

SIMULTANEOUS SPECTROPHOTOMETRIC ESTIMATION OF CINNARIZINE IN BINARY MIXTURE WITH PIRACETAM IN BULK AND PHARMACEUTICAL DOSAGE FORMS

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Article Received on
18 June 2020,

Revised on 08 July 2020,
Accepted on 28 July 2020

DOI: 10.20959/wjpr20208-17418

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ABSTRACT

Cinnarizine, an antihistaminic drug, is commonly formulated in combination with piracetam for treat wide range of disease as dizziness, nausea, inner ear syndrome and other diseases of the brain. The aim of this work was to develop simple, precise and accurate spectrophotometric method for the estimation of Cinnarizine (CIN) in binary mixture with piracetam (PRM) in bulk and Formulated dosage form. This method could be used in routine analysis in laboratories of quality control. Two chemometric techniques include principal component regression (PCR) and partial least squares (PLS) were prepared using synthetic mixture containing two drugs, all dissolved in methanol. In PCR and PLS the absorbance of the synthetic mixture in

the range 218-230 nm with interval $\Delta\lambda=0.5$ nm in their zero-order spectra were selected. Calibration or regression was then obtained by using the absorbance data matrix and the concentration data matrix for the determination of the unknown concentrations of CIN and PRM in laboratory prepared mixtures and pharmaceutical dosage form. The two proposed technique were positively applied for analysis of the two drugs in laboratory prepared mixture and in dosage form with good recoveries percent in the range of 98-102%. Method validation was conducted according to ICH guidelines. The developed methods are simple

and precise and can be used for routine analysis of the drugs in combined dosage forms in quality control laboratories.

KEYWORDS: Cinnarizine; Chemometric; Partial least squares; Piracetam; Principal component regression; Validation.

INTRODUCTION

Cinnarizine (CIN), [1-(diphenyl methyl)-3-(4-phenylprop-2-enyl)-piperazine] is a derivative of piperazine that has antihistaminic (H1 blocker), sedative and calcium channel blocking activity. It is used for the treatment of vertigo, nausea caused by Meniere's disease and also motion sickness. In addition, it is used in the various peripheral and cerebral vascular disorders management.^[1,2] It is commonly used in combination with other drugs for prophylaxis of vertigo.^[1,3] Such combination is highly effective as each drug potentiates the other in boosting brain oxygen supply.

Piracetam (PRM) is 2-(2-Oxopyrrolidin-1-yl) acetamide. PRM is a nootropic and psychopharmacological drug.^[4] It is a synthetic cyclic derivative of GABA. It is described as a myoclonus and neuroprotective agent. The mechanism of action depends on eliminating of calcium chloride those results in a decrease of the rhythm rate and an increase of the contraction amplitude.^[5] Recently, CIN and PRM combination has been established as a dosage form that used to treat wide range of disease as dizziness, nausea, inner ear syndrome and other diseases of the brain, nerve and memory.

Literature review shows that several analytical methods were reported for the spectrophotometric determination of CIN in pharmaceutical preparations and biological fluids. These methods include spectrophotometric,^[6-18] spectrofluorometric^[19-21] and multivariate^[7,9-10,22] voltammetry,^[23] high performance liquid chromatography (HPLC),^[24-39] high performance thin layer chromatography (HPTLC),^[38-43] and capillary electrophoresis,^[44] Other methods were developed to determination of CIN in combination with PRM which include spectrophotometry,^[45] high performance thin layer chromatography and high performance liquid chromatography (HPTLC & HPLC),^[31, 45-47]

In this study, the zero order UV absorption spectra of CIN and PRM in methanol at their nominal concentrations ratio in pharmaceutical dosage form shows strong overlap. Thus, direct simultaneous spectrophotometric determination of the two drugs in the binary mixture

is not feasible. Therefore, the main task of this study was to develop and validate simple, accurate, and selective methods based on spectrophotometric measurements and capable of determining the two drugs simultaneously with the help of different chemometric techniques.

