

Validation and Stability-Indicating Assessment of an RP-HPLC Method for Simultaneous Quantification of Pseudoephedrine and Loratadine in Combined Dosage Forms

Krati Dhakad^{1*}, Ramakant Sharma², Sudha Vengurlekar³, Sachin Kumar Jain⁴

^{1*}Research Scholar, Faculty of Pharmacy, Oriental University, Indore, M. P.

²Associate Professor, University Institute of Pharmacy, Oriental University, Indore, M. P.

³Dean and Principal, University Institute of Pharmacy, Oriental University, Indore, M. P.

⁴Professor, Oriental College of Pharmacy, Oriental University, Indore, M. P.

ABSTRACT

A validated stability-indicating reverse-phase high-performance liquid chromatographic (RP-HPLC) method was established for the simultaneous quantification of Pseudoephedrine and Loratadine in combined pharmaceutical dosage forms. Chromatographic analysis was performed using an Agilent C18 column (250 mm × 4.6 mm, 5 μm) with a mobile phase consisting of methanol and 0.1% orthophosphoric acid in water (37:63, v/v, pH 3.2), delivered at a flow rate of 1.0 mL/min, with UV detection at 232 nm. The developed analytical method was validated in accordance with ICH Q2(R1) guidelines for linearity, precision, accuracy, repeatability, robustness, limit of detection (LOD), and limit of quantification (LOQ). The method exhibited excellent linearity within the concentration ranges of 24–120 μg/mL for Pseudoephedrine and 1–5 μg/mL for Loratadine, with correlation coefficients greater than 0.999. Accuracy studies demonstrated recoveries within acceptable limits of 98–102%, while precision studies showed low %RSD values, confirming the reproducibility of the method. Robustness studies indicated that minor deliberate changes in chromatographic parameters did not significantly affect analytical performance. Forced degradation studies under acidic, alkaline, oxidative, and neutral stress conditions confirmed the stability-indicating capability of the method by effectively separating degradation products from the analyte peaks. The validated method was successfully applied for routine quantitative analysis of marketed tablet formulations containing Pseudoephedrine and Loratadine.

Keywords: RP-HPLC validation; Stability-indicating method; Forced degradation; Pseudoephedrine; Loratadine; ICH Q2(R1); Pharmaceutical analysis; Method robustness

How to cite this article: Dhakad K, Sharma R, Vengurlekar S, Jain SK. Validation and Stability-Indicating Assessment of an RP-HPLC Method for Simultaneous Quantification of Pseudoephedrine and Loratadine in Combined Dosage Forms. *Int J Drug Deliv Technol.* 2026;16(54s): 1241-1268. DOI: 10.25258/ijddt.16.54s.110

Source of support: Nil

Conflict of interest: None

INTRODUCTION

The simultaneous estimation of active pharmaceutical ingredients in combined dosage forms requires validated analytical methods capable of ensuring accuracy, precision, specificity, and stability assessment during routine pharmaceutical quality control. Regulatory authorities emphasize that analytical procedures intended for assay and stability studies must comply with International Council for Harmonisation (ICH) guidelines to ensure reliability and reproducibility of analytical results (ICH, 2005).

Pseudoephedrine hydrochloride is a sympathomimetic amine widely employed as a nasal decongestant for the management of allergic rhinitis and upper respiratory tract congestion. Loratadine, a second-generation

antihistaminic drug, is extensively used for the treatment of allergic conditions due to its selective H1 receptor antagonistic activity and reduced sedative effects (Brunton et al., 2018). The fixed-dose combination of these drugs is frequently prescribed in respiratory allergic disorders because it provides synergistic therapeutic benefits by relieving both nasal congestion and histamine-mediated allergic symptoms.

Although chromatographic methods have previously been reported for the simultaneous estimation of Loratadine and Pseudoephedrine, limited studies have comprehensively addressed validation and stability-indicating evaluation in accordance with ICH recommendations. Stability-indicating analytical methods

are particularly important in pharmaceutical analysis because they enable accurate quantification of active pharmaceutical ingredients in the presence of degradation products generated during storage, transportation, and formulation processing (Blessy et al., 2014). Forced degradation studies under stress conditions such as acidic, alkaline, oxidative, and neutral hydrolysis provide valuable information regarding degradation pathways and intrinsic stability behavior of drug substances.

Analytical method validation is a critical regulatory requirement for demonstrating the suitability of a developed analytical procedure. Validation parameters including linearity, accuracy, precision, robustness, limit of detection, and limit of quantification ensure the consistency and reliability of analytical data generated during pharmaceutical quality control analysis (Snyder et al., 2010). Robust and validated RP-HPLC methods are therefore essential for routine assay, stability testing, and regulatory compliance of combined dosage formulations.

The present investigation was undertaken to validate a stability-indicating RP-HPLC method for the simultaneous quantification of Pseudoephedrine and Loratadine in combined tablet dosage forms. The method was validated according to ICH Q2(R1) guidelines, and its stability-indicating capability was evaluated through forced degradation studies under various stress conditions.

MATERIALS & METHODS

Chemicals and Reagents

Pseudoephedrine and Loratadine utilized in this study were obtained from SM Pharma & Chemicals, Mumbai. All solvents and reagents used were of analytical or HPLC grade, including methanol, acetonitrile, orthophosphoric acid, and triethylamine, which were procured from Merck Ltd., India. The pharmaceutical formulation analyzed was a commercially available combined dosage form containing Pseudoephedrine and Loratadine, marketed under the brand name Loratadine-D

12 hr. The product was purchased from a local pharmacy and used without any further modification.

Chromatographic conditions

The chromatographic conditions for method development were established using an Agilent Technologies gradient HPLC system equipped with an auto-injector and a diode array detector (DAD), operated through Chemstation software. Chromatographic separation was carried out on an Agilent C18 column (250 mm × 4.6 mm, 5 μm particle size), which served as the stationary phase. The mobile phase comprised methanol and water containing 0.1% orthophosphoric acid in a ratio of 37:63 (v/v), with the pH adjusted to 3.2. Detection was performed at a wavelength of 232 nm, with a flow rate maintained at 1.0 mL/min under ambient conditions. An injection volume of 20 μL was employed, and the total run time was fixed at 10 minutes. Prior to analysis, all solutions were filtered through a 0.45 μm membrane filter to ensure clarity and consistent results.

Validation of method for analysis of Pseudoephedrine and Loratadine:

The developed method was validated as per ICH guidelines.

Linearity:

Linearity of an analytical method refers to its ability to produce results that are directly proportional to the concentration of the analyte within a specified range, which is evaluated by plotting peak area against concentration and applying regression analysis to determine curve fitting. The method is considered linear if the calibration curve passes through the origin with a correlation coefficient not less than 0.999. For this study, standard stock solution was prepared by accurately weighing 120 mg of Pseudoephedrine and 5 mg of Loratadine in a 50 mL volumetric flask, followed by dilution and sonication, and further appropriate dilution was carried out to obtain working standards. A series of linearity solutions at different concentrations were then prepared and analyzed to establish the calibration curve.

Table 1: Table of linearity for Rp-HPLC Method

Concentration (μg/mL)	
Pseudoephedrine	Loratadine
24	1
48	2
72	3
96	4
12	5

Accuracy (recovery):

Accuracy of an analytical method reflects the closeness between the measured value and the true value, and is commonly expressed as percentage recovery of a known added amount of analyte. It is determined by analyzing pre-quantified samples spiked with known concentrations of the analyte and calculating the percentage recovery from the obtained results. For the RP-HPLC method, acceptable accuracy was defined by a mean recovery within 98–102% and a relative standard deviation (RSD) not exceeding 2%. Standard stock solution was prepared

by accurately weighing 120 mg of Pseudoephedrine and 5 mg of Loratadine into a 50 mL volumetric flask, followed by dilution, and further appropriate dilution was performed to obtain working concentrations. The method was applied to tablet formulation by spiking samples at 80%, 100%, and 120% of the label claim, triturating the mixture, and analyzing it using the developed chromatographic conditions. The samples were evaluated in triplicate over two days, and the percentage recovery obtained was used as a measure of method accuracy, with results presented accordingly.

Table 2: Table of Accuracy Rp-HPLC Method

Sample	Amount Added (mg)	
	Pseudoephedrine	Loratadine
Accuracy 80%	19.2	0.8
Accuracy 100%	24	1
Accuracy 120%	28.8	1.2

Repeatability:

Repeatability of the RP-HPLC method was evaluated by injecting two replicate samples containing 120 mg of Pseudoephedrine and 5 mg of Loratadine, followed by measurement of peak areas and calculation of percentage relative standard deviation (%RSD), and the procedure was repeated three times, with results reported accordingly. For this study, the sample solution was prepared by accurately weighing 120 mg of Pseudoephedrine and 5 mg of Loratadine into a 10 mL volumetric flask, dissolving in diluent, and sonicated for 10 minutes with intermittent swirling to ensure complete dissolution. The solution was then filtered through a 0.45 µm membrane filter, and an aliquot of 0.1 mL was further diluted to 10 mL with diluent to obtain the working solution for analysis.

