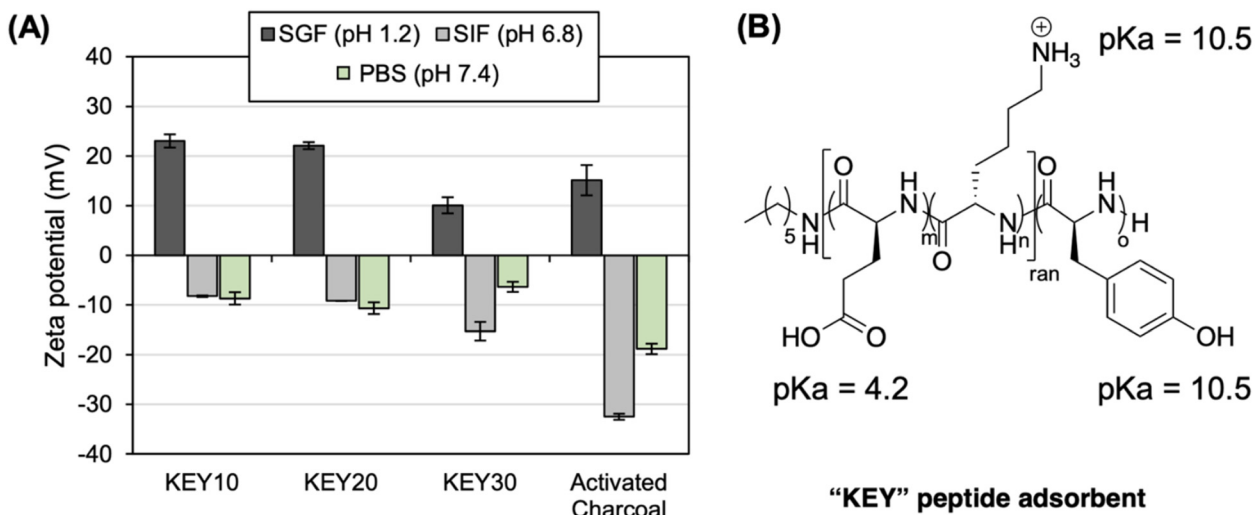


2.5 Cell culture procedures

The dispersity of the major and minor peak for each polypeptide is listed in Table 1 as either D_{low} or D_{high} , where the

ID	Synthetic target	D_{low}^a	D_{high}^a	DP K ^b	DP E ^b	DP Y ^b	Target M_n ^c (kDa)	Actual M_n ^c (kDa)	Mol % Y
KE initiator	p(K ₂₀ -E ₂₀)		1.16	20	20		5.25	5.47	
KEY10	p(K ₂₀ -E ₂₀ -Y ₁₀)	1.15	1.16	20	20	8	6.88	6.81	16
KEY20	p(K ₂₀ -E ₂₀ -Y ₂₀)	1.38	1.09	20	20	20	8.51	8.77	32
KEY30	p(K ₂₀ -E ₂₀ -Y ₃₀)	1.66	1.09	20	20	29	10.14	10.24	41

Many studies demonstrate that electrostatic interactions dictate adsorption in systems involving charged particles.³⁰ KEYS were designed with amino acid residues of opposite charge (KE) and are expected to exhibit a pH-responsive dynamic surface charge in biological conditions. This was confirmed by measuring the zeta potential of each formulation in simulated biological environments (Fig. 2). Data obtained from dynamic light scattering (DLS) experiments are consistent with theoretical expectations based on pK_a . In simulated gastric fluid (SGF; pH 1.2), the KEYS exhibit a positive charge because the pH is below the pK_a of all residues. In contrast, the KEYS are negatively charged in simulated intestinal fluid (SIF; pH 6.8) and phosphate-buffered saline (PBS; pH 7.4).



