

NEW SPECTROPHOTOMETRIC METHODS FOR THE QUANTITATIVE ESTIMATION OF EZOGABINE IN FORMULATIONS

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ABSTRACT

Five simple, sensitive and economical spectrophotometric methods have been developed for the determination of Ezogabine in commercial dosage forms. The methods were based on the formation of colored complex of Ezogabine with different reagents. The absorbance of the formed color complex is measured at the wavelength of maximum absorbance of the complex against the reagent blank treated similarly. All these method have different linearity ranges. Statistical analysis proves that the proposed methods are reproducible and selective for the estimation of Ezogabine in bulk drug and in its tablet dosage form.

Keywords: Ezogabine, Spectrophotometric Methods, O-phenonthrolin, ARS, PNA, CTC.

INTRODUCTION

Ezogabine is an anticonvulsant used for the treatment of partial epilepsies. The drug was developed by Valeant Pharmaceuticals and GlaxoSmithKline. It was approved by the European Medicines Agency under the trade name Trobalt on March 28, 2011, and by the United States Food and Drug Administration (FDA), under the trade name Potiga, on June 10, 2011.

Ezogabine works primarily as a potassium channel opener—that is, by activating a certain family of voltage-gated potassium channels in the brain. This mechanism of action is unique among antiepileptic drugs, and may hold promise for the treatment of other neurological conditions, including migraine and neuropathic pain.

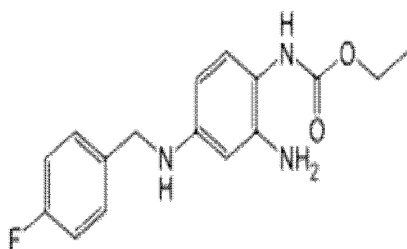


Fig. 1: Structure of Ezogabine

Ezogabine acts as a neuronal KCNQ/Kv7 potassium channel opener, a mechanism of action markedly different from that of any current anticonvulsants. This mechanism of action is similar to that of flupirtine, which is used mainly for its analgesic properties.

The adverse effects found in the Phase II trial mainly affected the central nervous system, and appeared to be dose-related. The most common adverse effects were drowsiness, dizziness and vertigo, confusion, and slurred speech. Less common side effects include tremor, memory loss, gait disturbances, and double vision.

Psychiatric symptoms and difficulty urinating have also been reported, with most cases occurring in the first 2 months of treatment.

Experimental Procedure

All chemicals used were of analytical reagent grade and distilled water was used to prepare all solutions. Double beam UV-Visible Spectrophotometer is used for measuring the absorbance's of the color formed during the analysis.

Preparation of reagents

O-phenonthrolin : Weigh accurately 200 mg of O-phenonthrolin and was dissolved in 100 ml of distilled water with warming.

Fe (III) solution: Accurately 250 mg of anhydrous ferric chloride was weighed and was taken in a 100 ml graduated volumetric flask. It was dissolved in little amount of distilled water and the final volume was made up to the mark with distilled water.

Alizarin Red S (ARS) solution: weigh 200 mg of ARS and is dissolved in 100ml of distilled water.

Woll Faster Blue Black (WFBBL) solution: weigh 200 mg of WFBBL and is dissolved in 100ml of distilled water.

Para Nitro Aniline (PNA) solution: Accurately 100 mg of PNA was weighed and was taken in a 100 ml graduated volumetric flask. It was dissolved in 0.2 M HCl solution and made up to the mark.

NaNO₂ solution

Accurately 100 mg of NaNO₂ was weighed and was taken in a 100 ml graduated volumetric flask. It was dissolved in distilled water and made up to the mark.

NaOH solution (4 %, 1M): Accurately 4g of NaOH was weighed and was taken in a 100ml graduated volumetric flask. It is dissolved in distilled water and made up to the mark.

Cobalt Thiocyanate solution: The solution was prepared by dissolving 7.25 g of cobalt nitrate and 3.8g of ammonium thiocyanate in 100ml of distilled water.

pH 2 Buffer solution: the solution was prepared by mixing 306ml of 0.1M tris sodium citrate with 694ml of 0.1M HCL and the pH adjusted to 2.