Precision:

Precision of an analytical method refers to the closeness of agreement among individual test results when the method is applied repeatedly to multiple samplings of a homogeneous sample, and is generally expressed as standard deviation or percentage relative standard deviation (%RSD). In this study, precision was further evaluated using statistical analysis, where the obtained results were subjected to one-way ANOVA to determine

within-day and between-day variations, which were compared using an F-test. The acceptance criterion for precision was set such that the %RSD should not exceed 2%.

Intra-day precision was assessed by analyzing sample solutions containing Pseudoephedrine and Loratadine at three concentration levels (24, 72, and 120 µg/mL for Pseudoephedrine, and 1, 3, and 5 µg/mL for Loratadine) three times within the same day, and %RSD was calculated. Inter-day precision was evaluated by analyzing the same concentration levels on different days, and the corresponding %RSD values were determined. For the preparation of the standard stock solution, 120 mg of Pseudoephedrine and 5 mg of Loratadine were accurately weighed, transferred to a 50 mL volumetric flask, and diluted to volume with diluent, followed by further dilution of 0.1 mL to 10 mL to obtain the working solution.

Robustness:

The mobile phase composition was changed in (±1 ml/min-1) proportion and the flow rate was of methanol: OPA (37:63) in the mobile phase composition (±1ml/min-1) and the change in detection wavelength (±1 ml/min-1) and the effect of the results were examined, it was performed using 96 µg/ml and 4 µg/ml solution of Pseudoephedrine and Loratadine in duplicate.

Detection Limit

Based on the S.D. of the response and the slope of calibration curve, the detection limit (DL) was calculated as,

$$DL = \frac{3.3\sigma}{S}$$

Where,

σ = the S.D. of the y-intercepts of regression lines.
S = the slope of the calibration curve.

The slope S may be estimated from the calibration curve and S.D. was used should be calculated from the y-intercepts of regression line in calibration curve.

Quantitation Limit

Based on the S.D. of the response and the slope of calibration curve, the quantitation limit (QL) was calculated as,

$$QL = \frac{10\sigma}{S}$$

Where,

σ = the S.D. of the y-intercepts of regression lines.
S = the slope of the calibration curve.

The slope S may be estimated from the calibration curve and S.D. was used should be calculated from the y-intercepts of regression line in calibration curve.

Analysis of marketed formulation.

To determine the content of Pseudoephedrine and Loratadine in marketed tablets (label claim 120 mg of Pseudoephedrine and 5 mg Loratadine), 20 tablets powder weighed in 3.74 gms and average weight of powder was calculated in 187 gms. Tablets were triturated and powder equivalent to weigh in 187 mg. The drug was extracted from the tablet powder with 50 mL Methanol. To ensure complete extraction it was sonicated for 15 min. 0.4 mL of supernatant was then diluted up to 10 mL with mobile phase. The resulting solution was injected in HPLC and drug peak area was noted.

Regression equation was generated using peak areas of standard solutions. Using the regression equation and peak area of the sample the amount of Pseudoephedrine and Loratadine in the sample was calculated. The amount of Pseudoephedrine and Loratadine per tablet was obtained from the regression equation of the calibration curve as described in analysis of Tablet formulation.

FORCED DEGRADATION STUDIES

Forced degradation study was performed to evaluate the stability of the developed method using the stress

conditions like exposure of sample solution to acid (0.1 N HCl), base (0.1N NaOH), Hydrogen peroxides (H₂O₂) and Neutral. Investigation was done for the degradation products were shown in Table.

Procedure for Pseudoephedrine and Loratadine degradation

1. Acid hydrolysis:

The acid hydrolysis performed using 0.1N HCl for 1hr,4hr, 24hr for both Loratadine and Pseudoephedrine indicated degradation. The major degradation products for Loratadine and Pseudoephedrine were observed at relative retention time (RRT) of In this chromatogram of acid degradation has lead to formation of degrading and calculate % Degradation of drug 6.96, 7.31, 8.09% for Pseudoephedrine – 6.51, 8.70, 8.72% for Loratadine.

2. Alkaline hydrolysis:

The alkaline hydrolysis condition was performed using 0.1N NaOH for 1hr, 4 hr, 24 hr both Loratadine and Pseudoephedrine. The major degradation products for Loratadine and Pseudoephedrine were observed at RRT of 2 In this chromatogram of alkali degradation has lead to formation of degrading and calculate % Degradation of drug 5.92,7.62, 9.17% for Pseudoephedrine.8.41,10.56,10.56% for Loratadine.

3. Oxidation:

In the oxidation condition with 3% H₂O₂ for 1 hr, 4hr, 24 hr both Loratadine and Pseudoephedrine show any oxidative stress degradation peak in the chromatogram, In this chromatogram of H₂O₂ degradation has lead to formation of degrading and calculate % Degradation of drug 3.61,3.93, 4.02 % for Pseudoephedrine.12.54%,13.50%,13.81% for Loratadine.

4. Neutral:

There was no major degradation observed for both Loratadine and Pseudoephedrine and hence they were not sensitive to light for 4 hr.

RESULTS & DISCUSSIONS

Analytical Method Validation:

1. Linearity:

From Pseudoephedrine standard stock solution, different working standard solution (24-120 µg/ml) were prepared in mobile phase Likewise from Loratadine standard stock solution different working standard solution (1-5µg/ml) were prepared in mobile phase 20 µl of sample solution was injected into the chromatographic system using fixed volume loop injector. Chromatograms were recorded. The area for each concentration were recorded. The Calibration curves are shown below.

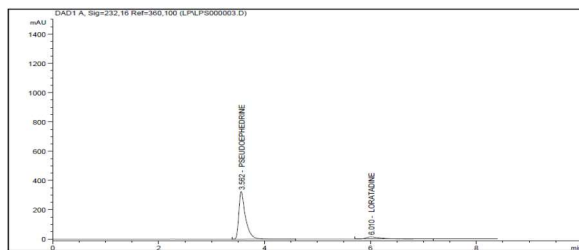


Figure 1: Chromatogram of Linearity (24+1 MCG) mcg-1

Table 3: Details of Chromatogram of Linearity (24+1) mcg-1

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.262	3085.7148	5582	0.91	-
2	6.010	290.8701	5435	0.94	7.01

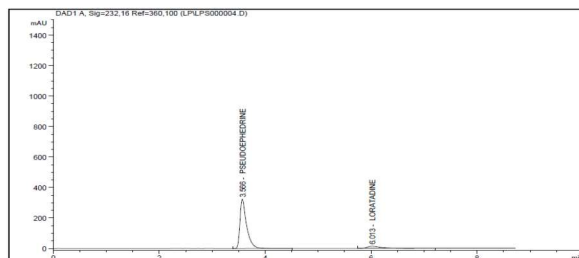


Figure 2: Chromatogram of linearity (24+1mcg) -02

Table 4: Details of Chromatogram of Linearity (24+1) mcg-2

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.566	3082.6848	4550	0.90	-
2	6.013	289.2277	4435	0.94	7.00

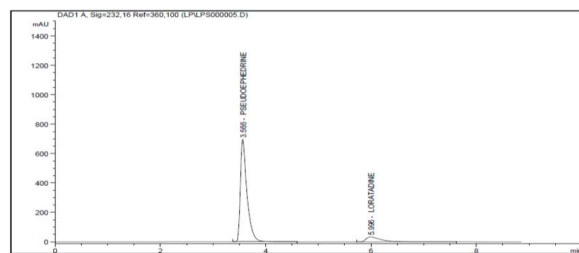


Figure 3: Chromatogram of Linearity (48+2 mcg-1)

Table 5: Details of Chromatogram of Linearity (48+2) mcg-1

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.566	5929.8564	5565	0.91	-
2	5.996	607.30200	5554	0.91	7.07

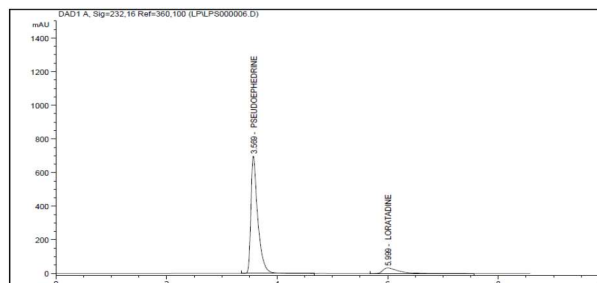


Figure 4: Chromatogram of linearity (48+2mcg) -02

Table 6: Details of Chromatogram of Linearity (48+2mcg)-2

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.569	5919.7793	5614	0.90	-
2	5.999	606.24780	5556	0.90	7.09

