

INTERNATIONAL JOURNAL OF PHARMACY AND ANALYTICAL RESEARCH

IJPAR |Vol. 4 | Issue 4 | Oct - Dec -2015 Journal Home page: www.ijpar.com

Research article

Open Access

ISSN:2320-2831

Development and validation of stability indicating RP-HPLC method for the estimation of Cobicistat in bulk and tablet dosage form

Byasabhusan Das^{1*}, Vinesh Kumar²

¹Research scholar, Department of Pharmacy, Sunrise University, Alwar, Rajasthan. ²Department of Pharmacy, Sunrise University, Alwar, Rajasthan

*Corresponding Author: Byasabhusan Das Email: byasabhusandas@gmail.com

ABSTRACT

A validated new stability indicating RP-HPLC method for the quantitative estimation of Cobicistat in bulk and Tablet dosage form was developed as per ICH guidelines. The analyte was injected into Symmetry (C_{18}) Column, 250 mm x 4.6 mm i.d. and 5µm particle size, maintained at ambient temperature and effluent was monitored at 247 nm. The mobile phase was consisted of HPLC Grade Methanol and HPLC Grade Water in the ratio of 35:35 v/v. The flow rate was maintained at 1.0 mL/min. The calibration curve for Cobicistat was linear from 0 to 70µg/mL (r2=0.999). The inter-day and intra-day precision was found to be within limits. The Limit of detection (LOQ) and Limit of quantification (LOQ) for Cobicistat was found to be 0.09 and 0.27µg/mL respectively. The average % recovery for Cobicistat was 98-102% and repeatability was found to be satisfactory. This RP-HPLC method is suitable for determining the concentration of Cobicistat in bulk and Tablet dosage form and it can applied for routine analysis for estimation of the Cobicistat.

Keywords: Cobicistat, RP-HPLC, Method Development, Validation.

INTRODUCTION

Cobicistat, trade name Tybost (formerly GS-9350), is a licensed drug for use in the treatment of infection with human immunodeficiency virus (HIV). Although it does not have any anti-HIV activity, cobicistat acts as a pharmacokinetic enhancer by inhibiting cytochrome P450 3A isoforms (CYP3A) and therefore increases the systemic exposure of co administered agents [1, 2] that are metabolized by CYP3A enzymes. More specifically, Cobicistat is indicated to increase systemic exposure of atazanavir or darunavir (once daily dosing regimen) in combination with other antiretroviral agents in the treatment of HIV-1 infection. Increasing systemic exposure of antiretrovirals (ARVs) without increasing dosage allows for better treatment [3] outcomes and a decreased side effect profile. Cobicistat is a CYP3A inhibitor indicated to increase systemic exposure of atazanavir or darunavir (once daily dosing regimen) in combination with other antiretroviral agents in the treatment of HIV-1 infection. It is not interchangeable [4] with ritonavir to increase systemic [5, 6] exposure of darunavir 600 mg twice daily, fosamprenavir, saquinavir, or tipranavir due to lack of exposure data. The use of cobicistat is not recommended with darunavir 600 mg twice daily, fosamprenavir, saquinavir or tipranavir. Complex or unknown mechanisms of drug interactions preclude extrapolation of ritonavir drug interactions [7, 8] to certain cobicistat interactions. Cobicistat and

ritonavir when administered with either atazanavir or darunavir may result in different drug interactions when used with concomitant medications. The IUPAC Name [9] of Cobicistat is (1,3-thiazol-5-yl)methyl N-[(2R,5R)-5-[(2S)-2-{[methy] ({[2-(propan-2-yl)-1,3-thiazol-4-yl] methyl}) carbamoyl] amino}-4-(morpholin-4-yl) butanamido]-1,6 diphenylhexan-2-yl] carbamate. The molecular formula [10, 11] for Rilpivirine is $C_{40}H_{53}N_7O_5S_2$. The Chemical Structure of Cobicistat is follows.

