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DEVELOPMENT AND VALIDATION OF STABILITY INDICATING RP-HPLC METHOD FOR SIMULTANEOUS ESTIMATION OF ANAGLIPTIN AND METFORMIN HYDROCHLORIDE DRUG IN TABLET DOSAGE FORM

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ABSTRACT

A simple, rapid, sensitive & selective stability indicating RP-HPLC method is developed for the determination of anagliptin and Metformin HCL in tablet dosage form. A RP-HPLC analysis was performed on KROMASIL C₁₈ column and its size 250×4.6mm, 5µm with using mobile phase methanol and 0.05M potassium dihydrogen phosphate with buffer pH4 in ratio (30:70) at 220nm detection wavelength. The gradient was optimized with flow rate 1 mL/min. the completed analytical method validation was successfully carried out as per ICH guidelines. The recovery study was carried out at 80% ,100% and 120% level of working concentration and result were in the range 100.1-101.2% for Metformin HCL and 100.2-100.9% for Anagliptin. The linearity was proven in concentration range 5-15µg/mL for anagliptin and 25-75µg/mL for Metformin HCL. The limit of detection (LOD) was found to be 0.069µg/mL for anagliptin & 1.56µg/mL for metformin HCL. The LOQ value was found to be 0.209µg/mL for anagliptin & 4.716µg/mL for metformin HCL. All validation parameters was in accepted range as per ICH guideline. furthermore, forced degradation study was also performed at various stress condition such as acidic, basic, oxidative and photolytic as per protocol of ICH. The developed method can be successfully used for the estimation of Anagliptin & Metformin HCL in tablet dosage form.

Keywords: Anagliptin, Metformin HCL, stability indicating RP-HPLC method, validation

INTRODUCTION [1]

Antidiabetic drugs used to treat diabetes mellitus by lowering the glucose level in the blood. The type 2 diabetes mellitus which is characterized by polyphagia, polyuria, and polydipsia and need a lifetime treatment with antidiabetic drugs. Anagliptin (ANA) chemically N-[2-[[2-[(2S)-2-Cyanopyrrolidin-1-yl]-2-oxoethyl]amino]-2-methylpropyl-2-methylpyrazolo [1,5-a] pyrimidine-6-carboxamide 9 (Figure 1) is a Dipeptidyl peptidase 4 (DPP 4) inhibitor which is used in treatment of type 2 NIDDM [2]. Dipeptidyl peptidase 4 enzyme breaks down the incretins GLP-1 gastrointestinal hormone released in response to a meal by preventing GLP-1 inactivation they are able to increase the cell secretion determines glucagon release from neighbouring alpha cell homeostasis of blood glucose is maintained by hormone secretion from the pancreas. Glucose stimulates insulin secretion from beta cell but suppresses the release of glucagon hormone that raises blood glucose, from alpha-cells. This drives blood glucose levels towards level

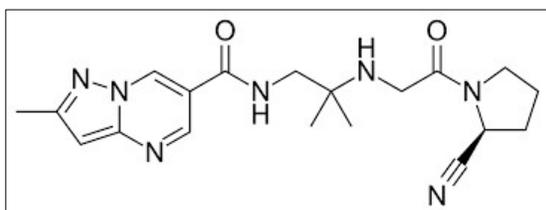


Figure 1: Anagliptin

[3, 4]. This drug is not official in any of the pharmacopoeia.

Metformin HCL (MET), chemically 3-(diaminomethylidene)-1, 1-dimethylguanidine (Figure 2). Metformin HCL is biguanide class of Antidiabetic drugs. That has been control blood glucose level of T2D patient for decrease and has been considered the first line treatment according to international guidelines. It is suppressing hepatic glucogenesis and glucose output from liver. It is official in Indian pharmacopoeia, British pharmacopoeia, European pharmacopoeia and united state pharmacopoeia.

Literature survey revealed that these antidiabetic drugs have been analyzed individually or in combination by many analytical methods like RP-HPLC, HPTLC and spectroscopic methods but no method has been reported for simultaneous estimation of Anagliptin & Metformin HCL for stability indicating RP-HPLC method in tablet dosage form.

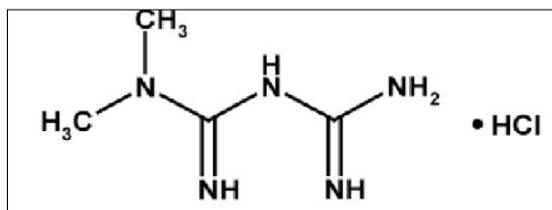


Figure 2: Metformin HCL

MATERIAL AND METHOD

The API of anagliptin was obtained as gift sample from Intas Pharmaceutical Pvt LTD., Ahmedabad. Metformin HCL API was obtained as gift sample from nucleus lab, chtral. All solvent like HPLC grade water, methanol, ACN, were obtained from Merck specialties Pvt. Ltd. Mumbai, India.

