

An Elsevier Indexed Journal

ISSN-2230-7346



Journal of Global Trends in Pharmaceutical Sciences

FORMULATION AND EVALUATION OF MUCOADHESIVE DRUG DELIVERY OF ANTI-DIABETIC DRUG

Nagaveni P*1, Chandra Sekhar KB2, Jayachandra Reddy P3

¹S.V.U. College of Pharmaceutical Sciences, S.V. University, Tirupati, 517502,
Chittoor District- Andhra Pradesh, India.

²Director, JNTUA-Oil Technological Pharmaceutical Research Institute,
Anantapuramu-515001, Andhra Pradesh, India.

³Professor & Principal, Krishna Teja Pharmacy College, Tirupati- 517506, Andhra Pradesh, India.

*Corresponding author E-mail: nagavenipatp@gmail.com

ARTICLE INFO

Key Words

Hydrophilic polymers, Correlation coefficient, Diffusion coefficient, Swelling index.



The present investigation was carried out to develop a novel mucoadhesive drug delivery system for the delivery of Nateglinide in a non-invasive dosage form with enhanced bioavailability that bypasses the hepatic first pass metabolism by delivering the drug unidirectionally towards buccal mucosa. Drug-polymer interaction studies through substantial observation, FTIR analysis revealed that there was no considerable interaction among drug and polymers and therefore the selected raw materials greatly suitable for the formulation of buccal films of Nateglinide. The prepared buccal films were evaluated for their flexibility, thickness, moisture content, and tensile strength. The *in-vitro* permeation study was carried out using a trans-diffusion cell. It was concluded that selective mucoadhesive polymers can be successfully used as a carrier for enhancing permeation and bioavailability of Nateglinide.

ABSTRACT

INTRODUCTION:

Nateglinide [N-(trans-4-isopropyl cyclo hexyl carbonyl)-D-phenyl alanine] is a novel, highly physiologic, glucose regulator recently approved for the treatment of type-2 diabetes mellitus. Nateglinide has a rapid onset and short duration of insulinotropic action that results in reduction of glucose level¹. In recent years several advancements has been made in research and development of oral drug delivery system. Concept of novel drug delivery system arose certain aspect overcome physicochemical properties of drug molecule

and the related formulations. Various gastro retentive approaches that have recently become leading methodologies in the field site-specific orally of administered controlled release drug delivery. GRDDS has become leading methodology in site administered specific orally controlled release drug delivery system. Various drugs like which are unstable in alkaline pH, soluble in acidic pH, having narrow absorption window and site of action specific to stomach can be developed by using this technique²⁻⁴.

MATERIALS AND METHODS

The following materials were used: Nateglinide (Yarrow Chemical Pvt.Ltd., Mumbai), Chitosan, Carbopol, Polyvinyl Pyrolidine, HPMC and Propylene Glycol (S.D Fine chemicals, India). All the solvents and chemicals were used analytical grade satisfying Pharmacopoeial standards.

The solvent evaporation method was followed in this study for the preparation of buccal films of Nateglinide. This method was most frequently employed for fabrication of buccal films as well as transdermal patches in the research field of pharmacy by the scientists.

PREFORMULATIONS

Preformulation⁵⁻⁶ is the process which investigate the physicochemical properties of drug or excipients alone or combined form. In this research, FTIR study (KBR pellet technique) was performed for the drug and optimized formulation and reported in the figure no.1&2.

FORMULATION OF BUCCAL FILMS

Formulation of buccal films comprises two steps which includes preparation⁷ of drug free films and preparation of drug loading buccal films.

Drug free buccal films

The weighed quantities of polymers dissolved in ethanol (70%). were Triethanolamine was used to neutralize CP polymeric solution. Propylene Glycol (PG) in the concentration of 30% w/w was used as plasticizer and permeation enhancer, subjected for levigation along polymeric solutions. The solution was stirred seldom to get paste like consistency. To remove the air bubbles, the solution was subjected to sonication in a bath sonicator. Then this was placed on a surface of glass and with the use of ring having shape of 'O' has 4 cm in diameter was enclosed with funnel for reducing the disappearance of solvent and kept to complete dryness at room temperature throughout night. After drying films were collected and protected with aluminium foil⁸⁻¹⁰. The films were later placed in desiccators for further use.

Drug containing buccal films

The weighed quantities of polymers were dissolved in ethanol (70%).