© 2024 The Author(s). Published by the Royal Society of Chemistry

A control experiment was performed to validate the impact of the Y block in the formation of KEY aggregates. Here, polyKE poly[(lysine)₂₀-*co*-(glutamic acid)₂₀] (with no hydrophobic Y block) was dispersed in SGF, SIF, and PBS. In all three media, polyKE was completely soluble, resulting in a

When the KEYS are added to aqueous media, they spontaneously form amorphous aggregates that can be dispersed by manual shaking (Fig. 3). This solution preparation method is realistic in clinical conditions, where controlled nanoparticle formation by gradual solvent swap would be impractic-



RSC Appl. Polym., 2024, 2, 47–61 | 53

clear and colorless solution, suggesting that aggregation of the KEYs in these media is driven by the polytyrosine block (Fig. S9†). This result is expected because the ionic strength of the simulated body fluids – SGF (106 mM), SIF (322 mM), and PBS (200 mM) – is significantly higher than the ionic strength of the KEY dispersion (14–31 mM, depending on the formulation). As a result, polyion complexation between the cationic lysine residues and anionic glutamic acid residues is largely screened by the high concentration of ions in the media.

After characterization, KEYs were studied to understand how the structure–function relationships of the polypeptides translate in the context of drug adsorption from simulated digestive media. The method of quantifying adsorption relies on insoluble adsorbent particles that can be removed from the system after adsorbing the drug. As such, the adsorption performance of KEY10 could not be assessed in SGF due to its solubility in this media.

3.3 Adsorption kinetics

Adsorption studies were performed to assess the rate at which the KEYs and AC adsorbed acid yellow 3 (AY3) and amitriptyline (ATL). The structures for both model compounds can be found in Fig. S1.† Kinetics experiments were conducted using a constant ratio of 5 : 1 (w/w) of adsorbent-to-adsorbate in either SGF, SIF, or PBS. For each experiment, replicate samples of each adsorbent/adsorbate mixture were incubated at 37 °C with rotational stirring. At various time points, a sample was centrifuged to pellet the insoluble adsorbent particles and the amount of adsorbed compound was quantified by measuring the concentration of free adsorbate in the supernatant *via* UV-Vis spectroscopy (Fig. S10†). For all adsorbent, adsorbate, and media combinations, adsorption equilibrium is reached in 5 to 20 minutes (Fig. 4).

In clinical settings, the majority of adsorption ideally occurs prior to gastric emptying; before the stomach contents

(A) Adsorption of AY3



(B) Adsorption of ATL



Fig. 4 Adsorption kinetics of (A) acid yellow 3 (AY3) and (B) amitriptyline (ATL) to the KEYs and AC. Samples were prepared in simulated gastric fluid (SGF, pH 1.2), simulated intestinal fluid (SIF, pH 6.8), and phosphate buffered saline (PBS, pH 7.4) with a 5 : 1 ratio of adsorbent-to-adsorbate and incubated at 37 °C. Note that error bars represent the standard deviation of three replicate measurements. All data points have error bars, but some are too small to be visualized. In some cases, the % adsorbed is observed to decrease which may be explained by the reversibility of van der Waals forces.



Importantly, KEYs adsorbed ATL during incubation which provides proof of concept that polypeptides are capable of

The performance of KEYs with AY3 and ATL highlights the chemical characteristics which enhance adsorption to polypeptides. Attractive electrostatic interactions were observed to increase adsorption capacity. Aromatic compounds with electron withdrawing substituents also exhibit higher adsorption to KEYs in agreement with theoretical expectations based on the Hunter–Sanders model. However, adsorption to KEYs is low for aromatic drugs which exhibit repulsive interactions and for compounds which have no electron withdrawing substituents. In these cases, higher adsorption is likely to be achieved through greater aromatic functionalization of the KEY polypeptide adsorbent.

Trends in these adsorption capacity experiments reinforce the trends from the adsorption kinetics experiments and demonstrate the capability of the KEYs to adsorb the model adsorbates at a range of adsorbent-to-adsorbate ratios. For adsorption of AY3 in SGF, KEY20 and KEY30 exhibited similar adsorption capacities to AC (Fig. 5). Again, this result is likely due to a combination of electrostatic attraction and π -stacking between the KEYs and AY3. Overall, this result indicates that the KEY formulation, as it stands, is advantageous over AC for the adsorption of negatively charged, aromatic drugs from acidic gastric fluid.