Selection and Detection of Wavelength

The selectivity of HPLC method that uses UV detection depends upon proper selection of

detection wavelength. An ideal wavelength is the one that gives good response for the selected drug that is to be detected not interference of solvent effect. It gives maximum absorbance at 220nm in acetonitrile at 220nm drugs gives good peak point and not interference of solvent effect so; this wavelength was selected for estimation of anagliptin and Metformin HCL (Figure 3).

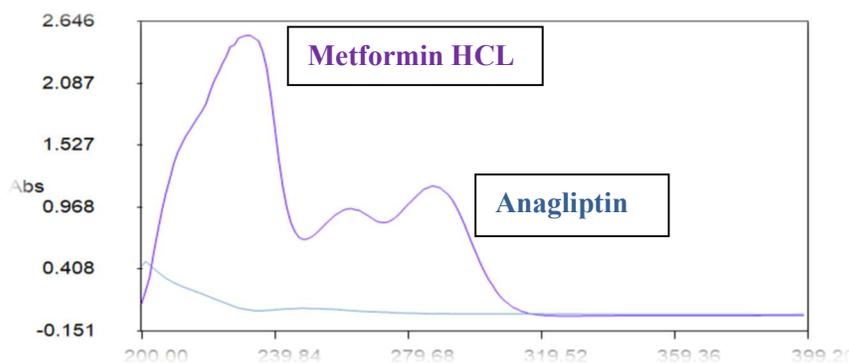


Figure 3: Selection of analytical wavelength

Selection of mobile phase

The potassium dihydrogen phosphate was prepared by dissolving accurately weight 6.8gm of potassium dihydrogen phosphate in 1000ml HPLC grade water in a 1L volumetric flask and pH was adjusted to pH 4 with ortho phosphoric acid. The prepared buffer pH was

checked by using pH meter by ultra sonicating for 5 min solution degassed and obtained solution was filtered through 0.45 μ millipore filter and mobile phase is prepared with ratio of buffer (pH 4): methanol (70:30 v/v) (Figure 4).

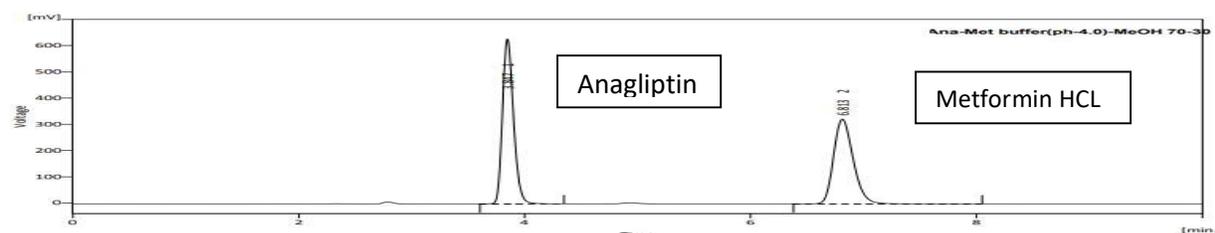


Figure 4: Buffer pH 4: Methanol (70:30V/V)

Standard solution preparation

Preparation of standard stock and working standard stock solution of Anagliptin

Weigh accurately 10mg of Anagliptin transfer 10ml volumetric flask dissolved in acetonitrile and it make up to mark to get 1000 μ g/ml(1000ppm) of Anagliptin standard solution. Pipette out 1ml of above solution transfer 10ml volumetric flask make up to mark with ACN to get 100 μ g/ml (100ppm).

Preparation of standard and working standard stock solution of Metformin HCL

Weighing accurately 10mg of Metformin HCL in 10ml volumetric flask make up to the mark with Acetonitril and sonicated for 10 min. to get 1000 μ g/ml (1000ppm) from this 1000 μ g/ml solution Pipette out 5ml from above solution transfer into 10ml of volumetric flask and make up to with solvent to get 500 μ g/ml (500ppm).

Method validation

The purposed method was validated as per ICH guidelines Q2 (R1) [8]

The method was validated by the different validation parameters such as accuracy, precision, linearity, LOD, LOQ, robustness, ruggedness.

Linearity and Range

Linearity is expressed in term of correlation co-efficient of linearity regression analysis.

