A Review Article on Pharmaceutical Analysis According to There Pharmacopoeias

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Abstract:

The pharmaceutical tablet must meet specific norms to claim it as a standard medicine blessing. Pharmaceutical diligence Test the tablets for maintaining their delicacy following different standard parameters similar as identity, strength, quality, chastity, and stability, etc. For what why, it's essential to control pharmaceutical processes anyhow of the issues that may be addressed. Process control includes examining raw accoutrements, controlling processes, and targeting for the finished product. That's why it's significant to cover the effectiveness of the process control. In connection to this, the adaption of the product process should misbehave with the specification as demanded, which may also include control of outfit and terrain. Pharmaceutical products in the process should be checked meetly for their identity, strength, quality, and chastity and the products are approved or rejected by the quality control unit during the manufacturing process. The highlights of this review are to describe quality control testing of pharmaceutical products by using different instruments for the pharmaceutical assiduity, according to pharmaceutical.

Keyword: Rae material, Finished products, Quality control, Purity, Pharmacopeia.

Introduction:

The pharmaceutical assiduity is one of the most regulated diligence world-wide because the medicines produced must be safe and effective. The Food and Drug Administration requires that raw accoutrements are tested before manufacturing pharmaceutical products to establish their identity, chastity, and quality. This analysis is an essential step in the product of Medicinals and ensures that the product is suitable for its intended use. Our capabilities include testing raw accoutrements, Active Pharmaceutical constituents (APIs), excipients, and colourful cumulative grounded finished products, including United States Pharmacopeia National Formulary, Japanese Pharmacopoeia, European Pharmacopoeia, Food Chemical Codex and British Pharmacopoeia. Quality is not an accident; it's the result of sensible efforts [1] conflation and the parcels and parcels of similar motes, known as active pharmaceutical constituents (APIs), and their analysis and remedial efficacity data are prerequisites for medicine seeker identification [2]. The nonsupervisory authority permits clinical trials after passing pre-clinical tests for clinical trial on the proposed system medicine. The clinical trial test produces statistically significant data on the association of the medicine's parlous performance, safety, and overall benefit. At the same time, the medicine is working on the proposed system, its optimal cure, and schedule. This step determines the medicine's implicit commerce with other medicines and monitors the long-term viability of the medicine. After successful completion of the clinical trial, the medicine comes to the request for cases. colourful guidelines related to chiral medicines have been published that encourage the development of a single enantiomer medicine for pharmaceutical manufacturers [3,4]. Registration for quality medicinal for chiral medicines was determined by the International Conference on The Adjustment of Technical Conditions in the Human Use for medicinal Registration [5]. Quality has come a critical and sensitive issue in the pharmaceutical assiduity. As the World Food and Drug Administration for the twenty-first century has come together to introduce, exercise and guide and integrate the current Good Manufacturing System (cGMP), there's an adding mindfulness of the significance of pharmaceutical products. Pharmaceutical finished products may contain patches of unknown foreign substances [6]. Foreign issues should be linked, and its source should be defined to help farther impurity. In the pharmaceutical assiduity, it's essential to control the blights at every stage of the manufacturing process. The total quality of the product must be assured according to the combination of the drugs [7]. Manufacturing practices that affect in the product of good quality finished products and acceptable considerations to cover workers are perform as Good Manufacturing Practice. Good Manufacturing Practice is associated with both product and quality control [8]. Quality control is the part of GMP where by QC staff analyses the quality of all factors involved in product to remove blights at each stage of product. The purpose of QC is to produce a perfect finished product by precluding blights at each stage of product. Quality control is cooperation, and we must flash back that quality must be created as a medicine product when designing a product and process. It's impacted by physical factory design, placement, ventilation, cleanliness, and sanitation during routine production [9]. In process quality control testing is performed at regular time intervals during the

manufacturing process [10]. The objects of the IPQC include monitoring and modifying the product process to insure compliance with the conditions. The process control can involve the terrain as well as outfit control. They should not take any threat of product quality. The process helps relating the problems in the test fluently. It occasionally identifies I imperfect product batch that can be repaired, but once this batch is finished contrarily it may not be possible. Failure to meet the IPC specification indicates that either those procedures weren't followed or that some factors were out of control [11]. Standard operating procedures should be established in the pharmaceutical assiduity, and also IPQCs and tests are described [12]. The highlight of this review is to show the quality parameters of pharmaceutical analysis according to pharmacopeia, which are part of the raw accoutrements and finished product for quality control tests.