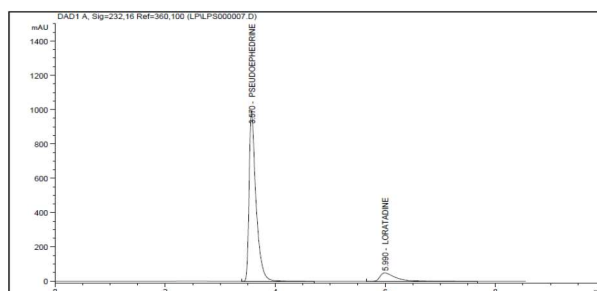


Figure 5: Chromatogram of Linearity (72+3 mcg) -01

Table 7: Details of Chromatogram of Linearity (72+3 mcg)-1

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.570	8607.36426	5605	0.90	-
2	5.990	916.5285	5629	0.90	7.13

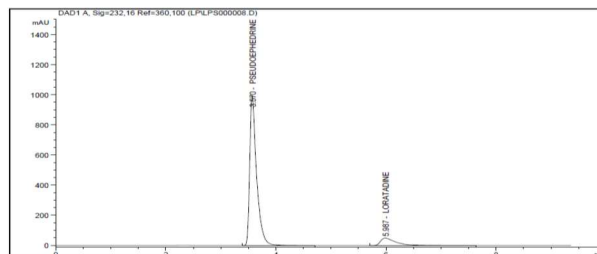


Figure6: Chromatogram of Linearity (72 + 3 mcg) -02

Table 8: Details of Chromatogram of Linearity (72 + 3) mcg-1

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.570	8586.26563	5598	0.91	-

2	5.987	913.6680	5684	0.90	7.17
---	-------	----------	------	------	------

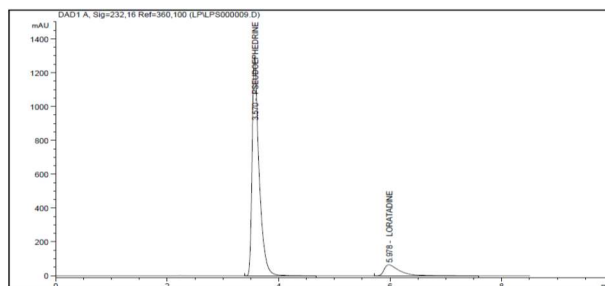


Figure 7: Chromatogram of Linearity (96+4) mcg -01

Table 9: Details of Chromatogram of Linearity (96+4) mcg-1

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.570	11252.3	5485	0.90	-
2	5.978	1210.2670	5704	0.90	7.14

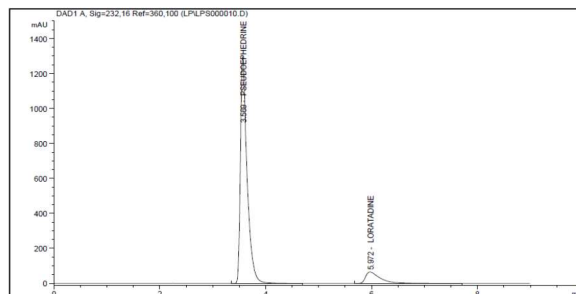


Figure 8: Chromatogram of Linearity (96+4) mcg -02

Table 10: Details of Chromatogram of Linearity (96+4) mcg)-2

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.569	11258.0	5513	0.90	-
2	5.972	1211.7113	5718	0.90	7.15

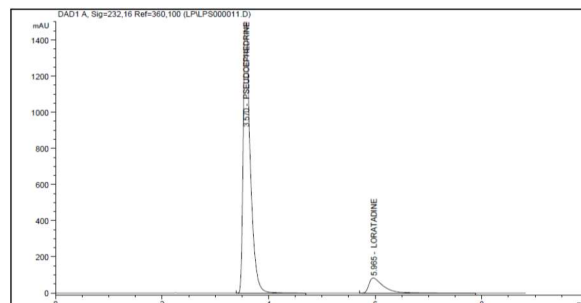


Figure 9: Chromatogram of Linearity (120+5) mcg -01

Table 11: Details of Chromatogram of Linearity (120+5 mcg)-1

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.570	14112.0	5295	0.90	-
2	5.750	1540.92786	5748	0.99	7.10

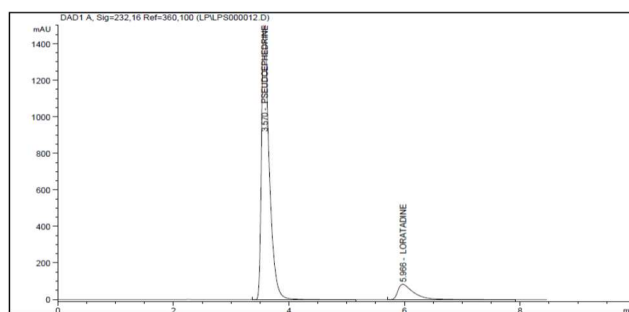


Figure 10: Chromatogram of Linearity (120+5 mcg) -02

Table 12: Details of Chromatogram of Linearity (120+5 mcg)-2

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.570	14156.5	5231	0.90	-
2	5.966	1544.2093	5725	0.99	7.07

Table 13: Linearity of Pseudoephedrine

Concentration µg/ml	Area Pseudoephedrine
24	3084.2
48	5924.82
72	8596.81
96	11255.15
120	14134.25

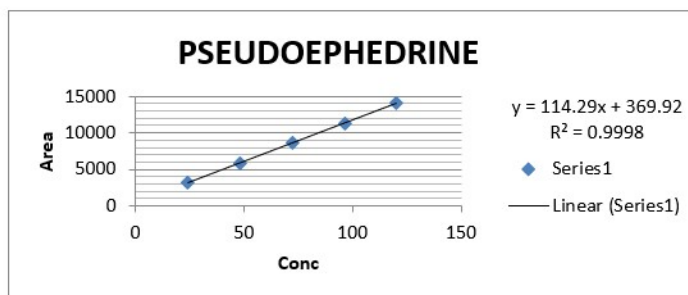


Figure 11: Calibration curve of Pseudoephedrine for HPLC method

Table 14: Regression equation data for Pseudoephedrine

Regression Equation Data $Y=mx+c$	
Slope(m)	114.29
Intercept(c)	369.92
Correlation Coefficient	0.999

Table 15: Linearity of Loratadine

Concentration $\mu\text{g/ml}$	Area Loratadine
1	290.05
2	606.77
3	915.1
4	1210.99
5	1542.57

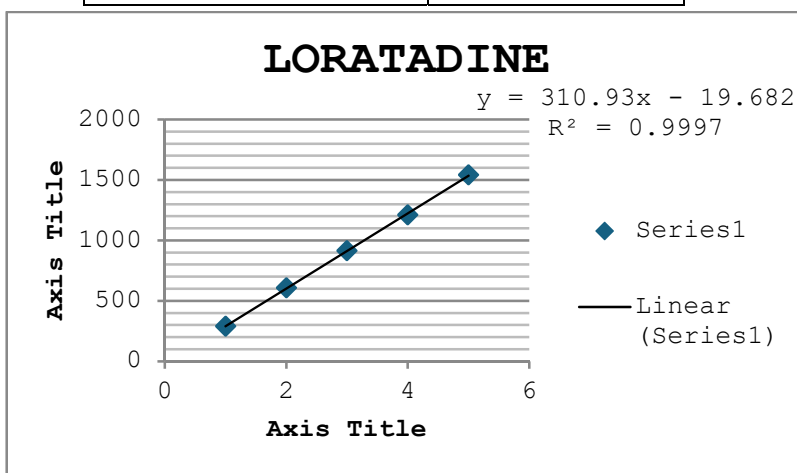


Figure 12: Calibration graph of Loratadine for HPLC method

Table 16: Regression equation data for Loratadine

Regression Equation Data $Y=mx+c$	
Slope(m)	310.93
Intercept(c)	19.682
Correlation Coefficient	0.999

Linearity of Pseudoephedrine and Loratadine was observed in the range of 24-120 µg/ml and 1-5 µg/ml. Detection wavelength used was 232 nm. The plot should be linear passing through the origin; Correlation Coefficient should not be less than 0.999.that concluded.