Calibration curve from working solution containing 500 μ g/mL MET and 100 μ g/mL ANA aliquotos 0.5, 0.75, 1, 1.25, 1.5mL were transferred in clean and dry 10mL vol. flask respectively and sonicated. The volume was made up to the mark with diluents. This yielded solution of 25, 37.5, 50, 62.5,75 μ g/mL of MET and 5, 7.5, 10, 12.5,15 μ g/mL of ANA respectively. an aliquot(20 μ l) of each solution was injected under the operating chromatographic condition as described earlier calibration curve was prepared by plotting peak areas versus concentration and the regression equation was calculated each response was average of three determination **Figure 5** and **Figure 6** Result for linearity are shown **Table 2**.

Precision

Repeatability

The repeatability data of peak area measurement for Metformin HCL and Anagliptin based on six measurements of same solution. The mean area observed 4275.960 for Metformin HCL and 3930.223 for anagliptin with %RSD 0.56 for both. The repeatability shows that the % RSD values observed within the acceptance limit of NMT 2% results shown in **Table 3**.

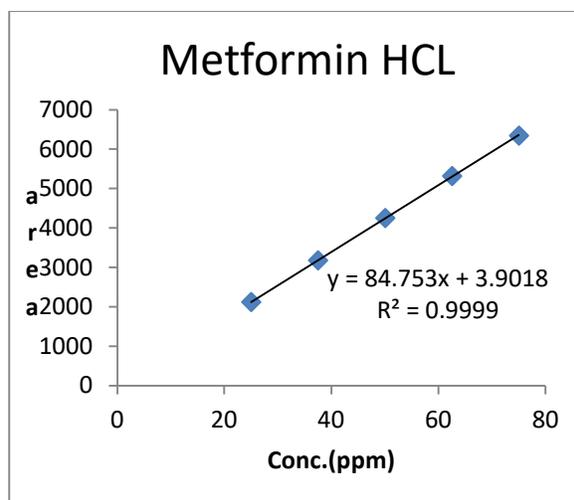


Figure 5: Calibration curve of Metformin HCL

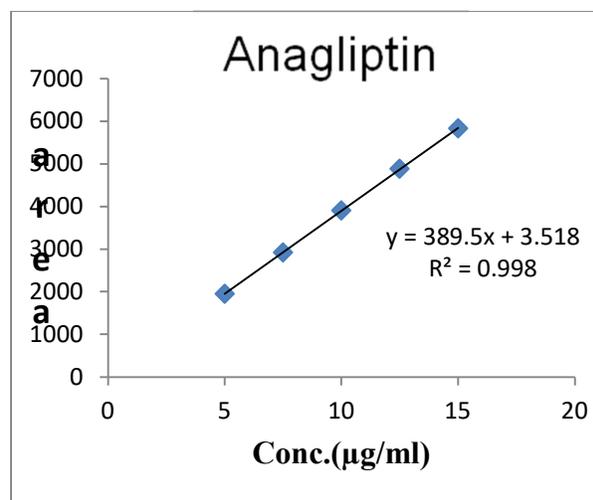


Figure 6: Calibration curve of Anagliptin

Table 2: Linearity Data for Anagliptin and Metformin HCL

S. No.	Linearity Level	Concentration (µg/ml)		Area ± SD(n=6)	
		Metformin HCL	Anagliptin	Metformin HCL	Anagliptin
1	50%	25	5	2119.417±6.651	1948.216±1.10
2	75%	37.5	7.5	3176.159±13.28	2919.663±3.54
3	100%	50	10	4249.030±19.33	3905.805±7.22
4	125%	62.5	12.5	5317.227±21.60	4887.495±9.84
5	150%	75	15	6345.952±28.81	5833.596±16.15

Table 3: Repeatability Data for Anagliptin and Metformin HCL

Metformin HCL					Anagliptin				
S No.	Conc. (µg/ml)	Area	Mean ± S. D (n=6)	% RSD	Sr no.	Conc. (µg/ml)	Area	Mean ± S. D (n=6)	% RSD
1	50	4231.529	4275.960±24.098	0.564	1	10	3889.629	3930.223 ±22.069	0.562
2		4280.747			2		3934.434		
3		4293.061			3		3946.101		
4		4300.181			4		3952.473		
5		4278.728			5		3932.578		
6		4271.513			6		3926.123		

Interday and intraday precision

The %RSD for Intra-day was found to be 0.170-0.595% for MET and 0.167-0.593% for ANA. The %RSD for Inter-day was found to be 0.450-0.801% for MET and 0.448-0.798% for ANA. The precision shows that the %RSD values observed within the acceptance limit of NMT 2.0% (Table 4 and 5).

Accuracy

Accuracy was determined by calculating recovery of ANA and MET by the standard addition method known amounts of standard solution to pre-analyzed samples. Each solution was injected in triplet and recoveries were in between 100.1-101.2% for MET and 100.2-100.9% for ANA which is in accordance with ICH guideline which prove method to be accurate (Table 6).