Triethanolamine was used to neutralize CP polymeric solution. After levigation with 30% w/w PG, accurately weighed respective quantities of drug samples were addd in polymeric solutions. The solution was stirred seldom to get paste like consistency. Then the remaining procedure is same like fabrication of drug free films. Patches were intended to release the drug from one side only, for that reason an impermeable backing membrane was positioned on the other side of the patch. Finally, in vacuum desiccators, the patches were dried for 4 h at room temperature. After clear examination, the dried patches were taken, examined for any imperfections or air bubbles and specific diameter patches produced using a specially fabricated circular stainless steel cutter. The diameter of the patches was measured using vernier callipers. By using aluminum foil samples were packed and stored in a glass container at room temperature¹¹⁻¹². The compositions of of films are given in table

Physicochemical evaluation

The buccal films of Nateglinide was evaluated for various physicochemical parameters¹³⁻¹⁵.

SEM studies

SEM frequently used to establish size distribution of particles, topography of surface, texture and to look at the morphology of cracked or sectioned surface. Three dimensional surfaces usually generating from SEM for relief images occurred from secondary electrons. The buccal film surface possessing the proportions of drug and polymer observed under microscopic examination to obtain the morphology information and porosity of the film and reported in figure no 2 & 3.

Thickness

Each film thickness was measured with digital vernier calipers (Absolute digimate) in six different locations of the film and the standard thickness was calculated and reported in table 2.

Weight of films

By using digital balance for one formulation three different films separately

weighed and the mean of three films calculated and reported in table 2.

Folding endurance

Folding endurance test performed by taking the individual film and folded constantly up to 300 times manually or unless it broke at the same place. How many times the film could be folded at the same position without breaking given the folding endurance value and the average of three films were noted in table 2.

Surface pH

Surface pH of the buccal films (2 cm diameter), with no backing membrane was measured by a modified method. Buccal films were placed for 2 hr on the surface of agar plate, prepared by dissolving 2% (m/v) agar in warmed IPB (pH 6.75) under stirring and then pouring the solution into a petridish until it gelled at room temperature. The surface pH was determined with help of a combined glass electrode in contact with the surface of the film, kept it to equilibrate for 1 minute. The procedure was repeated thrice and the average was noted in table 2.

Percentage Moisture Absorption (PMA)

PMA test of the buccal films carried out for testing the integrity of films physically at high moisture environment. After cutout the mass of 1 cm in diameter 3 films was weighed accurately and then placed in desiccator contain AlCl₃ saturated solution, keeping the RH at 79.5%. The films were taken following 3 days, weighed and PMA was estimated. The average of 3 films was calculated and reported in table 2.

Percentage Moisture Absorption $= \frac{\text{Final weight - Initial weight}}{\text{Initial weight}} X100$

Percentage Moisture Loss (PML)

PML test performed to ensure the stability of films at dry condition. After cutout the mass of 1 cm in diameter 3 films was weighed accurately and then placed in desiccators contain anhydrous CaCl₂ in fusion state. The films were taken following 3 days, weighed and PML was

estimated. The average of 3 films was determined and reported in table 2.

 $\begin{aligned} & \text{Percentage Moisture Loss} \\ &= \frac{\text{Initial weight} - \text{Final weight}}{\text{Initial weight}} \text{ X100} \end{aligned}$

Swelling Percentage (%S)

50 ml of pH 6.8 phosphate buffer added in a thoroughly cleaned petridish in to which buccal films were placed. Increments in the mass of the film were taken with the intervals of 15 min up to 1 hr and the weight was calculated and reported in table 2.

Drug content

Three equal parts of each buccal film formulation was placed in a 100 ml phosphate buffer (pH 6.8). These samples were subjected for stirring up to 24 hr fallowed by filtration. The filtrate was diluted suitably and the absorbance was determined at respective wavelengths by using UV Spectrophotometer. The average of three films was considered as drug content present in the film and reported in table 2.

Buccoadhesive strength

Modified balance method was chosen to measure the buccoadhesive strength of the films. Fresh buccal mucosa of the sheep was collected and used within 2 hr which was used for the determination of buccoadhesive strenth of the prepared formulation. Phosphate buffer pH 6.8 was added into beaker level to the surface of small beaker with buccal mucosa. To the lower side of the upper clamp buccal film was attached by using an adhesive. Then the stand was slowly lifted until the film surface makes contact with mucosa. Balance set equal on both the sides before starting to test by placing a mass on the right side of the balance. Then 5 g weight of was removed from the right hand side pan, which lowered the pan along with the film on the surface of the mucosa. This position balance was maintained for 5 min for making better contact. Then weights were slowly increased to the pan till the film separated from the surface of mucosa.