2. Accuracy:-

Recovery studies were performed to validate the accuracy of developed method. To pre analyzed 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 shown in table below

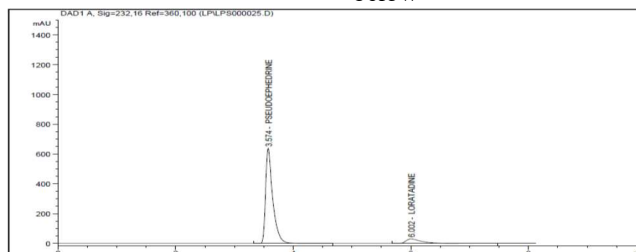


Figure 11: Chromatogram of Accuracy 80% MCG- 01

Table 17: Details of Chromatogram of Accuracy 80% MCG-01

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.574	5364.1445	5892	0.92	-
2	6.002	536.2304	5735	0.92	7.31

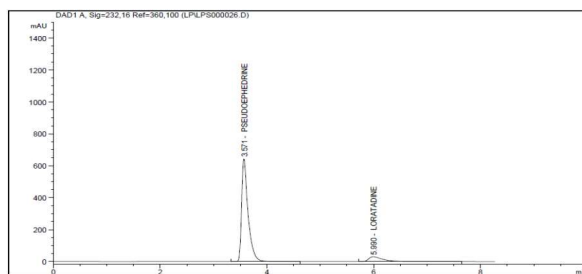


Figure 12: Chromatogram of Accuracy 80% MCG- 02

Table 18: Details of Chromatogram of Accuracy 80% MCG-02

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.571	5364.05469	5986	0.91	-
2	5.990	540.4939	5812	0.91	7.39

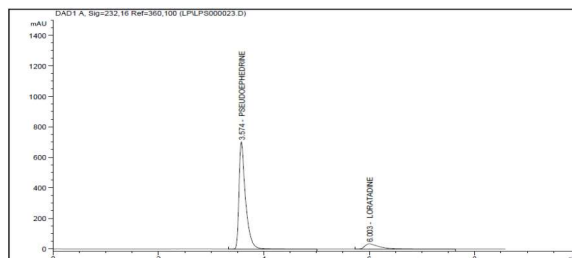


Figure 13: Chromatogram of Accuracy 100% MCG – 01

Table 19: Details of Chromatogram of Accuracy 100% MCG- 01

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.574	5919.15039	5793	0.91	-
2	6.003	607.81262	5736	0.91	7.29

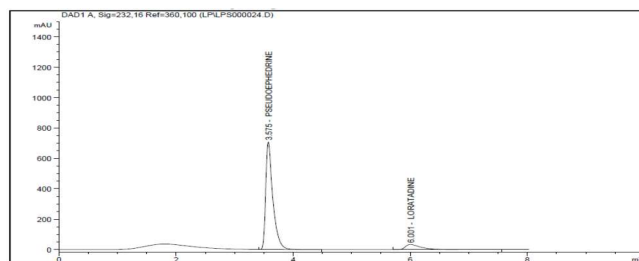


Figure 14: Chromatogram of Accuracy 100% MCG - 02

Table 20: Details of Chromatogram of Accuracy 100% MCG- 02

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.575	5914.42773	5793	0.92	-
2	6.001	606.8183	5726	0.91	7.27

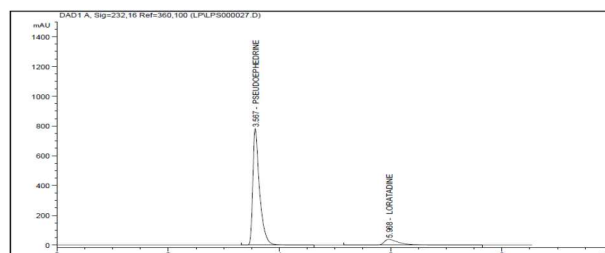


Figure 14: Chromatogram of Accuracy 120% MCG - 01

Table 21: Details of Chromatogram of Accuracy 120% MCG- 01

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.567	6481.2690	5849	0.92	-
2	5.968	660.34827	5714	0.92	7.23

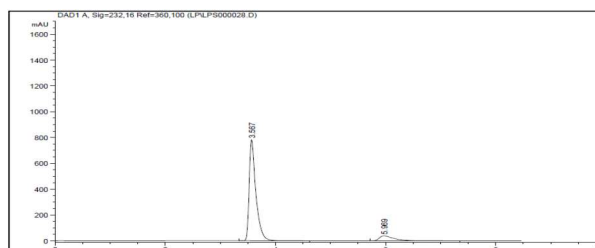


Figure 15: Chromatogram of Accuracy 120% MCG - 02

Table 22: Details of Chromatogram of Accuracy 120% MCG- 02

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.567	6484.72510	5840	0.91	-
2	5.969	669.4691	5791	0.91	7.30

Table 23: Result of Recovery data for Pseudoephedrine and Loratadine

METHOD	Drug	Level (%)	Amt. taken (µg/ml)	Amt. Added (µg/ml)	Amt found* ± S.D.	Amt. recovered Mean ±S.D.	%Recovery Mean ±S.D.
RP-HPLC Method	PDE	80%	24	19.2	43.50±0.001	19.50±0.001	101.54±0.00
		100%	24	24	48.34±0.029	24.34±0.029	101.40±0.12
		120%	24	28.8	53.29±0.021	29.29±0.021	101.71±0.07
	LTD	80%	1	0.8	1.79±0.010	0.79±0.010	99.37±1.21
		100%	1	1	2.02±0.002	1.02±0.002	101.67±0.23
		120%	1	1.2	2.20±0.021	1.20±0.021	100.16±1.73

*mean of each 2 reading for RP-HPLC method

Table 24: Statistical Validation of Recovery Studies Pseudoephedrine and Loratadine

METHOD	Level of Recovery (%)	Drug	Mean % Recovery	Standard Deviation*	% RSD
Rp-HPLC Method	80%	PDE	101.54	0.00	0.00
		LTD	99.37	1.21	1.22
	100%	PDE	101.40	0.12	0.12
		LTD	101.67	0.23	0.22
	120%	PDE	101.71	0.07	0.07
		LTD	100.16	1.73	1.73

*Denotes average of three determinations for RP-HPLC

Accuracy of RP-HPLC method is ascertained by recovery studies performed at different levels of concentrations (80%, 100% and 120%). The % recovery was found to be within 98-102%.

3. System suitability parameters :(Repeatability)

To ascertain the resolution and reproducibility of the proposed chromatographic system for estimation of Pseudoephedrine and Loratadine system suitability parameters were studied.

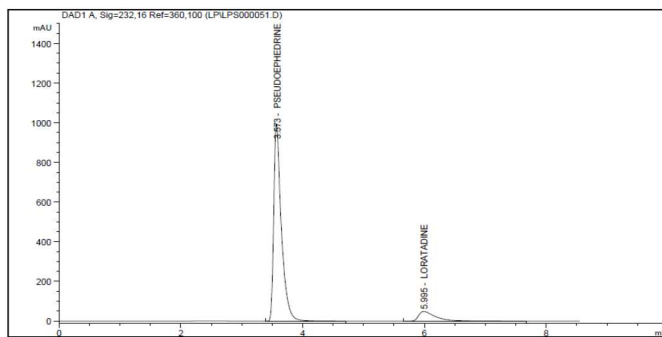


Figure 16: Chromatogram of System suitability No- 1 (72+3mcg)

Table 25: Details of Chromatogram of System suitability No- 1 (72+3mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.573	8513.69045	5689	0.98	-
2	5.995	916.52856	5699	0.99	7.13

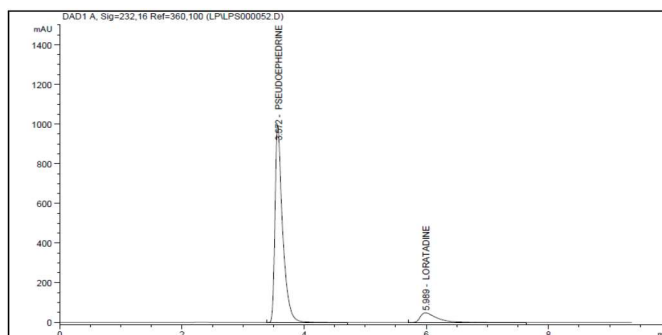


Figure 17: Chromatogram of System suitability No- 2 (72+3 mcg)

Table 26: Details of Chromatogram of System suitability No- 2 (72+3) mcg

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.572	8614.8056	5614	0.92	-
2	5.989	915.8980	5694	0.99	7.18

Table 27: Repeatability studies on RP-HPLC for Pseudoephedrine and Loratadine

Method	Concentration of Pseudoephedrine and Loratadine (mg/ml)	Peak area	Amount found (mg)	% Amount found
RP-HPLC	72	8513.690	71.52	99.33
	72	8614.800		

Method for PDP				
		Mean	71.52	99.33
		SD	1.50	1.50
		%RSD	0.83	0.83
RP-HPLC Method for LTD	3	916.707	3.01	100.35
	3	915.898		
		Mean	3.01	100.35
		SD	0.57	0.57
		%RSD	0.06	0.06

Repeatability studies on RP-HPLC for Pseudoephedrine and Loratadine was found to be 99.33 and 100.35%, The %RSD was less than 2%, which shows high percentage amount found in between 98% to 102% indicates the analytical method that concluded.

4. Precision:-

The method was established by analyzing various replicates standards of Pseudoephedrine and Loratadine. All the solution was analyzed thrice in order to record any intra-day & inter-day variation in the result that concluded. The result obtained for intraday is shown in table below.

