

## RP-HPLC METHOD FOR DETERMINATION OF CIPROFLOXACIN IN PHARMACEUTICAL DOSAGE FORMS

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**Abstract:** In this study, reversed phase high performance liquid chromatographic method have been developed and validated for the determination of ciprofloxacin in tablets. Separation was achieved with a C<sub>18</sub> (250 mm x 4.6 mm, 5 µm) column, temperature of 33°C with isocratic mode with mobile phase containing 0.3% orto-phosphoric acid and acetonitril (65:35). UV detection was performed at 290 nm. The flow rate was 0.8 ml/min. The retention time of ciprofloxacin was found to be 3.10 min. The response was linear (R<sup>2</sup> 0.9999) in the range of 12.5 – 100 µg/ml. The % recovery was estimated as 98.96±2.14. No chromatographic interference from the tablet excipients was found. The results of the studies showed that the proposed RP-HPLC method is simple, rapid, precise and accurate, which can be applied for the routine analysis of ciprofloxacin in tablet dosage forms.

**Key words:** liquid chromatography, validation, ciprofloxacin, tablet dosage form, quality control

### Introduction

Fluoroquinolones are an important group of broad spectrum synthetic antibacterial agents used for the treatment of different bacterial infections in both human and veterinary medicine. Ciprofloxacin (1-cyclopropyl-6-fluoro-1, 4-dihydro-4-oxo-7-(1-piperazinyl)-3-quinolinecarboxylic acid) is an important drug because of its broad range of therapeutic indications, particularly active against gram-negative pathogens and against a few gram-positive cocci. It inhibits bacterial DNA gyrase, an enzyme responsible for counteracting excessive supercoiling of DNA during replication or transcription [1]. The drug was first patented in 1983 by Bayer A.G. and then accepted by the United States Food and Drug Administration in the year 1987 [2]. Ciprofloxacin is used to cure a wide variety of infections, including infections at joints and bones, endocarditis, gastroenteritis, respiratory tract infections, cellulitis, urinary tract infections, prostatitis, anthrax, and chancroid [3]. USP 2014 and BP 2014 described RP- HPLC methods for estimation of this antibacterial agent as substance and included in tablets [4, 5]. The literature survey revealed that the most methods for determination of ciprofloxacin in tablets and injection formulations include separation techniques [6-17], electrochemical

procedures [18-23], spectrophotometric and spectrofluorimetric methods [24-40].

The objective of the present study is to develop a simple, specific and precise liquid chromatographic method for determination of ciprofloxacin in several commercially available tablet dosage forms.

### Materials and methods

#### Reagents and chemicals

Three ciprofloxacin products containing 500 mg active compound from different pharmaceutical companies were obtained commercially and analysed by chromatographic method proposed. Ciprofloxacin HCl reference substance was obtained by Sigma Aldrich. LC-grade acetonitrile was supplied from Merck (Germany). All other chemical reagents were of analytical grade.

#### Instrumentation

A Shimadzu HPLC system was utilized consisting of the following components: LC – 20 AD pump, vacuum degasser unit DGU – 20 A5 and a UV/VIS variable detector SPD – 20 A. Separation was carried out on a LiChrosorb C 18 column (250 x 4.6 mm, particle size 5 µm) under reversed phase partition chromatographic conditions. The equipment was

controlled by a PC installed properly with the chromatographic software.

### Chromatographic Conditions

The mobile phase was 65:35 % v/v mixture of 0.3% o-phosphoric acid:acetonitrile. The mobile phase was filtered through 0.45  $\mu\text{m}$  membrane filter and degassed by using sonicator for about 10 min before use. The sample solutions were also filtered using 0.45  $\mu\text{m}$  membrane filters. The mobile phase was delivered isocratically at a flow rate 0.8 ml/min. The column was maintained at 33°C temperature. The injection volume was 20  $\mu\text{l}$  and the total run time was 5 minutes. The detection was carried out at 290 nm.

### Preparation of reference solutions

Reference solution (A): The solution was prepared by dissolving 50.00 mg of accurately weighed ciprofloxacin RS in 100.0 ml diluent (0.3% o-phosphoric acid:acetonitrile 80:20 v/v).

### Preparation of standard solutions for evaluation of linearity

Standard solutions used in estimation of linearity were prepared as follows (Table 1). The dilutions were made with diluent mentioned above.

