

1 Triptolide self-assembling nanoparticles engineering with
2 modified erythrocyte membranes for targeting and remodeling
3 inflammatory microenvironment in arthritis

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15

1 **Abstract**

2 **Overview:** Rheumatoid arthritis (RA) is an autoimmune disease characterized by persistent
3 synovitis, systemic inflammation and causing severe joint damage. Inflammation and influx of
4 immune cells is a hallmark of the disease. Triptolide with great immunosuppressive activities
5 is a potential drug to treat RA. However, its severe toxicity is still an unresolved bottleneck and
6 largely limits its clinical use. Recently, nanoparticle (NP)-based drug delivery systems have
7 been developed for detoxification of toxic drugs and diseases management.

8 **Aim:** To synthesize triptolide nanoparticles to decline its toxicity and improve water-solubility
9 and develop a dual targeted biomimicking delivery system which targets to inflammation
10 microenvironment. Finally, to achieve excellent therapeutic effect in rheumatoid arthritis.

11 **Methods:** We synthesized an amphiphilic molecule prodrug with the addition of
12 diphenylalanine peptide (FF) to triptolide. These prodrugs were self-assembled into
13 nanoparticles (TPNs) in water, then TPNs were coated with mannose-modified erythrocyte
14 membranes to form a dual targeting manRTPNs. Specifically, mannose and natural molecule
15 CD58 on RBC membrane guide it towards activated macrophages and T cells in inflamed joint
16 through innate and specific immune recognition, respectively. Different cell lines including
17 RAW264.7, CTLL-2, RSC364 and hFLS-RA and a collagen induced arthritis (CIA) mice
18 model were used to detect the targeting and therapeutic effect in *vitro* and *vivo*.

19 **Results:** manRTPNs showed an excellent dual targeting ability to activated macrophages and
20 T cells *in vitro*. We found that manRTPNs selectively induced anomalous activated cells death
21 and indeed altered genes expression and cytokines production of inflamed cells such as

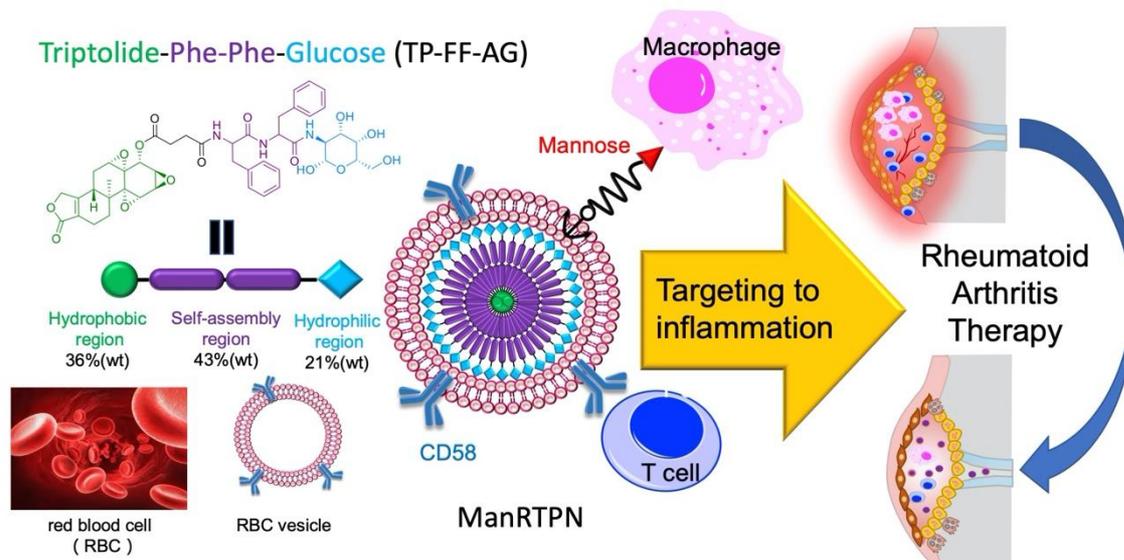
1 macrophages, T cells and synoviocytes. In CIA mice, manRTPNs exhibited significantly
2 targeting effect and prolonged drug accumulation at inflamed joints, whereby increased drug
3 achieved significant therapeutic effect without adverse effect. In detail, manRTPNs ameliorated
4 joint destruction, swollen paws considerably shrunk to normal, bone and cartilage destruction
5 were suppressed and bone density was even recovered to healthy level. Basically, several core
6 genes like *NF-κB*, *cox-2*, *rank*, *rankl*, *vegf*, *vegfr2*, *mmps*, and cytokines such as IL-6, TNF-α
7 involved in inflammation, cartilage/bone destruction and angiogenesis were regulated and
8 altered expression and production. Thus, the inflammation microenvironment was remodeled
9 by TPNs.

10 **Conclusion:** This study demonstrated phenylalanine dipeptide mediating triptolide self-
11 assembled nanoparticles to solve current problems and the potential of engineered RBC
12 membranes for inflammation-targeted drug delivery. Therefore, our work is a good example of
13 triptolide reconstruction, and this agent based on immune recognition may provide an immune
14 cell targeted strategy for rheumatoid arthritis therapy.

15 **Keywords:** triptolide, nanodrug, dual targeting, inflammatory microenvironment, rheumatoid
16 arthritis

17

1 Graphical Abstract



2

3 A novel triptolide nanodrug based therapeutic agent for RA management that modified
4 erythrocyte membranes as a delivery system capable of dual targeted and triptolide remodeling
5 inflammatory microenvironment in arthritis.

6

1 **Introduction**

2 Rheumatoid arthritis (RA) is a serious long-term disease characterized by persistent
3 synovitis, systemic inflammation and autoantibodies and causing severe joint damage,
4 disability and decreased quality of life. The etiopathogenesis remains elusive, and viable and
5 effective treatment options are still limited[1]. Over the last two decades, long-term
6 management of RA has involved disease-modifying anti-rheumatic drugs (DMARDs),
7 biological agents such as tumor necrosis factor (TNF) inhibitors, and glucocorticoids[2].
8 Although the highest clinical remission rate achieved within 50% of control, not all patients
9 attain desirable levels of clinical remission[3] and clinical use of these therapies is limited
10 because of their high cost and frequency of adverse effects. The latter includes teratogenicity
11 and hepatotoxicity of DMARDs like methotrexate[4, 5], risks of infections such as tuberculosis
12 and osteoporosis caused by biological agents[6, 7] and long-term adverse reactions to
13 glucocorticoid therapy[8, 9]. Lately, new therapies based on inflammatory cells such as
14 macrophages and neutrophil or their products such as cell-free DNA in inflamed joint have
15 been reported[10-12], however inhibiting a single factor may not be enough to sustainably halt
16 or reverse disease progression due to RA's complexity and heterogeneity. Therefore, a new
17 systemic design for drug candidate based on nano-medicine is urgently needed.

18 Triptolide is a trace natural triepoxide diterpene from *Tripterygium wilfordii* (or *Léi Gōng*
19 *Téng*) and has been widely used to treat for RA patients since the 1970s in China[13]. Despite
20 its various biological activities, low water solubility and severe toxicity, especially to the liver
21 and kidney, remarkably impedes the translation to clinical applications[14]. Considerable

1 efforts in structural modification[15-18] and nanoparticle(NP) -based drug delivery system [19-
2 21] have been applied to reduce its toxicity. Unfortunately, common practices that direct
3 conjugations attached to the C¹⁴-hydroxyl group of triptolide via a hydrolytic ester bond have
4 proven biologically unstable; meanwhile, current targeted drug-loading delivery systems are
5 limited by drug loading or encapsulation ratio and they mostly target to kidney or tumor[22].
6 Therefore, an effective and stable system that can deliver triptolide to other organ or tissue such
7 as joint is necessary. But until now, triptolide-formed nanoparticles have been rarely reported
8 before. From this point, inspired from biomacromolecule self-assembly process, various
9 peptide building blocks have been performed for the creation of biomimetic or bioinspired
10 nanostructured materials[23, 24]. Recently, diphenylalanine (FF) is the simplest peptide
11 building block for self-assembly and exhibits remarkable advantages including
12 biocompatibility and non-immunogenicity and so on. Many researchers have developed FF-
13 based nanomaterials such as nanotubes, spherical vesicles, nanofibrils and nanowires[25].
14 However, it is barely to link it with toxic drug for nanodrug formation. Therefore,
15 diphenylalanine (Phe-Phe, FF) mediating self-assembling nanoparticles is a new strategy to
16 reconstruct triptolide to be nanoparticles whose spherical nanostructure was more stable and
17 biocompatible than before.

18 In RA pathogenesis, numerous blood-derived cells infiltrate in synovium and cytokine
19 secret necessitates formation of new blood vessels to generate pannus, that all of these form an
20 inflammatory microenvironment[26]. Peripheral-blood monocytes are recruited to joint, and
21 functionally diverse macrophages distribute in the synovial sublining and lining layers. It is

1 mentioned that Cluster of Differentiation 206 (CD206) on macrophages surface has been
2 induced to express more [27]. Besides, prominent T cells being activated, especially the CD4⁺
3 subset, also infiltrate the synovium. As reported, certain signal proteins on the T cell surface
4 such as lymphocyte function antigen 2 (LFA-2/CD2) have increased in both RA patients and
5 animal models[28, 29]. It was reported that CD2 can be effectively targeted by peptides derived
6 from LFA-3/CD58 as well as fusion protein constructs. Interestingly, the ligand of CD2 namely
7 CD58 widely distributes on erythrocyte membranes and CD58-CD2 interaction have mediated
8 process of T cells activation[30]. These immunological characteristics of erythrocytes scarcely
9 ever attracts attention in application, so it is a valuable attempt to apply in drug targeting. Then,
10 mannose, the ligand of CD206 was introduced in erythrocyte membrane for ligand-binding
11 targeting. In addition, the long circulation and flexible functionalization of erythrocyte
12 membrane also make it be a promising platform and have wide application[31, 32]. In this
13 study, we prepared mannose-labeled RBC membrane to entrap newly synthesized triptolide
14 nanoparticles (TPNs) for elevating its vast retention in inflammation and achieving remarkably
15 anti-inflammatory therapy. Triptolide, a hydrophobic drug, was linked with diphenylalanine
16 peptide to self-assembly into size-controlled nanoparticles (TPNs) in water, and this
17 reconstruction has successfully decreased its toxicity and improved water-solubility. As shown
18 in scheme 1, the nanodrug core was coated with decorated RBC membranes to obtain mannose-
19 modified RBC cell membrane-coated triptolide nanoparticles (manRTPNs). By translocating
20 RBC membranes to the nanoparticles, the biological targeting properties of RBC cell can be
21 conferred to manRTPNs as well, allowing them to target activated T cells through the CD58-

1 CD2 affinity. Further, the binding interaction between the mannose and its receptor CD206
2 enhanced anchoring of manRTPNs to activated macrophages. According to manRTPNs, the
3 dual-targeting strategy facilitated the accumulation of nanodrug in inflammation, and the
4 accumulated TPNs efficiently achieved systemic administration of rheumatoid arthritis by
5 specifically inducing cell death and remodeling the inflammatory microenvironment through
6 affecting genes network, downregulating cytokines and pro-angiogenic factors, regulating
7 osteoclastogenesis, and returning balance of metalloproteinases and their inhibitors. Overall,
8 our study expanded the RBC cell membrane biological application in nanocarrier for targeting
9 inflammation through innate and specific immune recognition, and the triptolide nanodrug
10 showed high drug content, low side effect, good biocompatibility which showed great potential
11 for further inflammation diseases therapy.

