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Reverse Phase High Performance Liquid Chromatographic Technique for the Determination of Rabeprazole in Pure and It's Dosage Form

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ABSTRACT

A rapid and precise reverse phase high performance liquid chromatographic method has been developed for the validated of Rabeprazole, in its pure form as well as in tablet dosage form. Chromatography was carried out on a Symmetry C18 (4.6 x 150mm, 5 μ m) column using a mixture of Methanol and water (80:20 v/v) as the mobile phase at a flow rate of 0.8ml/min, the detection was carried out at 280nm. The retention time of the Rabeprazole was 2.379 \pm 0.02min respectively. The method produce linear responses in the concentration range of 20-100mg/ml of Rabeprazole. The method precision for the determination of assay was below 2.0%RSD. The method is useful in the quality control of bulk and pharmaceutical formulations.

Keywords: Rabeprazole, RP-HPLC, validation.

ARTICLE INFO

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1. Introduction

Quality control is a concept which strives to produce a perfect product by series of measures designed to prevent and eliminate errors at different stages of production. The decision to release or reject a product is based on one or more type of control action. With the growth of pharmaceutical industry during last several years, there has

been rapid progress in the field of pharmaceutical analysis involving complex instrumentation. Providing simple analytical procedure for complex formulation is a matter of most importance. So, it becomes necessary to develop new analytical methods for such drugs. In brief the reasons for the development of newer methods of drugs analysis are:

1. The drug or drug combination may not be official in any pharmacopoeias.
2. A proper analytical procedure for the drug may not be available in the literature due to Patent regulations.
3. Analytical methods for a drug in combination with other drugs may not be available.
4. Analytical methods for the quantitation of the drug in biological fluids may not be available.
5. The existing analytical procedures may require expensive reagents and solvents. It may also involve cumbersome extraction and separation procedures and these may not be reliable.

Introduction to HPLC

HPLC is also called as high pressure liquid chromatography since high pressure is used to increase the flow rate and efficient separation by forcing the mobile phase through at much higher rate. The pressure is applied using a pumping system. The development of HPLC from classical column chromatography can be attributed to the development of smaller particle sizes. Smaller particle size is important since they offer more surface area over the conventional large particle sizes. The HPLC is the method of choice in the field of analytical chemistry, since this method is specific, robust, linear, precise and accurate and the limit of detection is low and also it offers the following advantages.

1. Improved resolution of separated substances
2. column packing with very small (3,5 and 10 μm) particles
3. Faster separation times (minutes)
4. Sensitivity
5. Reproducibility
6. continuous flow detectors capable of handling small flow rates
7. Easy sample recovery, handling and maintenance.

1.2.1 Types of HPLC Techniques

1.2.1.1 Based on Modes of Chromatography

These distinctions are based on relative polarities of stationary and mobile phases

Reverse phase chromatography:

In this the stationary phase is non-polar and mobile phase is polar. In this technique the polar compounds are eluted first and non polar compounds are retained in the column and eluted slowly. Therefore it is widely used technique.

Normal phase chromatography:

In this the stationary phase is polar and mobile phase is non-polar. In this technique least polar compounds travel faster and are eluted first where as the polar compounds are retained in the column for longer time and eluted.

2. Materials and Methods

Materials: Rabeprazole (Pure), Water and Methanol for HPLC, Acetonitrile for HPLC

Method Development

The selected method was used for method development of the drug molecules Rabeprazole as per ICH guidelines. By taking different mobile phases and by changing columns trials have been done and validation process is done for the optimized method.

Optimized Chromatographic Conditions:

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Instrument used : Waters HPLC with auto sampler and PDA detector 996 model.

Temperature : 45°C

Column : Symmetry C18 (4.6 x 150mm, 5 μm)

Mobile phase : Methanol: Water (80:20 v/v)

Flow rate : 0.8ml/min

Wavelength : 280nm

Injection volume : 10 μl

Run time : 6minutes

3. Results and Discussion

Optimized Chromatogram (Standard)

Mobile phase ratio : Methanol: water (80:20 v/v)

Column : Symmetry C18 (4.6x150mm) 5 μm

Column temperature : 45°C

Wavelength : 280nm

Flow rate : 0.8ml/min

Injection volume : 10 μl

Run time : 6minutes

Specificity

The ICH documents define specificity as the ability to assess unequivocally the analyte in the presence of components that may be expected to be present, such as impurities, degradation products, and matrix components. Analytical method was tested for specificity to measure accurately quantitative Rabeprazole in drug product.

