

Research Article

Method Development and Validation for Simultaneous Estimation of Cefpodoxime Proxetil and Dicloxacillin Sodium by Hydrotrophy Using UV Spectroscopy

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ABSTRACT

The present work describes the development of accurate, precise and high economic value for the simultaneous estimation of Cefpodoxime proxetil and Dicloxacillin sodium by hydrotrophy method using UV spectroscopy was developed and validated. The method was performed on Lab India, model UV-3000 spectrophotometer with UV win software. 1M urea was used as a solvent for analysis. Detection was carried out at 230nm for Cefpodoxime proxetil and 210 nm for Dicloxacillin sodium. Linearity was observed at concentration range 2-20 µg/ml for Cefpodoxime proxetil and 5-30 µg/ml for Dicloxacillin sodium. Correlation coefficient for Cefpodoxime proxetil and Dicloxacillin sodium was found to be 0.993 and 0.9998 respectively. The method can be successfully applicable to routine analysis.

Keywords: Cefpodoxime proxetil, Dicloxacillin sodium, 1M urea solution, Hydrotrophy.

INTRODUCTION

Hydrotrophy is a phenomenon in which solubility of poorly water soluble and water insoluble drugs can be increased by addition of some anionic organic salts which are commonly called as Hydrotropic agents/ Hydrotropes. The mechanism by which it improves solubility is closely related to complexation involving weak interaction between the hydrotropic agents like Benzoic acid, Salicylic acid, Urea etc¹⁻³.

Cefpodoxime proxetil is third generation Cephalosporin antibiotic. Chemically it is (7R)-7-[[2Z]-2-(2-amino-1,3-thiazol-4-yl)methoxyiminoacetyl]amino}-3-methoxymethyl)-8-oxo-5-thia-1-azabicyclo[4.2.0]2-oct-2-enecarboxylic acid (Fig-1). It is active against wide spectrum of Gram positive and Gram negative bacteria. Cefpodoxime is inactivated by certain extended spectrum inhibition of cell wall synthesis. The active metabolite of cefpodoxime binds preferentially to binding protein₃, which inhibits production of peptidoglycan, the primary constituent of bacterial cell wall⁴⁻⁶.

Dicloxacillin sodium is penicillin derivative antibacterial drug which is resistant to penicillinase. Chemically it is (2S,5R,6R)-6-[[3-(2,6-dichlorophenyl)-5-methyloxazole-4-carbonyl]amino}-3,3-dimethyl-7-oxo-4-thia-1-azabicyclo[3.2.0]heptanes-2-carboxylic acid (Fig-2). It acts by inhibiting the synthesis of bacterial cell wall. It inhibits cross linkage between the linear peptidoglycan polymer chains that make up a major component of the cell wall of gram positive bacteria^{7,8}.

MATERIALS AND METHODS

Instrument

A Lab India UV/Visible double beam spectrophotometer model UV 3000 with software UV win was used for this method.

Chemical

Cefpodoxime proxetil (CFPX), Dicloxacillin sodium (DCLX) bulk powder was kindly gifted by Acme pharmaceuticals Ltd., Ahmedabad, India. Combined tablet formulations were procured from local market. All chemicals and reagents used were of analytical grade and purchased from Ranbaxy fine chemicals Ltd.

Preparation of 1M urea solution (Hydrotropic agent)

60g of urea was accurately weighed and taken into 1000ml volumetric flask and 500ml of water was added. The solution was shaken well until the solid dissolves. Then the volume was made up to 1000ml with distilled water to give 1M solution. This was further used as solvent and also as blank.

Preparation of standard stock solution

10mg of cefpodoxime proxetil and Dicloxacillin sodium were accurately weighed and taken in 100ml volumetric flask separately and make up the volume with 1M urea which gives final strength about 100µg/ml.

Selection of wavelength

Take appropriate volume of Cefpodoxime proxetil and Dicloxacillin sodium of about 10ml and 5ml respectively in 100ml volumetric flask and make up the volume with 0.1M urea. Scan the resulting solution in UV range (200-400nm). In the spectrum of Cefpodoxime proxetil and Dicloxacillin sodium 230nm and 210nm respectively is selected for simultaneous estimation.

Selection of analytical concentration

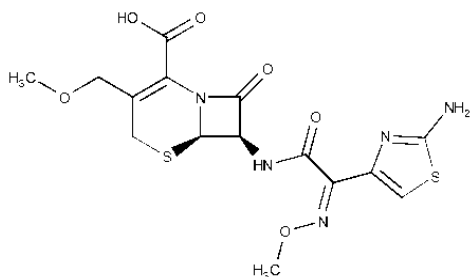


Figure 1: Structure of Cefpodoxime proxetil

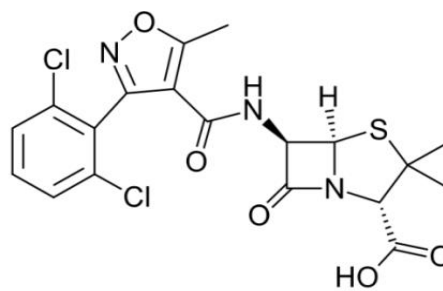


Figure 2: Structure of Dicloxacillin sodium

Table 1: Linearity results of CFPX and DCLX.