12 **Results and Discussion**

13 **Preparation and characterization of manRTPNs**

14 Triptolide is a diterpene triepoxide with several active sites that can be modified,
15 especially C₁₄ position[33]. Because of its hydrophobicity, triptolide molecule acts as self-
16 assembly inducer with the addition of diphenylalanine peptide (FF), which is the key moiety of
17 the self-assembling peptide-drug conjugate. Initially, we added a glucosamine (AG) to the FF
18 terminal to lengthen the hydrophilic chain, and then linked triptolide to FF-AG by an ester bond
19 whose cleavage led to drug release in the cell; thus, the self-assembling monomer (TP-FF-AG)
20 as a triptolide prodrug was synthesized (Figure 1A). The chemical structures of these
21 compounds were confirmed via mass spectrometry (MS) and nuclear magnetic resonance

1 (NMR; Figure S1-S16). Due to hydrophobic interactions, triptolide nanoparticles (TPNs) were
2 formed via self-assembly of synthesized monomer namely TP-FF-AG, which is uniformly easy
3 to control TPNs size in water solution. The particles morphology was observed via transmission
4 electron microscopy (TEM; Figure 1B). To synthesize manRTPNs, RBC membranes were
5 extracted by hypotonic hemolysis[34], and mannose inserted by PEG₂₀₀₀-DSPE. An extruder
6 was using to camouflage mannose-modified erythrocyte membranes onto TPNs then form a
7 core-shell structure (Figure 1B). Dynamic light scattering (DLS) measurements revealed that
8 the TPNs were 135 nm in hydrodynamic diameter and manRTPNs were about 10 nm larger
9 with PDIs of 0.15-0.2. The surface zeta potential of the shell was not as negative as that of the
10 cores but was comparable to that of erythrocyte membrane-derived vesicles (RBC vesicles)
11 (Figure 1C). All these results demonstrated successful cloaking of TPNs with erythrocyte
12 membranes.

13 Next, TPNs and manRTPNs were stored in phosphate-buffered saline (PBS) for 1 month,
14 where they demonstrated a negligible change in size and showed an excellent stability (Figure
15 1D). Maintaining protein compounds of erythrocyte membranes on nanoparticles' surfaces is
16 vital for harnessing their biofunctionality. Therefore, completeness of the membrane coating
17 was verified via sodium dodecyl sulfate polyacrylamide gel electrophoresis (SDS-PAGE;
18 Figure S17), which indicated the manRTPNs maintained the whole effective biocomponent of
19 erythrocyte on the surface. Translocation of erythrocyte membranes might improve the
20 biocompatibility and circulating period of TPNs in vivo, which also sustains systemic delivery
21 and better targeting through both passive and active uptakes[35]. As reported, the elimination

1 $T_{1/2}$ of triptolide molecules in rats following *i.v.* administration was 15-21 minutes, which
2 showed that drugs were rapidly eliminated[36]. However, TPNs and manRTPNs have
3 maintained higher plasma concentration after tail intravenous injection of mice in our work. As
4 the relative signal of drug down to 50%, TPNs lasted 4 h, and manRTPNs even had a much
5 longer elimination half-life of over 48 hrs (Figure 1E), which suggested that manRTPNs
6 significantly expanded blood circle compared to triptolide. Therefore, the self-assembling
7 TPNs nanostructure was more stable than original drug, and manRTPNs inherited biological
8 properties of erythrocyte membrane proteins for following efficacy.

9 **Dual-Targeting capacity and immunosuppressive effect of manRTPNs**

10 To determine each targeting capacity of manRTPNs to macrophage and T cell *in vitro*,
11 nanoparticles were Cy5.5-labelled and incubated with RAW264.7 and CTLL-2 treated with IL-
12 4 (100 ng/mL) or TNF- α (10 ng/mL), untreated cells and RSC364 as control. Flow cytometry
13 (FCM) analysis observed gradual increased uptake of nanoparticles by RAW264.7 and CTLL-
14 2 for 6 hrs (Figure S18-20). An uptake curve was built using mean fluorescence intensity (MFI)
15 of cells at six time points, and cellular uptake rate was defined as k indicated in figure 2A-C,
16 which was the slope of the uptake curve. In detail, k s of nanoparticles in activated RAW264.7
17 and CTLL-2 were significantly higher than that in untreated cells (Figure 2A-C; Figure S21A
18 & S22), and k s of manRTPNs were significantly higher than that to TPNs both in RAW264.7
19 and CTLL-2 (Figure 2A-B), but no difference of k s existed between TPNs and manRTPNs in
20 RSC364 that no targeting ligands on it (Figure 2C). Further, the k value in RAW264.7 was
21 higher than that in CTLL-2 (Figure 2A-B), indicating the affinity difference of interacted

1 molecule pairs. To further confirm ligand-binding specificity, Cy5.5-labelled TPNs (without
2 mannose and CD58), RTPNs (with CD58) and manRTPNs (with mannose and CD58) were
3 incubated with treated macrophages and T cells for 3 hrs as well, RSC364 and hFLS-RA as
4 control. After treatment, CLSM images showed that CD206 and CD2 (Figure 2D-E, green)
5 respectively overexpressed on surface of RAW264.7 and CTLL-2. Significant red fluorescence
6 was observed on RAW264.7 incubated with manRTPNs, but not with TPNs and RTPNs (Figure
7 2D), while red fluorescence was observed on CTLL-2 incubated with RTPNs and manRTPNs
8 but not with TPNs (Figure 2E), which was consistent with corresponding ligands distribution
9 on the nanoparticles. When co-incubated with RSC364, they also entered cells (Figure 2F;
10 Figure S21b). Similar results were observed in flow cytometry analysis (Figure 2G-I; Figure
11 S21c). These results demonstrated the ability of manRTPNs to target inflamed cells conferred
12 by their mannose modified erythrocyte membrane coating, which is probably attributed to
13 specific affinity of mannose-CD206 and CD58-CD2.

14 Except for migrated immune cells, synovial fibroblast is main resident effector of
15 inflammation. To determine immunosuppressive efficacy of manRTPNs in joint inflammatory
16 cells, LPS-treated RAW264.7, TNF- α -treated CTLL-2 and RSC364, and hFLS-RA were
17 incubated with manRTPNs in 96-well plates for 24 hrs. Firstly, cell viability was measured via
18 MTT assay. TPNs and manRTPNs didn't significantly reduce RAW264.7 viability even at a
19 concentration of 500 nM (Figure 3A). However, at the same concentration CTLL-2, RSC364
20 and hFLS-RA showed an obvious cytotoxicity (Figure 3B-D). Specially, manRTPNs had an
21 IC₅₀ (half maximal inhibitory concentration) values of 219 nM for activated CTLL-2 cytotoxicity,

1 88.9 nM for activated RSC364 cytotoxicity and 95.8 nM for hFLS-RA cytotoxicity (Figure 3B-D).
2 The lower IC₅₀ values of activated RSC364 and hFLS-RA indicated that triptolide-induced
3 cell death was mainly against anomalous proliferative synoviocytes in inflamed joints, rather
4 than lymphocytes like macrophages. Cells were following collected and lysed for mRNA
5 extraction to check certain inflammation associated genes variation by qPCR. For LPS-treated
6 RAW264.7, transcription factor *NF-κB* associated with most cytokine transcription[37] and
7 *cyclooxygenase-2 (cox-2)* were induced to decrease expression level, but *tissue inhibitor of*
8 *metalloproteinase-1 (timp-1)* showed opposite variation under manRTPNs treatment. *Receptor*
9 *activator of NF-κB ligand (rankl)* over-expressed on TNF-α-treated CTLL-2 was also
10 downregulated by manRTPNs. After activated with cytokines and chemokines, synovial
11 fibroblasts release matrix-degrading enzymes, including matrix metalloproteinases (MMPs)
12 and cathepsins causing cartilage and bone destruction[38]. In RSC364, the transcripts of
13 metalloproteases such as MMP-2 and MMP-9 and vascular endothelial growth factor (VEGF)
14 being critical for angiogenesis were lessen by manRTPNs as well (Figure 3E). Thirdly, medium
15 supernatants were collected to measured cytokines by ELISA assay. supernatant IL-1β and IL-
16 6 of LPS-treated RAW264.7 and supernatant IFN-γ of TNF-α-treated CTLL-2 lessened more
17 quickly that treated with manRTPNs than TPNs (Figure 3F-H), while supernatant IL-1β and
18 IL-6 of TNF-α-treated RSC364 had a similar decreasing curve between TPNs and manRTPNs
19 groups (Figure 3I-J), which indicated that manRTPNs had superior identification of immune
20 cells than resident synoviocytes at least in cytokine secretion. Consequently, manRTPNs
21 selectively exerts its immunosuppressive effects on selectively inducing lymphocytes and

1 synovial fibroblasts cell death, but also regulating production of proinflammatory cytokines,
2 proinflammatory mediators and matrix metalloproteinases, which suggested manRTPNs may
3 have an ability to remodel inflammatory microenvironment through its cell-specific anti-
4 inflammation efficacy.

