# Simultaneous Estimation of Lamivudine and Stavudine by using RP-HPLC and Method Development as per ICH Guidelines

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# **ABSTRACT:**

A simple, rapid and accurate reverse phase-high performance liquid chromatographic method for the simultaneous determination of lamivudine and stavudine in tablet dosage form is developed and validated. The chromatographic analysis was performed on a C 18column grace smart RP18 ( $250 \times 4.6$  mm, 5 µm) in isocratic mode, the mobile phase consisted of methanol, acetonitrile and 0.05 M phosphate buffer (adjusted topH 4.5 with ortho-phosphoric acid) at a ratio of 60:20:20 v/v/v, and a flow rate of 1.0 mL/min and ASPD detector is used. The eluents were monitored at 254 nm. The retention time of lamivudine and stavudine were found to be 2.50 min and 4.25 min, respectively. The linear ranges were found to be 10-602 2 µg/mL (r =0.9992) for lamivudine and 10-60 µg/mL (r =0.9999) for stavudine . The proposed method is also found to be accurate, precise androbust. The method could be applied to routine quality control of pharmaceutical formulations containing lamivudine and stavudine.

Keywords: Lamivudine, Stavudine, RP-HPLC.

# **1.INTRODUCTION**

Multi-drug antiretroviral therapy has resulted in a significant improvement of the health condition of acquired immunodeficiency syndrome (AIDS). The multi-drug combinations of nucleoside reverse transcriptase inhibitors and non-nucleoside reverse transcriptase inhibitors are effective in the therapy of human immunodeficiency virus (HIV) infection. It is used as a part of highly active anti retroviral therapy (HAART), for the treatment of HIV-1<sup>1, 2</sup>. Lamivudine (3TC) is 4-amino-1-{(2R, 5S)-2-( hydroxyl methyl )-1,3-oxathiolan - 5 - yl - 1, 2 - dihydropyrimidin-2-one, is a nucleoside reverse transcriptase inhibitor that is active against HIV-1, HIV-2 and Hepatitis B virus (HBV)<sup>4</sup>. Stavudine (2'-3'-didehydro-2'-3'-dideoxythymidine, d4T, brand name Zerit) is a nucleoside analog reverse transcriptase inhibitor (NARTI) active against HIV. The literature survey reveals that several analytical methods have been reported for the quantification of these drugs individually or in combination with other drugs in pharmaceutical dosage forms or in human plasma by high performance liquid chromatography(5,11) spectrophotometry, titrimetry, liquid chromatography/tandem mass spectrometry and high performance thin layer chromatography1 (8). From literature , no liquid chromatographic method has been reported for the quantification of Stavudine and lamivudine in pharmaceutical formulations is developed and validated.

# 2.INSTRUMENTATION

The HPLC system consisted of LC-10AT VP Shimadzu liquid chromatograph (Japan) equipped with diode array detector (ASPD), connected to Class-VP 5.032 Software. Chromatographic separations were performed on C 18column grace smart RP18 ( $250 \times 4.6 \text{ mm}$ , 5 µm). Samples were 18 injected by means of a Rheodyne injector fitted with a 20 µL loop. A Bandelin sonerex sonicator was used for enhancing dissolution of the compounds. A Digisum DI 707 digital pH meter was used for pH adjustments. In addition, electronic balance, micropipette and micro pore filtration assembly were used in this study.

# 2.1 Preparation of standard stock solution

The standard stock solutions were prepared by transferring 100 mg of 3TC and 100 mg stavudine working standards into 100 mL volumetric flasks. To that about 50 mL methanol was added, and the solution was sonicated to dissolve and the volume made up to mark with methanol. The standard solutions were filtered through a 0.45  $\mu$ m membrane filter. Aliquots of these solutions were transferred using A-grade bulb pipettes into 100 mL volumetric flasks and volume make up to the mark with mobile phase to give the final concentration 100  $\mu$ g/mL of each analyte.

