

Available online on 15.08.2021 at <http://ajprd.com>

Asian Journal of Pharmaceutical Research and Development

Open Access to Pharmaceutical and Medical Research

© 2013-20, publisher and licensee AJPRD, This is an Open Access article which permits unrestricted non-commercial use, provided the original work is properly cited

Open  Access

Research Article

Method Development, Validation and Forced Degradation Studies For the Determination of Moxifloxacin in Bulk and Pharmaceutical Dosage Forms Using UV Spectroscopy

E. Aruna*, Dr. K. Bhavya Sri, Dr. M. Sumakanth

Department of pharmaceutical analysis, RBVRR Women's college of pharmacy, affiliated to Osmania University, Hyderabad.

ABSTRACT

The objective of this work was to develop and validate spectrophotometric method for moxifloxacin for analysis. A very simple, unique, novel, reliable and easy method of spectrophotometric estimation in UV-region has been developed for the assay of moxifloxacin tablet formulation and also to perform forced degradation studies.

Method: water was used as diluents to perform all the validation parameters and stress studies.

Results: ICH guidelines were adopted during the method development and the method was validated statistically by calculating RSD and %RSD. The drug obeys Beer's lamberts law at 1-10 mcg/ml concentration. Accuracy, Linearity, precision and robustness LOD at 3.3 ppb levels, LOQ at 11.2 ppb levels was performed. % of drug Degradations at different parameters were determined.

Conclusion: - This method can be used for the routine laboratory analysis and can extend the studies to chromatographic techniques.

Keyword: moxifloxacin, validation parameters, Forced degradation.

ARTICLE INFO: Received 15 March 2021; Review Complete; 28 June 2020 Accepted; 20 July 2021 Available online 15 August 2021



Cite this article as:

E. Aruna, K. Bhavya Sri, M. Sumakanth, Method Development, Validation and Forced Degradation Studies For the Determination Of Moxifloxacin In Bulk And Pharmaceutical Dosage Forms Using UV Spectroscopy, Asian Journal of Pharmaceutical Research and Development. 2021; 9(4):16-20. DOI: <http://dx.doi.org/10.22270/ajprd.v9i4983>

*Address for Correspondence:

E. Aruna, Department of pharmaceutical analysis, RBVRR Women's college of pharmacy, affiliated to Osmania University, Hyderabad.

INTRODUCTION

Moxifloxacin HCl is a fourth generation fluoroquinolone, the antimicrobial activity of which depends upon inhibition of DNA gyrase (bacterial topoisomerase II), an enzyme necessary for DNA replication, transcription, repair and recombination^[1-6]. Moxifloxacin has in-vitro and in-vivo activities against wide range of gram+ve and gram-ve bacteria. Moxifloxacin HCl (MOXI) is 1- Cyclopropyl-6-fluoro-8-methoxy-7-[(4aS,7aS) octahydro-6H- pyrrole[3,4-b]pyridin-6-yl]-4-oxo-1,4 dihydroquinoline-3- carboxylic acid hydrochloride. a simple and cost effective analytical method is preferred^[6-12]. The objective of the present study was to develop a simple precise, accurate and economic analytical method

with better detection range, for the estimation of moxifloxacin HCl in bulk and pharmaceutical formulation. In the analytical method developed, water was used as analytical media, it was found to be stable in water, & also water is economic as compare to other media so this method is simple precise, accurate and economic. The developed method was validated as per ICH guidelines and suitable statistical tests were performed on validation data.

MATERIALS AND EQUIPMENTS

Chemicals:

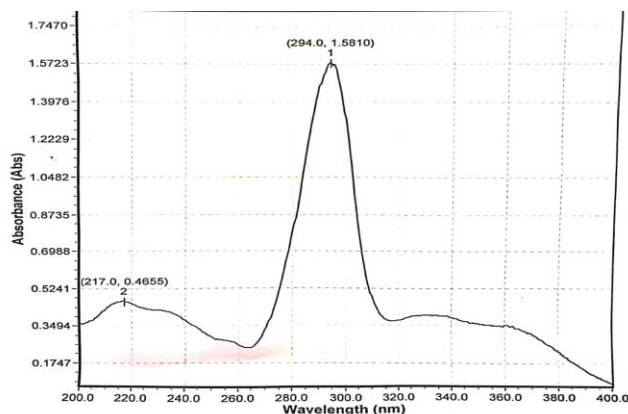
Moxifloxacin (pure API), Avelox (formulation), methanol, and water.