5 **Targeting capacity and accumulation of manRTPNs *in vivo***

6 Upon the good capacity of manRTPNs to target activated macrophages and T cells *in vitro*,
7 we further verified their ability to target RA site *in vivo*. After CIA mouse model being induced,
8 all four paws swelled in varying degrees[39]. Hind paws were more heavily swollen, and micro-
9 computed tomography (Micro-CT) imaging showed distinct bone loss of joint therein (Figure
10 4A). Then these mice received intravenous injections of free cyanine 5.5 (Cy5.5) solution and
11 Cy5.5-labelled TPNs and manRTPNs for targeting imaging *in vivo*. As shown in figure 4A,
12 almost no fluorescence signal was detected in paws of the free-Cy5.5 group, indicating that the
13 dye barely accumulated at local inflammatory sites. In the TPNs group, we detected a weak
14 signal, which peaked after 4 h (Figure 4A). While manRTPNs obviously reached the RA sites
15 and lasted there for ≥ 12 hrs, which would be attributed to their long circulation and the targeting
16 effect of the modified erythrocyte membranes. Thus, significant fluorescence of manRTPNs
17 lasted longer and showed greater accumulation than that of TPNs. 24 hrs after intravenous
18 injections, we dissected mouse and got froze sections of left paws to observe nanoparticles'
19 retention in the inflamed joints. Contrary to free-Cy5.5 and TPNs group, fluorescence
20 microscopy indicated a very high fluorescence intensity of manRTPNs in the synovial sublining
21 layer, resulting in a reduced accumulation at the inflamed joint due to the lack of permeability

1 (Figure 4B). Tissue biodistribution further revealed manRTPNs' outstanding capacity to target
2 the paws of RA mice, rather than other groups (Figure 4C). Additionally, higher accumulation
3 was observed in liver, suggesting that this organ might be passive targeting of nanoparticles
4 and the main organ metabolizing triptolide (Figure 4C). The results confirmed that the effective
5 accumulation of manRTPNs provided a promising precondition of RA treatment.

6 **Therapeutic efficacy of manRTPNs**

7 The efficacy of ameliorating joint damage of manRTPNs was evaluated in a CIA mouse
8 model. Following arthritis induction, CIA mice presented symptoms of swelling in ankle and
9 paw joints and a clinical scoring was used to estimate the swelling degree (Figure S23).
10 According to protocol timeline, CIA mice were treated with intravenous injections of triptolide
11 at 15 mg/kg, TPNs and manRTPNs at doses of 25 mg/kg for 11 days (Figure 5A). Surprisingly,
12 swollen hindpaws and forepaws both shrunk considerably and even recovered to the same
13 extent as healthy ones with manRTPNs treatment rather than slightly shrunk in TPNs and
14 triptolide group, but swelling symptoms of other groups were increasingly severe (Figure 5B),
15 implying that inflammation process was exactly controlled by manRTPNs. As paw swelling is
16 only a surface phenomenon of RA, bone loss was further determined using Micro-CT analysis.
17 Reconstructed three dimensional (3D) bones images and calculated bone mean density (BMD)
18 showed that serious bone erosion was suppressed and bone density even recovered to healthy
19 mice level of manRTPNs treatment (Figure 5C-D), suggesting a protective role of manRTPNs
20 on cartilage and bone damage. Haematoxylin and eosin (H&E)-stained sections showed an
21 intense anomalous proliferative cells infiltration in the joints and synovium of control groups.

1 By contrast, remarkable reduction of immune infiltration and preservation of cartilage were
2 observed in manRTPNs group (Figure 5E). Further, cytokines including TNF- α and IL-6 are
3 known to increase with the onset of arthritis and correlate strongly with disease severity[40].
4 Immunohistochemical analysis showed that TNF- α and IL-6 in synovium and articular cavity
5 significantly declined in manRTPNs groups (Figure 7A-B) and serum levels of them also
6 observed to alleviate similarly (Figure 6C), indicating effective reduction of arthritis at
7 cytokines level. Moreover, gene heatmap showed that manRTPNs suppressed several genes
8 expression including *rank*, *rankl*, *vegfr2*, *NF- κ B*, *cox-2*, *IL-1 β* , *mmp-2*, *mmp-3*, *mmp-9*
9 and *mmp-13*, that these transcripts are dramatically increased and contribute in joints damage.
10 Some negative regulators such as *opg*, *timp1* and *timp2* were upregulated their gene expression
11 by manRTPNs (Figure 6D), indicating manRTPNs preserve appropriate and balanced
12 concentration of cytokines and inflammatory factors through two-way regulation.
13 RANKL/RANK/ORG signal pathway is key of bone metabolism[41]. The up-/down-regulation
14 of manRTPNs also recovered the balance of RANKL/RANK/ORG and metalloproteinases and
15 their inhibitors (TIMP) to normal. Thus, manRTPNs ameliorated destroyed through aiming to
16 RA pathological factors including cytokines, extracellular matrix (ECM), bone metabolism and
17 angiogenesis.

18 **Biosafety of manRTPNs nanoparticles**

19 To investigate safety and biocompatibility of TPNs and manRTPNs in vivo, we
20 administered PBS, TPNs or manRTPNs at a single dose of 25 mg/kg to healthy mice via tail
21 vein, while to other mice we administered triptolide (original drug of TPNs and manRTPNs) at

1 15 mg/kg by intraperitoneal injection. It is worth mentioning that most mice in the triptolide
2 group died soon (within 24 hrs) after 25 mg/kg administration, indicating the high toxicity of
3 the original drug (Figure S24). After 1-week treatment, mice treated with triptolide showed a
4 significant decrease in count of white blood cells (WBC), RBCs and platelets (Figure 7A),
5 suggesting the occurrence of bone marrow suppression, which is one of the main side effects
6 of triptolide. The main three type cells comprised WBC including neutrophils, lymphocytes,
7 and monocytes showed significant count differences between triptolide group and other groups,
8 which explained the WBC count variation conferred from triptolide (Figure 7B). The
9 hemoglobin concentration did not differ significantly among all the groups in the blood (HGB),
10 mean corpuscular hemoglobin (MCHC) level, and hemoglobin distribution width (HDW)
11 (Figure 7C), indicating that triptolide didn't influence the physiological function of RBCs.
12 Blood biochemistry analysis showed that blood urea nitrogen (BUN), aspartate
13 aminotransferase (AST), creatinine (Cr) and lactate dehydrogenase (LDH) levels of mice
14 treated with triptolide were significantly higher than those of mice in the TPNs and manRTPNs
15 groups (Figure 7D-G). These variations demonstrated that the hepatotoxicity and
16 nephrotoxicity of triptolide were greatly reduced in TPNs, with RBC membrane coating
17 yielding even better safety. Hematoxylin and eosin (H&E) staining of major organs showed
18 that triptolide treatment caused inflammatory infiltration of the liver and severe renal injury
19 characterized by loss of the brush border, tubular epithelial cells detachment from the basement
20 membrane and tubular obstruction. Meanwhile, the TPNs and manRTPNs groups showed no

1 significant variation in cellular morphology and negligible organ damage, in line with the PBS
2 group (Figure 7H). However, TPNs and manRTPNs significant reduced triptolide toxicity.

3 **Conclusion**

4 Our study expanded the RBC cell membrane biological application in nanocarrier for
5 targeting inflammation through innate and specific immune recognition, and the triptolide
6 nanodrug showed high drug content, low side effect, good biocompatibility which showed great
7 potential for further inflammation diseases therapy. Generally, there are two improvement of
8 manRTPNs in cell-membrane-coated nanoparticle delivery system, namely triptolide nanodrug
9 core and RBC membrane shell. RBC membrane-camouflaging nanoparticles has been
10 extensive established platform, but there are still many deposits from RBC cell itself to further
11 develop disease-targeting and therapy platform except for tumor. The natural immunological
12 function of RBC cells has been always neglected in targeted drug delivery construction. So,
13 taking advantage of adhesion molecules affinity between RBC cells and immunocytes in
14 building nanocarrier for transporting drug to inflammation deeply expands application of
15 established RBC membrane platform. On the other side, triptolide has excellent anti-
16 inflammation and immunosuppressive effect and solving its low water-solubility and toxicity
17 is premise of using it in various diseases management. Our reconstruction of triptolide isn't
18 content-limited loading in micelles, but drug-based self-assembled size-controlled
19 nanoparticles. This strategy takes advantages of drugs' hydrophobicity to solve its bad water-
20 solubility, which is magic of nanotechnology. While inflammation is prevalent related with
21 many diseases like cardiovascular diseases, gastrointestinal tract, cancer and pathogen

1 infection[42]. Therefore, manRTPNs as a drug delivery system of inflammation targeting and
2 treating may be a promising agent in other inflammation-associated diseases therapy.

3 **Materials and methods**

4 **Animal care**

5 Mice were housed in an animal facility at Shenzhen Institutes of Advanced Technology,
6 Chinese Academy of Sciences (SIAT). All animal experiments were performed in accordance
7 with Guidance Suggestions for the Care and Use of Laboratory Animals and approved by
8 Sciences Animal Care and Use Committee of SIAT.

9 **Erythrocyte membranes derivation**

10 Erythrocyte membranes were collected according to a previously reported method with
11 modification. Briefly, fresh heparinized whole blood was collected from male mice (20-22 g)
12 and subsequently centrifuged at 2000 rpm for 15 min at 4 °C to remove the plasma and the
13 white buffy coat. The collected red blood cells (RBCs) were washed with 1× PBS three times
14 and suspended in 0.25× PBS for 2 hours at 4 °C, and then the hemoglobin was removed by
15 centrifugation at 9,000 rpm for 45 min. The resulting pink pellet was purified with 1× PBS, and
16 the collected erythrocyte membrane was suspended and stored in distilled water. To form
17 ligand-inserted erythrocyte ghosts, the light pink solution was incubated with DSPE-PEG-
18 mannose for 30 min, 37°C water bath. Erythrocyte membranes with PEG-mannose or not was
19 further prepared by extruding through a 200 nm polycarbonate porous membrane with an
20 Avanti mini-extruder (Avanti Polar Lipids).

