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To analyze antiviral medicine in pharmaceutical dosage forms using RP-HPLC

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Abstract

The current research set out to create and verify stability indicating methodologies for the detection of antiviral and anticancer medications utilizing RP-HPLC In order to create the approach, we used recently authorized antiviral medication combinations and anticancer medicines. In addition, the ICH recommendations were followed during validation of the established approach. The approach was tested for several properties, including stability, resilience, linearity, accuracy, and precision of the answer. Various methods were also subjected to the forced deterioration experiments.

Keywords: RP-HPLC, ICH, stability, medicine, dosage

Introduction

A liquid mixture may be physically separated into its components using liquid chromatography by using two immiscible phases: the stationary phase and the mobile phase. There are five main categories into which liquid chromatography (LC) techniques may be classified: adsorption, affinity, size exclusion, ion-exchange, and partition. One kind of column chromatography, known as High Performance Liquid Chromatography (HPLC), involves rapidly pumping the mobile phase down the column. In terms of partition chromatography methods, the most common variant is the reverse-phase (RP) mode. A hydrophobic stationary phase and a polar mobile phase are used in this process. Due to what its retentiveness, durability, and accessibility, dimethyl silane (C2) was selected for this investigation from a variety of columns that are compatible with reversed phase chromatography, including octadecylsilane (C18), octyl silane (C8), butyl silane (C4), phenyl, nitro, amino, cyanopropyl (CN), and others.

About 80% of reverse separation issues are addressed with C18 and C8 columns. It is not always feasible to identify a suitable mobile phase that will achieve the separation since the analytes are polar or semi-polar, and the other phases that are available are often much less retentive than the C18

and C8 phases. In high performance liquid chromatography (HPLC), the mobile phase stream is typically introduced with 20µL of the sample of interest and supplied by a highpressure pump. The mobile phase, which contains the analyte, travels through the stationary phase bed in a certain direction. Because of the different strengths of the chemical bonds between the mobile and stationary phases, each component of the mixture is separated from the others. The separation occurs when the liquid responds to a fixed bed by repeatedly sorbing and desorbing. Because of this, the analysis time is cut in half or even in half again compared to conventional column chromatography, and the column efficiency is boosted thanks to the utilisation of much smaller adsorbent or support particles. Liquid solvent is pressure-injected into a packed column containing the stationary phase.

Consistent chromatographic results need the application of high pressure to maintain a constant flow rate. Different parts of the sample will be drawn out of the column at different times, as dictated by how the mobile and stationary phases are divided. A mechanism for LC would not be complete without the column, which is engineered to endure the intense pressure of the liquid. Standard liquid chromatography (LC) columns typically measure 100–300 mm in length, 6.4 mm in outer diameter, and 3.0-4.6 mm in

internal diameter. Complex detector system that can detect low concentrations and manage low flow rates; samplerelated data must be known before HPLC technique development.

Literature Review

Sv Saibaba *et al.* (2016) ^[1] We developed and confirmed an accurate, straightforward, selective, and RP-HPLC method for measuring lamivudine in pharmaceutical dosage form and bulk. The determination was performed on an IntersilC-18 column (250 X 4.6mm, 5 μ m) using a mobile phase that was a mixture of acetonitrile and water (50:50% v/v) at a flow rate of 1.0 ml/min. The estimate was based on a wavelength of 270 nm. To make sure the method was up to ICH standards, we assessed its linearity, accuracy, precision, specificity, and robustness. The retention time of lamivudine was 2.6 minutes. Within the 40-120 µg/ml concentration range, the technique demonstrates linear responses with a correlation coefficient (r2) of 0.999. It is possible to estimate lamivudine in both its pure and tablet dose forms using this approach.