Pharmaceutical analysis for quality control testing in pharmaceutical industry:

The evaluation of pharmaceutical raw materials and finished products for contaminations and declination products is an essential part of the process of medicine development and product. likewise, toxin data must be set up on any medicine- related contaminations that represent A attention of further than 0.1 of the active pharmaceutical component (API). Conventional analysis of pharmaceutical QC and product fields has traditionally been performed by titration, Identification, Loss on drying, Sulphate ash, dissolution, and decomposition test by using UV-Visible, HPLC, GC, or IR discovery.

Universal Tests for Pharmaceutical Industry

- 1. Uniformity of Weight
- 2. Dissolution test
- 3. Disintegration test
- 4. Content of Active ingredient.

These tests that are generally applicable to the pharmaceutical tablet and other pharmaceutical products.

Identification:

The purpose of identification testing is to corroborate the identity of the active pharmaceutical component (API) on the pharmaceutical lozenge. The identification check re going to be suitable to distinguish between composites of nearly connected structures that are in all probability gift. Identification tests ought to be specific to new medicine substances, for case, diapason.

Assay:

Specific, stability- indicating assay check to see the strength (content) of the API in pharmaceutical tablets. In several cases, it must apply constant fashion (for illustration, actinic shaft/ HPLC area unit shown in figure 1) for each the medicine substance and thus the range of contaminations.

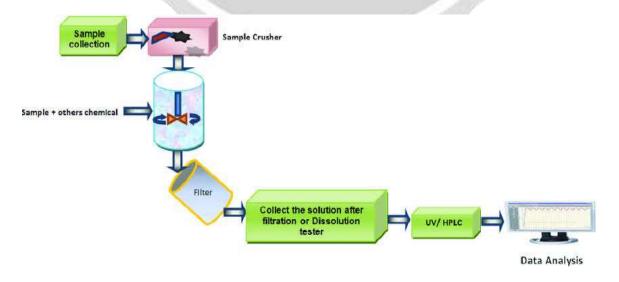


Figure 1: Schematic representation of Assay

Chromatography and qualitative analysis area unit orthogonal techniques which means that each kind of fashion offer fully different and specific data. Action could be a relatively separation fashion and qualitative analysis could be a fashion that offers a 'point' to individual or molecular fusions. HPLC could be a fashion that help for separation, quantification, and part discovery in fusions. It's particularly applicable for composites that aren't simply unpredictable, aren't thermally unstable, and have high mass. The benefit of actinic shaft fashion over HPLC fashion is that actinic shaft fashion doesn't generally need elaborate treatments and procedures associated with natural action fashion. It's time violent and economically low.

The HPLC associated actinic shaft spectroscopy fashion is an acceptable fashion of dimension a medicine in pure type and its cure. As a result of these ways area unit easy, presto, precise and correct, they will be with success and easily espoused for internal control analysis of drug within the kind of bulk and pharmaceutical boluses on a routine base.

UV Absorption Spectroscopy Analysis for Pharmaceutical Industry

Detection of Impurities:

UV immersion spectroscopy for determining contaminations in organic motes is one of the stylish styles. redundant peaks can be covered for contaminations remain in the sample and can be compared with standard raw accoutrements. contaminations can also be detected by measuring immersion at specific wavelengths. For illustration, Benzene appears as a common contamination in cyclohexane. Its presence is fluently sensible by absorbance of 255 nm.

Quantitative analysis:

The ultraviolet radiation spectrum may be used to quantitatively corroborate the composites that absorb ultraviolet radiation. This determination relies on the law of brewage as below.