(A) Adsorption of AY3**(B) Adsorption of ATL**

Fig. 5 Adsorption capacity of acid yellow 3 (AY3) (A) and amitriptyline (ATL) (B) by AC and the KEYS are compared at different ratios of adsorbent-to-adsorbate. SGF is simulated gastric fluid (pH 1.2), SIF is simulated intestinal fluid (pH 6.8), and PBS is phosphate buffered saline (pH 7.4). Samples were incubated at 37 °C for 20 minutes before analysis. Note that error bars represent the standard deviation of three replicate measurements. All data points have error bars, but some are too small to be visualized.

Consistent with the results from the adsorption kinetics experiments, KEY20 and KEY30 were less effective at adsorbing ATL from SGF, compared to AC. As discussed, this is thought to be caused by electrostatic repulsion between the cationic KEYS and cationic ATL. The stark difference in adsorption performance of AY3 and ATL in SGF suggests the possibility of further tuning the KEY design to selectively adsorb specific adsorbate targets, where the charge of the adsorbate is considered in the selection of the amino acid composition of the polypeptide-based adsorbent.

In SIF and PBS, the KEYS were less effective at adsorbing AY3 and ATL, compared to AC; and the adsorption capacity of the KEYS was dependent on the molarity of the media, further indicating that electrostatic interactions play a large role in the adsorption mechanism of the KEYS. When ions are present in the media, they form an electrical double layer around the charged adsorbent and adsorbate surfaces, leading to a suppres-

sion of electrostatic interactions between the adsorbent and adsorbate.⁸⁴ The molarity of SIF (72 mM) is less than half of PBS (150 mM). Generally, the KEYS adsorbed AY3 and ATL more effectively in SIF, compared to PBS. This indicates that electrostatic attraction plays a large role in the adsorption mechanism of the KEYS. The higher concentration of ions in PBS, relative to SIF, results in lower adsorbate-adsorbent binding because ions from the media act as a charge screen to suppress their electrostatic interactions. The one exception to this trend lies in the adsorption of AY3 by KEY30, where the adsorption capacity is higher in PBS relative to SIF. This result suggests that electrostatic interactions play a smaller role in the adsorption mechanism of KEY30, compared to KEY10 and KEY20. This is reasonable given that KEY30 has the lowest molar ratio of hydrophilic block (which is the source of charge) out of all the KEYS. Because of this, π - π stacking is expected to have a greater influence on adsorption than electrostatics for KEY30.