Rina B Patel et al. (2020)^[2] In order to create a simple, accurate, and stability-indicating RP-HPLC method for the estimation of Cabozantinib, a reversed-phase C18 column measuring 250 mm \times 4.6 mm and having a particle size of 5 µm was utilised along with a mobile phase comprising of 0.1% Formic acid: acetonitrile: methanol in a ratio of 35:33:32 v/v, a flow rate of 1.0 mL/min, and ultraviolet detection at 244 nm. The retention time of cabotinib was 6.03 minutes. With correlation values of 0.990, it was shown that the range of 100-500 µg/mL was linear. Results showed that cabozantinib percentage recoveries ranged from 99.59 to 99.96%. The specificity of the approach was shown by stress testing. Using the novel method, cabozantinib may be separated from any potential degradation products. The recommended method for studying cabozantinib in tablet form is approach worked well. Following ICH standards, the procedure has been verified.

Akanksha Verma et al. (2022)^[3] Research on force degradation is crucial because it gives the data and expert opinion needed to create an analytical procedure that may indicate stability. This research is useful for determining the composition and stability of a pharmaceutical product or chemical over time. The chemical behaviour of the molecule may be better understood by a force degradation research, which aids in the creation of formulation and packaging. The analytical methodologies that are useful for developing stability indicating methods are described below. Furthermore, there is no specific information on how to conduct forced degradation tests in the regulatory guidelines, which are quite broad. Therefore, this review explains the analytical methodologies useful for developing provide a method for investigating degradation processes, which improves performance. a method for stability signalling and analyses the a stability signalling approach and examines the

Ramesh Jayaprakash *et al.* (2023)^[4] There has been a rise in the number of reported disorders recently, however this medication must pass a number of tests before it can be sold. Validation and analytical methodologies contribute significantly to ensuring its reliability and authenticity. This process employs a variety of analytical approaches to collect

data about the medication. Chromatography methodologies, such as high-performance liquid chromatography, and hyphenation techniques, such as LC-MS, are included in this research for the aim of estimating several anti-cancer drugs. UV Spectrophotometric analysis is also included.

Dennis H. Leung et al. (2022)^[5] The rising tide of poorly soluble drug candidates has been a major problem for the pharmaceutical industry, leading to problems with bioavailability and absorption, exposure variability risk, and safe therapeutic index. Another crucial component that might allow patient-specific medications is the fast and accurate administration of individual doses of drugs. In this work, we detail the evolution of inkjet printing into a tool for precisely dosing insoluble medicinal compounds using readily accessible machinery. A thin film that is suited for distribution was printed and dispensed with stable suspensions of drug nanoparticles, despite difficulties caused by their poor solubility, which made it impossible to make liquid solutions. Proof that the drug nanoparticles were stable and kept their useful size is that they were able to be reconstituted after printing. This proves that inkjet printing, in the form of nanosuspensions, may be an easy and practical way to administer drugs that are not very soluble.

Strategies for RP-HPLC method development and optimization

In order to determine the quality of pharmaceutical pharmaceuticals, it is crucial to inspect them for contaminants in their formulations. Ensuring the delivery of safe and effective medications requires the identification and quantification of any impurity levels. Analytical chemists have substantial difficulties when trying to identify and quantify contaminants according to current standards. Impurities are substances that do not belong in the medicine but may form when it is being made, extracted, purified, or stored. There are three primary types of impurities: those that occur throughout the process, those that occur during deterioration, and those that are contaminants. The synthesis, extraction, or fermentation processes do not include any contaminants; rather, these impurities are introduced accidentally during processing or storage and are not connected to the medicine. Polymorphs and enantiomers may also be seen as contaminants under certain conditions. The most concerning impurities in biopharmaceuticals are those that might cause allergic reactions or other immunopathological consequences, as well as those that are poisonous and have a lot of unwanted biological activity1. No. 2. Completely purging a medicine of all contaminants is usually not doable from a financial standpoint. Nevertheless, in order to provide a consistently safe product, it is important to manage the amounts of all contaminants. Typically, only trace amounts of contaminants may be accepted; but, under very unusual circumstances, even trace amounts of contaminants are permissible. The control of organic contaminants in novel ICH Q3A(R2) 3 provides a comprehensive summary of medicinal compounds, whereas ICH Q3B(R2) 4 details novel medicinal items. Depending on the maximum daily dose of the drug substance and drug product, the following tables detail the reporting, identification, and 1 qualifying constraints or criteria for impurities.