$A = \log I0/It = \log 1/T = -\log T =$ first rudiment = εbc

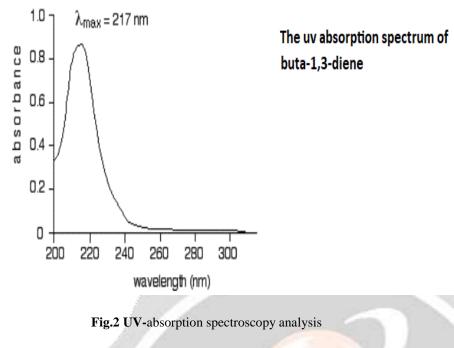
Where wherever is extermination co-efficient, c attention, and b is that the length of the cell used on the ultraviolet radiation photometer. Ultraviolet radiation- 3000 UV/ Vis photometer with a one cm match quartz cell to holographic grating system, discovered feather light of the instrument is reduced and also the analysis Do a lot of correct. Pharmaceutical product is also noble for its stable performance by victimisation ultraviolet radiation/ Vis photometer.

Qualitative analysis:

UV- immersion spectroscopy can identify the types of composites that absorb UV- radiation. The immersion diapason is linked by comparing the diapason of the given emulsion. The UV- immersion diapason is generally used to identify sweet composites and sweet olefins.

Quantitative analysis of pharmaceutical substances:

medicines can be either in the form of raw accoutrements or in formulas. These can be synthesized by creating applicable medicine results in the detergent and measuring immersion at specific wavelengths is shown in Fig.2. The Diazepam tablet can be anatomized by methanol by 0.5 H2SO4 at wavelength 257 nm. Qualitative analysis through spectrophotometric styles yields gormandize and accurate results using only small sample volumes. This fast and effective material has come An necessary tool in the pharmaceutical assiduity, thanks to its rigidity and profitable value. Qualitative analysis has proven to be largely effective at numerous large situations of organic composites and this helps to insure the health and safety of the case.



(https://images.app.goo.gl)

High-performance liquid chromatography Analysis for pharmaceutical products:

High-performance liquid chromatography (HPLC) is a chromatographic logical fashion used to resolve A admixture of chemistry, biochemistry and artificial field composites. The main purpose for using HPLC is to purify the amounts and mix individual factors. Since it's used to test products and identify the raw material, it's also used to perform qualitative and quantitative analysis of their products. HPLC plays a significant and critical part in the pharmaceutical assiduity and analysis. An HPLC instrument includes a pump, injector, column, and sensor and information accession and display system. It can descry small quantities of solvent & advanced resolution of the emulsion from the column. likewise, the significance of HPLC in this field is subject to strict regulations established by the Food and Drug Administration in the United States. According to the USA Pharmacopoeia (1999), [13] the HPLC system established for the first time the trial of bulk medicine equipment. It makes logical support within the pharmaceutical industry [14] come the approve system of quality control and assurance at numerous situations. In addition to HPLC analysis of the medicines and its operation to contaminations analysis of the Medicinals has been applied, [15,16]. All these pharmaceutical companies apply this mandatory system HPLC to identify the quality of their products before allowing them to be vended in transnational requests. The most important benefit of using HPLC fashion in the assiduity and logical field is that it helps to explain the structure and quantitative determination of contaminations and declination products in large amounts of medicine accoutrements and pharmaceutical composition. This benefits from the use of HPLC is limited not only to synthetic medicines and formulas but also to include herbal drugs too, medicine discovery, development, and product use extensively used high performance liquid chromatography (HPLC) to separate individual composites for the discovery, quantification, and sanctification of different factors. Schematic Representation of HPLC analysis Are shown in Figure 3.