Concentration of CFPX ($\mu\text{g/ml}$)	Absorbance of CFPX	Concentration of DCLX ($\mu\text{g/ml}$)	Absorbance of DCLX
2	0.051	5	0.419
4	0.081	10	0.786
8	0.165	15	1.165
12	0.263	20	1.502
16	0.386	25	1.887
20	0.465	30	2.243

From the standard stock solution of cefpodoxime proxetil, aliquots of 0.2, 0.4, 0.6, 0.8, 1.0ml were taken into a series of five 10ml volumetric flasks. The volume was made up to the mark with water to get solutions having the concentration range 2, 4, 6, 8, 10 $\mu\text{g/ml}$ of Cefpodoxime proxetil. Absorbances of the above solutions were measured at 208nm and 230nm.

From standard stock solution of Dicloxacillin sodium, aliquots of 0.5, 1.0, 1.5, 2.0, 2.5ml were taken into a series of five 10ml volumetric flasks. The volume was made up to mark with distilled water to get solutions having the concentration range 5, 10, 15, 20, 25 $\mu\text{g/ml}$ of Dicloxacillin sodium. Absorbances of the above solutions were measured at 208nm and 230nm.

Analysis of commercial formulation

Twenty tablets were weighed and the average weight was calculated. A quantity of powdered tablets equivalent to 200mg and 500mg of cefpodoxime proxetil and Dicloxacillin sodium was weighed accurately and transferred into 100ml volumetric flask. The solution was diluted to 100ml with 0.1M urea. Then 10ml of the above solution was taken into 100ml volumetric flask and diluted with methanol which gives 200 $\mu\text{g/ml}$ of Cefpodoxime proxetil and 500 $\mu\text{g/ml}$ of Dicloxacillin sodium. 5ml of the above solution was diluted up to 100ml with methanol which gives 10 $\mu\text{g/ml}$ of cefpodoxime proxetil and 25 $\mu\text{g/ml}$ Dicloxacillin sodium in the formulation was determined using the formula of simultaneous equation method.

Method validation⁹⁻²²

Linearity

From the standard standard stock solution, appropriate aliquots were taken into a series of five 10ml volumetric flasks. The volume was made up to mark with solvent to get solutions having the concentration range 2, 4, 6, 8, 10 and 5, 10, 15, 20, 25 $\mu\text{g/ml}$ of Cefpodoxime proxetil and

Table 2: Parameters of CFPX and DLX

Parameters	CFPX	DCLX
Linearity range($\mu\text{g/ml}$)	2-20	5-30
Correlation coefficient(r^2)	0.993	0.9998
Slope(m)	0.0233	0.0729
Intercept(c)	-0.0076	0.0577
Regression equation	y=mx+c y= absorbance, x= concentration	

Dicloxacillin sodium respectively. Absorbances of the above solutions were measured at 230nm and 210 nm respectively. Calibration curve was plotted taking concentration on x-axis and absorbance on Y-axis. The results were given in table-1 & 2 and Fig-3.

Accuracy and Recovery studies

To check the accuracy of the proposed method, recovery studies were carried out by standard addition method at three different levels according to ICH guidelines. A series of solutions of cefpodoxime proxetil and Dicloxacillin sodium at 80%, 100%, and 120% of the standard preparation in the ratio of the formulation were prepared and checked for accuracy by determining the absorbance values at λ_{max} of 230nm and 210nm respectively. To a fixed concentration of the formulation, varying concentration of pure drug solutions was added and percentage recoveries were calculated. The result of the analysis is given in Table-3.

Precision

Precision studies were performed at three different concentrations in the ratio of the formulation, each concentration prepared three times for Cefpodoxime proxetil and Dicloxacillin sodium together. The result of the analysis is given in Table-4&5.

