Analytical Method Development and Validation for the Estimation of the Azilsartan Medoxamil by RP-HPLC Method in Bulk & Pharmaceutical Dosage Form

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ABSTRACT

In this study, a straightforward, accurate, and sensitive RP-HPLC method was created and validated for the verification of the Azilsartan medoxamil. It is an angiotensin II receptor antagonist used to treat adult patients with high blood pressure.

Results of the analysis were good after being validated for accuracy, precision, LOD, and LOQ.

The suggested procedure is quick, easy, and appropriate for routine analysis.

KEYWORDS: Azilsartan medoxamil, Methanol: water, Spectroscopy, validation, LOD, LOQ

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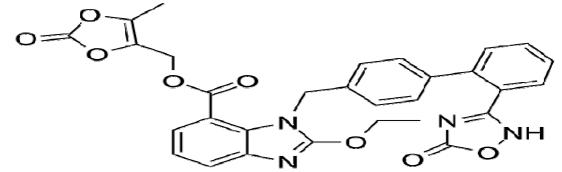
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INTRODUCTION:

Azilsartan medoxamil is an antihypertensive medication used to treat high blood pressure. Vasopressor hormone acts on the angiotensin receptor, preventing vasoconstriction and lowering blood pressure. It is mostly used to treat high blood pressure. Azilsartan medoxamil is a benzimazole 4carboxylic acid that is 2-ethoxy- 3-4-2-5-oxo-2H- 1,2,4-oxidizole-3-phenylmethyl. Azilsartan medoxamil is soluble into the methanol and ethanol.

Edarbi tablet (AZL), which was approved by the USA Food and Drug Administration on February 15, 2011, is used to treat adult hypertension. The dose range for Azilsartan medoxamil is 40 mg to 80 mg. Adults should take 80 mg of the recommended dosage.





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Literature survey reveals. The azilsartan medoxamil can be estimated by, RP-HPLC and spectroscopic method. The scope of present investigation were to developed and validate spectroscopy method for qualitative and qualification of azilsartan medoxamil in pharmaceutical dosage form.

MATERIALS AND METHOD:

Materials:

Azilsartan medoxamil standard drug was used. Analytical grade chemicals and solvents was supplied by from Loba Chemicals Pvt. Ltd, Mumbai. Distilled water is used to prepare all solutions. freshly prepared solutions are always used

Equipments:

The UV-spectrophotometry (Jasco UV visible detector 2075) with data processing system (Borwin chromatography software (version 1.50) was used. In a quartz cell measuring 200-400 nm, the sample solution was recorded in comparison to a solvent blank. The citizen electronic balance (Shimadzu AY-250) was used for weighing the sample. An ultrasonicator bath (Prama solutions for laboratory) was used for sonicating the drug sample.

The model PU 2080 plus intelligent HPLC pump was used, along with Rheodyne sample injection port with 50 microlitter loop is used.

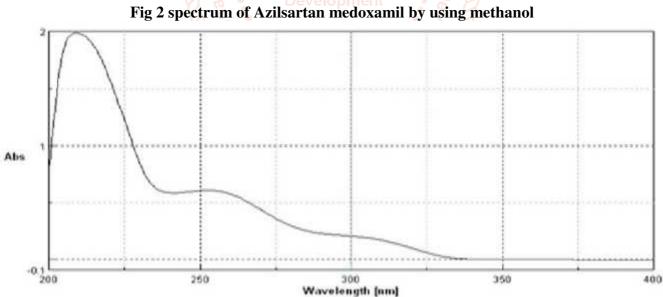
Method development:

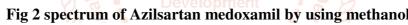
Preparation of standard stock solution:

Making a standard stock solution The standard stock solution of the medication was made by mixing 10 ml of methanol with 10 mg of the drug to make a 1000 g/ml concentration (A). A working standard solution containing 100 g/ml of azilsartan medoxomil in methanol was created from the equivalent standard stock solution (B). To obtain the final solution of Azilsartan Medoxomil (10 g/ml), additional dilution in methanol was made from this.

Selection of Detection Wavelength:

From the standard stock solution further dilutions were done using methanol and scanned over the range of 200 -400 nm and the spectra was obtained (Fig. 2). It was observed that drug showed considerable absorbance at 249 nm.





Preparation of calibration curve:

From the standard stock solution fresh sample is pipette out suitable diluted with Methanol: water, Methanol: sodium hydrogen phosphate, Methanol: sodium dihydrogen phosphate.

The solution was scanned under spectrum mode for 200 -400 nm. After few trials methanol: Sodium dihydrogen phosphate buffer in the ratio of 90:10 v/v was chosen as as the mobile phase which have the good resolution and acceptable peak parameters. A calibration graph of the absorbance versus the concentration of the drug was ploted and represented in figure 3.