 Table 1: Limits or thresholds for the purpose of documenting, locating, and certifying contaminants in novel pharmaceutical compounds

Maximum daily dose ^a (g/day)	Reporting threshol ^{b,c} (%)	Identification threshold ^c	Qualification threshold ^c
<u>≤</u> 2	0.05	0.10% or 1.0 mg/day intake (whichever is lower)	0.15% or 1.0 mg/day intake (whichever is lower)
>2	0.03	0.05%	0.05%

 Table 2: Limits or reporting, identifying, and qualifying impurity levels in novel pharmaceutical goods

Threshold	Maximum daily dose of	Threshold limit based on	
Threshold	drug product	total daily intake (TDI)	
Reporting	<u><</u> 1 g	0.1% TDI	
Reporting	>1 g	0.05% TDI	
	<1 mg	1.0% or 5µg TDI,	
Identification	<1 mg	whichever is lower	
	1.10 mg	0.5% or 20µg TDI,	
	1-10 mg	whichever is lower	
	$>10 \text{ mg}^{-2} \text{ g}$	0.2% or 2 mg TDI,	
	>10 mg ⁻² g	whichever is lower	
	>2 g	0.10% TDI	
Qualification	<10 mg	1.0% or 50 μg TDI,	
	<10 llig	whichever is lower	
	10,100 mg	0.5% or 200 µg TDI,	
	10-100 mg	whichever is lower	
	$>100 \text{ mg}^{-2} \text{ g}$	0.2% or 3 mg TDI,	
	>100 mg ⁻² g	whichever is lower	
	>2 g	0.15% TDI	

Toxicological concerns and process capabilities are the main factors that determine the upper limits for the different impurities in new medicinal compounds. Research on animals has shown that there is an optimal dosage that has no negative effects, ideally with pharmacological substances that have higher levels of impurities. This is transformed into a form that is comparable to the dosage that individuals take orally. Impurities in most drugs are reported as unidentified if they are more than 0.05%; identified if they are more than 0.10%; and toxicologically qualified if they are more than 0.15%. However, high-dose pharmaceuticals are an exception to this rule.

Toxicological qualification of impurities is typically completed at the time of drug marketing approval; however, if the synthetic process is altered in a way that regularly produces an impurity at a level higher than the qualification threshold, further preclinical toxicological testing may be necessary. Similarly, extra toxicological testing is often not necessary for pharmacological compounds sourced from a different supplier as long as they have the same impurity profile as the original product. But toxicological testing can be necessary for pharmacological drugs with new or existing contaminants higher than the qualifying criterion.

A medicine's active pharmaceutical ingredient (API) and any other substances used in its production are called excipients. The selected excipients, their concentration, and their interactions with the API 5 directly impact the biological, chemical, and physical components of the pharmaceutical product. Excipients may not have any effect on living organisms, however this is not always true from a chemical standpoint. Drug products may be stabilized or destabilized by the presence of excipients and contaminants in them. Without formal non-clinical safety assessment, ICH O3B (R2) defines the permissible amount of any particular contaminant or impurities that may be found in therapeutic products. The maximum permitted levels of contaminants in a pharmacological product are determined by the total daily dosage. To qualify, identify, and report drug product impurities-also called degradants or degradation productsthere are distinct restrictions. The level at which a certain impurity must be reported to regulatory authorities in order to warn them is called the reporting threshold. The level at which a certain contaminant must be identified analytically is called the identification threshold. Lastly, non-clinical toxicological testing is required to prove safety for the indicated impurity at the qualifying threshold. These upper limits are as a proportion of the total recommended daily dose of the drug or as the maximum permissible dose, whichever is less stringent.

