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## **Pharmacological Applications and Mechanistic Insights of Sodium Cellulose Phosphate A Review of Therapeutic Potential**

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### **Abstract**

Sodium cellulose phosphate (SCP), a phosphorylated cellulose derivative, represents a multifunctional biomaterial with wide-ranging pharmacological and biomedical applications. The incorporation of phosphate groups imparts strong ion-exchange capacity, hydrophilicity, and biocompatibility, which support its use in disorders involving calcium and phosphate imbalance. Clinically, SCP has been employed in the management of hypercalciuria, nephrolithiasis, hypercalcemia, and hyperphosphatemia associated with chronic kidney disease (CKD). Its mechanism of action is primarily based on binding dietary calcium and phosphate within the gastrointestinal tract, thereby modulating systemic mineral homeostasis. Beyond its therapeutic roles, SCP demonstrates bioadhesive, swelling, and gel-forming properties that enhance its utility in gastrointestinal formulations, controlled drug delivery, and regenerative medicine. Despite its pharmacological potential, SCP use is limited by safety concerns, including risks of hypocalcemia, hypomagnesemia, hyperoxaluria, gastrointestinal intolerance, and reduced patient adherence compared with newer phosphate binders such as sevelamer or lanthanum carbonate. Nevertheless, SCP remains a promising platform for biomedical innovation. Current research explores its integration into advanced drug delivery systems, nanocarrier-based formulations, and stimuli-responsive hydrogels for site-specific and sustained release. Additionally, SCP-based scaffolds are being investigated in bone tissue engineering and regenerative applications due to their ability to promote mineral deposition and cytocompatibility.

**Keywords:** Sodium cellulose phosphate (SCP); phosphorylated cellulose; ion-exchange capacity; biocompatibility; hypercalciuria; nephrolithiasis; hypercalcemia; hyperphosphatemia; chronic kidney disease (CKD); calcium binding; phosphate binding; gastrointestinal tract

### **Introduction**

The most prevalent organic polymer on Earth, cellulose, is used to create cellulose-based polymers, a noteworthy family of biopolymers that are mostly found in the primary and secondary cell walls of terrestrial plants. Cellulose is a linear homopolysaccharide with great tensile strength, crystallinity, and chemical stability due to its repeating  $\beta$ -D-glucopyranose units connected by  $\beta$  (1 $\rightarrow$ 4) glycosidic linkages. Cellulose is a desirable precursor for the creation of sustainable polymeric materials because of its renewable source, biodegradability, and superior mechanical integrity. The native form of cellulose, known as cellulose I, has limited thermoplastic activity and is insoluble in the majority of common solvents. To get around these restrictions, a variety of cellulose derivatives, such as cellulose acetate (CA), cellulose nitrate (CN), carboxymethyl cellulose (CMC), and ethyl cellulose (EC), are created via chemical processes like etherification, esterification, and oxidation. These altered polymers have improved film-forming, heat processing, and solubility properties. Because of these advantageous properties, cellulose-based polymers are being used more and more in tissue engineering scaffolds, membranes, coatings, medicinal formulations, and biodegradable packaging. Research and industry interest in cellulose-derived polymers as environmentally benign substitutes for traditional plastics derived from fossil fuels have increased in tandem with the growing emphasis on environmental sustainability and the decrease of plastic pollution <sup>[1]</sup>.

## Introduction to Sodium Cellulose Phosphate (SCP)

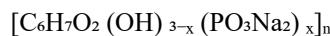
When cellulose is phosphorylated, phosphate moieties are covalently bonded to the hydroxyl groups throughout the cellulose backbone, usually in the form of sodium salt, to create sodium cellulose phosphate (SCP). The introduction of phosphate groups into the cellulose backbone imparts distinct anionic functionality, enhanced hydrophilicity, ion-exchange capacity, and metal-chelating properties, thereby broadening the scope of cellulose applications beyond its traditional uses. Sodium cellulose phosphate (SCP) demonstrates high biocompatibility, non-toxicity, and biodegradability, which makes it highly attractive for applications in biomedical, pharmaceutical, and environmental fields. A functionalized cellulose derivative. Its application in the biological, pharmacological, and environmental domains is expanded by this chemical alteration, which confers unique anionic features, improved hydrophilicity, and ion-exchange qualities. SCP is particularly well-suited for usage in therapeutic and medical applications due to its high biocompatibility, non-toxicity, and biodegradability. As an oral phosphate binder for patients with chronic kidney disease (CKD), it successfully lowers serum phosphate levels by binding food phosphate in the gastrointestinal system. This is one widespread use for it. Additionally, it can be used in wound care, controlled medication delivery systems, and wastewater treatment as an effective flocculating agent due to its great affinity for divalent and multivalent cations like calcium and heavy metals. Important factors affecting the physicochemical behavior and functional performance of SCP in its various applications are the molecular weight of the cellulose chain and the degree of substitution (DS), which indicates the amount of phosphate groups per anhydroglucose unit [2-7].