**Chromatogram of Precision:
Intraday Precision**

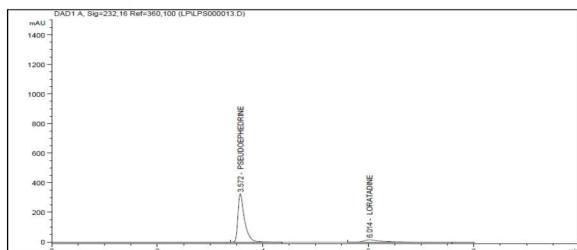


Figure 18: Chromatogram of Precision (24+1 mcg)

Table 28: Details of Chromatogram of Precision

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.572	3094.3227	5707	0.92	-
2	6.014	293.6155	5577	0.94	7.15

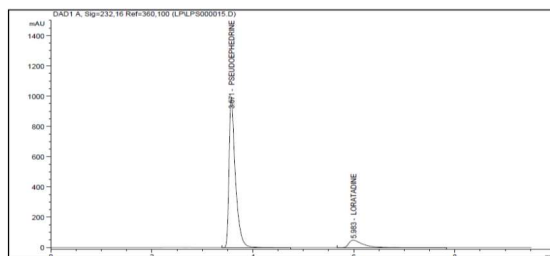


Figure 19: Chromatogram of Precision (72+3 mcg)

Table 29: Details of Chromatogram of Precision

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.571	8570.50098	5590	0.91	-
2	5.983	913.95496	5711	0.91	7.18

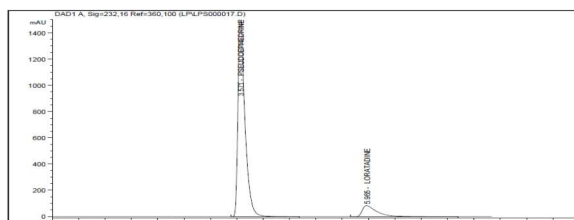


Figure 20: Chromatogram of Precision (120+5 mcg)

Table 30: Details of Chromatogram of Precision (120+5 mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.571	14116.2	5264	0.90	-
2	5.965	1538.3342	5730	0.90	7.08

Inter-day precision

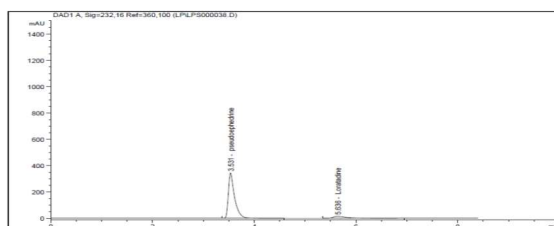


Figure 21: Chromatogram Inter-day precision 24+1 mcg-01

Table 31: Details of Chromatogram of Precision (24+1 mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.531	3098.48901	5833	0.99	-
2	5.636	295.2266	5539	0.92	6.46

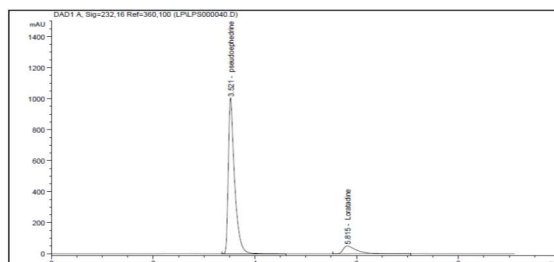


Figure 22: Chromatogram Inter-day precision 72+3 mcg-02

Table 32: Details of Chromatogram of Precision (72+3 mcg-02)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.521	8576.9599	5653	0.90	-
2	5.815	902.28467	5700	0.91	7.01

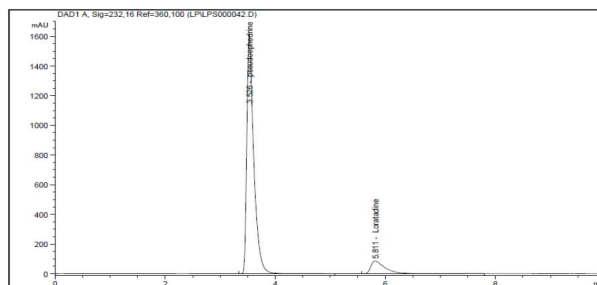


Figure 23: Chromatogram Inter-day precision 120+5 mcg-01

Table 33: Details of Chromatogram of Precision (120+5 mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.526	14113.9	5353	0.90	-
2	5.811	1549.79626	5771	0.98	6.96

Table 34: Result of Intra day and Inter day Precision studies on RP-HPLC for Pseudoephedrine and Loratadine

METHOD	Drug	Conc ⁿ (µg/ml)	Intraday Precision		Interday Precision	
			Mean± SD	%Amt Found	Mean± SD	%Amt Found
Rp-HPLC METHOD	PDE	24	3095.18±1.21	98.45	3096.63±2.62	98.50
		72	8565.44±7.16	99.34	8573.34±5.12	99.44
		120	14126.20±14.14	100.18	14120.40±10.18	100.14
	LTD	1	291.76±2.63	100.17	295.29±0.08	101.31
		3	911.84±2.99	99.87	904.68±3.39	99.11
		5	1537.46±1.23	100.17	1544.56±7.40	100.63

*Mean of each 2 reading for RP-HPLC

Intraday and Inter day Precision studies on RP-HPLC for Pseudoephedrine and Loratadine which shows the high precision % amount in between 98% to 102% indicates to analytical method that concluded.

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 (± 1 ml/min-1) proportion and the flow rate was varied by

(± 1 ml/min-1), and wavelength change (± 1 ml/min-1) of optimized chromatographic condition. The results of robustness studies are shown below. Robustness parameters were also found satisfactory; hence the analytical method would be concluded.

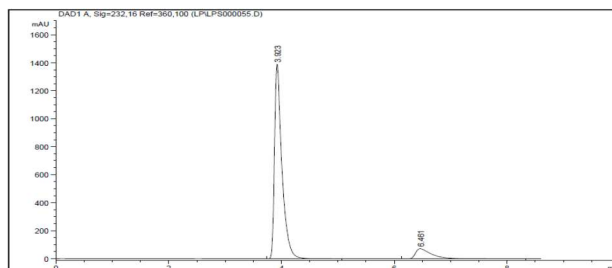


Figure 24: Chromatogram of Flow rate change 0.9ml (96+4 mcg)

Table 35: Details of Chromatogram of Flow rate change 0.9ml (96+4 mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.923	12608.5	5124	0.99	-
2	6.461	1370.2072	5025	0.98	7.35

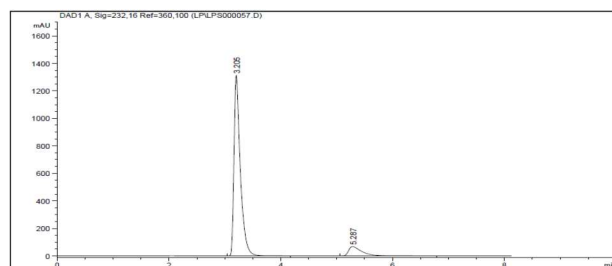


Figure 25: Chromatogram of Flow rate change 1.1 ml (96+4 mcg)

Table 36: Details of Chromatogram of Flow rate change 1.1 ml (96+4 mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.205	10303.9	5502	0.91	-
2	5.287	1115.4397	5791	0.90	7.03

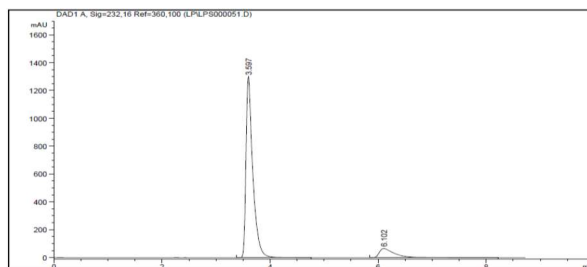


Figure 26: Chromatogram of Mobile phase composition change 36 ml Methanol+ 64 ml 0.1%OPA

Table 37: Details of Chromatogram of Mobile phase composition change 36 ml Methanol+ 64 ml 0.1 %OPA

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.597	11307.9	5654	0.90	0.0000
2	6.102	1227.3674	5765	0.98	7.41

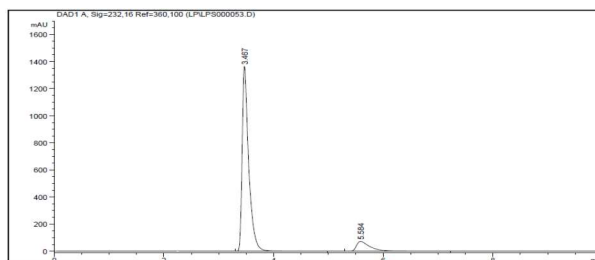


Figure 27: Chromatogram of Mobile phase composition change 38 ml Methanol+62 ml 0.1% OPA

Table 38: Details of Chromatogram of Mobile phase composition change 38 ml Methanol+ 62 ml 0.1 %OPA

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.467	11265.1	4784	0.50	-
2	5.584	1221.5361	2881	0.39	6.86