#### 2.2 Preparation of internal standard solution

Accurately weighed 50 mg of internal standard (IS) was transferred into 50 mL volumetric flask containing 30 mL of methanol (HPLC grade) and sonicated for about 20 min. The volume was made up to the mark with methanol. The stock solution was further diluted with the mobile phase to concentration 10  $\mu$ g/mL. To development the method, a variety of mobile phases were

investigated for the development of a suitable assay method for simultaneous analysis of Stavudine and 3TC in tablets. These included methanol-water (80:20 v/v), acetonitrile-water (80:20 v/v), methanol-0.05M phosphate buffer (80:20 v/v, pH 3.5-6.5 adjusted with ortho-phosphoric acid), methanolacetonitrile-0.05M phosphate buffer (80:10:10 v/v/v, pH 3.5- 6.5 adjusted with ortho-phosphoric acid) and methanolacetonitrile- 0.05M phosphate buffer (60:20:20 v/v/v, pH 3.5- 6.5 adjusted with ortho-phosphoric acid). The suitability of the mobile phase was decided on the basis of the good resolution, suitability for stability studies, time required for the analysis, ease of preparation and use of a readily available cost-effective solvents.

#### **3.METHOD VALIDATION**

To determine linearity, aliquots of primary standard 3TC and Stavudine stock solutions were taken into 100 mL volumetric flask and diluted up to the mark with the mobile phase such that the final concentration of 3TC and Stavudine were in the range of 10- 60 µg/mL and 10-60 µg/mL respectively. Suitable aliquot of internal standard solution was added to get a final concentration 10  $\mu$ g/mL in all solutions. The solutions (20  $\mu$ L) were injected three times into the column according to the optimized chromatographic conditions, and the peak areas and retention times were recorded. The calibration curve was constructed by plotting the analyte to internal standard peak area ratio (Response factor) against the concentration (µg/mL). The accuracy was carried out by recovery studies using standard addition method; known amounts of standard drugs were added to pre-analyzed sample of 3TC and Stavudine in according to 0, 50, 100 and 150% of labeled claim, and then subjected to the proposed HPLC method(7). The experiment was performed in triplicate. The percentage recovery, RSD (%) and standard error mean (SEM) were calculated for each concentration level. Precision was determined as repeatability, intermediate precision and reproducibility in accordance with ICH recommendations19. Repeatability was determined as intraday variation and intermediate precision was determined by measurement of inter day variation(3). The reproducibility was checked by measuring the precision of the method in same laboratory on a same instrumentation with analysis being performed by another person. For both intra-day and inter-day variation, standard solutions of 3TC and Stavudine at three different concentrations (30, 40 and 50 µg/mL) were determined in triplicate. Limit of detection (LOD) and Limit of quantification (LOQ) were calculated based on the ICH guidelines. Robustness was done by deliberately changing the chromatographic conditions like  $\pm$  0.2 in pH of the buffer and  $\pm$ 0.1mL in flow rate. To ensure the validity of the analytical procedure, a system suitability test was established. The following parameters like asymmetry factor, theoretical plate number(N), resolution (Rs) and retention time (t) were analyzed by R using 20  $\mu$ L of the working standard solution containing 3TC (50 µg/mL) and EFV (50 µg/mL) injecting five times into HPLC system. For analysis of marketed samples, twenty tablets of lamivir S each containing 3TC (300 mg) and stavudine (600mg) were weighed and finely powdered. A quantity of the powder equivalent to one tablet content was accurately weighed, transferred into 100 mL volumetric flask containing 70 mL of methanol, sonicated for about 15 min and the volume make up to the mark with methanol. This solution was filtered through a 0.45 µm membrane filter paper and filtrate was again diluted to get a final concentration of 50 µg/mL of each drug with mobile phase. Suitable aliquot of internal standard solution was added to get a final concentration of 10 µg/mL in all solutions. The standard and sample solutions (20 µL) were separately injected into HPLC system. The possibility of interference from the excipients in the analysis was studied(9,11).