## Chemical Structure and Physicochemical Properties of Sodium Cellulose Phosphate

### Chemical Structure

Phosphorylation of cellulose yields sodium cellulose phosphate (SCP), a negatively charged cellulose derivative. In order to produce the sodium salt form, the hydroxyl groups on the anhydroglucose units of cellulose react with phosphoric acid or other phosphorus-containing substances (such as phosphorus oxychloride) and are then neutralized with sodium hydroxide. The resultant polymer has phosphate groups ( $-\text{PO}_3\text{Na}_2$ ) covalently bonded to the C2, C3, and/or C6 hydroxyl sites of the glucose monomer, while maintaining the  $\beta$ -(1 $\rightarrow$ 4)-linked D-glucose backbone of natural cellulose.

The chemical structure is commonly represented as:



Where:

- n is the number of repeating cellulose units, and
- X is the degree of substitution (DS), which indicates the average number of phosphate groups per a hydroglucose unit (AGU).

Higher values indicate a greater amount of phosphate groups. DS values for SCP typically fall between 0.1 and 1.0. Ionic charge density, water dispersibility, and ion-exchange efficiency are all improved by an increase in DS [7].

## Physicochemical Properties

### Solubility

SCP has phosphate groups, which makes it hydrophilic by nature. It has solubility properties that mostly rely on the molecular weight and degree of substitution, as well as water-swelling behavior. Because it has a greater anionic nature and interacts better with water molecules, a higher DS increases solubility.

### Ion-Exchange Capacity

Phosphoryl groups give SCP anion-exchange capabilities, which allow it to chelate divalent and multivalent metal ions including  $\text{Ca}^{2+}$ ,  $\text{Mg}^{2+}$ , and other heavy metals. This property is particularly relevant in environmental remediation and therapeutic phosphate-binding applications.

### Biodegradability and Biocompatibility

SCP preserves native cellulose's non-toxic and biodegradable qualities. These qualities qualify it for use in controlled drug delivery systems, oral phosphate binders, and wound care products, among other biomedical uses.

### Thermal Stability

SCP has lower heat stability than unmodified cellulose. At lower temperatures, the phosphate groups promote breakdown because they are thermolabile sites. This comes at the expense of more chemical functionality.

### pH Sensitivity

SCP is an anionic polyelectrolyte that exhibits pH-responsive characteristics. It is appropriate for applications where pH-dependent action is beneficial because of its improved swelling and ion-exchange capacity in neutral to alkaline environments.

### Mechanical Properties

SCP's mechanical performance is affected by its degree of phosphorylation, crosslinking, and moisture content, especially when it is in film or hydrogel form. Phosphorylation can increase flexibility, hydration capacity, and gel-forming ability, which supports its usage in soft biomaterials and functional membranes, even if it tends to decrease crystallinity [2, 5, 8].

## Pharmacological Applications of Sodium Cellulose Phosphate

SCP, an ion-exchange resin made from cellulose, has pharmacological efficacy primarily due to its capacity to sequester divalent cations in the gastrointestinal tract, specifically calcium ( $\text{Ca}^{2+}$ ) and magnesium ( $\text{Mg}^{2+}$ ). By reducing intestinal absorption of these ions, SCP effectively modifies systemic mineral balance, a property that has been utilized to treat calcium-related metabolic disorders.