Table 4: Intraday precision data for Estimation of Anagliptin and Metformin HCL

S. No.	Metformin HCL			Anagliptin		
	Conc. (µg/ml)	Area Mean ± S.D. (n=3)	% R.S.D	Conc. (µg/ml)	Area Mean ± S.D. (n=3)	% R.S.D
1	25	2130.244 ± 3.630	0.170	5	1957.936 ± 3.270	0.167
2	50	4262.763 ± 25.35	0.595	10	3918.571 ± 23.24	0.593
3	75	6311.503 ± 31.032	0.492	15	5802.795 ± 28.28	0.487

Table 5: Interday precision data for Estimation of Anagliptin and Metformin HCL

S. No.	Metformin HCL			Anagliptin		
	Conc. (µg/ml)	Area Mean ± S.D. (n=3)	% R.S.D	Conc. (µg/ml)	Area Mean ± S.D. (n=3)	% R.S.D
1	25	2146.334 ± 9.65	0.450	5	1972.529 ± 8.84	0.448
2	50	4309.597 ± 34.53	0.801	10	3960.859 ± 31.16	0.798
3	75	6427.345 ± 41.06	0.639	15	5907.855 ± 37.44	0.634

Table 6: Accuracy data of ANA and MET

Spike level	Amount of test solution (µg/ml)		Amount of std.add (µg/ml)		Amount recovered ±SD		% recovered		% RSD	
	MET	ANA	MET	ANA	MET	ANA	MET	ANA	MET	ANA
80%	50	10	40	8	40.27	8.01	100.1	100.2	0.435	0.425
100%	50	10	50	10	50.35	10.09	101.2	100.9	0.391	0.385
120%	50	10	60	12	60.46	12.09	100.8	100.4	0.626	0.614

*Average of three determination

LOD and LOQ

The limit of Detection (LOD) and limit of quantitation (LOQ) were obtained by calculating using the standard formula as per the ICH guidelines, $LOD=3.3(\sigma/S)$, $LOQ=10(\sigma/S)$ Where σ is Standard deviation of the response and S is slope of the calibration curve. The LOD and LOQ for the

drugs were estimated using the linearity data (Figure 5 and 6) repeated calibration curve 5 time and calculated deviation of the intercepts. The LOD for ANA was observed 0.069µg/mL and for MET 1.56µg/mL The LOQ for ANA was observed 0.209 µg/mL and for MET 4.716µg/mL the results were show in Table 7.

Table 7: LOD and LOQ data of ANA and MET

LOD		LOQ	
METFORMIN HCL	ANAGLIPTIN	METFORMIN HCL	ANAGLIPTIN
1.56 µg/mL	0.069 µg/mL	4.716 µg/mL	0.209 µg/mL

Robustness

The robustness study was performed to evaluate the influence of small but deliberate variation in the chromatographic condition. The robustness was checked by changing three small changes.

- Change flow rate by 10%. (i.e. 0.8ml/min and 1.2 ml/min)
- Change in mobile phase by 0.2 unit
- Change in pH by 0.2unit (i.e. pH 4.2. and pH 3.8)

After each sample solution was injected and peak area, tailing factor and retention time

were checked. The results are shown in the **Table 8**. Variation seen was within the acceptable range respect to peak asymmetry

and theoretical plates, so the method was found to be robust.

Table 8: Robust data for Anagliptin and Metformin HCL

METFORMIN HCL						
S. No.	Area at Flow rate (+0.2ml/min)	Area at Flow rate (0.2ml/min)	Area at pH (+0.2)	Area at pH (-0.2)	Area at Mobile phase (+2)	Area At Mobile phase (-2)
1	4128.035	4317.878	4244.493	4266.631	4337.648	4376.824
2	4148.470	4332.565	4265.786	4276.443	4345.126	4391.711
3	4138.681	4325.221	4251.423	4283.571	4367.524	4376.774
% R.S.D	0.247	0.170	0.255	0.199	0.357	0.196
ANAGLIPTIN						
S. No.	Area at Flow rate (+0.2ml/min)	Area At Flow rate (-0.2ml/min)	Area at pH (+0.2)	Area at pH (-0.2)	Area at Mobile phase (+2)	Area At Mobile phase (-2)
1	3796.035	3967.548	3901.288	3920.826	3986.364	4022.647
2	3814.734	3980.774	3920.506	3930.116	3993.147	4036.049
3	3805.879	3974.117	3907.570	3936.578	4013.257	4022.601
% R.S.D	0.246	0.166	0.251	0.202	0.192	0.350

System suitability

These tests are used to verify that the resolution and repeatability of the system were adequate for the analysis intended. The parameters used in this test were the

chromatographic peak resolution (>2), HETP (>2000), tailing factor (<1.8). The repeatability of these parameters was checked by injecting six solutions of ANA and MET. The results were show in **Table 9**.