In recent years, multivariate calibrations, such as principal component regression (PCR) and partial least square (PLS) started to be applied to the analysis of the analytical data obtained in all the instrumentations. The same methods and their algorithms have been applied to the simultaneous spectrophotometric determination of drugs in the pharmaceutical formulation containing two or more compounds with overlapping spectra. The main advantages of these techniques are the higher speed of processing data concerning the values of concentrations and absorbance of compounds with strongly overlapping spectra. Besides, the errors of calibration model are minimized by measuring the absorbance values at several points in the wavelength range of the zero-order and derivative spectra. Analytical methods using multivariate calibrations and their applications involve the spectrophotometric, chromatographic and electrochemical methods for determinations of analytes in the mixtures^[48]

In this part, the chemometric methods applied are PCR and PLS using factor analysis then using a subset of the resulting factors to complete the regression modelling.^[49] These multivariate calibrations were useful in spectral analysis because the simultaneous inclusion of many spectral wavelengths instead of single wavelength greatly improved the precision and predictive ability.^[49]

MATERIALS AND METHODS

Materials

CIN pharmaceutical standard substance was supplied by quality Control Lab-Ministry of Health- Sana'a, Yemen with certified purity of 99.97% and PRM pharmaceutical standard substance was supplied by the National Organization of Drug Control and Research (NODCAR), Giza, Cairo, Egypt with certified purity 98.40. Cinaretam® capsules were manufactured by Misr Company for Pharmaceuticals. Egypt. Batch No. 116844, each capsule was labelled to contain 25 mg CIN and 400 mg PRM). Methanol used was of analytical grade.

Instrumentation

Shimadzu ultraviolet/visible spectrophotometer 1600 (Japan) connected to an IBM compatible computer and supported with UV probe software version 2.21 was used. The chemometric methods, CFBP-ANN, and data analysis were performed using Matlab™ software, version 7.9.0 with PLS-toolbox 2.0 and neural networks toolbox.

Preparation of solutions**Stock solutions**

Accurately weighed 100 mg of CIN and 1600 mg of PRM standards were separately transferred into two 100 ml volumetric flasks, dissolved in and completed to volume with methanol to produce stock solutions of (1 mg/ml) and (16 mg/ml), respectively.

Working solutions

Accurate aliquots (1 ml) were transferred from each stock solution into two separate 100 ml volumetric flasks. The volume was completed with methanol to obtain working solutions of (10 µg/ml) and (160 µg/ml) for CIN and PRM, respectively.

Sample solution's

Ten capsules content of Cinaretam® were weighed and mixed well. An accurate weight of the capsule content powder equivalent to (25 mg) CIN and (400 mg) PRM was transferred into a 100 ml volumetric flask and 50 ml methanol were added. The solution was sonicated for 15 min and completed to volume with methanol, then filtered by filter paper discarding the first few milliliters to produce dosage form stock solution of (200 µg/ml) of CIN and (4000 µg/ml) of PRM.

Ten ml of this stock solution was transferred into a 100 ml volumetric flask and was completed to volume with methanol to obtain the dosage form working solution of (20 µg/ml) of CIN and (400 µg/ml) of PRM.

Construction of the training set

Twelve mixtures of CIN and PRM were prepared by transferring different volumes of their working solutions into a series of 10 ml volumetric flasks and completed to volume with methanol. The concentrations of the two drugs, respectively, in the prepared mixtures were 1.8-8.2 µg/ml for CIN and 32-128 µg/ml for PRM. The absorbance of these mixtures were

then scanned between 200 and 400 nm at 0.5 nm intervals with respect to a blank of methanol.

Construction of the PCR and PLS models

Two multivariate calibration models (PCR and PLS) were constructed using the obtained data. In these methods, the absorbance data matrix for the training set concentration matrix was obtained by measuring the absorbance between 218 and 230 nm at 0.5 nm intervals. Calibration or regression was then obtained by using the absorbance data matrix and the concentration data matrix for the determination of the unknown concentrations of CIN and PRM in laboratory prepared mixtures and pharmaceutical dosage form.

For PCR and PLS methods, the training set absorbance and concentration matrices together with PLS-toolbox 2.0 software were used for the calculations.

Selection of the optimum number of factors to build the PCR and PLS models

The cross validation method was used, leaving out one sample at a time, to select the optimum number of factors.^[50] PLS and PCR calibration on eleven calibration spectra were performed and, using this calibration, the concentration of the sample left out during the calibration process was predicted. This process was repeated twelve times until each training sample had been left out once. The predicted concentrations of the two drugs in each sample were compared with the actual concentrations in this calibration samples and Root-Mean-Square Error of Cross-Validation (RMSECV), which indicates both the precision and accuracy of predictions, was calculated for each method and then recalculated upon addition of each new factor to the PLS and PCR models as follows:

$$\text{RMSECV} = \sqrt{\text{PRESS}/n}$$

where, (PRESS) was the predicted residual error sum of squares and (n) was the number of calibration samples^[51]

$$\text{PRESS} = \sum (Y_{\text{pred}} - Y_{\text{true}})^2$$

where, (Y_{pred}) and (Y_{true}) were the predicted and true concentrations in $\mu\text{g/ml}$, respectively.

