Journal of Research in Pharmacy

Development and Validation of Stability-Indicating RP-Hplc Method for Simultaneous Determination of Canagliflozin and Metformin in Fixed-Dose Combination

Nayeem KHAN ¹* ^(b), Aejaz AHMED ¹ ^(b), Majaz QAZI ² ^(b), Yaasir Ahmed ANSARI ¹ ^(b), Afsar SHAIKH ³ ^(b), Ayyaj A. BADGIRE ⁶ ^(b), Mohd SALMAN ⁷ ^(b), Noosrat Jahan KHAN ⁸ ^(b)

- ¹ Department of Quality Assurance, Faculty of Pharmacy, KBC North Maharashtra University, Jalgaon, 425002, India.
- ² Department of Pharmacognosy, Faculty of Pharmacy, KBC North Maharashtra University, Jalgaon, 425002, India.
- ³ Department of Pharmaceutics, Faculty of Pharmacy, KBC North Maharashtra University, Jalgaon, 425002, India.
- ⁴ Department of Marketing and Sales, Torrent Pharma, Ahmedabad, 380009, India.
- * Corresponding Author. E-mail: <u>khaaannaeem23@gmail.com (N.K)</u>; Tel. +91-776-795 19 93. Fax: (+91) 2567-252815

Received: 23 September 2022 / Revised: 14 November 2022 / Accepted: 14 November 2022

ABSTRACT: A new HPLC method has been developed and validated with different parameters for the estimation of Canagliflozin and Metformin in Fixed-Dose Combination. The chromatograms were developed using a mobile phase of Methanol: 0.1 % OPA in water (35:65) with a flow rate of 0.7 ml/min. C18 Column of 4.6 x 100 mm dimension was used as a stationary phase, particle size 5µm. The detection was carried out at 245 nm. The method was validated according to ICH guidelines for linearity, precision and Repeatability, Robustness, LOD, and LOQ. The response was found to be linear in a concentration range of 100-500 µg/ml for Metformin and 10-50 µg/mL for Canagliflozin. The stability studies of Metformin and Canagliflozin were also done through the exposure of analyte solution to different stress conditions. The developed HPLC method of Metformin and Canagliflozin was simple, precise, accurate, reproducible, and therefore suitable for routine analysis of drugs in a dosage form.

KEYWORDS: HPLC; Method Development; Method Validation; Forced degradation; Canagliflozin; Metformin.

1. INTRODUCTION

Different analytical methods have been reported for single-drug formulations but due to complexity in the multi-component formulation, method development is a challenge for the analytical chemist. The different instrumental techniques employed for the analysis of drugs are spectra-photometry, gas-liquid chromatography (GLC), high-performance thin-layer chromatography (HPTLC), high-performance liquid chromatography (HPLC), etc. These methods are based upon the measurement of specific and nonspecific physical properties of the substances [1-6]. In the RP-HPLC method, the mobile phase is polar and the stationary phase is non-polar. Chromatographic separation in HPLC is a result of the specific interaction of drugs with a mobile and stationary phase [7-10]. In the current study, Canagliflozin and Metformin were studied. Canagliflozin {chemically is a (2S,3R,4R,5S,6R)-2-[3-[[5-(4-fluorophenyl)] thiophen-2-yl] methyl]-4-methylphenyl]-6-(hydroxymethyl)oxane-3,4,5-triol} is a Sodium-glucose transporter 2 (SGLT2) with antihyperglycemic activity. The sodium-glucose co-transporter2 (SGLT2), is found in the proximal tubules of the kidney and reabsorbs filtered glucose from the renal tubular lumen. Metformin {chemically is a 3-(di-amino methylidene)-1,1-dimethylguanidine]is anti-diabetic drug [11-15]. The main mechanism of action of metformin is a reduction of hepatic glucose output, largely by inhibiting hepatic gluconeogenesis. Metformin also shows intestinal absorption of sugars and improves peripheral glucose uptake and utilization [16-18].