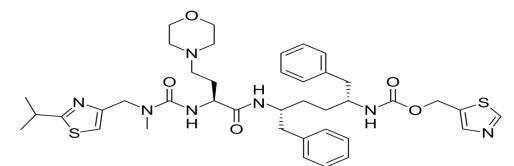


Fig-1: Chemical Structure of Rilpivirine

METHODOLOGY

Instruments used

Table-1:	Instruments	used
----------	-------------	------

S. No.	Instruments/Equipments/Apparatus
1.	HPLC WATERS with Empower2 Software with Isocratic with UV-Visible Detector (L-2400).
2	ELICO SL-159 UV – Vis spectrophotometer
3. 4.	High Precision Electronic Balance (SHIMADZU ATY224) Ultra Sonicator (Wensar wuc-2L)
5.	Thermal Oven
6.	Symmetry (C ₁₈) Column, 250 mm x 4.6 mm i.d. and 5µm particle size
7.	P ^H Analyzer (ELICO)
8.	Vaccum filtration Apparatus (BOROSIL)

Chemicals / reagents used

	Table-2: Chemicals used			
		Specifications		
S. No.	Name	Purity	Grade	Manufacturer/Supplier
1.	Doubled distilled water	99.9%	HPLC	Sd fine-Chem ltd; Mumbai
2.	Methanol	99.9%	HPLC	Loba Chem; Mumbai.
3.	Acetonitrile	99.9%	HPLC	Loba Chem; Mumbai.
4.	Potassium dihydrogen orthophosphate	99.9	L.R.	Sd fine-Chem ltd; Mumbai
5.	Orthophosphoric acid	99.9	L.R.	Sd fine-Chem ltd; Mumbai

METHOD DEVELOPMENT

HPLC instrumentation & conditions

The HPLC system employed was HPLC WATERS with Empower2 Software with Isocratic with UV-Visible Detector and automatic sampling system having Symmetry (C18) Column, 250 mm x 4.6 mm i.d. and 5µm particle size.

Chromatographic conditions

The analysis was carried on HPLC Symmetry C_{18} , 5µm, 25cmx4.6mm i.d. column with detection wavelength of 247.0 nm. Injection volume of 20.0 µL and maintaining a flow rate at 1.0ml/min.

Mobile phase

The mobile phase can be prepared by taking the HPLC Grade Methanol and HPLC Grade Water in the ratio of 35:65 v/v. The mobile phase [14] can be filtered through the 0.45 μ m filter membrane and degassed by using ultra sonication process. The prepared mobile phase is pumped through the stationary phase maintained at a flow rate of 1.0 ml/min.

Diluent

Mobile Phase preparation can be used as a diluent [15].

Preparation of Standard Solution:

Weighed exactly and transferred 10mg of Cobicistat Standard working [16] into a 10ml clean dry volumetric flask, add 6ml of diluent, sonicated for 15 minutes and volume make up to the mark with the same diluent. From the above prepared stock [17] solution, 5ml was pipette out in to a 10ml volumetric flasks and then make up to the volume with the diluent preparation.

Preparation of Test Solution

First take 10 tablets weighed and measure the average weight of each tablet. Then the weight is equivalent [18] to 1 tablet was weighed and transferred into a clean and 100ml volumetric flask, 50ml of diluent added and sonicated for 30 minutes, further the volume made up with the diluent preparation 9mobile phase) and filtered. From the resulted filtered [19] solution 1ml was pipette out into a 10ml volumetric flask and make up the volume up to mark with the 10ml of diluent.

RESULTS AND DISCUSSION

Accuracy

To establish the accuracy of the developed method and the recovery studies [12, 13] was performed by adding different quantities (80%, 100%, and 120%) of pure drug of Cobicistat was taken and added to the pre-analyzed formulation of concentration about 50μ g/ml. From that % recovery values was determined. The attained results were shown in following Table-3.