This force of detachment indicated the strength of buccoadhesive nature of the buccal film in grams are reported in figure 3. Adhesion Force $(N) = (Bioadhesive strength (g) \times 9.8) / 1000$

Bond strength (N m-2) = Adhesion force / surface area.

Ex-vivo permeation

Franz-diffusion cell was used for the drug permeation study of films with fresh buccal mucosa of sheep at 37 ± 1 °C. The tissue preparation was similar to that explained before. Freshly obtained buccal mucosa was placed for connecting the donor and receptor compartments, thus the mucosa of smooth surface faced the donor compartment. After the animal mucosa was attached on one side of an open-ended tube, and it was served as a donor compartment. The film was located in such a way that it must be stuck on surface of mucous membrane. The diffusion cell was maintained at $37\pm2^{\circ}$ C and the receptor compartment was stimulated at a rate of 100 rpm. At pre-determined time intervals 1ml sample was taken using a butterfly canula and syringe. Sample filtered through 0.45 µm filter and diluted suitably for analyzing drug content using UV spectrophotometer at 216 nm.

In-vitro drug release

The dissolution study was carried out using USP Type-2 rotating paddle dissolution test apparatus. Therefore, to provide sink condition, 100 ml of simulated saliva solution (pH 6.8) was taken as the dissolution medium in a 250 ml glass beaker maintained at 37 ± 0.5 °C which was stirred at 50 rpm. 2 cm in diameter film was fixed by using acyanoacrylate adhesive on the glass disk. At the bottom of the dissolution vessel the disk was kept so that the film remains on the upper side of the disk. At predetermined time intervals 5 ml samples withdrawn and replaced with same volume of dissolution medium. These samples have been filtered using 0.45 µm filter and diluted suitably with simulated saliva solution (pH 6.8) and assayed

spectrophotometrically 216 nm respectively. The drug release mechanism from the buccal films was analyzed by ruling the best fit of the release data to Higuchi and Korsmeyer - Peppa's plots.' For each model the release rate constants 'k' and 'n" were estimated by linear regression analysis using Microsoft Excel 2003 software.

RESULTS AND DISCUSSION

The prepared buccal films were smooth, uniform in thickness, mass, drug content and showed no visible cracks or folds. The formulated buccal films were evaluated for various physical chemical parameters and the obtained results were given in the table 2. In the IR spectral analysis of Nateglinide exhibits characteristic peaks at 1712 (C=O), 3061 (CH Stetching) 3299 (NH), 1448, 1647 (Aromatic CH Str) and physical mixture of Nateglinide and their admixture with polymers the characteristic absorption peaks at 3215 (CH-S), 1699 & 1655 (C=O), 1574 (CH Stretching Aromatic) observed. The characteristic absorption peaks of Nateglinide remained unchanged in drug-polymer admixture which indicates there is no prominent chemical reaction between Nateglinide and polymer mixture. Thickness of the films varies from 0.32 mm to 0.48 mm. The weight of the films found to vary from 165.17 mg to 178.23 mg. It can be concluded that as the concentrations of chitosan, carbopol and HPMC increases, both film weight and thickness also increases. The results were tabulated in the table 2. In all the formulations folding endurance values were indicated more than 300 times. During administration films can be maintain the consistency in buccal mucosa this revealed by folding endurance test. All the developed formulations were flexible and displayed good and satisfactory folding endurance range from 281to 320. Carbopol is generally known to increase the softness and flexibility which could be highly cross related to its conformation and configuration.

Table 1: Formulation of Nateglinide buccal films

		Polymers (Solvents (ml)			
F. code	НРМС	Chitosan	СР	PVP	Ethanol (70% v/v)	Distilled water	PG (30% w/w)	
NF1	2.5	-	-	0.5	5.5	4.0	0.6	
NF2	-	2.5	-	0.5	5.5	4.0	0.6	
NF3	-	-	2.5	0.5	5.5	4.0	0.6	
NF4	1.0	0.5	0.5	0.5	5.5	4.0	0.6	
NF5	0.5	1.0	0.5	0.5	5.5	4.0	0.6	
NF6	0.5	0.5	1.0	0.5	5.5	4.0	0.6	
NF7	1.5	0.25	0.25	0.5	5.5	4.0	0.6	
NF8	0.25	1.5	0.25	0.5	5.5	4.0	0.6	
NF9	0.25	0.25	1.5	0.5	5.5	4.0	0.6	
NF10	2	0.5	-	0.5	5.5	4.0	0.6	
NF11	-	2	0.5	0.5	5.5	4.0	0.6	
NF12	0.5	2	-	0.5	5.5	4.0	0.6	
NF13	-	0.5	2	0.5	5.5	4.0	0.6	
NF14	2	-	0.5	0.5	5.5	4.0	0.6	
NF15	0.5	-	2	0.5	5.5	4.0	0.6	