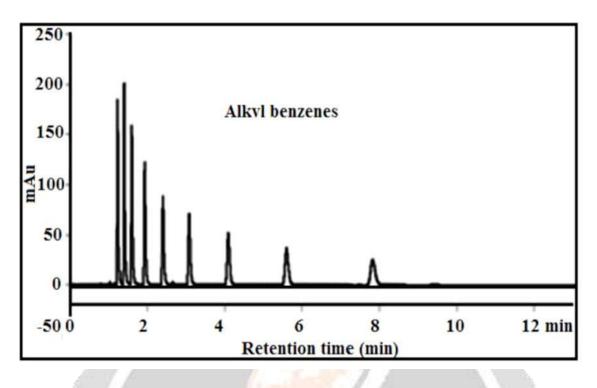


Fig. 3. High-performance liquid chromatography Analysis

HPLC instruments for advanced analysis of the" coming generation" discovery. Monica Young and Mark at Eksigent Corporation have tested the effectiveness of Eksigent Express LC Ultra Micro-High-Pressure Liquid Chromatography for a real- world pharmaceutical operation. By combining the capability of micro-flow HPLC, and the function to separate under high pressures, the new instrument enables fast separation effectiveness, cost reduction and high system reproducibility [17]. utmost workers use rear- phase mode with UV- immersion discovery when applicable, because it provides the stylish available trust ability, analysis time, repetition and perceptivity. HPLC has been used in several pharmaceutical medicine manufacturers [18,19] and natural fluids [20]. As similar, HPLC provides an excellent service in answering numerous of the questions raised by the pharmaceutical assiduity. still, the limitations of HPLC warrant the long-term reproducibility due to the personal nature of column pricing, detergent and column quilting. Liquid chromatography combined with mass spectrometry (LC- MS) is considered to be one of the most important logical Fashion of the last decade of the 20th century [21]. The pharmaceutical assiduity has come the approve system for quality control and logical support at numerous situations of assurance [22,23]. HPLC- MS has lately been used for drugs [24]. HPLC medicines have been applied for the analysis of medicines alone, as well as for the pharmaceuticals [25,26,27,28,29] and the contamination products [30,31].

Impurities:

Organic as well as inorganic impurities and residual solvents are included in this section. This test determines the presence of any component that is not API or an excipient to pharmaceutical products. The most common types of impurities that are measured are related substances, which are impure processing of new drug substances, API degradation products.

Raw materials and finished product of pharmaceutical Products:

The physical parameters test of raw material for the pharmaceutical assiduity are temperature, pressure, humidity content, weight, flyspeck size, hardness, loss of drying, sulphate ash, colour, integrity. Test of the finished product for pharmaceutical assiduity are assay, Uniformity of content, uniformity of mass, weight variation, frangibility test, content of active constituents, hardness test, decomposition test, dissolution test etc. The raw accoutrements and finished product tests for the pharmaceutical assiduity according to pharmacopoeias are listed below.

Size and Shape:

The size and shape of the tablet can be described dimension- supporter and controlled. This is determined by the outfit during the condensation process [32].

Colour and Odour:

numerous pharmaceutical tablets use colour as an essential means of quick identification and consumer acceptance. But it clearly equates to a lot in a single tablet, from tablet to tablet and lot. The presence of Odour in a batch of tablets may indicate stability issues similar as. Vitamins may have a characteristic odour, for illustration, the characteristic odour of acetic acid or the medicine's capability to degrade aspirin tablets. taste tablets are important in client acceptance [32].

Moisture Content of granules:

The granules should have enough strength to not break a large quantum of fine greasepaint and help normal running and mixing processes. On the other hand, it's wise to expose some areas of clear shells for optimal cling while reducing the size of the connections on the tablets, so humidity content is veritably important for producing good medicine products [32].

Assay:

A tablet contains an active ingredient called API. so in order to be able to make the tablet well finished product relations production has to be done using proper analysis method [33].

Uniformity of Content:

A physically defended tablet may not produce the asked effect. To estimate tablet eventuality for efficacity, it's necessary to cover the quantum of medicine per tablet, from tablet to tablet, and from batch to batch. For this test according to BP using the applicable experimental analysis system, determine the individual content of active substance of 10 tablets taken at random [33]. The tablet complies with BP- grounded testing, if the average content of each individual content is 85 percent to 115 percent. If the tablet fails to misbehave with the test, further than one distinct content is out of range or if one individual content is out of the range the average content is 125 percent to 75 percent. If an individual content exceeds the 85 percent to 115 percent limit, set the individual content of the other 20 tablets taken aimlessly, in the range of 75 percent to 125 percent to 115 percent of the average content and nothing is out of the range of 75 percent to 125 percent to 135 percent. The tablet agrees with the test if no further than 30 tablet-specific content is out of the range of 85 percent to 135 percent [33].

Microbial limit:

Microbial limit is seen as a point of experimental good manufacturing Practice, as well as quality assurance. In general, it's judicious to test the product of the medicine unless its constituents are tested before product and the manufacturing process is informed, through confirmation studies, not carrying a significant threat of bacterial infection or outbreak. It should be noted that this guideline does not directly address externalities, but the programs outlined then may apply to outlanders as well. In both cases, skip testing can be an applicable system. With respectable scientific defence, it may be possible to suggest a microbial limit test for maquillages intended for reconstitution as oral liquids.

