

SIMULTANEOUS ESTIMATION AND VALIDATION OF KETOCONAZOLE AND SALICYLIC ACID IN BULK AND EMULGEL FORMULATION BY SPECTROPHOTOMETRIC METHODS

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ABSTRACT

Two simple and economic UV Visible spectrophotometric methods have been validated for the determination of Ketoconazole and Salicylic acid in bulk and emulgel formulation. The developed emulgel containing Ketoconazole and Salicylic acid was formulated for the management of Psoriasis. Quantitation was carried out by two spectrophotometric methods such as Simultaneous equation method and Absorbance ratio method. The wavelength selected for Simultaneous equation method were 225 nm (λ_{max} of ketoconazole) and 296 nm (λ_{max} of salicylic acid). In Absorbance ratio method, two wavelength 296 nm, λ_{max} of Salicylic acid as λ_2 and 239 nm, iso-absorptive point as λ_1 was selected. Both the method follows beer's linearity in the range of 3-21 $\mu\text{g/ml}$ for Ketoconazole and 3-21 $\mu\text{g/ml}$ for Salicylic acid with correlation coefficient value (r^2) for both the

drug being more than 0.995. According to ICH guidelines the parameters Linearity, Precision, Accuracy, Limit of detection, Limit of quantification, Robustness, Ruggedness was performed. Result of analysis were validated statistically. All the validation parameters were found to be within limit of acceptance.

KEYWORDS: Emulgel, Ketoconazole, Salicylic acid, Psoriasis, Simultaneous Equation Method, Q-Absorption Ratio Method, Validation.

INTRODUCTION

Ketoconazole

Ketoconazole is white coloured powder. It is identified as (cis-1-acetyl-4-[4[[2-(2,4-dichlorophenyl)-2-(1H-imidazol-1-ylmethyl)-1,3-dioxolan-4-yl]methoxy]phenyl]piperazine) in (figure 1).^[1] Pharmaceutical formulation of Ketoconazole includes creams, tablets and shampoo are used for treatment and prevention of systemic skin infection.^[2] Ketoconazole is classified in the biopharmaceutics classification system (BSC) as a class 2 drug. Ketoconazole has a good permeability. It has very low aqueous solubility because of its hydrophobic structure.^[3] There are different analytical method for determination of Ketoconazole in single and combine pharmaceutical dosage form.^[4,5] Ketoconazole was approved in 1981 by united states food and drug administration (USFDA) for skin infections as an oral anti-fungal agent, later it was withdrawn due to serious adverse events such as drug-drug interaction, hepatotoxicity etc. Further, topical Ketoconazole preparations took place for treating against dermatological infections. This result decrease in drug related adverse effects.^[6]

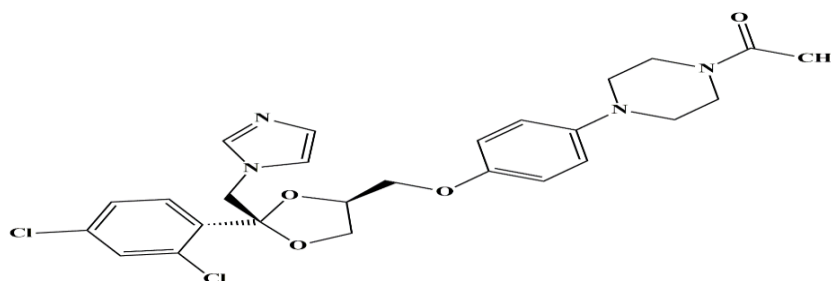


Figure 1: Structure of ketoconazole.

Category: Anti-fungal and used in treating skin plaques

Melting Point: 148°C

Molecular Formula: C₂₆H₂₈Cl₂N₄O₄

Molecular Weight: 531.431g/mol

Salicylic acid

Salicylic Acid is chemically, 2-hydroxybenzoic acid as shown in (figure 2). It has activity as an anti-inflammatory agent.^[7,8] It exerts anti-inflammatory effect by suppressing cyclooxygenase activity. It is use in treatment of various skin disorders like acne, psoriasis, seborrheic dermatitis, calluses, keratosis pilaris and warts. Salicylic acid is mostly used in

topical formulations.^[9] Salicylic Acid is white, crystalline powder needle. Salicylic Acid prepared from natural salicylate may have slightly yellow or pink color. It is stable in air.^[10]

Salicylic Acid has the ability to exfoliate stratum corneum which makes it a good peeling agent for acne patients. It is effective and safe for dermatological preparation. Salicylic acid absorbs readily when applied to the skin. It is toxic in higher concentration.^[11]

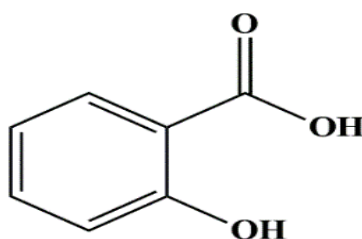


Figure 2: Structure of salicylic acid.

Category: Anti-inflammatory

Melting Point: 157-159°C

Molecular Formula: C₇H₆O₃

Molecular Weight: 138.12 g/mol

MATERIAL AND METHODS

Instruments

The experimental work was executed using instruments such as a double beam UV-Vis Spectrophotometer (Model, SHIMADZU UV-1900) with a spectral band width of 1nm and automatic wavelength correction, as well as a pair of 10mm quartz cells, Digital Weighing Balance (Mettler Toledo), Sonicator (Inco) and pH Meter

Materials

Gift sample of Ketoconazole was procured from Aarti Drugs Pharmaceutical Pvt. Ltd. Boisar, and Salicylic Acid was procured from Dales Remedies Pvt. Ltd. Palghar. All chemicals were of analytical grade.

Preparation of stock solution

Standard stock solution of both Ketoconazole and Salicylic acid were prepared separately, dissolving 100 mg of each drug in 100 ml volumetric flask and made up with Ethanol and Buffer pH-5 in ratio 1:1 to obtain stock solution of 1000 µg/ml.