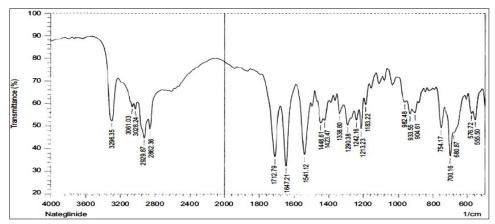


Figure 1. FTIR spectra of Nateglinide

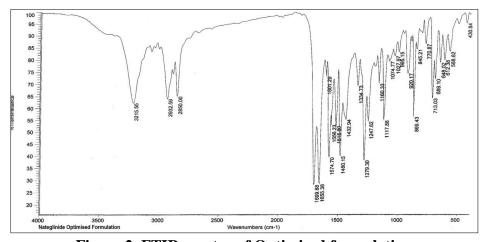
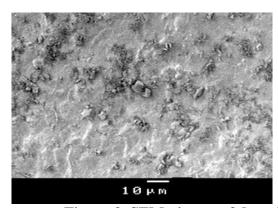


Figure 2. FTIR spectra of Optimized formulation



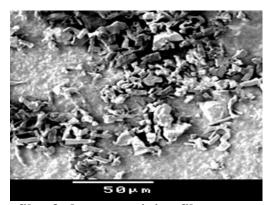


Figure 3. SEM picture of drug free film & drug containing film

Table 2: Physico-chemical evaluation of buccal films of Nateglinide

F. Code	Thicknes s (mm)	Weight (mg)	Fold. end	Surfac e pH	PMA	PML	% S	Q	Drug content (mg)		
NF1	0.48 ±0.02	178.23 ±0.91	320±5.0	6.73± 0.005	5.21± 0.07	5.97±0.12	120.9 ±0.9	8.39± 0.35	49.50± 0.22		
NF2	0.40 ±0.01	171.18 ±0.91	300±3.0	6.79± 0.005	7.32± 0.04	5.14±0.72	99.6 ±0.69	5.46± 0.34	48.70± 0.32		
NF3	0.47 ±0.01	176.53 ±0.80	315±1.0	6.71± 0.015	9.24± 0.09	4.74±0.10	118.4± 0.72	5.95± 0.34	49.20± 0.45		
NF4	0.39 ±0.01	168.31 ±0.58	298±6.0	6.64± 0.050	10.32±0.11	4.14±0.20	124.2 ±0.99	4.38± 0.35	49.66± 0.35		
NF5	0.35 ±0.02	166.37 ±0.80	281±4.0	6.60± 0.015	12.13±0.09	4.08±0.03	122.4± 0.6	3.76± 0.08	48.56± 0.25		
NF6	0.41 ±0.01	172.12 ±1.00	318±5.0	6.69± 0.03	14.21±0.06	3.88±0.02	128.0± 0.85	5.18± 0.32	49.63± 0.25		
NF7	0.40 ±0.21	170.53 ±0.80	310±1.0	6.70± 0.03	7.86± 0.27	6.44±0.10	120.4± 0.72	8.67 ±0.35	49.50± 0.03		
NF8	0.38 ±0.05	169.31 ±0.48	296±6.0	6.82± 0.015	6.18± 0.13	7.13±0.08	114.2± 0.99	9.27± 0.52	48.80± 0.20		
NF9	0.36 ±0.02	166.37 ±0.20	320±4.0	6.81± 0.005	5.34± 0.12	9.12±0.07	130.4± 0.6	9.37± 0.43	49.94± 0.12		
NF10	0.39 ±0.01	168.12 ±1.00	320±5.0	6.77± 0.001	4.12± 0.13	10.06±0.06	125± 0.85	9.98± 0.59	48.45± 0.31		
NF11	0.34 ±0.01	165.17 ±1.10	286±2.0	6.67± 0.003	3.85± 0.22	9.05±0.04	128.6± 0.4	9.46± 0.59	48.43± 0.29		
NF12	0.39 ±0.01	169.27 ±1.10	294±1.0	6.74± 0.008	3.93± 0.33	8.04±0.08	123.2± 0.63	9.56± 0.59	48.35± 0.28		
NF13	0.38 ±0.01	172.37 ±0.60	304±3.0	6.67± 0.005	11.26±0.24	5.72± 0.01	77.4± 0.7	5.91± 0.38	18.90± 0.25		
NF14	0.36 ±0.01	171.07 ±0.90	305±2.0	6.63± 0.005	9.89± 0.22	6.13± 0.02	72.51± 0.6	6.32± 0.20	18.90± 0.15		
NF15	0.32 ±0.01	168.43 ±0.50	302±2.0	6.61± 0.017	7.02± 0.06	7.45± 0.52	69.56± 0.65	6.94± 0.31	19.30± 0.21		
Mean± SD (n=3)											