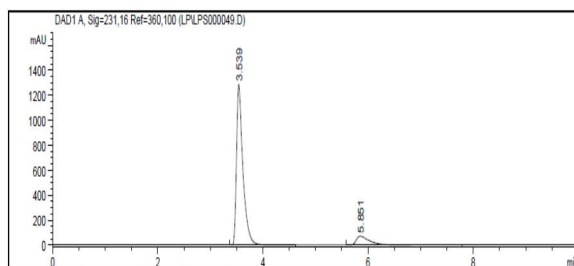


Figure 28: Chromatogram of wavelength change 231 nm

Table 39: Details of Chromatogram of wavelength change 231 nm

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.539	10854.0	5784	0.90	0.0000
2	5.851	1286.5114	5838	0.98	7.17

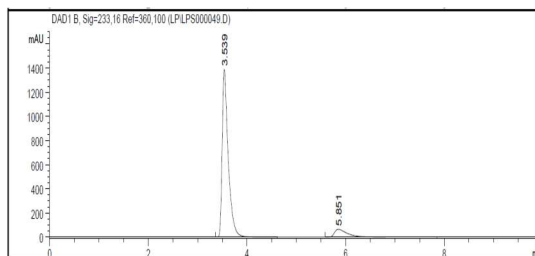


Figure 29: Chromatogram of wavelength change 233 nm

Table 40: Details of Chromatogram of wavelength change 233 nm

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.539	11730.4	5759	0.90	-
2	5.851	1173.9528	5838	0.98	7.16

Table 41: Result of Robustness Study of Pseudoephedrine

Parameters	Conc.($\mu\text{g}/\text{ml}$)	Amount of detected(mean \pm SD)	%RSD
Chromatogram of flow change 0.9ml	96	12612.4 \pm 5.52	0.04
Chromatogram of flow change 1.1 ml	96	10228.8 \pm 106.2	1.04
Chromatogram of comp change 36 ml Meoh+64ml OPA Water	96	11304.5 \pm 4.74	0.04
Chromatogram of comp change 38 ml Methanol+62 ml OPA Water	96	11272.2 \pm 10.11	0.09
Chromatogram of comp change wavelength change 231 nm	96	10865.4 \pm 16.19	0.15
Chromatogram of comp change wavelength change 233 nm	96	11745.8 \pm 21.78	0.19

Robustness Study of Pseudoephedrine

The changes were did flow rate (± 1 ml/ min-1), mobile phase composition (± 1 ml/ min-1), and Wavelength (± 1

ml/ min-1). %RSD for peak area was calculated which should be less than 2%.the result shown in analytical method that concluded.

Table 42: Result of Robustness Study of Loratadine

Parameters	Conc.($\mu\text{g}/\text{ml}$)	Amount of detected(mean \pm SD)	%RSD
Chromatogram of flow change 0.9ml	4	1364.6 \pm 7.96	0.58
Chromatogram of flow change 1.1 ml	4	1106.13 \pm 13.1	1.19
Chromatogram of comp change 36 ml Meoh+64ml OPA Water	4	1225.7 \pm 2.35	0.19
Chromatogram of comp change 38 ml Methanol+62 ml OPA Water	4	1224.48 \pm 4.16	0.34

Chromatogram of comp change wavelength change 231 nm	4	1280.6±8.43	0.66
Chromatogram of comp change wavelength change 233 nm	4	1167.36±9.32	0.80

Robustness Study of Pseudoephedrine:

The changes were did flow rate (±1 ml/ min-1), mobile phase composition (±1 ml/ min-1), and Wavelength (±1 ml/ min-1). %RSD for peak area was calculated which should be less than 2%.the result shown in analytical method that concluded.

6. Limit Detection

The LOD is the lowest limit 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:

$$LOD = 3.3 (SD)/S$$

where, SD = Standard deviation of Y intercept
S = Slope

Limit of detection= 0.3449 (µg/mL) of Pseudoephedrine

Limit of detection= 0.01543 (µg/mL) of Loratadine

The LOD of Pseudoephedrine and Loratadine was found to be 0.3449 (µg/mL) and 0.18064 (µg/mL), analytical method that concluded.

7. Limit Quantification

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

The quantitation limit (LOQ) may be expressed as:

$$LOQ = 10 (SD)/ S$$

where, SD = Standard deviation Y intercept
S = Slope

Limit of Quantitation = 1.04525 (µg/mL)

Limit of Quantitation = 0.04677 (µg/mL)

The LOQ of Pseudoephedrine and Loratadine was found to be 1.04525 µg/mL and 0.04677 (µg/mL), analytical method that concluded.

Analysis of tablet formulation

Procedure

Weigh 20mg Pseudoephedrine and Loratadine combination tablets and calculated the average weight, accuracy weigh and transfer the sample equivalent to 187 mg Pseudoephedrine and Loratadine into 50 ml volumetric flask. Add about 50 ml Methanol of diluent and sonicate to dissolve it and make volume up to the mark with diluent. Mix well and filter through 0.45 µm filter. Further pipette 0.4 ml of the above stock solution into a 10 ml volumetric flask and dilute up to the mark with diluents. (96 µg/ml and 4 µg/ml). The simple chromatogram of test Pseudoephedrine and Loratadine Shown below in fig, the amounts of Pseudoephedrine and Loratadine per tablet were calculated by extrapolating the value of area from the calibration curve. Analysis procedure was repeated five times with tablet formulation. Tablet Assay for % Lable claim for %RSD Calculated.

Brand Name: Loratadine-12 hr

Total weight of 20 tab Powder wt. = 3.74 gms

Avg Powder Weight = 0.187 gms./Tab

Eq.Wt for 120 mg = 120 x 187/ = 187 mg

1) Take 187 mgs in 50 ml Methanol.= 2400 µgm/ml PDE and 100 µgm/ml DXT-II

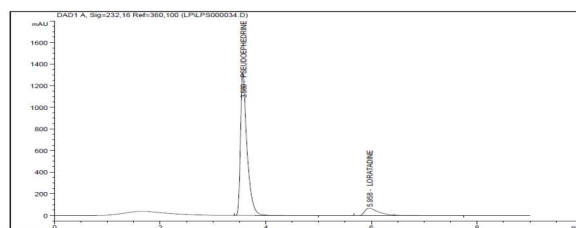


Figure 30: Chromatogram for Marketed Formulation (96+4 mcg)

Table 43: Details of Chromatogram of Marketed Formulation (96+4 mcg)

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.569	11240.2	4709	0.91	-
2	5.958	1220.8638	12848	0.99	7.29

Table 44: Analysis of marketed formulation.

Assay	Drug	Conc	Area	%Lable Claim	SD	%RSD
Rp-HPLC Method	PDE	96	10843.30	98.91	0.043	0.045
	LTD	4	1220.864	99.75	0.015	0.384
	PDE	96	10836	98.84	0.043	0.045
	LTD	4	1214.154	99.21	0.382	0.384
	PDE	96	10837.50	98.85	0.043	0.045
	LTD	4	1224.220	100.02	0.382	0.384

Analysis of marketed formulation were also % Lable Claim was found to be 98-101% Satisfactory are concluded.

9. Ruggedness

The degree of reproducibility of test result obtains by the analysis of same sample under variety of Condition. Such as different analyst, laboratory Different instrument.

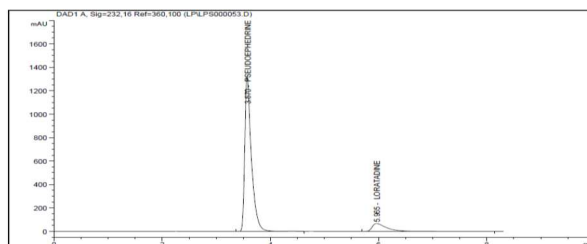


Figure 31: Chromatogram for Analyst-1 (96+4 mcg)

Table 45: Analysis of Analyst-1 (96+4 mcg)

R.T	AREA	TH.PLATES	SYMM
3.570	11238.3	5799	0.91
5.965	1216.2511	5866	0.99

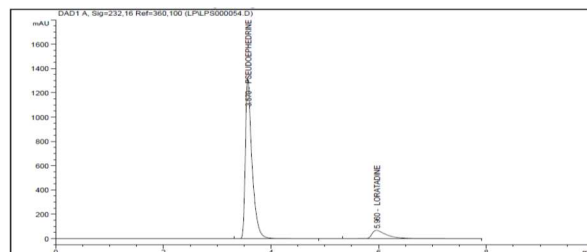


Figure 32: Chromatogram for Analyst-II (96+4 mcg)

Table 46: Analysis of Analyst-II (96+4 mcg)

R.T	AREA	TH.PLATES	SYMM
3.570	11248.2	5667	0.91
5.960	1213.6647	5795	0.99

Specificity and Selectivity

The analyses should have no interference from the extraneous components and be well resolved from them. Specificity is the procedure to detect quantitatively the analyst in presence of component that may be expected to

be present in the sample matrix, while selectivity is the procedure to detect qualitatively the analyst in presence of components that may be expected to be present in the sample matrix.