Determination of λ_{\max}

The standard stock solution of Ketoconazole (15 $\mu\text{g/ml}$) and Salicylic acid (15 $\mu\text{g/ml}$) were scanned separately in the wavelength ranges from 200-400 nm and the λ_{\max} was found to be 225 nm of Ketoconazole and 296 nm of Salicylic Acid in ethanol and buffer pH-5 in ratio 1:1 solvent as expressed in (figure 3A and 3B).

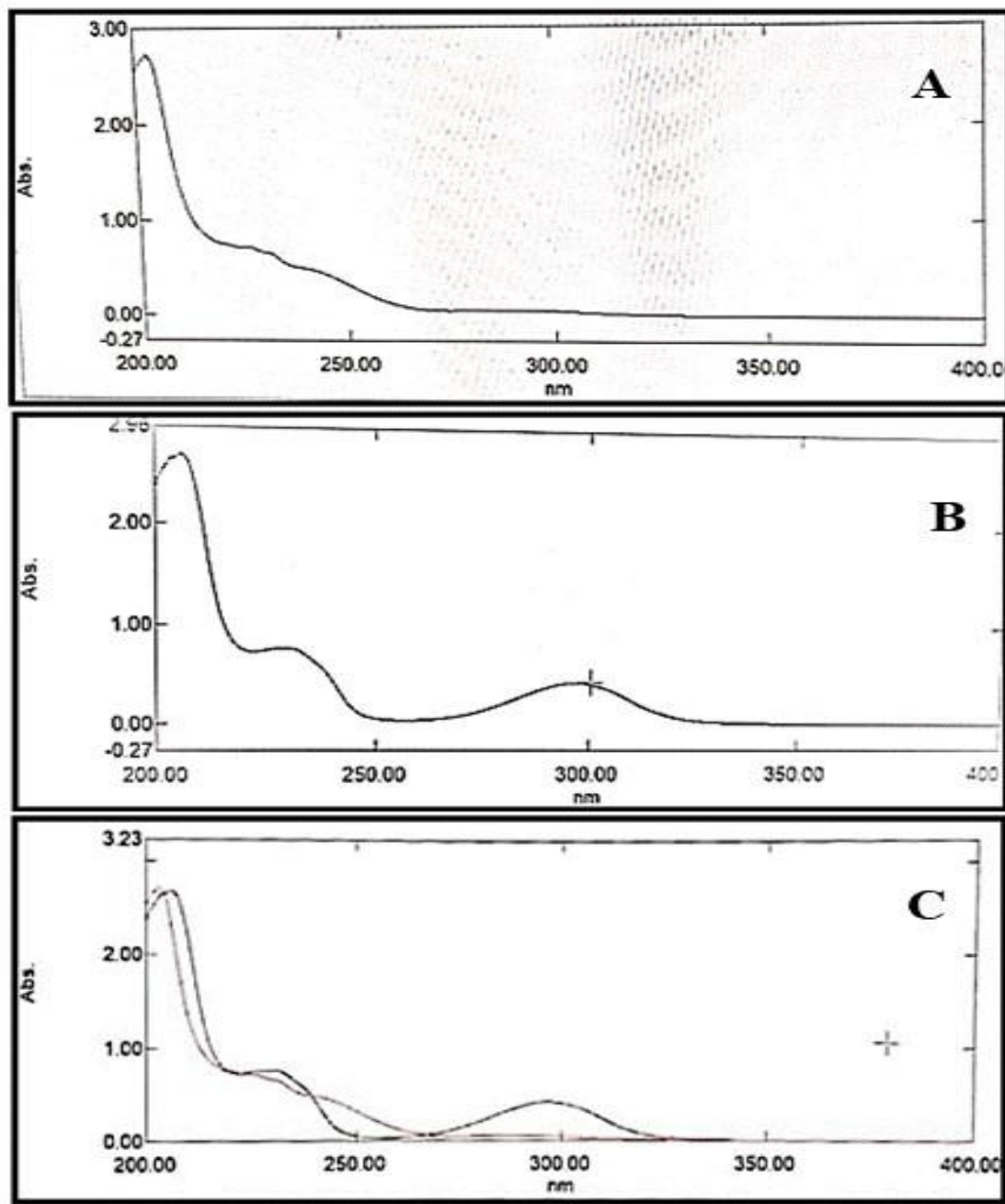


Figure 3: (A) UV Spectra of Ketoconazole at 225 nm (15 $\mu\text{g/ml}$) (B) UV spectra of Salicylic acid at 296 nm (15 $\mu\text{g/ml}$) (C) Overlay spectra of Ketoconazole and Salicylic acid.

Methods

Both drugs overlay at the wavelength 239 nm and according to overlain spectra of Ketoconazole and Salicylic Acid two methods have been carried out for estimation of both the drugs i.e., Simultaneous equation method and Absorbance ratio method as (figure 3C).

Method I: Simultaneous equation method^[12,13]

15 µg/ml solution of Ketoconazole and Salicylic Acid was prepared separately in phosphate buffer pH-5 and ethanol in ratio 1:1 and the solution were scanned against blank in the range of 200-400 UV range to determine λ_{\max} values.

Peaks were observed at 225 nm for Ketoconazole and 296 nm for Salicylic Acid. These wavelengths were selected as λ_{\max} of each drug. Standard solution of both the drugs in concentration range 3-21 µg/ml for both the drugs were prepared in buffer solution of pH-5 and ethanol in ratio 1:1 and absorbance of these solution was measured at 225 nm and 296 nm. Calibration curve were plotted to verify the beer's law.