HCl solution (1N): Prepared by diluting 86 ml of conc. HCl to 1000 ml with distilled water and standardized.

Preparation of working standard drug solution

The standard Ezogabine (100 mg) was weighed accurately and transferred to volumetric flask (100 ml). It was dissolved properly and diluted up to the mark with methanol to obtain final concentration of 1000 µg/ml (stock solution I). 20 ml of stock solution I was diluted to 100 ml with Methanol (Stock solution II, 200µg/ml) and the resulting solution was used as working standard solution.

Methods

O-phenanthroline Method (M1)

From the standard stock solution II of Ezogabine, appropriate concentration (30 to 180 ppm) is pipetted out in to a 10 ml volumetric flasks add 0.5 ml FeCl₃ solution and 2 ml of 1,10 Phenanthroline were added. The tube was heated in water bath up to 30 min. after cooling the tube 2 ml of acid was

added and make up to 50 ml with distilled water. Make up to 50 ml volume. The absorbance of the formed color was measured after 5min at 500 nm against a reagent blank.

ARS Method (M2)

In a series of 125 ml separating funnels containing aliquots of standard drug (15-90ppm) solution was taken. To this 6ml of HCl solution and 2ml of ARS solutions were added successively. The total volume of the aqueous phase in each separating funnel was adjusted to 15ml with distilled water. To each separating funnel 10ml of Chloroform was added and the contents were shaken for 2 min. the two phases were allowed to separate and the absorbance of the separated chloroform layer was measured at 440nm against a similar reagent blank.

WFBBL Method (M3)

In a series of 125 ml separating funnels containing aliquots of standard drug solution (5-30ppm) was taken. To this 6ml of HCl solution and 2ml of WFBBL solutions were added successively. The total volume of the aqueous phase in each separating funnel was adjusted to 15ml with distilled water. To each separating funnel 10ml of Chloroform was added and the contents were shaken for 2 min. the two phases were allowed to separate and the absorbance of the separated chloroform layer was measured at 600nm against a similar reagent blank.

PNA method (M4)

In a 10 ml graduated test tubes 1.0 ml of PNA solution and 1.0 ml of NaNO₂ solution were successively added and allowed to stand for 2 min. Later, standard drug of elected concentration (20-120ppm) is delivered into the test tube. Then 1.5 ml of NaOH solution was added and the volume in each tube was made up to 10 ml distilled water. Solution attains green colour. The maximum absorbance was measured at 440nm against a reagent blank (colourless).

Cobalt Thiocyanate Method (M5)

In to a series of 125ml separating funnels, aliquots of standard drug (4-24ppm) solution were taken. Then add 2ml of buffer solution and 8ml of Cobalt Thiocyanate solution. The volume of each aqueous phase in each separating funnel was adjusted to 15ml with distilled water. To each separating funnel, 10ml of Nitrobenzene was added and the contents were shaken for 2min. the two phases were separated and organic layer was collected. The absorbance of the organic layer was

measured at 680nm against a similar reagent blank.

Assay Procedure for Formulations

An amount of finely ground tablet powder equivalent to 100 mg of Ezogabine (Jakafi - 10mg) was accurately weighed into a 100 ml calibrated flask, 60 ml of water added and shaken for 20 min. Then, the volume was made up to the mark with water, mixed well, and filtered using a Whatman No 42 filter paper. First 10 ml portion of the filtrate was discarded and a suitable aliquot of the subsequent portion (1000 $\mu\text{g mL}^{-1}$ Ezogabine) was diluted appropriately to get suitable concentrations for analysis by proposed methods.

Method Validation

Selection of analytical concentration ranges (linearity test)

Linearity test was evaluated by measuring the absorbance values of standard solutions. The standard stock solution of Ezogabine, appropriate aliquots were pipetted out in to a six or seven series of volumetric flasks and add the solutions required in required for each individual method. After color formation absorbance of each concentration was measured at wavelength found for the proposed method. Results were shown in Table: 1 and Standard graphs of linearity for proposed methods were shown below.