Sample ID	Concentration (µg/ml)			% Recovery of	Statistical Analysis
	Amount Injected	Amount Recovered	Peak Area	Pure drug	
S ₁ : 80 %	40	40.634	98329	101.585	Mean= 100.605%
S ₂ :80 %	40	40.204	97322	100.51	S.D. = 1. 0.936122
S ₃ : 80 %	40	39.888	96582	99.72	% R.S.D.= 0.930493
S ₄ : 100 %	50	50.982	122563	101.964	Mean= 99.90667%
S ₅ : 100 %	50	49.440	108952	98.88	S.D. = 1.781704
S ₆ : 100 %	50	49.438	118948	98.876	% R.S.D.= 1.783369
S ₇ : 120 %	60	59.94	143561	99.911	Mean= 99.868%
S ₈ : 120 %	60	59.202	141816	98.67	S.D. = 1.177089
S ₉ : 120 %	60	60.614	145123	101.023	%R.S.D. = 1.178645

Table-3: Accuracy Readings

PRECISION

Repeatability

The precision of every method was determined separately from the peak areas and retention times

obtained by real estimation [14] of 6 replicates of a fixed amount of drug. Cobicistat (API). The percent relative standard deviations¹⁵ were calculated for Cobicistat are presented in the Table-4.

Table-4: Repeatability Readings		
HPLC Injection Replicates of Cobicistat	Retention Time	Peak Area
Replicate – 1	3.464	1036653
Replicate – 2	3.463	1034698
Replicate – 3	3.464	1036524
Replicate – 4	3.463	1036524
Replicate – 5	3.462	1036254
Replicate – 6	3.461	1036542
Average	3.462833	1036199
Standard Deviation	0.001169	747.1333
% RSD	0.03376	0.072103

Intermediate precision

Intra-assay & inter-assay

The intra & inter day variation [16] of the method was carried out & the high values of mean

assay & low values of standard deviation & % RSD (% RSD< 2%) within a day & day to day variations for Cobicistat revealed that the proposed method is precise [17, 18].

Table-5	: Results of intra-assay & inter-assay
Conc. Of Cobicistat (API) (µg/ml)	Observed Conc. Of Cobicistat (µg/ml) by the proposed method

	Intra-Day	Intra-Day		Inter-Day	
	Mean (n=6)	% RSD	Mean (n=6)	% RSD	
40	39.96	0.97	40.02	0.89	
50	50.03	0.85	49.86	0.09	
60	59.89	0.56	60.02	0.63	

Linearity & range

The calibration curve showed good linearity [18] in the range of $0 - 70 \ \mu\text{g/ml}$, for Cobicistat (API) with correlation coefficient (r²) of 0.999

(Fig-2). A typical calibration curve has the regression [19] equation [20] of y = 26249x + 15500 for Cobicistat.

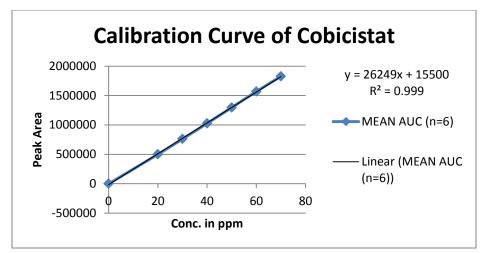


Fig-2: Calibration curve of Cobicistat (API)

Table-6: Linearity-Results		
CONC.(µg/ml)	MEAN AUC (n=6)	
0	0	
20	499584	
30	761241	
40	1026412	
50	1296542	
60	1568542	
70	1826541	

METHOD ROBUSTNESS

The effect of minute changes in the optimized chromatographic conditions [21] such as Temperature ($\pm 2^{0}$ C), Acetonitrile content in mobile

phase ($\pm 2\%$), Wavelength of detection ($\pm 2nm$) and change in flow rate ($\pm 0.1ml/min$) calculated to establish the robustness [22] of the proposed method. (Table-7, % RSD < 2%).