1 **Synthesis of TPNs**

2 The TPNs were synthesized by a prodrug self-assembly method. Briefly, after dissolving
3 5mmol Boc-Phe-Phe-OH (BOC-FF, J&K scientific Ltd., China), 6 mmol 1-Ethyl-3-(3-
4 dimethylaminopropyl) carbodiimide (EDC, J&K scientific Ltd., China) and 6 mmol N-
5 Hydroxysuccinimide (NHS, J&K scientific Ltd.,China) in 3 mL anhydrous DMF, another
6 anhydrous DMF solution containing 5.5 mmol glucosamine (AG, Sigma-Aldrich, USA) and 5
7 mmol TEA (J&K scientific Ltd., China) was added drop-wise into it. The mixture was
8 evaporated under reduced pressure for 24 hours to get crude product BOC-FF-AG. Then, crude
9 BOC-FF-AG was dissolved in 30 mL equal volume mixture of anhydrous dichloromethane and
10 trifluoroacetic acid (TFA, J&K scientific Ltd., China) and stirred for 4 hours at room
11 temperature. Afterward, pure NH₂-FF-AG was obtained after evaporated under reduced
12 pressure and purified by silica gel column chromatography with dichloromethane and
13 methanol. Secondly, 1 mmol triptolide (TP, Shanghai Yuanye Bio-Technology Co., Ltd.,
14 China), 1.2 mmol succinic anhydride (SAA, Sigma-Aldrich, USA) and 0.2 mmol dimethyl
15 aminopyridine (DMAP, Sigma-Aldrich, USA) were dissolved in 3 mL pyridine and stirred
16 overnight. After then, the mixture was diluted with ethyl acetate and washed it with solution
17 containing saturated copper sulfate (J&K scientific Ltd.), water and brine. After reaction,
18 residue TP-COOH was obtained through drying with anhydrous Na₂SO₄ and concentration with
19 rotary evaporator. In the third step, TP-COOH, dicyclohexylcarbodiimide (DCC, Sigma-
20 Aldrich, USA) and 1-hydroxy-5-pyrrolidinedione (NHS, J&K scientific Ltd., China) of equal
21 molar ratio were dissolved into 3 mL anhydrous dichloromethane and stirred at room

1 temperature for overnight. The final product TP-FF-AG was gained by reaction of activated
2 TP-COOH and NH₂-FF-AG for overnight at room temperature and purified by analytical RP-
3 HPLC and semi-preparative RP-HPLC with simultaneous detection at 265 nm. Analytical RP-
4 HPLC was performed at room temperature on the Shimadzu LC 20 with UV detector SPD-20A
5 using Inertsil ODS-SP column (4.6 x 250 mm, 5 μm, 100Å). The RP-HPLC gradient was started
6 at 10% of B (CH₃CN, J&K scientific Ltd., China), then increased to 100% of B over 30 min
7 (A: 0.1% TFA in water). Semi-preparative RP-HPLC was performed on the ULTIMAT 3000
8 Instrument (DIONEX). For fluorescence imaging experiments, cyanine5.5 (Cy5.5, Lumiprobe,
9 USA) was linked to intermediate product of NH₂-FF-AG after esterification reaction to obtain
10 Cy5.5-FF-AG in the same way. Ultimately, nanoparticles were self-assembled by added
11 TP/Cy5.5-FF-AG dissolved in DMSO dropwise into PBS while vigorous stirring and dialysis
12 for 2 days. ¹H NMR and ¹³C NMR spectra were recorded with a Bruker VANCE III400
13 spectrometer (400 MHz). The high-resolution mass spectra (HR-MS) were measured on a
14 Bruker Micro TOF II 10257 instrument. For membrane coating, nanoparticles were mixed with
15 prepared membranes in ratio of 1:1. The resultant mixture was subsequently extruded nine
16 times through a 200 nm polycarbonate porous membrane using an Avanti mini-extruder to yield
17 the erythrocyte membranes-coating TPNs or mannose inserted erythrocyte membrane-coating
18 TPNs (namely RTPNs or manRTPNs).

19 **Nanoparticles Characterization**

20 The hydrodynamic diameter and zeta potential of NPs suspended in 1 × PBS were
21 measured by dynamic light scattering (DLS) (Zeta Plus, Brookhaven Instruments, USA). The

1 morphologies of TPNs and manRTPNs were observed by transmission electron microscope
2 (TEM, FEI spirit T12) at an accelerating voltage of 120 keV. The stability experiment of TPNs
3 and manRTPNs in PBS was monitored by DLS over five weeks and stored at 4°C. The proteins
4 retained on manRTPNs compared with those on the natural erythrocyte membrane were
5 observed by SDS-PAGE. Briefly, 2 mg of erythrocyte membrane vesicles and manRTPNs were
6 collected by centrifugation at 15,000g for 30 min, mixed in SDS sample buffer (Invitrogen,
7 USA), and heated at 90 °C for 5 min. Then, 20 µL of each sample was run on a 10% SDS-
8 polyacrylamide gel (Bio-Rad, SDS-PAGE Gel Preparation Kit, USA) at 120 V for 1 h, followed
9 by Coomassie blue staining and imaging.

10 **Pharmacokinetics**

11 To evaluate the circulation half-life of TPNs and manRTPNs *in vivo*, 150 µL Cy5.5-
12 labeled nanoparticles were injected into the tail vein of the mice (n = 3). Twenty microliters of
13 blood were collected at 1, 5, 15, 30 min, and 1, 2, 4, 8, 24, 48, and 72 h following the injection.
14 Each particle group contained 3-4 mice. The collected blood samples were diluted with 30 µL
15 PBS in a 96-well plate before fluorescence measurement. Pharmacokinetics parameters were
16 calculated to fit a two-compartment model and a one-way nonlinear model.

17 **Drug toxicity analysis *in vivo***

18 Purchased from Vital River Laboratory Animal Technology Co. Ltd (Beijing, China),
19 males BALB/c mice (6~8 weeks old) were randomly divided into four groups and
20 intravenously injected with PBS, TPNs and manRTPNs at a single dosage of 25 mg/kg and
21 triptolide of 15 mg/kg 4 times for eight days. A total of 7 days after last administration, all mice

1 were euthanized, and blood was collected for and blood routine examination and biochemical
2 parameters measurement, while main organs including heart, liver, spleen, lung, and kidney
3 were excised and stained by H&E for histological analysis.

4 **Cell culture**

5 RAW264.7 cells, CTLL-2, RSC364 and hFLS-RA were purchased from the American
6 Type Culture Collection (ATCC, USA) and cultured in Dulbecco's minimum essential medium
7 (DMEM, Corning, USA) supplemented with 10% fetal bovine serum (FBS, Gibco, USA), 1%
8 penicillin (100 IU/mL, Corning, USA), and streptomycin (100 µg/mL, Corning, USA) and
9 placed at 37 °C in a 5% CO₂ humidified atmosphere. Cell lines were purchased with
10 certification of authentication and free from Mycoplasma.

11 **Quantification of cell targeting in vitro**

12 A 6-well culture plate was prepared and RAW264.7, CTLL-2, RSC364 and hFLS-RA
13 cells were implanted at a density of 5×10^5 cells/well. 12-16 hrs later, 80% of cell coverage was
14 confirmed. 50 µL Cy5.5-labelled TPNs or manRTPNs was adding into prepared cells every
15 hour for six hours, incubated with covering foil paper and collected them in the sixth hour.
16 After digestion with trypsin (Gibco, USA), cells were put together and washed three times with
17 ice-cold PBS, then underwent flow cytometry by FACS Canto II (BD Biosciences). The data
18 was analyzed using FlowJo software. Mean fluorescence intensity (MFI) reflected amount of
19 intake nanoparticles amount. An uptake curve was constructed with MFI and time, and a *k* value
20 being the slope of uptake curve was defined as uptake rate to measure targeting capacity of
21 nanoparticles.

1 **Immunofluorescence assay of macrophages and T cells with nanoparticles**

2 Cells were cultured with medium added recombinant mouse IL-4 (100 ng/mL, R&D
3 System, USA) or recombinant TNF- α (10 ng/mL, R&D System, USA) for six hours and
4 incubated with TPNs, RTPNs or manRTPNs for 3 hours. Afterward, cells were fixed with 4%
5 paraformaldehyde (Sigma-Aldrich, USA) for 10 minutes, permeabilized with 0.1% Triton™
6 X-100 (Sigma-Aldrich, USA) for 10 minutes, blocked with 1% BSA for 1 hour and labeled
7 with 2 μ g/mL anti-mannose receptor/AF488 conjugated antibody (ab195191, Abcam) and
8 rabbit anti-CD2/AF488 conjugated antibody (bs-2899R, Bioss) for 3 hours at room
9 temperature. Nuclei were stained with DAPI. All manipulation must be away from light. The
10 images were captured under confocal microscopy (Leica, TCS SP5).

11 **Cellular cytotoxicity study**

12 The cellular toxicities of TPNs and manRTPNs on macrophages, T cells, FLSs and hFLSs
13 were determined by MTT assay using CCK-8 Kit. Cells were implanted in a 96-well culture
14 plate at a density of 8×10^3 cells/well (5 replicates each treated group). After 12 hrs, PBS, TPNs
15 and manRTPNs with concentrations of 10 nM, 50 nM, 100 nM, 200 nM, 500 nM were added
16 into medium for further 24 hrs co-culture. Then the cells were mildly washed by PBS before
17 added CCK-8 mixed solution. Then, the optical density in 450 nm was measured by Multiskan
18 GO (Thermo Fisher Scientific).

19 **Cytokines concentration analysis**

20 The TNF- α , IL-6 and IFN- γ concentrations of cells culture supernatants were determined
21 with ELISA Kit using mouse ELISA Kits (Biolegend, USA) as manipulation. Also, the TNF- α

1 and IL-6 concentrations of mouse serum samples were determined with TNF- α and IL-6 ELISA
2 Kits (Biolegend, USA). Briefly, Serum samples of treated mice were collected at the end of
3 experiment and concentrations of TNF- α and IL-6 were quantified with ELISA kits.
4 Specifically, the whole blood of mice was collected by submandibular bleeding into microtubes
5 and allowed to clot at room temperature for 30 min. Samples were then centrifuged at 2,000g
6 for 6 min to collect supernatant serum. Serum samples were immediately frozen at -20 °C until
7 analysis by using mouse TNF- α and mouse IL-6 ELISA kits (Biolegend) within 3 days of
8 collection.

9 **Genes expression profiles analysis of cells**

10 After treated with nanoparticles of serious concentrations, cells were harvested to isolate
11 RNA. RNA was extracted with TRIzol reagent (Invitrogen, USA) according to the
12 manufacturer's instructions. Complementary DNAs (cDNAs) were synthesized with
13 QuantiTect Reverse Transcription Kit (QIAGEN K.K., Tokyo, Japan) and the specific gene
14 transcripts were quantified by quantitative real-time PCR using QuantiTect SYBR Green PCR
15 Kit (QIAGEN K.K., Tokyo, Japan) and analyzed with ABI 7500 real-time PCR system
16 (Applied Biosystems, USA). The gene expression patterns along with concentration were
17 highlight with heatmap by using TBtools package.