# 4. RESULTS AND DISCUSSION

In order to achieve simultaneous elution of the two components, initial trails were performed with the objective to select adequate and optimum chromatographic conditions. Parameters, such as ideal mobile phase and their proportions, detection wavelength, optimum pH, different columns and concentration of the standard solutions were carefully studied. Several solvents were tested by using different proportions such as methanol-water (80:20 v/v), acetonitrile water (80:20 v/v), methanol-0.05M phosphate buffer (80:20 v/v, pH 3.5-6.5 adjusted

with ortho-phosphoric acid) methanol-acetonitrile-0.05M phosphate buffer (80:10:10 v/v/v, pH 3.5-6.5 adjusted with ortho-phosphoric acid) and methanol-acetonitrile-0.05M phosphate buffer (60:20:20 v/v/v, pH 3.5-6.5 adjusted with ortho-phosphoric acid). Finally, methanol, acetonitrile and 0.05 M phosphate buffer (adjusted to pH 4.5 with ortho-phosphoric acid) at a ratio of 60:20:20 v/v/v was selected as the optimum mobile phase and a flow rate of 1.0 mL/min. Under these conditions, the analyte peaks were well resolved and were free from tailing. The tailing factor was <1.5 for both the analytes. The retention times of 3TC and Stavudine were found to be 2.50 min and 4.25 min, respectively. The resolution (Rs) between IS and 3TC was found to be 4.12, and 3TC and Stavudine was found to be 6.34, indicating good separation of both analytes from each other. The theoretical plate number for 3TC and Stavudine were found to be 6480 and 7025, respectively, thus indicating good column efficiency. A typical chromatogram was recorded at 254 nm, shown in Figure 1. The calibration plot was constructed by plotting response factor (RF) versus concentration (µg/mL) of 3TC and Stavudine which were found to be linear in the range of 10-60  $\mu$ g/mL (r<sup>2</sup>=0.9992) and 10-60  $\mu$ g/mL (r<sup>2</sup>=0.999), respectively (Table 1). Limit of detection (LOD) values of 3TC and Stavudine were experimentally verified to be 0.16 µg/mL and 0.14 µg/mL, respectively. Limit of quantitation (LOO) values of 3TC and Stavudine were found to be 0.49 µg/mL and 0.41 µg/mL, respectively, which indicated that the method can be used for analysis of 3TC and Stavudine over a very wide range of concentrations. The percentage recoveries of 3TC and Stavudine were found to be in the range of 99.37-100.57% and 99.54-100.35%, respectively. The results were shown in Table 2, which indicates that the method is accurate. The precision of an analytical method is the degree of agreement among the individual test results when the method is applied repeatedly to multiple sampling of homologous sample. Results from determination of repeatability and intermediate precision, expressed as RSD (%). The low values of %RSD indicated that the method is precise. The reproducibility results were shown that, there were no significant differences between %RSD values for intra-day and inter-day precision, which indicated that the method, is reproducible. Robustness was done by small deliberate changes in the chromatographic conditions. There were no significant changes in the peak areas and retention times of 3TC and Stavudine when the pH and flow rate of the mobile phase were changed. The results were indicating that the proposed method is robust. The proposed method was applied to the simultaneous estimation of 3TC and Stavudine in tablets. The assay results show that the proposed method was selective for the simultaneous determination of 3TC and Stavudine without interference from the excipients used in the tablet dosage form. The values were shown in Table 3. The assay results and low %RSD values indicated that the developed method can be used for routine analysis of lamivudine and Stavudine in pharmaceutical dosage forms.

#### Fig.1: A typical chromatogram of IS, 3TC and Stavudine



Analyte	Conc	Mean RF±SD	RSD%	SEM	Linear regression
	µg/mL	(n=3)			
	10	2.0052±0.0066	0.331	0.0038	
3TC	20	2.5081±0.0327	0.508	0.0074	
	30	2.8971±0.0206	0.709	0.0019	Y=0.0447x+0577
	40	3.3836±0.0195	0.577	0.0113	R <sup>2</sup> =0.9992
	50	3.1981±0.0132	0.348	0.0076	
	60	4.2659±0.001	0.305	0.0075	
Stavudine	10	0.8763±0.001	0.113	0.0006	
	20	1.1242±0.0016	0.146	0.0009	$ = 0.0253X + 0.614 \\ R^2 = 0.9991 $
	30	1.3485±0.0101	0.147	0.0058	
	40	1.6235±0.0214	1.321	0.0024	
	50	1.9002±0.0113	0.577	0.0063	
	60	2.1279±0.0116	0.544	0.0067	