## Management of Hypercalciuria and Calcium Nephrolithiasis

SCP was used to treat absorptive hypercalciuria, a disorder characterized by excessive intestinal calcium absorption that increases the risk of developing calcium phosphate and calcium oxalate urinary calculi. By binding dietary calcium in the gastrointestinal lumen, SCP lowers calcium absorption and, hence, calcium excretion in the urine. This pharmacological effect considerably reduces the recurrence of renal stone development. To minimize severe skeletal

effects, long-term dose requires calcium balance monitoring. [2]

### Treatment of Hypercalcemia

SCP has also been used to treat chronic hypercalcemia, particularly when it is associated with primary hyperparathyroidism and cancer-induced calcium elevation. SCP functions as an adjuvant therapy when traditional treatments are inadequate because it reduces intestinal calcium absorption, which in turn lowers blood calcium levels [9].

### Potential Role in Osteoporosis Prevention

By minimizing excessive calcium loss through the urine, SCP may indirectly reduce bone demineralization and potentially prevent osteoporosis, according to findings from previous studies. The long-lasting clinical benefit in this case is still up for debate, though [10].

### Limitations and Safety Considerations

Despite its medicinal advantages, SCP has certain disadvantages. An increased risk of oxalate stones due to a greater excretion of oxalate in the urine. Notwithstanding its pharmaceutical benefits, SCP has a number of drawbacks.

An adverse ratio of calcium, could increase the chances of osteopenia and osteoporosis if medication is prolonged. [4, 5]

### Phosphate Binder in Renal Disease

Hyperphosphatemia is a common metabolic disturbance in chronic kidney disease (CKD) due to reduced renal phosphate excretion. Chronically elevated serum phosphate levels are closely associated with the possibility of recurrent hyperparathyroidism, vascular calcification, and CKD-mineral and bone disorder (CKD-MBD). Therefore, the use of oral phosphate binders remains one of the main strategies in the pharmaceutical management of this problem.

### Management of Hyperphosphatemia in CKD

Sodium cellulose phosphate (SCP) has been investigated as a possible medication to lower hyperphosphatemia in people with renal failure. By binding dietary phosphate in the gastrointestinal system, SCP reduces intestinal phosphate absorption and, consequently, serum phosphate levels. This effect reduces the likelihood of vascular and soft tissue calcification, two significant pathogenic features of advanced chronic renal disease, by reducing the calcium-phosphate product.

### Prevention of Secondary Hyperparathyroidism

The increased secretion of parathyroid hormone (PTH) due to elevated phosphate levels in chronic kidney disease (CKD) promotes abnormal bone turnover and remodeling. By limiting phosphate absorption and restoring phosphate balance, SCP indirectly reduces PTH hypersecretion, hence preventing secondary hyperparathyroidism.

### Adjunct in CKD–Mineral and Bone Disorder (CKD–MBD)

By reducing the systemic phosphate burden, SCP may aid in the treatment of CKD–mineral and bone disorder (CKD–MBD). SCP's capacity to bind phosphate, which helps alleviate the metabolic disruptions underlying renal osteodystrophy and other skeletal abnormalities linked to

chronic kidney disease, positions it as a possible adjuvant in complete CKD–MBD therapy. [11–13]

### Gastrointestinal Applications of Sodium Cellulose Phosphate (SCP)

Sodium cellulose phosphate (SCP) has also been studied for usage in the gastrointestinal (GI) tract due to its ion-binding and cation-exchange properties. Its ability to change intestinal absorption and sequester dietary cations makes it a promising treatment option for gastrointestinal disorders.

### Reduction of Dietary Calcium Absorption

SCP forms insoluble calcium–phosphate complexes in the intestinal lumen by binding calcium ions, which are subsequently released as feces. This method was initially developed to treat absorptive hypercalciuria and calcium nephrolithiasis, but it also demonstrates how SCP can be used to lessen intestinal calcium overload that may cause GI and systemic issues [2].