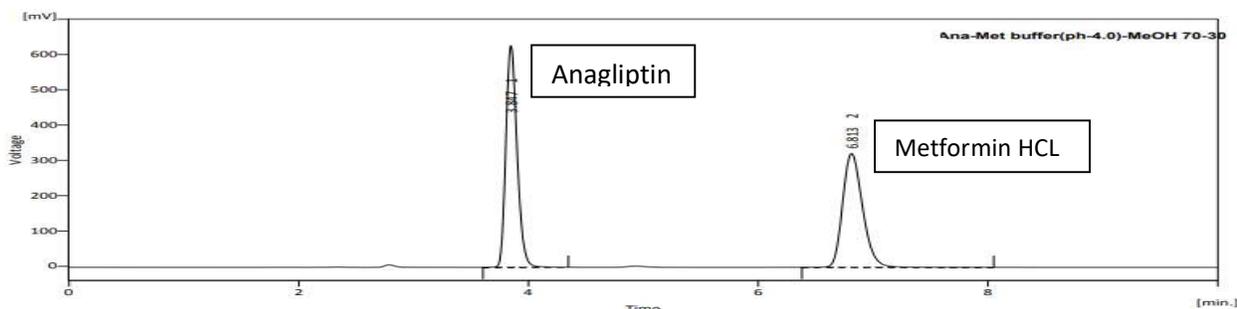


Figure 7: Optimized Chromatogram of Anagliptin and Metformin HCL

Table 9: Observed value of system suitability parameter

S. No.	Parameters	Anagliptin	Metformin HCL
1	Retention Time (min)	3.847	6.813
2	Theoretical plate(HETP)	6775	7381
3	Tailing factor	1.360	1.364
4	Resolution	11.769	

Specificity

Specificity was established by studying the resolution factor of drug peaks from the nearest resolving peak and among all other peaks. The specificity of method was

evaluated by comparison between chromatogram of standard and test solution. There should be absence of any interfering peak with analyze peak (**Figure 8, 9 and 10**).