Construction of the validation set

To evaluate the prediction performance of the proposed chemometric models, nine different aliquots of the working solutions equivalent to (18-82 μg of CIN and 320-1280 μg of PRM) were transferred into a series of 10 ml volumetric flasks and completed to volume with

methanol and procedure under construction of the training set was repeated. The suggested models were applied to these mixtures to predict the concentrations of CIN and PRM.

Analysis of CIN and PRM in Cinaretam® capsules

The two chemometric models were applied to simultaneous estimation of CIN and PRM in commercial capsules. Different aliquots of the dosage form working solution equivalent to (25-65 μg) of CIN and (400-1040 μg) of PRM, were transferred into a series of 10 ml volumetric flasks and completed to volume with methanol. The spectra of the prepared solutions were scanned and the procedure was followed up as mentioned previously under construction of the training set. The developed models were applied to calculate the concentrations of CIN and PRM. The experiment was repeated using standard addition technique.

RESULTS AND DISCUSSION

UV scanning of training set

As shown in Fig. 1, the UV absorbance spectra of CIN and PRM mixture showed strong overlap. Nevertheless, the data of absorbance in the wavelength range 218-230 nm were chosen as it provided the higher amount of information of the two drugs in the binary mixture.

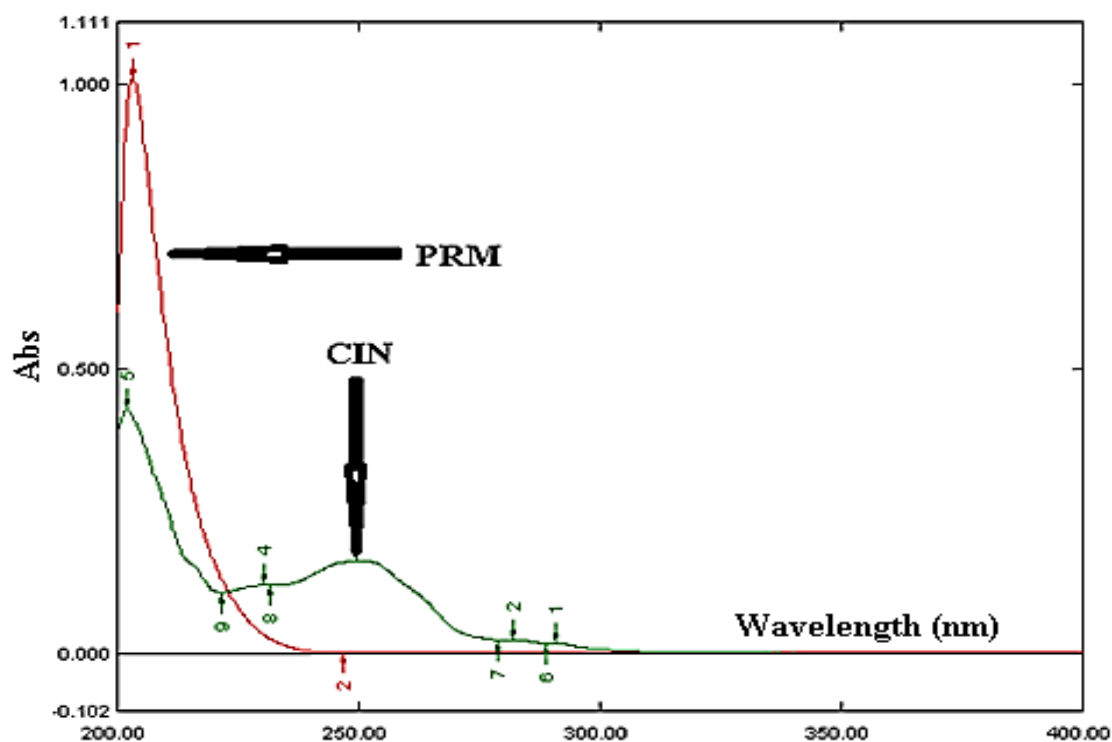


Fig. 1: Zero order absorption spectra of CIN (3 $\mu\text{g}/\text{ml}$) and PRM (48 $\mu\text{g}/\text{ml}$) in methanol.