How to cite this article: Khan N, Ahmed A, Qazi M, Ansari YA, Shaikh A, Badgire AA, Salman M, Khan NJ. Development and Validation of Stability-Indicating RP-Hplc Method for Simultaneous Determination of Canagliflozin and Metformin in Fixed-Dose Combination. J Res Pharm. 2023; 27(3): 1234-1241.

Aim and Objectives:

- To develop Stability-Indicating RP-HPLC Method for Simultaneous Determination of Canagliflozin \checkmark and Metformin in Fixed-Dose Combination.
- To validate developed RP-HPLC Method for Simultaneous Determination of Canagliflozin and \checkmark Metformin in Fixed-Dose Combination.
- To perform a forced degradation study. ✓

3. RESULTS AND DISCUSSION:

3.1 Optimization of chromatographic condition (Method Development):

The mixtures of drugs were taken in different combinations of mobile phase for chromatographic study. The various mobile phase was tried, finally, methanol and water (0.1% with OPA) in the ratio of 35:65 were kept constant throughout the study. It was shown in Table 1 and figure 1.

Sr. No.	Instrument/Equipment	Optimized condition
1	HPLC	Agilent (S.K)Gradient System UV Detector
2	Software	Chemstation
3	Column	(Agilent C18 Column (4.6mm x 100mm)
4	Particle size packing	5 μm
5	Stationary phase	C-18 (Agilent)
6	Mobile Phase	MEOH : Water (0.1% with OPA) 35 : 65
7	Detection Wavelength	245 nm
8	Flow rate	0.7 ml/min
9	Temperature	25°C
10	Sample size	20 µl
11	pH	3.0
12	Run Time	10 min
13	Filter paper	0.45 μm

Table 1. Optimized Chromatographic conditions



Figure 1: Chromatogram of Method Development

3.2 HPLC Method Validation:

3.2.1 Calibration Experiment (Linearity study)

While studying linear regression analysis, it shows a linear relationship between peak areas and concentrations in the range 100-500 μ g/ml for Metformin and 10-50 μ g/mL for Canagliflozin. Table No. 2 and 3 depict the calibration data of Metformin and Canagliflozin respectively. The respective linear equation for Metformin was y = 25.216 X + 2031.9 and Canagliflozin equation y= 22.948 X + 25.341 where x is the concentration and y is area of peak. The correlation coefficient was 0.999 and 0.999. The calibration curve of Metformin and Canagliflozin is depicted in Figure 2 and Figure 3.







Figure 3: Calibration curve of Canagliflozin.

3.2.2. Accuracy

Recovery studies were performed to validate the accuracy of the developed method. To pre-analyze tablet solution, a definite concentration of standard drug (80%, 100%, and 120%) was added and then its recovery was analyzed. Statistical validation of recovery studies is shown in Table 2.

Table 2. Resul	lt of Recovery	Data for	Metformin	and	Canagliflozin
----------------	----------------	----------	-----------	-----	---------------

Method	RP-HPLC					
Drug	Metformin			Canagliflozin		
Level (%)	80 %	100 %	120 %	80 %	100 %	120 %
Amount added (ug/ml)	80	100	120	8	10	12
Absorbance Mean *±S.D.	180.25±0.27	201.99±0.16	217.66±0.83	18.00±0.12	20.13±0.094	22.03±0.64
Amount recovered Mean *	80.25±0.27	101.99±0.16	117.66±0.83	8.00±0.12	10.00±0.094	12.03±0.64
% Recovery Mean *	100.31±0.3	101.99±0.16	98.05±0.70	100.00±1.6	101.29±0.94	100.21±0.5

*mean of each 3 reading for RP-HPLC method

Accuracy of RP-HPLC method Spectrophotometric method is ascertained by recovery studies performed at different levels of concentrations (80%, 100%, and 120%). The % recovery was found to be within 99-101%.

