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DEVELOPMENT AND VALIDATION OF ANALYTICAL METHOD FOR SIMULTANEOUS ESTIMATION OF MIGLITOL AND METFORMIN HYDROCHLORIDE IN TABLET DOSAGE FORM.

P. Nilam *, P. Pinkal and S. Khushbu

Department of Quality Assurance, Parul Institute of Pharmacy and Research, Parul Trust Limda, Ta. Waghodia, Dist. Vadodara 391760, Gujarat, India

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Metformine Hydrochloride, Miglitol, RP-HPLC method

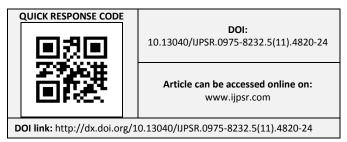
Correspondence to Author: Nilam Patel

Department of Quality Assurance, Parul Institute of Pharmacy and Research, Parul Trust Limda, Ta. Waghodia, Dist. Vadodara 391760, Gujarat, India

E-mail:patelnilam.988@gmail.com

ABSTRACT: A simple, rapid and precise stability indicating reverse phase high performance liquid chromatographic method has been developed for simultaneous estimation of Miglitol and Metformine Hydrochloride in their tablet dosage form. Chromatography was performed on a Phenomenex ODS C18 (250 X 4.6 mm) 5µm column using Water: Methanol (50:50, v/v) pH: 4 mixture as a mobile phase. The detection was carried out at 235 nm with a flow rate of 1.0 mL/min. The retention times were 4.807 and 3.273 minutes for Miglitol and Metformine Hydrochloride, respectively. The linearity of the method was excellent over a concentration range 2.5 to 7.5µg/mL for Miglitol and 25 to 75µg/mL for Metformine Hydrochloride. The correlation coefficient was 0.997 and 0.999 for Miglitol and Metformine Hydrochloride, respectively. The limit of detection was 0.6607µg/mL and 1.740µg/mL for Miglitol and Metformine Hydrochloride, respectively. The limit of quantitation was 2.0021µg/mL and 5.2736µg/mL for Miglitol and Metformine Hydrochloride, respectively. The relative standard deviation values for repeatability, intraday precision and interday precision studies were less than 2 % and % recovery was between 98 % to 102 % for both drugs.

INTRODUCTION: Miglitol (MIG) is chemically (2R, 3R, 4R, 5S)-1-(2-hydroxyethyl)-2-(hydroxy methyl) piperidine-3, 4, 5-triol an oral anti-diabetic drug. It reversibly inhibits membrane-bound intestinal alpha-glucosidehydrolyze enzyme which hydrolyzes oligosaccharides and disaccharides to glucose and other monosaccharides in the brush border of the small intestine. In diabetic patients, this enzyme inhibition results in delayed glucose absorption and lowering of postprandial. Metformin (MET) is chemically N, Ndimethylimidodicarbonimidicdiamide.



It is abiguanide class of oral anti-diabetic drugs. It improves hyperglycemia primarily through its suppression of hepatic glucose production and activates AMP-activated protein kinase. It also increases insulin sensitivity, fatty acid oxidation, peripheral glucose uptake and decreases absorption of glucose from the gastrointestinal tract.

Literature review revealed that several spectroscopic and chromatographic methods have been reported for estimation of Miglitol alone and in combination with other drugs also for Metformin Hydrochloride alone.

However, no method is reported for simultaneous estimation of these two drugs by HPLC in combined dosage form

MATERIALS AND METHODS: Chemicals and reagents:

Miglitol and Metformin in the form of gift samples were kindly supplied by Glenmark. Mumbai and zydus cadila Ahmedabad respectively. A combination of Miglitol (50 mg) and Metformin (500 mg) in tablet formulation was procured from local pharmacy (Mignar 50-MF Glenmark Ltd).