Uniformity of lozenge units:

This term includes both the mass of the lozenge form and the content of the active substance in the lozenge form; a pharmacopoeia approach should be used. In general, specifications should include one or the other, but not both. However, If appropriate. This can be edited in the testing process. Acceptance criteria should be included in the specification. When applying weight variations to new medicine products in pricing, aspirants should corroborate that the unity of the product is sufficiently sufficient when developing the medicine.

Weight Variation Test:

According to the USP Weight variation test, over to 20 tablets are singly run by comparing average weight and average individual tablet weight. Weight loss tests are manifested in probabilities. The following formulas are used Weight Variation = $(Iw - Aw)/Aw \ge 100$ where, Iw = Individual weight of tablet; Aw = Average weight of tablet [34]. According to the USP, the tablet agrees to the test if the individual population has no further than 2 percent diversions from the average mass [34].

Hardness Test:

One of the early testers for this test was the Ketan Tablet Hardness Tester, a type of Monsanto hardness tester for assessing the tablet hardness tester. The tester has a barrel. Lower plunger is kept in touch with tablet and zero read is taken. The threaded bolt is forced against a spring until the upper plunger sucker cracks the tablet. As the spring narrows, a pointer moves with the barrel hand to indicate the ball. The force of the crack is recorded in kilograms. It's naturally applicable to examine the severity as a procedural control. In these situations, it is generally not necessary to include these features in the specification. If the hardness characteristics have a serious impact on the quality of the product of the medicine (e.g., chewable tablets), the standard of recognition should be included in the specification [34].

Decomposition Test:

The USP decomposition outfit consists of 6 glass tubes that are 3 elevation long, open at the top, and placed at the nethermost end of the handbasket rack assembly against the 10- mesh screen, with one tablet placed on each tube, and the handbasket rack fixed at medium 37 ± 2 °C similar tablets are located2.5 cm below the face of the fluid at their upward stir and the vessel descends near than2.5 cm from the bottom. A standard motor- driven device is used to move the handbasket assembly with tablets at distances of 5 to 6 cm at a frequence of 28 to 32 cycles per nanosecond. Perforated plastic disks can also be used in the tests. These are placed on top of the tablets and give a dangerous action on the tablets. While disks can be meaningful or produce further perceptivity to tests, they're useful for floating tablets. Operate the device for a fixed time (15min. for uncoated tablets unless else justified and approved) [34]. The tablet complies with the test, if the tablets are disconnected and all patches pass through the 10- mesh screen at the specified time. However, it must have If any residue is left. A soft mass that has no clear establishment core. The tablet complies with the trial according to USP, if all tablets are fully disconnected. However repeat the test on If 1 or 2 tablets fail to break fully.12 fresh tablets. Total 18 tablets not lower than 16 but the conditions are met to test The British Pharmacopoeia and Indian Pharmacopoeia limits for decomposition times of tablets are given in Table 2, Table 3 and shown in Fig. 5 respectively [34].

Categories of Tablets	Disintegration Time (min.)
Uncoated tablets	15
Coated tablets	60
Effervescent tablets	5
Soluble tablets	3
Dispersible tablets	3
Oro dispersible tablets	3
Gastro-resistant tablets	60
Oral lyophilisates	з

Tablet 3: IP limits for disintegration times of tablets

Categories of Tablets	Disintegration Time (min.)
Uncoated tablets	15
Coated tablets	60
Enteric-coated tablets	60
Film-coated tablets	30
Effervescent tablets	5
Soluble tablets	3
Dispersible tablets	3

Dissolution Test:

British Pharmacopoeia, United States Pharmacopeia dissolution out-fit(paddle/ handbasket outfit) correspond of a spherical vessel with a hemispherical bottom, which may be covered with glass or other inert, transparent material; a motor; a essence drive amalgamation; and a spherical handbasket are shown in Fig. 6. The vessel is incompletely immersed in A accessible water bath of a accessible size or heated by a suitable device similar as a heating jacket. A water bath or heating device allows the temperature inside the vessel to be kept at 37 ± 0.5 °C during the test and keeps the bath fluid in constant, smooth stir.