### Binding of Magnesium and Other Cations

In addition to calcium, SCP can also bind magnesium and other divalent cations in the gut. Its pharmacological activity is enhanced by this capacity, but prolonged usage may result in hypomagnesemia, necessitating dietary supplements. [9]

### Potential Modulation of Oxalate Absorption

- SCP use has been linked to increased urinary oxalate excretion because of decreased availability of free calcium in the gut to bind oxalate, which may increase the risk of calcium oxalate stone formation.
- This effect highlights both its therapeutic potential and limitations in gastrointestinal applications.
- Changes in calcium binding within the GI tract may secondarily influence oxalate absorption. [10]

### Use as an Ion-Exchange Material in GI Research

- Because of its ion-exchange capacity, water-binding ability, and biocompatibility, SCP has been studied as a functional excipient in gastrointestinal drug delivery systems outside of therapeutic uses.
- Although this is still mostly in the experimental stage, such applications point to a larger involvement in GI-targeted formulations. [2]

### Mechanistic Insights of Sodium Cellulose Phosphate: -

The hydroxyl groups of the anhydroglucoside units in sodium cellulose phosphate (SCP), a cellulose derivative, are esterified with phosphate moieties and then neutralized with sodium ions. SCP's ion-exchange characteristics and ability to form insoluble complexes with divalent cations, especially calcium ( $Ca^{2+}$ ) and magnesium ( $Mg^{2+}$ ), are primarily responsible for its pharmacological activities. Its therapeutic potential in gastrointestinal and renal illnesses can be explained by these processes taken together.

### Ion-Exchange Mechanism

SCP's phosphate groups have negatively charged sites that are electrostatically balanced by sodium ions. These sodium ions are displaced in the gastrointestinal tract when they come into contact with divalent or trivalent cations like  $Ca^{2+}$ ,  $Mg^{2+}$ , and  $Fe^{2+}$ . This exchange reaction makes it easier for stable, insoluble phosphate complexes to form,

which is then expelled through feces, thereby lowering the ions' systemic absorption.

### Regulation of Calcium Absorption

- SCP binds dietary calcium, thereby diminishing its intestinal absorption.
- Its early usage in absorptive hypercalciuria and calcium nephrolithiasis was based on the fact that this decrease in calcium uptake lowers serum calcium concentrations, which in turn lowers urine calcium excretion.
- However, long-term use may cause a calcium imbalance that makes osteopenia and osteoporosis more likely.<sup>[2]</sup>

### Modulation of Phosphate Metabolism in CKD

- As a phosphate-binding agent, SCP limits intestinal absorption of dietary phosphate in patients with chronic kidney disease (CKD) complicated by hyperphosphatemia.
- This action lowers circulating phosphate levels and the calcium-phosphate product, reducing the risk of vascular calcification and aiding in the treatment of secondary hyperparathyroidism.<sup>[11]</sup>

### Effects on Oxalate and Magnesium Homeostasis

- Because SCP reduces the amount of free calcium in the gut that may bind oxalate, it has been linked to increased excretion of oxalate in the urine, potentially raising the risk of calcium oxalate stones.
- Its therapeutic promise and limitations in gastrointestinal applications are highlighted by this result. Oxalate absorption may be indirectly impacted by modifications in calcium binding in the GI tract.<sup>[9]</sup>

### Applications in Drug Delivery and Biomaterials

In addition to its application for a cation-binding therapeutic agent, SCP has been studied for a functioning excipient in drug delivery systems. • Because of its hydrophilicity, ion-exchange capacity, and biocompatibility, it is a good choice for formulations that involve gastrointestinal tract controlled drug release.<sup>[8]</sup>

### Bioadhesion

A material's ability to adhere to biological surfaces—particularly mucosal tissues—is referred to as "bioadhesion". Sodium cellulose phosphate (SCP) has been researched for usage in the gastrointestinal system for medicine delivery due to its special bioadhesive properties, which stem from its hydrophilic properties and polyanionic structure. The primary thermodynamic factors of SCP bioadhesion are reactions with epithelial components that include hydration, hydrogen bonds, and electrostatic forces.<sup>[14]</sup>

### Electrostatic Interactions with Mucosal Surfaces

- The mucosal layer is rich in mucins, composed of glycoproteins having charge-positive amino acid residue (such histidine, arginine, and lysine).
- The electrostatic interactions that SCP's phosphate groups with negative charges enable with these mucin domains are a major contributor to its excellent adhesion to mucosal tissues.