Instruments used:

Weighing balance, Double beam UV-Spectrophotometer (make ELICO SL 210), Volumetric flasks, pipette.

METHODOLOGY**TRAIL-1:**

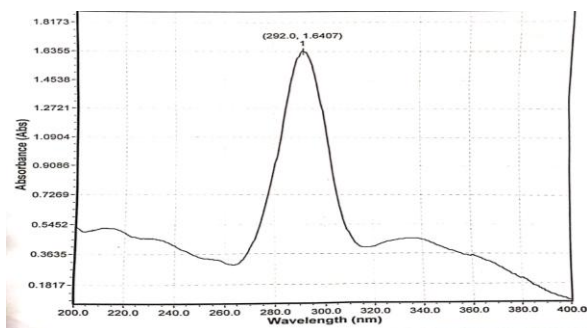
10 mg of Moxifloxacin was weighed and taken in 10 ml volumetric flask and it was diluted with water and volume was made to mark with water (1000ppm). From this 0.1ml was pipetted out into 10ml volumetric flask and the volume was made up to the mark (10ppm). The solutions were scanned at the range of 200-400nm.

**Method Parameters**

Diluent : Acetonitrile
Wave length : 294 nm
Absorbance : 1.5810
Concentration : 10 ppm.

TRAIL-2:

10 mg of Moxifloxacin was weighed and taken in 10 ml volumetric flask and it was diluted with water and volume was made to mark with water (1000ppm). From this 0.1ml was pipetted out into 10ml volumetric flask and the volume was made up to the mark (10ppm). The solutions were scanned at the range of 200-400nm.



✓ This trial was Optimized method

Method Parameters

Diluent : Water
Wave length : 292 nm
Absorbance : 1.6407
Concentration : 10 ppm

RESULTS AND DISCUSSIONS**FORCED DEGRADATION****1. ACID DEGRADATION:**

From 10ppm of drug solution, 1 ml of 10ppm solution was taken into 10 ml volumetric flask, and then 1ml of 0.1N HCl was added and the solution was kept aside for 24 hours. After 24 hours the solution was neutralized with 1 ml of 0.1N NaOH the absorbance value was measured at 292nm.

Absorbance after 24hrs was =1.3220

%degradation=standard absorbance-observed absorbance/standard absorbance ×100

$$=1.6407-1.3220/1.6407 \times 100$$

$$=19.42\%$$

2. ALKALI DEGRADATION:

From 10ppm of drug solution, 1 ml of 10ppm solution was taken into 10 ml volumetric flask and then 1 ml of 0.1N NaOH was added and the solution was kept aside for 24 hours. After 24 hours neutralized with 1 ml of 0.1 N HCl and measure its absorbance value was measured at 292nm.

Absorbance after 24hrs was =1.2672

$$=1.6407-1.2672/1.6407 \times 100$$

$$=22.4\%$$

3. PHOTOLYTIC DEGRADATION:

10mg of drug was exposed to UV light in UV chamber for 3hrs by placing the drug in watch glass. after 3hrs Sample was diluted to get concentration of 10 µg/ml and absorbance was measured at 292nm

Absorbance after 3hrs=1.3992

$$=1.6407-1.3992/1.6407 \times 100$$

$$=15.1\%$$

4. THERMAL DEGRADATION:

Drug was exposed to dry heat at 40°C in oven for 3hrs by placing the drugs in watch glass. For every one-hour frequency for 3 hours 10mg of drug weighed and diluted to get a final concentration of 10 µg/ml and absorbance was measured at 292nm.

Absorbance after 3hrs was =1.2100

$$=1.6407-1.2100/1.6407 \times 100$$

$$=26.2\%$$

5. PEROXIDE DEGRADATION

From the 10ppm of drug solution, 1 ml of the drug solution was taken into 10 ml volumetric flask and 1 ml of 3% hydrogen peroxide solution was added. then kept aside for 24 hours, after 24 hours the solution was diluted with water to get concentration of 10 µg/ml and absorbance was measured at 292nm.