PCR and PLS models Before constructing the two models, the choice of optimum number of factors was very important stage. Hence, when the number taken was less than the required number, meaningful data that would be necessary for the calibration might be ignored. On the other hand, when the number of factors taken was more than the required number, more noise could be added to the data. Selection of the optimum number of factors was performed by visual inspection. Two factors were selected visually and found suitable for both PCR and PLS methods as shown in Fig 2 and 3.

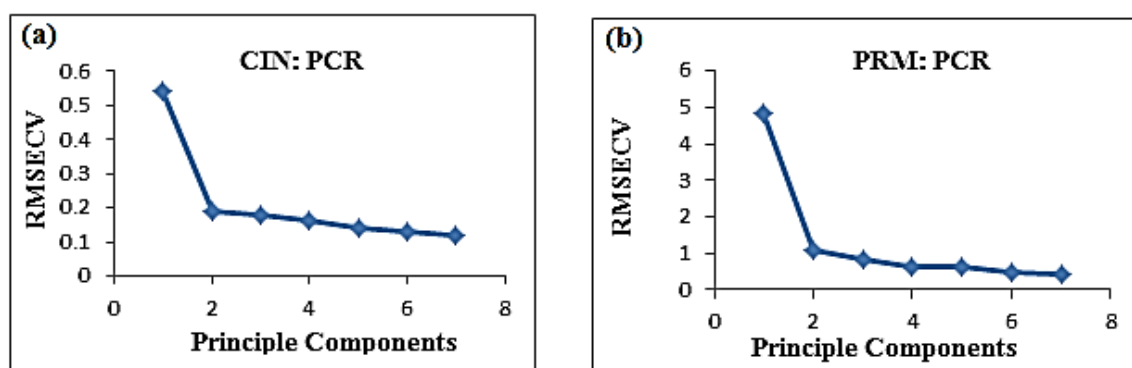


Fig. 2: RMSECV plot as a function of the number of principle components used to construct the PCR model for CIN (a) and PRM (b).

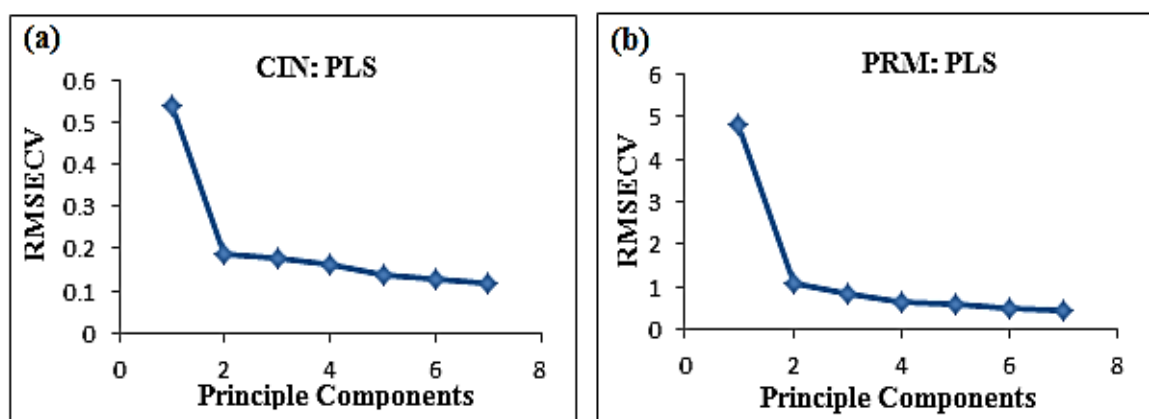


Fig. 3: RMSECV plot as a function of the number of principle components used to construct the PLS model for CIN (a) and PRM (b).

Accuracy

The accuracy was assessed by applying the proposed chemometric methods obtained for the simultaneous determination of CIN and PRM in laboratory prepared mixtures (in a ratio similar to that of the pharmaceutical dosage form) and the mean percentage recoveries were

calculated (Table 1). Accuracy of the method was also confirmed by recovery studies from dosage form (capsule) at different levels of standard additions. Good mean percentage recoveries were obtained, indicating there was no interference from the co-formulated drug or the frequently encountered capsule excipients.

Table 1: Recovery results obtained from the simultaneous UV determination at 218-230 nm, using methanol as solvent, of CIN and PRM in synthetic mixtures (validation set), Cinaretam® capsule and standard addition using PCR and PLS techniques.