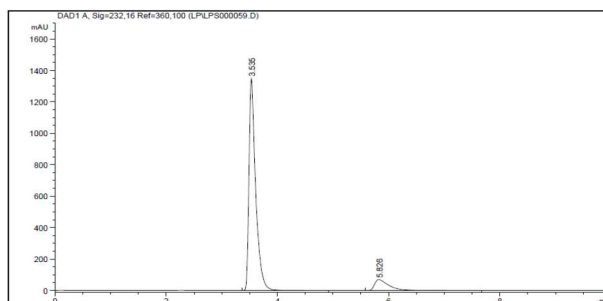


Figure 33: Chromatogram of Specificity and Selectivity (96+4 mcg)

Table 47: Details of Chromatogram of Specificity and Selectivity

No.	RT[min]	Area[mV*s]	TP	TF	Resolution
1	3.535	11242.3	5870	0.91	-
2	5.826	1223.33850	5924	0.99	7.22

FORCED DEGRADATION STUDIES

Forced degradation study was performed to evaluate the stability of the developed method using the stress conditions like exposure of sample solution to acid (0.1 N

HCl), base (0.1 N NaOH), Hydrogen peroxide (H₂O₂) and Neutral. Investigation was done for the degradation products.

Table 48: Results of Forced degradation studies of Pseudoephedrine

Stress conditions	PDE		
	(%)		
	Degradation 2Hr	4 HR	24 HR
Acetic hydrolysis	6.96	7.31	8.09
Alkaline hydrolysis	5.92	7.62	9.17

Peroxide Degradation	3.61	3.93	4.02
Neutral Degradation	-	0.35	
Thermal 24 hrs	-		1.25
Photo 21 hrs			1.29

Table 49: Results of Forced degradation studies of Loratadine

Stress conditions	LTD		
	(%) Degradation 30 MIN	4 HR	24 HR
Acetic hydrolysis	6.51	8.70	8.72
Alkaline hydrolysis	8.41	10.56	10.56
Peroxide Degradation	12.54	13.50	13.81
Neutral Degradation	-	0.19	-
Thermal 24 hrs	-		1.34
Photolytic 21 hrs			1.04

7.4.1 Degradation Pseudoephedrine and Loratadine

Acid hydrolysis Degradation

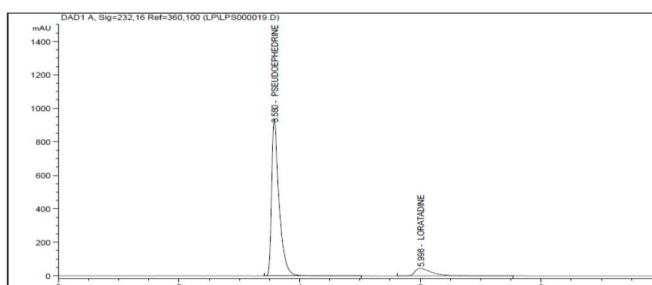


Figure 34: Chromatogram of Acid hydrolysis PDE +LTD AFTER 1hr

Table 50: Chromatogram of Acid hydrolysis PDE + LTD AFTER 1 hr

No.	RT[min]	Area[mV*s]	Area %
1	3.580	7997.9414	6.96
2	5.998	855.5275	6.51

In this chromatogram of acid degradation has led to formation of degrading and calculate % Degradation of drug 6.96 % and 6.51%.

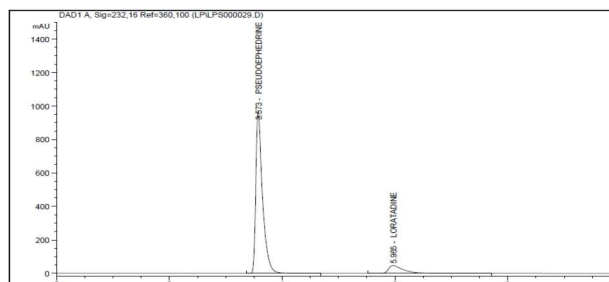


Figure 35: Chromatogram of Acid hydrolysis PDE +LTD AFTER 4 hr

Table 51: Chromatogram of Acid hydrolysis PDE + LTD AFTER 4 hr

No.	RT[min]	Area[mV*s]	Area %
1	3.573	7968.5293	7.31
2	5.965	835.3246	8.70

In this chromatogram of acid degradation has led to formation of degrading and calculate % Degradation of drug 7.31 % and 8.70 %.

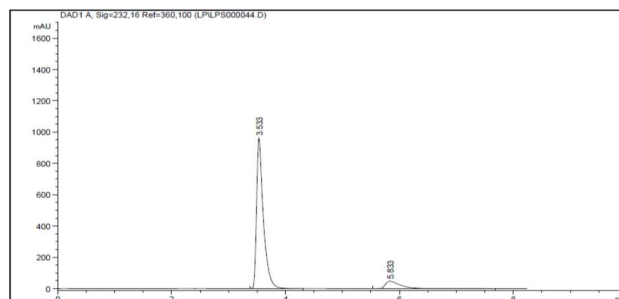


Figure 36: Chromatogram of Acid hydrolysis PDE +LTD AFTER 24 hr

Table 52: Chromatogram of Acid hydrolysis PDE + LTD AFTER 24 hr

No.	RT[min]	Area[mV*s]	Area %
1	3.533	7900.9384	8.09
2	5.833	835.4424	8.72

In this chromatogram of acid degradation has led to formation of degrading and calculate % Degradation of drug 8.09 % and 8.72 %.

Alkali hydrolysis degradation

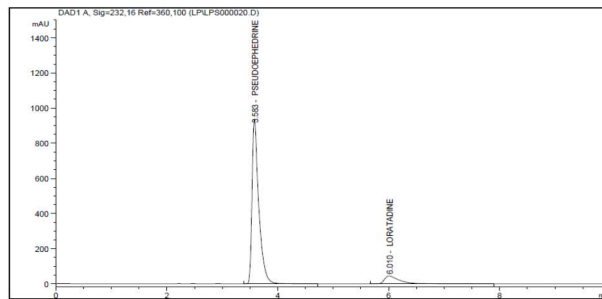


Figure 37: Chromatogram Alkali hydrolysis PDE + LTD 30 MIN

Table 53: Chromatogram Alkali hydrolysis PDE + LTD 30 MIN

No.	RT[min]	Area[mV*s]	Area%
1	3.583	8087.9892	5.92%
2	6.010	838.1708	8.41%

In this chromatogram of alkali degradation has led to formation of degradant and calculate % Degradation of drug 5.92%- 8.41%.

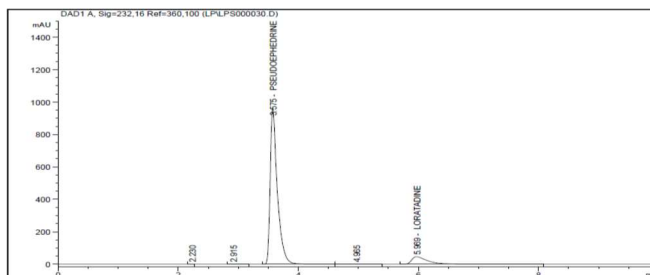


Figure 37: Chromatogram Alkali hydrolysis PDE + LTD 4 Hr

Table 54: Chromatogram Alkali hydrolysis PDE + LTD 4Hr

No.	RT[min]	Area[mV*s]	Area%
1	3.575	7941.1235	7.62
2	5.969	818.4668	10.56%

In this chromatogram of alkali degradation has led to formation of degradant and calculate % Degradation of drug 7.62- 10.56 %.

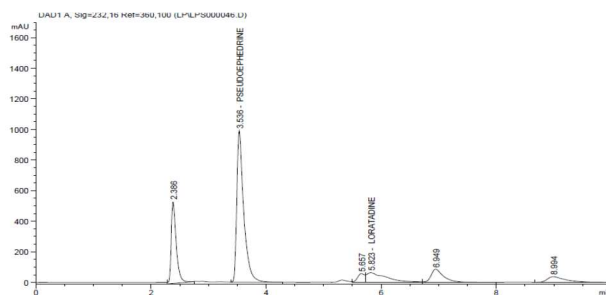


Figure 38: Chromatogram Alkali hydrolysis PDE + LTD 24 Hr

Table 55: Chromatogram Alkali hydrolysis PDE + LTD 24Hr

No.	RT[min]	Area[mV*s]	Area%
1	3.536	7941.1235	9.17
2	5.823	791.7575	10.56%

In this chromatogram of alkali degradation has led to formation of degradant and calculate % Degradation of drug 100.0-10.56%.

Hydrogen Peroxide Degradation

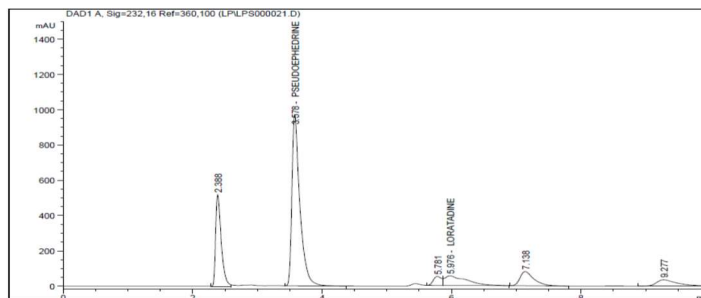


Figure 39: Chromatogram of Hydrogen Peroxide PDE+LTD 1 Hr

Table 56: Chromatogram of Hydrogen Peroxide PDE+LTD 1 Hr

No.	RT[min]	Area[mV*s]	Area %
1	3.578	8286.5820	3.61
2	5.976	800.3488	12.54

In this chromatogram of H₂O₂ degradation has led to formation degrading and calculate % Degradation of drug 3.61 and 12.54%.