### Sample preparation

Ten tablets from each product were accurately weighed (to obtain the average mass of tablets) and finally powdered. Weight equivalent to 500 mg of ciprofloxacin (1 tablet) was taken and transferred into a 100 ml volumetric flask. Approximately 70 ml of diluent were added and the mixture was manually shaken for 10 minutes. The sample was then diluted to volume with diluent. The solution was then filtered off through a 0.45  $\mu\text{m}$  filter discarding the first few ml of filtrate. 5.00 ml of this sample were diluted to

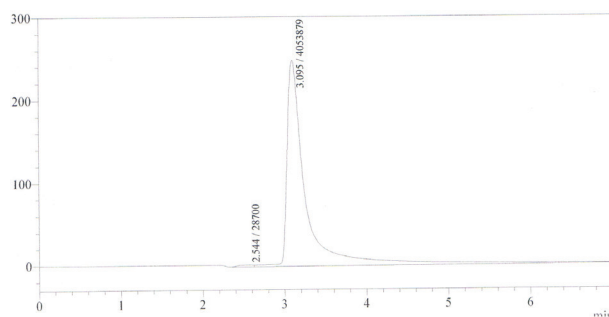


Figure 1. Chromatogram of analysis of ciprofloxacin hydrochloride RS

50.00 ml with diluent to produce the final concentration 50  $\mu\text{g/ml}$ .

### Results and discussion

In this work an LC method with UV detection for analysis of ciprofloxacin in tablet formulations was developed and validated. From the chromatogram shown in Figure 1, it is evident that, under the proposed chromatographic conditions ciprofloxacin was eluted with short retention time –  $t_r = 3.10$  min.

The specificity analysis revealed the HPLC method did not suffer from interference by the formulation excipients, since there was not another peaks on the retention time of the drug of interest.

### Method validation

The proposed method was validated with respect to linearity, precision, accuracy, limit of quantitation (LOQ) and limit of detection (LOD).

### Linearity

Calibration curve was constructed in the range of 12.50-100.0  $\mu\text{g/ml}$  for ciprofloxacin to encompass the expected concentration in measured samples. The corresponding linear regression equation was

Table 1. Preparation of standard solutions for linearity.

%	Concentration ( $\mu\text{g/ml}$ )	Volume pipetted of solution A (ml)	Volume to made up (ml)
25	12.5	5.00	200.0
50	25	5.00	100.0
100	50	5.00	50.00
150	75	15.00	100.0
200	100	5.00	25.00

Table 2. Precision of the HPLC method

Amount claimed (mg/tablet)	Amount found (mg/tablet)	Percentage purity obtained	Mean± S.D.	RSD %
500.00	485.2	97.04	98.96± 2.141	2.163
	487.7	97.54		
	488.3	97.66		
	502.1	100.4		
	492.6	98.52		
	512.8	102.6		

$y=73875.7x-23662.9$  with square of correlation coefficient  $R^2$  of 0.9999. An excellent correlation existed between the peak areas and concentration of drug of interest. The limit of quantitation and limit of detection were calculated from the standard deviations and slopes of the responses using a signal-to-noise ratio and found to be 125 ng and 25 ng, respectively.

#### Precision

The precision of the method was evaluated by performing six independent determinations of the sample preparation and calculating RSD (%). The RSD value measured during assessment of precision was <3.0% for ciprofloxacin, confirming the method is precise (Table 2).

#### Accuracy

Accuracy was determined by applying the pro-

posed method to synthetic mixtures of the drug product components to which known quantities of ciprofloxacin substance were added (corresponding to 50, 100 and 150 % of the label claim of the drug). The accuracy was expressed as the percentage of analyte recovered by the assay. The results indicated good accuracy of the method for the determination of analyzed drug as revealed by mean recovery data (Table 3).

#### Analysis of tablet formulations

The capability of the described method for accurate and precise determination of ciprofloxacin was demonstrated in assay of drug in tablets manufactured by three different companies presented by product codes CIP-A, CIP-B and CIP-C, respectively. The results obtained were presented in Table 4.

Table 3. Results from study of accuracy

Drug	Level (%)	Theoretical concentration (µg/ml)	Observed concentration (µg/ml)	Mean recovery (%) ± SD	RSD (%)
Ciprofloxacin	50	24.90	24.56	99.11±1.31	1.32
			24.43		
			25.06		
	100	49.25	49.52	99.81±0.642	0.64
			49.10		
			48.87		
	150	74.72	73.95	99.63±0.620	0.62
			74.85		
			74.51		

Table 4. Analysis of ciprofloxacin in different tablet formulations

Product code	Ciprofloxacin, mg/tablet – label claim	Ciprofloxacin, mg/tablet – obtained quantity	Results, %
CIP-A	500	484.6	96.92
CIP-B	500	475.1	95.02
CIP-C	500	488.3	97.66

### Conclusion

The statistical data have been proven that developed HPLC procedure for determination of ciprofloxacin was found to be accurate, precise, and sensitive. Therefore the proposed method can be applied for routine quality control analysis.

### ACKNOWLEDGMENT

The present study was kindly supported by Project № 34/2015 from Medical Science Council.

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