RESULTS AND DISCUSSION

The proposed method for determination of CFPX and DCLX in tablet dosage form was found to be precise, accurate and also has more economic value. The present study describes the method development and validation for simultaneous estimation of CFPX and DCLX in tablet dosage form by hydrotropy using UV spectroscopy. The λ_{max} of CFPX and DCLX were found to be 230nm and 210nm respectively. The linearity was observed in concentration range of 2-20 $\mu\text{g/ml}$ of the test concentration

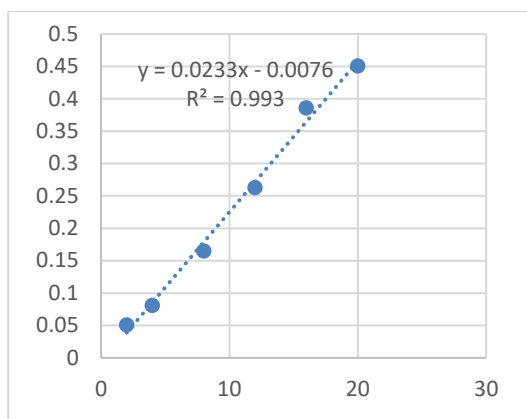


Figure 3a: Linearity graph of CFPX.

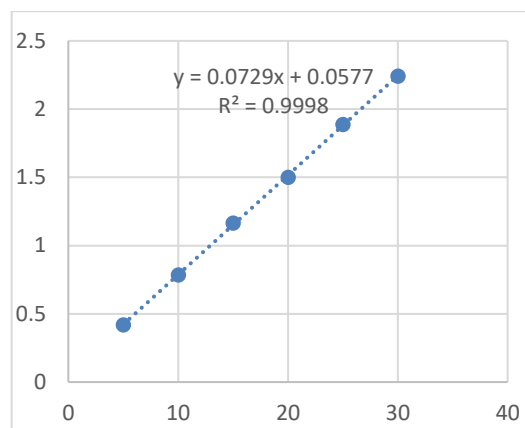


Figure 3b: Linearity graph of DCLX.

Table 3: Accuracy results of CFPX and DCLX.

Level	Spike (µg/ml)		Absorbance of spike		Found conc.		% recovery		S. D		% R.S. D	
	CFP	DCLX	230n	210n	CFPX	DCLX	CFP	DCLX	CFPX	DCLX	CFPX	DCLX
80%	X											
	8	20	0.172	1.511	7.708	19.935	96.35	99.675				
	8	20	0.169	1.508	7.579	19.894	94.73	99.470	1.544	0.201	1.632	0.202
100%	8	20	0.165	1.504	7.407	19.839	92.58	99.195				
	10	25	0.225	1.887	9.982	25.093	99.82	100.37	1.086	0.219	1.101	0.278
	10	25	0.223	1.885	9.896	25.065	98.96	100.26				
120%	10	25	0.219	1.882	9.721	25.024	97.21	100.09				
	12	30	0.269	2.249	11.871	30.058	98.92	100.19	0.894	0.114	0.915	0.114
	12	30	0.265	2.247	11.699	30.031	97.49	100.10				
	12	30	0.263	2.243	11.613	29.976	96.77	99.92				

Table 4: Results of Intraday precision of CFPX and DCLX.

Concentration		Absorbance		Found concentration		% Assay	
CFPX	DCLX	CFPX	DCLX	CFPX	DCLX	CFPX	DCLX
100%	100%	0.231	1.889	10.240	25.120	102.4	100.48
100%	100%	0.226	1.882	10.026	25.025	100.26	100.1
100%	100%	0.225	1.887	9.982	25.093	99.82	100.37
100%	100%	0.229	1.885	10.154	25.065	101.54	100.26
100%	100%	0.230	1.893	10.197	25.175	101.97	100.7
100%	100%	0.229	1.886	10.154	25.079	101.54	100.31
AVERAGE						101.19	100.37
SD						0.338	0.755
%RSD						0.334	0.752

and the correlation coefficient (r^2) for the calibration curve was found to be 0.993 for CFPX and concentration range of 5-30µg/ml of the test concentration and the correlation coefficient (r^2) for the calibration curve was found to be 0.9998 for DCLX. The results of recovery 92.58-99.82% for CFPX and 99.195-100.37% for DCLX indicating accuracy of the method and good recovery of the drug. The %RSD for tablet analysis is less than 2 which indicate high degree of precision. The assay of the sample shows the drug present within the specification limit indicates the purity of the formulation. Hence it can be concluded that the method of hydrotrophy using UV spectroscopy is accurate, precise and also has more economic value. It can

be employed successfully for the estimation of CFPX and DCLX in tablet dosage form by hydrotrophy method using UV spectroscopy.

CONCLUSION

A relatively simple, specific and sensitive method was developed for the simultaneous estimation of CFPX and DCLX in tablet dosage forms. The proposed and validated UV spectrophotometric method was highly sensitive, reproducible, accurate, and precise and also has more economic value. The developed method was validated as per ICH (Q2B) guidelines and was found to be applicable for routine quantitative analysis of CFPX and DCLX by

Table 5: Results of Interday precision of CFPX and DCLX.