Absorbance after 24hrs was =1.2475

$$=1.6407-1.2475/1.6407 \times 100$$

$$=23.9\%$$

Table 1: Moxifloxacin Forced degradation studies results in different parameters

1	Acid degradation (0.1N HCl)	19.42%
2	Alkali degradation(0.1N NaOH)	22.4%
3	Peroxide degradation (3% H ₂ O ₂)	23.9%
4	Thermal degradation(hot air oven)	26.2%
5	Photolytic degradation(UV light exposure)	15.1%

VALIDATION PARAMETERS

1. Linearity (Calibration Curve)

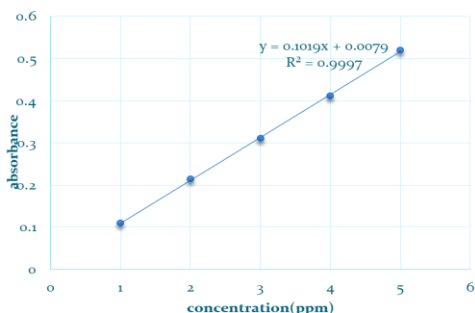
An accurately weighed quantity of moxifloxacin was taken in 10 ml volumetric flask and it was dissolved by using water and volume was made to mark with distilled water to get 1000 µg/ml solution. From standard stock solution of moxifloxacin sub stock (100ppm) was prepared by taking 1ml in 10 ml of water to obtain concentration 100 µg/ml. Then from this 1,2,3,4, and 5ppm were prepared. The solutions were scanned in range of 200 - 400 nm against blank.

The calibration curves were constructed by plotting absorbance versus concentrations. and the regression equations were calculated.

Calibration curve were shown in regression coefficient (R²) is 0.999 for moxifloxacin.

Table 2: Linearity Results

Concentration(ppm)	Absorbance
1	0.1097
2	0.2144
3	0.3116
4	0.4122
5	0.5204



Limits: Correlation coefficient (r^2) ≥ 0.999 .

Result: Correlation coefficient (r^2) was found to be 0.9997 and it was found to be within the limits.

2. Precision:

5ppm standard solution of moxifloxacin pure drug is selected for precision study. From the standard stock solution 0.05ml was pipetted out and transferred into 10ml volumetric flask and the volume was made up to 10ml using distilled water to give 5ppm solution.

This procedure is repeated 6 times and absorbance of all were measured at 292nm using distilled water as blank and its %RSD was calculated by using the formula:

$$\%RSD = (\text{Standard Deviation of The Measurement} / \text{Mean Value of Measurement}) \times 100$$

Table 3: Precision study

S. No.	x	$\bar{x}-x$	$(x-\bar{x})^2$
1.	0.5210	0.5205-0.5210=-0.0005	0.00000025
2.	0.5209	0.5205-0.5209=-0.0004	0.00000016
3.	0.5206	0.5205-0.5206=-0.0001	0.00000001
4.	0.5206	0.5205-0.5206=-0.0001	0.00000001
5.	0.5202	0.5205-0.5202=-0.0003	0.00000008
6.	0.5201	0.5205-0.5201=0.0003	0.00000009
\bar{x}	0.5205		$\Sigma(x-\bar{x})^2=0.00000067$

$$SD = \frac{\sqrt{\Sigma(\bar{x} - x)^2}}{n}$$

$$SD = \frac{\sqrt{0.00000067}}{6}$$

$$SD = 0.0003641$$

$$\%RSD = \frac{SD}{\text{mean}} * 100$$

$$\%RSD = \frac{0.0003641}{0.5205} * 100$$

$$\%RSD = 0.069\%$$

Limit: %RSD was found to be within the limits i.e. less than 2%

Result: %RSD was found to be 0.069%

3. Accuracy :(Recovery Study)

Recovery study was done by standard addition method.

Standard quantity equal into 50%, 100% and 150 % is to be prepared by adding 2ml of 5ppm of standard solution was spiked with 2ml of 5ppm of sample solution to give 100%, and 2ml of 2.5ppm of standard solution was spiked with 2ml of 5ppm sample solution to give 50%, and 2ml of 7.5ppm standard solution was spiked with 2ml of 5ppm sample solution to give 150%.