In order to keep an eye on contaminants, most people use HPLC with UV detection. When possible, a reference standard or area/height percentage relative to the parent component may be used to quantify impurities. For complete drug material removal, it is essential to enhance HPLC techniques contaminants.

Analytical Method Development

One of the main areas of every drug development process is establishing and verifying analytical procedures. The steadiness, physical properties, identity, and purity of medicinal substances and pharmaceutical products may be better monitored and assured with the use of analytical procedures. The preclinical, clinical, and post-clinical stages may all make use of them. There may not be a way to identify the active pharmaceutical components and any contaminants in the drug product or raw drug material that are associated with the processing or degradation of the medicine. Therefore, new analytical techniques should be created with the intended usage in mind. To ensure that all necessary requirements have been satisfied, the designed approach is thoroughly validated. At different points in the regulatory submission process, validated analytical procedures become more important.

Examples of such metrics are detection limits, linearity, precision, accuracy, and range. analytical figures of merit that should be known in conjunction with the objectives or demands of the HPLC technique that has to be designed. Also, think about if you need to satisfy any regulations, whether you'll be using the technique to analyze lots of samples, or if you'll be transferring it to the production site. Sample throughput, analysis time, and instrument restrictions are some additional criteria that may be necessary.

The process of creating analytical procedures involves several considerations. The first thing to do is gather all the data you need regarding the analyte's physico-chemical characteristics (such as its solubility, pKa, and log P) and figure out what kind of detection method would work best for your study (the right wavelength, for example, for UV detection). Method development is impacted by sample preparation, which includes centrifugation, filtering, and/or sonication, as well as the type of diluent, as these factors

influence chromatography and analyte recovery. It is crucial to determine the solution stability in the diluent in the earliest stage of technique development. It will be much more difficult to build the procedure if the answer is unstable. The analyte's hydrophobicity and ionogenicity determine the mobile phase and gradient elution program choices, respectively. Because these two parameters are likely to affect the change in the analyte selectivity, particularly for ionizable chemicals, this is an important stage in developing the approach. When considering the bonded phase's stability at the mobile phase's operating pH, the kind of stationary phase is equally crucial. While it is possible to achieve a certain efficiency by adjusting the pH of the mobile phase, the impact of modifying the stationary phases is much less predictable.

pKa of the drug: Using pKa, the negative log of the acid dissociation constant, the Henderson-Hasselbalch equation explains how pH is derived as a measure of acidity in chemical and biological systems. You may use the equation to discover the equilibrium pH in an acid-base reaction or to estimate the pH of a buffer solution. The equation is given by:

$$pH = pK_a + \log_{10} \left(\frac{[A^-]}{[HA]}\right)$$

The molar concentration of the un-dissociated weak acid is denoted as [HA], the molar concentration of the acid's conjugate base is denoted as [A-], and the acid dissociation constant is denoted as pKa, which is equal to -log10 Ka.

It is crucial to know whether the analyte is ionogenic. Eluent pH has no bearing on analyte retention if the analyte molecule is neutral. If the analyte can be ionized, then finding its pKa or finding its value in the literature should be the next step. The ideal pH to start developing the technique at is one or two units below the analyte's pKa in the specific hydro-organic combination being used.

For ionizable chemicals, pH determines the log P value. As the pH drops, the log P values of acidic chemicals rise while those of basic ones fall. To make them less hydrophobic, basic substances need to keep their pH high since they become more polar at low pH. In contrast, acidic chemicals are better maintained at low pH because they become more hydrophobic. A straightforward principle for retention in reversed-phase HPLC states that a component's strength of retention on the column is directly proportional to its hydrophobicity.