*NF- Nateglinide Films

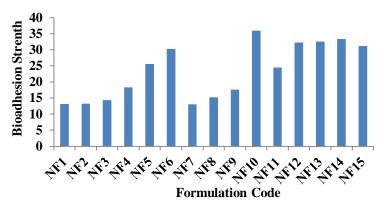


Figure 4. Buccoadhesive strength of Nateglinide buccal films

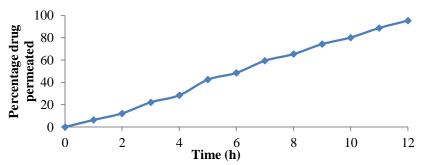


Figure 5. Drug permeation profile of formulation NF10

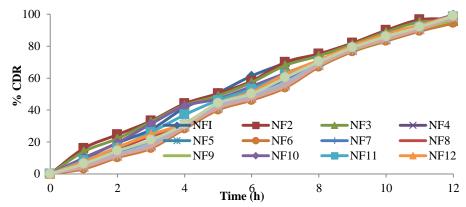


Figure 6. In-vitro drug release profile of NF1-NF15

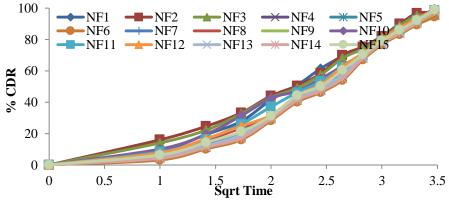


Figure 7. Higuchi's plot of NF1-NF15

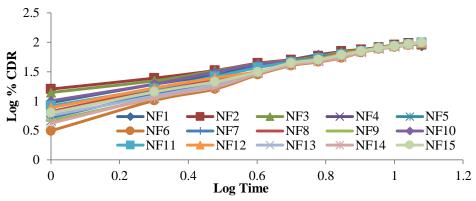


Figure 8. Peppa's plot of NF1-NF15

The formulation NF10 has shown maximum folding endurance. determination of surface pH for films the results showed that all the formulations in the range of pH 6 to 6.82. Therefore formulations did not cause irritation while administration and hence they attain patient compliance. SEM photographs showed that the buccal films were uniform in pores on the surface which has smooth surface and completely covered with the polymer and drug also distributed throughout the films. Moisture Absorption & Moisture Loss tests were conducted for the films for ensuring the physical stability while they exposed to greater humid environment and also to check reliability & integrity of the film during dry environment. In case of Nateglinide buccal films, the moisture absorbed in terms of percentage in the formulation NF6 has shown the highest value of moisture absorption which is 14.21±0.06%. formulation NF11exhibited significantly high value of loss of moisture which is 10.06±0.06 this might be occurred due to presence of PVP and absence of carbopol. The films started to swell within 10 min due to presence of swellable polymers like HPMC and carbopol and chitosan, and maximum degree of swelling was observed after 60-120 min. The formulation NF10 shows higher percentage of swelling (130.4 ± 0.6) than the rest. At transmission of water vapor attained in the formulation NF11 has shown 9.98±0.59 among all the films. The formulation NF6 was attained least transmission of water vapor of 3.76±0.08 among entire films. All the films are showing significant drug content shown 48.35±0.28 to 49.94±0.12 for both the selected candidates. Recovery was possible in the range of 18.9 to 19.95 mg for Nateglinide formulations. The actual drug content was high by increase in the concentration of polymer due to formation of viscous films, which leads to better retention of the drug in the films. No correlation was found between bioadhesion force and the residence time of the polymers. Maximum bioadhesive force was seen in the carbopol containing films may be due to its anionic nature. The bioadhesive strength shown by Nateglinide buccal films was agreeable for keeping them in buccal cavity. The mixture of HPMC and carbopol exhibited satisfactory adhesion were shown in the figure 4. The maximum buccoadhesive strength is obtained in NF10 formulations. *In-vitro* permeation profile of formulation NF10 has shown 95.35% of diffusion phenomena was observed in figure 5. The decrease in drug diffusion observed from Ex-vivo study compared to In-vitro, may be due to the lesser permeability of buccal mucosa over egg membrane and also the presence of backing membrane in the exvivo study, which make the release of the drug unidirectional. The drug permeation study of optimized formulations NF10 through sheep buccal mucosa was shown in the figures 4. The formulation NF10 showed 99.6 ± 0.58 on 12 hr. In formulations NF1 to NF9 drug release decreased with increasing concentrations of polymers and maximum release was observed in NF10 formulation optimum concentrations combination HPMC, carbopol and chitosan polymers (Figure 6 - Figure 8). Since carbopol is insoluble in simulated saliva and swelling behavior of carbopol is attributed to