Item	Principal Component Regression (PCR)		Partial Least Square (PLS)	
	CIN	PRM	CIN	PRM
Recovery % in the mixture (Validation set)	100.49 ± 1.168	100.45 ± 1.315	100.63 ± 1.209	100.60 ± 1.284
Recovery % in (Cinaretam® capsule)	98.06 ± 0.408	101.23 ± 1.277	97.87 ± 0.400	101.28 ± 1.393
Recovery % of standard added	98.49 ± 0.473	99.52 ± 1.064	98.67 ± 0.497	99.25 ± 1.131

Precision

The intraday and interday precision was determined by calculating the values of relative standard deviation (% RSD) using three different concentrations (2.5, 5 and 7.5 µg/ml) of CIN and (40, 80 and 120 µg/ml) of PRM in triplicates during the same day and on three consecutive days in binary mixtures and results are displayed in table 2.

Table 2: Intra-day and inter-day precision results of the simultaneous determination of CIN and PRM using PCR, and PLS chemometric techniques.

Item		Intra-day*				Inter-day**			
		CIN		PRM		CIN		PRM	
		PCR	PLS	PCR	PLS	PCR	PLS	PCR	PLS
(2.5, 40) µg/ml	Recovery %	101.35	101.34	101.31	101.31	100.95	100.99	101.13	101.15
	SD	0.304	0.304	1.239	1.239	1.258	1.351	1.103	1.125
	RSD %	0.300	0.300	1.223	1.223	1.246	1.338	1.090	1.113
(5, 80) µg/ml	Recovery %	101.79	101.79	101.69	101.67	101.12	100.92	101.35	101.28
	SD	0.209	0.209	0.473	0.472	1.4	1.114	1.204	1.146
	RSD %	0.205	0.205	0.466	0.465	1.384	1.103	1.188	1.132
(7.5, 120) µg/ml	Recovery %	102.42	102.41	101.35	101.35	102.02	102.03	102.03	102.03
	SD	0.373	0.372	0.344	0.344	1.229	1.242	1.128	1.127
	RSD %	0.365	0.364	0.339	0.339	1.204	1.218	1.110	1.107

* The intraday (n = 3), average of three concentrations (2.5, 5 and 7.5 µg/ml) of CIN products and (40, 80 and 120 µg/ml) of PRM repeated three times in the same days; **The interday (n = 3), average of three concentrations (2.5, 5 and 7.5 µg/ml) of CIN products and (40, 80 and

120 µg/ml) of PRM products repeated three times in three successive days; SD: Standard deviation, RSD: Relative standard deviation, CIN: Cinnarizine, PRM: Piracetam, PCR: Principal component regression, PLS: Partial least squares

Selectivity

The two methods selectivity was evident by the good mean percentage recoveries obtained from the laboratory prepared mixtures (validation set) and from the formulated dosage form (Cinaretam® capsules) without any interferences from the used excipients in capsules.

Statistical analysis

All results obtained from the proposed methods were statistically compared with those obtained from reported reference method.^[4,45] The student t-test and F ratio test were applied. The obtained values of t and F were less than the values tabulated, confirming that the difference between the developed and reported methods is insignificant in terms of accuracy and precision as shown in table 3.

Table 3: Statistical comparison between the results of the proposed methods and the reference methods for the determination of CIN and PRM in binary mixture.

Statistical Parameters	CIN			PRM		
	Reference Method**	PCR	PLS	Reference Method***	PCR	PLS
Mean	100.48	100.49	100.63	100.77	100.45	100.60
SD	0.536	1.168	1.209	0.662	1.315	1.284
SE	0.240	0.522	0.541	0.296	0.588	0.574
RSD%	0.534	1.162	1.201	0.656	1.309	1.276
n	5	5	5	5	5	5
Variance	0.288	1.363	1.462	0.438	1.729	1.649
t (2.306)*		0.006	0.246		0.484	0.261
F (6.388)*		4.733	5.067		3.947	3.768

SD: Standard deviation, SE: Standard error, RSD: Relative standard deviation; *: Figures in parentheses are the theoretical t and F values at (p=0.05). ** Metwally, F.H., et al. RP-HPLC method,^[45] *** BP 2016. RP-HPLC method.^[4]

CONCLUSIONS

The proposed methods (PCR and PLS) can be used for simultaneous estimation of CIN and PRM in laboratory prepared mixtures and pharmaceutical dosage form containing them without interference with each other and without the need for previous physical separation of the two drugs. Multivariate calibration models were built from the spectral and concentration data matrices. Verification of the calibrations carried out with the aid of a synthetic set of

mixtures of the two compounds, produced satisfactory results showing simplicity, sensitivity, selectivity and rapidity. Hence, the developed methods can be used for quality control of the cited drugs in ordinary laboratories.

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