3.2.3. System suitability parameters :(Ruggedness)

To ascertain the resolution and reproducibility of the proposed chromatographic system for estimation of Metformin and Canagliflozin system suitability parameters were studied. The result is shown in Table 3.

Repeatability studies on the RP-HPLC method for Metformin and Canagliflozin were found to be, the %RSD was less than 2%, which shows a high percentage amount found in between 99.91 % to 100.25 % indicates the analytical method that concluded. (Table 3)

Table 3. Repeatability studies on RP-HPLC for Metformin and Canagliflozin.

Method	RP-HPLC	
Drug	Metformin	Canagliflozin
Conc. (mg/ml)	300	30
Dools area	9712.20	707.54
Геакагеа	9704.41	700.24
Mean	9708.31	703.90
Amount found (mg)	304.53	29.58
% Amount found	101.51	98.60
% RSD	0.072	0.76

3.2.4. Precision

The method was established by analyzing various replicates standards of Metformin and Canagliflozin. All the solution was analyzed thrice to record any intra-day & inter-day variation in the result that concluded. The result obtained for intraday and interday precision is shown in Table 4.

Table 4: Result of Intrada	y and Inter da	y Precision studies	of Metformin and	Canagliflozin
----------------------------	----------------	---------------------	------------------	---------------

	Drug	Conc. (µg/ml)	Intrada	ay Precision	Interday Precision	
Method			Mean± SD	% Amount Found	Mean± SD	% Amount Found
		200	7146.13±0.36	101.45	980.91±0.46	97.05
	MET	300	9670.10±0.39	101.01	1507.03±0.11	98.48
		400	12352.35±0.88	102.35	1940.00±0.91	98.74
КГ-ПГLС Mathad		20	470.62±1.67	97.05	480.62±1.67	99.23
Method	CAN	30	703.10±2.13	98.48	723.10±2.13	101.39
		40	930.40±1.87	98.74	930.40±1.87	98.36

*Mean of each 3 reading for RP-HPLC method

3.2.5. Robustness

The Robustness of a method is its ability to remain unaffected by small deliberate changes in parameters. To evaluate the robustness of the proposed method, small but deliberate variations in the optimized method parameters were done. The effect of changes in mobile phase composition and flow rate, wavelength on retention time, and tailing factor of drug peak was studied.

The mobile phase composition was changed in 34:66 and 36:64 proportion and the flow rate was varied by (± 0.2 ml/min), and wavelength change (± 2 nm) of optimized chromatographic condition. The results of robustness studies are shown in Table 5. Robustness parameters were also found satisfactory; hence the analytical method would be concluded.

The robustness study was carried out by changes in flow rate (0.6 and 0.8 ml/ min), PH of mobile phase composition (34 + 66 ml and 36+64 ml), and Wavelength (244 nm and 246 nm). %RSD for peak area was calculated which should be less than 2%. The result is shown in Table 5.

	Cone	Metform	in	Canaglifle	Canagliflozin	
Parameters	(µg/ml)	Amount detected (mean ±SD)	% RSD	Amount detected (mean ±SD)	% RSD	
Flow rate 0.6 ml/min	40+400	10816.20±0.46	0.004	1168.52±0.80	0.07	
Flow rate 0.8 ml/min	40+400	8976.59±0.18	0.002	955.46±0.98	0.10	
Mobile Phase 34 + 66 ml	40+400	10871.60±0.67	0.01	1185.3±0.23	0.02	
Mobile Phase 36 + 64 ml	40+400	11036.01±0.62	0.01	1178.56±0.52	0.04	
Wavelength 244 nm	40+400	12585.5±0.24	0.002	1183.8±0.22	0.02	
Wavelength 246 nm	40+400	9709.42±0.93	0.001	1208.27±0.52	0.04	

Table 5. Result of Robustness Study of Metformin and Canagliflozin

3.2.6. Limit of Detection

The LOD is the lowest limit of drug that can be detected. Based on the S.D. deviation of the response and the slope the limit of detection (LOD) may be expressed as:

LOD = 3.3 X (SD)/S

Where, SD = Standard deviation of Y intercept

S = Slope

Limit of detection (MET) = 3.3 X34.17/ 25.21= 4.47(ug/mL)

Limit of detection (CAN) = 3.3 X 3.60/22.94 = 0.51 (ug/mL)

The LOD of Metformin and Canagliflozin was found to be 4.47(ug/mL) and 0.51 (ug/mL).