unchanged COOH group that get hydrated by forming hydrogen bonds on imbibing with water and therefore extending polymer chain. The release was, thus controlled by the viscoelastic relaxation of the matrix during solvent penetration as well as the diffusivity of the drug in the gel layer formed as the patch swelled. From the release kinetic models, optimized formulation NF10 follows Non-fickian diffusion release mechanism from all the films.

CONCLUSION

From the all prepared formulations, the NF10 buccal film was found to be considered as optimized formulation. The formulation NF10 comprising HPMC, chitosan and PVP polymers and which has provides as good buccal film. It showed highest swelling index, bioadhesive strength and in-vitro drug release profile. Hence the investigation present concluded Nateglinide buccoadhesive drug delivery system with HPMC, chitosan and PVP meet the ideal requirement for buccal devices which can be good way to bypass the extensive hepatic first pass metabolism and increase bioavailability.

REFERENCES

- 1. Chowdary, KPR, Mucoadhesive microspheres for controlled drug delivery. Biol. Pharm. Bull. 2004; 27(11): 1717-1724
- 2. Cleary, Adhesion of polyether-modified poly (acrylic acid) to mucin. Langmuir 2004; 20(22): 9755-9762.
- 3. Chavanpatil, Novel sustained release, swellable and bioadhesive gastroretentive drug delivery system for olfloxacin. *International Journal of Pharmaceutics* 2006; 316 (1-2): 86 92.
- 4. Säkkinen, Evaluation of microcrystalline chitosan for gastroretentive drug delivery. *Eur J. of Pharma. Sciences* 2003; 19(5): 345 353.
- 5. Illum, Adhesive drug delivery composition. US Patent 6 387 408, April 13, 1998.

- 6. Tur KM., Ch'ng, HS. Evaluation of possible mechanism(s) of bioadhesion. *International Journal of Pharmaceutics* 1998; 160(1): 61-74.
- 7. Thongborisute, Evaluation of mucoadhesiveness of polymers by Biacore method and mucin-particle method. *International Journal of Pharmaceutics* 2008; 354(1-2): 204-209.
- 8. Caliceti, Development and in vivo evaluation of an oral insulin-PEG delivery system. *European Eur J. of Pharma. Sciences* 2004; 22 (4): 315 323.
- 9. Thira, Mucoadhesive properties of various pectins on gastrointestinal mucosa: an *in-vitro* evaluation using texture analyzer. *Eur. J. Pharm. Biopharm.* 2007; 67: 132–140.
- 10. Takeuchi. Novel mucoadhesion tests for polymers and polymer-coated particles to design optimal mucoadhesive drug delivery systems. *Advanced Drug Delivery Reviews* 2005; 57(11): 1583-1594.
- 11. El-Samaligy MS. Formulation and evaluation of diclofenac sodium buccoadhesive discs. *Int. J. of Pharm.* 2004; 286(1-2): 27-39.
- 12. Jayvadan. Formulation and evaluation of mucoadhesive glipizide microspheres. AAPS Pharm. Sci Tech. 2005; 6(1):51-55.
- 13. Myung. Mucoadhesive microspheres prepared by interpolymer complexation and solvent diffusion method. *Int. J. Pharma*. 2005; 288(2): 295-303.
- 14. Eaimtrakarn. Retention and transit of intestinal mucoadhesive films in rat small intestine. *Int. J. of Pharm.* 2001; 224: 61-67.
- 15. Hagesaether. Mucoadhesion and drug permeability of free mix films of pectin and chitosan: *In-vitro* and *ex-vivo* study. *Eur. J. of Pharm. and Biopharm.* 2009; 71: 325–331.