18 **Collagen induced arthritis (CIA) mice model induction**

19 Seventy-two female DBA/1 mice (6~8 weeks old) were purchased from Vital River
20 Laboratory Animal Technology Co. Ltd (Beijing, China). All mice were maintained in a SF
21 system which is room equipped with an air-filtering system, and the cages and water were

1 sterilized. CIA was induced as previously reported study[39]. Briefly, bovine type II collagen
2 (Chondrex, Redmond, WA, USA) was dissolved in 0.1M acetic acid overnight at 4°C. This was
3 emulsified in an equal volume of complete Freund's adjuvant (Chondrex, Redmond, WA,
4 USA). The mice were immunized intradermal at the base of the tail with 100 μ L of emulsion
5 containing 100 μ g of type II collagen. On day 21, mice were boosted intraperitoneal with 100
6 μ g type II collagen dissolved in phosphate buffered saline (PBS). Clinical scores of each
7 hindpaws and forepaws of mice were obtained following the standard evaluation process[39].
8 In detail, no evidence of erythema and swelling occurred is score 0, erythema and mild swelling
9 appeared is score 1, erythema and mild swelling extended from the ankle to the tarsals is score
10 2, erythema and moderate swelling extended from the ankle to metatarsal joints is score 3 and
11 erythema and severe swelling encompassed the ankle, paws, and digits or ankyloses of the limb
12 is score 4. Then total clinical scores of hindpaws and forepaws were calculated. At least six
13 mice each group.

14 **Nanoparticles targeting to inflamed joints**

15 After CIA model was established, free Cy5.5, Cy5.5-labelled TPNs and manRTPNs were
16 intravenously injected into the CIA mice (20 mg/kg, n = 4). Fluorescence images were obtained
17 after 1, 2, 4, 8, 12, and 24 hours using an in vivo imaging system (IVIS, Caliper, USA). Then,
18 the mice were sacrificed for ex vivo tissue/organs distribution analysis at the end of experiment.
19 Meanwhile, the synovial tissue was dissected and dehydrated in 30% sucrose solution overnight
20 and then cry-sectioned at 8 μ m. The sections were stained with DAPI and washed twice.

1 Fluorescence images were obtained using a confocal microscope (Leica, TCS SP5). The
2 fluorescence intensity of sections in different groups was calculated using software Image J.

3 **manRTPNs treatment assay**

4 According to CIA mice model conduction, starting at day 21, the clinical scores were
5 calculated to make sure that CIA mice were almost equably and randomly divided into four
6 groups, while healthy DBA/1 mice were set as control (n = 5). Five different agents namely
7 PBS, RBC vesicle, triptolide, TPNs and manRTPNs were intravenously injected every two
8 days. The timeline of whole therapy experiment from model making to the end was according
9 to schematic diagram shown in figure 5A. The arthritis index of each group was recorded over
10 time to evaluate treatment efficacy. At the end, the mice were sacrificed for further analysis.

11 **Micro-CT imaging of mice paws**

12 The knee and ankle joints of each experimental mouse hindpaws were scanned using
13 micro-CT system (Bruker's SkyScan 1278, UK) to observe joint bone situation. Images were
14 acquired at 55 kV, 72 μ A and 300 ms/frame, with 360 views. The 3D structures of knee joint
15 and ankle joint were reconstructed from 360 views and BDM was evaluated by corresponding
16 SkyScan NRecon package. Analysis typically took around 15 min per joint for an experienced
17 operator.

18 **Histological analysis and immunohistochemical staining assay**

19 At study endpoints, mice were euthanized and hind knee joints were collected for H&E
20 staining and immunohistochemical staining. Briefly, the ankle and knee joints of scarified
21 animals as well as their heart, liver, spleen, lung and kidney were fixed in 10% buffered

1 formalin and then joints were incubated in decalcifying solution (4% hydrochloric acid in 4%
2 formaldehyde) at room temperature for 7 days for decalcification. After paraffinization,
3 microtome (Leica) slices of 8 μm were prepared and stained with haematoxylin and eosin,
4 images were taken by using inverted microscope (Olympus, IX71, Japan) and the inflammatory
5 cell infiltration in synovial tissues, bone and cartilage was evaluated by Image J software. After
6 deparaffinization the slices were subjected to antigen recovery in 0.01 M sodium citrate buffer
7 at 125 °C for 30 s, followed by 10 s at 90 °C, and then subjected to the endogenous peroxidase
8 inactivation by covering tissue with 3% hydrogen peroxide for 5 min. After blocking non-
9 specific binding sites with 10% goat serum in PBS, the slices were incubated with TNF- α /IL-6
10 monoclonal antibody (Invitrogen) with a dilution rate of 1:100, respectively, at 4 °C for 24 h.
11 Then the slices were incubated with horseradish peroxidase (HRP)-conjugated secondary
12 antibody with a dilution rate of 1:800 at 37 °C for 1 hour. Sections were developed using the
13 DAB substrate and then counterstained with haematoxylin. The images were captured and
14 analyzed by inverted microscope (Olympus, IX71, Japan) and Image J software.

15 **Gene expression profiles analysis of tissues**

16 The paws and ankles were dissected from mice on day 22 of arthritis, snap-frozen in liquid
17 nitrogen, ground into powder, and homogenized. All procedure must be under RNase-free
18 conditions. The RNA isolation and real-time PCR assay were carried out following the protocol
19 following. Briefly, total RNA was extracted with TRIzol reagent (Invitrogen, Carlsbad, CA,
20 USA) from the tissue homogenates according to the manufacturer's instructions. The total RNA
21 (1 μg) was reverse transcribed to cDNA using the QuantiTect Reverse Transcription Kit

1 (QIAGEN, Japan) and the specific gene transcripts were quantified by quantitative real-time
2 PCR using QuantiTect SYBR Green PCR Kit (QIAGEN K.K., Tokyo, Japan) and analyzed
3 with ABI 7500 real-time PCR system (Applied Biosystems, USA). PCR was performed as 40
4 cycles at 94°C for 15 s, 55°C for 30 s, and 72°C for 30 s. The relative RNA expression was
5 calculated with comparative *CT* method; β -actin as internal control. The gene expression
6 patterns along with concentration were highlight with heatmap by using TBtools package.
7 Gene-specific primers were synthesized by Sangon Biotech (Shanghai) Co., Ltd. and list in the
8 TableS1.

9 **Statistical Analysis**

10 All the results are reported as mean \pm SD. The differences among groups were analyzed
11 using one-way ANOVA analysis and Student's t-test; *represents $P < 0.05$, ** represents $P <$
12 0.01 .

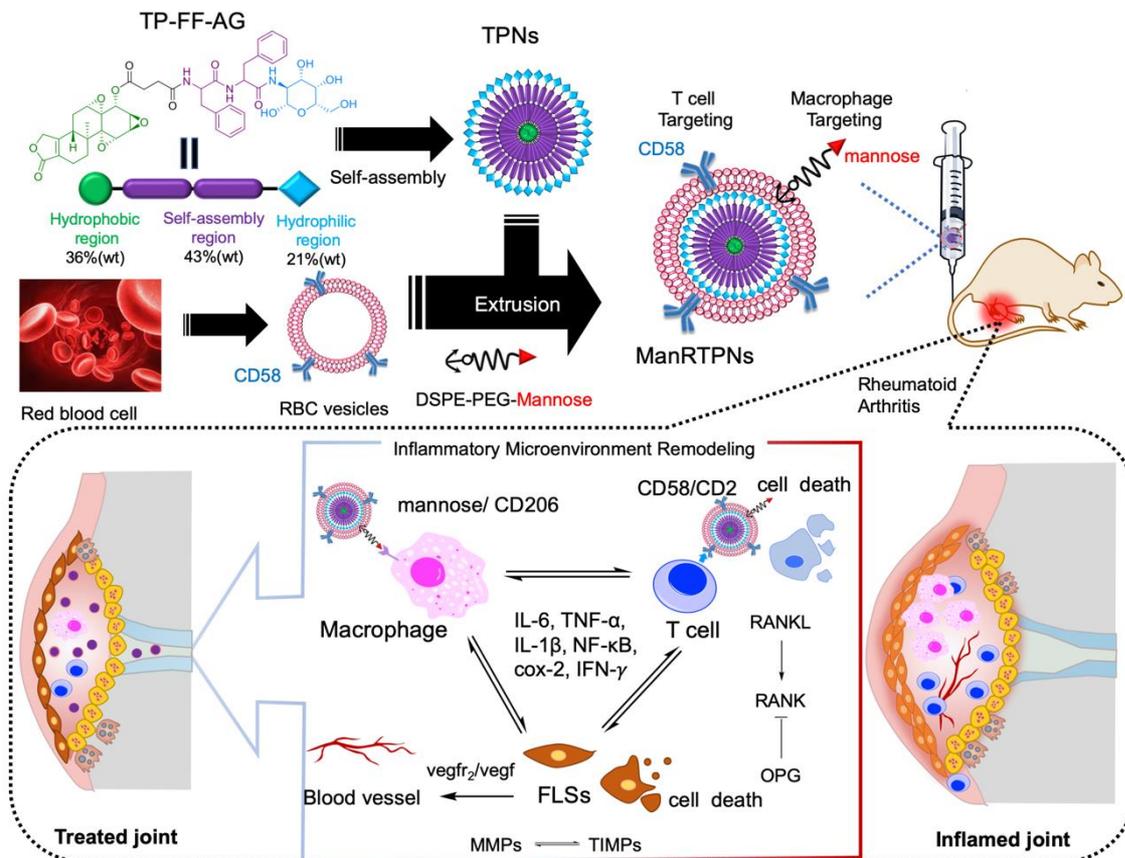
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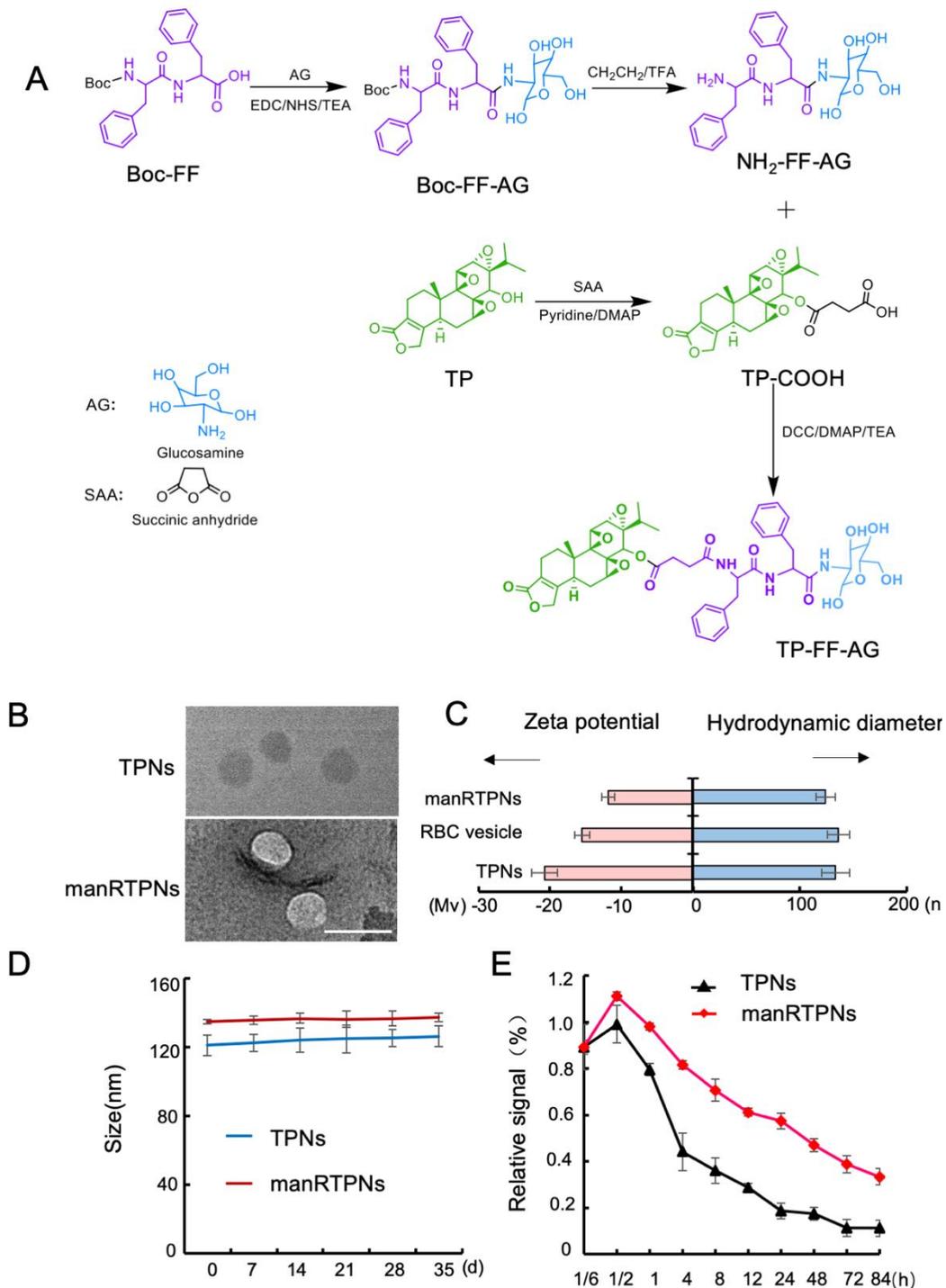
1 **Competing Interests**