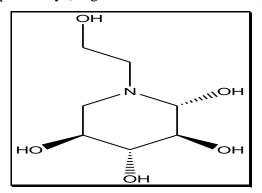


FIGURE 1: STRUCTURE OF MIGLITOL

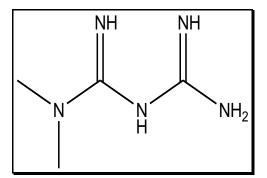


FIGURE 2: STRUCTURE OF METORMIN HYDROCHLORIDE

Instrument and chromatographic condition:

For the Chromatographic analysis, Shimadzu HPLC system was used that was equipped with a UV detector. The separation was achieved on RP C18 column {125 x 4.6 mm, 5 micron particle size} using KH2PO4 water: methanol (50:50 v/v) pH4 as mobile phase. The pH of mobile phase was adjusted to 5 with OPA. The flow rate was 1.0 ml/min.

Preparation of Standard Stock Solution:

Accurately weighed 50 mg of Metformin HCl and 5 mg of Miglitol were transferred into 100 ml volumetric flask, to which 50 mL of Methanol was added and sonicated for 15 min, dissolved completely and diluted up to the mark with Methanol to give a stock solution containing 500 μ g/mL of Metformin HCl & 50 μ g/mL of Miglitol.

Preparation of Standard Working Solution:

Working solution was prepared by taking 1 ml of above stock solution into 10 ml volumetric flask and diluting it up to the mark with Methanol to get the final working solution containing 50 μ g/mL of Metformin HCl & 5 μ g/mL of Miglitol.

Method Validation:

The proposed method was validated in compliance with ICH guidelines for system suitability, linearity, accuracy, precision, specificity, robustness parameters by the following procedures.

System suitability:

Six replicates of solution containing 50 μ g/mL of Metformin Hydrochloride and 5 μ g/mL of Miglitol were analysed. % RSD of Peak area was calculated.

TABLE	1:	SYSTEM	SUITABILITY	RESULTS	FOR
METFO	RM	IN HYDRO	OCHLORIDE AN	ND MIGLIT	OL

T I I X	Peak Area				
Injection No.	MET	MIG			
1	2695.278	619.291			
2	2681.583	620.531			
3	2706.074	609.293			
4	2711.476	623.023			
5	2697.918	619.908			
6	2703.337	621.173			
Mean	2699.277	618.86			
SD	10.4155	4.8638			
% RSD	0.385	0.7			

Linearity:

Linearity of developed RP-HPLC method was studied by obtaining calibration curves of MET and MIG, ranging from 25-75 µg/mL for MET and 2.5-7.5 µg/mL for MIG. **Table 2** shows the linearity data of MET and MIG. The linearity regression coefficient (r^2) values were found to be 0.999 and 0.997 for MET and MIG. Each Linearity equation obtained for MET and MIG were y = 54.24x - 29.87, and y = 121.4x + 0.993 respectively. Figure 3 and 4 shows calibration curves for MET and MIG respectively. High level of correlation coefficient indicates good linearity.

TABLE 2: LINEARITY DATA OF METFORMINHYDROCHLORIDE AND MIGLITOL

I	МЕТ	MIG		
Con. µg/ml	Peak area	Con. µg/ml	Peak area	
25	1340.464	2.5	307.931	
37.5	1979.133	3.75	454.708	
50	2706.05	5.0	621.797	
62.5	3332.042	6.25	725.655	
75	4054.368	7.5	931.652	

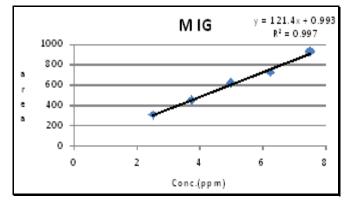


FIGURE 4: CALIBRATION CURVES FOR MIG

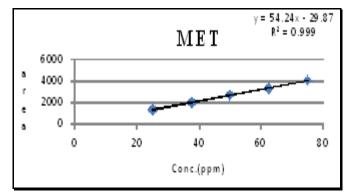


FIGURE 3: CALIBRATION CURVES FOR MET

Accuracy:

The accuracy of the developed method was evaluated in triplicates by recovery studies at three different concentration levels of 80%, 100 %, and 120% for MET, MIG respectively. Known amounts of standard drug concentrations were added to the sample and peak area was determined.