### Hydrogen Bonding and Secondary Interactions

- The glycoprotein found in mucin and components of the mucosal surface can form hydrogen link with the hydroxyl groups that are found on the cellulose chain of SCP.
- These secondary connections reinforce electrostatic interactions by stabilizing the sticky contact.

### Hydration and Chain Interpenetration

- SCP swells and releases additional functional groups for interacting when wet in aquatic environments because to its high hydrophilicity.
- By means of entanglement mechanisms, a hydrated polymer chains can further penetrate the mucin network and improve mucoadhesion.

### Contribution of Molecular Flexibility and Surface Energy

- Additionally, SCP's surface-level affinity with mucus enhances close contact and increases the strength of the adhesive.
- SCP chains can more easily adapt to the uneven mucosal surface due to the cellulose backbone's elasticity.

### Implications for Drug Delivery

Because of its mucoadhesive ability, which prolongs the gastrointestinal retention time of drug formulations, improving targeted drug absorption and controlled release, SCP is a helpful ingredient in the formation of mucoadhesive drug delivery systems, specifically for oral as well as gastrointestinal applications<sup>[8, 15]</sup>.

### Swelling and Gelation

Sodium cellulose phosphate (SCP), a polyanionic cellulose derivative, has unique gel-forming and swelling properties in aqueous environments. These phenomena are caused by its hydrophilic phosphate substituents, which have an impact on hydration dynamics, ion-exchange behavior, and polymer chain interactions.

### Hydration of Phosphate Groups

- Hydrogen bonding and electrostatic forces cause water molecules to be strongly drawn to the negative-charged phosphate substituents on SCP.
- The swelling process starts as a result of the polymer chain expanding due to this hydration.<sup>[8]</sup>

### Electrostatic Repulsion among Charged Groups

- Increased free volume within the polymer matrix results from interactions between molecules and electrostatic repulsion, which enhances swelling capacity.
- The negative charges carried by the phosphate groups within the chain of polymers resist one another.

### Gel Formation through Chain Entanglement

- Hydration increases the mobility of SCP polymer chains, allowing for interpenetration and tangling. Water molecules are trapped by this network structure, forming a matrix that mimics hydrogel.
- The amount of gelation is influenced by both the SCP concentration and the extent of phosphate group replacement (DS).<sup>[16]</sup>

## Role of Ionic Strength and Counter-Ions

Divalent ions (Ca<sup>2+</sup> and Mg<sup>2+</sup>) might cross-link phosphate groups to create ionic bridges, which reduces swelling and improves the gel's strength as well as structural integrity. However, due to weaker ionic cross-linking, swelling is more obvious in the presence of monovalent ions (Na<sup>+</sup>, K<sup>+</sup>).

## Implications for Drug Delivery and Biomedical Use

- Because of its swelling and gelation properties, SCP can function as a controlled-releasing matrix, controlling the diffusion of medications in gastrointestinal fluids.
- By utilizing its pH-sensitive swelling activity, it can be given precisely to different GI tract regions.
- SCP hydrogels can be employed in biomedical applications for biocompatible scaffolds for drug delivery, wound dressings, or tissue engineering.<sup>[17]</sup>

## Toxicology and Safety Profile<sup>[18]</sup>

Category	Potential Issues	Monitoring / Management Strategies
Mineral Imbalance	<ul style="list-style-type: none"> <li>- Low calcium or magnesium levels</li> <li>- High oxalate in urine</li> <li>- Calcium loss leading to bone weakening (osteopenia/osteoporosis)</li> </ul>	<ul style="list-style-type: none"> <li>- Monitor blood levels of calcium, magnesium, phosphate, and PTH</li> <li>- Assess bone density regularly</li> <li>- Provide calcium or magnesium supplements if necessary</li> </ul>
Digestive Effects	<ul style="list-style-type: none"> <li>- Constipation, gas, abdominal discomfort</li> <li>- Rarely, hard stool blockage (impaction)</li> </ul>	<ul style="list-style-type: none"> <li>- Maintain good fluid intake</li> <li>- Include adequate fiber in diet</li> <li>- Avoid use if bowel blockage is suspected</li> </ul>
Kidney / Metabolic	<ul style="list-style-type: none"> <li>- Possible low phosphate levels due to over-binding, especially in kidney disease</li> </ul>	<ul style="list-style-type: none"> <li>- Check phosphate levels routinely</li> <li>- Adjust binder dose based on lab results</li> </ul>
Interactions with Nutrients or Drugs	<ul style="list-style-type: none"> <li>- May interfere with absorption of calcium, magnesium, iron, or certain medications</li> </ul>	<ul style="list-style-type: none"> <li>- Take binder at different times from other drugs</li> <li>- Supplement minerals if deficiencies develop</li> </ul>
Safety Compared to Alternatives	<ul style="list-style-type: none"> <li>- Often less well-tolerated than newer binders like sevelamer or lanthanum</li> </ul>	<ul style="list-style-type: none"> <li>- Use newer, more tolerable binders when accessible and appropriate</li> </ul>