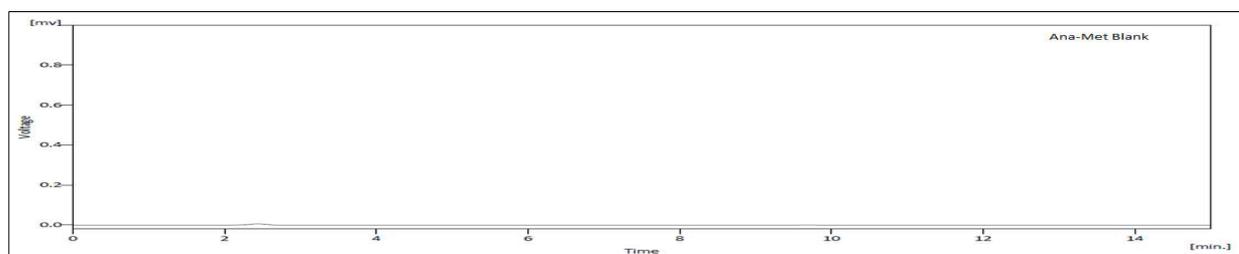


Figure 8: Chromatogram of Anagliptin and Metformin HCL Blank

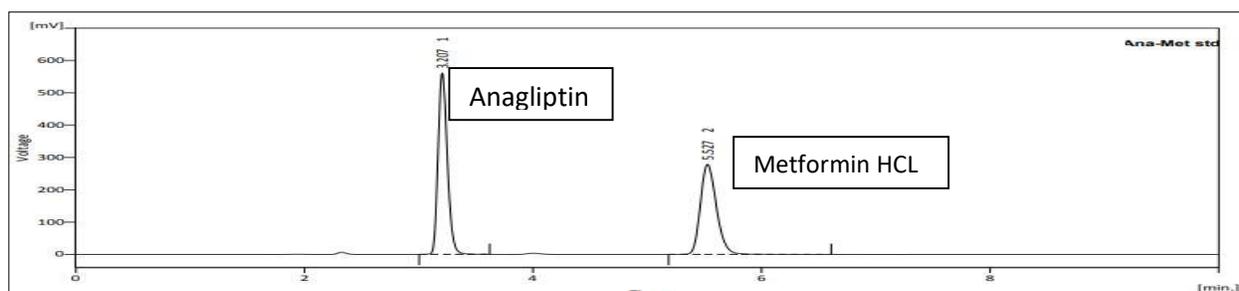


Figure 9: Chromatogram of Anagliptin & Metformin HCL Standard

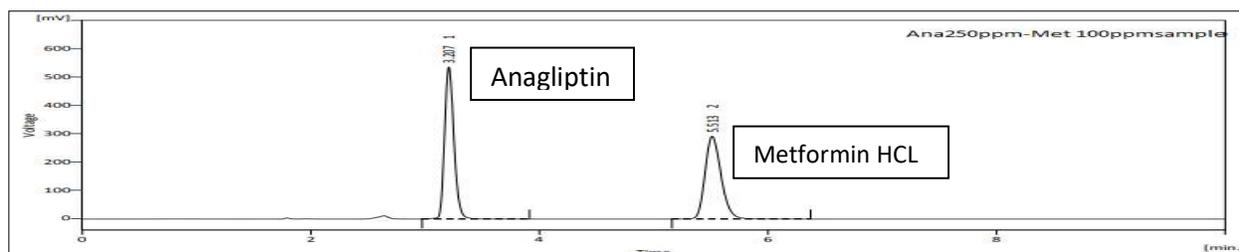


Figure 10: Chromatogram of Anagliptin & Metformin HCL Sample

Analysis of marketed formulation

An aliquot of 20 μ L from sample solution was injected under chromatographic condition and peak area measured and % assay was

calculated from regression equation. Response was average of six determinations. The results are shown in **Table 10**.

Table 10: Analysis of marketed tablet formulation

Drug name	Labeled (mg)	% Label claimed (% Assay* \pm SD) (n=6)	%RSD
ANA	100	101.374 \pm 0.176	0.173
MET	500	101.324 \pm 0.180	0.178

*Average of six determinations

Forced degradation studies

Forced degradation study was intended to ensure the effective separation of ANA and MET and their potential degradation products which are generated under different condition as like acid hydrolysis, alkali hydrolysis, oxidative degradation, photolytic and thermal degradation.

Acid hydrolysis

Individually and combination 50mg and 10mg accurately weighed amount of MET and ANA

were transferred in to 10mL vol. flask. Dissolve with 5mL of ACN and dilute up to with 0.1N HCL (5000 μ g/ml and 1000 μ g/ml).and it was kept at room temperature for 4 hr. from this solution.1ml was taken and transferred into 10ml vol.flask and neutralized with 0.1 N NaOH and diluted up to with mobile phase(500ppm and100ppm).show in **Figure 11**.

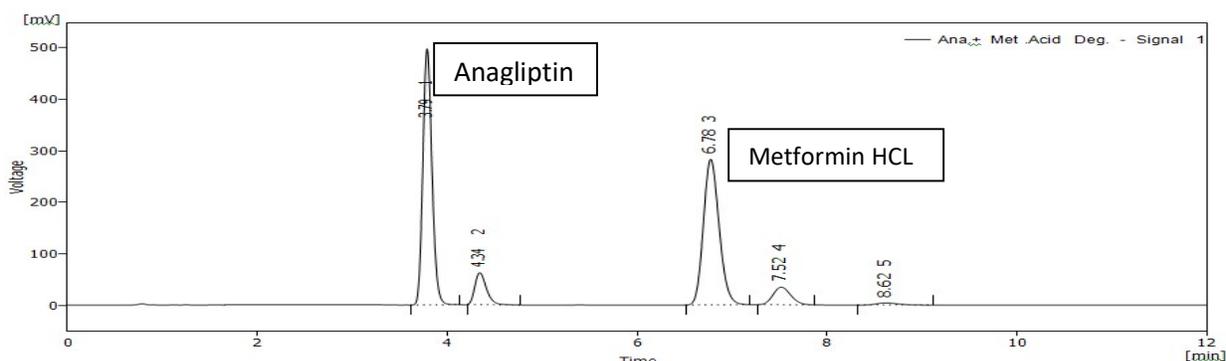


Figure 11: Chromatogram of Acid Hydrolysis of mixture of ANA and MET at 220nm

Alkali Hydrolysis

Individually and combination 50mg and 10mg accurately weighed amount of MET and ANA were transferred in to 10mL vol. flask. Dissolve with 5mL of ACN and dilute up to with 0.1N NaOH (5000 μ g/ml and 1000

μ g/ml).and it was kept at R.T. for 4 hr. from this solution.1ml was taken and transferred into 10ml vol. flask and neutralized with 0.1 N HCL and diluted up to with mobile phase (500ppm and100ppm). Show in **Figure 12**.