The concentration of both the drugs in mixture was calculated by using following equations.

$$C_X = (A_2 \times a_{Y1} - A_1 \times a_{Y2}) / (a_{X2} \times a_{Y1} - a_{X1} \times a_{Y2})$$

$$C_Y = (A_1 \times a_{X2} - A_2 \times a_{X1}) / (a_{X2} \times a_{Y1} - a_{X1} \times a_{Y2})$$

Where,

C_X and C_Y = Concentration of Ketoconazole and Salicylic acid in mixture

A_1 and A_2 = Absorbance of mixture at 225 nm and 296 nm

a_{X1} and a_{X2} = Absorptivities of Ketoconazole at 225 nm and 296 nm

a_{Y1} and a_{Y2} = Absorptivities of Salicylic acid at 225 nm and 296 nm

Method II: Q-Absorbance ratio method^[14-18]

Absorbance ratio method depends on property, which obeys Beer's law at all wavelength, the ratio of absorbance at any two wavelengths is constant value independent of path length or concentration. This ratio is referred to as "Hufner's Quotient" or Q-value.

In absorbance ratio method, absorbances are measured at two wavelengths, one being a wavelength of equal absorptivity of the two components (λ_1) i.e., an iso- absorptive point. From the overlay spectra of both drugs (figure 5), two iso-absorptive point were detected as 239 nm and 267 nm. But at 267 nm very less absorbance was recorded, so 239 nm was selected as λ_1 and other being λ_{\max} of one of the components λ_2 .

15 µg/ml solution of Ketoconazole and Salicylic Acid was prepared separately in phosphate buffer pH-5 and ethanol in ratio 1:1 and the solution were scanned against blank in the range of 200-600 UV range to determine λ_{\max} values.

Standard solution of both the drugs in concentration range 3-21 µg/ml for both the drugs were prepared in buffer solution of pH-5 and ethanol in ratio 1:1 and absorbance of these solution was measured at 239 nm (iso-absorptive point) and 296 nm selected wavelength (λ_{\max} of Salicylic Acid).

Concentration of individual components, C_X and C_Y Can be calculated by using the following equation.

$$C_X = \frac{Q_M - Q_Y}{Q_X - Q_Y} \times \frac{A_1}{ax_1}$$

$$C_Y = \frac{Q_M - Q_X}{Q_X - Q_Y} \times \frac{A_1}{ay_1}$$

Where,

A_1 = Absorbance of mixture at iso-absorptive point (239 nm)

Q_M = Absorbance of mixture at selected wavelength (296 nm) divided by absorbance of mixture at iso-absorptive point.

Q_X and Q_Y = Deviation of respective drugs absorbance at selected wavelength 296 nm and iso-absorptive point.

ax_1 and ay_1 = Absorbance of Ketoconazole and Salicylic Acid at iso-absorptive point divided by concentration of respective drug.

Validation of Uv-visible spectrophotometric methods

The developed method was validated according to the International Conference on Harmonization (ICH) Guidelines.^[19-22]

Linearity and Range^[13]

Seven aliquots were taken from standard stock solution of both the drugs Ketoconazole and Salicylic acid and transferred to 10 ml volumetric flask to get a concentration of 3, 6, 9, 12, 15, 18, 21 µg/ml of Ketoconazole and 3, 6, 9, 12, 15, 18, 21 µg/ml of Salicylic acid in triplicate. The volume was made up with phosphate buffer pH-5 and ethanol in ratio 1:1 and absorbance were measured at selected wavelengths.

For Simultaneous equation method the absorbance of all solutions was measured at 225 nm of Ketoconazole and 296 nm of Salicylic acid. The calibration curve of Absorbance vs.

Concentration was plotted with correlation coefficient and regression line equation for both the drug was determined.

For Q-Absorbance ratio-method the wavelength selected was 239 nm (Iso-absorptive) and 296 nm selected wavelength (λ_{\max} of Salicylic acid). The absorbance of all the solutions at these two wavelengths of both Ketoconazole and Salicylic acid was measured and calibration curve and linear regression equation was determined.

Accuracy (Recovery)

Accuracy of the methods was done by recovery study from optimized formulation at three level of standard addition (80%, 100%, 120%). Fixed concentration of the developed emulgel formulation, with varying concentration of pure drug solution were added and percent recoveries was calculated. For Simultaneous equation method absorbance was measured at 225 nm for Ketoconazole and at 296 nm for Salicylic acid at 80%, 100%, 120% of the standard preparation in ratio of the formulation was prepared and checked for accuracy. For Absorbance ratio method absorbance were measured at 296 nm and 239 nm for both the drug Ketoconazole and Salicylic acid followed as same as procedure for accuracy.

Precision

Intra-day study was performed by analyzing response of three different concentration (9, 12, 15 $\mu\text{g/ml}$) three times on same day at an interval of one hour. While Inter-day study was performed by analyzing response of same concentrations three times on three different days over a period of one week.

Results was expressed in terms of % RSD for both the drugs Ketoconazole and Salicylic acid in triplicate.

Limit of Detection (LOD) and Limit of quantification (LOQ) ^[23]

LOD and LOQ was calculated from linearity studies. From regression equation slope was determined and standard deviation was computed for both the drug Ketoconazole and Salicylic acid. From these values, LOD and LOQ was determined by equation.

$$\text{LOD} = 3.3 \cdot \sigma / S$$

$$\text{LOQ} = 10 \cdot \sigma / S$$

σ = Standard deviation

S = slope of calibration curve

Robustness

Robustness of the proposed method was determined by changing λ_{\max} by $\pm 2\text{nm}$ for both the drugs and results were obtained at different wavelength and %RSD was reported.

For Simultaneous Equation variation in λ_{\max} of Ketoconazole at 225 nm with $\pm 2\text{nm}$ was carried out for 15 $\mu\text{g/ml}$ in triplicate similarly for λ_{\max} of Salicylic acid at 296 nm with $\pm 2\text{nm}$ was carried out. For Absorbance ratio method variation in iso-absorptive point 239 nm by $\pm 2\text{nm}$ and λ_{\max} of Salicylic acid 296 nm (selected wavelength) by $\pm 2\text{nm}$ was carried out for 15 $\mu\text{g/ml}$ concentration of Ketoconazole and Salicylic acid in triplicate.