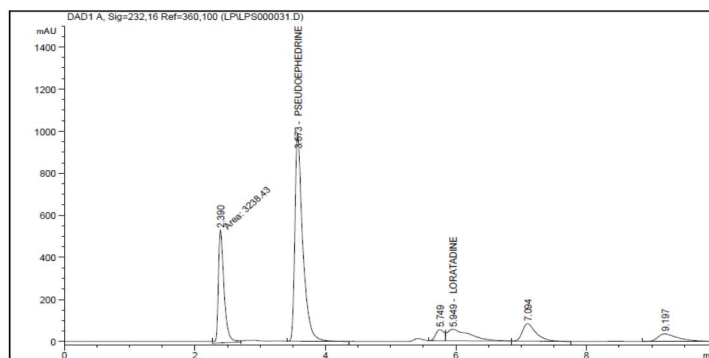


Figure 40: Chromatogram of Hydrogen Peroxide PDE+LTD 4Hr

Table 57: Chromatogram of Hydrogen Peroxide PDE+LTD 4 Hr

No.	RT[min]	Area[mV*s]	Area %
1	3.573	8250.88	3.93
2	5.949	788.5448	13.50

In this chromatogram of H₂O₂ degradation has led to formation degrading and calculate % Degradation of drug 3.93% and 13.50%.

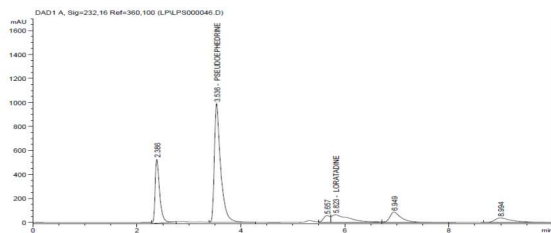


Figure 41: Chromatogram of Hydrogen Peroxide PDE+LTD 24Hr

Table 58: Chromatogram of Hydrogen Peroxide PDE+LTD 24 Hr

No.	RT[min]	Area[mV*s]	Area %
1	3.536	8250.88	4.02
2	5.823	791.7575	13.81%

In this chromatogram of H₂O₂ degradation has led to formation degrading and calculate % Degradation of drug 4.02 and 13.81%.

Neutral degradation

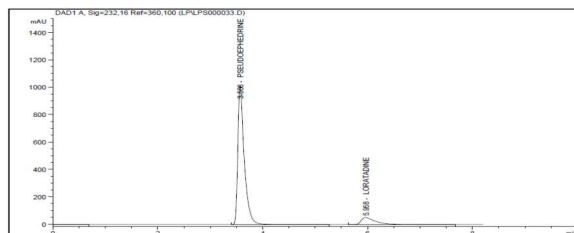


Figure 42: Chromatogram of Neutral PDE+LTD 4 Hr

In this chromatogram of H₂O degradation has led to formation of degrading and calculate % Degradation of drug 0.35 and 0.19%.

Thermal

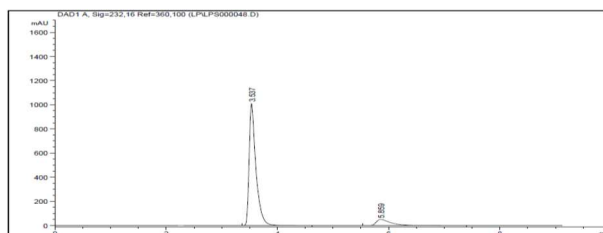


Figure 43: Chromatogram of thermal PDE+LTD 4 Hr

Photolytic

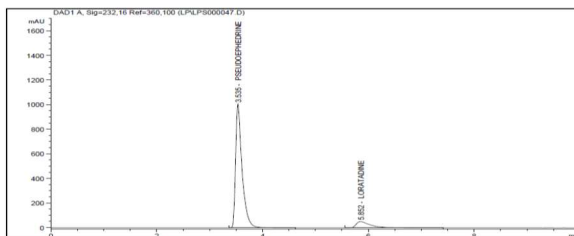


Figure 44: Chromatogram of photolytic PDE+LTD 24 Hr

Stability study of Pseudoephedrine & Loratadine indicated good results. Stress degradation of Pseudoephedrine & Loratadine was carried out with the help of various degradation agents or methods like Acid, Base, Hydrogen peroxide, Neutral. After degradation, the development of chromatogram indicated the formation of degradation product. These degradation products with different RF value were well separated from each other. The % drug recovery was calculated based on how much degradation of the standard drug occurred after degradation. It was determined using the peak area of standard drug and the drug after degradation.

The generally recommended degradation varies between 10-15% degradation. Very mild degradation was observed during Acid, Base, and Hydrogen peroxide & Neutral degradation for Pseudoephedrine & Loratadine.

CONCLUSION

The present study successfully validated a stability-indicating RP-HPLC method for the simultaneous estimation of Pseudoephedrine and Loratadine in combined pharmaceutical dosage forms. The analytical method demonstrated satisfactory performance characteristics with respect to linearity, accuracy, precision, repeatability, and robustness in accordance with ICH Q2(R1) guidelines. Low %RSD values and acceptable recovery percentages confirmed the reproducibility and reliability of the analytical procedure for routine pharmaceutical analysis.

The forced degradation studies performed under acidic, alkaline, oxidative, and neutral conditions established the stability-indicating capability of the method by effectively resolving degradation products from the principal analyte peaks. The method exhibited sufficient sensitivity, selectivity, and robustness for the quantitative estimation of both drugs in marketed tablet formulations without interference from excipients or degradation impurities.

The validated RP-HPLC method can therefore be effectively utilized for routine quality control analysis, stability testing, and regulatory evaluation of pharmaceutical formulations containing Pseudoephedrine and Loratadine. Additionally, the method may serve as a suitable analytical tool for future formulation development and stability assessment studies.

REFERENCES

1. Blessy, M., Patel, R. D., Prajapati, P. N., & Agrawal, Y. K. (2014). Development of forced degradation and stability indicating studies of drugs—A review. *Journal of Pharmaceutical Analysis*, 4(3), 159–165. <https://doi.org/10.1016/j.jpha.2013.09.003>
2. Brunton, L. L., Hilal-Dandan, R., & Knollmann, B. C. (2018). *Goodman & Gilman's the pharmacological basis of therapeutics* (13th ed.). McGraw-Hill Education.
3. International Council for Harmonisation. (2005). ICH Q2(R1): Validation of analytical procedures: Text and methodology. ICH Harmonised Tripartite Guideline.
4. Snyder, L. R., Kirkland, J. J., & Dolan, J. W. (2010). *Introduction to modern liquid chromatography* (3rd ed.). John Wiley & Sons.
5. Sweetman, S. C. (2009). *Martindale: The complete drug reference* (36th ed.). Pharmaceutical Press.
6. Watson, D. G. (2016). *Pharmaceutical analysis: A textbook for pharmacy students and pharmaceutical chemists* (4th ed.). Elsevier.
7. Kazakevich, Y., & Lobrutto, R. (2007). *HPLC for pharmaceutical scientists*. John Wiley & Sons.
8. Snyder, L. R., Kirkland, J. J., & Dolan, J. W. (2010). *Introduction to modern liquid chromatography* (3rd ed.). John Wiley & Sons.
9. Sharma, B. K. (1981). *Instrumental methods of chemical analysis*. Krishna Prakashan Media.
10. Remington, J. P. (2006). *Remington: the science and practice of pharmacy* (Vol. 1). Lippincott Williams & Wilkins.
11. Satoskar, R. S., Rege, N., & Bhandarkar, S. D. (2017). *Pharmacology and pharmacotherapeutics*. Elsevier Health Sciences.
12. ME, W. (1981). *Burger's Medicinal Chemistry*. New York: A Wiley Interscience Publication.
13. Davidson, A. G., Beckett, A. H., & Stenlake, J. B. (1997). *Practical Pharmaceutical Chemistry*.
14. Pharmacopoeia, I. (2007). *The Indian pharmacopoeia commission*. Central Indian Pharmacopoeia Laboratory, Ministry of Health and Family Welfare, Govt of India, Sector, 23.
15. Pharmacopoeia, B., & British Pharmacopoeia Commission. (2010). *Medicines and healthcare products regulatory agency*. London, 3(6), 1844.
16. IFPMA, G. (1995). ICH, Text on Validation of Analytical Procedures, ICH-Q2A. In *International Conference on Harmonisation* (pp. 2-3).