TABLE 1: Linearity data of 3TC and Stavudine

SEM=Standard error mean, RSD=Relative standard deviation, RF=Response factor

Analyte	Amount(%) of	Theoretical	Conc found	Recovery	RSD%	Bias%	SEM
	drug added to	content	$(\mu g/mL)\pm SD$				
	analyte		n=3				
	0	10	9.9366±0.084	99.37	0.846	-0.634	0.0485
3TC	50	15	14.9477±0.0825	99.65	0.552	-0.348	0.0476
	100	20	20.1136±0.1313	100.57	0.653	0.5682	0.0758
	150	25	25.1216±0.2632	100.49	1.048	0.4864	0.0152
	0	10	10.0353±0.0771	100.35	0.708	0.3527	0.0445
Stavudine	50	15	14.9601±0.0396	99.73	0.198	-0.266	0.0171
	100	20	19.9069±0.0915	99.54	0.461	-0.465	0.0529
	150	25	24.9816±0.1427	99.66	0.573	-0.341	0.0824

Table 3: Estimation of amount present in tablet dosage form

Brand name	Tablet	Label	% label claim	RSD%	SEM	%Drug
	formulation	claim/tablet	estimated			estimated
		mg	(mean±sd)			
			N=3			
Lamivir S	Lamivudine	300	298.78±1.5211	0.509	0.878	99.54
	Stavudine	600	601.24±0.7102	0.218	0.411	100.21

# **5. CONCLUSION**

The developed RP-HPLC method was accurate, precise, reproducible and robust. The developed method has been found to be better, because of its wide range of linearity, use of a readily available mobile phase, lack of extraction procedure and low retention times. All these factors make the proposed method suitable for the quantification of 3TC and Stavudine in bulk drugs and in table dosage form. The method can be successfully used for the routine analysis of lamivudine and Stavudine in pharmaceutical dosage forms without interference

### ACKNOWLEDGEMENT

One of the Friend thanks to Matrix Pharma Limited, Hyderabad, India for providing gift samples of stavudine and lamivudine.

#### REFERENCES

- [1] World Health Organization says failure to deliver AIDS medicines is a global health emergency. WHO Press Release September 2003.
- [2] Rouzes A, Berthoin K, Xuereb F, et al Simultaneous analysis of antiretroviral drugs. J Chromatogram B 2004; 813: 209-16.
- International Pharmacopoeia Monograph on efavirenz, World Health Organization, Geneva-27 Switzerland, The World Health Organization 2005; Working document QAS/05.145, 1-7.
- [4] Sean C Sweetman: Martindale The Complete Drug Reference. 34th Edition. Grayslake, USA: ThePharmaceutical Press; 648-9.
- [5] Jayakar B, Kumar M, Saravanan C, Kumudhavali MV. HPLC method for simultaneous determination of lamivudine and zidovudine. J Chem Pharm Res 2010; 2(1): 478-81.
- [6] Schuman M, Schneider S, Omes C et al HPLC analysis of antiretroviral drugs purchased in Rwanda. Bull Soc Sci Med 2005; 3: 317-25.
- [7] Uslu B, Ozkan SA. Determination of lamivudine and zidovudine in binary mixture using first derivative spectrophotometric, first derivative of the ratio-spectra and high performance liquid chromatography-UV methods. Anal Chimica Acta 2002; 466(1): 175-85.
- [8] Kano EK, Serra CHR, Emiko E, Koono M, Andrade SS, Porta V. Determination of lamivudine in human plasma by HPLC and its use in bioequivalence studies. Int J Pharmaceutics 2005; 297(1-2): 73-9.
- [9] Gholamreza B, Shahla M, Amir K, Bahareh M. High performance liquid chromatographic determination of lamivudine in human serum using liquid-liquid extraction; application to pharmacokinetic studies. J Chromatogr B 2005; 823(2): 213-7.
- [10] Ramachandram G, Kumar AKH, Swaminathan S, Venkatesan P, Kumaraswami V, Greenblatt DJ. Simple and rapid liquid chromatography method for determination of efavirenz in plasma. J Chromatogr B 2006; 835(1-2): 131-5.
- [11] Rao BU, Nikalje AP. Stability-indicating HPLC method for the determination of efavirenz in bulkdrug and in pharmaceutical dosage form. Afr J Pharm Pharmacol 2009; 3(12): 643.