Ruggedness

Ruggedness was determined for 15 $\mu\text{g/ml}$ concentration of both the drug Ketoconazole and Salicylic acid by two analysts using same operational and environmental conditions. Result was indicated as %RSD. For Method I absorbance was carried out at 296 nm of Salicylic acid and 225 nm of Ketoconazole by analyst 1 and analyst 2. For Method II absorbance was carried out at 239 nm (iso-absorptive point) and (selected wavelength) 296 nm of Salicylic acid by analyst 1 and analyst 2.

RESULTS

Linearity and Range

The linearity of Ketoconazole and Salicylic acid was found to be in range 3-21 $\mu\text{g/ml}$ in Method I and Method II. For Method I, the correlation coefficient for Keto at 225 nm and SA at 296 nm is 0.9989 and 0.9991 respectively which expressed in (figure 4). Linear regression equation was found to be $Y = 0.0439x - 0.0027$ and $Y = 0.026x + 0.0059$. For Method II, the correlation coefficient 0.9991 and 0.999 for Ketoconazole and 0.9991 and 0.9991 for Salicylic Acid at 239 nm and 296 nm expressed in (figure 5). Linear regression equation for Ketoconazole was found to be $Y = 0.0298x + 0.0008$ and $Y = 0.0037x + 0.001$ and for Salicylic Acid was found to be $Y = 0.032x + 0.0079$ and $Y = 0.026x + 0.0059$. Linearity data are reported in (Table 1 (Method I) and Table 2 (Method II)). Optical and regression parameters are summarized in (Table 3)

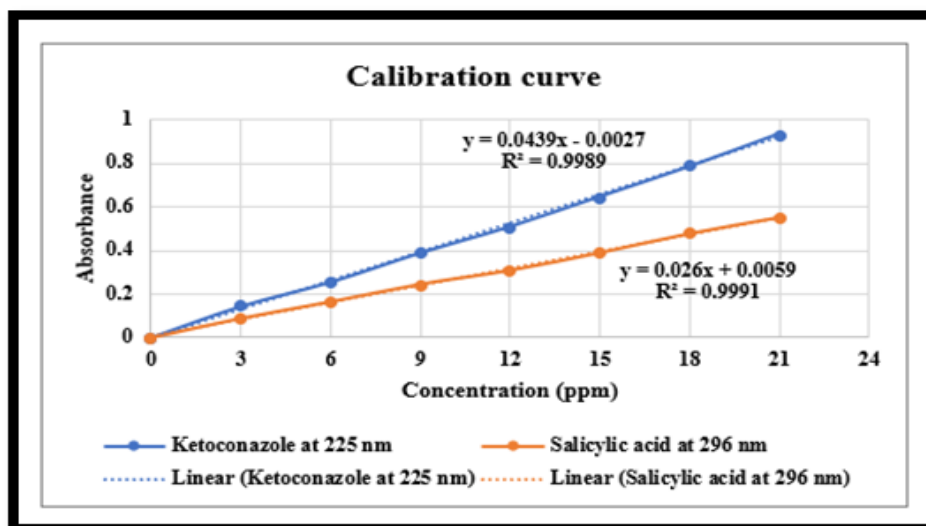


Figure 4: Calibration curve of ketoconazole at 225 nm and Salicylic acid at 296 nm.

Table 1: Calibration data of Ketoconazole and Salicylic acid for method I (in triplicate).

| Sr. no. | Conc (µg/ml) | Ketoconazole at 225 nm | | Salicylic acid at 296 nm | |
|---------|--------------|------------------------|------|--------------------------|------|
| | | Absorbance*mean ± SD | %RSD | Absorbance*mean ± SD | %RSD |
| 1. | 0 | 0 | 0 | 0 | 0 |
| 2. | 3 | 0.1433 ± 0.0025 | 1.75 | 0.089 ± 0.001 | 1.12 |
| 3. | 6 | 0.2547 ± 0.0031 | 1.19 | 0.16533 ± 0.0025 | 1.52 |
| 4. | 9 | 0.389 ± 0.0026 | 0.68 | 0.246 ± 0.002 | 0.81 |
| 5. | 12 | 0.5097 ± 0.0021 | 0.40 | 0.30967 ± 0.0015 | 0.49 |
| 6. | 15 | 0.6477 ± 0.0015 | 0.23 | 0.39033 ± 0.004 | 1.03 |
| 7. | 18 | 0.7857 ± 0.0035 | 0.44 | 0.47833 ± 0.0031 | 0.63 |
| 8. | 21 | 0.936 ± 0.0036 | 0.38 | 0.55233 ± 0.0025 | 0.45 |

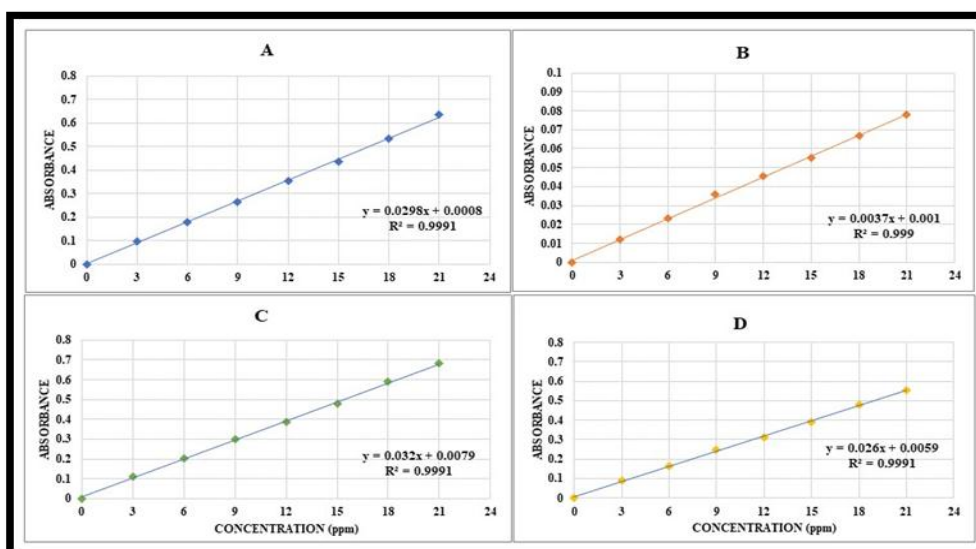


Figure 5: Calibration curve of (A) Ketoconazole at 239 nm (B) Ketoconazole at 296 nm (C) Salicylic acid at 239 nm (D) Salicylic acid at 296 nm.