3.2.7. Limit of Quantitation.

The LOQ is the lowest concentration that can be quantitatively measured. Based on the Standard deviation of the response and the slope,

The quantitation limit (LOQ) may be expressed as:

LOQ = 10 X (SD) / S

Where SD = Standard deviation Y-intercept

Limit of Quantitation (MET) = 10 X 34.17/25.21 = 13.55(ug/mL)

Limit of Quantitation (CAN) = $10 \times 3.60/22.94 = 1.5693 (\mu g/mL)$

The LOQ of Canagliflozin was found to be 13.55 (ug/mL) and 1.56 (ug/mL).

3.2.8. Analysis of tablet formulation

Procedure:

Weigh 20 Metformin and Canagliflozin combination tablets and calculated the average weight, accurately weigh and transfer the sample equivalent to 276mg Metformin and Canagliflozin into a 10 ml volumetric flask. Add about 10ml MEOH of diluents and sonicate to dissolve it completely and make volume up to the mark with diluent. Mix well and filter through a 0.45 μ m filter. Further pipette 0.4ml of the above stock solution into a 10 ml volumetric flask and dilute up to the mark with diluents. (40+ 264µg/ml). The amounts of Metformin and Canagliflozin per tablet were calculated by extrapolating the value of area from the calibration curve. The analysis procedure was repeated five times with tablet formulation. The result of %Label claim and %RSD of Metformin and Canagliflozin is shown in Table 6 and the chromatogram is shown in Figure 4 and Figure 5.

Brand Name: Invokamet 500 +50 mg.

Drug	Conc.	Amt. Found	%Label Claim	SD	%RSD
MET	300	304.6887	101.56	0.75	0.76
CAN	30	29.58	99.13	0.22	0.76

Table 6: Analysis of marketed formulation:



Figure 4. Chromatogram of Assay (Sample 1)



Figure 5. Chromatogram of Assay (Sample 2)

4. CONCLUSION

The proposed method is specific, rapid, reproducible, precise, and accurate. The method was completely and accurately validated showing satisfactory data for all the tested method validation parameters. The developed method was found to be robust in the separation and quantification of Metformin and Canagliflozin.

5. MATERIALS AND METHODS

5.1 Chemicals and Reagents

Canagliflozin and Metformin are obtained from Kopran Ltd. Ortho-Phosphoric acid are obtained from Avantor Performance material India Ltd. Thane, Maharashtra, and Methanol from Merck Specialities Pvt. Ltd. Shiv Sager Estate 'A' Worli, Mumbai, Maharashtra. Canagliflozin and Metformin marketed formulation is obtained from the local medical store (Brand name: Invokamet, contains Metformin 500 mg and Canagliflozin 50mg.)

5.2 Instrumentation:

Agilent technology HPLC having gradient system and UV detector was used for analysis purpose. Agilent C18 Column (4.6mm x100mm) having particle size 5 µm was used. A 940D pump, 20µl injection loop, UV 740D Absorbance detector, and running Chemstation software were used for analysis.