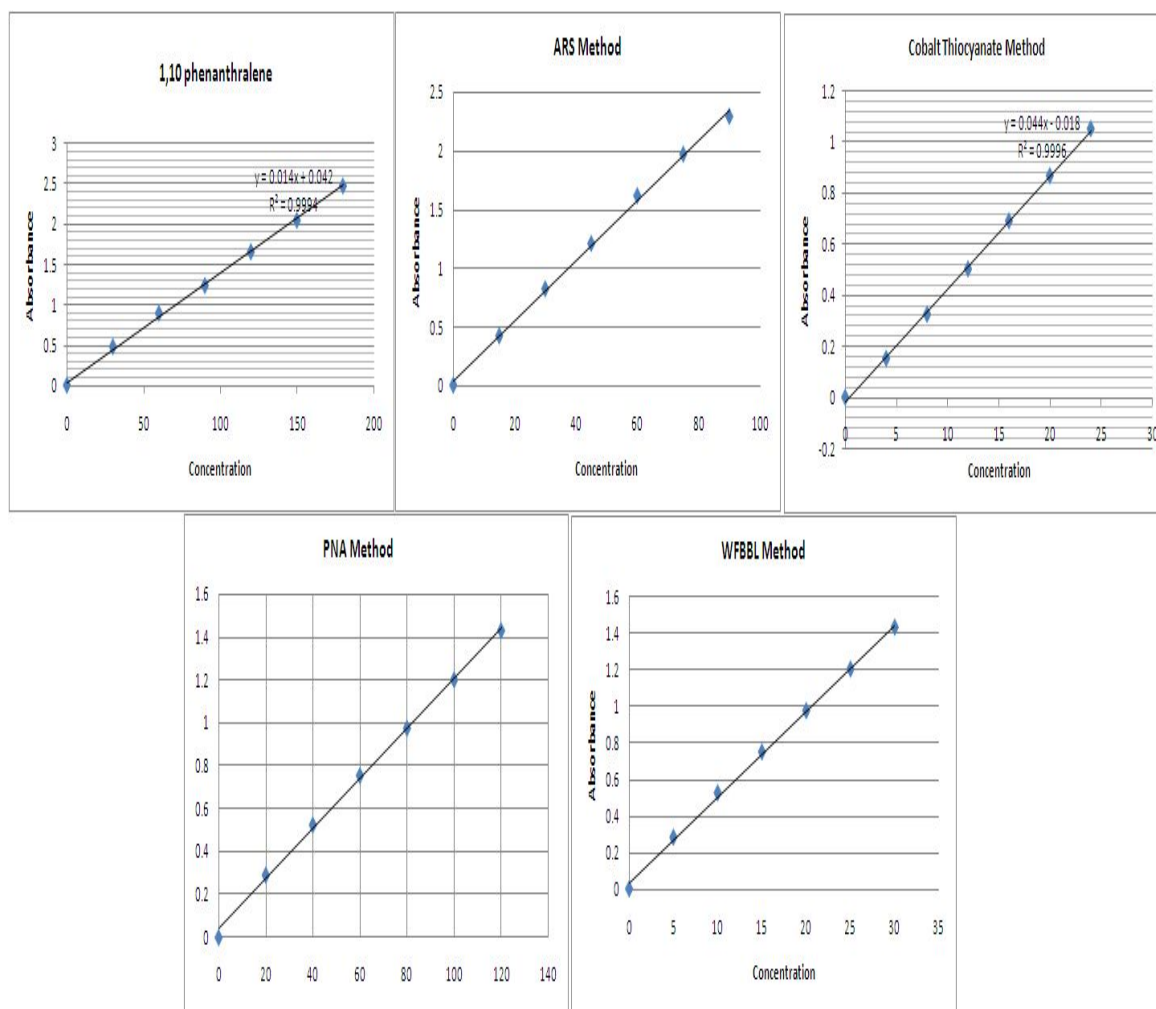


Fig. 1: Calibration curves for the proposed methods

Table 1: Summary results of the proposed methods

S.NO	Parameter	M1	M2	M3	M4	M5
1	Wavelength Max	500nm	440nm	600nm	440nm	680nm
2	Concentration Range	30-180ppm	15-90 ppm	5-30ppm	20-120ppm	4-24ppm
3	Correlation coefficient	0.9994	0.9992	0.9993	0.9992	0.9996
4	Slope	0.014	0.026	0.047	0.012	0.044
5	Intercept	0.042	0.036	0.033	0.037	-0.018
6	RSD of Precision	0.39	0.00	0.34	0.42	0.79
7	Average recovery	100.26	100.18	98.81	99.46	100.17
8	Stability period	240min	225min	180min	120min	160min
9	LOD	0.75ppm	0.025ppm	0.075ppm	0.75ppm	0.02ppm
10	LOQ	2.5ppm	0.08ppm	0.25ppm	2.5ppm	0.066ppm
8	% Assay of Formulation	98.73	98.85	98.60	99.12	98.50

Precision

To evaluate the accuracy and precision of the methods, pure drug solution (Within the working limits) was analyzed and being

repeated six times. The relative error (%) and relative standard deviation (%) were less than 2.0 and indicate the high accuracy and precision for the proposed methods (Table 2).

Table 2: Precision results of the proposed methods

S.NO	M1	M2	M3	M4	M5
Concentration	90PPM	60PPM	15ppm	60PPM	12PPM
1	1.242	1.621	0.749	0.755	0.507
2	1.253	1.626	0.752	0.759	0.506
3	1.247	1.63	0.756	0.762	0.503
4	1.251	1.627	0.752	0.764	0.509
5	1.246	1.631	0.751	0.758	0.508
6	1.255	1.628	0.755	0.761	0.515
RSD	0.39	0.22	0.34	0.42	0.79

Recovery Studies

To ensure the accuracy and reproducibility of the results obtained, known amounts of pure drug was added to the previously analyzed formulated samples and these samples were

reanalyzed by the proposed method and also performed recovery experiments. The Percentage recoveries thus obtained were given in Table 3.