Table 2: Calibration data of Salicylic acid and Ketoconazole for Method II (in triplicate).

| Sr. no. | Salicylic acid | | | | | | | Ketoconazole | | | | | |
|---------|-----------------------|----------------------|--------|-------|----------------------|--------|-------|----------------------|-------|-------|----------------------|--------|-------|
| | Concentration (µg/ml) | Absorbance at 239 nm | | | Absorbance at 296 nm | | | Absorbance at 239 nm | | | Absorbance at 296 nm | | |
| | | Mean (n=3) | SD | % RSD | Mean (n=3) | SD | % RSD | Mean (n=3) | SD | % RSD | Mean (n=3) | SD | % RSD |
| 1. | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2. | 3 | 0.112 | 0.0015 | 1.356 | 0.089 | 0.001 | 1.12 | 0.098 | 0.001 | 1.55 | 0.012 | 0.001 | 8.33 |
| 3. | 6 | 0.204 | 0.002 | 0.98 | 0.1653 | 0.0025 | 1.52 | 0.179 | 0.003 | 1.67 | 0.023 | 0.0006 | 2.4 |
| 4. | 9 | 0.3 | 0.002 | 0.667 | 0.246 | 0.002 | 0.81 | 0.266 | 0.003 | 1.35 | 0.035 | 0.0006 | 1.66 |
| 5. | 12 | 0.385 | 0.002 | 0.653 | 0.309 | 0.0015 | 0.49 | 0.354 | 0.002 | 0.74 | 0.045 | 0.0006 | 1.26 |
| 6. | 15 | 0.477 | 0.002 | 0.419 | 0.390 | 0.004 | 1.03 | 0.436 | 0.002 | 0.57 | 0.055 | 0.001 | 1.81 |
| 7. | 18 | 0.589 | 0.002 | 0.353 | 0.478 | 0.0031 | 0.63 | 0.535 | 0.002 | 0.38 | 0.067 | 0.001 | 1.49 |
| 8. | 21 | 0.682 | 0.002 | 0.369 | 0.552 | 0.0025 | 0.45 | 0.636 | 0.003 | 0.47 | 0.078 | 0.001 | 1.28 |

Table 3: Optical and regression parameter of the calibration curve obtained by UV spectroscopy methods (Average of 3 determinations).

| Parameters | Method 1 | | Method 2 | | | |
|----------------------------------|--------------|----------------|----------------------------|----------------|-------------------------------|----------------|
| | Ketoconazole | Salicylic acid | Ketoconazole | Salicylic acid | Ketoconazole | Salicylic acid |
| Wavelength λ_{\max} (nm) | 225 | 296 | Isosbestic point at 239 nm | | Selected Wavelength at 296 nm | |
| Beer's law limit (µg/ml) | 3-21 | 3-21 | 3-21 | 3-21 | 3-21 | 3-21 |
| Correlation coefficient r^2 | 0.9989 | 0.9991 | 0.9991 | 0.9991 | 0.9989 | 0.9991 |
| Slope | 0.0439 | 0.026 | 0.0298 | 0.032 | 0.0037 | 0.026 |
| Intercept | 0.0027 | 0.0059 | 0.0008 | 0.0079 | 0.0011 | 0.0059 |
| Intra-day (%RSD) | 0.967 | 0.717 | 0.473 | 1.486 | 1.20 | 0.717 |
| Inter-day (%RSD) | 1.710 | 0.777 | 1.683 | 1.547 | 1.660 | 0.777 |
| LOD (µg/ml) | 0.4747 | 0.7047 | 0.6783 | 0.5033 | 1.8015 | 0.7047 |
| LOQ (µg/ml) | 1.4384 | 2.1355 | 2.0556 | 1.5253 | 5.4591 | 2.1355 |

Accuracy (Recovery study)

For Method I, % recoveries were found to be 99.8-102.7% for Ketoconazole and 82.9-92.81% for Salicylic acid. For Method II, % recoveries were found to be 96.03-98.8% (296 nm) and 87.7-97.6% (239 nm) for Ketoconazole and 102.6-108% (296 nm) and 97-100% (239 nm) for Salicylic acid. The recovery studies are reported in (Table 4).

Table 4: Result of % Recovery and % RSD of Ketoconazole and Salicylic acid for Method I and Method II (*Average of 3 determinations).

| Drugs | Recovery level | Initial conc. (Test-formulation) $\mu\text{g/ml}$ | Conc. of Std. Drug added $\mu\text{g/ml}$ | Method I | | Method II | | | |
|-------|----------------|---|---|------------------------|-------|------------|--------|--------|--------|
| | | | | % Recovery | % RSD | % Recovery | | % RSD | |
| | | | | λ_{max} | | 296 nm | 239 nm | 296 nm | 239 nm |
| Keto | 80 | 6 | 4.8 | 99.8 | 1.73 | 97 | 87.7 | 5.26 | 1.99 |
| | 100 | 6 | 6 | 102.7 | 1.49 | 96.03 | 97.6 | 2.47 | 1.13 |
| | 120 | 6 | 7.2 | 100 | 0.65 | 98.8 | 92.3 | 3.44 | 1.52 |
| SA | 80 | 6 | 4.8 | 83.1 | 1.39 | 102.6 | 97 | 1.4 | 1.75 |
| | 100 | 6 | 6 | 82.9 | 1.53 | 106 | 98 | 1.16 | 0.77 |
| | 120 | 6 | 7.2 | 92.81 | 1.46 | 108 | 100 | 0.98 | 1.27 |

Precision

For Method I, % RSD of intra-day and inter-day precision was found to be less than 2 for both the drugs. For Method II, % RSD for Intra-day and inter-day precision of both Ketoconazole and Salicylic acid was found to be less than 2 at 239 nm and 296 nm. Results are expressed in (Table 5).