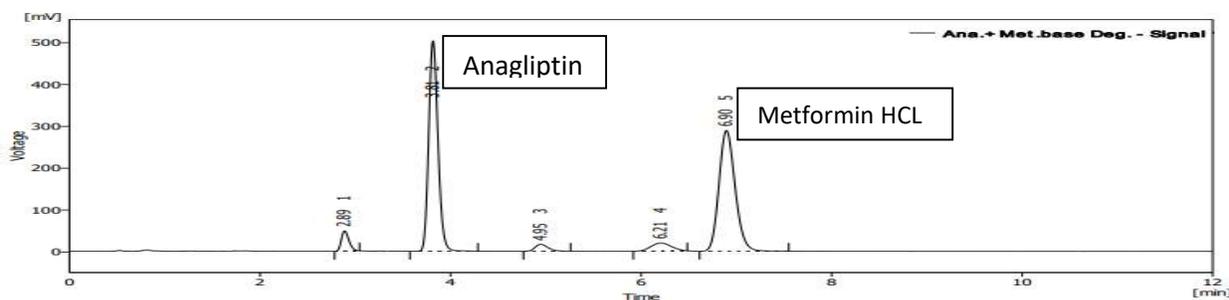


Figure 12: Chromatogram of Alkali Hydrolysis of mixture of ANA and MET at 220nm

Oxidative Hydrolysis (3% H₂O₂)

Individually and combination 50mg and 10mg accurately weighed amount of MET and ANA were transferred in to 10mL vol. flask. Dissolve with 5mL of ACN and dilute up to with 3% H₂O₂ (5000µg/ml and 1000

µg/ml).and it was kept at R.T. for 8 hr. from this solution.1ml was taken and transferred into 10ml vol.flask and diluted up to with mobile phase(500ppm and100ppm). Show in **Figure 13**.

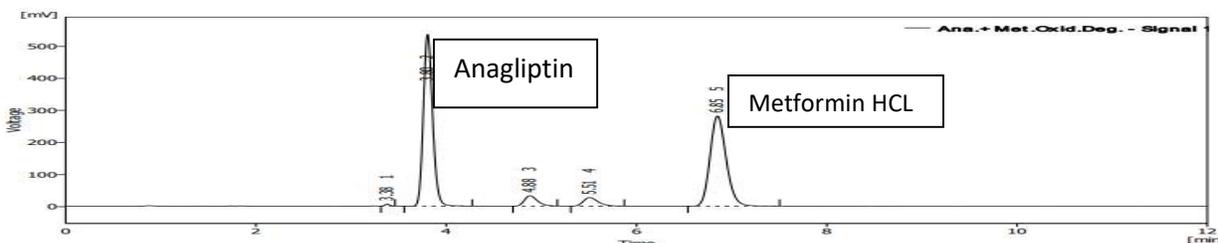


Figure 13: Chromatogram of Oxidative Hydrolysis of mixture of ANA and MET at 220nm

Thermal degradation

Individually and combination 50mg and 10mg accurately weighed amount of MET and ANA were transferred in to 10mL vol. flask. Dissolve and make up to with ACN

(5000µg/ml and 1000 µg/ml).and it was kept at 80 °C. For 12 hr from this solution 1ml was taken and transferred into 10ml vol.flask and diluted up to with mobile phase (500ppm and100ppm). Show in **Figure 14**.

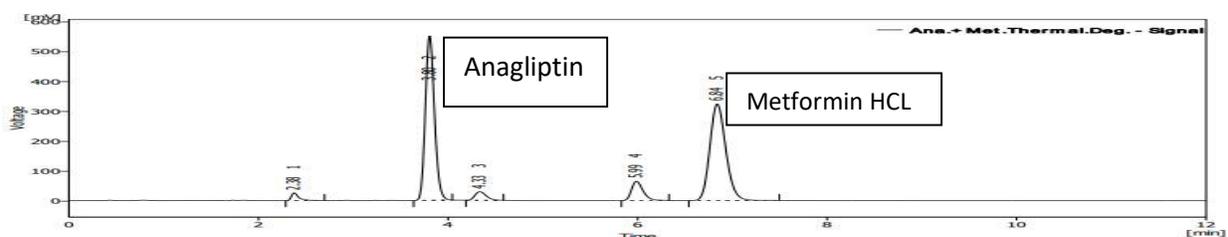


Figure 14: Chromatogram of thermal degradation of mixture of ANA and MET at 220nm

Photo stability

Individually and combination 50mg and 10mg accurately weighed amount of MET and ANA were transferred in to Petri dish and it was kept in UV chamber 254nm for 24 hr. After it were dissolved and make up to with ACN

(5000µg/ml and 1000 µg/ml). From this solution 1ml was taken and transferred into 10ml vol.flask and diluted up to with mobile phase. This generated to 500ppm and100ppm. Show in **Figure 15**.