Absorbance was measured for three times at 292nm. Repeated three times and absorbance were measured at 292nm. The %recovery is calculated by using the formula:

$$\% \text{ Recovery} = \frac{\text{spiked- unspiked}}{\text{unspiked}} \times 100$$

Preparation of standard solutions:

10 mg drug was weighed accurately in 10 ml volumetric flask and it was dissolved by using water and volume was made to mark with distilled water to get 1000 µg/ml solution. From standard stock solution of moxifloxacin sub stock (100ppm) was prepared by diluting 1ml in 10 ml of water to obtain concentration 100 µg/ml.

From this 0.5ml in 10ml gives 5 ppm and 1ml in 10ml gives 10ppm. and 1.5ml in 10 ml gives 15ppm.

Preparation of sample for accuracy:

5tablets were weighed and powdered. Powdered tablet equivalent to 10 mg was weighed and taken into 10ml volumetric flask then volume was made up to the mark with distilled water to get 1000ppm.from that 1 ml of solution was withdrawn, taken in 10ml volumetric flask and volume was adjusted with distilled water up to 10ml to get 100ppm solution. From that take 0.5ml of solution was taken in 10ml volumetric flask and volume adjusted with up to the mark to get 5ppm solution. The absorbance was measured at 292nm

Table 4: Accuracy study

% Recovery Level	% Recovery	% Mean Recovery
50%(5ppm+2.5ppm)	99.3%	99.1%
	99.1%	
	99.1%	
100%(5ppm+5ppm)	99.5%	99.4%
	99.4%	
	99.4%	
150%(5ppm+7.5ppm)	99.6%	99.5%
	99.5%	
	99.5%	

Limits: The % Mean recovery value should be between 98-102%.

Result: %Mean recovery was found to be 99.1%-99.5%

4. Limit of Detection (LOD)

The LOD is the smallest concentration of the analyte that gives a measurable response.

Following equation designated by International Conference on Harmonization (ICH) guidelines.

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

$$\text{LOD} = 3.3 \times 0.00036/0.5205$$

$$\text{LOD} = 0.00228\text{ppm}$$

5. Limit of Quantitation (LOQ)

The LOQ is the smallest concentration of the analyte, which gives response that can be accurately quantified.

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

$$\text{LOQ} = 10 \times 0.00036/0.5205$$

$$\text{LOQ} = 0.00691\text{ppm}$$

6. Robustness:

6 aliquots of 10ppm of standard solution was prepared and it was scanned at wavelength at (\pm)1nm of λ_{max} (i.e. 291nm and 293nm). The absorbance was noted down.

Table 5: Robustness study

S.NO	Concentration (ppm)	Absorbance (nm)	
		291nm	293nm
1	10ppm	1.6481	1.6440
2	10ppm	1.6466	1.6426
3	10ppm	1.6445	1.6411
4	mean	1.6464	1.6425
5	SD	0.00808	0.001450
6	%RSD=SD/mean \times 100	0.109%	0.088%

7. Assay

5 tablets were weighed and their average weight was calculated and powdered.10mg of equivalent weight (18.3mg) of moxifloxacin was taken into 10 ml volumetric flask volume made up to the mark by using distilled water.

from that 0.1 ml of solution was withdrawn and taken in to 10ml volumetric flask. The volume was adjusted with Distilled water up to 10ml to get 10ppm solution and its absorbance was measured at 292 nm.

Weight of 5tablets = 3.673gm

Average weight = 3.673/5

$$=0.7346\text{gm}$$

400mg of drug is present in each tablet (0.7346gm)

10mg of drug is present in=? (x)

$$x = 10 \times 0.7346/400$$

$$= 18.3\text{mg}$$

Absorbance value was=1.61

% Assay = (obtained concentration/original concentration) \times 100

$$\% \text{ Assay} = 1.61/1.64 \times 100$$

$$\% \text{ Assay} = 98.1\%$$

Limits: The assay value should be between 98-102%.

Result: The %assay was found to be 98.1% and it was found to be within the limits.