Table 5: Result of Intra-day and Intra-day precision of Ketoconazole and Salicylic acid for Method I and Method II.

| Sr. No. | Conc. (µg/ml) | | λ _{max} (nm) | Intra-Day Absorbance*mean ± S.D. | | % RSD | | Inter-Day Absorbance*mean ± S.D. | | % RSD | |
|-----------|---------------|----|-------------------------|----------------------------------|-----------------|-------|------|----------------------------------|-----------------|-------|------|
| | Keto | SA | | Keto | SA | Keto | SA | Keto | SA | Keto | SA |
| Method I | | | | | | | | | | | |
| 1. | 9 | 9 | Keto-225 nm & SA-296 nm | 0.3837 ± 0.0047 | 0.2481 ± 0.0018 | 1.2 | 0.76 | 0.3954 ± 0.0072 | 0.2444 ± 0.0016 | 1.83 | 0.68 |
| 2. | 12 | 12 | | 0.5078 ± 0.0016 | 0.3122 ± 0.0030 | 0.3 | 0.99 | 0.5076 ± 0.0101 | 0.3097 ± 0.0003 | 1.99 | 0.10 |
| 3. | 15 | 15 | | 0.6368 ± 0.0095 | 0.3921 ± 0.0015 | 1.4 | 0.40 | 0.6554 ± 0.0086 | 0.3964 ± 0.0061 | 1.31 | 1.55 |
| Method II | | | | | | | | | | | |
| 1. | 9 | 9 | 239 | 0.2613 ± 0.004 | 0.3016 ± 0.0015 | 0.50 | 1.59 | 0.2603 ± 0.0051 | 0.2952 ± 0.0042 | 1.97 | 1.42 |

| | | | | | | | | | | | |
|----|----|----|-----|-----------------|-----------------|------|------|-----------------|-----------------|------|------|
| | | | 296 | 0.0337 ± 0.0003 | 0.2481 ± 0.0019 | 0.76 | 1.11 | 0.0343 ± 0.0006 | 0.2444 ± 0.0017 | 1.82 | 0.68 |
| 2. | 12 | 12 | 239 | 0.3480 ± 0.005 | 0.3863 ± 0.0018 | 0.45 | 1.59 | 0.3489 ± 0.004 | 0.3774 ± 0.0072 | 1.35 | 1.91 |
| | | | 296 | 0.0452 ± 0.0003 | 0.3122 ± 0.0031 | 0.99 | 0.87 | 0.0445 ± 0.0005 | 0.3096 ± 0.0003 | 1.20 | 0.10 |
| 3. | 15 | 15 | 239 | 0.4296 ± 0.005 | 0.4795 ± 0.0023 | 0.47 | 1.28 | 0.4313 ± 0.007 | 0.475 ± 0.0062 | 1.73 | 1.31 |
| | | | 296 | 0.0543 ± 0.054 | 0.3921 ± 0.0016 | 0.40 | 1.62 | 0.0509 ± 0.001 | 0.3964 ± 0.0062 | 1.96 | 1.55 |

LOD and LOQ

For Method I, Limit of detection was found to be 0.4747 and 0.7047 for Ketoconazole and Salicylic acid. Limit of Quantification was found to be 1.4384 and 2.1355 for Ketoconazole and Salicylic acid. For Method II, Limit of detection was found to be 0.6783 at 239 nm, 1.8015 at 296 nm for Ketoconazole and 0.5033 at 239 nm, 0.7047 at 296 nm for Salicylic acid. Limit of quantitation was found to be 2.0556 at 239 nm, 5.4591 at 296 nm for Ketoconazole and 1.5253 at 239 nm, 2.1355 at 296 nm for Salicylic acid.

Robustness

In robustness results are obtained at different wavelengths. For Method I and Method II, % RSD for Ketoconazole and salicylic acid at different wavelength was found to be less than 2. Results are expressed in (Table 6 and Table 7)

Table 6: Result of robustness of Ketoconazole and Salicylic acid for method I.

| Sr. no. | Drugs | Keto | | | SA | | |
|---------|--------------|--------|--------|--------|--------|--------|--------|
| | Conc (µg/ml) | 223 | 225 | 227 | 294 | 296 | 298 |
| 1. | 15 | 0.665 | 0.666 | 0.665 | 0.377 | 0.385 | 0.384 |
| 2. | 15 | 0.662 | 0.663 | 0.661 | 0.38 | 0.389 | 0.386 |
| 3. | 15 | 0.661 | 0.662 | 0.661 | 0.381 | 0.391 | 0.388 |
| 4. | Mean | 0.6626 | 0.6636 | 0.6623 | 0.3793 | 0.3883 | 0.386 |
| 5. | SD | 0.0021 | 0.0021 | 0.0023 | 0.0020 | 0.0030 | 0.002 |
| 6. | %RSD | 0.3141 | 0.3137 | 0.3487 | 0.5487 | 0.7867 | 0.5181 |

Table 7: Result of robustness of Ketoconazole and Salicylic acid for Method II.