2 The authors have declared that no competing interest exists.

3



1
2 **Scheme 1.** Schematic illustration of mannose modified erythrocyte membranes-coated
3 triptolide nanoparticle (manRTPNs) targeting to inflammatory sites of rheumatoid arthritis and
4 significant therapeutic effect. Targeting capacity to macrophages and T cells of manRTPNs is
5 conferred from the mannose modified erythrocyte membrane. Specifically, target activated T
6 cells was through the CD58-CD2 affinity, and the binding interaction between the mannose and
7 its receptor CD206 enhanced anchoring of manRTPNs to activated macrophages. Effective
8 management was achieved through remodeling inflammation microenvironment. Basically,
9 TPNs at RA sites shift core genes expression in three pathways including angiogenesis, bone
10 resorption and cytokine secretion.
11



1

2 **Figure 1. Preparation and Characterization of manRTPNs.**

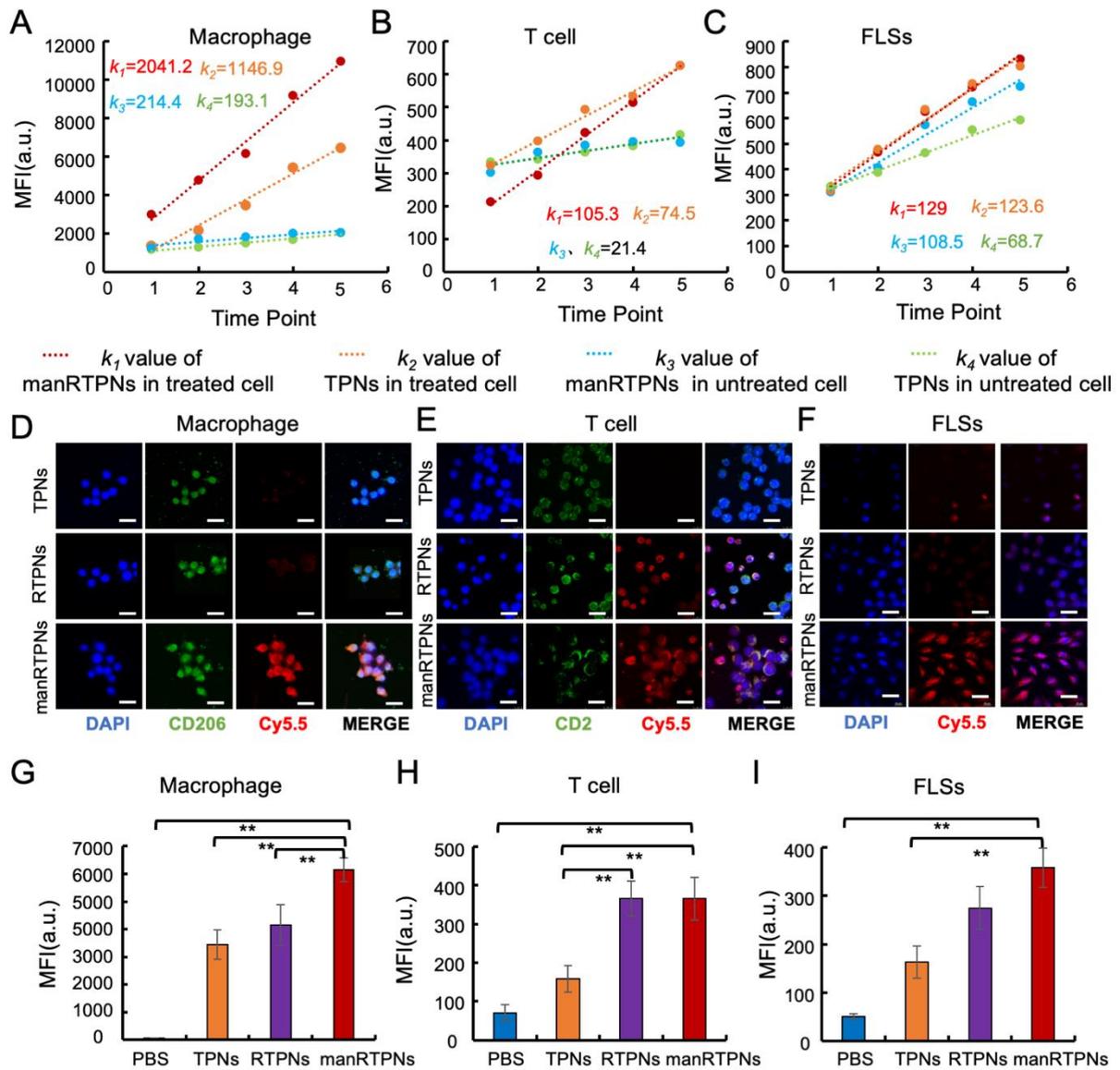
3 (A) Synthetic route illustration of triptolide self-assembling nanoparticles (TPNs). (B)

4 Representative image of TPNs and manRTPNs examined with transmission electron

5 microscopy (TEM). manRTPNs samples were stained with uranyl acetate. Scale bar, 200 nm.

1 (C) Size and ζ potential distribution of TPNs, RBC vesicles and manRTPNs. Each experiment
2 had three replicates. (D) Stability of TPNs and manRTPNs in PBS over five weeks. Each
3 experiment had three replicates. (E) Pharmacokinetics of TPNs and manRTPNs in vivo. Each
4 experiment point had three replicates.

5



1

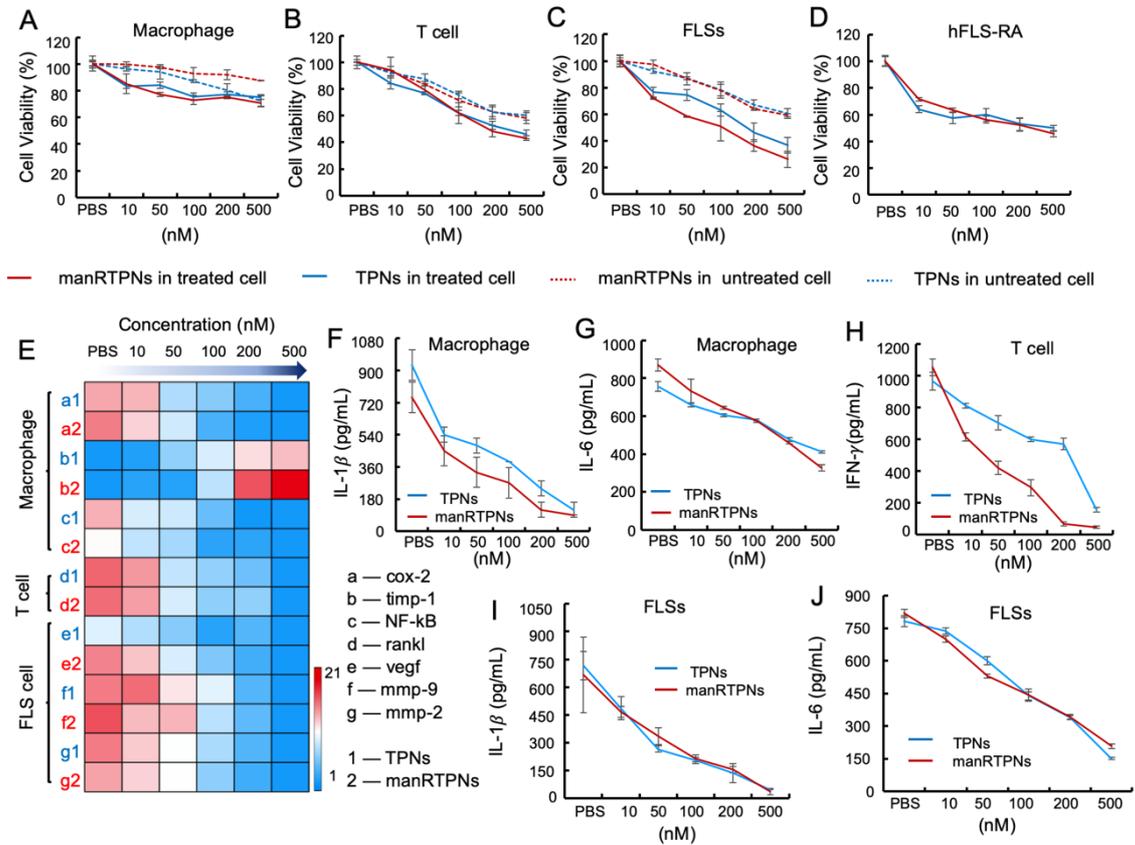
2 **Figure 2. Targeting capacity to immune cells of manRTPNs.**