5.3 The standard Stock solution of Metformin and Canagliflozin:

Accurately weight and transfer 10 mg Canagliflozin and Metformin 100mg working standard into 10 ml volumetric flask as about diluents methanol completely and make volume up to the mark with the same solvent to get 1000 & 10000 μ g/ml standard (stock solution) and sonicate to dissolve it and remove the

unwanted gas. 0.1 ml stock solution was pipette out in 10 ml of volumetric flask and volume was made up to 10 ml with mobile phase to get final concentration 10 +100ug/ml. (5-7)

5.4 Tablet solution preparation for Assay:

To determine the content of Canagliflozin and Metformin in marketed tablets (label claim 10 mg of Canagliflozin and 100mg Metformin), 20 tablets powder weighed in 276 gms and an average weight of powder was calculated in 13.8. Tablets were triturated and powder equivalent to weighing 218mg the drug was extracted from the tablet powder with 10 mL MeOH. To ensure complete extraction it was sonicated for 15 min. 0.1mL of supernatant was then diluted up to 10 mL with the mobile phase. The resulting solution was injected in HPLC and a drug peak area was noted. (8-10)

Approval of Ethical Committee

There is no need of approval of Ethical committee, because no animal activity has been carried out.

Acknowledgements: The authors are thankful for the management, Principal, Teaching, and Non-Teaching Staff of Ali Allana and Jamia College of Pharmacy, Akkalkuwa for their kind support and motivation throughout the research work.

Author Contributions: Concept – N.Y., A.A.; Design – N.K., A.A.; Supervision – A.A., M.Q.; Resources – Y.A.A., A.A.B; Materials – N.K., A.A.; Data Collection and/or Processing – Y.A.A, A.S.; Analysis and/or Interpretation – N.K., Y.A.A; Literature Search – M.S., N.J.K.; Writing – N.K., A.A., Y.A.A.; Critical Reviews – A.A., M.Q., A.S., A.A.B.

Conflict of interest statement: "The authors declared no conflict of interest" in the manuscript.

REFERENCES

- [1] Raut AN, Jawarkar SG, Khodke VS, Khole VA. Method development, validation by simultaneous estimation of empagliflozin and linagliptin by RP-HPLC method. J Pharm Sci Innov. 2020;9(1): 1-4. <u>https://doi.org/10.7897/2277-4572.091160</u>.
- [2] Anjali M, Mannaz, Shreshta MR, Prasanna, Shrisha SK. Method development and validation of ertugliflozin and sitagliptin by using simultaneous equation method. J Innov Pharm Sci. 2019; 3(1): 22-28.
- [3] Attimarad M, Elgorashe REE, Subramaniam R, Islam MM, Venugopala KN, Nagaraja S, Balgoname AA. Development and validation of rapid RP-HPLC and green second-derivative UV spectroscopic methods for simultaneous quantification of metformin and remogliflozin in formulation using experimental design. Separations 2020; 7(4):59. https://doi.org/10.3390/separations7040059.
- [4] Jabbour S, Ziring B. Advantages of extended-release metformin in patients with type 2 diabetes mellitus. Postgrad Med. 2011;123(1):15-23. https://doi.org/10.3810/pgm.2011.01.2241.
- [5] Attimarad M, Nagaraja SH, Aldhubaib BE, Nair A, Venugopala KN. Simultaneous determination of metformin and three gliptins in pharmaceutical formulations using RP HPLC: Application to stability studies on linagliptin tablet formulation. Indian J Pharm Educ Res. 2014; 48(4): 45-53. http://dx.doi.org/10.5530/ijper.48.4.7.
- [6] Sami W, Ansari T, Butt NS, Hamid MRA. Effect of diet on type 2 diabetes mellitus: A review. Int J Health Sci (Qassim). 2017;11(2):65-71.
- [7] Magliano DJ, Sacre JW, Harding JL, Gregg EW, Zimmet PZ, Shaw JE. Young-onset type 2 diabetes mellitus implications for morbidity and mortality. Nat Rev Endocrinol. 2020;16(6):321-331. <u>https://doi.org/10.1038/s41574-020-0334-z</u>.
- [8] Alhyas L, McKay A, Balasanthiran A, Majeed A. Prevalences of overweight, obesity, hyperglycaemia, hypertension and dyslipidaemia in the Gulf: systematic review. JRSM Short Rep. 2011;2(7):55. https://doi.org/10.1258/shorts.2011.011019.
- [9] Dharmalingam M, Aravind SR, Thacker H, Paramesh S, Mohan B, Chawla M, Asirvatham A, Goyal R, Shembalkar J, Balamurugan R, Kadam P, Alva H, Kodgule R, Tandon M, Vaidyanathan S, Pendse A, Gaikwad R, Katare S, Suryawanshi S, Barkate H. Efficacy and safety of remogliflozin etabonate, a new sodium glucose co-transporter-2 inhibitor, in patients with Type 2 Diabetes Mellitus: A 24-week, randomized, double-blind, active-controlled trial. Drugs. 2020;80(6):587-600. https://doi.org/10.1007/s40265-020-01285-0.
- [10] Majithia RH, Khodadiya DA, Patel VB. Spectrophotometric method development and validation for simultaneous estimation of Anagliptin and Metformin HCl BY Q - Absorption ratio method in synthetic mixture. Heliyon. 2020;6(5):e03855. <u>https://doi.org/10.1016/j.heliyon.2020.e03855</u>.
- [11] Attimarad MV, Nair AB, Aldhubaib BE. Development of liquid chromatographic method for the simultaneous determination of metformin and miglitol in human plasma: Application to pharmacokinetic studies. J Iranian Chem Soc. 2015; 12: 1629–1636. <u>https://doi.org/10.1007/s13738-015-0637-5</u>.
- [12] Neelima K, Prasad YR. Analytical method development and validation of metformin, voglibose, glimepiride in bulk and combined tablet dosage form by gradient RP-HPLC. Pharm Methods. 2014; 5: 27–33. https://doi.org/ 10.5530/phm.2014.1.5.