| Sr. No. | Drugs | Keto (at selected wavelength) | | | Keto (at isosbestic wavelength) | | | SA (at selected wavelength) | | | SA (at isosbestic wavelength) | | |
|---------|--------------|-------------------------------|-------|-------|---------------------------------|-------|-------|-----------------------------|-------|-------|-------------------------------|-------|-------|
| | Conc (µg/ml) | 294 | 296 | 298 | 237 | 239 | 241 | 294 | 296 | 298 | 237 | 239 | 241 |
| 1. | 15 | 0.056 | 0.055 | 0.377 | 0.385 | 0.377 | 0.385 | 0.377 | 0.385 | 0.384 | 0.55 | 0.469 | 0.351 |
| 2. | 15 | 0.056 | 0.054 | 0.38 | 0.389 | 0.38 | 0.389 | 0.38 | 0.389 | 0.386 | 0.555 | 0.472 | 0.353 |

| | | | | | | | | | | | | | |
|----|-------|-----------|-----------|------------|------------|------------|------------|------------|------------|------------|-------------|------------|--------|
| 3. | 15 | 0.05 7 | 0.0 56 | 0.38 1 | 0.391 | 0.38 1 | 0.39 1 | 0.38 1 | 0.39 1 | 0.3 88 | 0.55 6 | 0.47 5 | 0.356 |
| 4. | Mean | 0.05 6 | 0.0 55 | 0.37 93 | 0.388 3 | 0.37 93 | 0.38 83 | 0.37 93 | 0.38 83 | 0.3 86 | 0.55 36 | 0.47 2 | 0.3533 |
| 5. | SD | 0.00 0 | 0.0 01 | 0.00 21 | 0.003 0 | 0.00 21 | 0.00 30 | 0.00 21 | 0.00 30 | 0.0 02 | 0.00 321 | 0.00 3 | 0.0025 |
| 6. | % RSD | 1.02 4 | 1.8 18 | 0.54 88 | 0.786 7 | 0.54 88 | 0.78 67 | 0.54 88 | 0.78 67 | 0.5 181 | 0.58 06 | 0.63 56 | 0.7122 |

Ruggedness

In both the Methods results are in the satisfactory range for Ketoconazole and Salicylic acid obtained by analyst 1 and analyst 2. The results are illustrated in (Table 8). The result showed that the % RSD was less than 2%.

Table 8: Result of Ruggedness of Ketoconazole and Salicylic acid for Method I and Method II.

| Method | Drugs | Conc (µg/ml) | Wavelength (nm) | Analyst 1 | | Analyst 2 | |
|-----------|-------|-----------------|--------------------|--------------------------|------|--------------------------|------|
| | | | | Absorbance* mean ± SD | %RSD | Absorbance* mean ± SD | %RSD |
| Method I | Keto | 15 | 225 | 0.6643 ± 0.0035 | 0.52 | 0.668 ± 0.003 | 0.44 |
| | SA | 15 | 296 | 0.3883 ± 0.0030 | 0.78 | 0.3916 ± 0.0025 | 0.64 |
| Method II | Keto | 15 | 239 | 0.4477 ± 0.0015 | 0.34 | 0.4517 ± 0.0020 | 0.46 |
| | | | 296 | 0.055 ± 0.001 | 1.81 | 0.057 ± 0.001 | 1.75 |
| | SA | 15 | 239 | 0.472 ± 0.003 | 0.63 | 0.471 ± 0.002 | 0.53 |
| | | | 296 | 0.3883 ± 0.0030 | 0.78 | 0.3917 ± 0.0025 | 0.64 |

Application of developed UV spectrophotometric methods

The developed methods were applied successfully to the emulgel formulation. The Percentage of Ketoconazole and Salicylic acid from the emulgel dosage form was found to be 101.66% and 90.53% by Simultaneous equation method (Method I) and 98.92% and 91.61% by Q-absorbance ratio method (Method II) respectively with standard deviation less than 2%.

DISCUSSION

Method I rely on resolution of a simultaneous equation. Absorbances of Ketoconazole and Salicylic acid in ethanol and buffer pH-5 in ratio 1:1 solvent was determined at their respective absorbance maxima's (λ_{\max}) of 225 and 296 nm. Method II is the Q-analysis or absorption ratio method in which absorbances were determined at 239 nm (isosbestic point) and 296 nm (λ_{\max} of Salicylic acid). The methods are validated in accordance with the

International Conference on Harmonization (ICH) requirements. The proposed method's reproducibility, repeatability, and accuracy were determined to be satisfactory, as evidenced by the low standard deviation (SD) and % relative standard deviation values (%RSD). Recovery studies, in which known amount of the drugs were added to the reanalyzed formulations have explored the validity and reliability of the proposed methods. The % recovery attained specifies that the additives used in the emulgel formulation do not interfere. The % RSD value calculated from the robustness study was found to be less than 2% for both drugs indicating that the method is robust. Thus, the developed methods, simultaneous equation method (Method I) and Q-Absorbance Ratio Method (Method II) in current study is found to be accurate, precise, sensitive and simple. The assay results indicates that these methods can be effectively used for simultaneous estimation of both drugs in formulation. The proposed methods use inexpensive laboratory reagents, solvents and tools. As a result, these procedures can be easily implemented in quality control laboratories for routine analysis.

CONCLUSION

Ketoconazole and Salicylic acid are known for its wide therapeutic application and hence can be formulated into a series of pharmaceutical dosage forms. Two simple, precise and economic Spectrophotometric methods such as Simultaneous estimation method and Absorbance ratio method were developed for simultaneous estimation of both the drug Ketoconazole and Salicylic acid in bulk and in developed emulgel. This method can be extended as a challenging approach to formulate dosage forms containing Ketoconazole and Salicylic acid in combination. The developed analytical method can be used to perform routine analysis and quality control on pharmaceutical formulations that contain these drugs in combination.

CONFLICT OF INTEREST

Authors declare that there is no conflict of interest.