Table-7: Result of Method Robustness Test		
Change in parameter	% RSD	
Flow (1.1 ml/min)	0.35	
Flow (0.9 ml/min)	0.39	
Wavelength of Detection (249 nm)	0.27	
Wavelength of detection (245 nm)	0.37	

LOD & LOQ

The Minimum concentration level [23] at which the analyte can be reliable detected (LOD) & quantified (LOQ) [24] were found to be 0.09 & $0.27 \mu g/ml$ respectively.

System suitability parameter

System suitability parameters are vital part of a lot of analytical procedures. These parameters are

based on the concept that the electronics, analytical operations, equipment and samples to be analyzed comprise an important system that can be assessing as such. Following system suitability test parameters [25, 26] were established. The data are shown in Table-8.

1a	Die-8: Data of Syst	em Sultabli	ny Parameter
S. No.	Parameter	Limit	Result
1	Resolution	Rs > 2	8.29
2	Asymmetry	$T \leq 2$	Cobicistat = 0.13
3	Theoretical plate	N > 2000	Cobicistat = 3426

Table-8: Data of System Suita	bility Parameter
-------------------------------	------------------

Evaluation of **COBICISTAT** in **Pharmaceutical Dosage Form**

COBICISTAT-150 mg

20 tablets were taken and the I.P. method was followed to estimate the average weight. Above weighed tablets were finally powdered and triturated well. An amount of powder equivalent to the 100mg of drug was transferred to 100ml volumetric flask and 70 ml of methanol was added and solution was sonicated for 15 minutes. Then make up the volume up to the mark with the mobile phase. Then add 10 ml of the prepared solution and diluted to 100 ml with methanol. The resulted solution was filtered through a membrane filter (0.45 µm) and sonicated to degas. From stock solution (0.5 ml) was transferred to 5 different 10ml volumetric flasks and volume was made up to the 10 ml with mobile phase [27]. The prepared solution was injected into the HPLC system and the observations were recorded.

A duplicate standard solution was also injected into the HPLC system and the chromatogram [28] was recorded. The obtained data are shown in following Table-48.

Assay

%
Assay=AT/AS×WS/DS×DT/WT×P/100×AW/LC×10
0
Where:
AT = Peak Area of Cobicistat obtained with test
preparation
AS = Peak Area of Cobicistat obtained with standard
preparation
WS = Weight of working standard taken in mg
WT = Weight of sample taken in mg
DS = Dilution of Standard solution
DT = Dilution of sample solution
P = Percentage purity of working standard
Assay was performed as described in previous
chapter. Results obtained are tabulated below:

Table-9: Recovery Data for estimation Cobicistat in FADINE Tablets					
Brand name of Capsules	Labelled amount of Drug (mg)	Mean (±SD) amount (mg) found by the proposed method (n=6)	Assay + % RSD		
Tybost (Gilead Medical Information (UK & Eire)	150	149.89 (±0.06)	99.65% (±0.48)		

RESULT & DISCUSSION

The assay of Tybost tablets containing COBICISTAT was found to be 99.65 %.

Stability studies

The protocol was severely adhering to for forced degradation [29] of Cobicistat Active Pharmaceutical Ingredient.

The API was subjected to strain conditions in different ways to observe the rate and level of degradation that is probable to take place in the course of storage and/or after administration to body.

This is one category of accelerated stability studies [30] that helps us estimating the fate of the drug that is likely to happen after long time storage within a very small time as compare to the actual time or long term stability testing.

The different degradation pathways analysed are acid hydrolysis [31], basic hydrolysis, thermal degradation [32] and the oxidative degradation

Acid hydrolysis

Accurately weigh 25 mg of pure drug was transferred to a clean and dry 25 ml volumetric flask. To which 0.1N Hydrochloric acid was added & make up to the mark & kept for 24 hrs. from that 0.1 ml was taken in to a 10 ml volumetric flask & make up to the mark with mobile phase, then injected into the HPLC system against a blank of HCl (after all optimized conditions).