Table 3: Recovery results of the proposed methods

Method	Recovery	Concentration in ppm	Amount found in ppm	% of recovery	Average Recovery
M1	50%	60	59.63	99.38	100.26
	100%	90	90.26	100.29	
	150%	120	121.32	101.1	
M2	50%	30	29.76	99.2	100.18
	100%	60	60.27	100.45	
	150%	90	90.81	100.9	
M3	50%	10	9.86	98.6	98.81
	100%	20	19.81	99.05	
	150%	30	29.63	98.77	
M4	50%	40	39.32	98.3	99.46
	100%	80	78.92	98.65	
	150%	120	121.71	101.43	
M5	50%	4	3.93	98.25	100.17
	100%	8	8.12	101.5	
	150%	12	12.09	100.75	

Application to Analysis of Commercial Sample

In order to check the validity of the proposed methods, Ezogabine was determined in

commercial formulation. From the results of the determination it is clear that there is close agreement between the results obtained by the proposed methods and the label claim.

These results indicating that there was no significant difference between the proposed

methods and the reference methods in respect to accuracy and precision.

S.NO	Method	Formulation	Amount prepared	Amount found	% Assay
1	M1	Victoza(1.8mg)	90ppm	88.86	98.73
2	M2	Victoza(1.8mg)	60 ppm	59.31	98.85
3	M3	Victoza(1.8mg)	15ppm	14.79	98.60
4	M4	Victoza(1.8mg)	60ppm	59.47	99.12
5	M5	Victoza(1.8mg)	12 ppm	11.82	98.50

DISCUSSION

Method M1 is based on the mechanism of oxidation followed by complex formation, where in the initial reaction the anti-oxidant undergoes oxidation in the presence of ferric chloride and then the oxidized ferric chloride reacts with 1,10- phenanthroline and the drug to form a orange red colored complex which exhibits maximum absorption at wavelength of 500 nm.