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REFERENCES

1. Verma V, Singh UK. Ketoconazole HPLC Method Development and Validation: A Novel Approach. *Int Res J Pharm*, 2017; 8(8): 74-81. doi: 10.7897/2230-8407.088148
2. Popovska O, Kavrakovski Z, Rafajlovska V. Development and validation of UV Spectroscopic method for determination of Ketoconazole in pharmaceutical dosage form. *Int J Pharm*, 2014; 4(4): 95-101.
3. Basa S, Muniyappan T, Karatgi P, Prabhu R, Pillai R. Production and in vitro characterization of solid dosage form incorporating drug nanoparticles. *Drug Dev Ind Pharm*, 2008; 34(11): 1209-18. doi: 10.1080/03639040802005024.
4. Bachhav KJ, Bhairav BA, Saudagar RB, Pandya DB. U.V. Spectrophotometric Method Development for Estimation of Ketoconazole in Bulk and Pharmaceutical Formulations. *Int J Univers Pharm Bio Sci*, 2016; 5(2): 168-174.
5. Naik RM, Gumpula S, Mhaskar PS. Simultaneous estimation of hydrocortisone and ketoconazole in pharmaceutical dosage form by RP-HPLC method. *Int J Pharm Sci Res*, 2018; 9(11): 4805-11. doi:10.13040/IJPSR.0975-8232.9(11).4805-11.
6. Choi FD, Juhasz MLW, Mesinkovska NA. Topical Ketoconazole: a systematic review of current dermatological applications and future developments. *J Dermatol Treat*, 2019; 30(8): 760-771. doi:10.1080/09546634.2019.1573309
7. Jani DH, Patel SA. Spectrophotometric Determination of Salicylic acid from single as well as combined dosage form. *World J Pharm Res*, 2018; 7(8): 938-947. doi:10.20959/wjpr20188-11862
8. Abass AM, Rzaiz JM, Salman HG, Al-Hashemi WK. A Review on a Some Analytical Methods for Determination of Salicylic Acid. *Open Access Journal of Chemistry*, 2019; 3(3): 22-28.
9. Gire S, Datar P, Shete R. Development and validation of Analytical method for Simultaneous estimation of Ketoconazole and Salicylic acid in bulk and dosage form. *Int J Univers Pharm Bio Sci*, 2018; 7(5): 1-15. doi: 10.33786/jcpr.2018.v08i04.005
10. Abounassif MA, Mian MS, Mian NAA. Salicylic Acid. In: *Analytical Profiles of Drug Substances and Excipients*, 1994; 23: 421-470. doi:10.1016/S0099-5428(08)60609-7
11. Arif T. Salicylic acid as a peeling agent: a comprehensive review. *Clin Cosmet Investig Dermatol*, 2015; 8: 455-461. doi: 10.2147/CCID.S84765
12. Shah U, Gandhi A. Q-Absorption Ratio and Simultaneous Equation Spectrophotometric method for Simultaneous estimation of Fenbendazole and Niclosamide in pure drug and pharmaceutical formulations. *Indian Drugs*, 2016; 53(01): 47-53.

13. Prathyusha V, Abdul R, Revathi S, Rebnuka G. Development and Validation of UV Spectrophotometric method for Simultaneous estimation of Ciprofloxacin and Tinidazole in Tablet Dosage Form. *Int J Pharm & Ind Res*, 2013; 3(03): 295-300.
14. Pawar P, Chintawar P, Harde M, Ingale P, Chaudhari PD. Simultaneous Spectrophotometric Estimation of Gatifloxacin and Ketorolac Tromethamine in Bulk Drug and in Ophthalmic Dosage Form. *J Pharm Res*, 2011; 10(1): 21-24. doi:10.18579/jpcrk/2011/10/1/89033
15. Singh G, Kumar D, Sharma D, Singh M, Kaur S. Q-Absorbance Ratio Spectrophotometric Method for the Simultaneous Estimation of Prednisolone and 5-Amino Salicylic Acid in Tablet Dosage form. *J Appl Pharm Sci*, 2012; 02(06): 222-226. doi:10.7324/JAPS.2012.2736
16. Patil PA, Raj HR, Sonara GB. Q-Absorbance Ratio Spectrophotometric Method for Simultaneous determination of Atenolol and Ivabradine Hydrochloride in synthetic mixture. *Pharm Biol Eval*, 2016; 3(2): 224-230.
17. Paghadar B, Antala H, Pratik Tala P, Dhudashia K, Patel N. Q-Absorbance Ratio Spectrophotometric Method for the Simultaneous Estimation of Vardenafil and Dapoxetine Hydrochloride in their Combined Dosage Form. *Int J Res Pharm Nano Sci*, 2013; 2(1): 124-129.
18. Beckett AK, Stanlake JB. *Practical Pharmaceutical Chemistry*. New Delhi: CBS Publishers, 1997; 4: 286–8. Part II.
19. The International Conference on Harmonization Q2 R1 Validation of Analytical Procedure; Text and Methodology. Geneva, Switzerland, 2005.
20. Lavanya G, Sunil M, Eswarudu MM, Chinna Eswaraiah M, Harisudha K, Naga Spandana B. Analytical Method Validation: An Updated Review. *Int J Pharm Sci Res*, 2013; 4(4): 1280-1286. [http://dx.doi.org/10.13040/IJPSR.0975-8232.4\(4\).1280-86](http://dx.doi.org/10.13040/IJPSR.0975-8232.4(4).1280-86)
21. Ravichandran V, Shalini S, Sundram KM, Harish R. Validation of Analytical Methods – Strategies & Importance. *Int J Pharm Pharm Sci*, 2010; 2(10): 18-22.
22. ICH, Q2A Text on validation of analytical procedures: Methodology International Conference on Harmonization of technical requirements for registration of pharmaceutical for human use. Geneva, Switzerland, 1996.
23. Pandey G, Mishra B. A New Analytical Q-Absorbance Ratio Method Development and Validation for Simultaneous Estimation of Lamivudine and Isoniazid. *ISRN Spectroscopy*, 2013; 1-5. <https://doi.org/10.1155/2013/912376>