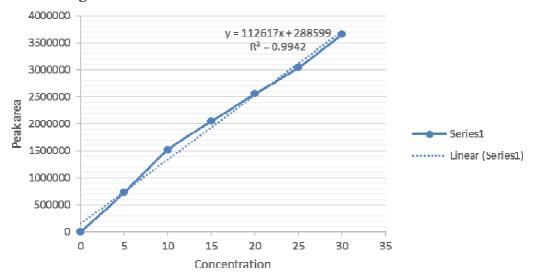


Fig 3 calibration curve of Azilsartan medoxamil at 249 nm

Method validation:

Linearity:

The validation of Azilsartan medoxamil was validated according to the ICH guidelines

The developed method validates as per the ICH guidelines. The plot of absorbance verses concentration is shown in figure 3. It can be seen that plot is linear in concentration rane 5 -25 μ g/ml with correlation coefficient (R²) of 0.9942.

Precision:

The precision is calculated by using intraday and interday precision. It was determined by measurement of the absorbance for the three times on same day and on three different days The relative standard deviation for replicates of sample solution was less than 2% which meet accepatance criteria. The obtained results are as follows.

Development

I able 1 Intraday precision by by						
Conc (µg/ml)	Area	Amount recovered (µg/ml)	% Recovery	Average % Recovery	SD	% RSD
10	1413430.19	9.988	99.881	7		
10	1422582.89	10.069	100.694	100.694	0.571	0.567
10	1410184.07	9.959	99.593			
20	2563761.89	20.203	101.013			
20	2523351.84	19.844	99.219	99.219	1.269	1.279
20	2578556.87	20.334	101.670			
25	3085154.67	24.832	99.330			
25	3076488.15	24.755	99.022	99.022	0.634	0.640
25	3110821.41	25.060	100.241			

Intra-day Precision:

Inter-day Precision

Table 2 Inter-day Precision

Conc (µg/ml)	Area	Amount recovered (µg/ml)	% Recovery	Average % Recovery	SD	% RSD
10	1412445.79	9.979	99.794			
10	1412096.29	9.976	99.763	99.763	0.149	0.149
10	1409381.038	9.952	99.522			
20	2534307.62	19.941	99.706			
20	2565701.83	20.220	101.099	101.099	0.960	0.950
20	2524234.73	19.852	99.258			
25	3114242.98	25.091	100.363			
25	3102893.60	24.990	99.960	100.339	0.368	0.367
25	3123578.29	25.174	100.695			

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LOD AND LOQ:

The limit of detection and limit of quantification of the drug were separately determined based on method of the intercept and the average value of the slope (0.652 for LOD and 1.997 for LOQ)

LOD and LOQ are calculated from the formula: -

$$LOD = \frac{3.3 \sigma}{s} \qquad LOQ = \frac{10 \sigma}{s}$$

Where, σ = standard deviation of Y intercept = 22265.29 S = slope of the calibration curve = 112616.67 LOD = 0.652 µg/ml LOQ = 1.977 µg/ml

Accuracy:

To check accuracy of the method, recovery studies were carried by spiking the standard drug to the Azilceda – 40 tablet sample solution, at three different levels around 50, 100 and 150 %. Basic concentration of sample solution chosen was 10 μ g/ml. % recovery was determined from linearity equation. The results obtained are shown in table 4.

Table 4: accuracy study					
			1976627.83	14.988	
50%	10	5	1981105.24	15.028	99.924 ± 0.233
			1972265.63	14.949	J.
	2	7.0	2562436.23	20.190	, Vr
100%	10	10	2530212.26	19.904	100.641 ± 0.997
	B.	0	2573761.89	20.291	
	8	•••	3085114.64	24.831	, S
150%	10	15	3121154.67	25.151	99.906 ± 0.649
	Zõ		3098172.55	24.947	nd
	2 7		Kesearci	lanu	

Recovery studies of Azilsartan Medoxomil

Optical Parameters:

Development Table 5: Ontical Parameters

Table 5: Optical Parameters				
Sr.no	Parameter	Data		
1	λmax	249nm		
2	Correlation coefficient	0.9942		
3	Slope	112616.67		
4	Intercept	22265.29		
5	Limit of detection	0.652 µg/ml		
6	Limit of quantification	1.977 µg/ml		

Result and discussion:

In the process of method development for the Azilsartan medoxamil different mobile composition, different buffers. The satisfactory result with mobile phase composition methanol: Sodium dihydrogen phosphate buffer pH (5) in the ratio of 90:10 v/v. The column Hi Q silc ₁₈ 250 mm with the flow rate 1ml/min. The above method satisfied all the system solubility parameters like, resolution, tailing factor, plate count within range. Calibration plot was done and obtained linearity equation was y = 112617 +288599.

Conclusion:

The simple RP-HPLC method for the determination of the Azilsartan medoxamil have been developed and validated as per the ICH guidelines. The developed method is found to be sensitive, accurate, and reproducible and can be used for the quality analysis of the Azilsartan medoxamil in bulk and pharmaceutical dosage form.

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