According to BP, keep the specified volume (± 1) of the dissolution medium in the vessel for this test46. Assemble the outfit, acclimate the dissolution medium to 37 ± 0.5 °C. Precisely remove 1 of the air bubbles from the face of the tablet. Operate the outfit at a fixed rate. Within a specified Time interval, or each time specified, withdraw a sample from the zone of the interior between the face of the dissolution medium and the top of the rotating handbasket, not lower than 1 cm from the wall of the vessel. Where multiple slice times are specified,

replace the withdrawn aliquots at 37 °C for recently dissolution medium or, where it can be shown that the medium doesn't need relief, is correct for volume changes in the computation. Keep the vessel covered for the duration of the test, and at a suitable time, check the temperature of the medium. Perform analysis using applicable side procedures as directed by individual studies. Repeat the trial with fresh tablets. Unless specified else in separate studies, 5 the quantities of active component dissolved in the tablets tested from the tests needed by British Pharmacopoeia, United States Pharmacopeia, European Pharmacopoeia, Japanese Pharmacopoeia and International Pharmacopoeia meet the following recognition criteria are show in Table 4.

Stage	Number of Tablet Tested	Acceptance Criteria
S1	6	Each unit is not less than Q + 5 %.
S2	6	Average of 12 units (S1 + S2) is equal to or greater than Q, and no unit is less than Q – 15 %.
S3	12	Average of 24 units (S1 + S2 + S3) is equal to or greater than Q, not more than 2 units are less than Q - 15 %, and no unit is less than Q - 25 %.

If the results are not consistent with S1 or S2, continue the experiment in phase 3 Quantity Q, is the specific amount of dissolved active substance, expressed as a percentage of the labelled material; the 5 percent, 15 percent, and 25 percent values in the table are the percentage of content labelled so that these values and Q are in the same terms [33].

CONCLUSION:

The main goal of pharmaceutical products is to serve human beings to protect them from potential illness or disease. The drug should be free from impurities or other interference to full-fill its intended purpose, which can harm people. Pharmacopeia sets the standard for high quality drugs. According to the WHO list, 140 independent countries currently employ around 30 national and African, European and international pharmacopoeias. From present study, it is clearly expressed that various pharmacopoeias suggest different types of raw materials and finished products test for pharmaceutical tablet using different instruments in the pharmaceutical industry, but the main purpose of pharmacopoeias worldwide is to produce good quality drugs for human health.

Reference:

1. Dewan, S.M.R.; Alam, A.; Ahamed, S. K. Int. Res. J. of Pharm., 2013, 4, 96.

2. Valagaleti, R.; Burns, P.K.; Michael, G. Analytical Support for Drug Manufacturing in the United States— From Active Pharmaceutical Ingredient Synthesis to Drug Product Shelf Life. Drug Information Journal., 2003, 37, 407-438.

3. FDA's Policy statement for the development of new stereoisomeric drugs., 1992, 4, 338-340.

4. Health Canada, https://www.canada.ca/ content/dam/hc-sc/migration/hc-sc/dhp-mps/ alt_formats/hpfb-dgpsa/pdf/prodpharma/ stereo-eng.pdf., 2000.

5. European Pharmacopoeia Commission. European Pharmacopoeia, 8th Edition, Council of Europe, Europe., 2013.

6. Sony, A.; Anwar, M.H.; Shafiul, I.; Islam, M.M. A review article on introduction of analytical instruments analysis in pharmaceutical industry according to pharmacopoeia, Mintage Journal of Pharmaceutical and Medical Sciences., 2019, 1-4.