CONCLUSION

- A Novel simple UV spectrophotometric method was developed for the moxifloxacin, has been validated according to Q2 (R1) ICH guide lines.
- This method can be used for the routine quality control analysis.
- And also used to determine the %assay of the marketed formulation.
- And also used to determine the % degradation of the drug in different parameter

ACKNOWLEDGEMENT

I consider myself extremely fortunate to have got the privilege to do research work under most valuable the

guidance of Dr.K.Bhavya sri, M-Pharm, PhD, Associate Professor Head of the department of pharmaceutical analysis, RBVRR Women's college of Pharmacy, Hyderabad. my whole hearted thanks to her for dedicated involvement, support, unstinted help with valuable scientific inputs and most importantly her constant trust and belief on me

I would like to express my special thanks of gratitude to the principle ,Prof. M. Sumakanth RBVRR Women's college of Pharmacy, who gave me this golden opportunity to do this wonderful project on the topic"Method Development, Validation and Forced Degradation Studies for the determination of moxifloxacin in Bulk and Pharmaceutical dosage forms Using UV Spectroscopy".

REFERENCES

1. S.Pekamwar.T Kalyankar S , B V Tambe, S J Wadher." Validated UV-Visible Spectrophotometric method for simultaneous estimation of Cefixime and Moxifloxacin in Pharmaceutical Dosage Form." *Journal of Applied Pharmaceutical Science*.2015; 5(01): pp.037-041
2. Kailash N. Tarkase.NG Sonkhade, SSAdmane." UV-Development and Validation Spectrophotometric Methods for Determination of Moxifloxacin HCl in Bulk and Pharmaceutical Formulations " *Der Pharma Chemica*, 2012; 4 (3):1180-1185
3. N. Parmar, Rajesh R Parmar, Dr. Vishnu M. Patel, Dr. Dushyant A. Shah, "Development and Validation of UV Spectroscopic Method for Simultaneous Estimation of Moxifloxacin Hydrochloride and Bromfenac Sodium in Combined Dosage Form" *Journal of pharmaceutical science bioscientific research*.2015; 5(6):572-578
4. A.P. Dewani, B.B. Barik, S.K. Kanungo, B.R. Wattyani and A.V. Chandewar "Development and Validation of RP-HPLC Method for the Determination of Moxifloxacin in Presence of Its Degradation Products" *American-Eurasian Journal of Scientific Research* 2011; 6(4):192-200.
5. Sanjay s pekamwar, tukaram m kalyankar," Validated rp-hplc method for simultaneous estimation of cefixime and Moxifloxacin in combined pharmaceutical dosage form" *International Journal of Pharmacy and Pharmaceutical Science*.2014; 16 (11).
6. Syed Naeem Razzaq1, Islam Ullah Khan." Stability indicating HPLC method for the simultaneous determination of moxifloxacin and prednisolone in pharmaceutical formulations" *Chemistry Central Journal* 2012:1-10
7. Muhammadashfaq Syed Naeem Razzaq1" Simultaneous determination of dexamethasone and moxifloxacin in pharmaceutical formulations using stability indicating HPLC method" *Arabian journal of chemistry*. 2017:321-328
8. Dinesh M. Dhumal, Atul A. Shirkhedkar* and Sanjay J. Surana "Quantitative determination of Moxifloxacin hydrochloride in bulk and ophthalmic solution by UV-spectrophotometry and first order derivative using area under curve" *Der Pharmacia Lettre*, 2011; 3(3):453-456.
9. Shreya R. Shah, Prasanna Pradhan, Suddhasattya Dey Quantitative "Estimation of Cefixime And Moxifloxacin in Pharmaceutical Preparation by UV Spectrophotometric Method" *International Journal of Pharm Tech Researc*.2013; 5(1):198-204.
10. Munib-ur-Rehman, Rabia Ismail Yousuf, and Muhammad Harris Shoaib "A Stability-Indicating High-Performance Liquid Chromatographic Assay for the Simultaneous Determination of Pyridoxine, Ethionamide, and Moxifloxacin in Fixed Dose Combination Tablets". *Researc Article Volume* .2014: 8.
11. M. Vishnu Priya, P. Madhavan and Pramod Kumar "A validated RP-HPLC method for the analysis of Moxifloxacin Hydrochloride in pharmaceutical dosage forms and stability studies" *Journal of Chemical and Pharmaceutical Research*, 2015; 7(5):836-841
12. Raghavendra narayan singh, shisir sahuo, umashankar mishra, bamakanta garnaik, sudhir kumar sahuo and deepak hati "Stability indicating rp-hplc method development and validation of moxifloxacin " *international journal of research in pharmacy and chemistry* 2014; 4(1).