- [13] Gedawy A, Al-Salami H, Dass CR. Development and validation of a new analytical HPLC method for simultaneous determination of the antidiabetic drugs, metformin and gliclazide. J Food Drug Anal. 2019; 27: 315–322. https://doi.org/10.1016/j.jfda.2018.06.007.
- [14] Sebaiy MM, El-Adl SM, Baraka MM, Hassan AA. Rapid RP-HPLC method for simultaneous estimation of metformin, pioglitazone, and glimepiride in human plasma. Acta Chromatogr. 2020; 32: 16–21. https://doi.org/10.1556/1326.2018.00515.
- [15] Shirode A, Maduskar P, Deodhar M, Kadam V. RP-HPLC and HPTLC methods for simultaneous estimation of metformin hydrochloride and vildagliptin from bulk and marketed formulation: Development and validation. J Pharm Res Int. 2014; 4: 2370–2386. https://doi.org/10.9734/BJPR/2014/12820.
- [16] Al Bratty M, Alhazmi HA, Javed SA, Lalitha KG, Asmari M, Wölker J, El Deeb S. Development and validation of LC-MS/MS method for simultaneous determination of metformin and four gliptins in human plasma. Chromatographia. 2017; 80: 891–899. <u>https://doi.org/10.1007/s10337-017-3288-0</u>.
- [17] Munde MK, Kulkarni NS, Khiste RH, Sen DB. Development and validation of novel analytical method for empagliflozin and metformin hydrochloride in bulk and pharmaceutical dosage form by four different simultaneous estimation approaches using UV spectroscopy. Res J Pharm Technol. 2020; 13: 1236–1242. https://doi.org/10.5958/0974-360X.2020.00228.0.
- [18] Mohamed D, Elshahed MS, Nasr T, Aboutaleb N, Zakaria O. Novel LC-MS/MS method for analysis of metformin and canagliflozin in human plasma: Application to a pharmacokinetic study. BMC Chem. 2019; 13: 82. <u>https://doi.org/10.1186/s13065-019-0597-4</u>.

This is an open access article which is publicly available on our journal's website under Institutional Repository at http://dspace.marmara.edu.tr.