In ARS and WFBBL methods drug being a base form an ion association complex with acid dyes ARS and WFBBL. The formed complex is extractable in to Chloroform from the aqueous phase. The protonated nitrogen positive charge of the drug molecule in acid medium is expected to attack the positive charge of the dye. Hence form a colored complex which is extracted with Chloroform. The obtained color chromogen show absorbance at 440nm for ARS Method and 600nm for WFBBL method.

PNA method involves the diazotization of PNA with sodium nitrate followed by coupling with drug in alkaline medium. The formed PNA-DRUG complex develop green color, the developed color can be estimated by using spectrophotometer at a wavelength 440 nm.

Cobalt thiocyanate is a valuable reagent for the detection and determination of Amino compound. A coordinate complex is formed when the secondary amine group of the drug is treated with Cobalt thiocyanate. The formed complex shows color. The colored complex is extractable with the Nitrobenzene from the aqueous solution. The obtained color shows absorbance at 680nm.

The linearity ranges of Ezogabine are found to be 30-180ppm, 15-90 ppm, 5-30ppm, 20-120ppm, 4-24ppm for M1 to M5 respectively. A linear correlation was found between absorbance and concentration of Ezogabine. The graphs showed negligible intercept and are described by the equation: $Y = a + bX$ (where Y = absorbance of 1-cm layer of solution; a = intercept; b = slope and X = concentration in $\mu\text{g mL}^{-1}$ max) .Regression analysis of the Beer's law data using the method of least squares was made to evaluate

the slope (b), intercept (a) and correlation coefficient(r) for each system according to ICH guide

The accuracy of the proposed methods was further ascertained by performing Accuracy studies. The Relative standard deviations of results for the proposed were very low and the values are within the range below 2. It indicates that the high accuracy and precision for the proposed methods. The Recovery results were very close to the actual range and it revealed that co-formulated substances did not interfere in the determination.

CONCLUSIONS

Five useful micro methods for the determination of Ezogabine have been developed and validated. The methods are simple and rapid taking not more than 20-25 min for the assay. These spectrophotometric methods are more sensitive than the existing UV and HPLC methods, and are free from such experimental variables as heating or extraction step. The methods rely on the use of simple and cheap chemicals and techniques but provide sensitivity comparable to that achieved by sophisticated and expensive technique like HPLC. Thus, they can be used as alternatives for rapid and routine determination of bulk sample and tablets.

REFERENCES

- Porter RJ, Partiot A, Sachdeo R, Nohria V and Alves WM. Randomized, multicenter, dose-ranging trial of retigabine for partial-onset seizures. *Neurology*. 2007;68(15): 1197-204.
- Main MJ, Cryan JE, Dupere JR, Cox B, Clare JJ and Burbidge SA. Modulation of KCNQ2/3 potassium channels by the novel anticonvulsant retigabine". *Molecular Pharmacology*. 2000;58(2): 253-62.
- Ferron GM, Paul J and Fruncillo R. Multiple-dose, linear, dose-proportional pharmacokinetics of retigabine in healthy volunteers". *Journal of Clinical Pharmacology*. 2000;42(2):175-82.

4. Damodar Katasani, Srinu Bhogineni and Bala Ramanjaneyulu. New Spectrophotometric methods for the quantitative estimation of Aztreonamin formulations, *J.Atoms and Molecules*. 2012; 2(1):109-116.
5. Weisenberg JLZ and Wong M. Profile of ezogabine (retigabine) and its potential as an adjunctive treatment for patients with partial-onset seizures, *Neuropsychiatric Disease and Treatment*. 2011;7:409-414.
6. <http://www.ama-assn.org/resources/doc/usan/ezogabine.pdf>
7. Martin J Gunthorpe, Charles H Large and Raman Sankar. The mechanism of action of retigabine (ezogabine), a first-in-class K⁺ channel opener for the treatment of epilepsy, *Epilepsia*. 2012; 53(3):412-424.