Precision: The precision of an analytical procedure expresses the closeness of agreement (degree of scatter) between a series of measurements obtained from multiple sampling of the same homogeneous sample under the prescribed conditions.

Repeatability: Obtained Five (5) replicates of 100% accuracy solution as per experimental conditions. Recorded the peak areas and calculated % RSD.

Accuracy: Accuracy at different concentrations (50%, 100%, and 150%) were prepared and the % recovery was calculated.

Limit of Detection for Rabeprazole

The detection limit of an individual analytical procedure is the lowest amount of analyte in a sample which can be detected but not necessarily quantitated as an exact value.

$$\text{LOD} = 3.3 \times \text{S} / \text{s}$$

Where

= Standard deviation of the response

S = Slope of the calibration curve

Result:

$$= 3.3 \times 53204 / 38050$$

$$= 4.6 \mu\text{g/ml}$$

Quantitation limit

The quantitation limit of an individual analytical procedure is the lowest amount of analyte in a sample which can be quantitatively determined.

LOQ = 10 × S

Where, = Standard deviation of the response

S = Slope of the calibration curve

Result: = 10 × 53204 / 38050

$$= 13.9 \mu\text{g/ml}$$

Robustness: The robustness was performed for the flow rate variations from 0.9 ml/min to 1.1ml/min and mobile phase ratio variation from more organic phase to less organic phase ratio for Rabeprazole. The method is robust only in less flow condition and the method is robust even

by change in the Mobile phase $\pm 10\%$. The standard and samples of Rabeprazole were injected by changing the conditions of chromatography. There was no significant change in the parameters like resolution, tailing factor, asymmetric factor, and plate count.

Table 1: Optimized Chromatogram (Standard)

S.No	Name	RT	Area	Height	USP Tailing	USP Plate Count
1	Rabeprazole	2.379	3119086	258364	1.2	5837

Table:2 Optimized Chromatogram (Sample)

S.No	Name	RT	Area	Height	USP Tailing	USP Plate Count
1	Rabeprazole	2.380	3118812	258374	1.2	5264

Table 3: Results of system suitability for Rabeprazole

S.No	Peak Name	RT	Area ($\mu\text{V}\cdot\text{sec}$)	Height (μV)	USP Plate Count	US Tailing
1	Rabeprazole	2.317	2274631	239458	5728	1.2
2	Rabeprazole	2.302	2284721	239582	5093	1.2
3	Rabeprazole	2.323	2238127	236493	5391	1.2
4	Rabeprazole	2.343	2259349	249482	6139	1.2
5	Rabeprazole	2.321	2204850	239452	5281	1.2
Mean			2252336			
Std. Dev.			31827.08			
%RSD			1.41307			

Table 4: Chromatographic Data for Linearity Study

Concentration Level (%)	Concentration \sim g/ml	Average Peak Area
33	20	791554
66	40	1647073
100	60	2283804
133	80	3058339
166	100	3839630

Table 5: Results of repeatability for Rabeprazole

S. No	Peak name	Retention time	Area($\mu\text{V}\cdot\text{sec}$)	Height (μV)	USP Plate Count	USP Tailing
1	Rabeprazole	2.356	2259464	245362	5938	1.2
2	Rabeprazole	2.356	2275915	248293	5827	1.2
3	Rabeprazole	2.357	2282117	240795	5032	1.2
4	Rabeprazole	2.358	2278675	230139	5978	1.2
5	Rabeprazole	2.359	2282448	249605	6183	1.2
Mean			2275724			
Std.dev			9476.485			
%RSD			0.416416			

Table 6: Results of Intermediate precision for Rabeprazole

S.No	Peak Name	RT	Area ($\mu\text{V}\cdot\text{sec}$)	Height (μV)	USP Plate count	USP Tailing
1	Rabeprazole	2.380	2236184	202188	5472	1.2
2	Rabeprazole	2.383	2238020	201837	6193	1.2
3	Rabeprazole	2.385	2239352	201273	5980	1.2
4	Rabeprazole	2.385	2242466	203923	7163	1.2
5	Rabeprazole	2.389	2244692	202938	6182	1.2
6	Rabeprazole	2.389	2247654	201982	7684	1.2
Mean			2241395			
Std.Dev.			4333.851			
%RSD			0.193355			