Basic hydrolysis

An accurately weighed 10 mg. of pure drug was transferred to a clean & dry 10 ml volumetric flask. To which 0.1N Sodium hydroxide was added & make up to the mark & kept for 24 hrs. From that 0.1 ml was taken in to a 10 ml volumetric flask & make up to the mark with mobile phase, then injected into the HPLC system against a blank of NaOH (after all optimized conditions).

Thermal degradation

An accurately weighed 1 mg. of pure drug was transferred to a clean & dry 100 ml volumetric flask, make up to the mark with mobile phase & was maintained at 50 0 C. For 24 hrs. Then injected into the HPLC system against a blank of mobile phase (after all optimized conditions).

Photolytic degradation

Approximately 10 mg. of pure drug was taken in a clean & dry Petri dish. It was kept in a UV cabinet at 254 nm wavelength for 24 hours without interruption. Accurately weighed 1 mg. of the UV exposed drug was transferred to a clean & dry 10 ml. volumetric flask. First the UV exposed drug was dissolved in methanol & make up to the mark. Then resulted solution injected into the system against a blank of mobile phase.

Oxidation with (3%) h₂o₂

Accurately weighed about 1 mg of drug was transferred to a clean and dry 100ml volumetric flask. Then add 30 ml of 3% H_2O_2 and a little methanol to it in order to make soluble. Then keep it aside in dark for 24 hrs. The volume was made up to mark. The resulted sample solution was injected into the HPLC system.

Results of degradation studies

The results of the stress studies [33] indicated the **specificity** of the method that has been developed. Cobicistat was stable in thermal & photolytic stress conditions. The results of forced degradation studies are given in the following Table-10.

Stress condition	Time	Assay of active	Assay of degraded	Mass Balance
		substance	products	(%)
Acid Hydrolysis (0.1 M HCl)	24Hrs.	87.85	12.15	100.0
Basic Hydrolysis (0.I M NaOH)	24Hrs.	75.64	24.36	100.0
Thermal Degradation (50 °C)	24Hrs.	96.55	3.45	100.0
UV (254nm)	24Hrs.	96.03	3.97	100.0
3 % Hydrogen peroxide	24Hrs.	25.37	74.63	100.0

Table-10: Results of forced degradation studies of Cobicistat API.

CONCLUSION

A sensitive & selective RP-HPLC method has been developed & validated for the analysis of Cobicistat API. Further the proposed RP-HPLC method has excellent sensitivity, precision and reproducibility. This proposed method can be used for the further analysis of Cobicistat in bulk and marketed formulations.

REFERENCES

- [1]. R. Patil: J of Chromatographia, 67, 2008, 575.
- [2]. Rasayan Journal of chemistry 5(1), 2012, 90-105. ISSN: 0974-1496 | CODEN: RJCABP.
- [3]. IUBMB Life. 61(4), 2009, 470-5. doi: 10.1002/iub.181.
- [4]. Baht and Leena: J of Liq. Chrom., 30, 2007, 309.
- [5]. H.H.Williard, L.L.Merit, F.A. Dean and F.A. Settle, Instrumental methods of analysis, C.B.S. Publishers, New Delhi 7, 2002.
- [6]. GN Menon, LB White, Department of Analytical Research, Abbott Laboratories, (PubMed-index for MEDLINE).