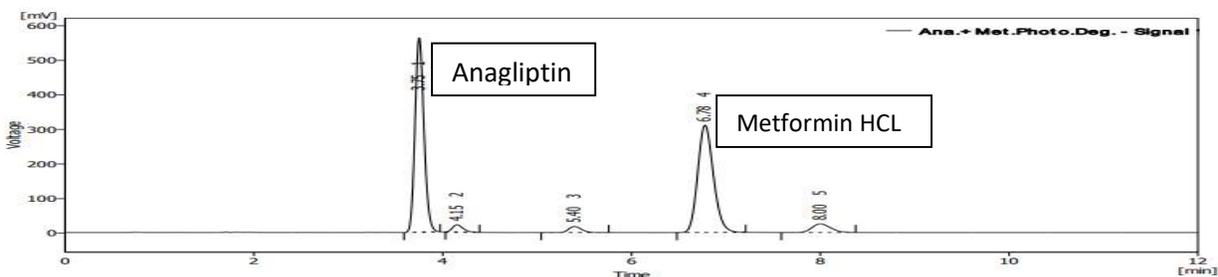


Figure15: Chromatogram of Photolytic degradation of mixture of ANA and MET at 220nm

RESULT AND DISCUSSION

RP-HPLC method was developed for simultaneous estimation of anagliptin and metformin HCL using KROMASIL C₁₈ column and Methanol: Buffer pH 4 in volume 30:70 v/v mobile phase. RP-HPLC method was validated as per ICH guidelines it was found to be linear within the range correlation co-efficient for calibration curve of anagliptin and metformin HCL was found to be NLT 0.999 respectively. The accuracy of 80%, 100%, 120% levels. The percentage recovery for metformin HCL was 100.1-101.2% and 100.2-100.9% for anagliptin. The LOD for metformin HCL was found to be 1.56 μ g/ml also for anagliptin was found to be 0.069 μ g/ml and the LOQ of metformin HCL was 4.716 μ g/ml and for anagliptin

0.209 μ g/ml as that indicating the sensitivity of method (Table 6). The developed method was found to be precise as the %RSD value for intra-day and inter-day were found to be less than 2% and also the method was robust indicated by the %RSD value of less than 5%. The sample recoveries from all formulation agreed with their respective label claims, which suggested non-interference of formulation excipients in the estimation. The developed method was successfully separated Anagliptin and Metformin HCL from its degradation product formed under stress condition. Anagliptin and Metformin HCL degradant significant under acidic, basic and oxidative condition. Results were shown in Table 11 and 12.

Table 11: Summary for Forced Degradation Studies of ANA and MET

S. No.	Stress condition	MET				ANA			
		STD.		Sample		STD.		Sample	
		Area	% degradation	Area	% degradation	Area	% degradation	Area	% degradation
1	Acidic	3316.59	15.99	3313.031	16.08	3321.42	13.70	3253.51	15.47
2	Basic	3454.84	12.48	3399.112	13.90	3457.10	10.18	3401.89	11.61
3	Oxidation	3593.06	8.98	3617.595	8.36	3598.69	6.50	3298.47	14.30
4	Photolytic	3667.91	7.09	3711.553	5.98	3549.23	7.78	3585.56	6.84
5	Thermal	3822.95	3.16	3691.383	6.49	3698.81	3.90	3788.62	1.56

Table 12: Summary of validation parameters

S. No.	Parameters	Metformin HCL	Anagliptin
1.	Specificity	Specific	
2.	Linearity and Range	25-75 µg/ml	5-15 µg/ml
3.	Regression equation	$y = 84.75x + 3.901$	$y = 389.5x + 3.518$
4.	Correlation Co-efficient (r^2)	0.999	0.998
5.	Precision (%RSD)	Intraday	0.170-0.595
		Interday	0.450-0.801
6.	Accuracy	Percentage recovery for Metformin HCL was 100.1-101.2%. and the Percentage recovery for Anagliptin was 100.2-100.9%	Accurate
7.	Limit of Detection(LOD)	1.56	0.069
8.	Limit of Quantification(LOQ)	4.716	0.209
9.	Robustness (% RSD)	The system suitability parameters were found well within the acceptance criteria as per system suitability	

CONCLUSION

A stability indicating RP-HPLC method has been developed and validated for the determination of ANA and MET in its tablet dosage form. The method was found to be specific as there was no interference of any co-eluting degradation product after stress degradation study. The degraded products are well resolved with indicating the methods can also be useful for determination of degraded products. The proposed methods are found to be simple, accurate, precise and robust. Hence, it can be used successfully for stability indicating assay method for simultaneous estimation of ANA and MET in its tablet dosage form.

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