The mean percentage recovery values are shown in **Table 3**. The mean recovery of the drugs was found to be in the range of 98- 102% indicating a high degree of accuracy for the developed method.

TABLE 3: ACCURACY RESULTS

Drug	Level	Amt of Std taken (µg)	Amt of Std Recovered (µg)	Mean % Recovery
MET	80	45 50	44.75	99.75
NEI	100 120	50 55	49.80 59.46	99.70 99.67
	80	4.5	4.40	99.98
MIG	100	5	4.90	99.83
	120	5.5	5.41	99.91

Precision:

The precision was measured by intraday and interday. The % RSD of MET, MIG was calculated. The calculated values of % RSD for

MET and MIG are mentioned in **Table 4 & 5**. The results indicated a high degree of repeatability.

TABLE 4: INTRADAY PRECISION DATA FORMETFORMIN HYDROCHLORIDE AND MIGLITOL

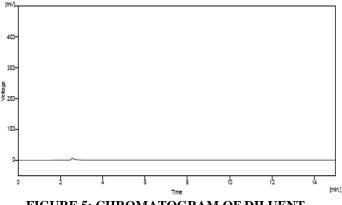
Drug	Target	Peak	Average	SD	%RSD
	conc.	Area			
MET	(µg/ml) 25	131.506	1327.71	14.18	1.068161
	25	1333.83			
	25	1337.82			
MIG	2.5	305.778	612.97	0.964	0.315007
	2.5	305.545			
	2.5	307.32			
MET	50	2665.062	4026.22	18.67	0.695355
	50	2692.62			
	50	2700.682			
MIG	5	617.433	923.5223	10.54	1.720982
	5	600.926			
	5	620.559			
MET	75	3998.035	4026.226	25.15141	0.624689
	75	4034.278			
	75	4046.366			
MIG	7.5	925.121	923.5223	7.210172	0.780725
	7.5	915.647			
	7.5	929.799			

TABLE5:INTERDAYPRECISIONDATAFORMETFORMINHYDROCHLORIDEANDMIGLITOL

Drug	Target conc. (µg/ml)	Peak Area	Average	SD	%RSD
	25	1324.543			
MET	25	1335.167	1330.727	5.522386	0.41499
	25	1332.47			
	2.5	306.085			
MIG	2.5	302.256	304.81	2.21183	0.725642
	2.5	306.089			
	50	2669.724			
MET	50	2695.317	2684.974	13.48349	0.502183
	50	2689.88			
	5	618.052			
MIG	5	607.103	614.4103	6.328348	1.029987
	5	618.076			
MET	75	4006.444	4024.98	16.56048	0.411442
	75	4038.317			
	75	4030.18			
	7.5	926.048			
MIG	7.5	908.549	920.2257	10.1123	1.098894
	7.5	926.08			

Specificity:

Chromatogram of only diluent was taken to check the interference of diluent with the peaks of MET and MIG at the retention time of respective drugs. There was no peak detected at retention time of MET 3.273 min and MIG 4.807 min. so, proposed method is specific in nature





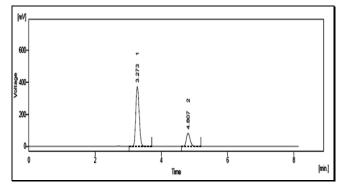


FIGURE: 6 CHROMATOGRAM OF SAMPLE SOLUTION

LOD and LOQ:

The LOD and LOQ were calculated from following equation:

 $LOD = 3.3 \times (SD/Slope)$

 $LOQ = 10 \times (SD/Slope)$

Where, SD = Standard deviation of the Y-intercepts of the 5 calibration curves.