- [7]. www.nature.com/reviews/drugdisc.
- [8]. Deshpande Arinash et al., Annual meeting and exposition 2006.
- [9]. rxlist.com/cgi/generic/crestor.htm.
- [10]. S. B. Wankhade: Indian J of Pharm. Sci., 69, 2007, 298.
- [11]. N. Torrealday: J of Pharmaceutical and biomed. Ana., 32, 2003, 847.
- [12]. Validation of analytical procedures, Methodology, ICH harmonized tripartite guideline, 108, 1996.
- [13]. Labrid C. Roman Journal of International Medicines, 36, 1998, 137-144.
- [14]. P.R. Muley: The Indian Pharmacist, 4, 2005, 69.
- [15]. McClellan KJ & Plosker GI, Drugs; 58, 1999, 143-157.
- [16]. The complete Drug reference; Martindale, Pharmaceutical press 32, 12.
- [17]. Watnabe, M. et al. Synthesis and biological activity of methane sulfonamide pyramiding and N-methane sulfonyl pyrrole-substituted 3,5-dihydroxy-heptonates, a novel series of HMG-CoA reductase inhibitors. Bioorg.Med.Chem. 5, 1997, 437-444.
- [18]. FDA Drug Approvals List [online] 26, 2003.
- [19]. International Conference on Harmonization, "Q2A: Text on Validation of Analytical Procedures," Federal Register 60(40), 1995, 11260–11262.
- [20]. International Conference on Harmonization, "Q2B: Validation of Analytical Procedures: Methodology; Availability," Federal Register 62(96), 1997, 27463–27467.
- [21]. FDA, "Analytical Procedures and Methods Validation: Chemistry, Manufacturing and Controls Documentation; Availability," Federal Register (Notices) 65(169), 2000, 52776–52777.
- [22]. G.A. Shabir, "Validation of HPLC Chromatography Methods for Pharmaceutical Analysis. Understanding the Differences and Similarities between Validation Requirements of FDA, the US Pharmacopeia and the ICH," J. Chromatogr. A. 987(1-2), 2003, 57-66.
- [23]. J. M. Green, A practical guide to analytical method validation, Anal. Chem. News & Features, 1, 1996, 305A– 309A.
- [24]. P. A. Winslow and R. F. Meyer, Defining a master plan for the validation of analytical methods, J. Validation Technology, 1997, 361–367.
- [25]. AOAC Peer-Verified Methods Program, Manual on policies and procedures, Arlington, Va. USA 1998.
- [26]. CITAC/EURACHEM, Working Group, International guide to quality in analytical chemistry: An aid to accreditation, 2002.
- [27]. J. Vessman, Selectivity or specificity? Validation of analytical methods from the perspective of an analytical chemist in the pharmaceutical industry, J. Pharm & Biomed Analysis 14, 1996, 867–869.
- [28]. EURACHEM The Fitness for Purpose of Analytical Methods a Laboratory Guide to Method Validation and Related Topics 1998.
- [29]. Urooj Fatima1*, T. Mamatha1 and Rajesh Goud Gajula2, A novel RP-HPLC method development and validation of Cobicistat in bulk drug and tablet dosage form, Pelagia Research Library Der Pharmacia Sinica, 5(5), 2014, 99-105.
- [30]. J. Sathish Kumar Reddy1, K. R. S. Prasad1 and K. Suresh Babu2 *, A stability indicating RP-HPLC method for simultaneous estimation of darunavir and cobicistat in bulk and tablet dosage form, Scholars Research Library Der Pharmacia Lettre, 8(12), 2016, 89-96.
- [31]. S.H.Rizwan*1, V. Girija Sastry2, Shaik Gazi3, Q.Imad4, Khatija Mohammed Bhameshan5, A New and Validated Stability Indicating RP-HPLC Analysis of Darunavir and Cobicistat in Bulk Drug and Tablet Dosage Form, International Journal of Pharmaceutical Sciences Review and Research, Int. J. Pharm. Sci. Rev. Res., 36(1), 2016, 180-185.
- [32]. Sridhar Siddiraju, Stability indicating RP-HPLC method development and validation for the simultaneous estimation of darunavir and cobicistat in pharmaceutical dosage form, International Conference and Exhibition on Advances in HPLC & Chromatography Techniques, 7(2), 2016, 69.
- [33]. Sigamala S. Kumar1*, Donthireddy Sai Priyanka2 and Paul Richards M. 3, RP-HPLC method development and validation for simultaneous estimation of cobicistat and darunavir in tablet dosage form, World Journal of Pharmacy and Pharmaceutical Sciences, 5(6), 490-499.