Table 7: Results of Intermediate precision Day 2 for Rabeprazole

S.No	Peak Name	RT	Area ($\mu\text{V}\cdot\text{sec}$)	Height (μV)	USP Plate count	USP Tailing
1	Rabeprazole	2.380	2236184	217363	5928	1.2
2	Rabeprazole	2.383	2238020	218467	6183	1.2
3	Rabeprazole	2.385	2239352	218346	5927	1.2
4	Rabeprazole	2.385	2242466	221736	5163	1.2
5	Rabeprazole	2.389	2244692	228361	4827	1.2
6	Rabeprazole	2.346	2263431	217553	5019	1.2
Mean			2244024			
Std.Dev.			9988.458			
%RSD			0.445114			

Table 8: The accuracy results for Rabeprazole

% Concentration (at specification Level)	Area	Amount Added (ppm)	Amount Found (ppm)	% Recovery	Mean Recovery
50%	1172485	30	29.9	99.7	100.0%
100%	2314753	60	59.9	99.8	
150%	3480210	90	90.5	100.6	

Table 9: Results for Robustness

Parameter used for sample analysis	Peak Area	Retention Time	Theoretical plates	Tailing factor
Actual Flow rate of 1.0 mL/min	3119086	2.379	5837	1.2
Less Flow rate of 0.7 mL/min	2640811	2.763	5361	1.2
More Flow rate of 0.9 mL/min	2640354	2.234	5231	1.2
Less organic phase	2640758	2.765	4503	1.5
More organic phase	2640125	2.236	4491	1.5