3 (A-C) Cellular uptake capacity of TPNs and manRTPNs in three cell lines. Flow cytometry
 4 analysis of TPNs and manRTPNs were conducted in RAW246.7 (A), CTLL-2 (B) and RSC364
 5 (C). k was slope of uptake curve built with mean fluorescence intensity (MFI) which indicated
 6 cell uptake rate. (D-F) Representative fluorescence images by confocal analysis. RAW246.7
 7 (D), CTLL-2 (E), and RSC364 (F) were co-incubated with TPNs, RTPNs, and manRTPNs,
 8 respectively. Nanoparticles were labeled with Cy5.5 (red), CD206/CD2 antibody (green)

1 expressed on the IL-4 -treated RAW264.7 and TNF- α treated CTLL-2 and cellular nuclear was
2 labeled with DAPI (blue). Scale bars, 100 μm . (G-I) Flow cytometry analysis of RAW246.7
3 (G), CTLL-2 (H) and RSC364 (I) incubated with various nanoparticles. ** indicated significant
4 difference and $p < 0.05$.

5

1



2

3 **Figure 3. Efficacy of manRTPNs in inflammatory cells.**

4 (A-D) Cytotoxicity of TPNs and manRTPNs in RAW264.7 (A), CTLL-2 (B), RSC364 (C), and

5 hFLS-RA (D). Each experiment point had three replicates. (E) Heatmap of inflammatory

6 factors genes expression. Briefly, genes *cox-2*, *timp-1* and *NF- κ B* were checked in RAW264.7,

7 gene *rankl* was checked in CTLL-2 and genes *vegf*, *mmp-9* and *mmp-2* were checked in

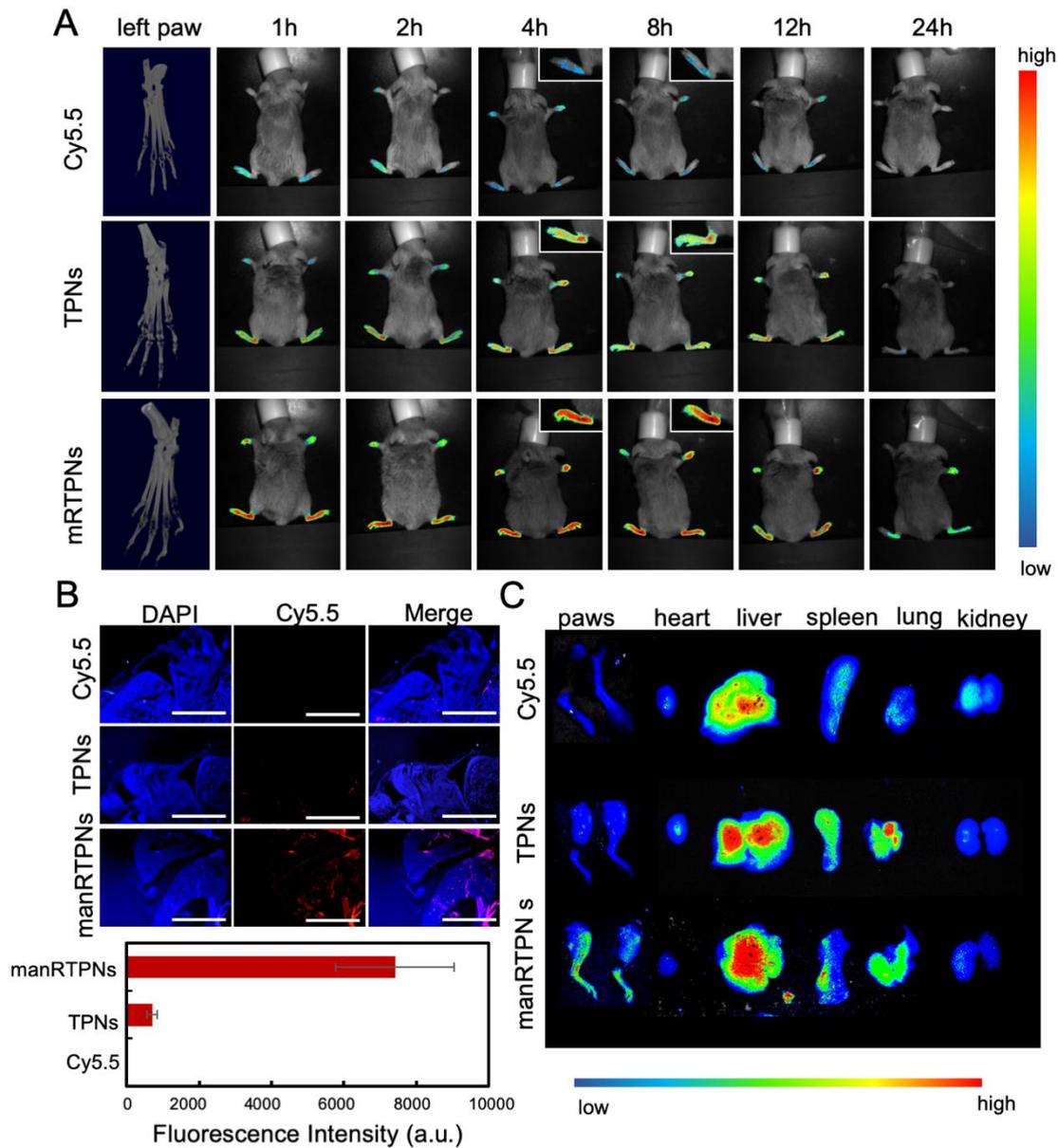
8 RSC364, respectively. (F-J) Cytokines concentration variation of inflammatory cells treated

9 with TPNs and manRTPNs. Supernatant IL-1 β was measured in RWA264.7 (F) and RSC364

10 (I), supernatant IL-6 in RWA264.7 (G) and RSC364 (J), supernatant IFN- γ in CTLL-2 (H),

11 each experiment had three replicates.

12



2

3 **Figure 4. Targeting effect and accumulation at inflamed site of RA of manRTPNs.**

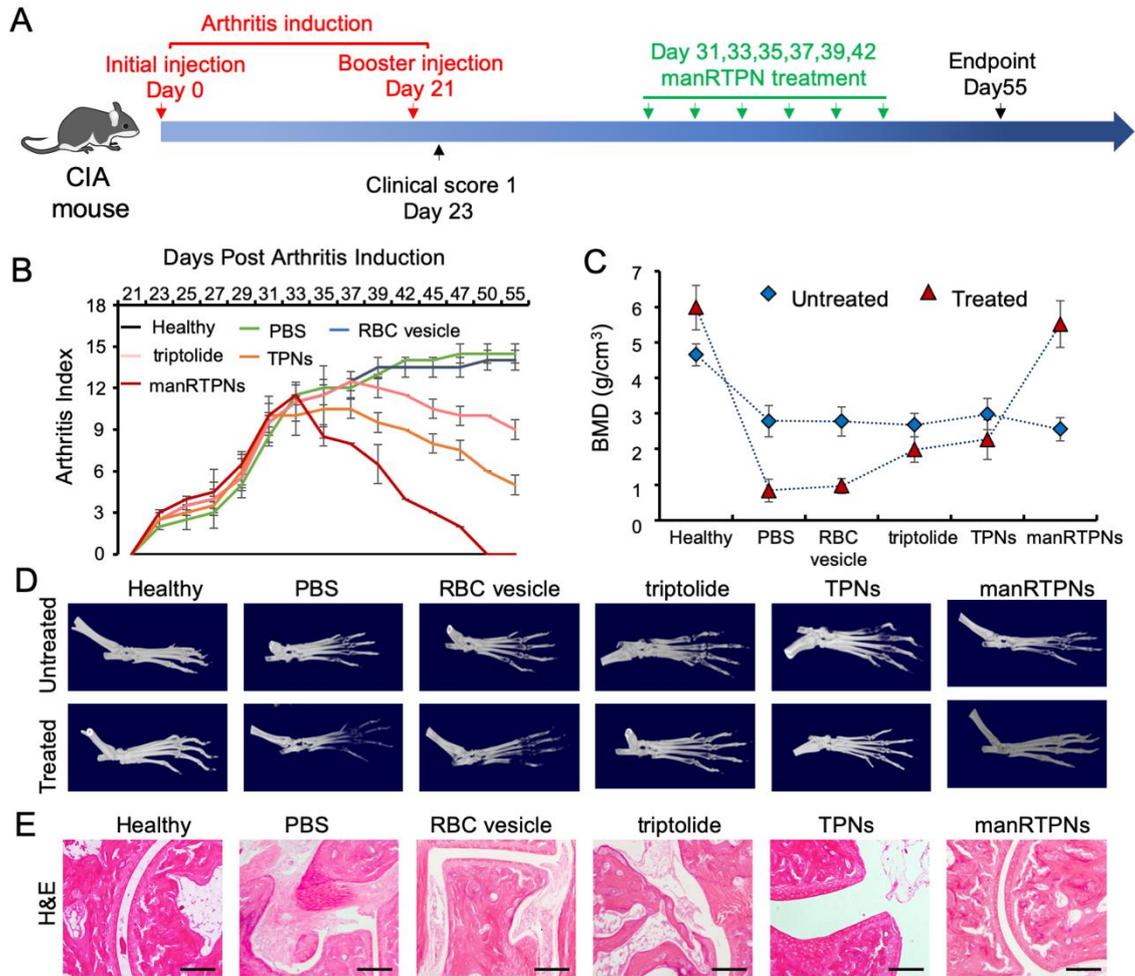
4 (A) Representative images of free Cy5.5, TPNs and manRTPNs accumulating in arthritic