Concentration		Absorbance		Found concentration		% Assay	
CFPX	DCLX	CFPX	DCLX	CFPX	DCLX	CFPX	DCLX
100%	100%	0.231	1.889	10.240	25.120	102.4	100.48
100%	100%	0.228	1.887	10.111	25.093	101.11	100.37
100%	100%	0.225	1.885	9.982	25.065	99.82	100.26
100%	100%	0.223	1.883	9.896	25.038	98.96	101.15
100%	100%	0.231	1.892	10.240	25.161	102.4	100.64
100%	100%	0.227	1.884	10.068	25.052	100.68	100.20
AVERAGE						100.89	100.51
SD						0.8	0.846
%RSD						0.792	0.841

UV spectroscopy in dosage forms. The developed and validated UV spectroscopic method was found to be better than previous methods because it is rapid, having high economic value and also environmental friendly procedure that allows the analysis of large number of samples in a short period of time. The method has been found to be better than the previously reported methods due to its high economic value, wide range of linearity, lack of extraction procedures. Hence above method can be used in quality control for routine analysis of tablets of CFPX and DCLX without any interference.

REFERENCES

1. R.M. Verma, Analytical chemistry theory and practice, CB 3rd edition, CBS Publishers, 2007, page no: 3.
2. Ashuthoshkar; "Pharmaceutical Analysis", C.B.S Publications, New Delhi, 2009, Pg.No:243-269.
3. <http://www.sciencedirect.com/science/article/pii/S2405722315300360>.
4. <https://en.wikipedia.org/wiki/Cefpodoxime>.
5. <http://www.drugbank.ca/drugs/DB01416>.
6. <http://www.rxlist.com/vantin-drug/indications-dosage.htm>.
7. <https://en.wikipedia.org/wiki/Dicloxacin>.
8. <http://www.drugbank.ca/drugs/DB00485>.
9. Michael Swartz, Analytical method development and validation, 2009, Page no: 25-27, 60-67.
10. Chung Chow Chan, Herman Lam; Analytical method 444 validation and instrument performance verification, Page no: 37, 41, 43, and 47.
11. Anand.K & Chatwal.G; " Instrumental Methods of Chemical Analysis"; Edn.4, Himalaya Publications, Mumbai, , 2000 Pg.No:146-165.
12. Patel Advaita B et al; Development and Validation of Simultaneous Estimation of Cefpodoxime proxetil and Dicloxacin sodium by Spectroscopic method in combined tablet dosage form International Journal of Chem. Tech Research ISSN: 0974-4290 Vol.6, No.5, pp 2615-2619.
13. Ceema Mathew et al; Cefpodoxime Proxetil: A New Stability Indicating RP-HPLC Method International Scholarly Research Notices Volume 2013 (2013), Article ID 328157, 8 pages.
14. Comparison of Three RP-HPLC Methods for Analysis of Cefpodoxime Proxetil and Related Substances Chromatographia Volume 65, Issue 1, pp 69-71.
15. Hamza M.A.et al; Development and Validation of RP-HPLC for Simultaneous Estimation of Cefpodoxime Proxetil and Dicloxacin Sodium Tablets Asian Journal of Research in Pharmaceutical Science Volume: 4, Issue: 4, 155-159.
16. Dipti B. Patel et al; Development and Validation of RP-HPLC Method for Simultaneous Estimation of Cefpodoxime Proxetil and Dicloxacin Sodium in Tablets Indian Journal of Pharm. Sci. 2013 Jan-Feb; vol. 75, Issue 1: p.31–35.
17. Jagatap, C. A et al; Development and Validation of Simultaneous Spectrophotometric Estimation of Cefpodoxime Proxetil and Ofloxacin in Tablet Dosage Form Journal of Pharmacy Research; 2012, Vol. 5 Issue 6, p3181.
18. Vaghela J.P et al; Development and validation of the RP-HPLC method for the estimation of cefpodoxime proxetil and dicloxacin in their combined dosage form and its applications to the dissolution study Int. J. Pharm. Sci. Rev. Res., 15(2), 2012; no.10, 50-56.
19. Baig et al; Simultaneous estimation of Azithromycin and cefpodoxime proxetil from its tablet dosage form by UV Visible spectroscopic methods World journal of pharmacy and pharmaceutical sciences Volume 4, Issue 10, 1420-1430.
20. G. Patel G et al; Simultaneous estimation of Cefpodoxime proxetil and Ofloxacin in tablet dosage form using RP-HPLC J App Pharm Sci. 2014; 4(5): 046-050.
21. Mirza Shahed Baig et al; Simultaneous estimation of Levofloxacin and cefpodoxime proxetil from its tablet dosage form by UV and Visible Spectroscopic World journal of pharmacy and pharmaceutical sciences Volume 4, Issue 10, 1562-1572.
22. Vilas D. Patil Spectrophotometric method for estimation of cefpodoxime proxetil and ofloxacin in tablet dosage form by simultaneous equation method International journal of Pharmacy and life sciences Vol. 3, Issue 9: September: 2012, 1982-1984.