The investigation is carried out for isocratic elutions by changing the aqueous phase's pH and seeing how it affects the retention time. A sigmodial dependency type is often the outcome, suggesting the presence of a single ionization center type. Because there are several ionization equilibria, the retention process will be affected by conflicting effects if there are acidic and basic ionization sites. Because of this, the total impact on retention at any given pH is pHdependent and species-specific. To determine the kind of stationary phase and organic content required for drug elution from a column, one must be familiar with the log P value, possible degradation products, and contaminants of the active pharmaceutical ingredient. In addition, knowing which buffer to use aids in the development of appropriate mobile phases. Analytes may remain in either their undissociated or dissociated forms with the help of a buffer. Obtaining the molecule mostly in the desired form requires the buffer's pH to be within two units on either side of the pKa value of the compound of interest. It is recommended to use buffers with a pH that is 2 units lower than the pKa of the acidic analytes in order to primarily produce undissociated species. In a similar vein, anions are more likely to form in buffers that are two pH units higher than their pKa. In order to get undissociated species, it is necessary to use buffers with a pH that is two units higher than the pKa of the basic analytes. Dissociated species (cations) are produced by buffers that are two pH units lower than the pKa. Here is a tabular list of the most frequent buffers used in HPLC separations. Within ±1 pH unit of their pKa, buffers should ideally work.

Table 3: List of commonly used buffers

S. No.	Type of buffer	рКа	Buffer range
1	Acetate	4.8	3.8-5.8
2	Ammonium	9.2	8.2 - 10.2
3	Borate	9.2	8.2 - 10.2
		3.1	2.1 - 4.1
4	Citrate	4.7	3.7 - 5.7
		5.4	4.4 - 6.4
5	Diethylammonium	10.5	9.5 – 11.5
6	Formate	3.7	2.7 - 4.7
7		2.1	1.1 - 3.1
	Phosphate	7.2	6.2 - 8.2
		12.3	11.3 - 13.3
8	Triethylammonium	10.7	9.7 – 11.7
9	Trifluoroacetate	0.5	1.5 - 2.5
10	Tris –(hydroxymethyl) aminomethane		7.3 – 9.3
11	Sulfonate	1.8 6.9	<1-2.8 5.9-7.9

To ensure that the columns can handle the injection load, it is crucial to utilize buffers of enough strength. Otherwise, chromatographic changes in ionic form can cause peak tailing.

The analyte retention periods are influenced by the molar strength of the buffer. The retention time has an inverse relationship with molar strength. In a perfect world, the buffer strengths would range from 0.01 to 0.20 M. The buffer's performance is determined by the concentration of the organic phase in the mobile phase. strength and type. Insignificant buffering activity is shown by buffers with low ionic strength. To reach the desired separations, it may be essential to raise the buffer's strength. It must be made clear that the mobile phase, medication solutions, or chromatography will not become cloudy or precipitated as a consequence of using stronger buffers. One possible first step is to expose the buffer to the highest organic phase concentration in the gradient program and see whether it precipitates in the column or system. whether it does, then the programme may proceed. To conduct the test, simply transfer 10 mL of mobile phase to two separate test tubes; chill one tube and place it in the fridge; heat the second tube in a water bath; and observe for precipitation.

If necessary, you may employ a variety of ion-pair reagents, such as tetra butyl ammonium hydrogen sulfate, butane

sulphonic acid, heptane sulphonic acid, etc. When standard solutions like switching up the stationary phase or adjusting the eluent ratios don't cut it, ion-pair reagents come into play to enhance peak form and prolong retention duration. An alkyl chain attached to an ionizable group is the building block of these chemicals. Ion pair reagents preferentially enhance retention of charged analytes when employed in reversed-phase mode with common hydrophobic HPLC phases. The length of the alkyl chain is an important factor for selecting the appropriate isovalent-pair reagent. Different chain lengths allow for the potential separation of the analyte. The counter-ion becomes more stable with increasing chain length, leading to an increase in retention. more hydrophobic. To resolve acidic compounds (species with a negative charge), alkyl triethyl amines might be used. For the resolution of analytes with a negative charge, other ion pair reagents such triphenyl amine, triheptylamine, and tetrabutylammonium phosphate are complementing reagents. When it comes to separating and resolving basic compounds, the sodium sulphonates are the go-to anionic counter-ions.