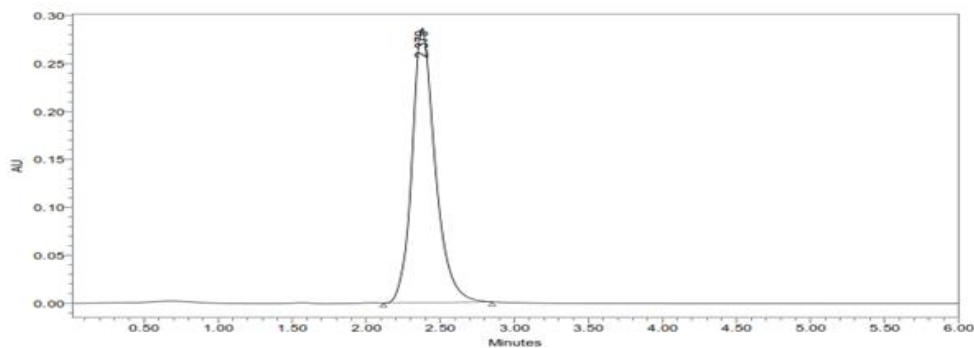


Figure 1: Optimized Chromatogram

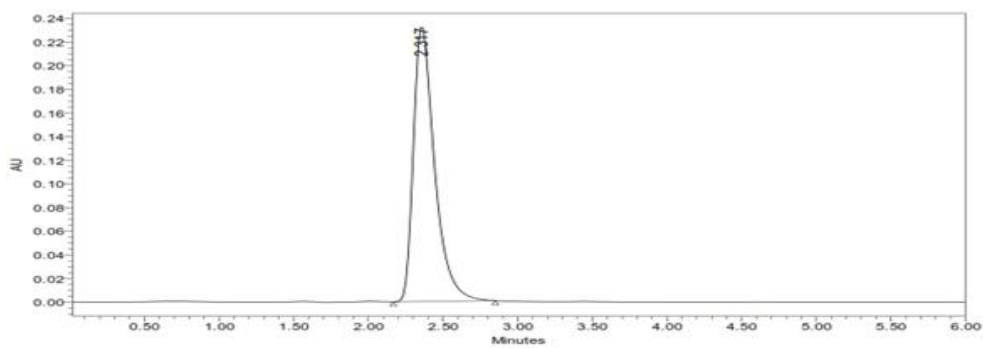


Figure 2: Chromatogram showing system suitability

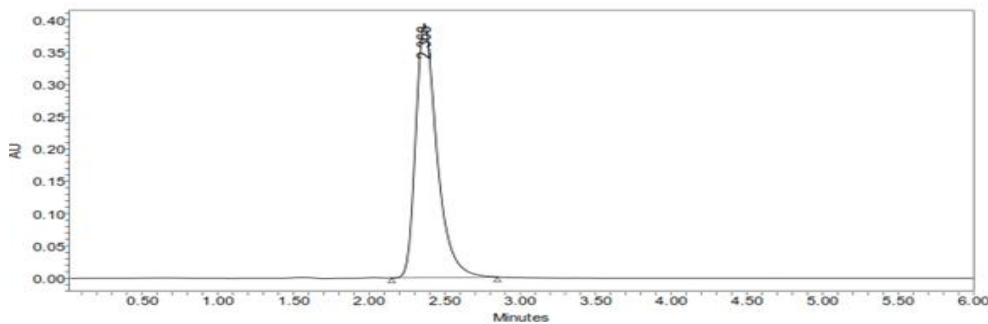


Figure 3: Chromatogram showing linearity level

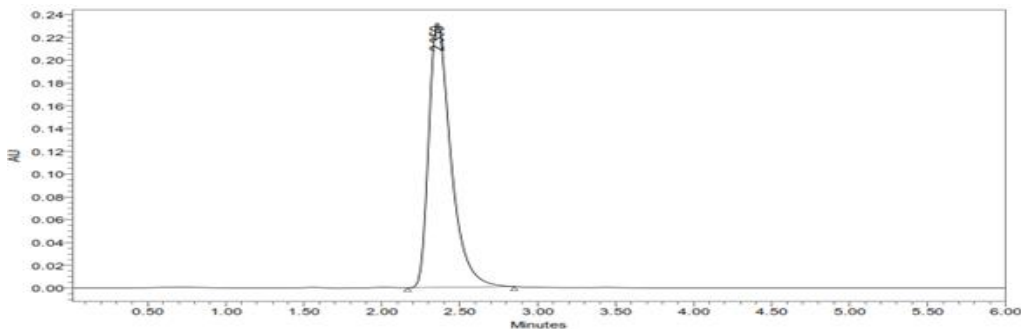


Figure 4: Chromatogram showing precision injection

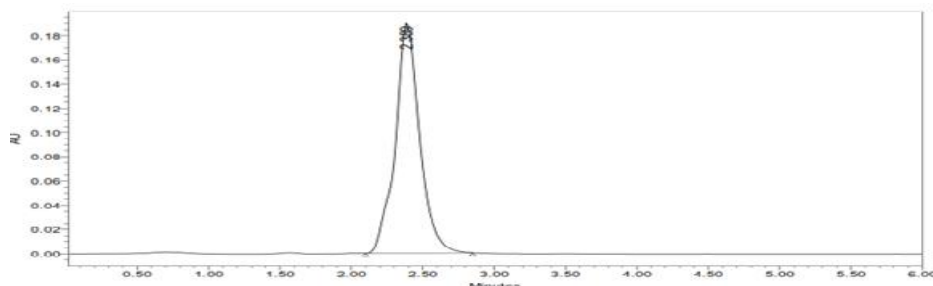


Figure 5: Chromatogram showing Day1 intermediate injection -5

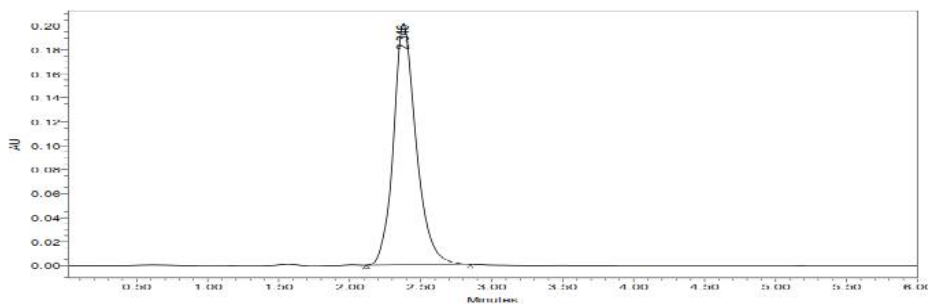


Figure 6: Chromatogram showing Day 2 intermediate injection

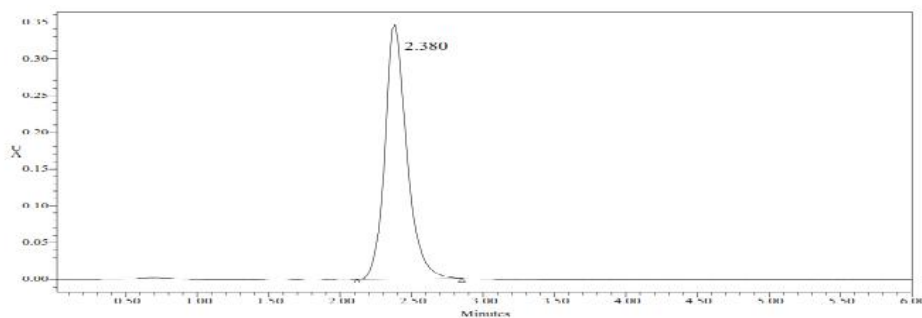


Figure 7: Chromatogram showing accuracy-50% injection

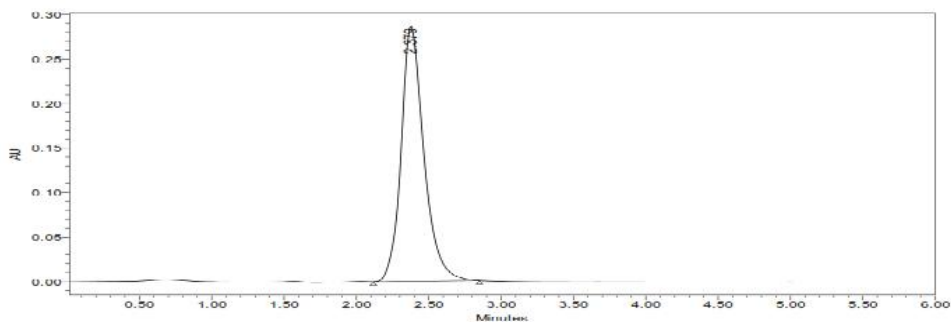


Figure 8: Chromatogram showing accuracy-100% injection

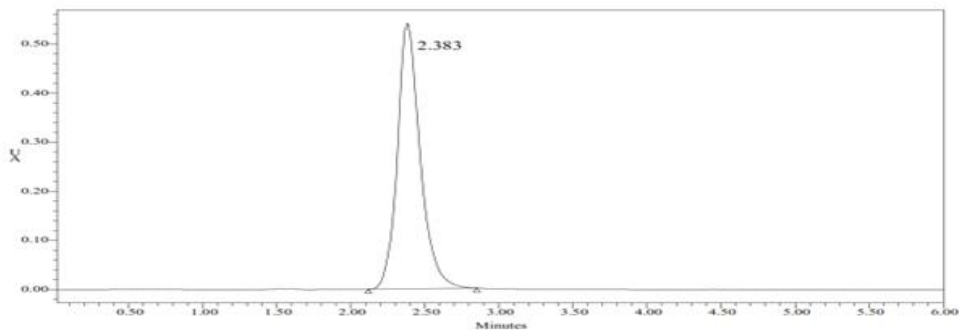


Figure 9: Chromatogram showing accuracy-150% injection

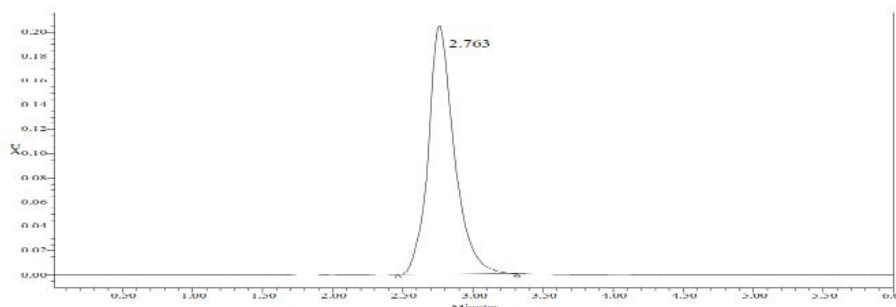


Figure 10: chromatogram showing less flow of 0.9ml/min

4. Conclusion

In the present investigation, a simple, sensitive, precise and accurate RP-HPLC method was developed for the quantitative estimation of Rabeprazole in bulk drug and pharmaceutical dosage forms. This method was simple, since diluted samples are directly used without any preliminary chemical derivatisation or purification steps. Rabeprazole was freely soluble in ethanol, methanol and sparingly soluble in water. Methanol: water was chosen as the mobile phase. The solvent system used in this method was economical. The %RSD values were within 2 and the method was found to be precise. The results expressed in Tables for RP-HPLC method was promising. The RP-HPLC method is more sensitive, accurate and precise compared to the Spectrophotometric methods. This method can be used for the routine determination of Rabeprazole in bulk drug and in Pharmaceutical dosage forms.

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