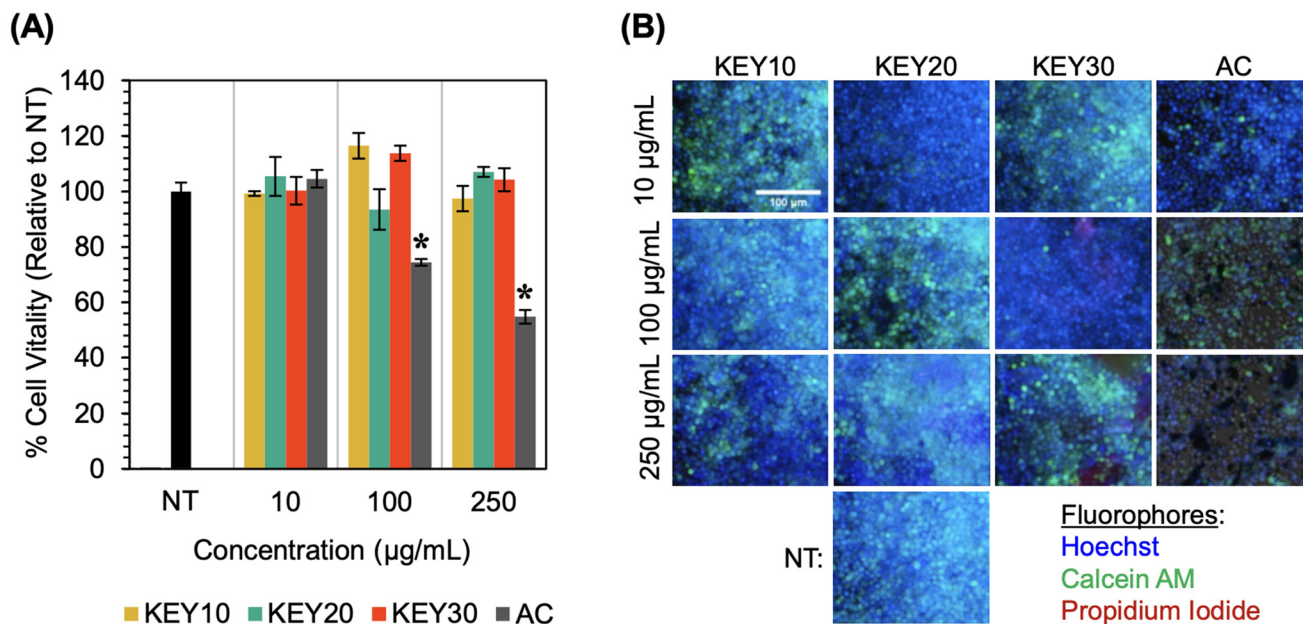


Fig. 8 The *in vitro* cytocompatibility of the KEYs and AC were evaluated with RAW 264.7 macrophages. (A) Cellular vitality was computed from cell counts and reported relative to the “no treatment” condition (NT). The asterisk (*) indicates statistical significance from the NT condition ($p < 0.05$). (B) Representative cell images after exposure to the treatment and NT conditions. Here, fluorescent dyes were used to characterize cytocompatibility: Hoechst (blue) stains cell nuclei, Calcein AM (green) stains the cytoplasm when healthy metabolism is occurring, and propidium iodide (red) stains dying cells. It should be noted that the red/pink crystalline structures in the KEY30 images are attributed to residual KEY30 aggregates, which bind to the propidium iodide dye. The scale bar in the top left image is 100 μm .

at all concentrations. Notably, the images feature numerous, blue- and green-stained cells – indicating healthy, living cells – and there is no red staining (dead cells). Some crystalline, red structures can be observed in the KEY30 images, but this is a result of residual KEY30 aggregates which bind the red propidium iodide stain. At the $250\text{ }\mu\text{g mL}^{-1}$ concentration of AC, poor cell vitality and declining cell health are evident in the relative lack of blue- and green-stained cells and the presence of red-stained cells. Overall, all three KEYS showed significantly better cytocompatibility than activated charcoal.

4. Conclusions

In this work, a class of polypeptide amphiphiles, termed “KEYs”, were prepared using NCA ROP and evaluated (*in vitro*) as a treatment option for gastrointestinal decontamination following a drug overdose. Due to their rationally designed amino acid composition, the KEYs form aggregates in aqueous solution that are capable of physically adsorbing and sequestering drug model compounds (“adsorbates”) from simulated body fluids. This performance was then evaluated and compared to the clinical standard for gastrointestinal decontamination, activated charcoal (AC). The KEYs were found to adsorb the compounds as rapidly as AC in simulated gastric and intestinal fluids as well as phosphate buffered saline. The adsorption capacity of the KEYs was dependent on their amino acid composition, the pH of the media, and the identity of the adsorbate, however, adsorption appeared to be limited by the low surface

area of the KEY aggregates relative to AC. Nevertheless, this study provides proof of concept for the adsorption of drugs to polypeptides. Additionally, these results offer insight into how the molecular architecture and amino acid composition of future generations of polypeptide-based adsorbents could achieve high-capacity and drug-specific adsorption.

The results of this study demonstrate two important areas of improvement that could be implemented in the design of future generations of polypeptide-based adsorbents: (1) the surface area of the polypeptide aggregates should be increased to allow greater contact between the adsorbate and adsorbents and (2) the electrostatic characteristics of the polypeptide-based adsorbents can be tuned to target adsorption of specific drugs in certain pH conditions based on pK_a .

Given the highly adaptable nature of the NCA ROP, this synthetic strategy offers a promising platform for the development of rationally designed, drug-specific polypeptide-based adsorbents that can be used for gastrointestinal decontamination. To this end, development of a safe and effective gastrointestinal decontamination strategy would expand the treatment options for drug overdose patients (including overdose cases that have an antidote) by preventing adsorption of the overdosed drug, thereby decreasing morbidity and mortality.

Author contributions

Karoline Eckhart, Hunter Wood, and Tarik Taoufik contributed equally to the synthesis, characterization, adsorption