7. Woodcock, J. Ameri. Pharmace. Rev., 2004, 7, 10-15.

8. Fortunak, J.M.; Souza, R.D.; Kulkarni, A.A.; King, C.L.; Ellison, T.; Miranda, L.S.M. Antivi. Thera., 2014, 9, 4-6.

9. Mehmood, T.; Salaria, M.R.; Herani, G.M.; Qureshi, M.A. Ind. J. of Manage. & Soci. Sci., 2009, 3, 21-30.

10. Levi, L; walker, G. Canadi. Medi. Associ., 2010, 91, 96.

11. Tangri, P; Mamgain, P; Shaffi; Verma, A.M.L; Lakshmayya. Int. J. of Ind. Pharm. and Bio Sci., 2012, 1, 49-51.

12. Mazumder, B; Bhattacharya, S; Yadav, A. Int. J. of Pharm Tech Res., 2011, 3, 366.

13. The United States pharmacopeia; the national formulary United States Pharmacopeial Convention. USP Convention Inc., Rockville., 1999.

14. White, D.; Varlashkin, P.; Rusch, D.N. 'A thinlayer chromatographic method to determine process impurities in leucovorin calcium. J Pharm Sci., 1992, 81, 1204-9.

15. Nicolas, E.C.; Scholz, T.H. 'Active drug substance impurity profiling part II. LC/MS/ MS fingerprinting. J Pharm Biomed Anal., 1998, 16, 825-36.

16. Madireddy, V.; Babu, K.S.; Narayanreddy, P.G. J. Anal. Chem., 2011, 2, 198-207.

17. Monica, M. Y.; Xiaoyi, G.; Schafer, W.; Arnold, D.; Christopher, J. Welch Evaluation of micro ultra-high pressure liquid chromatography for pharmaceutical analysis. Anal. Methods., 2013, 5, 2178-2181.

18. Siddiqui, M.R.; Tariq, A.; Reddy, K.D.; Chaudhary, M.; Yadav, J.; Negi, P.S.; Bhatnagar, A.; Singh, R. Int. J. Pharmacol., 2010, 6, 271–277.

19. Tang, J.; Peng, J.; Zhang, L.; Xiao, X. Anal. Methods., 2012, 4, 1833-1837.

20. Tariq, A.; Siddiqui, M.R.; Kumar, J.; Reddy, D.; Negi, P.S.; Chaudhary, M.; Srivastava, S.M.; Singh, R.K. Sci. Asia., 2010, 36, 297–304.

21. Niessen, W. M. A. J. Chromatogr., 1999, 179–197.

22. Ermer, J., J. Pharm. Biomed. Anal., 1998, 18, 707-714.

23. Nicolas, E.C.; Scholz, T.H. J. Pharm. Biomed. Anal., 1998, 16, 825–836.

24. Hilhorst, M.J.; Hendriks, G.; van Hout, M.W.; Sille'n, H.; van de Merbel, N.C. Bio-analysis., 2011, 3, 1603-1611.

25. Chitturi, S.R.; Somannavar, Y.S.; Peruri, B.G.; Nallapati, S.; Sharma, H.K.; Budidet, S.R.; Handa, V.K.; Vurimindi, H.B. J. Pharm. Biomed. Anal., 2011, 55, 31–47.

26. Madireddy, V.; Babu, K.S.; Narayanreddy, P. Glob. J. Anal. Chem., 2011, 2, 198–207.

27. Navaneeswari, R.; Reddy, P.R. Afr. J. Scient. Res., 2011, 6, 318–324.

- 28. Thomas, S.; Bharti, A.; Tharpa, K.; Agarwal, A. J. Pharm. Biomed. Anal., 2012, 60, 86-90.
- 29. Verbeken, M.; Suleman, S.; Baert, B.; Vangheluwe, E.; Dorpe, S.V.; Burvenich, C.; Duchateau, L.; Jansen, F.H.; De Spiegeleer, B. Malaria J., 2011, 10, 51. 51.
- 30. Sabry, S.M.; Belal, T.S.; Barary, M.H.; Ibrahim, M.E.A. Drug Test Anal., 2012.
- 31. Hanysova, L.; Grafnetterova, T.; Dubovska, B.; Klims, J. Chem. Papers., 2005, 52, 99–102.
- 32. Lachman, L; HA Lieberman, H.A.; Kanig, JL. The Theory and Practice of Industrial Pharmacy, 3rd Edition., 1986, 296-300.
- 33. British Pharmacopoeia Commission; British Pharmacopoeia, 13th Edition., 2013.
- 34. Unites States Pharmacopoeia Convention; United States Pharmacopoeia. 38-National Formulary 33., 2010.