Drug solubility: The analyte shouldn't react with the diluent or solvent of choice, and it should be fully soluble in both. Drugs in their free-state and their salts will have varied solubilities in diluents depending on their physico-chemical composition. Analytes, or drugs, are often more soluble in water when they are in their salt form. Here are the general solubility requirements according to the USP and BP.

Table 4: Tests for solubility in USP and BP

Descriptive term	Part of solvent required per part of solute		
Very soluble	Less than 1		
Freely soluble	From 1 to 10		
Soluble	From 10 to 30		
Sparingly soluble	From 30 to 100		
Slightly soluble	From 100 to 1000		
Very slightly soluble	From 1000 to 10,000		
Practically insoluble	10,000 and over		

For components that elute early in the process, it is particularly important that the diluent closely match the mobile phase's starting ingredients in order to prevent peak distortion. An appropriate buffering of the diluent and mobile phase is necessary in the presence of an ionizable analyte.

The possibility of peak fronting or skewing arises when the solubility of the analyte in the diluent exceeds that about the make-up of the mobile phase. The durations of elution for acetonitrile, methanol, tetrahydrofuran (THF), and isopropanol are often closer to the void volume than for the other two. One possible solution to the problem of peak distortion caused by early eluting chemicals is to use cosolvent combinations. To rule out the possibility of an oncolumn degradation product or a coeluting chemical as the cause of peak skewing in an analyte, a diode array spectrum should be produced. Since the diluent effect is likely to blame for the distortion, spectral homogeneity of the compound may be inferred if the spectrum remains constant throughout this distorted peak. If this happens, we need to experiment with different diluent compositions to see how they affect peak form until we find one that doesn't skew.

The substance is first dissolved in a solvent that it is highly

soluble in, if the sample is insoluble in the diluent. Then, it is further diluted to the desired concentration.

If the sample solution exhibits a well-defined peak form, but the same solution, when injected again and again, displays a growing impurity peak, it might indicate that the sample is interacting with the diluent.

Selection of organic modifier: Drug molecule hydrophobic interactions with alkyl chain interactions on column packing material mostly govern separation in reverse phase chromatography. The optimal vital to the mobile phase's chromatographic composition to achieving most separations. This is because the quantitative and qualitative composition of organic and aqueous components may be tailored to produce a high degree of selectivity. For reversephase HPLC methods, hydro-organic mixtures are the mobile phases of choice. Methanol, acetonitrile, and mixtures of the two are the most prevalent organic modifiers. Minor selectivity modifications have also been achieved using other mobile phase modifiers such tetrahydrofuran, dimethyl formamide, and dimethyl sulfoxide. The latter solvents are seldom utilized because of their strong UV background absorption and severe backpressure limits. Analyze The concentration of organic modifiers in the mobile phase has a direct impact on retention in reversed-phase flow chromatography (RPLC).

The UV cut off for acetonitrile is less than 190 nm, whereas the UV cut off for methanol, ethanol, and isopropanol is less than 205 nm. Therefore, while working with these solvents, it is best to use detection wavelengths greater than 210 nm. Because lower viscosities allow for higher flow rates, they should be taken into account as an extra criterion when choosing an organic modifier for aquo-organic solvent mixes. Because of the decreased viscosity of wateracetonitrile mixtures compared to water-methanol eluents, quicker flow rates may be achieved when organic modifiers like acetonitrile are used to facilitate the creation of more rapid separation procedures.

Choice of stationary phase: When selecting a column to separate active components from process-related and degradation-related contaminants, it is important to keep the following factors in mind.