5 paws. (B) Fluorescence images of free Cy5.5, TPNs and manRTPNs in arthritic paws fixed

6 after 24 hours of intravenous injection. Scale bars, 500 μ m. Fluorescence of free Cy5.5, TPNs

7 and manRTPNs was quantified in arthritic paws sections. (C) Distribution of free Cy5.5,

8 TPNs and manRTPNs in main organs and arthritic paws.



1

2 **Figure 5. Therapeutic effect of manRTPNs in a mouse model of collagen-induced arthritis.**

3 (A) The study protocol of a therapeutic regimen with CIA mice model. (B) Arthritis indexes of

4 different treatment groups over 14 days; each experiment had five mice replicates. (c) Bone

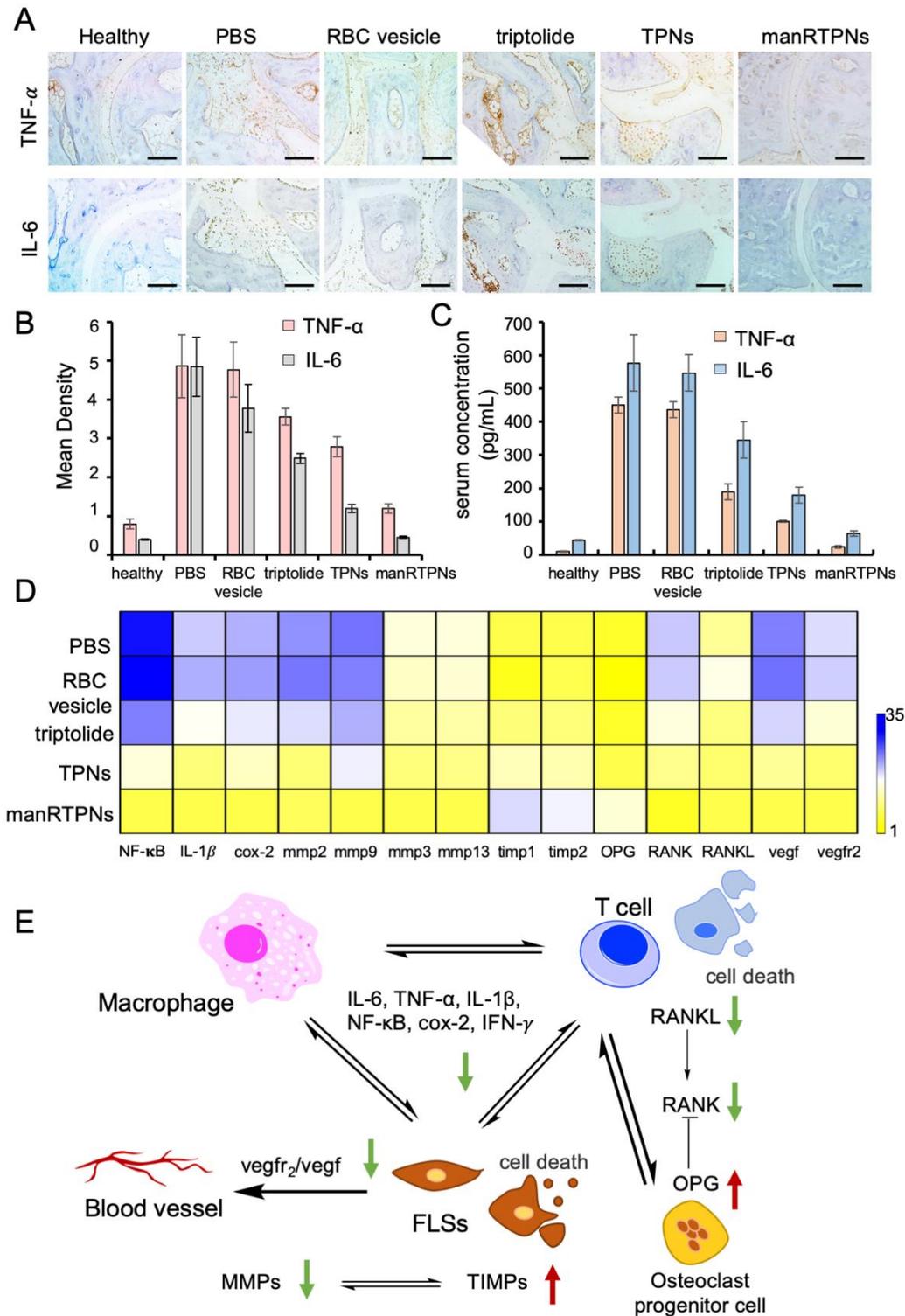
5 mean density (BMD) variation of the mice paw joints before and after different treatment. (D)

6 Representative 3D reconstructed bone images of arthritic paws in different treatment groups.

7 (E) Representative images of H&E staining on knee sections from healthy mice and CIA mice

8 treated with PBS, RBC vesicle, triptolide, TPNs or manRTPNs. Scale bars, 100 μ m.

9



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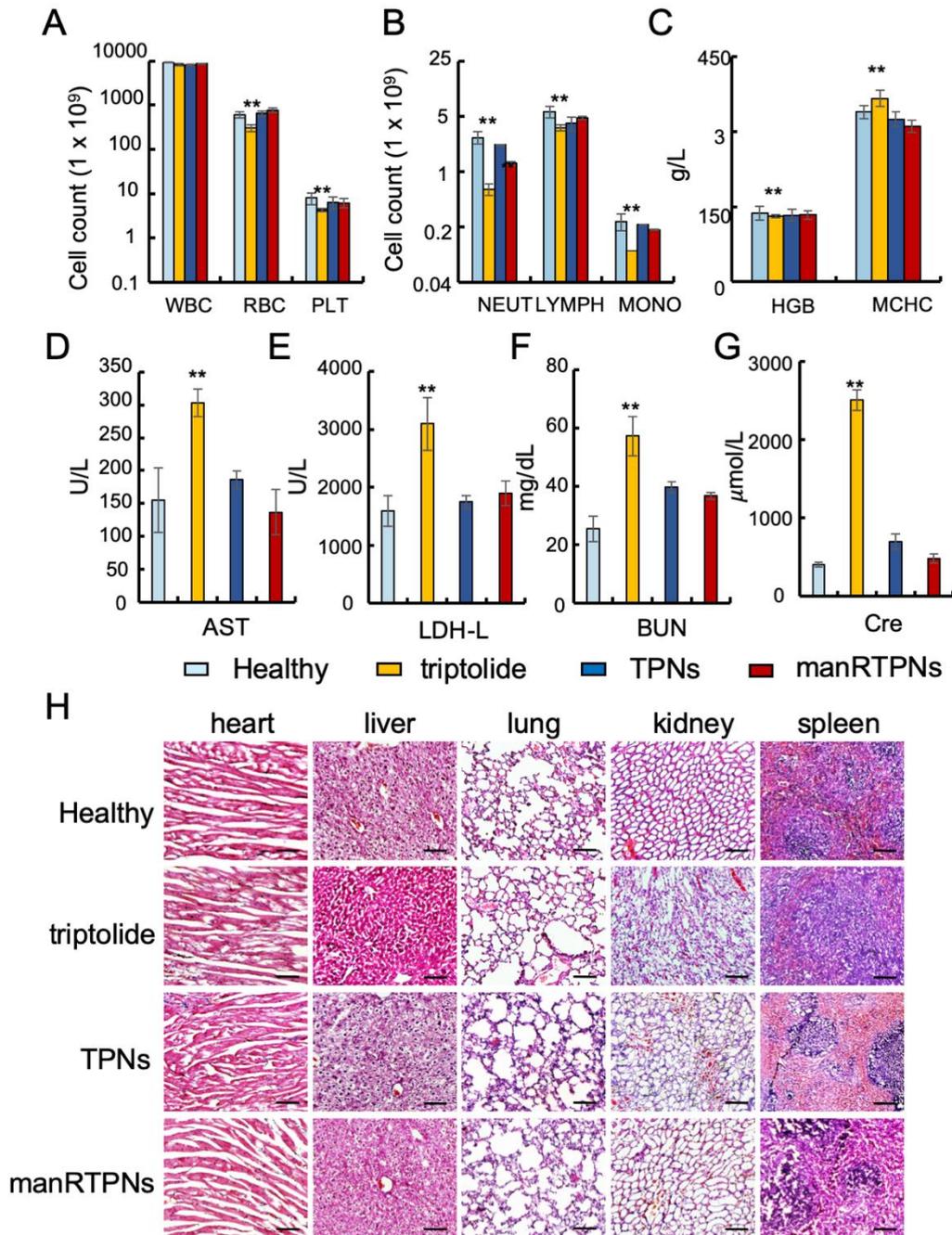
2 **Figure 6. Remodeling inflammatory factor of RA treatment by manRTPNs.**

3 (a) Representative images of TNF- α and IL-6 immunohistochemical staining on knee sections.

4 Scale bars, 100 μ m. (B) Immunohistochemical quantification of TNF- α and IL-6. (C) Serum

5 concentration of TNF- α and IL-6 in healthy mice and CIA mice treated with different groups.

- 1 Each experiment point had three replicates. (D) Heatmap of genes expression profiles in
- 2 different treatment.
- 3



2

3 **Figure 7. Biocompatibility and safety of manRTPNs.**

4 (A) Complete cell counts (white blood cells, red blood cells, and platelets) in PBS and
 5 triptolide-, TPNs-, manRTPNs-treated groups. Experiment replicate, three. (B) Complete cell
 6 counts (neutrophil, lymphocyte, and monocyte) in PBS and triptolide-, TPNs-, manRTPNs-
 7 treated groups. Experiment replicate, three. (C) Concentration of HGB and MCHC in four

1 groups indicated before. Experiment replicate, three. (D-G) Blood routine examination
2 parameters including AST(D), LDH-L(E), BUN(F) and Cre(G) after different treatment.
3 Experiment replicate, three. (H) H&E staining of main organs in four different groups. Scale
4 bars, 100 μm .
5

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