Slope = Mean slope of the 5 calibration curves. The results obtained are shown in Table 6.

TABLE 6: LOD AND LOQ FOR METFORMINHYDROCHLORIDE AND MIGLITOL

Drug	LOD	LOQ
MET	1.7403	5.2736
MIG	0.6607	2.0021

Robustness:

To evaluate the robustness of the developed RP-HPLC method, small deliberate variations in the optimized parameters were made in chromatographic conditions like of pH, flow rate and wavelength. The effect of change in pH, flow rate and wavelength of detection on retention time and tailing factor were examined. The values obtained are mentioned in **Table 7**. The method was found to be unaffected by the small changes like \pm pH, \pm 0.1 ml/min in flow-rate of mobile phase and \pm 1 nm in detection wavelength.

TABLE 7: RESULTS OF ROBUSTNESS	TABLE 7:	RESUL	JTS OF	ROBUST	VESS
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Parameters varied	Drug name	System suitability parameters (n=3)			
		Mean Peak Area ± %RSD	Tailing factor± %RSD	Resolution ± %RSD	
pH 4.1	MET MIG	2582.92±0.61 590.73±1.64	1.290±0.132 1.283±0.234	7.167 ±0.211	
рН 3.9	MET	2773.54±0.91	1.266 ±0.687	7.153±0.168	
	MIG	635.08±1.13	1.284 ± 0.743		
At	MET	2634.70±0.93	1.308 ± 0.624	7.113±0.168	
Wavelength 336	MIG	602.35±1.38	1.284±0.483		
At	MET	2767.80 ± 0.75	1.277 ± 0.458	7.167 ± 0.239	
Wavelength 334	MIG	634.94±0.91	1.305±0.639		
At flow rate	MET	$2635.75{\pm}1.09$	1.290 ± 0.172	7.134 ± 0.327	
1.1ml/min	MIG	604.64±1.02	1.279±0.234		
At flow rate	MET	2797.68 ± 0.88	1.286 ± 0.216	7.140 ± 0.571	
0.9ml/min	MIG	641.27±1.02	1.310±0.389		

RESULT AND DISCUSSION: Optimized chromatography condition:

Chromatographic conditions were screened for mobile phase composition, mobile phase proportion, pH and flow rate Finally, mobile phase of Water: Methanol (pH 4) in the ratio of 50:50 v/v was optimized to give symmetric peak with short runtime at UV detection wavelength of 235 nm and flow rate at 1.0 mL/min was found to be appropriate with adequate separation between the two drugs. Chromatogram of MET, MIG at chromatographic optimized condition was recorded, the runtime was 4 min and the retention times of MET, MIG were found to be 3.273 and 4.807 min.

Assay:

Twenty tablets were weighed and finely powdered. The powder equivalent to 50 mg of Metformin Hydrochloridee and 5 mg of Miglitol was weighed accurately and transferred to volumetric flask of 100 ml capacity and 10 ml of mobile phase was transferred to it and sonicated for 15 min. The flask was shaken and volume was made up to the mark Nilam et al., IJPSR, 2014; Vol. 5(11): 4820-4824.

with mobile phase. The above solution was filtered through whatman filter paper (0.45μ) . 1 ml of above solution was taken and transferred to 10 ml volumetric flask. Volume was made up to the mark with the mobile phase to give a solution containing $50\mu g/mL$ of Metformin Hydrochloride and $5\mu g/mL$ of Miglitol.

From the peak area obtained for MET, MIG, the amount of the drug in the sample was calculated and was found to be 101.9% for MET, and 95.9% for MIG.

CONCLUSION: The proposed HPLC method was found to be economical, simple, sensitive, accurate, precise, specific and robust and can be used for the routine quality control analysis of MET, MIG in bulk as well as in tablet formulation.

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