- 1. Packing material
- 2. Size and shape of the particles
- 3. Pore size and volume
- 4. Surface area
- 5. % of carbon loading
- 6. End capping
- 7. Length and diameter of the column

You may adjust and regulate each of the aforementioned parameters using a broad selection of columns to accomplish most chromatographic separations. In standard phase chromatography, columns packed with silica are often employed with non-polar mobile phases made of different organic solvents. Here, polarity characterizes the stationary phase. Its polar nature is imparted by the silanol group (Si - OH) discovered on the surface of silica. Alkyl chains like C6, C8, C18, nitrile, phenyl, and amino groups may be cross-linked with the Si-OH group to form a vast array of columns spanning a broad range of polarity are available for

use in reverse phase chromatography. Here are several examples of silica-based columns with varying degrees of crosslinking, arranged in ascending polarity order:

 $C18 < C8 < C6 < Phenyl < Amino < Nitrile (CN) < Silica \\ \leftarrow Non polar ----- Moderately polar ----- Polar \rightarrow$

Most organic and water-based mobile-phase solvents are compatible with silica-based columns that can endure high pressures. Their incompatibility with mobile phases and samples with pH levels below 2 and above 7.5 is, however, a concern. This is because silica may dissolve at pH levels greater than 7.5, while its siloxane bonds are severed at pH values lower than 2.0. Such instances need for packaging based on strongly cross-linked styrene-divinylbenzene. They work well with samples and mobile phase solvents ranging from 1 to 14. Due to their smaller average surface area, polymer-based columns typically have poorer efficiency for small molecules than silica-based columns. Columns made of polymers are another option. cannot survive the high system backpressures because of their lower mechanical strength.

The average diameter while describing the packing of an HPLC column, the particle size is employed. The column back-pressure grows in relation to the square of the particle diameter and efficiency decrease in inverse proportion. Both the column back-pressure and efficiency improve with decreasing particle size. For complicated mixed samples with comparable components, small-particle columns (with a particle size ranging from 3 to 4.6 μ) are the best option. Because they are more efficient, have greater column stability, and lower back-pressures than irregularly shaped particles, spheroidal or spherical particles are most often used in modern methodology for high-performance liquid chromatography (HPLC).

Typical pore size within a packing material's individual particles phase is called its pore size. Selecting an adequate pore size for the column packing material requires consideration of the analyte's size. One way to roughly measure the size of a molecule is to look at its molecular weight. Analytes with molecular weights below 3,000 should typically be filtered using a pore size of 100 Å or less. A pore size of 100-130 Å provides the highest efficiency for samples whose molecular weight is within the range of 3,000-10,000. Particles in the stationary phase have an inverse relationship between their surface area and pore size. A high surface area is indicative of a packing material with tiny pores. The capacity and retention periods of analytes are both improved by materials with a high surface area. Packings with a low surface area allow for speedier equilibration and are often used for compounds with a high molecular weight.

The amount of empty space inside a particle is measured by its pore volume. The mechanical strength of a packing may be accurately determined by measuring its pore volume. When comparing particle strength, larger pore volumes are usually indicative of weaker particles. It is generally advised to use pore volumes of 1.0 mL/g or lower for the majority of HPLC separations. For size-exclusion chromatography and low-pressure techniques, pore volumes larger than 1.0 mL/g are ideal.

The carbon load of a stationary phase is its carbon

As a secondary bonding step, end-capping a column covers the surface of the silica with unreacted silanols. Typically, trimethyl silyl groups are used to substitute them. Materials with end caps on them prevent any unanticipated secondary interactions. The selectivity of end-capped materials differs from that of non-end-capped columns. This selectivity variation, which allows for management of subsequent silanol interactions, may improve polar analyte separations.

Conclusion

Emtricitabine, Tenofovir, A stability-indicating RP-HPLC approach was used to evaluate Rilpivirine in both pharmaceutical and bulk medication dose form. According to the rules set forth by the ICH, the approach underwent validation. The approach was determined to be dependable, strong, exact, steady, precise, and robust. It was determined from the degradation experiments that the medications remained stable under stress. Using the proposed method is standard procedure for routine and quality control examination of tablet formulations to simultaneously estimate Emtricitabine, Tenofovir, and Rilpivirine.

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