## Comparative Advantage and Limitations<sup>[8, 11, 12]</sup>

Aspect	Strengths	Drawbacks
Ion and Phosphate Binding	<ul style="list-style-type: none"> <li>- Demonstrates effective ion exchange ability</li> <li>- Efficient in binding phosphate and divalent cations like Ca<sup>2+</sup>, Mg<sup>2+</sup>, and Fe<sup>3+</sup></li> </ul>	<ul style="list-style-type: none"> <li>- Extended use may result in reduced calcium and magnesium levels</li> <li>- May increase urinary oxalate excretion</li> </ul>
Calcium Homeostasis	<ul style="list-style-type: none"> <li>- Helps lower calcium levels in urine</li> <li>- Beneficial in managing hypercalciuria and kidney stone risk</li> </ul>	<ul style="list-style-type: none"> <li>- Prolonged use may lead to calcium loss from bones</li> <li>- Associated with osteopenia or osteoporosis</li> </ul>
Use in Kidney Disease	<ul style="list-style-type: none"> <li>- Aids in phosphate control in patients with CKD</li> <li>- May contribute to lowering vascular calcification risk</li> </ul>	<ul style="list-style-type: none"> <li>- Less preferred today due to availability of newer agents (e.g., sevelamer, lanthanum) with improved safety</li> </ul>
Systemic Impact	<ul style="list-style-type: none"> <li>- Primarily acts in the gastrointestinal tract with minimal systemic absorption</li> <li>- Reduced risk of systemic toxicity</li> </ul>	<ul style="list-style-type: none"> <li>- Common gastrointestinal side effects like bloating and constipation</li> <li>- Rare cases of fecal impaction reported</li> </ul>
Biomedical Applications	<ul style="list-style-type: none"> <li>- Exhibits swelling, gel formation, and adhesive properties</li> <li>- Potential applications in drug delivery</li> </ul>	<ul style="list-style-type: none"> <li>- Clinical use has declined due to safety and tolerability concerns</li> </ul>

## Future Prospects and Research Directions

Because of its natural hydrophilic qualities, ion-exchange capabilities, and biocompatibility, sodium cellulose phosphate (SCP) shows great potential in the development of sophisticated drug delivery systems. Its clinical use and therapeutic impact are expected to expand in the near future due to recent studies that indicate its possible application on sustained as well as controlled-effect dosage forms, nanocarrier systems, and stimuli-responsive technologies like 3D printing, personalized therapeutics, or multifunctional co-delivery systems. Methods of administration, which when combined can improve the solubility, bioavailability, and therapeutic effect of a medicine at a specific place. Additionally, the efficacy of SCP-based scaffold structures and hydrogels in localized applications—specifically in oncology, wound care, and bone tissue engineering—is being assessed. SCP's convergence with new developments.<sup>[19]</sup>

## Advanced Drug Delivery Systems of Sodium Cellulose Phosphate (SCP)

While there isn't much study particularly on SCP as a flexible drug delivery excipient, the larger field of cellulose-based materials provides insightful information. By utilizing its distinct ion-exchange characteristics, biocompatibility, and adaptability, SCP can serve as an inspiration for a variety of cutting-edge delivery strategies:

1. **Systems with regulated and sustained release:** Derivatives of cellulose have long been used as excipients to alter the kinetics of medication release and solubility. For sustained oral administration designs, this group—which includes micro- and Nano-cellulose—is being intensively researched.<sup>[20]</sup>
2. **Nano particulate platforms for enhanced delivery:** By utilizing its biocompatibility and changeable surfaces, nanocrystal line cellulose (such as rod-shaped nanoparticles) improves the solubility of drugs, systemic circulation, & targeting, including renal administration.<sup>[21]</sup>

3. **Composite carriers for local therapy:** As shown in ocular delivery systems, cellulose (such as carboxymethyl cellulose) can be combined with other biopolymers (like chitosan) to create hydrogels and polyelectrolyte complexes that have better mucoadhesion and longer drug release.<sup>[22]</sup>

### Regenerative Medicine

Because of its phosphate functionalities, which provide an anionic charge that facilitates binding of calcium and apatite nucleation, and its cellulose backbone, which offers biocompatibility, hydrophilicity, and tunable mechanics, sodium cellulose phosphate is a desirable substance candidate for regenerative medicine. SCP is suitable for osteoconductive scaffolds and bone healing applications, as evidenced by phosphorylated-cellulose systems that exhibit excellent cytocompatibility and improved *in vitro* mineral deposition.<sup>[23, 24]</sup>

### Targeted therapy

Because of its anionic groups of phosphate, biocompatibility, and ion-exchange capacity, sodium cellulose phosphate has encouraging prospects for targeted drug administration. The design of particular molecules with controlled release is made possible by its capacity to develop complexes with cationic medicines and biomolecules

- Ligand-conjugated SCP nanocarriers with tumor-targeted chemotherapy are one example of an emerging approach that uses receptor-mediated uptake to improve accumulation at cancer spots.
- Hybrid technologies (SCP with bio ceramics, polymers, or nanoparticles) to accomplish dual targeting (e.g., delivery that is responsive to both stimuli and sites).
- Personalized strategies, in which imaging or theranostic drugs are used in conjunction with SCP scaffolds & carriers to direct and track treatment.
- Formulations that target the colon, where localized release of medication in the GI tract may be achieved by utilizing SCP's ion-exchange and pH-responsive swelling capabilities. Hybrid systems (SCP with polymers, nanoparticles, or bio ceramics) to achieve dual targeting (e.g., site- and stimuli-responsive delivery).
- Personalized approaches, where SCP scaffolds and carriers are combined with imaging or theranostic agents to guide and monitor therapy.<sup>[25, 26]</sup>

### Combination Therapies

Because of its hydrophilicity, biocompatibility, and ion-exchange capability, sodium cellulose phosphate (SCP) offers a flexible platform for combination therapy that permits the co-loading of several medications or bioactive substances. Possible avenues for the future include:

- Integrated gene or protein therapies: SCP may attach to cationic biomolecules, enabling the delivery of biologics and small-molecule medications at the same time.
- Hybrid carriers that provide multi-stimulus responsive release (such as pH, temperature, and ions) by mixing SCP with hydrogels, polymers, or nanoparticles.
- SCP-based systems may identify medications at illness locations while lowering systemic toxicity, increasing their effectiveness in treating infections, cancer, or

tissue regeneration. This is known as targeted combination treatment.

- Co-administration of medications with complimentary mechanisms, including analgesics and anti-inflammatory medicines, to produce regulated release and synergistic therapeutic benefits.<sup>[25, 26]</sup>

### Conclusion

Sodium cellulose phosphate (SCP) emerges as a multifunctional and biocompatible cellulose derivative with significant pharmaceutical and biomedical value. Its strong ion-exchange properties and localized gastrointestinal activity make it an effective agent in managing calcium and phosphate-related disorders, particularly in conditions like hypercalciuria, nephrolithiasis, and chronic kidney disease (CKD). Despite its historical clinical use, SCP has seen reduced prominence due to the rise of better-tolerated alternatives. Nonetheless, its favorable properties—such as swelling, gelation, and mucoadhesion—position it as a promising candidate for advanced drug delivery systems, regenerative medicine, and tissue engineering. Future research focusing on SCP-based nanocarriers, smart hydrogels, and hybrid therapeutic platforms may revitalize its role in modern therapeutics. Thus, while SCP's traditional applications face limitations, its innovative potential continues to evolve in line with advances in material science and biomedicine.

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